

Administrator's message



Teresa Miller

Following the disaster in Japan, I'm sure some of you are seeing increased interest in earthquake insurance and perhaps flood insurance for coastal residents wanting protection against a tsunami. While earthquake coverage remains readily available in Oregon, I want you to know that we do expect to see increases in the cost of this insurance. Our property and casualty technician, Cece Newell, explains why on Page 5 of this newsletter.

Meanwhile, as we pass the midway point for the 2011 Legislature, I want to share these updates on some key legislation. I apologize in advance that some of this will be outdated by the time you see this newsletter.

Children's health insurance enrollment: Senate Bill 514, if passed, is intended to restore year-round enrollment for children in Oregon's individual insurance market. As you know, insurers may no longer reject children under age 19 for coverage because of pre-existing conditions. They may, however, limit signups to certain enrollment periods. This bill and related rules would establish a reinsurance program through the Oregon Medical Insurance Pool that evenly spreads the risk of enrolling high-cost children so that no insurer pays a disproportionate amount. The legislation has passed in the Senate and now is awaiting House approval. If it becomes law, we could return to year-round enrollment by fall 2011 and put an end to a lot of consumer confusion.

Interstate compact: House Bill 2095 passed out of the House and is now in the Senate. This legislation would add Oregon to the states that belong to the Interstate Insurance Product Regulation Commission, making life insurance products more readily available to Oregonians.

Unlawful Trade Practices Act: Senate Bill 719 would allow the Attorney General to regulate insurance under the Unlawful Trade Practices Act (UTPA). In effect, this would create a dual system of state insurance regulation, which raises some concerns. For example, if the Attorney General and our Department of Consumer and Business Services (DCBS) both have authority to address violations of the Insurance Code, one could issue rules that are inconsistent with rules issued by the other. Also, DCBS and the Attorney General could both separately require conflicting or different remedial action for a violation of the Insurance Code. If the Attorney General and DCBS could not agree on the remedial action necessary, which regulator should the producer or insurer listen to? This bill is with the Senate Committee on General Government, Consumer, and Small Business Protection.

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Administrator's message, continued

State continuation: Senate Bill 87, which provides important expansions of this program, was heard in late March by the Senate General Government, Consumer, and Small Business Protection Committee and we are awaiting scheduling of a work session after some technical fixes. State continuation is a version of federal COBRA law for employees who work for businesses with fewer than 20 employees. It allows employees who lose their jobs under certain circumstances to continue their group coverage for nine months. This bill would allow spouses and dependents of an affected employee to independently elect state continuation coverage even if the employee is ineligible. (For example, an employee may be ineligible for state continuation if he or she is eligible for Medicare.) It also clarifies Oregon law to ensure that Oregonians who lose group health care coverage because of a reduction in hours are eligible for state continuation. Finally, it requires better notice to consumers of their eligibility for state continuation.

Federal health reform: Senate Bill 89 reconciles Oregon law with the Affordable Care Act, the federal health reform legislation signed by President Obama just over one year ago. For example, the bill strengthens the internal appeals process for commercial health policies in cases of certain claim denials; prohibits rescission (retroactive cancellation) of health benefit plan coverage for unintentional misrepresentation; requires health benefit plans to provide coverage for preventive service without cost sharing such as co-payments, co-insurance, and deductibles; and gives the department authority to enforce the provisions of the Affordable Care Act. The bill moved from a subcommittee to the full Health Care, Human Services, and Rural Health Policy Committee after being amended.

Administrative simplification: Senate Bill 94, which passed in the Senate and is now in the House, authorizes the Department of Consumer and Business Services to adopt uniform standards for administrative and financial transactions for providers and health plans. The standards will free providers to spend more time with patients and less time on paperwork, including electronic forms. Here's an Oregon Health Authority (OHA) article that gives an example of what prompted the legislation: <http://www.oregon.gov/OHA/features/110328-streamline-admin.shtml>. OHA would work with a stakeholder group to develop recommendations for DCBS.

Health insurance rate review: I saved rate review for last because, at this writing, there are several bills proposed that would significantly change the way we review health insurance rates. They include Senate Bills 717 and 718. Both are before the Senate Committee on General Government, Consumer, and Small Business Protection.

SB 717 would require public meetings and potential hearings on any proposed rate increase that averages 7 percent or more and would affect 1,000 or more policyholders. This legislation would increase the cost of rate reviews without lowering health insurance costs since those are driven largely by medical claims. There is no evidence, based on the states that hold public hearings, that hearings themselves lower costs. We already have authority to hold public hearings and have used the threat of a hearing in the past as leverage to bring down a rate request. We also worry about these types of potential repercussions:

- » In an effort to stay under the 7 percent threshold, insurers may underprice policies for a few years then come in with a very large increase that will be justified by increases in medical claims costs. We don't believe this type of rate volatility is good for consumers.
- » We would no longer be able to use the threat of a hearing to convince an insurer requesting a 14 percent increase, for example, to reduce it to 11 percent since a public hearing would happen in either case.
- » The cost of additional staff, the cost of interveners' experts, the cost of the AG to represent consumers at hearings, and the costs of insurers to prepare their cases for these public forums would all increase insurers' administrative costs and would be passed on to policyholders.

SB 718 that would require insurers to notify policyholders any time they seek a rate increase of 7 percent or more and the increase would affect at least 1,000 policyholders. The notice would direct policyholders to our website, where consumers would have access to information about our rate review process and would be able to comment on a rate filing. This provision is consistent with the work we have done in the last few years to increase the transparency of our process.

Continued on next page

Administrator's message, continued

However, this legislation would also make public all communications between the DCBS director or any employee of the department with decision-making authority and an insurer that has made a rate filing. I believe this would hinder our ability to have candid discussions with insurers about their financial position or business plans. These discussions benefit consumers and help us make the best decisions possible. For example, we have been cutting back rate requests in markets where insurers have been losing money. This requires a detailed understanding of a company's financial position and, quite honestly, the insurers' stomach for staying in the market. My experience is that companies will speak much more frankly when their competitors are not in the room.

I want to depart from legislation momentarily to note that we are always seeking ways to improve our rate review process. Our goal, however, is to find ways to use rate review to help reduce health care costs since they account for 85 cents to 91 cents of every premium dollar.

L&E Actuaries & Consultants from Dallas, Texas, is now looking at this issue for us. The company's \$150,000 study, which we are funding with a federal grant, will explore such issues as whether Oregon should require insurers to spend a minimum amount on primary care or reject proposed rate increases if certain provider costs go up by more than a certain percentage each year. We expect the study to be completed in fall 2011. ●

Financial regulation

Financial exams

The Insurance Division periodically — usually every three years — conducts in-depth examinations of the financial condition of Oregon insurance companies.

Ongoing financial examinations

The division is conducting financial examinations of Standard Insurance Company, Oregon Insurance Guaranty Association, Oregon Life and Health Insurance Guaranty Association and the Oregon FAIR

Plan. It is participating with other states on examinations of Farmers Insurance Company of Oregon, Safeco Insurance Company of Oregon, and California Casualty General Insurance Company of Oregon.

We have begun financial examinations of Advantage Dental Plan, First American Title Insurance Company of Oregon, Western Grocers Employee Benefit Trust, and Pioneer Educators Health Trust. ●

Oregon Health Connect

A new website, <http://www.oregonhealthconnect.org>, is a resource agents can use as they help uninsured or underinsured clients with their health care. The site, created by the Insurance Division and Oregon Health Authority, also makes it easy to find links to key Oregon public and community health-related websites, including clinics.

You'll find contact information for Oregon's major public programs, such as Healthy Kids and Oregon Health Plan, as well as a calculator that tells a family how their income compares to the Federal Poverty Level (FPL). The staff members at the toll-free telephone number 1-855-999-3210 are available to help you problem solve as you work with Oregonians who struggle to find a program that fits their needs.

Finally, our new **Consumer Guide** to Health Insurance is proving popular. Thanks to a federal grant, we can mail you copies for your clients. We just ordered a version in Spanish, as well. There are plenty of spots within the book where you can jot down your name and phone number.

To order: e-mail DCBS.inmail@state.or.us. ●



Producer licensing

By Jim Thompson, producer licensing manager



Jim Thompson

Annuity suitability training

Many of you are asking about Oregon's new requirement that producers undergo annuity training so that they make good recommendations to clients. Here are answers to questions I am receiving:

What training is required?

Any insurance producer who sells annuities must complete a one-time, four-credit course provided by a continuing education provider registered with the Department of Consumer and Business Services through its Insurance Division.

Can I get CE credit for this?

Yes. The one time, four-hour training can be claimed for continuing education credit toward your license renewal obligation – as long as the division has approved the course for continuing education credit. Proof of training should be submitted when you renew your license. If you don't plan to claim CE credit for this class, you do not need to send the certificate to the division.

Who verifies that I took the training?

Insurers must verify that you have completed the required training. They can do so by obtaining certificates of completion.

What if I take the same class in another state?

You can satisfy Oregon's requirement by taking a course in another state if the other state's training requirements are "substantially similar" to Oregon's.

When must I complete the training?

- » **New producers** who are licensed after the rules take effect on Aug. 1, 2011, must undergo the training before selling annuities.
- » **Producers who are currently licensed**, or become licensed prior to Aug. 1, have six months from July 1, 2011, to take the training course. In other words, if you have a license to sell annuities on Aug. 1, you have until the end of the year to take the course.

Is annuity training available?

Yes. The division has approved a number of annuity courses; both online and classroom instruction are available. The Insurance Division cannot recommend

any particular class. You can search for approved courses online. Try searching with words such as "Oregon annuity suitability CE."

Is this rule just about annuity training?

No. The rule is much broader than agent training. For example, it requires insurance companies to supervise annuity sales to ensure the recommended policy is appropriate for a particular client. The rules also outline the types of information a producer must consider before recommending an annuity to a client. **Read the rule.**

Whom do I contact if I have questions?

You can e-mail me: james.t.thompson@state.or.us

Licensing

We have just finished our third month of testing with our new exam vendor PSI. Please remember that effective Jan. 1, the application process changed. A person must now pass exams for all classes of insurance he or she wishes to be licensed in before submitting the application. After the exams have been passed and the applicant is ready to receive a license, the applicant should submit fingerprints, the DCBS Criminal Records Request form, and the application.

People wanting to take an exam or have their fingerprints submitted for processing can contact PSI at www.psiexams.com or at 800-733-9267 (toll-free).

Meanwhile, we recently developed a crop adjuster exam. Currently there are two ways to receive a crop adjuster license. A person can submit proof of completing the NCIS CAPP certification along with an application and receive the license or take our crop adjuster exam and submit the application. The Adjusters Examination for Crop Insurance will be available starting April 20.

Remember to update your e-mail address

We now *only* correspond with applicants and licensees by e-mail. For example, we no longer mail reminders about your license renewal but we send an e-mail if we have an e-mail address. Whenever you receive an e-mail from us, make sure to read it because it will contain valuable information, often about your license.

Some of you signed up through our e-mail notification system to receive this newsletter; that *does not mean* that **licensing** has your current e-mail address. You can alert us to a new e-mail address at web.insagent@state.or.us. ●

Property and casualty insurance

by Cece Newell

Advisory group ISO files earthquake insurance rate increase

The Insurance Services Office (ISO) filed an average 71.1 percent rate increase for earthquake effective May 1, 2011. The last earthquake rate change from ISO was effective April 1, 1998. This results in an annual average change for each of the 13 years of 4.2 percent.

It is difficult to establish how many Oregon consumers will be affected. ISO is an advisory organization that provides its clients with information on various insurance risks. Insurers can choose whether to automatically adopt the ISO increase.

None of the Top 20 earthquake writers in Oregon automatically adopts ISO earthquake rates.

The ISO rate increases are based on earthquake models that use advanced technology to study the effects of seismic risk and exposure. The new ISO models were developed by AIR Worldwide, a risk modeling company, and estimate damage from

seismic activity based on building type and site geology. These models increase the damage estimates on older buildings with limited seismic protection and those buildings subject to less stable soil conditions.

One new aspect of earthquake pricing is “demand surge.” After a major event, a shortage in building materials and qualified contractors in the affected areas inflate rebuilding cost for damaged structures. Consumers in Louisiana and Mississippi saw this happen after the large hurricane losses in 2005 following Katrina. There is an additional provision in the new ISO rate that includes demand surge if a catastrophic event exceeding \$5 billion in building damage occurs.

ISO also redefined its Oregon rating territories (see map). Oregon now has four territories for earthquake rating. Using standard frame construction as an example, the highest-rated territory is six times greater than the lowest-rated territory, assuming a 10 percent deductible factor. Previously, the highest-rated territory was only 2.4 times greater than the lowest-rated territory for a frame house. ●

Oregon Revised Territories



GAP/GAP plus

by Cece Newell

Selling GAP Plus requires casualty license

“Guaranteed Auto Protection,” or GAP coverage, is designed to help consumers who total a vehicle and owe more on their lease or loan than the actual cash value of the vehicle.

The division is seeing an increase in filings for products that are an expanded version of GAP, which include benefits other than basic GAP protection. These expanded products are sometimes called “GAP Plus.”

Both GAP and GAP Plus are regulated under the Oregon Insurance Code. Forms must be filed for approval and rates must be filed for review before any policy is sold. Basic GAP protection for which the vehicle purchaser or lessee pays a charge

can be sold under either a Limited Class Insurance Producer license or a Resident or Nonresident Casualty Insurance Producer license.

The division does not allow the sale of GAP Plus insurance policies by insurance producers with only a limited class insurance license in Oregon. These policies are not solely a debt cancellation waiver product as described in Oregon Revised Statute (ORS) 731.036(9)(b). Rather, the additional benefits offered in a GAP Plus policy, such as a \$1,000 cash incentive to refinance a new vehicle through the same lender, serve more as an inducement for the consumer to purchase the GAP Plus policy, and are not related to the cancellation of the debt.

An insurance producer that wants to sell a GAP Plus insurance policy needs to have a casualty insurance license.

In addition, since the GAP Plus insurance also includes an additional benefit (such as a \$1,000 cash incentive)



the insurance policy should include this incentive in the policy language. ORS 746.035 prohibits inducements that are not contained in the policy.

It is important to note that Oregon’s ability to regulate debt cancellation contracts is subject to federal pre-emption under certain circumstances. If the debt cancellation contract (which includes but is not limited to GAP or GAP Plus insurance policies) is sold by national banks, federal saving associations, federal credit unions, state-chartered banks, and state-chartered credit unions, or their respective contractual agents such as auto dealers, federal and state banking law applies and the sale of these policies are not regulated under the Oregon Insurance Code. ●

Medicare issues

Senior Health Insurance Benefits Assistance (SHIBA) program



This program offers free counseling for people with Medicare or approaching Medicare eligibility and its staff is available to insurers who have questions or who encounter problems as they work with clients. Here are some of its Medicare updates:

Medicare annual enrollment — Oct. 15-Dec. 7

Each fall, people with Medicare can change Medicare Advantage or Part D prescription drug plans during an annual election period. They can also drop coverage or enroll in coverage during this period.

Since 2005, this enrollment period has been from Nov. 15 through Dec. 31. This fall, the dates are Oct. 15 to Dec. 7. The earlier start and additional week will allow beneficiaries, their families, and advocates to relax during the holidays and avoid the end-of-the-year crunch to change plans. New coverage will be effective Jan. 1, 2012.

From Jan. 1 to Feb. 14, 2012, beneficiaries can leave a Medicare Advantage plan and return to Original Medicare. However, they cannot switch Medicare Advantage plans or leave Original Medicare and join a Medicare Advantage plan.

“Free” preventive benefits

Also, some people who thought they would receive “free” Medicare preventive benefits, in reality, have to pay “facility fees” or co-insurance for the office visit. Whether your clients have Original Medicare (through the government) or a Medicare Advantage Plan (through a private company), they may want to ask in advance whether there will be a charge for any preventive service.

Understanding the initial “Welcome to Medicare visit” and the “annual wellness visit” will also save problems. A few pointers:

- » None of these exams are physicals, and doctors should not conduct tests or order lab work. The initial “Welcome to Medicare” visit is a one-time review of a person’s health as well as education/counseling about preventive services and other care. The doctor will check height, weight, and blood pressure, calculate body mass index, and give the patient a simple vision test. This is billed as “G0402.”
- » The annual wellness visits after that are intended to allow patients and their doctors to develop or update a personalized prevention plan. The **first** annual wellness visit is billed as “G0438.” It is available once 12 months have elapsed since the **Welcome to Medicare** visit or, for those who don’t get the Welcome to Medicare visit, once they have had Part B for more than 12 months. **Later** visits are occurred as “G0439.”
- » When clients schedule appointments, arrive for appointments, or talk to their doctor at the appointment, they should refer to the **“annual wellness visit”** to ensure they aren’t billed for an **office visit**.

Medicare supplement rule effective

A new Insurance Division rule in effect limits premium increases for Medicare Supplement insurance policies to once in a 12-month period. This limit applies to policies issued on or after July 1, 2011. An exception exists for someone who reaches a new age bracket within the policy year. However, before the policy is issued, the insurer must disclose if an age adjustment will result in more than one increase over a 12-month period. ●

Enforcement actions

This **Regulator** lists key orders that were posted on the Insurance Division website from mid-December 2010 through March 2011. More orders are posted at http://insurance.oregon.gov/admin_actions/adminact.html.

Insurance companies

Marketplace orders

American International Group, Inc.

New York, N.Y.

Violation: A multistate investigation alleges underreporting of workers' compensation premium.

Penalty: AIG agrees to pay a nationwide fine of \$100 million plus \$46.6 million in additional premium taxes and assessments. Oregon's share of the fine is \$1.1 million and its share of assessments is nearly \$2.6 million.

Date of Order: 2/28/2011

Bankers Life and Casualty Company

Carmel, Ind.

Violation: Failed to notify policyholders about Medicare supplement insurance premium change

Penalty: \$5,000

Date of Order: 1/25/2011

Producers

Anderson, Rainer B.

Eugene

Violation: Failed to respond to DCBS director's inquiry

Penalty: Expired Oregon resident individual insurance producer license revoked

Date of Order: 1/11/2011

Arnold, Gregory A.

Portland

Violation: Producer subject to an order suspending Oregon insurance producer license pursuant to ORS 25.780 (1)

Penalty: Oregon resident individual insurance producer license suspended

Date of Order: 1/11/2011

Craig, Bryan R.

Medford

Violation: Agent withheld premium refund from insured

Penalty: Agent surrenders Oregon resident insurance producer license and agrees to never apply for insurance license or work in industry

Date of Order: 2/28/2011

Cue, Dolphus

Portland

Violation: Subject to order suspending Oregon insurance producer license pursuant to ORS 25.780 (1)

Penalty: Resident individual insurance producer license suspended

Date of Order: 1/6/2011

Knowles, Edmund R.

Eugene

Violation: Made unsuitable recommendation in annuity transaction

Penalty: Oregon resident individual producer license suspended for 30 days, from Feb. 22, 2011, to March 24, 2011

Date of Order: 2/17/2011

Mings, Marlowe E.

Milwaukie

Violation: Subject to order suspending Oregon insurance producer license pursuant to ORS 25.780 (1)

Penalty: Oregon resident individual producer license suspended

Date of Order: 1/31/2011

Mueller, Nicholas J.

Portland

Violation: Misappropriated money by failing to remit client's insurance application and \$260 in premium money to insurer; failed to report to the director filing of criminal drug charges in Multnomah County and subsequent conviction on charge of manufacturing marijuana within 1,000 feet of a school; and failed to notify DCBS director of change of business and residence addresses

Penalty: Oregon resident individual insurance producer license revoked

Date of Order: 2/28/2011

Stewart, Shawn J.

Roseburg

Violation: Subject to order suspending Oregon insurance producer license pursuant to ORS 25.780 (1)

Penalty: Oregon resident individual insurance producer license suspended

Date of Order: 1/31/2011

Continued on next page

Rules and bulletins

Administrative rule

Visit our website to find links to these recently adopted rules and all rules: http://insurance.oregon.gov/rules/recent_admin_rules.html.

Amends rules for Oregon Standard Health Statement (ID 09-2011): This rulemaking reflects federal health care reforms involving rescissions and the prohibition against insurers limiting or denying coverage for people under the age of 19 because of health status or pre-existing conditions.
Effective: Feb. 23, 2011

Questions? anthony.a.behrens@state.or.us

Amends rules involving health insurance coverage of prosthetic and orthotic devices (ID 08-2011): Oregon law requires DCBS to annually update rules listing the prosthetic and orthotic devices that must be covered by group and individual health insurance policies.
Effective: Feb. 23, 2011

Questions? anthony.a.behrens@state.or.us

Limits Medicare supplement premium increases to once yearly (ID 07-2011): Amends rules to limit premium increases for Medicare supplement insurance policies to once in a 12-month period.
Effective: Feb. 23, 2011

Questions? gayle.woods@state.or.us

Adopts rules for disclosures required for small face-amount life insurance policies (ID 06-2011): To ensure that consumers better understand the implications of buying a policy with a face amount of less than \$15,000, these rules adopt the National Association of Insurance Commissioners' model rules requiring certain disclosures to the buyer when the premiums paid would exceed the face value of the policy.

Effective: Feb. 23, 2011

Questions? jeannette.holman@state.or.us

Amends/repeals rules relating to life and health actuarial opinion (ID 05-2011): Requires life insurers to submit an actuarial opinion that includes a regulatory asset adequacy issues summary.
Effective: Feb. 23, 2011

Questions? annette.c.boyce@state.or.us

Adopts/amends/renumbers rules for long-term care insurance claims requirements (ID 04-2011): These rules change exhibits to reflect changes in the National Association of Insurance Commissioners' model law on long-term care. Add a requirement that insurers include information for policyholders about how to contact the Insurance Division when a claim is denied.

Effective: Feb. 10, 2011.

Questions? russel.w.kennel@state.or.us

Makes permanent provisions of temporary rules related to nongrandfathered individual health insurance open enrollment periods (ID 03-2011): The rules prohibit insurers from limiting or denying coverage for people under age 19 because of health status or pre-existing conditions; they establish open enrollment periods in February and August of each year.

Effective Feb. 10, 2011

Questions? anthony.a.behrens@state.or.us

Adopts, amends and renumbers rules involving annuity suitability (ID 02-2011): These rules, in large part, adopt the National Association of Insurance Commissioners' model rules ensuring that companies and agents evaluate the suitability of an annuity for a particular client and also ensure that producers who sell annuities receive minimum training about annuities.

Effective Feb. 4, 2011

Questions? Direct training questions to james.t.thompson@state.or.us. Direct other questions to michael.b.lydon@state.or.us

Adopts rules for annual financial reports for self-insured groups (ID 01-2011): These rules clarify the requirements for annual financial statements filed by self-insured groups comprising three or more public bodies.

Effective: Feb. 4, 2011

Questions? annette.c.boyce@state.or.us

Bulletins

Past bulletins can be found at <http://insurance.oregon.gov/bulletins.html>. ●

Recent rate activity

TOP 10 OREGON HOMEOWNERS INSURERS BASED ON PREMIUM† Domicile, Direct Premium Written, Market Share, Recent Rate Activity

	NAME OF COMPANY	DOM	WRITTEN	SHARE	ACTIVITY	New	Renewal
1	State Farm Fire & Cas Co	IL	164,452,422	25.98%	2.8%	08/15/10	10/01/10
2	Farmers Ins Co Of OR	OR	58,551,382	9.25%	5.3%	03/16/11	03/16/11
3	Safeco Ins Co of OR	OR	44,334,575	7.00%	5.2%	2/12/11 (3)	4/12/11 (3)
4	Farmers Ins Exch	CA	29,641,113	4.68%	1.6%	03/16/11	03/16/11
5	Country Mut Ins Co	IL	27,526,539	4.35%	9.2%	10/17/10	10/17/10
6	Allstate Ins Co	IL	22,403,747	3.54%	0.0%	n.a. (1)	n.a. (1)
7	American Family Mut Ins Co	WI	21,968,379	3.47%	9.8%	10/01/10	10/01/10
8	Allstate Prop & Cas Ins Co	IL	19,669,225	3.11%	0.0%	n.a. (1)	n.a. (1)
9	Foremost Signature Ins Co	MI	19,246,650	3.04%	0.0%	n.a. (1)	n.a. (1)
10	Allstate Ind Co	IL	16,496,029	2.61%	0.0%	n.a. (1)	n.a. (1)
	TOP 10		424,290,061	67.0%	3.6%		
	TOTAL 118 COMPANIES		632,923,511				

Premiums includes renters, condos, manufactured homes, and coverages such as boats, golf carts, and jewelry. Rate activity applies to homeowners' coverages only unless noted.

† Insurer rankings based on 2010 direct premium written.

(1) Company has not filed an overall rate change in the past 12 months.

(2) As of April 1, 2006, new business is written only in Allstate Property and Casualty Insurance Company and Allstate Fire and Casualty Insurance Company

(3) Company's previous change was a 3.9 percent average overall increase effective July 10, 2010.

TOP 10 OREGON AUTOMOBILE INSURERS BASED ON PREMIUM† Domicile, Direct Premium Written, Market Share, Recent Rate Activity

	NAME OF COMPANY	DOM	WRITTEN	SHARE	ACTIVITY	New	Renewal
1	State Farm Mut Auto Ins Co	IL	377,957,341	18.75%	1.9%	10/25/10	10/25/10
2	Farmers Ins Co of OR	OR	254,010,221	12.60%	0.0%	n.a. (1)	n.a. (1)
3	Safeco Ins Co of OR	OR	136,576,903	6.77%	-0.3%	10/09/10	12/07/10
4	Progressive Universal Ins Co	WI	105,198,781	5.22%	0.0%	10/15/10	11/14/10
5	Progressive Classic Ins Co	WI	99,246,563	4.92%	0.0%	10/15/10	11/14/10
6	American Family Mut Ins Co	WI	68,861,927	3.42%	4.0%	04/01/11	04/01/11
7	Allstate Ins Co	IL	56,249,564	2.79%	0.0%	n.a. (2)	n.a. (1)
8	Geico Gen Ins Co	MD	54,921,583	2.72%	0.0%	n.a. (1)	n.a. (1)
9	Allstate Fire & Cas Ins Co	IL	52,175,795	2.59%	-2.1%	6/21/10(3)	7/26/10(3)
10	Country Pref Ins Co	IL	39,749,755	1.97%	2.1%	10/31/10	10/31/10
	TOP 10		1,244,948,433	61.7%	0.7%		
	TOTAL 176 COMPANIES		2,016,232,340				

Premium includes motorcycle, light trucks, recreational vehicles, and motor home coverage. Rate activity is for personal automobile insurance.

† Insurer rankings based on 2010 direct premium written.

(1) Company has not filed an overall rate change in the past 12 months.

(2) As of April 1, 2006, new business is written only in Allstate Property and Casualty and Allstate Fire and Casualty Insurance Company.

(3) Insurer filed previously for a 4.3 percent increase effective Feb. 15, 2010.
Oregon Insurance Division - Compiled April 11, 2011.

Key contacts

Oregon Insurance Division

Administration

Information 503-947-7980
Fax 503-378-4351
E-mail dcbs.insmail@state.or.us
Administrator Teresa Miller
Deputy Administrator Suzanne Kailey
Operations Manager Gayle Woods
Consumer Liaison Rachel Oh

Market Regulation

Information 503-947-7980

- Administrative Services 503-947-7222
Manager Margarita Nuñez
- Consumer Advocacy 503-947-7984
Manager Ron Fredrickson
- Consumer Services 503-947-7205
Manager Brian Light
- Producer Licensing 503-947-7981
Manager Jim Thompson
- Market Surveillance 503-947-7242
Manager Mike Lydon
- Rates & Forms
Information 503-947-7983
Manager Rhonda Saunders-Ricks

Financial Regulation

Information 503-947-7982
Manager Russell Latham
Assistant Manager Annette Boyce

Employment opportunities

Margarita Nuñez 503-947-7222

Other agencies

Oregon Health Plan

800-359-9517

State Portability Option

Oregon Medical Insurance Pool

(Administered by Regence BlueCross BlueShield)
800-848-7280

COBRA/ERISA/HIPAA questions

U.S. Department of Labor
866-275-7922

Senior Health Insurance Benefits Assistance (SHIBA)

800-722-4134
503-947-7979

Workers' Compensation Division

General information
503-947-7810

Department of Consumer and Business Services website

dcbs.oregon.gov

Oregon government website

www.oregon.gov

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