



General Assembly

**Substitute Bill No. 15**

February Session, 2022



**AN ACT ENCOURAGING PRIMARY AND PREVENTIVE CARE.**

Be it enacted by the Senate and House of Representatives in General Assembly convened:

1 Section 1. Section 38a-477kk of the 2022 supplement to the general  
2 statutes is repealed and the following is substituted in lieu thereof  
3 (*Effective January 1, 2024*):

4 (a) For the purposes of this section:

5 (1) "Health carrier" has the same meaning as provided in section 38a-  
6 1080; and

7 (2) "Third-party administrator" has the same meaning as provided in  
8 section 38a-720.

9 (b) Each health carrier or third-party administrator that issues a card  
10 to an individual in this state for the purpose of enabling such individual  
11 to prove that such individual has health coverage shall include in such  
12 card a statement disclosing whether such coverage is fully insured or  
13 self-insured. Such statement shall be prominently displayed on such  
14 card in a readily understandable, standardized form prescribed by the  
15 Insurance Commissioner.

16 (c) The Insurance Commissioner may adopt regulations, in

17 accordance with the provisions of chapter 54, to implement the  
18 provisions of this section.

19 (d) Each health carrier or third-party administrator that issues a card  
20 to an individual in this state for the purpose of enabling such individual  
21 to prove that such individual has health coverage shall prominently  
22 display the following information on such card in a readily  
23 understandable manner, in addition to the information provided in  
24 subsection (b) of this section:

25 (1) The name of, and contact information for, an in-network primary  
26 care provider whom the individual has designated to serve as such  
27 individual's preferred primary care provider; or

28 (2) If the individual has not designated a preferred primary care  
29 provider under subdivision (1) of this subsection, a telephone number  
30 maintained by such health carrier or third-party administrator for the  
31 purpose of assisting such individual with accessing telehealth or a list  
32 of local in-network primary care providers accepting new patients, or  
33 the address of an Internet web site maintained by such health carrier or  
34 third-party administrator for the purpose of enabling such individual to  
35 contact, and schedule appointments with, local in-network primary care  
36 providers, unless such health carrier or third-party administrator issues  
37 a separate card to an individual for purposes of such services.

38 (e) The information required to be included on each card under  
39 subsection (d) of this section may alternatively be made available in  
40 electronic card format by the health carrier or third-party administrator,  
41 if requested by the insured member. Any member who requests an  
42 electronic card may also receive such card in hard copy via mail.

43 Sec. 2. (NEW) (*Effective January 1, 2023*) (a) (1) For the purposes of this  
44 section, "chronic disease" means coronary artery disease, diabetes,  
45 hyperlipidemia or hypertension.

46 (2) "Health enhancement program" means a health benefit program  
47 that ensures access and removes barriers to essential, high-value clinical

48 services.

49 (b) (1) Not later than January 1, 2024, each insurer, health care center,  
50 hospital service corporation, medical service corporation, fraternal  
51 benefit society or other entity that delivers, issues for delivery, renews,  
52 amends or continues in this state an individual or group health  
53 insurance policy providing coverage of the type specified in  
54 subdivisions (1), (2), (4), (11) and (12) of section 38a-469 of the general  
55 statutes shall develop not less than two health enhancement programs  
56 under such policy.

57 (2) Each health enhancement program developed pursuant to  
58 subdivision (1) of this subsection shall:

59 (A) Be available to each insured under the individual or group health  
60 insurance policy; and

61 (B) Provide to each insured under the individual or group health  
62 insurance policy incentives that are directly related to the provision of  
63 health insurance coverage, provided such insured chooses to complete  
64 certain preventive examinations and screenings recommended by the  
65 United States Preventive Services Task Force with a rating of "A" or "B".

66 (3) No health enhancement program developed pursuant to  
67 subdivision (1) of this subsection shall impose any penalty or other  
68 negative incentive on an insured under the individual or group health  
69 insurance policy nor shall any insured be required to participate in a  
70 health enhancement program.

71 (c) Each individual health insurance policy providing coverage of the  
72 type specified in subdivisions (1), (2), (4), (11) and (12) of section 38a-469  
73 of the general statutes delivered, issued for delivery, renewed, amended  
74 or continued in this state shall include coverage for the health  
75 enhancement programs that the insurer, health care center, hospital  
76 service corporation, medical service corporation, fraternal benefit  
77 society or other entity that delivered, issued, renewed, amended or  
78 continued such policy developed pursuant to this section.

79 (d) Each group health insurance policy providing coverage of the  
80 type specified in subdivisions (1), (2), (4), (11) and (12) of section 38a-469  
81 of the general statutes delivered, issued for delivery, renewed, amended  
82 or continued in this state shall include coverage for the health  
83 enhancement programs that the insurer, health care center, hospital  
84 service corporation, medical service corporation, fraternal benefit  
85 society or other entity that delivered, issued, renewed, amended or  
86 continued such policy developed pursuant to this section.

87 (e) The Insurance Commissioner may adopt regulations, in  
88 accordance with the provisions of chapter 54 of the general statutes, to  
89 implement the provisions of this section.

90 Sec. 3. (NEW) (*Effective January 1, 2024*) (a) For the purposes of this  
91 section:

92 (1) "Department" means the Department of Social Services; and

93 (2) "Connecticut medical assistance program" means the state's  
94 Medicaid program and the Children's Health Insurance program  
95 administered by the Department of Social Services.

96 (b) On any applicable card that the department issues to an  
97 individual eligible for the Connecticut medical assistance program and  
98 at the time such card is issued based on current practice, in addition to  
99 other information that the department may include, the department  
100 shall include on such card, to the extent that the following information  
101 is available at the time the card is issued:

102 (1) The name of, and contact information for, a primary care provider  
103 enrolled in the Connecticut medical assistance program whom the  
104 individual has designated to serve as such individual's preferred  
105 primary care provider, or the primary care provider whom the  
106 department or its agent has identified as the primary care provider to  
107 whom the individual has been attributed based on analysis of available  
108 health care claims information for the individual; or

109 (2) If the individual has not designated a preferred primary care  
110 provider under subdivision (1) of this subsection and the department is  
111 not able to attribute the individual to a primary care provider based on  
112 available health care claims information for the individual, the  
113 department shall include on such card a notation to contact the  
114 department's agent, with available contact information or a reference to  
115 such agent, for assistance with finding, contacting and scheduling  
116 appointments with primary care providers enrolled in the Connecticut  
117 medical assistance program.

This act shall take effect as follows and shall amend the following sections:		
Section 1	<i>January 1, 2024</i>	38a-477kk
Sec. 2	<i>January 1, 2023</i>	New section
Sec. 3	<i>January 1, 2024</i>	New section

**INS**      *Joint Favorable Subst.*