Grandfathered Individual Health Plan (Pool) Rate Filing Checklist

☐ 1. Parts I, II, and III of HHS Forms. (Requirements per RCW 48.02.120 (5) and 45 CFR §154.215)
☐ 2. WAC 284-43-945.
☐ 3. For HCSCs and HMOs, the requirements under WAC 284-43-930.
☐ 4. Documentation and justification of rate development and rating factors under the state community rating laws. See RCW 48.44.022 for HCSCs, RCW 48.46.064 for HMOs, and RCW 48.20.028 for disability carriers.
☐ 5. An illustrative example and rule of how the rating factors are applied.

Grandfathered Small Group Health Plan (Pool) Rate Filing Checklist

☐ 1. Parts I, II, and III of HHS Forms. (Requirements per RCW 48.02.120 (5) and 45 CFR §154.215)
☐ 2. WAC 284-43-945.
☐ 3. For HCSCs and HMOs, the requirements under WAC 284-43-930.
☐ 4. Documentation and justification of rate development and rating factors under the state community rating laws. See RCW 48.44.023 for HCSCs, RCW 48.46.066 for HMOs, and RCW 48.21.045 for disability carriers.
☐ 5. An illustrative example and rule of how the rating factors are applied.