

HOUSE BILL 135

C3

EMERGENCY BILL

8lr1380
CF SB 137

By: ~~Delegates Hill and Kipke~~, Kipke, Pendergrass, Bromwell, Angel, Barron, Cullison, Hayes, Kelly, Krebs, McDonough, Metzgar, Miele, Morales, Morgan, Pena-Melnyk, Platt, Rosenberg, Saab, Sample-Hughes, Szeliga, West, and K. Young

Introduced and read first time: January 15, 2018

Assigned to: Health and Government Operations

Committee Report: Favorable with amendments

House action: Adopted

Read second time: March 7, 2018

CHAPTER _____

1 AN ACT concerning

2 **Health Insurance – Coverage for Male Sterilization – High-Deductible Health**
3 **Plans**

4 FOR the purpose of exempting a high-deductible health plan from the prohibition on
5 application of a deductible to coverage for male sterilization; providing for the
6 application of this Act; requiring the Maryland Insurance Commissioner to forward
7 a certain notice to the Department of Legislative Services within a certain time
8 period under certain circumstances; providing for the termination of this Act under
9 certain circumstances; making this Act an emergency measure; and generally
10 relating to coverage for male sterilization under health insurance.

11 BY repealing and reenacting, with amendments,
12 Article – Insurance
13 Section 15–826.2
14 Annotated Code of Maryland
15 (2017 Replacement Volume)

16 SECTION 1. BE IT ENACTED BY THE GENERAL ASSEMBLY OF MARYLAND,
17 That the Laws of Maryland read as follows:

18 **Article – Insurance**

EXPLANATION: CAPITALS INDICATE MATTER ADDED TO EXISTING LAW.

[Brackets] indicate matter deleted from existing law.

Underlining indicates amendments to bill.

~~Strike out~~ indicates matter stricken from the bill by amendment or deleted from the law by amendment.



15-826.2.

(a) (1) In this subsection, “group” means a group that is not a group covered under a health insurance policy or contract or under a health maintenance organization contract issued or delivered to a small employer, as defined in § 31-101 of this article.

(2) This subsection applies to:

(i) insurers and nonprofit health service plans that provide hospital, medical, or surgical benefits to groups on an expense-incurred basis under health insurance policies or contracts that are issued or delivered in the State; and

(ii) health maintenance organizations that provide hospital, medical, or surgical benefits to groups under contracts that are issued or delivered in the State.

(3) This subsection does not apply to an organization that requests and receives an exclusion from coverage under § 15-826(c) of this subtitle.

(4) An entity subject to this subsection shall provide coverage for male sterilization.

(b) (1) This subsection applies to:

(i) insurers and nonprofit health service plans that provide coverage for male sterilization under individual, group, or blanket health insurance policies or contracts that are issued or delivered in the State; and

(ii) health maintenance organizations that provide coverage for male sterilization under individual or group contracts that are issued or delivered in the State.

(2) Except **AS PROVIDED IN PARAGRAPH (3) OF THIS SUBSECTION AND EXCEPT** with respect to a health benefit plan that is a grandfathered health plan, as defined in § 1251 of the Affordable Care Act, an entity subject to this subsection may not apply a copayment, coinsurance requirement, or deductible to coverage for male sterilization.

(3) IF AN INSURED OR ENROLLEE IS COVERED UNDER A HIGH-DEDUCTIBLE HEALTH PLAN, AS DEFINED IN ~~26 U.S.C. § 223~~ 26 U.S.C. § 223, AN ENTITY SUBJECT TO THIS SUBSECTION MAY SUBJECT MALE STERILIZATION TO THE DEDUCTIBLE REQUIREMENT OF THE HIGH-DEDUCTIBLE HEALTH PLAN.

SECTION 2. AND BE IT FURTHER ENACTED, That this Act shall ~~be construed to~~ apply ~~retroactively and shall be applied to and interpreted to affect~~ to all policies, contracts, and health benefit plans issued, delivered, amended, or renewed in the State on or after ~~January 1, 2018~~ the effective date of this Act.

1 SECTION 3. AND BE IT FURTHER ENACTED, That:

2 (a) This Act shall remain effective until the United States Secretary of the
3 Treasury or other United States Treasury official determines that a high-deductible health
4 plan that meets the coverage requirements relating to male sterilization under § 15-826.2
5 of the Insurance Article meets the qualifications for health savings account-qualified
6 high-deductible health plans under the safe harbor provisions for “preventive care” under
7 § 223(c)(2)(C) of the Internal Revenue Code.

8 (b) If the United States Secretary of the Treasury or other United States Treasury
9 official makes the determination described in subsection (a) of this section, this Act, with
10 no further action required by the General Assembly, shall be abrogated and of no further
11 force and effect.

12 (c) If the Maryland Insurance Commissioner receives notice of the determination
13 described in subsection (a) of this section, the Commissioner shall, within 5 days after
14 receiving notice of the determination, forward a copy of the notice to the Department of
15 Legislative Services, 90 State Circle, Annapolis, Maryland 21401.

16 SECTION ~~3~~ 4. AND BE IT FURTHER ENACTED, That this Act is an emergency
17 measure, is necessary for the immediate preservation of the public health or safety, has
18 been passed by a yea and nay vote supported by three-fifths of all the members elected to
19 each of the two Houses of the General Assembly, and shall take effect from the date it is
20 enacted.

Approved:

Governor.

Speaker of the House of Delegates.

President of the Senate.