



BULLETIN B 00-09

TO: All Insurers Authorized to Transact Health Insurance Business in the State of Alaska

RE: Survey on Health Insurance

Last year, the Legislature passed House Bill 158, which was signed into law (chapter 48, SLA 1999) and became effective on September 1, 1999. This legislation added a new paragraph to AS 21.06.110 requiring that the director's annual report contain "statistical information regarding health insurance, including the number of individual and group policies sold or terminated in the state." To comply with this directive, the division requests that all insurers who are licensed to transact health insurance business in Alaska and who offer a health care insurance plan in this state complete the attached survey and return it to the director by October 13, 2000.

The information gathered in this survey will be used to assist the legislature in determining the potential impact of legislative mandates on the health insurance market in Alaska, to report health insurance statistics in the director's annual report, and to verify the information provided to the director under AS 21.56.075. Data gathered in last year's survey was summarized into a company market-share-by-product report that was provided to Alaska legislators for their use in making policy decisions. This market share information was provided to both consumers and producers who contacted the division to inform them of availability of specific products, and was also used by the division to help validate the Small Employer Health Reinsurance Association assessment base.

This bulletin and survey are available on the Internet. In order to access this survey on the Internet, go to our web page at www.commerce.state.ak.us/insurance/bullet.htm. There, you may select Bulletin B 00-09 or the survey on health insurance.

If you have Microsoft Excel:

1. Open "2000 Survey.xls" and save the survey to your hard drive, then open Microsoft Excel and the document you just saved.
2. Fill in the requested information and save the document.
3. E-mail the completed document as an attachment to no later than October 13, 2000.

If you do not have Microsoft Excel, you can access a PDF version of the survey:

1. Open "2000 Survey.pdf"
2. Fill in the requested information.
3. Click on the Submit button to send us your response no later than October 13, 2000.

If you do not have access to electronic mail, you may fax your response to the Financial Section (907) 465-3422 or mail it to the Division of Insurance; Attention Financial Section; P.O. Box 110805; Juneau, Alaska 99811-0805.

DATED: September 6, 2000.

Instructions for Health Insurance Survey Report Calendar Year 1999

General

Do not round dollar amounts or counts. Report in whole numbers.

Return all 3 pages of the survey form ([Survey 2000](#)). If no business is written, respond with "NONE."

Coverage Type

Individual insurance means non-group health insurance and coverage issued to an individual under a trust, employer or other similar group of individuals, regardless of the situs of delivery of the policy or contract, if the individual pays the premium and is not being covered under the policy or contract pursuant to continuation of benefits provisions. Individual insurance does not include health insurance coverage issued through a bona fide association. Individual insurance includes conversions from group health coverage.

Small Employer Group insurance means health insurance offered, delivered, issued for delivery or renewed to small employers that employed an average of at least 2 but not more than 50 employees on the business days during the preceding calendar year and that employ at least 2 employees on the first day of the health insurance plan year. Small employer group insurance includes health insurance coverage purchased through associations by small employers.

Other Group insurance means health insurance offered, delivered, issued for delivery or renewed to large employers that employed an average of at least 51 employees on the business days during the preceding calendar year and that employs at least 2 employees on the first day of the health insurance plan year. Other group includes association health insurance plans that provide coverage for eligible individual non-employer members and their dependents.

Product Definitions

Accident: coverage singly or in combination, for death, dismemberment, disability, or hospital and medical care caused by an accident and includes accident only, travel accident, accidental death and dismemberment, student accident, blanket accident, specified accident.

Dental: stand-alone dental coverage. If dental benefits are part of a comprehensive medical plan, then include data in comprehensive medical plan. Include in product data in the PPO category only if the insured is responsible for reduced cost sharing when the insured uses a provider with which the insurer has an agreement.

Disability Income: loss of time coverage but does not include credit disability

Hospital Expense: coverage only for hospital confinement expenses including hospital outpatient expenses

Hospital Indemnity: daily benefits for hospital confinement on an indemnity basis only

Long Term Care: coverage for at least 12 consecutive months for diagnostic, preventive, therapeutic, rehabilitative, maintenance, or personal care services, provided in a setting other than an acute care unit of a hospital and includes products that provide benefits for cognitive impairment or loss of functional capacity. This line should include products providing only nursing home care, home health care, community based care or any combination.

Comprehensive Medical: coverage for hospital, medical, and surgical expenses (not supplemental coverage and may include dental and vision benefits). Include product data in the PPO category only if the insured is responsible for reduced cost sharing when the insured uses a provider with which the insurer has an agreement.

Medicare Supplement: coverage designed as a supplement to reimbursement under Medicare for hospital, medical or surgical expenses of a person eligible for Medicare

Medical Expense: coverage only for surgical, anesthesia and in-hospital medical expenses rendered by a physician.

Specified Disease: coverage for diagnosis and treatment of a specifically name disease such as cancer.

Vision: stand-alone vision coverage. If vision benefits are part of a comprehensive medical plan then include data in comprehensive medical plan. Include product data in the PPO category only if the insured is responsible for reduced cost sharing when the insured uses a provider with which the insurer has an agreement.

Other: supplemental or limited-benefit products that provide health insurance coverage not meeting one of the above product definitions.

Data Category

Policies In Force Beg of Year: number of policies in force on December 31, 1998. In the case of group coverage (employer or association), if no policies are actually in force in Alaska, but individuals in Alaska are covered under a group policy in force in another state, record 0 policies in force.

Individuals Covered Beg of Year: number of Alaskan's covered under all (not just those in force in Alaska) policies in force on December 31, 1998 as reported in the prior column. For example, a family policy covering two parents and 2 children would count as 4 individuals covered, an employer health plan that covers 25 employees and their 40 dependents would count as 65 individuals covered (1 policy).

New Policies Issued During the Year: number of policies (not individuals covered) newly issued during 1999

(do not include renewed policies).

Individuals Newly Issued Coverage During the Year: number of people newly issued coverage during the 1999. For example, new employees and their dependents covered under an existing health insurance plan would count as individual newly issued coverage during the year, even though the policy was not newly issued during the year.

Policies Terminated During the Year: number of policies terminated during 1999.

Covered Individuals Terminated During the Year: number of people whose coverage terminated during 1999.

Policies In Force End of Year: number of policies in force on December 31, 1999. In the case of group coverage (employer or association), if no policies are actually in force in Alaska, but individuals in Alaska are covered under a group policy in force in another state, record 0 policies in force. This total should balance to # Policies In Force Beg of Year + # New Policies Issued During the Year - # Policies Terminated During the Year.

Individuals Covered End of Year: number of people covered under policies in force on December 31, 1999 as reported in the prior column. For example, a family policy covering 2 parents and 2 children would count as four individuals covered, an employer health plan that covers 25 employees and their 40 dependents would count as 65 individuals covered (1 policy). This total should balance to # Individuals Covered Beg of Year + # Individuals Newly Issued Coverage During the Year - # Covered Individuals Terminated During the Year.

Earned Premium and Incurred Claims: premiums and claims incurred during 1999 by product and data category.

Individual Health Insurance

For Life and Health Insurance Companies, earned premium and incurred claims total should balance to 1999 Alaska State Page, Accident and Health Insurance section, Collectively Renewable Policies + Other Individual Policies.

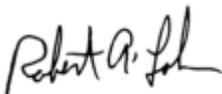
For Property and Casualty Insurance Companies, earned premium and incurred claims total should balance to the 1999 Alaska State Page, Accident and Health lines (15.1-15.6).

Small Employer and Other Group Health Insurance

For Life and Health Insurance Companies, the sum of the Small Employer Group and the All Other Group earned premium and incurred claims should balance to 1999 Alaska State Page, Accident and Health Insurance section, Line 23, Group Policies.

For Property and Casualty Insurance Companies, the sum of the Small Employer Group and the All Other Group earned premium and incurred claims should balance to the 1999 Alaska State Page, Group Accident and Health line (13) plus any employer or stop loss reported in the liability lines.

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