

[DISCUSSION DRAFT]

116TH CONGRESS
1ST SESSION

H. R. _____

To amend the Employee Retirement Income Security Act of 1974, title XXVII of the Public Health Service Act, and the Internal Revenue Code of 1986 to require group health plans and health insurance issuers offering group or individual health insurance coverage to provide for 3 primary care visits and 3 mental health care visits without application of any cost-sharing requirement.

IN THE HOUSE OF REPRESENTATIVES

Ms. UNDERWOOD introduced the following bill; which was referred to the
Committee on _____

A BILL

To amend the Employee Retirement Income Security Act of 1974, title XXVII of the Public Health Service Act, and the Internal Revenue Code of 1986 to require group health plans and health insurance issuers offering group or individual health insurance coverage to provide for 3 primary care visits and 3 mental health care visits without application of any cost-sharing requirement.

1 *Be it enacted by the Senate and House of Representa-*
2 *tives of the United States of America in Congress assembled,*

1 **SECTION 1. SHORT TITLE.**

2 This Act may be cited as the “_____ Act
3 of 2019”.

4 **SEC. 2. PROHIBITION ON APPLICATION OF COST SHARING**
5 **FOR CERTAIN PRIMARY CARE AND MENTAL**
6 **HEALTH CARE VISITS.**

7 (a) ERISA.—Subpart B of part 7 of subtitle B of
8 title I of the Employee Retirement Income Security Act
9 of 1974 (29 U.S.C. 1185 et seq.) is amended by adding
10 at the end the following new section:

11 **“SEC. 716. COVERAGE OF CERTAIN PRIMARY CARE AND**
12 **MENTAL HEALTH CARE VISITS.**

13 “In addition to any item or service described in sec-
14 tion 2713(a) of the Public Health Service Act, a group
15 health plan, and a health insurance issuer offering group
16 health insurance coverage, shall at a minimum provide
17 coverage for and shall not impose any cost-sharing re-
18 quirements for, with respect to a plan year—

19 “(1) 3 primary care visits; and

20 “(2) 3 mental health care visits.”.

21 (b) PHSA.—Subpart II of part A of title XXVII of
22 the Public Health Service Act (42 U.S.C. 300gg–11 et
23 seq.) is amended by adding at the end the following new
24 section:

1 **“SEC. 2730. COVERAGE OF CERTAIN PRIMARY CARE AND**
2 **MENTAL HEALTH CARE VISITS.**

3 “In addition to any item or service described in sec-
4 tion 2713(a), a group health plan, and a health insurance
5 issuer offering group health insurance coverage, shall at
6 a minimum provide coverage for and shall not impose any
7 cost-sharing requirements for, with respect to a plan
8 year—

9 “(1) 3 primary care visits; and

10 “(2) 3 mental health care visits.”.

11 (c) IRC.—

12 (1) IN GENERAL.—Subchapter B of chapter
13 100 of subtitle K of the Internal Revenue Code of
14 1986 is amended by adding at the end the following
15 new section:

16 **“SEC. 9816. COVERAGE OF CERTAIN PRIMARY CARE AND**
17 **MENTAL HEALTH CARE VISITS.**

18 “In addition to any item or service described in sec-
19 tion 2713(a) of the Public Health Service Act, a group
20 health plan shall at a minimum provide coverage for and
21 shall not impose any cost-sharing requirements for, with
22 respect to a plan year—

23 “(1) 3 primary care visits; and

24 “(2) 3 mental health care visits.”.

25 (2) HIGH DEDUCTIBLE HEALTH PLANS.—Sec-
26 tion 223(c)(2)(C) of the Internal Revenue Code of

1 1986 is amended by inserting “or for the visits de-
2 scribed in section 9816” before the period.

3 (d) **EFFECTIVE DATE.**—The amendments made by
4 this section shall apply with respect to plan years begin-
5 ning on or after the date that is 2 years after the date
6 of the enactment of this Act.