

HR 979

Bipartisan Consensus Managed Care Improvement Act of 2007

Congress: 110 (2007–2009, Ended)

Chamber: House

Policy Area: Health

Introduced: Feb 12, 2007

Current Status: Referred to the Subcommittee on Health, Employment, Labor, and Pensions.

Latest Action: Referred to the Subcommittee on Health, Employment, Labor, and Pensions. (Jun 5, 2007)

Official Text: <https://www.congress.gov/bill/110th-congress/house-bill/979>

Sponsor

Name: Rep. Norwood, Charles W. [R-GA-10]

Party: Republican • State: GA • Chamber: House

Cosponsors (1 total)

Cosponsor	Party / State	Role	Date Joined
Rep. Dingell, John D. [D-MI-15]	D · MI		Feb 12, 2007

Committee Activity

Committee	Chamber	Activity	Date
Education and Workforce Committee	House	Referred to	Jun 5, 2007
Energy and Commerce Committee	House	Referred to	Feb 13, 2007
Ways and Means Committee	House	Referred to	Mar 7, 2007

Subjects & Policy Tags

Policy Area:

Health

Related Bills

No related bills are listed.

Bipartisan Consensus Managed Care Improvement Act of 2007 - Sets forth standards for group health plans, including: (1) requiring plans to conduct utilization review activities in accordance with this Act; (2) establishing internal and external appeals processes; (3) requiring a grievance system; (4) requiring the plans to offer out-of network coverage; (5) prohibiting plans from requiring prior authorization for emergency services; (6) prohibiting prior authorization requirements for access to obstetrical or gynecological care; (7) requiring plans to provide for continuity of care during a transition period; (8) requiring plans to provide exceptions to formulary limitations; (9) prohibiting plans from restricting a health care professional from advising patients about health status or medical care; and (10) requiring prompt payment of claims.

Amends the Public Health Service Act, the Employee Retirement Income Security Act (ERISA), and the Internal Revenue Code to require group health plans to comply with the patient protection requirements of this Act. Requires health insurance issuers offering individual health insurance coverage to comply with such requirements.

Sets forth effective dates and provisions regarding application of this Act to collective bargaining agreements.

Requires the Secretaries of Labor, Health and Human Services, and Treasury to ensure coordination of the administration of this Act.

Establishes the Health Care Panel to Devise a Uniform Explanation of Benefits to devise a single form for use by third-party health care payers for the remittance of claims to providers.

Actions Timeline

- **Jun 5, 2007:** Referred to the Subcommittee on Health, Employment, Labor, and Pensions.
- **Mar 7, 2007:** Referred to the Subcommittee on Health.
- **Feb 13, 2007:** Referred to the Subcommittee on Health.
- **Feb 12, 2007:** Introduced in House
- **Feb 12, 2007:** Referred to the Committee on Energy and Commerce, and in addition to the Committees on Education and Labor, and Ways and Means, for a period to be subsequently determined by the Speaker, in each case for consideration of such provisions as fall within the jurisdiction of the committee concerned.