

The Senate Insurance and Labor Committee offered the following substitute to SB 383:

**ADOPTED**

**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 provide a short title; to provide for legislative intent; to provide for the Commissioner of  
3 Insurance to adopt policies to promote, approve, and encourage health savings account  
4 eligible high deductible plans in Georgia; to provide for exemptions from certain unfair trade  
5 practices for certain wellness and health promotion programs, condition or disease  
6 management programs, health risk appraisal programs, and similar provisions in such plans;  
7 to provide for certain requirements for such plans; to provide for health reimbursement  
8 arrangement only plans that encourage employer financial support of health insurance or  
9 health related expenses under certain circumstances; to provide for related matters; to provide  
10 for an effective date; to repeal conflicting laws; and for other purposes.

11 **BE IT ENACTED BY THE GENERAL ASSEMBLY OF GEORGIA:**

**SECTION 1.**

12 This Act shall be known and may be cited as the "Insuring Georgia's Families Act."  
13

**SECTION 2.**

14 Title 33 of the Official Code of Georgia Annotated, relating to insurance, is amended by  
15 striking Chapter 51 in its entirety and inserting in lieu thereof a new Chapter 51 to read as  
16 follows:  
17

**"CHAPTER 51**

18  
19 33-51-1.

20 This chapter shall be known and may be cited as the 'Georgia Affordable HSA Eligible  
21 High Deductible Health Plan.'

1 33-51-2.

2 It is the intent of the General Assembly:

3 (1) To authorize the Commissioner to establish flexible guidelines for health savings  
4 account eligible high deductible plan designs which will be affordable to Georgians and  
5 to increase the availability of these types of plans by accident and sickness insurers  
6 licensed to transact such insurance in this state;

7 (2) To encourage the offering of affordable health savings account eligible high  
8 deductible plans, as required under the rules of the federal Internal Revenue Service  
9 related to the establishment of health savings accounts, with the specific intent of  
10 reaching many otherwise uninsured Georgians and the general intent of creating  
11 affordable comprehensive health insurance for all Georgians; and

12 (3) To enhance the affordability of insurance with the flexible health savings account  
13 eligible high deductible plans allowed under this chapter by allowing rewards and  
14 incentives for participation in and adherence to health behaviors that recognize the value  
15 of the personal responsibility of each citizen to maintain good health, seek preventative  
16 care services, and comply with approved treatments.

17 33-51-3.

18 (a) The Commissioner shall develop flexible guidelines for coverage and approval of  
19 health savings account eligible high deductible plans which are designed to qualify under  
20 federal and state requirements as high deductible health plans for use with health savings  
21 accounts which comply with federal requirements under the applicable provisions of the  
22 federal Internal Revenue Code for high deductible health plans sold in connection with  
23 health savings accounts.

24 (b) The Commissioner shall be authorized to encourage and promote the marketing of  
25 health savings account eligible high deductible plans by accident and sickness insurers in  
26 this state; provided, however, that nothing in this Code section shall be construed to  
27 authorize the sale of insurance in violation of Chapter 3 of this title or interstate sales of  
28 insurance.

29 (c) The Commissioner shall be authorized to conduct a national study of health savings  
30 account eligible high deductible plans available in other states and to determine if and how  
31 these products serve the uninsured and if they should be made available to Georgians.

32 (d) The Commissioner shall be authorized to develop an automatic or fast track approval  
33 process for health savings account eligible high deductible plans already approved under  
34 the laws and regulations of this state or other states.

35 (e) The Commissioner shall be authorized to promulgate such rules and regulations as he  
36 or she deems necessary and appropriate for the design, promotion, and regulation of health

1 savings account eligible high deductible plans, including rules and regulations for the  
2 expedited review of standardized policies, advertisements and solicitations, and other  
3 matters deemed relevant by the Commissioner.

4 33-51-4.

5 Insurers that include and operate wellness and health promotion programs, disease and  
6 condition management programs, health risk appraisal programs, and similar provisions in  
7 their high deductible health policies in keeping with federal requirements shall not be  
8 considered to be engaging in unfair trade practices under Code Section 33-6-4 with respect  
9 to references to the practices of illegal inducements, unfair discrimination, and rebating.

10 33-51-5.

11 There shall be no required relationship between preferred provider and nonpreferred  
12 provider plan reimbursements for health savings account eligible high deductible plans  
13 using nonpreferred provider reimbursements. Such plans, however, shall not:

- 14 (1) Unfairly deny health benefits for medically necessary covered services;
- 15 (2) Have differences in benefit levels payable to preferred providers compared to other  
16 providers that unfairly deny benefits for covered services;
- 17 (3) Have a plan coinsurance percentage applicable to benefit levels for services provided  
18 by nonpreferred providers that is less than 60 percent of the benefit levels under the  
19 policy for such services; or
- 20 (4) Have an adverse effect on the availability or the quality of services.

21 33-51-6.

22 (a) The Commissioner shall be authorized to allow health reimbursement arrangement  
23 only plans that encourage employer financial support of health insurance or health related  
24 expenses recognized under the rules of the federal Internal Revenue Service to be approved  
25 for sale in connection with or packaged with individual health insurance policies otherwise  
26 approved by the Commissioner.

27 (b) Health reimbursement arrangement only plans that are not sold in connection with or  
28 packaged with individual health insurance policies shall not be considered insurance under  
29 this title.

30 33-51-7.

31 The provisions of Code Section 33-20A-9.1, relating to a consumer choice option, shall  
32 apply to insurance products offered under this chapter.

1 33-51-8.

2 Notwithstanding the provisions of paragraphs (2) and (3) of Code Section 33-51-5, health  
3 benefit plans providing incentives for covered persons to use pharmaceutical or dental  
4 services of preferred providers shall contain a provision which clearly identifies that the  
5 payment or reimbursement for a noncontracting provider of covered pharmaceutical or  
6 dental services shall be the same as the payment or reimbursement for a preferred provider  
7 of covered pharmaceutical or dental services; provided, however, that the health benefit  
8 plan shall not be required to make payment or reimbursement in an amount which is greater  
9 than the actual fee charged by the provider for the dental or pharmaceutical services  
10 rendered."

11 **SECTION 3.**

12 This Act shall become effective upon its approval by the Governor or upon its becoming law  
13 without such approval.

14 **SECTION 4.**

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