Form No: _____

Kentucky Department of Insurance
Health Product Review

General Applications Checklist
(Checklist must be submitted with filing – attach as a PDF if filing electronically via SERFF)

Statute/Rule	Description	Yes	No	N/A	Page #
General Requirements					
KRS 304.14-110	**Representations** – All statements in application must be considered representations not warranties.				
806 KAR 12:060	**Replacement** – There must be a question on the application asking if the product being applied for will replace any other in-force coverage.				
806 KAR 17:020(1)	**Other Health Insurance Disclosure** – All applications, except group or accident only, must contain a section where the applicant can report all other in-force coverage.				
806 KAR 17:050	**Medicaid Question** – An application cannot use a question on the application to deny or cancel a policy because the insured is a recipient of medical assistance benefits.				
KRS 304.47-030	**Kentucky Fraud Warning** – All applications, enrollment forms, pre-applications, etc. must contain the fraud warning in this statute or the fraud warning must be substantially similar.				
KRS 304.12-013(4)(5)	**AIDS Health Question** – All applications must comply with this statute. The acceptable items are "treated, diagnosed, or tested positive", unacceptable items would include "tested positive for exposure to", "sought advise", "consulted a physician", etc.				
KRS 304.14-030	**Policy Fees** – All policy fees must be included in premium.				
KRS 304.14-080	**Consent of Insured** – All applications must comply with this statute in regards to who can apply for coverage on another person.				
KRS 304.14-435	**Non-English Forms** – All applications/forms which will be issued in non-English must comply with this statute.				
806 KAR 3:220, Sections 3 & 4	**Authorizations** – All applications that contain an Authorization to release medical information must comply with this regulation including the time limit of 24 months.				
806 KAR 14:121 Section 3	**Readability** – Applications do not have to comply with the flesch score; however, they must be at least 10 point font.				
Final rule 5-27-2014 DOI Implementation Update	**ACA REQUIREMENT FOR INDIVIDUAL HOSPITAL INDEMNITY & OTHER FIXED INDEMNITY PRODUCTS:** All applications for Hospital Indemnity or Other Fixed Indemnity Products as defined in the final rule must contain a disclosure of the following language in at least 14 point type: **"THIS IS A SUPPLEMENT TO HEALTH INSURANCE AND IS NOT A SUBSTITUTE FOR MAJOR MEDICAL COVERAGE. LACK OF MAJOR MEDICAL COVERAGE (OR OTHER MINIMUM ESSENTIAL COVERAGE) MAY RESULT IN AN ADDITIONAL PAYMENT WITH YOUR TAXES."**				
Final rule 2-27-2013	**ACA PLANS - Tobacco Use Definition** – For the purposes of the final rule tobacco use is defined as "use of tobacco on average of 4 or more times per week within no longer than the past six months."				
	ACA PLANS - Exempted Tobacco Use – Religious or ceremonial uses of tobacco (for example, by American Indians and Alaska Natives) are exempt				
	ACA PLANS - Tobacco Questions – For example, an				

Statute/Rule	Description	Yes	No	N/A	Page #
	individual could be asked the following two questions about tobacco use: (1) Within the past six months, have you used tobacco regularly (4 or more times per week on average excluding religious or ceremonial uses)? (2) If yes, when was the last time you used tobacco regularly?				
	ACA PLANS - Tobacco Use Misrepresentation – Disclosure of the ability to retroactively apply the appropriate tobacco use premium if misrepresented.				
SMALL GROUP ONLY	**ACA PLANS – WELLNESS PROGRAM REQUIREMENT FOR TOBACCO RATING** – The application should contain some information concerning the availability of a wellness program which tobacco users can participate in to eliminate the tobacco rate. The questions below need to be answered for any small group product which has tobacco rating: 1) Does the group have a wellness program? 2) Is it group policyholder selected or is it individual member selected? 3) How does the member elect the wellness program to eliminate the tobacco user rate?				