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STATE OF RHODE ISLAND

IN GENERAL ASSEMBLY

JANUARY SESSION, A.D. 2024

AN ACT

RELATING TO INSURANCE -- ACCIDENT AND SICKNESS INSURANCE POLICIES

Introduced By: Senators Bissaillon, DiMario, Lauria, LaMountain, Pearson, Miller, and

Euer

Date Introduced: March 05, 2024

Referred To: Senate Health & Human Services

It is enacted by the General Assembly as follows:

SECTION 1. Section 27-18-54 of the General Laws in Chapter 27-18 entitled "Accident

and Sickness Insurance Policies" is hereby amended to read as follows:

27-18-54. Health insurance rates.

No insurance company organized as a stock or mutual corporation which merges or consolidates with, acquires ownership or control or possession of twenty percent (20%) or greater of the operating assets of, or otherwise acquires control of a non-profit hospital service corporation organized under chapter 19 of this title, a non-profit medical service corporation organized under chapter 20 of this title or a health maintenance organization organized under chapter 41 of this title may: (1) file with any state agency for review or approval any proposed rate to be used by the company in the state, or (2) charge to any party in the state any rate or premium, which takes into account or reflects in any manner the value of any contribution, distribution or allocation the company expends or incurs in establishing or funding a charitable foundation organized to maintain or account for the assets of a non-profit hospital service corporation, non-profit medical service corporation or health maintenance organization, or (3) pay a rate that is less than the approved Medicaid rate set by the executive office of health and human services. For any rate that is to be charged to policy holders, regardless of whether the rate is subject to approval by a state agency under this or another chapter, the company shall at least thirty (30) days before implementing the rate submit under oath to the commissioner of insurance an accounting that documents the cost structure on which the rate is based and demonstrates the company's compliance with this section.

SECTION 2. Section 27-19-30.1 of the General Laws in Chapter 27-19 entitled "Nonprofit Hospital Service Corporations" is hereby amended to read as follows:

27-19-30.1. Health insurance rates.

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No insurance company organized as a stock or mutual corporation that merges or consolidates with, acquires ownership or control or possession of twenty percent (20%) or greater of the operating assets of, or otherwise acquires control of a nonprofit hospital service corporation organized under this chapter, a nonprofit medical service corporation organized under chapter 20 of this title, or a health maintenance organization organized under chapter 41 of this title, may: (1) File with any state agency for review or approval any proposed rate to be used by the company in the state, or (2) Charge to any party in the state any rate or premium that takes into account or reflects in any manner the value of any contribution, distribution, or allocation the company expends or incurs in establishing or funding a charitable foundation organized to maintain or otherwise account for the assets of a nonprofit hospital service corporation, nonprofit medical service corporation, or health maintenance organization, or (3) pay a rate that is less than the approved Medicaid rate set by the executive office of health and human services. For any rate that is to be charged to policyholders, regardless of whether the rate is subject to approval by a state agency under this or another chapter, the company shall at least thirty (30) days before implementing the rate submit under oath to the commissioner of insurance an accounting that documents the cost structure on which the rate is based and demonstrates the company's compliance with this section.

SECTION 3. Section 27-20-25.2 of the General Laws in Chapter 27-20 entitled "Nonprofit Medical Service Corporations" is hereby amended to read as follows:

27-20-25.2. Health insurance rates.

No insurance company organized as a stock or mutual corporation that merges or consolidates with; acquires ownership or control or possession of twenty percent (20%) or greater of the operating assets of; or acquires control of a nonprofit hospital service corporation organized under chapter 19 of this title, a nonprofit medical service corporation organized under this chapter, or a health maintenance organization organized under chapter 41 of this title may: (1) File with any state agency for review or approval any proposed rate to be used by the company in the state, or (2) Charge to any party in the state any rate or premium, that takes into account or reflects in any manner the value of any contribution, distribution, or allocation the company expends or incurs in establishing or funding a charitable foundation organized to maintain or account for the assets of a nonprofit hospital service corporation, nonprofit medical service corporation, or health maintenance organization, or (3) pay a rate that is less than the approved Medicaid rate set by the

- 1 <u>executive office of health and human services</u>. For any rate that is to be charged to policyholders,
- 2 regardless of whether this rate is subject to approval by a state agency under this or another chapter,
- 3 the company shall at least thirty (30) days before implementing the rate submit under oath to the
- 4 commissioner of insurance an accounting that documents the cost structure on which the rate is
- 5 based and demonstrates the company's compliance with this section.
- 6 SECTION 4. Section 27-41-27.2 of the General Laws in Chapter 27-41 entitled "Health
- 7 Maintenance Organizations" is hereby amended to read as follows:

27-41-27.2. Health insurance rates.

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No insurance company organized as a stock or mutual corporation that merges or consolidates with, acquires ownership or control or possession of twenty percent (20%) or greater of the operating assets of, or acquires control of a nonprofit hospital service corporation organized under chapter 19 of this title, a nonprofit medical service corporation organized under chapter 20 of this title, or a health maintenance organization organized under chapter 41 of this title: (1) May file with any state agency for review or approval any proposed rate to be used by the company in the state, or (2) May charge to any party in the state any rate or premium, that takes into account or reflects in any manner the value of any contribution, distribution, or allocation the company expends or incurs in establishing or funding a charitable foundation organized to maintain or account for the assets of a nonprofit hospital service corporation, nonprofit medical service corporation, or health maintenance organization, or (3) pay a rate that is less than the approved Medicaid rate set by the executive office of health and human services. For any rate that is to be charged to policyholders, regardless of whether this rate is subject to approval by a state agency under this or another chapter, the company shall at least thirty (30) days before implementing the rate submit under oath to the commissioner of insurance an accounting that documents the cost structure on which the rate is based and demonstrates the company's compliance with this section.

SECTION 5. This act shall take effect on January 1, 2025.

====== LC004759

EXPLANATION

BY THE LEGISLATIVE COUNCIL

OF

AN ACT

RELATING TO INSURANCE -- ACCIDENT AND SICKNESS INSURANCE POLICIES

1 This act would prohibit insurance companies from paying a rate that is less than the 2 approved Medicaid rate set by the executive office of health and human services. 3 This act would take effect on January 1, 2025.

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