

**LEGISLATIVE SERVICES AGENCY
OFFICE OF FISCAL AND MANAGEMENT ANALYSIS
FISCAL IMPACT STATEMENT**

LS 6900
BILL NUMBER: SB 220

NOTE PREPARED: Jan 22, 2026
BILL AMENDED:

SUBJECT: Health Care Shopping and Decision Support Program.

FIRST AUTHOR: Sen. Charbonneau
FIRST SPONSOR:

BILL STATUS: CR Adopted - 1st House

FUNDS AFFECTED: X GENERAL
X DEDICATED
FEDERAL

IMPACT: State & Local

Summary of Legislation: This bill requires, beginning January 1, 2028, a health carrier to: (1) implement a shopping and decision support program; and (2) provide incentives for covered individuals in a health plan who elect to receive a comparable health care service from a network provider that is paid less than the average allowed amount paid by the health carrier to network providers for the comparable health care service.

This bill requires, beginning December 1, 2027, a health carrier to make available an interactive member portal that enables a covered individual to request and obtain certain information. It allows a health carrier to make the information available through a toll free telephone number. It also sets forth reporting requirements for health carriers and the Department of Insurance concerning incentive payments made to covered individuals.

Effective Date: July 1, 2026.

Explanation of State Expenditures: The bill may reduce expenditures for the State Employee Health Plan (SEHP) by incentivizing covered individuals to receive less expensive treatment options. The bill requires the SEHP to provide at least half of the amount saved as financial incentives to individuals selecting less expensive services, allowing the SEHP to retain up to 50% of the amount saved. Actual savings resulting from the SEHP implementing a shopping and decision support program will depend on actions of the individuals covered under the plan.

The bill's requirements will increase workload for the Indiana Department of Insurance (DOI) to review applications and annual reports of shopping and decision support programs filed by health carriers, and to submit an annual report. This should be able to be implemented using existing staffing and resources. *[The DOI is funded through a dedicated agency fund.]*

Additional Information: Beginning January 1, 2028, the bill requires health carriers (including the SEHP) to implement a shopping and decision support program that provides financial incentives, in the form of cash payments, credits, or cost-sharing reductions, to covered individuals that elect to receive a comparable health

care service that is less expensive than the average allowed amount paid by the health carrier to a network provider, as prescribed in the bill. Incentives must equal at least 50% of the amount saved by a health carrier for each comparable health care service. Incentives are only required to be provided if the amount saved by the health carrier is more than \$50.

New Hampshire, Kentucky, and Utah have established similar programs, often referred to as Right to Shop programs, as part of their state employee health plans. Additionally, Florida, Maine, Nebraska, Tennessee, Utah, and Virginia have enacted legislation requiring or encouraging state-regulated private health plans to initiate Right to Shop programs.

Explanation of State Revenues:

Explanation of Local Expenditures: Expenses may decrease for local units providing health plans. Actual savings resulting from implementing a shopping and decision support program will depend on actions of the individuals covered under the plan.

Explanation of Local Revenues:

State Agencies Affected: Indiana Department of Insurance, all state agencies.

Local Agencies Affected: Local units offering health plans.

Information Sources: www.akleg.gov/basis/get_documents.asp?session=32&docid=79123.

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