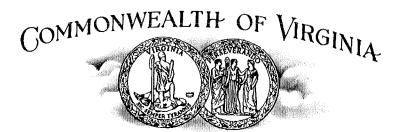
JACQUELINE K. CUNNINGHAM COMMISSIONER OF INSURANCE



P.O. BOX 1157 RICHMOND, VIRGINIA 23218 TELEPHONE: (804) 371-9741 TDD/VOICE: (804) 371-9206 http://www.scc.virginia.gov

STATE CORPORATION COMMISSION BUREAU OF INSURANCE

March 1, 2012

ADMINISTRATIVE LETTER 2012-02

TO: All Insurers Licensed to Write Accident and Sickness Insurance in Virginia, and All Health Services Plans and Health Maintenance Organizations Licensed in Virginia

RE: 14VAC5-190-10 et seq.: Rules Governing the Reporting of Cost and Utilization Data Relating to Mandated Benefits and Mandated Providers - 2011 Reporting Period

The purpose of this Administrative Letter is to assist carriers in the preparation of the Annual Report of Cost and Utilization Data relating to Mandated Benefits and Providers required pursuant to 14VAC5-190-10 *et seq.* and § 38.2-3419.1 of the Code of Virginia, and to remind all affected carriers of the reporting requirements applicable to mandated benefits and providers for the 2011 reporting year.

The *Virginia total annual written premiums for all accident and sickness policies or contracts* referenced in the regulation is the amount reported to the Commission on the company's Annual Statement for the year ending December 31, 2011. This is the amount used to determine if a report is required. If the total annual written premium reported to Virginia for all accident and sickness lines is less than \$500,000 or the company is licensed to issue only credit accident and sickness insurance, the company is **EXEMPT** from filing any information and a report is not required.

A company may be required to file a **COMPLETE** report or an **ABBREVIATED** report if the total annual written premium reported to Virginia for all accident and sickness lines is at least \$500,000 (excluding credit only accident and sickness). Carriers should refer to 14VAC 5-190-40 for an explanation of the circumstances under which a **COMPLETE** or an **ABBREVIATED** report must be filed.

Each affected carrier must submit a completed Form MB-1 to furnish the required information. It is not acceptable to submit more than one Form MB-1 for a single carrier or to consolidate information from different carriers on one form.

The completed Form MB-1 (cover sheet and sections) is due on or before May 1, 2012 and may be submitted electronically. The due date may not be extended for any reason, including the inability to file the reports electronically. The instructions, representative CPT and ICD-9-CM codes, and forms for the 2011 reporting period are available on the Bureau of Insurance's website at:

http://www.scc.virginia.gov/boi/co/health/mandben.aspx

The instructions explain the type of information necessary to complete Form MB-1. <u>All</u> sources of information, including 14VAC5-190-10 *et seq.*, §§ 38.2-3408 through 38.2-3418.16, as applicable, § 38.2-4221, and CPT and ICD-9-CM codes, should be consulted in the preparation of this report.

Please note that the CPT and ICD-9-CM codes are not intended to exhaust all medical codes that may be used in collecting data for Form MB-1, but are representative of some of the more common codes associated with the mandated benefits.

Carriers are reminded that failure to submit a substantially complete and accurate report pursuant to the provisions of 14VAC5-190-10 *et seq.*, by May 1, 2012, may be considered a violation subject to a penalty as set forth in § 38.2-218 of the Code of Virginia. Lack of notice, lack of information, lack of means of producing the required data, or other such reasons will not be accepted for not submitting a complete and accurate report in a timely manner.

ALERT! Beginning with calendar year 2012, companies are required to capture data for autism spectrum disorder. This data must be included in the 2012 mandated benefits report due on or before May 1, 2013. Please refer to § 38.2-3418.17 for coverage details.

Correspondence regarding reporting requirements should be directed to:

Mary Ann Mason
Senior Insurance Market Examiner
Forms and Rates Section
Bureau of Insurance – Life and Health Division
P. O. Box 1157
Richmond, VA 23218
Telephone: (804) 371-9348
FAX: (804) 371-9944

Email Address: maryann.mason@scc.virginia.gov

System related questions or problems should be directed to:

Andrew Iverson
Insurance Analyst
Bureau of Insurance – Automated Systems
P. O. Box 1157
Richmond, VA 23218
Telephone: (804) 371-9851
FAX: (804) 371-9516

Email Address: andrew.iverson@scc.virginia.gov

Cordially,

Jacqueline K. Cunningham Commissioner of Insurance

JKC/ds