

## LEGISLATIVE BILL 319

Approved by the Governor April 17, 1987

Introduced by Wesely, 26; Lynch, 13

AN ACT relating to the Comprehensive Health Insurance Pool Act; to amend sections 44-4216 and 44-4222, Revised Statutes Supplement, 1986; to change membership provisions for the board of directors; to delete a limitation on certain premiums; and to repeal the original sections.  
Be it enacted by the people of the State of Nebraska,

Section 1. That section 44-4216, Revised Statutes Supplement, 1986, be amended to read as follows:

44-4216. There is hereby created a nonprofit entity to be known as the Comprehensive Health Insurance Pool. All insurers authorized to issue or provide health insurance in this state on or after September 6, 1985, shall be members of the pool. The pool shall be managed by a board of directors composed of nine directors. The board shall at all times, to the extent possible, include at least one representative of a two representatives of domestic insurance company companies, one representative of a domestic hospital service corporation plan, one representative of a health maintenance organization, and one representative of the general public. The director shall adopt and promulgate rules and regulations to establish eligibility and selection criteria for the representative of the general public.

Sec. 2. That section 44-4222, Revised Statutes Supplement, 1986, be amended to read as follows:

44-4222. (1) A person shall not be eligible for initial or continued coverage under the pool if:

(a) He or she is eligible for Medicare benefits or medical assistance established pursuant to sections 68-1018 to 68-1025 or is a resident or inmate of a correctional facility;

(b) He or she has terminated coverage in the pool, unless twelve months have elapsed since such termination;

(c) The pool has paid out five hundred thousand dollars in claims for the person; or

(d) He or she is no longer a resident of

Nebraska.

(2) Coverage under the Comprehensive Health Insurance Pool Act shall terminate for any person on the date the person becomes ineligible under subsection (1) of this section.

(3) Any person whose health insurance coverage is involuntarily terminated for any reasons other than nonpayment of premium and who is not eligible for a conversion policy may apply for coverage under the Comprehensive Health Insurance Pool Act, but shall submit proof of eligibility pursuant to section 44-4221. If such proof is supplied and if coverage is applied for under the act within sixty days after the involuntary termination and if premiums are paid to the pool for the entire coverage period, the effective date of the coverage shall be the day following termination of the previous coverage. Any waiting period or preexisting condition exclusions provided for under the pool shall be waived to the extent similar exclusions, if any, under the prior health insurance coverage have been satisfied. The board may assess an additional premium ~~of up to ten per cent~~ for coverage provided under the act in this manner, notwithstanding the premium limitations stated in section 44-4227.

Sec. 3. That original sections 44-4216 and 44-4222, Revised Statutes Supplement, 1986, are repealed.