

By: Senator(s) Carmichael

To: Insurance;  
Appropriations

SENATE BILL NO. 2148

1 AN ACT TO AMEND SECTION 25-15-9, MISSISSIPPI CODE OF 1972, TO  
2 REQUIRE COVERAGE FOR HYPERBARIC OXYGEN THERAPY FOR CHILDREN WITH  
3 CEREBRAL PALSY UNDER THE STATE AND SCHOOL EMPLOYEES HEALTH  
4 INSURANCE PLAN; AND FOR RELATED PURPOSES.

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

6 SECTION 1. Section 25-15-9, Mississippi Code of 1972, is  
7 amended as follows:

8 [Through June 30 of the year in which Section 25-11-143  
9 becomes effective as provided in subsection (1) of Section  
10 25-11-143, this section shall read as follows:]

11 25-15-9. (1) (a) The board shall design a plan of health  
12 insurance for state employees which provides benefits for  
13 semiprivate rooms in addition to other incidental coverages which  
14 the board deems necessary. The amount of the coverages shall be  
15 in such reasonable amount as may be determined by the board to be  
16 adequate, after due consideration of current health costs in  
17 Mississippi. The plan shall also include major medical benefits  
18 in such amounts as the board shall determine. The board is also  
19 authorized to accept bids for such alternate coverage and optional  
20 benefits as the board shall deem proper. Any contract for  
21 alternative coverage and optional benefits shall be awarded by the  
22 board after it has carefully studied and evaluated the bids and  
23 selected the best and most cost-effective bid. The board may  
24 reject all such bids; however, the board shall notify all bidders  
25 of the rejection and shall actively solicit new bids if all bids  
26 are rejected. The board may employ or contract for such  
27 consulting or actuarial services as may be necessary to formulate  
28 the plan, and to assist the board in the preparation of

29 specifications and in the process of advertising for the bids for  
30 the plan. Such contracts shall be solicited and entered into in  
31 accordance with Section 25-15-5. The board shall keep a record of  
32 all persons, agents and corporations who contract with or assist  
33 the board in preparing and developing the plan. The board in a  
34 timely manner shall provide copies of this record to the members  
35 of the advisory council created in this section and those  
36 legislators, or their designees, who may attend meetings of the  
37 advisory council. The board shall provide copies of this record  
38 in the solicitation of bids for the administration or servicing of  
39 the self-insured program. Each person, agent or corporation  
40 which, during the previous fiscal year, has assisted in the  
41 development of the plan or employed or compensated any person who  
42 assisted in the development of the plan, and which bids on the  
43 administration or servicing of the plan, shall submit to the board  
44 a statement accompanying the bid explaining in detail its  
45 participation with the development of the plan. This statement  
46 shall include the amount of compensation paid by the bidder to any  
47 such employee during the previous fiscal year. The board shall  
48 make all such information available to the members of the advisory  
49 council and those legislators, or their designees, who may attend  
50 meetings of the advisory council before any action is taken by the  
51 board on the bids submitted. The failure of any bidder to fully  
52 and accurately comply with this paragraph shall result in the  
53 rejection of any bid submitted by that bidder or the cancellation  
54 of any contract executed when the failure is discovered after the  
55 acceptance of that bid. The board is authorized to promulgate  
56 rules and regulations to implement the provisions of this  
57 subsection.

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

61 Any corporation, association, company or individual that  
62 contracts with the board for the third-party claims administration  
63 of the self-insured plan shall prepare and keep on file an  
64 explanation of benefits for each claim processed. The explanation  
65 of benefits shall contain such information relative to each  
66 processed claim which the board deems necessary, and, at a  
67 minimum, each explanation shall provide the claimant's name, claim  
68 number, provider number, provider name, service dates, type of  
69 services, amount of charges, amount allowed to the claimant and  
70 reason codes. The information contained in the explanation of  
71 benefits shall be available for inspection upon request by the  
72 board. The board shall have access to all claims information  
73 utilized in the issuance of payments to employees and providers.

74 (b) There is created an advisory council to advise the  
75 board in the formulation of the State and School Employees Health  
76 Insurance Plan. The council shall be composed of the State  
77 Insurance Commissioner or his designee, an employee-representative  
78 of the institutions of higher learning appointed by the board of  
79 trustees thereof, an employee-representative of the Department of  
80 Transportation appointed by the director thereof, an  
81 employee-representative of the State Tax Commission appointed by  
82 the Commissioner of Revenue, an employee-representative of the  
83 Mississippi Department of Health appointed by the State Health  
84 Officer, an employee-representative of the Mississippi Department  
85 of Corrections appointed by the Commissioner of Corrections, and  
86 an employee-representative of the Department of Human Services  
87 appointed by the Executive Director of Human Services, two (2)  
88 certificated public school administrators appointed by the State  
89 Board of Education, two (2) certificated classroom teachers  
90 appointed by the State Board of Education, a noncertificated  
91 school employee appointed by the State Board of Education and a  
92 community/junior college employee appointed by the State Board for  
93 Community and Junior Colleges.

94           The Lieutenant Governor may designate the Secretary of the  
95 Senate, the Chairman of the Senate Appropriations Committee, the  
96 Chairman of the Senate Education Committee and the Chairman of the  
97 Senate Insurance Committee, and the Speaker of the House of  
98 Representatives may designate the Clerk of the House, the Chairman  
99 of the House Appropriations Committee, the Chairman of the House  
100 Education Committee and the Chairman of the House Insurance  
101 Committee, to attend any meeting of the State and School Employees  
102 Insurance Advisory Council. The appointing authorities may  
103 designate an alternate member from their respective houses to  
104 serve when the regular designee is unable to attend such meetings  
105 of the council. Such designees shall have no jurisdiction or vote  
106 on any matter within the jurisdiction of the council. For  
107 attending meetings of the council, such legislators shall receive  
108 per diem and expenses which shall be paid from the contingent  
109 expense funds of their respective houses in the same amounts as  
110 provided for committee meetings when the Legislature is not in  
111 session; however, no per diem and expenses for attending meetings  
112 of the council will be paid while the Legislature is in session.  
113 No per diem and expenses will be paid except for attending  
114 meetings of the council without prior approval of the proper  
115 committee in their respective houses.

116           (c) No change in the terms of the State and School  
117 Employees Health Insurance Plan may be made effective unless the  
118 board, or its designee, has provided notice to the State and  
119 School Employees Health Insurance Advisory Council and has called  
120 a meeting of the council at least fifteen (15) days before the  
121 effective date of such change. In the event that the State and  
122 School Employees Health Insurance Advisory Council does not meet  
123 to advise the board on the proposed changes, the changes to the  
124 plan shall become effective at such time as the board has informed  
125 the council that the changes shall become effective.

126           (d) **Medical benefits for retired employees and**  
127 **dependents under age sixty-five (65) years and not eligible for**  
128 **Medicare benefits.** The same health insurance coverage as for all  
129 other active employees and their dependents shall be available to  
130 retired employees and all dependents under age sixty-five (65)  
131 years who are not eligible for Medicare benefits, the level of  
132 benefits to be the same level as for all other active  
133 participants. This section will apply to those employees who  
134 retire due to one hundred percent (100%) medical disability as  
135 well as those employees electing early retirement.

136           (e) **Medical benefits for retired employees and**  
137 **dependents over age sixty-five (65) years or otherwise eligible**  
138 **for Medicare benefits.** The health insurance coverage available to  
139 retired employees over age sixty-five (65) years or otherwise  
140 eligible for Medicare benefits, and all dependents over age  
141 sixty-five (65) years or otherwise eligible for Medicare benefits,  
142 shall be the major medical coverage with the lifetime maximum of  
143 One Million Dollars (\$1,000,000.00). Benefits shall be reduced by  
144 Medicare benefits as though such Medicare benefits were the base  
145 plan.

146           All covered individuals shall be assumed to have full  
147 Medicare coverage, Parts A and B; and any Medicare payments under  
148 both Parts A and B shall be computed to reduce benefits payable  
149 under this plan.

150           (2) Nonduplication of benefits--reduction of benefits by  
151 Title XIX benefits: When benefits would be payable under more  
152 than one (1) group plan, benefits under those plans will be  
153 coordinated to the extent that the total benefits under all plans  
154 will not exceed the total expenses incurred.

155           Benefits for hospital or surgical or medical benefits shall  
156 be reduced by any similar benefits payable in accordance with  
157 Title XIX of the Social Security Act or under any amendments  
158 thereto, or any implementing legislation.

159 Benefits for hospital or surgical or medical benefits shall  
160 be reduced by any similar benefits payable by workers'  
161 compensation.

162 (3) Beginning on July 1, 2005, the board shall provide that  
163 the plan include coverage for hyperbaric oxygen therapy for  
164 children with cerebral palsy. The benefit provided in this  
165 subsection shall be subject to the same annual deductibles or  
166 coinsurance established for all other covered benefits within the  
167 plan.

168 (4) (a) Schedule of life insurance benefits--group term:  
169 The amount of term life insurance for each active employee of a  
170 department, agency or institution of the state government shall  
171 not be in excess of One Hundred Thousand Dollars (\$100,000.00), or  
172 twice the amount of the employee's annual wage to the next highest  
173 One Thousand Dollars (\$1,000.00), whichever may be less, but in no  
174 case less than Thirty Thousand Dollars (\$30,000.00), with a like  
175 amount for accidental death and dismemberment on a  
176 twenty-four-hour basis. The plan will further contain a premium  
177 waiver provision if a covered employee becomes totally and  
178 permanently disabled prior to age sixty-five (65) years.  
179 Employees retiring after June 30, 1999, shall be eligible to  
180 continue life insurance coverage in an amount of Five Thousand  
181 Dollars (\$5,000.00), Ten Thousand Dollars (\$10,000.00) or Twenty  
182 Thousand Dollars (\$20,000.00) into retirement.

183 (b) Effective October 1, 1999, schedule of life  
184 insurance benefits--group term: The amount of term life insurance  
185 for each active employee of any school district, community/junior  
186 college, public library or university-based program authorized  
187 under Section 37-23-31 for deaf, aphasic and emotionally disturbed  
188 children or any regular nonstudent bus driver shall not be in  
189 excess of One Hundred Thousand Dollars (\$100,000.00), or twice the  
190 amount of the employee's annual wage to the next highest One  
191 Thousand Dollars (\$1,000.00), whichever may be less, but in no

192 case less than Thirty Thousand Dollars (\$30,000.00), with a like  
193 amount for accidental death and dismemberment on a  
194 twenty-four-hour basis. The plan will further contain a premium  
195 waiver provision if a covered employee of any school district,  
196 community/junior college, public library or university-based  
197 program authorized under Section 37-23-31 for deaf, aphasic and  
198 emotionally disturbed children or any regular nonstudent bus  
199 driver becomes totally and permanently disabled prior to age  
200 sixty-five (65) years. Employees of any school district,  
201 community/junior college, public library or university-based  
202 program authorized under Section 37-23-31 for deaf, aphasic and  
203 emotionally disturbed children or any regular nonstudent bus  
204 driver retiring after September 30, 1999, shall be eligible to  
205 continue life insurance coverage in an amount of Five Thousand  
206 Dollars (\$5,000.00), Ten Thousand Dollars (\$10,000.00) or Twenty  
207 Thousand Dollars (\$20,000.00) into retirement.

208       (5) Any eligible employee who on March 1, 1971, was  
209 participating in a group life insurance program which has  
210 provisions different from those included herein and for which the  
211 State of Mississippi was paying a part of the premium may, at his  
212 discretion, continue to participate in such plan. Such employee  
213 shall pay in full all additional costs, if any, above the minimum  
214 program established by this article. Under no circumstances shall  
215 any individual who begins employment with the state after March 1,  
216 1971, be eligible for the provisions of this paragraph.

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

219       (7) Any premium differentials, differences in coverages,  
220 discounts determined by risk or by any other factors shall be  
221 uniformly applied to all active employees participating in the  
222 insurance plan. It is the intent of the Legislature that the  
223 state contribution to the plan be the same for each employee  
224 throughout the state.

225           (8) On October 1, 1999, any school district,  
226 community/junior college district or public library may elect to  
227 remain with an existing policy or policies of group life insurance  
228 with an insurance company approved by the State and School  
229 Employees Health Insurance Management Board, in lieu of  
230 participation in the State and School Life Insurance Plan. On or  
231 after July 1, 2004, until October 1, 2004, any school district,  
232 community/junior college district or public library may elect to  
233 choose a policy or policies of group life insurance existing on  
234 October 1, 1999, with an insurance company approved by the State  
235 and School Employees Health Insurance Management Board in lieu of  
236 participation in the State and School Life Insurance Plan. The  
237 state's contribution of up to fifty percent (50%) of the active  
238 employee's premium under the State and School Life Insurance Plan  
239 may be applied toward the cost of coverage for full-time employees  
240 participating in the approved life insurance company group plan.  
241 For purposes of this subsection (8), "life insurance company group  
242 plan" means a plan administered or sold by a private insurance  
243 company. After October 1, 1999, the board may assess charges in  
244 addition to the existing State and School Life Insurance Plan  
245 rates to such employees as a condition of enrollment in the State  
246 and School Life Insurance Plan. In order for any life insurance  
247 company group plan to be approved by the State and School  
248 Employees Health Insurance Management Board under this subsection  
249 (8), it shall meet the following criteria:

250           (a) The insurance company offering the group life  
251 insurance plan shall be rated "A-" or better by A.M. Best state  
252 insurance rating service and be licensed as an admitted carrier in  
253 the State of Mississippi by the Mississippi Department of  
254 Insurance.

255           (b) The insurance company group life insurance plan  
256 shall provide the same life insurance, accidental death and

257 dismemberment insurance and waiver of premium benefits as provided  
258 in the State and School Life Insurance Plan.

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

262 (d) The insurance company group life insurance plan  
263 shall have one (1) composite rate per One Thousand Dollars  
264 (\$1,000.00) of coverage for active employees regardless of age and  
265 one (1) composite rate per One Thousand Dollars (\$1,000.00) of  
266 coverage for all retirees regardless of age or type of retiree.

267 (e) The insurance company and its group life insurance  
268 plan shall comply with any administrative requirements of the  
269 State and School Employees Health Insurance Management Board. In  
270 the event any insurance company providing group life insurance  
271 benefits to employees under this subsection (8) fails to comply  
272 with any requirements specified herein or any administrative  
273 requirements of the board, the state shall discontinue providing  
274 funding for the cost of such insurance.

275 **[From and after July 1 of the year in which Section 25-11-143**  
276 **becomes effective as provided in subsection (1) of Section**  
277 **25-11-143, this section shall read as follows:]**

278 25-15-9. (1) (a) The board shall design a plan of health  
279 insurance for state employees that provides benefits for  
280 semiprivate rooms in addition to other incidental coverages that  
281 the board deems necessary. The amount of the coverages shall be  
282 in such reasonable amount as may be determined by the board to be  
283 adequate, after due consideration of current health costs in  
284 Mississippi. The plan shall also include major medical benefits  
285 in such amounts as the board shall determine. The board is also  
286 authorized to accept bids for such alternate coverage and optional  
287 benefits as the board deems proper. Any contract for alternative  
288 coverage and optional benefits shall be awarded by the board after  
289 it has carefully studied and evaluated the bids and selected the

290 best and most cost-effective bid. The board may reject all such  
291 bids; however, the board shall notify all bidders of the rejection  
292 and shall actively solicit new bids if all bids are rejected. The  
293 board may employ or contract for such consulting or actuarial  
294 services as may be necessary to formulate the plan, and to assist  
295 the board in the preparation of specifications and in the process  
296 of advertising for the bids for the plan. Those contracts shall  
297 be solicited and entered into in accordance with Section 25-15-5.  
298 The board shall keep a record of all persons, agents and  
299 corporations who contract with or assist the board in preparing  
300 and developing the plan. The board in a timely manner shall  
301 provide copies of this record to the members of the advisory  
302 council created in this section and those legislators, or their  
303 designees, who may attend meetings of the advisory council. The  
304 board shall provide copies of this record in the solicitation of  
305 bids for the administration or servicing of the self-insured  
306 program. Each person, agent or corporation that, during the  
307 previous fiscal year, has assisted in the development of the plan  
308 or employed or compensated any person who assisted in the  
309 development of the plan, and that bids on the administration or  
310 servicing of the plan, shall submit to the board a statement  
311 accompanying the bid explaining in detail its participation with  
312 the development of the plan. This statement shall include the  
313 amount of compensation paid by the bidder to any such employee  
314 during the previous fiscal year. The board shall make all such  
315 information available to the members of the advisory council and  
316 those legislators, or their designees, who may attend meetings of  
317 the advisory council before any action is taken by the board on  
318 the bids submitted. The failure of any bidder to fully and  
319 accurately comply with this paragraph shall result in the  
320 rejection of any bid submitted by that bidder or the cancellation  
321 of any contract executed when the failure is discovered after the  
322 acceptance of that bid. The board is authorized to promulgate

323 rules and regulations to implement the provisions of this  
324 subsection.

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

328         Any corporation, association, company or individual that  
329 contracts with the board for the third-party claims administration  
330 of the self-insured plan shall prepare and keep on file an  
331 explanation of benefits for each claim processed. The explanation  
332 of benefits shall contain such information relative to each  
333 processed claim which the board deems necessary, and, at a  
334 minimum, each explanation shall provide the claimant's name, claim  
335 number, provider number, provider name, service dates, type of  
336 services, amount of charges, amount allowed to the claimant and  
337 reason codes. The information contained in the explanation of  
338 benefits shall be available for inspection upon request by the  
339 board. The board shall have access to all claims information  
340 utilized in the issuance of payments to employees and providers.

341         (b) There is created an advisory council to advise the  
342 board in the formulation of the State and School Employees Health  
343 Insurance Plan. The council shall be composed of the State  
344 Insurance Commissioner or his designee, an employee-representative  
345 of the state institutions of higher learning appointed by the  
346 board of trustees thereof, an employee-representative of the  
347 Mississippi Department of Transportation appointed by the director  
348 thereof, an employee-representative of the State Tax Commission  
349 appointed by the Commissioner of Revenue, an  
350 employee-representative of the State Department of Health  
351 appointed by the State Health Officer, an employee-representative  
352 of the Mississippi Department of Corrections appointed by the  
353 Commissioner of Corrections, and an employee-representative of the  
354 Mississippi Department of Human Services appointed by the  
355 Executive Director of Human Services, two (2) certificated public

356 school administrators appointed by the State Board of Education,  
357 two (2) certificated classroom teachers appointed by the State  
358 Board of Education, a noncertificated school employee appointed by  
359 the State Board of Education and a community/junior college  
360 employee appointed by the State Board for Community and Junior  
361 Colleges.

362         The Lieutenant Governor may designate the Secretary of the  
363 Senate, the Chairman of the Senate Appropriations Committee, the  
364 Chairman of the Senate Education Committee and the Chairman of the  
365 Senate Insurance Committee, and the Speaker of the House of  
366 Representatives may designate the Clerk of the House, the Chairman  
367 of the House Appropriations Committee, the Chairman of the House  
368 Education Committee and the Chairman of the House Insurance  
369 Committee, to attend any meeting of the State and School Employees  
370 Insurance Advisory Council. The appointing authorities may  
371 designate an alternate member from their respective houses to  
372 serve when the regular designee is unable to attend such meetings  
373 of the council. Those designees shall have no jurisdiction or  
374 vote on any matter within the jurisdiction of the council. For  
375 attending meetings of the council, those legislators shall receive  
376 per diem and expenses, which shall be paid from the contingent  
377 expense funds of their respective houses in the same amounts as  
378 provided for committee meetings when the Legislature is not in  
379 session; however, no per diem and expenses for attending meetings  
380 of the council will be paid while the Legislature is in session.  
381 No per diem and expenses will be paid except for attending  
382 meetings of the council without prior approval of the proper  
383 committee in their respective houses.

384         (c) No change in the terms of the State and School  
385 Employees Health Insurance Plan may be made effective unless the  
386 board, or its designee, has provided notice to the State and  
387 School Employees Health Insurance Advisory Council and has called  
388 a meeting of the council at least fifteen (15) days before the

389 effective date of the change. If the State and School Employees  
390 Health Insurance Advisory Council does not meet to advise the  
391 board on the proposed changes, the changes to the plan will become  
392 effective at such time as the board has informed the council that  
393 the changes will become effective.

394 (2) Nonduplication of benefits--reduction of benefits by  
395 Title XIX benefits: When benefits would be payable under more  
396 than one (1) group plan, benefits under those plans will be  
397 coordinated to the extent that the total benefits under all plans  
398 will not exceed the total expenses incurred.

399 Benefits for hospital or surgical or medical benefits shall  
400 be reduced by any similar benefits payable in accordance with  
401 Title XIX of the Social Security Act or under any amendments  
402 thereto, or any implementing legislation.

403 Benefits for hospital or surgical or medical benefits shall  
404 be reduced by any similar benefits payable by workers'  
405 compensation.

406 (3) Beginning on July 1, 2005, the board shall provide that  
407 the plan include coverage for hyperbaric oxygen therapy for  
408 children with cerebral palsy. The benefit provided in this  
409 subsection shall be subject to the same annual deductibles or  
410 coinsurance established for all other covered benefits within the  
411 plan.

412 (4) (a) Schedule of life insurance benefits--group term:  
413 The amount of term life insurance for each active employee of a  
414 department, agency or institution of the state government shall  
415 not be in excess of One Hundred Thousand Dollars (\$100,000.00), or  
416 twice the amount of the employee's annual wage to the next highest  
417 One Thousand Dollars (\$1,000.00), whichever may be less, but in no  
418 case less than Thirty Thousand Dollars (\$30,000.00), with a like  
419 amount for accidental death and dismemberment on a  
420 twenty-four-hour basis.

421           (b) Effective October 1, 1999, schedule of life  
422 insurance benefits--group term: The amount of term life insurance  
423 for each active employee of any school district, community/junior  
424 college, public library, university-based program authorized under  
425 Section 37-23-31 for deaf, aphasic and emotionally disturbed  
426 children, or any regular nonstudent bus driver shall not be in  
427 excess of One Hundred Thousand Dollars (\$100,000.00), or twice the  
428 amount of the employee's annual wage to the next highest One  
429 Thousand Dollars (\$1,000.00), whichever may be less, but in no  
430 case less than Thirty Thousand Dollars (\$30,000.00), with a like  
431 amount for accidental death and dismemberment on a  
432 twenty-four-hour basis. The plan will further contain a premium  
433 waiver provision if a covered employee of any school district,  
434 community/junior college, public library, university-based program  
435 authorized under Section 37-23-31 for deaf, aphasic and  
436 emotionally disturbed children, or any regular nonstudent bus  
437 driver becomes totally and permanently disabled before age  
438 sixty-five (65) years.

439           (5) Any eligible employee who on March 1, 1971, was  
440 participating in a group life insurance program that has  
441 provisions different from those included in this section and for  
442 which the State of Mississippi was paying a part of the premium  
443 may, at his discretion, continue to participate in that plan. The  
444 employee shall pay in full all additional costs, if any, above the  
445 minimum program established by this article. Under no  
446 circumstances shall any individual who begins employment with the  
447 state after March 1, 1971, be eligible for the provisions of this  
448 paragraph.

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

451           (7) Any premium differentials, differences in coverages,  
452 discounts determined by risk or by any other factors shall be  
453 uniformly applied to all active employees participating in the

454 insurance plan. It is the intent of the Legislature that the  
455 state contribution to the plan be the same for each employee  
456 throughout the state.

457 (8) On October 1, 1999, any school district,  
458 community/junior college district or public library may elect to  
459 remain with an existing policy or policies of group life insurance  
460 with an insurance company approved by the State and School  
461 Employees Health Insurance Management Board, in lieu of  
462 participation in the State and School Life Insurance Plan. On or  
463 after July 1, 2004, until October 1, 2004, any school district,  
464 community/junior college district or public library may elect to  
465 choose a policy or policies of group life insurance existing on  
466 October 1, 1999, with an insurance company approved by the State  
467 and School Employees Health Insurance Management Board in lieu of  
468 participation in the State and School Life Insurance Plan. The  
469 state's contribution of up to fifty percent (50%) of the active  
470 employee's premium under the State and School Life Insurance Plan  
471 may be applied toward the cost of coverage for full-time employees  
472 participating in the approved life insurance company group plan.  
473 For purposes of this subsection (8), "life insurance company group  
474 plan" means a plan administered or sold by a private insurance  
475 company. After October 1, 1999, the board may assess charges in  
476 addition to the existing State and School Life Insurance Plan  
477 rates to those employees as a condition of enrollment in the State  
478 and School Life Insurance Plan. In order for any life insurance  
479 company group plan to be approved by the State and School  
480 Employees Health Insurance Management Board under this subsection  
481 (8), it shall meet the following criteria:

482 (a) The insurance company offering the group life  
483 insurance plan shall be rated "A-" or better by A.M. Best state  
484 insurance rating service and be licensed as an admitted carrier in  
485 the State of Mississippi by the Mississippi Department of  
486 Insurance.

487           (b) The insurance company group life insurance plan  
488 shall provide the same life insurance, accidental death and  
489 dismemberment insurance and waiver of premium benefits as provided  
490 in the State and School Life Insurance Plan.

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

494           (d) The insurance company group life insurance plan  
495 shall have one (1) composite rate per One Thousand Dollars  
496 (\$1,000.00) of coverage for active employees regardless of age.

497           (e) The insurance company and its group life insurance  
498 plan shall comply with any administrative requirements of the  
499 State and School Employees Health Insurance Management Board. If  
500 any insurance company providing group life insurance benefits to  
501 employees under this subsection (8) fails to comply with any  
502 requirements specified in this subsection or any administrative  
503 requirements of the board, the state shall discontinue providing  
504 funding for the cost of that insurance.

505           **SECTION 2.** This act shall take effect and be in force from  
506 and after July 1, 2005.