

**WEST VIRGINIA
SECRETARY OF STATE
NATALIE E. TENNANT
ADMINISTRATIVE LAW DIVISION**

Form #6

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2010 APR 14 AM 9:57

OFFICE WEST VIRGINIA
SECRETARY OF STATE

**NOTICE OF FINAL FILING AND ADOPTION OF A LEGISLATIVE RULE
AUTHORIZED BY THE WEST VIRGINIA LEGISLATURE.**

AGENCY: Insurance Commissioner TITLE NUMBER: 114

AMENDMENT TO AN EXISTING RULE: YES _____ NO X _____

IF YES, SERIES NUMBER OF RULE BEING AMENDED: _____

TITLE OF RULE BEING AMENDED: _____

IF NO, SERIES NUMBER OF RULE BEING PROPOSED: 87

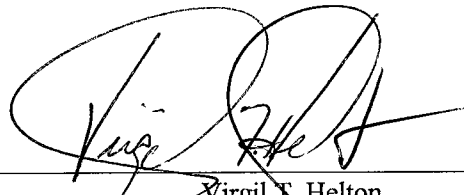
TITLE OF RULE BEING PROPOSED: Preventive Care Pilot Program

THE ABOVE RULE HAS BEEN AUTHORIZED BY THE WEST VIRGINIA LEGISLATURE.

AUTHORIZATION IS CITED IN (house or senate bill number) S.B. 407

SECTION 64-7-3, PASSED ON March 13, 2010

THIS RULE IS FILED WITH THE SECRETARY OF STATE. THIS RULE BECOMES EFFECTIVE ON THE
FOLLOWING DATE: April 14, 2010



Virgil F. Helton
Cabinet Secretary
West Virginia Department of Revenue

**TITLE 114
LEGISLATIVE RULE
INSURANCE COMMISSIONER**

**SERIES 87
PREVENTIVE CARE PILOT PROGRAM**

Section

- 114-87-1. General.
- 114-87-2. Definitions.
- 113-86-3. Participation in Pilot Program by Certain Individuals and Employer Groups.
- 114-87-4. Notice to Individual or Employer.

TITLE 114
LEGISLATIVE RULE
INSURANCE COMMISSIONER

SERIES 87
PREVENTIVE CARE PILOT PROGRAM

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SECRETARY OF STATE

§114-87-1. General.

1.1. Scope. -- The purpose of this rule is to permit participation in the Preventive Care Pilot Program by an individual or employer with a comprehensive high deductible health benefit plan or policy if the individual or employer is able to demonstrate that the participation will not negatively impact the coverage that is currently offered or will be offered by the employer. The rule also requires a participating provider to give notice to the individual or employer that the payment for the prepaid services may or may not count towards the health insurance deductible, the determination of which will depend on the health insurance policy language.

1.2. Authority. -- W. Va. Code §§33-2-10 and 16-2J-7(3).

1.3. Filing Date. -- April 14, 2010.

1.4. Effective Date. -- April 14, 2010.

§114-87-2. Definitions.

2.1. "High deductible plan" means a health benefit plan or policy with a minimum individual annual deductible of \$3,000 or, if applicable, a family annual deductible of \$3,000.

2.2. "Low deductible plan" means a health benefit plan or policy with a maximum individual annual deductible of \$2,999.99 or, if applicable, a family annual deductible of \$2,999.99.

2.3. "Participating provider" means a provider that has been granted a license under W.Va. Code §16-2J-1 *et seq.* to offer a Plan and operate as part of the Preventive Care Pilot Program created by said article.

2.4. "Plan" means a health benefit plan or policy offered by a participating provider pursuant to W. Va. Code §16-2J-1, *et seq.*

§114-87-3. Participation in Pilot Program by Certain Individuals and Employer Groups.

3.1. Unless otherwise prohibited by this rule, a participating provider may offer a Plan to an individual if the individual is covered by a high deductible plan and a participating provider

may offer a Plan to an employer group if the employer group is covered by a high deductible plan.

3.2. An individual or employer with a high deductible plan may not purchase a Plan from a participating provider unless the subscriber or employer is able to demonstrate that participation in the Plan will not negatively impact the health insurance coverage that is currently offered or will be offered by the employer.

3.3. Any individual who has converted his or her health benefit plan or policy from a low deductible plan to a high deductible plan may not purchase a Plan from a participating provider for three (3) months from date of conversion.

3.4. Any employer who has converted its health benefit plan from a low deductible plan to a high deductible health benefit plan may not purchase a plan from a participating provider for six (6) months from the date of conversion.

§114-87-4. Notice to Individual or Employer.

4.1. Prior to the purchase of a Plan by an individual or employer having a high deductible plan, the participating provider shall give the individual or employer a notice that indicates that premiums paid under the Plan may not count towards a health insurance deductible. The notice shall further provide that any credit towards a health insurance deductible will depend on the health insurance policy or certificate language.