This Checklist Applies to the Following Types of Insurance (TOI):

* H16I.004 Individual Health - Major Medical, Sub-TOI for H16G.004 Short Term

Please refer to September 14, 2018 from Director Bruce R. Ramge
<https://doi.nebraska.gov/sites/doi.nebraska.gov/files/doc/Short-TermDurationMedical%2009142018.pdf>

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| **FILER: PLEASE TYPE IN THE SERFF FILING NUMBER AND EACH FORM NUMBER SUBMITTED FOR DOI APPROVAL IN THIS FILING, AND LIST THE TOI THAT APPLIES** |
|  | [SERFF filing number and form numbers here] | [TOI here] |
| **(DOI reviewer)****Check as completed** | **Review Requirements** | **Reference** | **Description** | **Page number, form name & number if separate document, or N/A** |
|  | **COVER PAGE** |
| 🞏 | Full Company name and address | [§ 44-350](https://nebraskalegislature.gov/laws/statutes.php?statute=44-350) | Advisable to include contact phone and email for questions. |  |
| 🞏 | Descriptive title | NE Filing Requirement | A brief description of the type of coverage.  |  |
| 🞏 | One officers’ signature required on face page (or last page) | NE Filing Requirement | Can be bracketed as variable for future replacement of officers. |  |
| 🞏 | Application and Premium | NE Filing Requirement | Entire money and other considerations expressed therein. |  |
| 🞏 | Effective Date | NE Filing Requirement | The time insurance takes effect and terminates. Include renewability information. |  |
| 🞏 | Form number | NE Filing Requirement | Must be on all pages including cover, in the lower left corner to identify and distinguish form from all others used by company. Must match form number on SERFF Form Schedule tab and NE Filing Form List. |  |

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|  | **COVER PAGE DISCLOSURES** |
| 🞏 | FederalGovernment Notice 2 | [Director Ramge Notice 9/14/18](https://doi.nebraska.gov/sites/doi.nebraska.gov/files/doc/Short-TermDurationMedicalPlanFilingReqs.pdf) |  |  |
| 🞏 | 10-day Free Look  | [Director Ramge Notice 9/14/18](https://doi.nebraska.gov/sites/doi.nebraska.gov/files/doc/Short-TermDurationMedicalPlanFilingReqs.pdf)[44-710.18](https://nebraskalegislature.gov/laws/statutes.php?statute=44-710.18) |  |  |
|  | **SCHEDULE PAGE****[may be submitted as a septate insert page]** |
| 🞏 | Complete Schedule of Benefits page with hypothetical variable data  | Industry norm | Include Covered Services, deductibles, co-pays, coinsurance, OOPM, limits, tiers, In-Network benefits, Out-of-Network benefits.  |  |
|  | **DEFINITIONS** |
| 🞏 | Policy and Statutory definitions, if any  | Industry norm | Include definitions for terms used in contract. |  |
| 🞏 | Eligibility, Dependents | [§ 44-710.01 (3)](https://nebraskalegislature.gov/laws/statutes.php?statute=44-710.01&print=true)[44-7,103](https://nebraskalegislature.gov/laws/statutes.php?statute=44-7,103&print=true) | May insure one adult as policyholder and one or more eligible members of family, including spouse, dep. children, or any children under a certain age not to exceed age 30. |  |
| 🞏 | Disabled Child | [§ 44-710.01 (3)](https://nebraskalegislature.gov/laws/statutes.php?statute=44-710.01&print=true) | Reaching age limit shall not terminate child’s coverage if incapable of self-support due to intellectual or physical disability. Furnish proof within 31 days of limiting age. |  |
| 🞏 | Newborn | 44-710.19 | Covered from moment of birth. Automatic coverage first 31 days. |  |
| 🞏 | Adopted Child | 44-799 | Covered from date of placement |  |
|  | **STANDARD MANDATORY PROVISIONS** |
| 🞏 | Length of the contract | [Director Ramge Notice 9/14/18](https://doi.nebraska.gov/sites/doi.nebraska.gov/files/doc/Short-TermDurationMedicalPlanFilingReqs.pdf) | The carrier shall display the duration of the contract. The policy may not exceed 364 days in length.  |  |
| 🞏 | Renewability  | [Director Ramge Notice 9/14/18](https://doi.nebraska.gov/sites/doi.nebraska.gov/files/doc/Short-TermDurationMedicalPlanFilingReqs.pdf) | The policy may be renewed up to 36 months. The carrier must provide, in clear and unambiguous terms, the process for renewal of the policy by both the carrier and the insured, the length of time the carrier will allow renewal, the additional costs, if any, for renewal. The carrier shall additionally disclose, within the policy, any reasons that it may choose to not renew a policy. The carrier shall also disclose whether or not any additional underwriting will occur at the point of renewal and what the consequences of re-underwriting are in relation to the cost and coverage of the policy.  |  |
| 🞏 | Pre-Existing Conditions | [Director Ramge Notice 9/14/18](https://doi.nebraska.gov/sites/doi.nebraska.gov/files/doc/Short-TermDurationMedicalPlanFilingReqs.pdf) | The carrier shall clearly define within the policy what constitutes a pre-existing condition. If the policy offers a waiver of pre-existing conditions, the policy must also contain a statement as to how the conditions are waived, length of the waiver and additional premium costs, if any, of the waiver.  |  |
| 🞏 | ACA Comparison chart | [Director Ramge Notice 9/14/18](https://doi.nebraska.gov/sites/doi.nebraska.gov/files/doc/Short-TermDurationMedicalPlanFilingReqs.pdf) | The carrier shall provide a comparison between the benefits offered in the plan compared to the benefits required under an Affordable Care Act (ACA) individual market plan. If the plan provides benefits that are mandated under the ACA, but at a coverage level lower than the ACA coverage standard, the policy shall disclose an explanation of the limited level of benefit coverage in order to prevent consumer confusion.  |  |
| 🞏 | Provider Networks | [Director Ramge Notice 9/14/18](https://doi.nebraska.gov/sites/doi.nebraska.gov/files/doc/Short-TermDurationMedicalPlanFilingReqs.pdf) | The carrier must provide a disclosure of the plan’s provider network. The website and toll-free number shall be displayed prominently in the policy and in advertisements.  |  |
| 🞏 | Appeal procedure | [44-7310](https://nebraskalegislature.gov/laws/statutes.php?statute=44-7310&print=true)[44-7311](https://nebraskalegislature.gov/laws/statutes.php?statute=44-7311&print=true) | Standard internal review of adverse determination with written decision within 15 working days. Expedited review within 72 hours. |  |
| 🞏 | External Review | [Director Ramge Notice 9/14/18](https://doi.nebraska.gov/sites/doi.nebraska.gov/files/doc/Short-TermDurationMedicalPlanFilingReqs.pdf)[44-1308](https://nebraskalegislature.gov/laws/statutes.php?statute=44-1308&print=true)[44-1309](https://nebraskalegislature.gov/laws/statutes.php?statute=44-1309&print=true)[44-1310](https://nebraskalegislature.gov/laws/statutes.php?statute=44-1310&print=true)Title 210 [Chapter 87](http://www.sos.ne.gov/rules-and-regs/regsearch/Rules/Insurance_Dept_of/Title-210/Chapter-87.pdf) | Complete internal review first. Request for external review made to DOI within 4 months after internal appeal decision. IRO assigned. Written decision within 45 days. |  |
| 🞏 | Policy fees |  [44-354](https://nebraskalegislature.gov/laws/statutes.php?statute=44-354) | Disclose any fees in the policy schedule.  |  |
| 🞏 | GINA |  | Federal Genetic Information Non-discrimination Act - Family health history questions or requests for genetic information are not allowed. |  |
| 🞏 | Summary of Benefits and Coverage (SBC) | NE Filing Requirement | SBC required for each Major Medical Plan. |  |
| 🞏 | Death of Insured – refund unearned premium | [§ 44-310](https://nebraskalegislature.gov/laws/statutes.php?statute=44-310&print=true) | In the event of the death of the insured, the insurer shall refund the unearned premium prorated to the month of the insured's death if the request has been made within one year after the insured's death. The refund of the premium and termination of the coverage shall be without prejudice to any claim originating prior to the date of the insured's death. |  |
| 🞏 | NebraskaMandated Benefits | [44-785](https://nebraskalegislature.gov/laws/statutes.php?statute=44-785)[44-786](https://nebraskalegislature.gov/laws/statutes.php?statute=44-786)[44-788](https://nebraskalegislature.gov/laws/statutes.php?statute=44-788)[44-790](https://nebraskalegislature.gov/laws/statutes.php?statute=44-790)[44-796](https://nebraskalegislature.gov/laws/statutes.php?statute=44-796&print=true)[44-797](https://nebraskalegislature.gov/laws/statutes.php?statute=44-797)[44-7,102](https://nebraskalegislature.gov/laws/statutes.php?statute=44-7,1024) | 🞏Mammography🞏OB/GYN🞏Drug coverage cancer/AIDS🞏Diabetes🞏Newborn hearing screening🞏Reconstructive breast surgery🞏\*Colorectal cancer screening (\*plans 6 months or longer) |  |
| 🞏 | Hearing Aid Mandate | 44-5004 **(effective 1/1/2020** | Beginning 1/1/20, plans must cover children (ages 0-18), for each ear affected by hearing impairment, including:(a) A hearing aid purchased from a licensed audiologist with the medical clearance from an otolaryngologist and costs related to dispensing such hearing aid;(b) Evaluation for a hearing aid;(c) Fitting of a hearing aid;(d) Programming of a hearing aid;(e) Probe microphone measurements for verification that hearing aid gain and output meet the prescribed targets;(f) Hearing aid repairs;(g) Follow-up adjustments, servicing, and maintenance of a hearing aid;(h) Ear mold impressions;(i) Ear molds; and(j) Auditory rehabilitation and training.These items must be “covered on a continual basis to the extent that benefits paid for such items and services during the immediately preceding forty-eight-month period have not exceeded three thousand dollars.”Replacement hearing aids and associated services should be covered within three months of the dispensing date if the hearing aid fails to meet prescribed targets or the hearing aid is unable to be repaired or adjusted.  If an insured child uses a hearing aid on the effective date of this law and the hearing aid has been deemed unrepairable or obsolete by the manufacturer of the device, the insured child is eligible to use the benefits required by this law towards the acquisition of a new hearing aid, parts, and associated services.  Coverage under this law must be subject to the same deductible, copayment, and coinsurance as similar covered items and services under the health plan. |  |
| 🞏 | Renewability | [44-787](https://nebraskalegislature.gov/laws/statutes.php?statute=44-787) | Preempted by short-term limited duration insurance federal standards. See [Director Ramge Notice 9/14/18](https://doi.nebraska.gov/sites/doi.nebraska.gov/files/doc/Short-TermDurationMedicalPlanFilingReqs.pdf) |  |
| 🞏 | Mental health coverage parity | [44-793](https://nebraskalegislature.gov/laws/statutes.php?statute=44-793) | Note that if coverage is provided, parity is required. |  |
| 🞏 | Oral anticancer meds | [44-7,104](https://nebraskalegislature.gov/laws/statutes.php?statute=44-7,104) | Cover oral anticancer meds no less favorable than intravenous or injected anticancer meds.  |  |
| 🞏 | Mail order drugs | 44-513.02 | Mail order pharmacy cannot be mandatory. Same copay for prescriptions less than 180 days whether they are obtained through pharmacy or mail. N/A to long term maintenance drugs or HMO. |  |
| 🞏 | Synchronizing prescriptions | [LB 442](https://www.nebraskalegislature.gov/FloorDocs/106/PDF/Final/LB442.pdf) | LB 442 would enable beneficiaries to synchronize their medications, so they could order and receive them on the same day each month instead of having to make multiple visits to the dispensing pharmacy. This would reduce medication waste, as well as the poor healthcare outcomes that result from decreased medication adherence. In addition, the provisions in LB 442 would ensure that a pharmacy would receive a full dispensing fee, as determined by the contract it has with the individual or group health plan, as the pharmacy overhead cost remain the same. |  |
| 🞏 | Prescription Drug Manufacturer Coupons | [§ 156.130(h)](https://www.govinfo.gov/content/pkg/FR-2019-04-25/pdf/2019-08017.pdf) (pages 114-115 of 115) does not apply to short-term medical. | Insurers can exclude drug coupons from deductible and any maximum out-of-pocket limitation. |  |
| 🞏 | Information regarding cost, price, or copayment of a prescription drug; pharmacist or contracted pharmacy | [§ 71-2484](https://nebraskalegislature.gov/laws/statutes.php?statute=71-2484&print=true) | SBP and any description of pharmacy copays should include a statement where the pharmacy's price is lower than the stated copayment; the insured is only required to pay the pharmacy price. |  |
| 🞏 | Autism Spectrum | [44-7,106](https://nebraskalegislature.gov/laws/statutes.php?statute=44-7,106&print=true) | Screening, diagnosis, and treatment of autism spectrum disorder in individuals under age 21. |  |
| 🞏 | Maternity Stay | [PHSA 2725 (45 CFR 148.170)](https://www.law.cornell.edu/cfr/text/45/148.170)(applies to short-term medical) | May not restrict hospital stay to less than 48 hours for normal delivery or 96 hours for C-section. |  |
| 🞏 | Network Adequacy | [44-7105](https://nebraskalegislature.gov/laws/statutes.php?statute=44-7105) | For plans with a network: Reasonable access standards, travel time, number of specialists, current complete provider directory online and paper on request.If the carrier’s in-network hospital does not have an in-network ancillary provider, then the carrier has to reimburse the nonparticipating provider at UCR.  This requires a definition of UCR with a method to calculate UCR, not just “in an amount determined by the insurer. |  |
| 🞏 | Entire contract | [§ 44-710.03 (1)](https://nebraskalegislature.gov/laws/statutes.php?statute=44-710.03&print=true) | The policy and any attached papers (endorsements, riders, amendments and application) constitute the entire contract. No policy change valid unless approved & signed by executive officer. |  |
| 🞏 | Time Limit on Certain Defenses and incontestability | [§ 44-710.03 (2)](https://nebraskalegislature.gov/laws/statutes.php?statute=44-710.03&print=true) | After two years from date of policy issue, no misstatements, except fraudulent misstatements, made in application may be used to void policy or deny claim. |  |
| 🞏 | Grace Period |  [§ 44-710.03 (3)](https://nebraskalegislature.gov/laws/statutes.php?statute=44-710.03&print=true) | Policy continues in force during Grace Period. Usually 31 days. |  |
| 🞏 | Reinstatement | [§ 44-710.03 (4)](https://nebraskalegislature.gov/laws/statutes.php?statute=44-710.03&print=true) | If money accepted with no reinstatement application, it is reinstated. If application is required and a conditional receipt is given, the policy is reinstated upon approval or 45 days following date of conditional receipt unless insurer provides disapproval in writing.• Reinstated policy covers loss from accidental injury after reinstatement date.• Reinstated policy covers loss due to sickness more than 10 days after reinstatement date.• Premium applied to period not more than 60 days prior to date of reinstatement. |  |
| 🞏 | Notice of Claim | [§ 44-710.03](https://nebraskalegislature.gov/laws/statutes.php?statute=44-710.03&print=true) [(5)](https://nebraskalegislature.gov/laws/statutes.php?statute=44-710.03&print=true) | 20 days after loss or as soon as reasonably possible |  |
| 🞏 | Claim Form | [§ 44-710.03 (6)](https://nebraskalegislature.gov/laws/statutes.php?statute=44-710.03&print=true) | If claim forms not furnished by insurer within 15 days, file proof of loss. |  |
| 🞏 | Proof of Loss | [§ 44-710.03 (7)](https://nebraskalegislature.gov/laws/statutes.php?statute=44-710.03&print=true) | 90 days after loss or as soon as possible but no later than one year unless legally incapacitated. |  |
| 🞏 | Time of Payment of Claim | [§ 44-710.03 (8)](https://nebraskalegislature.gov/laws/statutes.php?statute=44-710.03&print=true) | Immediately upon receipt of proof of loss. (Will accept within 30 days.) |  |
| 🞏 | Payment of Claim | [§ 44-710.03 (9)](https://nebraskalegislature.gov/laws/statutes.php?statute=44-710.03&print=true) | Minor or incompetent to give valid release – can pay to relative up to $5000 |  |
| 🞏 | Physical Exam and Autopsy | [§ 44-710.03 (10)](https://nebraskalegislature.gov/laws/statutes.php?statute=44-710.03&print=true) | At insurer’s expense as often as reasonably required during pendency of claim |  |
| 🞏 | Legal Actions | [§ 44-710.03 (11)](https://nebraskalegislature.gov/laws/statutes.php?statute=44-710.03&print=true) | 60 days, 3 years |  |
| 🞏 | Change of Beneficiary | [§ 44-710.03 (12)](https://nebraskalegislature.gov/laws/statutes.php?statute=44-710.03&print=true) | Right to change beneficiary unless irrevocable. |  |
| 🞏 | Conformity with State and Federal Law | [§ 44-710.03 (13](https://nebraskalegislature.gov/laws/statutes.php?statute=44-710.03&print=true)) | Based on where insured resides on effective date of policy. |  |
|  | Hearing Aid mandate | [LB15 approved 5/29/2019](https://nebraskalegislature.gov/FloorDocs/106/PDF/Slip/LB15.pdf) | Beginning 1/1/20, plans must cover children (ages 0-18), for each ear affected by hearing impairment, list in linked law. |  |
| 🞏 | Misstatement of Age | [§ 44-710.04 (2)](https://nebraskalegislature.gov/laws/statutes.php?statute=44-710.04&print=true) | If age of insured has been misstated, the amount payable under the policy shall be such as the premium paid would purchase at the correct age. Misstatement of “Facts” is too broad. |  |
| 🞏 | Felony exclusion | [§ 44-710.04 (10)](https://nebraskalegislature.gov/laws/statutes.php?statute=44-710.04&print=true) | Commission of or attempt to commit a felony or being engaged in an illegal occupation. |  |
| 🞏 | Intoxicants and Narcotics exclusion | [§ 44-710.04 (11)](https://nebraskalegislature.gov/laws/statutes.php?statute=44-710.04&print=true) | Insured being intoxicated or under influence of narcotics unless administered on advice of physician. |  |
| 🞏 | Exclusion for incarceration | NE Filing Requirement | DOI allows exclusion for incarceration.  |  |
| 🞏 | Court Ordered  | NE Filing Requirement | Exclusion for court ordered services allowed but must include exception for medically necessary services. |  |
| 🞏 | Unpaid premium | [§ 44-710.04 (7)](https://nebraskalegislature.gov/laws/statutes.php?statute=44-710.04&print=true)  | Can deduct from claim. |  |
| 🞏 | Surprise balance bills | Consolidated Appropriations Act, 2021; Neb. Rev. Stat. §§ 44-6834 to 44-6850 | Applies to emergency services, includes air ambulances but not ground ambulances, and applies to ancillary nonemergency services provided at an in-network facility by an out-of-network provider (for example, a radiologist, anesthesiologist, or pathologist). For purposes of plan review for large group, small group, and individual policies, a list of the services for which an insured will not be exposed to balance billing is sufficient, along with a statement that for these services, in-network cost sharing applies. **NDOI also requires that insurers include instructions to insureds that if they receive a bill for the listed services from any provider, they should immediately provide that bill to the insurer, with an email address and mailing address to submit those bills.**  |  |
|  | **OTHER** |
| 🞏 | Hold harmless | General Fairness Requirement. [§ 44-511](https://nebraskalegislature.gov/laws/statutes.php?statute=44-511) | Remove any “hold harmless” language from the application or policy when:Form language states that the company or producers are held harmless for any losses or liabilities. We will object to hold harmless language if the insured person could be harmed in any way. The company is responsible for its officers, employees and agents and cannot waive its liability. There must be a means of recourse to provide a safety net for the consumer. |  |
| 🞏 | No arbitration | [§ 25-2602.01](https://nebraskalegislature.gov/laws/statutes.php?statute=25-2602.01) | Nebraska does not allow arbitration in any insurance contracts. |  |
| 🞏 | Death of Insured – refund unearned premium (n/a group) | [§ 44-310](https://nebraskalegislature.gov/laws/statutes.php?statute=44-310&print=true) | In the event of the death of the insured, the insurer shall refund the unearned premium prorated to the month of the insured's death if the request has been made within one year after the insured's death. The refund of the premium and termination of the coverage shall be without prejudice to any claim originating prior to the date of the insured's death. |  |
| 🞏 | Telehealth | [44-312](https://nebraskalegislature.gov/laws/statutes.php?statute=44-312&print=true),[44-7,107](https://nebraskalegislature.gov/laws/statutes.php?statute=44-7,107) |  |  |
| 🞏 | Subrogation | BCBS, Inc. v. Dailey, 733,687 N.W.2nd 689 (2004) | The insured must be fully compensated before the insurer may subrogate against its insured. |  |
|  |  **APPLICATION** |
| 🞏 | Application | [§ 44-761 (1)](https://nebraskalegislature.gov/laws/statutes.php?statute=44-710.03&print=true) | Part of entire contract. |  |
| 🞏 | Electronic application and delivery of documents or notices | [§ 44-315](https://gcc02.safelinks.protection.outlook.com/?url=https%3A%2F%2Fwww.nebraskalegislature.gov%2Flaws%2Fstatutes.php%3Fstatute%3D44-315&data=04%7C01%7CMaggie.Reinert%40nebraska.gov%7C5fd8245658dd4acc55b908d9f0a1a6ef%7C043207dfe6894bf6902001038f11f0b1%7C0%7C0%7C637805399347431733%7CUnknown%7CTWFpbGZsb3d8eyJWIjoiMC4wLjAwMDAiLCJQIjoiV2luMzIiLCJBTiI6Ik1haWwiLCJXVCI6Mn0%3D%7C3000&sdata=mJRZQE36Yra%2FkZRiYR%2FUSlrSELpAgaJQTRv%2BLRSr7OY%3D&reserved=0)[Federal ESIGN law, 15 U.S.C. 7001.](https://gcc02.safelinks.protection.outlook.com/?url=https%3A%2F%2Fwww.fdic.gov%2Fregulations%2Fcompliance%2Fmanual%2F10%2Fx-3.1.pdf&data=04%7C01%7CMaggie.Reinert%40nebraska.gov%7C5fd8245658dd4acc55b908d9f0a1a6ef%7C043207dfe6894bf6902001038f11f0b1%7C0%7C0%7C637805399347431733%7CUnknown%7CTWFpbGZsb3d8eyJWIjoiMC4wLjAwMDAiLCJQIjoiV2luMzIiLCJBTiI6Ik1haWwiLCJXVCI6Mn0%3D%7C3000&sdata=Mz6vdcx5dR627Z7EBBDRNg%2B%2BX5uiaHZlR7X34tufrxM%3D&reserved=0)[(UETA), §§ 668.50(5) and (8), F.S.](https://gcc02.safelinks.protection.outlook.com/?url=https%3A%2F%2Fwww.fdic.gov%2Fregulations%2Fcompliance%2Fmanual%2F10%2Fx-3.1.pdf&data=04%7C01%7CMaggie.Reinert%40nebraska.gov%7C5fd8245658dd4acc55b908d9f0a1a6ef%7C043207dfe6894bf6902001038f11f0b1%7C0%7C0%7C637805399347431733%7CUnknown%7CTWFpbGZsb3d8eyJWIjoiMC4wLjAwMDAiLCJQIjoiV2luMzIiLCJBTiI6Ik1haWwiLCJXVCI6Mn0%3D%7C3000&sdata=Mz6vdcx5dR627Z7EBBDRNg%2B%2BX5uiaHZlR7X34tufrxM%3D&reserved=0) | Consumer must affirmatively consent to electronic delivery and be given notice of option to withdraw consent.Describe safeguards used to protect private and confidential information. Must be in accord with Uniform Electronic Transaction Act.Recorded telephone conversations do not count as electronic signatures. |  |

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| 🞏 | Authorization to Release Information | [§ 44-916](https://nebraskalegislature.gov/laws/statutes.php?statute=44-916&print=true)[§ 44-917(1)(e)](https://nebraskalegislature.gov/laws/statutes.php?statute=44-916&print=true)[§ 44-917 (2)](https://nebraskalegislature.gov/laws/statutes.php?statute=44-917&print=true) | Signature valid for up to 24 months and must include the right to revoke. |  |

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| 🞏 | Ambiguous questions | NE Filing Requirement | Questions must be clear and specific. Ambiguous or open ended questions are not allowed. |  |
|  | **ENDORSEMENTS, RIDERS, OR AMENDMENTS****For additional forms submitted for approval, please list each here by form number. Each of these must comply with the requirements for officer signature, form number in the lower left corner of every page, descriptive title, company name, premium payment or fees (if applicable), and effective date (if not stated on schedule). Please complete the fields below as indicated.** |
| 🞏 | Title of document | Form number | Reference to SERFF filing for previous approval, if applicable | N/A if any of the listed requirements do not apply |
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|  | **SUPPORTING DOCUMENTS REQUIRED****Reference name of separate document in right column.** |
| 🞏 | Actuarial memorandum | NE Filing Requirement | Must be dated and signed by Actuary. Rates are required to be filed as a separate SERFF filing.  |  |
| 🞏 | Flesch /readability certification | [§ 44-3405](https://nebraskalegislature.gov/laws/statutes.php?statute=44-3405)NE Filing Requirement | Minimum score of 40.  |  |
| 🞏 | Redlined version  | NE Filing Requirement | If replacing existing previous version.  |  |
| 🞏 | Statement of variables (SOV) | NE Filing Requirement | Describe variables, ranges of numbers, minimums and maximums of bracketed material.  |  |
| 🞏 | NE Filing Form List | NE Filing Requirement | Use page 2 for additional forms. |  |
|  | **EXPLANATION FOR ANY ITEMS MARKED NOT APPLICABLE** |
| 🞏 | Please use this space provide an explanation for any checklist requirement marked “N/A” to avoid receiving an objection in SERFF. |
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**CERTIFICATION OF COMPLIANCE**

I, the undersigned authorized filer, hereby certify that this filing complies with applicable Nebraska statutes, regulations, Bulletins and guidelines, to the best of my knowledge. This filing contains no unusual or controversial content according to insurance industry norms. The forms included in this filing contain no unfair, unjust, inequitable, misleading or deceptive provisions or language. I am authorized to sign on behalf of the Company identified below.

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Name of Company

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Typed Name of Authorized Filer (Electronic Signature) Date