A BILL FOR AN ACT

RELATING TO MUTUAL BENEFIT SOCIETIES.

BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF HAWAII:

SECTION 1. The legislature finds that mutual benefit 1 societies hold a unique position in the State's economy and 2 business community. Mutual benefit societies are organized and 3 carried on for the primary benefit of their members and their 4 beneficiaries and not for profit. As a result, mutual benefit 5 societies are exempted from many laws that apply to insurance 6 companies. In addition to that exemption mutual benefit 7 societies are tax-exempt or receive preferential tax treatment. 8 9 However, because of limited application of the insurance code, the insurance commissioner has correspondingly limited 10 supervisory authority over these entities. 11 The legislature further finds that payments to providers 12 who are not participating providers can be so low in relation to 13 what would be considered a reasonable charge for services as to 14 provide illusory protection to the insured plan member who is 15 responsible for the difference between the amount paid by the 16 plan and the provider's fee. The plan's "eligible charge" for 17 services rendered by nonparticipating providers are not 18

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- 1 disclosed to members and, therefore, a member has no way of
- 2 knowing before obtaining services how much of the
- 3 nonparticipating provider's fee will be covered by insurance.
- 4 The legislature also finds that this situation is unfair to the
- 5 plan member and that simply requiring the health plan to make
- 6 this information available would not sufficiently protect the
- 7 plan members from the illusory nature of the provided insurance.
- 8 The legislature further finds that, although a fee limited by
- 9 the medicare fee schedule is low in relation to the real value
- 10 of the services, it is at least within the range of
- 11 reasonableness so that a plan member's reasonable expectations
- 12 as to the coverage being purchased is not totally disabused.
- The purpose of this Act is to ensure that health insurance
- 14 coverage provided by a mutual benefit society provides for a
- 15 reasonable portion of the reasonable charge of nonparticipating
- 16 providers.
- 17 SECTION 2. Chapter 432, Hawaii Revised Statutes, is
- 18 amended by adding a new section to article 1 to be appropriately
- 19 designated and to read as follows:
- 20 "S432:1- Eligible charges for nonparticipating
- 21 providers. All individual and group hospital and medical
- 22 service corporation contracts shall provide coverage for health

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care services rendered to members by nonparticipating providers.
1
    The compensation to be paid to nonparticipating providers for
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    health care services shall not be less than the fees prescribed
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    in the Medicare Resource Based Relative Value Scale system
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    applicable to Hawaii as prepared by the United States Department
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    of Health and Human Services."
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         SECTION 3. Section 432:1-104, Hawaii Revised Statutes, is
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    amended to read as follows:
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         "$432:1-104 Definitions. For the purposes of this
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10
    article:
       [(1) Commissioner] "Commissioner" means the insurance
11
    commissioner of the State of Hawaii.
12
         [(2) Mutual benefit society is] "Mutual benefit society"
13
    is any corporation, unincorporated association, society, or
14
    entity:
15
       [-(A)] (1) Organized and carried on for the primary benefit
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              of its members and their beneficiaries and not for
17
              profit[__] and[+
18
              (i) Making provision for the payment of benefits in
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                   case of sickness, disability, or death of its
20
                   members, or disability, or death of its members'
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| 1 | | spouses or reciprocal beneficiaries or children, |
|----|--------------------|--|
| 2 | | OT |
| 3 | (ii) | - Making provision for the payment of any other |
| 4 | | benefits to or for its members, |
| 5 | ₩he | ether or not the amount of the benefits is fixed or |
| 6 | res | sts in the discretion of the society, its officers, |
| 7 | or | any other person or persons; and the fund from |
| 8 | wh: | ich the payment of the benefits shall be defrayed is |
| 9 | de | rived from assessments or dues collected from its |
| 10 | mer | mbers, and the payment of death benefits is made to |
| 11 | the | e families including reciprocal beneficiaries, |
| 12 | he: | irs, blood relatives, or persons named by its |
| 13 | mer | mbers as their beneficiaries; or |
| 14 | (B) Ore | ganized and carried on for any purpose, which: |
| 15 | (i) | Regularly requires money to be paid to it by its |
| 16 | | members, whether the money be in the form of |
| 17 | | dues, subscriptions, receipts, contributions, |
| 18 | | assessments or otherwise, and |
| 19 | (ii | Provides for the payment of any benefit or |
| 20 | | benefits or the payment of any money or the |
| 21 | | delivery of anything of value to its members or |
| 22 | | their relatives including reginregal |

| 1 | | beneficiaries, or to any person or persons named |
|----|----------------|--|
| 2 | | by its members as their beneficiaries, or to any |
| 3 | | class of persons which includes or may include |
| 4 | | its members, |
| 5 | | whether or not the amount or value of the benefit, |
| 6 | | benefits, money, or thing of value is fixed, or rests |
| 7 | | in the discretion of the society, its officers, or any |
| 8 | | other person or persons; or |
| 9 | (C) | Organized and carried on for any purpose, whose |
| 10 | | requirements and provisions although not identical |
| 11 | | with, are determined by the commissioner to be |
| 12 | | substantially similar to, those enumerated in |
| 13 | | subparagraphs (A) and (B). |
| 14 | | providing health and medical insurance or making |
| 15 | | provision for other benefits; or |
| 16 | (2) | Organized and carried on for the primary benefit of |
| 17 | | its members and not for profit for any purpose, whose |
| 18 | | requirements and provisions, although not identical |
| 19 | | with, are determined by the commissioner to be |
| 20 | | substantially similar to those enumerated in paragraph |
| 21 | | (1). |

- 1 Participating in a prepaid legal service plan subject to chapter
- 2 488 shall not in itself make a corporation, unincorporated
- 3 association, society, or entity a mutual benefit society and
- 4 subject to this article.
- 5 "Nonparticipating provider" means a licensed or certified
- 6 health care provider who has not entered into an agreement with
- 7 a mutual benefit society or a managed care plan to provide
- 8 services, benefits, or supplies to plan members."
- 9 SECTION 4. Statutory material to be repealed is bracketed
- 10 and stricken. New statutory material is underscored.
- 11 SECTION 5. This Act shall take effect upon its approval.

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INTRODUCED

JAN 2 4 2006

HB 2583

Report Title:

Mutual Benefit Societies; Nonparticipating Providers; Payment

Description:

Requires mutual benefit societies to pay for a reasonable portion of the reasonable charge of nonparticipating providers under its health insurance coverage plans.