

Professional & Financial Regulation OFFICE OF SECURITIES
BUREAU OF INSURANCE
CONSUMER CREDIT PROTECTION
BUREAU OF FINANCIAL INSTITUTIONS
OFFICE OF PROF. AND OCC. REGULATION

2015 ANNUAL REPORT FROM THE SUPERINTENDENT OF THE MAINE BUREAU OF INSURANCE TO THE LEGISLATURE

Prepared by the Maine Bureau of Insurance July 2016

Paul R. LePage Governor Anne L. Head Commissioner

Eric A. Cioppa Superintendent

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I. INTRODUCTION

States are the primary regulators of the insurance industry in the United States. The Maine Bureau of Insurance (the Bureau) regulates insurance companies, producers and agents, as well as other entities engaged in the business of insurance in the State. The Bureau enforces solvency standards, as well as consumer protections, under the Maine Insurance Code.

The Bureau primarily serves a regulatory function; however, consumer assistance and education is a large part of the agency's mission. Staff members in both the Consumer Health Care Division and the Property and Casualty Division respond to consumer calls and written inquiries and research written complaints, to ensure compliance with Maine law. Complaints may then be turned over to the Bureau's legal staff for enforcement action or to the Market Regulation Unit for further investigation.

In 2015, there were 1,301 insurance carriers doing business in Maine. The 19 carriers domiciled in the state received more than \$6.6 billion in premiums. Total penalties and settlement payments to the State by insurance carriers and producers in 2015 totaled \$97,473. Total restitution paid to insured Maine individuals and businesses by carriers, following investigations and hearings conducted by the Bureau, totaled \$1,490,557.

In 2015, Bureau staff continued to play an active role in regulating the evolving health insurance Marketplace established by the federal government's Affordable Care Act.

Interstate cooperation and information-sharing are key elements of regulating the national insurance market in a state-based system. The National Association of Insurance Commissioners (NAIC) facilitates this process. The forums and tools offered by the NAIC provide information that is critical to the Bureau's regulatory responsibilities. The NAIC also conducts accreditations of state insurance departments, ensuring that each state's financial regulation is sufficient to oversee its domestic market. The Bureau has been accredited by the NAIC since 1993 and has been an active participant in various NAIC events and working groups. Currently, Bureau Superintendent Eric Cioppa serves as Secretary/Treasurer of the NAIC, Chair of the NAIC's Financial Condition (E) Committee, Chair of the Audit Committee, member of the Executive Committee, Co-Chair of the Principles Based Reserving Implementation (EX) Task Force, Co-Chair of the International Association of Industrial Accident Boards and Commissions (IAIABC) Working Group, and Northeastern Zone Representative on the Government Relations (EX) Leadership Council. In addition to his NAIC duties, he is a member of the Maine State Employee Health Commission.

The Bureau also participates in supervisory colleges held by insurer groups' domiciliary states. Regulators whose states are responsible for affiliates of the group and international regulators participate in these colleges, which allow regulators to assess the risks borne by the subject insurance group and the mitigation strategies employed. Participation in both the NAIC forums and supervisory colleges enhances the Bureau's ability to monitor and proactively address regulatory issues.

II. BUREAU OF INSURANCE DIVISIONS AND UNITS

CONSUMER HEALTH CARE DIVISION

The responsibilities of the Consumer Health Care Division (CHCD) include:

- assisting consumers with understanding their rights regarding health, disability, long-term care and life insurance;
- investigating and resolving consumer complaints;
- reviewing carriers' insurance forms to ensure compliance with Maine law;
- licensing medical utilization review entities;
- drafting and reviewing health insurance regulations;
- bringing enforcement actions against licensed entities when violations occur;
- reviewing managed care plans for compliance with provider network adequacy standards;
- approving registrations for preferred provider arrangements (PPAs); and
- coordinating compliance with the federal Affordable Care Act (ACA) as it pertains to the commercial health insurance market.

CHCD staff answered 3,205 telephone and written inquiries during 2015. The most frequent inquiries related to individual insurance, Medicare, and claim denials. Staff also responded to 534 written health, disability, annuity, and life insurance complaints filed by health plan enrollees, policy holders, insurance producers, and health care providers.

As part of the complaint investigation process, CHCD staff works to obtain restitution for consumers who have suffered a financial loss due to improperly denied claims, or claims which were not paid in accordance with the policy. In 2015, the CHCD obtained restitution of \$1,228,971 for complainants.

During 2015, the CHCD received 1,752 rate and form filings from insurance companies and approved 1,662. Some filings were disapproved, placed on hold, or withdrawn by the insurance company.

| CHCD TOTALS | 2015 | 2014 | 2013 | 2012 | 2011 |
|--------------------------------|-------------|-------------|-------------|-------------|-------------|
| Consumer Complaints Received | 534 | 586 | 441 | 543 | 633 |
| Consumer Inquiries Received | 3,205 | 4,287 | 4,977 | 3,958 | 4,044 |
| Restitution to Consumers | \$1,228,971 | \$2,432,187 | \$1,500,967 | \$2,198,607 | \$1,158,313 |
| Rate and Form Filings Received | 1,752 | 1,820 | 2,323 | 2,230 | 2,519 |

CHCD staff participates in many outreach events and programs. Additional information about these activities is found in Appendix A.

In 2015, CHCD staff drafted one new rule and revisions to five others and held a stakeholder meeting to solicit ideas for a new rule to establish uniformity among explanations of benefits forms utilized by health carriers.

EXTERNAL REVIEWS

External reviews are available as a third level of review for consumers who have exhausted their insurance carrier's internal appeals for denial of benefits in a fully insured plan. The Bureau contracted with three independent external review organizations in 2015: National Medical Review, Maximus Federal Services, Inc., and Island Peer Review Organization.

The CHCD received 80 requests for external review:

- 2 were resolved by the insurance carrier prior to the external review.
- 15 were not completed because the consumer did not return the necessary signed releases to continue the process.
- Of the 63 remaining requests, 54 were completed by January 1, 2016.
- Of the 54 completed requests, 35 were overturned (65%), 18 upheld the carrier's decision (33%), and one was partially overturned (2%).

Twenty-nine cases were heard regarding medical necessity of treatment:

- 4 mental/behavioral health;
- 7 physical therapy/chiropractic care;
- 2 substance abuse treatment;
- 4 medical devices or equipment;
- 2 medication therapy;
- 3 lab tests; and
- 7 general treatment decisions.

Twenty-three decisions were related to whether the treatment provided was experimental or investigational:

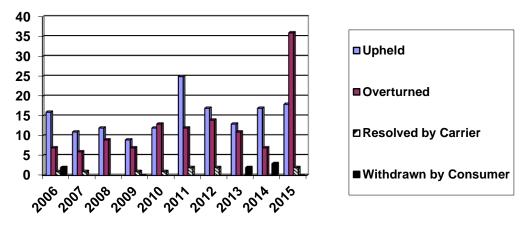
- 18 lab tests;
- 2 medical equipment; and
- 3 general treatment decisions

In addition, one case reviewed was based upon a pre-existing condition and one was based on a care/treatment/diagnosis decision.

The CHCD received and reviewed additional requests for external review that did not qualify under the statutes, either because the internal appeal process was not utilized prior to requesting external review or because the denial was based on issues other than the validity of the carrier's medical decisions.

Figure 4 illustrates the number of external reviews for the years 2006-2015 that were upheld, overturned, or withdrawn by either the carrier or the consumer prior to the review.

EXTERNAL REVIEW OUTCOMES BY YEAR



Note: 2015 saw a spike in external review requests related to a particular lab that had been denied by companies as experimental and investigational.

LIFE & HEALTH ACTUARIAL UNIT

The Life & Health Actuarial Unit provides actuarial and technical services to Bureau staff involving life and health insurance. Tasks performed by the Unit are outlined below.

- Reviewing and taking appropriate action on rate filings for regulated lines of insurance, primarily individual health, small group health, credit life and health, group and individual Medicare supplement, and long-term care.
- Providing reserve analysis review of life and health insurance companies.
- Providing technical assistance to insureds, consumers, state agencies, and others on insurance matters.
- Studying proposed mandated benefit legislation as requested by the Legislature to determine the social impact, the financial impact, and the medical efficacy of the proposed mandate.
- Estimating the impact on health insurance premiums of proposed expansions of health care services requiring a certificate of need from the Maine Department of Health and Human Services.
- Assisting the Research and Statistical Unit with the collection of health insurance data:
 - Annual reports on mandated benefits claims experience;
 - Annual supplemental premium reports from health insurers;
 - Annual reports on insured demographics for small group and individual health insurance;
 - Annual reports on claims paid by third-party administrators and by insurers administering employers' self-funded health plans; and
 - Preparation of quarterly "market snapshots" for the small group and individual health insurance markets.

PROPERTY AND CASUALTY DIVISION

The Property and Casualty Division (P&C) performs three separate functions: review of insurer rate, rule, and form filings; resolution of consumer complaints; and administration of cancellation/nonrenewal hearings.

In 2015, P&C staff answered 3,209 telephone and written inquiries, responded to 274 written complaints, and obtained restitution of \$261,585.89 for consumers who suffered a financial loss due to improperly denied claims or claims that were not paid in accordance with the policy.

| Property & Casualty Totals | 2015 | 2014 | 2013 | 2012 | 2011 |
|--------------------------------|-----------|-----------|-----------|------------|--------------|
| Consumer Complaints Received | 274 | 296 | 306 | 319 | 383 |
| Consumer Inquiries Received | 3,209 | 3,800 | 4022 | 4,760 | 4,901 |
| Restitution to Consumers | \$261,586 | \$963,110 | \$381,459 | \$ 943,685 | \$ 1,691,055 |
| Rate and Form Filings Received | 3,757 | 3,877 | 3,434 | 3,092 | 3,071 |

The P&C Division received 3,757 rate and form filings from insurance companies during 2015.

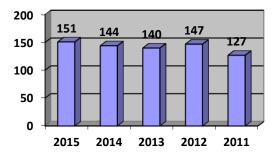
The NAIC released two reports¹ in 2015 ranking Maine's personal auto and homeowners lines of insurance as 3rd and 10th most affordable in the nation. The reports, based on data from 2012 (the most recent year for which cumulative data was available to the NAIC), indicate that Maine consumers pay less for these types of insurance than do consumers in most other states.

HEARINGS

When an insurance company issues a notice of cancellation or nonrenewal of a homeowners or personal auto policy, the company must advise the insured of the right to request a hearing contesting the action. There is also a statutory right to request a hearing when a commercial property or liability policy is cancelled prior to its expiration date.

The hearing provides a forum to dispute the reason(s), and requires the Bureau to determine whether the cancellation or nonrenewal was done in accordance with Maine law. The following graph and table show the number of hearings scheduled and those resulting in decisions. In some cases, the insurance company or the insured may cancel the proceeding prior to hearing, which results in no issued decision.

¹ The two NAIC reports are titled 2012 Homeowners Insurance Report and 2011/2012 Auto Insurance Database Report.





| Hearing Results | 2015 | 2014 | 2013 | 2012 | 2011 |
|-------------------------------|------|------|------|------|------|
| Number of Decisions Issued | 69 | 77 | 62 | 75 | 64 |
| Findings for the Policyholder | 19 | 26 | 28 | 36 | 36 |

WORKERS' COMPENSATION

The Property and Casualty Division is also responsible for processing all rate, rule, and form filings presented to the Bureau involving workers' compensation insurance, reinsurance for self-insurers, and occupational disability policies. In addition to these filings, the Division assists the actuarial staff with workers' compensation loss cost filings.

The Division also responds to general inquiries regarding workers' compensation premiums and policies, handles complaints regarding workers' compensation insurance rates, rules, and policy cancellations, and conducts research and special projects related to workers' compensation matters. Complaints regarding specific workers' compensation claims are under the jurisdiction of the Workers' Compensation Board. If the Workers' Compensation Board finds a pattern of improper claims handling practices, however, it can refer the matter to the Bureau.

PROPERTY AND CASUALTY ACTUARIAL UNIT

The Property and Casualty Actuarial Work Unit reviews rate filings made by licensed insurance companies and by advisory organizations. Among its responsibilities, the Unit:

- Reviews rate and rating rule filings;
- Reviews and analyzes loss cost filings by industry advisory organizations that gather experience and file expected loss figures that insurers use to establish rates and rating rules;
- Provides technical assistance to insureds, consumers, state agencies, and others on insurancerelated matters;
- Reviews funding and reserves of workers' compensation self-insurance trusts;
- Provides reserve analysis of property/casualty insurance companies; and
- Provides technical assistance to the Superintendent in all aspects of property/casualty and workers' compensation matters.

LICENSING DIVISION

The Licensing Division is responsible for processing and maintaining license records on insurance producers and business entities (agencies), including issuing and terminating licenses. Additional responsibilities include overseeing the licensing examination process and supervising the continuing education program. Electronic processing of producer appointments, appointment terminations, and non-resident license applications, as well as participation in the national producer database, have made the licensing process more efficient, timely and uniform.

The Licensing Division processed 16,845 new licenses during 2015 for producers, consultants, adjusters, and business entities.

| | Producers | Consultants | Adjusters | | | | |
|--------------|-----------|-------------|-----------|--|--|--|--|
| Resident | 589 | 3 | 38 | | | | |
| Non-Resident | 13,748 | 3 | 2464 | | | | |
| Total | 14,337 | 6 | 2502 | | | | |

NUMBER OF NEW INDIVIDUAL LICENSES, 2015

NUMBER OF ACTIVE INDIVIDUAL LICENSES, 2015 (AS OF 12/2015)

| | Producers | Consultants | Adjusters |
|--------------|-----------|-------------|-----------|
| Resident | 7556 | 47 | 743 |
| Non-Resident | 101,359 | 13 | 11,033 |
| Total | 108,915 | 50 | 11,776 |

ALTERNATIVE RISK MARKETS WORK UNIT

The Alternative Risk Markets Work Unit reviews and evaluates applications for workers' compensation self-insurance authority, captive entities, multiple employer welfare arrangements, group self-insurance reinsurance accounts, and the Maine Self-Insurance Guaranty Association. Its mission is to apply the rules and regulations governing these entities in a fair, consistent, and timely manner to assure that these entities remain solvent and that the Maine businesses utilizing alternative risk mechanisms do so effectively and responsibly.

| Number of Self-Insurers for Workers' Compensation | 2015 | 2014 | 2013 | 2012 | 2011 |
|---|------|------|------|------|------|
| Individual Self-Insurers | 60 | 61 | 59 | 60 | 59 |
| Group Self-Insurers ¹ | 19 | 19 | 19 | 19 | 19 |

¹ As of March 15, 2016, this represents approximately 1,303 employers.

FINANCIAL EXAMINATION DIVISION

The Financial Examination Division examines domestic insurers at least once every five years to ensure soundness of the insurance companies' financial position. All reports of examination are public and can be found on the Bureau's website.¹ Financial statements for Maine-licensed insurance companies can also be found online.²

| Company | Report Issued |
|--|------------------|
| Aetna Health, Inc. (a Maine Corporation) | October 30, 2015 |
| Great Falls Insurance Company | April 13, 2016 |
| Martin's Point Generations | June 30, 2016 |
| Maine Dental Service Corporation | In Progress |
| Patrons Oxford Insurance Company | In Progress |

FINANCIAL EXAMINATIONS COMMENCED IN 2015

FINANCIAL EXAMINATIONS SCHEDULED FOR 2016

| Company | Financial Period Ending |
|--------------------------------|-------------------------|
| Maine Community Health Options | December 31, 2015 |
| MMG Insurance Company | December 31, 2015 |
| Casco Indemnity Company | December 31, 2015 |
| State Mutual Insurance Company | December 31, 2015 |

FINANCIAL ANALYSIS DIVISION

The Financial Analysis Division is responsible for the on-going financial review of domestic companies, and holding company analysis of the groups that our domestic companies are a part of, as well as the processing of name changes, mergers, acquisitions, amendments to authority, and redomestications of these entities. The Division also handles the licensing and monitoring of foreign insurance companies, managing general agents, third party administrators, risk retention groups, reinsurance intermediaries, surplus lines entities, and reinsurance companies.

¹ Financial examination reports are available at: www.maine.gov/pfr/insurance/company/domestic.htm.

² Available at: www.maine.gov/pfr/insurance/company/domestics/index.htm.

NUMBER OF INSURANCE COMPANIES LICENSED IN MAINE

| Company Type | 2015 | 2014 | 2013 | 2012 | 2011 |
|--|------|------|------|------|------|
| Property and Casualty Companies | 697 | 693 | 687 | 668 | 653 |
| Life & Health and HMOs | 346 | 346 | 349 | 358 | 358 |
| Fraternal Companies | 13 | 13 | 13 | 13 | 13 |
| Surplus Lines Companies | 160 | 157 | 152 | 145 | 141 |
| Private Purchasing Alliance | 1 | 1 | 1 | 2 | 2 |
| Multiple Employer Welfare Arrangement (MEWA) | 2 | 2 | 2 | 2 | 2 |
| Captive | 3 | 3 | 3 | 3 | 2 |
| Risk Retention Groups | 74 | 73 | 72 | 77 | 72 |
| Non-Profit | 2 | 2 | 2 | 1 | 1 |
| Fire Assessment Company | 3 | 4 | 4 | 4 | 5 |
| Total | 1301 | 1294 | 1285 | 1273 | 1249 |

DOMESTIC INSURANCE COMPANIES, 2015 (DOMICILED IN MAINE)

| Maine Domestics | 12/31/15 Premium ¹ | 12/31/15 Assets |
|---|-------------------------------|-------------------|
| Aetna Health Inc. (a Maine corporation) | \$80,577,948 | \$26,219,633 |
| Anthem Health Plans of Maine, Inc. | \$1,018,571,620 | \$397,874,610 |
| Beacon Harbor Mutual Risk Retention Group | \$6,542 | \$1,053,957 |
| Casco Indemnity Co. | \$10,607,758 | \$28,649,383 |
| Great Falls Insurance Company | \$10,028,003 | \$9,038,390 |
| Maine Community Health Options | \$341,237,477 | \$167,555,607 |
| Maine Dental Service Corp. | \$62,165,974 | \$49,280,841 |
| Maine Employers' Mutual Insurance Co. | \$152,683,824 | \$850,829,048 |
| Martin's Point Generations, LLC | \$275,129,040 | \$73,625,447 |
| Medical Mutual Insurance Co. of Maine | \$46,857,676 | \$281,576,169 |
| MMG Insurance Co. | \$175,015,305 | \$245,158,129 |
| North East Insurance Co. | No data available | No data available |
| Patriot Insurance Co. | \$49,577,124 | \$106,037,420 |
| Patrons Oxford Insurance Co. | \$46,276,657 | \$17,816,930 |
| Select Care of Maine | \$0 | \$1,521,770 |
| State Mutual Insurance Co. | \$1,520,335 | \$2,450,093 |
| Unum Insurance Company | \$10,089,789 | \$56,997,837 |
| UNUM Life Insurance Co. of America | \$4,356,047,648 | \$20,552,323,486 |
| York Insurance Co. of Maine | No data available | No data available |
| Total | \$6,636,386,178 | \$22,866,954,793 |

¹ Year-end direct written premium totals are reported on a **national** basis.

| NON-MAINE HEALTH MAINTENANCE ORGANIZATIONS 2015 | (MAINE ONLY PREMIUMS) ¹ |
|---|------------------------------------|
| | |

| HMOs (State of Domicile) | 12/31/15 Premium | 12/31/15 Assets |
|---|------------------|-----------------|
| Arcadian Health Plan Inc. (WA) | \$46,125,080 | \$77,719,315 |
| Harvard Pilgrim Health Care, Inc. (MA). | \$160,310,497 | \$930,556,459 |
| Total | \$206,435,577 | \$1,008,275,774 |

NEW COMPANY LICENSES ISSUED IN 2015 (25 TOTAL)

| Life and Health Insurance Companies | | |
|---|--|--|
| Martin's Point Generations Advantage, Inc. | Integrity Life Insurance Company | |
| Merit Health Insurance Company | | |
| Property and Casualty Insurance Companies | | |
| American Strategic Insurance Corp | Insurance Company of Greater New York | |
| Amtrust Insurance Company of Kansas, Inc. | Safeco National Insurance Company | |
| Berkshire Hathaway Direct Insurance Company | Safety Indemnity Insurance Company | |
| Censtat Casualty Company | Safety Insurance Company | |
| Century-National Insurance Company | Safety Property and Casualty Insurance Company | |
| Greater New York Mutual Insurance Company | Strathmore Insurance Company | |
| Homesite Insurance Company | United Fire & Casualty Company | |
| Eligible Surplus Lines Insurance Companies | | |
| Bankers Specialty Insurance Company | Peleus Insurance Company | |
| Blue Hill Specialty Insurance Company | Rockingham Casualty Company | |
| Coverys Specialty Insurance Company | Watford Specialty Insurance Company | |
| Risk Retention Groups | | |
| Lone Star Alliance Inc., A Risk Retention Group | Romulus Insurance Risk Retention Group, Inc. | |

MARKET REGULATION UNIT

The Market Regulation Unit is responsible for establishing and monitoring a compliance program for all licensees. This program includes both in-house analysis and on-site examination of licensees. The Market Regulation Unit uses the information available from a variety of sources and performs analysis on selected companies to determine which companies are deemed to be market outliers. Once identified as a market outlier, the Market Regulation staff determines the most effective process for obtaining information from the company in order to identify why the company's results are outside the expected results for the Maine marketplace. The information gathering process could encompass many

¹ Financial statements for HMOs operating in Maine are available at: www.maine.gov/pfr/insurance/hmo/financial.htm

forms, including a meeting with the company, a data call, interrogatories, or – in select circumstances – a targeted or full scope market conduct examination. The examination process typically focuses on the following areas: (1) company operations/management; (2) complaint handling; (3) marketing and sales; (4) producer licensing; (5) policyholder service; (6) underwriting; and (7) claims. While the Unit does not handle individual complaints, it does use complaint data to analyze licensee trends and business practices or patterns. This analysis is often a key factor in determining that a company is a market outlier and requires additional review.

| COMPANY | |
|---|--|
| Anthem Health Plans of Maine, Inc. | |
| Continental Casualty Company | |
| Life Insurance Company of North America | |
| (Monitoring Phase) | |

In addition to conducting market analysis and onsite examinations, the Unit participates in multi-state examinations on behalf of the State of Maine.

The State of Maine received payments in 2015 relating to Regulatory Settlement Agreements (RSAs) arising from multi-state examinations of certain companies' practices and procedures for identifying and paying proceeds to beneficiaries of life insurance policies and annuities. The lead states' examinations and resulting RSAs call for these companies to implement business reforms that will promote timely and efficient searches for beneficiaries of their in-force life insurance policies and annuities and lapsed policies, through regular matches of their insureds and annuitants against the Social Security Administration's Death Master File. (Lapsed policy match attempts are required for 18 months.) It also provides for payments to be allocated among states subscribing to the RSA. During 2015, the State of Maine received \$44,717.10 in payments from these RSAs. Additionally, Maine received \$52,756.08 as a result of a multi-state market conduct exam of American Modern. The companies examined and the payment amounts were as follows:

| | • |
|-----------------|--------------|
| Company | 2015 Payment |
| Allianz | \$27,607.27 |
| American Modern | \$52,756.08 |
| Guardian | \$6,808.59 |
| Pacific Life | \$10,301.24 |
| Total | \$97,473.18 |

2015 Multi-State Market Conduct Settlement Payments

In 2015, the Unit continued to audit claims-handling information of 11 companies – both insurers and third-party administrators (TPAs) – previously referred to the Bureau by the Workers' Compensation

Board, due to questionable claims-handling techniques. These companies were identified through the Board's monitoring, audit and enforcement program. To fulfill its statutory responsibility, the Bureau entered into consent agreements with these companies to end those practices. These agreements require the companies, among other obligations, to self-audit claims on a quarterly basis for up to two years and report those findings to the Bureau. The Unit is in the process of auditing these reports.

| Licensee | |
|-------------------------------------|--|
| ACE Group | |
| AIG (Chartis) | |
| Gallagher Bassett Services, Inc. | |
| Guarantee Insurance Company | |
| Liberty Mutual Group | |
| Meadowbrook, Inc. | |
| Old Republic Insurance Company | |
| Peerless Insurance Company | |
| Protective Insurance Company | |
| Sedgwick Claims Management Services | |
| Travelers Insurance Group | |
| York Risk Services Group | |

WORKERS' COMPENSATION INSURERS AND TPAS WITH PENDING CONSENT AGREEMENTS

RESEARCH AND STATISTICS UNIT

The Research and Statistics Division has the overall responsibility of creating, maintaining, and monitoring databases used by the Bureau. The objective of the Unit is to collect, interpret, and provide data from regulated entities to Bureau divisions and units, other governmental agencies, and the public as needed. Additionally, the Unit researches issues for Bureau divisions and units, serves as liaison between the Bureau and NAIC online applications, and maintains database applications and the Bureau's website.

ADMINISTRATIVE SERVICES UNIT

The Administrative Services Unit provides support for all divisions and units within the Bureau. Responsibilities include purchasing, new employee orientation and communication with human resources, travel arrangements and training registrations, copying and distribution of bound and electronic reports, processing and accounting of all Bureau revenue, and consumer outreach support.

III. APPENDICES

APPENDIX A – 2015 OUTREACH EVENTS

The Bureau's consumer outreach efforts aim to educate Maine individuals and businesses about their rights and responsibilities under Maine's insurance laws and the federal Affordable Care Act. The Superintendent and Bureau staff members participate in public forums and events to provide this information, and to ensure that consumers are aware of the services the Bureau offers.

Public speaking and other outreach events in which the Bureau participated in 2015 included:

- Adult Education, Lewiston
- Maine Insurance Agents Annual Convention, Portland
- Financial Education in Maine Schools Conference, Bangor
- Elder Abuse Prevention Summit, Augusta
- Senior Expo, Bangor
- Maine Association of Retirees Annual Meeting, Augusta
- University of New England Geriatrics Conference, Bar Harbor
- Maine Life & Health Guarantee Association, Scarborough
- Senior Expo, Portland
- MollyOckett Day, Bethel
- Potato Blossom Festival, Fort Fairfield
- Blueberry Festival, Machias
- Annual Summit on Aging, Augusta
- CPCU Annual Breakfast Meeting, Portland
- Common Ground Fair, Unity
- Aging Well/Living Well Conference, Newry
- Pumpkinfest, Damariscotta
- Lincoln County TRIAD Senior Appreciation Day, Damariscotta
- Spectrum Generations/PeoplePlus Senior Expo, Brunswick
- Maine Primary Care Association, Bar Harbor
- USM Insurance Law Class, Portland
- New Ventures Entrepreneurship Training, UMA, Augusta
- American Association of Healthcare Administrative Management, Augusta
- American Nurses Association, Maine Chapter, Portland

APPENDIX B – PUBLICATIONS AND ONLINE TOOLS

The Bureau publishes reports on a variety of insurance topics, as required by statute or upon request by members of the Legislature. These are available on the Bureau's website.¹

To help educate the public on insurance matters that can affect their daily lives, the Bureau publishes, distributes, and posts a number of consumer brochures and online tools in multiple formats.² The Bureau's publications and online tools include:

Health Insurance Brochures

Disability Insurance Guide External Review Guide: When Your Health Insurance Carrier Denies Benefits for Health Care Services **External Review Summary** Health, Disability and Long-Term Care Insurance Complaint Comparison Health Insurance Appeals Process Guide Health Insurance Tips (Internet only) Health Insurers, Consumer Guide (Internet Only) Health Savings Accounts (HSAs) link to information from the US Department of the Treasury Individual Health Insurance Guide (and Important Renewal Information) Ten Things You Should Know Before Buying Cancer Insurance (Español) Long Term Care Insurance and Long Term Care Partnership Program Guide Long Term Care (LTC) Insurance - Maine Tax Qualified and Tax Certified Policies (Internet only) Long Term Care Partnership Program Approved Policies Long Term Care Policies Certified for Income Tax Purposes in Tax Years Ending 12/31/1999 Long Term Care Policies Certified for Income Tax Incentives in Tax Years Beginning 1/1/2002 Long Term Care Shopper's Guide (NAIC publication) Ten Things You Should Know About Buying Long-Term Care Insurance Mandated Health Insurance Benefits, History of (Internet only) Market snapshot - comparison of individual medical insurers in Maine Market snapshot - comparison of small group health insurers in Maine Are You Eligible for or Do You Have Medicare? (Aggressive Sales Practices) Medicare Supplement Guide for Maine Resident- for plans issued beginning June 2010 Medicare Supplement Renewing Rates Comparison Chart for plans issued up to 5/31/2010 Understanding Medicare Enrollment Periods link to Dept. of Health and Human Services **Choosing a Medigap Policy** Ten Things You Should Know About Buying A Medigap Policy (Español) Resolving Health Care Insurance Disputes (Internet only) Small Business Health Insurance Plans Offered in Maine What Should I look For When I Buy Health Insurance?

¹ Available at www.maine.gov/pfr/insurance/reports.htm.

² Available at www.maine.gov/pfr/insurance/consumer/brochures.htm.

Life Insurance Brochures

Life Insurance Information for Military Personnel Ten Things You Should Know Before Purchasing Life Insurance (Español) Ten Things You Should Know About Buying Annuities (Español) What you Should Know about Viatical and Life Settlements Life Settlement Brochure For producers Alternative Life Settlement Brochure For producers

Workers' Compensation Brochures

Workers' Compensation Insurance in Maine, An Employers' Guide to Opting Out: A Workers' Compensation Insurance Summary for Executive Officers of Corporations

Auto Insurance Brochures

Auto Insurance Guide Auto Insurance, Making the Claims Process Easier Cancellation or Nonrenewal of Personal Automobile and Property Insurance Credit Information - Understanding How Insurers Use Personal Auto Insurance Complaint Comparison Youthful Drivers Guide Maine Driving Dynamics Ten Things You Should Know About Buying Auto Insurance (Español)

Homeowners/Renters Brochures

Cancellation or Nonrenewal of Personal Automobile and Property Insurance Coping With the Aftermath of Weather-Related Disasters (Internet only) Credit Information - Understanding How Insurers Use Child Care Liability, Consumer Guide to Homeowner Insurance Complaint Comparison Homeowners' Brochure Homeowners Insurance, Making the Claims Process Easier Homeowners' Inventory Checklist From Homeowner to Renter Insuring Your Home Business Ten Things You Should Know About Purchasing Home Insurance (Español)

Other Brochures

Insuring Your Farm-The Basics of Property & Liability Coverage Insuring Your Business-The Basics of Property & Liability Coverage Privacy, A Consumer's Guide to Financial Privacy Rights under the Gramm-Leach-Bliley Act NAIC Get Smart About Insurance NAIC "Fight Fake Insurance" (Español) Pet Insurance **Consumer Tools** – provides links to:

- File a complaint
- Glossary of terms
- Cancellation/Nonrenewal Notices
- Helpful links
- PPACA Filings/Rate increases
- Long Term Care Partnership

Employer Tools – provides links to:

- Workers' Compensation Insurance
- Health Insurance Information
- Rural Medical Access Program

Industry Tools – provides links to:

- Physician Tiering Program Reporting
- Online Data Reporting System
- Company forms and information
- Producer and Business Entity forms and information
- Address change forms
- Fees
- Cancellation/Nonrenewal Notices
- Request for proposal
- Domestic Insurance Company Annual Statement