TEXAS DEPARTMENT OF INSURANCE
Regulatory Policy Division - Accident and Health Program (106-1D)
333 Guadalupe, Austin, Texas 78701 PO Box 149104, Austin, Texas 78714-9104
(512) 676-6630 | F: (512) 490-1017 | (800) 578-4677 | TDI.texas.gov | @TexasTDI

Figure: 28 TAC §3.3837(e):

LONG-TERM CARE SUITABILITY REPORTING FORM

FOR THE STATE OF TEXAS

Due: No later than June 30 annually for the preceding calendar year

For the Reporting Year of _____

Company Information:

Company NAIC Number: _____

Company Name: _____

Company Address: _____

City: _____ State: _____ Zip Code: (5-digit) _____

Contact Information:

Contact Name and Title: _____

Contact E-mail: _____

Contact Phone Number: _____ EXT: _____

Suitability Data for Partnership Policies:

Long-term Care Partnership Policies	Total Number of Applications Received	Total Number of Applicants Who Declined to Provide Personal Worksheet Information	Total Number of Applicants Who Did Not Meet Suitability Standards	Total Number of Applicants Who Chose to Confirm After Receiving a Suitability Letter
Comprehensive (institutional and community care)				
Nursing Home (institutional only)				

Suitability Data for Non-Partnership Policies:

Long-term Care Non-Partnership Policies	Total Number of Applications Received	Total Number of Applicants Who Declined to Provide Personal Worksheet Information	Total Number of Applicants Who Did Not Meet Suitability Standards	Total Number of Applicants Who Chose to Confirm After Receiving a Suitability Letter
Comprehensive (institutional and community care)				
Nursing Home (institutional only)				
Home Health Care (community-based services**)**				
Riders (attached to life policies, annuity contracts)				

Print Form

Submit by Email

Please send all responses using this E-mail Button, it is the only way your data will be accepted!

After you click on the "Submit by E-mail" box, please send the resulting e-mail, addressed to TDI. This will complete the form submission.

LHL566 Rev. 12/2015