

## HOUSE BILL NO. HB0032

Insurance regulation parity.

Sponsored by: Joint Corporations, Elections & Political  
Subdivisions Interim Committee

A BILL

for

1 AN ACT relating to insurance regulation; extending  
2 specified insurance regulations to health maintenance  
3 organizations and fraternal benefit societies; establishing  
4 an exclusion from voucher requirements for health  
5 maintenance organizations and providing parity for insurers  
6 previously granted an exclusion; and providing for  
7 effective dates.

8

9 *Be It Enacted by the Legislature of the State of Wyoming:*

10

11 **Section 1.** W.S. 26-34-135 is created to read:

12

13 **26-34-135. Application of the annual audited**  
14 **financial reports law and insurance holding company system**  
15 **regulatory act.**

1

2 (a) The annual audited financial reports law, title  
3 26, chapter 3, article 3 of the Wyoming statutes, shall  
4 apply to domestic health maintenance organizations licensed  
5 under this chapter.

6

7 (b) The Wyoming Insurance Holding Company System  
8 Regulatory Act, title 26, chapter 44 of the Wyoming  
9 statutes, shall apply to domestic health maintenance  
10 organizations licensed under this chapter.

11

12 (c) Except for those portions of the Wyoming  
13 Insurance Holding Company System Regulatory Act, title 26,  
14 chapter 44 of the Wyoming statutes, made applicable by W.S.  
15 26-34-132 and which are in effect prior to January 1, 2017,  
16 this section shall be applied to domestic health  
17 maintenance organizations licensed under this chapter on  
18 and after January 1, 2017.

19

20 **Section 2.** W.S. 26-24-130(a), 26-29-226 by creating a  
21 new subsection (d), 26-29-231 by creating a new subsection  
22 (d), 26-34-106 by creating a new subsection (c),  
23 26-34-107(a) and by creating a new subsection (c),

1 26-34-109(a) (xxiii), 26-34-111 by creating a new subsection  
2 (b), 26-34-121(a) (iii) and 26-34-123(a) (vi) are amended to  
3 read:

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5 **26-24-130. Voucher required for disbursements.**

6

7 (a) No insurer shall make any disbursement of  
8 ~~twenty-five dollars (\$25.00)~~ two hundred fifty dollars  
9 (\$250.00) or more, unless evidenced by a voucher or other  
10 document correctly describing the consideration for the  
11 payment and supported by a check or receipt endorsed or  
12 signed by or on behalf of the person receiving the money.

13

14 **26-29-226. Reports.**

15

16 (d) Chapter 3, article 3 of this code shall apply to  
17 every society transacting business in this state except to  
18 the extent that the commissioner determines that the nature  
19 of fraternal benefit societies render that chapter and  
20 article, or any portion thereof, clearly inappropriate.

21

22 **26-29-231. Suspension, revocation or refusal of**  
23 **license of society.**

1

2 (d) In making the finding allowed by subsection (a)  
3 of this section, the commissioner may consider the factors  
4 specified in W.S. 26-3-116(c) and 26-3-132(a) and, upon  
5 finding a deficiency, may issue an order consistent with  
6 W.S. 26-3-132(b) and pursuant to the procedure established  
7 in W.S. 26-3-132(c).

8

9 **26-34-106. Governing body.**

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11 (c) Any domestic health maintenance organization  
12 shall comply with the requirements applicable to a domestic  
13 insurer in W.S. 26-24-129 and shall be subject to the  
14 penalties provided in W.S. 26-24-129.

15

16 **26-34-107. Fiduciary responsibilities.**

17

18 (a) Any director, officer, employee or partner of a  
19 health maintenance organization who receives, handles,  
20 collects, disburses or invests funds in connection with the  
21 activities of the organization is responsible for those  
22 funds in a fiduciary relationship to the organization and

1 shall not violate the prohibitions specified in W.S.  
2 26-24-127.

3  
4 (c) A health maintenance organization shall not make  
5 any disbursement of two hundred fifty dollars (\$250.00) or  
6 more without complying with the requirements specified for  
7 insurers in W.S. 26-24-130.

8  
9 **26-34-109. Requirements for group contract,**  
10 **individual contract, evidence of coverage and premiums for**  
11 **health care services.**

12  
13 (a) Every group and individual contract holder is  
14 entitled to a group or individual contract. The contract  
15 shall not contain provisions or statements which are  
16 unjust, unfair, inequitable, misleading, deceptive, or  
17 which encourage misrepresentation as defined by W.S.  
18 26-34-117(a). The contract shall contain a clear statement  
19 of the following:

20  
21 (xxiii) Grace period as provided in W.S.  
22 26-18-107;

23

1           **26-34-111. Information to enrollees; claims to be**  
2 **accepted or rejected; attorney's fees.**

3  
4           (b) Any claim for a benefit under a health insurance  
5 policy shall be rejected or accepted and paid by the health  
6 maintenance organization in accordance with W.S.  
7 26-15-124(a) and (c).

8  
9           **26-34-121. Suspension or revocation of certificate of**  
10 **authority.**

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12           (a) The commissioner may suspend or revoke any  
13 certificate of authority issued to a health maintenance  
14 organization under this chapter if:

15  
16           (iii) The commissioner finds the continued  
17 operation of the health maintenance organization would be  
18 hazardous to its enrollees. The commissioner may consider  
19 the factors specified in W.S. 26-3-116(c) and 26-3-132(a)  
20 when making this finding.

21  
22           **26-34-123. Summary orders and supervision.**  
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1           (a) Whenever the commissioner determines that the  
2 financial condition of any health maintenance organization  
3 is such that its continued operation might be hazardous to  
4 its enrollees, creditors, or the general public, or that it  
5 has violated any provision of this act, he may, after  
6 notice and hearing, order the health maintenance  
7 organization to take action reasonably necessary to rectify  
8 the condition or violation, including but not limited to  
9 one (1) or more of the following:

10  
11           (vi) Take other steps the commissioner deems  
12 appropriate under the circumstances, including those steps  
13 authorized in W.S. 26-3-132(b) and (c) for insurers.

14  
15           **Section 3.**

16  
17           (a) The amendment to W.S. 26-34-109 provided by this  
18 act is effective January 1, 2017.

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1           (b) Except as provided in subsection (a) of this  
2 section, this act is effective immediately upon completion  
3 of all acts necessary for a bill to become law as provided  
4 by Article 4, Section 8 of the Wyoming Constitution.

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(END)