

191—72.12(514H) Preparing a service summary.

72.12(1) Each issuer shall prepare a service summary at the client's request specifically for the policyholder or certificate holder applying for Medicaid. The issuer shall also prepare a service summary when the policyholder or certificate holder has exhausted benefits under the policy or certificate or when the policy or certificate ceases to be in force for a reason other than the death of the policyholder or certificate holder, whichever occurs first.

72.12(2) The service summary shall identify the following:

- a.* The specific qualified policy or certificate.
- b.* The total benefits paid for services rendered to date.
- c.* The amount qualifying for asset protection.

This service summary is separate and in addition to any other information requirement in this chapter.

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