HOUSE AMENDMENT

Bill No. CS/HB 7081

| | Amendment No. |
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| | CHAMBER ACTION |
| | Senate House |
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| 1 | Representative Bean offered the following: |
| 2 | |
| 3 | Amendment |
| 4 | Remove lines 700-715 and insert: |
| 5 | (6) PRICING Prices for the products sold through the |
| 6 | program shall be transparent to participants and established by |
| 7 | the vendors based on age, gender, and location of participants. |
| 8 | The corporation shall develop a methodology to evaluate the |
| 9 | actuarial soundness of products offered through the program. The |
| 10 | methodology shall be reviewed by the Office of Insurance |
| 11 | Regulation prior to use by the corporation. Prior to making the |
| 12 | product available to individual participants, the corporation |
| 13 | shall use the methodology to compare the expected health care |
| 14 | costs for the covered services and benefits to the vendor's |
| 15 | price for that coverage. The results shall be reported to |
| 16 | individuals participating in the program. Once established, the |
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| 17 | price set by the vendor must remain in force for at least 1 year |
| 18 | and may only be redetermined by the vendor at the next annual |
| 19 | enrollment period. The corporation shall annually assess a |
| 20 | surcharge for each premium or price set by a participating |
| 21 | vendor. This surcharge may not be more than 2.5 percent of the |
| 22 | price and shall be used to generate funding for administrative |
| 23 | services provided by the corporation and payments to buyers' |

24 <u>representatives</u>.