

118TH CONGRESS  
1ST SESSION

# H. R. 830

To amend title XXVII of the Public Health Service Act to apply additional payments, discounts, and other financial assistance towards the cost-sharing requirements of health insurance plans, and for other purposes.

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## IN THE HOUSE OF REPRESENTATIVES

FEBRUARY 6, 2023

Mr. CARTER of Georgia (for himself, Ms. BARRAGÁN, Mrs. MILLER-MEEKS, Ms. DEGETTE, Mr. FITZPATRICK, Mrs. WATSON COLEMAN, and Ms. CLARKE of New York) introduced the following bill; which was referred to the Committee on Energy and Commerce

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## A BILL

To amend title XXVII of the Public Health Service Act to apply additional payments, discounts, and other financial assistance towards the cost-sharing requirements of health insurance plans, and for other purposes.

1 *Be it enacted by the Senate and House of Representa-*  
2 *tives of the United States of America in Congress assembled,*

3 **SECTION 1. SHORT TITLE.**

4 This Act may be cited as the “Help Ensure Lower  
5 Patient Copays Act” or the “HELP Copays Act”.

1 **SEC. 2. APPLICATION OF ADDITIONAL PAYMENTS, DIS-**  
2 **COUNTS, AND OTHER FINANCIAL ASSIST-**  
3 **ANCE TOWARD COST-SHARING REQUIRE-**  
4 **MENTS.**

5 (a) APPLICATION TOWARD COST-SHARING REQUIRE-  
6 MENTS.—Section 2715(g)(1) of the Public Health Service  
7 Act (42 U.S.C. 300gg–15(g)(1)) is amended by adding at  
8 the end the following: “In developing the standards for  
9 defining the terms ‘deductible’, ‘co-insurance’, ‘co-pay-  
10 ment’, and ‘out-of-pocket limit’ (as described in paragraph  
11 (2)), such standards shall provide that such terms include  
12 amounts paid by, or on behalf of, an individual enrolled  
13 in a group health plan or group or individual health insur-  
14 ance coverage, including third-party payments, financial  
15 assistance, discounts, product vouchers, and other reduc-  
16 tions in out-of-pocket expenses and that such amounts  
17 shall be counted toward such deductible, co-insurance, co-  
18 payment, or limit, respectively.”

19 (b) CONFORMING AMENDMENTS.—

20 (1) PPACA.—Section 1302(c)(3) of the Patient  
21 Protection and Affordable Care Act (42 U.S.C.  
22 18022(c)(3)) is amended by adding at the end the  
23 following new subparagraph:

24 “(C) APPLICATION OF TERMS.—For pur-  
25 poses of subparagraph (A), the terms ‘deduct-  
26 ible’, ‘coinsurance’, ‘copayment’, or ‘similar

1 charge' and any other expenditure described in  
2 clause (ii) of such subparagraph shall include  
3 amounts paid by, or on behalf of, an individual  
4 enrolled in a group health plan or group or in-  
5 dividual health insurance coverage, including  
6 third-party payments, financial assistance, dis-  
7 counts, product vouchers, and other reductions  
8 in out-of-pocket expenses and such amounts  
9 shall be counted toward such deductible, coin-  
10 surance, copayment, charge, or other expendi-  
11 ture, respectively.”.

12 (2) PHSA.—Section 2707(b) of the Public  
13 Health Service Act (42 U.S.C. 300gg–6(b)) is  
14 amended by adding at the end the following new  
15 sentence: “For purposes of the previous sentence,  
16 such limitation shall be applied as if the reference to  
17 ‘essential health benefits’ in section 1302(c)(3) of  
18 the Patient Protection and Affordable Care Act were  
19 a reference to ‘any item or service covered under the  
20 plan included within a category of essential health  
21 benefits as described in (b)(1) of such section’.”.

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