

Sec. 38a-505-10. Required disclosure provisions

(A) General Rules.

(1) Each individual policy of accident and sickness insurance or fraternal benefit society certificate shall include a renewal, continuation, or non-renewal provision. The language or specifications of such provision must be consistent with the type of contract to be issued. Such provision shall be appropriately captioned, shall appear on the first page of the policy, and shall clearly state the duration, where limited, of renewability and the duration of the term of coverage for which the policy is issued and for which it may be renewed.

(2) Except for riders or endorsements by which the insurer effectuates a request made in writing by the policyholder or exercises a specifically reserved right under the policy, all riders or endorsements added to a policy after date of issue or at reinstatement or renewal which reduce or eliminate benefits or coverage in the policy shall require signed acceptance by the policyholder. After date of policy issue, any rider or endorsement which increases benefits or coverage with a concomitant increase in premium during the policy term must be agreed to in writing signed by the insured, except if the increase benefit or coverage is required by law.

(3) Where a separate additional premium is charged for benefits provided in connection with riders or endorsements, such premium charge shall be set forth in the policy.

(4) A policy which provides for the payment of benefits based on standards described as "usual and customary," "reasonable and customary," or words of similar import shall include a definition of such terms and an explanation of such terms in its accompanying outline of coverage.

(5) If a policy contains any limitations with respect to pre-existing conditions, such limitations must appear as a separate paragraph of the policy and be labeled as "Pre-existing Conditions Limitations."

(6) All accident only policies shall contain a prominent statement on the first page of the policy or attached thereto in either contrasting color or in boldface type at least equal to the size of type used for policy captions, a prominent statement as follows: "This is an accident only policy and it does not pay benefits for loss from sickness."

(7) All policies, except single premium non-renewable policies, shall have a notice prominently printed on the first page of the policy or attached thereto stating in substance that the policyholder shall have the right to return the policy within ten (10) days of its delivery and to have the premium refunded if, after examination of the policy, the policyholder is not satisfied for any reason.

(8) If age is to be used as a determining factor for reducing the maximum aggregate benefits made available in the policy as originally issued, such fact must be prominently set forth in the outline of coverage.

(9) If a policy contains a conversion privilege, it shall comply, in substance, with the following: The caption of the provision shall be "Conversion Privilege" or words of similar import. The provision shall indicate the persons eligible for conversion, the circumstances applicable to the conversion privilege, including any limitations on the conversion, and the person by whom the conversion privilege may be exercised. The provision shall specify the benefits to be provided on conversion or may state that the converted coverage will be as provided on a policy form then being used by the insurer for that purpose.

(B) **Outline of Coverage Requirements for Individual Coverages**—No individual accident and sickness insurance policy or fraternal benefit society certificate subject to this regulation shall be delivered or issued for delivery in this State unless an appropriate outline of coverage as prescribed in Sections 38a-505-10 (C) through 38a-505-10 (K) is completed as to such policy or contract; and

(1) Is either delivered with the policy; or

(2) Delivered to the applicant at the time application is made and acknowledgement of receipt or certification of delivery of such outline of coverage is provided to the insurer.

If an outline of coverage was delivered at the time of application and the policy or contract is issued on a basis which would require revision of the outline, a substitute outline of coverage properly describing the policy or contract must accompany the policy or contract when it is delivered and contain the following statement, in no less than twelve (12) point type, immediately above the company name: “NOTICE: Read this outline of coverage carefully. It is *not* identical to the outline of coverage provided upon application and the coverage originally applied for has not been issued.”

The appropriate outline of coverage for policies or contracts providing hospital coverage which only meets the standards of Section 38a-505-9 (B) shall be that statement contained in Section 38a-505-10 (C). The appropriate outline of coverage for policies providing coverage which meets the standards of both Sections 38a-505-9 (B) and 38a-505-10 (C) shall be the statement contained in Section 38a-505-9 (E). The appropriate outline of coverage for policies providing coverage which meets the standards of both Sections 38a-505-9 (B) and 38a-505-9 (E) or Sections 38a-505-9 (C) and 38a-505-9 (E) or Sections 38a-505-9 (B), 38a-505-9 (C) and 38a-505-9 (E) shall be the statement contained in Section 38a-505-10 (C).

In any other case where the prescribed outline of coverage is inappropriate for the coverage provided by the policy or contract, an alternate outline of coverage may be submitted to the Commissioner for prior approval.

(C) **Basic Hospital Expense Coverage (Outline of Coverage)**—An outline of coverage, in the form prescribed below, shall be issued in connection with policies meeting the standards of Section 38a-505-9 (B). The items included in the outline of coverage *must appear in the sequence prescribed*.

(Company Name)

Basic Hospital Expense Coverage

Outline of Coverage

(1) **Read Your Policy Carefully**—This outline of coverage provides a very brief description of the important features of your policy. This is not the insurance contract and only the actual policy provisions will control. The policy itself sets forth in detail the rights and obligations of both you and your insurance company. It is, therefore, important that you **READ YOUR POLICY CAREFULLY!**

(2) **Basic Hospital Expense Coverage**—Policies of this category are designed to provide to persons insured coverage for hospital expenses incurred as a result of a covered accident or sickness. Coverage is provided for daily hospital room and board, miscellaneous hospital

services, and hospital outpatient services, subject to any limitations, deductibles and co-payment requirements set forth in the policy. Coverage is not provided for physician's or surgeon's fees or *unlimited* hospital expenses.

(3) (A brief *specific* description of the benefits, including dollar amounts and number of days duration where applicable, contained in *this policy*, in the following order:

- (a) Daily hospital room and board;
- (b) Miscellaneous hospital services;
- (c) Hospital outpatient services; and
- (d) Other benefits, if any.

*NOTE: The above description of benefits shall be stated clearly and concisely, and shall include a description of any deductible or co-payment provision applicable to the benefits described.)

(4) (A description of any policy provisions which exclude, eliminate, restrict, reduce, limit, delay, or in any other manner operate to qualify payment of benefits described in (3) above.)

(5) (A description of policy provisions respecting renewability or continuation of coverage, including age restrictions or any reservation of right to change premiums.)

(D) **Basic Medical-Surgical Expense Coverage** (Outline of Coverage)—An outline of coverage in the form prescribed below, shall be issued in connection with policies meeting the standards of Section 38a-505-9 (C). The items included in the outline of coverage *must appear in the sequence prescribed*.

(Company Name)

Basic Medical-Surgical Expense Coverage

Outline of Coverage

(1) **Read Your Policy Carefully**—This outline of coverage provides a very brief description of the important features of your policy. This is not the insurance contract and only the actual policy provisions will control. The policy itself sets forth in detail the rights and obligations of both you and your insurance company. It is, therefore, important that you **READ YOUR POLICY CAREFULLY!**

(2) **Basic Medical-Surgical Expense Coverage**—Policies of this category are designed to provide to persons insured coverage for medical-surgical expenses incurred as a result of a covered accident or sickness. Coverage is provided for surgical services, anesthesia services, and in-hospital medical services, subject to any limitations, deductibles and co-payment requirements set forth in the policy. Coverage is not provided for hospital expenses or *unlimited* medical-surgical expenses.

(3) (A brief *specific* description of the benefits, including dollar amounts and number of days duration where applicable, contained in *this policy*, in the following order:

- (a) Surgical services;
- (b) Anesthesia services;
- (c) In-hospital medical services; and
- (d) Other benefits, if any.

*NOTE: The above description of benefits shall be stated clearly and concisely, and shall

include a description of any deductible or co-payment provision applicable to the benefits described.)

(4) (A description of any policy provisions which exclude, eliminate, restrict, reduce, limit, delay, or in any other manner operate to qualify payment of the benefits described in (3) above.)

(5) (A description of policy provisions respecting renewability or continuation of coverage, including age restrictions or any reservation of right to change premiums.)

(E) Basic Hospital and Medical Surgical Expense Coverage (Outline of Coverage)—An outline of coverage, in the form prescribed below, shall be issued in connection with policies meeting the standards of Sections 38a-505-9 (B) and 38a-505-9 (C). The items included in the outline of coverage *must appear in the sequence prescribed*.

(Company Name)

Basic Hospital and Medical Surgical Expense Coverage

Outline of Coverage

(1) **Read Your Policy Carefully**—This outline of coverage provides a very brief description of the important features of your policy. This is not the insurance contract and only the actual policy provisions will control. The policy itself sets forth in detail the rights and obligations of both you and your insurance company. It is, therefore, important that you **READ YOUR POLICY CAREFULLY!**

(2) **Basic Hospital and Medical Surgical Expense Coverage**—Policies of this category are designed to provide, to persons insured, coverage for hospital and medical-surgical expenses incurred as a result of a covered accident or sickness. Coverage is provided for daily hospital room and board, miscellaneous hospital services, hospital out-patient services, surgical services, anesthesia services, and in-hospital medical services, subject to any limitations, deductibles and co-payment requirements set forth in the policy. Coverage is not provided for *unlimited* hospital or medical-surgical expenses.

(3) (A brief *specific* description of the benefits, including dollar amounts and number of days duration where applicable, contained in *this policy*, in the following order:

- (a) Daily hospital room and board;
- (b) Miscellaneous hospital services;
- (c) Hospital outpatient services;
- (d) Surgical services;
- (e) Anesthesia services;
- (f) In-hospital medical services; and
- (g) Other benefits, if any.

*NOTE: The above description of benefits shall be stated clearly and concisely, and shall include a description of any deductible or co-payment provision applicable to the benefits described.)

(4) (A description of any policy provisions which exclude, eliminate, restrict, reduce, limit, delay, or in any other manner operate to qualify payment of the benefits described in (3) above.)

(5) (A description of policy provisions respecting renewability of continuation of

coverage, including age restrictions or any reservation of right to change premiums.)

(F) **Hospital Confinement Indemnity Coverage** (Outline of Coverage)—An outline of coverage, in the form prescribed below, shall be issued in connection with policies meeting the standards of Section 38a-505-9 (D). The items included in the outline of coverage *must appear in the sequence prescribed*.

(Company Name)

Hospital Confinement Indemnity Coverage

Outline of Coverage

(1) **Read Your Policy Carefully**—This outline of coverage provides a very brief description of the important features of your policy. This is not the insurance contract and only the actual policy provisions will control. The policy itself sets forth in detail the rights and obligations of both you and your insurance company. It is, therefore, important that you **READ YOUR POLICY CAREFULLY!**

(2) **Hospital Confinement Indemnity Coverage**—Policies of this category are designed to provide, to persons insured, coverage in the form of a fixed daily benefit during periods of hospitalization resulting from a covered accident or sickness, subject to any limitations set forth in the policy. Such policies do not provide any benefits other than the fixed daily indemnity for hospital confinement and any additional benefits described below.

(3) (A brief *specific* description of the benefits contained in *this policy*, in the following order:

- (a) Daily benefit payable during hospital confinement; and
- (b) Duration of benefit described in (a).

*NOTE: The above description of benefits shall be stated clearly and concisely.)

(4) (A description of any policy provisions which exclude, eliminate, restrict, reduce, limit, delay, or in any other manner operate to qualify payment of the benefits described in (3) above.)

(5) (A description of policy provisions respecting renewability or continuation of coverage, including age restrictions or any reservation of right to change premiums.)

(6) Any benefits provided in addition to the daily hospital benefit.

(G) **Major Medical Expense Coverage** (Outline of Coverage)—An outline of coverage, in the form prescribed below, shall be issued in connection with policies meeting the standards of Section 38a-505-9 (E). The items included in the outline of coverage *must appear in the sequence prescribed*.

(Company Name)

Major Medical Expense Coverage

Outline of Coverage

(1) **Read Your Policy Carefully**—This outline of coverage provides a very brief description of the important features of your policy. This is not the insurance contract and only the actual policy provisions will control. The policy itself sets forth in detail the rights and obligations of both you and your insurance company. It is, therefore, important that you

READ YOUR POLICY CAREFULLY!

(2) **Major Medical Expense Coverage**—Policies of this category are designed to provide, to persons insured, coverage for major hospital, medical, and surgical expenses incurred as a result of a covered accident or sickness. Coverage is provided for daily hospital room and board, miscellaneous hospital services, surgical services, anesthesia services, in-hospital medical services, and out-of-hospital care, subject to any deductibles, co-payment provisions, or other limitations which may be set forth in the policy. *Basic* hospital or *basic* medical insurance coverage is not provided.

(3) (A brief *specific* description of the benefits, including dollar amounts, contained in *this policy*, in the following order:

- (a) Daily hospital room and board;
- (b) Miscellaneous hospital services;
- (c) Surgical services;
- (d) Anesthesia services;
- (e) In-hospital medical services;
- (f) Out-of-hospital care;
- (g) Maximum dollar amount for covered charges; and
- (h) Other benefits, if any.

*NOTE: The above description of benefits shall be stated clearly and concisely, and shall include a description of any deductible or co-payment provision applicable to the benefits described.)

(4) (A description of any policy provisions which exclude, eliminate, restrict, reduce, limit, delay, or in any other manner operate to qualify payment of the benefits described in (3) above.)

(5) (A description of policy provisions respecting renewability or continuation of coverage, including age restrictions or any reservation of right to change premiums.

(H) **Disability Income Protection Coverage** (Outline of Coverage)—An outline of coverage, in the form prescribed below, shall be issued in connection with policies meeting the standards of Section 38a-505-9 (F). The items included in the outline of coverage *must appear in the sequence prescribed*.

(Company Name)

Disability Income Protection Coverage

Outline of Coverage

(1) **Read Your Policy Carefully**—This outline of coverage provides a very brief description of the important features of your policy. This is not the insurance contract and only the actual policy provisions will control. The policy itself sets forth in detail the rights and obligations of both you and your insurance company. It is, therefore, important that you READ YOUR POLICY CAREFULLY!

(2) **Disability Income Protection Coverage**—Policies of this category are designed to provide, to persons insured, coverage for disabilities resulting from a covered accident or sickness, subject to any limitations set forth in the policy. Coverage is not provided for basic hospital, basic medical-surgical, or major-medical expenses.

(3) (A brief *specific* description of the benefits contained in *this policy*: *NOTE: The above description of benefits shall be stated clearly and concisely.)

(4) (A description of any policy provisions which exclude, eliminate, restrict, reduce, limit, delay, or in any other manner operate to qualify payment of the benefits described in (3) above.)

(5) (A description of policy provisions respecting renewability or continuation of coverage, including age restrictions or any reservation of right to change premiums.)

(I) **Accident Only Coverage** (Outline of Coverage)—An outline of coverage, in the form prescribed below, shall be issued in connection with policies meeting the standards of Section 38a-505-9 (G). The items included in the outline of coverage *must appear in the sequence prescribed*.

(Company Name)

Accident Only Coverage

Outline of Coverage

(1) **Read Your Policy Carefully**—This outline of coverage provides a very brief description of the important features of your policy. This is not the insurance contract and only the actual policy provisions will control. The policy itself sets forth in detail the rights and obligations of both you and your insurance company. It is, therefore, important that you **READ YOUR POLICY CAREFULLY!**

(2) **Accident Only Coverage**—Policies of this category are designed to provide, to persons insured, coverage for certain losses resulting from a covered accident *ONLY*, subject to any limitations contained in the policy. Coverage is not provided for basic hospital, basic medical-surgical, or major-medical expenses.

(3) (A brief *specific* description of the benefits contained in *this policy*: *NOTE: The above description of benefits shall be stated clearly and concisely, and shall include a description of any deductible or co-payment provisions applicable to the benefits described. Proper disclosure of benefits which vary according to accidental cause shall be made in accordance with subsection (A) (13) of Section 38a-505-9.)

(4) (A description of any policy provisions which exclude, eliminate, restrict, reduce, limit, delay, or in any other manner operate to qualify payment of the benefits described in (3) above.)

(5) (A description of policy provisions respecting renewability or continuation of coverage, including age restrictions or any reservation of right to change premiums.)

(J) **Specified Accident Coverage** (Outline of Coverage)—An outline of coverage, in the form prescribed below, shall be issued in connection with policies meeting the standards of Section 38a-505-9 (H). The items included in the outline of coverage *must appear in the sequence prescribed*.

(Company Name)

Specified Accident Coverage

Outline of Coverage

(1) **Read Your Policy Carefully**—This outline of coverage provides a very brief description of the important features of your policy. This is not the insurance contract and only the actual policy provisions will control. The policy itself sets forth in detail the rights and obligations of both you and your insurance company. It is, therefore, important that you **READ YOUR POLICY CAREFULLY!**

(2) **Specified Accident Coverage**—Policies of this category are designed to provide, to persons insured, restricted coverage paying benefits **ONLY** when certain losses occur as a result of specified accidents. Coverage is not provided for basic hospital, basic medical-surgical, or major-medical expense.

(3) (A brief *specific* description of the benefits, including dollar amounts, contained in *this policy*:

*NOTE: The above description of benefits shall be stated clearly and concisely, and shall include a description of any deductible or co-payment provisions applicable to the benefits described. Proper disclosure of benefits which vary according to accidental cause shall be made in accordance with subsection (A) (13) of Section 38a-505-9.)

(4) (A description of any policy provisions which exclude, eliminate, restrict, reduce, limit, delay, or in any other manner operate to qualify payment of the benefits described in (3) above.)

(5) (A description of policy provisions respecting renewability or continuation of coverage, including age restrictions or any reservation of right to change premiums.)

(K) **Limited Benefit Health Coverage** (Outline of Coverage)—An outline of coverage, in the form prescribed below, shall be issued in connection with policies which do not meet the minimum standards of Section 38a-505-9 (B), (C), (D), (E), (F), (G) and (H). The items included in the outline of coverage *must appear in the sequence prescribed*.

(Company Name)

Limited Benefit Health Coverage

Outline of Coverage

(1) **Read Your Policy Carefully**—This outline of coverage provides a very brief description of the important features of your policy. This is not the insurance contract and only the actual policy provisions will control. The policy itself sets forth in detail the rights and obligations of both you and your insurance company. It is, therefore, important that you **READ YOUR POLICY CAREFULLY!**

(2) **Limited Benefit Health Coverage**—Policies of this category are designed to provide, to persons insured, limited or supplemental coverage.

(3) (A brief *specific* description of the benefits, including dollar amounts, contained in *this policy*:

*NOTE: The above description of benefits shall be stated clearly and concisely, and shall include a description of any deductible or co-payment provisions applicable to the benefits described. Proper disclosure of benefits which vary according to accidental cause shall be made in accordance with subsection (A) (13) of Section 38a-505-9.)

(4) (A description of any policy provisions which exclude, eliminate, restrict, reduce, limit, delay, or in any other manner operate to qualify payment of the benefits described in

Regulations of Connecticut State Agencies

(3) above.)

(5) (A description of policy provisions respecting renewability or continuation of coverage, including age restrictions or any reservation of right to change premiums.)

(Effective September 25, 1992)