

NATIONAL ASSOCIATION OF INSURANCE COMMISSIONERS

Date: 4/15/2022

Virtual Meeting

HEALTH RISK-BASED CAPTIAL (E) WORKING GROUP

Wednesday, April 20, 2022 4:00-5:00 p.m. ET / 3:00-4:00 p.m. CT / 2:00-3:00 p.m. MT / 1:00-2:00 p.m. PT

ROLL CALL

Steve Drutz, Chair	Washington	Tish Becker	Kansas
Matthew Richard, Vice Chair/	Texas	Danielle Smith/Debbie Doggett	Missouri
Aaron Hodges		Michael Muldoon	Nebraska
Wanchin Chou	Connecticut	Tom Dudek	New York
Carolyn Morgan/Kyle Collins	Florida	Jefferey Smith	Pennsylvania

NAIC Support Staff: Crystal Brown

AGENDA

1. Consider Adoption of its Mar. 18 (in lieu of the Spring National Meeting)

Attachment One Minutes—Steve Drutz (WA)

2. Hear a Presentation from A.M. Best on Best's Capital Adequacy Relativity (BCAR) Attachment Two —Bruno Caron, George Hansen, and Tom Mount (A.M. Best)

- 3. Discuss Any Other Matters Brought Before the Working Group—Steve Drutz (WA)
- 4. Adjournment

Draft Pending Adoption

Attachment Two
Capital Adequacy (E) Task Force
3/28/22

Draft: 3/24/22

Health Risk-Based Capital (E) Working Group
Virtual Meeting (in lieu of meeting at the 2022 Spring National Meeting)
March 18, 2022

The Health Risk-Based Capital (E) Working Group of the Capital Adequacy (E) Task Force met March 18, 2022. The following Working Group members participated: Steve Drutz, Chair (WA); Matthew Richard, Vice Chair, and Sean Fulton (TX) Wanchin Chou and Stephen Flick (CT); Kyle Collins (FL); Tish Becker (KS); Danielle Smith (MO); Michael Muldoon and Lindsay Crawford (NE); Ergys Shanaj (NY); and Jeffery Smith (PA). Also participating was: Tom Botsko (OH).

1. Adopted is Feb. 25, 2022; Jan. 28, 2022; and Dec. 16, 2021, Minutes

The Working Group met Feb. 25, 2022; Jan. 28, 2022; and Dec. 16, 2021. During these meetings, the Working Group took the following action: 1) exposed and referred the Health Test Language Proposal to the Blanks (E) Working Group; 2) exposed and referred a memo to the Health Actuarial (B) Task Force regarding asset adequacy testing; 3) adopted proposal 2021-18-H as modified for instructions in evaluating the investment yield adjustment in the underwriting risk factors; 4) received and exposed the American Academy of Actuaries (Academy) report on the H2 – Underwriting Risk component; and 5) reviewed the investment yields of the six-month U.S. Treasury bonds for the investment income adjustment.

Mr. Chou made a motion, seconded by Mr. Muldoon, to adopt the Working Group's Feb. 25, 2022 (Attachment ___); Jan. 28, 2022 (Attachment ___); and Dec. 16, 2021 (Attachment Two-A) minutes. The motion passed unanimously.

2. <u>Discussed the Academy's H2 – Underwriting Risk Component Report</u>

Mr. Drutz said the Academy's H2 – Underwriting Risk report was exposed for a 45-day comment period, and no comments were received. The Academy outlined six options for better aligning the H2 risk factors to economic risk: 1) refresh factors based on updated insurer data; 2) develop factors at a more granular product level; 3) develop factors specific to more relevant block sizes and consider indexing factors for cut points to change over time; 4) model risk factors over an NAIC-defined prospective time horizon with a defined safety level that can be refreshed regularly; 5) refresh the managed care credit formula and factors to be more relevant and reflective of common contracting approached and other risk factors associated with these contracting approaches; and 6) analyze long-term care insurance (LTCI) underwriting performance to create a more nuanced set of risk factors that considers pricing changes over time.

Mr. Muldoon said the Academy laid out several other methodologies in their report, such as Best's Capital Adequacy Relativity (BCAR), the property/casualty (P/C) risk-based capital (RBC) formula, etc. He asked if there would be any follow-up or educational sessions on the varying methodologies evaluated by the Academy to gain a better understanding that could be done simultaneously with moving forward to evaluate what data would be needed. Derek Skoog (Academy) said the Academy could provide a presentation on the BCAR and the P/C RBC formula approach, as well as more detailed suggestions for how the factors could be updated considering these alternative approaches. He said the Academy worked with AM Best to gain an understanding of how those factors were developed, and he suggested that the Academy may also be willing to present to the Working Group also. Mr. Chou suggested that the Working Group had an educational session before moving forward with the next

Draft Pending Adoption

Attachment One

Attachment Two
Capital Adequacy (E) Task Force
3/28/22

steps. Mr. Muldoon asked if there is a way to compare what a company might look like under the BCAR versus the current health RBC formula. Mr. Botsko said it is a great idea to have the discussion; however, RBC is about minimum solvency standards, and the BCAR is based on more of a going concern perspective, which is a little bit different than RBC. Mr. Drutz said it is his hope that as these conversations move forward, it will help the Working Group understand the purposes and the differences for those purposes.

The Working Group agreed to schedule a call for an educational session on the various methodologies prior to requesting that the Academy move forward.

3. Adopted its 2022 Working Agenda

Mr. Drutz said each year, the Working Group reviews the working agenda for the upcoming year based on its priorities and needs. He provided a summary of the changes: 1) combined items 26 and 27 into one item and changed the expected completion date to "Ongoing"; 2) updated the priority status and expected completion for item 28; 3) updated the expected completion and working agenda description for item 30; 4) combined items 31, 34, and 36 into one item and updated the expected completion date; 5) updated the expected completion dates for items 32 and 33; and 6) updated the working item description for item 35.

Mr. Chou made a motion, seconded by Mr. Muldoon, to adopt its 2022 working agenda (Attachment ___). The motion passed unanimously.

Having no further business, the Health Risk-Based Capital (E) Working Group adjourned.

SharePoint/NAIC Support Staff Hub/Member Meetings/Spring 2022 National Meeting/Committee Meetings/Financial Condition (E) Committee/Capital Adequacy (E) TF/Health Risk-Based Capital (E) WG



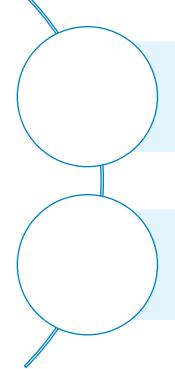
AM Best L/H BCAR Adjustment System

Bruno Caron FSA, MAAA – Associate Director George Hansen, FSA, MAAA – Senior Research Analyst Tom Mount, ACAS, MAAA, CERA, CEEM – Senior Director

> NAIC Health RBC Group April 20,2022



NAIC Health RBC Group Agenda



BCAR Overview

Morbidity Risk Factor Development



Model Overview

- Summary Scores-with/without adjustments
- C1.1-Fixed Income Assets
- C1.2-Fixed BA Assets
- SOR Factor
- C1.3-Separate Account Assets (related to interest rate guarantees)
- C1.4 Equity, Real Estate (Base/BA), Reinsurance Counterparty, Derivatives, Other Assets
- C2-Mortality Risk
- C2 Morbidity Risk
- C3 Interest Rate Risk
- C3 Market Risk
- C4 Business Risk
- Available Capital



Key Model Highlights

- Net Required Capital Using Value at Risk (VaR) metric
 - VaR levels: 95.0, 99.0, 99.5, 99.6
- Ratio based on Available Capital
 - Difference between Available Capital and Required Capital, as a ratio to Available Capital
 - Required Capital calculated using VAR metrics
 - Better alignment with risk appetite/tolerance statements



New Structure – L/H BCAR

BCAR Ratio = (Available Capital – Net Required Capital) / Available Capital



Available Capital (AC)

Reported Capital (PHS)

Equity Adjustments:

AVR Reserves

Interest Maintenance Reserve

Unearned Premiums

Debt Adjustments:

Surplus Notes

Other Adjustments:

Future Operating Losses

Future Dividends

Derivatives Off Balance Sheet

Net Required Capital

Gross Required Capital (GRC):

(C1) Asset Risk

(C2) Insurance Risk

(C3) Interest Rate/Market Risk

(C4) Business Risk

Covariance Adjustment

Net Required Capital (NRC)*

*NRC= SQRT [(C1NonEq + C3Interest)² + (C1Eq + C3Market)² + (C2)²] + C4



Application of BCAR

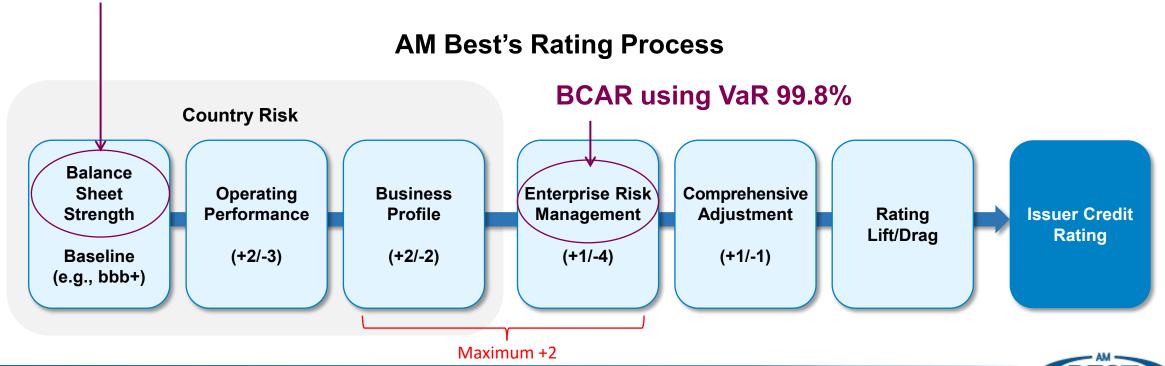
VaR Confidence Level (%)	BCAR	BCAR Assessment
99.6	> 25 at 99.6	Strongest
99.6	> 10 at 99.6 and ≤ 25 at 99.6	Very Strong
99.5	> 0 at 99.5 and ≤ 10 at 99.6	Strong
99	> 0 at 99 and ≤ 0 at 99.5	Adequate
95	> 0 at 95 and ≤ 0 at 99	Weak
95	≤ 0 at 95	Very Weak



BCAR in the Rating Process

- Balance Sheet Strength Assessment
- Enterprise Risk Management (ERM)

BCARs using VaR 95%, 99%, 99.5%, & 99.6%



Sources of Information

Modeling Methodologies

Premium & Reserve Factors



SRQ Individual Health

*** Please describe "All Other " product types, using the space below.

			(01)	(02)	(03)	(04)	(05)	(06)	(07)
	INDIVIDUAL A&H		(0.1)	(/	(,	()	(,	()	(,
			Total Net	Net Premium	Incurred	Increase in	Expenses	Underwriting	
			Premium Written	Earned	Claims	Reserves	Incurred	Gain/(Loss)	Membership
	Type of Coverage		(line 1)	(line 1 + line 2)	(line 17 + line 18)	(line 21 + line 22)	(line 19 + line 20)	(line 24)	
1.	Medicare Advantage *		(- ,	,	,	,	,	,	
2.	Medicare Supplement								
3.	Medicare Part D								
	Medicare Part D Supplemental Benefits								
	Medicaid								
5.	Disability Income:								
	(a) Non-Cancelable								
	(b) Guaranteed Renewable								
6.	Credit								
7	Hospitalization / Major Medical								
8.	Short-Term Medical								
).	Limited Benefit Medical								
0.	Student								
1.	Dental								
	Vision								
3.	Long-Term Care								
	Dread Disease								
	Hospital Indemnity								
	AD&D								
	Critical Illness								
	Fee for Service								
	All Other ***								
J.	TOTAL Individual A&H (The aggregate of line 20 in	hoth the							
0.	Individual and Group A&H SRQ questions must eq Statement Page 7, Column 1 Lines indicated in the	ıual Annual							
	headings)		0		0	0	0	0	

BEST SINCE 1899

SRQ Group Health

	Group Accident and Health							
a.	Please supply information on the various types of GF					(OF)	(00)	(07)
	OROUR ASU	(01)	(02)	(03)	(04)	(05)	(06)	(07)
	GROUP A&H	-				_		
		Total Net	Net Premium	Incurred	Increase in	Expenses	Underwriting	
		Premium Written	Earned	Claims	Reserves	Incurred	Gain/(Loss)	Membership*
	Type of Coverage	(line 1)	(line 1 + line 2)	(line 17 + line 18)	(line 21 + line 22)	(line 19 + line 20)	(line 24)	
1.	Medicare Supplement							
	Medicare Part D							
2a.	Medicare Part D Supplemental Benefits							
3.	Disability Income - LTD							
4.	Disability Income - STD							
5.	Credit							
6.	Hospitalization / Major Medical (excluding FEHBP)							
6a	Federal Employees Health Benefits Program (FEHBP)							
7.	Limited benefit medical							
8.	Student							
9.	Dental							
10.	Long-Term Care							
11.	Dread Disease							
12.	Hospital Indemnity							
13.	AD&D							
14.	Critical Illness							
15.	Vision							
16.	Stop Loss/Minimum Premium Policies							
	Administrative Services Only	XXX	XXX	XXX	XXX			
	Other Premium Equivalents**	XXX	XXX	XXX	XXX			
	Other Group Coverages**	XXX	XXX	XXX	XXX			
	TOTAL Group A&H (The aggregate of line 20 in both							
	the Individual and Group A&H SRQ questions must							
	equal Annual Statement Page 7, Column 1 Lines							
	indicated in the column headings)	0	C	0	0	0	0	0
	÷ ,	ale dependents of s	uhscribers for whi	ch coverage is bein	a provided to			
*	*Membership should include all subscribers and eligible dependents of subscribers for which coverage is being provided to. **Please describe "All Other " product types, using the space below.							
(1)								
b.	Please provide the amount of premium equivalents of						(1) \$	
C.	Please provide the amount of premium equivalents o	n Stop Loss / Minim		·	ed business			
	as of December 31, 2021.		(1) \$					

- Short-Tailed Lines of Business-Premium based
 - Profitability analyzed over 10 year period
 - Loss curve built for each line of business and for each of four size categories:very small, small, medium, large (industry curves)
 - Industry factors (determined for each VaR level) will be adjusted for each company's profitability over a 3 year period
 - Initial testing assumes companies get industry profitability factors
 - After line of business factors determined, correlation matrix applied to reflect diversification



- Long-Tailed Lines of Business (LTC,LTD)-Premium based
 - Long-Term Care
 - External models developed using industry level experience from business priced in early 2000's
 - Risk factors determined by reviewing profitability of run-off block 15+ years forward (statutory losses emerge around this period and going forward)
 - Factors based on amounts needed to cover present value of future losses, adjusted for assumed target surplus held
 - Factors do not vary by premium size (assumes industry wide trends)
 - Group LTC factors assumed to be lower than individual
 - New business with current pricing assumptions may be reviewed for adjustments to risk factors



- Long-Tailed Lines of Business (LTC,LTD)-Premium based
 - Long Term Disability
 - Inforce population developed based on industry data
 - Population includes age, gender, disability coverage period (benefit period to age 65 and lifetime)
 - Disability incidence simulated for 10,000 scenarios using internal simulation model (similar to mortality risk modeling)
 - Factors determined based on amounts needed to cover future disability claims relative to cumulative premiums for each VaR level
 - For most cells, claims exceed premiums around 15 years from model start date
 - Factors do not vary by size as disability incidence rates do not show much volatility
 - Baseline factors set higher for non-cancellable, lower for other IDI and group DI
 - Group Short-Term disability modeled as short-tail lines of business



Premium Factors

	Typical Premium			
Since Code are an Warre Street				
Size Category: Very Small		onfidenc		
	95	.onnaenc 99	99.5	99.6
Indiv Hosp Maj Med	0.281	0.433	0.493	0.511
Indiv Hosp Indem ADD	0.243	0.373	0.425	0.441
Indiv Medicare Supp	0.227	0.347	0.394	0.409
Indiv Medicare Adv plus Choice	0.248	0.380	0.432	0.450
Indiv Medicaid	0.273	0.420	0.478	0.496
Indiv Medicare Part D	0.218	0.332	0.376	0.391
Indiv Medicare Part D Supp	0.256	0.393	0.447	0.463
Indiv Fee for Service	0.180	0.273	0.309	0.320
Indiv Disability - Non Can	0.400	0.450	0.475	0.500
Indiv Disability - Other IDI	0.200	0.225	0.240	0.250
Indiv Long Term Care	0.250	0.400	0.500	0.525
Indiv Dread Disease	0.264	0.405	0.460	0.478
Group Hosp Maj Med	0.188	0.285	0.321	0.333
Group Hosp Indem ADD	0.229	0.351	0.399	0.414
Group FEHBP	0.050	0.065	0.072	0.075
Group Dental	0.189	0.287	0.325	0.336
Group Vision	0.169	0.256	0.290	0.301
Group Disability - LTD	0.150	0.200	0.225	0.250
Group Disability - STD	0.248	0.380	0.432	0.450
Group Long Term Care	0.200	0.300	0.400	0.450
Group Dread Disease	0.227	0.347	0.394	0.409
Group Stop Loss and Min Prem	0.189	0.287	0.325	0.337
Group Lim Benefit	0.232	0.354	0.402	0.417
Group Student	0.186	0.282	0.319	0.330
Credit	0.259	0.399	0.454	0.472
Group Prem Equiv ASO Stop Loss	0.030	0.045	0.052	0.055
Workers' Comp Carve Out Prem	0.300	0.459	0.522	0.543
All Other (Group&Indiv)	0.261	0.403	0.460	0.476

Size Category: Medium				
	Confidence Level			
	95	99	99.5	99.6
Indiv Hosp Maj Med	0.184	0.278	0.315	0.326
Indiv Hosp Indem ADD	0.171	0.259	0.294	0.304
Indiv Medicare Supp	0.121	0.182	0.205	0.212
Indiv Medicare Adv plus Choice	0.139	0.210	0.237	0.246
Indiv Medicaid	0.197	0.299	0.339	0.351
Indiv Medicare Part D	0.144	0.217	0.244	0.254
Indiv Medicare Part D Supp	0.162	0.245	0.277	0.286
Indiv Fee for Service	0.108	0.163	0.183	0.190
Indiv Disability - Non Can	0.400	0.450	0.475	0.500
Indiv Disability - Other IDI	0.200	0.225	0.240	0.250
Indiv Long Term Care	0.250	0.400	0.500	0.525
Indiv Dread Disease	0.205	0.311	0.352	0.365
Group Hosp Maj Med	0.099	0.148	0.167	0.172
Group Hosp Indem ADD	0.159	0.241	0.272	0.282
Group FEHBP	0.030	0.035	0.037	0.038
Group Dental	0.136	0.206	0.232	0.240
Group Vision	0.102	0.153	0.172	0.179
Group Disability - LTD	0.150	0.200	0.225	0.250
Group Disability - STD	0.175	0.264	0.299	0.310
Group Long Term Care	0.200	0.300	0.400	0.450
Group Dread Disease	0.155	0.235	0.265	0.275
Group Stop Loss and Min Prem	0.136	0.206	0.233	0.240
Group Lim Benefit	0.159	0.240	0.270	0.280
Group Student	0.123	0.186	0.210	0.216
Credit	0.187	0.284	0.321	0.333
Group Prem Equiv ASO Stop Loss	0.010	0.015	0.017	0.018
Workers' Comp Carve Out Prem	0.251	0.379	0.429	0.446
All Other (Group&Indiv)	0.207	0.315	0.358	0.370

Size Category: Small				
		Confidenc	e Level	
	95	99	99.5	99.6
Indiv Hosp Maj Med	0.232	0.353	0.401	0.416
Indiv Hosp Indem ADD	0.207	0.315	0.358	0.371
Indiv Medicare Supp	0.173	0.262	0.296	0.307
Indiv Medicare Adv plus Choice	0.193	0.292	0.331	0.344
Indiv Medicaid	0.234	0.358	0.407	0.422
Indiv Medicare Part D	0.180	0.273	0.308	0.320
Indiv Medicare Part D Supp	0.199	0.302	0.342	0.354
Indiv Fee for Service	0.144	0.217	0.245	0.254
Indiv Disability - Non Can	0.400	0.450	0.475	0.500
Indiv Disability - Other IDI	0.200	0.225	0.240	0.250
Indiv Long Term Care	0.250	0.400	0.500	0.525
Indiv Dread Disease	0.225	0.342	0.387	0.402
Group Hosp Maj Med	0.142	0.215	0.242	0.250
Group Hosp Indem ADD	0.193	0.295	0.334	0.346
Group FEHBP	0.040	0.050	0.055	0.057
Group Dental	0.154	0.232	0.262	0.271
Group Vision	0.135	0.204	0.230	0.238
Group Disability - LTD	0.150	0.200	0.225	0.250
Group Disability - STD	0.211	0.321	0.364	0.378
Group Long Term Care	0.200	0.300	0.400	0.450
Group Dread Disease	0.191	0.290	0.328	0.341
Group Stop Loss and Min Prem	0.154	0.232	0.263	0.272
Group Lim Benefit	0.195	0.296	0.335	0.347
Group Student	0.150	0.226	0.255	0.264
Credit	0.222	0.340	0.386	0.401
Group Prem Equiv ASO Stop Loss	0.020	0.030	0.035	0.037
Workers' Comp Carve Out Prem	0.270	0.409	0.464	0.483
All Other (Group&Indiv)	0.225	0.344	0.391	0.405

Size Category: Large				
		onfidenc	e Level	
	95	99	99.5	99.6
Indiv Hosp Maj Med	0.147	0.221	0.250	0.258
Indiv Hosp Indem ADD	0.154	0.232	0.263	0.272
Indiv Medicare Supp	0.070	0.106	0.120	0.124
Indiv Medicare Adv plus Choice	0.088	0.132	0.149	0.155
Indiv Medicaid	0.179	0.270	0.306	0.317
Indiv Medicare Part D	0.126	0.190	0.213	0.222
Indiv Medicare Part D Supp	0.144	0.217	0.245	0.253
Indiv Fee for Service	0.074	0.111	0.125	0.130
Indiv Disability - Non Can	0.400	0.450	0.475	0.500
Indiv Disability - Other IDI	0.200	0.225	0.240	0.250
Indiv Long Term Care	0.250	0.400	0.500	0.525
Indiv Dread Disease	0.186	0.282	0.318	0.330
Group Hosp Maj Med	0.064	0.097	0.109	0.113
Group Hosp Indem ADD	0.142	0.214	0.242	0.251
Group FEHBP	0.025	0.028	0.029	0.029
Group Dental	0.119	0.180	0.203	0.210
Group Vision	0.085	0.128	0.144	0.150
Group Disability - LTD	0.150	0.200	0.225	0.250
Group Disability - STD	0.139	0.210	0.237	0.246
Group Long Term Care	0.200	0.300	0.400	0.450
Group Dread Disease	0.138	0.208	0.235	0.243
Group Stop Loss and Min Prem	0.119	0.180	0.203	0.210
Group Lim Benefit	0.141	0.212	0.239	0.248
Group Student	0.106	0.159	0.180	0.186
Credit	0.169	0.256	0.290	0.301
Group Prem Equiv ASO Stop Loss	0.005	0.008	0.009	0.009
Workers' Comp Carve Out Prem	0.232	0.349	0.394	0.410
All Other (Group&Indiv)	0.189	0.287	0.325	0.337



Risk Capital Factors

Diversification Factors

- Based on correlation matrix and mix of business by line
- Factor will adjust when you change dollar amounts by line

$$Diversification\ Factor = SQRT\{\ [w_1\sigma_1\dots w_n\sigma_n]\times \begin{bmatrix} 1 & \cdots & \rho_{1n} \\ \vdots & \ddots & \vdots \\ \rho_{n1} & \cdots & 1 \end{bmatrix}\times \begin{bmatrix} w_1\sigma_1 \\ \vdots \\ w_n\sigma_n \end{bmatrix}\}$$

$$Divided\ by$$

$$SUM[w_1\sigma_1 ... w_n\sigma_n]$$

Where weights (w) are % of total business in that line and the σ are the company risk factors by line

Correlation matrices vary by size of company's total NPW or total Reserves



- Managed Care Credit
 - Based on claim payments
 - MCC = 5% of Category 1 plus 50% Category 3 capitation payments, divided by total claims (Ex 7)
 - MCC reduced by 2% of Category 3 payments to affiliates and 4% of Category 3 payments to non-affiliates
 - MCC adjusted for diversification factor
 - Applied to Ind/Grp Maj Med, Medicare Choice, Medicaid, Dental, Vision risk charges



- Reserve-Based
 - Reserve adequacy (reserves held relative to claims incurred) analyzed over 10 year period
 - Loss curve built for each reserve category in annual statements and for each of four size categories:very small, small, medium, large (industry curves)
 - Industry factors (determined for each VaR level) will be adjusted for each company's reserve adequacy over a 3 year period
 - Initial testing assumes companies get industry reserve adequacy factors
 - After line of business factors determined, correlation matrix applied to reflect diversification



Reserve Factors

Typical Reserve Risk Capital Factors

Size Category: Very Small						
	C	onfidenc	e Level			
	95	99	99.5	99.6		
Group A&H	0.281	0.430	0.489	0.507		
Credit A&H	0.257	0.392	0.446	0.462		
Collectively Renewable	0.332	0.515	0.589	0.613		
Non-Cancellable	0.247	0.372	0.421	0.435		
Guaranteed Renewable	0.308	0.472	0.537	0.559		
Non-Renewable	0.304	0.467	0.532	0.553		
Other Accident	0.365	0.570	0.653	0.679		
All Other	0.362	0.563	0.644	0.671		
Workers Comp Carve-Out Liability	0.292	0.444	0.504	0.522		
Comprehensive	0.232	0.351	0.398	0.414		
Medicare Supplement	0.201	0.301	0.339	0.353		
Dental	0.220	0.332	0.374	0.388		
Vision	0.204	0.308	0.347	0.359		
Fed Employees	0.009	0.011	0.012	0.012		
Title XVIII Medicare	0.229	0.348	0.394	0.408		
Title XIX Medicaid	0.213	0.321	0.363	0.377		
Other Health	0.342	0.530	0.605	0.630		

Size Category: Medium						
	Confidence Level					
	95	99	99.5	99.6		
Group A&H	0.175	0.261	0.294	0.304		
Credit A&H	0.205	0.308	0.349	0.362		
Collectively Renewable	0.206	0.309	0.351	0.363		
Non-Cancellable	0.154	0.227	0.255	0.263		
Guaranteed Renewable	0.198	0.295	0.333	0.345		
Non-Renewable	0.230	0.347	0.393	0.409		
Other Accident	0.252	0.381	0.432	0.447		
All Other	0.267	0.406	0.461	0.478		
Workers Comp Carve-Out Liability	0.223	0.334	0.377	0.390		
Comprehensive	0.150	0.222	0.250	0.258		
Medicare Supplement	0.160	0.237	0.266	0.276		
Dental	0.153	0.227	0.254	0.263		
Vision	0.139	0.204	0.228	0.236		
Fed Employees	0.006	0.007	0.008	0.008		
Title XVIII Medicare	0.165	0.244	0.276	0.284		
Title XIX Medicaid	0.173	0.256	0.290	0.300		
Other Health	0.249	0.377	0.426	0.442		

Size Category: Small						
	(Confidence Level				
	95	99	99.5	99.6		
Group A&H	0.228	0.342	0.388	0.401		
Credit A&H	0.240	0.363	0.413	0.427		
Collectively Renewable	0.259	0.393	0.448	0.465		
Non-Cancellable	0.190	0.283	0.319	0.329		
Guaranteed Renewable	0.252	0.381	0.431	0.448		
Non-Renewable	0.267	0.406	0.462	0.479		
Other Accident	0.308	0.472	0.538	0.558		
All Other	0.305	0.467	0.531	0.552		
Workers Comp Carve-Out Liability	0.244	0.366	0.414	0.429		
Comprehensive	0.182	0.272	0.307	0.318		
Medicare Supplement	0.175	0.262	0.295	0.306		
Dental	0.186	0.278	0.313	0.324		
Vision	0.172	0.254	0.286	0.296		
Fed Employees	0.007	0.008	0.009	0.009		
Title XVIII Medicare	0.180	0.269	0.304	0.314		
Title XIX Medicaid	0.189	0.282	0.319	0.330		
Other Health	0.305	0.467	0.531	0.552		

Size Category: Large					
	Confidence Level				
	95	99	99.5	99.6	
Group A&H	0.125	0.184	0.206	0.213	
Credit A&H	0.189	0.281	0.318	0.329	
Collectively Renewable	0.156	0.231	0.260	0.269	
Non-Cancellable	0.118	0.173	0.193	0.200	
Guarenteed Renewable	0.146	0.214	0.241	0.250	
Non-Renewable	0.196	0.292	0.330	0.341	
Other Accident	0.198	0.295	0.333	0.344	
All Other	0.213	0.319	0.361	0.374	
Workers Comp Carve-Out Liability	0.207	0.308	0.347	0.359	
Comprehensive	0.134	0.198	0.222	0.230	
Medicare Supplement	0.144	0.212	0.238	0.247	
Dental	0.137	0.202	0.227	0.234	
Vision	0.106	0.155	0.174	0.179	
Fed Employees	0.004	0.006	0.007	0.007	
Title XVIII Medicare	0.148	0.220	0.248	0.255	
Title XIX Medicaid	0.156	0.232	0.261	0.270	
Other Health	0.196	0.292	0.329	0.341	



Q&A



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