By: Senator(s) Clarke, Burton, Dearing, Hopson, Horhn, Jackson (11th) To: Insurance

SENATE BILL NO. 2554 (As Sent to Governor)

1 AN ACT TO CREATE THE HEALTH INSURANCE EXCHANGE STUDY 2 COMMITTEE TO CONDUCT A STUDY OF HEALTH INSURANCE EXCHANGES AS 3 PROPOSED AT THE FEDERAL LEVEL AND TO MAKE IMPLEMENTATION RECOMMENDATIONS; TO PROVIDE FOR THE MEMBERSHIP OF THE STUDY 4 5 COMMITTEE AND ITS POWERS AND DUTIES; AND FOR RELATED PURPOSES. 6 BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF MISSISSIPPI: 7 SECTION 1. (1) There is hereby created the Health Insurance Exchange Study Committee, which shall be composed of thirteen (13) 8 members as follows: 9 10 (a) Two (2) members who represent insurer companies, appointed by the Governor, one (1) of which shall be a domestic 11 12 insurer, and one (1) of which shall be the insurer for the Mississippi Children's Health Insurance Program (CHIP); 13 14 Two (2) health insurance underwriters named by the (b) 15 Mississippi Health Underwriters Association; 16 (c) One (1) business owner named by the Mississippi 17 Manufacturers Association; One (1) licensed independent insurance agent named 18 (d) by the Independent Insurance Agents of Mississippi; 19 20 (e) One (1) business owner named by the National 21 Federation of Independent Business; Two (2) members of the House of Representatives 22 (f) 23 appointed by the Speaker of the House, one (1) of which shall be the Chairman of the House Insurance Committee; 24 25 (g) Two (2) members of the Senate appointed by the 26 Lieutenant Governor, one (1) of which shall be the Chairman of the 27 Senate Insurance Committee;

One (1) member named by the Division of Medicaid; 28 (h) 29 and

The Commissioner of Insurance or his designee. 30 (i) 31 (2)All members of the committee shall be appointed in 32 accordance with subsection (1) and shall be so designated or 33 appointed in sufficient time so as to allow for all members of the 34 committee to be identified prior to the first meeting of the 35 committee.

36 (3) The first meeting of the committee shall take place no later than June 1, 2010, on the call of the Governor at a place 37 38 designated by him. At the first meeting of the committee, the 39 Chairmen of the Senate and House Insurance Committees shall act as 40 temporary co-chairmen of the committee in order to organize and to elect a chairman and vice chairman from its membership. 41 Following 42 the election of the chairman and vice chairman, the committee 43 shall adopt rules for transacting its business and keeping records. Members of the committee other than the legislative 44 45 members shall receive reimbursement for travel expenses incurred while engaged in official business of the committee in accordance 46 47 with Section 25-3-41, and the legislative members of the committee shall receive the compensation, except reimbursement for mileage 48 49 expenses, authorized for committee meetings when the Legislature 50 is not in session. Payment of such expenses shall be from funds made available therefor by the Legislature or from any other 51 52 public or private source.

53 The committee shall be charged with the duty to conduct (4) 54 an extensive study of health insurance exchanges as proposed at 55 the federal level. The study shall include, but not be limited 56 to, the following issues:

The participation of insurance carriers in the 57 (a) exchange, the benefits offered by carriers, the rules and 58 59 standards for the insurance products and the rating standards that the state will establish for the products; 60

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The pool of eligible individuals to mitigate any 61 (b) selection effects on the small group market; 62 The review of all applicable ERISA, HIPAA and COBRA 63 (C) 64 laws to ensure plans meet the requirements for rating, guarantee 65 issue, imposition of preexisting condition exclusions and continuation of coverage, and potential liability of carriers if 66 67 the exchange is negligent in applying the laws; The role of insurance agents in the exchange, the 68 (d) compensation of the agents, and to ensure that all applicable 69 70 state and federal laws are followed; 71 (e) The necessity of duplicate costs from dual 72 regulations of health insurance plans in the State of Mississippi; Thorough review of other states' results and 73 (f) 74 implementation of similar plans; 75 The ability to reduce the number of uninsured; (g) The effect of adverse selection; 76 (h) 77 The funding requirements and fiscal notes; (i) 78 The projected fees paid by employees and employers; (j) 79 The methodology used to establish the cost of the (k) 80 projected fees; 81 Study of other states' successes and failures; (1) 82 (m) Analysis and documentation of the uninsured 83 population in this state, including: High income individuals who choose not to 84 (i) 85 purchase health insurance coverage; 86 (ii) Those that have group insurance available but 87 refuse to participate; 88 (iii) Those that are available for government 89 programs but are not enrolled; 90 (iv) Those that are below poverty level and cannot afford insurance; and 91 92 (n) Analysis of the individuals outlined above to determine emergency room utilization and costs. 93 S. B. No. 2554 10/SS02/R754SG

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94 (5) Before December 1, 2010, the committee shall make a
95 report presenting such findings and recommendations to the
96 Governor and to all members of the Legislature for consideration
97 during the 2011 Regular Session.

98 (6) The provisions of this section shall stand repealed from 99 and after July 1, 2011.

SECTION 2. This act shall take effect and be in force from and after its passage.