

State of Misconsin 2019 - 2020 LEGISLATURE

LRBa0021/1 TJD:cjs

ASSEMBLY AMENDMENT 1, TO ASSEMBLY BILL 1

January 16, 2019 - Offered by Representative PETERSEN.

1	At the locations indicated, amend the bill as follows:
2	1. Page 3, line 24: after that line insert:
3	"(ae) "Cost sharing" means a deductible, coinsurance, or copayment.".
4	2. Page 3, line 25: delete "(a)" and substitute "(am)".
5	3. Page 4, line 20: after that line insert:
6	"(3m) PROHIBITING DISCRIMINATION BASED ON HEALTH STATUS. (a) An individual
7	health benefit plan or a self-insured health plan may not establish rules for the
8	eligibility of any individual to enroll, or for the continued eligibility of any individual
9	to remain enrolled, under the plan based on any of the following health
10	status-related factors in relation to the individual or a dependent of the individual:
11	1. Health status.
12	2. Medical condition, including both physical and mental illnesses.
13	3. Claims experience.

4. Receipt of health care.

- 2 5. Medical history.
- 3 6. Genetic information.

4 7. Evidence of insurability, including conditions arising out of acts of domestic
5 violence.

6 8. Disability.

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7 (b) 1. An insurer offering an individual health benefit plan or a self-insured 8 health plan may not require any individual, as a condition of enrollment or continued 9 enrollment under the plan, to pay, on the basis of any health status-related factor 10 under par. (a) in relation to the individual or a dependent of the individual, a 11 premium or contribution or cost sharing that is greater than the premium or 12 contribution or cost sharing for a similarly situated individual enrolled under the 13 plan.

2. An insurer offering a group health benefit plan may not require any
individual, as a condition of enrollment or continued enrollment under the plan, to
pay, on the basis of any health status-related factor under s. 632.748 (1) (a) 1. to 8.
in relation to the individual or a dependent of the individual, cost sharing that is
greater than the cost sharing for a similarly situated individual enrolled under the
plan.

(c) Nothing in this subsection prevents an insurer offering a health benefit plan
 or a self-insured health plan from establishing premium discounts or rebates or
 modifying otherwise applicable cost sharing in return for adherence to programs of
 health promotion and disease prevention.".

4. Page 5, line 12: after "APPLICABILITY." insert "(a) An individual health benefit plan that is considered a grandfathered health plan under 42 USC 18011 as of January 1, 2019, or has transitional status as of January 1, 2019, granted by the federal department of health and human services and the commissioner is not required to comply with sub. (3m).

- 6 (b)".
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(END)