C3 0lr0680 CF HB 196

By: Senator Feldman Senators Feldman, Augustine, Beidle, Benson, Hayes, Hershey, Jennings, Kelley, Klausmeier, Kramer, and Reilly

Introduced and read first time: January 9, 2020

Assigned to: Finance

Committee Report: Favorable with amendments

Senate action: Adopted

Read second time: March 1, 2020

CHAPTER	

## 1 AN ACT concerning

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Maryland Health Benefit Exchange – <del>Establishment of a</del> <u>Assessment</u> <u>Applicability and</u> State–Based Health Insurance Subsidies Program

FOR the purpose of requiring that a certain assessment be used to fund the State Reinsurance Program and the State-Based Health Insurance Subsidies Program; requiring the Maryland Health Benefit Exchange to allocate certain funds between the State Reinsurance Program and the State-Based Health Insurance Subsidies Program in a certain manner; clarifying the applicability of a certain assessment to certain entities for certain products; altering the purpose of the Maryland Health Benefit Exchange Fund to include providing funding for the establishment and operation of the State-Based Health Insurance Subsidies Program; providing that the operation and administration of the State-Based Health Insurance Subsidies Program may include certain functions delegated to certain third parties; altering the contents of the Fund; altering the purposes for which the Fund may be used; requiring the Board of Trustees of the Exchange to maintain a separate account within the Fund for the State-Based Health Insurance Subsidies Program under certain circumstances; clarifying that certain funds received from the federal government under a certain waiver may be used only for the purposes of funding the State Reinsurance Program; requiring authorizing the Exchange, in consultation with the Maryland Insurance Commissioner and as approved by the Board, to establish and implement a State-Based Health Insurance Subsidies Program to provide subsidies to individuals for the purchase of health benefit plans in the individual health insurance market; requiring the State-Based Health Insurance Subsidies Program to be designed to reduce the amount that individuals pay for

## 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.



1 certain health benefit plans in the individual health insurance market; requiring the 2 Exchange, in consultation with the Commissioner and as approved by the Board and 3 based on available funds, to establish certain parameters for a certain year and each 4 subsequent calendar year; authorizing the Exchange, in consultation with the 5 Commissioner and as approved by the Board, to alter the parameters under certain 6 <del>circumstances</del> years; providing that, beginning on a certain date, funding for the 7 State-Based Health Insurance Subsidies Program may be made by using certain 8 funds; requiring the Exchange to adopt regulations on or before a certain date; 9 requiring the Board authorizing the Exchange, in consultation with the 10 Commissioner and as approved by the Board, to make a certain determination concerning a certain waiver and apply for a certain waiver under certain 11 <del>circumstances on or before a certain date</del>; requiring the Exchange to track certain 12 information, post the information on a certain website, and include the information 13 in a certain report; and generally relating to the Maryland Health Benefit Exchange 14 15 and the State-Based Health Insurance Subsidies Program.

- 16 BY repealing and reenacting, with amendments,
- 17 Article Insurance
- 18 Section 6–102.1 and 31–107
- 19 Annotated Code of Maryland
- 20 (2017 Replacement Volume and 2019 Supplement)
- 21 BY adding to
- 22 Article Insurance
- 23 Section 31–122 and 31–123
- 24 Annotated Code of Maryland
- 25 (2017 Replacement Volume and 2019 Supplement)
- 26 SECTION 1. BE IT ENACTED BY THE GENERAL ASSEMBLY OF MARYLAND,
- 27 That the Laws of Maryland read as follows:
- 28 Article Insurance
- 29 6–102.1.

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- 30 (a) This section applies to:
- 31 (1) an insurer, a nonprofit health service plan, a health maintenance 32 organization, a dental plan organization, a fraternal benefit organization, and any other 33 person subject to regulation by the State that provides a product that:
- 34 (i) is <u>WAS</u> subject to § 9010 of the Affordable Care Act, <u>AS IN</u> 35 **EFFECT ON DECEMBER 1, 2019**; and
  - (ii) may be subject to an assessment by the State; and

- 1 (2) a managed care organization authorized under Title 15, Subtitle 1 of 2 the Health General Article.
- 3 (b) The purpose of this section is to assist in the stabilization of the individual 4 health insurance market by assessing a health insurance provider fee that is attributable 5 to State health risk for calendar years 2019 through 2023, both inclusive, as provided for 6 under subsection (c) of this section.
  - (c) (1) In calendar year 2019, 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 used to calculate the entity's premium tax liability under § 6–102 of this subtitle or the amount of the entity's premium tax exemption value for calendar year 2018.
- 11 (2) In calendar years 2020 through 2023, both inclusive, in addition to the amounts otherwise due under this subtitle, an entity subject to this section shall be subject to an assessment of 1% on all amounts used to calculate the entity's premium tax liability under § 6–102 of this subtitle or the amount of the entity's premium tax exemption value for the immediately preceding calendar year.
- 16 (3) The assessments required in paragraphs (1) and (2) of this subsection 17 are for products that:
- 18 (i) are <u>WERE</u> subject to § 9010 of the Affordable Care Act, AS IN 19 **EFFECT ON DECEMBER 1, 2019**; and
- 20 (ii) may be subject to an assessment by the State.

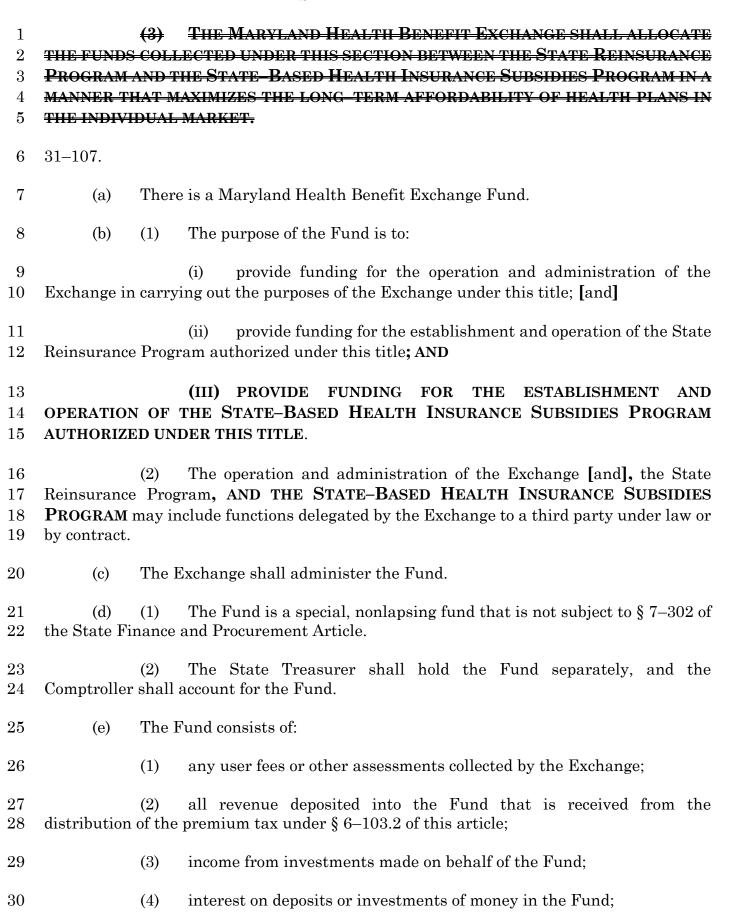
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- 21 (4) The calculation of the assessments required under paragraphs (1) and 22 (2) of this subsection shall be made without regard to:
- 23 (i) the threshold limits established in § 9010(b)(2)(A) of the 24 Affordable Care Act; or
- 25 (ii) the partial exclusion of net premiums provided for in § 26 9010(b)(2)(B) of the Affordable Care Act.
- 27 (d) (1) Notwithstanding § 2–114 of this article, the assessment required under 28 this section shall be distributed by the Commissioner to the Maryland Health Benefit 29 Exchange Fund established under § 31–107 of this article.
- 30 (2) THE ASSESSMENT REQUIRED UNDER THIS SECTION SHALL BE
  31 USED TO FUND THE STATE REINSURANCE PROGRAM ESTABLISHED UNDER § 31–117
  32 OF THIS ARTICLE AND THE STATE-BASED HEALTH INSURANCE SUBSIDIES
  33 PROGRAM ESTABLISHED UNDER § 31–122 OF THIS ARTICLE.



- 1 money collected by the Board as a result of legal or other actions taken (5)2 by the Board on behalf of the Exchange or the Fund; 3 (6)money donated to the Fund; 4 money awarded to the Fund through grants; (7)any pass-through funds received from the federal government under a 5 (8)6 waiver approved under § 1332 of the Affordable Care Act; 7 (9)any funds designated by the federal government to provide reinsurance to carriers that offer individual health benefit plans in the State; 8 9 any funds designated by the State to provide reinsurance to carriers (10)that offer individual health benefit plans in the State; 10 11 (11) ANY FUNDS DESIGNATED BY THE STATE TO PROVIDE 12 STATE-BASED HEALTH INSURANCE SUBSIDIES TO INDIVIDUALS IN THE STATE; 13 [(11)] (12) any federal funds received in accordance with § 31–121 of this title for the administration of small business tax credits; and 14 [(12)] (13) any other money from any other source accepted for the benefit 15 16 of the Fund. 17 (f) The Fund may be used only: 18 (1)for the operation and administration of the Exchange in carrying out 19 the purposes authorized under this title; [and] 20 for the establishment and operation of the State Reinsurance Program; (2) 21**AND** 22 **(3)** FOR THE **ESTABLISHMENT OPERATION** OF THE AND 23STATE-BASED HEALTH INSURANCE SUBSIDIES PROGRAM. 24The Board shall maintain separate accounts within the Fund for 25 Exchange operations [and], for the State Reinsurance Program, AND, IF ESTABLISHED 26 BY THE EXCHANGE, FOR THE STATE-BASED HEALTH INSURANCE SUBSIDIES PROGRAM. 27
- 28 (2) Accounts within the Fund shall contain the money that is intended to support the purpose for which each account is designated.

- 1 (3) Funds received from the distribution of the premium tax under § 6–103.2 of this article shall be placed in the account for Exchange operations and may be used only for the purpose of funding the operation and administration of the Exchange.
- 4 (4) The following funds may be used only for the purposes of funding the 5 State Reinsurance Program:
- (i) any pass—through funds received from the federal government under a waiver approved under § 1332 of the Affordable Care Act TO PROVIDE REINSURANCE TO CARRIERS THAT OFFER INDIVIDUAL HEALTH BENEFIT PLANS IN THE STATE:
- 10 (ii) any funds designated by the federal government to provide 11 reinsurance to carriers that offer individual health benefit plans in the State; and
- 12 (iii) any funds designated by the State to provide reinsurance to carriers that offer individual health benefit plans in the State.
- 14 (h) (1) Expenditures from the Fund for the purposes authorized by this subtitle may be made only:
- 16 (i) with an appropriation from the Fund approved by the General Assembly in the State budget; or
- 18 (ii) by the budget amendment procedure provided for in Title 7, 19 Subtitle 2 of the State Finance and Procurement Article.
- 20 (2) Notwithstanding § 7–304 of the State Finance and Procurement Article, 21 if the amount of the distribution from the premium tax under § 6–103.2 of this article 22 exceeds in any State fiscal year the actual expenditures incurred for the operation and 23 administration of the Exchange, funds in the Exchange operations account from the 24 premium tax that remain unspent at the end of the State fiscal year shall revert to the 25 General Fund of the State.
- 26 (3) If operating expenses of the Exchange may be charged to either State 27 or non-State fund sources, the non-State funds shall be charged before State funds are 28 charged.
- 29 (i) (1) The State Treasurer shall invest the money of the Fund in the same 30 manner as other State money may be invested.
- 31 (2) Any investment earnings of the Fund shall be credited to the Fund.
- 32 (3) Except as provided in subsection (h)(2) of this section, no part of the 33 Fund may revert or be credited to the General Fund or any special fund of the State.

- 1 (j) A debt or an obligation of the Fund is not a debt of the State or a pledge of 2 credit of the State.
- 3 **31–122.**
- 4 (A) THE EXCHANGE, IN CONSULTATION WITH THE COMMISSIONER AND AS
- 5 APPROVED BY THE BOARD, SHALL MAY ESTABLISH AND IMPLEMENT A
- 6 STATE-BASED HEALTH INSURANCE SUBSIDIES PROGRAM TO PROVIDE SUBSIDIES
- 7 TO INDIVIDUALS FOR THE PURCHASE OF HEALTH BENEFIT PLANS IN THE
- 8 INDIVIDUAL HEALTH INSURANCE MARKET.
- 9 (B) THE STATE-BASED HEALTH INSURANCE SUBSIDIES PROGRAM
- 10 AUTHORIZED UNDER THIS SECTION SHALL BE DESIGNED TO REDUCE THE AMOUNT
- 11 THAT INDIVIDUALS PAY FOR HEALTH BENEFIT PLANS IN THE INDIVIDUAL HEALTH
- 12 INSURANCE MARKET.
- 13 (C) (H) BASED ON AVAILABLE FUNDS, THE EXCHANGE, IN CONSULTATION
- 14 WITH THE COMMISSIONER AND AS APPROVED BY THE BOARD, SHALL ESTABLISH
- 15 SUBSIDY ELIGIBILITY AND PAYMENT PARAMETERS FOR CALENDAR YEAR 2021 AND
- 16 EACH SUBSEQUENT CALENDAR YEAR EACH CALENDAR YEAR THE PROGRAM IS IN
- 17 EFFECT.
- 18 <del>(2)</del> The Exchange, in consultation with the Commissioner
- 19 AND AS APPROVED BY THE BOARD, MAY ALTER THE PARAMETERS ESTABLISHED IN
- 20 ACCORDANCE WITH PARAGRAPH (1) OF THIS SUBSECTION AS NECESSARY TO
- 21 SECURE FEDERAL APPROVAL FOR A WAIVER SUBMITTED IN ACCORDANCE WITH §
- 22 **31–123 OF THIS TITLE.**
- 23 (D) BEFORE IMPLEMENTING THE STATE-BASED HEALTH INSURANCE
- 24 SUBSIDIES PROGRAM UNDER THIS SECTION, THE EXCHANGE SHALL STUDY AND
- 25 REPORT TO THE BOARD ON THE FOLLOWING:
- 26 (1) AN ESTIMATE OF THE IMPACT OF USING FUNDING FOR
- 27 STATE-BASED SUBSIDIES ON FUNDING AVAILABILITY FOR REINSURANCE IN THE
- 28 INDIVIDUAL MARKET, USING THE ACTUAL STATE LIABILITY FOR THE STATE
- 29 REINSURANCE PROGRAM FOR THE 2019 BENEFIT YEAR; AND
- 30 (2) THE APPROPRIATE ALLOCATION OF AVAILABLE FUNDING FOR
- 31 REINSURANCE AND STATE-BASED SUBSIDIES THAT WILL MAXIMIZE ENROLLMENT
- 32 AND AFFORDABILITY IN THE INDIVIDUAL MARKET.
- 33 (D) (E) BEGINNING JANUARY 1, 2021, FUNDING FOR THE STATE-BASED
- 34 HEALTH INSURANCE SUBSIDIES PROGRAM MAY BE MADE BY USING ANY FUNDS
- 35 DESIGNATED BY THE STATE TO PROVIDE SUBSIDIES TO INDIVIDUALS WHO MEET

- 1 THE SUBSIDY ELIGIBILITY AND PAYMENT PARAMETERS ESTABLISHED UNDER 2 SUBSECTION (C) OF THIS SECTION.
- 3 (E) ON OR BEFORE JANUARY 1, 2021, THE EXCHANGE SHALL ADOPT
  4 REGULATIONS IMPLEMENTING THE PROVISIONS OF THIS SECTION.
- 5 (F) (1) IF THE EXCHANGE ESTABLISHES THE STATE-BASED HEALTH
- 6 INSURANCE SUBSIDIES PROGRAM UNDER THIS SECTION, THE EXCHANGE SHALL
- 7 TRACK ON A MONTHLY BASIS EXPENDITURES ON SUBSIDIES PROVIDED UNDER THE
- 8 PROGRAM, INCLUDING:
- 9 <u>(I)</u> <u>THE AVERAGE NUMBER OF INDIVIDUALS RECEIVING</u> 10 SUBSIDIES UNDER THE PROGRAM; AND
- 11 (II) THE AVERAGE SUBSIDY AMOUNT RECEIVED BY 12 INDIVIDUALS UNDER THE PROGRAM.
- 13 (2) THE INFORMATION TRACKED BY THE EXCHANGE UNDER 14 PARAGRAPH (1) OF THIS SUBSECTION SHALL:
- 15 (I) BE POSTED ON THE WEBSITE OF THE EXCHANGE; AND
- 16 (II) BE INCLUDED IN THE ANNUAL REPORT REQUIRED UNDER § 17 31–119(D) OF THIS SUBTITLE.
- 18 **31–123**.
- On or before September 1, 2020, the Exchange, in consultation with the Commissioner and as approved by the Board, shall:
- 21 (1) DETERMINE WHETHER THE ESTABLISHMENT OF THE
- 22 STATE-BASED HEALTH INSURANCE SUBSIDIES PROGRAM REQUIRES THE STATE
- 23 TO APPLY TO AND RECEIVE APPROVAL FROM THE U.S. SECRETARY OF HEALTH AND
- 24 Human Services for a State Innovation Waiver under § 1332 of the
- 25 AFFORDABLE CARE ACT; AND
- 26 (2) IF THE EXCHANGE DETERMINES THAT A STATE INNOVATION
- 27 WAIVER IS REQUIRED TO ESTABLISH THE STATE BASED HEALTH INSURANCE
- 28 Subsidies Program, apply for the State Innovation Waiver.
- 29 THE EXCHANGE MAY, IN CONSULTATION WITH THE COMMISSIONER AND AS
- 30 APPROVED BY THE BOARD, APPLY FOR A STATE INNOVATION WAIVER UNDER § 1332
- 31 OF THE AFFORDABLE CARE ACT TO IMPLEMENT THE STATE-BASED HEALTH
- 32 <u>Insurance Subsidies Program.</u>

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SECTION 2. AND BE IT FURTHER ENACTED, That this Act shall take effect July 1, 2020.
Approved:
Governor.
President of the Senate.
Speaker of the House of Delegates.