H. R. 4093

To amend the Public Health Service Act and Employee Retirement Income Security Act of 1974 to require group health plans and health insurance coverage to establish hospital lengths of stay based on a determination by an appropriate physician in consultation with the patient.

IN THE HOUSE OF REPRESENTATIVES

June 19, 1998

Ms. Delauro (for herself, Mr. Hilliard, Mr. Hastings of Florida, Mr. Frost, Mr. Kleczka, Mr. Sandlin, Mr. Lampson, Ms. Pelosi, Mr. Maloney of Connecticut, Mr. Wynn, Mr. Menendez, Mr. Lewis of Georgia, and Mr. Cummings) introduced the following bill; which was referred to the Committee on Commerce, and in addition to the Committee on Education and the Workforce, 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

A BILL

To amend the Public Health Service Act and Employee Retirement Income Security Act of 1974 to require group health plans and health insurance coverage to establish hospital lengths of stay based on a determination by an appropriate physician in consultation with the patient.

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

1 SECTION 1. SHORT TITLE.

- This Act may be cited as the "Hospital Stay Protec-
- 3 tion Act".
- 4 SEC. 2. STANDARD RELATING TO HOSPITAL LENGTHS OF
- 5 STAY.
- 6 (a) Group Health Plans.—
- 7 (1) Public Health Service act amend-
- 8 MENTS.—
- 9 (A) IN GENERAL.—Subpart 2 of part A of
- title XXVII of the Public Health Service Act,
- as amended by section 703(a) of Public Law
- 12 104–204, is amended by adding at the end the
- following new section:
- 14 "SEC. 2706, STANDARD RELATING TO HOSPITAL LENGTHS
- 15 OF STAY.
- 16 "(a) Requirement.—A group health plan, and a
- 17 health insurance issuer offering group health insurance
- 18 coverage in connection with a group health plan, shall en-
- 19 sure that inpatient coverage is provided for a period of
- 20 time as is determined by a physician, in consultation with
- 21 the patient, to be medically appropriate.
- 22 "(b) Prohibitions.—A group health plan, and a
- 23 health insurance issuer offering group health insurance
- 24 coverage in connection with a group health plan, may
- 25 not—

- 1 "(1) deny eligibility, or continued eligibility, to 2 enroll or to renew coverage under the terms of the 3 plan, solely for the purpose of avoiding the minimum 4 coverage requirements of subsection (a);
- "(2) penalize or otherwise reduce or limit the reimbursement of a provider because such provider provided care to a participant or beneficiary in accordance with this section;
- 9 "(3) provide incentives (monetary or otherwise)
 10 to a provider to induce such provider to keep the
 11 length of inpatient stays of patients below certain
 12 levels; or
- "(4) require preauthorization for determinationof a length of stay.
- 15 "(c) Appeals Process and Penalty.—The Sec-16 retary, in consultation with the Secretary of Labor shall 17 establish—
- "(1) a process for a participant, enrollee, or beneficiary to appeal the decision of a plan or issuer; and
- 21 "(2) a penalty for plans or issuers that violate 22 the provisions of this section.
- 23 "(d) NOTICE.—A group health plan under this part 24 shall comply with the notice requirement under section 25 713(d) of the Employee Retirement Income Security Act

of 1974 with respect to the requirements of this section 2 as if such section applied to such plan.". 3 (B) Conforming amendment.—Section 2723(c) of such Act (42 U.S.C. 300gg-23(c)) is amended by striking "section 2704" and insert-5 6 ing "sections 2704 and 2706". 7 (2) Amendments to the employee retire-8 MENT INCOME SECURITY ACT OF 1974.— 9 (A) IN GENERAL.—Subpart B of part 7 of 10 subtitle B of title I of the Employee Retirement 11 Income Security Act of 1974 is amended by 12 adding at the end the following new section: 13 "SEC. 713. STANDARDS FOR HOSPITAL LENGTHS OF STAY. 14 "(a) Requirement.—A group health plan, and a health insurance issuer offering group health insurance coverage in connection with a group health plan, shall en-16 sure that inpatient coverage is provided for a period of 17 time as is determined by a physician, in consultation with 18 19 the patient, to be medically appropriate. "(b) Prohibitions.—A group health plan, and a 20 21 health insurance issuer offering group health insurance 22 coverage in connection with a group health plan, may 23 not-"(1) deny eligibility, or continued eligibility, to 24 25 enroll or to renew coverage under the terms of the

- plan, solely for the purpose of avoiding the minimum
 coverage requirements of subsection (a);
- "(2) penalize or otherwise reduce or limit the reimbursement of a provider because such provider provided care to a participant or beneficiary in accordance with this section;
- 7 "(3) provide incentives (monetary or otherwise)
 8 to a provider to induce such provider to keep the
 9 length of inpatient stays of patients below certain
 10 levels; or
- "(4) require preauthorization for determinationof a length of stay.
- 13 "(c) Appeals Process and Penalty.—The Sec-14 retary, in consultation with the Secretary of Health and

Human Services shall establish—

- "(1) a process for a participant, enrollee, or
 beneficiary to appeal the decision of a plan or issuer;
 and
- 19 "(2) a penalty for plans or issuers that violate 20 the provisions of this section.
- 21 "(d) Notice Under Group Health Plan.—The 22 imposition of the requirements of this section shall be 23 treated as a material modification in the terms of the plan
- 24 described in section 102(a)(1), for purposes of assuring
- 25 notice of such requirements under the plan; except that

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- 1 the summary description required to be provided under the
- 2 last sentence of section 104(b)(1) with respect to such
- 3 modification shall be provided by not later than 60 days
- 4 after the first day of the first plan year in which such
- 5 requirements apply.".
- 6 (B) Conforming and Clerical Amend-
- 7 MENTS.—(i) Section 731(c) of such Act (29 U.S.C.
- 8 1191(c)) is amended by striking "section 711" and
- 9 inserting "sections 711 and 713".
- 10 (ii) Section 732(a) of such Act (29 U.S.C.
- 11 1191a(a)) is amended by striking "section 711" and
- inserting "sections 711 and 713".
- 13 (iii) The table of contents in section 1 of such
- 14 Act is amended by inserting after the item relating
- to section 712 the following new item:
 - "Sec. 713. Standard for hospital lengths of stay.".
- 16 (b) Individual Health Insurance.—
- 17 (1) In general.—Subpart 3 of part B of title
- 18 XXVII of the Public Health Service Act is amended
- by adding at the end the following new section:
- 20 "SEC. 2752. STANDARDS FOR HOSPITAL LENGTHS OF STAY.
- 21 "(a) In General.—The provisions of section 2706
- 22 (other than subsection (d)) shall apply to health insurance
- 23 coverage offered by a health insurance issuer in the indi-
- 24 vidual market in the same manner as they apply to health
- 25 insurance coverage offered by a health insurance issuer

1	in connection with a group health plan in the small or
2	large group market.
3	"(b) Notice.—A health insurance issuer under this
4	part shall comply with the notice requirement under sec-
5	tion 713(d) of the Employee Retirement Income Security
6	Act of 1974 with respect to the requirements referred to
7	in subsection (a) as if such section applied to such issuer
8	and such issuer were a group health plan.".
9	(2) Conforming Amendment.—Section
10	2762(b)(2) of such Act (42 U.S.C. $300gg-62(b)(2)$)
11	is amended by striking "section 2751" and inserting
12	"sections 2751 and 2752".
13	(c) Effective Dates.—
14	(1) Group Market Reforms.—
15	(A) IN GENERAL.—The amendments made
16	by subsections (a) and (b) shall apply with re-
17	spect to plan years beginning on or after Janu-
18	ary 1, 1999.
19	(B) Special rule for collective bar-
20	GAINING AGREEMENTS.—In the case of a group
21	health plan maintained pursuant to 1 or more
22	collective bargaining agreements between em-
23	ployee representatives and 1 or more employers
24	ratified before such date, the amendments made

1	by such subsections shall not apply to plan
2	years beginning before the later of—
3	(i) the date on which the last collec-
4	tive bargaining agreements relating to the
5	plan terminates (determined without re-
6	gard to any extension thereof agreed to
7	after the date of enactment of this Act), or
8	(ii) January 1, 1999.
9	For purposes of clause (i), any plan amendment
10	made pursuant to a collective bargaining agree-
11	ment relating to the plan which amends the
12	plan solely to conform to any requirement
13	added by such subsections shall not be treated
14	as a termination of such collective bargaining
15	agreement.
16	(2) Individual market amendments.—The
17	amendments made by subsection (b) shall apply with
18	respect to health insurance coverage offered, sold,
19	issued, renewed, in effect, or operated in the individ-
20	ual market on or after January 1, 1999.
21	(d) Coordinated Regulations.—Section 104(1)
22	of Health Insurance Portability and Accountability Act of
23	1996 is amended by striking "this subtitle (and the
24	amendments made by this subtitle and section 401)" and
25	inserting "the provisions of part 7 of subtitle B of title

- 1 I of the Employee Retirement Income Security Act of
- 2 1974, the provisions of parts A and C of title XXVII of
- 3 the Public Health Service Act, and chapter 100 of the In-

4 ternal Revenue Code of 1986".

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