LONG-TERM CARE PARTNERSHIP CERTIFICATION FORM

Note: This Form must be completed and submitted with each long-term care policy or certificate form for which the insurer is seeking Partnership qualification. A separate form must be completed for each policy form and a specimen copy of the form, including all riders and endorsements, must be attached. A long-term care policy or certificate form may not be issued in Virginia as a partnership policy or certificate unless and until this form has been submitted to and approved by the Bureau of Insurance.

accordance with the 14 policy or certificate for includes all required consecurity Act (42 U.S.C Long-Term Care Insurpromulgated by the Na)(iii) of the Social Security Act (42 U.S.C. 1396p(b)(5 4 VAC 5-200-205 D, the insurer hereby submits inform (form number) to substantiate onsumer protection requirements set forth in § 1917(b C. 1396p(b)(5)(A)) and that it includes certain specifier rance Model Regulation and Long-Term Care Insurance ational Association of Insurance Commissioners (adoption as the "2000 Model Regulation" and "2000 Model	rmation relating to the that the form (5)(A) of the Social and provisions of the the Model Act of the October
	ed with the Interstate Compact: yes no	
Part I:	•	
Name of Insurer		
Company NAIC #		
Address		
Telephone		
Company Contact Name		
Title		
Telephone		
E-Mail		

2000 NAIC MODEL REGULATION AND 2000 NAIC MODEL ACT

Note to Insurer: Identify the page and/or provision within the policy or certificate form that addresses each requirement, or, if inapplicable, use the space identified to explain.				
Policy/Certificate form Model Long-Term Care Regulation and/below:	meets the following requirements of the 2000 NAIC or 2000 NAIC Model Long-Term Care Act, as indicated			

NAIC Model Regulation Requirement	Identify Policy Page # and Provision OR use this space to explain if requirement is inapplicable
Section 6A (relating to guaranteed renewal or	
noncancellability), other than paragraph (5) thereof, and the	
requirements of section 6B of the 2000 Model Act relating to	
such section 6A.	
Section 6B (relating to prohibitions on limitations and	
exclusions) other than paragraph (7) thereof.	
Section 6C (relating to extension of benefits).	
Section 6D (relating to continuation or conversion of	
coverage).	
Section 6E (relating to discontinuance and replacement of	
policies).	
Section 7 (relating to unintentional lapse).	
Section 8 (relating to disclosure), other than sections 8F, 8G,	
8H, and 8I thereof.	
Section 9 (relating to required disclosure of rating practices to	
consumer).	
Section 11 (relating to prohibitions against post-claims	
underwriting).	
Section 12 (relating to minimum standards)	
Section 14 (relating to application forms and replacement	
coverage).	
Section 15 (relating to reporting requirements).	
Section 22 (relating to filing requirements for marketing).	
Section 23 (relating to standards for marketing), including	
inaccurate completion of medical histories, other than	
paragraphs (1), (6), and (9) of section 23C.	
Section 24 (relating to suitability).	
Section 25 (relating to prohibition against preexisting	
conditions and probationary periods in replacement policies or	
certificates).	
Section 26, relating to contingent nonforfeiture benefits, if the	
policyholder declines the offer of a nonforfeiture provision	
described in § 7702B(g)(4) of the Internal Revenue Code of	

1986 (26 U.S.C. 7702B(g)(4)).		
Section 29 (relating to standard format outline of covera		
Section 30 (relating to requirement to deliver shopper's		
guide).	11 · · · · · · · · · · · · · · · · · ·	
NAIC Model Act Requirement	Identify Policy Page # and Provision	
	OR use this space to explain if	
	requirement is inapplicable	
Section 6C (relating to preexisting conditions).		
Section 6D (relating to prior hospitalization).	CI. X	
Section 8 (relating to contingent nonforfeiture bene	efits).	
Section 6F (relating to right to return).		
Section 6G (relating to outline of coverage).		
Section 6H (relating to requirements for certificates	S	
under group plans).		
Section 6J (relating to policy summary).		
Section 6K (relating to monthly reports on acceleration)	nted	
death benefits).		
Section 7 (relating to incontestability period).		
Part IV. CERTIFICATION		
I hereby certify that the answers, accompanying do herein are, to the best of my knowledge and belief, [certificate] satisfies the requirements necessary for partnership policy in the Commonwealth of Virgin	true, correct, complete and the policy r a qualified state long-term care insurance	
Date Name and title of o	Name and title of officer of the Insurer	
Signature of officer of the Insurer		