

STATE OF NEW YORK

4719--B

2025-2026 Regular Sessions

IN SENATE

February 12, 2025

Introduced by Sens. FAHY, JACKSON -- read twice and ordered printed, and when printed to be committed to the Committee on Insurance -- committee discharged, bill amended, ordered reprinted as amended and recommitted to said committee -- recommitted to the Committee on Insurance in accordance with Senate Rule 6, sec. 8 -- committee discharged, bill amended, ordered reprinted as amended and recommitted to said committee

AN ACT authorizing municipalities to join a county self-funded or self-insured health plan

The People of the State of New York, represented in Senate and Assembly, do enact as follows:

1 Section 1. A municipality is permitted, with the consent of the county
2 and the governing body of such municipality, to join a county self-fund-
3 ed or self-insured health plan in any county in which such municipality
4 is located in whole or in part. For the purposes of this act, a munici-
5 pality shall be defined as any city, town, or village. In order for a
6 municipality or municipalities to join the county self-funded or self-
7 insured health plan, the governing board of the municipality shall adopt
8 a resolution indicating that they consent to joining such plan and the
9 county shall file with the superintendent of financial services certifi-
10 cation that, with inclusion of the lives to be covered in the plan,
11 prior to the admission of the municipality or municipalities, that the
12 county self-funded or self-insured health plan meets the following six
13 requirements:

14 (a) That the county and any municipality or municipalities joining
15 such plan have mutually consented to join such plan.

16 (b) That it maintain a reserve fund, calculated as a percentage of
17 total annual incurred claims, of a minimum of 12% of claims.

18 (c) That it has a surplus account, established and maintained for the
19 sole purpose of satisfying unexpected obligations of the benefit plan in
20 the event of termination or abandonment of the plan, which shall not be

EXPLANATION--Matter in italics (underscored) is new; matter in brackets
[-] is old law to be omitted.

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1 less than 5% of the annualized earned premium equivalents during the
2 current fiscal year of the plan.

3 (d) That it has in effect a specific stop loss per individual claim
4 only, no aggregate, and with a minimum deductible of \$200,000 to
5 \$250,000.

6 (e) That it has a minimum of 1,000 covered lives including retirees,
7 but not including dependents.

8 (f) That joint and several liability of participating municipalities
9 for the obligations of the plan is hereby abolished, and such liability
10 shall be governed as follows:

11 1. If the plan does not have admitted assets, as defined in section
12 107 of the insurance law, at least equal to the aggregate of its liabil-
13 ities and reserves and minimum surplus as provided in subdivision (b) of
14 this section, the governing board of such plan shall, within 30 days
15 thereafter, order an assessment for the amount that will provide suffi-
16 cient funds to remove such impairment and collect from each municipal
17 corporation a pro rata share of such assessed amount.

18 2. Every municipal corporation that participated in the plan at any
19 time during the two-year period prior to the issuing of an assessment
20 order by the plan's governing board shall, if notified of such assess-
21 ment, pay its pro rata share of such assessment within 90 days after the
22 issuance of that assessment order.

23 3. A municipal corporation's pro rata share of any assessment shall be
24 determined by applying the ratio of (i) the total assessment to the
25 total contributions or premium equivalents earned during the period
26 covered by the assessment on all municipal corporations subject to
27 assessment to (ii) the contribution or premium equivalent earned during
28 such period attributable to such municipal corporation.

29 4. The contingent liability of municipal corporations for additional
30 premium equivalents or assessments shall not be included as an asset in
31 the financial statements of the self-funded or self-insured health plan.

32 § 2. Any county that seeks to admit a municipality or municipalities
33 to its self-insured or self-funded health plan shall utilize the
34 services of an actuary approved by the superintendent of financial
35 services who shall certify that the criteria set forth above have been
36 complied with. Certification by an actuary approved by the superinten-
37 dent of financial services shall establish a presumption that the muni-
38 cipality or municipalities shall be admitted to the county self-insured
39 or self-funded health plan. Provided, however, that the superintendent
40 of financial services may, before the passage of one year from the date
41 of certification, may reject such certification stating the grounds
42 therefor and any requirements to assure that must be met to assure that
43 the proposal is approved.

44 § 3. This act shall take effect immediately.