

BY: Finance Committee

AMENDMENTS TO SENATE BILL NO. 136

(First Reading File Bill)

AMENDMENT NO. 1

On page 1, strike line 2 in its entirety and substitute "Mandated Health Insurance Benefits Evaluation"; strike in their entirety lines 3 through 11, inclusive, and substitute:

"FOR the purpose of requiring the Health Care Access and Cost Commission to conduct a certain review of mandated health insurance benefits; requiring the Commission to submit a certain report to certain persons; requiring the Commission to review and evaluate certain proposals under certain circumstances; requiring the Commission to conduct an initial evaluation of the cost of mandated health insurance benefits and make a certain report to the General Assembly; providing for the construction of this Act; defining certain terms; repealing certain provisions of law related to the establishment and duties of the Interdepartmental Committee on Mandated Health Insurance Benefits; and generally relating to the review of mandated health insurance benefits by the Health Care Access and Cost Commission."

in line 20, strike "Advisory Panel on"; and in line 21, after "Benefits" insert "Evaluation".

AMENDMENT NO. 2

On page 2, in line 2, after "15." strike "ADVISORY PANEL ON"; in the same line, after "BENEFITS" insert "EVALUATION"; and strike lines 6 and 7 in their entirety and substitute:

"(2) "COMMISSION" MEANS THE HEALTH CARE ACCESS AND COST COMMISSION."

On pages 2 and 3, strike in their entirety the lines beginning with line 26 on page 2 through line 31 on page 3.

On page 3, in line 32, strike "(F)" and substitute "(C)"; in the same line, strike "ADVISORY

(Over)

PANEL” and substitute “COMMISSION”; and in lines 34 and 35, strike “COST EFFECTIVENESS” and substitute “CLINICAL AND ECONOMIC IMPACT ON CONSUMERS, HEALTH CARE PROVIDERS, AND THIRD PARTY PAYORS”.

On page 4, strike in their entirety lines 3 through 19, inclusive, and substitute:

“(D) AS PART OF THE REVIEW REQUIRED UNDER SUBSECTION (C) OF THIS SECTION, THE COMMISSION SHALL EVALUATE THE EFFECTIVENESS OF ALL CURRENT AND PROPOSED MANDATED HEALTH INSURANCE BENEFITS IN:

(1) MAINTAINING AND IMPROVING HEALTH STATUS;

(2) REDUCING UNNECESSARY CONSUMPTION OF HEALTH CARE SERVICES; AND

(3) MAKING HEALTH CARE COVERAGE MORE AFFORDABLE.”;

in lines 20 and 23, strike “(2)” and “(I)”, respectively, and substitute “(E)” and “(F)”, respectively; in lines 21 and 24, in each instance, strike “ADVISORY PANEL” and substitute “COMMISSION”; and in line 23, strike “DECEMBER 1, 1999” and substitute “DECEMBER 31, 1998”.

AMENDMENT NO. 3

On page 4, in lines 30 and 31, strike “Advisory Panel on Mandated Health Insurance Benefits” and substitute “Health Care Access and Cost Commission”; in line 33, strike “Advisory Panel” and substitute “Commission”; after line 34, insert:

“SECTION 4. AND BE IT FURTHER ENACTED, That, if a member of the General Assembly submits a proposal for a mandated health insurance benefit on or before July 1 of any year, the Commission, in accordance with the requirements of §15-1501 of the Insurance Article, as enacted by this Act, shall review and evaluate the proposal and shall submit its findings and recommendations regarding the proposal in its December report of that year.

SECTION 5. AND BE IT FURTHER ENACTED, That the Commission shall:

(a) conduct an initial evaluation of the cost of existing mandated health insurance benefits and submit the results of its initial evaluation in the report due to the General Assembly under this Act by December 31, 1998;

(b) recommend in its report an appropriate percentage of the average annual wage in the State that the total cost of mandated health insurance benefits may not exceed;

(c) take into consideration in its recommendation the percentage of the average annual wage in the State that relates to the premium associated with:

(1) the current mandated health insurance benefits enacted in this State for a typical group and individual health benefits plan;

(2) the benefits provided under the State Employee Health Benefits Plan for medical coverage; and

(3) the Comprehensive Standard Health Benefit Plan as defined in §15-1201(n) of the Insurance Article.”;

in line 35, strike “4.” and substitute “6.”; and in line 36, strike “July” and substitute “June”.