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1	Senate BILL NO. 316
2	INTRODUCED BY Bartlett
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4	A BILL FOR AN ACT ENTITLED: "AN ACT REVISING THE LAW RELATING TO GROUP INSURANCE FOR
5	PUBLIC EMPLOYEES; REQUIRING A CONTRACT FOR GROUP HEALTH INSURANCE TO PROVIDE FOR
6	CONTINUED PARTICIPATION BY RETIRED JUDGES IN CERTAIN CIRCUMSTANCES; AMENDING SECTION
7	2-18-704, MCA; AND PROVIDING A RETROACTIVE APPLICABILITY DATE."
8	
9	BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF MONTANA:
10	
11	Section 1. Section 2-18-704, MCA, is amended to read:
12	"2-18-704. Mandatory provisions. (1) An insurance contract or plan issued under this part must
13	contain provisions that permit:
14	(a) the member of a group who retires from active service under the appropriate retirement
15	provisions provided by law to remain a member of the group until the member becomes eligible for medicare
16	under the federal Health Insurance for the Aged Act, 42 U.S.C. 1395, as amended, unless the member is
17	a participant in another group plan with substantially the same or greater benefits at an equivalent cost or
18	unless the member is employed and, by virtue of that employment, is eligible to participate in another group
19	plan with substantially the same or greater benefits at an equivalent cost;
20	(b) the surviving spouse of a member to remain a member of the group as long as the spouse is
<sup>21</sup> ,	eligible for retirement benefits accrued by the deceased member as provided by law unless the spouse is
22	eligible for medicare under the federal Health Insurance for the Aged Act or unless the spouse has or is
23	eligible for equivalent insurance coverage as provided in subsection (1)(a);
24	(c) the surviving children of a member to remain members of the group as long as they are eligible
25	for retirement benefits accrued by the deceased member as provided by law unless they have equivalent
26	coverage as provided in subsection (1)(a) or are eligible for insurance coverage by virtue of the employment
27	of a surviving parent or legal guardian.
28	(2) An insurance contract or plan issued under this part must contain the provisions of subsection
29	(1) for remaining a member of the group and also must permit:
30	(a) the spouse of a retired member the same rights as a surviving spouse under subsection (1)(b);



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(b) the spouse of a retiring member to convert a group policy as provided in 33-22-508; and 1 (c) continued membership in the group by anyone eligible under the provisions of this section, 2 notwithstanding the person's eligibility for medicare under the federal Health Insurance for the Aged Act. 3 (3) (a) A state insurance contract or plan must contain provisions that permit a legislator to remain 4 a member of the state's group plan until the legislator becomes eligible for medicare under the federal 5 Health Insurance for the Aged Act, 42 U.S.C. 1395, as amended, if the legislator: 6 (i) terminates service in the legislature and is a vested member of a state retirement system 7 8 provided by law; and (ii) notifies the department of administration in writing within 90 days of the end of the legislator's 9 10 legislative term. (b) A former legislator may not remain a member of the group plan under the provisions of 11 12 subsection (3) if the person: (i) is a member of a plan with substantially the same or greater benefits at an equivalent cost; or 13 (ii) is employed and, by virtue of that employment, is eligible to participate in another group plan 14 15 with substantially the same or greater benefits at an equivalent cost. (c) A legislator who remains a member of the group under the provisions of subsection (3) and 16 subsequently terminates membership may not rejoin the group unless the person again serves as a 17 18 legislator. 19 (4) (a) A state insurance contract or plan must contain provisions that permit continued membership in the state's group plan by a member of the judges' retirement system who leaves judicial 20 21 office but continues to be an inactive vested member of the judges' retirement system as provided by 22 19-5-301. The judge shall notify the department of administration in writing within 90 days of the end of the judge's judicial service of the judge's choice to continue membership in the group plan. 23 24 (b) A former judge may not remain a member of the group plan under the provisions of this 25 subsection (4) if the person: 26 (i) is a member of a plan with substantially the same or greater benefits at an equivalent cost; 27 (ii) is employed and, by virtue of that employment, is eligible to participate in another group plan with substantially the same or greater benefits at an equivalent cost; or 28 29 (iii) becomes eligible for medicare under the federal Health Insurance for the Aged Act, 42 U.S.C. 30 1395, as amended.



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1	(c) A judge who remains a member of the group under the provisions of this subsection (4) and
2	subsequently terminates membership may not rejoin the group plan unless the person again serves in a
3	position covered by the state's group plan.
4	(4) (5) A person electing to remain a member of the group under subsection (1), (2), or (3), or (4)
5	shall pay the full premium for coverage and for that of the person's covered dependents.
6	(5)(6) An insurance contract or plan issued under this part that provides for the dispensing of
7	prescription drugs by an out-of-state mail service pharmacy, as defined in 37-7-702:
8	(a) must permit any member of a group to obtain prescription drugs from a pharmacy located in
9	Montana that is willing to match the price charged to the group or plan and to meet all terms and
10	conditions, including the same professional requirements that are met by the mail service pharmacy for a
11	drug, without financial penalty to the member; and
12	(b) may only be with an out-of-state mail service pharmacy that is registered with the board under
13	Title 37, chapter 7, part 7, and that is registered in this state as a foreign corporation."
14	
15	NEW SECTION. Section 2. Retroactive applicability. [This act] applies retroactively, within the
16	meaning of 1-2-109, to a judge who was a member of the state's group health insurance plan in effect on
17	December 1, 1996, who is otherwise eligible under the provisions of 2-18-704 and who files written notice
18	to the department of administration within 30 days of [the effective date of this act].
19	-END-



1		Λ.	Soute	BILL NO.	316
2	INTRODUCED BY	Gartlett			
3					

A BILL FOR AN ACT ENTITLED: "AN ACT REVISING THE LAW RELATING TO GROUP INSURANCE FOR
PUBLIC EMPLOYEES; REQUIRING A CONTRACT FOR GROUP HEALTH INSURANCE TO PROVIDE FOR
CONTINUED PARTICIPATION BY RETIRED JUDGES IN CERTAIN CIRCUMSTANCES; AMENDING SECTION
2-18-704, MCA; AND PROVIDING A RETROACTIVE APPLICABILITY DATE."

8

9 BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF MONTANA:

10

11 Section 1. Section 2-18-704, MCA, is amended to read:

"2-18-704. Mandatory provisions. (1) An insurance contract or plan issued under this part must
 contain provisions that permit:

(a) the member of a group who retires from active service under the appropriate retirement provisions provided by law to remain a member of the group until the member becomes eligible for medicare under the federal Health Insurance for the Aged Act, 42 U.S.C. 1395, as amended, unless the member is a participant in another group plan with substantially the same or greater benefits at an equivalent cost or unless the member is employed and, by virtue of that employment, is eligible to participate in another group plan with substantially the same or greater benefits at an equivalent cost;

(b) the surviving spouse of a member to remain a member of the group as long as the spouse is eligible for retirement benefits accrued by the deceased member as provided by law unless the spouse is eligible for medicare under the federal Health Insurance for the Aged Act or unless the spouse has or is eligible for equivalent insurance coverage as provided in subsection (1)(a);

(c) the surviving children of a member to remain members of the group as long as they are eligible
 for retirement benefits accrued by the deceased member as provided by law unless they have equivalent
 coverage as provided in subsection (1)(a) or are eligible for insurance coverage by virtue of the employment
 of a surviving parent or legal guardian.

(2) An insurance contract or plan issued under this part must contain the provisions of subsection
 (1) for remaining a member of the group and also must permit:

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(a) the spouse of a retired member the same rights as a surviving spouse under subsection (1)(b);



## SE 3/6 SECOND READING

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(b) the spouse of a retiring member to convert a group policy as provided in 33-22-508; and 1 (c) continued membership in the group by anyone eligible under the provisions of this section, 2 notwithstanding the person's eligibility for medicare under the federal Health Insurance for the Aged Act. 3 (3) (a) A state insurance contract or plan must contain provisions that permit a legislator to remain 4 a member of the state's group plan until the legislator becomes eligible for medicare under the federal 5 Health Insurance for the Aged Act, 42 U.S.C. 1395, as amended, if the legislator: 6 7 (i) terminates service in the legislature and is a vested member of a state retirement system 8 provided by law; and (ii) notifies the department of administration in writing within 90 days of the end of the legislator's 9 10 legislative term. (b) A former legislator may not remain a member of the group plan under the provisions of 11 subsection (3) if the person: 12 (i) is a member of a plan with substantially the same or greater benefits at an equivalent cost; or 13 (ii) is employed and, by virtue of that employment, is eligible to participate in another group plan. 14 15 with substantially the same or greater benefits at an equivalent cost. (c) A legislator who remains a member of the group under the provisions of subsection (3) and 16 subsequently terminates membership may not rejoin the group unless the person again serves as a 17 legislator. 18 (4) (a) A state insurance contract or plan must contain provisions that permit continued 19 membership in the state's group plan by a member of the judges' retirement system who leaves judicial 20 21 office but continues to be an inactive vested member of the judges' retirement\_system as provided by 19-5-301. The judge shall notify the department of administration in writing within 90 days of the end of 22 the judge's judicial service of the judge's choice to continue membership in the group plan. 23 24 (b) A former judge may not remain a member of the group plan under the provisions of this 25 subsection (4) if the person: 26 (i) is a member of a plan with substantially the same or greater benefits at an equivalent cost; 27 (ii) is employed and, by virtue of that employment, is eligible to participate in another group plan 28 with substantially the same or greater benefits at an equivalent cost; or 29 (iii) becomes eligible for medicare under the federal Health Insurance for the Aged Act, 42 U.S.C. 30 1395, as amended.



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1	(c) A judge who remains a member of the group under the provisions of this subsection (4) and
2	subsequently terminates membership may not rejoin the group plan unless the person again serves in a
3	position covered by the state's group plan.
4	(4) (5) A person electing to remain a member of the group under subsection (1), (2), or (3), or (4)
5	shall pay the full premium for coverage and for that of the person's covered dependents.
6	(5)(6) An insurance contract or plan issued under this part that provides for the dispensing of
7	prescription drugs by an out-of-state mail service pharmacy, as defined in 37-7-702:
8	(a) must permit any member of a group to obtain prescription drugs from a pharmacy located in
9	Montana sat is willing to match the price charged to the group or plan and to meet all terms and
10	conditions, including the same professional requirements that are met by the mail service pharmacy for a
11	drug, without financial penalty to the member; and
12	(b) may only be with an out-of-state mail service pharmacy that is registered with the board under
13	Title 37, chapter 7, part 7, and that is registered in this state as a foreign corporation."
14	
15	NEW SECTION. Section 2. Retroactive applicability. [This act] applies retroactively, within the
16	meaning of 1-2-109, to a judge who was a member of the state's group health insurance plan in effect on
17	December 1, 1996, who is otherwise eligible under the provisions of 2-18-704 and who files written notice
18	to the department of administration within 30 days of [the effective date of this act].
19	-END-

1	0	Sente BILL NO. 316	
2	INTRODUCED BY	<del>۲</del>	
3			
4	A BILL FOR AN ACT ENTITLED: "A	AN ACT REVISING THE LAW RELATIN	G TO GROUP INSURANCE FOR
5	PUBLIC EMPLOYEES; REQUIRING	A CONTRACT FOR GROUP HEALTH	INSURANCE TO PROVIDE FOR
6	CONTINUED PARTICIPATION BY R	ETIRED JUDGES IN CERTAIN CIRCUMS	TANCES; AMENDING SECTION
7	2-18-704, MCA; AND PROVIDING	A RETROACTIVE APPLICABILITY DA	TE."
8			
9	BE IT ENACTED BY THE LEGISLAT	TURE OF THE STATE OF MONTANA:	
10			
11	Section 1. Section 2-18-7	04, MCA, is amended to read:	
12	"2-18-704. Mandatory pr	ovisions. (1) An insurance contract or p	plan issued under this part must
13	contain provisions that permit:		
14	(a) the member of a grou	up who retires from active service un	der the appropriate retirement
15	provisions provided by law to remai	n a member of the group until the memb	er becomes eligible for medicare
16	under the federal Health Insurance for the Aged Act, 42 U.S.C. 1395, as amended, unless the member is		
17	a participant in another group plan	with substantially the same or greater l	penefits at an equivalent cost or
18	unless the member is employed and	l, by virtue of that employment, is eligibl	e to participate in another group
19	plan with substantially the same or	r greater benefits at an equivalent cost;	
20	(b) the surviving spouse o	f a member to remain a member of the	group as long as the spouse is
21	eligible for retirement benefits accr	ued by the deceased member as provid	led by law unless the spouse is
22	eligible for medicare under the fed	eral Health Insurance for the Aged Act	or unless the spouse has or is
23	eligible for equivalent insurance co	verage as provided in subsection (1)(a)	;
24	(c) the surviving children o	f a member to remain members of the g	roup as long as they are eligible
25	for retirement benefits accrued by	the deceased member as provided by I	aw unless they have equivalent
26	coverage as provided in subsection (1)(a) or are eligible for insurance coverage by virtue of the employmen		age by virtue of the employment
27	of a surviving parent or legal guard	lian.	
28	(2) An insurance contract (	or plan issued under this part must cont	ain the provisions of subsection
29	(1) for remaining a member of the	group and also must permit:	
30	(a) the spouse of a retired	member the same rights as a surviving	spouse under subsection (1)(b);
	Legislative Services Division	- 1 -	SB 3/6 THIRD READING

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(b) the spouse of a retiring member to convert a group policy as provided in 33-22-508; and 1 2 (c) continued membership in the group by anyone eligible under the provisions of this section, notwithstanding the person's eligibility for medicare under the federal Health Insurance for the Aged Act. 3 (3) (a) A state insurance contract or plan must contain provisions that permit a legislator to remain 4 a member of the state's group plan until the legislator becomes eligible for medicare under the federal 5 Health Insurance for the Aged Act, 42 U.S.C. 1395, as amended, if the legislator: 6 (i) terminates service in the legislature and is a vested member of a state retirement system 7 8 provided by law; and (ii) notifies the department of administration in writing within 90 days of the end of the legislator's 9 10 legislative term. (b) A former legislator may not remain a member of the group plan under the provisions of 11 12 subsection (3) if the person: (i) is a member of a plan with substantially the same or greater benefits at an equivalent cost; or 13 (ii) is employed and, by virtue of that employment, is eligible to participate in another group plan 14 15 with substantially the same or greater benefits at an equivalent cost. (c) A legislator who remains a member of the group under the provisions of subsection (3) and 16 subsequently terminates membership may not rejoin the group unless the person again serves as a 17 18 legislator. 19 (4) (a) A state insurance contract or plan must contain provisions that permit continued membership in the state's group plan by a member of the judges' retirement system who leaves judicial 20 21 office but continues to be an inactive vested member of the judges' retirement system as provided by 22 19-5-301. The judge shall notify the department of administration in writing within 90 days of the end of 23 the judge's judicial service of the judge's choice to continue membership in the group plan. 24 (b) A former judge may not remain a member of the group plan under the provisions of this 25 subsection (4) if the person: 26 (i) is a member of a plan with substantially the same or greater benefits at an equivalent cost; 27 (ii) is employed and, by virtue of that employment, is eligible to participate in another group plan 28 with substantially the same or greater benefits at an equivalent cost; or 29 (iii) becomes eligible for medicare under the federal Health Insurance for the Aged Act, 42 U.S.C. 30 1395, as amended.



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1	(c) A judge who remains a member of the group under the provisions of this subsection (4) and
2	subsequently terminates membership may not rejoin the group plan unless the person again serves in a
3	position covered by the state's group plan.
4	(4)(5) A person electing to remain a member of the group under subsection (1), (2), or (4)
5	shall pay the full premium for coverage and for that of the person's covered dependents.
6	(5)(6) An insurance contract or plan issued under this part that provides for the dispensing of
7	prescription drugs by an out-of-state mail service pharmacy, as defined in 37-7-702;
8	(a) must permit any member of a group to obtain prescription drugs from a pharmacy located in
9	Montana hat is willing to match the price charged to the group or plan and to meet all terms and
10	conditions, including the same professional requirements that are met by the mail service pharmacy for a
11	drug, without financial penalty to the member; and
12	(b) may only be with an out-of-state mail service pharmacy that is registered with the board under
13	Title 37, chapter 7, part 7, and that is registered in this state as a foreign corporation."
14	
15	NEW SECTION. Section 2. Retroactive applicability. [This act] applies retroactively, within the
16	meaning of 1-2-109, to a judge who was a member of the state's group health insurance plan in effect on
17	December 1, 1996, who is otherwise eligible under the provisions of 2-18-704 and who files written notice
18	to the department of administration within 30 days of [the effective date of this act].

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1	INTRODUCED BY Brithett
2	INTRODUCED BY Contlett
3	
4	A BILL FOR AN ACT ENTITLED: "AN ACT REVISING THE LAW RELATING TO GROUP INSURANCE FOR
5	PUBLIC EMPLOYEES; REQUIRING A CONTRACT FOR GROUP HEALTH INSURANCE TO PROVIDE FOR
6	CONTINUED PARTICIPATION BY RETIRED JUDGES IN CERTAIN CIRCUMSTANCES; AMENDING SECTION
7	2-18-704, MCA; AND PROVIDING A RETROACTIVE APPLICABILITY DATE."
8	
9	BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF MONTANA:
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11	Section 1. Section 2-18-704, MCA, is amended to read:
12	"2-18-704. Mandatory provisions. (1) An insurance contract or plan issued under this part must
13	contain provisions that permit:
14	(a) the member of a group who retires from active service under the appropriate retirement
15	provisions provided by law to remain a member of the group until the member becomes eligible for medicare
16	under the federal Health Insurance for the Aged Act, 42 U.S.C. 1395, as amended, unless the member is
17	a participant in another group plan with substantially the same or greater benefits at an equivalent cost or
18	unless the member is employed and, by virtue of that employment, is eligible to participate in another group
19	plan with substantially the same or greater benefits at an equivalent cost;
20	(b) the surviving spouse of a member to remain a member of the group as long as the spouse is
21	eligible for retirement benefits accrued by the deceased member as provided by law unless the spouse is
22	eligible for medicare under the federal Health Insurance for the Aged Act or unless the spouse has or is
23	eligible for equivalent insurance coverage as provided in subsection (1)(a);
24	(c) the surviving children of a member to remain members of the group as long as they are eligible
25	for retirement benefits accrued by the deceased member as provided by law unless they have equivalent
26	coverage as provided in subsection (1)(a) or are eligible for insurance coverage by virtue of the employment
27	of a surviving parent or legal guardian.
28	(2) An insurance contract or plan issued under this part must contain the provisions of subsection-

29 (1) for remaining a member of the group and also must permit:

30

(a) the spouse of a retired member the same rights as a surviving spouse under subsection (1)(b);



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(b) the spouse of a retiring member to convert a group policy as provided in 33-22-508; and 1 (c) continued membership in the group by anyone eligible under the provisions of this section, 2 notwithstanding the person's eligibility for medicare under the federal Health Insurance for the Aged Act. 3 (3) (a) A state insurance contract or plan must contain provisions that permit a legislator to remain 4 a member of the state's group plan until the legislator becomes eligible for medicare under the federal 5 Health Insurance for the Aged Act, 42 U.S.C. 1395, as amended, if the legislator: 6 (i) terminates service in the legislature and is a vested member of a state retirement system 7 8 provided by law; and (ii) notifies the department of administration in writing within 90 days of the end of the legislator's 9 10 legislative term. (b) A former legislator may not remain a member of the group plan under the provisions of 11 12 subsection (3) if the person: (i) is a member of a plan with substantially the same or greater benefits at an equivalent cost; or 13 (ii) is employed and, by virtue of that employment, is eligible to participate in another group plan 14 with substantially the same or greater benefits at an equivalent cost. 15 16 (c) A legislator who remains a member of the group under the provisions of subsection (3) and 17 subsequently terminates membership may not rejoin the group unless the person again serves as a 18 legislator. 19 (4) (a) A state insurance contract or plan must contain provisions that permit continued 20 membership in the state's group plan by a member of the judges' retirement system who leaves judicial 21 office but continues to be an inactive vested member of the judges' retirement system as provided by 22 19-5-301. The judge shall notify the department of administration in writing within 90 days of the end of 23 the judge's judicial service of the judge's choice to continue membership in the group plan. 24 (b) A former judge may not remain a member of the group plan under the provisions of this 25 subsection (4) if the person: 26 (i) is a member of a plan with substantially the same or greater benefits at an equivalent cost; 27 (ii) is employed and, by virtue of that employment, is eligible to participate in another group plan 28 with substantially the same or greater benefits at an equivalent cost; or 29 (iii) becomes eligible for medicare under the federal Health Insurance for the Aged Act, 42 U.S.C. 30 1395, as amended.

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1 (c) A udge who remains a member of the group under the provisions of this subsection (4) and subsequently terminates membership may not rejoin the group plan unless the person again serves in a 2 3 position covered by the state's group plan. (4)(5) A person electing to remain a member of the group under subsection (1), (2), or (3), or (4) 4 shall pay the full premium for coverage and for that of the person's covered dependents. 5 6 (6) An insurance contract or plan issued under this part that provides for the dispensing or 7 prescription drugs by an out-of-state mail service pharmacy, as defined in 37-7-702: (a) must permit any member of a group to obtain prescription drugs from a pharmacy located in 8 Montana at is willing to match the price charged to the group or plan and to meet all terms and 9 conditions, including the same professional requirements that are met by the mail service pharmacy for a 10 drug, without financial penalty to the member; and 11 (b) may only be with an out-of-state mail service pharmacy that is registered with the board under 12 Title 37, chapter 7, part 7, and that is registered in this state as a foreign corporation." 13 14 NEW SECTION. Section 2. Retroactive applicability. [This act] applies retroactively, within the 15 meaning of 1-2-109, to a judge who was a member of the state's group health insurance plan in effection 16 December 1, 1996, who is otherwise eligible under the provisions of 2-18-704 and who files written notice 17 to the department of administration within 30 days of [the effective date of this act]. 18 -END-19

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SB0316.02

1	SENATE BILL NO. 316
2	INTRODUCED BY BARTLETT
3	
4	A BILL FOR AN ACT ENTITLED: "AN ACT REVISING THE LAW RELATING TO GROUP INSURANCE FOR
5	PUBLIC EMPLOYEES; REQUIRING A CONTRACT FOR GROUP HEALTH INSURANCE TO PROVIDE FOR
6	CONTINUED PARTICIPATION BY RETIRED JUDGES IN CERTAIN CIRCUMSTANCES; AMENDING SECTION
7	2-18-704, MCA; AND PROVIDING A RETROACTIVE APPLICABILITY DATE."
8	
9	BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF MONTANA:
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11	Section 1. Section 2-18-704, MCA, is amended to read:
12	"2-18-704. Mandatory provisions. (1) An insurance contract or plan issued under this part must
13	contain provisions that permit:
14	(a) the member of a group who retires from active service under the appropriate retirement
15	provisions provided by law to remain a member of the group until the member becomes eligible for medicare
16	under the federal Health Insurance for the Aged Act, 42 U.S.C. 1395, as amended, unless the member is
17	a participant in another group plan with substantially the same or greater benefits at an equivalent cost or
18	unless the member is employed and, by virtue of that employment, is eligible to participate in another group
19	plan with substantially the same or greater benefits at an equivalent cost;
20	(b) the surviving spouse of a member to remain a member of the group as long as the spouse is
21	eligible for retirement benefits accrued by the deceased member as provided by law unless the spouse is
22	eligible for medicare under the federal Health Insurance for the Aged Act or unless the spouse has or is
23	eligible for equivalent insurance coverage as provided in subsection (1)(a);
24	(c) the surviving children of a member to remain members of the group as long as they are eligible
25	for retirement benefits accrued by the deceased member as provided by law unless they have equivalent
26	coverage as provided in subsection (1)(a) or are eligible for insurance coverage by virtue of the employment
27	of a surviving parent or legal guardian.
28	(2) An insurance contract or plan issued under this part must contain the provisions of subsection
29	(1) for remaining a member of the group and also must permit:
30	(a) the spouse of a retired member the same rights as a surviving spouse under subsection (1)(b);



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Services

Division

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SB 316

(b) the spouse of a retiring member to convert a group policy as provided in 33-22-508; and 1 (c) continued membership in the group by anyone eligible under the provisions of this section, 2 notwithstanding the person's eligibility for medicare under the federal Health Insurance for the Aged Act. 3 (3) (a) A state insurance contract or plan must contain provisions that permit a legislator to remain 4 a member of the state's group plan until the legislator becomes eligible for medicare under the federal 5 Health Insurance for the Aged Act, 42 U.S.C. 1395, as amended, if the legislator: 6 (i) terminates service in the legislature and is a vested member of a state retirement system 7 8 provided by law; and (ii) notifies the department of administration in writing within 90 days of the end of the legislator's 9 legislative term. 10 (b) A former legislator may not remain a member of the group plan under the provisions of 11 subsection (3) if the person: 12 (i) is a member of a plan with substantially the same or greater benefits at an equivalent cost; or 13 (ii) is employed and, by virtue of that employment, is eligible to participate in another group plan 14 with substantially the same or greater benefits at an equivalent cost. 15 (c) A legislator who remains a member of the group under the provisions of subsection (3) and 16 subsequently terminates membership may not rejoin the group unless the person again serves as a 17 legislator. 18 (4) (a) A state insurance contract or plan must contain provisions that permit continued 19 20 membership in the state's group plan by a member of the judges' retirement system who leaves judicial 21 office but continues to be an inactive vested member of the judges' retirement system as provided by 22 19-5-301. The judge shall notify the department of administration in writing within 90 days of the end of 23 the judge's judicial service of the judge's choice to continue membership in the group plan. 24 (b) A former judge may not remain a member of the group plan under the provisions of this 25 subsection (4) if the person: 26 (i) is a member of a plan with substantially the same or greater benefits at an equivalent cost; 27 (ii) is employed and, by virtue of that employment, is eligible to participate in another group plan 28 with substantially the same or greater benefits at an equivalent cost; or (iii) becomes eligible for medicare under the federal Health Insurance for the Aged Act, 42 U.S.C. 29 30 1395, as amended. Legislative

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subsequently terminates membership may not rejoin the group plan unless the person again serves in a 2 3 position covered by the state's group plan. 4 (4)(5) A person electing to remain a member of the group under subsection (1), (2), or (3), or (4) 5 shall pay the full premium for coverage and for that of the person's covered dependents. 6 (6) An insurance contract or plan issued under this part that provides for the dispensing of 7 prescription drugs by an out-of-state mail service pharmacy, as defined in 37-7-702: 8 (a) must permit any member of a group to obtain prescription drugs from a pharmacy located in Montana that is willing to match the price charged to the group or plan and to meet all terms and 9 conditions, including the same professional requirements that are met by the mail service pharmacy for a 10 drug, without financial penalty to the member; and 11 (b) may only be with an out-of-state mail service pharmacy that is registered with the board under 12 13 Title 37, chapter 7, part 7, and that is registered in this state as a foreign corporation." 14 15 NEW SECTION. Section 2. Retroactive applicability. [This act] applies retroactively, within the meaning of 1-2-109, to a judge who was a member of the state's group health insurance plan in effect on 16 December 1, 1996, who is otherwise eligible under the provisions of 2-18-704 and who files written notice 17 18 to the department of administration within 30 days of [the effective date of this act].

(c) A judge who remains a member of the group under the provisions of this subsection (4) and

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-END-