

Instructions for Completing the Maine Bureau of Insurance 945 Report (Annual Report Supplement)

Please read the entire instructions carefully to see what parts of the report to complete, which report form to use, and what is included and excluded. Any company that was active at any time during the previous calendar year, had authority to write Health insurance in Maine, and that meets the criteria in either Sections I or II below is required to submit a Maine 945 report form.

Section I. Who Must Complete and Submit the 945 Entire Report?

- Health insurers and HMOs with new or renewing medical coverage
- Companies providing Excess Insurance (Stop Loss) as defined in 24-A M.R.S.A. § 707(1)(C-1)
- Companies providing coverage issued under the Federal Employees Health Benefits Program (your information should be included under Large Group)
- Companies providing Short-Term medical coverage as defined in 24-A M.R.S.A. § 2849-B(1)
- Companies reporting any data on the Maine 286-A report in line 2 (Medical – Large Group > 50) or line 3 (Medical – Small Group <=50) or line 4 (Medical – Individual), or line 11 (Stop Loss) or line 12 (Short-Term Medical). Note: Although the 286-A report is not due until April 1, it would be helpful to prepare it before completing the 945 report.

Section II. Who Must Complete and Submit Only Company and Contact Information in Rows 1-9 of the 945 Form?

Either companies that provide only:

- Accidental Injury
- Specified Disease
- Hospital Indemnity
- Medicare Supplement
- Disability Income
- Long-Term Care
- Other Limited Benefit Coverage (e.g., vision)
- Medicare Part D (Prescription Drug Coverage)
- Medicare Advantage
- Medicare Fee for Service

OR

Companies reporting data on the Maine 286-A report but **NOT** having any data in line 2 (Medical – Large Group > 50) or in line 3 (Medical – Small Group <=50) or in line 4 (Medical – Individual), or in line 11 (Stop Loss) or in line 12 (Short-Term Medical). Note: Although the 286-A report is not due until April, it would be helpful to prepare it before completing the 945 report.

Answers You Must Know

- **945 Report Due Date?** On or before March 1.

- **What Do We Report?** Report information for Maine only in separate columns for each of the categories defined in Section III below. Information is reported net of any reinsurance ceded.
- **Which Version of the Form Do We Complete?** There are two versions of the report. The Long Form is filled out by companies with \$2 million or more in direct written Health insurance premium in the State of Maine (**excluding** the types of business in the bulleted list in Section II above). The Short Form is filled out by companies with less than \$2 million in direct written Health insurance premium in the State of Maine.
- **Where Do I Find the Forms?** The **short form** is found at http://www.maine.gov/pfr/insurance/forms/excel/Rule945_short.xls. The **long form** is found at <http://www.maine.gov/pfr/insurance/forms/excel/Rule945.xls>.
- **What Are the Definitions of the Categories on the Forms?** See Section III below.
- **Where Can I Find General Instructions About the Forms?** General instructions about the Short Form are in Section IV below. General Instructions about the Long Form are in Section V. below.
- **What Edit Checks Should I be Concerned with?** Companies completing the Long Form may find the edit checks at <http://www.maine.gov/pfr/insurance/forms/excel/Rule945LongFormComparisons.xls>. Companies not meeting the edit checks will be asked to correct the data or to verify that the information is correct and explain why. Explanations may be provided at the time the data is submitted.
- **Where Do We Send Our Response?** Send responses by e-mail to Bradford.L.Brown@maine.gov.
- **Who Do I Call with Questions?** If you have questions about how to complete the form call Brad Brown at (207)-624-8478.

Section III. Definitions of Categories

- Large Group: Fully insured large groups, meaning all group and blanket policies, including Federal Employees Health Benefits Program, other than small groups and Dirigo groups
- Small Group: Fully insured small groups (1-50 employees) as defined by 24-A M.R.S.A. § 2808-B, excluding Dirigo groups
- Individuals: Fully insured individuals, including short-term coverage and excluding Medicare Advantage plans and Dirigo individuals
- Dirigo Groups: Issued pursuant to 24-A M.R.S.A. Chapter 87
- Dirigo Individuals: Issued pursuant to 24-A M.R.S.A. Chapter 87
- Stop Loss: Employee benefit excess insurance as defined in 24-A M.R.S.A. § 707(1)(C-1)
- Total: The sum of Large Group, Small Group, Individuals, Dirigo Groups, Dirigo Individuals, and Stop Loss.

Section IV. Short Form General Instructions

NOTE: Insurers engaged in only the following types of health insurance or any combination of the following shall file blank reports, providing only their contact information, but shall not otherwise be subject to this rule: accidental injury, specified disease, hospital indemnity, dental, vision, disability income, long-term care, Medicare Supplement, or other limited benefit health insurance as defined in [Rule Chapter 755](#). Information is reported on a statewide basis and is net of any reinsurance ceded. Premium income amounts reported on the Maine Rule 945 form are based on earned premium. Report for each of the categories listed above the net premium income, total revenues, total medical and hospital expenses, total claims adjustment and administrative expenses, increase in revenues, and net underwriting gain or loss. Please see Rule Chapter 945, Appendix B for more information about what to report: <http://www.maine.gov/sos/cec/rules/02/031/031c945.doc>

Section V. Long Form General Instructions

Information is to be reported net of any reinsurance ceded. The long form contains eight tabs shown under Parts of the Long Form below. The majority of the information that you provide correspond to line items from the Statement of Revenue and Expenses, the Underwriting and Investment Exhibit, Part 3 – Analysis of Expenses and the Exhibit of Premiums, Enrollment and Utilization, which are contained in the Health annual statutory financial statements. For insurers completing Life and Accident and Health (Life) or Property and Casualty (P&C) annual statutory financial statements, a portion of the information required is contained within Schedule H – Accident and Health Exhibit—of those annual statutory financial statements. Some line items may not tie directly to any exhibits in the Life or P&C statements. For these items, the reporting entity may look to the instructions for the Health statement for guidance. For more information please see Rule Chapter 945, Appendix A: <http://www.maine.gov/sos/cec/rules/02/031/031c945.doc>.

Parts of the Long Form

The 945 Long Form provides information regarding Member and Contract information, Revenue information, Expense information, and Utilization Statistics by Category (See definition of Policyholder Categories above). The form is an Excel spreadsheet that contains tabs at the bottom for Statewide data and Regional data. Information for a particular line on the form is entered into either the Statewide tab or one or more of the regional tabs, not both. For lines listed under the Regional tabs, statewide totals are calculated from entries in all of the regional tabs. You must supply information for each region in which your company has health insurance business.

Tabs on the 945 Long Form

- **Statewide (formerly PART 1)** contains the tab for entering statewide data (do not include in regions below).
- **Region 1 (formerly PART 2-a)** contains the tab for entering data for zip codes beginning with 039, 040, and 041.
- **Region 2 (formerly PART 2-b)** contains the tab for entering data for the zip code beginning with 042.

- **Region 3 (formerly PART 2-c)** contains the form for entering data for zip codes beginning with 043, 045, 046, 048 and 049.
- **Region 4 (formerly PART 2-d)** contains the form for entering data for the zip code beginning with 044.
- **Region 5 (formerly PART 2-e)** contains the form for entering data for the zip code beginning with 047.
- **Allocation Method (formerly PART 3)** enter the allocation method (actual, allocated, or combination) by region and category of policyholder to indicate how the data in the **Statewide** and **Regional** tabs were determined.
- **Comments:** For each item marked as either Allocated or Combination in **Allocation Method (formerly Part 3)**, you must provide explanation for the Allocation by Region or Allocation by Category.