1	H.153
2	Introduced by Representatives Cina of Burlington, Christensen of
3	Weathersfield, Cordes of Lincoln, Donahue of Northfield,
4	Durfee of Shaftsbury, Houghton of Essex, Lippert of
5	Hinesburg, and Page of Newport City
6	Referred to Committee on
7	Date:
8	Subject: Health; health insurance; preexisting conditions
9	Statement of purpose of bill as introduced: This bill proposes to prohibit
10	preexisting condition exclusions in comprehensive major medical health
11	insurance plans.
12	An act relating to banning preexisting condition exclusions
13	It is hereby enacted by the General Assembly of the State of Vermont:
14	Sec. 1. 8 V.S.A. § 4080 is amended to read:
15	§ 4080. REQUIRED POLICY PROVISIONS
16	(a) No such group insurance policy shall contain any provision relative to
17	notice of claim, proofs of loss, time of payment of claims, or time within which
18	legal action must be brought upon the policy which, in the opinion of the
19	Commissioner, is less favorable to the persons insured than would be permitted

1	by the provisions set forth in section 4065 of this title. In addition, each such
2	policy shall contain in substance the following provisions:
3	* * *
4	(b) A group insurance policy shall not contain any provision that excludes.
5	restricts, or otherwise limits coverage under the policy for one or more
6	preexisting health conditions.
7	Sec. 2. 33 V.S.A. § 1811(d) is amended to read:
8	(d)(1) A registered carrier shall guarantee acceptance of all individuals,
9	small employers, and employees of small employers, and each dependent of
10	such individuals and employees, for any health benefit plan offered by the
11	carrier, regardless of any outstanding premium amount a subscriber may owe
12	to the carrier for coverage provided during the previous plan year.
13	(2) A registered carrier shall not exclude, restrict, or otherwise limit
14	coverage under a health benefit plan for any preexisting health condition.
15	Sec. 3. EFFECTIVE DATE
16	This act shall take effect on January 1, 2020 and shall apply to all individual
17	and group insurance policies and health benefit plans issued on and after
18	January 1, 2020 on such date as a health insurer offers, issues, or renews the
19	policy or plan, but in no event later than January 1, 2021.