§ 58-50A-20. Health plan requirements.

Any group health plan offered by a sponsoring association must meet all of the following requirements:

(1) Neither be offered nor advertised to the public generally.
(2) Provides a level of coverage equal to or greater than sixty percent (60%) of the actuarial value of allowed costs for covered benefits.
(3) Provides coverage for hospital and physician services.
(4) Complies with the provisions of G.S. 58-3-150. (2019-202, s. 1.)