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Amend Senate File 2356, as amended, passed, and 2 reprinted by the Senate, as follows:

- 1. Page 1, by striking lines 2 through 17 and 4 inserting:
 - <IOWACARE PROGRAM AND OTHER HEALTH CARE OPTIONS>
- 2. Page 2, line 6, after <network.> by inserting 7 <In developing the phase-in plan the department shall 8 consult with the medical assistance projections and 9 assessment council created in section 249J.20. Any 10 plan developed shall be approved by the council prior 11 to implementation. The phase-in of the regional 12 provider network shall be implemented in a manner that 13 ensures that program expenditures do not exceed budget 14 neutrality limits and funded program capacity, and that 15 ensures compliance with the eligibility maintenance of 16 effort requirements of the federal American Recovery
- 3. Page 2, by striking lines 30 through 32 and 19 inserting <such hospital has reached service capacity, 20 the hospital and the>
 - 4. Page 4, by striking lines 7 through 16.
 - Page 5, after line 24 by inserting: 5.

17 and Reinvestment Act of 2009.>

- . IOWACARE POPULATION OPTIMIZATION <Sec. 24 OF SERVICE DELIVERY AND OUTCOMES. The publicly owned 25 acute care teaching hospital located in a county 26 with a population over three hundred fifty thousand, 27 the federally qualified health center located in 28 such county, and the university of Iowa hospitals 29 and clinics shall actively collaborate to optimize 30 effective and efficient delivery of services that 31 result in the best possible outcomes for IowaCare 32 members.>
- 6. By striking page 5, line 25, through page 13, 34 line 5, and inserting:

<DIVISION II</pre>

IOWA INSURANCE INFORMATION EXCHANGE . NEW SECTION. 505.32 Iowa insurance 38 information exchange.

- 1. Purpose. The purpose of this section is to 40 establish an information clearinghouse where all Iowans 41 can obtain information about health care coverage that 42 is available in this state including availability of 43 care delivered by safety-net providers and comparisons 44 of benefits, premiums, and out-of-pocket costs.
- 2. Definitions. As used in this section, unless 46 the context otherwise requires:
- "Carrier" means an insurer providing accident 48 and sickness insurance under chapter 509, 514, or 49 514A and includes a health maintenance organization 50 established under chapter 514B if payments received

- 1 by the health maintenance organization are considered 2 premiums pursuant to section 514B.31 and are taxed 3 under chapter 432. "Carrier" also includes a 4 corporation which becomes a mutual insurer pursuant 5 to section 514.23 and any other person as defined in 6 section 4.1, subsection 20, who is or may become liable 7 for the tax imposed by chapter 432.
- "Commissioner" means the commissioner of 8 b. 9 insurance.
- 10 "Creditable coverage" means the same as defined 11 in section 513B.2.
- "Exchange" means the Iowa insurance information 13 exchange.
- "Health insurance" means accident and sickness e. 15 insurance authorized by chapter 509, 514, or 514A.
- (1) "Health insurance coverage" means health 17 insurance coverage offered to individuals.
- (2) "Health insurance coverage" does not include any 19 of the following:
- 20 (a) Coverage for accident-only, or disability 21 income insurance.
- 22 (b) Coverage issued as a supplement to liability 23 insurance.
- (c) Liability insurance, including general 25 liability insurance and automobile liability insurance.
 - (d) Workers' compensation or similar insurance.
 - (e) Automobile medical-payment insurance.
 - (f) Credit-only insurance.

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- (g) Coverage for on-site medical clinic care.
- 30 (h) Other similar insurance coverage, specified in 31 federal regulations, under which benefits for medical 32 care are secondary or incidental to other insurance 33 coverage or benefits.
- (3) "Health insurance coverage" does not include 35 benefits provided under a separate policy as follows:
 - Limited-scope dental or vision benefits.
- (b) Benefits for long-term care, nursing home care, 37 38 home health care, or community-based care.
- (c) Any other similar limited benefits as provided 40 by rule of the commissioner.
- (4) "Health insurance coverage" does not include 41 42 benefits offered as independent noncoordinated benefits 43 as follows:
- (a) Coverage only for a specified disease or 45 illness.
- 46 (b) A hospital indemnity or other fixed indemnity 47 insurance.
- "Health insurance coverage" does not include 48 (5) 49 Medicare supplemental health insurance as defined under 50 section 1882(g)(1) of the federal Social Security Act,

- 1 coverage supplemental to the coverage provided under 2 10 U.S.C. ch. 55 and similar supplemental coverage 3 provided to coverage under group health insurance 4 coverage.
- 5 g. "Legislative health care coverage commission" or 6 "commission" means the legislative health care coverage 7 commission created in 2009 Iowa Acts, ch. 118, section 8 1.
- 9 h. "Medicare" means the federal government health 10 insurance program established under Tit. XVIII of the 11 federal Social Security Act.
- 12 *i.* "Organized delivery system" means an organized 13 delivery system as licensed by the director of public 14 health.
- 15 3. Iowa insurance information exchange 16 established. An Iowa insurance information exchange is 17 established in the insurance division of the department 18 of commerce under the authority of the commissioner of 19 insurance.
- 20 a. The commissioner, in collaboration with the 21 legislative health care coverage commission, shall 22 develop a plan of operation for the exchange within 23 one hundred eighty days from the effective date of 24 this section. The plan shall create an information 25 clearinghouse that provides resources where Iowans can 26 obtain information about health care coverage that is 27 available in the state.
- 28 b. The commissioner shall keep records of all 29 financial transactions related to the establishment 30 and operation of the exchange and shall deliver an 31 annual fiscal report of the costs of administering the 32 exchange to the general assembly by December 15 of each 33 year.
 - 4. Powers and duties of exchange.

- 35 a. The commissioner shall report on the status of the exchange at all regular meetings of the legislative 37 health care coverage commission, including progress in 38 developing and implementing the exchange operationally, 39 resources available through the exchange, information 40 about utilization of the resources offered by 41 the exchange, including demographic information 42 that illustrates how and by whom the exchange is 43 being utilized, and the costs of implementing and 44 operating the exchange. The commissioner may make 45 recommendations to the commission for including but not 16 limited to the following:
- 47 (1) Promotion of greater transparency in providing 48 quality data on health care providers and health care 49 coverage plans and in providing data on the cost of 50 medical care that is easily accessible to the public.

- (2) Statutory options that improve seamlessness in 2 the health care system in this state.
- (3) Funding opportunities to increase health care 4 coverage in the state, particularly for individuals who 5 have been denied access to health insurance coverage.
- The commissioner shall implement and maintain 7 information on the insurance division internet site 8 that is easily accessible and available to consumers 9 and purchasers of health insurance coverage regarding 10 each carrier licensed to do business in this state. 11 The information provided shall be understandable to 12 consumers and purchasers of health insurance coverage 13 and shall include but is not limited to information 14 regarding plan design, premium rate filings and 15 approvals, health care cost information, and any 16 other information specific to this state that the 17 commissioner determines may be beneficial to consumers 18 and purchasers of health insurance coverage. The 19 commissioner may contract with outside vendors and 20 entities to assist in providing this information on the 21 internet site.
- C. The exchange shall provide information about 23 all public and private health care coverage that is 24 available in this state including the cost to the 25 public, and comparisons of benefits, premiums, and 26 out-of-pocket costs.

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- (1) The commissioner may establish methodologies 28 to provide uniform and consistent side-by-side 29 comparisons of the health care coverage options that 30 are offered by carriers, organized delivery systems, 31 and public programs in this state including but not 32 limited to benefits covered and not covered, the 33 amount of coverage for each service, including copays 34 and deductibles, administrative costs, and any prior 35 authorization requirements for coverage.
- The commissioner may require each carrier, (2) 37 organized delivery system, and public program in this 38 state to describe each health care coverage option 39 offered by that carrier, organized delivery system, or 40 public program in a manner so that the various options 41 can be compared as provided in subparagraph (1).
- 42 The commissioner shall provide ongoing 43 information to taxpayers about the costs of public 44 health care programs to the state, including the 45 administrative costs of the programs and the percentage 46 and source of state and federal funding for the 47 programs, utilizing information provided by the 48 department of human services and the department of 49 public health.
 - The exchange may provide information to assist

- 1 Iowans with making an informed choice when selecting
 2 health care coverage.
- 3 f. The commissioner may utilize independent 4 consultants, as deemed necessary, to assist in carrying 5 out the powers and duties of the exchange.
- 6 g. The commissioner may periodically advertise 7 the general availability of health care coverage 8 information available from the exchange.
- 9 5. Rules. The commissioner shall adopt rules 10 pursuant to chapter 17A to implement the provisions of 11 this section.>
- 7. Title page, by striking lines 1 through 4 and inserting <An Act relating to the health care including 14 IowaCare program provisions and the creation of an Iowa insurance information exchange to promote transparency, 6 quality, seamlessness, and informed choices relative 17 to health care coverage.>
 - By renumbering as necessary.