SENATE BILL    431

AN ACT relative to data submission by insurers.


COMMITTEE: Health and Human Services

AMENDED ANALYSIS

This bill clarifies data submission required to be submitted to the insurance department by insurers.

Explanation: Matter added to current law appears in **bold italics.**
Matter removed from current law appears [in brackets and struckthrough.]
Matter which is either (a) all new or (b) repealed and reenacted appears in regular type.
CHAPTER 250
SB 431 - FINAL VERSION

STATE OF NEW HAMPSHIRE

In the Year of Our Lord Two Thousand Sixteen

AN ACT relative to data submission by insurers.

Be it Enacted by the Senate and House of Representatives in General Court convened:

250:1 Statement of Intent. The purpose of this act is to clarify the applicability of existing New Hampshire statutory requirements in light of the United States Supreme Court decision in Gobeille v. Liberty Mutual, and to create a mechanism whereby self-funded employers affected by that decision may choose to have their claims data included in their claims administrator’s submission to the New Hampshire comprehensive health information system. The data submission requirements of RSA 420-G:11, IV and V as inserted by section 2 of this act are intended to facilitate the proper functioning of insurance markets and to benefit insured consumers and employers through price transparency that will increase competition and enable all consumers and employers to make informed and cost-effective health care choices. Such market transparency, as a form of insurance regulation, is intended to enhance and optimize market conditions affecting the risk pooling arrangements between insurers and insureds.

250:2 New Paragraphs; Disclosures by Health Carriers, Third Party Administrators, and Other Insurance Entities. Amend RSA 420-G:11 by inserting after paragraph III the following new paragraphs:

IV. The data submission requirements of paragraphs II and II-a shall apply with respect to claims data for all lives covered by a fully-insured health plan in any market in the state, by any self-funded plan for state or municipal employees, including any plan maintained under RSA 5-B, to any self-funded plan maintained by the university system of the state with respect to its employees or its students, and to any self-funded student health benefit plan maintained by an institution of higher education which provides 4-year bachelor’s degree programs and graduate or professional degree programs.

V. In addition to those lives listed in paragraph IV, the data submission requirements of paragraphs II and II-a shall also apply to all health carriers, licensed third party administrators, and any entity required to be registered with the commissioner pursuant to RSA 402-H with respect to claims data for all lives covered by any other self-funded employer-sponsored plan, when the employer has opted in writing to the submission of the data. The carrier or administrator shall notify the employer of the employer’s option to authorize submission of the data. The commissioner shall adopt rules under RSA 541-A specifying the form of such opt in, which shall include, but not be limited to, notice to the employer regarding why it is receiving the notification form, the privacy...
protections for the data submitted should the employer choose to opt in, and the transparency
benefits, including benefits to employers, of broad inclusion of as many lives as possible in the
database created under RSA 420-G:11-a. Nothing in this paragraph shall be construed to impose
any reporting obligation on any self-funded employer or plan sponsor, or to impose any requirement
with respect to the manner in which any such self-funded plan is administered. Nothing in this
paragraph shall prevent a health carrier or third party administrator from communicating its views
to an employer about the employer’s decision whether to opt in to the submission of claims data.

250:3 Effective Date. This act shall take effect upon its passage.

Approved: June 10, 2016

Effective Date: June 10, 2016