65th Legislature

1	HOUSE BILL NO. 652		
2	INTRODUCED BY R. COOK		
3	BY REQUEST OF THE STATE AUDITOR		
4			
5	A BILL FOR AN ACT ENTITLED: "AN ACT GENERALLY REVISING HEALTH CARE AND INSURANCI		
6	COVERAGE LAWS; AUTHORIZING APPLICATION FOR STATE INNOVATION WAIVERS; AUTHORIZING		
7	DEVELOPMENT OF PROGRAMS TO ENSURE AFFORDABLE CARE AND COVERAGE FOR HIGH-RISK		
8	INDIVIDUALS; PROVIDING RULEMAKING AUTHORITY; PROVIDING AN APPROPRIATION; AND PROVIDING		
9	EFFECTIVE DATES AND A TERMINATION DATE."		
10			
11	WHEREAS, Congress is considering legislation that could significantly change the health insurance		
12	market nationally and in Montana in the coming months; and		
13	WHEREAS, Montana needs to preserve its flexibility to respond to federal efforts in a timely manner in		
14	order to preserve and improve the Montana health insurance market and provide Montanans with access to		
15	health care and insurance coverage.		
16			
16 17	BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF MONTANA:		
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17	BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF MONTANA: <u>NEW SECTION.</u> Section 1. Legislative intent. It is the intent of the legislature that the state and		
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requirements in a manner consistent with state and federal law and as approved by the United States department 1 2 of health and human services. 3 (2) The department of public health and human services may seek federal authorization through a waiver 4 authorized by 42 U.S.C. 1315 and through other waivers or through other means, as may be necessary, to 5 implement a state plan established under this section. 6 7 NEW SECTION. Section 3. Duties and authority of commissioner. (1) The commissioner shall 8 develop a plan or program to meet the legislative intent of [sections 1 through 5] and report the development of 9 the plan or program to legislative committees as requested. 10 (2) The commissioner may apply for federal funds available for the purpose of providing health care and 11 insurance coverage to residents of this state. The funds must be deposited in the Montana comprehensive health 12 insurance special revenue account provided for in [section 4]. 13 (3) The commissioner may enter into any contract or agreement that the commissioner considers 14 appropriate to carry out the purposes of [sections 1 through 5], including but not limited to a contract or agreement 15 with: 16 (a) a similar insurance fund or risk pool in another state for the joint performance of common 17 administrative functions; 18 (b) another organization for the performance of administrative functions; 19 (c) a stop-loss insurance provider to insure against risks incurred under [sections 1 through 5]; or 20 (d) a federal agency. 21 22 NEW SECTION. Section 4. Montana comprehensive health insurance special revenue accounts. 23 (1) There are Montana comprehensive health insurance accounts in the state and federal special revenue funds 24 to the credit of the department to assist residents of this state with obtaining access to quality health care at a 25 minimum cost to the public. 26 (2) The account in the federal special revenue fund consists of federal funds obtained for the purposes 27 of a high-risk insurance program, reinsurance program, or other effort funded through a state innovation grant 28 or other federally approved program related to making health care and insurance coverage more affordable and 29 obtainable. 30 (3) The account in the state special revenue fund consists of money appropriated by the legislature or

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1	1 obtained from other sources.	obtained from other sources.		
2	2 (4) Interest and earnings on the accounts must ac	(4) Interest and earnings on the accounts must accrue to the accounts.		
3	3 (5) Money in the accounts:	(5) Money in the accounts:		
4	(a) must be used for the purposes designated in the federal grant or by the legislature, consistent wit			
5	the intent of [sections 1 through 5]; and			
6	(b) may be used to develop and disseminate information to the public about programs develope			
7	pursuant to [sections 1 through 5] and to facilitate enrollment strategies for the programs.			
8	8			
9	9 <u>NEW SECTION.</u> Section 5. Rulemaking authori	y. The commissioner shall adopt rules regarding the		
10	implementation of [sections 1 through 5], including but not limited to rules related to:			
11	11 (1) eligibility requirements for any plan or program	established pursuant to [sections 1 through 5]; and		
12	12 (2) participation by insurers in programs establish	ed pursuant to [sections 1 through 5].		
13	13			
14	<u>NEW SECTION.</u> Section 6. Appropriation. There is appropriated \$200,000 from the general fund to			
15	the Montana comprehensive health insurance state special revenue account provided for in [section 4] for the			
16	biennium beginning July 1, 2017, for the purpose of obtaining any necessary verification or validation of a waiver			
17	application submitted pursuant to [section 2], including any necessary actuarial analysis to support a waive			
18	application.			
19	19			
20	20 NEW SECTION. Section 6. Implementation. Th	NEW SECTION. Section 6. IMPLEMENTATION. THE STATE AUDITOR'S OFFICE SHALL IMPLEMENT [THIS ACT		
21	WITHIN EXISTING RESOURCES.			
22	22			
23	NEW SECTION. Section 7. Codification instruction. [Sections 1 through 5] are intended to be codified			
24	as an integral part of Title 33, chapter 22, and the provisions of Title 33 apply to [sections 1 through 5].			
25	25			
26	NEW SECTION. Section 8. Effective dates. (1) Except as provided in subsection (2), [this act] is			
27	effective on passage and approval.			
28	(2) [Section 6] is effective July 1, 2017.			
29	29			
30	NEW SECTION. Section 9. Termination. [This ACT] TERMINATES JUNE 30, 2023.			
31	31 - END			
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