107TH CONGRESS 2D SESSION

S. 2035

To provide for the establishment of health plan purchasing alliances.

IN THE SENATE OF THE UNITED STATES

March 20, 2002

Mr. Jeffords (for himself, Mrs. Clinton, and Ms. Snowe) introduced the following bill; which was read twice and referred to the Committee on Health, Education, Labor, and Pensions

A BILL

To provide for the establishment of health plan purchasing alliances.

- 1 Be it enacted by the Senate and House of Representa-
- 2 tives of the United States of America in Congress assembled,
- 3 SECTION 1. SHORT TITLE.
- 4 This Act may be cited as the "Health Plan Pur-
- 5 chasing Alliance Act of 2002".
- 6 SEC. 2. DEFINITIONS.
- 7 In this Act:
- 8 (1) Health Plan Purchasing alliance.—
- 9 The term "health plan purchasing alliance" means
- employer groups that, on a voluntary basis and in

1	accordance with this section, form an alliance for the
2	purpose of purchasing insurance plans offered by
3	health insurance plan issuers.
4	(2) Secretary.—The term "Secretary" means
5	the Secretary of Health and Human Services.
6	(3) SMALL EMPLOYER GROUP.—The term
7	"small employer group" means all employees em-
8	ployed by the same employer. The maximum number
9	of employees in the small employer group shall be
10	defined by the health care purchasing alliance.
11	(4) State.—The term "State" means the 50
12	States, the District of Columbia, and the Common-
13	wealth of Puerto Rico.
14	SEC. 3. GRANT PROGRAM FOR STATE-BASED ESTABLISH-
15	MENT OF ALLIANCES.
16	(a) Program Establishment.—The Secretary may
17	establish a program to award grants to eligible entities,
18	including States, to facilitate the development and estab-
19	lishment, in accordance with this Act, of State-based or
20	State-directed health plan purchasing alliances to afford
21	greater access to, and lower costs of, health benefits for
22	small employer groups and individuals.
23	(b) Eligible Entities.—To be eligible to receive a
24	grant under subsection (a), an entity shall—

(1) be—

1	(A) a State agency;
2	(B) a nonprofit entity organized for the
3	purpose of establishing a health plan pur-
4	chasing alliance; or
5	(C) a for-profit cooperative organization
6	whose profits are shared on a pro-rata basis
7	among the members of the cooperative;
8	(2) prepare and submit to the Secretary an ap-
9	plication, at such time, in such manner, and con-
10	taining such information and assurances as the Sec-
11	retary may require (including evidence of compliance
12	with applicable requirements of this Act);
13	(3) provide documentation to the Secretary of a
14	determination by the Governor of the State involved
15	that the proposed project is in the best interests of
16	the State; and
17	(4) otherwise comply with the provisions of sub-
18	sections (b) through (f) of section 5.
19	(c) USE OF FUNDS.—
20	(1) In general.—Except as provided in para-
21	graph (2), funds made available under a grant under
22	this section may be used by the grantee to pay the
23	costs associated with the development of a health

plan purchasing alliance, the provision of technical

- 1 assistance concerning the alliance, and the capital-
- 2 ization of the alliance.
- 3 (2) Exception.—Funds made available under
- a grant under this section may not be used for the
- 5 operating costs of the health plan purchasing alli-
- 6 ance after the date that is 6 months after the date
- 7 on which the alliance began operations.
- 8 (d) AUTHORIZATION OF APPROPRIATIONS.—There is
- 9 authorized to be appropriated to carry out the program
- 10 under subsection (a), \$50,000,000 for each of the fiscal
- 11 years 2002 through 2006.
- 12 (e) DURATION.—The period of a grant under this
- 13 section shall not exceed 30 months.
- 14 SEC. 4. FEHBP ALLIANCES.
- 15 (a) GOVERNORS' OPTION.—The Governor of a State
- 16 that elects not to apply for a grant under section 3, or
- 17 not to provide the documentation described in section
- 18 3(b)(3), may, with respect to the entire State or to a geo-
- 19 graphic region of the State, request that the Secretary es-
- 20 tablish an FEHBP alliance in coordination with the Fed-
- 21 eral Employees' Health Benefit Program under chapter
- 22 89 of title 5, United States Code.
- 23 (b) OPERATION OF PROGRAM.—The Secretary, to the
- 24 extent the Secretary considers appropriate, upon receipt
- 25 of a request pursuant to subsection (a), and with the con-

- 1 currence of the Director of the Office of Personnel Man-
- 2 agement (referred to in this section as the "Director"),
- 3 may use funds available under this section to establish a
- 4 State-based FEHBP alliance in accordance with the provi-
- 5 sions of this Act and in coordination with the Federal Em-
- 6 ployees' Health Benefit Program.
- 7 (c) Powers of FEHBP Alliance.—A State-based
- 8 FEHBP alliance established under this section may—
- 9 (1) use the name of the Federal Employees'
- Health Benefit Program plan in its marketing activi-
- 11 ties;
- 12 (2) require that a health plan issuer that par-
- ticipates in the Federal Employees' Health Benefit
- Program and that offers health benefit coverage to
- purchasers in the private sector also offer the same
- health benefit coverage to eligible individuals and to
- the small employer groups that are participating in
- the State-based FEHBP alliance, at prices that are
- 19 negotiated with the alliance;
- 20 (3) request that the Director terminate the par-
- 21 ticipation of any health plan issuer in the Federal
- Employees' Health Benefit Program if the Director
- determines that such issuer has failed to comply
- with the requirements imposed on the issuer under

- paragraph (2) (and the Director may consider such
 a failure sufficient grounds for termination); and
- (4) negotiate with health plan issuers not participating in the Federal Employees' Health Benefit
 Program for the provision of health benefits coverage in the small group market.
- 7 (d) SEPARATE RATING.—Health plans offered 8 through a State-based FEHBP alliance and individuals 9 purchasing coverage through such an alliance shall be con-10 sidered as separate groups and be distinct from any group 11 of plans or Federal employees participating in the Federal 12 Employees' Health Benefit Program.

13 SEC. 5. PRIVATE HEALTH PLAN PURCHASING ALLIANCES.

14 (a) CERTIFICATION.—

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(1) REQUIREMENT.—If small employer groups or a group of individuals and small employer groups, that desire to form, on a voluntary basis, a health plan purchasing alliance in accordance with this section, appropriately notifies the State and the Secretary of such desire, the State, upon a determination that such group meets the requirements of this section and any other requirements established by State law, shall certify the group as a health plan purchasing alliance. The State shall make a determination of whether such group meets the require-

ments of this section in a timely fashion and shall oversee the operations of such alliance in order to ensure continued compliance with the requirements of this section. Each such alliance shall be registered with the Secretary.

(2) State refusal to certify.—

- (A) IN GENERAL.—If a State fails to implement a program for certifying health plan purchasing alliances in accordance with the standards under this section, the Secretary shall certify and oversee the operations of such alliances in such State.
- (B) EXCEPTION.—The Secretary shall not certify a health plan purchasing alliance described in this section if, upon the submission of an application by the State to the Secretary, the Secretary determines that under a State law in effect on the date of enactment of this Act, all small employers or individuals have a means readily available that ensures—
 - (i) that individuals and employees have a choice of multiple, unaffiliated health plan issuers;
 - (ii) that health plan coverage is subject to State premium rating requirements

that are not based on the factors described 1 2 in subsection (e)(3), that such require-3 ments ensure a fair rating in a manner so that premiums shall be reasonable relative to rates, and that such requirements con-6 tain a mandatory minimum loss ratio; and 7 (iii) that comparative health plan materials are disseminated consistent with 8 9 subsection (d)(1)(D); 10 and that otherwise meets the objectives of this 11 Act. 12 (3) Interstate alliances.—For purposes of 13 this section, a health plan purchasing alliance oper-14 ating in more than one State shall be certified by 15 the State in which the alliance is domiciled. Each

this section, a health plan purchasing alliance operating in more than one State shall be certified by the State in which the alliance is domiciled. Each plan and alliance shall be qualified and certified in each State in which it operates. States may enter into alliance agreements for the purpose of overseeing the operation of such alliances. For purposes of this subsection, an alliance shall be considered to be domiciled in the State in which most of the members of the alliance reside.

(b) Board of Directors.—

(1) IN GENERAL.—Each health plan purchasing alliance shall be governed by a Board of Directors

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- that shall be responsible for ensuring the performance of the duties of the alliance under this section.

 The Board shall be composed of a broad cross-section of representatives of the employers, employees,
 and individuals participating in the alliance. Employer groups participating in a health care purchasing alliance should be represented on the Board
 by both employers and employees.
 - (2) Limitation on compensation.—A health plan purchasing alliance may not provide compensation to members of the Board of Directors. The alliance may provide reimbursements to such members for the reasonable and necessary expenses incurred by the members in the performance of their duties as members of the Board.

(c) Membership and Marketing Area.—

(1) Membership.—A health plan purchasing alliance shall establish limits on the maximum size of an employer, as determined by its number of employees, that may become a member of the alliance, and may determine whether to permit individuals to become members. Upon the establishment of such membership criteria, the alliance shall, except as provided in paragraph (2), accept all employers, employees, and individuals residing within the area

served by the alliance who meet such requirements as members on a first-come, first-served basis, or on another basis established by the State to ensure equitable access to the alliance. The purchasing alliance shall not discriminate or deny membership on the basis of health status, age, race, sex, occupation, or insurability.

(2) Marketing area.—A State may establish rules regarding the geographic area that must be served by health plan purchasing alliances to ensure that alliances do not discriminate on the basis of the health status or insurability of the populations that reside in the area served. A State may not use such rules to limit arbitrarily the number of health plan purchasing alliances.

(d) Duties and Responsibilities.—

- (1) IN GENERAL.—A health plan purchasing alliance shall—
 - (A) objectively evaluate potential health plan issuers and enter into agreements with multiple, unaffiliated health plan issuers, except that the requirement of this subparagraph shall not apply in regions (such as remote or frontier areas) in which compliance with such requirement is not possible;

1	(B) enter into agreements with employers
2	and individuals who become members of the al-
3	liance;
4	(C) participate in any program of risk-ad-
5	justment or reinsurance, or any similar pro-
6	gram, that is established by the State;
7	(D) prepare and disseminate comparative
8	health plan materials (including information
9	about cost, quality, benefits, and other informa-
10	tion determined necessary by the State to per-
11	mit a comparison of all health plans offered
12	through the alliance to small employers, em-
13	ployees, and individuals);
14	(E) broadly solicit and actively market to
15	all eligible employers and individuals residing
16	within the service area;
17	(F) act as an ombudsman for group health
18	plan or individual health plan enrollees; and
19	(G) offer to all employers, employees, and
20	individuals participating in the health pur-
21	chasing alliance an open enrollment period of at
22	least 30 days per calendar year.
23	(2) Permissible activities.—A health plan
24	purchasing alliance may perform such other func-

1	tions as necessary to further the purposes of this
2	Act, including—
3	(A) collecting and distributing premiums
4	and performing other administrative functions;
5	(B) collecting and analyzing surveys of en-
6	rollee satisfaction or grievances;
7	(C) charging membership fee to enrollees
8	(such fees may not be based on health status)
9	and charging participation fees to alliance
10	health plan issuers; and
11	(D) negotiating with health care providers
12	and health plan issuers.
13	(e) Limitations on Alliance Activities.—A
14	health plan purchasing alliance shall not—
15	(1) perform any activity relating to the licens-
16	ing of health plan issuers;
17	(2) assume financial risk directly or indirectly
18	on behalf of members of a health plan purchasing al-
19	liance relating to any group health plan or individual
20	health plan;
21	(3) establish eligibility, enrollment, or premium
22	contribution requirements for participants or bene-
23	ficiaries in all health plans based on health status,
24	medical condition, claims experience, receipt of

- health care, medical history, evidence of insurability,
 genetic information, or disability;
 - (4) operate on a for-profit or other basis where the legal structure of the alliance permits profits to be made and not returned to the members of the alliance; or
 - (5) perform any other activities that conflict or are inconsistent with the performance of its duties under this Act.

(f) Conflict of Interest.—

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- (1) Prohibition.—No individual, partnership, or corporation shall serve on the board of a health plan purchasing alliance, be employed by such an alliance, receive compensation from such an alliance, or initiate or finance such an alliance if such individual, partnership, or corporation—
 - (A) fails to discharge the duties and responsibilities of such individual, partnership or corporation in a manner that is solely in the interest of the alliance and the members of the alliance; or
 - (B) derives personal financial benefit (other than in the form of ordinary compensation received) from the sale of, or has a financial interest in health plans or related financial

- entities, services or products sold by or distributed through that alliance.
- (2) Contracts with third parties.—Nothing in paragraph (1) shall be construed to prohibit
 the board of directors of a health plan purchasing
 alliance, or its officers, at the initiative and under
 this direction of the board, from contracting with
 third parties to provide administrative, marketing,
 consultive, or other services to the alliance.
- 10 (g) Limited Preemption of Certain State 11 Laws.—
 - (1) IN GENERAL.—With respect to a health plan purchasing alliance that meets the requirements of this section (including an alliance under section 3), any State law that sets restrictions on the organization of groups for the purpose of purchasing health insurance, or that prohibits groups from combining for that purpose, is preempted with respect to an alliance that meets the requirements of this Act.

(2) Health Plan Issuers.—

(A) RATING.—Except as provided in subparagraph (B), a health plan issuer offering a group health plan or individual health plan through a health plan purchasing alliance that

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meets the requirements of this section (including an alliance under section 3) shall comply with all State rating requirements that would otherwise apply if the health plan were offered outside of the alliance.

- (B) Premium rate exception.—A State law that imposes premium rate requirements is preempted to the extent that it would prohibit a health plan issuer from reducing premium rates under an agreement with a health plan purchasing alliance that meets the requirements of this section (including an alliance under section 3) to reflect savings derived from administrative costs, marketing costs, profit margins, economies of scale, or other factors, except that any such reduction in premium rates may not be based on the health status, demographic factors, industry type, duration, or other indicators of health risk of the members of the alliance.
- (C) Benefits.—Except as provided in subparagraph (D), a health plan issuer offering a health plan through a health plan purchasing alliance (including an alliance under section 3) shall comply with all State mandated benefit laws that require the offering of any services,

category of care, or services of any class or type of provider.

- (D) ALTERNATIVE BENEFIT PLAN EXCEPTION.—In those States that have enacted laws authorizing the issuance of alternative benefit plans to small employers, health plan issuers may offer such alternative benefit plans through a health plan purchasing alliance that meets the requirements of this section (including an alliance under section 3).
- (3) Rule of construction.—Nothing in this Act shall be construed to preempt a State law if such law prohibits the variance of premium rates of employers, employees, or individuals participating as members in a health purchasing alliance in excess of the amount of such variations that would be permitted under such State laws among individuals, employers, and employees that are not participating in the health purchasing alliance.

20 SEC. 6. RULES OF CONSTRUCTION.

- Nothing in this Act shall be construed to—
- 22 (1) require that a State organize, operate, or 23 otherwise create health plan purchasing alliances;
- 24 (2) otherwise require the establishment of 25 health plan purchasing alliances;

- 1 (3) require individuals, plan sponsors, or employers to purchase health insurance plans through a health plan purchasing alliance;
 - (4) preempt a State from requiring licensure for individuals who are involved in directly supplying advice or selling health plans on behalf of a purchasing alliance;
 - (5) require that a health plan purchasing alliance be the only type of purchasing arrangement permitted to operate in a State;
 - (6) confer authority upon a State that the State would not otherwise have to regulate health plan issuers or employee health benefits plans;
 - (7) confer authority upon a State (or the Federal Government) that the State (or Federal Government) would not otherwise have to regulate group purchasing arrangements, coalitions, association plans, or other similar entities that do not desire to become a health plan purchasing alliance in accordance with this section; or
 - (8) except as specifically provided otherwise in this subsection, prevent the application of State laws and regulations otherwise applicable to health plan issuers offering group health plans or individual

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- 1 health plans through a health plan purchasing alli-
- ance.

3 SEC. 7. ENFORCEMENT.

- 4 For purposes of enforcement only, the requirements
- 5 of parts 4 and 5 of subtitle B of title I of the Employee
- 6 Retirement Income Security Act of 1974 (29 U.S.C. 1101
- 7 et seq.) shall apply to a health plan purchasing alliance
- 8 certified by the Secretary under section 5(a)(2) of this Act
- 9 as if such alliance were an employee welfare benefit plan.

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