

Senate Bill 407

By: Senators Hill of the 32nd, Rogers of the 21st, Thomas of the 54th, Seabaugh of the 28th, Hawkins of the 49th and others

**AS PASSED SENATE**

**A BILL TO BE ENTITLED  
AN ACT**

1 To amend Chapter 29A of Title 33 of the Official Code of Georgia Annotated, relating to  
2 individual health insurance coverage, so as to provide for legislative intent; to provide  
3 definitions; to authorize the Commissioner of Insurance to authorize insurers to offer  
4 individual medical and surgical health insurance policies in Georgia that have been approved  
5 for issuance in selected other states; to authorize the Commissioner of Insurance to initiate  
6 a multi-state consortium for the establishment of reciprocity agreements allowing the sale of  
7 individual medical and surgical health insurance policies among the participating states as  
8 a single entity; to provide for minimum standards for such policies; to provide for certain  
9 notices; to provide for examinations of such insurers; to authorize the Commissioner of  
10 Insurance to adopt rules and regulations; to provide for related matters; to repeal conflicting  
11 laws; and for other purposes.

12 **BE IT ENACTED BY THE GENERAL ASSEMBLY OF GEORGIA:**

13 **SECTION 1.**

14 Chapter 29A of Title 33 of the Official Code of Georgia Annotated, relating to individual  
15 health insurance coverage, is amended by adding a new article to read as follows:

16 **"ARTICLE 3**

17 33-29A-40.

18 The General Assembly recognizes the high number of uninsureds in the state and the need  
19 of individuals seeking medical and surgical health insurance coverage in this state to have  
20 the opportunity to choose among competitive medical and surgical health insurance plans  
21 that are affordable and flexible. Therefore, the General Assembly seeks to increase the  
22 competitive availability of medical and surgical health insurance coverage by allowing  
23 insurers authorized to engage in the business of insurance in this state who are also  
24 authorized to engage in the business of insurance in selected other states to issue individual

25 medical and surgical health policies in Georgia based upon their policy approval in the  
26 other selected states. In addition, the General Assembly seeks to initiate cooperation of  
27 like-minded states to create a multi-state consortium with reciprocity agreements for  
28 approval; offer; sale; rating, including medical underwriting; renewal; and issuance of  
29 individual medical and surgical health insurance policies. Under the current state-by-state  
30 approval process, it may take years before an insurer introduces a new lower cost product  
31 in Georgia. By creating a consortium of states with reciprocity agreements, the larger  
32 population of several states with a single approval for sale in multiple states will be  
33 attractive to insurers to develop and rapidly introduce lower cost effective products to  
34 Georgians.

35 33-29A-41.

36 As used in this article, the term:

37 (1) 'Comprehensive individual medical and surgical insurance policy' shall have the same  
38 meaning as 'accident and sickness insurance policy' as that term is defined in Code  
39 Section 33-29-1 including, at a minimum, comprehensive major medical coverage for  
40 medical and surgical benefits.

41 (2) 'High deductible health plan' means accident and sickness insurance plans sold or  
42 maintained under the applicable provisions of Section 223 of the Internal Revenue Code.

43 (3) 'Primary state' means the state designated by the issuer as the state whose covered  
44 laws shall govern the health insurance issuer in the sale of such coverage.

45 (4) 'Secondary state' means any state that is not the primary state.

46 33-29A-42.

47 In accordance with the provisions of this article, the Commissioner shall identify at least  
48 five states with insurance laws sufficiently consistent with Georgia laws and regulations.  
49 For those states so identified, the Commissioner shall approve for sale in Georgia selected  
50 comprehensive individual medical and surgical insurance policies that have been approved  
51 for issuance in those other states where the insurer is authorized to engage in the business  
52 of insurance so long as the insurer is also authorized to engage in the business of insurance  
53 in this state and provided that any such policy meets the requirements set forth in this  
54 article. High deductible health plans that meet national standards for comprehensive  
55 medical and surgical coverage should be among the policies automatically approved in  
56 Georgia if approved in the states identified as acceptable by the Commissioner.

57 33-29A-43.

58 (a) Any insurer selling an insurance policy pursuant to this article, and any plan approved  
59 under this article, shall satisfy actuarial standards and insurer solvency requirements set  
60 forth by the National Association of Insurance Commissioners (NAIC) and adopted by  
61 regulation promulgated by the Commissioner or as otherwise prescribed by regulation  
62 promulgated by the Commissioner so long as any such regulation is not inconsistent with  
63 such NAIC standards.

64 (b) Any policy sold in Georgia under the coverage and administrative laws and regulations  
65 of another state that are not covered by a guarantee association or similar association of that  
66 state will be protected under the Georgia Life and Health Insurance Guaranty Association  
67 under Chapter 38 of this title.

68 (c) The Commissioner shall have the authority to determine whether an insurer satisfies  
69 the standards required by this Code section and may not approve a policy or plan that he  
70 or she finds lacking in compliance with this Code section. The Commissioner shall have  
71 the authority to determine whether the policies sold pursuant to this article continue to  
72 satisfy the requirements set forth in this Code section in the same manner as he or she does  
73 with an individual accident and sickness insurance policy approved pursuant to this title.  
74 The Commissioner shall have the authority to suspend or revoke new sales of out-of-state  
75 policies if the laws and regulations of those states are determined to substantially harm  
76 Georgians. Upon such suspension or revocation, the issuers of the out-of-state policies  
77 shall be required to notify in writing all affected Georgia policyholders of such  
78 determination by the Commissioner.

79 33-29A-44.

80 (a) Each written application for participation in an out-of-state health benefit plan shall  
81 contain the following language in boldface type at the beginning of the document:  
82 'This policy is primarily governed by the laws of (insert state where the master policy is  
83 filed); therefore, all of the rating laws applicable to policies filed in this state do not apply  
84 to this policy, which may result in increases in your premium at renewal that would not  
85 be permissible in a Georgia-approved policy. Any purchase of individual health  
86 insurance should be considered carefully since future medical conditions may make it  
87 impossible to qualify for another individual health policy. FOR INFORMATION  
88 CONCERNING INDIVIDUAL HEALTH COVERAGE UNDER A  
89 GEORGIA-APPROVED POLICY, PLEASE CONSULT YOUR INSURANCE AGENT  
90 OR THE INSURANCE DEPARTMENT.'

91 (b) Each out-of-state health benefit policy shall contain the following language in boldface  
92 type at the beginning of the document:

93     'The benefits of this policy providing your coverage are governed primarily by the laws  
94     of a state OTHER than Georgia. While this health benefit plan may provide you a more  
95     affordable health insurance policy, it may also provide fewer health benefits than those  
96     normally included as state-mandated health benefits in policies in Georgia. PLEASE  
97     CONSULT YOUR INSURANCE AGENT TO DETERMINE WHICH  
98     STATE-MANDATED HEALTH BENEFITS ARE EXCLUDED UNDER THIS  
99     POLICY.'

100    33-29A-45.

101    (a) The Commissioner shall take the lead in creating a consortium of like-minded states  
102    in establishing rules of reciprocity for the approval of comprehensive individual medical  
103    and surgical health insurance policies among the participating states.

104    (b) At a minimum, the rules of approval reciprocity shall include terms and conditions to  
105    protect Georgians similar to the following:

106      (1) An issuer, with respect to a particular policy, may only designate one state as its  
107      primary state with respect to all such coverage it offers. Such an issuer may not change  
108      the designated primary state with respect to individual health insurance coverage once the  
109      policy is issued; provided, however, that such a change may be made upon renewal of the  
110      policy with approval of the policyholder. With respect to such designated primary state,  
111      the issuer must be licensed and approved to be doing business in that state;

112      (2) In the case of a health insurance issuer that is selling a policy in, or to a resident of,  
113      a secondary state, the issuer must be licensed and approved to be doing business in that  
114      secondary state; and

115      (3) The covered laws of the primary state shall apply to individual health insurance  
116      coverage offered by a health insurance issuer in the primary state and policies sold in any  
117      secondary state. The coverage and issuer shall comply with the terms and conditions  
118      with respect to the offering of coverage in Georgia.

119    (c) Except as provided in this Code section, a health insurance issuer with respect to its  
120    offer; sale; rating, including medical underwriting; renewal; and issuance of comprehensive  
121    individual medical and surgical health insurance coverage in Georgia is exempt from any  
122    covered laws of Georgia as the secondary state and any rules, regulations, agreements, or  
123    orders sought or issued by Georgia under or related to such covered laws to the extent that  
124    such laws would:

125      (1) Make unlawful or regulate, directly or indirectly, the operation of the health  
126      insurance issuer operating in Georgia as a secondary state, except that any Georgian may  
127      require such an issuer:

128 (A) To pay on a nondiscriminatory basis applicable premium and other taxes, including  
129 high risk pool assessments, which are levied on insurers and surplus lines insurers,  
130 brokers, or policyholders under the laws of the State of Georgia;

131 (B) To register with and designate the Commissioner as its agent solely for the purpose  
132 of receiving service of legal documents or process;

133 (C) To submit to an examination of its financial condition by a state insurance  
134 commissioner in any state in which the issuer is doing business to determine the issuer's  
135 financial condition, if the state insurance commissioner of the primary state has not  
136 done an examination within the period recommended by the National Association of  
137 Insurance Commissioners; and any such examination is conducted in accordance with  
138 the examiners' handbook of the National Association of Insurance Commissioners and  
139 is coordinated to avoid unjustified duplication and unjustified repetition;

140 (D) To comply with a lawful order issued in a delinquency proceeding commenced by  
141 the Commissioner if there has been a finding of financial impairment under  
142 subparagraph or in a voluntary dissolution proceeding;

143 (E) To comply with an injunction issued by a court of competent jurisdiction, upon a  
144 petition by the Commissioner alleging that the issuer is in hazardous financial  
145 condition;

146 (F) To participate, on a nondiscriminatory basis, in any insurance insolvency guaranty  
147 association or similar association to which a health insurance issuer in the state is  
148 required to belong;

149 (G) To comply with any state law regarding fraud and abuse, except that if the state  
150 seeks an injunction regarding the conduct described in this subparagraph, such  
151 injunction must be obtained from a court of competent jurisdiction;

152 (H) To comply with any state law regarding unfair claims settlement practices; and

153 (I) To comply with the applicable requirements for independent review with respect  
154 to coverage offered in the state;

155 (2) Require any individual health insurance coverage issued by the issuer to be  
156 countersigned by an insurance agent or broker residing in that secondary state; or  
157 (3) Otherwise discriminate against the issuer issuing insurance in both the primary state  
158 and in any secondary state.

159 (d) A health insurance issuer shall provide the following notice, in 12-point bold type, in  
160 any insurance coverage offered in Georgia by such a health insurance issuer and at any  
161 renewal of the policy, with the blank spaces being appropriately filled with the name of the  
162 health insurance issuer, the name of the primary state, and the name of the secondary state,  
163 respectively, for the coverage concerned:

164 'Notice: This policy is issued by [insert state name] and is governed by the laws and  
165 regulations of the State of [insert state name], and it has met all the laws of that state as  
166 determined by that state's Department of Insurance. This policy may be less expensive  
167 than others because it is NOT subject to all of the insurance laws and regulations of  
168 Georgia, including coverage of some services or benefits mandated by the law of the  
169 State of Georgia. Additionally, this policy is NOT subject to all of the consumer  
170 protection laws or restrictions on rate changes of the State of Georgia. As with all  
171 insurance products, before purchasing this policy, you should carefully review the policy  
172 and determine what health care services the policy covers and what benefits it provides,  
173 including any exclusions, limitations, or conditions for such services or benefits.'

174 (e) A health insurance issuer that provides individual health insurance coverage in a  
175 primary or secondary state shall not upon renewal:

176 (1) Move or reclassify the individual insured under the health insurance coverage from  
177 the class such individual is in at the time of issue of the contract based on the  
178 health-status related factors of the individual;

179 (2) Increase the premiums assessed the individual for such coverage based on a health  
180 status-related factor or change of a health status-related factors not defined at the issuance  
181 of the policy; or

182 (3) Increase premiums assessed the individual for past or prospective claims experience  
183 of the insured individual.

184 (f) Nothing in this Code section shall be construed to prohibit a health insurance issuer:

185 (1) From terminating or discontinuing coverage or a class of coverage in accordance with  
186 the laws of the primary state;

187 (2) From raising premium rates for all policy holders within a class based on claims  
188 experience in accordance with the laws of the primary state;

189 (3) From changing premiums or offering discounted premiums to individuals who  
190 engage in wellness activities at intervals prescribed by the issuer, if such premium  
191 changes or incentives in accordance with the laws of the primary state:

192 (A) Are disclosed to the consumer in the insurance contract;

193 (B) Are based on specific wellness activities that are not applicable to all individuals;  
194 and

195 (C) Are not obtainable by all individuals to whom coverage is offered;

196 (4) From reinstating lapsed coverage; or

197 (5) From retroactively adjusting the rates charged an insured individual if the initial rates  
198 were set based on material misrepresentation by the individual at the time of issue.

199 (g) A health insurance issuer may not offer for sale individual health insurance coverage  
200 in Georgia unless that coverage is currently offered for sale in the primary state.

201 (h) A person acting, or offering to act, as an agent or broker for a health insurance issuer  
202 with respect to the offering of individual health insurance coverage must obtain a license  
203 from Georgia, with commissions or other compensation subject to the provisions of the  
204 laws of Georgia, except that Georgia may not impose any qualification or requirement  
205 which discriminates against a nonresident agent or broker.

206 (i) Each health insurance issuer issuing individual health insurance coverage in both  
207 primary and secondary states shall submit to the insurance commissioner of each state in  
208 which it intends to offer such coverage before it may offer individual health insurance  
209 coverage in such state:

210 (1) A copy of the plan of operation or feasibility study or any similar statement of the  
211 policy being offered and its coverage which shall include the name of its primary state  
212 and its principal place of business;

213 (2) Written notice of any change in its designation of its primary state;

214 (3) Written notice from the issuer of the issuer's compliance with all the laws of the  
215 primary state; and

216 (4) To the insurance commissioner of each secondary state in which it offers individual  
217 health insurance coverage, a copy of the issuer's quarterly financial statement submitted  
218 to the primary state, which statement shall be certified by an independent public  
219 accountant and contain a statement of opinion on loss and loss adjustment expense  
220 reserves made by a member of the American Academy of Actuaries; or a qualified loss  
221 reserve specialist.

222 (j) Nothing in this Code section shall be construed to affect the authority of any federal or  
223 state court to enjoin:

224 (1) The solicitation or sale of individual health insurance coverage by a health insurance  
225 issuer to any person or group who is not eligible for such insurance; or  
226 (2) The solicitation or sale of individual health insurance coverage that violates the  
227 requirements of the law of a secondary state.

228 (k) Nothing in this Code section shall be construed to affect the authority of any state to  
229 enjoin conduct in violation of that state's laws. All policies authorized and approved in  
230 accordance with this chapter shall submit to the jurisdiction and venue of Georgia.

231 33-29A-46.

232 (a) If a policy holder exhausts the primary state's policy holder's rights and privileges, then  
233 all claims under health benefit plans sold to Georgia residents by out-of-state companies  
234 shall be subject to the provisions of Article 2 of Chapter 20A of this title, and no  
235 out-of-state company seeking to offer health benefit plans in this state shall receive

236 approval to offer health benefit plans in this state unless such company agrees to comply  
237 with this Code section.

238 (b) Out-of-state companies offering health benefit plans under this article shall be subject  
239 to regulation by the Commissioner with regard to enforcement of the contractual benefits  
240 under the health benefit plan, including the requirements regarding prompt payment of  
241 claims for benefits pursuant to Code Section 33-24-59.5.

242 (c) Nothing in this article shall be construed to limit the ability of the Commissioner to  
243 establish requirements for consumer protection beyond those otherwise available to the  
244 policy holder in the primary state.

245 33-29A-47.

246 (a) The Commissioner shall adopt rules and regulations necessary to implement this  
247 article.

248 (b) Any dispute resolution mechanism or provision for notice and hearing in this title shall  
249 apply to insurers issuing and delivering plans pursuant to this article."

## 250 SECTION 2.

251 Any insurance policy for health care sold in Georgia under the provisions of this statute  
252 shall comply with all mandates of coverage required by Georgia Law, except service  
253 provided by athletic trainer pursuant to 33-24-27.2.

## 254 SECTION 3.

255 All laws and parts of laws in conflict with this Act are repealed.