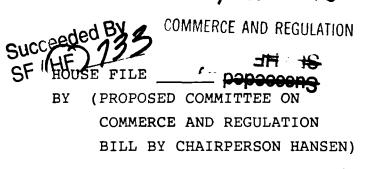
HSB 148

Shey, Chair Hoffman Chioda



Passed	House, Date	<u> </u>	Passed	Senate,	Date
Vote:	Ayes	Nays	Vote:	Ayes	Nays
	Appro	oved			

A BILL FOR

1	An	Act relating to the Iowa individual health benefit reinsurance
2		association and the Iowa comprehensive health insurance
3		association, by changing the board of directors, membership,
4		assessment, and premium tax offset related to the
5		associations.
6	BE	IT ENACTED BY THE GENERAL ASSEMBLY OF THE STATE OF IOWA:
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Section 1. Section 513C.3, subsection 5, Code 2001, is
amended to read as follows:

5. "Carrier" means any entity that provides individual 4 health benefit plans in this state. For purposes of this 5 chapter, carrier includes an insurance company, a group 6 hospital or medical service corporation, a fraternal benefit 7 society, a health maintenance organization, and any other 8 entity providing an individual plan of health insurance or 9 health benefits subject to state insurance regulation, except 10 any entity establishing a plan under chapter 509A. "Carrier" 11 does not include an organized delivery system.

12 Sec. 2. Section 513C.5, subsection 2, Code 2001, is 13 amended to read as follows:

14 2. Notwithstanding subsection 1, the commissioner, with 15 the concurrence of the board of the Iowa individual health 16 benefit reinsurance association established in-section-513C-10 17 <u>under chapter 514E</u>, may by order reduce or eliminate the 18 allowed rating bands provided under subsection 1, paragraphs 19 "a", "b", "c", and "e", or otherwise limit or eliminate the 20 use of experience rating. The-commissioner-shall-also-develop 21 a-recommendation-for-the-elimination-of-age-as-a-rating 22 characteristic7-and-shall-submit-such-recommendation-by 23 January-07-1996-

24 Sec. 3. Section 513C.10, subsection 1, Code 2001, is 25 amended to read as follows:

A-nonprofit-corporation-is-established-to-be-known-as
 the <u>The</u> Iowa individual health benefit reinsurance association
 is established as a nonprofit corporation.

29 <u>a.</u> All persons that provide health benefit plans in this 30 state including insurers providing accident and sickness 31 insurance under chapter 509, 514, or 514A; fraternal benefit 32 societies providing hospital, medical, or nursing benefits 33 under chapter 512B; and health maintenance organizations, 34 organized delivery systems, and all other entities providing 35 health insurance or health benefits subject to state insurance

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1 regulation, except any entity establishing a plan under

2 chapter 509A, shall be members of this association.

<u>b.</u> The association shall be incorporated under chapter 4 504A, shall operate under a plan of operation established and 5 approved pursuant to chapter 504A, and shall exercise its 6 powers through a <u>the</u> board of directors established under this 7 section chapter 514E.

8 Sec. 4. Section 513C.10, subsections 2 through 5, Code 9 2001, are amended by striking the subsections.

10 Sec. 5. Section 514E.2, subsections 1, 2, and 13, Code 11 2001, are amended to read as follows:

12 1. There-is-established-a-nonprofit-corporation-known-as 13 the <u>The</u> Iowa comprehensive health insurance association which 14 is established as a nonprofit corporation. The association 15 shall assure that health insurance, as limited by sections 16 514E.4 and 514E.5, is made available to each eligible Iowa 17 resident and each federally eligible individual applying to 18 the association for coverage. <u>The association shall also be</u> 19 <u>responsible for administering the Iowa individual health</u> 20 <u>benefit reinsurance association pursuant to all of the terms</u> 21 and conditions contained in chapter 513C.

<u>a.</u> All carriers as defined in section 514E.1, subsection and all organized delivery systems licensed by the director of public health providing health insurance or health care services in Iowa shall be members of the association.

26 <u>b.</u> The association shall operate under a plan of operation 27 established and approved under subsection 3 and shall exercise 28 its powers through a board of directors established under this 29 section.

30 2. The board of directors of the association shall consist 31 of-four of all of the following:

32 <u>a. Four members who shall be representatives of the four</u>
33 largest domestic carriers of individual health insurance in
34 the state as of the calendar year ending December 31, 2000,
35 based on earned premium standards.

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b. Three members who shall be representatives of the three 1 2 largest carriers of health insurance in the state, based on 3 earned premium standards, excluding Medicare supplement 4 coverage premiums, that are not otherwise represented. c. Four members selected by the members of the 5 6 association, two of whom shall be representatives from 7 corporations operating pursuant to chapter 514 on July 1, 8 1989, or any successors in interest, and two of whom shall be 9 representatives of organized delivery systems or insurers 10 providing coverage pursuant to chapter 509 or 514A7-four. d. Four public members selected by the governor;-the. 11 12 e. The commissioner or the commissioner's designee from 13 the division of insurance;-and-two. f. Two members of the general assembly, one of whom shall 14 15 be appointed by the speaker of the house and one of whom shall 16 be appointed by the president of the senate, after 17 consultation with the majority leader and the minority leader 18 of the senate, who shall be ex officio, and nonvoting members. PARAGRAPH DIVIDED. The composition of the board of 19 20 directors shall be in compliance with sections 69.16 and 21 69.16A. The governor's appointees shall be chosen from a 22 broad cross-section of the residents of this state. 23 Members of the board may be reimbursed from the moneys of 24 the association for expenses incurred by them as members, but 25 shall not be otherwise compensated by the association for 26 their services. A member who, after July 1, 1986 2001, has paid one or 27 13. 28 more assessments levied under this chapter or chapter 513C may 29 take a credit against the premium taxes, or similar taxes, 30 upon revenues or income of the member that are imposed by the 31 state on health insurance premiums pursuant to chapter 432 or 32 payments subject to taxation under section 514B.31, up to the 33 amount of twenty percent of those taxes due, for each of the 34 five calendar years following the year for which an assessment 35 was paid, or until the aggregate of those assessments has been

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1 offset by credits against those taxes if this occurs first. 2 If a member ceases doing business, all uncredited assessments 3 may be credited against its premium tax liability for the year 4 it ceases doing business.

EXPLANATION

6 This bill amends sections of Code chapters 513C and 514E, 7 dealing with the Iowa individual health benefit reinsurance 8 association and the Iowa comprehensive health insurance 9 association, respectively.

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10 The bill amends Code section 513C.10 to exclude from 11 membership in the Iowa individual health benefit reinsurance 12 association entities that establish plans under Code chapter 13 509A, the chapter that addresses group insurance for public 14 employees. The bill also amends the definition of "carrier" 15 in Code section 513C.3 to exclude the same entities from the 16 definition.

17 The bill also amends Code section 513C.10 to provide that 18 the board of directors governing the Iowa individual health 19 benefit reinsurance association is established under Code 20 chapter 514E, rather than under Code section 513C.10, and also 21 divides existing language into paragraphs. A similar change 22 is made to Code section 513C.5 regarding the reference to Code 23 chapter 514E. Code section 513C.5 also deletes a reference to 24 a study that the commissioner has completed.

The bill deletes subsections of Code section 513C.10 that address the board of directors for the Iowa individual health benefit reinsurance association.

The bill amends Code section 514E.2 to provide that the PIowa comprehensive health insurance association shall be responsible for administering the Iowa individual health benefit reinsurance association pursuant to all of the terms and conditions contained in Code chapter 513C. The bill also divides existing language into paragraphs.

The bill also amends Code section 514E.2 regarding the 5 composition of the board of directors of the Iowa individual

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1 health benefit reinsurance association, resulting in a merger 2 of the boards of the Iowa comprehensive health insurance 3 association and the Iowa individual health benefit reinsurance 4 association. The bill adds as member representatives the four 5 largest domestic carriers of the individual health insurance 6 in the state as of the calendar year ending December 31, 2000, 7 measured by an earned premium standard, and representatives of 8 the three largest carriers of health insurance in the state, 9 measured by an earned premium standard, excluding Medicare 10 supplement coverage premiums, that are not otherwise 11 represented. These are the same groups deleted under Code 12 section 513C.10 as the board of directors for the Iowa 13 individual health benefit reinsurance association. The bill 14 also divides existing language into paragraphs. The bill also amends Code section 514E.2 to provide that a 15 16 credit against the premium taxes, or similar taxes, is 17 available to members who have paid one or more assessments 18 levied under Code chapter 514E or Code chapter 513C after July 19 1, 2001, rather than just under Code chapter 514E. 20 21 22 23 24 25 26 27 28 29 30 31 32 33 34 35

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WAYS & MEANS CALENDAR HOUSE FILE 733

BY COMMITTEE ON WAYS AND MEANS

(SUCCESSOR TO HF 568) (SUCCESSOR TO HSB 148)

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Passed	(p. 1573) House, Date <u>4/26/01</u>	(P. 1398) Passed Senate, Date <u>4/30/01</u>	
Vote:	Ayes <u>94</u> Nays <u>0</u>	Vote: Ayes <u>44</u> Nays <u>0</u>	-
	Approved	7,2001	÷

A BILL FOR

APR 2 3 2001

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1 An Act relating to the Iowa individual health benefit reinsurance
association and the Iowa comprehensive health insurance
association, by changing the board of directors, membership,
and assessment related to the associations, and making changes
related to adjustments in the coverage of basic and standard
health benefit plans.
7 BE IT ENACTED BY THE GENERAL ASSEMBLY OF THE STATE OF IOWA:

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TLSB 1772HZ 79 jj/gg/8 S.F. H.F. 733

Section 1. Section 513B.14, subsection 1, Code 2001, is
amended to read as follows:

The commissioner shall adopt by rule the form and level 3 1. 4 of coverage of the basic health benefit plan and the standard 5 health benefit plan to be made available by a small employer 6 carrier pursuant to section 513B.10, but which shall be 7 appropriately adjusted at least every three years to reflect 8 the current state of the small group market. The 9 commissioner's rules shall include the benefit levels, cost-10 sharing levels, exclusions, and limitations for the basic 11 health benefit plan and the standard health benefit plan, and 12 shall define for purposes of this subchapter, a basic health 13 benefit plan and a standard health benefit plan which contain 14 benefit and cost-sharing levels that are consistent with the 15 basic method of operation and the benefit plans of health 16 maintenance organizations, including any restrictions imposed

17 by federal law.

18 Sec. 2. Section 513C.5, subsection 2, Code 2001, is 19 amended to read as follows:

20 2. Notwithstanding subsection 1, the commissioner, with 21 the concurrence of the board of the Iowa individual health 22 benefit reinsurance association established in-section-5130-10 23 <u>under chapter 514E</u>, may by order reduce or eliminate the 24 allowed rating bands provided under subsection 1, paragraphs 25 "a", "b", "c", and "e", or otherwise limit or eliminate the 26 use of experience rating. The-commissioner-shall-also-develop 27 a-recommendation-for-the-elimination-of-age-as-a-rating 28 characteristic;-and-shall-submit-such-recommendation-by 29 January-8;-1996.

30 Sec. 3. Section 513C.8, Code 2001, is amended to read as 31 follows:

32 513C.8 HEALTH BENEFIT PLAN STANDARDS.

33 The commissioner shall adopt by rule the form and level of 34 coverage of the basic health benefit plan and the standard 35 health benefit plan for the individual market which shall

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1 provide benefits substantially similar to those as provided 2 for under chapter 513B with respect to small group coverage, 3 but which shall be appropriately adjusted <u>at least every three</u> 4 <u>years</u> to reflect the <u>current state of the</u> individual market. 5 Sec. 4. Section 513C.10, subsection 1, Code 2001, is 6 amended to read as follows:

7 1. A-nonprofit-corporation-is-established-to-be-known-as
8 the The Iowa individual health benefit reinsurance association
9 is established as a nonprofit corporation.

<u>a.</u> All persons that provide health benefit plans in this
11 state including insurers providing accident and sickness
12 insurance under chapter 509, 514, or 514A; fraternal benefit
13 societies providing hospital, medical, or nursing benefits
14 under chapter 512B; and health maintenance organizations,
15 organized delivery systems, and all other entities providing
16 health insurance or health benefits subject to state insurance
17 regulation shall be members of the association.

<u>b.</u> The association shall be incorporated under chapter
504A, shall operate under a plan of operation established and
approved pursuant to chapter 504A, and shall exercise its
powers through a <u>the</u> board of directors established under this
section chapter 514E.

23 Sec. 5. Section 513C.10, subsections 2 through 5, Code 24 2001, are amended by striking the subsections.

25 Sec. 6. Section 513C.10, subsection 6, Code 2001, is 26 amended to read as follows:

6. Rates for basic and standard coverages as provided in this chapter shall be determined by each carrier or organized delivery system as the product of a basic and standard factor and the lowest rate available for issuance by that carrier or organized delivery system adjusted for rating characteristics and benefits. Basic and standard factors shall be established annually by the Iowa individual health benefit reinsurance association board with the approval of the commissioner. Multiple basic and standard factors for a distinct grouping of

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1 basic and standard policies may be established. A basic and 2 standard factor is limited to a minimum value defined as the 3 ratio of the average of the lowest rate available for issuance 4 and the maximum rate allowable by law divided by the lowest 5 rate available for issuance. A basic and standard factor is 6 limited to a maximum value defined as the ratio of the maximum 7 rate allowable by law divided by the lowest rate available for 8 issuance. The maximum rate allowable by law and the lowest 9 rate available for issuance is determined based on the rate 10 restrictions under this chapter. For policies written after 11 January 1, 2002, rates for the basic and standard coverages as 12 provided in this chapter shall be calculated using the basic 13 and standard factors and shall be no lower than the maximum 14 rate allowable by law. However, to maintain assessable loss 15 assessments at or below one percent of total health insurance 16 premiums or payments as determined in accordance with 17 subsection 10, the Iowa individual health benefit reinsurance 18 association board with the approval of the commissioner may 19 increase the value for any basic and standard factor greater 20 than the maximum value and.

The Iowa individual health benefit reinsurance association may, with the approval of the commissioner, may increase cost sharing provisions including, but not limited to, basic and standard plan deductibles, coinsurance, or copayments. Sec. 7. Section 514E.2, subsections 1 and 2, Code 2001, are amended to read as follows:

There-is-established-a-nonprofit-corporation-known-as
 the The Iowa comprehensive health insurance association which
 is established as a nonprofit corporation. The association
 shall assure that health insurance, as limited by sections
 514E.4 and 514E.5, is made available to each eligible Iowa
 resident and each federally eligible individual applying to
 the association for coverage. The association shall also be
 responsible for administering the Iowa individual health
 benefit reinsurance association pursuant to all of the terms

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1 and conditions contained in chapter 513C.

<u>a.</u> All carriers as defined in section 514E.1, subsection
3 3, and all organized delivery systems licensed by the director
4 of public health providing health insurance or health care
5 services in Iowa shall be members of the association.

6 <u>b.</u> The association shall operate under a plan of operation 7 established and approved under subsection 3 and shall exercise 8 its powers through a board of directors established under this 9 section.

10 2. The board of directors of the association shall consist 11 of-four of all of the following:

12 a. Two members who shall be representatives of the two 13 largest domestic carriers of individual health insurance in 14 the state as of the calendar year ending December 31, 2000, 15 based on earned premium standards.

b. Three members who shall be representatives of the three
17 largest carriers of health insurance in the state, based on
18 earned premium standards, excluding Medicare supplement
19 coverage premiums, that are not otherwise represented.

20 <u>c. Two</u> members selected by the members of the association, 21 two one of whom shall be representatives-from-corporations <u>a</u> 22 representative from a corporation operating pursuant to 23 chapter 514 on July 1, 1989, or any successors <u>successor</u> in 24 interest, and two one of whom shall be representatives-of <u>a</u> 25 representative of an organized delivery systems-or-insurers 26 <u>system or an insurer</u> providing coverage pursuant to chapter 27 509 or 514A;-four.

<u>d.</u> Four public members selected by the governor;-the.
 <u>e.</u> The commissioner or the commissioner's designee from
 the division of insurance;-and-two.

31 <u>f. Two</u> members of the general assembly, one of whom shall 32 be appointed by the speaker of the house and one of whom shall 33 be appointed by the president of the senate, after 34 consultation with the majority leader and the minority leader 35 of the senate, who shall be ex officio<u>, and</u> nonvoting members. s.f. _____ H.f. <u>733</u>

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<u>PARAGRAPH DIVIDED</u>. The composition of the board of
 directors shall be in compliance with sections 69.16 and
 69.16A. The governor's appointees shall be chosen from a
 4 broad cross-section of the residents of this state.

5 Members of the board may be reimbursed from the moneys of 6 the association for expenses incurred by them as members, but 7 shall not be otherwise compensated by the association for 8 their services.

EXPLANATION

10 This bill amends sections of Code chapters 513B, 513C, and 11 514E, dealing with the Iowa individual health benefit 12 reinsurance association, and the Iowa comprehensive health 13 insurance association, and adjustment in coverage of basic and 14 standard health benefit plans.

The bill amends Code sections 513B.14 and 513C.8 to provide that the insurance commissioner will adjust the health plan standards at least every three years to reflect the current state of the applicable market.

19 The bill amends Code section 513C.10 to provide that the 20 board of directors governing the Iowa individual health 21 benefit reinsurance association is established under Code 22 chapter 514E, rather than under Code section 513C.10, and also 23 divides existing language into paragraphs. A similar change 24 is made to Code section 513C.5 regarding the reference to Code 25 chapter 514E. Code section 513C.5 also deletes a reference to 26 a study that the commissioner has completed.

The bill deletes subsections of Code section 513C.10 that address the board of directors for the Iowa individual health benefit reinsurance association.

The bill amends Code section 513C.10 to provide that for 31 policies written after January 1, 2002, rates for the basic 32 and standard coverages shall be no lower that the maximum rate 33 allowable by law. In addition, the Iowa individual health 34 benefit reinsurance association may increase cost sharing 35 provisions with the approval of the commissioner.

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s.f. H.f. <u>733</u>

1 The bill amends Code section 514E.2 to provide that the 2 Iowa comprehensive health insurance association shall be 3 responsible for administering the Iowa individual health 4 benefit reinsurance association pursuant to all of the terms 5 and conditions contained in Code chapter 513C. The bill also 6 divides existing language into paragraphs.

The bill also amends Code section 514E.2 regarding the 7 8 composition of the board of directors of the Iowa individual 9 health benefit reinsurance association, resulting in a merger 10 of the boards of the Iowa comprehensive health insurance 11 association and the Iowa individual health benefit reinsurance 12 association. The bill adds as member representatives the two 13 largest domestic carriers of the individual health insurance 14 in the state as of the calendar year ending December 31, 2000, 15 measured by an earned premium standard, and representatives of 16 the three largest carriers of health insurance in the state, 17 measured by an earned premium standard, excluding Medicare 18 supplement coverage premiums, that are not otherwise 19 represented. These are the same groups deleted under Code 20 section 513C.10 as the board of directors for the Iowa 21 individual health benefit reinsurance association. The bill 22 adjusts the total number of members of the merged board, and 23 also divides existing language into paragraphs.

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HOUSE FILE 733

AN ACT

RELATING TO THE IOWA INDIVIDUAL HEALTH BENEFIT REINSURANCE ASSOCIATION AND THE IOWA COMPREHENSIVE HEALTH INSURANCE ASSOCIATION, BY CHANGING THE BOARD OF DIRECTORS, MEMBERSHIP, AND ASSESSMENT RELATED TO THE ASSOCIATIONS, AND MAKING CHANGES RELATED TO ADJUSTMENTS IN THE COVERAGE OF BASIC AND STANDARD HEALTH BENEFIT PLANS.

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

Section 1. Section 513B.14, subsection 1, Code 2001, is amended to read as follows:

1. The commissioner shall adopt by rule the form and level of coverage of the basic health benefit plan and the standard health benefit plan to be made available by a small employer carrier pursuant to section 513B.10, but which shall be appropriately adjusted at least every three years to reflect the current state of the small group market. The commissioner's rules shall include the benefit levels, costsharing levels, exclusions, and limitations for the basic health benefit plan and the standard health benefit plan, and shall define for purposes of this subchapter, a basic health benefit plan and a standard health benefit plan which contain benefit and cost-sharing levels that are consistent with the basic method of operation and the benefit plans of health maintenance organizations, including any restrictions imposed by federal law.

Sec. 2. Section 513C.5, subsection 2, Code 2001, is amended to read as follows:

2. Notwithstanding subsection 1, the commissioner, with the concurrence of the board of the Iowa individual health benefit reinsurance association established in-section-513Cr10 under chapter 514E, may by order reduce or eliminate the allowed rating bands provided under subsection 1, paragraphs "a", "b", "c", and "e", or otherwise limit or eliminate the use of experience rating. The-commissioner-shall-also-develop a-recommendation-for-the-elimination-of-age-as-a-rating characteristic7-and-shall-submit-such-recommendation-by January-87-1996

Sec. 3. Section 513C.8, Code 2001, is amended to read as follows:

513C.8 HEALTH BENEFIT PLAN STANDARDS.

The commissioner shall adopt by rule the form and level of coverage of the basic health benefit plan and the standard health benefit plan for the individual market which shall provide benefits substantially similar to those as provided for under chapter 513B with respect to small group coverage, but which shall be appropriately adjusted <u>at least every three</u> years to reflect the <u>current state of the</u> individual market.

Sec. 4. Section 513C.10, subsection 1, Code 2001, is amended to read as follows:

1. A-nonprofit-corporation-is-established-to-be-known-as the <u>The</u> Iowa individual health benefit reinsurance association is established as a nonprofit corporation.

<u>a.</u> All persons that provide health benefit plans in this state including insurers providing accident and sickness insurance under chapter 509, 514, or 514A; fraternal benefit societies providing hospital, medical, or nursing benefits under chapter 512B; and health maintenance organizations, organized delivery systems, and all other entities providing health insurance or health benefits subject to state insurance regulation shall be members of the association.

<u>b.</u> The association shall be incorporated under chapter 504A, shall operate under a plan of operation established and approved pursuant to chapter 504A, and shall exercise its powers through a <u>the</u> board of directors established under this section <u>chapter 514E</u>.

Sec. 5. Section 513C.10, subsections 2 through 5, Code 2001, are amended by striking the subsections.

Sec. 6. Section 513C.10, subsection 6, Code 2001, is amended to read as follows:

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6. Rates for basic and standard coverages as provided in this chapter shall be determined by each carrier or organized delivery system as the product of a basic and standard factor and the lowest rate available for issuance by that carrier or organized delivery system adjusted for rating characteristics and benefits. Basic and standard factors shall be established annually by the Iowa individual health benefit reinsurance association board with the approval of the commissioner. Multiple basic and standard factors for a distinct grouping of basic and standard policies may be established. A basic and standard factor is limited to a minimum value defined as the ratio of the average of the lowest rate available for issuance and the maximum rate allowable by law divided by the lowest rate available for issuance. A basic and standard factor is limited to a maximum value defined as the ratio of the maximum rate allowable by law divided by the lowest rate available for issuance. The maximum rate allowable by law and the lowest rate available for issuance is determined based on the rate restrictions under this chapter. For policies written after January 1, 2002, rates for the basic and standard coverages as provided in this chapter shall be calculated using the basic and standard factors and shall be no lower than the maximum rate allowable by law. However, to maintain assessable loss assessments at or below one percent of total health insurance premiums or payments as determined in accordance with subsection 10, the Iowa individual health benefit reinsurance association board with the approval of the commissioner may increase the value for any basic and standard factor greater than the maximum value and.

The Iowa individual health benefit reinsurance association may, with the approval of the commissioner, may increase cost sharing provisions including, but not limited to, basic and standard plan deductibles, coinsurance, or copayments.

Sec. 7. Section 514E.2, subsections 1 and 2, Code 2001, are amended to read as follows:

1. There-is-established-a-nonprofit-corporation-known-as the The Iowa comprehensive health insurance association which is established as a nonprofit corporation. The association shall assure that health insurance, as limited by sections 514E.4 and 514E.5, is made available to each eligible Iowa resident and each federally eligible individual applying to the association for coverage. The association shall also be responsible for administering the Iowa individual health benefit reinsurance association pursuant to all of the terms and conditions contained in chapter 513C.

<u>a.</u> All carriers as defined in section 514E.1, subsection 3, and all organized delivery systems licensed by the director of public health providing health insurance or health care services in Iowa shall be members of the association.

<u>b.</u> The association shall operate under a plan of operation established and approved under subsection 3 and shall exercise its powers through a board of directors established under this section.

2. The board of directors of the association shall consist of-four of all of the following:

a. Two members who shall be representatives of the two largest domestic carriers of individual health insurance in the state as of the calendar year ending December 31, 2000, based on earned premium standards.

b. Three members who shall be representatives of the three largest carriers of health insurance in the state, based on earned premium standards, excluding Medicare supplement coverage premiums, that are not otherwise represented.

c. Two members selected by the members of the association, two one of whom shall be representatives-from-corporations <u>a</u> representative from a corporation operating pursuant to chapter 514 on July 1, 1989, or any successors <u>successor</u> in interest, and two one of whom shall be representatives-of <u>a</u> representative of an organized delivery systems-or-insurers system or an insurer providing coverage pursuant to chapter 509 or 514A7-four.

d. Four public members selected by the governor 7-the.

e. The commissioner or the commissioner's designee from the division of insurance;-end-two.

<u>f. Two</u> members of the general assembly, one of whom shall be appointed by the speaker of the house and one of whom shall be appointed by the president of the senate, after consultation with the majority leader and the minority leader of the senate, who shall be ex officio, and nonvoting members.

<u>PARAGRAPH DIVIDED</u>. The composition of the board of directors shall be in compliance with sections 69.16 and 69.16A. The governor's appointees shall be chosen from a broad cross-section of the residents of this state.

Members of the board may be reimbursed from the moneys of the association for expenses incurred by them as members, but shall not be otherwise compensated by the association for their services.

> BRENT SIEGRIST Speaker of the House

MARY E. KRAMER President of the Senate

I hereby certify that this bill originated in the House and is known as House File 733, Seventy-ninth General Assembly.

Approved 2001

MARGARET THOMSON Chief Clerk of the House

THOMAS J. VILSACK Governor

H. F. 733