

112TH CONGRESS
2D SESSION

S. 2068

To amend title XXVII of the Public Health Service Act to preserve consumer and employer access to licensed independent insurance producers.

IN THE SENATE OF THE UNITED STATES

FEBRUARY 2, 2012

Ms. LANDRIEU (for herself, Mr. ISAKSON, Mr. NELSON of Nebraska, and Ms. MURKOWSKI) introduced the following bill; which was read twice and referred to the Committee on Health, Education, Labor, and Pensions

A BILL

To amend title XXVII of the Public Health Service Act to preserve consumer and employer access to licensed independent insurance producers.

1 *Be it enacted by the Senate and House of Representa-*
2 *tives of the United States of America in Congress assembled,*

3 **SECTION 1. SHORT TITLE.**

4 This Act may be cited as the “Access to Independent
5 Health Insurance Advisors Act of 2012”.

6 **SEC. 2. FINDINGS.**

7 Congress finds the following:

8 (1) Licensed independent insurance producers
9 (agents and brokers) provide a wide range of serv-

1 ices for both individual consumers and the business
2 community. Producers interface with insurers, ac-
3 quire quotes, analyze plan options, and consult cli-
4 ents through the purchase of health insurance.

5 (2) Licensed independent insurance producers
6 provide guidance regarding benefit and contribution
7 arrangements to ensure compliance with applicable
8 State and Federal laws and regulations; assist with
9 establishing section 125 plan tax savings under the
10 Internal Revenue Code, health reimbursement ar-
11 rangements, flexible spending arrangements, evalu-
12 ating and securing small business tax credits as pro-
13 vided in the Patient Protection and Affordable Care
14 Act, and other programs to maximize tax advantages
15 and ensure compliance with applicable Internal Rev-
16 enue Service guidelines; create educational materials
17 and provide on-site assistance to aid in employee
18 benefit communication; assist in managing eligibility
19 for new hires and terminated employees; provide ad-
20 vocacy for employees through the health insurance
21 claim process; and advocate for employers with in-
22 surers in developing proposals, renewals, and for
23 service issues throughout the year.

24 (3) In order to meet these responsibilities, li-
25 censed independent insurance producers are required

1 to complete continuing education on an ongoing
2 basis in order to maintain appropriate licenses. This
3 requirement to maintain educational standards helps
4 assure the insured public that producers remain cur-
5 rent with the ever-evolving insurance market.

6 (4) It is essential that licensed independent in-
7 surance producers continue to perform these duties,
8 and others, as the Patient Protection and Affordable
9 Care Act has made significant changes to the regu-
10 latory environment for health plans. To understand
11 these changes, employers and consumers will need
12 professional guidance even more in the future. This
13 service is especially important for small businesses,
14 as such producers often fill the role of a human re-
15 sources department as well as professional consult-
16 ant.

17 (5) The National Association of Insurance
18 Commissioners (NAIC), whose core mission is to
19 protect consumers in all aspects of the business of
20 insurance, strongly advocates for the continuing role
21 of licensed independent insurance producers in
22 health insurance, and has expressed that the ability
23 of insurance agents and brokers to continue assist-
24 ing health insurance consumers at a time of rapid
25 insurance market changes is more essential than

1 ever. On November 22, 2011, the NAIC adopted a
 2 resolution stating that “Congress should expedi-
 3 tiously consider legislation amending the MLR provi-
 4 sions of the PPACA in order to preserve consumer
 5 access to agents and brokers”.

6 (6) It is critical that the indispensable role
 7 played by licensed independent insurance producers
 8 is recognized and protected.

9 **SEC. 3. PROTECTING THE ABILITY OF LICENSED INDE-**
 10 **PENDENT INSURANCE PRODUCERS TO CON-**
 11 **TINUE TO SERVE THE PUBLIC.**

12 (a) IN GENERAL.—Section 2718 of the Public Health
 13 Service Act (42 U.S.C. 300gg–18), as inserted by section
 14 1001 and amended by section 10101(f) of the Patient Pro-
 15 tection and Affordable Care Act (Public Law 110–148),
 16 is amended—

17 (1) in subsection (a)(3), by inserting “, remu-
 18 neration paid for licensed independent insurance
 19 producers,” after “State taxes”; and

20 (2) in subsection (b)(1)—

21 (A) in the matter preceding clause (i) of
 22 subparagraph (A), by inserting “, remuneration
 23 paid for licensed independent insurance pro-
 24 ducers in the individual and small group mar-
 25 ket,” after “State taxes”; and

1 (B) in subparagraph (B)(i)(II), by insert-
2 ing “, remuneration paid for licensed inde-
3 pendent insurance producers in the individual
4 and small group market,” after “State taxes”;
5 and

6 (3) by adding at the end the following:

7 “(f) INDEPENDENT INSURANCE PRODUCER REMU-
8 NERATION DEFINITIONS.—For purposes of this section:

9 “(1) The term ‘independent insurance producer’
10 means an insurance agent or broker, insurance con-
11 sultant, benefit specialist, limited insurance rep-
12 resentative, and any other person required to be li-
13 censed under the laws of the particular State to sell,
14 solicit, negotiate, service, effect, procure, renew or
15 bind policies of insurance coverage or offer advice,
16 counsel, opinions, or services related to insurance.

17 “(2) The term ‘remuneration’ means compensa-
18 tion paid by or accrued from an insurance issuer or
19 health plan for services rendered under contractual
20 agreement which may include fees, commissions, or
21 rebates, but which shall not include production bo-
22 nuses.”.

23 (b) REGULATIONS.—Not later than 60 days after the
24 date of the enactment of this Act, the Secretary of Health
25 and Human Services shall amend any applicable regula-

- 1 tions as necessary to implement the amendments made by
- 2 subsection (a).

