



Health Insurance Reform and The Affordable Care Act



Health Insurance Premium Increases and Rate Review Authority in Illinois

ILLINOIS DEPARTMENT OF INSURANCE

FEBRUARY 1, 2011

Overview of Presentation

2

- The Affordable Care Act and Federal Requirements
 - An Aside: the reason for the individual mandate.
- Rate Review in Other States
- Current Illinois Law
 - Why is health insurance different from car insurance?
- State of Illinois Actions to Date
- Questions? Please send questions to:
doi.webinars@illinois.gov

Affordable Care Act – Health Insurance Premium Increases

3

- Effective upon enactment, the Affordable Care Act (ACA) establishes a process for the joint review of “unreasonable” rate increases by states and the U.S. Department of Health and Human Services (HHS). [Section 1003; PHSA Sec. 2794]
 - Beginning in 2014, this review will include premium increases of health insurance coverage offered through an Exchange and outside of an Exchange. [Section 1003; PHSA Sec. 2794(b)(2)]
 - In addition, an Exchange must “consider” information regarding premium increases “when determining whether to make a health plan available through the Exchange.” [Sec. 1311(e)(2)]

Affordable Care Act – Health Insurance Premium Increases

4

Proposed Regulations (45 CFR Part 154):

(Opportunity for public comment until 02/22/11)

- All insurers seeking a rate increase of 10% or more will be required to publicly disclose information justifying the rate increase.
 - States with “effective rate review programs” will determine whether the rate increase is unreasonable.
 - In states that do not have an “effective rate review program,” HHS will determine propriety.
- In states without rate review authority, the proposed regulations do not prevent insurers from implementing “unreasonable” rate increases.

Rate Review in Other States

5

- In 30 other states, insurance regulators have the authority to protect consumers against unreasonable rate increases.
 - State approaches vary considerably.
 - ✦ Minnesota – prior approval by the Insurance Commissioner before a premium rate becomes effective.
 - ✦ Alaska – prior approval only in cases where the premium rate increases by 10% or more.
- Nearby states with “prior approval” authority include Indiana, Iowa, Minnesota, Tennessee, and Ohio.

Rate Review and Premiums

6

PREMIUMS V. RATE REVIEW AUTHORITY - INDIVIDUAL MARKET

STATE	SINGLE AVERAGE MONTHLY PREMIUM (2009)	FAMILY AVERAGE MONTHLY PREMIUM (2009)	PREMIUM RANK (1 = Lowest 29 = Highest)	RATE REVIEW AUTHORITY
Iowa	\$2,606	\$5,609	1	Prior approval
North Carolina	\$2,613	\$5,120	2	Prior approval
Ohio	\$2,724	\$5,701	4	Prior approval
Illinois	\$2,843	\$6,317	8	N/A
Montana	\$3,305	\$5,968	23	N/A
Maine	\$4,061	\$7,260	26	N/A

Rate Review and Premiums

7

PREMIUMS V. RATE REVIEW AUTHORITY - SMALL GROUP MARKET

STATE	SINGLE AVERAGE MONTHLY PREMIUM (2008)	FAMILY AVERAGE MONTHLY PREMIUM (2008)	PREMIUM RANK (1 = Lowest 47 = Highest)	RATE REVIEW AUTHORITY
Washington	\$198	\$521	1	Prior Approval
North Dakota	\$250	\$660	2	Prior Approval
Tennessee	\$274	\$724	3	Prior Approval
Oregon	\$275	\$726	4	Prior Approval
Illinois	\$393	\$1,035	37	N/A
Utah	\$397	\$1,046	38	N/A
Wyoming	\$412	\$1,087	42	N/A

Rate Review and Premiums

8

PREMIUMS V. BENEFIT MANDATES - SMALL GROUP MARKET

STATE	SINGLE AVERAGE MONTHLY PREMIUM (2008)	FAMILY AVERAGE MONTHLY PREMIUM (2008)	PREMIUM RANK (1 = Lowest 47 = Highest)	NUMBER OF MANDATES	MANDATE RANK (1 = Most 51 = Fewest)
Washington	\$198	\$521	1	57	5
Virginia	\$313	\$825	11	60	4
Illinois	\$393	\$1,035	37	47	19
Wyoming	\$412	\$1,087	42	34	33
Alaska	\$504	\$1,329	47	32	37

Sources:

Average Premiums: *AHIP Center for Policy & Research*

Mandates: *Council for Affordable Health Insurance*

Rate Review Authority: *NAIC Compendium of State Laws on Insurance Topics* (full cites below)

Health Insurance Premiums in Illinois

- Many factors influence the “average premium” paid by Illinois families. In the individual market:
 - Individuals can be denied health insurance for any reason other than “race, color, religion or national origin.” (215 ILCS 5/424)
 - Individuals can be offered insurance that excludes coverage for preexisting conditions.
 - ✦ From 2007-2009, 36% of adults were denied coverage, charged a higher premium, or offered coverage excluding treatment for a preexisting condition (Commonwealth Fund Issue Brief, July 2009).
 - The actual premium an individual pays will vary depending on the person’s health status, gender, age, geography, and renewal penalty.
 - ✦ Illinois law does not restrict the amount of increase attributable to any rating factor.

Illinois Market Concentration

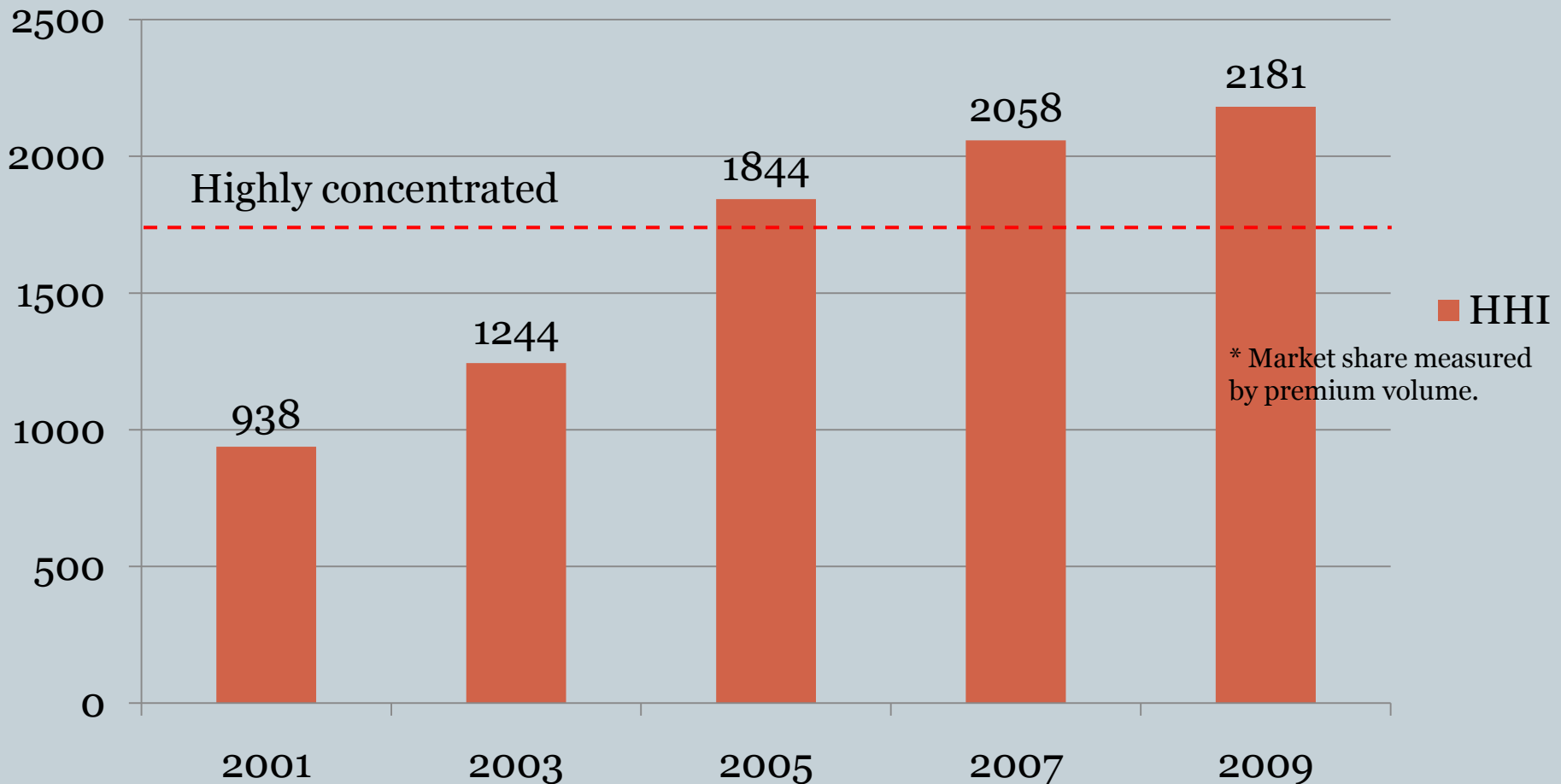
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- The Herfindahl-Hirschman Index (HHI) is a standard measure of market concentration, taking into account both the number of firms, and the market share that each commands. The lower the HHI index, the more competition in the market.
 - An HHI index of over 1000 indicates a “moderately concentrated” market and an HHI above 1800 indicates a “highly concentrated” market.
 - Generally, more competition means lower prices.

Illinois Market Concentration

11

Herfindahl-Hirschmann Index



Current Illinois Law

12

- **Current Illinois law:**
 - In general, does not restrict health insurance premium increases.
 - Does not vest in the Department any rate review or approval authority.
 - ✦ Before enactment of the ACA, most plans were not required to even inform the Department of rate changes or rate amounts for group policies.
 - Gives small businesses (2-50 employees) nominal protection against rate increases.

Current Illinois Law

13

Small Group Market (2-50 employees)

- Small Employer Health Insurance Rating Act (215 ILCS 93/1 *et seq.*):
 - ✦ “Rate bands” limit variation in premium charged to small employers based on health status of employees.
 - ✦ No limit on increase at renewal.
 - Insurers must submit annual “certification of compliance.”
- Result: Small businesses remain vulnerable to onerous rate increases.

Current Illinois Law

14

Individual Market

- All plans offered in the individual market must file premium rates with the Department (215 ILCS 5/355; 50 Ill. Adm. Code 5420.60)
 - Some companies offer individual coverage through association or “discretionary group” plans, and do not file rates for those plans.
- Illinois law does not limit the premiums that can be charged to any individual or the amount of any rate increase.

DOI Actions to Date

15

- **Individual Major Medical Health Policy Rate Filing Report**
 - Shows rate increases of up to 80% dating back to 2005—well before enactment of the ACA.
 - ✦ http://insurance.illinois.gov/reports/special_reports/IMMHPRF RG.pdf
- **Company Bulletin CB2010-08**
 - Requires insurers to submit information justifying premium rates and rate increases for all individual and group plans.
 - ✦ <http://insurance.illinois.gov/cb/2010/cb2010-08.pdf>
 - New electronic reporting system established, effective February 1, 2011.

DOI Actions to Date

16

- **Rate Review Grant**

- In September 2010, the Department applied for and was awarded a \$1 million federal grant to enhance its rate review capacity.
 - ✦ http://insurance.illinois.gov/hirc/resources/premiumreviewapplication_full.pdf
- As outlined in the grant application, the Department will use grant dollars for:
 - ✦ Necessary upgrades to technical infrastructure;
 - ✦ Additional staff to assist with new filings and reviews; and
 - ✦ Enhanced information for consumers and policymakers.
- DOI will introduce legislation to repose rate approval/denial authority in the Department.
 - ✦ Rate increases must be justified, protect insurer solvency, and be fair to patients, families, and employers.

QUESTIONS or COMMENTS?

doi.webinars@illinois.gov

ADDITIONAL FEEDBACK

The Department of Insurance welcomes comments at any time. Feedback can be sent to doi.healthreform@illinois.gov .

Premiums v. Rate Regulation - Small Group Market

State	2008 Average Monthly Premium ¹			Rate Regulation ²	Rate Review Authority ³	Details ⁴	Number of Mandates ^{1, 4}	Rank (1 = Most; 51=Fewest)
	Single	Family	Rank (1 = Lowest; 50=Highest)					
Washington	\$198	\$521	1	Adjusted community rating	Prior Approval (30 day deemer)	Small group health plan rate change (60 day deemer: Healthcare service contractor, large group & HMO large group)	57	5
North Dakota	\$250	\$660	2	Rate bands (13:1 or less)	Prior Approval (60 day deemer)	All health	34	33
Tennessee	\$724	\$724	3	Rate bands (13:1:1 - 19:1)	Prior Approval (30 day deemer)	All health except experience rated groups	41	25
Oregon	\$275	\$726	4	Adjusted community rating	Prior Approval	Individual and groups except groups with >25	40	28
Michigan	\$280	\$738	5	Rate bands (13:1 or less)	N/A	N/A	25	47
Arkansas	\$283	\$747	6	Rate bands (13:1:1 - 19:1)	N/A	N/A	43	24
Alabama	\$296	\$781	7	Adjusted community rating	N/A	File for informational purposes (Accident & Health)	21	50
South Dakota	\$298	\$787	8	Rate bands (13:1:1 - 19:1)	N/A	N/A	30	39
Kentucky	\$301	\$793	9	Rate bands (13:1:1 - 19:1)	N/A	File and use (All health)	41	25
Arizona	\$305	\$803	10	Rate bands (13:1 or less)	N/A	N/A	47	19
Virginia	\$313	\$825	11	No rating structure	N/A	File and receive acknowledgement (group health)	60	4
Missouri	\$313	\$826	12	Rate bands (19:1:1 - 25:1)	N/A	N/A	41	25
Iowa	\$317	\$835	13	Rate bands (19:1:1 - 25:1)	Prior Approval (30 day deemer, 60 days prior to effective date)	All health	26	46
Kansas	\$318	\$839	13	Rate bands (19:1:1 - 25:1)	N/A	File and use (Individual and group)	39	30
South Carolina	\$319	\$841	15	Rate bands (25:1:1 or greater)	N/A	N/A	29	41
Ohio	\$320	\$845	16	Rate bands (13:1:1 - 19:1)	Prior Approval (30 day deemer)	All health	29	41
Mississippi	\$324	\$854	17	Rate bands (13:1:1 - 19:1)	N/A	Filed for review and acknowledgment (All health)	29	41
Georgia	\$330	\$870	18	Rate bands (25:1:1 or greater)	NA	Information filing required for any rate increase or new program (All health)	45	21
Indiana	\$333	\$878	19	Rate bands (25:1:1 or greater)	N/A	File and use (30 days) (Group Health) Prior Approval (HMOs)	34	33
Pennsylvania	\$337	\$889	20	No rating structure	Prior Approval (45 day deemer)	All health: some groups exempt if meet reqs.	52	11
Nevada	\$339	\$893	21	Rate bands (25:1:1 or greater)	N/A	N/A	52	11
Montana	\$340	\$896	22	Rate bands (13:1:1 - 19:1)	N/A	N/A	40	28
Louisiana	\$349	\$919	23	Rate bands (25:1:1 or greater)	N/A	File and use (30 day deemer) (All health)	50	17
California	\$349	\$920	24	Rate bands (13:1 or less)	N/A	File (Individual and Group Health)	56	8
Minnesota	\$353	\$932	25	Rate bands (13:1 or less)	Prior Approval (60 day deemer)	All policies.	68	2
North Carolina	\$355	\$936	26	Rate bands (13:1 or less)	Prior approval	All Health (All individual rate revisions, medical service corp rates)	50	17
Maine	\$360	\$948	27	Adjusted community rating	N/A	File and use (60 days) (All health)	55	9
Oklahoma	\$364	\$960	28	Rate bands (19:1:1 - 25:1)	N/A	Rates filed with forms (all health)	38	31
Nebraska	\$365	\$963	29	Rate bands (13:1 or less)	N/A	Rate schedules filed with policy forms (all health)	32	37
District of Columbia	\$366	\$966	30	No rating structure	N/A	File and use (60 day review) for hospital and medical services subscriber contracts. Prior approval (90 day deemer) for health products with mental illness benefit.	28	44
Colorado	\$368	\$969	31	Rate bands (13:1 or less)	Prior Approval (60 day deemer)	No need for prior approval if no increase requested (file and use) (All Health)	51	15
Texas	\$369	\$972	32	Rate bands (25:1:1 or greater)	N/A	File and use (Accident & Health)	57	5
New Mexico	\$380	\$1,001	33	Rate bands (13:1:1 - 19:1)	Prior Approval (60 day notice to policy holder)	All health	57	5
Florida	\$383	\$1,009	34	Rate bands (13:1:1 - 19:1)	Prior Approval (30 day deemer)	All health	52	11
Connecticut	\$388	\$1,023	35	Adjusted community rating	Prior Approval (45 days)	HMOs	54	10
Wisconsin	\$388	\$1,024	36	Rate bands (25:1:1 or greater)	N/A	N/A	34	33
Illinois	\$393	\$1,035	37	Rate bands (25:1:1 or greater)	N/A	N/A	47	19
Utah	\$397	\$1,046	38	Rate bands (25:1:1 or greater)	N/A	File and use (health benefit plans)	23	49
New Jersey	\$401	\$1,057	39	Adjusted community rating	N/A	N/A	45	21
New York	\$407	\$1,072	40	Community rating	Prior Approval	Individual and group	51	15
West Virginia	\$412	\$1,085	41	Rate bands (13:1 or less)	Prior Approval (60 day deemer)	All health (rate filings required for new products or rate changes; rate filing shall be filed with forms)	38	31
Wyoming	\$412	\$1,087	42	Rate bands (25:1:1 or greater)	N/A	N/A	34	33
Maryland	\$414	\$1,091	43	Adjusted community rating	Prior Approval (90 days for changes)	All health	66	3
New Hampshire	\$420	\$1,107	44	Adjusted community rating	Prior Approval (30 day deemer)	All individual health and small employer med, hospital or surgical. File and use (30 days) all other group health.	44	23
Rhode Island	\$432	\$1,139	45	Adjusted community rating	Prior Approval (60 day deemer)	All health	70	1
Massachusetts	\$458	\$1,208	46	Adjusted community rating	N/A	Actuarial certification required (small groups)	52	11
Alaska	\$504	\$1,329	47	Rate bands (19:1:1 - 25:1)	Prior Approval	File and use if change is no greater than 10% (Each insurer)	32	37
Delaware	Data not available			Rate bands (13:1 or less)	N/A	File and use (45 days) (All health)	27	45
Hawaii	Data not available			No rating structure	Prior Approval: all managed care plans	Annual compliance filing: approved plans	24	48
Idaho	Data not available			Rate bands (19:1:1 - 25:1)	N/A	N/A	13	51
Vermont	Data not available			Community rating	Prior approval (30 day deemer)	All health	30	39

¹ AHP CENTER FOR POLICY & RESEARCH, SMALL GROUP HEALTH INSURANCE IN 2008: A Comprehensive Survey of Premiums, Product Choices and Benefits - P. 9 (Mar. 2009), available at <http://www.ahpresearch.org/pdfs/smallgroupsurvey.pdf>.

² NAIC COMPENDIUM OF STATE LAWS ON INSURANCE TOPICS: FILING REQUIREMENTS HEALTH INSURANCE FORMS AND RATES (2009).

³ VICTORIA C. BUNCE & JP WESKE, COUNCIL FOR AFFORDABLE HEALTH INSURANCE, HEALTH INSURANCE MANDATES IN THE STATES (2009), available at http://www.cahi.org/cahi_contents/resources/pdf/HealthInsuranceMandates2009.pdf.

⁴ A mandate is a requirement that health insurance policies provide coverage for a certain benefit or category of benefits, thereby spreading the costs for needed medical treatment across all policy holders.

⁵ NAIC & THE CENTER FOR INSURANCE POLICY & RESEARCH, HEALTH INSURANCE RATE REGULATION, available at http://naic.org/documents/topics_health_insurance_rate_regulation_brief.pdf (last visited Apr. 16, 2010).

⁶ *Id.*

Premiums v. Regulation - Individual Market

State	Average Annual Premium 2009 ¹			Average Annual Premium 2006-2007 ²			Rate Regulation ⁶	Rate Review Authority ³	Details ⁷	Number of Mandates ⁵	Rank (1 = Most; 50=Fewest)
	Single	Family	Rank (1 = Lowest; 50=Highest)	Single	Family	Rank (1 = Lowest; 50=Highest)					
Wisconsin	Data not available			\$1,254	\$3,087	1	No rating structure	N/A	File and use (30 days) (Individual health)	34	33
Oregon	Data not available			\$1,297	\$4,627	2	Adjusted community rating	Prior Approval	Individual Health	40	28
Utah	Data not available			\$1,574	\$3,259	3	Rating bands	N/A	File and use (Individual Health)	23	49
Michigan	Data not available			\$1,878	\$4,118	4	No rating structure	N/A	File and Use (Individual Health)	25	47
Idaho	Data not available			\$2,006	\$4,501	5	Rating bands	N/A	File and use, certification required (Individual Health)	13	51
Washington				\$2,015	Data not available	6	Adjusted community rating	N/A	File and use (informational only) (Individual health)	57	5
Arkansas	Data not available			\$2,153	\$4,891	7	No rating structure	Prior approval (30 day deemer)	Individual Health	43	24
Iowa	\$2,606	\$5,609	1	\$2,202	\$4,477	8	No rating structure	Prior approval (30 day deemer; 60 days prior to effective)	All Health	26	46
Alabama	Data not available			\$2,208	\$4,601	9	No rating structure	N/A	File for informational purposes (Accident & Health)	21	50
Maryland	Data not available			\$2,208	\$5,055	10	No rating structure	Prior approval (90 days for changes)	All Health	66	3
Tennessee	\$3,150	\$5,957	15	\$2,221	\$4,804	11	No rating structure	Prior approval (30 day deemer)	All Health	41	25
North Dakota	Data not available			\$2,316	\$4,715	12	Rating bands	Prior approval (60 day deemer)	All Health	34	33
Delaware				\$2,346	Data not available	13	No rating structure	N/A	File and use (45 days) (All Health)	28	44
Virginia	\$3,229	\$6,383	21	\$2,359	\$4,763	14	No rating structure	Prior approval	Individual Health	60	4
Kansas	\$2,615	\$5,529	3	\$2,363	\$5,011	15	No rating structure	N/A	File and use (Individual and Group Health)	39	30
Georgia	\$3,228	\$7,408	20	\$2,419	\$4,668	16	No rating structure	N/A	Information filing required for any rate increase or new program (All Health)	45	21
Minnesota	\$2,978	\$7,013	14	\$2,424	\$5,508	17	Rating bands	Prior approval (60 day deemer)	All policies.	68	2
Oklahoma	\$3,220	\$5,947	19	\$2,435	\$4,406	18	No rating structure	N/A	Rates filed with form. (All Health)	38	31
Mississippi	Data not available			\$2,489	\$5,015	19	No rating structure	N/A	File for review and acknowledgement (All Health)	29	41
Ohio	\$2,724	\$5,701	4	\$2,498	\$5,303	20	No rating structure	Prior approval (40 day deemer)	All Health	29	41
Illinois	\$2,843	\$6,317	8	\$2,499	\$5,438	21	No rating structure	N/A	Rate filing must be submitted with policy form (Individual Health)	47	19
Indiana	\$2,930	\$6,236	10	\$2,504	\$5,302	22	No rating structure	Prior approval (30 day deemer)	Individual Health	34	33
Nebraska	\$2,950	\$5,979	12	\$2,505	\$5,037	23	No rating structure	N/A	Rate schedules must be filed with policy forms	32	37
Missouri	\$2,725	\$5,657	5	\$2,518	\$5,535	24	No rating structure	N/A	N/A	41	25
Colorado	\$2,777	\$5,939	7	\$2,537	\$5,446	25	No rating structure	Prior Approval (60 day deemer)	File and use if no increase requested (All Health)	51	15
Kentucky	\$2,740	\$5,980	6	\$2,537	\$5,517	26	Rating bands	N/A	File and use (All Health)	41	25
West Virginia	Data not available			\$2,540	\$5,097	27	Rating bands	Prior approval (60 day deemer)	Rate filings required for new products or rate changes; rate filings filed with forms (All health)	38	31
California	\$2,943	\$6,567	11	\$2,565	\$5,884	28	No rating structure	N/A	File (Individual & Group Health)	56	8
Arizona	\$2,961	\$5,292	13	\$2,591	\$4,598	29	No rating structure	N/A	Filed for review (HCSO and group health forms are not filed) (Individual Health)	47	19
Wyoming	Data not available			\$2,688	\$5,391	30	No rating structure	N/A	N/A	34	33
Texas	\$3,208	\$6,459	18	\$2,782	\$5,501	31	No rating structure	N/A	File and use (Individual Health)	57	5
Montana	\$3,305	\$5,968	23	\$2,866	\$5,683	32	No rating structure	N/A	N/A	40	28
South Dakota	Data not available			\$2,914	\$6,585	33	Rating bands	N/A	File and use (30 day deemer) (Individual Health)	30	39
Florida	\$3,191	\$6,527	16	\$2,949	\$4,282	34	No rating structure	Prior approval (30 day deemer)	All Health	52	11
South Carolina	\$3,204	\$6,128	17	\$2,981	\$5,346	35	No rating structure	Prior approval (90 day deemer)	Individual Health	29	41
North Carolina	\$2,613	\$5,120	2	\$3,080	\$7,125	36	No rating structure	Prior approval	All individual rate revisions (All Health)	50	17
Nevada	\$3,276	\$6,119	22	\$3,118	\$5,665	37	Rating bands	N/A	File and use (Individual Health)	52	11
Connecticut	\$3,503	\$8,477	25	\$3,326	\$7,749	38	No rating structure	Prior Approval (30 day deemer)	Individual Health	54	10
New Mexico				\$3,362	Data not available	39	Rating bands	Prior approval (60 day notice to policy holder)	All Health	57	5
New Hampshire	\$3,427	\$7,672	24	\$3,368	\$7,105	40	Rating bands	Prior approval (30 day deemer)	All individual health and small employer med, hospital or surgical. File and use (30 days) all other group health.	44	23
Louisiana	Data not available			\$3,377	\$7,171	41	No rating structure	N/A	File and use (30 day deemer) (All Health)	50	17
Maine	\$4,061	\$7,260	26	\$3,686	\$6,951	42	Adjusted community rating	N/A	N/A	55	9
Pennsylvania	\$2,873	\$6,381	9	\$3,949	\$6,535	43	No rating structure	Prior approval (45 day deemer)	All Health	52	11
Rhode Island	\$4,779	\$11,107	27	\$4,412	\$10,062	44	Rating bands	Prior approval (60 day deemer)	All Health	70	1
New York	\$6,630	\$13,296	29	\$4,734	\$12,254	45	Pure community rating	Prior Approval	Individual Health	51	15
New Jersey	Data not available			\$5,326	\$10,398	46	Adjusted community rating	Prior approval (60 day deemer. Resubmission - 30 day deemer)	Individual Health	45	21
Mass.	\$5,143	\$13,288	28	\$8,537	\$16,897	47	Adjusted community rating	Prior approval	Non-group	52	11
Alaska				Data not available			No rating structure	Prior approval	File and use if change is no greater than 10% (each insurer)	32	37
District of Columbia				Data not available			No rating structure	Prior approval (30 day deemer)	Individual Accident and Sickness	27	45
Hawaii				Data not available			No rating structure	Prior approval: all managed care plans	Annual compliance filing: approved plans	24	48
Vermont				Data not available			Adjusted community rating	Prior approval (30 day deemer)	All Health	30	39

¹ AHIP CENTER FOR POLICY & RESEARCH, INDIVIDUAL HEALTH INSURANCE 2009: A Comprehensive Survey of Premiums, Availability, and Benefits - p. 6 (Oct. 2009), available at <http://www.ahipresearch.org/pdfs/2009IndividualMarketSurveyFinalReport.pdf>.

² AHIP CENTER FOR POLICY & RESEARCH, INDIVIDUAL HEALTH INSURANCE 2006-2007: A Comprehensive Survey of Premiums, Availability, and Benefits - p. 8-9 (Dec. 2007), available at http://www.ahipresearch.org/pdfs/Individual_Market_Survey_December_2007.pdf.

³ NAIC COMPENDIUM OF STATE LAWS ON INSURANCE TOPICS: FILING REQUIREMENTS HEALTH INSURANCE FORMS AND RATES (2009).

⁴ VICTORIA C. BUNCE & JP WIESKE, COUNCIL FOR AFFORDABLE HEALTH INSURANCE, HEALTH INSURANCE MANDATES IN THE STATES (2009), available at http://www.cahi.org/cahi_contents/resources/pdf/HealthInsuranceMandates2009.pdf.

⁵ A mandate is a requirement that health insurance policies provide coverage for a certain benefit or category of benefits, thereby spreading the costs for needed medical treatment across all policyholders.

⁶ NAIC COMPENDIUM OF STATE LAWS ON INSURANCE TOPICS: FILING REQUIREMENTS HEALTH INSURANCE FORMS AND RATES (2009).

⁷ *Id.*