

Health Insurance Consumer Protections Workgroup

Report to the Health Insurance Coverage Protection Commission

December 17, 2019

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- (1) monitor the appeal of the decision of the U.S. District Court for the Northern District of Texas in *Texas v. United States* regarding the ACA and the implications of the decision for the State;
- (2) monitor the enforcement of the ACA by the U.S. Department of Health and Human Services; and
- (3) determine the most effective manner of ensuring that Maryland consumers can obtain and retain quality health insurance independent of any action or inaction on the part of the federal government or any changes to federal law or its interpretation.

Insurance §15–137.1.

(a) The General Assembly finds and declares that it is in the public interest to ensure that the health care protections established by the federal Affordable Care Act continue to protect Maryland residents in light of continued threats to the federal Affordable Care Act.

(b) Notwithstanding any other provisions of law, the following provisions of Title I, Subtitles A, C, and D of the Affordable Care Act apply to individual health insurance coverage and health insurance coverage offered in the small group and large group markets, as those terms are defined in the federal Public Health Service Act, issued or delivered in the State by an authorized insurer, nonprofit health service plan, or health maintenance organization:

- (1) coverage of children up to the age of 26 years;
- (2) preexisting condition exclusions;
- (3) policy rescissions;
- (4) bona fide wellness programs;
- (5) lifetime limits;
- (6) annual limits for essential benefits;
- (7) waiting periods;
- (8) designation of primary care providers;
- (9) access to obstetrical and gynecological services;
- (10) emergency services;
- (11) summary of benefits and coverage explanation;
- (12) minimum loss ratio requirements and premium rebates;
- (13) disclosure of information;
- (14) annual limitations on cost sharing;
- (15) child-only plan offerings in the individual market;
- (16) minimum benefit requirements for catastrophic plans;
- (17) health insurance premium rates;
- (18) coverage for individuals participating in approved clinical trials;
- (19) contract requirements for stand-alone dental plans sold on the Maryland Health Benefit Exchange;
- (20) guaranteed availability of coverage;
- (21) prescription drug benefit requirements; and
- (22) preventive and wellness services and chronic disease management.

Cross-References for Consumer Protections in Current Statute and Proposed Legislation

| Insurance § 15-137.1 | Proposed Legislation |
|---|----------------------|
| (1) coverage of children up to the age of 26 years | 15-1A-08 |
| (2) preexisting condition exclusions | 15-1A-05 |
| (3) policy rescissions | 15-1A-21 |
| (4) bona fide wellness programs | n/a* |
| (5) lifetime limits | 15-1A-11 |
| (6) annual limits for essential benefits | 15-1A-11 |
| (7) waiting periods | 15-1A-12 |
| (8) designation of primary care providers | 15-1A-13 |
| (9) access to obstetrical and gynecological services | 15-1A-13 |
| (10) emergency services | 15-1A-14 |
| (11) summary of benefits and coverage explanation | 15-1A-15 |
| (12) minimum loss ratio requirements and premium rebates; | 15-1A-16 |
| (13) disclosure of information; | 15-1A-17 |
| (14) annual limitations on cost sharing; | 15-1A-19 |
| (15) child-only plan offerings in the individual market; | n/a* |
| (16) minimum benefit requirements for catastrophic plans; | 15-1A-18 |
| (17) health insurance premium rates; | 15-1A-07 |
| (18) coverage for individuals participating in approved clinical trials; | n/a* |
| (19) contract requirements for stand-alone dental plans sold on the Maryland Health Benefit Exchange; | n/a* |
| (20) guaranteed availability of coverage; | 15-1A-09 |
| (21) prescription drug benefit requirements; and | 15-1A-20 |
| (22) preventive and wellness services and chronic disease management. | 15-1A-10 |

* Legislation was not needed for the items marked “n/a” because corresponding requirements are already codified in Maryland law.

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Issues to Discuss:

- Funding
- ACA § 1557 Antidiscrimination Provision
- Preventive Wellness Services
- Summary of Benefits and Coverage Explanation
- Contingency Based on Status of the ACA Consumer Protections
- Date of Federal Regulations for Required Consistency of State Regulations