



## Office of Insurance Regulation

### MEMORANDUM

**DATE:** December 31, 2016

**TO:** **Prepaid Limited Health Service Organizations** - Financial Statement Contact Person

**FROM:** Carolyn Morgan, Director  
Life & Health Financial Oversight

**SUBJECT: 2017 FILING REQUIREMENTS**

This package is designed to assist Prepaid Limited Health Service Organizations in preparing their filings with the Florida Office of Insurance Regulation (Office). This information provides the filing requirements for companies holding a Certificate of Authority. Please be advised that this checklist is provided as a reference document only and is not intended to alter, amend, or replace statutory requirements.

This package has been designed to conform to the format adopted by the NAIC Standard Reporting Formats Working Group. The working group's objective is to move towards uniformity in the states' filing requirements checklists.

Filings shall be made utilizing the 2016 Annual Statement Instructions and Blanks and the 2017 Quarterly Statement Instructions and Blanks adopted by the National Association of Insurance Commissioners (NAIC).

All filings should be made electronically through the Regulatory Electronic Filing System (REFS) via the Industry Portal located at <https://iportal.fldfs.com/ifile/default.asp>. This checklist has been revised to reflect the electronic requirements.

Notable highlights from this year's package include:

- See the Notes and Instructions section for the proper filing of the checks for payment of filing fees.
- Changes in Actuary now requires a letter from the actuary addressed to the Prepaid Limited Health Service Organization stating whether the actuary agrees with the statements contained in the Prepaid Limited Health Service Organization's letter, and if not, stating the reasons for which he or she does not agree. The Prepaid Limited Health Service Organization shall provide both of these letters to the Office.
- In addition to the Jurat Page and Actuarial Opinion, Domestic Prepaid Limited Health Service Organizations licensed in multiple states are required to submit a Risk Based Capital Report.

## INSTRUCTIONS FOR FILING REQUIREMENTS: QUESTIONS & ANSWERS

1. **The checklist indicates that the deadlines for filing statements are within 90 days of the fiscal year ending date, and within 45 days of the quarter-ending date. Do they have to be received by the Office on that due date or postmarked by these dates?**
  - > The REFS filings must be received by the Office no later than 5:00 PM on the applicable due date.
2. **If a filing requirement deadline falls on a weekend or holiday when is the filing due?**
  - > The deadline would be moved to the first business day following the original deadline.
3. **Will companies submitting late statements be fined?**
  - > **Yes.** Furthermore, failure to timely file statements is grounds for suspension of the company's Certificate of Authority.
4. **May I attach my check for the premium tax payments to my filing?**
  - > Remit premium tax payments directly to the **Florida Department of Revenue** in accordance with instructions provided in this guide. Since the filing is now electronic, do not provide any premium tax information or documentation with the filing.
5. **May I attach my check for the Annual Statement filing fee to my filing?**
  - > Remit Annual Statement filing fees directly to the **Florida Department of Financial Services** in accordance with instructions provided in this guide. Since the filings submitted to the Office will now be done electronically through REFS, a copy of the check and invoice can be scanned and attached through REFS.
6. **Are all PLHSOs required to file certain documents electronically through REFS?**
  - > Yes, this requirement began with June 2006 quarterly financial statements. When using REFS please go to [www.floir.com](http://www.floir.com) and click on the "Company filing" tab at the top and then the Industry Portal link. Then select Regulatory Electronic Filing System (REFS). The User Guide is available at <http://www.floir.com/siteDocuments/REFSUsersGuide2-0.pdf>. You will find the applicable adobe life cycle forms here. In addition, please attach a pdf file of the entire NAIC Quarterly or Annual Financial Statement.
7. **Do I need to attach a bar code to every filing submitted to the Office?**
  - > **N/A due to REFS.**
8. **If the PLHSO does not have anything to report on a schedule or exhibit of the financial report, should the page be included in the report?**
  - > Yes, the page should be filed with "NONE" written on it.
9. **I have read the entire package but I still have questions regarding financial filings and/or solvency requirements (vs. rate/form or other). How can I reach the financial analyst in charge of my company?**
  - > To reach Life & Health Financial Oversight directly, dial (850) 413-3153. Support Staff will guide you to the individual analyst assigned to your company. The analyst can then give you his/her direct dial number for future reference.

**GENERAL INSTRUCTIONS  
FOR COMPANIES TO USE CHECKLIST  
Section 636.043, Florida Statutes and Rule 69O-203.070, Florida Administrative Code**

1. Each prepaid limited health service organization (PLHSO) must file with the Office annually, within 3 months after the end of its fiscal year, a report verified by the oath of at least two officers covering the preceding fiscal year.
2. Each PLHSO must file with the Office, within 45 days from the quarter end for all four quarters, quarterly financial statements verified by the oath of at least two officers.
3. Such reports must be on forms prescribed by the Office (Newly created forms in REFS, and a pdf file of entire financial statement, and State forms OIR-A2-949 and OIR-A2-950).

**PREPAID LIMITED HEALTHSERVICE ORGANIZATIONS**

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

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

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

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

REQUIRED FILINGS IN THE STATE OF: Florida

Filings Made During the Year 2017

(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 State	NAIC	Foreign State			
<b>I. NAIC FINANCIAL STATEMENTS</b>								
	1	Annual Statement (8 1/2" x 14")		EO		90 days from fiscal year end	REFS & NAIC	E, F, G, H, I, L
	1.1	Printed Investment Schedule detail (Pages E01-E-27)		EO		90 days from fiscal year end	NAIC	
	2	Quarterly Financial Statement (8 1/2" x 14")		EO		45 days from quarter end	REFS & NAIC	E, F, G, H, I, L
<b>II. NAIC SUPPLEMENTS</b>								
	10	Accident & Health Policy Experience Exhibit	REFS	EO	REFS	90 days from fiscal year end	NAIC	
	11	Actuarial Opinion	REFS	EO	REFS	90 days from fiscal year end	Company	N
	12	Investment Risk Interrogatories	REFS	EO	REFS	90 days from fiscal year end	NAIC	
	13, 14, 15, 16	Life Supplemental	0	0	0			
	17	Long Term Care Experience Reporting Forms	0	EO	0	90 days from fiscal year end	NAIC	
	18	Management Discussion & Analysis	REFS	EO	REFS	90 days from fiscal year end	Company	
	19	Medicare Supplement Insurance Experience Exhibit	0	EO	0	90 days from fiscal year end	NAIC	
	20	Medicare Part D Coverage Supplement	0	EO	0	90 days from fiscal year end; 45 days from quarter end	NAIC	
	21, 22	Property/Casualty Supplement	0	0	0			
	23	Risk-Based Capital Report	REFS	EO	0	3/1	NAIC	W
	24	Schedule SIS	REFS	N/A	REFS	90 days from fiscal year end	NAIC	
	25	Supplemental Compensation Exhibit	REFS	N/A	REFS	90 days from fiscal year end	NAIC	
<b>IV. AUDIT/INTERNAL CONTROL RELATED REPORTS</b>								
	71	Accountants Letter of Qualifications	REFS	EO	REFS	90 days from fiscal year end	Company	P
	72	Audited Financial Statements	REFS	EO	REFS	90 days from fiscal year end	Company	O
	73	Audited Financial Statements Exemption Affidavit	REFS	N/A	REFS			
	74	Communication of Internal Control Related Matters Noted in Audit	REFS	N/A	REFS	90 days from fiscal year end		X
	75	Independent CPA Awareness Letter	REFS	N/A	REFS	12/31	Company	S
	76	Notification of Adverse Financial Condition	REFS	N/A	REFS	5 days	Company	Q
	77	Request for Exemption to File	REFS	N/A	REFS	N/A	Company	
<b>V. STATE REQUIRED FILINGS***</b>								
	101	Filings Checklist (with Column 1 completed)	1	N/A	1	90 days from fiscal year end; 45 days from quarter end	State	L
	102	State Filing Fees	1	N/A	1	90 days from fiscal year end	Company	C
	103	Disclosure of Material Transactions	REFS	N/A	REFS	As Required	Company	R
	104	Number of Contracts Issued and Outstanding	N/A	N/A	xxx	90 days from fiscal year end	State OIR-A2-949	T
	105	Number and amount of Damage Claims for Medical Injury	1	N/A	1	90 days from fiscal year end	State OIR-A2-950	U
	106	Evidence of Adequate Insurance	1	N/A	1	90 days from fiscal year end	Company	V
	107	Premium Tax Payments	0	N/A	0	3/1, 4/15, 6/15, 10/15	State/DOR	D
	108	Certificate of Authority Annual License Tax	1	0	1	5/30	State	Y

\*Column 4 State=EO (electronic only filing) and the Office does not need a hard copy. The Adobe Life Cycle forms in REFS need to be completed as well as attaching a pdf file of the complete quarterly or annual financial statements as required by the NAIC instructions for the Annual or Quarterly Health Blanks.

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

<b>NOTES AND INSTRUCTIONS (A-N APPLY TO ALL FILINGS)</b>							
A	<p><b>Required Filings Contact Person:</b>  LaTasha Davis or David Roberts  Financial Examiner/Analyst Supervisor  Life &amp; Health Financial Oversight, Health Section  Florida Office of Insurance Regulation  (850) 413-5226 or (850) 413-3800</p>						
B	<p><b>Mailing Address:</b></p> <table border="0"> <thead> <tr> <th><u>By Mail</u></th> <th><u>Via Hand Delivery</u></th> <th><u>Overnight Mail</u></th> </tr> </thead> <tbody> <tr> <td>Office of Insurance Regulation Attn: Life and Health Financial Oversight 200 East Gaines Street Tallahassee, Florida 32399-0327</td> <td>Office of Insurance Regulation Larson Building Attn: Life and Health Financial Oversight 200 East Gaines Street Third Floor, Room 319 (850) 413-3153</td> <td>Office of Insurance Regulation Attn: Life and Health Financial Oversight 200 East Gaines Street Tallahassee, FL 32399-0327</td> </tr> </tbody> </table> <p>OIR web site: <a href="http://www.floir.com">www.floir.com</a>                      Direct REFS Link - <a href="https://apps8.fldfs.com/refs/Account/Login">https://apps8.fldfs.com/refs/Account/Login</a></p>	<u>By Mail</u>	<u>Via Hand Delivery</u>	<u>Overnight Mail</u>	Office of Insurance Regulation Attn: Life and Health Financial Oversight 200 East Gaines Street Tallahassee, Florida 32399-0327	Office of Insurance Regulation Larson Building Attn: Life and Health Financial Oversight 200 East Gaines Street Third Floor, Room 319 (850) 413-3153	Office of Insurance Regulation Attn: Life and Health Financial Oversight 200 East Gaines Street Tallahassee, FL 32399-0327
<u>By Mail</u>	<u>Via Hand Delivery</u>	<u>Overnight Mail</u>					
Office of Insurance Regulation Attn: Life and Health Financial Oversight 200 East Gaines Street Tallahassee, Florida 32399-0327	Office of Insurance Regulation Larson Building Attn: Life and Health Financial Oversight 200 East Gaines Street Third Floor, Room 319 (850) 413-3153	Office of Insurance Regulation Attn: Life and Health Financial Oversight 200 East Gaines Street Tallahassee, FL 32399-0327					
C	<p><b>Filing Fees, Florida Statutes 636.057(2):</b>  The \$200.00 Annual Statement Filing Fees should be attached to a letter identifying the regulated entity, and the amount and purpose of the check (filing fee pursuant to Section 636.057, F.S.), with the Type and Class of 1204 F and should be submitted to the Florida Department of Financial Services, Revenue Processing Section, P.O. Box 6100, Tallahassee, Florida 32314-6100. Please attach a copy of this letter to the annual statement as an attachment in REFS.</p>						
D	<p><b>Premium Tax Payments:</b>  <b>Certificate of Authority</b> companies should reference Section 624.509, Florida Statutes. Do <b>NOT</b> mail checks for premium taxes to the Office. Payments should be remitted directly to the <b>DOR</b> on Forms DR-907 (quarterly) and DR-908 (annual) in accordance with instructions provided for those forms.</p> <p>To obtain copies of the forms or for assistance in completing the forms, <b>PLHSOs should contact the DOR directly at:</b></p> <p>In Florida (800) 352-3671                      Outside of Florida (850) 488-6800  <a href="http://floridarevenue.com/Pages/forms_index.aspx">http://floridarevenue.com/Pages/forms_index.aspx</a></p> <p>Mailing address: <b>Florida Department of Revenue, 5050 West Tennessee Street, Tallahassee, FL 32399-0100</b></p> <p><b>Any delays in receipt by the Department of Revenue may result in penalties and interest being assessed by the Department of Revenue.</b></p>						
E	<p><b>Delivery Instructions, Rule 690-191.075, Florida Administrative Code:</b>  Annual and Quarterly Financial Statement filings (with all printed schedules and exhibits), must be electronically submitted through REFS no later than 5 p.m. on the indicated due date. If the due date falls on a weekend or holiday, the deadline would be moved to the first business day following the original due date.</p>						
F	<p><b>Late Filings, Florida Statutes 636.043(3):</b>  Companies will be fined for late filings, up to \$500 per day for the first 10 days and \$1,000 for each day after the first ten days late. The company's license may be suspended if filings are not received timely.</p>						
G	<p><b>Original Signatures:</b>  Original signatures are required on annual and quarterly statements filed by all PLHSOs. After the jurat page is signed by the officers and notarized, the signed jurat page should be scanned and uploaded as a document in REFS</p>						
H	<p><b>Signature/Notarization/Certification:</b>  Annual and Quarterly financial statement filings must have at least two original signatures of executive officers whose names appear on the jurat page with a notary seal.</p>						
I	<p><b>Amended Filings:</b>  See NAIC Annual Statement Instructions for guidance on amended filings.</p>						
J	<p><b>Exceptions from Normal Filings:</b>  Any request for an extension of filing the annual report shall be in writing and the reason(s) for the extension explained in detail. All requests must be filed with the Office fifteen (15) days prior to the deadline date for filing the annual report.</p>						

	Any extension request received less than fifteen (15) days prior to due date will be denied except for unavoidable circumstances. Unavoidable circumstances include, but are not limited to, death of key personnel or destruction of records by fire, hurricane, or other natural disasters.
K	<b>Bar Codes (State)</b> The Annual and Quarterly statements, supplemental filings, audited financial report, and all other filings made with the Office are not required to have a bar code affixed to the face of the filing.
L	<b>Filings Checklist Instructions:</b> Attach a Required Filings Checklist to each filing submitted to the Office. Fill in the company name, federal employer identification number, and NAIC company code (if applicable). In column (1) check off the items being submitted and attach the checklist as the cover page.
M	<b>NONE Filings:</b> In the annual statement, a) a disclosure or response must be provided for every item (indicate “none” or “not applicable” if appropriate), and b) the company must not alter the number scheme of the notes.
N	<b>Statement of Actuarial Opinion, Florida Statutes 636.043(2)(e):</b> Each PLHSO licensed to do business in this state shall annually, with its annual statement, submit an actuarial report certified by a qualified independent actuary or qualified employee, that: 1. The prepaid limited health service organization is actuarially sound, which certification shall consider the rates, benefits, and expenses of, and any other funds available for, the payment of obligations of the organization. 2. The rates being charged or to be charged are actuarially adequate to the end of the period for which rates have been guaranteed. 3. Incurred but not reported claims and claims reported but not fully paid have been adequately provided for.
O	<b>Audited Financial Statement, Florida Statutes 636.043, and Rule 690-203.070:</b> The Audited Financial Report must be filed with this Office within three (3) months after the end of each fiscal year. The Annual Audited Financial Report shall report the financial position of the PLHSO as of the end of the most recent fiscal year and the results of its operations, cash flows, and changes in capital and net worth for the year then ended in conformity with statutory accounting practices prescribed, or otherwise permitted by the Office. The Annual Audited Financial Report shall include the following: 1. Report of independent Certified Public Accountant. 2. Balance sheet reporting admitted assets, liabilities, capital and net worth. 3. Statement of operations. 4. Statement of cash flows. 5. Statement of changes in capital and net worth. 6. Notes to financial statements. These notes shall be those required by the appropriate NAIC Annual Statement instructions and any other notes required by generally accepted accounting principles and shall also include: a. A reconciliation of differences, if any, between the Audited Financial Report and the Annual Statement with a written description of the nature of these differences. b. A summary of ownership and relationships of the PLHSO and all affiliated companies. 7. The financial statements included in the Audited Financial Report shall be prepared in a form and using language and groupings substantially the same as the relevant sections of the Annual Statement of the PLHSO filed with the Office. The financial statements shall be comparative, presenting the amount as of the current year and the amounts as of the immediately preceding fiscal year end.
P	<b>Accountant’s Letter of Qualifications:</b> The accountant shall furnish a Letter of Qualifications to the PLHSO for filing with the Annual Audited Financial Report. The letter shall state: 1. That the accountant is independent with respect to the PLHSO and conforms to the standards of his/her profession. 2. The background and experience in general, and the experience in audits of PLHSOs of the staff assigned to the engagement and whether each is an independent Certified Public Accountant. 3. That the accountant understands the annual Audited Financial Report, and his/her opinion thereon will be filed in compliance with the Florida Statutes, and that the Office will be relying on this information in the monitoring and regulation of the financial position of PLHSOs. 4. That the accountant consents to the requirements of Florida Statutes 636.043(6)(c) and that the accountant consents and agrees to make the work papers available for review by the Office. 5. A representation that the accountant is properly licensed by an appropriate state licensing authority.

Q	<p><b>Notification of Adverse Financial Condition, Florida Statutes 636.043(6),(b):</b> All PLHSOs required to furnish the annual Audited Financial Report shall require the independent Certified Public Accountant to report in writing, to the board of directors or its audit committee any determination by the accountant that the PLHSO has materially misstated its financial condition as reported to the Office as of the balance sheet date currently under examination, or that the PLHSO does not meet the minimum capital and surplus requirement of the Florida Insurance Code. A PLHSO who has received such a report shall forward a copy to the Office within five business days.</p>
R	<p><b>Disclosure of Material Transactions, Section 636.043 (2)(b) and Rule 69O-203.070(5):</b> All PLHSOs are required to submit with each annual report adequate disclosure of material transactions. See Rule 69O-203.070(5) for specific disclosure requirements.</p>
S	<p><b>Independent CPA/Awareness Letter:</b> Designation of independent C.P.A. must be filed by the company's fiscal year end date.</p>
T	<p><b>The Number of PLHSO Contracts Issued and Outstanding and the Number of PLHSO Contracts Terminated:</b> As required by Section 636.043(2)(c), Florida Statutes, the annual report shall include the number of PLHSOs contracts, issued and outstanding, and the number of prepaid limited health services contracts terminated. Form OIR-A2-949 should be completed. This form can be submitted as an attachment in REFS.</p>
U	<p><b>The Number and Amount of Damage Claims for Medical Injury:</b> As required by Section 636.043(2)(d), Florida Statute, the annual report shall include the number and amount of damage claims for medical injury initiated against the PLHSO, and if known, any of the providers engaged by it during the reporting year, broken down into claims with and without formal legal process, and the disposition, if any, of each such claim. Form OIR-A2-950 should be completed. This form can be submitted as an attachment in REFS.</p>
V	<p><b>Evidence of Adequate Insurance:</b> Please provide documentation showing compliance with Rule 69O-203.060 regarding general liability and medical malpractice insurance. Also provide evidence of a current fidelity bond or the extra cash deposit in compliance with Section 636.047, F.S.</p>
W	<p><b>Risk Based Capital:</b> Prepaid Limited Health Service Organizations that are domiciled in Florida and licensed in multiple states are required to file the Risk Based Capital Report through REFS.</p>
X	<p><b>Communication of Internal Control Related Matters Noted in Audit (has replaced Report of Significant Deficiencies in Internal Control):</b></p> <p>1. In addition to the annual Audited Financial Report, each PLHSO shall furnish the Office with a written communication as to any material weaknesses in its Internal control over financial reporting noted during the audit. Such communication shall be prepared by the accountant within sixty (60) days after the filing of the annual Audited Financial Report, and shall contain a description of any material weakness (as the term material weakness is defined by AU Section 325 of the Professional Standards of the AICPA, Communicating Internal Control Related Matters Identified in an Audit) as of December 31 immediately preceding (so as to coincide with the Audited Financial Report discussed in subsection (4)) in the PLHSO's Internal control over financial reporting noted by the accountant during the course of their audit of the financial statements. If no material weaknesses were noted, the communication should so state.</p> <p>2. The PLHSO is required to provide a description of remedial actions taken or proposed to correct material weaknesses if the actions are not described in the accountant's communication.</p>
Y	<p><b>Certificate of Authority Annual License Tax, Section 636.057, Florida Statutes:</b></p> <p>The Certificate of Authority annual license tax (also referred to as a Certificate of Authority renewal fee) must be sent to the following address:</p> <p style="text-align: center;"><b>FLORIDA DEPARTMENT OF FINANCIAL SERVICES</b> RECEIPTS ACCOUNTING SECTION P. O. BOX 6100 TALLAHASSEE, FL 32314-6100</p> <p>Each PLHSO is responsible for renewal of its Certificate of Authority. If the PLHSO does not receive an invoice by May 1, call (850) 413-5066 to request an invoice.</p> <p><b>Failure to pay the renewal fee timely may result the assessment of a fine or suspension of the PLHSO's Certificate of Authority.</b></p>