CHAPTER 2735 DEPARTMENT OF COMMERCE SEXUAL DISCRIMINATION IN INSURANCE

2735.0100 2735.0200 DEFINITIONS PURPOSE AUTHORITY.

2735 0400 2735 0500 APPLICABILITY AND SCOPE AVAILABILITY REQUIREMENTS.

2735.0100 DEFINITIONS.

Subpart 1. Scope. For the purposes of parts 2735.0100 to 2735.0500, the terms defined in this part have the meanings given them.

Subp. 2. Contracts. "Contracts" means any insurance policy, plan, group contract certificate, or binder, including any rider or endorsement offered by an insurer.

Subp. 3. Insurer. "Insurer" means any insurance company, association, reciprocal or interinsurance exchange, nonprofit hospital plan, nonprofit professional health service plan, health maintenance organization, fraternal benefit society, or beneficial association.

Statutory Authority: MS s 72A.19 subd 1

History: 10 SR 1266

2735.0200 PURPOSE.

The purpose of parts 2735.0100 to 2735.0500 is to eliminate the act of denying benefits or coverage on the basis of sex or marital status in the terms and conditions of insurance contracts and in the underwriting criteria of insurance carriers.

Statutory Authority: MS s 72A.19 subd 1

History: 10 SR 1266

2735.0300 AUTHORITY.

Parts 2735.0100 to 2735.0500 are adopted pursuant to Minnesota Statutes, sections 45.023; 72A.20, subdivision 16; and 72A.19, subdivision 2.

Statutory Authority: MS s 72A.19 subd 1

History: 10 SR 1266

2735.0400 APPLICABILITY AND SCOPE.

Parts 2735.0100 to 2735.0500 apply to all contracts delivered or issued for delivery in this state by an insurer on or after December 9, 1985, to all existing group contracts which are amended on or after these parts, and to all group insurance policies or group subscriber contracts that provide coverage for Minnesota residents enrolled thereunder.

Statutory Authority: MS s 72A.19 subd 1

History: 10 SR 1266

2735.0500 AVAILABILITY REQUIREMENTS.

Availability of any insurance contract shall not be denied to an insured or prospective insured on the basis of sex or marital status of the insured or prospective insured. The amount of benefits payable, or any term, condition, or type of coverage shall not be restricted, modified, excluded, or reduced on the basis of the sex or marital status of the insured or prospective insured except to the extent the amount of benefits, term, condition, or type of coverage vary as a result of the application of rate differentials permitted under Minnesota law. However, nothing in this part prohibits an insurer from taking marital status into account for the purpose of defining persons eligible for dependent benefits. Practices prohibited by this part include but are not limited to the following:

- A. denying coverage to females gainfully employed at home, employed part time, or employed by relatives when coverage is offered to males similarly employed;
 - B. denying policy riders to females when the riders are available to males;
- C. denying maternity benefits to insureds or prospective insureds purchasing an individual contract when comparable family coverage contracts offer maternity benefits:
- D. denying, under group contracts, dependent coverage to husbands of female employees, when dependent coverage is available to wives of male employees;
- E. denying disability income contracts to employed women when coverage is offered to men similarly employed;
- F. treating complications of pregnancy differently from any other illness or sickness under the contract;
- G. restricting, reducing, modifying, or excluding benefits relating to coverage involving the genital organs of only one sex;
- H. offering lower maximum monthly benefits to women than to men who are in the same classification under a disability income contract;
- I. offering more restrictive benefit periods and more restrictive definitions of disability to women than to men in the same classifications under a disability income contract:
- J. establishing different conditions by sex under which the policyholder may exercise benefit options contained in the contract; and
- K. limiting the amount of coverage an insured or prospective insured may purchase based upon the insured's or prospective insured's marital status unless the limitation is for the purpose of defining persons eligible for dependent benefits.

Statutory Authority: MS s 72A.19 subd 1

History: 10 SR 1266