

**DISTRICT OF COLUMBIA**  
**OFFICIAL CODE**

**TITLE 32.**

**LABOR.**

**CHAPTER 7A.**

**HEALTH COVERAGE CONTINUATION.**

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**DISTRICT OF COLUMBIA OFFICIAL CODE**  
**CHAPTER 7A. HEALTH COVERAGE CONTINUATION.**

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# CHAPTER 7A. HEALTH COVERAGE CONTINUATION.

## § 32-731. DEFINITIONS.

For the purposes of this chapter, the term:

- (1) "Commissioner" means the Commissioner of the Department of Insurance, Securities, and Banking.
- (2) "Covered individual" means a person whose coverage under an employer's health benefits plan is continued under this chapter.
- (3) "Health benefits plan" means any accident and health insurance policy or certificate, hospital and medical services corporation contract, health maintenance organization subscriber contract, plan provided by a multiple employer welfare arrangement, or plan provided by another benefit arrangement. The term "health benefit plan" does not mean accident only, credit, or disability insurance; coverage of Medicare services or federal employee health plans, pursuant to contracts with the United States government; Medicare supplemental or long-term care insurance; dental only or vision only insurance; specified disease insurance; hospital confinement indemnity coverage; limited benefit health coverage; coverage issued as a supplement to liability insurance, insurance arising out of a worker's compensation or similar law; automobile medical payment insurance; medical expense and loss of income benefits; or insurance under which benefits are payable with or without regard to fault and that is statutorily required to be contained in any liability insurance policy or equivalent self-insurance.
- (4) "Health insurer" means any person that provides one or more health benefit plans or insurance in the District of Columbia, including an insurer, a hospital and medical services corporation, a fraternal benefit society, a health maintenance organization, a multiple employer welfare arrangement, or any other person providing a plan of health insurance subject to the authority of the Commissioner.

(June 25, 2002, D.C. Law 14-149, § 2, 49 DCR 4233; June 11, 2004, D.C. Law 15-166, § 4(ii), 51 DCR 2817.)

### *HISTORICAL AND STATUTORY NOTES*

#### *Effect of Amendments*

D.C. Law 15-166, in par. (1), substituted "Commissioner of the Department of Insurance, Securities, and Banking" for "Commissioner of the Department of Insurance and Securities Regulation".

#### *Temporary Addition of Section*

For temporary (225 day) addition, see § 2 of Continuation of Health Coverage Temporary Act of 2002 (D.C. Law 14-108, April 13, 2002, law notification 49 DCR 4056).

#### *Emergency Act Amendments*

For temporary (90 day) addition of §§ 32-731 to 32-734, see §§ 2 to 5 of Continuation of Health Coverage Emergency Act of 2001 (D.C. Act 14-214, December 17, 2001, 49 DCR 377).

For temporary (90 day) addition of §§ 32-731 to 32-734, see § 2 of Continuation of Health Coverage Congressional Review Emergency Act of 2002 (D.C. Act 14-304, March 25, 2002, 49 DCR 3399).

For temporary (90 day) amendment of section, see § 4(ii) of Consolidation of Financial Services Emergency Amendment Act of 2004 (D.C. Act 15-381, February 27, 2004, 51 DCR 2653).

#### *Legislative History of Laws*

Law 14-149, the "Continuation of Health Coverage Act of 2002", was introduced in Council and assigned Bill No. 14-235, which was referred to the Committee Consumer and Regulatory Affairs. The Bill was adopted on first and second readings on March 5, 2002, and April 9, 2002, respectively. Signed by the Mayor on April 24, 2002, it was assigned Act No. 14-327 and transmitted to both Houses of Congress for its review. D.C. Law

14-149 became effective on June 25, 2002.

For Law 15-166, see notes following § 31-1004.

## **§ 32-732. CONTINUATION OF COVERAGE.**

(a) An employee has the right to continue coverage under the employer's health benefits plan for a period of 3 months, or for the period of time during which the employee is eligible for premium assistance under the American Recovery and Reinvestment Act of 2009, approved February 17, 2009 (123 Stat. 115; 26 U.S.C. § 1, note), unless the employee:

- (1) Was terminated for gross misconduct;
- (2) Is eligible for an extension of coverage required under the Consolidated Omnibus Budget Reconciliation Act of 1985, approved April 7, 1986 (100 Stat. 82; codified in scattered sections of the U.S. Code); or
- (3) Fails to complete timely election and payment as provided in subsection (h) of this section.

(b) An employee's covered dependents shall have the same right to continue coverage under the employer's health benefits plan as described in subsection (a) of this section if the dependents would otherwise lose coverage under the health benefits plan.

(c) The right to continue coverage includes any dependent coverage under the terms of the existing health benefits plan.

(d) Within 15 days after the date of application, the employer shall forward to the health insurer the names of individuals who apply for an extension of benefits under this chapter.

(e) Each health benefits plan issued by a health insurer to an employer shall contain a provision requiring that the employer furnish employees whose coverage is terminated a written notification of the existence of the right to continue coverage under this chapter. The notification shall be furnished not later than 15 days after the date that coverage under the health benefits plan would otherwise terminate. Failure by an employer to furnish the notification shall not extend the right to continue coverage beyond the time provided for under this chapter.

(f) The evidence of coverage or certificate of coverage furnished to employees by a health insurer shall include a statement advising the employee of his or her right to continue coverage as provided for under this chapter.

(g) The covered individual's cost for continued coverage shall not exceed 102% of the group rate.

(h) An individual who elects to continue coverage under this chapter shall tender to the employer the amount required to continue coverage no later than 45 days after the date coverage would otherwise terminate.

(i) Coverage under this chapter shall continue without interruption and shall not terminate unless:

- (1) The covered individual establishes residence outside of the health insurer's service area;
- (2) The covered individual fails to make timely payment of the required cost of coverage;
- (3) The covered individual violates a material condition of the contract;
- (4) The covered individual becomes covered under another group health benefits plan that does not contain any exclusion or limitation with respect to any pre-existing condition that affects the covered individual;
- (5) The covered individual becomes entitled to Medicare; or
- (6) The employer no longer offers group health benefits coverage to any employee.

(j) If the employer replaces coverage with similar coverage under another health benefits plan, without interruption, the covered individual shall have the right to continue coverage under the replacement health benefits plan for the balance of the covered individual's continuation of benefit period; provided, that the covered individual is otherwise eligible for continuation of coverage.

(k) At the end of the continued benefit period as provided in this chapter, the covered individual shall remain eligible for a converted policy if the benefit is provided in the employer's health benefits plan.

(June 25, 2002, D.C. Law 14-149, § 3, 49 DCR 4233; Mar. 3, 2010, D.C. Law 18-111, § 5041, 57 DCR 181.)

### *HISTORICAL AND STATUTORY NOTES*

#### *Effect of Amendments*

D.C. Law 18-111, in subsec. (a), substituted "3 months, or for the period of time during which the employee is eligible for premium assistance under the American Recovery and Reinvestment Act of 2009, approved February 17, 2009 (123 Stat. 115; 26 U.S.C. § 1, note)," for "3 months,".

*Temporary Amendments of Section*

For temporary (225 day) amendment of section, see § 2 of Continuation of Health Coverage Temporary Amendment Act of 2009 (D.C. Law 18-20, July 7, 2009, law notification 56 DCR 6122).

*Temporary Addition of Section*

For temporary (225 day) addition, see § 3 of Continuation of Health Coverage Temporary Act of 2002 (D.C. Law 14-108, April 13, 2002, law notification 49 DCR 4056).

*Emergency Act Amendments*

For temporary (90 day) amendment of section, see § 2 of Continuation of Health Coverage Emergency Amendment Act of 2009 (D.C. Act 18-27, March 16, 2009, 56 DCR 2317).

For temporary (90 day) amendment of section, see § 2 of Continuation of Health Coverage Congressional Review Emergency Amendment Act of 2009 (D.C. Act 18-99, May 28, 2009, 56 DCR ).

For temporary (90 day) amendment of section, see § 5041 of Fiscal Year 2010 Budget Support Second Emergency Act of 2009 (D.C. Act 18-207, October 15, 2009, 56 DCR 8234).

For temporary (90 day) amendment of section, see § 5041 of Fiscal Year Budget Support Congressional Review Emergency Amendment Act of 2009 (D.C. Act 18-260, January 4, 2010, 57 DCR 345).

*Legislative History of Laws*

For Law 14-149, see notes following § 32-731.

For Law 18-111, see notes following § 32-241.

*Miscellaneous Notes*

Short title: Section 5040 of D.C. Law 18-111 provided that subtitle E of title V of the act may be cited as the "Continuation of Health Coverage Amendment Act of 2009".

## **§ 32-733. REGULATIONS.**

The Commissioner may issue rules and regulations necessary to implement the provisions of this chapter. (June 25, 2002, D.C. Law 14-149, § 4, 49 DCR 4233.)

*HISTORICAL AND STATUTORY NOTES*

*Temporary Addition of Section*

For temporary (225 day) addition, see § 4 of Continuation of Health Coverage Temporary Act of 2002 (D.C. Law 14-108, April 13, 2002, law notification 49 DCR 4056).

*Legislative History of Laws*

For Law 14-149, see notes following § 32-731.

## **§ 32-734. APPLICABILITY.**

This chapter shall apply to contracts issued or renewed by health insurers on or after January 16, 2002. (June 25, 2002, D.C. Law 14-149, § 5, 49 DCR 4233.)

*HISTORICAL AND STATUTORY NOTES*

*Temporary Addition of Section*

For temporary (225 day) addition, see § 5 of Continuation of Health Coverage Temporary Act of 2002 (D.C. Law 14-108, April 13, 2002, law notification 49 DCR 4056).

*Legislative History of Laws*

For Law 14-149, see notes following § 32-731.