Noninsurance Benefits Checklist

Every effort has been made to ensure the accuracy of the information in this document. All parties should consult the Texas Insurance Code (TIC), the Texas Administrative Code (TAC), and other applicable laws.

Important Note

A "noninsurance benefit" means a good or service provided or disclosed as part of a policy or certificate of insurance that is reasonably related to the type of policy or certificate being issued.

Required Provisions - TIC Section 1701.061 and 28 TAC Section 21.4805

A policy, contract or certificate form filing that includes a noninsurance benefit shall also include:

Page _____: A description of the noninsurance benefit must be provided. The description must be sufficiently specific to provide information about the nature, character, purpose, and scope of the benefit.

A notice fully disclosing the noninsurance benefit to the policyholder, contract holder or certificate holder must be provided. Full disclosure includes the following:

Page _____: An explanation of how the noninsurance benefit may be obtained.

A statement disclosing:

Page _____: whether acceptance or declination of the noninsurance benefit is optional to the policyholder, contract holder, certificate holder or as applicable, other individual covered person;

Page _____: the identifiable charge and amount, if any, for a noninsurance benefit that an individual covered person has the option to accept or decline;

Page _____: the means by which the policyholder, contract holder, certificate holder or other person entitled to the benefit may obtain the benefit in the event the provider of the benefit, if other than the insurer, fails to provide or to continue to provide the benefit as set out in the policy, contract, or certificate;

Page ______: a statement providing information about the nature, character, and purpose of the benefit, as well as any limitations associated with or applicable to the benefit

Page _____: A statement explaining any condition on which termination of the noninsurance benefit will occur must be provided. The statement must include a reasonable notice and pre-termination period in circumstances where the condition triggeringtermination is the insurer's decision to discontinue offering or providing the benefit.

Wellness Benefits - <u>TIC Section 1201.013</u> and <u>Section 1501.107</u>, and <u>28 TAC Section 21.4701 - 21.4708</u>:

Applies to small and large employer health benefit plans, individual and group accident, and health insurance policies, with respect to a policy or plan that establishes premium discounts, rebates, or reductions in otherwise applicable copayments, coinsurance, or deductibles, or any combination of these incentives, in return for participation in programs designed to promote disease prevention, wellness, and health.

Wellness programs must meet the requirements specified in 28 TAC Sections 21.4706 - 21.4708:

Page _____: **Participatory Wellness Programs:** a program with participation as sole basis for reward eligibility and that contains no condition for obtaining a reward premised on an individual satisfying a standard associated with a health factor; program must be made available to all individuals eligible for coverage under the plan - <u>28 TAC Section 21.4706(a) and (b)</u>.

Page _____: Activity-Only Wellness Programs: a health-contingent program that requires an individual to perform or complete an activity related to a health factor in order to obtain rewards, but does not require the individual to attain or maintain a specific health outcome - <u>28 TAC</u> Section 21.4707(a) and (b).

Page ______: **Outcome-Based Wellness Programs:** a program that requires an individual to attain or maintain a specific health outcome in order to obtain a reward - <u>28 TAC Section</u> <u>21.4708(a) and (b)</u>.