MAINE STATE LEGISLATURE

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_	L.D. 2146
2	DATE: april 1, 2002 (Filing No. S-530)
4	
6	BANKING AND INSURANCE
8	Reported by:
10	Reproduced and distributed under the direction of the Secretary of the Senate.
12	
14	STATE OF MAINE SENATE 120TH LEGISLATURE
16	SECOND REGULAR SESSION
18	
20	COMMITTEE AMENDMENT " " to S.P. 793, L.D. 2146, Bill, "An Act to Establish the Maine Consumer Choice Health Plan"
22	Amend the bill by striking out everything after the enacting
24	clause and before the summary and inserting in its place the following:
26	'Sec. 1. 2 MRSA §6, sub-§2, as amended by PL 1999, c. 731, Pt.
28	F, $\S1$; PL 2001, c. 44, $\S11$ and affected by $\S14$; and amended by c. 354, $\S3$, is further amended to read:
30	2. Range 90. The salaries of the following state officials and employees are within salary range 90:
32	
34	Superintendent of Financial Institutions; State Tax Assessor;
36	blace Ida Assessor,
38	Superintendent of Insurance;
	Executive Director of the Maine Consumer Choice Health Plan;
40	Associate Commissioner for Programs, Department of
42	Behavioral and Developmental Services;
44	Associate Commissioner of Administration, Department of Behavioral and Developmental Services;
46	behavioral and beveropmental betvices,

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2	Behavioral and Developmental Services;
4	Deputy Commissioner, Department of Administrative and Financial Services;
6	
8	Associate Commissioner for Adult Services, Department of Corrections;
LO	Associate Commissioner for Juvenile Services, Department of Corrections;
12	
L 4	Public Advocate;
L 4	Chief Information Officer; and
18	Associate Commissioner for Legislative and Program Services, Department of Corrections.
20	Sec. 2. 5 MRSA §12004-G, sub-§21-B is enacted to read:
22	21-B. Board of Expenses 24-A MRSA Insurance Directors Only \$4346
24	of the Maine Consumer
26	Choice Health Plan
28	Sec. 3. 24-A MRSA c. 56-B is enacted to read:
30 32	CHAPTER 56-B
	MAINE CONSUMER CHOICE HEALTH PLAN
34	§4346. Maine Consumer Choice Health Plan
36	
2.0	1. Definitions. As used in this chapter, unless the
38	context otherwise indicates, the following terms have the following meanings.
40	TOTIONINGCONTWAD!
	A. "Board" means the Board of Directors of the Maine
42	Consumer Choice Health Plan established in Title 5, section
	12004-G, subsection 21-B.
44	B. "Carrier" means:
46	(1) An insurance company licensed in accordance with
48	this Title to provide health insurance;
50	(2) A health maintenance organization licensed pursuant to chapter 56;

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COMMITTEE AMENDMENT " to S.P. 793, L.D. 2146

2	4101; or
4	
6	(4) A nonprofit hospital and medical service organization or nonprofit health care service
8	organization licensed pursuant to Title 24.
10	C. "Director" means the Executive Director of the Maine Consumer Choice Health Plan.
12	D. "Eligible employee" or "employee" means an individual who:
14	(1) Meets the definition of "eligible employee" set
16	forth in section 2808-B, subsection 1, paragraph C;
18	(2) Is a self-employed individual who:
20	(a) Works and resides in the State; and
22	(b) Is organized as a sole proprietorship or in any other legally recognized manner that a
24	self-employed individual may organize, a substantial part of whose income derives from a
26	trade or business through which the individual has attempted to earn taxable income, and who has
28	filed the appropriate United States Internal
30	Revenue Service form for the previous taxable year, and for whom a copy of the appropriate
	United States Internal Revenue Service form or
32	forms and schedule has been filed with the plan or its administrator; or
34	(3) Is a sole employee of a nonprofit organization that
36	has been determined by the Internal Revenue Service to be exempt from taxation under the United States
38	Internal Revenue Code, Section 501(c)(3),(4) or (6) and who has a normal work week of at least 20 hours and is
40	not covered under a public or private plan for health
42	insurance or other health benefit arrangement.
	E. "Fund" means the Maine Consumer Choice Health Plan Fund.
44	F. "Plan" means the Maine Consumer Choice Health Plan
46	established in this section.
48	G. "Small employer" means an eligible group as defined in section 2808-B, subsection 1, paragraph D.

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	2. Plan established. The Maine Consumer Choice Health Plan
2	is established as an independent executive agency to negotiate
	and contract with carriers to provide a board-authorized choice
4	of health benefits coverage to eligible enrollees.
6	On or before January 1, 2006, the board shall initiate a request
	for proposal process seeking proposals from qualified nonprofit
8	organizations for assumption of the administrative and financial
Ū	responsibility of the plan. If the board determines that a
10	qualified organization exists, the board, in conjunction with the
	Governor, shall submit any necessary legislation to accomplish
12	the transfer of the functions of the plan to a nonprofit
	organization.
14	
	3. Board of directors. The plan operates under the
16	supervision of the Board of Directors of the Maine Consumer
	Choice Health Plan, which consists of 5 voting members.
18	
	A. The Governor shall appoint to the board one member
20	representing large employers, 2 members representing small
	employers, one member representing governmental entities and
22	
22	one member representing consumer health care organizations.
	Appointments by the Governor are subject to review by the
24	joint standing committee of the Legislature having
	jurisdiction over health insurance matters and to
26	confirmation by the Legislature.
2.0	
28	B. Initial terms of the members of the board are staggered:
	3 members serve 3-year terms and 2 members serve 2-year
30	terms. After the initial terms, members serve full 2-year
	terms and continue to serve until their successors have been
32	appointed. Board members may serve up to 3 full terms
	consecutively.
34	
J 1	C. Board members shall elect a chair. All meetings of the
26	
36	board are public proceedings within the meaning of Title 1,
	chapter 13, subchapter I.
38	
	D. Board members are entitled to reimbursement for
40	necessary expenses according to the provisions of Title 5,
	chapter 379.
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	4. Executive director. The Executive Director of the Maine
44	Consumer Choice Health Plan is the administrator of the plan. The
	director is appointed by the board and serves at the pleasure of
46	the board.

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5. Powers. The board may:

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COMMITTEE AMENDMENT

A. Enter into contracts with qualified 3rd parties for any service necessary to carry out the purposes of this chapter;

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2	B. Employ necessary starr,
4	C. Authorize benefit plan designs offered by participating carriers in accordance with subsection 7 and all applicable
6	statutes and rules;
8	D. Establish membership fees in accordance with subsection 9 to support the administrative expenses of the plan;
10	
12	E. Provide, if approved by the board, premium collection services for participating carriers with respect to health benefit plans offered through the plan if the carrier
14	offering the health benefit plan gives express written authorization to the board or any other entity acting on
16	behalf of the board to act as the carrier's agent for that purpose:
18	
20	F. Establish procedures for adjusting payments within each risk pool to participating carriers if the board finds that some participating carriers have a significantly
22	disproportionate share of high-risk or low-risk enrollees;
24	G. Establish a financial relationship directly with producers licensed pursuant to chapter 16 to market health
26	benefit plans offered through the plan;
28	H. Receive any funds necessary, not to exceed \$750,000, as a working capital advance for initial operating expenses in
30	administering the plan. The funds for the working capital advance may be transferred from the Maine Rx Dedicated Fund,
32	established in Title 22, section 2681, notwithstanding Title 22, section 2681, subsection 9, or another source identified
34	by the State Controller, and, if transferred, must be repaid within 2 years of start-up of the plan;
36	
38	I. Accept grant funding from any public or private sources identified by the board;
40	J. Perform all lawful acts necessary or convenient in the exercise of any power, authority or jurisdiction over the
42	plan, either in the administration of the plan or to fulfill
44	the purpose of the plan as set forth in this chapter;
46	K. Undertake activities necessary to administer the plan, including marketing and publicizing the plan and ensuring carrier and enrollee compliance with plan requirements; and
48	carrier and entorice compilance with plan regarrements, and
	L. Adopt rules as necessary to administer the plan. Rules
50	adopted pursuant to this paragraph are routine technical

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rules as defined in Title 5, chapter 375, subchapter II-A,

COMMITTEE AMENDMENT "\(\hat{\mathcal{H}}\)" to S.P. 793, L.D. 214

R. 9. 5.	COMMITTEE AMENDMENT " to S.P. 793, L.D. 2146
12	except that rules adopted relating to the establishment of a
2	risk adjustment mechanism or risk pools pursuant to
_	paragraph F and subsection 10 are major substantive rules as
4	defined in Title 5, chapter 375, subchapter II-A and must be
•	submitted to the Legislature on or before January 1, 2004.
6	Bubiliteed to the Begislature on of Before Bandary 1, 2004.
Ü	6 Participating garriors, contracts. The board chall
o	6. Participating carriers; contracts. The board shall
8	develop objective criteria for the selection of participating
7.0	carriers and provide adequate notice of the application process
10	to permit all carriers a reasonable and fair opportunity to
	participate. The selection of participating carriers must be
12	based on the criteria developed by the board.
14	7. Selection of health plans. The board shall require
	carriers to offer multiple health plans to ensure that enrollees
16	have a choice among carriers and types of health benefit plans in
	accordance with this subsection.
18	
	A. The plan must offer, at a minimum, a fee-for-service
20	plan, a managed care plan and a point-of-service plan. These
	health benefit plans may offer a range of deductibles, and
22	must include at least one plan with a high deductible. The
	plan may offer other health plans in accordance with
24	applicable state or federal law.
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26	B. To the extent possible, the plan must ensure that at
	least one plan offered pursuant to this subsection is
28	available to enrollees in all geographic areas of the State.
30	8. Enrollee eligibility. The board may establish
30	
2.2	conditions for enrollment and participation for enrollees in
32	accordance with this subsection.
34	A. Small employers are eligible. Employers that choose to
	participate in the plan shall offer enrollment to all
36	employees and their dependents who are not enrolled in
	another health plan.
38	<u> </u>
30	B. Governmental and municipal employers are eligible.
40	D. COVERMENCAL and maniety at employers are eligible.
40	C. Individuals not enrolled in another health plan may
42	participate.
42	har crethace.
44	D. Conditions for eligibility may not be based on health

status.

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E. Eligibility may be extended at the board's discretion to employers with 51 or more employees with the approval of the

Legislature. In the event that the board seeks to extend eligibility to employers with 51 or more employees, the

COMMITTEE AMENDMENT

board shall notify the joint standing committee of the Legislature having jurisdiction over health insurance matters. The joint standing committee of the Legislature having jurisdiction over health insurance matters may submit legislation to extend eligibility to employers with 51 or more employees under this chapter.

9. Contributions. The board shall establish contributions for participation in the plan, including any membership fees and premiums for health coverage. Enrolled employers shall determine the annual amount, if any, contributed by the employer toward the premium cost of health coverage under the plan for employees and their dependents. The board may establish a mechanism to collect contributions from enrolled employers, including remittance of the share of any premium paid by an employee. The board may coordinate with Maine Revenue Services to develop a mechanism for collection of contributions.

10. Risk pools. The board shall develop standards for classifying groups of participating enrollees into risk pools. The board may establish one or more risk pools consistent with rules adopted by the superintendent for private purchasing alliances pursuant to chapter 18-A.

- 11. Cost, quality and value measures. The board shall develop and publish objective cost, quality and value measures. The board shall also consider such measures in adopting authorization criteria for health plans.
- 12. Licensing: regulation. Notwithstanding any other provision of law, the plan is not subject to licensure as an insurer pursuant to this Title. Carriers that contract with the plan must be licensed pursuant to Title 24 or this Title. Health plans offered by participating carriers must comply with all applicable requirements of statutes and rules. Except to the extent inconsistent with this chapter, producers and carriers engaged in activities pursuant to this chapter are subject to all provisions of Title 24 and this Title. Rates for health benefit plans provided to enrollees in the plan by participating carriers are not subject to sections 2736, 2736-A and 2736-B.
- 13. Marketing. The board shall approve and make available to potential enrollees educational and marketing materials, health benefit plan descriptions, enrollee satisfaction survey results and comparison sheets that accurately summarize the requirements for eligibility and the health benefit plans and premiums offered by participating carriers in the plan. The information provided must enable enrollees and potential enrollees to make informed decisions regarding their enrollment in the plan and their choice of a health benefit plan.

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<u>Participat</u>	ing	<u>carrie</u>	rs ma	y not	<u>provide</u>	any	marketing	<u>materials</u>	<u>to</u>
<u>potential</u>	enro	llees	relat:	ng t	o benefit	s an	<u>d</u>		

- 14. Enrollee satisfaction survey. On an annual basis, the board shall develop a survey to monitor the satisfaction of enrollees participating in the plan. The results of the survey must be made available to enrollees and the public.
- 15. Fund. The Maine Consumer Choice Health Plan Fund is

 10 created as a dedicated fund for the deposit of any funds advanced for initial operating expenses and fees paid by enrollees for administration of the plan. The fund may not lapse, but remains in a continuing carrying account to carry out the purposes of this chapter.
- 16. Annual report. Beginning February 1, 2003 and annually on or before February 1st thereafter, the board shall submit a report on the operation of the plan to the joint standing committee of the Legislature having jurisdiction over health insurance matters. The report must include information relating to the carriers participating in the plan; the health benefit plans offered through the plan and their premium rates; the total number of enrollees participating in the plan and sorted as to employer size; and the administrative and operating expenses of the plan.
 - Sec. 4. Appropriations and allocations. The following appropriations and allocations are made.

Maine Consumer Choice Health Plan

Initiative: Provides a base allocation in the event Other Special Revenue funds are received to operate the Maine Consumer Choice Health Plan. Also adds the Executive Director of the Maine Consumer Choice Health Plan position.

	Other Special Revenue Funds	2001-02	2002-03
38	Positions - Legislative Count	(0.000)	(1.000)
	Personal Services	\$0	\$500
40	All Other	0	500
42	Total	\$ 0	\$1,000'

Further amend the bill by inserting at the end before the summary the following:

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COMMITTEE AMENDMENT

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_	'FISCAL NOTE
2	2002-03
4	APPROPRIATIONS/ALLOCATIONS
6	ATT ROT MATTOTO/ALLOCATIONS
U	Other Funds \$1,000
8	
10	The bill establishes the Maine Consumer Choice Health Plan as an independent executive agency to negotiate and provide health coverage to residents of Maine. The plan would operate
12	under the supervision of a new Board of Directors and a new Executive Director.
14	
16	The bill authorizes the plan to receive any funds necessary, not to exceed \$750,000, as a working capital advance. Funds may be transferred from the Maine Rx Dedicated Fund and other sources
18	identified by the State Controller. Transferred funds must be repaid in 2 years. The Maine Rx Dedicated Fund is itself financed
20	by funds advanced from the Fund for a Healthy Maine. The amount and timing of the advances to the Maine Consumer Choice Health
22	Plan will depend on decisions made by the board and the Executive Director and therefore can not be estimated at the present time.
24	The bill includes an Other Special Revenue funds allocation of \$500 to establish a base allocation to authorize the expenditure
26	of funds in fiscal year 2002-03. The bill also includes a base allocation of \$500 in fiscal year 2002-03 to create the Executive
28	Director position.
30	The additional costs associated with submitting any legislation and appointing members to the board can be absorbed
32	by the Office of the Governor within the Executive Department utilizing existing budgeted resources.
34	defilibing existing budgeted resources.
	The bill entitles board members to reimbursement for
36	necessary expenses according to the provisions of the Maine Revised Statutes, Title 5, chapter 379.'
38	<u>-</u>
40	SUMMARY
42	This amendment replaces the bill. It establishes the Maine Consumer Choice Health Plan as an independent executive agency to
44	act as a purchasing alliance open to individuals and small employers. The Maine Consumer Choice Health Plan is governed by

confirmed by the Legislature. The Maine Consumer Choice Health Plan is required to contract with participating health insurance

a 5-member board of directors appointed by the Governor and

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carriers to offer at least 3 health benefit plans to enrollees, a fee-for-service plan, a managed care plan and a point-of-service plan. The amendment also adds a fiscal note to the bill.

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