Pet Insurance

Schedule 1: Interrogatories

1	Did the company conduct any business related to individual pet insurance policies during the period? (Y/N)			
2	Did the company conduct any business related to group pet insurance policies during the period? (Y/N)			
3	On which annual statement line(s) of business on the state page of the statutory annual statement does the company report pet insurance experience? (participants will find out how hard this would be to report) [Does the company report pet insurance experience in the financial annual statement on a line other than inland marine?]			
4	Was the company still actively marketing or writing pet insurance in the jurisdiction at year end? (Y/N)			
5	Has the company had a significant event/business strategy change that would affect data for this reporting period? (Y/N)			
6	If yes, add additional comments.			
7	Has all or part of the company's pet insurance block of business been sold, closed or moved to another company during the reporting period? (Y/N)			
8	If yes, add additional comments.			
9	How does the company treat subsequent supplemental or additional payments on previously closed claims? (more feedback coming)			
10	What triggers a pre-existing exclusion review (e.g. dollar, diagnosis, prescription, other)? (more feedback coming) (need to know intent of question. It may not be needed. It seems all claims are questioned for pre-existing exclusions when reviewed. Wellness only claims are not reviewed for pre-existing exclusions)			
11	Does the company use third party administrators (TPAs) for purposes of supporting the pet insurance business being reported? (Y/N) (need TPA definition and more feedback coming)			
12	If yes, provide the names, respective NPN (if required by the jurisdiction) and functions for each TPA.			
13	Does the company use managing general agents (MGAs) for the purposes of supporting the pet insurance business being reported? (Y/N) (need to define MGA)			
14	If yes, provide the names, respective NPN (if required by the jurisdiction) and functions allowed for each MGA. (more feedback coming)			
15	Does the company have a system of supervision in place/audit third parties to whom responsibilities have been delegated? (Y/N) (More discussion needed)			
16	If yes, please provide frequency of audits.			
17	Does the company require third parties it contracts with to forward insurance-related complaints to the company so the company may report the complaints in its complaint logs? (need to clarify third party definition.)			
18	If yes, does the company monitor the third parties to ensure insurance complaints are forwarded to the company? (also clarify third party definition here)			
19	Additional comments if desired: (clarify)			
20	Does the company or any of its MGAs offer a non-insurance wellness program to the consumers of the company's pet insurance products? (Y/N)			
24				
21	Add consumer requested independent review questions.			

Revisions to Missouri suggestions resulting from 1/24/2022 SME Group Meeting

23	Additional state specific Claims Activity comments (optional)	
24	Additional state specific Marketing & Sales comments (optional)	
25	Additional state specific Lawsuit and Complaint comments (optional)	

Schedule 2: Underwriting Activity

		Individual	Group
26	Number of policies in force at the beginning of the period		
27	Number of certificates in force at the beginning of the period		
28	Number of covered pets on policies/certificates in force at the		
	beginning of the period		
29	Number of policies in force that included accident-only coverage		
30	Number of certificates in force that included accident-only		
	coverage		
31	Number of policies in force that included illness-only coverage		
32	Number of certificates in force that included illness-only coverage		
33	Number of policies in force that included accident and illness		
	coverage		
34	Number of certificates in force that included accident and illness		
	coverage		
35	Number of policies in force that included wellness coverages		
36	Number of certificates in force that included wellness coverages		
37	Number of policies in force that covered wellness as an insurance		
	benefit (and did not cover accident and/or illness)		
38	Number of certificates in force that covered wellness as an		
	insurance benefit (and did not cover accident and/or illness)		
39	Number of policies returned under the consumer's "Right to		
	Examine and Return the Policy" during the period		
40	Number of certificates returned under the consumer's "Right to		
	Examine and Return the Policy" during the period		
41	Number of covered pets impacted due to the return of the		
	policy/certificate under the consumer's "Right to Examine and		
	Return the Policy" during the period		
42	Number of policies cancelled/terminated at the policyholders		
42	request during the period		
43	Number of certificates cancelled/terminated at the certificate		
11	holders request during the period		
44	Number of covered pets impacted by cancellations/terminations initiated by the policyholder/certificate holder during the period		
45	Number of policies cancelled/terminated by the insurer during		
43	the period		
46	Number of certificates cancelled/terminated by the insurer		
40	during the period		
47	Number of covered pets impacted due to		
	cancellations/terminations initiated by the insurer during the		
	period.		

		Individual	Group
48	Number of policies cancelled/terminated for non-pay or non-		
	sufficient funds		
49	Number of certificates cancelled/terminated for non-pay or non- sufficient funds		
50	Number of covered pets impacted on cancellations/terminations		
	due to non-pay or non-sufficient funds during the period		
51	Number of company-initiated policy non-renewals during the period		
52	Number of company-initiated certificate non-renewals during the period		
53	Number of covered pets impacted by company initiated non- renewals during the period		
54	Number of policies expired during the period		
55	Number of certificates expired during the period		
56	Number of covered pets impacted due to policy expirations during the period		
57	Number of new policies issued during the period		
58	Number of new certificates issued during the period		
59	Number of covered pets on new policies/certificates issued during the period		
60	Number of policies in force at end of the period		
61	Number of certificates in force at the end of the period		
62	Number of covered pets in force at the end of the period		
63	Number of renewal policies issued during the period		
64	Number of renewal certificates issued during the period		
65	Dollar amount of direct premium written during the period		
66	Dollar amount of direct premium earned during the period		
67	Number of applications pending at beginning of the period		
68	Number of new applications received during the period		
69	Number of renewal applications received during the period		
70	Number of new applications denied for health status or condition		
	during the period		
71	Number of new applications denied for any other reason during the period		
72	Number of renewal applications denied for health status or condition during the period		
73	Number of renewal applications denied for any other reason during the period		
74	Number of new applications approved during the period		
75	Number of renewal applications approved during the period		
76	Number of applications pending at the end of the period		

Schedule 3: Claims Activity

	(During the 03/07/23 Call, discussed limiting the columns to Wellness, Accident, and Accident & Illness, removing Illness	Wellness	Accident	Illness	Accident & Illness
	(only)				
77	Dollar amount of claims paid during the reporting period				
78	Number of claims open at the beginning of the period				
79	Number of claims opened during the period				
80	Number of claims closed during the period, with payment				
81	Number of claims closed during the period, without payment				
82	Number of claims open at the end of the period				
83	Median days to final payment				
84	Median days to claims closure when claim closed without payment				
85	Number of claims closed with payment within 0-30 days				
86	Number of claims closed with payment within 31-60 days				
87	Number of claims closed with payment within 61-90 days				
88	Number of claims closed with payment within 91-180 days				
89	Number of claims closed with payment within 181-365 days				
90	Number of claims closed with payment beyond 365 days				
91	Number of claims closed without payment within 0-30 days				
92	Number of claims closed without payment within 31-60 days				
93	Number of claims closed without payment within 61-90 days				
94	Number of claims closed without payment within 91-180 days				
95	Number of claims closed without payment within 181-365 days				
96	Number of claims closed without payment beyond 365 days				
97	Number of claims denied for a preexisting condition				
98	Number of claims denied for a hereditary disorder				
99	Number of claims denied for a congenital anomaly or disorder				
100	Number of claims denied for a chronic condition				
101	Number of claims denied for waiting periods				
102	Number of claims denied for reasons other than listed in lines 87 thru 91				
103	Number of claims denied for the maximum benefit limit exceeded				
104	Number of claims denied for services provided being under the deductible				
105	Number of claims denied for failure to provide adequate documentation				

Schedule 4: Marketing and Sales

		Individual	Group
106	Number of applications pending at beginning of the period		
107	Number of new applications received during the period		
108	Number of renewal applications received during the period		
109	Number of new applications denied for health status or condition during the period		
110	Number of new applications denied for any other reason during the period		
111	Number of renewal applications denied for health status or condition during the period		
112	Number of renewal applications denied for any other reason during the period		
113	Number of new applications approved during the period		
114	Number of renewal applications approved during the period		
115	Number of applications pending at the end of the period		
116	Dollar amount of commissions incurred during the period		
117	Unearned commissions returned to the company during the period		

Schedule 5: Lawsuit and Complaint Activity

		Individual	Group
118	Number of complaints received directly from any		
	person or entity other than the DOI		
119	Number of lawsuits open at the beginning of the		
	period		
120	Number of lawsuits opened during the period		
121	Number of lawsuits closed during the period		
122	Number of lawsuits open at the end of the period		
123	Number of lawsuits closed with consideration for		
	the consumer		

Definitions:

Claims Closed with and without payment Complaint Managing General Agent Third Party Administrator

Revisions to Missouri suggestions resulting from 1/24/2022 SME Group Meeting

Lawsuits Closed with consideration for the consumer

Wellness Program

Independent Review

Policy vs Certificate (Group/Individual)

Covered Pet

Renewal

Non-Renewal

Median

Cancellations

Commissions (STLD Data Call and Def)

Pre-existing condition

Chronic condition

Waiting Period

NPN

Definitions from Model

NAIC Financial Annual Statement

Block of Business

Supplemental Payments

Audit

Right to Examine and return the policy

Complaint Log