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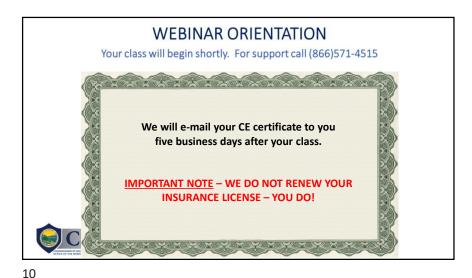
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- If there is an emergency or issue on our end, we also will advise you via e-mail.



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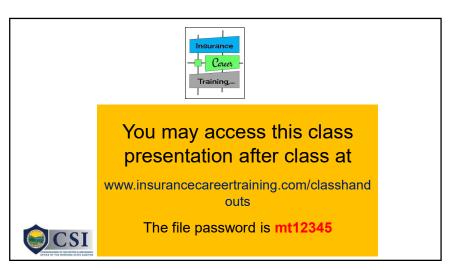








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· Commissioner Downing was sworn into office on the first day of the 67th legislative session. 2021 Stats: 2019 Stats: Bill Draft Requests: • Bill Draft Requests: 3.367 3.324 2021 · Bills Introduced: 1,313 · Bills Introduced: 1,309 LEGISLATIVE · Bills Adopted: 724 · Bills Adopted: 597 SESSION 17 · Vetoed by Governor: 38 · Vetoed by Governor: **OVERVIEW** 2021 House Members: 67-R, 33-D 2021 Senate Members: 31-R, 19-D

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### 2021 Montana Code Changes INSURANCE SB 149 Exempt Health Care Sharing Ministries HB 43 Telehealth HB 290 Self Storage Insurance Act SB 395 Pharmacy Benefit Manager Licensure SB 363 Annuity Suitability HB 379 Non-Discriminatory Rate Mandatory Coverage HB 198 Workers Compensation Death Benefit HB 117 Claims History in Auto SECURITIES HB 195 Claims History in Home SB 28 Captive Insurance Exams HB 64 Uniform Whistleblower Act SB 76 Captive Regulatory Fees HB 65 Register Securities Supervisors SB 101 Direct Patient Care Safe Harbor HB 66 Securities Restitution Fund

HB 43
(Rep. Rhonda Knudsen)
Telehealth

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SB 395 (Sen. Greg Hertz)

Pharmacy Benefit **Manager Oversight** Act

## Effective Date: January 1, 2022

- Requires pharmacy benefit managers (PBMs) to be licensed in Montana on January 1, 2022, for PBMs that contract with health plans and workers' compensation plans. The fee for initial licensure is \$1000 and the annual renewal fee is \$500.
- Requires licensed PBMs to submit a quarterly appeals report to the CSI with aggregated data on the number of maximum allowable cost appeals and outcomes of the appeals.
- Requires licensed PBMs to submit an annual transparency report to the CSI disclosing any money received by pharmaceutical manufacturers and money passed along to health plans.
- Requires CSI to conduct rulemaking to define network adequacy.
- Requires PBMs, upon request, to disclose to the contracted health plan or workers' compensation plan information regarding the specific plan's rebate pass through, MAC appeals, and other benefit information specific to the plan.

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Effective Date: October 1, 2021

- Beginning October 1, 2021, it is not a prohibition against sex or marital status discrimination for a person to use accepted ratemaking methodologies based on sex or marital status in establishing insurance premium rates.
- Most health plans that are subject to implement the Patient Protection and Affordable Care act may not use gender or marital status for determining premium rates.

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HB 117

Revising **Auto Insurance** Laws Related to Claims History

### Effective Date: October 1, 2021

Limits the amount of time an insurer may use adverse claims history for rates and coverage.

- Special risk classifications may be established for commercial automobile policies based on favorable aspects of an insured's claims history. Special risk classifications may not be established in commercial automobile policies based on adverse information that is 5 years old or older.
- Insurers may not refuse to issue, refuse to continue to insure, charge higher rates, or limit the amount of coverage available for private passenger automobile policies based on claims history that is 3 years old or older.

HB 195

Revise Insurance Claims History Information Relating to **Property** Insurance

HB 379 (Rep. Sue Vinton)

Rate Setting in

Insurance

Non-discriminatory

# Effective Date: October 1, 2021

Limits the amount of time an insurer may use adverse claims history for rates and coverage

- Special risk classifications may be established for personal homeowners' policies that are based on favorable aspects of an insured's claim history.
- Special risk classifications may not be established based on adverse information that is 7 years old or older.
- Insurers may not refuse to issue, refuse to continue to insure. charge higher rates, or limit the amount of coverage available under a personal homeowner policy based solely on adverse information contained in the loss experience that is 7 years old or older.

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Effective Date: October 1, 2021

Increase Death Benefit on Workers' Compensation

The payment is not a part of the compensation that might be paid but is a benefit in addition to and separate from compensation.

Effective Date: October 1, 2021 Operators of a self-storage facilities who sell renters insurance at their facilities must hold a limited lines producer license beginning October HB 290 "Operator" means a business entity that is the owner, operator, lessor or sublessor of a self-storage facility or an agent or another person authorized to manage the facility or to receive rent from a renter Self-Storage under a rental agreement. The operator may be a resident or non-**Insurance Act** resident of the state. A limited lines producer license authorizes the operator and the employees and the authorized representatives of the operator to sell self-storage insurance coverage. An operator is not required to hold a license solely to display and make available to renters and prospective renters' brochures and other promotional materials. 22

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SB 28

Captive Insurance Companies the requirement that captive insurance companies need an examination by CSI every 5 years to as often as the Commissioner considers advisable.

Captive risk retention groups shall be examined every 5 years.

SB 76

Captive Insurance Regulatory and Supervisory Account

Effective Date: May 7, 2021

Increases the amount of premium tax CSI may receive for regulation of captive insurance from 5% of premium tax collected to 20% of premium tax collected.

For FY 22 and FY 23, CSI will refund the increased funds to the general fund, but starting in FY 24, CSI will retain the funds collected.

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Effective Date: October 1, 2021

SB 101

Direct Patient Care Safe Harbor

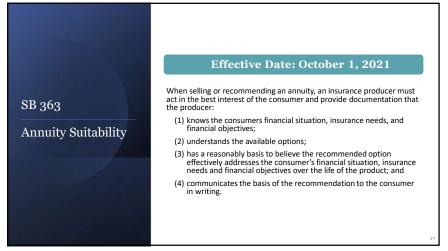
Creates the standards for a legal direct patient care (DPC) agreement between a patient and provider.

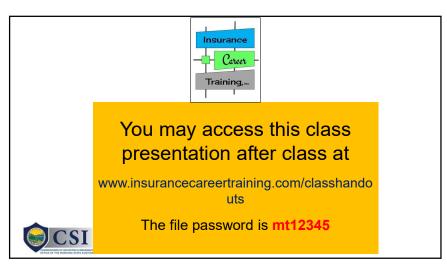
DPC agreements must be in writing and clearly indicate the fee to be collected by the provider.

Providers may not submit to a health insurance issuer a claim for payment for services provided to a patient under a DPC agreement.

Effective Date: October 1, 2021 • SB 149 establishes an exemption from regulation as the business of insurance that applies to HCSMs. Section 1 of SB 149 defines an HCSM as a nonprofit organization with the following characteristics: (1) It is tax-exempt under Sections 501(a) and 501(c)(3) of the Internal Revenue Code; SB 149 (2) Its members: - Share a common set of ethical or religious beliefs; and - Share medical expenses among members in accordance with those beliefs without Health Care regard to the state in which a member resides or is employed: **Sharing Ministry** (3) Its members retain membership even after developing a medical condition: (4) It conducts an annual audit that is performed by an independent certified public accounting firm in accordance with generally accepted accounting principles and that is (HCSM) Safe made available to the public on request; and Harbor (5) It does not use a compensated or commissioned insurance producer, representative, or other person to solicit or enroll members in this state, provided the foregoing does not - A salaried person employed by the HCSM who does not receive a commission, compensation, or other valuable consideration based on enrolling new members; or - A new member referral program providing credit for existing members of the HCSM with respect to not more than six new members annually.

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