1 2	State of Arkansas 82nd General Assembly	A Bill	
3	Regular Session, 1999		HOUSE BILL 1328
4	11084111 20001011, 1777		110 0.2 2.22 10 20
5	By: Representative Magnus		
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7			
8		For An Act To Be Entitled	
9	"AN ACT TO AMEND ARKANSAS CODE 23-63-216 (a)(1) TO		
10	CLARIFY THE PROPER NAIC FORM OF INSURER ANNUAL REPORTS		
11	WHICH THE INSURANCE COMMISSIONER PRESCRIBES FOR USE;		
12	TO AMEND ARKA	ANSAS CODE 23-76-113 AS TO HE	ALTH
13	MAINTENANCE (	ORGANIZATIONS (HMOs); TO CLAR	RIFY THE
14	REQUIREMENTS FOR ANNUAL AND QUARTERLY FINANCIAL REPORT		
15	FILINGS FROM	HMOs ON NAIC FORMS PRESCRIBE	ED FOR USE BY
16	THE INSURANCE	COMMISSIONER, AND FOR OTHER	R PURPOSES. "
17			
18		Subtitle	
19	"TO AME	ND ARKANSAS CODE 23-63-216 A	ND 23-
20	76-113	AS TO INSURER AND HMO ANNUAL	AND
21	QUARTER	LY FINANCIAL REPORTS ON NAIC	
22	FORMS FO	OR FILING WITH THE INSURANCE	
23	COMMISS	I ONER. "	
24			
25	BE IT ENACTED BY THE GENE	ERAL ASSEMBLY OF THE STATE OF	ARKANSAS:
26			
27	SECTION 1. Arkansas	s Code 23-63-216(a)(1) is her	reby amended to read as
28	follows:		
29	"(1) The statement	shall be the appropriate $\underline{and}$	<u>l most recent</u> National
30	Association of Insurance Commissioners' annual statement blank:		
31	'Annual Statement E	Blank for Life and Accident a	and Health'; or
32	'Property and Casualty Annual Statement Blank'; or		
33	'Title Insurance Ar	nnual Statement Blank'; or	
34	<u>'Hospital, Medical</u>	and Dental Service or Indemn	nity Corporations Annual
35	Statement Blank'; or		
36	<u>'Fraternal Annual S</u>	Statement Blank'; or	

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1	Other NAIC convention blank as appropriate;		
2	which shall be prepared in accordance with the most recent and appropriate,		
3	<u>companion</u> National Association of Insurance Commissioners' <u>'Annual Statement</u>		
4	<u>Instructions'</u> instructions handbook and follow those accounting practices and		
5	procedures prescribed by the $\underline{most}$ recent and appropriate, $companion$ National		
6	Association of Insurance Commissioners' Accounting Practices and Procedures		
7	Manual . "		
8			
9	SECTION 2. Ark. Code Ann. 23-76-113 is hereby amended to read as		
10	follows:		
11	"23-76-113. Annual report <sub>-</sub> and Quarterly Report.		
12	(a) Every health maintenance organization (HMO) shall annually, on or		
13	before March $1\underline{st}$ , file a report verified by at least two (2) principal		
14	officers with the commissioner, with a copy to the Director of the Department		
15	of Health, covering the preceding calendar year.		
16	(b) The report shall be on forms prescribed by the commissioner		
17	and shall include: For the report to be filed March 1, 2000, and annually		
18	thereafter, the annual report prescribed by the commissioner shall be the		
19	appropriate and most recent National Association of Insurance Commissioners'		
20	'Annual Statement Blank for Health Maintenance Organizations', which shall be		
21	prepared in accordance with the National Association of Insurance		
22	Commissioners' 'Annual Statement Instructions for Health Maintenance		
23	Organizations'; and shall follow those accounting practices and procedures		
24	prescribed by the most recent National Association of Insurance Commissioners'		
25	'Accounting Practices and Procedures Manual for Health Maintenance		
26	Organizations'. Each authorized HMO shall furnish all information as called		
27	for by the National Association of Insurance Commissioners' 'Annual Statement		
28	Blank for Health Maintenance Organizations'; further it shall be verified by		
29	$\underline{\text{oath or affirmation of the health maintenance organization's president or vice}\\$		
30	president and secretary or actuary. The commissioner shall furnish to each		
31	domestic health maintenance organization two (2) copies of the forms on which		
32	the annual statement is to be made. The annual report shall include:		
33	(1) A financial statement of the organization including its		
34	balance sheet and receipts and disbursements for the preceding year An annual		
35	<u>audited financial report</u> certified by an independent <u>certified</u> public		
36	accountant;		

1	(2) Any material changes in the information submitted pursuant to		
2	§ 23-76-107(c);		
3	(3) The number of persons enrolled during the year, the number of		
4	enrollees as of the end of the year, and the number of enrollments terminated		
5	during the year;		
6	(4) A summary of information compiled pursuant to § 23-76-108 in		
7	such form as required by the Director of the Department of Health; and		
8	(5) Any other information, on an annual, quarterly or more		
9	frequent basis as the commissioner shall prescribe, relating to the		
10	performance of the health maintenance organization which is necessary to		
11	enable the commissioner to carry out his duties under this chapter.		
12	(c) Any health maintenance organization that fails to file the <u>annual</u> ,		
13	quarterly or any required financial or other report when due shall may be		
14	subject to a penalty of one hundred dollars (\$100) for each day of delinquency		
15	in the commissioner's discretion, or unless the penalty is waived by the		
16	commissioner upon a showing of good cause by the organization.		
17	(d) Beginning on and after January 1, 2000, each authorized health		
18	maintenance organization (HMO) shall prepare and file with the commissioner a		
19	quarterly financial report on forms and at such times as shall be prescribed		
20	by the commissioner. The quarterly financial report shall be the appropriate		
21	and most recent National Association of Insurance Commissioners' (NAIC)		
22	'Quarterly Statement Blank for Health Maintenance Organizations', which shall		
23	be prepared in accordance with the National Association of Insurance		
24	Commissioners' 'Quarterly Statement Instructions for Health Maintenance		
25	Organizations'; and shall follow those accounting procedures and practices		
26	prescribed by the National Association of Insurance Commissioners' 'Accounting		
27	<u>Practices and Procedures Manual for Health Maintenance Organizations'. The</u>		
28	quarterly statement shall be verified by the officers of the HMO as required		
29	by the NAIC convention blank."		
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31	SECTION 3. All provisions of this Act of a general and permanent nature		
32	are amendatory to the Arkansas Code of 1987 Annotated and the Arkansas Code		
3.3	Revision Commission shall incorporate the same in the Code		

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SECTION 4. If any provision of this Act or the application thereof to

any person or circumstance is held invalid, such invalidity shall not affect other provisions or applications of the Act which can be given effect without the invalid provision or application, and to this end the provisions of this Act are declared to be severable. SECTION 5. All laws and parts of laws in conflict with this Act are hereby repealed.