

2024

Life, Accident & Health Insurers  
Fraternal Benefit Societies  
United States Branches of Non-US Insurers



# Forms & Instructions

for required filings  
in Michigan



Department of Insurance and Financial Services

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STATE OF MICHIGAN  
DEPARTMENT OF INSURANCE AND FINANCIAL SERVICES

Before the Director of Insurance and Financial Services

In the matter of financial statements,  
accounting practices and procedures  
and valuation of securities as of  
December 31, 2024  
\_\_\_\_\_ /

Order No. 2025-02-M

Issued and entered  
this 29<sup>th</sup> day of January, 2025  
by Anita G. Fox  
Director

## ORDER PRESCRIBING FORMS, CONTENTS, AND INSTRUCTIONS

### I BACKGROUND

Pursuant to Section 438 of the Michigan Insurance Code of 1956, as amended (the Code), MCL 500.438, and the Administrative Procedures Act of 1969, as amended, MCL 24.201 *et. seq.*, the Director prescribes the format and content of statements that are suitable and adaptable to each kind of insurer authorized or eligible to transact business in Michigan. A statement filed by the insurer shall be prepared in accordance with instruction provided by, and accounting practices and procedures designated by, the Director.

The National Association of Insurance Commissioners (NAIC) has established instructions and accounting guidance for the completion of the 2024 annual and the 2025 quarterly statements and forms. These instructions pertain to Life, Accident and Health companies, Fraternal Benefit Societies and United States Branches of Non-U.S. Insurers. The accounting guidance is located in the NAIC Accounting Practices and Procedures manual. The manual is continually updated and requires insurers to fully disclose and quantify any deviations from the practices and procedures adopted in the manual. By completing the financial statements and forms in accordance with the instructions and accounting guidance, these entities will submit useful and necessary regulatory information to the Director. These entities shall follow the 2024 NAIC Annual Statement Instructions and NAIC Accounting Practices and Procedures manual to the extent that the accounting practices, procedures, and reporting standards are not modified by the Michigan Insurance Code, or the 2024 *Forms and Instructions for Required Filings in Michigan*.

### II FINDINGS OF FACT AND CONCLUSIONS OF LAW

Based on the foregoing considerations, the Director FINDS and CONCLUDES that:

1. The 2024 NAIC annual statement blank, the 2025 quarterly statement blanks, the 2024 NAIC Annual Statement Instructions, the 2025 NAIC Quarterly Statement Instructions, the NAIC Accounting Practices and Procedures Manual, including appendices A – G and excluding Actuarial Guideline XXXV in Appendix C (this exclusion applies to business not subject to principles based reserving), the ORSA Guidance Manual, and the 2024 *Forms and Instructions for Required Filings in Michigan* establish appropriate forms with instructions for filing statements of financial condition for all insurers that are authorized or eligible to transact business in Michigan.

2. The Michigan Department of Insurance and Financial Services (DIFS) waives the filing of printed quarterly statements, annual statements and supplements for foreign insurers in Michigan. DIFS will rely on filings made with the NAIC as meeting the statutory requirement to file financial statements in Michigan. Michigan domestic companies must ensure that all filings with the NAIC are proper and timely. Failure to properly submit filings with the NAIC will subject companies to penalties as outlined below.
3. The Purposes and Procedures Manual of the NAIC Investment Analysis Office establishes appropriate instructions for filing, reporting and valuing securities reported in financial statements for all insurers that are authorized or eligible to transact business in Michigan, unless otherwise indicated in this order or by statute. The NAIC Financial Condition (E) Committee establishes instruction for valuing other invested assets.
4. Submission of this information in no way limits the Director from requesting further information regarding the financial condition of a regulated entity. The Director may address inquiries to any regulated entity concerning the conduct of its business or its financial condition; any regulated entity so addressed shall promptly reply in writing to the Director's inquiries.
5. Failure to comply with all filing instructions and requirements will result in rejection of the materials submitted as not constituting an annual statement filing for the purposes of the Code and will subject the filing entity to a civil penalty of not less than \$1,000 or more than \$5,000 and an additional \$50 for each day that such insurer fails to file its information in accordance with Section 438(5) of the Code, MCL 500.438(5). Fraternal Benefit Societies that neglect to comply with all filing instructions and requirements shall be fined \$100 per day and, upon notice by the Director, its authority to do business in this state shall cease while the default continues in accordance with Section 8187(4) of the Code, MCL 500.8187(4)

### III ORDER

Therefore, it is ORDERED that:

1. The 2024 NAIC annual statement blank, the 2025 quarterly statement blanks, the 2024 NAIC Annual Statement Instructions, the 2025 NAIC Quarterly Statement Instructions, the NAIC Accounting Practices and Procedures Manual, including appendices A – G and excluding Actuarial Guideline XXXV in Appendix C (this exclusion applies to business not subject to principles based reserving), the ORSA Guidance Manual, and the 2024 *Forms and Instructions for Required Filings in Michigan* are hereby adopted. All insurers shall file the NAIC annual and quarterly statements and shall follow the 2024 NAIC Annual Statement Instructions and the accounting practices, procedures, and reporting standards promulgated by the NAIC, to the extent that the accounting practices, procedures, and reporting standards are not modified by the Michigan Insurance Code, or the 2024 *Forms and Instructions for Required Filings in Michigan*. This shall include, but not be limited to, the Risk-Based Capital (RBC) calculations and reporting requirements as detailed in the RBC instructions adopted by the NAIC and, as applicable, the Group Capital Calculation (GCC) in accordance with the GCC instructions adopted by the NAIC. If a company has been granted a permitted practice or where the 2024 *Forms and Instructions for Required Filings in Michigan* (prescribed practice) deviates from the NAIC Accounting Practices and Procedures Manual, companies are required to make the appropriate disclosure in the Notes to the Financial Statements in accordance with the guidance found in the NAIC Accounting Practices and Procedures Manual. Any and all supplemental schedules, exhibits and/or miscellaneous forms which request specific information not included in the "Association Edition" are part of the annual statement filing within the meaning of Sections 438 and 8187 of the Code.
2. A copy of the 2024 *Forms and Instructions for Required Filings in Michigan* shall be posted on the web site of the Department of Insurance and Financial Services and sent to any insurer authorized or eligible to transact business in Michigan that specifically requests a hard copy.

3. For purposes of valuation of securities and other investments pursuant to Sections 841 and 842 of the Code, MCL 500.841 and 500.842, securities owned by insurers shall be valued in accordance with those standards published in the Purposes and Procedures Manual of the NAIC Investment Analysis Office (Valuation Manual) with the following exception:

**Filing Waiver:** Insurers may seek a filing waiver from submitting some securities to the NAIC Securities Valuation Office (SVO). The Valuation Manual does not require securities that are rated and monitored by NAIC Credit Rating Provider (CRP) to be submitted or valued by the SVO. Insurers are allowed to use the ratings of the NAIC CRP as permitted by the Valuation Manual. However, there may be other securities that do not meet the Valuation Manual criteria for filing exemption that the Director may deem appropriate not to file with the SVO. Insurers may request from the Director an exemption from the requirement to submit these securities to the SVO for valuation and rating. Exemptions will be good for the calendar year in which the exemption is granted. The request for exemption should state the insurers' rationale for not submitting the securities to the SVO, how the insurer will value, monitor and rate the security for financial reporting, and why the security does not meet the Valuation Manual criteria for filing exemption. The request must also include the date the security was purchased and the rating from the NAIC CRP. Factors that will be considered for granting the exemption will include whether the security is rated by a NAIC CRP, whether the insurer's methods of valuation is reasonable and appropriate, and the nature of the security. Insurers must submit the request for exemption within 120 days of the purchase of the security or within 120 days of the filing of the first financial statement where the insurer will report the filing waiver. The determination to grant a filing waiver on a specific security is at the sole discretion of the Director. Requests for exemption from this office should NOT include securities considered filing exempt from valuation pursuant to the Valuation Manual.

Other invested assets should be valued in accordance with the procedures promulgated by the NAIC Financial Condition (E) Committee.

The Director specifically retains jurisdiction of the matters contained herein and the authority to issue such further order or orders as the Director shall deem just, necessary, and appropriate.

This Order supersedes Order **2024-03-M**.



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Anita G. Fox  
Director

## SIGNIFICANT CHANGES AND REMINDERS FOR THE 2024 FORMS & INSTRUCTIONS

Please review the following for a summary of some of the significant changes and reminders for the 2024 *Forms and Instructions for Required Filings in Michigan*. Items that are new this year have been bolded.

1. All insurers should file, in a timely manner, any amendments to the financial statements with the NAIC. Companies will be subject to fines if amendments are not properly filed electronically with the NAIC. **Domestic insurers are also reminded that the hard copy Signed Jurat Page must be filed for all amendments filed with DIFS and must contain original wet signatures or they will not be accepted. The amended pages must be filed electronically.** Note that companies are not required to file hard copy filings with the NAIC, only electronic filings.
2. In addition to a letter of notification as required by Section 250 of the Michigan Insurance Code, all domestic insurers must file officer and director biographical information for all new officers and directors reported on the jurat page. DIFS has adopted the NAIC Biographical Affidavit, which can be found on the NAIC's website at [http://www.naic.org/industry\\_ucaa.htm](http://www.naic.org/industry_ucaa.htm), for the reporting of officer and director biographical information. Please be sure to check the NAIC website prior to filing to ensure that the most current biographical affidavit form is being used. **The biographical affidavit filed with DIFS must be filed electronically and be properly executed.** Additionally, an independent third party background verification report prepared by an NAIC approved vendor is also required for all new officers and directors. A list of approved vendors can be found on the above noted NAIC website.
3. In order to ensure that DIFS has the most current address on file, companies should notify DIFS when the home office and/or mailing address changes.
4. The FIS 0322, Michigan Health Insurance Enrollment, Premiums and Losses, must be submitted electronically to DIFS. The due date for submission remains April 1. The submission website address, along with an authentication code and more detailed instructions, will be sent to the Statutory Statement Contact on or before March 1 and the window for submission will be March 1-April 1. The traditional form will no longer be included in Appendix II of this booklet. Click on this link [[Printable Worksheet](#)] to obtain the traditional form to facilitate issuers' data entry into the electronic FIS 0322. Paper FIS 0322 forms will no longer be accepted. Accordingly, use this link to file your FIS 0322 data [[DIFS Online Services](#)]. There are changes to the form for reporting year 2024. For questions related to FIS 0322 please call 517-284-8693 or send email to [DIFS-FIS0322-annualsubmission@michigan.gov](mailto:DIFS-FIS0322-annualsubmission@michigan.gov).
5. Reinsurers may apply for certified status. This allows a domestic ceding company to reduce collateral requirements and still take full credit for reinsurance recoverables from a certified reinsurer for those contracts entered into or renewed after the reinsurer has obtained certified status. For additional information please visit DIFS website at [Certified Reinsurers \(michigan.gov\)](#) Reinsurers may apply for reciprocal jurisdiction reinsurer status. This allows a domestic ceding company to take full credit for reinsurance recoverables for those contracts entered into or renewed after the reinsurer has obtained reciprocal jurisdiction reinsurer status. For additional information, please see DIFS website at [Reciprocal Jurisdiction Reinsurers \(michigan.gov\)](#).
6. MCL 500.1757(1) requires insurers to annually (no later than June 1) file a corporate governance annual disclosure (CGAD) with the Michigan Department of Insurance and Financial Services. Appendix III of this Booklet provides filing procedures and guidance on the required content of the CGAD.
7. Pledged Assets- Statutory accounting principles require that any assets pledged as collateral by another entity in the holding company system be reported as non-admitted assets. Such assets

should not be reported as qualifying assets under Section 901 of the Michigan Insurance Code.

8. Any foreign insurers that plan to cease writing business or a product in Michigan should notify DIFS by making a filing within SERFF. Domestic insurers may send any notification to their assigned financial analyst.
9. Michigan Insurance Data Security Law: Public Act 690 of 2018 added Chapter 5A, MCL 500.550 to 500.565, to the Insurance Code of 1956. Please see the following link for additional information [Michigan Insurance Data Security Law](#).
  - Pursuant to MCL 500.559, all licensees (includes insurers - foreign and domestic) are required to notify the Director as promptly as possible, but not later than 10 business days, after determining a cybersecurity event occurred involving nonpublic information in the licensee's possession if criteria listed under MCL 500.559(1)(a) or (b) applies. Licensees should utilize form FIS 2359: Notice of Cybersecurity Event that may be found at [FIS 2359 \(michigan.gov\)](#). Please note that licensees have a continuing obligation to update and supplement this form regarding material changes to information previously provided relating to the cybersecurity event. Submission of the form and supplemental information should be submitted to [DIFS-Cybersecurityforms@Michigan.gov](mailto:DIFS-Cybersecurityforms@Michigan.gov).
  - Due February 15 of each year: Pursuant to MCL 500.555(9), each insurer-licensee domiciled in Michigan shall submit to the Director a written statement certifying that the insurer is in compliance with the requirements under MCL 500.555 unless an exception applies to the insurer. For certification, an insurer-licensee domiciled in Michigan should utilize Form FIS 2360: Information Security Program Annual Certification that may be found at [Information Security Program Annual Certification \(FIS 2360\) \(michigan.gov\)](#). If an exception applies, an insurer-licensee domiciled in Michigan should utilize Form FIS 2378: Domestic Insurer Exemption Certification that may be found at [Domestic Insurer Exemption Certification \(FIS 2378\) \(michigan.gov\)](#). Each insurer-licensee domiciled in Michigan MUST submit either the FIS 2360 or FIS 2378 annually. The completed applicable form should be submitted electronically to [DIFS-Cybersecurityforms@Michigan.gov](mailto:DIFS-Cybersecurityforms@Michigan.gov).
10. DIFS has moved to store more of its records in electronic format and is seeking companies' assistance in continuing to file most of the filings in this format. The only document we will require a hard copy filing is the Signed Jurat Page with wet signatures. This hard copy Signed Jurat Page with attestation is attesting to the accuracy of information contained in the electronic filings for all documents indicated as 'Electronic Only (EO)' filings in the attached checklists. Please submit all electronic filings in pdf format. Form B, C, D, F, CGAD, ORSA, GCC, NAIC Liquidity Stress Testing and the Actuarial Opinion should also be submitted in electronic format and be properly executed. **Please submit all electronic filings to our central email address [DIFS-FinFilings@michigan.gov](mailto:DIFS-FinFilings@michigan.gov). Failure to submit EO filings by the date indicated in the attached checklists will result in fines and/or other regulatory action.** There is a file size limit of 25 MB. If you encrypt the filing, please be sure to notify DIFS of any passwords necessary to open and save the filing. If you have concerns about submitting confidential documents to DIFS electronically, please contact your assigned financial analyst to discuss other possible options.
11. Please note a change to the Accounting Practices and Procedures Manual, Appendix G – Implementation Guide (Guide) for the Annual Financial Reporting Model Regulation (Model), Section 11. The change is as follows: Effective for audits as of 12/31/21 and thereafter, the information required in Section 12 of the Model Audit Rule (MAR) required to be communicated by the accountant should be supplemented by providing both the name of the current lead audit partner and the year at which he or she began serving in that capacity. For the purpose of maintaining confidentiality, this information will not be included in the annual letter of qualifications, but instead shall be included in the internal control communication required in Section 11 of the MAR by the accountant as a footer or under the firm signature as follows: The engagement partner, [name], has served in that capacity with respect to the Company since [year that current term started]. Consistent with the Drafting Note1 to Section 11 of the MAR, the information provided on the engagement partner shall remain confidential.

12. Public Acts 258 to 264 of 2022, effective March 29, 2023, amended Michigan’s statutes applicable to holding companies, including new requirements for certain insurers where DIFS is the lead state regulator to file an annual group capital calculation and the results of the NAIC liquidity stress test. See MCL 500.1325b and MCL 500.1325c. Please see [Chapter 13](#) of the Insurance Code for all amendments enacted under this legislation. Additional information regarding Forms required under Chapter 13 and accompanying instructions can be found on DIFS’ [Insurance Forms website](#).



## GENERAL INFORMATION AND INSTRUCTIONS

### ATTENTION TO ALL INSURERS

THIS NOTICE IS CRITICAL FOR ENSURING PROPER COMPLETION OF THE ANNUAL STATEMENT. READ ALL NOTICES AND INSTRUCTIONS BEFORE

This document contains Annual and Quarterly Statement filing instructions and supplemental forms for all insurers authorized or eligible to transact business within the State of Michigan. Please read these instructions as well as the Checklist Instructions BEFORE submitting a filing.

Also review the Annual Statement Instructions prepared by the NAIC in order to familiarize yourself with any changes or new reporting requirements. For most companies the NAIC instructions are produced annually, and are available *only through the NAIC*. Please visit the NAIC Products website at [https://www.naic.org/prod\\_serv\\_home.htm](https://www.naic.org/prod_serv_home.htm) to order instructions. Questions should be directed to the NAIC at (816) 842-3600. Both may be contacted at NAIC, 1100 Walnut Street, Suite 1500, Kansas City, Missouri, 64106-2197.

Insurers are to follow the practices, procedures, and instructions promulgated by the NAIC except as superseded by Michigan laws and rules, orders of the Director and the instructions in this booklet.

#### **Annual and Quarterly Financial Statements**

1. Unless otherwise directed, all companies are required to file electronic (internet) annual and quarterly statements with the NAIC. Detailed information and instructions for filing the 2024 annual and the 2025 quarterly statements are available from the NAIC's web site at [http://www.naic.org/industry\\_financial\\_filing.htm](http://www.naic.org/industry_financial_filing.htm).
2. **As DIFS has moved to electronic filing of the annual and quarterly statements, the only document we will require a hard copy filing for is the Signed Jurat Page with wet signatures. This hard copy Signed Jurat Page with attestation is attesting to the accuracy of information contained in the electronic filings for all documents indicated as 'Electronic Only (EO)' filings in the attached checklists. Please submit all electronic filings in pdf format. The electronic annual and quarterly statements must be in the appropriate format and appropriate colored cover.**
3. All companies are to follow the NAIC instructions for font and statement size requirements for the filing of the 2024 annual statement. Any filing considered unreadable will result in rejection of the material submitted as not constituting an annual statement filing and will subject the filing entity to civil penalties as described in Section 438(5) and 8187 of the Michigan Insurance Code.

#### **Due Dates**

All financial statements, supplemental schedules, exhibits and forms should be filed to allow for receipt of the documents no later than the due date set forth in the accompanying checklist(s). If the due date falls on a weekend or holiday, the next business day will be the due date.

#### **Electronic Filing**

Insurers must file electronically with the NAIC. Companies must file their annual and quarterly statements with the NAIC through the Internet. In order to file on the Internet you must register with the NAIC. You may register on-line at the NAIC Website at [www.naic.org](http://www.naic.org) or call the NAIC Financial Data Repository (FDR) Data Administrators at (816) 783-8600 for additional information.

#### **Toll Free Telephone Number**

Companies may contact DIFS toll-free at (877) 999-6442. If an insurer has a toll-free telephone number please provide it on page 1 of the annual and quarterly statements.

### **Lloyd's of London**

Lloyd's of London is recognized as a trustee reinsurer in Michigan for reinsurance agreements having an inception date on or after August 1, 1995. For reinsurance business under agreements with an inception date on or before July 31, 1995, Lloyds of London is considered unauthorized. All insurers are to follow the NAIC Annual Statement Instructions regarding the reporting for Lloyd's of London when preparing the annual statement.

### **Unauthorized Reinsurance Balances**

Reinsurance balances reported for each unauthorized reinsurer as reported on Schedule S, may be reduced to the extent that each balance is secured pursuant to Sections 1103 and 1105 of the Michigan Insurance Code (i.e., LOC's, funds held or trustee assets). Miscellaneous balances are **not** proper offsets.

### **Change of Control**

Section 405 of the Michigan Insurance Code (MCL 500.405) automatically revokes the certificate of authority of an authorized foreign insurer 90 days after a change of control of the insurer unless the insurer requalifies for its certificate of authority. All insurers that undergo a change of control are required to file a Request for Determination of Exemption from Requalification under Section 405(1) (Form FIS 0144) which is available on the DIFS website. Additional information regarding requalification is available by contacting DIFS.

### **Oath of Director**

Public Act 291 of 2006 enacted a reporting requirement for insurers, whereby, Section 5238(3) of the Michigan Insurance Code requires each director of a domestic insurer to take and subscribe an oath when elected or appointed. DIFS has a form, FIS 0425 that must be completed and submitted to DIFS by each director upon election or appointment. The form is available on the DIFS website. (Note that this requirement does not apply to United States Branches of Non-US Insurers Using Michigan as a Port of Entry.)

### **Credit Life and Accident and Health Reserves**

Reserves for credit life insurance and credit accident and health insurance shall be adequate to discharge all liabilities, but shall not be less than the following minimum standards as required in accordance with Administrative Rule 550.209 (3) and (4):

1. For policies and certificates issued on or after January 1, 1987, the minimum reserve basis for credit life insurance is determined in accordance with the 1980 Commissioner's extended term table with interest at 5.50 percent. For policies and certificates issued prior to January 1, 1987, the minimum reserve basis are those previously in use.
2. The minimum reserve basis for active lives on credit accident and health insurance is the amount of the premium refund available to the insured.

### **Audited Financial Statement**

The independent audit required by Chapter 10 of the Michigan Insurance Code shall be conducted in accordance with Generally Accepted Auditing Standards (GAAS) and must be a general use report as discussed in the Statement of Position 95-5. No limited use reports will be accepted by DIFS. The audited financial statements shall be on a Statutory Accounting Principles (SAP) basis except where the Director specifies a different basis for a specific company.

DIFS has received some independent audit opinion letters that contain restricted use language. DIFS will not accept independent audit reports containing opinion letters with restricted use language. Audit reports containing such language will be rejected as not constituting an acceptable filing and will subject the filing entity to civil penalties as described in Section 438(5) of the Michigan Insurance Code.

DIFS has noted that certain filings of the Accountant's Letter of Qualification, as required per Section 1019 of the Michigan Insurance Code (the Code), contain language inconsistent with Section 1021(2) of the Code. Section 1021(2) requires that the independent public accountant's audit work papers be retained for a period of not less than five years after the period reported on. Certain qualification letters contain language that work papers will be retained until DIFS has filed a Report of Examination, but no longer than seven years. This statement does not meet the requirements of Section 1021(2), as it is conceivable that work papers could be destroyed prior to the five year minimum retention period. Companies should make their independent public accountant aware that audited financial statements will not be accepted with language inconsistent with Section 1021(2) of the Code.

### **Actuarial Opinion**

Please note that the Statement of Actuarial Opinion filed under Section 500.830a of the Michigan Insurance Code should be filed electronically and be properly executed.

### **Health Statement Test**

For the 2024 Annual Statement, insurers are required to complete the General Interrogatory related to the Health Statement Test. The Health Statement Test is designed to determine whether a reporting entity reports predominantly health lines of business. Passing the Health Statement Test may require a reporting entity to complete the Health Statement beginning with the first quarter's statement for the second year following the reporting year in which the reporting entity passes the Health Statement Test, unless the domestic regulator requires the reporting entity to complete an annual statement and risk based capital report that differs from the annual statement instructions. **For life, accident and health companies that pass the Health Statement Test, DIFS has required those companies to file the Health Statement (orange blank). All other reporting requirements and forms remain unchanged. All former blue blank filers still follow these Forms & Instructions.**

### **ACCREDITED REINSURERS**

In order for DIFS to monitor continued compliance with accredited reinsurer requirements, such accredited reinsurers shall file annual statements, quarterly statements, and audited financial statements in accordance with the filing instructions for foreign insurers. Such filings are due in accordance with the due dates set forth in the accompanying checklist(s).

### **UNITED STATES BRANCHES OF NON-U.S. INSURERS USING MICHIGAN AS A PORT OF ENTRY**

#### **(Trusted Deposits)**

Please review Section 411(4) and 431(c) of the Michigan Insurance Code regarding trusted deposits. The Trusted Surplus Statement (TSS) must be completed by each United States Branch of a non-U.S. insurer licensed to do any insurance business in this state. In addition to the TSS, and pursuant to Section 411(4) and the NAIC Annual Statement Instructions, the U.S. Branch must submit the following information:

1. A certified listing of deposits held must be furnished by each trustee directly to DIFS. This listing should clearly identify the location of each asset and a complete and accurate description of each asset. It is the U.S. Branch's responsibility to ensure that each trustee properly submits this listing.
2. A detailed listing prepared by the manager of the U.S. Branch of all trusted deposits held by each trustee, which clearly identifies the location of each asset, a complete and accurate description of each asset and the information required to be provided in Columns 1 through 5 of Schedules B, C and D of the TSS. This listing should reconcile to the assets reported on the U.S. Branch's annual and quarterly statements. If not, the U.S. Branch must provide a reconciliation.
3. A detailed reconciliation of the listing prepared by the company (as described in 2. above) and the listing prepared by the trustees (as described in 1. above).
4. To ensure the U.S. Branch's surplus adequacy, according to Section 431c, the U.S. Branch must maintain total trusted assets that are at all times equal to the sum of the following: a) U.S. Branch's reserves and other liabilities. b) The minimum capital and surplus required to be maintained under Section 410 of the Michigan Insurance Code. c) Any additional amounts considered necessary by the Director. Furthermore, trusted assets shall be valued and limited in accordance with Section 901 of the Michigan Insurance Code.

This information along with the TSS must be submitted with the annual statement on March 1, 2025 and again on May 15, August 15 and November 15 for the first, second and third quarters, respectively.

**THE DEPARTMENT OF INSURANCE AND FINANCIAL SERVICES STRIVES TO MAKE THIS DOCUMENT ACCURATE AND UNDERSTANDABLE. PLEASE LET US KNOW OF ANY ERRORS OR SUGGESTIONS FOR IMPROVEMENT.**

# 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.

### 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.

**PLEASE NOTE:** 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 printed detail is exempted per the *Annual Statement Instructions*.

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 **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 all 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 supplemental schedules and exhibits due April 1.

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

The **Quarterly .PDF Filing** is the .pdf file for the 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 (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 (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.

	<b>Notes and Instructions</b>	<b>(A-K apply to all filings)</b>
A	Required Filings Contact Person:	Unless otherwise directed, all communications and inquiries regarding annual statements, quarterly statements, and Michigan supplemental forms should be directed to DIFS – Office of Insurance Evaluation – Sharron Schmidt at (517) 284-8762 or email at <a href="mailto:SchmidtS8@michigan.gov">SchmidtS8@michigan.gov</a> .
B	Mailing Address:	<p><b>Note: In meeting statutory filing requirements for individual state forms, please make note of the address on each individual form where the insurer must send the form. Some forms MUST be sent to other statutory entities. Misdirected forms could result in fines.</b></p> <p><b>Foreign Insurers:</b> Use the following addresses for filing forms. Direct the form to the appropriate division as noted on the form.</p> <p><b>Regular Mail:</b> Michigan Department of Insurance and Financial Services PO Box 30220 Lansing, Michigan 48909-7720</p> <p><b>Express Mail (UPS, Federal Express, etc.):</b> Michigan Department of Insurance and Financial Services 530 W. Allegan Street, 7<sup>th</sup> Floor Lansing, Michigan 48933</p> <p><b>NOTE: Foreign insurers are not filing any documents with the financial area of DIFS. All financial statement filings are electronic with the NAIC.</b></p> <p><b>Domestic Insurers:</b> Use the following addresses for hard copy filings.</p> <p><b>Regular Mail:</b> <b>DIFS - Office of Insurance Evaluation</b> PO Box 30220 Lansing, Michigan 48909-7720</p>

		<p><b>Express Mail</b> (UPS, Federal Express, etc.):  <b>DIFS - Office of Insurance Evaluation</b>  530 W. Allegan Street, 7<sup>th</sup> Floor  Lansing, Michigan 48933</p> <p><b>Please submit all Office of Insurance Evaluation electronic filings to our central email address: <a href="mailto:DIFS-FinFilings@michigan.gov">DIFS-FinFilings@michigan.gov</a>.</b></p>
C	Mailing Address for Premium Taxes:	<p><b>Note:</b> Please refer to the Michigan Department of Treasury website at <a href="http://www.michigan.gov/treasury">www.michigan.gov/treasury</a> for information on the Corporate Income Tax (CIT) and where to send payments.  <b>The Michigan Department of Treasury processes all Corporate Income Tax Returns. <u>DO NOT SEND CORPORATE INCOME TAX RETURNS TO DIFS.</u></b></p>
D	Delivery Instructions:	<p>All filings must be <b>physically received</b> at the appropriate address listed 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.</p>
E	Late Filings:	<p>Failure to file in accordance with the instructions contained herein and by the indicated due date will immediately subject the company to a monetary penalty of at least \$1,000 (maximum of \$5,000) <u>and</u> \$50 per day for each day the filing remains incomplete, pursuant to section 438(5) of the Michigan Insurance Code. Failure for Fraternal Benefit Societies to comply with all filing instructions and requirements per MCL 500.8187 shall be fined \$100 for each day it neglects to provide a proper filing.</p>
F	Original Signatures:	<p><b>The hard copy Signed Jurat Page, which is now a required filing of Michigan domestic insurers, must contain wet signatures. See Note L.</b></p>
G	Signatures / Notarization / Certification:	<p><b>The hard copy Signed Jurat Page, which is now a required filing of Michigan domestic insurers must contain signatures of at least three responsible officers such as the CEO, CFO, president, secretary or treasurer (unless otherwise directed by the Director) and be properly notarized.</b> If those parties are not available to sign the Jurat Page, contact DIFS at least ten (10) business days prior to the statement due date to ascertain whether other arrangements are necessary.</p>
H	Amended Filings:	<p>Amended items must be filed within <u>10 days</u> of their amendment, along with an explanation of the amendments.  <b>As the hard copy Signed Jurat Page is now required for Michigan Domestic Insurers for the original filing, the same requirements must be followed for any amendment. The Jurat Page with wet signatures must be filed in hard copy form, with the amendments filed electronically. In accordance with NAIC Annual Statement Instructions, if a filing is amended, the amended electronic version must also be filed with the NAIC.</b></p>
I	Exceptions from Normal Filings:	<p>Foreign companies must supply a written copy of any exemption or extension received by its state of domicile at least 10 days prior to the filing due date to receive such exemption or extension from Michigan. Domestic companies should apply at least 30 days prior to the due date.</p>
J	Bar Codes:	<p>Forms as identified in the NAIC Annual Statement Filing Instructions are <b>required</b> to have a bar code affixed in the upper right hand corner of the form. Bar code standards can be found in the NAIC instructions.</p>
K	Signed Jurat	<p><b>The only hard copy document DIFS now requires is a hard copy filing for the Signed Jurat Page with wet signatures. This hard copy Signed Jurat Page with attestation is attesting to the accuracy of information</b></p>

		<p><b>contained in the electronic filings, as all filings are now electronic.</b></p> <p>This state waives foreign insurers from filing printed annual and quarterly statements and supplements. The Signed Jurat is not required to be filed in Michigan by foreign insurers.</p>
L	NONE Filings:	See NAIC Annual Statement Instructions. Exceptions to these instructions are noted on the form.
M	Filings Discontinued since Last Year:	None
N	Audited Financial Statements:	<p>The independent audit required by Chapter 10 of the Michigan Insurance Code shall be conducted in accordance with Generally Accepted Auditing Standards (GAAS). The audited financial statements shall be on a Statutory Accounting Principles (SAP) basis except where the Director specifies, in the reasonable exercise of his or her discretion, a different basis for a specific company.</p> <p>U.S. Branches of Canadian or British insurers using Michigan as a port of entry must file a copy of the independent public accountants' report that is filed with their domiciliary supervision authority and a copy of any notification of adverse financial condition report if required by domiciliary supervision authority.</p> <p>DIFS has received some independent audit opinion letters that contain restricted use language. DIFS will not accept independent audit reports containing opinion letters with restricted use language. Audit reports containing such language will be rejected as not constituting an acceptable filing and will subject the filing entity to civil penalties as described in Section 438(5) of the Michigan Insurance Code.</p> <p>The audited financial statements of domestic insurers and U.S. Branches of Canadian or British insurers using Michigan as a port of entry must include a copy of the independent public accountant's qualifications letter to the insurer stating the independent public accountant's understanding that the Director will be relying on the audited statements. The accountant's qualifications letter is required under Section 500.1019 of the Michigan Insurance Code (the Code). DIFS has noted that certain filings of the accountant's qualifications letter contain language inconsistent with Section 1021(2) of the Code. Section 1021(2) requires that the independent public accountant's audit work papers be retained for a period of not less than five years after the period reported on. Certain qualification letters contain language that work papers will be retained until DIFS has filed a Report of Examination, but no longer than seven years. This statement does not meet the requirements of Section 1021(2), as it is conceivable that work papers could be destroyed prior to the five year minimum retention period. Companies should make their independent public accountant aware that audited financial statements will not be accepted with language inconsistent with Section 1021(2) of the Code.</p> <p><b>Independent CPA</b> – Companies shall follow the provisions of Section 500.1009 of the Michigan Insurance Code regarding the appointment or change in independent CPA. In conjunction with the appointment or change in independent CPA, companies shall file the letter of awareness as required</p>

		<p>in Section 500.1009(2).</p> <p>Foreign insurers are not required to file copies of the above letters unless requested. If a foreign insurer does not file the letters when requested, the filing (audited financial statement) will be rejected and the insurer will be subject to the penalties for failure to file and/or making an incomplete filing.</p> <p>An insurer may make written application to the Director for approval to file a consolidated or combined independent audit in lieu of separate audited financial statements. Section 1011 of the Michigan Insurance Code and the NAIC Annual Statement Instructions describe the conditions under which an insurer may request approval to file audited consolidated or combined financial statements. <b>For foreign insurers making this application, Michigan will rely on the request and approval of the domiciliary state. Insurers will only need to file these documents upon request.</b></p>
O	Notification of Adverse Financial Condition:	See Michigan Insurance Law 500.1015.
P	Report on Unremediated Material Weaknesses in Internal Controls:	See Michigan Insurance Law 500.1017.
Q	Request for Exemption:	See Michigan Insurance Law 500.1023.
R	Holding Company Registration:	<p><b>INSURANCE HOLDING COMPANY ACT FORMS AND INSTRUCTIONS CAN BE FOUND ON THE DIFS WEBSITE AT <a href="http://www.michigan.gov/difs/">www.michigan.gov/difs/</a></b></p> <p>All domestic insurers who are a member of a holding company system and all other insurers subject to registration under Michigan's Holding Company Act must file holding company registration statements, including exhibits, by May 1, 2025. Only a few foreign insurers are subject to registration under Michigan's Holding Company Act. Unless DIFS has notified a foreign insurer that it must file a Form B in Michigan, no filing is required.</p> <p>For insurers subject to registration under Section 1324:</p> <ul style="list-style-type: none"> <li>a) Annual Form B and C registration statements must be filed by May 1. Annual Enterprise Risk Reports (Form F) must be filed by May 1. Annual Group Capital Calculation and results of the NAIC Liquidity Stress Test must be filed by May 1, if applicable.</li> <li>b) The Form B, Form C, Form F, Annual Group Capital Calculation, and results of the NAIC Liquidity Stress Test statements are to be in accordance with Michigan's Holding Company Act, rules, bulletins and orders. The biographical information included in the Form B should include the home address for each director and executive officer.</li> <li>c) If there has been no change from the previous year, the statement must be restated rather than indicating "no change."</li> <li>d) Audited financial statements of the registrant's ultimate controlling business entity (e.g., a corporation, organization, limited liability company, or other legal entity) must be included in the filing.</li> <li>e) If a person or persons ultimately controlling the insurer is an individual or group of individuals, that person must file information disclosing the financial</li> </ul>



		<p>position of that individual or group of individuals.</p> <p>f) The ultimate controlling person, whether an individual or corporation, should include in the Form B, financial statements that contain the financial results of each intermediary company that may have affiliated transactions with the insurer. The financial statements can be in the form of consolidated financial statements for the holding company that provides a schedule that provides the financial condition of each company or individual. Financial statements for each company can be filed with the Form B.</p> <p>g) If an individual is the ultimate controlling person of an insurer, the Form B holding company registration statement is to be signed and certified by that individual.</p> <p>h) The Michigan holding company act provides for substantial penalties for late or incomplete filings (see Section 1371). Late or incomplete submissions are also subject to penalties under Section 438(5).</p> <p>If during the year there are any material changes to information filed in the annual registration statement, an amendment is due no later than 15 days after the end of the month in which the change occurred.</p>
S	Michigan Section 901, Qualifying Assets Forms – <b>Domestic Insurers Only</b> (FIS 0063, 0079, 0081):	<p>Instructions to these forms are located just before the forms in the appendix. A listing of ‘Companies for which Reinsurance Credits are Allowed in Michigan’ (see Appendix V) follows the instructions in Appendix I. Read Section 1105 of the Michigan Insurance Code and use the list of ‘Companies for which Reinsurance Credits are Allowed in Michigan’ when completing reinsurance schedules for annual statements and for qualifying assets forms.</p> <p>i) <b>NOTE: A company that has a certificate of authority may still not be recognized as an authorized reinsurer in Michigan. Also, a company may be an authorized reinsurer, but not have a Michigan certificate of authority. This listing is only relevant for completing the above schedules and forms.</b></p>
T	Officer and Director Biographical Information	<p>In addition to the Section 250 letter of notification, <u>all domestic insurers</u> must file officer and director biographical information for all new officers and directors reported on the jurat page. The biographical information should include the home address for each director and executive officer. The form for reporting officer and director information can be found on the NAIC’s website at <a href="http://www.naic.org/industry_ucaa.htm">http://www.naic.org/industry_ucaa.htm</a>. Please be sure to check the NAIC website prior to filing to ensure that the most current biographical affidavit form is being used. <b>The biographical affidavit filed with DIFS must be filed electronically and be properly executed.</b> Additionally, an independent third party background verification report prepared by an NAIC approved vendor is</p>

		also required for all new officers and directors. A list of approved vendors can be found on the above noted NAIC website.
U	Michigan Insurance Data Security Law. Form FIS 2360: Information Security Program Annual Certification or Form FIS 2378: Domestic Insurer Exemption Certification	Pursuant to MCL 500.555(9), due February 15 of each year, each insurer-licensee domiciled in Michigan shall submit to the Director a written statement certifying that the insurer is in compliance with the requirements under MCL 500.555 unless an exception applies to the insurer. For certification, an insurer-licensee domiciled in Michigan should utilize Form FIS 2360: Information Security Program Annual Certification that may be found at <a href="https://www.michigan.gov/information-security-program-annual-certification">Information Security Program Annual Certification (FIS 2360) (michigan.gov)</a> . If an exception applies, an insurer-licensee domiciled in Michigan should utilize Form FIS 2378: Domestic Insurer Exemption Certification that may be found at <a href="https://www.michigan.gov/domestic-insurer-exemption-certification">Domestic Insurer Exemption Certification (FIS 2378) (michigan.gov)</a> . Each insurer-licensee domiciled in Michigan MUST submit either the FIS 2360 or FIS 2378 annually. The completed applicable form should be submitted electronically to <a href="mailto:DIFS-Cybersecurityforms@Michigan.gov">DIFS-Cybersecurityforms@Michigan.gov</a> .

**LIFE, ACCIDENT AND HEALTH/FRATERNAL INSURERS**

**COMPANY NAME:** \_\_\_\_\_ **NAIC Company Code:** \_\_\_\_\_

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

**REQUIRED FILINGS IN THE STATE OF: MICHIGAN Filings Made During the Year 2025**

(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			
		<b>I. NAIC FINANCIAL STATEMENTS</b>						
	1	Annual Statement (8 ½"x14")	EO	EO	xxx	3/1	NAIC	A-J, L
	1.1	Printed Investment Schedule detail (Pages E01-E29) @	EO	EO	xxx	3/1	NAIC	A-J, L
	2	Quarterly Financial Statement (8 ½" x 14")	EO	EO	xxx	5/15, 8/15, 11/15	NAIC	A-J, L
	3	Separate Accounts Annual Statement (8 ½"x14")	EO	EO	xxx	3/1	NAIC	A-J, L
		<b>II. NAIC SUPPLEMENTS</b>						
	11	Accident & Health Policy Experience Exhibit	EO	EO	xxx	4/1	NAIC	A-J, L
	12	Credit Insurance Experience Exhibit	EO	EO	xxx	4/1	NAIC	A-J, L
	13	Health Supplement	EO	EO	xxx	3/1	NAIC	A-J, L
	14	Life, Health & Annuity Guaranty Association Assessable Premium Exhibit, Parts 1 and 2	xxx	EO	xxx	4/1	NAIC	A-J, L
	15	Long Term Care Experience Reporting Forms	xxx	EO	xxx	4/1	NAIC	A-J, L
	16	Management Discussion & Analysis	EO	EO	xxx	4/1	Company	A-J
	17	Market Conduct Annual Statement Premium Exhibit for Year	EO	EO	xxx	3/1	NAIC	A-J, L
	18	Medicare Supplement Insurance Experience Exhibit	xxx	EO	xxx	3/1	NAIC	A-J, L
	19	Medicare Part D Coverage Supplement	EO	EO	xxx	3/1, 5/15, 8/15, 11/15	NAIC	A-J, L
	20	Risk-Based Capital Report	EO	EO	xxx	3/1	NAIC	A-L
	21	Schedule SIS	EO	N/A	N/A	3/1	NAIC	A-J, L
	22	Supplemental Compensation Exhibit	EO	N/A	N/A	3/1	NAIC	A-J, L
	23	Supplemental Health Care Exhibit (Part 1 and 2)	EO	EO	xxx	4/1	NAIC	A-J, L
	24	Supplemental Investment Risk Interrogatories	EO	EO	xxx	4/1	NAIC	A-J, L
	25	Supplemental Schedule O	EO	EO	xxx	3/1	NAIC	A-J, L
	26	Supplemental Term and Universal Life Insurance Reinsurance Exhibit	EO	EO	xxx	4/1	NAIC	A-J, L
	27	Trusted Surplus Statement	xxx	EO	xxx	3/1, 5/15, 8/15, 11/15	NAIC	A-J, L
	28	Variable Annuities Supplement	EO	EO	xxx	4/1	NAIC	A-J, L
	29	VM 20 Reserves Supplement	EO	EO	xxx	3/1	NAIC	A-J, L
	30	Workers' Compensation Carve Out Supplement	EO	EO	xxx	3/1	NAIC	A-J, L
		<b>Actuarial Related Items</b>						
	31	Actuarial Certification regarding use 2001 Preferred Class Table	EO	EO	xxx	3/1	Company	A-J, L
	32	Actuarial Certification Related Annuity Nonforfeiture Ongoing Compliance for Equity Indexed Annuities	EO	EO	xxx	3/1	Company	A-J, L
	33	Actuarial Memorandum Related to Universal Life with Secondary Guarantee Policies required by Actuarial Guideline XXXVIII 8D	EO	N/A	N/A	4/30	Company	A-J, L
	34	Actuarial Opinion	EO	EO	xxx	3/1	Company	A-J, L
	35	Actuarial Opinion on Separate Accounts Funding Guaranteed Minimum Benefit	EO	EO	xxx	3/1	Company	A-J, L
	36	Actuarial Opinion on Synthetic Guaranteed Investment Contracts	EO	EO	xxx	3/1	Company	A-J, L
	37	Actuarial Opinion on X-Factors	EO	EO	xxx	3/1	Company	A-J, L
	38	Actuarial Opinion required by Modified Guaranteed Annuity Model Regulation	EO	EO	xxx	3/1	Company	A-J, L
	39	Request for Life PBR Exemption (if applicable)	EO	EO	xxx	Commissioner 7/1 NAIC 8/15	Company	A-J, L
	40	Executive Summary of the PBR Actuarial Report	EO	N/A	N/A	4/1	Company	A-J, L
	41	Life Summary of the PBR Actuarial Report	EO	N/A	N/A	4/1	Company	A-J, L
	42	Variable Annuities Summary of the PBR Actuarial Report	EO	N/A	N/A	4/1	Company	A-J, L
	43	PBR Actuarial Report (provide upon request)	EO	N/A	N/A		Company	A-J, L
	44	Regulatory Asset Adequacy Issues Summary (send to Office of Insurance Evaluation of the Department of Insurance and Financial Services)	EO	N/A	xxx	4/1	Company	A-J
	45	Reasonableness & Consistency of Assumptions Certification required by Actuarial Guideline XXXV	xxx	EO	xxx	3/1, 5/15, 8/15, 11/15	Company	A-J, L
	46	Reasonableness of Assumptions Certification required by Actuarial Guideline XXXV	xxx	EO	xxx	3/1, 5/15, 8/15, 11/15	Company	A-J, L

	47	Reasonableness & Consistency of Assumptions Cert. required by Actuarial Guideline XXXVI (Updated Average Market Value)	EO	EO	xxx	3/1, 5/15, 8/15, 11/15	Company	A-J, L
	48	Reasonableness & Consistency of Assumptions Cert. required by Actuarial Guideline XXXVI (Updated Market Value)	EO	EO	xxx	3/1, 5/15, 8/15, 11/15	Company	A-J, L
	49	Reasonableness of Assumptions Cert. for Implied Guaranteed Rate Method required by Actuarial Guideline XXXVI	EO	EO	xxx	3/1, 5/15, 8/15, 11/15	Company	A-J, L
	50	RBC Certification required under C-3 Phase I	EO	EO	xxx	3/1	Company	A-J
	51	RBC Certification required under C-3 Phase II	EO	EO	xxx	3/1	Company	A-J
	52	Statement on non-guaranteed elements - Exhibit 5 Interrogatory #3	xxx	EO	xxx	3/1	Company	A-J, L
	53	Statement on participating/non-participating policies - Exhibit 5 Interrogatory #1 & 2	xxx	EO	xxx	3/1	Company	A-J, L
		<b>III. ELECTRONIC FILING REQUIREMENTS</b>						
	61	Annual Statement Electronic Filing	xxx	EO	xxx	3/1	NAIC	A-J, L
	62	March .PDF Filing	xxx	EO	xxx	3/1	NAIC	A-J, L
	63	Risk-Based Capital Electronic Filing	xxx	EO	N/A	3/1	NAIC	A-J, L
	64	Risk-Based Capital .PDF Filing	xxx	EO	N/A	3/1	NAIC	A-J, L
	65	Separate Accounts Electronic Filing	xxx	EO	xxx	3/1	NAIC	A-J, L
	66	Separate Accounts .PDF Filing	xxx	EO	xxx	3/1	NAIC	A-J, L
	67	Supplemental Electronic Filing	xxx	EO	xxx	4/1	NAIC	A-J, L
	68	Supplemental .PDF Filing	xxx	EO	xxx	4/1	NAIC	A-J, L
	69	Quarterly Statement Electronic Filing	xxx	EO	xxx	5/15, 8/15, 11/15	NAIC	A-J, L
	70	Quarterly .PDF Filing	xxx	EO	xxx	5/15, 8/15, 11/15	NAIC	A-J, L
	71	June .PDF Filing	xxx	EO	xxx	6/1	NAIC	A-J, L
		<b>IV. AUDIT/INTERNAL CONTROL RELATED REPORTS</b>						
	81	Accountants Letter of Qualifications	EO	EO	N/A	6/1	Company	A-J, N
	82	Audited Financial Reports	EO	EO	xxx	6/1	Company	A-J, N
	83	Audited Financial Statements Exemption Affidavit	EO	N/A	N/A	6/1	Company	A-J
	84	Communication of Internal Control Related Matters Noted in Audit	EO	EO	xxx	8/1	Company	A-J, P
	85	Independent CPA (change)	EO	N/A	N/A	6/1	Company	A-J, P
	86	Management's Report of Internal Control Over Financial Reporting	EO	N/A	N/A	8/1	Company	A-J
	87	Notification of Adverse Financial Condition	EO	N/A	EO	SEE NOTE	Company	A-J, O
	88	Request for Exemption to File	EO	N/A	N/A	SEE NOTE	Company	A-J, Q
	89	Relief from the five-year rotation requirement for lead audit partner	EO	EO	xxx	3/1	Company	A-J
	90	Relief from the one-year cooling off period for independent CPA	EO	EO	xxx	3/1	Company	A-J
	91	Relief from the Requirements for Audit Committees	EO	EO	xxx	3/1	Company	A-J
		<b>V. STATE REQUIRED FILINGS</b>						
	101	Corporate Governance Annual Disclosure ***	EO	0	N/A	6/1	Company	A-J
	102	Filings Checklist (with Column 1 completed)	xxx	0			State	A-J
	103	Form B-Holding Company Registration Statement	EO	0	N/A	5/1	Company	A-J, R
	104	Form F-Enterprise Risk Report (per Section 1325a of the Michigan Insurance Code) ****	EO	0	N/A	5/1	Company	A-J, R
	105	ORSA (This filing is intended to be submitted to the lead state if filed at the insurance group level. See Chapter 17 of the Michigan Insurance Code.) *****	EO	0	N/A	SEE ***** BELOW	Company	A-J
	106	Premium Tax		0		SEE NOTE	State	C
	107	Signed Jurat	1	0	0	SEE NOTE	NAIC	K
	108	Group Capital Calculation (File with lead state only)	EO	0	N/A	5/1	Company	A-J, R
	109	Accident and Sickness Insurance Advertising Certificate of Compliance per Admin Rule 500.668 – only applies to insurers writing disability insurance. Advertisement of Life Insurance and Annuities Certificate of Compliance per Admin Rule 500.1385. Submit via SERFF.	EO	0	EO	3/1	Company	A-J
	110	Qualifying Assets under Section 901(1) of the Michigan Insurance Code	EO	0	N/A	3/1	State – FIS 0081	A-J, S
	111	Complaint and Grievance Summary for Health Carriers (File Via SERFF)	EO	0	EO	4/15	State-FIS 0318	A-J

	112	Michigan Health Insurance Enrollment, Premiums and Losses (Companies should note that beginning with the 2015 reporting year, the FIS 0322 must be submitted electronically to DIFS. The submission website address, along with an authentication code and more detailed instructions, will be sent to the Statutory Statement Contact on or before March 1)	EO	0	EO	4/1	State – FIS 0322	A-J
	113	Michigan Insurance Data Security Law – 500.555(9). Form FIS 2360: Information Security Program Annual Certification or Form FIS 2378: Domestic Insurer Exemption Certification	EO	0	N/A	2/15	State – FIS 2360 or FIS 2378	A-J, U
	114	Officer and Director Biographical Information	EO	0	xxx	SEE NOTE	NAIC	A-J, T

\*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](http://www.naic.org/public_lead_state_report.htm). Michigan has adopted the NAIC Corporate Governance Annual Disclosure Model Act through Public Act 520 of 2018 effective January 1, 2020.

\*\*\*\*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](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. For more information on lead states, see the following NAIC URL: [http://www.naic.org/public\\_lead\\_state\\_report.htm](http://www.naic.org/public_lead_state_report.htm). ORSA filings are required in Michigan starting in 2018.

@If schedule is included in the annual statement submitted as item #1, an additional copy is not required.

**UNITED STATES BRANCH OF NON-US INSURERS**

**Using MICHIGAN as a Port of Entry**

**COMPANY NAME:** \_\_\_\_\_ **NAIC Company Code:** \_\_\_\_\_

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

**REQUIRED FILINGS IN THE STATE OF: MICHIGAN Filings Made During the Year 2025**

(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")	EO	EO	xxx	3/1	NAIC	A-J, L
	1.1	Printed Investment Schedule detail (Pages E01-E29) @	EO	EO	xxx	3/1	NAIC	A-J, L
	1.2	Annual Statement of Total Business (OSFI)	EO	EO	xxx	3/1	NAIC	A-J, L
	2	Quarterly Financial Statement (8 1/2" x 14")	EO	EO	xxx	5/15, 8/15, 11/15	NAIC	A-J, L
	3	Separate Accounts Annual Statement (8 1/2"x14")	EO	EO	xxx	3/1	NAIC	A-J, L
		<b>II. NAIC SUPPLEMENTS</b>						
	11	Accident & Health Policy Experience Exhibit	EO	EO	xxx	4/1	NAIC	A-J, L
	12	Credit Insurance Experience Exhibit	EO	EO	xxx	4/1	NAIC	A-J, L
	13	Health Supplement	EO	EO	xxx	3/1	NAIC	A-J, L
	14	Life, Health & Annuity Guaranty Association Assessable Premium Exhibit, Parts 1 and 2	xxx	EO	xxx	4/1	NAIC	A-J, L
	15	Long Term Care Experience Reporting Forms	xxx	EO	xxx	4/1	NAIC	A-J, L
	16	Management Discussion & Analysis	EO	EO	xxx	4/1	Company	A-J
	17	Market Conduct Annual Statement Premium Exhibit for Year	EO	EO	xxx	3/1	NAIC	A-J, L
	18	Medicare Supplement Insurance Experience Exhibit	xxx	EO	xxx	3/1	NAIC	A-J, L
	19	Medicare Part D Coverage Supplement	EO	EO	xxx	3/1, 5/15, 8/15, 11/15	NAIC	A-J, L
	20	Risk-Based Capital Report	EO	EO	xxx	3/1	NAIC	A-J
	21	Schedule SIS	EO	N/A	N/A	3/1	NAIC	A-J, L
	22	Supplemental Compensation Exhibit	EO	N/A	N/A	3/1	NAIC	A-J, L
	23	Supplemental Health Care Exhibit (Part 1 and2)	EO	EO	xxx	4/1	NAIC	A-J, L
	24	Supplemental Investment Risk Interrogatories	EO	EO	xxx	4/1	NAIC	A-J, L
	25	Supplemental Schedule O	EO	EO	xxx	3/1	NAIC	A-J, L
	26	Supplemental Term and Universal Life Insurance Reinsurance Exhibit	EO	EO	xxx	4/1	NAIC	A-J, L
	27	Trusted Surplus Statement	EO	EO	xxx	3/1, 5/15, 8/15, 11/15	NAIC	A-J, L
	28	Variable Annuities Supplement	EO	EO	xxx	4/1	NAIC	A-J, L
	29	VM 20 Reserves Supplement	EO	EO	xxx	3/1	NAIC	A-J, L
	30	Workers' Compensation Carve Out Supplement	EO	EO	xxx	3/1	NAIC	A-J, L
		<b>Actuarial Related Items</b>						
	31	Actuarial Certification regarding use 2001 Preferred Class Table	EO	EO	xxx	3/1	Company	A-J, L
	32	Actuarial Certification Related Annuity Nonforfeiture Ongoing Compliance for Equity Indexed Annuities	EO	EO	xxx	3/1	Company	A-J, L
	33	Actuarial Memorandum Related to Universal Life with Secondary Guarantee Policies required by Actuarial Guideline XXXVIII 8D	EO	N/A	N/A	4/30	Company	A-J, L
	34	Actuarial Opinion	EO	EO	xxx	3/1	Company	A-J, L
	35	Actuarial Opinion on Separate Accounts Funding Guaranteed Minimum Benefit	EO	EO	xxx	3/1	Company	A-J, L
	36	Actuarial Opinion on Synthetic Guaranteed Investment Contracts	EO	EO	xxx	3/1	Company	A-J, L
	37	Actuarial Opinion on X-Factors	EO	EO	xxx	3/1	Company	A-J, L
	38	Actuarial Opinion required by Modified Guaranteed Annuity Model Regulation	EO	EO	xxx	3/1	Company	A-J, L
	39	Request for Life PBR Exemption (if applicable)	EO	EO	xxx	Commissioner 7/1 NAIC 8/15	Company	A-J, L
	40	Executive Summary of the PBR Actuarial Report	EO	N/A	N/A	4/1	Company	A-J, L
	41	Life Summary of the PBR Actuarial Report	EO	N/A	N/A	4/1	Company	A-J, L
	42	Variable Annuities Summary of the PBR Actuarial Report	EO	N/A	N/A	4/1	Company	A-J, L
	43	PBR Actuarial Report (provide upon request)	EO	N/A	N/A		Company	A-J, L
	44	Regulatory Asset Adequacy Issues Summary (send to Office of Insurance Evaluation of the Department of Insurance and Financial Services)	EO	N/A	xxx	4/1	Company	A-J

45	Reasonableness & Consistency of Assumptions Cert. required by Actuarial Guideline XXXV	xxx	EO	xxx	3/1, 5/15, 8/15, 11/15	Company	A-J, L
46	Reasonableness of Assumptions Certification Required by Actuarial Guideline XXXV	xxx	EO	xxx	3/1, 5/15, 8/15, 11/15	Company	A-J, L
47	Reasonableness & Consistency of Assumptions Cert. required by Actuarial Guideline XXXVI (Updated Average Market Value)	EO	EO	xxx	3/1, 5/15, 8/15, 11/15	Company	A-J, L
48	Reasonableness & Consistency of Assumptions Cert. Required by Actuarial Guideline XXXVI (Updated Market Value)	EO	EO	xxx	3/1, 5/15, 8/15, 11/15	Company	A-J, L
49	Reasonableness of Assumptions Cert. for Implied Guaranteed Rate Method Required by Actuarial Guideline XXXVI	EO	EO	xxx	3/1, 5/15, 8/15, 11/15	Company	A-J, L
50	RBC Certification required under C-3 Phase I	EO	EO	xxx	3/1	Company	A-J
51	RBC Certification required under C-3 Phase II	EO	EO	xxx	3/1	Company	A-J
52	Statement on non-guaranteed elements - Exhibit 5 Interrogatory #3	xxx	EO	xxx	3/1	Company	A-J, L
53	Statement on participating/non-participating policies – Exhibit 5 Interrogatory #1 & 2	xxx	EO	xxx	3/1	Company	A-J, L
	<b>III. ELECTRONIC FILING REQUIREMENTS</b>						
61	Annual Statement Electronic Filing	xxx	EO	N/A	3/1	NAIC	A-J, L
62	March .PDF Filing	xxx	EO	N/A	3/1	NAIC	A-J, L
63	Risk-Based Capital Electronic Filing	xxx	EO	N/A	3/1	NAIC	A-J, L
64	Risk-Based Capital .PDF Filing	xxx	EO	N/A	3/1	NAIC	A-J, L
65	Separate Accounts Electronic Filing	xxx	EO	N/A	3/1	NAIC	A-J, L
66	Separate Accounts .PDF Filing	xxx	EO	N/A	3/1	NAIC	A-J, L
67	Supplemental Electronic Filing	xxx	EO	N/A	4/1	NAIC	A-J, L
68	Supplemental .PDF Filing	xxx	EO	N/A	4/1	NAIC	A-J, L
69	Quarterly Statement Electronic Filing	xxx	EO	N/A	5/15, 8/15, 11/15	NAIC	A-J, L
70	Quarterly .PDF Filing	xxx	EO	N/A	5/15, 8/15, 11/15	NAIC	A-J, L
71	June .PDF Filing	xxx	EO	N/A	6/1	NAIC	A-J, L
	<b>IV. AUDIT/INTERNAL CONTROL RELATED REPORTS</b>						
81	Accountants Letter of Qualifications	EO	EO	N/A	6/1	Company	A-J, N
82	Audited Financial Reports (OSFI 54)	EO	EO	xxx	6/1	Company	A-J, N
83	Audited Financial Statements Exemption Affidavit	EO	N/A	N/A	6/1	Company	A-J
84	Communication of Internal Control Related Matters Noted in Audit	EO	EO	N/A	8/1	Company	A-J, P
85	Independent CPA (change)	EO	N/A	N/A	6/1	Company	A-J, N
86	Management's Report of Internal Control Over Financial Reporting	EO	N/A	N/A	8/1	Company	A-J
87	Notification of Adverse Financial Condition	EO	N/A	N/A	SEE NOTE	Company	A-J, O
88	Request for Exemption to File	EO	N/A	N/A	SEE NOTE	Company	A-J, Q
89	Relief from the five-year rotation requirement for lead audit partner	EO	EO	xxx	3/1	Company	A-J
90	Relief from the one-year cooling off period for independent CPA	EO	EO	xxx	3/1	Company	A-J
91	Relief from the Requirements for Audit Committees	EO	EO	xxx	3/1	Company	A-J
	<b>V. STATE REQUIRED FILINGS</b>						
101	Corporate Governance Annual Disclosure ***	EO	0	N/A	6/1	Company	A-J
102	Filings Checklist (with Column 1 completed)	xxx	0	N/A		State	A-J
103	Form B-Holding Company Registration Statement	EO	0	N/A	5/1	Company	A-J, R
104	Form F-Enterprise Risk Report (per Section 1325a of the Michigan Insurance Code) ****	EO	0	N/A	5/1	Company	A-J, R
105	ORSA (This filing is intended to be submitted to the lead state if filed at the insurance group level. See Chapter 17 of the Michigan Insurance Code.) *****	EO	0	N/A	SEE ***** BELOW	Company	A-J
106	Premium Tax		xxx	N/A	SEE NOTE	State	C
107	Signed Jurat	1	N/A	N/A	SEE NOTE	NAIC	K
108	Group Capital Calculation (File with lead state only)	EO	0	N/A	5/1	Company	A-J, R
109	Accident and Sickness Insurance Advertising Certificate of Compliance per Admin Rule 500.668 – only applies to insurers writing disability insurance. Advertisement of Life Insurance and Annuities Certificate of Compliance per Admin Rule 500.1385. Submit via SERFF.	EO	NA	N/A	3/1	Company	A-J
110	Certification directly from Trustee of Deposits Held pursuant to Section 411(4) of the Michigan Insurance Code	EO	N/A	N/A	3/1, 5/15, 8/15, 11/15	Company	A-J
111	Company's detailed listing of trusteed assets and related reconciliation	EO	N/A	N/A	3/1, 5/15, 8/15, 11/15	Company	A-J
112	Valuation of Section 411 Trusteed Assets under Section 901 of the Michigan Insurance Code	EO	N/A	N/A	3/1	State – FIS 0063	A-J, S
113	Complaint and Grievance Summary for Health Carriers (File Via SERFF)	EO	N/A	N/A	4/15	State-FIS 0318	A-J

114	Michigan Health Insurance Enrollment, Premiums and Losses (Companies should note that beginning with the 2015 reporting year, the FIS 0322 must be submitted electronically to DIFS. The submission website address, along with an authentication code and more detailed instructions, will be sent to the Statutory Statement Contact on or before March 1)	EO	N/A	N/A	4/1	State-FIS 0322	A-J
115	Michigan Insurance Data Security Law – 500.555(9). Form FIS 2360: Information Security Program Annual Certification or Form FIS 2378: Domestic Insurer Exemption Certification	EO	0	N/A	2/15	State – FIS 2360 or FIS 2378	A-J, U
116	Officer and Director Biographical Information	EO	N/A	N/A	SEE NOTE	NAIC	A-J, T

**\*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](http://www.naic.org/public_lead_state_report.htm). Michigan has adopted the NAIC Corporate Governance Annual Disclosure Model Act through Public Act 520 of 2018 effective January 1, 2020.**

**\*\*\*\*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](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](http://www.naic.org/public_lead_state_report.htm). ORSA filings are required in Michigan starting in 2018.**

**@If schedule is included in the annual statement submitted as item #1, an additional copy is not required.**



**UNITED STATES BRANCH OF NON-US INSURERS**

**That DO NOT use MICHIGAN as a Port of Entry**

**COMPANY NAME:** \_\_\_\_\_ **NAIC Company Code:** \_\_\_\_\_

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

**REQUIRED FILINGS IN THE STATE OF: MICHIGAN Filings Made During the Year 2025**

(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 ½"x14")	N/A	N/A	xxx	3/1	NAIC	A-J, L
	1.1	Printed Investment Schedule detail (Pages E01-E29)	N/A	N/A	xxx	3/1	NAIC	A-J, L
	2	Quarterly Financial Statement (8 ½" x 14")	N/A	N/A	xxx	5/15, 8/15, 11/15	NAIC	A-J, L
	3	Separate Accounts Annual Statement (8 ½"x14")	N/A	N/A	xxx	3/1	NAIC	A-J, L
		<b>II. NAIC SUPPLEMENTS</b>						
	11	Accident & Health Policy Experience Exhibit	N/A	N/A	xxx	4/1	NAIC	A-J, L
	12	Credit Insurance Experience Exhibit	N/A	N/A	xxx	4/1	NAIC	A-J, L
	13	Health Supplement	N/A	N/A	xxx	3/1	NAIC	A-J, L
	14	Life, Health & Annuity Guaranty Association Assessable Premium Exhibit, Parts 1 and 2	N/A	N/A	xxx	4/1	NAIC	A-J, L
	15	Long Term Care Experience Reporting Forms	N/A	N/A	xxx	4/1	NAIC	A-J, L
	16	Management Discussion & Analysis	N/A	N/A	xxx	4/1	Company	A-J
	17	Market Conduct Annual Statement Premium Exhibit for Year	N/A	N/A	xxx	3/1	NAIC	A-J, L
	18	Medicare Supplement Insurance Experience Exhibit	N/A	N/A	xxx	3/1	NAIC	A-J, L
	19	Medicare Part D Coverage Supplement	N/A	N/A	xxx	3/1, 5/15, 8/15, 11/15	NAIC	A-J, L
	20	Risk-Based Capital Report	N/A	N/A	N/A	3/1	NAIC	A-J
	21	Schedule SIS	N/A	N/A	N/A	3/1	NAIC	A-J, L
	22	Supplemental Compensation Exhibit	N/A	N/A	N/A	3/1	NAIC	A-J, L
	23	Supplemental Health Care Exhibit (Part 1 and 2)	N/A	N/A	xxx	4/1	NAIC	A-J, L
	24	Supplemental Investment Risk Interrogatories	N/A	N/A	xxx	4/1	NAIC	A-J, L
	25	Supplemental Schedule O	N/A	N/A	xxx	3/1	NAIC	A-J, L
	26	Supplemental Term and Universal Life Insurance Reinsurance Exhibit	N/A	N/A	xxx	4/1	NAIC	A-J, L
	27	Trusteed Surplus Statement	N/A	N/A	xxx	3/1, 5/15, 8/15, 11/15	NAIC	A-J, L
	28	Variable Annuities Supplement	N/A	EO	xxx	4/1	NAIC	A-J, L
	29	VM 20 Reserves Supplement	N/A	EO	xxx	3/1	NAIC	A-J, L
	30	Workers' Compensation Carve Out Supplement	N/A	N/A	xxx	3/1	NAIC	A-J, L
		<b>Actuarial Related Items</b>						
	31	Actuarial Certification regarding use 2001 Preferred Class Table	N/A	N/A	xxx	3/1	Company	A-J, L
	32	Actuarial Certification Related Annuity Nonforfeiture Ongoing Compliance for Equity Indexed Annuities	N/A	N/A	xxx	3/1	Company	A-J, L
	33	Actuarial Memorandum Related to Universal Life with Secondary Guarantee Policies required by Actuarial Guideline XXXVIII 8D	N/A	N/A	N/A	4/30	Company	A-J, L
	34	Actuarial Opinion	N/A	N/A	xxx	3/1	Company	A-J, L
	35	Actuarial Opinion on Separate Accounts Funding Guaranteed Minimum Benefit	N/A	N/A	xxx	3/1	Company	A-J, L
	36	Actuarial Opinion on Synthetic Guaranteed Investment Contracts	N/A	N/A	xxx	3/1	Company	A-J, L
	37	Actuarial Opinion on X-Factors	N/A	N/A	xxx	3/1	Company	A-J, L
	38	Actuarial Opinion required by Modified Guaranteed Annuity Model Regulation	N/A	N/A	xxx	3/1	Company	A-J, L
	39	Request for Life PBR Exemption (if applicable)	EO	EO	xxx	Commissioner 7/1 NAIC 8/15	Company	A-J, L
	40	Executive Summary of the PBR Actuarial Report	N/A	N/A	N/A	4/1	Company	A-J, L
	41	Life Summary of the PBR Actuarial Report	N/A	N/A	N/A	4/1	Company	A-J, L
	42	Variable Annuities Summary of the PBR Actuarial Report	N/A	N/A	N/A	4/1	Company	A-J, L
	43	PBR Actuarial Report (provide upon request)	N/A	N/A	N/A		Company	A-J, L
	44	Regulatory Asset Adequacy Issues Summary (send to Office of Insurance Evaluation of the Department of Insurance and Financial Services)	N/A	N/A	xxx	4/1	Company	A-J
	45	Reasonableness & Consistency of Assumptions Certification required by Actuarial Guideline XXXV	xxx	N/A	xxx	3/1, 5/15, 8/15, 11/15	Company	A-J, L

46	Reasonableness of Assumptions Certification required by Actuarial Guideline XXXV	xxx	N/A	xxx	3/1, 5/15, 8/15, 11/15	Company	A-J, L
47	Reasonableness & Consistency of Assumptions Cert. required by Actuarial Guideline XXXVI (Updated Average Market Value)	xxx	N/A	xxx	3/1, 5/15, 8/15, 11/15	Company	A-J, L
48	Reasonableness & Consistency of Assumptions Cert. required by Actuarial Guideline XXXVI (Updated Market Value)	xxx	N/A	xxx	3/1, 5/15, 8/15, 11/15	Company	A-J, L
49	Reasonableness of Assumptions Cert. for Implied Guaranteed Rate Method required by Actuarial Guideline XXXVI	xxx	N/A	xxx	3/1, 5/15, 8/15, 11/15	Company	A-J, L
50	RBC Certification required under C-3 Phase I	N/A	N/A	N/A	3/1	Company	A-J
51	RBC Certification required under C-3 Phase II	N/A	N/A	N/A	3/1	Company	A-J
52	Statement on non-guaranteed elements - Exhibit 5 Interrogatory #3	N/A	N/A	xxx	3/1	Company	A-J, L
53	Statement on participating/non-participating policies - Exhibit 5 Interrogatory #1 & 2	xxx	N/A	xxx	3/1	Company	A-J, L
	<b>III. ELECTRONIC FILING REQUIREMENTS</b>						
60	Annual Statement Electronic Filing	N/A	N/A	xxx	3/1	NAIC	A-J, L
61	March .PDF Filing	N/A	N/A	xxx	3/1	NAIC	A-J, L
62	Separate Accounts Electronic Filing	N/A	N/A	xxx	3/1	NAIC	A-J, L
63	Separate Accounts .PDF Filing	N/A	N/A	xxx	3/1	NAIC	A-J, L
64	Supplemental Electronic Filing	N/A	N/A	xxx	4/1	NAIC	A-J, L
65	Supplemental .PDF Filing	N/A	N/A	xxx	4/1	NAIC	A-J, L
66	Quarterly Electronic Filing	N/A	N/A	xxx	5/15, 8/15, 11/15	NAIC	A-J, L
67	Quarterly .PDF Filing	N/A	N/A	xxx	5/15, 8/15, 11/15	NAIC	A-J, L
68	June .PDF Filing	N/A	N/A	xxx	6/1	NAIC	A-J, L
	<b>IV. AUDIT/INTERNAL CONTROL RELATED REPORTS</b>						
81	Accountants Letter of Qualifications	N/A	N/A	N/A	6/1	Company	A-J, N
82	Audited Financial Reports	N/A	N/A	xxx	6/1	Company	A-J, N
83	Audited Financial Statements Exemption Affidavit	N/A	N/A	N/A	6/1	Company	A-J
84	Communication of Internal Control Related Matters Noted in Audit	N/A	N/A	xxx	8/1	Company	A-J, P
85	Independent CPA (change)	N/A	N/A	N/A	6/1	Company	A-J, N
86	Management's Report of Internal Control Over Financial Reporting	N/A	N/A	N/A	8/1	Company	A-J
87	Notification of Adverse Financial Condition	N/A	N/A	EO	SEE NOTE	Company	A-J, O
88	Request for Exemption to File	N/A	N/A	N/A	SEE NOTE	Company	A-J, Q
89	Relief from the five-year rotation requirement for lead audit partner	N/A	N/A	N/A	3/1	Company	A-J
90	Relief from the one-year cooling off period for independent CPA	N/A	N/A	N/A	3/1	Company	A-J
91	Relief from the Requirements for Audit Committees	N/A	N/A	N/A	3/1	Company	A-J
	<b>V. STATE REQUIRED FILINGS</b>						
101	Corporate Governance Annual Disclosure ***	N/A	0	N/A	SEE *** BELOW	Company	A-J
102	Filings Checklist (with Column 1 completed)	N/A	N/A			State	A-J
103	Form B-Holding Company Registration Statement	N/A	N/A	N/A	5/1	Company	A-J, R
104	Form F-Enterprise Risk Report (per Section 1325a of the Michigan Insurance Code) ****	N/A	N/A	N/A	5/1	Company	A-J, R
105	ORSA (This filing is intended to be submitted to the lead state if filed at the insurance group level. See Chapter 17 of the Michigan Insurance Code.) *****	N/A	0	N/A	SEE ***** BELOW	Company	A-J
106	Premium Tax	N/A	N/A		SEE NOTE	State	C
107	Signed Jurat	N/A	N/A	0	SEE NOTE	NAIC	K
108	Group Capital Calculation (File with lead state only)	N/A	N/A	N/A	5/1	Company	A-J, R
109	Accident and Sickness Insurance Advertising Certificate of Compliance per Admin Rule 500.668 – only applies to insurers writing disability insurance. Advertisement of Life Insurance and Annuities Certificate of Compliance per Admin Rule 500.1385. Submit via SERFF.	N/A	N/A	EO	3/1	Company	A-J
110	Annual State of total business on the form filed with the domiciliary regulator of the country of origin (include a copy in English)	N/A	N/A	EO	When available	Company	A-J

	111	Complaint and Grievance Summary for Health Carriers (File Via SERFF)	N/A	N/A	EO	4/15	State-FIS 0318	A-J
	112	Michigan Health Insurance Enrollment, Premiums and Losses (Companies should note that beginning with the 2015 reporting year, the FIS 0322 must be submitted electronically to DIFS. The submission website address, along with an authentication code and more detailed instructions, will be sent to the Statutory Statement Contact on or before March 1)	N/A	N/A	EO	4/1	State-FIS 0322	A-J

**\*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](http://www.naic.org/public_lead_state_report.htm). Michigan has adopted the NAIC Corporate Governance Annual Disclosure Model Act through Public Act 520 of 2018 effective January 1, 2020.**

**\*\*\*\*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](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](http://www.naic.org/public_lead_state_report.htm). ORSA filings are required in Michigan starting in 2018.**

APPENDIX I:

## QUALIFYING ASSET INSTRUCTIONS AND FORMS

Qualifying Assets Form Instructions..... 28 - 32

Qualifying Asset Forms:

Valuation of Section 411 Trusteed Assets under Section 901 – P&C, Life and A&H .... (FIS 0063)

Fraternal Benefit Society Qualifying Assets under 901 ..... (FIS 0079)

Life, Accident and Health Insurers Qualifying Assets under 901 ..... (FIS 0081)

Non-Insurance Entity Qualifying Assets under 901(1)..... (FIS 0082)

Listing of Companies for Which Reinsurance Credits are Allowed (See Appendix V)

## QUALIFYING ASSETS FORM INSTRUCTIONS

- FIS 0063** Valuation of Section 411 Trusteed Assets under Section 901 (Branch Operations of All Non-U.S. Property and Casualty, Life, Accident and Health Insurers Using Michigan as Port of Entry)
- FIS 0079** Fraternal Benefit Society Qualifying Assets under Section 901
- FIS 0081** Life, Accident and Health Insurers Qualifying Assets under Section 901
- FIS 0082** Non-Insurance Entity Qualifying Assets under Section 901(1)

**Note:** These qualifying asset forms immediately follow these instructions.

Please review Section 901 when completing the qualifying assets form to fully understand the provisions of this section. Section 901 can be viewed by clicking on this web site link: <http://legislature.mi.gov/doc.aspx?mcl-500-901>.

Compliance with Section 901(1) of the Michigan Insurance Code is the obligation of each domestic insurer. All domestic insurers must complete a qualifying assets form to determine compliance with Section 901(1). Review the qualifying asset forms listed above to determine which form is appropriate for the type of insurer.

U.S. Branches of Non-U.S. Insurers using Michigan as a port of entry must maintain assets in accordance with Section 431c of the Michigan Insurance Code. The trusteed assets shall be valued and limited in accordance with Section 901 of the Code. The branch must complete a qualifying assets form to determine compliance with Section 431c. Review the qualifying asset forms listed above to determine which form is appropriate for the type of insurer.

These instructions provide general guidance. Insurers must complete the appropriate form in compliance with the requirements of Chapter 9 of the Michigan Insurance Code. Return completed forms with required attachments to DIFS on or before the due date of March 1, 2023.

Companies must complete all pages and qualifying asset forms prepared for subsidiaries where value is reported on Lines 22 and 23 of the reporting entities' qualifying assets form. If a subsidiary is also a licensed insurer in Michigan, that insurer should submit its qualifying assets form separately from the parent's form.

Assets pledged as collateral by another entity in the holding company system should not be reported as qualifying assets under Section 901 of the Michigan Insurance Code.

**DO NOT USE LAST YEAR'S FORMS.** Blank forms follow these instructions. Blank forms may be photocopied as needed and are available on the DIFS website.

If you have questions about completion of qualifying asset forms, contact the Office of Insurance Evaluation at (517) 284-8762.

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### LINE 2 - MINIMUM CAPITAL AND SURPLUS (901)(1)

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The lesser of:

1. Minimum capital and surplus required by Sections 408 and 410.
2. \$1,000,000 for fraternal benefit society or \$7,000,000 for other insurers.

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### LINE 8 - AGENTS' BALANCES OR UNCOLLECTED PREMIUMS (901)(3)(d) and (e)

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This line is designed to report agents' balances and uncollected premiums as permitted in Sections 901(3)(d) and (e). Agents' balances and uncollected premiums included on annual statement page 2 may be reported on this line if they meet the following criteria:

1. Deferred premium receivable excluding credit life and credit accident and health premiums pursuant to Section 901(3)(d).

2. All other agents' balances or uncollected premiums (including deferred credit life and credit accident and health) pursuant to Section 901(3)(e) that are all of the following:
  - a. Receivable from an agent, agency, policyholder, or other person that does not have control of more than 10% of all the insurer's agents' balances or uncollected premiums;
  - b. Receivable from entities not affiliated with the insurer; and;
  - c. Receivable on policies with a December 2022 effective date to the extent offset by unearned premiums.

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**LINE 9 - REINSURANCE RECOVERABLE (901)(3)(a) or (f)**

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Include Reinsurance Recoverable reported on page 2 of the annual statement reduced by amounts due from authorized reinsurers that are more than 90 days overdue.

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**LINE 13a - 5% LIMITATION (901)(6)**

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Section 901(6) limits the value of an asset to 5% of the assets required by Section 901(1) (i.e., the sum of net liabilities and minimum capital and surplus). The 5% limitation applies to assets invested in, loaned to or receivable from one person or one group of affiliated persons except for affiliated companies complying with Section 901(1), mortgage-related securities issued by the Federal Home Loan Mortgage Corporation or the Federal National Mortgage Association, and obligations of the United States or any state if the principal and interest are fully guaranteed by the United States or any state.

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**LINE 13b - 2% LIMITATION (901)(2)(a)**

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Section 901(2)(a) limits the value of computers to 2% of the assets required by Section 901(1) (i.e., the sum of net liabilities and minimum capital and surplus).

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**LINE 13c - 20% LIMITATION (901)(2)(c), (901)(2)(f)**

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Section 901(2)(c) limits the value of real estate to 20% of the assets required by 901(1) (i.e., the sum of net liabilities and minimum capital and surplus). Section 901(2)(f) limits high yield, high risk obligations to 20% of the assets required by 901(1). Section 901(2)(f) defines "high yield, high risk obligations" as those obligations that are not in one of the top two numbered classifications of bonds reported in the insurer's annual financial statement.

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**LINE 14 – BONDS (901)(4), (6) and (7)**

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Bonds are allowable as follows:

1. Bonds of unaffiliated persons or companies are subject to the 5% limitation per investment in one entity except for those bonds specifically exempt from the restriction pursuant to Section 901(6). Report all Section 912, 914, 918, and 934 bonds at the statement value as directed by the NAIC Securities Valuation Office.
2. Bonds of non-insurance affiliates are allowed at market value if rated investment grade and are valued by the Securities Valuation Office (SVO) of the NAIC or a nationally recognized statistical rating agency listed in the SVO manual. Report all Section 912, 914, 918, and 934 bonds at the statement value as directed by the NAIC Securities Valuation Office.
3. Bonds of affiliated insurers are allowed without limitation if the affiliated insurer complies with Section 901(1). An annual statement and a completed qualifying assets form of the unauthorized insurer affiliate must be submitted to receive credit. Report all Section 912, 914, 918, and 934 bonds at the statement value as directed by the NAIC Securities Valuation Office.

4. Mortgage-backed securities backed by pools of residential mortgages are allowed if rated investment grade and valued by the Securities Valuation Office (SVO) of the NAIC or a nationally recognized statistical rating agency listed in the SVO manual subject to the 5% limitation of Section 901(6).

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**LINE 16 - MORTGAGE LOANS (901)(6) AND (7)**

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Mortgage loans on real estate are allowable at book value except:

1. Mortgage loans issued to unaffiliated persons or companies are subject to the 5% limitation per investment in one entity pursuant to Section 901(6).
2. Mortgage loans issued to non-insurance affiliated entities are not allowed.
3. Mortgages loans issued to affiliated insurers are allowed without limitation if the affiliated insurer complies with Section 901(1).
4. Mortgages that are in default (more than 90 days overdue or in the process of foreclosure) may be included at market value per Section 901(4) if a current independent appraisal of the valuation of the mortgage is included.

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**LINE 17 - REAL ESTATE (901)(2)(c), (4) and (6)**

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Exclude any real estate that is encumbered with prior liens that affect the salability of the asset to a material extent per Section 901(2)(c). All real estate is subject to a 5% limitation per investment in one entity pursuant to Section 901(6). The reported value of real estate acquired by foreclosure shall not exceed the actual realizable value as certified within the past twelve months by a qualified appraiser.

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**LINE 18 - UNAFFILIATED LOANS OR RECEIVABLES (901)(6)**

---

Amounts loaned to, receivable from or deposited with unaffiliated persons or companies are generally allowed, subject to the 5% limitation per investment in one entity, provided that a detailed breakdown by entity and amount is attached to the Qualifying Assets Form. *FEDERAL INCOME TAX RECOVERABLE IS NOT ALLOWED AS A QUALIFYING ASSET*. The following are allowed:

1. Derivative instruments may also be included on this line as long as they comply with Section 943 and sufficient detail is provided to confirm compliance with Section 943.
2. Receivables due from broker/dealers may be included without limitation provided the amount is collected within 5 business days from the date of disposition.

---

**LINE 19 - AFFILIATED LOANS OR RECEIVABLES (901)(6) and (7)**

---

Amounts loaned to, receivable from, or deposited with a person or entity that is, directly or indirectly, owned or controlled by the insurer or that, directly or indirectly, owns, controls, or is affiliated with the insurer are allowable as follows:

1. Amounts receivable from, affiliated insurers that are not more than 90 days past due as long as the insurer complies with Section 901(1). (Submit a listing with a breakdown by company and amount. Include an annual statement and a completed qualifying assets form for each unauthorized affiliate).
2. Amounts invested in an affiliated publicly traded investment company that is registered and regulated under the Investment Company Act of 1940. Equity interests in a publicly traded investment company must be entered on Line 23 - Equity in Wholly Owned Non-Insurance Affiliates.
3. Amounts loaned to non-insurance entities are not allowed.

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**LINE 22 - EQUITY IN AFFILIATED INSURERS (901)(7)(e)**

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The amount reported on this line is determined by completing the appropriate Qualifying Assets Form for each affiliated insurer. Include the Excess Amount of Qualifying Assets over Amount of Net Liabilities (line 27 or 31 of qualifying assets form) for each insurance affiliate to the extent permitted by Section 901(7)(e). To receive credit the company must attach a completed qualifying assets form for each affiliate reported on this line.

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**LINE 23 - EQUITY IN WHOLLY OWNED NON-INSURANCE AFFILIATES (901)(7)(c)**

---

Complete the Non-Insurance Entity Qualifying Assets form (FIS 0082) for each non-insurance affiliate that is owned solely by the insurer. Include the Excess Amount of Qualifying Assets over Amount of Net Liabilities for each non-insurance affiliate to the extent permitted by Section 901(7)(c). To receive credit, the Securities Valuation Office must value the affiliate. The amount reported on this line is the lesser of, the Excess Amount of Qualifying Assets over Amount of Net Liabilities, or the Securities Valuation Office value.

---

**LINE 28 - ASSETS CONSIDERED AS QUALIFYING UNDER SECTION 901(2)(e) (ASSETS NOT DEFINED IN CHAPTER 9)**

---

Assets not otherwise defined in Chapter 9 may be included as qualifying assets pursuant to Section 901(2)(e) as long as **all** of the following are met:

1. The assets are rated investment grade by the Securities Valuation Office (SVO) of the NAIC or a nationally recognized statistical rating agency listed in the SVO manual; **AND**,
2. Sufficient detail is submitted with the qualifying assets form of the insurer to confirm that the assets reported on this line complies with item 1.

**NOTE:** Assets that are specifically excluded under Section 901 are defined in Chapter 9 and are therefore not permitted on this line.

Detail is required for each asset reported on this line and must include the description of the asset, the amount, the type of asset, the investment rating and confirmation of the investment rating. The assets reported on this line remain subject to the approval of the Director.

---

**LINE 29 - ASSETS CONSIDERED AS QUALIFYING UNDER SECTION 901(7)(d) (EQUITY INVESTMENTS IN PARTIALLY OWNED NON-INSURANCE AFFILIATES) AND SECTION 901(7)(e) (SURPLUS NOTES)**

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Amounts invested (i.e., stock investments) in a non-insurance affiliate that is not owned solely by the insurer may be included pursuant to Section 901(7)(d) only if **all** of the following are met:

1. The non-insurance affiliate is publicly traded; **AND**,
2. The non-insurance affiliate is valued by the Securities Valuation Office (SVO) of the NAIC or a nationally recognized statistical rating agency listed in the SVO manual; **AND**,
3. An independent audited financial statement for the non-insurance affiliate is submitted with the Qualifying Assets form of the insurer; **AND**,
4. The non-insurance affiliate holds an Excess Amount of Qualifying Assets over Amount of Net Liabilities (determined by completing the Non-insurance Entity Qualifying Assets form - FIS 0082), prorated to reflect the equity interest of the insurer; **AND**,
5. A Non-Insurance Entity Qualifying Assets form (FIS 0082) is submitted with the Qualifying Assets form



of the insurer for each entity reported on this line; **AND**,

6. Sufficient detail is submitted with the qualifying assets form of the insurer to confirm that the assets reported on this line comply with the above.

Surplus notes may be included pursuant to Section 901(7)(e), subject to the Director's approval.

Detail is required for each asset reported on this line and must include the description of the asset, the amount, the type of asset, the investment rating and confirmation of the investment rating. The assets reported on this line remain subject to the approval of the Director.

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**LINE 30 - ASSETS CONSIDERED AS QUALIFYING UNDER SECTION 901(5) (ASSETS EQUIVALENT TO BUT NOT SPECIFICALLY DESCRIBED IN CHAPTER 9)**

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The Director may permit other assets not specifically described in Section 901 as qualifying assets pursuant to Section 901(5) as long as **all** of the following are met:

1. The assets are financially equivalent to those assets described in Section 901 through Section 947; **AND**,
2. The asset is publicly traded or readily marketable; **AND**,
3. The assets are rated investment grade by the Securities Valuation Office (SVO) of the NAIC or a nationally recognized statistical rating agency listed in the SVO manual or the property is not valued at more than the actual realizable value as certified within the past 2 years by a qualified appraiser; **AND**,
4. Sufficient detail is submitted with the qualifying assets form of the insurer to confirm that the assets reported on this line comply with items 1 through 3 above.

Detail is required for each asset reported on this line and must include the description of the asset, the amount, the type of asset, the investment rating and confirmation of the investment rating. The assets reported on this line remain subject to the approval of the Director.

# Valuation of Section 411 Trusteed Assets Under Section 901

Read instructions before completing form

<b>Submission Required By:</b> BRANCH OPERATIONS OF ALL NON-U.S. PROPERTY AND CASUALTY, LIFE, ACCIDENT AND HEALTH INSURERS using Michigan as Port of Entry	2024
	DUE 3/1/25

Name of Company	NAIC Group no.	NAIC Company code	Name of parent company (if licensed in Michigan)
-----------------	----------------	-------------------	--

- |   |     |             |
|---|-----|-------------|
| 1. <b>Total Adjusted Liabilities</b> (from trustee surplus statement: page TSS-3, line 11).....   | 1.  |             |
| 2. <b>Minimum Capital and Surplus</b> required by Section 901(1).....   | 2.  | \$7,000,000 |
| 3. Add lines 1 and 2.....   | 3.  |             |
| 4. (Line 4 intentionally left blank)  |     |             |
| 5. <b>Aggregate Write-ins</b> (from trustee surplus statement, page TSS-3, line 9) only include amounts due from reinsurers unauthorized in Michigan that are not properly secured in compliance with Section 1105 and any balances more than 90 days overdue.....  | 5.  |             |
| 6. Add lines 3 and 5.....   | 6.  |             |
| 7. (Line 7 intentionally left blank)  |     |             |
| 8. (Line 8 intentionally left blank)  |     |             |
| 9. (Line 9 intentionally left blank)  |     |             |
| 10. <b>Amounts Receivable</b> in compliance with Section 901(3)(b) (only to the extent the receivable is offset by a liability included above). A listing with a breakdown by company and amount must be attached to this form.....   | 10. |             |
| 11. (Line 11 intentionally left blank)  |     |             |
| 12. <b>Net Liabilities</b> (subtract line 10 from line 6) .....   | 12. |             |
| 13. a. <b>5% Limitation</b> per Section 901(6) (multiply line 12 by 5%).....  | 13a |             |
| (Line 13.b. intentionally left blank)   |     |             |
| c. <b>20% Limitation</b> per Section 901(2)(c) and (f) (multiply line 12 by 20%).....   | 13c |             |
| 14. <b>Bonds</b> in compliance with Section 901(2)(f), 901(4), (6) and (7). ( <b>Note:</b> may be subject to 5% limit; see line 13a of this form. Subject to 20% limit for obligations not rated class 1 or 2; see line 13c of this form) .....   | 14. |             |
| 15. <b>Preferred and Common Stocks</b> at market value, in compliance with Section 901(6) and (7). EXCLUDE the value of affiliated stocks ( <b>Note:</b> subject to 5% limit; see line 13a of this form).....   | 15. |             |
| 16. <b>Mortgage Loans</b> on Real Estate at book value in compliance with Section 901(6) and (7). ( <b>Note:</b> may be subject to 5% limit; see line 13a of this form).....  | 16. |             |
| 17. <b>Real Estate</b> (in U.S.A.) at book value in compliance with Section 901(2)(c), (4) and (6). ( <b>Note:</b> may be subject to 5% limit and 20% limit; see lines 13a and 13c of this form).....   | 17. |             |
| 18. <b>Unaffiliated Loans or Receivables:</b> Amounts loaned to, receivable from, or deposited with unaffiliated entities in compliance with Section 901(6). A listing with a breakdown by company and amount must be attached to this form. ( <b>Note:</b> subject to 5% limit; see line 13a of this form) ..... | 18. |             |
| 19. (Line 19 intentionally left blank)  |     |             |

- 20. **Cash and Bank Deposits** (subject to the 5% limitation on any amount per entity in excess of amounts fully guaranteed by the United States or any state; see line 13a of this form) ..... 20. \_\_\_\_\_
  - 21. **Short-Term Investments** at statement value (**Note:** may be subject to 5% limit; see line 13a of this form)..... 21. \_\_\_\_\_
  - 22. **Equity in Affiliated Insurers:** Excess Amount of Qualifying Assets over Amount of Net Liabilities of affiliated insurers in compliance with Section 901(6) and (7). **Attach** a complete listing showing companies and amount.  
**Attach** an audited financial statement and an annual statement for each affiliate not licensed in Michigan ..... 22. \_\_\_\_\_
  - 23. **Equity in Wholly-owned Noninsurance Affiliates:** Excess Amount of Qualifying Assets over Amount of Net Liabilities of wholly- owned noninsurers in compliance with Section 901(7)(c). **Attach** a complete listing showing companies and amount.  
**Attach** an audited financial statement and a completed Non-Insurance Entity Qualifying Assets form (FIS 0082) ..... 23. \_\_\_\_\_
  - 24. (Line 24 intentionally left blank)
  - 25. **Income Due and Accrued** (only include income due and accrued on assets reported on line 14 through 24 of this form)..... 25. \_\_\_\_\_
  - 26. Total Amount of Section 411 Trusteed Assets Qualifying under Section 901 (add lines 14 through 25)..... 26. \_\_\_\_\_
  - 27. Excess Amount of Section 411 Trusteed Assets Qualifying under Section 901 over Amount of Total Adjusted Liabilities (subtract line 12 from line 26). If amount is positive, no further work is necessary. If amount is negative, continue below ..... 27. \_\_\_\_\_
- Other Trusteed Assets not included above; subject to approval by the Director:**
- 28. **Assets considered as qualifying under Section 901(2)(e).** (Detail required) ..... 28. \_\_\_\_\_
  - 29. **Assets considered as qualifying under Section 901(7)(d) and (e).** (Detail required)..... 29. \_\_\_\_\_
  - 30. **Assets considered as qualifying under Section 901(5).** (Detail required) ..... 30. \_\_\_\_\_
  - 31. The sum of lines 27 through 30 ..... 31. \_\_\_\_\_

CERTIFICATION

I certify that I am an officer of the company named in this report and that I have authority to prepare and file this report. I have examined this report thoroughly, and it is true, complete and correct to the best of my knowledge and belief.

Signature of Company Officer	Date signed	NAIC Company code
Company Officer's name and title typed or printed	Person and phone no. to contact regarding this report:	

P.A. 218 of 1956 as amended requires submission by stated insurers. Failure to file correctly may result in an action against insurer's certificate of authority, financial penalties or other compliance action.



**Michigan Department of Insurance and Financial Services**

DIFS is an equal opportunity employer/program.  
Auxiliary aids, services and other reasonable accommodations are available upon request to individuals with disabilities.  
Visit DIFS online at: [www.michigan.gov/difs](http://www.michigan.gov/difs) Phone DIFS toll-free at: 877-999-6442

# Fraternal Benefit Society Qualifying Assets Under Section 901

Read instructions before completing form.

Submission Required By:  
All Domestic Fraternal Benefit  
Societies/Associations

2024

Due 3/1/25

Company name | NAIC Co. Code / Group No. | Name of parent company (if licensed in Michigan)

- 1. **Liabilities** (from annual statement: page 3, line 26) ..... 1. \_\_\_\_\_
- 2. **Minimum Capital and Surplus** required by Section 901(1) ..... 2. \$1,000,000
- 3. Add lines 1 and 2 ..... 3. \_\_\_\_\_
- (Lines 4 through 6 intentionally left blank)
- 7. **Certificate Loans** in compliance with Section 901(3)(b) (from annual statement: page 2, line 6) ..... 7. \_\_\_\_\_
- 8. **Agents' Balances or Uncollected Premiums** (Section 901(3)(d) and (e))
  - 8a. Total premiums (from annual statement: page 2, add lines 15.1, 15.2 and 15.3) ..... 8a. \_\_\_\_\_
  - 8b. Amount of insurance premiums included on line 8a that are deferred and not yet due ..... 8b. \_\_\_\_\_
  - 8c. Subtract line 8b from line 8a ..... 8c. \_\_\_\_\_
  - 8d. Total amount from line 8c receivable from an agent, agency, policyholder or other person that DOES NOT control more than 10% of all the insurer's agents' balances, and is NOT affiliated with the insurer, on policies with December 2023 effective dates to the extent that the amounts are offset by unearned premium reserves on the same policies ..... 8d. \_\_\_\_\_
- TOTAL: Add lines 8b and 8d ..... 8. \_\_\_\_\_
- 9. **Reinsurance Recoverable** in compliance with Sections 901(3)(a) or (f) (from annual statement: page 2, lines 16.1, 16.3 and as a write-in asset). A listing with breakdown by reinsurer and amount must be attached to this form for line 16.3 and write-in recoverables ..... 9. \_\_\_\_\_
- 10. **Amounts Receivable** in compliance with Section 901(3)(f) (only to the extent the receivable is offset by a liability included above). A listing with a breakdown by company and amount must be attached to this form ..... 10. \_\_\_\_\_
- 11. Add lines 7 through 10 ..... 11. \_\_\_\_\_
- 12. **Net Liabilities** (subtract line 11 from line 3) ..... 12. \_\_\_\_\_
- 13 a. **5% Limitation** per Section 901(6) (multiply line 12 by 5%) ..... 13a. \_\_\_\_\_
- b. **2% Limitation** per Section 901(2)(a) (multiply line 12 by 2%) ..... 13b. \_\_\_\_\_
- c. **20% Limitation** per Section 901(2)(c) and (f) (multiply line 12 by 20%) ..... 13c. \_\_\_\_\_
- 14. **Bonds** in compliance with Section 901(2)(f), 901(4), (6) and (7). (**Note:** may be subject to 5% limit; see line 13a of this form. Subject to 20% limit for obligations not rated class 1 or 2; see line 13c of this form) ..... 14. \_\_\_\_\_
- 15. **Preferred and Common Stocks** at market value, in compliance with Section 901(6) and (7). EXCLUDE the value of affiliated stocks (**Note:** subject to 5% limit; see line 13a of this form) ..... 15. \_\_\_\_\_
- 16. **Mortgage Loans on Real Estate** at book value in compliance with Section 901(6) and (7). (**Note:** may be subject to 5% limit; see line 13a of this form) ..... 16. \_\_\_\_\_
- 17. **Real Estate** (in U.S.A.) at book value in compliance with Section 901(2)(c), (4) and (6). (**Note:** subject to 5% limit, and 20% limit; see lines 13a and 13c of this form) ..... 17. \_\_\_\_\_

- 18. **Unaffiliated Loans or Receivables:** Amounts loaned to, receivable from, or deposited with unaffiliated entities in compliance with Section 901(6). A listing with a breakdown by company and amount must be attached to this form (**Note:** subject to 5% limit; see line 13a of this form) ..... 18. \_\_\_\_\_
  - 19. **Affiliated Loans or Receivables:** Amounts loaned to, receivable from, or deposited with affiliated insurers in compliance with Section 901(6) and (7). A listing with a breakdown by company and amount must be attached to this form ..... 19. \_\_\_\_\_
  - 20. **Cash and Bank Deposits** (**Note:** subject to the 5% limitation on any amount per entity in excess of amounts fully guaranteed by the United States or any state; see line 13a of this form) ..... 20. \_\_\_\_\_
  - 21. **Short-Term Investments** at statement value. (**Note:** may be subject to 5% limit; see line 13a of this form)..... 21. \_\_\_\_\_
  - 22. **Equity in Affiliated Insurers:** Excess Amount of Qualifying Assets over Amount of Net Liabilities of affiliated insurers in compliance with Section 901(6) and (7). **Attach** a complete listing showing companies and amount.  
**Attach** an audited financial statement and an annual statement for each affiliate not licensed in Michigan..... 22. \_\_\_\_\_
  - 23. **Equity in Wholly-owned Non-insurance Affiliates:** Excess Amount of Qualifying Assets over Amount of Net Liabilities of wholly- owned non-insurers in compliance with Section 901(7)(c). **Attach** a complete listing showing companies and amount.  
**Attach** an audited financial statement and a completed Non-Insurance Entity Qualifying Assets form (FIS 0082) ..... 23. \_\_\_\_\_
  - 24. **Value of Computers** in compliance with Section 901(2)(a). The value shall not exceed the original cost amortized over 3 or less years. (**Note:** Subject to 2% limit; see line 13b of this form)..... 24. \_\_\_\_\_
  - 25. **Income Due and Accrued** (only include income due and accrued on assets reported on lines 14 through 24 of this form)..... 25. \_\_\_\_\_
  - 26. Total Amount of Qualifying Assets (add lines 14 through 25) ..... 26. \_\_\_\_\_
  - 27. Excess Amount of Qualifying Assets over Amount of Net Liabilities (subtract line 12 from line 26). If amount is positive, no further work is necessary. If amount is negative, continue below ..... 27. \_\_\_\_\_
- Other assets not included above, subject to approval by the Director:**
- 28. **Assets considered as qualifying under Section 901(2)(e)** (Detail Required) ..... 28. \_\_\_\_\_
  - 29. **Assets considered as qualifying under Section 901(7)(d) and (e)** (Detail Required) ..... 29. \_\_\_\_\_
  - 30. **Assets considered as qualifying under Section 901(5)** (Detail Required)..... 30. \_\_\_\_\_
  - 31. Add lines 27 through 30..... 31. \_\_\_\_\_

Certification: I certify that I am an officer of the society named in this report and that I have authority to prepare and file this report. I have examined this report thoroughly and it is true, complete and correct to the best of my knowledge and belief.

Signature of Company Officer	Date signed	NAIC Company Code
Company Officer's name and title typed or printed	Contact person (regarding this report) and phone number	

P.A. 218 of 1956 as amended requires submission by insurers stated on page 1. Failure to file correctly may result in an action against insurer's certificate of authority, financial penalties or other compliance action.

# Life, Accident and Health Insurers Qualifying Assets Under Section 901

Read instructions before completing form.

Submission Required By:  
All Domestic Life, Accident and Health  
Insurers

2024

Due 3/1/25

Company name | NAIC Co. Code / Group No. | Name of parent company (if licensed in Michigan)

1. **Liabilities** excluding separate accounts (from annual statement: page 3, line 26) ..... 1. \_\_\_\_\_
2. **Minimum Capital and Surplus** required by Section 901(1) ..... 2. \$7,000,000
3. Add lines 1 and 2 ..... 3. \_\_\_\_\_
- (Lines 4 and 5 intentionally left blank)
6. **Policy Loans** in compliance with Section 901(3)(b) (from annual statement: page 2, line 6) ..... 6. \_\_\_\_\_
7. **Premium Notes** to the extent they are secured by a letter of credit, security trust funds or unearned premium reserves per Section (901)(3)(c) (from annual statement: page 2, line 6) ..... 7. \_\_\_\_\_
8. **Agents' Balances or Uncollected Premiums** (Section 901(3)(d) and (e))
  - 8a. Total premiums (from annual statement: page 2, add lines 15.1, 15.2 and 15.3) ..... 8a. \_\_\_\_\_
  - 8b. Amount of insurance premiums and annuity considerations included on line 8a that are deferred and not yet due ... 8b. \_\_\_\_\_
  - 8c. Total credit Life, A&H premiums included in 8b ..... 8c. \_\_\_\_\_
  - 8d. Subtract line 8c from line 8b ..... 8d. \_\_\_\_\_
  - 8e. Subtract line 8d from line 8a ..... 8e. \_\_\_\_\_
  - 8f. Total amount from line 8e receivable from an agent, agency, policyholder or other person that DOES NOT control more than 10% of all the insurer's agents' balances, and is NOT affiliated with the insurer, on policies with December 2023 effective dates to the extent that the amounts are offset by unearned premium reserves on the same policies ..... 8f. \_\_\_\_\_
- TOTAL: Add lines 8d and 8f ..... 8. \_\_\_\_\_
9. **Reinsurance Recoverable** in compliance with Sections 901(3)(a) or (f) (from annual statement: page 2, lines 16.1, 16.3 and as a write-in asset). A listing with a breakdown by reinsurer and amount must be attached to this form for line 16.3 and write-in recoverables ..... 9. \_\_\_\_\_
10. **Amounts Receivable** in compliance with Section 901(3)(f) (only to the extent the receivable is offset by a liability included above). A listing with a breakdown by company and amount must be attached to this form ..... 10. \_\_\_\_\_
11. Add lines 6 through 10 ..... 11. \_\_\_\_\_
12. **Net Liabilities** (subtract line 11 from line 3) ..... 12. \_\_\_\_\_
- 13 a. **5% Limitation** per Section 901(6) (multiply line 12 by 5%) ..... 13a. \_\_\_\_\_
- b. **2% Limitation** per Section 901(2)(a) (multiply line 12 by 2%) ..... 13b. \_\_\_\_\_
- c. **20% Limitation** per Section 901(2)(c) and (f) (multiply line 12 by 20%) ..... 13c. \_\_\_\_\_
14. **Bonds** in compliance with Section 901(2)(f), 901(4), (6) and (7). (**Note:** may be subject to 5% limit; see line 13a of this form. Subject to 20% limit for obligations not rated class 1 or 2; see line 13c of this form) ..... 14. \_\_\_\_\_
15. **Preferred and Common Stocks** at market value, in compliance with Section 901(6) and (7). EXCLUDE the value of affiliated stocks (**Note:** subject to 5% limit; see line 13a of this form) ..... 15. \_\_\_\_\_

- 16. **Mortgage Loans on Real Estate** at book value in compliance with Section 901(6) and (7). (**Note:** may be subject to 5% limit; see line 13a of this form)..... 16. \_\_\_\_\_
- 17. **Real Estate** (in U.S.A.) at book value in compliance with Section 901(2)(c), (4) and (6). (**Note:** subject to 5% limit, and 20% limit; see lines 13a and 13c of this form)..... 17. \_\_\_\_\_
- 18. **Unaffiliated Loans or Receivables:** Amounts loaned to, receivable from, or deposited with unaffiliated entities in compliance with Section 901(6). A listing with a breakdown by company and amount must be attached to this form (**Note:** subject to 5% limit; see line 13a of this form) ..... 18. \_\_\_\_\_
- 19. **Affiliated Loans or Receivables:** Amounts loaned to, receivable from, or deposited with affiliated insurers in compliance with Section 901(6) and (7). A listing with a breakdown by company and amount must be attached to this form ..... 19. \_\_\_\_\_
- 20. **Cash and Bank Deposits** (**Note:** subject to the 5% limitation on any amount per entity in excess of amounts fully guaranteed by the United States or any state; see line 13a of this form) ..... 20. \_\_\_\_\_
- 21. **Short-Term Investments** at statement value. (**Note:** may be subject to 5% limit; see line 13a of this form)..... 21. \_\_\_\_\_
- 22. **Equity in Affiliated Insurers:** Excess Amount of Qualifying Assets over Amount of Net Liabilities of affiliated insurers in compliance with Section 901(6) and (7). **Attach** a complete listing showing companies and amount.  
**Attach** an audited financial statement and an annual statement for each affiliate not licensed in Michigan..... 22. \_\_\_\_\_
- 23. **Equity in Wholly-owned Non-insurance Affiliates:** Excess Amount of Qualifying Assets over Amount of Net Liabilities of wholly- owned non-insurers in compliance with Section 901(7)(c). **Attach** a complete listing showing companies and amount.  
**Attach** an audited financial statement and a completed Non-Insurance Entity Qualifying Assets form (FIS 0082) ..... 23. \_\_\_\_\_
- 24. **Value of Computers** in compliance with Section 901(2)(a). The value shall not exceed the original cost amortized over 3 or less years. (**Note:** Subject to 2% limit; see line 13b of this form)..... 24. \_\_\_\_\_
- 25. **Income Due and Accrued** (only include income due and accrued on assets reported on lines 14 through 24 of this form)..... 25. \_\_\_\_\_
- 26. Total Amount of Qualifying Assets (add lines 14 through 25) ..... 26. \_\_\_\_\_
- 27. Excess Amount of Qualifying Assets over Amount of Net Liabilities (subtract line 12 from line 26). If amount is positive, no further work is necessary. If amount is negative, continue below ..... 27. \_\_\_\_\_
- Other assets not included above, subject to approval by the Director:**
- 28. **Assets considered as qualifying under Section 901(2)(e)** (Detail Required) ..... 28. \_\_\_\_\_
- 29. **Assets considered as qualifying under Section 901(7)(d) and (e)** (Detail Required) ..... 29. \_\_\_\_\_
- 30. **Assets considered as qualifying under Section 901(5)** (Detail Required)..... 30. \_\_\_\_\_
- 31. Add lines 27 through 30..... 31. \_\_\_\_\_

Certification: I certify that I am an officer of the company named in this report and that I have authority to prepare and file this report. I have examined this report thoroughly and it is true, complete and correct to the best of my knowledge and belief.

Signature of Company Officer	Date signed	NAIC Company Code
Company Officer's name and title typed or printed	Contact person (regarding this report) and phone number	

P.A. 218 of 1956 as amended requires submission by insurers stated on page 1. Failure to file correctly may result in an action against insurer's certificate of authority, financial penalties or other compliance action.

COMPLETE FOR EACH  
SOLELY OWNED NON-  
INSURANCE AFFILIATE

2024

DUE 3/1/25

**Non-Insurance Entity  
Qualifying Assets Under Section 901(1)**

*Read instructions before completing form*

**Note: Refer to Instructions for FIS 0076, 0079 or 0081 for specific instructions on each type of asset**

Name of Company	NAIC Group number	NAIC Company code
-----------------	-------------------	-------------------

Name of Parent Company
------------------------

- 1. **Liabilities** ..... 1. \_\_\_\_\_  
 (Lines 2 through 12 intentionally left blank)
  
- 13. a. 5% Limitation per Section 901(6) (multiply line 1 by 5%) ..... 13a. \_\_\_\_\_  
 b. 2% Limitation per Section 901(2)(a) (multiply line 1 by 2%) ..... 13b. \_\_\_\_\_  
 c. 20% Limitation per Section 901(2)(c) and (f) (multiply line 1 by 20%) ..... 13c. \_\_\_\_\_
  
- 14. **Bonds in compliance with Section 901(2)(f), 901(4), (6) and (7). (Note: may be subject to 5% limit; see line 13a of this form. Subject to 20% limit for obligations not rated class 1 or 2; see line 13c of this form)** ..... 14. \_\_\_\_\_
  
- 15. **Preferred and Common Stocks at market value, in compliance with Section 901(6) and (7). (Note: subject to 5% limit; see line 13a of this form). EXCLUDE the value of affiliated stocks** ..... 15. \_\_\_\_\_
  
- 16. **Mortgage Loans on Real Estate at book value in compliance with Section 901(6) and (7). (Note: may be subject to 5% limit; see line 13a of this form)** ..... 16. \_\_\_\_\_
  
- 17. **Real Estate (in U.S.A.) at book value in compliance with Section 901(2)(c), (4) and (6). (Note: subject to 5% limit, and 20% limit; see lines 13a and 13c of this form)** ..... 17. \_\_\_\_\_
  
- 18. **Unaffiliated Loans or Receivables: Amounts loaned to, receivable from, or deposited with unaffiliated entities in compliance with Section 901(6). A listing with a breakdown by company and amount must be attached to this form. (Note: subject to 5% limit; see line 13a of this form)** ..... 18. \_\_\_\_\_
  
- 19. **Affiliated Loans or Receivables: Amounts loaned to, receivable from, or deposited with affiliated insurers in compliance with Section 901(6) and (7). A listing with a breakdown by company and amount must be attached to this form** ..... 19. \_\_\_\_\_
  
- 20. **Cash and Bank Deposits (subject to the 5% limitation on any amount per entity in excess of amounts fully guaranteed by the United States or any state; see line 13a of this form)** ..... 20. \_\_\_\_\_
  
- 21. **Short-Term Investments at statement value. (Note: may be subject to 5% limit; see line 13a of this form)** ..... 21. \_\_\_\_\_
  
- 22. **Equity in Affiliated Insurers: Excess Amount of Qualifying Assets over Amount of Net Liabilities of affiliated insurers in compliance with Section 901(6) and (7). Attach a complete listing showing companies and amount. Attach an audited financial statement and an annual statement for each affiliate not licensed in Michigan** ..... 22. \_\_\_\_\_
  
- 23. **Equity in Wholly-owned Noninsurance Affiliates: Excess Amount of Qualifying Assets over Amount of Net Liabilities of wholly-owned noninsurers in compliance with Section 901(7)(c). Attach a complete listing showing companies and amount. Attach an audited financial statement and a completed Non-Insurance Entity Qualifying Assets form (FIS 0082)** ..... 23. \_\_\_\_\_
  
- 24. **Value of Computers in compliance with Section 901(2)(a). The value shall not exceed the original cost amortized over 3 or less years. (Note: Subject to 2% limit; see line 13b of this form)** ..... 24. \_\_\_\_\_
  
- 25. **Income Due and Accrued (only include income due and accrued on assets reported on lines 14 through 24 of this form)** ..... 25. \_\_\_\_\_



26. **Total Amount of Qualifying Assets (add lines 14 through 25)**..... 26. \_\_\_\_\_
27. **Excess Amount of Qualifying Assets over Amount of Net Liabilities (subtract line 1 from line 26). If amount is positive, no further work is necessary. If amount is negative, continue below**..... 27. \_\_\_\_\_
- Other assets not included above, subject to approval by the Director:**
28. **Assets considered as qualifying under Section 901(2)(e) (Detail Required)**..... 28. \_\_\_\_\_
29. **Assets considered as qualifying under Section 901(7)(d) and (e) (Detail Required)**..... 29. \_\_\_\_\_
30. **Assets considered as qualifying under Section 901(5) (Detail Required)** ..... 30. \_\_\_\_\_
- 31 **The sum of lines 27 through 30**..... 31 \_\_\_\_\_

CERTIFICATION

I certify that I am an officer of the company named in this report and that I have authority to prepare and file this report. I have examined this report thoroughly, and it is true, complete and correct to the best of my knowledge and belief.

Signature of Company Officer	Date signed	NAIC Company code
Company Officer's name and title typed or printed	Person and phone no. to contact regarding this report:	

P.A. 218 of 1956 as amended requires submission by stated insurers. Failure to file correctly may result in an action against insurer's certificate of authority, financial penalties or other compliance action



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*APPENDIX II:*

**OTHER FORMS**

Other Forms:

Complaint and Grievance Summary for Health Carriers ..... (FIS 0318)

**Complaint and Grievance Summary**

Complete each section based on complaints/grievances resolved (closed) during the calendar year.

**File via SERFF:**

**Commercial Insurers use:**

- TOI H21 Health Other **and** SubTOI H21.000 Health-other.

**HMO or AFDS use:**

- TOI HOrg03 Health Other **and** SubTOI HOrg03.000 Health-other.

**All must use:** Filing Type “FIS 0318 Complaint and Grievance Summary Form”

Filing is <b>REQUIRED</b> for: Commercial insurers, HMOs, and AFDSs licensed for Health whether they write it or not.	<b>DUE</b> April 15, 2025 for 2024 calendar year
--	--

<b>Company Name:</b>	<b>NAIC Group Number:</b>	<b>Select Company Type</b>
		<input type="checkbox"/> Commercial Insurer <input type="checkbox"/> HMO or AFDS

**Internal Reviews:** Instructions for Table 1:

- Provide the number of Complaints/Grievances by decision type for each step, including Expedited Reviews. If the company has only one step for Standard reviews, enter NA under Step 2.
- Compile data based on the full calendar year.
- Use Adverse Determination as defined in [MCL 500.1903\(a\)](#) and Grievance as defined in [MCL 500.2213\(5\)\(b\)](#).

<b>Table 1</b>	<b>Complaints/Grievances NOT resulting from Adverse Determination or Denial of Service</b>	<b>Upheld</b>	<b>Overtured</b>	<b>Compromise Resolution</b>	<b>Total Decisions</b>
	Step* 1				
	Step 2				
	<b>Complaints/Grievances resulting from Adverse Determination or Denial of Service</b>	<b>Upheld</b>	<b>Overtured</b>	<b>Compromise Resolution</b>	<b>Total Decisions</b>
	Step* 1				
	Step 2				
	Expedited				

\*Step, as used in Table 1, is described in [MCL 500.2213\(1\)\(k\)](#)

**Internal Reviews exceeding the time allowed by statute:** [\(MCL 500.2213\(1\)\(k\)\)](#)

Number of Complaints/Grievances per category **NOT** completed within the statutory time.

\_\_\_\_\_ Pre-service: (Maximum 30 days)

\_\_\_\_\_ Post-service (Maximum 60 days)

**For each Internal Complaint/Grievance NOT completed within the statutory time, include a report containing the following:** (Note-this report will be public. **DO NOT** include any personally identifiable information)

1. Whether Complaint/Grievance was pre- or post-service.
2. Company’s Complaint/Grievance identification number.
3. Date of final decision.
4. Number of calendar days beyond statutory allowance. (Do not include any tolled days.)
5. Reason the time limit was exceeded.
6. For each reason listed in item 5 provide a description of the steps being taken to resolve the issue.

In addition to the above, please provide DIFS with a brief description of any trends, including increases or decreases in either number or type of Complaints/Grievances.

**Certification:**

I certify that I am an officer of the company named in this report, and that I have authority to prepare and file this report. I have examined this report thoroughly, and it is true, complete and correct to the best of my knowledge and belief.

Signature:		Date:	Preferred Contact Person: (if different)
Name and Title: (printed or typed)			Phone:
Phone:	E-mail:		E-mail:

[MCL 500.2213\(1\)\(g\)](#) requires submission of this form by **ALL** licensed health carriers. Failure to properly complete and submit this form by April 15, may result in compliance action, or revocation of the company’s authority to do business in Michigan.

For questions regarding this form please contact the Office of Rates and Forms at 517-284-8715.

**All forms must be filed via SERFF under the filing type:  
 “FIS 0318 Complaint and Grievance Summary Form”**

**Commercial Insurers use:**

- TOI H21 Health Other **and** SubTOI H21.000 Health-other.

**HMO or AFDS use:**

- TOI HOrg03 Health Other **and** SubTOI HOrg03.000 Health-other.

**Any** form filed under the wrong filing type, or TOI/SubTOI **will be** returned without review.



**Michigan Department of Insurance and Financial Services**

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*APPENDIX III:*

**INSTRUCTIONS FOR PREPARING AND SUBMITTING  
THE CORPORATE GOVERNANCE ANNUAL  
DISCLOSURE FILING**

**MCL 500.1757(1) requires insurers to annually (no later than June 1) file a corporate governance annual disclosure (CGAD) with the Michigan Department of Insurance and Financial Services. The following provides filing procedures and guidance on the required content of the CGAD.**

**(A) Filing Procedures:**

(1) An insurer, or the insurance group of which the insurer is a member, required to file a CGAD under section 1757 of the Michigan Insurance Code, shall, no later than June first of each calendar year, submit to the director a CGAD that contains the information described in subsection (B) below.

(2) The CGAD must include a signature of the insurer's or insurance group's chief executive officer or corporate secretary attesting to the best of that individual's belief and knowledge that the insurer or insurance group has implemented the corporate governance practices and that a copy of the CGAD has been provided to the insurer's or insurance group's board or the appropriate committee thereof.

(3) The insurer or insurance group shall have the discretion regarding the appropriate format for providing the information required by these instructions and is permitted to customize the CGAD to provide the most relevant information necessary to permit the director to gain an understanding of the corporate governance structure, policies and practices utilized by the insurer or the insurance group.

(4) For purposes of completing the CGAD, the insurer or insurance group may choose to provide information on governance activities that occur at the ultimate controlling parent level, an intermediate holding company level, and/or the individual legal entity level, depending upon how the insurer or insurance group has structured its system of corporate governance. The insurer or insurance group is encouraged to make the CGAD disclosures at the level at which the insurer's or insurance group's risk appetite is determined, or at which the earnings, capital, liquidity, operations, and reputation of the insurer are overseen collectively and at which the supervision of those factors are coordinated and exercised, or the level at which legal liability for failure of general corporate governance duties would be placed. If the insurer or insurance group determines the level of reporting based on these criteria, it shall indicate which of the three criteria was used to determine the level of reporting and explain any subsequent changes in level of reporting.

(5) Notwithstanding subsection (1) above, and as outlined in section 1757 of the Michigan Insurance Code, if the CGAD is completed at the insurance group level, then it must be filed with the lead state of the group as determined by the procedures outlined in the most recent financial analysis handbook adopted by the NAIC. In these instances, a copy of the CGAD must also be provided, upon request, to the chief regulatory official of any state in which the insurance group has a domestic insurer.

(6) An insurer or insurance group may comply with these instructions by referencing other existing documents, such as an own risk and solvency assessment (ORSA) summary report, holding company Form B or F filings, securities and exchange commission proxy statements, foreign regulatory reporting requirements, etc., if the documents provide information that is comparable to the information described in subsection (B) below. The insurer or insurance group shall clearly reference the location of the relevant information within the CGAD and attach the referenced document if it is not already filed with the department.

(7) Each year following the initial filing of the CGAD, the insurer or insurance group shall file an amended version of the previously filed CGAD, indicating revisions made, or a copy of the prior year filing with a dated statement indicating that no changes have been made in the information or activities reported in the previous year CGAD.

**(B) Contents of corporate governance annual disclosure:**

(1) The insurer or insurance group shall be as descriptive as possible in completing the CGAD, with inclusion of attachments or example documents that are used in the governance process, since these may provide a means to demonstrate the strengths of their governance framework and practices.

(2) The CGAD shall describe the insurer's or insurance group's corporate governance framework and

structure including consideration of the following:

(a) The board and various committees thereof ultimately responsible for overseeing the insurer or insurance group and the level(s) at which that oversight occurs, such as ultimate control level, intermediate holding company, legal entity, etc. The insurer or insurance group shall describe and discuss the rationale for the current board size and structure; and

(b) The duties of the board and each of its significant committees and how they are governed, such as bylaws, charters, informal mandates, etc., as well as how the board's leadership is structured, including a discussion of the roles of chief executive officer and chairman of the board within the organization.

(3) The insurer, or insurance group, shall describe the policies and practices of the most senior governing entity and significant committees thereof, including a discussion of the following factors:

(a) How the qualifications, expertise and experience of each board member meet the needs of the insurer or insurance group;

(b) How an appropriate amount of independence is maintained on the board and its significant committees;

(c) The number of meetings held by the board and its significant committees over the past year as well as information on director attendance;

(d) How the insurer or insurance group identifies, nominates and elects members to the board and its committees. The discussion should include, for example:

(i) Whether a nomination committee is in place to identify and select individuals for consideration;

(ii) Whether term limits are placed on directors;

(iii) How the election and re-election processes function; and

(iv) Whether a board diversity policy is in place and if so, how it functions.

(e) The processes in place for the board to evaluate its performance and the performance of its committees, as well as any recent measures taken to improve performance, including any board or committee training programs that have been put in place.

(4) The insurer or insurance group shall describe the policies and practices for directing senior management, including a description of the following factors:

(a) Any process or practices, such as suitability standards, to determine whether officers and key persons in control functions have the appropriate background, experience and integrity to fulfill their prospective roles, including:

(i) Identification of the specific positions for which suitability standards have been developed and a description of the standards employed; and

(ii) Any changes in an officer's or key person's suitability as outlined by the insurer's or insurance group's standards and procedures to monitor and evaluate such change.

(b) The insurer's or insurance group's code of business conduct and ethic, the discussion of which considers, for example:

- (i) Compliance with laws, rules, and regulations; and
- (ii) Proactive reporting of any illegal or unethical behavior.

(c) The insurer's or insurance group's processes for performance evaluation, compensation and corrective action to ensure effective senior management throughout the organization, including a description of the general objectives of significant compensation programs and what the programs are designed to reward. The description shall include sufficient detail to allow the director to understand how the organization ensures that compensation programs do not encourage and/or reward excessive risk taking. Elements to be discussed may include, for example:

- (i) The board's role in overseeing management compensation programs and practices;
- (ii) The various elements of compensation awarded in the insurer's or insurance group's compensation programs and how the insurer or insurance group determines and calculates the amount of each element of compensation paid;
- (iii) How compensation programs are related to both company and individual performance over time;
- (iv) Whether compensation programs include risk adjustments and how those adjustments are incorporated into the programs for employees at different levels;
- (v) Any claw-back provisions built into the programs to recover awards or payments if the performance measures upon which they are based are restated or otherwise adjusted; and
- (vi) Any other factors relevant in understanding how the insurer or insurance group monitors its compensation policies to determine whether its risk management objectives are met by incentivizing its employees.

(d) The insurer's or insurance group's plans for Chief Executive Officer and senior management succession.

(5) The insurer or insurance group shall describe the processes by which the board, its committees and senior management ensure an appropriate amount of oversight to the critical risk areas impacting the insurer's business activities including a discussion of:

- (a) How oversight and management responsibilities are delegated between the board, its committees, and senior management;
- (b) How the board is kept informed of the insurer's strategic plans, the associated risks, and steps that senior management is taking to monitor and manage those risks;
- (c) How reporting responsibilities are organized for each critical risk area.

The description should allow the director to understand the frequency at which information on each critical risk area is reported to and reviewed by senior management and the board. This description may include, for example, the following critical risk areas of the insurer:

- (i) Risk management processes. An insurer, or the insurance group of which the insurer is a



member, that files an ORSA summary report with the director pursuant to section 1707 of the Michigan Insurance Code may refer to its ORSA summary report;

- (ii) Actuarial function;
- (iii) Investment decision-making processes;
- (iv) Reinsurance decision-making processes;
- (v) Business strategy/finance decision-making processes;
- (vi) Compliance function;
- (vii) Financial reporting/internal auditing; and
- (viii) Market conduct decision-making processes.

Senior management as referenced in these instructions means any corporate officer responsible for reporting information to the board of directors at regular intervals or providing this information to shareholders or regulators and shall include, for example and without limitation, the Chief Executive Officer, Chief Financial Officer, Chief Operating Officer, Chief Procurement Officer, Chief Legal Officer, Chief Information Officer, Chief Technology Officer, Chief Revenue Officer, Chief Visionary Officer, or any other "C" level executive.

*APPENDIX IV:*

**SUPPLEMENTAL CHECKLIST ON WHERE TO SEND  
FORMS INCLUDED IN THESE INSTRUCTIONS**

## WHERE TO SEND FORMS INCLUDED IN THESE INSTRUCTIONS

**(Note: Forms sent to DIFS should be sent to the address previously listed in these instructions and directed to the office as indicated below)**

Form	DIFS Office or Address
Qualifying Assets Form (FIS 0063, FIS 0079, FIS 0081, FIS 0082)	DIFS– Office of Insurance Evaluation <a href="mailto:DIFS-FinFilings@michigan.gov">DIFS-FinFilings@michigan.gov</a>
Complaint and Grievance Summary for Health Carriers (FIS 0318)	DIFS– Health Plans Section Via SERFF. You will still need to file this form if you are licensed but have not written any disability insurance in Michigan. Please submit with zero's, none or N/A in each table.
Michigan Health Insurance Enrollment, Premiums and Losses (FIS 0322)	FIS 0322 must be submitted electronically to DIFS. The submission website address, along with an authentication code and more detailed instructions, will be sent to the Statutory Statement Contact on or before March 1. Paper FIS 0322 forms will no longer be accepted. For questions please call 517-284-8693 or send email to <a href="mailto:DIFS-FIS0322-annualsubmission@michigan.gov">DIFS-FIS0322-annualsubmission@michigan.gov</a> .
Accident and Sickness Insurance Advertising Certificate of Compliance (per Admin. Rule 500.668), Advertisement of Life Insurance and Annuities Certificate of Compliance (per Admin Rule 500.1385).	Via SERFF Questions- Office of Insurance Rates and Forms- 517-284-8689
Regulatory Asset Adequacy Issues Summary	DIFS– Office of Insurance Evaluation

APPENDIX V:

## **LISTING OF COMPANIES FOR WHICH REINSURANCE CREDITS ARE ALLOWED**

\*Reinsurers may apply for certified status. A listing of certified reinsurers and their collateral requirements is located on DIFS website at [Certified Reinsurers \(michigan.gov\)](#).

Reinsurers may apply for reciprocal jurisdiction reinsurer status. This allows a domestic ceding company to take full credit for reinsurance recoverables for those contracts entered into or renewed after the reinsurer has obtained reciprocal jurisdiction reinsurer status. For additional information, please see DIFS website at [Reciprocal Jurisdiction Reinsurers \(michigan.gov\)](#).

# Companies for which Reinsurance Credits are Allowed

Use this list of COMPANIES FOR WHICH REINSURANCE CREDITS ARE ALLOWED IN MICHIGAN as of December 31, 2024 to complete the reinsurance section of the 2024 annual statement. Any company not appearing on this list is considered Unauthorized as of December 31, 2024

NAIC #	Company Name	NAIC #	Company Name	NAIC #	Company Name
57568	1891 Financial Life	17230	Allstate Prop & Cas Ins Co	66001	American Benefit Life Ins Co
34789	21st Century Centennial Ins Co	37907	Allstate Vehicle & Prop Ins Co	11240	American Builders Ins Co
12963	21st Century Ins Co	32450	ALPS Prop & Cas Ins Co	99600	American Century Life Ins Co
32220	21st Century North Amer Ins Co	* 17091	AM Specialty Ins Co	12504	American Family Connect Ins Co
20796	21st Century Premier Ins Co	60216	Amalgamated Life Ins Co	29068	American Family Connect Prop & Cas Ins Co
80985	4 Ever Life Ins Co	18708	Ambac Assurance Corp	19623	American Summit Ins Co
77879	5 Star Life Ins Co	19100	Amco Ins Co	10251	American Underwriters Ins Co
71854	AAA Life Ins Co	12548	Amer Agri-Business Ins Co	61999	Americo Financial Life & Annuity Ins Co
31325	Acadia Ins Co	10103	Amer Agricultural Ins Co	19488	Amerisure Ins Co
10220	Accelerant National Ins Co	19720	Amer Alternative Ins Corp	23396	Amerisure Mutual Ins Co
63444	Accendo Ins Co	21849	Amer Automobile Ins Co	11050	Amerisure Partners Ins Co
12304	Accident Fund General Ins Co	10111	Amer Bankers Ins Co Of FL	61301	Ameritas Life Ins Corp
10166	Accident Fund Ins Co of Amer	60275	Amer Bankers Life Assurance Co Of FL	10665	Ameritrust Ins Corp
12305	Accident Fund Nat'l Ins Co	20427	Amer Casualty Co Of Reading, PA	27928	Amex Assurance Co
62200	Accordia Life and Annuity Co	19941	Amer Commerce Ins Co	16459	AmFed Advantage Ins Co
* 16835	Accredited Specialty Ins Co	45934	Amer Compensation Ins Co	11963	AmFed Casualty Ins Co
26379	Accredited Surety & Casualty Co, Inc	12321	Amer Continental Ins Co	11208	AmFed National Ins Co
22667	ACE American Ins Co	10216	Amer Contractors Indemnity Co	60250	AmFirst Ins Co
50028	ACE Capital Title Rein Co	19690	Amer Economy Ins Co	15931	AmFirst Specialty Ins Co
20702	ACE Fire Underwriters Ins Co	37990	Amer Empire Ins Co	42390	Amguard Ins Co
60348	ACE Life Ins Co	92738	Amer Equity Investment Life Ins Co	72222	Amica Life Ins Co
20699	ACE Prop & Cas Ins Co	10819	Amer Equity Specialty Ins Co	19976	Amica Mutual Ins Co
19984	ACIG Ins Co	23337	Amer European Ins Co	12287	Amica Prop & Cas Ins Co
**	ACREFI Ins Services, LLC	23450	Amer Family Home Ins Co	15954	AmTrust Ins Co
22950	Acstar Ins Co	60380	Amer Family Life Assurance Co of Columbus	51578	AmTrust Title Ins Co
14184	Acuity, A Mutual Ins Co	60399	Amer Family Life Ins Co	93661	Annuity Investors Life Ins Co
10324	Addison Ins Co	60410	Amer Fidelity Assurance Co	10984	Ansur America Ins Co
44318	Admiral Indemnity Co	60429	Amer Fidelity Life Ins Co	61069	Anthem Life Ins Co
50004	Advocus National Title Ins Co	24066	Amer Fire And Casualty Co	**	Antolin Ins Co
33898	Aegis Security Ins Co	60445	Amer Founders Life Ins Co	34738	ARAG Ins Co
78700	Aetna Health And Life Ins Co	60488	Amer General Life Ins Co	30830	Arch Indemnity Ins Co
72052	Aetna Health Ins Co	26247	Amer Guarantee And Liability Ins Co	11150	Arch Ins Co
60054	Aetna Life Ins Co	51411	Amer Guaranty Title Ins Co	71455	Arch Life Ins Co of America
10014	Affiliated FM Ins Co	43494	Amer Hallmark Ins Co of TX	18732	Arch Mortgage Guaranty Co
16748	Affinity Mutual Ins Co	60518	Amer Health And Life Ins Co	40266	Arch Mortgage Ins Co
22837	AGCS Marine Ins Co	60534	Amer Heritage Life Ins Co	10946	Arch Property Casualty Ins Co
12522	Agents National Title Ins Co	19380	Amer Home Assurance Co	10348	Arch Rein Co
42757	Agri General Ins Co	60542	Amer Home Life Ins Co The	16141	Ardellis Insurance Ltd
**	AgRisk, Inc	60577	Amer Income Life Ins Co	19860	Argonaut Great Central Ins Co
40258	AIG Assurance Co	31895	Amer Interstate Ins Co	19801	Argonaut Ins Co
19402	AIG Property Casualty Co	67253	Amer Life & Security Corp	19828	Argonaut Midwest Ins Co
19399	AIU Ins Co	81213	Amer Maturity Life Ins Co	13900	ARI Ins Co
10957	Alamance Ins Co	67989	Amer Memorial Life Ins Co	41459	Armed Forces Ins Exchange
38733	Alaska National Insurance Co.	23469	Amer Modern Home Ins Co	23752	Ascot Ins Co
20222	All Amer Ins Co	42722	Amer Modern Prop & Cas Ins Co	30279	Ascot Surety & Casualty Co
82406	All Savers Ins Co	38652	Amer Modern Select Ins Co	43460	Aspen American Ins Co
13285	Alleghany Casualty Co	60739	Amer National Ins Co	*	Aspen Bermuda Limited
60134	Alliance Health and Life Ins Co	71773	Amer National Life Ins Of TX	*	Aspen Ins UK Ltd
56197	Alliance Of Transylvanian Saxons	28401	Amer Nat'l Prop & Cas Co	67423	Aspida Life Ins Co
12309	Alliant National Title Ins Co, Inc	12190	Amer Pet Ins Co	30180	Assured Guaranty Inc.
35300	Allianz Global Risks US Ins Co	60801	Amer Public Life Ins Co	56499	Assured Life Assn
90611	Allianz Life Ins Co Of North Amer	19615	Amer Reliable Ins Co	71439	Assurity Life Ins Co
21911	Allianz Reinsurance America, Inc	60836	Amer Republic Ins Co	11511	Asure Worldwide Ins Co
11242	Allied Eastern Indemnity Co	19631	Amer Road Ins Co	* 29033	Atain Ins Co
10127	Allied Ins Co of America	42978	Amer Security Ins Co	17159	Atain Specialty Ins Co
42579	Allied Prop & Cas Ins Co	19992	Amer Select Ins Co	68039	Athene Annuity & Life Assurance Co of NY
* 19489	Allied World Assur Co US, Inc	17965	Amer Sentinel Ins Co	61689	Athene Annuity and Life Co
22730	Allied World Ins Co	41998	Amer Southern Home Ins Co	63932	Athene Life Ins Co of New York
10690	Allied World Nat'l Assur Co	10235	Amer Southern Ins Co	23833	AtHome Ins Co
16624	Allied World Specialty Ins Co	84697	Amer Specialty Health Ins Co	61093	Atlanta Life Ins Co
10212	Allmerica Financial Alliance Ins Co	19704	Amer States Ins Co	27154	Atlantic Specialty Ins Co
41840	Allmerica Financial Benefit Ins Co	37214	Amer States Preferred Ins Co	22586	Atlantic States Ins Co
29688	Allstate Fire and Casualty Ins Co	10872	Amer Strategic Ins Corp	25422	Atradius Trade Credit Ins, Inc
19240	Allstate Indemnity Co	31380	Amer Surety Co	89206	Augustar Life Assurance Corp
19232	Allstate Ins Co	60895	Amer United Life Ins Co	67172	Augustar Life Ins Co
11110	Allstate North American Ins Co	40142	Amer Zurich Ins Co	61182	Aurora National Life Assurance Co
36455	Allstate Northbrook Indemnity Co	11865	Amerian Digital Title Ins Co	21210	Auto Club Group Ins Co

\* - Recognized Trusteed or Accredited Reinsurer

## - Recognized Trusteed Reinsurer (for reinsurance agreements inception on or after August 1, 1995)

\*\* - Authorized pursuant to Chapter 46 or 47

# Companies for which Reinsurance Credits are Allowed

Use this list of COMPANIES FOR WHICH REINSURANCE CREDITS ARE ALLOWED IN MICHIGAN as of December 31, 2024 to complete the reinsurance section of the 2024 annual statement. Any company not appearing on this list is considered Unauthorized as of December 31, 2024

NAIC #	Company Name	NAIC #	Company Name	NAIC #	Company Name
21202	Auto Club Ins Assn	10472	Capitol Indemnity Corp	* 27812	Columbia Ins Co
84522	Auto Club Life Ins Co	61581	Capitol Life Ins Co	99937	Columbus Life Ins Co
* 60256	Auto club of Southern CA Life ins Co	14041	Care Improvement Plus Wisconsin Ins Co	62146	Combined Ins Co Of Amer
11983	Auto Club Property-Casualty Ins Co	94072	CareScout Insurance Co.	19410	Commerce & Industry Ins Co
19062	Automobile Ins Co Of Hartford, CT	10510	Carolina Casualty Ins Co	81426	Commercial Travelers Life Ins Co
18988	Auto-Owners Ins Co	11997	Caterpillar Life Ins Co	84824	Commonwealth Ann & Life Ins Co
61190	Auto-Owners Life Ins Co	57770	Catholic Fraternal Life	50083	Commonwealth Land Title Ins Co
12508	Auto-Owners Specialty Ins Co	56316	Catholic Ladies Of Columbia	77828	Companion Life Ins Co
10367	Avemco Ins Co	57487	Catholic Order Of Foresters	60984	CompBenefits Ins Co
60232	Axcelus Financial Life Ins Co	19518	Catlin Ins Co, Inc	12177	CompWest Ins Co
37273	AXIS Ins Co	20273	Cedar Ins Co	10891	Concert Ins Co
20370	AXIS Reins Co	80799	Celtic Ins Co	29734	Conifer Ins Co
15610	AXIS Specialty Ins Co	11499	Censtat Cas Co	51268	Connecticut Attorneys Title Ins Co
*	AXIS Specialty Limited	20230	Central Mutual Ins Co	62308	Connecticut General Life Ins Co
13420	Badger Mutual Ins Co	61735	Central Security Life Ins Co	**	Conserve
61212	Baltimore Life Ins Co	61751	Central States Health & Life Of Omaha	22640	Consolidated Ins Co
71919	Bankers Fidelity Assurance Co	34274	Central States Indemnity Co Of Omaha	32190	Constitution Ins Co
61239	Bankers Fidelity Life Ins Co	34649	Centre Ins Co	71730	Continental American Ins Co
61263	Bankers Life And Casualty Co	80896	Centre Life Ins Co	20443	Continental Casualty Co
71013	Bankers Reserve Life Ins Co of WI	42765	Centurion Casualty Co	71404	Continental General Ins Co
18279	Bankers Standard Ins Co	* 36951	Century Surety Co	39551	Continental Heritage Ins Co
94250	Banner Life Ins Co	26905	Century-National Ins Co	28258	Continental Indemnity Co
25232	Bantry Ins Co	10006	Cerity Ins Co	35289	Continental Ins Co
29513	Bar Plan Mutual Ins Co, The	25615	Charter Oak Fire Ins Co	68500	Continental Life Ins Co Of Brentwood, TN
38245	BCS Ins Co	10642	Cherokee Ins Co	10804	Continental Western Ins Co
**	Beaumont Physicians Insurance Co.	61832	Chesapeake Life Ins Co	37206	Contractors Bonding And Ins Co
16510	Beazley America Ins Co, Inc	22810	Chicago Ins Co	* 11860	COPIC Ins Co
37540	Beazley Ins Co, Inc	50229	Chicago Title Ins Co	**	Copper Rock
41394	Benchmark Ins Co	16356	ChironIns Co	**	COPS Ins Co
61395	Beneficial Life Ins Co	12777	Chubb Indemnity Ins Co	10499	CorePointe Ins Co
15911	Berkley Casualty Co	10052	Chubb National Ins Co	**	Corewell
32603	Berkley Ins Co	10669	Church Ins Co	68365	Corporate Solutions Life Rein Co
64890	Berkley Life & Health Ins Co	18767	Church Mutual Ins Co, SI	20982	Country Casualty Ins Co
38911	Berkley Nat'l Ins Co	71463	CICA Life Insurance Co. of America	94218	Country Investors Life Assurance Co
29580	Berkley Regional Ins Co	67369	CIGNA Health & Life Ins Co	62553	Country Life Ins Co
13070	Berkshire Hathaway Assur Corp	61727	Cigna National Health Ins Co	20990	Country Mutual Ins Co
10391	Berkshire Hathaway Direct Ins Co	22004	CIM Ins Corp	21008	Country Preferred Ins Co
20044	Berkshire Hathaway Homestate Ins Co	28665	Cincinnati Casualty Co	81973	Coventry Health And Life Ins Co
62345	Berkshire Hathaway Life Ins Co Of NE	88064	Cincinnati Equitable Life Ins Co	74160	Coventry Health Care of Illinois
22276	Berkshire Hathaway Specialty Ins Co	23280	Cincinnati Indemnity Co	18961	Crestbrook Ins Co
71714	Berkshire Life Ins Co of America	10677	Cincinnati Ins Co	56634	Croatian Fraternal Union Of Amer
90638	Best Life & Health Ins Co	76236	Cincinnati Life Ins Co	16070	Cronus Ins Co
62383	Bestown Life Ins Co	31534	Citizens Ins Co Of Amer	31348	Crum & Forster Indemnity Co
58017	BetterLife	10176	Citizens Ins Co Of OH	42471	Crum and Forster Ins Co
20095	BITCO General Ins Corp	10395	Citizens Ins Co Of The Midwest	56138	CSA Fraternal Life
20109	BITCO National Ins Co	61921	Citizens Security Life Ins Co	* 15539	CSAA Insurance Exchange
12311	Bloomington Compensation Ins Co	37028	Citizens United Reciprocal Exchange	82880	CSI Life Ins Co
54291	Blue Cross Blue Shield of Mich Mutual Ins Co	41335	City National Ins Co	10847	CUMIS Ins Society
61476	Boston Mutual Life Ins Co	10315	Civic Prop & Cas Co	56324	Czech Catholic Union
16825	Branch Insurance Exchange	20532	Clarendon National Ins Co	21164	Dairyland Ins Co
12372	BrickStreet Mutual Ins Co	28860	Clear Blue Ins Co	16623	Dairyland National In Co
35599	Bridge City Insurance Co.	78301	Clear Spring Health Ins Co	34924	Dakota Truck Underwriters
87726	Brighthouse Life Ins Co	83607	Clear Spring Life and Annuity Co	*	DaVinci Reins Ltd
12774	Bristol West Preferred Ins Co	15563	Clear Spring Prop & Cas Co	16705	Dealers Assurance Co
**	Brooke Life	16273	ClearPath Ins Co	71129	Dearborn Life Ins Co
78620	Brooke Life Ins Co	**	ClearWater	62634	Delaware Amer Life Ins Co
13528	Brotherhood Mutual Ins Co	33480	Clermont Ins Co	79065	Delaware Life Ins Co
16713	Buckeye State Mutual Ins Co	12356	CM Regent Ins Co	96265	Dental Care Plus, Inc
14380	Build America Mutual Assurance Co	62626	CMFG Life Ins Co	12307	DentaQuest USA Ins Co, Inc
15385	Bureau Veritas Inspection and Ins Co	29530	Coalition Ins Co	73474	Dentegra Ins Co
93432	C.M. Life Ins Co	31887	Coface North America Ins Co	40975	Dentists Ins Co
**	Caledonia Ins Co, LLC	36552	Coliseum Reins Co	42587	Depositors Ins Co
36340	Camico Mutual Ins Co	34347	Colonial Amer Casualty & Surety Co	12718	Developers Surety & Indemnity Co
12260	CampMed Casualty & Indemnity Co, Inc	62049	Colonial Life & Accident Ins Co	10659	Diamond Ins Co
80659	Canada Life Assurance Co	62065	Colonial Penn Life Ins Co	42048	Diamond State Ins Co
76694	Canada Life Rein Co	10758	Colonial Surety Co	34711	Digital Advantage Ins Co
10464	Canal Ins Co	36927	Colony Specialty Ins Co	97705	Direct General Life Ins Co

\* - Recognized Trusteed or Accredited Reinsurer

## - Recognized Trusteed Reinsurer (for reinsurance agreements incepting on or after August 1, 1995)

\*\* - Authorized pursuant to Chapter 46 or 47

# Companies for which Reinsurance Credits are Allowed

Use this list of COMPANIES FOR WHICH REINSURANCE CREDITS ARE ALLOWED IN MICHIGAN as of December 31, 2024 to complete the reinsurance section of the 2024 annual statement. Any company not appearing on this list is considered Unauthorized as of December 31, 2024

NAIC #	Company Name	NAIC #	Company Name	NAIC #	Company Name
34495	Doctors' Co, An Interinsurance Exchange	40029	Explorer Ins Co	41513	Foremost Signature Ins Co
50130	Doma Title Ins, Inc	21482	Factory Mutual Ins Co	91642	Forethought Life Ins Co
95657	Dominion Dental Services, Inc	35157	Fair American Ins and Rein Co	13293	Forge Ins Co
13692	Donegal Mutual Ins Co	31925	Falls Lake National Ins Co	* 16823	Fortegra Specialty Ins Co
33499	Dorinco Rein Co	70742	Family Benefit Life Ins Co	26794	Fortitude Casualty Ins Co
23795	Drivers Edge Insurance Co.	77968	Family Heritage Life Ins Co Of Amer	86630	Fortitude Life Insurance & Annuity Co
13183	Eagle Life Ins Co	63053	Family Life Ins Co	90247	Fortitude U.S. Reinsurance Co
13019	Eastern Advantage Assur Co	74004	Family Service Life Ins Co	10801	Fortress Ins Co
10724	Eastern Alliance Ins Co	21547	Farm Bureau General Ins Co Of MI	10985	Fortuity Ins Co
28649	Eastern Atlantic Ins Co	63096	Farm Bureau Life Ins Co Of MI	**	Fortuna Assurance Co
14702	EastGuard Ins Co	21555	Farm Bureau Mutual Ins Co Of MI	14249	Founders Ins Co
22926	Economy Fire & Casualty Co	30341	Farmers & Merchants Mutual Fire Ins	18180	Founders Ins Co of MI
12515	Educators Health Plans Life Acc & Health Inc	24201	Farmers Automobile Ins Assoc	11600	Frank Winston Crum Ins Co
84174	ELCO Mutual Life and Annuity	25321	Farmers Direct Prop and Cas Ins Co	13986	Frankenmuth Ins Co
85561	Elips Life Ins Co	34339	Farmers Group Prop and Cas Ins Co	62324	Freedom Life Ins Co Of Amer
12747	Elixir Ins Co	21636	Farmers Ins Co Of OR	22209	Freedom Specialty Ins Co
62928	EMC National Life Co	21652	Farmers Ins Exchange	13994	Fremont Ins Co
25186	EMC Prop & Cas Co	36889	Farmers Ins Of Columbus, Inc	85286	Fresenius Health Plans Ins Co
21407	Emcasco Ins Co	13897	Farmers Mutual Hail Ins Co Of IA	99775	Funeral Directors Life Ins Co
88595	Empheys Ins Co	33448	Farmers Mutual Ins Co of MI	15691	Gainbridge Life Ins Co
21326	Empire Fire And Marine Ins Co	63177	Farmers New World Life Ins Co	63657	Garden State Life Ins Co
25402	Employers Assurance Company	26298	Farmers Prop and Cas Ins Co	21253	Garrison Prop & Cas Ins Co
11512	Employers Compensation Ins Co	43699	Farmers Specialty Ins Co	56685	GBU Financial Life
10640	Employers Ins Co of Nevada	41483	Farmington Casualty Co	56693	GCU
21458	Employers Ins Co Of Wausau	**	FCA US	14138	GEICO Advantage Insurance Co.
21415	Employers Mutual Casualty Co	10178	FCCI Ins Co	35882	GEICO General Ins Co
10346	Employers Preferred Ins Co	20281	Federal Ins Co	22055	GEICO Indemnity Co
68276	Employers Reassurance Corp	63223	Federal Life Ins Co	37923	GEICO Marine Ins Co
56049	Employes' Mutual Benefit Assoc	63258	Federated Life Ins Co	24414	General Casualty Co Of WI
68322	Empower Annuity Ins Co of America	13935	Federated Mutual Ins Co	18821	General Casualty Ins Co
37095	Enact Financial Assurance Corp	16024	Federated Reserve Ins Co	24732	General Ins Co Of Amer
38458	Enact Mortgage Ins Corp	11118	Federated Rural Electric Ins Exchange	86258	General Re Life Corp
16675	Enact Mortgage Ins Corp of North Carolina	28304	Federated Service Ins Co	22039	General Reins Corp
15130	Encompass Indemnity Co	39306	Fidelity & Deposit Co Of MD	39322	General Security National Ins Co
10358	Encompass Ins Co	35386	Fidelity & Guaranty Ins Co	11967	General Star National Ins Co
10072	Encompass Prop & Cas Co	25879	Fidelity & Guaranty Ins Underwriters, Inc	11231	Generali
10641	Endurance Amer Ins Co	63274	Fidelity & Guaranty Life Ins Co	38962	Genesis Ins Co
11551	Endurance Assurance Corp	93696	Fidelity Investments Life Ins Co	65536	Genworth Life and Annuity Ins Co
43630	Endurance Risk Solutions Assur Co	63290	Fidelity Life Association	70025	Genworth Life Ins Co
* 64149	Endurance Specialty Ins Ltd	51586	Fidelity National Title Ins Co	10799	GeoVera Ins Co
64149	Epic Life Ins Co	17136	Fidelity Security Assurance Co	70939	Gerber Life Ins Co
62880	Equitable Financial Life & Annuity Co	71870	Fidelity Security Life Ins Co	14036	Germantown Mutual Ins Co
62944	Equitable Financial Life Ins Co	35009	Financial Casualty & Surety, Inc	26611	Glatfelter Insurance Co.
78077	Equitable Financial Life Ins Co of America	39136	Finial Reins Co	56154	Gleaner Life Ins Society
62510	Equitrust Life Ins Co	21660	Fire Ins Exchange	12254	Glencar Ins Co
13634	Essent Guaranty, Inc	21873	Fireman's Fund Ins Co	21032	Global Reins Corp of America
37915	Essentia Ins Co	21784	Firemen's Ins Co of Wash DC	91472	Globe Life And Accident Ins Co
25712	Esurance Ins Co	69140	First Allmerica Financial Life Ins Co	62286	Golden Rule Ins Co
21741	Esurance Ins Co of NJ	37710	First Amer Prop & Cas Ins Co	22063	Government Employees Ins Co
30210	Esurance Prop & Cas Ins Co	50814	First Amer Title Ins Co	63967	Government Personnel Mutual Life Ins Co
20516	Euler Hermes North America Ins Co	51624	First American Title Guaranty Co	67059	GPM Health and Life Ins Co
* 35378	Evanston Ins Co	56332	First Catholic Slovak Ladies Assoc Of The USA	* 14060	Grange Ins Co
57991	Everence Assoc, Inc	56340	First Catholic Slovak Union Of The USA	11136	Grange Ins Co of Michigan
74209	Everence Ins Co	29980	First Colonial Ins Co	71218	Grange Life Ins Co
16044	Everest Denali Ins Co	10351	First Dakota Indemnity Co	26310	Granite Re, Inc
10120	Everest National Ins Co	11177	First Financial Ins Co	23809	Granite State Ins Co
16045	Everest Premier Ins Co	10676	First Guard Ins Co	93521	Granular Ins Co
26921	Everest Reins Co	90328	First Health Life & Health Ins Co	10671	Gray Casualty & Surety Co
17043	Everett Cash Mutual Ins Co	33588	First Liberty Ins Corp	36307	Gray Ins Co, The
**	Evergreen	24724	First National Ins Co Of Amer	26832	Great Amer Alliance Ins Co
12750	Evergreen National Indemnity Co	14240	First National Title Ins Co	26344	Great Amer Assurance Co
70866	Everlake Assurance Co	67652	First Penn-Pacific Life Ins Co	16691	Great Amer Ins Co
60186	Everlake Life Ins Co	11054	Fletcher Reinsurance Co	22136	Great Amer Ins Co Of NY
24961	Everspan Ins Co	13978	Florists' Mutual Ins Co	31135	Great Amer Security Ins Co
10318	Exact Prop & Cas Co	36781	FMH Ag Risk Ins Co	33723	Great Amer Spirit Ins Co
10003	Excess Share Ins Corp	11185	Foremost Ins Co Grand Rapids	25224	Great Divide Ins Co
35181	Executive Risk Indemnity	11800	Foremost Prop & Cas Ins Co	30384	Great Lakes Mutual Ins Co

\* - Recognized Trusteed or Accredited Reinsurer

## - Recognized Trusteed Reinsurer (for reinsurance agreements incepting on or after August 1, 1995)

\*\* - Authorized pursuant to Chapter 46 or 47

# Companies for which Reinsurance Credits are Allowed

Use this list of COMPANIES FOR WHICH REINSURANCE CREDITS ARE ALLOWED IN MICHIGAN as of December 31, 2024 to complete the reinsurance section of the 2024 annual statement. Any company not appearing on this list is considered Unauthorized as of December 31, 2024

NAIC #	Company Name	NAIC #	Company Name	NAIC #	Company Name
18694	Great Midwest Ins Co	* 12936	Houston Specialty Ins Co	58033	Knights Of Columbus
20303	Great Northern Ins Co	25054	Hudson Ins Co	37800	Kookmin Best Ins Co, Ltd
12982	Great Plains Casualty, Inc	60052	Humana Benefit Plan of Illinois, Inc	56227	KSKJ Life
90212	Great Southern Life Ins Co	69671	Humana Health Ins Co of Florida Inc	* 22993	KY Farm Bureau Mutual Ins Co
11371	Great West Casualty Co	73288	Humana Ins Co	56715	Ladies PA Slovak Catholic Union
71480	Great Western Ins Co	60219	Humana Ins Co of Kentucky	65242	Lafayette Life Ins Co
17155	Greater Mid-Atlantic Indemnity Co	70580	HumanaDental Ins Co	*	Lancashire Ins Co Ltd
17154	Greater Midwestern Indemnity Co	**	Huron Indemnity	26077	Lancer Ins Co
22187	Greater New York Mutual Ins Co	91693	IAmer Life Ins Co	16023	Lemonade Ins Co
**	Greenstone	69272	Ibex Life & Annuity Ins Co	37940	Lexington Nat'l Ins Corp
22322	Greenwich Ins Co	97764	Idealife Ins Co	13307	Lexon Ins Co
43974	Greenwood Ins Co	15571	Illinois Casualty Co	68543	Liberty Bankers Life Ins Co
10019	Greystone Ins Co	64580	Illinois Mutual Life Ins Co	42404	Liberty Ins Corp
* 14117	Grinnell Mutual Rein Co	23817	Illinois National Ins Co	19917	Liberty Insurance Underwriters, Inc
36650	Guarantee Co of North America USA, The	35408	Imperium Ins Co	23035	Liberty Mutual Fire Ins Co
64211	Guarantee Trust Life Ins Co	11090	Incline Casualty Co	23043	Liberty Mutual Ins Co
64238	Guaranty Income Life Ins Co	43575	Indemnity Ins Co Of North Amer	12484	Liberty Mutual Personal Ins Co
78778	Guardian Ins & Annuity Co	18468	Indemnity National Ins Co	65331	Liberty National Life Ins Co
64246	Guardian Life Ins Co Of Amer	26581	Independence American Ins Co	11746	Liberty Personal Ins Co
42803	Guideone Elite Ins Co	64602	Independence Life And Annuity Co	66753	Liberty Union Life Assurance Co
15032	GuideOne Ins Co	91785	Independent Life Insurance Co.	65498	Life Ins Co Of North Amer
14559	GuideOne Specialty Ins Co	29831	Independent Mutual Fire Ins Co	65528	Life Ins Co Of The Southwest
34037	Hallmark Ins Co	58068	Independent Order Of Foresters	97691	Life of the South Ins Co
88340	Hannover Life Reassur Co Of Amer	22659	Indiana Ins Co	91898	LifeCare Assurance Co
*	Hannover Ruck SE	81779	Individual Assurance Co Life, Hlth & Acc	77720	LifeSecure Ins Co
36064	Hanover American Ins Co	14406	Industrial Alliance Ins and Fin Services	99724	LifeShield National Ins Co
22292	Hanover Ins Co	11738	Infinity Auto Ins Co	65595	Lincoln Benefit Life Co
26433	Harco National Ins Co	22268	Infinity Ins Co	65927	Lincoln Heritage Life Ins Co
23582	Harleysville Ins Co	22195	Ins Co of Greater NY	62057	Lincoln Life & Ann Co of NY
* 10674	Harleysville Ins Co of NY	26700	Ins Co Of IL	65676	Lincoln National Life Ins Co, The
35696	Harleysville Preferred Ins Co	22713	Ins Co Of North Amer	40550	Lio Ins Co
26182	Harleysville Worcester Ins Co	19429	Ins Co Of The State Of PA	##	Lloyd's Underwriters At London, Sp Synd
22357	Hartford Accident And Indemnity Co	27847	Ins Co Of The West	36447	LM General Ins Co
29424	Hartford Casualty Ins Co	11162	Insurance Co of the South	33600	LM Ins Corp
19682	Hartford Fire Ins Co	29742	Integon National Ins Co	32352	LM Prop & Cas Ins Co
38288	Hartford Ins Co of IL	74780	Integrity Life Ins Co	87920	Locomotive Engineers & Conductors
37478	Hartford Ins Co Of The Midwest	* 15598	Inter-Insurance Exchange of the Auto Club	65728	Loyal Amer Life Ins Co
38261	Hartford Ins Co of the Southeast	11592	International Fidelity Ins Co	56758	Loyal Christian Benefit Assoc
70815	Hartford Life And Accident Ins Co	17182	Intrepid Casualty Co	73504	Lumico Life Ins Co
11452	Hartford Steam Boiler Inspect & Ins Co	10749	Intrepid Ins Co	10051	Lyndon Southern Ins Co
29890	Hartford Steam Boiler Inspect & Ins Co of CT	36153	Inverin Ins Co	* 93580	M Life Ins Co
30104	Hartford Underwriters Ins Co	64904	Investors Heritage Life Ins Co	65781	Madison National Life Ins Co
14176	Hastings Ins Co	63487	Investors Life Ins Co Of North Amer	42617	MAG Mutual Ins Co
36919	Hawkeye-Security Ins Co	50369	Investors Title Ins Co	**	Magna
92711	HCC Life Ins Co	10998	iQUE Insurance Co.	13026	Main Street America Protection Ins Co
78611	HCSC Ins Services Co	23647	Ironshore Indemnity, Inc	65870	Manhattan Life Ins Co
41343	HDI Global Ins Co	* 25445	Ironshore Specialty Ins Co	67083	Manhattan National Life Ins Co
14265	HDI Global Select Ins Co	56707	ISDA Fraternal Assn	61883	ManhattanLife Ins and Annuity Co
70670	Health Care Service Corp, Mut Legal Res Co	32921	ISMIE Mutual Ins Co	16755	ManhattanLife of America Ins Co
39527	Heritage Indemnity Co	65056	Jackson National Life Ins Co	36897	Manufacturers Alliance Ins Co
64394	Heritage Life Ins Co	60140	Jackson National Life Ins Co Of NY	12824	Manufacturing Technology Mutual Ins Co
16138	HiRoad Assurance Co	11630	Jefferson Ins Co	**	Manulife MI Reassurance Co.
10200	Hiscox Ins Co	64017	Jefferson National Life Ins Co	16561	Many Ins Co
71768	HM Health Ins Co	16379	Jet Ins Co	* 23876	Mapfre Ins Co
93440	HM Life Ins Co	14354	Jewelers Mutual Ins Co, SI	*	Mapfre Re Compania De Reasegueros, S.A.
26638	Home-Owners Ins Co	16116	JM Specialty Ins Co	28932	Markel Amer Ins Co
12536	Homeowners of America Ins Co	65080	John Alden Life Ins Co	*	Markel Bermuda Ltd
17221	Homesite Ins Co	93610	John Hancock Life & Health Ins Co	10829	Markel Global Reins Co
13927	Homesite Ins Co Of The Midwest	65838	John Hancock Life Ins Co (USA)	38970	Markel Ins Co
64505	Homesteaders Life Co	* 86375	John Hancock Life Ins Co of NY	22306	Massachusetts Bay Ins Co
22578	Horace Mann Ins Co	**	John Hancock Reassurance Co.	65935	Massachusetts Mutual Life Ins Co
64513	Horace Mann Life Ins Co	65129	Kansas City Life Ins Co	63312	MassMutual Ascend Life Ins Co
22756	Horace Mann Prop & Cas Ins Co	10914	Kemper Independence Ins Co	10784	MAXUM Casualty Ins Co
11245	Hornbeam Ins Co	10885	Key Risk Ins Co	12041	MBIA Ins Corp
10069	Housing Authority Prop Ins, a Mutual Co	12199	Keystone National Ins Co	14063	MCNA Ins Co
11206	Housing Enterprise Ins Co, Inc	33987	Kin Interinsurance Nexus Exchg	69515	Medamerica Ins Co
* 42374	Houston Casualty Co	13722	Knightbrook Ins Co	63762	Medco Containment Life Ins Co

\* - Recognized Trusteed or Accredited Reinsurer

## - Recognized Trusteed Reinsurer (for reinsurance agreements incepting on or after August 1, 1995)

\*\* - Authorized pursuant to Chapter 46 or 47



# Companies for which Reinsurance Credits are Allowed

Use this list of COMPANIES FOR WHICH REINSURANCE CREDITS ARE ALLOWED IN MICHIGAN as of December 31, 2024 to complete the reinsurance section of the 2024 annual statement. Any company not appearing on this list is considered Unauthorized as of December 31, 2024

NAIC #	Company Name	NAIC #	Company Name	NAIC #	Company Name
74322	Medical Benefits Mutual Life Ins Co	14621	Motorists Mutual Ins Co	81264	Nippon Life Ins Co Of Amer
32522	Medical Mutual Ins Co of NC	22012	Motors Ins Corp	27905	NLC Mutual Ins Co
* 32328	Medical Mutual Liability Ins Society Of MD	21075	MS Transverse Ins Co	33200	NORCAL Ins Co
29076	Medical Mutual of Ohio	66346	Munich Amer Reassurance Co	31470	Norguard Ins Co
11843	Medical Protective Co	69604	Munich Re US Life Corp	66974	North Amer Co For Life & Health Ins
79987	Medico Corp Life Ins Co	10227	Munich Reins America, Inc	68349	North Amer Ins Co
31119	Medico Ins Co	88668	Mutual Of Amer Life Ins Co	27740	North Pointe Ins Co
65641	Medico Life and Health Ins Co	71412	Mutual Of Omaha Ins Co	21105	North River Ins Co
22241	Medmarc Casualty Ins Co	93734	Nassau Life and Annuity Co	30376	Northern Mutual Ins Co
62375	MedMutual Life Ins Co	67814	Nassau Life Ins Co	24031	Northland Casualty Co
16101	Meemic Ins Co	68284	Nassau Life Ins Co of KS	24015	Northland Ins Co
94587	Members Health Ins Co	23663	National Amer Ins Co	13045	NorthStone Ins Co
86126	Members Life Ins Co	61409	National Benefit Life Ins Co	69000	Northwestern Long Term Care Ins Co
21229	MemberSelect Ins Co	16632	National Builders Ins Co	67091	Northwestern Mutual Life Ins Co
14164	MEMIC Casualty Co,	11991	National Casualty Co	42552	Nova Casualty Co
11030	MEMIC Indemnity Co	10243	National Continental Ins Co	**	NPO Ins. Co.
31968	Merastar Ins Co	66540	National Farmers Union Life Ins Co	39608	Nutmeg Ins Co
14494	Merchants Bonding Co	16217	National Farmers Union Prop & Cas Co	81353	NYLIFE Ins Co Of AZ
23329	Merchants Mutual Ins Co	15679	National Fire & Indemnity Exchange	34630	Oak River Ins Co
11595	Merchants National Bonding, Inc	20478	National Fire Ins Co Of Hartford	31208	Oakwood Ins Co
12901	MERCHANTS PREFERRED INS CO	42447	National General Assurance Company	15645	OBI America Ins Co
23353	Meridian Security Ins Co	23728	National General Ins Co	14190	OBI National Ins Co
18750	Merit Health Ins Co	11044	National General Insurance Online, Inc	35602	Obisidian Ins Co
65951	Merit Life Ins Co	66583	National Guardian Life Ins Co	23248	Occidental Fire And Casualty Co Of NC
39950	Metropolitan General Ins Co	82538	National Health Ins Co	67148	Occidental Life Ins Co Of NC
65978	Metropolitan Life Ins Co	20087	National Indemnity Co	68446	Oceanview Life and Annuity Co
97136	Metropolitan Tower Life Ins Co	32620	National Interstate Ins Co	23680	Odyssey Rein Co
40150	MGA Ins Co, Inc	11051	National Interstate Ins Co of HI, Inc	24074	Ohio Casualty Ins Co
22594	MGIC Assurance Corp	20052	National Liability & Fire Ins Co	24104	Ohio Farmers' Ins Co
10682	MGIC Credit Assurance Corp	66680	National Life Ins Co	26565	Ohio Indemnity Co
18740	MGIC Indemnity Corp	13695	National Mortgage Ins Corp	24082	Ohio Security Ins Co
16203	MGT Ins Co	56782	National Slovak Society Of The USA	67180	Ohio State Life Ins Co
10209	MI Automobile Ins Placement Facility	22608	National Specialty Ins Co	67199	Old Amer Ins Co
34029	MI Basic Property Ins Assn	15474	National Summit Ins Co	17558	Old Guard Ins Co
99992	MI Catastrophic Claims Association	21881	National Surety Corp	24139	Old Republic Gen Ins Corp
10857	MI Ins Co	87963	National Teachers Assoc Life Ins Co	24147	Old Republic Ins Co
14508	MI Millers Mutual Ins Co	51020	National Title Ins of NY, Inc	67261	Old Republic Life Ins Co
31429	MI Professional Ins Exchange	20141	National Trust Ins Co	50520	Old Republic National Title Ins Co
38660	MIC General Ins Corp	19445	National Union Fire Ins Co Of Pittsburgh	37060	Old United Casualty Co
38601	MIC Prop & Cas Ins Corp	66850	National Western Life Ins Co	76007	Old United Life Ins Co
21687	Mid-Century Ins Co	26093	Nationwide Affinity Ins Co of America	88080	Omaha Health Ins Co
23418	Mid-Continent Casualty Co	28223	Nationwide Agribusiness Ins Co	13100	Omaha Ins Co
23434	Middlesex Ins Co	10723	Nationwide Assurance Co	16219	Omaha National Ins Co
66044	Midland National Life Ins Co	23760	Nationwide General Ins Co	16537	Omaha Supplemental Ins Co
27138	Midvale Indemnity Co	25453	Nationwide Ins Co Of Amer	33006	Openly Ins Co
23612	Midwest Employers Casualty Co	10948	Nationwide Ins Co of Florida	88099	Optimum Re Ins Co
16262	Midwest Family Advantage Ins Co	92657	Nationwide Life And Annuity Ins Co	69647	Optum Ins of Ohio, Inc
23574	Midwest Family Mutual Ins Co	66869	Nationwide Life Ins Co	15777	Oscar Ins Co
10895	Midwest Ins Co	23787	Nationwide Mutual Ins Co	32700	Owners Ins Co
66087	Mid-West National Life Ins Co Of TN	37877	Nationwide Prop & Cas Ins Co	76112	Oxford Life Ins Co
23515	Midwestern Indemnity Co	23825	Nat'l Public Finance Guarantee Corp	67393	Ozark National Life Ins Co
66109	Midwestern United Life Ins Co	42307	Navigators Ins Co	* 84162	Pacific Beacon Life Reassur, Inc
61522	MII Life Ins, Inc	15865	NCMIC Mutual Ins Co	22748	Pacific Employers Ins Co
26662	Milford Casualty Ins Co	10317	Neighborhood Spirit Prop & Cas Co	64343	Pacific Guardian Life Ins Co, Ltd
42234	Minnesota Lawyers Mutual Ins Co	24171	Netherlands Ins Co	20346	Pacific Indemnity Co
66168	Minnesota Life Ins Co	21830	New England Ins Co	97268	Pacific Life & Annuity Co
20362	Mitsui Sumitomo Ins Co of Amer	91626	New England Life Ins Co	67466	Pacific Life Ins Co
22551	Mitsui Sumitomo Ins Usa, Inc	41629	New England Reins Corp	37850	Pacific Specialty Ins Co
16942	MMIC Ins, Inc	78743	New Era Life Ins Co	70785	Pacificare Life And Health Ins Co
70416	MML Bay State Life Ins Co	69698	New Era Life Ins Co of the Midwest	* 17327	Palms Specialty Ins Co Inc
10675	Mobilitas General Ins Co	23841	New Hampshire Ins Co	* 16754	Palomar Excess and Surplus Ins Co
57541	Modern Woodmen Of Amer	* 35432	New Jersey Re-Ins Co	20338	Palomar Specialty Ins Co
81442	Monitor Life Ins Co of New York	91596	New York Life Ins And Annuity Corp	93459	Pan-Amer Assurance Co
32506	Monroe Guaranty Ins Co	66915	New York Life Ins Co	67539	Pan-Amer Life Ins Co
66370	Mony Life Ins Co	16608	New York Marine And General Ins Co	11518	Paramount Ins Co
29858	Mortgage Guaranty Ins Corp	16285	Next Insurance US Co	60003	Park Avenue Life Ins Co
13331	Motorists Commercial Mutual Ins Co	14788	NGM Ins Co	10859	Park National Ins Co

\* - Recognized Trustee or Accredited Reinsurer

## - Recognized Trustee Reinsurer (for reinsurance agreements inception on or after August 1, 1995)

\*\* - Authorized pursuant to Chapter 46 or 47

# Companies for which Reinsurance Credits are Allowed

Use this list of COMPANIES FOR WHICH REINSURANCE CREDITS ARE ALLOWED IN MICHIGAN as of December 31, 2024 to complete the reinsurance section of the 2024 annual statement. Any company not appearing on this list is considered Unauthorized as of December 31, 2024

NAIC #	Company Name	NAIC #	Company Name	NAIC #	Company Name
71099	Parker Centennial Assur Co	24252	Progressive Amer Ins Co	57657	Royal Neighbors Of Amer
38636	Partner Rein Co Of The US	24260	Progressive Casualty Ins Co	22314	RSUI Indemnity Co
*	Partner Reins Co, Ltd	42994	Progressive Classic Ins Co	39039	Rural Community Ins Co
11835	PartnerRe America Ins Co	* 16322	Progressive Direct Ins Co	11134	Rural Trust Ins Co
74900	PartnerRe Life Reins Co of Amer	* 42412	Progressive Gulf Ins Co	60183	S.USA Life Ins Co, Inc
13439	Partners Mutual Ins Co	16816	Progressive Life Ins Co	24740	Safeco Ins Co Of Amer
23442	Patriot General Ins Co	37605	Progressive Marathon Ins Co	39012	Safeco Ins Co Of IL
32069	Patriot Ins Co	10187	Progressive Michigan Ins Co	36560	SafePort Ins Co
60099	Patriot Life Ins Co	* 35190	Progressive Mountain Ins Co	11123	Safety First Ins Co
67598	Paul Revere Life Ins Co	* 38628	Progressive Northern Ins Co	15105	Safety National Casualty Corp
18333	Peerless Indemnity Ins Co	* 42919	Progressive Northwestern Ins Co	12521	Safeway Ins Co
24198	Peerless Ins Co	37834	Progressive Preferred Ins Co	40460	Sagamore Ins Co
24228	Pekin Ins Co	32786	Progressive Specialty Ins Co	38300	Samsung Fire & Marine Ins Co, Ltd
67628	Pekin Life Ins Co	34690	Prop & Cas Ins Co Of Hartford	70435	Savings Bank Mutual Life Ins Co of MA
16651	Pekin Select Insurance Co.	32905	Property-Owners Ins Co	60176	SBLI USA Life Ins Co, Inc
14958	Peninsula Ins Co	10638	ProSelect Ins Co	64688	SCOR Global Life Americas Rein Co
93262	Penn Ins And Annuity Co	12416	Protective Ins Co	87017	SCOR Global Life Reins Co of DE
14982	Penn Millers Ins Co	88536	Protective Life & Annuity Ins Co	97071	SCOR Global Life USA Reins Co
67644	Penn Mutual Life Ins Co	68136	Protective Life Ins Co	30058	SCOR Reins Co
32859	Penn-Amer Ins Co	35769	Protective Prop & Cas Ins Co	15580	Scottsdale Indemnity Co
14974	Pennsylvania Lumbermens Mut Ins Co	56863	Providence Assoc of the Ukra	22543	SECURA Ins Co
12262	Pennsylvania Manu Assoc Ins Co	24295	Providence Washington Ins Co	10239	SECURA Supreme Ins Co
41424	Pennsylvania Manufacturers Indemnity Co	68195	Provident Life And Accident Ins Co	10054	Securian Casualty Co
14990	Pennsylvania Nat'l Mutual Casualty Ins Co	79227	Pruco Life Ins Co	93742	Securian Life Ins Co
12297	Petroleum Casualty Co	68241	Prudential Ins Co Of Amer	66516	Securico Life Ins Co
13714	Pharmacists Mutual Ins Co	71390	Puritan Life Ins Co of America	68675	Security Benefit Life Ins Co
23175	Phenix Mutual Fire Insurance Co.	39217	QBE Ins Corp	68713	Security Life Of Denver Ins Co
67784	Philadelphia Amer Life Ins Co	10219	QBE Reins Corp	68772	Security Mutual Life Ins Co Of NY
18058	Philadelphia Indemnity Ins Co	* 93688	QCC Ins Co	19879	Security National Ins Co
25623	Phoenix Ins Co	23132	R.V.I. America Ins Co	69485	Security National Life Ins Co
40738	Physicians Insurance	33790	Radian Guaranty, Inc	22233	Select Ins Co
72125	Physicians Life Ins Co	51632	Radian Title Insurance Inc	12572	Selective Ins Co Of Amer
80578	Physicians Mutual Ins Co	15756	Radnor Specialty Ins Co	13730	Selective Ins Co Of NY
21857	Pie Ins Co, The	50440	Real Advantage Title Ins Co	19259	Selective Ins Co Of SC
21296	Pinnacle National Ins Co	11673	Redwood Fire and Casualty Ins Co	39926	Selective Ins Co Of the Southeast
15137	PinnaclePoint Ins Co	24449	Regent Ins Co	26301	Selective Way Ins Co
67911	Pioneer Mutual Life Ins Co	68357	Reliable Life Ins Co	10936	Seneca Ins Co
18309	Pioneer State Mutual Ins Co	68381	Reliance Standard Life Ins Co	78662	Senior Life Ins Co
10817	Plateau Casualty Ins Co	61360	Reliastar Bankers Sec Life Ins Co OF NY	11000	Sentinel Ins Co, Ltd
97152	Plateau Ins Co	67105	Reliastar Life Ins Co	12870	Sentruity Cas Co
18619	Platte River Ins Co	61700	Renaissance Life & Health Ins Co of America	28460	Sentry Casualty Co
30945	Plaza Ins Co	* 10357	Renaissance Rein US Inc	24988	Sentry Ins Co
25747	Point Specialty Ins Co	*	Renaissance Reins Ltd	68810	Sentry Life Ins Co
56820	Polish Falcons Of Amer	* 15529	RenaissanceRe Europe AG, US Branch	21180	Sentry Select Ins Co
57622	Polish National Alliance Of The USA	10810	Republic Fire and Casualty Ins Co	22985	Sequoia Ins Co
57630	Polish Roman Catholic Union Of Amer	22179	Republic Indemnity Co Of Amer	56936	Serb National Federation
16659	Poseidon Commercial Ins Co	43753	Republic Indemnity Co Of CA	39152	Service American Indemnity Co
13694	Poseidon Structured Mortgage Ins Co	12475	Republic-Franklin Ins Co	43389	Service Lloyds Ins Co, a Stock Company
11863	Positive Physicians Ins Co	31089	Repwest Ins Co	11347	SFM Mutual Ins Co
37257	Praetorian Ins Co	68462	Reserve National Ins Co	26557	Shelter Reins Co
10900	Preferred Employers Ins Co	26050	Response Worldwide Ins Co	81434	ShelterPoint Life Ins Co
36234	Preferred Professional Ins Co	12471	Retailers Ins Co	68845	Shenandoah Life Ins Co
50026	Premier Land Title Ins Co	93777	Revol One Ins Co	71420	Sierra Health and Life Ins Co, Inc
12773	Prescient National Ins Co	89004	RGA Life and Annuity Ins Co	62952	SILAC Ins Co
13721	PrimeOne Ins Co	93572	RGA Reins Co	12575	SilverScript Ins Co
65919	Primerica Life Ins Co	*	River Thames Ins Co Ltd	38776	SiriusPoint America Ins Co
61271	Principal Life Ins Co	36684	Riverport Ins Co	57193	Slovak Catholic Sokol
71161	Principal Nat'l Life Ins Co	65005	RiverSource Life Ins Co	57673	Slovene National Benefit Society
12208	Priority Health Ins Co	21261	RiverStone International Insurance, Inc.	15261	Society Ins, A Mutual Co
12873	Privilege Underwriters Reciprocal Exchange	13056	RLI Ins Co	38997	Sompo America Fire & Marine Ins Co
33391	ProAssurance Indemnity Co, Inc	12491	Rochdale Ins Co	11126	Sompo America Ins Co
14460	ProAssurance Ins Co of America	42706	Roche Surety & Casualty Co, Inc	37141	Southern General Ins Co
21903	ProCentury Ins Co	11089	Rock Ridge Ins Co	19178	Southern Guaranty Ins Co
34312	Producers Agriculture Ins Co	11974	Rocket Title Insurance Co.	19216	Southern Ins Co
68047	Professional Ins Co	27065	Rockhill Mutual Ins Co	10190	Southern-Owners Ins Co
11127	Professional Solutions Ins Co	35505	Rockwood Cas Ins Co	12294	Southwest Marine & Gen Ins Co
29017	Professionals Advocate Ins Co	24503	Root Prop & Cas Ins Co	**	Specialty Ag

\* - Recognized Trusteed or Accredited Reinsurer

## - Recognized Trusteed Reinsurer (for reinsurance agreements inception on or after August 1, 1995)

\*\* - Authorized pursuant to Chapter 46 or 47

# Companies for which Reinsurance Credits are Allowed

Use this list of COMPANIES FOR WHICH REINSURANCE CREDITS ARE ALLOWED IN MICHIGAN as of December 31, 2024 to complete the reinsurance section of the 2024 annual statement. Any company not appearing on this list is considered Unauthorized as of December 31, 2024

NAIC #	Company Name	NAIC #	Company Name	NAIC #	Company Name
24376	Spinnaker Ins Co	88072	Talcott Resolution Life Ins Co	15885	TypTap Ins Co
**	Squire Re	41050	TDC National Assur Co	35416	U.S. Underwriters Ins Co
**	Squire Re II	69345	Teachers Ins & Annuity Assoc Of Amer	57215	Ukrainian National Assoc
24767	St. Paul Fire And Marine Ins Co	22683	Teachers Ins Co	11121	Unified Life Ins Co
24775	St. Paul Guardian Ins Co	42376	Technology Ins Co, Inc	91529	Unimerica Ins Co
24791	St. Paul Mercury Ins Co	**	Tenda	62596	Union Fidelity Life Ins Co
19224	St. Paul Protective Ins Co	24813	Tesla Ins Co	25844	Union Ins Co
**	Stable One	24821	Tesla Property & Casualty, Inc	21423	Union Ins Co of Providence
19070	Standard Fire Ins Co	69396	Texas Life Ins Co	69744	Union Labor Life Ins Co
42986	Standard Guaranty Ins Co	10393	Texas Medical Ins Co	70408	Union Security Ins Co
69019	Standard Ins Co	56014	Thrivent Financial For Lutherans	92916	United Amer Ins Co
86355	Standard Life And Accident Ins Co	60142	TIAA-CREF Life Ins Co	36226	United Casualty and Surety Ins Co
71706	Standard Life and Casualty Ins Co	92908	Tier One Ins Co	11142	United Casualty Ins Co Of Amer
69078	Standard Security Life Ins Co Of NY	25534	TIG Ins Co	85766	United Concordia Ins Co
18023	Star Ins Co	36269	Titan Ins Co	11770	United Financial Casualty Co
68985	Starmount Life Ins Co	50016	Title Resources Guaranty Co	13021	United Fire & Casualty Co
40045	Starnet Ins Co	32301	TNUS Ins Co	15873	United Guaranty Residential Ins Co
38318	Starr Indemnity & Liability Co	42439	Toa Rein Co Of Amer (The)	16667	United Guaranty Residential Ins Of NC
16109	Starr Specialty InsCo	44245	Toggle Ins Co	63983	United Heritage Life Ins Co
* 13604	Starr Surplus Lines Ins Co	10945	Tokio Marine America Ins Co	69922	United Home Life Ins Co
*	StarStone Insurance SE	11027	Tower Hill Prime Ins Co	69930	United Ins Co Of Amer
25496	Starstone National Ins Co	37621	Toyota Motor Ins Co	69973	United Life Ins Co
25127	State Auto Prop & Cas Ins Co	41238	Trans Pacific Ins Co	* 13064	United National Ins Co
25135	State Automobile Mutual Ins Co	69566	Trans World Assurance Co	92703	United Natl Life Ins Co of America
17133	State Farm Classic Ins Co	10952	Transamerica Casualty Ins Co	69868	United Of Omaha Life Ins Co
25143	State Farm Fire And Casualty Co	70688	Transamerica Financial Life Ins Co	25941	United Services Automobile Assoc
25151	State Farm General Ins Co	86231	Transamerica Life Ins Co	29157	United Wisconsin Ins Co
94498	State Farm Health Ins Co	19453	Transatlantic Reins Co	72850	United World Life Ins Co
69108	State Farm Life Ins Co	28886	Transguard Ins Co Of Amer	79413	UnitedHealthcare Ins Co
25178	State Farm Mutual Automobile Ins Co	20494	Transportation Ins Co	84549	UnitedHealthcare Ins Co of America
69116	State Life Ins Co	28188	TravCo Ins Co	97179	UnitedHealthcare Life Ins Co
69132	State Mutual Ins Co	36463	TravCo Personal Ins Co	16063	Unitrin Auto & Home Ins Co
12831	State National Ins Co, Inc	31194	Travelers Casualty & Surety Co Of Amer	10226	Unitrin Direct Ins Co
33049	State Volunteer Mutual Ins Co	19038	Travelers Casualty and Surety Co	10915	Unitrin Direct Prop & Cas Co
77399	Sterling Life Ins Co	36170	Travelers Casualty Co Of CT	25909	Unitrin Preferred Ins Co
50121	Stewart Title Guaranty Co	41769	Travelers Casualty Co, The	40843	Universal Underwriters Of TX Ins Co
25180	Stillwater Ins Co	19046	Travelers Casualty Ins Co of Amer	32867	Universal Fire & Casualty Ins Co
16578	Stillwater Prop & Cas Ins Co	40282	Travelers Commercial Casualty Co	10861	Universal Prop & Cas Ins Co
11828	Stonewood Ins Co	36137	Travelers Commerical Ins Co	25933	Universal Surety Co
10340	Stonington Ins Co	41750	Travelers Constitution State Ins Co	13200	Universal Surety Of Amer
40436	Stratford Ins Co	27998	Travelers Home & Marine Ins Co	41181	Universal Underwriters Ins Co
11024	Strathmore Ins Co	25658	Travelers Indemnity Co	12816	University of Michigan Health Ins. Co.
10130	SU Ins Co	25666	Travelers Indemnity Co Of Amer	67601	Unum Ins Co
15136	SummitPoint Ins Co	25682	Travelers Indemnity Co Of CT	62235	UNUM Life Ins Co Of Amer
**	Sun Insurance Inc.	36145	Travelers Personal Security Ins Co	25887	US Fidelity & Guaranty Co
80926	Sun Life and Health Ins Co	25674	Travelers Prop Casualty Co of Amer	84530	US Financial Life Ins Co
80802	Sun Life Assurance Co Of Canada	36161	Travelers Property Casualty Ins Co	21113	US Fire Ins Co
**	Sun Life Finan. U.S.	56006	Travelers Protective Assoc Of Amer	97772	US Health and Life Ins Co
10909	Sun Surety Ins Co	**	Traverse Ins.	25895	US Liability Ins Co
34762	Sunz Ins Co	28535	Triangle Ins Co, Inc	70106	US Life Ins Co In The City Of NY
* 16551	Superior Specialty Ins Co	19887	Trinity Universal Ins Co	29599	US Specialty Ins Co
58181	Supremem Council of the Royal Arcanum	31003	Tri-State Ins Co Of MN	70955	USA Life One Ins Co Of IN
13175	Surency Life & Health Ins Co	22225	Trisura Ins Co	30457	USA Underwriters Insurance Co.
10916	SureTec Ins Co	41211	Triton Ins Co	25968	USAA Casualty Ins Co
69310	Surety Life Ins Co	41106	Triumphe Casualty Co	18600	USAA General Indemnity Co
25798	Sutton National Ins Co	38873	TRM Specialty Ins. Co.	69663	USAA Life Ins Co
99538	SWBC Life Ins Co	92525	TruAssure Ins Co	94358	Usable Life
29700	Swiss Re Corp Solutions Elite Ins Corp	21709	Truck Ins Exchange	25976	Utica Mutual Ins Co
29874	Swiss Re Corporate Solutions America Ins Corp	27120	Trumbull Ins Co	*	Validus Reinsurance (Switzerland) Ltd
32778	Swiss Re Corporate Solutions Premier Ins Corp	56030	Trusted Fraternal Life	*	Validus Reinsurance, Ltd
82627	Swiss RE Life & Health Amer, Inc	**	Trustee Partners	20508	Valley Forge Ins Co
25364	Swiss Reins Amer Corp	61425	Trustmark Ins Co	21172	Vanliner Ins Co
68608	Symetra Life Ins Co	62863	Trustmark Life Ins Co	32077	Vantage Risk Assurance Co
90581	Symetra National Life Ins Co	* 37982	Tudor Ins Co	44768	Vantapro Specialty Ins Co
12866	T.H.E. Ins Co	**	Tuebor	68632	Vantis Life Ins Co
93505	Talcott Resolution Int'l Life Reassur Corp	60117	Tufts Ins Co	70238	Variable Annuity Life Ins Co
71153	Talcott Resolution Life & Annuity Ins Co	29459	Twin City Fire Ins Co	16186	Vault Reciprocal Exchange

\* - Recognized Trusteed or Accredited Reinsurer

## - Recognized Trusteed Reinsurer (for reinsurance agreements incepting on or after August 1, 1995)

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# Companies for which Reinsurance Credits are Allowed

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NAIC #	Company Name	NAIC #	Company Name	NAIC #	Company Name
80942	Venerable Life and Annuity Co	26220	Yosemite Ins Co		
10815	Verlan Fire Ins Co	30325	Zale Indemnity Co		
42889	Victoria Fire & Casualty Co	13269	Zenith Ins Co		
20397	Vigilant Ins Co	30120	ZNAT Ins Co		
13060	Virginia Builders Ins. Co.	17044	ZPIC Ins Co		
40827	Virginia Surety Co, Inc	27855	Zurich Amer Ins Co Of IL		
13750	Vision Benefits of America II Inc	90557	Zurich Amer Life Ins Co		
39616	Vision Service Plan Ins Co	16535	Zurich American Ins Co		
86509	Voya Retirement Ins and Annuity Co				
26085	Warner Ins Co				
**	Warriors Pharmacy				
70319	Washington National Ins Co				
25585	Watford Ins Co				
26069	Wausau Business Ins Co				
26042	Wausau Underwriters Ins Co				
40517	WCF National Ins Co				
21865	WCF Select Ins Co				
83445	Wellcare Health Ins Of AZ, Inc				
10155	WellcarePrescription Ins, Inc				
32280	Wellfleet Ins Co				
20931	Wellfleet New York Ins Co				
**	WellNex				
14078	Wellpoint Ins Co				
80314	Wellpoint Life and Health Ins Co				
25011	Wesco Ins Co				
44393	West Amer Ins Co				
15350	West Bend Ins Co				
70335	West Coast Life Ins Co				
10030	Westchester Fire Ins Co				
50050	Westcor Land Title Ins Co				
27871	Western Agricultural Ins Co				
70483	Western And Southern Life Ins Co				
15377	Western National Mutual Ins Co				
13188	Western Surety Co				
85189	Western United Life Insurance Co.				
* 13196	Western World Ins Co				
92622	Western-Southern Life Assurance Co				
16447	Westfield Champion Ins Co				
24112	Westfield Ins Co				
24120	Westfield National Ins Co				
16450	Westfield Premier Ins Co				
17105	Westfield Select Ins Co				
16449	Westfield Superior Ins Co				
16448	Westfield Touchstone Ins Co				
11981	WestGuard Ins Co				
39845	Westport Ins Corp				
51152	WFG National Title Ins Co				
11932	White Pine Ins Co				
53139	WI Physicians Serv Ins Corp				
62413	Wilcac Life Ins Co				
57010	William Penn Assoc				
66230	William Penn Life Ins Co of NY				
25780	Williamsburg National Ins Co				
13234	Wilshire Insurance Co.				
19950	Wilson Mutual Insurance Co.				
60704	Wilton Reass Life Co of NY				
66133	Wilton Reassur Co				
15407	Wolverine Mutual Ins Co				
57320	Woodmen Of The World Life Ins Society				
**	Woodward Straits				
31232	Work First Casualty Co				
11523	Wright National Flood Ins Co				
80055	Wysh Life and Health Ins Co				
24554	XL Ins America, Inc				
40193	XL Ins Co Of New York, Inc				
20583	XL Reins Amer, Inc				
37885	XL Specialty Ins Co				

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