

**SEC. 1563 [sic]. CONFORMING AMENDMENTS.**

(a) APPLICABILITY.—Section 2735 of the Public Health Service Act (42 U.S.C. 300gg–21), as so redesignated by section 1001(4), is amended—

(1) by striking subsection (a);

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- (2) in subsection (b)—
- (A) in paragraph (1), by striking “1 through 3” and inserting “1 and 2”; and
- (B) in paragraph (2)—
- (i) in subparagraph (A), by striking “subparagraph (D)” and inserting “subparagraph (D) or (E)”;
- (ii) by striking “1 through 3” and inserting “1 and 2”; and
- (iii) by adding at the end the following: *[Provision likely amended by section 10107(a)]*
- “(E) ELECTION NOT APPLICABLE.—The election described in subparagraph (A) shall not be available with respect to the provisions of subparts I and II.”;
- (3) in subsection (c), by striking “1 through 3 shall not apply to any group” and inserting “1 and 2 shall not apply to any individual coverage or any group”; and
- (4) in subsection (d)—
- (A) in paragraph (1), by striking “1 through 3 shall not apply to any group” and inserting “1 and 2 shall not apply to any individual coverage or any group”;
- (B) in paragraph (2)—
- (i) in the matter preceding subparagraph (A), by striking “1 through 3 shall not apply to any group” and inserting “1 and 2 shall not apply to any individual coverage or any group”; and
- (ii) in subparagraph (C), by inserting “or, with respect to individual coverage, under any health insurance coverage maintained by the same health insurance issuer”; and
- (C) in paragraph (3), by striking “any group” and inserting “any individual coverage or any group”.
- (b) DEFINITIONS.—Section 2791(d) of the Public Health Service Act (42 U.S.C. 300gg–91(d)) is amended by adding at the end the following:
- “(20) QUALIFIED HEALTH PLAN.—The term ‘qualified health plan’ has the meaning given such term in section 1301(a) of the Patient Protection and Affordable Care Act.
- “(21) EXCHANGE.—The term ‘Exchange’ means an American Health Benefit Exchange established under section 1311 of the Patient Protection and Affordable Care Act.”.
- (c) TECHNICAL AND CONFORMING AMENDMENTS.—Title XXVII of the Public Health Service Act (42 U.S.C. 300gg et seq.) is amended—
- (1) in section 2704 (42 U.S.C. 300gg), as so redesignated by section 1201(2)—
- (A) in subsection (c)—
- (i) in paragraph (2), by striking “group health plan” each place that such term appears and inserting “group or individual health plan”; and
- (ii) in paragraph (3)—
- (I) by striking “group health insurance” each place that such term appears and inserting “group or individual health insurance”; and

- (II) in subparagraph (D), by striking “small or large” and inserting “individual or group”;
- (B) in subsection (d), by striking “group health insurance” each place that such term appears and inserting “group or individual health insurance”; and
- (C) in subsection (e)(1)(A), by striking “group health insurance” and inserting “group or individual health insurance”;
- (2) by striking the second heading for subpart 2 of part A (relating to other requirements);
- (3) in section 2725 (42 U.S.C. 300gg-4), as so redesignated by section 1001(2)—
  - (A) in subsection (a), by striking “health insurance issuer offering group health insurance coverage” and inserting “health insurance issuer offering group or individual health insurance coverage”;
  - (B) in subsection (b)—
    - (i) by striking “health insurance issuer offering group health insurance coverage in connection with a group health plan” in the matter preceding paragraph (1) and inserting “health insurance issuer offering group or individual health insurance coverage”; and
    - (ii) in paragraph (1), by striking “plan” and inserting “plan or coverage”;
  - (C) in subsection (c)—
    - (i) in paragraph (2), by striking “group health insurance coverage offered by a health insurance issuer” and inserting “health insurance issuer offering group or individual health insurance coverage”; and
    - (ii) in paragraph (3), by striking “issuer” and inserting “health insurance issuer”; and
  - (D) in subsection (e), by striking “health insurance issuer offering group health insurance coverage” and inserting “health insurance issuer offering group or individual health insurance coverage”;
- (4) in section 2726 (42 U.S.C. 300gg-5), as so redesignated by section 1001(2)—
  - (A) in subsection (a), by striking “(or health insurance coverage offered in connection with such a plan)” each place that such term appears and inserting “or a health insurance issuer offering group or individual health insurance coverage”;
  - (B) in subsection (b), by striking “(or health insurance coverage offered in connection with such a plan)” each place that such term appears and inserting “or a health insurance issuer offering group or individual health insurance coverage”; and
  - (C) in subsection (c)—
    - (i) in paragraph (1), by striking “(and group health insurance coverage offered in connection with a group health plan)” and inserting “and a health insurance issuer offering group or individual health insurance coverage”;

- (ii) in paragraph (2), by striking “(or health insurance coverage offered in connection with such a plan)” each place that such term appears and inserting “or a health insurance issuer offering group or individual health insurance coverage”;
- (5) in section 2727 (42 U.S.C. 300gg–6), as so redesignated by section 1001(2), by striking “health insurance issuers providing health insurance coverage in connection with group health plans” and inserting “and health insurance issuers offering group or individual health insurance coverage”;
- (6) in section 2728 (42 U.S.C. 300gg–7), as so redesignated by section 1001(2)—
  - (A) in subsection (a), by striking “health insurance coverage offered in connection with such plan” and inserting “individual health insurance coverage”;
  - (B) in subsection (b)—
    - (i) in paragraph (1), by striking “or a health insurance issuer that provides health insurance coverage in connection with a group health plan” and inserting “or a health insurance issuer that offers group or individual health insurance coverage”;
    - (ii) in paragraph (2), by striking “health insurance coverage offered in connection with the plan” and inserting “individual health insurance coverage”; and
    - (iii) in paragraph (3), by striking “health insurance coverage offered by an issuer in connection with such plan” and inserting “individual health insurance coverage”;
  - (C) in subsection (c), by striking “health insurance issuer providing health insurance coverage in connection with a group health plan” and inserting “health insurance issuer that offers group or individual health insurance coverage”; and
  - (D) in subsection (e)(1), by striking “health insurance coverage offered in connection with such a plan” and inserting “individual health insurance coverage”;
- (7) by striking the heading for subpart 3;
- (8) in section 2731 (42 U.S.C. 300gg–11), as so redesignated by section 1001(3)—
  - (A) by striking the section heading and all that follows through subsection (b);
  - (B) in subsection (c)—
    - (i) in paragraph (1)—
      - (I) in the matter preceding subparagraph (A), by striking “small group” and inserting “group and individual”; and
      - (II) in subparagraph (B)—
        - (aa) in the matter preceding clause (i), by inserting “and individuals” after “employers”;
        - (bb) in clause (i), by inserting “or any additional individuals” after “additional groups”;
        - and
        - (cc) in clause (ii), by striking “without regard to the claims experience of those employ-

- ers and their employees (and their dependents) or any health status-related factor relating to such” and inserting “and individuals without regard to the claims experience of those individuals, employers and their employees (and their dependents) or any health status-related factor relating to such individuals”; and
- (ii) in paragraph (2), by striking “small group” and inserting “group or individual”;
- (C) in subsection (d)—
- (i) by striking “small group” each place that such appears and inserting “group or individual”; and
- (ii) in paragraph (1)(B)—
- (I) by striking “all employers” and inserting “all employers and individuals”;
- (II) by striking “those employers” and inserting “those individuals, employers”; and
- (III) by striking “such employees” and inserting “such individuals, employees”;
- (D) by striking subsection (e);
- (E) by striking subsection (f); and
- (F) by transferring such section (as amended by this paragraph) to appear at the end of section 2702 (as added by section 1001(4));
- (9) in section 2732 (42 U.S.C. 300gg–12), as so redesignated by section 1001(3)—
- (A) by striking the section heading and all that follows through subsection (a);
- (B) in subsection (b)—
- (i) in the matter preceding paragraph (1), by striking “group health plan in the small or large group market” and inserting “health insurance coverage offered in the group or individual market”;
- (ii) in paragraph (1), by inserting “, or individual, as applicable,” after “plan sponsor”;
- (iii) in paragraph (2), by inserting “, or individual, as applicable,” after “plan sponsor”; and
- (iv) by striking paragraph (3) and inserting the following:
- “(3) VIOLATION OF PARTICIPATION OR CONTRIBUTION RATES.—In the case of a group health plan, the plan sponsor has failed to comply with a material plan provision relating to employer contribution or group participation rules, pursuant to applicable State law.”;
- (C) in subsection (c)—
- (i) in paragraph (1)—
- (I) in the matter preceding subparagraph (A), by striking “group health insurance coverage offered in the small or large group market” and inserting “group or individual health insurance coverage”;
- (II) in subparagraph (A), by inserting “or individual, as applicable,” after “plan sponsor”;

- (III) in subparagraph (B)—
  - (aa) by inserting “or individual, as applicable,” after “plan sponsor”; and
  - (bb) by inserting “or individual health insurance coverage”; and
- (IV) in subparagraph (C), by inserting “or individuals, as applicable,” after “those sponsors”; and
- (ii) in paragraph (2)(A)—
  - (I) in the matter preceding clause (i), by striking “small group market or the large group market, or both markets,” and inserting “individual or group market, or all markets,”; and
  - (II) in clause (i), by inserting “or individual, as applicable,” after “plan sponsor”; and
- (D) by transferring such section (as amended by this paragraph) to appear at the end of section 2703 (as added by section 1001(4));
- (10) in section 2733 (42 U.S.C. 300gg–13), as so redesignated by section 1001(4)—
  - (A) in subsection (a)—
    - (i) in the matter preceding paragraph (1), by striking “small employer” and inserting “small employer or an individual”;
    - (ii) in paragraph (1), by inserting “, or individual, as applicable,” after “employer” each place that such appears; and
    - (iii) in paragraph (2), by striking “small employer” and inserting “employer, or individual, as applicable,”;
  - (B) in subsection (b)—
    - (i) in paragraph (1)—
      - (I) in the matter preceding subparagraph (A), by striking “small employer” and inserting “employer, or individual, as applicable,”;
      - (II) in subparagraph (A), by adding “and” at the end;
      - (III) by striking subparagraphs (B) and (C); and
      - (IV) in subparagraph (D)—
        - (aa) by inserting “, or individual, as applicable,” after “employer”; and
        - (bb) by redesignating such subparagraph as subparagraph (B);
    - (ii) in paragraph (2)—
      - (I) by striking “small employers” each place that such term appears and inserting “employers, or individuals, as applicable,”; and
      - (II) by striking “small employer” and inserting “employer, or individual, as applicable,”; and
    - (C) by redesignating such section (as amended by this paragraph) as section 2709 and transferring such section to appear after section 2708 (as added by section 1001(5));
    - (11) by redesignating subpart 4 as subpart 2;

(12) in section 2735 (42 U.S.C. 300gg–21), as so redesignated by section 1001(4)—

(A) by striking subsection (a);

(B) by striking “subparts 1 through 3” each place that such appears and inserting “subpart 1”;

(C) by redesignating subsections (b) through (e) as subsections (a) through (d), respectively; and

(D) by redesignating such section (as amended by this paragraph) as section 2722;

(13) in section 2736 (42 U.S.C. 300gg–22), as so redesignated by section 1001(4)—

(A) in subsection (a)—

(i) in paragraph (1), by striking “small or large group markets” and inserting “individual or group market”; and

(ii) in paragraph (2), by inserting “or individual health insurance coverage” after “group health plans”;

(B) in subsection (b)(1)(B), by inserting “individual health insurance coverage or” after “respect to”; and

(C) by redesignating such section (as amended by this paragraph) as section 2723;

(14) in section 2737(a)(1) (42 U.S.C. 300gg–23), as so redesignated by section 1001(4)—

(A) by inserting “individual or” before “group health insurance”; and

(B) by redesignating such section (as amended by this paragraph) as section 2724;

(15) in section 2762 (42 U.S.C. 300gg–62)—

(A) in the section heading by inserting “**AND APPLICATION**” before the period; and

(B) by adding at the end the following:

“(c) **APPLICATION OF PART A PROVISIONS.**—

“(1) **IN GENERAL.**—The provisions of part A shall apply to health insurance issuers providing health insurance coverage in the individual market in a State as provided for in such part.

“(2) **CLARIFICATION.**—To the extent that any provision of this part conflicts with a provision of part A with respect to health insurance issuers providing health insurance coverage in the individual market in a State, the provisions of such part A shall apply.”; and

(16) in section 2791(e) (42 U.S.C. 300gg–91(e))—

(A) in paragraph (2), by striking “51” and inserting “101”; and

(B) in paragraph (4)—

(i) by striking “at least 2” each place that such appears and inserting “at least 1”; and

(ii) by striking “50” and inserting “100”.

(d) **APPLICATION.**—[42 U.S.C. 18120] Notwithstanding any other provision of the Patient Protection and Affordable Care Act, nothing in such Act (or an amendment made by such Act) shall be construed to—

(1) prohibit (or authorize the Secretary of Health and Human Services to promulgate regulations that prohibit) a

group health plan or health insurance issuer from carrying out utilization management techniques that are commonly used as of the date of enactment of this Act; or

(2) restrict the application of the amendments made by this subtitle.

(e) TECHNICAL AMENDMENT TO THE EMPLOYEE RETIREMENT INCOME SECURITY ACT OF 1974.—Subpart B of part 7 of subtitle A of title I of the Employee Retirement Income Security Act of 1974 (29 U.S.C. 1181 et. seq.) is amended, by adding at the end the following:

**“SEC. 715 [29 U.S.C. 1185d]. ADDITIONAL MARKET REFORMS.**

“(a) GENERAL RULE.—Except as provided in subsection (b)—

“(1) the provisions of part A of title XXVII of the Public Health Service Act (as amended by the Patient Protection and Affordable Care Act) shall apply to group health plans, and health insurance issuers providing health insurance coverage in connection with group health plans, as if included in this subpart; and

“(2) to the extent that any provision of this part conflicts with a provision of such part A with respect to group health plans, or health insurance issuers providing health insurance coverage in connection with group health plans, the provisions of such part A shall apply.

“(b) EXCEPTION.—Notwithstanding subsection (a), the provisions of sections 2716 and 2718 of title XXVII of the Public Health Service Act (as amended by the Patient Protection and Affordable Care Act) shall not apply with respect to self-insured group health plans, and the provisions of this part shall continue to apply to such plans as if such sections of the Public Health Service Act (as so amended) had not been enacted.”.

(f) TECHNICAL AMENDMENT TO THE INTERNAL REVENUE CODE OF 1986.—Subchapter B of chapter 100 of the Internal Revenue Code of 1986 is amended by adding at the end the following:

**“SEC. 9815. ADDITIONAL MARKET REFORMS.**

“(a) GENERAL RULE.—Except as provided in subsection (b)—

“(1) the provisions of part A of title XXVII of the Public Health Service Act (as amended by the Patient Protection and Affordable Care Act) shall apply to group health plans, and health insurance issuers providing health insurance coverage in connection with group health plans, as if included in this subchapter; and

“(2) to the extent that any provision of this subchapter conflicts with a provision of such part A with respect to group health plans, or health insurance issuers providing health insurance coverage in connection with group health plans, the provisions of such part A shall apply.

“(b) EXCEPTION.—Notwithstanding subsection (a), the provisions of sections 2716 and 2718 of title XXVII of the Public Health Service Act (as amended by the Patient Protection and Affordable Care Act) shall not apply with respect to self-insured group health plans, and the provisions of this subchapter shall continue to apply to such plans as if such sections of the Public Health Service Act (as so amended) had not been enacted.”.



