

**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.

---

Under § 1917(b)(5)(B)(iii) of the Social Security Act (42 U.S.C. 1396p(b)(5)(B)(iii)) and in accordance with the 14 VAC 5-200-205 D, the insurer hereby submits information relating to policy or certificate form \_\_\_\_\_ (form number) to substantiate that the form includes all required consumer protection requirements set forth in § 1917(b)(5)(A) of the Social Security Act (42 U.S.C. 1396p(b)(5)(A)) and that it includes certain specified provisions of the Long-Term Care Insurance Model Regulation and Long-Term Care Insurance Model Act promulgated by the National Association of Insurance Commissioners (adopted as of October 2000) (referred to herein as the “2000 Model Regulation” and “2000 Model Act,” respectively).

This form has been filed with the Interstate Compact:      \_\_\_ yes \_\_\_ no

**Part I:**

Name of Insurer \_\_\_\_\_

Company NAIC # \_\_\_\_\_

Address \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Telephone \_\_\_\_\_

Company Contact  
Name \_\_\_\_\_

Title \_\_\_\_\_

Telephone \_\_\_\_\_

E-Mail \_\_\_\_\_

**Part II:**

**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 \_\_\_\_\_ meets the following requirements of the 2000 NAIC Model Long-Term Care Regulation and/or 2000 NAIC Model Long-Term Care Act, as indicated below:

<b>NAIC Model Regulation Requirement</b>	<b>Identify Policy Page # and Provision OR use this space to explain if requirement is inapplicable</b>
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	

