DAVID Y. IGE GOVERNOR



CATHERINE P. AWAKUNI COLÓN DIRECTOR

> GORDON I. ITO INSURANCE COMMISSIONER

STATE OF HAWAI`I INSURANCE DIVISION DEPARTMENT OF COMMERCE & CONSUMER AFFAIRS

ARTIMENT OF COMMERCE & CONSUMER AFFA P. O. BOX 3614 HONOLULU, HAWAI'I 96811-3614 335 MERCHANT STREET, ROOM 213 HONOLULU, HAWAI'I 96813 PHONE NO: (808) 566-2790 FAX NO: (808) 566-2790 cca.hawaii.gov/ins

December 18, 2015

Memorandum 2015 – 4C

TO: CAPTIVE INSURERS AUTHORIZED IN HAWAII

SUBJECT:Captive Insurance Company
2015 Annual Filing Requirements (Due in 2016)

I. GENERAL INFORMATION

- A. File documents directly with the Insurance Division, Captive Insurance Branch unless otherwise noted.
- B. Risk Retention Captive Insurance Companies Annual Filing Requirements (Checklist) may be found at http://cca.hawaii.gov/captive/annual-filing-instructions-and-forms/
- C. For due dates that fall on a weekend or State holiday, the due date is extended to the next business day.
- D. Postmark dates will be recognized in determining filing deadlines.
- E. Fine for late filing of the audited financial statement, statutory annual statement, quarterly statements, and other required filings <u>of not more than \$500 per day up to \$10,000 per</u> <u>violation (HRS §§ 431:19-107 and 431:19-109)</u>. Please inform your captive clients that a daily fine will be levied for late filings.
- F. Make checks payable to the "**DEPARTMENT OF COMMERCE AND CONSUMER AFFAIRS**, **STATE OF HAWAII**" unless otherwise noted. A service charge of \$25 will be due for each dishonored check, and replacement checks must be certified.
- G. Contact Alan Watanabe at phone number (808) 586-7413, fax number (808) 586-0987, or e-mail <u>awatanabe@dcca.hawaii.gov</u> if any questions.

II. DOCUMENTS AND FILING DEADLINES

II. DOCUMENTS AND FILING DEADLINES Document / Description	# of Copies	2016 Filing Deadline
TAX STATEMENT <cap-001 <b="">Revised 12/15 Annual Statement of Premiums Written for Taxation Purposes></cap-001>		Deadine
Prepared for the 2015 year attested by notarized signature of captive's duly authorized representative, and accompanied by appropriate payment.	1	3/01/16
ECONOMIC IMPACT REPORT <cap-003 12="" 15="" revised=""></cap-003>		
Expenses reported on an accrual basis and report cash and invested assets at market value for calendar year 2015.	1	3/01/16
INACTIVE STATUS REPORT <cap-005 12="" 15="" revised=""></cap-005>		
Reporting of captives that are not actively writing business. CERTIFICATE OF COMPLIANCE	1	3/01/16
Required for Branch Captives to file a Certificate of Compliance issued by the insurance regulatory authority of the Parent's domicile along with a certified copy of the Parent's most recent insurance regulatory examination report.	1	3/01/16
ANNUAL STATEMENT		
Required for Class 3 Risk Retention Captive Insurance Companies only (unless otherwise specified by the Insurance Commissioner for Class 1, 2, 3 Association, 4 and 5 captives) on 8.5" x 14" form as required by the NAIC for the year 2015. Jurat page signed by at least two principal officers and manual signatures properly notarized.	1	3/01/16
NAIC Property/Casualty Annual and Quarterly Statement Instructions and updates are available on the NAIC website for purchase at <u>http://www.naic.org/prod_serv_publications.htm</u>		
CAPTIVE QUESTIONNAIRE <cap-002 12="" 15="" revised=""></cap-002>		
Class 1, 2, 3 Association, 4 and 5 Captives	2	Last day of 6th month following fiscal year end
Class 3 Risk Retention Captives	2	3/01/16
Branch Captives	2	30 days after filed in Parent's Domicile
STATUTORY COMPLIANCE <cap-006(a) 12="" 15="" 15,="" cap-006(b)="" revised=""></cap-006(a)>		
 Required to complete applicable form attested by signature of duly authorized representative: 1. CAP-006(a) form required for captives that <u>DO NOT</u> have a Strategic Investment Policy approved by the Insurance Commissioner. 		
 CAP-006(b) form required for captives that have a Strategic Investment Policy approved by the Insurance Commissioner. 		
Class 1, 2, 3 Association, 4 and 5 Captives	2	Last day of 6th month following fiscal year end
Class 3 Risk Retention Captives	2	3/01/16
Branch Captives	2	30 days after filed in Parent's Domicile

Document / Description	# of Copies	2016 Filing Deadline
ACTUARIAL OPINION / CERTIFICATION OF RESERVE FOR LOSSES	•	
Prepared by a member of the American Academy of Actuaries or other qualified loss reserve specialist as defined in the <i>NAIC Annual Statement Instructions</i> and approved by the Insurance Commissioner, alternatively, Class 1, 2, 3 Association, 4, and 5 captives may utilize an actuarial opinion prepared by a loss reserve specialist approved by the Insurance Commissioner.		
Class 1, 2, 3 Association, 4 and 5 Captives	2	Last day of 6th month following fiscal year end
Class 3 Risk Retention Captives	2	3/01/16
Branch Captives	2	30 days after filed in Parent's Domicile
ANNUAL LICENSE RENEWAL FEE		
Fee required for renewal of Certificate of Authority:Class 1 and 2\$ 300Class 3\$ 500Class 4 and 5\$1,000	1	4/01/16
STATEMENT OF FINANCIAL CONDITION AND RESULTS OF OPERATIONS		
Audited Balance Sheet, Income Statement and Statement of Cash Flows, at a minimum, prepared in accordance with GAAP or other comprehensive basis of accounting for Class 1, 2, 3 Association, 4 and 5 captives, and SAP for Class 3 Risk Retention Captive Insurance Companies, all audited by an independent certified public accountant approved by the Insurance Commissioner.		
Class 1, 2, 3 Association, 4 and 5 Captives	2	Last day of 6th month following fiscal year end
Class 3 Risk Retention Captives	2	6/01/16
Branch Captives	2	30 days after filed in Parent's Domicile
FINANCIAL PROJECTIONS		
 Required for Class 3 Risk Retention Captive Insurance Companies. In addition to hard copies, provide electronic copy (preferably Excel) to <u>awatanabe@dcca.hawaii.gov</u>: Financial Projections (Actual 2015 and Budget 2015-2018) Briefly describe the underwriting policy and pricing methodology. Briefly explain variances equal or greater than 20%. 	2 hard copies and electronic copy	6/01/16
 Include underlying assumptions used for the financial projections. 		
REQUIRED FOR CAPTIVES AUTHORIZED TO WRITE DIRECT MOTOR VEHICLE INSURANCE IN HAWAII:		
A. INSURED VEHICLE CENSUS REPORT FOR THE QUARTER ENDED 12/31/15 B. DRIVERS' EDUCATION FUND UNDERWRITERS' FEE	3 3	2/15/16 2/15/16
Please refer to the Property & Casualty Annual Filing Instructions at: http://cca.hawaii.gov/ins/insurers/annual-filing-instructions-and-tax-forms/		
REQUIRED FOR CAPTIVES AUTHORIZED TO WRITE DIRECT WORKERS' COMPENSATION INSURANCE IN HAWAII :		
ANNUAL ASSESSMENT FOR WORKERS' COMPENSATION INSURANCE SPECIAL COMPENSATION FUND (ref. HRS § 386:151 & HRS § 386:152)	1	Within 30 Days of Demand of DLIR