

Premium Change Transparency Survey

Company and Contact Information

1. Please enter the correct information below for the business entity:

Company Name: NAIC Company Number: NAIC Group Number:

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2. Please enter the contact information for the person responsible for completing the survey:

Name (First and Last):
Title:
Email:
Phone Number:

PHASE 1 QUESTIONS

Questions 3 through 13 ask about your company's number of policy renewals and insured's premium change transparency inquiries under chapter 284-30A WAC from June 1, 2024 through February 28, 2025. Questions 3 through 6 ask about private passenger automobile coverage. Questions 7 through 10 ask about homeowner's coverage.

Private Automobile Coverage

3. How many *policy renewals for private passenger automobile coverage* did your company have in each of the following months? Do NOT include policies exempt under WAC 284-30A-020(4).

June 2024	July 2024	Aug 2024	Sept 2024	Oct 2024	Nov 2024	Dec 2024	Jan 2025	Feb 2025

4. Of the private passenger automobile policy renewals reported in question 3, how many involved a renewal premium *increase*?

June 2024	July 2024	Aug 2024	Sept 2024	Oct 2024	Nov 2024	Dec 2024	Jan 2025	Feb 2025

5. How many *consumer requests for explanation* (i.e., premium change transparency inquiries) did your company receive related to the policy renewals reported in question 3?

June 2024	July 2024	Aug 2024	Sept 2024	Oct 2024	Nov 2024	Dec 2024	Jan 2025	Feb 2025

- 6. Questions 6a and 6b ask you to please provide examples of the language from *premium change notices* that your company has provided in response to consumers' requests for explanation *related to private passenger automobile coverage premium increases* between June 1, 2024 and February 28, 2025.
 - 6a. Please paste samples of the specific language from the notice that discusses primary factors and explanations for premium increase. Please redact policy holders' names, account numbers, and personally identifiable information.

6b. Please upload a sample of the premium change notices used, preferably in Adobe Portable Document Format (PDF). Please redact policy holders' names, account numbers, and personally identifiable information.

Homeowner's Coverage

7. How many *policy renewals for homeowner's coverage* did your company have in each of the following months? Please include mobile homeowner's, manufactured homeowner's, condominium owner's, and renter's coverage.

June 2024	July 2024	Aug 2024	Sept 2024	Oct 2024	Nov 2024	Dec 2024	Jan 2025	Feb 2025

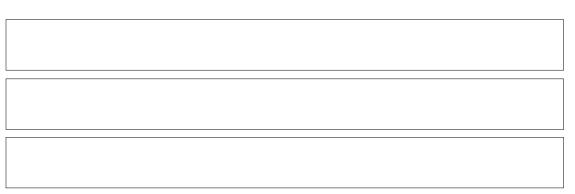
8. Of the homeowner's policy renewals reported in question 7, how many involved a renewal premium *increase*?

June 2024	July 2024	Aug 2024	Sept 2024	Oct 2024	Nov 2024	Dec 2024	Jan 2025	Feb 2025

9. How many *consumer requests for explanation* (i.e., premium change transparency inquiries) did your company receive related to the policy renewals reported in question 7?

June 2024	July 2024	Aug 2024	Sept 2024	Oct 2024	Nov 2024	Dec 2024	Jan 2025	Feb 2025

- Questions 10a and 10b ask you to please provide examples of premium change notices that your company has provided in response to consumers' requests for explanation related to homeowner's coverage premium increases between June 1, 2024 and February 28, 2025.
 - 10a. Please paste samples of the specific language from the notice that discusses primary factors and explanations for premium increase. Please redact policy holders' names, account numbers, and personally identifiable information.



- 10b. Please upload a sample of the premium change notices used, preferably in Adobe Portable Document Format (PDF). Please redact policy holders' names, account numbers, and personally identifiable information.
- 11. Does your company accept premium transparency inquiries from consumers (please check one box per row):

		For automobile only	For homeowner's only	and	For neither automobile nor homeowner's
11a.	By mail	0	0	0	0
11b.	By email	0	0	0	0
11c.	By online portal	0	0	0	0
11d.	Other, please describe:	0	0	0	0

12. How many premium change transparency inquiries has your company received:

12a.	By mail	
12b.	By email	
12c.	By online portal	
12d.	Other	

13. How many premium change transparency explanations has your company processed:

email online portal	
email	3b.
online portal	3c.

PHASE 2 QUESTIONS

Under WAC 284-30A-040(2), additional notice requirements will take effect beginning June 1, 2027. Questions 14 through 16 ask about your company's planning for those new requirements.

14. Has your group estimated its costs to prepare for the new requirements under WAC 284-30A-020(2)?

O No, skip questions 15 and 16. O Yes

15. How much does your group estimate it will cost your insurance group to prepare for the requirements that take effect on June 1, 2027?

16. Please rank the following for their potential impact on implementation costs (1 = greatest impact, 3 = least impact).

Rank	Cost Element
	Isolating variable-specific impacts on premium
	Automation of processing premium transparency notices
	Other, describe: