MISSISSIPPI LEGISLATURE

By: Senator(s) Watson (By Request)

To: Insurance

SENATE BILL NO. 2276

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 number designation including, but not limited to, a alphabetic or 12 13 alphanumeric designation which shall not be a name identifier of 14 an employee, employee's spouse, or employee's dependent. (b) "Limited benefit insurance policies" means health 15 16 and accident insurance policies designed, advertised, and marketed to supplement major medical insurance that includes accident-only, 17 the Civilian Health and Medical Program of the Uniformed Services 18 19 (CHAMPUS), dental, disability income, fixed indemnity, long-term

20 care, Medicare supplement, specified disease, vision, and any

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

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

(d) "Policy" shall include a subscriber agreement, and "policyholder" shall include an enrollee or subscriber of a health 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 policy38 period.

39 (b) The monthly enrollment by employee only, employee40 and spouse, and employee and family during the policy period.

41 (c) The amount of any claims reserve established by the42 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

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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 complaisance 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.

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

63 (6) The provisions of this section shall not apply to64 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:

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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, 2018.