

HOUSE BILL 135

C3

EMERGENCY BILL

8lr1380
CF SB 137

By: **Delegates Hill and Kipke**

Introduced and read first time: January 15, 2018

Assigned to: Health and Government Operations

A BILL ENTITLED

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; making this Act an emergency measure; and generally
7 relating to coverage for male sterilization under health insurance.

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

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

15 **Article – Insurance**

16 15–826.2.

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

20 (2) This subsection applies to:

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

EXPLANATION: CAPITALS INDICATE MATTER ADDED TO EXISTING LAW.

[Brackets] indicate matter deleted from existing law.



(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. § 233, 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 all policies, contracts, and health benefit plans issued, delivered, or renewed in the State on or after January 1, 2018.

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