MAINE STATE LEGISLATURE

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| 3 | INSURANCE AND FINANCIAL SERVICES | | |
|----------------------------|--|--|--|
| 4 | Reproduced and distributed under the direction of the Clerk of the House. | | |
| 5 | STATE OF MAINE | | |
| 6 | HOUSE OF REPRESENTATIVES | | |
| 7 | 124TH LEGISLATURE | | |
| 8 | FIRST REGULAR SESSION | | |
| . 9 10 | COMMITTEE AMENDMENT "B" to H.P. 883, L.D. 1264, Bill, "An Act To Stabilize Funding and Enable DirigoChoice To Reach More Uninsured" Amend the bill in section 4 in §6917 by striking out all of subsection 1 (page 1, line | | |
| 12 | 19 to 37 in L.D.) and inserting the following: | | |
| 13 14 15 16 17 | '1. Access payments required from health insurance carriers, 3rd-parts administrators and employee benefit excess insurance carriers. All health insurance carriers, 3rd-party administrators and employee benefit excess insurance carriers shall pay an access payment as specified in paragraph A on all paid claims, except claims under accidental injury, specified disease, hospital indemnity, dental, vision, disability income, long-term care, Medicare supplement or other limited benefit health insurance. | | |
| 9 | The following provisions govern access payments. | | |
| 20 | A. The amount of the access payment is established as follows: | | |
| 21 | (1) From September 1, 2009 to August 31, 2010, the access payment is 2.14%; | | |
| 22 | (2) From September 1, 2010 to August 31, 2011, the access payment is 1.605%; | | |
| 23 | (3) From September 1, 2011 to August 31, 2012, the access payment is 1.07%; | | |
| 24 | (4) From September 1, 2012 to August 31, 2013, the access payment is 0.535% | | |

A health insurance carrier or employee benefit excess insurance carrier may not be required to pay an access payment on policies or contracts insuring federal employees.

Beginning September 1, 2013, a health insurance carrier, 3rd-party

administrator and employee benefit excess insurance carrier is not required to pay

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and

B. Access payments apply to claims paid beginning on or after September 1, 2009.

36.

| C. Access payments must be made monthly to Dirigo Health, are due 30 days after |
|--|
| the end of each month and must accrue interest at 12% per annum on or after the due |
| date, except that access payments for 3rd-party administrators, for groups of 500 or |
| fewer members may be made annually not less than 60 days after the close of the |
| plan year. |

D. Access payments received by Dirigo Health must be pooled with other revenues of the agency in the Dirigo Health Enterprise Fund established in section 6915.'

Amend the bill by striking out all of section 6 and inserting the following:

- 'Sec. 6. Changes to Dirigo Health. The Board of Trustees of Dirigo Health, or "the board," shall:
- 1. Develop products, procedures. Develop more affordable products and procedures that can reach uninsured and underinsured residents of the State to reduce uncompensated care;
- 2. Maximize federal initiatives. Seek to secure federal funding to support the Dirigo Health Program and the Maine Individual Reinsurance Association established in the Maine Revised Statutes, Title 24-A, chapter 54 and use subsidies to maximize federal initiatives, including Medicaid and any national health reform;
 - 3. Asset tests. Establish an asset test for determining eligibility;
- **4. Voucher program.** Consider offering a voucher-based program to provide health insurance benefits; and
- **5.** Redesign. Redesign the DirigoChoice product or products, including adding a requirement that requires any new enrollees to be uninsured before enrolling in DirigoChoice.

The board shall report to the Joint Standing Committee on Insurance and Financial Services regarding changes that will be made to the Dirigo Health Program consistent with this section by January 1, 2010.'

Amend the bill by inserting after section 7 the following:

- 'Sec. 8. Legislative commitment to funding. Notwithstanding the reduction in the amount of the access payment pursuant to the Maine Revised Statutes, Title 24-A, section 6917, subsection 1, paragraph A beginning September 1, 2010, it is the intent of the Legislature that funding for Dirigo Health be provided through the General Fund as necessary to, at a minimum, maintain enrollment in Dirigo Health at the same level as enrollment on the effective date of this Act.
- Sec. 9. Appropriations and allocations. The following appropriations and allocations are made.
 - DIRIGO HEALTH
- 37 Dirigo Health Fund 0988
- Initiative: Adjusts funding to reflect the impact of replacing the savings offset payment with a new access payment to be paid by health insurance carriers, 3rd-party

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COMMITTEE AMENDMENT " to H.P. 883, L.D. 1264

| 1 | administrators and ampleyes han afit average insurance | | aid alaima | | |
|--------|---|----------------------|-----------------|--|--|
| 1 2 | administrators and employee benefit excess insurance carriers of 2.14% on paid claims | | | | |
| | beginning September 1, 2009 and decreasing by 25% each year thereafter. | | | | |
| | | • | | | |
| 3 | GENERAL FUND | 2009-10 | 2010-11 | | |
| 4 | All Other | \$0 | \$8,370,833 | | |
| 5 | | | | | |
| 6 | GENERAL FUND TOTAL | \$0 | \$8,370,833 | | |
| | | | | | |
| | | | | | |
| 7 | DIRIGO HEALTH FUND | 2009-10 | 2010-11 | | |
| 8 | All Other | \$0 | (\$8,370,833) | | |
| 9 | | | | | |
| 10 | DIRIGO HEALTH FUND TOTAL | \$0 | (\$8,370,833) | | |
| | | • | | | |
| 11 | Sec. 10. Effective date. This Act takes effect Oc | tober 1, 2009. | | | |
| | • | | | | |
| 12 | SUMMARY | | | | |
| 13 | This amendment is the minority report of the con | nmittee. After the | first year the | | |
| 14 | access payment is implemented, it is reduced by 25% | | | | |
| 15 | 75% the 4th year and then eliminated. In addition to t | | | | |
| 16 | amendment directs the Board of Trustees of Dirigo He | | | | |
| 17 | eligibility, to require any new enrollees after the redesig | gn of the DirigoCho | oice product to | | |
| 18 | be uninsured before enrolling and to seek adequate feder | eral funding to supp | ort the Dirigo | | |
| 19 | Health Program and the Maine Individual Reinsurance A | Association. | | | |
| 20 | The amendment expresses the Legislature's intent th | nat the funding prov | ided to Dirigo | | |
| 21 | Health pursuant to the Maine Revised Statutes, Title 24- | | | | |
| 22 | by the General Fund to maintain enrollment at the same | | | | |
| 23 | the bill. The amendment also establishes an effective | | | | |
| 24 | amendment also adds an appropriations and allocations s | | | | |
| 25 | FISCAL NOTE REQU | IRED | | | |
| 26 | (See attached) | | | | |
| | | | | | |



124th MAINE LEGISLATURE

LD 1264

LR 1932(03)

An Act To Stabilize Funding and Enable DirigoChoice To Reach More Uninsured

Fiscal Note for Bill as Amended by Committee Amendment ""

Committee: Insurance and Financial Services

Fiscal Note Required: Yes

| Fiscal Note | | | | | | | |
|----------------------------|-------------|---------------|------------------------|---------------------|--|--|--|
| | 2009-10 | 2010-11 | Projections 2011-12 | Projections 2012-13 | | | |
| Net Cost (Savings) | | | | | | | |
| General Fund | \$0 . | \$8,370,833 | \$19,295,833 | \$29,820,833 | | | |
| Appropriations/Allocations | | | • | | | | |
| General Fund | \$0 | \$8,370,833 | \$19,295,833 | \$29,820,833 | | | |
| Dirigo Health Fund | \$0 | (\$8,370,833) | (\$19,295,833) | (\$29,820,833) | | | |
| Revenue | | . " | | • | | | |
| Dirigo Health Fund | \$2,033,333 | (\$8,370,833) | (\$19,295,833) | (\$29,820,833) | | | |

Fiscal Detail and Notes

Provides an appropriation of \$8,370,833 in 2010-11 to the Dirigo Health Agency to offset the difference between budgeted Dirigo Savings Offset Payment (SOP) revenue and estimated access payment revenue. The replacement of the current Dirigo SOP with a 2.14% access payment on claims paid by health insurance carriers, 3rd party administrators and employee benefit excess insurance carriers beginning September 1, 2009, deceasing by 25% each year thereafter, is projected to result in a net increase of Dirigo Health Fund revenue of \$2,033,333 in 2009-10 but decrease net revenue thereafter. This decrease will be made up by General Fund appropriations to the Dirigo Health program.

This estimate is based on a comparison of 2010-2011 budgeted SOP revenue calculated on an accrual basis with estimated access payments calculated on a one month accrual basis (i.e., for 2009-10, 10 months of payments are assumed to be collected). It is assumed that other changes to the Dirigo program detailed in the bill will be implemented within existing budgeted resources.

| | 2009-10 | 2010-11 | Projections 2011-12 | Projections 2012-13 |
|---------------------------------|---------------|---------------|---------------------|---------------------|
| Dirigo Revenue Impact Summary | | • | | |
| Budgeted SOP Revenue | \$38,600,000 | \$41,700,000 | \$42,100,000 | \$42,100,000 |
| SOP Collections Prior to Repeal | \$5,550,000 | \$0 | \$0 | \$0 |
| Impact of SOP repeal | -\$33,050,000 | -\$41,700,000 | -\$42,100,000 | -\$42,100,000 |
| Access Payments | \$35,083,333 | \$33,329,167 | \$22,804,167 | \$12,279,167 |
| Net Change In Dirigo Revenue | \$2,033,333 | -\$8,370,833 | -\$19,295,833 | -\$29,820,833 |