

**AMENDMENT IN THE NATURE OF A SUBSTITUTE  
TO H.R. 7868  
OFFERED BY MR. COMER OF KENTUCKY**

Strike all after the enacting clause and insert the following:

**1 SECTION 1. SHORT TITLE.**

2       This Act may be cited as the “FEHB Protection Act  
3 of 2024”.

**4 SEC. 2. FEHB IMPROVEMENTS.**

5       (a) DEFINITIONS.—In this section:

6           (1) DIRECTOR.—The term “Director” means  
7 the Director of the Office of Personnel Management.

8           (2) EMPLOYING OFFICE.—The term “employing  
9 office” has the meaning given the term in section  
10 890.101(a) of title 5, Code of Federal Regulations,  
11 or any successor regulation.

12           (3) HEALTH BENEFITS PLAN; MEMBER OF  
13 FAMILY.—The terms “health benefits plan” and  
14 “member of family” have the meanings given those  
15 terms in section 8901 of title 5, United States Code.

16           (4) OPEN SEASON.—The term “open season”  
17 means an open season described in section

1 890.301(f) of title 5, Code of Federal Regulations,  
2 or any successor regulation.

3 (5) PROGRAM.—The term “Program” means  
4 the health insurance programs carried out under  
5 chapter 89 of title 5, United States Code, including  
6 the program carried out under section 8903e of that  
7 title.

8 (6) QUALIFYING LIFE EVENT.—The term  
9 “qualifying life event” has the meaning given the  
10 term in section 892.101 of title 5, Code of Federal  
11 Regulations, or any successor regulation.

12 (b) VERIFICATION REQUIREMENTS.—Not later than  
13 1 year after the date of the enactment of this Act, the  
14 Director shall issue regulations and implement a process  
15 to require each employing office to verify—

16 (1) the veracity of any qualifying life event  
17 through which an enrollee in the Program seeks to  
18 add a member of family with respect to the enrollee  
19 to a health benefits plan under the Program; and

20 (2) that, when an enrollee in the Program seeks  
21 to add a member of family with respect to the en-  
22 rollee to the health benefits plan of the enrollee  
23 under the Program, including during any open sea-  
24 son, the individual so added is a qualifying member  
25 of family with respect to the enrollee.

1 (c) FRAUD RISK ASSESSMENT.—In any fraud risk  
2 assessment conducted with respect to the Program on or  
3 after the date of the enactment of this Act, the Director  
4 shall include an assessment of individuals who are enrolled  
5 in, or covered under, a health benefits plan under the Pro-  
6 gram even though those individuals are not eligible to be  
7 so enrolled or covered.

8 (d) FAMILY MEMBER ELIGIBILITY VERIFICATION  
9 AUDIT.—

10 (1) IN GENERAL.—During the 3-year period be-  
11 ginning 1 year after the date of the enactment of  
12 this Act, the Director, in coordination with the head  
13 of each employing office, shall conduct a comprehen-  
14 sive audit regarding members of family who are cov-  
15 ered under an enrollment in a health benefits plan  
16 under the Program.

17 (2) CONTENTS.—In conducting an audit re-  
18 quired under paragraph (1), the Director, in coordi-  
19 nation with the head of each employing office, shall  
20 review marriage certificates, birth certificates, and  
21 other appropriate documents that are necessary to  
22 determine eligibility to enroll in a health benefits  
23 plan under the Program.

24 (e) DISENROLLMENT OR REMOVAL.—Not later than  
25 6 months after the date of the enactment of this Act, the

1 Director shall develop a process by which any individual  
2 enrolled in, or covered under, a health benefits plan under  
3 the Program who is not eligible to be so enrolled or cov-  
4 ered shall be disenrolled or removed from enrollment in  
5 a health benefits plan under the Program.

