



Missouri Department of Commerce and Insurance  
Market Regulation Division  
Insurance Product Filing Section  
[ProductFilings@insurance.mo.gov](mailto:ProductFilings@insurance.mo.gov)

---

## Long-Term Care Filing Checklist

Missouri uses the NAIC Coding Matrix to determine the appropriate use of TOI's. Visit [NAIC.org](http://NAIC.org) for the most current version of the matrix.

The SERFF filing fee of \$150 must be paid via Electronic Funds Transfer (EFT) pursuant to 374.230 RSMo.

This list is in no way an exhaustive or complete statement of all requirements and provisions that might be applicable. This checklist is a representation of general provisions and objections and should not be construed as a legal position or legal advice. Please refer to the statutes and regulations for exact wording of requirements or prohibitions. The language within the Missouri Statutes and Regulations always prevails over this checklist.



301 West High Street, Room 530 • Jefferson City, Missouri 65101  
Telephone 573/751-4126 • RelayMo TTY Dial 711 or 1-800-735-2966

## Instructions

Complete this checklist by providing the location of the provision in the forms. The completed checklist should be attached to the Supporting Documentation tab.

Please ensure the Form Type under the Form Schedule tab matches the attached form. For example, if the Form Type is an application, make sure the form is marked as AEF (Form Type for application/enrollment form).

The Form Number cannot be reused, except when the original filing is rejected or withdrawn, and the Form Number on the Form Schedule tab must match the form number provided in the lower left-hand corner of the first page.

Provide an explanation of variability for all bracketed alpha and numeric text.

If filing a rider, endorsement, or application, please provide the SERFF tracking number for the forms with which these new forms will be used.

Documents within a filing can be marked confidential, but an explanation of how the request complies with 374.070 RSMo and 20 CSR 10-2.400 must be provided.

When providing a redline version of the changes, please attach it to the Supporting Documentation tab. The form being submitted for approval should be in final format under the Form Schedule tab.

Health rate filings must be submitted separately from Forms. For more information on health rate filings, please visit [our website](#).

Life must be filed separately from Health. Group separately from Individual.

Filing Submissions shall include the following and meet the requirements under 20 CSR 100-9.100;

- a. Provide a brief, detailed description of benefits, the purpose of the filing, and the intended market on the General Information tab.
- b. Disclose if the form is new or a replacement.
- c. Provide all corresponding SERFF Tracking Numbers, including rate filings if filing a form filing.

Citation	Summary	Form	Page #
<a href="#">375.924 RSMo</a>	Company address and phone number		
<a href="#">375.936 RSMo</a>	Define unfair practices		
<a href="#">375.995 RSMo</a>	Prohibits sex or marital status discrimination		
<a href="#">376.1100.2 RSMo</a>	Definitions		
<a href="#">20 CSR 400-4.100(2)</a>	Definitions		
<a href="#">20 CSR 400-4.100(3)</a>	Policy Definitions		
<a href="#">376.1103 RSMo</a>	Laws Applicable		
<a href="#">20 CSR 400-4.100(19)</a>	Filing Requirements: Out of state policy/certificate		
<a href="#">376.1109 RSMo</a>	Policy Requirements		
<a href="#">376.1127 RSMo</a>	Nonforfeiture benefit options		
<a href="#">20 CSR 400-4.100(24)</a>	Nonforfeiture benefit requirements		
<a href="#">20 CSR 400-4.100(1)</a>	Applicability and Scope		
<a href="#">20 CSR 400-4.100(4)</a>	Policy Practices and Provisions		
<a href="#">20 CSR 400-4.100(5)</a>	Unintentional Lapse		
<a href="#">20 CSR 400-4.100(6)</a>	Required Disclosure Provisions		
<a href="#">20 CSR 400-4.100(7)</a>	Required Disclosure of Rating Practices to Consumers		
<a href="#">20 CSR 400-4.100(8)</a>	Initial Filing Requirements		
<a href="#">20 CSR 400-4.100(9)</a>	Prohibition Against Post-Claims Underwriting		
<a href="#">20 CSR 400-4.100(10)</a>	Minimum standards for home health and community care benefits		
<a href="#">20 CSR 400-4.100(11)</a>	Requirement to Offer Inflation Protection		
<a href="#">20 CSR 400-4.100(12)</a>	Requirements for Application Forms and Replacement Coverage		
<a href="#">20 CSR 400-4.100(13)</a>	Reporting Requirements		
<a href="#">20 CSR 400-4.100(16)</a>	Reserve Standards		
<a href="#">20 CSR 400-4.100(17)</a>	Loss Ratio		
<a href="#">20 CSR 400-4.100(18)</a>	Premium Rate Schedule Increases		
<a href="#">20 CSR 400-4.100(20)</a>	Filing Requirements for Advertising		

Citation	Summary	Form	Page #
<a href="#">20 CSR 400-4.100(21)</a>	Standards for Marketing		
<a href="#">20 CSR 400-4.100(23)</a>	Prohibition against pre-existing conditions and probationary periods in replacement policies or certificates		
<a href="#">435.350 RSMo</a>	Arbitration is prohibited		