Introduced by Assembly Member Wood

February 17, 2016

An act to amend Section 1367.009 of the Health and Safety Code, relating to health care service plans.

LEGISLATIVE COUNSEL'S DIGEST

AB 2115, as introduced, Wood. Health care service plans: levels of coverage.

Existing federal law, the federal Patient Protection and Affordable Care Act (PPACA), enacts various health care coverage market reforms that take effect January 1, 2014. Among other things, PPACA establishes annual limits on deductibles for employer-sponsored plans and defines bronze, silver, gold, and platinum levels of coverage for the nongrandfathered individual and small group markets.

Existing law, the Knox-Keene Health Care Service Plan Act of 1975, provides for the licensure and regulation of health care service plans by the Department of Managed Health Care, including defining levels of coverage. Existing law makes a willful violation of the act a crime.

This bill would make a technical, nonsubstantive change to these provisions.

Vote: majority. Appropriation: no. Fiscal committee: no. State-mandated local program: no.

The people of the State of California do enact as follows:

- SECTION 1. Section 1367.009 of the Health and Safety Code
- 2 is amended to read:

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1367.009. (a) Levels of coverage for the nongrandfathered small group market are defined as follows:

- (1) Bronze level: A health care service plan contract in the bronze level shall provide a level of coverage that is actuarially equivalent to 60 percent of the full actuarial value of the benefits provided under the plan contract.
- (2) Silver level: A health care service plan contract in the silver level shall provide a level of coverage that is actuarially equivalent to 70 percent of the full actuarial value of the benefits provided under the plan contract.
- (3) Gold level: A health care service plan contract in the gold level shall provide a level of coverage that is actuarially equivalent to 80 percent of the full actuarial value of the benefits provided under the plan contract.
- (4) Platinum level: A health care service plan contract in the platinum level shall provide a level of coverage that is actuarially equivalent to 90 percent of the full actuarial value of the benefits provided under the plan contract.
- (b) Actuarial value for nongrandfathered small employer health care service plan contracts shall be determined in accordance with *all of* the following:
- (1) Actuarial value shall not vary by more than plus or minus 2 percent.
- (2) Actuarial value shall be determined on the basis of essential health benefits as defined in Section 1367.005 and as provided to a standard, nonelderly population. For this purpose, a standard population shall not include those receiving coverage through the Medi-Cal or Medicare programs.
- (3) The department may use the actuarial value methodology developed consistent with Section 1302(d) of PPACA.
- (4) The actuarial value for pediatric dental benefits, whether offered by a full service plan or a specialized plan, shall be consistent with federal law and guidance applicable to the plan type.
- (5) The department, in consultation with the Department of Insurance and the Exchange, shall consider whether to exercise state-level flexibility with respect to the actuarial value calculator in order to take into account the unique characteristics of the California health care coverage market, including the prevalence of health care service plans, total cost of care paid for by the plan,

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price of care, patterns of service utilization, and relevant
demographic factors.
(6) Employer contributions toward health reimbursement

- (6) Employer contributions toward health reimbursement accounts and health savings accounts shall count toward the actuarial value of the product in the manner specified in federal rules and guidance.
- 7 (c) "PPACA" means the federal Patient Protection and 8 Affordable Care Act (Public Law 111-148), as amended by the 9 federal Health Care and Education Reconciliation Act of 2010 0 (Public Law 111-152), and any rules, regulations, or guidance 1 issued thereunder.

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