

**Rule Summary and Fiscal Analysis (Part A)****Department of Insurance**

Agency Name

Division

**Tina Chubb**

Contact

**50 W Town Street Suite 300 Columbus OH  
43215-0000**

Agency Mailing Address (Plus Zip)

**(614) 728-1044**

Phone

**(614)****644-3742**

Fax

**3901-8-09**

Rule Number

**NEW**

TYPE of rule filing

Rule Title/Tag Line

**Solicitation and sale of medicare supplemental accident and health policies.****RULE SUMMARY**

1. Is the rule being filed consistent with the requirements of the RC 119.032 review? **No**

2. Are you proposing this rule as a result of recent legislation? **No**

3. Statute prescribing the procedure in accordance with the agency is required to adopt the rule: **119.03**

4. Statute(s) authorizing agency to adopt the rule: **3901.041, 3901.21**

5. Statute(s) the rule, as filed, amplifies or implements: **3901.19 to 3901.26**

6. State the reason(s) for proposing (i.e., why are you filing,) this rule:

Five year rule review under RC 119.032. This rule replaces former OAC 3901-1-35 as it is re-promulgated in Chapter 3901-8 (Health Insurance).

7. If the rule is an AMENDMENT, then summarize the changes and the content of the proposed rule; If the rule type is RESCISSION, NEW or NO CHANGE, then summarize the content of the rule:

This rule makes certain behavior an unfair or deceptive act or practice in the sale or

solicitation of medicare supplement accident and health policies. It has to do with disclosure and disclaimer of connection with the government, so as to avoid misleading consumers.

Changes include: deletion of exception for group, blanket, franchise; requirement to include disclaimers in marketing material of connection to federal government; prohibition of certain personal solicitation approaches.

8. If the rule incorporates a text or other material by reference and the agency claims the incorporation by reference is exempt from compliance with sections 121.71 to 121.74 of the Revised Code because the text or other material is **generally available** to persons who reasonably can be expected to be affected by the rule, provide an explanation of how the text or other material is generally available to those persons:

*This response left blank because filer specified online that the rule does not incorporate a text or other material by reference.*

9. If the rule incorporates a text or other material by reference, and it was **infeasible** for the agency to file the text or other material electronically, provide an explanation of why filing the text or other material electronically was infeasible:

*This response left blank because filer specified online that the rule does not incorporate a text or other material by reference.*

10. If the rule is being **rescinded** and incorporates a text or other material by reference, and it was **infeasible** for the agency to file the text or other material, provide an explanation of why filing the text or other material was infeasible:

*Not Applicable.*

11. If **revising** or **refiling** this rule, identify changes made from the previously filed version of this rule; if none, please state so:

*Not Applicable.*

12. 119.032 Rule Review Date:

(If the rule is not exempt and you answered NO to question No. 1, provide the scheduled review date. If you answered YES to No. 1, the review date for this rule is the filing date.)

NOTE: If the rule is not exempt at the time of final filing, two dates are required:

the current review date plus a date not to exceed 5 years from the effective date for Amended rules or a date not to exceed 5 years from the review date for No Change rules.

**FISCAL ANALYSIS**

13. Estimate the total amount by which *this proposed rule* would **increase / decrease** either **revenues / expenditures** for the agency during the current biennium (in dollars): Explain the net impact of the proposed changes to the budget of your agency/department.

This will have no impact on revenues or expenditures.

0.00

Not Applicable.

14. Identify the appropriation (by line item etc.) that authorizes each expenditure necessitated by the proposed rule:

Not Applicable.

15. Provide a summary of the estimated cost of compliance with the rule to all directly affected persons. When appropriate, please include the source for your information/estimated costs, e.g. industry, CFR, internal/agency:

Unknown. Agents must leave a written disclosure. Carriers already must file medicare supplement advertising for approval before using it in Ohio.

16. Does this rule have a fiscal effect on school districts, counties, townships, or municipal corporations? **No**

17. Does this rule deal with environmental protection or contain a component dealing with environmental protection as defined in R. C. 121.39? **No**