By: King of Parker H.B. No. 1783

A BILL TO BE ENTITLED

AN ACT

2	relating to premium and maintenance tax credits related to certain
3	fees paid under the Patient Protection and Affordable Care Act.
4	BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF TEXAS:

- 5 SECTION 1. Chapter 222, Insurance Code, is amended by
- 6 adding Section 222.0071 to read as follows:
- 7 <u>Sec. 222.0071. CREDIT FOR CERTAIN FEDERAL FEES PAID. (a)</u> 8 In this section:
- 9 (1) "Affordable Care Act" means the Patient Protection 10 and Affordable Care Act (Pub. L. No. 111-148), as amended by the
- 11 Health Care and Education Reconciliation Act of 2010 (Pub. L.
- 12 No. 111-152).

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- 13 (2) "Nationwide health premium or revenue amount"
- 14 means the amount of gross premium and revenue aggregated on a
- 15 nationwide basis attributable to lines of business identified by
- 16 the commissioner under this section and taxed under this chapter.
- 17 (3) "Provider fee amount" means the amount of health
- 18 <u>insurer provider fees that an insurer or health maintenance</u>
- 19 organization pays under Section 9010, Affordable Care Act, and may
- 20 recoup through adjustments to the insurer's premium rate or the
- 21 health maintenance organization's formula or method for computing
- 22 its schedule of charges, as applicable.
- (b) An insurer or health maintenance organization is
- 24 entitled to a credit on the amount of tax due under this chapter in a

- 1 taxable year in an amount equal to the product of the insurer's or
- 2 health maintenance organization's provider fee amount multiplied
- 3 by the percentage of the insurer's or health maintenance
- 4 organization's nationwide health premium or revenue amount that the
- 5 insurer or health maintenance organization allocates to this state
- 6 multiplied by the rate of tax imposed under this chapter.
- 7 <u>(c) The commissioner by rule shall:</u>
- 8 (1) establish formulas to calculate the amount of the
- 9 credit authorized by Subsection (b), including a formula to
- 10 <u>calculate:</u>
- 11 (A) an insurer's or health maintenance
- 12 organization's provider fee amount; and
- 13 (B) the provider fee amount attributable to an
- 14 insurer or health maintenance organization if the fees are imposed
- on a controlled group, as defined by Section 9010(c)(3), Affordable
- 16 Care Act; and
- 17 (2) identify lines of business included in the
- 18 <u>calculation of the nationwide health premium or reve</u>nue amount.
- 19 (d) The lines of business identified by the commissioner
- 20 under Subsection (c) may not include the business of life
- 21 <u>insurance.</u>
- 22 SECTION 2. Chapter 257, Insurance Code, is amended by
- 23 adding Section 257.005 to read as follows:
- Sec. 257.005. CREDIT FOR CERTAIN FEDERAL FEES PAID. (a) In
- 25 this section:
- 26 (1) "Affordable Care Act" means the Patient Protection
- 27 and Affordable Care Act (Pub. L. No. 111-148), as amended by the

- 1 Health Care and Education Reconciliation Act of 2010 (Pub. L.
- 2 No. 111-152).
- 3 (2) "Nationwide health premium amount" means the
- 4 <u>amount of gross premium</u> aggregated on a nationwide basis
- 5 attributable to lines of business identified by the commissioner
- 6 under this section and taxed under this chapter.
- 7 (3) "Provider fee amount" means the amount of health
- 8 insurer provider fees that an insurer pays under Section 9010,
- 9 Affordable Care Act, and may recoup through adjustments to the
- 10 insurer's premium rate.
- 11 (b) An insurer is entitled to a credit on the amount of tax
- 12 due under this chapter in a taxable year in an amount equal to the
- 13 product of the insurer's provider fee amount multiplied by the
- 14 percentage of the insurer's nationwide health premium amount that
- 15 the insurer allocates to this state multiplied by the rate of tax
- 16 <u>imposed under this chapter.</u>
- 17 (c) The commissioner by rule shall:
- 18 (1) establish formulas to calculate the amount of the
- 19 credit authorized by Subsection (b), including a formula to
- 20 calculate:
- 21 (A) an insurer's provider fee amount; and
- 22 (B) the <u>provider fee amount attributable to an</u>
- 23 insurer if the fees are imposed on a controlled group, as defined by
- 24 Section 9010(c)(3), Affordable Care Act; and
- 25 (2) identify lines of business included in the
- 26 calculation of the nationwide health premium amount.
- 27 (d) The lines of business identified by the commissioner

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- 1 under Subsection (c) may not include the business of life
- 2 <u>insurance.</u>
- 3 SECTION 3. The changes in law made by this Act apply only to
- 4 a tax liability accruing on or after January 1, 2014.
- 5 SECTION 4. The comptroller of public accounts and
- 6 commissioner of insurance shall adopt rules necessary to implement
- 7 the changes in law made by this Act.
- 8 SECTION 5. This Act takes effect September 1, 2019.