## **EXHIBIT F4**

1	I INTERIM STU	JDY PROPOSAL 2023-010	
2		A D'11	
3	94th General Assembly	A Bill	ANS/ANS
4	4 Regular Session, 2023		HOUSE BILL
5	5		
6	By: Representative Wardlaw		
7	7	Filed with:	Arkansas Legislative Counci
8	3	Ī	pursuant to A.C.A. §10-3-217
9	For An A	Act To Be Entitled	
10	AN ACT TO ESTABLISH A	STATE-BASED HEALTH INS	URANCE
11	MARKETPLACE; TO TRANSF	ER THE ARKANSAS HEALTH	]
12	2 INSURANCE MARKETPLACE	FROM THE STATE INSURAN	ICE
13	DEPARTMENT; TO CREATE	A BOARD OF DIRECTORS O	F THE
14	4 ARKANSAS HEALTH INSURA	NCE MARKETPLACE; TO DE	CLARE AN
15	EMERGENCY; AND FOR OTH	ER PURPOSES.	
16	6		
17	7		
18	3	Subtitle	
19	TO TRANSFER THE A	RKANSAS HEALTH INSURAN	NCE
20	MARKETPLACE FROM	THE STATE INSURANCE	
21	DEPARTMENT; TO CR	EATE A BOARD OF	
22	DIRECTORS OF THE	ARKANSAS HEALTH	
23	3 INSURANCE MARKETP	PLACE; AND TO DECLARE A	AN
24	4 EMERGENCY.		
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26	5		
27	BE IT ENACTED BY THE GENERAL ASSEM	BLY OF THE STATE OF AR	KANSAS:
28	3		
29	SECTION 1. DO NOT CODIFY.	Transfer of Arkansas H	ealth Insurance
30	Marketplace from State Insurance D	epartment.	
31	(a) The Arkansas Health Ins	urance Marketplace is	transferred from the
32	State Insurance Department to the	Board of Directors of	the Arkansas Health
33	3 <u>Insurance Marketplace.</u>		
34	(b) The powers, duties, fund	ctions, records, contr	acts, property,
35	unexpended balances of appropriation	ons, allocations, and	other funds of the

- 1 Arkansas Health Insurance Marketplace are transferred to the Board of 2 Directors of the Arkansas Health Insurance Marketplace. 3 (c)(1) The transfer of the Arkansas Health Insurance Marketplace from 4 the State Insurance Department does not affect the orders, rules, regulations, directives, registration, licensing, or standards made or 5 6 promulgated by the Arkansas Health Insurance Marketplace the effective date 7 of this act. 8 (2) The orders, rules, regulations, directives, registration, 9 licensing, or standards under subdivision (c)(1) of this section shall 10 continue with full force and effect until amended or repealed under authority given by law. 11 12 (d) The State Insurance Department shall grant access to and provide all information requested by the Board of Directors of the Arkansas Health 13 14 Insurance Marketplace. 15 SECTION 2. Arkansas Code § 23-61-803 is amended to read as follows: 16 17 23-61-803. Arkansas Health Insurance Marketplace — Board of Directors 18 of the Arkansas Health Insurance Marketplace. 19 (a) The Arkansas Health Insurance Marketplace is created as a division 20 within the State Insurance Department There is created a nonprofit legal 21 entity to be known as the "Arkansas Health Insurance Marketplace". 22 (b)(1) The Arkansas Health Insurance Marketplace is created as a 23 political subdivision, instrumentality, and body politic of the State of 24 Arkansas and, as such, is not a state agency. 25 (2) Except to the extent provided by this subchapter, the 26 Arkansas Health Insurance Marketplace is exempt from: 27 (A) All state, county, and local taxes; and (B) All laws other than the Freedom of Information Act of 28 29 1967, § 25-19-101 et seq., governing state agencies, including without 30 limitation: 31 (i) The Arkansas Procurement Law, § 19-11-201 et 32 seq.; (ii) The Uniform Classification and Compensation 33 34 Act, § 21-5-201 et seq.; and
  - § 25-15-201 et seq.

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(iii)(a) The Arkansas Administrative Procedure Act,

1	(b) The Arkansas Health Insurance Marketplace
2	shall adopt policies, procedures, and rules to implement its obligations
3	under this subchapter.
4	(3)(A) Before the adoption, amendment, or repeal of any policy,
5	procedure, or rule, the Arkansas Health Insurance Marketplace shall:
6	(i)(a)(1) Give at least thirty (30) days' notice of
7	its intended action.
8	(2) The thirty-day period under
9	subdivision (a)(3)(A)(i)(a)(1) of this section shall begin on the first day
10	of the publication of notice.
11	(b) The notice shall include a statement of
12	the terms or substance of the intended action or a description of the
13	subjects and issues involved and the time, the place, and the manner in which
14	interested persons may present their views on the intended action or the
15	subjects and issues involved.
16	(c) The notice shall be mailed to any person
17	specified by law and to all persons who have requested advance notice of
18	rule-making proceedings.
19	(d)(1) Unless otherwise provided by law, the
20	notice shall be published in a newspaper of general daily circulation for
21	three (3) consecutive days and, when appropriate, in those trade, industry,
22	or professional publications that the Arkansas Health Insurance Marketplace
23	may select.
24	(2) The notice shall be published by the
25	Secretary of State on the website of the Secretary of State for thirty (30)
26	days according to § 25-15-218; and
27	(ii)(a)(l) Afford all interested persons at least
28	thirty (30) days to submit written data, views, or arguments, orally or in
29	writing.
30	(2) The thirty-day period under
31	subdivision (a)(3)(A)(ii)(a)(l) of this section shall begin on the first day
32	of the publication of notice under subdivision (b)(3)(A)(i)(a)(l) of this
33	section.
34	(b) Opportunity for an oral hearing shall be
35	granted if requested by twenty-five (25) persons, by a governmental

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subdivision or agency, or by an association having no fewer than twenty-five
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 2
     (25) members.
 3
                                  (c) The Arkansas Health Insurance Marketplace
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     shall fully consider all written and oral submissions concerning the proposed
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     rule before finalizing the language of the proposed rule and filing the
 6
     proposed rule as required by subdivision (b)(3)(E) of this section.
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                                  (d) Upon the adoption, amendment, or repeal of
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     a policy, procedure, or rule, the Arkansas Health Insurance Marketplace, if
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     requested to do so by an interested person either before adoption, amendment,
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     or repeal or within thirty (30) days thereafter, shall issue a concise
     statement of the principal reasons for and against its adoption, amendment,
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12
     or repeal, incorporating therein its reasons for overruling the
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     considerations urged against its adoption, amendment, or repeal.
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                       (B) The thirty-day periods for giving public notice under
     subdivision (b)(3)(A)(i)(a)(1) of this section and for receiving written
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     data, views, or arguments, orally or in writing, under subdivision
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17
     (b)(3)(A)(ii)(a)(1) of this section shall run concurrently.
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                       (C)(i) If the Arkansas Health Insurance Marketplace finds
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     that imminent peril to the public health, safety, or welfare or compliance
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     with federal laws or regulations requires adoption of a policy, procedure, or
     rule upon less than thirty (30) days' notice and states in writing its
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     reasons for that finding, it may proceed without prior notice or hearing, or
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     upon any abbreviated notice and hearing that it may choose, to adopt an
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     emergency rule.
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                             (ii) The rule may be effective for no longer than
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     one hundred twenty (120) days.
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                            (iii) If, after the expiration of the effective
     period of an emergency rule, the Arkansas Health Insurance Marketplace wishes
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     to adopt a successive emergency rule that is identical or substantially
     similar to the expired emergency rule, the Arkansas Health Insurance
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     Marketplace shall not adopt the successive emergency rule earlier than thirty
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     (30) days after the expiration of the emergency rule.
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                       (D)(i) The Arkansas Health Insurance Marketplace shall
     file with the Legislative Council, the Secretary of State, the Arkansas State
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     Library, and the Bureau of Legislative Research a copy of each policy,
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1	procedure, or rule adopted by it and a statement of financial impact for the
2	rule.
3	(ii) The Secretary of State shall keep a copy of
4	each policy, procedure, or rule filed under subdivision (b)(3)(D)(i) of this
5	section in the permanent register required under § 25-15-204(e)(2).
6	(iii)(a) The scope of the financial impact statement
7	shall be determined by the Arkansas Health Insurance Marketplace but, at a
8	minimum, shall include the estimated cost of complying with the policy,
9	procedure, or rule and the estimated cost for the Arkansas Health Insurance
10	Marketplace to implement the policy, procedure, or rule.
11	(b) If the Arkansas Health Insurance
12	Marketplace has reason to believe that the development of a financial impact
13	statement will be so speculative as to be cost prohibitive, the Arkansas
14	Health Insurance Marketplace shall submit a statement and explanation to that
15	effect.
16	(c) If the purpose of an Arkansas Health
17	Insurance Marketplace policy, procedure, or rule is to implement a federal
18	rule or regulation, the financial impact statement shall be limited to any
19	incremental additional cost of the state policy, procedure, or rule, as
20	opposed to the federal rule or regulation.
21	(E)(i)(a) Each policy, procedure, or rule adopted by the
22	Arkansas Health Insurance Marketplace is effective thirty (30) days after the
23	filing of the final policy, procedure, or rule unless a later date is
24	specified by law or in the rule itself.
25	(b) A final rule shall not be filed until the
26	thirty-day public comment period required under subdivision (b)(3)(A)(ii)(a)
27	of this section has expired.
28	(c)(1) After the expiration of the thirty-day
29	public comment period and before the effective date of the rule, the Arkansas
30	Health Insurance Marketplace shall take appropriate measures to make the
31	final rule known to the persons who may be affected by the rule.
32	(2) Appropriate measures shall include
33	without limitation posting the following information on the website of the
34	Arkansas Health Insurance Marketplace:
35	(A) The final rule;

1	(B) Copies of all written comments
2	submitted to the Arkansas Health Insurance Marketplace regarding the rule;
3	(C) A summary of all written and
4	oral comments submitted to the Arkansas Health Insurance Marketplace
5	regarding the rule and the response of the Arkansas Health Insurance
6	Marketplace to those comments; and
7	(D) The proposed effective date of
8	the final rule.
9	(ii)(a) However, an emergency rule may become
10	effective immediately upon filing or at a stated time less than thirty (30)
11	days after filing if the Arkansas Health Insurance Marketplace finds that
12	this effective date is necessary because of imminent peril to the public
13	health, safety, or welfare.
14	(b) The finding of the Arkansas Health
15	Insurance Marketplace and a brief statement of the reasons for the finding
16	shall be filed with the rule.
17	(c) The Arkansas Health Insurance Marketplace
18	shall take appropriate measures to make emergency rules known to the persons
19	who may be affected by the emergency rules.
20	(F) The Legislative Council shall review the proposed,
21	revised, or amended policy, procedure, or rule and, if it is believed that
22	the rule or regulation is contrary to legislative intent, shall file a
23	statement thereof with the Arkansas Health Insurance Marketplace.
24	(c)(1) The Arkansas Health Insurance Marketplace shall operate subject
25	to the supervision and control of the Board of Directors of the Arkansas
26	<u>Health Insurance Marketplace.</u>
27	(2) The board shall consist of the following members to be
28	appointed on or before July 1, 2023:
29	(A)(i) Three (3) members appointed by the Governor.
30	(ii) One (1) member appointed by the Governor shall
31	be a representative of insurance agents or brokers licensed to sell health
32	insurance in the State of Arkansas.
33	(iii) Two (2) members appointed by the Governor
34	shall be consumer representatives;
35	(B)(i) Three (3) members appointed by the President Pro
36	Tempore of the Senate.

1	(ii) One (1) member appointed by the President Pro
2	Tempore of the Senate shall be a representative of a health insurer.
3	(iii) One (1) member appointed by the President Pro
4	Tempore of the Senate shall be a representative of small employers;
5	(C)(i) Three (3) members appointed by the Speaker of the
6	House of Representatives.
7	(ii) One (1) member appointed by the Speaker of the
8	House of Representatives shall be a representative of a health insurer.
9	(iii) One (1) member appointed by the Speaker of the
10	House of Representatives shall be a member of a health-related profession
11	licensed in the State of Arkansas;
12	(D) The Insurance Commissioner or his or her designee as
13	an ex officio nonvoting member; and
14	(E) The Secretary of the Department of Human Services or
15	his or her designee as an ex officio nonvoting member.
16	(d)(1) Members appointed by the Governor serve at the pleasure of the
17	Governor.
18	(2)(A) The initial members appointed by the President Pro
19	Tempore of the Senate under subdivision (c)(2) of this section shall serve
20	terms as follows:
21	(i) One (1) initial member shall be appointed to $a$
22	term of four (4) years;
23	(ii) One (1) initial member shall be appointed to $a$
24	term of six (6) years; and
25	(iii) One (1) initial member shall be appointed to a
26	term of eight (8) years.
27	(B) A member subsequently appointed to the board under
28	subdivision (c)(2) of this section shall serve a term of six (6) years.
29	(3)(A) The initial members appointed by the Speaker of the House
30	$\underline{\text{of Representatives under subdivision (c)(2) of this section shall serve terms}$
31	as follows:
32	(i) One (1) initial member shall be appointed to $a$
33	term of four (4) years;
34	(ii) One (1) initial member shall be appointed to a
35	term of six (6) years; and

1	(iii) One (1) initial member shall be appointed to a
2	term of eight (8) years.
3	(B) A member subsequently appointed to the board under
4	subdivision (c)(2) of this section shall serve a term of six (6) years.
5	(e) The appointing authorities under this section shall ensure that a
6	majority of the voting members of the board have relevant experience in:
7	(1) Health benefits administration;
8	(2) Healthcare finance;
9	(3) Health plan purchasing;
10	(4) Healthcare delivery system administration; or
11	(5) Public health or health policy issues related to the small
12	group and individual markets and the uninsured.
13	(f) The board shall select one (1) of its members as chair.
14	(g)(1) Subject to review by the Legislative Council, the board may
15	authorize by a majority vote of the total membership of the board cast during
16	its first regularly scheduled meeting of each calendar year:
17	(A) Payment to its members of a stipend per day not to
18	exceed one hundred dollars (\$100) for each meeting attended or for any day
19	while performing substantive business of the board; and
20	(B) Reimbursement of actual expenses while performing
21	substantive business of the board.
22	(2) Members of the board shall receive no other compensation,
23	expense reimbursement, or in-lieu-of payments.
24	(h)(1) The board shall hire the Executive Director of the Arkansas
25	Health Insurance Marketplace to:
26	(A) Plan and administer the Arkansas Health Insurance
27	Marketplace; and
28	(B) Employ necessary staff.
29	(2) The State Insurance Department shall board may plan and
30	administer the Arkansas Health Insurance Marketplace and employ necessary
31	staff on an interim basis until the executive director is hired.
32	(3) The employees of the Arkansas Health Insurance Marketplace
33	are not eligible to participate in the Arkansas Public Employees' Retirement
34	System under § 24-4-101 et seq.
35	(i)(1) Neither the board nor its employees shall be liable for any
36	obligations of the Arkaneas Health Insurance Markethlace

1	(2) The board may provide in its bylaws or rules for
2	indemnification of and legal representation for the board members and board
3	<pre>employees.</pre>
4	(j)(1) The board shall adopt articles, bylaws, and operating rules
5	according to this subchapter.
6	(2) The articles, bylaws, and operating rules shall be reviewed
7	by the Legislative Council.
8	(c)(k) The State Insurance Department board shall keep an accurate
9	accounting of all activities, receipts, and expenditures on behalf of the
10	Arkansas Health Insurance Marketplace and report to the Legislative Council
11	as requested by the Legislative Council.
12	(d)(1) The State Insurance Department may board shall have the
13	authority to apply for and expend on behalf of the Arkansas Health Insurance
14	Marketplace any state, federal, or private grant funds available to assist
15	with the implementation and operation of the Arkansas Health Insurance
16	Marketplace.
17	$\frac{(e)(1)(m)(1)}{(m)(1)}$ The State Insurance Department board may contract with
18	eligible entities to assist with the planning, implementation, and operation
19	of the Arkansas Health Insurance Marketplace.
20	(2) For the purposes of this subsection:
21	(A) An eligible entity includes without limitation an
22	entity that has experience in individual and small group health insurance,
23	benefit administration, or other experience relevant to the responsibilities
24	to be assumed by the entity; and
25	(B) A health insurer or an affiliate of a health insurer
26	is not an eligible entity.
27	(3) In contracting with an eligible entity under subdivision
28	(e)(1)(m)(1) of this section, the State Insurance Department board shall give
29	preference to eligible entities that have relevant experience.
30	(4)(A) The board shall establish a competitive bidding process
31	for awarding contracts under this subchapter to an eligible entity.
32	(B) The competitive bidding process for awarding contracts
33	under this subchapter to an eligible entity shall be reviewed by the
34	Legislative Council.
35	(f)(n) The State Insurance Department board may enter into
36	information-sharing agreements with federal and state agencies and other

- 1 state marketplaces to carry out its responsibilities under this subchapter,
- 2 provided such agreements:
- 3 (1) Include adequate protections with respect to the
- 4 confidentiality of the information to be shared; and
- 5 (2) Comply with all applicable state and federal laws and 6 regulations.
- 7  $\frac{(g)(o)}{(g)}$  As a condition of participating in the Arkansas Health
- 8 Insurance Marketplace, a health insurer shall pay the assessments, submit the
- 9 reports, and provide the information required by the board or the Insurance
- 10 Commissioner to implement this subchapter.
- 11 (h)(p) The State Insurance Department board and any eligible entity
- under subdivision  $\frac{(e)(2)(m)(1)}{m}$  of this section shall provide claims and other
- 13 plan and enrollment data to the Department of Human Services and the
- 14 <u>commissioner</u> upon request to:
- 15 (1) Facilitate compliance with reporting requirements under
- 16 state and federal law; and
- 17 (2) Assess the performance of the Arkansas Health and
- 18 Opportunity for Me Program established by the Arkansas Health and Opportunity
- 19 for Me Act of 2021, § 23-61-1001 et seq., including without limitation the
- 20 program's quality, cost, and consumer access.
- 21  $\frac{(i)(1)(q)(1)}{(q)(1)}$  The Legislative Council may study matters pertaining to
- 22 this subchapter that the Legislative Council considers necessary to fulfill
- 23 its mandate under this subchapter.
- 24 (2) The Legislative Council may request reports from the
- 25 Arkansas Health Insurance Marketplace pertaining to the operations, programs,
- 26 or finances of the Arkansas Health Insurance Marketplace as it deems
- 27 necessary.
- 28 (3) Annually by December 15, the Legislative Council shall
- 29 provide to the General Assembly any analysis or findings resulting from its
- 30 activities under this section that the Legislative Council deems relevant.
- 31 (4)(A) During a regular, fiscal, or extraordinary session of the
- 32 General Assembly, the Joint Budget Committee shall perform the functions
- 33 assigned to the Legislative Council under this subchapter.
- 34 (B) This subsection does not limit the authority of the
- 35 Legislative Council and its subcommittees to meet during a recess as
- 36 authorized by § 10-2-223 or § 10-3-211.

1	(5) The Legislative Council and the Joint Budget Committee may:
2	(A) Establish or utilize one (1) or more subcommittees to
3	assist in the duties of the Legislative Council or the Joint Budget
4	Committee, respectively, under this subchapter;
5	(B) Assign information filed with the Legislative Council
6	under this subchapter to one (1) or more subcommittees of the Legislative
7	Council or the Joint Budget Committee, respectively, including without
8	limitation a subcommittee created under subdivision $\frac{(i)(5)(A)(q)(5)(A)}{(i)(5)(a)}$ of
9	this section; and
10	(C) Delegate the duties of the Legislative Council or the
11	Joint Budget Committee, respectively, under this subchapter to one (1) or
12	more subcommittees of the Legislative Council or the Joint Budget Committee,
13	respectively, subject to the final review and approval of the Legislative
14	Council or the Joint Budget Committee, respectively.
15	
16	SECTION 3. Arkansas Code § 23-61-804 is amended to read as follows:
17	23-61-804. Duties of Arkansas Health Insurance Marketplace.
18	(a) The Arkansas Health Insurance Marketplace shall:
19	(1) $\underline{(A)}$ Implement procedures and criteria for the certification,
20	recertification, and decertification of health benefit plans as qualified
21	health plans $\underline{\text{in coordination with the Insurance Commissioner and}}$ in
22	compliance with state and federal law <sub>f.</sub>
23	(B) The procedures and criteria shall comply with
24	applicable:
25	(i) Federal law;
26	(ii) Federal waivers obtained by the state to
27	implement the Arkansas Health and Opportunity for Me Act of 2021, § 23-61-
28	1001 et seq.; and
29	(iii) Rules promulgated by the State Insurance
30	Department and the Department of Human Services under the Arkansas Health and
31	Opportunity for Me Act of 2021, § 23-61-1001 et seq.;
32	(2) Provide for the operation of a toll-free telephone hotline
33	to respond to requests for assistance;
34	(3) Require that a health carrier offering a qualified health
35	plan post on the public part of its website in a readily accessible format

1	the <del>lormulary list for each individual qualified health plan and the</del>
2	following information:
3	(A) The qualified health plan to which the formulary
4	applies;
5	(B) Any exclusions from coverage or restrictions,
6	including:
7	(i) Any tiering structure, including copay and
8	coinsurance requirements;
9	(ii) Prior authorization requirements;
10	(iii) [Repealed.]
11	(iv) Deductibles and cost sharing;
12	(v) Quantity limits; and
13	(vi) Whether access is dependent upon the location
14	where a prescription drug is obtained or administered; and
15	(C) The appeal process for a denial of coverage or adverse
16	determination for an item or service for a prescription drug;
17	(4)(A) Establish a small business health options program through
18	which qualified employers may access coverage for their employees.
19	(B) The small business health options program, without
20	limitation, shall enable a qualified employer to specify a level of coverage
21	so that any of its employees may enroll in a qualified health plan offered
22	through the program at the specified level of coverage.
23	(C) This subdivision $\frac{(a)(4)(4)}{(4)}$ does not apply if an
24	available qualified health carrier does not offer a health benefit plan under
25	the small business health options program;
26	(5)(A) Select entities qualified to serve as navigators and
27	award grants to enable navigators, consistent with state and federal law, to:
28	(i) Conduct public education activities to raise
29	awareness of the availability of qualified health plans;
30	(ii) Distribute fair and impartial information
31	concerning enrollment in qualified health plans and the availability of
32	premium tax credits under 26 U.S.C. § 36B, as existing on April 23, 2013, and
33	cost-sharing reductions under section 1402 of the federal act;
34	(iii) Facilitate enrollment in qualified health
35	plans;

1	(iv) Provide referrals to any applicable office of
2	health insurance consumer assistance or health insurance ombudsman or to any
3	other appropriate state agency for any enrollee with a grievance, complaint,
4	or question regarding his or her health benefit plan or health benefit
5	coverage or a determination under his or her health benefit plan or health
6	benefit coverage; and
7	(v) Provide information in a manner that is
8	culturally and linguistically appropriate to the needs of the population
9	being served by the Arkansas Health Insurance Marketplace.
10	(B) The <del>Insurance Commissioner</del> Board of Directors of the
11	Arkansas Health Insurance Marketplace in coordination with the commissioner
12	shall ensure in the navigator selection process that the navigators are
13	geographically, culturally, ethnically, and racially representative of the
14	populations served; and
15	(6) Otherwise comply with a requirement the <del>commissioner</del> <u>board</u>
16	determines is necessary to obtain or maintain the approval to administer a
17	health insurance marketplace-;
18	(b) If the Governor determines that a state-based exchange not on the
19	federal platform for the individual health insurance marketplace is
20	beneficial and appropriate, the Arkansas Health Insurance Marketplace shall:
21	$\frac{(1)(A)(7)(A)}{(1)(A)}$ Maintain a website through which enrollees and
22	prospective enrollees of qualified health plans may obtain standardized
23	comparative information on such plans.
24	(B) The <del>commissioner</del> <u>board</u> shall ensure that an entity
25	offering a qualified health plan through the Arkansas Health Insurance
26	Marketplace posts the information described in § 23-79-159 on the Arkansas
27	Health Insurance Marketplace website in a readily accessible format;
28	(2)(8) Assign a rating to each qualified health plan offered
29	through the Arkansas Health Insurance Marketplace and determine each
30	qualified health plan's level of coverage in accordance with according to
31	regulations issued by the United States Secretary of Health and Human
32	Services under section 1302(d)(2)(A) of the federal act;
33	(3) (9) Use a standardized format for presenting health benefit
34	options in the Arkansas Health Insurance Marketplace; and
35	(4)(10) Review compensation rates for licensed brokers and
36	agents; and

1	(11) Establish and make available by electronic means a
2	calculator to determine the actual cost of coverage after application of a
3	premium tax credit under section 36B of the Internal Revenue Code of 1986 as
4	existing on April 23, 2013, and any cost-sharing reduction under section $1402$
5	of the federal act.
6	
7	SECTION 4. Arkansas Code § 23-61-805 is amended to read as follows:
8	23-61-805. Funding — Publication of costs.
9	(a)(1) The General Assembly shall establish a reasonable initial
10	assessment or user fee and reasonable increases or decreases in the amount of
11	future assessments or user fees and penalties and interest charges for
12	nonpayment of an assessment or user fee charged to participating health
13	insurers for the efficient operation of the Arkansas Health Insurance
14	Marketplace The Board of Directors of the Arkansas Health Insurance
15	Marketplace shall establish in a bank authorized to do business in this
16	state, selected by the board, a revolving cash fund to be known as the
17	"Arkansas Health Insurance Marketplace Fund".
18	(2) All federal or state grant funds, assessments, user fees,
19	penalties for nonpayment, and late charges for late payment collected under
20	this subchapter shall be deposited into the fund.
21	(3) The Board of Directors of the Arkansas Health Insurance
22	Marketplace shall administer this fund for the purposes stated in this
23	subchapter as determined by the Executive Director of the Arkansas Health
24	<u>Insurance Marketplace.</u>
25	(4) The board shall keep a complete record of all receipts and
26	expenditures from the fund and shall make the record available to Arkansas
27	Legislative Audit for audit and verification.
28	(b)(1) Beginning August 1, 2023, and then annually by August 1, the
29	Board of Directors of the Arkansas Health Insurance Marketplace shall develop
30	a methodology for determining the amounts of:
31	(A) Assessments;
32	(B) User fees; and
33	(C) Penalties and interest charges for late payment or
34	nonpayment.
35	(2) Annually Beginning October 1, 2023, and then annually by
36	October 1, the State Insurance Department board shall report to the

- l Legislative Council in the manner and format that the Legislative Council
- 2 requires the recommendations of the <del>department</del> <u>Arkansas Health Insurance</u>
- 3 <u>Marketplace</u> for the initial assessment or user fee and increases or decreases
- 4 in the amount of future assessments or user fees and penalties and interest
- 5 charges for nonpayment of an assessment or user fee charged to participating
- 6 health insurers.
- 7 (3) Annually by December 1 Beginning January 1, 2024, and then
- 8 <u>annually by January 1</u>, the Legislative Council shall review the
- 9 recommendations of the department Arkansas Health Insurance Marketplace under
- subdivision  $\frac{(a)(2)}{(b)(2)}$  of this section and report to the President Pro
- 11 Tempore of the Senate and the Speaker of the House of Representatives the
- 12 recommendations of the Legislative Council for the initial assessment or user
- 13 fee and future increases or decreases in the amount of assessments or user
- 14 fees and penalties and interest charges for nonpayment of an assessment or
- 15 user fee charged to participating health insurers.
- 16  $\frac{(b)(1)(c)(1)}{(b)(1)}$  All assessments and fees shall be due and payable upon
- 17 receipt in the matter required by the Insurance Commissioner and shall be
- 18 delinquent if not paid within thirty (30) days of the receipt of notice of
- 19 the assessment by the health insurer.
- 20 (2)(A) Failure to timely pay the assessment shall automatically
- 21 subject the health insurer to a penalty not to exceed ten percent (10%) of
- 22 the assessment plus interest as established under subsection (a) subdivision
- 23 (b)(1) of this section.
- 24 (B) The penalty and interest is due and payable within the
- 25 next thirty-day period.
- 26 (3) The commissioner Board of Directors of the Arkansas Health
- 27 Insurance Marketplace and the Insurance Commissioner may enforce the
- 28 collection of the assessment and penalty and interest in accordance with
- 29 <u>according to</u> this subchapter and the Arkansas Insurance Code.
- 30 (4) The commissioner board may waive the penalty and interest
- 31 authorized by this subsection if the commissioner board determines that
- 32 compelling circumstances exist that justify a waiver.
- 33 (c)(1)(d)(1) The department Arkansas Health Insurance Marketplace
- 34 shall publish the average costs of licensing, regulatory fees, and any other
- 35 payments required by the Arkansas Health Insurance Marketplace and the

1	administrative costs of the Arkansas Health Insurance Marketplace on an
2	internet website to educate consumers on such costs.
3	(2) Information published under subdivision $\frac{(e)(1)}{(d)(1)}$ of this
4	section shall include information on moneys lost to waste, fraud, and abuse.
5	(e)(1) Annually, the Arkansas Health Insurance Marketplace shall
6	report the following information to the Legislative Council:
7	(A) The total amount of assessment fees or user fees
8	<pre>collected;</pre>
9	(B) The administrative costs and expenditure of the
10	Arkansas Health Insurance Marketplace, including without limitation salaries
11	of employees, supply costs, building rental costs, and technology costs;
12	(C) The amount of any other funds received by the Arkansas
13	Health Insurance Marketplace; and
14	(D) Other budgetary or financial matters relating to the
15	Arkansas Health Insurance Marketplace.
16	(2) The Arkansas Health Insurance Marketplace shall disclose and
17	provide additional budgetary or financial information upon the request of the
18	Legislative Council or the Joint Budget Committee.
19	
20	SECTION 5. Arkansas Code § 23-61-806 is amended to read as follows:
21	23-61-806. Rules.
22	(a) The <del>Insurance Commissioner</del> <u>Board of Directors of the Arkansas</u>
23	<u>Health Insurance Marketplace</u> may promulgate rules to implement this
24	subchapter.
25	(b) Rules promulgated under this section shall not conflict with or
26	prevent the application of regulations promulgated by the United States
27	Secretary of Health and Human Services under the federal act.
28	
29	SECTION 6. DO NOT CODIFY. State innovation waiver.
30	(a) By January 1, 2024, the Board of Directors of the Arkansas Health
31	<u>Insurance Marketplace and the Insurance Commissioner shall review and make</u>
32	joint recommendations to the Legislative Council regarding the submission of
33	a state innovation waiver allowable under section 1332 of the Patient
34	Protection and Affordable Care Act, Pub. L. No. 111-148.

1	(b) The recommendations under subsection (a) of this section for
2	health insurance coverage or health insurance products shall include any or
3	all of the following:
4	(1) Risk stabilization strategies aimed at addressing risk
5	associated with individuals with high healthcare costs;
6	(2) Individual coverage health reimbursement arrangements for
7	employees of large and small businesses in this state;
8	(3) Financial assistance for different types of health insurance
9	plans, including without limitation nonqualified health plans for individuals
10	<pre>purchasing coverage;</pre>
11	(4) Creation of a new, state-administered subsidy program for
12	individuals, families, and small businesses on behalf of employees who are
13	purchasing coverage through the Arkansas Health Insurance Marketplace; and
14	(5) Establishment of account-based premium credits for
15	individuals and families enrolled in coverage through the Arkansas Health
16	Insurance Marketplace.
17	(c) Based on the approval of the Legislative Council, the commissioner
18	may submit one (1) or more applications to the United States Secretary of
19	Health and Human Services and the United States Secretary of the Treasury for
20	a waiver of applicable provisions.
21	(d) Upon approval of a waiver submitted under subsection (c) of this
22	section, the commissioner may implement the waiver as approved.
23	
24	SECTION 7. DO NOT CODIFY. Legislative intent.
25	It is the intent of the General Assembly by the enactment of this act
26	to establish a private, nonprofit, state-based exchange health insurance
27	marketplace.
28	
29	SECTION 8. EMERGENCY CLAUSE. It is found and determined by the
30	General Assembly of the State of Arkansas that the citizens of Arkansas would
31	receive more benefit from the operation of a state-based exchange under
32	federal healthcare laws under Pub. L. No. 111-148, as amended by Pub. L. No.
33	111-152, and administration by a board of directors to reduce fees and costs;
34	that the state has elected to create a state-based exchange health insurance
35	marketplace and to transfer of the operation of the Arkansas Health Insurance
36	Marketplace from the State Insurance Department; this transfer impacts the

expenses and operations of state government; and that this act is immediately necessary to begin the process of planning for the transitioning to, implementation of, a state-based exchange health insurance marketplace operated by a private, nonprofit entity before the upcoming fiscal year. Therefore, an emergency is declared to exist, and this act being immediately necessary for the preservation of the public peace, health, and safety shall become effective on: (1) The date of its approval by the Governor; (2) If the bill is neither approved nor vetoed by the Governor, the expiration of the period of time during which the Governor may veto the bill; or (3) If the bill is vetoed by the Governor and the veto is overridden, the date the last house overrides the veto. Referred by Representative Wardlaw Prepared by: ANS/ANS