

S 2477

Health Care Choice Act of 2007

Congress: 110 (2007–2009, Ended)

Chamber: Senate

Policy Area: Health

Introduced: Dec 13, 2007

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

Latest Action: Read twice and referred to the Committee on Health, Education, Labor, and Pensions. (Dec 13, 2007)

Official Text: <https://www.congress.gov/bill/110th-congress/senate-bill/2477>

Sponsor

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

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

Cosponsors (8 total)

Cosponsor	Party / State	Role	Date Joined
Sen. Brownback, Sam [R-KS]	R · KS		Dec 13, 2007
Sen. Burr, Richard [R-NC]	R · NC		Dec 13, 2007
Sen. Coburn, Tom [R-OK]	R · OK		Dec 13, 2007
Sen. Corker, Bob [R-TN]	R · TN		Dec 13, 2007
Sen. Inhofe, James M. [R-OK]	R · OK		Dec 13, 2007
Sen. Vitter, David [R-LA]	R · LA		Dec 13, 2007
Sen. Thune, John [R-SD]	R · SD		Jan 31, 2008
Sen. Wicker, Roger F. [R-MS]	R · MS		Apr 14, 2008

Committee Activity

Committee	Chamber	Activity	Date
Health, Education, Labor, and Pensions Committee	Senate	Referred To	Dec 13, 2007

Subjects & Policy Tags

Policy Area:

Health

Related Bills

Bill	Relationship	Last Action
110 HR 4460	Identical bill	Dec 12, 2007: Referred to the Subcommittee on Health.

Health Care Choice Act of 2007 - Amends the Public Health Service Act to provide that the laws of the state designated by a health insurance issuer (primary state) shall apply to individual health insurance coverage offered by that issuer in the primary state and in any other state (secondary state), but only if the coverage and issuer comply with the conditions of this Act.

Exempts issuers from any secondary state's laws that would prohibit or regulate the operation of the issuer in such state, subject to certain restrictions imposed by such state.

Specifies the notice that an issuer must provide in any insurance coverage offered in a secondary state and at renewal of the policy.

Requires each issuer issuing individual health insurance coverage in both primary and secondary states to submit to: (1) the insurance commissioners of such states a copy of the plan of operation or feasibility study and written notice of any change in its designation of its primary state and of its compliance with all the laws of the primary state; and (2) the insurance commission of each secondary state a copy of the issuer's quarterly financial statement that was submitted to the primary state.

Prohibits an issuer from offering, selling, or issuing individual health insurance coverage in a secondary state if the state insurance commissioner does not use a risk-based capital formula for the determination of capital and surplus requirements for all issuers.

Gives sole jurisdiction to the primary state to enforce the primary state's covered laws in the primary state and any secondary state.

Requires the Comptroller General to study and report to Congress on the effect of this Act on specified health insurance issues.

Actions Timeline

- **Dec 13, 2007:** Introduced in Senate
- **Dec 13, 2007:** Read twice and referred to the Committee on Health, Education, Labor, and Pensions.