

HB 1040 -- PATIENT PROTECTIONS FOR HEALTH INSURANCE

SPONSOR: Wallingford

The bill prohibits any health benefit plan delivered, issued for delivery, continued, or renewed in this state, except a grandfathered health benefit plan, from imposing a preexisting condition exclusion.

Health benefit plans in this state offering coverage for a dependent child shall offer dependent coverage until the dependent child attains the age of 26 and no plan shall establish lifetime limits on the dollar value of essential health benefits.

The bill requires that if a court of competent jurisdiction rules that the Patient Protection and Affordable Care Act, Pub. L. 111-148, is unconstitutional and the judgment of that court becomes final and definitive, the Attorney General shall give written notification of the final and definitive ruling to the Governor, the Speaker of the House of Representatives, the President Pro Tem of the Senate, and the Director of the Department of Commerce and Insurance and within 30 days of such notification, a task force shall be convened as outlined in the bill to study the essential health benefits that are required under the Patient Protection and Affordable Care Act, Pub. L. 111-148, and determine whether, and to what extent, health carriers shall be required to provide certain essential health benefits. The membership of the task force shall include but not be limited to two members of the House of Representatives appointed by the Speaker and two members of the Senate appointed by the President Pro Tem. The task force shall submit a report to the Governor, the Speaker of the House of Representatives, and the President Pro Tem of the Senate within six months of the notification required as specified in the bill. The task force will expire upon submission of the report.