



Ohio Administrative Code

Rule 3901-1-52 Life and health insurance guaranty association disclaimer and not covered form.

Effective: November 15, 2018

(A) Purpose. The purpose of this rule is to establish the form and content of the disclaimer to the summary document describing the general purposes and current limitations of the Ohio life and health insurance guaranty association and the notice that the policy or contract, or portion thereof, may not be covered by the association.

(B) Authority. This rule is issued pursuant to the authority vested in the superintendent under section 3956.18 of the Revised Code.

(C) Applicability. This rule applies to all insurers and agents providing, soliciting or negotiating coverage for direct, non-group life, health, annuity, and supplemental policies or contracts, for certificates under direct group policies and contracts, and for unallocated annuity contracts issued by member insurers.

(D) Delivery of summary document. Division (B)(2) of section 3956.18 of the Revised Code provides that no insurer shall deliver a policy or contract described in division (B)(1) of section 3956.04 of the Revised Code unless the document is delivered to the policy or contract holder prior to or at the time of delivery of the policy or contract, except if division (D) of section 3956.18 of the Revised Code applies. The document also shall be available upon request by a policy or contract holder.

In providing the summary document described in division (B)(2) of section 3956.18 of the Revised Code, the insurer must use the exact form of the disclaimer set forth in appendix I to this rule.

(E) Policy or contract not covered by association. Division (D) of section 3956.18 of the Revised Code provides that no insurer or agent may deliver a policy or contract described in division (B)(1) of section 3956.04 of the Revised Code, all or a portion of which is excluded under division (B)(2)(a) of section 3956.04 of the Revised Code from coverage under Chapter 3956. of the Revised Code unless the insurer or agent, prior to or at the time of delivery gives the policy or contract



holder a separate written notice that clearly and conspicuously discloses that the policy or contract, or a portion of the policy or contract, is not covered by the association.

In providing the document described in division (D) of section 3956.18 of the Revised Code, the insurer or agent must use the exact form set forth in appendix I to this rule.

(F) Severability. If any paragraph, term or provision of this rule is adjudged invalid for any reason, such judgment shall not affect, impair or invalidate any other section, term or provision of this rule, but the remaining sections, terms and provisions shall be and continue in full force and effect.