

Hall of the House of Representatives

95th General Assembly - Regular Session, 2025

Amendment Form

Subtitle of House Bill 1930

TO MANDATE MINIMUM REIMBURSEMENT LEVELS FOR HEALTHCARE SERVICES.

Amendment No. 1 to House Bill 1930

Amend House Bill 1930 as originally introduced:

Page 3, line 36, delete "or"

AND

Page 4, delete line 1, and substitute the following:

"(ix) A long-term care insurance plan; or

(x) A health benefit plan provided by an institution

of higher education;"

AND

Page 4, delete line 22

AND

Page 4, delete line 24, and substitute the following:

"benefits to state and public school employees under § 21-5-401 et seq.; or

(v) An entity that offers a plan providing health

benefits to an institution of higher education;"

AND

Page 5, delete lines 35 and 36, and substitute the following:



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- "(1) On or after January 1, 2026, forty-five percent (45%);
- (2) On or after January 1, 2027, fifty-five percent (55%);
- (3) On or after January 1, 2028, sixty-five percent (65%);
- (4) On or after January 1, 2029, seventy-five percent (75%); and
- (5) On or after January 1, 2030, one hundred percent (100%)."

AND

Page 6, delete line 1

AND

Page 7, delete lines 15 through 17, and substitute the following:

"the patient.

23-99-1905. Prohibition on pricing increases.

(a) Before a healthcare insurer's implementation of an increase in premium rates, cost sharing, or per-member-per-month costs or payments for rates or insurance policies that are required to be reviewed by the Insurance Commissioner, under §§ 23-79-109 and 23-79-110 the commissioner shall consider the following additional factors in his or her review:

(1) The extent to which the healthcare insurer's RBC level as defined in § 23-63-1302 is less than six hundred fifty percent (650%); and

(2)(A) To the extent permitted by federal law, whether the healthcare insurer's medical loss ratio is greater than eighty-five percent (85%) on clinical services and quality improvement.

(B) The calculation of medical claims and quality improvements for a healthcare insurer's medical loss ratio under subdivision (a)(2)(A) of this section shall exclude:

(i) Any performance-based compensation, bonus, or other financial incentive paid directly or indirectly to a contracting entity employee, affiliate, contractor, or other entity or individual;

(ii) Any expense associated with carrying enrollee medical debt; and

(iii) Cost sharing.

(b) A healthcare insurer in the fully insured group market shall

consider the factors in subsection (a) of this section before implementing an increased premium rate, cost sharing, or enrollee per-member-per-month fee.

23-99-1906. Rules."

The Amendment was read _____
By: Representative Wardlaw
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ANS510 _____ Chief Clerk