

INSURANCE DIVISION[191]

[Prior to 10/22/86, see Insurance Department[510], renamed Insurance Division[191] under the “umbrella” of Department of Commerce by the 1986 Iowa Acts, Senate File 2175]

ORGANIZATION AND PROCEDURES

CHAPTER 1

ORGANIZATION OF DIVISION

- 1.1(502,505) Organization
- 1.2(502,505) Location and contact information
- 1.3(22,502,505) Public information and inspection of records
- 1.4(505) Service of process

CHAPTER 2

DECLARATORY ORDERS

- 2.1(17A) Petition for declaratory order
- 2.2(17A) Notice of petition
- 2.3(17A) Intervention
- 2.4(17A) Briefs
- 2.5(17A) Inquiries
- 2.6(17A) Service and filing of petitions and other papers
- 2.7(17A) Consideration
- 2.8(17A) Action on petition
- 2.9(17A) Refusal to issue order
- 2.10(17A) Contents of declaratory order—effective date
- 2.11(17A) Copies of orders
- 2.12(17A) Effect of a declaratory order

CHAPTER 3

CONTESTED CASES

- 3.1(17A) Scope and applicability
- 3.2(17A) Definitions
- 3.3(17A) Time requirements
- 3.4(17A) Requests for contested case proceeding
- 3.5(17A) Commencement of hearing; notice
- 3.6(17A) Presiding officer
- 3.7(17A) Waiver of procedures
- 3.8(17A) Telephone proceedings
- 3.9(17A) Disqualification
- 3.10(17A) Consolidation—severance
- 3.11(17A) Pleadings
- 3.12(17A) Service and filing of pleadings and other papers
- 3.13(17A) Discovery
- 3.14(17A) Subpoenas
- 3.15(17A) Motions
- 3.16(17A) Prehearing conference
- 3.17(17A) Continuances
- 3.18(17A) Withdrawals
- 3.19(17A) Intervention
- 3.20(17A) Hearing procedures
- 3.21(17A) Evidence
- 3.22(17A) Default
- 3.23(17A) Ex parte communication
- 3.24(17A) Recording costs

3.25(17A)	Interlocutory appeals
3.26(17A)	Final decision
3.27(17A)	Appeals and review
3.28(17A)	Applications for rehearing
3.29(17A)	Stay of agency action
3.30(17A)	No factual dispute contested cases
3.31(17A)	Emergency adjudicative proceedings
3.32(502,505,507B)	Summary cease and desist orders
3.33(17A,502,505)	Informal settlement
3.34(17A,502,505)	Witness fees

CHAPTER 4

AGENCY PROCEDURE FOR RULE MAKING AND WAIVER OF RULES

DIVISION I

AGENCY PROCEDURE FOR RULE MAKING

4.1(17A)	Applicability
4.2(17A)	Advice on possible rules before notice of proposed rule adoption
4.3(17A)	Public rule-making docket
4.4(17A)	Notice of proposed rule making
4.5(17A)	Public participation
4.6(17A)	Regulatory analysis
4.7(17A,25B)	Fiscal impact statement
4.8(17A)	Time and manner of rule adoption
4.9(17A)	Variance between adopted rule and rule proposed in Notice of Intended Action
4.10(17A)	Exemptions from public rule-making procedures
4.11(17A)	Concise statement of reasons
4.12(17A)	Contents, style, and form of rule
4.13(17A)	Agency rule-making record
4.14(17A)	Filing of rules
4.15(17A)	Effectiveness of rules prior to publication
4.16(17A)	General statements of policy
4.17(17A)	Review of rules by division
4.18(17A)	Petition for rule making
4.19 and 4.20	Reserved

DIVISION II

WAIVER AND VARIANCE RULES

4.21(17A)	Definition
4.22(17A)	Scope
4.23(17A)	Applicability of Division II of Chapter 4
4.24(17A)	Criteria for waiver or variance
4.25(17A)	Filing of petition
4.26(17A)	Content of petition
4.27(17A)	Additional information
4.28(17A)	Notice
4.29(17A)	Hearing procedures
4.30(17A)	Ruling
4.31(17A)	Public availability
4.32(17A)	Summary reports
4.33(17A)	Cancellation of a waiver
4.34(17A)	Violations
4.35(17A)	Defense
4.36(17A)	Judicial review

REGULATION OF INSURERS

CHAPTER 5

REGULATION OF INSURERS—GENERAL PROVISIONS

- 5.1(507) Examination reports
- 5.2(505,507) Examination for admission
- 5.3(507,508,515) Submission of quarterly financial information
- 5.4(505,508,515,520) Surplus notes
- 5.5(505,515,520) Maximum allowable premium volume
- 5.6(505,515,520) Treatment of various items on the financial statement
- 5.7(505) Ordering withdrawal of domestic insurers from states
- 5.8(505) Monitoring
- 5.9(505) Rate and form filings
- 5.10(511) Life companies—permissible investments
- 5.11(511) Investment of funds
- 5.12(515) Collateral loans
- 5.13(508,515) Loans to officers, directors, employees, etc.
- 5.14 Reserved
- 5.15(508,512B,514,514B,515,520) Accounting practices and procedures manual and annual statement instructions
- 5.16 to 5.19 Reserved
- 5.20(508) Computation of reserves

UNEARNED PREMIUM RESERVES ON MORTGAGE GUARANTY INSURANCE POLICIES

- 5.21(515C) Unearned premium reserve factors
- 5.22(515C) Contingency reserve
- 5.23(507C) Standards
- 5.24(507C) Commissioner's authority
- 5.25 Reserved
- 5.26(508,515) Participation in the NAIC Insurance Regulatory Information System
- 5.27(508,515,520) Asset valuation
- 5.28(508,515,520) Risk-based capital and surplus
- 5.29(508,515) Actuarial certification of reserves
- 5.30(515) Single maximum risk—fidelity and surety risks
- 5.31(515) Reinsurance contracts
- 5.32(511,515) Investments in medium grade and lower grade obligations
- 5.33(510) Credit for reinsurance
- 5.34(508) Actuarial opinion and memorandum
- 5.35 to 5.39 Reserved
- 5.40(515) Premium tax
- 5.41(508) Tax on gross premiums—life companies
- 5.42(432) Cash refund of premium tax
- 5.43(510) Managing general agents

DISCLOSURE OF MORTGAGE LOAN APPLICATIONS

- 5.44 to 5.49 Reserved
- 5.50(535A) Purpose
- 5.51(535A) Definitions
- 5.52(535A) Filing of reports
- 5.53(535A) Form and content of reports
- 5.54(535A) Additional information required
- 5.55(535A) Written complaints

CHAPTER 6
ORGANIZATION OF DOMESTIC INSURANCE COMPANIES

6.1(506)	Definitions
6.2(506)	Promoters contributions
6.3(506)	Escrow
6.4(506)	Alienation
6.5(506)	Sales to promoters
6.6(506)	Options
6.7(506)	Qualifications of management
6.8(506)	Chief executive
6.9(506)	Directors

CHAPTER 7
DOMESTIC STOCK INSURERS PROXIES

PROXY REGULATIONS

7.1(523)	Application of regulation
7.2(523)	Proxies, consents and authorizations
7.3(523)	Disclosure of equivalent information
7.4(523)	Definitions
7.5(523)	Information to be furnished to stockholders
7.6(523)	Requirements as to proxy
7.7(523)	Material required to be filed
7.8(523)	False or misleading statements
7.9(523)	Prohibition of certain solicitations
7.10(523)	Special provisions applicable to election contests

SCHEDULE A
INFORMATION REQUIRED IN PROXY STATEMENT

SCHEDULE B
INFORMATION TO BE INCLUDED IN STATEMENTS FILED BY OR ON BEHALF
OF A PARTICIPANT (OTHER THAN THE INSURER) IN A PROXY SOLICITATION
IN AN ELECTION CONTEST
POLICYHOLDER PROXY SOLICITATION

7.11(523)	Application
7.12(523)	Conditions—revocation
7.13(523)	Filing proxy
7.14(523)	Solicitation by agents—use of funds
7.15 to 7.19	Reserved

STOCK TRANSACTION REPORTING

7.20(523)	Statement of changes of beneficial ownership of securities
-----------	--

CHAPTER 8
BENEVOLENT ASSOCIATIONS

8.1 and 8.2	Reserved
8.3(512A)	Organization
8.4(512A)	Membership
8.5(512A)	Fees, dues and assessments
8.6(512A)	Reserve fund
8.7(512A)	Certificates
8.8(512A)	Beneficiaries
8.9(512A)	Mergers
8.10(512A)	Directors and officers
8.11(512A)	Stockholders
8.12(512A)	Bookkeeping and accounts

CHAPTER 9

Reserved

INSURANCE PRODUCERS

CHAPTER 10

LICENSING OF INSURANCE PRODUCERS

DIVISION I

LICENSING OF INSURANCE PRODUCERS

10.1(522B)	Purpose and authority
10.2(522B)	Definitions
10.3(522B)	Requirement to hold a license
10.4(522B)	Licensing of resident producers
10.5(522B)	Licensing of nonresident producers
10.6(522B)	Issuance of license
10.7(522B)	License lines of authority
10.8(522B)	License renewal
10.9(522B)	License reinstatement
10.10(522B)	Reinstatement or reissuance of a license after suspension, revocation or forfeiture in connection with disciplinary matters; and forfeiture in lieu of compliance
10.11(522B)	Temporary licenses
10.12(522B)	Change in name, address or state of residence
10.13(522B)	Reporting of actions
10.14(522B)	Commissions and referral fees
10.15(522B)	Appointments
10.16(522B)	Appointment renewal
10.17(522B)	Appointment terminations
10.18(522B)	Licensing of a business entity
10.19(522B)	Use of senior-specific certifications and professional designations in the sale of life insurance and annuities
10.20(522B)	Violations and penalties
10.21(252J)	Suspension for failure to pay child support
10.22(261)	Suspension for failure to pay student loan
10.23(82GA,SF2428)	Suspension for failure to pay state debt
10.24(522B)	Administration of examinations
10.25(522B)	Forms
10.26(522B)	Fees
10.27 to 10.50	Reserved

DIVISION II

LICENSING OF CAR RENTAL COMPANIES AND EMPLOYEES

10.51(522A)	Purpose
10.52(522A)	Definitions
10.53(522A)	Requirement to hold a license
10.54(522A)	Limited licensee application process
10.55(522A)	Counter employee licenses
10.56(522A)	Duties of limited licensees
10.57(522A)	License renewal
10.58(522A)	Limitation on fees
10.59(522A)	Change in name or address
10.60(522A)	Violations and penalties

CHAPTER 11
CONTINUING EDUCATION FOR
INSURANCE PRODUCERS

- 11.1(505,522B) Statutory authority—purpose—applicability
- 11.2(505,522B) Definitions
- 11.3(505,522B) Continuing education requirements for producers
- 11.4(505,522B) Proof of completion of continuing education requirements
- 11.5(505,522B) Course approval
- 11.6(505,522B) Topic guidelines
- 11.7(505,522B) CE course renewal
- 11.8(505,522B) Appeals
- 11.9(505,522B) CE provider approval
- 11.10(505,522B) CE provider's responsibilities
- 11.11(505,522B) Prohibited conduct—CE providers
- 11.12(505,522B) Outside vendor
- 11.13(505,522B) CE course audits
- 11.14(505,522B) Fees and costs

CHAPTER 12
PORT OF ENTRY REQUIREMENTS

- 12.1(508,515) Purpose
- 12.2(508,515) Trust and other admission requirements
- 12.3(508,515) Examination and preferred supervision
- 12.4(508,515) Surplus required
- 12.5(508,515) Investments

CHAPTER 13
CONSENT FOR PROHIBITED PERSONS
TO ENGAGE IN THE BUSINESS OF INSURANCE

- 13.1(505,522B) Purpose and authority
- 13.2(505,522B) Definitions
- 13.3(505,522B) Requirement for prohibited persons to obtain consent
- 13.4(505,522B) Applications for consent
- 13.5(505,522B) Consideration of applications for consent
- 13.6(505,522B) Review of application by the division
- 13.7(505,522B) Consent effective for specified positions and responsibilities only
- 13.8(505,522B) Change in circumstances
- 13.9(505,522B) Burden of proof
- 13.10(505,522B) Violations and penalties

UNFAIR TRADE PRACTICES

CHAPTER 14
LIFE INSURANCE ILLUSTRATIONS MODEL REGULATION

- 14.1(507B) Purpose
- 14.2(507B) Authority
- 14.3(507B) Applicability and scope
- 14.4(507B) Definitions
- 14.5(507B) Policies to be illustrated
- 14.6(507B) General rules and prohibitions
- 14.7(507B) Standards for basic illustrations
- 14.8(507B) Standards for supplemental illustrations
- 14.9(507B) Delivery of illustration and record retention

14.10(507B)	Annual report; notice to policyowners
14.11(507B)	Annual certifications
14.12(507B)	Penalties
14.13(507B)	Separability
14.14(507B)	Effective date

CHAPTER 15 UNFAIR TRADE PRACTICES

DIVISION I SALES PRACTICES

15.1(507B)	Purpose
15.2(507B)	Definitions
15.3(507B)	Advertising
15.4(507B)	Life insurance cost and benefit disclosure requirements
15.5(507B)	Health insurance sales to individuals 65 years of age or older
15.6(507B)	Preneed funeral contracts or prearrangements
15.7(507B)	Twisting prohibited
15.8(507B)	Producer responsibilities
15.9(507B)	Right to return a life insurance policy or annuity (free look)
15.10(507B)	Uninsured/underinsured automobile coverage—notice required
15.11(507B)	Unfair discrimination
15.12(507B)	Testing restrictions of insurance applications for the human immunodeficiency virus
15.13(507B)	Records maintenance
15.14(505,507B)	Enforcement section—cease and desist and penalty orders
15.15 to 15.30	Reserved

DIVISION II CLAIMS

15.31(507B)	General claims settlement guidelines
15.32(507B)	Prompt payment of certain health claims
15.33(507B)	Audit procedures for medical claims
15.34 to 15.40	Reserved
15.41(507B)	Claims settlement guidelines for property and casualty insurance
15.42(507B)	Acknowledgment of communications by property and casualty insurers
15.43(507B)	Standards for settlement of automobile insurance claims
15.44(507B)	Standards for determining replacement cost and actual cost values
15.45(507B)	Guidelines for use of aftermarket crash parts in motor vehicles
15.46 to 15.50	Reserved

DIVISION III DISCLOSURE FOR SMALL FACE AMOUNT LIFE INSURANCE POLICIES

15.51(507B)	Purpose
15.52(507B)	Definition
15.53(507B)	Exemptions
15.54(507B)	Disclosure requirements
15.55(507B)	Insurer duties
15.56 to 15.60	Reserved

DIVISION IV ANNUITY DISCLOSURE REQUIREMENTS

15.61(507B)	Purpose
15.62(507B)	Applicability and scope
15.63(507B)	Definitions
15.64(507B)	Standards for delivery of disclosure document and Buyer's Guide

- 15.65(507B) Content of disclosure documents
- 15.66(507B) Report to contract owners
- 15.67(507B) Severability

DIVISION V
SUITABILITY IN ANNUITY TRANSACTIONS

- 15.68(507B) Purpose
- 15.69(507B) Applicability and scope
- 15.70(507B) Definitions
- 15.71(507B) Duties of insurers and of insurance producers
- 15.72(507B) Insurance producer training
- 15.73(507B) Compliance; mitigation; penalties
- 15.74(507B) Record keeping
- 15.75 to 15.79 Reserved

DIVISION VI
INDEXED PRODUCTS TRAINING REQUIREMENT

- 15.80(507B,522B) Purpose
- 15.81(507B,522B) Definitions
- 15.82(507B,522B) Special training required
- 15.83(507B,522B) Conduct of training course
- 15.84(507B,522B) Insurer duties
- 15.85(507B,522B) Verification of training
- 15.86(507B,522B) Penalties
- 15.87(507B,522B) Compliance date

CHAPTER 16
REPLACEMENT OF LIFE INSURANCE AND ANNUITIES

DIVISION I

- 16.1 to 16.20 Reserved

DIVISION II

- 16.21(507B) Purpose
- 16.22(507B) Definitions
- 16.23(507B) Exemptions
- 16.24(507B) Duties of producers
- 16.25(507B) Duties of all insurers that use producers on or after January 1, 2001
- 16.26(507B) Duties of replacing insurers that use producers
- 16.27(507B) Duties of the existing insurer
- 16.28(507B) Duties of insurers with respect to direct-response solicitations
- 16.29(507B) Violations and penalties
- 16.30(507B) Severability

CHAPTER 17
LIFE AND HEALTH REINSURANCE AGREEMENTS

- 17.1(508) Authority and purpose
- 17.2(508) Scope
- 17.3(508) Accounting requirements
- 17.4(508) Written agreements
- 17.5(508) Existing agreements

CHAPTER 18
CEMETERIES

- 18.1(523I,566A) Perpetual care cemeteries
- 18.2(523I,566A) Administration

- 18.3(523I,566A) Public access to hearings
- 18.4 Reserved
- 18.5(523I,566A) Forms—content
- 18.6(523I,566A) Annual report by perpetual care cemeteries
- 18.7(523I,566A) Annual reports and perpetual care cemetery permits

CHAPTER 19

Reserved

PROPERTY AND CASUALTY INSURANCE

CHAPTER 20

PROPERTY AND CASUALTY INSURANCE RATE AND FORM FILING PROCEDURES

DIVISION I

FORM AND RATE REQUIREMENTS

- 20.1(505,509,514A,515,515A,515F) General filing requirements
- 20.2(505) Objection to filing
- 20.3 Reserved
- 20.4(505,509,514A,515,515A,515F) Policy form filing
- 20.5(515A) Rate or manual rule filing
- 20.6(515A) Exemption from filing requirement
- 20.7 Reserved
- 20.8(515A) Rate filings for crop-hail insurance
- 20.9 and 20.10 Reserved
- 20.11(515) Exemption from form and rate filing requirements
- 20.12 to 20.40 Reserved

DIVISION II

IOWA FAIR PLAN ACT

- 20.41(515,515F) Purpose
- 20.42(515,515F) Scope
- 20.43(515,515F) Definitions
- 20.44(515,515F) Eligible risks
- 20.45(515,515F) Membership
- 20.46(515,515F) Administration
- 20.47(515,515F) Duties of the governing committee
- 20.48(515,515F) Annual and special meetings
- 20.49(515,515F) Application for insurance
- 20.50(515,515F) Inspection procedure
- 20.51(515,515F) Procedure after inspection and receipt of application
- 20.52(515,515F) Reasonable underwriting standards for property coverage
- 20.53(515,515F) Reasonable underwriting standards for liability coverage
- 20.54(515,515F) Cancellation; nonrenewal and limitations; review of eligibility
- 20.55(515,515F) Assessments
- 20.56(515,515F) Commission
- 20.57(515,515F) Public education
- 20.58(515,515F) Cooperation and authority of producers
- 20.59(515,515F) Review by commissioner
- 20.60(515,515F) Indemnification

CHAPTER 21

REQUIREMENTS FOR EXCESS AND SURPLUS LINES,
RISK RETENTION GROUPS AND PURCHASING GROUPS

- 21.1(515) Definitions
- 21.2(515) Qualified surplus lines carriers' duties
- 21.3(515) Producers' duties
- 21.4(515) Producers' duty to insured; evidence of coverage
- 21.5(515) Procedures for qualification and renewal of a nonadmitted insurer as a qualified surplus lines carrier
- 21.6(515E) Risk retention groups
- 21.7(515E) Procedures for qualification as a risk retention group
- 21.8(515E) Procedures for qualification as a purchasing group
- 21.9(515,515E) Failure to comply; penalties

CHAPTER 22

FINANCIAL GUARANTY INSURANCE

- 22.1(515C) Definitions
- 22.2(515) Financial requirements and reserves

CHAPTER 23

MOTOR VEHICLE SERVICE CONTRACTS

- 23.1(516E) Purpose
- 23.2(516E) Applicability and scope
- 23.3(516E) Application of insurance laws
- 23.4(516E) Administration
- 23.5(516E) Public access to hearings
- 23.6(516E) Public access to records
- 23.7(516E) Filing procedures
- 23.8(516E) Fees
- 23.9(516E) Forms
- 23.10(516E) Prohibited acts—unfair discrimination or trade practices
- 23.11(516E) Prohibited acts—unfair or deceptive trade practices involving used or rebuilt parts
- 23.12(516E) Violations
- 23.13(516E) Procedures for public complaints

CHAPTER 24

IOWA RETIREMENT FACILITIES

- 24.1(523D) Purpose
- 24.2(523D) Title
- 24.3(523D) Definitions
- 24.4(523D) Administration
- 24.5(523D) Misrepresentations
- 24.6(523D) Complaints
- 24.7(523D) Address for filings
- 24.8(523D) Fees
- 24.9(523D) Forms
- 24.10(523D) Financial statements, studies, and forecasts
- 24.11(523D) Amendments to the disclosure statement
- 24.12(523D) Standards for the disclosure statement

CHAPTER 25
MILITARY SALES PRACTICES

25.1(505)	Purpose and authority
25.2(505)	Scope
25.3(505)	Exemptions
25.4(505)	Definitions
25.5(505)	Practices declared false, misleading, deceptive or unfair on a military installation
25.6(505)	Practices declared false, misleading, deceptive or unfair regardless of location
25.7(505)	Reporting requirements
25.8(505)	Violation and penalties
25.9(505)	Severability

CHAPTER 26
Reserved

CHAPTER 27
PREFERRED PROVIDER ARRANGEMENTS

27.1(514F)	Purpose
27.2(514F)	Definitions
27.3(514F)	Preferred provider arrangements
27.4(514F)	Health benefit plans
27.5(514F)	Preferred provider participation requirements
27.6(514F)	General requirements
27.7(514F)	Civil penalties
27.8(514F)	Health care insurer requirements

CHAPTER 28
CREDIT LIFE AND CREDIT
ACCIDENT AND HEALTH INSURANCE

28.1(509)	Purpose
28.2(509)	Definitions
28.3(509)	Rights and treatment of debtors
28.4(509)	Policy forms and related material
28.5(509)	Determination of reasonableness of benefits in relation to premium charge
28.6	Reserved
28.7(509)	Credit life insurance rates
28.8(509)	Credit accident and health insurance
28.9(509)	Refund formulas
28.10(509)	Experience reports and adjustment of prima facie rates
28.11(509)	Use of rates—direct business only
28.12(509)	Supervision of credit insurance operations
28.13(509)	Prohibited transactions
28.14(509)	Disclosure and readability
28.15(509)	Severability
28.16(509)	Effective date
28.17(509)	Fifteen-day free examination

CHAPTER 29
CONTINUATION RIGHTS UNDER GROUP ACCIDENT
AND HEALTH INSURANCE POLICIES

29.1(509B)	Definitions
29.2(509B)	Notice regarding continuation rights
29.3(509B)	Qualifying events for continuation rights

- 29.4(509B) Interplay between chapter 509B and COBRA
 29.5(509B) Effective date for compliance

LIFE AND HEALTH INSURANCE

CHAPTER 30
 LIFE INSURANCE POLICIES

- 30.1(508) Purpose
 30.2(508) Scope
 30.3(508) Definitions
 30.4(508) Prohibitions, regulations and disclosure requirements
 30.5(508) General filing requirements
 30.6(508) Back dating of life policies
 30.7(508,515) Expiration date of policy vs. charter expiration date
 30.8(509) Electronic delivery of group life insurance certificates

CHAPTER 31
 LIFE INSURANCE COMPANIES—VARIABLE ANNUITIES CONTRACTS

- 31.1(508) Definitions
 31.2(508) Insurance company qualifications
 31.3(508) Filing, policy forms and provision
 31.4(508) Separate account or accounts and investments
 31.5(508) Required reports
 31.6(508) Producers
 31.7(508) Foreign companies

CHAPTER 32
 DEPOSITS BY A DOMESTIC LIFE COMPANY IN A
 CUSTODIAN BANK OR CLEARING CORPORATION

- 32.1(508) Purpose
 32.2(508) Definitions
 32.3(508) Requirements upon custodial account and custodial agreement
 32.4(508) Requirements upon custodians
 32.5(508,511) Deposit of securities

CHAPTER 33
 VARIABLE LIFE INSURANCE MODEL REGULATION

- 33.1(508A) Authority
 33.2(508A) Definitions
 33.3(508A) Qualification of insurer to issue variable life insurance
 33.4(508A) Insurance policy requirements
 33.5(508A) Reserve liabilities for variable life insurance
 33.6(508A) Separate accounts
 33.7(508A) Information furnished to applicants
 33.8(508A) Applications
 33.9(508A) Reports to policyholders
 33.10(508A) Foreign companies
 33.11 Reserved
 33.12(508A) Separability article

CHAPTER 34
 NONPROFIT HEALTH SERVICE CORPORATIONS

- 34.1(514) Purpose
 34.2(514) Definitions

- 34.3(514) Annual report requirements
- 34.4(514) Arbitration
- 34.5(514) Filing requirements
- 34.6(514) Participating hospital contracts
- 34.7(514) Composition, nomination, and election of board of directors

CHAPTER 35

ACCIDENT AND HEALTH INSURANCE

BLANKET ACCIDENT AND SICKNESS INSURANCE

- 35.1(509) Purpose
- 35.2(509) Scope
- 35.3(509) Definitions
- 35.4(509) Required provisions
- 35.5(509) Application and certificates not required
- 35.6(509) Facility of payment
- 35.7(509) General filing requirements
- 35.8(509) Electronic delivery of accident and health group insurance certificates
- 35.9 to 35.19 Reserved
- 35.20(509A) Life and health self-funded plans
- 35.21(509) Review of certificates issued under group policies

LARGE GROUP HEALTH INSURANCE COVERAGE

- 35.22(509) Purpose
- 35.23(509) Definitions
- 35.24(509) Eligibility to enroll
- 35.25(509) Special enrollments
- 35.26(509) Group health insurance coverage policy requirements
- 35.27(509) Methods of counting creditable coverage
- 35.28(509) Certificates of creditable coverage
- 35.29(509) Notification requirements
- 35.30 Reserved
- 35.31(509) Disclosure requirements
- 35.32(514C) Treatment options
- 35.33(514C) Emergency services
- 35.34(514C) Provider access
- 35.35(509) Reconstructive surgery

CONSUMER GUIDE

- 35.36(514K) Purpose
- 35.37(514K) Information filing requirements
- 35.38(514K) Limitation of information published
- 35.39(514C) Contraceptive coverage

CHAPTER 36

INDIVIDUAL ACCIDENT AND HEALTH—MINIMUM STANDARDS AND RATE HEARINGS

DIVISION I MINIMUM STANDARDS

- 36.1(514D) Purpose
- 36.2(514D) Applicability and scope
- 36.3(514D) Effective date
- 36.4(514D) Policy definitions
- 36.5(514D) Prohibited policy provisions

36.6(514D)	Accident and sickness minimum standards for benefits
36.7(514D)	Required disclosure provisions
36.8(507B)	Requirements for replacement
36.9(514D)	Filing requirements
36.10(514D)	Loss ratios
36.11(514D)	Certification
36.12(514D)	Severability
36.13 to 36.19	Reserved

DIVISION II
RATE HEARINGS

36.20(514D,83GA,SF2201) Rate hearings

CHAPTER 37
MEDICARE SUPPLEMENT INSURANCE

DIVISION I
MEDICARE SUPPLEMENT INSURANCE MINIMUM STANDARDS

37.1(514D)	Purpose
37.2(514D)	Applicability and scope
37.3(514D)	Definitions
37.4(514D)	Policy definitions and terms
37.5(514D)	Policy provisions
37.6(514D)	Minimum benefit standards for prestandardized Medicare supplement benefit plan policies or certificates issued for delivery prior to January 1, 1992
37.7(514D)	Benefit standards for 1990 standardized Medicare supplement benefit plan policies or certificates issued for delivery on or after January 1, 1992, and with an effective date for coverage prior to June 1, 2010
37.8(514D)	Benefit standards for 2010 standardized Medicare supplement benefit plan policies or certificates issued for delivery with an effective date for coverage on or after June 1, 2010
37.9(514D)	Standard Medicare supplement benefit plans for 1990 standardized Medicare supplement benefit plan policies or certificates with an effective date for coverage prior to June 1, 2010
37.10(514D)	Standard Medicare supplement benefit plans for 2010 standardized Medicare supplement benefit plan policies or certificates with an effective date for coverage on or after June 1, 2010
37.11(514D)	Medicare Select policies and certificates
37.12(514D)	Open enrollment
37.13(514D)	Standards for claims payment
37.14(514D)	Loss ratio standards and refund or credit of premium
37.15(514D)	Filing and approval of policies and certificates and premium rates
37.16(514D)	Permitted compensation arrangements
37.17(514D)	Required disclosure provisions
37.18(514D)	Requirements for application forms and replacement coverage
37.19(514D)	Standards for marketing
37.20(514D)	Appropriateness of recommended purchase and excessive insurance
37.21(514D)	Reporting of multiple policies
37.22(514D)	Prohibition against preexisting conditions, waiting periods, elimination periods and probationary periods in replacement policies or certificates
37.23(514D)	Prohibition against use of genetic information and requests for genetic testing
37.24(514D)	Prohibition against using SHIP prepared materials
37.25(514D)	Guaranteed issue for eligible persons
37.26(514D)	Severability

37.27 to 37.49 Reserved

DIVISION II
MEDICARE SUPPLEMENT ADVERTISING

37.50(507B,514D) Purpose
 37.51(507B,514D) Applicability
 37.52(507B,514D) Definitions
 37.53(507B,514D) Form and content of advertisements
 37.54(507B,514D) Testimonials or endorsements by third parties
 37.55(507B,514D) Use of statistics; jurisdictional licensing; status of insurer
 37.56(507B,514D) Identity of insurer
 37.57(507B,514D) Introductory, initial or special offers
 37.58(507B,514D) Enforcement procedures—certificate of compliance
 37.59(507B,514D) Filing for prior review

CHAPTER 38
COORDINATION OF BENEFITS

DIVISION I

38.1 to 38.11 Reserved

DIVISION II

38.12(509,514) Purpose and applicability
 38.13(509,514) Definitions
 38.14(509,514) Use of model COB contract provision
 38.15(509,514) Rules for coordination of benefits
 38.16(509,514) Procedure to be followed by secondary plan to calculate benefits and pay a claim
 38.17(509,514) Notice to covered persons
 38.18(509,514) Miscellaneous provisions

CHAPTER 39
LONG-TERM CARE INSURANCE

DIVISION I

39.1(514G) Purpose
 39.2(514G) Authority
 39.3(514G) Applicability and scope
 39.4(514G) Definitions
 39.5(514G) Policy definitions
 39.6(514G) Policy practices and provisions
 39.7(514G) Required disclosure provisions
 39.8(514G) Prohibition against postclaims underwriting
 39.9(514D,514G) Minimum standards for home health care benefits in long-term care insurance policies
 39.10(514D,514G) Requirement to offer inflation protection
 39.11(514D,514G) Requirements for application forms and replacement coverage
 39.12(514G) Reserve standards
 39.13(514D) Loss ratio
 39.14(514G) Filing requirement
 39.15(514D,514G) Standards for marketing
 39.16(514D,514G) Suitability
 39.17(514G) Prohibition against preexisting conditions and probationary periods in replacement policies or certificates
 39.18(514G) Standard format outline of coverage
 39.19(514G) Requirement to deliver shopper's guide

39.20(514G)	Policy summary and delivery of life insurance policies with long-term care riders
39.21(514G)	Reporting requirement for long-term care benefits funded through life insurance by acceleration of the death benefit
39.22(514G)	Unintentional lapse
39.23(514G)	Denial of claims
39.24(514G)	Incontestability period
39.25(514G)	Required disclosure of rating practices to consumers
39.26(514G)	Initial filing requirements
39.27(514G)	Reporting requirements
39.28(514G)	Premium rate schedule increases
39.29(514G)	Nonforfeiture
39.30(514G)	Standards for benefit triggers
39.31(514G)	Additional standards for benefit triggers for qualified long-term care insurance contracts
39.32(514G)	Penalties
39.33 to 39.40	Reserved

DIVISION II

INDEPENDENT REVIEW OF BENEFIT TRIGGER DETERMINATIONS

39.41(514G)	Purpose
39.42(514G)	Effective date
39.43(514G)	Definitions
39.44(514G)	Notice of benefit trigger determination and content
39.45(514G)	Notice of internal appeal decision and right to independent review
39.46(514G)	Independent review request
39.47(514G)	Certification process
39.48(514G)	Selection of independent review entity
39.49(514G)	Independent review process
39.50(514G)	Decision notification
39.51(514G)	Insurer information
39.52(514G)	Certification of independent review entity
39.53(514G)	Additional requirements
39.54(514G)	Toll-free telephone number
39.55(514G)	Insurance division application and reports
39.56 to 39.74	Reserved

DIVISION III

LONG-TERM CARE PARTNERSHIP PROGRAM

39.75(514H,83GA,HF723)	Purpose
39.76(514H,83GA,HF723)	Effective date
39.77(514H,83GA,HF723)	Definitions
39.78(514H,83GA,HF723)	Eligibility
39.79(514H,83GA,HF723)	Discontinuance of partnership program
39.80(514H,83GA,HF723)	Required disclosures
39.81(514H,83GA,HF723)	Form filings
39.82(514H,83GA,HF723)	Exchanges
39.83(514H,83GA,HF723)	Required policy terms and disclosures
39.84(514H,83GA,HF723)	Standards for marketing and suitability
39.85(514H,83GA,HF723)	Required reports

CHAPTER 40
HEALTH MAINTENANCE ORGANIZATIONS

(Health and Insurance—Joint Rules)

40.1(514B)	Definitions
40.2(514B)	Application
40.3(514B)	Inspection of evidence of coverage
40.4(514B)	Governing body and enrollee representation
40.5(514B)	Quality of care
40.6(514B)	Change of name
40.7(514B)	Change of ownership
40.8(514B)	Termination of services
40.9(514B)	Complaints
40.10(514B)	Cancellation of enrollees
40.11(514B)	Application for certificate of authority
40.12(514B)	Net worth
40.13(514B)	Fidelity bond
40.14(514B)	Annual report
40.15(514B)	Cash or asset management agreements
40.16	Reserved
40.17(514B)	Reinsurance
40.18(514B)	Provider contracts
40.19(514B)	Producers' duties
40.20(514B)	Emergency services
40.21(514B)	Reimbursement
40.22(514B)	Health maintenance organization requirements
40.23(514B)	Disclosure requirements
40.24(514B)	Provider access
40.25(514B)	Electronic delivery of accident and health group insurance certificates

CHAPTER 41
LIMITED SERVICE ORGANIZATIONS

41.1(514B)	Definitions
41.2(514B)	Application
41.3(514B)	Inspection of evidence of coverage
41.4(514B)	Governing body and enrollee representation
41.5(514B)	Quality of care
41.6(514B)	Change of name
41.7(514B)	Change of ownership
41.8(514B)	Complaints
41.9(514B)	Cancellation of enrollees
41.10(514B)	Application for certificate of authority
41.11(514B)	Net equity and deposit requirements
41.12(514B)	Fidelity bond
41.13(514B)	Annual report
41.14(514B)	Cash or asset management agreements
41.15(514B)	Reinsurance
41.16(514B)	Provider contracts
41.17(514B)	Producers' duties
41.18(514B)	Emergency services
41.19(514B)	Reimbursement
41.20(514B)	Limited service organization requirements
41.21(514B)	Disclosure requirements

CHAPTER 42
GENDER-BLENDED MINIMUM NONFORFEITURE
STANDARDS FOR LIFE INSURANCE

42.1(508)	Purpose
42.2(508)	Definitions
42.3(508)	Use of gender-blended mortality tables
42.4(508)	Unfair discrimination
42.5(508)	Separability
42.6(508)	2001 CSO Mortality Table

CHAPTER 43
ANNUITY MORTALITY TABLES FOR USE IN
DETERMINING RESERVE LIABILITIES FOR ANNUITIES

43.1(508)	Purpose
43.2(508)	Definitions
43.3(508)	Individual annuity or pure endowment contracts
43.4(508)	Group annuity or pure endowment contracts
43.5(508)	Application of the 1994 GAR Table
43.6(508)	Separability

CHAPTER 44
SMOKER/NONSMOKER MORTALITY TABLES
FOR USE IN DETERMINING MINIMUM RESERVE LIABILITIES
AND NONFORFEITURE BENEFITS

44.1(508)	Purpose
44.2(508)	Definitions
44.3(508)	Alternate tables
44.4(508)	Conditions
44.5(508)	Separability
44.6(508)	2001 CSO Mortality Table

INSURANCE HOLDING COMPANY SYSTEMS

CHAPTER 45
INSURANCE HOLDING COMPANY SYSTEMS

45.1(521A)	Purpose
45.2(521A)	Definitions
45.3(521A)	Subsidiaries of domestic insurers
45.4(521A)	Control acquisition of domestic insurer
45.5(521A)	Registration of insurers
45.6(521A)	Alternative and consolidated registrations
45.7(521A)	Exemptions
45.8(521A)	Disclaimers and termination of registration
45.9(521A)	Transactions subject to prior notice—notice filing
45.10(521A)	Extraordinary dividends and other distributions

CHAPTER 46
MUTUAL HOLDING COMPANIES

46.1(521A)	Purpose
46.2(521A)	Definitions
46.3(521A)	Application—contents—process
46.4(521A)	Plan of reorganization
46.5(521A)	Duties of the commissioner
46.6(521A)	Regulation—compliance

- 46.7(521A) Reorganization of domestic mutual insurer with mutual insurance holding company
- 46.8(521A) Reorganization of foreign mutual insurer with mutual insurance holding company
- 46.9(521A) Mergers of mutual insurance holding companies
- 46.10(521A) Stock offerings
- 46.11(521A) Regulation of holding company system
- 46.12(521A) Reporting of stock ownership and transactions

CHAPTER 47

VALUATION OF LIFE INSURANCE POLICIES

(Including New Select Mortality Factors)

- 47.1(508) Purpose
- 47.2(508) Application
- 47.3(508) Definitions
- 47.4(508) General calculation requirements for basic reserves and premium deficiency reserves
- 47.5(508) Calculation of minimum valuation standard for policies with guaranteed nonlevel gross premiums or guaranteed nonlevel benefits (other than universal life policies)
- 47.6(508) Calculation of minimum valuation standard for flexible premium and fixed premium universal life insurance policies that contain provisions resulting in the ability of a policyowner to keep a policy in force over a secondary guarantee period
- 47.7(508) 2001 CSO Mortality Table

VIATICAL AND LIFE SETTLEMENTS

CHAPTER 48

VIATICAL AND LIFE SETTLEMENTS

- 48.1(508E) Purpose and authority
- 48.2(508E) Definitions
- 48.3(508E) License requirements
- 48.4(508E) Disclosure statements
- 48.5(508E) Contract requirements
- 48.6(508E) Filing of forms
- 48.7(508E) Reporting requirements
- 48.8(508E) Examination or investigations
- 48.9(508E) Requirements and prohibitions
- 48.10(508E) Penalties; injunctions; civil remedies; cease and desist
- 48.11(252J) Suspension for failure to pay child support
- 48.12(261) Suspension for failure to pay student loan
- 48.13(272D) Suspension for failure to pay state debt
- 48.14(508E) Severability

CHAPTER 49

FINANCIAL INSTRUMENTS USED IN HEDGING TRANSACTIONS

- 49.1(511) Purpose
- 49.2(511) Definitions
- 49.3(511) Guidelines and internal control procedures
- 49.4(511) Documentation requirements
- 49.5(511) Trading requirements

SECURITIES

CHAPTER 50
REGULATION OF SECURITIES OFFERINGS AND THOSE WHO ENGAGE
IN THE SECURITIES BUSINESS

DIVISION I
DEFINITIONS AND ADMINISTRATION

50.1(502)	Definitions
50.2(502)	Cost of audit or inspection
50.3(502)	Interpretative opinions or no-action letters
50.4 to 50.9	Reserved

DIVISION II
REGISTRATION OF BROKER-DEALERS AND AGENTS

50.10(502)	Broker-dealer registrations, renewals, amendments, succession, and withdrawals
50.11(502)	Principals
50.12(502)	Agent and issuer registrations, renewals and amendments
50.13(502)	Agent continuing education requirements
50.14(502)	Broker-dealer record-keeping requirements
50.15(502)	Broker-dealer minimum financial requirements and financial reporting requirements
50.16(502)	Dishonest or unethical practices in the securities business
50.17(502)	Rules of conduct
50.18(502)	Limited registration of Canadian broker-dealers and agents
50.19(502)	Brokerage services by national and state banks
50.20(502)	Broker-dealers having contracts with national and state banks
50.21(502)	Brokerage services by credit unions, savings banks, and savings and loan institutions
50.22(502)	Broker-dealers having contracts with credit unions, savings banks, and savings and loan institutions
50.23 to 50.29	Reserved

DIVISION III
REGISTRATION OF INVESTMENT ADVISERS,
INVESTMENT ADVISER REPRESENTATIVES,
AND FEDERAL COVERED INVESTMENT ADVISERS

50.30(502)	Electronic filing with designated entity
50.31(502)	Investment adviser applications and renewals
50.32(502)	Application for investment adviser representative registration
50.33(502)	Examination requirements
50.34(502)	Notice filing requirements for federal covered investment advisers
50.35(502)	Withdrawal of investment adviser registration
50.36(502)	Investment adviser disclosure statement
50.37(502)	Cash solicitation
50.38(502)	Dishonest or unethical business practices of investment advisers and investment adviser representatives, or fraudulent or deceptive conduct by federal covered investment advisers
50.39(502)	Custody of client funds or securities by investment advisers
50.40(502)	Minimum financial requirements for investment advisers
50.41(502)	Bonding requirements for investment advisers
50.42(502)	Record-keeping requirements for investment advisers
50.43(502)	Financial reporting requirements for investment advisers
50.44(502)	Solely incidental services by certain professionals
50.45 to 50.49	Reserved

DIVISION IV
RULES COVERING ALL REGISTERED PERSONS

- 50.50(502) Internet advertising by broker-dealers, investment advisers, broker-dealer agents, investment adviser representatives, and federal covered investment advisers
- 50.51(502) Consent to service
- 50.52(252J) Denial, suspension or revocation of agent or investment adviser representative registration for failure to pay child support
- 50.53(261) Denial, suspension or revocation of agent or investment adviser representative registration for failure to pay debts owed to or collected by the college student aid commission
- 50.54(502) Use of senior-specific certifications and professional designations
- 50.55 to 50.59 Reserved

DIVISION V
REGISTRATION OF SECURITIES

- 50.60(502) Notice filings for investment company securities offerings
- 50.61(502) Registration of small corporate offerings
- 50.62(502) Streamlined registration for certain equity securities
- 50.63(502) Registration of multijurisdictional offerings
- 50.64(502) Form of financial statements
- 50.65(502) Reports contingent to registration by qualification
- 50.66(502) NASAA guidelines and statements of policy
- 50.67(502) Amendments to registration by qualification
- 50.68(502) Delivery of prospectus
- 50.69(502) Advertisements
- 50.70 to 50.79 Reserved

DIVISION VI
EXEMPTIONS

- 50.80(502) Uniform limited offering exemption
- 50.81(502) Notice filings for Rule 506 offerings
- 50.82(502) Notice filings for agricultural cooperative associations
- 50.83(502) Unsolicited order exemption
- 50.84(502) Solicitation of interest exemption
- 50.85(502) Internet offers exemption
- 50.86(502) Denial, suspension, revocation, condition, or limitation of limited offering transaction exemption
- 50.87(502) Nonprofit securities exemption
- 50.88(502) Transactions with specified investors
- 50.89 to 50.99 Reserved

DIVISION VII
FRAUD AND OTHER PROHIBITED CONDUCT

- 50.100(502) Fraudulent practices
- 50.101(502) Rescission offers
- 50.102(502) Fraudulent, deceptive or manipulative act, practice, or course of business in providing investment advice
- 50.103(502) Investment advisory contracts
- 50.104 to 50.109 Reserved

DIVISION VIII
VIATICAL SETTLEMENT INVESTMENT CONTRACTS

- 50.110(502) Application by viatical settlement investment contract issuers and registration of agents to sell viatical settlement investment contracts
- 50.111(502) Risk disclosure

- 50.112(502) Advertising of viatical settlement investment contracts
 50.113(502) Duty to disclose

CHAPTERS 51 to 53

Reserved

CHAPTER 54

RESIDENTIAL SERVICE CONTRACTS

- 54.1(523C) Purpose
 54.2(523C) Definitions
 54.3(523C) Title
 54.4(523C) Scope
 54.5(523C) Application of insurance laws
 54.6(523C) Exemptions
 54.7 to 54.9 Reserved
 54.10(523C) Administration
 54.11(523C) Misrepresentations of government approval
 54.12(523C) Public access to hearings
 54.13(523C) Public access to records
 54.14(523C) Procedure for public complaints
 54.15(523C) Fees
 54.16(523C) Forms
 54.17 to 54.19 Reserved
 54.20(523C) Service company licenses
 54.21(523C) Suspension or revocation of license
 54.22(523C) Licenses not transferable
 54.23 to 54.29 Reserved
 54.30(523C) Forms of contracts
 54.31 to 54.39 Reserved
 54.40(523C) Cessation of business—records
 54.41(523C) Records
 54.42(523C) Annual reports
 54.43 to 54.49 Reserved
 54.50(523C) Prohibited acts or practices
 54.51(523C) Orders
 54.52(523C) Investigations and subpoenas
 54.53(523C) Audits

CHAPTER 55

LICENSING OF PUBLIC ADJUSTERS

- 55.1(82GA,HF499) Purpose
 55.2(82GA,HF499) Definitions
 55.3(82GA,HF499) License required to operate as public adjuster
 55.4(82GA,HF499) Application for license
 55.5(82GA,HF499) Issuance of resident license
 55.6(82GA,HF499) Public adjuster examination
 55.7(82GA,HF499) Exemptions from examination
 55.8(82GA,HF499) Nonresident license reciprocity
 55.9(82GA,HF499) Terms of licensure
 55.10(82GA,HF499) Evidence of financial responsibility
 55.11(82GA,HF499) Continuing education
 55.12(82GA,HF499) License denial, nonrenewal or revocation

55.13(82GA,HF499)	Reinstatement or reissuance of a license after suspension, revocation or forfeiture in connection with disciplinary matters; and forfeiture in lieu of compliance
55.14(82GA,HF499)	Contract between public adjuster and insured
55.15(82GA,HF499)	Escrow accounts
55.16(82GA,HF499)	Record retention
55.17(82GA,HF499)	Standards of conduct of public adjuster
55.18(82GA,HF499)	Public adjuster fees
55.19(82GA,HF499)	Penalties
55.20(82GA,HF499)	Fees
55.21(82GA,HF499)	Severability

CHAPTER 56

WORKERS' COMPENSATION GROUP SELF-INSURANCE

56.1(87,505)	General provisions
56.2(87,505)	Definitions
56.3(87,505)	Requirements for self-insurance
56.4	Reserved
56.5(87,505)	Excess insurance
56.6(87,505)	Rates and reporting of rates
56.7(87,505)	Special provisions
56.8(87,505)	Certificate of approval; termination
56.9(87,505)	Examinations
56.10(87,505)	Board of trustees—membership, powers, duties, and prohibitions
56.11(87,505)	Association membership; termination; liability
56.12(87,505)	Requirements of sales agents
56.13(87,505)	Requirements for continued approval
56.14(87,505)	Misrepresentation prohibited
56.15(87,505)	Investments
56.16(87,505)	Refunds
56.17(87,505)	Premium payment; reserves
56.18(87,505)	Deficits and insolvencies
56.19(87,505)	Grounds for nonrenewal or revocation of a certificate of relief from insurance
56.20(87,505)	Hearing and appeal
56.21(87,505)	Existing approved self-insurers
56.22(87,505)	Severability clause

CHAPTER 57

WORKERS' COMPENSATION SELF-INSURANCE FOR INDIVIDUAL EMPLOYERS

57.1(87,505)	General provisions
57.2(87,505)	Definitions
57.3(87,505)	Requirements for self-insurance
57.4(87,505)	Additional security requirements
57.5(87,505)	Application for an individual self-insurer
57.6	Reserved
57.7(87,505)	Excess insurance
57.8(87,505)	Insolvency
57.9(87,505)	Renewals
57.10(87,505)	Periodic examination
57.11(87,505)	Grounds for nonrenewal or revocation of a certificate of relief from insurance
57.12(87,505)	Hearing and appeal

- 57.13(87,505) Existing approved self-insurers
 57.14(87,505) Severability clause

CHAPTER 58
 THIRD-PARTY ADMINISTRATORS

- 58.1(510) Purpose
 58.2(510) Definitions
 58.3(505,510) Registration required
 58.4(510) Third-party administrator duties
 58.5(510) Renewal procedure
 58.6(505,510) Responsibilities of the insurer
 58.7(505,510) Written agreement
 58.8(510) Compensation to the third-party administrator
 58.9(510) Disclosure of charges and fees
 58.10(510) Delivery of materials to covered individuals
 58.11(510) Annual report and fee
 58.12(510) Change of information
 58.13(510) Inquiry by commissioner
 58.14(510) Complaints
 58.15(510) Periodic examination
 58.16(510) Grounds for denial, nonrenewal, suspension or revocation of certificate of registration
 58.17(510) Confidential information
 58.18(510) Fees
 58.19(510) Severability clause
 58.20(510) Compliance date

CHAPTER 59
 PHARMACY BENEFITS MANAGERS

- 59.1(510B) Purpose
 59.2(510B) Definitions
 59.3(510B) Timely payment of pharmacy claims
 59.4(510B) Study
 59.5(510B) Complaints
 59.6(510B) Auditing practices
 59.7(510B) Termination of pharmacy contracts

CHAPTER 60
 WORKERS' COMPENSATION INSURANCE RATE FILING PROCEDURES

- 60.1(515A) Purpose
 60.2(515A) Definitions, scope, authority
 60.3(515A) General filing requirements
 60.4(515A) Rate or manual rule filing
 60.5(515A) Violation and penalties
 60.6(515A) Severability
 60.7(515A) Effective date

CHAPTERS 61 to 69
 Reserved

*MANAGED HEALTH CARE*CHAPTER 70
UTILIZATION REVIEW

- 70.1(505,514F) Purpose
- 70.2(505,514F) Definitions
- 70.3(505,514F) Application
- 70.4(505,514F) Standards
- 70.5(505,514F) Retroactive application
- 70.6(505,514F) Variances allowed
- 70.7(505,514F) Confidentiality
- 70.8(76GA,ch1202) Utilization review of postdelivery benefits and care
- 70.9(505,507B,514F) Enforcement
- 70.10(514F) Credentialing—retrospective payment

*HEALTH BENEFIT PLANS*CHAPTER 71
SMALL GROUP HEALTH BENEFIT PLANS

- 71.1(513B) Purpose
- 71.2(513B) Definitions
- 71.3(513B) Applicability and scope
- 71.4(513B) Establishment of classes of business
- 71.5(513B) Transition for assumptions of business from another carrier
- 71.6(513B) Restrictions relating to premium rates
- 71.7(513B) Requirement to insure entire groups
- 71.8(513B) Case characteristics
- 71.9(513B) Application to reenter state
- 71.10(513B) Creditable coverage
- 71.11(513B) Rules related to fair marketing
- 71.12(513B) Status of carriers as small employer carriers
- 71.13(513B) Restoration of coverage
- 71.14(513B) Basic health benefit plan and standard health plan policy forms
- 71.15(513B) Methods of counting creditable coverage
- 71.16(513B) Certificates of creditable coverage
- 71.17(513B) Notification requirements
- 71.18(513B) Special enrollments
- 71.19(513B) Disclosure requirements
- 71.20(514C) Treatment options
- 71.21(514C) Emergency services
- 71.22(514C) Provider access
- 71.23(513B) Reconstructive surgery
- 71.24(514C) Contraceptive coverage
- 71.25(513B) Suspension of the small employer health reinsurance program
- 71.26(513B) Uniform health insurance application form

CHAPTER 72

LONG-TERM CARE ASSET PRESERVATION PROGRAM

- 72.1(249G) Purpose
- 72.2(249G) Applicability and scope
- 72.3(249G) Definitions
- 72.4(249G) Qualification of long-term care insurance policies and certificates
- 72.5(249G) Standards for marketing

72.6(249G)	Minimum benefit standards for qualifying policies and certificates
72.7(249G)	Required policy and certificate provisions
72.8(249G)	Prohibited provisions in certified policies or certificates
72.9(249G)	Reporting requirements
72.10(249G)	Maintaining auditing information
72.11(249G)	Reporting on asset protection
72.12(249G)	Preparing a service summary
72.13(249G)	Plan of action
72.14(249G)	Auditing and correcting deficiencies in issuer record keeping
72.15(249G)	Separability

CHAPTER 73

HEALTH INSURANCE PURCHASING COOPERATIVES

73.1(75GA,ch158)	Purpose
73.2(75GA,ch158)	Applicability and scope
73.3(75GA,ch158)	Definitions
73.4(75GA,ch158)	Division duties—application—filing requirements—license—audits and examinations
73.5(75GA,ch158)	Fidelity bond—letter of credit
73.6(75GA,ch158)	Annual report
73.7(75GA,ch158)	Business plan
73.8(75GA,ch158)	Participants
73.9(75GA,ch158)	Health insurance purchasing cooperative—product offerings—exemptions
73.10(75GA,ch158)	Insurance risk
73.11(75GA,ch158)	Rates
73.12(75GA,ch158)	Election—disclosure and confidentiality
73.13(75GA,ch158)	Structure—merger and consolidation
73.14(75GA,ch158)	Conflict of interest
73.15(75GA,ch158)	Nondiscrimination and retaliatory protections
73.16(75GA,ch158)	Annual health insurance or health care benefits plan selection
73.17(75GA,ch158)	License subject to conditions—waivers
73.18(75GA,ch158)	Procedures
73.19(75GA,ch158)	Data collection—quality evaluation
73.20(75GA,ch158)	Examination—costs
73.21(75GA,ch158)	Trade practices
73.22(75GA,ch158)	Grounds for denial, nonrenewal, suspension or revocation of certificate
73.23(75GA,ch158)	Hearing and appeal
73.24(75GA,ch158)	Solvency

CHAPTER 74

HEALTH CARE ACCESS

74.1(505)	Purpose
74.2(505)	Applicability and scope
74.3(505)	Definitions
74.4(505)	Access to health care or health insurance for an employee
74.5(505)	Employer participation
74.6(505)	Violation of chapter

CHAPTER 75

IOWA INDIVIDUAL HEALTH BENEFIT PLANS

75.1(513C)	Purpose
75.2(513C)	Definitions
75.3(513C)	Applicability and scope

75.4(513C)	Establishment of blocks of business
75.5(513C)	Transition for assumptions of business from another carrier or ODS
75.6(513C)	Restrictions relating to premium rates
75.7(513C)	Availability of coverage
75.8(513C)	Disclosure of information
75.9(513C)	Standards to ensure fair marketing
75.10(513C)	Basic health benefit plan and standard health benefit plan policy forms
75.11(513C)	Maternity benefit rider
75.12(513C)	Disclosure requirements
75.13(514C)	Treatment options
75.14(514C)	Emergency services
75.15(514C)	Provider access
75.16(514C)	Diabetic coverage
75.17(513C)	Reconstructive surgery
75.18(514C)	Contraceptive coverage

CHAPTER 76 EXTERNAL REVIEW

76.1(514J)	Purpose
76.2(514J)	Applicable law
76.3(514J)	Notice of coverage decision and content
76.4(514J)	External review request
76.5(514J)	Certification process
76.6(514J)	Expedited review
76.7(514J)	Decision notification
76.8(514J)	Carrier information
76.9(514J)	Certification of independent review entity

CHAPTER 77 MULTIPLE EMPLOYER WELFARE ARRANGEMENTS

77.1(507A)	Certificate of registration
77.2(507A)	Application for certificate of registration
77.3(507A)	Financial requirements
77.4(507A)	Policy or contract
77.5(507A)	Disclosure
77.6(507A)	Filing fee
77.7(507A)	Agreements and management contracts
77.8(507A)	Examination
77.9(507A)	Trade practices
77.10(507A)	Insolvency
77.11(507A)	Suspension or revocation of certificate

CHAPTER 78 UNIFORM PRESCRIPTION DRUG INFORMATION CARD

78.1(514L)	Purpose
78.2(514L)	Definitions
78.3(514L)	Implementation

CHAPTER 79 Reserved

*INSURANCE COVERAGE FOR
PEDIATRIC PREVENTIVE SERVICES*

CHAPTER 80
WELL-CHILD CARE

80.1(505,514H)	Purpose
80.2(505,514H)	Applicability and scope
80.3(505,514H)	Effective date
80.4(505,514H)	Policy definitions
80.5(505,514H)	Benefit plan

CHAPTER 81
POSTDELIVERY BENEFITS AND CARE

81.1(514C)	Purpose
81.2(514C)	Applicability and scope
81.3(514C)	Postdelivery benefits

CHAPTERS 82 to 89
Reserved

CHAPTER 90
FINANCIAL AND HEALTH INFORMATION REGULATION

90.1(505)	Purpose and scope
90.2(505)	Definitions

DIVISION I
RULES FOR FINANCIAL INFORMATION

90.3(505)	Initial privacy notice to consumers required
90.4(505)	Annual privacy notice to customers required
90.5(505)	Information to be included in privacy notices
90.6(505)	Form of opt-out notice to consumers and opt-out methods
90.7(505)	Revised privacy notices
90.8(505)	Delivery of notice
90.9(505)	Limits on disclosure of nonpublic personal financial information to nonaffiliated third parties
90.10(505)	Limits on redisclosure and reuse of nonpublic personal financial information
90.11(505)	Limits on sharing account number information for marketing purposes
90.12(505)	Exception to opt-out requirements for disclosure of nonpublic personal financial information for service providers and joint marketing
90.13(505)	Exceptions to notice and opt-out requirements for disclosure of nonpublic personal financial information for processing and servicing transactions
90.14(505)	Other exceptions to notice and opt-out requirements for disclosure of nonpublic personal financial information
90.15(505)	Notice through a Web site
90.16(505)	Licensee exception to notice requirement

DIVISION II
RULES FOR HEALTH INFORMATION

90.17(505)	Disclosure of nonpublic personal health information
90.18(505)	Authorizations
90.19(505)	Delivery of authorization request
90.20(505)	Relationship to federal rules
90.21(505)	Relationship to state laws
90.22(505)	Protection of Fair Credit Reporting Act
90.23(505)	Nondiscrimination

90.24(505)	Severability
90.25(505)	Penalties
90.26(505)	Effective dates
90.27 to 90.36	Reserved

DIVISION III
SAFEGUARDING CUSTOMER INFORMATION

90.37(505)	Information security program
90.38(505)	Examples of methods of development and implementation
90.39(505)	Penalties
90.40(505)	Effective date

CHAPTER 91
2001 CSO MORTALITY TABLE

91.1(508)	Purpose
91.2(508)	Definitions
91.3(508)	2001 CSO Mortality Table
91.4(508)	Conditions
91.5(508)	Applicability of the 2001 CSO Mortality Table to 191—Chapter 47, Valuation of Life Insurance Policies
91.6(508)	Gender-blended table
91.7(508)	Separability

CHAPTER 92
UNIVERSAL LIFE INSURANCE

92.1(508)	Purpose and authority
92.2(508)	Definitions
92.3(508)	Scope
92.4(508)	Valuation
92.5(508)	Nonforfeiture
92.6(508)	Mandatory policy provisions
92.7(508)	Disclosure requirements
92.8(508)	Periodic disclosure to policyowner
92.9(508)	Interest-indexed universal life insurance policies
92.10(508)	Applicability

CHAPTER 93
CONDUIT DERIVATIVE TRANSACTIONS

93.1(511,521A)	Purposes
93.2(511,521A)	Definitions
93.3(511,521A)	Provisions not applicable
93.4(511,521A)	Standards for conduit derivative transactions
93.5(511,521A)	Internal controls
93.6(511,521A)	Reporting requirements for conduit derivative transactions
93.7(511,521A)	Conduit ownership
93.8(511,521A)	Exemption from applicability

CHAPTER 94
PREFERRED MORTALITY TABLES FOR USE
IN DETERMINING MINIMUM RESERVE LIABILITIES

94.1(508)	Purpose
94.2(508)	Definitions
94.3(508)	2001 CSO Preferred Class Structure Mortality Table

- 94.4(508) Conditions
- 94.5(508) Separability

CHAPTER 95

DETERMINING RESERVE LIABILITIES FOR PRENEED LIFE INSURANCE

- 95.1(508) Authority
- 95.2(508) Scope
- 95.3(508) Purpose
- 95.4(508) Definitions
- 95.5(508) Minimum valuation mortality standards
- 95.6(508) Minimum valuation interest rate standards
- 95.7(508) Minimum valuation method standards
- 95.8(508) Transition rules
- 95.9(508) Effective date

CHAPTER 96

Reserved

CHAPTER 97

ACCOUNTING FOR CERTAIN DERIVATIVE INSTRUMENTS USED TO HEDGE
THE GROWTH IN INTEREST CREDITED FOR INDEXED INSURANCE PRODUCTS
AND ACCOUNTING FOR THE INDEXED INSURANCE PRODUCTS RESERVE

- 97.1(508) Authority
- 97.2(508) Purpose
- 97.3(508) Definitions
- 97.4(508) Asset accounting
- 97.5(508) Indexed annuity product reserve calculation methodology
- 97.6(508) Indexed life product reserve calculation methodology
- 97.7(508) Other requirements

CHAPTER 98

ANNUAL FINANCIAL REPORTING REQUIREMENTS

- 98.1(505) Authority
- 98.2(505) Purpose
- 98.3(505) Definitions
- 98.4(505) General requirements related to filing and extensions for filing of annual audited financial reports and audit committee appointment
- 98.5(505) Contents of annual audited financial report
- 98.6(505) Designation of independent certified public accountant
- 98.7(505) Qualifications of independent certified public accountant
- 98.8(505) Consolidated or combined audits
- 98.9(505) Scope of audit and report of independent certified public accountant
- 98.10(505) Notification of adverse financial condition
- 98.11(505) Communication of Internal Control Related Matters Noted in an Audit
- 98.12(505) Definition, availability and maintenance of independent certified public accountants' work papers
- 98.13(505) Requirements for audit committees
- 98.14(505) Conduct of insurer in connection with the preparation of required reports and documents
- 98.15(505) Management's Report of Internal Control Over Financial Reporting
- 98.16(505) Exemptions
- 98.17(505) Letter to insurer with accountant's qualifications
- 98.18(505) Canadian and British companies

- 98.19(505) Severability provision
 98.20(505) Effective date

CHAPTER 99

LIMITED PURPOSE SUBSIDIARY LIFE INSURANCE COMPANIES

- 99.1(505,508) Authority
 99.2(505,508) Purpose
 99.3(505,508) Definitions
 99.4(505,508) Formation of LPS
 99.5(505,508) Certificate of authority
 99.6(505,508) Capital and surplus
 99.7(505,508) Plan of operation
 99.8(505,508) Dividends and distributions
 99.9(505,508) Reports and notifications
 99.10(505,508) Material transactions
 99.11(505,508) Investments
 99.12(508) Securities
 99.13(505,508) Permitted reinsurance
 99.14(505,508) Certification of actuarial officer
 99.15(505,508) Effective date

REGULATED INDUSTRIES

SALES OF CEMETERY MERCHANDISE, FUNERAL MERCHANDISE AND FUNERAL SERVICES

CHAPTER 100

GENERAL PROVISIONS

- 100.1(523A) Purpose
 100.2(523A) Definitions
 100.3(523A) Contact and correspondence
 100.4(523A) Fees

CHAPTER 101

TRUST DEPOSITS AND TRUST FUNDS

- 101.1(523A) Trust income withdrawals
 101.2(523A) Amount of trust income withdrawn
 101.3(523A) Allocation of trust income to purchasers' accounts
 101.4(523A) Credit for trust income withdrawn
 101.5(523A) Time period during which trust income may be withdrawn
 101.6(523A) Application of contract law
 101.7(523A) Consumer price index adjustment
 101.8(523A) Cancellation refunds

CHAPTER 102

WAREHOUSED MERCHANDISE

- 102.1(523A) Funeral and cemetery merchandise delivered to the purchaser or warehoused
 102.2(523A) Storage facilities

CHAPTER 103

LICENSING OF PRENEED SELLERS AND SALES AGENTS

- 103.1(523A) Requirement for a preneed seller license or a sales agent license
 103.2(523A) Application and licensing of preneed seller or sales agent
 103.3(523A) Change of ownership or sale of business of preneed seller
 103.4(523A) License renewal
 103.5(523A) Denial of license applications or of applications for renewal

- 103.6(523A) Reinstatement or reissuance of a license after suspension, revocation or forfeiture in connection with disciplinary matters; and forfeiture in lieu of compliance
- 103.7(252J) Suspension for failure to pay child support
- 103.8(261) Suspension for failure to pay student loan

CHAPTER 104

CONTINUING EDUCATION FOR SALES AGENTS

- 104.1(523A) Continuing education requirements
- 104.2(523A) Acceptable areas of continuing education
- 104.3(523A) Academic coursework
- 104.4(523A) Effective date
- 104.5(523A) Compliance period
- 104.6(523A) Denial of sales agent license renewal application
- 104.7(523A) Disqualification and replacement of credits
- 104.8(523A) Current mailing address
- 104.9(523A) Proof of completion of continuing education requirements
- 104.10(523A) Standards for continuing education activities
- 104.11(523A) Qualifications of presenters and proof of attendance
- 104.12(523A) Reviews
- 104.13(523A) Exemption

CHAPTER 105

STANDARDS OF CONDUCT AND PROHIBITED PRACTICES

- 105.1(523A) Purpose
- 105.2(523A) Numbering purchase agreements
- 105.3(523A) Records maintenance
- 105.4(523A) Annual reports
- 105.5(523A) Fidelity bond or insurance
- 105.6(523A) Grounds for discipline
- 105.7(523A) Prohibition on sales activities and practices without a license or without an appointment

CHAPTER 106

DISCIPLINARY PROCEDURES

- 106.1(523A) Investigations
- 106.2(17A,523A) Penalties
- 106.3(17A,523A) Administrative procedures

CHAPTERS 107 to 109

Reserved

CHAPTER 110

STANDARDS AND COMMISSIONER'S AUTHORITY FOR COMPANIES
DEEMED TO BE IN HAZARDOUS FINANCIAL CONDITION

- 110.1(505) Authority
- 110.2(505) Purpose
- 110.3(505) Definition
- 110.4(505) Standards
- 110.5(505) Commissioner's authority
- 110.6(505) Judicial review
- 110.7(505) Separability
- 110.8(505) Effective date