In The Matter Of:

In The Matter Of Proposed Rule 119

September 24, 2019

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ARKANSAS INSURANCE DEPARTMENT

HEARING

IN THE MATTER OF
PROPOSED RULE 119
"Multiple-Employer Welfare Benefits Plans"

HONORABLE BILL LACY, COMPLIANCE MANAGER AND HEARING OFFICER

HEARING PROCEEDINGS

September 24, 2019

at 10:00 A.M.

APPEARANCES

ON BEHALF OF THE DEPARTMENT:

Mr. Booth Rand Arkansas Insurance Department Managing Attorney, Legal Division 1200 West Third Little Rock, AR 72201

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HEARING OFFICER: My name is William R.

Lacy. I've been appointed the Hearing Officer

for this Rule. I believe it is Rule 119. Are

there any appearances by the Department?

MR. RAND: Yes, Mr. Hearing Officer. This is Booth Rand, Managing Attorney at the Insurance Department. I have Melissa Grisham, who is watching. I'm going to be doing the presentation.

HEARING OFFICER: Okay. Thank you. Is there anyone here, to appear on behalf of anyone else, other than those who might testify?

(No audible responses given.)

HEARING OFFICER: All righty. Mr. Rand, I will turn it over to you.

MR. RAND: Thank you, Mr. Hearing Officer.

We have some exhibits we'd like to admit for

the administrative record, for Rule 119. The

first exhibit, is the Designation of Hearing

Officer. The Commissioner has designated you

as Hearing Officer, dated September 24, 2019.

That is Exhibit 1. Exhibit 2, is a copy of the

filed Rule with the Bureau of Legislative
Research. Exhibit 3, is a copy of the Arkansas
Insurance Department's Notice of Public
Hearing. It is the cover letter. We sent it
out to interested parties, and use that to
provide information, including the Rule, to
people who want to get notice of our rules and
regulations.

Exhibit 4, is the cover letter, to the Arkansas Democrat Gazette, dated August 13, 2019, and in Exhibit 4 -- Exhibit 4 contains the newspaper notice, providing notice to the public, about the date of today's hearing, and the nature of the hearing. It provides info to the public to access and review the rule, and to make public comments, and submit those to us.

As you know, Mr. Hearing officer, under the APA, we're required to provide public notice for our rules, to run three consecutive days.

In Exhibit 4, there is a receipt or billing information, from the Arkansas Democrat

Gazette, showing that we had ran, on August

15th, August 16th, and August 17th, a copy of the actual language in Exhibit 4, describing

the date of today's hearing, September 24, 2019, at 10 AM, to discuss Rule 119, Multiple Employer Welfare Benefit Plans.

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Exhibit 5 is -- as you know, Mr. Hearing Officer, we distribute through electronic information, for those who have signed up to receive copies of our rules. Exhibit 5 is a copy of the notice, that was sent out by the legal division, which included a copy of the link that people can access, to review the Rule. That is typically something we do after we file the BLR.

Exhibit 6, is the cover letter, that we sent to Donna Davis at the Arkansas Legislative Council. And in Exhibit 6, or after Exhibit 6, we submitted to BLR, and the Legislative Council, a copy of all their required forms for promulgation of the Rule. Exhibit 7 is their Legislative Council questionnaire, and financial impact statement. Exhibit 8 is the economic impact statement. Exhibit 9, is the rule summary.

Exhibit 10, is a courtesy copy letter to the Secretary of State indicating we're filing this Rule. Exhibit 11, is another courtesy 1 2

copy sent to the Attorney General's Office, providing them with a copy of the rule, for comments that the AG's office might have to our Rule. Exhibit 12, is another filing that we made with various state agencies, including Arkansas State Library, related to the Rule.

Exhibit 13, is a letter we sent to the Arkansas Economic Development Commission, for comments that they may make. I think you and I have talked a bit about this. On Exhibit 13, there is a typographical error in the body of the letter referring to this being a Pharmacy Benefits Managers Regulation, although that's not what was submitted to ADC. We have corrected that, sent a letter to Ms. Brown at the ADC for comments that she might want to make, related to the Rule. I have not received any.

Exhibit 14, is essentially a folder, in which we collect public comments made to the Rule, during the public comments phase. We had received three comments, I believe. One is from Mr. Mark Meadors, with BXS Insurance, in favor of the rule. I'm not going to read this letter. He's here, if he wants to testify.

It's in favor of the rule, essentially. We also received a letter from Arkansas Blue Cross and Blue Shield, largely in favor of the Rule. They are here to make comments if they want to. The other comment, is from an organization led by Josh Archambault. Looks like it's a national organization.

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That OSP, they've made several comments, and suggestions, and fixes, and edits.

Unfortunately, I got this about 9 o'clock this morning, so I have not had a chance to review each of these suggested changes, or edits. OSI is largely in favor of the Rule that we have proposed, Mr. Hearing Officer. They do make several suggestions. Just looking at some of those quickly, we agree with, and we'll certainly advise the Commissioner to adopt -- some of them we have some questions about, but again, I just got this about 8:45. Something the Commissioner will review, as well as the other comments. Those are all the comments that I have received, relative to the Rule.

Exhibit 15 is a copy of edits that I have made to the filed Rule. And I will go over those, when I present the Rule, or after I

present the Rule. I have it in markup, and I will explain what I have changed. Exhibit 16, are all the forms that we had to create for new applications. There are approximately four, and they are consistent with the language of the requirements of the Rule, and I want to thank our staff for putting that together this week. And so, Exhibit 16, will be exhibits made with the Rule, for MEWA applicants to fill out when they file their Certificates of Authority.

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Another exhibit I'd like to enter into the record, is the Governor's Office authorization dated July 22nd from Andres Rose, who approved the Department's proposed rule for MEWA. I'd like to go ahead and make that an exhibit, and add that to the record. At this time, those are all the exhibits I would like to admit, and move that they be admitted into the administrative record.

HEARING OFFICER: Okay. Without objection, they will be admitted, with the understanding that on Exhibit 12 there'll be a slightly different letter, but the original letter under 12 was sent out in plenty enough time, with a

copy of the Rule, so this is just to clear up the record on that. And then, on 13, you have some exhibits that weren't in this book. So they will all be admitted.

(EXHIBIT NOS. 1-17 ADMITTED)

MR. RAND: Thank you. I'll explain the Rule. So a little background, we've been working on this rule for about a year and a half. The Arkansas Insurance Code pertaining to self-funded multiple employer welfare arrangement, in Arkansas Code 23-92-101, has approximately, since about 1985-1986, permitted the Insurance Commissioner, or actually required the Insurance Commissioner to issue a Rule to establish requirements for self-funded MEWAs.

Unfortunately, we have never issued a rule to explain to self-funded employers, how to form a MEWA on a self-funded basis. And I think over the last 10 years, approximately two or three times a year, I get interested employers, and brokers, wanting to form a self-funded MEWA arrangement. And when they look at 23-92-101 they will see that that statute requires the Commissioner to adopt rules,

relating to MEWA trusts and MEWA arrangements that are not fully insured. And the authority to issue a rule, as I indicated in the rule, is very broad. The Commissioner is given authority to issue rules related to forms, rates, fees, and so on, reporting requirements, stop loss insurance. All the things that we ultimately drafted in this rule. The statute certainly has always historically authorized the Commissioner to implement. He has not, but whoever the Commissioners have been over the last 20 or 25 years.

So it's been frustrating for the Department that for businesses that want to self fund, they were really given no instructions on how to do so through a rule. And that has gone on for quite some time. The only alternative self-funded plans have, in the absence of the rule, is essentially to get a Certificate of Authority, equivalent to an HMO, which is just cost prohibitive.

So we decided last year, or a year and a half ago, Ryan, James and I, and others, to look around the country, and look at what other states are adopting for self-funded MEWA

administrations in requirements and financial solvency requirements. How they do it. And we literally looked at every state version of MEWA laws that they had. Going on at this time, President Trump was promoting the development of association health plans. So it was really coincidental, with us not really intending to be working in lockstep and jump with his administration. It just so happened, that we were already working on a MEWA rule.

So we looked around the country, Mel Henderson, and Dave Dylan, looked at what other states were doing. Our concern was that we established rule requirements, that ensure, or hopefully ensure that these are financially solvent, and provide financial requirements that will protect the public and medical providers, to make sure that we don't have happen, what happened with MEWAs in the mid-80s. Many of those failed across the country.

So our goal was to come up with the best financial standards, in a chassis, if you will, for the self-funded employer plans to construct, and do it in a way, where they're protected, and hopefully everybody gets

financially safe, self-funded MEWA plan. 1 are not protected by the guarantee fund. 2 3 are not going to be protected by the guarantee fund, after we publish this rule, or promulgate 4 5 it, so it's imperative that we develop these

requirements that we have.

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So we looked around, and we liked the Texas MEWA requirements. The proposed rule, Mr. Hearing Officer, is essentially adopting what Texas has in their requirements, for MEWAs in It is our understanding, that the MEWA Texas. activity in Texas is very active. reached out to various law firms and regulators about these requirements. Essentially what Texas requires, and what we propose to require is cash reserves, and approximately 20 percent projected contributions. There's 120 percent stop loss in the aggregate in individuals. There are financial bonds, fidelity bond, contributions was adequate.

There also is a required independent actuarial opinion that has to be submitted and reviewed by the Insurance Department, about the proposed plan. So we'regoing to have an

actuary that's to certify that the plan is

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going to be sound. And again, the stop loss requirements we believe are more than adequate, 125 percent of aggregate specific claims.

There is a host of financial protection, reporting requirements, including submitting annual statements after each year end. Again, for consumer protection, the MEWAs are prohibited from discriminating on employees due to health factors. And more importantly than anything, I think one of the most important requirements that we have, is that the MEWA that we authorize here, will be subject to the same medical mandates for coverage, and medical laws apply to medical providers, just like any other large group fully insured plans. know that the medical providers and hospital associations have been leery about these, being able to avoid major medical mandates, and laws that the fully insured plans have to comply with, but this rule makes them comply with those.

So there are a variety of other consumer protections, but most of this is essentially financial. The proposed rule, when we filed it, Mr. Hearing Officer -- and I'm going to go

through the changes in Exhibit -- well the last exhibit. Changes that I've made or edits in Exhibit 15, which are changes that I made -- that we had to make, during the comment period.

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And let's just look at the one I want to talk about first. The effective date that we proposed was 1/1/2020. And I had suggested to the Commissioner to change that, in these edits, to say, "The rules effective after review and approval by the Arkansas Legislative Council, 10 days after filing of the approval, with the Arkansas Secretary of State." We had to strike out January 1. The reason why, is we believe that we may be able to get this rule out, approximately, where it could go into effect, in late November, or early December, for any MEWA who is interested in trying to get 1/1 or get an earlier application in. trying to speed this up as fast as I can, but I can't control, ultimately, when the exact date is.

We certainly want to make it a little faster than 1/1, but it's not going to be -- probably it's going to be early December. We are not going to be able to get on the

Legislative calendar for review, next month, so we'll have to wait until November, to get that review. So it's not a huge improvement in time, but it's about a month faster with this proposed language.

The other proposed edit in that exhibit -in the rule, are on page 4 and 5. And in that
section 5, I have stricken what was proposed,
on forms. All I did there was just make that
consistent with the forms that we adopted.
There's nothing controversial, or significant
about that.

The other proposed change, the medical society and medical providers, on page 13, of Exhibit 15, the -- and I just explained this. We stated "Multiple employer welfare arrangements shall provide medical benefits services and network rights." And I added the phrase, "and comply with all the laws and rules as are mandated upon fully insured large group plans." The question we got was without that addition, would these entities have to comply with our prior authorization laws, or laws that aren't necessarily requiring a coverage of a medical benefit, but which are a medical

provider mandated sort of protocol. And the answer is "yes". We want these plans to be subject to the exact same requirements, that apply to medical providers, that large group plans have. So I think that has satisfied the medical society. Although, they're here. They can say whether it has or not.

And so those are the proposed changes that we got, and that's an explanation of the rule, and I'll be glad to answer any questions that you might have.

HEARING OFFICER: I have no questions. Does anyone have any public statements they'd like to make?

(No audible responses given.)

HEARING OFFICER: Mr. Rand, do you have anything else?

MR. RAND: I'm waiting on Pat Brown, at the Arkansas Economic Development Commission, to call me back on her review of the proposed rule. I think she should be emailing me, or contacting me at any moment. So I would just suggest that we keep the record open, until close of business today. I'd like to visit with her, and see if she has any concerns. I

would just suggest that we keep it open, just in case they've got some issues with it, although I don't think they would.

HEARING OFFICER: Okay. The record then

HEARING OFFICER: Okay. The record then will close today at 4:30 PM. If there's nothing else, then this hearing is adjourned. Thank you.

(WHEREUPON, the proceedings were concluded in this matter at 2:33 p.m.)

CERTIFICATE

STATE OF ARKANSAS))ss COUNTY OF PULASKI)

I, Tiffanie Harrison, CCR, Certified Stenomask Reporter before whom the foregoing testimony was taken, do hereby certify that the witnesses were duly sworn by me; that the testimony of said witnesses were taken by me and was thereafter reduced to typewritten form under my supervision; that the hearing transcript is a true and correct record of the testimony given by said witnesses; that I am neither counsel for, related to, nor employed by the parties to the action in which this hearing was held, and further, that I am not a relative or employee of any attorney or counsel employed by the parties hereto, nor financially interested in the outcome of this action.

I FURTHER CERTIFY, that I have no contract with the parties within this action that affects or has a substantial tendency to affect impartiality, that requires me to relinquish control of an original hearing transcript or copies of the transcript before it is certified and delivered to the custodial attorney, or that requires me to provide any service not made available to all parties to the action.

WITNESS MY HAND AND SEAL this 27th day of September, 2019.

TIFFANIE N. HARRISON

Arkansas State Supreme Court Certified Court Reporter #757

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