

104TH CONGRESS  
1ST SESSION

# H. R. 2748

To prohibit insurance providers from denying or canceling health insurance coverage, or varying the premiums, terms, or conditions for health insurance coverage on the basis of genetic information or a request for genetic services, and for other purposes.

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## IN THE HOUSE OF REPRESENTATIVES

DECEMBER 7, 1995

Ms. SLAUGHTER (for herself, Mr. ACKERMAN, Ms. BROWN of Florida, Ms. DELAURO, Mr. DELLUMS, Mr. FALEOMAVAEGA, Mr. GEJDENSON, Ms. JACKSON-LEE, Mr. JOHNSTON of Florida, Mr. LAFALCE, Ms. LOFGREN, Mrs. LOWEY, Mrs. MALONEY, Mr. McDERMOTT, Mrs. MEEK of Florida, Mrs. MINK of Hawaii, Mrs. MORELLA, Mr. PAYNE of New Jersey, Ms. PELOSI, Ms. RIVERS, Ms. ROYBAL-ALLARD, Mr. SERRANO, Mr. STOKES, Ms. WATERS, and Mr. WATT of North Carolina) introduced the following bill; which was referred to the Committee on Commerce, and in addition to the Committee on Economic and Educational Opportunities, for a period to be subsequently determined by the Speaker, in each case for consideration of such provisions as fall within the jurisdiction of the committee concerned

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## A BILL

To prohibit insurance providers from denying or canceling health insurance coverage, or varying the premiums, terms, or conditions for health insurance coverage on the basis of genetic information or a request for genetic services, and for other purposes.

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 “Genetic Information  
3 Nondiscrimination in Health Insurance Act of 1995”.

4 **SEC. 2. PROHIBITION OF HEALTH INSURANCE DISCRIMINA-**  
5 **TION ON THE BASIS OF GENETIC INFORMA-**  
6 **TION.**

7 (a) IN GENERAL.—An insurance provider may not  
8 deny or cancel health insurance coverage, or vary the pre-  
9 miums, terms, or conditions for health insurance coverage,  
10 for an individual or a family member of an individual—

11 (1) on the basis of genetic information; or

12 (2) on the basis that the individual or family  
13 member of an individual has requested or received  
14 genetic services.

15 (b) LIMITATION ON COLLECTION AND DISCLOSURE  
16 OF INFORMATION.—

17 (1) IN GENERAL.—An insurance provider may  
18 not request or require an individual to whom the  
19 provider provides health insurance coverage, or an  
20 individual who desires the provider to provide health  
21 insurance coverage, to disclose to the provider ge-  
22 netic information about the individual or family  
23 member of the individual.

24 (2) REQUIREMENT OF PRIOR AUTHORIZA-  
25 TION.—An insurance provider may not disclose ge-  
26 netic information about an individual without the

1 prior written authorization of the individual or legal  
2 representative of the individual. Such authorization  
3 is required for each disclosure and shall include an  
4 identification of the person to whom the disclosure  
5 would be made.

6 (c) ENFORCEMENT.—

7 (1) PLANS OTHER THAN EMPLOYEE HEALTH  
8 BENEFIT PLANS.—The requirements established  
9 under subsections (a) and (b) shall be enforced by  
10 the State insurance commissioner for the State in-  
11 volved or the official or officials designated by the  
12 State, except that in no case shall a State enforce  
13 such requirements as they relate to employee health  
14 benefit plans.

15 (2) EMPLOYEE HEALTH BENEFIT PLANS.—  
16 With respect to employee health benefit plans, the  
17 Secretary shall enforce the requirements established  
18 under subsections (a) and (b) in the same manner  
19 as provided for under sections 502, 504, 506, and  
20 510 of the Employee Retirement Income Security  
21 Act of 1974 (29 U.S.C. 1132, 1134, 1136, and  
22 1140).

23 (3) PRIVATE RIGHT OF ACTION.—A person may  
24 bring a civil action—

1 (A) to enjoin any act or practice which vio-  
2 lates subsection (a) or (b),

3 (B) to obtain other appropriate equitable  
4 relief (i) to redress such violations, or (ii) to en-  
5 force any such subsections, or

6 (C) to obtain other legal relief, including  
7 monetary damages.

8 (4) JURISDICTION.—State courts of competent  
9 jurisdiction and district courts of the United States  
10 have concurrent jurisdiction of actions under this  
11 subsection. The district courts of the United States  
12 shall have jurisdiction, without respect to the  
13 amount in controversy or the citizenship of the par-  
14 ties, to grant the relief provided for in paragraph (3)  
15 in any action.

16 (5) VENUE.—For purposes of this subsection  
17 the venue provisions of section 1391 of title 28,  
18 United States Code, shall apply.

19 (6) REGULATIONS.—The Secretary may pro-  
20 mulgate such regulations as may be necessary or ap-  
21 propriate to carry out this section.

22 (d) APPLICABILITY.—

23 (1) PREEMPTION OF STATE LAW.—A State may  
24 establish or enforce requirements for insurance pro-  
25 viders or health insurance coverage with respect to

1 the subject matter of this section, but only if such  
2 requirements are more restrictive than the require-  
3 ments established under subsections (a) and (b).

4 (2) RULE OF CONSTRUCTION.—Nothing in this  
5 section shall be construed to affect or modify the  
6 provisions of section 514 of the Employee Retirement  
7 Income Security Act of 1974 (29 U.S.C.  
8 1144).

9 (3) CONTINUATION.—Nothing in this section  
10 shall be construed as requiring a group health plan  
11 or an employee health benefit plan to provide bene-  
12 fits to a particular participant or beneficiary.

13 (e) DEFINITIONS.—For purposes of this Act:

14 (1) EMPLOYEE HEALTH BENEFIT PLAN.—The  
15 term “employee health benefit plan” means any em-  
16 ployee welfare benefit plan, governmental plan, or  
17 church plan (as defined under paragraphs (1), (32),  
18 and (33) of section 3 of the Employee Retirement  
19 Income Security Act of 1974 (29 U.S.C. 1002)) that  
20 provides or pays for health insurance coverage (such  
21 as provider and hospital benefits) whether—

22 (A) directly;

23 (B) through a group health plan; or

24 (C) otherwise.

1           (2) FAMILY MEMBER.—The term “family mem-  
2       ber” means, with respect to an individual, another  
3       individual related by blood to that individual.

4           (3) GENETIC INFORMATION.—The term “ge-  
5       netic information” means information about genes,  
6       gene products, or inherited characteristics.

7           (4) GENETIC SERVICES.—The term “genetic  
8       services” means health services to obtain, assess,  
9       and interpret genetic information for diagnostic and  
10      therapeutic purposes, and for genetic education and  
11      counselling.

12          (5) GROUP HEALTH PLAN.—The term “group  
13      health plan” has the meaning given such term in  
14      section 607 of the Employee Retirement Income Se-  
15      curity Act of 1974 (29 U.S.C. 1167), and includes  
16      a multiple employer welfare arrangement (as defined  
17      in section 3(40) of such Act) that provides health in-  
18      surance coverage.

19          (6) HEALTH INSURANCE COVERAGE.—The term  
20      “health insurance coverage” means a contractual ar-  
21      rangement for the provision of a payment for health  
22      care, including—

23                   (A) a group health plan; and

24                   (B) any other health insurance arrange-  
25      ment, including any arrangement consisting of

1 a hospital or medical expense incurred policy or  
2 certificate, hospital or medical service plan con-  
3 tract, or health maintenance organization sub-  
4 scriber contract.

5 (7) INDIVIDUAL HEALTH PLAN.—The term “in-  
6 dividual health plan” means any health insurance  
7 coverage offered to individuals that is not a group  
8 health plan.

9 (8) INSURANCE PROVIDER.—The term “insur-  
10 ance provider” means an insurer or other entity pro-  
11 viding health insurance coverage.

12 (9) PERSON.—The term “person” includes cor-  
13 porations, companies, associations, firms, partner-  
14 ships, societies, and joint stock companies, as well as  
15 individuals.

16 (10) SECRETARY.—The term “Secretary”  
17 means the Secretary of Labor.

18 (11) STATE.—The term “State” means any of  
19 the 50 States, the District of Columbia, Puerto Rico,  
20 the Northern Mariana Islands, the Virgin Islands,  
21 American Samoa, and Guam.

22 (f) TECHNICAL AMENDMENT.—Section 508 of the  
23 Employee Retirement Income Security Act of 1974 (29  
24 U.S.C. 1138) is amended by inserting “and under the Ge-

1 netic Insurance Nondiscrimination in Health Insurance  
2 Act of 1995” before the period.

3 (g) EFFECTIVE DATE.—This section shall apply to  
4 health insurance coverage offered or renewed on or after  
5 the end of the 90-day period beginning on the date of the  
6 enactment of this Act.

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