C3, J1 7lr2112 CF SB 571

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Committee Report: Favorable with amendments House action: Adopted with floor amendments

Read second time: March 21, 2017

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Maryland Health Insurance Coverage Protection Act

FOR the purpose of establishing the Maryland Health Insurance Coverage Protection Commission; providing for the composition, chair cochairs, and staffing of the Commission; prohibiting a member of the Commission from receiving certain compensation, but authorizing the reimbursement of certain expenses; requiring the Commission to study monitor and assess the impact of certain changes to certain laws and programs and make recommendations regarding certain matters; requiring the duties of the Commission to include a certain study; authorizing the Commission to hold public meetings across the State for a certain purpose; requiring the Commission to report its findings and recommendations to the Governor and the General Assembly on or before a certain date each year; providing for the termination of this Act; defining a

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.



$\frac{1}{2}$	certain term; and generally relating to the Maryland Health Insurance Coverage Protection Commission.
3	Preamble
4 5 6	WHEREAS, The Congressional Budget Office estimates that a repeal of the Patient Protection and Affordable Care Act (ACA) may result in 22 million individuals becoming uninsured in the United States; and
7 8 9 10	WHEREAS, With a health insurance market collapse potentially resulting from a repeal of the ACA, an additional 7.3 million individuals could lose insurance coverage, leading to a total of nearly 30 million individuals losing health care coverage nationwide; and
11 12	WHEREAS, In Maryland, more than 350,000 people may become uninsured in the aftermath of a repeal of the ACA; and
13 14	WHEREAS, A repeal or weakening of the ACA, Medicaid, or Medicare could more than double the number of individuals without health insurance by 2019; and
15 16 17	WHEREAS, One in five of the nonelderly population in the State could become uninsured, which would be more individuals uninsured than before the implementation of the ACA in 2009; and
18 19 20	WHEREAS, About 12.9 million individuals in the United States could lose Medicaid or Children's Health Insurance Program coverage as a result of a repeal or weakening of the ACA or Medicaid, including more than 200,000 individuals in our State; and
21 22	WHEREAS, A repeal or weakening of the ACA, Medicaid, or Medicare would could disproportionately affect working and retired individuals and families; and
23 24 25	WHEREAS, Millions of American seniors, including hundreds of thousands of Maryland seniors, could see their prescription drug costs rise substantially as a result of a repeal or weakening of the ACA or Medicare; and
26 27 28 29	WHEREAS, It is prudent for Maryland to study and develop a plan to mitigate these negative effects of a repeal or weakening of the ACA, Medicaid, or Medicare, address economic impacts, help save lives, and protect public health by recommending and implementing solutions to this broad–scale loss of health coverage; and
30 31	WHEREAS, The United States Congress should not repeal or weaken the ACA, Medicaid, or Medicare; now, therefore,

 $\,$ SECTION 1. BE IT ENACTED BY THE GENERAL ASSEMBLY OF MARYLAND, 33 $\,$ That:

In this section, "ACA" means the federal Patient Protection and Affordable 1 (a) 2 Care Act. 3 (b) There is a Maryland Health Insurance Coverage Protection Commission. 4 (c) The Commission consists of the following members: two three members of the Senate of Maryland, appointed by the 5 (1)6 President of the Senate; 7 (2)two three members of the House of Delegates, appointed by the Speaker of the House: 8 9 the Secretary of Health and Mental Hygiene, or the Secretary's (3)10 designee; 11 **(4)** the Maryland Insurance Commissioner, or the Commissioner's 12designee; and 13 (5)the Attorney General, or the Attorney General's designee; and five the following members of the public, appointed jointly by the 14 (5) (6) President of the Senate and the Speaker of the House: 15 16 (i) one representative of the Maryland Hospital Association; 17 one representative of a managed care organization, appointed (ii) jointly by the President of the Senate and the Speaker of the House; 18 19 (iii) one consumer of health care services, appointed jointly by the 20President of the Senate and the Speaker of the House; 21(iv) one representative of a nonprofit health service plan that has offered plans in all jurisdictions and in all fully-insured markets in the State both before 22and after the enactment of the ACA, appointed by the Governor health insurance carrier. 23appointed jointly by the President of the Senate and the Speaker of the House; 2425one representative who is an employer, appointed by the (v) 26Governor; 27 one representative of the nursing home industry, appointed by (vi) 28the Governor: and 29 (vii) one representative of MedChi; 30 (viii) one representative of behavioral health providers, appointed 31 jointly by the President of the Senate and the Speaker of the House; and

1	(vii) (ix) two members of the public:
2 3	1. one of whom shall be appointed jointly by the President of the Senate and the Speaker of the House; and
4	2. one of whom shall be appointed by the Governor.
5 6 7 8	(d) The chair of the Commission shall be designated jointly by the President of the Senate and the Speaker of the House of Delegates shall designate a member who is a Senator and a member who is a Delegate, respectively, to serve as cochairs of the Commission.
9 10 11	(e) The Department of Legislative Services, the Department of Health and Mental Hygiene, and the Maryland Insurance Administration jointly shall provide staff for the Commission.
12	(f) A member of the Commission:
13	(1) may not receive compensation as a member of the Commission; but
14 15	(2) is entitled to reimbursement for expenses under the Standard State Travel Regulations, as provided in the State budget.
16	(g) (1) The Commission shall:
17 18 19	(i) monitor potential and actual federal changes to the ACA, Medicaid, the Maryland Children's Health Program, Medicare, and the Maryland All-Payer Model;
20 21 22	(i) (ii) conduct a study to assess the impact of potential and actual federal changes to the ACA, Medicaid, the Maryland Children's Health Program, and Medicare, and the Maryland All–Payer Contract; and
23 24	(ii) (iii) provide recommendations for State and local action to protect access of residents of the State to affordable health coverage.
25 26	(2) The study conducted <u>duties of the Commission</u> under paragraph (1) of this subsection shall include <u>a study that includes</u> :
27 28 29 30	(i) an assessment of the current and potential adverse effects of the loss of health coverage on the residents, public health, and economy of the State resulting from a repeal or weakening of changes to the ACA, Medicaid, the Maryland Children's Health Program, or Medicare Medicare, or the Maryland All-Payer Model;
31 32	(ii) an estimate of the costs to the State and State residents of adverse effects from a repeal or weakening of changes to the ACA, Medicaid, the Maryland

$\frac{1}{2}$	<u>Children's Health Program, or Medicare</u> <u>Medicare</u> , or the Maryland All–Payer Model and the resulting loss of health coverage;
3 4 5 6 7	(iii) an examination of measures that may prevent or mitigate the adverse effects of a repeal or weakening of changes to the ACA, Medicaid, the Maryland Children's Health Program, or Medicare Medicare, or the Maryland All-Payer Model and the resulting loss of health coverage on the residents, public health, and economy of the State; and
8	(iv) recommendations for laws that:
9 10 11	1. may be warranted to minimize the adverse effects associated with a repeal or weakening of changes to the ACA, Medicaid, the Maryland Children's Health Program, or Medicare Medicare, or the Maryland All—Payer Model; and
12 13	2. will assist residents in obtaining and maintaining affordable health coverage.
14	(h) The Commission may: may:
15 16	(1) may hold public meetings across the State to conduct the study carry out the duties of the Commission; and
17	(2) <u>shall</u> convene workgroups to solicit input from stakeholders.
18 19 20 21	(i) On or before December 31 , 2017 each year, the Commission shall submit a report on its findings and recommendations, including any legislative proposals, to the Governor and, in accordance with § 2–1246 of the State Government Article, the General Assembly.
22 23 24 25	SECTION 2. AND BE IT FURTHER ENACTED, That this Act shall take effect June 1, 2017. It shall remain effective for a period of 1 year 3 years and 1 month and, at the end of June 30, 2018 2020, with no further action required by the General Assembly, this Act shall be abrogated and of no further force and effect.
	Approved:
	$\qquad \qquad \text{Governor.}$
	Speaker of the House of Delegates.

President of the Senate.