Market Conduct Annual Statement Ratios 2026

Market Conduct Annual Statement Ratios 2026

Contents

Market Conduct Annual Statement Ratios 2026

Disability Income
Ratio 1.
Percentage of claims denied

$$\left(\frac{\text{[Number of claims denials during reporting period (21)]}}{\text{[Number of claims denials during reporting period (21)]} + \text{[Number of paid claims closed during reporting period (22)]}} \right)$$

Ratio 2.
Percentage of claims processed with initial decision after 45 days
Short-Term Only

$$\left(\frac{\text{[Number of claims processed with initial claim decision over 45 days (28)]}}{\begin{array}{l}\text{[Number of claims processed with initial claim decision within 1-14 days (25)]} \\ +\text{[Number of claims processed with initial claim decision within 15-30 days (26)]} \\ +\text{[Number of claims processed with initial claim decision within 31-45 days (27)]} \\ \quad +\text{[Number of claims processed with initial claim decision over 45 days (28)]}\end{array}} \right)$$

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

$$\left(\frac{\text{[Number of claims processed with initial claim decision over 90 days (33)]}}{\begin{array}{l}\text{[Number of claims processed with initial claim decision within 1-30 days (30)]} \\ +\text{[Number of claims processed with initial claim decision within 31-60 days (31)]} \\ +\text{[Number of claims processed with initial claim decision within 61-90 days (32)]} \\ \quad +\text{[Number of claims processed with initial claim decision over 90 days (33)]}\end{array}} \right)$$

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

$$\left(\frac{\text{[Number of complaints received directly from any entity other than the DOI (83)]}}{\left(\begin{array}{l}\text{([Number of policies beginning of the reporting period (67)]} \\ +\text{[Number of policies at the end of the reporting period (75)])} \div 2\end{array} \right) \div 1000} \right)$$

Ratio 5.
The number of complaints received directly from any entity other than the DOI per 1,000 lives
covered on group policies

$$\left(\frac{\text{[Number of complaints received directly from any entity other than the DOI (83)]}}{\left(\begin{array}{l}\text{([Number of lives covered at the beginning of the reporting period (76)]} \\ +\text{[Number of lives covered at the end of the reporting period (82)])} \div 2\end{array} \right) \div 1000} \right)$$

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

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

Ratio 7.

The percentage of lawsuits closed with consideration for the consumer

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

Ratio 8.

Insurer non-renewals and cancellations to average policies in force

$$\left(\frac{[\text{Number of insurer non-renewals (71)} + [\text{Number of insurer cancellations] (72)}]}{\begin{array}{c} ([\text{Number of policies in force at the beginning of the reporting period (67)}] \\ +[\text{Number of policies in force at the end of the reporting period (75)}]) \div 2 \end{array}} \right)$$

Ratio 9.

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

$$\left(\frac{\begin{array}{c} [\text{Number of lives covered under insurer non-renewals (79)}] \\ +[\text{Number of lives covered under insurer cancellations (80)}] \end{array}}{\begin{array}{c} ([\text{Number of lives covered under policies in force at the beginning of the reporting period (76)}] \\ +[\text{Number of lives covered under policies in force at the end of the reporting period (82)}]) \div 2 \end{array}} \right)$$

Ratio 10.

Average pending benefit determinations to claims received

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

Disability Income Continued
Ratio 11.
Rescissions after two years from issuance to total rescissions

$$\left(\frac{[\text{Number of rescissions after two years from policy issue (74)}]}{\begin{array}{c}[\text{Number of rescissions within two years from policy issue (73)}] \\ +[\text{Number of rescissions after two years from policy issue (74)}]\end{array}} \right)$$

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)

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

Ratio 2.
Percentage of in-network claims (Excluding Pharmacy)

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

Ratio 3.
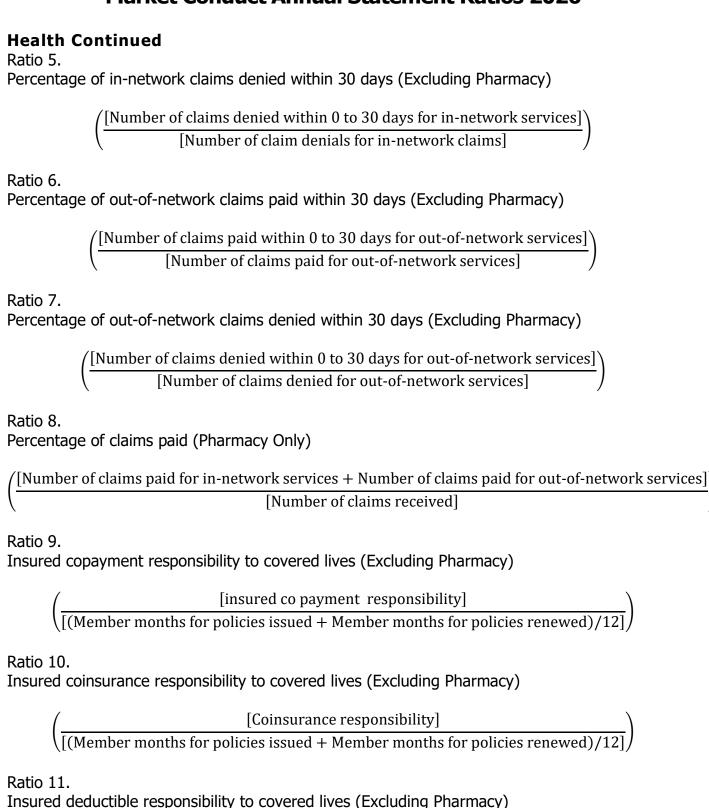Percentage of out-of-network claims (Excluding Pharmacy)

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

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

Ratio 4.
Percentage of in-network claims paid within 30 days (Excluding Pharmacy)

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

Market Conduct Annual Statement Ratios 2026

Health Continued

Ratio 5.
Percentage of in-network claims denied within 30 days (Excluding Pharmacy)

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

Ratio 6.
Percentage of out-of-network claims paid within 30 days (Excluding Pharmacy)

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

Ratio 7.
Percentage of out-of-network claims denied within 30 days (Excluding Pharmacy)

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

Ratio 8.
Percentage of claims paid (Pharmacy Only)

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

Ratio 9.
Insured copayment responsibility to covered lives (Excluding Pharmacy)

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

Ratio 10.
Insured coinsurance responsibility to covered lives (Excluding Pharmacy)

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

Ratio 11.
Insured deductible responsibility to covered lives (Excluding Pharmacy)

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

Market Conduct Annual Statement Ratios 2026

Health Continued

Ratio 12.
Cost sharing responsibility to covered lives (Pharmacy Only)

$$\left(\frac{[\text{Insured co payment responsibility} + \text{Coinsurance responsibility} + \text{Deductible responsibility}]}{[(\text{Member months for policies issued} + \text{Member months for policies renewed})/12]} \right)$$

Ratio 13.
Adverse determination grievances per 1,000 member months

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

Ratio 14.
Adverse determinations overturned to total grievances involving adverse determinations

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

Ratio 15.
Adverse determinations upheld to total grievances involving adverse determinations

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

Ratio 16.
Grievances not involving adverse determinations per 1,000 member months

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

Ratio 17.
Customer requested appeals on final adverse determinations to an external review organization (ERO) per 1,000 member months

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

Health Continued

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)

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

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)

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

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

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

Ratio 2.

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

$$\left[\frac{\begin{array}{c}(\text{Number of claims open at the beginning of period} + \text{Number of claims opened during period}\\ -\text{ Number of claims closed with payment} - \text{Number of claims closed without payment})\end{array}}{(\text{Number of claims open at the beginning of period} + \text{Number of claims opened during the period})}\right]$$

Ratio 3.

Claims paid beyond 60 days to total claims closed with payment

$$\left[\frac{\begin{array}{c}(\text{Number of claims settled } 61-90 \text{ days} + \text{Number of claims settled } 91-180 \text{ days}\\ +\text{ Number of claims settled } 181-365 \text{ days} + \text{Number of claims settled beyond 365 days})\end{array}}{\text{Total number of claims closed with payment}}\right]$$

Lender Placed Insurance (Auto and Home) Continued
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

$$\left[\frac{\text{(Total number of master policy cancellations)}}{\text{(Total number of master policies in force at beginning of period)}}\right]$$

Ratio 6.
A. Flat cancellations beyond 45 days to total flat cancellations: Certificates

$$\left[\frac{\text{(Number of certificates flat cancelled beyond 45 days)}}{\text{(Total number of certificates flat cancelled during the period)}}\right]$$

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

$$\left[\frac{\text{(Number of individual policies flat cancelled beyond 45 days)}}{\text{(Total number of individual policies flat cancelled during the period)}}\right]$$

Ratio 7.
A. Total cancelations to coverages issued – Certificates

$$\left[\frac{\begin{array}{c}\text{(Number of certificates flat cancelled during the period}\\ \text{+ Number of certificates cancelled for reasons other than flat cancellations during the period)}\end{array}}{\text{Number of certificates written during the period}}\right]$$

B. Total cancelations to coverages issued – Individual policies

$$\left[\frac{\begin{array}{c}\text{(Number of individual policies flat cancelled during the period}\\ \text{+ Number of individual policies cancelled for reasons other than flat cancellations during the peirod)}\end{array}}{\text{Number of individual policies written during the period}}\right]$$

Market Conduct Annual Statement Ratios 2026

Lender Placed Insurance (Auto and Home) Continued
Ratio 8.
A. Flat cancellations to total cancellations – Certificates

$$\left[\frac{\text{(Number of certificates flat cancelled during the period)}}{\begin{array}{c}\text{(Number of certificates flat cancelled during the period}\\ + \text{Number of certificates cancelled for reasons other than flat cancellations)}\end{array}}\right]$$

B. Flat cancellations to total cancellations – Individual policies

$$\left[\frac{\text{(Number of individual policies flat cancelled during the period)}}{\begin{array}{c}\text{(Number of individual policies flat cancelled during the period}\\ + \text{Number of individual policies cancelled for reasons other than flat cancellations)}\end{array}}\right]$$

Ratio 9.
A. Flat cancellations to coverages written – Certificates

$$\left[\frac{\text{(Number of certificates flat cancelled during the period)}}{\text{(Number of certificates written during the period)}}\right]$$

B. Flat cancellations to coverages written – Individual policies

$$\left[\frac{\text{(Number of individual policies flat cancelled during the period)}}{\text{(Number of individual policies written during the period)}}\right]$$

Ratio 10.
A. Total cancellations to average exposures – Certificates

$$\left[\frac{\begin{array}{c}\text{(Number of certificates flat cancelled during the period}\\ + \text{Number of certificates cancelled for reasons other than flat cancellations)}\end{array}}{\text{Number of certificates written during the period/average gross placement rate}}\right]$$

B. Total cancellations to average exposures – Individual policies

$$\left[\frac{\begin{array}{c}\text{(Number of individual policies flat cancelled during the period}\\ + \text{Number of individual policies cancelled for reasons other than flat cancellations)}\end{array}}{\text{Number of individual policies written during the period/average gross placement rate}}\right]$$

Lender Placed Insurance (Auto and Home) Continued
Ratio 11.
A. Total flat cancellations to average exposures – Certificates

$$\left[\frac{(\text{Number of certificates flat cancelled during the period})}{\text{Number of certificates written during the period/average gross placement rate}}\right]$$

B. Total flat cancellations average exposures – Individual policies

$$\left[\frac{(\text{Number of individual polciies flat cancelled during the period})}{(\text{Number of individual policies written during the period/average gross placement rate})}\right]$$

Suits
Ratio 12.
Suits opened during the period to claims closed without payment

$$\left[\frac{(\text{Number of suits open during the period})}{(\text{Number of claims closed without payment during the period})}\right]$$

Ratio 13.
Suits closed with consideration for the consumer to suits closed

$$\left[\frac{(\text{Number of suits closed during the period with consideration for the borrower})}{(\text{Number of suits closed during the period})}\right]$$

Ratio 14.
Suits open at beginning of period to sum of certificates in force and individual policies in force at beginning of the period

$$\left[\frac{(\text{Number of suits open at the beginning of the period})}{\begin{array}{c}(\text{Number of certificates in force at beginning of period}\\ + \text{Number of individual policies in force at beginning of period})\end{array}}\right]$$

Ratio 15.
Suits opened during the period to sum of average coverages in force

$$\left[\frac{(\text{Number of suits opened during the period})}{\dfrac{\begin{array}{c}(\text{Number of certificates in force at beginning} + \text{Certificates in force at end})\\ + (\text{Number individual policies in force beginning} + \text{Number individual policies in force end})\end{array}}{2}}\right]$$

Lender Placed Insurance (Auto and Home) Continued
Complaints
Ratio 16.
Total complaints to coverages written

$$\left[\frac{\begin{array}{c}\text{(Number of complaints received directly from the DOI} \\ + \text{ Number of complaints received directly from any person or entity other than the DOI)}\end{array}}{\begin{array}{c}\text{(Number of certificates issued during the period} \\ + \text{ Number of individual policies issued during the period)}\end{array}}\right]$$

Ratio 17.
Total complaints to claims opened

$$\left[\frac{\begin{array}{c}\text{(Number of complaints received directly from the DOI} \\ + \text{ Number of complaints received directly from any person or entity other than the DOI)}\end{array}}{\text{Number of claims opened during the period}}\right]$$

Placement Rate
Ratio 18.
Average gross placement rate
First calculate industry aggregate sum of average exposures by coverage:

$$\sum \text{all insurers} \left[\frac{\begin{array}{c}\text{(Number of certificates issued during the period} \\ + \text{ Number of individual policies issued during the period)}\end{array}}{\text{Average gross placement rate}}\right]$$

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:

$$\frac{\sum \text{all insurers} \left(\begin{array}{c}\text{(Number of certificates issued during the period} \\ + \text{ Number of individual policies issued during the period)}\end{array}\right)}{\sum \text{all insurers (number of average exposures)}}$$

Life & Annuity
Schedule 1 - Individual Cash Value Products (ICVP)
Ratio 1.
The number of replacements issued compared to the number of new policies issued

$$\left(\frac{[\text{Number of replacement policies issued}]}{[\text{Number of new policies issued}]}\right)$$

Market Conduct Annual Statement Ratios 2026

Life & Annuity Continued

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

$$\left(\frac{[\text{Number of replacements where age} \geq 65]}{[\text{Number of replacements where age} < 65] + [\text{Number of replacements where age} \geq 65]}\right)$$

Ratio 3.

The number of surrenders compared to the number of policies issued

$$\left(\frac{[\text{Number of surrenders}]}{[\text{Number of new policies issued}]}\right)$$

Ratio 4.

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

$$\left(\frac{[\text{Number of surrenders} < 2 \text{ years from issuance}] + [\text{Number of surrenders } 2 - 5 \text{years from issuance}] + [\text{Number of surrenders } 6 - 10 \text{ years from issuance}]}{[\text{Total surrendered during the period}]}\right)$$

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

$$\left(\frac{[\text{Number of claims paid beyond 60 days}]}{[\text{Number of claims paid within 30 days}] + [\text{Number of claims paid within 31 - 60 days}] + [\text{Number of claims paid beyond 60 days}]}\right)$$

Ratio 6.

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

$$\left(\frac{[\text{Number of claims denied, resisted or compromised}]}{[\text{Number of claims paid within 30 days}] + [\text{Number of claims paid within 31 - 60 days}] + [\text{Number of claims paid beyond 60 days}] + [\text{Number of claims denied, resisted or compromised}]}\right)$$

Market Conduct Annual Statement Ratios 2026

Life & Annuity Continued
Ratio 7.
The number of complaints received directly from consumers per 1,000 policies in force

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

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

Ratio 2.
The number of contracts replaced where the age of the annuitant at Replacement was > 80 to the total number of replacements

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

Ratio 3.
The number deferred annuity contracts issued to annuitants more than 80 years old compared to total deferred annuities issued

$$\left(\frac{[\text{Number of new deferred contracts issued where age was} > 80]}{[\text{Number of new deferred contracts issued during period}]}\right)$$

Life & Annuity Continued

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

$$\left(\frac{[\text{Number of internal replacement policies issued } + \text{ Number of external replacement policies issued}]}{[\text{Number of new business policies issued}]}\right)$$

Ratio 2.

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

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

Schedule 2 - Claimants

Ratio 3.

The average number of claimants per policy in-force

$$\left(\frac{[\text{Number of claimants approved for benefits at the end of the period}]}{[\text{Number of policies in-force}]}\right)$$

Schedule 3 – Claimant Requests Denied/Not Paid

Ratio 4.

The percentage of denied claimant requests to new claimants

$$\left(\frac{[\text{Number of requests denied or not paid}]}{\begin{bmatrix}\text{Number of new claimants during the period} \\ + \text{ Number of pending claimant requests at the beginning of period}\end{bmatrix}}\right)$$

Long Term Care Continued
Schedule 4 – Claimant Request Determination Timeliness
Ratio 5.

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

$$\left(\frac{\begin{bmatrix}\text{Number of claim determinations made within 60 to 90 days}\\+\text{ Claim determinations made beyond 90 days}\end{bmatrix}}{[\text{Total number of claim determinations made}]}\right)$$

Schedule 5 – Benefit Payment Requests
Ratio 6.

The percentage of benefit payment requests denied

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

Schedule 6 – Benefit Payment Request Timeliness
Ratio 7.

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

$$\left(\frac{[\text{Number of benefit requests paid within 60 to 90 days}+\text{Benefit requests paid beyond 90 days}]}{[\text{Total number of benefit payments paid}]}\right)$$

Ratio 8.

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

$$\left(\frac{\begin{bmatrix}\text{Benefit requests denied or not paid within 60 to 90 days}\\+\text{ Benefit requests denied or not paid beyond 90 days}\end{bmatrix}}{[\text{Total number of benefit requests denied or not paid}]}\right)$$

Schedule 7 - Lawsuits
Ratio 9.

The percentage of lawsuits closed with consideration for the consumer

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

Other Health

Ratio 1.

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

$$\left(\frac{[\text{Total number of claims denied, rejected or returned (65)}]}{\begin{bmatrix}[\text{Number of claims pending at beginning of period (63)}] \\ + [\text{Number of claims received (include non-clean claims) (64)}] \\ - [\text{Number of claims pending at end of period (70)}]\end{bmatrix}}\right)$$

Ratio 2.

Pre-existing Condition Denials to Total Denials

$$\left(\frac{[\text{Number of denied, rejected, or returned as subject to pre} - \text{existing condition exclusion (67)}]}{[\text{Total number of claims denied, rejected or returned (65)}]}\right)$$

Ratio 3.

Inadequate Documentation Denials to Total Denials

$$\left(\frac{[\text{Number of denied, rejected or returned due to failure to provide adequate documentation (68)}]}{[\text{Total number of claims denied, rejected or returned (65)}]}\right)$$

Ratio 4.

Average Number of Days to a Decision on Denied Claims

$$\left(\frac{\begin{bmatrix}[\text{Total number of claims denied, rejected or returned (65)}] \\ * [\text{Average N=number of days from receipt of claim to decision for denied claims (72)}]\end{bmatrix}}{[(\text{Total number of claims denied, rejected or returned (65)}]}\right)$$

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

$$\left(\frac{\begin{bmatrix} \text{[Number of claims pending at beginning of period (63)]} \\ +\text{[Number of claims received (include non-clean claims) (64)]} \\ -\text{[Number of claims pending at end of period (70)]} \\ -\text{[Total number of claims denied, rejected or returned (65]} \end{bmatrix} * \text{[Average number of days from receipt of claim to decision for approved claims (74)]}}{\begin{bmatrix} \text{[Number of claims pending at beginning of period (63)]} \\ +\text{[Number of claims received (include non-clean claims) (64)]} \\ -\text{[Number of claims pending at end of period(70)]} \\ -\text{[Total number of claims denied, rejected or returned (65)]} \end{bmatrix}} \right)$$

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

$$\left(\frac{\text{[Number of policies/certificates cancelled during free look period (53)]}}{\text{[Number of new policies/certificates issued during the period (50)]}} \right)$$

Ratio 7.
Cancellations by Policyholder to Total Policies/Certificates During the Period

$$\left(\frac{\begin{bmatrix} \text{Number of policy/certificate terminations and cancellations initiated by the} \\ \text{policyholder/certificate holder during the period (52)} \end{bmatrix}}{\begin{bmatrix} \text{[Number of policies/certificates in force at beginning of period (47)]} \\ + \left[\frac{\text{Number of new policies}}{\text{certificates}} \text{ issued during the period (50)} \right] \end{bmatrix}} \right)$$

Ratio 8.
Cancellations by Company to Total Policies/Certificates During the Period

$$\left(\frac{\begin{bmatrix} \text{Number of policies/certificates cancelled by the company} \\ \text{for any reason other than non-payment during the period (56)} \end{bmatrix}}{\begin{bmatrix} \left[\text{Number of} \frac{\text{policies}}{\text{certificates}} \text{ in force at beginning of period (47)} \right] \\ + \left[\text{Number of new} \frac{\text{policies}}{\text{certificates}} \text{ issued during the period (50)} \right] \end{bmatrix}} \right)$$

Other Health Continued

Ratio 9.
Loss Ratio

$$\left(\frac{[\text{Aggregate dollar amount of paid claims during the period (76)}]}{[\text{Direct written premium (45)}]}\right)$$

Ratio 10.
Number of Complaints received per 1,000 Policies/Certificates In-Force During the Period and Claims During the Period

$$\left(\frac{\begin{bmatrix}[\text{Number of complaints received by company (other than through the DOI) (79)}] \\ + [\text{Number of complaints received through DOI (80)}]\end{bmatrix}}{\begin{bmatrix}\dfrac{\begin{bmatrix}[\text{Number of policies/certificates in force at beginning of period (47)}] \\ + \left[\dfrac{\text{Number of new policies}}{\text{certificates}}\right]\text{issued during the period (50)} \\ +[\text{Number of claims pending at beginning of period (63)}] \\ + [\text{Number of claims received (include non-clean claims) (64)}] \\ - [\text{Number of claims pending at end of period (70)}]\end{bmatrix}}{1{,}000}\end{bmatrix}}\right)$$

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

$$\left(\frac{[\text{Number of complaints resulting in claims reprocessing (81)}]}{\begin{bmatrix}[\text{Number of complaints received by company (other than through the DOI) (79)}] \\ + [\text{Number of complaints received through DOI (80)}]\end{bmatrix}}\right)$$

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

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

Other Health Continued

Ratio 13.

Lawsuits opened per 1,000 Policies/Certificates In-Force During the Period and Claims During the Period

$$\left(\frac{[\text{Number of lawsuits opened during the period (83)}]}{\left[\frac{\begin{array}{c} [\text{Number of policies/certificates in force at beginning of period (47)}] \\ + \left[\frac{\text{Number of new policies}}{\text{certificates}} \text{ issued during the period (50)} \right] \\ + [\text{Number of claims pending at beginning of period (63)}] \\ + [\text{Number of claims received (include non-clean claims) (64)}] \\ - [\text{Number of claims pending at end of period (70)}] \end{array}}{1,000} \right]} \right)$$

Ratio 14.

Average Dollars of Commission Per Policy/Certificate

$$\left(\frac{\left[\begin{array}{c} [\text{Commissions paid during the reporting period (97)}] \\ - [\text{Unearned commissions returned to company on} \\ \text{policies/certificates sold during the period (98)}] \end{array} \right]}{[(\text{Number of new policies/certificates issued during the period (50)}]} \right)$$

Ratio 15.

Percentage Commissions to Written Premium

$$\left(\frac{\left[\begin{array}{c} [\text{Commissions paid during the reporting period (97)}] \\ - [\text{Unearned commissions returned to company on} \\ \text{policies/certificates sold during the period (98)}] \end{array} \right]}{[\text{Direct written premium (45)}]} \right)$$

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

Pet
Public Ratios

Ratio 1.

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

$$\left(\frac{[\text{Number of claims closed without payment during the period (3 − 77)}]}{[\text{Number of claims closed during the period (3 − 68)}]} \right)$$

Pet Continued

Ratio 2.

Percentage of claims paid (full or partial) beyond 60 days

$$\left(\frac{\begin{bmatrix} \text{Total number of claims closed during the period with full payment beyond 60 days } (\Sigma\ 3{-}83 \text{ through } 3{-}86)+ \\ \text{Total number of claims closed during the period with partial payment beyond 60 days } (\Sigma\ 3{-}89 \text{ through } 3{-}92) \end{bmatrix}}{[\text{Total number of claims during the period with full and partial payment closed over all durations } (\Sigma\ 3{-}81 \text{ through } 3{-}92)]} \right)$$

Ratio 3.

Non-renewals to policies in force

$$\left(\frac{[\text{Number of company initiated policy/certificates non-renewals during the period } (2\text{-}46+2\text{-}47)]}{[\text{Number of policies/certificates in force during the period } (\Sigma\ (2-28 \text{ through } 2-37)]} \right)$$

Ratio 4.

Cancellations during "Right to Examine and Return Policy" period

$$\left(\frac{[\text{Number of policies/certificates returned during the period under Right to Examine}(2-38\ +\ 2-39)]}{[\text{Total number of policies issued during the period } (2-49\ +\ 2-50)]} \right)$$

Ratio 5.

Cancellations/terminations at the policy/certificate-holder's request

$$\left(\frac{[\text{Number of cancellation/terminations during the period at the policy/certificate}-\text{holder's request } (2-40+2-41)]}{[\text{Total number of cancellation/terminations during the period } (\Sigma 2-40 \text{ through } 2-45)]} \right)$$

Ratio 6.

Lawsuits opened during the period to claims closed without payment

$$\left(\frac{[\text{Number of lawsuits opened during the period } (5-117)]}{[\text{Number of claims closed during the period without payment } (3-77)]} \right)$$

Ratio 7.

Percentage of lawsuits closed with consideration for the consumer

$$\left(\frac{[\text{Number of lawsuits closed with consideration for consumer } (5-120)]}{[\text{Number of lawsuits closed during the period } (5-118)]} \right)$$

Pet Continued
Ratio 8.
The number of complaints received directly from any entity other than the DOI per 1,000 policies in-force during the period

$$\left(\frac{[\text{Number of complaints received directly from any person or entity other than the DOI } (5-115)]}{([[\text{Number of policies/certificates in force during the period } (\Sigma\,(2-28 \text{ through } 2-37)]] \div 1{,}000)}\right)$$

Non-Public Ratios
Ratio 9.
The number of claims closed with partial payment compared to the total number of claims closed

$$\left(\frac{[\text{Number of claims closed with partial payment during the period } (3-72)]}{[\text{Number of claims closed during the period } (3-68)]}\right)$$

Ratio 10.
The number of claims closed with full payment compared to the total number of claims closed

$$\left(\frac{[\text{Number of claims closed with full payment during the period } (3-69)]}{[\text{Number of claims closed during the period } (3-68)]}\right)$$

Ratio 11.
Percentage of claims unprocessed at the end of the period

$$\left(\frac{\begin{bmatrix}\text{Number of claims open at the beginning of period } (3-66)\\ +\text{ Number of claims opened during period } (3-67)\\ -\text{ Number of claims closed during the period } (3-68)\end{bmatrix}}{\begin{bmatrix}\text{Number of claims open at the beginning of period } (3-66)\\ +\text{ Number of claims opened during the period } (3-67)\end{bmatrix}}\right)$$

Ratio 12.
The number of claims closed without payment beyond 60 days compared to the total number of claims closed without payment

$$\left(\frac{[\text{Total number of claims closed during the period without payment beyond 60 days } (\Sigma\,3-95 \text{ through } 3-98)]}{[\text{Total number of claims closed during the period without payment over all durations } (\Sigma\,3-93 \text{ through } 3-98)]}\right)$$

Ratio 13.
Pre-existing condition - closed without payments to total claims closed without payment

$$\left(\frac{[\text{Number of claims closed during the period without payment due to pre}-\text{existing condition exclusion } (3-100)]}{[\text{Number of claims closed during the period without payment } (3-77)]}\right)$$

Pet Continued

Ratio 14.
Ineligibility - closed without payments to total claims closed without payment

$$\left(\frac{[\text{Number of claims closed during the period without payment due to ineligibility } (3-99)]}{[\text{Number of claims closed during the period without payment } (3-77)]}\right)$$

Ratio 15.
Waiting period - closed without payments to total claims closed without payment

$$\left(\frac{[\text{Number of claims closed during the period without payment due to waiting period } (3-101)]}{[\text{Number of claims closed during the period without payment } (3-77)]}\right)$$

Ratio 16.
Maximum benefit limit - closed without payments to total claims closed without payment

$$\left(\frac{[\text{Number of claims closed during the period without payment due to maximum benefit limit } (3-102)]}{[\text{Number of claims closed during the period without payment } (3-77)]}\right)$$

Ratio 17.
Less than deductible - closed without payments to total claims closed without payment

$$\left(\frac{[\text{Number of claims closed during the period without payment due to claim amount less than deductible } (3-103)]}{[\text{Number of claims closed during the period without payment } (3-77)]}\right)$$

Ratio 18.
Inadequate documentation - closed without payments to total claims closed without payment

$$\left(\frac{[\text{Number of claims closed during the period without payment due to inadequate documentation } (3-104)]}{[\text{Number of claims closed during the period without payment } (3-77)]}\right)$$

Ratio 19.
Hereditary disorder exclusion - closed without payments to total claims closed without payment

$$\left(\frac{[\text{Number of claims closed during the period without payment due to hereditary disorder exclusion } (3-105)]}{[\text{Number of claims closed during the period without payment } (3-77)]}\right)$$

Market Conduct Annual Statement Ratios 2026

Pet Continued

Ratio 20.
Congenital anomaly or disorder exclusion - closed without payments to total claims closed without payment

$$\left(\frac{[(\text{Number of claims closed during the period without payment due to congenital anomaly or disorder exclusion } (3-106)]}{[\text{Number of claims closed during the period without payment } (3-77)]}\right)$$

Ratio 21.
Chronic condition exclusion - closed without payments to total claims closed without payment

$$\left(\frac{[\text{Number of claims closed during the period without payment due to chronic condition exclusion } (3-107)]}{[\text{Number of claims closed during the period without payment } (3-77)]}\right)$$

Ratio 22.
Other reasons - closed without payments to total claims closed without payment

$$\left(\frac{[\text{Number of claims closed during the period without payment due to other reasons } (3-108)]}{[\text{Number of claims closed during the period without payment } (3-77)]}\right)$$

Ratio 23.
Inadequate documentation - closed with partial payments to total claims closed with partial payment

$$\left(\frac{[\text{Number of claims closed during the period with partial payment due to inadequate documentation } (3-110)]}{[\text{Number of claims closed during the period with partial payment } (3-72)]}\right)$$

Ratio 24.
Maximum benefit limit - closed with partial payments to total claims closed with partial payment

$$\left(\frac{[\text{Number of claims closed during the period with partial payment due to maximum benefit limit } (3-109)]}{[\text{Number of claims closed during the period with partial payment } (3-72)]}\right)$$

Ratio 25.
Other reasons - closed with partial payments to total claims closed with partial payment

$$\left(\frac{[\text{Number of claims closed during the period with partial payment due to other reasons } (3-111)]}{[\text{Number of claims closed during the period with partial payment } (3-72)]}\right)$$

Ratio 26.
Percentage of policies in-force during the period that provided accident-only coverage

$$\left(\frac{[\text{Number of policy/certificates in}-\text{force during the period that included accident}-\text{only coverage } (2-28 + 2-29)]}{[\text{Number of policies/certificates in force during the period } (\Sigma\ (2-28 \text{ through } 2-37)]}\right)$$

Pet Continued

Ratio 27.
Percentage of policies in-force during the period that provided illness-only coverage

$$\left(\frac{[\text{Number of policy/certificates in} - \text{force during the period that provided illness} - \text{only coverage } (2-30\ +\ 2-31)]}{[\text{Number of policies/certificates in force during the period } (\Sigma\ (2-28 \text{ through } 2-37)]}\right)$$

Ratio 28.
Percentage of policies in-force during the period that included accident and illness coverage

$$\left(\frac{[\text{Number of policy/certificates in} - \text{force during the period that included accident and illness coverage } (2-32\ +\ 2-33)]}{[\text{Number of policies/certificates in force during the period } (\Sigma\ (2-28 \text{ through } 2-37)]}\right)$$

Ratio 29.
Percentage of policies in-force during the period that included wellness coverage (other than a wellness only policy)

$$\left(\frac{[\text{Number of policy/certificates in} - \text{force during the period that included wellness coverage } (2-34\ +\ 2-35)]}{[\text{Number of policies/certificates in force during the period } (\Sigma\ (2-28 \text{ through } 2-37)]}\right)$$

Ratio 30.
Percentage of policies in-force during the period that included wellness as an insurance benefit (and did not cover accident and/or illness)

$$\left(\frac{[\text{Number of policy/certificates in} - \text{force during the period that included wellness as an insurance benefit } (2-36\ +\ 2-37)]}{[\text{Number of policies/certificates in force during the period } (\Sigma\ (2-28 \text{ through } 2-37)]}\right)$$

Ratio 31.
Applications denied for health status or condition to total applications received

$$\left(\frac{[\text{Number of applications denied for health status or condition during the period } (2-61)]}{[\text{Number of applications received during the period } (2-60)]}\right)$$

Ratio 32.
Percentage of policies/certificates issued with a pre-existing condition exclusion

$$\left(\frac{[\text{Number of policies/certificates issued with a pre} - \text{existing condition exclusion during the period } (2-64)]}{[\text{Total number of policies issued during the period } (2-49\ +\ 2-50)]}\right)$$

Ratio 33.
Average Dollars of Commission Per Policy/Certificate

$$\left(\frac{\begin{bmatrix}\text{Commissions incurred during the period } (4-113) - \\ \text{Unearned commissions returned to company during the period } (4-114)\end{bmatrix}}{[\text{Total number of policies issued during the period } (2-49\ +\ 2-50)]}\right)$$

Pet Continued

Ratio 34.
Percentage Commissions to Written Premium

$$\left(\frac{\left[\begin{array}{c}\text{Commissions incurred during the period } (4-113)- \\ \text{Unearned commissions returned to company during the period } (4-114)\end{array}\right]}{[\text{Direct written premium during the period } (2-57)]}\right)$$

Ratio 35. Lawsuits to Policies/Certificates in force during the period

$$\left(\frac{[\text{Number of lawsuits opened during the period } (5-117)]}{[\text{Number of policies/certificates in force during the period } (\Sigma\,(2-28\text{ through }2-37)]}\right)$$

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

$$\left(\frac{\begin{array}{c}\text{Number of claims open at the beginning of period } (52) \\ +\text{ Number of claims opened during period } (53) \\ -\text{ Number of claims closed with payment } (54) \\ -\text{ Number of claims closed without payment } (55)\end{array}}{\begin{array}{c}\text{Number of claims open at the beginning of period } (52) \\ +\text{Number of claims opened during the period } (53)\end{array}}\right)$$

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

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

Private Flood Continued

Ratio 5.

Company-initiated cancellations over 60 days to policies in force

$$\left(\frac{[\text{Number of company-initiated cancellations that occur 60 days or more after the effective date (80 and 81)}]}{[\text{Number of private flood policies or endorsements in force at the end of the reporting period (73)}]}\right)$$

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

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

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

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

Ratio 2.

Percentage of claims unprocessed at the end of the period

$$\left(\frac{\begin{array}{c}\text{Number of claims open at the beginning of period} + \text{Number of claims opened during period} \\ -\text{Number of claims closed with payment} - \text{Number of claims closed without payment}\end{array}}{\text{Number of claims open at the beginning of period} + \text{Number of claims opened during the period}}\right)$$

Property & Casualty (Private Passenger Auto & Homeowner) Continued
Ratio 3.
Percentage of claims paid beyond 60 days

$$\left(\frac{[\text{Total number of claims settled beyond 60 days}]}{[\text{Total number of claims settled for all durations}]}\right)$$

Ratio 4.
Non-renewals to policies in force

$$\left(\frac{[\text{Number of non} - \text{renewals}]}{[\text{Number of policies in-force}]}\right)$$

Ratio 5.
Cancellations over 60 days to policies in force

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

Ratio 6.
Cancellations under 60 days to new policies issued

$$\left(\frac{[\text{Number of cancellations that occur in the first 59 days after effective date}]}{[\text{Number of new policies issued}]}\right)$$

Ratio 7.
Suits opened during the period to claims closed without payment

$$\left(\frac{[\text{Number of suits open during the period}]}{[\text{Number of claims closed without payment}]}\right)$$

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

$$\left(\frac{[\text{Number of claim denied, rejected or returned } (89)]}{\begin{bmatrix}[\text{Number of claims pending at beginning of period (87) + Number of claims received (88)}] \\ \text{- Number of claims pending at end of period (99)}\end{bmatrix}}\right)$$

Market Conduct Annual Statement Ratios 2026

Short-Term Limited Duration Insurance Continued

Ratio 2.
Pre-existing Condition Denials to Total Denials

$$\left(\frac{[\text{Number of claim denied, rejected or returned as subject to pre}-\text{existing condition exclusion }(94)]}{[\text{Number of claims denied, rejected or returned }(89)]}\right)$$

Ratio 3.
Prior Authorizations Denied to the Total Number of Prior Authorizations Received During the Period

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

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

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

Ratio 5.
Cancellations During Free Look Period

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

Ratio 6.
Claims Appeals per Claims Denied, Rejected, and Returned

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

Ratio 7.
Claims Appeals In which the Company Claims Decision is Overturned

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

Market Conduct Annual Statement Ratios 2026

Short-Term Limited Duration Insurance Continued
Ratio 8.
Number of Complaints received per 1,000 Policies/Certificates In-Force During the Period

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

Ratio 9.
Percentage of Lawsuits Closed with Consideration for the Consumer

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

Ratio 10.
Lawsuits per 1,000 Policies/Certificates in Force During the Period.

$$\left(\frac{[\text{Number of lawsuits opened during the period (116)}]}{[(\text{Policies/certificates in force at beginning (48)} + \text{Policies/certificates issued (51)})/1000]} \right)$$

Short-Term Limited Duration Insurance Continued
Ratio 11.
Renewal/Reissue Applications Denied to Total Renewal/Reissue Applications

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

Travel
Ratio 1.
The number of claims closed without payment compared to the total number of claims closed

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

Ratio 2.
Percentage of claims unprocessed at the end of the period

$$\left(\frac{\begin{array}{c}\text{Number claims open at the Beginning of period (17)} + \text{Number claims opened during period (18)} \\ - \text{Number of claims closed with payment (19)} - \text{Number of claims closed without payment (20)}\end{array}}{\text{Number of claims open at the Beginning of period (17)} + \text{Number of claims opened during the period (18)}} \right)$$

Travel Continued

Ratio 3.

Percentage of claims paid beyond 30 days

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

Ratio 4.

The percentage of lawsuits closed with consideration for the consumer

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