

2012 Kansas Statutes

40-4704. Same; health partnership; duties. The health partnership shall develop and offer two or more health benefit plans to small employers. In any health benefit plan developed under this act, any carrier may contract for coverage within the scope of this act notwithstanding any mandated coverages otherwise required by state law. Except for preventative and health screening services, the provisions of K.S.A. 40-2,100 to 40-2,105, inclusive, 40-2114 and subsection (i) of 40-2209 and 40-2229 and 40-2230, and 40-2,163, 40-2,164, 40-2,165 and 40-2,166, and amendments thereto, shall not be mandatory with respect to any health benefit plan developed under this act. In performing these duties, the health partnership shall:

- (a) Develop and offer two or more lower-cost benefit plans such that:
 - (1) Each health benefit plan is consistent with any criteria established by the health partnership;
 - (2) each health benefit plan shall be offered by all participating carriers except that no participating carrier shall be required to offer any health benefit plan, or portion thereof, which such participating carrier is not licensed or authorized to offer in this state;
 - (3) no participating carrier shall offer any health benefit plan developed under this act to any small employer unless such small employer is covered through the health partnership.
- (b) Develop and make available one or more supplemental health benefit plans or one or more other benefit options so that the total package of health benefits available to all children eligible for the state children's health insurance program established pursuant to K.S.A. 68-2001 et seq., and amendments thereto, meets, at a minimum, standards established by the federal health insurance program.
- (c) Offer coverage to any qualifying small employer.
- (d) Offer eligible employees of participating small employers a choice of participating carriers where feasible.
- (e) (1) Include centralized and consolidated enrollment, billing and customer service functions;
(2) use one standard enrollment form for all participating carriers; and
(3) submit one consolidated bill to the small employer.
- (f) Issue or cause to be issued a request for proposals and contract with a qualified vendor for any administrative or other service not performed by the health committee or provided to the health committee under subsection (b) of K.S.A. 40-4702, and amendments thereto.
- (g) Issue a request for proposals and selectively contract with carriers.
- (h) Establish conditions of participation for small employers that conform with K.S.A. 40-2209b et seq., and amendments thereto, and the health insurance portability and accountability act of 1996 (Public Law 104-191).
- (i) Enroll small employers and their eligible employees and dependents in health benefit plans developed under this act.
- (j) Bill and collect premiums from participating small employers including any share of the premium paid by such small employer's enrolled employees.
- (k) Remit funds collected under subsection (h) to the appropriate contracted carriers.
- (l) Provide that each low-or-modest wage employee shall be permitted to enroll in such employee's choice of participating carrier where available.
- (m) Develop premium rating policies for small employers.
 - (1) In consultation with the health committee, the health partnership shall ensure, to the maximum extent possible, that the combined effect of the premium rating and subsidy policies is that subsidized eligible employees and the dependents of such subsidized eligible employees can afford coverage.
 - (2) Any rating policy developed under this subsection may vary with respect to subsidy status of eligible employees and the dependents of such eligible employees.
- (n) Be authorized to contract for additional group vision, dental and life insurance plans, and other limited insurance products.
- (o) Take whatever action is necessary to assure that any eligible employee or dependent of such eligible employee who receives health benefit coverage through the health partnership and who is eligible for the state medical assistance program shall remain eligible to participate in the state health insurance premium payment program.
- (p) Coordinate with the department of social and rehabilitation services to assure that any funds available for the coverage of infants and pregnant women under the state medical assistance program are also available for the benefit of eligible infants and pregnant women who receive health benefit coverage through the health partnership as an eligible employee or dependent of such eligible employee.
- (q) Work with the department of social and rehabilitation services office of medical policy and medicaid to develop a single employee application that may be used by the health plan and the medicaid and state children's health insurance program to determine eligibility.
- (r) Screen employee applications for subsidy eligibility and dependent children for medicaid and state children's health insurance program premium support eligibility.

History: L. 2000, ch. 147, § 50; L. 2002, ch. 112, § 4; L. 2004, ch. 159, § 16; July 1.