

	Main Topic	Description	Answer
1	Surveys Transition	In an effort to improve the annual Surveys reporting process, Idaho Department of Insurance (IDOI) is making enhancements to the Surveys on-line portal system. The first phase is to update all carrier, and/or TPA, and/or Registered Administrators' contact(s) information (contact names, NAIC or License number, business addresses, phone numbers, email addresses, etc.). The "Customize your email reminders" and "Add/Remove users from company" tools will no longer be available on the Surveys portal.	During the transition, there will be new forms (i.e. Excel files) that the carrier, TPA, and/or Reg Admin will need to use to file requests (i.e. Extension or No Experience to Report Waiver, update contact information, etc).
2	Contacts & Filing Status	Each carrier, and/or TPA, and/or Registered Administrator contact will need to use the new Surveys Contacts and Filing Status form moving forward.	Please download and complete the new Surveys Contacts and Filing Status form located in the department's Reporting & Checklists • Industry • Idaho Department of Insurance page and Surveys and Reports section. Filename: IDOISurveysContactsandFiling2025.xlsx
	2.1	Main Surveys Page	Reporting & Checklists • Industry • Idaho Department of Insurance page: https://doi.idaho.gov/industry/reporting-checklists/
	2.2	New carrier and/or TPA contacts	New carrier and/or TPA contacts will need to complete this form to be added into the department's Surveys system. Once your contact information has been added or updated, please see the "Surveys Portal" section for more information.
3	Surveys Portal	Entering the Surveys Portal to file the respective Surveys. Important: Please note an email notice that the Surveys are open will be sent to the main or primary contact person identified by the carrier and/or TPA/Reg Admin (during the October 2024 contact & filing status update filings). The department requests that the main or primary contact advise their respective Survey users or staff of the Surveys email notice.	1. You must have an authorized email that the department has recorded as valid for the respective carrier and/or TPA. This means you completed and filed the new Contacts & Filing Status Form this past October 2024 in a timely manner. 2. Once you enter the Surveys Portal, you will receive an email with the token link to access the Surveys for 24 hours . You will need to request for a new email token link after the 24 hours has expired.
	3.1	Login for Surveys and Forms	https://apps.doi.idaho.gov/main/surveys/login

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4	Technical Issues	Surveys portal technical issues.	Please direct all Surveys portal technical issues to Dairyn Valencia at HealthSurvey@doi.idaho.gov For Immunization Survey questions, please contact ImmuneAssess@doi.idaho.gov
5	Compliance and Contacts	Health & Other Surveys questions vs. Immunization Survey	Health & Other Surveys = HealthSurvey@doi.idaho.gov For Immunization Survey compliance questions , please contact ImmuneAssess@doi.idaho.gov
6	Extension Request Form	IDOISurveysExtensionRequest2025.xlsx	File is available in the Surveys portal. Please download, complete, and email the form to HealthSurvey@doi.idaho.gov
7	No Experience to Report Waiver Form	IDOISurveysNoExperienceWaiver2025.xlsx	File is available in the Surveys portal. Please download, complete, and email the form to HealthSurvey@doi.idaho.gov
8	Health Insurance and Self - Funded Survey Form	Worksheets = ContactAttestation, Individual, Group, Claims_Demographics, Self-Funded, and Definitions	The new form combines all the health related surveys into one Excel file with multiple worksheets (ContactAttestation, Individual, Group, Claims_Demographics, Self-Funded, and Definitions). This workbook was intended to assist the carrier, TPA, or Reg Admin when completing the on-line Surveys portal form. Due to technical issues experienced last year by some carriers or TPAs/Reg Admins, if this situation occurs again this year, please contact Dairyn Valencia at HealthSurvey@doi.idaho.gov for additional instructions.

ContactAttestation |
 Individual |
 Group |
 Claims_Demographics |
 Self_Funded |
 Definitions

Main Topic	Description	Answer
8.1	Contact/Attestation (only required if the carrier or TPA/Reg Admin is approved to file via email due to technical issues encountered by the respective carrier or TPA/Reg Admin during the current filing of the Health and/or Self-Funded Survey.)	If the carrier or TPA/Reg Admin has received approval by the department to file the Health or Self-Funded Survey (due to portal technical issues) via email using the department's stated Excel file, the respective carrier, or TPA, or Reg Admin must complete the Contact/Attestation form to confirm that to their knowledge the data and information filed to the department is/are true, accurate, and complete based on their respective health plan data, reporting period requested, and pursuant to Title 41-247.
8.2	Individual (Note: Part 1, 2, and 3)	The Individual Survey has Part 1 (Directly Issued by Carrier to Individual), Part 2 (Written Through <u>Association/Trust</u>), Part 3 (Only applies if <u>Association/Trust</u> Part 2 is reported: Detailed information on Association/Trust). Please make sure you enter the NAIC # and Carrier Name in yellow highlighted field.
8.3	Group (Note: Part 1, 2, and 3)	The Group Survey has Part 1 (Directly Issued by Carrier to Single Employer), Part 2 (Issued to <u>Multiple Employer Association or Trust</u>), Part 3 (Only applies if <u>Multiple Employer Association or Trust</u> Part 2 is reported: Detailed information on Multiple Employer Association or Trust). Please make sure you enter the NAIC # and Carrier Name in yellow highlighted field.
8.4	Claims_Demographics	Health Survey Claims Payment and Demographics data for Individual and/or Group only (CY 2024) . Please make sure you enter the NAIC # and Carrier Name in yellow highlighted field.
8.5	Self_Funded (Note: Part 1 and 2)	The Self-Funded Health Plan Survey has Part 1 (ASC, ASO, or Stop/Loss data and demographics) and Part 2 (Self-Funded Employer, Association Or Other Entity Information). Please make sure you enter the License # and TPA or Registered Administrator Name in yellow highlighted field.
8.6	Definitions	The Definitions worksheet provides general information, definitions, and instructions for the Health Insurance Survey (Individual and/or Group) and Self-Funded Health Plan Survey .

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9 Immunization Assessment Survey	Immunization Board FAQ • Boards • Idaho Department of Insurance	https://doi.idaho.gov/information/public/boards/immunization-board-faq/
9.1	Key Dates	Immunization Survey Due Date: March 15, 2025 Assessment Notice Date: April 15, 2025 Assessment Payment Due Date: June 15, 2025
9.2	Immunization - Department Contact	Questions can be directed to the Idaho Department of Insurance at ImmuneAssess@doi.idaho.gov
9.3	Revised Mailing Address for Payments	Idaho Department of Insurance Attention: Immunization Assessment 700 W. State Street, 3rd Floor PO Box 83720 Boise, ID 83720-0043