THE SENATE TWENTY-FOURTH LEGISLATURE, 2008 STATE OF HAWAII

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S.B. NO. ²⁵³⁰ S.D. 1

The

A BILL FOR AN ACT

RELATING TO HEALTH INSURANCE SUPPORT FOR SMALL BUSINESS.

BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF HAWAII:

1 SECTION 1. Section 431:2-201.5, Hawaii Revised Statutes, 2 is amended to read as follows:

"§431:2-201.5 Conformity to federal law. (a) provisions of Title 42 United States Code section 300gg, et 4 5 seq., as they relate to group and individual health insurance shall apply to title 24, except: 6

Where state law provides greater health benefits or 7 (1)coverage than Title 42 United States Code section 8 9 300gg, et seq., state law shall be applicable; and This section shall not apply to or affect life 10 (2)insurance, endowment, or annuity contracts, or any 11 supplemental contract thereto, described in section 12 13 431:10A-101(4).

14 (b) The following definitions shall be used when applying 15 Title 42 United States Code section 300gg, et seq.:

"Employee" means an employee who works on a full-time basis 16 with a normal workweek of twenty hours or more. 17

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1	"Group health issuer" means all persons offering health		
2	insurance coverage to any group or association, but shall not		
3	include those persons offering benefits exempted from Title I of		
4	the Health Insurance Portability and Accountability Act of 1996,		
5	P.L. 104-191 under sections 732(c) and 733(c) of Title I of the		
6	Employee Retirement Income Security Act of 1974 and sections		
7	2747 and 2791(c) of the Public Health Service Act.		
8	"Qualifying event" means the date of issuance of a general		
9	excise tax license, the loss of a job, a reduction in hours of		
10	work, or the exhaustion of the federal Consolidated Omnibus		
11	Budget Reconstruction Act continuation coverage that results in		
12	a loss of health care coverage.		
13	"Self-employed individual" means a person operating the		
14	person's own business, whether as a sole proprietorship or in		
15	any other legally recognized manner in which a person may		
16	operate the person's own business, who has a general excise tax		
17	license for that business, and who is licensed by the department		
18	of commerce and consumer affairs for that business.		
19	"Small employer" means an employer who employs between one		
20	and no more than fifty employees.		
21	(c) All group health issuers shall offer all small group		

(c) All group health issuers shall offer all small group
health plans to all small employers whose employees live, work,

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1 or reside in the group health issuer's service areas; provided
2 that [the]:

3 (1) The commissioner may exempt a group health issuer if 4 the commissioner determines that the group health 5 issuer does not have the capacity to deliver services 6 adequately to enrollees of additional groups given its 7 obligation to existing employer groups; and [provided 8 further that the]:

9 (2) The commissioner [shall] may exempt from this subsection group health plans offered to small 10 employers that employ only one employee, if the group 11 health issuer offers the small employer groups at 12 13 least one small group health plan that meets the 14 requirements of chapter 393, and upon the determination by the commissioner that the group 15 health issuer has the capacity to adequately deliver 16 17 services to enrollees of the additional groups, 18 subject to its obligations to existing employer 19 groups. Subject to subsection (e)(1), beginning September 1, 20 (d) 2008, and annually thereafter, all group health issuers shall 21

22 offer small group health plans to self-employed individuals who 2008-1214 SB2530 SD1 SMA.doc

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1	live, wor	k, or reside in the group health issuer's service	
2	areas; pr	ovided that the commissioner may exempt a group health	
3	issuer if the commissioner determines that the group health		
4	issuer do	es not have the capacity to deliver services adequately	
5	to enroll	ees of additional groups given its obligation to	
6	existing	employer groups.	
7	<u>(e)</u>	Group health issuers may limit periods of enrollment	
8	for self-	employed individuals to a minimum of thirty calendar	
9	days; pro	vided that:	
10	(1)	Self-employed individuals who experience a qualifying	
11		event shall enroll with a group health issuer within	
12		thirty days of the qualifying event; and	
13	(2)	Group health issuers shall be allowed to impose a one-	
14		year waiting period against self-employed individuals	
15		who terminate coverage for any reason. If a self-	
16		employed individual terminates coverage and a one-year	
17		waiting period is imposed against the individual, a	
18		group health issuer need not reenroll the individual	
19		until the period of enrollment following the one-year	
20		waiting period.	
21	[(d)] (f) A group health issuer shall be prohibited from	
22	imposing	any preexisting condition exclusion.	

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1 [(e)] (g) The commissioner may adopt rules to implement, 2 clarify, or conform title 24 to Title 42 United States Code 3 section 300gg, et seq. 4 $\left[\frac{1}{2}\right]$ (h) The adoption of the Health Insurance Portability and Accountability Act of 1996, P.L. 104-191, for the purposes 5 6 of title 24 is not an adoption for any purposes for income taxes 7 under chapter 235. 8 [(g)] (i) The State shall have jurisdiction over any 9 matter that Title 42 United States Code section 300gg, et seq., 10 permits, including jurisdiction over enforcement. 11 [(h)] (j) As used in this section, "small group health 12 plans" means the medical plans currently offered, advertised, or marketed by a group health issuer for small employers." 13 14 SECTION 2. Statutory material to be repealed is bracketed and stricken. New statutory material is underscored. 15 SECTION 3. This Act shall take effect on July 1, 2008. 16



Report Title:

Group Health Insurance; Small Business

Description:

Requires group health issuers to offer small group health plans to self-employed individuals who are licensed by the department of commerce and consumer affairs and are located in the group issuer's service areas. Authorizes the insurance commissioner to exempt certain group health plans based on specified criteria. Allows limits on timing of enrollment and reenrollment to control adverse selection and plan costs. (SD1)