PLEASE NOTE: Legislative Information *cannot* perform research, provide legal advice, or interpret Maine law. For legal assistance, please contact a qualified attorney.

An Act To Improve Transparency in the Health Insurance Markets Be it enacted by the People of the State of Maine as follows:

Sec. 1. 24-A MRSA §2809-A, sub-§1-A, ¶D is enacted to read:

D. All notices of cancellation sent to certificate holders pursuant to paragraph B-1 must include a telephone number that certificate holders can call to determine if the policy has been cancelled for nonpayment of premium or if the policy has been reinstated because the premium has been paid. If a notice of cancellation has been mailed to a certificate holder pursuant to paragraph B-1 and the policy is not thereafter cancelled because the premium has been paid or the policy is reinstated, the insurer shall mail notice of noncancellation or reinstatement to the certificate holder by first class mail as expeditiously as possible, but in no event more than 10 days after premium for continued coverage or reinstatement has been received by the insurer. Notice pursuant to this paragraph must be provided in the same manner as notice provided pursuant to paragraph B-1.

Sec. 2. 24-A MRSA §4303, sub-§12 is enacted to read:

12. Publication of policies by carriers. A carrier shall publish on its publicly accessible website at least 5 individual policies offered by that carrier, or all individual policies offered by that carrier if the carrier offers fewer than 5 individual policies, having the highest levels of enrollment in the State and at least 5 small group policies offered by that carrier, or all small group policies offered by that carrier if the carrier offers fewer than 5 small group policies, having the highest levels of enrollment in the State. The carrier shall publish such policies in a manner that will allow consumers to review the coverage offered under each of these policies. The appearance of a policy published on the carrier's publicly accessible website must duplicate the actual policy an individual would receive if the individual were to request a paper copy of the policy. The carrier shall publish the required policies on its publicly accessible website within 90 days after the effective date of this subsection. After publishing the required policies in accordance with this subsection, the carrier must update its website within 14 days after making any changes to its published policies.

Sec. 3. 24-A MRSA §4303, sub-§13 is enacted to read:

- 13. Explanations of benefits. A carrier offering an expense-incurred individual health plan to Maine residents or an expense-incurred group health plan to a Maine employer shall provide individual policyholders and group certificate holders with a clear written explanation of benefit documents in response to the filing of any claim for coverage of hospital or medical expenses. In addition to any additional information required by rule, the explanation of benefits must include:
 - A. The date of service;
 - B. The provider of the service;
 - C. An identification of the service for which the claim is made;

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- D. Any amount the insured is obligated to pay under the policy for copayment or coinsurance;
- E. A telephone number and address where an insured may obtain clarification of the explanation of benefits;
- F. A notice of appeal rights;
- G. A notice of the right to file a complaint with the bureau; and
- H. Such other information as the superintendent may require by rule.

The superintendent shall establish by rule the minimum information, and minimum standards for the accuracy and clarity of the information presented, to appear in an explanation of benefits. The rule must require explanations of benefits to include at least the information required by this subsection and may require explanations of benefits to contain any additional information helpful to policyholders in understanding how their policies are being administered. Rules adopted pursuant to this subsection are routine technical rules as defined in Title 5, chapter 375, subchapter 2-A.

This subsection applies to all explanations of benefits issued after January 1, 2010.

SUMMARY

This bill amends the Maine Insurance Code to require that health insurers provide updated information to group enrollees regarding the status of their employer-sponsored insurance coverage when a notice of termination for nonpayment has been issued, post on their publicly accessible websites current versions of their individual and small group policies that have the most residents of the State enrolled and send clear explanations of benefits to explain the services and payments made by insurance companies on behalf of their policyholders.