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SENATE FILE 362

BY COMMITTEE ON HUMAN RESOURCES

(SUCCESSOR TO SSB 275)

	Senate, Date $3/31/93$ Aves 48 Navs O		
Passed	Senate, Date <u>3/31/93</u>	Passed House,	Date
Vote:	Ayes <u>48</u> Nays <u>O</u>	Vote: Ayes	Nays
	Approved 53	193	_

A BILL FOR 1 An Act relating to small group rating practices and the availability of health insurance coverage. 3 BE IT ENACTED BY THE GENERAL ASSEMBLY OF THE STATE OF IOWA: 

7 362

- 1 Section 1. Section 513B.2, subsections 10 and 16, Code
- 2 1993, are amended to read as follows:
- 3 10. a. "Health benefit plan" or "plan" means any hospital
- 4 or medical expense incurred policy or certificate, major
- 5 medical expense insurance, hospital or medical service plan
- 6 contract, or health maintenance organization subscriber
- 7 contract.
- 8 b. "Health benefit plan" does not include accident-only,
- 9 credit, dental, or disability income insurance, coverage
- 10 issued as a supplement to liability insurance, workers'
- 11 compensation or similar insurance, or automobile medical-
- 12 payment insurance.
- 13 c. "Health benefit plan" also does not include policies or
- 14 certificates of specified disease, hospital confinement
- 15 indemnity, or limited benefit health insurance if the carrier
- 16 offering such policies or certificates complies with all of
- 17 the following:
- 18 (1) The carrier files on or before March 1 of each year a
- 19 certification with the commissioner that contains the
- 20 following statement and information:
- 21 (a) A statement from the carrier certifying that policies
- 22 or certificates described in this paragraph "c" are being
- 23 offered and marketed as supplemental health insurance and not
- 24 as a substitute for hospital or medical expense insurance or
- 25 major medical expense insurance.
- 26 (b) A summary description of each policy or certificate
- 27 described in this paragraph "c" including the average annual
- 28 premium rates or range of premium rates in cases where
- 29 premiums vary by age, gender, or other factors, which are to
- 30 be charged for such policies and certificates in this state.
- 31 (2) If a policy or certificate described in this paragraph
- 32 "c" is offered for the first time in this state on or after
- 33 July 1, 1993, the carrier files with the commissioner the
- 34 information and statement required in subparagraph (1) at
- 35 least thirty days prior to the date such policy or certificate



### l is issued or delivered in this state.

- 2 16. "Small employer" means a person actively engaged in
- 3 business who, on at least fifty percent of the employer's
- 4 working days during the preceding year, employed no-more-than
- 5 not less than two and not more than twenty-five full-time
- 6 equivalent eligible employees. In determining the number of
- 7 eligible employees, companies which are affiliated companies
- 8 or which are eligible to file a combined tax return for
- 9 purposes of state taxation are considered one employer.
- 10 Sec. 2. Section 513B.4, subsection 3, Code 1993, is
- 11 amended to read as follows:
- 3. For purposes of this section, a health benefit plan
- 13 that utilizes contains a restricted provider network provision
- 14 shall not be considered similar coverage to a health benefit
- 15 plan that does not utilize contain such a network provision,
- 16 provided-that-utilization-of-the-restricted-provider if the
- 17 restriction of benefits to network providers results in
- 18 substantial differences in claims costs.
- 19 Sec. 3. NEW SECTION. 513B.4A EXEMPTION FROM PREMIUM RATE
- 20 RESTRICTIONS.
- 21 A Taft-Hartley trust or a carrier with the written
- 22 authorization of such a trust, may make a written request to
- 23 the commissioner for an exemption from the application of any
- 24 provisions of section 513B.4 with respect to a health benefit
- 25 plan provided to such a trust. The commissioner may grant an
- 26 exemption if the commissioner finds that application of
- 27 section 513B.4 with respect to the trust would have a
- 28 substantial adverse effect on the participants and
- 29 beneficiaries of such trust, and would require significant
- 30 modifications to one or more collective bargaining
- 31 arrangements under which the trust is established or
- 32 maintained. An exemption granted under this paragraph shall
- 33 not apply to an individual if the individual participates in a
- 34 trust as an associate member of an employee organization.
- 35 Sec. 4. Section 513B.5, Code 1993, is amended by adding



- 1 the following new subsections:
- NEW SUBSECTION. 3. A small employer carrier may replace
- 3 an existing health benefit plan with a new health benefit
- 4 plan. The premium rate for the new plan shall be developed
- 5 pursuant to section 513B.4 and must reflect the claim
- 6 experience of the previously existing plan.
- 7 NEW SUBSECTION. 4. A small employer carrier shall not
- 8 discontinue the sale or active marketing of a particular class
- 9 of plan or plans, unless the carrier withdraws from all
- 10 marketing in this state directed at the small employer or has
- 11 obtained specific approval from the commissioner to do so.
- 12 The commissioner may approve the discontinuance upon a
- 13 demonstrated finding that the continued sale or active
- 14 marketing of a particular class of plan or plans will endanger
- 15 the solvency of the carrier or does not advance the purposes
- 16 of this section.
- 17 Sec. 5. Section 513B.10, subsection 1, Code 1993, is
- 18 amended to read as follows:
- 19 1. a. A Except as provided in section 5138.5, subsection
- 20 4, a small employer carrier, as a condition of transacting
- 21 business in this state with small employers, shall actively
- 22 offer to small employers at least two health benefit plans.
- 23 One health benefit plan offered by each small employer carrier
- 24 shall be a basic health benefit plan and one plan shall be a
- 25 standard health benefit plan.
- 26 b. (1) A small employer carrier shall issue a basic
- 27 health benefit plan or-a-standard-health-benefit-plan to an
- 28 eligible a small employer that applies for either a plan if
- 29 the small employer is eligible for the plan pursuant to those
- 30 provisions set forth in section 514H.2, subsection 1, and
- 31 agrees to make the required premium payments and to satisfy
- 32 the other reasonable provisions of the health benefit plan not
- 33 inconsistent with this chapter.
- 34 (2) A small employer carrier shall issue a standard health
- 35 benefit plan to a small employer that applies for the plan and



- 1 agrees to make the required premium payments and satisfy the
- 2 other reasonable provisions of the health benefit plan not
- 3 inconsistent with this chapter.
- 4 (3) A small employer carrier establishing more than one
- 5 class of business shall maintain-and-issue-to-eligible-small
- 6 employers, in each class of business established, maintain and
- 7 offer at least one basic health benefit plan and-at-least-one
- 8 standard-health-benefit-plan-in-each-class-of-business
- 9 established to a small employer, if the employer is determined
- 10 to be eligible for the basic health benefit plan pursuant to
- 11 the provisions set forth in section 514H.2, subsection 1, and
- 12 at least one standard health benefit plan. A small employer
- 13 carrier may apply reasonable criteria in determining whether
- 14 to accept a small employer provided all of the following
- 15 apply:
- 16 (a) The criteria are not intended to discourage or prevent
- 17 acceptance of small employers applying for a basic or standard
- 18 health benefit plan.
- (b) The criteria are not related to the health status or
- 20 claims experience of the small employer.
- 21 (c) The criteria are applied consistently to all small
- 22 employers applying for coverage in the class of business.
- 23 (d) The small employer carrier provides for the acceptance
- 24 of all eligible small employers, as defined in section 513B.2,
- 25 into one or more classes of business.
- The provisions of this subparagraph do not apply to a class
- 27 of business into which the small employer carrier is no longer
- 28 enrolling new insureds who are small employers.
- 29 (3 4) For-purposes-of-this-lettered-paragraphy-a-small
- 30 employer-is-eligible-if-it-employed-at-least-two-or-more
- 31 eligible-employees-within-this-state-on-at-least-fifty-percent
- 32 of-its-days-of-operation-during-the-preceding-calendar
- 33 quarter: The provisions of this lettered paragraph shall be
- 34 effective one-hundred-eighty-days-after-the-commissioner's
- 35 upon a date as determined by the commissioner following the



- 1 commissioner's approval of the basic health benefit plan and
- 2 the standard health benefit plan.
- 3 Sec. 6. Section 513B.10, subsection 3, paragraph b, Code
- 4 1993, is amended to read as follows:
- b. The-plan A small employer carrier shall waive any time
- 6 period applicable to a preexisting condition exclusion or
- 7 limitation period with respect to particular services in a
- 8 health benefit plan for the period of time an individual was
- 9 previously covered by qualifying previous coverage that
- 10 provided benefits with respect to such service, provided that
- 11 the qualifying previous coverage was continuous to a date not
- 12 less more than thirty ninety days prior to the effective date
- 13 of the new coverage. The period of continuous coverage shall
- 14 not include any waiting period prior to the effective date of
- 15 the new coverage applied by the employer or the carrier. This
- 16 paragraph does not preclude application of any waiting period
- 17 applicable to all new enrollees under the health benefit plan.
- 18 Sec. 7. Section 513B.10, subsection 3, paragraph e, Code
- 19 1993, is amended by adding the following new subparagraph:
- 20 NEW SUBPARAGRAPH. (3) A small employer carrier may modify
- 21 a small employer's health benefit plan, other than a basic or
- 22 standard health benefit plan, provided the modifications apply
- 23 to all eligible employees and dependents of that small
- 24 employer.
- 25 Sec. 8. Section 513B.11, subsection 1, paragraphs a and c,
- 26 Code 1993, are amended to read as follows:
- 27 a. A Within ninety days after a plan of operation is
- 28 approved by the commissioner under section 513B.13, subsection
- 29 4, a small employer carrier authorized to transact the
- 30 business of insurance in this state shall notify the
- 31 commissioner at-the-time-of-authorization of the carrier's
- 32 intention to operate as a risk-assuming carrier or a
- 33 reinsuring carrier. A small employer carrier seeking to
- 34 operate as a risk-assuming carrier shall make an application
- 35 pursuant to section 513B.12.

## s.f. <u>362</u> H.F.



- c. The commissioner shall establish an application process
- 2 for small employer carriers seeking to change their status
- 3 pursuant to this subsection. If a small employer carrier has
- 4 been acquired by another such carrier, the commissioner may
- 5 waive or modify the time periods established in paragraph "b".
- 6 Sec. 9. Section 513B.13, subsection 3, paragraph b, Code
- 7 1993, is amended to read as follows:
- 8 b. In appointing the members of the board, the
- 9 commissioner shall include representatives of small employers
- 10 and small employer carriers and such other individuals as
- 11 determined to be qualified by the commissioner. At least five
- 12 of the members of the board shall be representatives of
- 13 reinsuring carriers and shall be selected from individuals
- 14 nominated by small employer carriers in this state pursuant to
- 15 procedures and guidelines provided by rule of the
- 16 commissioner.
- 17 Sec. 10. Section 513B.13, subsection 6, Code 1993, is
- 18 amended to read as follows:
- 19 6. The plan of operation shall do all of the following:
- 20 a. Establish procedures for the handling and accounting of
- 21 program assets and moneys, and for an annual fiscal reporting
- 22 to the commissioner.
- 23 b. Establish procedures for selecting an administering
- 24 carrier and setting forth the powers and duties of the
- 25 administering carrier.
- 26 c. Establish procedures for reinsuring risks in accordance
- 27 with the provisions of this section.
- 28 d. Establish procedures for collecting assessments from
- 29 reinsuring carriers to fund claims and administrative expenses
- 30 incurred or estimated to be incurred by the program.
- 31 e. Establish a methodology for applying the dollar
- 32 thresholds contained in this section for carriers that pay or
- 33 reimburse health care providers through capitation or a
- 34 salary.
- 35 f. Provide for any additional matters necessary to



- 1 implement and administer the program.
- 2 Sec. 11. <u>NEW SECTION</u>. 513B.17A RESTORATION OF TERMINATED 3 COVERAGE.
- 4 The commissioner may adopt rules to require small employer
- 5 carriers, as a condition of transacting business with small
- 6 employers in this state after July 1, 1993, to reissue a
- 7 health benefit plan to any small employer whose health benefit
- 8 plan is terminated or not renewed by a carrier after January
- 9 1, 1993, unless the carrier's termination is pursuant to
- 10 section 513B.5. The commissioner may prescribe such terms for
- ll the reissuance of coverage as the commissioner finds are
- 12 reasonable and necessary to provide continuity of coverage to
- 13 such employers.
- 14 Sec. 12. Section 514H.12, subsection 2, paragraph b, Code
- 15 1993, is amended to read as follows:
- 16 b. The employer, employs-twenty-five-or-fewer on at least
- 17 fifty percent of the employer's working days during the
- 18 preceding year employed not less than two and not more than
- 19 twenty-five full-time equivalent employees.
- 20 Sec. 13. EMERGENCY RULES. Pursuant to section 11 of this
- 21 Act, the commissioner of insurance shall adopt administrative
- 22 rules under section 17A.4, subsection 2, and section 17A.5,
- 23 subsection 2, paragraph "b", to implement the provisions of
- 24 this Act and the rules shall become effective immediately upon
- 25 filing, unless a later effective date is specified in the
- 26 rules. Any rules adopted in accordance with the provisions of
- 27 this section shall also be published as notice of intended
- 28 action as provided in section 17A.4.
- 29 EXPLANATION
- 30 This bill amends certain provisions relating to small group
- 31 health care coverage and the availability and affordability of
- 32 such coverage.
- 33 The bill amends several sections in chapter 513B relating
- 34 to small group rating practices and the availability of health
- 35 insurance coverage. The definition of "health benefit plan"



l is expanded to include major medical expense insurance, but 2 excludes policies or certificates of specified disease, 3 hospital confinement indemnity, or limited benefit health 4 insurance, so long as the insurance carrier files a statement 5 with the commissioner that such coverage is being offered as 6 supplemental health insurance with a description of the policy 7 or certificate. New section 513B.4A is created to provide 8 that a Taft-Hartley trust or a carrier with a written 9 authorization of such a trust may request an exemption from 10 the commissioner from the application of section 513B.4, which 11 relates to restrictions on premium rates. Section 513B.5 is 12 amended by providing that a small employer carrier that 13 replaces an existing policy with a new plan is to blend the 14 experience of the previously existing policy with the new 15 policy, and that a small employer carrier discontinuing the 16 sale of a particular class of policy or policies must withdraw 17 from all marketing in Iowa directed toward small employers or



Section 513B.10 is amended to provide that a small employer carrier is to waive any applicable time period relating to a 21 preexisting condition exclusion or limitation for the period 22 of time an individual was previously covered by qualifying 23 coverage, provided that the coverage was continuous to a date 24 not more than 90 days prior to the effective date of the new 25 coverage. Previously, qualifying coverage had to be 26 continuous to a date not less than 30 days prior to such 27 effective date.

18 obtain approval from the commissioner.

Section 513B.11 is amended to provide that the commissioner may waive the time periods established for a carrier which intends to act as a risk-assuming carrier in the case of a small employer carrier which is acquired by another carrier seeking to act as a risk-assuming carrier. Section 513B.13 is amended to require that the board supervising the small employer carrier reinsurance program is to establish a methodology for applying the dollar thresholds established



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1 under chapter 513B for carriers which reimburse health care
 2 providers through capitation or a salary.
      New section 513B.17A is created which authorizes the
 3
 4 commissioner to adopt rules requiring small employer carriers,
 5 as a condition of transacting business with small employers in
 6 this state after July 1, 1993, to reissue a health benefit
 7 plan to a small employer whose plan is terminated or not
 8 renewed after January 1, 1993.
      Section 514H.12 is amended to provide that the definition
10 of "small employer" includes employers who employ on at least
11 50 percent of the employer's working days not less than two
12 nor more than 25 full-time equivalent eligible employees.
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#### SENATE FILE 362

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S-3236
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      Amend Senate File 362 as follows:
         Page 1, by inserting before line 1, the
 3 following:
      "Section 1.
                  Section 513B.1, Code 1993, is amended
 5 to read as follows:
      513B.1
              TITLE -- PURPOSE.
          This chapter subchapter shall be known and may
 8 be cited as the "Model Small Group Rating Law".
          The intent of this chapter subchapter is to
10 promote the availability of health insurance coverage
11 to small employers, to prevent abusive rating
12 practices, to require disclosure of rating practices
13 to purchasers, to establish rules for continuity of
14 coverage for employers and covered individuals, and to
15 improve the efficiency and fairness of the small group
16 health insurance marketplace.
17
                 Section 513B.2, Code 1993, is amended by
18 adding the following new unnumbered paragraph before
19 subsection 1:
      NEW UNNUMBERED PARAGRAPH. As used in this
21 subchapter, unless the context otherwise requires:"
         Page 5, by striking lines 27 and 28, and
23 inserting the following:
24
      "a. A Upon the approval of a plan of operation by
25 the commissioner under section 513B.13, subsection".
         Page 5, line 33, by inserting after the words
27 "reinsuring carrier." the following:
28 notification shall be made as deemed appropriate by
29 the commissioner."
          Page 7, by inserting after line 1 the
30
      4.
31 following:
      "Sec.
                 Section 513B.16, Code 1993, is amended
33 to read as follows:
      513B.16 APPLICABILITY OF CERTAIN STATE LAWS.
      The provisions of subchapter II of this chapter
36 514H shall not apply to basic health benefit plans and
37 standard health benefit plans as provided for in
38 subchapter I of this chapter, except for section
39 <del>514</del>H-8 513B.39.
      Sec.
            . Section 513B.17, Code 1993, is amended
41 by adding the following new subsection:
      NEW SUBSECTION. 4. The commissioner may, with the
43 concurrence of the board of the Iowa small employer
44 health reinsurance program established in section
45 513B.13, extend the applicability of the provisions of
46 this chapter to employers employing up to fifty full-
47 time equivalent employees upon a finding that the
48 market for health insurance coverage for employer
49 groups employing between twenty-five and fifty
50 employees is constricted and not competitive, or upon
S-3236
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S-3236 Page l a finding that the purpose of this chapter will be 2 furthered by such extension. The extension of the 3 applicability of this chapter may exclude section 4 513B.13 relating to reinsurance. Upon the extension 5 of the applicability to employers employing up to 6 fifty full-time equivalent employees the definition of 7 "small employer" is deemed to include employers of up 8 to fifty full-time equivalent employees." Page 7, by inserting after line 13, the 9 10 following: "Sec. . Section 514H.1, unnumbered paragraph 1, 11 12 Code 1993, is amended to read as follows: As used in this chapter subchapter, unless the 14 context otherwise requires: Section 514H.9, Code 1993, is amended to 15 16 read as follows: 514H.9 PRESUMED ALLOWANCE OF COST-CONTAINMENT 18 PROCEDURES. 19 A cost-containment restriction otherwise imposed by 20 state law does not apply to a basic benefit coverage 21 policy or subscription contract unless the 22 commissioner finds after actuarial review that the 23 restricted cost-containment measure is not cost-

24 effective, and its exclusion is not in the best 25 interests of affordable health care coverage."

26 6. Page 7, by inserting after line 28 the 27 following: 28

"Sec. . CODE EDITOR TRANSFERS.

1. The Code editor shall transfer sections 514H.1 29 30 through 514H.12 to be a new subchapter II of chapter 31 513B comprising new sections 513B.31 through 513B.43.

2. The Code editor shall designate sections 513B.1

33 through 513B.29 as new subchapter I.

The Code editor shall correct all internal 35 citations and references consistent with the transfer 36 of the Code sections as provided in this section."

37 7. By renumbering as necessary.

By RICHARD VARN

S-3236 FILED MARCH 24, 1993

2920) adapted 3/31/93

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# SENATE FILE 362 BY COMMITTEE ON HUMAN RESOURCES

	(SUCCESSOR TO SSB 275)
	(AS AMENDED AND PASSED BY THE SENATE MARCH 31, 1993)
	Passed Senate, Date Passed House, Date
	Vote: Ayes Nays Nays Nays
	A BILL FOR
1 2	An Act relating to small group rating practices and the availability of health insurance coverage.
	BE IT ENACTED BY THE GENERAL ASSEMBLY OF THE STATE OF IOWA:
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SF. 362

- Section 1. Section 513B.1, Code 1993, is amended to read 2 as follows:
- 3 513B.1 TITLE -- PURPOSE.
- 4 1. This chapter subchapter shall be known and may be cited
- 5 as the "Model Small Group Rating Law".
- 6 2. The intent of this chapter subchapter is to promote the
- 7 availability of health insurance coverage to small employers,
- 8 to prevent abusive rating practices, to require disclosure of
- 9 rating practices to purchasers, to establish rules for
- 10 continuity of coverage for employers and covered individuals,
- ll and to improve the efficiency and fairness of the small group
- 12 health insurance marketplace.
- 13 Sec. 2. Section 513B.2, Code 1993, is amended by adding
- 14 the following new unnumbered paragraph before subsection 1:
- 15 NEW UNNUMBERED PARAGRAPH. As used in this subchapter,
- 16 unless the context otherwise requires:
- 17 Sec. 3. Section 513B.2, subsections 10 and 16, Code 1993,
- 18 are amended to read as follows:
- 19 10. a. "Health benefit plan" or "plan" means any hospital
- 20 or medical expense incurred policy or certificate, major
- 21 medical expense insurance, hospital or medical service plan
- 22 contract, or health maintenance organization subscriber
- 23 contract.
- 24 b. "Health benefit plan" does not include accident-only,
- 25 credit, dental, or disability income insurance, coverage
- 26 issued as a supplement to liability insurance, workers'
- 27 compensation or similar insurance, or automobile medical-
- 28 payment insurance.
- 29 c. "Health benefit plan" also does not include policies or
- 30 certificates of specified disease, hospital confinement
- 31 indemnity, or limited benefit health insurance if the carrier
- 32 offering such policies or certificates complies with all of
- 33 the following:
- 34 (1) The carrier files on or before March 1 of each year a
- 35 certification with the commissioner that contains the

- 1 following statement and information:
- 2 (a) A statement from the carrier certifying that policies
- 3 or certificates described in this paragraph "c" are being
- 4 offered and marketed as supplemental health insurance and not
- 5 as a substitute for hospital or medical expense insurance or
- 6 major medical expense insurance.
- 7 (b) A summary description of each policy or certificate
- 8 described in this paragraph "c" including the average annual
- 9 premium rates or range of premium rates in cases where
- 10 premiums vary by age, gender, or other factors, which are to
- ll be charged for such policies and certificates in this state.
- 12 (2) If a policy or certificate described in this paragraph
- 13 "c" is offered for the first time in this state on or after
- 14 July 1, 1993, the carrier files with the commissioner the
- 15 information and statement required in subparagraph (1) at
- 16 least thirty days prior to the date such policy or certificate
- 17 is issued or delivered in this state.
- 18 16. "Small employer" means a person actively engaged in
- 19 business who, on at least fifty percent of the employer's
- 20 working days during the preceding year, employed no-more-than
- 21 not less than two and not more than twenty-five full-time
- 22 equivalent eligible employees. In determining the number of
- 23 eligible employees, companies which are affiliated companies
- 24 or which are eligible to file a combined tax return for
- 25 purposes of state taxation are considered one employer.
- 26 Sec. 4. Section 513B.4, subsection 3, Code 1993, is
- 27 amended to read as follows:
- 28 3. For purposes of this section, a health benefit plan
- 29 that utilizes contains a restricted provider network provision
- 30 shall not be considered similar coverage to a health benefit
- 31 plan that does not utilize contain such a network provision,
- 32 provided-that-utilization-of-the-restricted-provider if the
- 33 restriction of benefits to network providers results in
- 34 substantial differences in claims costs.
- 35 Sec. 5. NEW SECTION. 513B.4A EXEMPTION FROM PREMIUM RATE

#### 1 RESTRICTIONS.

- 2 A Taft-Hartley trust or a carrier with the written
- 3 authorization of such a trust, may make a written request to
- 4 the commissioner for an exemption from the application of any
- 5 provisions of section 513B.4 with respect to a health benefit
- 6 plan provided to such a trust. The commissioner may grant an
- 7 exemption if the commissioner finds that application of
- 8 section 513B.4 with respect to the trust would have a
- 9 substantial adverse effect on the participants and
- 10 beneficiaries of such trust, and would require significant
- 11 modifications to one or more collective bargaining
- 12 arrangements under which the trust is established or
- 13 maintained. An exemption granted under this paragraph shall
- 14 not apply to an individual if the individual participates in a
- 15 trust as an associate member of an employee organization.
- 16 Sec. 6. Section 513B.5, Code 1993, is amended by adding
- 17 the following new subsections:
- NEW SUBSECTION. 3. A small employer carrier may replace
- 19 an existing health benefit plan with a new health benefit
- 20 plan. The premium rate for the new plan shall be developed
- 21 pursuant to section 513B.4 and must reflect the claim
- 22 experience of the previously existing plan.
- NEW SUBSECTION. 4. A small employer carrier shall not
- 24 discontinue the sale or active marketing of a particular class
- 25 of plan or plans, unless the carrier withdraws from all
- 26 marketing in this state directed at the small employer or has
- 27 obtained specific approval from the commissioner to do so.
- 28 The commissioner may approve the discontinuance upon a
- 29 demonstrated finding that the continued sale or active
- 30 marketing of a particular class of plan or plans will endanger
- 31 the solvency of the carrier or does not advance the purposes
- 32 of this section.
- 33 Sec. 7. Section 513B.10, subsection 1, Code 1993, is
- 34 amended to read as follows:
- 35 l. a. A Except as provided in section 513B.5, subsection

- 1 4, a small employer carrier, as a condition of transacting
- 2 business in this state with small employers, shall actively
- 3 offer to small employers at least two health benefit plans.
- 4 One health benefit plan offered by each small employer carrier
- 5 shall be a basic health benefit plan and one plan shall be a
- 6 standard health benefit plan.
- 7 b. (1) A small employer carrier shall issue a basic
- 8 health benefit plan or-a-standard-health-benefit-plan to an
- 9 eligible a small employer that applies for either a plan if
- 10 the small employer is eligible for the plan pursuant to those
- ll provisions set forth in section 514H.2, subsection 1, and
- 12 agrees to make the required premium payments and to satisfy
- 13 the other reasonable provisions of the health benefit plan not
- 14 inconsistent with this chapter.
- 15 (2) A small employer carrier shall issue a standard health
- 16 benefit plan to a small employer that applies for the plan and
- 17 agrees to make the required premium payments and satisfy the
- 18 other reasonable provisions of the health benefit plan not
- 19 inconsistent with this chapter.
- 20 (3) A small employer carrier establishing more than one
- 21 class of business shall maintain-and-issue-to-eligible-small
- 22 employers, in each class of business established, maintain and
- 23 offer at least one basic health benefit plan and-at-least-one
- 24 standard-health-benefit-plan-in-each-class-of-business
- 25 established to a small employer, if the employer is determined
- 26 to be eligible for the basic health benefit plan pursuant to
- 27 the provisions set forth in section 514H.2, subsection 1, and
- 28 at least one standard health benefit plan. A small employer
- 29 carrier may apply reasonable criteria in determining whether
- 30 to accept a small employer provided all of the following
- 31 apply:
- 32 (a) The criteria are not intended to discourage or prevent
- 33 acceptance of small employers applying for a basic or standard
- 34 health benefit plan.
- 35 (b) The criteria are not related to the health status or

- 1 claims experience of the small employer.
- 2 (c) The criteria are applied consistently to all small
- 3 employers applying for coverage in the class of business.
- 4 (d) The small employer carrier provides for the acceptance
- 5 of all eligible small employers, as defined in section 513B.2,
- 6 into one or more classes of business.
- 7 The provisions of this subparagraph do not apply to a class
- 8 of business into which the small employer carrier is no longer
- 9 enrolling new insureds who are small employers.
- 10 (3 4) For-purposes-of-this-lettered-paragraph;-a-small
- 11 employer-is-eligible-if-it-employed-at-least-two-or-more
- 12 eligible-employees-within-this-state-on-at-least-fifty-percent
- 13 of-its-days-of-operation-during-the-preceding-calendar
- 14 quarter. The provisions of this lettered paragraph shall be
- 15 effective one-hundred-eighty-days-after-the-commissioner's
- 16 upon a date as determined by the commissioner following the
- 17 commissioner's approval of the basic health benefit plan and
- 18 the standard health benefit plan.
- 19 Sec. 8. Section 513B.10, subsection 3, paragraph b, Code
- 20 1993, is amended to read as follows:
- 21 b. The-plan A small employer carrier shall waive any time
- 22 period applicable to a preexisting condition exclusion or
- 23 limitation period with respect to particular services in a
- 24 health benefit plan for the period of time an individual was
- 25 previously covered by qualifying previous coverage that
- 26 provided benefits with respect to such service, provided that
- 27 the qualifying previous coverage was continuous to a date not
- 28 less more than thirty ninety days prior to the effective date
- 29 of the new coverage. The period of continuous coverage shall
- 30 not include any waiting period prior to the effective date of
- 31 the new coverage applied by the employer or the carrier. This
- 32 paragraph does not preclude application of any waiting period
- 33 applicable to all new enrollees under the health benefit plan.
- 34 Sec. 9. Section 513B.10, subsection 3, paragraph e, Code
- 35 1993, is amended by adding the following new subparagraph:

- 1 NEW SUBPARAGRAPH. (3) A small employer carrier may modify
- 2 a small employer's health benefit plan, other than a basic or
- 3 standard health benefit plan, provided the modifications apply
- 4 to all eligible employees and dependents of that small
- 5 employer.
- 6 Sec. 10. Section 513B.11, subsection 1, paragraphs a and
- 7 c, Code 1993, are amended to read as follows:
- 8 a. A Upon the approval of a plan of operation by the
- 9 commissioner under section 513B.13, subsection 4, a small
- 10 employer carrier authorized to transact the business of
- ll insurance in this state shall notify the commissioner at-the
- 12 time-of-authorization of the carrier's intention to operate as
- 13 a risk-assuming carrier or a reinsuring carrier. The
- 14 notification shall be made as deemed appropriate by the
- 15 commissioner. A small employer carrier seeking to operate as
- 16 a risk-assuming carrier shall make an application pursuant to
- 17 section 513B.12.
- 18 c. The commissioner shall establish an application process
- 19 for small employer carriers seeking to change their status
- 20 pursuant to this subsection. If a small employer carrier has
- 21 been acquired by another such carrier, the commissioner may
- 22 waive or modify the time periods established in paragraph "b".
- Sec. 11. Section 513B.13, subsection 3, paragraph b, Code
- 24 1993, is amended to read as follows:
- 25 b. In appointing the members of the board, the
- 26 commissioner shall include representatives of small employers
- 27 and small employer carriers and such other individuals as
- 28 determined to be qualified by the commissioner. At least five
- 29 of the members of the board shall be representatives of
- 30 reinsuring carriers and shall be selected from individuals
- 31 nominated by small employer carriers in this state pursuant to
- 32 procedures and guidelines provided by rule of the
- 33 commissioner.
- 34 Sec. 12. Section 513B.13, subsection 6, Code 1993, is
- 35 amended to read as follows:

- 1 6. The plan of operation shall do all of the following:
- 2 a. Establish procedures for the handling and accounting of
- 3 program assets and moneys, and for an annual fiscal reporting
- 4 to the commissioner.
- 5 b. Establish procedures for selecting an administering
- 6 carrier and setting forth the powers and duties of the
- 7 administering carrier.
- 8 c. Establish procedures for reinsuring risks in accordance
- 9 with the provisions of this section.
- 10 d. Establish procedures for collecting assessments from
- ll reinsuring carriers to fund claims and administrative expenses
- 12 incurred or estimated to be incurred by the program.
- e. Establish a methodology for applying the dollar
- 14 thresholds contained in this section for carriers that pay or
- 15 reimburse health care providers through capitation or a
- 16 salary.
- 17 f. Provide for any additional matters necessary to
- 18 implement and administer the program.
- 19 Sec. 13. Section 513B.16, Code 1993, is amended to read as
- 20 follows:
- 21 513B.16 APPLICABILITY OF CERTAIN STATE LAWS.
- The provisions of subchapter II of this chapter 514H shall
- 23 not apply to basic health benefit plans and standard health
- 24 benefit plans as provided for in subchapter I of this chapter,
- 25 except for section 514H-8 513B.39.
- Sec. 14. Section 513B.17, Code 1993, is amended by adding
- 27 the following new subsection:
- 28 NEW SUBSECTION. 4. The commissioner may, with the
- 29 concurrence of the board of the Iowa small employer health
- 30 reinsurance program established in section 513B.13, extend the
- 31 applicability of the provisions of this chapter to employers
- 32 employing up to fifty full-time equivalent employees upon a
- 33 finding that the market for health insurance coverage for
- 34 employer groups employing between twenty-five and fifty
- 35 employees is constricted and not competitive, or upon a

- 1 finding that the purpose of this chapter will be furthered by
- 2 such extension. The extension of the applicability of this
- 3 chapter may exclude section 513B.13 relating to reinsurance.
- 4 Upon the extension of the applicability to employers employing
- 5 up to fifty full-time equivalent employees the definition of
- 6 "small employer" is deemed to include employers of up to fifty
- 7 full-time equivalent employees.
- 8 Sec. 15. <u>NEW SECTION</u>. 513B.17A RESTORATION OF TERMINATED
- 9 COVERAGE.
- 10 The commissioner may adopt rules to require small employer
- 11 carriers, as a condition of transacting business with small
- 12 employers in this state after July 1, 1993, to reissue a
- 13 health benefit plan to any small employer whose health benefit
- 14 plan is terminated or not renewed by a carrier after January
- 15 1, 1993, unless the carrier's termination is pursuant to
- 16 section 513B.5. The commissioner may prescribe such terms for
- 17 the reissuance of coverage as the commissioner finds are
- 18 reasonable and necessary to provide continuity of coverage to
- 19 such employers.
- Sec. 16. Section 514H.1, unnumbered paragraph 1, Code
- 21 1993, is amended to read as follows:
- 22 As used in this chapter subchapter, unless the context
- 23 otherwise requires:
- Sec. 17. Section 514H.9, Code 1993, is amended to read as
- 25 follows:
- 26 514H.9 PRESUMED ALLOWANCE OF COST-CONTAINMENT PROCEDURES.
- 27 A cost-containment restriction otherwise imposed by state
- 28 law does not apply to a basic benefit coverage policy or
- 29 subscription contract unless the commissioner finds after
- 30 actuarial review that the restricted cost-containment measure
- 31 is not cost-effective, and its exclusion is not in the best
- 32 interests of affordable health care coverage.
- 33 Sec. 18. Section 514H.12, subsection 2, paragraph b, Code
- 34 1993, is amended to read as follows:
- 35 b. The employer, employs-twenty-five-or-fewer on at least

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I fifty percent of the employer's working days during the
2 preceding year employed not less than two and not more than
3 twenty-five full-time equivalent employees.
     Sec. 19. EMERGENCY RULES. Pursuant to section 11 of this
5 Act, the commissioner of insurance shall adopt administrative
6 rules under section 17A.4, subsection 2, and section 17A.5,
7 subsection 2, paragraph "b", to implement the provisions of
8 this Act and the rules shall become effective immediately upon
9 filing, unless a later effective date is specified in the
10 rules. Any rules adopted in accordance with the provisions of
Il this section shall also be published as notice of intended
12 action as provided in section 17A.4.
      Sec. 20. CODE EDITOR TRANSFERS.
13
         The Code editor shall transfer sections 514H.1 through
14
15 514H.12 to be a new subchapter II of chapter 513B comprising
16 new sections 513B.31 through 513B.43.
      2. The Code editor shall designate sections 513B.1 through
17
18 513B.29 as new subchapter I.
        The Code editor shall correct all internal citations
19
20 and references consistent with the transfer of the Code
21 sections as provided in this section.
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VARN, CH. SZYMONIAK KRAMER

SSB 275 duman Resources

SENATE FILE 362 BY (PROPOSED COMMITTEE ON HUMAN RESOURCES BILL BY CHAIR~ PERSON SZYMONIAK)

STATE OF IOWA:

Passed	Senate,	Date	Passed	House,	Date	
Vote:	Ayes	Nays	Vote:	Ayes	Nays	
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#### A RILL FOR

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- 1 Section 1. Section 513B.2, subsections 10 and 16, Code
- 2 1993, are amended to read as follows:
- 3 10. a. "Health benefit plan" or "plan" means any hospital
- 4 or medical expense incurred policy or certificate, major
- 5 medical expense insurance, hospital or medical service plan
- 6 contract, or health maintenance organization subscriber
- 7 contract.
- 8 b. "Health benefit plan" does not include accident-only,
- 9 credit, dental, or disability income insurance, coverage
- 10 issued as a supplement to liability insurance, workers'
- 11 compensation or similar insurance, or automobile medical-
- 12 payment insurance.
- 13 c. "Health benefit plan" also does not include policies or
- 14 certificates of specified disease, hospital confinement
- 15 indemnity, or limited benefit health insurance if the carrier
- 16 offering such policies or certificates complies with all of
- 17 the following:
- 18 (1) The carrier files on or before March 1 of each year a
- 19 certification with the commissioner that contains the
- 20 following statement and information:
- 21 (a) A statement from the carrier certifying that policies
- 22 or certificates described in this paragraph "c" are being
- 23 offered and marketed as supplemental health insurance and not
- 24 as a substitute for hospital or medical expense insurance or
- 25 major medical expense insurance.
- 26 (b) A summary description of each policy or certificate
- 27 described in this paragraph "c" including the average annual
- 28 premium rates or range of premium rates in cases where
- 29 premiums vary by age, gender, or other factors, which are to
- 30 be charged for such policies and certificates in this state.
- 31 (2) If a policy or certificate described in this paragraph
- 32 "c" is offered for the first time in this state on or after
- 33 July 1, 1993, the carrier files with the commissioner the
- 34 information and statement required in subparagraph (1) at
- 35 least thirty days prior to the date such policy or certificate



- l is issued or delivered in this state.
- 2 16. "Small employer" means a person actively engaged in
- 3 business who, on at least fifty percent of the employer's
- 4 working days during the preceding year, employed no-more-than
- 5 not less than two and not more than twenty-five full-time
- 6 equivalent eligible employees. In determining the number of
- 7 eligible employees, companies which are affiliated companies
- 8 or which are eligible to file a combined tax return for
- 9 purposes of state taxation are considered one employer.
- 10 Sec. 2. Section 513B.4, subsection 3, Code 1993, is
- ll amended to read as follows:
- 3. For purposes of this section, a health benefit plan
- 13 that utilizes contains a restricted provider network provision
- 14 shall not be considered similar coverage to a health benefit
- 15 plan that does not utilize contain such a network provision,
- 16 provided-that-utilization-of-the-restricted-provider if the
- 17 restriction of benefits to network providers results in
- 18 substantial differences in claims costs.
- 19 Sec. 3. NEW SECTION. 513B.4A EXEMPTION FROM PREMIUM RATE
- 20 RESTRICTIONS.
- 21 A Taft Hartley trust or a carrier with the written
- 22 authorization of such a trust, may make a written request to
- 23 the commissioner for an exemption from the application of any
- 24 provisions of section 513B.4 with respect to a health benefit
- 25 plan provided to such a trust. The commissioner may grant an
- 26 exemption if the commissioner finds that application of
- 27 section 513B.4 with respect to the trust would have a
- 28 substantial adverse effect on the participants and
- 29 beneficiaries of such trust, and would require significant
- 30 modifications to one or more collective bargaining
- 31 arrangements under which the trust is established or
- 32 maintained. An exemption granted under this paragraph shall
- 33 not apply to an individual if the individual participates in a
- 34 trust as an associate member of an employee organization.
- Sec. 4. Section 513B.5, Code 1993, is amended by adding

- 1 the following new subsections:
- NEW SUBSECTION. 3. A small employer carrier may replace
- 3 an existing health benefit plan with a new health benefit
- 4 plan. The premium rate for the new plan shall be developed
- 5 pursuant to section 513B.4 and must reflect the claim
- 6 experience of the previously existing plan.
- 7 NEW SUBSECTION. 4. A small employer carrier shall not
- 8 discontinue the sale or active marketing of a particular class
- 9 of plan or plans, unless the carrier withdraws from all
- 10 marketing in this state directed at the small employer or has
- 11 obtained specific approval from the commissioner to do so.
- 12 The commissioner may approve the discontinuance upon a
- 13 demonstrated finding that the continued sale or active
- 14 marketing of a particular class of plan or plans will endanger
- 15 the solvency of the carrier or does not advance the purposes
- 16 of this section.
- 17 Sec. 5. Section 513B.10, subsection 1, Code 1993, is
- 18 amended to read as follows:
- 19 1. a. A Except as provided in section 513B.5, subsection
- 20 4, a small employer carrier, as a condition of transacting
- 21 business in this state with small employers, shall actively
- 22 offer to small employers at least two health benefit plans.
- 23 One health benefit plan offered by each small employer carrier
- 24 shall be a basic health benefit plan and one plan shall be a
- 25 standard health benefit plan.
- 26 b. (1) A small employer carrier shall issue a basic
- 27 health benefit plan or-a-standard-health-benefit-plan to an
- 28 eligible a small employer that applies for either a plan if
- 29 the small employer is eligible for the plan pursuant to those
- 30 provisions set forth in section 514H.2, subsection 1, and
- 31 agrees to make the required premium payments and to satisfy
- 32 the other reasonable provisions of the health benefit plan not
- 33 inconsistent with this chapter.
- 34 (2) A small employer carrier shall issue a standard health
- 35 benefit plan to a small employer that applies for the plan and

- l agrees to make the required premium payments and satisfy the
- 2 other reasonable provisions of the health benefit plan not
- 3 inconsistent with this chapter.
- 4 (3) A small employer carrier establishing more than one
- 5 class of business shall maintain-and-issue-to-eligible-small
- 6 employers, in each class of business established, maintain and
- 7 offer at least one basic health benefit plan and-at-least-one
- 8 standard-health-benefit-plan-in-each-class-of-business
- 9 established to a small employer, if the employer is determined
- 10 to be eligible for the basic health benefit plan pursuant to
- 11 the provisions set forth in section 514H.2, subsection 1, and
- 12 at least one standard health benefit plan. A small employer
- 13 carrier may apply reasonable criteria in determining whether
- 14 to accept a small employer provided all of the following
- 15 apply:
- 16 (a) The criteria are not intended to discourage or prevent
- 17 acceptance of small employers applying for a basic or standard
- 18 health benefit plan.
- 19 (b) The criteria are not related to the health status or
- 20 claims experience of the small employer.
- 21 (c) The criteria are applied consistently to all small
- 22 employers applying for coverage in the class of business.
- 23 (d) The small employer carrier provides for the acceptance
- 24 of all eligible small employers, as defined in section 513B.2,
- 25 into one or more classes of business.
- The provisions of this subparagraph do not apply to a class
- 27 of business into which the small employer carrier is no longer
- 28 enrolling new insureds who are small employers.
- 29 (3 4) For-purposes-of-this-lettered-paragraph,-a-small
- 30 employer-is-eligible-if-it-employed-at-least-two-or-more
- 31 eligible-employees-within-this-state-on-at-least-fifty-percent
- 32 of-its-days-of-operation-during-the-preceding-calendar
- 33 quarter. The provisions of this lettered paragraph shall be
- 34 effective one-hundred-eighty-days-after-the-commissioner+s
- 35 upon a date as determined by the commissioner following the

- l commissioner's approval of the basic health benefit plan and
- 2 the standard health benefit plan.
- Sec. 6. Section 513B.10, subsection 3, paragraph b, Code
- 4 1993, is amended to read as follows:
- 5 b. The-plan A small employer carrier shall waive any time
- 6 period applicable to a preexisting condition exclusion or
- 7 limitation period with respect to particular services in a
- 8 health benefit plan for the period of time an individual was
- 9 previously covered by qualifying previous coverage that
- 10 provided benefits with respect to such service, provided that
- 11 the qualifying previous coverage was continuous to a date not
- 12 less more than thirty ninety days prior to the effective date
- 13 of the new coverage. The period of continuous coverage shall
- 14 not include any waiting period prior to the effective date of
- 15 the new coverage applied by the employer or the carrier. This
- 16 paragraph does not preclude application of any waiting period
- 17 applicable to all new enrollees under the health benefit plan.
- 18 Sec. 7. Section 513B.10, subsection 3, paragraph e, Code
- 19 1993, is amended by adding the following new subparagraph:
- 20 NEW SUBPARAGRAPH. (3) A small employer carrier may modify
- 21 a small employer's health benefit plan, other than a basic or
- 22 standard health benefit plan, provided the modifications apply
- 23 to all eligible employees and dependents of that small
- 24 employer.
- 25 Sec. 8. Section 513B.11, subsection 1, paragraphs a and c,
- 26 Code 1993, are amended to read as follows:
- 27 a. A Within ninety days after a plan of operation is
- 28 approved by the commissioner under section 513B.13, subsection
- 29 4, a small employer carrier authorized to transact the
- 30 business of insurance in this state shall notify the
- 31 commissioner at-the-time-of-authorization of the carrier's
- 32 intention to operate as a risk-assuming carrier or a
- 33 reinsuring carrier. A small employer carrier seeking to
- 34 operate as a risk-assuming carrier shall make an application
- 35 pursuant to section 513B.12.

- c. The commissioner shall establish an application process
- 2 for small employer carriers seeking to change their status
- 3 pursuant to this subsection. If a small employer carrier has
- 4 been acquired by another such carrier, the commissioner may
- 5 waive or modify the time periods established in paragraph "b".
- 6 Sec. 9. Section 513B.13, subsection 3, paragraph b, Code
- 7 1993, is amended to read as follows:
- 8 b. In appointing the members of the board, the
- 9 commissioner shall include representatives of small employers
- 10 and small employer carriers and such other individuals as
- 11 determined to be qualified by the commissioner. At least five
- 12 of the members of the board shall be representatives of
- 13 reinsuring carriers and shall be selected from individuals
- 14 nominated by small employer carriers in this state pursuant to
- 15 procedures and guidelines provided by rule of the
- 16 commissioner.
- 17 Sec. 10. Section 513B.13, subsection 6, Code 1993, is
- 18 amended to read as follows:
- 19 6. The plan of operation shall do all of the following:
- 20 a. Establish procedures for the handling and accounting of
- 21 program assets and moneys, and for an annual fiscal reporting
- 22 to the commissioner.
- 23 b. Establish procedures for selecting an administering
- 24 carrier and setting forth the powers and duties of the
- 25 administering carrier.
- 26 c. Establish procedures for reinsuring risks in accordance
- 27 with the provisions of this section.
- 28 d. Establish procedures for collecting assessments from
- 29 reinsuring carriers to fund claims and administrative expenses
- 30 incurred or estimated to be incurred by the program.
- 31 e. Establish a methodology for applying the dollar
- 32 thresholds contained in this section for carriers that pay or
- 33 reimburse health care providers through capitation or a
- 34 salary.
- 35 f. Provide for any additional matters necessary to

- 1 implement and administer the program.
- 2 Sec. 11. <u>NEW SECTION</u>. 513B.17A RESTORATION OF TERMINATED 3 COVERAGE.
- 4 The commissioner may adopt rules to require small employer
- 5 carriers, as a condition of transacting business with small
- 6 employers in this state after July 1, 1993, to reissue a
- 7 health benefit plan to any small employer whose health benefit
- 8 plan is terminated or not renewed by a carrier after January
- 9 1, 1993, unless the carrier's termination is pursuant to
- 10 section 513B.5. The commissioner may prescribe such terms for
- 11 the reissuance of coverage as the commissioner finds are
- 12 reasonable and necessary to provide continuity of coverage to
- 13 such employers.
- 14 Sec. 12. Section 514H.12, subsection 2, paragraph b, Code
- 15 1993, is amended to read as follows:
- 16 b. The employer, employs-twenty-five-or-fewer on at least
- 17 fifty percent of the employer's working days during the
- 18 preceding year employed not less than two and not more than
- 19 twenty-five full-time equivalent employees.
- 20 Sec. 13. EMERGENCY RULES. Pursuant to section 11 of this
- 21 Act, the commissioner of insurance shall adopt administrative
- 22 rules under section 17A.4, subsection 2, and section 17A.5,
- 23 subsection 2, paragraph "b", to implement the provisions of
- 24 this Act and the rules shall become effective immediately upon
- 25 filing, unless a later effective date is specified in the
- 26 rules. Any rules adopted in accordance with the provisions of
- 27 this section shall also be published as notice of intended
- 28 action as provided in section 17A.4.
- 29 EXPLANATION
- 30 This bill amends certain provisions relating to small group
- 31 health care coverage and the availability and affordability of
- 32 such coverage.
- 33 The bill amends several sections in chapter 513B relating
- 34 to small group rating practices and the availability of health
- 35 insurance coverage. The definition of "health benefit plan"

1 is expanded to include major medical expense insurance, but

2 excludes policies or certificates of specified disease,

3 hospital confinement indemnity, or limited benefit health

4 insurance, so long as the insurance carrier files a statement

5 with the commissioner that such coverage is being offered as

6 supplemental health insurance with a description of the policy

7 or certificate. New section 513B.4A is created to provide

8 that a Taft Hartley trust or a carrier with a written

9 authorization of such a trust may request an exemption from

10 the commissioner from the application of section 513B.4, which

11 relates to restrictions on premium rates. Section 513B.5 is

12 amended by providing that a small employer carrier that

13 replaces an existing policy with a new plan is to blend the

14 experience of the previously existing policy with the new

15 policy, and that a small employer carrier discontinuing the

16 sale of a particular class of policy or policies must withdraw

17 from all marketing in Iowa directed toward small employers or

18 obtain approval from the commissioner.

19 Section 513B.10 is amended to provide that a small employer

20 carrier is to waive any applicable time period relating to a

21 preexisting condition exclusion or limitation for the period

22 of time an individual was previously covered by qualifying

23 coverage, provided that the coverage was continuous to a date

24 not more than 90 days prior to the effective date of the new

25 coverage. Previously, qualifying coverage had to be

26 continuous to a date not less than 30 days prior to such

27 effective date.

28 Section 513B.11 is amended to provide that the commissioner

29 may waive the time periods established for a carrier which

30 intends to act as a risk-assuming carrier in the case of a

31 small employer carrier which is acquired by another carrier

32 seeking to act as a risk-assuming carrier. Section 513B.13 is

33 amended to require that the board supervising the small

34 employer carrier reinsurance program is to establish a

35 methodology for applying the dollar thresholds established

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 1 under chapter 513B for carriers which reimburse health care
 2 providers through capitation or a salary.
      New section 513B.17A is created which authorizes the
 4 commissioner to adopt rules requiring small employer carriers,
 5 as a condition of transacting business with small employers in
 6 this state after July 1, 1993, to reissue a health benefit
 7 plan to a small employer whose plan is terminated or not
 8 renewed after January 1, 1993.
      Section 514H.12 is amended to provide that the definition
10 of "small employer" includes employers who employ on at least
11 50 percent of the employer's working days not less than two
12 nor more than 25 full-time equivalent eligible employees.
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SENATE FILE 362

#### AN ACT

RELATING TO SMALL GROUP RATING PRACTICES AND THE AVAILABILITY OF REALTH INSURANCE COVERAGE.

BE IT ENACTED BY THE GENERAL ASSEMBLY OF THE STATE OF IOWA:

Section 1. Section 513B.1, Code 1993, is amended to read as follows:

513B.1 TITLE -- PURPOSE.

- This chapter <u>subchapter</u> shall be known and may be cited as the <u>"Model Small Group Rating Law"</u>.
- 2. The intent of this chapter <u>subchapter</u> is to promote the availability of health insurance coverage to small employers, to prevent abusive rating practices, to require disclosure of rating practices to purchasers, to establish rules for continuity of coverage for employers and covered individuals, and to improve the efficiency and fairness of the small group health insurance marketplace.
- Sec. 2. Section 513B.2, Code 1993, is amended by adding the following new unnumbered paragraph before subsection 1:  $\frac{1}{2}$

NEW UNNUMBERED PARAGRAPH. As used in this subchapter, unless the context otherwise requires:

- Sec. 3. Section 513B.2, subsections 10 and 16, Code 1993, are amended to read as follows:
- 10. a. "Health benefit plan" or "plan" means any hospital or medical expense incurred policy or certificate, major

medical expense insurance, hospital or medical service plan contract, or health maintenance organization subscriber contract.

- <u>b.</u> "Health benefit plan" does not include accident-only, credit, dental, or disability income insurance, coverage issued as a supplement to liability insurance, workers' compensation or similar insurance, or automobile medical-payment insurance.
- c. "Health benefit plan" also does not include policies or certificates of specified disease, hospital confinement indemnity, or limited benefit health insurance if the carrier offering such policies or certificates complies with all of the following:
- (1) The carrier files on or before March 1 of each year a certification with the commissioner that contains the following statement and information:
- (a) A statement from the carrier certifying that policies or certificates described in this paragraph "c" are being offered and marketed as supplemental health insurance and not as a substitute for hospital or medical expense insurance or major medical expense insurance.
- (b) A summary description of each policy or certificate described in this paragraph "c" including the average annual premium rates or range of premium rates in cases where premiums vary by age, gender, or other factors, which are to be charged for such policies and certificates in this state.
- [2] If a policy or certificate described in this paragraph "c" is offered for the first time in this state on or after July 1, 1993, the carrier files with the commissioner the information and statement required in subparagraph (1) at least thirty days prior to the date such policy or certificate is issued or delivered in this state.
- 16. "Small employer" means a person actively engaged in business who, on at least fifty percent of the employer's working days during the preceding year, employed no-more-than

not less than two and not more than twenty-five full-time equivalent eligible employees. In determining the number of eligible employees, companies which are affiliated companies or which are eligible to file a combined tax return for purposes of state taxation are considered one employer.

- Sec. 4. Section 513B.4, subsection 3, Code 1993, is amended to read as follows:
- 3. Por purposes of this section, a health benefit plan that utilizes contains a restricted provider network provision shall not be considered similar coverage to a health benefit plan that does not utilize contain such a network provision, provided-that-utilization-of-the-restricted-provider if the restriction of benefits to network providers results in substantial differences in claims costs.
- Sec. 5. <u>NEW SECTION</u>. 513B.4A EXEMPTION FROM PREMIUM RATE RESTRICTIONS.

A Taft-Martley trust or a carrier with the written authorization of such a trust, may make a written request to the commissioner for an exemption from the application of any provisions of section 513B.4 with respect to a health benefit plan provided to such a trust. The commissioner may grant an exemption if the commissioner finds that application of section 513B.4 with respect to the trust would have a substantial adverse effect on the participants and beneficiaries of such trust, and would require significant modifications to one or more collective bargaining arrangements under which the trust is established or maintained. An exemption granted under this paragraph shall not apply to an individual if the individual participates in a trust as an associate member of an employee organization.

Sec. 6. Section 513B.5, Code 1993, is amended by adding the following new subsections:

NEW SUBSECTION. 3. A small employer carrier may replace an existing health benefit plan with a new health benefit plan. The premium rate for the new plan shall be developed

pursuant to section 513B.4 and must reflect the claim experience of the previously existing plan.

NEW SUBSECTION. 4. A small employer carrier shall not discontinue the sale or active marketing of a particular class of plan or plans, unless the carrier withdraws from all marketing in this state directed at the small employer or has obtained specific approval from the commissioner to do so. The commissioner may approve the discontinuance upon a demonstrated finding that the continued sale or active marketing of a particular class of plan or plans will endanger the solvency of the carrier or does not advance the purposes of this section.

- Sec. 7. Section 513B.10, subsection 1, Code 1993, is amended to read as follows:
- 1. a. A Except as provided in section 5138.5, subsection 4, a small employer carrier, as a condition of transacting business in this state with small employers, shall actively offer to small employers at least two health benefit plans. One health benefit plan offered by each small employer carrier shall be a basic health benefit plan and one plan shall be a standard health benefit plan.
- b. (1) A small employer carrier shall issue a basic health benefit plan or-a-standard-health-benefit-plan to an eligible a small employer that applies for either a plan if the small employer is eligible for the plan pursuant to those provisions set forth in section 514H.2, subsection 1, and agrees to make the required premium payments and to satisfy the other reasonable provisions of the health benefit plan not inconsistent with this chapter.
- (2) A small employer carrier shall issue a standard health benefit plan to a small employer that applies for the plan and agrees to make the required premium payments and satisfy the other reasonable provisions of the health benefit plan not inconsistent with this chapter.

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- (3) A small employer carrier establishing more than one class of business shall maintain-and-isaue-to-eligible-small employers, in each class of business established, maintain and offer at least one basic health benefit plan and-at-least-one standard-health-benefit-plan-in-each-class-of-business established to a small employer, if the employer is determined to be eligible for the basic health benefit plan pursuant to the provisions set forth in section 514H.2, subsection 1, and at least one standard health benefit plan. A small employer carrier may apply reasonable criteria in determining whether to accept a small employer provided all of the following apply:
- (a) The criteria are not intended to discourage or prevent acceptance of small employers applying for a basic or standard health benefit plan.
- (b) The criteria are not related to the health status or claims experience of the small employer.
- (c) The criteria are applied consistently to all small employers applying for coverage in the class of business.
- (d) The small employer carrier provides for the acceptance of all eligible small employers, as defined in section 513B.2, into one or more classes of business.

The provisions of this subparagraph do not apply to a class of business into which the small employer carrier is no longer enrolling new insureds who are small employers.

(3 4) Por-purposes-of-this-lettered-paragraphy-a-small employer-is-eligible-if-it-employed-at-least-two-or-more eligible-employees-within-this-state-on-at-least-fifty-percent of-its-days-of-operation-during-the-preceding-calendar quarter. The provisions of this lettered paragraph shall be effective one-hundred-eighty-days-after-the-commissioner's upon a date as determined by the commissioner following the commissioner's approval of the basic health benefit plan and the standard health benefit plan.

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Sec. 8. Section 513B.10, subsection 3, paragraph b, Code 1993, is amended to read as follows:

b. The plan A small employer carrier shall waive any time period applicable to a preexisting condition exclusion or limitation period with respect to particular services in a health benefit plan for the period of time an individual was previously covered by qualifying previous coverage that provided benefits with respect to such service, provided that the qualifying previous coverage was continuous to a date not less more than thirty ninety days prior to the effective date of the new coverage. The period of continuous coverage shall not include any waiting period prior to the effective date of the new coverage applied by the employer or the carrier. This paragraph does not preclude application of any waiting period applicable to all new enrollees under the health benefit plan.

Sec. 9. Section 513B.10, subsection 3, paragraph e. Code 1993, is amended by adding the following new subparagraph:

NEW SUBPARAGRAPH. (3) A small employer carrier may modify a small employer's health benefit plan, other than a basic or standard health benefit plan, provided the modifications apply to all eligible employees and dependents of that small employer.

Sec. 10. Section 513B.11, subsection 1, paragraphs a and c, Code 1993, are amended to read as follows:

a. A Upon the approval of a plan of operation by the commissioner under section 513B.13, subsection 4, a small employer carrier authorized to transact the business of insurance in this state shall notify the commissioner at the time-of-authorization of the carrier's intention to operate as a risk-assuming carrier or a reinsuring carrier. The notification shall be made as deemed appropriate by the commissioner. A small employer carrier seeking to operate as a risk-assuming carrier shall make an application pursuant to section 513B.12.

- c. The commissioner shall establish an application process for small employer carriers seeking to change their status pursuant to this subsection. If a small employer carrier has been acquired by another such carrier, the commissioner may waive or modify the time periods established in paragraph "b".
- Sec. 11. Section 513B.13, subsection 3, paragraph b, Code 1993, is amended to read as follows:
- b. In appointing the members of the board, the commissioner shall include representatives of small employers and small employer carriers and such other individuals as determined to be qualified by the commissioner. At least five of the members of the board shall be representatives of reinsuring carriers and shall be selected from individuals nominated by small employer carriers in this state pursuant to procedures and guidelines provided by rule of the commissioner.
- Sec. 12. Section 5138.13, subsection 6, Code 1993, is amended to read as follows:
  - 6. The plan of operation shall do all of the following:
- a. Establish procedures for the handling and accounting of program assets and moneys, and for an annual fiscal reporting to the commissioner.
- b. Betablish procedures for selecting an administering carrier and setting forth the powers and duties of the administering carrier.
- c. Establish procedures for reinsuring risks in accordance with the provisions of this section.
- d. Establish procedures for collecting assessments from reinsuring carriers to fund claims and administrative expenses incurred or estimated to be incurred by the program.
- e. Establish a methodology for applying the dollar thresholds contained in this section for carriers that pay or reimburse health care providers through capitation or a salary.

- $\underline{\mathcal{E}}_{i}$ . Provide for any additional matters necessary to implement and administer the program.
- Sec. 13. Section 513B.16, Code 1993, is amended to read as follows:
  - 513B.16 APPLICABILITY OF CERTAIN STATE LAWS.

The provisions of <u>subchapter II of this</u> chapter 514H shall not apply to basic health benefit plans and standard health benefit plans as provided for in <u>subchapter I of</u> this chapter, except for section 514H±0 513B.39.

Sec. 14. Section 513B.17, Code 1991, is amended by adding the following new subsection:

NEW SUBSECTION. 4. The commissioner may, with the concurrence of the board of the Iowa small employer health reinsurance program established in section 513B.13, extend the applicability of the provisions of this chapter to employers employing up to fifty full-time equivalent employees upon a finding that the market for health insurance coverage for employer groups employing between twenty-five and fifty employees is constricted and not competitive, or upon a finding that the purpose of this chapter will be furthered by such extension. The extension of the applicability of this chapter may exclude section 513B.13 relating to reinsurance. Upon the extension of the applicability to employers employing up to fifty full-time equivalent employees the definition of "small employer" is deemed to include employers of up to fifty full-time equivalent employees.

Sec. 15. NEW SECTION. 513B.17A RESTORATION OF TERMINATED COVERAGE.

The commissioner may adopt rules to require small employer carriers, as a condition of transacting business with small employers in this state after July 1, 1993, to reissue a health benefit plan to any small employer whose health benefit plan is terminated or not renewed by a carrier after January 1, 1993, unless the carrier's termination is pursuant to section 513B.5. The commissioner may prescribe such terms for

Sec. 16. Section 514H.1, unnumbered paragraph 1, Code 1993, is amended to read as follows:

As used in this chapter <u>subchapter</u>, unless the context otherwise requires:

Sec. 17. Section 514H.9, Code 1993, is amended to read as follows:

514H.9 PRESUMED ALLOWANCE OF COST-CONTAINMENT PROCEDURES.

A cost-containment restriction otherwise imposed by state law does not apply to a basic benefit coverage policy or subscription contract unless the commissioner finds after actuarial review that the restricted cost-containment measure is not cost-effective, and its exclusion is not in the best interests of affordable health care coverage.

Sec. 18. Section 514H.12, subsection 2, paragraph b, Code 1993, is amended to read as follows:

b. The employer, employs-twenty-five-or-fewer on at least fifty percent of the employer's working days during the preceding year employed not less than two and not more than twenty-five full-time equivalent employees.

Sec. 19. EMERGENCY RULES. Pursuant to section 11 of this Act, the commissioner of insurance shall adopt administrative rules under section 17A.4, subsection 2, and section 17A.5, subsection 2, paragraph "b", to implement the provisions of this Act and the rules shall become effective immediately upon filing, unless a later effective date is specified in the rules. Any rules adopted in accordance with the provisions of this section shall also be published as notice of intended action as provided in section 17A.4.

Sec. 20. CODE EDITOR TRANSFERS.

1. The Code editor shall transfer sections 514H.1 through 514H.12 to be a new subchapter II of chapter 513B comprising new sections 513B.31 through 513B.43.

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2. The Code editor shall designate sections 513B.1 through 513B.29 as new subchapter I.

The Code editor shall correct all internal citations and references consistent with the transfer of the Code sections as provided in this section.

LEONARD L. BOSWELL
President of the Senate

HAROLD VAN MAANEN Speaker of the House

I hereby certify that this bill originated in the Senate and is known as Senate File 362, Seventy-fifth General Assembly.

JOHN F. DWYER

Secretary of the Senate

Approved 12 3. 199

TERRY E. BRANSTAD

Governor

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