- 1 SB352
- 2 136080-1
- 3 By Senator Smitherman
- 4 RFD: Banking and Insurance
- 5 First Read: 14-MAR-13

136080-1:n:01/31/2012:JMH/hh LRS 2012-574 1 2 3 4 5 6 7 To repeal portions of Title 27 of the Code 8 SYNOPSIS: of Alabama 1975. 9 10 11 A BTLL 12 TO BE ENTITLED 13 AN ACT 14 15 Relating to the Alabama Insurance Code, to repeal the following: 16 17 27-3-30 Any insurer which is organized under the 18 laws of any other state and is admitted to do business in this 19 state for the purpose of writing insurance may become a 20 domestic insurer by complying with all of the requirements of 21 law relative to the organization and licensing of a domestic 22 insurer of the same type and by designating its principal place of business at a place in this state. Said domestic 23 24 insurer will be entitled to like certificates and licenses to 25 transact business in this state and shall be subject to the 26 authority and jurisdiction of this state. Articles of 27 incorporation of such domestic insurer may be amended to

provide that the corporation is a continuation of the corporate existence of the original foreign corporation through adoption of this state as its corporate domicile and that the original date of incorporation in its original domiciliary state is the date of incorporation of such domestic insurer.

7 27-3-31 Any domestic insurer may, upon the approval of the Commissioner of Insurance, transfer its domicile to any 8 other state in which it is admitted to transact the business 9 10 of insurance, and upon such a transfer shall cease to be a 11 domestic insurer, and shall be admitted to this state if 12 qualified as a foreign insurer. The Commissioner of Insurance 13 shall approve any such proposed transfer unless he shall determine such transfer is not in the interest of the 14 15 policyholders of this state.

27-3-32 The certificate of authority, agents 16 17 appointments and licenses, rates, and other items which the Commissioner of Insurance allows, in his discretion, which are 18 19 in existence at the time any insurer licensed to transact the business of insurance in this state transfers its corporate 20 21 domicile to this or any other state by merger, consolidation 22 or any other lawful method shall continue in full force and 23 effect upon such transfer if such insurer remains duly qualified to transact the business of insurance in this state. 24 25 All outstanding policies of any transferring insurer shall remain in full force and effect and need not be endorsed as to 26 27 the new name of the company or its new location unless so

1 ordered by the Commissioner of Insurance. Every transferring 2 insurer shall file new policy forms with the Commissioner of Insurance on or before the effective date of the transfer, but 3 4 may use existing policy forms with appropriate endorsements if allowed by and under such conditions as approved by the 5 Commissioner of Insurance. However, every such transferring 6 7 insurer shall notify the Commissioner of Insurance of the details of the proposed transfer, and shall file promptly any 8 resulting amendments to corporate documents filed or required 9 10 to be filed in accordance with Sections 10-2A-90 through 10-2A-284, 27-3-17, 27-27-5 and 27-27-22. 11

12 27-3-33 The Commissioner of Insurance of this state
13 may promulgate necessary rules and regulations to carry out
14 the purposes of Sections 27-3-30 through 27-3-32.

15 27-3A-1 This chapter may be cited as the "Health
16 Care Service Utilization Review Act."

17 27-3A-2 The purposes of this chapter are to: (1)Promote the delivery of quality health care in a 18 19 cost-effective manner. (2) Assure that utilization review agents adhere to reasonable standards for conducting 20 21 utilization review. (3) Foster greater coordination and 22 cooperation between health care providers and utilization 23 review agents. (4) Improve communications and knowledge of 24 benefit plan requirements among all parties concerned before expenses are incurred. (5) Ensure that utilization review 25 26 agents maintain the confidentiality of medical records in 27 accordance with applicable laws.

1 27-3A-3 As used in this chapter, the following words 2 and phrases shall have the following meanings: (1) DEPARTMENT. The Alabama Department of Public Health. (2)3 4 ENROLLEE. An individual who has contracted for or who 5 participates in coverage under an insurance policy, a health 6 maintenance organization contract, a health service 7 corporation contract, an employee welfare benefit plan, a hospital or medical services plan, or any other benefit 8 program providing payment, reimbursement, or indemnification 9 10 for health care costs for the individual or the eligible dependents of the individual. (3) PROVIDER. A health care 11 12 provider duly licensed or certified by the State of Alabama. 13 (4) UTILIZATION REVIEW. A system for prospective and 14 concurrent review of the necessity and appropriateness in the allocation of health care resources and services given or 15 proposed to be given to an individual within this state. The 16 17 term does not include elective requests for clarification of (5) UTILIZATION REVIEW AGENT. Any person or entity, 18 coverage. including the State of Alabama, performing a utilization 19 review, except the following: a. An agency of the federal 20 21 government. b. An agent acting on behalf of the federal 22 government, but only to the extent that the agent is providing 23 services to the federal government. c. The internal quality assurance program of a hospital. d. An employee of a 24 25 utilization review agent. e. Health maintenance organizations 26 licensed and regulated by the state, but only to the extent of 27 providing a utilization review to their own members. f. Any

1 entity that has a current accreditation from the Utilization 2 Review Accreditation Commission (URAC). However, entities with current URAC accreditation shall file a URAC certification 3 4 with the department annually. g. An entity performing utilization reviews or bill audits, or both, exclusively for 5 6 workers' compensation claims pursuant to Section 25-5-312. If 7 an entity also performs services for claims other than workers' compensation, it shall be considered a private review 8 9 agent subject to this chapter for those claims. h. An entity 10 performing utilization reviews or bill audits, or both, exclusively for the Medicaid Agency. i. A person performing 11 utilization reviews or bill audits, or both, exclusively for 12 13 their company's health plan, independent of a utilization 14 review company. j. An insurance company licensed by the State 15 of Alabama performing utilization reviews or bill audits, or both, exclusively for their company's health plan, independent 16 17 of a utilization review company. k. The Peer Review Committee of the Alabama State Chiropractic Association. 18

27-3A-4 (a) Utilization review agents shall adhere 19 to the minimum standards set forth in Section 27-3A-5. (b) On 20 21 or after July 1, 1994, a utilization review agent shall not 22 conduct a utilization review in this state unless the agent 23 has certified to the department in writing that the agent is 24 in compliance with Section 27-3A-5. Certification shall be 25 made annually on or before July 1 of each calendar year. In 26 addition, a utilization review agent shall file the following 27 information: (1) The name, address, telephone number, and

1 BE IT ENACTED BY THE LEGISLATURE OF ALABAMA:

Section 1. Sections 27-3-30 to 27-3A-4, Code of
Alabama 1975, are repealed.

Section 2. This act shall become effective
immediately following its passage and approval by the
Governor, or its otherwise becoming law.