SENATE DOCKET, NO. 2259 FILED ON: 1/20/2023

SENATE . . . . . No. 602

The Commonwealth of Massachusetts

PRESENTED BY:

Cynthia Stone Creem

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 relative to transparency of consumer health insurance rights.

PETITION OF:

NAME:	DISTRICT/ADDRESS:
Cynthia Stone Creem	*Norfolk and Middlesex*

SENATE DOCKET, NO. 2259 FILED ON: 1/20/2023

SENATE . . . . . No. 602

By Ms. Creem, a petition (accompanied by bill, Senate, No. 602) of Cynthia Stone Creem for legislation relative to transparency of consumer health insurance rights. Financial Services.

[SIMILAR MATTER FILED IN PREVIOUS SESSION
SEE SENATE, NO. *651* OF 2021-2022.]

The Commonwealth of Massachusetts

In the One Hundred and Ninety-Third General Court
(2023-2024)

An Act relative to transparency of consumer health insurance rights.

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 176O, is hereby amended by striking out section 19 and inserting in place thereof the following section:-

Section 19. Display of information on enrollment cards of carrier

(a) A carrier shall state prominently on the front or back of its enrollment cards the following:

(1) The statement “This health plan is fully-insured, subject to all Massachusetts insurance laws.”

(2) The name of the carrier, and the name of the insured’s specific health plan, including any numbers or other information necessary to identify the insured’s plan.

(3) A toll-free telephone number for the member services department of the carrier.

(4) The name and toll-free telephone number of the member services department of any third party that administers behavioral health, prescription drug, or other benefits.

(5) The amount of any copayment under the plan for preventive care visits, office visits, emergency department visits and prescription drugs.

(6) Whether the plan has a deductible, and the amount of any deductible under the plan.

(7) Any other information required by the commissioner of insurance.