

LEGISLATURE OF NEBRASKA  
ONE HUNDREDTH LEGISLATURE  
SECOND SESSION  
**LEGISLATIVE BILL 1002**

Introduced by Pahls, 31.

Read first time January 16, 2008

Committee: Banking, Commerce and Insurance

A BILL

1 FOR AN ACT relating to insurance; to require disclosure of  
2 information by issuers of group health benefit plans  
3 as prescribed; to provide a duty for the Revisor of  
4 Statutes.

5 Be it enacted by the people of the State of Nebraska,

1           Section 1. (1) (a) An insurer or entity issuing a policy  
2 or contract providing group health benefit plan coverages to a  
3 group of fifty-one or more eligible employees shall provide to  
4 the policyholder, contract holder, or sponsor of the group health  
5 benefit plan or to an insurance producer authorized by and acting  
6 on behalf of the policyholder, contract holder, or sponsor of  
7 the group health benefit plan, upon request by the policyholder,  
8 contract holder, or sponsor of the group health benefit plan or the  
9 insurance producer, annually, but not more than three months prior  
10 to the policy or contract renewal date, the total amount of actual  
11 claims identified as paid or incurred and paid, and the total  
12 amount of premiums by line coverage. If premiums are not billed for  
13 each line of coverage, it is not necessary to artificially separate  
14 premiums for each line of coverage and total premiums for the time  
15 period covered by the information may be provided.

16           (b) The information required by this section shall be  
17 provided for the immediately preceding twelve months.

18           (c) The information required by this section shall not  
19 disclose any confidential information or otherwise disclose the  
20 identity of an individual insured, subscriber, or enrollee who has  
21 submitted a claim within the time period covered by the information  
22 provided.

23           (2) For purposes of this section:

24           (a) Insurer or entity issuing a policy or contract  
25 providing group health benefit coverages includes:

1           (i) The issuer of any group sickness and accident  
2 insurance policy, group health maintenance organization contract,  
3 or group subscriber contract delivered, issued for delivery, or  
4 renewed in this state;

5           (ii) Any self-funded employee benefit plan to the extent  
6 not preempted by federal law;

7           (iii) Any multiple employer welfare arrangement subject  
8 to the Multiple Employer Welfare Arrangement Act; and

9           (iv) Any group health policy, group health contract, or  
10 group health plan established for employees of the state or any of  
11 its political subdivisions; and

12           (b) Line of coverage includes medical, prescription drug  
13 card program, dental, vision, long-term disability, and short-term  
14 disability.

15           (3) A violation of this section shall be subject to the  
16 Unfair Insurance Trade Practices Act.

17           Sec. 2. The Revisor of Statutes shall assign section 1 of  
18 this act to Chapter 44, article 3.