

House Bill 127

By: Representatives Smith of the 134th, Lumsden of the 12th, Taylor of the 173rd, and Caldwell of the 131st

A BILL TO BE ENTITLED
AN ACT

1 To amend Title 33 of the Official Code of Georgia Annotated, relating to insurance, so as to
2 repeal certain obsolete provisions relative to nonprofit medical service corporations and
3 nonprofit hospital service corporations; to amend Titles 31 and 45 of the Official Code of
4 Georgia Annotated, relating to health and public officers and employees, respectively, so as
5 to revise provisions for purposes of conformity; to provide for related matters; to repeal
6 conflicting laws; and for other purposes.

7 BE IT ENACTED BY THE GENERAL ASSEMBLY OF GEORGIA:

8 **SECTION 1.**

9 Title 33 of the Official Code of Georgia Annotated, relating to insurance, is amended by
10 repealing Chapter 18, relating to nonprofit medical service corporations, and designating said
11 chapter as reserved.

12 **SECTION 2.**

13 Said title is further amended by repealing Chapter 19, relating to nonprofit hospital service
14 corporations, and designating said chapter as reserved.

15 **SECTION 3.**

16 Said title is further amended in Code Section 33-1-2, relating to definitions regarding general
17 insurance provisions, by revising paragraph (4) as follows:

18 "(4) 'Insurer' means any person engaged as indemnitor, surety, or contractor who issues
19 insurance, annuity or endowment contracts, subscriber certificates, or other contracts of
20 insurance by whatever name called. ~~Hospital service nonprofit corporations, nonprofit~~
21 ~~medical service corporations, burial~~ Burial associations, health care plans, and health
22 maintenance organizations are insurers within the meaning of this title."

23 **SECTION 4.**

24 Said title is further amended by revising Code Section 33-1-3, relating to application of Title
25 33 to certain corporations, societies, and companies, as follows:

26 "33-1-3.

27 This title shall not apply to:

28 ~~(1) Hospital service nonprofit corporations except for Chapter 19 of this title and any~~
29 ~~other provisions of this title which are specifically made applicable to hospital service~~
30 ~~nonprofit corporations and nonprofit medical service corporations except for Chapter 18~~
31 ~~of this title and any other provisions of this title which are specifically made applicable~~
32 ~~to nonprofit medical service corporations;~~

33 ~~(2)~~(1) Fraternal benefit societies except as provided in Chapter 15 of this title; or

34 ~~(3)~~(2) Farmers' mutual fire insurance companies except as provided in Chapter 16 of this
35 title."

36 **SECTION 5.**

37 Said title is further amended in Code Section 33-3-3, relating to qualifications for transaction
38 of insurance generally and transaction of insurance by insurers owned by states and foreign
39 governments, by revising subsection (a) as follows:

40 "(a) To qualify for and hold authority to transact insurance in Georgia an insurer must be
41 otherwise in compliance with the provisions of this title and with its charter powers and
42 must be an incorporated stock insurer, an incorporated mutual insurer, a fraternal benefit
43 society, ~~a hospital service nonprofit corporation, a nonprofit medical service corporation,~~
44 a farmers' mutual fire insurance company, a Lloyd's association, or a reciprocal insurer of
45 the same general type as may be formed as a domestic insurer under this title, except that
46 no foreign or alien insurer shall be authorized to transact insurance in Georgia which does
47 not maintain reserves as required by Chapter 10 of this title applicable to the kind or kinds
48 of insurance transacted in the United States by such insurer."

49 **SECTION 6.**

50 Said title is further amended in Code Section 33-3-6, relating to requirements as to capital
51 stock or surplus generally, by revising subsection (b) as follows:

52 "(b) As to surplus required for initial qualification to transact one kind of insurance and
53 thereafter to be maintained, domestic mutual insurers shall be governed by Chapter 14 of
54 this title and domestic reciprocal insurers shall be governed by Chapter 17 of this title.
55 ~~Hospital service nonprofit corporations and nonprofit medical service corporations shall~~
56 ~~be governed by Chapters 19 and 18 of this title, respectively.~~ Farmers' mutual fire
57 insurance companies shall be governed by Chapter 16 of this title."

SECTION 7.

58

59 Said title is further amended in Code Section 33-8-1, relating to general fees and charges, by
60 revising subparagraph (U) of paragraph (1) as follows:

61 “(U) ~~Reserved. Nonprofit organizations (medical service or hospital service~~
62 ~~corporation):~~
63 ~~Original license or certificate 600.00~~
64 ~~Renewal license or certificate 500.00”~~

SECTION 8.

65

66 Said title is further amended in Code Section 33-9-3, relating to application of Chapter 9, by
67 revising paragraph (2) of subsection (b) as follows:

68 “(2) The provisions of this chapter regarding rates shall apply to any insurer, fraternal
69 benefit society, health care plan, ~~nonprofit medical service corporation, nonprofit hospital~~
70 ~~service corporation,~~ health maintenance organization, or preferred provider organization
71 providing any accident or sickness insurance or health benefit plan issued, delivered,
72 issued for delivery, or renewed in this state to the extent required by subsection (c) of this
73 Code section.”

SECTION 9.

74

75 Said title is further amended by repealing and reserving Code Section 33-20-6, relating to
76 board of directors, merger or consolidation of medical service corporations and hospital
77 service corporations, and powers of health care corporations generally, as follows:

78 “33-20-6.
79 ~~(a) The board of directors of each health care corporation shall consist of one or more~~
80 ~~individuals, with the number specified in or fixed in accordance with the bylaws of such~~
81 ~~corporation. The bylaws of such corporation may prescribe qualifications for directors;~~
82 ~~provided, however, that at all times at least a majority of the directors of such corporation~~
83 ~~shall be representatives of the general public and not (1) members of a medical or nursing~~
84 ~~profession, or (2) employed by, representative of, or otherwise directly or indirectly~~
85 ~~connected with the medical or nursing profession or a hospital or facility, institution,~~
86 ~~agency, or entity providing health care services. All currently licensed health care~~
87 ~~corporations shall have a two-year period in which to change the composition of their~~
88 ~~boards of directors in accordance with the provisions of this chapter.~~
89 ~~(b) Notwithstanding any other provisions of this chapter, a medical service corporation~~
90 ~~organized under Chapter 18 of this title and a hospital service corporation organized under~~
91 ~~Chapter 19 of this title may upon compliance with the applicable provisions of Chapter 3~~

92 of Title 14, the 'Georgia Nonprofit Corporation Code' of this state and other applicable laws
 93 merge or consolidate into a health care corporation subject to this chapter if the
 94 Commissioner finds that such merger or consolidation will promote the public interest.
 95 Upon application, the Commissioner may authorize the surviving or consolidated
 96 corporation to take such administrative or other action as the Commissioner determines is
 97 necessary or desirable to facilitate the efficient and economic combination of the business
 98 and operation of the merging or consolidating corporations.

99 (c) Notwithstanding any other provision of law, a health care corporation may:

100 (1) Exercise all of the powers of medical service and hospital service nonprofit
 101 corporations provided for under Chapters 18 and 19 of this title; provided, however, that
 102 Code Section 33-1-3 shall not apply to corporations subject to this chapter;

103 (2) Organize, manage, and promote a prepaid comprehensive health care plan if
 104 otherwise authorized by law; and

105 (3) Contract or otherwise act jointly with a hospital service corporation, a medical
 106 service corporation, a professional service corporation, a partnership, or other
 107 organization for the purpose of organizing, managing, and promoting such prepaid plans
 108 for the provision of services which such corporation is authorized to establish in
 109 accordance with the laws of this state.

110 (d) In addition to all other powers granted in this Code section, a health care corporation
 111 shall have all the powers granted to life insurers which are not inconsistent with this
 112 chapter; provided, however, that no such powers may be exercised unless approved by not
 113 less than three-fourths of the board of directors of the health care corporation, approved by
 114 the appropriate local medical society or societies in the county or counties in which such
 115 subsidiary or affiliated corporation or corporations propose to exercise such powers, and
 116 approved by the Commissioner subject to such conditions and limitations as the
 117 Commissioner may prescribe; provided, further, that nothing contained in this Code section
 118 shall be deemed to authorize a health care corporation organized in accordance with this
 119 chapter or subject to this chapter to issue policies or contracts of life insurance except
 120 through one or more subsidiary or affiliated corporations organized in accordance with this
 121 title.

122 (e) Notwithstanding any provisions of this Code section to the contrary, this Code section
 123 shall not be deemed to authorize a health care corporation to organize a nonprofit life
 124 insurance company and no powers granted in this Code section other than those contained
 125 in paragraph (1) of subsection (c) of this Code section shall be exercised by such
 126 corporation except through one or more subsidiary or affiliated corporations organized in
 127 accordance with the laws of this state subject to compliance with Chapter 13 of this title
 128 Reserved."

129 **SECTION 10.**

130 Said title is further amended in Code Section 33-20B-2, relating to definitions regarding
 131 essential rural health care provider access, by revising paragraph (4) as follows:

132 "(4) 'Health care insurer' means an insurer, a fraternal benefit society, a health care plan,
 133 ~~a nonprofit medical service corporation, a nonprofit hospital service corporation,~~ a health
 134 care corporation, a health maintenance organization, or any other entity authorized to sell
 135 accident and sickness insurance policies, subscriber certificates, or other contracts of
 136 health insurance by whatever name called under this title."

137 **SECTION 11.**

138 Said title is further amended in Code Section 33-20C-1, relating to definitions regarding
 139 accurate provider directories, by revising paragraph (7) as follows:

140 "(7) 'Insurer' means an entity subject to the insurance laws and regulations of this state,
 141 or subject to the jurisdiction of the Commissioner, that contracts, offers to contract, or
 142 enters into an agreement to provide, deliver, arrange for, pay for, or reimburse any of the
 143 costs of health care services, including an accident and sickness insurance company, a
 144 health maintenance organization, ~~a nonprofit hospital and health service corporation,~~ a
 145 health care plan, or any other entity providing a health insurance plan, a health benefit
 146 plan, or health care services."

147 **SECTION 12.**

148 Said title is further amended in Code Section 33-21-1, relating to definitions regarding health
 149 maintenance organizations, by revising paragraph (7) as follows:

150 "(7) 'Insurer' means every insurer authorized under this title to issue contracts of accident
 151 and sickness insurance. ~~Hospital service nonprofit corporations, nonprofit medical service~~
 152 ~~corporations, health~~ Health care corporations; and health maintenance organizations are
 153 included within such term."

154 **SECTION 13.**

155 Said title is further amended by revising Code Section 33-21-25, relating to organization and
 156 operation of health maintenance organizations by insurers or corporations, as follows:

157 "33-21-25.

158 Notwithstanding any other law which may be inconsistent with this Code section, an
 159 insurer, ~~a hospital service nonprofit corporation, a nonprofit medical service corporation,~~
 160 or a health care corporation licensed in this state may directly or through a subsidiary or
 161 affiliate organize and operate a health maintenance organization."

162 **SECTION 14.**

163 Said title is further amended in Code Section 33-24-20, relating to provision in accident and
164 sickness policies for termination of coverage of surviving spouse or as result of break in
165 marital relationship, and issuance of policy to spouse, by revising subsection (c) as follows:

166 "(c) This Code section shall also apply to blanket accident and sickness insurance policies
167 and to policies issued by a fraternal benefit society, ~~a hospital service nonprofit~~
168 ~~corporation, a nonprofit medical service corporation,~~ a health care corporation, a health
169 maintenance organization, or any other similar entity."

170 **SECTION 15.**

171 Said title is further amended in Code Section 33-24-21, relating to provision in accident and
172 sickness policies for termination of group coverage of surviving spouse or as a result of break
173 in marital relationship, and issuance of policy to spouse, by revising subsection (c) as
174 follows:

175 "(c) This Code section shall also relate to blanket accident and sickness insurance policies
176 and to policies issued by a fraternal benefit society, ~~a hospital service nonprofit~~
177 ~~corporation, a nonprofit medical service corporation,~~ a health care corporation, a health
178 maintenance organization, or any other similar entity."

179 **SECTION 16.**

180 Said title is further amended in Code Section 33-24-21.1, relating to group accident and
181 sickness contracts, conversion of privilege and continuation right provisions, and impact of
182 federal legislation, by revising paragraphs (4) and (6) of subsection (a) as follows:

183 "(4) 'Group contract or group plan' is synonymous with the term 'contract or plan' and
184 means:

185 ~~(A) A group contract of the type issued by a nonprofit medical service corporation~~
186 ~~established under Chapter 18 of this title;~~

187 ~~(B) A group contract of the type issued by a nonprofit hospital service corporation~~
188 ~~established under Chapter 19 of this title;~~

189 ~~(C)~~(A) A group contract of the type issued by a health care plan established under
190 Chapter 20 of this title;

191 ~~(D)~~(B) A group contract of the type issued by a health maintenance organization
192 established under Chapter 21 of this title; or

193 ~~(E)~~(C) A group accident and sickness insurance policy or contract, as defined in
194 Chapter 30 of this title."

195 "(6) 'Insurer' means an insurance company, health care corporation, ~~nonprofit hospital~~
 196 ~~service corporation, medical service nonprofit corporation,~~ health care plan, or health
 197 maintenance organization."

198 **SECTION 17.**

199 Said title is further amended in Code Section 33-24-21.2, relating to continuation of coverage
 200 under group accident and sickness plans for persons 60 years of age or older, by revising
 201 paragraphs (1) and (3) of subsection (a) as follows:

202 "(1) 'Group contract or group plan' is synonymous with the term 'contract or plan' and
 203 means:

204 ~~(A) A group contract of the type issued by a nonprofit medical service corporation~~
 205 ~~established under Chapter 18 of this title;~~

206 ~~(B) A group contract of the type issued by a nonprofit hospital service corporation~~
 207 ~~established under Chapter 19 of this title;~~

208 ~~(C)~~(A) A group contract of the type issued by a health care plan established under
 209 Chapter 20 of this title;

210 ~~(D)~~(B) A group contract of the type issued by a health maintenance organization
 211 established under Chapter 21 of this title; or

212 ~~(E)~~(C) A group accident and sickness insurance policy or contract, as defined in
 213 Chapter 30 of this title."

214 "(3) 'Insurer' means an insurance company, ~~nonprofit hospital service corporation,~~
 215 ~~medical service nonprofit corporation,~~ health care plan, or health maintenance
 216 organization."

217 **SECTION 18.**

218 Said title is further amended by revising Code Section 33-24-23, relating to provision in
 219 group policies of accident and sickness insurance for exclusion or reduction of benefits, as
 220 follows:

221 "33-24-23.

222 Notwithstanding any other provisions in this title to the contrary, no group policy of
 223 accident and sickness insurance offered for sale in this state shall be issued or renewed after
 224 April 17, 1975, by any insurer ~~or hospital service nonprofit corporation or medical service~~
 225 ~~nonprofit corporation~~ transacting business in this state, or health care plan under Chapter
 226 20 of this title, which by the terms of the group policy excludes or reduces the benefits
 227 payable or services to be rendered to or on behalf of any insured by reason of the fact that
 228 benefits have been paid or are also payable under any blanket school accident policy
 229 regardless of who makes the premium contribution or any individually underwritten and

230 individually issued contract or plan of insurance which provides exclusively for accident
 231 and sickness benefits and for which 100 percent of the premiums have been paid by the
 232 insured or a member of the insured's family, irrespective of the mode or channel of
 233 premium payment to the insurer or any discount received on such premium by virtue of the
 234 insured's membership in any organization or status as an employee. Any policy provision
 235 in violation of this Code section shall be void and unenforceable. Nothing in this Code
 236 section shall affect the practice of coordinating benefits between group policies issued
 237 pursuant to ~~Chapters 18, 19, and Chapter~~ Chapter 30 of this title."

238 **SECTION 19.**

239 Said title is further amended in Code Section 33-24-24, relating to provision in group or
 240 blanket accident and sickness policies of coverage for complications of pregnancy, by
 241 revising paragraph (2) of subsection (a) as follows:

242 "(2) 'Group policy or group contract' means a group or blanket accident and sickness
 243 insurance policy or contract as defined in Chapter 30 of this title, ~~a group contract of the~~
 244 ~~type issued by a hospital service nonprofit corporation established under Chapter 19 of~~
 245 ~~this title~~, a group contract of the type issued by a health care plan established under
 246 Chapter 20 of this title, ~~a group contract of the type issued by a nonprofit medical service~~
 247 ~~corporation established under Chapter 18 of this title~~, or any similar group benefit plan,
 248 policy, or contract."

249 **SECTION 20.**

250 Said title is further amended by revising Code Section 33-24-25, relating to provisions in
 251 group or blanket policies excluding or reducing coverage of persons eligible for or receiving
 252 medical assistance, as follows:

253 "33-24-25.

254 (a) No group or blanket accident and sickness policy shall contain any provision
 255 purporting to exclude or reduce coverage provided an otherwise insurable person solely for
 256 the reason that the person is eligible for or receiving medical assistance as defined in
 257 Article 7 of Chapter 4 of Title 49. Any such provision appearing in a group or blanket
 258 accident and sickness insurance policy subsequent to July 1, 1978, shall be null and void.

259 ~~(b) This Code section shall also apply to policies issued by a hospital service nonprofit~~
 260 ~~corporation or a nonprofit medical service corporation."~~

261 **SECTION 21.**

262 Said title is further amended by revising Code Section 33-24-26, relating to provisions
 263 limiting or restricting payment of benefits for preexisting illnesses or conditions, as follows:

264 "33-24-26.

265 (a) No group accident and sickness insurance policy, other than policies of disability
 266 income insurance and credit accident and sickness insurance and other than policies of
 267 qualified self-insurers, shall be issued in this state, which policy limits or restricts payment
 268 of benefits for any preexisting illness or condition not otherwise excluded from the group
 269 policy for a period in excess of 12 months following the date of the issuance of the
 270 certificate covering the insured person.

271 ~~(b) This Code section shall also apply to policies issued by a hospital service nonprofit~~
 272 ~~corporation or a nonprofit medical service corporation."~~

273 **SECTION 22.**

274 Said title is further amended in Code Section 33-24-28, relating to termination of coverage
 275 of dependent child upon attainment of specified age, by revising subsection (c) as follows:

276 "(c) This Code section shall apply equally to health insurance policies issued pursuant to
 277 Chapters 29 and 30 of this title, ~~contracts issued by nonprofit hospital and medical service~~
 278 ~~corporations under Chapters 18 and 19 of this title,~~ coverage by health maintenance
 279 organizations under Chapter 21 of this title, and health care plans under Chapter 20 of this
 280 title."

281 **SECTION 23.**

282 Said title is further amended in Code Section 33-24-28.2, relating to coverage of outpatient
 283 surgery, by revising subsections (d), (e), and (f) as follows:

284 "(d) This Code section shall also apply to policies or contracts issued by a ~~hospital service~~
 285 ~~nonprofit corporation,~~ a health care plan, a ~~nonprofit medical service corporation,~~ a health
 286 maintenance organization, a fraternal benefit society, or any other similar entity.

287 (e) The requirements of this Code section with respect to a group or blanket accident and
 288 sickness insurance benefit plan, policy, or contract shall be satisfied if the coverage
 289 specified in paragraphs (1) and (2) of subsection (b) of this Code section is made available
 290 to the master policyholder of such plan, policy, or contract. Nothing in this Code section
 291 shall be construed to require the group insurer, ~~nonprofit corporation,~~ health care plan,
 292 health maintenance organization, or master policyholder to provide or to make available
 293 such coverage to any certificate holder insured under such group policy, plan, or contract.

294 (f) Nothing in this Code section shall be construed to prohibit an insurer, ~~nonprofit~~
 295 ~~corporation,~~ health care plan, or other person issuing any similar accident and sickness
 296 insurance benefit plan, policy, or contract from issuing or continuing to issue an accident
 297 and sickness insurance benefit plan, policy, or contract which provides benefits greater than
 298 the minimum benefits required to be made available under this Code section or from

299 issuing any such plans, policies, or contracts which provide benefits which are generally
 300 more favorable to the insured than those required to be made available under this Code
 301 section."

302 **SECTION 24.**

303 Said title is further amended by revising Code Section 33-24-28.3, relating to policies not to
 304 exclude payment to hospitals specializing in treatment of alcoholics or drug addicts, as
 305 follows:

306 "33-24-28.3.

307 No policy of accident and sickness insurance, other than a policy of accident and sickness
 308 insurance issued in connection with an extension of credit, which is issued, delivered, or
 309 issued for delivery in this state by an insurer, ~~nonprofit medical service plan, nonprofit~~
 310 ~~hospital service plan,~~ health care plan, fraternal benefit society, or health maintenance
 311 organization authorized to transact insurance in this state and which provides specific
 312 benefits for the treatment of alcoholism or drug addiction, shall exclude the payment or
 313 reimbursement of such covered hospital or medical service benefits which would otherwise
 314 be payable to a hospital duly licensed in this state solely because such hospital specializes
 315 in the treatment of alcoholics or drug addicts and is operated primarily for the treatment of
 316 such persons."

317 **SECTION 25.**

318 Said title is further amended in Code Section 33-24-28.4, relating to coverage of general
 319 anesthesia and hospital or ambulatory surgical facility charges for certain dental care, by
 320 revising paragraph (1) of subsection (b) as follows:

321 "(b)(1) Any individual or group plan, policy, or contract for health care services which
 322 is issued, delivered, issued for delivery, or renewed in this state by a health care insurer,
 323 health maintenance organization, accident and sickness insurer, fraternal benefit society,
 324 ~~nonprofit hospital service corporation, nonprofit medical service corporation,~~ health care
 325 plan, or any other person, firm, corporation, joint venture, or other similar business entity
 326 that pays for, purchases, or furnishes health care services to patients, insureds, or
 327 beneficiaries in this state shall be subject to the provisions of this Code section."

328 **SECTION 26.**

329 Said title is further amended in Code Section 33-24-29, relating to coverage for treatment of
 330 mental disorders under accident and sickness insurance benefit plans providing major
 331 medical benefits covering small groups and federal law, by revising paragraph (1) of
 332 subsection (a) as follows:

333 "(1) 'Accident and sickness insurance benefit plan, policy, or contract' means:
 334 (A) A group or blanket accident and sickness insurance policy or contract, as defined
 335 in Chapter 30 of this title;
 336 ~~(B) A group contract of the type issued by a nonprofit hospital service corporation~~
 337 ~~established under Chapter 19 of this title;~~
 338 ~~(C)~~(B) A group contract of the type issued by a health care plan established under
 339 Chapter 20 of this title;
 340 ~~(D) A group contract of the type issued by a nonprofit medical service corporation~~
 341 ~~established under Chapter 18 of this title;~~
 342 ~~(E)~~(C) A group contract of the type issued by a health maintenance organization
 343 established under Chapter 21 of this title; or
 344 ~~(F)~~(D) Any similar group accident and sickness benefit plan, policy, or contract."

345 **SECTION 27.**

346 Said title is further amended in Code Section 33-24-29.1, relating to coverage for mental
 347 disorders under accident and sickness insurance benefit plans providing major medical
 348 benefits covering all groups except small groups, by revising paragraph (1) of subsection (a)
 349 as follows:

350 "(1) 'Accident and sickness insurance benefit plan, policy, or contract' means:
 351 (A) A group or blanket accident and sickness insurance policy or contract, as defined
 352 in Chapter 30 of this title;
 353 ~~(B) A group contract of the type issued by a nonprofit hospital service corporation~~
 354 ~~established under Chapter 19 of this title;~~
 355 ~~(C)~~(B) A group contract of the type issued by a health care plan established under
 356 Chapter 20 of this title;
 357 ~~(D) A group contract of the type issued by a nonprofit medical service corporation~~
 358 ~~established under Chapter 18 of this title;~~
 359 ~~(E)~~(C) A group contract of the type issued by a health maintenance organization
 360 established under Chapter 21 of this title; or
 361 ~~(F)~~(D) Any similar group accident and sickness benefit plan, policy, or contract."

362 **SECTION 28.**

363 Said title is further amended in Code Section 33-24-56, relating to prohibition against
 364 requiring referral from primary care physician to dermatologist, by revising paragraph (2)
 365 of subsection (b) as follows:

366 "(2) 'Health benefit policy' means any individual or group plan, policy, or contract for
 367 health care services issued, delivered, issued for delivery, or renewed in this state by a

368 health care corporation, health maintenance organization, accident and sickness insurer,
 369 fraternal benefit society, ~~nonprofit hospital service corporation, nonprofit medical service~~
 370 ~~corporation~~, or similar entity."

371 **SECTION 29.**

372 Said title is further amended in Code Section 33-24-57, relating to health insurance and
 373 provision that coverage cannot be terminated due to individual claims experience required,
 374 by revising paragraph (1) of subsection (a) as follows:

375 "(1) 'Insurer' means an accident and sickness insurer, fraternal benefit society, ~~nonprofit~~
 376 ~~hospital service corporation, nonprofit medical service corporation~~, health care
 377 corporation, health maintenance organization, or any similar entity and any self-insured
 378 health care plan not subject to the exclusive jurisdiction of the Employee Retirement
 379 Income Security Act of 1974, 29 U.S.C. Sec. 1001, et seq."

380 **SECTION 30.**

381 Said title is further amended in Code Section 33-24-59, relating to women's access to health
 382 care, health insurance and provision disclosing insured's right to direct access to obstetricians
 383 and gynecologists required, by revising paragraph (1) of subsection (b) as follows:

384 "(b)(1) As used in this Code section, the term 'health benefit policy' means any individual
 385 or group plan, policy, or contract for health care services issued, delivered, issued for
 386 delivery, or renewed in this state by a health care corporation, health maintenance
 387 organization, accident and sickness insurer, fraternal benefit society, ~~nonprofit hospital~~
 388 ~~service corporation, nonprofit medical service corporation~~, or similar entity."

389 **SECTION 31.**

390 Said title is further amended in Code Section 33-24-59.1, relating to coverage for treatment
 391 of dependent children with cancer, by revising paragraph (1) of subsection (a) as follows:

392 "(1) 'Accident and sickness insurance benefit plan, policy, or contract' means:

393 (A) An individual accident and sickness insurance policy or contract, as defined in
 394 Chapter 29 of this title;

395 (B) A group or blanket accident and sickness insurance policy or contract, as defined
 396 in Chapter 30 of this title;

397 ~~(C) An individual or group contract of the type issued by a nonprofit hospital service~~
 398 ~~corporation established under Chapter 19 of this title;~~

399 ~~(D)~~(C) An individual or group contract of the type issued by a health care plan
 400 established under Chapter 20 of this title;

401 ~~(E)~~ An individual or group contract of the type issued by a nonprofit medical service
 402 corporation established under Chapter 18 of this title;
 403 ~~(F)~~(D) An individual or group contract of the type issued by a health maintenance
 404 organization established under Chapter 21 of this title;
 405 ~~(G)~~(E) An individual or group contract of the type issued by a fraternal benefit society;
 406 or
 407 ~~(H)~~(F) Any similar individual or group accident and sickness benefit plan, policy, or
 408 contract."

409 **SECTION 32.**

410 Said title is further amended in Code Section 33-24-59.4, relating to confidentiality of
 411 medical information obtained from pharmacies, restrictions on release of information, and
 412 penalty for violation, by revising subsection (a) as follows:

413 "(a) As used in this Code section, the term 'insurer' means an accident and sickness insurer,
 414 fraternal benefit society, ~~nonprofit hospital service corporation, nonprofit medical service~~
 415 ~~corporation~~, health care corporation, health maintenance organization, provider sponsored
 416 health care corporation, or the plan administrator of any health benefit plan established
 417 pursuant to Article 1 of Chapter 18 of Title 45; and such term includes any entity which
 418 administrates or processes claims on behalf of any of the foregoing."

419 **SECTION 33.**

420 Said title is further amended in Code Section 33-24-59.5, relating to definitions, timely
 421 payment of health benefits, notification of failure to pay, penalties, and applicability, by
 422 revising paragraph (3) of subsection (a) as follows:

423 "(3) 'Insurer' means an accident and sickness insurer, fraternal benefit society, ~~nonprofit~~
 424 ~~hospital service corporation, nonprofit medical service corporation~~, health care
 425 corporation, health maintenance organization, provider sponsored health care corporation,
 426 or any similar entity and any self-insured health benefit plan, which entity provides for
 427 the financing or delivery of health care services through a health benefit plan, the plan
 428 administrator of any health plan, or the plan administrator of any health benefit plan
 429 established pursuant to Article 1 of Chapter 18 of Title 45 or any other administrator as
 430 defined in paragraph (1) of subsection (a) of Code Section 33-23-100."

431 **SECTION 34.**

432 Said title is further amended in Code Section 33-24-59.12, relating to patient access to eye
 433 care, by revising paragraph (5) of subsection (b) as follows:

434 "(5) 'Health care insurer' means an entity, including but not limited to insurance
 435 companies, ~~hospital service nonprofit corporations, nonprofit medical service~~
 436 ~~corporations~~, health care corporations, health maintenance organizations, and preferred
 437 provider organizations, authorized by the state to offer or provide health benefit plans,
 438 programs, policies, subscriber contracts, or any other agreements of a similar nature
 439 which compensate or indemnify health care providers for furnishing health care services."

440 **SECTION 35.**

441 Said title is further amended in Code Section 33-24-59.14, relating to definitions, prompt pay
 442 requirements, and penalties, by revising paragraph (6) of subsection (a) as follows:

443 "(6) 'Insurer' means an accident and sickness insurer, fraternal benefit society, ~~nonprofit~~
 444 ~~hospital service corporation, nonprofit medical service corporation~~, health care
 445 corporation, health maintenance organization, provider sponsored health care corporation,
 446 or any similar entity, which entity provides for the financing or delivery of health care
 447 services through a health benefit plan, the plan administrator of any health plan, or the
 448 plan administrator of any health benefit plan established pursuant to Article 1 of Chapter
 449 18 of Title 45."

450 **SECTION 36.**

451 Said title is further amended in Code Section 33-24-59.15, relating to definitions and dental
 452 insurance, by revising paragraph (3) of subsection (a) as follows:

453 "(3) 'Dental benefit plan' means any individual or group plan, policy, contract, or
 454 subscription agreement which includes or is for dental care services that is issued,
 455 delivered, issued for delivery, or renewed in this state whether by a health care insurer,
 456 health maintenance organization, preferred provider organization, accident and sickness
 457 insurer, fraternal benefit society, ~~nonprofit hospital service corporation, nonprofit medical~~
 458 ~~or dental service corporation~~, health care plan, or any other person, firm, corporation,
 459 joint venture, or other similar business entity that pays for, purchases, or furnishes dental
 460 care services to patients, insureds, beneficiaries, or covered dependents in this state."

461 **SECTION 37.**

462 Said title is further amended in Code Section 33-29-2, relating to requirements as to policies
 463 generally, by revising subsections (c) and (d) as follows:

464 "~~(c) This Code section shall also apply to policies issued by a hospital service nonprofit~~
 465 ~~corporation or a nonprofit medical service corporation.~~

466 ~~(d)~~(c) This Code section shall not be construed so as to impair the obligation of any
 467 contract in existence prior to January 1, 1979."

468 **SECTION 38.**

469 Said title is further amended in Code Section 33-29-3, relating to required policy provisions,
470 by revising subsection (d) as follows:

471 "(d) The provisions of this Code section shall also apply to individual accident and
472 sickness insurance policies issued by a fraternal benefit society, ~~a hospital service nonprofit~~
473 ~~corporation, a nonprofit medical service corporation,~~ a health care corporation, a health
474 maintenance organization, or any other similar entity."

475 **SECTION 39.**

476 Said title is further amended in Code Section 33-29-3.2, relating to coverage for
477 mammograms, Pap smears, and prostate specific antigen tests, by revising subsection (e) as
478 follows:

479 "(e) The provisions of this Code section shall apply to individual accident and sickness
480 insurance policies issued by a fraternal benefit society, ~~a nonprofit hospital service~~
481 ~~corporation, a nonprofit medical service corporation,~~ a health care plan, a health
482 maintenance organization, or any similar entity."

483 **SECTION 40.**

484 Said title is further amended in Code Section 33-29-3.3, relating to coverage for bone
485 marrow transplants for the treatment of breast cancer and Hodgkin's disease, optional
486 endorsement, requirements, guidelines, and applicability, by revising subsection (e) as
487 follows:

488 "(e) The provisions of this Code section shall apply to individual accident and sickness
489 insurance policies issued by a fraternal benefit society, ~~a nonprofit hospital service~~
490 ~~corporation, a nonprofit medical service corporation,~~ a health care plan, a health
491 maintenance organization, or any similar entity."

492 **SECTION 41.**

493 Said title is further amended in Code Section 33-29-3.4, relating to insurance coverage for
494 child wellness services, by revising subsection (e) as follows:

495 "(e) The provisions of this Code section shall apply to individual basic medical or hospital
496 expense, major medical, or comprehensive medical expense insurance policies issued by
497 a fraternal benefit society, ~~a nonprofit hospital service corporation, a nonprofit medical~~
498 ~~service corporation,~~ a health care corporation, a health maintenance organization, or any
499 similar entity."

500 **SECTION 42.**

501 Said title is further amended in Code Section 33-30-4.1, relating to coverage for human heart
502 transplants, optional endorsement, requirements, and guidelines, by revising subsection (f)
503 as follows:

504 "(f) The provisions of this Code section shall also apply to group accident and sickness
505 insurance policies or contracts issued by a fraternal benefit society, ~~a nonprofit hospital~~
506 ~~service corporation, a nonprofit medical service corporation,~~ a health care plan, a health
507 maintenance organization, or any other similar entity."

508 **SECTION 43.**

509 Said title is further amended in Code Section 33-30-4.2, relating to insurance coverage for
510 mammograms, Pap smears, and prostate specific antigen tests, by revising subsection (e) as
511 follows:

512 "(e) The provisions of this Code section shall apply to group accident and sickness
513 insurance policies issued by a fraternal benefit society, ~~a nonprofit hospital service~~
514 ~~corporation, a nonprofit medical service corporation,~~ a health care plan, a health
515 maintenance organization, or any similar entity."

516 **SECTION 44.**

517 Said title is further amended in Code Section 33-30-4.3, relating to utilization of mail-order
518 pharmaceutical distributors in policies, plans, contracts, or funds and utilization of other
519 providers of pharmaceutical services under same terms and conditions, by revising
520 subsection (a) as follows:

521 "(a) For the purposes of this Code section, the term 'health care insurer' means an insurer,
522 including a fraternal benefit society, a health care plan, ~~a nonprofit medical service~~
523 ~~corporation, a nonprofit hospital service corporation,~~ or a health maintenance organization
524 authorized to sell accident and sickness insurance policies, subscriber certificates, or other
525 contracts of accident and sickness insurance by whatever name called."

526 **SECTION 45.**

527 Said title is further amended in Code Section 33-30-4.4, relating to coverage for bone
528 marrow transplants for the treatment of breast cancer and Hodgkin's disease, optional
529 endorsement, requirements, guidelines, and applicability, by revising subsection (f) as
530 follows:

531 "(f) The provisions of this Code section shall also apply to group accident and sickness
532 insurance policies or contracts issued by a fraternal benefit society, ~~a nonprofit hospital~~

533 ~~service corporation, a nonprofit medical service corporation,~~ a health care plan, a health
534 maintenance organization, or any other similar entity."

535 **SECTION 46.**

536 Said title is further amended in Code Section 33-30-4.5, relating to coverage for child
537 wellness services, by revising subsection (e) as follows:

538 "(e) The provisions of this Code section shall apply to group basic medical or hospital
539 expense, major medical, or comprehensive medical expense insurance policies issued by
540 a fraternal benefit society, ~~a nonprofit hospital service corporation, a nonprofit medical~~
541 ~~service corporation,~~ a health care corporation, a health maintenance organization, or any
542 similar entity."

543 **SECTION 47.**

544 Said title is further amended in Code Section 33-30-6, relating to authority to issue blanket
545 accident and sickness policies, filing of form, required provisions, and applicability of Code
546 section to similar entities, by revising subsection (c) as follows:

547 "(c) The provisions of this Code section shall also apply to group and blanket accident and
548 sickness insurance policies issued by a fraternal benefit society, ~~a hospital service nonprofit~~
549 ~~corporation, a nonprofit medical service corporation,~~ a health care corporation, a health
550 maintenance organization, or any other similar entity."

551 **SECTION 48.**

552 Said title is further amended in Code Section 33-30-13.1, relating to furnishing claims
553 experience to policyholders, by revising subsection (a) as follows:

554 "(a) As used in this Code section, the term 'insurer' means an accident and sickness insurer,
555 fraternal benefit society, ~~nonprofit hospital service corporation, nonprofit medical service~~
556 ~~corporation,~~ health care corporation, provider sponsored health care corporation, health
557 maintenance organization, or any similar entity."

558 **SECTION 49.**

559 Said title is further amended in Code Section 33-30-15, relating to continuation of similar
560 coverage, preexisting conditions, and procedures and guidelines, by revising subparagraph
561 (a)(2)(C) and paragraph (3) of subsection (a) as follows:

562 "(C) An individual accident and sickness insurance policy, including coverage issued
563 by a health maintenance organization, ~~nonprofit hospital or nonprofit medical service~~
564 ~~corporation,~~ health care corporation, or fraternal benefit society;"

565 "(3) 'Insurer' means an accident and sickness insurer, fraternal benefit society, ~~nonprofit~~
 566 ~~hospital service corporation, nonprofit medical service corporation,~~ health care
 567 corporation, health maintenance organization, or any similar entity and any self-insured
 568 health care plan not subject to the exclusive jurisdiction of the federal Employee
 569 Retirement Income Security Act of 1974, 29 U.S.C. Section 1001, et seq."

570 **SECTION 50.**

571 Said title is further amended in Code Section 33-30-22, relating to definitions regarding
 572 preferred provider arrangements, by revising paragraph (3) as follows:

573 "(3) 'Health care insurer' means an insurer, a fraternal benefit society, a health care plan,
 574 ~~a nonprofit medical service corporation, nonprofit hospital service corporation,~~ or a
 575 health maintenance organization authorized to sell accident and sickness insurance
 576 policies, subscriber certificates, or other contracts of insurance by whatever name called
 577 under this title."

578 **SECTION 51.**

579 Said title is further amended in Code Section 33-38-2, relating to scope of Chapter 38, by
 580 revising paragraph (4) of subsection (c) as follows:

581 "(4) Any policy, contract, certificate, ~~or subscriber agreement issued by a nonprofit~~
 582 ~~hospital service corporation referred to in Chapter 19 of this title,~~ a health care plan
 583 referred to in Chapter 20 of this title, ~~a nonprofit medical service corporation referred to~~
 584 ~~in Chapter 18 of this title,~~ a prepaid legal services plan, as defined in Code Section
 585 33-35-2, and a health maintenance organization, as defined in Code Section 33-21-1;"

586 **SECTION 52.**

587 Said title is further amended in Code Section 33-38-4, relating to definitions regarding the
 588 Georgia Life and Health Insurance Guaranty Association, by revising subparagraph (A) of
 589 paragraph (13) as follows:

590 "(A) A for profit hospital or medical service corporation, ~~whether profit or nonprofit,"~~

591 **SECTION 53.**

592 Said title is further amended in Code Section 33-42-4, relating to definitions regarding
 593 long-term care insurance, by revising paragraphs (5) and (6) as follows:

594 "(5) 'Long-term care insurance' means any accident and sickness insurance policy or rider
 595 advertised, marketed, offered, or designed primarily to provide coverage for not less than
 596 12 consecutive benefit months or which provides coverage for recurring confinements
 597 separated by a period not to exceed six months with a minimum aggregate period of one

598 year for each covered person on an expense incurred, indemnity, prepaid, or other basis,
 599 for one or more necessary or medically necessary diagnostic, preventive, therapeutic,
 600 rehabilitative, maintenance, or personal care services, provided in a setting other than an
 601 acute care unit of a hospital. Such term includes group and individual accident and
 602 sickness policies or riders whether issued by insurers, fraternal benefit societies, ~~nonprofit~~
 603 ~~hospital service corporations, nonprofit medical service corporations~~, health care plans,
 604 health maintenance organizations, or any other similar organizations. Long-term care
 605 insurance shall not include any accident and sickness insurance policy which is offered
 606 primarily to provide basic medicare supplement coverage, basic hospital expense
 607 coverage, basic medical-surgical expense coverage, hospital confinement indemnity
 608 coverage, major medical expense coverage, disability income protection coverage,
 609 catastrophic coverage, comprehensive coverage, accident only coverage, specified
 610 disease or specified accident coverage, or limited benefit health coverage. Long-term
 611 care insurance may be provided through an individual or group life insurance policy by
 612 attachment of a long-term care rider or by the automatic inclusion of a long-term care
 613 provision which, notwithstanding Code Section 33-42-3, must meet the requirements of
 614 this chapter and regulations promulgated by the Commissioner. Any such long-term care
 615 riders or policy provisions shall not be exempt from filing requirements and must be filed
 616 with the department for approval before being used in this state.

617 (6) 'Policy' means any policy, contract, or subscriber agreement or any rider or
 618 endorsement attached thereto, issued, delivered, issued for delivery, or renewed in this
 619 state by an insurer, fraternal benefit society, ~~nonprofit hospital service corporation,~~
 620 ~~nonprofit medical service corporation~~, health care plan, health maintenance organization,
 621 or any other similar organization. Such term shall also include a Georgia Qualified
 622 Long-term Care Partnership Program approved policy, as defined in paragraph (4) of
 623 Code Section 49-4-161, meeting the requirements of the Georgia Qualified Long-term
 624 Care Partnership Program as enacted in subsection (a) of Code Section 49-4-162."

625 **SECTION 54.**

626 Said title is further amended in Code Section 33-44-2, relating to definitions regarding high
 627 risk health insurance plans, by revising paragraph (10) as follows:

628 "(10) 'Insurer' means any insurance company authorized to transact accident and sickness
 629 insurance business in this state, ~~any nonprofit medical service corporation, any nonprofit~~
 630 ~~hospital service corporation~~, any health care plan, and any health maintenance
 631 organization authorized to transact business in this state."

632 **SECTION 55.**

633 Title 31 of the Official Code of Georgia Annotated, relating to health, is amended in Code
 634 Section 31-7-280, relating to health care provider annual reports and form, by revising
 635 paragraph (4) of subsection (a) as follows:

636 "(4) 'Third-party payor' means any entity which provides health care insurance or a health
 637 care service plan, including but not limited to providers of major medical or
 638 comprehensive accident or health insurance, whether or not through a self-insurance plan,
 639 Medicaid, ~~hospital service nonprofit corporation plans, or~~ health care plans, ~~or nonprofit~~
 640 ~~medical service corporation plans,~~ but does not mean a specified disease or supplemental
 641 hospital indemnity payor."

642 **SECTION 56.**

643 Said title is further amended in Code Section 31-17-4.1, relating to chlamydia screening test,
 644 by revising paragraph (4) of subsection (b) as follows:

645 "(4) The provisions of this subsection (b) of ~~this Code section~~ shall apply to accident and
 646 sickness insurance policies issued by a fraternal benefit society, ~~a nonprofit hospital~~
 647 ~~service corporation, a nonprofit medical service corporation,~~ a health care plan, a health
 648 maintenance organization, or any similar entity."

649 **SECTION 57.**

650 Said title is further amended in Code Section 31-32-12, relating to restriction on requiring
 651 and preparing advance directives for health care, by revising subsection (a) as follows:

652 "(a) No physician, health care facility, or health care provider and no health care service
 653 plan, insurer issuing disability insurance, or self-insured employee welfare benefit plan, ~~or~~
 654 ~~nonprofit hospital service plan~~ shall require any person to execute an advance directive for
 655 health care as a condition for being insured for or receiving health care services."

656 **SECTION 58.**

657 Title 45 of the Official Code of Georgia Annotated, relating to public officers and employees,
 658 is amended in Code Section 45-18-6, relating to contracts to provide insurance benefits,
 659 invitation of proposals, reinsurance agreements, issuance of certificates of coverage,
 660 redetermination of contracts, self-insurance plans, contracts for administrative services, and
 661 contracts with health maintenance organizations, by revising subsection (c) as follows:

662 "(c) Notwithstanding any other provision of this part to the contrary, the board is
 663 authorized to execute a contract or contracts with one or more insurers authorized to
 664 transact accident and sickness insurance in this state or with one or more ~~hospital service~~
 665 ~~nonprofit corporations, nonprofit medical service corporations, or~~ health care

666 corporations or with one or more professional claim administrators authorized or licensed
667 to transact business in this state or with one or more independent adjusting firms with
668 employees who are licensed as independent adjusters pursuant to Article 1 of Chapter 23
669 of Title 33 to provide administrative services in connection with a self-insured health
670 insurance plan for state employees."

671

SECTION 59.

672 All laws and parts of laws in conflict with this Act are repealed.