



Pre-Filing Communication Form

Filers wishing to discuss questions and issues regarding a potential product filing with the Insurance Compact should fully complete this Pre-Filing Communication Form and provide detailed information and questions to aid in the discussion. Please submit your completed form via email to Comments@insurancecompact.org. Once we have received the completed form, with all questions answered, we will reply to your initial inquiry within seven (7) business days. *Please note that incomplete forms may delay a reply or the scheduling of a call with the appropriate IIPRC team members.*

- If you require additional room to address the questions below, please attach them in a separate document.
- If a draft form is available, it would be most beneficial to include it with the completed form. **Please note that the draft is to facilitate discussion, and will not be considered for “pre-approval.”** If a form is attached, detailed questions regarding a particular provision, the Uniform Standards, or filing process should be included. This process should not be used to ask the IIPRC Office to generally identify compliance issues with the product or form provisions.
- If there is an internal deadline associated with this request, please provide this information in question #9.

If you have general help-desk questions not associated with a potential or specific product filing, please submit to Comments@insurancecompact.org.

Examples of help-desk questions include: Can we Mix and Match an IIPRC approved application with a state approved application questionnaire?; Do we need to submit a red-lined copy of the changes with this filing?; How can we add a state to a previously-approved filing?; Can we reopen a previously-approved filing to update the underwriting classes, issue ages, actuarial memo, etc.?

Contact Information for Person Requesting Pre-Filing Discussion:

Name: _____
Title: _____
Company Name: _____
Phone Number: _____
Email Address: _____

1. Please list specific questions and issues you wish to discuss with the IIPRC (if more room is required, please attach a separate document):

2. Is an Actuary requested for this discussion?
 Yes No.

If yes, please list specific questions and issues that you wish to discuss with the IIPRC Actuary:

3. Briefly describe the proposed product design, including unique features, if any:

4. Please identify the Uniform Standard(s) most closely related to the proposed product design (if more than one, please include all):

5. Does the Company have an outline or draft of the proposed product design?
Yes ___ No ___.

If yes, please attach to this Form.

6. Has the filer previously filed forms with the IIPRC?
Yes ___ No ___.

If yes, when was last filing made? __/__/__

What type of products has the filer filed?

7. Is the proposed product design expected to be filed for approval in all Compacting States where company is licensed to do business?
Yes ___ No ___.

If no, please specify the Compacting States on whose behalf the product will be filed:

Please explain reason(s) for a limited filing:

8. Are there any deadlines that the IIPRC has to be made aware of with regard to this proposed product design?
Yes ___ No ___.

If yes, what is the deadline? __/__/____

Has the Company determined a product launch date?
Yes ___ No ___.

If yes, what is the date? __/__/____

Additional Comments:

9. Please indicate whether the company requests this information be treated as confidential insurer trade secret information pursuant to the Establishment of Conditions and Procedures for Public Inspection and Copying of Information and Official Records of the Interstate Insurance Product Regulation Commission:
Yes ___ No ___.

If yes, please state the reason for requesting trade secret protection:

10. Additional persons to be involved with the Pre-Filing Discussion, if any:

Note: It is highly recommended that the appropriate experts of the Company who are involved with the development of the proposed product design be involved with the discussion, such as those involved in actuarial, underwriting, marketing, claims, legal, etc., as applicable.

None ___

Name: _____

Title: _____

Phone Number: _____

Email Address: _____

Name: _____

Title: _____

Phone Number: _____

Email Address: _____

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***If you have any questions about how to complete this form,
Please call the IIPRC Office at 202-471-3962.***