Senate Amendments to House Bill No. 191

TO THE CLERK OF THE HOUSE:

THIS IS TO INFORM YOU THAT THE SENATE HAS ADOPTED THE AMENDMENTS SET OUT BELOW:

AMENDMENT NO. 1

Amend by striking all after the enacting clause and inserting in lieu thereof the following:

SECTION 1. From and after January 1, 2006, any state agency, 21 22 university, school district, community/junior college district, 23 public library, or university-based program authorized under 24 Section 37-23-31 for deaf, aphasic and emotionally disturbed children shall contract for a policy or policies of group term 25 26 life insurance with an insurance company licensed by the 27 Department of Insurance. The state shall contribute fifty percent (50%) of the active employee's premium for such group term life 28 29 insurance, but in no event shall the state's contribution per 30 employee exceed Twelve Cents (12¢) per One Thousand Dollars 31 (\$1,000.00) in benefits or Twelve Dollars (\$12.00) per month, 32 whichever is less.

33 SECTION 2. Section 25-15-9, Mississippi Code of 1972, is
 34 amended as follows:

35 [Through June 30 of the year in which Section 25-11-143
36 becomes effective as provided in subsection (1) of Section
37 25-11-143, this section shall read as follows:]

38 25 - 15 - 9. (1) (a) The board shall design a plan of health insurance for state employees which provides benefits for 39 40 semiprivate rooms in addition to other incidental coverages which the board deems necessary. The amount of the coverages shall be 41 in such reasonable amount as may be determined by the board to be 42 adequate, after due consideration of current health costs in 43 44 The plan shall also include major medical benefits Mississippi. in such amounts as the board shall determine. The board is also 45 46 authorized to accept bids for such alternate coverage and optional

47 benefits as the board shall deem proper. Any contract for 48 alternative coverage and optional benefits shall be awarded by the board after it has carefully studied and evaluated the bids and 49 50 selected the best and most cost-effective bid. The board may reject all such bids; however, the board shall notify all bidders 51 52 of the rejection and shall actively solicit new bids if all bids 53 are rejected. The board may employ or contract for such 54 consulting or actuarial services as may be necessary to formulate the plan, and to assist the board in the preparation of 55 specifications and in the process of advertising for the bids for 56 57 the plan. Such contracts shall be solicited and entered into in accordance with Section 25-15-5. The board shall keep a record of 58 59 all persons, agents and corporations who contract with or assist the board in preparing and developing the plan. The board in a 60 61 timely manner shall provide copies of this record to the members 62 of the advisory council created in this section and those legislators, or their designees, who may attend meetings of the 63 64 advisory council. The board shall provide copies of this record 65 in the solicitation of bids for the administration or servicing of 66 the self-insured program. Each person, agent or corporation 67 which, during the previous fiscal year, has assisted in the 68 development of the plan or employed or compensated any person who 69 assisted in the development of the plan, and which bids on the 70 administration or servicing of the plan, shall submit to the board 71 a statement accompanying the bid explaining in detail its participation with the development of the plan. This statement 72 shall include the amount of compensation paid by the bidder to any 73 74 such employee during the previous fiscal year. The board shall 75 make all such information available to the members of the advisory 76 council and those legislators, or their designees, who may attend meetings of the advisory council before any action is taken by the 77 78 board on the bids submitted. The failure of any bidder to fully 79 and accurately comply with this paragraph shall result in the rejection of any bid submitted by that bidder or the cancellation 80 81 of any contract executed when the failure is discovered after the

82 acceptance of that bid. The board is authorized to promulgate 83 rules and regulations to implement the provisions of this 84 subsection.

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

Any corporation, association, company or individual that 88 89 contracts with the board for the third-party claims administration 90 of the self-insured plan shall prepare and keep on file an explanation of benefits for each claim processed. 91 The explanation 92 of benefits shall contain such information relative to each 93 processed claim which the board deems necessary, and, at a 94 minimum, each explanation shall provide the claimant's name, claim number, provider number, provider name, service dates, type of 95 96 services, amount of charges, amount allowed to the claimant and 97 reason codes. The information contained in the explanation of benefits shall be available for inspection upon request by the 98 99 The board shall have access to all claims information board. 100 utilized in the issuance of payments to employees and providers.

101 (b) There is created an advisory council to advise the 102 board in the formulation of the State and School Employees Health 103 Insurance Plan. The council shall be composed of the State 104 Insurance Commissioner or his designee, an employee-representative 105 of the institutions of higher learning appointed by the board of 106 trustees thereof, an employee-representative of the Department of Transportation appointed by the director thereof, an 107 employee-representative of the State Tax Commission appointed by 108 109 the Commissioner of Revenue, an employee-representative of the 110 Mississippi Department of Health appointed by the State Health 111 Officer, an employee-representative of the Mississippi Department of Corrections appointed by the Commissioner of Corrections, and 112 113 an employee-representative of the Department of Human Services appointed by the Executive Director of Human Services, two (2) 114 certificated public school administrators appointed by the State 115 Board of Education, two (2) certificated classroom teachers 116

117 appointed by the State Board of Education, a noncertificated 118 school employee appointed by the State Board of Education and a 119 community/junior college employee appointed by the State Board for 120 Community and Junior Colleges.

The Lieutenant Governor may designate the Secretary of the 121 122 Senate, the Chairman of the Senate Appropriations Committee, the Chairman of the Senate Education Committee and the Chairman of the 123 124 Senate Insurance Committee, and the Speaker of the House of 125 Representatives may designate the Clerk of the House, the Chairman of the House Appropriations Committee, the Chairman of the House 126 127 Education Committee and the Chairman of the House Insurance Committee, to attend any meeting of the State and School Employees 128 129 Insurance Advisory Council. The appointing authorities may designate an alternate member from their respective houses to 130 131 serve when the regular designee is unable to attend such meetings 132 of the council. Such designees shall have no jurisdiction or vote on any matter within the jurisdiction of the council. For 133 134 attending meetings of the council, such legislators shall receive 135 per diem and expenses which shall be paid from the contingent 136 expense funds of their respective houses in the same amounts as provided for committee meetings when the Legislature is not in 137 138 session; however, no per diem and expenses for attending meetings 139 of the council will be paid while the Legislature is in session. 140 No per diem and expenses will be paid except for attending 141 meetings of the council without prior approval of the proper committee in their respective houses. 142

(c) No change in the terms of the State and School 143 Employees Health Insurance Plan may be made effective unless the 144 145 board, or its designee, has provided notice to the State and 146 School Employees Health Insurance Advisory Council and has called a meeting of the council at least fifteen (15) days before the 147 148 effective date of such change. In the event that the State and School Employees Health Insurance Advisory Council does not meet 149 150 to advise the board on the proposed changes, the changes to the

151 plan shall become effective at such time as the board has informed 152 the council that the changes shall become effective.

153 Medical benefits for retired employees and (d) 154 dependents under age sixty-five (65) years and not eligible for Medicare benefits. For employees who retire before January 1, 155 156 2006, the same health insurance coverage as for all other active 157 employees and their dependents shall be available to retired 158 employees and all dependents under age sixty-five (65) years who 159 are not eligible for Medicare benefits, the level of benefits to 160 be the same level as for all other active participants. For 161 employees who retire on or after January 1, 2006, the same health insurance coverage as for all other active employees and their 162 dependents shall be available to such retiring employees and all 163 164 dependents under age sixty-five (65) years who are not eligible 165 for Medicare benefits only if the retiring employees were 166 participants in the State and School Employees Health Insurance Plan for four (4) years or more before their retirement, the level 167 of benefits to be the same level as for all other active 168 169 participants. This section will apply to those employees who retire due to one hundred percent (100%) medical disability as 170 171 well as those employees electing early retirement.

Medical benefits for retired employees and 172 (e) 173 dependents over age sixty-five (65) years or otherwise eligible 174 for Medicare benefits. For employees who retire before January 1, 175 2006, the health insurance coverage available to retired employees over age sixty-five (65) years or otherwise eligible for Medicare 176 177 benefits, and all dependents over age sixty-five (65) years or otherwise eligible for Medicare benefits, shall be the major 178 medical coverage with the lifetime maximum of One Million Dollars 179 180 (\$1,000,000.00). For employees retiring on or after January 1, 2006, the health insurance coverage described herein shall be 181 182 available to such retiring employees only if they were participants in the State and School Employees Health Insurance 183 184 Plan for four (4) years or more and are over age sixty-five (65) years or otherwise eligible for Medicare benefits, and to all 185

186 dependents over age sixty-five (65) years or otherwise eligible

187 <u>for Medicare benefits.</u> Benefits shall be reduced by Medicare188 benefits as though such Medicare benefits were the base plan.

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

193 (2) Nonduplication of benefits--reduction of benefits by 194 Title XIX benefits: When benefits would be payable under more 195 than one (1) group plan, benefits under those plans will be 196 coordinated to the extent that the total benefits under all plans 197 will not exceed the total expenses incurred.

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

202 Benefits for hospital or surgical or medical benefits shall 203 be reduced by any similar benefits payable by workers' 204 compensation.

205 * *

206 <u>(3)</u> The board may offer medical savings accounts as defined 207 in Section 71-9-3 as a plan option.

208 (4) Any premium differentials, differences in coverages, 209 discounts determined by risk or by any other factors shall be 210 uniformly applied to all active employees participating in the 211 insurance plan. It is the intent of the Legislature that the 212 state contribution to the plan be the same for each employee 213 throughout the state.

214 * * *

215 [From and after July 1 of the year in which Section 25-11-143
216 becomes effective as provided in subsection (1) of Section
217 25-11-143, this section shall read as follows:]

218 25-15-9. (1) (a) The board shall design a plan of health 219 insurance for state employees that provides benefits for 220 semiprivate rooms in addition to other incidental coverages that ^H P 191 221 the board deems necessary. The amount of the coverages shall be 222 in such reasonable amount as may be determined by the board to be adequate, after due consideration of current health costs in 223 224 Mississippi. The plan shall also include major medical benefits 225 in such amounts as the board shall determine. The board is also 226 authorized to accept bids for such alternate coverage and optional 227 benefits as the board deems proper. Any contract for alternative 228 coverage and optional benefits shall be awarded by the board after 229 it has carefully studied and evaluated the bids and selected the 230 best and most cost-effective bid. The board may reject all such 231 bids; however, the board shall notify all bidders of the rejection and shall actively solicit new bids if all bids are rejected. 232 The board may employ or contract for such consulting or actuarial 233 234 services as may be necessary to formulate the plan, and to assist 235 the board in the preparation of specifications and in the process 236 of advertising for the bids for the plan. Those contracts shall be solicited and entered into in accordance with Section 25-15-5. 237 238 The board shall keep a record of all persons, agents and 239 corporations who contract with or assist the board in preparing 240 and developing the plan. The board in a timely manner shall 241 provide copies of this record to the members of the advisory 242 council created in this section and those legislators, or their 243 designees, who may attend meetings of the advisory council. The 244 board shall provide copies of this record in the solicitation of 245 bids for the administration or servicing of the self-insured Each person, agent or corporation that, during the 246 program. 247 previous fiscal year, has assisted in the development of the plan or employed or compensated any person who assisted in the 248 249 development of the plan, and that bids on the administration or 250 servicing of the plan, shall submit to the board a statement accompanying the bid explaining in detail its participation with 251 252 the development of the plan. This statement shall include the amount of compensation paid by the bidder to any such employee 253 254 during the previous fiscal year. The board shall make all such 255 information available to the members of the advisory council and

256 those legislators, or their designees, who may attend meetings of 257 the advisory council before any action is taken by the board on 258 the bids submitted. The failure of any bidder to fully and 259 accurately comply with this paragraph shall result in the rejection of any bid submitted by that bidder or the cancellation 260 of any contract executed when the failure is discovered after the 261 262 acceptance of that bid. The board is authorized to promulgate 263 rules and regulations to implement the provisions of this 264 subsection.

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

268 Any corporation, association, company or individual that 269 contracts with the board for the third-party claims administration 270 of the self-insured plan shall prepare and keep on file an 271 explanation of benefits for each claim processed. The explanation of benefits shall contain such information relative to each 272 273 processed claim which the board deems necessary, and, at a 274 minimum, each explanation shall provide the claimant's name, claim 275 number, provider number, provider name, service dates, type of 276 services, amount of charges, amount allowed to the claimant and 277 reason codes. The information contained in the explanation of 278 benefits shall be available for inspection upon request by the 279 board. The board shall have access to all claims information 280 utilized in the issuance of payments to employees and providers.

281 There is created an advisory council to advise the (b) 282 board in the formulation of the State and School Employees Health 283 The council shall be composed of the State Insurance Plan. 284 Insurance Commissioner or his designee, an employee-representative 285 of the state institutions of higher learning appointed by the board of trustees thereof, an employee-representative of the 286 287 Mississippi Department of Transportation appointed by the director thereof, an employee-representative of the State Tax Commission 288 289 appointed by the Commissioner of Revenue, an

290 employee-representative of the State Department of Health

291 appointed by the State Health Officer, an employee-representative 292 of the Mississippi Department of Corrections appointed by the Commissioner of Corrections, and an employee-representative of the 293 294 Mississippi Department of Human Services appointed by the Executive Director of Human Services, two (2) certificated public 295 296 school administrators appointed by the State Board of Education, 297 two (2) certificated classroom teachers appointed by the State 298 Board of Education, a noncertificated school employee appointed by 299 the State Board of Education and a community/junior college 300 employee appointed by the State Board for Community and Junior 301 Colleges.

302 The Lieutenant Governor may designate the Secretary of the 303 Senate, the Chairman of the Senate Appropriations Committee, the 304 Chairman of the Senate Education Committee and the Chairman of the 305 Senate Insurance Committee, and the Speaker of the House of 306 Representatives may designate the Clerk of the House, the Chairman of the House Appropriations Committee, the Chairman of the House 307 308 Education Committee and the Chairman of the House Insurance Committee, to attend any meeting of the State and School Employees 309 310 Insurance Advisory Council. The appointing authorities may 311 designate an alternate member from their respective houses to 312 serve when the regular designee is unable to attend such meetings 313 of the council. Those designees shall have no jurisdiction or 314 vote on any matter within the jurisdiction of the council. For 315 attending meetings of the council, those legislators shall receive per diem and expenses, which shall be paid from the contingent 316 317 expense funds of their respective houses in the same amounts as provided for committee meetings when the Legislature is not in 318 319 session; however, no per diem and expenses for attending meetings 320 of the council will be paid while the Legislature is in session. No per diem and expenses will be paid except for attending 321 322 meetings of the council without prior approval of the proper committee in their respective houses. 323

324 (c) No change in the terms of the State and School
 325 Employees Health Insurance Plan may be made effective unless the

326 board, or its designee, has provided notice to the State and 327 School Employees Health Insurance Advisory Council and has called a meeting of the council at least fifteen (15) days before the 328 329 effective date of the change. If the State and School Employees 330 Health Insurance Advisory Council does not meet to advise the 331 board on the proposed changes, the changes to the plan will become effective at such time as the board has informed the council that 332 333 the changes will become effective.

334 (2) Nonduplication of benefits--reduction of benefits by
335 Title XIX benefits: When benefits would be payable under more
336 than one (1) group plan, benefits under those plans will be
337 coordinated to the extent that the total benefits under all plans
338 will not exceed the total expenses incurred.

339 Benefits for hospital or surgical or medical benefits shall 340 be reduced by any similar benefits payable in accordance with 341 Title XIX of the Social Security Act or under any amendments 342 thereto, or any implementing legislation.

343 Benefits for hospital or surgical or medical benefits shall 344 be reduced by any similar benefits payable by workers' 345 compensation.

346 ***

347 <u>(3)</u> The board may offer medical savings accounts as defined 348 in Section 71-9-3 as a plan option.

349 (4) Any premium differentials, differences in coverages, 350 discounts determined by risk or by any other factors shall be 351 uniformly applied to all active employees participating in the 352 insurance plan. It is the intent of the Legislature that the 353 state contribution to the plan be the same for each employee 354 throughout the state.

355 * * *

356 **SECTION 3.** Section 25-15-15, Mississippi Code of 1972, is 357 amended as follows:

358 [Through June 30 of the year in which Section 25-11-143 359 becomes effective as provided in subsection (1) of Section 360 25-11-143, this section shall read as follows:]

25-15-15. (1) The board is authorized to determine the 361 362 manner in which premiums and contributions by the state agencies, 363 local school districts, colleges, universities, community/junior 364 colleges and public libraries shall be collected to provide the 365 self-insured health insurance program for employees as provided 366 under this article. The state shall provide fifty percent (50%) 367 of the cost of the above life insurance plan and one hundred 368 percent (100%) of the cost of a basic level of health 369 insurance * * * for all active full-time employees. The employees 370 may pay additional amounts to purchase additional benefits or levels of coverage offered under the plan. The employees shall be 371 given the opportunity to purchase coverage for their eligible 372 dependents with the premiums for such dependent coverage, as well 373 374 as the employee's fifty percent (50%) share for his life insurance 375 coverage and additional premium amounts for his health insurance 376 coverage, to be deductible from the employee's salary by the 377 agency, department or institution head, which deductions, together with the fifty percent (50%) share of such life insurance premiums 378 379 of such employing agency, department or institution head from 380 funds appropriated to or authorized to be expended by such employing agency, department or institution head, shall be 381 deposited directly into a depository bank or special fund in the 382 383 State Treasury, as determined by the board. These funds and 384 interest earned on these funds may be used for the disbursement of 385 claims and shall be exempt from the appropriation process.

386 (2) The state shall provide annually, by line item in the 387 Mississippi Library Commission appropriation bill, such funds to pay one hundred percent (100%) of the cost of a basic level of 388 health insurance under the State and School Employees Health 389 390 Insurance Plan for all full-time library staff members in each public library in Mississippi. The employees may pay additional 391 amounts to purchase additional benefits or levels of coverage 392 offered under the plan. The commission shall allot to each public 393 394 library a sufficient amount of those funds appropriated to pay the 395 costs of insurance for eligible employees. Any funds so

appropriated by line item which are not expended during the fiscal 396 397 year for which such funds were appropriated shall be carried forward for the same purposes during the next succeeding fiscal 398 399 year. If any premiums for the health insurance and/or late 400 charges and interest penalties are not paid by a public library in 401 a timely manner, as defined by the board, the Mississippi Library Commission, upon notice by the board, shall immediately withhold 402 all subsequent disbursements of funds to that public library. 403

404 (3) The state shall annually provide one hundred percent 405 (100%) of the cost of a basic level of health insurance * * * for 406 all public school district employees who work no less than twenty 407 (20) hours during each week and regular nonstudent school bus 408 drivers. The employees may pay additional amounts to purchase 409 additional benefits or levels of coverage offered under the plan. 410 Where federal funding is allowable to defray, in full or in part, 411 the cost of participation in the program by district employees who 412 work no less than twenty (20) hours during the week and regular 413 nonstudent bus drivers, whose salaries are paid, in full or in 414 part, by federal funds, the allowance under this section shall be reduced to the extent of such federal funding. Where the use of 415 federal funds is allowable but not available, it is the intent of 416 the Legislature that school districts contribute the cost of 417 418 participation for such employees from local funds, except that 419 parent fees for child nutrition programs shall not be increased to 420 cover such cost.

421 (4) The state shall provide annually, by line item in the 422 community/junior college appropriation bill, such funds to pay one hundred percent (100%) of the cost of a basic level of health 423 insurance * * * for all community/junior college district 424 425 employees who work no less than twenty (20) hours during each 426 The employees may pay additional amounts to purchase week. additional benefits or levels of coverage offered under the plan. 427 428 (5) When the use of federal funding is allowable to defray, 429 in full or in part, the cost of participation in the insurance plan by community/junior college district employees who work no 430

431 less than twenty (20) hours during each week, whose salaries are 432 paid, in full or in part, by federal funds, the allowance under 433 this section shall be reduced to the extent of the federal 434 funding. Where the use of federal funds is allowable but not 435 available, it is the intent of the Legislature that 436 community/junior college districts contribute the cost of 437 participation for such employees from local funds.

438 (6) Any community/junior college district may contribute to 439 the cost of coverage for any district employee from local 440 community/junior college district funds, and any public school 441 district may contribute to the cost of coverage for any district 442 employee from nonminimum program funds. Any part of the cost of 443 such coverage for participating employees of public school 444 districts and public community/junior college districts that is 445 not paid by the state shall be paid by the participating 446 employees, which shall be deducted from the salaries of the 447 employees in a manner determined by the board.

448 (7) Any funds appropriated for the cost of insurance by line 449 item in the community/junior colleges appropriation bill which are 450 not expended during the fiscal year for which such funds were 451 appropriated shall be carried forward for the same purposes during 452 the next succeeding fiscal year.

453 (8) The board may establish and enforce late charges and 454 interest penalties or other penalties for the purpose of requiring 455 the prompt payment of all premiums for life and health insurance permitted under Chapter 15 of Title 25. All funds in excess of 456 457 the amount needed for disbursement of claims shall be deposited in 458 a special fund in the State Treasury to be known as the State and 459 School Employees Insurance Fund. The State Treasurer shall invest 460 all funds in the State and School Employees Insurance Fund and all 461 interest earned shall be credited to the State and School 462 Employees Insurance Fund. Such funds shall be placed with one or more depositories of the state and invested on the first day such 463 464 funds are available for investment in certificates of deposit, 465 repurchase agreements or in United States Treasury bills or as

466 otherwise authorized by law for the investment of Public 467 Employees' Retirement System funds, as long as such investment is 468 made from competitive offering and at the highest and best market 469 rate obtainable consistent with any available investment 470 alternatives; however, such investments shall not be made in 471 shares of stock, common or preferred, or in any other investments 472 which would mature more than one (1) year from the date of 473 investment. The board shall have the authority to draw from this 474 fund periodically such funds as are necessary to operate the 475 self-insurance plan or to pay to the insurance carrier the cost of 476 operation of this plan, it being the purpose to limit the amount 477 of participation by the state to fifty percent (50%) of the cost 478 of the life insurance program and not to limit the contracting for 479 additional benefits where the cost will be paid in full by the 480 employee. The state shall not share in the cost of coverage for 481 retired employees.

(9) The board shall also provide for the creation of an
Insurance Reserve Fund and funds therein shall be invested by the
State Treasurer with all interest earned credited to the State and
School Employees Insurance Fund.

486 (10) Any retired employee electing to purchase retired life 487 and health insurance will have the full cost of such insurance 488 deducted monthly from his State of Mississippi retirement plan 489 check or direct billed for the cost of the premium if the 490 retirement check is insufficient to pay for the premium. If the board determines actuarially that the premium paid by the 491 participating retirees adversely affects the overall cost of the 492 plan to the state, then the board may impose a premium 493 494 surcharge * * * upon such participating retired employees who are 495 under the age for Medicare eligibility.

496 [From and after July 1 of the year in which Section 25-11-143
497 becomes effective as provided in subsection (1) of Section
498 25-11-143, this section shall read as follows:]

499 25-15-15. (1) The board may determine the manner in which
500 premiums and contributions by the state agencies, local school

501 districts, colleges, universities, community/junior colleges and 502 public libraries will be collected to provide the self-insured 503 health insurance program for employees as provided under this 504 article. The state shall provide fifty percent (50%) of the cost 505 of the above life insurance plan and one hundred percent (100%) of 506 the cost of a basic level of health insurance * * * for all active 507 full-time employees. The employees may pay additional amounts to 508 purchase additional benefits or levels of coverage offered under 509 the plan. The employees shall be given the opportunity to 510 purchase coverage for their eligible dependents with the premiums 511 for the dependent coverage, as well as the employee's fifty percent (50%) share for his life insurance coverage and additional 512 premium amounts for his health insurance coverage, to be 513 514 deductible from the employee's salary by the agency, department or 515 institution head. Those deductions, together with the fifty 516 percent (50%) share of the life insurance premiums of the 517 employing agency, department or institution head from funds 518 appropriated to or authorized to be expended by the employing 519 agency, department or institution head, shall be deposited directly into a depository bank or special fund in the State 520 521 Treasury, as determined by the board. These funds and interest earned on these funds may be used for the disbursement of claims 522 523 and shall be exempt from the appropriation process.

524 (2) The state shall provide annually, by line item in the 525 Mississippi Library Commission appropriation bill, the funds to pay one hundred percent (100%) of the cost of a basic level of 526 527 health insurance under the State and School Employees Health 528 Insurance Plan for all full-time library staff members in each 529 public library in Mississippi. The employees may pay additional 530 amounts to purchase additional benefits or levels of coverage offered under the plan. The commission shall allot to each public 531 532 library a sufficient amount of those funds appropriated to pay the costs of insurance for eligible employees. Any funds so 533 appropriated by line item that are not expended during the fiscal 534 535 year for which the funds were appropriated shall be carried

forward for the same purposes during the next succeeding fiscal year. If any premiums for the health insurance and/or late charges and interest penalties are not paid by a public library in a timely manner, as defined by the board, the Mississippi Library Commission, upon notice by the board, shall immediately withhold all subsequent disbursements of funds to that public library.

The state shall annually provide one hundred percent 542 (3) (100%) of the cost of a basic level of health insurance * * * for 543 544 all public school district employees who work no less than twenty 545 (20) hours during each week and regular nonstudent school bus 546 drivers. The employees may pay additional amounts to purchase 547 additional benefits or levels of coverage offered under the plan. 548 Where federal funding is allowable to defray, in full or in part, 549 the cost of participation in the program by district employees who work no less than twenty (20) hours during the week and regular 550 nonstudent bus drivers, whose salaries are paid, in full or in 551 part, by federal funds, the allowance under this section shall be 552 553 reduced to the extent of that federal funding. Where the use of 554 federal funds is allowable but not available, it is the intent of 555 the Legislature that school districts contribute the cost of 556 participation for the employees from local funds, except that 557 parent fees for child nutrition programs shall not be increased to 558 cover that cost.

559 (4) The state shall provide annually, by line item in the 560 community/junior college appropriation bill, the funds to pay one hundred percent (100%) of the cost of a basic level of health 561 562 insurance * * * for all community/junior college district 563 employees who work no less than twenty (20) hours during each 564 week. The employees may pay additional amounts to purchase additional benefits or levels of coverage offered under the plan. 565

(5) When the use of federal funding is allowable to defray, in full or in part, the cost of participation in the insurance plan by community/junior college district employees who work no less than twenty (20) hours during each week, whose salaries are paid, in full or in part, by federal funds, the allowance under

571 this section shall be reduced to the extent of the federal 572 funding. Where the use of federal funds is allowable but not 573 available, it is the intent of the Legislature that 574 community/junior college districts contribute the cost of 575 participation for the employees from local funds.

576 (6) Any community/junior college district may contribute to 577 the cost of coverage for any district employee from local 578 community/junior college district funds, and any public school 579 district may contribute to the cost of coverage for any district 580 employee from nonminimum program funds. Any part of the cost of 581 the coverage for participating employees of public school 582 districts and public community/junior college districts that is 583 not paid by the state shall be paid by the participating 584 employees, which shall be deducted from the salaries of the 585 employees in a manner determined by the board.

586 (7) Any funds appropriated for the cost of insurance by line 587 item in the community/junior colleges appropriation bill that are 588 not expended during the fiscal year for which the funds were 589 appropriated shall be carried forward for the same purposes during 590 the next succeeding fiscal year.

The board may establish and enforce late charges and 591 (8) 592 interest penalties or other penalties for the purpose of requiring 593 the prompt payment of all premiums for life and health insurance 594 permitted under Chapter 15 of Title 25. All funds in excess of the amount needed for disbursement of claims shall be deposited in 595 596 a special fund in the State Treasury to be known as the State and 597 School Employees Insurance Fund. The State Treasurer shall invest all funds in the State and School Employees Insurance Fund and all 598 599 interest earned shall be credited to the State and School 600 Employees Insurance Fund. Those funds shall be placed with one or more depositories of the state and invested on the first day that 601 602 the funds are available for investment in certificates of deposit, repurchase agreements or in United States Treasury bills or as 603 604 otherwise authorized by law for the investment of Public Employees' Retirement System funds, as long as the investment is 605

606 made from competitive offering and at the highest and best market 607 rate obtainable consistent with any available investment alternatives. However, those investments shall not be made in 608 609 shares of stock, common or preferred, or in any other investments that would mature more than one (1) year from the date of 610 611 investment. The board shall have the authority to draw from this fund periodically such funds as are necessary to operate the 612 613 self-insurance plan or to pay to the insurance carrier the cost of 614 operation of this plan, it being the purpose to limit the amount 615 of participation by the state to fifty percent (50%) of the cost 616 of the life insurance program and not to limit the contracting for additional benefits where the cost will be paid in full by the 617 618 employee.

619 (9) The board shall also provide for the creation of an 620 Insurance Reserve Fund, and funds in the reserve fund shall be 621 invested by the State Treasurer with all interest earned credited 622 to the State and School Employees Insurance Fund.

623 **SECTION 4.** Sections 1 and 2 of this act shall take effect 624 and be in force from and after January 1, 2006. Section 3 of this 625 act shall take effect and be in force from and after its passage.

Further, amend by striking the title in its entirety and inserting in lieu thereof the following:

AN ACT TO CREATE A NEW SECTION TO ALLOW ANY STATE AGENCY, 1 UNIVERSITY, SCHOOL DISTRICT, COMMUNITY COLLEGE, PUBLIC LIBRARY OR UNIVERSITY-BASED PROGRAM FOR DEAF, APHASIC AND EMOTIONALLY 2 3 4 DISTURBED CHILDREN TO CHOOSE A POLICY OR POLICIES OF GROUP LIFE 5 INSURANCE WITH AN INSURANCE COMPANY LICENSED BY THE DEPARTMENT OF INSURANCE; TO AMEND SECTION 25-15-9, MISSISSIPPI CODE OF 1972, TO REQUIRE THAT EMPLOYEES MUST HAVE BEEN PARTICIPANTS IN THE STATE 6 7 AND SCHOOL EMPLOYEES HEALTH INSURANCE PLAN FOR A CERTAIN NUMBER OF 8 9 YEARS TO BE ELIGIBLE TO PARTICIPATE IN THE PLAN UPON THEIR 10 RETIREMENT; TO DELETE THE PROVISIONS RELATING TO THE STATE AND SCHOOL EMPLOYEES LIFE INSURANCE PLAN; TO AMEND SECTION 25-15-15, 11 MISSISSIPPI CODE OF 1972, TO AUTHORIZE THE STATE OF MISSISSIPPI TO 12 PAY FOR 100% OF THE COST OF A BASIC LEVEL OF HEALTH INSURANCE FOR 13 14 STATE AND SCHOOL EMPLOYEES; TO AUTHORIZE SUCH EMPLOYEES TO PAY ADDITIONAL AMOUNTS TO PURCHASE ADDITIONAL BENEFITS OR LEVELS OF 15 16 COVERAGE; TO DELETE THE MAXIMUM AMOUNT OF PREMIUM SURCHARGE WHICH MAY BE IMPOSED UPON CERTAIN PARTICIPATING RETIREES IF THE OVERALL 17 18 COST OF THE PLAN TO THE STATE IS ADVERSELY AFFECTED; AND FOR 19 RELATED PURPOSES.

SS01\HB191A.1J

John O. Gilbert Secretary of the Senate