



General Assembly

Amendment

January Session, 2009

LCO No. 8592

HB0658208592SR0

Offered by:

SEN. MCKINNEY, 28th Dist.
SEN. FASANO, 34th Dist.
SEN. RORABACK, 30th Dist.
SEN. GUGLIELMO, 35th Dist.
SEN. KISSEL, 7th Dist.
SEN. CALIGIURI, 16th Dist.

SEN. DEBICELLA, 21st Dist.
SEN. KANE, 32nd Dist.
SEN. BOUCHER, 26th Dist.
SEN. WITKOS, 8th Dist.
SEN. FRANTZ, 36th Dist.
SEN. MCLACHLAN, 24th Dist.

To: Subst. House Bill No. 6582

File No. 995

Cal. No. 675

"AN ACT ESTABLISHING THE CONNECTICUT HEALTHCARE PARTNERSHIP."

1 Strike sections 4 and 5 in their entirety and insert the following in
2 lieu thereof:

3 "Sec. 4. (NEW) (*Effective July 1, 2009*) (a) Nonstate public employers
4 may join the state employee plan in accordance with this subsection.

5 (1) Notwithstanding any provision of the general statutes, initial
6 participation in the state employee plan by a nonstate public employer
7 shall be a permissive subject of collective bargaining and shall be
8 subject to binding interest arbitration only if the collective bargaining
9 agent and the employer mutually agree to bargain over such initial
10 participation. Such mutual agreement shall be in writing and signed by
11 authorized representatives of the collective bargaining agent and the

12 employer. Continuation in the state employee plan, after initial
13 participation, shall be a mandatory subject of bargaining and shall be
14 subject to binding interest arbitration in accordance with the same
15 procedures and standards that apply to any other mandatory subject
16 of bargaining pursuant to chapters 68, 113 and 166 of the general
17 statutes. For purposes of this section, a board of education and a
18 municipality shall be considered separate employers and shall submit
19 separate applications.

20 (2) For a nonstate public employer that submits an application for
21 coverage under the state employee plan, the Comptroller shall forward
22 such application to a health care actuary not later than five business
23 days after receiving such application. Such actuary may, not later than
24 sixty days after receiving such application, certify to the Comptroller
25 that the application will shift a significantly disproportional part of
26 such employer's employees' medical risks to the state employee plan,
27 and shall provide, in writing, the specific reasons for its finding,
28 including a summary of all information relied upon in making such a
29 finding. If the Comptroller receives such certification, the Comptroller
30 shall not provide coverage to such employer and shall provide written
31 notification and the specific reasons for such denial to such employer
32 and the Health Care Cost Containment Committee. If the Comptroller
33 does not receive such certification, the Comptroller shall accept such
34 application for the next open enrollment. The Comptroller shall
35 provide written notification to such employer of such acceptance and
36 the date on which such coverage shall begin.

37 (3) The Comptroller shall consult with a health care actuary who
38 shall develop actuarial standards to be used to assess the shift in
39 medical risks of an employer's employees to the state employee plan.
40 The Comptroller shall present such standards to the Health Care Cost
41 Containment Committee for its review and evaluation prior to the use
42 of such standards.

43 (b) Municipal-related employers, small employers and nonprofit
44 employers may join the state employee plan in accordance with this

45 subsection.

46 (1) For a municipal-related employer, small employer or nonprofit
47 employer that submits an application for coverage under the state
48 employee plan, the Comptroller shall forward such application to a
49 health care actuary not later than five business days after receiving
50 such application. Such actuary may, not later than sixty days after
51 receiving such application, certify to the Comptroller that the
52 application will shift a significantly disproportional part of such
53 employer's employees' medical risks to the state employee plan, and
54 shall provide, in writing, the specific reasons for its finding, including
55 a summary of all information relied upon in making such a finding. If
56 the Comptroller receives such certification, the Comptroller shall not
57 provide coverage to such employer and shall provide written
58 notification and the specific reasons for such denial to such employer
59 and the Health Care Cost Containment Committee. If the Comptroller
60 receives such certification, the Comptroller shall not provide coverage
61 to such employer. If the Comptroller does not receive such
62 certification, the Comptroller shall accept such application for the next
63 open enrollment. The Comptroller shall provide written notification to
64 such employer of such acceptance and the date on which such
65 coverage shall begin.

66 (2) The Comptroller shall consult with a health care actuary who
67 shall develop actuarial standards to be used to assess the shift in
68 medical risks of an employer's employees to the state employee plan.
69 The Comptroller shall present such standards to the Health Care Cost
70 Containment Committee for its review and evaluation prior to the use
71 of such standards.

72 (c) The Comptroller may adopt regulations, in accordance with
73 chapter 54 of the general statutes, to establish the procedures and
74 criteria for any reviews or evaluations performed by the Health Care
75 Cost Containment Committee pursuant to subdivision (3) of
76 subsection (a) of this section, subdivision (2) of subsection (b) of this
77 section and subdivision (2) of subsection (b) of section 5 of this act.

78 (e) Notwithstanding any provision of the general statutes, the state
79 employee plan shall not be deemed (1) an unauthorized insurer, or (2)
80 a multiple employer welfare arrangement.

81 Sec. 5. (NEW) (*Effective July 1, 2009*) (a) Employers eligible to seek
82 coverage for their employees under the state employee plan, pursuant
83 to sections 3 and 4 of this act, may seek such coverage for their retirees
84 in accordance with this section. Premium payments for such coverage
85 shall be remitted by the employer to the Comptroller in accordance
86 with section 6 of this act.

87 (b) (1) If an employer seeks coverage for such employer's retirees in
88 accordance with this section, the Comptroller shall forward such
89 application to a health care actuary not later than five business days
90 after receiving such application. Such actuary may, not later than sixty
91 days after receiving such application, certify to the Comptroller that,
92 with respect to such retirees, the application will shift a significantly
93 disproportional part of an employer's retirees' medical risks to the state
94 employee plan, and shall provide in writing the specific reasons for its
95 finding, including a summary of all information relied upon in making
96 such a finding. If the Comptroller receives such certification, the
97 Comptroller shall not provide coverage to such employer for such
98 employer's retirees and shall provide written notification and the
99 specific reasons for such denial to such employer and the Health Care
100 Cost Containment Committee. If the Comptroller does not receive such
101 certification, the Comptroller shall accept such application for the next
102 open enrollment. The Comptroller shall provide written notification to
103 such employer of such acceptance and the date on which such
104 coverage shall begin.

105 (2) The Comptroller shall consult with a health care actuary who
106 shall develop actuarial standards to be used to assess the shift in
107 medical risks of an employer's retirees to the state employee plan. The
108 Comptroller shall present such standards to the Health Care Cost
109 Containment Committee for its review and evaluation prior to the use
110 of such standards.

111 (c) Nothing in sections 2 to 7, inclusive, of this act shall diminish any
112 right to retiree health insurance pursuant to a collective bargaining
113 agreement or any other provision of the general statutes."