



Indiana Department of Insurance

**Company Compliance  
Webinar**

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# Rate Filing Information

- **SERFF Communication** – Carriers must communicate via SERFF
- **Filing Decision – Withdrawn, Rejected, Disapproved** –
  - Unless file approved, do not implement a rate increase as related to manual rates
  - Unless file approved, do not implement a rate increase as related to trend beyond the implementation date
- **TOI/Sub-TOI** – File proper TOI and Sub-TOI for rate request
- **Filing Review** – Submit rate filings for individual and group (small/large) filings including associations for review as directed in the filing instructions
  - <http://www.in.gov/idoi/2595.htm>

# Rate Filing Information cont.

- **Overall % Indicated Change** – Submit as increase needed to achieve the target loss ratio
- **Date Submitted vs. Implementation Date Requested** – Provide adequate time for proper review of product
- **Small Group Actuarial Certification** – Due March 1 *and*
- **Medicare Supplement Refund Calculation Form** – Due May 31
  - Electronic Submission Permitted
  - Reference certification or form in email subject line
  - Send to Karl Knable [kknable@idoi.in.gov](mailto:kknable@idoi.in.gov)

# Rate Review Detail Data (R2D2)

- **HHS Issuer ID**: Must complete; ID issued from HIOS registration
- **Trend Factors**: Must complete; Provide explanation if trend does not apply
- **Requested Rate Change Information**:
  - **Member Months**: If based on other than 1 year of experience, indicate in cover letter.
    - Value should relate to **Number of Covered Lives**
  - **Percent Rate Change Requested**: Must complete the **Min:** **Max:** & **Weighted Avg.** data fields

# Rate Review Detail Data (R2D2) cont.

- **Prior Rate:** Leave Blank for New Products
  - **Total Earned Premium and Total Incurred Claims:** Enter Indiana State Data, Not Nationwide Data; Must provide value for Existing Product rate request
  
- **Requested Rate:** Must Complete for New Products
  - **Projected Earned Premium and Projected Incurred Claims:** Must provide value for New or Existing Product rate request
  - New Form Filings enter value based on projected distribution
    - **Annual PMPM \$:** Both Sections report **Min: Max: & Weighted Avg.** data as monthly

***Accurate reporting will avoid filing errors as related to submitting rate requests and for federal reporting***

# Health Insurance Oversight System(HIOS) & Rate Summary Worksheet

## ■ HIOS Reporting Criteria:

- Filing is **rate increase** request *and*

- Overall % Rate Impact:  $\geq 10\%$

*or*

- Weighted average over last 12 months  $\geq 10\%$

## ■ Rate Summary Worksheet

- Must register with HIOS to access

- Carrier instructions to meet federal reporting requirements:

**Rate Review Instructions Manual:**

[http://cciio.cms.gov/resources/files/issue\\_manual\\_updated\\_091411.pdf](http://cciio.cms.gov/resources/files/issue_manual_updated_091411.pdf)

# HIOS & Rate Summary Worksheet cont.

- HIOS & Rate Summary Worksheet Reporting Guidelines:
  - Must submit rate file to SERFF **same day** as HIOS
  - Include SERFF Tracking # in HIOS (Filing Tracking #)
  - Changes to filing information on HIOS, such as Rate Summary Worksheet, must also be updated in SERFF
  - **Product(s)** listed in HIOS must match SERFF **Product Names** including **Market Type**
    - Rate increases submitted to HIOS must match SERFF filing:  
If carrier requesting two different rate increases for different products, then an additional rate filing needs to be submitted to SERFF.

# HIOS & Rate Summary Worksheet cont.

- **Rate Summary Worksheet- Part E. List of Annual Average Rate Changes Requested and Implemented in the past Three Calendar Years-** Include SERFF Tracking # in Actuarial Memorandum

***Per Indiana SERFF instructions ALL filings must complete***

## ***Rate Summary Worksheet***

- **HIOS & MLR Annual Reporting Form** –

- MLR Data- Due June 1
- Training Information – Available to May 22 –  
[https://insuranceoversight.hhs.gov/HIOS/Document/CCIIO\\_MLR\\_Training\\_Memo.pdf](https://insuranceoversight.hhs.gov/HIOS/Document/CCIIO_MLR_Training_Memo.pdf)
- Conference Call Information – Available to May 22 –  
[https://insuranceoversight.hhs.gov/HIOS/Document/CCIIO\\_MLR\\_Reporting\\_Form\\_Call\\_Announcement\\_Memo.pdf](https://insuranceoversight.hhs.gov/HIOS/Document/CCIIO_MLR_Reporting_Form_Call_Announcement_Memo.pdf)



# Company Compliance Misc. Information

- **Summary of Benefits and Coverage Regulations and the Uniform Glossary** – HHS released final rule February 14, 2012
  - Effective for plan years beginning on or after September 23, 2012
  - Other Information/Regulation:  
<http://cciio.cms.gov/programs/consumer/summaryandglossary/>
  - Individual versions of the templates and instructions:  
<http://cciio.cms.gov/resources/other/index.html#sbcug>
- **Preventive Services Covered** – In plan years on or after August 1, 2012, some preventive services must be covered with no cost-sharing
  - <http://www.healthcare.gov/news/factsheets/2010/07/preventive-services-list.html>

# Company Compliance Misc. Information cont.

- **Grievance File Report** – Due March 1
  - Grievance filing contact is Cindy Donovan, [cdonovan@idoi.in.gov](mailto:cdonovan@idoi.in.gov) ; (317) 232-2408
  - For other info on grievance procedures/IRO certification contact Rebecca Vaughan, [rvaughan@idoi.in.gov](mailto:rvaughan@idoi.in.gov) ; (317) 232-2187

# IDOI Company Compliance Contacts

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