**§2792. Affordable health coverage for individuals, families and small businesses**

**(CONTAINS TEXT WITH VARYING EFFECTIVE DATES)**

**(CONTINGENT IMPLEMENTATION: See Title 24-A, section 2792, subsection 5)**

**1. Pooled market established.**  Subject to the requirements of subsection 5, all individual and small group health plans offered in this State with effective dates of coverage on or after January 1, 2023 must be offered through a pooled market. A health insurance carrier offering an individual health plan subject to this section shall make the plan available to all eligible small employers within the plan's approved service area, and a health insurance carrier offering a small group health plan subject to this section shall make the plan available to all eligible individuals residing within the plan's approved service area. This subsection does not require the Maine Health Insurance Marketplace established in Title 22, chapter 1479 to offer identical choices of health plans to individuals and to small employers under Title 22, chapter 1479.

[PL 2021, c. 361, §1 (AMD).]

**2. Premium rates.**  Premium rates for a health plan offered in the pooled market described in subsection 1 may not vary based on whether the plan is issued to an individual or to a small employer. Rate filings and review for the pooled market are subject to the provisions of sections 2736 to 2736‑C. For health plans that are issued on other than a calendar year basis, rates applicable on and after January 1st of any plan year must be the approved rates for the most similar plan offered during the new calendar year, adjusted by a factor, approved by the superintendent as part of the rating plan, that appropriately accounts for any differences in plan design.

[PL 2019, c. 653, Pt. B, §2 (NEW).]

**3. Harmonization of mandated benefit laws.**  In addition to the requirements of chapter 56‑A, a health plan subject to this section must comply with the applicable mandated benefit provisions in chapter 33 or the corresponding provisions of chapter 35. A health maintenance organization or a nonprofit hospital and medical service organization may offer any health plan approved by the superintendent for sale in the pooled market established pursuant to this section, notwithstanding any provision of chapter 56 or Title 24 to the contrary.

[PL 2019, c. 653, Pt. B, §2 (NEW).]

**4. Conforming references.**  All references in this Title to the individual health insurance market, the small group health insurance market or any equivalent terminology refer to the pooled market established pursuant to this section.

[PL 2019, c. 653, Pt. B, §2 (NEW).]

**5. Preconditions for pooled market.**  This section may not be implemented unless routine technical rules as defined in Title 5, chapter 375, subchapter 2‑A are adopted to implement this section and the Federal Government approves a state innovation waiver amendment that extends reinsurance under section 3953 to the pooled market established pursuant to this section based on projections by the superintendent that both average individual premium rates and average small group premium rates would be the same or lower than they would have been absent the provisions of this section and chapter 54‑A. If this section is not implemented, the superintendent shall conduct an analysis of alternative proposals to improve the stability and affordability of the small group market.

[PL 2021, c. 361, §2 (AMD).]

SECTION HISTORY

PL 2019, c. 653, Pt. B, §2 (NEW). PL 2021, c. 361, §§1, 2 (AMD).

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