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A bill to be entitled

An act relating to affordable health insurance in rural counties; amending s. 112.08, F.S.; providing legislative findings; providing for a pilot self-insurance program; authorizing a rural health network in Monroe County to establish a self-insurance plan for certain purposes; providing program requirements; providing for approval by the Office of Insurance Regulation of the Financial Services Commission; requiring an evaluation and report to the Legislature by January 1, 2006; providing an effective date.

Be It Enacted by the Legislature of the State of Florida:

Section 1. Paragraph (b) of subsection (2) of section 112.08, Florida Statutes, is amended, and paragraph (d) is added to said subsection, to read:

 112.08 Group insurance for public officers, employees, and certain volunteers; physical examinations.--

In order to obtain approval from the Office of

(2)

Insurance Regulation of any self-insured plan for health, accident, and hospitalization coverage, each local governmental unit or consortium shall submit its plan along with a certification as to the actuarial soundness of the plan, which certification is prepared by an actuary who is a member of the Society of Actuaries or the American Academy of Actuaries. The Office of Insurance Regulation shall not approve the plan unless

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it determines that the plan is designed to provide sufficient revenues to pay current and future liabilities, as determined according to generally accepted actuarial principles. After implementation of an approved plan, each local governmental unit or consortium shall annually submit to the Office of Insurance Regulation a report which includes a statement prepared by an actuary who is a member of the Society of Actuaries or the American Academy of Actuaries as to the actuarial soundness of the plan. The report is due 90 days after the close of the fiscal year of the plan. The report shall consist of, but is not limited to:

- 1. The adequacy of contribution rates in meeting the level of benefits provided and the changes, if any, needed in the contribution rates to achieve or preserve a level of funding deemed adequate to enable payment of the benefit amounts provided under the plan and a valuation of present assets, based on statement value, and prospective assets and liabilities of the plan and the extent of any unfunded accrued liabilities.
- 2. A plan to amortize any unfunded liabilities and a description of actions taken to reduce unfunded liabilities.
 - 3. A description and explanation of actuarial assumptions.
- 4. A schedule illustrating the amortization of any unfunded liabilities.
- 5. A comparative review illustrating the level of funds available to the plan from rates, investment income, and other sources realized over the period covered by the report with the assumptions used.

6. A statement by the actuary that the report is complete and accurate and that in the actuary's opinion the techniques and assumptions used are reasonable and meet the requirements and intent of this subsection.

- 7. Other factors or statements as required by the <u>office</u>

 Department of Insurance in order to determine the actuarial soundness of the plan.
- All assumptions used in the report shall be based on recognized actuarial principles acceptable to the Office of Insurance Regulation. The office shall review the report and shall notify the administrator of the plan and each entity participating in the plan, as identified by the administrator, of any actuarial deficiencies. Each local governmental unit is responsible for payment of valid claims of its employees that are not paid within 60 days after receipt by the plan administrator or consortium.

(d) Pilot program; Monroe County.--

- 1. The Legislature has determined that insurers and managed care organizations are unable to provide adequate or affordable health insurance coverage in rural counties and other isolated areas of the state. It is therefore necessary to explore alternatives for making affordable health insurance coverage available in rural counties and other similar areas of the state.
- 2. An entity in Monroe County, established pursuant to s. 381.0406, may, through a nonprofit corporation, establish a self-insurance plan approved by the office in accordance with

paragraph (b) to insure residents of a rural county or similar area if the residents are unable to obtain adequate or affordable health insurance coverage. Premiums charged by the self-insurance plan for participating residents or employers shall be actuarially sound. In reviewing such a self-insurance plan, the office shall consult with the Department of Health to confirm that the program is consistent with the purpose and scope of chapter 381.

- 3. The entity in Monroe County that establishes this program shall, in addition to the reporting requirements set forth in paragraph (b), prepare an evaluation of the pilot program, including recommendations for the future of the program, and submit the report to the Governor, the President of the Senate, the Speaker of the House of Representatives, the Department of Health, and the office no later than January 1, 2006.
- Section 2. This act shall take effect upon becoming a law.