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LOUISIANA DEPARTMENT OF INSURANCE

JAMES J. DONELON COMMISSIONER

January 13, 2017

RE: URO Annual Report Notification

Due Date: March 1, 2017

Dear Sir or Madam:

Pursuant to Louisiana Department of Insurance (LDI) Regulation 103, a Utilization Review Organization (URO) is required to file an annual report (report) of its program activities with the LDI. The report information must reflect activity from January 1, 2016 through December 31, 2016. The report is due on March 1, 2017.

The report forms and directions can be found on the LDI's website at the following link: http://www.ldi.la.gov/regulatoryforms. Separate reports are required for each URO. The report can be completed electronically and e-mailed to HealthForms@ldi.la.gov or a hard copy can be mailed to the Office of Health Insurance, Louisiana Department of Insurance, P.O. Box 94214, Baton Rouge, LA 70804-9214.

Please note that the Office of Health Insurance will only accept 2016 Annual Report submissions on the forms provided. Failure to use the forms provided will result in a disapproval of the report and a possible sanction as set forth in La. R.S. 22:2453.

As a reminder, La. R.S. 22:821(B)(36) requires any licensed URO, other than a health insurance issuer, to pay a filing fee in the amount of \$500.00 at the time of filing its report. As such, if applicable, please submit a check in the amount of \$500.00 made payable to the Louisiana Department of Insurance. The check should include the complete name of the licensed entity and the LDI number assigned to the licensed entity. The completed report and the filing fee must be received by the LDI no later than March 1, 2017.

Should you have questions, please contact Holly Buckley at the Office of Health Insurance at hbuckley@ldi.la.gov or by calling (225) 219-0773.

Sincerely,

Alecia Johnson

Alecia Johnson Office of Health, Life and Annuity Insurance

Annual Report for Utilization Review Organizations

State of Louisiana

Reporting Period January 1, 2016 to December 31, 2016



James J. Donelon Commissioner of Insurance



2016 Annual Report for Utilization Review Organizations

**** Directions ****

- The 2016 report is due to the Louisiana Department of Insurance on **March 1, 2017**.
- NOTE: The 2016 reporting forms have been modified. Reports received on older versions of the forms will not be accepted and will be returned.
- The reporting period is **January 1, 2016 to December 31, 2016**. The report is based on a calendar year. Appeals that were completed before January 1, 2016 or received after December 31, 2016 should not appear on the report.
- The report forms may be found on the department's website at the following address: http://www.ldi.la.gov/industry/regulatory-forms.
- The report may be e-mailed to <u>Health-Forms@ldi.la.gov</u> or mailed to the Office of Health Insurance, Louisiana Department of Insurance, P.O. Box 94214, Baton Rouge, LA 70804-9214.

Enter all contact information.

Report information requested in the Review Activities page of appeals received for fully-insured, commercial plans. Please do not report on appeals received for self-insured plans, Medicaid and Medicare. If there were no appeals for a specific entry on the report, enter a zero (0).

Please do the following after completing the pages that are necessary for your report to be complete:

- 1. Save report to a file on your computer.
- 2. E-mail the file to HealthForms@ldi.la.gov.
- 3. Complete the section on Contact Information sheet, providing the check number and the date the check was mailed.
- 4. Mail a check made payable to the Louisiana Department of Insurance for \$500.00. Health insurance issuers are not required to submit this payment. If you are not a health insurance issuer, mail the payment to the following address. The check should include the complete name of the licensed entity and LDI # assigned to the licensed entity.

Louisiana Department of Insurance Attn: Holly Buckley P.O. Box 94214 Baton Rouge, LA 70804-9214

Please note that your company's report will <u>not</u> be approved until the Louisiana Department of Insurance has received payment (if applicable).

CONTACT

Company			LDI#
Contact Information			
First Name		Last Name	
E-mail		Phone	
Job Title			
Address			
Address (Line 2)			
City	State		ZIP Code

Check Information

Check Number

Date Check was Mailed

Louisiana Department of Insurance 2016 URO Annual Report

Review Activities

Number of appeals reviewed

Number of appeals resolved

Number of appeals considered ineligible

Average number of days to complete the appeal process

Number of cases where URO reversed its decision in the covered person's favor