



ADMINISTRATIVE RULES OF MONTANA



6.6.5032 CRITERIA OF POLICIES OFFERED UNDER BASIC PLAN

- (1) Any health benefit plan offered to a small employer group that has a benefit value, as calculated in ARM 6.6.5036, of less than the benefit value of the insurer's standard plan will qualify as a basic health benefit plan contemplated by 33-22-1827 , MCA.
- (2) Any HMO plan offered by a small employer carrier that offers fewer benefits than the carrier's standard HMO plan is subject to the commissioner's final determination, as contemplated by 33-22-1827 , MCA.
- (3) All basic health benefit plans and basic HMO plans contemplated by 33-22-1827 , MCA, may exclude coverage for services of any category of licensed practitioners and any type of health care service otherwise required by law or rule, except as specified in 33-22-1827 and 33-22-1903 , MCA. Basic health benefit plans must comply with 49-2-309 , MCA.

Authorizing statute(s): Sec. 33-1-313 and 33-22-1822, MCA

Implementing statute(s): Sec. 33-22-1802, 33-22-1812, and 33-22-1827, MCA

History: NEW, 1994 MAR p. 1528, Eff. 6/10/94; AMD, 1995 MAR p. 2127, Eff. 10/13/95; AMD, 1998 MAR p. 1698, Eff. 6/26/98.