

By: Senator(s) Watson (By Request)

To: Insurance

SENATE BILL NO. 2286

1 AN ACT TO PROVIDE THAT EVERY HEALTH AND ACCIDENT INSURANCE
 2 ISSUER, INCLUDING A HEALTH MAINTENANCE ORGANIZATION, SHALL, UPON
 3 REQUEST, RELEASE TO EACH GROUP POLICYHOLDER OR AGENT OF A POLICY
 4 HOLDER CERTAIN CLAIMS DATA; TO PROVIDE IMMUNITY FROM CIVIL
 5 LIABILITY TO A HEALTH AND ACCIDENT INSURER THAT PROVIDES SUCH
 6 DATA; TO REQUIRE CERTIFICATION BY A PLAN SPONSOR BEFORE RECEIVING
 7 PROTECTED HEALTH INFORMATION; AND FOR RELATED PURPOSES.

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

9 **SECTION 1.** (1) As used in this section, unless the context
 10 clearly indicates otherwise:

11 (a) "Claim identifier" means data that reflects a
 12 number designation including, but not limited to, a alphabetic or
 13 alphanumeric designation which shall not be a name identifier of
 14 an employee, employee's spouse, or employee's dependent.

15 (b) "Limited benefit insurance policies" means health
 16 and accident insurance policies designed, advertised, and marketed
 17 to supplement major medical insurance that includes accident-only,
 18 the Civilian Health and Medical Program of the Uniformed Services
 19 (CHAMPUS), dental, disability income, fixed indemnity, long-term
 20 care, Medicare supplement, specified disease, vision, and any



21 other health and accident insurance, other than basic hospital
22 expense, basic medical-surgical expense, or other major medical
23 insurance.

24 (c) "Health and accident insurer" or "health and
25 accident insurance issuer" shall include a health maintenance
26 organization.

27 (d) "Policy" shall include a subscriber agreement, and
28 "policyholder" shall include an enrollee or subscriber of a health
29 maintenance organization.

30 (2) Not less than ninety (90) days prior to the renewal of a
31 policy, every health and accident insurance issuer, including a
32 health maintenance organization, shall, upon request, release to
33 each group policyholder or agent of a policyholder claims data and
34 shall provide this data within no more than fourteen (14) business
35 days of receipt of the request, which shall include the following
36 items:

37 (a) The net claims paid by month during the policy
38 period.

39 (b) The monthly enrollment by employee only, employee
40 and spouse, and employee and family during the policy period.

41 (c) The amount of any claims reserve established by the
42 insurance provider against future claims under the policy.

43 (d) Claims over Ten Thousand Dollars (\$10,000.00)
44 including claim identifier, the date of occurrence, the amount of



45 claims paid and those unpaid or outstanding, and claimant health
46 condition or diagnosis.

47 (e) A complete listing of all potential catastrophic
48 diagnoses and prognoses involving persons covered under the policy
49 provisions.

50 (3) A health and accident insurer that discloses data or
51 information in compliance with the provisions of this section may
52 condition any such disclosure upon the execution of an agreement
53 for immunity from civil liability.

54 (4) A health and accident insurer that provides data or
55 information in compliance with the provisions of this section
56 shall be immune from civil liability for any acts or omissions of
57 any person's subsequent use of such data or information.

58 (5) The provisions of this section shall not be construed to
59 authorize the disclosure of the identity of a particular employee
60 covered under the group policy nor the disclosure of any individual
61 employee's particular health insurance claim, condition,
62 diagnosis, or prognosis, which would violate federal or state law.

63 (6) The provisions of this section shall not apply to
64 limited benefit insurance policies.

65 (7) A plan sponsor is entitled to receive protected health
66 information under this section only after an appropriately
67 authorized representative of the plan sponsor makes to the health
68 and accident insurer a certification substantially similar to the
69 following certification:



70 "I hereby certify and have demonstrated that the
71 plan documents comply with the requirements of 45
72 C.F.R. Section 164.504(f)(2) and that the plan
73 sponsor will safeguard and limit the use and
74 disclosure of protected health information that the
75 plan sponsor may receive from the group health plan
76 to perform the plan administration functions."

77 (8) A plan sponsor that does not provide the certification
78 required in subsection (7) of this section is not entitled to
79 receive the protected health information described in paragraphs
80 (d) and (e) of subsection (2), but is entitled to receive a report
81 of claim information that includes the other information required
82 by this section.

83 **SECTION 2.** This act shall take effect and be in force from
84 and after July 1, 2017.

