

Senate Bill 9 - Prefile

By: Senator Seay of the 34th

A BILL TO BE ENTITLED
AN ACT

1 To amend Code Section 20-2-911 of the Official Code of Georgia Annotated, relating to the
2 Board of Community Health to establish plan, rules and regulations, extent of coverage, and
3 recommendations to General Assembly for scheduling of maximum fees for hospitals and
4 practitioners, so as to require that the board shall reopen the 2014 open enrollment period to
5 permit any employee whose elected medical claims administrator declared a major medical
6 facility to be out of such administrator's network to elect coverage under a different
7 administrator; to make legislative findings; to define certain terms; to amend Article 1 of
8 Chapter 18 of Title 45 of the Official Code of Georgia Annotated, relating to the State
9 Employees' Health Insurance Plan, so as to require that the Board of Community Health shall
10 reopen the 2014 open enrollment period to permit any employee whose elected medical
11 claims administrator declared a major medical facility to be out of such administrator's
12 network to elect coverage under a different administrator; to define certain terms; to provide
13 for an effective date; to repeal conflicting laws; and for other purposes.

14 BE IT ENACTED BY THE GENERAL ASSEMBLY OF GEORGIA:

15 style="text-align:center">**SECTION 1.**

16 The General Assembly makes the following findings:

- 17 (1) The State of Georgia negotiated in good faith with Blue Cross Blue Shield based on
18 the assumption that Blue Cross Blue Shield would maintain a comparable level of service
19 for 2015;
- 20 (2) Teachers and state employees who selected Blue Cross Blue Shield did so based on
21 their coverage network;
- 22 (3) Blue Cross Blue Shield forced Grady Memorial Hospital out of their coverage
23 network by refusing to pay the same reimbursement rates that they pay private hospitals;
- 24 (4) Grady serves a large number of teachers and state employees for a variety of services
25 and is the premier trauma center in the state;

- 26 (5) Most private hospitals favored by Blue Cross Blue Shield do not even have an L1
 27 trauma center;
- 28 (6) Teachers and state employees have been irreparably harmed by Blue Cross Blue
 29 Shield's decision to force a major hospital and top trauma center out of network;
- 30 (7) Georgia finds Blue Cross Blue Shield in breach of its obligation to provide adequate
 31 health care for teachers and state employees; and
- 32 (8) Georgia will therefore reopen open enrollment for the state health benefit plan so
 33 teachers and state employees deceived by Blue Cross Blue Shield can choose adequate
 34 health insurance.

35 SECTION 2.

36 Code Section 20-2-911 of the Official Code of Georgia Annotated, relating to board to
 37 establish plan, rules and regulations, extent of coverage, and recommendations to General
 38 Assembly for scheduling of maximum fees for hospitals and practitioners, is amended by
 39 adding a new subsection to read as follows:

40 "(f)(1) As used in this subsection, the term:

41 (A) 'Defaulting medical claims administrator' means any medical claims administrator
 42 under the State Health Benefit Plan which, after the close of the open enrollment period
 43 for 2014, declared a major medical facility to be outside of such medical claims
 44 administrator's network.

45 (B) 'Open enrollment period for 2014' means the period from October 27, 2014,
 46 through November 14, 2014, during which persons eligible to participate in the State
 47 Health Benefit Plan were permitted to choose coverage options under such plan.

48 (2) Not later than two weeks after the effective date of this Code section, the board shall
 49 reopen the open enrollment period for 2014 during which any employee covered under
 50 a defaulting medical claims administrator shall have the option to elect coverage under
 51 a different medical claims administrator."

52 SECTION 3.

53 Article 1 of Chapter 18 of Title 45 of the Official Code of Georgia Annotated, relating to the
 54 State Employees' Health Insurance Plan, is amended by adding a new Code section to read
 55 as follows:

56 "45-18-22.

57 (a) As used in this Code section, the term:

58 (1) 'Defaulting medical claims administrator' means any medical claims administrator
 59 under the State Health Benefit Plan which, after the close of the open enrollment period

60 for 2014, declared a major medical facility to be outside of such medical claims
61 administrator's network.

62 (2) 'Open enrollment period for 2014' means the period from October 27, 2014, through
63 November 14, 2014, during which persons eligible to participate in the State Health
64 Benefit Plan were permitted to choose coverage options under such plan.

65 (b) Not later than two weeks after the effective date of this Code section, the board shall
66 reopen the open enrollment period for 2014 during which any employee covered under a
67 defaulting medical claims administrator shall have the option to elect coverage under a
68 different medical claims administrator."

69 **SECTION 4.**

70 This Act shall become effective upon its approval by the Governor or upon its becoming law
71 without such approval.

72 **SECTION 5.**

73 All laws and parts of laws in conflict with this Act are repealed.