$\begin{array}{c} 4 lr 2888 \\ CF HB 728 \end{array}$

By: Senators Hayes and Lam

Introduced and read first time: January 30, 2024

Assigned to: Finance

A BILL ENTITLED

1	AN ACT concerning
2 3	Health Insurance – Qualified Resident Enrollment Program (Access to Care Act)
4	FOR the purpose of requiring the Maryland Health Benefit Exchange to establish and
5	implement the Qualified Resident Enrollment Program to facilitate the enrollment
6	of qualified residents in qualified plans; providing that the operation and
7	administration of the Program may include functions delegated by the Maryland
8	Exchange to a third party; providing that the implementation of the Program is
9	contingent on approval of a certain waiver application amendment; and generally
10	relating to the Qualified Resident Enrollment Program.
11	BY repealing and reenacting, without amendments,
12	Article – Insurance
13	Section 31–101(a) and 31–108(a)
14	Annotated Code of Maryland
15	(2017 Replacement Volume and 2023 Supplement)
16	BY adding to
17	Article – Insurance
18	Section 31–101(u-1), 31–123, and 31–124
19	Annotated Code of Maryland
20	(2017 Replacement Volume and 2023 Supplement)
21	BY repealing and reenacting, with amendments,
22	Article – Insurance
23	Section 31–107, 31–108(b)(1), and 31–115(b)(7)
24	Annotated Code of Maryland
25	(2017 Replacement Volume and 2023 Supplement)
26	SECTION 1. BE IT ENACTED BY THE GENERAL ASSEMBLY OF MARYLAND,

EXPLANATION: CAPITALS INDICATE MATTER ADDED TO EXISTING LAW.

[Brackets] indicate matter deleted from existing law.

That the Laws of Maryland read as follows:

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subtitle.

Article - Insurance 1 2 31–101. 3 In this subtitle the following words have the meanings indicated. (a) (U-1) "QUALIFIED RESIDENT" MEANS AN INDIVIDUAL, INCLUDING A MINOR, 4 REGARDLESS OF IMMIGRATION STATUS, WHO AT THE TIME OF ENROLLMENT: 5 6 **(1)** IS SEEKING TO ENROLL IN A QUALIFIED PLAN OFFERED TO 7 INDIVIDUALS THROUGH THE EXCHANGE; 8 **(2)** RESIDES IN THE STATE; 9 IS NOT INCARCERATED, OTHER THAN INCARCERATION PENDING **DISPOSITION OF CHARGES; AND** 10 **(4)** IS NOT ELIGIBLE FOR THE FEDERAL PREMIUM TAX CREDIT, THE 11 MARYLAND MEDICAL ASSISTANCE PROGRAM, MEDICARE, THE MARYLAND 12 CHILDREN'S HEALTH PLAN, OR EMPLOYER-SPONSORED MINIMUM ESSENTIAL 13 COVERAGE. 14 31-107.15 There is a Maryland Health Benefit Exchange Fund. 16 (a) (b) 17 (1) The purpose of the Fund is to: 18 provide funding for the operation and administration of the (i) Exchange in carrying out the purposes of the Exchange under this subtitle; 19 20 provide funding for the establishment and operation of the State (ii) Reinsurance Program authorized under this subtitle; 2122 provide funding for the Medical Assistance Program and the (iii) 23Senior Prescription Drug Assistance Program; 24provide funding for the establishment and operation of Health Equity Resource Communities under Title 20, Subtitle 14 of the Health – General Article; 2526 and 27 provide funding for the establishment and operation of the 28 State-Based Young Adult Health Insurance Subsidies Pilot Program authorized under this

- 1 (2)The operation and administration of the Exchange, the State 2 Reinsurance Program, [and] the State-Based Young Adult Health Insurance Subsidies 3 Pilot Program, AND THE QUALIFIED RESIDENT ENROLLMENT PROGRAM may include functions delegated by the Exchange to a third party under law or by contract. 4 The Exchange shall administer the Fund. 5 (c) 6 (d) (1) The Fund is a special, nonlapsing fund that is not subject to § 7–302 of the State Finance and Procurement Article. 7 8 The State Treasurer shall hold the Fund separately, and the (2)9 Comptroller shall account for the Fund. 10 The Fund consists of: (e) 11 (1) any user fees or other assessments collected by the Exchange; 12 (2) all revenue deposited into the Fund that is received from the distribution of the premium tax under § 6–103.2 of this article; 13 14 (3)income from investments made on behalf of the Fund; **(4)** interest on deposits or investments of money in the Fund; 15 16 money collected by the Board as a result of legal or other actions taken (5)17 by the Board on behalf of the Exchange or the Fund; 18 (6) money donated to the Fund; 19 (7)money awarded to the Fund through grants; 20any pass-through funds received from the federal government under a waiver approved under § 1332 of the Affordable Care Act; 2122 any funds designated by the federal government to provide reinsurance 23 to carriers that offer individual health benefit plans in the State; 24(10)any funds designated by the State to provide reinsurance to carriers 25that offer individual health benefit plans in the State:
- 28 (12) any federal funds received in accordance with § 31–121 of this subtitle 29 for the administration of small business tax credits; and

insurance subsidies to young adults in the State;

any funds designated by the State to provide State-based health

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- 1 (13)any other money from any other source accepted for the benefit of the 2 Fund. 3 (f) (1) The Fund may be used only: 4 for the operation and administration of the Exchange in (i) 1. carrying out the purposes authorized under this subtitle; 5 6 2. for the establishment and operation of the State 7 Reinsurance Program; and for appropriations to the Health Equity Resource 8 3. 9 Community Reserve Fund under § 20–1407 of the Health – General Article; 10 in fiscal years 2021 and 2022, for the Medical Assistance (ii) Program within the Medical Care Programs Administration of the Maryland Department 11 12 of Health; 13 in fiscal year 2022, for the Senior Prescription Drug Assistance (iii) Program established under Title 15, Subtitle 10 of the Health – General Article; and 14 15 (iv) for the establishment and operation of the State-Based Young Adult Health Insurance Subsidies Pilot Program. 16 17 (2)In each of fiscal years 2023 through 2025, the Governor shall: 18 (i) transfer \$15,000,000 to the Health Equity Resource Community 19 Reserve Fund; and 20 (ii) include the funds transferred in accordance with item (i) of this 21paragraph in the annual budget bill as an appropriation to the Health Equity Resource 22Community Reserve Fund under § 20–1407 of the Health – General Article. 23The Board shall maintain separate accounts within the Fund for (g) (1) Exchange operations, for the State Reinsurance Program, and for the State-Based Young 24Adult Health Insurance Subsidies Pilot Program. 2526 Accounts within the Fund shall contain the money that is intended to 27 support the purpose for which each account is designated. Funds received from the distribution of the premium tax under § 28 (3)
- 31 (4) The following funds may be used only for the purposes of funding the 32 State Reinsurance Program:

6-103.2 of this article shall be placed in the account for Exchange operations and may be

used only for the purpose of funding the operation and administration of the Exchange.

- 1 (i) any pass—through funds received from the federal government 2 under a waiver approved under § 1332 of the Affordable Care Act to provide reinsurance to 3 carriers that offer individual health benefit plans in the State;
- 4 (ii) any funds designated by the federal government to provide 5 reinsurance to carriers that offer individual health benefit plans in the State;
- 6 (iii) any funds designated by the State to provide reinsurance to 7 carriers that offer individual health benefit plans in the State; and
- 8 (iv) except as provided in subsection (f) of this section, funds received 9 from the distribution of the assessment under § 6–102.1 of this article.
- 10 (h) (1) Expenditures from the Fund for the purposes authorized by this 11 subtitle may be made only:
- 12 (i) with an appropriation from the Fund approved by the General 13 Assembly in the State budget; or
- 14 (ii) by the budget amendment procedure provided for in Title 7, 15 Subtitle 2 of the State Finance and Procurement Article.
- 16 (2) Notwithstanding § 7–304 of the State Finance and Procurement Article, 17 if the amount of the distribution from the premium tax under § 6–103.2 of this article 18 exceeds in any State fiscal year the actual expenditures incurred for the operation and 19 administration of the Exchange, funds in the Exchange operations account from the 20 premium tax that remain unspent at the end of the State fiscal year shall revert to the 21 General Fund of the State.
- 22 (3) If operating expenses of the Exchange may be charged to either State 23 or non–State fund sources, the non–State funds shall be charged before State funds are 24 charged.
- 25 (i) (1) The State Treasurer shall invest the money of the Fund in the same 26 manner as other State money may be invested.
- 27 (2) Any investment earnings of the Fund shall be credited to the Fund.
- 28 (3) Except as provided in subsection (h)(2) of this section, no part of the 29 Fund may revert or be credited to the General Fund or any special fund of the State.
- 30 (j) A debt or an obligation of the Fund is not a debt of the State or a pledge of 31 credit of the State.
- 32 31–108.

- 1 (a) On or before January 1, 2014, the functions and operations of the Exchange 2 shall include at a minimum all functions required by § 1311(d)(4) of the Affordable Care 3 Act.
- 4 (b) In compliance with § 1311(d)(4) of the Affordable Care Act, the Exchange 5 shall:
- 6 (1) make qualified plans available to qualified individuals, **QUALIFIED RESIDENTS**, and qualified employers;
- 8 31–115.
- 9 (b) To be certified as a qualified health plan, a health benefit plan shall:
- 10 (7) be in the interest of qualified individuals, **QUALIFIED RESIDENTS**, and qualified employers, as determined by the Exchange;
- 12 **31–123.**
- 13 (A) ON OR BEFORE JULY 1, 2025, THE EXCHANGE, IN CONSULTATION WITH
- 14 THE COMMISSIONER AND AS APPROVED BY THE BOARD, SHALL SUBMIT A STATE
- 15 INNOVATION WAIVER APPLICATION AMENDMENT UNDER § 1332 OF THE
- 16 AFFORDABLE CARE ACT TO ESTABLISH A QUALIFIED RESIDENT ENROLLMENT
- 17 PROGRAM AND SEEK FEDERAL PASS-THROUGH FUNDING RESULTING FROM THE
- 18 IMPLEMENTATION OF A QUALIFIED RESIDENT ENROLLMENT PROGRAM.
- 19 (B) ON OR BEFORE DECEMBER 31, 2025, THE COMMISSIONER MAY WAIVE
- 20 ANY NOTIFICATION OR OTHER REQUIREMENTS THAT APPLY TO A CARRIER UNDER
- 21 THIS ARTICLE IN CALENDAR YEAR 2025 DUE TO THE IMPLEMENTATION OF A WAIVER
- 22 APPROVED UNDER § 1332 OF THE AFFORDABLE CARE ACT.
- 23 **31–124.**
- 24 (A) THE EXCHANGE, IN CONSULTATION WITH THE COMMISSIONER AND AS
- 25 APPROVED BY THE BOARD, SHALL ESTABLISH AND IMPLEMENT A QUALIFIED
- 26 RESIDENT ENROLLMENT PROGRAM:
- 27 (1) TO FACILITATE THE ENROLLMENT OF QUALIFIED RESIDENTS IN
- 28 QUALIFIED PLANS;
- 29 (2) THAT, AS NECESSARY, MEETS THE REQUIREMENTS OF A WAIVER
- 30 APPROVED UNDER § 1332 OF THE AFFORDABLE CARE ACT; AND
- 31 (3) THAT IS CONSISTENT WITH FEDERAL AND STATE LAW.

- 1 (B) THE QUALIFIED RESIDENT ENROLLMENT PROGRAM SHALL BE 2 DESIGNED TO MAKE INDIVIDUAL MARKET INSURANCE COVERAGE OFFERED 3 THROUGH THE EXCHANGE AVAILABLE TO QUALIFIED RESIDENTS.
- 4 (C) (1) THE IMPLEMENTATION OF THE QUALIFIED RESIDENT 5 ENROLLMENT PROGRAM SHALL BE CONTINGENT ON APPROVAL FROM THE U.S. 6 SECRETARY OF HEALTH AND HUMAN SERVICES AND THE U.S. SECRETARY OF THE TREASURY OF A STATE INNOVATION WAIVER APPLICATION AMENDMENT UNDER § 1332 OF THE AFFORDABLE CARE ACT.
- 9 (2) WITHIN 6 MONTHS BEFORE A FISCAL YEAR IN WHICH THE
 10 EXCHANGE IMPLEMENTS THE QUALIFIED RESIDENT ENROLLMENT PROGRAM, THE
 11 EXCHANGE SHALL SUBMIT A REPORT TO THE GENERAL ASSEMBLY, IN ACCORDANCE
 12 WITH § 2–1257 OF THE STATE GOVERNMENT ARTICLE, ON ITS PLAN TO IMPLEMENT
 13 THE PROGRAM, INCLUDING:
- 14 (I) THE AMOUNT AND SOURCE OF THE FUNDING FOR THE 15 PROGRAM;
- 16 (II) THE PARAMETERS OF THE PROGRAM;
- 17 (III) THE NUMBER OF INDIVIDUALS ANTICIPATED TO BE 18 ASSISTED THROUGH THE PROGRAM; AND
- 19 (IV) IF THE EXCHANGE IS AUTHORIZED TO PROVIDE SUBSIDIES 20 UNDER THE PROGRAM, THE PARAMETERS OF THE SUBSIDIES.
- 21 (D) ON OR BEFORE JANUARY 1, 2026, THE EXCHANGE SHALL ADOPT 22 REGULATIONS TO CARRY OUT THIS SECTION.
- SECTION 2. AND BE IT FURTHER ENACTED, That this Act shall take effect October 1, 2024.