

General Assembly

Amendment

January Session, 2015

LCO No. 7841



Offered by:

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SEN. KELLY, 21st Dist.

To: Subst. Senate Bill No. 913

File No. 338

Cal. No. 238

"AN ACT CONCERNING HEALTH CARE DATA REPORTING AND THE ENROLLMENT OF NONSTATE PUBLIC EMPLOYEES IN THE STATE EMPLOYEE HEALTH PLAN."

After the last section, add the following and renumber sections and internal references accordingly:

"Sec. 501. (NEW) (Effective October 1, 2015) (a) For a nonstate public employer or a nonprofit employer that submits an application for coverage under the state employee plan, the Comptroller shall forward such application to a health care actuary not later than five business days after receiving such application. Not later than sixty days after receiving such application, such actuary shall notify the Comptroller whether, as a result of the employees included in such application or other factors, the application will shift a significant part of such employer's employees' medical risks to the state employee plan. Such actuary shall provide, in writing, to the Comptroller the specific reasons for such actuary's finding, including a summary of all information relied upon in making such a finding.

sSB 913 Amendment

(b) If the Comptroller determines that, based on such finding, the application will shift a significant part of such employer's employees' medical risks to the state employee plan, the Comptroller shall not provide coverage to such employer and shall provide written notification of such denial detailing the specific reasons for such denial to such employer and to the Health Care Cost Containment Committee.

- (c) If the Comptroller determines that, based on such finding, the application will not shift a significant part of such employer's employees' medical risks to the state employee plan, the Comptroller shall accept such application for the next open enrollment. The Comptroller shall provide written notification to such employer of such acceptance and the date on which such coverage shall begin, pending acceptance by such employer of the terms and conditions of such plan.
- (d) (1) For an employer seeking coverage for such employer's retirees in accordance with this section, the Comptroller shall forward such application to a health care actuary not later than five business days after receiving such application. Not later than sixty days after receiving such application, such actuary shall notify the Comptroller whether, as a result of the retirees included in such application or other factors, the application will shift a significant part of such employer's retirees' medical risks to the state employee plan. Such actuary shall provide, in writing, to the Comptroller the specific reasons for such actuary's finding, including a summary of all information relied upon in making such a finding.
- (2) If the Comptroller determines that, based on such finding, the application will shift a significant part of such employer's retirees' medical risks to the state employee plan, the Comptroller shall not provide coverage to such employer and shall provide written notification of such denial detailing the specific reasons for such denial to such employer and to the Health Care Cost Containment Committee.

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(3) If the Comptroller determines that, based on such finding, the application will not shift a significant part of such employer's retirees' medical risks to the state employee plan, the Comptroller shall accept such application for the next open enrollment. The Comptroller shall provide written notification to such employer of such acceptance and the date on which such coverage shall begin, pending acceptance by such employer of the terms and conditions of such plan."

This act shall take effect as follows and shall amend the following		
sections:		
Sec. 501	October 1, 2015	New section

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