

HOUSE BILL 909

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CF SB 571

By: Delegates Pena–Melnik, Anderson, Angel, Arentz, Atterbeary, Aumann, Barkley, B. Barnes, D. Barnes, Barron, Barve, Beidle, Branch, Bromwell, Brooks, Busch, Carey, Carr, Chang, Clippinger, Conaway, Cullison, Davis, Dumais, Ebersole, Fennell, Fraser–Hidalgo, Frick, Frush, Gaines, Gilchrist, Glenn, Gutierrez, Hayes, Haynes, Healey, Hettleman, Hill, Hixson, Holmes, C. Howard, Jackson, Jalisi, Jameson, Jones, Kaiser, Kelly, Knotts, Korman, Kramer, Krimm, Lafferty, Lam, Lewis, Lierman, Lisanti, Luedtke, McCray, McIntosh, Metzgar, Miele, A. Miller, W. Miller, Moon, Morales, Morhaim, Mosby, Oaks, Patterson, Pendergrass, Platt, Proctor, Queen, Reznik, Robinson, Rosenberg, Sample–Hughes, Sanchez, Sophocleus, Stein, Sydnor, Szeliga, Tarlau, Turner, Valderrama, Valentino–Smith, Vallario, Waldstreicher, Walker, A. Washington, M. Washington, West, Wilkins, C. Wilson, K. Young, and P. Young

Introduced and read first time: February 6, 2017

Assigned to: Health and Government Operations

A BILL ENTITLED

1 AN ACT concerning

2 **Maryland Health Insurance Coverage Protection Act**

3 FOR the purpose of establishing the Maryland Health Insurance Coverage Protection
4 Commission; providing for the composition, chair, and staffing of the Commission;
5 prohibiting a member of the Commission from receiving certain compensation, but
6 authorizing the reimbursement of certain expenses; requiring the Commission to
7 study and make recommendations regarding certain matters; authorizing the
8 Commission to hold public meetings across the State for a certain purpose; requiring
9 the Commission to report its findings and recommendations to the Governor and the
10 General Assembly on or before a certain date; providing for the termination of this
11 Act; defining a certain term; and generally relating to the Maryland Health
12 Insurance Coverage Protection Commission.

13 Preamble

14 WHEREAS, The Congressional Budget Office estimates that a repeal of the Patient
15 Protection and Affordable Care Act (ACA) may result in 22 million individuals becoming
16 uninsured in the United States; and

EXPLANATION: CAPITALS INDICATE MATTER ADDED TO EXISTING LAW.

[Brackets] indicate matter deleted from existing law.



WHEREAS, With a health insurance market collapse potentially resulting from a repeal of the ACA, an additional 7.3 million individuals could lose insurance coverage, leading to a total of nearly 30 million individuals losing health care coverage nationwide; and

WHEREAS, In Maryland, more than 350,000 people may become uninsured in the aftermath of a repeal of the ACA; and

WHEREAS, A repeal or weakening of the ACA, Medicaid, or Medicare could more than double the number of individuals without health insurance by 2019; and

WHEREAS, One in five of the nonelderly population in the State could become uninsured, which would be more individuals uninsured than before the implementation of the ACA in 2009; and

WHEREAS, About 12.9 million individuals in the United States could lose Medicaid or Children's Health Insurance Program coverage as a result of a repeal or weakening of the ACA or Medicaid, including more than 200,000 individuals in our State; and

WHEREAS, A repeal or weakening of the ACA, Medicaid, or Medicare would disproportionately affect working and retired individuals and families; and

WHEREAS, Millions of American seniors, including hundreds of thousands of Maryland seniors, could see their prescription drug costs rise substantially as a result of a repeal or weakening of the ACA or Medicare; and

WHEREAS, It is prudent for Maryland to study and develop a plan to mitigate these negative effects of a repeal or weakening of the ACA, Medicaid, or Medicare, address economic impacts, help save lives, and protect public health by recommending and implementing solutions to this broad-scale loss of health coverage; and

WHEREAS, The United States Congress should not repeal or weaken the ACA, Medicaid, or Medicare; now, therefore,

SECTION 1. BE IT ENACTED BY THE GENERAL ASSEMBLY OF MARYLAND,
That:

(a) In this section, "ACA" means the federal Patient Protection and Affordable Care Act.

(b) There is a Maryland Health Insurance Coverage Protection Commission.

(c) The Commission consists of the following members:

(1) two members of the Senate of Maryland, appointed by the President of the Senate;

1 (2) two members of the House of Delegates, appointed by the Speaker of
2 the House;

3 (3) the Secretary of Health and Mental Hygiene;

4 (4) the Maryland Insurance Commissioner; and

5 (5) five members of the public, appointed jointly by the President of the
6 Senate and the Speaker of the House.

7 (d) The chair of the Commission shall be designated jointly by the President of
8 the Senate and the Speaker of the House.

9 (e) The Department of Legislative Services shall provide staff for the
10 Commission.

11 (f) A member of the Commission:

12 (1) may not receive compensation as a member of the Commission; but

13 (2) is entitled to reimbursement for expenses under the Standard State
14 Travel Regulations, as provided in the State budget.

15 (g) (1) The Commission shall:

16 (i) conduct a study to assess the impact of potential federal changes
17 to the ACA, Medicaid, and Medicare; and

18 (ii) provide recommendations for State and local action to protect
19 access of residents of the State to affordable health coverage.

20 (2) The study conducted under paragraph (1) of this subsection shall
21 include:

22 (i) an assessment of the current and potential adverse effects of the
23 loss of health coverage on the residents, public health, and economy of the State resulting
24 from a repeal or weakening of the ACA, Medicaid, or Medicare;

25 (ii) an estimate of the costs to the State and State residents of
26 adverse effects from a repeal or weakening of the ACA, Medicaid, or Medicare and the
27 resulting loss of health coverage;

28 (iii) an examination of measures that may prevent or mitigate the
29 adverse effects of a repeal or weakening of the ACA, Medicaid, or Medicare and the
30 resulting loss of health coverage on the residents, public health, and economy of the State;
31 and

(iv) recommendations for laws that:

1. may be warranted to minimize the adverse effects associated with a repeal or weakening of the ACA, Medicaid, or Medicare; and

2. will assist residents in obtaining and maintaining affordable health coverage.

(h) The Commission may hold public meetings across the State to conduct the study.

(i) On or before December 31, 2017, the Commission shall submit a report on its findings and recommendations, including any legislative proposals, to the Governor and, in accordance with § 2–1246 of the State Government Article, the General Assembly.

SECTION 2. AND BE IT FURTHER ENACTED, That this Act shall take effect June 1, 2017. It shall remain effective for a period of 1 year and 1 month and, at the end of June 30, 2018, with no further action required by the General Assembly, this Act shall be abrogated and of no further force and effect.