

LAWS OF DELAWARE  
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CHAPTER 89  
153rd GENERAL ASSEMBLY  
FORMERLY  
HOUSE BILL NO. 209

AN ACT TO AMEND TITLE 18 OF THE DELAWARE CODE RELATING TO HEALTH CARE AND THE PATIENT PROTECTION AND AFFORDABLE CARE ACT.

BE IT ENACTED BY THE GENERAL ASSEMBLY OF THE STATE OF DELAWARE:

Section 1. Amend § 3368, Title 18 of the Delaware Code by making deletions as shown by strike through and insertions as shown by underline as follows:

§ 3368. No lifetime or annual limits [For application of this section, see 79 Del. Laws, c. 99, § 19].

(c) The term “essential health benefits” as used in this section means essential health benefits under § 1302(b) of the Patient Protection and Affordable Care Act [42 U.S.C. § 18022(b)], as the law and its implementing regulations were in effect on ~~January 1, 2018~~; January 1, 2025; Delaware law; and applicable state regulations.

Section 2. Amend § 3571I, Title 18 of the Delaware Code by making deletions as shown by strike through and insertions as shown by underline as follows:

§ 3571I. No lifetime or annual limits [For application of this section, see 79 Del. Laws, c. 9, § 19].

(c) The term “essential health benefits” as used in this section means essential health benefits under § 1302(b) of the Patient Protection and Affordable Care Act [42 U.S.C. § 18022(b)], as the law and its implementing regulations were in effect on ~~January 1, 2018~~; January 1, 2025; Delaware law; and applicable state regulations.

Section 3. Amend § 3571J, Title 18 of the Delaware Code by making deletions as shown by strike through and insertions as shown by underline as follows:

§ 3571J. Guaranteed availability of coverage [For application of this section, see 79 Del. Laws, c. 99, § 19].

(b) *Enrollment periods.* — A health insurer may restrict enrollment in health insurance coverage to open or special enrollment periods.

(2) *Special enrollment periods.* —

A health insurer in the group market shall establish special enrollment periods for qualifying events as defined under § 603 of the Employee Retirement Income Security Act of 1974 [29 U.S.C. § 1163], as amended. Enrollees must be provided 30 calendar days after the date of the qualifying event to elect coverage, with such coverage becoming effective consistent with the dates described in 45 C.F.R. § 155.420(b), as in effect on ~~January 1, 2018~~. January 1, 2025. These special enrollment periods are in addition to any other special enrollment periods that are required under federal and state law.

Section 4. Amend § 3571L, Title 18 of the Delaware Code by making deletions as shown by strike through and insertions as shown by underline as follows:

§ 3571L. Nondiscrimination in health care [For application of this section, see 79 Del. Laws, c. 99, § 19].

(b) *Individuals.* — The provisions of § 1557 of the Patient Protection and Affordable Care Act (relating to nondiscrimination) [42 U.S.C. § 18116], as the law and its implementing regulations were in effect on ~~January 1, 2018~~, January 1, 2025, apply with respect to a group health plan or health insurer offering group health insurance coverage.

Section 5. Amend § 3571M, Title 18 of the Delaware Code by making deletions as shown by strike through and insertions as shown by underline as follows:

§ 3571M. Comprehensive health insurance coverage [For application of this section, see 79 Del. Laws, c. 99, § 19].

(a) *Coverage for essential health benefits package.* —

A health insurer that offers health insurance coverage in the small group market shall ensure that such coverage includes the essential health benefits package in conformity with § 1302 of the Patient Protection and Affordable Care Act [42 U.S.C. § 18022], as the law and its implementing regulations were in effect on ~~January 1, 2018~~, January 1, 2025, and state law. The Commissioner shall issue a regulation setting forth what constitutes “essential health benefits” for purposes of this section.

(b) *Cost-sharing under group health plans.* —

A group health plan shall ensure that any annual cost-sharing imposed under the plan does not exceed the limitations provided for under § 1302(c)(1) and (2) of the Patient Protection and Affordable Care Act [42 U.S.C. § 18022(c)(1) and (2)], as the law and its implementing regulations were in effect on ~~January 1, 2018~~, January 1, 2025, and state law.

(c) *Child-only plans.* —

If a health insurer offers health insurance coverage in any level of coverage specified under § 1302(d) of the Patient Protection and Affordable Care Act [42 U.S.C. § 18022(d)], as the law and its implementing regulations were in effect on ~~January 1, 2018~~, January 1, 2025, or state law, the health insurer shall also offer such coverage in that level as a plan in which the only enrollees are individuals who, as of the beginning of the plan year, are under the age of 21.

(d) *Dental only.* —

This section shall not apply to a plan described in § 1311(d)(2)(B)(ii) of the Patient Protection and Affordable Care Act [42 U.S.C. § 18031(d)(2)(B)(ii)], as the law and its implementing regulations were in effect on ~~January 1, 2018~~, January 1, 2025.

Section 6. Amend § 3607, Title 18 of the Delaware Code by making deletions as shown by strike through and insertions as shown by underline as follows:

§ 3607. Guaranteed availability of coverage [For application of this section, see 79 Del. Laws, c. 99, § 19].

(b) *Enrollment periods.* — A carrier may restrict enrollment in health insurance coverage to open or special enrollment periods.

(2) *Special enrollment periods.* —

A carrier in the individual market shall establish special enrollment periods for qualifying events as defined under § 603 of the Employee Retirement Income Security Act of 1974, as amended [29 USC § 1163]. Enrollees must be provided 30 calendar days after the date of the qualifying event to elect coverage, with such coverage becoming effective consistent with the dates described in 45 C.F.R. § 155.420(b), as in effect on ~~January 1, 2018~~, January 1, 2025. These special enrollment periods are in addition to any other special enrollment periods that are required under federal and state law.

Section 7. Amend § 3609, Title 18 of the Delaware Code by making deletions as shown by strike through and insertions as shown by underline as follows:

§ 3609. Nondiscrimination in health care [For application of this section, see 79 Del. Laws, c. 99, § 19].

(b) *Individuals.* — The provisions of § 1557 of the Patient Protection and Affordable Care Act (relating to nondiscrimination) [42 U.S.C. § 18116], as the law and its implementing regulations were in effect on ~~January 1, 2018~~, January 1, 2025, apply with respect to a health insurer offering individual health insurance coverage.

Section 8. Amend § 3610, Title 18 of the Delaware Code by making deletions as shown by strike through and insertions as shown by underline as follows:

§ 3610. Comprehensive health insurance coverage [For application of this section, see 79 Del. Laws, c. 99, § 19].

(a) *Coverage for essential health benefits package.* —

A health insurer that offers health insurance coverage in the individual market shall ensure that such coverage includes the essential health benefits package in conformity with § 1302 of the Patient Protection and Affordable Care Act [42 U.S.C. § 18022], as the law and its implementing regulations were in effect on ~~January 1, 2018~~, January 1, 2025, and state law. The Commissioner shall issue a regulation setting forth what constitutes “essential health benefits” for purposes of this section.

(b) *Cost-sharing under individual health insurance policies.* —

An individual health insurance policy shall ensure that any annual cost-sharing imposed under the plan does not exceed the limitations provided for under § 1302(c)(1) of the Patient Protection and Affordable Care Act [42 U.S.C. § 18022(c)(1)], as the law and its implementing regulations were in effect on ~~January 1, 2018~~, January 1, 2025, and state law.

(c) *Child-only plans.* —

If a health insurer offers health insurance coverage in any level of coverage specified under § 1302(d) of the Patient Protection and Affordable Care Act [42 U.S.C. § 18022(d)], as the law and its implementing regulations were in effect on ~~January 1, 2018~~, January 1, 2025, or state law, the health insurer shall also offer such coverage in that level as a plan in which the only enrollees are individuals who, as of the beginning of the plan year, are under age 21.

(d) *Dental only.* —

This section does not apply to a plan described in § 1311(d)(2)(B)(ii) of the Patient Protection and Affordable Care Act [42 U.S.C. § 18031(d)(2)(B)(ii)], as the law and its implementing regulations were in effect on ~~January 1, 2018~~, January 1, 2025.

Approved July 21, 2025