



General Assembly

**Amendment**

January Session, 2015

LCO No. 9023



Offered by:  
SEN. KELLY, 21<sup>st</sup> Dist.

To: Subst. House Bill No. 5435      File No. 398      Cal. No. 607

**"AN ACT CONCERNING THE COMMISSION ON HEALTH EQUITY."**

1      After the last section, add the following and renumber sections and  
2      internal references accordingly:

3      "Sec. 501. Section 38a-1083 of the general statutes is repealed and the  
4      following is substituted in lieu thereof (*Effective from passage*):

5      (a) For purposes of sections 38a-1080 to 38a-1091, inclusive,  
6      "purposes of the exchange" means the purposes of the exchange  
7      expressed in and pursuant to this section, which are hereby  
8      determined to be public purposes for which public funds may be  
9      expended. The powers enumerated in this section shall be interpreted  
10     broadly to effectuate the purposes of the exchange and shall not be  
11     construed as a limitation of powers.

12     (b) The goals of the exchange shall be to reduce the number of  
13     individuals without health insurance in this state and assist  
14     individuals and small employers in the procurement of health

15 insurance by, among other services, offering easily comparable and  
16 understandable information about health insurance options.

17 (c) The exchange is authorized and empowered to:

18 (1) Have perpetual [successions] succession as a body politic and  
19 corporate and to adopt bylaws for the regulation of its affairs and the  
20 conduct of its business;

21 (2) Adopt an official seal and alter the same at pleasure;

22 (3) Maintain an office in the state at such place or places as it may  
23 designate;

24 (4) Employ such assistants, agents, managers and other employees  
25 as may be necessary or desirable;

26 (5) Acquire, lease, purchase, own, manage, hold and dispose of real  
27 and personal property, and lease, convey or deal in or enter into  
28 agreements with respect to such property on any terms necessary or  
29 incidental to the carrying out of these purposes, provided all such  
30 acquisitions of real property for the exchange's own use with amounts  
31 appropriated by this state to the exchange or with the proceeds of  
32 bonds supported by the full faith and credit of this state shall be  
33 subject to the approval of the Secretary of the Office of Policy and  
34 Management and the provisions of section 4b-23;

35 (6) Receive and accept, from any source, aid or contributions,  
36 including money, property, labor and other things of value;

37 (7) Charge assessments or user fees to health carriers that are  
38 capable of offering a qualified health plan through the exchange or  
39 otherwise generate funding necessary to support the operations of the  
40 exchange and impose interest and penalties on such health carriers for  
41 delinquent payments of such assessments or fees;

42 (8) Procure insurance against loss in connection with its property

43 and other assets in such amounts and from such insurers as it deems  
44 desirable;

45 (9) Invest any funds not needed for immediate use or disbursement  
46 in obligations issued or guaranteed by the United States of America or  
47 the state and in obligations that are legal investments for savings banks  
48 in the state;

49 (10) Issue bonds, bond anticipation notes and other obligations of  
50 the exchange for any of its corporate purposes, and to fund or refund  
51 the same and provide for the rights of the holders thereof, and to  
52 secure the same by pledge of revenues, notes and mortgages of others;

53 (11) Borrow money for the purpose of obtaining working capital;

54 (12) Account for and audit funds of the exchange and any recipients  
55 of funds from the exchange;

56 (13) Make and enter into any contract or agreement necessary or  
57 incidental to the performance of its duties and execution of its powers.  
58 The contracts entered into by the exchange shall not be subject to the  
59 approval of any other state department, office or agency, provided  
60 copies of all contracts of the exchange shall be maintained by the  
61 exchange as public records, subject to the proprietary rights of any  
62 party to the contract;

63 (14) To the extent permitted under its contract with other persons,  
64 consent to any termination, modification, forgiveness or other change  
65 of any term of any contractual right, payment, royalty, contract or  
66 agreement of any kind to which the exchange is a party;

67 (15) Award grants to trained and certified individuals and  
68 institutions that will assist individuals, families and small employers  
69 and their employees in enrolling in appropriate coverage through the  
70 exchange. Applications for grants from the exchange shall be made on  
71 a form prescribed by the board;

72 (16) Limit the number of plans offered, and use selective criteria in  
73 determining which plans to offer, through the exchange, provided  
74 individuals and employers have an adequate number and selection of  
75 choices;

76 (17) Evaluate jointly with the Sustinet Health Care Cabinet the  
77 feasibility of implementing a basic health program option as set forth  
78 in Section 1331 of the Affordable Care Act;

79 (18) Sue and be sued, plead and be impleaded;

80 (19) Adopt regular procedures that are not in conflict with other  
81 provisions of the general statutes, for exercising the power of the  
82 exchange; and

83 (20) Do all acts and things necessary and convenient to carry out the  
84 purposes of the exchange, provided such acts or things shall not  
85 conflict with the provisions of the Affordable Care Act, regulations  
86 adopted thereunder or federal guidance issued pursuant to the  
87 Affordable Care Act.

88 (d) Prior to changing the amount of an assessment or user fee  
89 charged to any health carrier pursuant to subdivision (7) of subsection  
90 (c) of this section, if such change is for more than a ten per cent  
91 increase, the board shall submit such proposed change with the joint  
92 standing committee of the General Assembly having cognizance of  
93 matters relating to insurance. Not later than thirty days after the date  
94 of such submission, said committee shall hold a public hearing on and  
95 vote to approve or reject such proposed change. If said committee fails  
96 to hold a public hearing or to vote to approve or reject such proposed  
97 change within the thirty-day period, the proposed change shall be  
98 deemed approved.

99 [(d)] (e) (1) The chief executive officer of the exchange shall provide  
100 to the commissioner the name of any health carrier that fails to pay any  
101 assessment or user fee under subdivision (7) of subsection (c) of this  
102 section to the exchange. The commissioner shall see that all laws

103 respecting the authority of the exchange pursuant to said subdivision  
 104 (7) are faithfully executed. The commissioner has all the powers  
 105 specifically granted under this title and all further powers that are  
 106 reasonable and necessary to enable the commissioner to enforce the  
 107 provisions of said subdivision (7).

108 (2) Any health carrier aggrieved by an administrative action taken  
 109 by the commissioner under subdivision (1) of this subsection may  
 110 appeal therefrom in accordance with the provisions of section 4-183,  
 111 except venue for such appeal shall be in the judicial district of New  
 112 Britain."

This act shall take effect as follows and shall amend the following sections:		
Sec. 501	<i>from passage</i>	38a-1083