## 2024 Market Conduct Annual Statement Participation Requirements and General Information

The Market Conduct Annual Statement (MCAS) is a mandatory filing that collects data on a state-specific, industry wide basis. Data is collected for the following lines of business based on the stated premium thresholds

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Line of Business	Premium Threshold	Exceptions
Disability Income	\$50,000	
Health (In-Exchange and Out-of-Exchange)*	\$50,000**	
Homeowners	\$50,000	
Individual Annuity (Fixed and Variable)	\$50,000	
Individual Life (Cash Value and Non-Cash Value) – Excluding Credit Life	\$50,000	
Lender-Placed Auto	\$50,000	
Lender-Placed Home	\$50,000	
Long-Term Care Annuity Hybrid	\$0	
Long-Term Care Life Hybrid	\$0	
Long-Term Care Stand-Alone	\$0	
Other Health	\$50,000	
Pet	\$0	
Private Flood	\$50,000	
Private Passenger Auto	\$50,000	
Short-Term Limited Duration Insurance	\$50,000	
Travel	\$0	AR - \$50,000

<sup>\*</sup> For Tennessee, submission of health MCAS data is voluntary as the Commissioner does not have authority to promulgate rules requiring companies that write accident and health insurance to file an annual statement concerning its market conduct.

Companies must participate in this project and report data to each of the following participating states in which the company writes one or more of the lines of business noted above.

Illinois	Montana	Rhode Island
Indiana	Nebraska	South Carolina
Iowa	North Dakota	South Dakota
Kansas	Nevada	Tennessee
Kentucky	New Hampshire	Texas
Louisiana	New Jersey	Utah
Maine	New Mexico	Vermont
Maryland	North Carolina	Virginia
Massachusetts	Ohio	Washington
Michigan	Oklahoma	West Virginia
Minnesota	Oregon	Wisconsin
Mississippi	Pennsylvania	Wyoming
Missouri	Puerto Rico	
	Indiana Iowa Kansas Kentucky Louisiana Maine Maryland Massachusetts Michigan Minnesota Mississippi	Indiana Nebraska Iowa North Dakota Kansas Nevada Kentucky New Hampshire Louisiana New Jersey Maine New Mexico Maryland North Carolina Massachusetts Ohio Michigan Oklahoma Minnesota Oregon Mississippi Pennsylvania

On behalf of the 2024 participating states, the NAIC will send a call letter to each company that may be required to file an MCAS in one or more participating states.

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Tenn. Code Ann. § 56-8-107(c)(1).

\*\* Health has an earned premium threshold.

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## **Additional Information:**

- Each company in a holding company system must file separately for each state in which it does business.
   Data for the members of a group or insurance holding company cannot be combined into a single filing for the purposes of this project. Data must be reported separately for each group member unless it involves only inter-company arbitration.
- If your company received a call letter but is currently inactive in all of the states requesting data, you are still required to participate if there is business in force for the state(s) and lines requested. If you have questions about your company's status with a participating state, contact the <u>state MCAS Contact</u> to determine your participation status.
- Companies waived from filing in previous years are not automatically waived from filing this year. To
  request a waiver, you must submit your request using the 2024 Waiver and Extension Request form within
  the MCAS Submission Tool once it is available to accept MCAS filings for the 2024 data year. You must
  advise each state of the reason you are requesting an exemption. Requests for exemption should be made
  as early as possible. Do not wait until the data is due.
- If two or more companies merged during the reporting period, the companies should report under the corporate structure that is in effect as of the last day of the reporting period. If the merger was effective before or during the review period, then the surviving company should do the combined reporting. Any of the non-surviving companies that received a call letter should contact the state that sent the letter and inform them of the change. If the merger will be effective after the reporting period, the companies involved should file separate reports.
- If your company received a call letter and the company is in rehabilitation, the company is not required to
  participate. However, you must contact the participating state that sent the call letter to request a waiver.
- If your company received a call letter and the company is under an Order of Supervision, you may request
  a waiver from each participating state that sent the company a letter. Waivers will be determined on an
  individual state basis and may consider items such as whether the company is continuing to write new
  business, premium volume, etc.
- Companies that wish to request a waiver based on an Order of Supervision are encouraged to provide the
  name of the state that issued the order when submitting their waiver request and should include a list of all
  states where a waiver is being requested.