

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; amending  
4 voucher requirements for insurance disbursements;  
5 establishing an exclusion from voucher requirements for  
6 health maintenance organizations and providing parity for  
7 insurers previously granted an exclusion; and providing for  
8 effective dates.

9

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

11

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

13

1           **26-34-135. Application of the annual audited**  
2 **financial reports law and insurance holding company system**  
3 **regulatory act.**

4  
5           (a) The annual audited financial reports law, title  
6 26, chapter 3, article 3 of the Wyoming statutes, shall  
7 apply to domestic health maintenance organizations licensed  
8 under this chapter.

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

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

22

1           **Section 2.** W.S. 26-24-130(a), 26-29-226 by creating a  
2 new subsection (d), 26-29-231 by creating a new subsection  
3 (d), 26-34-106 by creating a new subsection (c),  
4 26-34-107(a) and by creating a new subsection (c),  
5 26-34-109(a)(xxiii), 26-34-111 by creating a new subsection  
6 (b), 26-34-121(a)(iii) and 26-34-123(a)(vi) are amended to  
7 read:

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9           **26-24-130. Voucher required for disbursements.**

10

11           (a) No insurer shall make any disbursement of  
12 ~~twenty-five dollars (\$25.00)~~ seventy-five dollars (\$75.00)  
13 or more, unless evidenced by a voucher or other document  
14 correctly describing the consideration for the payment and  
15 supported by a check or receipt endorsed or signed by or on  
16 behalf of the person receiving the money.

17

18           **26-29-226. Reports.**

19

20           (d) Chapter 3, article 3 of this code shall apply to  
21 every society transacting business in this state except to  
22 the extent that the commissioner determines that the nature

1 of fraternal benefit societies render that chapter and  
2 article, or any portion thereof, clearly inappropriate.

3  
4 **26-29-231. Suspension, revocation or refusal of**  
5 **license of society.**

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

13  
14 **26-34-106. Governing body.**

15  
16 (c) Any domestic health maintenance organization  
17 shall comply with the requirements applicable to a domestic  
18 insurer in W.S. 26-24-129 and shall be subject to the  
19 penalties provided in W.S. 26-24-129.

20  
21 **26-34-107. Fiduciary responsibilities.**

22

1 (a) Any director, officer, employee or partner of a  
2 health maintenance organization who receives, handles,  
3 collects, disburses or invests funds in connection with the  
4 activities of the organization is responsible for those  
5 funds in a fiduciary relationship to the organization and  
6 shall not violate the prohibitions specified in W.S.  
7 26-24-127.

8  
9 (c) A health maintenance organization shall not make  
10 any disbursement of seventy-five dollars (\$75.00) or more  
11 without complying with the requirements specified for  
12 insurers in W.S. 26-24-130.

13  
14 **26-34-109. Requirements for group contract,**  
15 **individual contract, evidence of coverage and premiums for**  
16 **health care services.**

17  
18 (a) Every group and individual contract holder is  
19 entitled to a group or individual contract. The contract  
20 shall not contain provisions or statements which are  
21 unjust, unfair, inequitable, misleading, deceptive, or  
22 which encourage misrepresentation as defined by W.S.

1 26-34-117(a). The contract shall contain a clear statement  
2 of the following:

3  
4 (xxiii) Grace period as provided in W.S.  
5 26-18-107;

6  
7 **26-34-111. Information to enrollees; claims to be**  
8 **accepted or rejected; attorney's fees.**

9  
10 (b) Any claim for a benefit under a health insurance  
11 policy shall be rejected or accepted and paid by the health  
12 maintenance organization in accordance with W.S.  
13 26-15-124(a) and (c).

14  
15 **26-34-121. Suspension or revocation of certificate of**  
16 **authority.**

17  
18 (a) The commissioner may suspend or revoke any  
19 certificate of authority issued to a health maintenance  
20 organization under this chapter if:

21  
22 (iii) The commissioner finds the continued  
23 operation of the health maintenance organization would be

1 hazardous to its enrollees. The commissioner may consider  
2 the factors specified in W.S. 26-3-116(c) and 26-3-132(a)  
3 when making this finding.

4  
5 **26-34-123. Summary orders and supervision.**

6  
7 (a) Whenever the commissioner determines that the  
8 financial condition of any health maintenance organization  
9 is such that its continued operation might be hazardous to  
10 its enrollees, creditors, or the general public, or that it  
11 has violated any provision of this act, he may, after  
12 notice and hearing, order the health maintenance  
13 organization to take action reasonably necessary to rectify  
14 the condition or violation, including but not limited to  
15 one (1) or more of the following:

16  
17 (vi) Take other steps the commissioner deems  
18 appropriate under the circumstances, including those steps  
19 authorized in W.S. 26-3-132(b) and (c) for insurers.

20  
21 **Section 3.**

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

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

8

9

(END)