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Sequence Number: 08-11-10
Notice ID(s): 1312
File Date: 08/12/2010

Notice of Rulemaking Hearing

Hearings will be conducted in the manner prescribed by the Uniform Administrative Procedures Act, Tennessee Code Annotated, Section 4-5-204. For questions and copies of the notice, contact the person listed below.

Agency/Board/Commission:	Department of Commerce and Insurance
Division:	Insurance
Contact Person:	Barbara A. Doak, Chief Counsel for Insurance, Securities & TennCare Oversight
Address:	500 James Robertson Parkway Davy Crockett Tower, 2 nd Floor Nashville, TN 37243
Phone:	615-741-9467
Email:	barbara.doak@tn.gov

Any Individuals with disabilities who wish to participate in these proceedings (to review these filings) and may require aid to facilitate such participation should contact the following at least 10 days prior to the hearing:

ADA Contact:	Don Coleman
Address:	500 James Robertson Parkway Davy Crockett Tower, 5 th Floor
Phone:	615-741-6500
Email:	don.coleman@tn.gov

Hearing Location(s) (for additional locations, copy and paste table)

Address 1:	500 James Robertson Parkway		
Address 2:	Davy Crockett Tower, 2 nd Floor, RM 212		
City:	Nashville		
Zip:	37243		
Hearing Date :	10/05/2010		
Hearing Time:	10:00 AM	<input checked="" type="checkbox"/> _X_CDT	<input type="checkbox"/> _EST

Revision Type (check all that apply):

- Amendment
 New
 Repeal

Rule(s) (ALL chapters and rules contained in filing must be listed. If needed, copy and paste additional tables to accommodate more than one chapter. Please enter only **ONE** Rule Number/Rule Title per row.)

Chapter Number	Chapter Title
0780-1-20	Filing and Approval of Accident and Sickness Policies, Except Credit Accident and Sickness Policies, Premium Rates, and Claim Forms
Rule Number	Rule Title
0780-1-20-.01	General Filing Requirements
0780-1-20-.03	Previously Approved Forms

Chapter 0780-01-20
Filing and Approval of Accident and Sickness Policies, Except
Credit Accident and Sickness Policies, Premium Rates, and Claim Forms
Amendments

0780-1-20-.01(5) General Filing Requirements is amended by deleting subsection (5) in its entirety and replacing it with a new subsection (5) as follows:

- (5) Approval of each form or policy shall be subject to the requirements set forth in all applicable state and federal laws, rules and regulations.

Authority: T.C.A. §§ 56-2-301; 56-1-701; 56-26-114; 56-26-102; 56-26-103

0780-1-20.03 Previously Approved Forms is amended by adding a new, appropriately designated subsection (5) as follows:

- (5) An affirmative statement that the provisions of each policy, rider or endorsement complies with all applicable state and federal laws, rules and regulations.

Authority: T.C.A. §§ 56-2-301; 56-1-701; 56-26-114; 56-26-102; 56-26-103

I certify that the information included in this filing is an accurate and complete representation of the intent and scope of rulemaking proposed by the agency.

Date: 8-12-2010

Signature: Barbara A. Doak

Name of Officer: Barbara A. Doak

Chief Counsel for Insurance, Securities & TennCare

Title of Officer: Oversight



Subscribed and sworn to before me on: August 12, 2010

Notary Public Signature: W. C. Henderson

My commission expires on: August 19, 2013

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Filed with the Department of State on: 8/12/10

Tre Hargett

Tre Hargett
Secretary of State

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