

Draft STLDI Data Call and Definitions

| v5 line | Y/N | Comments |
|---|-----|----------|
| 1 List the states where your STLDI products are marketed | | |
| 2 Does the company offer STLDI policies with up to a 90-day duration? | | |
| 3 Does the company offer STLDI policies with 91- to 180-day duration? | | |
| 4 Does the company offer STLDI policies with 181- to 364-day duration? | | |
| 5 Number of individual STLDI products filed ?? In this state ?? (or are we looking for the total number?) | | |
| 6 Does the company issue STLDI products through associations? If yes, how many? | | |
| 7 If yes, is insurer collecting any fees on behalf of association? (Y/N) | | |
| 8 Does the company issue STLDI products through trusts? If yes, how many? | | |
| 9 Does the company issue STLDI products through administrators? If yes, how many? | | |
| 10 Does the company contract with third-party administrators for administrative services related to STLDI products? | | |
| List the states where your STLDI products are filed (provide SERFF tracking number) | | |
| Does the company offer renewals/reissues? | | |
| Does your company distribute its product through independent agents? | | |
| Does your company distribute its products through captive agents? | | |
| Does your company distribute its products through employees? | | |

Are producers employees or contracted directly with the insurer? (Interrogatory?)

Policy/Certificate Administration

| Individual Policies not sold through an Association | | | Number of Policies/Certificates Issued to individuals in this state through an Association | | | Number of Policies/Certificates Issued to individuals in this state through an Out-of-State Association | | |
|---|-----------|------------|--|-----------|------------|---|-----------|------------|
| <= 90 days | 91 to 180 | 181 to 364 | <= 90 days | 91 to 180 | 181 to 364 | <= 90 days | 91 to 180 | 181 to 364 |
| | | | | | | | | |

Are the numbers of associations in I, J, and K, a subset of F, G, and H? Or do we want those to be tallied separately?

| | |
|---|---|
| 11 Net Written Premium | |
| 12 Earned premiums for Reporting Year | |
| 13 Number of Policies/Certificates in Force at the Beginning of the Period | |
| 14 Number of Covered Lives on Policies/Certificates In Force at the Beginning of the Period | |
| 15 Number of new policies/certificates issued during the period | Rating and Benefit Designs |
| 16 Number of Covered Lives on New Policies/Certificates Issued During the Period | |
| Number of policy/certificate renewal/reissue applications received during the period | |
| 17 Number of policies/certificates renewed/reissued during the period | Renewals vs. Denials. Consumer rep comments suggest "denied" is more important than # renewals allowed. Should we capture one over the other? Split into two lines? |
| Number of policies/certificates non-renewed at the option of insurer during the period | |
| 18 Number of Covered Lives on Renewed/Reissued Policies/Certificates During the Period | a. MO suggestion: Are number of renewals limited? |
| 19 Number of renewals/reissues allowed? | b. How is renewal defined in each state? (MO comment, 6/12) |
| 20 Member months for policies/certificates newly issued during the period | |
| 21 Member months for policies/certificates renewed/reissued during the period | |
| Member months for policies/certificates renewed/reissued which had an option to renew/reissue without underwriting | |
| 22 Number of Member Months of on Other Than New Policies/Certificates or Renewal/Reissued Policies/Certificates During the Period | |
| 23 Number of policy/certificate terminations and cancellations initiated by the policyholder/certificateholder | |
| 24 Number of Covered Lives on Policies/Certificates Cancelled at the Initiation of the policyholder/certificateholder During the Period | do we need to make the policy/covered lives distinction? |
| 25 Number of policies/certificates cancelled during the free look period | |
| 26 Number of Policies/Certificates Cancelled at the Initiation of the policyholder/certificateholder During the Free Look Period During the Period | |
| 27 Number of Covered Lives on Policies/Certificates Cancelled at the Initiation of the policyholder/certificateholder During the Free Look Period During the Period | |
| 28 Number of policy/certificate terminations and cancellations due to non-payment of premium | |
| 29 Number of Lives on Policies/Certificates Cancelled Due to Non-Payment of Premium During the Period | |
| 30 Number of Policies/Certificates Cancelled by Insurer for Any Reason Other Than Non-Payment of Premium During the Period | |
| 31 Number of Lives on Policies/Certificates cancelled by Insurer Due to Non-Payment of Premium During the Period | how is this different from 28? |
| 32 Number of Policies/Certificates Cancelled by Insurer Following Filing of a Claim or Prior Authorization Request by the policyholder/certificateholder During the Period | |
| 33 Number of Lives on Policies/Certificates Cancelled by Insurer Following Filing of a Claim or Prior Authorization Request by the policyholder/certificateholder During the Period | |
| 34 Number of rescissions | |
| 35 Number of insured lives impacted on terminations and cancellations initiated by the policyholder/certificateholder | How is this different from above? |
| 36 Number of insured lives impacted on terminations and cancellations due to nonpayment | |
| 37 Number of insured lives impacted by rescissions | |
| 38 Number of Policies/Certificates in Force at the End of the Period | |
| 39 Number of Covered Lives on Policies/Certificates in Force at the End of the Period | |

Prior Authorization

| | |
|--|--|
| 40 Number of Prior Authorization Requests Pending at the Beginning of the Period | |
| 41 Number of prior authorizations requested during period | |
| 42 Number of prior authorizations approved during period | |
| 43 Number of prior authorizations denied during period | |
| 44 Number of Prior Authorization Requests Pending at the End of the Period | |
| 45 Median Number of Days from Receipt of Prior Authorization Request to Decision | |
| 46 Average Number of Days from Receipt of Prior Authorization to Decision | |

Does Prior auth matter??

Perhaps streamline and include in Claims Admin section

Claims Administration

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| 47 | Number of Claims Pending at the Beginning of the Period | |
| 48 | Number of claims received (how are we defining "received"? Date of service? Receipt of claim?) | |
| 49 | Total number of claims denied (includes rejected and returned?) | |
| 50 | Number of denied, rejected, or returned due to claims submission coding error(s) | |
| 51 | Number of denied, rejected, or returned for lack of Prior Authorization | |
| 52 | Number of denied, rejected, or returned as Non-Covered or beyond benefit limitation | |
| 53 | Number of denied, rejected, or returned as Not medically necessary | |
| 54 | Number of denied, rejected, or returned as Subject to pre-existing condition exclusion | Pre-existing condition applications |
| 55 | Number of denied, rejected, or returned (in whole or in part) because maximum \$ limit exceeded | a. What are the triggers or flags for pre-ex review? |
| 56 | Number of denied, rejected, or returned for Out-of-Network provider During the Period | |
| 57 | Number of Claims Pending at End of Period | |
| 58 | Median Number of Days from Receipt of Claim to Decision for Denied Claims | |
| 59 | Average Number of Days from Receipt of Claim to Decision for Denied Claims | |
| 60 | Median Number of Days from Receipt of Claim to Decision for Approved Claims | |
| 61 | Average Number of Days from Receipt of Claim to Decision for Approved Claims | |
| 62 | Number of Claim Decisions Appeals Pending At Beginning of Period | |
| 63 | Number of Claim Decision Appeals Received During the Period | |
| 64 | Number of Claim Decision Appeals Resulting in Decisions Upheld During the Period | |
| 65 | Number of Claim Decision Appeals Resulting in Decisions Overturned or Modified During the Period | |
| 66 | Number of Claim Decision Appeals Rejected and Not Considered for Any Reason | |
| 67 | Number of Claim Decision Appeals Pending at End of Period | |
| 68 | Average Number of Days from Receipt of Appeal to Decision | |
| 69 | Number of claims paid | |
| 70 | Insured/benefit co-payment responsibility | I don't think these |
| 71 | Insured coinsurance liability | meet the surveillance |
| 72 | Insured deductible responsibility | standards for MCAS |

Consumer Requested Reviews/Grievances/Complaints

| | | |
|----|---|--|
| 73 | Number of complaints received by Company (other than through the DOI) | |
| 74 | Number of complaints received through DOI | |
| 75 | Number of complaints resulting in claims reprocessing | |
| 76 | Number of Lawsuits Open at Beginning of the Period | |
| 77 | Number of Lawsuits Opened During the Period | |
| 78 | Number of Lawsuits Closed During the Period | |
| 79 | Number of Lawsuits Closed During the Period with Consideration for the Consumer | |
| 80 | Number of Lawsuits Open at End of Period | |

Marketing and Sales

| | | |
|-----|--|---|
| 81 | Number of Individual Applications Pending at the Beginning of the Period | |
| 82 | Number of applications received | 4. Relationships between Insurer and TPAs - OVERSIGHT |
| 83 | Number of Renewal/Reissue Individual Applications Received During the Period | a. Collect premiums? |
| 84 | Number of New Individual Applications Denied During the Period for Any Reason | b. Producer/distributor? |
| 85 | Number of New Individual Applications Denied During the Period - Health Status or Condition | c. Benefit design? |
| 86 | Number of Renewal/Reissue Individual Applications Denied During the Period for Any Reason | |
| 87 | Number of Renewal/Reissue Individual Applications Denied During the Period - Health Status or Condition | |
| 88 | Number of New Individual Applications Approved During the Period | |
| 89 | Number of Renewal/Reissue Individual Applications Approved During the Period | |
| 90 | Number of Individual Applications Pending at the End of the Period | |
| 91 | Number of applications initiated via phone | |
| 92 | Number of applications completed via phone | |
| 93 | Number of applications initiated face-to-face | |
| 94 | Number of applications completed face-to-face | |
| 95 | Number of applications initiated online (Electronically) | |
| 96 | Number of applications completed online (Electronically) | |
| 97 | Number of New Individual Applications initiated by Mail During the Period | |
| 98 | Number of New Individual Applications completed by Mail During the Period | |
| 99 | Number of New Individual Applications initiated by Any Other Method During the Period | |
| 100 | Number of New Individual Applications completed by Any Other Method During the Period | |
| 101 | Commissions paid during reporting period (Dollar Amount of Commissions Incurred During the Period) | |
| 102 | Unearned Commissions returned (?) on policies/certificates sold during the period? | |
| 103 | Other fees collected during the period (Dollar Amount of Fees Charged to Applicants and Policyholders During the Period) | Fees a. Type (application, annual)? b. Who collects? (i.e., insurer on behalf of association) c. Refundability |

| Term | Explanation |
|--------------------------------|--|
| Individual STLDI product | Policies marketed, sold, and issued to individual consumers, regardless of whether or not the policy forms have been filed with any State's department of insurance. |
| Group STLDI product/coverage | Policies issued to a trust, association, or administrator for the purpose of marketing, selling, and issuing certificates to individual consumers, regardless of whether or not the policy forms have been filed with any State's department of insurance and regardless of where the association, trust, or administrator is situated |
| Renewal/Reissue | STLDI policy/certificate issued to an individual or family for whom prior short-term coverage has been placed with the same insurer within the past 63 days |
| Newly Issued | STLDI policy/certificate issued to an individual or family for whom no prior short-term coverage has been placed with the same insurer within the past 63 days |
| Claims received | provide the total number of claims received during the reporting period for individual policyholders and/or group certificate holders residing in the state for which reporting is being completed |
| Claims Paid | provide the total number of claims paid during the reporting period for individual policyholders and/or group certificate holders residing in the state for which reporting is being completed |
| Claims denied | provide the total number of claims denied during the reporting period for individual policyholders and/or group certificate holders residing in the state for which reporting is being completed; includes rejected and returned claims, whether in whole or in part |
| Commissions | Provide the total amount of commissions paid for policies and/or certificates issued to insured residing in the state for which reporting is being completed |
| Other Fees | Provide the total amount of other fees (non-commissions, association dues) paid for all policies and/or certificates issued to insureds residing in the state for which reporting is being completed |
| Total Annual Premium | Provide the total annual written premium for all policies and/or certificates issued to insureds residing in the state for which reporting is being completed |
| Policies/Certificates | Refers to the coverage documents provided to individuals or families (i.e., state residents) who are enrolled in coverage (not the association) |
| Policyholder/Certificateholder | Refers to the individual who is afforded benefits of the coverage according to the laws of the state in which they reside (i.e., not the association) Do we need to clarify that data should only be about the state being reported? |

Definition of STLDI and Renewal. Consumer Reps suggest definitions that track those used in both the Data Call and the SERFF Product Filing Coding Matrix.

Refer to Group Health Insurance Standards Model Act (#100) - section 4E and 5

What if company is re-underwriting at "renewal" and essentially issuing a new product to the same individual

break into net and earned premium