

111TH CONGRESS
1ST SESSION

S. 1730

To provide for minimum loss ratios for health insurance coverage.

IN THE SENATE OF THE UNITED STATES

SEPTEMBER 30, 2009

Mr. FRANKEN (for himself, Mr. ROCKEFELLER, Mr. WHITEHOUSE, and Mr. SANDERS) introduced the following bill; which was read twice and referred to the Committee on Health, Education, Labor, and Pensions

A BILL

To provide for minimum loss ratios for health insurance coverage.

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 “Fairness in Health
5 Insurance Act”.

6 **SEC. 2. REQUIREMENT OF MINIMUM LOSS RATIO OF 90**
7 **PERCENT FOR HEALTH INSURANCE COV-**
8 **ERAGE.**

9 (a) IN GENERAL.—A health insurance issuer shall
10 not offer health insurance coverage unless the issuer dem-

1 onstrates that such coverage has a medical loss ratio of
2 at least 90 percent.

3 (b) MEDICAL LOSS RATIO.—

4 (1) IN GENERAL.—In this section, the term
5 “medical loss ratio” has the meaning given such
6 term by the Secretary of Health and Human Serv-
7 ices. The Secretary shall establish a uniform defini-
8 tion of medical loss ratio and methodology for deter-
9 mining how to calculate the medical loss ratio. Such
10 methodology shall take into account the cir-
11 cumstances of different plans and activities related
12 to health services such as chronic disease manage-
13 ment and quality assurance.

14 (2) REPORT.—Not later than December 31,
15 2010, the Secretary of Health and Human Services
16 shall publish a report that describes the definition
17 developed under paragraph (1) and the elements
18 with respect to such definition.

19 (c) TRANSPARENCY.—

20 (1) SUBMISSION OF DATA.—Beginning in plan
21 year 2011, a health insurance issuer shall provide
22 the Secretary of Health and Human Services with
23 data to enable the Secretary to determine whether
24 the issuer is in compliance with subsection (a) with

1 respect to health insurance coverage offered by such
2 issuer.

3 (2) DEVELOPMENT OF ELEMENTS AND DEFINI-
4 TIONS.—Not later than December 31, 2010, the
5 Secretary of Health and Human Services shall de-
6 velop, publish in a report, and implement the stand-
7 ardized data elements and definitions to be used by
8 health insurance issuers in the reporting of data
9 necessary for the calculation of the medical loss ratio
10 under paragraph (1).

11 (d) REBATES.—Each health insurance issuer that of-
12 fers health insurance coverage shall provide that for any
13 plan year in which the coverage has a medical loss ratio
14 below 90 percent, the issuer shall provide, in a manner
15 specified by the Secretary, for rebates to enrollees of pay-
16 ments sufficient with respect to such loss ratio.

17 (e) ENFORCEMENT.—The Secretary shall promulgate
18 regulations for enforcing the provisions of this section and
19 may provide for appropriate penalties.

20 (f) DEFINITION.—In this section, the terms “health
21 insurance coverage” and “health insurance issuer” shall
22 have the meanings given such terms in section 2791 of
23 the Public Health Service Act (42 U.S.C. 300gg–91).

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