LC000962

## STATE OF RHODE ISLAND

### IN GENERAL ASSEMBLY

#### **JANUARY SESSION, A.D. 2015**

### AN ACT

## RELATING TO STATE AFFAIRS AND GOVERNMENT - CATASTROPHIC HEALTH INSURANCE PLAN ACT

Introduced By: Senators Nesselbush, Lombardi, Pichardo, Ottiano, and Sheehan

Date Introduced: March 03, 2015

Referred To: Senate Health & Human Services

(Attorney General)

3

4

5

6

7

8

9

10

11

12

13

14

15

16

17

18

It is enacted by the General Assembly as follows:

SECTION 1. Section 42-62-13 of the General Laws in Chapter 42-62 entitled

Catastrophic Health Insurance Plan Act" is hereby amended to read as follows:

42-62-13. Rates charged. -- (a) The rates proposed to be charged or a rating formula proposed to be used by any insurer or health maintenance organization under this section subject to title 27 of the general laws to employers, the state or any political subdivision of the state, or individuals, shall be filed by the insurer or health maintenance organization at the office of the director of business regulation health insurance commissioner. The applicant shall provide a copy of the filing on all rates and/or rating formulas proposed for health insurance coverage offered in the individual market as defined in § 27-18.5-2 to the insurance advocacy unit of the attorney general's office simultaneously with the filing at the office of the health insurance commissioner. This section does not apply to any entity subject to § 27-19-1 et seq., and/or § 27-20-1 et seq. The rates proposed to be charged by those entities shall be governed by the provisions of § 27-19-1 et seq., and/or § 27-20-1 et seq. Within sixty (60) days after receipt of the application, the director commissioner, or the director's commissioner's designee, shall hold a public hearing pursuant to § 42-35-1 et seq. for all rate filings for individuals as defined in § 27-18.5-2 and may hold a hearing pursuant to § 42-35-1 et seq. upon not less than ten (10) days' written notice prior to the hearings for other rate filings. The notice shall be published by the commissioner in a newspaper or newspapers having aggregate general circulation throughout the state at least ten (10) days prior to the hearing and shall contain a description of the rates proposed to be charged, and a copy of the notice shall be sent to the applicant and to the consumer protection insurance advocacy unit of the department of attorney general. In addition, the applicant shall provide by mail, at least ten (10) days prior to the hearing, notice of the proposed rate increase for health insurance coverage offered in the individual market as defined in § 27-18.5-2 to all subscribers subject to the proposed rate increase. At any hearing held under this section, the applicant shall be required to establish that the rates proposed to be charged or the rating formula proposed to be used are consistent with the proper conduct of its business and with the interest of the public. Any documents presented in support of a filing of proposed rates under this section shall be made available for public examination at any time and place that the director commissioner may deem reasonable. The director commissioner, or the director's commissioner's designee, upon that hearing may administer oaths, examine and cross-examine witnesses, receive oral and documentary evidence, and shall have the power to subpoena witnesses, compel their attendance and require the production of all books, papers, records, correspondence, or other documents which he or she deems relevant. Any designee who shall conduct a hearing pursuant to this section shall report his or her findings in writing to the director commissioner within eighty (80) days of the filing with a recommendation for approval, disapproval, or modification of the rates proposed to be charged by the applicant. The recommended decision shall become part of the record. The director commissioner shall make and issue a decision not later than ten (10) days following the issuance of the recommended decision or, if the director commissioner hears the application without the appointment of a designee, as soon as is reasonably possible following the completion of the hearing on the proposed rate change. The decision may approve, disapprove, or modify the rates proposed to be charged by the applicant. Insurers requesting changes in rates shall underwrite the reasonable expenses of the department of business regulation office of the health insurance commissioner in connection with the hearing, including any costs related to advertisements, stenographic reporting, and expert witnesses fees. Notwithstanding any other provisions of law, the filing of proposed rates or a rating formula and the holding and conduct of any hearings in connection with these proposed rates or rating formula shall be pursuant to this section.

1

2

3

4

5

6

7

8

9

10

11

12

13

14

15

16

17

18

19

20

21

22

23

24

25

26

27

28

29

30

31

32

33

34

(b) Whenever the term "designee" is used in this section, it shall mean a person who is impartial, a member in good standing of the Rhode Island bar and a person who is sufficiently acquainted with the rules of evidence as used in the superior court of the state so as to enable that person to conduct a hearing as designee of the director commissioner. The reasonable per diem cost of the designee as appointed by the director commissioner shall be paid by the insurers

- 1 requesting changes in the rates.
- 2 SECTION 2. This act shall take effect upon passage.

LC000962

\_\_\_\_\_

## **EXPLANATION**

### BY THE LEGISLATIVE COUNCIL

OF

## AN ACT

# RELATING TO STATE AFFAIRS AND GOVERNMENT - CATASTROPHIC HEALTH INSURANCE PLAN ACT

\*\*\*

This act would require a public hearing for all insurers or health maintenance organizations who propose rates for health insurance coverage in the individual market.

This act would take effect upon passage.

LC000962