



Review requirements	Reference	Description of review standards requirements	
<b>GENERAL REQUIREMENTS (FOR ALL FILINGS)</b>			
Requirements	OAR 836-010-0011 As required on SERFF or our Web site	<p>Required filing requirements are located on SERFF or on our Web site at: <a href="http://www.insurance.oregon.gov/docs/serff/filing_requirements.html">www.insurance.oregon.gov/docs/serff/filing_requirements.html</a>.</p> <p>If filing via SERFF, the proper information must be attached to the correct schedule items in order for your forms filing to be considered complete. The clean copy of the submitted form must be attached under the Form Schedule tab. Each form filed for approval must be attached to a separate Schedule Item under this tab. <b>The form number should appear exactly as shown on the PDF document.</b> Any edition/revision date used in the form number must be included under the Form Number column. It is not necessary to use the Edition Date column. The Form Type column and the Action Specific Data column must be completed correctly by providing the Oregon Filing Number of the previous filing, and the correct form number with the edition date of the form being replaced. Please do not file the same form for approval more than once. If the same policy form will be used for multiple product offerings, it need only be filed once. Provide an explanation of the different programs under the General Filing Description in SERFF, or in a cover letter.</p> <p>Forms of a generic nature that will be used on different lines of insurance may be filed using “interline” coding. Use the General Filing Description or a cover letter to note all of the lines or programs it will apply to. For example, a FRAUD WARNING STATEMENT filed as a simple endorsement that could be attached to all personal lines or all commercial lines policies, need only be sent once; thereby avoiding duplicates of the same form being assigned to more than one analyst.</p>	

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Requirements	OAR 836-010-0011 As required on SERFF or our Web site	<p>If submitting a paper filing, please see #9 below.</p> <ol style="list-style-type: none"> <li>1. The NAIC Transmittal form (for paper filings only not required for SERFF filings).</li> <li>2. Is a Filing Description attached under the General Information tab, or a Cover letter or Filing Memorandum attached under the Supporting Documentation tab that explains the intent or purpose of the forms/rules/rates?</li> <li>3. Is a third party filers' letter of authorization attached if applicable?</li> <li>4. The signed Certificate of Compliance, form 440-3894 is attached to the Supporting Documentation tab</li> <li>5. For form submissions, has a comparison document (annotated, highlighted, red-lined, or side-by-side) been provided for each previously approved form? Submit document/s under the Supporting Documentation tab.</li> <li>6. The rates and/or rules are attached to the Rate Schedule tab. An actuarial documentation that provides an overview of the contents of the filing, and the reasons and procedures used to support the rate change has been attached to the Supporting Documentation tab.</li> <li>7. The forms being filed for approval are attached to the Form Schedule tab.</li> <li>8. Attach to the Supporting Documentation tab, those approved amendatory endorsements which bring the forms into compliance with Oregon statutes.</li> <li>9. When submitting a paper filing, send two complete sets of the entire filing. Include a self-addressed, stamped envelope that is large enough to return the second copy of the filing.</li> </ol> <p>NOTE: This checklist does not need to be submitted with the filings. However, it may be requested by the reviewer. Please use this document as a tool to help you comply with our requirements.</p>	<p>Yes No</p> <p><input type="checkbox"/> <input type="checkbox"/></p> <p><input type="checkbox"/> <input type="checkbox"/></p> <p><input type="checkbox"/> <input type="checkbox"/></p> <p><input type="checkbox"/> <input type="checkbox"/></p> <p><input type="checkbox"/> <input type="checkbox"/></p> <p><input type="checkbox"/> <input type="checkbox"/></p> <p><input type="checkbox"/> <input type="checkbox"/></p> <p><input type="checkbox"/> <input type="checkbox"/></p> <p><input type="checkbox"/> <input type="checkbox"/></p>
Review ORS	742.003(1) and 737.205	<p>Check all that are submitted in this filing for review:</p> <ol style="list-style-type: none"> <li>1. New policy or program.</li> <li>2. Endorsements</li> <li>3. Certificate of Insurance, if using a master policy.</li> <li>4. Notice of claim requirements issued with liability policies.</li> <li>5. Rates and rules.</li> </ol>	<p>Yes N/A</p> <p><input type="checkbox"/> <input type="checkbox"/></p> <p><input type="checkbox"/> <input type="checkbox"/></p> <p><input type="checkbox"/> <input type="checkbox"/></p> <p><input type="checkbox"/> <input type="checkbox"/></p> <p><input type="checkbox"/> <input type="checkbox"/></p>
Requirements	ORS 742.003 ORS 737.205	<p>Prior approval of all forms is required. No policy has been issued or will be issued upon the forms in this filing until approved. Rates can be used only after receipt by the Division.</p>	<p>Yes N/A</p> <p><input type="checkbox"/> <input type="checkbox"/></p>

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<b>FORMS</b>			
Access to courts	ORS 742.061	Attorney fees - If a claim settlement is not made within six months and action is brought to court, and the plaintiff's recovery exceeds the amount paid by the defendant, the court will set attorney fees to be paid as part of the costs of legal action and any appeal.	Yes N/A <input type="checkbox"/> <input type="checkbox"/>
Application	ORS 742.013	Claims cannot be denied based upon information provided by the insured, or on behalf of an insured, unless the signed application is made part of the policy. If the application is attached to, or made part of the policy, prior approval is required.	Yes N/A <input type="checkbox"/> <input type="checkbox"/>
Fraud Bulletin	2010-3	If the policy has fraud, concealment, misrepresentation language, then the application is required to include a fraud warning. If one is included, it is general in nature and does not state that the applicant is "guilty" of fraud, but that he or she "may be" guilty of fraud. Fraud or misstatement warnings that mention criminal or civil penalties must avoid definite statements of the criminal nature of an act, guilt, or possible penalties. A warning that specifies that knowingly providing false information "may be" a crime, which "may be" grounds for criminal or civil penalties is appropriate.	Yes N/A <input type="checkbox"/> <input type="checkbox"/>
	ORS 742.013 Bulletin 2010-3	Fraud or misstatement warnings that mention denial of recovery as a possible consequence of an omission, concealment, misstatement or misrepresentation must disclose that in order to deny a claim on this basis, the insurer must demonstrate that the misinformation was material to the content of the contract, that the insurer relied upon this information, and that the misinformation was either provided fraudulently or was material to the risk or hazard assumed by the insurer.  Fraud or misstatement warnings that mention cancellation, voiding, or rescission of a policy as possible consequences of an omission, concealment, misstatement or misrepresentation must disclose the line-specific statutory limits to these remedies. Insurers should review Bulletin 2010-3 and the Insurance Code to determine whether their statements comply.	Yes N/A <input type="checkbox"/> <input type="checkbox"/>
Misrepresentation /Misstatements	ORS 742.013	A provision in the policy, or the application, makes it clear that statements made by the insured, are representations and not warranties.	Yes N/A <input type="checkbox"/> <input type="checkbox"/>
Rebates ORS	746.035 ORS 746.045	Are inducements or rebates specified in the policy? If "yes," explain in the cover letter and identify the location in the policy and rating plan.	Yes N/A <input type="checkbox"/> <input type="checkbox"/>

Review requirements	Reference	Description of review standards requirements	Answer Yes or No
Arbitration	ORS 36.600 ORS 36.740	The policy provides for arbitration if claim settlement cannot be reached. The parties may elect arbitration by mutual agreement at the time of the dispute after the claimant has exhausted all internal appeals and can only be binding by consent of the insured person. <i>(If the policy provides for arbitration when claim settlement cannot be reached and the policy owner elects arbitration, arbitration takes place under the laws of Oregon held in the insured's county or any other county in this state agreed upon.)</i>	Yes N/A <input type="checkbox"/> <input type="checkbox"/>
Bankruptcy	ORS 742.031	The policy includes a bankruptcy provision similar to that in ORS 742.031.	Yes N/A <input type="checkbox"/> <input type="checkbox"/>
Cancellation & nonrenewal	ORS 742.023	Personal liability and personal umbrella - Any cancellation and return of premium provisions must be explained in the policy.	Yes N/A <input type="checkbox"/> <input type="checkbox"/>
	ORS 742.702 ORS 742.706 OAR 836-085-0010	Commercial liability: The effective date of cancellation for cause is no less than 10 working days after the insured receives notice. A policy in effect for 60 or more days may be canceled prior to policy expiration only for specified reasons: <ul style="list-style-type: none"> <li>(a) Nonpayment of premium.</li> <li>(b) Fraud or material misrepresentation made by or with the knowledge of the named insured in obtaining the policy, continuing the policy, or in presenting a claim under the policy.</li> <li>(c) Substantial increase in the risk of loss after insurance coverage has been issued or renewed, including but not limited to an increase in exposure due to rules, legislation or court decision.</li> <li>(d) Failure to comply with reasonable loss-control recommendations.</li> <li>(e) Substantial breach of contractual duties, conditions, or warranties.</li> <li>(f) Determination that the continuation of a line of insurance or class of business will jeopardize a company's solvency, or will place the insurer in violation of the insurance laws of Oregon or any other state.</li> <li>(g) Loss or decrease in reinsurance covering the risk.</li> <li>(h) Any other reason approved by the director by rule.</li> </ul>	Yes N/A <input type="checkbox"/> <input type="checkbox"/>

Review requirements	Reference	Description of review standards requirements	Answer Yes or No
Cancellation & nonrenewal continued	ORS 742.706(1) OAR 836-085-0025	If an insurer offers to renew a commercial liability policy on terms less favorable or at higher rates, the new terms or rates may take effect on the renewal date with 45 days' written notice. If the insurer does not provide such notice, the insured may cancel the renewal policy within 45 days. Earned premium for the period of time the renewal policy was in force shall be calculated pro rata at the lower of the current or previous year's rate. If the insured accepts the renewal, changes shall be effective immediately following the prior policy's expiration date.	Yes N/A <input type="checkbox"/> <input type="checkbox"/>
	ORS 742.706(2)	Nonrenewal of a commercial liability policy is not effective until at least 45 days after the insured receives a written notice of nonrenewal. If, after an insurer provides a notice of nonrenewal as described in this statute, the insurer extends the policy 90 days or less, an additional notice of nonrenewal is not required with respect to the extension.	Yes N/A <input type="checkbox"/> <input type="checkbox"/>
	ORS 742.706(4) OAR 836-085-0015	If a commercial liability policy is issued for a term longer than one year, and for additional consideration the premium is guaranteed for the term of that policy, the insurer may not refuse to renew the policy or increase the premium.	Yes No <input type="checkbox"/> <input type="checkbox"/>
Claims-made	Division position	The form is required to provide no less than a 12-month extended-reporting option that is available regardless of who terminates the contract. The insured is allowed no less than 30 days to make the election.	Yes No <input type="checkbox"/> <input type="checkbox"/>
Defense costs	ORS 742.063	A liability form that states defense costs are included within the policy limits, will contain a prominent statement disclosing that the costs of defending a claim are included in the policy limits and may reduce the limit available to pay claims	Yes No <input type="checkbox"/> <input type="checkbox"/>
Legibility of forms	ORS 742.005(2)	The forms are clear and understandable in the presentation of premiums, labels, and description of contents, title, headings, backing, and other indication (including restrictions) in the provisions. The information is clear and understandable to the consumer and is not unintelligible, uncertain, ambiguous, abstruse, or likely to mislead.	Yes No <input type="checkbox"/> <input type="checkbox"/>
Loss settlement	ORS 742.053	The insurer will furnish a claim form upon request after notice of claim.	Yes No <input type="checkbox"/> <input type="checkbox"/>
Discrimination	ORS 746.015 OAR 836-081-0010	The policy does not unfairly discriminate in availability of insurance, application or rates, dividends, or other benefits or terms and conditions of insurance policies.	Yes N/A <input type="checkbox"/> <input type="checkbox"/>

Review requirements	Reference	Description of review standards requirements	Answer Yes or No
Discrimination, continued	ORS 106.300 thru ORS 106.340 Bulletin 2008-2 OAR 836-081-0010	A provision that recognizes a Domestic Partnership is included in the policy. Terms and provisions in the Insurance Code and in rules adopted under the Code that refer to or indicate the marital relationship, its dissolution and dependents in a marital relationship will apply in the same manner to domestic partnerships, to their dissolution and to dependents in the partnership.	Yes N/A <input type="checkbox"/> <input type="checkbox"/>
Participating policies	OAR 836-080-0120(1)	Upon request, a written statement is provided to the policyholder, specifying whether the policy is or is not a participating policy.	Yes No <input type="checkbox"/> <input type="checkbox"/>
	OAR 836-080-0120(2)	A participating policy requires a participation provision that includes substantially equivalent wording to that stated in the rule.	Yes No <input type="checkbox"/> <input type="checkbox"/>
	OAR 836-080-0125	The insurer is prohibited from representing payment of any dividend as a specific amount or a premium percentage, or fixing the dividend formula.	Yes No <input type="checkbox"/> <input type="checkbox"/>
	OAR 836-080-0130 Commercial only	Any dividend statement made to the policyholder must be in writing and follow the requirements in this rule.	Yes No <input type="checkbox"/> <input type="checkbox"/>
Policy period	ORS 742.048	The policy states that coverage commences at 12:01 a.m. on the policy effective date, unless a binder states otherwise.	Yes No <input type="checkbox"/> <input type="checkbox"/>

<b>Medical Malpractice additional standards</b>			
Policy documentation	ORS 742.405	Membership in a professional association cannot be required as a condition of issuance of medical malpractice insurance to a physician. However, a non-member may be subject to reasonable risk management, loss control, or similar programs and conditions to which members are subject. No surcharge or discount can be applied based on membership.	Yes No <input type="checkbox"/> <input type="checkbox"/>

<b>RATE, RULE, RATING PLAN, CLASSIFICATION, AND TERRITORY FILING REQUIREMENTS</b>			
Discrimination	ORS 746.015 OAR 836-081-0010	Rates, rating plans, and rating systems do not discriminate unfairly in the availability of insurance and application of rates.	Yes No N/A <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
Fictitious groups	ORS 737.600(3)(d) & (f) OAR 836-042-0300 thru OAR 836-042-0322	If filing a group for rate purposes, the group meets the requirements of ORS 737.600(3)(f) and mass-marketing plan rules.	Yes No N/A <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
Schedule Rating Plans	ORS 737.205	Schedule rating plans identify the credit or debit modification criteria and the minimum and maximum plan modifications. Rating plans must be filed prior to use.	Yes No N/A <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
Rebates	ORS 746.035 ORS 746.045	Are inducements or rebates specified in the policy? If "yes," explain in the cover letter and identify the location in the policy and the rating plan.	Yes No N/A <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>

Ratemaking generally					
Credibility ORS	737.310 OAR 836-010-0021	1. Provide all data used and judgments made. 2. Provide description of methodology used.	Yes	No	N/A
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Fees, and Service Charges	ORS 737.310 OAR 836-010-0021	Provide cost-accounting justification on initial filings and subsequent changes.	Yes	No	N/A
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Review requirements	Reference	Description of review standards requirements			
Loss valuation	ORS 737.310 OAR 836-010-0021	Premiums:	Yes	No	N/A
		1. Earned premium and earned premium at present rates for each coverage or combined coverages using the extension of exposures or on level factors.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		2. A rate level history.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		3. Adjustment for inflation.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		4. State whether data is on a basic or total-limits basis.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	ORS 737.310 OAR 836-010-0021	Loss data:	Yes	No	N/A
		1. For each coverage and each year used in calculating the rate level, state whether data is on a basic or total-limits basis.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		2. Each year and coverage includes:	Yes	No	N/A
		Earned exposures.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		Incurred losses.			
		Loss development factors.			
		Description of the methodology used to derive the loss development factors.			
		Unallocated loss adjustment expense.			
		Allocated loss adjustment expenses.			
		Ultimate incurred losses and loss adjustment expenses.			
		Trend factors.			
		Trended ultimate incurred losses and loss adjustment expense.			
		3. If losses are separated into catastrophic and non-catastrophic, a description of the method used to separate losses.	Yes	No	N/A
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Review requirements	Reference	Description of review standards requirements	Check answer or enter page & paragraph
Risk classification	ORS 737.310 OAR 836-010-0021	For each rating variable, territory, and tier levels provide the following information: 1. Earned premium, earned exposures, incurred loss, and number of claims.	Yes No N/A <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
		2. Methodology and judgments used to arrive at the differentials.	Yes No N/A <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
		3. Adjustments to ensure homogeneity of rating group characteristics.	Yes No N/A <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
		4. All data used and judgments made.	Yes No N/A <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
		5. Description of methodology used.	Yes No N/A <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
Investment income	ORS 737.310(9) OAR 836-010-0021	1. Cash flow method. <i>or</i>	
		2. Alternative method showing amount of investment income earned on loss, LAE, and unearned premium reserve to earned premium.	
Trending	ORS 737.310 OAR 836-010-0021	1. Provide all internal loss-trend data or external fast-track-loss-trend data used.	
		2. Separate determinations of loss severity and frequency trends.	
		3. Calculation of annual trend factors including statistical results.	
		4. All data used and judgments made.	
		5. Description of methodology used.	
Underwriting profit & contingencies	ORS 737.310 OAR 836-010-0021	1. Oregon data for commission and brokerage.	
		2. Countrywide data for general and other acquisition expenses as reported in the <i>Insurance Expense Exhibit</i> .	
		3. Oregon data for taxes, licenses, and fees.	
		4. Expense trend.	
		5. Historic experience.	