[First Reprint]

ASSEMBLY COMMITTEE SUBSTITUTE FOR ASSEMBLY, No. 5499

STATE OF NEW JERSEY 218th LEGISLATURE

ADOPTED JUNE 6, 2019

Sponsored by: Assemblyman HERB CONAWAY, JR. District 7 (Burlington) Assemblyman JOHN F. MCKEON District 27 (Essex and Morris) Assemblywoman NANCY J. PINKIN District 18 (Middlesex) Senator NELLIE POU District 35 (Bergen and Passaic) Senator NIA H. GILL District 34 (Essex and Passaic) Senator JOSEPH F. VITALE District 19 (Middlesex) Senator VIN GOPAL District 11 (Monmouth)

Co-Sponsored by: Assemblyman Caputo, Assemblywomen Lampitt, Vainieri Huttle and Assemblyman Benson

SYNOPSIS

Authorizes DOBI to establish State-based exchange for certain health insurance plans and coordinate with Department of Human Services.

CURRENT VERSION OF TEXT

As reported by the Assembly Appropriations Committee on June 13, 2019, with amendments.

(Sponsorship Updated As Of: 6/28/2019)

AN ACT concerning health insurance and supplementing Title 17B
 of the New Jersey Statutes.

3 4

BE IT ENACTED by the Senate and General Assembly of the State of New Jersey:

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7 1. a. There is established in the Department of the Treasury a 8 nonlapsing revolving fund to be known as the "Health Insurance 9 Exchange Trust Fund." This fund shall be the repository for monies 10 collected pursuant to subsection c. of this section, any federal financial participation available, and other monies received as 11 12 grants or otherwise appropriated for the purposes of supporting health insurance outreach and enrollment efforts through an 13 14 exchange. The monies in the fund shall be used only for the 15 purpose of supporting the exchange through initial start-up costs associated with establishment of the exchange, exchange 16 17 operations, outreach, enrollment, and other means of supporting the exchange¹, including any efforts that can increase market 18 19 stabilization and that may result in a net benefit to policyholders¹.

The State Treasurer shall be the custodian of the fund and all 20 b. 21 disbursements from the fund shall be made by the State Treasurer 22 upon vouchers signed by the Commissioner of Banking and 23 Insurance. The monies in the fund shall be invested and reinvested 24 by the Director of the Division of Investment in the Department of 25 the Treasury to the same extent that other trust funds that are in the custody of the State Treasurer are invested and reinvested, in the 26 27 manner provided by law. Interest received on the monies in the 28 fund shall be credited to the fund.

29 c. The commissioner may apply a monthly assessment to each ¹individual¹ health benefits plan ¹[offered by a carrier] sold in the 30 individual market¹. The assessment shall be paid by the carrier and 31 32 deposited into the fund and shall be used only for the purpose of 33 supporting the exchange through initial start-up costs associated 34 with establishment of the exchange, exchange operations, outreach, 35 enrollment, and other means of supporting the exchange¹, including 36 any efforts that can increase market stabilization and that may result in a net benefit to policyholders¹. The assessment may be applied 37 38 at a rate of:

39 (1) .5 percent of the total monthly premium charged by a carrier
40 for each health benefits plan during any period that the State is on a
41 federally-facilitated exchange;

42 (2) 1 percent of the total monthly premium charged by a carrier
43 for each health benefits plan during any period that the State is on a
44 State-based exchange using the federal platform; or

EXPLANATION – Matter enclosed in **bold-faced brackets** [thus] in the above bill is not enacted and is intended to be omitted in the law.

Matter underlined <u>thus</u> is new matter.

Matter enclosed in superscript numerals has been adopted as follows: ¹Assembly AAP committee amendments adopted June 13, 2019.

(3) 3.5 percent of the total monthly premium charged by a 1 2 carrier for each health benefits plan during any period that the State 3 is on a State-based exchange. The commissioner shall have the 4 discretion to adjust this rate to ensure that the State-based exchange 5 is fully funded, but in no case shall the assessment be applied at a rate that exceeds 1 [5] $\underline{4}^{1}$ percent of the total monthly premium 6 ¹If the commissioner determines it is charged by a carrier. 7 8 necessary to adjust the rate above 3.5 percent pursuant to this 9 paragraph, the commissioner shall, in advance of the adjustment, 10 post on the department's website a report describing the reasons and justifications for the adjustment, which shall be consistent with the 11 12 purposes of supporting the exchange as provided in this section.¹

¹[Beginning on January 1,] <u>After the</u>¹ 2020 ¹<u>plan year</u>¹, the 13 commissioner shall 1 [provide] <u>notify</u> a carrier 1 [with adequate 14 notice]¹ of its assessment rate for the subsequent year ¹[to allow] 15 at least 20 days prior to the date¹ the carrier ¹ [to adjust] is required 16 to file¹ its rate filing ¹ [based on the assessment rate] with the 17 department¹. ¹In the case of an assessment for the 2020 plan year, 18 the commissioner shall notify carriers as soon as is practicable of 19 20 the assessment amount.¹

d. Any unexpended balance in the fund at the end of a year
shall be available for expenditure by the commissioner in the
subsequent year. The commissioner shall consider any unexpended
balance from a previous year when calculating the assessment
pursuant to subsection c. of this section.

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27 2. a. Notwithstanding any other law to the contrary, the 28 Department of Banking and Insurance shall have the authority to 29 operate a State-based exchange and coordinate the operations of the 30 exchange with the operations of the New Jersey Individual Health 31 Coverage Program and the New Jersey Small Employer Health 32 Benefits Program, including reorganization of the boards, as the 33 commissioner deems appropriate. The department's authority to 34 regulate the insurance market shall be separate and distinct from the 35 department's duty to oversee exchange operations, to ensure the 36 best interests of and protection for consumers of the State. ¹<u>The</u> 37 commissioner may require that all plans in the individual and small 38 employer markets be made available for comparison on the State-39 based exchange, but nothing in this section shall allow the 40 commissioner to require all plans in the individual and small 41 employer markets to be purchased exclusively on the State-based 42 The department shall also have the authority to exchange.¹ coordinate the operations of the exchange with the operations of the 43 44 State Medicaid program established pursuant to P.L.1968, c.413 45 (C.30:4D-1 et seq.) and the NJ FamilyCare Program established 46 pursuant to P.L.2005, c.156 (C.30:4J-8 et al.).

b. The Commissioner of Banking and Insurance shall, in 1 2 consultation with the Commissioner of Human Services, examine 3 whether federal financial participation is available for the exchange 4 as a State administrative expenditure necessary for the proper and efficient administration of the State Medicaid plan. If the 5 commissioner, in consultation with the Commissioner of Human 6 7 Services, finds that federal financial participation is available and 8 practicable, the commissioners shall, in consultation with one 9 another, secure the maximum federal financial participation 10 available.

c. The Commissioner of Banking and Insurance shall have the
authority to require that plans offered on the exchange conform
with standardized plan designs that provide for standardized costsharing for covered health services.

¹d. The Commissioner of Banking and Insurance shall establish
 an advisory committee to provide advice to the commissioner
 concerning the operation of the exchange. The advisory committee
 shall include at least nine members, as follows:

19 (1) The Commissioner of Banking and Insurance, or a designee,
 20 who shall serve ex-officio;

(2) The Commissioner of Human Services, or a designee, who
 shall serve ex-officio;

23 (3) the Commissioner of Health, or a designee, who shall serve
 24 <u>ex-officio; and</u>

25 (4) six public members, who shall be residents of the State, 26 appointed by the Commissioner of Banking and Insurance. Each 27 public member shall have demonstrated experience in one or more 28 of the following areas: health insurance consumer advocacy; 29 individual health insurance coverage; small employer health 30 insurance coverage; health benefits plan marketing; the provision of 31 health care services; or academic or professional research relating 32 to health insurance.¹

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34 3. a. The Commissioner of Banking and Insurance shall present a report to the Governor, and to the Legislature pursuant to 35 36 section 2 of P.L.1991, c.164 (C.52:14-19.1), no later than June 1, 37 2022, which contains the commissioner's findings and 38 recommendations, including such recommendations for 39 administrative or legislative action as the commissioner deems 40 appropriate, and the status of any decisions or efforts pursuant to 41 subsection a. of section 2 of this act to coordinate the operations of 42 the exchange with:

(1) the New Jersey Individual Health Coverage Program
established pursuant to P.L.1992, c.161 (C.17B:27A-2 et seq.) and
the New Jersey Small Employer Health Benefits Program
established pursuant to P.L.1992, c.162 (C.17B:27A-17 et seq.);
and

1 (2) the operations of the State Medicaid and NJ FamilyCare 2 programs.

3 b. The Commissioner of Banking and Insurance and the 4 Commissioner of Human Services shall present a report to the 5 Governor, and to the Legislature pursuant to section 2 of P.L.1991, c.164 (C.52:14-19.1), no later than June 1, 2022, which contains an 6 7 evaluation of the actions of those departments in securing federal 8 financial participation pursuant to subsection b. of section 2 of this 9 act, including details on any grants or federal funding matches 10 which were evaluated, any applications for grants or funding that 11 were made, any applications that were denied, and any funding that was or may be received. 12

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4. The Department of Banking and Insurance shall adopt rules
and regulations pursuant to the "Administrative Procedure Act,"
P.L.1968, c.410 (C.52:14B-1 et seq.), to effectuate the purposes of
this act.

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19 5. This act shall take effect on January 1, 2020, except the
20 commissioner may take any anticipatory administrative action in
21 advance as shall be necessary for the implementation of this act.