First Regular Session of the 121st General Assembly (2019)

PRINTING CODE. Amendments: Whenever an existing statute (or a section of the Indiana Constitution) is being amended, the text of the existing provision will appear in this style type, additions will appear in this style type, and deletions will appear in this style type.

Additions: Whenever a new statutory provision is being enacted (or a new constitutional provision adopted), the text of the new provision will appear in **this style type**. Also, the word **NEW** will appear in that style type in the introductory clause of each SECTION that adds a new provision to the Indiana Code or the Indiana Constitution.

Conflict reconciliation: Text in a statute in *this style type* or *this style type* reconciles conflicts between statutes enacted by the 2018 Regular and Special Session of the General Assembly.

HOUSE ENROLLED ACT No. 1631

AN ACT to amend the Indiana Code concerning insurance.

Be it enacted by the General Assembly of the State of Indiana:

SECTION 1. IC 27-1-37.3-5, AS ADDED BY P.L.55-2008, SECTION 1, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2019]: Sec. 5. (a) As used in this chapter, "health plan" means a plan through which coverage is provided for health care services through insurance, prepayment, reimbursement, or otherwise. The term includes the following:

- (1) An employee welfare benefit plan (as defined in 29 U.S.C. 1002 et seq.).
- (2) A policy of accident and sickness insurance (as defined in IC 27-8-5-1).
- (3) An individual contract (as defined in IC 27-13-1-21) or a group contract (as defined in IC 27-13-1-16).
- (b) The term does not include the following:
 - (1) Accident-only, credit, Medicare supplement, long term care, or disability income insurance.
 - (2) Coverage issued as a supplement to liability insurance.
 - (3) Worker's compensation or similar insurance.
 - (4) Automobile medical payment insurance.
 - (5) A specified disease policy issued as an individual policy.
 - (6) A short term insurance plan that:
 - (A) may not be renewed and for the greater of:
 - (i) thirty-six (36) months; or



- (ii) the maximum period permitted under federal law;
- (B) has a duration term of not more than six (6) months; three hundred sixty-four (364) days; and
- (C) has an annual limit of at least two million dollars (\$2,000,000).
- (7) A policy that provides a stipulated daily, weekly, or monthly payment to an insured during hospital confinement, without regard to the actual expense of the confinement.

SECTION 2. IC 27-8-5-2.5, AS AMENDED BY P.L.3-2008, SECTION 212, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2019]: Sec. 2.5. (a) As used in this section, the term "policy of accident and sickness insurance" does not include the following:

- (1) Accident only, credit, dental, vision, Medicare supplement, long term care, or disability income insurance.
- (2) Coverage issued as a supplement to liability insurance.
- (3) Automobile medical payment insurance.
- (4) A specified disease policy.
- (5) A short term insurance plan that:
 - (A) may not be renewed and for the greater of:
 - (i) thirty-six (36) months; or
 - (ii) the maximum period permitted under federal law;
 - (B) has a duration term of not more than six (6) months; three hundred sixty-four (364) days; and
 - (C) has an annual limit of at least two million dollars (\$2,000,000).
- (6) A policy that provides indemnity benefits not based on any expense incurred requirement, including a plan that provides coverage for:
 - (A) hospital confinement, critical illness, or intensive care; or
 - (B) gaps for deductibles or copayments.
- (7) Worker's compensation or similar insurance.
- (8) A student health plan.
- (9) A supplemental plan that always pays in addition to other coverage.
- (10) An employer sponsored health benefit plan that is:
 - (A) provided to individuals who are eligible for Medicare; and
 - (B) not marketed as, or held out to be, a Medicare supplement policy.
- (b) The benefits provided by:
 - (1) an individual policy of accident and sickness insurance; or
 - (2) a certificate of coverage that is issued under a nonemployer



based association group policy of accident and sickness insurance to an individual who is a resident of Indiana;

may not be excluded, limited, or denied for more than twelve (12) months after the effective date of the coverage because of a preexisting condition of the individual.

- (c) An individual policy of accident and sickness insurance or a certificate of coverage described in subsection (b) may not define a preexisting condition, a rider, or an endorsement more restrictively than as:
 - (1) a condition that would have caused an ordinarily prudent person to seek medical advice, diagnosis, care, or treatment during the twelve (12) months immediately preceding the effective date of the plan;
 - (2) a condition for which medical advice, diagnosis, care, or treatment was recommended or received during the twelve (12) months immediately preceding the effective date of the plan; or
 - (3) a pregnancy existing on the effective date of the plan.
- (d) An insurer shall reduce the period allowed for a preexisting condition exclusion described in subsection (b) by the amount of time the individual has continuously served under a preexisting condition clause for a policy of accident and sickness insurance issued under IC 27-8-15 if the individual applies for a policy under this chapter not more than thirty (30) days after coverage under a policy of accident and sickness insurance issued under IC 27-8-15 expires.

SECTION 3. IC 27-8-5-15.6, AS AMENDED BY P.L.173-2007, SECTION 24, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2019]: Sec. 15.6. (a) As used in this section, "coverage of services for a mental illness" includes the services defined under the policy of accident and sickness insurance. However, the term does not include services for the treatment of substance abuse or chemical dependency.

- (b) This section applies to a policy of accident and sickness insurance that:
 - (1) is issued on an individual basis or a group basis;
 - (2) is issued, entered into, or renewed after December 31, 1999; and
 - (3) is issued to an employer that employs more than fifty (50) full-time employees.
 - (c) This section does not apply to the following:
 - (1) A legal business entity that has obtained an exemption under section 15.7 of this chapter.
 - (2) Accident only, credit, dental, vision, Medicare supplement,



long term care, or disability income insurance.

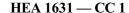
- (3) Coverage issued as a supplement to liability insurance.
- (4) Worker's compensation or similar insurance.
- (5) Automobile medical payment insurance.
- (6) A specified disease policy.
- (7) A short term insurance plan that:
 - (A) may not be renewed and for the greater of:
 - (i) thirty-six (36) months; or
 - (ii) the maximum period permitted under federal law;
 - (B) has a duration term of not more than six (6) months; three hundred sixty-four (364) days; and
 - (C) has an annual limit of at least two million dollars (\$2,000,000).
- (8) A policy that provides indemnity benefits not based on any expense incurred requirement, including a plan that provides coverage for:
 - (A) hospital confinement, critical illness, or intensive care; or
 - (B) gaps for deductibles or copayments.
- (9) A supplemental plan that always pays in addition to other coverage.
- (10) A student health plan.
- (11) An employer sponsored health benefit plan that is:
 - (A) provided to individuals who are eligible for Medicare; and
 - (B) not marketed as, or held out to be, a Medicare supplement policy.
- (d) A group or individual insurance policy or agreement may not permit treatment limitations or financial requirements on the coverage of services for a mental illness if similar limitations or requirements are not imposed on the coverage of services for other medical or surgical conditions.
- (e) An insurer that issues a policy of accident and sickness insurance that provides coverage of services for the treatment of substance abuse and chemical dependency when the services are required in the treatment of a mental illness shall offer to provide the coverage without treatment limitations or financial requirements if similar limitations or requirements are not imposed on the coverage of services for other medical or surgical conditions.
- (f) This section does not require a group or individual insurance policy or agreement to offer mental health benefits.
- (g) The benefits delivered under this section may be delivered under a managed care system.

SECTION 4. IC 27-8-5-27, AS AMENDED BY P.L.173-2007,



SECTION 27, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2019]: Sec. 27. (a) As used in this section, "accident and sickness insurance policy" means an insurance policy that provides at least one (1) of the types of insurance described in IC 27-1-5-1, Classes 1(b) and 2(a), and is issued on a group basis. The term does not include the following:

- (1) Accident only, credit, dental, vision, Medicare supplement, long term care, or disability income insurance.
- (2) Coverage issued as a supplement to liability insurance.
- (3) Automobile medical payment insurance.
- (4) A specified disease policy.
- (5) A short term insurance plan that:
 - (A) may not be renewed and for the greater of:
 - (i) thirty-six (36) months; or
 - (ii) the maximum period permitted under federal law;
 - (B) has a duration term of not more than six (6) months; three hundred sixty-four (364) days; and
 - (C) has an annual limit of at least two million dollars (\$2,000,000).
- (6) A policy that provides indemnity benefits not based on any expense incurred requirement, including a plan that provides coverage for:
 - (A) hospital confinement, critical illness, or intensive care; or
 - (B) gaps for deductibles or copayments.
- (7) Worker's compensation or similar insurance.
- (8) A student health plan.
- (9) A supplemental plan that always pays in addition to other coverage.
- (10) An employer sponsored health benefit plan that is:
 - (A) provided to individuals who are eligible for Medicare; and
 - (B) not marketed as, or held out to be, a Medicare supplement policy.
- (b) As used in this section, "insured" means a child or an individual with a disability who is entitled to coverage under an accident and sickness insurance policy.
- (c) As used in this section, "child" means an individual who is less than nineteen (19) years of age.
- (d) As used in this section, "individual with a disability" means an individual:
 - (1) with a physical or mental impairment that substantially limits one (1) or more of the major life activities of the individual; and (2) who:





- (A) has a record of; or
- (B) is regarded as;

having an impairment described in subdivision (1).

- (e) A policy of accident and sickness insurance must include coverage for anesthesia and hospital charges for dental care for an insured if the mental or physical condition of the insured requires dental treatment to be rendered in a hospital or an ambulatory outpatient surgical center. The Indications for General Anesthesia, as published in the reference manual of the American Academy of Pediatric Dentistry, are the utilization standards for determining whether performing dental procedures necessary to treat the insured's condition under general anesthesia constitutes appropriate treatment.
- (f) An insurer that issues a policy of accident and sickness insurance may:
 - (1) require prior authorization for hospitalization or treatment in an ambulatory outpatient surgical center for dental care procedures in the same manner that prior authorization is required for hospitalization or treatment of other covered medical conditions; and
 - (2) restrict coverage to include only procedures performed by a licensed dentist who has privileges at the hospital or ambulatory outpatient surgical center.
- (g) This section does not apply to treatment rendered for temporal mandibular joint disorders (TMJ).

SECTION 5. IC 27-8-5.6-1, AS AMENDED BY P.L.86-2018, SECTION 207, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2019]: Sec. 1. (a) As used in this chapter, the term "accident and sickness insurance" means any policy or contract covering one (1) or more of the kinds of insurance described in classes 1(b) or 2(a) of IC 27-1-5-1, as governed by IC 27-8-5.

- (b) The term does not include the following:
 - (1) Accident only, credit, dental, vision, Medicare supplement, long term care, or disability income insurance.
 - (2) Coverage issued as a supplement to liability insurance.
 - (3) Worker's compensation or similar insurance.
 - (4) Automobile medical payment insurance.
 - (5) A specified disease policy.
 - (6) A short term insurance plan that:
 - (A) may not be renewed and for the greater of:
 - (i) thirty-six (36) months; or
 - (ii) the maximum period permitted under federal law;
 - (B) has a duration term of not more than six (6) months; three



hundred sixty-four (364) days; and

- (C) has an annual limit of at least two million dollars (\$2,000,000).
- (7) A policy that provides indemnity benefits not based on any expense incurred requirement, including a plan that provides coverage for:
 - (A) hospital confinement, critical illness, or intensive care; or
 - (B) gaps for deductibles or copayments.
- (8) A supplemental plan that always pays in addition to other coverage.
- (9) A student health plan.
- (10) An employer sponsored health benefit plan that is:
 - (A) provided to individuals who are eligible for Medicare; and
 - (B) not marketed as, or held out to be, a Medicare supplement policy.

SECTION 6. IC 27-8-5.8-1 IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2019]: Sec. 1. As used in this chapter, "accident and sickness insurance policy" means an insurance policy that provides at least one (1) of the types of insurance described in IC 27-1-5-1, Classes 1(b) and 2(a), and is issued on a group basis. The term does not include the following:

- (1) Accident only, credit, dental, vision, Medicare, Medicare supplement, long term care, or disability income insurance.
- (2) Coverage issued as a supplement to liability insurance.
- (3) Automobile medical payment insurance.
- (4) A specified disease policy.
- (5) A limited benefit health insurance policy.
- (6) A short term insurance plan that:
 - (A) may not be renewed and for the greater of:
 - (i) thirty-six (36) months; or
 - (ii) the maximum period permitted under federal law;
 - (B) has a duration term of not more than six (6) months; three hundred sixty-four (364) days; and
 - (C) has an annual limit of at least two million dollars (\$2,000,000).
- (7) A policy that provides a stipulated daily, weekly, or monthly payment to an insured during hospital confinement, without regard to the actual expense of the confinement.
- (8) Worker's compensation or similar insurance.
- (9) A student health insurance policy.

SECTION 7. IC 27-8-5.9 IS ADDED TO THE INDIANA CODE AS A **NEW** CHAPTER TO READ AS FOLLOWS [EFFECTIVE



JULY 1, 2019]:

Chapter 5.9. Short Term Insurance Plan

- Sec. 1. As used in this chapter, "covered individual" means an individual entitled to coverage under a short term insurance plan.
- Sec. 2. As used in this chapter, "PPACA" has the meaning set forth in IC 27-19-2-14.
- Sec. 3. As used in this chapter, "short term insurance plan" means a policy of accident and sickness insurance (as defined in IC 27-8-5-1) that:
 - (1) may be renewed for the greater of:
 - (A) thirty-six (36) months; or
 - (B) the maximum period permitted under federal law;
 - (2) has a term of not more than three hundred sixty-four (364) days; and
 - (3) has an annual limit of at least two million dollars (\$2,000,000).
- Sec. 4. (a) An insurer may require an applicant for coverage under a short term insurance plan to specify, before issuance of the short term insurance plan, the number of renewals the applicant elects.
- (b) After issuance of a short term insurance plan, the insurer may not require underwriting of the short term insurance plan until:
 - (1) all renewal periods elected under subsection (a) have ended; and
 - (2) the covered individual renews the short term insurance plan beyond the periods described in subdivision (1).
- Sec. 5. A short term insurance plan must include coverage for the following:
 - (1) Ambulatory patient services.
 - (2) Hospitalization.
 - (3) Emergency services.
 - (4) Laboratory services.
- Sec. 6. (a) This section applies to an insurer that issues a short term insurance plan and undertakes a preferred provider plan under IC 27-8-11 to render health care services to covered individuals under the short term insurance plan.
- (b) An insurer described in subsection (a) shall ensure that the preferred provider plan meets the following requirements:
 - (1) The preferred provider plan includes essential community providers in accordance with PPACA.
 - (2) The preferred provider plan is sufficient in number and



- types of providers (other than mental health and substance abuse treatment providers) to assure covered individuals' access to all health care services without unreasonable delay.
- (3) The preferred provider plan is consistent with the network adequacy requirements that:
 - (A) apply to qualified health plan issuers under 45 CFR 156.230(a) and 45 CFR 156.230(b); and
 - (B) are consistent with subdivisions (1) and (2).
- Sec. 7. (a) An insurer that issues a short term insurance plan shall disclose to an applicant, in bold, 10 point type, the following:
 - (1) That the short term insurance plan does not include coverage for the ten (10) essential health benefits required under PPACA.
 - (2) That the short term insurance plan does not provide the coverage that is required under PPACA.
 - (3) That enrollment in health coverage that provides the coverage that is required under PPACA may be done during the next PPACA open enrollment period.
 - (4) The dates of the next PPACA open enrollment period during which the applicant may enroll in coverage described in subdivision (3).
- (b) An insurer shall obtain the signature of an applicant to whom the disclosures required by subsection (a) are made.
- Sec. 8. An insurer shall not, as a condition of enrollment or continued enrollment in a short term insurance plan, require an individual to pay a premium or contribution greater than the premium or contribution for a similarly situated individual enrolled in the short term insurance plan on the basis of a health status related factor in relation to the individual or a dependent of the individual.
- Sec. 9. This chapter does not prevent an insurer from establishing a premium discount, a rebate, or out-of-pocket payment modifications in return for adherence to programs of health promotion and disease prevention.
- SECTION 8. IC 27-8-6-6, AS ADDED BY P.L.133-2011, SECTION 1, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2019]: Sec. 6. (a) As used in this section, "policy of accident and sickness insurance" has the meaning set forth in IC 27-8-5-1. However, the term does not include the following:
 - (1) Accident only, credit, dental, vision, Medicare supplement, long term care, or disability income insurance.
 - (2) Coverage issued as a supplement to liability insurance.



- (3) Automobile medical payment insurance.
- (4) A specified disease policy.
- (5) A short term insurance plan that:
 - (A) may not be renewed and for the greater of:
 - (i) thirty-six (36) months; or
 - (ii) the maximum period permitted under federal law;
 - (B) has a duration term of not more than six (6) months; three hundred sixty-four (364) days; and
 - (C) has an annual limit of at least two million dollars (\$2,000,000).
- (6) A policy that provides indemnity benefits not based on any expense incurred requirement, including a plan that provides coverage for:
 - (A) hospital confinement, critical illness, or intensive care; or
 - (B) gaps for deductibles or copayments.
- (7) A supplemental plan that always pays in addition to other coverage.
- (b) A policy of accident and sickness insurance that provides coverage for physical medicine and rehabilitative services shall provide the coverage for physical medicine and rehabilitative services that are:
 - (1) rendered by an athletic trainer who is licensed under IC 25-5.1; and
 - (2) within the athletic trainer's scope of practice.
- (c) This section does not require a policy of accident and sickness insurance to provide coverage for physical medicine or rehabilitative services generally.
- SECTION 9. IC 27-8-13.4-1, AS ADDED BY P.L.124-2014, SECTION 1, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2019]: Sec. 1. (a) As used in this chapter, "accident and sickness insurance policy" means an insurance policy that:
 - (1) provides one (1) or more of the types of insurance described in IC 27-1-5-1, Class 1(b) and Class 2(a); and
 - (2) is issued on a group or individual basis.
- (b) As used in this chapter, "accident and sickness insurance policy" does not include the following:
 - (1) Accident only, credit, dental, vision, Medicare supplement, long term care, or disability income insurance.
 - (2) Coverage issued as a supplement to liability insurance.
 - (3) Worker's compensation or similar insurance.
 - (4) Automobile medical payment insurance.
 - (5) A specified disease policy.
 - (6) A short term insurance plan that:



- (A) may not be renewed and for the greater of:
 - (i) thirty-six (36) months; or
 - (ii) the maximum period permitted under federal law;
- (B) has a duration term of not more than six (6) months; three hundred sixty-four (364) days; and
- (C) has an annual limit of at least two million dollars (\$2,000,000).
- (7) A policy that provides indemnity benefits not based on any expense incurred requirement, including a plan that provides coverage for:
 - (A) hospital confinement, critical illness, or intensive care; or
 - (B) gaps for deductibles or copayments.
- (8) A supplemental plan that always pays in addition to other coverage.
- (9) An employer sponsored health benefit plan that is:
 - (A) provided to individuals who are eligible for Medicare; and (B) not marketed as, or held out to be, a Medicare supplement policy.

SECTION 10. IC 27-8-13.5-4, AS ADDED BY P.L.126-2013, SECTION 4, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2019]: Sec. 4. As used in this chapter, "policy of accident and sickness insurance" has the meaning set forth in IC 27-8-5-1. The term does not include the following:

- (1) Accident only, credit, dental, vision, Medicare supplement, long term care, or disability income insurance.
- (2) Coverage issued as a supplement to liability insurance.
- (3) Automobile medical payment insurance.
- (4) A specified disease policy.
- (5) A short term insurance plan that:
 - (A) may not be renewed and for the greater of:
 - (i) thirty-six (36) months; or
 - (ii) the maximum period permitted under federal law;
 - (B) has a duration term of not more than six (6) months; three hundred sixty-four (364) days; and
 - (C) has an annual limit of at least two million dollars (\$2,000,000).
- (6) A policy that provides indemnity benefits not based on any expense incurred requirement, including a plan that provides coverage for:
 - (A) hospital confinement, critical illness, or intensive care; or
 - (B) gaps for deductibles or copayments.
- (7) Worker's compensation or similar insurance.



- (8) A student health plan.
- (9) A supplemental plan that always pays in addition to other coverage.
- (10) An employer sponsored health benefit plan that is:
 - (A) provided to individuals who are eligible for Medicare; and (B) not marketed as or held out to be a Medicare supplement
 - (B) not marketed as, or held out to be, a Medicare supplement policy.

SECTION 11. IC 27-8-14-1, AS AMENDED BY P.L.173-2007, SECTION 30, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2019]: Sec. 1. (a) As used in this chapter, "accident and sickness insurance policy" means an insurance policy that:

- (1) provides one (1) or more of the types of insurance described in IC 27-1-5-1, classes 1(b) and 2(a); and
- (2) is issued on a group basis.
- (b) The term does not include the following:
 - (1) Accident only, credit, dental, vision, Medicare supplement, long term care, or disability income insurance.
 - (2) Coverage issued as a supplement to liability insurance.
 - (3) Worker's compensation or similar insurance.
 - (4) Automobile medical payment insurance.
 - (5) A specified disease policy.
 - (6) A short term insurance plan that:
 - (A) may not be renewed and for the greater of:
 - (i) thirty-six (36) months; or
 - (ii) the maximum period permitted under federal law;
 - (B) has a duration term of not more than $\frac{1}{1}$ months; three hundred sixty-four (364) days; and
 - (C) has an annual limit of at least two million dollars (\$2,000,000).
 - (7) A policy that provides indemnity benefits not based on any expense incurred requirement, including a plan that provides coverage for:
 - (A) hospital confinement, critical illness, or intensive care; or
 - (B) gaps for deductibles or copayments.
 - (8) A supplemental plan that always pays in addition to other coverage.
 - (9) A student health plan.
 - (10) An employer sponsored health benefit plan that is:
 - (A) provided to individuals who are eligible for Medicare; and
 - (B) not marketed as, or held out to be, a Medicare supplement policy.

SECTION 12. IC 27-8-14.1-1, AS AMENDED BY P.L.173-2007,



SECTION 31, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2019]: Sec. 1. (a) As used in this chapter, "accident and sickness insurance policy" means an insurance policy that:

- (1) provides one (1) or more of the types of insurance described in IC 27-1-5-1, classes 1(b) and 2(a); and
- (2) is issued on a group basis.
- (b) As used in this chapter, "accident and sickness insurance policy" does not include the following:
 - (1) Accident only, credit, dental, vision, Medicare supplement, long term care, or disability income insurance.
 - (2) Coverage issued as a supplement to liability insurance.
 - (3) Worker's compensation or similar insurance.
 - (4) Automobile medical payment insurance.
 - (5) A specified disease policy.
 - (6) A short term insurance plan that:
 - (A) may not be renewed and for the greater of:
 - (i) thirty-six (36) months; or
 - (ii) the maximum period permitted under federal law;
 - (B) has a duration term of not more than six (6) months; three hundred sixty-four (364) days; and
 - (C) has an annual limit of at least two million dollars (\$2,000,000).
 - (7) A policy that provides indemnity benefits not based on any expense incurred requirement, including a plan that provides coverage for:
 - (A) hospital confinement, critical illness, or intensive care; or
 - (B) gaps for deductibles or copayments.
 - (8) A supplemental plan that always pays in addition to other coverage.
 - (9) A student health plan.
 - (10) An employer sponsored health benefit plan that is:
 - (A) provided to individuals who are eligible for Medicare; and
 - (B) not marketed as, or held out to be, a Medicare supplement policy.

SECTION 13. IC 27-8-14.2-1, AS AMENDED BY P.L.173-2007, SECTION 32, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2019]: Sec. 1. (a) As used in this chapter, "accident and sickness insurance policy" means an insurance policy that provides one (1) or more of the types of insurance described in IC 27-1-5-1, classes 1(b) and 2(a).

- (b) The term does not include the following:
 - (1) Accident only, credit, dental, vision, Medicare supplement,



long term care, or disability income insurance.

- (2) Coverage issued as a supplement to liability insurance.
- (3) Worker's compensation or similar insurance.
- (4) Automobile medical payment insurance.
- (5) A specified disease policy.
- (6) A short term insurance plan that:
 - (A) may not be renewed and for the greater of:
 - (i) thirty-six (36) months; or
 - (ii) the maximum period permitted under federal law;
 - (B) has a duration term of not more than six (6) months; three hundred sixty-four (364) days; and
 - (C) has an annual limit of at least two million dollars (\$2,000,000).
- (7) A policy that provides indemnity benefits not based on any expense incurred requirement, including a plan that provides coverage for:
 - (A) hospital confinement, critical illness, or intensive care; or
 - (B) gaps for deductibles or copayments.
- (8) A supplemental plan that always pays in addition to other coverage.
- (9) A student health plan.
- (10) An employer sponsored health benefit plan that is:
 - (A) provided to individuals who are eligible for Medicare; and
 - (B) not marketed as, or held out to be, a Medicare supplement policy.

SECTION 14. IC 27-8-14.5-1, AS AMENDED BY P.L.173-2007, SECTION 33, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2019]: Sec. 1. (a) As used in this chapter, "health insurance plan" means any:

- (1) hospital or medical expense incurred policy or certificate;
- (2) hospital or medical service plan contract; or
- (3) health maintenance organization subscriber contract; provided to an insured.
 - (b) The term does not include the following:
 - (1) Accident only, credit, dental, vision, Medicare supplement, long term care, or disability income insurance.
 - (2) Coverage issued as a supplement to liability insurance.
 - (3) Worker's compensation or similar insurance.
 - (4) Automobile medical payment insurance.
 - (5) A specified disease policy.
 - (6) A short term insurance plan that:
 - (A) may not be renewed and for the greater of:



- (i) thirty-six (36) months; or
- (ii) the maximum period permitted under federal law;
- (B) has a duration term of not more than six (6) months; three hundred sixty-four (364) days; and
- (C) has an annual limit of at least two million dollars (\$2,000,000).
- (7) A policy that provides indemnity benefits not based on any expense incurred requirement, including a plan that provides coverage for:
 - (A) hospital confinement, critical illness, or intensive care; or
 - (B) gaps for deductibles or copayments.
- (8) A supplemental plan that always pays in addition to other coverage.
- (9) A student health plan.
- (10) An employer sponsored health benefit plan that is:
 - (A) provided to individuals who are eligible for Medicare; and (B) not marketed as, or held out to be, a Medicare supplement policy.

SECTION 15. IC 27-8-14.7-1, AS AMENDED BY P.L.173-2007, SECTION 34, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2019]: Sec. 1. (a) As used in this chapter, "accident and sickness insurance policy" means an insurance policy that:

- (1) provides at least one (1) of the types of insurance described in IC 27-1-5-1, Classes 1(b) and 2(a); and
- (2) is issued on a group basis.
- (b) "Accident and sickness insurance policy" does not include the following:
 - (1) Accident only, credit, dental, vision, Medicare supplement, long term care, or disability income insurance.
 - (2) Coverage issued as a supplement to liability insurance.
 - (3) Worker's compensation or similar insurance.
 - (4) Automobile medical payment insurance.
 - (5) A specified disease policy.
 - (6) A short term insurance plan that:
 - (A) may not be renewed and for the greater of:
 - (i) thirty-six (36) months; or
 - (ii) the maximum period permitted under federal law;
 - (B) has a duration term of not more than six (6) months; three hundred sixty-four (364) days; and
 - (C) has an annual limit of at least two million dollars (\$2,000,000).
 - (7) A policy that provides indemnity benefits not based on any



expense incurred requirement, including a plan that provides coverage for:

- (A) hospital confinement, critical illness, or intensive care; or
- (B) gaps for deductibles or copayments.
- (8) A supplemental plan that always pays in addition to other coverage.
- (9) A student health plan.
- (10) An employer sponsored health benefit plan that is:
 - (A) provided to individuals who are eligible for Medicare; and (B) not marketed as, or held out to be, a Medicare supplement policy.

SECTION 16. IC 27-8-14.8-1, AS AMENDED BY P.L.173-2007, SECTION 35, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2019]: Sec. 1. (a) As used in this chapter, "accident and sickness insurance policy" means an insurance policy that:

- (1) provides at least one (1) of the types of insurance described in IC 27-1-5-1, Classes 1(b) and 2(a); and
- (2) is issued on a group basis.
- (b) "Accident and sickness insurance policy" does not include the following:
 - (1) Accident only, credit, dental, vision, Medicare supplement, long term care, or disability income insurance.
 - (2) Coverage issued as a supplement to liability insurance.
 - (3) Worker's compensation or similar insurance.
 - (4) Automobile medical payment insurance.
 - (5) A specified disease policy.
 - (6) A short term insurance plan that:
 - (A) may not be renewed and for the greater of:
 - (i) thirty-six (36) months; or
 - (ii) the maximum period permitted under federal law;
 - (B) has a duration term of not more than six (6) months; three hundred sixty-four (364) days; and
 - (C) has an annual limit of at least two million dollars (\$2,000,000).
 - (7) A policy that provides indemnity benefits not based on any expense incurred requirement, including a plan that provides coverage for:
 - (A) hospital confinement, critical illness, or intensive care; or
 - (B) gaps for deductibles or copayments.
 - (8) A supplemental plan that always pays in addition to other coverage.
 - (9) A student health plan.



- (10) An employer sponsored health benefit plan that is:
 - (A) provided to individuals who are eligible for Medicare; and
 - (B) not marketed as, or held out to be, a Medicare supplement policy.

SECTION 17. IC 27-8-15-9, AS AMENDED BY P.L.11-2011, SECTION 34, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2019]: Sec. 9. (a) Except as provided in section 28 of this chapter, as used in this chapter, "health insurance plan" or "plan" means any:

- (1) hospital or medical expense incurred policy or certificate;
- (2) hospital or medical service plan contract; or
- (3) health maintenance organization subscriber contract; provided to the employees of a small employer.
 - (b) The term does not include the following:
 - (1) Accident-only, credit, dental, vision, Medicare supplement, long term care, or disability income insurance.
 - (2) Coverage issued as a supplement to liability insurance.
 - (3) Worker's compensation or similar insurance.
 - (4) Automobile medical payment insurance.
 - (5) A specified disease policy.
 - (6) A short term insurance plan that:
 - (A) may not be renewed and for the greater of:
 - (i) thirty-six (36) months; or
 - (ii) the maximum period permitted under federal law;
 - (B) has a duration term of not more than six (6) months; three hundred sixty-four (364) days; and
 - (C) has an annual limit of at least two million dollars (\$2,000,000).
 - (7) A policy that provides indemnity benefits not based on any expense incurred requirement, including a plan that provides coverage for:
 - (A) hospital confinement, critical illness, or intensive care; or
 - (B) gaps for deductibles or copayments.
 - (8) A supplemental plan that always pays in addition to other coverage.
 - (9) A student health plan.
 - (10) An employer sponsored health benefit plan that is:
 - (A) provided to individuals who are eligible for Medicare; and
 - (B) not marketed as, or held out to be, a Medicare supplement policy.

SECTION 18. IC 27-8-24.1-1, AS AMENDED BY P.L.173-2007, SECTION 41, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE



- JULY 1, 2019]: Sec. 1. (a) As used in this chapter, "accident and sickness insurance policy" means an insurance policy that provides at least one (1) of the types of insurance described in IC 27-1-5-1, Classes 1(b) and 2(a), and is issued on a group basis.
 - (b) The term does not include the following:
 - (1) Accident only, credit, dental, vision, Medicare supplement, long term care, or disability income insurance.
 - (2) Coverage issued as a supplement to liability insurance.
 - (3) Worker's compensation or similar insurance.
 - (4) Automobile medical payment insurance.
 - (5) A specified disease policy.
 - (6) A short term insurance plan that:
 - (A) may not be renewed and for the greater of:
 - (i) thirty-six (36) months; or
 - (ii) the maximum period permitted under federal law;
 - (B) has a duration term of not more than six (6) months; three hundred sixty-four (364) days; and
 - (C) has an annual limit of at least two million dollars (\$2,000,000).
 - (7) A policy that provides indemnity benefits not based on any expense incurred requirement, including a plan that provides coverage for:
 - (A) hospital confinement, critical illness, or intensive care; or
 - (B) gaps for deductibles or copayments.
 - (8) A supplemental plan that always pays in addition to other coverage.
 - (9) A student health plan.
 - (10) An employer sponsored health benefit plan that is:
 - (A) provided to individuals who are eligible for Medicare; and
 - (B) not marketed as, or held out to be, a Medicare supplement policy.
- SECTION 19. IC 27-8-24.2-3, AS ADDED BY P.L.109-2008, SECTION 2, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2019]: Sec. 3. (a) As used in this chapter, "policy of accident and sickness insurance" has the meaning set forth in IC 27-8-5-1.
 - (b) The term does not include the following:
 - (1) Accident only, credit, dental, vision, Medicare, Medicare supplement, long term care, or disability income insurance.
 - (2) Coverage issued as a supplement to liability insurance.
 - (3) Automobile medical payment insurance.
 - (4) A specified disease policy.
 - (5) A limited benefit health insurance policy.



- (6) A short term insurance plan that:
 - (A) may not be renewed and for the greater of:
 - (i) thirty-six (36) months; or
 - (ii) the maximum period permitted under federal law;
 - (B) has a duration term of not more than six (6) months; three hundred sixty-four (364) days; and
 - (C) has an annual limit of at least two million dollars (\$2,000,000).
- (7) A policy that provides a stipulated daily, weekly, or monthly payment to an insured during hospital confinement, without regard to the actual expense of the confinement.
- (8) Worker's compensation or similar insurance.
- (9) A student health insurance policy.

SECTION 20. IC 27-8-27-4 IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2019]: Sec. 4. (a) For purposes of this chapter, "health insurance plan" means any:

- (1) hospital or medical expense incurred policy or certificate;
- (2) hospital or medical service plan contract; or
- (3) health maintenance organization subscriber contract; provided to an insured.
 - (b) The term does not include the following:
 - (1) Accident-only, credit, dental, Medicare supplement, long term care, or disability income insurance.
 - (2) Coverage issued as a supplement to liability insurance.
 - (3) Worker's compensation or similar insurance.
 - (4) Automobile medical payment insurance.
 - (5) A specified disease policy issued as an individual policy.
 - (6) A limited benefit health insurance plan issued as an individual policy.
 - (7) A short term insurance plan that:
 - (A) may not be renewed and for the greater of:
 - (i) thirty-six (36) months; or
 - (ii) the maximum period permitted under federal law;
 - (B) has a duration term of not more than six (6) months; three hundred sixty-four (364) days; and
 - (C) has an annual limit of at least two million dollars (\$2,000,000).
 - (8) A policy that provides a stipulated daily, weekly, or monthly payment to an insured during hospital confinement, without regard to the actual expense of the confinement.

SECTION 21. IC 27-8-28-1 IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2019]: Sec. 1. (a) As used in this



chapter, "accident and sickness insurance policy" means an insurance policy that provides one (1) or more of the kinds of insurance described in Class 1(b) and 2(a) of IC 27-1-5-1.

- (b) The term does not include the following:
 - (1) Accident only, credit, dental, vision, Medicare supplement, long term care, or disability income insurance.
 - (2) Coverage issued as a supplement to liability insurance.
 - (3) Automobile medical payment insurance.
 - (4) A specified disease policy issued as an individual policy.
 - (5) A limited benefit health insurance policy issued as an individual policy.
 - (6) A short term insurance plan that:
 - (A) may not be renewed and for the greater of:
 - (i) thirty-six (36) months; or
 - (ii) the maximum period permitted under federal law;
 - (B) has a duration term of not more than six (6) months; three hundred sixty-four (364) days; and
 - (C) has an annual limit of at least two million dollars (\$2,000,000).
 - (7) A policy that provides a stipulated daily, weekly, or monthly payment to an insured during hospital confinement without regard to the actual expense of the confinement.
 - (8) Worker's compensation or similar insurance.



Speaker of the House of Representatives	
President of the Senate	
President Pro Tempore	
Governor of the State of Indiana	
Date:	Time:

