## **SENATE BILL No. 235**

February 27, 2003, Introduced by Senators PATTERSON, JACOBS, CHERRY, HAMMERSTROM and GOSCHKA and referred to the Committee on Health Policy.

A bill to provide for certain premium rates and standards for certain health benefit plans; to provide for certain coverage provisions; and to provide for certain disclosures.

## THE PEOPLE OF THE STATE OF MICHIGAN ENACT:

- 1 Sec. 1. This act shall be known and may be cited as the
- 2 "small employer health market reform act".
- 3 Sec. 3. As used in this act:
- 4 (a) "Actuarial certification" means a written statement by a
- 5 member of the American academy of actuaries or other individual
- 6 acceptable to the commissioner that a small employer carrier is
- 7 in compliance with the provisions of section 6, based upon the
- 8 person's examination, including a review of the appropriate
- 9 records and of the actuarial assumptions and methods utilized by
- 10 the carrier in establishing premium rates for applicable health
- 11 benefit plans.

- 1 (b) "Carrier" means a person that provides health insurance
- 2 in this state. For the purposes of this act, carrier includes a
- 3 health insurance company authorized to do business in this state,
- 4 a nonprofit health care corporation, a health maintenance
- 5 organization, a multiple employer welfare arrangement, or any
- 6 other person providing a plan of health insurance subject to
- 7 state insurance regulation.
- 8 (c) "Case characteristics" means industry, age, gender, group
- 9 size, claim experience, participation, health status, and
- 10 wellness of a small employer that are considered by the carrier
- 11 in the determination of premium rates for the small employer.
- 12 (d) "Commissioner" means the commissioner of the office of
- 13 financial and insurance services.
- 14 (e) "Geographic area" means an area in this state that
- 15 includes not less than 1 county, established by a carrier
- 16 pursuant to section 6 and used for adjusting rates for a health
- 17 benefit plan subject to this act.
- (f) "Health benefit plan" or "plan" means an expense-incurred
- 19 hospital, medical, or surgical policy or certificate, nonprofit
- 20 health care corporation certificate, or health maintenance
- 21 organization contract. Health benefit plan does not include
- 22 accident-only, credit, dental, or disability income insurance;
- 23 coverage issued as a supplement to liability insurance; worker's
- 24 compensation or similar insurance; or automobile medical-payment
- 25 insurance.
- 26 (g) "Index rate" means the arithmetic average of the premium
- 27 rates in a health benefit plan for all small employers located in

- 1 a geographic area.
- 2 (h) "Premium" means all money paid by a small employer,
- 3 eligible employees, or eligible persons as a condition of
- 4 receiving coverage from a carrier subject to this act, including
- 5 any fees or other contributions associated with the health
- 6 benefit plan.
- 7 (i) "Rating period" means the calendar period for which
- 8 premium rates established by a small employer carrier are assumed
- 9 to be in effect, as determined by the small employer carrier.
- 10 (j) "Small employer" means any person, firm, corporation,
- 11 partnership, limited liability company, or association actively
- 12 engaged in business who, on at least 50% of its working days
- 13 during the preceding calendar year, operated as a sole proprietor
- 14 or employed 99 or fewer eligible employees. In determining the
- 15 number of eligible employees, companies that are affiliated
- 16 companies or that are eligible to file a combined tax return for
- 17 state taxation purposes shall be considered 1 employer.
- 18 (k) "Small employer carrier" means a carrier that offers
- 19 health benefit plans covering the employees of a small employer.
- 20 (l) "Sole proprietor" means an individual who is a sole
- 21 proprietor or sole shareholder in a trade or business through
- 22 which he or she earns at least 50% or his or her taxable income
- 23 and for which he or she has filed the appropriate internal
- 24 revenue service form 1040, schedule C or F, for the previous
- 25 taxable year; who is a resident of this state; and who is
- 26 actively employed in the operation of the business, working at
- 27 least 30 hours per week, at least 40 weeks out of the calendar

- 1 year.
- 2 (m) "Wellness" means a health promotion program offered by an
- 3 employer to his or her employees.
- 4 Sec. 5. (1) Except as provided in subsection (2), this act
- 5 applies to any health benefit plan that provides coverage to a
- 6 sole proprietor or 1 or more employees of a small employer.
- 7 (2) This act does not apply to individual health insurance
- 8 policies that are subject to policy form and premium rate
- 9 approval by the commissioner.
- 10 Sec. 6. (1) For adjusting rates for health benefit plans
- 11 subject to this act, a carrier may establish up to 10 geographic
- 12 areas in this state.
- 13 (2) Premium rates for a health benefit plan subject to this
- 14 act are subject to the following:
- 15 (a) For a geographic area, the premium rates charged for a
- 16 health benefit plan during a rating period to small employers
- 17 located in that geographic area shall not vary from the index
- 18 rate for that health benefit plan by more than 25% of the index
- 19 rate. Only case characteristics shall be used for determining
- 20 the rate differentials within a geographic area for a small
- 21 employer.
- (b) For a sole proprietor, a carrier may charge an
- 23 additional premium of up to 25% above the premium rate in
- 24 subdivision (a).
- (c) The percentage increase in the premium rate charged to a
- 26 small employer in a geographic area for a new rating period shall
- 27 not exceed the sum of the annual percentage adjustment in the

- 1 geographic area's index rate for the health benefit plan plus an
- **2** adjustment, not to exceed 15% annually and adjusted pro rata for
- 3 rating periods of less than 1 year, due to case characteristics
- 4 of the small employer. This subdivision does not prohibit an
- 5 adjustment due to change in coverage.
- 6 (d) For a health benefit plan issued prior to the effective
- 7 date of this act, a premium rate for a rating period may exceed
- 8 the ranges described in subdivisions (a) and (b) for a period of
- 9 2 years following the effective date of this act.
- 10 (e) For a small employer who had been self-insured for
- 11 health benefits immediately preceding application for a health
- 12 benefit plan subject to this act, a carrier may charge an
- 13 additional premium of up to 50% above the premium rate in
- 14 subdivision (a) for no more than 2 years.
- 15 (3) Except as provided in subsection (4), a carrier shall
- 16 not apply case characteristics to an individual in a small
- 17 employer group that would result in 1 or more employees being
- 18 charged a higher premium than another employee.
- 19 (4) Health benefit plan options, number of family members,
- 20 and medicare eligibility may be used in establishing a small
- 21 employer's premium.
- 22 (5) A small employer carrier shall apply rating factors,
- 23 including case characteristics, consistently with respect to all
- 24 small employers in a geographic area and shall bill a small
- 25 employer group only with a composite rate.
- 26 Sec. 7. (1) A small employer carrier is not required to
- 27 offer or provide to a sole proprietor all health benefit plans

- 1 available to small employers who are not sole proprietors. A
- 2 small employer carrier shall offer to a sole proprietor not less
- 3 than 1 health benefit plan that provides at least catastrophic
- 4 coverage and such other coverage as the commissioner may require
- 5 as being in the best interests of both sole proprietors and small
- 6 employer carriers.
- 7 (2) A small employer carrier may apply at least annually an
- 8 open enrollment period for sole proprietors that is at least 1
- 9 month long.
- 10 (3) A small employer carrier may exclude or limit coverage
- 11 for a condition only if the exclusion or limitation relates to a
- 12 condition for which medical advice, diagnosis, care, or treatment
- 13 was recommended or received within 6 months before enrollment and
- 14 the exclusion or limitation does not extend for more than 6
- 15 months after the effective date of the health benefit plan.
- 16 Sec. 8. A small employer carrier may deny coverage to a
- 17 small employer if the small employer fails to enroll enough of
- 18 its employees to meet the minimum participation rules established
- 19 by the carrier pursuant to sound underwriting requirements. A
- 20 minimum participation rule may require a small employer group to
- 21 enroll a certain number or percentage of employees with the small
- 22 employer carrier as a condition of coverage. A minimum
- 23 participation rule for small employers of 6 or more employees
- 24 shall not require enrollment of more than 75% of the small
- 25 employer's employees who are receiving health care coverage from
- 26 the small employer. A minimum participation rule for small
- 27 employers of fewer than 6 employees may require enrollment of up

- 1 to 100% of the small employer's employees who are receiving
- 2 health care coverage from the small employer.
- 3 Sec. 9. (1) Except as provided in subsection (2), a health
- 4 benefit plan subject to this act shall be renewable to all
- 5 eligible employees and dependents at the option of the small
- 6 employer, except for any of the following reasons:
- 7 (a) Nonpayment of required premiums.
- 8 (b) Fraud or misrepresentation of the small employer, or for
- 9 coverage of an insured individual, fraud, or misrepresentation by
- 10 the insured individual or the individual's representative.
- 11 (c) Violation of participation or contribution rules.
- 12 (d) Movement outside the geographic area.
- 13 (e) Termination of association membership if the coverage was
- 14 made available only through a bona fide association.
- 15 (2) If a small employer carrier ceases to renew all health
- 16 benefit plans in a geographic area, the carrier shall provide
- 17 notice to all affected small employers and to the commissioner at
- 18 least 90 days prior to termination of coverage. A carrier that
- 19 exercises its right to cease to renew all health benefit plans in
- 20 a geographic area shall not provide health care benefits under
- 21 this act in that geographic area for a period of 5 years after
- 22 the nonrenewal of the health benefit plans without prior approval
- 23 of the commissioner.
- 24 Sec. 11. Each small employer carrier shall make reasonable
- 25 disclosure in solicitation and sales materials provided to small
- 26 employers of all of the following:
- (a) The extent to which premium rates for a specific small

- 1 employer are established or adjusted due to case characteristics
- 2 of the employees or dependents of the small employer.
- 3 (b) The provisions concerning the carrier's right to change
- 4 premium rates and the factors, including case characteristics,
- 5 that affect changes in premium rates.
- 6 (c) The provisions relating to renewability of coverage.
- 7 Sec. 13. (1) Each small employer carrier shall maintain at
- 8 its principal place of business a complete and detailed
- 9 description of its rating practices and renewal underwriting
- 10 practices, including information and documentation that
- 11 demonstrate that its rating methods and practices are based upon
- 12 commonly accepted actuarial assumptions and are in accordance
- 13 with sound actuarial principles.
- 14 (2) Each small employer carrier shall file each March 1 with
- 15 the commissioner an actuarial certification that the carrier is
- 16 in compliance with this section and that the rating methods of
- 17 the carrier are actuarially sound. A copy of the actuarial
- 18 certification shall be retained by the carrier at its principal
- 19 place of business.
- 20 (3) A small employer carrier shall make the information and
- 21 documentation described in subsection (1) available to the
- 22 commissioner upon request. The information shall be considered
- 23 proprietary and trade secret information and is not subject to
- 24 disclosure by the commissioner to persons outside of the office
- 25 of financial and insurance services except as agreed to by the
- 26 carrier or as ordered by a court of competent jurisdiction.
- 27 Sec. 15. The commissioner may suspend all or any part of

- 1 section 6 as to the premium rates applicable to 1 or more small
- 2 employers for 1 or more rating periods upon a filing by the small
- 3 employer carrier and a finding by the commissioner that either
- 4 the suspension is reasonable in light of the financial condition
- 5 of the carrier or that the suspension would enhance the
- 6 efficiency and fairness of the marketplace for small employer
- 7 health insurance.
- 8 Sec. 17. The provisions of this act apply to each health
- 9 benefit plan for a small employer that is delivered, issued for
- 10 delivery, renewed, or continued in this state on or after the
- 11 effective date of this act. For purposes of this section, the
- 12 date a plan is continued is the first rating period that begins
- 13 on or after the effective date of this act.
- 14 Enacting section 1. This amendatory act does not take
- 15 effect unless Senate Bill No. 234
- of the 92nd Legislature is enacted into
- **17** law.

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