SENATE BILL NO. 1042

April 14, 1998, Introduced by Senators BYRUM, DINGELL, KOIVISTO, A. SMITH, O'BRIEN and CHERRY and referred to the Committee on Health Policy and Senior Citizens.

A bill to establish the ABC health plan purchasing alliance to provide certain health benefits to certain children residing in this state; to establish the ABC board and prescribe its powers and duties; and to establish the ABC health plan fund.

THE PEOPLE OF THE STATE OF MICHIGAN ENACT:

- 1 Sec. 1. This act shall be known and may be cited as the
- 2 "ABC health plan act".
- 3 Sec. 3. As used in this act:
- 4 (a) "ABC" means affordable basic child care.
- 5 (b) "Alliance" means the affordable basic child health plan
- 6 purchasing alliance created in section 5.
- 7 (c) "Board" or "ABC health plan board" means the affordable
- 8 basic child health plan board created in section 5.
- 9 (d) "Child" or "children" means a state resident less than
- 10 19 years of age.

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- 1 (e) "Medicaid" means title XIX of the social security act,
- 2 chapter 531, 49 stat. 620, 42 U.S.C. 1396 to 1396f, 1396g-1 to
- 3 1396r-6, and 1396r-8 to 1396v.
- 4 (f) "Participant" means the parent or legal guardian of an
- 5 eligible dependent child who is enrolled in the ABC health plan.
- 6 Sec. 5. (1) The affordable basic child health plan purchas-
- 7 ing alliance is created. The alliance shall be a statewide pro-
- 8 gram operating under Medicaid and offering health benefits to
- 9 eligible children. The alliance shall be operated by the afford-
- 10 able basic child health plan board.
- 11 (2) The ABC health plan board is created within the depart-
- 12 ment of community health. The board is responsible for all of
- 13 the following:
- 14 (a) Enrollment of children into the ABC health plan.
- 15 (b) Outreach efforts to educate and inform residents of this
- 16 state about the ABC health plan.
- 17 (c) Contracting with health care providers, health care
- 18 facilities, managed care provider networks, and physician spon-
- 19 sored networks for the provision of health care services to eli-
- 20 gible children enrolled in the ABC health plan.
- 21 (d) Ensuring the quality of health care services provided to
- 22 children enrolled in the ABC health plan.
- (e) Entering into contracts and exercising powers necessary
- 24 to carry out the powers and duties of this act.
- 25 (f) Receiving and accepting premiums collected under
- 26 section 11 and grants, funds, or anything of value from public or
- 27 private sources. However, the board shall not accept anything of

- 1 value from a person or entity that might have a vested interest
- 2 in the decisions of the board.
- 3 (g) Depositing all premiums, grants, funds, and anything of
- 4 value received under subdivision (f) into the ABC health plan
- 5 fund created under section 13.
- 6 (h) Expending money and other assets of the ABC health plan
- 7 fund only in accordance with section 13.
- 8 (i) Providing annually to the governor and the senate and
- 9 house of representatives standing committees on health and insur-
- 10 ance issues all of the following:
- 11 (i) A report of operations and plan utilization of the
- 12 alliance.
- 13 (ii) A report of the number of children served by the alli-
- 14 ance, and the number of complaints or grievances relating to the
- 15 operation of the alliance that are received by the board.
- 16 (iii) An accounting of all revenues received by the board
- 17 and all internal and independent audits.
- 18 (j) Establishing the specific health care services to be
- 19 made available under the ABC health plan.
- 20 (k) Establishing the benefit levels of each service made
- 21 available under the ABC health plan.
- 22 Sec. 7. The board shall establish and operate the alliance
- 23 by doing all of the following:
- 24 (a) Employing an executive director to oversee and direct
- 25 the administrative functions of the purchasing alliance.
- 26 (b) Developing model contracts that detail for potential
- 27 contractors the requirements of the alliance.

- 1 (c) Providing a copy of the model contract to interested
- 2 health care providers, health care facilities, managed care pro-
- 3 vider networks, and physician sponsored networks detailing the
- 4 contractual terms for participation in the alliance.
- 5 (d) Developing and making available a list of objective cri-
- 6 teria that must be met by participating health care providers,
- 7 health care facilities, managed care provider networks, and phy-
- 8 sician sponsored networks in order to be eligible to participate
- 9 in the alliance.
- 10 (e) Specifying in contracts with participating health care
- 11 providers, health care facilities, managed care provider net-
- 12 works, and physician sponsored networks how all premiums will be
- 13 transmitted together with inclusion of appropriate language for
- 14 penalties and grace periods on late payments of premiums.
- 15 (f) Contracting with at least 3 unaffiliated health care
- 16 providers, health care facilities, managed care provider net-
- 17 works, and physician sponsored networks to ensure that children
- 18 have a choice from among a reasonable number of differing types
- 19 of competing health care providers, health care facilities, man-
- 20 aged care provider networks, and physician sponsored networks.
- 21 (g) Developing standard enrollment procedures to be used by
- 22 the alliance.
- 23 (h) Publishing educational materials, plan descriptions, and
- 24 comparison sheets describing participating health care providers,
- 25 health care facilities, managed care provider networks, and phy-
- 26 sician sponsored networks and the health benefit plans available
- 27 through the alliance.

- 1 (i) Receiving, reviewing, and acting, as appropriate, on
- 2 grievances by members.
- **3** (j) Establishing administrative and accounting procedures
- 4 for operating the alliance and for providing services to
- 5 members.
- 6 (k) Establishing procedures and mechanisms for billing and
- 7 collection of premiums from members.
- 8 (1) Establishing procedures for annual or rolling open
- 9 enrollment periods during which a member may elect to enroll his
- 10 or her child in any other health benefit plan that is available
- 11 through the alliance and that provides health coverage where the
- 12 child lives, and a late member may elect to enroll his or her
- 13 child in any health benefit plan that is available through the
- 14 alliance and that provides health coverage where the child
- 15 lives.
- 16 Sec. 11. (1) Subject to subsections (2) and (3), any resi-
- 17 dent of this state who has a dependent child who resides in this
- 18 state and is not eligible for an employer-sponsored health plan
- 19 may enroll the child in the ABC health plan. Premiums for cover-
- 20 age under the ABC health plan shall be charged monthly and shall
- 21 be determined by the board on a sliding-fee scale that corre-
- 22 sponds to the participant's income in accordance with the
- 23 following:
- 24 Income at or below 184% of the federal
- 25 poverty level..... no cost.
- 26 Income that is at or above 185% and less
- 27 than 200% of the federal poverty level.... \$ 8.00 per month for a

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single child, or a
 1
 2
                                                  total of $16.00
 3
                                                  per month for 2 or
 4
                                                  more children.
     Income that is at or above 200% and less
 5
 6 than 235% of the federal poverty level.... $
                                                 10.00 per month for
 7
                                                  a single child, or
 8
                                                  a total of $16.00
9
                                                  per month for 2 or
10
                                                  more children.
11
     Income that is at or above 235% and less
12 than 250% of the federal poverty level.... $
                                                    25.00 per month.
     Income that is at or above 250% and less
13
14 than 300% of the federal poverty level.... $
                                                    45.00 per month.
     Income that is at or above 300% and less
15
16 than 400% of the federal poverty level.... $
                                                    75.00 per month.
17
     Income that is at or above 400% of the
18 federal poverty level.....
                                                  the actual cost of
19
                                                  the coverage.
20
        (2) A child who has been eligible for employer-based health
21 insurance within the past 6 months shall not participate in the
22 ABC health plan, unless the loss of health insurance eligibility
23 is due to a layoff, business closing, or involuntary loss of
24 insurance for employment reasons.
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        (3) If 1 child in a household is enrolled in the ABC health
26 plan, all other children in that household shall also be
27 enrolled.
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- 1 (4) All premiums collected under this section shall be
- 2 deposited into the ABC health plan fund created in section 13.
- 3 Sec. 13. The ABC health plan fund is created in the state
- 4 treasury as a separate fund into which shall be paid all revenue
- 5 received by the board from any source. The state treasurer shall
- 6 direct the investment of the fund, and credit to the fund inter-
- 7 est and earnings from fund investments. Money in the ABC health
- 8 plan fund shall not revert to the general fund at the close of
- 9 the fiscal year but shall remain in the ABC health plan fund.
- 10 The board shall expend money from the fund only to provide eligi-
- 11 ble children in this state with health care services authorized
- 12 under this act.
- 13 Sec. 15. The board may promulgate rules pursuant to the
- 14 administrative procedures act of 1969, 1969 PA 306, MCL 24.201 to
- 15 24.328, as necessary to implement its powers and duties under
- 16 this act.
- 17 Sec. 17. This act is effective April 15, 1998.