DIGEST

<u>Present law</u> requires every insurer to notify the policyholder in writing at least forty-five days before any increase of twenty percent or more in the policy rates or at least sixty days before any cancellation or nonrenewal of a policy. Requires every health insurance issuer providing coverage to an employer group comprising more than 100 enrollees to provide the premium rate or amount to be paid to renew the group policy at least ninety days prior to the date of renewal or termination.

<u>Proposed law</u> retains <u>present law</u>.

<u>Proposed law</u> requires every health insurance issuer to provide claims data not less than 90 days prior to the renewal of a policy. Provides for the claims data to include:

(1)   net claims paid by month during the policy period.

(2)   monthly enrollment by employee only, employee and spouse, employee and family during the policy period.

(3)   the amount of any claims reserve established by the insurance provider against future claims.

(4)   claims over $10,000 including claimant identifier, the date of occurrence, the amount of claims paid and those unpaid or outstanding, and claimant health condition or diagnosis.

(5)   a complete listing of all potential catastrophic diagnosis and prognosis involving persons covered by the policy.

Proposed law does not authorize disclosure of the identity of particular employees nor of their particular health insurance claim, condition, diagnosis or prognosis if disclosure would violate any federal or state law.

Effective August 15, 2011.

(Adds R.S. 22:978(E))