## **SENATE BILL 134**

EMERGENCY BILL

4lr0133 CF HB 119

## By: The President (By Request - Administration) and Senators Middleton, Astle, Feldman, Kelley, Klausmeier, Mathias, and Pugh

Introduced and read first time: January 9, 2014

Assigned to: Finance

Committee Report: Favorable with amendments

Senate action: Adopted

Read second time: January 17, 2014

CHAPTER	

1 AN ACT concerning

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## Maryland Health Insurance Plan – Access for Bridge Eligible Individuals

FOR the purpose of altering the purpose of the Maryland Health Insurance Plan to include decreasing uncompensated care costs by providing access to affordable, comprehensive health benefits for certain bridge eligible individuals; providing that it is the intent of the General Assembly that Maryland Health Insurance Plan Fund revenue be used to subsidize health insurance coverage for bridge eligible individuals; repealing a certain provision of law that provides that enrollment in the Plan shall be closed to any individual who is not enrolled has not applied for enrollment in the Plan as of a certain date; altering a certain limitation on reenrollment in the Plan; providing that enrollment in the Plan shall be closed to any bridge eligible individual who is not enrolled in the Plan as of a certain date; providing that the enrollment of a bridge eligible individual in the Plan terminates on the effective date of enrollment in a certain health plan; exempting an amendment that pertains to the enrollment of bridge eligible individuals from a certain requirement that any amendments to a certain plan of operation be submitted to the Maryland Insurance Commissioner for approval; authorizing the Board of Directors for the Maryland Health Insurance Plan to adopt certain policies and procedures; requiring the Board to provide notice of the policies and procedures to certain committees of the General Assembly; authorizing the Board to extend the date for closing certain enrollment under certain circumstances; requiring the Board to notify certain legislative committees and the Department of Legislative Services of the extension within a certain time period; providing for the termination of this Act;

EXPLANATION: CAPITALS INDICATE MATTER ADDED TO EXISTING LAW.

[Brackets] indicate matter deleted from existing law.

<u>Underlining</u> indicates amendments to bill.

Strike out indicates matter stricken from the bill by amendment or deleted from the law by amendment.



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1 2 3	defining a certain term; making certain conforming changes; making this Act an emergency measure; and generally relating to the Maryland Health Insurance Plan.
4	BY repealing and reenacting, without amendments,
5	Article – Insurance
6	Section 14–501(a), (c), (j), and (k) and 14–503(a)
7	Annotated Code of Maryland
8	(2011 Replacement Volume and 2013 Supplement)
9	BY adding to
0	Article – Insurance
1	Section 14–501(c–1)
12	Annotated Code of Maryland
13	(2011 Replacement Volume and 2013 Supplement)
4	BY repealing and reenacting, with amendments,
L <b>5</b>	Article – Insurance
6	Section 14–502 and 14–503(i)
L <b>7</b>	Annotated Code of Maryland
18	(2011 Replacement Volume and 2013 Supplement)
19 20	SECTION 1. BE IT ENACTED BY THE GENERAL ASSEMBLY OF MARYLAND, That the Laws of Maryland read as follows:
21	Article – Insurance
22	14–501.
23	(a) In this subtitle the following words have the meanings indicated.
) 1	(c) "Board" means the Board of Directors for the Maryland Health Insurance
24 25	(c) "Board" means the Board of Directors for the Maryland Health Insurance Plan.
26	(C-1) (1) "BRIDGE ELIGIBLE INDIVIDUAL" MEANS AN INDIVIDUAL WHO:
27	(I) IS A QUALIFIED INDIVIDUAL AS DEFINED IN § 31–101 OF
28	THIS ARTICLE; AND
29	(II) 1. PROVIDES EVIDENCE THAT THE INDIVIDUAL HAS
30	ATTEMPTED TO OBTAIN INSURANCE THROUGH THE MARYLAND HEALTH
31	BENEFIT EXCHANGE AND WAS UNSUCCESSFUL IN ENROLLING IN COVERAGE; OR
32	2. IS A DEPENDENT AS DEFINED IN § 15–1316 OF
33	THIS ARTICLE.

$\frac{1}{2}$	(2) "BRIDGE ELIGIBLE INDIVIDUAL" DOES NOT INCLUDE AN INDIVIDUAL WHO IS ELIGIBLE FOR COVERAGE UNDER:
3	(I) THE FEDERAL MEDICARE PROGRAM;
4 5 6 7	(II) UNLESS THE INDIVIDUAL IS ELIGIBLE FOR A SUBSIDY OF PLAN COSTS PROVIDED BY THE DEPARTMENT OF HEALTH AND MENTAL HYGIENE UNDER A MEDICAID WAIVER PROGRAM, THE MARYLAND MEDICAL ASSISTANCE PROGRAM;
8	(III) THE MARYLAND CHILDREN'S HEALTH PROGRAM; OR
9 10	(IV) AN EMPLOYER-SPONSORED GROUP HEALTH INSURANCE PLAN THAT INCLUDES BENEFITS COMPARABLE TO PLAN BENEFITS.
11	(j) "Plan" means the Maryland Health Insurance Plan.
12 13	(k) "Plan of operation" means the articles, bylaws, and operating rules and procedures adopted by the Board in accordance with § 14–503 of this subtitle.
14	14–502.
15	(a) There is a Maryland Health Insurance Plan.
16	(b) The Plan is an independent unit of the State government.
17	(c) The purpose of the Plan is to decrease uncompensated care costs by:
18 19	(1) providing access to affordable, comprehensive health benefits for medically uninsurable residents of the State by July 1, 2003; AND
20 21	(2) PROVIDING ACCESS TO AFFORDABLE, COMPREHENSIVE HEALTH BENEFITS FOR BRIDGE ELIGIBLE INDIVIDUALS, AS NEEDED, ON:
22 23	(I) A RETROACTIVE BASIS BEGINNING NO EARLIER THAN JANUARY 1, 2014; AND
24	(II) A PROSPECTIVE BASIS.
25 26 27	(d) It is the intent of the General Assembly that the Plan operate as a nonprofit entity and that Fund revenue, to the extent consistent with good business practices, be used to:
28 29	(1) subsidize health insurance coverage for medically uninsurable individuals AND BRIDGE ELIGIBLE INDIVIDUALS; and

(2) fund the State Reinsurance Program authorized under § 31–117 of 1 2 this article. 3 (e) (1) The operations of the Plan are subject to the provisions of this 4 subtitle whether the operations are performed directly by the Plan itself or through an entity contracted with the Plan. 5 6 **(2)** The Plan shall ensure that any entity contracted with the Plan 7 complies with the provisions of this subtitle when performing services that are subject to this subtitle on behalf of the Plan. 8 9 (f) Enrollment in the Plan shall be closed to any individual who is not enrolled in the Plan as of December 31, 2013. 10 11 (ii) A [member] MEDICALLY UNINSURABLE INDIVIDUAL 12 enrolled in the Plan as of December 31, 2013, who thereafter terminates enrollment may not reenroll in the Plan UNLESS ENROLLING AS A BRIDGE ELIGIBLE 13 14 INDIVIDUAL. 15 (II)ENROLLMENT IN THE PLAN SHALL BE CLOSED TO ANY 16 BRIDGE ELIGIBLE INDIVIDUAL WHO IS NOT ENROLLED HAS NOT APPLIED FOR ENROLLMENT IN THE PLAN AS OF MARCH 31, 2014. 17 18 (III) ON THE EFFECTIVE DATE OF ENROLLMENT IN A 19 QUALIFIED HEALTH PLAN THROUGH THE MARYLAND HEALTH BENEFIT 20 EXCHANGE, THE ENROLLMENT OF A BRIDGE ELIGIBLE INDIVIDUAL IN THE PLAN 21TERMINATES. 22 Subject to paragraph (3) of this subsection, the Board, in (2)consultation with the Maryland Health Benefit Exchange, shall determine the 23 24appropriate date on which the Plan shall decline to reenroll Plan members beyond the 25 term of the members' existing Plan coverage. 26The date on which the Plan no longer will provide coverage to all Plan members shall be no earlier than January 1, 2014, and no later than January 1, 27282020. 29 Beginning October 1, 2013, and annually thereafter until the Plan no (g) 30 longer provides coverage to members, the Board shall provide notice to Plan members 31 that, effective January 1, 2014, the member:

may not be denied health insurance because of a preexisting health

(2) may be eligible to:

(1)

condition; and

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1	(i) enroll in the Maryland Medical Assistance Program;
2 3 4	(ii) purchase a health benefit plan offered in the Maryland Health Benefit Exchange or in the insurance market outside the Maryland Health Benefit Exchange; and
5 6	(iii) receive federal premium and cost—sharing assistance for the purchase of a health benefit plan in the Maryland Health Benefit Exchange.
7	14-503.
8	(a) There is a Board for the Plan.
9	(i) (1) The Board shall adopt a plan of operation for the Plan.
10 11 12 13	(2) The Board shall submit the plan of operation and any amendment to the plan of operation, EXCEPT AN AMENDMENT THAT PERTAINS TO THE ENROLLMENT OF BRIDGE ELIGIBLE INDIVIDUALS, to the Commissioner for approval.
14	SECTION 2. AND BE IT FURTHER ENACTED, That:
15 16 17	(a) The Board of Directors for the Maryland Health Insurance Plan may adopt policies and procedures necessary to operate and administer the Plan as it pertains to the enrollment of bridge eligible individuals.
18	(b) The policies and procedures may include:
19 20 21	(1) procedures for determining, to the best of the Board's ability, that bridge eligible individuals meet the definition of "qualified individual " under $\S$ 31–101 of the Insurance Article;
22	(2) Plan enrollment procedures; and
23	(3) any other Plan requirement as determined by the Board.
24 25 26 27	(c) The Board shall provide notice of the policies and procedures adopted under this section to the Joint Committee on Administrative, Executive, and Legislative Review, the Senate Finance Committee, and the House Health and Government Operations Committee.
28 29	<u>SECTION 3. AND BE IT FURTHER ENACTED, That the Board of Directors for the Maryland Health Insurance Plan:</u>
30 31	(1) may extend the date established under § 14–502(f)(1)(ii) of the Insurance Article, as enacted by Section 1 of this Act, for closing enrollment in the

1 2 3	Maryland Health Insurance Plan to bridge eligible individuals if the Board determines that bridge eligible individuals continue to be unsuccessful in enrolling in coverage through the Maryland Health Benefit Exchange; and
4 5 6 7	(2) shall notify the Senate Finance Committee, the House Health and Government Operations Committee, the Legislative Policy Committee of the General Assembly, and the Department of Legislative Services of the extension within 15 days after it is approved.
8 9 0 1 2 3 4	SECTION \$\frac{*}{2}\$. AND BE IT FURTHER ENACTED, That this Act is at emergency measure, is necessary for the immediate preservation of the public health or safety, has been passed by a yea and nay vote supported by three-fifths of all the members elected to each of the two Houses of the General Assembly, and shall take effect from the date it is enacted. It shall remain effective through June 30, 2015, and at the end of June 30, 2015, with no further action required by the General Assembly this Act shall be abrogated and of no further force and effect.
	Approved:
	Governor.
	President of the Senate.

Speaker of the House of Delegates.