

CHAPTER 56
HB 519 - FINAL VERSION

2021 SESSION

21-0874
10/04

HOUSE BILL **519**

AN ACT relative to technical changes in the laws administered by the insurance department.

SPONSORS: Rep. Hunt, Ches. 11

COMMITTEE: Commerce and Consumer Affairs

ANALYSIS

This bill makes various technical changes to insurance laws administered by the insurance department.

This bill is a request of the insurance department.

Explanation: Matter added to current law appears in ***bold italics***.
 Matter removed from current law appears ~~[in brackets and struckthrough]~~
 Matter which is either (a) all new or (b) repealed and reenacted appears in regular type.

CHAPTER 56
HB 519 - FINAL VERSION

21-0874
10/04

STATE OF NEW HAMPSHIRE

In the Year of Our Lord Two Thousand Twenty One

AN ACT relative to technical changes in the laws administered by the insurance department.

Be it Enacted by the Senate and House of Representatives in General Court convened:

1 56:1 Insurance Department Records. Amend RSA 400-A:25, III to read as follows:

2 III. The commissioner may destroy at the end of [6] **3** years from the date of filing any
3 records [~~which, in his opinion, are~~] **determined to be** no longer of any value to the state. The
4 commissioner may destroy at an earlier date such records of the department which are readily
5 available to the commissioner in an unaltered form from any other state or federal agency or from
6 any licensed insurance company.

7 56:2 Declined Underwriting File. Amend RSA 400-B:4, III to read as follows:

8 III. A declined underwriting file shall be maintained and shall include an application, any
9 documentation substantiating the decision to decline an issuance of a policy, any binder issued
10 without the insurer issuing a policy, any documentation substantiating the decision not to add
11 additional coverage when requested, and [~~if required by law, any~~] **the** declination notification.
12 Notes regarding requests for quotations that do not result in a completed application for coverage
13 need not be maintained for purposes of this chapter. The insurer shall retain declined underwriting
14 files for the current year plus 5 years.

15 56:3 Insurance Holding Companies; Approval of Mergers and Acquisitions. Amend RSA 401-
16 B:3, VI(b) to read as follows:

17 (b) The public hearing referred to in subparagraph VI(a) shall be held within 30 days
18 after the statement required by paragraph I is filed and at least 20 days' notice shall be given by the
19 commissioner to the person filing the statement. Not less than 7 days' notice of the public hearing
20 shall be given by the person filing the statement to the insurer and to such other persons as may be
21 designated by the commissioner. The insurer shall give such notice to its security holders. The
22 commissioner shall make a determination within [~~the 60-day period preceding the effective date of~~
23 ~~the proposed transaction~~] **30 days after the conclusion of the hearing**. At such hearing, the
24 person filing the statement, the insurer, any person to whom notice of hearing was sent, and any
25 other person whose interest may be affected shall have the right to present evidence, examine and
26 cross-examine witnesses, and offer oral and written arguments and in connection therewith shall be
27 entitled to conduct discovery proceedings in the same manner as is presently allowed in the superior
28 court of this state. All discovery proceedings shall be concluded not later than 3 days prior to the
29 commencement of the public hearing.

CHAPTER 56
HB 519 - FINAL VERSION
- Page 2 -

56:4 Insurance Holding Companies; Registration. Amend RSA 401-B:4, I(b) to read as follows:

(b) Any insurer which is subject to registration under this section shall register within 15 days after it becomes subject to registration and annually thereafter by ~~[May]~~ **August** 1 of each year for the previous calendar year, unless the commissioner for good cause shown extends the time for registration, and then within the extended time. The commissioner may require any insurer authorized to do business in this state which is a member of an insurance holding company system, and which is not subject to registration under this section, to furnish a copy of the registration statement, the summary specified in paragraph III, or other information filed by such insurance company with the insurance regulatory authority of its domiciliary jurisdiction.

56:5 Pharmacy Benefit Managers; Complaints. Amend RSA 402-N:5, II to read as follows:

II. The commissioner shall adopt rules, pursuant to RSA 541-A, to implement ~~[RSA 402-N:4]~~ **paragraph I**. Such rules shall include procedures for addressing complaints, provisions for enforcement, the receipt of complaints referred to the insurance department under RSA 318:47-h, III(b), and for reporting to the board of pharmacy on the status of complaints referred.

56:6 Life Settlements Act; Producer. Amend RSA 408-D:3, V(a) to read as follows:

V.(a) A life settlement producer that **solicits or** negotiates a life settlement contract between a viator and a life settlement provider shall be appointed by the life settlement provider.

56:7 Unfair Methods, Acts, and Practices Defined; Unfair Discrimination. Amend RSA 417:4, VIII(h) to read as follows:

(h) For life **coverage**, ~~[life]~~ annuity **contracts**, or disability coverage, refusing to insure or to continue to insure, or limiting the amount, extent, or kind of coverage based on the applicant who is also the proposed insured having filled a prescription for an opioid antagonist, when that prescription is not relevant to the applicant's health, but rather is designed to promote the health of someone else. For any such prescription, the carrier shall inquire with the applicant as to the reason for the prescription and may request documentation that verifies the applicant's response prior to issuing an underwriting decision.

56:8 Children's Early Intervention Therapy Services; Individual. Amend RSA 415:6-n to read as follows:

415:6-n Coverage for Children's Early Intervention Therapy Services. Each insurer that issues or renews any individual policy, plan, or contract of accident or health insurance providing benefits for medical, rehabilitation, or hospital expenses, shall provide to certificate holders of such insurance, who are residents of this state, coverage for expenses arising from the services of licensed and credentialed occupational therapists, physical therapists, speech-language pathologists, and clinical social workers working with children from birth to 36 months of age with an identified developmental disability and/or delay as specified in rules adopted pursuant to RSA 171-A:18, IV as long as the providing therapist receives a referral from the child's primary care provider if applicable. The benefits in this section shall not be subject to deductibles, copayments, or

CHAPTER 56
HB 519 - FINAL VERSION
- Page 3 -

coinsurance; provided that the benefits included in this section may have a cap of \$3,200 per child per year not to exceed \$9,600 by the child's third birthday. For a health care contract that meets the definition of a "high deductible plan" set forth in 26 U.S.C. section 223(c)(2) ***or a catastrophic health plan, as defined under the Patient Protection and Affordable Care Act of 2009***, a carrier shall be exempt from the deductible provisions of this section and may apply a deductible to children's early intervention therapy services until an enrollee's deductible has been satisfied for the year. Notwithstanding any provision of law or rule to the contrary, the coverage under this section shall apply to the medical assistance program, pursuant to RSA 161 and RSA 167.

56:9 Children's Early Intervention Therapy Services; Group. Amend RSA 415:18-s to read as follows:

415:18-s Coverage for Children's Early Intervention Services. Each insurer that issues or renews any policy of group accident or health insurance providing benefits for medical, rehabilitation, or hospital expenses, shall provide to each group, or to the portion of each group comprised of certificate holders of such insurance who are residents of this state, coverage for expenses arising from the services of licensed and credentialed occupational therapists, physical therapists, speech-language pathologists, and clinical social workers working with children from birth to 36 months of age with an identified developmental disability and/or delay as specified in rules adopted pursuant to RSA 171-A:18, IV as long as the providing therapist receives a referral from the child's primary care provider if applicable. The benefits in this section shall not be subject to deductibles, copayments, or coinsurance; provided that the benefits included in this section may have a cap of \$3,200 per child per year not to exceed \$9,600 by the child's third birthday. For a health care contract that meets the definition of a "high deductible plan" set forth in 26 U.S.C. section 223(c)(2) ***or a catastrophic health plan, as defined under the Patient Protection and Affordable Care Act of 2009***, a carrier shall be exempt from the deductible provisions of this section and may apply a deductible to children's early intervention therapy services until an enrollee's deductible has been satisfied for the year. Notwithstanding any provision of law or rule to the contrary, the coverage under this section shall apply to the medical assistance program, pursuant to RSA 161 and RSA 167.

56:10 Children's Early Intervention Therapy Services; Health Services Corporation. Amend RSA 420-A:17-g to read as follows:

420-A:17-g Coverage for Children's Early Intervention Services. Every health service corporation and every other similar corporation licensed under the laws of another state that issues or renews any policy of group accident or health insurance providing benefits for medical, rehabilitation, or hospital expenses, which provides coverage for outpatient services shall provide to each group, or to the portion of each group comprised of certificate holders of such insurance who are residents of this state, coverage for expenses arising from the services of licensed and credentialed occupational therapists, physical therapists, speech-language pathologists, and clinical social

CHAPTER 56
HB 519 - FINAL VERSION
- Page 4 -

workers working with children from birth to 36 months of age with an identified developmental disability and/or delay as specified in rules adopted pursuant to RSA 171-A:18, IV as long as the providing therapist receives a referral from the child's primary care provider if applicable. The benefits in this section shall not be subject to deductibles, copayments, or coinsurance; provided that the benefits included in this section may have a cap of \$3,200 per child per year not to exceed \$9,600 by the child's third birthday. For a health care contract that meets the definition of a "high deductible plan" set forth in 26 U.S.C. section 223(c)(2) ***or a catastrophic health plan, as defined under the Patient Protection and Affordable Care Act of 2009***, a carrier shall be exempt from the deductible provisions of this section and may apply a deductible to children's early intervention therapy services until an enrollee's deductible has been satisfied for the year. Notwithstanding any provision of law or rule to the contrary, the coverage under this section shall apply to the medical assistance program, pursuant to RSA 161 and RSA 167.

56:11 Children's Early Intervention Therapy Services; HMO. Amend RSA 420-B:8-r to read as follows:

420-B:8-r Coverage for Children's Early Intervention Services. Every health maintenance organization and every similar corporation licensed under the laws of another state that issues or renews any policy, plan, or contract of individual or group health insurance providing benefits for medical, rehabilitation, or hospital expenses, shall provide to each individual or group, or to the portion of each group comprised of certificate holders of such insurance who are residents of this state, coverage for expenses arising from the services of licensed and credentialed occupational therapists, physical therapists, speech-language pathologists, and clinical social workers working with children from birth to 36 months of age with an identified developmental disability and/or delay as specified in rules adopted pursuant to RSA 171-A:18, IV as long as the providing therapist receives a referral from the child's primary care provider if applicable. The benefits in this section shall not be subject to deductibles, copayments, or coinsurance; provided that the benefits included in this section may have a cap of \$3,200 per child per year not to exceed \$9,600 by the child's third birthday. For a health care contract that meets the definition of a "high deductible plan" set forth in 26 U.S.C. section 223(c)(2) ***or a catastrophic health plan, as defined under the Patient Protection and Affordable Care Act of 2009***, a carrier shall be exempt from the deductible provisions of this section and may apply a deductible to children's early intervention therapy services until an enrollee's deductible has been satisfied for the year. Notwithstanding any provision of law or rule to the contrary, the coverage under this section shall apply to the medical assistance program, pursuant to RSA 161 and RSA 167.

56:12 Effective Date. This act shall take effect 60 days after its passage.

Approved: May 25, 2021
Effective Date: July 24, 2021