

2765.1000 COVERAGE.

Subpart 1. **Coverage administration and related requirements.** Plans are subject to the requirements of Minnesota statutes and rules applicable to insurance companies providing insurance in Minnesota similar to the plan's coverage. These include requirements concerning coverage content, coverage administration, rates, underwriting, and related matters, including but not limited to:

A. the requirements of Minnesota Statutes, section 60A.082, and related rules, as applicable to group medical expense insurance and group disability income insurance;

B. the requirements of Minnesota Statutes, chapter 62A, and related rules, as applicable to group accident and health insurance as defined in Minnesota Statutes, section 62A.10, including but not limited to:

(1) filing and requesting approval for coverage documents and rates;

(2) coverage document language requirements;

(3) mandated benefits;

(4) employee notice requirements;

(5) requirements to offer continuation of coverage to employees and other covered persons; and

(6) requirements to offer conversion coverage through licensed insurers or health maintenance organizations to employees and other covered persons;

C. the requirements of Minnesota Statutes, sections 62A.23 and 62A.24, and related rules, as applicable to group disability income insurance;

D. the requirements of Minnesota Statutes, sections 62A.31 to 62A.42, and related rules, as applicable to insurance covering persons covered by Medicare; and

E. the requirements of Minnesota Statutes, chapter 62E, and related rules, as applicable to plans of health coverage as defined in Minnesota Statutes, section 62E.02, subdivision 9.

Subp. 2. **Coverage to individuals.** Joint self-insurance plans shall not offer coverage to individuals other than members' employees and their dependents, except as required following termination of employment under Minnesota Statutes, section 62A.17, subdivisions 1 to 5. Plans must comply with the conversion coverage requirements of Minnesota Statutes, sections 62A.17, subdivision 6, and 62E.16, by arrangements with licensed insurers or health maintenance organizations.

Subp. 3. **Health maintenance organization coverage.** A plan may arrange for covered persons to have an option of health maintenance organization coverage, including

employees of employers required to provide such an option by Minnesota Statutes, section 62E.16. Such an arrangement must be through a licensed health maintenance organization.

Subp. 4. **Uniform underwriting.** All coverages offered by a plan must be available according to the same underwriting standards to all employees of all members.

Subp. 5. **Term of coverage.** A plan shall not commit itself to providing coverage for any period which extends beyond the term of any stop-loss insurance policies required under part 2765.1300.

Subp. 6. **Continuing responsibility.** Notwithstanding cancellation or termination of coverage to a particular member, ceasing to offer a particular coverage, or ending or revocation of authority to self-insure, a plan retains indefinitely all responsibilities to covered employees and other covered persons associated with the period while coverage was in force. This responsibility ceases only after a plan dissolves under part 2765.0700, subpart 4.

Statutory Authority: *MS s 62H.06*

History: *9 SR 989; L 1987 c 384 art 2 s 1*

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