

Amendments to Senate Bill 74

- Section 1: No change
- Section 2: No change
- Section 3: Amend RSA 402:81 I. (a) (1), so that the sentence reads:

(1) The original policy to be cancelled; or

- Section 4: Amend RSA 402-C:36, to read as follows:

Subject to RSA 402-C:34, the amount recoverable by the liquidator from a reinsurer shall not be reduced as a result of delinquency proceedings regardless of whether the reinsurance contract provides, in substance, that in the event of the insolvency of the ceding insurer, the reinsurance shall be payable by the assuming insurer on the basis of the claims allowed against the ceding insurer in the insolvency proceedings, under contract or contracts reinsured without diminution because of the insolvency of the ceding insurer. Such payments shall be made directly to the ceding insurer or to its domiciliary liquidator or receiver except:

- Section 5: Amend RSA 402-C:44, to read as follows:

The order of distribution of claims from the insurer's estate shall be stated in this section. The first \$50 of the amount allowed on each claim in the classes under paragraphs II, V, and VI except claims of the guaranty associations as defined in RSA 404-B, 404-D, 404-H, and 408-B shall be deducted from the claim. Claims may not be cumulated by assignment to avoid application of the \$50 deductible provision. Subject to the \$50 deductible provision, every claim in each class shall be paid in full or adequate funds retained for the payment before the members of the next class receive any payment. No subclasses shall be established within any class.

- Section 6: No change
- Section 7: No change
- Section 8: No change
- Section 9: Amend RSA 415-A:4-a I.(b)(1), to read as follows:

(1) Developed with input from appropriate [actively participating] practitioners [in the licensed entity's service area] with professional knowledge or clinical expertise in the area being reviewed ;

- Section 10: No change
- Section 11: Amend RSA 420-J:5 I(b), to read as follows:

(b) For medical necessity appeals, at least one [The] person reviewing the appeal [grievance on a first or second level appeal have appropriate medical and professional expertise and credentialing to competently render a determination on appeal] is a practitioner in the same or similar specialty who typically treats the medical condition, performs the procedure or provides the treatment at issue in the appeal. A practitioner is considered of the same specialty if he or she has similar credentials and licensure as those who typically treat the condition or health problem in question in the appeal. A practitioner is considered of a

similar specialty if he or she has experience treating the same problems as those in question in the appeal, in addition to expertise treating similar complications of those problems ;

Section 12: Amend RSA 420-J:5, II(a), to read as follows:

(a) The review shall be conducted by or in consultation with a health care professional [who has appropriate training and expertise in the field of medicine] **in the same or similar specialty who typically treats the medical condition, performs the procedure or provides the treatment at issue in the appeal. A practitioner is considered of the same specialty if he or she has similar credentials and licensure as those who typically treat the condition or health problem in question in the appeal. A practitioner is considered or a similar specialty if he or she has experience treating the same problems as those in question in the appeal, in addition to expertise treating similar complications of those problems ;**

- Section 13: No change
- Section 14: No change
- Section 15: No change
- Section 16: No change
- Section 17: No change
- Section 18: No change
- Section 19: No change
- Section 20: No change

(legis05sb74amendments020305)