



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

Company Name: _____

Form # as it appears on the TD-1: _____

DESCRIPTION OF PROVISIONS FOR INDIVIDUAL MEDICAL EXPENSE			
REVIEW REQUIREMENTS	Citation	Summary	Location in Contract (page and section #) If Applicable

Filing Submissions

Transmittal Document	20 CSR 400-8.200(3)(B)	Format may be different for SERFF filings.	
Cover Letter	(3)(C)	Letter of transmittal which briefly describes benefits, purpose, and intended market. Disclose if form is new or a replacement.	
Separate Submissions	(3)(D)&(E)	Life filed separate from health & group from individual.	

Policy Forms

Free Look	20 CSR 400-2.010	10 day free look period for all individual and discretionary group policy forms	
Definitions	20 CSR 400-2.060(2)	Definitions for Hospital, Alcohol treatment facility, Intensive care unit	
Elements of coverage required	20 CSR 400-2.060(3)	Elements of coverage required	-----
Insured in the Military	(A)	If benefits are not provided for those who joined the military; pro-rata unearned refund	
Benefits reduced	(B)	If benefits are reduced due to age, policy must disclose in conspicuous print and location	
Application changes	(C)	Company may disclaim agents authority to alter contract or grant insurability – Prohibits certain language	
Government hospital	(D)	Hospital reimbursement contracts not affected by confinement in government hospital	
Calculating benefits payable	(E)	Deductible shall be applied to allowable expenses prior to applicable coinsurance	
Prohibited language	(F)	Prohibits “accidental means” tests Review Reg. for additional prohibited exclusions	
Alcoholism	(G)	Coverage for hospital or treatment facility for alcoholism treatment. May be limited to 30days	
Essential conditions to be contained	20 CSR 400-2.060(4)	Essential conditions to be contained	-----
Total Disability defined	(C)	Minimum standard for definition of Total Disability	
Residual Disability	(D)	Shall be defined in relation to the insured's reduction in earnings	
Application processing	(E)	Within 60 days of home office receipt; shall notify prospective insured of acceptance or rejection	
Suicide exclusion	(F)	May not exclude coverage for attempted suicide while insane	
Excluded occupational injuries	(G)	May exclude injuries arising in the course of employment	



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Variable deductible, individual only	20 CSR 400-2.060(7)	Variable deductible	
Application Questions	20 CSR 400-2.120	<ul style="list-style-type: none"> • Questions must be factual relating to a diagnosis. • Questions relating to HIV, AIDS, ARC may be asked if other high risk medical conditions are asked. • Questions relating to medical & other factual matters (not a specific diagnosis) must pertain to a finite period not to exceed 10 years. 	
Disclosure	375.924	Company address and telephone number	

INDIVIDUAL

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 RSMo (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	(2)	Incontestability	
Grace period	(3)	Grace period provision: 31 days for monthly premiums. Not less than 7 days for weekly	
Reinstatement	(4)	Provision indicating the reinstatement of the policy	
Notice of claim	(5)	Written notice of claim given to insurer within 20 days after occurrence	
Claim forms	(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	(7)	With in 90 days of the date of loss. Shall not be reduced	
Time of payment of claims	(8)	Provision indicating the immediate payment of claim upon receipt of written proof of loss	
Payment of claims	(9)	Provision indicating benefits payable in accordance with beneficiary designation	
Physical examinations & autopsy	(10)	Examination and autopsy at company expense	
Legal action	(11)	No action at law prior to 60 days; within 3yrs	
Change of beneficiary	(12)	Provision indicating the right to change beneficiary, unless irrevocable	

Optional provisions

Requirements for the language to be contained in the following optional provisions

Change of Occupation	376.777.2(1) RSMo	If insured changes occupation to one that is classified by insurer as more (or less) hazardous	
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Misstatement of Age	(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	(3)	Accident and sickness policy previously issued by the insurer	
Insurance with Other Insurers	(4)	Other valid coverage providing benefits for the same loss. "Expense Incurred Benefits". "In applying the foregoing policy provision no third party liability coverage shall be included as "other valid coverage".	
Insurance with Other Insurers	(5)	Other valid coverage providing benefits for the same loss. "Other Benefits"	
Relation of Earnings to Insurance	(6)	Provision indicating the insurers liability in proportion to amount of earnings	
Unpaid Premium	(7)	Any premium due and unpaid may be deducted from the payment of a claim	
Cancellation	(8)	Written notice, delivered to insured's last known address	
Conformity with State Statutes	(9)	Any provision which is in conflict with statutes of the state which insured resides, policy is amended to conform	
Illegal Occupation	(10)	Insurer shall not be liable for loss which contributing cause was an attempt to commit a felony or engaged in an illegal occupation	
Intoxicants and Narcotics	(11)	Insurer shall not be liable for loss sustained by insured being intoxicated of any narcotic unless administered on the advice of a physician.	
Right of Recovery	376.384.1(3)	All health carriers shall not request a refund or offset against a claim more than twelve months after a health carrier has paid a claim.	
Diabetes	376.385 RSMo.	OFFER	
Drug Co-pay	376.386 RSMo.	1 co-pay for multi dosage, where applicable	
Drug Cancellation Notification	376.392 RSMo.	Carriers are required to notify enrollees 30 days prior to cancellation of a specific Rx.	
Newborn coverage	376.406 RSMo.	Moment of birth to 31 days. Plus an additional 10 days.	
Clinical Trials	376.429 RSMo.	Shall provide coverage for routine patient care costs incurred from phase II, III or IV clinical trials	
Newborn Hearing Screening	376.1220	Coverage for Newborn hearing screening, necessary rescreening, follow-up	
Public Hospitals	376.778	Payment to public hospitals	
Speech & Hearing	376.781	OFFER	
Mammography	376.782 RSMo.	Minimum requirements	
Elective abortions	376.805 RSMo.	Only as Optional Rider	



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Coverage for adopted children	376.816 RSMo.	Provision identifying the effective dates of coverage for adoptive children	
Child Coverage: Discrimination Prohibited	376.820	Prohibited discrimination of child enrollment	
Direct access OB/GYN	376.1199 RSMo.	Direct access OB/GYN, Osteoporosis, Contraceptives	
Chemotherapy	376.1200 RSMo.	Chemotherapy/Bone Marrow Transplants - OFFER (in writing)	
Reconstructive surgery following mastectomy	376.1209 RSMo.	Coverage for reconstructive surgery & prosthetic devices following mastectomy. No time limits allowed.	
Minimum maternity benefits	376.1210 RSMo.	48/96 hr inpatient, postdischarge, etc.	
Childhood immunizations	376.1215 RSMo.	Childhood immunizations with no deductible or co-payment	
First Steps	376.1218 RSMo.	For children enrolled in the Part C early intervention system.	
PKU testing and formula	376.1219 RSMo.	Coverage for the treatment of phenylketonuria	
Coverage for hospital dental procedure	376.1225	Coverage for general anesthesia, hospital charges for dental care	
Cancer Screenings	376.1250	Pelvic exam, prostate exam, colorectal exam, etc.	
Cancer Diagnosis- 2 nd Opinion	376.1253	Patient has the right to a referral for a second opinion.	
Antigen Testing	376.1275	Antigen testing – Bone marrow transplantation	
Testing for lead poisoning	376.1290	OFFER	

Mental Health / Chemical Dependency

Alcoholism	376.779 RSMo	30 days inpatient treatment for alcoholism - applicable if the benefits outlined under 376.811 are not automatically included or are rejected and the benefits outlined under 376.827 are not provided	
Definitions	376.810	Definitions: chemical dependency & mental illness	
Chemical dependency and mental illness benefits	376.811	OFFER	
Mental Health & Chemical Dependency	376.825 ____	Mental Health & Chemical Dependency Minimums (If Coverage Included)	

Grievance Procedures & Utilization Review

Definitions UR	376.1350 RSMo.	Definitions UR	
Right to appeal	376.1361.10	Right to appeal for coverage of drugs & durable medical equip.	
UR Determinations	376.1363 RSMo.	Notification requirements for UR determinations	
Determination for emergency services	376.1367 RSMo.	UR or benefit determination for emergencies	



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Utilization Review procedures	376.1372 RSMo.	UR procedures in EOC	
Grievance procedures in EOC	376.1378 RSMo.	Includes statement that enrollee can contact MDI at anytime	
Grievance procedures	376.1382 RSMo.	Guidelines for 1 st level grievance procedure identified	
Grievance: second level review	376.1385 RSMo.	Guidelines for 2 nd level grievance	
Expedited review	376.1389 RSMo.	Procedure for an expedited review	

PROHIBITED

Arbitration	435.350 RSMo.	Arbitration is not allowed in contracts of insurance	
Subrogation & Third party recovery	376.777.2(4)	“Subrogation will not be allowed in any plan as distinguished from the rights to recovery”	
Application	375.936 (11)(f) RSMo.	Applications cannot ask if the applicant has been declined for other insurance	

This list is in no way an exhaustive or complete statement of all requirements and provisions that might be applicable. The **Bolded** descriptions are areas which MDI frequently requires Insurers to make revisions of their policies or contracts. With respect to ordinary Health & Accident policies, the remaining provisions are similar in substance to NAIC model regulations. **Please refer to the statues and regulations for exact wording of requirements or prohibitions. The language within the Missouri Statues and Regulations always prevails over this checklist.**