

**VERMONT FILING CHECKLIST
FRATERNAL BENEFIT SOCIETIES**

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

Contact: _____ **Telephone:** _____

REQUIRED FILINGS IN THE STATE OF: VERMONT **Filings Made During the Year 2012**

(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			
I. NAIC FINANCIAL STATEMENTS								
	1	Annual Statement (8 1/2"x14")	2	EO	xxx	3/1	NAIC	A - N
	1.1	Printed Investment Schedule detail (Pages E01-E27)	2	EO	xxx	3/1	NAIC	A - N
	2	Quarterly Financial Statement (8 1/2" x 14")	2	EO	xxx	5/15, 8/15, 11/15	NAIC	A - N
	3	Separate Accounts Annual Statement (8 1/2"x 14")	2	EO	xxx	3/1	NAIC	A - N
II. NAIC SUPPLEMENTS								
	10	Accident & Health Policy Experience Exhibit	2	EO	xxx	4/1	NAIC	A - N
	11	Actuarial Certification Related Annuity Nonforfeiture Ongoing Compliance for Equity Indexed Annuities	2	EO	xxx	3/1	Company	A - N
	12	Actuarial Certification Related to Hedging required by Actuarial Guideline XLIII	2	EO	xxx	3/1	Company	A - N
	13	Actuarial Certification Related to Reserves required by Actuarial Guideline XLIII	2	EO	xxx	3/1	Company	A - N
	14	Actuarial Certification regarding use 2001 Preferred Class Table	2	EO	xxx	3/1	Company	A - N
	15	Actuarial Opinion	2	EO	xxx	3/1	Company	A - N
	16	Actuarial Opinion on X-Factors	2	EO	xxx	3/1	Company	A - N
	17	Actuarial Opinion on Separate Accounts Funding Guaranteed Minimum Benefit	2	EO	xxx	3/1	Company	A - N
	18	Actuarial Opinion on Synthetic Guaranteed Investment Contracts	2	EO	xxx	3/1	Company	A - N
	19	Actuarial Opinion required by Modified Guaranteed Annuity Model Regulation	2	EO	xxx	3/1	Company	A - N
	20	Analysis of Annuity Operations by Lines of Business	2	EO	xxx	4/1	NAIC	A - N
	21	Analysis of Increase in Annuity Reserves During Year	2	EO	xxx	4/1	NAIC	A - N
	22	Financial Officer Certification Related to Clearly Defined Hedging Strategy required by Actuarial Guideline XLIII	2	EO	xxx	3/1	Company	A - N
	23	Health Care Exhibit (Parts 1, 2 and 3) Supplement	2	EO	xxx	4/1	NAIC	A - N
	24	Health Care Exhibit's Allocation Report Supplement	2	EO	xxx	4/1	NAIC	A - N
	25	Interest Sensitive Life Insurance Products Report	2	EO	xxx	4/1	NAIC	A - N
	26	Investment Risk Interrogatories	2	EO	xxx	4/1	NAIC	A - N
	27	Long-term Care Experience Reporting Forms	2	EO	xxx	4/1	NAIC	A - N
	28	Management Certification that the Valuation Reflects Management's Intent required by Actuarial Guideline XLIII	2	EO	xxx	3/1	Company	A - N
	29	Management Discussion & Analysis	2	EO	xxx	4/1	Company	A - N
	30	Medicare Supplement Insurance Experience Exhibit	2	EO	xxx	3/1	NAIC	A - N
	31	Medicare Part D Coverage Supplement	2	EO	xxx	3/1, 5/15, 8/15, 11/15	NAIC	A - N
	32	Reasonableness of Assumptions Certification required by Actuarial Guideline XXXV	2	EO	xxx	3/1, 5/15, 8/15, 11/15	Company	A - N
	33	Reasonableness & Consistency of Assumptions Certification required by Actuarial Guideline XXXV	2	EO	xxx	3/1, 5/15, 8/15, 11/15	Company	A - N
	34	Reasonableness of Assumptions Certification for Implied Guaranteed Rate Method required by Actuarial Guideline XXXVI	2	EO	xxx	3/1, 5/15, 8/15, 11/15	Company	A - N
	35	Reasonableness & Consistency of Assumptions Certification required by Actuarial Guideline XXXVI (Updated Average Market Value)	2	EO	xxx	3/1, 5/15, 8/15, 11/15	Company	A - N
	36	Reasonableness & Consistency of Assumptions Certification required by Actuarial Guideline XXXVI (Updated Market Value)	2	EO	xxx	3/1, 5/15, 8/15, 11/15	Company	A - N
	37	Risk-Based Capital Report	2	EO	xxx	3/1	NAIC	A - N
	38	RBC Certification required under C-3 Phase I	2	EO	xxx	3/1	Company	A - N
	39	RBC Certification required under C-3 Phase II	2	EO	xxx	3/1	Company	A - N
	40	Statement on non-guaranteed elements - Exhibit 5 Int. #3	2	EO	xxx	3/1	Company	A - N
	41	Statement on participating/non-participating policies - Exhibit 5, Inter. #1&2	2	EO	xxx	3/1	Company	A - N
	42	Supplemental Compensation Exhibit	1	N/A	N/A	3/1	NAIC	X

43	Trusteed Surplus Statement	2	EO	xxx	3/1, 5/15, 8/15, 11/15	NAIC	A – N
III. ELECTRONIC FILING REQUIREMENTS							
50	Annual Statement Electronic Filing	xxx	1	xxx	3/1	NAIC	S
51	March .PDF Filing	xxx	1	xxx	3/1	NAIC	S
52	Risk-Based Capital Electronic Filing	xxx	1	N/A	3/1	NAIC	S
53	Risk-Based Capital .PDF Filing	xxx	1	N/A	3/1	NAIC	S
54	Separate Accounts Electronic Filing	xxx	1	xxx	3/1	NAIC	S
55	Separate Accounts .PDF Filing	xxx	1	xxx	3/1	NAIC	S
56	Supplemental Electronic Filing	xxx	1	xxx	4/1	NAIC	S
57	Supplemental .PDF Filing	xxx	1	xxx	4/1	NAIC	S
58	Quarterly Statement Electronic Filing	xxx	1	xxx	5/15, 8/15 & 11/15	NAIC	S
59	Quarterly .PDF Filing	xxx	1	xxx	5/15, 8/15 & 11/15		S
60	June .PDF Filing	xxx	1	xxx	6/1	NAIC	S
IV. AUDIT/INTERNAL CONTROL RELATED REPORTS							
71	Accountants Letter of Qualifications	1	EO	N/A	6/1	Company	A – N, DD
72	Audited Financial Reports	1	EO	xxx	6/1	Company	A – N, DD
73	Audited Financial Reports Exemption Affidavit	1	N/A	N/A	6/1	Company	A – N, DD
74	Communication of Internal Control Related Matters Noted in Audit	1	N/A	N/A	8/1	Company	A – N, DD
75	Independent CPA (change)	1	N/A	N/A		Company	A – N, DD
76	Management’s Report of Internal Control Over Financial Reporting	1	N/A	N/A	8/1	Company	A – N, DD
77	Notification of Adverse Financial Condition	1	N/A	1	When issued	Company	A – N, DD
78	Request for Exemption to File	1	N/A	1	6/1	Company	A – N, DD
79	Relief from the five-year rotation requirement for lead audit partner	1	EO	N/A	3/1	Company	A – N, DD
80	Relief from the one-year cooling off period for independent CPA	1	EO	N/A	3/1	Company	A – N, DD
81	Relief from the Requirements for Audit Committees	1	EO	N/A	3/1	Company	A – N, DD
V. STATE REQUIRED FILINGS							
101	Certificate of Compliance	0	0	0		State	P
102	Certificate of Deposit	0	0	0		State	Q
103	Certificate of Valuation	1	0	0	When available	Company	R
104	Filings Checklist (with Column 1 completed)	1	0	0	3/1	State	A – N
105	Premium tax – File with Vermont Department of Taxes	1	0	1	2/29 and quarterly	State Tax Department	D
106	Vermont Annual Fee Calculation Form	1	0	1	3/1	State	A – C, E, F
107	Vermont Annual Filing Fees	1	0	1	3/1	Company	A – C, E, F
108	Signed Jurat	xxx	0	1	3/1	NAIC	L
109	Notice of Legal Actions Involving Other Insurance Departments	1	0	1	When issued	Company	U
110	Vermont Health Care Administration Supplemental Filing (also known as Annual Statement Supplement)	1	0	1	3/1	State	BB

*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.

VERMONT'S NOTES AND INSTRUCTIONS - 2011

A	Required Filings Contact Person:	Company Licensing Section Vermont Insurance Division (802) 828-2470 bishca.complic@state.vt.us
B	Mailing Address:	Company Licensing Section Vermont Insurance Division Vermont Department of Banking, Insurance, Securities and Health Care Administration 89 Main Street Montpelier, VT 05620-3101
C	Mailing Address for Filing Fees:	Mail fees to the address in Note B. Make check payable to Vermont Insurance Division. Indicate NAIC number on check. Provide separate check for each company.
D	Mailing Address for Premium Tax Payments:	Taxpayer Services Division Vermont Department of Taxes PO Box 547 Montpelier, VT 05601-0547 or 133 State Street Montpelier, VT 05633-1401 Make checks for premium taxes payable to Vermont Department of Taxes. Direct questions regarding premium tax payments to: Business Tax Examiner (802) 828-6837
E	Delivery Instructions:	All filings and fees must be physically received at the address in Note B 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:	Insurers may be fined for a late filing.
G	Original Signatures:	The Vermont Insurance Division accepts original or facsimile signatures on filings from foreign insurers. Original signatures are required on filings from domestic insurers.
H	Signature/Notarization/Certification:	At least two executive officers are required to sign the annual statement. Vermont domestic insurers must include the original signature of the President or CEO. Signatures for domestic insurers must be notarized.
I	Amended Filings:	Amended items must be filed within ten (10) days of their amendment, along with an explanation thereof.
J	Exceptions from normal filings:	Foreign insurers must supply a written copy of any exemption or extension received by its state of domicile to receive same from Vermont.
K	Bar Codes (State or NAIC):	Vermont does not use bar codes.

L	Signed Jurat:	Foreign insurers that file electronically with the NAIC are instructed to complete and file the Jurat page in place of the annual statement (original or facsimile signatures accepted). For Vermont domestic insurers, see Note H.
M	Vermont Filing Due Dates:	Annual filings for HMDIs and all other insurers are due 3/1. Annual filings for HMOs are due 5/1.
N	Filings new, discontinued or modified materially since last year:	No changes.
O	Accident and Health Advertising Certificate:	Vermont Regulation 71-1, 15B requires only insurers who sell Accident and Health products in Vermont (excepting Medicare prescription drug coverage (PDP) companies) to submit an Accident and Health Advertising Certificate. Send to: Division of Health Care Administration Vermont Department of Banking, Insurance, Securities and Health Care Administration 89 Main Street Montpelier, VT 05620-3101 Please direct questions to the Division of Health Care Administration at (802) 828-2900.
P	Certificate of Compliance:	Foreign insurers are not required to file certificates of compliance.
Q	Certificate of Deposit:	Foreign insurers are not required to file certificates of deposit.
R	Certificate of Valuation:	Domestic insurers are required to submit a Certificate of Valuation. Send to the address in Note B.
S	Electronic Filings:	Vermont relies on the electronic filings made with the NAIC.
T	Net Worth, Deposit and Designated Reserve Calculations – HMO:	8 VSA §5102(e)(3)(B) requires insurers to file with the Commissioner the net worth, deposit and designated reserve calculations made under subsections 5102b(b) and (c) of this title. Direct questions regarding this filing to Jesse Lussier, Company Licensing Section at (802) 828-3690. Send to the address in Note B.
U	Notice of Legal Actions Involving Other Insurance Departments:	Vermont Bulletin 30 requires insurers doing business in Vermont to inform the department of legal actions involving other insurance departments. Direct this information to: Paul Bicica Market Conduct Section Vermont Insurance Division Vermont Department of Banking, Insurance, Securities and Health Care Administration 89 Main Street Montpelier, VT 05620-3101 Direct questions to Paul Bicica at (802) 828-4843.

V	Report on the Operations of the Quality Assurance Program and the Grievance Procedures – HMO:	8 VSA §5102(e)(3)(A) requires insurers to submit a report on the operations of the quality assurance program and the grievance procedures describing any changes made in the operations of the quality assurance program and the grievance procedures during the preceding calendar year. Send report to: Division of Health Care Administration Vermont Department of Banking, Insurance, Securities and Health Care Administration 89 Main Street Montpelier, VT 05620-3101 Direct questions regarding this report to (802) 828-2900.
W	Request to File Consolidated Audited Annual Statements:	Foreign insurers may file audited consolidated or combined financial statements if the insurer is part of a group of insurance companies that utilizes a pooling or 100% reinsurance agreement, and such insurer cedes all its business to the pool, per 8 §VSA 3578(g). Specific departmental approval is not necessary.
X	Supplemental Compensation Exhibit :	Vermont domestic insurers are required to file two versions of the Supplemental Compensation Exhibit annually with the Vermont Insurance Division. One version should be on a cash basis and the other on an accrual basis . Insurers shall disclose the compensation of the chief executive officer and the four most highly paid other executive officers. These employees need only be identified by their titles. See NAIC Annual Statement Instructions Sup. Inst. 2-1. Send to the address in Note B.
Y	Vermont Antitrust Compliance Policy Certification:	The Certificate of Authority issued to The Vermont Health Plan LLC (TVHP) requires this certification. Send to the address in Note B.
Z	Vermont Domestic Annual Report & Annual Meeting Notification Material Sent to Policyholders	Domestic insurers are required to provide copies of this notification to the Vermont Insurance Division. Send to the address in Note B.
AA	Vermont Domestic Holding Company Forms B & C:	Domestic insurers are required to file annual Holding Company Forms B & C, per 8 VSA §3684(a). Send to the address in Note B. Also send electronic copies to bishca.complic@state.vt.us

BB	Vermont Health Care Administration Supplemental Filing (also known as the Annual Statement Supplement):	This form must be completed online. Questions should be directed to: Spenser Weppler at spenser.weppler@state.vt.us or Spenser Weppler Analysis and Data Management Section Division of Health Care Administration Vermont Department of Banking, Insurance, Securities and Health Care Administration 89 Main Street Montpelier, VT 05620-3101
CC	Vermont Mandated Reporting (Liquor Liability Report):	8 VSA §3567 and Vermont Bulletin 89 mandate collection of liquor liability statistics. Mail this report directly to: Kevin Gaffney Insurance Analysis Section Vermont Insurance Division Vermont Department of Banking, Insurance, Securities and Health Care Administration 89 Main Street Montpelier, VT 05620-3101 Direct any questions regarding completion of this form to Kevin Gaffney at (802) 828-4845.
DD	Audited Financial Statements	Filings must be made in accordance with Vermont Regulation I-2009-06, Annual Financial Reporting Regulation.
EE	Insurer Climate Risk Disclosure Survey	Only Domestic companies need to file this document. Disclosure is mandatory for companies with premium over \$500M and the lead company in a group is a Vermont domestic. The form may be found at http://www.naic.org/documents/committees_explen_climate_survey_032810.pdf

**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 *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 (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.