

103<sup>D</sup> CONGRESS  
2<sup>D</sup> SESSION

# H. CON. RES. 246

Expressing the sense of the Congress regarding the denial or limitation of health insurance coverage or benefits on the basis of preexisting medical conditions.

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IN THE HOUSE OF REPRESENTATIVES

MAY 5, 1994

Mr. WHEAT submitted the following concurrent resolution; which was referred jointly to the Committees on Energy and Commerce and Ways and Means

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## **CONCURRENT RESOLUTION**

Expressing the sense of the Congress regarding the denial or limitation of health insurance coverage or benefits on the basis of preexisting medical conditions.

Whereas the primary goal of health care reform is to ensure quality health care for every American;

Whereas each month an estimated 2,000,000 Americans lose their health insurance, and an estimated 58,000,000 Americans are without health insurance at some time during each year;

Whereas the denial of health insurance coverage to, and limitation of coverage for, individuals with preexisting medical conditions, and their families, is a leading contributor to the high incidence of lack of insurance and underinsurance among Americans;

Whereas approximately 81,000,000 Americans under the age of 65 have preexisting medical conditions;

Whereas Americans with preexisting medical conditions live each day with the fear that, when they most need health insurance, either health insurance coverage will be refused to them or their coverage or benefits will be limited by the terms of their insurance policies or by the unwillingness of insurance providers to offer them full coverage or benefits; and

Whereas individuals and families are often unable to leave inadequate insurance plans because a preexisting medical condition limits their ability to obtain needed coverage from other insurance providers: Now, therefore, be it

1       *Resolved by the House of Representatives (the Senate*  
2 *concurring)*, That it is the sense of the Congress that any  
3 legislation enacted to provide for national health care re-  
4 form should—

5           (1) prohibit the denial of health insurance cov-  
6 erage to, or limitation of coverage or benefits for,  
7 any individual or family on the basis of a preexisting  
8 medical condition;

9           (2) prohibit charging any individual or family  
10 an unreasonable amount for health insurance cov-  
11 erage or benefits on the basis of a preexisting medi-  
12 cal condition; and

13           (3) include among the individuals and families  
14 protected by the prohibitions referred to in para-  
15 graphs (1) and (2) any individuals and families that

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- 1 wish to acquire health insurance coverage or benefits
- 2 from an entity other than their current provider of
- 3 coverage or benefits.

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