

UTAH ACCIDENT & HEALTH COMPREHENSIVE HEALTH INSURANCE RATE FILING CHECKLIST

(Do not complete this checklist for filing types other than H06, H16 and HOrg02)

At a minimum, include all elements in the table below in the Actuarial Memorandum that is filed with the requested rates.

Data Element	Requirement
1 Purpose of filing	Statement of purpose. Identify the law it is intended to comply with. Provide a general summary of the proposed changes to the base rates and rating factors.
2 Effective Date	The requested effective date of the rate change.
3 Market	Indicate whether the products are sold in the individual, small group, or large group market.
4 Status of Forms	Indicate whether the forms are open to new sales, closed, or a mixture of both. Indicate whether the forms are grandfathered, non-grandfathered, or a mixture of both.
5 Average Rate Increase Requested	The weighted average rate increase being requested. There should be two separate averages; the weighting for one should be based on enrollment, and the weighting for the other should be based on premium volume.
6 Maximum Rate Increase Requested	The maximum rate increase that could be applied to a policyholder based on changes to the base rate and rating factors. (Does not include changes in the demographics of the covered members.)
7 Minimum Rate Increase Requested	The minimum rate increase that could be applied to a policyholder based on changes to the base rate and rating factors. (Does not include changes in the demographics of the covered members.)
8 Benefits	Consumer disclosures required in ACA associated with product.
9 Rate History	24 months of Utah rate history of the policies included in the filing. If nationwide experience is used in developing the rates, provide the rate history separately for Utah and nationwide average.
10 Covered members	Most current membership count available.
11 Member Months	Number of members in force during each month of the base experience period used in the rate development, and each of the two preceding 12-month periods. Provide this in Excel format with any formulas intact. If nationwide experience is used in developing the rates, provide the members in force separately for Utah and nationally.
12 Past Experience	Provide monthly earned premium and incurred claims for the base experience period used in the rate development and each of the two preceding 12-month periods. Provide this in Excel format with any formulas intact. If nationwide experience is used in developing the rates, provide the members in force separately for Utah and nationally.
13 Rate Development	Show base experience used to develop rates, and all adjustments and assumptions applied to arrive at the requested rates. Provide this in Excel format with formulas intact. For less than fully credible blocks, disclose the source of the base experience data used in the rate development and discuss the appropriateness of the data for pricing the policies in
14 Credibility Assumption	If the experience of the policies included in the filing is not fully credible, state and provide support for the credibility formula used in the rate development.
15 Trend Assumption	Show trend assumptions by major types of service as defined by HHS, separately by unit cost, utilization, and in total. Provide the development of the trend assumptions specific to the rate development of the product. Provide this in Excel format with formulas intact.
16 Cost-sharing Changes	Disclose any insurer initiated changes in cost sharing for the plans between the base experience period for rating and the requested effective date. Show how the experience has been adjusted for cost-sharing changes in the rate development. Provide support for the estimated cost impact of the cost-sharing changes.
17 Benefit Changes	Disclose any changes in covered benefits for the plans between the base experience period for rating and the requested effective date. Show how the experience has been adjusted for changes in covered benefits in the rate development. Provide support for the estimated cost impact of the benefit changes.
18 Enrollee Risk Profile	Show the change in enrollee risk profile over time, and show how the experience used in trend development and rate development has been adjusted to account for this change.

19	Plan Relativities	If the rate increase is not uniform for all plan designs, provide support for all changes in plan relativities. Disclose the minimum, maximum, and average impact of the change on policyholders.
20	Rating Factors	Disclose any changes to rating factors, and the minimum, maximum, and average impact on policyholders. Provide support for any changes.
21	Distribution of Rate Increases	Anticipated distribution of rate increases due to changes in base rates, plan relativities, and rating factors. This need not include changes in demographics of the individual or group.
22	Policyholder Anniversary	Distribution of policyholder effective dates.
23	Impact of Prior Years misestimate on current rate increase	The impact of any overestimate or underestimate of medical trend for prior year periods related to the rate increase.
24	Reserve Needs	Provide the claims for the base experience period separately for paid claims, and estimated incurred claims (including claim reserve). Indicate the incurred period used for the base period. Indicate the paid-through date of the paid claims, and provide a basic description of the reserving methodology.
25	Other Administrative Costs	Show the allocated administrative costs in the following categories: - Salaries, wages, employment taxes, and other employee benefits - Commissions - Taxes, licenses, and other fees - Cost containment programs / quality improvement activities - All other administrative expenses - Total Show analogous statistics from the previous filing and provide support for any changes
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31	Medical Loss Ratio	Disclose the projected loss ratio (as calculated under federal MLR guidelines), including the requested rate change. Show the premium, claims, and adjustments separately, with the development of the projected premium and projected claims (if not already provided in the rate development section). Provide this in Excel format with formulas intact. Do not apply any credibility adjustment to this number.
32	Profit Margin/Contribution to Surplus	State the profit margin/contribution to surplus charge included in the proposed rates. Show how this has changed from prior filings, and provide support for any change.
33	Other	Any other information needed to support the requested rates or to comply with Actuarial Standard of Practice No. 8. or other applicable ASOP.
34	Part I Preliminary Justification	Rate Summary Worksheet required under Part I of the Preliminary justification. Provide for <i>all</i> filings (whether or not they are "subject to review" according to ACA guidelines). Provide in Excel format.
35	Part II Preliminary Justification	Provide for all filings at or above the 10% threshold.