

S 1015

Health Care Choice Act of 2005

Congress: 109 (2005–2007, Ended)

Chamber: Senate

Policy Area: Health

Introduced: May 12, 2005

Current Status: Read twice and referred to the Committee on Health, Education, Labor, and Pensions. (text of measure

Latest Action: Read twice and referred to the Committee on Health, Education, Labor, and Pensions. (text of measure as introduced: CR S5103-5105) (May 12, 2005)

Official Text: <https://www.congress.gov/bill/109th-congress/senate-bill/1015>

Sponsor

Name: Sen. DeMint, Jim [R-SC]

Party: Republican • **State:** SC • **Chamber:** Senate

Cosponsors (3 total)

Cosponsor	Party / State	Role	Date Joined
Sen. Brownback, Sam [R-KS]	R · KS		May 4, 2006
Sen. Coburn, Tom [R-OK]	R · OK		May 4, 2006
Sen. Inhofe, James M. [R-OK]	R · OK		May 4, 2006

Committee Activity

Committee	Chamber	Activity	Date
Health, Education, Labor, and Pensions Committee	Senate	Referred To	May 12, 2005

Subjects & Policy Tags

Policy Area:

Health

Related Bills

Bill	Relationship	Last Action
109 HR 2355	Identical bill	Feb 16, 2006: Placed on the Union Calendar, Calendar No. 207.

Health Care Choice Act of 2005 - Amends the Public Health Service Act to provide that the laws of the primary state (as designated by the health insurance issuer) apply to individual health insurance coverage offered by that issuer both in the primary state and in any secondary state if the coverage and issuer comply with this Act. Exempts health insurance issuers from any laws of the secondary state that would: (1) regulate the operation of the health insurance issuer in the secondary state, except for certain activities, including paying taxes and registering with the state insurance commissioner; (2) require any individual health insurance coverage issued by the issuer to be countersigned by an agent or broker residing in the secondary state; or (3) discriminate against the issuer issuing insurance in both the primary state and any secondary state.

Prohibits a health insurance issuer that provides individual health insurance coverage in a primary or secondary state from: (1) upon renewal, taking certain actions based on health-status related factors, including increasing premiums assessed; and (2) offering coverage in a secondary state that is not currently offered for sale in the primary state.

Allows states to require brokers to obtain a license from that state, but not to impose any requirements that discriminate against nonresident brokers.

Requires health insurance issuers offering coverage in both primary and secondary States state to submit to the insurance commissioner of each state: (1) a copy of a plan of operation, a feasibility study, or similar statement; (2) written notice of any change in designation of its primary state; and (3) quarterly financial statements.

Sets forth requirements (regarding determination of capital and an independent review process) that must be met by primary states in order for an issuer to provde insurance in a secondary state.

Gives sole jurisdiction to primary states to enforce the covered laws in primary and secondary states.

Actions Timeline

- **May 12, 2005:** Introduced in Senate
- **May 12, 2005:** Sponsor introductory remarks on measure. (CR S5103)
- **May 12, 2005:** Read twice and referred to the Committee on Health, Education, Labor, and Pensions. (text of measure as introduced: CR S5103-5105)