

By: Senator(s) Carmichael

To: Insurance;
Appropriations

SENATE BILL NO. 2215

1 AN ACT TO REQUIRE HEALTH INSURANCE POLICIES TO INCLUDE
2 COVERAGE FOR COGNITIVE REHABILITATION THERAPIES AND SERVICES
3 NECESSARY AS A RESULT OF AN ACQUIRED BRAIN INJURY; TO AMEND
4 SECTION 25-15-9, MISSISSIPPI CODE OF 1972, TO REQUIRE SUCH
5 COVERAGE UNDER THE STATE AND SCHOOL EMPLOYEES HEALTH INSURANCE
6 PLAN; AND FOR RELATED PURPOSES.

7 BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF MISSISSIPPI:

8 **SECTION 1.** Any hospital, health or medical expense insurance
9 policy, hospital or medical service contract, employee welfare
10 benefit plan, health and accident insurance policy, or any other
11 insurance contract of this type, including a group insurance plan
12 and a self-insurance plan that provides medical and surgical
13 benefits for accident and health services, which is issued,
14 amended, delivered or renewed in this state or after January 1,
15 2003, shall include coverage for cognitive rehabilitation therapy,
16 cognitive communication therapy, neurocognitive therapy and
17 rehabilitation, neurobehavioral, neurophysiological,
18 neuropsychological, psychophysiological testing or treatment,
19 neurofeedback therapy, remediation, post-acute transition services
20 or community reintegration services necessary as a result of and
21 related to an acquired brain injury. Coverage required under this
22 section may be subject to deductibles, copayments, coinsurance and
23 annual or maximum payment limits that are consistent with
24 deductibles, copayments, coinsurance and annual or maximum payment
25 limits applicable to other similar coverage under the policy. The
26 Commissioner of Insurance shall adopt rules as necessary to
27 implement this section.

28 **SECTION 2.** Section 25-15-9, Mississippi Code of 1972, is
29 amended as follows:



30 **[Through June 30 of the year in which Section 25-11-143**
31 **becomes effective as provided in subsection (1) of Section**
32 **25-11-143, this section shall read as follows:]**

33 25-15-9. (1) (a) The board shall design a plan of health
34 insurance for state employees which provides benefits for
35 semiprivate rooms in addition to other incidental coverages which
36 the board deems necessary. The amount of the coverages shall be
37 in such reasonable amount as may be determined by the board to be
38 adequate, after due consideration of current health costs in
39 Mississippi. The plan shall also include major medical benefits
40 in such amounts as the board shall determine. The board is also
41 authorized to accept bids for such alternate coverage and optional
42 benefits as the board shall deem proper. Any contract for
43 alternative coverage and optional benefits shall be awarded by the
44 board after it has carefully studied and evaluated the bids and
45 selected the best and most cost-effective bid. The board may
46 reject all such bids; however, the board shall notify all bidders
47 of the rejection and shall actively solicit new bids if all bids
48 are rejected. The board may employ or contract for such
49 consulting or actuarial services as may be necessary to formulate
50 the plan, and to assist the board in the preparation of
51 specifications and in the process of advertising for the bids for
52 the plan. Such contracts shall be solicited and entered into in
53 accordance with Section 25-15-5. The board shall keep a record of
54 all persons, agents and corporations who contract with or assist
55 the board in preparing and developing the plan. The board in a
56 timely manner shall provide copies of this record to the members
57 of the advisory council created in this section and those
58 legislators, or their designees, who may attend meetings of the
59 advisory council. The board shall provide copies of this record
60 in the solicitation of bids for the administration or servicing of
61 the self-insured program. Each person, agent or corporation
62 which, during the previous fiscal year, has assisted in the



63 development of the plan or employed or compensated any person who
64 assisted in the development of the plan, and which bids on the
65 administration or servicing of the plan, shall submit to the board
66 a statement accompanying the bid explaining in detail its
67 participation with the development of the plan. This statement
68 shall include the amount of compensation paid by the bidder to any
69 such employee during the previous fiscal year. The board shall
70 make all such information available to the members of the advisory
71 council and those legislators, or their designees, who may attend
72 meetings of the advisory council before any action is taken by the
73 board on the bids submitted. The failure of any bidder to fully
74 and accurately comply with this paragraph shall result in the
75 rejection of any bid submitted by that bidder or the cancellation
76 of any contract executed when the failure is discovered after the
77 acceptance of that bid. The board is authorized to promulgate
78 rules and regulations to implement the provisions of this
79 subsection.

80 The board shall develop plans for the insurance plan
81 authorized by this section in accordance with the provisions of
82 Section 25-15-5.

83 Any corporation, association, company or individual that
84 contracts with the board for the third-party claims administration
85 of the self-insured plan shall prepare and keep on file an
86 explanation of benefits for each claim processed. The explanation
87 of benefits shall contain such information relative to each
88 processed claim which the board deems necessary, and, at a
89 minimum, each explanation shall provide the claimant's name, claim
90 number, provider number, provider name, service dates, type of
91 services, amount of charges, amount allowed to the claimant and
92 reason codes. The information contained in the explanation of
93 benefits shall be available for inspection upon request by the
94 board. The board shall have access to all claims information
95 utilized in the issuance of payments to employees and providers.



96 (b) There is created an advisory council to advise the
97 board in the formulation of the State and School Employees Health
98 Insurance Plan. The council shall be composed of the State
99 Insurance Commissioner or his designee, an employee-representative
100 of the institutions of higher learning appointed by the board of
101 trustees thereof, an employee-representative of the Department of
102 Transportation appointed by the director thereof, an
103 employee-representative of the State Tax Commission appointed by
104 the Commissioner of Revenue, an employee-representative of the
105 Mississippi Department of Health appointed by the State Health
106 Officer, an employee-representative of the Mississippi Department
107 of Corrections appointed by the Commissioner of Corrections, and
108 an employee-representative of the Department of Human Services
109 appointed by the Executive Director of Human Services, two (2)
110 certificated public school administrators appointed by the State
111 Board of Education, two (2) certificated classroom teachers
112 appointed by the State Board of Education, a noncertificated
113 school employee appointed by the State Board of Education and a
114 community/junior college employee appointed by the State Board for
115 Community and Junior Colleges.

116 The Lieutenant Governor may designate the Secretary of the
117 Senate, the Chairman of the Senate Appropriations Committee, the
118 Chairman of the Senate Education Committee and the Chairman of the
119 Senate Insurance Committee, and the Speaker of the House of
120 Representatives may designate the Clerk of the House, the Chairman
121 of the House Appropriations Committee, the Chairman of the House
122 Education Committee and the Chairman of the House Insurance
123 Committee, to attend any meeting of the State and School Employees
124 Insurance Advisory Council. The appointing authorities may
125 designate an alternate member from their respective houses to
126 serve when the regular designee is unable to attend such meetings
127 of the council. Such designees shall have no jurisdiction or vote
128 on any matter within the jurisdiction of the council. For



129 attending meetings of the council, such legislators shall receive
130 per diem and expenses which shall be paid from the contingent
131 expense funds of their respective houses in the same amounts as
132 provided for committee meetings when the Legislature is not in
133 session; however, no per diem and expenses for attending meetings
134 of the council will be paid while the Legislature is in session.
135 No per diem and expenses will be paid except for attending
136 meetings of the council without prior approval of the proper
137 committee in their respective houses.

138 (c) No change in the terms of the State and School
139 Employees Health Insurance Plan may be made effective unless the
140 board, or its designee, has provided notice to the State and
141 School Employees Health Insurance Advisory Council and has called
142 a meeting of the council at least fifteen (15) days before the
143 effective date of such change. In the event that the State and
144 School Employees Health Insurance Advisory Council does not meet
145 to advise the board on the proposed changes, the changes to the
146 plan shall become effective at such time as the board has informed
147 the council that the changes shall become effective.

148 (d) **Medical benefits for retired employees and**
149 **dependents under age sixty-five (65) years and not eligible for**
150 **Medicare benefits.** The same health insurance coverage as for all
151 other active employees and their dependents shall be available to
152 retired employees and all dependents under age sixty-five (65)
153 years who are not eligible for Medicare benefits, the level of
154 benefits to be the same level as for all other active
155 participants. This section will apply to those employees who
156 retire due to one hundred percent (100%) medical disability as
157 well as those employees electing early retirement.

158 (e) **Medical benefits for retired employees and**
159 **dependents over age sixty-five (65) years or otherwise eligible**
160 **for Medicare benefits.** The health insurance coverage available to
161 retired employees over age sixty-five (65) years or otherwise



162 eligible for Medicare benefits, and all dependents over age
163 sixty-five (65) years or otherwise eligible for Medicare benefits,
164 shall be the major medical coverage with the lifetime maximum of
165 One Million Dollars (\$1,000,000.00). Benefits shall be reduced by
166 Medicare benefits as though such Medicare benefits were the base
167 plan.

168 All covered individuals shall be assumed to have full
169 Medicare coverage, Parts A and B; and any Medicare payments under
170 both Parts A and B shall be computed to reduce benefits payable
171 under this plan.

172 (2) Nonduplication of benefits--reduction of benefits by
173 Title XIX benefits: When benefits would be payable under more
174 than one (1) group plan, benefits under those plans will be
175 coordinated to the extent that the total benefits under all plans
176 will not exceed the total expenses incurred.

177 Benefits for hospital or surgical or medical benefits shall
178 be reduced by any similar benefits payable in accordance with
179 Title XIX of the Social Security Act or under any amendments
180 thereto, or any implementing legislation.

181 Benefits for hospital or surgical or medical benefits shall
182 be reduced by any similar benefits payable by workers'
183 compensation.

184 (3) Beginning on July 1, 2003, the board shall provide that
185 the plan include coverage for cognitive rehabilitation therapy,
186 cognitive communication therapy, neurocognitive therapy and
187 rehabilitation, neurobehavioral, neurophysiological,
188 neuropsychological, psychophysiological testing or treatment,
189 neurofeedback therapy, remediation, post-acute transition servies
190 or community reintegration services necessary as a result of and
191 related to an acquired brain injury. The benefit provided in this
192 subsection shall be subject to the same annual deductibles or
193 coinsurance established for all other covered benefits within the
194 plan.



195 (4) (a) Schedule of life insurance benefits--group term:
196 The amount of term life insurance for each active employee of a
197 department, agency or institution of the state government shall
198 not be in excess of One Hundred Thousand Dollars (\$100,000.00), or
199 twice the amount of the employee's annual wage to the next highest
200 One Thousand Dollars (\$1,000.00), whichever may be less, but in no
201 case less than Thirty Thousand Dollars (\$30,000.00), with a like
202 amount for accidental death and dismemberment on a twenty-four
203 hour basis. The plan will further contain a premium waiver
204 provision if a covered employee becomes totally and permanently
205 disabled prior to age sixty-five (65) years. Employees retiring
206 after June 30, 1999, shall be eligible to continue life insurance
207 coverage in an amount of Five Thousand Dollars (\$5,000.00), Ten
208 Thousand Dollars (\$10,000.00) or Twenty Thousand Dollars
209 (\$20,000.00) into retirement.

210 (b) Effective October 1, 1999, schedule of life
211 insurance benefits--group term: The amount of term life insurance
212 for each active employee of any school district, community/junior
213 college, public library or university-based program authorized
214 under Section 37-23-31 for deaf, aphasic and emotionally disturbed
215 children or any regular nonstudent bus driver shall not be in
216 excess of One Hundred Thousand Dollars (\$100,000.00), or twice the
217 amount of the employee's annual wage to the next highest One
218 Thousand Dollars (\$1,000.00), whichever may be less, but in no
219 case less than Thirty Thousand Dollars (\$30,000.00), with a like
220 amount for accidental death and dismemberment on a twenty-four
221 hour basis. The plan will further contain a premium waiver
222 provision if a covered employee of any school district,
223 community/junior college, public library or university-based
224 program authorized under Section 37-23-31 for deaf, aphasic and
225 emotionally disturbed children or any regular nonstudent bus
226 driver becomes totally and permanently disabled prior to age
227 sixty-five (65) years. Employees of any school district,



228 community/junior college, public library or university-based
229 program authorized under Section 37-23-31 for deaf, aphasic and
230 emotionally disturbed children or any regular nonstudent bus
231 driver retiring after September 30, 1999, shall be eligible to
232 continue life insurance coverage in an amount of Five Thousand
233 Dollars (\$5,000.00), Ten Thousand Dollars (\$10,000.00) or Twenty
234 Thousand Dollars (\$20,000.00) into retirement.

235 (5) Any eligible employee who on March 1, 1971, was
236 participating in a group life insurance program which has
237 provisions different from those included herein and for which the
238 State of Mississippi was paying a part of the premium may, at his
239 discretion, continue to participate in such plan. Such employee
240 shall pay in full all additional costs, if any, above the minimum
241 program established by this article. Under no circumstances shall
242 any individual who begins employment with the state after March 1,
243 1971, be eligible for the provisions of this subsection.

244 (6) The board may offer medical savings accounts as defined
245 in Section 71-9-3 as a plan option.

246 (7) Any premium differentials, differences in coverages,
247 discounts determined by risk or by any other factors shall be
248 uniformly applied to all active employees participating in the
249 insurance plan. It is the intent of the Legislature that the
250 state contribution to the plan be the same for each employee
251 throughout the state.

252 (8) On October 1, 1999, any school district,
253 community/junior college district or public library may elect to
254 remain with an existing policy or policies of group life insurance
255 with an insurance company approved by the State and School
256 Employees Health Insurance Management Board, in lieu of
257 participation in the State and School Life Insurance Plan. The
258 state's contribution of up to fifty percent (50%) of the active
259 employee's premium under the State and School Life Insurance Plan
260 may be applied toward the cost of coverage for full-time employees



261 participating in the approved life insurance company group plan.
262 For purposes of this subsection (8), "life insurance company group
263 plan" means a plan administered or sold by a private insurance
264 company. After October 1, 1999, the board may assess charges in
265 addition to the existing State and School Life Insurance Plan
266 rates to such employees as a condition of enrollment in the State
267 and School Life Insurance Plan. In order for any life insurance
268 company group plan existing as of October 1, 1999, to be approved
269 by the State and School Employees Health Insurance Management
270 Board under this subsection (8), it shall meet the following
271 criteria:

272 (a) The insurance company offering the group life
273 insurance plan shall be rated "A-" or better by A.M. Best state
274 insurance rating service and be licensed as an admitted carrier in
275 the State of Mississippi by the Mississippi Department of
276 Insurance.

277 (b) The insurance company group life insurance plan
278 shall provide the same life insurance, accidental death and
279 dismemberment insurance and waiver of premium benefits as provided
280 in the State and School Life Insurance Plan.

281 (c) The insurance company group life insurance plan
282 shall be fully insured, and no form of self-funding life insurance
283 by such company shall be approved.

284 (d) The insurance company group life insurance plan
285 shall have one (1) composite rate per One Thousand Dollars
286 (\$1,000.00) of coverage for active employees regardless of age and
287 one (1) composite rate per One Thousand Dollars (\$1,000.00) of
288 coverage for all retirees regardless of age or type of retiree.

289 (e) The insurance company and its group life insurance
290 plan shall comply with any administrative requirements of the
291 State and School Employees Health Insurance Management Board. In
292 the event any insurance company providing group life insurance
293 benefits to employees under this subsection (8) fails to comply

294 with any requirements specified herein or any administrative
295 requirements of the board, the state shall discontinue providing
296 funding for the cost of such insurance.

297 **[From and after July 1 of the year in which Section 25-11-143**
298 **becomes effective as provided in subsection (1) of Section**
299 **25-11-143, this section shall read as follows:]**

300 25-15-9. (1) (a) The board shall design a plan of health
301 insurance for state employees that provides benefits for
302 semiprivate rooms in addition to other incidental coverages that
303 the board deems necessary. The amount of the coverages shall be
304 in such reasonable amount as may be determined by the board to be
305 adequate, after due consideration of current health costs in
306 Mississippi. The plan shall also include major medical benefits
307 in such amounts as the board shall determine. The board is also
308 authorized to accept bids for such alternate coverage and optional
309 benefits as the board deems proper. Any contract for alternative
310 coverage and optional benefits shall be awarded by the board after
311 it has carefully studied and evaluated the bids and selected the
312 best and most cost-effective bid. The board may reject all such
313 bids; however, the board shall notify all bidders of the rejection
314 and shall actively solicit new bids if all bids are rejected. The
315 board may employ or contract for such consulting or actuarial
316 services as may be necessary to formulate the plan, and to assist
317 the board in the preparation of specifications and in the process
318 of advertising for the bids for the plan. Those contracts shall
319 be solicited and entered into in accordance with Section 25-15-5.
320 The board shall keep a record of all persons, agents and
321 corporations who contract with or assist the board in preparing
322 and developing the plan. The board in a timely manner shall
323 provide copies of this record to the members of the advisory
324 council created in this section and those legislators, or their
325 designees, who may attend meetings of the advisory council. The
326 board shall provide copies of this record in the solicitation of



327 bids for the administration or servicing of the self-insured
328 program. Each person, agent or corporation that, during the
329 previous fiscal year, has assisted in the development of the plan
330 or employed or compensated any person who assisted in the
331 development of the plan, and that bids on the administration or
332 servicing of the plan, shall submit to the board a statement
333 accompanying the bid explaining in detail its participation with
334 the development of the plan. This statement shall include the
335 amount of compensation paid by the bidder to any such employee
336 during the previous fiscal year. The board shall make all such
337 information available to the members of the advisory council and
338 those legislators, or their designees, who may attend meetings of
339 the advisory council before any action is taken by the board on
340 the bids submitted. The failure of any bidder to fully and
341 accurately comply with this paragraph shall result in the
342 rejection of any bid submitted by that bidder or the cancellation
343 of any contract executed when the failure is discovered after the
344 acceptance of that bid. The board is authorized to promulgate
345 rules and regulations to implement the provisions of this
346 subsection.

347 The board shall develop plans for the insurance plan
348 authorized by this section in accordance with the provisions of
349 Section 25-15-5.

350 Any corporation, association, company or individual that
351 contracts with the board for the third-party claims administration
352 of the self-insured plan shall prepare and keep on file an
353 explanation of benefits for each claim processed. The explanation
354 of benefits shall contain such information relative to each
355 processed claim which the board deems necessary, and, at a
356 minimum, each explanation shall provide the claimant's name, claim
357 number, provider number, provider name, service dates, type of
358 services, amount of charges, amount allowed to the claimant and
359 reason codes. The information contained in the explanation of



360 benefits shall be available for inspection upon request by the
361 board. The board shall have access to all claims information
362 utilized in the issuance of payments to employees and providers.

363 (b) There is created an advisory council to advise the
364 board in the formulation of the State and School Employees Health
365 Insurance Plan. The council shall be composed of the State
366 Insurance Commissioner or his designee, an employee-representative
367 of the state institutions of higher learning appointed by the
368 board of trustees thereof, an employee-representative of the
369 Mississippi Department of Transportation appointed by the director
370 thereof, an employee-representative of the State Tax Commission
371 appointed by the Commissioner of Revenue, an
372 employee-representative of the State Department of Health
373 appointed by the State Health Officer, an employee-representative
374 of the Mississippi Department of Corrections appointed by the
375 Commissioner of Corrections, and an employee-representative of the
376 Mississippi Department of Human Services appointed by the
377 Executive Director of Human Services, two (2) certificated public
378 school administrators appointed by the State Board of Education,
379 two (2) certificated classroom teachers appointed by the State
380 Board of Education, a noncertificated school employee appointed by
381 the State Board of Education and a community/junior college
382 employee appointed by the State Board for Community and Junior
383 Colleges.

384 The Lieutenant Governor may designate the Secretary of the
385 Senate, the Chairman of the Senate Appropriations Committee, the
386 Chairman of the Senate Education Committee and the Chairman of the
387 Senate Insurance Committee, and the Speaker of the House of
388 Representatives may designate the Clerk of the House, the Chairman
389 of the House Appropriations Committee, the Chairman of the House
390 Education Committee and the Chairman of the House Insurance
391 Committee, to attend any meeting of the State and School Employees
392 Insurance Advisory Council. The appointing authorities may



393 designate an alternate member from their respective houses to
394 serve when the regular designee is unable to attend such meetings
395 of the council. Those designees shall have no jurisdiction or
396 vote on any matter within the jurisdiction of the council. For
397 attending meetings of the council, those legislators shall receive
398 per diem and expenses, which shall be paid from the contingent
399 expense funds of their respective houses in the same amounts as
400 provided for committee meetings when the Legislature is not in
401 session; however, no per diem and expenses for attending meetings
402 of the council will be paid while the Legislature is in session.
403 No per diem and expenses will be paid except for attending
404 meetings of the council without prior approval of the proper
405 committee in their respective houses.

406 (c) No change in the terms of the State and School
407 Employees Health Insurance Plan may be made effective unless the
408 board, or its designee, has provided notice to the State and
409 School Employees Health Insurance Advisory Council and has called
410 a meeting of the council at least fifteen (15) days before the
411 effective date of the change. If the State and School Employees
412 Health Insurance Advisory Council does not meet to advise the
413 board on the proposed changes, the changes to the plan will become
414 effective at such time as the board has informed the council that
415 the changes will become effective.

416 (2) Nonduplication of benefits--reduction of benefits by
417 Title XIX benefits: When benefits would be payable under more
418 than one (1) group plan, benefits under those plans will be
419 coordinated to the extent that the total benefits under all plans
420 will not exceed the total expenses incurred.

421 Benefits for hospital or surgical or medical benefits shall
422 be reduced by any similar benefits payable in accordance with
423 Title XIX of the Social Security Act or under any amendments
424 thereto, or any implementing legislation.



425 Benefits for hospital or surgical or medical benefits shall
426 be reduced by any similar benefits payable by workers'
427 compensation.

428 (3) Beginning on July 1, 2003, the board shall provide that
429 the plan include coverage for cognitive rehabilitation therapy,
430 cognitive communication therapy, neurocognitive therapy and
431 rehabilitation, neurobehavioral, neurophysiological,
432 neuropsychological, psychophysiological testing or treatment,
433 neurofeedback therapy, remediation, post-acute transition servies
434 or community reintegration services necessary as a result of and
435 related to an acquired brain injury. The benefit provided in this
436 subsection shall be subject to the same annual deductibles or
437 coinsurance established for all other covered benefits within the
438 plan.

439 (4) (a) Schedule of life insurance benefits--group term:
440 The amount of term life insurance for each active employee of a
441 department, agency or institution of the state government shall
442 not be in excess of One Hundred Thousand Dollars (\$100,000.00), or
443 twice the amount of the employee's annual wage to the next highest
444 One Thousand Dollars (\$1,000.00), whichever may be less, but in no
445 case less than Thirty Thousand Dollars (\$30,000.00), with a like
446 amount for accidental death and dismemberment on a
447 twenty-four-hour basis.

448 (b) Effective October 1, 1999, schedule of life
449 insurance benefits--group term: The amount of term life insurance
450 for each active employee of any school district, community/junior
451 college, public library, university-based program authorized under
452 Section 37-23-31 for deaf, aphasic and emotionally disturbed
453 children, or any regular nonstudent bus driver shall not be in
454 excess of One Hundred Thousand Dollars (\$100,000.00), or twice the
455 amount of the employee's annual wage to the next highest One
456 Thousand Dollars (\$1,000.00), whichever may be less, but in no
457 case less than Thirty Thousand Dollars (\$30,000.00), with a like



458 amount for accidental death and dismemberment on a
459 twenty-four-hour basis. The plan will further contain a premium
460 waiver provision if a covered employee of any school district,
461 community/junior college, public library, university-based program
462 authorized under Section 37-23-31 for deaf, aphasic and
463 emotionally disturbed children, or any regular nonstudent bus
464 driver becomes totally and permanently disabled before age
465 sixty-five (65) years.

466 (5) Any eligible employee who on March 1, 1971, was
467 participating in a group life insurance program that has
468 provisions different from those included in this section and for
469 which the State of Mississippi was paying a part of the premium
470 may, at his discretion, continue to participate in that plan. The
471 employee shall pay in full all additional costs, if any, above the
472 minimum program established by this article. Under no
473 circumstances shall any individual who begins employment with the
474 state after March 1, 1971, be eligible for the provisions of this
475 subsection.

476 (6) The board may offer medical savings accounts as defined
477 in Section 71-9-3 as a plan option.

478 (7) Any premium differentials, differences in coverages,
479 discounts determined by risk or by any other factors shall be
480 uniformly applied to all active employees participating in the
481 insurance plan. It is the intent of the Legislature that the
482 state contribution to the plan be the same for each employee
483 throughout the state.

484 (8) On October 1, 1999, any school district,
485 community/junior college district or public library may elect to
486 remain with an existing policy or policies of group life insurance
487 with an insurance company approved by the State and School
488 Employees Health Insurance Management Board, in lieu of
489 participation in the State and School Life Insurance Plan. The
490 state's contribution of up to fifty percent (50%) of the active



491 employee's premium under the State and School Life Insurance Plan
492 may be applied toward the cost of coverage for full-time employees
493 participating in the approved life insurance company group plan.
494 For purposes of this subsection (8), "life insurance company group
495 plan" means a plan administered or sold by a private insurance
496 company. After October 1, 1999, the board may assess charges in
497 addition to the existing State and School Life Insurance Plan
498 rates to those employees as a condition of enrollment in the State
499 and School Life Insurance Plan. In order for any life insurance
500 company group plan existing as of October 1, 1999, to be approved
501 by the State and School Employees Health Insurance Management
502 Board under this subsection (8), it shall meet the following
503 criteria:

504 (a) The insurance company offering the group life
505 insurance plan shall be rated "A-" or better by A.M. Best state
506 insurance rating service and be licensed as an admitted carrier in
507 the State of Mississippi by the Mississippi Department of
508 Insurance.

509 (b) The insurance company group life insurance plan
510 shall provide the same life insurance, accidental death and
511 dismemberment insurance and waiver of premium benefits as provided
512 in the State and School Life Insurance Plan.

513 (c) The insurance company group life insurance plan
514 shall be fully insured, and no form of self-funding life insurance
515 by such company shall be approved.

516 (d) The insurance company group life insurance plan
517 shall have one (1) composite rate per One Thousand Dollars
518 (\$1,000.00) of coverage for active employees regardless of age.

519 (e) The insurance company and its group life insurance
520 plan shall comply with any administrative requirements of the
521 State and School Employees Health Insurance Management Board. If
522 any insurance company providing group life insurance benefits to
523 employees under this subsection (8) fails to comply with any



524 requirements specified in this subsection or any administrative
525 requirements of the board, the state shall discontinue providing
526 funding for the cost of that insurance.

527 **SECTION 3.** This act shall take effect and be in force from
528 and after July 1, 2003.

