11 NCAC 04.0317 SEX DISCRIMINATION: LIFE: ACCIDENT AND HEALTH INSURANCE

(a) Prohibited Practices. The Commissioner shall consider unfair discrimination the denial of life, accident, health or disability insurance on the basis of the insured's or prospective insured's sex or marital status. The amount of benefits payable on any term, condition or type of coverage shall not be restricted, modified, excluded or reduced on the basis of the sex or marital status of the insured or prospective insured. All underwriting criteria shall be applied in all instances of similar circumstances without regard to the sex or marital status of the insured or prospective insured, except to the extent that the amount of the benefits, terms, conditions or type of coverage vary as a result of the application of rate or premium differentials not prohibited under this Chapter, such as differentials for life insurance or annuities derived from sex-based life expectancy tables. Nothing in this Paragraph shall prohibit an insurer from taking marital status into account for the purpose of determining persons eligible for dependent benefits. Examples of the practices prohibited by this Section include:

- (1) denying coverage to females employed at home, employed part-time or employed by relatives when coverage is offered to males similarly employed;
- (2) denying policy riders to females when the riders are available to males;
- (3) denying maternity coverage to unmarried females covered under a policy or contract if maternity coverage is available to married females covered under that policy or contract;
- (4) denying, under group contracts, dependent coverage to husbands of female employees, when dependent coverage is available to wives of male employees;
- (5) denying disability income contracts to employed women when coverage is offered to men similarly employed;
- (6) treating complications of pregnancy differently from any other illness or sickness under the contract;
- (7) restricting, reducing, modifying, or excluding benefits payable for disorders of the genital organs of only one sex;
- (8) offering lower maximum monthly benefits to women than to men who are in the same classification under a disability income contract;
- (9) offering more restrictive benefit periods and more restrictive definitions of disability to women than to men in the same classifications under a disability income contract;
- (10) establishing different conditions by sex under which the policyholder may exercise benefit options contained in the contract; and
- (11) limiting the amount of coverage an insured or prospective insured may purchase based upon the insured's or prospective insured's marital status unless such limitation is for the purpose of defining persons eligible for dependent benefits.

(b) Applicability and Scope. This Rule shall apply to all contracts delivered or issued for delivery in this State by an insurer on or after the effective date of this Rule and to all existing group contracts which are amended or renewed on or after the effective date of this Rule.

History Note: Authority G.S. 58-2-40; 58-3-120; 58-63-1; 58-63-65; Eff. December 15, 1979; Readopted Eff. December 1, 2021.