

HEALTH ENTITIES

COMPANY NAME: _____ NAIC Company Code: _____

Contact: _____ Telephone: _____

REQUIRED FILINGS IN THE STATE OF: New Mexico Filings Made During the Year 2026

(1) Checklist	(2) Line #	(3) REQUIRED FILINGS FOR THE ABOVE STATE	(4) NUMBER OF COPIES*		(5) DUE DATE	(6) FORM SOURCE**	(7) APPLICABLE NOTES			
			Domestic Foreign							
			State	NAI C						
I. NAIC FINANCIAL STATEMENTS										
1	Annual Statement (8 1/2"X14")		EO		3/1	NAIC				
1.1	Printed Investment Schedule detail (Pages E01-E30)		EO	xxx	3/1	NAIC				
2	Quarterly Financial Statement (8 1/2" x 14")		EO		5/15, 8/15, 11/15	NAIC				
II. NAIC SUPPLEMENTS										
11	Accident & Health Policy Experience Exhibit		EO		4/1	NAIC				
12	Actuarial Opinion		EO		3/1	Company				
13	Life Supplemental Data due March 1		EO		3/1	NAIC				
14	Life Supplemental Data due April 1		EO		4/1	NAIC				
15	Life Supp Statement non-guaranteed elements – Exh 5, Int. #3		EO		3/1	Company				
16	Life Supp Statement on par/non-par policies – Exh 5 Int. 1&2		EO		3/1	Company				
17	Life, Health & Annuity Guaranty Association Assessable Premium Exhibit, Parts 1 and 2		EO	xxx	4/1	NAIC				
18	Long-Term Care Experience Reporting Forms		EO	xxx	4/1	NAIC				
19	Management Discussion & Analysis		EO		4/1	Company				
20	Market Conduct Annual Statement Premium Exhibit for Year		EO		3/1	NAIC				
21	Medicare Part D Coverage Supplement		EO		3/1, 5/15, 8/15, 11/15	NAIC				
22	Medicare Supplement Insurance Experience Exhibit		EO	xxx	3/1	NAIC				
23	Risk-Based Capital Report		EO		3/1	NAIC				
24	Schedule SIS		N/A	N/A	3/1	NAIC				
25	Supplemental Compensation Exhibit		N/A	N/A	3/1	NAIC				
26	Supplemental Health Care Exhibit (Parts 1 and 2)		EO		4/1	NAIC				
27	Supplemental Investment Risk Interrogatories		EO		4/1	NAIC				
III. ELECTRONIC FILING REQUIREMENTS										
61	Annual Statement Electronic Filing	xxx	EO	xxx	3/1	NAIC				
62	March .PDF Filing	xxx	EO	xxx	3/1	NAIC				
63	Risk-Based Capital Electronic Filing	xxx	EO	N/A	3/1	NAIC				
64	Risk-Based Capital .PDF Filing	xxx	EO	N/A	3/1	NAIC				
65	Supplemental Electronic Filing	xxx	EO	xxx	4/1	NAIC				
66	Supplemental .PDF Filing	xxx	EO	xxx	4/1	NAIC				
67	Quarterly Statement Electronic Filing	xxx	EO	xxx	5/15, 8/15, 11/15	NAIC				
68	Quarterly .PDF Filing	xxx	EO	xxx	5/15, 8/15, 11/15	NAIC				
69	June .PDF Filing	xxx	EO	xxx	6/1	NAIC				
IV. AUDIT/INTERNAL CONTROL RELATED REPORTS										
81	Accountants Letter of Qualifications		EO	N/A	6/1	Company				
82	Audited Financial Reports		EO		6/1	Company				
83	Audited Financial Reports Exemption Affidavit		N/A	N/A		Company				
84	Communication of Internal Control Related Matters Noted in Audit		EO	N/A	8/1	Company				

(1) Checklist	(2) Line #	(3) REQUIRED FILINGS FOR THE ABOVE STATE	(4) NUMBER OF COPIES*		(5) DUE DATE	(6) FORM SOURCE**	(7) APPLICABLE NOTES		
			Domestic						
			State	NAI C	State				
	85	Independent CPA (change)		N/A	N/A		Company		
	86	Management's Report of Internal Control Over Financial Reporting		N/A	N/A	8/1	Company		
	87	Notification of Adverse Financial Condition		N/A	N/A		Company		
	88	Relief from the five-year rotation requirement for lead audit partner		EO		3/1	Company		
	89	Relief from the one-year cooling off period for independent CPA		EO		3/1	Company		
	90	Relief from the Requirements for Audit Committees		EO		3/1	Company		
	91	Request for Exemption to File Management's Report of Internal Control Over Financial Reporting		N/A	N/A		Company		
V. STATE REQUIRED FILINGS									
	101	Corporate Governance Annual Disclosure***		0		6/1	Company		
	102	Filings Checklist (with Column 1 completed)		0			State		
	103	Form B-Holding Company Registration Statement		0		4/15	Company		
	104	Form F-Enterprise Risk Report ****		0		9/15	Company		
	105	ORSA *****		0		9/1	Company		
	106	Premium Tax	N/A	0	N/A	N/A	State		
	107	State Filing Fees	Varies	0	Varies	Varies	State 110-111		
	108	Signed Jurat	xxx	0		Varies	NAIC		
	109	Group Capital Calculation (File with lead state only)		0					
	110	Annual Statement Filing Fee	\$200	0	200	3/1	A and C		
	111	Annual Continuation of Certificate of Authority Fee	\$200 per line of authority	0	\$200 per line of authority	3/1	A and C		

*If XXX appears in this column, this state does not require this filing, if hard copy is filed with the state of domicile and if the data is filed electronically with the NAIC. If N/A appears in this column, the filing is required with the domiciliary state. EO (electronic only filing).

**If Form Source is NAIC, the form should be obtained from the appropriate vendor.

***For those states that have adopted the NAIC Corporate Governance Annual Disclosure Model Act, an annual disclosure is required of all insurers or insurance groups by June 1. The Corporate Governance Annual Disclosure is a state filing only and should not be submitted by the company to the NAIC. Note however that this filing is intended to be submitted to the lead state if filed at the insurance group level. For more information on lead states, see the following NAIC URL: http://www.naic.org/public_lead_state_report.htm.

****For those states that have adopted the NAIC updated Holding Company Model Act, a Form F filing is required annually by holding company groups. Consistent with the Form B filing requirements, the Form F is a state filing only and should not be submitted by the company to the NAIC. Note however that this filing is intended to be submitted to the lead state. For more information on lead states, see the following NAIC URL: http://www.naic.org/public_lead_state_report.htm

*****For those states that have adopted the NAIC Risk Management and Own Risk and Solvency Assessment Model Act, a summary report is required annually by insurers and insurance groups above a specified premium threshold. The ORSA Summary Report is a state filing only and should not be submitted by the company to the NAIC. Note however that this filing is intended to be submitted to the lead state if filed at the insurance group level. For more information on lead states, see the following NAIC URL: http://www.naic.org/public_lead_state_report.htm

		NOTES AND INSTRUCTIONS (A-K APPLY TO ALL FILINGS)	
	A	Required Filings Contact Person: Ursula Almada at (505) 827-4524 Company.Licensing@osi.nm.gov.	Annual Statement Filing Fee and Annual Continuation of Certificate of Authority Fee- Ursula Almada at (505) 827-4524 Company.Licensing@osi.nm.gov. Fraud Assessment Fee Contact Victoria Baca at <u>Victoriaa.Baca@osi.nm.gov</u>
	B	Mailing Address:	Overnight or second day Mail ONLY: Office of Superintendent of Insurance 1120 Paseo de Peralta, 4th Floor Santa Fe, NM 87501 USPS Mail ONLY: PO Box 1689 Santa Fe, NM 87504
	C	Mailing Address for Filing Fees: Effective immediately, the Office of the Superintendent of Insurance will no longer accept checks with any other names and will return them to the sender. Please be advised that the return check does not constitute payment of the amount due. Make all checks payable to the “OSI” or “Office of Superintendent of Insurance”.	
	D	Mailing Address for Premium Tax Payments: On January 1, 2020, the New Mexico Office of Superintendent of Insurance will no longer be responsible for the collection of Premium and Surtax (Surplus Line, and Workman’s Comp included) Taxes	The collection responsibility will be transferred to the New Mexico Taxation and Revenue Department (TRD) on January 1, 2020. TRD can be contacted at: <u>http://www.tax.newmexico.gov/</u>
	E	Delivery Instructions:	All hard copy filings must bear a U.S. postmark or a courier service pick-up date no later than the indicated due date. New Mexico domestic company electronic filing must be received by the contact person no later than the indicated due date. Electronic (PDF) versions of filings shall be sent by email. If the file is too large to send by email, upload it to your FTP site and email the contact person instructions to download it. Do not send Zip files. Our firewall will block them.
	F	Late Filings:	The Superintendent may, for good cause, grant a reasonable extension of time for filing the annual statement on or before March 1. Send all requests for filing extensions to the Financial Regulation Bureau contact before the due date of the item being filed.

	G	Original Signatures:	Follow NAIC instructions when providing signatures and notary/certification.
	H	Signature/Notarization/Certification:	Follow NAIC instructions when providing signatures and notary/certification.
	I	Amended Filings:	Amended items must be filed within 10 days of their amendment, along with an explanation of why the filing was amended. Signature requirements for amendments are the same as for the original filing.
	J	Exceptions from normal filings:	The Superintendent may, for good cause, grant a reasonable extension of time for filing the annual statement on or before March 1. Send all requests for filing extensions to the Financial Regulation and Examinations Division before the due date of the filed item at examinations.osi@osi.nm.gov
	K	Bar Codes (State or NAIC):	New Mexico does not use Bar Codes, but NAIC does. Please refer to NAIC filing requirements.
	L	Signed Jurat:	New Mexico does not use Bar Codes, but NAIC does. Please refer to NAIC filing requirements.
	M	NONE Filings:	Follow NAIC filing requirements.
	N	Filings new, discontinued or modified materially since last year:	<p>Annual Renewal Requirements:</p> <p>Please visit the OSI Webpage/ Company Licensing Bureau page at www.osi.state.nm.us/pages/bureaus/company/resources/renewals.</p> <p>Company Licensing no longer requests the Certificate of Deposit, Certificate of Compliance, and Certificate of Valuation.</p>

**General Instructions
For Companies to Use Checklist**

Please Note: This state's instructions for companies to file with the NAIC are included in this Checklist. The NAIC will not be sending their own checklist this year.

Electronic Filing is intended to be filing(s) submitted to the NAIC via the NAIC Internet Filing Site which eliminates the need for a company to submit diskettes or CD-ROM to the NAIC. Companies are not required to file hard copy filings with the NAIC.

Column (1) Checklist

Companies may use the checklist to submit to a state, if the state requests it. Companies should copy the checklist and place an "x" in this column when submitting information to the state.

Column (2) Line #

Line # refers to a standard filing number used for easy reference. This line number may change from year to year.

Column (3) Required Filings

Name of item or form to be filed.

The ***Annual Statement Electronic Filing*** includes the annual statement data and all supplements due March 1, per the *Annual Statement Instructions*. This includes all detail investment schedules and other supplements for which the *Annual Statement Instructions* exempt printed detail.

The ***March.PDF Filing*** is the .pdf file for annual statement data, detail for investment schedules and supplements due March 1.

The ***Risk-Based Capital Electronic Filing*** includes all risk-based capital data.

The ***Risk-Based Capital.PDF Filing*** is the .pdf file for risk-based capital data.

The ***Supplemental Electronic Filing*** includes all supplements due April 1, per the *Annual Statement Instructions*.

The ***Supplemental.PDF Filing*** is the .pdf file for all supplemental schedules and exhibits due April 1.

The ***Quarterly Electronic Filing*** includes the complete quarterly filing and the PDF files for all quarterly data.

The ***Quarterly.PDF Filing*** is the .pdf file for quarterly statement data.

The ***June.PDF Filing*** is the .pdf file for the Audited Financial Statements and Accountants Letter of Qualifications.

Column (4) Number of Copies

Indicates the number of copies that each foreign or domestic company is required to file for each type of form. The Blanks (EX) Task Force modified the 1999 *Annual Statement Instructions* to waive paper filings of certain NAIC supplements and certain investment schedule detail, if such investment schedule data is available to the states via the NAIC database. The checklists reflect this action taken by the Blanks (EX) Task Force. XXX appears in the "Number of Copies" "Foreign" column for the appropriate schedules and exhibits. **Some states have chosen to waive printed quarterly and annual statements from their foreign insurers and have chosen to rely upon the NAIC database for these filings. This waiver could include supplemental annual statement filings. The XXX in this column might signify that the state has waived the paper filing of the annual statement and all supplements.**

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Column (5) Due Date

Indicates the date on which the company must file the form.

Column (6) Form Source

This column contains one of three words: “NAIC,” “State,” or “Company.” If this column contains “NAIC,” the company must obtain the forms from the appropriate vendor. If this column contains “State,” the state will provide the forms with the filing instructions (generally, on the state web site). If this column contains “Company,” the company, or its representative (e.g., its CPA firm), is expected to provide the form based upon the appropriate state instructions or the NAIC *Annual Statement Instructions*.

Column (7) Applicable Notes

This column contains references to the Notes to the Instructions that apply to each item listed on the checklist. The company should carefully read these notes before submitting a filing.

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