

COMMITTEE SUBSTITUTE

for

H. B. 2518

(BY DELEGATE(S) WALTERS, PASDON,
HOUSEHOLDER, ELLINGTON, FOLK, KURCABA, FLEISCHAUER,
SPONAUGLE, REYNOLDS, PERDUE AND BLAIR)

(Originating in the Committee on the Judiciary.)
(February 28, 2015)

A BILL to amend the Code of West Virginia, 1931, as amended, by adding thereto a new section, designated §33-16-18, relating to requiring insurers issuing group accident and sickness insurance policies to certain employers to furnish claims loss experience to policyholders upon request of a policyholder; identifying the claims loss experience information to be provided; and providing claims information may not include information prohibited from disclosure by any applicable federal or state law.

Be it enacted by the Legislature of West Virginia:

That the Code of West Virginia, 1931, as amended, be amended by adding thereto a new section, designated §33-16-18, to read as follows:

ARTICLE 16. GROUP ACCIDENT AND SICKNESS INSURANCE.

“§33-16-18. Claims loss experience to be furnished to certain employer group accident and sickness policyholders.

1 (a) In cases of employers providing group healthcare
2 coverage either insured or self-insured to one hundred or more
3 covered employees, retirees, members or enrollees, not including
4 dependents in the State of West Virginia, all third party
5 administrators and insurers shall furnish to the employer within
6 thirty days of the renewal date if requested, the employer’s
7 claims loss experience.

8 (b) All insurers and third party administrators shall provide
9 the information annually to the employer group policyholder if
10 requested. The information shall include, but is not limited to:

11 (1) Earned premiums separated by policy year for at least the
12 last two years, if applicable;

13 (2) For all employees, retirees, members, enrollees and
14 dependants, total paid claims and total incurred claims by month,

15 with medical and prescription drug claims reported separately
16 when requested, inclusive of any high dollar or pooled claims
17 over \$50,000, and including both capitated and noncapitated
18 expenses set forth in the same manner as premiums; and

19 (3) Any amount in excess of the individual pooling or stop
20 loss trigger point applicable to the group.

21 (c) The claims loss experience information may not include
22 any information prohibited from disclosure by any applicable
23 federal law or law of this state.”

