WAC 284-66-232 Form for medicare supplement refund calculation.

MEDICARE SUPPLEMENT REFUND CALCULATION FORM FOR CALENDAR YEAR _____

TYPE	SMSBP(w)		
For the State of			
Washington Policy or Certificate Form No(s).			
Company Name			
NAIC Group Code	NAIC Company Code _		
Person Completing This Exhibit			
Title Telephon	e Number		
Line		(a) Earned Premium (x)	(b) Incurred Claims (y)
Current Year's Experience a. Total (all policy years) b. Current year's issues (z) c. Net (for reporting purposes = 1a - 1b)			
2. Past Years' Experience (All Policy Years)			
3. Total experience (Net Current Year + Past Years' Experience)			
4. Refunds Last year (Excluding Interest)			
5. Previous Since Inception (Excluding Interest)			
6. Refunds Since Inception (Excluding Interest)			
7. Benchmark Ratio Since Inception (SEE WORKSHEET FOR RATIO 1)			
8. Experienced Ratio Since Inception			
Total Actual Incurred Claims (line 3, col b) Total Earned Premium (line 3, col a) - Refunds Since Inception (line 6)	= Ratio 2		
9. Life Years Exposed Since Inception			
If the Experienced Ratio is less than the Benchmark Ratio, and there are more than 50 proceed to calculation of refund.	00 life years exposure, then		
10. Tolerance Permitted (obtained from credibility table)			
11. Adjustment to incurred Claims for Credibility			
Ratio 3 = Ratio 2 + Tolerance			
If Ratio 3 is more than benchmark ratio (ratio 1), a refund or credit to premium is not rec	uired.		
If Ratio 3 is less than the benchmark ratio, then proceed.			
12. Adjust Incurred Claims = [Total Earned Premium (line 3, col. a) - Refunds Since Inception (line 6)] X Ratio 3 (line 11)			
13. Refund = Total Earned Premiums (line 3, col a) - Refunds Since Inception (line 6) -			
Adjusted Incurred Claims (line 12) Benchmark Ratio (Ratio 1)			
If the amount on line 13 is less than .005 times the annualized premium in force as of D year, then no refund is made. Otherwise, the amount on line 13 is to be refunded or credit refund and/or credit against premiums to be used must be attached to this form.			

Medicare Supplement Credibility Table

Life Year Exposed Since Inception	Tolerance
10,000+	0.0%
5,000 - 9,999	5.0%
2,500 - 4,999	7.5%
1,000 - 2,499	10.0%
500 - 999	15.0%
If Less than 500	No credibility

MEDICARE SUPPLEMENT REFUND CALCULATION FORM FOR CALENDAR YEAR____

TYPE						SM	SBP(w)			
For the State	e of									
_	•									
-								Code		
	(w) "SN	ISRP" =	Standardiz	ed Medicare St	ınnlement	Renefit I	Plan			
				s and fees char		Deliciti 1	iun			
	` '		tive Life R		50 u .					
	(z) This		used as "		ned Premi	um" for	Year 1 of 1	next year's "Wo	orksheet for	Calculation of
I certify th	nat the abo	ove inform	mation and	calculations ar	e true and	accurate	to the best	of my knowled	ge and belie	ef.
	Sign	nature								
	Nan	ne - Pleas	se Type							
	Title	e								
	Date	e								
				WORKSHE	ET #1 - IND	IVIDUAL	POLICIES			
				FOR	ORM FOR T ARK RATIO LINDIVIDU. ALENDAR Y	SINCE INC AL POLIC	CEPTION IES	F		
ТҮРЕ						S	SMSBP (P)			
FOR THE S	TATE OF W	ASHINGT								
_	•									
								y Code		
(a) Year	(b) Earned	(c) Factor	(d) (b) x (c)	(e) Cumulative	(f) (d) x (e)	(g) Factor	(h) (b) x (g)	(i) Cumulative	(j) (h) x (i)	(o) Policy Year

(a) Year	(b) Earned Premium	(c) Factor	(d) (b) x (c)	(e) Cumulative Loss Ratio	(f) (d) x (e)	(g) Factor	(h) (b) x (g)	(i) Cumulative Loss Ratio	(j) (h) x (i)	(o) Policy Year Loss Ratio
1		2.770		0.442		0.000		0.000		0.40
2		4.175		0.493		0.000		0.000		0.55
3		4.175		0.493		1.194		0.659		0.65
4		4.175		0.493		2.245		0.669		0.67
5		4.175		0.493		3.170		0.678		0.69
6		4.175		0.493		3.998		0.686		0.71
7		4.175		0.493		4.754		0.695		0.73
8		4.175		0.493		5.445		0.702		0.75
9		4.175		0.493		6.075		0.708		0.76
10		4.175		0.493		6.650		0.713		0.76
11		4.175		0.493		7.176		0.717		0.76
12		4.175		0.493		7.655		0.720		0.77
13		4.175		0.493		8.093		0.723		0.77
14		4.175		0.493		8.493		0.725		0.77

(a) Year	(b) Earned Premium	(c) Factor	(d) (b) x (c)	(e) Cumulative Loss Ratio	(f) (d) x (e)	(g) Factor	(h) (b) x (g)	(i) Cumulative Loss Ratio	(j) (h) x (i)	(o) Policy Year Loss Ratio
15+ ¹		4.175		0.493		8.684		0.725		0.77
Total:			(k):		(1):		(m):		(n):	

FN for $15+^{1}$: To include the earned premium for all years prior to as well as the 15th year prior to the current year.

Benchmark Ratio Since Inception: (1 + n) / (k + m):

- (a): Year 1 is the current calendar year 1
 Year 2 is the current calendar year 2 (etc.)
 (Example: If the current year is 1991, then:
 Year 1 is 1990: Year 2 is 1989; etc.)
- (o): These loss ratios are not explicitly used in computing the benchmark loss ratios. They are the loss ratios, on a policy year basis, which result in the cumulative loss ratio displayed on this worksheet. They are shown here for informational purposes only.
- (b): For the calendar year on the appropriate line in column (a), the premium earned during that year for policies issued in that year.
- (p) "SMSBP" = Standardized Medicare Supplement Benefit Plan
- k = Total of Column "d" 1 = Total of Column "f"
- m = Total of Column "f" m = Total of Column "h" n = Total of Column "j"

WORKSHEET #1 - GROUP POLICIES

REPORTING FORM FOR TIME CALCULATION OF BENCHMARK RATIO SINCE INCEPTION FOR GROUP POLICIES FOR CALENDAR YEAR _____

TYPE							SMSBP (P)				
Washingto	on Policy or Ce	rtificate Fo	rm No								
Company	Company Name										
NAIC Group Code NAIC Company Code											
	Address										
(a) Year	(b) Earned	(c) Factor	(d) (b) x (c)	(e) Cumulative	(f) (d) x (e)	(g) Factor	(h) (b) x (g)	(i) Cumulative	(j) (h) x (i)	(o) Policy Year	

(a) Year	(b) Earned Premium	(c) Factor	(d) (b) x (c)	(e) Cumulative Loss Ratio	(f) (d) x (e)	(g) Factor	(h) (b) x (g)	(i) Cumulative Loss Ratio	(j) (h) x (i)	(0) Policy Year Loss Ratio
1		2.770		0.507		0.000		0.000		0.46
2		4.175		0.567		0.000		0.000		0.63
3		4.175		0.567		1.194		0.759		0.75
4		4.175		0.567		2.245		0.771		0.77
5		4.175		0.567		3.170		0.782		0.8
6		4.175		0.567		3.998		0.792		0.82
7		4.175		0.567		4.754		0.802		0.84
8		4.175		0.567		5.445		0.811		0.87
9		4.175		0.567		6.075		0.818		0.88
10		4.175		0.567		6.650		0.824		0.88
11		4.175		0.567		7.176		0.828		0.88
12		4.175		0.567		7.655		0.831		0.88
13		4.175		0.567		8.093		0.834		0.89
14		4.175		0.567		8.493		0.837		0.89
15+		4.175		0.567		8.684		0.838		0.89
Total:			(k):		(1):		(m):		(n):	

FN for 15+: To include the earned premium for all years prior to as well as the 15th year prior to the current year.

Benchmark Ratio Since Inception: (1 + n) / (k + m):

- (a): Year 1 is the current calendar year 1
 Year 2 is the current calendar year 2 (etc.)
 (Example: If the current year is 1991, then:
 Year 1 is 1990: Year 2 is 1989; etc.)
- (b): For the calendar year on the appropriate line in column (a), the premium earned during that year for policies issued in that year.
- k = Total of Column "d" 1 = Total of Column "f" m = Total of Column "h" n = Total of Column "j"

- (o): These loss ratios are not explicitly used in computing the benchmark loss ratios. They are the loss ratios, on a policy year basis, which result in the cumulative loss ratio displayed on this worksheet. They are shown here for informational purposes only.
- (p) "SMSBP" = Standardized Medicare Supplement Benefit Plan

[Statutory Authority: RCW 48.66.030 (3) (a), 48.66.041, and 48.66.165. WSR 09-24-052 (Matter No. R 2009-08), § 284-66-232, filed 11/24/09, effective 1/19/10. Statutory Authority: RCW 48.02.060. WSR 93-01-048 (Order 92-25), § 284-66-232, filed 12/10/92, effective 1/10/93. Statutory Authority: RCW 48.02.060, 48.20.450, 48.20.460, 48.20.470, 48.30.010, 48.44.020, 48.44.050, 48.44.070, 48.46.030, 48.46.130 and 48.46.200. WSR 92-06-021 (Order R 92-1), § 284-66-232, filed 2/25/92, effective 3/27/92.]