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:

(215 ILCS 5/359c)

Sec. 359c. Accident and health expense reporting.

- (a) 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 and provide to the Department of Insurance a statement of the aggregate administrative expenses of the carrier, based on the premiums earned in the immediately preceding 6-month period on the accident or health insurance business of the carrier. The semi-annual statements shall be filed on or before October 1 July 31 for the preceding 6-month period ending June 30 and on or before April 1 February 1 for the preceding 6-month period ending December 31. The statements shall itemize and separately detail all of the following information with respect to the carrier's accident or health insurance business:
 - (1) the amount of premiums earned by the carrier both before and after any costs related to the carrier's purchase of reinsurance coverage;

- (2) the total amount of claims for losses paid by the carrier both before and after any reimbursement from reinsurance coverage including any costs incurred related to:
 - (A) disease, case, or chronic care management programs;
 - (B) wellness and health education programs;
 - (C) fraud prevention;
 - (D) maintaining provider networks and provider credentialing;
 - (E) health information technology for personal electronic health records; and
 - (F) utilization review and utilization management;
- (3) the amount of any losses incurred by the carrier but not reported to the carrier in the current or prior reporting period;
- (4) the amount of costs incurred by the carrier for State fees and federal and State taxes including:
 - (A) any high risk pool and guaranty fund assessments levied on the carrier by the State; and
 - (B) any regulatory compliance costs including State fees for form and rate filings, licensures, market conduct exams, and financial reports;
- (5) the amount of costs incurred by the carrier for reinsurance coverage;
 - (6) the amount of costs incurred by the carrier that

are related to the carrier's payment of marketing expenses including commissions; and

- (7) any other administrative expenses incurred by the carrier.
- (b) The information provided pursuant to subsection (a) of this Section shall be separately aggregated for the following lines of major medical insurance:
 - (1) individually underwritten;
 - (2) groups of 2 to 25 members;
 - (3) groups of 26 to 50 members;
 - (4) groups of 51 or more members.
- (c) The Department shall make the submitted information publicly available on the Department's website or such other media as appropriate in a form useful for consumers.

(Source: P.A. 96-857, eff. 1-5-10.)