

Instructions for Completion of the Maine Bureau of Insurance Supplemental Insurance Reporting Form

Company Information: At the top of the form, please fill in your company name, NAIC number, the year this report covers, and your company's address. The NAIC number was supplied in the e-mail notification sent to you. If you do not know your company's NAIC number, please contact our office. Then complete the contact person's name, title, and contact information.

General Information:

This form reports information for Health insurance premiums written in the State of Maine only. It supplements information provided in your company's Annual Statement blanks.

You provide information for several lines of coverage (shown in lines 1-16) for two different types of policies: those covered under group policies or under individual policies. Under the appropriate column (group or individual), place the dollar amount of premiums written for the lines of coverage. If your company did not provide that type of coverage, either leave the column blank or enter zero.

Definitions:

- 1. Disability Income—Health insurance that provides income payments to the insured when the insured is disabled due to sickness or accident.
- 2. Medical—Large group (>50) means medical insurance covering employers that have more than 50 employees, even if fewer than 50 are covered by the insurance. This includes both policies issued directly to the employer and coverage of large employers under a policy issued to an association, multiple employer trust, private purchasing alliance or any similar group. It does not include coverage under the Federal Employees Health Benefit Plan. Medical does not include stand-alone dental or vision coverage, accident only coverage, long-term care or nursing home care coverage, Medicare supplement coverage, or specified disease coverage.
- 3. Medical—Small group (<=50) means medical insurance covering employers that have 50 or fewer employees. This includes both policies issued directly to the employer and coverage of small employers under a policy issued to an association, multiple employer trust, private purchasing alliance, or any similar group. Medical does not include stand-alone dental or vision coverage, accident only coverage, long-term care or nursing home care coverage, Medicare supplement coverage, or specified disease coverage. [See 24-A M.R.S.A. [§ 2808-B\(1\).](#)]
- 4. Medical –Individual means medical coverage unrelated to employment, whether through an individual policy or a group policy issued to an association, private purchasing alliance, or any similar group. Medical does not include stand-alone dental or vision coverage, accident only coverage, long-term care or nursing home care coverage, Medicare supplement coverage, or specified disease coverage. Do not include short-term policies. [See 24-A M.R.S.A. [§ 2736-C\(1\)\(C\).](#)]

- 5. Dental—Coverage for dental services under a group or individual policy. This does not include dental coverage that is part of a major medical policy.
- 6. Medicare Supplement insurance means a group or individual policy that is advertised, marketed or designed primarily as a supplement to reimbursements under Medicare for hospital, medical or surgical expenses.. It does not include Medicare Advantage plans or Medicare drug plans. [See 24-A M.R.S.A. [§ 5001\(1\)\(4\)](#).]
- 7. Long-Term care, Nursing Home Care, and Home Health Care [See 24-A M.R.S.A. [§ 5072\(4\)](#) and [§ 5051\(1\)](#), (3), and (3-A).]
- 8. CHAMPUS supplement means coverage that supplements TRICARE (formerly CHAMPUS).
- 9. Cancer and Dread Disease includes coverage only for specified catastrophic diseases.
- 10. Federal Employees Health Benefit Plan-- A system of "managed competition" through which employee health benefits are provided to full-time permanent civilian government employees and qualified retirees of the United States Government.
- 11. Stop Loss is employee benefit excess insurance purchased by employers in order to limit their exposure under self-insured medical plans. [See 24-A M.R.S.A. [§ 704\(C-1\)](#).]
- 12. Short-Term Medical—Medical coverage for one year or less. [See 24-A M.R.S.A. [§ 2849-B\(1\)](#).]
- 13. All Other—Any written health insurance premium other than those in lines 1 through 12, including but not limited to hospital indemnity, accident only, vision, and Medicare Advantage plans.
- 15. Credit Disability—Covers monthly payments to a lender if someone is injured or disabled to the point where they cannot work. [See 24-A M.R.S.A. [§ 2853\(2\)](#).]

Edit Checks:

The bottom of the Supplemental Insurance Reporting Form contains edits which indicate the lines and columns from this form that must equal specific lines and columns from your Annual Statement blanks. Separate edit checks are listed depending upon what color Annual Statement blank your company was required to complete.

Due Date:

The Supplement Insurance Reporting form must be returned to the Bureau of Insurance by April 1, 2010. You may e-mail your responses to Bradford.L.Brown@maine.gov or mail your response to him at the Maine Bureau of Insurance, 34 State House Station, Augusta, Maine 04333-0034.