

Chapter Grp 26

APPROVAL OF GROUP INSURANCE PLANS
FOR STATE EMPLOYEES

Grp 26.01	Group insurance board approval	Grp 26.02	Criteria for approval
		Grp 26.03	Withdrawal of board approval

Grp 26.01 Group insurance board approval. In addition to group insurance plans provided by the group insurance board under s. 40.10, Stats., pursuant to s. 10.921 (1) (a) 3, Stats., the board shall approve or disapprove group insurance plans for which payment of premiums is made through payroll deductions. All such group insurance plans in effect on June 1, 1973 shall be deemed approved by the board pursuant to Grp 26.02, provided such plans are filed with the board not later than 30 days after the effective date of the rule.

Grp 26.02 Criteria for approval. (1) The board shall determine after notice and hearing whether the group insurance plan fulfills an important coverage need through consideration of but not limited to the following factors:

- (a) Number of employes affected
- (b) Amount and variation in premiums
- (c) Adequacy of other approved coverage providing the same or similar protection
- (d) Duration of contract
- (e) History, performance and acceptance of the plan
- (f) New or additional coverage provided

(2) The board shall determine whether the plan is adequately supervised through consideration of but not limited to the following factors:

- (a) Continuing representation of employe participants with professional insurance guidance
- (b) Maintenance of adequate statistical records relating to retentions, experience, premiums, participants and other data necessary for actuarial computations

(c) Procedures for negotiating coverage

Grp 26.03 Withdrawal of board approval. (1) Notwithstanding board approval granted to any plan under Grp 26.01, the board subsequently may withdraw its approval after notice and hearing upon finding that said plan does not meet the criteria established by Grp 26.02.

(2) Such withdrawal of approval shall be effective, at the discretion of the board, on the first day of the month subsequent to issuance of a finding that said plan does not meet the criteria pursuant to subs. (1) or on the anniversary date of the contract under which such plan is provided.