

110TH CONGRESS  
1ST SESSION

# H. R. 2833

To amend title I of the Employee Retirement Income Security Act of 1974, title XXVII of the Public Health Service Act, and the Internal Revenue Code of 1986 to provide additional limitations on preexisting condition exclusions in group health plans and health insurance coverage in the group and individual markets.

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## IN THE HOUSE OF REPRESENTATIVES

JUNE 22, 2007

Mr. COURTNEY (for himself and Mr. GEORGE MILLER of California) introduced the following bill; which was referred to the Committee on Energy and Commerce, and in addition to the Committees on Education and Labor and 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 amend title I of the Employee Retirement Income Security Act of 1974, title XXVII of the Public Health Service Act, and the Internal Revenue Code of 1986 to provide additional limitations on preexisting condition exclusions in group health plans and health insurance coverage in the group and individual markets.

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.**

2 This Act may be cited as the “Preexisting Condition  
3 Exclusion Patient Protection Act of 2007”.

4 **SEC. 2. AMENDMENTS RELATING TO PREEXISTING CONDI-**  
5 **TION EXCLUSIONS UNDER GROUP HEALTH**  
6 **PLANS.**

7 (a) AMENDMENTS TO THE EMPLOYEE RETIREMENT  
8 INCOME SECURITY ACT OF 1974.—

9 (1) REDUCTION IN LOOK-BACK PERIOD.—Section  
10 701(a)(1) of the Employee Retirement Income  
11 Security Act of 1974 (29 U.S.C. 1181(a)(1)) is  
12 amended by striking “6-month period” and inserting  
13 “30-day period”.

14 (2) REDUCTION IN PERMITTED PREEXISTING  
15 CONDITION LIMITATION PERIOD.—Section 701(a)(2)  
16 of such Act (29 U.S.C. 1181(a)(2)) is amended by  
17 striking “12 months” and inserting “3 months”,  
18 and by striking “18 months” and inserting “9  
19 months”.

20 (b) AMENDMENTS TO THE PUBLIC HEALTH SERVICE  
21 ACT.—

22 (1) REDUCTION IN LOOK-BACK PERIOD.—Section  
23 2701(a)(1) of the Public Health Service Act (42  
24 U.S.C. 300gg(a)(1)) is amended by striking “6-  
25 month period” and inserting “30-day period”.

7 (c) AMENDMENTS TO THE INTERNAL REVENUE  
8 CODE OF 1986.—

20 (d) EFFECTIVE DATE.—

1 endar month following the date of the enactment of  
2 this Act.

3 (2) SPECIAL RULE FOR COLLECTIVE BAR-  
4 GAINING AGREEMENTS.—In the case of a group  
5 health plan maintained pursuant to one or more col-  
6 lective bargaining agreements between employee rep-  
7 resentatives and one or more employers ratified be-  
8 fore the date of the enactment of this Act, the  
9 amendments made by this section shall not apply to  
10 plan years beginning before the earlier of—

11 (A) the date on which the last of the col-  
12 lective bargaining agreements relating to the  
13 plan terminates (determined without regard to  
14 any extension thereof agreed to after the date  
15 of the enactment of this Act), or

16 (B) 3 years after the date of the enact-  
17 ment of this Act.

18 For purposes of subparagraph (A), any plan amend-  
19 ment made pursuant to a collective bargaining  
20 agreement relating to the plan which amends the  
21 plan solely to conform to any requirement added by  
22 the amendments made by this section shall not be  
23 treated as a termination of such collective bar-  
24 gaining agreement.

1   **SEC. 3. AMENDMENTS RELATING TO PREEXISTING CONDI-**  
2                   **TION EXCLUSIONS IN HEALTH INSURANCE**  
3                   **COVERAGE IN THE INDIVIDUAL MARKET.**

4       (a) **APPLICABILITY OF GROUP HEALTH INSURANCE**  
5   **LIMITATIONS ON IMPOSITION OF PREEXISTING CONDI-**  
6   **TION EXCLUSIONS.—**

7                   (1) **IN GENERAL.**—Section 2741 of the Public  
8   Health Service Act (42 U.S.C. 300gg–41) is amend-  
9   ed—

10                   (A) by redesignating the second subsection  
11                   (e) (relating to market requirements) and sub-  
12                   section (f) as subsections (f) and (g), respec-  
13                   tively; and

14                   (B) by adding at the end the following new  
15                   subsection:

16       “(h) **APPLICATION OF GROUP HEALTH INSURANCE**  
17   **LIMITATIONS ON IMPOSITION OF PREEXISTING CONDI-**  
18   **TION EXCLUSIONS.—**

19                   “(1) **IN GENERAL.**—Subject to paragraph (2), a  
20   health insurance issuer that provides individual  
21   health insurance coverage may not impose a pre-  
22   existing condition exclusion (as defined in subsection  
23   (b)(1)(A) of section 2701) with respect to such cov-  
24   erage except to the extent that such exclusion could  
25   be imposed consistent with such section if such cov-  
26   erage were group health insurance coverage.

1               “(2) LIMITATION.—In the case of an individual  
2               who—

3                       “(A) is enrolled in individual health insur-  
4               ance coverage;

5                       “(B) during the period of such enrollment  
6               has a condition for which no medical advice, di-  
7               agnosis, care, or treatment had been rec-  
8               ommended or received as of the enrollment  
9               date; and

10                       “(C) seeks to enroll under other individual  
11               health insurance coverage which provides bene-  
12               fits different from those provided under the cov-  
13               erage referred to in subparagraph (A) with re-  
14               spect to such condition,

15               the issuer of the individual health insurance cov-  
16               erage described in subparagraph (C) may impose a  
17               preexisting condition exclusion with respect to such  
18               condition and any benefits in addition to those pro-  
19               vided under the coverage referred to in subpara-  
20               graph (A), but such exclusion may not extend for a  
21               period of more than 3 months.”.

22                       (2) ELIMINATION OF COBRA REQUIREMENT.—  
23               Subsection (b) of such section is amended—

24                       (A) by adding “and” at the end of para-  
25               graph (2);

1 (B) by striking the semicolon at the end of  
2 paragraph (3) and inserting a period; and  
3 (C) by striking paragraphs (4) and (5).

8 (b) EFFECTIVE DATE.—The amendments made by  
9 this section shall apply with respect to health insurance  
10 coverage offered, sold, issued, renewed, in effect, or oper-  
11 ated in the individual market after the end of the 12th  
12 calendar month following the date of the enactment of this  
13 Act.

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