

**Health Reform-Related  
Market Conduct Examination Standards**

States moved forward in 2013 supporting the implementation of health reform. Under the guidance of the Market Conduct Examination Standards (D) Working Group, states are developing examination standards corresponding to the provisions of health reform. Under federal law, if the states fail to “substantially enforce” health reform, either because they are unable or unwilling to do so, the federal government is obligated to undertake the role of health insurance market regulator. The following listing of health reform provisions effective January 1, 2014 has been developed, so that the Working Group may focus on these provisions, to ensure continued state authority and strong consumer protections remain in place. To make the development of exam standards manageable and to obtain meaningful progress, the development of exam standards has been segmented into different phases which correspond to the effective date of health reform provisions. The current focus is on the provisions of health reform effective January 1, 2014, noted below as “Phase 2” provisions.

**Phase 2 - Health Reform Provisions Effective January 1, 2014**

Provision Title	Health Reform Citation
Guaranteed Availability of Coverage	PHSA 2702
Guaranteed Renewability of Coverage	PHSA 2703
Prohibitions on Preexisting Conditions Exclusions for all Individuals	PHSA 2704
Prohibition on Discrimination against Individual Participants and Beneficiaries Based on Health Status, Medical Condition, Claims Experience, Receipt of Health Care and Medical History	PHSA 2705
Nondiscrimination in Health Care	PHSA 2706
Comprehensive Health Insurance Coverage	PHSA 2707
Prohibition on Excessive Waiting Periods	PHSA 2708
Coverage for Individuals Participating in Approved Clinical Trials	PHSA 2709
Essential Health Benefits Requirements	PHSA 1302
Affordable Choices of Health Benefit Plans	PHSA 1311
Consumer Choice	PHSA 1312