HOUSE BILL 39

 $^{\circ}$ 9lr0825 (PRE-FILED)

By: Delegate Riley Delegates Riley, Montgomery, Bronrott, Frick, Lee, Hammen, Bromwell, Costa, Donoghue, Elliott, Kach, Kipke, Krebs, Kullen, McDonough, Morhaim, Oaks, Pena-Melnyk, Reznik, Tarrant, V. Turner, and Weldon

Requested: October 22, 2008

Introduced and read first time: January 14, 2009 Assigned to: Health and Government Operations

Committee Report: Favorable with amendments

House action: Adopted

Read second time: March 4, 2009

CHAPTER _____

1 AN ACT concerning

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Health Insurance - Out-of-State Association Contracts - Regulation

3 FOR the purpose of requiring certain carriers that offer certain out-of-state 4 association contracts to Maryland residents also to offer certain individual 5 health insurance contracts to Maryland residents; requiring the carriers to 6 make certain disclosures to a Maryland resident applying for coverage under an 7 out-of-state association contract; requiring the carriers to disclose certain 8 information on the enrollment application for coverage under an out-of-state 9 association contract under certain circumstances; authorizing the Maryland 10 Insurance Commissioner to require the carriers to make a certain report in a 11 certain manner on or before a certain date of each year; defining certain terms; 12 providing for the application of this Act; and generally relating to out-of-state association contracts. 13

14 BY adding to

15 Article – Insurance

Section 15–1105 to be under the amended subtitle "Subtitle 11. Miscellaneous

Health Insurance Policies and Contracts and Health Benefit Plans"

18 Annotated Code of Maryland

19 (2006 Replacement Volume and 2008 Supplement)

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.



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$\frac{1}{2}$	MARYLAND, That the Laws of Maryland read as follows:
3	Article - Insurance
4 5	Subtitle 11. Miscellaneous Health Insurance Policies AND CONTRACTS AND HEALTH BENEFIT PLANS.
6	15–1105.
7 8	(A) (1) IN THIS SECTION THE FOLLOWING WORDS HAVE THE MEANINGS INDICATED.
9	(2) "CARRIER" MEANS:
10	(I) AN INSURER; OR
11	(II) A NONPROFIT HEALTH SERVICE PLAN.
12 13	(3) "ELIGIBLE INDIVIDUAL" MEANS A MARYLAND RESIDENT WHO HAS MEMBERSHIP IN AN ASSOCIATION.
14 15 16	(4) "EVIDENCE OF INDIVIDUAL INSURABILITY" MEANS MEDICAL OR OTHER INFORMATION THAT INDICATES HEALTH STATUS, USED TO DETERMINE WHETHER COVERAGE OF AN INDIVIDUAL IS TO BE:
17	(I) ISSUED OR DENIED; OR
18	(II) ISSUED WITH OR WITHOUT AN EXCLUSIONARY RIDER.
19 20	(5) "Health benefit plan" has the meaning stated in $\$$ 15–1301 of this title.
21 22	(6) "HEALTH STATUS-RELATED FACTOR" HAS THE MEANING STATED IN \S 15–1201 of this title.
23 24 25	(7) "INDIVIDUAL HEALTH INSURANCE CONTRACT" MEANS A HEALTH BENEFIT PLAN THAT IS ISSUED OR DELIVERED IN THE STATE TO AN INDIVIDUAL.
26	(8) "MEMBER" MEANS AN ELIGIBLE INDIVIDUAL WHO

PURCHASES COVERAGE UNDER AN OUT-OF-STATE ASSOCIATION CONTRACT.

- 1 (9) "OUT-OF-STATE ASSOCIATION CONTRACT" MEANS A HEALTH 2 BENEFIT PLAN THAT IS ISSUED OR DELIVERED TO AN ASSOCIATION OUTSIDE 3 THE STATE.
- 4 (B) This section applies to a carrier that requires evidence 5 of individual insurability for coverage under an out-of-state 6 association contract.
- 7 (C) A CARRIER THAT OFFERS AN OUT-OF-STATE ASSOCIATION
 8 CONTRACT TO MARYLAND RESIDENTS ALSO SHALL OFFER AN INDIVIDUAL
 9 HEALTH INSURANCE CONTRACT TO MARYLAND RESIDENTS.
- 10 (D) (C) A CARRIER SHALL DISCLOSE TO A MARYLAND RESIDENT APPLYING FOR COVERAGE UNDER AN OUT-OF-STATE ASSOCIATION CONTRACT:
- 12 (1) THAT COVERAGE IS CONDITIONED ON MEMBERSHIP IN THE 13 ASSOCIATION THAT HOLDS THE OUT-OF-STATE ASSOCIATION CONTRACT;
- 14 (2) ALL COSTS RELATED TO JOINING AND MAINTAINING 15 MEMBERSHIP IN THE ASSOCIATION;
- 16 (3) THAT MEMBERSHIP FEES OR DUES ARE IN ADDITION TO THE PREMIUM FOR COVERAGE UNDER THE OUT-OF-STATE ASSOCIATION CONTRACT;
- 18 (4) THAT THE TERMS AND CONDITIONS OF COVERAGE UNDER THE 19 OUT-OF-STATE ASSOCIATION CONTRACT ARE DETERMINED BY THE 20 ASSOCIATION AND THE CARRIER;
- 21 (5) THE MANDATED BENEFITS REQUIRED UNDER SUBTITLE 8 OF 22 THIS TITLE THAT ARE NOT INCLUDED IN THE OUT-OF-STATE ASSOCIATION 23 CONTRACT:
- 24 (6) THAT THE MARYLAND RESIDENT MAY PURCHASE DIRECTLY
 25 FROM THE CARRIER AN INDIVIDUAL HEALTH INSURANCE CONTRACT THAT
 26 INCLUDES THE MANDATED BENEFITS REQUIRED UNDER SUBTITLE 8 OF THIS
 27 TITLE THAT ARE NOT INCLUDED IN THE OUT-OF-STATE ASSOCIATION
 28 CONTRACT:
- 29 (6) THAT THE MARYLAND RESIDENT MAY PURCHASE AN
 30 INDIVIDUAL HEALTH BENEFIT PLAN THAT INCLUDES THE MANDATED BENEFITS
 31 UNDER SUBTITLE 8 OF THIS TITLE THAT ARE NOT INCLUDED IN THE
 32 OUT-OF-STATE ASSOCIATION CONTRACT FROM A CARRIER LICENSED AND
 33 AUTHORIZED TO DO BUSINESS IN THE STATE;

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$\frac{1}{2}$	(7) THAT BENEFITS OFFERED UNDER THE OUT-OF-STATE ASSOCIATION CONTRACT ARE NOT REGULATED BY THE COMMISSIONER; AND
3	(8) THAT THE TERMS AND CONDITIONS OF COVERAGE UNDER THE
4	OUT-OF-STATE ASSOCIATION CONTRACT MAY BE CHANGED BY AGREEMENT OF
5	THE ASSOCIATION AND THE CARRIER WITHOUT THE CONSENT OF A MEMBER.
6	(E) A CARRIER MAY SATISFY THE DISCLOSURE REQUIREMENT UNDER
7	SUBSECTION (D)(6) OF THIS SECTION BY PROVIDING TO A MARYLAND
8	RESIDENT, AT THE TIME APPLICATION IS MADE TO THE CARRIER FOR
9	COVERAGE UNDER AN OUT-OF-STATE ASSOCIATION CONTRACT, INFORMATION
10	ABOUT:
11	(1) HOW TO APPLY FOR COVERAGE UNDER AN INDIVIDUAL
12	HEALTH INSURANCE CONTRACT OFFERED BY THE CARRIER THAT IS NOT
13	CONDITIONED ON ASSOCIATION MEMBERSHIP; AND
14	(2) THE PREMIUM FOR THE COVERAGE.
15	(D) (1) THE COMMISSIONER MAY REQUIRE A CARRIER THAT OFFERS
16	COVERAGE UNDER AN OUT-OF-STATE ASSOCIATION CONTRACT TO REPORT, ON
17	OR BEFORE MARCH 1 OF EACH YEAR, THE NUMBER OF MARYLAND RESIDENTS
18	COVERED IN THE PRECEDING CALENDAR YEAR UNDER THE OUT-OF-STATE
19	ASSOCIATION CONTRACT.
20	(2) THE DATA REQUIRED UNDER PARAGRAPH (1) OF THIS
21	SUBSECTION SHALL BE REPORTED IN A MANNER DETERMINED BY THE
22	COMMISSIONER.
	COMMISSIONET
23	(F) (E) IF A CARRIER COLLECTS MEMBERSHIP FEES OR DUES ON
24	BEHALF OF AN ASSOCIATION, THE CARRIER SHALL DISCLOSE ON THE
25	ENROLLMENT APPLICATION FOR AN OUT-OF-STATE ASSOCIATION CONTRACT
26	THAT THE CARRIER BILLS AND COLLECTS MEMBERSHIP FEES AND DUES ON
27	BEHALF OF THE ASSOCIATION.
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28 29	SECTION 2. AND BE IT FURTHER ENACTED, That this Act shall apply to all policies, contracts, and health benefit plans issued, delivered, or renewed on or after
30	October 1, 2009.

31 SECTION 3. AND BE IT FURTHER ENACTED, That this Act shall take effect 32 October 1, 2009.