CHAPTER 45-06-02
INTERCARRIER HEALTH INSURANCE POOL

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45-06-02-01. Definitions.

Unless otherwise defined, or made inappropriate by context, all words used in this chapter shall have the meanings given them under North Dakota Century Code chapter 26.1-08.

History: Effective February 1, 1983.
General Authority: NDCC 26.1-08-03
Law Implemented: NDCC 26.1-08-01, 26.1-08-02, 26.1-08-03, 26.1-08-04, 26.1-08-06, 26.1-08-07, 26.1-08-08, 26.1-08-09, 26.1-08-10, 26.1-08-11, 26.1-08-12

45-06-02-02. Assessment of insurers for losses and expenses of the comprehensive health association and comprehensive health insurance plan.

1. Insurers which are members of the association will be assessed annually for their proportionate share of administrative expenses of the association and the amount by which operating, administrative, and claims expenses of the association plan exceed the association plan premium in each fiscal year of the association.

2. The association shall notify each insurer member of the association of the insurer's total annual premium volume for accident and sickness insurance policies received from or on behalf of state residents for the calendar year immediately preceding the assessment, as shown on page 46, column 3, line 25 of that insurer's annual statement if an accident and health insurance company, or the figures shown on page 14, column 3, lines 13, 15.1, 15.2, 15.3, 15.4, 15.5, and 15.6 if a property and casualty company, for the appropriate year required to be filed with the commissioner. That figure will be used in determining an insurer's proportionate share of association expenses and association plan losses under subsection 4 of North Dakota Century Code section 26.1-08-09, unless within thirty days after receiving notification the insurer objects in writing to the association and the commissioner. The objection shall set forth the following information:

   a. The reasons why the figure shown on page 46, column 3, line 25 of its annual statement if an accident and health insurance company, or the figures shown on page 14, column 3, lines 13, 15.1, 15.2, 15.3, 15.4, 15.5, and 15.6 of its annual statement if a property and casualty company, should not be used in determining that insurer's proportionate share of association losses; and

   b. A certification by that insurer's chief actuarial officer of the correct total annual premium volume for accident and sickness policies received from or on behalf of state residents.

3. The commissioner, within thirty days of receipt of the reason for the objection, shall notify the insurer of the acceptance or rejection of the objection to the figure used to determine the insurer members' assessment.

4. If the objection is accepted by the commissioner, an insurer members' assessment will be determined on that basis. If the objection is not accepted, an insurer members' assessment will be set on the basis established by the commissioner.

History: Effective February 1, 1983.
General Authority: NDCC 26.1-08-03
Law Implemented: NDCC 26.1-08-01, 26.1-08-02, 26.1-08-03, 26.1-08-04, 26.1-08-06, 26.1-08-07, 26.1-08-08, 26.1-08-09, 26.1-08-10, 26.1-08-11, 26.1-08-12

45-06-02-03. Penalty.

If an insurer fails to pay an assessment, in the time prescribed, subject to the hearing requirements of North Dakota Century Code chapter 28-32, its membership in the association will cease, and it shall not be permitted to write accident and sickness insurance policies as defined in North Dakota Century Code chapter 26.1-08 in this state.

History: Effective February 1, 1983.
General Authority: NDCC 26.1-08-03
Law Implemented: NDCC 26.1-08-03(4)

45-06-02-04. Coordination of benefits with other accident and sickness insurance policies.

The contracts issued by the comprehensive health association of North Dakota for accident and sickness insurance coverage must in all cases be considered secondary to any other accident and sickness insurance policy the insured may have. Benefits to be paid by the comprehensive health association of North Dakota for a covered person on any individual claim may not exceed the difference in the amount between allowable covered expenses for that claim and any amounts covered by other accident and sickness insurance policies carried by the insured. For the purpose of this section, policy includes insurance certificates and other evidence of coverage.

History: Effective March 1, 1988.
General Authority: NDCC 26.1-04-08
Law Implemented: NDCC 26.1-04-03