

A BILL FOR AN ACT

To further amend title 52 of the Code of the Federated States of Micronesia, as amended, by amending sections 402 and 409, as amended for the purpose of extending MiCare coverage to all medical treatment, setting a limit on annual benefits, and for other purposes.

BE IT ENACTED BY THE CONGRESS OF THE FEDERATED STATES OF MICRONESIA:

1 Section 1.Section 402, as amended by Public Laws Nos. 7-16,
2 8-53, 8-133, and 12-77 is hereby amended to read as follows:

3 "Section 402. Definitions.

4 As used in this chapter:

5 (1) 'Administrator' means the National Government
6 Employees' Health Insurance Plan Administrator
7 established by the provisions of this chapter.

8 (2) 'Agency' means any municipal, State or
9 National Government public agency, institution or
10 entity.

11 (3) 'Board' or 'Board of Directors' means the
12 National Government Employees' Health Insurance Plan
13 Board of Directors established under the provisions of
14 this chapter.

15 (4) 'Business' means any quasi-public or private
16 business entity which is duly licensed to do business
17 under, and is doing business under, the laws of the
18 Federated States of Micronesia or its political
19 subdivisions, which is also a participant in the Social
20 Security system of the Federated States of Micronesia,

1 and which has been qualified to participate in the plan
2 pursuant to the regulations promulgated by the Director
3 under section 409 of this chapter.

4 (5) 'Costs of administration' means the following
5 costs of administering the plan:

6 (a) wages or salaries for personnel engaged in
7 administering the plan;

8 (b) necessary travel for personnel engaged in
9 administering the plan;

10 (c) costs and expenses for training of personnel
11 engaged in administering the plan;

12 (d) the costs of processing claims;

13 (e) the costs of printing informational booklets,
14 claim forms, and other necessary materials;

15 (f) the costs of necessary supplies and
16 equipment;

17 (g) the costs of communications necessary to the
18 operation of the plan;

19 (h) the costs of professional services necessary
20 to the operation of the plan.

21 (6) 'Covered person' means any eligible person who has
22 properly enrolled in the Plan and for whom the required
23 premiums have been paid, who is therefore covered by the
24 rules and benefits of the Plan.

25 [~~6~~](7) 'Dependents' means:

1 (a) the members of an employee's immediate
2 family, including grandchildren, dependent parents, and
3 dependent parents-in-law.

4 ~~[(7)]~~ (8) 'Employee' means an employee of the National
5 Government of the Federated States of Micronesia, an
6 employee of a participating agency, or an employee of a
7 participating business.

8 ~~[(8)]~~ (9) 'Full-time employee' means an employee who
9 works at least thirty-two hours of the regular and
10 scheduled workweek.

11 ~~[(9)]~~ (10) 'Full-time student' means a student who
12 currently enrolled in classes totaling 12 or more
13 semester units at an accredited post-secondary
14 educational institution.

15 ~~[(10)]~~ (11) 'Participating agency' or 'participating
16 agencies' means any public agency, public institution or
17 other public entity, either municipal, State or
18 National, participating in the plan pursuant to section
19 403 of this chapter.

20 ~~[(11)]~~ (12) 'Participating business' or 'participating
21 businesses' means any business entity, whether quasi-
22 public or privately owned, participating in the plan
23 pursuant to section 403 of this chapter.

24 ~~[(12)]~~ (13) 'Plan' means the National Government
25 Employees' Health Insurance Plan."

1 Section 2. Section 409, as amended by Public Laws Nos. 8-53,
2 8-133, and 12-77 is hereby amended to read as follows:

3 " Section 409. Promulgation of regulations.

4 (1) The Board, with the approval of the President,
5 shall promulgate regulations, pursuant to chapter 1 of
6 title 17 of this code, governing the amount of the
7 premium for insurance under the plan, the procedure for
8 making claims under the plan, the amount and type of
9 benefits under the plan, the policy limits under the
10 plan, the maximum per annum benefit per covered person,
11 and such other matters as may be consistent with the
12 contents and purpose of this chapter, including the
13 implementation of those provisions of this chapter
14 pertaining to participating agencies and participating
15 businesses.

16 (a) The Board shall promulgate no regulation
17 allowing a claim for benefits under the plan to be
18 denied on the grounds that the medical condition giving
19 rise to the claim existed before the person making the
20 claim began participating in the plan. Any such
21 existing regulation is hereby retroactively repealed for
22 a period of six months from the date this act becomes
23 law.

24 (b) The board shall promulgate no regulation
25 limiting the types of medical treatments, care, and

