

Department of Consumer & Business Services
Oregon Division of Financial Regulation - 5
Rates and Forms Section
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STANDARDS FOR PET INSURANCE FORMS, RATES AND RULES

This checklist (product standards) has been provided as an aid to assist you in preparing your filing. This checklist includes relevant statutes, rules, bulletins, and other documented positions and is required by OAR 836-010-0011(2) & (3). The checklist must be completed and attached under the Supporting Documentation tab. Any line left blank may result in the delay or disapproval of the filing.

Please review each item, and mark the “Yes”, “Confirm”, or the “N/A” box. “Not applicable” can be used only if the item does not apply to the coverage being filed. Compliance with these provisions must be certified by both the filer and an officer of the company signing the Certificate of Compliance form.

The standards are summaries. Review of the entire statute or rule will be necessary.

Filing of simple endorsements, title or declaration pages do not require a checklist of standards; see the Web site.

Market type: Personal
TOI (type of insurance) code: 9.0004 Pet insurance plans (pet health)

These Standards are not applicable to:
 Personal and Commercial Inland Marine, Burglary and Theft

GENERAL REQUIREMENTS (FOR ALL FILINGS)			
Category	Reference	Description of review standards requirements	
Requirements	OAR 836-010-0011 As required on SERFF or our Web site	Filing requirements are located on SERFF or on our web site at: http://dfr.oregon.gov/rates-forms/Pages/index.aspx	

GENERAL REQUIREMENTS (FOR ALL FILINGS)			
Category	Reference	Description of review standards requirements	Check Answer
Requirements	OAR 836-010-0011 As required on SERFF or our Web site	<p>General Information Tab. A description/explanation of the filing contents. Please note, information included in the Filing Description cannot be edited. However, if a cover letter is attached, a new cover letter could be submitted if necessary.</p> <p>Forms Schedule Tab:</p> <ol style="list-style-type: none"> 1. Only the clean copy of the submitted form should be attached individually under the Form Schedule. 2. Only one PDF per Schedule Item. 3. The form number should appear exactly as shown on the PDF. Any edition/revision date used in the form number must be included under the Form Number column. 4. It is not necessary to use the Edition Date column. 5. The Form Type column must be completed correctly. 6. When replacing a form, the filer must correctly fill out the Previous Filing # field under the Action Specific Data column with both the 8 digit State filing number, and when available, the SERFF tracking number. If the filing was submitted after September, 2011, there will only be a SERFF tracking number assigned. The form number of the previously approved form must be typed under the Replaced Form # field. Please be sure to type this form number (including the edition date) exactly the way it appeared when the original filing was submitted. <p>Rates and Rules Tab: Rates and rules should be submitted under the Rate and Rule tab. (Place the Actuarial Memorandum under the Supporting Documentation tab. See below.)</p> <p>Supporting Documentation Tab: Other filing requirements as listed below, or other documentation used to assist us in our review, should be submitted under the Supporting Documentation tab under the correct heading.</p> <ol style="list-style-type: none"> 1. If the General Information area is not used, then a Cover letter or Filing Memorandum should be under the Supporting Documentation tab that explains the intent or purpose of the forms/rules/rates. 2. A Third-party filer's letter of authorization if applicable. 3. A signed Certificate of Compliance, form 440-3894. 	<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>Yes N/A</p> <p><input type="checkbox"/> <input type="checkbox"/></p> <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>

Category	Reference	Description of review standards requirements	Check Answer
Requirements	OAR 836-010-0011 As required on SERFF or our Web site	<p>Supporting Documentation Tab: (continued)</p> <p>4. A comparison document (annotated, highlighted, red-lined, or side-by-side) must be provided for each previously approved form.</p> <p>5. An Actuarial Memorandum with an overview of the contents of the filing and the reasons and procedures used to support the rate change.</p> <p>6. Attach to the Supporting Documentation Tab, all applicable approved amendments that will bring the filed forms into compliance with Oregon law. For example: ISO form number IL 01 42 09 08 OREGON CHANGES DOMESTIC PARTNERSHIP.</p> <p>State Specific Tab Please make sure the answer to each question applies to the current filing.</p> <p>Companies and Contacts Please make sure the filer's information is up to date. Include a toll-free (if available) telephone number for the filer.</p> <p>Filing Fees Oregon does not charge filing fees per submission.</p>	<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>
Policy Documentation	ORS 737.205, ORS 742.003 (1)	<p>Included in this filing for review:</p> <p>1. New policy or program.</p> <p>2. Endorsements.</p> <p>3. Certificate of Insurance, if using a master policy.</p> <p>4. Application form.</p> <p>5. Rates and Rules.</p>	<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	Prior approval of all forms is required. Rates may be used only after receipt by the Division.	<p>Yes N/A</p> <p><input type="checkbox"/> <input type="checkbox"/></p>
FORMS			
Access to courts	ORS 742.061	<u>Attorney fees</u> – If a claim settlement is not made within six months and action is brought to court, should the plaintiff's recovery exceed the amount of payment made by the defendant, the court will set attorney fees to be paid as part of the costs of legal action and any appeal, unless the parties agree to binding arbitration.	<p>Yes N/A</p> <p><input type="checkbox"/> <input type="checkbox"/></p>

Category	Reference	Description of review standards requirements	Check Answer or confirm
Application	ORS 742.013, ORS 742.016, Bulletin INS 2010-3	If any material or information obtained through the application process will be used to deny a claim or cancel coverage, then the application needs to be filed for prior approval. This includes any supplemental application form being used. Insurers offering via the internet would need to file screen prints so we can determine if the questions are unfairly discriminatory or not, and to make sure any fraud warning used complies with Oregon laws. If the insurance policy contains fraud, concealment, and/or material misrepresentation verbiage – the application must also contain a compliant Oregon fraud warning. See insurance bulletin INS 2010-3 for guidance.	Confirm <input type="checkbox"/>
Appraisal	ORS 742.232 Oregon Supreme Court Case	If the policy contains a death benefit, and there is a disagreement as to the value, the contract includes an appraisal clause outlining the rights and responsibilities of all parties. Basically, upon mutual agreement, each will select an appraiser and notify the other of the appraiser selected within 20 days of such disagreement. The appraisers shall follow the procedures in ORS 742.232. Each appraiser shall be paid by the party selecting the appraiser and the expenses of appraisal and umpire shall be paid by the parties equally. (See Oregon Supreme Court case law on Molodyh vs Truck Insurance Exchange 304 Or. 290, 744 P.2d 992 (1987))	Confirm <input type="checkbox"/>
Arbitration	ORS 36.600 -ORS 36.740	Voluntary arbitration is permitted by the Oregon Constitution and statutes. See additional details below: <ul style="list-style-type: none"> • Either party may elect arbitration at the time of the dispute (after the claimant has exhausted all internal appeals if applicable); • Unless there is mutual agreement to use an arbitration process, the decision will only be binding on the party that demanded arbitration; • Arbitration will take place in the insured’s county or at another agreed upon location; • Arbitration will take place according to Oregon law, unless Oregon law conflicts with Federal Code. • The process may not restrict the injured party’s access to other court proceedings; Restricting participation in a class action suit is permissible.	Yes <input type="checkbox"/> N/A <input type="checkbox"/>
Cancellation	ORS 742.023(1)(e) & (1)(f), ORS 742.224(1)	The policy clearly defines the cancellation refund method.	Yes <input type="checkbox"/> N/A <input type="checkbox"/>
	ORS 742.224(1)	If the policy includes the peril of fire, it contains a provision that the policy may be canceled at any time at the request of the insured. It also states that when the policy has been surrendered, the premium over and above the customary short rates will be refunded back to them. Refunds must be made within a reasonable time.	Yes <input type="checkbox"/> N/A <input type="checkbox"/>

Category	Reference	Description of review standards requirements	Check Answer or confirm
Cancellation, continued	ORS 742.224(3)	In a policy that includes the peril of fire, the notice of cancellation states that the excess of paid premium above the pro-rata premium for the expired time, if not tendered with the notice, will be refunded on demand.	Yes <input type="checkbox"/> N/A <input type="checkbox"/>
	ORS 742.224(2)	If the policy includes the peril of fire, then the policy requires 10 days written notice prior to cancellation for premium nonpayment and 30 days written notice for any other cancellation reason, ORS 742.224(2).	Yes <input type="checkbox"/> N/A <input type="checkbox"/>
Discrimination	ORS 746.015	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 <input type="checkbox"/> N/A <input type="checkbox"/>
	ORS 106.300 thru ORS 106.340, Bulletin 2008-2, OAR 836-081-0010	If the policy extends coverage to a spouse, then a provision that recognizes a Domestic Partnership is included in the policy.	Yes <input type="checkbox"/> N/A <input type="checkbox"/>
Exclusions	ORS 742.212(i)	All policies that include the peril of fire contain a provision that excludes liability for neglect of the insured to use all reasonable means to save and preserve the property at and after a loss.	Yes <input type="checkbox"/> N/A <input type="checkbox"/>
	ORS 742.244	The policy may include a written statement that the policy does not cover loss or damage caused by nuclear reaction, nuclear radiation, or radioactive contamination, directly or indirectly resulting from an insured peril under the policy.	Yes <input type="checkbox"/> N/A <input type="checkbox"/>
	ORS 742.005(2), ORS 742.023(1)(e)	The extent of any exclusion or limitation must be clearly described.	Confirm <input type="checkbox"/>
	ORS 742.023	Pet insurance: Describe any breeds not covered or any permanent injuries or conditions excluded.	Yes <input type="checkbox"/> N/A <input type="checkbox"/>
		Pet insurance: Clearly disclose the duration of any pre-existing condition exclusion and describe the types of injuries or conditions subject to pre-existing exclusions.	Yes <input type="checkbox"/> N/A <input type="checkbox"/>
Fees, service charges, fictitious group	ORS 737.205, ORS 742.023, ORS 744.077(2), OAR 836-071-0269 thru OAR 836-071-0277	All charges to the policyholder are listed on the declarations page. No unfiled charges may be added to the declaration page.	Yes <input type="checkbox"/> N/A <input type="checkbox"/>

Category	Reference	Description of review standards requirements	Check Answer or confirm
Fraud	ORS 742.013, ORS 742.016, 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 must be 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 <input type="checkbox"/> N/A <input type="checkbox"/>
	ORS 742.013, ORS 742.208, Bulletin 2010-3	To deny or cancel coverage due to the insured’s (or on behalf of the insured) misrepresentations, omissions, concealments of fact, or incorrect statements; the written application must be indorsed upon (or included by reference in the policy), or attached to the policy when issued. This includes any written or electronic Application form, supplemental application, and/or questionnaire. If other media is used to obtain information regarding the applicant that could be used to later cancel a policy or deny a claim, this must be disclosed to the applicant. The insurer must show the misrepresentations, omissions, concealments of fact, or incorrect statements are material. The insurer must also show they have relied upon them, and that they are either: A. Fraudulent or; B. Material either to the acceptance of the risk or to the hazard assumed. When the policy provides property coverage, the insurer may need to include the “willfully concealed” language found in ORS 742.208. Insurers should review Bulletin 2010-3 and the Insurance Code to determine whether their statements comply.	Yes <input type="checkbox"/> N/A <input type="checkbox"/>
Legibility of forms	ORS 742.005(2)	The forms are clear and understandable in the presentation of premiums, labeling, description of it’s 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.	Confirm <input type="checkbox"/>
Limits	ORS 742.023	Limits of coverage are clearly described.	Confirm <input type="checkbox"/>
	ORS 742.214	All policies that include the peril of fire contain a provision that other insurance may be prohibited, or the amount of insurance limited, by attaching an endorsement to the policy.	Confirm <input type="checkbox"/>

Category	Reference	Description of review standards requirements	Check Answer or confirm
Limits, continued	ORS 742.220	Provision For Endorsing Policies: All policies that include the peril of fire contain a provision that the application of insurance and the contribution to be made by the company in case of loss, or any other provision that is not inconsistent with the provisions of the policy may be added to the policy in writing. However, no provision may be waived unless the policy states the terms of this policy are subject to change.	Confirm <input type="checkbox"/>
Loss settlement	ORS 742.023, ORS 742.234	Settlement provisions are clearly explained.	Confirm <input type="checkbox"/>
	ORS 742.228	The policy contains a provision that the company shall not be liable for a greater proportion of any loss than the amount insured shall bear to the whole insurance covering that peril, whether collectible or not.	Yes <input type="checkbox"/> N/A <input type="checkbox"/>
	ORS 742.053, ORS 742.230	All policies that include the peril of fire contain a provision that within 90 days after receipt of proof-of-loss forms from the insurance company, the insured shall submit proof of loss, signed and sworn to by the insured, stating the conditions of the loss. The insured shall make available all that remains of any property and submit to examinations under oath.	Yes <input type="checkbox"/> N/A <input type="checkbox"/>
	ORS 742.238	All policies that include the peril of fire contain a provision that the amount of loss is payable 60 days after proof of loss is received by the company and ascertainment of the loss is made either by agreement in writing or by the filing with the company of an award provided.	Yes <input type="checkbox"/> N/A <input type="checkbox"/>
	ORS 742.236	All policies that include the peril of fire contain a provision that there can be no abandonment to the company of any property.	Yes <input type="checkbox"/> N/A <input type="checkbox"/>
Misrepresentation /misstatement	ORS 742.013	A provision in the policy, or the application, makes it clear that statements made by the insured, in the absence of fraud, are representations and not warranties.	Confirm <input type="checkbox"/>
Policy Period	ORS 742.048, ORS 742.023(1)(d)	Coverage will commence at 12:01 a.m. at the insured's address on the date the policy takes effect. The effective date and time shall not be prior to the time at which coverage commences. When parties agree, a binder may commence coverage at an hour different that 12:01 a.m. Any statement of time shall mean time according to the legal standard of time at the insured's primary location or residence premises.	Confirm <input type="checkbox"/>
Premium payment, refund, or retention	ORS 742.005(2), ORS 742.023, ORS 742.224	The policy clearly defines the cancellation refund method. Upon cancellation for any reason, the policyholder may be entitled to a refund. Refunds should be paid promptly and must be paid upon demand.	Confirm <input type="checkbox"/>

Category	Reference	Description of review standards requirements	Check Answer or confirm
Primary coverage	ORS 742.023(1)(f), ORS 742.005(2)	Terms used in describing the coverage are clearly defined. The policy describes the conditions and provisions pertaining to the coverage, amount, terms, exceptions, limitations, and exclusions.	Yes <input type="checkbox"/> N/A <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 <input type="checkbox"/> N/A <input type="checkbox"/>
Requirements not part of a listed category	ORS 746.015, ORS 746.045	Promotional Offers: Any promotional offer or item disclosed in the policy needs to be specifically identified including what it is and the benefit to the policyholder. Vague language that does not specify the benefit or item offered is not acceptable. Any promotional offer or item that is not related to the risk assumed by the insurer is offered to everyone in a non-discriminatory manner.	Yes <input type="checkbox"/> N/A <input type="checkbox"/>
Requirements	ORS 742.240	Suit Against Us: A provision is in a policy that includes the peril of fire that informs the insured they must have complied with all the requirements of the policy in order to bring suit against the company. The policy must also contain a provision that law suits must be brought within 24 months after loss.	Confirm <input type="checkbox"/>
Subrogation	ORS 742.242	All policies that include the peril of fire contain a provision that the company may require from the insured an assignment of all right of recovery against any party for loss to the extent that payment is made.	Yes <input type="checkbox"/> N/A <input type="checkbox"/>
Titles & headings	ORS 742.005(2)	The forms are clearly titled and headings for benefits include references to any limitations and restrictions contained in the provision.	Yes <input type="checkbox"/> N/A <input type="checkbox"/>

RATE, RULE, RATING PLAN, CLASSIFICATION, AND TERRITORY FILING REQUIREMENTS			
Requirements	ORS 737.205	Copies of rates, rating plans, and rating systems are included in the filing with revisions indicated when filing a change.	Yes <input type="checkbox"/> No <input type="checkbox"/>
		Effective date is not earlier than the date the filing is received by the insurance division	Yes <input type="checkbox"/> No <input type="checkbox"/>
Fictitious group	ORS 737.600, OAR 836-042-0300 to 0322	If filing a group for rate purposes, the group meets the requirements of ORS 737.600 and mass-marketing plan rules.	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
Schedule rating	ORS 737.205 Commercial only	Schedule rating plan identifies the credit or debit modification criteria and the maximum and minimum plan modification. Rating plans must be filed prior to use.	Yes <input type="checkbox"/> No <input type="checkbox"/>
Discrimination	ORS 746.015, OAR 836-081-0010	Rates, rating plans, and rating systems do not discriminate unfairly in the availability of insurance and the application of rates.	Yes <input type="checkbox"/> No <input type="checkbox"/>
Rebates	ORS 746.035, ORS 746.045	Inducements or rebates are specified in the policy. If answer is other than "N/A," details must be included in the rates and rules filing.	Yes <input type="checkbox"/> N/A <input type="checkbox"/>

Category	Reference	Description of review standards requirements	Check Answer or confirm
Requirements not part of a listed category	ORS 746.015, ORS 746.045	Promotional Offers: Any promotional offer or item disclosed in the policy needs to be specifically identified in the rating plan. The actuarial memorandum or other documents will provide details related to any promotional offering.	Yes <input type="checkbox"/> N/A <input type="checkbox"/>
Ratemaking generally			
Creditability	ORS 737.310, OAR 836-010-0021	1. Provide all data used and judgments made. 2. Provide description of methodology used.	Yes <input type="checkbox"/> N/A <input type="checkbox"/>
Fees, service charges	ORS 737.310, OAR 836-010-0021	Provide cost-accounting justification on initial filing or subsequent changes.	Yes <input type="checkbox"/> N/A <input type="checkbox"/>
Loss valuation	ORS 737.310, OAR 836-010-0021	Provide the following: 1. Complete premium data. 2. Loss and LAE data. 3. Information on expected loss ratio.	Confirm <input type="checkbox"/> Confirm <input type="checkbox"/> Confirm <input type="checkbox"/>
Investment income	ORS 737.310, 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.	Yes <input type="checkbox"/> N/A <input type="checkbox"/> Yes <input type="checkbox"/> N/A <input type="checkbox"/>
Underwriting profit & contingencies	ORS 737.310, OAR 836-010-0021	1. Oregon data for commission and brokerage.	Yes <input type="checkbox"/> N/A <input type="checkbox"/>
		2. Countrywide data for general and other acquisition expenses as reported in the <i>Insurance Expense Exhibit</i> .	Yes <input type="checkbox"/> N/A <input type="checkbox"/>
		3. Oregon data for taxes, licenses, and fees.	Yes <input type="checkbox"/> N/A <input type="checkbox"/>
		4. Expense trend.	Yes <input type="checkbox"/> N/A <input type="checkbox"/>
		5. Historic experience.	Yes <input type="checkbox"/> N/A <input type="checkbox"/>