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FUBLIC E	MPLOYEES HEALTH PROGRAM AMENDMENTS
2021 GENERAL SESSION	
	STATE OF UTAH
	Chief Sponsor: Suzanne Harrison
	Senate Sponsor: Michael S. Kennedy
Cosponsors:	Joel K. Briscoe
Stewart E. Barlow	Rosemary Lesser
LONG TITLE	
General Description:	
•	provisions regarding the Public Employees' Health Program.
Highlighted Provisions	
This bill:	•
	e Public Employees' Health Program to establish an out-of-state
provider network through	
	e Public Employees' Health Program to partner with public entities in
other states under certain circumstances; and	
 makes technical changes. 	
Money Appropriated i	•
None	
Other Special Clauses:	
None	
Utah Code Sections Affected:	
AMENDS:	
	st amended by Laws of Utah 2019, Chapter 393
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29	49-20-401. Program Powers and duties.
30	(1) The program shall:
31	(a) act as a self-insurer of employee benefit plans and administer those plans;
32	(b) enter into contracts with private insurers or carriers to underwrite employee benefit
33	plans as considered appropriate by the program;
34	(c) indemnify employee benefit plans or purchase commercial reinsurance as
35	considered appropriate by the program;
36	(d) provide descriptions of all employee benefit plans under this chapter in cooperation
37	with covered employers;
38	(e) process claims for all employee benefit plans under this chapter or enter into
39	contracts, after competitive bids are taken, with other benefit administrators to provide for the
40	administration of the claims process;
41	(f) obtain an annual actuarial review of all health and dental benefit plans and a
42	periodic review of all other employee benefit plans;
43	(g) consult with the covered employers to evaluate employee benefit plans and develop
44	recommendations for benefit changes;
45	(h) annually submit a budget and audited financial statements to the governor and
46	Legislature which includes total projected benefit costs and administrative costs;
47	(i) maintain reserves sufficient to liquidate the unrevealed claims liability and other
48	liabilities of the employee benefit plans as certified by the program's consulting actuary;
49	(j) submit, in advance, its recommended benefit adjustments for state employees to:
50	(i) the Legislature; and
51	(ii) the executive director of the state Department of Human Resource Management;
52	(k) determine benefits and rates, upon approval of the board, for multi-employer risk
53	pools, retiree coverage, and conversion coverage;
54	(l) determine benefits and rates based on the total estimated costs and the employee
55	premium share established by the Legislature, upon approval of the board, for state employees;
56	(m) administer benefits and rates, upon ratification of the board, for single-employer

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57 risk po	ools;
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- (n) request proposals for [provider networks or health and dental benefit plans administered by third-party carriers] one or more out-of-state provider networks and a dental health plan administered by a third-party carrier at least once every three years for the purposes of:
 - (i) stimulating competition for the benefit of covered individuals;
- 63 (ii) establishing better geographical [distribution] coverage of medical care services; 64 and
 - (iii) providing coverage for both active and retired covered individuals;
 - (o) offer proposals which meet the criteria specified in a request for proposals and accepted by the program to active and retired state covered individuals and which may be offered to active and retired covered individuals of other covered employers at the option of the covered employer;
 - (p) perform the same functions established in Subsections (1)(a), (b), (e), and (h) for the Department of Health if the program provides program benefits to children enrolled in the Utah Children's Health Insurance Program created in Title 26, Chapter 40, Utah Children's Health Insurance Act;
 - (q) establish rules and procedures governing the admission of political subdivisions or educational institutions and their employees to the program;
 - (r) contract directly with medical providers to provide services for covered individuals at commercially competitive rates;
 - (s) take additional actions necessary or appropriate to carry out the purposes of this chapter;
 - (t) (i) require state employees and their dependents to participate in the electronic exchange of clinical health records in accordance with Section 26-1-37 unless the enrollee opts out of participation; and
 - (ii) prior to enrolling the state employee, each time the state employee logs onto the program's website, and each time the enrollee receives written enrollment information from the

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85	program, provide notice to the enrollee of the enrollee's participation in the electronic exchange
86	of clinical health records and the option to opt out of participation at any time; and
87	(u) at the request of a procurement unit, as that term is defined in Section 63G-6a-103
88	that administers benefits to program recipients who are not covered by Title 26, Utah Health
89	Code, provide services for:
90	(i) drugs;
91	(ii) medical devices; or
92	(iii) other types of medical care.
93	(2) (a) Funds budgeted and expended shall accrue from rates paid by the covered
94	employers and covered individuals.
95	(b) Administrative costs shall be approved by the board and reported to the governor
96	and the Legislature.
97	(3) The Department of Human Resource Management shall include the benefit
98	adjustments described in Subsection (1)(j) in the total compensation plan recommended to the
99	governor required under Subsection 67-19-12(5)(a).
100	(4) The program may establish a partnership with a public entity in a different state to
101	purchase or share services related to the administration of medical benefits if:
102	(a) the program receives approval for the partnership from the board; and
103	(b) the partnership:
104	(i) creates cost savings for Utah;
105	(ii) does not commingle state funds with funds of the public entity in the other state;
106	<u>and</u>
107	(iii) does not pose a greater actuarial risk to Utah than the program has already
108	assumed.