By: Representative Dedeaux

HOUSE BILL NO. 1213

AN ACT TO AMEND SECTION 71-9-3, MISSISSIPPI CODE OF 1972, TO 1 LOWER THE MINIMUM DEDUCTIBLE FOR INSURANCE COVERAGE TO MEDICAL 2 3 SAVINGS ACCOUNT HOLDERS TO \$1,000.00; AND FOR RELATED PURPOSES. 4 BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF MISSISSIPPI: SECTION 1. Section 71-9-3, Mississippi Code of 1972, is 5 6 amended as follows:

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71-9-3. As used in this chapter:

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(a) "Account administrator" means a state chartered 9 bank, savings and loan association, credit union or trust company authorized to act as a fiduciary and under the supervision of the 10 Department of Banking and Consumer Finance or the Department of 11 Savings Associations, as appropriate; a national bank, national 12 13 lending association or federal savings and loan association or credit union authorized to act as a fiduciary in this state; an 14 insurer licensed and admitted to do business in this state; a 15 16 third party administrator licensed by the Mississippi Commissioner of Insurance; or an employer, if the employer has a self-insured 17 18 health plan meeting federal ERISA requirements.

"Account holder" means a resident individual or an 19 (b) 20 employee for whose benefit a medical savings account is 21 established.

22 (c) "Dependent" means the spouse of an account holder or the child of an account holder if the child is: 23

(i) Legally entitled to the provision of proper or 24 necessary subsistence, education, medical care, or other care 25 26 necessary for his or her health, guidance or well-being and not

27 otherwise emancipated, self-supporting, married or a member of the 28 Armed Forces of the United States; or

29 (ii) Mentally or physically incapacitated to the30 extent that he or she is not self-sufficient.

31 (d) "Domicile" means a place where an individual has 32 his or her true, fixed and permanent home and principal 33 establishment, to which, whenever absent, he or she intends to 34 return.

35 (e) "Eligible medical expense" means an expense paid by
 36 a taxpayer for medical care described in Section 213(d) of the
 37 Internal Revenue Code.

(f) "Higher deductible" means a deductible of not less 38 39 than One Thousand Dollars (\$1,000.00) but not more than Two Thousand Two Hundred Fifty Dollars (\$2,250.00) for individual 40 health coverage, and not less than Three Thousand Dollars 41 (\$3,000.00) but not more than Four Thousand Five Hundred Dollars 42 43 (\$4,500.00) for health coverage provided to an individual and his 44 or her dependents, in tax year 1994. Beginning after 1998, such deductible limits thereafter shall be adjusted annually in 45 46 fifty-dollar increments for increases in the cost of living, as 47 measured by the medical costs component of the Consumer Price 48 Index.

(g) "Medical savings account" means an account
established to pay eligible medical expense of the account holder
and his or her dependents.

52 (h) "Medical savings account program" means a program 53 that includes all of the following:

54 (i) The purchase by an employer of a qualified
55 higher deductible health plan for the benefit of an employee and
56 his or her dependents or the purchase by a resident individual of
57 a qualified higher deductible health plan for his or her benefit
58 or for the benefit of his or her dependents, or both;

H. B. No. 1213 *HR40/R1767* 05/HR40/R1767 PAGE 2 (RF\BD) 59 (ii) The payment on behalf of an employee into a 60 medical savings account by his or her employer or payment into a 61 medical savings account by a resident individual on his or her 62 behalf of at least sixty-six and two-thirds percent (66-2/3) of 63 the premium reduction realized by the purchase of a qualified 64 higher deductible health plan; and

(iii) An account administrator to administer the 65 66 medical savings account and the reimbursement of eligible medical 67 expenses therefrom.

"Qualified higher deductible health plan" means an 68 (i) 69 accident and health insurance policy, certificate or contract 70 that:

71 (i) Is purchased by an employer for the benefit of an employee or by a resident individual for his or her benefit; 72 73 and

74 (ii) Provides for payment of covered expenses that 75 exceed the higher deductible, but shall not exceed the maximum 76 out-of-pocket expenses of Three Thousand Dollars (\$3,000.00) for individual coverage and Five Thousand Five Hundred Dollars 77 78 (\$5,500.00) for family coverage.

"Resident individual" means an individual who has a 79 (j) 80 domicile in this state.

SECTION 2. This act shall take effect and be in force from 81 and after January 1, 2006. 82