A BILL

To permit the continuation of certain health plans.

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

SECTION 1. SHORT TITLE.

This Act may be cited as the “Keeping the Affordable
Care Act Promise Act”.

SEC. 2. CONTINUATION OF GRANDFATHERED HEALTH
PLANS.

Notwithstanding any other provision of law, an indi-
vidual may elect to continue enrollment under the health
insurance coverage (offered in the individual market) in
which such individual was enrolled on December 31, 2013,
if such individual meets such other eligibility requirements
(such as payment of premiums) as are applied with respect
to such coverage, unless such issuer cancels all coverage
offered in such market and ceases operations as a health
insurance issuer. Any such coverage shall be deemed to
be a grandfathered health plan for purposes of the Patient
Protection and Affordable Care Act (or an amendment
made by that Act). Coverage to which this section applies
shall be deemed to be minimum essential coverage for pur-
poses of section 5000A of the Internal Revenue Code of
1986.

SEC. 3. TRANSPARENCY OF GRANDFATHERED HEALTH
PLAN NOTIFICATIONS.

Part 2 of subtitle C of title I of the Patient Protection
and Affordable Care Act (42 U.S.C. 18011 et seq.) is
amended by inserting after section 1251 the following:

“SEC. 1251A. TRANSPARENCY OF GRANDFATHERED
HEALTH PLAN NOTIFICATIONS.

“(a) IN GENERAL.—A health insurance issuer that
offers health insurance coverage in the individual market
shall annually, at the time of enrollment and renewal, pro-
vide enrollees with a notice that states—

“(1) if applicable, the reasons that such cov-
erage does not meet the requirements under this Act
(or amendment made by this Act) for a qualified
health plan, including citations to the provisions of this Act involved;

“(2) that the enrollee has the right to continue to enroll in such coverage; and

“(3) that the enrollee has the right to enroll in a qualified health plan offered through an Exchange and instruction on how to access such Exchange.

“(b) CANCELLATION NOTICES.—A notification provided by a health insurance issuer, that offers health insurance coverage in the individual market, to an enrollee stating that such coverage is cancelled for such enrollee shall contain a statement of the reasons for such cancellation, including a reference to any provision of this Act (or an amendment made by this Act) that such issuer relied upon in making the determination to cancel such coverage.

“(c) APPLICATION.—Subsection (b) shall apply beginning on the date of enactment of this section, except that with respect to a health plan that has provided a notification of cancellation prior to such date that has not yet taken effect, an enrollee may elect to continue such coverage under such plan if the issuer continues to offer such plan as provided for in section 2 of the Keeping the Affordable Care Act Promise Act and the issuer shall provide a subsequent notification to the enrollee that states—
“(1) that such plan will remain in effect at the option of the enrollee; and

“(2) the reasons that such plan does not otherwise meet the requirements under this Act for a qualified health plan.”.