Senate File 63 - Introduced

SENATE FILE 63

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A BILL FOR

- 1 An Act relating to a hawk-i program purchase option, and
- 2 including effective date and contingent implementation
- 3 provisions.
- 4 BE IT ENACTED BY THE GENERAL ASSEMBLY OF THE STATE OF IOWA:

1 Section 1. HAWK-I PROGRAM PURCHASE OPTION.

2 1. The director of the department of health and human
3 services shall seek necessary federal waiver authority to do
4 all of the following:

5 a. To establish a program that allows individuals who meet 6 either of the following conditions the option of purchasing 7 coverage through the hawk-i program rather than purchasing a 8 qualified health plan through the health insurance marketplace 9 established pursuant to the federal Patient Protection and 10 Affordable Care Act, or an individual health plan offered 11 outside of the health insurance marketplace:

12 (1) Individuals with incomes above the maximum income 13 eligibility limit pursuant to section 514I.8, who otherwise 14 meet the hawk-i program eligibility requirements pursuant to 15 section 514I.8 with the exception of age.

16 (2) Pregnant individuals who meet the age requirements for 17 the hawk-i program pursuant to section 514I.8, regardless of 18 whether the individual's family income meets the maximum income 19 eligibility limit pursuant to section 514I.8.

20 b. To allow individuals who qualify under paragraph "a" who 21 choose to purchase coverage through the hawk-i program to use 22 advanced tax credits and cost-sharing credits, if eligible, to 23 purchase this option.

c. To permit the hawk-i program purchase option to be offered through the health insurance marketplace as a coverage option and to be compared with qualified health plans offered through the health insurance marketplace.

d. Notwithstanding the eligibility criterion that a child must be less than nineteen years of age pursuant to paragraph "a", subparagraph (1), allow the hawk-i purchase option to be l offered to a child up to twenty-six years of age.

32 2. The director of health and human services shall 33 coordinate the administration of the hawk-i program with 34 the hawk-i program purchase option to maximize efficiencies 35 and improve the continuity of care for eligible children

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1 consistent with chapter 514I. The director shall implement 2 mechanisms to ensure the long-term financial sustainability of 3 the hawk-i program and mitigate any adverse financial impacts 4 to the health insurance marketplace. These mechanisms shall 5 address issues related to minimizing adverse selection, the 6 state financial risk and contribution, and negative impacts 7 to premiums in the individual and group insurance market both 8 inside and outside of the health insurance marketplace. At a 9 minimum, the hawk-i purchase option shall include all of the 10 following:

11 a. Establishment of an annual per enrollee premium rate 12 similar to the average rate paid by the state to managed care 13 plan contractors under the hawk-i program.

14 b. Establishment of a benefit set equal to the benefits 15 covered under the hawk-i program.

16 c. Establishment of annual open enrollment periods 17 consistent with those for the hawk-i program.

18 d. The ability of the director to adjust the purchase19 option's actuarial value to a value no lower than eighty-seven20 percent.

e. Reimbursement mechanisms to address potential reductionsin funding for health insurance marketplace operations.

23 f. Reimbursement mechanisms to address potential increased 24 costs to the hawk-i program.

3. The director of the department of health and human services in collaboration with the commissioner of insurance shall report to the chairpersons and ranking members of the health and human services committees and the joint appropriations subcommittee on health and human services by September 1, 2023, on the progress of the federal waivers and the results from actuarial and economic analyses that are necessary for a waiver proposal. The report shall also include recommendations regarding any statutory or administrative rule changes necessary to implement the program.

35 Sec. 2. EFFECTIVE DATE. This Act, being deemed of immediate

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1 importance, takes effect upon enactment.

2 Sec. 3. CONTINGENT IMPLEMENTATION. Implementation of any 3 waiver provision that requires a state financial contribution 4 shall be contingent on further legislative action to approve 5 the state's contribution.

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EXPLANATION

The inclusion of this explanation does not constitute agreement with the explanation's substance by the members of the general assembly.

9 This bill directs the director of health and human services 10 to seek necessary federal waiver authority to establish ll a program that allows individuals who meet either of two 12 criteria the option of purchasing coverage through the 13 hawk-i program. The two criteria are: individuals with 14 incomes above the maximum income eligibility limit under the 15 hawk-i program (currently 300 percent of the federal poverty 16 level), and who otherwise meet the hawk-i program eligibility 17 requirements (with the exception of the age limitation of 18 less than 19 years of age); or pregnant individuals who met 19 the age requirement (less than 19 years of age) regardless of 20 whether the individual's family income meets the maximum income 21 eligibility limit under the program. The option would also 22 allow individuals who qualify and choose to purchase coverage 23 through the hawk-i program to use advanced tax credits and 24 cost-sharing credits, if eligible, to purchase the option; to 25 permit the hawk-i program purchase option to be offered through 26 the health insurance marketplace as a coverage option and to be 27 compared with qualified health plans offered through the health 28 insurance marketplace; and notwithstanding the eligibility 29 criterion that a child must be less than 19 years of age under 30 the first specified criterion, allow the hawk-i purchase option 31 to be offered to a child up to 26 years of age.

32 The bill directs the director of health and human services 33 to coordinate the administration of the hawk-i program with 34 the hawk-i program purchase option to maximize efficiencies 35 and improve the continuity of care for eligible children; and

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1 to implement mechanisms to ensure the long-term financial 2 sustainability of the hawk-i program and mitigate any adverse 3 financial impacts to the health insurance marketplace. The 4 mechanisms are to address issues related to minimizing adverse 5 selection, the state financial risk and contribution, and 6 negative impacts to premiums in the individual and group 7 insurance market both inside and outside of the health 8 insurance marketplace.

9 At a minimum, the hawk-i purchase option must include: 10 establishment of an annual per enrollee premium rate similar 11 to the average rate paid by the state to managed care plan 12 contractors under the hawk-i program; establishment of a 13 benefit set equal to the benefits covered under the hawk-i 14 program; establishment of annual open enrollment periods 15 consistent with those for the hawk-i program; the ability 16 of the director of health and human services to adjust the 17 purchase option's actuarial value to a value no lower than 18 87 percent; reimbursement mechanisms to address potential 19 reductions in funding for health insurance marketplace 20 operations; and reimbursement mechanisms to address potential 21 increased costs to the hawk-i program.

The director of health and human services in collaboration with the commissioner of insurance shall report to the chairpersons and ranking members of the house and senate health and human services committees and the joint appropriations subcommittee on health and human services by September 1, 27 2023, on the progress of the federal waivers and the results from actuarial and economic analyses that are necessary for a waiver proposal. The report shall also include recommendations oregarding any statutory or administrative rule changes and necessary to implement the program.

32 The bill takes effect upon enactment. Implementation of any 33 waiver provision that requires a state financial contribution 34 is contingent on further legislative action to approve the 35 state's contribution.

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