

MULTIPLE EMPLOYER WELFARE ARRANGEMENTS (MEWA) AND MULTIEMPLOYER (MET) PROVISIONS

The date following each state indicates the last time information for the state was reviewed/changed.

| STATE | CITATION | MEWAs and METs PROVISIONS |
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| AL (3/24) | Bulletin of 7-12-90 (A) | Licensed insurance agents violate the Alabama Insurance Code by placing insurance with an unauthorized insurer. State may revoke the agent's license and hold him/her personally liable for payment of all losses incurred by the insureds, enrollees or subscribers of all unauthorized insurance arrangements. "Unauthorized arrangements" include arrangements that claim to be exempt from state insurance laws under ERISA. |
| AK (3/24) | <p>§§ 21.85.010 to 21.85.500</p> <p>§ 21.27.630</p> <p>§§ 21.27.410; 21.33.037; 21.36.360</p> <p>§ 21.03.021</p> <p>§§ 21.56.140 to 21.56.190</p> <p>§ 21.54.500; AK Bulletin 2002-14</p> | <p>Requirements: Certificate of authority. Two or more businesses in the same or a closely related business. Participating employees or employers must have direct control over the MEWA. Nonprofit: Minimum 75 employees. Only medical care benefits, though MEWA can provide life or disability insurance through an insurance provider. Adequate staff or must contract with third party administrator. Cannot solicit participation from general public. Maintain stop loss coverage.</p> <p>If a third party administrator is used, the third party administrator must be registered unless the entity qualifies and obtains an exemption from registration.</p> <p>Each producer is responsible for determining whether a MEWA is properly licensed and may be subjected to penalties for violating this responsibility.</p> <p>A person that provides coverage for medical care is subject to insurance laws unless it is subject to the jurisdiction of another state or federal agency and provides the director with the appropriate license or certificate.</p> <p>Definition of "health care insurer" includes "welfare arrangements" which are defined as MEWAs under 29 U.S.C. § 1002, but excludes fully insured multiple employer welfare arrangements.</p> <p>MEWA deemed a "health care insurer" so all statutes applicable to health care insurers apply except where specifically pre-empted by ERISA.</p> |
| AZ (3/24) | <p>§ 20-115</p> <p>§§ 20-106; 20-401.01; Circular Letter 92-5</p> | <p>Makes provider of health care benefits subject to insurance laws of the state unless provider can show that the provider is under the jurisdiction of a different state or federal agency.</p> <p>The Arizona Insurance Code provides that the transaction of insurance be performed only by individuals and entities who comply with the statutory requirements. Any insurer underwriting coverage to Arizona residents must either hold a certificate of authority or have a valid, documented claim of exemption.</p> |

MULTIPLE EMPLOYER WELFARE ARRANGEMENTS (MEWA) AND MULTIEMPLOYER (MET) PROVISIONS

| STATE | CITATION | MEWAs and METs PROVISIONS |
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| AR (3/24) | § 23-65-101 | Representing an unauthorized MEWA is prohibited. |
| | § 23-92-101 | Multiple employer trusts must register or be licensed with department. Fully insured MEWAs must register; those not fully insured must obtain a certificate of authority. Authority to adopt regulation. Associations that sponsor MEWAs are not required to disclose to the public the address of a trustee if that trustee is not the designated administrator of the plan. MEWAs are not required to be organized and in active existence for more than one year if the association has a substantial business purpose other than obtaining insurance or insuring an association's members. |
| | § 23-92-201 | Unregistered third party administrators for MEWAs are prohibited. |
| | §§ 23-61-501 to 23-61-504 | Makes provider of health care benefits subject to insurance laws of the state unless provider can show that the provider is not subject to the jurisdiction of the department. |
| CA (3/24) | Ins. §§ 742.20 to 742.43 | Self-funded or partially self-funded MEWAs are required to obtain certificate of compliance from department of insurance before providing benefits to residents. An eligible MEWA must be nonprofit, established by a trade/industry/professional association or business group with at least 200 paid members and in operation for 5 continuous years and organized, and be organized and maintained for a period of 5 continuous years with at least 2,000 employees and 50 paid employer members. MEWAs must meet listed requirements and maintain required reserves. Notice that the MEWA is not protected by the state's guaranty fund must be provided to employers and employees that obtain coverage from the MEWA. MEWAs are subject to examinations by the department of insurance just like other insurers. |
| | Ins. § 740 | Makes provider of health care benefits subject to insurance laws of the state unless provider can show that the provider is under the jurisdiction of a different state or federal agency. |
| | Bulletin 92-4 | MEWAs that are not fully insured are considered to be "insurers" under California Insurance Code and are subject to licensing requirements, financial standards (reserves), and standards of conduct as insurers. |

MULTIPLE EMPLOYER WELFARE ARRANGEMENTS (MEWA) AND MULTIEMPLOYER (MET) PROVISIONS

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| CO (3/24) | § 10-3-903.5 3 CRR 702 Reg. 4-2-10 | Exempt MEWAs that have been in existence since 1983; maintain reserves of at least 5% of the first \$2 million of annual contributions made in the preceding year; file an annual financial statement demonstrating maintenance of required reserves; file an actuarial opinion stating that reserves, contributions and funding levels are adequate; or provide benefits which are in “substantial compliance with mandated benefit provisions” applicable to insurers offering health insurance coverage. The exempt MEWAs that are grandfathered in under the 10-year exception must be sponsored and maintained by an association with employers that participate and fund it, must provide other than employee welfare benefits, and must provide business/professional assistance and benefits to its members who share common business interest and engage in same trade or business. Exemption not applicable if insurance department determines that its operation is hazardous to the public or to individuals receiving benefits. Clarifies information to be filed by MEWAs claiming exempt status and clarifies responsibilities of licensed producers. Filing requirements include evidence that the MEWA has existed continuously since January 1, 1983 and copies of the sponsor association’s organizational documents, membership criteria, ownership information, and financial reports. Only applies to MEWAs subject to § 10-3-903.5. |
| CT (3/24) | § 38a-476 Regs. §§ 38a-272-1 to 38a-272-10 Bulletin No. HC-43 | MEWAs (except fully insured) are subject to preexisting conditions provisions of the health insurance code. Requires agents and brokers to submit information about MEWAs to department. Lack of knowledge or intent to deceive with respect to the organization or status of a reportable MEWA is not a defense to a violation of these regulations. “Self-insured” MEWAs and METs operating without authorization or license are illegal operations transacting insurance. |
| DE (3/24) | 18 Del. Admin. Code 505(d) 18 Del. Admin. Code 1405-4.0; 1405-5.0 | Makes provider of health care benefits subject to insurance laws unless provider under the jurisdiction of another state or federal agency. Filing requirements for MEWAs (except fully insured MEWAs). |

MULTIPLE EMPLOYER WELFARE ARRANGEMENTS (MEWA) AND MULTIEMPLOYER (MET) PROVISIONS

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| DC (3/24) | §§ 31-3271; 31-3001; 31-3301.01 | Coverage provided by MEWAs is considered a health benefit plan and is subject to all rules and regulations regarding general health benefit plans. MEWAs are considered health insurers and all rules and regulations applicable to health insurers are applicable to MEWAs. |
| | §§ 31-3302.06a; 31-3303.13b; 31-3303.13c; 31-3462 | Individual market requirements apply to MEWA health benefit plans when a covered individual is not an employee or dependent of a participating employer. No MEWA located outside the District may conduct business within the District unless licensed as an insurer, hospital and medical services corporation, fraternal benefit society, or HMO. |
| | Bulletin No. 14-001-IB (#2) (December 17, 2014) | A MEWA that solicits or provides health benefits to one or more employers domiciled in the District of Columbia is subject to District of Columbia insurance laws, regardless of whether the MEWA is regulated under ERISA or whether the MEWA is domiciled in the District of Columbia. |
| FL (3/24) | § 624.33 | Makes provider of health care benefits subject to insurance laws or an examination as the department or office deems necessary. |
| | §§ 624.436 to 624.446 | MEWA must get certificate of authority from insurance department, file quarterly reports, file annual actuarial statement, and meet solvency requirements (\$200,000 at time of application and maintain the greater of \$100,000 or 10% of total liabilities). MEWAs subject to triennial examinations or more frequent if determined to be necessary by commissioner. MEWAs must be nonprofit and established by a trade association, industry association, or professional association. |
| | §§ 626.896 to 626.899 | Each MEWA must provide competent claims adjusters and underwriters. Service companies working for MEWAs must be approved by the office. |
| | Rule 69O-192.004 to 69O-192.053 | Rule implements provisions of Chapter 624 and regulates the issuance of certificate of authority and operation of MEWAs. Chapter 624 does not apply to arrangements providing fully insured benefits by authorized insurers or to ERISA-exempt entities. |
| | Rule 69O-230.033 | Insurance agents must submit information to the insurance department prior to marketing unlicensed insurers to assist the office in identifying unauthorized insurers before transactions occur. |

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| GA (3/24) | <p>§§ 33-50-2 to 33-50-14</p> <p>§ 33-27-1</p> <p>§ 33-30-1</p> <p>R. & Regs. 120-2-50-.01 to 120-2-50-.16</p> <p>R. & Regs. 120-2-67-.14</p> <p>Bulletin 77-AL-2</p> | <p>Multiple employer self-insured health plans must be licensed. Licensing chapter does not apply to arrangements established by political subdivisions, plans exempt under ERISA, nonprofit organizations or nonprofit educational organizations with assets of more than \$100 million. Self-insured multiple employer health plans must have aggregate excess stop loss coverage and individual excess stop loss coverage provided by a licensed insurer. Plans subject to loss reserve (surplus accounts) and dissolution requirements.</p> <p>The lives of a group of individuals may be insured collectively under an entity providing a MEWA.</p> <p>MEWAs are eligible to provide group accident and sickness insurance and are regulated under the associated insurance statutes.</p> <p>Implements standards and requirements of multiple employer self-insured health plans. Subject to disclosure (not protected by state against insolvency) and filing (financial statement prepared by a CPA) requirements.</p> <p>Policies issued to a Georgia resident by MET or MEWA in another state must be submitted to Georgia Department of Insurance for approval prior to use.</p> <p>METs that are employee benefit plans are subject to specific standards of compliance with ERISA. Non-preempted MEWAs and METs will be regulated by the state. Agents representing unauthorized insurers are personally liable for loss and premium taxes.</p> |
| HI (3/24) | Memoranda 2005-1H (August 11, 2005) | MEWAs are regulated by the department of insurance and are required to have a license in order to transact business in Hawaii. |
| ID (3/24) | <p>§§ 41-4001 to 41-4025; IDAPA 18.04.05</p> <p><i>Employer's Res. Mgmt. Co. v. Dept. of Ins.</i>, 141 P.3d 1048 (Idaho 2006).</p> | <p>Sets out plan requirements for self-insurers which specifically apply to METs and MEWAs including requirements for administrator, advance receipt of funds, contributions by all employers, and financial soundness. Surplus requirements may be waived under certain circumstances.</p> <p>MEWAs are subject to state regulation and are within the power to regulate insurance held by the commissioner. As such, MEWAs are required to register to transact business in Idaho.</p> |

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| IL (3/24) | 215 ILCS 138/10; 215 ILCS 139/10 215 ILCS 5/122-1 to 5/122-4 | MEWA coverage is included under the definition of health benefit plan for Uniform Prescription Drug Information Card Act and Uniform Health Care Service Benefits Information Card Act. Makes provider of health care benefits subject to insurance laws unless provider can show it is under the jurisdiction of another state or federal agency. |
| IN (3/24) | §§ 27-1-34-1 to 27-1-34-10 §§ 27-8-15-10 to 27-8-15-34.1 760 IAC 1-68-1 to 1-68-19 § 27-9-1-1 | MEWA must get certificate of registration from the insurance department, meet reinsurance requirements, maintain adequate reserve levels and deposits, follow reporting requirements and follow operational and bonding requirements as directed by the commissioner of insurance. This excludes duly admitted insurer, fully insured arrangements by authorized insurers, and ERISA exempt plans. Except as provided in this chapter and in rules adopted by the commissioner under Chapter 4-22-2 and § 27-9-1-1, insurance law does not apply to MEWAs. Small Employer Group Health Insurance Act applies to MEWAs. Prior to registration, MEWA must submit proof of fidelity bond equal to the greater of 10% of premiums or 10% of benefits paid during prior years, with a minimum of \$10,000 and maximum of \$500,000. MEWA must be a not-for-profit organization. Pre-existing conditions requirements and other coverage requirements for MEWAs. If contract with a TPA for services, that entity must also hold a certificate of registration. MEWA must file quarterly and annual financial reports with commissioner. Each MEWA shall maintain a minimum fund balance of \$500,000. Commissioner authority to examine books and records. Filing requirement for forms. The liability of each employer participant for the obligations of the MEWA is joint and several. A schedule of fees is included. Proceedings under supervision; rehabilitation and liquidation apply to all MEWAs. |

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| IA (3/24) | <p>§ 507A.4</p> <p>§§ 513B.1 to 513B.12; 513B.17</p> <p>§ 514C.13</p> <p>§ 514L.1</p> <p>§ 509.19</p> <p>IAC 191-77.1 to 191-77.6</p> | <p>MEWAs are exempt from “unauthorized insurers” provisions.</p> <p>MEWAs may be subject to small group health coverage provisions.</p> <p>MEWAs are included as insurers under regulations regarding group managed care health plans.</p> <p>MEWAs are subject to the Uniform Prescription Drug Information Card Act provisions.</p> <p>MEWAs are included as “person issuing a policy or contract providing group health benefit coverages”.</p> <p>MEWA must register with insurance department. Submit listed information and filing fee of \$100. Surplus requirement is the greater of \$500,000 or 10% of written premium as of end of prior year. Stop loss coverage required. File annual report and actuarial opinion. Subject to examination and unfair trade practices act.</p> |
| KS (3/24) | <p>§ 40-2222</p> <p>Bulletin No. 1991-21</p> | <p>Entities that provide coverage for hospital and medical expenses shall be presumed to be subject to the jurisdiction of the commissioner of insurance unless the entities can show otherwise.</p> <p>Advises third party administrators and others of the legal environment concerning MEWAs in the state. Provides that agents or others involved in the operation of a self-funded MEWA may be subject to penalties stated in the Unauthorized Insurers Act. The agent will be liable to the insured for the full amount of a claim in the event the MEWA should fail. The agent may also be subject to the penalties in the Unfair Trade Practices Act. MEWAs are not recognized in Kansas and are, as such, illegal. This does not apply to ERISA exempt MEWAs.</p> |
| KY (3/24) | <p>§ 304.11-045</p> <p>806 KAR 11:020</p> <p>§ 304.17A-005; Advisory Opinion 2015-1</p> | <p>Makes provider of health care benefits subject to insurance laws unless provider is subject to jurisdiction of another agency of this state or federal agency.</p> <p>MEWAs are required to notify the commissioner of their existence. MEWAs must submit an application fee of \$500 with the application. The application must include the AM Best rating of the stop-loss insurer issuing a policy to the MEWA. Commissioner determines MEWA acceptability and enforces applicable laws.</p> <p>Multiple employer welfare arrangement not exempt from state regulation by ERISA is included in the definition of health care benefits provider. If provider cannot show it is subject to another jurisdiction, then Kentucky will assume jurisdiction over provider.</p> |

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| LA (3/24) | LSA-R.S. 22:1091 | Rate filing laws apply to any employer, association, or trustee of a fund established by an employer, association, or trust for multiple associations who shall be deemed the policyholder. |
| | LSA-R.S. 22:453 | Requires certificate of authority to transact business in Louisiana otherwise shall be considered an unauthorized insurer. |
| | LSA-R.S. 22:454 | Requires an insolvency deposit. |
| | LSA-R.S. 22:455 | Requires administrator of a self-insurance fund to be licensed as a life and health insurance producer. |
| | LSA-R.S. 22:458 | Requires self-insured trusts to maintain unimpaired assets of not less than \$1 million, employers shall be members of 5 or more businesses that are in the same trade or industry, board of trustees serve as fund managers on behalf of participants of trust, trustees bonded in an amount not less than \$150,000 and investments of plan funds are subject to same restrictions as insurers. |
| | LSA-R.S. 22:458.1 | Provides requirements and exemptions for association-sponsored self-insured trust. |
| | LSA-R.S. 22:459 | Requires that each self-insurance plan include aggregate excess stop loss coverage and specific excess stop loss coverage by an insurer licensed by the state of Louisiana. |
| | LSA-R.S. 22:461 | Requires an annual audit by a licensed independent certified public accountant of its financial statements. |
| | LSA-R.S. 22:462 | Provides the commissioner the authority to conduct an annual examination for the initial 3-year period during which the self-insurer transacts business in the state. Thereafter, the commissioner shall make an examination of each self-insurer at least once every 5 years, unless the commissioner, in his discretion, determines that the financial condition or operations of the self-insurer warrant more frequent examinations. |
| | LSA-R.S. 22:463 | Requirements for annual reports and actuarial opinions. |
| | LSA-R.S. 22:464 | Provides for dissolution of self-insurers. |
| | LSA-R.S. 22:465 | Grants the commissioner authority to issue orders to rehabilitate a plan or petition a court of competent jurisdiction when a self-insurer plan is nearing insolvency or is insolvent. |
| | LSA-R.S. 22:466 | Requires self-insurer to comply with requirements of Title 22. |
| | LSA-R.S. 22:467 | Provides the commissioner the authority to issue regulations or rules. |

LOUISIANA (cont.)

MULTIPLE EMPLOYER WELFARE ARRANGEMENTS (MEWA) AND MULTIEMPLOYER (MET) PROVISIONS

| STATE | CITATION | MEWAs and METs PROVISIONS |
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| LA (cont.) | LSA-R.S. 22:468 LSA-R.S. 22:469 LSA-R.S. 22:821 LSA-R.S. 22:48 | Prohibits a self-insurer from unilaterally cancelling or reducing benefits of any covered claims. Self-insurer may only cancel plan after claimant discharged from treatment. Mandates every self-insurer and self-insurance plan shall provide coverage of inherited metabolic diseases. Provides fees for license. Group self-insurers are considered risk bearing entities |
| ME (3/24) | 24-A M.R.S.A. §§ 6601 to 6616 02-031 CMR Ch. 940, § 15 | All employer welfare plans established to provide health benefits to two or more employers for their beneficiaries must be approved by the superintendent. Does not apply to MEWAs that are fully insured by an authorized insurer. MEWAs must be licensed as insurance companies or certified as MEWAs. Criteria for certification: in-state administered, nonprofit established by a trade association, political subdivision of the state, religious organization, and does not deny coverage on basis of health status or claims experience. Must make certain consumer disclosures (summary of benefits and funding via trust fund), maintain excess insurance consistent with sound actuarial principles and approved by the superintendent, maintain loss reserves, and hold funds in a trust. MEWAs are subject to financial examination by the department. If MEWA fails to establish/maintain adequate funding, then it may be required to file a security deposit (\$50,000 to \$1 million) or surety bond. MEWAs must use approved forms and file an annual report. Rate filing and data reporting laws apply to MEWAs. |
| MD (3/24) | Bulletin No. 2009-26 | MEWAs are required to hold certificates of authority to operate in Maryland. |
| MA (3/24) | M.G.L.A. 176J § 1 211 CMR 64.04 211 CMR 153.02 | Each employer under a MEWA is considered a separate group health plan with respect to insurance delivered to employees of small businesses. Small group health insurance applies to MEWAs. MEWAs are included under the definition of health benefit plans and are subject to applicable provisions regulating health benefit plans. MEWAs subject to continuation of care provisions. |

MULTIPLE EMPLOYER WELFARE ARRANGEMENTS (MEWA) AND MULTIEMPLOYER (MET) PROVISIONS

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| MI (3/24) | <p>M.C.L.A. 500.7001 to 500.7090</p> <p>M.C.L.A. 124.5</p> <p>M.C.L.A. 124.73</p> <p>M.C.L.A. 500.3701</p> <p>Admin. Code R. 500.821 to 500.824</p> | <p>Applies to less than fully insured MEWAs that do business in Michigan. Requires certificate of authority, state qualifications (excess loss insurance policy; stable and unimpaired financially; file articles, bylaws and trust agreement as well as annual financial statements audited by a CPA, quarterly uncertified financial statements, and annual certified reserves report; composition and compensation of board of trustees). Required minimum annual gross premiums of \$20,000 for plans that provide only vision, \$75,000 for only dental benefits, and \$200,000 for all other plans; cash reserves greater of 25% of aggregate annual contributions or not less than 35% of claims paid in preceding fiscal year; calculation requirements for cash reserves. Commissioner may require a bond, deposit or security from the MEWA (amount unspecified).</p> <p>A group self-insurance may provide hospital, medical, surgical, or dental benefits to the employees of the member municipalities in the pool if it formed a MEWA under chapter 70.</p> <p>MEWAs are included in the definition of “Carrier” and may be subject to the public employee’s health benefit act.</p> <p>MEWAs may be subject to the small employer group health coverage.</p> <p>There are excess loss insurance requirements for MEWAs.</p> |

MULTIPLE EMPLOYER WELFARE ARRANGEMENTS (MEWA) AND MULTIEMPLOYER (MET) PROVISIONS

| STATE | CITATION | MEWAs and METs PROVISIONS |
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| MN (3/24) | §§ 62H.10 to 62H.17 | Joint self-insurance employee health plans must have at least 1000 covered employees to form. Must comply with either state continuation laws or COBRA rules, even for employers with less than 20 employees that are normally exempt from COBRA. Must have aggregate and specific stop loss coverage. Must offer maternity benefits for all employers, as federally required for employers with over 15 or more employees. Must comply with the ACA. Funds must be held in a trust. Trustee must be bonded. Must submit annual financial reports to commissioner. Must follow Minn. Rules Chapter 2765 below, unless in existence prior to March 1, 1983, or an agricultural cooperative under 62H.18. Employers that participate for less than 3 years must be assessed a standard termination penalty. Insurers, TPAs, agents and brokers cannot assist in MEWA formation. The commissioner may enter into an agreement with the DOL to accept enforcement responsibilities. |
| | Rules, part 2765.0100 to 2765.1500 | Plan must have a qualified actuary. Plan must establish adequate reserves, see details. Stop loss minimum requirements clarified. All coverages offered by a plan must be available according to the same underwriting standards to all employees of all members. Many rules regarding board members, by-laws requirements, dissolution, expulsion, termination run off, membership, voting rights, audit, fidelity bond. Non-Minnesota employees treated as separate plan. State mandated benefits required. Cannot offer coverage to individuals. |
| | § 62H.18 | Agricultural cooperative health plans are regulated under this section and are exempted from 62H.01 to 62H.17 and Minn. Rules 2765. Health status cannot play a role in individual eligibility. The entity must have an aggregate stop loss policy, an actuary must assist the entity in establishing reserves, and the plan must satisfy the requirements of ERISA that apply to employee welfare benefit plans. Plan members are required to participate in the plan for at least 3 consecutive years. If the member terminates participation before the end of the 3-year period, a financial penalty may be assessed under the plan. |
| | § 62L.02 | Small employer insurance reform encompasses joint self-insurance and MEWAs (to extent permitted by ERISA). |
| | § 60A.951 | METs are included in definition of insurer under insurance fraud regulations. |
| | § 62M.01 | Minnesota Utilization Review Act applies to MEWAs. |

MULTIPLE EMPLOYER WELFARE ARRANGEMENTS (MEWA) AND MULTIEMPLOYER (MET) PROVISIONS

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| MS (3/24) | § 83-1-101 | Makes provider of health care benefits subject to insurance laws unless provider under the jurisdiction of another agency of this state or federal agency. |
| | § 83-9-51 | Fully insured MEWAs are subject to continuation of coverage requirements. |
| | §§ 83-63-1 to 83-63-11 | Fully insured MEWAs are subject to small employer health benefit plan provisions including actuarial certification, rates, and renewability guarantees. |
| | § 83-9-6.2 | MEWAs must comply with uniform prescription identification laws. |
| | §§ 83-9-34; 83-9-35 | MEWAs may be subject to accident and health insurance. |
| | § 83-18-1 | MEWAs may be subject to life or health insurance. |
| MO (3/24) | §§ 376.1000 to 376.1045 | Director is authorized to issue certificate of authority to self-insured MEWAs except MEWAs that existed as of 8/28/1993 and are associated with a tax-exempt homogenous association. License fee is 2% of Missouri claims paid by the plan during the preceding calendar year. Each trustee of the plan must be bonded in an amount of at least \$150,000. Employer is responsible for any claims not paid by the MEWA. Penalties for violations. Other requirements include stop loss coverage, funds held in a trust, loss reserves and surplus accounts (greater than three times the average/estimated monthly premium or \$600,000), dissolution requirements, and marketing restrictions. Director can promulgate other regulations. Insurance provisions relating to group health insurance apply to MEWAs. MEWAs are considered insurers for unfair claims settlement practices regulations and laws. |
| | § 376.1224 | Required benefits for autism spectrum disorder applies to MEWAs. |
| | §§ 376.1075 to 376.1095 | Provisions regarding administrators of MEWAs. |
| | § 379.930 | Small Employer Health Insurance Availability Act applies to MEWAs. |
| | 20 CSR 200-14.200; 200-14.200 Form 1; 200-14.300 Form 2; 200-14.400 Form 3 | Application for certificate of authority for self-insured MEWA; contract between MEWAs and participating employer; application for dissolution. |
| | MO Bulletin No. 11-1-78; MO Bulletin No. 1-1-79 (#1) | Out-of-state MET still must be approved by Missouri Department of Insurance prior to solicitation of business from Missouri employers. |

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| MT (3/24) | §§ 33-1-1101 to 33-1-1114 | Makes provider of health care benefits subject to insurance laws unless provider under the jurisdiction of another state or federal agency. |
| | § 33-1-111 | General eligibility requirements for health insurers including MEWAs. Information regarding data collection for Medicaid. |
| | §§ 33-35-101 to 33-35-307 | Provides for the authorization and registration of self-funded MEWAs. Certificate of authority from commissioner required. Commissioner must be satisfied that participants in MEWA are engaged in the same trade or profession, participant employers control the arrangement, benefits are provided to not less than 2 employers and not less than 75 employees. Arrangements organized after 10/01/95 must deposit \$200,000 with the commissioner, submit a written plan of operation or demonstrate financial solvency. Employer confidentiality provisions. Arrangement may be required to maintain excess loss insurance covering 100% of claims in excess of designated attachment point. All arrangements shall maintain as reserves 30% of the unpaid claims liability. Requires notice to consumers that the MEWA is self-funded. Group health insurance, disability insurance, and unfair claim practices provisions apply to self-funded MEWAs. |
| | Mont.Admin.R. 6.6.5701 to 6.6.5708 | Provisions regarding MEWAs and supervision, rehabilitation and supervision. *A MEWA not subject to ERISA requirements will be subject to various mandated benefit requirements. |
| NE (3/24) | §§ 44-7601 to 44-7618 | Insurance laws of the state do not apply, except as specifically stated in this act. MEWAs must hold certificate of registration and pay \$1,000 fee. A MEWA may only be established by an association of participating employers or covered self-employed individuals. Association must have been in existence 3 years and be composed of members in the same trade or industry and must include in the plan a minimum 200 employees. Must maintain surplus of at least \$750,000 held in trust. Must maintain stop loss policy that provides coverage in excess of 125% of the MEWA's expected health care costs. Notify plan participants that benefit plan is not insurance and is not covered by the guaranty fund. File annual financial statement accompanied by \$200 fee and file actuarial report. |

MULTIPLE EMPLOYER WELFARE ARRANGEMENTS (MEWA) AND MULTIEMPLOYER (MET) PROVISIONS

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| NV (3/24) | <p>§§ 689B.010 to 689B.090; 689C.113</p> <p>§ 689A.715</p> <p>NAC 680A.050</p> <p>Bulletin No. 91-004 (December 18, 1991)</p> | <p>Governs the formation, operation and dissolution of multiple employer plans for group health insurance contracts. Pursuant to Reg. 679B.036, commissioner of insurance will interpret the phrase “group organized for purposes other than the procurement of insurance” to include various forms of employer trusts.</p> <p>MEWAs subject to provisions regarding health care portability.</p> <p>To the extent applicable and not inconsistent with federal law, MEWAs must comply with the laws that govern insurers in regard to certificates of authority, capital and surplus, etc.</p> <p>Explains that MEWAs (not fully funded) are subject to state jurisdiction. Agent may be personally liable for claims/losses.</p> |
| NH (3/24) | <p>§§ 415-E:1 to 415-E:16</p> <p>§§ 415-A:1 to 415-A:7</p> <p>§ 400-A:39</p> <p>§ 415:23</p> | <p>Authorizes the commissioner of insurance to regulate MEWAs; specifies standards to obtain approval (MEWA must be nonprofit, established by association, political subdivision, or religious organization); includes reporting requirements. Does not apply to fully insured MEWAs. Requires MEWAs to maintain a termination liability fund balance of at least \$750,000 or 33% of the aggregate premiums billed during the 12 prior months, whichever is greater. Trust deposit or surety bond required (25% of the aggregate premiums billed or \$100,000, whichever is greater). Policy forms subject to the commissioner’s approval.</p> <p>Expands forms and policy standards for health insurance to apply to MEWAs. Authorizes the commissioner to promulgate standards on renewability, conditions of eligibility, mandated coverage, preexisting conditions, and termination.</p> <p>MEWAs must contribute to the commissioner’s fund (pro rata share).</p> <p>Makes provider of health care benefits subject to insurance laws unless provider under the jurisdiction of another state or federal agency.</p> |

MULTIPLE EMPLOYER WELFARE ARRANGEMENTS (MEWA) AND MULTIEMPLOYER (MET) PROVISIONS

| STATE | CITATION | MEWAs and METs PROVISIONS |
|--------------|--|---|
| NJ (3/24) | §§ 17B:27C-1 to 17B:27C-12 | Provides for registration of self-funded or partially self-funded MEWAs. Registration fee of not more than \$1,000 to be set by commissioner. Deposit of \$200,000 for the benefit of covered persons. MEWA must maintain stop loss coverage with a retention level of 125 percent of expected claims per year. File annual audited financial report and quarterly statements. Notice required stating MEWA is not covered by guaranty fund. Use RBC standards to measure adequacy of capital and surplus. |
| | §§ 17B:27A-17 to 17B:27A-19 | Multiple employer arrangements, including MEWAs (both fully insured and not fully insured) cannot withdraw or decrease coverage of a health benefits plan marketed to small employers in effect on 12/31/93 without the commissioner's approval and must make available to their members at least one of the standard plans. |
| | N.J.A.C. 11:4-56.1 to 11:4-56.12 | Regulation establishes rules for the registration, reporting and regulation of self-funded MEWA's. File rating manual with department. Establish trust account with balance equal to sum of liabilities, plus risk-based capital requirement. |
| | N.J.A.C. 11:4-55.1 | MEWAs are included under the definition of health benefit plan for purposes of regulations regarding pharmacy cards. |
| NM (3/24) | §§ 59A-15-14 to 59A-15-20 | Makes provider of health care benefits subject to insurance laws unless provider under the jurisdiction of another state or federal agency. |
| | §§ 59A-23C-1 to 59A-23C-10 | Small Group Rate Renewability Act applies to fully insured MEWAs. |
| | § 59A-41-2 | Conservation, rehabilitation, and liquidation provisions apply to MEWAs. |
| | § 59A-59-3 | Prescription Drug Uniform Information Card Act provisions apply to MEWAs. |
| | § 59A-4-4 | Superintendent's power of examination extends to MEWAs. |
| | N.M. Admin Code 13.19.3.1 through 13.19.3.15 | Requires agents and brokers to submit information about MEWAs to the department. Requires agents only sell policies from licensed MEWAs. MEWA requirements (fully insured and ones established pursuant to ERISA and subject to federal regulation are exempt). MEWA must be registered, meet minimum solvency requirements (greater of \$100,000 or 3 months health care or benefit claims), deposit \$100,000 in trust for benefit of beneficiaries of fund, annually file financial statements to superintendent, and meet stop loss coverage requirements. |

NEW MEXICO (cont.)

MULTIPLE EMPLOYER WELFARE ARRANGEMENTS (MEWA) AND MULTIEMPLOYER (MET) PROVISIONS

| STATE | CITATION | MEWAs and METs PROVISIONS |
|---------------|---|--|
| NM (cont.) | <p>§ 59A-15-20</p> <p>§§ N.M. Admin Code 13.19.4.2 through 13.19.4.38</p> | <p>Must comply with Patient Protection Act and other applicable laws.</p> <p>An unregistered MEWA shall not advertise or solicit membership within the state of New Mexico. Registration requirements do not apply to rural electric or telephone cooperatives operating in compliance with ERISA. No MEWA shall be formed solely for the purpose of selling insurance. An authorized MEWA must provide health benefits to at least 100 covered lives. MEWA directors have fiduciary responsibility for the MEWA's operation and financial condition. MEWA director compensation shall not exceed five percent of the premium attributable to that agent. Describes MEWA application requirements and procedures for review and approval. Every self-funded MEWA shall maintain an unallocated reserve level of not less than 20% of the total premiums in the preceding plan year or 20% of the total estimated premiums for the current plan year, whichever is greater. All persons who handle MEWA funds must be covered by a fidelity bond with a limit of at least \$300,000. A MEWA shall have and maintain individual excess stop-loss insurance that provides for the insurer to assume all liability in excess of the per person limit per year. MEWA registration must be renewed annually. MEWA rates and forms must be filed with the superintendent.</p> |
| NY (3/24) | <p>Circular Letter No. 1991-8 (July 11, 1991)</p> <p>OGC Op. No. 2003-268 (9-24-2003)</p> | <p>All self-funded MEWAs, except those exempted by ERISA, must be licensed to do an insurance business. Only a licensed insurer or a license-exempt organization may offer major medical coverage. Agents soliciting on behalf of unlicensed insurers are subject to penalties and personal liability.</p> <p>New York does not have a statutory scheme for regulating self-insured MEWAs and, as such, for a MEWA to be valid it must be licensed as an insurer and would be subject to all insurance laws including mandated coverages.</p> |

MULTIPLE EMPLOYER WELFARE ARRANGEMENTS (MEWA) AND MULTIEMPLOYER (MET) PROVISIONS

| STATE | CITATION | MEWAs and METs PROVISIONS |
|--------------|---|---|
| NC (3/24) | <p>§§ 58-49-1 to 58-49-25; 58-50A-1 to 58-50A-95</p> <p>§ 58-3-167</p> <p>§ 58-3-227</p> <p>11 NCAC 18.0101 to 18.0121</p> <p>11 NCAC 12.0561</p> | <p>Makes provider of health care benefits subject to insurance laws unless provider under the jurisdiction of another state or federal agency. MEWA (one employer headquartered/principal administrative offices in North Carolina) must be licensed. Qualifications for license (nonprofit, association), financial regulation (excess insurance coverage, loss reserves, fidelity bond of \$50,000 to \$500,000), including annual reports (feasibility study at time of application for license, rate practices information). Only licensed insurers can administer MEWAs. Consumer protection provisions include summary of covered benefits and disclosure that trust fund is not subject to insurance guaranty association. MEWAs are subject to reserve requirements and examination regulation applicable to all insurers. MEWAs must satisfy certain solvency requirements including three years in operation, at least 500 individuals eligible for coverage, and net worth equal to at least one month's premium held in a trust separate from the sponsoring association's operating assets.</p> <p>Whenever a law is passed by the general assembly that applies to health benefit plans, it shall apply to MEWAs.</p> <p>MEWAs are required to submit fee schedules.</p> <p>Regulation to implement provisions of statute. Filing requirements, solvency examination, fidelity bonds, annual report required, reserves for claims and premiums, and dissolution procedures. Consumer protection provisions include claims payment within 30 days and written explanation of claim denial.</p> <p>MEWAs subject to unfair and deceptive practices, and co-payment and deductibles regulations.</p> |
| ND (3/24) | <p>§§ 26.1-07.1-01 to 26.1-07.1-04</p> <p>NDAC 45-06-14-01 to 45-06-14-19</p> | <p>Makes provider of health care benefits subject to insurance laws unless provider under the jurisdiction of another state or federal agency.</p> <p>A MEWA that seeks to offer an employee welfare benefit plan that is not fully insured shall submit an application no later than 60 days prior to the requested date for authority to self-fund. A MEWA must have and maintain an annual premium volume of no less than \$300,000. Must establish reserves for all incurred losses, both reported and unreported, and for unearned premiums. May purchase stop loss insurance to cover a portion of its losses. Must prepare annual financial statements containing a balance sheet; a statement of revenues, expenses, and surplus; a statement of changes in financial position; and a schedule of investments. MEWA's with annual premiums greater than \$2 million, the financial statements must be audited and submitted by an independent certified public accountant.</p> |

MULTIPLE EMPLOYER WELFARE ARRANGEMENTS (MEWA) AND MULTIEMPLOYER (MET) PROVISIONS

| STATE | CITATION | MEWAs and METs PROVISIONS |
|--------------|-----------------------------------|--|
| OH (3/24) | §§ 1739.01 to 1739.99 | Provides for regulation of MEWAs. MEWAs must have certificate of authority from the director of insurance. Qualifications for license, financial regulation (excess insurance, aggregate stop loss insurance, investment constraints), and annual reports. Filing fee of \$1,000. Maintain minimum surplus of at least \$500,000. MEWAs subject to deceptive practices provisions (however, not subject to the code provisions solely relating to insurers or insurance companies). Other consumer protection provisions include claim settlement and assets management. A MEWA providing benefits for a self-insurance program must have a certificate of authority. No insurance producer shall sell coverage from an unlicensed MEWA. Provision for restitution. MEWA to be licensed requires 300 employees and a minimum of 2 employers. |
| | § 1751.111 | Pharmacy benefit card requirements apply to MEWAs. |
| | §§ 3924.01 to 3924.14 | MEWAs subject to requirements of small employer health insurance law. |
| OK (3/24) | 36 Okl.St. Ann. § 632 | Makes provider of health care benefits subject to insurance laws unless provider under the jurisdiction of another state or federal agency. |
| | 36 Okl.St. Ann. §§ 633 to 650 | Requires MEWA be administered by licensed insurer or licensed third party administrator (\$20,000 to \$500,000 fidelity bond requirement depending on size). MEWA must be licensed by the insurance commissioner. MEWA required to file annual report and actuarial certification. Filing requirements, disclosure to covered employees, rating practices, feasibility study and financial statements. Must comply with deposit, solvency, and examination requirements applicable to all insurers. |
| | 36 Okl.St. Ann. §§ 6512 to 6513 | MEWAs subject to small employer health insurance reform law. |
| | 36 Okl.St. Ann. § 4512 | MEWAs subject to group and blanket accident and health insurance provisions. |
| | 36 Okl.St. Ann. § 4509.1 | MEWAs subject to statute on replacement of health coverage. |
| | 36 Okl.St. Ann. §§ 1219.2; 1250.2 | MEWAs subject to unfair claims practice regulations applicable to health benefit plans. *MEWAs subject to numerous mandated benefits provisions. |

MULTIPLE EMPLOYER WELFARE ARRANGEMENTS (MEWA) AND MULTIEMPLOYER (MET) PROVISIONS

| STATE | CITATION | MEWAs and METs PROVISIONS |
|--------------|---|---|
| OR (3/24) | <p>§§ 750.301 to 750.341</p> <p>§§ 743B.001 to 743B.810</p> <p>OAR 836-014-0100</p> <p>OAR 836-053-0007; 836-053-0070</p> | <p>These provisions apply to MEWAs that are not fully insured. MEWA must get a certificate from the department and meet requirements set out in the statute for bond, deposit and minimum reserve requirement (verified by actuarial opinion). Taxed same as an insurer. Trusts must maintain excess loss insurance policy (excess of 10% of capital and surplus of the trust; no exposure exceeding 15% of capital and surplus of the trust). Capital or surplus of the greater of \$250,000 or 35% of incurred claims (not more than \$500,000). Other consumer protection provisions include disclosure that trusts are subject to less stringent solvency protection and regulation than insurers, MEWAs coverage is not protected by the insurance guaranty association in case of insolvency. MEWAs must file annual financial statements and are subject to examination as are insurers. Section 750.333 delineates insurance code provisions applicable to MEWAs.</p> <p>Health insurance provisions apply to MEWAs.</p> <p>Standards for actuarial opinion. Annual statement by qualified actuary including loss reserves, experience rating refunds and other actuarial items.</p> <p>Regulation regarding the approval and certification of MEWAs.</p> |
| PA (3/24) | <p>31 Pa. Code §§ 89.473 to 89.474</p> <p>31 Pa. Code § 89.802</p> <p>PA Notice No. 1992-2 (May 1, 1992)</p> | <p>Statement of policy. Prohibits stop loss insurers from issuing coverage to self-insured MEWAs.</p> <p>MEWAs are required to provide childhood immunizations.</p> <p>Agents that sell for an unlicensed insurer, including MEWAs, are subject to penalties including fines and restitution. No insurer allowed to transact business in state without certificate of authority.</p> |
| PR (3/24) | PR Ruling N-AV-10-90-97 | MEWAs are prohibited from denying employer continued plan coverage absent fraud, lack of contributions, non-compliance, lack of employees in covered area, or lack of collective bargaining agreement – related to HIPAA enactment. |
| RI (3/24) | <p>§§ 27-42-1 to 27-42-6</p> <p>§ 27-20.4-6</p> <p>§§ 230-RICR-20-30-11.1 to 230-RICR-20-30-11.5</p> | <p>Makes provider of health care benefits subject to insurance laws unless provider under the jurisdiction of another state or federal agency.</p> <p>Insurance Continuation Act applies to multi-employer trusts located out of state if an in-state employer is a member.</p> <p>Provides requirements including certificate of compliance for MEWAs operating in state.</p> |

MULTIPLE EMPLOYER WELFARE ARRANGEMENTS (MEWA) AND MULTIEMPLOYER (MET) PROVISIONS

| STATE | CITATION | MEWAs and METs PROVISIONS |
|--------------|---|---|
| SC (3/24) | §§ 38-41-10 to 38-41-110 | Multiple employer self-insured health plan must be licensed by the insurance department and must establish loss reserves. Act does not apply to ERISA exempt plans. If MEWA existed prior to 7/1/1985 and is sponsored by a homogeneous association (tax exempt), then it is not subject to this Act. Agents, brokers and administrators must give notice that they are transacting on behalf of a MEWA to the commissioner. Annual fee is 2% of the claims paid by the plan (funds into the general fund). Required excess stop loss coverage. Funds must be held in trust. Every 3 years inspection of records. Dissolution of plan requirements. |
| | § 38-27-40 | Multiple employer self-insured health plans may be subject to Insurers' Rehabilitation and Liquidation Act. |
| | §§ 38-71-910 to 38-71-990 | Small group health insurance law applies to MEWAs. |
| | § 38-71-1330 | Small Employer Health Insurance Availability Act applies to self-insured MEWAs. |
| | Regulations R. 69-42 §§ A to D | Annual and quarterly financial reports required. Employers personally liable for covered unpaid benefit claims. |
| | §§ 38-25-110 to 160; Bulletin No. 77-10 | Department of insurance will enforce law that METs be established with authorized insurance companies. Agents should consider their liability. |
| SD (3/24) | § 58-18B-35 | Director is authorized to promulgate rules regulating solicitation and sale of trusts and MEWAs. These rules can cover minimum stop loss amounts, filing requirements, reporting and recordkeeping, and eligibility of insureds for coverage. |
| | §§ 58-17-100; 58-1-21; 58-17-66 | MEWAs are considered health insurers or carriers for various health care requirements. |
| | §§ 58-18-88 to 58-18-94 | Authorizes METs and gives director authority to promulgate rules. METs deemed not insurance companies. |
| | § 58-29D-3 | Life and health administrators working with MEWAs that are not exempt from state law under ERISA are subject to state insurance laws as they pertain to administrators working with "insurers." |
| | §§ 58-18B-1 to 58-18B-60 | Regulation of small business group and blanket health insurance policies apply to MEWAs. |
| | §§ 58-33-93 to 58-33-134 | Most MEWAs are subject to unfair claims practices and unauthorized health care provisions. There are exemptions for certain ERISA welfare plans and certain government or church welfare benefit plans. |

MULTIPLE EMPLOYER WELFARE ARRANGEMENTS (MEWA) AND MULTIEMPLOYER (MET) PROVISIONS

| STATE | CITATION | MEWAs and METs PROVISIONS |
|--------------|--|---|
| TN (3/24) | § 56-7-1010 | Makes provider of health care benefits subject to insurance laws unless provider under the jurisdiction of another state or federal agency. |
| | § 56-7-2203 | Small Employer Group Health Coverage Reform Act applies to MEWAs. Statute includes health plan coverage requirements and preexisting conditions limitations. |
| | § 56-7-2361 | Pharmacy benefit card provisions apply to MEWAs. |
| | R. & Regs. 0780-1-76-.01 to 0780-1-76-.20 | Provides regulations for MEWAs. Requires certificate of authority to operate. Requirements include use of third party administrator; arrangement does not solicit participation for the general public, arrangement is not in hazardous financial shape; and arrangement has deposited a bond with the commissioner. The arrangement must have stop loss coverage. Other provisions in section include required filings, explanation of examinations, consumer information notice required. |
| TX (3/24) | I.C. §§ 846.001 to 846.303; 28 TAC 7.1901 to 7.1915 | MEWA to file application for licensure, pay licensing fees and file for certificate of authority. MEWA must file appropriate forms with the department of insurance. Also applies to non-association (trade/business) MEWAs if at least one employer is domiciled or headquartered in Texas (or MEWA solicits in Texas). Cash reserve requirements (20% of contributions or 20% of estimated contributions), specific and aggregate stop loss coverage, and other filing requirements (e.g. special forms). Filing initial certificate fee is \$5,000, final certificate of authority fee is \$1,500, and annual filing audited statement and actuarial opinion fee is \$500. Other requirements include disclosure to employees covered by plan and personal liability. Regulations include rules on formation, marketing, board structure, MEWA powers and duties, coverage provisions, and participation. MEWAs are exempt from all insurance laws outside of these chapters referenced in statute, unless specifically mentioned. |
| | 28 Tex. Admin. Code §§ 13.510 to 13.583 | Self-funded professional employer organizations (PEO), also known as staff leasing organizations, must obtain a license if at least one client is located in Texas. PEOs have lower capital and surplus requirements than licensed insurers, but are otherwise regulated much like large employer health insurers. |
| | Ins. Code §§ 1501.051 to 1501.067 | Fully insured cooperatives, which may include single-employee businesses, are permitted, with the cooperative considered a single large employer for rating purposes even if small employers are included. Coverage is exempt from most state health insurance mandates. Cooperatives may require employers to participate for 2 years. |
| | Ins. Code Chapter 1251 | An issuer of group health coverage to groups such as associations is required to ensure that the group policyholder satisfies the requirements for whatever type of group policy is issued (active existence for 2 years, etc.). |

MULTIPLE EMPLOYER WELFARE ARRANGEMENTS (MEWA) AND MULTIEMPLOYER (MET) PROVISIONS

| STATE | CITATION | MEWAs and METs PROVISIONS |
|--------------|--|--|
| UT (3/24) | <p>§ 31A-30-103</p> <p>U.A.C. R590-261-1 to R590-261-17</p> <p>U.A.C. R590-203-4</p> | <p>Individual and Small Employer Health Insurance Act applies to MEWAs.</p> <p>MEWAs subject to health benefit plan adverse benefit determinations.</p> <p>MEWAs subject to health grievance review process.</p> |
| VT (3/24) | 8 V.S.A. § 4079 | Policies issued to MEWAs are subject to group health insurance regulations (unless preempted by ERISA). |
| VI (3/24) | No provision | |
| VA (3/24) | <p>§§ 38.2-3420 to 38.2-3424.1</p> <p>§ 38.2-3431</p> <p>14 VAC 5-410-10 to 5-410-80</p> | <p>Makes provider of health care benefits subject to insurance laws unless provider under the jurisdiction of another state or federal agency.</p> <p>Insurance provisions for small employer market cover MEWAs. This includes preexisting conditions limitations.</p> <p>Standards for the licensing and operation of multiple employer health plans. Not fully insured MEWA must become a licensed insurance company. A fully insured MEWA must file with the department.</p> |

MULTIPLE EMPLOYER WELFARE ARRANGEMENTS (MEWA) AND MULTIEMPLOYER (MET) PROVISIONS

| STATE | CITATION | MEWAs and METs PROVISIONS |
|--------------|----------------------------------|--|
| WA (3/24) | §§ 48.42.010 to 48.42.050 | Makes provider of health care benefits subject to insurance laws unless provider under the jurisdiction of another state or federal agency. |
| | §§ 48.125.003 to 48.125.901 | Must have certificate of authority to operate self-funded employer welfare arrangements. Employers must be members of a bona fide association and exercise control over the association. Provide coverage to minimum 20 employers and 75 employees. Arrangement must have been in existence for 10 years. Demonstrate financial integrity by deposit of \$200,000 or a written plan of operation that demonstrates financial integrity. A MEWA with fewer than 1,000 covered persons must purchase stop loss insurance with an attachment point of 125% of expected claims. Maintain surplus equal to 10% of the next 12 months of incurred claims or \$2 million, whichever is greater. Reporting requirements included. MEWAs required following regulations implemented as part of Washington’s insurance reform including RBC requirements and grievance handling systems. Requires notice to participants that arrangement is self-insured and may not be subject to all state laws and is not part of the insurance guaranty fund. |
| | § 48.37.030 | Self-funded MEWAs subject to market conduct oversight. |
| | § 48.43.366 | Self-funded MEWAs subject to RBC requirements. |
| WV (3/24) | § 33-16-1a; WV ADC § 114-39-2 | Group accident and sickness coverage provisions apply to MEWAs under definition of health benefit plan. |
| | § 33-12-20 | Agents are personally liable for contracting with unauthorized insurers including unlicensed MEWAs. |
| WI (3/24) | Reg. INS. § 6.62 | Includes parameters that identify multiple employer trust or association and its operation, including duties of intermediaries. |
| | WI Bulletin No. 6-4-2003 | Unlicensed MEWAs are subject to state insurance regulation. |

MULTIPLE EMPLOYER WELFARE ARRANGEMENTS (MEWA) AND MULTIEMPLOYER (MET) PROVISIONS

| STATE | CITATION | MEWAs and METs PROVISIONS |
|--------------|---------------------------|---|
| WY (3/24) | § 26-1-108 | Makes provider of health care benefits subject to insurance laws unless provider under the exclusive jurisdiction of another agency of Wyoming or the federal government. |
| | §§ 26-19-301 to 26-19-312 | Small Employer Health Insurance Availability Act applies to MEWAs. |
| | § 26-19-115 | MEWAs must obtain an annual license in order to operate. The commissioner may adopt rules to implement these requirements, including specifying the conditions under which actions to suspend, revoke, or refuse to issue or renew a license may be taken. |
| | Ins. Ch. 71 §§ 1 to 11 | MEWAs must utilize a TPA that meets certain state requirements. MEWAs must pay a \$500 annual fee. MEWAs must maintain evidence of stop-loss insurance coverage issued by an insurance company licensed in Wyoming. MEWAs must file all health plan documents with the Department for prior approval before use, including policies, certificates, and contracts. Producers and brokers must carry out and document appropriate due diligence to establish that the insurer, TPA, and MEWA are licensed to operate within the state of Wyoming. |

This chart does not constitute a formal legal opinion by the NAIC staff on the provisions of state law and should not be relied upon as such. Every effort has been made to provide correct and accurate summaries to assist the reader in targeting useful information. For further details, the statutes and regulations cited should be consulted. The NAIC attempts to provide current information; however, readers should consult state law for additional adoptions.