

H.R. 3605, PATIENTS' BILL OF RIGHTS ACT OF 1998

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REMARKS/STATEMENTS

- March 31, 1998 -- Remarks of Congressman John D. Dingell, Ranking Democrat, House Committee on Commerce, Patients' Bill of Rights Act of 1998

LETTERS OF SUPPORT

[Note: Adobe Acrobat Reader is needed to view these letters which are in PDF format. If this format does not provide adequate access, please contact our office at 202-225-3641.]

- American Association of Retired Persons (AARP)
- American Cancer Society
- American College of Emergency Physicians
- American Federation of Labor and Congress of Industrial Organizations
- American Medical Association
- American Psychological Association
- Consumers Union
- Families USA Foundation
- HIP Health Plans
- Kaiser Permanente
- National Alliance For The Mentally Ill
- National Association of Children's Hospitals
- National Mental Health Association

SUMMARY

- Summary of the Patients' Bill of Rights Act of 1998

TEXT OF LEGISLATION

- H.R. 3605, Patients' Bill of Rights Act of 1998
*Note: Original Cosponsors not listed in the attached version of the bill are:
Mr. Brown (CA), Mr. Sandlin (TX), Mr. Sawyer (OH), and Ms. McKinney (GA)*



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Providers should receive reasonable notice of termination and should be allowed to review any information behind the termination decision and appeal such adverse determinations within the plan.

- **Medical Necessity**

Health plans should not be allowed to place arbitrary limits on covered services. Treatment decisions should be made in accordance with generally accepted principles and standards of professional medical practice. The Democratic bill applies this standard for medically necessary care.

- **Insurer Liability**

Although health plans are increasingly involved in health care decisions, the Employee Retirement Income Security Act (ERISA) preempts individuals in employer-sponsored plans from holding health plans legally accountable for decisions to limit care that ultimately cause harm. Presently, an injured person can only recover the dollar value of the benefit that was denied. The Democratic bill includes a provision that would allow State law to determine whether or not a health care beneficiary can bring a state cause of action against health plan administrators who cause harm through their actions. The provision also protects employers from liability when they were not involved in the decision.



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