By: Smithee

H.B. No. 2586

	A BILL TO BE ENTITLED
1	AN ACT
2	relating to small and large employer health group cooperatives.
3	BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF TEXAS:
4	SECTION 1. Section 1501.051, Insurance Code, is amended by
5	redesignating existing Subdivision (3-a) as Subdivision (3-b) and
6	adding a new Subdivision (3-a) to read as follows:
7	(3-a) <u>"Eligible single-employee business" means a</u>
8	business entity that:
9	(A) is owned and operated by a sole proprietor;
10	(B) employed an average of fewer than two
11	employees on business days during the preceding calendar year; and
12	(C) is eligible to participate in a cooperative
13	under this subchapter in accordance with Section 1501.066.
14	<u>(3-b)</u> "Expanded service area" means any area larger
15	than one county in which a health group cooperative offers
16	coverage.
17	SECTION 2. Subsection (a), Section 1501.058, Insurance
18	Code, is amended to read as follows:
19	(a) A cooperative shall:
20	(1) arrange for small or large employer health benefit
21	plan coverage for small <u>employer groups</u> , [or] large employer
22	groups, and, subject to Sections 1501.0581(q)-(s), eligible
23	single-employee businesses that participate in the cooperative by
24	contracting with small or large employer health benefit plan

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H.B. No. 2586 1 issuers that meet the requirements established by Section 1501.061; (2) collect premiums to cover the cost of: 2 3 (A) small or large employer health benefit plan coverage purchased through the cooperative; and 4 5 (B) the cooperative's administrative expenses; 6 (3) establish administrative and accounting procedures for the operation of the cooperative; 7 8 (4)establish procedures under which an applicant for or participant in coverage issued through the cooperative may have 9 10 a grievance reviewed by an impartial person; (5) contract with small or large employer health 11 12 benefit plan issuers to provide services to small or large 13 employers covered through the cooperative; and 14 (6) develop and implement a plan to maintain public 15 awareness of the cooperative and publicize the eligibility requirements for, and the procedures for enrollment in, coverage 16 17 through the cooperative. SECTION 3. Section 1501.0581, Insurance Code, is amended by 18 19 amending Subsections (a), (b), and (k) and adding Subsections (q) through (x) to read as follows: 20 21 The membership of a health group cooperative may consist (a) of only small employers; $[\tau]$ only large employers; $[\tau - \sigma r]$ both small 22 and large employers; small employers and eligible single-employee 23 24 businesses; large employers and eligible single-employee businesses; or small employers, large employers, and eligible 25 26 single-employee businesses. To participate as a member of a health group cooperative, an employer must be a small or large employer as 27

1 described by this chapter or an eligible single-employee business
2 as defined by Section 1501.051(3-a).

3 (b) Subject to the requirements imposed on small employer 4 health benefit plan issuers under Section 1501.101 and subject to 5 Subsections (a-1) and (o), a health group cooperative:

6 (1) shall allow a small employer to join a health group
7 cooperative, except a health group cooperative consisting of only
8 [small employers or both small and] large employers, and to enroll
9 in health benefit plan coverage; [and]

10 (2) <u>subject to the requirements of Subsection (t), may</u> 11 <u>allow eligible single-employee businesses to join a health group</u> 12 <u>cooperative and enroll in health benefit plan coverage; and</u>

13 (3) may allow a large employer to join the health group
14 cooperative and enroll in health benefit plan coverage.

15 (k) A health group cooperative may offer more than one 16 health benefit plan, but each plan offered must be made available to 17 all <u>employers participating in</u> [employees covered by] the 18 cooperative.

19 (q) Except as provided by Subsection (t), a health group 20 cooperative may file an election with the commissioner, on a form 21 and in the manner prescribed by the commissioner, to permit 22 eligible single-employee businesses to join the cooperative and to 23 enroll in health benefit plan coverage. The election must be filed 24 not later than the 90th day before the date coverage for eligible 25 single-employee businesses is to become effective.

26 (r) A health group cooperative may file an election under
27 Subsection (q) only if a small or large employer health benefit plan

issuer has agreed in writing to offer to issue coverage to the 1 2 cooperative based on its membership after the election to permit eligible single-employee businesses to participate in the 3 cooperative has become effective. 4 5 (s) On the date an election under Subsection (q) becomes effective and until the election is rescinded, the provisions of 6 7 this subchapter relating to guaranteed issuance of plans, to rating 8 requirements, and to mandated benefits that are applicable to small employers apply to eligible single-employee businesses that are 9 10 members of the health group cooperative. (t) A health group cooperative that files an election with 11 12 the commissioner to permit an eligible single-employee business to join the health group cooperative and enroll in health benefit plan 13 coverage must permit participation and enrollment 14 in the 15 cooperative's health benefit plan coverage during the initial enrollment and annual open enrollment periods by each eligible 16 17 single-employee business that elects to participate and agrees to satisfy requirements associated with participation in and coverage 18 through the cooperative. For purposes of this subsection, the 19 provisions of Subsections (a-1) and (o) applicable to small 20 employers apply to eligible single-employee businesses. 21 22 (u) A health group cooperative may rescind its election to permit eligible single-employee businesses to join the cooperative 23 24 and enroll in health benefit plan coverage only if: 25 (1) the election has been effective for at least two

- 26 years, except as provided by Subsection (v);
- 27 (2) the health group cooperative files notice of the

1	rescission with the commissioner not later than the 180th day
2	before the effective date of the rescission; and
3	(3) the health group cooperative provides written
4	notice of termination of coverage to all eligible single-employee
5	business members of the cooperative not later than the 180th day
6	before the effective date of the termination.
7	(v) The commissioner shall adopt rules under which a health
8	group cooperative may rescind an election described by Subsection
9	(u) before the second anniversary of the effective date of the
10	election.
11	(w) Notwithstanding Subsection (u), a health group
12	cooperative that files notice of rescission may choose to permit
13	existing eligible single-employee businesses to remain active,
14	covered members of the cooperative, but only if all such members of

15 the cooperative are provided the same opportunity.

16 (x) A health group cooperative that has rescinded an 17 election under Subsection (u) may not file a subsequent election to 18 permit eligible single-employee businesses to join the cooperative 19 and enroll in health benefit plan coverage before the fifth 20 anniversary of the effective date of the rescission.

21 SECTION 4. Subsection (b-3), Section 1501.063, Insurance
22 Code, is amended to read as follows:

23 (b-3) Except as provided by Section 1501.0581(k), a [A] 24 health group cooperative shall have sole authority to make benefit 25 elections and perform other administrative functions under this 26 code for the cooperative's participating employers.

27 SECTION 5. Section 1501.065, Insurance Code, is amended to

1 read as follows:

2 Sec. 1501.065. CERTAIN ACTIONS BASED ON RISK 3 CHARACTERISTICS OR HEALTH STATUS PROHIBITED. A cooperative may not 4 limit, restrict, or condition an employer's or employee's 5 membership in a cooperative or, except as provided by Section 6 <u>1501.0581(k), an employer's or employee's</u> choice among benefit

7 plans based on:

8 (1) risk characteristics of a group or of any member of 9 a group; or

10 (2) health status related factors, duration of 11 coverage, or any similar characteristic related to the health 12 status or experience of a group or of any member of a group.

13 SECTION 6. Subchapter B, Chapter 1501, Insurance Code, is 14 amended by adding Sections 1501.066 and 1501.067 to read as 15 follows:

Sec. 1501.066. ELECTION TO TREAT PARTICIPATING EMPLOYERS 16 17 SEPARATELY FOR RATING PURPOSES. (a) Notwithstanding Section 1501.063, a health group cooperative may file with the 18 19 commissioner, on a form and in the manner prescribed by the commissioner, an election to treat participating employers within 20 the cooperative as separate employers for purposes of rating small 21 and large employer health benefit plans, subject to the rating 22 requirements of this code applicable to such plans. An existing 23 24 health group cooperative must file the election with the department not later than the 90th day before the date on which the election is 25 26 to become effective. (b) A health group cooperative must provide to all 27

1 participating and prospective employers, in a manner prescribed by the commissioner, a written notice of its election to treat 2 participating employers within the cooperative as separate 3 employers for purposes of rating small and large employer health 4 benefit plans. Employers participating in the cooperative when 5 such an election is made must be provided notice of the election not 6 later than the 90th day before the date the election is to become 7 effective. For a participating employer, the notice must contain 8 the quote for the premium rate applicable to the employer as of the 9 10 date the plan is renewed. Prospective employers must be provided notice of the election when the prospective employer applies to 11 12 become a participating employer in the health group cooperative.

13 (c) An election under this section is effective either on 14 the date the plan to which the election applies is initially issued 15 or on the date the plan is renewed and remains in effect for not less 16 than 12 months after that date.

Sec. 1501.067. ELIGIBLE SINGLE-EMPLOYEE BUSINESS. The commissioner shall adopt rules governing the eligibility of a single-employee business to participate in a health group cooperative under this subchapter. The rules must include provisions to ensure that each eligible single-employee business has a business purpose and was not formed solely to obtain health benefit plan coverage under this subchapter.

24 SECTION 7. This Act takes effect immediately if it receives 25 a vote of two-thirds of all the members elected to each house, as 26 provided by Section 39, Article III, Texas Constitution. If this 27 Act does not receive the vote necessary for immediate effect, this

1 Act takes effect September 1, 2009.