

COMPANY CHECKLIST FOR HEALTH POLICY FORM FILINGS - REQUIRED DOCUMENTS REQUIRED ITEMS FOR A COMPLETE FORM FILING

COMP	PANY NAME:	SERFF TRACKING NUMBER(S):
PRODU	UCT NAME:	NAIC NUMBER:
PLAN I	NAME:	

* * FORM FILINGS MAY BE SUBMITTED STARTING 5/1/13 AND ARE DUE NO LATER THAN 6/30/13 * *

REQUIRED	STATUTE/REGULATION	FILING LOCATION IN SERFF	YES	NA
REQUIRED FORMS (including actual documents) - FORM SCHEDULE TAB				
Evidence of Coverage	C.R.S. 10-16-107.2	Form Schedule Tab		
Uniform Application	C.R.S. 10-16-107.5*	Form Schedule Tab		
Policy forms (including Schedule of Benefits), riders, and endorsements	C.R.S. 10-16-107.2	Form Schedule Tab		
REQUIRED DOCUMENTS - SUPPORTING DOCUMENTATION TAB				
Letter of Authority*	C.R.S. 10-16-107.2	Supporting Docs Tab (outside Binder)		
Certification of Compliance	C.R.S. 10-16-107.2(1) &2)	Supporting Docs Tab (outside Binder)		
PPACA Uniform Compliance Summary	Colorado Bulletin B-4.35	Supporting Docs Tab (outside Binder)		
REQUIRED DOCUMENTS - TEMPLATES TAB IN BINDER				
CCIIO Templates	Colorado Regulation forthcoming	Templates Tab		
Administrative Date Template				
REQUIRED DOCUMENTS - ASSOCIATED SCHEDULE ITEMS TAB IN BINDER				
Summary of Benefits and Coverage (English and Spanish)	Colorado Regulation forthcoming	Supporting Docs Tab in Binder		
Colorado Health Benefit Exchange (COHBE) Forms	Colorado Regulation forthcoming	Supporting Docs Tab in Binder		
 Company Overview Page - **SUBMIT DIRECTLY TO COHBE BY MAY 31, 2013** Quality Data Template - **SUBMIT DIRECTLY TO COHBE BY MAY 31, 2013** 				