
A BILL FOR AN ACT

RELATING TO INSURANCE.

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

1 SECTION 1. The legislature finds that Hawaii's diverse and
2 multi-ethnic population gives rise to the need for health care
3 providers of all types to meet the various cultural and language
4 needs of state residents. Notwithstanding, health maintenance
5 organizations often have complete discretion over which
6 providers are allowed into their networks, which can give rise
7 to the exclusion of providers that cater to specific communities
8 within a cultural group or geographic area.

9 The legislature finds that "any willing provider" laws that
10 require health maintenance organizations to enter into contracts
11 with qualified providers who are willing to accept a plan's
12 terms and rates can benefit the State's diverse communities, and
13 that at least twenty-nine other states have some type of any
14 willing provider law as of the fall of 2022.

15 Accordingly, the purpose of this Act is to establish an any
16 willing provider law for the State that prohibits health
17 maintenance organizations from discriminating against certain



1 health care providers that meet the terms and conditions for
2 participation established by the health maintenance
3 organization.

4 SECTION 2. Chapter 432D, Hawaii Revised Statutes, is
5 amended by adding a new section to be appropriately designated
6 and to read as follows:

7 "§432D- Any willing provider; enrollment. (a) A health
8 maintenance organization operating in the State shall offer to
9 each of its enrollees a point-of-service plan option that allows
10 a covered individual to receive covered services from a licensed
11 health care provider in the State who is outside the health
12 maintenance organization's network, without obtaining a referral
13 or prior authorization from the health maintenance organization;
14 provided that:

15 (1) The point-of-service plan option may require that an
16 enrollee pay a higher deductible or copayment and
17 higher premium for the plan; and

18 (2) The health care provider chosen by the enrollee is:
19 (A) Located in the same county as the enrollee; and
20 (B) Willing to meet the terms and conditions,
21 including schedule of fees, covered expenses,



1 utilization regulations, and quality standards,
 2 established by the health maintenance
 3 organization, to provide services to the
 4 enrollee.


5 (b) A health maintenance organization shall provide each
 6 enrollee with an opportunity at the time of enrollment and
 7 during the annual open enrollment period to enroll in the point-
 8 of-service plan option. The health maintenance organization
 9 shall provide a written notice of the point-of-service plan
 10 option to each enrollee and shall include in that notice a
 11 detailed explanation of the financial costs to be incurred by an
 12 enrollee who selects the point-of-service plan option.

13 (c) For the purposes of this section, the term "health
 14 care provider" has the same meaning as defined in section
 15 432D-23.5."

16 SECTION 3. New statutory material is underscored.

17 SECTION 4. This Act shall take effect upon its approval.

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INTRODUCED BY: 
 JAN 22 2024



H.B. NO. 2303

Report Title:

Insurance; Health Insurance; Health Care; Discrimination;
Insurers; Covered Services; Health Maintenance Organizations

Description:

Prohibits health maintenance organizations from discriminating against certain health care providers that meet the terms and conditions for participation established by the health maintenance organization.

The summary description of legislation appearing on this page is for informational purposes only and is not legislation or evidence of legislative intent.

