

**HEALTH ENTITIES  
(EXCLUDING HEALTH MAINTENANCE ORGANIZATIONS)**

**COMPANY NAME:** \_\_\_\_\_

**NAIC Company Code:** \_\_\_\_\_

**Contact:** \_\_\_\_\_

**Telephone:** \_\_\_\_\_

**REQUIRED FILINGS IN THE STATE OF: MASSACHUSETTS**

**Filings Made During the Year 2010**

(1) Check-list	(2) Line #	(3) REQUIRED FILINGS FOR THE ABOVE STATE	(4) NUMBER OF COPIES*			(5) DUE DATE	(6) FORM SOURCE**	(7) APPLICABLE NOTES
			Domestic		Foreign			
			State	NAIC	State			
		<b>I. NAIC FINANCIAL STATEMENTS</b>						
	1	Annual Statement (8 1/2"X14")	3	EO	xxx	3/1	NAIC	
	1.1	Printed Investment Schedule detail (Pages E01-E27)	3	EO	xxx	3/1	NAIC	
	2	Quarterly Financial Statement (8 1/2" x 14")	3	EO	xxx	5/17, 8/16, 11/15	NAIC	
					xxx			
		<b>II. NAIC SUPPLEMENTS</b>			xxx			
	10	Accident & Health Policy Experience Exhibit	3	EO	xxx	4/1	NAIC	
	11	Actuarial Opinion	3	EO	xxx	3/1	Company	
	12	Investment Risk Interrogatories	3	EO	xxx	4/1	NAIC	
	13	Life Supplemental Data due March 1	3	EO	xxx	3/1	NAIC	
	14	Life Supp Statement non-guaranteed elements –Exh 5, Int. #3	3	EO	xxx	3/1	Company	
	15	Life Supp Statement on par/non-par policies – Exh 5 Int. 1.1	3	EO	xxx	3/1	Company	
	16	Life Supplemental Data due April 1	3	EO	xxx	4/1	NAIC	
	17	Long-term Care Experience Reporting Forms	3	EO	xxx	4/1	NAIC	
	18	Management Discussion & Analysis	3	EO	xxx	4/1	Company	
	19	Medicare Supplement Insurance Experience Exhibit	3	EO	xxx	3/1	NAIC	
	20	Medicare Part D Coverage Supplement	3	EO	xxx	3/1, 5/17, 8/16, 11/15	NAIC	
	21	Property/Casualty Supplement due March 1	3	EO	xxx	3/1	NAIC	
	22	Property/Casualty Supplement due April 1	3	EO	xxx	4/1	NAIC	
	23	Risk-Based Capital Report	3	EO	xxx	3/1	NAIC	
	24	Schedule SIS	3	N/A	N/A	3/1	NAIC	
	25	Supplemental Compensation Exhibit	3	N/A	N/A	3/1	NAIC	See Note 1
		<b>III. ELECTRONIC FILING REQUIREMENTS</b>						
	50	Annual Statement Electronic Filing	xxx	1	xxx	3/1	NAIC	
	51	March .PDF Filing	xxx	1	xxx	3/1	NAIC	
	52	Risk-Based Capital Electronic Filing	xxx	1	N/A	3/1	NAIC	
	53	Risk-Based Capital .PDF Filing	xxx	1	N/A	3/1	NAIC	
	54	Supplemental Electronic Filing	xxx	1	xxx	4/1	NAIC	
	55	Supplemental .PDF Filing	xxx	1	xxx	4/1	NAIC	
	56	June .PDF Filing	xxx	1	xxx	6/1	NAIC	
	57	Quarterly Electronic Filing	xxx	1	xxx	5/15, 8/15, 11/15	NAIC	
	58	Quarterly .PDF Filing	xxx	1	xxx	5/15, 8/15, 11/15	NAIC	
		<b>IV. AUDITED FINANCIAL STATEMENTS</b>						
	71	Accountants Letter of Qualifications	3	EO	N/A	6/1	Company	
	72	Audited Financial Statements	3	EO	xxx	6/1	Company	
	73	Audited Financial Statements Exemption Affidavit	3	N/A	N/A	6/1	Company	
	74	Independent CPA	3	N/A	N/A	6/1	Company	
	75	Notification of Adverse Financial Condition	3	N/A	N/A	6/1	Company	
	76	Report of Significant Deficiencies in Internal Controls	3	N/A	N/A	6/1	Company	
	77	Request for Exemption to File	1	N/A	N/A	3/1	Company	
		<b>V. STATE REQUIRED FILINGS</b>						
	101	Filings Checklist (with Column 1 completed)	1	0	1		State	
	102	State Filing Fees	0	0	1	3/1	State	See Note 3
	103	Signed Jurat	xxx	0	1	3/1, 5/17, 8/16, 11/15	NAIC	See Note 8
	104	Claims in Suit	2	0	1	3/1	Company	See Note 4
	105	Holding Company Registration Statement	2	0	1	4/30	Company	See Note 7
	106	Holding Company Registration Statement Affidavit	0	0	1	3/1	State	See Note 7
	107	License Renewal Application	0	0	1	3/1	State	See Note 3

\* 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.

\* If EO appears in this column, the filing is an electronic filing only.

\* If @@@ appears in this column, please refer to the 2009 Filings Checklist Notes.

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

**HEALTH ENTITIES  
(EXCLUDING HEALTH MAINTENANCE ORGANIZATIONS)**

		<b>NOTES AND INSTRUCTIONS</b>	
	A	Required Filings Contact Person:	Peter J. Arens 617-521-7392 <a href="mailto:Peter.Arens@state.ma.us">Peter.Arens@state.ma.us</a> or <a href="mailto:Companies.Mailbox@state.ma.us">Companies.Mailbox@state.ma.us</a>
	B	Mailing Address:	Commonwealth of Massachusetts Division of Insurance Financial Surveillance Section One South Station Boston, MA 02110-2208
	C	Mailing Address for Filing Fees and License Renewal Application:	Massachusetts Division of Insurance Annual Statement Filing / Company License Renewal PO Box 370039 Boston, MA 02241-0739
	D	Mailing Address for Premium Tax Payments:	Commissioner of Revenue Banking and Insurance Unit 200 Arlington Street Chelsea, MA 02151 617-887-6714
	E	Delivery Instructions:	Massachusetts General Laws, Chapter 175, Section 25, Chapter 176A, Section 18, Chapter 176B, Section 8, Chapter 176E, Section 8, and Chapter 176F, Section 8, require that the Annual Statement be <b>received on or before March 1, 2010</b> . All schedules due on that date must be securely attached to the appropriated pages or bound separately.
	F	Late Filings:	Massachusetts General Laws, Chapter 175, Section 26, Chapter 176A, Section 18, Chapter 176B, Section 8, Chapter 176E, Section 8, and Chapter 176F, Section 8, provide for a penalty of <b>\$100 per day</b> if the Annual Statement, and all other related filings are not received in the proper form and by the date required. In addition, any company that neglects to file in the proper form and by the date required, may be required to cease writing new business as long as this deficiency continues. Additionally, for those companies subject to the requirements of Massachusetts General Laws, Chapter 176O, pursuant to Section 8, “a carrier neglecting to make and file its Annual Statement or the materials required by the Commissioner to be filed with the Division under this Chapter or under Chapter 176G in the form and within the time required thereby shall be fined <b>\$5,000 for each day</b> during which such neglect continues after being notified by said Commissioner of such neglect, and, after notice and a hearing by the Commissioner to that effect, its authority to do new business shall cease while such neglect continues”.

	G	Original Signatures:	Original notarized signatures of at least two principal officers of the company.
	H	Signature/Notarization/Certification:	Annual Statement must be subscribed and sworn before a notary by at least two principal officers of the company.
	I	Amended Filings:	
	J	Exceptions from normal filings:	
	K	Bar Codes (State or NAIC):	Please follow the instructions in the NAIC Annual Statement Instructions.
	L	Signed Jurat:	In lieu of printed copies of annual statements, quarterly statements, and related filings, Massachusetts requires foreign health entities (excluding health maintenance organizations) to file a Signed Jurat Page.
	M	NONE Filings:	Please follow the instructions in the NAIC Annual Statement Instructions.
	N	Filings new, discontinued or modified materially since last year:	

**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 include filing via the Internet or filing 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.**

**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 *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 (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 (E) 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 (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.