2018 -- S 2785 SUBSTITUTE A

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STATE OF RHODE ISLAND

IN GENERAL ASSEMBLY

JANUARY SESSION, A.D. 2018

AN ACT

RELATING TO INSURANCE -- INDIVIDUAL HEALTH INSURANCE COVERAGE

Introduced By: Senators Miller, Coyne, DiPalma, Goldin, and Ruggerio

Date Introduced: April 05, 2018

Referred To: Senate Health & Human Services

It is enacted by the General Assembly as follows:

1 SECTION 1. Chapter 27-50 of the General Laws entitled "Small Employer Health

2 Insurance Availability Act" is hereby amended by adding thereto the following section:

27-50-19. Small business health options program (SHOP) innovation waiver.

4 (a) As small business owners and sole proprietors are the life blood of this state's

5 economy, a recent change in the Federal Affordable Care Act effective on January 1, 2016, has

caused irreparable harm to the economic well-being of some small business owners and sole

proprietors by requiring them to secure health insurance coverage on the individual market as

8 opposed to securing health insurance coverage on the small group market.

9 (b) The director of the department of administration, with assistance from the

10 commissioner of health insurance (OHIC), is authorized to seek a waiver under Section 1332 of

11 the Patient Protection and Affordable Care Act, Pub. L. No. 111-148, as amended by the Health

12 Care and Education Reconciliation Act of 2010, Pub. L. No. 111-152, for the purpose of allowing

13 businesses classified as self-employed and sole proprietors to purchase insurance in the small

group market through the Health Source RI for Employers small business health options program

15 (SHOP) and not be forced into the individual market. Submission of such a waiver application

shall be contingent upon an assessment by OHIC of the costs and impacts.

SECTION 2. Chapter 27-18.5 of the General Laws entitled "Individual Health Insurance

18 Coverage" is hereby amended by adding thereto the following section:

27-18.5-11. Essential health benefits.-- Individual.

1	(a) For the purposes of this title and/or chapter:
2	(1) "Essential Health Benefits" means the following general categories and the items and
3	services covered within the following ten (10) categories described in 42 USC § 18022 in force as
4	of January 1, 2017 and implementing regulations and guidance. The commissioner, in his/her
5	discretion, shall periodically define a benchmark plan that is prevalent in the employer-sponsored
6	health insurance market in Rhode Island and that includes at a minimum the following categories
7	of benefits:
8	(i) Ambulatory patient services;
9	(ii) Emergency services;
10	(iii) Hospitalization;
11	(iv) Maternity and newborn care;
12	(v) Mental health and substance use disorder services, including behavioral health
13	treatment;
14	(vi) Prescription drugs;
15	(vii) Rehabilitative and habilitative services and devices;
16	(viii) Laboratory services;
17	(ix) Preventive services, wellness services and chronic disease management; and
18	(x) Pediatric services, including oral and vision care;
19	(2) "Preventive services" means those services described in 42 USC § 300gg-13 in force
20	as of January 1, 2017 and implementing regulations and guidance. Preventive services shall be
21	covered without any cost sharing for the enrollee when delivered by in-network providers, as
22	those terms and obligations are therein described. The commissioner shall have the authority to
23	promulgate implementing regulations consistent with this chapter to ensure compliance with 26
24	<u>USC § 223.</u>
25	(b) A health insurance policy, subscriber contract, or health plan offered, issued, issued
26	for delivery, or issued to cover a resident of this state by a health insurance company licensed
27	pursuant to this title and/or chapter shall provide coverage of at least the ten (10) essential health
28	benefits categories set forth in this section and shall further provide preventive services from in-
29	network providers without applying any copayments, deductibles, coinsurance, or other cost
30	sharing, as set forth in this section. The commissioner shall have the authority to promulgate rules
31	and regulations for the implementation of this chapter, including the authority to not approve any
32	plan that they determine does not appropriately comply with or substantially provide for the
33	essential health benefits and preventive services without cost sharing requirements set forth in
34	this section.

1	SECTION 3. Chapter 27-50 of the General Laws entitled "Small Employer Health
2	Insurance Availability Act" is hereby amended by adding thereto the following section:
3	27-50-18. Essential health benefits Small employer.
4	A health insurance policy, subscriber contract, or health plan offered, issued, issued for
5	delivery, or issued to cover a resident of this state by a health insurance company licensed
6	pursuant to this title and/or chapter shall provide coverage of at least the ten (10) essential health
7	benefits categories set forth at § 27-18.5-11 and shall further provide preventive services from in-
8	network providers without applying any copayments, deductibles, coinsurance, or other cost
9	sharing, set forth at § 27-18.5-11. The commissioner shall have the authority to promulgate rules
10	and regulations for the implementation of this chapter, including the authority to not approve any
11	plan that he/she determines does not appropriately comply with or substantially provide for the
12	essential health benefits and preventive services without cost sharing requirements set forth at §
13	<u>27-18.5-11.</u>
14	SECTION 4. Chapter 27-18.6 of the General Laws entitled "Large Group Health
15	Insurance Coverage" is hereby amended by adding thereto the following section:
15 16	Insurance Coverage" is hereby amended by adding thereto the following section: 27-18.6-13. Essential health benefits.
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16 17 18 19	27-18.6-13. Essential health benefits. A health insurance policy, subscriber contract, or health plan offered, issued, issued for delivery, or issued to cover a resident of this state by a health insurance company licensed pursuant to this title and/or chapter shall provide coverage of at least the ten (10) essential health
16 17 18 19 20	27-18.6-13. Essential health benefits. A health insurance policy, subscriber contract, or health plan offered, issued, issued for delivery, or issued to cover a resident of this state by a health insurance company licensed pursuant to this title and/or chapter shall provide coverage of at least the ten (10) essential health benefits categories set forth at 27-18.5-11 and shall further provide preventive services from in-
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116 117 118 119 220 221	27-18.6-13. Essential health benefits. A health insurance policy, subscriber contract, or health plan offered, issued, issued for delivery, or issued to cover a resident of this state by a health insurance company licensed pursuant to this title and/or chapter shall provide coverage of at least the ten (10) essential health benefits categories set forth at 27-18.5-11 and shall further provide preventive services from innetwork providers without applying any copayments, deductibles, coinsurance, or other cost sharing, set forth at § 27-18.5-11. The commissioner shall have the authority to promulgate rules
116 117 118 119 220 221 222 233	27-18.6-13. Essential health benefits. A health insurance policy, subscriber contract, or health plan offered, issued, issued for delivery, or issued to cover a resident of this state by a health insurance company licensed pursuant to this title and/or chapter shall provide coverage of at least the ten (10) essential health benefits categories set forth at 27-18.5-11 and shall further provide preventive services from innetwork providers without applying any copayments, deductibles, coinsurance, or other cost sharing, set forth at § 27-18.5-11. The commissioner shall have the authority to promulgate rules and regulations for the implementation of this chapter, including the authority to not approve any
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116 117 118 119 220 221 222 223 224 225	A health insurance policy, subscriber contract, or health plan offered, issued, issued for delivery, or issued to cover a resident of this state by a health insurance company licensed pursuant to this title and/or chapter shall provide coverage of at least the ten (10) essential health benefits categories set forth at 27-18.5-11 and shall further provide preventive services from innetwork providers without applying any copayments, deductibles, coinsurance, or other cost sharing, set forth at § 27-18.5-11. The commissioner shall have the authority to promulgate rules and regulations for the implementation of this chapter, including the authority to not approve any plan that he/she determines does not appropriately comply with or substantially provide for the essential health benefits and preventive services without cost sharing requirements set forth at §

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EXPLANATION

BY THE LEGISLATIVE COUNCIL

OF

AN ACT

RELATING TO INSURANCE -- INDIVIDUAL HEALTH INSURANCE COVERAGE

1	This act would authorize the state to seek a waiver under the Affordable Care Act (ACA)
2	to allow qualified small business owners and sole proprietors to purchase insurance in the small
3	group market contingent on a cost and impact assessment by the office of the health insurance
4	commissioner (OHIC). This act would further provide that health insurance plans provide
5	coverage for essential health benefit categories and preventive services without cost sharing
6	which are consistent with the Rhode Island benchmark plan.
7	This act would take effect upon passage.

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