Conference Call

HEALTH REFORM SOLVENCY IMPACT (E) SUBGROUP
February 2, 2011

Summary Report


1. Upon a motion made by Alabama and seconded by Maine, the Subgroup voted unanimously to adopt the exposed clarifications regarding the filing of Supplemental state pages even when there is no comprehensive major medical business to report for that state.

2. Upon a motion made by Alabama and seconded by Maine, the Subgroup voted unanimously to adopt the BlueCross BlueShield Association clarification to reference the U.S. Department of Health and Human Services (HHS) Regs. 158.130 (a)(3) regarding earned premium definitions.

3. Upon a motion made by Alabama and seconded by New Jersey, the Subgroup voted unanimously to adopt clarifications to the Supplemental Health Care Exhibit example regarding how insurers should file in circumstances where run-off comprehensive major medical business was the only comprehensive major medical business for a particular state, and also to affirm that the 2% reporting rule did not restrict insurers from allocating amounts to Columns 4, 5 and 6 if they so chose.

4. Upon a motion made by Alabama and seconded by Maine, the Subgroup voted unanimously to adopt clarifications to the Supplemental Health Care Exhibit instructions consistent with the clarifications adopted for the example described in item 3 above.

5. Upon a motion made by Alabama and seconded by New Jersey, the Subgroup voted unanimously to adopt a clarification to allow insurers who assume health business via aggregate stop loss reinsurance or other reinsurance—which, applied to a reinsured entity’s or group of entities’ entire business, would not be allocable to individual, small group and large group business in Columns 1, 2 and 3 of Parts 1 and 2 of the Supplement—to report such assumed reinsurance on line 1.9 (premiums) and line 5.1 (claims) in Column 6 (Other Health) for the state page corresponding to the ceding insurer’s state of domicile.