

SERFF Tracking Number: ERCB-128493902 State: Arkansas  
Filing Company: Westport Insurance Corporation State Tracking Number:  
Company Tracking Number: WIC-ESLE- AR-12-06694-1-F  
TOI: H12 Health - Excess/Stop Loss Sub-TOI: H12.004 Self-Funded Health Plan  
Product Name: Employers Excess Stop Loss  
Project Name/Number: Endorsement filing for Employers Excess Stop Loss /WIC-ESLE- AR-12-06694-1-F

## Filing at a Glance

Company: Westport Insurance Corporation

Product Name: Employers Excess Stop Loss

TOI: H12 Health - Excess/Stop Loss

Sub-TOI: H12.004 Self-Funded Health Plan

Filing Type: Form

Implementation Date Requested: 08/01/2012

State Filing Description:

SERFF Tr Num: ERCB-128493902 State: Arkansas

SERFF Status: Closed-Approved-  
Closed State Tr Num:

Co Tr Num: WIC-ESLE- AR-12-  
06694-1-F

Author: Theresa Cox

Date Submitted: 06/22/2012

State Status: Approved-Closed

Reviewer(s): Rosalind Minor

Disposition Date: 06/22/2012

Disposition Status: Approved-  
Closed

Implementation Date:

## General Information

Project Name: Endorsement filing for Employers Excess Stop Loss

Project Number: WIC-ESLE- AR-12-06694-1-F

Requested Filing Mode: Review & Approval

Explanation for Combination/Other:

Submission Type: New Submission

Group Market Type: Employer

Filing Status Changed: 06/22/2012

State Status Changed: 06/22/2012

Created By: Theresa Cox

Corresponding Filing Tracking Number: WIC-ESLE- AR-12-06694-1-F

Filing Description:

Westport Insurance Corporation is filing the Independent Review Organization Endorsement SP 5 575 0612 for attachment to its Excess Stop Loss policy Form SP 5 117 0911. The policy form SP 5 117 0911 was approved in your filing number 49864 on October 3, 2011.

Status of Filing in Domicile: Not Filed

Date Approved in Domicile:

Domicile Status Comments:

Market Type: Group

Group Market Size: Large

Overall Rate Impact:

Deemer Date:

Submitted By: Theresa Cox

The policy provides excess coverage at a specific retention level chosen by the self-insured employer. The coverage is for benefits provided under the Self-Insured Employee Benefit Plan. The maximum coverage is typically \$1 million per member per year, less the employer's specific retention. Aggregate coverage is also available with policy limits of at least \$1 million. This product is available for employers with more than 50 employees. The Westport Insurance

SERFF Tracking Number: ERCB-128493902 State: Arkansas  
 Filing Company: Westport Insurance Corporation State Tracking Number:  
 Company Tracking Number: WIC-ESLE- AR-12-06694-1-F  
 TOI: H12 Health - Excess/Stop Loss Sub-TOI: H12.004 Self-Funded Health Plan  
 Product Name: Employers Excess Stop Loss  
 Project Name/Number: Endorsement filing for Employers Excess Stop Loss /WIC-ESLE- AR-12-06694-1-F

Corporation targets employers with 200+ employees.

This endorsement, developed in light of the health reform provisions of the Patient Protection and Affordable Care Act, will attach to all newly issued policies and will put benefits that were once denied and are subsequently paid, due to a ruling of an IRO, as being paid during the same Policy Period in which they were Incurred. In other words, as if no denial had occurred.

There is no rate impact associated with this endorsement.

We are requesting an effective date of August 1, 2012.

State Narrative:

## Company and Contact

### Filing Contact Information

Theresa Cox, Compliance Specialist theresa\_cox@swissre.com  
 5200 Metcalf 800-255-6931 [Phone] 6181 [Ext]  
 Overland Park, KS 66201

### Filing Company Information

Westport Insurance Corporation	CoCode: 39845	State of Domicile: Missouri
5200 Metcalf	Group Code: 181	Company Type:
Overland Park, KS 66201	Group Name: Swiss Re	State ID Number:
(800) 255-6931 ext. [Phone]	FEIN Number: 48-0921045	

## Filing Fees

Fee Required?	Yes
Fee Amount:	\$50.00
Retaliatory?	Yes
Fee Explanation:	Westport's domiciliary state of MO charges \$50 for form filing, which is the same as Arkansas filing fee. Therefore, we are submitting \$50 with this filing.
Per Company:	No

COMPANY	AMOUNT	DATE PROCESSED	TRANSACTION #
Westport Insurance Corporation	\$50.00	06/22/2012	60348065

SERFF Tracking Number: ERCB-128493902 State: Arkansas  
Filing Company: Westport Insurance Corporation State Tracking Number:  
Company Tracking Number: WIC-ESLE- AR-12-06694-1-F  
TOI: H12 Health - Excess/Stop Loss Sub-TOI: H12.004 Self-Funded Health Plan  
Product Name: Employers Excess Stop Loss  
Project Name/Number: Endorsement filing for Employers Excess Stop Loss /WIC-ESLE- AR-12-06694-1-F

## Correspondence Summary

### Dispositions

Status	Created By	Created On	Date Submitted
Approved-Closed	Rosalind Minor	06/22/2012	06/22/2012

*SERFF Tracking Number:*      *ERCB-128493902*                      *State:*                      *Arkansas*  
*Filing Company:*              *Westport Insurance Corporation*                      *State Tracking Number:*  
*Company Tracking Number:*      *WIC-ESLE- AR-12-06694-1-F*  
*TOI:*                      *H12 Health - Excess/Stop Loss*                      *Sub-TOI:*                      *H12.004 Self-Funded Health Plan*  
*Product Name:*              *Employers Excess Stop Loss*  
*Project Name/Number:*              *Endorsement filing for Employers Excess Stop Loss /WIC-ESLE- AR-12-06694-1-F*

## **Disposition**

Disposition Date: 06/22/2012

Implementation Date:

Status: Approved-Closed

Comment:

Rate data does NOT apply to filing.



SERFF Tracking Number: *ERCB-128493902* State: *Arkansas*  
 Filing Company: *Westport Insurance Corporation* State Tracking Number:  
 Company Tracking Number: *WIC-ESLE- AR-12-06694-1-F*  
 TOI: *H12 Health - Excess/Stop Loss* Sub-TOI: *H12.004 Self-Funded Health Plan*  
 Product Name: *Employers Excess Stop Loss*  
 Project Name/Number: *Endorsement filing for Employers Excess Stop Loss /WIC-ESLE- AR-12-06694-1-F*

## Form Schedule

**Lead Form Number: SP 5 117 0911**

Schedule Item	Form Number	Form Type	Form Name	Action	Action Specific Data	Readability	Attachment
Approved- Closed 06/22/2012	SP 5 575 0612	Policy/Cont ract/Fratern al	Independent Review Organization Endorsement	Initial		0.000	SP 5 575 0612.pdf
		Certificate: Amendmen t, Insert Page, Endorseme nt or Rider					

# **Westport Insurance Corporation**

## **INDEPENDENT REVIEW ORGANIZATION ENDORSEMENT**

**THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.**

**IT IS AGREED that the Policy is hereby amended as follows:**

Section Seven: Claims, subsection 13 is added to this **Policy**:

- 13. BENEFITS THAT ARE PAID AS A RESULT OF EXTERNAL REVIEW BY AN INDEPENDENT REVIEW ORGANIZATION (IRO).** If an IRO reverses the denial of a claim, which causes **Benefits** to be **Paid** for a **Person** within twelve (12) months after the last day of the **Policy Period** in which the **Loss** was **Incurred**, such **Benefits** will be deemed to have been **Paid** during the same **Policy Period** in which they were **Incurred**, provided that such **Benefits** are not eligible under any other coverage and are otherwise payable under the terms of this **Policy**. Such **Benefits** will be excluded from any other **Policy Period**. For purposes of this paragraph, IRO means the external review organization as required by the Patient Protection and Affordable Care Act.

You or your **Administrator** must give us prior notice of any pending IRO reviews of a denied claim under your **Plan**, otherwise this provision does not apply.

All other terms and conditions of this **Policy** shall remain unchanged.

This **Endorsement** forms a part of the **Policy** to which attached, effective on the inception date of the **Policy** unless otherwise stated herein.

(The information below is required only when this **Endorsement** is issued subsequent to the preparation of the **Policy**.)

**Endorsement Effective**

**Policy No.**

**Named Insured**

**WESTPORT INSURANCE CORPORATION**

*Facsimile signature to be inserted*

*Facsimile signature to be inserted*

President

Secretary

SERFF Tracking Number: *ERCB-128493902* State: *Arkansas*  
 Filing Company: *Westport Insurance Corporation* State Tracking Number:  
 Company Tracking Number: *WIC-ESLE- AR-12-06694-1-F*  
 TOI: *H12 Health - Excess/Stop Loss* Sub-TOI: *H12.004 Self-Funded Health Plan*  
 Product Name: *Employers Excess Stop Loss*  
 Project Name/Number: *Endorsement filing for Employers Excess Stop Loss /WIC-ESLE- AR-12-06694-1-F*

## Supporting Document Schedules

	<b>Item Status:</b>	<b>Status</b>
<b>Bypassed - Item:</b> Application	Approved-Closed	<b>Date:</b> 06/22/2012
<b>Bypass Reason:</b> Not applicable to this filing. We are filing an endorsement.		
<b>Comments:</b>		

	<b>Item Status:</b>	<b>Status</b>
<b>Satisfied - Item:</b> Flesch Certification	Approved-Closed	<b>Date:</b> 06/22/2012
<b>Comments:</b>		
<b>Attachment:</b>		
WIC Flesch Reading Ease Certification.pdf		

**FLESCH SCORE CERTIFICATION**

I, David Newkirk, Vice President of Westport Insurance Corporation do certify that the form contained in this filing meets the minimum reading ease score on the Flesch Reading Ease. The averaged Flesch Reading Ease score on this endorsement was 43. When this endorsement is attached to the policy form the Flesch Reading Ease score was 46.



David Newkirk, Vice President  
Westport Insurance Corporation  
5200 Metcalf  
Overland Park, KS 66201