

SB 1046 STAFF MEASURE SUMMARY

Senate Committee On Health Care

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Meeting Dates: 3/20, 3/27

WHAT THE MEASURE DOES:

Directs the Department of Consumer and Business Services (DCBS) to adopt new rules to evaluate the adequacy of provider networks of health insurance carriers to include the ratio of providers to enrollees, the geographic distribution of providers, and wait times for care. Directs DCBS to adopt standards to evaluate networks for all covered services, including services for mental health, substance use disorder, and reproductive health care. Directs DCBS to adopt standards to evaluate how networks meet the needs of enrollees who face unique challenges in accessing health care, including diverse cultural and ethnic backgrounds, sexual orientations and gender identities, and physical and mental disabilities.

ISSUES DISCUSSED:

EFFECT OF AMENDMENT:

Specifies that network adequacy standards apply to carriers offering an individual or group benefit plan. Specifies that DCBS is directed to adopt standards to evaluate whether networks provide appropriate, culturally competent care to all enrollees, including those with diverse cultural and ethnic backgrounds, sexual orientations and gender identities, and physical and mental health conditions. Allows for telehealth to meet network adequacy provisions to the extent permitted by the department by rule.

BACKGROUND:

House Bill 2468 (2015) directs health insurance carriers to submit a report each year to the Department of Consumer and Business Services (DCBS) to demonstrate how provider networks meet state and federal requirements. DCBS is required to conduct an annual evaluation to determine whether provider networks meet requirements.

Senate Bill 1046 directs the Department of Consumer and Business Services shall adopt rules to evaluate provider networks for provider ratio, geographic distribution, and wait time, in evaluating network adequacy requirements for all enrollees.