



Stephen C. Taylor  
Acting Commissioner

**Health Insurance Rate Filing Procedures**

The Government of the District of Columbia Department of Insurance, Securities and Banking (DISB), Actuarial Analysis Division, only accepts Health rate filings via the National Association of Insurance Commissioner's (NAIC) System for Electronic Rate and For Filings (SERFF).

Health insurance FORM filings should be filed in SERFF separately from Health Insurance RATE filings.

Health insurance rate filings should include the following information as pertinent to the nature of the purpose of the filing:

1. Cover Letter on Company Letterhead (includes)
  - a. Company Name
  - b. NAIC Company Code
  - c. Unique Company Filing Number (assigned by Company)
  - d. Date Submitted
  - e. Proposed Effective Date
  - f. Type of Product
  - g. Individual or Group  
Group Size
  - h. Scope and Purpose of Filing
  - i. Indication Whether Initial Filing or Change
  - j. Indication if no DC Policyholders
  - k. Overall Premium Impact of Filing on DC Policyholders
  - l. Contact information, Name, Telephone, Fax, e-mail
  - m. Signature and Date
2. Certificate of Authority to File, if applicable (*third party preparation*)
3. Actuarial Memorandum (includes)
  - a. Description of Benefits
  - b. Renewability Provision
  - c. Applicability (Closed/Open Block)
  - d. Marketing Method
  - e. Underwriting Method
  - f. Issue Age Limits
  - g. Premium Basis
  - h. Nature of Rate Change and Proposed Rate/Methodology Change
  - i. For Each Change, Indication if New or Modified
  - j. For Each Change Comparison to Status Quo
  - k. Summary of How Each Proposed Modification Differs from Corresponding Current/Approved Rate/Methodology

- l. Summary of Each Proposed New Rule
  - m. Overall Premium Impact of Filing on DC Policyholders
  - n. Filed Minimum Required Loss Ratio
  - o. Interest Rate Assumptions
  - p. Trend Assumptions
  - q. Persistency
  - r. Long Term Care Insurance filings should comply with DISB bulletin 03-PPI-005- 11/24 (see note with link at bottom)
    - i. Lapse Rate (persistency) Assumptions
    - ii. Mortality Assumptions
    - iii. Morbidity Assumptions
    - iv. Moderately Adverse Assumption Justification
  - s. Actuarial Certification
4. District of Columbia Loss Ratio Analysis (*Include Countrywide Loss Ratio Analysis separately, if applicable*)
- a. Evaluation Period (Experience Year, etc.)
  - b. Earned Premium
  - c. Claims
  - d. Number of Claims
  - e. Loss Development Factors
  - f. Loss Ratio Demonstration
  - g. Permissible Loss Ratio (includes)
    - i. Expenses
    - ii. Profit & Contingency Provision
  - h. Credibility Analysis (if applicable)
    - i. DC Credibility
    - ii. Countrywide Credibility
    - iii. Complimentary Credibility
  - i. Determination of Overall Rate Change
5. District of Columbia and Countrywide Experience
- a. Earned Premium
  - b. Number of Contracts/Policyholders
  - c. History of Past Rate Changes

6. Rate Tables

Before submitting Health rate filings, please review required laws, mandates and bulletins.

Insurance laws can be found in the District of Columbia Code 2001, Edition, Division V, Title 31, Insurance and Securities. Bulletins are accessible via <http://www.disb.dc.gov>.

Mandates are listed in the D.C. Code, Title 31, Volume 16. A list can be obtained by request. Other requirements are listed in the District of Columbia DCMR 26.

No filing fee is required.

Please contact Efren Tanhehco, Supervisory Actuary at (202) 442-7752 for more information.