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House Bill 945

By: Representatives Hawkins of the 27th, Taylor of the 173rd, Anderson of the 10th, Erwin of the 32nd, and Parrish of the 158th

A BILL TO BE ENTITLED AN ACT

- 1 To amend Part 1 of Article 1 of Chapter 18 of Title 45 of the Official Code of Georgia
- 2 Annotated, relating to the state employees' health insurance plan, so as to provide protection
- 3 for covered persons under a state health plan when an in-network hospital becomes
- 4 out-of-network prior to the end of the plan year; to provide for definitions; to provide for
- 5 related matters; to repeal conflicting laws; and for other purposes.

BE IT ENACTED BY THE GENERAL ASSEMBLY OF GEORGIA:

- 7 SECTION 1.
- 8 Part 1 of Article 1 of Chapter 18 of Title 45 of the Official Code of Georgia Annotated,
- 9 relating to the state employees' health insurance plan, is amended by adding a new Code
- 10 section to read as follows:
- 11 "45-18-6.2.

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- 12 (a) As used in this Code section, the term:
- 13 (1) 'Hospital' means a publicly or privately owned hospital licensed to operate as such
- by the Department of Community Health.
- 15 (2) 'Insurer' means a corporation licensed to transact accident and health insurance
- business in this state, healthcare corporation, health maintenance organization, or any

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17 other entity that enters into a contract with the board to provide healthcare coverage or 18 services pursuant to a state health plan. 19 (3) 'State health plan' means: 20 (A) The state employees' health insurance plan established pursuant to this article; 21 (B) The health insurance plan for public school teachers and the health insurance plan 22 for public school employees established pursuant to Subparts 2 and 3, respectively, of Part 6 of Article 17 of Chapter 2 of Title 20; and 23 (C) The health benefit plan established for members, employees, and retirees of the 24 Board of Regents of the University System of Georgia pursuant to Code Section 31-2-4. 25 (b) On and after July 1, 2024, all contracts entered into or renewed by the board with an 26 insurer shall ensure that, if a hospital that is in-network with an insurer for a state health 27 plan during the designated open enrollment period becomes out-of-network with such 28 29 insurer prior to the end of the plan year, the insurer shall continue to provide coverage to any covered person for such hospital at the same rate and in the same manner through the 30 end of the plan year as if the hospital was in-network. Any such covered person shall be 31 32 held harmless and shall not be subject to any change in co-payments, deductibles, or other 33 cost-sharing requirements imposed by the insurer as a result of an in-network hospital becoming out-of-network." 34

35 SECTION 2.

36 All laws and parts of laws in conflict with this Act are repealed.