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## **Disability Income**

Ratio 1.

Percentage of claims denied

[Number of claims denials during reporting period (21)]
[Number of claims denials during reporting period (21)]
+ [Number of paid claims closed during reporting period (22)]

#### Ratio 2.

Percentage of claims processed with initial decision after 45 days Short-Term Only

[Number of claims processed with initial claim decision over 45 days (28)]

[Number of claims processed with initial claim decision within 1-14 days (25)]

+[Number of claims processed with initial claim decision within 15-30 days (26)]

+[Number of claims processed with initial claim decision within 31-45 days (27)]

+[Number of claims processed with initial claim decision over 45 days (28)]

# Ratio 3. Percentage of claims processed with initial decision after 90 days Long-Term Only

[Number of claims processed with initial claim decision over 90 days (33)]

[Number of claims processed with initial claim decision within 1-30 days (30)]

+[Number of claims processed with initial claim decision within 31-60 days (31)]

+[Number of claims processed with initial claim decision within 61-90 days (32)]

+[Number of claims processed with initial claim decision over 90 days (33)]

#### Ratio 4.

The number of complaints received directly from any entity other than the DOI per 1,000 individual policies in force during the reporting period

 $\left(\frac{\text{[Number of complaints received directly from any entity other than the DOI (83)]}}{\left(\frac{\text{[Number of policies beginning of the reporting period (67)]}}{+[\text{Number of policies at the end of the reporting period (75])}} \div 1000}\right)$ 

#### Ratio 5.

The number of complaints received directly from any entity other than the DOI per 1,000 lives covered on group policies

 $\left( \frac{[\text{Number of complaints received directly from any entity other than the DOI (83)]}{([\text{Number of lives covered at the beginning of the reporting period (76)]} + [\text{Number of lives covered at the end of the reporting period (82)]}) \div 1000} \right)$ 

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## **Disability Income Continued**

Ratio 6.

The number of complaints relating to group policies to average number of group policies in force during the reporting period

```
 \frac{ [\text{Number of complaints received directly from any entity other than the DOI (83)]}{ ([\text{Number of policies in force at beginning of reporting period (67)]} + [\text{Number of policies in force at end of the reporting period (75)]} + 2
```

## Ratio 7.

The percentage of lawsuits closed with consideration for the consumer

```
(\frac{[\text{Number of lawsuits closed with consideration for consumer (87)}]}{[\text{Total number of lawsuits closed during the period (86)}]})
```

#### Ratio 8.

Insurer non-renewals and cancellations to average policies in force

#### Ratio 9.

Covered lives affected by insurer non-renewals and cancellations to average policies in force Group only

#### Ratio 10.

Average pending benefit determinations to claims received

```
 \left( \begin{array}{c} \text{([Number of pending benefit determinations, beginning of reporting period (17)]} \\ + \text{[Number of pending benefit determinations,end of reporting period (23)])} \\ \div 2 \\ \hline \text{[Number of claims received during the reporting period (19)]} \end{array} \right)
```

## Ratio 11.

Rescissions after two years from issuance to total rescissions

[Number of rescissions after two years from policy issue (74)]
[Number of rescissions within two years from policy issue (73)]
+[Number of rescissions after two years from policy issue (74)]

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## Health

Both In-Exchange and Out-of-Exchange Markets

#### Ratio 1.

The number of claim denials to the total number of claims received (Excluding Pharmacy)

 $\left(\frac{[\# \text{ of claim denials for in-network claims+ } \# \text{ of claim denials for out-of-network claims]}}{[\# \text{ of claims received}]}\right)$ 

#### Ratio 2.

Percentage of in-network claims (Excluding Pharmacy)

(# of claims submitted by network providers]

[# of claims received ]

## Ratio 3.

Percentage of out-of-network claims (Excluding Pharmacy)

 $\left(\frac{[\# \text{ of claims submitted by out-of-network providers}]}{[\# \text{ of claims received }]}\right)$ 

Note: Ratios 2 and 3 are not calculable for Pharmacy.

#### Ratio 4.

Percentage of in-network claims paid within 30 days (Excluding Pharmacy)

(# of claims paid within 0 to 30 days for in-network services]

[# of paid claims for in-network services ]

#### Ratio 5.

Percentage of in-network claims denied within 30 days (Excluding Pharmacy)

 $\left(\frac{\text{[\# of claims denied within 0 to 30 days for in-network services]}}{\text{[\# of claim denials for in-network claims]}}\right)$ 

## Ratio 6.

Percentage of out-of-network claims paid within 30 days (Excluding Pharmacy)

 $\left(\frac{\text{[\# of claims paid within 0 to 30 days for out-of-network services]}}{\text{[\# of claims paid for out-of-network services]}}\right)$ 

## Ratio 7.

Percentage of out-of-network claims denied within 30 days (Excluding Pharmacy)

(# of claims denied within 0 to 30 days for out-of-network services]

[# of claims denied for out-of-network services]

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## **Health Continued**

Ratio 8.

Percentage of claims paid (Pharmacy Only)

 $\left(\frac{[\# \text{ of claims paid for in-network services} + \# \text{ of claims paid for out-of-network services}]}{[\# \text{ of claims received}]}\right)$ 

## Ratio 9.

Insured co payment responsibility to covered lives (Excluding Pharmacy)

 $\left(\frac{\text{[insured co payment responsibility]}}{\text{[(member months for policies issued+member months for policies renewed)/12]}}\right)$ 

## Ratio 10.

Insured coinsurance responsibility to covered lives (Excluding Pharmacy)

 $\left(\frac{\text{[coinsurance responsibility]}}{\text{[(member months for policies issued+member months for policies renewed)/12]}}\right)$ 

## Ratio 11.

Insured deductible responsibility to covered lives (Excluding Pharmacy)

 $\left(\frac{\text{[deductible responsibility]}}{\text{[(member months for policies issued+member months for policies renewed)/12]}}\right)$ 

#### Ratio 12.

Cost sharing responsibility to covered lives (Pharmacy Only)

 $\left(\frac{\text{[insured co payment responsibility+coinsurance responsibility+deductible responsibility]}}{\text{[(member months for policies issued+member months for policies renewed)/12]}}\right)$ 

## Ratio 13.

Adverse determination grievances per 1,000 member months

 $\left(\frac{\text{[\# of customer requests for internal reviews of grievances involving adverse determinations]}}{\text{[(member months for policies issued+member months for policies renewed)/1000]}}\right)$ 

## Ratio 14.

Adverse determinations overturned to total grievances involving adverse determinations

 $\left(\frac{[\# \text{ of adverse determinations overturned}]}{[\# \text{ of customer requests for internal review of grievances involving adverse determinations}]}\right)$ 

## Ratio 15.

Adverse determinations upheld to total grievances involving adverse determinations

 $\left(\frac{ \text{ [\# of adverse determinations upheld]}}{\text{ [\# of customer requests for internal review of grievances involving adverse determinations]}}\right)$ 

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## **Health Continued**

Ratio 16.

Grievances not involving adverse determinations per 1,000 member months

 $\left(\frac{[\# \text{ of requests for internal reviews of grievances not involving adverse determinations}]}{[(member months for policies issued+member months for policies renewed)/1000]}\right)$ 

## Ratio 17.

Customer requested appeals on final adverse determinations to an external review organization (ERO) per 1,000 member months

 $\left(\frac{\text{[\# of customer requested appeals on final adverse determinations to an ERO]}}{\text{[(member months for policies issued+member months for policies renewed)/1000]}}\right)$ 

## Ratio 18.

Final adverse determinations upheld upon request for external review to number of requested appeals on final adverse determinations to an external review organization (ERO)

 $\left(\frac{\text{[\# of final adverse determinations upheld upon request for external review]}}{\text{[\# of customer requested appeals on final adverse determinations to an ERO]}}\right)$ 

#### Ratio 19.

Final adverse determinations overturned upon request for external review to number of requested appeals on final adverse determinations to an external review organization (ERO)

 $\left(\frac{[\# \text{ of final adverse determinations overturned upon request for external review}]}{[\# \text{ of customer requested appeals on final adverse determinations to an ERO]}}\right)$ 

## **Lender Placed Insurance (Auto and Home)**

Both Single Interest and Dual Interest

## **Claims**

Ratio 1.

Number of claims closed without payment to total number of claims closed

#### Ratio 2.

Claims open at the end of the period to total claims during the period

(#of claims open at the beginning of period+#of claims opened during period - #of claims closed with payment-#of claims closed without payment)

(# of claims open at the beginning of period+# of claims opened during the period)

## Lender Placed Insurance (Auto and Home) Continued

Ratio 3.

Claims paid beyond 60 days to total claims closed with payment

(#of claims settled 61–90 days+#of claims settled 91–180 days
+ #of claims settled 181–365 days+#of claims settled beyond 365 days)
total # of claims closed with payment

Ratio 4.

Loss Ratio – Incurred claims to earned premium

 $\left[ \frac{\text{(dollars of claims incurred during the period)}}{\text{(dollar amount of premium earned during the period)}} \right]$ 

## **Cancellations**

Ratio 5.

Master policy cancellations to master policies in force at beginning of the period

(total #of master policy cancellations)
(total #of master policies in force at beginning of period)

Ratio 6.

A. Flat cancellations beyond 45 days to total flat cancellations: Certificates

[ (#of certificates flat cancelled beyond 45 days) (total #of certificates flat cancelled during the period)

B. Flat cancellations beyond 45 days to total flat cancellations: Individual policies

[ (#of individual policies flat cancelled beyond 45 days) (total #of individual policies flat cancelled during the period)]

Ratio 7.

A. Total cancelations to coverages issued – Certificates

(#of certificates flat cancelled during the period
+ #of certificates cancelled for reasons other than flat cancellations during the period)
# of certificates written during the period

B. Total cancelations to coverages issued – Individual policies

(#of individual policies flat cancelled during the period
+ #of individual policies cancelled for reasons other than flat cancellations during the peirod)
# of individual policies written during the period

## **Lender Placed Insurance (Auto and Home) Continued** Ratio 8.

A. Flat cancellations to total cancellations – Certificates

(# of certificates flat cancelled during the period)

(# of certificates flat cancelled during the period

+ #of certificates cancelled for reasons other than flat cancellations)

B. Flat cancellations to total cancellations – Individual policies

(#of individual policies flat cancelled during the period)
(#of individual policies flat cancelled during the period - #of individual policies cancelled for reasons other than flat cancellations)-

Ratio 9.

A. Flat cancellations to coverages written – Certificates

(#of certificates flat cancelled during the period) (#of certificates written during the period)

B. Flat cancellations to coverages written – Individual policies

[\frac{(\pmof individual policies flat cancelled during the period)}{(\pmof individual policies written during the period)}

Ratio 10.

A. Total cancellations to average exposures – Certificates

(#of certificates flat cancelled during the period
+ #of certificates cancelled for reasons other than flat cancellations)
#of certificates written during the period/average gross placement rate

B. Total cancellations to average exposures – Individual policies

(#of individual policies flat cancelled during the period
+ #of individual policies cancelled for reasons other than flat cancellations)
#of individual policies written during the period/average gross placement rate

Ratio 11.

A. Total flat cancellations to average exposures - Certificates

B. Total flat cancellations average exposures – Individual policies

(#of individual polciies flat cancelled during the period)
(#of individual policies written during the period/average gross placement rate)

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## Lender Placed Insurance (Auto and Home) Continued Suits

Ratio 12.

Suits opened during the period to claims closed without payment

(#of suits open during the period)
(# of claims closed without payment during the period)

## Ratio 13.

Suits closed with consideration for the consumer to suits closed

[(#of suits closed during the period with consideration for the borrower)
(#of suits closed during the period)

## Ratio 14.

Suits open at beginning of period to sum of certificates in force and individual policies in force at beginning of the period

(#of suits open at the beginning of the period)

(#of certificates in force at beginning of period
+ #of individual policies in force at beginning of period)

## Ratio 15.

Suits opened during the period to sum of average coverages in force

(#of suits opened during the period)

(#of certificates in force at beginning+certificates in force at end)

+ (#individual policies in force beginning+#individual policies in force end)

## **Complaints**

Ratio 16.

Total complaints to coverages written

(#of complaints received directly from the DOI
+ #of complaints received directly from any person or entity other than the DOI)
(#of certificates issued during the period
+ #of individual policies issued during the period)

## Ratio 17.

Total complaints to claims opened

(#of complaints received directly from the DOI
+ #of complaints received directly from any person or entity other than the DOI)
# of claims opened during the period

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## Lender Placed Insurance (Auto and Home) Continued Placement Rate

Ratio 18.

Average gross placement rate

First calculate industry aggregate sum of average exposures by coverage:

$$\sum \text{all insurers} \left[ \frac{\text{(\#of certificates issued during the period)}}{\text{+ \#of individual policies issued during the period)}} \\ \text{average gross placement rate} \right]$$

Then calculate aggregate average gross placement rate by coverage by dividing the sum of industry coverages written for a coverage by the sum of the industry number of exposures:

$$\frac{\sum \text{all insurers} \binom{\text{#of certificates issued during the period}}{\text{$\sum$ all insurers (number of average exposures)}}$$

## Life & Annuity Schedule 1 - Individual Cash Value Products (ICVP)

Ratio 1.

The number of replacements issued compared to the number of new policies issued

$$\left(\frac{[\#ofreplacementpolicies is sued]}{[\#ofnewpolicies is sued]}\right)$$

#### Ratio 2.

The number of policies replaced where the age of the insured at replacement was greater than or equal to 65 compared to the total number of replacements

$$\left(\frac{\text{[\#ofreplacements where age} \ge 65]}{\text{[\#ofreplacements where age} \le 65]}\right)$$

#### Ratio 3.

The number of surrenders compared to the number of policies issued

$$\left(\frac{\text{[#ofsurrenders]}}{\text{[#ofnewpoliciesissued]}}\right)$$

#### Ratio 4.

The number of policies surrendered through 10 years from policy issue compared to the total number of surrenders

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## **Life & Annuity Continued**

Ratio 5.

The number of claims paid beyond 60 days from the date of due proof of loss compared to the number of claims paid

## Ratio 6.

The number of claims denied, resisted or compromised compared to the number of claims closed

#### Ratio 7.

The number of complaints received directly from consumers per 1,000 policies in force

$$\left(\frac{[\#of complaints received from consumers]}{([\#of policies in force] \div 1,000)}\right)$$

## Schedule 2 - Individual Non-Cash Value Products (INCVP)

Ratio 1.

The number of replacements issued compared to the number of policies issued

## Ratio 5.

The number of claims paid beyond 60 days from the date of due proof of loss compared to the number of claims paid

## Ratio 6.

The number of claims denied, resisted or compromised compared to the number of claims closed

## Ratio 7.

The number of complaints received directly from consumers per 1,000 policies in force

## Schedule 3 - Individual Fixed Annuities (IFA) and Schedule 4 - Individual Variable Annuities (IVA)

(Separate ratios are provided for each schedule)

#### Ratio 1.

The number of replacements issued compared to the number of contracts issued

## **Life & Annuity Continued**

Ratio 2.

The number of contracts replaced where the age of the annuitant at Replacement was > 80 to the total number of replacements

 $\left(\frac{\text{[\#ofreplacements where age>80]}}{\text{[\#ofreplacements issued during the period]}}\right)$ 

#### Ratio 3.

The number deferred annuity contracts issued to annuitants more than 80 years old compared to total deferred annuities issued

(\frac{[#ofnew deferred contracts issued where age was>80]}{[#ofnew deferred contracts issued during period]}

## Ratio 4.

The number of contracts surrendered through 10 years from contract issue compared to the total number of surrenders

## Ratio 7.

The number of complaints received directly from consumers per 1,000 contracts in force

## **Long Term Care Schedule 1 - General**

Ratio 1.

The percentage of replacements to new business issued

 $\left(\frac{[\#ofinternal\ replacementpoliciesissued + \#\ of\ external\ replacement\ policies\ issued]}{[\#ofnewbusiness\ policiesissued]}\right)$ 

## Ratio 2.

The number of complaints per 1,000 policies in-force as of the end of the reporting period

 $\left(\frac{[\#of complaints received from consumers]}{([\#of policies in force] \div 1,000)}\right)$ 

## **Schedule 2 - Claimants**

Ratio 3.

The average number of claimants per policy in-force

(<u>#ofclaimants approved for benefits at the end of the period</u>)
[#ofpolicies in-force]

## Long Term Care Continued Schedule 3 — Claimant Requests Denied/Not Paid

Ratio 4.

The percentage of denied claimant requests to new claimants

## **Schedule 4 – Claimant Request Determination Timeliness**

Ratio 5.

The percentage of claim determination made more than 60 days from notice of claim

(#ofclaim determinations made within 60 to 90 days + claim determinations made beyond 90 days)

[Total #ofclaim determinations made]

## **Schedule 5 – Benefit Payment Requests**

Ratio 6.

The percentage of benefit payment requests denied

 $\left(\frac{\text{[\#ofpayment requests denied or not paid]}}{\text{[total requests received+total requests pending at beginning of period]}}\right)$ 

## Schedule 6 – Benefit Payment Request Timeliness

Ratio 7.

The percentage of benefit request payments made more than 60 days from notice of request

(#ofbenefit requests paid within 60 to 90 days+benefit requests paid beyond 90 days]
[total # of benefit payments paid]

Ratio 8.

The percentage of benefit request denials made more than 60 days from notice of request

([benefit requests denied or not paid within 60 to 90 days+benefit requests denied or not paid beyond 90 days]

[total #ofbenefit requests denied or not paid]

## Schedule 7 - Lawsuits

Ratio 9.

The percentage of lawsuits closed with consideration for the consumer

([#oflawsuits closed with consideration for consumer]
[total#oflawsuits closed during the period]

## **Private Flood**

Same Ratios Apply Separately for First Dollar Coverage (stand-alone plus endorsements) and Excess Coverage (stand-alone plus endorsements)

## Ratio 1.

Number of claims closed without payment compared to total number of claims closed

 $\left(\frac{\text{[Number of claims closed during the period, without payment (55)]}}{\text{[Number of claims closed with payment (54)]} + \text{[Number of claims closed without payment (55)]}}\right)$ 

#### Ratio 2.

Percentage of claims unprocessed at the end of the period

Number of claims open at the beginning of period (52)+Number of claims opened during period (53)

-Number of claims closed with payment (54)-Number of claims closed without payment (55)

Number of claims open at the beginning of period (52)+Number of claims opened during the period (53)

## Ratio 3.

Percentage of claims paid beyond 60 days

 $\left(\frac{\text{[total number of claims closed with payment beyond 60 days (sum of 60 through 63)]}}{\text{[total number of claims closed with payment for all durations (sum of 58 through 63)]}}\right)$ 

#### Ratio 4.

Company-initiated non-renewals to policies in force

 $\left(\frac{\text{[number of company-initiated non-renewals (76)]}}{\text{[number of private flood policies or endorsements in force at the end of the reporting period (73)]}\right)$ 

## Ratio 5.

Company-initiated cancellations over 60 days to policies in force

[number of company-initiated cancellations that occur 60 days or more after the effective date (80 and 81)]
[number of private flood policies or endorsements in force at the end of the reporting period (73)]

## Ratio 6.

Company-initiated cancellations under 60 days to new policies issued

 $\left(\frac{[\text{number of company-initiated cancellations that occur in the first 59 days after effective date (79)]}{[\text{number of private flood policies or endorsements written during the reporting period (72)]}\right)$ 

#### Ratio 7.

Suits opened during the period to claims closed without payment

 $\left(\frac{\text{[Number of lawsuits opened during the period (83)]}}{\text{[number of claims closed during the reporting period, without payment (55)]}}\right)$ 

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## **Private Flood Continued**

Ratio 8.

Percentage of lawsuits closed with consideration for the consumer

 $\left(\frac{[\text{number of lawsuits closed during the period with consideration for the consumer (85)]}{[\text{number of lawsuits closed during the period (84)]}\right)$ 

## **Property & Casualty (Private Passenger Auto & Homeowner)**

Ratio 1.

The number of claims closed without payment compared to the total number of claims closed

 $\left(\frac{[\# of claims closed without payment]}{[\# of claims closed with payment] + [\# of claims closed without payment]}\right)$ 

Ratio 2.

Percentage of claims unprocessed at the end of the period

ofclaimsopenattheBeginningofperiod+ofclaimsopenedduringperiod ofclaimsclosedwithpayment—ofclaimsclosedwithoutpayment #ofclaimsopenatthebeginningofperiod+#ofclaimsopenedduringtheperiod

Ratio 3.

Percentage of claims paid beyond 60 days

([total#ofclaimssettledbeyond60days])
[total#ofclaimssettledforalldurations]

Ratio 4.

Non-renewals to policies in force

 $\left(\frac{[\#ofnon-renewals]}{[\#ofnoliciesinforce]}\right)$ 

Ratio 5.

Cancellations over 60 days to policies in force

 $\left(\frac{[\#of cancellations 60 days or more after the effective date]}{[\#of policies in force]}\right)$ 

Ratio 6.

Cancellations under 60 days to new policies issued

(<a href="mailto:limbos:left-square;">[#ofcancellationsthatoccurinthefirst59daysaftereffectivedate]</a>)
[#ofnewpoliciesissued]

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## **Property & Casualty (Private Passenger Auto & Homeowner) Continued** Ratio 7.

Suits opened during the period to claims closed without payment

 $\left(\frac{\text{[\#ofsuitsopenduringtheperiod]}}{\text{[\#ofclaimsclosedwithoutpayment]}}\right)$ 

## **Other Health**

Ratio 1.

The number of claims denied, rejected or returned to the total number of claims closed

[Total # of claims denied, rejected or returned (66)]

[# of claims pending at beginning of period (64)]

+ [# of claims received (include non-clean claims) (65)]

- [# of claims pending at end of period (72)]

## Ratio 2.

Pre-existing Condition Denials to Total Denials

([#of denied,rejected,or returned as subject to pre-existing condition exclusion (68)]

[Total #of claims denied,rejected or returned (66)]

#### Ratio 3.

Inadequate Documentation Denials to Total Denials

( [# of denied,rejected or returned due to failure to provide adequate documentation (69)] | Total #of claims denied,rejected or returned (66)]

#### Ratio 4.

Average Number of Days to a Decision on Denied Claims

[Total # of claims denied,rejected or returned (66)]

\* [Average # of days from receipt of claim to decision for denied claims (74)]

[(Total # of claims denied,rejected or returned (66)]

Note: The above calculation is the total number of days for all insurers to a decision on denied claims divided by the total number of denied claims for all insurers to produce the statewide average time to a decision.

## **Other Health Continued**

Ratio 5.

Average Number of Days to a Decision on Approved Claims

```
[# of claims pending at beginning of period (64)]
+[# of claims received (include non-clean claims) (65)]
-[# of claims pending at end of period (72)]
-[Total # of claims denied,rejected or returned (66)]

* [Average # of days from receipt of claim to decision for approved claims (76)]

[# of claims pending at beginning of period (64)]
+[# of claims received (include non-clean claims) (65)]
-[# of claims pending at end of period(72)]
-[Total # of claims denied,rejected or returned (66)]
```

Note: The above calculation is the total number of days for all insurers to a decision on denied claims divided by the total number of denied claims for all insurers to produce the statewide average time to a decision.

## Ratio 6.

Cancellations During Free Look Period

```
\left(\frac{[\# \text{ of policies/certificates cancelled during free look period (54)}]}{[\# \text{ of new policies/certificates issued during the period (50)}]}\right)
```

#### Ratio 7.

Cancellations by Policyholder to Total Policies/Certificates During the Period

```
 \left( \frac{ \left[ \text{\# of policy/certificate terminations and cancellations initiated by the policyholder/certificate holder during the period (53)}{ \left[ \text{\# of new policies} \\ \text{+} \left[ \frac{\text{\# of new policies}}{\text{certificates}} \text{issued during the period (50)} \right] } \right)
```

#### Ratio 8.

Cancellations by Company to Total Policies/Certificates During the Period

## Ratio 9. Loss Ratio

```
([Aggregate dollar amount of paid claims during the period (78)])
[Direct written premium (45)]
```

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## **Other Health Continued**

Ratio 10.

Number of Complaints received per 1,000 Policies/Certificates In Force During the Period and Claims During the Period

```
[[# of complaints received by company (other than through the DOI) (81)]

+ [# of complaints received through DOI (82)]

- [# of policies/certificates in force at beginning of period (47)]

+ [# of new policies ocertificates issued during the period (50)]

+ [# of claims pending at beginning of period (64)]

+ [# of claims received (include non-clean claims) (65)]

- [# of claims pending at end of period (72)]

1,000
```

## Ratio 11. Number of Complaints Resulting in Claims Reprocessing to Total Complaints

```
 \left( \begin{array}{c} {[\# \text{ of complaints resulting in claims reprocessing (83)]}} \\ {\overline{[[\# \text{ of complaints received by company (other than through the DOI) (81)]]}} \\ {+ \ [\# \text{ of complaints received through DOI (82)]}} \right)
```

## Ratio 12. Percentage of Lawsuits Closed with Consideration for the Consumer

```
\left(\frac{[\# \text{ of lawsuits closed during the period with consideration for the consumer (87)}]}{[\# \text{ of lawsuits closed during the period (86)}]}\right)
```

# Ratio 13. Lawsuits opened per 1,000 Policies/Certificates In Force During the Period and Claims During the Period

```
[# of lawsuits opened during the period (85)]

[# of policies/certificates in force at beginning of period (47)]

+ [# of new policies, certificates issued during the period (50)]

+ [# of claims pending at beginning of period (64)]

+ [# of claims received (include non-clean claims) (65)]

- [# of claims pending at end of period (72)]

1,000
```

## **Other Health Continued**

Ratio 14.

Average Dollars of Commission Per Policy/Certificate

[[Commissions paid during the reporting period (99)]
- [Unearned commissions returned to company on policies/certificates sold during the period (100)]
[(# of new policies/certificates issued during the period (50)]

#### Ratio 15.

Percentage Commissions to Written Premium

```
[[Commissions paid during the reporting period (99)]
- [Unearned commissions returned to company on policies/certificates sold during the period (100)]

[Direct written premium (45)]
```

Note: It is unclear to what extent commissions are paid on events other than new business (e.g., such as renewals)

## **Short-Term Limited Duration Insurance**

#### Ratio 1.

The number of claims denied, rejected or returned to the total number of claims paid, denied, rejected or returned

```
[# of claim denied, rejected or returned (89)]

[# of claims pending at beginning of period (87) + # of claims received (88)]

- # of claims pending at end of period (99)
```

#### Ratio 2.

Pre-existing Condition Denials to Total Denials

```
(#of claim denied,rejected or returned as subject to pre-existing condition exclusion (94)]
[#of claims denied,rejected or returned (89)]
```

## Ratio 3.

Prior Authorizations Denied to the Total Number of Prior Authorizations Received During the Period

 $\left(\frac{\text{[total # of prior auths denied during the period (82)]}}{\text{[# of prior auths received during the period (79 + 80)]}}\right)$ 

## **Short-Term Limited Duration Insurance Continued**

Ratio 4.

Member Months for Policies/Certificates Renewed/Reissued which had an option to renew/reissue without Underwriting to Total Member Month for Policies/Certificates Renewed/Reissued

 $\left(\frac{\text{[\# of member months on policies renewed/reissued without underwriting (61)]}}{\text{[total $\#$ of member months on total number of policies renewed/reissued during the period (60)]}}\right)$ 

Ratio 5.

Cancellations During Free Look Period

 $\left(\frac{\text{[\# of policies/certificates cancelled during free look period (65)]}}{\text{[total \# of policies issued during the period (51 all STLDI columns]}}\right)$ 

Ratio 6.

Claims Appeals per Claims Denied, Rejected, and Returned

 $\left(\frac{\text{[\# of claims appeals pending at beginning (104) + \# of claims appeals received (105)]}}{\text{[\# of claim denied, rejected or returned (89)]}}\right)$ 

Ratio 7.

Claims Appeals In which the Company Claims Decision is Overturned

 $\left(\frac{\text{[Number of Claim Decision Appeals Resulting in Decisions Overturned or Modified during the period (107)]}{\text{[# of claims appeals pending at beginning (104) + # of claims appeals received (105)]}\right)$ 

Ratio 8.

Number of Complaints received per 1,000 Policies/Certificates In Force During the Period

 $\left(\frac{[\# \text{ of complaints received by company (112)} + \text{complaints received through DOI (113)}]}{[(\text{policies/certificates in force at beginning (48)} + \text{policies/certificates issued (51)/1000}]\right)$ 

Ratio 9.

Percentage of Lawsuits Closed with Consideration for the Consumer

 $\left(\frac{[\# \text{ of lawsuits closed with consideration for the consumer (118)}]}{[\# \text{ of lawsuits closed during the period (117)}]}\right)$ 

Ratio 10.

Lawsuits to Policies/Certificates In Force During the Period

 $\left(\frac{\text{[\# of lawsuits opened during the period (116)]}}{\text{[(policies/certificates in force at beginning (48)+ policies/certificates issued (51)]}}\right)$ 

## **Short-Term Limited Duration Insurance Continued**

Ratio 11.

Renewal/Reissue Applications Denied to Total Renewal/Reissue Applications

 $\left(\frac{\text{[\# of renewal/reissue applications denied during the period (125)]}}{\text{[(\# of renewal/reissue applications received during the period(122)]}}\right)$ 

## **Travel**

Ratio 1.

The number of claims closed without payment compared to the total number of claims closed

$$\left(\frac{\text{[#of claims closed without payment (20)]}}{\text{[#of claims closed with payment (19)]} + \text{[#of claims closed without payment (20)]}}\right)$$

#### Ratio 2.

Percentage of claims unprocessed at the end of the period

```
claims open at the Beginning of period (17)+claims opened during period (18)
-\text{of claims closed with payment (19)-of claims closed without payment (20)}
# of claims open at the Beginning of period (17)+# of claims opened during the period (18)
```

## Ratio 3.

Percentage of claims paid beyond 30 days

 $\left(\frac{\text{[total #of claims settled beyond 30 days (24+25)]}}{\text{[total #of claims settled for all durations (23+24+25]}}\right)$ 

## Ratio 4.

The percentage of lawsuits closed with consideration for the consumer

 $\left(\frac{\text{[\#of lawsuits closed with consideration for consumer (34)]}}{\text{[total \# of lawsuits closed during the period (32)]}}\right)$