ARKANSAS REGISTER



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HOV 8 1996

SHARON PRIEST SECRETARY OF SHAFON Priest

	Secretary of State State Capitol Rm. 01 Little Rock, Arkansas 7220)1-1094
for Office Ise Only: Effective Date	97 Code Number <u>054.00.</u>	76-005
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tatutory Authority for Promulgat 25-15-204 et seg	ing Rules <u>ACA & 23-61-108, 23</u>	-66-201 et sen
Intended Effective Date	Legal Notice Published	Date . See Alloched
] Emergency	Final Date for Public Comment	. 12-10-96
] 10 Days After Filing	Filed With Legislative Council	. <u>11-4-96</u>
Other	Reviewed by Legislative Council	•
1-1-97	Adopted by State Agency	Herring late
CERTIFICATIO	N OF AUTHORIZED OFFICER	}
	hat The Attached Rules Were Adopted with Act 434 of 1967 As Amended.	ARK. ST
· · · · · ·	Signature	古台河
50/ 3	371-2820 Phone Number	TIDRARY
<u>-</u>	Title	• • • • • • • • • • • • • • • • • • • •
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Divisions

Administration 1-501-371-2620 1-501-371-2629 Fax

Accounting 1-501-371-2605

Consumer Services 1-501-371-2640 1-800-852-5494

Data Processing 1-501-371-2657

Finance 1-501-371-2665

Human Resources 1-501-371-2815

Legal 1-501-371-2820

License 1-501-371-2750

Life & Health 1-501-371-2765

Property & Casualty 1-501-371-2800

Risk Management 1-501-371-2690

Senior Insurance Network 1-501-371-2782 1-800-852-5494

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Arkansas Insurance Department

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1200 West Third Street Little Rock, AR 72201-1904 1-501-371-2600 1-800-282-9134 Fax 1-501-371-2618

SHARON PRIEST SECRETARY OF STATE

TO:

Lee Douglass

Commissioner

ALL LIFE AND DISABILITY INSURERS, HEALTH MAINTENANCE ORGANIZATIONS, FRATERNAL BENEFIT SOCIETIES, AND OTHER

INTERESTED PARTIES

FROM:

ARKANSAS INSURANCE DEPARTMENT

SUBJECT:

PROPOSED AMENDED RULE AND REGULATION 42

"STANDARDS TO PREVENT UNFAIR DISCRIMINATION IN REFERENCE TO

THE HUMAN IMMUNODEFICIENCY VIRUS (HIV) "

NOTICE OF PUBLIC HEARING

Pursuant to Arkansas Code Annotated Section 23-61-108, 23-66-201 et seq., and 25-15-204, NOTICE is hereby given that a Public Hearing will be held on Tuesday, December 10, 1996, at 9:00 a.m. in the First Floor Hearing Room, Arkansas Insurance Department, 1200 West Third Street, Little Rock, Arkansas 72201.

- 1. A Public Hearing will be held to determine whether the Insurance Commissioner for the State of Arkansas should adopt the proposed amendment to Rule and Regulation 42. The change involves authority to allow for the developed new technologies in testing for HIV to be used and for the protections to be afforded. A copy of the proposed amendment is attached.
- 2. All interested persons are encouraged to attend the Public Hearing and may appear and present, orally and in writing, statements, arguments or opinions on the proposed Rule. All insurers are responsible for notifying all Arkansas appointed agents and otherwise of the Hearing.
- 3. Persons wishing to testify should notify Bruce P. Heffner, CPCU, ARM, Associate Counsel, as soon as possible, and are requested to submit intended statements in writing. Written comments on the proposed Rule are also encouraged.

-Sincerely

Bruce P. Heffner, CPCU, ARM

Associate Counsel

Enclosure

1	Rule and Regulation 42
2 3 4 5 6 7 8 9 10 11 12 13 14	STANDARDS TO PREVENT UNFAIR DISCRIMINATION IN REFERENCE TO THE HUMAN IMMUNODEFICIENCY VIRUS (HIV) SECTION 1. Purpose 2. Authority 3. Applicability 4. Nondiscriminatory Testing for Human Immunodeficiency Virus (HIV) 5. Unfair Discrimination 6. Effective Date 7. Severability 8. Form
15	SECTION 1. PURPOSE
16 17 18 19 20 21	The purpose of this rule is to establish standards for testing for the presence of Human Immmunodeficiency Virus (HIV) and to prevent unfair discriminatory practices. By establishing standards to regulate trade practices the public will be protected from unfair acts or practices while at the same time affording insurers a reasonable basis for continued operation in this State.
22	SECTION 2. AUTHORITY
23 24 25	This rule is issued pursuant to the authority vested in the Insurance Commissioner under Ark. Stat. Ann. §23-61-108, §23-66-201 et seq. and §25-15-204.
26	SECTION 3. APPICABILITY
27 28 29 30	This rule shall apply to all life insurers, disability insurers, fraternal benefit societies, hospital medical service corporations, and health maintenance organizations licensed pursuant to the Arkansas Insurance Code.
31 32	SECTION 4. NONDISCRIMINATORY TESTING FOR HUMAN IMMUNODEFICIENCY.
33 34 35 36 37	(a) A proposed insured for life or disability insurance or any other coverage with a company licensed under the Arkansas Insurance Code may be required to be tested for the presence of the human immunodeficiency virus (HIV). Requiring such testing is not unfair discrimination provided:
38 39	(1) The testing is required on a nondiscriminatory basis for all individuals in the same class; and
40 41	(2) No proposed insured is denied as

1 An initial enzyme linked immunosorbent assay (ELISA) (A) 2 blood test is administered to the propsed insured, and 3 it indicates the presence of HIV antibodies in the blood; A second ELISA blood test is conducted and it indicates the presence of HIV antibodies in the blood: and (C) A Western Blot blood test is conducted and the results 8 of such test are not negative. 9 The Commissioner may prescribe by Bulletin other bleed tests to be used in complying with Section 4(a)(2). 10 11 These tests must be recognized by the Director of the 12 Arkansas Department of Health as acceptable for testing 13 for the human immunodeficiency virus. 14 SECTION 5. UNFAIR DISCRIMINATION 15 General Propositions (a) 16 No inquiry in an application for disability or life insurne (1)17 coverage, or in an investigation conducted by or on behalf of 18 an insurer in connection with an application for such 19 coverage, shall be directed toward determining the proposed 20 insured's sexual orientation. Sexual orientation may not be used in the underwriting 21 22 process or in the determination of insurability. 23 Insurers shall not direct, require or request insurance 24 support organizations to investigate, directly or indirectly, the sexual orientation of proposed insured or a beneficiary. 25 26 (b) Medical/lifestyle applications questions and underwriting 27 standards. 28 No question shall be used which is designed to establish the 29 sexual orientation of the proposed insured. 30 Questions relating to the proposed insured having, or having 31 been diagnosed or having, acquired immune deficiency syndrome (AIDS) or AIDS-related complex are permissible if they are 32 factual and designed to establish the existence of the 33 34 condition. 35 Questions relating to medical and other factual matters 36 intending to reveal the possible existence of a medical condition are permissible if they are not used as a proxy to 37 38 establish the sexual orientation of the proposed insured, and 39 the proposed insured has given an opportunity to provide an 40 explanation for any affirmative answers given

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application.

- Questions relating to the proposed insured's having, or having been diagnosed as having, sexually transmitted disease are permissible.
 - (5) Neither the marital status, the living arrangements, the occupation, the gender, the medical history, the beneficiary designation, nor the zip code or other territorial classification of a proposed insured's sexual orientation.
 - (6) For purposes of rating a proposed insured for health and life insurance, an insurer may impose territorial rates, but only if the rates are based on sound actuarial principles or are related to actual or reasonably anticipated experience.
 - (7) No adverse underwriting decision shall be made because medical records or a report from any other source shows that the proposed insured has demonstrated acquired immune deficiency syndrome-related concerns by seeking counseling from health care professionals. This paragraph does not apply to a proposed insured seeking or having sought treatment.
 - (8) Whenever a proposed insured is requested to AIDS-related test in connection with an application for insurance, the use of such a test must be revealed to the proposed insured or to any other person legally authorized to consent to such a test, and his or her written authorization obtained. The form of such authorization must be printed on a separate piece of paper and must contain the specific language in the form, entitled "Notice and Consent for AIDS Virus (HIV) Testing". This form is found in Section 8 of this rule. Other information may be included so long as it is not misleading or violative of any applicable law or Testing may be required only on a non-discriminatory basis. No adverse underwriting decision shall be made on the basis of such a positive AIDS-related test unless the established test protocol as provided herein has been followed.
- 35 (9) Insurers are permitted to ask a proposed insured whether the proposed insured has tested positive on an acquired immune deficiency syndrome-related bleed test.
 - (10) The result of an AIDS-related test shall be confidential.
 - (A) An insurer may not release or disclose such result or allow it to become known, except in the following circumstances:
 - (i) as may be required by law; or
- 42 (ii) pursuant to the written request or authorization of the 43 proposed insured or other person legally authorized to 44 consent to the test on behalf of the proposed insured,

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1 2		with such release pursuant to written request limite to:
3	(1)	the proposed insured;
4	(2):-1	the person legally authorized to consent to the test;
5 6	(3) a	a licensed physician, medical practitioner, or other person designated by the proposed insured;
7 8 9 10 11 12 13	(4) a p i r r r	in insurance medical information exchange under rocedures that are designed to assure confidentiality, not use of general codes that also cover esults of tests for other diseases or conditions not elated to AIDS, or for preparation of statistical eports that do not disclose the identify of any articular proposed insured;
14 15 16		reinsurer, if the reinsurer is involved in the nderwriting process, under procedures that are designed assume confidentiality;
17 18	(6) pe de	ersons who have the responsibility to make underwriting ecisions on behalf of the insurer; or
19 20 21		surer's legal counsel who needs such information to fectively represent the insurer in regard to matters oncerning the proposed insured.
22 23 24 25 26 27 28 29 30 31 32	test reshall merson registe copy of Your Tepublished and the publicar	a proposed insured or the person legally authorized to to the test request that notification of a positive esult be sent to him or her personally, the insurer hail the test result to the proposed insured or the legally authorized to consent to the test by red mail with delivery restricted to the addressee. A the brochure entitled "LATEST FACTS ABOUT AIDS - If est for Antibody to the AIDS Virus Is Positive," ed jointly by the United States Public Health Service American Red Cross, or of a substantially similar tion, shall accompany such notification.
33 34 35 36 37 38	positive or herse person d	a proposed insured, or the person legally authorized sent to the test, request that notification of a test result be sent to any person other than himself of a physician, the insurer shall mail same to the designated in the consent form by registered mail with restricted to the addressee.
39	SECTION 6. EFFECT	IVE DATE
40	This rule shall be	effective December 31, 1996.

1 2 3	Any section or provision of this rule held by a court to be invalid or unconstitutional shall not affect the validity of any other section or provision.
4	SECTION 8. FORM
5 6	- Anna - been an amen a coperation with allert De mach
7	NOTICE AND CONSENT FORM FOR AIDS VIRUS (HIV) TESTING
9 10 11	To evaluate your eligibility for insurance or insurance benefits, it is requested that you consent to be tested for the AIDS virus (HIV). By signing and dating this form, you agree that this test may be performed
12	and that underwriting decisions will be based on the test results.
13	DISCLOSURE OF TEST RESULTS:
14 15 16 17	All test results will be treated confidentially. The results of the test will be reported to the insurer identified on this form. Results of the tests will not otherwise be disclosed except as allowed by law or as stated below.
18	MEANING OF TEST RESULTS:
19 20 21 22 23	While positive HIV antibody test results do not mean that you have AIDS, they do mean that you may be at increased risk of developing AIDS or AIDS-related conditions. The test is a test for antibodies to the HIV virus, the causative agent for AIDS, and shows whether you have been exposed to the virus.
24 25 26 27	Positive HIV antibody test results could adversely affect your application for insurance. This mean that your application may be declined, that an increased premium may be charged, or that other policy changes may be necessary.
28	RELEASE OF RESULTS:
29	The results of this test may be released to the following:
30	(1) the proposed insured;
31	(2) the person legally authorized to consent to the test;
32	(3) a licensed physician, medical practitioner, or other person designated by the proposed insured;
14 15	(4) an insurance medical information exchange under procedures that are designed to assure confidentiality, including the use of general codes that also cover results of tests for
17 18	other diseases or conditions not related to AIDS, or for the preparation of statistical reports that do not disclose the

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1	identity of any particular proposed insured;
2 3 4	(5) a reinsurer, if the reinsurer is involved in the underwriting process, under procedures that are designed to assure confidentiality;
5 6	(6) persons who have the responsibility to make underwriting decisions on behalf of the insurer; or
7 8 9	(7) insurer's legal counsel who needs such information to effectively represent the insurer in regard to matters concerning the proposed insured.
10 11 12	The insurer may contact you for the name of a physician or other health care provider to whom you may authorize disclosure and with whom you may want to discuss the results.
13	CONSENT:
14 15 16 17	I have read and I understand this Notice and Consent Form. I voluntarily consent to testing and disclosure as described above. I understand that I have the right to request and receive a opy of this form. A photocopy of this form will be as valid as the original.
18	Date:
19	
20 21	Signature of Proposed Insured or Parent/Guardian