# **GENERAL ASSEMBLY OF NORTH CAROLINA** SESSION 2019

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## **SENATE BILL 86**

# Health Care Committee Substitute Adopted 3/7/19 House Committee Substitute Favorable 6/27/19 House Committee Substitute #2 Favorable 8/6/19 Fifth Edition Engrossed 8/7/19

	Short Title:Small Business Health Care Act.(Public)
	Sponsors:
	Referred to:
	February 20, 2019
1	A BILL TO BE ENTITLED
2	AN ACT TO ESTABLISH STANDARDS FOR ASSOCIATION HEALTH PLANS AND
3	MULTIPLE EMPLOYER WELFARE ARRANGEMENTS.
4	Whereas, Association Health Plans are subject to comprehensive consumer
5	protections contained in the Employee Retirement Income Security Act (ERISA), the Health
6	Insurance Portability and Accountability Act (HIPAA), the Mental Health Parity and Addiction
7	Equity Act, the Newborns' and Mothers' Health Protection Act, the Women's Health and Cancer
8	Rights Act, and the Genetic Information Nondiscrimination Act; and
9	Whereas, Association Health Plans are subject to the Affordable Care Act's "group
10	health plan" requirements, which means Association Health Plans cannot deny individuals
11	coverage if they have preexisting conditions, cannot impose annual and lifetime limits on certain
12	benefits, and must provide free access to certain preventative services; and
13	Whereas, under ERISA, the State has been regulating self-insured Association Health
14	Plans in a manner that, in addition to the federal consumer protections that apply to fully insured
15	Association Health Plans, fully protects the citizens of this State; and
16	Whereas, new federal Department of Labor regulations regarding Association Health
17	Plans allow for states to provide greater opportunities for small businesses and self-employed
18	individuals with no employees to access health benefit plans while still providing health

- 19 insurance consumers with the coverage protections established by the foregoing legislation and 20 other provisions of federal law; Now, therefore,
- The General Assembly of North Carolina enacts: 21
- 22 SECTION 1. Chapter 58 of the General Statutes is amended by adding a new Article 23 to read:
- 24

### "Article 50A.

- 25 "Association Health Plans and Multiple Employer Welfare Arrangements. "§ 58-50A-1. Definitions. 26 27 The following definitions apply in this Article: Employer member. – A person or entity acting directly as the employer of at 28 (1)29 least one employee, or a working owner, either of whom is a participant covered under a Path 2 MEWA. 30
- Employee welfare benefit plan. The term as defined in Section 3 of the 31 (2)Employee Retirement Income Security Act of 1974, 29 U.S.C. § 1002(1), as 32 33 amended.



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(3)	Multi	ple employer welfare arrangemen	t or MEWA. – The term as defined in
<u></u>			ncome Security Act of 1974, 29 U.S.C.
		± •	at least one of the following criteria:
	<u>a.</u>		ember of the MEWA that is either
			ts principal headquarters or principal
		administrative office in this Stat	· · · · ·
	<u>b.</u>		miciled in this State or that has its
	_		bal administrative office in this State.
<u>(4)</u>	Path 2	2 MEWA. – A MEWA that is estab	lished or maintained by an association
	<u>of en</u>	ployers classified by the United S	States Department of Labor as a bona
	fide g	roup or association under the requ	irements of 29 C.F.R. § 2510.3-5 and
	<u>is for</u>		hat meets the following requirements:
	<u>a.</u>	•	t provides for all of the following:
		<u>1. Regular meetings.</u>	
		<ol> <li><u>Collection of dues from</u></li> <li><u>Operation by a board</u></li> </ol>	
			of trustees that includes an owner,
		-	, or employee of at least one of the
	h	employer members of th	
	<u>b.</u>		ness purpose unrelated to the offering nee or other employee benefits to its
		employer members and their em	
	<u>c.</u>		rest shared among the employers
	<u></u>	comprising the Path 2 MEWA b	
			yers in the same trade, industry, line of
		business, or profession.	
		2. Being a statewide organ	ization where each employer that is a
		member of the organiza	tion has a principal place of business
		that does not exceed	the boundaries of the State or a
			at least partially within the State, even
( -)	~	-	includes portions of other states.
<u>(5)</u>			on of two or more employer members
			plan as a Path 2 MEWA. For purposes
			on that meets the requirements of this
8 59 50 4 5 4		le shall be deemed to be a large en nce with requirements.	ipioyer.
			n receiving the policy, no group health
			is State unless it complies with the
_			be interpreted to regulate or prohibit
-		· ·	sponsoring association in accordance
with this Articl		<u></u> poney	<u> </u>
		ing association requirements.	
			ealth plan to a sponsoring association
			that sponsoring association meets the
requirements of	f a Path 2	MEWA.	
' <u>§ 58-50A-15.</u>	Membe	rship requirements.	
	up health	plans offered by a sponsoring asso	ociation may only provide coverage to
the following:			
<u>(1)</u>			ember as defined in G.S. 58-51-80(c)
	-	vorking owners pursuant to 29 C.F	
<u>(2)</u>		±	y individual identified in subdivision
	(1) of	Subsection (a) of this section.	

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1	(b) In ord	ler to obtain coverage for their employees under a	a group health plan offered by
2		sociation, employer members must commit to	
3	· · · · · ·	iation and receiving and paying for benefits und	
4		month policy period.	• • •
5		Iealth plan requirements.	
6		ealth plan offered by a sponsoring association n	nust meet all of the following
7	requirements:		-
8	<u>(1)</u>	Neither be offered nor advertised to the public	generally.
9	<u>(2)</u>	Provides a level of coverage equal to or greate	er than sixty percent (60%) of
10		the actuarial value of allowed costs for covered	benefits.
11	<u>(3)</u>	Provides coverage for hospital and physician se	ervices.
12	<u>(4)</u>	Complies with the provisions of G.S. 58-3-150.	<u>.</u>
13	" <u>§ 58-50A-25.</u> S	olvency requirements.	
14		all deliver or issue for delivery a group health plat	an to a sponsoring association
15		nember of a sponsoring association unless the sp	
16	of the following	solvency requirements:	-
17	(1)	Has been established and maintained in good fa	ith for a period of at least three
18		years.	
19	(2)	Has at the outset a minimum of 500 individuals	eligible for coverage pursuant
20		to G.S. 58-50A-15(a).	• • •
21	<u>(3)</u>	Requires employer members to offer group hea	lth coverage to all individuals
22		eligible for coverage under G.S. 58-50A-15(a) f	or a period of at least one year.
23	(4)	Maintains a minimum net worth equal to at leas	
24		must be held in trust and separate from the spor	÷
25		assets. This amount shall be adjusted at the beg	• • •
26	(5)	Maintains at all times an adequate plan for prot	• • • •
27		is acceptable to the Commissioner.	
28	" <u>§ 58-50A-30.</u> N	londiscrimination.	
29	<u>(a)</u> No s	ponsoring association may condition eligibil	ity for coverage, including
30	continuing eligib	ility for coverage, on any of the following health	-status factors:
31	<u>(1)</u>	Health status.	
32	<u>(2)</u>	Medical condition, including both physical and	mental illness.
33	<u>(3)</u>	Claims experience.	
34	<u>(4)</u>	Receipt of health care.	
35	<u>(5)</u>	Medical history.	
36	<u>(6)</u>	Genetic information.	
37	(7)	Evidence of insurability.	
38	<u>(8)</u>	Disability.	
39	<u>(b)</u> <u>An i</u>	nsurer or sponsoring association may make r	ating distinctions among its
40	employer member	ers based on factors other than health-status factors	s, such as industry, occupation,
41	or geography, pi	ovided that the rating distinction is not directed	at individual beneficiaries or
42	based on a factor	listed in subsection (a) of this section.	
43	(c) No li	mitations shall be based on preexisting conditions	<u>.</u>
44	(d) This	section shall not be construed to require a sponse	oring association or insurer to
45	provide particula	r benefits other than those provided under the te	erms of the plan, or otherwise
46	· · · · ·	or to prevent the plan from establishing limitations	•
47	level, extent, or	nature of the benefits or coverage for similarly si	ituated individuals enrolled in
48	<u>the plan.</u>		
49	" <u>§ 58-50A-35.</u> I	Premium contributions.	
50		er an insurer nor a sponsoring association shall	
51	condition of ini	tial enrollment or continued enrollment in the	plan, to pay a premium or

#### **General Assembly Of North Carolina** Session 2019 1 contribution that is greater than the premium or contribution for a similarly situated individual 2 enrolled in the plan on the basis of any health status-related factor in relation to the individual or 3 to an individual enrolled in the plan as a spouse or dependent of the individual. 4 Nothing in this section shall be construed to restrict the amount an insurer may charge (b) 5 for coverage under a group health plan offered to a sponsoring association under this section or 6 to prevent an insurer from establishing premium discounts or modifying otherwise applicable 7 co-payments or deductibles for a group health plan offered to a sponsoring association under this 8 section in return for adherence to programs of health promotion and disease prevention. 9 "§ 58-50A-40. Use of licensed agents and brokers. Nothing in this Article shall preclude a sponsoring association from engaging a broker or 10 11 agent licensed to sell insurance in this State for the purposes of reviewing and considering any group health plan offered to a sponsoring association under this section." 12 13 SECTION 2.(a) G.S. 58-49-30 is recodified as G.S. 58-50A-60. 14 **SECTION 2.(b)** G.S. 58-49-35 is recodified as G.S. 58-50A-65. SECTION 2.(c) G.S. 58-49-40 is recodified as G.S. 58-50A-70. 15 SECTION 2.(d) G.S. 58-49-45 is recodified as G.S. 58-50A-75. 16 17 SECTION 2.(e) G.S. 58-49-50 is recodified as G.S. 58-50A-80. 18 SECTION 2.(f) G.S. 58-49-55 is recodified as G.S. 58-50A-85. 19 **SECTION 2.(g)** G.S. 58-49-60 is recodified as G.S. 58-50A-90. 20 SECTION 2.(h) G.S. 58-49-65 is recodified as G.S. 58-50A-95. 21 **SECTION 3.(a)** G.S. 58-50A-60, as recodified by Section 2(a), reads as rewritten: 22 "§ 58-50A-60. Multiple employer welfare arrangements; definition; administrators. 23 As used in this section, the term "multiple employer welfare arrangement" or <del>(a)</del> 24 "MEWA" means that term as defined in Section 3 of the Employee Retirement Income Security 25 Act of 1974, 29 U.S.C. § 1002(40)(A), as amended, that meets either or both of the following 26 criteria: 27 (1)One or more of the employer members of the MEWA is either domiciled in 28 this State or has its principal headquarters or principal administrative office in 29 this State. 30 (2)The MEWA solicits an employer that is domiciled in this State or that has its 31 principal headquarters or principal administrative office in this State. ....." 32 33 **SECTION 3.(b)** G.S. 58-50A-70, as recodified by Section 2(c), reads as rewritten: 34 "§ 58-50A-70. Qualifications for licensure. 35 To meet the requirements for issuance of a license and to maintain a MEWA, a (a) 36 MEWA must be: 37 (1)Nonprofit;Nonprofit. 38 Either of the following: (2) 39 Established by a trade association, industry association, or a. 40 professional association of employers or professionals that has a 41 constitution or bylaws and that has been organized and maintained in 42 good faith for a continuous period of five-three years for purposes 43 other than that of obtaining or providing insurance; insurance. 44 A Path 2 MEWA as defined in G.S. 58-50A-1. b. 45 Operated pursuant to a trust agreement by a board of trustees that has complete (3) 46 fiscal control over the MEWA and that is responsible for all operations of the 47 MEWA. Except as provided in this subdivision, the trustees must be owners, 48 partners, officers, directors, or employees of one or more employers in the 49 MEWA. With the Commissioner's approval, a person who is not such an 50 owner, partner, officer, director, or employee may serve as a trustee if that 51 person possesses the expertise required for such service. A trustee may not be

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1 2 3 4 5			an owner, officer or employee of the administrator or service MEWA. The trustees have the authority to approve application members for participation in the MEWA and to contract with administrator or service company to administer the op <u>MEWA;MEWA.</u>	ons of association ith an authorized
6		(4)	Neither offered nor advertised to the public generally; and ge	enerally.
7		(5)	Operated in accordance with sound actuarial principles.	
8	"			
9			<b>FION 4.(a)</b> G.S. 58-51-80 reads as rewritten:	
10 11	°§ 58-51-	80. Gr	oup accident and health insurance defined.	
12	(b)	No po	blicy or contract of group accident, group health or group acc	cident and health
13			e delivered or issued for delivery in this State unless the group o	
14			s to the requirements of the following subdivisions:	1 2
15				
16		<u>(1c)</u>	Under a policy issued to a Path 2 MEWA pursuant to Article	<u>e 50A.</u>
17		"		
18			<b>FION 4.(b)</b> G.S. 58-50-115 reads as rewritten:	
19	"§ 58-50-	115. H	ealth benefit plans subject to Act.	
20	····	A has	olth homofit plan is not subject to this. Act if it provides he	alth hanafita for
21 22	<u>(c)</u> employer		alth benefit plan is not subject to this Act if it provides he re employer members of a Path 2 MEWA pursuant Article 50.	
22			issued to the Path 2 MEWA."	A Of this Chapter
23 24	<u>unougn a</u>		<b>FION 5.(a)</b> G.S. 58-50-130(a)(5) reads as rewritten:	
25		"(5)	No small employer carrier, insurer, subsidiary of an insur	er, or controlled
26		(0)	individual of an insurance holding company shall pro-	
27			catastrophic, or reinsurance coverage to small employers where	- ·
28			than $\frac{26}{20}$ eligible employees that does not comply with t	
29			rating, and other applicable standards in this Act. An insurer	
30			stop loss health insurance policy to any person, firm, corpora	
31			or association defined as a small employer that does any of t	
32 33			a. Provides direct coverage of health expenses payable	
33 34			b. Has an annual attachment point for claims incurred p is lower than twenty thousand dollars (\$20,000)	
34			beginning in 2013. For subsequent policy years, the	
36			indexed using the Consumer Price Index for Medical	
37			Urban Consumers for the South Region and shall b	
38			nearest whole thousand dollars. The index factor sha	
39			of July of the year preceding the change divided by the	
40			2012.	
41			c. Has an annual aggregate attachment point lower that	an the greater of
42			one of the following:	
43			1. One hundred twenty percent (120%) of expec	
44			2. Twenty thousand dollars (\$20,000) for plan ye	
45 46			2013. For subsequent policy years, the amount	
46 47			using the Consumer Price Index for Medical Urban Consumers for the South Region and	
47 48			Urban Consumers for the South Region and to the nearest whole thousand dollars. The ind	
48 49			the index as of July of the year preceding the	
<del>4</del> ) 50			by the index as of July 2012.	e enunge urvided
20			of the mach as of bary 2012.	

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Nothing in this subsection prohibits an insurer from providing
additional incentives to small employers with benefits
promoting a medical home or benefits that provide health care
screenings, are focused on outcomes and key performance
indicators, or are reimbursed on an outcomes basis rather than
a fee-for-service basis."
<b>SECTION 5.(b)</b> This section becomes effective October 1, 2019, and applies to
contracts entered into, amended, or renewed on or after that date.
<b>SECTION 6.</b> The Department of Insurance shall have the power to adopt temporary
rules necessary to implement the provisions of this act.
<b>SECTION 7.(a)</b> The Department of Insurance shall conduct a study on the feasibility of submitting a 1332 waiver request to the federal Department of Health and Human Services
with the goal of allowing (i) working owners and (ii) employers who have a principal place of
business that does not exceed the boundaries of the State or a metropolitan area that is at least
partially within the State (even if the metropolitan area includes portions of other states) to
participate in a group health plan that is subject to large group market insurance requirements.
The Department shall report on its findings, including any recommended legislation, to the Joint
Legislative Oversight Committee on Health and Human Services no later than 90 days from the
effective date of this section.
<b>SECTION 7.(b)</b> This section becomes effective only when a final judicial order is
issued striking down the United States Department of Labor rules at issue in State of New York,
et al., v. U.S. Department of Labor, et al., 19-5152, which is being heard by the United States
Court of Appeals for the District of Columbia Circuit.
<b>SECTION 8.</b> The Revisor of Statutes is hereby authorized to make any changes to
the General Statutes made necessary by the recodification in Section 2 of this act, including
changes to the following sections of the General Statutes: G.S. 58-2-161, 58-3-122, 58-3-167,
58-3-169, 58-3-174, 58-3-176, 58-3-178, 58-3-190, 58-3-200, 58-3-215, 58-3-225, 58-3-227,
58-3-275, 58-28-35, 58-51-55, 58-65-90, 58-67-75, 58-68-25, and 90-21.50.
SECTION 9. If any section or provision of this act is declared unconstitutional or
invalid by the courts, it does not affect the validity of this act as a whole or any part other than
the part declared to be unconstitutional or invalid.
<b>SECTION 10.</b> Except as otherwise provided, this act becomes effective October 1,
2019, and applies to contracts entered into, amended, or renewed on or after January 1, 2020.