

Spratt	Tsongas	Waxman
Stark	Turner	Weiner
Stearns	Udall (CO)	Welch (VT)
Stupak	Udall (NM)	Weldon (FL)
Sullivan	Upton	Weller
Sutton	Van Hollen	Westmoreland
Tancredi	Velázquez	Wexler
Tanner	Visclosky	Whitfield (KY)
Tauscher	Walberg	Wilson (NM)
Taylor	Walden (OR)	Wilson (OH)
Terry	Walsh (NY)	Wilson (SC)
Thompson (CA)	Walz (MN)	Wittman (VA)
Thompson (MS)	Wamp	Wolf
Thornberry	Wasserman	Wu
Tiahrt	Schultz	Wynn
Tiberi	Waters	Yarmuth
Tierney	Watson	Young (AK)
Towns	Watt	Young (FL)

NOT VOTING—16

Brown-Waite,	Keller	Renzi
Ginny	Meek (FL)	Rush
Conyers	Ortiz	Schmidt
Gonzalez	Poe	Sires
Gordon	Pryce (OH)	Woolsey
Johnson, E. B.	Rangel	

ANNOUNCEMENT BY THE SPEAKER PRO TEMPORE

The SPEAKER pro tempore (during the vote). Members are advised that there are 2 minutes remaining in this vote.

□ 1628

So (two-thirds being in the affirmative) the rules were suspended and the concurrent resolution was agreed to.

The result of the vote was announced as above recorded.

A motion to reconsider was laid on the table.

PERSONAL EXPLANATION

Mr. CONYERS. Mr. Speaker, on March 5, 2008, I was unavoidably detained due to weather-related travel delays. The following list describes how I would have voted had I been in attendance this afternoon.

“Yea”—H.R. 4191, To redesignate Dayton Aviation Heritage National Historic Park in the State of Ohio as “Wright Brothers-Dunbar National Historic Park”, and for other purposes.

“Yea”—H. Con. Res. 278, Supporting Taiwan’s fourth direct and democratic presidential elections in March 2008.

“Present”—H. Res. 951, Condemning the ongoing Palestinian rocket attacks on Israeli civilians, and for other purposes.

“Yea”—On motion to consider the resolution H. Res. 1014, providing for the consideration of H.R. 1424, Paul Wellstone Mental Health and Addiction Equity Act.

“Yea”—On ordering the previous question on H. Res. 1014, providing for the consideration of H.R. 1424, Paul Wellstone Mental Health and Addiction Equity Act.

“Yea”—H. Res. 1014, Providing for the consideration of H.R. 1424, Paul Wellstone Mental Health and Addiction Equity Act.

“Yea”—H.R. 4774, To designate the facility of the United States Postal Service located at 10250 John Saunders Road in San Antonio, Texas, as the “Cyndi Taylor Krier Post Office Building”.

“Yea”—H. Con. Res. 286, Expressing the sense of Congress that Earl Lloyd should be recognized and honored for breaking the color barrier and becoming the first African American to play in the National Basketball Association League 58 years ago.

PAUL WELLSTONE MENTAL HEALTH AND ADDICTION EQUITY ACT OF 2007

Mr. PALLONE. Mr. Speaker, pursuant to House Resolution 1014, I call up the bill (H.R. 1424) to amend section 712 of the Employee Retirement Income Security Act of 1974, section 2705 of the Public Health Service Act, and section 9812 of the Internal Revenue Code of 1986 to require equity in the provision of mental health and substance-related disorder benefits under group health plans, and ask for its immediate consideration.

The Clerk read the title of the bill.

The text of the bill is as follows:

H.R. 1424

Be it enacted by the Senate and House of Representatives of the United States of America in Congress assembled,

SECTION 1. SHORT TITLE; TABLE OF CONTENTS.

(a) **SHORT TITLE.**—This Act may be cited as the “Paul Wellstone Mental Health and Addiction Equity Act of 2007”.

(b) **TABLE OF CONTENTS.**—The table of contents of this Act is as follows:

Sec. 1. Short title; table of contents.

Sec. 2. Amendments to the Employee Retirement Income Security Act of 1974.

Sec. 3. Amendments to the Public Health Service Act relating to the group market.

Sec. 5. Amendments to the Internal Revenue Code of 1986.

Sec. 5. Government Accountability Office studies and reports.

SEC. 2. AMENDMENTS TO THE EMPLOYEE RETIREMENT INCOME SECURITY ACT OF 1974.

(a) **EXTENSION OF PARITY TO TREATMENT LIMITS AND BENEFICIARY FINANCIAL REQUIREMENTS.**—Section 712 of the Employee Retirement Income Security Act of 1974 (29 U.S.C. 1185a) is amended—

(1) in subsection (a), by adding at the end the following new paragraphs:

“(3) **TREATMENT LIMITS.**—

“(A) **NO TREATMENT LIMIT.**—If the plan or coverage does not include a treatment limit (as defined in subparagraph (D)) on substantially all medical and surgical benefits in any category of items or services, the plan or coverage may not impose any treatment limit on mental health and substance-related disorder benefits that are classified in the same category of items or services.

“(B) **TREATMENT LIMIT.**—If the plan or coverage includes a treatment limit on substantially all medical and surgical benefits in any category of items or services, the plan or coverage may not impose such a treatment limit on mental health and substance-related disorder benefits for items and services within such category that are more restrictive than the predominant treatment limit that is applicable to medical and surgical benefits for items and services within such category.

“(C) **CATEGORIES OF ITEMS AND SERVICES FOR APPLICATION OF TREATMENT LIMITS AND BENEFICIARY FINANCIAL REQUIREMENTS.**—For purposes of this paragraph and paragraph (4), there shall be the following four categories of items and services for benefits, whether medical and surgical benefits or mental health and substance-related disorder benefits, and all medical and surgical benefits and all mental health and substance related benefits shall be classified into one of the following categories:

“(i) **INPATIENT, IN-NETWORK.**—Items and services furnished on an inpatient basis and

within a network of providers established or recognized under such plan or coverage.

“(ii) **INPATIENT, OUT-OF-NETWORK.**—Items and services furnished on an inpatient basis and outside any network of providers established or recognized under such plan or coverage.

“(iii) **OUTPATIENT, IN-NETWORK.**—Items and services furnished on an outpatient basis and within a network of providers established or recognized under such plan or coverage.

“(iv) **OUTPATIENT, OUT-OF-NETWORK.**—Items and services furnished on an outpatient basis and outside any network of providers established or recognized under such plan or coverage.

“(D) **TREATMENT LIMIT DEFINED.**—For purposes of this paragraph, the term ‘treatment limit’ means, with respect to a plan or coverage, limitation on the frequency of treatment, number of visits or days of coverage, or other similar limit on the duration or scope of treatment under the plan or coverage.

“(E) **PREDOMINANCE.**—For purposes of this subsection, a treatment limit or financial requirement with respect to a category of items and services is considered to be predominant if it is the most common or frequent of such type of limit or requirement with respect to such category of items and services.

“(4) BENEFICIARY FINANCIAL REQUIREMENTS.—

“(A) **NO BENEFICIARY FINANCIAL REQUIREMENT.**—If the plan or coverage does not include a beneficiary financial requirement (as defined in subparagraph (C)) on substantially all medical and surgical benefits within a category of items and services (specified under paragraph (3)(C)), the plan or coverage may not impose such a beneficiary financial requirement on mental health and substance-related disorder benefits for items and services within such category.

“(B) BENEFICIARY FINANCIAL REQUIREMENT.—

“(i) **TREATMENT OF DEDUCTIBLES, OUT-OF-POCKET LIMITS, AND SIMILAR FINANCIAL REQUIREMENTS.**—If the plan or coverage includes a deductible, a limitation on out-of-pocket expenses, or similar beneficiary financial requirement that does not apply separately to individual items and services on substantially all medical and surgical benefits within a category of items and services (as specified in paragraph (3)(C)), the plan or coverage shall apply such requirement (or, if there is more than one such requirement for such category of items and services, the predominant requirement for such category) both to medical and surgical benefits within such category and to mental health and substance-related disorder benefits within such category and shall not distinguish in the application of such requirement between such medical and surgical benefits and such mental health and substance-related disorder benefits.

“(ii) **OTHER FINANCIAL REQUIREMENTS.**—If the plan or coverage includes a beneficiary financial requirement not described in clause (i) on substantially all medical and surgical benefits within a category of items and services, the plan or coverage may not impose such financial requirement on mental health and substance-related disorder benefits for items and services within such category in a way that is more costly to the participant or beneficiary than the predominant beneficiary financial requirement applicable to medical and surgical benefits for items and services within such category.

“(C) **BENEFICIARY FINANCIAL REQUIREMENT DEFINED.**—For purposes of this paragraph, the term ‘beneficiary financial requirement’ includes, with respect to a plan or coverage, any deductible, coinsurance, co-payment,