HEALTH DISCOUNT PROGRAM REVISIONS
2013 GENERAL SESSION
STATE OF UTAH
Chief Sponsor: James A. Dunnigan
Senate Sponsor: J. Stuart Adams
LONG TITLE
General Description:
This bill amends the definitions and license renewal provisions of the Health Discount
Program Consumer Protection Act and directs health discount program operators or
marketers to report their involvement in any administrative action or criminal
prosecutions to the insurance commissioner.
Highlighted Provisions:
This bill:
 defines terms;
 requires the operator or marketer of a health discount program to submit a license
renewal application in addition to applicable renewal fees;
 requires a health discount program operator or marketer to report to the insurance
commissioner any:
• administrative action taken against the operator or marketer; or
• criminal prosecution instituted against the operator or marketer;
 provides that a purchaser of a health discount program has 10 calendar days to
cancel the contract and receive a reimbursement of money paid, unless the
purchaser has used services provided by the health discount program under the
contract; and
 makes technical changes.
Money Appropriated in this Bill:

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28	None
29	Other Special Clauses:
30	None
31	Utah Code Sections Affected:
32	AMENDS:
33	31A-8a-102, as last amended by Laws of Utah 2008, Chapter 3
34	31A-8a-103, as enacted by Laws of Utah 2005, Chapter 58
35	31A-8a-201, as last amended by Laws of Utah 2011, Chapter 297
36	31A-8a-202, as enacted by Laws of Utah 2005, Chapter 58
37	31A-8a-205, as last amended by Laws of Utah 2011, Chapter 297
38	ENACTS:
39	31A-8a-202.5 , Utah Code Annotated 1953
40	31A-8a-205.5 , Utah Code Annotated 1953
41	
42	Be it enacted by the Legislature of the state of Utah:
43	Section 1. Section 31A-8a-102 is amended to read:
44	31A-8a-102. Definitions.
	31A-8a-102. Definitions. For purposes of this chapter:
44	
44 45	For purposes of this chapter:
44 45 46	For purposes of this chapter: (1) "Fee" means any periodic charge for use of a discount program.
44 45 46 47	For purposes of this chapter:(1) "Fee" means any periodic charge for use of a discount program.(2) "Health care provider" means a health care provider as defined in Section
44 45 46 47 48	 For purposes of this chapter: (1) "Fee" means any periodic charge for use of a discount program. (2) "Health care provider" means a health care provider as defined in Section 78B-3-403 who:
44 45 46 47 48 49	 For purposes of this chapter: (1) "Fee" means any periodic charge for use of a discount program. (2) "Health care provider" means a health care provider as defined in Section 78B-3-403 who: (a) is practicing within the scope of the provider's license; and
44 45 46 47 48 49 50	 For purposes of this chapter: (1) "Fee" means any periodic charge for use of a discount program. (2) "Health care provider" means a health care provider as defined in Section 78B-3-403 who: (a) is practicing within the scope of the provider's license; and (b) has agreed either directly or indirectly, by contract or any other arrangement with a
44 45 46 47 48 49 50 51	 For purposes of this chapter: (1) "Fee" means any periodic charge for use of a discount program. (2) "Health care provider" means a health care provider as defined in Section 78B-3-403 who: (a) is practicing within the scope of the provider's license; and (b) has agreed either directly or indirectly, by contract or any other arrangement with a health discount program operator, to provide a discount to enrollees of a health discount
44 45 46 47 48 49 50 51 52	 For purposes of this chapter: (1) "Fee" means any periodic charge for use of a discount program. (2) "Health care provider" means a health care provider as defined in Section 78B-3-403 who: (a) is practicing within the scope of the provider's license; and (b) has agreed either directly or indirectly, by contract or any other arrangement with a health discount program operator, to provide a discount to enrollees of a health discount program.
44 45 46 47 48 49 50 51 52 53	 For purposes of this chapter: (1) "Fee" means any periodic charge for use of a discount program. (2) "Health care provider" means a health care provider as defined in Section 78B-3-403 who: (a) is practicing within the scope of the provider's license; and (b) has agreed either directly or indirectly, by contract or any other arrangement with a health discount program operator, to provide a discount to enrollees of a health discount program. (3) (a) "Health discount program" means a business arrangement or contract in which a
44 45 46 47 48 49 50 51 52 53 54	 For purposes of this chapter: (1) "Fee" means any periodic charge for use of a discount program. (2) "Health care provider" means a health care provider as defined in Section 78B-3-403 who: (a) is practicing within the scope of the provider's license; and (b) has agreed either directly or indirectly, by contract or any other arrangement with a health discount program operator, to provide a discount to enrollees of a health discount program. (3) (a) "Health discount program" means a business arrangement or contract in which a person pays fees, dues, charges, or other consideration in exchange for a program that provides access to health care providers who agree to provide a discount for health care services. (b) "Health discount program" does not include a program that does not charge a
44 45 46 47 48 49 50 51 52 53 54 55	 For purposes of this chapter: (1) "Fee" means any periodic charge for use of a discount program. (2) "Health care provider" means a health care provider as defined in Section 78B-3-403 who: (a) is practicing within the scope of the provider's license; and (b) has agreed either directly or indirectly, by contract or any other arrangement with a health discount program operator, to provide a discount to enrollees of a health discount program. (3) (a) "Health discount program" means a business arrangement or contract in which a person pays fees, dues, charges, or other consideration in exchange for a program that provides access to health care providers who agree to provide a discount for health care services.
44 45 46 47 48 49 50 51 52 53 54 55 56	 For purposes of this chapter: (1) "Fee" means any periodic charge for use of a discount program. (2) "Health care provider" means a health care provider as defined in Section 78B-3-403 who: (a) is practicing within the scope of the provider's license; and (b) has agreed either directly or indirectly, by contract or any other arrangement with a health discount program operator, to provide a discount to enrollees of a health discount program. (3) (a) "Health discount program" means a business arrangement or contract in which a person pays fees, dues, charges, or other consideration in exchange for a program that provides access to health care providers who agree to provide a discount for health care services. (b) "Health discount program" does not include a program that does not charge a

59	(4) "Health discount program marketer" means a person, including a private label
60	entity, that markets, promotes, sells, or distributes a health discount program but does not
61	operate a health discount program.
62	(5) "Health discount program operator" means a person that $\hat{H} \rightarrow [\frac{1}{2} \text{ operates}]$ provides $\leftarrow \hat{H}$
62a	<u>a health discount</u>
63	<u>program</u> Ĥ→ [.
64	[(4)] (6) "Operates a health discount program" [or "health discount program operator"]
65	means to[:] provide a health discount program by entering into a contract or agreement, either
66	directly or indirectly, with a person in the state that agrees to provide discounts to enrolles of
67	t he health discount program] by entering into a contract or agreement, directly or indirectly,
67a	with a person or persons in this state who agree to provide discounts for health care services to
67b	enrollees of the health discount program $\hat{S} \rightarrow and$ determines the charge to members $\leftarrow \hat{S} \leftarrow \hat{H}$.
68	[(a) enter into a contract or agreement either directly or indirectly with a health care
69	provider in this state which the health care provider agrees to provide discounts to enrollees of
70	the health discount program;]
71	[(b) enter into a contract or agreement either directly or indirectly with a person in this
72	state to provide access to more than one health care provider who has agreed to provide
73	discounts for medical services to enrollees of the health discount program;]
74	[(c) sell or distribute a health discount program in this state; or]
75	[(d) place your name on and market or promote a health discount program in this state.]
76	[(5)] (7) "Value-added benefit" means a discount offering with no additional charge
77	made by a health insurer or health maintenance organization that is licensed under this title, in
78	connection with existing contracts with the health insurer or health maintenance organization.
79	Section 2. Section 31A-8a-103 is amended to read:
80	31A-8a-103. Scope and purposes.
81	(1) A person shall comply with the provisions of this chapter if the person operates a
82	health discount program in this state.
83	(2) Notwithstanding any provision in this title, a person who only operates or markets a
84	health discount program is exempt from:
85	(a) Section 31A-4-113;
86	(b) Section 31A-4-113.5;
87	(c) Chapter 6a, Service Contracts;
88	(d) Chapter 7, Nonprofit Health Service Insurance Corporations;
89	(e) Section 31A-8-209;

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90	(f) Section 31A-8-211;
91	(g) Section 31A-8-214;
92	(h) Chapters 9 through 12;
93	(i) Chapters 17 and 18;
94	(j) Chapter 19a, Utah Rate Regulation Act;
95	(k) Sections 31A-23a-103 and 31A-23a-104;
96	(l) Chapters 25 and 26;
97	(m) Chapters 28 and 29; and
98	(n) Chapters 35 through 38.
99	(3) A person licensed under this title as an accident and health insurer or health
100	maintenance organization:
101	(a) is not required to obtain a license as required by Section 31A-8a-201 to operate a
102	health discount program; and
103	(b) is required to comply with all other provisions of this chapter.
104	(4) The purposes of this chapter include:
105	(a) full disclosure in the sale of health discount programs;
106	(b) reasonable regulation of the marketing and disclosure practices of health discount
107	program operators; and
108	(c) licensing standards for health discount programs.
109	(5) Nothing in this chapter prohibits a health discount program operator from
110	marketing a health discount program operator's own services without a health discount program
111	marketer license.
112	Section 3. Section 31A-8a-201 is amended to read:
113	31A-8a-201. License required.
114	(1) Except as provided in Subsection 31A-8a-103(3), prior to operating or marketing a
115	health discount program, a person shall:
116	(a) be authorized to transact business in this state; and
117	(b) be licensed by the commissioner.
118	(2) (a) An application for licensure under this chapter shall be filed with the
119	commissioner on a form prescribed by the commissioner.
120	(b) The application shall be sworn to by an officer or authorized representative of the

121	health discount program and shall include:
122	(i) articles of incorporation with bylaws or other enabling documents that establish the
123	organizational structure;
124	(ii) information required by the commissioner by administrative rule which the
125	commissioner determines is necessary to:
126	(A) identify and locate principals, operators, and marketers involved with the health
127	discount program; and
128	(B) protect the interests of enrollees of health discount programs, health care providers,
129	and consumers;
130	(iii) biographical information, and when requested by the commissioner, a criminal
131	background check, under the provisions of Subsection 31A-23a-105(3);
132	(iv) the disclosures required in Section 31A-8a-203; and
133	(v) the fee established in accordance with Section 31A-3-103.
134	Section 4. Section 31A-8a-202 is amended to read:
135	31A-8a-202. Commissioner to issue license Renewals.
136	(1) The commissioner may issue a license to a person:
137	(a) who files an application and pays the fee in accordance with Section 31A-8a-201;
138	and
139	(b) who the commissioner determines is in compliance with this chapter.
140	(2) (a) A license issued under this chapter is valid until the immediately following
141	December 31 and may be renewed in accordance with Subsection (2)(b).
142	(b) A license may be renewed if:
143	(i) the commissioner finds that the person operating the health discount program is in
144	compliance with this chapter;
145	(ii) the [operator of the health discount program] health discount program operator or
146	health discount program marketer submits the appropriate renewal application and pays any
147	applicable fees for renewal; and
148	(iii) [the operator of] the health discount program certifies that the information in the
149	application for renewal is accurate.
150	Section 5. Section 31A-8a-202.5 is enacted to read:
151	<u>31A-8a-202.5.</u> Reporting of administrative actions and criminal prosecution.

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152	(1) A health discount program operator or health discount program marketer shall
152	report to the commissioner any administrative action or criminal prosecution brought against
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	the health discount program operator, health discount program marketer, or an owner, officer,
155	or principal of the health discount program operator or health discount program marketer, other
156	than an administrative action brought by the department.
157	(2) The health discount program operator or health discount program marketer shall
158	file the report described in Subsection (1):
159	(a) at the time the health discount program operator or health discount program
160	marketer files an application for licensure or renewal; and
161	(b) (i) for an administrative action that occurs on or after the day on which the health
162	discount program operator or health discount program marketer files an application for
163	licensure or renewal, within 30 days after the day on which the final disposition of the
164	administrative action is issued; or
165	(ii) for a criminal prosecution, within 30 days after the health discount program
166	operator's or health discount program marketer's initial appearance before a court.
167	(3) The report described in Subsection (1) shall include:
168	(a) a copy of the complaint or other relevant legal documents related to the
169	administrative action or criminal prosecution; and
170	(b) an explanation or other information that the health discount program operator or
171	health discount program marketer desires to submit in relation to the action or charge.
172	Section 6. Section 31A-8a-205 is amended to read:
173	31A-8a-205. Disclosure of health discount program terms.
174	(1) (a) Health discount program operators shall provide to each purchaser or potential
175	purchaser a copy of the terms of the discount program at the time of purchase.
176	(b) For purposes of this section "purchaser" means the employer in an employer
177	sponsored plan, or an individual purchasing outside of an employer relationship.
178	(2) The disclosure required by Subsection (1) should be clear and thorough and should
179	include any administrative or monthly fees, trial periods, procedures for securing discounts,
180	cancellation procedures and corresponding refund requests, and procedures for filing disputes.
181	(3) (a) A contract shall be signed by the purchaser acknowledging the terms before any
182	fees are collected and shall include notice of the purchaser's $\hat{S} \rightarrow [10-day] 30-day \leftarrow \hat{S}$ [recision]
182a	Ŝ→ [<u>rescission</u>] <u>free look</u> ←Ŝ rights.

183	(b) For purposes of this Subsection (3) and Section 46-4-201, when a contract is
184	entered into via telephone, facsimile transmission or the Internet, the following is considered a
185	signing of the contract:
186	(i) if via the Internet, the online application form is completed and sent by the
187	purchaser to the health discount program operator;
188	(ii) if via facsimile transmission, the application is completed, signed and faxed to the
189	health discount program operator; or
190	(iii) if via telephone, the script used by the health discount program operator to solicit
191	the purchaser shall include any limitations or exclusions to the program, and the contract shall
192	be provided to the purchaser via facsimile, mail, or email within 10 working days of the
193	purchaser consenting to enrolling over the telephone.
194	Section 7. Section 31A-8a-205.5 is enacted to read:
195	<u>31A-8a-205.5.</u> Ŝ→ [Rescission] <u>Free look</u> ←Ŝ right.
196	(1) Except as provided in Subsection (2), a person that purchases a health discount
197	program may, with or without cause, within $\hat{S} \rightarrow [\underline{10}] \underline{30} \leftarrow \hat{S}$ days after the day on which the
197a	purchase
198	contract is signed, cancel the contract without payment, damages, penalty, or liability of any
199	kind by giving written notice of cancellation to the other party to the contract.
200	(2) A person may not exercise the right of cancellation described in Subsection (1) if
201	the person has used the services of the health discount program under the contract.
202	(3) If a person cancels a contract under Subsection (1), the other party to the contract
203	shall refund all money and other consideration paid in relation to the health discount program,
203a	Ŝ→ <u>less a maximum of \$25 of</u> ←Ŝ
204	$\hat{S} \rightarrow [\underline{including}] \leftarrow \hat{S}$ any enrollment charge, regardless of whether the enrollment charge was
204a	designated
205	as nonrefundable.

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