

116TH CONGRESS  
1ST SESSION

# H. R. 3215

To provide Medicaid assistance to individuals and families affected by a disaster or emergency, and for other purposes.

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## IN THE HOUSE OF REPRESENTATIVES

JUNE 11, 2019

Ms. SHALALA (for herself, Mr. LANGEVIN, Ms. NORTON, and Miss GONZÁLEZ-COLÓN of Puerto Rico) introduced the following bill; which was referred to the Committee on Energy and Commerce, and in addition to the Committee on Ways and Means, for a period to be subsequently determined by the Speaker, in each case for consideration of such provisions as fall within the jurisdiction of the committee concerned

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## A BILL

To provide Medicaid assistance to individuals and families affected by a disaster or emergency, 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 “Disaster Relief Med-  
5 icaid Act”.

6 **SEC. 2. MEDICAID RELIEF FOR DISASTER SURVIVORS.**

7 Title XIX of the Social Security Act (42 U.S.C. 1396  
8 et seq.) is amended—

1 (1) in section 1902(a)—

2 (A) in paragraph (85), by striking “; and”  
3 and inserting a semicolon;

4 (B) in paragraph (86), by striking the pe-  
5 riod at the end and inserting “; and”; and

6 (C) by inserting after paragraph (86) the  
7 following new paragraph:

8 “(87) beginning January 1, 2020, provide for  
9 making medical assistance available to relief-eligible  
10 survivors of disasters during relief coverage periods  
11 in accordance with section 1947.”; and

12 (2) by adding at the end the following new sec-  
13 tion:

14 **“SEC. 1947. DISASTER RELIEF MEDICAID FOR SURVIVORS**  
15 **OF MAJOR DISASTERS.**

16 “(a) IN GENERAL.—Notwithstanding any other pro-  
17 vision of this title, a State plan shall provide medical as-  
18 sistance to a relief-eligible survivor of a disaster in accord-  
19 ance with this section.

20 “(b) DEFINITIONS.—In this section:

21 “(1) DISASTER.—The term ‘disaster’ means a  
22 major disaster—

23 “(A) that is declared on or after January  
24 1, 2020, by the President in accordance with  
25 section 401 of the Robert T. Stafford Disaster

1 Relief and Emergency Assistance Act (42  
2 U.S.C. 5170); and

3 “(B) which the President has determined  
4 warrants individual and public assistance from  
5 the Federal Government under such Act.

6 “(2) DIRECT IMPACT AREA.—

7 “(A) IN GENERAL.—The term ‘direct im-  
8 pact area’ means, with respect to a disaster, the  
9 geographic area in which the disaster exists.

10 “(B) WEBSITE POSTING OF DIRECT IM-  
11 PACT AREAS.—As soon as practicable after a  
12 disaster is declared (as described in paragraph  
13 (1)(A)), the Secretary shall post on the website  
14 of the Centers for Medicare & Medicaid Serv-  
15 ices a list of the areas identified as the direct  
16 impact areas of the disaster.

17 “(3) HOME STATE.—The term ‘home State’  
18 means, with respect to a survivor of a disaster, the  
19 State in which the survivor was a resident during  
20 the 7-day period preceding the date on which the  
21 disaster is declared (as described in paragraph  
22 (1)(A)).

23 “(4) RELIEF COVERAGE PERIOD.—The term  
24 ‘relief coverage period’ means, with respect to a dis-  
25 aster, the period that begins on the date the disaster

1 is declared (as described in paragraph (1)(A)) and  
2 ends on the day that is 2 years after such date.

3 “(5) RELIEF-ELIGIBLE SURVIVOR.—

4 “(A) IN GENERAL.—The term ‘relief-eli-  
5 ble survivor’ means an individual who is a sur-  
6 vivor of a disaster whose family income does not  
7 exceed the higher of—

8 “(i) 133 percent (or, in the case of a  
9 survivor who is a pregnant woman, a child,  
10 or a recipient of benefits under title II on  
11 the basis of a disability, 200 percent) of  
12 the poverty line; or

13 “(ii) the income eligibility standard  
14 that would otherwise apply to the survivor  
15 under the State plan or waiver of the sur-  
16 vivor’s host State.

17 “(B) DISREGARD OF UNEMPLOYMENT IN-  
18 COME.—For purposes of this section, and not-  
19 withstanding section 1902(e)(14)(B), the in-  
20 come of a survivor of a disaster shall not in-  
21 clude any amount received during the relief cov-  
22 erage period of the disaster under a law of the  
23 United States or a State which is in the nature  
24 of unemployment compensation.

25 “(6) SURVIVOR.—

1           “(A) IN GENERAL.—The term ‘survivor’  
2 means, with respect to a disaster, an individual  
3 who is described in subparagraph (B) or (C).

4           “(B) RESIDENTS AND EVACUEES OF DI-  
5 RECT IMPACT AREAS.—An individual described  
6 in this subparagraph is an individual who, on  
7 any day during the 7-day period preceding the  
8 date on which a disaster is declared (as de-  
9 scribed in paragraph (1)(A)), has a primary  
10 residence in the disaster’s direct impact area.

11           “(C) INDIVIDUALS WHO LOST EMPLOY-  
12 MENT.—An individual described in this sub-  
13 paragraph is an individual—

14                   “(i) whose worksite, on any day dur-  
15 ing the 7-day period preceding the date on  
16 which a disaster is declared (as so de-  
17 scribed), was located in the disaster’s di-  
18 rect impact area;

19                   “(ii) who was employed by an em-  
20 ployer that—

21                           “(I) conducted an active trade or  
22 business in such area on any day dur-  
23 ing such 7-day period; and

24                           “(II) was unable to operate such  
25 trade or business as a result of the

1 disaster on any day during the disas-  
2 ter's relief coverage period; and

3 “(iii) whose employment with such  
4 employer was terminated.

5 “(D) TREATMENT OF HOMELESS PER-  
6 SONS.—For purposes of subparagraph (B), in  
7 the case of an individual who was homeless on  
8 any day during the 7-day period preceding the  
9 date on which a disaster is declared (as so de-  
10 scribed), the individual's ‘residence’ during such  
11 period shall be determined as it would otherwise  
12 be determined for purposes of this title.

13 “(E) EFFECT OF CONCURRENT ELIGI-  
14 BILITY FOR MEDICAID.—An individual's eligi-  
15 bility for medical assistance under a State plan  
16 (or waiver of such plan) on a basis other than  
17 under this section shall not prevent the indi-  
18 vidual from being treated as a survivor under  
19 this section, and the rights afforded to an indi-  
20 vidual who is eligible for or enrolled under a  
21 State plan (or waiver) shall not be affected by  
22 the individual's receipt of medical assistance as  
23 a relief-eligible survivor of a disaster in accord-  
24 ance with this section.

25 “(c) ELIGIBILITY.—

1 “(1) SIMPLIFIED APPLICATION.—

2 “(A) IN GENERAL.—For purposes of deter-  
3 mining eligibility for medical assistance under  
4 this section, each State shall use a simplified,  
5 1-page application form (as developed by the  
6 Secretary in consultation with the National As-  
7 sociation of State Medicaid Directors), which  
8 shall—

9 “(i) require an applicant for medical  
10 assistance in accordance with this section  
11 as a survivor of a disaster to—

12 “(I) provide the applicant’s ex-  
13 pected address for the duration of the  
14 relief coverage period of the disaster;  
15 and

16 “(II) agree to update the infor-  
17 mation described in subclause (I) if it  
18 changes during such period;

19 “(ii) provide notice of the penalties for  
20 making a fraudulent application described  
21 in subsection (h);

22 “(iii) require the applicant to assign  
23 to the State any rights of the applicant (or  
24 any other individual who is a relief-eligible  
25 survivor and on whose behalf the applicant

1 has the legal authority to execute an as-  
2 signment of such rights) in accordance  
3 with the requirements of section 1912;

4 “(iv) require the applicant to list any  
5 health insurance coverage in which the ap-  
6 plicant was enrolled immediately prior to  
7 submitting the application for medical as-  
8 sistance under this section; and

9 “(v) require the applicant to self-at-  
10 test that the applicant—

11 “(I) is a relief-eligible survivor of  
12 the disaster; and

13 “(II) if applicable, requires home  
14 and community-based services.

15 “(B) NO DOCUMENTATION REQUIRE-  
16 MENT.—A State shall not require an applicant  
17 for medical assistance as a survivor of a dis-  
18 aster under this section to provide any docu-  
19 mentation or other evidence—

20 “(i) of the applicant’s status as a re-  
21 lief-eligible survivor; and

22 “(ii) if applicable, that the applicant  
23 requires home and community-based serv-  
24 ices.



1           “(C) PRESUMPTIVE ELIGIBILITY.—If an  
2 applicant submits a completed application to a  
3 provider or facility described in section  
4 1902(a)(55) (or any other provider or facility  
5 participating in the State plan or under a waiv-  
6 er of such plan that is qualified to make pre-  
7 sumptive eligibility determinations under such  
8 plan or waiver) and it appears to the provider  
9 or facility that the applicant is a relief-eligible  
10 survivor of a disaster who is eligible for medical  
11 assistance under the plan based on the informa-  
12 tion in the application, the applicant will be  
13 deemed to be a relief-eligible survivor for med-  
14 ical assistance under such plan in accordance  
15 with this section.

16           “(D) CONTINUOUS ELIGIBILITY.—An ap-  
17 plicant who is determined to be a relief-eligible  
18 survivor of a disaster shall be eligible for med-  
19 ical assistance under this section, without the  
20 need for any redetermination of eligibility, for  
21 the duration of the relief coverage period of the  
22 disaster.

23           “(E) TIMELY PROCESSING OF APPLICA-  
24 TIONS.—Each State shall establish such proc-  
25 esses as are necessary to ensure that applica-

1           tions for medical assistance under this section  
2           are processed in a timely manner.

3           “(2) ISSUANCE OF DISASTER RELIEF MEDICAID  
4           ELIGIBILITY CARD.—A State shall issue a disaster  
5           relief Medicaid eligibility card to each applicant who  
6           is determined to be a relief-eligible survivor of a dis-  
7           aster and eligible for medical assistance under this  
8           section, which shall be valid for the duration of the  
9           relief coverage period of the disaster.

10           “(3) VERIFICATION OF STATUS AS A RELIEF-  
11           ELIGIBLE SURVIVOR.—

12           “(A) IN GENERAL.—The State shall make  
13           a good faith effort to verify the status of an in-  
14           dividual who is enrolled in the State plan as a  
15           relief-eligible survivor of a disaster in accord-  
16           ance with this section. Such effort shall not  
17           delay the determination of the eligibility of the  
18           individual for medical assistance under this sec-  
19           tion.

20           “(B) EVIDENCE OF VERIFICATION.—A  
21           State may satisfy the verification requirement  
22           under subparagraph (A) with respect to an in-  
23           dividual by showing that the State obtained in-  
24           formation from the Social Security Administra-  
25           tion, the Internal Revenue Service, or, if appli-

1 cable, the State Medicaid agency of the home  
2 State of the individual.

3 “(4) DETERMINATION BY EXPRESS LANE AGEN-  
4 CY.—Any determination or redetermination of eligi-  
5 bility or verification of status made under this sec-  
6 tion shall be made by an Express Lane agency (as  
7 defined in section 1902(e)(13)(F)).

8 “(d) TERMINATION OF ELIGIBILITY.—

9 “(1) IN GENERAL.—Except as provided in para-  
10 graph (4), no medical assistance shall be provided  
11 under this section to a relief-eligible survivor of a  
12 disaster after the end of the relief coverage period  
13 of the disaster.

14 “(2) NOTICE OF TERMINATION OF ELIGIBILITY;  
15 ASSISTANCE IN APPLYING FOR REGULAR MED-  
16 ICAID.—

17 “(A) IN GENERAL.—No later than 2  
18 months before the end of a relief coverage pe-  
19 riod of a disaster, a State shall provide each re-  
20 lief-eligible survivor of the disaster who is re-  
21 ceiving medical assistance under the State plan  
22 in accordance with this section with written no-  
23 tice that includes—

24 “(i) the date after which, subject to  
25 the exception described in paragraph (4),

1 the survivor will no longer be eligible for  
2 such assistance;

3 “(ii) information regarding eligibility  
4 (other than under this section) for medical  
5 assistance under the State plan (or waiver  
6 of such plan); and

7 “(iii) an application for such assist-  
8 ance and information regarding how to  
9 submit a completed application and how to  
10 obtain assistance with completing such ap-  
11 plication.

12 “(B) ASSISTANCE IN APPLYING FOR MED-  
13 ICAID.—Before the end of the relief coverage  
14 period of a disaster, the State shall—

15 “(i) provide any relief-eligible survivor  
16 of the disaster who is receiving medical as-  
17 sistance under the State plan assistance  
18 with applying for medical assistance under  
19 the State plan (or waiver ) for periods be-  
20 ginning after the end of such relief cov-  
21 erage period; and

22 “(ii) ensure that such assistance is  
23 easily accessible to such survivors.

24 “(3) PRESUMPTIVE ELIGIBILITY PERIOD FOR  
25 PENDING APPLICATIONS.—In the case of a relief-eli-

1       gible survivor of a disaster who, on the date that the  
2       relief coverage period of the disaster ends, has an  
3       application pending for medical assistance under the  
4       State plan (or waiver of such plan) for periods be-  
5       ginning after such relief coverage period, such sur-  
6       vivor shall be deemed to be eligible for medical as-  
7       sistance under such plan or waiver for 60 days after  
8       such date. Medical assistance provided to such an  
9       individual during such 60-day period shall not be  
10      treated as medical assistance provided under this  
11      section and the Federal medical assistance percent-  
12      age described in subsection (f) shall not apply to  
13      amounts expended on such assistance.

14           “(4) PREGNANT WOMEN.—In the case of a re-  
15      lief-eligible survivor of a disaster who, while preg-  
16      nant, receives medical assistance under the State  
17      plan in accordance with this section, such survivor  
18      shall continue to be eligible for such assistance  
19      through the end of the month in which the 60-day  
20      period (beginning on the last day of her pregnancy)  
21      ends, without regard to whether the pregnancy ends  
22      before or after the end of the relief coverage period  
23      of the disaster and without requiring the survivor to  
24      reapply for such assistance.

25           “(e) SCOPE OF COVERAGE.—

1           “(1) IN GENERAL.—A State providing medical  
2 assistance to a relief-eligible survivor of a disaster in  
3 accordance with this section shall provide medical  
4 assistance that is equal in amount and scope to the  
5 medical assistance that would otherwise be made  
6 available to such survivor if the survivor were en-  
7 rolled in the State plan (or waiver of such plan) as  
8 an individual described in clause (i) of section  
9 1902(a)(10)(A), except that, in the case of such a  
10 survivor whose home State is not the State providing  
11 medical assistance to the individual, the State shall  
12 also provide medical assistance for any item or serv-  
13 ice for which medical assistance is available to indi-  
14 viduals described in clause (i) of section  
15 1902(a)(10)(A) under the State plan (or waiver) of  
16 the survivor’s home State.

17           “(2) PROVIDER PAYMENT RATES FOR HOME  
18 STATE SERVICES.—In the case of medical assistance  
19 provided by a State to a relief-eligible survivor of a  
20 disaster in accordance with this section for an item  
21 or service which is not available under the State  
22 plan (or waiver of such plan) but which is available  
23 under the State plan (or waiver) of the survivor’s  
24 home State, the State shall pay the provider of such  
25 item or service at the same rate that the home State

1 would pay for the item or service if it were provided  
2 under the plan or waiver of the home State (or, if  
3 no such payment rate applies under the plan or  
4 waiver of the home State, the usual and customary  
5 prevailing rate for the item or service for the com-  
6 munity in which it is provided).

7 “(3) RETROACTIVE COVERAGE.—

8 “(A) IN GENERAL.—Notwithstanding sec-  
9 tion 1905(a), a State shall provide medical as-  
10 sistance for items and services furnished in the  
11 State beginning with the first day of the relief  
12 coverage period of a disaster to any relief-eli-  
13 gible survivor of the disaster who submits an ap-  
14 plication for such assistance before the deadline  
15 described in subparagraph (B).

16 “(B) APPLICATION DEADLINE.—The dead-  
17 line for a relief-eligible survivor of a disaster to  
18 submit an application for medical assistance in  
19 accordance with this section is the date that is  
20 90 days after the end of the disaster’s relief  
21 coverage period.

22 “(4) CHILDREN BORN TO PREGNANT WOMEN.—

23 In the case of a child born to a relief-eligible sur-  
24 vivor of a disaster who is provided medical assist-  
25 ance in accordance with this section during the relief

1 coverage period of the disaster, the child shall be  
2 treated as having been born to a pregnant woman el-  
3 igible for medical assistance under the State plan (or  
4 waiver of such plan) and shall be eligible for medical  
5 assistance under such plan (or waiver) in accordance  
6 with section 1902(e)(4). Notwithstanding subsection  
7 (g), the Federal medical assistance percentage deter-  
8 mined for a State and fiscal year under section  
9 1905(b) shall apply to medical assistance provided  
10 during the year to a child under the State plan (or  
11 waiver) in accordance with the preceding sentence.

12 “(5) OPTION TO PROVIDE EXTENDED MENTAL  
13 HEALTH AND CARE COORDINATION BENEFITS.—A  
14 State may provide, without regard to any restric-  
15 tions on amount, duration, scope, or comparability,  
16 or other restrictions under this title or the State  
17 plan or waiver of such plan (other than restrictions  
18 applicable to services provided in an institution for  
19 mental diseases), medical assistance to relief-eligible  
20 survivors of a disaster under this section for ex-  
21 tended mental health and care coordination services,  
22 which may include the following:

23 “(A) Screening, assessment, and diagnostic  
24 services (including specialized assessments for  
25 individuals with cognitive impairments).



1           “(B) Coverage for a full range of mental  
2 health medications at the dosages and fre-  
3 quencies prescribed by health professionals for  
4 depression, post-traumatic stress disorder, and  
5 other mental disorders.

6           “(C) Treatment of alcohol and substance  
7 abuse determined to result from circumstances  
8 related to the disaster.

9           “(D) Psychotherapy, rehabilitation and  
10 other treatments administered by psychiatrists,  
11 psychologists, or social workers for conditions  
12 exacerbated by, or resulting from, the disaster.

13           “(E) In-patient mental health care.

14           “(F) Family counseling for families where  
15 a member of the immediate family is a survivor  
16 of the disaster or first responder to the disaster  
17 or includes an individual who has died as a re-  
18 sult of the disaster.

19           “(G) In connection with the provision of  
20 health and long-term care services, arranging  
21 for, (and when necessary, enrollment in waiver  
22 programs or other specialized programs), and  
23 coordination related to, primary and specialty  
24 medical care, which may include personal care

1 services, durable medical equipment and sup-  
2 plies, assistive technology, and transportation.

3 “(6) OPTION TO PROVIDE HOME AND COMMU-  
4 NITY-BASED SERVICES.—

5 “(A) IN GENERAL.—A State may provide  
6 medical assistance under this section for home  
7 and community-based services to a relief-eligible  
8 survivor of a disaster, including any survivor  
9 who is an individual described in subparagraph  
10 (B), who self-attests that the survivor imme-  
11 diately requires such services, without regard to  
12 whether the survivor would require the level of  
13 care provided in a hospital, nursing facility, or  
14 intermediate care facility for the develop-  
15 mentally disabled.

16 “(B) INDIVIDUALS DESCRIBED.—Individ-  
17 uals described in this subparagraph are relief-  
18 eligible survivors of a disaster who—

19 “(i) on any day during the week pre-  
20 ceding the date on which the disaster is de-  
21 clared (as described in subsection  
22 (b)(1)(A))—

23 “(I) had been receiving home and  
24 community-based services in a direct

1 impact area under a waiver under sec-  
2 tion 1115 or section 1915;

3 “(II) had been receiving support  
4 services from a primary family care-  
5 giver who, as a result of the disaster,  
6 is no longer available to provide serv-  
7 ices; or

8 “(III) had been receiving per-  
9 sonal care, home health, or rehabilita-  
10 tive services under a State plan under  
11 this title or under a waiver granted  
12 under sections 1115 or 1915; or

13 “(ii) are disabled (as determined  
14 under the State plan).

15 “(C) WAIVER OF RESTRICTIONS.—With re-  
16 spect to the provision of home and community-  
17 based services under this paragraph, the Sec-  
18 retary—

19 “(i) shall waive any limitations on—

20 “(I) the number of individuals  
21 who may receive home or community-  
22 based services under a waiver de-  
23 scribed in subparagraph (B)(i)(I);

24 “(II) budget neutrality require-  
25 ments applicable to such waiver; and

1                   “(III) populations eligible for  
2                   services under such waiver; and

3                   “(ii) may waive any other restriction  
4                   applicable under such a waiver that would  
5                   prevent a State from providing home and  
6                   community-based services in accordance  
7                   with this paragraph.

8           “(f) STATE REPORTS.—Each State shall submit to  
9 the Secretary an annual report that includes—

10                   “(1) information on how the State is satisfying  
11                   the requirements of subsection (d)(2) (relating to  
12                   providing notice of termination of medical assistance  
13                   under this section and assistance in applying for  
14                   medical assistance other than under this section);

15                   “(2) the number of survivors of a disaster who  
16                   were determined by the State to be relief-eligible  
17                   survivors of a disaster in the preceding year; and

18                   “(3) the number of relief-eligible survivors of a  
19                   disaster who were determined to be eligible for, and  
20                   enrolled in, the State plan (or waiver of such plan)  
21                   or the State child health plan under title XXI (or  
22                   waiver of such plan) other than under this section.

23           “(g) 100 PERCENT FEDERAL MATCHING PAY-  
24 MENTS.—

1           “(1) IN GENERAL.—Notwithstanding section  
2           1905(b), the Federal medical assistance percentage  
3           shall be equal to 100 percent with respect to  
4           amounts expended by a State—

5                   “(A) for medical assistance provided in ac-  
6                   cordance with this section to relief-eligible sur-  
7                   vivors of a disaster during the relief coverage  
8                   period of the disaster;

9                   “(B) that are directly attributable to ad-  
10                  ministrative activities related to the provision of  
11                  medical assistance under this section, including  
12                  costs attributable to obtaining recoveries under  
13                  subsection (h);

14                  “(C) that are directly attributable to pro-  
15                  viding application assistance in accordance with  
16                  subsection (d)(2)(B); and

17                  “(D) for medical assistance provided to re-  
18                  lief-eligible survivors of a disaster after the end  
19                  of the relief coverage period of the disaster in  
20                  accordance with subsection (d)(4).

21           “(2) DISREGARD OF LIMITS ON PAYMENTS TO  
22           TERRITORIES.—The limitations on payment under  
23           subsections (f) and (g) of section 1108 shall not  
24           apply to Federal payments under this title that are  
25           based on the Federal medical assistance percentage

1 described in paragraph (1), and such payments shall  
2 be disregarded in applying such subsections.

3 “(h) PENALTY FOR FRAUDULENT APPLICATIONS.—

4 “(1) INDIVIDUAL LIABLE FOR COSTS.—If a  
5 State, as the result of verification activities con-  
6 ducted by the State or otherwise, determines after a  
7 fair hearing that an individual has knowingly made  
8 a false attestation in an application for medical as-  
9 sistance as a relief-eligible survivor of a disaster  
10 under this section, the State shall, subject to para-  
11 graph (2), seek recovery from the individual for the  
12 full amount of the cost of medical assistance pro-  
13 vided to the individual under this section.

14 “(2) EXCEPTION.—The Secretary shall exempt  
15 a State from the requirement to seek recovery from  
16 an individual under paragraph (1) if the Secretary  
17 determines that it would not be cost-effective for the  
18 State to do so.

19 “(3) REIMBURSEMENT TO THE FEDERAL GOV-  
20 ERNMENT.—Amounts expended by a State for med-  
21 ical assistance provided to an individual under this  
22 section that are subsequently recovered by the State  
23 under this subsection shall be treated as an overpay-  
24 ment under this title to the extent that payments  
25 were made to the State for such amounts.

1 “(i) EXEMPTION FROM ERROR RATE PENALTIES.—  
2 All payments attributable to providing medical assistance  
3 to relief-eligible survivors of disasters in accordance with  
4 this section shall be disregarded for purposes of section  
5 1903(u).”.

6 **SEC. 3. PROMOTING EFFECTIVE AND INNOVATIVE STATE**  
7 **RESPONSES TO INCREASED DEMAND FOR**  
8 **MEDICAL ASSISTANCE FOLLOWING A DIS-**  
9 **ASTER.**

10 (a) GUIDANCE ON INCREASING ACCESS TO PRO-  
11 VIDERS.—Not later than October 1, 2020, the Secretary  
12 of Health and Human Services (in this section referred  
13 to as the “Secretary”) shall issue (and update as the Sec-  
14 retary determines necessary) guidance to State Medicaid  
15 directors on best practices for—

16 (1) expediting the approval of providers under  
17 a State Medicaid plan under title XIX of the Social  
18 Security Act (42 U.S.C. 1396 et seq.), or waiver of  
19 such plan, after a disaster to meet increased demand  
20 for medical assistance under the plan or waiver from  
21 relief-eligible survivors (as defined in section  
22 1947(b)(5) of such Act) of disasters; and

23 (2) using out-of-State providers to provide care  
24 to relief-eligible survivors of a disaster under the  
25 plan or waiver.

1 (b) TECHNICAL ASSISTANCE AND SUPPORT FOR IN-  
2 NOVATIVE STATE STRATEGIES TO RESPOND TO IN-  
3 CREASED DEMAND FOR MEDICAL ASSISTANCE FOL-  
4 LOWING A DISASTERS.—

5 (1) IN GENERAL.—The Secretary shall provide  
6 technical assistance and support to States to develop  
7 or expand infrastructure, strategies, or innovations  
8 (including through State Medicaid demonstration  
9 projects) to provide medical assistance under a State  
10 Medicaid plan under title XIX of the Social Security  
11 Act (42 U.S.C. 1396 et seq.), or a waiver of such  
12 a plan, to relief-eligible survivors (as defined in sec-  
13 tion 1947(b)(5) of such Act) of disasters.

14 (2) REPORT.—Not later than 180 days after  
15 the date of enactment of this Act, the Secretary  
16 shall issue a report to Congress detailing a plan of  
17 action to carry out the requirements of paragraph  
18 (1).

19 (c) HCBS EMERGENCY RESPONSE CORPS GRANT  
20 PROGRAM.—

21 (1) IN GENERAL.—The Secretary shall award  
22 grants under this subsection to States for the pur-  
23 pose of establishing or operating HCBS emergency  
24 response corps that meet the requirements of para-  
25 graph (2) to provide medical assistance for home



1 and community-based services under a State Med-  
2 icaid plan under title XIX of the Social Security Act  
3 (42 U.S.C. 1396 et seq.) to relief-eligible survivors  
4 (as defined in section 1947(b)(5) of such Act) of dis-  
5 asters.

6 (2) HOME AND COMMUNITY-BASED SERVICES  
7 EMERGENCY RESPONSE CORPS.—An HCBS emer-  
8 gency response corps meets the requirements of this  
9 paragraph if it satisfies the following requirements:

10 (A) The corps serves a State with a history  
11 of hosting individuals who are forced to relocate  
12 to the State from another State due to a dis-  
13 aster (as determined by the Secretary).

14 (B) The corps is composed of representa-  
15 tives from each of the following:

16 (i) Voluntary organizations delivering  
17 assistance.

18 (ii) Area agencies on aging (as defined  
19 in section 102 of the Older Americans Act  
20 of 1965 (42 U.S.C. 3002)).

21 (iii) The Medicare program under title  
22 XVIII of the Social Security Act (42  
23 U.S.C. 1395 et seq.).

24 (iv) The State agency responsible for  
25 administering the State Medicaid program

1 under title XIX of the Social Security Act  
2 (42 U.S.C. 1396 et seq.).

3 (v) State agencies serving older adults  
4 and people with disabilities.

5 (vi) Nonprofit service providers.

6 (vii) Other organizations that address  
7 the needs of older adults and people with  
8 disabilities.

9 (C) The corps is led by a representative of  
10 a State or nonprofit agency serving older adults  
11 or people with disabilities.

12 (D) The corps operates under a plan to  
13 meet the acute and long-term services and sup-  
14 port needs of relief-eligible survivors (as defined  
15 in section 1947(b)(5) of the Social Security  
16 Act) of disasters, and is provided with the re-  
17 sources necessary to execute such plan.

18 (3) GRANTS.—

19 (A) LIMITATION.—The Secretary may  
20 award a grant under this subsection to up to 5  
21 States.

22 (B) TERM OF GRANTS.—Grants under this  
23 subsection shall be made for a term of 2 years.

24 (4) AUTHORIZATION.—There are authorized to  
25 be appropriated to carry out this subsection,

1       \$10,000,000 for each of fiscal years 2020 through  
2       2025, to remain available until expended.

3       **SEC. 4. TARGETED MEDICAID RELIEF FOR DIRECT IMPACT**  
4               **AREAS.**

5       (a) 100 PERCENT FEDERAL MATCHING PAYMENTS  
6 FOR MEDICAL ASSISTANCE PROVIDED IN A DIRECT IM-  
7 PACT AREA.—

8               (1) IN GENERAL.—Section 1905 of the Social  
9 Security Act (42 U.S.C. 1396d) is amended—

10                   (A) in subsection (b), by striking “and  
11                   (aa)” and inserting “(aa), and (ff)”; and

12                   (B) by adding at the end the following new  
13 subsection:

14       “(ff) 100 PERCENT FMAP FOR ALL MEDICAL AS-  
15 SISTANCE PROVIDED IN DISASTER DIRECT IMPACT  
16 AREAS.—Notwithstanding subsection (b), the Federal  
17 medical assistance percentage for a State and fiscal year  
18 shall be equal to 100 percent with respect to amounts ex-  
19 pended by the State during the year for medical assistance  
20 for an individual who, at the time the assistance is pro-  
21 vided to the individual, is a resident of a direct impact  
22 area of a disaster during the disaster’s relief coverage pe-  
23 riod (as such terms are defined in section 1947).”.

24               (2) APPLICATION TO CHIP.—Section 2105(a) of  
25 the Social Security Act (42 U.S.C. 1397ee(a)) is

1 amended by adding at the end the following new  
2 paragraph:

3 “(5) 100 PERCENT MATCH FOR ALL CHILD  
4 HEALTH ASSISTANCE PROVIDED IN DISASTER DI-  
5 RECT IMPACT AREAS.—Notwithstanding paragraph  
6 (1), the Secretary shall pay to each State with a  
7 plan approved under this title, from its allotment  
8 under section 2104, an amount for each quarter  
9 equal to 100 percent of expenditures in the quarter  
10 for child health assistance under the plan for tar-  
11 geted low-income children or pregnancy-related as-  
12 sistance for targeted low-income women that is pro-  
13 vided to such a child or woman who, at the time the  
14 assistance is provided, is a resident of a direct im-  
15 pact area of a disaster during the disaster’s relief  
16 coverage period (as such terms are defined in section  
17 1947).”.

18 (b) MORATORIUM ON REDETERMINATIONS.—During  
19 the relief coverage period (as defined in paragraph (4) of  
20 section 1947(b) of the Social Security Act, as added by  
21 section 2)) of a disaster, a State that contains a direct  
22 impact area (as defined in paragraph (2) of such section)  
23 of the disaster shall not be required to conduct eligibility  
24 redeterminations under the State’s plans or waivers of  
25 such plans under title XIX or XXI of such Act (42 U.S.C.

1 1396 et seq., 1397aa) with respect to individuals who re-  
2 side in such area.

3 **SEC. 5. AUTHORITY TO WAIVE REQUIREMENTS DURING NA-**  
4 **TIONAL EMERGENCIES WITH RESPECT TO**  
5 **EVACUEES FROM AN EMERGENCY AREA.**

6 Section 1135(g)(1) of the Social Security Act (42  
7 U.S.C. 1320b-5(g)(1)) is amended—

8 (1) by redesignating subparagraphs (A) and  
9 (B) as clauses (i) and (ii), respectively;

10 (2) by striking “An ‘emergency area’” and in-  
11 serting the following:

12 “(A) IN GENERAL.—An emergency area”;

13 and

14 (3) by adding at the end the following new sub-  
15 paragraph:

16 “(B) ADDITIONAL AREAS.—Any geographical  
17 area in which the Secretary determines there are a  
18 significant number of evacuees from an area de-  
19 scribed in subparagraph (A) shall also be considered  
20 to be an ‘emergency area’ for purposes of this sec-  
21 tion.”.

1 **SEC. 6. EXCLUSION OF DISASTER RELIEF COVERAGE PE-**  
2 **RIOD IN COMPUTING MEDICARE PART B**  
3 **LATE ENROLLMENT PERIOD.**

4 Section 1839(b) of such Act (42 U.S.C. 1395r(b)) is  
5 amended, in the second sentence, by inserting before the  
6 period at the end the following: “or, in the case of an indi-  
7 vidual who is a survivor of a disaster (as defined in para-  
8 graph (6) of section 1947(b)), any month any part of  
9 which is within the relief coverage period (as defined in  
10 paragraph (4) of such section) of such disaster”.

11 **SEC. 7. EFFECTIVE DATE.**

12 (a) IN GENERAL.—Subject to subsection (b), this Act  
13 and the amendments made by this Act shall take effect  
14 on the date of enactment of this Act.

15 (b) DELAY PERMITTED IF STATE LEGISLATION RE-  
16 QUIRED.—In the case of a State plan approved under title  
17 XIX of the Social Security Act which the Secretary of  
18 Health and Human Services determines requires State  
19 legislation (other than legislation appropriating funds) in  
20 order for the plan to meet the additional requirement im-  
21 posed by this section, the State plan shall not be regarded  
22 as failing to comply with the requirements of such title  
23 solely on the basis of the failure of the plan to meet such  
24 additional requirement before the 1st day of the 1st cal-  
25 endar quarter beginning after the close of the 1st regular  
26 session of the State legislature that ends after the 1-year

1 period beginning with the date of the enactment of this  
2 section. For purposes of the preceding sentence, in the  
3 case of a State that has a 2-year legislative session, each  
4 year of the session is deemed to be a separate regular ses-  
5 sion of the State legislature.

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