# GENERAL ASSEMBLY OF NORTH CAROLINA SESSION 2021

S

#### **SENATE BILL 85**

	Short Title:	Allow Vision Service Corporations.	(Public)
	Sponsors:	Senators Corbin, Burgin, and Woodard (Primary Sponsors).	
	Referred to:	Rules and Operations of the Senate	
		February 15, 2021	
1		A BILL TO BE ENTITLED	
2		ALLOW VISION SERVICE CORPORATIONS AND TO MAKE T	
3		NFORMING CHANGES TO CHAPTER 58 OF THE GENERAL ST	ATUTES.
4	The General A	Assembly of North Carolina enacts:	
5		I AN MEIAN SEDVICE CORDOR ATIONS	
6		LOW VISION SERVICE CORPORATIONS	
7		ECTION 1. Part I of Article 65 of Chapter 58 of the General Statu	nes reads as
8 9	rewritten:	"Article 65.	
9 10	"Donte	al, Hospital, Medical and Dental Medical, and Vision Service Corpora	tions
10	Denta	"Part 1. In General.	tions.
12	"8 58-65-1	<b>Regulation and definitions; application of other laws; profit</b>	and foreign
12		proprations prohibited.	and foreign
13		ny corporation organized under the general corporation laws of the St	tate of North
15		the purpose of maintaining and operating a nonprofit hospital or medi	
16		al, medical, or vision service plan whereby hospital care or medical or d	
17		tal, medical, or vision care or services may be provided in whole or in	
18	-	or by hospitals, physicians, optometrists, or dentists participating in	
19	-	e governed by this Article and Article 66 of this Chapter and shall be	-
20	· ·	isions of the insurance laws of this State, unless otherwise provided.	1
21	-	"hospital service plan" as used in this Article includes the contractin	g for certain
22	fees for, or fu	urnishing of, hospital care, laboratory facilities, X-ray facilities, drugs	<del>, appliances,</del>
23	<del>anesthesia, n</del>	ursing care, operating and obstetrical equipment, accommodations	ər any other
24	services authors	prized or permitted to be furnished by a hospital under the laws of the S	tate of North
25	Carolina and	approved by the North Carolina Hospital Association or the Ameri	can Medical
26	Association.		
27		"medical service plan" as used in this Article includes the contrac	
28		ees toward, or furnishing of, medical, obstetrical, surgical or any other	
29		orized or permitted to be furnished by a duly licensed physician or ot	
30		58-50-30. The term "medical services plan" also includes the contra	
31		ees toward, or furnishing of, professional medical services authorized	
32		ed by a duly licensed provider of health services licensed under Chap	ter 90 of the
33	General Statu		
34		"dental service plan" as used in this Article includes contracting for the	
35		or furnishing of dental or any other professional services authorized or	permitted to
36	be furnished	by a duly licensed dentist.	



1	The term "	hospital service corporation" as used in this Article is intended to mean any
2	nonprofit corpo	pration operating a hospital or medical or dental service plan, as defined in this
3	section. Any co	rporation organized and subject to the provisions of this Article, the certificate of
4	incorporation o	f which authorizes the operation of either a hospital or medical or dental service
5	plan, or any or	all of them, may, with the approval of the Commissioner, issue subscribers'
6	contracts or cer	tificates approved by the Commissioner of Insurance, for the payment of either
7	hospital or mee	lical or dental fees, or the furnishing of such services, or any or all of them, and
8		contracts with hospitals for physicians or dentists, or any or all of them, for the
9	furnishing of fe	es or services respectively under a hospital or medical or dental service plan, or
10	any or all of the	<del>2m.</del>
11	The term "p	preferred provider" as used in this Article with respect to contracts, organizations,
12	policies or othe	erwise means a health care service provider who has agreed to accept, from a
13	corporation org	anized for the purposes authorized by this Article or other applicable law, special
14		terms in exchange for providing services to beneficiaries of a plan administered
15	pursuant to this	
16		full service corporation" as used in this Article means any corporation organized
17	under the provi	sions of this Article that offers a medical service plan or a hospital service plan.
18		ingle service corporation" as used in this Article means any corporation organized
19		sions of this Article that offers only a dental service plan.
20	1	h the approval of the Commissioner, any corporation organized and subject to the
21		his Article, the certificate of incorporation of which authorizes the operation of
22		hospital, medical, or vision service plan, or any combination of those plans, may
23	do both of the f	
24	(1)	<u>Issue subscribers' contracts or certificates for the provision of, or the payment</u>
25		of fees for, dental, hospital, medical, or vision service or care, or any or all of
26		those services or care as applicable.
27	(2)	Enter into contracts with hospitals, physicians, dentists, optometrists, or any
28		or all of those health care providers, for the provision of, or the payment of
29		fees for, services or care under a dental, hospital, medical, or vision service
30		plan, or any combination of those plans.
31	(b) thro	ugh (c) Repealed by Session Laws 2001-297.
32	< ,	foreign or alien hospital or medical or dental dental, hospital, medical, or vision
33		tion as herein defined shall be authorized to do business in this State.
34		Definitions applicable to this Article.
35		ng definitions apply in this Article:
36	(1)	Dental service corporation. – Any nonprofit corporation operating a dental
37	<u>, - , </u>	service plan.
38	<u>(2)</u>	Dental service plan. – A contract for the provision of, or the payment of fees
39	<u>, - /</u>	for, dental care or dental services, including any other professional services
40		authorized or permitted to be provided by a duly licensed dentist.
41	<u>(3)</u>	Full-service corporation. – Any corporation organized under the provisions of
42	<u>(0)</u>	this Article that offers a medical service plan or a hospital service plan.
43	<u>(4)</u>	Hospital service corporation. – Any nonprofit corporation that operates a
44	<u></u>	hospital service plan.
45	<u>(5)</u>	<u>Hospital service plan.</u> – Any contract for the provision of, or the payment of
46	<u>(0)</u>	fees for, hospital care, laboratory facilities, X-ray facilities, drugs, health care
47		appliances, anesthesia, nursing care, operating and obstetrical equipment, or
48		health care accommodations, including any other services permitted to be
49		provided by a hospital under the laws of this State and approved by the North
50		Carolina Hospital Association or the American Medical Association.

Ge	neral Assemb	oly Of North Carolina	Session 2021
	<u>(6)</u>	Medical service plan. – Any contract for the furnishing	of, or the payment of
		fees for, any of the following:	<b>L</b>
		<u>a.</u> <u>Medical, obstetrical, surgical, or any other</u>	professional services
		authorized or permitted to be provided by a duly	
		other provider listed in G.S. 58-50-30.	<u>neensea physician or</u>
		<u>b.</u> Professional medical services authorized or per	mitted to be provided
		by a health care provider licensed under Chap	-
		Statutes.	
	(7)		read to accort from a
	<u>(7)</u>	<u>Preferred provider. – A health care provider who has ag</u>	-
		corporation organized for the purposes authorized by	-
		reimbursement terms in exchange for providing service	s to beneficiaries of a
		full-service plan administered pursuant to this Article.	
	<u>(8)</u>	Single-service corporation. – Any corporation organized	d under the provisions
		of this Article that offers any of the following:	
		<u>a.</u> <u>Only a dental service plan.</u>	
		b. Only a vision service plan.	
		c. Both a dental service plan and a vision service plan	an, but no other plans.
	<u>(9)</u>	Vision service corporation Any nonprofit corporation	on operating a vision
		service plan.	
	(10)	Vision service plan Any contract for the provision	of, or the payment of
		fees for, vision care or vision services, including an	
		services permitted to be provided by a duly lice	
		ophthalmologist.	<u> </u>
"8 5	58-65-2. Oth	er laws applicable to <u>all</u> service corporations.	
0		ng provisions of this Chapter are applicable to serv	<del>vice</del> -full-service and
sing		rporations that are subject to this Article:	
		5 Authority over all insurance companies;	no exemptions from
		license.	1
	G.S. 58-50-29	90 Health benefit plans or insurers contracting	for the provision of
	0.5.0000	dental services; no limitation on fees for non	covered services
	G.S. 58-50-30		
	<u>0.5. 50 50 5</u>	vision services or materials; no limitation or	_
		services or materials.	i iees ior noncovered
	C S 59 51 14		
		5(a)(2)b Accident and health policy provisions.	
		7 Portability for accident and health insurance	
	G.S. 58-51-2	5 Policy coverage to continue as to children v	
		physical disability or dependent students or	medically necessary
		leave of absence.	
	G.S. 58-51-9	5(h),(i),(j) Approval by Commissioner of forms, class	ssification and rates;
		hearings; exceptions.	
"§ :		tract for joint assumption or underwriting of risks.	
	•	ice or single-service corporation organized or regulated by	1
Art	icle and Artic	le 66 of this Chapter is authorized to enter into such-con-	ntracts with any other
firn	n or corporatio	on for joint assumption or underwriting of any <del>part or all <u>p</u></del>	<u>art, or all, of any risks</u>
und	lertaken upon	such terms and conditions as that are approved by t	he Commissioner of
Insu	urance.		
"§ !	58-65-10. Pr	emium or dues <del>paid by employer, employee, princip</del> a	l or agent or jointly
-		everally.paid.	_ • •
		remium or dues charged by a corporation regulated under	the provisions of this
	•••	le 66 of this Chapter may be paid by the employer, employed	-

or jointly and severally, agent. The term "employer" as used herein in this section includes 1 2 counties, municipal corporations, and all departments or subdivisions of the State, county, 3 municipal corporation, and official boards including city and county boards of alcoholic control, 4 together with all others occupying the status of employer and employee, principal and agent. 5 Any premium or dues charged by a corporation regulated under the provisions of this (b) 6 Article and Article 66 of this Chapter may be paid jointly and severally. 7 8 "§ 58-65-25. Hospital, <del>physician and dentist physician, dentist, and optometrist contracts.</del> 9 Any full-service corporation organized under this Article may enter into contracts for (a) 10 the rendering of hospital service to any of its subscribers by hospitals approved by the American 11 Medical Association and/or-or the North Carolina Hospital Association, and Association. Any full-service or single-service corporation may enter into contracts for the 12 (a1) 13 furnishing provision of, or the payment in whole or in part for, medical and/or dental medical, 14 dental, or vision services rendered to any of its subscribers by duly licensed physicians and/or 15 dentists. physicians, dentists, or optometrists in accordance with this Article. 16 All obligations arising under contracts issued by such corporations-a full-service or (a2) 17 single-service corporation to its subscribers shall be satisfied by payments made (i) directly to 18 the hospitals or hospitals and/or physicians and/or dentists or health care provider rendering such 19 the service, or direct-(ii) directly to the subscriber or his, her, or their the subscriber's legal 20 representatives upon the receipt by the corporation from the subscriber of a statement marked 21 paid by the hospital(s) and/or physician(s) and/or dentist(s) or both hospital or hospitals or health 22 care provider rendering such service, and all such payments heretofore made are hereby ratified. 23 the applicable service. Nothing in this section shall be construed to discriminate against hospitals 24 conducted by other schools of medical practice. 25 All certificates, plans or contracts issued to subscribers or other persons by hospital (b) 26 and medical and/or dental service full-service or single-service corporations operating under this 27 Article shall contain in substance a provision as follows: "After two years from the date of issue 28 of this certificate, contract or plan no misstatements, except fraudulent misstatements made by 29 the applicant in the application for such certificate, contract or plan, shall be used to void said 30 certificate, contract or plan, or to deny a claim for loss incurred or disability (as therein defined) 31 commencing after the expiration of such two-year period." 32 33 "§ 58-65-50. Application for certificate of authority or license. 34 No corporation subject to the provisions of this Article and Article 66 of this Chapter shall 35 issue contracts for the rendering of hospital or medical and/or dental dental, hospital, medical, or 36 vision service to subscribers, until the Commissioner of Insurance has, by formal certificate or 37 license, authorized it to do so. Application for such a certificate of authority or license shall be 38 made on forms to be supplied by the Commissioner of Insurance, Insurance and containing such 39 any information as he shall deem necessary. required by the Commissioner. Each application for 40 such a certificate of authority or license, as a part thereof shall be accompanied by license shall include duplicate copies of the following documents duly certified by at least two of the executive 41 42 officers of such-the corporation: 43 (1)Certificate of incorporation with all amendments thereto incorporation, 44 including any amendments. 45 Bylaws with all amendments thereto. Bylaws, including any amendments. (2)46 (3) Each contract executed or proposed to be executed by and between the 47 corporation and any participating hospital, and/or physicians hospital or health 48 care provider under the terms of which hospital and/or medical and/or dental 49 dental, hospital, medical, or vision service is to be furnished to subscribers to 50 the plan.

	General Assemb	oly Of North Carolina	Session 2021
1 2 3 4	(4)	Each form of contract, application, rider, and endorsement to be issued to subscribers to the plan, or in renewal of subscribers to the plan, together with a table of rates ch be charged to subscribers for each form of <u>such-the</u> cont	any of contracts with arged or proposed to
5 6 7 8	(5)	Financial statement of the corporation which shall include contribution paid or agreed to be paid to the corporation the name or names of each contributor contributor, and contribution.	n for working capital,
9	"8 58-65-55 Iss	uance and continuation of license.	
0	-	v corporation subject to this Article shall pay to the Comm	nissioner a fee of two
1	hundred fifty do	llars (\$250.00) for filing an application for a license. F s with the filing. Before issuing or continuing any such-	ee payment shall be
3	-	e, the Commissioner may make such an examination or	
4	Commissioner de	eems expedient. The Commissioner shall issue a license u	pon the payment of a
5	fee of one thousa	and five hundred dollars (\$1,500) for a single service single	e-service corporation
6		five hundred dollars (\$2,500) for a full service full-service	corporation and upon
7	being satisfied or	n the following points:	
8	(1)	The applicant is established as a bona fide nonpro-	-
9		corporation as defined by this Article and Article 66 of t	1
0	(2)	The rates charged and benefits to be provided are fair an	
1	(3)	The amounts provided as working capital of the corpo	
2		only out of earned income in excess of amounts paid and	
3		expenses and hospital and medical and/or dental expense	
4 5		the Department deems adequate, as provided hereina	
5 6		medical, or vision expenses, and the reserve is deen	hed adequate by the
7	(4)	<u>Department.</u> <u>That the The amount of money actually available for v</u>	working capital be is
8	(+)	sufficient to carry all acquisition costs and operating expe	<b>•</b> • • <u>–</u>
9		period of time from the date of the issuance of the certifi	
0	(b) The li	icense shall continue in full force and effect, subject to p	
1		tion fee of one thousand five hundred dollars (\$1,500)	
2		prporation or two thousand five hundred dollars (\$2,5	_
3	full-service corp	oration, subject to all other provisions of subsection (a)	) of this section and
4	subject to any oth	her applicable provisions of the insurance laws of this Stat	e.
5	"§ 58-65-60. Su	bscribers' contracts; required and prohibited provision	ns.
6			
7	• • •	contract entered into by any such corporation subject to	
8		<u>ele 66 of this Chapter</u> with any subscriber thereof of the co	
9	-	tificate stating the terms and conditions thereof of the contr	
0		to be kept by him. the subscriber. No such certificate form	0 1
1 2	U	oups of 10 or more certificate holders or those issued pursu g 10 or more certificate holders shall be made, issued or d	0 1
.2	-	is the following provisions, provided, however, groups	
4		s complying with and maintaining eligibility status under	
5		ioner of Insurance for group enrollment may be cancelly	
6	•	s below the minimum participation of five certificate hol	• 1
7		b hospital, medical or surgical coverage:	Error, of it und group
8	(1)	A statement of the amount payable to the corporation b	by the subscriber and
.9		the times at which and manner in which such the requ	-
0		paid; this provision may be inserted in the application	on rather than in the
51		certificate. Application The application need not be attac	ched to the certificate.

	General Assem	bly Of	North C	arolina	Session 2021
	(2)	A sta	tement o	f the nature of the benefits to be furnished and	d the period during
)	( )			ill be furnished.	6
5	(3)		•	f the terms and conditions, if any, upon whic	h the contract may
Ļ				or otherwise terminated at the option of	
i				ll be in the following language:	1 2
		a.		wability": <u>Renewability.</u> Any contrac	t subject to the
				ions of this subdivision is renewable at	
			subscr	iber unless sufficient notice in writing of not	nrenewal is mailed
			to the	subscriber by the corporation addressed t	o the last address
			record	ed with the corporation.	
		b.	<del>"Suffi</del>	cient notice" Sufficient notice. – The notice r	equired shall be as
			follow	/8:	
			1.	During the first year of any such contract,	or during the first
				year following any lapse and reinstatement,	or reenrollment, a
				period of 30 days.	
			2.	During the second and subsequent year	
				coverage, a number of full calendar mo	•
				equivalent to one fourth the number of mo	
				coverage from the first anniversary of the	
				reinstatement or reenrollment, whichever d	,
			2	to the date of mailing of such the <u>30-day</u> no	
			3.	No period of required notice shall exceed	•
				renewal hereunder shall renew any such con	• •
				beyond the required period of notice e	
		0	Modif	agreement of the subscriber and corporation	
		<u>c.</u>		<u>ications, terminations, and cancellations. – T</u> ied, terminated or cancelled by the corporation	
				, upon:upon any of the following:	If at any time at its
			<del>a.<u>1.</u></del>	Nonpayment by the subscriber of fees or du	es as required
			u. <u>1.</u> b. <u>2.</u>	Failure or refusal by the subscriber to co	_
			0. <u>2.</u>	benefit changes approved by the Cor	- ·
				G.S. 58-65-45.	under
			<del>c.<u>3.</u></del>	Failure or refusal by the subscriber after 30 of	lavs' written notice
				to subscriber to transfer into hospital, me	•
				dental, hospital, medical, or vision service pl	
				to which the subscriber has changed reside	-
				for or to which corporation is required to tr	ansfer by interplan
				agreement of transfer.	
	(4)	A sta	tement t	hat the contract includes the endorsement the	ereon and attached
		paper	rs, if any	, and together with the applications contains	he entire contract.
	(5)	A sta	atement t	hat if the subscriber defaults in making any	<del>payment, <u>p</u>ayment</del>
				ntract, then the subsequent acceptance of	
				t its home office shall reinstate the contract,	
				injury, only to cover such sickness as may	
				0 days after the date of such acceptance.	acceptance of the
		<u>payn</u>	<u>nent.</u>		
					•, ,•
		_		ve medical treatment in tax-supported ins	
				cal or dental dental, hospital, medical, or v	
	contract, or certi	ficate g	overned	by this Article and Article 66 of this Chapter	shall be delivered,

51 issued, executed, or renewed in this State, or approved for issuance or renewal in this State, unless

	General Assembly Of North Carolina	Session 2021
1	it provides for the payment of benefits for charges made for medical can	
2	licensed State tax-supported institutions on a basis no less favorable than t	
3	apply had the medical care been rendered by any other public or private ins	
4	The term "State tax-supported institutions" includes community mental heat	th centers and other
5	health clinics which that are certified as Medicaid providers.	
6		
7	"§ 58-65-70. Contracts to cover any person possessing the sickle cell tra	it or hemoglobin C
8	trait.	
9	No hospital, medical, dental, or any health service full-service or single	
10	governed by this Article and Article 66 of this Chapter shall refuse do either	
11	(1) <u>Refuse to issue or deliver any individual or group hospi</u>	
12	vision, or health service contract in this State which it is	
13	delivery in this State, and which affords that provides ben	_
14	any medical health care treatment or service authorized	
15	furnished provided by a hospital, elinic, family health of health maintenance, encouring the	
16 17	health clinic, health maintenance organization, phy	
17 18	assistant, nurse practitioner or any medical service fac	•
18 19	<u>facility</u> , or health care personnel, on account of the fact th	1
19 20	to be insured possesses sickle cell trait or hemoglobin C such policy issued and delivered in this State carry trait.	, trait, nor snan any
20 21		or charge on account
$\frac{21}{22}$	(2) <u>Issue and deliver a policy that has a higher premium rate of</u> of the fact that the person who is to be insured possesses	-
22	of the fact that the person who is to be insured possesses	SICKIC COIL trait.
23 24	"§ 58-65-95. Investments and reserves.	
25	(a) Corporations subject to this Article shall invest in or hold only th	ose assets permitted
26	by Article 7 of this Chapter for life and health insurance companies.	ussets permitted
27	(b) Every such corporation shall accumulate and maintain, in addition	on to proper reserves
28	for current administrative liabilities and whatever reserves are deemed to be	1 1
29	by the Commissioner for unpaid hospital, medical, or dental dental, hospita	
30	bills and unearned membership dues, a special contingent surplus or reserve a	
31	annually of its gross annual collections from membership dues, exclusive of	
32	plus plans, until the reserve equals an amount that is three times its average m	
33	for claims and administrative and selling expenses:	
34	(1) First \$200,000 4%	
35	(2) Next \$200,000 2%	
36	(3) All above \$400,000 1%	
37	(c) Any such corporation subject to this Article may accumula	
38	contingent reserve in excess of the reserve required in subsection (b) of this sector	,
39	an amount equal to six times the average monthly expenditures for claims an	d administrative and
40	selling expenses.	
41	(d) If the Commissioner finds that special conditions exist warrar	-
42	decrease in the reserves or schedule of reserves in subsection (b) of	
43	Commissioner may modify them accordingly. Provided, however, when spe	
44	warranting an increase in the schedule of reserves, the schedule shall not	-
45	Commissioner until a reasonable length of time has elapsed after the Commi	issioner gives notice
46	of the increase.	
47	 18 59 (5 110) E	
48	"§ 58-65-110. Expenses.	· · · · · · · · · · · · · · · · · · ·
49	All acquisition expenses in connection with the solicitation of subscrib	ers to such hospital

All acquisition expenses in connection with the solicitation of subscribers to such hospital
 and/or medical and/or dental <u>a dental</u>, hospital, medical, or vision service plan and administration

1 costs including salaries paid to officers of the corporations, if any, shall at all times be subject to 2 inspection by the Commissioner of Insurance.

3 4

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#### "§ 58-65-120. Medical, dental and hospital Dental, hospital, medical, and vision service associations and agent to transact business through licensed agents only.

6 No medical and/or dental or hospital dental, hospital, medical, or vision service association; 7 association, nor any agent of any association-the association, shall on behalf of such-the 8 association or agent, agent knowingly permit any person not licensed as an agent as provided 9 required by law, to solicit, negotiate for, collect or transmit a premium for a new contract of 10 medical and/or dental or hospital dental, hospital, medical, or vision service certificate or to act 11 in any way in the negotiation for any contract or <del>policy; provided, no policy.</del> No license shall be 12 required of any of the following:

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- Persons designated by the association or subscriber to collect or deduct or (1)transmit premiums or other charges for medical and/or dental care or hospital dental, hospital, medical, or vision contracts, or to perform such any acts as may be required for providing coverage for additional persons who are eligible under a master contract.
- An agency office employee acting in the confines of the agent's office, under (2)the direction and supervision of the duly licensed agent and within the scope of such-that agent's license, in the acceptance of request for insurance and payment of premiums, and the performance of clerical, stenographic, and similar office duties.
- 23

# "§ 58-65-131. Findings; definitions; conversion plan.

25 Intent and Findings. - It is the intent of the General Assembly by the enactment of (a) 26 this section, G.S. 58-65-132, and G.S. 58-65-133 to create a procedure for a medical, hospital, or 27 dental service full-service or single-service corporation to convert to a stock accident and health 28 insurance company or stock life insurance company that is subject to the applicable provisions 29 of Articles 1 through 64 of this Chapter. Except as provided herein, in this section, it is not the 30 intent of the General Assembly to supplant, modify, or repeal other provisions of this Article and 31 Article 66 of this Chapter or the provisions of Chapter 55A of the General Statutes (the Statutes, 32 the Nonprofit Corporation Act) Act, that govern other transactions and the procedures relating to 33 such those transactions that apply to corporations governed by the provisions of this Article and 34 Article 66 of this Chapter.

35 The General Assembly recognizes the substantial and recent changes in market and health 36 care conditions that are affecting these corporations and the benefit of equal regulatory treatment 37 and competitive equality for health care insurers. The General Assembly finds that a procedure 38 for conversion is in the best interest of policyholders because it will provide greater financial 39 stability for these corporations and a greater opportunity for the corporations to remain 40 financially independent. The General Assembly also finds that if a medical, hospital, or dental service full-service or single-service corporation converts to a stock accident and health 41 42 insurance company or stock life insurance company, the conversion plan must provide a benefit 43 to the people of North Carolina equal to one hundred percent (100%) of the fair market value of 44 the corporation.

45 Definitions. – As used in The following definitions apply in this section, (b) 46 G.S. 58-65-132, and G.S. 58-65-133:

- 47 48
- "Certificate holder" includes an Certificate holder. An enrollee, as defined (1)in Article 67 of this Chapter, in a health maintenance plan provided by the 49 corporation or a subsidiary or by the new corporation or a subsidiary.
- 50 "Code" means Code. - Title 26 of the United States Code, the United States (2)Internal Revenue Code of 1986, as amended. 51

	General Assem	bly Of North Carolina	Session 2021
1 2 3 4	(3)	<u>"Conversion" means the Conversion. – The conversion</u> or dental <u>full-service or single-service</u> service corpor and health insurance company or stock life insurance applicable provisions of Articles 1 through 64 of this	ation to a stock accident company subject to the
5	(4)	"Corporation" means a Corporation. – A dental, hos	pital, medical, or <del>dental</del>
6 7		<u>vision</u> service corporation governed by this Article th file a plan of conversion with the Commissioner und	er subsection (d) of this
8 9		section to convert from a hospital, medical, or dental stock accident and health insurance company or stock	1
10 11 12	(5)	<u>"Foundation" means a Foundation. – A newly forme</u> social welfare organization formed and operating un the Code and Chapter 55A of the General Statutes.	
13 14 15	(6)	"New corporation" means a <u>New corporation. – A</u> governed by this Article that has had its plan of conv Commissioner under G.S. 58-65-132 and that has	version approved by the
16 17		accident and health insurance company or stock life i	nsurance company.
18	"§ 58-65-132. R	eview and approval of conversion plan; new corporation	ation.
19	(a) Appro	oval of Plan of Conversion The Commissioner sh	all approve the plan of
20		ssue a certificate of authority to the new corporation to	transact business in this
21	•	Commissioner finds all of the following:	
22	(1)	The plan of conversion meets the requirements of	of G.S. 58-65-131, this
23		section, and G.S. 58-65-133.	
24	(2)	Upon conversion, the new corporation will meet the a	
25		conditions under this Chapter, including applicable	e minimum capital and
26 27	(2)	surplus requirements.	ing contractual rights of
28	(3)	The plan of conversion adequately protects the exist the corporation's subscribers and certificate holders	
20 29		<u>dental, hospital, medical, or vision</u> services and	_
30		reimbursement for those services.	pujitone of claims for
31			
32	(b) New	Corporation After issuance of the certificate of a	uthority as provided in
33	subsection (a) of	this section, the new corporation shall no longer be su	bject to this Article and
34		is Chapter but shall be subject to and comply with	11
35		cable to domestic insurers and Chapter 55 of the Gene	
36		A of Chapter 55 shall not apply to the new corporatio	1
37		cles of incorporation, as amended and certified by the	
38 39		becretary of State. The legal existence of the corporation	
39 40	1	ion is a continuation of the corporation. The conversion orm of organization. Except as provided in subdivision (	
40 41		ets, rights, liabilities, obligations, interests, and relations	
42	1 1 .	continue and remain in the new corporation. All action	
43	-	poration was a party prior to conversion shall be unaffect	• • •
44	-	Decision and Order; Procedures. – The Commissioner's	•
45	. ,	in of conversion shall include findings of fact and conc	
46	0 0 1	ased upon and supported by substantial evidence, include	0
47		the corporation and evidence obtained at hearings held	
48		d by a final decision of the Commissioner approv	
49 7 0	• •	petition the Superior Court of Wake County within 30 da	
50 51		al from a final decision and order of the Commissioner rsuant to G.S. 58-2-75. Chapter 150B of the General St	

	General Assembly Of North Carolina	Session 2021
1 2 3	<ul> <li>the procedures of G.S. 58-65-131, this section, and G.S. 58-65-133. This subsect apply to appeal of an order of the Commissioner issued pursuant to G.S. 58-65-131 (d) Attorney General's Enforcement Authority; Legal Action on Validity</li> </ul>	.(c).
4	Conversion. –	1. 1
5 6 7	(1) Nothing in this Chapter limits the power of the Attorney Gene declaratory judgment or to take other legal action to protect or rights of the public in the corporation.	
8 9 0	(2) Any legal action with respect to the conversion must be filed in Court of Wake County.	the Superior
0 1	 "§ 58-65-135. Cost plus plans.	
2	(a) Any corporation organized under the provisions of this Article and Arti	cle 66 of this
3	Chapter shall be authorized as agent of any other corporation, firm, group, pa	
4	association, or any subsidiary or subsidiaries thereof, municipal corporation, S	
5	government, or any agency thereof, to administer on behalf of such corporation,	
	partnership, or association, or any subsidiary or subsidiaries thereof, municipal	corporation,
	State, federal government, or any agency thereof, any group hospitalization or m	edical and/or
	dental dental, hospital, medical, or vision service plan, promulgated by such the	-
	firm, group, partnership, or association, or any subsidiary or subsidiaries thereof	-
	corporation, State, federal government, or any agency thereof, on a cost plus a	dministrative
	expense basis, provided said only if all of the following apply:	
	(1) <u>The</u> other corporation, firm, group, partnership, or associa	•
	subsidiary or subsidiaries thereof, municipal corporation, S	
	government, or any agency thereof shall have had an active existence of such the plan and the stablishment of such the plan and	
	least one year preceding the establishment of such-the plan, and for purposes other than procuring such-the group hospitalize	
	medical and/or dental dental, hospital, medical, or vision service	
	a cost plus administrative expense basis, and provided only that a	-
	basis.	
	(2) <u>Administrative</u> costs of such a the cost plus plan administered by	a corporation
	organized under the provisions of this Article and Article 66 of	
	acting as an agent as herein provided, provided by this section	
	exceed the remuneration received therefor, and provided fur	ther that the
	received.	
	(3) <u>The corporation organized under this Article and Article 66 of</u>	-
	administering such a the cost plus plan shall have no liability to th	
	or to the hospitals or health care providers for the succes	
	liquidation or dissolution of such the group hospitalization or m	
	dental dental, hospital, medical, or vision service plan and prov	vided further,
	that nothing herein contained plan.	anation firm
	(b) <u>Nothing in this section shall be construed to require of said that a corportion</u> group, partnership, or association, or any subsidiary or subsidiaries thereo	
	corporation, State, federal government, or any agency thereof, conformity co	-
	provisions of this Article and Article 66 of this Chapter if such a group hospitaliz	
	<u>plan</u> is administered by a corporation organized under this Article and Article 66 of	
	on a cost plus expense basis.	chapter,
	(c) The administration of any cost plus plans as herein provided as provide	ed for by this
	section shall not be subject to regulation or supervision by the Commissioner of Ins	

49

50 "§ 58-65-150. Construction of Chapter as to single employer plans; associations exempt.

• • •

1 (a) Nothing in this Article and Article 66 of this Chapter shall be construed to affect or 2 apply to hospital or medical and/or dental\_dental, hospital, medical, or vision service plans which 3 limit their membership to employees and the immediate members of the families of the 4 employees of a single employer or his or its subsidiary or subsidiaries and which plans are 5 operated by such employer of such limited group of the employees; nor shall employees.

6 (b) Nothing in this Article and Article 66 of this Chapter be construed to affect or apply 7 to any nonstock, nonprofit medical service association which was, on January 1, 1943, organized 8 solely for the purpose of, and actually engaged in, the administration of any medical service plan 9 in this State upon contracts and participating agreements with physicians, surgeons, or medical 10 societies, whereby such physicians or surgeons societies that underwrite such the medical service 11 plan by contributing their services to members of such the association upon agreement with such 12 the association as to the schedule of fees to apply and the rate and method of payment by the 13 association from the common fund paid in periodically by the members for medical, surgical and 14 obstetrical care; and such hospital-care.

(c) <u>All service plans, plans described in subsection (a) of this section and such all medical</u>
 service associations as are herein specifically described, described in subsection (b) of this
 section are hereby exempt from the provisions of this Article and Article 66 of this Chapter.

18 (d) The Commissioner of Insurance may require from any such hospital service 19 <u>full-service or single-service plan or medical service association such any</u> information as will 20 <u>necessary to enable him-the Commissioner to determine whether such hospital-the service plan</u> 21 or medical service association is exempt from the provisions of this Article and Article 66 of this 22 Chapter.

## 23 "§ 58-65-155. Merger or consolidation, proceedings for.

24 Mergers and Consolidations Allowed. - Any two or more hospital and/or medical (a) 25 and/or dental dental, hospital, medical, or vision service corporations organized under and/or or 26 subject to the provisions of this Article and Article 66 of this Chapter Chapter, as determined by 27 the Commissioner of Insurance may, as shall be specified in the agreement hereinafter required, 28 Insurance may be (i) merged into one of such the constituent corporations, herein designated as 29 the surviving corporation, or may be (ii) consolidated into a new corporation to be formed by the 30 means of such consolidation of the constituent corporations, which new corporation is herein 31 designated as the resulting or consolidated corporation, and the directors and/or directors, the 32 trustees, or a majority of them, directors or trustees, of such-the merging or consolidating 33 corporations as desire to consolidate or merge, may enter into an agreement signed by them and 34 under the corporate seals of the respective corporations, prescribing the corporations.

35	<u>(b)</u>	Writte	n Agreement Required. – The terms of any merger or consolidation allowed
36	under this	section	shall be contained in a written agreement. All written agreements shall contain
37	the follow	<u>ing:</u>	
38		<u>(1)</u>	The terms and conditions of the consolidation or merger, the merger.
39		<u>(2)</u>	The mode of carrying the same consolidation or merger into effect and stating
40			such other effect.
41		<u>(3)</u>	Any facts as can be stated in the case of a consolidation or merger, stated in
42			such altered form as the circumstances of the case require, and with such and
43			other details as to conversion of certificates of the subscribers as are deemed
44			necessary <del>and/or <u>or</u> p</del> roper.
45	<u>(c)</u>	Said ag	greement-Notice of Agreement. – Agreements for any merger or consolidation
46	allowed u	nder th	is section shall be submitted to the certificate holders of each constituent
47	corporatio	n, at a s	eparate meeting thereof, called for the purpose of taking the same consolidation
48	or merger	_into <del>ce</del>	onsideration; of the time, consideration. Notice of place and object of which
49	subject of	<u>f</u> the m	neeting due notice shall be required and shall meet all of the following
50	<u>requireme</u>	nts:	

General Assemb	ly Of North Carolina	Session 2021
(1)	The notice shall be given by publication once a wee	k for two consecutive
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		of suite <u>interapprieuen</u>
(2)	•	<del>uch a form and of such</del>
<u>(2)</u>		den <u>a </u> torni and or such
(3)		vith the Commissioner
<u>(57</u>		
(4)		nleted at least 15 days
<u><u> </u></u>		
		ays prior to the date of
(d) Meeti		r an agreement for any
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	• • •	
		corporation, ander an
	*	signed by the presiden
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	by his <u>of her</u> signature being arrived thereto <u>to the agree</u>	<u>intent</u> under the sear of
	sioner shall not approve any <del>such consolidation or mere</del>	er agreement or plans
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<u>une record, stiall</u>	or evidence of the agreement and act of consolidation	or merger or <del>sala <u>un</u></del>
	(1) (2) (3) (4) (4) (4) (4) (4) (4) (4) (4) (4) (4	<ul> <li>weeks in some newspaper published in Raleigh, Nort counties in which the principal offices of the constiblecated, and if no such located. If there is no paper is profit the principal office of such the constituent corporequired notice shall be posted at the courthouse door county or counties for a period of two weeks.</li> <li>(2) Such The required printed or posted notices shall be in s a size as the Commissioner of Insurance may approve.</li> <li>(3) A true copy of said the required notices shall be filed v of Insurance.</li> <li>(4) Such The publication and filing of notices shall be comprise to the date set therein for the meeting, and due filed with the Commissioner of Insurance at least 10 dra such the meeting.</li> <li>(d) Meeting to Adopt Agreement. — At this the meeting required for merger or consolidation allowed under this section, those present in perproxy shall constitute a quorum and said the agreement for consolidati considered and voted upon by ballot in person or by proxy or both take rejection of the same; and if same. If the votes of two thirds of those at s in person or by proxy-shall be for the adoption of the said-agreement, certified on said the agreement by the president and secretary of each such exercise any officer authorized by the laws of this State to the adopted and certified agreement of each of such eco under the corporation before any officer authorized by the laws of this State to if deeds to be the respective act, deed, and agreement of each of suid the ecorporation before any officer authorized by the laws of this section, the submitted to and approved by the Commissioner of Insurance, in advace of any merger or consolidation allowed under this section, the submitted to and approved by the Commissioner of Insurance, in advace of any merger or consolidation allowed under this section, the submitted to and approved by the Commissioner of the submitted to and approved by the Commissioner of Insurance, in advace of sub this or her signature being aff</li></ul>

applicable corporations, and of the observance and performance of all acts and conditions 1 2 necessary to have been observed and performed precedent to such the consolidation or merger. 3 For the filing of the agreement as provided for by this subsection, the Secretary of State is 4 entitled to receive such fees only in the amount that would have been received had a new 5 corporation been formed. 6 Effect of Filing and Recording. - When an agreement shall have been signed, (g) 7 authorized, adopted, acknowledged, approved, and filed and recorded as hereinabove set forth in 8 this as required by this section, for all purposes of the laws of this State, the separate existence 9 of all constituent corporations, parties to said the agreement, or of all such of the constituent 10 corporations, except the one into which the other or others of such-the constituent corporations 11 have been merged, as the case may be, shall cease and the constituent corporations shall become 12 a new corporation, or be merged into one of such the corporations, as the case may be, in 13 accordance with the provisions of said the filed and recorded agreement, possessing all the rights, 14 privileges, powers and franchises as well of a public as of a private nature, of each of said-the 15 constituent corporations, and all and singular, the rights, privileges, powers and franchises of each of said the corporations, and all property, real, personal and mixed, and all debts due to any 16 17 of said the constituent corporations on whatever account, shall be vested in the corporation 18 resulting from or surviving such consolidation or merger, and all property, rights, privileges, 19 powers, and franchises and all and every other interest shall be thereafter as effectually the 20 property of the resulting or surviving corporation as they were of the several and respective 21 constituent corporations, and the title to any real estate, whether vested by deed or otherwise, 22 under the laws of this State, vested in any such constituent corporations shall not revert or be in 23 any way impaired by reason of such consolidation or merger; provided, however, that all rights 24 of creditors and all liens upon the property of either of or any of said the constituent corporations 25 shall be preserved, unimpaired, limited in lien to the property affected by such any lien at the 26 time of the merger or consolidation, and all debts, liabilities, and duties of the respective 27 constituent corporations shall thenceforth attach to said the resulting or surviving corporation, 28 and may be enforced against it to the same extent as if said the debts, liabilities, and duties had 29 been incurred or contracted by it; and further provided that notice of any said-liens, debts, 30 liabilities, and duties is given in writing to the resulting or surviving corporation within six 31 months after the date of the filing of the agreement of merger in the office of the Secretary of 32 State. All such applicable liens, debts, liabilities, and duties of which notice is not given as 33 provided herein-required by this subsection are forever barred. The certificate of incorporation 34 of the surviving corporation shall be deemed to be amended to the extent, if any, that the changes 35 in its certificates of incorporation are stated in the agreement of merger. All certificates 36 theretofore issued and outstanding by each constituent corporation in good standing upon the 37 date of the filing of such-the agreement with the Secretary of State without reissuance thereof by 38 the resulting or surviving corporation shall be the contract and agreement of the resulting or 39 surviving corporation with each of the certificate holders thereof and subject to all terms and 40 conditions thereof and of the agreement of merger filed in the office of the Secretary of State. 41 Any action or proceeding pending by or against any of the corporations consolidated or

Any action or proceeding pending by or against any of the corporations consolidated or merged may be prosecuted to judgment as if such consolidation or merger had not taken place, or the corporations resulting from or surviving such the consolidation or merger may be substituted in its place.

45 (h) <u>Liability. –</u> The liability of <u>such the</u> constituent corporations to the certificate holders 46 thereof, and the rights or remedies of the creditors thereof, or persons doing or transacting 47 business with <u>such the</u> corporations, shall not, in any way, be lessened or impaired by the 48 consolidation or merger of two or more <del>of such corporations</del> under the provisions of this section, 49 except as provided in this section.

50 <u>(i)</u> <u>Power and Authority of New or Surviving Corporation. –</u> When two or more 51 corporations are consolidated or merged, the corporation resulting from or surviving such the

1 consolidation or merger shall have the power and authority to continue any contracts which any 2 of the constituent corporations might have elected to continue. All contracts entered into between 3 any constituent corporations and any other persons shall be and become the contract of the 4 resulting corporations according to the terms and conditions of said contract and the agreement 5 of consolidation or merger. 6 For the filing of the agreement as hereinabove provided, the Secretary of State is entitled to 7 receive such fees only as he would have received had a new corporation been formed. 8 Objection to Merger or Consolidation. - Any agreement for merger and/or or (i) 9 consolidation as shall conform to the provisions of this section, shall be binding and valid upon all the subscribers, certificate holders and/or and members of such the constituent corporations, 10 11 provided only that any subscriber, certificate holder and/or or member who shall so indicate his a disapproval thereof of the consolidation or merger to the resulting, consolidated consolidated, 12 13 or surviving corporation within 90 days after the filing of said-required agreement with the 14 Secretary of State shall be entitled to receive all unearned portions of premiums paid on his or her certificate from and after the date of the receipt of the application therefor by the resulting, 15 16 surviving, or consolidated corporation; each Corporation. Each subscriber, certificate holder 17 and/or-holder, or member who shall not so indicate his or her disapproval of said-the required agreement and said the merger or consolidation within said the required period of 90 days is 18 19 deemed and presumed to have approved said-the agreement and said-the merger and/or or 20 consolidation and shall have waived his or her right to question the legality of said-the merger 21 and/or-or consolidation. 22 (k) <u>Prohibition on Compensation. – No director, officer, subscriber, certificate holder</u> 23 and/or holder, or member as such of any such corporation, corporation entering into an agreement 24 under this section, except as is expressly provided by the plan of merger or consolidation, shall 25 receive any fee, commission, other compensation or valuable consideration whatever, for in any 26 manner aiding, promoting or assisting in the merger or consolidation. "§ 58-65-165. Commissioner of Insurance determines corporations exempt from this 27 28 Article and Article 66 of this Chapter. 29 The Commissioner of Insurance may require from any corporation writing any hospital 30 service contracts and any corporation writing medical and/or dental dental, hospital, medical, or 31 vision service contracts or any or all of them, such any information as that will enable him the Comissioner to determine whether such the corporation is subject to the provisions of this Article 32 33 and Article 66 of this Chapter." 34 35 PART II. TECHNICAL AND CONFORMING CHANGES 36 SECTION 2. G.S. 58-65-166(b)(1) reads as rewritten: 37 "Corporation" includes any not for profit domestic dental, hospital, medical, "(1) 38 or dental-vision service corporation, or successor of a corporation in a merger 39 or other transaction in which the predecessor's existence ceased upon 40 consummation of the transaction." 41 SECTION 3.(a) The title of Article 66 of Chapter 58 of the General Statutes reads 42 as rewritten: 43 "Article 66. 44 "Dental, Hospital, Medical and Dental-Medical, and Vision Service Corporation Readable 45 Insurance Certificates Act." 46 **SECTION 3.(b)** G.S. 58-66-1 reads as rewritten: 47 "§ 58-66-1. Title. 48 This Article is known and may be cited as the "Hospital, Medical and Dental-"Dental, 49 Hospital, Medical, and Vision Service Corporation Readable Insurance Certificates Act."" 50 SECTION 3.(c) G.S. 58-66-35 reads as rewritten: "§ 58-66-35. Application to policies; dates. 51

General Assembly Of North Carolina	Session 2021
(a) The filing requirements of G.S. 58-66-30 apply to all subscribers' of	
hospital, medical, and dental vision service corporations as described in G.S. 5	8-65-60(a) and (b)
that are made, issued, amended or renewed after July 1, 1983.	
(b) Repealed by Session Laws 1995, c. 193, s. 58, effective June 7, 19	95."
<b>SECTION 4.</b> G.S. 58-38-35(a)(2) reads as rewritten:	
"(2) To all policies of life insurance as described in Article 58	-
all benefit certificates issued by fraternal orders and societ	
Articles 24 and 25 of this Chapter, to all policies of ac	
insurance as described in Articles 50 through 55 of the subscriber' contracts of dental hospital medical and day	<b>-</b>
subscribers' contracts of <u>dental</u> , hospital, medical, and <del>de</del> corporations as described in Articles 65 and 66 of this C	
health maintenance organization evidences of coverage as d	-
67 of this Chapter, that are made, issued, amended, or ren	
1983."	ewed after July 1,
<b>SECTION 5.</b> G.S. 58-49-25(a) reads as rewritten:	
"(a) Any production agency or administrator that advertises, sells, transa	cts, or administers
the coverage in this State described in G.S. 58-49-5 and that is required	
examination by the Commissioner under G.S. 58-49-15, shall, if said cov	
insured or otherwise fully covered by an admitted life, accident, health, accident	lent and health, or
disability insurer, nonprofit hospital, medical, or dental dental, or vision service	
health care plan, clearly and distinctly advise every purchaser, prospective	ve purchaser, and
covered person of such lack of insurance or other coverage."	
SECTION 6.(a) G.S. 58-50-5(a) reads as rewritten:	
"(a) On and after January 1, 1956, each individual or family	
hospitalization policy, certificate or service plan of hospitalization and med	
dental, hospital, medical, or vision service corporations shall be issued only writing signed by the insured or the head of the household or guardian. A	
enrollment form that is taken by a resident agent shall also contain the certi	• • • •
that <u>he the agent</u> has truly and accurately recorded on the application or en	-
information supplied by the insured. Every policy subject to the provisions o	
contain as a part of such policy the original or a reproduction of the application	
section. This section shall not apply to travel or dread disease policies or	•
pursuant to a group insurance conversion privilege. If any such-policy to	-
applies delivered or issued for delivery to any person in this State shall be rein	stated or renewed,
and the insured or the beneficiary or assignee of such the policy shall make wr	itten request to the
insurer for a copy of the application, if any, application for such the reinstat	ement or renewal,
then the insurer shall within 15 days after the receipt of such-that request at his	
office or any branch office of the insurer, deliver or mail to the person making	
a copy of such the requested application. If such the copy shall not be so delive	
insurer shall be precluded from introducing such the application as evidence	-
proceeding based upon or involving such the policy or its reinstatement or rem	iewal."
<b>SECTION 6.(b)</b> G.S. 58-50-45 reads as rewritten:	of obligations
<ul> <li>(a) Upon the issuance or renewal of any policy, contract, certificat</li> </ul>	•
(a) Upon the issuance or renewal of any policy, contract, certificat coverage of group health or life insurance, the insurer, corporation, or he	
coverage of group health of the insurance, the insurer, corporation, of he	Latin manitenance

45 coverage of group health or life insurance, the insurer, corporation, or health maintenance
46 organization shall give written notice to the insurance fiduciary of the provisions of
47 G.S. 58-50-40.

48 (b) The notice required by subsection (a) of this section shall be printed in 10 point type49 and shall read as follows:

50 "UNDER NORTH CAROLINA GENERAL STATUTE SECTION 58-50-40, NO PERSON,
 51 EMPLOYER, PRINCIPAL, AGENT, TRUSTEE, OR THIRD PARTY ADMINISTRATOR,

WHO IS RESPONSIBLE FOR THE PAYMENT OF GROUP HEALTH OR LIFE 1 2 INSURANCE OR GROUP HEALTH PLAN PREMIUMS, SHALL: (1) CAUSE THE 3 CANCELLATION OR NONRENEWAL OF GROUP HEALTH OR LIFE INSURANCE, 4 HOSPITAL, MEDICAL, OR DENTAL DENTAL, OR VISION SERVICE CORPORATION PLAN, MULTIPLE EMPLOYER WELFARE ARRANGEMENT, OR GROUP HEALTH 5 PLAN COVERAGES AND THE CONSEQUENTIAL LOSS OF THE COVERAGES OF THE 6 PERSONS INSURED, BY WILLFULLY FAILING TO PAY THOSE PREMIUMS IN 7 8 ACCORDANCE WITH THE TERMS OF THE INSURANCE OR PLAN CONTRACT, AND 9 (2) WILLFULLY FAIL TO DELIVER, AT LEAST 45 DAYS BEFORE THE TERMINATION OF THOSE COVERAGES, TO ALL PERSONS COVERED BY THE GROUP POLICY A 10 11 WRITTEN NOTICE OF THE PERSON'S INTENTION TO STOP PAYMENT OF PREMIUMS. THIS WRITTEN NOTICE MUST ALSO CONTAIN A NOTICE TO ALL 12 13 PERSONS COVERED BY THE GROUP POLICY OF THEIR RIGHTS TO HEALTH 14 INSURANCE CONVERSION POLICIES UNDER ARTICLE 53 OF CHAPTER 58 OF THE GENERAL STATUTES AND THEIR RIGHTS TO PURCHASE INDIVIDUAL POLICIES 15 FEDERAL HEALTH **INSURANCE** 16 UNDER THE PORTABILITY AND 17 ACCOUNTABILITY ACT AND UNDER ARTICLE 68 OF CHAPTER 58 OF THE GENERAL STATUTES. VIOLATION OF THIS LAW IS A FELONY. ANY PERSON 18 19 VIOLATING THIS LAW IS ALSO SUBJECT TO A COURT ORDER REOUIRING THE 20 PERSON TO COMPENSATE PERSONS INSURED FOR EXPENSES OR LOSSES 21 INCURRED AS A RESULT OF THE TERMINATION OF THE INSURANCE.""

22

### 23 PART III. EFFECTIVE DATE

24 **SECTION 7.** This act is effective when it becomes law and applies to contracts 25 issued, amended, or renewed on or after October 1, 2021.