



## IIPRC-G-PRODUCTS APP

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### GROUP POLICYHOLDER APPLICATION UNIFORM STANDARDS

Effective Date: March 30, 2020

**Scope:** These standards are intended to apply to paper, telephonic or electronic applications for coverage provided by group insurance policy forms available for filing with the IIPRC. These standards are intended to apply to new business applications as well as applications used to request changes to existing policies.

The insurance company may submit one multi-purpose application to accommodate new business and all policy changes (reinstatement, addition, deletion or change in eligible classes, change in amounts of insurance, addition, deletion or change in benefit features, etc.), submit separate applications for each purpose, or submit an application with any combination of purposes (new business and reinstatement only, reinstatement only, new business and all policy changes, etc.).

**Mix and Match:** These standards are available to be used in combination with State Product Components as described in Section 111(b) of the *Operating Procedure for the Filing and Approval of Product Filings*. These standards are available to be used in combination with IIPRC-approved or state-approved group life insurance, disability income insurance and annuity forms.

**Self-Certification:** These standards are not available to be filed using the *Rule for the Self-Certification of Product Components Filed with the Interstate Insurance Product Regulation Commission*.

As used in these standards, the following definitions apply:

“Application” is any form used to apply for group insurance benefits for persons who are eligible for insurance under the group policy. The application shall be filed for approval whether or not it is attached to the policy at issue.

“Policy” is the group insurance policy issued to the Policyholder.

“Policyholder” is the group entity to whom the policy is issued.

“Signed or signature” means any symbol or method executed or adopted by a person with the present intention to authenticate a record, and which is on or transmitted by paper, electronic or telephonic media, and which is consistent with applicable law.

#### Drafting Notes:

- (1) The references to “policy” and “policyholder” do not preclude group annuity insurance companies from substituting “contract” and “contractholder” in their forms.
- (2) Other terms may be used in the application, provided they are used consistently.

**§ 1 ADDITIONAL SUBMISSION REQUIREMENTS**

**A. GENERAL**

The following additional filing submission requirements shall apply:

YES	NA	
		(1) Include all forms filed for approval with the filing. Changes to a previously approved form shall be highlighted.
		(2) If the application will be used for multiple purposes:
		(a) The intended purpose shall appear at the top or first page of the application, and a means of designating the intended use shall be available, such as a checkbox in front of each use. A “blank space write in” format is not acceptable.
		(b) The Policyholder shall be provided instructions that specify which sections of the application must be completed for each purpose.
		(3) Include all the sections and questions that may be required to be completed by the Policyholder.
		(4) If a filing is being submitted on behalf of an insurance company, include a letter or other document authorizing the firm to file on behalf of the insurance company.
		(5) If the application contains variable items, include the Statement of Variability.
		The submission shall also include a certification that any change or modification to a variable item shall be administered in accordance with the requirements in the Variability of Information section, including any requirements for prior approval of a change or modification.
		(6) Include a certification signed by an insurance company officer that the application has a minimum Flesch score of 50, if applicable. If sections of the application are subject to federal jurisdiction, and accordingly the Appendix A requirements will not apply, the certification shall include a statement to that effect.
		(7) Include a statement of the types of policy forms and plans with which the application will be used. For example, group term life insurance with accidental death and dismemberment benefits, accelerated death benefits, and continuation of insurance benefits with and without premium payment, etc.
		(8) Include a statement of how the application will be used, such as paper, electronic, and/or telephonic. For electronic and telephonic uses, the insurance company shall:
		(a) Describe the procedures that will be used to verify the authenticity of the transaction; and
		(b) Include a John Doe sample that shows additional sections and questions that are required to be completed by the Policyholder.
		Additionally, for telephonic uses the insurance company shall describe the process by which the Policyholder is given the completed application for signature prior to or on the date the policy is issued.

		(9) Include a description of any innovative or unique features of the application.
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**B. VARIABILITY OF INFORMATION**

YES	NA	
		(1) The insurance company may identify items that will be considered variable in the application, such as:
		(a) The insurance company address and other contact information;
		(b) Plan information, such as eligible classes, eligibility requirements, evidence of insurability requirements; amounts of insurance, and benefit features.
		The item shall be bracketed or otherwise marked to denote variability. The submission shall include a Statement on Variability that will discuss the conditions under which each variable item may change.

**C. READABILITY REQUIREMENTS**

YES	NA	
		(1) The application text shall achieve a minimum score of 50 on the Flesch reading ease test or an equivalent score on any other approved comparable reading test. See Appendix A for Flesch methodology.
		(2) The application text shall be presented in not less than ten-point type, one point leaded.
		(3) The style, arrangement and overall appearance of the application shall give no undue prominence to any portion of the text or section of the application.

**§ 2 GENERAL FORM REQUIREMENTS**

**A. COVER PAGE OR FIRST PAGE**

YES	NA	
		(1) The full corporate name of the insurance company shall appear in prominent print on the cover page or first page of the application. “Prominent print” means, for example, all capital letters, contrasting color, underlined or otherwise differentiated from the other type on the form.
		(2) If the application will be used for multiple purposes, the intended purpose shall appear at the top of the first or cover page of the application and a means of designating the appropriate use must be available, such as a checkbox in front of each use.
		(3) If the application will be used for policy changes, the application shall:
		(a) Instruct the Policyholder to provide the policy number for each existing policy for which change is being requested; and
		(b) Identify the eligible classes to whom the changes apply.
		(4) A marketing name or logo may also be used on the cover page or first page of the application provided that the marketing name or logo does not mislead as to the identity of the insurance company.

		(5) The insurance company’s complete mailing address shall appear on the cover page or first page of the application.
		(6) A form identification number shall appear at the bottom of the application in the lower left-hand corner of the application. The form number shall be adequate to distinguish the form from all others used by the insurance company.
		The form number shall include a prefix of ICCxx (where xx represents the appropriate year the form was submitted for filing) to indicate it has been approved by the Interstate Insurance Product Regulation Commission.
		(7) A brief description that shall appear in prominent print on the cover page or the first page of the application indicating that the application is for group insurance.

**B. FAIRNESS**

YES NA

		(1) The application shall not contain inconsistent, ambiguous, unfair, inequitable or misleading clauses, provisions that are against public policy as determined by the Interstate Insurance Product Regulation Commission, nor shall it contain exceptions and conditions that unreasonably affect the risk purported to be assumed in the general coverage of the policy forms with which the application will be used.
		(2) The application questions shall be presented as single direct questions, not as declaratory statements.

**§ 3 APPLICATION SECTIONS**

**A. POLICYHOLDER DATA**

The following additional filing submission requirements shall apply:

YES NA

		(1) The application shall request the information that the insurance company determines it needs to identify the Policyholder and provide contact information, such as: full legal name of the Policyholder, address, telephone number, email address, and tax identification number.
		(2) The application shall request the information that the insurance company determines it needs to identify subsidiaries, affiliates, divisions, branches or other similar entities of the Policyholder which are to be included for coverage under the policy and provide contact information, such as: the full legal name of the entity, address, telephone number, email address, and tax identification number.

**B. POLICY EFFECTIVE DATE**

YES NA

		(1) The application shall request the date that the group policy shall take effect, subject to the insurance company’s acceptance of the application and the Policyholder’s payment of the required premium due on or before such date.
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**C. POLICY SITUS**

YES NA

		(1) The application shall identify the jurisdiction whose laws will govern the policy.
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**D. COVERAGE DATA**

The following additional filing submission requirements shall apply:

YES NA

		(1) The application shall allow the policyholder when applicable to identify the classes of employees and/or dependents eligible for insurance under the policy, and specify coverage data as applicable such as: the number of persons to be covered, whether coverage will be contributory or noncontributory, the applicable percentages for contributory coverage (amount to be paid by policyholder and amount to be paid by the employee), type of coverage selected for each eligible class, eligibility requirements, eligibility waiting periods, the benefit amounts, the benefit amount reduction formulas, etc. For group annuity contracts, this provision is satisfied by specifying the plan type.
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**E. PREMIUM DATA**

YES NA

		(1) The application shall allow the policyholder to specify the amount, if any, paid with the application, and where applicable, premium mode and billing information.  <b>Drafting Note:</b> If premium is not required, this provision shall not apply.
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**F. AGREEMENT**

YES NA

		(1) The application shall include a statement that the Policyholder agrees to accept the terms and provisions of the group policy, including its exhibits, riders, endorsements or amendments, if any.
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**G. FRAUD NOTICE/WARNING**

The following additional filing submission requirements shall apply:

YES NA

		(1) The application shall include the following fraud notice/warning: “Any person who knowingly presents a false statement in an application for insurance may be guilty of a criminal offense and subject to penalties under state law.”
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**H. SIGNATURE REQUIREMENTS**

YES NA

		(1) The application shall include a signature section which may include items such as: printed name and signature of legal representative of the Policyholder; printed title of such representative; city and state where signed; date of signature; printed name and signature of licensed agent as required by state law; printed name and signature of a witness.
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