

Group and Individual Health Medicare Supplement and Select Checklist

Use this checklist:

- When reviewing group or individual Medicare Supplement insurance policies or products.
- 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.
- In addition to, not in place of, the "[Individual Health Product Requirements](#)" checklist or the "[Group Health Product Requirements](#)" checklist, as applicable.
- To enter the page number or reference location in the "Page" field.

Filing requirements

Page _____ : General - [28 TAC Section 3.11](#)

Page _____ : Out-of-state group Medicare supplement policies - [28 TAC Section 3.3316](#).

Genetic information

Page _____ : Prohibition against use of genetic information and requests for genetic testing - [28 TAC Section 3.3326](#).

Prohibited provisions

Page _____ : Discretionary clauses prohibited - [TIC Section 1701.062](#), and [28 TAC Section 3.1202](#) and [Section 3.1203](#).

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 extends to coverage for post-transplant care. [TIC Section 1380.003](#)

Policy first page

Page _____ : Required notice to buyer - [28 TAC Section 3.3319\(b\)](#).

Page _____ : Thirty-day right to return and receive a refund of the premium - [TIC Section 1652.155](#), and [28 TAC Section 3.3308\(a\)\(5\)](#).

Page _____ : Renewal or continuation provision - [28 TAC Section 3.3308\(a\)\(1\)](#).

Policy requirements

Page _____ : Must be guaranteed renewable - [28 TAC Section 3.3306\(b\)\(1\)\(E\)](#).

Page _____ : Policy must be filed and approved for use - [28 TAC Section 3.3322\(a\)](#).

Page _____ : Cannot file more than one type of policy/certificate form unless an exception applies- [28 TAC Section 3.3322\(d\)](#).

Page _____ : Policy definitions and terms - [28 TAC Section 3.3304](#).

Page _____ : Limitations and exclusions cannot be more restrictive than those of Medicare – [28 TAC Section 3.3305\(a\)](#).

Page _____ : Cannot use waivers to exclude, limit or reduce coverage or benefits for pre-existing conditions [28 TAC Section 3.3305\(b\)](#).

Page _____ : Cannot contain benefits provided by Medicare - [28 TAC Section 3.3305\(c\)](#).

Page _____ : Definition of pre-existing condition - [TIC Section 1652.058\(b\)](#), and [28 TAC Section 3.3306\(b\)\(1\)\(A\)](#).

Page _____ : Waive or reduce pre-existing waiting period when policy is replaced – [TIC Section 1652.057](#), and [28 TAC Section 3.3306\(b\)\(1\)\(A\)\(i\) and \(ii\)](#), and [Section 3.3308\(a\)\(4\)\(C\)](#).

Page _____ : Sickness and accident must be indemnified on the same basis - [28 TAC Section 3.3306\(b\)\(1\)\(B\)](#).

Page _____ : Include statement that policy changes with applicable Medicare deductible, copayment, or coinsurance changes and that premiums may be modified to correspond with such changes – [28 TAC Section 3.3306\(b\)\(1\)\(C\)](#).

Page _____ : Cannot terminate spouse because of event terminating insured or because of health reasons – [28 TAC Section 3.3306\(b\)\(1\)\(D\)](#).

Page _____ : Group continuation – [28 TAC Section 3.3306\(b\)\(1\)\(E\)\(iii\)-\(v\)](#).

Page _____ : Extension of benefits provision – [28 TAC Section 3.3306\(b\)\(1\)\(F\)](#).

Page _____ : Conditions for the suspension of coverage for Medicaid – [28 TAC Section 3.3306\(b\)\(1\)\(G\)\(i\) and \(ii\)](#).

Page _____ : Condition for suspension of coverage for group coverage if entitled to benefits under Section 226(b) of the Social Security Act – [28 TAC Section 3.3306\(b\)\(1\)\(G\)\(iii\)](#).

Page _____ : Standards for basic core benefits – [28 TAC Section 3.3306\(b\)\(2\)](#).

Page _____ : Standards for additional benefits – [28 TAC Section 3.3306\(b\)\(3\)](#).

Page _____ : Availability – [28 TAC Section 3.3306\(c\)\(1\)](#).

Page _____ : Uniformity – [28 TAC Section 3.3306\(c\)\(3\)](#).

Page _____ : Make-up of benefit plans – [28 TAC Section 3.3306\(c\)\(5\)](#).

Page _____ : New or innovative benefits – [28 TAC Section 3.3306\(c\)\(6\)](#).

Page _____ : Riders or endorsements – [28 TAC Section 3.3308\(a\)\(2\)](#).

Page _____ : The use of “usual and customary” or words of similar import is prohibited [28 TAC Section 3.3308\(a\)\(3\)](#).

Page _____ : Requirements for pre-existing conditions, if included in the policy [28 TAC Section 3.3308\(a\)\(4\)](#).

Page _____ : Provide a Guide to Health Insurance for People with Medicare – [28 TAC Section 3.3308\(a\)\(6\)](#).

Page _____ : Must refund unearned premium for death or cancellation – [TIC Chapter 558](#).

Page _____ : Payment to Texas Health and Human Services Commission – [TIC Section 1204.152](#) and [Government Code Section 531.0011\(b\)](#).

Page _____ : The Premium Information provision in the policy and outline of coverage must indicate that any rate increase must be approved by the Texas Department of Insurance – [28 TAC Section 3.3322\(c\)](#).

Page _____ : An entity that offers Medicare Supplement Benefit Plans to individuals 65 years of age or older, must offer the same coverage to individuals younger than 65 years of age who are eligible to enroll in Medicare because of end stage renal disease or amyotrophic lateral sclerosis – [TIC Section 1652.059](#)

Effective dates

Page _____ : Individual policy must show time insurance takes effect and terminates [TIC Section 1201.052](#).

Definitions - [28 TAC Section 3.3303](#)

Page _____ : 1990 Standardized Medicare supplement benefit plan - [28 TAC Section 3.3303\(1\)](#).

Page _____ : 2010 Standardized Medicare supplement benefit plans - [28 TAC Section 3.3303\(2\)](#).

Page _____ : 2020 Newly eligible individual - [28 TAC Section 3.3303\(3\)](#).

Page _____ : Applicant - [28 TAC Section 3.3303\(4\)](#).

Page _____ : Bankruptcy - [28 TAC Section 3.3303\(5\)](#).

Page _____ : Certificate - [28 TAC Section 3.3303\(6\)](#).

Page _____ : Continuous period of creditable coverage - [28 TAC Section 3.3303\(7\)](#).

Page _____ : Creditable coverage - [TIC Section 1205.004](#), and [28 TAC Section 3.3303\(8\)](#), [Section 3.3002\(8\)](#), and [Section 21.1101\(5\)](#).

Page _____ : Employee welfare benefit plan - [28 TAC Section 3.3303\(9\)](#).

Page _____ : Health maintenance organization (HMO) - [28 TAC Section 3.3303\(10\)](#).

Page _____ : Insolvency - [28 TAC Section 3.3303\(11\)](#).

Page _____ : Issuer - [28 TAC Section 3.3303\(12\)](#).

Page _____ : Medicaid - [28 TAC Section 3.3303\(13\)](#).

Page _____ : Medicare - [TIC Section 1652.001\(3\)](#), and [28 TAC Section 3.3303\(14\)](#).

Page _____ : Medicare Advantage organization - [28 TAC Section 3.3303\(15\)](#).

Page _____ : Medicare Advantage plan - [28 TAC Section 3.3303\(16\)](#).

Page _____ : Medicare Advantage private fee-for-service plan - [28 TAC Section 3.3303\(17\)](#).

Page _____ : MMA - The Medicare Prescription Drug, Improvement, and Modernization Act of 2003 [28 TAC Section 3.3303\(18\)](#).

Page _____ : Medicare Select policy or Medicare Select certificate - [28 TAC Section 3.3303\(19\)](#).

Page _____ : Medicare supplement policy - [TIC Section 1652.002](#), and [28 TAC Section 3.3303\(20\)](#).

Page _____ : Point-of-Service - [28 TAC Section 3.3303\(21\)](#).

Page _____ : Pre-Standardized Medicare supplement benefit plan - [28 TAC Section 3.3303\(22\)](#).

Page _____ : Provider-sponsored organization - [28 TAC Section 3.3303\(23\)](#).

Page _____ : Qualified actuary - [28 TAC Section 3.3303\(24\)](#).

Page _____ : Secretary - [28 TAC Section 3.3303\(25\)](#).

Policy definitions and terms

The following words and terms may be included in a form filing. If the form filing does contain any of these terms, the definitions may not be more restrictive than the definition in the statute or rule cited.

Page _____ : Accident, accidental injury, or accidental means - [28 TAC Section 3.3304\(1\)](#).

Page _____ : Benefit period or Medicare benefit period - [28 TAC Section 3.3304\(2\)](#).

Page _____ : Convalescent nursing home, skilled nursing facility, or extended care facility -[28 TAC Section 3.3304\(3\)](#).

Page _____ : Health care expenses/HMO - [28 TAC Section 3.3304\(4\)](#).

Page _____ : Hospital - [28 TAC Section 3.3304\(5\)](#).

Page _____ : Medicare - [TIC Section 1652.001\(3\)](#) and [28 TAC Section 3.3304\(6\)](#), [3.3303\(14\)](#), and [3.3015](#).

Page _____ : Medicare approved amounts - [28 TAC Section 3.3304\(7\)](#).

Page _____ : Medicare eligible expenses - [28 TAC Section 3.3304\(8\)](#).

Page _____ : Nurses - [28 TAC Section 3.3304\(9\)](#).

Page _____ : Physicians - [28 TAC Section 3.3304\(10\)](#).

Page _____ : Sickness - [28 TAC Section 3.3304\(11\)](#).

Pre-existing conditions

Page _____ : Definition of pre-existing conditions - [TIC Section 1652.058\(b\)](#), and [28 TAC Section 3.3306\(b\)\(1\)\(A\)](#).

Page _____ : Waiving or reducing pre-existing conditions, waiting period for replacement - [TIC Section 1652.057](#), and [28 TAC Section 3.3306\(b\)\(1\)\(A\)\(i\)-\(iii\)](#), and [Section 3.3308\(a\)\(4\)\(C\)](#).

Page _____ : If pre-existing condition limitation is in policy, provision must meet requirements of rule [28 TAC Section 3.3308\(a\)\(4\)\(A\), \(B\), and \(C\)](#)

Page _____ : Pre-existing condition disclosure in outline of coverage - [28 TAC Section 3.3308\(c\)\(2\)\(B\)](#).

Page _____ : Reduction of pre-existing condition limitation for creditable coverage during open enrollment period - [28 TAC Section 3.3324\(c\)\(1\) and \(2\)](#).

Page _____ : Permitted pre-existing condition limitation during open enrollment - [28 TAC Section 3.3324\(d\)](#).

Page _____ : Pre-existing condition limitations must be waived for a person who is eligible for guaranteed issue - [28 TAC Section 3.3312\(a\)\(2\)](#).

Page _____ : Requirement (in application) to ask question to determine reduction or waiver of pre-existing limitation - [28 TAC Section 3.3309\(b\)](#).

Creditable coverage

Page _____ : Creditable coverage - [28 TAC Section 3.3303\(8\)](#) and [Section 21.1101\(5\)\(A\)](#).

Page _____ : Coverages that are not creditable - [28 TAC Section 21.1101\(5\)\(B\)](#).

Page _____ : Reduction of pre-existing condition limitation for creditable coverage during open enrollment - [28 TAC Section 3.3324\(c\)\(1\) and \(2\)](#).

Page _____ : Elicit information about creditable coverage on application - [28 TAC Section 3.3309\(b\)](#).

Eligible persons for guaranteed issue

Page _____ : Guaranteed issue - [28 TAC Section 3.3312\(a\)](#).

Page _____ : Eligible persons for guaranteed issue defined (NOTE: Include definition in or with application) - [28 TAC Section 3.3312\(b\)](#).

Page _____ : Products to which eligible persons are entitled - [28 TAC Section 3.3312\(c\)](#).

Page _____ : Guaranteed issue time periods - [28 TAC Section 3.3312\(d\)](#).

Page _____ : Extended Medicare supplement access for interrupted trial periods - [28 TAC Section 3.3312\(e\)](#).

Page _____ : Elicit information about eligible persons on application – [28 TAC Section 3.3309\(b\)](#).

Rates – actuarial

Page _____ : Filing of rates and rating schedules - [TIC Section 1652.102](#), and [28 TAC Section 3.3307\(d\)](#).

Page _____ : Rates must be approved prior to use - [28 TAC Section 3.3322\(c\)](#).

Page _____ : Notice of premium rate increase: GROUP - 60 days - [TIC Section 1254.001](#).

Application

Define eligible persons for guaranteed issue (and in some instances, creditable coverage) in the application or a supplement to the application.

Page _____ : Required statements - [28 TAC Section 3.3309\(a\)\(1\)](#).

Page _____ : Required questions - [28 TAC Section 3.3309\(a\)\(2\)](#).

Page _____ : Elicit information about creditable coverage and eligible persons for guaranteed issue - [28 TAC Section 3.3309\(b\)](#).

Page _____ : Agent shall list other health insurance policies or coverages - [28 TAC Section 3.3309\(c\)](#).

Page _____ : Direct response issuer to return application to applicant - [28 TAC Section 3.3309\(d\)](#).

Page _____ : Provide a notice regarding replacement - [28 TAC Section 3.3309\(e\)](#).

Page _____ : Replacement notice - [28 TAC Section 3.3309\(f\)](#).

Outline of coverage

Page _____ : Requirement to deliver outline at time of application - [TIC Section 1652.152\(a\)](#), and [28 TAC Section 3.3308\(b\)\(1\)](#).

Page _____ : Required notice on corrected outline to be delivered to applicants who received an incorrect outline - [28 TAC Section 3.3308\(b\)\(2\)](#).

Page _____ : Prescribed format and content of the outline, must have cover page, premium information, disclosure pages, and charts, in that order - [TIC Section 1652.151](#) and [Section 1652.152](#), and [28 TAC Section 3.3308\(c\)](#).

Page _____ : Requirement to identify all plans on the cover page and to illustrate all possible premiums - [28 TAC Section 3.3308\(c\)\(1\)](#).

Page _____ : Bracket all variable dollar amounts in outline - [28 TAC Section 3.3308\(c\)\(2\)\(A\)](#).

Page _____ : Include limitations and exclusions on disclosure page - [28 TAC Section 3.3308\(c\)\(2\)\(B\)](#).

Page _____ : Outline shall include a disclosure (Refund of Premium provision) that the policy contains a provision refunding unearned premium upon death or cancellation - [TIC Chapter 558](#), and [28 TAC Section 3.3308\(c\)\(2\)\(C\)](#).

Page _____ : Medicare Select outlines of coverage shall include a disclosure of grievance procedures per [28 TAC Section 3.3325\(m\)](#) and [28 TAC Section 3.3308\(c\)\(2\)\(D\)](#).

Page _____ : Chart of benefits - [28 TAC Section 3.3308\(c\)\(2\)\(E\)](#) and [Figure 28 TAC Section 3.3308\(c\)\(2\)\(E\)](#).

Medicare select products

In addition to the requirements listed in [28 TAC Section 3.3325](#) Medicare Select policies and certificates are expected to meet all the requirements of [28 TAC Sections 3.3301 - 3.3326](#) pertaining to Medicare Supplement policies and certificates, generally.

Medicare select – definitions

The following words and terms shall be included in all Medicare Select policies, certificates, and plans of operation per [28 TAC Section 3.3325\(c\)](#):

Page _____ : Complaint - [28 TAC Section 3.3325\(c\)\(1\)](#).

Page _____ : Emergency care - [28 TAC Section 3.3325\(c\)\(2\)](#).

Page _____ : Grievance - [28 TAC Section 3.3325\(c\)\(3\)](#).

Page _____ : Medicare Select issuer - [28 TAC Section 3.3325\(c\)\(4\)](#).

Page _____ : Medicare Select policy and certificate - [28 TAC Section 3.3325\(c\)\(5\)](#).

Page _____ : Network provider - [28 TAC Section 3.3325\(c\)\(6\)](#).

Page _____ : Non-network provider - [28 TAC Section 3.3325\(c\)\(7\)](#).

Page _____ : Restricted network provisions - [28 TAC Section 3.3325\(c\)\(8\)](#).

Page _____ : Service area - [28 TAC Section 3.3325\(c\)\(9\)](#).

Medicare select – Full and fair disclosure

Disclosure shall include at least the following, per [28 TAC Section 3.3325\(k\)](#):

Page _____ : Outline of coverage - [28 TAC Section 3.3325\(k\)\(1\)](#).

Page _____ : Description of network providers - [28 TAC Section 3.3325\(k\)\(2\)](#).

Page _____ : Description of restricted network provisions - [28 TAC Section 3.3325\(k\)\(3\)](#).

Page _____ : Description of for emergency and urgent care and other out-of-service area coverage - [28 TAC Section 3.3325\(k\)\(4\)](#).

Page _____ : Description of limitations on referrals - [28 TAC Section 3.3325\(k\)\(5\)](#).

Page _____ : Description of policyholders' rights to purchase - [28 TAC Section 3.3325\(k\)\(6\)](#).

Page _____ : Description of quality assurance and grievance procedures - [28 TAC Section 3.3325\(k\)\(7\)](#).

Page _____ : Promulgated statement for hospital network providers - [28 TAC Section 3.3325\(k\)\(8\)](#).

Medicare select – Plan of operations

Medicare Select networks must be reviewed by Manage Quality Care Assurance Office (MCQA)

Page _____ : Must be approved prior to issuance of policy/certificate - [28 TAC Section 3.3325\(e\)](#).

Page _____ : Must contain a form number in lower left-hand corner - [28 TAC Section 3.3325\(f\)](#).

Page _____ : Must contain evidence that services are available/accessible through network providers - [28 TAC Section 3.3325\(f\)\(1\)](#).

Page _____ : Must show services can be provided with reasonable promptness, etc. – [28 TAC Section 3.3325\(f\)\(1\)\(A\)](#).

Page _____ : Number of network providers must be documented by credible statistics – [28 TAC Section 3.3325\(f\)\(1\)\(B\)](#).

Page _____ : Written agreements with network providers - [28 TAC Section 3.3325\(f\)\(1\)\(C\)](#).

Page _____ : Emergency care availability - [28 TAC Section 3.3325\(f\)\(1\)\(D\)](#).

Page _____ : Written agreement with network providers prohibiting the providers from seeking reimbursement from any covered individuals - [28 TAC Section 3.3325\(f\)\(1\)\(E\)](#).

Page _____ : Narrative statement and/or map describing service area - [28 TAC Section 3.3325\(f\)\(2\)](#).

Page _____ : Grievance procedures (refer to [28 TAC Section 3.3325\(m\)](#)) - [28 TAC Section 3.3325\(f\)\(3\)](#).

Page _____ : Quality assurance program must include the following per [28 TAC Section 3.3325\(f\)\(4\)](#).

Page _____ : Formal organizational structure - [28 TAC Section 3.3325\(f\)\(4\)\(A\)](#).

Page _____ : Written criteria for selection, retention, and removal of network providers - [28 TAC Section 3.3325\(f\)\(4\)\(B\)](#).

Page _____ : Procedures for evaluating quality of care and process for corrective action – [28 TAC Section 3.3325\(f\)\(4\)\(C\)](#).

Page _____ : List and describe network providers by specialty - [28 TAC Section 3.3325\(f\)\(5\)](#).

Page _____ : Provide copies of full and fair disclosure per [28 TAC Section 3.3325\(k\)](#) and [28 TAC Section 3.3325\(f\)\(6\)](#).

Page _____ : File changes to Plan of Operations 60 days in advance - [28 TAC Section 3.3325\(g\)](#).

Page _____ : Send report of updates to network provider list quarterly - [28 TAC Section 3.3325\(h\)](#)

Medicare select – Grievance procedures

Page _____ : Issuer shall have and use procedures for complaints and grievances [28 TAC Section 3.3325\(m\)\(1\)](#).

Page _____ : Grievance procedures shall be described in policy, certificates, and outline (in-hospital and out-of-hospital) - [28 TAC Section 3.3325\(m\)\(1\)](#).

Page _____ : Detailed grievance information must be provided to policyholder at time of issue - [28 TAC Section 3.3325\(m\)\(2\)](#).

Page _____ : If grievance is valid, take prompt corrective action - [28 TAC Section 3.3325\(m\)\(4\)](#).

Page _____ : Notice of results shall be given to all concerned parties - [28 TAC Section 3.3325\(m\)\(5\)](#).

Page _____ : Grievance reports shall be filed with Commissioner annually by March 31 - [28 TAC Section 3.3325\(m\)\(6\)](#).

Medicare select – Miscellaneous requirements

Page _____ : Policy or certificate shall not restrict payment for covered services by non-network providers [28 TAC Section 3.3325\(i\)](#) , if services require emergency care - [28 TAC Section 3.3325\(i\)\(1\)](#).

Page _____ : it is not reasonable to obtain services from a network provider - [28 TAC Section 3.3325\(i\)\(2\)](#).

Page _____ : Payment for full coverage if services not available from a network provider - [28 TAC Section 3.3325\(j\)](#).

Page _____ : Issuer must obtain from applicant a signed and dated form for receipt of information regarding grievance procedures per [28 TAC Section 3.3325\(k\)](#) and [28 TAC Section 3.3325\(l\)](#).

Page _____ : Issuer shall make available at time of purchase any Medicare Supplement policy/certificate otherwise offered - [28 TAC Section 3.3325\(n\)](#).

Page _____ : After 6 months of coverage under Medicare Select, if covered individual requests, issuer shall make available any Medicare supplement plan of comparable or lesser benefits that issuer has to offer - [28 TAC Section 3.3325\(o\)](#).

Page _____ : Comparable or lesser benefits - [28 TAC Section 3.3325\(p\)](#).

Electronic communication

Page _____ : Electronic communications - Allows issuers to conduct business electronically: (1) by seeking out prior affirmative consent; or (2) if the issuer provides notice of intent to conduct business electronically and the party does not opt out. Further describes either method is subject to disclosure requirements set out in TIC Section 35.004. In addition, (1) the party must have a right to withdraw consent; or (2) in the case affirmative consent was not obtained, the party requests written communication be delivered in nonelectronic form. [TIC Section 35.003](#)