



General Assembly

January Session, 2005

**Amendment**

LCO No. 5907

**\*HB0691505907HDO\***

Offered by:  
REP. O'CONNOR, 35<sup>th</sup> Dist.

To: Subst. House Bill No. 6915      File No. 265      Cal. No. 240

**"AN ACT CONCERNING PORTABILITY UNDER PLANS ISSUED THROUGH THE HEALTH REINSURANCE ASSOCIATION."**

1      Strike everything after the enacting clause and substitute the  
2      following in lieu thereof:

3      "Section 1. Section 38a-553 of the general statutes is amended by  
4      adding subsection (k) as follows (*Effective October 1, 2005*):

5      (NEW) (k) (1) Each comprehensive health care plan issued through  
6      the Health Reinsurance Association shall provide coverage, under the  
7      terms and conditions of the plan, for the preexisting conditions of any  
8      group member or dependent who is newly insured under the plan on  
9      or after October 1, 2005, and was previously covered for such  
10     preexisting condition under the terms of the group member's or  
11     dependent's preceding qualifying coverage, provided the preceding  
12     qualifying coverage was continuous to a date less than one hundred  
13     twenty days prior to the effective date of the new coverage, exclusive  
14     of any applicable waiting period, except in the case of a newly insured  
15     group member whose preceding qualifying coverage was terminated

16 due to an involuntary loss of employment, the preceding qualifying  
17 coverage must have been continuous to a date not more than one  
18 hundred fifty days prior to the effective date of the new coverage  
19 under the plan, exclusive of any applicable waiting period, provided  
20 the requirements of this subdivision shall only apply if the newly  
21 insured group member or dependent applies for such succeeding  
22 coverage not later than thirty days after the first day of the member's  
23 or dependent's initial eligibility.

24 (2) With respect to a group member or dependent who was newly  
25 insured under the plan on or after October 1, 2005, and was previously  
26 covered under qualifying coverage, but was not covered under such  
27 qualifying coverage for a preexisting condition, as defined under the  
28 newly issued comprehensive health care plan, such plan shall credit  
29 the time such group member or dependent was previously covered by  
30 qualifying coverage to the exclusion period of the preexisting  
31 condition provision, provided the preceding qualifying coverage was  
32 continuous to a date less than one hundred twenty days prior to the  
33 effective date of the new coverage, exclusive of any applicable waiting  
34 period under such plan, except in the case of a newly insured group  
35 member whose preceding qualifying coverage was terminated due to  
36 an involuntary loss of employment, the preceding qualifying coverage  
37 must have been continuous to a date not more than one hundred fifty  
38 days prior to the effective date of the new coverage, exclusive of any  
39 applicable waiting period, provided the requirements of this  
40 subdivision shall only apply if such newly insured group member or  
41 dependent applies for such succeeding coverage not later than thirty  
42 days after the first day of the member's or dependent's initial  
43 eligibility.

44 (3) As used in this subsection, "qualifying coverage" means coverage  
45 under (A) any group health insurance plan, group insurance  
46 arrangement or self-insured plan covering a group, (B) Medicare or  
47 Medicaid, or (C) an individual health insurance plan that provides  
48 benefits which are actuarially equivalent to or exceeding the benefits  
49 provided under a small employer health care plan, as defined in

50 section 38a-564, whether issued in this state or any other state, as  
51 determined by the Health Reinsurance Association."

This act shall take effect as follows and shall amend the following sections:		
Section 1	<i>October 1, 2005</i>	38a-553