HOUSE No. 790

The Commonwealth of Massachusetts

PRESENTED BY:

Christine P. Barber

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 adoption of the accompanying bill:

An Act to improve efficiency and coordination of health through a new division of health insurance.

PETITION OF:

NAME:	DISTRICT/ADDRESS:	DATE ADDED:
Christine P. Barber	34th Middlesex	1/15/2015
Denise Provost	27th Middlesex	9/4/2019
David M. Rogers	24th Middlesex	2/3/2015
James B. Eldridge	Middlesex and Worcester	9/4/2019
Carmine L. Gentile	13th Middlesex	9/4/2019
Paul R. Heroux	2nd Bristol	9/4/2019
Mary S. Keefe	15th Worcester	9/4/2019
Jonathan Hecht	29th Middlesex	9/4/2019
Brian A. Joyce	Norfolk, Bristol and Plymouth	9/4/2019
Sean Garballey	23rd Middlesex	9/4/2019
Michael S. Day	31st Middlesex	9/4/2019
Michelle M. DuBois	10th Plymouth	9/4/2019
Carlos Gonzalez	10th Hampden	9/4/2019

HOUSE No. 790

By Ms. Barber of Somerville, a petition (accompanied by bill, House, No. 790) of Christine P. Barber and others for legislation to establish a division of health insurance to improve the efficiency and coordination of health insurance. Financial Services.

The Commonwealth of Alassachusetts

In the One Hundred and Eighty-Ninth General Court (2015-2016)

An Act to improve efficiency and coordination of health through a new division of health insurance.

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. The third sentence of the first paragraph of subsection (d) of section 38C of
- 2 chapter 3 of the General Laws is hereby amended by striking out the words "the division of
- 3 insurance" and inserting in place thereof the following words:—the division of health insurance.
- 4 SECTION 2. The second paragraph of section 16 of chapter 6A of the General Laws is
- 5 hereby amended by striking out the words "and (7) the health facilities appeals board" and
- 6 inserting in place thereof the following words:– (7) the health facilities appeals board; and (8) the
- 7 division of health insurance under the direction of the commissioner of health insurance.
- 8 SECTION 3. The second sentence of subsection (a) of section 16D of chapter 6A of the
- 9 General Laws is hereby amended by striking out the words "the commissioner of insurance" and
- inserting in place thereof the following words:– the commissioner of health insurance.

- SECTION 4. The definition of "Net cost of private health insurance" in section 1 of chapter 6C of the General Laws is hereby amended by striking out the words "the division of insurance" and inserting in place thereof the following words:- the division of health insurance.
 - SECTION 5. The third sentence of subsection (a) of section 11 of chapter 6C of the General Laws is hereby amended by striking out the words "the division of insurance" and inserting in place thereof the following words:- the division of health insurance.

- SECTION 6. The third sentence of subsection (c) of section 11 of chapter 6C of the General Laws is hereby amended by striking out the words "the division of insurance" and inserting in place thereof the following words:- the division of health insurance.
- SECTION 7. The first sentence of subsection (d) of section 11 of chapter 6C of the General Laws is hereby amended by striking out the words "the division of insurance" and inserting in place thereof the following words:- the division of health insurance.
 - SECTION 8. The first sentence of subsection (e) of section 11 of chapter 6C of the General Laws is hereby amended by striking out the words "the division of insurance" and inserting in place thereof the following words:- the division of health insurance.
- SECTION 9. Clause (ix) of subsection (b) of section 15 of chapter 6C of the General Laws is hereby amended by striking out the words "the division of insurance" and inserting in place thereof the following words:- the division of health insurance.
- SECTION 10. The third sentence of clause (1) of subsection (a) of section 16 of chapter 6C of the General Laws is hereby amended by striking out the words "the division of insurance" and inserting in place thereof the following words:- the division of health insurance.

- SECTION 11. The fifth sentence of clause (1) of subsection (a) of section 16 of chapter

 6C of the General Laws is hereby amended by striking out the words "the division of insurance"

 and inserting in place thereof the following words:- the division of health insurance.
- 35 SECTION 12. Sections 7A and 7B of chapter 26 of the General Laws are hereby repealed.

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- SECTION 13. The first paragraph of section 8H of chapter 26 of the General Laws is hereby amended by adding the following sentence:— Assessments received under this paragraph from domestic health insurance companies, including nonprofit hospital, medical and dental service corporations as defined in section 1 of chapter 176A, section 1 of chapter 176B, and section 1 of chapter 176E shall be paid to the division of health insurance.
- SECTION 14. Section 8H of chapter 26 of the General Laws is hereby amended by striking out the third and fourth paragraphs.
- SECTION 15. Sections 8K and 8L of chapter 26 of the General Laws are hereby repealed.
 - SECTION 16. Subsection (iv) of section 3 of chapter 12B of the General Laws is hereby amended by striking out the words "the division of insurance" and inserting in place thereof the following words:- the division of health insurance.
 - SECTION 17. Clause (9) of subsection (b)of section 9 of chapter 12B of the General Laws is hereby amended by striking out the words "the division of insurance" and inserting in place thereof the following words:- the division of health insurance.

52	SECTION 18. Clause (10) of subsection (b) of section 9 of chapter 12B of the General
53	Laws is hereby amended by striking out the words "the division of insurance" and inserting in
54	place thereof the following words:- the division of health insurance.
55	SECTION 19. Clause (1) of subsection (b) of section 10 of chapter 12B of the General
56	Laws is hereby amended by striking out the words "the division of insurance" and inserting in
57	place thereof the following words:- the division of health insurance.
58	SECTION 20. The third sentence of section 17 of chapter 12B of the General Laws is
59	hereby amended by striking out the words "the division of insurance" and inserting in place
60	thereof the following words:- the division of health insurance.
51	SECTION 21. The first sentence of section 3 of chapter 32A of the of the General Laws
52	is hereby amended by striking out the words "the commissioner of insurance" and inserting in
53	place thereof the following words:- the commissioner of health insurance.
54	SECTION 22. The third sentence of subsection (c) of section 8B of chapter 62C of the
65	General Laws is hereby amended by striking out the words "the commissioner of insurance" and
66	inserting in place thereof the following words:- the commissioner of health insurance.
67	SECTION 23. The General Laws are hereby amended by inserting after chapter 111N the
68	following new chapter:-
59	Chapter 111O.
70	Division of Health Insurance.
71	Section 1. There is hereby established a division of health insurance under the

supervision and control of the commissioner of health insurance. The secretary of health and

human services shall appoint the commissioner of health insurance, with the approval of the governor, who shall serve at the pleasure of the secretary and may be removed by the secretary at any time, subject to the approval of the governor. The commissioner shall have such educational qualifications and administrative and other experience as the secretary of health and human services determines to be necessary for the performance of the duties of commissioner. The position of commissioner shall be classified in accordance with section 45 of chapter 30 and the salary shall be determined in accordance with section 46C of said chapter 30.

The commissioner shall appoint and may remove such agents and subordinate officers as the commissioner may deem necessary and may establish bureaus and subdivisions within the division. The division shall adopt and amend rules and regulations, in accordance with chapter 30A, for the administration of its duties and powers and to effectuate the provisions and purposes of this chapter and other duties of the division.

- Section 2. The division of health insurance shall discharge its powers and duties to:
 - (1) Guard the solvency of health insurers;
 - (2) Protect the interests of consumers;

- (3) Encourage fair treatment of health care providers; and
- (4) Encourage policies and developments that improve the quality and efficiency of health care service delivery and outcomes; and
 - (5) View the health care system as a comprehensive entity and encourage and direct insurers towards policies that advance the welfare of the public through overall efficiency, improved health care quality, and appropriate access.

Section 3. There shall be in the division a health care access bureau overseen by a deputy commissioner for health care access, whose duties shall include, subject to the direction of the commissioner of health insurance, administration of the division's statutory and regulatory authority for oversight of the small group and individual health insurance market, oversight of affordable health plans, including coverage for young adults, as well as the dissemination of appropriate information to consumers about health insurance coverage and access to affordable products. The commissioner shall appoint at least the following employees of the health care access bureau: a deputy commissioner for health access, a health care finance expert, an actuary, and a research analyst. They shall devote their full time to the duties of their office, shall be exempt from chapters 30 and 31, and shall serve at the pleasure of the commissioner. The commissioner may appoint such other employees as the bureau may require.

The commissioner may make and collect an assessment against the carriers licensed under chapters 175, 176A, 176B and 176G to pay for the expenses of the bureau. The assessment shall be at a rate sufficient to produce \$600,000 annually. In addition to that amount, the assessment shall include an amount to be credited to the General Fund which shall be equal to the total amount of funds estimated by the secretary for administration and finance to be expended from the General Fund for indirect and fringe benefit costs attributable to the personnel costs of the bureau. If the commissioner fails to expend for the costs and expenses of the bureau in a fiscal year the total amount of \$600,000 for the purposes set forth in this section, any amount unexpended in that fiscal year shall be credited against the assessment to be made in the following fiscal year, and the assessment in the following fiscal year shall be reduced by that unexpended amount. The assessment shall be allocated on a fair and reasonable basis among all carriers licensed under said chapters 175, 176A, 176B and 176G. The funds produced by the

assessments shall be expended by the division, in addition to any other funds which may be appropriated, to assist in defraying the general operating expenses of the bureau, and may be used to compensate consultants retained by the bureau. A carrier licensed under said chapters 175, 176A, 176B and 176G shall pay the amount assessed against it within 30 days after the date of the notice of assessment from the commissioner.

Section 4. (a) For the purposes of implementing this chapter and section 8B of chapter 62C, the commissioner of health insurance may consult with the department of revenue and may enter into an interdepartmental service agreement with the department that may include the transfer of information from statements and reports provided under said section 8B.

- (b) Upon request, carriers licensed under chapters 175, 176A, 176B and 176G and the office of Medicaid shall make information available to the bureau for the purposes of this chapter. Such information shall be limited to the minimum amount of personal information necessary, shall not include information about diagnoses or treatments and, except for the office of Medicaid, shall not include social security numbers. The information acquired under this section shall be confidential and shall not constitute a public record.
- (c) The division may consider violations of this section and said section 8B when licensing or authorizing entities to provide health coverage.
- Section 5. The division, in consultation with the commonwealth health insurance connector authority established by chapter 176Q, shall establish and publish minimum standards and guidelines at least annually for each type of health benefit plans, except qualified student health insurance plans as set forth in section 18 of chapter 15A, provided by insurers and health maintenance organizations doing business in the commonwealth.

Section 6. The division shall require all health insurers and health maintenance organizations doing business in the commonwealth to identify persons who are recipients of medical assistance under chapter 118E or recipients of health care services, including hospital and other services funded through the health safety net under chapter 118E, or who are responsible for supporting such recipients, and who are also beneficiaries under any policy for health insurance or parties to any health maintenance contract in force and effect in the commonwealth. The department of public welfare and the center for health information and analysis shall provide information to the extent sufficient to allow all insurers to identify such persons. Such information shall be made available by such insurers and health maintenance organizations and by the department and the center for health information only for the purposes of and to the extent necessary for identifying such persons. No health insurer or health maintenance organization which complies with this section shall be liable in any civil or criminal action or proceedings brought by such beneficiaries or members on account of such compliance. The division of health insurance shall further direct all health insurers and health maintenance organizations doing business in the commonwealth to participate with the department and the center for health information and analysis in any procedures, including but not limited to automated file matches, conducted under the direction of the department and the center for health information and analysis for the purpose of identifying those persons who are recipients of medical assistance under chapter 118E or recipients of health care services, including hospital and other services funded through the health safety net, under chapter 118E, or who are responsible for supporting such recipients, and who are also beneficiaries under any policy for health insurance or parties to any health maintenance contract in force in the commonwealth. Participation in such a procedure by a health insurer or health maintenance organization doing

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business in the commonwealth shall include but not be limited to reasonable financial participation in the cost of any such procedure. The commissioner of health insurance is authorized to promulgate regulations necessary to ensure the effectiveness of this section

Section 7. The commissioner of health insurance may implement and enforce applicable provisions of the federal Mental Health Parity and Addiction Equity Act, section 511 of Public Law 110-343, and applicable state mental health parity laws, including section 22 of chapter 32A, section 47B of chapter 175, section 8A of chapter 176A, section 4A of chapter 176B and sections 4, 4B and 4M of chapter 176G of the General Laws, in regard to any carrier licensed under chapters 175, 176A, 176B and 176G.

Section 8. In regard to any carrier licensed pursuant to chapters 175, 176A, 176B, 176E, 176F and 176G, the commissioner of health insurance may implement and enforce: (i) the Patient Protection and Affordable Care Act, Public Law 111-148, as well as any rules, regulations or guidance applicable thereto, as amended from time to time; and (ii) the Women's Health and Cancer Rights Act of 1998, Public Law 105-277, as well as any rules, regulations or guidance applicable thereto, as amended from time to time, including, but not limited to, the amendments made by: Title X of said Patient Protection and Affordable Care Act; the Health Care and Education Reconciliation Act of 2010, Public Law 111-152; and the Indian Health Care Improvement Reauthorization and Extension Act of 2009, as enacted in amended form by section 10221 said federal Patient Protection and Affordable Care Act.

SECTION 24. Section 1 of chapter 175 of the General Laws is hereby amended by striking out the definition of "Commissioner" and inserting in place thereof the following definition:—

184	"Commissioner", the commissioner of insurance; provided, that the term
185	"Commissioner" shall mean the commissioner of health insurance established by chapter 1110
186	with respect to all health insurance, including accident and sickness insurance under sections 108
187	and 110 and any other insurance that provides medical, surgical, dental, or hospital expense
188	benefits.
189	SECTION 25. Section 2 of chapter 175I of the General Laws is hereby amended by
190	striking out the definition of "Commissioner" and inserting in place thereof the following
191	definition:-
192	"Commissioner", the commissioner of insurance or his designee; provided, that the term
193	"Commissioner" shall mean the commissioner of health insurance established by chapter 1110
194	with respect to all health insurance.
195	SECTION 26. Section 1 of chapter 176A of the General Laws is hereby amended by
196	inserting before the first paragraph the following paragraph:-
197	Notwithstanding any general or special law to the contrary, the words "commissioner"
198	and "commissioner of insurance" as used in this chapter shall mean the commissioner of health
199	insurance.
200	SECTION 27. Section 1 of chapter 176B of the General Laws is hereby amended by
201	striking out the definition of "Commissioner" and inserting in place thereof the following

"Commissioner", the commissioner of health insurance.

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definition:-

204	SECTION 28. Section 1 of chapter 176D of the General Laws is hereby amended by
205	striking out the definition of "Commissioner" and inserting in place thereof the following
206	definition:-
207	"Commissioner", the commissioner of insurance; provided, that the terms
208	"Commissioner" and "commissioner of the division of insurance" shall mean the commissioner
209	of health insurance established by chapter 1110 with respect to all health insurance, including
210	accident and sickness insurance under sections 108 and 110 and any other insurance that
211	provides medical, surgical, dental, or hospital expense benefits.
212	SECTION 29. Section 1 of chapter 176E of the General Laws is hereby amended by
213	striking out the definition of "Commissioner" and inserting in place thereof the following
214	definition:-
215	"Commissioner", the commissioner of health insurance.
216	SECTION 30. Section 1 of chapter 176F of the General Laws is hereby amended by
217	striking out the definition of "Commissioner" and inserting in place thereof the following
218	definition:—
219	"Commissioner", the commissioner of health insurance.
220	SECTION 31. Section 1 of chapter 176G of the General Laws is hereby amended by
221	striking out the definition of "Commissioner" and inserting in place thereof the following
222	definition:-

"Commissioner", the commissioner of health insurance.

224	SECTION 32. Section 1 of chapter 176I of the General Laws is hereby amended by
225	striking out the definition of "Commissioner" and inserting in place thereof the following
226	definition:-
227	"Commissioner", the commissioner of health insurance.
228	SECTION 33. Section 1 of chapter 176J of the General Laws is hereby amended by
229	striking out the definition of "Commissioner" and inserting in place thereof the following
230	definition:-
231	"Commissioner", the commissioner of health insurance.
232	SECTION 34. Section 1 of chapter 176K of the General Laws is hereby amended by
233	striking out the definition of "Commissioner" and inserting in place thereof the following
234	definition:-
235	"Commissioner", the commissioner of health insurance.
236	SECTION 35. Section 1 of chapter 176M of the General Laws is hereby amended by
237	striking out the definition of "Commissioner" and inserting in place thereof the following
238	definition:-
239	"Commissioner", the commissioner of health insurance.
240	SECTION 36. Section 1 of chapter 176N of the General Laws is hereby amended by
241	striking out the definition of "Commissioner" and inserting in place thereof the following
242	definition:-
243	"Commissioner", the commissioner of health insurance.

244	SECTION 37. Section 1 of chapter 1760 of the General Laws is hereby amended by
245	striking out the definition of "Commissioner" and inserting in place thereof the following
246	definition:-
247	"Commissioner", the commissioner of health insurance.
248	SECTION 38. Said section 1 of said chapter 176O of the General Laws is hereby
249	amended by striking out the definition of "Division" and inserting in place thereof the following
250	definition:-
251	"Division", the division of health insurance.
252	SECTION 39. Section 1 of chapter 176Q of the General Laws is hereby amended by
253	striking out the definition of "Commissioner" and inserting in place thereof the following
254	definition:-
255	"Commissioner", the commissioner of health insurance.
256	SECTION 40. The second sentence of subsection (b) of section 2 of chapter 176Q of the
257	General Laws is hereby amended by striking out the words "the commissioner of insurance" and
258	inserting in place thereof the following words:- the commissioner of health insurance.
259	SECTION 41. Subsection (m) of section 3 of chapter 176Q of the General Laws is hereby
260	amended by striking out the words "the division of insurance" and inserting in place thereof the
261	following words:- the division of health insurance.
262	SECTION 42. Section 1 of chapter 176R of the General Laws is hereby amended by
263	striking out the definition of "Commissioner" and inserting in place thereof the following
264	definition:-

265 "Commissioner", the commissioner of health insurance. 266 SECTION 43. Section 1 of chapter 176S of the General Laws is hereby amended by 267 striking out the definition of "Commissioner" and inserting in place thereof the following 268 definition:-269 "Commissioner", the commissioner of health insurance. 270 SECTION 44. Section 1 of chapter 176T of the General Laws is hereby amended by 271 striking out the definition of "Commissioner" and inserting in place thereof the following 272 definition:-273 "Commissioner", the commissioner of health insurance. 274 SECTION 45. Section 1 of chapter 176U of the General Laws is hereby amended by 275 striking out the definition of "Commissioner" and inserting in place thereof the following definition:-276 277 "Commissioner", the commissioner of health insurance. 278 SECTION 46. (a) Notwithstanding any general or special law to the contrary, this 279 section shall facilitate the orderly transfer of the employees, proceedings, rules and regulations, 280 property and legal obligations and functions of state government from the division of insurance,

(b) Subject to appropriation, the relevant employees of the transferor agency, including those who immediately before the effective date of this act held permanent appointment in positions classified under chapter 31 of the General Laws or have tenure in their positions as

solely to the extent that they relate to health insurance, as transferor agency, to the division of

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health insurance, as transferee agency.

provided by section 9A of chapter 30 of the General Laws or did not hold such tenure, or held confidential positions, are hereby transferred to the transferee agency, without interruption of service within the meaning of section 9A of chapter 30, without impairment of seniority, retirement or other rights of the employee, and without reduction in compensation or salary grade, notwithstanding any change in title or duties resulting from such reorganization, and without loss of accrued rights to holidays, sick leave, vacation and benefits, and without change in union representation or certified collective bargaining unit as certified by the state labor relations commission or in local union representation or affiliation. Any collective bargaining agreement in effect immediately before the transfer date shall continue in effect and the terms and conditions of employment therein shall continue as if the employees had not been so transferred. The reorganization shall not impair the civil service status of any such reassigned employee who immediately before the effective date of this act either held a permanent appointment in a position classified under chapter 31 of the General Laws or had tenure in a position by reason of section 9A of chapter 30 of the General Laws.

(c) Notwithstanding any general or special law to the contrary, all such employees shall continue to retain their right to bargain collectively pursuant to chapter 150E of the General Laws and shall be considered employees for the purposes of chapter 150E.

Nothing in this section shall confer upon any employee any right not held immediately before the date of the transfer, or to prohibit any reduction of salary grade, transfer, reassignment, suspension, discharge or layoff not prohibited before such date; nor shall anything in this section prohibit the abolition of any management position within the divisions of telecommunications or community antenna television after transfer to the department.

(d) All petitions, requests, investigations, filings and other proceedings appropriately and duly brought before the transferor agency, or pending before it before the effective date of this act, shall continue unabated and remain in force, but shall be assumed and completed by the transferee agency.

- (e) All orders, advisories, findings, rules and regulations duly made and all approvals duly granted by the transferor agency, which are in force immediately before the effective date of this act, shall continue in force and shall thereafter be enforced, until superseded, revised, rescinded or canceled, in accordance with law, by the transferee agency.
- (f) All books, papers, records, documents, equipment, buildings, facilities, cash and other property, both personal and real, including all such property held in trust, which immediately before the effective date of this act are in the custody of the transferor agency, shall be transferred to the transferee agency.
- (g) All duly existing contracts, leases and obligations of the transferor agency, shall continue in effect but shall be assumed by the transferee agency. No such existing right or remedy of any character shall be lost, impaired or affected by this act.
- (h) Whenever the term "division of insurance" appears in any statute, regulation, contract or other document, it shall be taken to mean the division of health insurance to the extent that it relates to health insurance. Otherwise, it shall be continue to be taken to mean the division of insurance.