

POLICY/CERTIFICATE/EOC Filing Checklist – FEDERAL FORM REVIEW REQUIREMENTS

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TOIs: H16I&G Individual/Group Health – Major Medical
 HOrg02I&G Individual/Group Health Organizations - HMO

Form # Form Name

REVIEW REQUIREMENT	FEDERAL AND STATE AUTHORITY	Market			INCLUDED YES – NO N/A	PAGE # AND DOCUMENT	COMMENTS
		Individual	Small Grp	Large Grp			
Pre-Existing Conditions	PHSA §2704 PHSA §2705 PHSA §1255 (75 CFR §37188, 45 CFR §147.108) ORC 3923.57 (A)(B)	✓	✓	✓	<input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A		
Lifetime Limits on the Dollar Value of Essential Health Benefits (EHB)	PHSA §2711 (75 CFR §37188, 45 CFR §147.126) ORC 1751.12 (E)	✓	✓	✓	<input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A		
Annual Limits on the Dollar Value of EHB	PHSA §2711 (75 CFR §37188, 45 CFR §147.126)	✓	✓	✓	<input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A		
Cost Sharing Limits	42 U.S.C. §18022(c) ORC 1751.12 (D)	✓	✓	✓	<input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A		
Reduced Cost Sharing for Eligible Individuals	ACA §1402	✓	N/A	N/A	<input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A		
Deductible Limits	45 CFR §156.130(a) and (b) ORC 1751.12 (D)	✓	✓	N/A	<input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A		
Rescission	PHSA §2712 (75 Fed Reg 37188, 45 CFR §147.128) ORC 3923.31 ORC 3923.57 (C)	✓	✓	✓	<input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A		

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REVIEW REQUIREMENT	FEDERAL AND STATE AUTHORITY	Market			INCLUDED YES – NO N/A	PAGE # AND DOCUMENT	COMMENTS
		Individual	Small Grp	Large Grp			
No Coverage for Certain Abortion Services	42 USC §18023 ORC 3901.87 ORC 9.04	✓	✓	✓	<input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A		
Preventive Services	PHSA §2713 (75 CFR §41726, 45 CFR §147.130), PHSA §2715 (75 Fed Reg 41760 ORC 1751.01 (A)(1) ORC 1751.62 ORC 3923.52 ORC 3923.55	✓	✓	✓	<input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A		
Dependent Coverage up to Age 26	PHSA §2714 (75 CFR §27122, 45 CFR §147.120) ORC 1751.14 ORC 3923.24	✓	✓	✓	<input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A		
Essential Health Benefits <i>(also see specific EHB guidance)</i>	PHSA §2707 Sec. 1302 of ACA 45 CFR §147.150	✓	✓	N/A	<input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A		
Emergency Services	PHSA §2719A (75 CFR §37188, 45 CFR §147.138 (b)) SSA §1395dd ORC 1753.28 ORC 3923.65	✓	✓	✓	<input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A		

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REVIEW REQUIREMENT	FEDERAL AND STATE AUTHORITY	Market			INCLUDED YES – NO N/A	PAGE # AND DOCUMENT	COMMENTS
		Individual	Small Grp	Large Grp			
Network Plans Primary Care Provider Requirements	PHSA §2719A (75 CFR §37188, 45 CFR §147.138) ORC 1753.13	✓	✓	✓	<input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A		
Newborns' and Mothers' Coverage	PHSA §2725 (45 CFR §148.170) ORC 1751.67 (A)(B) ORC 3923.63 (A)(B)	✓	✓	✓	<input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A		
Mental Health and Substance Use Disorder Parity	PHSA §2726 45 CFR 156.115 ORC 1751.01 (A)(2) ORC 3923.281	✓	✓	✓	<input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A		
Women's Health and Cancer Rights	PHSA §2727 PHSA §2752 ERISA § 713	✓	✓	✓	<input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A		
Michelle's Law	PHSA §2728 (45 CFR §147.145)	✓	✓	✓	<input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A		
Guaranteed Available	PHSA §2702 (45 CFR §148.120) ORC 3924.03	✓	✓	✓	<input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A		
Guaranteed Renewable	PHSA §2703 (45 CFR §148.122) ORC 1751.18 (A)(B) ORC 3923.57 (C)	✓	✓	✓	<input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A		

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REVIEW REQUIREMENT	FEDERAL AND STATE AUTHORITY	Market			INCLUDED YES – NO N/A	PAGE # AND DOCUMENT	COMMENTS
		Individual	Small Grp	Large Grp			
Genetic Testing (GINA)	PHSA §2705 PHSA §2753 (74 Fed Reg 51664, 45 CFR §148.180) ORC 1751.65 ORC 3901.491	✓	✓	✓	<input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A		
Providers – Scope of Practice	PHSA§2706 ORC 1751.51 (A) ORC 1753.10	✓	✓	✓	<input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A		
Clinical Trials	PHSA §2709 ORC 3923.80	✓	✓	✓	<input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A		
Special Enrollment	PHSA§2704(f)	✓	✓	✓	<input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A		
Open Enrollment	PHSA §2702 (b)(1)(3) 45 CFR § 147.104 ORC 3923.571(E)	✓	✓	✓	<input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A		
Wellness	PHSA § 2705(j) 45 CFR §146.121	✓	✓	✓	<input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A		
Claims Procedures	45 CFR §147.136, 29 CFR §2560.503-1 ORC 3901.381 - ORC 3901.389	✓	✓	✓	<input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A		

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Internal Appeals	PHSA §2719 (75 CFR §43330, 76 CFR §37208, 45 CFR §147.136) ORC 1751.77 thru ORC 1751.83 ORC Chapter 3922	✓	✓	✓	<input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A		
External Review	PHSA §2719 (75 CFR §43330, 76 CFR §37208, 45 CFR §147.136) ORC 1751.77 thru ORC 1751.83 ORC Chapter 3922	✓	✓	✓	<input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A		
Children’s Health Insurance Program Reauthorization Act of 2009 – Notice	111 P.L. 3 ERISA: 29 U.S.C. §1181(f)(3) PHSA §2704(f)(3)(B)(i)	✓	✓	✓	<input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A		
Consolidated Omnibus Budget Reconciliation Act of 1986	ERISA §606(a)(1),(2) 29 U.S.C. §1161 et seq. 29 CFR § 2590.606-1 and 606-2	✓	✓	✓	<input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A		
Prohibition on Excessive Waiting Periods	PHSA §2708 45 CFR §147.116	✓	✓	✓	<input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A		