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SECRETARY OF STATE

WEST VIRGINIA LEGISLATURE

Regular Session, 2006

ENROLLED

SENATE BILL NO. 454

(By Senator _____ Minard)

PASSED _____ February 24, 2006

In Effect 90 days from Passage

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Senate Bill No. 454

(BY SENATOR MINARD)

[Passed February 24, 2006; in effect ninety days from passage.]

AN ACT to amend and reenact §33-25A-3 of the Code of West Virginia, 1931, as amended, relating to removing the Commissioner of Insurance as the attorney in fact for health maintenance organizations for service of process purposes.

Be it enacted by the Legislature of West Virginia:

That §33-25A-3 of the Code of West Virginia, 1931, as amended, be amended and reenacted to read as follows:

ARTICLE 25A. HEALTH MAINTENANCE ORGANIZATION ACT.

§33-25A-3. Application for certificate of authority.

- 1 (1) Notwithstanding any law of this state to the contrary,
- 2 any person may apply to the commissioner for and obtain
- 3 a certificate of authority to establish or operate a health
- 4 maintenance organization in compliance with this article.
- 5 No person shall sell health maintenance organization
- 6 enrollee contracts, nor shall any health maintenance

7 organization commence services, prior to receipt of a
8 certificate of authority as a health maintenance organiza9 tion. Any person may, however, establish the feasibility of
10 a health maintenance organization prior to receipt of a
11 certificate of authority through funding drives and by
12 receiving loans and grants.

13 (2) Every health maintenance organization in operation 14 as of the effective date of this article shall submit an application for a certificate of authority under this section 15 within thirty days of the effective date of this article. 16 Each applicant may continue to operate until the commis-17 sioner acts upon the application. In the event that an 18 application is denied pursuant to section four of this 19 20 article, the applicant shall be treated as a health maintenance organization whose certificate of authority has been 21 22 revoked: Provided, That all health maintenance organiza-23 tions in operation for at least five years are exempt from 24 filing applications for a new certificate of authority.

25 (3) The commissioner may require any organization 26 providing or arranging for health care services on a prepaid per capita or prepaid aggregate fixed sum basis to 27 28 apply for a certificate of authority as a health maintenance organization. The commissioner shall promulgate rules to 29 30 facilitate the enforcement of this subsection: Provided, 31 That any provider who is assuming risk by virtue of a contract or other arrangement with a health maintenance 32 33 organization or entity which has a certificate may not be required to file for a certificate: Provided, however, That 34 35 the commissioner may require the exempted entities to file 36 complete financial data for a determination as to their 37 solvency. Any organization directed to apply for a certifi-38 cate of authority is subject to the provisions of subsection (2) of this section. 39

40 (4) Each application for a certificate of authority shall be
41 verified by an officer or authorized representative of the
42 applicant, shall be in a form prescribed by the commis-

43 sioner and shall set forth or be accompanied by any and all44 information required by the commissioner, including:

45 (a) The basic organizational document;

46 (b) The bylaws or rules;

47 (c) A list of names, addresses and official positions of 48 each member of the governing body, which shall contain 49 a full disclosure in the application of any financial interest 50 by the officer or member of the governing body or any 51 provider or any organization or corporation owned or 52 controlled by that person and the health maintenance 53 organization and the extent and nature of any contract or 54 financial arrangements between that person and the health 55 maintenance organization;

56 (d) A description of the health maintenance organiza-57 tion;

58 (e) A copy of each evidence of coverage form and of each59 enrollee contract form;

60 (f) Financial statements which include the assets,
61 liabilities and sources of financial support of the applicant
62 and any corporation or organization owned or controlled
63 by the applicant;

64 (g)(i) A description of the proposed method of marketing65 the plan;

66 (ii) A schedule of proposed charges; and

67 (iii) A financial plan which includes a three-year projec68 tion of the expenses and income and other sources of
69 future capital;

(h) A statement reasonably describing the service area or
areas to be served and the type or types of enrollees to be
served;

(i) A description of the complaint procedures to beutilized as required under section twelve of this article;

(j) A description of the mechanism by which enrollees
will be afforded an opportunity to participate in matters
of policy and operation under section six of this article;

(k) A complete biographical statement on forms prescribed by the commissioner and an independent investigation report on all of the individuals referred to in
subdivision (c) of this subsection and all officers, directors
and persons holding five percent or more of the common
stock of the organization;

(l) A comprehensive feasibility study, performed by a 84 85 qualified independent actuary in conjunction with a 86 certified public accountant which shall contain a certifica-87 tion by the qualified actuary and an opinion by the 88 certified public accountant as to the feasibility of the 89 proposed organization. The study shall be for the greater 90 of three years or until the health maintenance organization 91 has been projected to be profitable for twelve consecutive 92 months. The study must show that the health maintenance 93 organization would not, at the end of any month of the 94 projection period, have less than the minimum capital and 95 surplus as required by paragraph (ii), subdivision (c), subsection (2), section four of this article. The qualified 96 97 independent actuary shall certify that: The rates are neither inadequate nor excessive nor unfairly discrimina-98 99 tory; the rates are appropriate for the classes of risks for which they have been computed; the rating methodology 100 101 is appropriate: Provided, That the certification shall 102 include an adequate description of the rating methodology 103 showing that the methodology follows consistent and 104 equitable actuarial principles; the health maintenance 105 organization is actuarially sound: Provided, however, That 106 the certification shall consider the rates, benefits and 107 expenses of, and any other funds available for the payment 108 of obligations of, the organization; the rates being charged 109 or to be charged are actuarially adequate to the end of the period for which rates have been guaranteed; and incurred 110

but not reported claims and claims reported but not fully 111 112 paid have been adequately provided for; 113 (m) A description of the health maintenance organization's quality assurance program; and 114 115 (n) Such other information as the commissioner may 116 require to be provided. 117 (5) A health maintenance organization shall, unless 118 otherwise provided for by rules promulgated by the 119 commissioner, file notice prior to any modification of the 120 operations or documents filed pursuant to this section or 121 as the commissioner may require by rule. If the commis-122 sioner does not disapprove of the filing within ninety days 123 of filing, it shall be considered approved and may be 124 implemented by the health maintenance organization.

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Enr. S. B. No. 454]

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The Joint Committee on Enrolled Bills hereby certifies that the foregoing bill is correctly enrolled.

Chairman Senate Committee Chairman House Committee

Originated in the Senate.

In effect ninety days from passage.

Clerk of the Senate

Clerk of the House of Delegates

President of the Senate

Speaker House of Delegates

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PRESENTED TO THE GOVERNOR

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