HOUSE DOCKET, NO. 3320 FILED ON: 1/21/2011

HOUSE . . . . . No. 2964

The Commonwealth of Massachusetts

PRESENTED BY:

Stephen Kulik

To the Honorable Senate and House of Representatives of the Commonwealth of Massachusetts in General Court assembled:

The undersigned legislators and/or citizens respectfully petition for the passage of the accompanying:

An Act to provide health insurance parity for municipalities and local taxpayers.

PETITION OF:

NAME:	DISTRICT/ADDRESS:
Stephen Kulik	*1st Franklin*
Richard Bastien	*2nd Worcester*
William N. Brownsberger	☐ *[District]* ☐
Linda Campbell	*15th Essex*
Martha M. Walz	*8th Suffolk*

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HOUSE . . . . . No. 2964

By Mr. Kulik of Worthington, a petition (accompanied by bill, House, No. 2964) of Stephen Kulik and others for legislation to provide health insurance parity between municipal health care plans and Group Insurance Commission plans. Public Service.

The Commonwealth of Massachusetts

An Act to provide health insurance parity for municipalities and local taxpayers.

Be it enacted by the Senate and House of Representatives in General Court assembled, and by the authority of the same, as follows:

Section 1. Chapter 32B is hereby amended by adding at the end thereof the following new section:

Section 20

Effective January 1, 2009, upon acceptance of this section in the manner provided for in Section 10 of this chapter, a governmental unit is authorized to include, as part of the health plans (HMOs, PPOs, indemnity plans) that it offers to its employees and retirees, co-payments, deductibles and tiered provider network co-payments (or other plan design features) that are no greater in dollar amount than the highest co-payments, deductibles and tiered provider network co-payments (or other plan design features) provided in any of the same class (HMOs, PPOs, indemnity plans) of health plans offered by the Group Insurance Commission pursuant to G.L. c. 32A. For purposes of this section, a "Point of Service" plan offered by a governmental unit shall be considered to fall within the PPO class.

The above authorized dollar amounts for co-payments, deductibles and tiered provider network co-payments (or other plan design features) shall be increased whenever the Group Insurance Commission increases the dollar amount of co-payments and/or deductibles and/or tiered provider network co-payments (or other plan design features) on the health plans that it offers.

A governmental unit may include in its health plans co-payments, deductibles and tiered provider network co-payments (or other plan design features) up to the above-referenced amounts without bargaining pursuant to M.G.L. c. 150E concerning the decision to do so.

Nothing herein shall prohibit a governmental unit from including in its health plans higher co-payments, deductibles or tiered provider network co-payments (or other plan design

23 features) than those authorized by the preceding paragraphs of this section; but such higher co-
24 payments, deductibles or tiered provider network co-payments (or other plan design features)
25 may be included only after the governmental unit has satisfied any bargaining obligations
26 pursuant to M.G.L. 150E.

27 Section 2. Section 18 of Chapter 32B is hereby amended by striking the first twenty
28 words of the first paragraph of said section and by striking the second paragraph of said section
29 in its entirety.

30 Section 3. Section 18A of Chapter 32B is hereby amended by striking it in its entirety.