17B:27C-1

LEGISLATIVE HISTORY CHECKLIST

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LAWS OF: CHAPTER: 2001 352

NJSA: 17B:27C-1 (Self funded multiple employer welfare arrangements)

BILL NO: S2458 (Substituted for A3943)

SPONSOR(S): Cardinale

DATE INTRODUCED: June 25, 2001 **COMMITTEE: ASSEMBLY:**

> SENATE: Commerce

AMENDED DURING PASSAGE: Yes

DATE OF PASSAGE: December 17, 2001 ASSEMBLY:

December 17, 2001 SENATE:

DATE OF APPROVAL: January 6, 2002 FOLLOWING ARE ATTACHED IF AVAILABLE: FINAL TEXT OF BILL (2nd reprint enacted)

(Amendments during passage denoted by superscript numbers)

S2458

A3943

SPONSORS STATEMENT: (Begins on page 5 of original bill) Yes **COMMITTEE STATEMENT:** ASSEMBLY: No SENATE: Yes FLOOR AMENDMENT STATEMENTS: Yes No

LEGISLATIVE FISCAL ESTIMATE:

SPONSORS STATEMENT: (Begins on page 4 of original bill) Yes

Bill and Sponsors Statement identical to S2458

COMMITTEE STATEMENT: ASSEMBLY: Yes SENATE: No FLOOR AMENDMENT STATEMENTS: No **LEGISLATIVE FISCAL ESTIMATE:** Yes **VETO MESSAGE:** No **GOVERNOR'S PRESS RELEASE ON SIGNING:** No

FOLLOWING WERE PRINTED:

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REPORTS: No **HEARINGS:** No **NEWSPAPER ARTICLES:** No

SENATE, No. 2458

STATE OF NEW JERSEY

209th LEGISLATURE

INTRODUCED JUNE 25, 2001

Sponsored by: Senator GERALD CARDINALE District 39 (Bergen)

SYNOPSIS

Regulates self-funded multiple employer welfare arrangements.

CURRENT VERSION OF TEXT

As introduced.



S2458 CARDINALE

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arrangements.

46 within the following 75 days.

of New Jersey:

AN ACT concerning self-funded multiple employer welfare

Be It Enacted by the Senate and General Assembly of the State

6	
7	1. This act shall be known and may be cited as the "Self-Funded
8	Multiple Welfare Arrangement Regulation Act."
9	
10	2. The purposes of this act are to:
11	a. provide for the registration of self-funded or partially self-funded
12	multiple employer welfare arrangements;
13	b. regulate self-funded or partially self-funded multiple employer
14	welfare arrangements in order to ensure the financial integrity of the
15	arrangements;
16	c. provide reporting requirements for self-funded or partially self-
17	funded multiple employer welfare arrangements; and
18	d. provide for sanctions against self-funded or partially self-funded
19	multiple employer welfare arrangements that do not comply with the
20	provisions of this act.
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22	3. For purposes of this act:
23	"Commissioner" means the Commissioner of Banking and
24	Insurance.
25	"Employee welfare benefit plan" has the meaning set forth in
26	subsection (1) of 29 U.S.C. s.1002.
27	"Multiple employer welfare arrangement" has the meaning set forth
28	in subsection (40) of 29 U.S.C. s.1002.
29	"Self-funded multiple employer welfare arrangement" means a self-
30	funded or partially self-funded multiple employer welfare arrangement
31	that has two or more employers who each have two or more
32	employees and that has one or more of the employer members either
33	domiciled in this State or its principal headquarters or principal
34	administrative office located in this State.
35	
36	4. A self-funded multiple employer welfare arrangement shall
37	register annually with the commissioner and pay a registration fee
38	established by the commissioner which shall not exceed \$1,000.
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40	5. A self-funded multiple employer welfare arrangement shall
41	maintain a cash reserve for excess loss in an amount established by a
42	qualified actuary as being adequate to provide for any excess loss that
43	may reasonably be expected to occur, net of stop-loss coverage or
44	excess risk insurance, but in no event less than benefits anticipated to
45	be payable by the self-funded multiple employer welfare arrangement

- 6. Each self-funded multiple employer welfare arrangement shall file all of the following with the commissioner:
- 3 a. No later than May 15th of each calendar year or four months and 4 15 days after the end of each fiscal year of the self-funded multiple employer welfare arrangement, financial statements audited by a 5 6 certified public accountant and on forms prescribed by the 7 commissioner, and an actuarial opinion rendered by a qualified 8 actuary. The opinion shall be based on standards adopted from time 9 to time by the Actuarial Standards Board and on any additional 10 standards that the commissioner may prescribe by regulation. For purposes of this section and section 5 of this act, "qualified actuary" 11 12 means a member in good standing of the American Academy of 13 Actuaries who meets the requirements set forth in regulations of the
 - b. Within 60 days after the end of each fiscal quarter, unaudited financial statements on forms prescribed by the commissioner, affirmed by an appropriate officer or agent of the self-funded multiple employer welfare arrangement.
 - c. Within 60 days after the end of each fiscal quarter, a report on forms prescribed by the commissioner certifying that the self-funded multiple employer welfare arrangement maintains cash or liquid assets in a claim reserve account sufficient to meet the requirements of section 5 of this act.

7. The following notice shall be provided to employers and employees who obtain coverage from a self-funded multiple employer welfare arrangement:

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commissioner.

31 THE SELF-FUNDED MULTIPLE EMPLOYER WELFARE ARRANGEMENT IS NOT AN INSURANCE COMPANY AND 32 DOES NOT PARTICIPATE IN ANY OF THE GUARANTEE 33 FUNDS CREATED BY NEW JERSEY LAW. THESE FUNDS 34 WILL NOT PAY YOUR CLAIMS OR PROTECT YOUR ASSETS 35 A SELF-FUNDED MULTIPLE EMPLOYER WELFARE 36 ARRANGEMENT BECOMES INSOLVENT AND IS UNABLE TO 37 38 MAKE PAYMENTS AS PROMISED.

- THE HEALTH CARE BENEFITS THAT YOU HAVE
 PURCHASED OR ARE APPLYING TO PURCHASE ARE BEING
 ISSUED BY A SELF-FUNDED MULTIPLE EMPLOYER
 WELFARE ARRANGEMENT THAT IS REGISTERED BY THE
 NEW JERSEY DEPARTMENT OF BANKING AND INSURANCE.
 FOR ADDITIONAL INFORMATION ABOUT THE MULTIPLE
 EMPLOYER WELFARE ARRANGEMENT YOU SHOULD ASK
- 46 QUESTIONS OF YOUR TRUST ADMINISTRATOR OR YOU

S2458 CARDINALE

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1	MAY CONTACT THE NEW JERSEY DEPARTMENT OF					
2	BANKING AND INSURANCE AT(this blank					
3	should include the department's current "800" consumer service					
4	telephone number).					
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6	8. Except as provided by this act, the insurance laws of this State					
7	do not apply to the operation of self-funded multiple employer welfare					
8	arrangements. A self-funded multiple employer welfare arrangement					
9	is not an insurance company or insurer under the laws of this State.					
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11	9. a. The commissioner may, upon reasonable notice, conduct an					
12	examination of the loss reserves of a self-funded multiple employer					
13	welfare arrangement as often as the commissioner in his discretion may					
14	deem necessary.					
15	b. If the commissioner finds that the reserves are inadequate, he					
16	shall notify the self-funded multiple employer welfare arrangement of					
17	the inadequacy. Within 30 days the self-funded multiple employer					
18	welfare arrangement shall file and implement a plan to correct the					
19	inadequacy. The inadequacy shall be corrected within 90 days of the					
20	implementation of the plan to correct the inadequacy.					
21						
22	10. a. The commissioner may revoke or suspend the certificate of					
23	registration of any self-funded multiple employer welfare arrangement					
24	that fails to correct any inadequacy pursuant to section 9 of this act or					
25	violates any provision of this act.					
26 27	b. Any person who violates any provision of this act or the rules and regulations issued pursuant thereto shall be liable to a penalty of					
28	not more than \$1,000 for a first offense and not more than \$5,000 for					
29	each subsequent offense.					
30	each subsequent offense.					
31	11. Any rehabilitation, liquidation, conservation or dissolution of					
32	a self-funded multiple employer welfare arrangement shall be					
33	conducted under the supervision of the commissioner, who shall have					
34	all power with respect to it under the laws governing the rehabilitation,					
35	liquidation, conservation or dissolution of insurers.					
36	1					
37	12. The commissioner, in accordance with the "Administrative					
38	Procedure Act," P.L.1968, c.410 (C.52:14B-1 et seq.), may adopt					
39	rules and regulations necessary to effectuate the purposes of this act.					
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S2458 CARDINALE

1	STATEMENT
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3	This bill requires self-funded or partially self-funded
4	employer welfare arrangements to register with the Comm

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This bill requires self-funded or partially self-funded multiple employer welfare arrangements to register with the Commissioner of Banking and Insurance.

A self-funded arrangement shall: (1) maintain a cash reserve for 6 excess loss of 75 days of benefits paid, net stop-loss coverage or 7 excess risk insurance; (2) file annually its audited financial statements 8 and an actuarial opinion by a qualified actuary, and file quarterly its 9 10 unaudited financial statements and the amount of its claim reserve; and provide a written notice to employers and employees stating that a 11 12 self-funded multiple employer welfare arrangement is not an insurer and does not participate in any guarantee funds created by New Jersey 13 14 law.

The commissioner may suspend or revoke the certificate of registration of a self-funded multiple employer welfare arrangement that does not comply with the provisions of this bill. Any person who violates any provision of this bill would be subject to a fine of not more than \$1,000 for a first offense and not more than \$5,000 for any subsequent offense.

SENATE COMMERCE COMMITTEE

STATEMENT TO

SENATE, No. 2458

with committee amendments

STATE OF NEW JERSEY

DATED: NOVEMBER 19, 2001

The Senate Commerce Committee reports favorably and with committee amendments Senate Bill No. 2458.

This bill, as amended by the committee, requires self-funded or partially self-funded multiple employer welfare arrangements to register with the Commissioner of Banking and Insurance.

A self-funded arrangement shall: (1) maintain a cash reserve for excess loss in an amount established by a qualified actuary as being adequate to provide for any excess loss that may reasonably be expected to occur, net of stop-loss coverage or reinsurance, but no less than anticipated benefits payable within 75 days; (2) file annually its audited financial statements and an actuarial opinion by a qualified actuary, and file quarterly its unaudited financial statements and the amount of its claim reserve; and (3) provide a written notice to employers and employees stating that a self-funded multiple employer welfare arrangement is not an insurer and does not participate in any guarantee funds created by New Jersey law.

The bill provides that a self-funded multiple employer welfare arrangement is not an insurer and that the insurance laws of this State do not apply to their operation. If the commissioner finds that the reserves of the self-funded multiple employer arrangement are inadequate, he must notify the arrangement of the inadequacy; the arrangement must file a plan to correct the inadequacy; and the inadequacy must be corrected within 90 days of the implementation of the plan.

The commissioner may suspend or revoke the certificate of registration of a self-funded multiple employer welfare arrangement that does not comply with the provisions of this bill. Any person who violates any provision of this bill would be subject to a fine of not more than \$1,000 for a first offense and not more than \$5,000 for any subsequent offense.

Finally, the bill provides that any rehabilitation, liquidation, conservation or dissolution of a self-funded multiple employer welfare arrangement must be conducted under the supervision of the commissioner.

The committee amended the bill to require a self-funded multiple

employer welfare arrangement: to maintain aggregate stop-loss coverage or reinsurance and specific stop-loss or reinsurance, with a retention level determined annually by a qualified actuary; and to provide coverage to employees, dependents or both of employer members without regard to an individual's health status-related factors.

[First Reprint] SENATE, No. 2458

STATE OF NEW JERSEY 209th LEGISLATURE

INTRODUCED JUNE 25, 2001

Sponsored by: Senator GERALD CARDINALE District 39 (Bergen)

SYNOPSIS

Regulates self-funded multiple employer welfare arrangements.

CURRENT VERSION OF TEXT

As reported by the Senate Commerce Committee on November 19, 2001, with amendments.



1 2

3 4 arrangements.

AN ACT concerning self-funded multiple employer welfare

Be It Enacted by the Senate and General Assembly of the State

5	of New Jersey:
6	
7	1. This act shall be known and may be cited as the "Self-Funded
8	Multiple Welfare Arrangement Regulation Act."
9	
10	2. The purposes of this act are to:
11	a. provide for the registration of self-funded or partially self-funded
12	multiple employer welfare arrangements;
13	b. regulate self-funded or partially self-funded multiple employer
14	welfare arrangements in order to ensure the financial integrity of the
15	arrangements;
16	c. provide reporting requirements for self-funded or partially self-
17	funded multiple employer welfare arrangements; and
18	d. provide for sanctions against self-funded or partially self-funded
19	multiple employer welfare arrangements that do not comply with the
20	provisions of this act.
21	
22	3. For purposes of this act:
23	"Commissioner" means the Commissioner of Banking and
24	Insurance.
25	"Employee welfare benefit plan" has the meaning set forth in
26	subsection (1) of 29 U.S.C. s.1002.
27	"Multiple employer welfare arrangement" has the meaning set forth
28	in subsection (40) of 29 U.S.C. s.1002.
29	"Self-funded multiple employer welfare arrangement" means a self-
30	funded or partially self-funded multiple employer welfare arrangement
31	that has two or more employers who each have two or more
32	employees and that has one or more of the employer members either
33	domiciled in this State or its principal headquarters or principal
34	administrative office located in this State.
35	
36	4. A self-funded multiple employer welfare arrangement shall
37	register annually with the commissioner and pay a registration fee
38	established by the commissioner which shall not exceed \$1,000.
39	
40	5. ¹ a. A self-funded multiple employer welfare arrangement shall

Matter underlined **thus** is new matter.

enacted and intended to be omitted in the law.

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Matter enclosed in superscript numerals has been adopted as follows:

Senate SCM committee amendments adopted November 19, 2001.

maintain a cash reserve for excess loss in an amount established by a

qualified actuary as being adequate to provide for any excess loss that

EXPLANATION - Matter enclosed in bold-faced brackets [thus] in the above bill is not

may reasonably be expected to occur, net of stop-loss coverage or

[excess risk insurance] reinsurance¹, but in no event less than

benefits anticipated to be payable by the self-funded multiple employer

welfare arrangement within the following 75 days.

¹b. A self-funded multiple employer welfare arrangement shall maintain aggregate stop-loss coverage or reinsurance, including provisions to cover incurred, unpaid claim liability in the event of the termination or liquidation of the self-funded multiple employer welfare arrangement, and specific stop-loss coverage or reinsurance, with a retention level determined annually by a qualified actuary based on sound actuarial principles. Any stop-loss or reinsurance contract pursuant to this subsection shall contain a provision that the stop-loss insurer or reinsurer will give the self-funded multiple employer welfare arrangement and the commissioner a minimum of 180 days' notice of cancellation or nonrenewal. If the self-funded multiple employer welfare arrangement fails to secure replacement coverage within 60 days after receipt of the notice of cancellation or nonrenewal, the commissioner shall provide for the orderly liquidation of the self-funded multiple employer welfare arrangement.¹

- 6. Each self-funded multiple employer welfare arrangement shall file all of the following with the commissioner:
- a. No later than May 15th of each calendar year or four months and 15 days after the end of each fiscal year of the self-funded multiple employer welfare arrangement, financial statements audited by a certified public accountant and on forms prescribed by the commissioner, and an actuarial opinion rendered by a qualified actuary. The opinion shall be based on standards adopted from time to time by the Actuarial Standards Board and on any additional standards that the commissioner may prescribe by regulation. For purposes of this section and section 5 of this act, "qualified actuary" means a member in good standing of the American Academy of Actuaries who meets the requirements set forth in regulations of the commissioner.
- b. Within 60 days after the end of each fiscal quarter, unaudited financial statements on forms prescribed by the commissioner, affirmed by an appropriate officer or agent of the self-funded multiple employer welfare arrangement.
- c. Within 60 days after the end of each fiscal quarter, a report on forms prescribed by the commissioner certifying that the self-funded multiple employer welfare arrangement maintains cash or liquid assets in a claim reserve account sufficient to meet the requirements of section 5 of this act.

¹7. a. A self-funded multiple employer welfare arrangement may refuse to provide coverage to an employer in accordance with the self-

1	funded multiple employer welfare arrangement's underwriting
2	standards and criteria.
3	b. On issuance of coverage to an employer, a self-funded multiple
4	employer welfare arrangement shall provide coverage to the
5	employees, dependents or both of that employer without regard to an
6	individual's health status-related factors, and may exclude only those
7	employees or dependents who have declined coverage.
8	c. Participation in a self-funded multiple employer welfare
9	arrangement shall not be based on health status-related factors. ¹
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11	¹ [7.] <u>8.</u> The following notice shall be provided to employers and
12	employees who obtain coverage from a self-funded multiple employer
13	welfare arrangement:
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15	NOTICE
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17	THE SELF-FUNDED MULTIPLE EMPLOYER WELFARE
18	ARRANGEMENT IS NOT AN INSURANCE COMPANY AND
19	DOES NOT PARTICIPATE IN ANY OF THE GUARANTEE
20	FUNDS CREATED BY NEW JERSEY LAW. THESE FUNDS
21	WILL NOT PAY YOUR CLAIMS OR PROTECT YOUR ASSETS
22	IF A SELF-FUNDED MULTIPLE EMPLOYER WELFARE
23	ARRANGEMENT BECOMES INSOLVENT AND IS UNABLE TO
24	MAKE PAYMENTS AS PROMISED.
25	THE HEALTH CARE BENEFITS THAT YOU HAVE
26	PURCHASED OR ARE APPLYING TO PURCHASE ARE BEING
27	ISSUED BY A SELF-FUNDED MULTIPLE EMPLOYER
28	WELFARE ARRANGEMENT THAT IS REGISTERED BY THE
29	NEW JERSEY DEPARTMENT OF BANKING AND INSURANCE.
30	FOR ADDITIONAL INFORMATION ABOUT THE MULTIPLE
31	EMPLOYER WELFARE ARRANGEMENT YOU SHOULD ASK
32	QUESTIONS OF YOUR TRUST ADMINISTRATOR OR YOU
33	MAY CONTACT THE NEW JERSEY DEPARTMENT OF
34	BANKING AND INSURANCE AT(this blank
35	should include the department's current "800" consumer service
36	telephone number).
37	150 7 0 1 7
38	¹ [8.] 9. Except as provided by this act, the insurance laws of this
39	State do not apply to the operation of self-funded multiple employer
40 4.1	welfare arrangements. A self-funded multiple employer welfare
41 42	arrangement is not an insurance company or insurer under the laws of
12 12	this State.
13 1.1	150 1 10 1 77
14 15	¹ [9.] <u>10.</u> a. The commissioner may, upon reasonable notice.
15 16	conduct an examination of the loss reserves of a self-funded multiple
1 6	employer welfare arrangement as often as the commissioner in his

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1 discretion may deem necessary. 2 b. If the commissioner finds that the reserves are inadequate, he 3 shall notify the self-funded multiple employer welfare arrangement of 4 the inadequacy. Within 30 days the self-funded multiple employer welfare arrangement shall file and implement a plan to correct the 5 inadequacy. The inadequacy shall be corrected within 90 days of the 6 7 implementation of the plan to correct the inadequacy. 8 9 ¹[10.] 11. a. The commissioner may revoke or suspend the 10 certificate of registration of any self-funded multiple employer welfare arrangement that fails to correct any inadequacy pursuant to section 11 9 of this act or violates any provision of this act. 12 13 b. Any person who violates any provision of this act or the rules 14 and regulations issued pursuant thereto shall be liable to a penalty of 15 not more than \$1,000 for a first offense and not more than \$5,000 for

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each subsequent offense.

¹[11.] <u>12.</u> Any rehabilitation, liquidation, conservation or dissolution of a self-funded multiple employer welfare arrangement shall be conducted under the supervision of the commissioner, who shall have all power with respect to it under the laws governing the rehabilitation, liquidation, conservation or dissolution of insurers.

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¹[12.] 13.¹ The commissioner, in accordance with the "Administrative Procedure Act," P.L.1968, c.410 (C.52:14B-1 et seq.), may adopt rules and regulations necessary to effectuate the purposes of this act.

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¹[13.] <u>14.</u> This act shall take effect on the 180th following an enactment.

STATEMENT TO

[First Reprint] SENATE, No. 2458

with Assembly Floor Amendments (Proposed By Assemblywoman MYERS)

ADOPTED: DECEMBER 17, 2001

These floor amendments make extensive changes in the bill and this statement sets forth the provisions of the bill with these floor amendments.

The bill requires self-funded or partially self-funded multiple employer welfare arrangements to register with the Commissioner of Banking and Insurance.

A self-funded arrangement shall: (1) deposit and continuously maintain with a financial institution licensed in this State, cash or certain securities, having an admitted asset value of not less than \$200,000, which deposit shall be held for the benefit and protection of all covered members of the self-funded multiple employer welfare arrangement; (2) maintain a cash reserve for loss in an amount established by a qualified actuary as being adequate to provide for all incurred losses, including unpaid claims; (3) file annually its audited financial statements, an actuarial opinion by a qualified actuary, a report of its Risk-Based Capital (RBC) as of the end of the immediately preceding calendar year and proof of the required deposit, and file quarterly its unaudited financial statements and the amount of its claim reserve; and (4) provide a written notice to employers and employees stating that a self-funded multiple employer welfare arrangement is not an insurer and does not participate in any guarantee funds created by New Jersey law.

The bill requires a self-funded multiple employer welfare arrangement to maintain aggregate stop-loss coverage, with a retention level of 125 percent of expected claims per year, including provisions to cover incurred, unpaid claims liability in the event of the termination or liquidation of the self-funded multiple employer welfare arrangement, and specific stop-loss coverage, with a retention level determined annually by a qualified actuary. The stop-loss contract shall contain a provision requiring a minimum of 180 days' notice of cancellation or nonrenewal to the self-funded multiple employer welfare arrangement and the commissioner. If the self-funded multiple employer welfare arrangement is unable to secure replacement coverage within 90 days of that notice, the trustees shall provide for the orderly liquidation of the self-funded multiple employer welfare arrangement.

The bill provides that a self-funded multiple employer welfare

arrangement is not an insurer and that the insurance laws of this State do not apply to their operation.

The bill requires that a self-funded multiple employer welfare arrangement: (1) offer all products that it is actively marketing to any employer, and accept any employer and any employee of that employer that applies for any of those products; provided, however, that a self-funded multiple employer welfare arrangement may limit participation to members of an association, as that term is defined in the bill; and (2) provide health benefits equal to or greater than benefits required to be provided in the lowest benefit level standard plan promulgated by the New Jersey Small Employer Health Benefits Program.

The bill provides that the liability of each member for the obligations of the self-funded multiple employer welfare arrangement shall be individual, several and proportionate, but not joint, except in certain circumstances, and provides for proportionate assessments of members: (1) if its prior fiscal year statement of operations reflected a loss; (2) if a member fails to pay its assessment; or (3) in the event of a rehabilitation, liquidation, conservation or dissolution of a self-funded multiple welfare arrangement by the court.

In addition, the bill provides that assessments payable by small employer members of a self-funded multiple employer welfare arrangement, except for dental plans, shall, within two years of the effective date of the bill, be established in accordance with the modified-community rating criteria required by law.

Under the bill, if the commissioner finds that the reserves of the self-funded multiple employer welfare arrangement are inadequate, he must notify the arrangement of the inadequacy; the arrangement must file a plan to correct the inadequacy; and the inadequacy must be corrected within 90 days of the implementation of the plan. The bill establishes that capital and surplus shall be automatically considered inadequate if they do not meet or exceed certain RBC levels as determined in accordance with the RBC instructions adopted by the National Association of Insurance Commissioners (NAIC) for health insurers.

The commissioner may suspend or revoke the certificate of registration of a self-funded multiple employer welfare arrangement that does not comply with the provisions of this bill. Any person who violates any provision of this bill would be subject to a fine of not more than \$1,000 for a first offense and not more than \$5,000 for any subsequent offense.

Finally, the bill provides that any rehabilitation, liquidation, conservation or dissolution of a self-funded multiple employer welfare arrangement must be conducted under the supervision of the Superior Court.

[Second Reprint] SENATE, No. 2458

STATE OF NEW JERSEY 209th LEGISLATURE

INTRODUCED JUNE 25, 2001

Sponsored by: Senator GERALD CARDINALE District 39 (Bergen)

Co-Sponsored by:

Assemblywoman Myers and Assemblyman Bateman

SYNOPSIS

Regulates self-funded multiple employer welfare arrangements.

CURRENT VERSION OF TEXT

As amended by the General Assembly on December 17, 2001.



(Sponsorship Updated As Of: 12/18/2001)

1	$\mathbf{A}\mathbf{N}$	ACT	concerning	self-funded	multiple	employer	welfare
2	aı	rrangei	ments.				

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4 BE IT ENACTED by the Senate and General Assembly of the State 5 of New Jersey:

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7 1. This act shall be known and may be cited as the "Self-Funded 8 Multiple Welfare Arrangement Regulation Act."

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- 2. The purposes of this act are to:
- a. provide for the registration of self-funded or partially self-funded 12 multiple employer welfare arrangements;
- 13 b. regulate self-funded or partially self-funded multiple employer 14 welfare arrangements in order to ensure the financial integrity of the 15 arrangements;
- 16 c. provide reporting requirements for self-funded or partially self-17 funded multiple employer welfare arrangements; and
 - d. provide for sanctions against self-funded or partially self-funded multiple employer welfare arrangements that do not comply with the provisions of this act.

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- 3. For purposes of this act:
- ²"Association" means a group of 100 or more persons organized and maintained in good faith for purposes other than that of obtaining insurance, in active existence for more than one year, having a constitution and by-laws that provide that: the association holds regular meetings not less than annually to further the purposes of the members; except for credit unions, the association collects dues or solicits contributions from members; and the members have voting privileges and representation on the governing board and committees.²
- "Commissioner" means the Commissioner of Banking and 31 32 Insurance.
- 33 "Employee welfare benefit plan" has the meaning set forth in subsection (1) of 29 U.S.C. s.1002. 34
- "Multiple employer welfare arrangement" has the meaning set forth 35 36 in subsection (40) of 29 U.S.C. s.1002.
- 37 "Self-funded multiple employer welfare arrangement" means a self-38 funded or partially self-funded multiple employer welfare arrangement ²that provides for health benefits plans² that has two or more 39 40 employers who each have two or more employees and that has one or 41 more of the employer members either domiciled in this State or its

EXPLANATION - Matter enclosed in bold-faced brackets [thus] in the above bill is not enacted and intended to be omitted in the law.

Matter underlined thus is new matter.

Matter enclosed in superscript numerals has been adopted as follows:

¹ Senate SCM committee amendments adopted November 19, 2001.

² Assembly floor amendments adopted December 17, 2001.

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principal headquarters or principal administrative office located in this
 State.

3 ²"Small employer" means the same as defined in section 1 of 4 P.L.1992, c.162 (C.17B:27A-17).²

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4. A self-funded multiple employer welfare arrangement shall register annually with the commissioner and pay a registration fee established by the commissioner which shall not exceed \$1,000.

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5. ¹a. ¹ A self-funded multiple employer welfare arrangement shall 10 ²deposit and continuously maintain with a financial institution licensed 11 in this State, cash or securities as defined in N.J.S. 17B:18-37, having 12 an admitted asset value of not less than \$200,000. The deposit shall 13 14 be held for the benefit and protection of all covered members of the self-funded multiple employer welfare arrangement. The self-funded 15 multiple employer welfare arrangement shall further² maintain a cash 16 reserve for ²[excess]² loss in an amount established by a qualified 17 actuary as being adequate to provide for ² [any excess loss that may 18 reasonably be expected to occur, net of stop-loss coverage or]2 19 ¹[excess risk insurance] ²[reinsurance¹, but in no event less than 20 benefits anticipated to be payable by the self-funded multiple employer 21 welfare arrangement within the following 75 days all incurred losses 22 23

including unpaid claims². ¹b. A self-funded multiple employer welfare arrangement shall maintain aggregate stop-loss coverage ²[or reinsurance], with a retention level of 125 percent of expected claims per year², including provisions to cover incurred, unpaid ²[claim] claims² liability in the event of the termination or liquidation of the self-funded multiple employer welfare arrangement, and specific stop-loss coverage ²[or reinsurance]², with a retention level determined annually by a qualified actuary based on sound actuarial principles. Any stop-loss ²[or reinsurance]² contract ²maintained² pursuant to this subsection shall contain a provision that the stop-loss insurer ²[or reinsurer will] shall² give the self-funded multiple employer welfare arrangement and the commissioner a minimum of 180 days' notice of cancellation or nonrenewal. If the self-funded multiple employer welfare arrangement fails to secure replacement coverage within ²[60] 90² days after receipt of the notice of cancellation or nonrenewal, the ²[commissioner] trustees of the self-funded multiple employer welfare arrangement² shall provide for the orderly liquidation of the selffunded multiple employer welfare arrangement.¹

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- 6. Each self-funded multiple employer welfare arrangement shall file all of the following with the commissioner:
- a. No later than May 15th of each calendar year or four months and

- 1 15 days after the end of each fiscal year of the self-funded multiple
- 2 employer welfare arrangement, financial statements audited by a
- 3 certified public accountant and on forms prescribed by the
- 4 commissioner, ²[and]² an actuarial opinion rendered by a qualified
- 5 actuary ², a report of its Risk-Based Capital (RBC) as of the end of
- 6 the immediately preceding calendar year, in a form and containing such
- 7 <u>information as is required by the instructions adopted by the National</u>
- 8 <u>Association of Insurance Commissioners for health insurers, as</u>
- 9 amended from time to time and proof of the deposit required in
- 10 <u>accordance with section 5 of this act</u>². The opinion shall be based on
- standards adopted from time to time by the Actuarial Standards Board
- 12 and on any additional standards that the commissioner may prescribe
- 13 by regulation. For purposes of this section and section 5 of this act,
 - "qualified actuary" means a member in good standing of the American
- 15 Academy of Actuaries who meets the requirements set forth in
- 16 regulations of the commissioner.
- b. Within 60 days after the end of each fiscal quarter, unaudited financial statements on forms prescribed by the commissioner, affirmed by an appropriate officer or agent of the self-funded multiple employer
- welfare arrangement.
 - c. Within 60 days after the end of each fiscal quarter, a report on forms prescribed by the commissioner certifying that the self-funded multiple employer welfare arrangement maintains cash or liquid assets in a claim reserve account sufficient to meet the requirements of section 5 of this act.

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- ¹7. a. ² [A self-funded multiple employer welfare arrangement may refuse to provide coverage to an employer in accordance with the self-funded multiple employer welfare arrangement's underwriting standards and criteria.
- b. On issuance of coverage to an employer, a self-funded multiple employer welfare arrangement shall provide coverage to the employees, dependents or both of that employer without regard to an individual's health status-related factors, and may exclude only those employees or dependents who have declined coverage.
- c. Participation in a self-funded multiple employer welfare arrangement shall not be based on health status-related factors. The liability of each member for the obligations of the self-funded multiple employer welfare arrangement shall be individual, several and proportionate, but not joint, except as provided in this section.
- b. Each member shall have a contingent assessment liability pursuant to subsection c. of this section. Each benefit plan issued by a self-funded multiple employer welfare arrangement shall contain a statement of the contingent liability. Both the application for benefits and the benefit plan shall contain in contrasting color, not less than 10-point type, the following statement: "This is a fully assessable benefit

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1 plan. In the event that the self-funded multiple employer welfare 2 arrangement is unable to pay its obligations, members shall be required 3 to contribute on a pro rata earned premium basis the funds necessary 4 to meet any unfilled obligations." 5 c. All self-funded multiple employer welfare arrangements shall provide that members are assessed in accordance with the provisions 6 of this section. Each self-funded multiple employer welfare 7 8 arrangement may assess all members if its prior fiscal year statement 9 of operations reflected a loss. Each self-funded multiple employer 10 welfare arrangement shall assess all members if the arrangement's fund balance or reserve at the end of any accounting period is less than the 11 12 amount required by law. The minimum assessment shall be the amount 13 necessary to comply with the requirements of sections 5 and 9 of this 14 act. Each member's assessment shall be computed by applying the 15 earned premium for each employer's benefit plan during the prior fiscal 16 year as a percent of the amount of the total of all employers' earned 17 premium for the same year. Each member's assessment shall be that 18 members's percent times the total assessment levied. In the event a member fails to pay an assessment, the other members shall be liable 19 20 on a proportionate basis for an additional assessment. The self-funded 21 multiple employer welfare arrangement, acting on behalf of all 22 members who paid the additional assessment, shall take appropriate 23 legal action to recover the assessment from any member who fails to 24 pay an assessment. 25 d. In the event of a rehabilitation, liquidation, conservation or 26 dissolution of a self-funded multiple employer welfare arrangement, 27 the court, pursuant to section 11 of this act, may assess the members 28 in the amounts needed to pay all incurred but unpaid claims and all 29 projected claims, together with the costs and expenses of collecting 30 the assessments, a reasonable loading factor for uncollected 31 assessments and the costs and expenses of the rehabilitation, 32 liquidation, conservation or dissolution. 33 e. The following notice shall be provided to employers and 34 employees who obtain coverage from a self-funded multiple employer 35 welfare arrangement: 36 37 **NOTICE** 38 39 THE SELF-FUNDED MULTIPLE EMPLOYER WELFARE 40 ARRANGEMENT IS NOT AN INSURANCE COMPANY AND 41 DOES NOT PARTICIPATE IN ANY OF THE GUARANTEE FUNDS CREATED BY NEW JERSEY LAW. THESE FUNDS 42 WILL NOT PAY YOUR CLAIMS OR PROTECT YOUR ASSETS 43 44 IF A SELF-FUNDED MULTIPLE EMPLOYER WELFARE 45 ARRANGEMENT BECOMES INSOLVENT AND IS UNABLE TO 46 MAKE PAYMENTS AS PROMISED.

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1	THE HEALTH CARE BENEFITS THAT YOU HAVE
2	PURCHASED OR ARE APPLYING TO PURCHASE ARE BEING
3	ISSUED BY A SELF-FUNDED MULTIPLE EMPLOYER
4	WELFARE ARRANGEMENT.
5	FOR ADDITIONAL INFORMATION ABOUT THE MULTIPLE
6	EMPLOYER WELFARE ARRANGEMENT YOU SHOULD ASK
7	QUESTIONS OF YOUR TRUST ADMINISTRATOR AT
8	(this blank should include the "800" consumer
9	service telephone number). ²
10	1F7 1 2F0 1 771 C 11
11	¹ [7.] ² [8. ¹ The following notice shall be provided to employers and
12	employees who obtain coverage from a self-funded multiple employer
13	welfare arrangement:
14	NOTICE
15 16	NOTICE
17	THE SELF-FUNDED MULTIPLE EMPLOYER WELFARE
18	ARRANGEMENT IS NOT AN INSURANCE COMPANY AND
19	DOES NOT PARTICIPATE IN ANY OF THE GUARANTEE
20	FUNDS CREATED BY NEW JERSEY LAW. THESE FUNDS
21	WILL NOT PAY YOUR CLAIMS OR PROTECT YOUR ASSETS
22	IF A SELF-FUNDED MULTIPLE EMPLOYER WELFARE
23	ARRANGEMENT BECOMES INSOLVENT AND IS UNABLE TO
24	MAKE PAYMENTS AS PROMISED.
25	THE HEALTH CARE BENEFITS THAT YOU HAVE
26	PURCHASED OR ARE APPLYING TO PURCHASE ARE BEING
27	ISSUED BY A SELF-FUNDED MULTIPLE EMPLOYER
28	WELFARE ARRANGEMENT THAT IS REGISTERED BY THE
29	NEW JERSEY DEPARTMENT OF BANKING AND INSURANCE.
30	FOR ADDITIONAL INFORMATION ABOUT THE MULTIPLE
31	EMPLOYER WELFARE ARRANGEMENT YOU SHOULD ASK
32	QUESTIONS OF YOUR TRUST ADMINISTRATOR OR YOU
33	MAY CONTACT THE NEW JERSEY DEPARTMENT OF
34	BANKING AND INSURANCE AT(this blank
35	should include the department's current "800" consumer service
36	telephone number).] ²
37	
38	¹ [8.] ² [9. ¹] <u>8. a.</u> ² Except as provided by this act, the insurance
39	laws of this State do not apply to the operation of self-funded multiple
10	employer welfare arrangements. A self-funded multiple employer
11	welfare arrangement is not an insurance company or insurer under the
12	laws of this State.
13	² b. Any self-funded multiple employer welfare arrangement shall
14	offer all products that it is actively marketing to any employer, and
15	accept any employer and any employee of that employer who applies
16	for any of those products; provided, however that a self-funded

1 <u>multiple employer welfare arrangement may limit participation to</u> 2 <u>members of the association.</u>

c. Assessments payable by small employer members, except for dental plans, shall be established in accordance with the rating requirements of section 9 of P.L.1992, c.162 (C.17B:27A-25) and regulations promulgated thereunder; provided, however, that for the first year after the effective date of this act, a self-funded multiple employer welfare arrangement providing benefits in this State prior to the effective date of this act shall: (1) not charge a small employer member an assessment greater than 300 percent of the assessment charged to the lowest rated small employer member of the self-funded multiple employer welfare arrangement; (2) for the second year after the effective date of this act, not charge a small employer member an assessment greater than 250 percent of the assessment charged to the lowest rated small employer member of the self-funded multiple employer welfare arrangement; and (3) for each year thereafter, comply with the rating requirements of section 9 of P.L.1992, c.162 (C.17B:27A-25) and regulations promulgated thereunder.

d. The health benefits to be provided by the self-funded multiple employer welfare arrangement shall at all times be equal to or greater than benefits required to be provided in the lowest benefit level standard plan promulgated by the New Jersey Small Employer Health Benefits Program pursuant to P.L.1992, c.162 (C.17B:27A-17 et seq.).²

¹[9.] ²[10.¹] 9.² a. The commissioner may, upon reasonable notice, conduct an examination of the loss reserves of a self-funded multiple employer welfare arrangement as often as the commissioner in his discretion may deem necessary. ²The expenses of the examination shall be paid by the self-funded multiple employer welfare arrangement so examined. The commissioner shall also annually review the RBC report of the self-funded multiple employer welfare arrangement.²

b. If the commissioner finds that the reserves are inadequate, he shall notify the self-funded multiple employer welfare arrangement of the inadequacy. ²Capital and surplus shall be automatically considered inadequate if they do not meet or exceed the following: (1) for the calendar year ending December 31, 2002, 80 percent of the regulatory action level RBC determined in accordance with the RBC instructions; (2) for the calendar year ending December 31, 2003, 90 percent of the regulatory action level RBC determined in accordance with the RBC instructions; (3) for the calendar year ending December 31, 2004, 95 percent of the regulatory action level RBC determined in accordance with the RBC instructions; and (4) for the calendar years ending on or after December 31, 2005, the regulatory action level RBC determined in accordance with the RBC instructions. ² Within 30 days the self-

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funded multiple employer welfare arrangement shall file and implement 1 2 a plan to correct the inadequacy. The inadequacy shall be corrected 3 within 90 days of the implementation of the plan to correct the 4 inadequacy. 5 $^{1}[10.]$ $^{2}[11.]$ 1 1 2 a. The commissioner may revoke or suspend 6 the certificate of registration of any self-funded multiple employer 7 8 welfare arrangement that fails to correct any inadequacy pursuant to 9 section 9 of this act or violates any provision of this act. 10 b. Any person who violates any provision of this act or the rules and regulations issued pursuant thereto shall be liable to a penalty of 11 not more than \$1,000 for a first offense and not more than \$5,000 for 12 13 each subsequent offense. 14 ¹[11.] ²[12.¹] 11.² Any rehabilitation, liquidation, conservation or 15 dissolution of a self-funded multiple employer welfare arrangement 16 shall be conducted under the supervision of the ²[commissioner, who 17 shall have all power with respect to it under the laws governing the 18 19 rehabilitation, liquidation, conservation or dissolution of insurers] 20 State Superior Court in the county in which the self-funded multiple 21 employer welfare arrangement has its principal office². 22 ¹[12.] ²[13. ¹] 12. ² The commissioner, in accordance with the 23 "Administrative Procedure Act," P.L.1968, c.410 (C.52:14B-1 et 24 25 seq.), may adopt rules and regulations necessary to effectuate the 26 purposes of this act. 27 ¹[13.] 2 [14. 1] 13. 2 This act shall take effect on the 2 [180th] 28

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90th² following enactment.

ASSEMBLY, No. 3943

STATE OF NEW JERSEY 209th LEGISLATURE

INTRODUCED NOVEMBER 19, 2001

Sponsored by:

Assemblywoman CONNIE MYERS
District 23 (Warren, Hunterdon and Mercer)

Co-Sponsored by:

Assemblyman Bateman

SYNOPSIS

Regulates self-funded multiple employer welfare arrangements.

CURRENT VERSION OF TEXT

As introduced.



(Sponsorship Updated As Of: 12/14/2001)

A3943 MYERS

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AN ACT concerning self-funded multiple employer welfare

BE IT ENACTED by the Senate and General Assembly of the State

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within the following 75 days.

arrangements.

of New Jersey:

7 1. This act shall be known and may be cited as the "Self-Funded 8 Multiple Welfare Arrangement Regulation Act." 9 10 2. The purposes of this act are to: 11 a. provide for the registration of self-funded or partially self-funded multiple employer welfare arrangements; 12 13 b. regulate self-funded or partially self-funded multiple employer 14 welfare arrangements in order to ensure the financial integrity of the 15 arrangements; 16 c. provide reporting requirements for self-funded or partially self-17 funded multiple employer welfare arrangements; and 18 d. provide for sanctions against self-funded or partially self-funded 19 multiple employer welfare arrangements that do not comply with the 20 provisions of this act. 21 22 3. For purposes of this act: "Commissioner" means the Commissioner of Banking and 23 24 Insurance. 25 "Employee welfare benefit plan" has the meaning set forth in 26 subsection (1) of 29 U.S.C. s.1002. "Multiple employer welfare arrangement" has the meaning set forth 27 in subsection (40) of 29 U.S.C. s.1002. 28 29 "Self-funded multiple employer welfare arrangement" means a self-30 funded or partially self-funded multiple employer welfare arrangement that has two or more employers who each have two or more 31 32 employees and that has one or more of the employer members either 33 domiciled in this State or its principal headquarters or principal administrative office located in this State. 34 35 4. A self-funded multiple employer welfare arrangement shall 36 37 register annually with the commissioner and pay a registration fee established by the commissioner which shall not exceed \$1,000. 38 39 40 5. A self-funded multiple employer welfare arrangement shall maintain a cash reserve for excess loss in an amount established by a 41 42 qualified actuary as being adequate to provide for any excess loss that 43 may reasonably be expected to occur, net of stop-loss coverage or 44 excess risk insurance, but in no event less than benefits anticipated to

be payable by the self-funded multiple employer welfare arrangement

- 6. Each self-funded multiple employer welfare arrangement shall file all of the following with the commissioner:
- 3 a. No later than May 15th of each calendar year or four months and 4 15 days after the end of each fiscal year of the self-funded multiple employer welfare arrangement, financial statements audited by a 5 6 certified public accountant and on forms prescribed by the 7 commissioner, and an actuarial opinion rendered by a qualified 8 actuary. The opinion shall be based on standards adopted from time 9 to time by the Actuarial Standards Board and on any additional 10 standards that the commissioner may prescribe by regulation. For purposes of this section and section 5 of this act, "qualified actuary" 11 12 means a member in good standing of the American Academy of 13 Actuaries who meets the requirements set forth in regulations of the
 - b. Within 60 days after the end of each fiscal quarter, unaudited financial statements on forms prescribed by the commissioner, affirmed by an appropriate officer or agent of the self-funded multiple employer welfare arrangement.
 - c. Within 60 days after the end of each fiscal quarter, a report on forms prescribed by the commissioner certifying that the self-funded multiple employer welfare arrangement maintains cash or liquid assets in a claim reserve account sufficient to meet the requirements of section 5 of this act.

7. The following notice shall be provided to employers and employees who obtain coverage from a self-funded multiple employer welfare arrangement:

29 NOTICE

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commissioner.

31 THE SELF-FUNDED MULTIPLE EMPLOYER WELFARE ARRANGEMENT IS NOT AN INSURANCE COMPANY AND 32 DOES NOT PARTICIPATE IN ANY OF THE GUARANTEE 33 FUNDS CREATED BY NEW JERSEY LAW. THESE FUNDS 34 WILL NOT PAY YOUR CLAIMS OR PROTECT YOUR ASSETS 35 A SELF-FUNDED MULTIPLE EMPLOYER WELFARE 36 ARRANGEMENT BECOMES INSOLVENT AND IS UNABLE TO 37 38 MAKE PAYMENTS AS PROMISED.

THE HEALTH CARE BENEFITS THAT YOU HAVE
PURCHASED OR ARE APPLYING TO PURCHASE ARE BEING
ISSUED BY A SELF-FUNDED MULTIPLE EMPLOYER
WELFARE ARRANGEMENT THAT IS REGISTERED BY THE
NEW JERSEY DEPARTMENT OF BANKING AND INSURANCE.
FOR ADDITIONAL INFORMATION ABOUT THE MULTIPLE
EMPLOYER WELFARE ARRANGEMENT YOU SHOULD ASK

QUESTIONS OF YOUR TRUST ADMINISTRATOR OR YOU

A3943 MYERS

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1	MAY CONTACT THE NEW JERSEY DEPARTMENT OF						
2	BANKING AND INSURANCE AT(this blank						
3	should include the department's current "800" consumer service						
4	telephone number).						
5							
6	8. Except as provided by this act, the insurance laws of this State						
7	do not apply to the operation of self-funded multiple employer welfare						
8	arrangements. A self-funded multiple employer welfare arrangement						
9	is not an insurance company or insurer under the laws of this State.						
10							
11	9. a. The commissioner may, upon reasonable notice, conduct an						
12	examination of the loss reserves of a self-funded multiple employer						
13	welfare arrangement as often as the commissioner in his discretion may						
14	deem necessary.						
15	b. If the commissioner finds that the reserves are inadequate, he						
16	shall notify the self-funded multiple employer welfare arrangement of						
17	the inadequacy. Within 30 days the self-funded multiple employer						
18	welfare arrangement shall file and implement a plan to correct the						
19	inadequacy. The inadequacy shall be corrected within 90 days of the						
20	implementation of the plan to correct the inadequacy.						
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22	10. a. The commissioner may revoke or suspend the certificate of						
23	registration of any self-funded multiple employer welfare arrangement						
24	that fails to correct any inadequacy pursuant to section 9 of this act or						
25	violates any provision of this act.						
26	b. Any person who violates any provision of this act or the rules						
27	and regulations issued pursuant thereto shall be liable to a penalty of						
28	not more than \$1,000 for a first offense and not more than \$5,000 for						
29	each subsequent offense.						
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31	11. Any rehabilitation, liquidation, conservation or dissolution of						
32	a self-funded multiple employer welfare arrangement shall be						
33	conducted under the supervision of the commissioner, who shall have						
34	all power with respect to it under the laws governing the rehabilitation,						
35	liquidation, conservation or dissolution of insurers.						
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37	12. The commissioner, in accordance with the "Administrative						
38	Procedure Act," P.L. 1968, c. 410 (C. 52:14B-1 et seq.), may adopt						
39	rules and regulations necessary to effectuate the purposes of this act.						
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41	13. This act shall take effect on the 180th following enactment.						
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43	STATEMENT						
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45	This bill requires self-funded or partially self-funded multiple						
46	employer welfare arrangements to register with the Commissioner of						

A3943 MYERS

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1 Banking and Insurance.

2 A self-funded arrangement shall: (1) maintain a cash reserve for 3 excess loss of 75 days of benefits paid, net stop-loss coverage or 4 excess risk insurance; (2) file annually its audited financial statements 5 and an actuarial opinion by a qualified actuary, and file quarterly its unaudited financial statements and the amount of its claim reserve; and 6 provide a written notice to employers and employees stating that a 7 self-funded multiple employer welfare arrangement is not an insurer 8 9 and does not participate in any guarantee funds created by New Jersey 10 law.

The commissioner may suspend or revoke the certificate of registration of a self-funded multiple employer welfare arrangement that does not comply with the provisions of this bill. Any person who violates any provision of this bill would be subject to a fine of not more than \$1,000 for a first offense and not more than \$5,000 for any subsequent offense.

ASSEMBLY BANKING AND INSURANCE COMMITTEE

STATEMENT TO

ASSEMBLY, No. 3943

with committee amendments

STATE OF NEW JERSEY

DATED: DECEMBER 13, 2001

The Assembly Banking and Insurance Committee reports favorably and with committee amendments Assembly Bill No. 3943.

This bill, as amended by the committee, requires self-funded or partially self-funded multiple employer welfare arrangements to register with the Commissioner of Banking and Insurance.

A self-funded arrangement shall: (1) deposit and continuously maintain with a financial institution licensed in this State, cash or certain securities, having an admitted asset value of not less than \$200,000, which deposit shall be held for the benefit and protection of all covered members of the self-funded multiple employer welfare arrangement; (2) maintain a cash reserve for loss in an amount established by a qualified actuary as being adequate to provide for all incurred losses including unpaid claims; (3) file annually its audited financial statements, an actuarial opinion by a qualified actuary, a report of its Risk-Based Capital (RBC) as of the end of the immediately preceding calendar year and proof of the required deposit, and file quarterly its unaudited financial statements and the amount of its claim reserve; and (4) provide a written notice to employers and employees stating that a self-funded multiple employer welfare arrangement is not an insurer and does not participate in any guarantee funds created by New Jersey law.

In addition, the bill requires a self-funded multiple employer welfare arrangement to maintain aggregate stop-loss coverage, with a retention level of 125 percent of expected claims per year, including provisions to cover incurred, unpaid claims liability in the event of the termination or liquidation of the self-funded multiple employer welfare arrangement, and specific stop-loss coverage, with a retention level determined annually by a qualified actuary. The stop-loss contract shall contain a provision requiring a minimum of 180 days' notice of cancellation or nonrenewal to the self-funded multiple employer welfare arrangement and the commissioner. If the self-funded multiple employer welfare arrangement is unable to secure replacement coverage within 90 days of that notice, the trustees shall provide for the orderly liquidation of the self-funded multiple employer welfare arrangement.

The bill provides that a self-funded multiple employer welfare arrangement is not an insurer and that the insurance laws of this State do not apply to their operation.

The bill requires that a self-funded multiple employer welfare arrangement: (1) offer all products that it is actively marketing to any employer, and accept any employer and any employee of that employer that applies for any of those products; provided, however, that a self-funded multiple employer welfare arrangement may limit participation to members of an association, as that term is defined in the bill; and (2) provide health benefits equal to or greater than benefits required to be provided in the lowest benefit level standard plan promulgated by the New Jersey Small Employer Health Benefits Program.

The bill provides that the liability of each member for the obligations of the self-funded multiple employer welfare arrangement shall be individual, several and proportionate, but not joint, except in certain circumstances, and provides for proportionate assessments of members: (1) if its prior fiscal year statement of operations reflected a loss; (2) if a member fails to pay its assessment; or (3) in the event of a rehabilitation, liquidation, conservation or dissolution of a self-funded multiple welfare arrangement by the court.

In addition, the bill provides that assessments payable by small employer members of a self-funded multiple employer welfare arrangement, except for dental plans, shall, within two years of the effective date of the bill, be established in accordance with the modified-community rating criteria required by law.

Under the bill, if the commissioner finds that the reserves of the self-funded multiple employer welfare arrangement are inadequate, he must notify the arrangement of the inadequacy; the arrangement must file a plan to correct the inadequacy; and the inadequacy must be corrected within 90 days of the implementation of the plan. The bill establishes that capital and surplus shall be automatically considered inadequate if they do not meet or exceed certain RBC levels as determined in accordance with the RBC instructions adopted by the National Association of Insurance Commissioners (NAIC) for health insurers.

The commissioner may suspend or revoke the certificate of registration of a self-funded multiple employer welfare arrangement that does not comply with the provisions of this bill. Any person who violates any provision of this bill would be subject to a fine of not more than \$1,000 for a first offense and not more than \$5,000 for any subsequent offense.

Finally, the bill provides that any rehabilitation, liquidation, conservation or dissolution of a self-funded multiple employer welfare arrangement must be conducted under the supervision of the Superior Court.

[First Reprint]

ASSEMBLY, No. 3943

STATE OF NEW JERSEY 209th LEGISLATURE

INTRODUCED NOVEMBER 19, 2001

Sponsored by:

Assemblywoman CONNIE MYERS
District 23 (Warren, Hunterdon and Mercer)

Co-Sponsored by:

Assemblyman Bateman

SYNOPSIS

Regulates self-funded multiple employer welfare arrangements.

CURRENT VERSION OF TEXT

As reported by the Assembly Banking and Insurance Committee on December 13, 2001, with amendments.



(Sponsorship Updated As Of: 12/14/2001)

1	$\mathbf{A}\mathbf{N}$	ACT	concerning	self-funded	multiple	employer	welfare
2	a	rrangei	ments.				
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4 **BE IT ENACTED** by the Senate and General Assembly of the State of New Jersey:

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7 1. This act shall be known and may be cited as the "Self-Funded8 Multiple Welfare Arrangement Regulation Act."

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- 2. The purposes of this act are to:
- a. provide for the registration of self-funded or partially self-funded multiple employer welfare arrangements;
- b. regulate self-funded or partially self-funded multiple employer
 welfare arrangements in order to ensure the financial integrity of the
 arrangements;
 - c. provide reporting requirements for self-funded or partially selffunded multiple employer welfare arrangements; and
 - d. provide for sanctions against self-funded or partially self-funded multiple employer welfare arrangements that do not comply with the provisions of this act.

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- 3. For purposes of this act:
- ¹"Association" means a group of 100 or more persons organized and maintained in good faith for purposes other than that of obtaining insurance, in active existence for more than one year, having a constitution and by-laws that provide that: the association holds regular meetings not less than annually to further the purposes of the members; except for credit unions, the association collects dues or solicits contributions from members; and the members have voting privileges and representation on the governing board and committees. ¹
- 31 "Commissioner" means the Commissioner of Banking and 32 Insurance.
- "Employee welfare benefit plan" has the meaning set forth in subsection (1) of 29 U.S.C. s.1002.
- "Multiple employer welfare arrangement" has the meaning set forth in subsection (40) of 29 U.S.C. s.1002.
- "Self-funded multiple employer welfare arrangement" means a selffunded or partially self-funded multiple employer welfare arrangement 1 that provides for health benefits plans that has two or more 40 employers who each have two or more employees and that has one or 41 more of the employer members either domiciled in this State or its
- 42 principal headquarters or principal administrative office located in this

EXPLANATION - Matter enclosed in bold-faced brackets [thus] in the above bill is not enacted and intended to be omitted in the law.

Matter underlined thus is new matter.

Matter enclosed in superscript numerals has been adopted as follows:

¹ Assembly ABI committee amendments adopted December 13, 2001

A3943 [1R] MYERS

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1 State.

¹"Small employer" means the same as defined in section 1 of 3 P.L.1992, c.162 (C.17B:27A-17).¹

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4. A self-funded multiple employer welfare arrangement shall register annually with the commissioner and pay a registration fee established by the commissioner which shall not exceed \$1,000.

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5. ¹a. ¹ A self-funded multiple employer welfare arrangement shall ¹deposit and continuously maintain with a financial institution licensed in this State, cash or securities as defined in N.J.S.17B:18-37, having an admitted asset value of not less than \$200,000. The deposit shall be held for the benefit and protection of all covered members of the self-funded multiple employer welfare arrangement. The self-funded multiple employer welfare arrangement shall further maintain a cash reserve for ¹[excess] loss in an amount established by a qualified actuary as being adequate to provide for ¹[any excess loss that may reasonably be expected to occur, net of stop-loss coverage or excess risk insurance, but in no event less than benefits anticipated to be payable by the self-funded multiple employer welfare arrangement within the following 75 days] all incurred losses including unpaid

¹b. A self-funded multiple employer welfare arrangement shall maintain aggregate stop-loss coverage, with a retention level of 125 percent of expected claims per year, including provisions to cover incurred, unpaid claims liability in the event of the termination or liquidation of the self-funded multiple employer welfare arrangement, and specific stop-loss coverage, with a retention level determined annually by a qualified actuary based on sound actuarial principles. Any stop-loss contract maintained pursuant to this subsection shall contain a provision that the stop-loss insurer shall give the self-funded multiple employer welfare arrangement and the commissioner a minimum of 180 days' notice of cancellation or nonrenewal. If the self-funded multiple employer welfare arrangement fails to secure replacement coverage within 90 days after receipt of the notice of cancellation or nonrenewal, the trustees of the self-funded multiple employer welfare arrangement shall provide for the orderly liquidation of the self-funded multiple employer welfare arrangement.¹

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- 6. Each self-funded multiple employer welfare arrangement shall file all of the following with the commissioner:
- a. No later than May 15th of each calendar year or four months and
 15 days after the end of each fiscal year of the self-funded multiple
 employer welfare arrangement, financial statements audited by a
 certified public accountant and on forms prescribed by the
 commissioner, ¹[and] ¹ an actuarial opinion rendered by a qualified

- 1 actuary ¹, a report of its Risk-Based Capital (RBC) as of the end of
- 2 the immediately preceding calendar year, in a form and containing such
- 3 <u>information as is required by the instructions adopted by the National</u>
- 4 Association of Insurance Commissioners for health insurers, as
- 5 amended from time to time and proof of the deposit required in
- 6 <u>accordance with section 5 of this act</u>¹. The opinion shall be based on
- 7 standards adopted from time to time by the Actuarial Standards Board
- 8 and on any additional standards that the commissioner may prescribe
- 9 by regulation. For purposes of this section and section 5 of this act,
- 10 "qualified actuary" means a member in good standing of the American
- 11 Academy of Actuaries who meets the requirements set forth in
- 12 regulations of the commissioner.
 - b. Within 60 days after the end of each fiscal quarter, unaudited financial statements on forms prescribed by the commissioner, affirmed
- by an appropriate officer or agent of the self-funded multiple employer
- 16 welfare arrangement.
- 17 c. Within 60 days after the end of each fiscal quarter, a report on
- 18 forms prescribed by the commissioner certifying that the self-funded
- 19 multiple employer welfare arrangement maintains cash or liquid assets
- 20 in a claim reserve account sufficient to meet the requirements of
- 21 section 5 of this act.

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- 7. 1a. The liability of each member for the obligations of the self-
- 24 <u>funded multiple employer welfare arrangement shall be individual.</u>
- 25 several and proportionate, but not joint, except as provided in this
- 26 section.
- b. Each member shall have a contingent assessment liability
- 28 pursuant to subsection c. of this section. Each benefit plan issued by
- 29 <u>a self-funded multiple employer welfare arrangement shall contain a</u>
- 30 statement of the contingent liability. Both the application for benefits
- 31 and the benefit plan shall contain in contrasting color, not less than 10-
- point type, the following statement: "This is a fully assessable benefit
- 33 plan. In the event that the self-funded multiple employer welfare
- 34 <u>arrangement is unable to pay its obligations, members shall be required</u>
- 35 to contribute on a pro rata earned premium basis the funds necessary
- 36 to meet any unfilled obligations."
- 37 <u>c. All self-funded multiple employer welfare arrangements shall</u>
- 38 provide that members are assessed in accordance with the provisions
- 39 of this section. Each self-funded multiple employer welfare
- 40 <u>arrangement may assess all members if its prior fiscal year statement</u>
- 41 <u>of operations reflected a loss. Each self-funded multiple employer</u>
- 42 welfare arrangement shall assess all members if the arrangement's fund
- balance or reserve at the end of any accounting period is less than the
- 44 <u>amount required by law. The minimum assessment shall be the amount</u>
- necessary to comply with the requirements of sections 5 and 9 of this
 act. Each member's assessment shall be computed by applying the

A3943 [1R] MYERS 5

1	earned premium for each employer's benefit plan during the prior fiscal
2	year as a percent of the amount of the total of all employers' earned
3	premium for the same year. Each member's assessment shall be that
4	members's percent times the total assessment levied. In the event a
5	member fails to pay an assessment, the other members shall be liable
6	on a proportionate basis for an additional assessment. The self-funded
7	multiple employer welfare arrangement, acting on behalf of all
8	members who paid the additional assessment, shall take appropriate
9	legal action to recover the assessment from any member who fails to
0	pay an assessment.
1	d. In the event of a rehabilitation, liquidation, conservation or
2	dissolution of a self-funded multiple employer welfare arrangement,
3	the court, pursuant to section 11 of this act, may assess the members
4	in the amounts needed to pay all incurred but unpaid claims and all
5	projected claims, together with the costs and expenses of collecting
6	the assessments, a reasonable loading factor for uncollected
7	assessments and the costs and expenses of the rehabilitation,
8	liquidation, conservation or dissolution.
9	e. The following notice shall be provided to employers and
20	employees who obtain coverage from a self-funded multiple employer
21	welfare arrangement:
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23	NOTICE
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25	THE SELF-FUNDED MULTIPLE EMPLOYER WELFARE
26	ARRANGEMENT IS NOT AN INSURANCE COMPANY AND DOES NOT PARTICIPATE IN ANY OF THE GUARANTEE
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28	FUNDS CREATED BY NEW JERSEY LAW. THESE FUNDS WILL NOT PAY YOUR CLAIMS OR PROTECT YOUR ASSETS
29 30	IF A SELF-FUNDED MULTIPLE EMPLOYER WELFARE
31	ARRANGEMENT BECOMES INSOLVENT AND IS UNABLE TO
32	MAKE PAYMENTS AS PROMISED.
33	THE HEALTH CARE BENEFITS THAT YOU HAVE
34	PURCHASED OR ARE APPLYING TO PURCHASE ARE BEING
35	ISSUED BY A SELF-FUNDED MULTIPLE EMPLOYER
36	WELFARE ARRANGEMENT ¹ [THAT IS REGISTERED BY THE
37	NEW JERSEY DEPARTMENT OF BANKING AND
38	INSURANCE 1.
39	FOR ADDITIONAL INFORMATION ABOUT THE MULTIPLE
10	EMPLOYER WELFARE ARRANGEMENT YOU SHOULD ASK
11	QUESTIONS OF YOUR TRUST ADMINISTRATOR ¹ [OR YOU
12	MAY CONTACT THE NEW JERSEY DEPARTMENT OF
13	BANKING AND INSURANCE] ¹ AT(this blank
14	should include the ¹ [department's current] "800" consumer service
	-
15	telephone number).

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8. ¹a. ¹ Except as provided by this act, the insurance laws of this State do not apply to the operation of self-funded multiple employer welfare arrangements. A self-funded multiple employer welfare arrangement is not an insurance company or insurer under the laws of this State.

¹b. Any self-funded multiple employer welfare arrangement shall offer all products that it is actively marketing to any employer, and accept any employer and any employee of that employer who applies for any of those products; provided, however that a self-funded multiple employer welfare arrangement may limit participation to members of the association.

11 members of the association.

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c. Assessments payable by small employer members, except for dental plans, shall be established in accordance with the rating requirements of section 9 of P.L.1992, c.162 (C.17B:27A-25) and regulations promulgated thereunder; provided, however, that for the first year after the effective date of this act, a self-funded multiple employer welfare arrangement providing benefits in this State prior to the effective date of this act shall: (1) not charge a small employer member an assessment greater than 300 percent of the assessment charged to the lowest rated small employer member of the self-funded multiple employer welfare arrangement; (2) for the second year after the effective date of this act, not charge a small employer member an assessment greater than 250 percent of the assessment charged to the lowest rated small employer member of the self-funded multiple employer welfare arrangement; and (3) for each year thereafter, comply with the rating requirements of section 9 of P.L.1992, c.162 (C.17B:27A-25) and regulations promulgated thereunder.

d. The health benefits to be provided by the self-funded multiple employer welfare arrangement shall at all times be equal to or greater than benefits required to be provided in the lowest benefit level standard plan promulgated by the New Jersey Small Employer Health Benefits Program pursuant to P.L.1992, c.162 (C.17B:27A-17 et seq.).

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9. a. The commissioner may, upon reasonable notice, conduct an examination of the loss reserves of a self-funded multiple employer welfare arrangement as often as the commissioner in his discretion may deem necessary. ¹The expenses of the examination shall be paid by the self-funded multiple employer welfare arrangement so examined. The commissioner shall also annually review the RBC report of the self-funded multiple employer welfare arrangement.¹

b. If the commissioner finds that the reserves are inadequate, he shall notify the self-funded multiple employer welfare arrangement of the inadequacy. ¹Capital and surplus shall be automatically considered inadequate if they do not meet or exceed the following: (1) for the

46 <u>calendar year ending December 31, 2002, 80 percent of the regulatory</u>

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action level RBC determined in accordance with the RBC instructions; 1 2 (2) for the calendar year ending December 31, 2003, 90 percent of the 3 regulatory action level RBC determined in accordance with the RBC 4 instructions; (3) for the calendar year ending December 31, 2004, 95 percent of the regulatory action level RBC determined in accordance 5 with the RBC instructions; and (4) for the calendar years ending on or 6 after December 31, 2005, the regulatory action level RBC determined 7 in accordance with the RBC instructions. 1 Within 30 days the self-8 funded multiple employer welfare arrangement shall file and implement 9 a plan to correct the inadequacy. The inadequacy shall be corrected 10 within 90 days of the implementation of the plan to correct the 11 12 inadequacy. 13 14 10. a. The commissioner may revoke or suspend the certificate of 15 registration of any self-funded multiple employer welfare arrangement that fails to correct any inadequacy pursuant to section 9 of this act or 16 17 violates any provision of this act. b. Any person who violates any provision of this act or the rules 18 19 and regulations issued pursuant thereto shall be liable to a penalty of 20 not more than \$1,000 for a first offense and not more than \$5,000 for

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each subsequent offense.

11. Any rehabilitation, liquidation, conservation or dissolution of a self-funded multiple employer welfare arrangement shall be conducted under the supervision of the ¹[commissioner, who shall have all power with respect to it under the laws governing the rehabilitation, liquidation, conservation or dissolution of insurers] State Superior Court in the county in which the self-funded multiple employer welfare arrangement has its principal office¹.

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12. The commissioner, in accordance with the "Administrative Procedure Act," P.L.1968, c.410 (C.52:14B-1 et seq.), may adopt rules and regulations necessary to effectuate the purposes of this act.

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13. This act shall take effect on the ¹[180th] <u>90th</u> following enactment.

LEGISLATIVE FISCAL ESTIMATE

[First Reprint]

ASSEMBLY, No. 3943 STATE OF NEW JERSEY 209th LEGISLATURE

DATED: JANUARY 10, 2002

SUMMARY

Synopsis: Regulates self-funded multiple employer welfare arrangements.

Type of Impact: Potential increased administrative costs and State revenue

Agencies Affected: Department of Banking and Insurance

Office of Legislative Services Estimate

Fiscal Impact	Year 1	Year 2	Year 3
State Costs	Indeterminate	Indeterminate	Indeterminate
State Revenue	Indeterminate	Indeterminate	Indeterminate

- ! The Department of Banking and Insurance informally indicates that it is unknown at this time what the administrative costs would be in order to regulate self-funded multiple employer welfare arrangements.
- ! This bill establishes that a self-funded multiple employer welfare arrangement shall register annually with the Commissioner of Banking and Insurance and pay a registration fee established by the commissioner which shall not exceed \$1,000.
- ! There are no firm estimates available from the Department of Banking and Insurance or the U.S. Department of Labor determining how many self-funded multiple employer welfare arrangements are in existence and operate in this State.

BILL DESCRIPTION

Assembly Bill No. 3943 (1R) of 2001 requires self-funded or partially self-funded multiple employer welfare arrangements to register with the Commissioner of Banking and Insurance. This bill provides: (1) registration of self-funded or partially self-funded multiple employer welfare arrangements; (2) regulation of self-funded or partially self-funded multiple employer welfare arrangements in order to ensure the financial integrity of the arrangements; (3) reporting



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requirements for self-funded or partially self-funded multiple employer welfare arrangements; and (4) sanctions against self-funded or partially self-funded multiple employer welfare arrangements that do not comply with the provisions of the bill.

FISCAL ANALYSIS

EXECUTIVE BRANCH

None received

OFFICE OF LEGISLATIVE SERVICES

The Office of Legislative Services (OLS) estimates that State expenditures and State revenues for the Department of Banking and Insurance have the potential to increase under the provisions of the bill. The extent of that increase is unknown because of the lack of data concerning the number of self-funded multiple employer welfare arrangements operating in the State. No system is in place which accounts for the number of these arrangements in the State or Nationwide. Currently, the largest self-funded multiple employer welfare arrangement in the State is the Association Master Trust, which covers 6,500 employees. The Department of Banking and Insurance informally indicates that the personnel and administrative costs of regulating self-funded multiple employee welfare arrangements are unknown to them at this time. However, the Department of Banking and Insurance currently regulates and performs examinations on insurance agencies which are similar to the oversight which will be performed on the regulation of self-funded multiple employer welfare arrangements. Therefore, the regulation of self-funded multiple employer welfare arrangements may be able to be absorbed by the department.

Therefore additional administrative personnel may be unnecessary and the cost to regulate the self-funded multiple employer welfare arrangements may be absorbed by the department.

Section: Commerce, Labor and Industry

Analyst: Sonya Hough

Assistant Fiscal Analyst

Approved: Alan R. Kooney

Legislative Budget and Finance Officer

This fiscal estimate has been prepared pursuant to P.L.1980, c.67.

Title 17B.
Chapter 27C. (New)
Multiple Employer
Welfare
Arrangements.
§§1-12 C.17B:27C-1
to 17B:27C-12
§13 - Note to §§1-12

P.L. 2001, CHAPTER 352, approved January 6, 2002 Senate, No. 2458 (Second Reprint)

1 AN ACT concerning self-funded multiple employer welfare 2 arrangements.

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4 **BE IT ENACTED** by the Senate and General Assembly of the State of New Jersey:

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1. This act shall be known and may be cited as the "Self-Funded Multiple Welfare Arrangement Regulation Act."

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- 2. The purposes of this act are to:
- a. provide for the registration of self-funded or partially self-funded multiple employer welfare arrangements;
- b. regulate self-funded or partially self-funded multiple employer welfare arrangements in order to ensure the financial integrity of the arrangements;
 - c. provide reporting requirements for self-funded or partially selffunded multiple employer welfare arrangements; and
 - d. provide for sanctions against self-funded or partially self-funded multiple employer welfare arrangements that do not comply with the provisions of this act.

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- 3. For purposes of this act:
 - ²"Association" means a group of 100 or more persons organized and maintained in good faith for purposes other than that of obtaining insurance, in active existence for more than one year, having a constitution and by-laws that provide that: the association holds regular meetings not less than annually to further the purposes of the members; except for credit unions, the association collects dues or solicits contributions from members; and the members have voting privileges and representation on the governing board and committees.²
- 31 "Commissioner" means the Commissioner of Banking and 32 Insurance.
- 33 "Employee welfare benefit plan" has the meaning set forth in

EXPLANATION - Matter enclosed in bold-faced brackets [thus] in the above bill is not enacted and intended to be omitted in the law.

Matter underlined thus is new matter.

Matter enclosed in superscript numerals has been adopted as follows:

¹ Senate SCM committee amendments adopted November 19, 2001.

² Assembly floor amendments adopted December 17, 2001.

1 subsection (1) of 29 U.S.C. s.1002.

"Multiple employer welfare arrangement" has the meaning set forth in subsection (40) of 29 U.S.C. s.1002.

"Self-funded multiple employer welfare arrangement" means a self-funded or partially self-funded multiple employer welfare arrangement ²that provides for health benefits plans² that has two or more employers who each have two or more employees and that has one or more of the employer members either domiciled in this State or its principal headquarters or principal administrative office located in this State.

²"Small employer" means the same as defined in section 1 of P.L.1992, c.162 (C.17B:27A-17).²

4. A self-funded multiple employer welfare arrangement shall register annually with the commissioner and pay a registration fee established by the commissioner which shall not exceed \$1,000.

- ²deposit and continuously maintain with a financial institution licensed in this State, cash or securities as defined in N.J.S. 17B:18-37, having an admitted asset value of not less than \$200,000. The deposit shall be held for the benefit and protection of all covered members of the self-funded multiple employer welfare arrangement. The self-funded multiple employer welfare arrangement shall further maintain a cash reserve for ²[excess]² loss in an amount established by a qualified actuary as being adequate to provide for ²[any excess loss that may reasonably be expected to occur, net of stop-loss coverage or]² ¹[excess risk insurance] ²[reinsurance¹, but in no event less than benefits anticipated to be payable by the self-funded multiple employer welfare arrangement within the following 75 days] all incurred losses including unpaid claims².
- ¹b. A self-funded multiple employer welfare arrangement shall maintain aggregate stop-loss coverage ²[or reinsurance], with a retention level of 125 percent of expected claims per year², including provisions to cover incurred, unpaid ²[claim] claims² liability in the event of the termination or liquidation of the self-funded multiple employer welfare arrangement, and specific stop-loss coverage ²[or reinsurance]², with a retention level determined annually by a qualified actuary based on sound actuarial principles. Any stop-loss ²[or reinsurance]² contract ²maintained² pursuant to this subsection shall contain a provision that the stop-loss insurer ²[or reinsurer will] shall² give the self-funded multiple employer welfare arrangement and the commissioner a minimum of 180 days' notice of cancellation or nonrenewal. If the self-funded multiple employer welfare arrangement fails to secure replacement coverage within ²[60] 90² days after

1 receipt of the notice of cancellation or nonrenewal, the 2 ²[commissioner] trustees of the self-funded multiple employer welfare arrangement² shall provide for the orderly liquidation of the self-3 4

funded multiple employer welfare arrangement.¹

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- 6. Each self-funded multiple employer welfare arrangement shall file all of the following with the commissioner:
- 8 a. No later than May 15th of each calendar year or four months and 9 15 days after the end of each fiscal year of the self-funded multiple 10 employer welfare arrangement, financial statements audited by a 11 certified public accountant and on forms prescribed by the commissioner, ²[and]² an actuarial opinion rendered by a qualified 12 actuary 2, a report of its Risk-Based Capital (RBC) as of the end of 13 14 the immediately preceding calendar year, in a form and containing such information as is required by the instructions adopted by the National 15 16 Association of Insurance Commissioners for health insurers, as 17 amended from time to time and proof of the deposit required in accordance with section 5 of this act². The opinion shall be based on 18 19 standards adopted from time to time by the Actuarial Standards Board 20 and on any additional standards that the commissioner may prescribe 21 by regulation. For purposes of this section and section 5 of this act, 22 "qualified actuary" means a member in good standing of the American 23 Academy of Actuaries who meets the requirements set forth in 24 regulations of the commissioner.
 - b. Within 60 days after the end of each fiscal quarter, unaudited financial statements on forms prescribed by the commissioner, affirmed by an appropriate officer or agent of the self-funded multiple employer welfare arrangement.
 - c. Within 60 days after the end of each fiscal quarter, a report on forms prescribed by the commissioner certifying that the self-funded multiple employer welfare arrangement maintains cash or liquid assets in a claim reserve account sufficient to meet the requirements of section 5 of this act.

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- ¹7. a. ²[A self-funded multiple employer welfare arrangement may refuse to provide coverage to an employer in accordance with the selffunded multiple employer welfare arrangement's underwriting standards and criteria.
- b. On issuance of coverage to an employer, a self-funded multiple employer welfare arrangement shall provide coverage to the employees, dependents or both of that employer without regard to an individual's health status-related factors, and may exclude only those employees or dependents who have declined coverage.
- 44 c. Participation in a self-funded multiple employer welfare arrangement shall not be based on health status-related factors.¹] The 45 liability of each member for the obligations of the self-funded multiple 46

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employer welfare arrangement shall be individual, several and
 proportionate, but not joint, except as provided in this section.

3 b. Each member shall have a contingent assessment liability 4 pursuant to subsection c. of this section. Each benefit plan issued by 5 a self-funded multiple employer welfare arrangement shall contain a 6 statement of the contingent liability. Both the application for benefits 7 and the benefit plan shall contain in contrasting color, not less than 10-8 point type, the following statement: "This is a fully assessable benefit 9 plan. In the event that the self-funded multiple employer welfare 10 arrangement is unable to pay its obligations, members shall be required 11 to contribute on a pro rata earned premium basis the funds necessary to meet any unfilled obligations." 12

13 c. All self-funded multiple employer welfare arrangements shall 14 provide that members are assessed in accordance with the provisions 15 of this section. Each self-funded multiple employer welfare 16 arrangement may assess all members if its prior fiscal year statement 17 of operations reflected a loss. Each self-funded multiple employer 18 welfare arrangement shall assess all members if the arrangement's fund 19 balance or reserve at the end of any accounting period is less than the 20 amount required by law. The minimum assessment shall be the amount 21 necessary to comply with the requirements of sections 5 and 9 of this 22 act. Each member's assessment shall be computed by applying the 23 earned premium for each employer's benefit plan during the prior fiscal 24 year as a percent of the amount of the total of all employers' earned 25 premium for the same year. Each member's assessment shall be that 26 members's percent times the total assessment levied. In the event a 27 member fails to pay an assessment, the other members shall be liable 28 on a proportionate basis for an additional assessment. The self-funded 29 multiple employer welfare arrangement, acting on behalf of all 30 members who paid the additional assessment, shall take appropriate 31 legal action to recover the assessment from any member who fails to 32 pay an assessment.

d. In the event of a rehabilitation, liquidation, conservation or dissolution of a self-funded multiple employer welfare arrangement, the court, pursuant to section 11 of this act, may assess the members in the amounts needed to pay all incurred but unpaid claims and all projected claims, together with the costs and expenses of collecting the assessments, a reasonable loading factor for uncollected assessments and the costs and expenses of the rehabilitation, liquidation, conservation or dissolution.

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e. The following notice shall be provided to employers and employees who obtain coverage from a self-funded multiple employer welfare arrangement:]

1	<u>NOTICE</u>
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3	THE SELF-FUNDED MULTIPLE EMPLOYER WELFARE
4	ARRANGEMENT IS NOT AN INSURANCE COMPANY AND
5	DOES NOT PARTICIPATE IN ANY OF THE GUARANTEE
6	FUNDS CREATED BY NEW JERSEY LAW. THESE FUNDS
7	WILL NOT PAY YOUR CLAIMS OR PROTECT YOUR ASSETS
8	IF A SELF-FUNDED MULTIPLE EMPLOYER WELFARE
9	ARRANGEMENT BECOMES INSOLVENT AND IS UNABLE TO
10	MAKE PAYMENTS AS PROMISED.
11	THE HEALTH CARE BENEFITS THAT YOU HAVE
12	PURCHASED OR ARE APPLYING TO PURCHASE ARE BEING
13	ISSUED BY A SELF-FUNDED MULTIPLE EMPLOYER
14	WELFARE ARRANGEMENT.
15	FOR ADDITIONAL INFORMATION ABOUT THE MULTIPLE
16	EMPLOYER WELFARE ARRANGEMENT YOU SHOULD ASK
17	QUESTIONS OF YOUR TRUST ADMINISTRATOR AT
18	(this blank should include the "800" consumer
19	service telephone number). ²
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21	¹ [7.] ² [8. ¹ The following notice shall be provided to employers and
22	employees who obtain coverage from a self-funded multiple employer
23	welfare arrangement:
24	
25	NOTICE
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27	THE SELF-FUNDED MULTIPLE EMPLOYER WELFARE
28	ARRANGEMENT IS NOT AN INSURANCE COMPANY AND
29	DOES NOT PARTICIPATE IN ANY OF THE GUARANTEE
30	FUNDS CREATED BY NEW JERSEY LAW. THESE FUNDS
31	WILL NOT PAY YOUR CLAIMS OR PROTECT YOUR ASSETS
32	IF A SELF-FUNDED MULTIPLE EMPLOYER WELFARE
33	ARRANGEMENT BECOMES INSOLVENT AND IS UNABLE TO
34	MAKE PAYMENTS AS PROMISED.
35	THE HEALTH CARE BENEFITS THAT YOU HAVE
36	PURCHASED OR ARE APPLYING TO PURCHASE ARE BEING
37	ISSUED BY A SELF-FUNDED MULTIPLE EMPLOYER
38	WELFARE ARRANGEMENT THAT IS REGISTERED BY THE
39	NEW JERSEY DEPARTMENT OF BANKING AND INSURANCE.
40	FOR ADDITIONAL INFORMATION ABOUT THE MULTIPLE
41	EMPLOYER WELFARE ARRANGEMENT YOU SHOULD ASK
42	QUESTIONS OF YOUR TRUST ADMINISTRATOR OR YOU
43	MAY CONTACT THE NEW JERSEY DEPARTMENT OF
44	BANKING AND INSURANCE AT(this blank
45	should include the department's current "800" consumer service
46	telephone number).] ²

¹[8.] ²[9.¹] <u>8. a.</u>² Except as provided by this act, the insurance laws of this State do not apply to the operation of self-funded multiple employer welfare arrangements. A self-funded multiple employer welfare arrangement is not an insurance company or insurer under the laws of this State.

²b. Any self-funded multiple employer welfare arrangement shall offer all products that it is actively marketing to any employer, and accept any employer and any employee of that employer who applies for any of those products; provided, however that a self-funded multiple employer welfare arrangement may limit participation to members of the association.

c. Assessments payable by small employer members, except for dental plans, shall be established in accordance with the rating requirements of section 9 of P.L.1992, c.162 (C.17B:27A-25) and regulations promulgated thereunder; provided, however, that for the first year after the effective date of this act, a self-funded multiple employer welfare arrangement providing benefits in this State prior to the effective date of this act shall: (1) not charge a small employer member an assessment greater than 300 percent of the assessment charged to the lowest rated small employer member of the self-funded multiple employer welfare arrangement; (2) for the second year after the effective date of this act, not charge a small employer member an assessment greater than 250 percent of the assessment charged to the lowest rated small employer member of the self-funded multiple employer welfare arrangement; and (3) for each year thereafter, comply with the rating requirements of section 9 of P.L.1992, c.162 (C.17B:27A-25) and regulations promulgated thereunder.

d. The health benefits to be provided by the self-funded multiple employer welfare arrangement shall at all times be equal to or greater than benefits required to be provided in the lowest benefit level standard plan promulgated by the New Jersey Small Employer Health Benefits Program pursuant to P.L.1992, c.162 (C.17B:27A-17 et seq.).²

¹[9.] ²[10.¹] 9.² a. The commissioner may, upon reasonable notice, conduct an examination of the loss reserves of a self-funded multiple employer welfare arrangement as often as the commissioner in his discretion may deem necessary. ²The expenses of the examination shall be paid by the self-funded multiple employer welfare arrangement so examined. The commissioner shall also annually review the RBC report of the self-funded multiple employer welfare arrangement.²

b. If the commissioner finds that the reserves are inadequate, he shall notify the self-funded multiple employer welfare arrangement of the inadequacy. ²Capital and surplus shall be automatically considered inadequate if they do not meet or exceed the following: (1) for the

1 calendar year ending December 31, 2002, 80 percent of the regulatory 2 action level RBC determined in accordance with the RBC instructions; (2) for the calendar year ending December 31, 2003, 90 percent of the 3 4 regulatory action level RBC determined in accordance with the RBC 5 instructions; (3) for the calendar year ending December 31, 2004, 95 percent of the regulatory action level RBC determined in accordance 6 7 with the RBC instructions; and (4) for the calendar years ending on or after December 31, 2005, the regulatory action level RBC determined 8 in accordance with the RBC instructions.² Within 30 days the self-9 funded multiple employer welfare arrangement shall file and implement 10 a plan to correct the inadequacy. The inadequacy shall be corrected 11 12 within 90 days of the implementation of the plan to correct the 13 inadequacy. 14 $^{1}[10.]$ $^{2}[11.]$ 1 1 2 a. The commissioner may revoke or suspend 15 the certificate of registration of any self-funded multiple employer 16 17 welfare arrangement that fails to correct any inadequacy pursuant to section 9 of this act or violates any provision of this act. 18 19 b. Any person who violates any provision of this act or the rules 20 and regulations issued pursuant thereto shall be liable to a penalty of 21 not more than \$1,000 for a first offense and not more than \$5,000 for 22 each subsequent offense. 23 ¹[11.] ²[12.¹] 11.² Any rehabilitation, liquidation, conservation or 24 dissolution of a self-funded multiple employer welfare arrangement 25 shall be conducted under the supervision of the ²[commissioner, who 26 27 shall have all power with respect to it under the laws governing the rehabilitation, liquidation, conservation or dissolution of insurers] 28 State Superior Court in the county in which the self-funded multiple 29 employer welfare arrangement has its principal office². 30 31 ¹[12.] ²[13.¹] 12.² The commissioner, in accordance with the 32 "Administrative Procedure Act," P.L.1968, c.410 (C.52:14B-1 et 33 34 seq.), may adopt rules and regulations necessary to effectuate the 35 purposes of this act. 36 $^{1}[13.]$ $^{2}[14.]$ $^{1}]$ 1 This act shall take effect on the $^{2}[180th]$ 37 90th² following enactment. 38 39 40

43 Regulates self-funded multiple employer welfare arrangements.

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CHAPTER 352

AN ACT concerning self-funded multiple employer welfare arrangements.

BE IT ENACTED by the Senate and General Assembly of the State of New Jersey:

C.17B:27C-1 Short title.

1. This act shall be known and may be cited as the "Self-Funded Multiple Employer Welfare Arrangement Regulation Act."

C.17B:27C-2 Purposes of act.

- 2. The purposes of this act are to:
- a. provide for the registration of self-funded or partially self-funded multiple employer welfare arrangements;
- b. regulate self-funded or partially self-funded multiple employer welfare arrangements in order to ensure the financial integrity of the arrangements;
- c. provide reporting requirements for self-funded or partially self-funded multiple employer welfare arrangements; and
- d. provide for sanctions against self-funded or partially self-funded multiple employer welfare arrangements that do not comply with the provisions of this act.

C.17B:27C-3 Definitions relative to self-funded multiple employer welfare arrangements.

3. For purposes of this act:

"Association" means a group of 100 or more persons organized and maintained in good faith for purposes other than that of obtaining insurance, in active existence for more than one year, having a constitution and bylaws that provide that: the association holds regular meetings not less than annually to further the purposes of the members; except for credit unions, the association collects dues or solicits contributions from members; and the members have voting privileges and representation on the governing board and committees.

"Commissioner" means the Commissioner of Banking and Insurance.

"Employee welfare benefit plan" has the meaning set forth in subsection (1) of 29 U.S.C. s.1002.

"Multiple employer welfare arrangement" has the meaning set forth in subsection (40) of 29 U.S.C. s.1002.

"Self-funded multiple employer welfare arrangement" means a self-funded or partially self-funded multiple employer welfare arrangement that provides for health benefits plans that has two or more employers who each have two or more employees and that has one or more of the employer members either domiciled in this State or its principal headquarters or principal administrative office located in this State.

"Small employer" means the same as defined in section 1 of P.L.1992, c.162 (C.17B:27A-17).

C.17B:27C-4 Annual registration fee.

4. A self-funded multiple employer welfare arrangement shall register annually with the commissioner and pay a registration fee established by the commissioner which shall not exceed \$1,000.

C.17B:27C-5 Deposit, maintenance of cash, securities.

- 5. a. A self-funded multiple employer welfare arrangement shall deposit and continuously maintain with a financial institution licensed in this State, cash or securities as defined in N.J.S. 17B:18-37, having an admitted asset value of not less than \$200,000. The deposit shall be held for the benefit and protection of all covered members of the self-funded multiple employer welfare arrangement. The self-funded multiple employer welfare arrangement shall further maintain a cash reserve for loss in an amount established by a qualified actuary as being adequate to provide for all incurred losses including unpaid claims.
- b. A self-funded multiple employer welfare arrangement shall maintain aggregate stop-loss coverage, with a retention level of 125 percent of expected claims per year, including provisions to cover incurred, unpaid claims liability in the event of the termination or liquidation of the self-funded multiple employer welfare arrangement, and specific stop-loss coverage, with a retention level determined annually by a qualified actuary based on sound actuarial principles. Any stop-

loss contract maintained pursuant to this subsection shall contain a provision that the stop-loss insurer shall give the self-funded multiple employer welfare arrangement and the commissioner a minimum of 180 days' notice of cancellation or nonrenewal. If the self-funded multiple employer welfare arrangement fails to secure replacement coverage within 90 days after receipt of the notice of cancellation or nonrenewal, the trustees of the self-funded multiple employer welfare arrangement shall provide for the orderly liquidation of the self-funded multiple employer welfare arrangement.

C.17B:27C-6 Required filings.

- 6. Each self-funded multiple employer welfare arrangement shall file all of the following with the commissioner:
- a. No later than May 15th of each calendar year or four months and 15 days after the end of each fiscal year of the self-funded multiple employer welfare arrangement, financial statements audited by a certified public accountant and on forms prescribed by the commissioner, an actuarial opinion rendered by a qualified actuary, a report of its Risk-Based Capital (RBC) as of the end of the immediately preceding calendar year, in a form and containing such information as is required by the instructions adopted by the National Association of Insurance Commissioners for health insurers, as amended from time to time and proof of the deposit required in accordance with section 5 of this act. The opinion shall be based on standards adopted from time to time by the Actuarial Standards Board and on any additional standards that the commissioner may prescribe by regulation. For purposes of this section and section 5 of this act, "qualified actuary" means a member in good standing of the American Academy of Actuaries who meets the requirements set forth in regulations of the commissioner.
- b. Within 60 days after the end of each fiscal quarter, unaudited financial statements on forms prescribed by the commissioner, affirmed by an appropriate officer or agent of the self-funded multiple employer welfare arrangement.
- c. Within 60 days after the end of each fiscal quarter, a report on forms prescribed by the commissioner certifying that the self-funded multiple employer welfare arrangement maintains cash or liquid assets in a claim reserve account sufficient to meet the requirements of section 5 of this act.

C.17B:27C-7 Liability of members.

- 7. a. The liability of each member for the obligations of the self-funded multiple employer welfare arrangement shall be individual, several and proportionate, but not joint, except as provided in this section.
- b. Each member shall have a contingent assessment liability pursuant to subsection c. of this section. Each benefit plan issued by a self-funded multiple employer welfare arrangement shall contain a statement of the contingent liability. Both the application for benefits and the benefit plan shall contain in contrasting color, not less than 10-point type, the following statement: "This is a fully assessable benefit plan. In the event that the self-funded multiple employer welfare arrangement is unable to pay its obligations, members shall be required to contribute on a pro rata earned premium basis the funds necessary to meet any unfilled obligations."
- c. All self-funded multiple employer welfare arrangements shall provide that members are assessed in accordance with the provisions of this section. Each self-funded multiple employer welfare arrangement may assess all members if its prior fiscal year statement of operations reflected a loss. Each self-funded multiple employer welfare arrangement shall assess all members if the arrangement's fund balance or reserve at the end of any accounting period is less than the amount required by law. The minimum assessment shall be the amount necessary to comply with the requirements of sections 5 and 9 of this act. Each member's assessment shall be computed by applying the earned premium for each employer's benefit plan during the prior fiscal year as a percent of the amount of the total of all employers' earned premium for the same year. Each member's assessment shall be that members's percent times the total assessment levied. In the event a member fails to pay an assessment, the other members shall be liable on a proportionate basis for an additional assessment. The self-funded multiple employer welfare arrangement, acting on behalf of all members who paid the additional assessment, shall take

appropriate legal action to recover the assessment from any member who fails to pay an assessment.

- d. In the event of a rehabilitation, liquidation, conservation or dissolution of a self-funded multiple employer welfare arrangement, the court, pursuant to section 11 of this act, may assess the members in the amounts needed to pay all incurred but unpaid claims and all projected claims, together with the costs and expenses of collecting the assessments, a reasonable loading factor for uncollected assessments and the costs and expenses of the rehabilitation, liquidation, conservation or dissolution.
- e. The following notice shall be provided to employers and employees who obtain coverage from a self-funded multiple employer welfare arrangement:

NOTICE

THE SELF-FUNDED MULTIPLE EMPLOYER WELFARE ARRANGEMENT IS NOT AN INSURANCE COMPANY AND DOES NOT PARTICIPATE IN ANY OF THE GUARANTEE FUNDS CREATED BY NEW JERSEY LAW. THESE FUNDS WILL NOT PAY YOUR CLAIMS OR PROTECT YOUR ASSETS IF A SELF-FUNDED MULTIPLE EMPLOYER WELFARE ARRANGEMENT BECOMES INSOLVENT AND IS UNABLE TO MAKE PAYMENTS AS PROMISED.

THE HEALTH CARE BENEFITS THAT YOU HAVE PURCHASED OR ARE APPLYING TO PURCHASE ARE BEING ISSUED BY A SELF-FUNDED MULTIPLE EMPLOYER WELFARE ARRANGEMENT.

FOR ADDITIONAL INFORMATION ABOUT THE MULTIPLE EMPLOYER WELFARE ARRANGEMENT YOU SHOULD ASK QUESTIONS OF YOUR TRUST ADMINISTRATOR AT ______(this blank should include the "800" consumer service telephone number).

C.17B:27C-8 Inapplicability of insurance laws.

- 8. a. Except as provided by this act, the insurance laws of this State do not apply to the operation of self-funded multiple employer welfare arrangements. A self-funded multiple employer welfare arrangement is not an insurance company or insurer under the laws of this State.
- b. Any self-funded multiple employer welfare arrangement shall offer all products that it is actively marketing to any employer, and accept any employer and any employee of that employer who applies for any of those products; provided, however that a self-funded multiple employer welfare arrangement may limit participation to members of the association.
- c. Assessments payable by small employer members, except for dental plans, shall be established in accordance with the rating requirements of section 9 of P.L.1992, c.162 (C.17B:27A-25) and regulations promulgated thereunder; provided, however, that for the first year after the effective date of this act, a self-funded multiple employer welfare arrangement providing benefits in this State prior to the effective date of this act shall: (1) not charge a small employer member an assessment greater than 300 percent of the assessment charged to the lowest rated small employer member of the self-funded multiple employer welfare arrangement; (2) for the second year after the effective date of this act, not charge a small employer member an assessment greater than 250 percent of the assessment charged to the lowest rated small employer member of the self-funded multiple employer welfare arrangement; and (3) for each year thereafter, comply with the rating requirements of section 9 of P.L.1992, c.162 (C.17B:27A-25) and regulations promulgated thereunder.
- d. The health benefits to be provided by the self-funded multiple employer welfare arrangement shall at all times be equal to or greater than benefits required to be provided in the lowest benefit level standard plan promulgated by the New Jersey Small Employer Health Benefits Program pursuant to P.L.1992, c.162 (C.17B:27A-17 et seq.).

C.17B:27C-9 Examination of loss reserves.

9. a. The commissioner may, upon reasonable notice, conduct an examination of the loss reserves of a self-funded multiple employer welfare arrangement as often as the commissioner

in his discretion may deem necessary. The expenses of the examination shall be paid by the self-funded multiple employer welfare arrangement so examined. The commissioner shall also annually review the RBC report of the self-funded multiple employer welfare arrangement.

b. If the commissioner finds that the reserves are inadequate, he shall notify the self-funded multiple employer welfare arrangement of the inadequacy. Capital and surplus shall be automatically considered inadequate if they do not meet or exceed the following: (1) for the calendar year ending December 31, 2002, 80 percent of the regulatory action level RBC determined in accordance with the RBC instructions; (2) for the calendar year ending December 31, 2003, 90 percent of the regulatory action level RBC determined in accordance with the RBC instructions; (3) for the calendar year ending December 31, 2004, 95 percent of the regulatory action level RBC determined in accordance with the RBC instructions; and (4) for the calendar years ending on or after December 31, 2005, the regulatory action level RBC determined in accordance with the RBC instructions. Within 30 days the self-funded multiple employer welfare arrangement shall file and implement a plan to correct the inadequacy. The inadequacy shall be corrected within 90 days of the implementation of the plan to correct the inadequacy.

C.17B:27C-10 Revocation, suspension of certificate of registration; violations, penalties.

- 10. a. The commissioner may revoke or suspend the certificate of registration of any self-funded multiple employer welfare arrangement that fails to correct any inadequacy pursuant to section 9 of this act or violates any provision of this act.
- b. Any person who violates any provision of this act or the rules and regulations issued pursuant thereto shall be liable to a penalty of not more than \$1,000 for a first offense and not more than \$5,000 for each subsequent offense.

C.17B:27C-11 Rehabilitation, liquidation, conservation, dissolution.

11. Any rehabilitation, liquidation, conservation or dissolution of a self-funded multiple employer welfare arrangement shall be conducted under the supervision of the State Superior Court in the county in which the self-funded multiple employer welfare arrangement has its principal office.

C.17B:27C-12 Rules, regulations.

- 12. The commissioner, in accordance with the "Administrative Procedure Act," P.L.1968, c.410 (C.52:14B-1 et seq.), may adopt rules and regulations necessary to effectuate the purposes of this act.
 - 13. This act shall take effect on the 90th following enactment.

Approved January 6, 2002.