Session 111 - (1995-1996)

S*0238 (Rat #0097, Act #0058 of 1995) General Bill, By Leatherman and Elliott

A Bill to amend Section 38-33-20, as amended, Code of Laws of South Carolina, 1976, relating to health maintenance organizations and definitions, so as to change the meaning of "copayment of deductible"; to amend Section 38-33-80, as amended, relating to health maintenance organizations, enrollee's entitlement to evidence of coverage, contents of such evidence, discontinuance or replacement of coverage, and charges for services, so as to provide that a health maintenance organization that issues an HMO contract which requires the enrollee to pay a specified percentage of the cost of covered health care services shall calculate those copayment and deductibles on the negotiated rate or lesser charge of the provider and that nothing in this Section precludes a health maintenance organization from issuing a contract which contains fixed dollar copayments and deductibles; to amend the 1976 Code by adding Section 38-71-241 so as to provide that an insurer that negotiates rates with providers for covered health care services under an individual or group accident and health insurance policy must provide that percentage copayments and deductibles paid by the insured are applied to the negotiated rates or lesser charge of that provider and that nothing in this Section precludes an insurer from issuing a policy which contains fixed dollar copayments and deductibles; to amend Section 38-33-80, as amended, relating to health maintenance organizations, enrollee's entitlement to evidence of coverage, contents of such evidence, discontinuance or replacement of coverage, and charges for services, so as to delete certain language and provisions, and provide, among other things, that the Director of the Department of Insurance or his designee may disapprove a certain schedule of charges if it is determined that the benefits provided in the contracts are unreasonable in relation to the charges and that at any time the director or his designee, after a public hearing of which at least thirty days' notice has been given, may withdraw approval of a schedule of charges previously approved or an approved evidence of coverage if he determined that the schedule of charges or evidence of coverage no longer meets the standards for approval specified in this Section; to amend Section 38-55-20, as amended, relating to conduct of insurance business, the requirement that insurers shall do business in their own name, and combination policies, so as to delete certain language, and provide that an insurer may elect to use a trade name in the conduct of its business if the insurer also clearly discloses its proper or corporate name on its policies, contracts of insurance, and other documents filed with the Department of Insurance; to amend Section 38-55-570, relating to insurance fraud and reporting immunity and notification of the Insurance Fraud Division of knowledge or belief of false statements or misrepresentations, so as to provide that the Department of Insurance may receive and must maintain as confidential any documents or information furnished to it by the National Association of Insurance Commissioners or insurance departments of other states which is classified as confidential by that Association or state, permit the South Carolina Department of Insurance to share documents or information including confidential documents or information, with the National Association of Insurance Commissioners or Insurance departments of other states, if the Association or other state agrees to maintain the same level of confidentiality as is provided under South Carolina law, and provide that if the documents or information received by the South Carolina Department of Insurance from the National Association of Insurance Commissioners or the insurance departments of other states involve allegations of insurance fraud, the documents or information must be forwarded by the South Carolina Department of Insurance to the Insurance Fraud Division of the Office of the Attorney General; and to amend the 1976 Code by adding Section 38-33-310 so as to provide that nothing in Title 38, Chapter 33 (Health Maintenance Organizations) may be construed to prevent a health maintenance organization from contracting with an out-of-state provider.-amended title

10/31/94	**Senate**	**Prefiled**
10/31/94	**Senate**	**Referred to Committee on Banking and Insurance**
01/10/95	**Senate**	**Introduced and read first time SJ-82**
01/10/95	**Senate**	**Referred to Committee on Banking and Insurance SJ-82**
03/09/95	**Senate**	**Committee report: Favorable with amendment Banking and Insurance SJ-14**
03/15/95	**Senate**	**Amended SJ-20**
03/15/95	**Senate**	**Read second time SJ-20**
03/22/95	**Senate**	**Read third time and sent to House SJ-8**
03/23/95	**House**	**Introduced and read first time HJ-6**
03/23/95	**House**	**Referred to Committee on Labor, Commerce and Industry HJ-7**
04/26/95	**House**	**Committee report: Favorable with amendment Labor, Commerce and Industry HJ-8**
05/03/95	**House**	**Amended HJ-65**
05/03/95	**House**	**Read second time HJ-68**
05/04/95	**House**	**Read third time and returned to Senate with amendments HJ-11**
05/18/95	**Senate**	**House amendment amended SJ-48**
05/18/95	**Senate**	**Returned to House with amendments SJ-48**

05/23/95	**House**	**Concurred in Senate amendment and enrolled HJ-119**
06/06/95		**Ratified R 97**
06/12/95		**Signed By Governor**
06/12/95		**Effective date 120 days after signature (10/10/95), except as otherwise specifically provided in this Act**
08/11/95		**Copies available**
08/11/95		**Act No. 58**