



## CONSUMER CHOICE EVIDENCE OF COVERAGE (EOC) CHECKLIST

### Individual Plans

Every effort has been made to ensure the accuracy of the information in this document. All parties should consult the Texas Insurance Code, the Texas Administrative Code, and other applicable laws.

#### Important Note

The requirements listed are only summaries. The reader should refer to the actual cited statutes or rules to review the complete provisions listed.

**Form Use** - For each listed item, complete the following:

**Page No. field** - enter a form page number reference, or N/A if not applicable.

**First comment box** - enter general comments or form objections. In the drop down box select: No Comments, Comments, or Objection.

Text size: 1200 characters. When you print the form, only the visible text (first three lines) will print.

To view the full text in a comment box, click on the + icon in the lower right corner of the box and then use the up or down scroll buttons.

**Second comment box labeled Company Response** - enter a response if the first box is marked Objection (optional)

Use the last two pages of this form for additional comments, objections and responses (text size: 4000 characters).

#### FILING REQUIREMENTS

Page No.  HMOs must file the evidence of coverage and related forms for approval prior to issuance - [TIC §1271.101](#) and [28 TAC §11.301\(4\)](#) and [§11.501](#)

Company Response

Page No.  Plain language requirements - [28 TAC §3.601 - 3.602](#)

Company Response

FORMS AND DOCUMENTS TO BE INCLUDED IN FILING

Page No.	<input type="text"/>	Cost Savings Statement - reduction in premium resulting from the differences in coverage and design between the consumer choice health benefit plan and an identical plan providing all state mandated benefits - <a href="#">28 TAC §21.3543(2)(B)</a>
	<input type="text"/>	
Company Response		

  

Page No.	<input type="text"/>	Certification of compliance relating to Offer of State Mandated Plan - <a href="#">28 TAC §21.3542</a> and <a href="#">§21.3543(2)(C)</a>
	<input type="text"/>	
Company Response		

  

Page No.	<input type="text"/>	Health Carrier Disclosure - <a href="#">28 TAC §21.3530</a> and <a href="#">§21.3543(2)(A)</a>
	<input type="text"/>	
Company Response		

  

Page No.	<input type="text"/>	Rates to be used with a consumer choice health benefit plan - <a href="#">28 TAC §21.3543(2)(D)</a>
	<input type="text"/>	
Company Response		

MANDATORY EOC PROVISIONS

Page No.	<input type="text"/>	Alzheimer's disease, if applicable - <a href="#">TIC §1354.001 - 1354.002</a> , and <a href="#">28 TAC §11.506(23)</a>
	<input type="text"/>	
Company Response		

Page No.	<input type="text"/>	Cancellation or termination of contract - <a href="#">TIC §843.208</a> and <a href="#">§1271.307</a> , and <a href="#">28 TAC §11.506(3)(C) - (D)</a>
	<input type="text"/>	
Company Response		

### Complaint and Appeal Procedures:

Page No.	<input type="text"/>	Complaints - <a href="#">TIC §843.251 - 843.262</a> and <a href="#">§1271.054</a>
	<input type="text"/>	
Company Response		

Page No.	<input type="text"/>	Retaliatory action prohibited for filing a complaint - <a href="#">TIC §843.281</a>
	<input type="text"/>	
Company Response		

Page No.	<input type="text"/>	Adverse determination (includes experimental and investigational determinations for plans issued for delivery, or renewed on or after 1/1/2010) and Appeal of Adverse Determination, including Independent Review Organization (IRO) information - Utilization Review - <a href="#">TIC §4201.001 - 4201.603</a> , and <a href="#">28 TAC §11.506(5)</a> and <a href="#">§19.1701 - 19.1719</a>
	<input type="text"/>	
Company Response		

Page No.	<input type="text"/>	Conformity with state law - <a href="#">28 TAC §11.506(19)</a>
	<input type="text"/>	
Company Response		

Page No.	<input type="text"/>	Consideration - <a href="#">28 TAC §11.507(3)</a>
	<input type="text"/>	
Company Response		
Page No.	<input type="text"/>	Consumer choice required notice - <a href="#">28 TAC §21.3528</a>
	<input type="text"/>	
Company Response		
Page No.	<input type="text"/>	Continuance of coverage due to change in marital status - <a href="#">28 TAC §11.507(4)</a> and <a href="#">§21.407</a>
	<input type="text"/>	
Company Response		
Page No.	<input type="text"/>	Definitions - <a href="#">28 TAC §11.506(6)</a>
	<input type="text"/>	
Company Response		
Page No.	<input type="text"/>	Effective date - <a href="#">28 TAC §11.506(7)</a>
	<input type="text"/>	
Company Response		
Page No.	<input type="text"/>	Eligibility requirements (see also “Eligibility and Enrollment Standards”) - <a href="#">28 TAC §11.506(8)</a>
	<input type="text"/>	
Company Response		

Page No.	<input type="text"/>	Emergency services - <a href="#">TIC §843.002(7)</a> and <a href="#">§1271.155</a> , and <a href="#">28 TAC §11.506(9)</a> and <a href="#">§11.508(a)(1)(J)</a>
	<input type="text"/>	
Company Response		
Page No.	<input type="text"/>	Entire contract, amendments - <a href="#">28 TAC §11.506(10)</a>
	<input type="text"/>	
Company Response		
Page No.	<input type="text"/>	Exclusions and limitations - <a href="#">28 TAC §11.506(11)</a>
	<input type="text"/>	
Company Response		
Page No.	<input type="text"/>	Face page - HMO name, address and telephone number - <a href="#">28 TAC §11.506(1)</a>
	<input type="text"/>	
Company Response		
Page No.	<input type="text"/>	Face page - toll-free telephone numbers - <a href="#">TIC §521.102</a> , and <a href="#">28 TAC §11.506(1)</a>
	<input type="text"/>	
Company Response		
Page No.	<input type="text"/>	Face page - Important Notice (English/Spanish) - <a href="#">28 TAC §1.601</a> and <a href="#">§11.506(1)(C)</a>
	<input type="text"/>	
Company Response		

Page No.	<input type="text"/>	Grace period - <a href="#">28 TAC §11.506(12)</a>
	<input type="text"/>	
Company Response		

  

Page No.	<input type="text"/>	Incontestability - <a href="#">28 TAC §11.506(13)</a>
	<input type="text"/>	
Company Response		

  

Page No.	<input type="text"/>	Medicare Supplement and Long-Term Care minimum standards, if applicable - <a href="#">28 TAC §3.3301 - 3.3326</a> , <a href="#">§3.3801 - 3.3874</a> , and <a href="#">§11.506(20)</a>
	<input type="text"/>	
Company Response		

  

Page No.	<input type="text"/>	Obstetrician or gynecologist - designation and notice to enrollees - <a href="#">TIC §1451.251 - 1451.260</a> , and <a href="#">28 TAC §11.506(22)</a>
	<input type="text"/>	
Company Response		

  

Page No.	<input type="text"/>	Out-of-network services - when covered medically necessary services are not available through network physicians or providers - <a href="#">TIC §1271.055</a> , and <a href="#">28 TAC §11.506(14)</a> and <a href="#">§11.508(a)</a>
	<input type="text"/>	
Company Response		

Page No.  Premium rate changes - 60-day notice of increase - [TIC §843.2071](#)

Company Response

Page No.  Prompt payment of enrollee claims - [TIC §542.051- 542.061](#) and [§1271.005\(c\)](#), and [28 TAC §11.506\(4\)](#)

Company Response

Page No.  Reinstatement - [28 TAC §11.507\(1\)](#)

Company Response

Page No.  Service area - description and map; a ZIP code map and a provider list may meet this requirement - [28 TAC §11.506\(16\)](#)

Company Response

Page No.  Schedule of benefits (co-payments, deductibles) - [28 TAC §11.506\(2\)](#)

Company Response

Page No.  Ten days to examine agreement - [28 TAC §11.507\(2\)](#)

Company Response

**OPTIONAL EOC PROVISIONS**Page No.  Arbitration - [28 TAC §11.511\(5\)](#)

Company Response

Page No.  Coordination of Benefits - [TIC §1203.001 - 1203.003](#), and [28 TAC §3.3501 - 3.3510](#), and [§11.511\(1\)](#)

Company Response

Page No.  Subrogation - [28 TAC §11.511\(2\)](#), and [Civil Practice and Remedies Code Chapter 140](#)

Company Response

Page No.  Workers' Compensation (WC) Insurance - sale of substitutes to WC Insurance, if applicable - [28 TAC §5.6302](#) and [§11.511\(3\)](#)

Company Response

**ELIGIBILITY AND ENROLLMENT STANDARDS**Page No.  Adopted children - [28 TAC §11.506\(8\)\(A\)\(i\)](#)

Company Response



Page No.	<input type="text"/>	Asbestos - HMO may not reject, deny, limit, cancel, refuse to renew, increase the premiums for, or otherwise adversely affect the person's eligibility for or coverage under the contract based on the fact that enrollee has been exposed to asbestos fibers or silica or has filed a claim governed by <a href="#">Civil Practice and Remedies Code Chapter 90 - TIC §544.453</a>
	<input type="text"/>	
Company Response		
Page No.	<input type="text"/>	Court-ordered medical child support - <a href="#">TIC §1504.001 - 1504.102</a> , and <a href="#">28 TAC §11.506(8)(A)(iv)</a> and <a href="#">§21.2001 - 21.2011</a>
	<input type="text"/>	
Company Response		
<b>Genetic Testing - <a href="#">TIC 546.001 - 546.152</a>:</b>		
Page No.	<input type="text"/>	Notice to enrollee - <a href="#">TIC §546.051(a)(1)</a>
	<input type="text"/>	
Company Response		
Page No.	<input type="text"/>	Consent required (including consent from mother for testing in utero) - <a href="#">TIC §546.051(a)(3)</a> , <a href="#">§546.051(b)</a> and <a href="#">§546.053(b)(1)</a>
	<input type="text"/>	
Company Response		
Page No.	<input type="text"/>	Information to enrollee of test results - <a href="#">TIC §546.051(b)(1)-(2)</a> and <a href="#">§546.101</a>
	<input type="text"/>	
Company Response		

Page No.  Inducement prohibited (to buy insurance or to induce abortion) - [TIC §546.051\(c\)](#) and [§546.053\(b\)\(2\)](#)

Company Response

Page No.  Improper use of test results prohibited - [TIC §546.052](#)

Company Response

Page No.  Grandchildren - if children are eligible, limiting age for children and grandchildren must be stated in the EOC - [TIC §1201.062](#), [§1271.005\(e\)](#) and [§1271.006](#), and [28 TAC §11.506\(8\)\(E\)](#)

Company Response

Page No.  Handicapped child - a covered disabled child's attainment of limiting age does not operate to terminate the coverage of such child - [28 TAC §11.506\(17\)](#)

Company Response

Page No.  Limiting age - subscriber and dependents - [28 TAC §11.506\(8\)\(C\)](#)

Company Response

Page No.  Newborns - [28 TAC §11.506\(8\)\(D\)](#)



Company Response

Page No.  Newly acquired dependents - [28 TAC §11.506\(8\)\(B\)](#)



Company Response

Page No.  Past denial of coverage - HMO may not consider a determination that the applicant has or has not previously been denied health benefit plan coverage in underwriting the coverage for which the applicant has applied - [TIC §544.502](#)



Company Response

Page No.  Student coverage - termination due to change in student enrollment status - [TIC §1503.001 - 1503.003](#), and [28 TAC §11.506\(18\)](#)



Company Response

## BASIC HEALTH CARE SERVICES - MANDATORY COVERAGE

Services must be provided as needed without limitation as to time and cost unless permitted by statute or rule.

Page No.  Definition of “Basic Health Care Services” - [TIC §843.002\(2\)](#), and [28 TAC §11.2\(b\)\(8\)](#)



Company Response

Page No.	<input type="text"/>	Emergency services as required by <a href="#">TIC §1271.155</a> - <a href="#">28 TAC §11.508(a)(1)(J)</a>
	<input type="text"/>	
Company Response		

Page No.	<input type="text"/>	Inpatient services - <a href="#">28 TAC §11.508(a)(2)</a> Including: Administration of whole blood and blood plasma Anesthesia and oxygen services Drugs, medications and biologicals Room and board General nursing care Inhalation therapy Laboratory and other diagnostic tests Meals and special diets when medically necessary Radiation therapy Short-term rehabilitation therapy services in the acute hospital setting Special duty nursing when medically necessary Use of operating room and related facilities Use of intensive care unit and services X-ray services
	<input type="text"/>	
Company Response		

Page No.	<input type="text"/>	Inpatient physician care services - <a href="#">28 TAC §11.508(a)(3)</a>
	<input type="text"/>	
Company Response		

Page No.  Outpatient hospital services - [28 TAC §11.508\(a\)\(4\)](#)  
Including:  
Ambulatory surgery services  
Diagnostic services, including laboratory, radiology and imaging services  
Rehabilitation and radiation therapy  
Treatment services

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Company Response	
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Page No.  Outpatient mental health services (not less than 20 visits) - [28 TAC §11.508\(a\)\(1\)\(I\)](#)

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Company Response	
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Page No.  Outpatient services - [28 TAC §11.508\(a\)\(1\)](#)  
Including:  
Home health services  
Prenatal services (if maternity benefit covered)  
Primary care - [TIC §843.203](#)  
Outpatient diagnostic services, including laboratory, radiology and imaging services  
Outpatient rehabilitation therapies (including physical, speech and occupational therapy)  
Outpatient services by other providers  
Specialist services  
Therapeutic radiology services

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Company Response	
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Page No.  Preventive health services - [28 TAC §11.508\(a\)\(1\)\(H\)](#)  
Including:  
Adult immunizations  
Cancer screenings - prostate and colorectal cancer as required by [TIC §1362.001 - 1362.004](#)  
and [§1363.001 - 1363.004](#)  
Cancer screenings - mammography as required by [TIC §1356.001 - 1356.005](#)  
Eye and ear exams for children through age 17  
Periodic adult health examinations as required by [TIC §1271.153](#)  
Immunizations for children as required by [TIC §1367.051 - 1367.054](#)  
Well-child care from birth as required by [TIC §1271.154](#)


### ADDITIONAL BENEFITS - OTHER THAN BASIC HEALTH CARE SERVICES

Page No.  Birth of Child and post delivery care - minimum inpatient hospital stay if the plan includes maternity benefits - [TIC §1366.051 - 1366.059](#), and [28 TAC §11.508\(b\)\(2\)](#), required by Federal Law


Page No.  Cervical cancer - annual diagnostic medical procedures for each woman 18 years of age or older for the early detection of cervical cancer - [TIC §1370.001 - 1370.004](#)


Page No.  Complications of pregnancy - [28 TAC §21.405\(1\)](#)


Page No.  Continuity of treatment by treating physician or provider of enrollee with a “special circumstance” and termination notice - [TIC §843.309](#) and [§843.362](#)



Company Response

Page No.  Craniofacial abnormalities - [TIC §1367.151 - 1367.153](#)



Company Response

Page No.  Diabetes care - self-management training, equipment and supplies - [TIC §1358.051 - 1358.056](#), and [28 TAC §11.508\(b\)\(3\)](#) and [§21.2601 - 21.2606](#)



Company Response

Page No.  Hearing test for newborns - [TIC §1367.101 - 1367.104](#)



Company Response

Page No.  Mastectomy - breast reconstruction and minimum hospital stay - [TIC §1357.001 - 1357.056](#), and [28 TAC §11.508\(b\)\(1\)](#), required by Federal Law



Company Response

Page No.	<input type="text"/>	Urgent care - <a href="#">28 TAC §11.1607(g)</a>
	<input type="text"/>	
Company Response		

COVERAGE STANDARDS

Page No.	<input type="text"/>	Discrimination - general prohibitions applicable to HMOs - <a href="#">TIC §544.001 - 544.054</a>
	<input type="text"/>	
Company Response		

Page No.	<input type="text"/>	Fibrocystic breast conditions - <a href="#">TIC §544.201 - 544.204</a>
	<input type="text"/>	
Company Response		

Page No.	<input type="text"/>	Maternity discrimination prohibited - underwriting - <a href="#">28 TAC §21.404(6)</a>
	<input type="text"/>	
Company Response		

Page No.	<input type="text"/>	Victims of family violence - <a href="#">TIC §544.151 - 544.158</a>
	<input type="text"/>	
Company Response		



ENROLLMENT FORM AND APPLICATION

Page No.	<input type="text"/>	Consumer choice required notice - <a href="#">28 TAC §21.3527</a>
	<input type="text"/>	
Company Response		
Page No.	<input type="text"/>	Disability affecting the enrollee's ability to communicate or read - <a href="#">28 TAC §11.1602</a>
	<input type="text"/>	
Company Response		
Page No.	<input type="text"/>	Obstetrician or gynecologist selection - <a href="#">28 TAC §11.506(22)(F)</a>
	<input type="text"/>	
Company Response		
Page No.	<input type="text"/>	Primary language other than English - <a href="#">28 TAC §11.1602</a>
	<input type="text"/>	
Company Response		

MEMBER IDENTIFICATION CARD

Page No.	<input type="text"/>	Basic Information - <a href="#">TIC §843.209</a> , and <a href="#">28 TAC §11.1601</a> and <a href="#">§21.2820</a>
	<input type="text"/>	
Company Response		

Page No.	<div></div>	Pharmacy ID card (if drugs are covered) - <a href="#">TIC §1369.151 - 1369.154</a> and <a href="#">§4151.152</a> , and <a href="#">28 TAC §11.1601(c)</a> and <a href="#">§21.3001 - 21.3005</a>
	<div></div>	
Company Response		

PROHIBITED PRACTICES

Page No.	<div></div>	Discretionary clause prohibited - an evidence of coverage may not include a discretionary clause - <a href="#">TIC §1271.057</a> , and <a href="#">28 TAC §3.1203</a>
	<div></div>	
Company Response		

*See next pages for additional comments or objections and space for additional responses, if any.*

**Additional Comments or Objections:**

**Additional Company Responses:**

Company Response