BULLETIN NO. 11-81

TO: ALL DISABILITY INSURERS LICENSED IN THE STATE OF ARKANSAS

FROM: INSURANCE COMMISSIONER OF THE STATE OF ARKANSAS

RE: ACT 445 of 1981

Act 445 of 1981 requires that, if coverage is provided for certain services when delivered on an inpatient basis, identical coverage must be provided for the services when delivered on an outpatient basis. These services are:

- a) Laboratory and Pathological Tests;
- b) X-Rays;
- c) Radiation Treatment;
- d) Chemotherapy;
- e) Renal Dialysis.

This Act is effective March 12, 1981, and applies to all disability policies and contracts sold, delivered or issued for delivery on or after this date. Existing group contracts shall conform upon the first anniversary of the issue date after March 12, 1981.

The Act provides that the policyholder may reject this required coverage in writing.

The written rejection by the policyholder must be a part of the policy. The Insurance Department will not accept the method used by the company, however, the company must describe the method to be used when filing policies for approval.

All claims under contracts affected by this Act must be processed in compliance with this Act without regard for conflicting policy language. All policies approved which are not in compliance must be brought into compliance by September 1, 1981. This may be accomplished by the use of endorsements or riders.

No policy or contract will be approved which contains provisions in conflict with this Act or which does not include appropriate procedures for written rejection by the policyholder if its company allows such rejection.

Interested persons may obtain copies of Act 445 of 1981 by writing:

Secretary of State
State Capitol Building
Little Rock, AR 72201

W. H. Woodruff III
Insurance Commissioner

ARIZONA DEPARTMENT OF COMMERCE