

NOTES OF INTEREST

- The Connecticut State Legislature began the 2023 Session on January 4th. The session ends June 7th.
- Next House Session
Dates: May 30 at 11am, May 31 at 10:30 am, June 1 and 2 at 11am.
- Next Senate Session
Dates: May 30 at 3pm, May 31, June 1, and June 2 at 11am.
- Legislative Sessions can be watched live at CT-N.com
- The Insurance and Real Estate committee has finished their regular business for the session. The committee bill referral deadline has passed



LEGISLATIVE HIGHLIGHTS

May 30, 2023

LEGISLATION

As the end of the legislative session nears, both chambers of the Connecticut General Assembly continue to meet to take final action on bills. We have yet to see movement on any substantial Insurance and Real Estate committee legislation of interest, but expect to see much more action this week. We also expect caucus leaders to reach a budget compromise with the governor very soon. Speaker of the House Matt Ritter has promised that the CGA will vote to approve a budget prior to the June 7th legislative deadline.

The deadline to refer Insurance bills out of committee has now passed, but it is important to note that many pieces of legislation “come back” in the form of amendments on the floor. We will continue to monitor all legislation and amendments as they are published, and provide updates as necessary.

Recent Action on Legislation of Interest:

Details on bills we have been following closely are below. Note: Bills placed on a chamber calendar for final action indicate that the legislation is ready for final approval. We do not know yet when our legislation of interest is called, but we will provide updates as we have them.

House Bill 6710 An Act Concerning Association Health Plans And Establishing A Task Force To Study Stop-loss Insurance.

Latest Action: Placed on House Calendar, Awaiting final action
File Copy Number [330](#)

- Stakeholders continue to discuss bill language after robust debate in committee. Capitol Strategies Group and members of the NABIP-CT legislative committee are speaking with stakeholders in order to negotiate support of the bill.
- NABIP-CT has also put out [a legislative alert](#) asking brokers to reach out to their legislators in support of the legislation.

- We have heard that a final agreement on legislation language is very close and that it is likely the bill will be called in the House for a vote. We will provide an update as soon as any action is taken on the bill.

H.B. No. 6709 An Act Concerning Access Health

Latest Action: Bill is dead

- [File Copy Number No. 306](#)
- This bill was referred to the Appropriations committee and the committee took no action on the bill. The bill is dead in this form, and while we do not expect the language to come back, we will closely monitoring all amendments to make sure the language is not incorporated into another bill.
- This legislation would allow health carriers on the exchange to directly market and assist with enrolling members. The legislation was amended in the Insurance and Real Estate committee to also allow web brokers licensed in the state of Connecticut to enroll members. Committee chairs stated that this legislation is needed because of the number of individuals that will need to enroll through Access Health after the Medicaid redetermination on March 31. Amended language can be found [here](#).

H.B. 6634 An Act Concerning Site Of Service Reimbursements

Latest Action: Placed on House Calendar, awaiting final action

- File Copy Number [357](#)
- This bill has been placed on the House calendar for final action. A bipartisan amendment was [filed](#) on the legislation several weeks ago. The amendment has not yet been adopted, but would apply the provisions of the legislation to uninsured individuals in addition to covered individuals.
- Beginning January 1, 2024, this bill requires a hospital-based facility that is located away from a hospital campus (“off-site”) to submit with each claim the facility’s national provider identifier (NPI) and federal tax identification number. The NPI and tax identification number must be:
 1. separate from those issued to the hospital campus and
 2. included in any reimbursement claim for services the facility provided, regardless of whether the facility or the hospital or another facility submits the claim.
- Under the bill, health carriers are not required to reimburse or pay a health care provider for a claim for a service or item provided to a covered person at an off-site hospital-based facility unless the provider submits the claim using the separate NPI or tax identification number as described above. Off-site hospital-based facilities, or their designees, that do not file claims in this way cannot hold the covered person liable for payment.

- Additionally, starting January 1, 2024, the bill prohibits off-site hospital based facilities in Connecticut from charging a facility fee, unless it is mutually agreed to in a contract between a health carrier and the hospital.
- NABIP-CT legislative committee representatives have spoken with the state Healthcare Advocate on this legislation. Members shared their concerns that clients who go to doctors at hospital-owned health practices are often being charged hospital prices for off-site services. The OHA has indicated they believe this legislation will achieve the intended goal of preventing providers from charging patients hospital-based fees for office visits and procedures.

SB 983 An Act Limiting Anticompetitive Health Care Practices.

Latest Action: Placed on Senate Calendar, awaiting final action

- File Copy Number [341](#)
- This bill limits what out-of-network health care providers can charge enrollees for in-patient and out-patient hospital services to 150% of the rate Medicare pays for the same service in the same geographic area.
- Under the bill, health benefit plans must pass on any savings from reduced provider payments to consumers, and health carriers (e.g., insurers and HMOs) must reflect this in their annual rate filings.
- The bill (1) exempts rural hospitals and federally qualified health centers from the payment cap and (2) imposes specific reporting requirements on providers related to hospital price transparency.

SB 6 An Act Concerning Utilization Review And Health Care Contracts, Health Insurance Coverage For Newborns And Step Therapy, as Amended by Senate Amendment A and B

Latest Action: Amended and adopted in the Senate. Placed on House Calendar, awaiting final action

- This bill, as amended, makes the following changes to the insurance statutes:
 1. prohibits health carriers (e.g., insurers and HMOs) from requiring a prospective or concurrent review of a recurring prescription drug used to treat an autoimmune disorder, multiple sclerosis, or cancer that they already approved through utilization review (§§ 1 & 2);
 2. shortens the maximum timeframes for health carriers to notify an insured or his or her authorized representative of certain utilization reviews (§ 3);
 3. extends, from 61 days to 91 days after birth, the time period within which an insured person must (a) notify the insurer, HMO, or hospital or medical service corporation about a newborn's birth and (b) pay any required premium or subscription fee to continue the newborn's coverage beyond that period (§§ 4 & 5);

4. reduces how long an insurer can require an insured to use step therapy for prescription drugs from 60 to 30 days and prohibits step therapy from January 1, 2024, to January 1, 2027, for drugs used to treat schizophrenia, major depressive disorder or bipolar disorder (§§ 6 & 7);
 5. establishes a 23-member task force to study step therapy data collection, including step therapy edits, rejections, and appeals for behavioral health drugs, and the best ways to collect data (§8);
 6. requires managed care organizations (MCOs) to annually report certain prior authorization and utilization review data, actuarial analyses, and estimated premium savings to the insurance commissioner, and requires the commissioner to include some of this information in his annual consumer report card (§§ 9 & 10); and
 7. requires providers participating in a health carrier's network to use a carrier's secure electronic system to process utilization reviews (§ 11).
- A full summary of the bill can be found [here](#).

ADMINISTRATION

Healthcare Legislation:

[House Bill 6669](#), *An Act Protecting Patients and Prohibiting Unnecessary Health Care Costs*

Latest Action: Placed on House Calendar, awaiting Final Action

- File Copy Number [453](#)
- This legislation has been referred to the General Law committee for their review.
- The bill includes legislation that would eliminate hospital facility fees charged at free-standing offices and clinics.

Budget: The governor [proposed a new biennial budget to the legislature on February 8th](#). In mid-April, the Appropriations and Finance, Revenue, and Bonding committee released their official response to the governor's budget. Negotiations about the content of the budget continue to be on going, but it is evident that a budget deal could be reached very soon.

- A copy of the Appropriations Committee's proposed budget can be found [here](#).

NABIP-CT 2023 Benefits and Medicare Summit

Patrick McCabe of Capitol Strategies Group attended [The 2023 NABIP-CT Benefits and Medicare Summit](#) and provided a legislative update to attendees. Wyatt Bosworth, of CBIA, also attended the event and provide an update on the Association Healthcare Plan legislation. State Healthcare Advocate Ted Doolittle was a key note speaker at the event



KEY INFORMATION RESOURCES:

- **CT Insurance Department Bulletins:** <https://portal.ct.gov/CID/Bulletins/Current-List-of-Bulletins>
- **Connecticut Paid Leave Authority website:** CTPaidLeave.org

RECENT ARTICLES AND OP-EDS OF NOTE:

- **CBIA:** [Connecticut and the Unaffordable Cost of Healthcare](#)
- **NBC CT:** [Access Health CT Diversifying Brokers to Increase Access to Health Insurance for Underserved Communities](#)
- **CT Mirror:** [Health care in rural Connecticut faces key challenges, officials say](#)
- **CT NewsJunkie:** [Senate Green-lights Bill That Would Remove Barriers To Patient Care](#)
- **CT NPR:** [In some states, hundreds of thousands dropped from Medicaid](#)
- **Governor Ned Lamont:** [Governor Lamont Announces Connecticut's COVID-19 Public Health Emergency Declaration Will End on May 11, Explains Impact on Related Services and Programs](#)
- **Hartford Courant Opinion:** [Andy Markowski: CT and the unaffordable cost of health care](#)



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