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# A BILL FOR AN ACT

RELATING TO HEALTH.

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

1 PART I

2 SECTION 1. Health insurance exchanges are a central  
3 component of the federal Patient Protection and Affordable Care  
4 Act, and the federal act gives states broad discretion in  
5 establishing the structure and governance of their own  
6 exchanges. The legislature finds that the Hawaii health  
7 connector was established by Act 205, Session Laws of Hawaii  
8 2011, as Hawaii's health insurance exchange and was charged with  
9 the responsibility of implementing applicable parts of the  
10 federal act.

11 The successful and efficient operation of the Hawaii health  
12 connector is essential for the State, health insurers, and  
13 insured persons in Hawaii to comply with the new requirements of  
14 the federal act. The legislature also finds that the Hawaii  
15 health connector was established as a private nonprofit entity,  
16 rather than a state agency, to provide the connector with a  
17 certain degree of freedom and autonomy in establishing and  
18 operating the State's health insurance exchange.



1           However, the legislature believes that evolving federal  
2 health care regulations and the need for greater transparency  
3 and oversight over Hawaii's health insurance exchange  
4 necessitate that the State revise the structure of the Hawaii  
5 health connector. Accordingly, the legislature finds that the  
6 Hawaii health connector should be established as a state entity  
7 to ensure greater accountability for its actions and improved  
8 oversight of its ongoing operations.

9           The Patient Protection and Affordable Care Act mandates  
10 health insurance exchanges to be self-sustaining beginning in  
11 January 2015. The legislature further recognizes that the long-  
12 term financial sustainability of the connector must be  
13 facilitated in a way that promotes competition and ensures  
14 equity among the competitors. The legislature finds that a  
15 sustainability fee on insurers is an appropriate financing  
16 method that will strike a proper balance by promoting  
17 competition, facilitating a self-sustaining health insurance  
18 exchange market, and maintaining reasonable health insurance  
19 rates.

20           The purpose of this part is to:

- 21           (1) Establish the Hawaii health connector as a state  
22           entity; and



1 (2) Provide for the long-term sustainability of the Hawaii  
2 health connector by authorizing the insurance  
3 commissioner to assess a fee on all issuers selling  
4 plans, both inside and outside of the connector.

5 SECTION 2. Chapter 27, Hawaii Revised Statutes, is amended  
6 by adding a new part to be appropriately designated and to read  
7 as follows:

8 "PART . HAWAII HEALTH INSURANCE EXCHANGE

9 §27-A Definitions. As used in this part:

10 "Board" means the board of directors of the Hawaii health  
11 connector.

12 "Commissioner" means the insurance commissioner of the  
13 department of commerce and consumer affairs.

14 "Connector" means the Hawaii health insurance exchange,  
15 known as the Hawaii health connector.

16 "Federal act" means the federal Patient Protection and  
17 Affordable Care Act, Public Law 111-148, as amended by the  
18 federal Health Care and Education Reconciliation Act of 2010,  
19 Public Law 111-152, and any amendments to, or regulations or  
20 guidance issued under, those acts.

21 "Insurer" means any person or entity that issues a policy  
22 of accident and health or sickness insurance subject to article



1 10A of chapter 431, or chapters 432 or 432D, or any dental  
2 insurer subject to chapter 432G.

3 "Qualified dental plan" means a dental benefit plan as  
4 described in section 1311(d)(2)(B)(ii) of the federal act.

5 "Qualified plan" means a health benefit plan offered by an  
6 insurer that meets the criteria for certification described in  
7 section 1311(c) of the federal act.

8 **§27-B Establishment of the Hawaii health insurance**

9 **exchange; purpose.** (a) There is established the Hawaii health  
10 insurance exchange, to be known as the Hawaii health connector,  
11 which shall be a body corporate and politic and an  
12 instrumentality and agency of the State; provided that the debts  
13 and liabilities of the Hawaii health connector shall not  
14 constitute the debts and liabilities of the State. The Hawaii  
15 health connector shall be temporarily placed within the office  
16 of the governor; provided that the connector shall be  
17 permanently established within the state health planning and  
18 development agency for administrative purposes only, on December  
19 31, 2017, or upon the approval of a state innovation waiver  
20 pursuant to section 1332 of the federal act, whichever occurs  
21 first.

22 (b) The duties of the connector shall include:



1 (1) Facilitating the purchase and sale of qualified plans  
2 and qualified dental plans;

3 (2) Connecting consumers to the information necessary to  
4 make informed health insurance choices;

5 (3) Enabling consumers to purchase coverage and manage  
6 health and dental plans electronically; and

7 (4) Performing any and all other duties required of a  
8 health insurance exchange pursuant to the federal act  
9 and this part.

10 (c) The connector shall serve as a clearinghouse for  
11 information on all qualified plans and qualified dental plans  
12 listed or included in the connector.

13 (d) The connector shall be audited annually by the auditor  
14 who shall submit the results of each annual audit to the  
15 commissioner no later than thirty days after the connector  
16 receives the results. The connector shall retain all annual  
17 audits on file, along with any documents, papers, books,  
18 records, and other evidence that is pertinent to its budget and  
19 operations for a period of ten years and shall permit the  
20 auditor, the commissioner, the legislature, or their authorized  
21 representatives to have access to, inspect, and make copies of  
22 any documents retained pursuant to this subsection.



1 (e) The board shall submit an annual report to the  
2 legislature that shall include the most recent audit report  
3 received pursuant to subsection (d), no later than twenty days  
4 prior to the convening of each regular session of the  
5 legislature.

6 (f) The connector shall offer consumer assistance in a  
7 culturally and linguistically appropriate manner.

8 (g) The connector shall make qualified plans and qualified  
9 dental plans available to qualified individuals and qualified  
10 employers beginning with effective dates on or before January 1,  
11 2014.

12 **§27-C Funding.** The connector may receive contributions,  
13 grants, endowments, fees, or gifts in cash or otherwise from  
14 public and private sources including corporations, businesses,  
15 foundations, governments, individuals, and other sources subject  
16 to rules adopted by the board. The State may appropriate moneys  
17 to the connector. As required by section 1311(d)(5)(A) of the  
18 federal act, the connector shall be self-sustaining by January  
19 1, 2015, and may charge assessments or user fees to health and  
20 dental carriers, or may otherwise generate funding to support  
21 its operations.



1           §27-D Hawaii health connector sustainability revolving  
2 fund; subaccount. (a) There is established the Hawaii health  
3 connector sustainability revolving fund into which shall be  
4 deposited moneys received by or under the supervision of the  
5 connector, pursuant to section 27-C, including:

6           (1) Hawaii health connector universal federally mandated  
7 sustainability fee revenues collected pursuant to  
8 section 27-E; and

9           (2) Any other assessments or user fees established by the  
10 connector.

11           Moneys in the Hawaii health connector sustainability  
12 revolving fund shall not be considered part of the general fund.

13           (b) A separate subaccount shall be established in the  
14 Hawaii health connector sustainability revolving fund into which  
15 shall be deposited the remainder of all moneys received by the  
16 connector from the federal government prior to January 1, 2015.  
17 Notwithstanding any provision to the contrary, moneys in this  
18 subaccount shall be expended by the connector exclusively for  
19 purposes permitted by the federal act or subject to the  
20 conditions under which the moneys were granted to the connector.

21           (c) All moneys in the Hawaii health connector  
22 sustainability revolving fund are appropriated for the purposes



1 of and shall be expended by the connector for the administration  
2 and operations of the Hawaii health insurance exchange in  
3 compliance with this part and the federal act.

4 §27-E Hawaii health connector universal federally mandated  
5 sustainability fee; determination by the insurance commissioner.

6 (a) By April 1 of each year, the board shall inform the  
7 commissioner of the amount of funding required to finance the  
8 operations and cash reserve of the connector for each ensuing  
9 fiscal year beginning on July 1; provided that the balance of  
10 the cash reserve does not exceed the value of the cost of three  
11 months of administering and operating the connector.

12 (b) Any other provision of law notwithstanding, beginning  
13 on July 1, 2015, and on each July 1 thereafter, the commissioner  
14 shall assess a fee upon each insurer, on a pro rata basis, based  
15 upon the number of individuals covered by each insurer on the  
16 preceding December 31, excluding individuals covered under a  
17 medicaid plan pursuant to Title XIX of the Social Security Act,  
18 42 U.S.C. section 1396 et seq. At the discretion of the  
19 commissioner, the fee assessed against each dental insurer  
20 subject to chapter 432G may be set at a level up to per  
21 cent of the fee assessed upon all other insurers in this  
22 subsection. The total of all revenues collected from the fee



1 shall not exceed the amount of funding required to finance the  
2 operations and cash reserve of the connector as specified in  
3 subsection (a). This fee shall be known as the Hawaii health  
4 connector universal federally mandated sustainability fee.

5 **§27-F Board of directors; composition; operation. (a)**

6 The Hawaii health connector shall be governed by a board of  
7 directors that shall comprise nine voting members as follows:

- 8 (1) The director of commerce and consumer affairs, or the  
9 director's designee;
- 10 (2) The director of human services, or the director's  
11 designee;
- 12 (3) The healthcare transformation coordinator;
- 13 (4) Two members who shall be appointed by the governor;
- 14 (5) Two members who shall be appointed by the president of  
15 the senate; and
- 16 (6) Two members who shall be appointed by the speaker of  
17 the house of representatives.

18 The board shall elect one of its members to serve as the chair  
19 of the board. The board, by majority vote, may remove or  
20 suspend for cause any member after due notice and public  
21 hearing.



1 (b) The membership of the board shall reflect geographic  
2 diversity and the diverse interests of stakeholders, including  
3 consumers and employers. Each person appointed to the board  
4 shall have education, training, or professional experience in at  
5 least one of the following areas:

6 (1) Health care policy;

7 (2) Health benefits plan administration, including  
8 medicaid administration;

9 (3) Health insurance;

10 (4) Health care financing and purchasing;

11 (5) Health care delivery;

12 (6) Information technology; or

13 (7) Economics and actuarial science.

14 In making appointments, the appointing authorities shall  
15 consider the background and expertise of all members of the  
16 board and the geographic, socioeconomic, and other  
17 characteristics of the State, so that the board's composition  
18 reflects a diversity of expertise, skills, and background  
19 relevant to the State.

20 (c) Appointed board members shall serve staggered terms of  
21 four years each, provided that the terms of the initial



1 appointments of members pursuant to subsection (a)(4) through  
2 (6), shall be as follows:

3 (1) One member appointed by each appointing authority  
4 shall be appointed for two years; and

5 (2) One member appointed by each appointing authority  
6 shall be appointed for four years.

7 Members appointed pursuant to subsection (a)(1) through (3)  
8 shall serve during their entire term of office.

9 (d) Any vacancy on the board shall be filled for the  
10 remainder of the unexpired term in the same manner as the  
11 original appointment as specified in subsection (a). Any member  
12 whose term has expired and who is not disqualified from  
13 membership may continue in office until a successor is  
14 appointed.

15 (e) The members appointed pursuant to subsection (a)(1)  
16 through (3) shall receive no additional compensation for their  
17 service on the board. The members of the board appointed under  
18 subsection (a)(4) through (6) shall serve without compensation,  
19 but shall be reimbursed for expenses, including travel expenses,  
20 incurred in the performance of their duties.

21 (f) The board shall manage the budget of the connector  
22 according to generally accepted accounting principles and a plan



1 for financial organization adopted by the legislature based upon  
2 recommendations of the board.

3       **§27-G Board meetings; transparency.** (a) In addition to  
4 the exceptions in section 92-5, the board may hold an executive  
5 meeting that is closed to the public when it is necessary for  
6 the board to consider information that is proprietary to a  
7 particular entity with which it has business dealings and the  
8 disclosure of which might be harmful to the business interest of  
9 the entity.

10       (b) The board shall adopt rules pursuant to chapter 91  
11 that require transparency of board actions, including public  
12 disclosure and posting of board minutes on the connector's  
13 website.

14       **§27-H Executive officer; employees.** (a) The board shall  
15 appoint an executive director, who shall serve at the pleasure  
16 of the board and shall be exempt from chapter 76. The board  
17 shall set the salary and duties of the executive director.

18       (b) Through its executive director, the board may appoint  
19 officers, agents, and employees, prescribe their duties and  
20 qualifications, and fix their salaries without regard to chapter  
21 76.



1           **§27-I Eligibility of insurers and plans.** The commissioner  
2 shall determine eligibility for the inclusion of insurers and  
3 plans in the connector; provided that all qualified plans and  
4 qualified dental plans that apply for inclusion shall be  
5 included in the connector.

6           **§27-J Eligibility determination for applicants in medicaid**  
7 **adult and children's health insurance program.** The department  
8 of human services shall determine the qualifications and  
9 eligibility of individuals to participate in medicaid adult or  
10 children's health insurance programs. The department of human  
11 service's determination of eligibility shall enable qualified  
12 individuals and authorized adults on behalf of qualified  
13 children to purchase qualified plans and qualified dental plans  
14 from the connector. The department of human services shall  
15 verify for the connector the eligibility of individuals and  
16 children to participate in subsidized plans purchased through  
17 the connector.

18           **§27-K Oversight; rate regulation.** (a) The commissioner,  
19 pursuant to the authority granted by part II of article 2 of  
20 chapter 431, shall retain full regulatory jurisdiction over all  
21 insurers and qualified plans and qualified dental plans included  
22 in the connector.



1 (b) Rates for qualified plans and qualified dental plans  
2 included in the connector shall be regulated pursuant to  
3 applicable state and federal law.

4 **§27-L Agents and brokers.** Certified insurance agents and  
5 brokers may enroll individuals and employers in qualified plans  
6 through the connector and assist individuals and employers in  
7 applying for applicable premium tax credits and cost-sharing  
8 reductions for which they may be eligible. The commissioner  
9 shall adopt rules for certifying insurance agents and brokers  
10 pursuant to this section; provided that the rules shall include  
11 qualifications and educational requirements for agents and  
12 brokers that comply with the federal act.

13 **§27-M Effect on the prepaid health care act.** Nothing in  
14 this part shall in any manner diminish or limit the consumer  
15 protections contained in, or alter the provisions of, chapter  
16 393.

17 **§27-N Rules.** The board shall adopt rules pursuant to  
18 chapter 91 necessary to implement this part. Rules adopted  
19 pursuant to this section shall not conflict with or prevent the  
20 application of regulations promulgated by the Secretary of the  
21 United States Department of Health and Human Services under the  
22 federal act.



1           **§27-O Network adequacy.** The commissioner shall provide  
2 the Hawaii health connector with a list of qualified health  
3 plans that meet network adequacy standards as determined by the  
4 commissioner.

5           **§27-P Procurement.** Notwithstanding any provision to the  
6 contrary, procurement by the connector shall be made pursuant to  
7 chapter 103F.

8           **§27-Q Consumer, patient, business, and health care**  
9 **advisory group.** The board shall establish a consumer, patient,  
10 business, and health care advisory group to provide input and  
11 recommendations to the board. The advisory group shall reflect  
12 geographic diversity and diversity of interests. Members shall  
13 include individuals with education, training, or professional  
14 experience in the fields of consumer advocacy, patient advocacy,  
15 health insurance, public health, health care provision,  
16 economics, financial management, risk management, and small  
17 business. Members of the advisory group shall serve in an  
18 advisory capacity only and shall not be considered state  
19 employees for any purpose. Members shall not be compensated but  
20 shall be reimbursed for necessary expenses incurred in the  
21 performance of their duties.



1           §27-R Intergovernmental agency advisory group. There is  
2 established an intergovernmental agency advisory group that  
3 shall serve in an advisory capacity to provide input and  
4 recommendations to the board. The advisory group shall consist  
5 of the following members, or their designees:

6           (1) The insurance commissioner;

7           (2) The director of health; and

8           (3) The director of labor and industrial relations.

9 The governor shall designate one member to convene and serve as  
10 the chair of the advisory group."

11           SECTION 3. Section 432F-2, Hawaii Revised Statutes, is  
12 amended by amending subsection (d) to read as follows:

13           "(d) To enable the commissioner to determine the network  
14 adequacy for qualified health plans to be listed with the Hawaii  
15 health connector under section [~~435H-11,~~] 27-0, the commissioner  
16 may request that a managed care plan demonstrate the adequacy of  
17 its provider network at the time that it files its health plan  
18 benefit document with the commissioner."

19           SECTION 4. Chapter 435H, Hawaii Revised Statutes, is  
20 repealed.

21           SECTION 5. On January 1, 2015, all rights, powers,  
22 functions, and duties of the Hawaii health connector established



1 pursuant to chapter 435H, Hawaii Revised Statutes, shall be  
2 transferred to the Hawaii health connector established pursuant  
3 to this Act, and the Hawaii nonprofit corporation known as the  
4 Hawaii health connector established pursuant to chapter 435H,  
5 Hawaii Revised Statutes, shall be dissolved.

6 Employees shall be transferred without loss of salary,  
7 seniority, prior service credit, vacation or sick leave credits  
8 previously earned, or other employee benefits or privileges as a  
9 consequence of this Act; provided that the employee possesses  
10 the legal and public employment requirements for the position to  
11 which transferred or appointed, as applicable; provided further  
12 that subsequent changes in status may be made pursuant to  
13 applicable employment and compensation laws. Any employee  
14 transferred as a consequence of this Act shall be exempt from  
15 civil service and shall not be appointed to a civil service  
16 position as a consequence of this Act. The board of directors  
17 of the Hawaii health connector established pursuant to this Act  
18 may prescribe the duties and qualifications of these employees  
19 and fix their salaries without regard to chapter 76, Hawaii  
20 Revised Statutes.

21 SECTION 6. On January 1, 2015, all appropriations,  
22 records, equipment, machines, files, supplies, contracts, books,



1 papers, documents, maps, and other personal property heretofore  
2 made, used, acquired, or held by the Hawaii nonprofit  
3 corporation known as the Hawaii health connector and established  
4 pursuant to chapter 435H, Hawaii Revised Statutes, relating to  
5 the functions transferred to the Hawaii health connector  
6 established pursuant to this Act shall be transferred with the  
7 functions to which they relate.

8 SECTION 7. On January 1, 2015, all moneys held by the  
9 Hawaii nonprofit corporation known as the Hawaii health  
10 connector and established pursuant to chapter 435H, Hawaii  
11 Revised Statutes, including but not limited to federal grant  
12 moneys, shall be transferred to the Hawaii health connector  
13 sustainability revolving fund established pursuant to section  
14 27-D, Hawaii Revised Statutes. The director of budget and  
15 finance shall take all actions necessary to effectuate the  
16 timely transfer of those moneys.

17 SECTION 8. The office of the governor shall work with the  
18 board of directors of the Hawaii health connector established  
19 under chapter 435H, Hawaii Revised Statutes, to effectuate a  
20 seamless transition of duties, functions, and records to the  
21 Hawaii health connector established pursuant to this Act.  
22 Transition procedures shall ensure that no interruption occurs



1 in the provision of health coverage or health care services to  
2 any individual or business served by or eligible for service  
3 through the Hawaii health connector.

4 Planning and coordination for the transition of the duties,  
5 functions, and records of the Hawaii health connector as  
6 provided by this Act shall be completed in a timely manner in  
7 order for the transition to take effect on January 1, 2015.

8 PART II

9 SECTION 9. There is appropriated out of the general  
10 revenues of the State of Hawaii the sum of \$ or so much  
11 thereof as may be necessary for fiscal year 2014-2015 for the  
12 administration and operations of the Hawaii health connector.

13 The sum appropriated shall be expended by the office of the  
14 governor for the purposes of this Act; provided that the Hawaii  
15 health connector first shall submit a proposed budget to the  
16 office of the governor that is based on zero-based budgeting  
17 principles and includes an itemized accounting of the proposed  
18 uses of the appropriation. For the purposes of formulating the  
19 proposed budget, "zero-based budgeting principles" means that  
20 the Hawaii health connector shall justify all projected  
21 allocations and expenditures, starting with an initial balance  
22 of zero dollars to spend.



## PART III

1  
2 SECTION 10. The legislature finds that the Patient  
3 Protection and Affordable Care Act encourages states to develop  
4 innovative approaches to insuring their populations by  
5 authorizing states to apply for waivers from certain  
6 requirements of the Act. To be eligible, a state must  
7 demonstrate that its proposed health insurance reforms are as  
8 comprehensive and affordable as the federal requirements for  
9 insurance sold in its state health insurance exchange. In  
10 addition, proposed reforms must be budget neutral for the  
11 federal government. States that are granted innovation waivers  
12 may receive federal assistance to operate their reform programs  
13 in an amount that is equivalent to the aggregate amount of tax  
14 credits and cost-sharing subsidies that the federal government  
15 would have paid for individuals enrolled in state health  
16 insurance exchanges.

17 The legislature also finds that Hawaii has a bold history  
18 as an innovator in ensuring that its residents have access to  
19 health care. The Hawaii Prepaid Health Care Act has ensured the  
20 availability of employer-sponsored health insurance for workers  
21 and their families, and the State's Med-QUEST program has  
22 provided access to comprehensive managed care for low-income



1 families. The legislature believes that, while Hawaii has taken  
2 great steps in implementing the health insurance exchange and  
3 other insurance reforms required by the Patient Protection and  
4 Affordable Care Act, the State may be able to create a more  
5 effective alternative solution for providing affordable health  
6 coverage to individuals.

7 The purpose of this part is to establish a state innovation  
8 waiver task force to develop a health care reform plan that  
9 meets requirements for obtaining a state innovation waiver.

10 SECTION 11. (a) There is created the state innovation  
11 waiver task force, to be attached to the office of the governor  
12 for administrative purposes.

13 (b) The task force shall consist of the following members,  
14 or their respective designees:

15 (1) The healthcare transformation coordinator, who shall  
16 serve as chair;

17 (2) The director of health;

18 (3) The director of commerce and consumer affairs;

19 (4) The director of labor and industrial relations;

20 (5) The administrator of the MedQUEST division of the  
21 department of human services;

22 (6) The insurance commissioner;



- 1 (7) The administrator of the Hawaii employer-union health  
2 benefits trust fund;
- 3 (8) The chairperson of the board of directors of the  
4 Hawaii Health Connector;
- 5 (9) The executive director of the Hawaii Health Connector;
- 6 (10) The executive director of the Hawaii Health  
7 Information Exchange;
- 8 (11) Two persons with expertise in health care delivery or  
9 health insurance, to be designated by president of the  
10 senate; and
- 11 (12) Two persons with expertise in health care delivery or  
12 health insurance, to be designated by the speaker of  
13 the house of representatives.
- 14 (c) The task force shall:
- 15 (1) Examine the feasibility of alternative approaches to  
16 the health reform requirements described under section  
17 1332(a)(2) of the federal act;
- 18 (2) Examine alternatives to and possible exemptions or  
19 waivers from requirements relating to allowable  
20 premium rate variations based upon age, as described  
21 in section 1201 of the federal act; and



- 1           (3) Develop a plan for applying for a state innovation
- 2           waiver that meets the requirements of section 1332 of
- 3           the federal act, including:
- 4           (A) Developing a strategy for health care reform
- 5           that:
- 6           (i) Provides coverage that is at least as
- 7           comprehensive as required by the federal
- 8           act;
- 9           (ii) Provides coverage and cost-sharing
- 10           protections that are at least as affordable
- 11           as under the federal act;
- 12           (iii) Makes health insurance coverage available to
- 13           as many residents of Hawaii as under the
- 14           federal act; and
- 15           (iv) Is budget neutral for the federal
- 16           government;
- 17           (B) Examining the feasibility of options for
- 18           providing affordable insurance coverage for
- 19           uninsured and underinsured individuals in Hawaii
- 20           that include innovations to the State's existing
- 21           medicaid program; and



1 (C) Ensuring compliance with all applicable public  
2 notice requirements of 31 Code of Federal  
3 Regulations part 33 and 45 Code of Federal  
4 Regulations part 155, as amended.

5 (d) The task force shall prepare a draft application for a  
6 state innovation waiver, to take effect for plan years beginning  
7 after January 1, 2017.

8 (e) The members of the task force shall serve without  
9 compensation but shall be reimbursed for expenses, including  
10 travel expenses, necessary for the performance of their duties.

11 (f) The task force shall submit a report of its findings  
12 and recommendations to the legislature, including any proposed  
13 legislation and the draft application, no later than twenty days  
14 prior to the convening of the regular session of 2016.

15 (g) The task force shall be dissolved on June 30, 2017.

16 (h) For the purposes of this section, "federal act" means  
17 the Patient Protection and Affordable Care Act (Public Law 111-  
18 148), as amended, and any regulations adopted thereunder.

19 SECTION 12. There is appropriated out of the general  
20 revenues of the State of Hawaii the sum of \$ or so much  
21 thereof as may be necessary for fiscal year 2014-2015 for the  
22 operations of the state innovation waiver task force.





**Report Title:**

Health; Hawaii Health Connector; Sustainability Fee; State  
Innovation Waiver

**Description:**

Establishes the Hawaii Health Connector as a state entity as of 01/01/2015. Creates the consumer, patient, business, and health care advisory group and the intergovernmental agency advisory group to advise the Connector board of directors. Appropriates moneys to the Connector. Establishes a sustainability fee to support operations of the Connector. Establishes and appropriates moneys for a state innovation waiver task force to develop a plan for applying for a state innovation waiver under the PPACA. (HD1)

*The summary description of legislation appearing on this page is for informational purposes only and is not legislation or evidence of legislative intent.*

