

MARTIN O'MALLEY
Governor

ANTHONY G. BROWN
Lt. Governor



THERESE M. GOLDSMITH
Commissioner

KAREN STAKEM HORNIG
Deputy Commissioner

NANCY GRODIN
Associate Commissioner
Compliance & Enforcement

200 St. Paul Place, Suite 2700, Baltimore, Maryland 21202
Direct Dial: 410-468-2235 Fax: 410-468-2245
E-mail: ngrodin@mdinsurance.state.md.us
1-800-492-6116 TTY: 1-800-735-2258
www.mdinsurance.state.md.us

BULLETIN NO. 11-32

DATE: November 10, 2011

TO: Insurers that are Required to File an Annual Statement with the Maryland Insurance Commissioner

RE: Certificate of Compliance – Code of Maryland Regulations (“COMAR”) 31.15.02.18B

The purpose of this Bulletin is to remind each insurer required to file an annual statement¹ with the Insurance Commissioner that, together with its annual statement, it must also file a Certificate of Compliance. The requirement to file a Certificate of Compliance was added to the “Reports Due from Regulated Entities to the Maryland Insurance Administration” in 2010. This document may be found at www.mdinsurance.state.md.us/sa/docs/documents/insurer/insurer-services/md-required-reports.pdf

Certificate of Compliance

COMAR 31.15.02.18B provides that each insurer required to file an annual statement shall file a Certificate of Compliance, executed by an authorized officer of the insurer, certifying that to the best of the officer’s knowledge, information, and belief, the advertisements which were disseminated by the insurer during the preceding statement year complied or were made to comply in all respects with the provisions of the Insurance Laws of Maryland and the regulations issued thereunder by the State Insurance Commissioner.

To facilitate and promote uniformity in filing the Certificate of Compliance, the Commissioner adopted a Certificate of Compliance (Advertising) form (“Form”). This Form should be submitted with the annual statement which is due by March 1st of each year. The Form is located on the Maryland Insurance Administration’s website at:

http://www.mdinsurance.state.md.us/sa/docs/documents/insurer/insurer-services/certificate_of_compliance.pdf

¹ See COMAR 31.04.04.01A, Annual Statements.

Questions about this Bulletin may be directed to Ms. Nicole Rasinski at 410-468-2225 or Ms. Kristin DeHoff at 410-468-2253.

Signature on original
Nancy Grodin
Associate Commissioner
Compliance and Enforcement

NAIC Company Code: _____
Contact Person: _____
Phone Number: _____
E-mail: _____

STATE OF MARYLAND
CERTIFICATE OF COMPLIANCE
Advertising

Pursuant to COMAR 31.15.02.18, I _____,
(Print Name)

an authorized officer of _____,
(Name of Company)

hereby certify to the best of my knowledge, information, and belief, that the advertisements which were disseminated by this Company during the preceding statement year of 20____, complied or were made to comply in all respects with the provisions of the Insurance Laws of Maryland and the regulations issued thereunder by the State Insurance Commissioner.

The Advertising File referenced in COMAR 31.15.02.18A is maintained by the above Company at the following location:

I further attest that I am an authorized officer with authority to certify this form.

Signature: _____

Title: _____

Date: _____