To: Insurance

By: Representative Evans

HOUSE BILL NO. 456

- AN ACT TO AMEND SECTION 83-9-209, MISSISSIPPI CODE OF 1972, TO REVISE ELIGIBILITY REQUIREMENTS FOR COVERAGE UNDER THE 1
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- 3 COMPREHENSIVE HEALTH INSURANCE RISK POOL ASSOCIATION'S HEALTH
- INSURANCE PLAN; AND FOR RELATED PURPOSES.
- 5 BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF MISSISSIPPI:
- 6 SECTION 1. Section 83-9-209, Mississippi Code of 1972, is
- 7 amended as follows:
- 83-9-209. (1) Any individual who is and continues to be a 8
- resident shall be eligible for coverage under this plan if 9
- 10 evidence is provided of:
- (a) A notice of rejection or refusal to issue 11
- 12 substantially similar insurance for health reasons by one (1)
- 13 insurer;
- (b) A refusal by an insurer to issue insurance except 14
- 15 with material underwriting restriction; or
- (c) A refusal by an insurer to issue insurance except 16
- 17 at a rate exceeding the plan rate.
- (2) The board shall develop a procedure for eligibility for 18
- 19 coverage by the association for any natural person who changes his
- 20 domicile to this state and who at the time domicile is established
- 21 in this state is insured by an organization similar to the
- association. The eligible maximum lifetime benefits for such 22
- covered person shall not exceed the lifetime benefits available 23
- 24 through the association, less any benefits received from a similar
- 25 organization in the former domiciliary state.
- 26 (3) The board shall promulgate a list of medical or health
- conditions for which a person shall be eligible for plan coverage 2.7

- 28 without applying for health insurance under subsection (1) of this
- 29 section. Persons who can demonstrate the existence or history of
- 30 any medical or health conditions on the list promulgated by the
- 31 board shall not be required to provide the evidence specified in
- 32 subsection (1) of this section. The list may be amended by the
- 33 board from time to time as may be appropriate.
- 34 (4) A person shall not be eligible for coverage under this
- 35 plan if:
- 36 (a) The person has or obtains health insurance coverage
- 37 substantially similar to or more comprehensive than a plan policy,
- 38 or would be eligible to have coverage if the person elected to
- 39 obtain it; except that:
- 40 (i) A person may maintain other coverage for the
- 41 period of time the person is satisfying a preexisting condition
- 42 waiting period under a plan policy; and
- 43 (ii) A person may maintain plan coverage for the
- 44 period of time the person is satisfying a preexisting condition
- 45 waiting period under another health insurance policy intended to
- 46 replace the plan policy.
- 47 (b) The person is determined to be eligible for health
- 48 care benefits under the Mississippi Medicaid Law, Section
- 49 43-13-101 et seq.
- 50 (c) The person previously terminated plan coverage
- 51 unless twelve (12) months have elapsed since the person's latest
- 52 termination.
- 53 (d) The plan has paid out Five Hundred Thousand Dollars
- 54 (\$500,000.00) in benefits on behalf of the person. The lifetime
- 55 maximum shall be Five Hundred Thousand Dollars (\$500,000.00).
- (e) The person is an inmate or resident of a public
- 57 institution.
- 58 * * *
- 59 (5) The coverage of any person shall cease:
- 60 (a) On the date a person is no longer a resident of
- 61 this state;
- (b) Upon the death of the covered person;
- (c) On the date state law requires cancellation of the
- 64 policy; or

- (d) At the option of the association, thirty (30) days
- 66 after the association makes any inquiry concerning the person's
- 67 eligibility or place of residence to which the person does not
- 68 reply.
- (6) The coverage of any person who ceases to meet the
- 70 eligibility requirements of this section may be terminated
- 71 immediately.
- 72 (7) It shall constitute an unfair trade practice for any
- 73 insurer, insurance agent or broker, employer or third party
- 74 administrator to refer an individual employee or a dependent of an
- 75 individual employee to the association, or to arrange for an
- 76 individual employee or a dependent of an individual employee to
- 77 apply to the program, for the purpose of separating such employee
- 78 or dependent from a group health benefits plan provided in
- 79 connection with the employee's employment.
- 80 SECTION 2. This act shall take effect and be in force from
- 81 and after July 1, 1999.