



COMMONWEALTH OF MASSACHUSETTS
Office of Consumer Affairs and Business Regulation
DIVISION OF INSURANCE

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HEALTH COVERAGE
Filing Guidance Notice 2012-E

TO: Commercial Health Insurers, Blue Cross and Blue Shield of Massachusetts, Inc.
(BCBSMA), Health Maintenance Organizations (HMOs), Fraternal Benefit Societies

FROM: Nancy Schwartz, Director, Bureau of Managed Care

DATE: July 11, 2012

RE: Rate Filings for New Products and Significant Changes to Existing Products

The purpose of this Notice is to provide guidance for health carriers related to filings for new health benefit plans or significant changes to existing health benefit plans. This guidance applies to all health benefit plans for which rates are currently filed on a quarterly basis, including merged market (small group and individual) plans, HMO plans and Blue Cross Blue Shield of Massachusetts plans. It does not apply to stand-alone dental or vision plans.

When a company submits a form filing for any new health benefit plan intended to be offered in the merged market, any new HMO plan or any new BCBSMA plan, or for any change to such a plan that significantly changes the previously filed rate assumptions, the Division will expect a complete rate filing to be filed along with the forms. A significant change to an existing health benefit plan would include, but not be limited to, a service area reduction or expansion, a significant reduction or expansion of a provider network, or a significant change in the covered benefits of the health benefit plan.

The filing should be submitted as a rate/form filing via SERFF and accompanied by all materials as set forth in Filing Guidance Notice 2010-A.

If you have any questions, please call Nancy Schwartz at (617) 521-7347.