

COMPANY:	NAIC Code:
FORM(S):	
DATE:	
SERFF/MIA Tracking No.:	

GROUP TERM LIFE INSURANCE

All section references are to the Insurance Article of the Annotated Code of Maryland, unless otherwise specified.

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Form/
Page

A. Filing Requirements

Brief Description & Law/Regulation Cite	"X" Means Filing Does Not Comply	Form/ Page
A1. NAIC Company Number on Submission Letter – COMAR 31.04.17.03B		
A2. Listing of Forms - COMAR 31.04.17.03C		
A3. Description of New Features - COMAR 31.04.17.03J		
A4. Form Number - COMAR 31.04.17.03D		
A5. Form must be legible – §12-205(b)(5) and COMAR 31.04.17.03E		
A6. Non-English language forms - COMAR 31.04.17.03F		
A7. Corporate Name - COMAR 31.04.17.03G		
A8. Unacceptable Modifications - COMAR 31.04.17.03H		
A9. Specimen Data - COMAR 31.04.17.03K		
A10. Variable information and Statement of Variability – COMAR 31.04.17.04A(2)		
A11. Filing Fee - §2-112(a)(9)		
A12. Form number in lower left corner of form must match the SERFF field		
A13. Illustration notice and certification - COMAR 31.09.09.05A and COMAR 31.09.09.11B, C, and D(1)(b)		
A14. Contracts Comprised of Insert Pages - COMAR 31.04.17.04B		
A15. Contracts Comprised of Sections - COMAR 31.04.17.04C		

B. Content of form(s) – Required Provisions

B1. Policyholder must be one of the groups listed in §17-101 .		
B2. Policy may cover employee/member and (for same or less death		

Brief Description & Law/Regulation Cite

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**Form/
Page**

benefit) dependent spouse and domestic partner - §17-209		
B3. Creditor groups may cover only the debtor - §17-206(b)		
B4. For creditor group amount of insurance cannot exceed scheduled or actual amount of debt - §17-206(d)		
B5. For a debtor group, the insurer must notify debtor that a death benefit will be paid and will be used to repay the debt - §17-103		
B6. If premium is paid entirely by policyholder and none by insureds, policy must cover all or all who meet insurability requirements - §§17-201, 202, 203, 204, 205, 206, 207, and 208		
B7. Policy must state when evidence of insurability is required - §17-305		
B8. Policy must state death benefits will be paid to insured's named beneficiary - §17-307		
B9. Certificate must state that death benefits will be paid to insured's named beneficiary - §17-308		
B10. Policy must state insurer will issue a certificate to each insured – §17-103 and §17-308		
B11. Policy and certificate must state conversion rights and interest on benefits - §17-102 and §§17-308 through 17-311		
B12. Incontestable - §17-303		
B13. Policy and certificate must have statement re use of insurability information - §17-303(2)		
B14. Policy must state policyholder's application is attached, statements are representations and not warranties - §17-304		
B15. Policy and certificate must state how any cash value will be applied in event of conversion to an individual policy - §17-309		
B16. Brief descriptions front and back – COMAR 31.04.17.10A		
B17. War restrictions or aviation restriction – COMAR 31.04.17.09E		
B18. Name of beneficiary must be in certificate - §17-308(2)		
B19. Misstatement of age - §17-306		
B20. Paid-up additions cost – COMAR 31.04.17.16		
B21. Contract governed by Maryland law and courts - §§12-209(1), (2), and (4)		
B22. Grace Period - §17-302		
B23. Premium may be changed only on policy anniversary with 30 days notice – COMAR 31.04.17.09B		
B24. "Renewable" or "convertible" in brief description – COMAR 31.04.17.09C		
B25. Policy issued outside Maryland must be filed for approval of group - §17-101(e)		
B26. Retained asset account for proceeds can be offered only if another mode of settlement is offered - §16-117		

Brief Description & Law/Regulation Cite

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**Form/
Page**

B27. Retained asset account disclosures required - §16-117		
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C. Content of forms – Prohibited Provisions

C1. Health benefits must comply with health insurance requirements – §1-101(p) and (x)		
C2. Arbitration cannot be required - §12-209(4)		
C3. Inconsistent, ambiguous, or misleading provisions - §12-205(b)		
C4. Advertising prohibited - COMAR 31.04.17.07		
C5. Terrorism exclusion prohibited - §17-101(d)		
C6. Time limit for legal action - §12-209(e)		
C7. Premium different than policy states - §12-216(b)		

D. Applications

D1. Corporate name and address – COMAR 31.04.17.03G		
D2. Check-off blocks – COMAR 31.04.17.06I(2)		
D3. Good health warranty prohibited– COMAR 31.04.17.10B		
D4. Domestic violence - §27-504		
D5. Legal travel - §27-208(a)(4)		
D6. Health questions must be asked to the best of the applicant’s knowledge and belief or application must include statement that all answers provided are representations and are not warranties - COMAR 31.04.17.06E and §12-207		
D7. Questions about “hazardous activities” must list activities considered to be “hazardous” - COMAR 31.04.17.06C		
D8. Questions about the use of “habit-forming drugs” must list specific drugs considered to be “habit-forming” – COMAR 31.04.17.06D		
D9. Questions about symptoms or indications of physical/mental conditions must ask about “known symptoms” and “known indications” - COMAR 31.04.17.06F and 31.04.17.06G		
D10. If the insurer uses an application form which contains language substantially as follows, “Except that no change in amount, classification, plan of insurance or benefits shall be effective unless agreed to in writing by the applicant,” with an additional statement that this exception is effective only in certain states, the form shall specifically name Maryland as one of the states in which the exception is effective – COMAR 31.04.17.06B		
D11. Proxy - COMAR 31.04.17.08		

Brief Description & Law/Regulation Cite

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**Form/
Page**

D12. Inconsistent, ambiguous, or misleading - §12-205(b)		
D13. If application is to be completed by more than one individual, application signature box must clearly indicate that signature applies only to portion of application completed by that individual – COMAR 31.04.17.06J		
D14. Plan and amount of Insurance - COMAR 31.04.17.06A		
D15. Insurance Fraud-Required Disclosure - §27-805, House Bill 404, Chpt. 271, Acts of 2008		
D16. Replacement questions if direct solicitation by insurance producer – COMAR 31.09.05.04A		

E. Riders

E1. Signature – COMAR 31.04.17.03M		
E2. Exclusion for insurrection or riot must be for voluntary participation - COMAR 31.04.17.17		
E3. Disability benefit must be waiver of premium, or disability must be total and permanent - §1-101(x)		
E4. Premium rates must be shown – COMAR 31.04.17.09B		
E5. Requirement for visible wound must have exception for drowning or internal injuries - §12-205(b)(4)		
E6. A risk may not be an exclusion for accidental death unless it caused the insured's death – §12-205(b)(4)		
E7. Exclusion for drugs or poison must be only if drugs used voluntarily – §12-204(b)(4)		

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