

**ADOPTED REGULATION OF THE
COMMISSIONER OF INSURANCE**

LCB File No. R122-24

EXPLANATION – Matter in *italics* is new; matter in brackets ~~omitted material~~ is material to be omitted.

AUTHORITY: § 1, NRS 687B.355.

A REGULATION relating to insurance; establishing the manner in which an insurer under a health benefit plan is required to respond to a request from a policyholder for certain information regarding claims paid on behalf of the policyholder; and providing other matters properly relating thereto.

Legislative Counsel's Digest:

Existing law requires an insurer to provide a policyholder with information regarding claims paid on behalf of the policyholder within 30 working days after the insurer receives a written request from the policyholder, if the policyholder requests such information for the renewal of a policy. Existing law additionally authorizes the Commissioner of Insurance to adopt regulations relating to the requirement to provide such information. (NRS 687B.355) This regulation requires an insurer, when responding to such a request for information for the renewal of a health benefit plan, to complete and provide to the policyholder the appropriate Claims Report Template form that is prescribed by the Division of Insurance of the Department of Business and Industry and made available on the Internet website maintained by the Division.

Section 1. Chapter 687B of NAC is hereby amended by adding thereto a new section to read as follows:

1. When responding to a request from a policyholder for information for the renewal of a health benefit plan pursuant to subsection 1 of NRS 687B.355, an insurer shall complete and provide to the policyholder:

(a) If the policyholder is a small employer, the Claims Report Template form for a small employer that is prescribed by the Division and made available on the Internet website

maintained by the Division, with all corresponding data requested in the tabs of the Claims Report Template.

(b) If the policyholder is a large employer, the Claims Report Template form for a large employer that is prescribed by the Division and made available on the Internet website maintained by the Division, with all corresponding data requested in the tabs of the Claims Report Template.

2. As used in this section:

(a) “Health benefit plan” has the meaning ascribed to it in NRS 687B.470.

(b) “Large employer” has the meaning ascribed to it in 42 U.S.C. § 300gg-91(e)(2).

(c) “Small employer” has the meaning ascribed to it in NRS 689C.095.