

**Sec. BBB-1. 24-A MRSA §6914**, as amended by PL 2005, c. 400, Pt. A, §14, is further amended to read:

### **§ 6914. Intragovernmental transfer**

Starting July 1, 2004, Dirigo Health shall transfer funds, as necessary, to a special dedicated, nonlapsing revenue account administered by the agency of State Government that administers MaineCare for the purpose of providing a state match for federal Medicaid dollars services provided to individuals eligible pursuant to Title 22, section 3174-G, subsection 1, paragraph E whose nonfarm income is greater than 150% of the nonfarm income official poverty line and is below or equal to 200% of the nonfarm income official poverty line. Dirigo Health shall annually set the amount of contribution.

Beginning January 1, 2012, Dirigo Health shall transfer funds as necessary to a special dedicated, nonlapsing revenue account administered by the agency of State Government that administers MaineCare for the purpose of providing a state match for federal Medicaid services provided to individuals eligible pursuant to Title 22, section 3174-G, subsection 1, paragraph E whose nonfarm income is greater than 133% of the nonfarm income official poverty line and is below or equal to 150% of the nonfarm income official poverty line. Dirigo Health shall annually set the amount of contribution.

**Sec. BBB-2. 24-A MRSA §6917, sub-§1**, as enacted by PL 2009, c. 359, §4 and affected by §8, is amended to read:

**1. Access payments required from health insurance carriers, 3rd-party administrators and employee benefit excess insurance carriers.** All health insurance carriers, 3rd-party administrators and employee benefit excess insurance carriers shall pay an access payment of 2.14% on all paid claims, except claims under accidental injury, specified disease, hospital indemnity, dental, vision, disability income, long-term care, Medicare supplement or other limited benefit health insurance. The amount of the access payment is 2.14% on claims for services provided through June 30, 2011, 1.87% on claims for services provided from July 1, 2011 to June 30, 2012, 1.64% on claims for services provided from July 1, 2012 to June 30, 2013 and 1.14% on claims for services provided from July 1, 2013 to December 31, 2013. No access payment may be charged for any claims for services provided on January 1, 2014 or thereafter. The following provisions govern access payments.

A. A health insurance carrier or employee benefit excess insurance carrier may not be required to pay an access payment on policies or contracts insuring federal employees.

B. Access payments apply to claims paid beginning on or after September 1, 2009.

PUBLIC Law, Chapter 380, LD 1043, 125th Maine State Legislature An Act Making Unified Appropriations and Allocations for the Expenditures of State Government, General Fund and Other Funds, and Changing Certain Provisions of the Law Necessary to the Proper Operations of State Government for the Fiscal Years Ending June 30, 2011, June 30, 2012 and June 30, 2013 HP0778, Emergency Signed on 2011-06-20 00:00:00.0 - First Regular Session - 125th Maine Legislature, page 87

C. Access payments must be made monthly to Dirigo Health and are due 30 days after the end of each month and must accrue interest at 12% per annum on or after the due date, except that access payments for 3rd-party administrators for groups of 500 or fewer members may be made annually not less than 60 days after the close of the plan year.

D. Access payments received by Dirigo Health must be pooled with other revenues of the agency in the Dirigo Health Enterprise Fund established in section 6915.

**Sec. BBB-3. Planning for Affordable Care Act health insurance exchange implementation report.** The Board of Trustees of Dirigo Health and the Executive Director of Dirigo Health shall evaluate the impact of the changes in this Part and their implications on planning for the transition to and implementation of a health insurance exchange in this State pursuant to the federal Patient Protection and Affordable Care Act. The Board of Trustees of Dirigo Health shall report its findings and recommendations for implementation of such an exchange in this State to the Joint Standing Committee on Appropriations and Financial Affairs and to the Joint Standing Committee on Insurance and Financial Services no later than March 1, 2012.