



STATE OF RHODE ISLAND

Department of Business Regulation
INSURANCE DIVISION
1511 Pontiac Ave., Bldg. 69-2
Cranston, RI 02920

TEL #: (401) 462-9520
FAX #: (401) 462-9602

January 8, 2021

To: INDIVIDUAL(S) RESPONSIBLE FOR STATE FILINGS

From: Deb Almeida
Senior Insurance Examiner

RE: Summary of Annual and Quarterly Filing Requirements for 2021,
Life, Accident and Health, and Fraternal Insurance Companies
(All companies filing on the NAIC L&H Annual Statement blank)

Domestic and Foreign L&H Companies should review the following attached pages:

- The NAIC's "General Instructions" for L&H Companies;
- The NAIC's "Life, Accident and Health and Fraternal Insurers Checklist", annotated for filing in R.I.;
- The R.I. Insurance Division's "Notes and Instructions"
- The R.I. Insurance Division's "Special Reporting Requirements" (most L&H Companies need to respond only to Special Report Requirements #2 #4, #8 #9 and #10 note that this year, the absence of a report filed in response to requirement #4 will be deemed to be a "NONE" report; Accredited and Approved Reinsurers may ignore this page totally); and
- The R.I. Insurance Division's "Contracted Producer Report".

FOREIGN L&H Companies are required to submit to the R.I. Insurance Division (or to the R.I. Division of Taxation for premium tax payments), on or before the due dates indicated, only those items listed in the Checklist, Section V - State Required Filings.

- Do NOT file a printed copy of the Annual Statement or Combined Statement;
- Premium Tax reports and payments are separate filings and should be sent to the Division of Taxation;
- R.I. Renewal Filing Fees and Assessments (including Retaliatory Assessments), due on 04/01/21, should NOT be included with the above filings; our invoice will be e-mailed to the company on or about 03/01/21

DOMESTIC L&H Companies are required to submit the following items to the R.I. Insurance Division (or to the R.I. Division of Taxation for premium tax payments), on or before the dates indicated

**Due to the COVID-19 pandemic, all filings required to be submitted to the R.I. Insurance Division, are permitted to be submitted electronically by email to:
DBR.CompanyLicensing@dbr.ri.gov. Electronic signatures will also be accepted.**

- **03/01/21:** A complete Annual Statement, a Separate Account Statement (if appropriate), and a Risk-Based Capital Report, with electronic signatures on Jurat Pages; a copy of the Checklist with Column 1 completed; and any NAIC Supplements or R.I.-Required Filings listed in Sections II or V of the Checklist as due on this date.

Send Premium Tax reports and payments to the Division of Taxation.

- **04/01/21:** Any NAIC Supplements and any R.I.-Required Filings listed as due on this date, including payment of R.I. Filing Fees due as per our **03/01/21** invoice.
- **05/15/21:** A Quarterly Statement, with electronic signatures on the Jurat Page. This filing requirement repeats on **08/15/21** and **11/15/21**.
- **06/01/21:** Audited Financial Statements, and, if appropriate, a Credit Life, Accident & Health report due on this date.
- Each domestic L&H Company must also file electronically with the NAIC as part of the NAIC's total filing requirements.

Whether an alien, domestic or foreign P&C Company, please read "Notes and Instructions" before submitting any material. Thank you in advance for your cooperation. Feel free to contact me directly at (401) 462-9542 or Debra.almeida@dbr.ri.gov. If you have any questions regarding these filing requirements.

LIFE, ACCIDENT AND HEALTH/FRATERNAL INSURERS

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

Contact: _____ **Telephone:** _____

REQUIRED FILINGS IN THE STATE OF: **RHODE ISLAND** **Filings Made During the Year** **2021**

FRATERNAL COMPANIES BEGIN FILING LIFE/FRATERNAL STATEMENT EFFECTIVE WITH FIRST QUARTER 2019.

(1) Checklist	(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")	1	EO	xxx	3/1	NAIC	Note G, H & L
	1.1	Printed Investment Schedule detail (Pages E01-E29)	1	EO	xxx	3/1	NAIC	
	2	Quarterly Financial Statement (8 1/2" x 14")	1	EO	xxx	5/15, 8/15, 11/15	NAIC	
	3	Separate Accounts Annual Statement (8 1/2"x14")	1	EO	xxx	3/1	NAIC	
II. NAIC SUPPLEMENTS								
	11	Accident & Health Policy Experience Exhibit	1	EO	xxx	4/1	NAIC	
	12	Credit Insurance Experience Exhibit	1	EO	xxx	4/1	NAIC	
	13	Life, Health & Annuity Guaranty Assessment Base Reconciliation Exhibit	1	EO	xxx	4/1	NAIC	
	14	Life, Health & Annuity Guaranty Assessment Base Reconciliation Exhibit Adjustment Form	1	EO	xxx	4/1	NAIC	
	15	Long-term Care Experience Reporting Forms	1	EO	xxx	4/1	NAIC	
	16	Management Discussion & Analysis	1	EO	xxx	4/1	Company	
	17	Medicare Supplement Insurance Experience Exhibit	1	EO	xxx	3/1	NAIC	
	18	Medicare Part D Coverage Supplement	1	EO	xxx	3/1, 5/15, 8/15, 11/15	NAIC	
	19	Risk-Based Capital Report	1	EO	xxx	3/1	NAIC	
	20	Schedule SIS	1	N/A	N/A	3/1	NAIC	
	21	Supplemental Compensation Exhibit	1	N/A	N/A	3/1	NAIC	
	22	Supplemental Health Care Exhibit (Parts 1, 2 and 3)	1	EO	xxx	4/1	NAIC	
	23	Supplemental Health Care Exhibit's Allocation Report	1	EO	xxx	4/1	NAIC	
	24	Supplemental Investment Risk Interrogatories	1	EO	xxx	4/1	NAIC	
	25	Supplemental Schedule O	1	EO	xxx	3/1	NAIC	
	26	Supplemental XXX/AXXX Reinsurance Exhibit	1	EO	xxx	4/1	NAIC	
	27	Trusted Surplus Statement	1	EO	xxx	3/1, 5/15, 8/15, 11/15	NAIC	
	28	Variable Annuities Supplement	1	EO	xxx	4/1	NAIC	
	29	VM 20 Reserves Supplement	1	EO	xxx	3/1	NAIC	
	30	Workers' Compensation Carve-Out Supplement	1	EO	xxx	3/1	NAIC	
Actuarial Related Items								
	31	Actuarial Certification regarding use 2001 Preferred Class Table	1	EO	xxx	3/1	Company	
	32	Actuarial Certification Related Annuity Nonforfeiture Ongoing Compliance for Equity Indexed Annuities	1	EO	xxx	3/1	Company	
	33	Actuarial Memorandum Related to Universal Life with Secondary Guarantee Policies required by Actuarial Guideline XXXVIII 8D	1	N/A	xxx	4/30	Company	
	34	Actuarial Opinion	1	EO	xxx	3/1	Company	
	35	Actuarial Opinion on Separate Accounts Funding Guaranteed Minimum Benefit	1	EO	xxx	3/1	Company	
	36	Actuarial Opinion on Synthetic Guaranteed Investment Contracts	1	EO	xxx	3/1	Company	
	37	Actuarial Opinion on X-Factors	1	EO	xxx	3/1	Company	
	38	Actuarial Opinion required by Modified Guaranteed Annuity Model Regulation	1	EO	xxx	3/1	Company	
	39	Request for Life PBR Exemption (formerly Companywide Exemption) 0	1	EO	xxx	Commissioner 7/1 NAIC 8/15	Company	
	40	Executive Summary of the PBR Actuarial Report	1	N/A	xxx	4/1	Company	
	41	Life Summary of the PBR Actuarial Report	1	N/A	xxx	4/1	Company	
	42	Variable Annuities Summary of the PBR Actuarial Report	1	N/A	xxx	4/1	Company	
	43	PBR Actuarial Report (provide upon request)			xxx			

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			Domestic		Foreign			
			State	NAIC	State			
	44	RAAIS required by <i>Valuation Manual</i>	1	N/A	xxx	4/1	Company	
	45	Reasonableness & Consistency of Assumptions Certification required by Actuarial Guideline XXXV	1	EO	xxx	3/1,5/15, 8/15, 11/15	Company	
	46	Reasonableness of Assumptions Certification required by Actuarial Guideline XXXV	1	EO	xxx	3/1,5/15, 8/15, 11/15	Company	
	47	Reasonableness & Consistency of Assumptions Certification required by Actuarial Guideline XXXVI (Updated Average Market Value)	1	EO	xxx	3/1,5/15, 8/15, 11/15	Company	
	48	Reasonableness & Consistency of Assumptions Certification required by Actuarial Guideline XXXVI (Updated Market Value)	1	EO	xxx	3/1,5/15, 8/15, 11/15	Company	
	49	Reasonableness of Assumptions Certification for Implied Guaranteed Rate Method required by Actuarial Guideline XXXVI	1	EO	xxx	3/1,5/15, 8/15, 11/15	Company	
	50	RBC Certification required under C-3 Phase I	1	EO	xxx	3/1	Company	
	51	RBC Certification required under C-3 Phase II	1	EO	xxx	3/1	Company	
	52	Statement on non-guaranteed elements - Exhibit 5 Int. #3	1	EO	xxx	3/1	Company	
	53	Statement on par/non-par policies – Exhibit 5 Int. 1&2	1	EO	xxx	3/1	Company	
		III. ELECTRONIC FILING REQUIREMENTS						
	61	Annual Statement Electronic Filing	1	EO	xxx	3/1	NAIC	
	62	March .PDF Filing	1	EO	xxx	3/1	NAIC	Note O
	63	Risk-Based Capital Electronic Filing	1	EO	N/A	3/1	NAIC	
	64	Risk-Based Capital .PDF Filing	1	EO	N/A	3/1	NAIC	Note O
	65	Separate Accounts Electronic Filing	1	EO	xxx	3/1	NAIC	
	66	Separate Accounts .PDF Filing	1	EO	xxx	3/1	NAIC	Note O
	67	Supplemental Electronic Filing	1	EO	xxx	4/1	NAIC	
	68	Supplemental .PDF Filing	1	EO	xxx	4/1	NAIC	Note O
	69	Quarterly Statement Electronic Filing	1	EO	xxx	5/15, 8/15, 11/15	NAIC	
	70	Quarterly .PDF Filing	1	EO	xxx	5/15, 8/15, 11/15	NAIC	Note O
	71	June .PDF Filing	1	EO	xxx	6/1	NAIC	Note O
		IV. AUDIT/INTERNAL CONTROL RELATED REPORTS						
	81	Accountants Letter of Qualifications	1	EO	N/A	6/1	Company	
	82	Audited Financial Reports	1	EO	xxx	6/1	Company	
	83	Audited Financial Reports Exemption Affidavit	1	N/A	N/A		Company	
	84	Communication of Internal Control Related Matters Noted in Audit	1	EO	N/A	8/1	Company	
	85	Independent CPA (change)	1	N/A	N/A		Company	
	86	Management's Report of Internal Control Over Financial Reporting	1	N/A	N/A	8/1	Company	
	87	Notification of Adverse Financial Condition	1	N/A	N/A		Company	
	88	Relief from the five-year rotation requirement for lead audit partner	1	EO	xxx	3/1	Company	
	89	Relief from the one-year cooling off period for independent CPA	1	EO	xxx	3/1	Company	
	90	Relief from the Requirements for Audit Committees	1	EO	xxx	3/1	Company	
	91	Request for Exemption to File Management's Report of Internal Control Over Financial Reporting	1	N/A	N/A		Company	
		V. STATE REQUIRED FILINGS						
	101	Certificate of Compliance	xxx	0	xxx		State	
	102	Certificate of Deposit	xxx	0	xxx		State	
	103	Certificate of Valuation	xxx	0	xxx		State	
	104	Corporate Governance Annual Disclosure***	1	0	xxx	6/1	Company	
	105	Filings Checklist (with Column 1 completed)	1	0	xxx	3/1	State	
	106	Form B-Holding Company Registration Statement	1	0	xxx	5/1	Company	
	107	Form F-Enterprise Risk Report ****	1	0	xxx	5/1	Company	
	108	ORSA*****	1	0	xxx		Company	
	109	Premium Tax	1	0	1	4/15	State	Note D
	110	State Filing Fees	1	0	1	4/1	State	Note C
	111	Signed Jurat	1	0	xxx	3/1	NAIC	Note G, H & L
	112	Contracted Insurance Producer Report (R.I.G.L. §27-2.4-4)	1	0	1	3/1	Company	
	113	Credit Life/Accident & Health Filing (R.I. Ins. Reg. 9)	0	1	xxx	6/1	Company	
	114	RI Premium Tax Reduction-Job Growth WS	1	0	1	4/1	Company	Note P

(1) Checklist	(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			

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

****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

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

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

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

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

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

The **Combined Annual Statement Electronic Filing** includes the required pages of the combined annual statement and the combined Insurance Expense Exhibit.

The **Combined Annual Statement .PDF Filing** is the .pdf file for the Combined annual statement data and the combined Insurance Expense Exhibit.

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.**

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 before submitting a filing.

		NOTES AND INSTRUCTIONS (A-K APPLY TO ALL FILINGS)	
	A	Required Filings Contact Person:	Deb Almeida Debra.Almeida@dbr.ri.gov (401) 462-9542
	B	Mailing Address:	R.I. Insurance Division 1511 Pontiac Avenue, Bldg. 69-2 Cranston, RI 02920
	C	Mailing Address for Filing Fees:	Do NOT send fees prior to receipt of renewal invoice. Invoices will be sent by E-MAIL from the following address “ SBS@NAIC.ORG ” before March 1st; payment is due April 1st. Payments can be made through OPTINS. Please see Instructions below.
	D	Mailing Address for Premium Tax Payments:	R.I. Division of Taxation, Corporate Taxes Section 1 Capitol Hill Providence, RI 02908 Leo Lebeuf, Chief of Tax Processing E-mail: leo.lebeuf@tax.ri.gov Phone: (401) 574-8983
	E	Delivery Instructions:	Domestic Insurers-Due to the COVID-19 pandemic, all filings required to be submitted to the R.I. Insurance Division, are permitted to be submitted electronically by email to: DBR.CompanyLicensing@dbr.ri.gov. Electronic signatures will also be accepted. Foreign Insurers-Due to the COVID-19 pandemic-jurat pages are NOT required this year
	F	Late Filings:	Insurance companies will be fined \$100 per day for late filing pursuant to R.I.G.L. §27-12-1(c).
	G	Original Signatures:	Domestic insurers Due to the COVID-19 pandemic, electronic signatures will be accepted for all filings.
	H	Signature/Notarization/Certification:	Due to the COVID-19 pandemic, electronic signatures will be accepted for all.
	I	Amended Filings:	Amended items should be filed within 10 days of their amendment, along with an explanation of the amendments. If there are signature requirements for the original filing, same should be followed for any amendment.
	J	Exceptions from normal filings:	<u>Domestic</u> insurers: Extensions, when necessary, may be requested in accordance with R.I.G.L. §27-12-1(c).
	K	Bar Codes (State or NAIC):	Please follow the NAIC's "Annual Statement Instructions."
	L	Signed Jurat:	Due to the COVID-19 pandemic -Foreign insurers are NOT required to file a jurat page.
	M	NONE Filings:	Please follow the NAIC's "Annual Statement Instructions."
	N	State of Rhode Island Information:	<u>Foreign</u> insurers: Pursuant to Rhode Island General Law §27-2-1.1, all insurers' doing business in RI are required to provide a toll-free number or to accept collect calls from RI Residents.
	O	Electronic Filing Requirements:	All annual, quarterly and supplemental filings in .PDF format can be submitted electronically.
	P	RI Premium Tax Reduction-Job Growth Worksheet	RI Job Growth Worksheet filing – link is as follows: RI Premium Tax Reduction-Job Growth – A/S Instructions & FAQ RI Premium Tax Reduction-Job Growth – Worksheet Instructions

ELECTRONIC PAYMENTS INSTRUCTIONS THROUGH OPTINS

To continue with our mission of increasing electronic efficiencies, the RI Insurance Division is pleased to announce that we have partnered with OPTins to allow efficient electronic submissions and payments for the required Annual Statement Filing Fees effective in 2021. As we have done for the last several years, we will email the annual statement filing fee instructions and worksheet via the NAIC's SBS platform to the company's designee.

Chances are, your company is already set up to process filings and make payments in OPTins. If not, please follow the steps below.

As in years past, the Annual Statement Filing Fees are due on April 1st. Now that we have been set up to receive this annual fee and applicable worksheet through OPTins, ***please DO NOT mail in the Annual Statement Filing Fee worksheets or check payments.***

What does this mean for you?

After you receive your emailed annual statement filing fee instructions and worksheet via the NAIC's SBS platform, you will need to complete your worksheet and then log into OPTins.

Step One: Go through the three-step filing wizard.

Step Two: This will allow you to download and save available forms (only applicable for Foreign Companies) or attach your completed worksheet.

Step Three: The amount owed to the state of Rhode Island will have to be entered. Note: the \$10 NAIC Transaction fee will be included with your fee to Rhode Island.

What are the next steps if you don't have an OPTins account?

If you have not created an OPTins account, the steps to implement an account and submit your filing and payment are very simple. Go to https://optins.org/getting_started.htm. There you will find the implementation paperwork and easy-to-follow instructions. You will submit one of the following forms: Implementation Forms- All Other (ACH debit or ACH Credit)

It is important to register early because to set up a new account takes 7-10 business days. Contact the OPTins Marketing Team at optinsmktg@naic.org or call (816) 783-8787 if you have any questions regarding the implementation process.

Any questions or comments for the RI Insurance Division should be directed to Debra.Almeida@dbr.ri.gov.

DEPARTMENT OF BUSINESS REGULATION
INSURANCE DIVISION
1511 Pontiac Ave., Bldg 69-2
Cranston, RI 02920
<http://www.dbr.ri.gov/divisions/insurance/>

~ RHODE ISLAND SPECIAL REPORTING REQUIREMENTS 2021 ~

RESPOND ACCORDINGLY

Fraternal Organizations #2 only
Life Insurers #2, #5, #8, #9, and #10
Property and Casualty Insurers #1, #2, #3 and #5 through #7
Surplus Line Insurers #3 and #7 only
Surplus Line Brokers #1 and #4 only
Self-Insured Entities #3 & #7 only

INSURERS WHO DO NOT HAVE TO RESPOND:

Health Insurers (HMO's or HMDI's)
Risk Retention Groups
Title Companies
Accredited or Approved Reinsurers

INSTRUCTIONS FOR FILING EACH REPORT IS DETAILED BELOW

Zero reports are NOT required to be filed, except for report #2.

- #1 **Lead Liability Coverage Report** **Due February 1**
[230-RICR-20-05-9](#) enumerates the filing requirements. Property and Casualty Insurers shall file reports on an individual company basis utilizing the respective form provided in [Insurance Bulletin 2018-11](#). Surplus Line Brokers shall file on an individual licensee basis utilizing the respective form provided in Exhibit B. Exhibit A and Exhibit B are form-fillable; when done completing, save a copy to your computer and then email the saved copy to dbr.specialreports@dbr.ri.gov. If there is nothing to report, do not submit a report – the absence of a filed report will be deemed to be a “none” report.
- #2 **Contracted Insurance Producer Report** **Due March 1**
[230-RICR-20-50-5](#) requires each insurer doing business in Rhode Island to file this report with the Department and pay the applicable fee. The report and fee must be submitted via [OptIns](#). Filing instructions are found [here](#) on [OptIns' website](#). Please click [here](#) for FAQ's. All individual producers appointed by an insurer must be included on the report. “Appointed” mean an insurance producer acting as an agent of an insurer. **“Insurer” is defined [HERE](#).** Payment of \$30 per producer is required for each producer to which \$100.00 or more was paid in commission for Rhode Island business during the prior calendar year. **To streamline this process, the Department created a spreadsheet template with the requirements for this report. If you need additional rows in the spreadsheet, please feel free to use your own spreadsheet as long as the required information (as found on the template) is captured. Please click [HERE](#) for the template. You must attach a spreadsheet in accordance with the instructions found in the FAQ's.** If you have any questions, please send an email to dbr.acpr@dbr.ri.gov.
- #3 **Professional Liability Annual Report** **Due March 1**
All entities, including self-insured entities, providing professional liability insurance coverage to licensed healthcare professionals or licensed healthcare facilities are required to submit annual reports. [R.I. Gen. Laws § 42-14-2.1\(c\)](#) enumerates the filing requirements. Reports must be submitted electronically to dbr.specialreports@dbr.ri.gov. There is no specific form required for this report. The Department suggests that the report be filed on company letterhead utilizing the guidance enumerated in the statute and/or Regulation. If there is nothing to report, do not submit a report – the absence of a filed report will be deemed to be a “none” report.
- #4 **Surplus Line Broker Annual Report** **Due April 1**
[R.I. Gen. Laws §27-3-38](#) (d) and [230-RICR-20-50-1](#) requires every licensed surplus line broker to report the total number of policies and premium issued in the preceding calendar year utilizing the annual report form provided in [Insurance Bulletin 2018-9](#). The annual report is form-fillable; when done completing, save a copy to your computer and then email the saved copy to dbr.specialreports@dbr.ri.gov. If there is nothing to report, do not submit a report – the absence of a filed report will be deemed to be a “none” report. Do not send Form T-71A to the Department of Business Regulation. This form is required by the RI Division of Taxation and should be sent to that agency for proper reporting/filing.

- #5 Credit Life/Accident & Health Filing** **Due June 1**
[230-RICR-20-60-1](#) Section 1.10 enumerates the filing requirements. **Effective in 2018**, to streamline and eliminate duplicate reporting, insurers subject to filing will only be required to file with the National Association of Insurance Commissioners (NAIC) Support and Services Office a report of consumer credit insurance written on a calendar year basis. The report shall utilize the Credit Insurance Supplement—Annual Statement Blank as approved by the NAIC, and shall contain data separately for each state, rather than an allocation of the company’s countrywide experience. The filing shall be made in accordance with and no later than the due date in the Instructions to the Annual Statement. **Duplicate reporting to the commissioner is no longer required.**
- #6. Auto Body Labor Rate Survey Reports** **Due Sept 1**
[R.I. Gen. Laws § 27-29-4.4](#) and [230-RICR-20-05-10](#), Section 10.7 (formerly Insurance Regulation 108), enumerate the filing requirements. Prior to May 1 the Department will publish a Bulletin on its website providing a list of those insurers and insurance groups determined by the Department to have $\geq 1\%$ market share that are required to conduct a survey and submit the report to the Department by September 1. Insurers and insurance groups determined to have $< 1\%$ market share may voluntarily conduct the survey and file the report by September 1st, or negotiate the payment of auto body labor rates with each licensed Full Collision Repair Auto Body Facility. Please visit the Department’s website yearly to determine if your insurer is required to conduct the survey based upon market share. The Bulletin will also provide information for insurers with $< 1\%$ market share. Insurers may submit reports on a group basis. For those licensees subject to filing with the Department, reports must be submitted electronically to dbr.specialreports@dbr.ri.gov. A hard copy is no longer required.
- #7. Professional Liability Claim Settlement Report** **Due: See below**
 Requires all entities, including self-insured entities, providing professional liability insurance coverage to licensed healthcare professionals or licensed healthcare facilities to report within thirty (30) days after notice of the claim, settlement, judgment or arbitration award. Please see [R.I. Gen. Law § 42-14-2.1\(a\)](#) for detailed reporting requirements. Reports must be submitted electronically to dbr.specialreports@dbr.ri.gov. There is no specific form required for this report. The Department suggests that the report be filed on company letterhead utilizing the guidance enumerated in the statute and/or Regulation. If there is nothing to report, do not submit a report – the absence of a filed report will be deemed to be a “none” report.
- #8. Life Illustrations Certifications** **Due: Annually**
 Life Illustrations Certifications subject to [230-RICR-20-25-14](#) must be filed via SERFF, but companies may submit these certifications for information. The correct TOI to use is “L08 Life - Other”. Please note these should not be filed through the mail. A filing fee of \$25 is required if the retaliatory fee is not greater.
- #9. Long-Term Care Reporting** **Due: June 30**
 Long-Term Care Reporting Requirements subject to [230-RICR-20-35-1.15\(A-F\)](#) must be filed via SERFF, but companies may submit these certifications for information. The correct TOI to use is “LTC06 Long Term Care - Other”. Please note these should not be filed through the mail. A filing fee of \$25 is required if the retaliatory fee is not greater.
- #10. Retained Asset Account Reporting** **Due: May 1**
 Retained Asset Account reports subject to the [R.I.G.L. § 27-4.9-6](#) must be filed via SERFF, but companies may submit these certifications for information. The correct TOI to use is “L08 Life - Other”. Please note these reports should not be filed through the mail; any reports submitted to the Department through the mail will be rejected. A filing fee of \$25 is required if the retaliatory fee is not greater.

Repealed reports:

The following reports are no longer required to be filed due to changes in RI statute and/or regulation:

- Assigned Risk Plan Report (R.I. Gen. Laws § 31-33-8)
- Automobile Insurance Annual Report (R.I. Gen. Laws § 27-9-55 and Insurance Regulation 74)
- Liquor Liability Report (R.I. Gen. Laws § 3-14-14)
- Workers’ Compensation Annual Report (R.I. Gen. Laws § 27-7.1-7.2 and Insurance Regulation 54)
- Workers’ Compensation & Employers Liability Excess Profit Report (R.I. General Laws §27-9-51)

To stay current on department updates, any person wishing to be included on the interested parties list should send an email request to DBR.InsNotice@dbr.ri.gov.

PLEASE FORWARD TO APPROPRIATE AREAS WITHIN YOUR COMPANY