

Effective 5/13/2014

Sunsets 7/1/2015

31A-29-114 Deductibles -- Copayments.

- (1)
 - (a) A pool policy shall impose a deductible on a per calendar year basis.
 - (b) At least two deductible plans shall be offered.
 - (c) The deductible is applied to all of the eligible medical expenses incurred by the enrollee until the deductible has been satisfied. There are no benefits payable before the deductible has been satisfied.
 - (d) The pool may offer separate deductibles for prescription benefits.
- (2)
 - (a) A mandatory coinsurance requirement shall be imposed at the rate of at least 20%, except for a qualified high deductible health plan, of eligible medical expenses in excess of the mandatory deductible.
 - (b) Any coinsurance imposed under this Subsection (2) shall be designated in the pool policy.
- (3) The board shall establish maximum aggregate out-of-pocket payments for eligible medical expenses incurred by the enrollee for each of the deductible plans offered under Subsection (1)
 - (b).
- (4)
 - (a) When the enrollee has incurred the maximum aggregate out-of-pocket payments under Subsection (3), the board may establish a coinsurance requirement to be imposed on eligible medical expenses in excess of the maximum aggregate out-of-pocket expense.
 - (b) The circumstances in which the coinsurance authorized by this Subsection (4) may be imposed shall be designated in the pool policy.
 - (c) The coinsurance authorized by this Subsection (4) may be imposed at a rate not to exceed 5% of eligible medical expenses.
- (5) The limits on maximum aggregate out-of-pocket payments for eligible medical expenses incurred by the enrollee under this section may not include out-of-pocket payments for prescription benefits.