

## S 1730

### Fairness in Health Insurance Act

**Congress:** 111 (2009–2011, Ended)

**Chamber:** Senate

**Policy Area:** Health

**Introduced:** Sep 30, 2009

**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 S9984) (Sep 30, 2009)

**Official Text:** <https://www.congress.gov/bill/111th-congress/senate-bill/1730>

### Sponsor

**Name:** Sen. Franken, Al [D-MN]

**Party:** Democratic • **State:** MN • **Chamber:** Senate

### Cosponsors (6 total)

Cosponsor	Party / State	Role	Date Joined
Sen. Rockefeller, John D., IV [D-WV]	D · WV		Sep 30, 2009
Sen. Sanders, Bernard [I-VT]	I · VT		Sep 30, 2009
Sen. Whitehouse, Sheldon [D-RI]	D · RI		Sep 30, 2009
Sen. Begich, Mark [D-AK]	D · AK		Oct 26, 2009
Sen. Leahy, Patrick J. [D-VT]	D · VT		Nov 9, 2009
Sen. Stabenow, Debbie [D-MI]	D · MI		Nov 9, 2009

### Committee Activity

Committee	Chamber	Activity	Date
Health, Education, Labor, and Pensions Committee	Senate	Referred To	Sep 30, 2009

### Subjects & Policy Tags

#### Policy Area:

Health

### Related Bills

Bill	Relationship	Last Action
111 HR 3681	Related bill	Oct 1, 2009: Referred to the Subcommittee on Health.

Fairness in Health Insurance Act - Prohibits a health insurance issuer from offering health insurance coverage unless the issuer demonstrates that such coverage has a medical loss ratio of at least 90%.

Directs the Secretary: (1) to establish a uniform definition of "medical loss ratio" and methodology for calculating it, which shall take into account the circumstances of different plans and activities related to health services, such as chronic disease management and quality assurance; and (2) by December 31, 2010, to develop, publish, and implement the standardized data elements and definitions to be used by health insurance issuers in the reporting of data necessary to calculate such ratio.

Requires each issuer: (1) beginning in plan year 2011, to provide the Secretary with data to enable the Secretary to determine whether the issuer is in compliance with this Act; and (2) to provide payment rebates to enrollees for any plan year in which the coverage has a medical loss ratio below 90%.

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### **Actions Timeline**

- **Sep 30, 2009:** Introduced in Senate
- **Sep 30, 2009:** Sponsor introductory remarks on measure. (CR S9983-9984)
- **Sep 30, 2009:** Read twice and referred to the Committee on Health, Education, Labor, and Pensions. (text of measure as introduced: CR S9984)