

Bulletin No. B-4.109

Collection of Reinsurance Program Data from Carriers and Hospitals

I. Background and Purpose

The purpose of this bulletin is to clarify the reinsurance program reporting requirements for eligible carriers and hospitals, pursuant to § 10-16-1105(1), C.R.S.

Bulletins are the Division's interpretations of existing insurance law or general statements of Division policy. Bulletins themselves establish neither binding norms nor finally determine issues or rights.

II. Applicability and Scope

This bulletin is intended to apply to every insurance company doing business in this state that meets the definition of "Eligible Carrier" and every hospital that meets the definition of "Hospital" pursuant to § 10-16-1103, C.R.S.

III. Division Position

The Division is committed to implementing the Colorado reinsurance program efficiently and effectively, minimizing the reporting burden for carriers and hospitals, and maintaining complete and accurate program data.

The Commissioner has authority to collect data quarterly from carriers on claims costs that exceed the reinsurance attachment point, in order to calculate annual reinsurance payments to carriers. At this time, the Division will not collect this data directly from carriers. Instead, the Division will consider carriers to have met their obligations under 10-16-1105(1) if they have submitted required individual market data to the Centers for Medicare and Medicaid Services (CMS) for use in federal EDGE data servers. The Division has entered into an Intergovernmental Agreement with CMS to use the federal EDGE data servers to identify paid claims eligible for reimbursement under the Colorado reinsurance program payment parameters. CMS will calculate the total reinsurance payment due to a carrier on account of each eligible claim CMS identifies and will issue reports to the Division detailing carrier-specific reinsurance payment amounts. Carriers are not required to submit any additional data to the Division for purposes of calculating reinsurance payments.

The Commissioner has authority to collect data quarterly from hospitals regarding the amount of the special fees for which each hospital is responsible pursuant to § 10-16-1108, C.R.S. At this time, the Division will not collect this data from hospitals. Instead, the Division will consider a hospital to have met this requirement if a hospital has submitted data to the Colorado Department of Health Care Policy and Financing (HCPF) so that the data may be



used by the Colorado Healthcare Affordability and Sustainability Enterprise in calculating fees and supplemental hospital payments. The Division is entering into an Interagency Agreement with HCPF whereby HCPF will determine the amounts of the reinsurance Hospital special fee to be collected annually from each hospital, in compliance with the requirements found at 42 CFR § 433.68. HCPF will provide notice to hospitals of their specific amounts owed and will collect payments using the Automated Clearing House debit process as provided in 10 CCR 2505-10, Section 8.3002.B.1. Hospitals are not required to submit any additional data to the Division for purposes of determining the amounts owed for reinsurance special fees.

IV. Additional Division Resources

A. For More Information

Colorado Division of Insurance
Reinsurance Program
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Tel. 303-894-2302
Internet: <https://www.colorado.gov/pacific/dora/division-insurance>

V. History

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