# MAINE STATE LEGISLATURE

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# 129th MAINE LEGISLATURE

### FIRST REGULAR SESSION-2019

**Legislative Document** 

No. 109

H.P. 91

House of Representatives, January 17, 2019

### An Act To Create a Public Health Insurance Option

Reference to the Committee on Health Coverage, Insurance and Financial Services suggested and ordered printed.

ROBERT B. HUNT Clerk

R(+ B. Hunt

Presented by Representative BERRY of Bowdoinham.
Cosponsored by Senator VITELLI of Sagadahoc and
Representatives: BRENNAN of Portland, HEPLER of Woolwich, HYMANSON of York,
PEBWORTH of Blue Hill, SYLVESTER of Portland, Senators: GRATWICK of Penobscot,

MILLETT of Cumberland.

#### Be it enacted by the People of the State of Maine as follows:

- **Sec. 1. 5 MRSA §285, sub-§1, ¶J,** as amended by PL 2011, c. 438, §2, is further amended to read:
  - J. Legislative employees that who are recipients of retirement allowances from the Maine Public Employees Retirement System based upon creditable service as teachers, as defined by section 17001, subsection 42; and
  - **Sec. 2. 5 MRSA §285, sub-§1, ¶K,** as enacted by PL 2011, c. 438, §3, is amended to read:
    - K. Any employee of a school administrative unit as defined in Title 20-A, section 1, subsection 26 or of an educational advisory organization as described in Title 30-A, section 5724, subsection 9-; and
    - Sec. 3. 5 MRSA §285, sub-§1, ¶L is enacted to read:
  - L. Any resident of this State who is legally domiciled as defined in Title 24-A, section 2736-C, subsection 1, paragraph C-1 and has been for at least the last 60 days.
- Sec. 4. 5 MRSA §285, sub-§1-B, as amended by PL 2011, c. 438, §4, is further amended to read:
  - **1-B.** Ineligibility. Except as provided in subsection 1, paragraph K paragraphs K and L and subsection 11-A, members of the Maine Municipal Association and employees of counties and municipalities and instrumentalities thereof, including quasi-municipal corporations, are not eligible to participate in the group health plan under this section.
  - **Sec. 5. 5 MRSA §285, sub-§2,** as amended by PL 1991, c. 780, Pt. Y, §23, is further amended to read:
  - **2. Coverage.** Each state employee <u>or other person</u> to whom this section applies is eligible for a group health plan as provided in Title 24-A, sections 2802 to 2812 2812-A, including major medical benefits or through a self-funded alternative. The provisions of the group insurance policy or policies or the self-funded alternative must be determined, insofar as the provisions are not inconsistent with terms and conditions contained in collective bargaining agreements negotiated pursuant to Title 26, chapter 9-B, by the State Employee Health Commission as provided in section 285-A. The master policy for the group health plan must be held by the Commissioner of Administrative and Financial Services.
- Sec. 6. 5 MRSA §285, sub-§3, as amended by PL 1987, c. 731, §3, is further amended to read:
  - **3. Enrollment.** Any employee <u>or other person</u> eligible under this section may join within the first 60 days of employment or during a declared open enrollment period. The filing of necessary applications shall be <u>is</u> the responsibility of the employer <u>in the case of an employee</u>. Effective dates under this section shall be <u>are</u> at the discretion of the commission.

#### Sec. 7. 5 MRSA §285, sub-§16 is enacted to read:

16. Report on enrollment in group health plan pursuant to subsection 1, paragraph L. The State Employee Health Commission, with the assistance of the Executive Director of Health Insurance, shall report annually beginning October 1, 2020 on the number of persons enrolled in the group health plan who are eligible under subsection 1, paragraph L, the utilization of benefits by those persons, the total costs of coverage for those persons under the group health plan and the effect of those costs on the overall costs of the group health plan.

9 SUMMARY

This bill makes any legally domiciled resident of the State eligible for coverage under the group health plan available to state employees and other eligible persons. The bill permits any resident enrolling in coverage under this provision to do so during an open enrollment period.

The bill also adds a reporting requirement to track the experience of those persons enrolling in coverage under the group health plan and the relative effect of that experience on the overall costs of the group health plan.