

Rep. Jay Hoffman

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Filed: 4/24/2017

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LRB100 04725 SMS 25400 a

AMENDMENT TO HOUSE BILL 2703

AMENDMENT NO. _____. Amend House Bill 2703 by replacing everything after the enacting clause with the following:

"Section 5. The Intergovernmental Cooperation Act is amended by changing Section 6 and by adding Section 6.5 as follows:

7 (5 ILCS 220/6) (from Ch. 127, par. 746)

Sec. 6. Joint self-insurance. An intergovernmental contract may, among other undertakings, authorize public agencies to jointly self-insure and authorize each public agency member of the contract to utilize its funds to pay to a joint insurance pool its costs and reserves to protect, wholly or partially, itself or any public agency member of the contract against liability or loss in the designated insurable area.

A joint insurance pool shall have an annual audit performed

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by an independent certified public accountant and shall file an annual audited financial report with the Director of Insurance no later than 150 days after the end of the pool's immediately preceding fiscal year. The Director of Insurance shall issue rules necessary to implement this audit and report requirement. The rule shall establish the due date for filing the initial annual audited financial report. Within 30 days after January 1, 1991, and within 30 days after each January 1 thereafter, public agencies that are jointly self-insured to protect against liability under the Workers' Compensation Act and the Workers' Occupational Diseases Act shall file with the Illinois Workers' Compensation Commission a report indicating an election to self-insure.

The joint insurance pool shall also annually file with the Director a statement of actuarial opinion that conforms to the Actuarial Standards of Practice issued by the Actuarial Standards Board. All statements of actuarial opinion shall be issued by an independent actuary who is an associate or fellow of the Casualty Actuarial Society or of the Society of Actuaries. The statement of actuarial opinion shall include a statement that the pool's reserves are calculated in accordance with sound loss-reserving standards and adequate for the payment of claims. This opinion shall be filed no later than 150 days after the end of each fiscal year. The joint insurance pool shall be exempt from filing a statement of actuarial opinion by an independent actuary who is an associate or fellow

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of the Casualty Actuarial Society or of the Society of Actuaries that the joint insurance pool's reserves are in accordance with sound loss-reserving standards and payment of claims for the primary level of coverage if the joint insurance pool files with the Director, by the reporting deadline, a statement of actuarial opinion from the provider of the joint pool's aggregate coverage, reinsurance, or other similar excess insurance coverage. Any statement of actuarial opinion must be prepared by an actuary who satisfies the qualification standards set forth by the American Academy of Actuaries to issue the opinion in the particular area of actuarial practice.

The Director may assess penalties against a joint insurance pool that fails to comply with the auditing, statement of actuarial opinion, and examination requirements of this Section in an amount equal to \$500 per day for each violation, up to a maximum of \$10,000 for each violation. The Director (or his or her staff) or a Director-selected independent auditor (or actuarial firm) that is not owned or affiliated with an insurance brokerage firm, insurance company, or other insurance industry affiliated entity may examine, as often as the Director deems advisable, the affairs, transactions, accounts, records, and assets and liabilities of each joint insurance pool that fails to comply with this Section. The joint insurance pool shall cooperate fully with the Director's representatives in all evaluations and audits of the joint insurance pool and resolve issues raised in those evaluations

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and audits. The failure to resolve those issues may constitute a violation of this Section, and may, after notice and an opportunity to be heard, result in the imposition of penalties pursuant to this Section. No sanctions under this Section may become effective until 30 days after the date that a notice of sanctions is delivered by registered or certified mail to the joint insurance pool. The Director shall have the authority to extend the time for filing any statement by any joint insurance pool for reasons that he or she considers good and sufficient.

Notwithstanding any other provision of law, annual audited financial reports and statements of actuarial opinion filed under this Section with the Director of Insurance shall be available to the public for inspection and copying under the Freedom of Information Act.

If a joint insurance pool requires a member to submit written notice in order for the member to withdraw from a qualified pool, then the period in which the member must provide the written notice cannot be greater than 120 days, except that this requirement applies only to joint insurance pool agreements entered into, modified, or renewed on or after the effective date of this amendatory Act of the 98th General Assembly.

For purposes of this Section, "public agency member" means any public agency defined or created under this Act, any local public entity as defined in Section 1-206 of the Local Governmental and Governmental Employees Tort Immunity Act, and

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any public agency, authority, instrumentality, council, board, service region, district, unit, bureau, or, commission, or any municipal corporation, college, or university, whether corporate or otherwise, and any other local governmental body or similar entity that is presently existing or created after the effective date of this amendatory Act of the 92nd General Assembly, whether or not specified in this Section. Only public agency members with tax receipts, tax revenues, taxing authority, or other resources sufficient to pay costs and to service debt related to intergovernmental activities described in this Section, or public agency members created by or as part of a public agency with these powers, may enter into contracts or otherwise associate among themselves as permitted in this Section.

joint insurance pool or other intergovernmental No cooperative offering health insurance shall interfere with the statutory obligation of any public agency member to bargain over or to reach agreement with a labor organization over a mandatory subject of collective bargaining as those terms are used in the Illinois Public Labor Relations Act. No intergovernmental contract of insurance offering insurance shall limit the rights or obligations of public agency members to engage in collective bargaining, and it shall insurance pool unlawful for a joint or intergovernmental cooperative offering health insurance to discriminate against public agency members or otherwise

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1 against members for limiting retaliate such their

participation in a joint insurance pool as a result of a

3 collective bargaining agreement.

> It shall not be considered a violation of this Section for an intergovernmental contract of insurance relating to health insurance coverage, life insurance coverage, or both to permit the pool or cooperative, if a member withdraws employees or officers into a union-sponsored program, to re-price the costs of benefits provided to the continuing employees or officers based upon the same underwriting criteria used by that pool or cooperative in the normal course of its business, but no member shall be expelled from a pool or cooperative if the continuing employees or officers meet the general criteria required of other members.

- 15 (Source: P.A. 98-504, eff. 1-1-14; 98-969, eff. 1-1-15.)
- (5 ILCS 220/6.5 new) 16
- 17 Sec. 6.5. Joint self-insurance; workers' compensation.
- 18 (a) A joint insurance pool or other intergovernmental 19 cooperative formed under Section 6 of this Act offering workers' compensation insurance coverage shall post on its 20 21 website the bylaws of the pool or cooperative, articles of
- incorporation, and the compensation contract of the 22
- 23 administrator, if any.
- 24 (b) Beginning January 1, 2018, each joint insurance pool or other intergovernmental cooperative formed under this Act 25

1	offering workers' compensation insurance coverage shall file a
2	report concerning its workers' compensation insurance coverage
3	during the immediately preceding fiscal year with the Director
4	of Insurance at the time it files its annual audited financial
5	report under Section 6 of this Act. The report shall be posted
6	on the pool or cooperative's website. The report shall include,
7	at a minimum, the following:
8	(1) the number and identity of all members
9	participating in the pool or cooperative's workers'
10	compensation coverage;
11	(2) the number of claims opened;
12	(3) the number of reported medical only claims;
13	(4) the number of contested claims;
14	(5) the number of claims for which the employee has
15	attorney representation;
16	(6) the number of claims with lost time and the number
17	of claims for which temporary total disability was paid;
18	(7) the number of claim adjusters employed to adjust
19	workers' compensation claims;
20	(8) the number of claims for which temporary total
21	disability was not paid within 14 days from the first full
22	day off, regardless of reason;
23	(9) the number of medical bills paid 60 days or later
24	from date of service and the average days paid on those
25	paid after 60 days for the previous calendar year;
26	(10) the gross contributions collected from its

Τ	members for workers' compensation insurance coverage;
2	(11) the contribution rate paid by each member;
3	(12) the total amount billed to members for bill
4	review;
5	(13) the total amount charged to employers for any and
6	all managed care fees;
7	(14) the total amount paid for independent medical
8	exams;
9	(15) the total amount spent on in-house utilization
10	review;
11	(16) the total amount paid for outside utilization
12	review;
13	(17) the total fees paid to the administrator of the
14	<pre>pool or cooperative;</pre>
15	(18) the total amount of indemnity payments made;
16	(19) the total amount of medical payments made;
17	(20) the growth of total paid indemnity benefits by
18	temporary total disability, scheduled and non-scheduled
19	permanent partial disability, and total disability;
20	(21) the number of injured workers receiving wage loss
21	differential awards and the average wage loss differential
22	award payout;
23	(22) the aggregate growth of medical benefit payouts;
24	<u>and</u>
25	(23) the total compensation paid to each member of the
26	pool or cooperative's governing board.

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1		Notwithst	anding a	ny oth	er p	rovision	of law,	the	Depa	rtment
2	of	Insurance	shall	make	the	report	availab	le f	or	public
3	ins	pection or	copying	under	the	Freedom	of Inform	matic	on Ac	<u>t.</u>

- (c) Any third-party, business entity providing administration of the workers' compensation joint pool or cooperative shall be licensed and subject to the same regulation as administrators under Article V ¾ of the Illinois Insurance Code.
- 9 (d) The Department of Insurance may adopt rules necessary 10 to implement this Section.
- Section 99. Effective date. This Act takes effect upon 11 becoming law.". 12