

GENERAL ASSEMBLY OF NORTH CAROLINA
SESSION 2005

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HOUSE BILL 655

Short Title: Better Insurance/Annuity Disclosure.-AB

(Public)

Sponsors: Representative Holliman.

Referred to: Insurance.

March 16, 2005

A BILL TO BE ENTITLED

AN ACT TO REORGANIZE ARTICLE 60 OF CHAPTER 58 OF THE GENERAL STATUTES AND AMEND CURRENT DISCLOSURE REQUIREMENTS FOR SOLICITATION OF LIFE INSURANCE PRODUCTS AND ANNUITIES; REQUIRE INSURERS TO NOTIFY EMPLOYEES OF THE EXISTENCE OF EMPLOYER-OWNED LIFE INSURANCE POLICIES WITHIN THIRTY DAYS AFTER THE EFFECTIVE DATE OF COVERAGE; AND REQUIRE GROUP ANNUITY INSURERS TO ISSUE INDIVIDUAL CERTIFICATES OF COVERAGE TO EACH ANNUITANT.

The General Assembly of North Carolina enacts:

PART I. DISCLOSURES FOR ANNUITIES AND LIFE INSURANCE

SECTION 1. The title of Article 60 of Chapter 58 of the General Statutes reads as rewritten:

"Article 60.

~~Regulation of Life Insurance Solicitation.~~ Standards of Disclosure for Annuities and Life Insurance."

SECTION 1.1. Article 60 of Chapter 58 of the General Statutes is amended by designating G.S. 58-60-1 through G.S. 58-60-35 as:

"Part 1. Regulation of Life Insurance Solicitation."

SECTION 1.2. G.S. 58-60-1 reads as rewritten:

~~"§ 58-60-1. Purpose of Article. Short title; purpose.~~

(a) This Part may be cited as the "Life Insurance Disclosure Act".

(b) The purpose of this ~~Article- Part~~ is to require insurers to deliver to purchasers of life insurance, information which will improve the buyer's ability to select the most appropriate plan of life insurance for ~~their-~~ the buyer's needs, improve the buyer's understanding of the basic features of the policy which has been purchased or which is under consideration and to improve the ability of the buyer to evaluate the relative costs of similar plans of life insurance.

1 This ~~Article- Part~~ does not prohibit an insurer ~~to use~~ from using additional material
2 ~~which- that~~ is not in violation of Articles 1 through 64 of this Chapter nor any other
3 statute or regulation."

4 **SECTION 1.3.** G.S. 58-60-5 reads as rewritten:

5 "**§ 58-60-5. ~~Scope of Article;~~ Scope; exemptions.**

6 (a) Except as otherwise provided in this ~~Article- Part~~, this ~~Article- Part~~ applies to
7 any solicitation, negotiation or procurement of life insurance occurring within this State.
8 This ~~Article- Part~~ applies to any issuer of a life insurance contract, including fraternal
9 benefit societies.

10 (b) Unless otherwise specifically included, this ~~Article- Part~~ does not apply to:

11 (1) ~~Annuities;~~ Individual group annuity contracts.

12 (2) Credit life ~~insurance;~~ insurance.

13 (3) Group life ~~insurance;~~ insurance (except for disclosures relating to
14 preneed funeral contracts or prearrangements; these disclosure
15 requirements shall extend to the issuance or delivery of certificates as
16 well as to the master policy).

17 (4) Life insurance policies issued in connection with pension and welfare
18 plans as defined by and that are subject to the federal Employee
19 Retirement Income Security Act of 1974 (~~ERISA~~); (ERISA).

20 (5) Variable life insurance under which the death benefits and cash values
21 vary in accordance with unit values of investments held in a separate
22 account.

23 (c) The policy summary in this ~~Article- Part~~ is not required for policies that are
24 sold subject to rules adopted by the Commissioner for life insurance illustrations."

25 **SECTION 1.4.** G.S. 58-60-10(7)k. reads as rewritten:

26 "k. The date on which the Policy Summary is prepared.

27 The Policy Summary must consist of a separate document.
28 All information required to be disclosed must be set out in such
29 a manner as to not minimize or render any portion thereof
30 obscure. Any amounts which remain level for two or more
31 years of the policy may be represented by a single number if it
32 is clearly indicated what amounts are applicable for each policy
33 year. Amounts in subparagraph e of this paragraph shall be
34 listed in total, not on a per thousand nor per unit basis. If more
35 than one insured is covered under one policy or rider,
36 guaranteed death benefits shall be displayed separately for each
37 insured or for each class of insureds if death benefits do not
38 differ within the class. Zero amounts shall be displayed as zero
39 and shall not be displayed as a blank space. If the insurer makes
40 a material revision in the terms and conditions under which it
41 will limit its right to change any nonguaranteed factor, it shall,
42 no later than the first policy anniversary following the revision,
43 advise each affected policy owner residing in this State."

1 **SECTION 1.5.** Article 60 of Chapter 58 of the General Statutes is amended
2 by adding a new Part to read:

3 "Part 2. Regulation of Home Service Life Insurance Solicitation.

4 "§ 58-60-40. Title and reference.

5 This Part may be cited as the "Home Service Disclosure Act".

6 "§ 58-60-45. Purpose.

7 The purpose of this Part is to establish standards that ensure that meaningful
8 information is provided to the purchasers of insurance policies distributed through the
9 home service distribution system.

10 "§ 58-60-50. Definitions.

11 As used in this Part:

12 (1) "Home service distribution system" means a system in which
13 insurance products are marketed, sold, or serviced by agents in person
14 in the home or business of the insured, owner, or premium payor in
15 assigned territories and may be identified as "debits". The policies are
16 issued on a monthly or more frequent premium payment basis and
17 agents are charged with the responsibilities of servicing the debit,
18 which may include the collection of premium payments in the home or
19 designated location on a monthly or more frequent basis, along with
20 other services normally rendered.

21 (2) "Small face amount life insurance policy" means an insurance policy
22 or certificate with a face amount of fifteen thousand dollars (\$15,000)
23 or less.

24 "§ 58-60-55. General disclosure requirements.

25 (a) In accordance with the disclosure simplification standards set forth in
26 G.S. 58-60-80 and at the time an insurance policy is issued through the home service
27 distribution system, the insurer shall disclose:

28 (1) Whether the policyholder is allowed to change the method of premium
29 payment and any conditions for that change.

30 (2) Whether or not at a subsequent date a policyholder may combine
31 multiple policies from the same insurance company, its affiliates, and
32 its subsidiaries into one policy in order to provide like or enhanced
33 coverage at a comparable or reduced premium to eliminate duplicate
34 administrative costs associated with each policy and, if the option is
35 available:

36 a. Whether a policyholder will be subject to underwriting when
37 combining multiple policies into one policy; and

38 b. Whether a policyholder will be subject to a new contestable
39 period, waiting periods, etc., when combining multiple policies
40 into one policy.

41 (b) In accordance with the disclosure simplification standards set forth in
42 G.S. 58-60-80, an insurer issuing a small face amount life insurance policy through the
43 home service distribution system shall provide the current disclosure included in
44 Appendix A of the NAIC's Home Service Disclosure Model if at any point in time over

1 the term of the policy the cumulative premiums paid may exceed the face amount of the
2 policy at that point in time. The required disclosure shall be provided to the policy
3 owner or certificate holder no later than at the time the policy or certificate is delivered.
4 The disclosure shall not be attached to the policy but may be delivered with the policy.

5 If, for a particular policy form, the cumulative premiums may exceed the face for
6 some demographic or benefit combination but not for all combinations, the insurer may
7 choose to either:

8 (1) Provide the disclosure only in those circumstances where the
9 premiums may exceed the face amount; or

10 (2) Provide the disclosure for all demographic and benefit combinations.

11 Cumulative premiums shall include premiums paid for riders. However, the face
12 amount shall not include the benefit attributable to the riders.

13 If an illustration has been provided that satisfies the requirements of Title 11,
14 Chapter 4, Section .0500 of the North Carolina Administrative Code, the disclosure
15 requirements of subsection (b) of this section are deemed to have been met.

16 **"§ 58-60-60. Disclosure of payment methods.**

17 In accordance with the disclosure simplification standards set forth in G.S. 58-60-80,
18 at the time an insurance policy is issued through the home service distribution system,
19 the insurer shall disclose:

20 (1) What premium savings may be realized by a different method or less
21 frequent mode of premium payment.

22 (2) That premiums are still due and payable by the person responsible for
23 premium payments even when an agent does not collect the premiums.

24 (3) The mailing address for payment of premiums to the company.

25 (4) That the consumer is entitled to receive a receipt for premium
26 payments when premium payments are made in cash or in person.

27 **"§ 58-60-65. Evidence of payment.**

28 For every premium collected on a policy of life or disability insurance marketed,
29 sold, or serviced through the home service distribution system in this State, the agent,
30 solicitor, or broker, or any employee acting on the agent, solicitor, or broker's behalf,
31 collecting or receiving the premium in person shall:

32 (1) Maintain and furnish to the policyholder a receipt indicating payment
33 of premiums, which shall provide the payor with clearly
34 understandable, written evidence of payment at the time the premium
35 is collected. At a minimum it shall clearly show:

36 a. The name of the payor.

37 b. The name of the insured under each policy covered by the
38 premium.

39 c. The amount paid.

40 d. The date paid.

41 e. The date paid-to status of the policy.

42 f. The policy number.

43 g. The face amount and type of policy for which the payment will
44 be credited.

- 1 h. The signature of the agent.
2 i. The agent's printed name and unique identification number.
3 j. The name, complete address, and phone number of the insurer.
4 (2) Remit to the insurer's home office or applicable district office, or
5 deposit in a fiduciary account, the premium collected on behalf of the
6 policyholder within 10 days of receipt from the premium payor or
7 policy owner. In the event that the insurer utilizes an accounting
8 system based on a monthly list bill, all premiums collected shall be
9 credited from the date of collection. The premium shall be fully
10 applied to that particular account.

11 **"§ 58-60-70. Proof of policy delivery.**

12 If an insurance policy marketed, sold, or serviced through the home service
13 distribution system is delivered by an agent, solicitor, or broker, or an employee acting
14 on the agent, solicitor, or broker's behalf, a receipt shall be signed by the purchaser and
15 the agent acknowledging delivery to the purchaser of the policy or contract and the
16 disclosures required by this Part. The receipt shall contain the name of the purchaser,
17 the policy or contract number, the amount of the initial premium payment, and the date
18 the delivery was completed. A policy shall be deemed to have been received six months
19 after the date of issuance if the insured has paid premiums pursuant to the contract. All
20 delivery receipts required by this section shall be retained by the company for not less
21 than three years following delivery and shall be available for inspection upon request of
22 the Commissioner.

23 **"§ 58-60-75. Company duties.**

24 Each insurer engaged in the home service distribution system in this State shall
25 make available to the Commissioner for review:

- 26 (1) Established written procedures to audit agencies engaged in the home
27 service system of distribution of policies in this State; and
28 (2) Proof of audits conducted periodically that reasonably ensure that the
29 premium payor's records accurately reflect the premium due date and
30 premium paid-to status of the policy or policies purchased.

31 **"§ 58-60-80. Minimum disclosure language standards.**

32 All disclosure forms shall comply with the readability standards in Article 38 of this
33 Chapter. It is presumed the disclosure form in Appendix A of the NAIC's Home Service
34 Disclosure Model Act complies with this Part."

35 **SECTION 1.6.** Article 60 of Chapter 58 of the General Statutes is amended
36 by adding a new Part to read:

37 "Part 3. Regulation of Small Face Amount Life Insurance Solicitation.

38 **"§ 58-60-90. Title and reference.**

39 This Part may be cited as the "Small Face Amount Life Insurance Disclosure Act".

40 **"§ 58-60-95. Purpose; intent; and scope.**

41 (a) The purpose of this Part is to establish standards that ensure meaningful
42 information is provided to the purchasers of small face amount policies.

43 (b) This Part applies to any life insurance policy or certificate with an initial face
44 amount of fifteen thousand dollars (\$15,000) or less.

1 (c) This Part does not apply to:

2 (1) Variable life insurance.

3 (2) Individual and group annuity contracts.

4 (3) Credit life insurance.

5 (4) Group or individual policies of life insurance issued to members of an
6 employer group or other permitted group where:

7 a. Every plan of coverage was selected by the employer or other
8 group representative;

9 b. Some portion of the premium is paid by the group or through
10 payroll deduction; and

11 c. Group underwriting or simplified underwriting is used.

12 (5) Policies and certificates where an illustration has been provided
13 pursuant to the requirements of Title 11, Chapter 4, Section .0500 of
14 the North Carolina Administrative Code.

15 **"§ 58-60-100. Disclosure requirements.**

16 (a) An insurer issuing a small face amount policy shall provide the current
17 disclosure included in Appendix A of the NAIC Disclosure for Small Face Amount Life
18 Insurance Policies Model Act if at any point in time over the term of the policy the
19 cumulative premiums paid may exceed the face amount of the policy at that point in
20 time. The required disclosure shall be provided to the policy owner or certificate holder
21 no later than at the time the policy or certificate is delivered. The disclosure shall not be
22 attached to the policy but may be delivered with the policy.

23 (b) If, for a particular policy form, the cumulative premiums may exceed the face
24 amount for some demographic or benefit combination but not for all combinations, the
25 insurer may choose to either:

26 (1) Provide the disclosure only in those circumstances where the
27 premiums may exceed the face amount; or

28 (2) Provide the disclosure for all demographic and benefit combinations.

29 (c) Cumulative premiums shall include premiums paid for riders. However, the
30 face amount shall not include the benefits attributable to the riders.

31 **"§ 58-60-105. Insurer duties.**

32 The insurer and its producers shall have a duty to provide information to
33 policyholders or certificate holders that ask questions about the disclosure statement."

34 **SECTION 1.7.** Article 60 of Chapter 58 of the General Statutes is amended
35 by adding a new Part to read:

36 "Part 4. Regulation of Annuity Solicitation.

37 **"§ 58-60-120. Title and reference.**

38 This Part may be cited as the "Annuity Disclosure Act".

39 **"§ 58-60-125. Purpose; intent; scope.**

40 (a) The purpose of this Part is to provide standards for the disclosure of certain
41 minimum information about annuity contracts to protect consumers and foster consumer
42 education. This Part specifies the minimum information that must be disclosed and the
43 method for disclosing it in connection with the sale of annuity contracts. The goal of

1 this Part is to ensure that purchasers of annuity contracts understand certain basic
2 features of annuity contracts.

3 (b) This Part applies to all group and individual annuity contracts and certificates
4 except:

5 (1) Registered or nonregistered variable annuities or other registered
6 products.

7 (2) Immediate and deferred annuities that contain no nonguaranteed
8 elements.

9 (3) Annuities used to fund any of the following:

10 a. An employee pension plan, which is covered by the Employee
11 Retirement Income Security Act (ERISA).

12 b. A plan described by section 401(a), 401(k), or 403(b) of the
13 Internal Revenue Code, where the plan, for purposes of ERISA,
14 is established or maintained by an employer.

15 c. A governmental or church plan defined in section 414 or a
16 deferred compensation plan of a state or local government or a
17 tax exempt organization under section 457 of the Internal
18 Revenue Code.

19 d. A nonqualified deferred compensation arrangement established
20 or maintained by an employer or plan sponsor.

21 e. Structured settlement annuities.

22 f. Charitable gift annuities.

23 g. Funding agreements.

24 (c) This Part shall apply to annuities used to fund a plan or arrangement that is
25 funded solely by contributions an employee elects to make, whether on a pre-tax or
26 after-tax basis, and where the insurance company has been notified that plan
27 participants may choose from among two or more fixed annuity providers and there is a
28 direct solicitation of an individual employee by a producer for the purchase of an
29 annuity contract. As used in this subsection, direct solicitation shall not include any
30 meeting held by a producer solely for the purpose of educating or enrolling employees
31 in the plan or arrangement.

32 **"§ 58-60-130. Definitions.**

33 As used in this Part:

34 (1) "Annuity buyer's guide" or "buyer's guide" means the current NAIC
35 Model Buyer's Guide to Fixed Deferred Annuities, including any
36 appendix thereto.

37 (2) "Charitable gift annuity" means a transfer of cash or other property by
38 a donor to a charitable organization in return for an annuity payable
39 over one or two lives, under which the actuarial value of the annuity is
40 less than the value of the cash or other property transferred and the
41 difference in value constitutes a charitable deduction for federal tax
42 purposes but does not include a charitable remainder trust or a
43 charitable lead trust or other similar arrangement where the charitable

1 organization does not issue an annuity and incur a financial obligation
2 to guarantee annuity payments.

3 (3) "Contract owner" means the owner named in the annuity contract or
4 certificate holder in the case of a group annuity contract.

5 (4) "Determinable elements" means elements that are derived from
6 processes or methods that are guaranteed at issue and not subject to
7 company discretion but where the values or amounts cannot be
8 determined until some point after issue. These elements include the
9 premiums, credited interest rates (including any bonus), benefits,
10 values, noninterest-based credits, charges, or elements of formulas
11 used to determine any of these. These elements may be described as
12 guaranteed but not determined at issue. An element is considered
13 determinable if it was calculated from underlying determinable
14 elements only or from both determinable and guaranteed elements.

15 (5) "Disclosure document" means the document the contents of which are
16 described in G.S. 58-60-140.

17 (6) "Funding agreement" means an agreement for an insurer to accept and
18 accumulate funds and to make one or more payments at future dates in
19 amounts that are not based on mortality or morbidity contingencies.

20 (7) "Generic name" means a short title descriptive of the annuity contract
21 being applied for or illustrated such as "single premium deferred
22 annuity".

23 (8) "Guaranteed elements" means the premiums, credited interest rates,
24 including any bonus, benefits, values, noninterest-based credits,
25 charges, or elements of formulas used to determine any of these, that
26 are guaranteed and determined at issue. An element is considered
27 guaranteed if all of the underlying elements that go into its calculation
28 are guaranteed.

29 (9) "Nonguaranteed elements" means the premiums, credited interest rates
30 (including any bonus), benefits, values, noninterest-based credits,
31 charges, or elements of formulas used to determine any of these that
32 are subject to company discretion and are not guaranteed at issue. An
33 element is considered nonguaranteed if any of the underlying
34 nonguaranteed elements are used in its calculation.

35 (10) "Structured settlement annuity" means a "qualified funding asset" as
36 defined in section 130(d) of the Internal Revenue Code or an annuity
37 that would be a qualified funding asset under section 130(d) but for the
38 fact that it is not owned by an assignee under a qualified assignment.

39 **§ 58-60-135. Standards for the disclosure document and buyer's guide.**

40 (a) Where the application for an annuity contract is taken in a face-to-face
41 meeting, the applicant, at or before the time of application, shall be given both the
42 disclosure document described in G.S. 58-60-140 and a copy of the buyer's guide.

43 (b) Where the application for an annuity contract is taken by means other than in
44 a face-to-face meeting, the applicant shall be sent both the disclosure document and the

1 buyer's guide no later than five business days after the completed application is received
2 by the insurer.

3 (1) With respect to an application received as a result of a direct
4 solicitation through the mail:

5 a. Providing a buyer's guide in a mailing inviting prospective
6 applicants to apply for an annuity contract shall be deemed to
7 satisfy the requirement that the buyer's guide be provided no
8 later than five business days after receipt of the application.

9 b. Providing a disclosure document in a mailing inviting a
10 prospective applicant to apply for an annuity contract shall be
11 deemed to satisfy the requirement that the disclosure document
12 be provided no later than five business days after receipt of the
13 application.

14 (2) With respect to an application received via the Internet:

15 a. Taking reasonable steps to make the buyer's guide available for
16 viewing and printing on the insurer's Web site shall be deemed
17 to satisfy the requirement that the buyer's guide be provided no
18 later than five business days after receipt of the application.

19 b. Taking reasonable steps to make the disclosure document
20 available for viewing and printing on the insurer's Web site
21 shall be deemed to satisfy the requirement that the disclosure
22 document be provided no later than five business days after
23 receipt of the application.

24 (3) A solicitation for an annuity contract provided in other than a
25 face-to-face meeting shall include a statement that the proposed
26 applicant may contact the Department for a free annuity buyer's guide.
27 In lieu of the foregoing statement, an insurer may include a statement
28 that the prospective applicant may contact the insurer for a free annuity
29 buyer's guide.

30 (c) Where the buyer's guide and disclosure document are not provided at or
31 before the time of application, a free-look period of no less than 15 days shall be
32 provided for the applicant to return the annuity contract without penalty. This free-look
33 period shall run concurrently with any other free-look period provided under State law
34 or regulation.

35 **"§ 58-60-140. Contents of disclosure document.**

36 At a minimum, all of the following information shall be included in the disclosure
37 document required under this Part:

38 (1) The generic name of the contract, the company product name, if
39 different, and form number, and the fact that it is an annuity.

40 (2) The insurer's name and address.

41 (3) A description of the contract and its benefits, emphasizing its
42 long-term nature, including the following, if appropriate:

- 1 a. The guaranteed, nonguaranteed, and determinable elements of
- 2 the contract, and their limitations, if any, and an explanation of
- 3 how they operate.
- 4 b. An explanation of the initial crediting rate, specifying any
- 5 bonus or introductory portion, the duration of the rate, and the
- 6 fact that rates may change from time to time and are not
- 7 guaranteed.
- 8 c. Periodic income options both on a guaranteed and
- 9 nonguaranteed basis.
- 10 d. Any value reductions caused by withdrawals from or surrender
- 11 of the contract.
- 12 e. How values in the contract can be accessed.
- 13 f. The death benefit, if available, and how it will be calculated.
- 14 g. A summary of the federal tax status of the contract and any
- 15 penalties applicable on withdrawal of values from the contract.
- 16 h. The impact of any rider, such as a long-term care rider.
- 17 (4) The specific dollar amount or percentage charges and fees with an
- 18 explanation of how they apply.
- 19 (5) Information about the current guaranteed rate for new contracts that
- 20 contains a clear notice that the rate is subject to change.

21 Insurers shall define terms used in the disclosure statement in language that
 22 facilitates the understanding by a typical person within the segment of the public to
 23 which the disclosure statement is directed.

24 **"§ 58-60-145. Report to contract owners.**

25 For annuities in the payout period with changes in nonguaranteed elements and for
 26 the accumulation period of a deferred annuity, the insurer shall provide each contract
 27 owner with a report, at least annually, on the status of the contract that contains at least
 28 all of the following information:

- 29 (1) The beginning and end date of the current report period.
- 30 (2) The accumulation and cash-surrender value, if any, at the end of the
- 31 previous report period and at the end of the current report period.
- 32 (3) The total amounts, if any, that have been credited, charged to the
- 33 contract value, or paid during the current report period.
- 34 (4) The amount of outstanding loans, if any, as of the end of the current
- 35 report period."

36 **PART II. EMPLOYER-OWNED LIFE INSURANCE DISCLOSURE**

37 **SECTION 2. G.S. 58-58-75 reads as rewritten:**

38 **"§ 58-58-75. Insurable interest in life and physical ability of employee or agent.**

39 (a) An employer, whether a partnership, joint venture, business trust, mutual
 40 association, corporation, any other form of business organization, or one or more
 41 individuals, or any religious, educational, or charitable corporation, institution or body,
 42 has an insurable interest in and the right to insure the physical ability or the life, or both
 43 the physical ability and the life, of an employee for the benefit of such employer. Any
 44 principal shall have a life insurable interest in and the right to insure the physical ability

1 or the life, or both the physical ability and the life, of an agent for the benefit of such
2 principal.

3 (b) An employee described in subsection (a) of this section shall be insured for
4 the benefit of an employer described in subsection (a) of this section only if the
5 employee receives written notification from the insurer of the existence of the coverage.
6 The notice shall be provided to the employee within 30 days after the effective date of
7 the coverage and shall include a statement that the employer may maintain the life
8 insurance coverage on the employee even after employment is terminated.

9 (c) For non-key or nonmanagerial employees, the aggregate amount of coverage
10 shall be reasonably related to the benefits provided to the employees in the aggregate.

11 (d) With respect to employer-provided pension and welfare plans, the life
12 insurance coverage purchased to finance the plans may only cover the lives of those
13 employees and retirees who, at the time their lives were first insured under the plan,
14 either are participants, or would be eligible to participate, upon the satisfaction of age,
15 service, or similar eligibility criteria in the plan."

16 **PART III. GROUP ANNUITY CONTRACTS**

17 **SECTION 3.** G.S. 58-58-145 reads as rewritten:

18 **"§ 58-58-145. Group annuity contracts defined; ~~requirements~~requirements;**
19 **issuance of individual certificates.**

20 (a) Any policy or contract, except a joint, reversionary or survivorship annuity
21 contract, whereby annuities are payable to more than one person, is a group annuity
22 contract. The person, firm or corporation to whom or to which such contract is issued,
23 as herein provided, is the holder of the contract. The term "annuitant" means any person
24 to whom or which payments are made under the group annuity contract. No authorized
25 insurer shall deliver or issue for delivery in this State any group annuity contract except
26 upon a group of annuitants that conforms to the following: under a contract issued to an
27 employer, or to the trustee of a fund established by an employer or two or more
28 employers in the same industry or kind of business, the stipulated payments on which
29 shall be paid by the holder of such contract either wholly from the employer's funds or
30 funds contributed by him, or partly from such funds and partly from funds contributed
31 by the employees covered by such contract, and providing a plan of retirement annuities
32 under a plan which permits all of the employees of such employer or of any specified
33 class or classes thereof to become annuitants. Any such group of employees may
34 include retired employees, and may include officers and managers as employees, and
35 may include the employees of subsidiary or affiliated corporations of a corporation
36 employer, and may include the individual proprietors, partners and employees of
37 affiliated individuals and firms controlled by the holders through stock ownership,
38 contract or otherwise."

39 (b) The insurer of a group annuity contract shall issue to the policyholder, within
40 30 days of the effective date of the group annuity contract, an individual certificate for
41 delivery to each annuitant which:

42 (1) Identifies the annuity to which the annuitant is entitled.

43 (2) States the name of the person to whom the annuity is payable.

1 (3) Discloses all of the rights and obligations of the insurer, the
2 policyholder, the annuitant, and the persons to whom the annuity is
3 payable with respect to the group annuity contract.

4 G.S. 58-3-150 applies to the form of the individual certificate required by this
5 subsection.

6 (c) Each group annuity contract shall include a provision that the insurer will
7 issue to the policyholder within 30 days of the effective date of the contract, for delivery
8 to each annuitant, an individual certificate setting forth the information described in
9 subsection (b) of this section."

10 **PART IV. EXPLANATION OF HEADINGS AND EFFECTIVE DATE.**

11 **SECTION 4.** The headings to the parts of this act are a convenience to the
12 reader and are for reference only. The headings do not expand, limit, or define the text
13 of this act.

14 **SECTION 5.** This act becomes effective January 1, 2006, and applies to
15 policies or certificates issued or renewed on or after that date.