LIFE, ACCIDENT AND HEALTH INSURERS

Contact			elephone		oue:		_		
					ng the Ye	ear 2019			
RATER	NAL CO	MPANIES BEGIN FILING LIFE/FRATERNAL STATEMENT EFFECTIVE V	VITH FI	ings Made During the Year 2019 /ITH FIRST QUARTER, 2019.					
(1)	(2)	(3)		(4)		(5) DUE DATE	(6) FORM	(7) APPLICABI	
Check-list	Line #	REQUIRED FILINGS FOR THE ABOVE STATE	NUMBER OF COPIES* Domestic Foreign		OPIES* Foreign	DUE DATE	FORM SOURCE**	APPLICABI NOTES	
			State	NAIC	State	-	SOURCE	NOTES	
		I. NAIC FINANCIAL STATEMENTS							
	1	Annual Statement (8 ¹ /2"x14")	2	EO	XXX	3/1	NAIC	A-O	
	1.1	Printed Investment Schedule detail (Pages E01-E27)	2	EO	XXX	3/1	NAIC	A-O	
	2	Quarterly Financial Statement (8 ¹ / ₂ " x 14")	2	EO	XXX	5/15, 8/15, 11/15	NAIC	A-0	
	3	Separate Accounts Annual Statement (8 ¹ / ₂ "x14")	2	EO	XXX	3/1	NAIC	A-O	
		II. NAIC SUPPLEMENTS							
	11	Accident & Health Policy Experience Exhibit	2	EO	XXX	4/1	NAIC	A-O	
	12	Analysis of Annuity Operations by Lines of Business	2	EO	XXX	4/1	NAIC	A-O	
	13	Analysis of Increase in Annuity Reserves During Year	2	EO	XXX	4/1	NAIC	A-O	
	14	Credit Insurance Experience Exhibit	2	EO	XXX	4/1	NAIC	A-O	
	15	Interest Sensitive Life Insurance Products Report	2	EO	XXX	4/1	NAIC	A-O	
		Life, Health & Annuity Guaranty Assessment Base							
	16	Reconciliation Exhibit	2	EO	XXX	4/1	NAIC	A-O	
		Life, Health & Annuity Guaranty Assessment Base Reconciliation							
	17	Exhibit Adjustment Form	2	EO	XXX	4/1	NAIC	A-0	
	18	Long-term Care Experience Reporting Forms	2	EO	XXX	4/1	NAIC	A-O	
	19	Management Discussion & Analysis	2	EO	XXX	4/1	Company	A-O	
	20	Medicare Supplement Insurance Experience Exhibit	2	EO	XXX	3/1	NAIC	A-O	
	21	Medicare Part D Coverage Supplement	2	EO	XXX	3/1, 5/15, 8/15, 11/15	NAIC	A-O	
	22	Risk-Based Capital Report	2	EO	XXX	3/1	NAIC	A-O	
	23	Schedule SIS	2	N/A	N/A	3/1	NAIC	A-O	
	24	Supplemental Compensation Exhibit	2	N/A	N/A	3/1	NAIC	A-0	
	25	Supplemental Health Care Exhibit (Parts 1, 2 and 3)	2	EO	XXX	4/1	NAIC	A-0	
	26	Supplemental Health Care Exhibit's Allocation Report	2	EO	XXX	4/1	NAIC	A-O	
	27	Supplemental Investment Risk Interrogatories	2	EO	XXX	4/1	NAIC	A-O	
	28	Supplemental Schedule O	2	EO	XXX	3/1	NAIC	A-0	
	29	Supplemental Term and Universal Life Insurance Reinsurance Exhibit	2	EO	XXX	4/1	NAIC	A-O	
	30	Trusteed Surplus Statement	2	EO	XXX	3/1, 5/15, 8/15, 11/15	NAIC	A-0	
	31	Variable Annuities Supplement	2	EO	XXX	4/1	NAIC	A-O	
	32	VM 20 Reserves Supplement	2	EO	XXX	3/1	NAIC	A-O	
	33	Workers' Compensation Carve-Out Supplement	2	EO	XXX	3/1	NAIC	A-0	
		Actuarial Related Items					~		
	34	Actuarial Certification regarding use 2001 Preferred Class Table	2	EO	XXX	3/1	Company	A-O	
	25	Actuarial Certification Related Annuity Nonforfeiture Ongoing	2	50		2/1	G		
	35	Compliance for Equity Indexed Annuities	2	EO	XXX	3/1	Company	A-0	
	36	Actuarial Certification Related to Hedging required by Actuarial	2	EO	V V V	3/1	Company	A-O	
	30	Guideline XLIII Actuarial Certification Related to Reserves required by Actuarial	2	EU	XXX	5/1	Company	A-0	
	37	Guideline XLIII	2	EO	xxx	3/1	Company	A-O	
	51	Actuarial Memorandum Related to Universal Life with Secondary	2	LO	ллл	5/1	Company	A-0	
	38	Guarantee Policies required by Actuarial Guideline XXXVIII 8D	2	N/A	XXX	4/30	Company	A-O	
	39	Actuarial Opinion	2	EO	XXX	3/1	Company	A-O	
		Executive Summary of the PBR Actuarial Report (if VM early	_					-	
	40	adopted)	2	N/A	xxx	4/1	Company	A-O	
		Actuarial Opinion on Separate Accounts Funding Guaranteed							
	41	Minimum Benefit	2	EO	XXX	3/1	Company	A-O	
	42	Actuarial Opinion on Synthetic Guaranteed Investment Contracts	2	EO	XXX	3/1	Company	A-O	
	43	Actuarial Opinion on X-Factors	2	EO	XXX	3/1	Company	A-0	
		Actuarial Opinion required by Modified Guaranteed Annuity Model							
	44	Regulation	2	EO	XXX	3/1	Company	A-0	
	45	Financial Officer Certification Related to Clearly Defined Hedging							
		Strategy required by Actuarial Guideline XLIII	2	EO	XXX	3/1	Company	A-O	
	46	Life PBR Exemption (formerly Companywide Exemption)	2	E/O	XXX	LDI 7/1; NAIC 8/15	Company	A-0	
		Management Certification that the Valuation Reflects Management's					_		
	47	Intent required by Actuarial Guideline XLIII	2	EO	XXX	3/1	Company	A-0	
	48	RAAIS required by Valuation Manual	2	N/A	XXX	4/1	Company	A-O	
		Reasonableness & Consistency of Assumptions Certification required					_		
		hy Astronial Chidalina VVVV	2	EO	XXX	3/1,5/15, 8/15, 11/15	Company	A-O	
	49	by Actuarial Guideline XXXV Reasonableness of Assumptions Certification required by Actuarial	2	EO	ллл	5/1,5/15, 0/15, 11/15	Company		

	Bassanghlanges & Consistency of Assumptions Cartification required						
51	Reasonableness & Consistency of Assumptions Certification required by Actuarial Guideline XXXVI (Updated Average Market Value)	2	EO		2/1 5/15 8/15 11/15	Compony	10
51	Reasonableness & Consistency of Assumptions Certification required	2	EU	XXX	3/1,5/15, 8/15, 11/15	Company	A-0
52	by Actuarial Guideline XXXVI (Updated Market Value)	2	EO	xxx	3/1,5/15, 8/15, 11/15	Company	A-O
52	Reasonableness of Assumptions Certification for Implied Guaranteed	2	EO	ллл	5/1,5/15, 6/15, 11/15	Company	A-0
53	Rate Method required by Actuarial Guideline XXXVI	2	EO	xxx	3/1,5/15, 8/15, 11/15	Company	A-0
55	RBC Certification required under C-3 Phase I	2	EO	XXX	3/1	Company	A-0
55	RBC Certification required under C-3 Phase I	2	EO	XXX	3/1	Company	A-0
56	Statement on non-guaranteed elements - Exhibit 5 Int. #3	2	EO	XXX	3/1	Company	A-0
57	Statement on par/non-par policies – Exhibit 5 Int. 1&2	2	EO	XXX	3/1 3/1	Company	A-0 A-0
51	Statement on par/non-par poncies – Exhibit 5 Int. 1&2	2	EO	ллл	5/1	Company	A-0
	III. ELECTRONIC FILING REQUIREMENTS						
61	Annual Statement Electronic Filing	XXX	EO	XXX	3/1	NAIC	
62	March .PDF Filing	XXX	EO	XXX	3/1	NAIC	
63	Risk-Based Capital Electronic Filing	XXX	EO	N/A	3/1	NAIC	
64	Risk-Based Capital PDF Filing	XXX	EO	N/A	3/1	NAIC	
65	Separate Accounts Electronic Filing	XXX	EO	XXX	3/1	NAIC	
66	Separate Accounts PDF Filing	XXX	EO	XXX	3/1	NAIC	
67	Supplemental Electronic Filing	XXX	EO	XXX	4/1	NAIC	
68	Supplemental PDF Filing	XXX	EO	XXX	4/1	NAIC	
69	Quarterly Statement Electronic Filing	XXX	EO	XXX	5/15, 8/15, 11/15	NAIC	
70	Quarterly PDF Filing	XXX	EO	XXX	5/15, 8/15, 11/15	NAIC	
70	June .PDF Filing	XXX	EO	XXX	6/1	NAIC	
/1		ллл	LO	АЛА	0/1	TWIE	
	IV. AUDIT/INTERNAL CONTROL RELATED REPORTS						
81	Accountants Letter of Qualifications	2	EO	N/A	6/1	Company	A-O
82	Audited Financial Reports	2	EO	XXX	6/1	Company	A-O
83	Audited Financial Reports Exemption Affidavit	0	N/A	1	5/20	Company	A-O
84	Communication of Internal Control Related Matters Noted in Audit	2	EO	N/A	8/1	Company	A-0
85	Change in Independent CPA	2	N/A	N/A	Within 5 days of Chg	Company	A-O
86	Management's Report of Internal Control Over Financial Reporting	2	N/A	N/A	8/1	Company	A-O
87	Notification of Adverse Financial Condition	2	N/A	N/A	6/1	Company	A-O
88	Relief from the five-year rotation requirement for lead audit partner	1	EO	N/A	3/1	Company	A-O
89	Relief from the one-year cooling off period for independent CPA	1	EO	N/A	3/1	Company	A-0
90	Relief from the Requirements for Audit Committees	1	EO	N/A	3/1	Company	A-O
	Request for Exemption to File Management's Report of Internal					1.1	
91	Control Over Financial Reporting	1	N/A	N/A	7/1	Company	A-O
92	Request for Exemption/Extension to File	1	N/A	1	5/20	Company	A-O
	V. STATE REQUIRED FILINGS						
 101	Corporate Governance Annual Disclosure*** (See Note T)	1	0	N/A	6/1	Company	A-0, T
 102	Filings Checklist (with Column 1 completed)	1	0	0	3/1, 5/15, 8/15, 11/15	State	A-O
 103	Form B-Holding Company Registration Statement (Inc. Form C)	1	0	N/A	4/30	Company	A-0
 104	Form F-Enterprise Risk Report ****	1	0	N/A	4/30	Company	A-O
 105	ORSA Summary Report ***** (See Note U)	1	0	N/A	12/1	Company	A-O, U
 106	Premium tax (See Note D)	1	0	1	3/1, 4/15, 7/15, 10/15	State	A-O, Q
107	State Filing Fees (See Note D)	1	0	1	3/1	State	A-O
 108	Signed Jurat (Foreign only)	0	0	0	Not Applicable	NAIC	A-O
109	Certificate of Compliance (See Note V)	0	0	1	3/1	State	A-O, V
 110	Certificate of Deposit (See Note P)	0	0	1	3/1	State	A-O, P
111	Certificate of Valuation (See Note V)	0	0	1	8/1	State	A-0, V
 112	Detailed Listing of Investments w/Code Citations (Domestic only)	1	0	0	3/1	Company	A-0
 113	HIPAA Assessment Worksheet (See Note R)	1	0	1	3/1	State	A-O, R
114	Anti-Fraud Plan Annual Summary/Statistical Report	1	0	1	Due between 1/1 & 4/1	State	A-O, S
1							

*If XXX appears in this column, this state does not require this filing, if hard copy is filed with the state of domicile and if the data is filed electronically with the NAIC. If N/A appears in this column, the filing is required with the domiciliary state. EO (electronic only filing).

**If Form Source is NAIC, the form should be obtained from the appropriate vendor.

***For those states that have adopted the NAIC Corporate Governance Annual Disclosure Model Act, an annual disclosure is required of all insurers or insurance groups by June 1. The Corporate Governance Annual Disclosure is a state filing only and should <u>not</u> be submitted by the company to the NAIC. Note however that this filing is intended to be submitted to the lead state if filed at the insurance group level. For more information on lead states, see the following NAIC URL: <u>http://www.naic.org/public_lead_state_report.htm</u>.

****For those states that have adopted the NAIC updated Holding Company Model Act, a Form F filing is required annually by holding company groups. Consistent with the Form B filing requirements, the Form F is a state filing only and should <u>not</u> be submitted by the company to the NAIC. Note however that this filing is intended to be submitted to the lead state. For more information on lead states, see the following NAIC URL: <u>http://www.naic.org/public_lead_state_report.htm</u>

*****For those states that have adopted the NAIC Risk Management and Own Risk and Solvency Assessment Model Act, a summary report is required annually by insurers and insurance groups above a specified premium threshold. The ORSA Summary Report is a state filing only and should <u>not</u> be submitted by the company to the NAIC. Note however that this filing is intended to be submitted to the lead state if filed at the insurance group level. For more information on lead states, see the following NAIC URL: <u>http://www.naic.org/public_lead_state_report.htm</u>

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Highlighted items are new, or changes, for 2019.

	NOTES AND INSTRUCTIONS (A-K APPLY TO ALL FILINGS)				
А	Required Filings Contact Person:	Stewart Guerin (225) 219-3929 sguerin@ldi.la.gov			
В	Mailing Address:	MAILING Louisiana Department of Insurance Administrative Services P. O. Box 94214 Baton Rouge, LA 70804-9214	PHYSICAL Louisiana Department of Insurance Administrative Services 1702 North 3rd Street Baton Rouge, LA 70802		
С	Mailing Address for Filing Fees (Electronic Filing):	\$1,000 Filing Fee, included in th	e Premium Tax Return (e-file)		
D	Mailing Address for Premium Tax Payments (Electronic Filing):	The Annual Premium Tax Statemer Municipal Premium & Tax Report through the LDI's Industry Access	(Form 1076) should be filed online		
		https://ia.ldi.state.la.us/IndustryAco	<u>cess/</u>		
		These forms are no longer availabl send by mail.	e on our website to download and		
		Questions regarding premium taxet to Tommy Coco, (225) 342-1012, to			
E	Delivery Instructions:	All filings must be <u>postmarked</u> no the due date falls on a weekend or the next business day.	ater than the indicated due date. If noliday, the deadline is extended to		
F	Late Filings:		cordance with Note E above will be abject to regulatory action including		
G	Original Signatures:	Original signatures required on all Foreign companies should follow to Instructions.			
Н	Signature/Notarization/Certification:	Signatures of at least two princip Annual/Quarterly Statement filin signatures, manually signed by th corporate seal affixed thereon wh notarized.	gs, which should be original the appropriate officers, have the		
I	Amended Filings:	Amended items must be filed within along with an explanation of the and requirements for the original filing, amendment.	nendments. If there are signature		
J	Exceptions from normal filings:	Foreign companies shall supply a vextension received by its state of defiling due date to receive such from shall apply at least 10 days prior to	omicile at least 10 days prior to the Louisiana. Domestic companies		
K	Bar Codes (State or NAIC):	Not Applicable			
L	Signed Jurat:	Not Applicable			
М	NONE Filings:	"NONE" Filings are not required.			
N	Filings new, discontinued or modified materially since last year:	Line 40 - Executive Summary VM early adopted)	of the PBR Actuarial Report (if		
0	Physical Street Address:	1702 North Third Street, Baton Ro	uge, LA 70802		
Р	Certificate of Deposit (Electronic Filing):	Insurers shall submit a Certificate o domiciliary state (dated no earlier t email address: <u>statutorydeposits@</u>	han 12/31/2018) to the following		
		Questions regarding statutory depo Murphy, (225) 342-1259, <u>amurphy</u>			

Q	Reduction of tax when certain investments are made in Louisiana	For those insurers taking such a credit on its Louisiana premium taxes under LRS 22:832, evidence of a qualifying Louisiana investment may be established by a deposit receipt, bank statement, a letter, or other written documentation from the depository institution verifying that funds were deposited in Louisiana (Upon request). File Form 1068C at the address listed in Note D above.
R	HIPAA Assessment Worksheet (Electronic Filing): <u>https://ia.ldi.state.la.us/IndustryAccess/</u>	The HIPAA Assessment Worksheet (for the reporting of premiums collected in 2018) is to be filed electronically through the Industry Access portal. For questions, please email <u>HIPAAWorksheet@ldi.la.gov</u>
S	Anti-Fraud Plan (Electronic Filing):	Effective 1/1/2011, every insurer and HMO is required to file an anti- fraud plan with the Commissioner under LRS 22:572.1. Subsequent to the initial filing, each insurer or HMO is required to annually file both a supplemental report and an annual summary report. Please see Advisory Letter #2010-02 for further information. LDI "Industry Access Portal, Anti-Fraud Plans Module" https://ia.ldi.state.la.us/IndustryAccess/ (Questions regarding anti-fraud plan related filings should be directed to Mike Calamari, (225) 219-9759, mcalamari@ldi.la.gov)
Т	Corporate Governance Annual Disclosure:	Act No. 304 of the 2015 Louisiana Regular Legislative Session requires the submission of a Corporate Governance Annual Disclosure.Please contact Stewart Guerin with any questions, (225) 219-3929, sguerin@ldi.la.gov
U	ORSA Summary Report:	Act No. 196of the 2015 Louisiana Regular Legislative Session requires certain insurers to file an ORSA Summary Report.Please contact Stewart Guerin with any questions, (225) 219-3929, sguerin@ldi.la.gov
V	Certificates of Compliance & Valuation (Electronic Filings):	Each insurer shall electronically submit a Certificate of Compliance & Certificate of Valuation from its domiciliary state to the following email address: <u>administrativeservices@ldi.la.gov</u> .

General Instructions For Companies to Use Checklist

Please Note: This state's instructions for companies to file with the NAIC are included in this Checklist. The NAIC will not be sending their own checklist this year.

<u>Electronic filing is intended to include filing via the Internet or via diskette with the NAIC. Companies that file with the NAIC via the Internet are not required to submit diskettes to the NAIC. Companies are not required to file hard copy filings with the NAIC.</u>

Column (1) (Checklist)

Companies may use the checklist to submit to a state, if the state requests it. Companies should copy the checklist and place an "x" in this column when mailing information to the state.

Column (2) (Line #)

Line # refers to a standard filing number used for easy reference. This line number may change from year to year.

Column (3) (Required Filings)

Name of item or form to be filed.

The *Annual Statement Electronic Filing* includes the annual statement data and all supplements due March 1, per the *Annual Statement Instructions*. This includes all detail investment schedules and other supplements for which the *Annual Statement Instructions exempt* printed detail.

The March .PDF Filing is the .pdf file for annual statement data, detail for investment schedules and supplements due March 1.

The *Risk-Based Capital Electronic Filing* includes all risk-based capital data.

The *Risk-Based Capital .PDF Filing* is the .pdf file for risk-based capital data.

The Separate Accounts Electronic Filing includes the separate accounts annual statement and investment schedule detail.

The Separate Accounts .PDF Filing is the .pdf file for the separate accounts annual statement and all investment schedule detail.

The Supplemental Electronic Filing includes all supplements due April 1, per the Annual Statement Instructions.

The *Supplement .PDF Filing* is the .pdf file for all supplemental schedules and exhibits due April 1.

The *Quarterly Electronic Filing* includes the quarterly statement data.

The *Quarterly* .*PDF Filing* is the .pdf for quarterly statement data.

The June .PDF Filing is the .pdf file for the Audited Financial Statements and Accountants Letter of Qualifications.

Column (4) (Number of Copies)

Indicates the number of copies that each foreign or domestic company is required to file for each type of form. The Blanks (E) Task Force modified the 1999 *Annual Statement Instructions* to waive paper filings of certain NAIC supplements and certain investment schedule detail. if such investment schedule data is available to the states via the NAIC database. The checklists reflect this action taken by the Blanks (EX4) Task Force. XXX appears in the "Number of Copies" "Foreign" column for the appropriate schedules and exhibits. . Some states have chosen to waive printed quarterly and annual statements from their foreign insurers and to rely upon the NAIC database for these filings. This waiver could include supplemental annual statement filings. The XXX in this column might signify that the state has waived the paper filing of the annual statement and all supplements.

Column (5) (Due Date)

Indicates the date on which the company must file the form.

Column (6) (Form Source)

This column contains one of three words: "NAIC," "State," or "Company," If this column contains "NAIC," the company must obtain the forms from the appropriate vendor. If this column contains "State," the state will provide the forms with the filing instructions. If this column contains "Company," the company, or its representative (e.g., its CPA firm), is expected to provide the form based upon the appropriate state instructions or the NAIC *Annual Statement Instructions*.

Column (7) (Applicable Notes)

This column contains references to the Notes to the Instructions that apply to each item listed on the checklist. The company should carefully read these notes <u>before</u> submitting a filing.