

## Group and Individual Health Supplemental Coverage Checklist

### Use this checklist:

- When reviewing group or individual health supplemental products or policies.
- To ensure the product or policy meets requirements as listed in the Texas Insurance Code (TIC), the Texas Administrative Code (TAC), department guidelines, and other laws.
- Policies must also satisfy the "[Group Health Product Requirements](#)" or the "[Individual Health Product Requirements](#)" checklist, as applicable.
- Refer to the appropriate checklist for any type of coverage that is being filed as supplemental coverage (for example, First Diagnosis, etc.).
- To enter the page number or reference location in the "Page" field.

### Supplemental coverage

Page \_\_\_\_\_ : Supplemental coverage is a policy which may be issued only to supplement in-force policies of individual and group accident and sickness insurance, employee benefit plans, hospital, medical, dental service organization subscriber contracts, any state or federally sponsored coverage, and health maintenance organization contracts - [28 TAC Section 3.3080](#)

Page \_\_\_\_\_ : Documentation within the filing must make clear that the policy will only be marketed and issued as supplemental coverage - [28 TAC Section 3.3080](#)

Page \_\_\_\_\_ : An insured may select a physician graduate to provide the services scheduled in the health insurance policy that are within the scope of the physician graduate's license. – [TIC Section 1451.129](#)

Page \_\_\_\_\_ : Newborn (60 day enrollment period)- [TIC Section 1367.003](#) and [28 TAC Section 3.3401 - 3.3403](#)

Page \_\_\_\_\_ : If Chimeric Antigen Receptor T-cell therapy is covered, determined to be medically necessary, approved by United States Food and Drug Administration must be provided when administered by a qualified, certified in-network health care facility – [TIC Section 1369.223](#)

Page \_\_\_\_\_ : An issuer offering coverage for gender affirming treatments must also provide coverage for the reversal of any such procedure, necessary follow-up testing and screening, as well as coverage for any possible complications that may subsequently arise because of these procedures – [TIC Section 1373.003](#)

## Individual health supplemental coverage only

### Outline of coverage

Page \_\_\_\_\_ : Outline of coverage shall include certain text in the proper format - [28 TAC Section 3.3091\(b\)](#) and [Section 3.3093\(9\)](#)

### Prohibited practices – Individual and group

Page \_\_\_\_\_ : May not consider a determination that the applicant has or has not previously been denied health benefit plan coverage in underwriting the coverage for which the applicant has applied - [TIC Section 544.502](#)

Page \_\_\_\_\_ : Prohibition on forced organ harvesting – An issuer may not cover a transplant or post-transplant care if the transplant was performed in China, or another country known to have participated in forced organ harvesting. Also, an issuer may not cover a transplant for which the organ to be transplanted was procured by sale or donation originating in China or another country known to have participated in forced organ harvesting; in addition, this prohibition against coverage for post-transplant care. [TIC Section 1380.003](#)

Page \_\_\_\_\_ : Prescription drug coverage for autoimmune diseases and blood disorders – An issuer may not require an enrollee to receive more than one prior authorization annually for prescription drugs prescribed to treat an autoimmune disease, hemophilia, or Von Willebrand disease. [TIC Section 1369.654](#)

Page \_\_\_\_\_ : If a health care plan provides coverage for general anesthesia, coverage for general anesthesia for a dental procedure for children younger than 13 years of age and unable to undergo the dental service without general anesthesia cannot be excluded – [TIC Sections 1367.301-1367.302](#)

Page \_\_\_\_\_ : Prohibits global capitation arrangements for EPOs and PPOs. - [TIC Section 1301.0065](#)