C3 9lr0991 CF 9lr0536

By: Senator Feldman

Introduced and read first time: January 25, 2019

Assigned to: Finance

A BILL ENTITLED

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Health Insurance – Individual Market Stabilization – Provider Fee

- 3 FOR the purpose of altering the purpose of certain provisions of law requiring that certain entities be subject to a certain assessment on all amounts used to calculate a certain 4 5 premium tax liability or the amount of the entity's premium tax exemption value; 6 requiring that certain entities be subject to certain assessments for certain calendar 7 years in which the federal government makes an assessment and for certain calendar 8 years in which the federal government does not make an assessment under a certain 9 provision of federal law; and generally relating to the stabilization of the individual market and the health insurance provider fee. 10
- 11 BY repealing and reenacting, with amendments,
- 12 Article Insurance
- 13 Section 6–102.1
- 14 Annotated Code of Maryland
- 15 (2017 Replacement Volume and 2018 Supplement)
- 16 SECTION 1. BE IT ENACTED BY THE GENERAL ASSEMBLY OF MARYLAND,
- 17 That the Laws of Maryland read as follows:

18 Article – Insurance

19 6–102.1.

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- 20 (a) This section applies to:
- 21 (1) an insurer, a nonprofit health service plan, a health maintenance 22 organization, a dental plan organization, a fraternal benefit organization, and any other 23 person subject to regulation by the State that provides a product that:
 - (i) is subject to the fee under § 9010 of the Affordable Care Act; and

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- 1 (ii) may be subject to an assessment by the State; and
- 2 (2) a managed care organization authorized under Title 15, Subtitle 1 of 3 the Health General Article.
 - (b) The purpose of this section is to [recoup the aggregate amount of the] ASSIST IN THE STABILIZATION OF THE INDIVIDUAL HEALTH INSURANCE MARKET BY ASSESSING A health insurance provider fee [that otherwise would have been assessed under § 9010 of the Affordable Care Act] that is attributable to State health risk for calendar year 2019 [as a bridge to stability in the individual health insurance market] AND EACH CALENDAR YEAR THEREAFTER AS PROVIDED FOR UNDER SUBSECTION (C) OF THIS SECTION.
- [In] FOR A calendar year [2019] IN WHICH THE FEDERAL 11 (c) (1) 12 GOVERNMENT DOES NOT MAKE AN ASSESSMENT UNDER § 9010 OF THE 13 AFFORDABLE CARE ACT, in addition to the amounts otherwise due under this subtitle. an entity subject to this section shall be subject to an assessment of 2.75% on all amounts 14 15 used to calculate the entity's premium tax liability under § 6–102 of this subtitle or the 16 amount of the entity's premium tax exemption value for THE IMMEDIATELY PRECEDING 17 calendar year [2018].
- 18 (2) FOR A CALENDAR YEAR IN WHICH THE FEDERAL GOVERNMENT
 19 MAKES AN ASSESSMENT UNDER § 9010 OF THE AFFORDABLE CARE ACT, IN
 20 ADDITION TO THE AMOUNTS OTHERWISE DUE UNDER THIS SUBTITLE, AN ENTITY
 21 SUBJECT TO THIS SECTION SHALL BE SUBJECT TO AN ASSESSMENT OF 1% ON ALL
 22 AMOUNTS USED TO CALCULATE THE ENTITY'S PREMIUM TAX LIABILITY UNDER §
 23 6–102 OF THIS SUBTITLE OR THE AMOUNT OF THE ENTITY'S PREMIUM TAX
 24 EXEMPTION VALUE FOR THE IMMEDIATELY PRECEDING CALENDAR YEAR.
- [(2)] (D) Notwithstanding § 2–114 of this article, the assessment required under this section shall be distributed by the Commissioner to the Maryland Health Benefit Exchange Fund established under § 31–107 of this article.
- SECTION 2. AND BE IT FURTHER ENACTED, That this Act shall take effect October 1, 2019.