



OFFICE OF INSURANCE REGULATION

Life & Health Product Review

LONG TERM CARE ADVERTISEMENT CHECKLIST

Statute/Rule	Description	Yes	No	N/A	Page #
69O-150.002(2)	Advertisements shall be identified by form numbers	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
69O-150.003(8)	The cover letter must state the type of advertisement: Institutional Advertisement.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
69O-150.003(10)	The cover letter must state the type of advertisement: Invitation to Contract.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
69O-150.003(11)(a)	The cover letter must state the type of advertisement: Invitation to Inquire.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
69O-150.003(11)(b)	An invitation to inquire shall not: <ol style="list-style-type: none"> 1. Employ devices that are designed to create undue anxiety; 2. Exaggerate the value of the benefits available under the marketed health benefit plan; 3. State premium cost. If an advertisement which would otherwise be considered an invitation to inquire does state a cost, it shall be considered an invitation to contract pursuant to this rule chapter; or 4. Otherwise violate these rules or the Insurance Code. 	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
69O-150.004	Method of Disclosure of Required Information.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
69O-150.005(1)	Form and Content of Advertisement should not be misleading.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
69O-150.005(2)	Form and Content of Advertisement should not use unfamiliar language.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
69O-150.005(3)	Form and Content of Advertisement must disclose "insurance product".	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
69O-150.005(3)(b)	Form and Content of Advertisement shall include words "Insurance Policy".	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
69O-150.005(5)	No insurer, agent, broker, producer, solicitor or other person shall solicit residents of this State for the purchase of Health Insurance through the use of a true or fictitious name which is deceptive or misleading with regard to the status, character, or proprietary or representative capacity of such person or the true purpose of the advertisement.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
69O-150.006(1)	Advertisement describing benefits payable, losses covered or premiums payable.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
69O-150.006(2)	Invitation to Contract Advertisement: Exceptions, Reductions and Limitations.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
69O-150.006(3)	Invitation to Contract Advertisement: Pre-existing conditions.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
69O-150.007	Invitation to Contract Advertisement: Shall disclose the provisions relating to renewability, cancellability and termination and any modification of benefits, losses covered or premiums.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	



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69O-150.008	Testimonial or Endorsements.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
69O-150.009(3)	Use of Statistics.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
69O-150.010(1)	Identification of Plan or number of Policies.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
69O-150.011	Disparaging Comparisons and Statements.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
69O-150.012	Jurisdictional Licensing and Status of Insurer.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
69O-150.013(1)(a)	Identity of Insurer: Name of actual Insurer.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
69O-150.013(1)(b)	Identity of Insurer: The form number or numbers of the policy advertised shall be stated in any invitation to contract.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
69O-150.013(1)(c)	Identity of Insurer: An advertisement shall not use a trade name, any insurance group designation, name of the parent company of the insurer, name of a particular division of the insurer, name of any reinsurer or any other party, service mark, slogan, symbol or other device which would be misleading as to the true identity of the insurer or create the false impression that the parent company or reinsurer or any other party would have any responsibility for the financial obligation of the insurer.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
69O-150.015(6)	Introductory, Initial or Special Offers.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
69O-150.016(1)	Statements about an Insurer.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
69O-150.016(2)	Statements about an Insurer by any rating system.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	