HEALTH ENTITIES

COMPANY NAME: _____ **NAIC Company Code:** _____

Contact: _____ **Telephone:** _____

REQUIRED FILINGS IN THE STATE OF: UTAH **Filings Made During the Year 2016**

(1) Checklist	(2) Line #	(3) REQUIRED FILINGS FOR THE ABOVE STATE	(4) NUMBER OF COPIES* Domestic State	Domestic NAIC	Foreign State	(5) DUE DATE	(6) FORM SOURCE**	(7) APPLICABLE NOTES
		I. NAIC FINANCIAL STATEMENTS						
	1	Annual Statement (8 ½"X14")	1	EO	xxx	3/1	NAIC	A,B,E,F,G,H,I,J,K,N,O
	1.1	Printed Investment Schedule detail (Pages E01-E27)	1	EO	xxx	3/1	NAIC	A,B,E,F,J,K,M,N,O
	2	Quarterly Financial Statement (8 ½" x 14")	1	EO	xxx	5/15, 8/15, 11/15	NAIC	A,B,E,F,G,H,I,J,K,N,O
		II. NAIC SUPPLEMENTS						
	10	Accident & Health Policy Experience Exhibit	1	EO	xxx	4/1	NAIC	A,B,E,F,J,K,M,N,O
	11	Actuarial Opinion	1	EO	xxx	3/1	Company	A,B,E,F,G,I,J,K,N,O
	12	Health Care Exhibit (Parts 1, 2 and 3) Supplement	1	EO	xxx	4/1	NAIC	A,B,E,F,J,K,M,N,O
	13	Health Care Exhibit's Allocation Report Supplement	1	EO	xxx	4/1	NAIC	A,B,E,F,J,K,M,N,O
	14	Investment Risk Interrogatories	1	EO	xxx	4/1	NAIC	A,B,E,F,J,K,M,N,O
	15	Life Supplemental Data due March 1	1	EO	xxx	3/1	NAIC	A,B,E,F,J,K,M,N,O
	16	Life Supp Statement non-guaranteed elements – Exh 5, Int. #3	1	EO	xxx	3/1	Company	A,B,E,F,J,K,M,N,O
	17	Life Supp Statement on par/non-par policies – Exh 5 Int. 1&2	1	EO	xxx	3/1	Company	A,B,E,F,J,K,M,N,O
	18	Life Supplemental Data due April 1	1	EO	xxx	4/1	NAIC	A,B,E,F,J,K,M,N,O
	19	Long-Term Care Experience Reporting Forms	1	EO	xxx	4/1	NAIC	A,B,E,F,J,K,M,N,O
	20	Management Discussion & Analysis	1	EO	xxx	4/1	Company	A,B,E,F,J,K,N,O
	21	Medicare Supplement Insurance Experience Exhibit	1	EO	xxx	3/1	NAIC	A,B,E,F,J,K,M,N,O
	22	Medicare Part D Coverage Supplement	1	EO	xxx	3/1, 5/15, 8/15, 11/15	NAIC	A,B,E,F,J,K,M,N,O
	23	Property/Casualty Supplement due March 1	1	EO	xxx	3/1	NAIC	A,B,E,F,J,K,M,N,O
	24	Property/Casualty Supplement due April 1	1	EO	xxx	4/1	NAIC	A,B,E,F,J,K,M,N,O
	25	Risk-Based Capital Report	1	EO	N/A	3/1	NAIC	A,B,E,F,G,J,K
	26	Schedule SIS	2	N/A	N/A	3/1	NAIC	A,B,E,F,J,K,M
	27	Supplemental Compensation Exhibit	2	N/A	N/A	3/1	NAIC	A,B,E,F,J,K,Q
		III. ELECTRONIC FILING REQUIREMENTS						
	60	Annual Statement Electronic Filing	xxx	EO	xxx	3/1	NAIC	
	61	March .PDF Filing	xxx	EO	xxx	3/1	NAIC	
	62	Risk-Based Capital Electronic Filing	xxx	EO	N/A	3/1	NAIC	
	63	Risk-Based Capital .PDF Filing	xxx	EO	N/A	3/1	NAIC	
	64	Supplemental Electronic Filing	xxx	EO	xxx	4/1	NAIC	
	65	Supplemental .PDF Filing	xxx	EO	xxx	4/1	NAIC	
	66	Quarterly Statement Electronic Filing	xxx	EO	xzx	5/15, 8/15, 11/15	NAIC	
	67	Quarterly .PDF Filing	xxx	EO	xxx	5/15, 8/15, 11/15	NAIC	
	68	June .PDF Filing	xxx	EO	xxx	6/1	NAIC	
		IV. AUDIT/INTERNAL CONTROL RELATED REPORTS						
	81	Accountants Letter of Qualifications	1	EO	N/A	6/1	Company	A,B,E,F,J,N,O
	82	Audited Financial Reports	1	EO		6/1	Company	A,B,E,F,J,K,N,O

	83	Audited Financial Reports Exemption Affidavit	2	N/A	N/A		Company	A,B,J,N,O
	84	Communication of Internal Control Related Matters Noted in Audit	2	N/A	N/A	8/1	Company	A,B,E,F,J,K,M,N,O
	85	Independent CPA (change)	2	N/A	N/A		Company	A,B,E,F,J,N,O
	86	Management's Report of Internal Control Over Financial Reporting	2	N/A	N/A	8/1	Company	A,B,E,F,J,K,M,N,O
	87	Notification of Adverse Financial Condition	2	N/A	N/A		Company	A,B,E,F,N,O
	88	Request for Exemption to File	2	N/A	N/A		Company	A,B,J,N,O
	89	Relief from the five-year rotation requirement for lead audit partner	1	EO		3/1	Company	A,B,E,F,J,N,O
	90	Relief from the one-year cooling off period for independent CPA	1	EO		3/1	Company	A,B,E,F,J,N,O
	91	Relief from the Requirements for Audit Committees	1	EO		3/1	Company	A,B,E,F,J,N,O
		V. STATE REQUIRED FILINGS*						
	101	Certificate of Compliance	0	0	0		State	
	102	Certificate of Deposit	0	0	0		State	
	103	Filings Checklist (with Column 1 completed)	1	0	0	3/1	State	
	104	Premium Tax (Separate Filing – EO)	1	0	1	3/31	State	D
	105	State Filing Fees (i.e., State Filing Fees)	1	0	1	3/1	State	C
	106	Signed Jurat	xxx	0	xxx	3/1	NAIC	L
	107	Utah Accident and Health Survey	1	0	1	4/1	State	P
	108	Holding Company Registration Form B & C	2	0	N/A	5/1	State	A,B,E,F,J,S,R
	109	Holding Company Form D, Surplus Notes, Extraordinary Dividend Requests and Other Things	See Note S	N/A	N/A		State	S

***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 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 not 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:** http://www.naic.org/public_lead_state_report.htm

NOTES AND INSTRUCTIONS (A-K APPLY TO ALL FILINGS)

	A	**Required Statement *Filing* Contact Information:**	For questions and filing information concerning Utah Filing, please send requests to: **Analyst Team** Analysts@utah.gov Please include Company Name, NAIC Co Code, and filing Subject Line. If secure or proprietary information is to be provided, please use your secure electronic account drop box that you have with the Utah Insurance Department. If you do not have such an account, please e-mail analysts@utah.gov and request instructions on how to secure an electronic account drop box.
	B	**Mailing Address:**	Utah Insurance Department State Office Building, Suite 3110 Salt Lake City, Utah 84114-6901
	C	**Information for Filing /Renewal Fees:** **Contact Information for Questions Concerning Renewal Fees:** **For Complete Renewal Instructions: Preferred Methods of Payment:**	See the Fee Schedule shown in Utah Administrative Code § R590-102-4 General Instructions and R590-102-5 Fees. For questions concerning Utah Renewal Fee's, please contact: **Dava Ann Neal** dneal@utah.gov 801-538-3812 http://www.insurance.utah.gov/insurers/renewals.html 1. Payment by Credit Card 2. Payment by e-check (ACH-Debit) – Corporate accounts may have "blocks" prohibiting this type of transaction, so you will need your financial institution to confirm e-check transactions are allowed. THIS MUST BE DONE PRIOR TO MAKING A PAYMENT ON-LINE. If you are unable to process an e-check, provide your financial institution with Utah Departments originating ID number, 0000097488, before processing the e-check transaction. E- check is the only ACH type transaction currently supported. 3. Payment by Check – Department will accept checks **ONLY** if you are unable to pay with a credit card or e-check.
	D	**Online URL for Insurance Premium Tax Payments: (Must be filed electronically through TAP)** **Instructions for Premium Tax Payments online:** **Filing Info:** **Statutes** **Contact Information for Questions Concerning Premium Taxes:**	www.tax.utah.gov (Taxpayer Access Point – TAP) Click on the "Business Tax Info" link Click on the "On Line Tax filing & Payment" link Click on the "Taxes for Individuals and Businesses" link Click on the "File and Pay Most Utah Taxes Online with Taxpayer Access Point – TAP" link Filing Frequency: Annual Return & 4th Quarter Payment Filing Due: March 31st. Payment Due: Last day of April, July & Oct. for quarterly estimated prepayments. See statutes: §31A-3 and §59-9 For questions concerning Utah's premium tax, please contact: **Kyle Boyer** kboyer@utah.gov (801) 297-4637

	E	Delivery Instructions:	All **hardcopy** filings must be postmarked no later than the indicated due date. If the due date falls on a weekend or holiday, then the deadline is extended to the next business day.
	F	Late Filings:	Foreign company electronic filings will be deemed filed based on the date received by the NAIC. Domestic hardcopy filings will be deemed filed based on the postmark date. Any actions concerning late filings will be taken in accordance with Utah Administrative Code § R590-147-5(3) and Utah Code Annotated § 31A-2-308.
	G	Original Signatures:	When signatures are required by the NAIC Annual Statement Instructions, originals are required from domestic insurers. Original signatures are not required of foreign companies unless specifically requested. Rather foreign companies should follow the guidance provided in the NAIC Annual Statement Instructions.
	H	Signature/Notarization/Certification:	For domestic insurers only, two of the three principal officers specified by a company's articles of incorporation are required to sign those filings for which NAIC Instructions require principal officers' signatures. All other signatures shall be done in accordance with NAIC requirements. Notarizations and Certifications shall be performed when required by NAIC instructions. Foreign companies are to follow the guidance of the domiciliary regulator and provide evidence of compliance only upon request.
	I	Amended Filings:	Amended items must be filed within 10 days of their amendment, along with an explanation of the amendments. If there are signature requirements for the original filing, the same should be followed for any amendment. This guidance applies to domestic companies only. Foreign entities should follow the guidance of their domiciliary regulator.
	J	Extensions to normal due dates: *Note: Extensions do not apply to premium taxes and fees*	Requests by foreign companies for extensions for a period of 30 days or less beyond the regular due date are not be required to be sent in providing the domiciliary state has granted the extension and notified the NAIC. Extensions beyond 30 days will require a written request prior to expiration of the initial 30 day period, and evidence of domiciliary approval. Domestic companies should apply for extensions at least 30 days prior to the regular due date.
	K	Bar Codes (State or NAIC):	Not Required.
	L	Signed Jurat Page:	For domestic insurers only, two of the three principal officers specified by a company's articles of incorporation are required to sign. Notarizations and Certifications are also required. Foreign companies are to follow the guidance of the domiciliary regulator and provide evidence of compliance only upon request.
	M	"NONE" Filings:	Filings which state "NONE" across them are not to be filed unless required by the NAIC Annual/Quarterly Statement Instructions.
	N	Filings new, discontinued, or modified materially since last year:	Line #24 and #46 are new line items.
	O	Foreign Filing Requirements:	All foreign companies and accredited reinsurers that file their NAIC annual statement blank, annual audited financial reports, quarterly financial statements and any supplements related to these documents with the NAIC are exempt from filing a hard copy of these items with the Department. These items should be submitted to the NAIC via electronic media in accordance with the due dates established by the NAIC.
	P	Utah Accident & Health Survey: Contact Information for Questions Concerning Survey:	All insurers who have accident & health business in Utah are required to file this survey. (see following link for more information) https://insurance.utah.gov/agent/insurers/AHSurveyInstructions.php For questions concerning the survey, please contact: Kris Buckler uid.healthresearch@utah.gov. (801) 538-3824

	Q	Supplemental Compensation Exhibit:	These filings are required from all domestics. **A company wishing to have this information therein treated as "*confidential*" should consult the Utah Governmental Records Access and Management Act, Title 63G, Chapter 2, and especially Subsections 63G-2-305(1) and 63G-2-305(2), for possible applicability.**
	R	Holding Company Filings	The Form B, C and F filing are required on an annual basis from all domestics subject to the Holding Company statutes. In accordance with Utah Code Annotated § 31A-16-109 this form is deemed a confidential filing. Please refer to the attachment of Utah Administrative Code § R590-70 for guidance on the format this filing should take. Questions may be sent to: Analyst Team analysts@utah.gov Please include Company Name, NAIC Co Code, and filing Subject Line. If secure or proprietary information is to be provided, please use your secure electronic account drop box that you have with the Utah Insurance Department. If you do not have such an account, please e-mail analysts@utah.gov and request instructions on how to secure an electronic account drop box.
	S	Other Proprietary Filings Contact Information for Questions Concerning Other Filings:	i.e. Surplus, Dividends, & Other Filings Non-proprietary questions may be sent to: Analyst Team analysts@utah.gov Please include Company Name, NAIC Co Code, and filing Subject Line. If secure or proprietary information is to be provided, please use your secure electronic account drop box that you have with the Utah Insurance Department. If you do not have such an account, please e-mail analysts@utah.gov and request instructions on how to secure an electronic account drop box.
	T	Regulatory Asset Adequacy Issues Summary (RAAIS)	All Utah domestics that file on a life blank are required to file this form.(See Utah Administrative Code, Section R590-162) Questions to: Tomasz Serbinowski, (801) 537-9289 tserbinowski@utah.gov

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.**

Electronic filing is intended to be filing(s) submitted to the NAIC via the NAIC Internet Filing Site which eliminates the need for a company to submit diskettes or CD-ROM to the NAIC. Companies are not required to file hard copy filings with the NAIC.

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 investments schedules and other supplements for which the *Annual Statement Instructions* exempt printed detail.

The ***March .PDF Filing*** is .pdf files 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 investment schedule detail.

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

The ***Supplemental .PDF Filing*** is the .pdf file for all supplements 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 (EX) 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 (EX) 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.**

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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 (generally, on its website). 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 before submitting a filing.

W:\QA\BLANKS\CHECKLISTS\2014_filingsmade2015\fratcklist_2014_filingsmade2015.docx