A BILL FOR AN ACT

RELATING TO INSURANCE.

BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF HAWAII:

1	SECT	ION 1. Chapter 431, Hawaii Revised Statutes, is
2	amended b	y adding to article 10A a new section to be
3	appropria	tely designated and to read as follows:
4	" <u>§43</u>	1:10A- Prohibition on rescissions of coverage. (a)
5	Notwithst	anding sections 431:10-226.5 and 431:10A-106 to the
6	contrary,	a group health plan or health insurance insurer shall
7	not resci	nd coverage under a health benefit plan with respect to
8	an indivi	dual, including a group to which the individual belongs
9	or family	coverage in which the individual is included, after
10	the indiv	idual is covered under the plan, unless:
11	(1)	The individual or a person seeking coverage on behalf
12		of the individual performs an act, practice, or
13		omission that constitutes fraud;
14	(2)	The individual makes an intentional misrepresentation
15		of material fact as prohibited by the terms of the
16		plan or coverage; or
17	(3)	The individual fails to timely pay required premiums
18		or contributions toward the cost of coverage; provided
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              that the rescission is in compliance with federal
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              regulations.
         As used in this subsection, "a person seeking coverage on
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    behalf of the individual" shall not include an insurance
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    producer or employee or authorized representative of the health
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    carrier.
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         (b) A health carrier shall provide at least thirty days
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    advance written notice to each plan enrollee or, for individual
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    health insurance coverage, to each primary subscriber, who would
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    be affected by the proposed rescission of coverage before
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    coverage under the plan may be rescinded in accordance with
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    subsection (a) regardless of whether, in the case of group
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    health insurance coverage, the rescission applies to the entire
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    group or only to an individual within the group.
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         (c) This section applies regardless of any applicable
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    contestability period."
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         SECTION 2. Chapter 432, Hawaii Revised Statutes, is
    amended by adding a new section to article 1 to be appropriately
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    designated and to read as follows:
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         "§432- Prohibition on rescissions of coverage. (a)
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    Notwithstanding sections 431:10-226.5 and 431:10A-106 to the
22
    contrary, a society shall not rescind coverage under a health
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1	benefit p	lan with respect to an individual, including a group to
2	which the	individual belongs or family coverage in which the
3	individua	l is included, after the individual is covered under
4	the plan,	unless:
5	(1)	The individual or a person seeking coverage on behalf
6		of the individual performs an act, practice, or
7		omission that constitutes fraud;
8	(2)	The individual makes an intentional misrepresentation
9		of material fact as prohibited by the terms of the
10		plan or coverage; or
11	(3)	The individual fails to timely pay required premiums
12		or contributions toward the cost of coverage; provided
13		that the rescission is in compliance with federal
14		regulations.
15	<u>As u</u>	sed in this subsection, "a person seeking coverage on
16	behalf of	the individual" shall not include an insurance
17	producer	or employee or authorized representative of the health
18	carrier.	
19	(b)	A society shall provide at least thirty days advance
20	written n	otice to each plan enrollee or, for individual health
21	insurance	coverage, to each primary subscriber, who would be
22	affected	by the proposed rescission of coverage before coverage



1	under the plan may be rescinded in accordance with subsection	
2	(a) regardless of whether, in the case of group health insurance	
3	coverage, the rescission applies to the entire group or only to	
4	an individual within the group.	
5	(c) This section applies regardless of any applicable	
6	<pre>contestability period."</pre>	
7	SECTION 3. Chapter 432D, Hawaii Revised Statutes, is	
8	amended by adding a new section to be appropriately designated	
9	and to read as follows:	
10	"§432D- Prohibition on rescissions of coverage. (a)	
11	Notwithstanding sections 431:10-226.5 and 431:10A-106 to the	
12	contrary, a health maintenance organization shall not rescind	
13	coverage under a health benefit plan with respect to an	
14	individual, including a group to which the individual belongs or	
15	family coverage in which the individual is included, after the	
16	individual is covered under the plan, unless:	
17	(1) The individual or a person seeking coverage on behalf	
18	of the individual performs an act, practice, or	
19	omission that constitutes fraud;	
20	(2) The individual makes an intentional misrepresentation	
21	of material fact as prohibited by the terms of the	
22	plan or coverage; or	

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1	(3) The individual fails to timely pay required premiums	
2	or contributions toward the cost of coverage; provided	
3	that the rescission is in compliance with federal	
4	regulations.	
5	As used in this subsection, "a person seeking coverage on	
6	behalf of the individual" shall not include an insurance	
7	producer or employee or authorized representative of the health	
8	carrier.	
9	(b) A health maintenance organization shall provide at	
10	least thirty days advance written notice to each plan enrollee	
11	or, for individual health insurance coverage, to each primary	
12	subscriber, who would be affected by the proposed rescission of	
13	coverage before coverage under the plan may be rescinded in	
14	accordance with subsection (a) regardless of whether, in the	
15	case of group health insurance coverage, the rescission applies	
16	to the entire group or only to an individual within the group.	
17	(c) This section applies regardless of any applicable	
18	contestability period."	
19	SECTION 4. Section 431:1-209, Hawaii Revised Statutes, is	
20	amended to read as follows:	
21	"\$431:1-209 General casualty insurance defined. General	
22	casualty insurance includes vehicle insurance as defined in	
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1	section 4	31:1-208, <u>and</u> accident and health or sickness insurance
2	as define	d in section 431:1-205[, and in addition is insurance:]
3	when issu	ed as an incidental coverage with or supplemental to
4	liability	insurance. In addition, general casualty insurance is
5	insurance	<u>:</u>
6	(1)	Against legal liability for the death, injury, or
7		disability of any human being, or from damage to
8		property;
9	(2)	Of medical, hospital, surgical, and funeral benefits
10		to persons injured, irrespective of legal liability of
11		the insured, when issued with or supplemental to
12		insurance against legal liability for the death,
13		injury, or disability of human beings;
14	(3)	Of the obligation accepted by, imposed upon, or
15		assumed by employers under law for death, disablement
16		or injury to employees;
17	(4)	Against loss or damage by burglary, theft, larceny,
18		robbery, forgery, fraud, vandalism, malicious
19		mischief, confiscation, or wrongful conversion,
20		disposal, or concealment, or from any attempt of any

of the foregoing; also insurance against loss or

damage to moneys, coins, bullion, securities, notes,

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1		drafts, acceptances, or any other valuable papers or
2		documents, resulting from any cause, except while in
3		the mail;
4	(5)	Upon personal effects of individuals, by an all-risk
5		type of policy commonly known as the personal property
6		floater;
7	(6)	Against loss or damage to glass and its appurtenances
8		resulting from any cause;
9	(7)	Against any liability and loss or damage to property
10		resulting from accidents to or explosions of boilers,
11		pipes, pressure containers, machinery, or apparatus;
12	(8)	Against loss of or damage to any property of the
13		insured resulting from the ownership, maintenance, or
14		use of elevators, except loss or damage by fire;
15	(9)	Against loss or damage to any property caused by the
16		breakage or leakage of sprinklers, water pipes, or
17		containers, or by water entering through leaks or
18		openings in buildings;
19	(10)	Against loss or damage resulting from failure of
20		debtors to pay their obligations to the insured
21		(credit insurance);

1	(11)	Against loss of or damage to any domesticated or wild
2		animal resulting from any cause (livestock insurance);
3	(12)	Against loss of or damage to any property of the
4		insured resulting from collision of any other object
5		with such property, but not including collision to or
6		by vessels, craft, piers, or other instrumentalities
7		of ocean or inland navigation (collision insurance);
8	(13)	Against legal liability of the insured, and against
9		loss, damage, or expense incident to a claim of such
10		liability, and including any obligation of the insured
11		to pay medical, hospital, surgical, and funeral
12		benefits to injured persons, irrespective of legal
13		liability of the insured, arising out of the death or
14		injury of any person, or arising out of injury to the
15		economic interest of any person as the result of
16		negligence in rendering expert, fiduciary, or
17		professional service (malpractice insurance);
18	(14)	Against any contract of warranty or guaranty which
19		promises service maintenance, parts replacement,
20		repair, money, or any other indemnity in the event of
21		loss of or damage to a motor vehicle or any part
22		thereof from any cause, including loss of or damage to

1		or loss of use of the motor vehicle by reason of
2	,	depreciation, deterioration, wear and tear, use,
3		obsolescence, or breakage if made by a warrantor or
4		guarantor who or which as such is doing an insurance
5		business; provided that service contracts, as defined
6		and meeting the requirements of chapter 481X, shall
7		not be subject to chapter 431.
8		The doing or proposing to do any business in
9		substance equivalent to the business described in this
10		section in a manner designed to evade the provisions
11		of this section is the doing of an insurance business;
12		and
13	(15)	Against any other kind of loss, damage, or liability
14		properly the subject of insurance and not within any
15		other class or classes or type of insurance as defined
16		in sections 431:1-204 to 431:1-211, if such insurance
17		is not contrary to law or public policy."
18	SECT	ION 5. Section 431:2-209, Hawaii Revised Statutes, is
19	amended by	y amending subsection (d) to read as follows:
20	"(d)	Three years after the [year to which they relate,]
21	date filed	d or within three years of the due date prescribed for
22	the filing	g of the tax report, whichever is later, the

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- 1 commissioner may destroy [any foreign or alien insurer's] the 2 tax reports[7] of any foreign or alien insurers, surplus lines 3 brokers, or independently procured insureds, or similar records 4 or reports now or hereafter in the commissioner's possession." 5 SECTION 6. Section 431:2-402, Hawaii Revised Statutes, is 6 amended by amending subsection (c) to read as follows: 7 The branch may review and take appropriate action on 8 complaints [relating to insurance fraud.] of fraud relating to 9 insurance under title 24, including chapters 431, 432, and 432D, 10 but excluding workers' compensation insurance under chapter 11 386." 12 SECTION 7. Section 431:10A-102.5, Hawaii Revised Statutes, 13 is amended by amending subsection (b) to read as follows: 14 "(b) When used in sections 431:10A-104, 431:10A-105, 15 431:10A-106, 431:10A-107, 431:10A-108, 431:10A-109, 431:10A-110, 431:10A-111, 431:10A-112, 431:10A-113, 431:10A-114, 431:10A-117, 16 17 431:10A-118, 431:10A-601, 431:10A-602, 431:10A-603, and 18 431:10A-604, except as otherwise provided, the terms "accident 19 insurance", "accident and health or sickness insurance", "health 20 insurance", or "sickness insurance" shall include an accident-21 only, specified disease, hospital indemnity, long-term care,
 - disability, dental, vision, medicare supplement, or other SB2820 SD2 LRB 14-1770.doc

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    limited benefit health insurance contract regardless of the
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    manner in which benefits are paid."
         SECTION 8. Section 431:11A-101, Hawaii Revised Statutes,
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    is amended by amending the definition of "licensed insurer" or
    "insurer" to read as follows:
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         ""Licensed insurer" or "insurer" means any person, firm,
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    association, or corporation duly licensed to transact a property
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    or casualty insurance business in this State. The following are
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    not licensed insurers for the purposes of this article:
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        [(1) All risk retention groups as defined in the Superfund
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              Amendments Reauthorization Act of 1986, P.L. No. 99-
              499, 100 Stat. 1613 (1986), and the Risk Retention
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              Act, 15 U.S.C. section 3901 et seq. (1982 and Supp.
14
              1986), and chapter 431K;
         (2) (1) All residual market pools and joint underwriting
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              authorities or associations; and
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        [\frac{3}{3}] (2) Captive [insurers] insurance companies as defined
18
              in section 431:19-101[-], other than risk retention
19
              captive insurance companies."
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         SECTION 9. Section 431:14G-103, Hawaii Revised Statutes,
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    is amended to read as follows:
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"[+]\$431:14G-103[+] Making of rates. (a) Rates shall not 1 2 be excessive, inadequate, or unfairly discriminatory and shall be reasonable in relation to the costs of the benefits provided. 3 4 (b) Except to the extent necessary to meet subsection (a), 5 uniformity among managed care plans in any matters within the 6 scope of this section shall be neither required nor prohibited. 7 Eighty per cent of all investment income on the reserves net of investment manager fees shall be applied to the 8 9 rate determination and filing of the managed care plan. This 10 requirement may be waived or adjusted by the commissioner if the 11 commissioner determines it would impair the minimum reserve requirements or solvency of the managed care plan." 12 13 SECTION 10. Section 431:19-101, Hawaii Revised Statutes, 14 is amended by amending the definition of "captive insurance company" to read as follows: 15 ""Captive insurance company" or "captive insurer" means a 16 17 class 1 company, class 2 company, class 3 company, class 4 company, or class 5 company formed or authorized under this 18 19 article."

SECTION 11. Section 431M-2, Hawaii Revised Statutes, is

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amended to read as follows:

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- 1 "\$431M-2 Policy coverage. (a) All individual and group 2 accident and health or sickness insurance policies issued in 3 this State, individual or group hospital or medical service plan 4 contracts, and nonprofit mutual benefit society, fraternal 5 benefit society, and health maintenance organization health plan contracts shall include within their hospital and medical 6 7 coverage the benefits of alcohol dependence, drug dependence, 8 and mental [illness] health treatment services [provided in 9 section 431M-4], except that this section shall not apply to insurance policies that are issued solely for single diseases, 10 11 or otherwise limited, specialized coverage. 12 (b) The policies and contracts set forth in subsection (a) 13 shall not impose any financial requirements or treatment 14 limitations on mental health or substance use disorder benefits 15 that are more restrictive than the predominant financial 16 requirements and treatment limitations, either quantitative or 17 nonquantitative, imposed on medical and surgical benefits in 18 accordance with the Mental Health Parity and Addiction Equity 19 Act of 2008." SECTION 12. Section 432:1-406, Hawaii Revised Statutes, is 20 21 amended by amending the definition of "uncovered expenditures"
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to read as follows:

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         ""Uncovered expenditures" means the costs to the mutual
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    benefit society for health care services that are the obligation
    of the mutual benefit society, for which a member may be liable
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    in the event of the mutual benefit society's insolvency, and for
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    which no alternative arrangements have been made that are
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    acceptable to the commissioner. Uncovered expenditures include
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    but are not limited to out-of-area services, referral services,
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    and hospital services. Uncovered expenditures do not include
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    expenditures for services when a provider has agreed not to bill
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    the member even though the provider is not paid by the mutual
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    benefit society, or for services that are guaranteed, insured,
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    or assumed by a person or organization other than a mutual
13
    benefit society."
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         SECTION 13. Section 432:2-102, Hawaii Revised Statutes, is
    amended by amending subsection (b) to read as follows:
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               Nothing in this article shall exempt fraternal
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    benefit societies from the provisions and requirements of part
    IV of article 2, part IV of article 3, and article 15 of chapter
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    431, and [of section 431:2-215.] sections 431:2-215, 431:3-303,
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    431:3-304, and 431:3-305."
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1 SECTION 14. Section 432D-1, Hawaii Revised Statutes, is 2 amended by amending the definition of "uncovered expenditures" 3 to read as follows: 4 ""Uncovered expenditures" means the costs to the health 5 maintenance organization for health care services that are the 6 obligation of the health maintenance organization, for which an 7 enrollee may also be liable in the event of the health 8 maintenance organization's insolvency, and for which no 9 alternative arrangements have been made that are acceptable to **10** the commissioner. Uncovered expenditures include but are not 11 limited to out-of-area services, referral services, and hospital 12 services. Uncovered expenditures do not include expenditures 13 for services when a provider has agreed not to bill the enrollee 14 even though the provider is not paid by the health maintenance 15 organization, or for services that are guaranteed, insured, or 16 assumed by a person or organization other than the health **17** maintenance organization." 18 SECTION 15. Section 432D-19, Hawaii Revised Statutes, is 19 amended by amending subsection (d) to read as follows: 20 "(d) Article 2, article 2D, part IV of article 3, article 21 6, part III of article 7, article 9A, article 13, article 14G,

and article 15 of chapter 431, and sections 431:3-301 [and],

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    431:3-302, 431:3-303, 431:3-304, and 431:3-305, and the powers
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    granted by those provisions to the commissioner shall apply to
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    health maintenance organizations, so long as the application in
4
    any particular case is in compliance with and is not preempted
5
    by applicable federal statutes and regulations."
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         SECTION 16. Section 432G-1, Hawaii Revised Statutes, is
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    amended by amending the definition of "uncovered expenditures"
8
    to read as follows:
         ""Uncovered expenditures" means the costs to the dental
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    insurer for dental care services that are the obligation of the
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    dental insurer, for which an enrollee may also be liable in the
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    event of the dental insurer's insolvency, and for which no
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    alternative arrangements have been made that are acceptable to
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    the commissioner. Uncovered expenditures include but are not
    limited to out-of-area services, referral services, and hospital
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    services. Uncovered expenditures shall not include expenditures
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    for services when a provider has agreed not to bill the enrollee
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    even though the provider is not paid by the dental insurer, or
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    for services that are quaranteed, insured, or assumed by a
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    person or organization other than the dental insurer."
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SECTION 17. Statutory material to be repealed is bracketed

and stricken. New statutory material is underscored.

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1 SECTION 18. This Act shall take effect on July 1, 2050.

Report Title:

Insurance; Rescission of Coverage; Health Benefit Plans; General Casualty Insurance; Tax Records; Insurance Fraud Investigations; Long-term Care Insurance; Captive Insurance; Reserves

Description:

Prohibits rescission of coverage under health benefit plans in most circumstances; requires written notice prior to rescission. Clarifies a requirement with regard to companies with general casualty insurance authority. Clarifies retention requirements for tax records for surplus line brokers and independently procured insureds. Allows the insurance fraud investigations branch to take appropriate action in certain instances. Includes long-term care insurance as part of limited benefit health insurance. Amends definitions relating to captive insurance companies. Specifies certain rate making requirements for managed care plans. Makes other amendments to conform to National Association of Insurance Commissioners model laws and the federal Patient Protection and Affordable Care Act. Effective 7/1/2050. (SD2)

The summary description of legislation appearing on this page is for informational purposes only and is not legislation or evidence of legislative intent.