

HB 275 -- Health Services at Public Institutions of Higher Education

Sponsor: Cunningham (86)

Beginning with the 2005-2006 school year, public institutions of higher education providing student health care for free or at a reduced cost must meet certain requirements. Students must select from among health care options that are cost-neutral to the state. The institutions must not use state appropriations for the services and must submit insurance claims for any students covered by a private insurer or an institutional insurance plan. Health insurers or benefit plans must accept claims and reimburse at the out-of-network rate if the institution is not a network provider. If the institution receives reimbursement, it cannot charge for costs incurred in excess of the reimbursement. In the third, fourth, and fifth years of implementation, public institutions will report to the General Assembly by July 1 the number of students for whom an insurance claim was made, the total amount of reimbursement collected, the total cost of the health care services provided, the administrative costs of claim submission, and any recommendation or evaluation of the effectiveness of submitting insurance claims.

The provisions of the bill will expire six years from the effective date.