112TH CONGRESS 1ST SESSION

H. R. 1322

To amend title I of the Employee Retirement Income Security Act of 1974 to provide protection for company-provided retiree health benefits.

IN THE HOUSE OF REPRESENTATIVES

APRIL 1, 2011

Mr. Tierney (for himself, Mr. George Miller of California, Mr. Jones, and Mr. Andrews) introduced the following bill; which was referred to the Committee on Education and the Workforce

A BILL

To amend title I of the Employee Retirement Income Security Act of 1974 to provide protection for company-provided retiree health benefits.

- 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 "Earned Retiree
- 5 Healthcare Benefits Protection Act of 2011".
- 6 SEC. 2. FINDINGS AND PURPOSES.
- 7 (a) FINDINGS.—The Congress finds the following:
- 8 (1) Retired participants of group health plans
- 9 regulated by the Employee Retirement Income Secu-

- rity Act of 1974 (ERISA) have been severely harmed by the virtually unchecked practices of sponsors of such plans involving the post-retirement cancellation or reduction of earned health benefits contrary to assurances retirees received prior to retirement that such benefits would be with them for life.
- (2) Such widespread post-retirement reductions in retiree health benefits has led to a crisis in retiree health care in which retirees—
 - (A) have been unable to substitute individual coverage for the group coverage they lost, or, in order to obtain individual coverage, have jeopardized their economic security in retirement;
 - (B) because of preexisting medical conditions cannot obtain substitute coverage that they can afford without depleting their life savings or have been unable to obtain adequate medical care or medical care they had relied on to deal with serious illness;
 - (C) have sustained catastrophic illnesses or injuries or otherwise experienced a marked deterioration in their medical conditions or health as a result of post-retirement changes to their medical benefits;

- 1 (D) have been transferred indiscriminately
 2 into improperly or inadequately managed health
 3 maintenance organizations or other managed
 4 care entities, resulting in the worsening rather
 5 than improvement of prior medical conditions;
 6 and
 7 (E) in many instances, have failed to ob-
 - (E) in many instances, have failed to obtain adequate relief in the courts due to highly restrictive judicial interpretations which are inconsistent with ERISA's underlying protective purposes.
 - (3) The crisis in retiree healthcare generated by the plan sponsor practice of post-retirement cancellations or reductions of previously promised earned retiree health benefits has led to a wide-spread loss of confidence in the integrity of ERISA-regulated group health plans and the ability of ERISA itself to adequately protect retiree health benefits.
 - (4) A strong and dependable private sector retiree health system is a necessary component to the essential health of our Nation's senior citizens.

(b) Purposes.—

(1) IN GENERAL.—The purposes of this Act are to ensure that the reasonable health benefit expecta-

- tions of retirees from ERISA-regulated group health plans are fulfilled, to minimize the incidence of prolonged legal disputes arising out of the post-retirement cancellation or reduction of earned retiree health benefits from such plans, and to prevent further adverse effects on retiree health arising from such post-retirement changes.
 - (2) Future safeguards and enforceable obligations.—To carry out the purposes described in paragraph (1):
 - (A) The provisions of this Act safeguard retired participants of group health plans subject to ERISA from loss or reduction of their health benefits from such plans by barring plan sponsors from canceling or reducing such benefits after the dates such participants retire and when they no longer are able to absorb such losses or reductions without experiencing adverse effects on their health or finances.
 - (B) The provisions of this Act also establish an enforceable obligation on the part of sponsors of such group health plans to restore health benefits previously taken away from retired participants of such plans to the extent such benefits were cancelled or altered after the

1	dates such participants retired. The obligation
2	is limited to restoring healthcare benefits only
3	back to specified levels, and the obligation does
4	not apply if the plan sponsor would sustain sub-
5	stantial business hardship by restoring such
6	benefits.
7	SEC. 3. RETIREE HEALTH BENEFIT PROTECTIONS IN
8	GROUP HEALTH PLANS.
9	(a) In General.—Subtitle B of title I of the Em-
10	ployee Retirement Income Security Act of 1974 is amend-
11	ed by adding at the end the following new part:
12	"PART 8—EMERGENCY RETIREE HEALTH
13	BENEFIT PROTECTIONS
	BENEFIT PROTECTIONS "SEC. 801. PROHIBITION AGAINST POST-RETIREMENT RE-
14	
13 14 15 16	"SEC. 801. PROHIBITION AGAINST POST-RETIREMENT RE-
14 15 16	"SEC. 801. PROHIBITION AGAINST POST-RETIREMENT REDUCTIONS OF RETIREE HEALTH BENEFITS
14 15 16 17	"SEC. 801. PROHIBITION AGAINST POST-RETIREMENT REDUCTIONS OF RETIREE HEALTH BENEFITS BY GROUP HEALTH PLANS.
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14 15 16 17 18 19 20 21 22 23	"SEC. 801. PROHIBITION AGAINST POST-RETIREMENT REDUCTIONS OF RETIREE HEALTH BENEFITS BY GROUP HEALTH PLANS. "(a) In General.—Notwithstanding that a group health plan described in subsection (b) may contain a provision reserving the general power to amend or terminate the plan or a provision specifically authorizing the plan to make post-retirement reductions in retiree health benefits, the benefits provided to a retired participant or his

- 1 pant has retired for purposes of the plan and reduces ben-
- 2 effits that were provided to the participant, or his or her
- 3 beneficiary, as of the date the participant retired. Any
- 4 group health plan provision which is purported to author-
- 5 ize the reduction of benefits in a manner inconsistent with
- 6 the preceding sentence shall be void as against public pol-
- 7 icy.
- 8 "(b) Group Health Plan.—For purposes of this
- 9 Act, the term 'group health plan' has the same meaning
- 10 as in section 607(1).
- 11 "(c) Prohibited Reduction of Benefits.—For
- 12 purposes of this part, any reference to a reduction of bene-
- 13 fits shall be construed to be a reference to any amendment
- 14 to a group health plan, or to any other action, which has
- 15 the effect of—
- 16 "(1) canceling, decreasing, or limiting the
- amount, type, or form of any benefit or option pro-
- vided prior to the amendment or action;
- 19 "(2) imposing or increasing out-of-pocket costs
- 20 that a retired participant, or his or her beneficiary,
- 21 must pay in order for benefits that were provided
- 22 under the plan to the participant or beneficiary prior
- 23 to the amendment or action to be provided to the
- 24 participant or beneficiary after the amendment or
- action; or

"(3) modifying the manner by which medical services are delivered under the plan so that after the amendment or action a retired participant, or his or her beneficiary, has less ready access to the delivery of any such medical services than the participant or beneficiary had prior to the amendment or action.

"(d) Treatment of Plan Termination.—

"(1) IN GENERAL.—Subject to paragraph (2), a termination of a group health plan shall be treated as a reduction in benefits prohibited under subsection (a) if, after the termination, the plan sponsor of the terminated plan fails to continue to provide to the participants who retired prior to the termination and to their beneficiaries the same retiree health benefits that were provided prior to the termination.

"(2) WAIVER.—Paragraph (1) shall not apply in the case of the termination of a group health plan if the Secretary issues a waiver under this paragraph in connection with such termination. The Secretary shall issue such a waiver if and only if the plan sponsor demonstrates to the satisfaction of the Secretary, in accordance with regulations prescribed by the Secretary, that such plan sponsor will be un-

1	able to continue in business unless such a waiver is
2	issued.
3	"SEC. 802. ADOPTION BY GROUP HEALTH PLANS OF PROVI-
4	SION BARRING POST-RETIREMENT REDUC-
5	TIONS IN RETIREE HEALTH BENEFITS.
6	"Each group health plan which provides, as of the
7	date of a participant's retirement under the plan, benefits
8	after such date with respect to such participant or his or
9	her beneficiaries shall contain a provision which expressly
10	bars any reduction in such benefits after such date, either
11	under the terms of the plan or by any fiduciary of the
12	plan.
13	"SEC. 803. RESTORATION BY GROUP HEALTH PLANS OF
14	BENEFITS REDUCED AFTER RETIREMENT.
15	"(a) In General.—The plan sponsor of each group
15 16	"(a) IN GENERAL.—The plan sponsor of each group health plan shall provide, in accordance with this section,
16	health plan shall provide, in accordance with this section,
16 17	health plan shall provide, in accordance with this section, benefit restoration under this section to each retired par-
16 17 18	health plan shall provide, in accordance with this section, benefit restoration under this section to each retired par- ticipant that meets the following requirements:
16 17 18 19	health plan shall provide, in accordance with this section, benefit restoration under this section to each retired participant that meets the following requirements: "(1) The retired participant is entitled to benefit
16 17 18 19 20	health plan shall provide, in accordance with this section, benefit restoration under this section to each retired participant that meets the following requirements: "(1) The retired participant is entitled to benefit coverage under the plan as of the date of the en-
116 117 118 119 220 221	health plan shall provide, in accordance with this section, benefit restoration under this section to each retired participant that meets the following requirements: "(1) The retired participant is entitled to benefit coverage under the plan as of the date of the enactment of the Earned Retiree Healthcare Benefits
16 17 18 19 20 21 22	health plan shall provide, in accordance with this section, benefit restoration under this section to each retired participant that meets the following requirements: "(1) The retired participant is entitled to benefit coverage under the plan as of the date of the enactment of the Earned Retiree Healthcare Benefits Protection Act of 2011.

- option provided to the retired participant under the plan as of the date the participant retired, took effect after the participant's date of retirement and before the date of the enactment of such Act.
- 5 "(3) The retired participant has elected to re-6 store benefits under the plan within the restoration 7 period prescribed pursuant to subsection (b) and in 8 accordance with such procedures as may be estab-9 lished under the plan pursuant to regulations of the 10 Secretary.
- "(b) RESTORATION PERIOD.—For purposes of this section, the term 'restoration period' means a period which shall be prescribed by the Secretary and which—
 - "(1) begins not later than 1 year after the date of the enactment of the Earned Retiree Healthcare Benefits Protection Act of 2011;
- "(2) ends before the end of the 2-year period beginning with such date, or such longer period as may result from a suspension of such 2-year period by the Secretary pursuant to section 804(g); and
- 21 "(3) is of no less than 60 days duration.
- 22 "(c) Applicable Standards for Restoration of
- 23 Benefits.—

15

1	"(1) In general.—For purposes of this sec-
2	tion, reduced benefits shall be deemed restored
3	under this section—
4	"(A) in the case of a participant who re-
5	tired under the plan before the plan year begin-
6	ning with or during 1991, if the benefits which
7	were subjected to reduction are restored to the
8	level of such benefits which was in effect for the
9	plan year beginning with or during 1991, and
10	"(B) in the case of a participant who re-
11	tired under the plan after the plan year begin-
12	ning with or during 1990 and before the date
13	of the enactment of the Earned Retiree
14	Healthcare Benefits Protection Act of 2011, if
15	the benefits which were subjected to reduction
16	are restored to the level of such benefits which
17	was in effect immediately prior to the reduction.
18	"(2) Level of Benefits.—For purposes of
19	paragraph (1), restoration of benefits to a level re-
20	quired under paragraph (1) occurs if—
21	"(A) any cancellation, decrease, or limita-
22	tion with respect to the amount, type, or form
23	of any benefit or option which resulted in the
24	reduction in benefits is rescinded or lessened so
25	as to result in the amount, type, and form of

benefits in effect for the plan year beginning with or during 1991 (in the case of a participant described in paragraph (1)(A)) or as of immediately prior to the reduction (in the case of a participant described in paragraph (1)(B));

"(B) any imposition or increase in out-ofpocket costs that the participant, or his or her beneficiary, must pay which resulted in the reduction in benefits is rescinded or lessened so as to result in the level of out-of-pocket costs in effect for the plan year beginning with or during 1991 (in the case of a participant described in paragraph (1)(A)) or as of immediately prior to the reduction (in the case of a participant described in paragraph (1)(B)); and

"(C) any modification in the manner by which medical services are delivered under the plan which resulted in the reduction in benefits is rescinded or amended so as to result in a manner by which medical services are delivered under the plan which is substantially equivalent to the manner by which medical services are delivered in effect for the plan year beginning with or during 1991 (in the case of a participant described in paragraph (1)(A)) or as of

1	immediately prior to the reduction (in the case
2	of a participant described in paragraph (1)(B)).
3	"(d) Exception for Certain Plans.—In accord-
4	ance with regulations prescribed by the Secretary, in the
5	case of any group health plan which has less than 100
6	participants as of the date of the enactment of the Earned
7	Retiree Healthcare Benefits Protection Act of 2011, sub-
8	section (a) shall apply to such plan only if, at any time
9	during the period described in subsection (b)(2) (including
10	any extension thereof), such plan has more than 100 par-
11	ticipants.
12	"(e) Notice Requirements Concerning Res-
13	TORATION OF BENEFITS.—In accordance with such regu-
14	lations as may be prescribed by the Secretary, the plan
15	administrator of each group health plan subject to the re-
16	quirements of subsection (a) shall, within 30 days prior
17	to the commencement of the plan's restoration period, pro-
18	vide written notice to each retired participant of the plan
19	who meets the requirements of subsection (a) of the fol-
20	lowing:
21	"(1) A description of all benefits the retired
22	participant is entitled to have restored.
23	"(2) The administrative procedure established
24	under the plan which may be used to submit a claim
25	for the restoration of any benefits.

- "(3) An itemization of the value of each benefit the retired participant is entitled to have restored, as determined in accordance with the regulations of the Secretary, and the total value of all such benefits.
 - "(4) A description of any post-retirement increases in retiree health benefits the retired participant received which the plan sponsor could rescind if the retired participant asserts a claim for the restoration of benefits.
 - "(5) An itemization of the value of each retiree health benefit that the plan sponsor could rescind, as determined in accordance with the regulations of the Secretary, and the total value of all such benefits.
 - "(6) If the plan sponsor has filed an application for a substantial business hardship exemption under section 804, the date on which such application was filed, the date on which notice of such application was given to retired participants entitled to submit a claim for the restoration of benefits, and the status of such application as of the date of the notice sent pursuant to this subsection.

- 1 "(7) Such other information in such form and
- 2 detail as may be prescribed by the Secretary to carry
- 3 out the purposes of this part.
- 4 "(f) Deadline for Restoration of Benefits.—
- 5 All benefits required to be restored under this section shall
- 6 be restored before the end of the 2-year period beginning
- 7 with the date of the enactment of the Earned Retiree
- 8 Healthcare Benefits Protection Act of 2011, subject to
- 9 any suspension of such period under section 804(g).
- 10 "SEC. 804. EXEMPTION FROM RESTORATION OF BENEFITS
- 11 REQUIREMENTS.
- 12 "(a) Application for Exemption.—Any plan
- 13 sponsor of a group health plan that would sustain substan-
- 14 tial business hardship if required to fulfill, in whole or in
- 15 part, the restoration of benefits requirements contained in
- 16 section 803, may file an application for an exemption with
- 17 the Secretary from any or all of such requirements.
- 18 "(b) Authority for Waiver or Variance.—In re-
- 19 sponse to an application filed by a plan sponsor pursuant
- 20 to subsection (a), the Secretary may waive or vary the re-
- 21 quirements of section 803 with respect to any or all of
- 22 such requirements, including postponing for reasonable
- 23 periods of time the obligation of the plan sponsor to re-
- 24 store reduced benefits, if the Secretary finds that compli-

1	ance by the plan sponsor with the requirements of section
2	803 would—
3	"(1) be adverse to the interests of plan partici-
4	pants in the aggregate;
5	"(2) not be administratively feasible; and
6	"(3) cause substantial business hardship to the
7	plan sponsor.
8	"(c) Factors Taken Into Account.—For pur-
9	poses of this section, the factors to be taken into account
10	in determining substantial business hardship shall include
11	(but shall not be limited to) whether—
12	"(1) the plan sponsor is operating at an eco-
13	nomic loss;
14	"(2) compliance with the restoration of benefits
15	requirements would necessitate substantial future re-
16	ductions in health benefits provided to participants
17	under the plan or cause a substantial decline in em-
18	ployment with the plan sponsor; and
19	"(3) it is reasonable to expect that the plan will
20	be continued only if a waiver or appropriate variance
21	is granted.
22	"(d) Requirement of Satisfactory Evidence.—
23	"(1) IN GENERAL.—The Secretary shall, before
24	granting a waiver or variance under this section, re-
25	quire each applicant to provide evidence satisfactory

- to the Secretary that the applicant has provided timely written notice of the filing of an application
- 3 for such waiver or variance to each retired partici-
- 4 pant entitled to submit a claim for the restoration
- 5 of benefits under the applicant's plan.
- 6 "(2) TIMELINESS.—For purposes of paragraph
 7 (1), a written notice shall be considered timely if it
 8 is provided not later than 60 days prior to the date
 9 the plan sponsor files an application for a waiver or
- variance under this section.
- "(3) Information required.—The notice referred to in paragraph (1) shall include information with respect to the specific relief that will be sought by the plan sponsor's application, the period of time for which relief is sought, and such other relevant
- information as the Secretary may prescribe.
- 17 "(e) Participation in Proceedings by Retired
- 18 Plan Participants.—Each retired participant entitled
- 19 to submit a claim for the restoration of benefits within
- 20 the meaning of this section shall be provided a reasonable
- 21 opportunity to submit comments or otherwise participate
- 22 in any proceeding established by the Secretary to deter-
- 23 mine whether to grant or deny an application for a waiver
- 24 or variance filed by the retired participant's plan sponsor.

1	"(f) Exceptions for Certain Applications.—In
2	any case in which the plan sponsor of the group health
3	plan also maintains a pension plan which provides pension
4	benefits with respect to any retired participant entitled to
5	submit a claim for the restoration of benefits within the
6	meaning of this section, the Secretary may not grant any
7	application for a waiver or variance purporting to satisfy
8	the requirements of subsection (b) if the requirements of
9	paragraph (1) or (2) of this subsection are met.
10	"(1) Failure to transfer excess pension
11	ASSETS.—The requirements of this paragraph are
12	met if—
13	"(A) within the 5-year period preceding
14	the date of the plan sponsor's application for
15	the waiver or variance, the plan sponsor could
16	have transferred excess assets of such pension
17	plan to a health benefits account in accordance
18	with section 420 of the Internal Revenue Code
19	of 1986 (as in effect on the date of the enact-
20	ment of the Tax Relief Extension Act of 1999)
21	but did not do so; and
22	"(B) such health benefits account forms a
23	part of the group health plan with respect to
24	which the plan sponsor is submitting the appli-
25	cation

1	"(2) No ad hoc colas provided under
2	WELL-FUNDED PENSION PLAN PROVIDING FOR SUCH
3	COLAS.—
4	"(A) In general.—The requirements of
5	this paragraph are met if—
6	``(i)(I) no employer contributions were
7	made to such pension plan during any of
8	the 5 plan years preceding the date of the
9	application for the waiver or variance, and
10	"(II) despite such lack of employer
11	contributions, the minimum funding stand-
12	ard under section 302 of this Act and sec-
13	tion 412 of the Internal Revenue Code of
14	1986 was satisfied with respect to such
15	pension plan for each of such 5 plan years
16	and the average funded ratio of the plan
17	for such 5 plan years was greater than 120
18	percent; and
19	"(ii)(I) the pension plan provided for
20	ad hoc cost-of-living adjustments in bene-
21	fits throughout such 5 plan years, and
22	"(II) no such ad hoc cost-of-living ad-
23	justment in benefits was provided under
24	such pension plan during such 5 plan
25	years.

1	"(B) Funded ratio.—For purposes of
2	subparagraph (A)(i)(II), the funded ratio of a
3	pension plan for a plan year is the ratio, ex-
4	pressed as a percentage, of—
5	"(i) the assets of the plan as of the
6	end of such plan year, to
7	"(ii) the liabilities of the plan as of
8	the end of such plan year.
9	"(g) Running of 2-Year Deadline Period Sus-
10	PENDED.—The submission of an application for a waiver
11	or variance pursuant to this section during the 2-year pe-
12	riod referred to in section 803(f) shall suspend the run-
13	ning of such period. If determined appropriate by the Sec-
14	retary, the Secretary may direct that the running of such
15	period be resumed upon the final conclusion of proceedings
16	to determine whether an application should be granted or
17	denied.
18	"SEC. 805. EFFECT ON OTHER CLAIMS.
19	"(a) OTHER CLAIMS UNAFFECTED.—Nothing in this
20	part shall be construed to alter, impair, or eliminate any
21	claim for retiree health benefits based on conduct alleged
22	to violate the terms of a group health plan, any provision
23	of this Act (other than this part), or both, regardless of
24	whether such conduct occurred prior to, on, or after the

- 1 date of the enactment of the Earned Retiree Healthcare
- 2 Benefits Protection Act of 2011.
- 3 "(b) Other Causes of Action Not Author-
- 4 IZED.—Nothing contained in this part shall be construed
- 5 to authorize any action for recovery of retiree health bene-
- 6 fits unless the conduct giving rise to the claim for recovery
- 7 is alleged to violate the provisions of this part.
- 8 "SEC. 806. REGULATIONS.
- 9 "The Secretary may promulgate such regulations as
- 10 may be necessary to carry out the provisions of this part.
- 11 The Secretary may promulgate any interim final rules as
- 12 the Secretary deems are appropriate to carry out this
- 13 part.".
- 14 (b) CIVIL PENALTY.—Section 502(c) of the Em-
- 15 ployee Retirement Income Security Act of 1974 (29
- 16 U.S.C. 1132(c)) is amended—
- 17 (1) by redesignating the second paragraph (10)
- 18 (relating to consultation between the Secretary of
- 19 Labor and the Secretary of Health and Human
- 20 Services) as paragraph (12); and
- 21 (2) by inserting after the first paragraph (10)
- 22 the following new paragraph:
- "(11) The Secretary may assess any person a civil
- 24 penalty of not more than \$20,000 with respect to each
- 25 failure by such person to meet the requirements of section

- 1 801, 802, or 803 with respect to each participant or bene-
- 2 ficiary aggrieved by such failure.".
- 3 (c) Conforming Amendment.—The table of con-
- 4 tents in section 1 of such Act is amended by inserting
- 5 after the item relating to section 734 the following new
- 6 items:
 - "Part 8—Emergency Retiree Health Benefit Protections
 - "Sec. 801. Prohibition against post-retirement reductions of retiree health benefits by group health plans.
 - "Sec. 802. Adoption by group health plans of provision barring post-retirement reductions in retiree health benefits.
 - "Sec. 803. Restoration by group health plans of benefits reduced after retirement.
 - "Sec. 804. Exemption from restoration of benefits requirements.
 - "Sec. 805. Effect on other claims.
 - "Sec. 806. Regulations.".

7 SEC. 4. EFFECTIVE DATE.

- 8 The amendments made by this Act shall take effect
- 9 on the date of the enactment of this Act, except that sec-
- 10 tion 802 of the Employee Retirement Income Security Act
- 11 of 1974 (as added by section 3 of this Act) shall apply
- 12 with respect to plan years beginning after 180 days after
- 13 the date of the enactment of this Act. Compliance with
- 14 the requirements of part 8 of subtitle B of title I of the
- 15 Employee Retirement Income Security Act of 1974 with
- 16 respect to a group health plan shall not be treated as a
- 17 failure to comply with the terms of such plan.

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