As Amended by House Committee

Session of 2010

SENATE BILL No. 388

By Committee on Financial Institutions and Insurance

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AN ACT concerning insurance; relating to <u>risk-based capital require-ments for insurers</u> the regulation thereof; amending K.S.A. 2009 Supp. [40-2,103,] 40-2c01 [and 40-19c09] and repealing the existing <u>section</u> [sections].

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Be it enacted by the Legislature of the State of Kansas:

Section 1. K.S.A. 2009 Supp. 40-2c01 is hereby amended to read as follows: 40-2c01. As used in this act:

- (a) "Adjusted RBC report" means an RBC report which has been adjusted by the commissioner in accordance with K.S.A. 40-2c04, and amendments thereto.
- (b) "Corrective order" means an order issued by the commissioner specifying corrective actions which the commissioner has determined are required to address a RBC level event.
- (c) "Domestic insurer" means any insurance company or risk retention group which is licensed and organized in this state.
- (d) "Foreign insurer" means any insurance company or risk retention group not domiciled in this state which is licensed or registered to do business in this state pursuant to article 41 of chapter 40 of the Kansas Statutes Annotated or K.S.A. 40-209, and amendments thereto.
- (e) "NAIC" means the national association of insurance commissioners.
- (f) "Life and health insurer" means any insurance company licensed under article 4 or 5 of chapter 40 of the Kansas Statutes Annotated or a licensed property and casualty insurer writing only accident and health insurance.
- (g) "Property and casualty insurer" means any insurance company licensed under articles 9, 10, 11, 12, 12a, 15 or 16 of chapter 40 of the Kansas Statutes Annotated, but shall not include monoline mortgage guaranty insurers, financial guaranty insurers and title insurers.
- 42 (h) "Negative trend" means, with respect to a life and health insurer, 43 a negative trend over a period of time, as determined in accordance with

the "trend test calculation" included in the RBC instructions defined in subsection (j).

- (i) "RBC" means risk-based capital.
- (j) "RBC instructions" mean the risk-based capital instructions promulgated by the NAIC, which are in effect on December 31, 2008 2009, or any later version promulgated by the NAIC as may be adopted by the commissioner under K.S.A. 2009 Supp. 40-2c29, and amendments thereto.
- (k) "RBC level" means an insurer's company action level RBC, regulatory action level RBC, authorized control level RBC, or mandatory control level RBC where:
- 12 (1) "Company action level RBC" means, with respect to any insurer, 13 the product of 2.0 and its authorized control level RBC;
 - (2) "regulatory action level RBC" means the product of 1.5 and its authorized control level RBC;
 - (3) "authorized control level RBC" means the number determined under the risk-based capital formula in accordance with the RBC instructions; and
 - (4) "mandatory control level RBC" means the product of .70 and the authorized control level RBC.
 - (l) "RBC plan" means a comprehensive financial plan containing the elements specified in K.S.A. 40-2c06, and amendments thereto. If the commissioner rejects the RBC plan, and it is revised by the insurer, with or without the commissioner's recommendation, the plan shall be called the "revised RBC plan."
 - (m) "RBC report" means the report required by K.S.A. 40-2c02, and amendments thereto.
 - (n) "Total adjusted capital" means the sum of:
- 29 (1) An insurer's capital and surplus or surplus only if a mutual insurer; 30 and
 - (2) such other items, if any, as the RBC instructions may provide.
 - (o) "Commissioner" means the commissioner of insurance.
 - New Sec. 2. (a) The Kansas health policy authority shall conduct a study on the topic of requiring insurance companies to reimburse clinical marriage and family therapists, clinical professional counselors and clinical psychotherapists. Such study shall be designed to:
 - (1) Determine the impact that coverage for such therapists, counselors and psychotherapists has had on the state health care benefits program as described in article 65 of chapter 75 of the Kansas Statutes Annotated, and amendments thereto;
- **(2)** provide data on utilization of such therapists, counselors and psychotherapists by individuals covered for direct reimburse-

ments for services provided by such therapists, counselors and psychotherapists;

- (3) determine the cost of providing coverage for such therapists, counselors and psychotherapists;
- (4) compare the costs of coverage between individuals under the state health care benefits program covered by insurance companies which provide direct reimbursement for services provided by such therapists, counselors and psychotherapists to individuals under the state health care benefits program covered by insurance companies which do not provide such direct reimbursement;
- (5) compare the amount of premiums charged by insurance companies which provide reimbursement for services provided by such therapists, counselors and psychotherapists to the amount of premiums charged by insurance companies which do not provide such direct reimbursement;
- (6) determine whether mandated direct reimbursement for such therapists, counselors and psychotherapists should be continued under the state health care benefits program.
- (b) The Kansas health policy authority shall conduct an analysis to determine if proactive mental health care treatment results in reduced expenditures for future mental and physical health care services. Under such analysis the Kansas health policy authority shall compare expenditures of patients who receive such proactive mental health care treatments with those patients who do not.
- (c) Such studies shall be completed no later than December 31, 2010 and shall be made available to all members of the house committee on insurance, the senate committee on financial institutions and insurance and all parties seeking passage of such legislation no later than the first day of the 2011 Kansas legislative session.
- (d) The insurance department and all other departments, boards, agencies, officers and institutions and subdivisions thereof shall cooperate with the Kansas health policy authority in carrying out all duties prescribed pursuant to this section.
- [New Sec. 3. If individual and group health insurance policies, medical service plans, contracts, hospital service corporation contracts, hospital and medical service corporation contracts, fraternal benefit societies or health maintenance organizations, municipal group-funded pools and the state employee health care benefits plan which are delivered, issued for delivery, amended or renewed on and after July 1, 2010, shall be required to exclude coverage for abortions unless the procedure is necessary to preserve the life of the mother or in the case of rape reported to a

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law enforcement agency or in the case of incest involving a minor and reported to a law enforcement agency, such policies, plans, contracts, organizations, societies and pools shall be required to offer a rider covering abortions for which an additional premium is paid.

[Sec. 4. K.S.A. 2009 Supp. 40-2,103 is hereby amended to read as follows: 40-2,103. The requirements of K.S.A. 40-2,100, 40-2,101, 40-2,102, 40-2,104, 40-2,105, 40-2,114, 40-2,160, 40-2,165 through 40-2,170, inclusive, 40-2250, K.S.A. 2009 Supp. 40-2,105a and 40-2,105b and section 3, and amendments thereto, shall apply to all insurance policies, subscriber contracts or certificates of insurance delivered, renewed or issued for delivery within or outside of this state or used within this state by or for an individual who resides or is employed in this state.

[Sec. 5. K.S.A. 2009 Supp. 40-19c09 is hereby amended to read as follows: 40-19c09. (a) Corporations organized under the nonprofit medical and hospital service corporation act shall be subject to the provisions of the Kansas general corporation code, articles 60 to 74, inclusive, of chapter 17 of the Kansas Statutes Annotated, applicable to nonprofit corporations, to the provisions of K.S.A. 40-214, 40-215, 40-216, 40-218, 40-219, 40-222, 40-223, 40-224, 40-225, 40-226, 40-229, 40-230, 40-231, 40-235, 40-236, 40-237, 40-247, 40-248, 40-249, 40-250, 40-251, 40-252, 40-254, 40-2,100, 40-2,101, 40-2,102, 40-2,103, 40-2,104, 40-2,105, 40-2,116, 40-2,117, 40-2,153, 40-2,154, 40-2,160, 40-2,161, 40-2,163 through 40-2,170, inclusive, 40-2a01 et seq., 40-2111 to 40-2116, inclusive, 40-2215 to 40-2220, inclusive, 40-2221a, 40-2221b, 40-2229, 40-2230, 40-2250, 40-2251, 40-2253, 40-2254, 40-2401 to 40-2421, inclusive, and 40-3301 to 40-3313, inclusive, K.S.A. 2009 Supp. 40-2,105a and 40-2,105b and section 3, and amendments thereto, except as the context otherwise requires, and shall not be subject to any other provisions of the insurance code except as expressly provided in this act.

- [(b) No policy, agreement, contract or certificate issued by a corporation to which this section applies shall contain a provision which excludes, limits or otherwise restricts coverage because medicaid benefits as permitted by title XIX of the social security act of 1965 are or may be available for the same accident or illness.
- [(c) Violation of subsection (b) shall be subject to the penalties prescribed by K.S.A. 40-2407 and 40-2411, and amendments thereto.]

[New Sec. 6. (a) The Kansas health policy authority shall conduct a study on its contract with CVS CareMark, including (1) com-

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petitiveness of rates for prescription drug coverage, (2) policy of permissible substitution of generic drugs and (3) comparison of coverage and costs with other providers.

- [(b) The Kansas health policy authority shall conduct an analysis of the study and shall report the results of the study and such analysis to the house committee on health and human services, the house committee on government efficiency and fiscal oversight and the senate committee on public health and welfare no later than the first day of the 2011 Kansas legislative session.]
- 10 Sec. <u>2.</u> <u>3</u> [7]. K.S.A. 2009 Supp. [40-2,103,] 40-2c01 <u>is</u> [and 40-11 **19c09 are**] hereby repealed.
- Sec. 3. 4 [8]. This act shall take effect and be in force from and after its publication in the statute book.