LC006163

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## STATE OF RHODE ISLAND

## IN GENERAL ASSEMBLY

## **JANUARY SESSION, A.D. 2024**

## JOINT RESOLUTION

RESPECTFULLY REQUESTING HEALTHSOURCE RI (HSRI) TO CONVENE A WORKING GROUP TO STUDY THE ISSUE OF AFFORDABILITY OF COVERAGE IN THE RHODE ISLAND HEALTH INSURANCE INDIVIDUAL MARKET AND TO PROVIDE RECOMMENDATIONS ON THE DESIGN OF A STATE-BASED PROGRAM TO PROVIDE AFFORDABILITY ASSISTANCE TO RHODE ISLANDERS ENROLLED IN PLANS THROUGH THE HSRI EXCHANGE

Introduced By: Senator Joshua Miller

Date Introduced: May 21, 2024

Referred To: Senate Health & Human Services

1 WHEREAS, Many Rhode Islanders report serious challenges in accessing health care 2 services due to high and rising deductibles, out-of-pocket costs, and monthly health insurance 3 premiums; and 4 WHEREAS, According to the 2024 Rhode Island Market Summary published by the 5 Office of the Health Insurance Commissioner, Rhode Islanders enrolled in health insurance coverage through the individual market pay higher cost sharing than Rhode Islanders enrolled in 6 7 health insurance coverage through the small or large group markets; and 8 WHEREAS, Research studies have demonstrated that higher cost sharing has been shown to decrease consumers' utilization of needed medical services, including preventive care and 9 10 essential drugs; and 11 WHEREAS, Increases in consumer cost sharing are seen to influence adverse outcomes 12 for vulnerable populations, including the elderly, chronically ill, and low income; and 13 WHEREAS, HealthSource RI (HSRI) documented in its 2022 Health Information Survey 14 a 21 percent increase in out-of-pocket costs between 2020 and 2022, noting this was "the highest 15 reported out-of-pocket spending since the [HSRI] survey began in 2012"; and WHEREAS, In the same HSRI 2022 Health Information Survey, 14.9 percent of Rhode 16

Islanders reported that, despite having health insurance coverage, they experienced problems

2	WHEREAS, HSRI reports that after the end of the COVID-19 public health emergency,
3	at least 14,000 low- and middle-income Rhode Islanders who had retained Medicaid coverage
4	during the pandemic transitioned to HSRI individual market coverage where premiums and out-
5	of-pocket costs may result in individuals foregoing needed medical care or face unexpectedly
6	high bills for medical treatment; and
7	WHEREAS, The Kaiser Family Foundation has noted that "for people and families with
8	limited assets, even a relatively small unexpected medical expense can be unaffordable"; and
9	WHEREAS, Federal enhanced advance premium tax credits were established under the
0	2021 American Rescue Plan and extended by the 2022 Inflation Reduction Act, helping expand
1	health insurance premium affordability support for millions of Americans and helping reduce
2	uninsured rates in Rhode Island to an all-time low of 2.9 percent; and
.3	WHEREAS, Federal enhanced advance premium tax credits are scheduled to expire in
4	December 2025, potentially jeopardizing years of coverage gains and making health insurance
5	unaffordable for many middle-income Rhode Islanders; and
6	WHEREAS, Without this federal support some Rhode Islanders could be expected to pay
7	up to 36 percent of their income simply to enroll into health insurance, thereafter facing
8	additional charges for out-of-pocket medical costs; and
9	WHEREAS, Other states have established successful state-based programs to lower
20	health insurance premiums and out-of-pocket health care costs for low- and middle-income
21	residents, including Massachusetts, Colorado, and Washington; and
22	WHEREAS, The urgency of the potential increase in health insurance premiums for
23	many middle-income Rhode Islanders, particularly those who have recently lost Medicaid
24	coverage held through the COVID-19 pandemic, necessitates immediate action to design a Rhode
25	Island state-based affordability program and the funding mechanism for such a program; now,
26	therefore be it
27	RESOLVED, That this General Assembly of the State of Rhode Island hereby
28	respectfully requests HealthSource RI (HSRI) to convene a working group to study the issue of
29	affordability of coverage in the Rhode Island health insurance individual market and to make
80	recommendations on the design of a state-based program to provide affordability assistance to
31	Rhode Islanders enrolled in plans through the HSRI exchange; and be it further
32	RESOLVED, That this General Assembly hereby requests that HSRI invites participation
3	in this working group from members of the Exchange Advisory Board established by § 42-157-7
34	of the General Laws, and further invites additional participants to ensure meaningful participation

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paying medical bills; and

1	from each of the following groups: the Office of the Health Insurance Commissioner, the
2	Executive Office of Health and Human Services, health insurance carriers, health care providers
3	(including primary care providers, behavioral health care providers, and hospitals), health care
4	consumers and health care consumer advocacy organizations, and businesses which purchase or
5	otherwise provide health insurance coverage for their employees; and be it further
6	RESOLVED, That this General Assembly hereby requests that the working group
7	considers and issues recommendations regarding mechanisms that directly address both the
8	monthly premium cost of health insurance obtained through HSRI and the out-of-pocket costs
9	paid by enrollees upon receipt of health care services, currently addressed by federal advance
10	premium tax credits and cost-sharing reductions, respectively; and be it further
11	RESOLVED, That this General Assembly hereby requests that in its study and
12	recommendations, the working group specifically addresses the impact of the expiration of
13	federal enhanced advance premium tax credits established under the American Rescue Plan and
14	extended by the Inflation Reduction Act, which are currently expected to expire at the end of
15	calendar year 2025; and be it further
16	RESOLVED, That this General Assembly hereby requests that the working group
17	delivers its recommendations as to the design of such state-based affordability program based on
18	a total funding amount of \$20 million, and to additionally deliver recommendations as to how
19	such design would be modified if the total funding amount were to be halved (i.e. \$10 million) or
20	doubled (i.e. \$40 million); and be it further
21	RESOLVED, That this General Assembly hereby requests that the working group
22	additionally studies and reports to the General Assembly as to potential funding mechanisms
23	which could be designed and established to pay for such state-based affordability program and the
24	positive and negative attributes of each funding mechanism, including, but not limited to, state
25	general revenue, assessments on health insurance issuers, other assessments on health care
26	industry entities, special assessments, proceeds from existing or new excise taxes, funds from the
27	Rhode Island Health Insurance Mandate, and any federal funding source identified; and be it
28	further
29	RESOLVED, That this General Assembly hereby requests that HSRI submits a report on
30	the recommendations delivered by the working group to the Speaker of the House, the President
31	of the Senate, and the Governor on or before November 1, 2024; and be it further
32	RESOLVED, That the Secretary of State be and hereby is authorized and directed to
33	transmit duly certified copies of this resolution to HealthSource RI, the Office of the Health
34	Insurance Commissioner, the Executive Office of Health and Human Services, and the Honorable

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Daniel McKee, Governor of the State of Rhode Island.