

By: Senator(s) Parker

To: Insurance

SENATE BILL NO. 2775

1 AN ACT TO PROVIDE THAT A PLAN THAT PROVIDES HEALTH CARE  
 2 SERVICES TO LOW-INCOME INDIVIDUALS ON A PREPAID BASIS SHALL NOT BE  
 3 DEEMED TO BE HEALTH INSURANCE BUT INSTEAD SHALL BE CONSIDERED A  
 4 HEALTH CARE SHARING MINISTRY; TO PROVIDE THAT SUCH PLAN SHALL NOT  
 5 BE CONSIDERED TO BE ENGAGING IN THE BUSINESS OF INSURANCE FOR  
 6 PURPOSES OF THIS TITLE 83; TO SET CERTAIN PLAN AND ELIGIBILITY  
 7 REQUIREMENTS; TO PROVIDE THAT OPERATIONS CONSISTENT WITH THE  
 8 STANDARDS OF THIS ACT SHALL CREATE A PRESUMPTION THAT THE  
 9 OPERATING ENTITY SATISFIES THE REQUIREMENTS OF CERTAIN FEDERAL  
 10 LAW; TO AMEND SECTION 83-77-1, MISSISSIPPI CODE OF 1972, TO  
 11 CONFORM TO THE PROVISIONS OF THE ACT; AND FOR RELATED PURPOSES.

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

13 **SECTION 1.** (1) A plan that provides health-care services to  
 14 low-income individuals on a prepaid basis shall not be deemed to  
 15 be health insurance but instead shall be considered a health care  
 16 sharing ministry in accordance with Section 83-77-1. Such plan  
 17 shall not be considered to be engaging in the business of  
 18 insurance for purposes of this Title 83, Mississippi Code of 1972.

19 (2) Such plan must meet the following:

20 (a) Eligibility in the plan is limited to persons  
 21 employed in businesses employing two hundred (200) eligible  
 22 persons or fewer and persons engaged in domestic service in



23 private households and dependents of those persons, where the  
24 persons earn less than 200% of the federal poverty level and are  
25 not covered under any other group insurance arrangement;

26 (b) The plan is operated on a not-for-profit basis  
27 under the sponsorship of a not-for-profit organization; and

28 (c) Covered primary care services are provided to  
29 enrollees either by providers on staff of the sponsoring  
30 organization or by volunteers recruited from a local medical  
31 society who have, in both instances, agreed to provide their  
32 services for free or for nominal reimbursement for out-of-pocket  
33 expenses and/or expendable supplies directly related to,  
34 and incurred, as a result of, the service provided to the  
35 employee.

36 (3) Coverage for a plan under this section shall constitute  
37 minimum essential health coverage for purposes of compliance with  
38 26 U.S.C. 500A. Operations consistent with the standards of this  
39 section shall create a presumption that the operating entity  
40 satisfies the requirements of 26 U.S.C. 500A(d)(2)(B)(ii).

41 **SECTION 2.** Section 83-77-1, Mississippi Code of 1972, is  
42 amended as follows:

43 83-77-1. (1) This chapter shall be known as the "Health  
44 Care Sharing Ministries Freedom to Share Act."

45 (2) A health care sharing ministry shall not be considered  
46 to be engaging in the business of insurance for purposes of this  
47 Title 83, Mississippi Code of 1972.



48           (3) "Health care sharing ministry" means a faith-based,  
49 nonprofit organization that is tax exempt under the Internal  
50 Revenue Code which:

51                 (a) Limits its participants to those who are of a  
52 similar faith;

53                 (b) Acts as a facilitator among participants who have  
54 financial or medical needs and matches those participants with  
55 other participants with the present ability to assist those with  
56 financial or medical needs in accordance with criteria established  
57 by the health care sharing ministry;

58                 (c) Provides for the financial or medical needs of a  
59 participant through contributions from one (1) participant to  
60 another;

61                 (d) Provides amounts that participants may contribute  
62 with no assumption of risk or promise to pay among the  
63 participants and no assumption of risk or promise to pay by the  
64 health care sharing ministry to the participants;

65                 (e) Provides a written monthly statement to all  
66 participants that lists the total dollar amount of qualified needs  
67 submitted to the health care sharing ministry, as well as the  
68 amount actually published or assigned to participants for their  
69 contribution; and

70                 (f) Provides a written disclaimer on or accompanying  
71 all applications and guideline materials distributed by or on  
72 behalf of the organization that reads, in substance: "Notice:



73 The organization facilitating the sharing of medical expenses is  
74 not an insurance company, and neither its guidelines nor plan of  
75 operation is an insurance policy. Whether anyone chooses to  
76 assist you with your medical bills will be totally voluntary  
77 because no other participant will be compelled by law to  
78 contribute toward your medical bills. As such, participation in  
79 the organization or a subscription to any of its documents should  
80 never be considered to be insurance. Regardless of whether you  
81 receive any payment of medical expenses or whether this  
82 organization continues to operate, you are always personally  
83 responsible for the payment of your own medical bills."

84 (4) A plan under the provisions of Section 1 of this act may  
85 also be considered a health care sharing ministry in accordance  
86 with this section.

87 **SECTION 3.** This act shall take effect and be in force from  
88 and after July 1, 2024.

