



1995 ASSEMBLY BILL 292

April 4, 1995 - Introduced by Representatives WASSERMAN, NOTESTEIN, MUSSER, KRUG, BALDWIN, BLACK, BOCK, BOYLE, GRONEMUS, GROBSCHMIDT, HANSON, KREUSER, LA FAVE, LINTON, MURAT, PLACHE, PLOMBON, R. POTTER, RILEY, ROBSON, RYBA, SPRINGER, TRAVIS, R. YOUNG, BALDUS, DUEHOLM and OURADA, cosponsored by Senators BURKE, C. POTTER, CLAUSING, MOEN, WINEKE and BUETTNER. Referred to Committee on Insurance, Securities and Corporate Policy.

1 **AN ACT to amend** 40.51 (8), 185.981 (4t) and 185.983 (1) (intro.); and **to create**
2 631.95 of the statutes; **relating to:** prohibiting certain insurance practices on
3 the basis of domestic abuse.

Analysis by the Legislative Reference Bureau

This bill prohibits an insurer from refusing to provide or renew coverage to a person or a group under any type of insurance policy solely on the basis that the person or a member of the group has been or may be a victim of child or domestic abuse or that a member of the person's or a group member's family has been or may be a victim of child or domestic abuse. (Under the statutes, domestic abuse refers to abuse of an adult family or household member.) An insurer is also prohibited from using as a factor in determining rates, or any other aspect of insurance coverage, the knowledge or suspicion that a person or group member has been or may be a victim of child or domestic abuse or that a member of the person's or a group member's family has been or may be a victim of child or domestic abuse.

A health insurer is prohibited from excluding or limiting coverage to a person or a group under a health insurance policy (called disability insurance policy in the statutes) for services or items related to the treatment of injury or disease resulting from child or domestic abuse solely on the basis that the person or a group member has been or may be a victim of child or domestic abuse or that a member of the person's or a group member's family has been or may be a victim of child or domestic abuse. A life insurer is prohibited from denying or limiting benefits to a beneficiary in the event that the death of the person whose life is insured results from child or domestic abuse solely on the basis that the person whose life is insured has been or may be a victim of child or domestic abuse or that a member of the family of the person whose life is insured has been or may be a victim of child or domestic abuse. A life insurer may, however, deny or limit benefits to a beneficiary who perpetrates child or domestic abuse that results in the death of the person whose life is insured.

Finally, the bill requires an insurer that denies coverage to a person or group under any type of insurance policy to advise the applicant in writing of the reasons for the denial. Insurers are already required under current law to specify in a cancellation or nonrenewal notice the basis for the cancellation or nonrenewal of an insurance policy.

Current law contains 2 provisions that are somewhat similar to the provisions in the bill. An insurer may not condition the provision of insurance coverage on, or consider in the determination of rates or any other aspect of insurance coverage, whether a person has obtained, or if obtained the results of, a test for the presence of human immunodeficiency virus (HIV), antigen or nonantigenic products of HIV or an antibody to HIV, or whether a person or a member of the person's family has obtained, or if obtained the results of, a genetic test.

The people of the state of Wisconsin, represented in senate and assembly, do enact as follows:

1 **SECTION 1.** 40.51 (8) of the statutes is amended to read:

2 40.51 (8) Every health care coverage plan offered by the state under sub. (6)
3 shall comply with ss. 631.89, 631.90, 631.93 (2), 631.95, 632.72 (2), 632.87 (3) to (5),
4 632.895 (5m) and (8) to (10) and 632.896.

5 **SECTION 2.** 185.981 (4t) of the statutes is amended to read:

6 185.981 (4t) A sickness care plan operated by a cooperative association is
7 subject to ss. 252.14, 631.89, 631.95, 632.72 (2), 632.87 (2m), (3), (4) and (5), 632.895
8 (10) and 632.897 (10) and ch. 155.

9 **SECTION 3.** 185.983 (1) (intro.) of the statutes is amended to read:

10 185.983 (1) (intro.) Every such voluntary nonprofit sickness care plan shall be
11 exempt from chs. 600 to 646, with the exception of ss. 601.04, 601.13, 601.31, 601.41,
12 601.42, 601.43, 601.44, 601.45, 611.67, 619.04, 628.34 (10), 631.89, 631.93, 631.95,
13 632.72 (2), 632.775, 632.79, 632.795, 632.87 (2m), (3), (4) and (5), 632.895 (5), (9) and
14 (10), 632.896 and 632.897 (10), subch. II of ch. 619 and chs. 609, 630, 635, 645 and
15 646, but the sponsoring association shall:

1 **SECTION 4.** 631.95 of the statutes is created to read:

2 **631.95 Restrictions on insurance practices; domestic abuse. (1)** In this
3 section:

4 (a) "Abuse" has the meaning given in s. 813.122 (1) (a).

5 (b) "Disability insurance policy" has the meaning given in s. 632.895 (1) (a).

6 (c) "Domestic abuse" has the meaning given in s. 813.12 (1) (a).

7 **(2)** An insurer may not do any of the following:

8 (a) Refuse to provide or renew coverage to a person under an individual
9 insurance policy or group certificate solely on the basis that the person has been or
10 may be a victim of abuse or domestic abuse or that a member of the person's family
11 has been or may be a victim of abuse or domestic abuse.

12 (b) Refuse to provide or renew coverage to an employer or other group under
13 a group insurance policy solely on the basis that an employe or other group member
14 has been or may be a victim of abuse or domestic abuse or that a member of an
15 employe's or other group member's family has been or may be a victim of abuse or
16 domestic abuse.

17 (c) Use as a factor in the determination of rates or any other aspect of insurance
18 coverage under an individual or group insurance policy or a group certificate the
19 knowledge or suspicion that a person or an employe or other group member has been
20 or may be a victim of abuse or domestic abuse or that a member of the person's or an
21 employe's or other group member's family has been or may be a victim of abuse or
22 domestic abuse.

23 (d) Under an individual or group disability insurance policy or group
24 certificate, exclude or limit coverage of health care services or items related to the
25 treatment of injury or disease resulting from abuse or domestic abuse solely on the

1 basis that a person or an employe or other group member has been or may be a victim
2 of abuse or domestic abuse or that the person's or an employe's or other group
3 member's family member has been or may be a victim of abuse or domestic abuse.

4 (e) Under an individual life insurance policy or group certificate, deny or limit
5 benefits in the event that the death of the person whose life is insured results from
6 abuse or domestic abuse solely on the basis that the person whose life is insured has
7 been or may be a victim of abuse or domestic abuse or that a member of the family
8 of the person whose life is insured has been or may be a victim of abuse or domestic
9 abuse, except that the insurer may deny or limit benefits under such a policy to a
10 beneficiary who is the perpetrator of abuse or domestic abuse that results in the
11 death of the person whose life is insured.

12 (3) An insurer that denies coverage under an individual or group insurance
13 policy or a group certificate shall advise the applicant in writing of the reasons for
14 the denial.

15 (END)