SENATE BILL 883

Unofficial Copy C3 2000 Regular Session (0lr2750)

ENROLLED BILL

-- Finance/Economic Matters --

Introduced by Senator Dorman

Read and Examined by Proofreaders:

Proofreader.

Proofreader.

Sealed with the Great Seal and presented to the Governor, for his approval this _____ day of ______ at _____ o'clock, _____M.

President.

CHAPTER_____

1 AN ACT concerning

 Health Insurance - Substantial, Available, and Affordable Coverage
 Products <u>Task Force to Study the Non-Group Health Insurance Market -</u> <u>Repeal</u>

5 FOR the purpose of requiring the Maryland Insurance Commissioner to notify the

6 State Health Services Cost Review Commission of certain health insurance

7 carriers that apply for approval of a substantial, available, and affordable

8 coverage (SAAC) product, or have a SAAC product that has been approved,

9 under certain provisions of law; specifying procedures for applying for approval

10 of a SAAC product; specifying the requirements a SAAC product must meet to

11 qualify for approval; requiring the State Health Services Cost Review

12 Commission to grant a certain differential to a carrier that has an approved

13 SAAC product; specifying the circumstances under which a carrier must submit

14 a corrective plan to the Commission; authorizing a corrective plan to provide for

15 certain actions; requiring a carrier to pay a certain amount to the Commission

16 or the Commission's designee if the carrier stops offering a SAAC product;

17 requiring a carrier that sends a letter of declination to an applicant for medically

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- 1 underwritten health insurance in the nongroup market to send the applicant
- 2 certain information about the availability of SAAC products in the nongroup
- 3 market; authorizing the Commissioner and the Commission to adopt certain
- 4 regulations; providing for the application of certain provisions of this Act;
- 5 defining certain terms; prohibiting the Commission from taking any action to
- 6 eliminate or adjust a certain SAAC differential until a certain date certain
- 7 conditions are satisfied; altering the date by which the Task Force to Study the
- 8 Non-group Health Insurance Market must submit a final report to the General
- 9 <u>Assembly</u>; providing for a delayed effective date for certain provisions of this
- 10 Act; and generally relating to substantial, available, and affordable coverage
- 11 products in the nongroup health insurance market <u>repealing the Task Force to</u>
- 12 <u>Study the Non-Group Health Insurance Market</u>.
- 13 BY adding to
- 14 Article Health General
- 15 Section 19-207.1 and 19-706(nn)
- 16 Annotated Code of Maryland
- 17 (1996 Replacement Volume and 1999 Supplement)
- 18 BY adding to
- 19 Article Insurance
- 20 Section 15-130; and 15-6A-01 through 15-6A-03 and 15-6A-05 to be under the
- 21 new subtitle "Subtitle 6A. Substantial, Available, and Affordable Coverage
- 22 Products"
- 23 Annotated Code of Maryland
- 24 (1997 Volume and 1999 Supplement)
- 25 BY repealing and reenacting, with amendments,
- 26 Article Insurance
- 27 Section <u>15</u> <u>128(h)</u> and <u>15</u> <u>606</u>
- 28 Annotated Code of Maryland
- 29 (1997 Volume and 1999 Supplement)
- 30 BY repealing
- 31 <u>Article Insurance</u>
- 32 <u>Section 15-128</u>
- 33 <u>Annotated Code of Maryland</u>
- 34 (1997 Volume and 1999 Supplement)
- 35 SECTION 1. BE IT ENACTED BY THE GENERAL ASSEMBLY OF
- 36 MARYLAND, That the Laws of Maryland read as follows:

3			SENATE BILL 883
1			Article - Health - General
2	19-207.1.		
3 4	(A) INDICATEI		IN THIS SECTION THE FOLLOWING WORDS HAVE THE MEANINGS
5		(2)	"CARRIER" MEANS:
6			(I) AN INSURER;
7			(II) A NONPROFIT HEALTH SERVICE PLAN;
8			(III) A HEALTH MAINTENANCE ORGANIZATION;
9			(IV) A DENTAL PLAN ORGANIZATION; OR
10 11	SUBJECT 1	TO REGI	(V) ANY OTHER PERSON THAT PROVIDES HEALTH BENEFIT PLANS LATION BY THE STATE.
12 13	COMMISSI	(3) ONER.	"COMMISSIONER" MEANS THE MARYLAND INSURANCE
14 15	INSURANC	(4) C E ARTI	"SAAC PRODUCT" HAS THE MEANING STATED IN § 15 6A 01 OF THE ELE.
	PAID BY A PRODUCT		"SUBSIDY" MEANS THE AMOUNT OF HEALTH CARE EXPENDITURES R THAT EXCEEDS 70% OF THE PREMIUM EARNED FOR THE SAAC CARRIER.
21		TIAL, A	"VALUE OF THE DIFFERENTIAL" MEANS THE DIFFERENCE BETWEEN ER WOULD HAVE PAID FOR HOSPITAL SERVICES WITHOUT THE ID WHAT THE CARRIER PAID FOR HOSPITAL SERVICES WITH THE
23 24	(B) THAT:	THE CO	MMISSIONER SHALL NOTIFY THE COMMISSION OF EACH CARRIER
25 26	THE INSU		APPLIES FOR APPROVAL OF A SAAC PRODUCT UNDER § 15-6A-03 OF RTICLE; OR
27 28	of the in	(2) SURAN(HAS A SAAC PRODUCT THAT HAS BEEN APPROVED UNDER § 15 6A 03 E ARTICLE.
30	CARRIER 7	FHAT H	THE COMMISSION SHALL GRANT UP TO A 2% DIFFERENTIAL TO A .S A SAAC PRODUCT THAT HAS BEEN APPROVED UNDER § 15-6A-03 E ARTICLE.
32			IF THE VALUE OF THE DIFFERENTIAL IS EQUAL TO OR LESS THAN

32(2)IF THE VALUE OF THE DIFFERENTIAL IS EQUAL TO OR LE33TWO TIMES THE SUBSIDY, THE CARRIER HAS EARNED THE DIFFERENTIAL.

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3		ON, FOF	E CARRI	VALUE OF THE DIFFERENTIAL IS GREATER THAN TWO TIMES ER SHALL SUBMIT A CORRECTIVE PLAN TO THE WAL BY THE COMMISSION, IN CONSULTATION WITH THE	
5 6	(D) PROVIDE F		RECTIV	E PLAN UNDER SUBSECTION (C)(3) OF THIS SECTION MAY	
-			SIGNEE	ENT BY THE CARRIER TO THE COMMISSION OR THE E IN THE AMOUNT BY WHICH THE VALUE OF THE TWO TIMES THE SUBSIDY;	
10		(2)	A RED	UCTION IN THE DIFFERENTIAL GIVEN TO THE CARRIER; OR	
11 12	CONSULT.	(3) ATION V		THER ACTION APPROVED BY THE COMMISSION, IN IE COMMISSIONER.	
	-	IE COM	MISSIO	STOPS OFFERING A SAAC PRODUCT, THE CARRIER SHALL N OR THE COMMISSION'S DESIGNEE THE AMOUNT BY WHICH ERENTIAL EXCEEDS TWO TIMES THE SUBSIDY.	
16 17	(F) SECTION.	THE CO)MMISS	SION MAY ADOPT REGULATIONS TO IMPLEMENT THIS	
18	19-706.				
19 20	(NN) INSURANC			INS OF § 15-130 AND TITLE 15, SUBTITLE 6A OF THE ALL APPLY TO HEALTH MAINTENANCE ORGANIZATIONS.	
21				Article - Insurance	
22	<u>15-128.</u>				
25	 <u>(h)</u> <u>The Task Force shall submit a preliminary report on its findings and</u> <u>recommendations to the Governor and, subject to § 2-1246 of the State Government</u> <u>Article, to the General Assembly on or before December 15, 1999 and a final report in</u> the same manner on or before [December 15] OCTOBER 1, 2000. 				
27	15-130.				
28 29	(A) INDICATE	(1) D.	IN THI	S SECTION THE FOLLOWING WORDS HAVE THE MEANINGS	
30		(2)	"CARR	IER" MEANS:	
31			(I)	AN INSURER;	
32			(II)	A NONPROFIT HEALTH SERVICE PLAN;	
33			(III)	A HEALTH MAINTENANCE ORGANIZATION;	

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1	(IV) A DENTAL PLAN ORGANIZATION; OR
2 3 SUBJECT TO	(V) ANY OTHER PERSON THAT PROVIDES HEALTH BENEFIT PLANS REGULATION BY THE STATE.
4 (5 TITLE.	3) "SAAC PRODUCT" HAS THE MEANING STATED IN § 15 6A 01 OF THIS
	THIS SECTION APPLIES TO CARRIERS THAT OFFER MEDICALLY TTEN HEALTH INSURANCE IN THE NONGROUP MARKET IN THE STATE.
9 DECLINATIO 10 INSURANCE	1) A CARRIER SUBJECT TO THIS SECTION THAT SENDS A LETTER OF ON TO AN APPLICANT FOR MEDICALLY UNDERWRITTEN HEALTH IN THE NONGROUP MARKET SHALL SEND TO THE APPLICANT ON ABOUT THE AVAILABILITY OF SAAC PRODUCTS IN THE NONGROUP
	2) THE INFORMATION SHALL BE IN THE FORM, AND SHALL BE SENT IN ER, THAT THE COMMISSIONER REQUIRES.
15	SUBTITLE 6A. SUBSTANTIAL, AVAILABLE, AND AFFORDABLE COVERAGE PRODUCTS.
16 15-6A-01.	
17 (A) I 18 INDICATED	N THIS SUBTITLE THE FOLLOWING WORDS HAVE THE MEANINGS .
19 (B)	CARRIER" MEANS:
20 (1) AN INSURER;
21 (2) A NONPROFIT HEALTH SERVICE PLAN;
22 (3) A HEALTH MAINTENANCE ORGANIZATION;
23 (4) A DENTAL PLAN ORGANIZATION; OR
	5) ANY OTHER PERSON THAT PROVIDES HEALTH BENEFIT PLANS OREGULATION BY THE STATE.
26 (C) " 27 COMMISSIC	COMMISSION" MEANS THE STATE HEALTH SERVICES COST REVIEW
. ,	'SUBSTANTIAL, AVAILABLE, AND AFFORDABLE COVERAGE PRODUCT'' OR DUCT'' MEANS A HEALTH BENEFIT PLAN THAT:
30 (1) IS OFFERED IN THE NONGROUP MARKET;
31 (2) IS OFFERED ON AN OPEN ENROLLMENT BASIS;

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1 2 ESTABLIS	(3) INCLUDES BENEFITS IN ACCORDANCE WITH THE PLAN SHED UNDER § 15-6A-04 OF THIS SUBTITLE; AND
3 4 GREATER	(4) IS PRICED AT LEAST 5% HIGHER THAN THE PREMIUMS OF THE
5 6 ISSUED B	(I) ANY COMPREHENSIVE STANDARD HEALTH BENEFIT PLAN Y THE CARRIER PURSUANT TO § 15-1207 OF THIS TITLE; OR
7 8 INDIVIDU	(II) A BENEFIT-EQUIVALENT MEDICALLY UNDERWRITTEN IAL PRODUCT OFFERED BY THE CARRIER.
9 15 6A 02.	
10 THE C	COMMISSIONER SHALL NOTIFY THE COMMISSION OF EACH CARRIER THAT:
11 12 This sue	(1) APPLIES FOR APPROVAL OF A SAAC PRODUCT UNDER § 15 6A 03 OF STITLE; OR
13 14 OF THIS ((2) HAS A SAAC PRODUCT THAT HAS BEEN APPROVED UNDER § 15 6A 03 SUBTITLE.
15 15-6A-03.	
18 REQUIRE	TO APPLY FOR APPROVAL OF A SAAC PRODUCT, A CARRIER SHALL SUBMIT COMMISSIONER AN APPLICATION ON THE FORM THE COMMISSIONER IS AND EVIDENCE THAT THE CARRIER'S SAAC PRODUCT COMPLIES WITH UIREMENTS OF SUBSECTION (B) OF THIS SECTION.
20 (B)	TO QUALIFY FOR APPROVAL, A SAAC PRODUCT SHALL:
	(1) BE ADVERTISED BY THE CARRIER DURING AT LEAST TWO OPEN MENT PERIODS PER YEAR, FOR A DURATION OF 1 MONTH PER OPEN MENT PERIOD;
24 25 IS CONSI	(2) HAVE AGE OR GEOGRAPHY BANDING OF ITS COMMUNITY RATE THAT STENT WITH § 15–1205 OF THIS TITLE; AND
26 27 AND THE	(3) COMPLY WITH ANY REGULATIONS ADOPTED BY THE COMMISSIONER COMMISSION.
28 [15 606.]	15 6A-04.
29 (a)	[In this section, "carrier" means:
30	(1) an insurer;
31	(2) a nonprofit health service plan;
32	(3) a health maintenance organization;

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1	1 (4) a dental plan organization; or						
2 3	2 (5) any other person that provides health benefit plans subject to 3 regulation by the State.]						
6 7 8	 [(b) (1)] The Maryland Health Care Commission shall adopt regulations that specify a plan for A substantial, available, and affordable coverage PRODUCT that shall be offered in the nongroup market by a carrier that qualifies for an approved [purchaser] differential under § 19 207.1(C) OF THE HEALTH GENERAL ARTICLE AND regulations adopted by the COMMISSIONER AND THE [Health Services Cost Review] Commission. 						
11	10[(2)](B)In establishing a plan under this [subsection] SECTION, the11Maryland Health Care Commission shall judge preventive services, medical12treatments, procedures, and related health services based on:						
13		[(i)]	(1)	their effectiveness in improving the health of individuals;			
14 15			(2) only the	their impact on maintaining and improving health and e health care services they need; and			
16	i	[(iii)]	(3)	their impact on the affordability of health care coverage.			
17 18	[(3)] 8 plan:	(C)	The Ma	aryland Health Care Commission may exclude from the			
21	for covered health car	re service provided	or offer	a health care service, benefit, coverage, or reimbursement required under this article or the Health - red in a health benefit plan that is issued or			
25	plan for a service whe	en that sei	rvice is p	reimbursement required by statute, by a health benefit performed by a health care provider who is Article and whose scope of practice includes			
				an shall include uniform deductibles and cost sharing and by the Maryland Health Care			
30 31	Health Care Commis			plishing cost sharing as part of the plan, the Maryland			
32 33	consumers use only t						
34 35	and in affecting utiliz	[(ii)] ation of a		balance the effect of cost-sharing in reducing premiums ate services; and			

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1 2	individual in a year.	[(iii)]	(3)	limit the total cost sharing that may be incurred by an
3	15-6A-05.			
4 5	THE COMMISSI SUBTITLE.	ONER M	AY AD	OPT REGULATIONS TO IMPLEMENT THIS
	the Health Services Co	ost Review	/ Comn	ER ENACTED, That, until January 1, 2002, hission may not take any action to eliminate or ffect on June <u>April</u> 1, 2000 <u>until:</u>
9 10				Study the Non-group Health Insurance Market has Assembly; and
11 12	(2) during the 2001 Sessi			mbly has affirmatively acted on that final report Assembly.
13 14	SECTION 3. ANI take effect June 1, 200		URTH	ER ENACTED, That, Section 2 of this Act shall
15 16				ER ENACTED, That, except as provided in effect January 1, 2002 <u>July 1, 2001</u> .
17	SECTION 1. BE I	T ENACT	ED BY	THE GENERAL ASSEMBLY OF

18 MARYLAND, That Section 15-128 of Article - Insurance of the Annotated Code of 19 Maryland be repealed.

20 <u>SECTION 2. AND BE IT FURTHER ENACTED, That this Act shall take effect</u> 21 <u>June 1, 2000.</u>