

date of the application. Further, the present value of the maximum guaranteed benefit amount with respect to such participants and beneficiaries may be calculated in the aggregate, rather than by reference to the benefit of each such participant or beneficiary.

“(4) In the case of a plan described in paragraph (1)(C), the financial assistance provided pursuant to such application under this subsection shall be the amount (determined by the plan actuary and submitted on the application) which, if such amount were paid by the corporation in combination with the loan and any other assistance being provided to the plan by the corporation at the time of the application, would enable the plan to emerge from the projected insolvency.

“(5)(A) Except as provided in subparagraph (B), the corporation shall provide the financial assistance under this subsection only in such amounts as the corporation determines, at the time of approval and at the beginning of each plan year beginning thereafter during the period of assistance, are necessary for the plan to avoid insolvency during the 5 plan year period beginning with the current plan year.

“(B) In the case of a plan described in paragraph (1)(C), the financial assistance under this subsection shall be provided in a lump sum if deemed necessary by the corporation, and in no case later than December 31, 2020.

“(6) Subsections (b) and (c) shall apply to financial assistance under this subsection as if it were provided under subsection (a), except that the terms for repayment under subsection (b)(2) shall not require the financial assistance to be repaid before the date on which the loan under the Butch Lewis Act of 2020 is repaid in full.

“(7) The corporation may forgo repayment of the financial assistance provided under this subsection if necessary to avoid any suspension of the accrued benefits of participants.”

(b) APPROPRIATIONS.—There is appropriated to the Director of the Pension Benefit Guar-

anty Corporation such sums as may be necessary for each fiscal year to provide the financial assistance described in section 4261(d) of the Employee Retirement Income Security Act of 1974 (29 U.S.C. 1431(d)) (as added by this section) (including necessary administrative and operating expenses relating to such assistance).

SA 1575. Mr. MORAN submitted an amendment intended to be proposed by him to the bill H.R. 748, to amend the Internal Revenue Code of 1986 to repeal the excise tax on high cost employer-sponsored health coverage; which was ordered to lie on the table; as follows:

At the appropriate place, insert the following:

SEC. _____ . PAID SICK AND FAMILY LEAVE PAY-ROLL CREDITS ALLOWED FOR STATE AND LOCAL AGENCIES PROVIDING HEALTH CARE.

(a) PAID SICK LEAVE.—Section 7001(e)(4) of the Families First Coronavirus Response Act is amended by adding at the end the following: “The preceding sentence shall not apply to any agency or instrumentality of a State or political subdivision thereof if such agency or instrumentality primarily employs health care providers (as defined in section 101 of the Family and Medical Leave Act of 1993 (29 U.S.C. 203)).”

(b) PAID FAMILY LEAVE.—Section 7003(e)(4) of such Act is amended by adding at the end the following: “The preceding sentence shall not apply to any agency or instrumentality of a State or political subdivision thereof if such agency or instrumentality primarily employs health care providers (as defined in section 101 of the Family and Medical Leave Act of 1993 (29 U.S.C. 203)).”

SA 1576. Mr. SASSE (for himself and Mrs. CAPITO) submitted an amendment intended to be proposed by him to the bill H.R. 748, to amend the Internal Revenue Code of 1986 to repeal the excise tax on high cost employer-spon-

sored health coverage; which was ordered to lie on the table; as follows:

Strike subparagraphs (C) and (D) of section 3215(a)(2) and insert the following:

(C) in the course of providing health care services that are within the scope of the license, registration, or certification of the volunteer, as defined by—

(i) the State in which the medical services are received or in which the act or omission occurs; or

(ii) in the case of medical services received in, or an act or omission that occurs in, a State other than the State in which the health care professional is licensed, registered, or certified, the State in which such professional is licensed, registered or certified; and

(D) in a good faith belief that the individual being treated is in need of health care services.

(b) OUT-OF-STATE PROVIDERS.—Notwithstanding any other provision of law, a health care provider may provide health care services in a State, even though the provider is not licensed in such State to provide such services, if—

(1) such services are offered and provided solely on a volunteer basis; and

(2) such provider is licensed, registered, or certified to practice in any other State, and such services are within the scope of practice of such provider (as defined by the State of licensure, registration, or certification).

ADJOURNMENT UNTIL TOMORROW

Mr. McCONNELL. Madam President, if there is no further business to come before the Senate, I ask unanimous consent that it stand adjourned under the previous order.

There being no objection, the Senate, at 1:46 a.m., adjourned until Wednesday, March 25, 2020, at 12 noon.