



Draft date: 3/23/26

*2026 Spring National Meeting
San Diego, California*

THIRD-PARTY DATA AND MODELS (H) WORKING GROUP

Monday, March 23, 2026

11:45 a.m. – 12:45 p.m.

Manchester Grand Hyatt—Grand Hall C—Level 1

ROLL CALL

Jason Lapham, Chair	Colorado	Phil Vigliaturo	Minnesota
Nicole Crockett, Vice Chair	Florida	Jo A. LeDuc/Brad Gerling	Missouri
Charles Hale/Richard Fiore	Alabama	Gennady Stolyarov/ Brandon Rocchio	Nevada
Alex Romero/Molly Nollette/ Chad Bennett	Alaska	Christian Citarella	New Hampshire
Tom Zuppan/ Lori Dreaver Munn	Arizona	Kaitlin Asrow	New York
Chandara K. Phanachone	California	John Arnold/Colton Schulz/ Tyler N. Erickson	North Dakota
George Bradner/ Wanchin Chou	Connecticut	Stewart Trego/Matt Walsh	Ohio
Lance Hirano/ Kathleen Nakasone	Hawaii	David Dahl/Ying Liu/ Eric Bredeson	Oregon
Weston Trexler/Shannon Hohl	Idaho	Michael McKenney	Pennsylvania
Shannon Whalen	Illinois	Beth Vollucci/ Matthew Gendron	Rhode Island
Doug Ommen/Jordan Esbrook	Iowa	Andreea Savu	South Carolina
Julie Holmes	Kansas	Nicole Elliot	Texas
Caleb Malone	Louisiana	Rosemary Raszka	Vermont
Sandra Darby	Maine	Jessica Baggarley/Eric Lowe	Virginia
Raymond A. Guzman	Maryland	Curt Kwak	Washington
Jackie Horgan	Massachusetts	Timothy Cornelius	Wisconsin

NAIC Committee Support: Kris DeFrain/Scott Sobel

AGENDA

1. Consider Adoption of its Feb. 26 Minutes—*Jason Lapham (CO)* Attachment A
2. Discuss Potential Revisions to the Third-Party Regulatory Framework Attachment B
—*Jason Lapham (CO) and Nicole Crockett (FL)*
 - A. Registration
 - B. Governance
 - C. Pricing and Underwriting



3. Discuss Any Other Matters Brought Before the Working Group
—*Jason Lapham (CO)*
4. Adjournment

Draft: 3/16/26

Third-Party Data and Models (H) Working Group
Virtual Meeting
February 26, 2026

The Third-Party Data and Models (H) Working Group of the Innovation, Cybersecurity, and Technology (H) Committee met Feb. 26, 2026. The following Working Group members participated: Jason Lapham, Chair (CO); Nicole Crockett, Vice Chair (FL); Alex Romero and Molly Nollette (AK); Lori Dreaver Munn (AZ); Ken Allen and Esteban Mendoza (CA); Wanchin Chou (CT); Doug Ommen, Julie Pearce, and Jordan Esbrook (IA); Weston Trexler (ID); Julie Holmes (KS); Caleb Malone (LA); Jackie Horrigan and Caleb Huntington (MA); Raymond A. Guzman (MD); Sandra Darby (ME); Phil Vigliaturo (MN); Brad Gerling (MO); John Arnold (ND); Christian Citarella (NH); Gennady Stolyarov and Brandon Rocchio (NV); Kevin Yan (NY); Matt Walsh (OH); Beth Vollucci and Matthew Gendron (RI); Andreea Savu (SC); Nicole Elliott (TX); Jessica Baggarley (VA); Mary Block (VT); and Timothy Cornelius (WI).

1. Adopted its 2025 Fall National Meeting Minutes

Crockett made a motion, seconded by Darby, to adopt the Working Group's Dec. 9, 2025, minutes (*see NAIC Proceedings – Fall 2025, Innovation, Cybersecurity, and Technology (H) Committee, Attachment Four*). The motion passed unanimously.

2. Discussed the Third-Party Regulatory Framework and Comments Submitted

Lapham stated that following the Working Group's Oct. 29, 2025, meeting, a small drafting subgroup consisting of regulators from Colorado, Florida, Iowa, Pennsylvania, and Vermont produced the first draft of the regulatory framework, which was shared during the 2025 Fall National Meeting. The framework applies across all lines of business (i.e., property/casualty [P/C] and life and health) and requires third parties to register with state departments of insurance (DOIs) if they meet the definition of a third-party data and model vendor and their data and/or models are to be used in an insurer's operations, which for now include pricing, underwriting, claims, utilization reviews, marketing, and fraud detection that have a direct consumer impact. To receive registered status, the third party would provide information about their governance program and agree to provide regulators with access to their data and models. Third parties would be afforded state confidentiality or trade secret status in the same way states apply their laws to insurers. In addition to registration, states may utilize a discretionary filing process if they wish to receive filings of data and models.

Lapham restated that the goals of the framework are to ensure regulators have timely access to information about third-party data and models used by an insurance company, and to confirm that third parties maintain strong governance practices to protect insurers and consumers. The framework was built in accordance with the concept of proportionality. Instead of a full licensure process, the drafting group proposed a registration process, which would give regulators the information they need without requiring a third party to become a licensed entity in each state.

The registration process consists of vendors registering, sharing details about their governance programs, and agreeing to provide regulators with access to relevant data and models. Once governance is approved, the vendor will then be officially registered by the state. From that point, insurers can use those models and data in the specific insurance company functions, unless a model or dataset is disapproved. In addition to registration, states may utilize a discretionary filing process if they wish to receive filings of data and models without reviewing every

dataset or model. For operations without direct consumer impact, existing insurer requirements apply as usual, and this framework would not apply.

Governance standards are outlined in the framework and would be developed over time. For third-party models, documentation includes the purpose, assumptions, inputs, limitations, performance metrics, and validation processes. For third-party data, documentation includes accuracy, completeness, timeliness, representativeness, auditable lineage, and quality controls. Third parties will be provided state confidentiality or trade secret status in the same way states apply their laws to insurers. Insurers will remain fully responsible for compliance. Registration of third parties would not relieve insurers of obligations. Insurers must validate model suitability, secure contractual access to necessary information, and meet all rating, underwriting, and other requirements—even when using third-party tools.

Lapham stated that the Working Group received comment letters from 23 interested parties during the exposure period. Overall, commenters generally supported responsible artificial intelligence (AI) oversight and consumer protection, but they believed the draft framework has flaws and requires revisions.

Lapham provided a summary of the comments received from interested parties of the framework as follows: 1) there was general support for consumer protection, but preference was for a risk-based, regulation; 2) oversight should focus on outcomes rather than processes; 3) many commenters had broad opposition to mandatory vendor registration requirements, citing concerns that it would reduce innovation, reduce competition, increase costs, and create operational and compliance burdens; 4) there was preference for voluntary vendor registration instead of mandatory requirements to encourage participation, improve transparency, and avoid regulatory burden; 5) there were concerns about legal authority and enforceability; 6) clarification should be made on the legal basis, enforcement mechanisms, and liability allocation; 7) concerns included confidentiality/trade secret protection, which could discourage participation; 8) concerns over the lack of clarity and overly broad scope, in particular that some terms are undefined, too broad, and/or ambiguous (e.g., “data,” “model,” “third-party vendor,” “direct consumer impact”); 9) concerns that the framework might cover basic software tools, public data sources, routine operational tools; 10) concerns about multistate regulatory differences; 11) existing oversight is currently sufficient, as insurers must currently conduct vendor due diligence, maintain governance frameworks, comply with the bulletin on the use of AI by insurers, and periodically undergo regulatory examinations; and 12) interested parties suggested an alternative approach of focusing on regulating insurers’ use of vendors.

Crockett commented that in light of the concerns raised, the Working Group does not intend to disturb the marketplace and will take the comments into consideration.

Chou commented that a senior manager or chief executive officer (CEO) may not have sufficient credentials to sign off on an attestation, but that a chief actuary or a chief data scientist would have the proper credentials.

Stolyarov commented that government data “pass-throughs” should be included because it is possible that insurance companies use the data outside of its original intent. He cited an example where a vendor provided auto violation information for insureds from the Nevada Department of Motor Vehicles (DMV) and other state DMVs to the Nevada DOI, but other states have different laws for commercial violations for other vehicles, which resulted in insurers using this data without understanding what would be chargeable under Nevada law. Thus, merely being a government “pass-through” of data should not absolve a vendor from scope.

Darby commented that: 1) the Maine Bureau of Insurance has concerns that the draft framework does not make it clear that the states will continue to require third-party models to be filed and approved prior to use; 2) the

section about third-party data should include how consumers can correct data errors; and 3) discussion needs to be held on where catastrophe (CAT) models fit into the framework.

Huntington commented that this discussion seems to focus more on P/C insurance than on health insurance, especially regarding utilization review. Lapham responded that these areas have been where the Working Group has seen the greatest use of third-party models and automation.

J.P. Wieske (American InsurTech Council—AITC) commented that, considering the large number of vendors that work with insurers, the AITC is concerned about the cost of compliance across all 50 states. Wieske stated that a consistent approach across states makes more sense, especially for smaller insurance companies, such as the Interstate Insurance Product Regulation Commission's (Compact) or the National Insurance Producer Registry's (NIPR's) licensing and registration processes, rather than 50 individual state vendors. Commissioner Ommen responded that the insurance industry is starting to see the promise of external third-party models. He said he hopes that small companies can rely on third-party models and technologies and that they are available across the market by making this registration process available to all companies.

Scott Harrison (AITC) commented that the most efficient way for small to mid-size companies to have access to technology and innovation is for insurance companies to conduct their own due diligence on third-party systems. Insurance companies should have good and robust governance policies. Harrison said the AITC believes the scope should be limited to P/C rating and underwriting, and the other use cases should be put off for another day. He urged states to learn from those already doing this.

Peter R. Kochenburger (Individual Consumer Advocate) questioned how the framework would stifle innovation. He stated that it is the insurance company's responsibility to ensure beneficial innovation, which does not mean sweeping away consumer protections but rather adapting them to future situations. The concern should be ensuring that regulators are able to perform their same oversight protection functions, not to reduce them.

Kristin Abbott (American Property Casualty Insurance Association—APCIA) commented that the proposed framework is unworkable, overly broad, and will likely produce outcomes that are counter to its objectives by limiting access to important tools, slowing innovation, and harming consumers. She commented that it will restrict access to third-party technologies and said she was concerned that vendors not exclusively focused on U.S. insurers would be unwilling or unable to comply, resulting in fewer technologies, slower innovation, and increased costs. Abbott further commented that: 1) the scope and definitions are too broad and risks sweeping in too many technologies and publicly available information; 2) the APCIA is concerned about state authority to regulate vendors; 3) the vendor regulation is not feasible for many vendors and could cut insurers off from their capabilities; and 4) confidentiality protections could fragment the national market. She urged the Working Group to address the foundational risks that are not currently addressed by the existing regulatory framework and refine the scope accordingly.

LaCosta Wix (AHIP) questioned state authority over third-party vendors and said she was concerned about the protection of confidential information and the effect of third-party registration on existing contractual relationships. Wix stressed the importance of consistency and application across states.

Lindsey Stephani (National Association of Mutual Insurance Companies—NAMIC) commented that: 1) the scope should be matched to the identified issue, which is specific to pricing and underwriting model vendors (not data); and 2) rather than a new framework, there might be some existing regulatory frameworks the Working Group could draw from. She mentioned that some jurisdictions allow non-licensed entities to file their models in the System for Electronic Rates & Forms Filing (SERFF), and she encouraged more discussion on this topic. She

suggested that the Working Group focus on facilitating access to information rather than registration, and she urged the Working Group to preserve confidentiality provisions.

Karin Gyger (American Council of Life Insurers—ACLI) commented that compulsory third-party registration is not necessary and recommended narrowing the scope to model vendors focused on providing models used for pricing, underwriting, and claims functions, but excluding data vendors in order to reduce complexity and improve consistency. She encouraged a voluntary, optional, registration-based framework where a vendor may elect to seek registration, because the ACLI is concerned that mandatory registration can stifle innovation, reduce participation, and create operational challenges.

Laura Panesso (Insurance Services Office [ISO]/Verisk) commented that limiting the scope to underwriting and rating will provide both benefits and efficiencies, and the framework should focus on activities with the greatest direct consumer impact. She added that although underwriting and rating are similar in nature, claims, marketing, and fraud detection come with additional and unique considerations, such as protection of fraud investigation activity, the wide range of claim types across life, health, and P/C, and even the diversity of marketing methods that could take considerable resources to address. Narrowing the scope to underwriting and rating also aligns with the current regulatory framework for product filings and can potentially leverage efficiencies within the current system. There are likely hundreds, potentially thousands, of third-party data and model vendors, and focusing on underwriting and rating will potentially limit the number of vendors required to register and potentially file, ultimately reducing the burden on regulators. Panesso reinforced the importance of confidentiality and stated that developing a model can take months or even years, and third-party model vendors invest considerable resources in developing their products. Protection of intellectual property supports innovation while providing transparency to regulators. The models, if made public through the filing process, could prove detrimental to the third-party vendors' businesses and potentially stifle innovation. Not all jurisdictions provide for confidentiality within the product filing framework, and ISO/Verisk encourages all jurisdictions to consider confidentiality protections beyond those that govern the traditional product filings.

Huntington commented that it seems like the discussion is focused more on P/C than on health, especially with regard to utilization review. Lapham agreed and added that utilization review on the health side is an area where the Working Group has seen the use of third-party models and automation of certain claims practices, and regulators have heightened concerns regarding the use of those tools in that space as well.

Lapham reiterated that the framework is explicitly designed not to require the submission of every model and every data set, and that it is up to each state's discretion. The amount of information requested for review is at the discretion of each jurisdiction.

Eric Ellsworth (Consumers' Checkbook/Center for the Study of Services) commented that it would be a mistake to create too many constraints on the scope of this framework too early in the process. Limitations on pricing and underwriting are more specific to P/C insurance than to health insurance. There are many use cases where risks can emerge that are not obvious up front. If a company contracts with a vendor providing poor-quality data, for example, from a large online data vendor for marketing or other uses, then large problems can occur without anyone understanding them. It would be unwise to limit the scope without considering those use cases and the serious risks. Additionally, a compulsory, lightweight registration process is not particularly burdensome, as it mimics client onboarding processes of filling out a registration form. Lastly, ultimately, there needs to be good governance on both sides, and diligence needs to be performed on governance by both the insurer and the regulator. In a startup environment, it is not always easy to know the risks. Part of the role of regulation is to move forward in this area, which ultimately accelerates product development, as seen in many other regulated industries. He said that good and early regulatory oversight directed toward the improvement of mitigating risks

that might not otherwise have been considered enables innovation. It would be unwise at this moment to limit the framework to specific insurer activities without thinking more broadly.

Erica Everson (Automotive Education & Policy Institute—AEPI) stated that registering third-party vendors is absolutely necessary. Regulators need the right to review and access third-party vendor software and modeling architecture. That is imperative because if issues are brought to regulators by consumers, the response from the regulatory authority is that they do not have the legislative mandate to be able to investigate how insurers made claims payment actions. She also urged the Working Group not to limit regulatory requirements to underwriting and rating. There is already a lack of transparency regarding insurer P/C mechanisms for determining claims valuations. As far back as 2003, when certain third-party vendors in the auto casualty and claims marketplace wanted to merge, the Federal Trade Commission (FTC) investigated one of the companies that stated that insurers have so much economic power over them that there is no possible way that they could engage in any antitrust activity, and that insurers require them to develop specialty software just for them and for the vendors as well, providing financing of \$500,000–\$600,000 to develop software for the insurers. The relationships between insurers and third-party model and data vendors are not necessarily independent.

Having no further business, the Third-Party Data and Models (H) Working Group adjourned.

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Risk-Based Regulatory Framework for Third-Party Data and Model Vendors

EXECUTIVE SUMMARY

This draft outlines a risk-based regulatory framework for third-party data and model vendors engaged with insurers in functions with direct consumer impact such as pricing, underwriting, claims, utilization reviews, marketing, and fraud detection. The framework aims to enhance regulatory oversight, transparency, and accountability while safeguarding intellectual property and promoting proportionality in compliance requirements.

The purpose of the regulatory framework is to provide regulators with access to third-party data and models used in insurance functions with direct consumer impact and to establish governance standards for model and data integrity, consumer protection, and ongoing monitoring.

Proposed Structure:

Third-party data and model vendors must register with the [state insurance departments] before their models or data may be used by insurers. *(Sufficient time will be provided for the registration process to be completed)*

Registration status will be:

- “Applied” at initial filing of registration, contingent on regulatory review of the materials submitted in support of registration including documentation of a governance program.
- “Applied with governance approval” upon positive assessment of the governance program by the ____ *(state, lead regulator, regulator committee, other)*.
- “Registered” upon the state’s acceptance of the registration and governance approval.

Regulators retain authority to disapprove individual models or data that fail to meet standards. An optional filing process is included.

Governance Standards:

Governance requirements are outlined in the framework. For models, required documentation will consist of the purpose, assumptions, inputs, limitations, performance metrics, and validation processes. For data, required documentation will consist of accuracy, completeness, timeliness, representativeness, auditable data lineage, and quality controls.

**Risk-Based Regulatory Framework for
Third-Party Data and Model Vendors**

Consumer Protection:

Vendors should disclose data usage, allow consumers to access and correct records, and define any limitations of corrections.

REGULATORY FRAMEWORK

I. Purpose and Scope

This framework establishes regulatory oversight of third-party data and model vendors whose models or data are used by insurers in insurance functions with direct consumer impact. The framework acknowledges that while third-party vendors will be subject to limited regulatory jurisdiction, regulators expect sufficient visibility into their models, data, and governance practices to ensure insurers using these models and data comply with state insurance laws.

Oversight is achieved through vendor registration, regulatory access requirements, and a state-specific, discretionary model filing process.

II. Third-Party Data and Model Vendor Definitions

The following are the current working definitions adopted Sept. 26, 2025:

- **“Third-Party”** means any organization, operating independently of any government entity and not otherwise defined as a Licensee, that engages with an insurer to provide data, models, and/or model outputs to the insurer for pricing, underwriting, claims, marketing, and/or fraud detection functions.
- **“Licensee”** means any insurer, producer, advisory or rating organization, third-party administrator, or other similar organization engaged in the business of insurance that is required to be licensed or otherwise authorized to perform insurance-related functions under applicable state law and is subject to examination by the [department of insurance].

III. Principles

A. Regulation with Safeguards

Regulators must determine whether third-party data and models produce outcomes across insurance functions with direct consumer impact such as pricing, underwriting, claims,

Risk-Based Regulatory Framework for Third-Party Data and Model Vendors

anti-fraud measures, and utilization review, that comply with regulatory standards, including those pertaining to unfair trade practices as well as those ensuring that rates are not excessive, inadequate, or unfairly discriminatory.

For regulators to perform necessary analysis to make such determinations, third-party data and model vendors must provide sufficient information on data sources, maintenance, model design, training data, and assumptions, with confidentiality protections equivalent to those provided to insurers. These confidentiality safeguards facilitate transparency, enabling regulators to assess model purpose, logic, and outputs and identify potential consumer harm or compliance concerns.

B. Regulatory Proportionality

Oversight scales with the materiality, complexity, and consumer impact of the third party's role. Insurance functions with direct consumer impact that use third-party data and models—such as pricing, underwriting, claims, utilization reviews, marketing, and fraud detection—may require more extensive review and documentation. Proportionality directs regulatory focus to areas with the greatest potential for consumer harm or compliance risk.

C. Accountability

Third-party data and model vendors are responsible for data integrity as well as the accuracy and reliability of model outputs. Insurers remain ultimately accountable for all outcomes derived from the use of third-party data and models and for verifying that activities with direct consumer impact or compliance risk meet regulatory requirements. Accountability requires insurers to maintain governance, controls, and monitoring across all functions, supported by third-party data and model vendors providing transparent documentation and cooperation with regulatory oversight.

IV. Third-Party Model Vendor Registration

Third-party model vendors must register with the [state insurance department or a national registration database] before their model(s) may be used by licensed insurers in insurance functions with direct consumer impact. Registration creates a standardized framework and ensures vendors maintain robust governance standards and controls.

A. Information Provided at Registration

1. Corporate and Contact Information

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- a. Legal entity, ownership structure, responsible officers, and states where model(s) are deployed or currently under review for deployment.
2. Model Governance Program Documentation
 - a. Documentation demonstrating a comprehensive governance program that includes:
 - 1) Model development standards and testing protocols
 - 2) Data governance and provenance controls
 - 3) Validation and monitoring
 - 4) Change-management procedures and processes including version control, updates, and approvals
 - 5) Roles, responsibilities, and internal oversight
 - 6) Defect reporting and remediation processes
 3. Agreement to Regulatory Access
 - a. Vendors must agree to provide regulators with access, upon request, to information such as that described in the *NAIC Model Review Manual and the Catastrophe Modeling Primer*, including the following:
 - 1) Model documentation
 - 2) Input and output specifications
 - 3) Validation, performance, and any fairness/bias testing results
 - 4) Change logs and audit trails
 - 5) Other information reasonably necessary for regulatory evaluation

B. Annual Attestation

A senior officer must attest that the governance program is implemented, effective, and applied to all models with direct consumer impact used by licensed insurers, complies with applicable insurance laws and regulations in [state], and adheres to third-party model vendor governance program requirements (*to be developed*). The attestation should be provided to each [state insurance department].

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Failure to provide access may result in the model(s) being disallowed for insurer use in the state.

V. Discretionary Third-Party Model Vendor Filing Process

States retain discretion to require direct filing of a third-party model when regulatory evaluation is necessary to ensure compliance and consumer protection. Filing is **not automatically assumed** and is rather triggered by risk, consumer impact, and specific regulatory needs. States may modify the documentation required to be submitted depending on specific needs and level of risk.

A. Considerations for Filing a Model

1. A state may request a model to be filed for review based on any of the following:
 - a. Level of consumer impact or potential harm
 - b. Novel or opaque model methods
 - c. Limitations of a vendor's model governance program
 - d. Complaint or market conduct indicators
 - e. Emerging risks, external risks, or supervisory priorities
 - f. Transparency to assess compliance with rating or unfair trade practices statute(s).

B. Filing Requirements

1. Model summary and intended use
 - a. Business purpose, functions, and consumer-impact
2. High-level methodology description
 - a. Key factors, relationships, modeling approach, and version
3. Inputs and outputs
 - a. Required data elements, use of sensitive attributes or potential proxies, and outputs provided to insurers
4. Validation and performance documentation

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- a. Accuracy, calibration, and any fairness/bias testing results
- b. Monitoring and performance degradation controls
5. Explainability documentation
 - a. How insurers can interpret model outputs
 - b. Primary drivers of predictions or classifications
6. Change-management summary
 - a. Version history, material changes since last version, anticipated updates

C. Confidentiality Protections

All third-party model filings are subject to the same protections afforded to insurers for confidential, proprietary, and trade-secret information.

D. Filing Review

When a model is submitted, the [state insurance department] may perform the following:

1. Completeness Review
2. Technical, actuarial, and compliance review assessment
 - a. Fitness for intended use
 - b. Accuracy and reliability
 - c. Fairness
 - d. Adequacy of governance, controls, and monitoring
3. Disposition
 - a. Approval for use
 - b. Conditional use
 - c. Disapproval for use

Risk-Based Regulatory Framework for Third-Party Data and Model Vendors

VI. Third-Party Data Vendor Registration

Third-party data vendors must register with the [state insurance department or a national registration database] before their data may be used by a licensed insurer in insurance functions with direct consumer impact. Registration creates a standardized framework and ensures vendors maintain robust governance standards and controls.

A. Information Provided at Registration

1. Corporate and Contact Information
 - a. Legal entity, ownership structure, responsible officers, and states where data is deployed or currently under review for deployment.
2. Data Governance Program Documentation
 - a. Documentation demonstrating a comprehensive governance program that includes:
 - 1) Data governance and provenance controls
 - 2) Roles, responsibilities, and internal oversight
 - 3) Process for identification and remediation of missing or incomplete data
3. Agreement to Regulatory Access
 - a. Vendors must agree to provide regulators with access, upon request, to the following:
 - 1) Data documentation
 - 2) Validation, performance, and any fairness/bias testing results
 - 3) Change logs and audit trails
 - 4) Other information reasonably necessary for regulatory evaluation

B. Annual Attestation

A senior officer must attest that the governance program is implemented, effective, and applied to all data used by licensed insurers, complies with applicable insurance laws and regulations in [state], and adheres to third-party data vendor governance program requirements (*to be developed*). The attestation should be provided to each [state insurance department].

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VII. Discretionary Third-Party Data Vendor Filing Process

States retain discretion to require a direct filing of third-party data or data documentation when regulatory evaluation is necessary to ensure compliance and consumer protection. Filing is **not automatically assumed** and is rather triggered by risk, consumer impact, and specific regulatory needs. States may modify the documentation required to be submitted depending on specific needs and level of risk.

A. Filing Requirements

1. Data documentation, source, and intended use
2. Business purpose, functions, and consumer impact
3. Accuracy, completeness, and any fairness/bias testing results
4. Explainability documentation
5. Version history, material changes since last version, anticipated updates
6. Whether data is derived or created bespoke for insurers
7. Other information reasonably necessary for regulatory evaluation

B. Confidentiality Protections

All third-party data filings are subject to the same protections afforded to insurers for confidential, proprietary, and trade-secret information.

VIII. Ongoing Oversight of Third-Party Data and Model Vendors

A. Annual registration renewal

Vendors must annually update governance documentation, contact information, and any other required documentation.

B. Material changes notifications

Vendors must notify regulators of material modifications to a dataset or model, including decommissioning of a model. Regulators may request documentation if the changes indicate a significant alteration of model behavior, risk, or consumer impact.

C. Targeted Reviews

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Regulators may request additional information or conduct targeted evaluations if concerns arise regarding model performance, fairness, or lack of sufficient governance or internal controls.

D. Annual Governance Attestation (see above **Information Provided at Registration**)

IX. Insurer Responsibilities

This framework maintains the longstanding principle that insurers are responsible for their own compliance obligations. Insurers must validate model suitability for their book(s) of business, ensure contractual access to necessary information, meet all rating and underwriting requirements, even when using third-party models or data.

Regulatory oversight of third-party data and model vendors **does not reduce insurer accountability**. Insurers remain responsible for the following:

- A. Assessing model suitability for their own data and business use cases
- B. Conducting insurer-level model validation, testing, and monitoring
- C. Ensuring that any data provided by a third-party data vendor is sufficiently complete, accurate, and appropriate for its intended use
- D. Ensuring compliance with rating, underwriting, unfair trade practices, and unfair discrimination laws
- E. Maintaining contacts permitting insurer and regulator access to necessary model or data information