Questions have been raised concerning accident-only health insurance. Under RSA 420-G, accident-only insurance is not considered health coverage subject to the requirements of RSA 420-G. Similarly, the department’s coordination of benefit rules do not include accident-only insurance within the definition of a plan that is subject to coordination of benefits.

This Bulletin is intended to provide further guidance regarding the criteria that the department will apply 1) to determine when accident-only insurance constitutes an excepted benefit under RSA 420-G, and 2) to determine whether a filing may be approved as an accident-only plan. These criteria are as follows:

1. The benefit provided by the coverage may not be expense-based and must be payable due to the occurrence of an event.
2. The benefits must be paid without regard to whether benefits are provided under other insurance.
3. The benefit shall not be assignable to a health care provider, and must be paid directly to the subscriber. The policy shall contain a provision prohibiting assignment of the benefit to a health care provider.

4. A subscriber must be able to determine from the policy schedule what coverage is provided. A schedule of benefits is required for all policies that clearly sets forth the benefits. A policy that provides for payment only when medical treatment is rendered for injuries resulting from an accident may not exclude payment based on specific diagnosis or procedures provided that the injuries treated resulted from the accident.

5. Pre-existing condition exclusions are not permitted.

6. Coordination of benefits is not permitted.

7. Managed care and network requirements are not permitted. The policy shall not include a provision requiring pre-certification.

8. Expense-based riders shall not be permitted.

9. Rates for all accident-only insurance products shall be submitted for approval under Ins 4100. Form filings must comply with Ins 1900.

10. Disclosures shall be provided in accordance with Ins. 1901.07(a)(1), (a)(9), (a)(10), (a)(18), and (l).

11. Coverage may not be limited to or based on specific claim codes or diagnostic codes.

12. Coverage for sickness, illness or wellness shall not be permitted.

13. Coverage may not be stated on an “up to” basis.

Accident-only policies that do not comply with the criteria specified in this Bulletin will not be considered to constitute excepted benefits under RSA 420-G, and will be reviewed as basic hospital, basic medical surgical, or major medical policies, as appropriate, and shall be subject to the requirements of RSA 420-G.

For questions regarding this bulletin please contact Michael Wilkey at 603-271-2261.