HOUSE BILL 1423

By: **Delegate Krebs** Rules suspended

Introduced and read first time: March 5, 2019 Assigned to: Rules and Executive Nominations

A BILL ENTITLED

1 AN ACT concerning

2 Maryland Health Insurance Plan Fund – Use of Remaining Balance

- FOR the purpose of altering the fiscal years in which the remaining fund balance in the
 Maryland Health Insurance Plan Fund from certain sources may be used for certain
 activities related to high-needs Medicare and dually eligible individuals; repealing
 obsolete provisions of law; making technical changes; and generally relating to the
 Maryland Health Insurance Plan Fund.
- 8 BY repealing and reenacting, with amendments,
- 9 Chapter 489 of the Acts of the General Assembly of 2015, as amended by Chapter 10 321 of the Acts of the General Assembly of 2016
- 11 Section 9

SECTION 1. BE IT ENACTED BY THE GENERAL ASSEMBLY OF MARYLAND,
 That the Laws of Maryland read as follows:

14 Chapter 489 of the Acts of 2015, as amended by Chapter 321 of the Acts of 2016

15 SECTION 9. AND BE IT FURTHER ENACTED, That, notwithstanding any other
 16 provision of law:

(a) Subject to subsection (b) of this section, for fiscal year 2015, funds in the
 Maryland Health Insurance Plan Fund established under § 14–504 of the Insurance Article
 may be used by the [Department of Health and Mental Hygiene] MARYLAND
 DEPARTMENT OF HEALTH to fund provider reimbursements in the Medicaid program.

21 (b) The amount of funds that may be used under subsection (a) of this section 22 shall be the greater of:

EXPLANATION: CAPITALS INDICATE MATTER ADDED TO EXISTING LAW. [Brackets] indicate matter deleted from existing law.



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(1) \$55,000,000; or

2 (2) The estimated percentage of the fund balance obtained from payers 3 other than the federal Medicare program or the Medicaid program.

4 (c) (1) Except as provided in paragraph (2) of this subsection, the] THE remaining fund balance obtained from the federal Medicare program or the Medicaid $\mathbf{5}$ 6 program may be used in fiscal years [2016 through 2019] **2020** THROUGH **2022** to support 7integrated care networks designed to reduce health care expenditures and improve 8 outcomes for unmanaged high-needs Medicare patients and patients dually eligible for 9 Medicaid and Medicare, consistent with the goals of Maryland's [all-payer] TOTAL COST 10 OF CARE model.

11 [(2) \$90,000 of the remaining fund balance obtained from the federal 12 Medicare program or the Medicaid program may be used in fiscal years 2016 and 2017 to 13 support the remaining expenses of the Maryland Health Insurance Plan.]

SECTION 2. AND BE IT FURTHER ENACTED, That this Act shall take effect July1, 2019.