

## **Short-Term Limited Duration Insurance (2026)**

## **Short-Term Limited Duration Insurance Interrogatories**

|   | Yes No<br>Response | Explanation |
|---|--------------------|-------------|
| 01 List the states where your STLD products are marketed.   | <u></u>            |             |
| 02 Does the company offer STLD policies/certificates with up to a 90-day duration?  |                    |             |
| 03 Does the company offer STLD policies/certificates with 91- to 180-day duration?  |                    |             |
| 04 Does the company offer STLD policies/certificates with 181- to 364-day duration?   |                    |             |
| 05 Number of STLD forms offered to residents in this state.   |                    |             |
| 06 Number of STLD forms offered in all states.  |                    |             |
| 07 Number of STLD forms filed in this state.  |                    |             |
| 08 Number of STLD forms filed in all states.  |                    |             |
| List the states where your STLD products are filed (provide SERFF tracking number and form number, if applicable). If a           |                    |             |
| 09 company issues the product in a state that does not require a filing, please identify the product and describe the basis for   |                    |             |
| not filing.   |                    |             |
| 10 How many policy forms have waiting periods that apply to the entire policy/certificate?  |                    |             |
| 11 How many policy forms have waiting periods that apply per specific benefits?   |                    |             |
| 12 Do any waiting periods exceed the policy/certificate term?   |                    |             |
| 13 If yes, please explain   |                    |             |
| 14 Does the company issue STLD products through associations?   |                    |             |
| 15 If yes, list the associations.   |                    |             |
| 16 If yes, do you have a contractual relationship with each Association?  |                    |             |
| 17 If yes, does the contract cover the marketing of your product?   |                    |             |
| 18 If yes, does the contract cover the collection of dues and fees?   |                    |             |
| 19 If yes, does the contract cover commissions?   |                    |             |
| 20 If yes, what other operational areas are covered in the contract?  |                    |             |
| 21 Does the company issue STLD products through trusts?   |                    |             |
| 22 If yes, how many?  |                    |             |
| 23 Does the company issue STLD products through administrators?   |                    |             |
| 24 If yes, how many?  |                    |             |
| 25 Does the company contract with third-party administrators for administrative services related to STLD products?                |                    |             |
| 26 If yes, does your delegation structure include claims related to STLD products?  |                    |             |
| 27 If yes, does your delegation structure include complaints related to STLD products?  |                    |             |
| 28 If yes, does your delegation structure include medical underwriting related to STLD products?                                  |                    |             |
| 29 If yes, does your delegation structure include pricing related to STLD products?   |                    |             |
| 30 If yes, does your delegation structure include producer appointments related to STLD products?                                 |                    |             |
| If yes, does your delegation structure include marketing, advertisement, lead generation, or enrollment related to STLD products? |                    |             |
|   |                    |             |

|      | Short-Term Limited Duration Inst   | uran | ce (202 | 26)        |           |         |                    |              |
|------|--|------|---------|------------|-----------|---------|--------------------|--------------|
| Sho  | ort-Term Limited Duration Insurance Interrogatories (Continued)                                  |      |         | -          |           |         |                    |              |
|      |  |      |         |            |           |         | Yes No<br>Response | Explanation  |
| 32   | Poes your company audit Third parties to whom you have delegated responsibilities?               |      |         |            |           |         | ·                  |              |
| 33   | If yes, please provide frequency of audits.  |      |         |            |           |         |                    |              |
| 34   |  |      |         |            |           |         |                    |              |
| 35   | Are any renewals/reissues subject to optional or mandatory underwriting?                         |      |         |            |           |         |                    |              |
| 36   |  |      |         |            |           |         |                    |              |
| 37   | ' Are there limitations on the number renewals per individual?                                   |      |         |            |           |         |                    |              |
| 38   |  |      |         |            |           |         |                    |              |
| 39   | 7 - 7 7 7 7  |      |         |            |           |         |                    |              |
| 40   | Are the limitations on renewals based on state, federal, or company rules?                       |      |         |            |           |         |                    |              |
| 41   | ,  |      |         |            |           |         |                    |              |
| 42   | Poes your company distribute its products through captive agents?                                |      |         |            |           |         |                    |              |
| 43   | Does your company distribute its products through its employees?                                 |      |         |            |           |         |                    |              |
| 44   | What triggers a pre-existing exclusion review (dollar, diagnosis, prescription, other)           |      |         |            |           |         |                    |              |
| 45   | Additional State Specific Comments (optional)  |      |         |            |           |         |                    |              |
|      |  |      |         |            |           |         |                    |              |
| Poli | icy/Certificate Administration   |      |         |            |           |         |                    |              |
|      |  | S    | TLD Not | STLD Not   | STLD Not  | STLD    | STLD               |              |
|      | STLD STLD 91 - STLD 18   |      | Sitused | Sitused 91 | Sitused   | Sitused | Sitused            | STLD Sitused |
|      | <=90 180 364   |      | <=90    | - 180      | 181 - 364 | <=90    | 91 - 180           | 181 - 364    |
| 46   |  |      |         |            |           |         |                    |              |
| 47   |  |      |         |            |           |         |                    |              |
| 48   | '  |      |         |            |           |         |                    |              |
| 49   |  |      |         |            |           |         |                    |              |
| 50   |  |      |         |            |           |         |                    |              |
| 51   |  |      |         |            |           |         |                    |              |
| 52   |  |      |         |            |           |         |                    |              |
| 53   |  |      |         |            |           |         |                    |              |
| 54   | •  |      |         |            |           |         |                    |              |
| 55   | · · · · · · · · · · · · · · · · · · ·  |      |         |            |           |         |                    |              |
| 56   |  |      |         |            |           |         |                    |              |
| 57   |  |      |         |            |           |         |                    |              |
| 58   |  |      |         |            |           |         |                    |              |
| 59   |  |      |         |            |           |         |                    |              |
| 60   | · · · · · · · · · · · · · · · · · · ·  |      |         |            |           |         |                    |              |
| 61   |  |      |         |            |           |         |                    |              |
|      | Member months for other than new policies/certificates or renewal/reissued policies/certificates |      |         |            |           |         |                    |              |
| 62   | during the period  |      |         |            |           |         |                    |              |

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Number of policy/certificate terminations and cancellations initiated by the policyholder/certificate holder

|       | Short-Term I   | imite      | d Duratio   | n Incurs     | nce (20   | 26)        |           |         |          |              |
|-------|--|------------|-------------|--------------|-----------|------------|-----------|---------|----------|--------------|
| Dalid | cy/Certificate Administration (Continued)  | -11111166  | Duracio     | JII IIISUI a | ilice (20 | 20)        |           |         |          |              |
| PUII  | cy/cerunicate Administration (Continued)   |            |             |              | STLD Not  | STLD Not   | STI D Not | STLD    | STLD     |              |
|       |  | STLD       | STLD 91 -   | STLD 181 ·   | Sitused   | Sitused 91 | Sitused   | Sitused | Sitused  | STLD Sitused |
|       |  | <=90       | 180         | 364          | <=90      | - 180      | 181 - 364 | <=90    | 91 - 180 | 181 - 364    |
| 64    | Number of policies/certificates cancelled during the free look period.   | 1 30       | 100         | 501          | 1 30      | 100        | 101 501   | 1 30    | J1 100   | 101 501      |
| 65    | Number of Policies/Certificates Cancelled at the Initiation of the policyholder  | /certifica | teholder    |              |           |            |           |         |          |              |
| 05    | During the Free Look Period During the Period.   |            |             |              |           |            |           |         |          |              |
| 66    | Number of Covered Lives on Policies/Certificates Cancelled at the Initiation of  |            |             |              |           |            |           |         |          |              |
| 00    | policyholder/certificateholder During the Free Look Period During the Period   |            |             |              |           |            |           |         |          |              |
| 67    | Number of policy/certificate terminations and cancellations due to non-payment   |            |             |              |           |            |           |         |          |              |
| 68    | Number of Policies/Certificates Cancelled by Insurer for Any Reason Other T Premium During the Period.   | han Non-   | -Payment of |              |           |            |           |         |          |              |
|       | Number of Policies/Certificates Cancelled by Insurer Following Filing of a Cla   | im or Pri  | nr          |              |           |            |           |         |          |              |
| 69    | Authorization Request by the policyholder/certificateholder During the Period  | d.         |             |              |           |            |           |         |          |              |
| 70    | Number of Lives on Policies/Certificates Cancelled by Insurer Following Filing   |            | im or Prior |              |           |            |           |         |          |              |
|       | Authorization Request by the policyholder/certificateholder During the Period  | d.         |             |              |           |            |           |         |          |              |
| 71    | Number of rescissions.   |            |             |              |           |            |           |         |          |              |
| 72    | Number of insured lives impacted on terminations and cancellations initiated   | by the     |             |              |           |            |           |         |          |              |
| , _   | policyholder/certificateholder.  |            |             |              |           |            |           |         |          |              |
| 73    |  | nonpaym    | ent.        |              |           |            |           |         |          |              |
| 74    | Number of insured lives impacted by rescissions.   |            |             |              |           |            |           |         |          |              |
| 75    | Number of Policies/Certificates in Force at the End of the Period.   |            |             |              |           |            |           |         |          |              |
| 76    | Number of Covered Lives on Policies/Certificates in Force at the End of the I  | Period.    |             |              |           |            |           |         |          |              |
|       |  |            |             |              |           |            |           |         |          |              |
| Prio  | or Authorizations  |            |             |              | CTI D. N  | OTI D. N   | OTI D. N  | CT! D   | OT! D    |              |
|       |  |            |             |              | STLD Not  | STLD Not   |           | STLD    | STLD     |              |
|       |  | STLD       | STLD 91 -   | STLD 181 -   |           | Sitused 91 | Sitused   | Sitused | Sitused  | STLD Sitused |
|       |  | <=90       | 180         | 364          | <=90      | - 180      | 181 - 364 | <=90    | 91 - 180 | 181 - 364    |
| 77    | The state of the s | riod.      |             |              |           |            |           |         |          |              |
| 78    |  |            |             |              |           |            |           |         |          |              |
| 79    | 1 11 31  |            |             |              |           |            |           |         |          |              |
| 80    |  |            |             |              |           |            |           |         |          |              |
| 81    | The state of the s |            |             |              |           |            |           |         |          |              |
| 82    | Number of Prior Authorization Requests Pending at the End of the Period.   |            |             |              |           |            |           |         |          |              |
|       |  |            |             |              |           |            |           |         |          |              |

83 Median Number of Days from Receipt of Prior Authorization Request to Decision.

Average Number of Days from Receipt of Prior Authorization to

Decision.

|      | Short-Term Limited  | d Duratio | on Insura  | ince (20 | 26)        |           |         |          |              |
|------|---|-----------|------------|----------|------------|-----------|---------|----------|--------------|
| Clai | laims Administration (Including Pharmacy)   |           |            |          |            |           |         |          |              |
|      |   |           |            | STLD Not | STLD Not   | STLD Not  | STLD    | STLD     |              |
|      | STLD  | STLD 91 - | STLD 181 - | Sitused  | Sitused 91 | Sitused   | Sitused | Sitused  | STLD Sitused |
|      | <=90  | 180       | 364        | <=90     | - 180      | 181 - 364 | <=90    | 91 - 180 | 181 - 364    |
| 85   | 85 Number of Claims Pending at the Beginning of the Period.                           |           |            |          |            |           |         |          |              |
| 86   | - Hamber of diameter  |           |            |          |            |           |         |          |              |
| 87   | or transfer or cramme defined, rejection or recomment                                 |           |            |          |            |           |         |          |              |
| 88   | Number of denied, rejected, or returned due to claims submission coding error(s).     |           |            |          |            |           |         |          |              |
| 89   | 89 Number of denied, rejected, or returned for lack of Prior Authorization.           |           |            |          |            |           |         |          |              |
| 90   | Number of denied, rejected, or returned as Non-Covered or beyond benefit limitation.  |           |            |          |            |           |         |          |              |
| 91   |   |           |            |          |            |           |         |          |              |
| 92   | Number of denied, rejected, or returned as Subject to pre-existing                    |           |            |          |            |           |         |          |              |
| 02   | condition exclusion.  |           |            |          |            |           |         |          |              |
| 93   |   | ion.      |            |          |            |           |         |          |              |
| 94   | 94 Number denied, rejected, or returned due to being within the waiting period.       | wit.      |            |          |            |           |         |          |              |
| 95   | exceeded.   | TIIL      |            |          |            |           |         |          |              |
| 96   |   |           |            |          |            |           |         |          |              |
| 97   | Training or creaming at and creaming  |           |            |          |            |           |         |          |              |
| 98   |   |           |            |          |            |           |         |          |              |
| 99   | · · · · · · · · · · · · · · · · · · ·   |           |            |          |            |           |         |          |              |
|      | 00 Median Number of Days from Receipt of Claim to Decision for Approved Claims.       |           |            |          |            |           |         |          |              |
|      | 01 Average Number of Days from Receipt of Claim to Decision for Approved Claims.      |           |            |          |            |           |         |          |              |
|      | 02 Number of Claim Decisions Appeals Pending At Beginning of Period.                  |           |            |          |            |           |         |          |              |
|      | 03 Number of Claim Decision Appeals Received During the Period.                       |           |            |          |            |           |         |          |              |
| 104  | .04 Number of Claim Decision Appeals Resulting in Decisions Upheld During the Period. |           |            |          |            |           |         |          |              |
| 105  | Period.   | ing the   |            |          |            |           |         |          |              |
|      | .06 Number of Claim Decision Appeals Rejected and Not Considered for Any Reason.      |           |            |          |            |           |         |          |              |
|      | 07 Number of Claim Decision Appeals Pending at End of Period.                         |           |            |          |            |           |         |          |              |
|      | .08 Average Number of Days from Receipt of Appeal to Decision.                        |           |            |          |            |           |         |          |              |
|      | 09 Number of claims paid.   |           |            |          |            |           |         |          |              |
| 110  | 10 Dollar Amount of Claims Paid During the Reporting Period                           |           |            |          |            |           |         |          |              |
|      |   |           |            |          |            |           |         |          |              |

| Short-Term   | Limite     | ed Duratio   | on Insura  | ince (20 | 20)        |           |         |          |             |
|--|------------|--------------|------------|----------|------------|-----------|---------|----------|-------------|
| Consumer Complaints and Lawsuits   |            |              |            |          |            |           |         |          |             |
|  |            |              |            | STLD Not |            |           | STLD    | STLD     |             |
|  | STLD       |              | STLD 181 - |          | Sitused 91 | Sitused   | Sitused | Sitused  | STLD Situse |
|  | <=90       | 180          | 364        | <=90     | - 180      | 181 - 364 | <=90    | 91 - 180 | 181 - 364   |
| Number of complaints received by Company (other than through the               |            |              |            |          |            |           |         |          |             |
| <del>DOI)</del> directly from any person or entity other than the DOI          |            |              |            |          |            |           |         |          |             |
| 112 Number of complaints received through DOI.                                 |            |              |            |          |            |           |         |          |             |
| 113 Number of complaints resulting in claims reprocessing.                     |            |              |            |          |            |           |         |          |             |
| 114 Number of Lawsuits Open at Beginning of the Period.                        |            |              |            |          |            |           |         |          |             |
| 115 Number of Lawsuits Opened During the Period.                               |            |              |            |          |            |           |         |          |             |
| 116 Number of Lawsuits Closed During the Period.                               |            |              |            |          |            |           |         |          |             |
| Number of Lawsuits Closed During the Period with Consideration for             |            |              |            |          |            |           |         |          |             |
| the Consumer.  |            |              |            |          |            |           |         |          |             |
| 118 Number of Lawsuits Open at End of Period.                                  |            |              |            |          |            |           |         |          |             |
|  |            |              |            |          |            |           |         |          |             |
| Marketing and Sales  |            |              |            |          |            |           |         |          |             |
|  |            |              |            | STLD Not | STLD Not   | STLD Not  | STLD    | STLD     |             |
|  | STLD       | STLD 91 -    | STLD 181 - | Sitused  | Sitused 91 | Sitused   | Sitused | Sitused  | STLD Situs  |
|  | <=90       | 180          | 364        | <=90     | - 180      | 181 - 364 | <=90    | 91 - 180 | 181 - 364   |
| 119 Number of Individual Applications Pending at the Beginning of the Period.  |            |              |            |          |            |           |         |          |             |
| 120 Number of applications received.   |            |              |            |          |            |           |         |          |             |
| 121 Number of Renewal/Reissue Individual Applications Received During the P    | eriod.     |              |            |          |            |           |         |          |             |
| 122 Number of New Individual Applications Denied During the Period for Any F   | Reason.    |              |            |          |            |           |         |          |             |
| 123 Number of New Individual Applications Denied During the Period - Health    |            |              |            |          |            |           |         |          |             |
| 124 Number of Renewal/Reissue Individual Applications Denied During the Per    |            |              |            |          |            |           |         |          |             |
| Number of Renewal/Reissue Individual Applications Denied During the Per        | iod - Heal | th Status or |            |          |            |           |         |          |             |
| Condition.   |            |              |            |          |            |           |         |          |             |
| 126 Number of New Individual Applications Approved During the Period.          |            |              |            |          |            |           |         |          |             |
| 127 Number of Renewal/Reissue Individual Applications Approved During the I    | Period.    |              |            |          |            |           |         |          |             |
| 128 Number of Individual Applications Pending at the End of the Period.        |            |              |            |          |            |           |         |          |             |
| 129 Number of applications initiated via phone.                                |            |              |            |          |            |           |         |          |             |
| 130 Number of applications completed via phone.                                |            |              |            |          |            |           |         |          |             |
| 131 Number of applications initiated face-to-face.                             |            |              |            |          |            |           |         |          |             |
| 132 Number of applications completed face-to-face.                             |            |              |            |          |            |           |         |          |             |
| 133 Number of applications initiated online (Electronically).                  |            |              |            |          |            |           |         |          |             |
| 134 Number of applications completed online (Electronically).                  |            |              |            |          |            |           |         |          |             |
| 135 Number of New Individual Applications initiated by Mail During the Period. |            |              |            |          |            |           |         |          |             |

|   | <b>Short-Term Limite</b>       | d Duratio     | on Insura      | ince (20     | 26)        |           |         |          |             |
|---|--------------------------------|---------------|----------------|--------------|------------|-----------|---------|----------|-------------|
| Marketing and Sales (Continued)                             |                                |               |                |              |            |           |         |          |             |
|   |                                |               |                | STLD Not     | STLD Not   | STLD Not  | STLD    | STLD     |             |
|   | STLD                           | STLD 91 -     | STLD 181 -     | Sitused      | Sitused 91 | Sitused   | Sitused | Sitused  | STLD Situse |
|   | <=90                           | 180           | 364            | <=90         | - 180      | 181 - 364 | <=90    | 91 - 180 | 181 - 364   |
| 136 Number of New Individual Applications completed by M    | lail During the Period.        |               |                |              |            |           |         |          |             |
| 137 Number of New Individual Applications initiated by Any  | Other Method During the Pe     | riod.         |                |              |            |           |         |          |             |
| 138 Number of New Individual Applications completed by A    |                                |               |                |              |            |           |         |          |             |
| 139 Commissions paid during reporting period (Dollar Amou   | int of Commissions Incurred I  | During the Pe | riod).         |              |            |           |         |          |             |
| 140 Unearned Commissions returned to company on policie     | s/certificates sold during the | period?       |                |              |            |           |         |          |             |
| 141 Other remunerations collected during the period (Dollar | r Amount of Fees Charged to    | Applicants ar | nd Policyholde | rs During th | e Period). |           |         |          |             |
|   |                                |               |                |              |            |           |         |          |             |
| d Duration Attestation                                      |                                |               |                |              |            |           |         |          |             |
| d Daration Attestation                                      |                                |               |                |              |            |           |         |          |             |
|   |                                |               |                | First        | Middle     |           |         |          |             |
|   |                                |               |                | Name         | Name       | Last Name | Suffix  | Title    | Comments    |
|   |                                |               |                |              |            |           |         |          |             |
| 142 First Attestor Information                              |                                |               |                |              |            |           |         |          |             |
| 143 Second Attestor Information                             |                                |               |                |              |            |           |         |          |             |

144 Overall Comments for the Filing Period