



**Missouri Department of Insurance, Financial Institutions & Professional Registration
Insurance Market Regulation Division
Life & Healthcare Section**

<http://insurance.mo.gov/industry/filings/lh/index.php>

Company Name: _____

Lead Form # as it appears in SERFF: _____

This form will be used in the following markets (please indicate all that apply):			
Large Group <input type="checkbox"/>	Small Group <input type="checkbox"/>	Individual <input type="checkbox"/>	
If the filing is used in a group or group type market, please indicate all that apply:			
Employer/(Single)Employer Trust; 376.421.1(1) <input type="checkbox"/>	Association; 376.421.1(5) <input type="checkbox"/>		
Creditor; 376.421.1(2) <input type="checkbox"/>	Assoc. Sm. & Large Empl. 376.421.1(5)(e) <input type="checkbox"/>		
Labor Union; 376.421.1(3) <input type="checkbox"/>	Credit Union; 376.421.1(6) <input type="checkbox"/>		
Trust (MET, etc.); 376.421(4) <input type="checkbox"/>	Discretionary; 376.421.2 <input type="checkbox"/>		

This list is in no way an exhaustive or complete statement of all requirements and provisions that might be applicable. This checklist is a representation of general provisions and objections and should not be construed as a legal position or legal advice. Please refer to the statutes and regulations for exact wording of requirements or prohibitions. The language within the Missouri Statutes and Regulations always prevails over this checklist.

Description of Provisions for General Health Insurance (non-comprehensive medical) All SERFF TOI H codes (except H15 & H16)			
Subject	Citation	Summary	Location in Filing: Section &/or Page number

Filing Submissions

Filing Submissions	See Filing Guidelines & 20 CSR 400-8.200	Procedures for filing all policy forms	
General Description	20 CSR 400-8.200(3)(C)	Brief, detailed description of benefits, purpose, and intended market. Disclose if form is new or a replacement. If amendment/rider, the policy it will go with. Information should be stated on the General Information tab in SERFF.	
Separate Submissions	20 CSR 400-8.200(3)(E)&(F)	Life filed separate from health & group separate from individual.	
Form Number	20 CSR 400-8.200(3)(I)	Each form must have a form number assigned by the submitting company in the lower left corner of the face page or first page.	
Requirements for group health filings in-state and out-of-state	20 CSR 400-2.130(2)(C)&(3)	Affidavit requirements for all groups	

Policy Forms

Free Look	20 CSR 400-2.010(2)(A)	Only where member pays most or all of the premium: 10 day free look period	
-----------	--	--	--

This list is in no way an exhaustive or complete statement of all requirements and provisions that might be applicable. This checklist is a representation of general provisions and objections and should not be construed as a legal position or legal advice. Please refer to the statutes and regulations for exact wording of requirements or prohibitions. The language within the Missouri Statutes and Regulations always prevails over this checklist.



**Missouri Department of Insurance, Financial Institutions & Professional Registration
Insurance Market Regulation Division
Life & Healthcare Section**

<http://insurance.mo.gov/industry/filings/lh/index.php>

Government hospital (1)	20 CSR 400-2.020	Policies that pay cash to indemnify for time lost while hospitalized cannot reduce benefits for time spent in the VA or other government hospital	
Definitions	20 CSR 400-2.060(2)	Definitions for Hospital, Alcohol treatment facility, Intensive care unit	
Required definitions for speech and hearing disorders	20 CSR 400-2.140 See also 376.781	OFFER – definitions and terms of coverage	
Insured in the Military	20 CSR 400-2.060(3)(A)	If benefits are not provided for those who joined the military; pro-rata unearned refund; optional provision to re-instate at discharge	
Benefits reduced	20 CSR 400-2.060(3)(B)	If benefits are reduced due to age, policy must disclose in conspicuous print and location	
Agent's authority	20 CSR 400-2.060(3)(C)	Company may disclaim agents authority to alter contract or grant insurability – Prohibits certain language	
Government hospital (2)	20 CSR 400-2.060(3)(D)	Policies that reimburse for hospital charges may not reduce benefits for hospital charges incurred due to stay at a VA or other government hospital	
Calculating benefits payable	20 CSR 400-2.060(3)(E)	Deductible shall be applied to allowable expenses prior to applicable coinsurance	

Essential conditions to be contained in the policy

Actual Charge/Actual Fee Defined (SERFF TOIH07 only)	376.789	Actual fee/charge is the amount the provider agrees to accept as payment in full	
Alcoholism	20 CSR 400-2.060(3)(G)	Coverage for treatment of alcoholism	
Certificate - group	20 CSR 400-2.060(4)(A)	Certificate of Coverage to be delivered must be submitted for approval with master policy	
Variables - group	See Filing Guidelines	See Filing Guidelines	
Total Disability defined	20 CSR 400-2.060(4)(C)	Minimum standard for definition of Total Disability	
Residual Disability	20 CSR 400-2.060(4)(D)	Shall be defined in relation to the insured's reduction in earnings	
Suicide exclusion	20 CSR 400-2.060(4)(F)	May not exclude coverage for attempted suicide while insane	
Excluded occupational injuries	20 CSR 400-2.060(4)(G)	May exclude injuries arising in the course of employment	
Benefit reduction clauses, group only	20 CSR 400-2.060(5)	Minimum amount payable of 15% or \$50	
Disclosure	375.924	Company address and telephone number	
Complications of pregnancy	375.995	Complications of pregnancy must be covered like any other covered illness;	

GROUP policies

Required provisions for GROUP policies

Grace period	376.426(1)	Grace period provision (31 days)	
--------------	----------------------------	----------------------------------	--



**Missouri Department of Insurance, Financial Institutions & Professional Registration
Insurance Market Regulation Division
Life & Healthcare Section**

<http://insurance.mo.gov/industry/filings/lh/index.php>

Incontestability	376.426(2)	Validity of the policy shall not be contested after it has been in force for 2 years from date of issue	
Application/stmts of the insured	376.426(3)	All statements shall be deemed representations and not warranties. No statement shall be used to contest unless a copy has been furnished to insured	
Evidence of individual insurability	376.426(4)	Conditions, if any, for which the insurer reserves the right to require evidence of insurability	
Preexisting conditions	376.426(5)	Exclusion or limitation may only apply to condition which medical advice or treatment was received during 12 months prior	
Misstatement of age	376.426(6)	Amount of coverage to equal amount premium would have purchased at actual age at issue	
Certificate required	376.426(7)	Insurer shall deliver certificates of coverage	
Notice of claim	376.426(8)	Time frame to submit notice of claim	
Claim forms	376.426(9)	Insurer shall furnish forms for proof of loss within 15 days of request. Insured should be deemed to comply with requirements if company failures to furnish claim forms.	
Proof of loss due to disability	376.426(10)	Written proof of loss for disability claim within 90 days – no later than 1 year after first 90 days; “Except in the absence of legal capacity”	
Time benefits are payable	376.426(11)	Benefits payable within certain time frames (see also 376.383 and 376.384 for time to pay claims) and/or not less frequently than monthly	
To whom benefits are payable	376.426(12)	Benefits payable to beneficiary, estate, or minor.	
Exam/Autopsy	376.426(13)	Examination and autopsy at company expense	
Legal action	376.426(14)	No action at law prior to 60 days; within 3yrs	
Termination of policy	376.426(15)	Provision: conditions for which the policy may be terminated.	
Limiting age - handicapped children	376.426(16)	Dependents with disabilities will not be terminated if they attain limiting age and insured provides proof of incapacity	
Dependent coverage	376.426(17)	Coverage offered for eligible dependents who are no more than 25 years old	
Insuring Debtors	376.426(18)	Issuance of a certificate to each debtor describing coverage.	
Extension of Benefits - group	376.438	Provision for extension of benefits in the event of total disability at the date of any termination	
Physical Therapy Parity	376.1235	Carriers shall not impose a co-payment or co-insurance percentage for physical therapists that is greater than the co-payment or co-insurance for primary care services.	
Early Refill of Prescription Eye Drops	376.1237	Plans providing coverage for prescription eye drops shall provide coverage for refilling an eye drop prescription early. Sunsets 1/1/2017.	



**Missouri Department of Insurance, Financial Institutions & Professional Registration
Insurance Market Regulation Division
Life & Healthcare Section**

<http://insurance.mo.gov/industry/filings/lh/index.php>

Telehealth	376.1900	Carriers shall provide coverage for telehealth on the same basis if the service would be covered through face-to-face diagnosis, consultation or treatment.	
------------	--------------------------	---	--

**INDIVIDUAL policies
Required provisions for INDIVIDUAL policies**

Limiting age - handicapped children	376.776.2	Attainment of the limiting age for dependent children. Coverage for dependents chiefly dependent upon the policyholder	
Dependent coverage	376.776.3	Coverage provided for dependents who are no more than 25 years old	
Entire contract; changes	376.777.1(1)	Policy, endorsements, attached application(s) constitute the entire contract. "no change shall be valid until approved by an officer and attached"	
Time limit on certain defenses	376.777.1(2)	Incontestability	
Grace period	376.777.1(3)	Grace period provision: 31 days for monthly premiums. Not less than 7 days for weekly	
Reinstatement	376.777.1(4)	Provision indicating the reinstatement of the policy	
Notice of claim	376.777.1(5)	Written notice of claim given to insurer within 20 days after occurrence	
Claim forms	376.777.1(6)	Insurer shall furnish forms for proof of loss within 15 days of request. Insured should be deemed to comply with requirements if company failures to furnish claim forms.	
Proofs of loss	376.777.1(7)	Within 90 days of the date of loss. Shall not be reduced	
Time of payment of claims	376.777.1(8)	Provision indicating the immediate payment of claim upon receipt of written proof of loss	
Payment of claims	376.777.1(9)	Provision indicating benefits payable in accordance with beneficiary designation	
Physical examinations & autopsy	376.777.1(10)	Examination and autopsy at company expense	
Legal action	376.777.1(11)	No action at law prior to 60 days; within 3yrs	
Change of beneficiary	376.777.1(12)	Provision indicating the right to change beneficiary, unless irrevocable	
Change of Occupation	376.777.2(1)	If insured changes occupation to one that is classified by insurer as more (or less) hazardous	
Misstatement of Age	376.777.2(2)	If insurers age is misstated, amounts payable shall be as the premium would have purchased at the correct age	
Other Insurance in this Insurer	376.777.2(3)	Accident and sickness policy previously issued by the insurer	



**Missouri Department of Insurance, Financial Institutions & Professional Registration
Insurance Market Regulation Division
Life & Healthcare Section**

<http://insurance.mo.gov/industry/filings/lh/index.php>

Insurance with Other Insurers	376.777.2(4)	Other valid coverage providing benefits for the same loss. "Expense Incurred Benefits". <i>"In applying the foregoing policy provision no third party liability coverage shall be included as "other valid coverage".</i>	
Insurance with Other Insurers	376.777.2(5)	Other valid coverage providing benefits for the same loss. "Other Benefits"	
Relation of Earnings to Insurance	376.777.2(6)	Provision indicating the insurers liability in proportion to amount of earnings	
Unpaid Premium	376.777.2(7)	Any premium due and unpaid may be deducted from the payment of a claim	
Cancellation	376.777.2(8)	Written notice, delivered to insured's address	
Conformity with State Statutes	376.777.2(9)	Any provision which is in conflict with statutes of the state which insured resides, policy is amended to conform	
Illegal Occupation	376.777.2(10)	Insurer shall not be liable for loss for which contributing cause was an attempt to commit a felony or engage in an illegal occupation	
Intoxicants and Narcotics	376.777.2(11)	Insurer shall not be liable for loss sustained by insured being intoxicated or under the influence of any narcotic unless administered on the advice of a physician.	
Physical Therapy Parity	376.1235	Carriers shall not impose a co-payment or co-insurance percentage for physical therapists that is greater than the co-payment or co-insurance for primary care services.	
Early Refill of Prescription Eye Drops	376.1237	Plans providing coverage for prescription eye drops shall provide coverage for refilling an eye drop prescription early. Sunsets 1/1/2017	
Telehealth	376.1900	Carriers shall provide coverage for telehealth on the same basis if the service would be covered through face-to-face diagnosis, consultation or treatment.	

**Grievance Procedures & Utilization Review
(For All Plans with a Managed Care Component)**

Definitions	376.1350	Definitions for utilization review and grievances	
Toll free #	376.1361.7	Timely access to review staff by a toll-free number	
Appeal for Drugs and DME	376.1361.10	Right to appeal for coverage of drugs & durable medical equip.	
Authorizations may not be retracted	376.1361.13	Authorization for services may not be reduced or retracted.	
UR Determinations	376.1363	Notification requirements for UR determinations and time frames	
Determination for emergency services	376.1367	No pre-auth for ER, prudent layperson std, post ER admit determinations	
Utilization Review procedures in EOC	376.1372	UR procedures in EOC	



**Missouri Department of Insurance, Financial Institutions & Professional Registration
Insurance Market Regulation Division
Life & Healthcare Section**

<http://insurance.mo.gov/industry/filings/lh/index.php>

Grievance procedures in EOC	376.1378	Includes statement that enrollee can contact DIFP at any time; grievance procedure not a bar to law suits Guidelines for 1 st level grievance procedure identified; Guidelines for 2 nd level grievance	
Grievance procedures	376.1382		
Grievance: second level review	376.1385		
Expedited review	376.1389	Procedure for an expedited review	

Prohibited provisions

Ambiguous, misleading provisions	376.405 (group) 376.777 (individual)	Policy provisions that are uncertain, ambiguous or not reasonably adequate for the protection of those insured will not be approved.
Arbitration	435.350	Arbitration is not allowed in contracts of insurance.
Force Majeure & Acts beyond the company control	376.777	Deemed as not reasonably adequate for the protection of the insured – not permitted.
Prohibited language	20 CSR 400-2.060(3)(F)	Prohibits “accidental means” tests. Review Reg. for additional prohibited exclusions
Red-lined copies	20 CSR 400-8.200	Any redline copies are not approvable and must be placed on the SERFF “supporting documentation” area.
Rider a Rider,	20 CSR 400-8.200(3)(D)	Companies may not “rider a rider”, endorse and endorsement or amend an amendment.
“Sole Discretion”	376.777	Provisions that specifically state the company has sole discretionary power, or words to that effect, are not permitted
Variable Language	See Filing Guidelines	Please see Filing Guidelines posted at http://insurance.mo.gov/industry/filings/lh/index.php
Variable Language - Blank pages	376.777	Brackets around an entire page constitute a “blank” or generic form – not permitted
Waiting Period	376.777	Waiting period during which no benefits are payable – not permitted
Insert pages not permitted.	See Filing Guidelines and 20 CSR 400-8.200	An insert Page cannot be filed.

This list is in no way an exhaustive or complete statement of all requirements and provisions that might be applicable. This checklist is a representation of general provisions and objections and should not be construed as a legal position or legal advice. Please refer to the statutes and regulations for exact wording of requirements or prohibitions. The language within the Missouri Statutes and Regulations always prevails over this checklist.