

97TH GENERAL ASSEMBLY State of Illinois 2011 and 2012 SB1553

Introduced 2/9/2011, by Sen. William R. Haine

SYNOPSIS AS INTRODUCED:

215 ILCS 5/359c

Amends the Illinois Insurance Code. Provides that statements of the aggregate administrative expenses of the carrier that a carrier providing a group or individual major medical policy of accident or health insurance shall prepare and provide to the Department of Insurance shall be filed annually (rather than every 6 months) and that the statements shall be filed on or before April 1 for the preceding calendar year. Makes related changes. Effective immediately.

LRB097 09436 RPM 49571 b

1 AN ACT concerning insurance.

Be it enacted by the People of the State of Illinois, represented in the General Assembly:

- Section 5. The Illinois Insurance Code is amended by changing Section 359c as follows:
- 6 (215 ILCS 5/359c)
- 7 Sec. 359c. Accident and health expense reporting.
- 8 Beginning January 1, 2011 and every 6 months thereafter, any carrier providing a group or individual major medical policy of accident or health insurance shall prepare 10 and provide to the Department of Insurance a statement of the 11 aggregate administrative expenses of the carrier, based on the 12 premiums earned in the immediately preceding calendar year 13 14 6 month period on the accident or health insurance business of the carrier. The <u>annual</u> semi annual statements shall be filed 15 on or before April 1 July 31 for the preceding calendar year 16 17 6 month period ending June 30 and on or before February 1 for the preceding 6-month period ending December 31. The statements 18 19 shall itemize and separately detail all of the following 20 information with respect to the carrier's accident or health 21 insurance business:
- 22 (1) the amount of premiums earned by the carrier both 23 before and after any costs related to the carrier's

| Τ | purchase of reinsurance coverage; |
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| 2 | (2) the total amount of claims for losses paid by the |
| 3 | carrier both before and after any reimbursement from |
| 4 | reinsurance coverage including any costs incurred related |
| 5 | to: |
| 6 | (A) disease, case, or chronic care management |
| 7 | programs; |
| 8 | (B) wellness and health education programs; |
| 9 | (C) fraud prevention; |
| 10 | (D) maintaining provider networks and provider |
| 11 | credentialing; |
| 12 | (E) health information technology for personal |
| 13 | electronic health records; and |
| 14 | (F) utilization review and utilization management; |
| 15 | (3) the amount of any losses incurred by the carrier |
| 16 | but not reported to the carrier in the current or prior |
| 17 | reporting period; |
| 18 | (4) the amount of costs incurred by the carrier for |
| 19 | State fees and federal and State taxes including: |
| 20 | (A) any high risk pool and guaranty fund |
| 21 | assessments levied on the carrier by the State; and |
| 22 | (B) any regulatory compliance costs including |
| 23 | State fees for form and rate filings, licensures, |
| 24 | market conduct exams, and financial reports; |
| 25 | (5) the amount of costs incurred by the carrier for |
| 26 | reinsurance coverage; |

| 1 | (6) the amount of costs incurred by the carrier that |
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| 2 | are related to the carrier's payment of marketing expenses |
| 3 | including commissions; and |

- 4 (7) any other administrative expenses incurred by the carrier.
- 6 (b) The information provided pursuant to subsection (a) of
 7 this Section shall be separately aggregated for the following
 8 lines of major medical insurance:
- 9 (1) individually underwritten;
- 10 (2) groups of 2 to 25 members;
- 11 (3) groups of 26 to 50 members;
- 12 (4) groups of 51 or more members.
- 13 (c) The Department shall make the submitted information 14 publicly available on the Department's website or such other 15 media as appropriate in a form useful for consumers.
- 16 (Source: P.A. 96-857, eff. 1-5-10.)
- Section 99. Effective date. This Act takes effect upon becoming law.