MLR Audit Request

30 Day Letter Requests

Category	Item
ACA receipts	Risk Adjustment/Reinsurance
	APTC/CSR
Entity information	Organization Chart
	Allocation methodologies
Internal and external reports	Life and Health Annual statement
	Supplemental filings
	Actuarial opinions
	Internal and/or External audit reports
Market Classifications	Flow charts
	Processes for indicating ACA compliant products and addressing
	non ACA compliant plans, i.e. short-term and conversion plans
Process for preparing the MLR form	Flow charts
	Description of information systems
	Explanation of member months calculation
Quality Improvement Activities (QIA)	Description of activities
	Allocation Methods
	Detailed list of all QIA transactions
Risk Corridors	Process and evidence supporting the amount

45 Day Letter Requests

Category	Item
Capitation Payment Records	For each capitation payment:
	 Provider group information
	 Total capitation amount paid
	 Allocations to market segments
Other data	 Fraud expenses and recoveries
	 Member Months/Life-Years calculations
	 Average Deductible/Deductible factor calculation process and data
Premium and Claims Data	For each policy written or claim paid in the applicable year:
	Identification information
	Market classification
	Relevant dates
	 Amount of premium or claim paid
	 Indication of compliance with ACA and/or a QHP
Rebates	Listing of rebates including:
	 Policy information
	 Premium amounts
	Rebate amounts
Reconciliations	Reconciling provided premium and claims data to the amounts listed on the MLR form
Third Party Administrators (TPA) and	For each TPA/PBM:
Pharmacy Benefit Managers (PBM)	Listing of invoices
	 Allocations to market segments
	 Explanations on any QIA activities