

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(505) Annual audited financial reports
- 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 AGENTS

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(522J)	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
Reserved

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)	Mitigation of responsibility
15.73(507B)	Record keeping

15.74 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

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

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(509,514) Purpose
- 38.2(509,514) Applicability
- 38.3(509,514) Definitions
- 38.4(509,514) Model COB contract provision

38.5(509,514)	Order of benefits
38.6(509,514)	Reduction in a plan's benefits when it is secondary—general
38.7(509,514)	Reasonable cash value of services
38.8(509,514)	Excess and other nonconforming provisions
38.9(509,514)	Allowable expense
38.10(509,514)	Subrogation
38.11(509,514)	Effective date—existing contracts

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
38.19(509,514)	Effective date for existing contracts

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

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(510)	Application
58.4(510)	Application by corporation, association or benefit society
58.5(510)	Surety bond
58.6(510)	Waiver procedure
58.7(510)	Change of information
58.8(510)	Inquiry by commissioner
58.9(510)	Renewal procedure
58.10(510)	Periodic examination
58.11(510)	Grounds for denial, nonrenewal, suspension or revocation of certificate
58.12(510)	Hearing and appeal
58.13(510)	Severability clause

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

CHAPTERS 96 and 97

Reserved

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

Reserved

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