

## HR 2149

Protecting Americans with Pre-existing Conditions Act of 2021

**Congress:** 117 (2021–2023, Ended)

**Chamber:** House

**Policy Area:** Health

**Introduced:** Mar 23, 2021

**Current Status:** Referred to the Subcommittee on Health.

**Latest Action:** Referred to the Subcommittee on Health. (Mar 24, 2021)

**Official Text:** <https://www.congress.gov/bill/117th-congress/house-bill/2149>

### Sponsor

**Name:** Rep. Kuster, Ann M. [D-NH-2]

**Party:** Democratic • **State:** NH • **Chamber:** House

### Cosponsors (2 total)

Cosponsor	Party / State	Role	Date Joined
Rep. Beyer, Donald S., Jr. [D-VA-8]	D · VA		Mar 23, 2021
Rep. Courtney, Joe [D-CT-2]	D · CT		Mar 23, 2021

### Committee Activity

Committee	Chamber	Activity	Date
Energy and Commerce Committee	House	Referred to	Mar 24, 2021
Ways and Means Committee	House	Referred to	Mar 23, 2021

### Subjects & Policy Tags

**Policy Area:**

Health

### Related Bills

Bill	Relationship	Last Action
117 S 779	Identical bill	<b>Mar 16, 2021:</b> Read twice and referred to the Committee on Finance.

## Protecting Americans with Pre-Existing Conditions Act of 2021

This bill nullifies specified guidance and final rule provisions pertaining to Section 1332 waivers (also known as State Innovation Waivers or State Relief and Empowerment Waivers) issued by the Department of the Treasury and the Department of Health and Human Services. The provisions allow states to forego certain requirements of the Patient Protection and Affordable Care Act in order to implement experimental plans for health care coverage, as long as the resulting coverage meets certain statutory criteria.

The provisions, which supersede earlier guidance from 2015, alter agency interpretation of how states may satisfy the statutory criteria for waiver approval. For example, the provisions (1) redefine acceptable coverage under such waivers to include short-term, limited-duration insurance and association health plans; (2) allow the comprehensiveness and affordability of coverage under such waivers to be assessed based on projected availability, rather than enrollment; and (3) allow the level of coverage to be assessed based on the effects over the entire course of the waiver, rather than per year.

### Actions Timeline

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- **Mar 24, 2021:** Referred to the Subcommittee on Health.
- **Mar 23, 2021:** Introduced in House
- **Mar 23, 2021:** Referred to the Subcommittee on Health.
- **Mar 23, 2021:** Referred to the Committee on Energy and Commerce, and in addition to the Committee on 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.