

Iowa Legislature
State of Iowa
Eighty-Ninth General Assembly
STATEHOUSE
Des Moines, Iowa 50319

To: Members of the Health Insurance Mandate Review Committee
From: Representative Shannon Lundgren and Senator Jason Schultz, Co-Chairs
Date: October 28, 2021
Re: Preparation for the November 3, 2021, Committee Meeting

You have been selected as a member of the Health Insurance Mandate Review Committee. For your reference, a membership roster is attached.

The first committee meeting will be held Wednesday, November 3, in Room 103 of the State Capitol in Des Moines. The agenda for the meeting is attached. There will be a short lunch break; however, please note that vending machines are the sole food option available in the Capitol building.

The legislation (House File 838) requesting the establishment of the committee is attached. Also attached are the guidelines for interim committees and the proposed committee rules.

In preparation for the first meeting please review and come prepared to discuss the following:

1. The Committee's working definition of "mandate" which means health insurance coverage of any treatment or condition as required by Iowa law or rule, and that is not preempted by federal law.
2. Existing mandates: existing mandates that have been identified by caucus staff are attached. Please review and supplement the lists with any additional mandates contained in the 2021 Iowa Code.
3. Approximate number of Iowans covered under each type of insurance (individual health, small group health, large group health, the medical assistance program under Iowa Code chapter 249A, and the hawk-I program under Iowa Code chapter 514I).

For points 2 and 3 above please email the relevant information and documentation to: ben.gentz@legis.iowa.gov, bob.bird@legis.iowa.gov, kate.oconnor@legis.iowa.gov, and patty.funaro@legis.iowa.gov by 11:00 a.m. on Tuesday, November 2, 2021.

The second committee meeting is tentatively scheduled for December 8, 2021.

HEALTH INSURANCE MANDATE REVIEW COMMITTEE

MEMBERS

LEGISLATIVE MEMBERS

Senate Members

Sen. Jason Schultz
Sen. Sarah Trone Garriott

House Members

Rep. Shannon Lundgren
Rep. Lindsay James

EXECUTIVE BRANCH REPRESENTATIVES

Insurance Commissioner and Designee:

Doug Ommen
Insurance Commissioner

Angela Burke Boston
Senior Policy Advisor

Director of Department of Human Services Designee:

Liz Matney
Medicaid Director
Department of Human Services

Consumer Advocate, Insurance Division

Sonya Sellmeyer
Consumer Advocacy Officer

PUBLIC MEMBERS

Independent Insurance Agent Representatives

Jeanna Gutierrez, CLMS
Vice President-Client Service, EB/Shareholder
Holmes Murphy

Dave Shutt
Chief Strategy Officer
Group Benefits, Ltd.

Marcie Strouse
Partner, Capitol Benefits Group
Government Relations, Iowa Association of Health Underwriters

Jackson Webster
Producer
Benefit Source, Inc.

Health Insurance Business Representatives

Stacie Maass
Vice President
Legislative and Government Affairs
Iowa Total Care

Matt McKinney
Counsel
Federation of Iowa Insurers

Scott Sundstrom
Vice President
Government Relations and Communications
Wellmark Blue Cross Blue Shield

STUDY COMMITTEE — HEALTH INSURANCE MANDATES

Sec. 52. HEALTH INSURANCE MANDATES — STUDY.

1. The legislative council is requested to establish a study committee to meet during the 2021 legislative interim to accomplish the following:

a. Identify each health insurance mandate contained in chapter 514C, and in any other provision of the 2021 Iowa Code, and identify all of the following:

(1) The specific health insurance coverage required to be provided by each health insurance mandate.

(2) Each class of contract, policy, plan, and agreement that provides for third-party payment or prepayment of health or medical expenses that is subject to each health insurance mandate.

(3) Each class of contract, policy, plan, and agreement that provides for third-party payment or prepayment of health or medical expenses that is excluded from each health insurance mandate.

(4) Each type of health carrier that is subject to each health insurance mandate. For purposes of this section, "health carrier" means an entity subject to the insurance laws and regulations of this state, or subject to the jurisdiction

of the insurance commissioner, including an insurance company offering sickness and accident plans, a health maintenance organization, a nonprofit health service corporation, a plan established pursuant to chapter 509A for public employees, or any other entity providing a plan of health insurance, health care benefits, or health care services. "Health carrier" includes the department of human services, or a managed care organization acting pursuant to a contract with the department of human services to administer the medical assistance program under chapter 249A or the healthy and well kids in Iowa (hawk-i) program under chapter 514I.

(5) Each type of health carrier that is excluded from each health insurance mandate.

b. For each health insurance mandate identified in paragraph "a", analyze all of the following:

(1) The fiscal impact to the state.

(2) The fiscal impact to each health carrier subject to each health insurance mandate.

(3) The impact to the premiums for individuals covered by a contract, policy, plan, or agreement of a health carrier under subparagraph (2).

c. For a possible future health insurance mandate related to continuity of care and nonmedical switching, analyze all of the following:

(1) The potential fiscal impact to the state.

(2) The potential fiscal impact to each health carrier that may be subject to the health insurance mandate.

(3) The potential impact to the premiums for individuals covered by a contract, policy, plan, or agreement of a health carrier under subparagraph (2).

d. For a possible future health insurance mandate related to the diagnosis and treatment of infertility, analyze all of the following:

(1) The potential fiscal impact to the state.

(2) The potential fiscal impact to each health carrier that may be subject to the health insurance mandate.

(3) The potential impact to the premiums for individuals covered by a contract, policy, plan, or agreement of a health carrier under subparagraph (2).

e. For a possible future health insurance mandate related to pediatric acute-onset neuropsychiatric syndrome (PANS) and pediatric autoimmune neuropsychiatric disorders associated with streptococcal infections (PANDAS), analyze all of the following:

- (1) The potential fiscal impact to the state.
- (2) The potential fiscal impact to each health carrier that may be subject to the health insurance mandate.
- (3) The potential impact to the premiums for individuals covered by a contract, policy, plan, or agreement of a health carrier under subparagraph (2).

f. For a possible future health insurance mandate related to medically necessary food and low protein modified food product for individuals with certain inherited metabolic disorders, analyze all of the following:

- (1) The potential fiscal impact to the state.
- (2) The potential fiscal impact to each health carrier that may be subject to the health insurance mandate.
- (3) The potential impact to the premiums for individuals covered by a contract, policy, plan, or agreement of a health carrier under subparagraph (2).

g. Identify the approximate number of Iowa residents that are covered by each of the following types of insurance:

- (1) Individual health insurance.
- (2) Small group health insurance.
- (3) Large group health insurance.
- (4) The medical assistance program under chapter 249A.
- (5) The healthy and well kids in Iowa (hawk-i) program under chapter 514I.

2. The study committee shall have no more than fifteen members and shall be composed of the following members:

a. Two members of the senate, one to be appointed by the president of the senate and one to be appointed by the minority leader of the senate.

b. Two members of the house of representatives, one to be appointed by the speaker of the house of representatives and one to be appointed by the minority leader of the house of representatives.

c. The director of the insurance division of the department of commerce, or the director's designee.

d. The director of the department of human services, or the director's designee.

e. The consumer advocate of the consumer advocate bureau of the insurance division of the department of commerce, or the consumer advocate's designee.

f. At least one representative from each of the following:

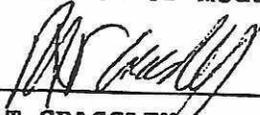
(1) One or more trade organizations based in Iowa whose membership is comprised of independent insurance agents that sell health insurance.

(2) One or more health insurance trade organizations based in Iowa whose membership is comprised of companies or individuals engaged in the business of health insurance.

3. The study committee shall submit a report with its findings to the general assembly no later than December 31, 2021. The report shall not directly or indirectly disclose any of the following:

a. The identity of a specific health carrier.

b. The identity of a specific contract, policy, plan, or agreement that provides for third-party payment or prepayment of health or medical expenses.

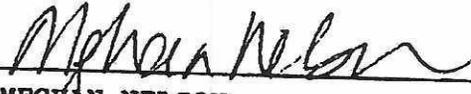


PAT GRASSLEY
Speaker of the House



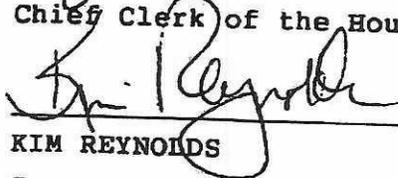
JAKE CHAPMAN
President of the Senate

I hereby certify that this bill originated in the House and is known as House File 838, Eighty-ninth General Assembly.



MEGHAN NELSON
Chief Clerk of the House

Approved June 16, 2021



KIM REYNOLDS
Governor

CHAPTER 514C

SPECIAL HEALTH AND ACCIDENT INSURANCE COVERAGES

Referred to in §87.4, 296.7, 331.301, 364.4, 505.28, 505.29, 507A.4, 669.14, 670.7

514C.1	Supplemental coverage for adopted or newly born children.	514C.19	Prescription contraceptive coverage.
514C.2	Skilled nursing care covered in hospitals.	514C.20	Mandated coverage for dental care — anesthesia and certain hospital charges.
514C.3	Dentist's services under accident and sickness insurance policies.	514C.21	Coverage for immunizations — mercury.
514C.3A	Disclosures relating to dental coverage reimbursement rates.	514C.22	Biologically based mental illness coverage.
514C.3B	Dental coverage — fee schedules.	514C.23	Human papilloma virus vaccinations — coverage.
514C.4	Mandated coverage for mammography.	514C.24	Cancer treatment — coverage.
514C.5	Prescription drug benefit restrictions.	514C.25	Coverage for prosthetic devices.
514C.6	Uniformity of treatment — employee welfare benefit plans.	514C.26	Approved cancer clinical trials coverage.
514C.7	Prohibition on restricting coverage in certain instances involving a diagnosis of a fibrocystic condition.	514C.27	Mental illness and substance abuse treatment coverage for veterans.
514C.8	Coordination of health care benefits with state medical assistance.	514C.28	Autism spectrum disorders coverage.
514C.9	Medical support — insurance requirements.	514C.29	Services provided by a doctor of chiropractic.
514C.10	Coverage for adopted child.	514C.30	Services provided by a physical therapist, occupational therapist, or speech pathologist.
514C.11	Services provided by licensed physician assistants and licensed advanced registered nurse practitioners.	514C.31	Applied behavior analysis for treatment of autism spectrum disorder — coverage.
514C.12	Postdelivery benefits and care.	514C.32	Services provided by certain licensed master social workers, licensed mental health counselors, and licensed marital and family therapists.
514C.13	Group managed care health plans — requirements attached to limited provider network plan offers.	514C.33	Services provided by provisionally licensed psychologists.
514C.14	Continuity of care — pregnancy.	514C.34	Health care services delivered by telehealth — coverage.
514C.15	Treatment options.	514C.35	Behavioral health services provided in a school — coverage.
514C.16	Emergency room services.		
514C.17	Continuity of care — terminal illness.		
514C.18	Diabetes coverage.		

514C.1 Supplemental coverage for adopted or newly born children.

1. Any policy of individual or group accident and sickness insurance providing coverage on an expense incurred basis, and any individual or group hospital or medical service contracts issued pursuant to chapters 509, 514, and 514A, which provide coverage for a family member of the insured or subscriber shall also provide that the health insurance benefits applicable for children shall, subject to the enrollment requirements of this section, be payable with respect to a newly born child of the insured or subscriber from the moment of birth, or, in the situation of a newly adopted child of a covered person, such child shall be covered from the earlier of any of the following:

a. The date of placement of the child for the purpose of adoption and continuing in the same manner as for other dependents of the covered person, unless the placement is disrupted prior to legal adoption and the child is removed from placement.

b. The date of entry of an order granting the covered person custody of the child for purposes of adoption.

IOWA – STATE REQUIRED BENEFITS

A Name of Required Benefit	B Market Applicability	C Year of Enactment	D Citation Number
Emergency room services	Individual, small group, large group	Before 2012	Iowa Code 514C.16
Coverage of skilled nursing care in hospitals	Individual, small group, large group	Before 2012	Iowa Code 514C.2
Post-delivery benefits and care	Individual, small group, large group	Before 2012	Iowa Code 514C.12
Biologically based mental illness coverage	Individual, small group, and large group (50 or more people)	Before 2012	Iowa Code 514C.22
Mental illness and substance abuse treatment for veterans	Large group (50 or more people) or small group that covers mental illness or substance abuse	Before 2012	Iowa Code 514C.27
Coverage for prosthetic devices	Individual, small group, large group	Before 2012	Iowa Code 514C.25
Mammography coverage	Individual, small group, large group	Before 2012	Iowa Code 514C.4
Coverage of Human Papilloma Virus (HPV) Vaccinations	Individual, small group, large group	Before 2012	Iowa Code 514C.23
Prescription contraceptives	Individual, small group, large group	Before 2012	Iowa Code 514C.19
Reconstructive surgery	Individual, small group, large group	Before 2012	Iowa Administrative Code 191-35.35
Cancer clinical trials coverage	Individual, small group, large group	Before 2012	Iowa Code 514C.26
Diabetes coverage	Individual, small group, large group	Before 2012	Iowa Code 514C.18
Dental care coverage for anesthesia and certain hospital charges	Individual, small group, large group	Before 2012	Iowa Code 514C.20
Oral cancer medication	Individual, small group, large group	Before 2012	Iowa Code 514C.24
Autism spectrum disorders	Large and small group plans covering mental illness or substance abuse	Before 2012	Iowa Code 514C.22