Union Calendar No. H.R. 2868

118TH CONGRESS 1ST SESSION

[Report No. 118-]

To amend the Employee Retirement Income Security Act of 1974 to clarify the treatment of certain association health plans as employers, and for other purposes.

IN THE HOUSE OF REPRESENTATIVES

April 25, 2023

Mr. WALBERG (for himself, Ms. FOXX, Mr. GOOD of Virginia, Mr. ALLEN, Mr. CRENSHAW, and Mr. BURGESS) introduced the following bill; which was referred to the Committee on Education and the Workforce

JUNE --, 2023

Reported with an amendment, committed to the Committee of the Whole House on the State of the Union, and ordered to be printed

[Strike out all after the enacting clause and insert the part printed in italic]

[For text of introduced bill, see copy of bill as introduced on April 25, 2023]

A BILL

To amend the Employee Retirement Income Security Act of 1974 to clarify the treatment of certain association health plans as employers, and for other purposes.

1 Be it enacted by the Senate and House of Representa-2 tives of the United States of America in Congress assembled, 3 SECTION 1. SHORT TITLE. 4 This Act may be cited as the "Association Health 5 Plans Act". SEC. 2. TREATMENT OF GROUP OR ASSOCIATION OF EM-6 7 PLOYERS. 8 (a) IN GENERAL.—Section 3(5) of the Employee Re-9 tirement Income Security Act of 1974 (29 U.S.C. 1002(5)) 10 is amended— 11 (1) by striking "The term" and inserting "(A) 12 The term"; and 13 (2) by adding at the end the following: 14 "(B) For purposes of subparagraph (A), a group or 15 association of employers shall be treated as an 'employer', regardless of whether the employers composing such group 16 or association are in the same industry, trade, or profes-17 18 sion, if such group or association— 19 "(i)(I) has established and maintains an em-20 ployee welfare benefit plan that is a group health 21 plan (as defined in section 733(a)(1)); 22 "(II) provides coverage under such plan to at 23 least 51 employees after all of the employees employed 24 by all of the employer members of such group or asso-

1	ciation have been aggregated and counted together as
2	described in subparagraph (D);
3	"(III) has been actively in existence for at least
4	2 years prior to establishing and maintaining an em-
5	ployer welfare benefit plan that is a group health
6	plan (as defined in section 733(a)(1));
7	"(IV) has been formed and maintained in good
8	faith for purposes other than providing medical care
9	(as defined in section $733(a)(2)$) through the purchase
10	of insurance or otherwise;
11	((V) does not condition membership in the group
12	or association on any health status-related factor (as
13	described in section $702(a)(1)$) relating to any indi-
14	vidual;
15	"(VI) makes coverage under such plan available
16	to all employer members of such group or association
17	regardless of any health status-related factor (as de-
18	scribed in section $702(a)(1)$) relating to such em-
19	ployer members;
20	"(VII) does not provide coverage under such plan
21	to any individual other than an employee of an em-
22	ployer member of such group or association;
23	"(VIII) has established a governing board with
24	by-laws or other similar indications of formality to
25	manage and operate such plan in both form and sub-

1	stance, of which at least 75 percent of the board mem-
2	bers shall be made up of employer members of such
3	group or association participating in the plan that
4	are duly elected by each participating employer mem-
5	ber casting 1 vote during a scheduled election;
6	"(IX) is not a health insurance issuer (as defined
7	in section 733(b)(2)), and is not owned or controlled
8	by such a health insurance issuer or by a subsidiary
9	or affiliate of such a health insurance issuer, other
10	than to the extent such a health insurance issuer—
11	"(aa) may participate in the group or asso-
12	ciation as a member; and
13	"(bb) may provide services such as assist-
14	ance with plan development, marketing, and ad-
15	ministrative services to such group or associa-
16	tion;
17	"(ii) meets any set of criteria to qualify for such
18	treatment in an advisory opinion issued by the Sec-
19	retary prior to the date of enactment of the Associa-
20	tion Health Plans Act; or
21	"(iii) meets any other set of criteria to qualify
22	for such treatment that the Secretary by regulation
23	may provide.
24	(C)(i) For purposes of subparagraph (B), a self-em-
25	ployed individual shall be treated as—

1	``(I) an employer who may become a member of
2	a group or association of employers;
3	``(II) an employee who may participate in an
4	employee welfare benefit plan established and main-
5	tained by such group or association; and
6	"(III) a participant of such plan subject to the
7	eligibility determination and monitoring require-
8	ments set forth in clause (iii).
9	"(ii) For purposes of this subparagraph, the term 'self-
10	employed individual' means an individual who—
11	"(I) does not have any common law employees;
12	"(II) has an ownership right in a trade or busi-
13	ness, regardless of whether such trade or business is
14	incorporated or unincorporated;
15	"(III) earns wages (as defined in section 3121(a)
16	of the Internal Revenue Code of 1986) or self-employ-
17	ment income (as defined in section 1402(b) of such
18	Code) from such trade or business; and
19	"(IV) works at least 10 hours per week or 40
20	hours per month providing personal services to such
21	trade or business.
22	"(iii) The board of a group or association of employers
23	shall—
24	``(I) initially determine whether an individual
25	meets the requirements under clause (ii) to be consid-

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1	ered a self-employed individual for the purposes of
2	being treated as an—
3	"(aa) employer member of such group or as-
4	sociation (in accordance with clause $(i)(I)$); and
5	"(bb) employee who may participate in the
6	employee welfare benefit plan established and
7	maintained by such group or association (in ac-
8	cordance with clause (i)(II));
9	"(II) through reasonable monitoring procedures,
10	periodically determine whether the individual con-
11	tinues to meet such requirements; and
12	"(III) if the board determines that an individual
13	no longer meets such requirements, not make such
14	plan coverage available to such individual (or de-
15	pendents thereof) for any plan year following the plan
16	year during which the board makes such determina-
17	tion. If, subsequent to a determination that an indi-
18	vidual no longer meets such requirements, such indi-
19	vidual furnishes evidence of satisfying such require-
20	ments, such individual (and dependents thereof) shall
21	be eligible to receive plan coverage.
22	``(D) For purposes of subparagraph (B), all of the em-
23	ployees (including self-employed individuals) employed by
24	all of the employer members (including self-employed indi-

25 viduals) of a group or association of employers shall be—

1	"(i) treated as employed by a single employer;
2	and
3	``(ii) aggregated and counted together for pur-
4	poses of any regulation of an employee welfare benefit
5	plan established and maintained by such group or as-
6	sociation.".
7	(b) Determination of Employer or Joint Em-
8	PLOYER STATUS.—The provision of employee welfare ben-
9	efit plan coverage by a group or association of employers
10	shall not be construed as evidence for establishing an em-
11	ployer or joint employer relationship under any Federal or
12	State law.
13	SEC. 3. RULES APPLICABLE TO GROUP HEALTH PLANS ES-
14	TABLISHED AND MAINTAINED BY A GROUP
14 15	TABLISHED AND MAINTAINED BY A GROUP OR ASSOCIATION OF EMPLOYERS.
15	OR ASSOCIATION OF EMPLOYERS.
15 16	OR ASSOCIATION OF EMPLOYERS. Part 7 of subtitle B of title I of the Employee Retire-
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15 16 17 18 19 20 21	OR ASSOCIATION OF EMPLOYERS. Part 7 of subtitle B of title I of the Employee Retire- ment Income Security Act of 1974 (29 U.S.C. 1181, et seq.) is amended by adding at the end the following: "SEC. 736. RULES APPLICABLE TO GROUP HEALTH PLANS ESTABLISHED AND MAINTAINED BY A GROUP OR ASSOCIATION OF EMPLOYERS.
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1	employers described in section $3(5)(B)$, such plan
2	may—
3	"(i) establish base premium rates formed on
4	an actuarially sound, modified community rat-
5	ing methodology that considers the pooling of all
6	plan participant claims; and
7	"(ii) utilize the specific risk profile of each
8	employer member of such group or association to
9	determine contribution rates for each such em-
10	ployer member's share of a premium by actuari-
11	ally adjusting above or below the established base
12	premium rates.
13	"(B) For purposes of paragraph (1), the term
14	'employer member' means—
15	"(i) an employer who is a member of such
16	group or association of employers and employs
17	at least 1 common law employee; or
18	"(ii) a group made up solely of self-em-
19	ployed individuals, within which all of the self-
20	employed individual members of such group or
21	association are aggregated together as a single
22	employer member group, provided the group in-
23	cludes at least 20 self-employed individual mem-
24	bers.

1	"(2) In the event a group or association is made
2	up solely of self-employed individuals (and no em-
3	ployers with at least 1 common law employee are
4	members of such group or association), the group
5	health plan established by such group or association
6	shall—
7	"(A) treat all self-employed individuals who
8	are members of such group or association as a
9	single risk pool;
10	"(B) pool all plan participant claims; and
11	``(C) charge each plan participant the same
12	premium rate.
13	"(b) Discrimination and Pre-existing Condition
14	PROTECTIONS.—A group health plan established and main-
15	tained by a group or association of employers described in
16	section 3(5)(B) shall be prohibited from—
17	"(1) establishing any rule for eligibility (includ-
18	ing continued eligibility) of any individual (includ-
19	ing an employee of an employer member or a self-em-
20	ployed individual, or a dependent of such employee or
21	self-employed individual) to enroll for benefits under
22	the terms of the plan that discriminates based on any
23	health status-related factor that relates to such indi-
24	vidual (consistent with the rules under section
25	702(a)(1));

1 "(2) requiring an individual (including an em-2 ployee of an employer member or a self-employed in-3 dividual, or a dependent of such employee or self-em-4 ployed individual), as a condition of enrollment or 5 continued enrollment under the plan, to pay a pre-6 mium or contribution that is greater than the pre-7 mium or contribution for a similarly situated indi-8 vidual enrolled in the plan based on any health sta-9 tus-related factor that relates to such individual (con-10 sistent with the rules under section 702(b)(1); and 11 "(3) denying coverage under such plan on the 12 basis of a pre-existing condition (consistent with the

12 value of a producting condition (consistent attachment)
13 rules under section 2704 of the Public Health Service
14 Act).".

15 SEC. 4. RULE OF CONSTRUCTION.

16 Nothing in this Act shall be construed to exempt a group health plan which is an employee welfare benefit plan 17 18 offered through a group or association of employers from 19 the requirements of part 7 of subtitle B of title I of the 20 Employee Retirement Income Security Act of 1974 (29) 21 U.S.C. 1181 et. seq.), including the provisions of part A 22 of title XXVII of the Public Health Service Act as incor-23 porated by reference into this Act through section 715.