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 $Section \ 1011 @\ Assessment \ for \ University \ of \ California \ Analysis \ of \ Proposed \ Mandate \ Legislation$

1011 Assessment for University of California Analysis of Proposed Mandate Legislation

(a)

For the fiscal years 2004-05 and 2005-06, the Department shall assess each full service plan its share of the amount necessary to fund the Health Care Benefits Fund for that fiscal year. The amount necessary for each fiscal year will be determined by the Department and the Department of Insurance in consultation with the University of California (University) and will be based on the amount necessary to fund the actual and necessary expenses of the University, not to exceed \$2 million, in the analysis of legislative health care benefit mandates for the fiscal year.

(b)

The total amount owed by all full-service health plans will be 87.6% of the total amount necessary to fund the Health Care Benefits Fund. That percentage is based on the ratio between persons enrolled in full-service health care service plans and those persons enrolled in health reimbursement plans regulated by the Department of Insurance as reported in the publication "Accident & Health Covered Lives 2002" (Revised December 11, 2003) published by the Department of Insurance in May, 2002.

(c)

The Department shall annually calculate each full-service health plan's portion of

the amount specified in subsection (b) as follows: (1) The Department shall calculate the per-enrollee cost by dividing the amount of revenues required to be paid by all full-service health care service plans, by the total number of enrollees in this state that are enrolled in all full-service plans as of the March 31 immediately preceding the date of the assessment. (2) The Department shall calculate each plan's annual fee by multiplying the per-enrollee cost determined pursuant to paragraph (1) of this subsection (c) by the number of enrollees in the plan as of the March 31 immediately preceding the date of the assessment.

(1)

The Department shall calculate the per-enrollee cost by dividing the amount of revenues required to be paid by all full-service health care service plans, by the total number of enrollees in this state that are enrolled in all full-service plans as of the March 31 immediately preceding the date of the assessment.

(2)

The Department shall calculate each plan's annual fee by multiplying the per-enrollee cost determined pursuant to paragraph (1) of this subsection (c) by the number of enrollees in the plan as of the March 31 immediately preceding the date of the assessment.

(d)

The Department shall notify affected plans of the amount of the assessment on or before June 15 of each fiscal year and all amounts due under the assessments will be due and payable from the affected plans on or before the first day of August immediately following the date of the notice.

(e)

Any amount that remains due from a plan for assessments issued for the 2002-2003 and 2003-2004 fiscal years (pursuant to Section 127662 of the

California Health and Safety Code) that have not been paid to the Department by May 31, 2004, will be added to the amount of the assessment due under the notice to be issued on or before June 15 of each fiscal year.