

**Appendix 1: Regulatory Impact Summary Table\***

<b>Fiscal Costs</b>	<b>FY 2020</b>	<b>FY 2021</b>	<b>FY 2022</b>
State Government	\$0	\$0	\$0
Local Government	\$0	\$0	\$0
Small Businesses	\$0	\$0	\$0
Non-Small Businesses	\$0	\$0	\$0
Other Person	\$0	\$0	\$0
<b>Total Fiscal Costs:</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>
<b>Fiscal Benefits</b>			
State Government	\$0	\$0	\$0
Local Government	\$0	\$0	\$0
Small Businesses	\$0	\$0	\$0
Non-Small Businesses	\$0	\$0	\$0
Other Persons	\$0	\$0	\$0
<b>Total Fiscal Benefits:</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>
<b>Net Fiscal Benefits:</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>

\*This table only includes fiscal impacts that could be measured. If there are inestimable fiscal impacts, they will not be included in this table. Inestimable impacts for State Government, Local Government, Small Businesses and Other Persons are described in the narrative. Inestimable impacts for Non-Small Businesses are described in Appendix 2.

**Appendix 2: Regulatory Impact to Non-Small Businesses**

While this rule does affect non-small businesses, this rule change is not expected to have any fiscal impacts on non-small businesses revenues or expenditures. This is because the non-small businesses in question – health insurers – are already complying with the provisions of the rule.

The head of the Insurance Department, Todd E. Kiser, has reviewed and approved this fiscal analysis.

\*\*"Non-small business" means a business employing 50 or more persons; "small business" means a business employing fewer than 50 persons.

**R590. Insurance, Administration.**

**R590-233. Health Benefit Plan Insurance Standards.**

**R590-233-2. Purpose and Scope.**

(1) Purpose. The purpose of this rule is to provide reasonable standardization and simplification of terms and coverages of insurance policies in order to facilitate public understanding and comparison and to prohibit provisions which may be misleading or confusing in connection either with the purchase of such coverages or with the settlement of claims, and to provide for full disclosure in the sale of such insurance.

(2) Scope.

(a) Except as excluded under (b), this regulation applies to all individual and group health benefit plan policies, including policies issued to associations, trusts, discretionary groups, or other similar groupings.

(b) This rule shall not apply to employer group health benefit plans.

(c) This rule does not apply to a health benefit plan subject to R590-277, Managed Care Health Benefit Plan Policy Standards.

(3) The requirements contained in this regulation shall be in addition to any other applicable regulations previously adopted.

**KEY: health insurance**

**Date of Enactment or Last Substantive Amendment: July 30, 2007**

**Notice of Continuation: December 4, 2015**

**Authorizing, and Implemented or Interpreted Law: 31A-2-201;  
31A-2-202; 31A-22-605; 31A-22-623; 31A-22-626; 31A-23a-402;  
31A-23a-412; 31A-26-301**