



1           “(A) IN GENERAL.—Subject to subpara-  
2 graph (B), the requirements of subparts I and  
3 II and part D shall not apply to a defined-ben-  
4 efit group health plan in relation to its provi-  
5 sion of excepted benefits described in section  
6 2791(c)(5) if all of the following conditions are  
7 met:

8           “(i) The benefits are offered only to  
9 employees who do not have access to a  
10 group health plan from their employer.

11           “(ii) There is no coordination between  
12 the provision of such benefits and any ex-  
13 clusion of benefits under any group health  
14 plan maintained by the same plan sponsor.

15           “(iii) The sponsor of such benefits  
16 provides a one-page notice to employees  
17 that—

18           “(I) such benefits do not con-  
19 stitute minimum essential coverage  
20 and are not required to comply with  
21 certain Federal requirements for  
22 group health plans;

23           “(II) such benefits do not include  
24 coverage for services that are not fur-  
25 nished remotely or via telehealth, in-

1 including emergency services and inpa-  
2 tient care; and

3 “(III) such employee may be eli-  
4 gible to enroll in a qualified health  
5 plan.

6 “(B) APPLICABLE REQUIREMENTS.—The  
7 requirements described in section 2704 (relat-  
8 ing to the prohibition of preexisting condition  
9 exclusions or other discrimination based on  
10 health status), section 2705 (relating to prohi-  
11 bition of discrimination against individual par-  
12 ticipants and beneficiaries based on health sta-  
13 tus), section 2712 (relating to prohibition of re-  
14 scissions), and section 2726 (relating to parity  
15 in mental health or substance use disorder ben-  
16 efits) of this part shall apply to all defined-ben-  
17 efit plans.”.

18 (c) PUBLICATION OF MODEL NOTICE.—Not later  
19 than 180 days after the date of enactment of this Act,  
20 the Secretary of Health and Human Services, taking into  
21 account input from the public, shall publish a model notice  
22 that may be used by a group health plan (as defined in  
23 section 2791 of the Public Health Service Act (42 U.S.C.  
24 300gg–91)) for purposes satisfying the requirement under

1 paragraph (4) of section 2722(c) of such Act (42 U.S.C.  
2 300gg–21(c)), as added by subsection (b).

3 (d) REQUIRED RULEMAKING.—Not later than one  
4 year after the date of enactment of this Act, the Secretary  
5 of Health and Human Services shall, through notice-and-  
6 comment rulemaking, establish regulations specifying the  
7 manner in which a defined benefit group health plan (as  
8 described in paragraph (5) of section 2791(c) of the Public  
9 Health Service Act (42 U.S.C. 300gg–91(c)) shall comply  
10 with the requirements of sections 2704, 2705, 2712, and  
11 2726 of such Act.

12 (e) EFFECTIVE DATE.—The amendments made by  
13 this section shall apply with respect to plan years begin-  
14 ning on or after the date of enactment of this Act.

Amend the title so as to read: “A bill to amend title  
XXVII of the Public Health Service Act to treat benefits  
for services furnished remotely or via telehealth under a  
defined-benefit group health plan as excepted benefits,  
and for other purposes.”.

