

TABLES & GRAPHICS

Graphic images included in rules are published separately in this tables and graphics section. Graphic images are arranged in this section in the following order: Title Number, Part Number, Chapter Number and Section Number.

Graphic images are indicated in the text of the emergency, proposed, and adopted rules by the following tag: the word “Figure” followed by the TAC citation, rule number, and the appropriate subsection, paragraph, subparagraph, and so on.

Figure: 16 TAC §25.510(b)(4)

$$PAF = \frac{\sum \left(\frac{RT \text{ Telemetered HSL} \times \text{Available Flag}}{\text{Obligated Capacity}} \right)}{\text{Total Evaluated Period Intervals}} \times 100.$$

Figure: 16 TAC §25.510(b)(5)

$$POF = \left[1 - \frac{\text{Total Evaluated Period Intervals}}{\text{Total Period Intervals}} \right] \times 100.$$

Your rights with a preferred provider benefit plan (PPO)

Notice from the Texas Department of Insurance

Your plan

Your health plan contracts with doctors, facilities, and other health care providers to treat its members at discounted rates. Providers that contract with your health plan are called "preferred providers" (also known as "in-network providers"). Preferred providers make up a plan's network. You can go to any doctor or facility you choose, but your costs will be lower if you use one in the plan's network.

Your plan's network

Your health plan must have enough doctors and facilities within its network to provide every service the plan covers. You shouldn't have to travel too far or wait too long to get care. This is called "network adequacy." If you can't find the care you need, ask your health plan for help. You have the right to receive the care you need under your in-network benefit.

If you don't think the network is adequate, you can file a complaint with the Texas Department of Insurance at www.tdi.texas.gov or by calling 800-252-3439.

Health care costs

You can ask health care providers how much they charge for health care services and procedures. You can also ask your health plan how much of the cost they'll pay.

List of doctors

You can get a directory of health care providers that are in your plan's network.

You can get the directory online at [enter website] or by calling [enter phone number].

If you used your health plan's directory to pick an in-network health care provider and they turn out to be out-of-network, you might not have to pay the extra cost that out-of-network providers charge.

Health care bills

If you want to see a doctor or facility that isn't in your plan's network, you can still do so. You'll probably get a bill and have to pay the amount your health plan doesn't pay.

If you got health care from a doctor that was out-of-network when you were at an in-network facility, and you didn't pick the doctor, you won't have to pay more than your

regular copay, coinsurance, and deductible. Protections also apply if you got emergency care at an out-of-network facility or lab work or imaging in connection with in-network care.

If you get a bill for more than you're expecting, contact your health plan. Learn more about how you're protected from surprise medical bills at www.tdi.texas.gov.

Your rights with an exclusive provider benefit plan (EPO)

Notice from the Texas Department of Insurance

Your plan

Your health plan contracts with doctors, facilities, and other health care providers to treat its members at discounted rates. Providers that contract with your health plan are called "preferred providers" (also known as "in-network providers"). Preferred providers make up a plan's network. Your plan will only pay for health care you get from doctors and facilities in its network.

However, there are some exceptions, including: emergencies, when you didn't pick the doctor, and for ambulance services.

Your plan's network

Your health plan must have enough doctors and facilities within its network to provide every service the plan covers. You shouldn't have to travel too far or wait too long to get care. This is called "network adequacy." If you can't find the care you need, ask your health plan for help. You have the right to receive the care you need under your in-network benefit.

If you don't think the network is adequate, you can file a complaint with the Texas Department of Insurance at www.tdi.texas.gov or by calling 800-252-3439.

List of doctors

You can get a directory of health care providers that are in your plan's network.

You can get the directory online at [enter website] or by calling [enter phone number].

If you used your health plan's directory to pick an in-network health care provider and they turn out to be out-of-network, you might not have to pay the extra cost that out-of-network providers charge.

Bills for health care

If you got health care from a doctor that was out-of-network when you were at an in-network facility, and you didn't pick the doctor, you won't have to pay more than your regular copay, coinsurance, and deductible. Protections also apply if you got emergency care at an out-of-network facility or lab work or imaging in connection with in-network care.

If you get a bill for more than you're expecting, contact your health plan. Learn more about how you're protected from surprise medical bills at www.tdi.texas.gov.

Call us now! Help us with this claim or we can't renew your policy!

Notice of Mandatory Nonrenewal and Opportunity to Cooperate

We can't renew your policy unless you help us with this claim. If you don't help us, you won't have coverage after [DATE policy term ends or the end of optional extended term].

You still have time to cooperate and work with us on the claim [OR action] described below. If you cooperate before [DATE policy term ends or the end of optional extended term], we won't nonrenew your policy for this reason.

What we need from you:

Call us **now** at [insurer contact information].

[Insurer should explain specifically what the insured or named insured should do or provide now.]

What happened:

[Insurer should:

- identify the insured who failed or refused to cooperate;
- explain how that person failed or refused to cooperate; and
- if the insurer has been unable to contact the insured, describe the insurer's contact attempts.]

Claim [or Action] information:

Claim number {or other identifying number}: [_____]

Action number: {if applicable} [_____]

Date of loss: [_____]

Location or address where damage or loss took place: [_____]

Warning: This is the **only** notice we will send for this reason.

- If you continue to fail or refuse to cooperate, your policy ends on the date above.
- If we later decide you are cooperating, we might send you a renewal offer.
- Even if you do cooperate, we might nonrenew you for other reasons allowed by law.

¡Llámenos ahora! ¡Ayúdenos con esta reclamación o no podremos renovar su póliza!

Notificación de No Renovación Obligatoria y Oportunidad para Cooperar

No podemos renovar su póliza a menos que usted nos ayude con esta reclamación. Si no nos ayuda, no tendrá cobertura después del [DATE policy term ends or the end of extended term].

Usted todavía tiene tiempo para cooperar y colaborar con nosotros en la reclamación [OR action] que se describe a continuación. Si usted coopera antes del [DATE policy term ends or the end of extended term], no cancelaremos la renovación de su póliza por este motivo.

Lo que necesitamos de usted:

Llámenos **ahora** al [phone number].

[Insurer should explain specifically what the insured or named insured should do or provide.]

Lo que sucedió:

[Insurer should:

- identify the insured who failed or refused to cooperate;
- explain how that person failed or refused to cooperate; and
- if the insurer has been unable to contact the insured, describe the insurer's contact attempts.]

Información sobre la reclamación [o Acción]:

Número de reclamación {or other identifying number}: [_____]

Número de acción: {if applicable} [_____]

Fecha de la pérdida: [_____]

Lugar o dirección en donde ocurrió el daño o la pérdida: [_____]

Advertencia: Esta es la **única** notificación que enviaremos por este motivo.

- Si usted continúa sin responder o si se niega a cooperar, su póliza termina en la fecha que se muestra en la parte de arriba.
- Si después nosotros decidimos que usted está cooperando, es posible que le enviemos una oferta de renovación.

Notificación de No Renovación Obligatoria y Oportunidad para Cooperar

- Incluso si usted coopera, es posible que no renovemos su póliza por otras razones permitidas por la ley.

Notificación de No Renovación Obligatoria y Oportunidad para Cooperar

Call us now! Help us with this claim or we can't renew your policy!

Notice of Mandatory Nonrenewal and Opportunity to Cooperate

We can't renew your policy unless you help us with this claim. If you don't help us, you won't have coverage after [DATE policy term ends or the end of optional extended term].

¡Llámenos ahora al [phone number]! No podemos renovar su póliza a menos que usted nos ayude con esta reclamación. Si no nos ayuda, no tendrá cobertura después del [DATE policy term ends or the end of extended term].

You still have time to cooperate and work with us on the claim [OR action] described below. If you cooperate before [DATE policy term ends or the end of optional extended term], we won't nonrenew your policy for this reason.

What we need from you:

Call us **now** at [insurer contact information].

[Insurer should explain specifically what the insured or named insured should do or provide now.]

What happened:

[Insurer should:

- identify the insured who failed or refused to cooperate;
- explain how that person failed or refused to cooperate; and
- if the insurer has been unable to contact the insured, describe the insurer's contact attempts.]

Claim [or Action] information:

Claim number {or other identifying number}: [_____]

Action number: {if applicable} [_____]

Date of loss: [_____]

Location or address where damage or loss took place: [_____]

Warning: This is the **only** notice we will send for this reason.

- If you continue to fail or refuse to cooperate, your policy ends on the date above.
- If we later decide you are cooperating, we might send you a renewal offer.

Notice of Mandatory Nonrenewal and Opportunity to Cooperate

- Even if you do cooperate, we might nonrenew you for other reasons allowed by law.

Notice of Mandatory Nonrenewal and Opportunity to Cooperate