| Department of Consumer & Business Services Oregon Division of Financial Regulation – 5 P.O. Box 14480 Salem, Oregon 97309-0405 Phone 503-947-7983 TRANSMITTAL AND PRODUCT STANDARDS FOR ALL HEALTH ADVERTISEMENTS | Department action: Disapproved as incomplete Approved; Limitations Withdrawn Disapproved; Reason Action Date: |
|--|---|
| Date: | DFR No: |
| Insurer Name: | NAIC No: |
| Filing entity: <u>Note</u> : If not the insurer, a letter of authorization must be included in | the filing. |
| Contact Person: Title: | |
| Mailing Address: | |
| Toll-free Phone No: Fax No: | : |
| E-mail address: | |
| Requested effective date: (Must be after the mailed or con | npleted date) |
| Under ORS 742.009, sales materials for insurance products shal The Division of Financial Regulation uses the following standards the Department of Consumer and Business Services may require prior to use. Check the method of advertisement that will be used for pres | s to evaluate compliance. The Director of e advertisements to be filed for approval |
| dissemination in this state. The following methods include a | |
| Direct-mail includes newspapers, magazines, radio, and othe public. Individual presentation including, but not limited to, circulars, Materials prepared by an insurance producer or other representation an application is attached (tear or cut-Solicitation to senior citizens New marketing product name: | , leaflets, booklets, or illustrations. sentatives for any other use. |
| Please check off type of health insurance advertisement: | |
| Individual (hospital/surgical/medical expense) Group (hospital/surgical/medical expense) Sickness Medicare Supplement/Medigap Long Term Care Short-Term Care Nursing Home Other: | Benefits 🗍 Hospital/indemnity Health 🗍 Blanket/AD&D tion Drug |

Section 1- Filings for Prior Approval method

- Advertisements when an application is attached (tear or cut off).
- Direct-mailing or solicitation to seniors
- Medicare supplement
- Advertisement used for new health products offered by the insurer
- Long Term Care

List all form number(s) of the advertisement(s) filed for approval:

| Form Number | Form Name |
|-------------|-----------|
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Submission Package Requirements

- 1. Submit this document and complete all form filing requirements as prescribed on our website at http://dfr.oregon.gov/rates-forms/health/Pages/health.aspx.
- 2. In a cover letter or in the filing description in SERFF, include a complete explanation of the marketing strategy.
- 3. If submitting via paper, submit two sets of the entire filing, and one large, self-addressed, stamped envelope.
- 4. The Certificate of Compliance document must be signed by an authorized person and all relevant filing information must be included.
- 5. When you file revised advertisements, clearly state on the subject line of the cover letter or in the filing description in SERFF the form number of the advertisement being replaced.

Continue to Section 3

Section 2: Self-certification method

Do not send in this self-certification to the Division of Financial Regulation. Complete and retain this form with the advertisement(s). Check that each of the following items has been completed to qualify for self-certification:

- 1. Complete this form for *each* advertisement or group of advertisements developed for the same policy during the same time period.
- 2. Keep a copy of this completed form and the advertisement(s) and make them available to the Oregon Division of Financial Regulation for review upon request. Filings may be stored on disk or CD or other method.
- 3. Retain records for market conduct examination for (5) five years or as long used, whichever is longer.
- 4. All standards on this form are marked "Yes" unless *no part* of the statement applies.
- 5. List all of the form numbers, the date certified, the name and title of the person who completed the certification.

Form number(s) and title of documents:

| Form Number | Title of advertisement |
|-------------|------------------------|
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| Certified I | by: |
|-------------|-----|
|-------------|-----|

Date:

Signature: _____

Title:

Continue to section 3

Section 3- Complete the checklist for all advertisements

<u>Instructions:</u> Each statement must be checked "Yes" or "N/A". Each section title references the statute, rule, or bulletin.

- "N/A" cannot be used if <u>any part</u> of the statement applies to the advertisement.
- Applicable items marked "N/A" may result in immediate disapproval, please attach an explanation for every item marked "N/A".

Identification: OAR 836-010-0011, OAR 836-020-0245, OAR 836-020-0260

Yes N/A

1. Advertisements soliciting any feature of a particular policy or rider must include the form number of the policy or rider being solicited. Please provide the information below:

| Form number | SERFF or State filing number | Title of approved form | Location of form number on the advertisement |
|-------------|---------------------------------|---------------------------|--|
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| | | | |
| | | | |

2. The advertisement has a unique identifying form number in the lower left corner on the front or back cover.

Yes N/A

Yes N/A

- 3. Each advertisement clearly identifies the product as insurance and identifies the type of insurance.
- a) The marketing material does not identify the policy as a "plan" or "program" implying that it is something other than a policy. "Plan" or "program" may be used only for a package of information that includes document(s) other than the insurance policy. "Plan" may be used to identify several payment or benefit plans that provide options for the way the policy is issued.

Yes N/A

b) A name used in marketing may not sound like, or give the impression of being, an organization or company.

Insurer Information: ORS 742.009, ORS 746.075, ORS 746.110, OAR 836-020-0275, OAR 836-020-0260

Yes N/A

4. The insurer is prominently stated and any other entity identified must hold an insurance license for the line of insurance solicited and clearly identify the function performed (e.g., TPA, investment advisor).

Yes N/A

5. A trade name, service mark, group company name, subsidiary name, health plan name, agency/broker name, or investment management name does not create the impression that a company other than the insurer has any responsibility for the financial obligation under the policy. The name of a broker/dealer, financial institution, distributor, etc., that

is not insurance licensed may not appear in solicitation materials.

| Yes N/A | |
|---------|---|
| 6. | Reputation or position of a parent or a subsidiary is not used in conjunction with, or instead of, the reputation or position of the issuing company. |
| Yes N/A | |
| 7. | Any reference to ratings by an organization includes all of the following: a.) The name of the rating organization. |
| | b.) The type of rating (e.g. financial strength, claims-paying ability, qualified solvency, etc.).c.) The actual rating. |
| | d.) The numerical ranking for the rating. If the rating is not the highest rating from the organization, the rating must be stated in comparison to the highest rating. |

- (Example: An A+ rating from AM Best is its second-highest rating.)
- e.) The rating is the most current.

| Yes | N/A | | |
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8. Any inclusion of a title for a consultant complies with ORS 744.605. Agents may be referred to as customer representatives but may not describe themselves as consultants unless they are licensed as such.

Marketing Practices: OAR 836-020-0235, ORS 742.009, ORS 746.075, ORS 746.160, ORS 746.045

| Yes | N/A | |
|------|----------|--|
| | 9. | All testimonials are current and genuine from those who have purchased the product or have had first-hand experience with the product. Providers of testimonials may not be employed by or serve in an official capacity with the insurer or a related entity. |
| Yes | N/A | |
| | ☐ 10. | The advertisement does not directly compare policy benefits or provisions with products of other insurers. |
| Yes | N/A | |
| | ☐ 11. | An offering for a specific time period must include a factual advantage. |
| Yes | N/A | |
| | ☐ 12. | If the advertising material includes a promotional offer, the promotional offer is available to all who request information about the solicited policy. |
| Yes | N/A | |
| | | Advertising materials or applications used with advertisements do not have a pre- designated beneficiary or irrevocable beneficiary that limits the election of the policyholder. |
| Yes | N/A | |
| | ∐ 14. | Medicare supplement advertisements: If the advertisement offers a 12 month rate guarantee, the cover letter explains how the 12month guarantee is administered in accordance with OAR 836-052-0151. |
| Into | rnot Dro | ctices: OAR 836-020-0255, OAR 836-020-0210, ORS 746.620, ORS 746.665 |
| mie | nel Fla | <u>clices. OAR 636-020-0235, OAR 636-020-0210, ORS 740.020, ORS 740.005</u> |
| Yes | N/A | |
| | 15 | Web pages that include time-sensitive information have a revision or a "last-changed" |

- 15. Web pages that include time-sensitive information have a revision or a "last-changed date.
- Yes N/A
 - 16. Websites with disclaimers for malfunction or errors cannot include the insurance product information in the disclaimer. Online information about an insurance product must be accurate, as it is required to be in printed brochures.

Yes N/A

17. Websites cannot imply exclusive jurisdiction in their state of domicile.

Yes N/A

18. All questionnaires posted on the Web to gather information to be used to initiate a policy sale or offer of an insurance product are considered part of the application process and must be filed for approval prior to use.

Yes N/A

19. An advertisement website is not used to satisfy the written privacy notice requirement and the requirement to obtain consent for the distribution of any personal information to affiliates or third-party non-affiliates.

Presentation: ORS 742.005, OAR 836-020-0220, ORS 743.106

Yes N/A

| | | | Advertisements are clear and understandable in their presentation of premiums, labels, description of contents, title, headings, backing, and other indications including restrictions and exclusions. The information is clear and understandable to the consumer and is not unintelligible, uncertain, ambiguous, abstruse, or likely to mislead. |
|------|------|------|---|
| Yes | | 21. | All advertisements are clear and readable. The division considers color contrast, font style, and font size (not smaller than a 10-point type) in its determination of clear and readable. Footnotes may be in 8-point type, but must be readable. |
| Yes | N/A | | The advertisement's content does not give the impression of any connection with a governmental program or service through the use of phrases, symbols, or any other means. |
| Yes | N/A | | Statistical information is relevant and accurately presents all the facts, and the advertisement explains how the statistical information applies to the policy being advertised. |
| Yes | N/A | | Medicare Supplement and Long Term Care products described with enough detail for the consumer to determine its suitability to their need. |
| Tern | nino | logy | <u>/: OAR 836-020-0225(1)(b)(c)(d)</u> |
| Yes | N/A | | The advertisement does not exaggerate benefits or features beyond the terms of the policy. Words such as "all," "full," "best," "most," "highest," "extra cash," "extra pay," etc., are supported by citing a credible source. |

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| Yes | N/A |

26. The advertisement does not directly or indirectly imply that insurance products are investment vehicles. The use of "investing" or "saving," except in connection with a variable product, must be in direct reference to retirement or long-term savings or investing.

Yes N/A

27. Terms such as "no load" or "no sales charge" are clearly presented and do not imply that the policy has no administrative expenses, surrender charges, or fees including agent commissions.

Policy Information: OAR 836-020-0225, OAR 836-020-0230

| Yes | N/A | | |
|-------------|-------------|-----|---|
| | | 28. | The description of the policy is sufficient so as not to be deceptive about the nature or content of policy benefits payable, losses covered period of benefit payments, coverage period, or premium payable. |
| Yes | N/A | | |
| | | | Statutory features are not listed as special features particular to a policy. They are identified as features generic to all such policies of that type. |
| Yes | N/A | | |
| | | | Descriptions of policy limitations, exceptions, or reductions are not worded to imply that they are benefits. |
| Yes | N/A | | |
| | | | The description of benefit payment in an advertisement must be the same in the advertisement as stated in the policy, including any limitation on payments. |
| Yes | N/A | | |
| | | | Advertising of a specific or limited type of coverage clearly describes the specific benefit and doesn't use terms that imply broader coverage. |
| Yes | N/A | | |
| | | 33. | Insurance terms identifying the extent or nature of the coverage are defined. |
| Yes | N/A | | |
| | | | All features and benefits mentioned in the advertisement must be approved as part of the policy. |
| Yes | N/A | | |
| | | 35. | Same sex domestic partner should be included the same as a married spouse. (ORS 106.305(4), Bulletin 2008-2) |
| | _ | | |
| <u>Dire</u> | <u>ct R</u> | esp | <u>onse: OAR 836-020-0200 to OAR 836-020-305, OAR 836-052-0170, OAR 836-052-0696</u> |
| Yes | N/A | | |
| | | 36. | Letters or websites identify the insurer in the letterhead or heading. Return envelopes are addressed to a licensed entity or insurer. |
| Yes | | | |
| | | 37. | Materials clearly explain all features of the policy, including the coverage amounts, coverage periods, limitations, qualifying conditions, maximum premiums, policy fees and charges, and any policy exclusions. |
| Yes | N/A | | |
| | | 38. | Prominent disclosure is made of any limited or decreasing benefits and termination points. |
| Yes | N/A | | |
| | | 39. | Materials and applications clearly state that coverage will begin prior to payment of premium. |
| Yes | N/A | | |

- 40. Materials do not imply that the policy is a "low-cost plan" because insurance agents will not call or receive commissions.
- Yes N/A
- 41. The application states when the coverage begins, the amount of the premium to be enclosed (or due date), and the billing mode.