

Commissioner Jessica Altman
Chairman, NAIC LTCI Reduced Benefit Options (EX) Subgroup
Pennsylvania Insurance Department

July 21, 2021

Dear Commissioner Altman,

The American Council of Life Insurers (ACLI)ⁱ and the American Association of Health Insurance Plans (AHIP)ⁱⁱ appreciate the opportunity to comment on the draft Checklist for Premium Increase Communications (Checklist), exposed by the NAIC LTC (EX) Task Force on June 21, 2021. We believe the cooperative working relationship we share with the Task Force, and other stakeholders, in addition to our combined efforts, will result in a Checklist that helps to make RBO consumer communications consistent and clear.

ACLI/AHIP support the work of the NAIC Long-Term Care Insurance Reduced Benefit Options (EX) Subgroup in its charge to help consumers manage the impact of long-term care rate increases. By improving uniformity and clarity in consumer notices for reduced benefit options (RBO), consumers will better understand and objectively compare RBOs, and thereby choose the best options for their personal circumstances.

EXECUTIVE SUMMARY

Long-term care insurance mitigates the risk of catastrophic long-term care costs. How long-term care insurance accomplishes this important public good differs depending on the insurer, the policy terms, and the individual circumstances of the policyholder. When a long-term care rate increase becomes necessary, insurers need flexibility to determine what options make the most sense for their blocks of business and their policyholders. A Checklist that accommodates these varying factors will promote a robust and innovative RBO offering in the event of a premium increase.

As the Checklist's introduction states, the Checklist is meant as guidance and does not carry the weight of law or impose any legal liability. The RBO principles adopted by the Long-Term Care Insurance Reduced Benefit Options (EX) Subgroup on November 30, 2020 should steer the Checklist queries. The Checklist should not create new requirements, but rather, standardize, clarify, and compile existing requirements and guidelines. Further, as the Checklist is only meant as guidance for insurers in drafting, and regulators in reviewing, RBO communications, the Checklist should explicitly state, that unless otherwise mandated by a particular state, an insurer is not required to include a completed Checklist with the filings.

In addition to this comment letter, we include specific, proposed edits to the Checklist. ACLI/AHIP request that this letter be considered in combination with our suggested amendments.

SERFF FILING

Question 1 lists specific materials to include with the rate increase filing. Because some of those materials would not be applicable to all rate increase filings, readily available at the time of filing, and/or required by the state, we suggest a more general question, “Does the filing contain all materials required to be filed in connection with the rate increase request?”

Rephrasing question 3 to be more general would account for the different notification timing requirements amongst states, as well as the possibility notifications might be sent electronically.

On question 4 we recommend adding “new” before “innovation options” for additional clarification.

We recommend question 5 be amended to reference *state-required* samples of policyholder communications, so as not to imply a new requirement where one does not currently exist.

We find question 6 to be ambiguous and suggest removal, or clarification, without implying a new requirement regarding customer service operations.

Finally, we believe question 7 should reference *required* state-specific pre-rate increase filing notification procedures and that the example be removed because it could confuse insurers and regulators in instances where the scenarios given in the example do not apply.

READABILITY AND ACCESSIBILITY

We suggest the questions in this section be amended to remove specific requirements of readability and accessibility to give insurers maximum flexibility in creating communications that best serve their policyholders.

For instance, in question 8, instead of assigning the order of information in a communication, the question should indicate the end goal, “Does the communication clearly present the essential information and/or primary action?” The order of information is irrelevant so long as the communication is easy to follow, logical, and important information is clearly presented.

In question 11, removing the reference to 11-point type, but keeping the guidance that the communication be in “easily readable font” accounts for the additional impact formatting, layout, font, illustrations, bullet points, logos, etc. have on readability. Type size is just one element of many that make a communication easy to read and understand.

The Flesch reading ease score in question 15 implies a specific, new requirement. For this reason, and because the question is redundant with questions 8 through 14, which establish readability, we recommend question 15 be removed entirely.

Amending question 16 to simply ask, “Are the RBOs clear and not misleading?” without implying a specific side-by-side format gives insurers greater flexibility in presenting information, unique to their business, as plainly as possible.

We believe questions 18 and 19 imply new, specific requirements for insurers in accommodating policyholders with disabilities or who do not speak English as a first language. All insurers must already meet the requirements of the Americans with Disabilities Act and other laws governing accessibility in all their policyholder communications. To avoid implying or creating new requirements, we suggest removing questions 18 and 19.

IDENTIFICATION

To both simplify and clarify questions 25 and 26, as well as the actual RBO communication, we recommend these questions read:

“25. Does the communication clearly explain how the consumer may elect an option? Does the election documentation allow the consumer to clearly indicate his or her choice?

26. Does the communication clearly explain that the consumer is not being singled out for the increase?”

As written, question 26 suggests the communication attempt to explain class basis, a technical concept. The goal is to let policyholders know they are not being singled out for an increase and our edits would help to emphasize this.

COMMUNICATION TOUCH AND TONE

Question 27, which asks whether the communication reminds consumers to reflect on why they may have purchased the policy, is both subjective and prescriptive. Question 28, which asks whether the communication expresses empathy, is the same. Because all other items in the Checklist will help to ensure policyholders think through their decision by accounting for multiple factors—a statement directing a policyholder to reflect is unwarranted. Moreover, since the communication’s very purpose is to *help* policyholders manage a rate increase, we believe the question about empathy is both needless and overly subjective. Whether or not a communication expresses empathy is open to interpretation. The goal is to help. The more helpful a communication is—the more empathetic is it likely to be perceived.

Since it is impossible to list all RBOs in one communication, we suggest question 30 simply read, “Are examples of the reduced benefit options represented fairly?” To avoid overwhelming or confusing policyholders, some options will likely not be in the communication, but accessible by contacting the insurer directly, or elsewhere, as the insurer directs. Insurers can discuss specific options available to a policyholder, while accounting for a policyholder’s personal situation and current benefit levels. We want to ensure that regulators do not then conclude that the RBOs included in a communication are unfairly presented, while those RBOs that policyholders access outside the communication are unfairly de-emphasized.

CONSULTATION AND CONTACT INFORMATION

We recommend question 35 be reworded to refer generally to any *required* government resources. Resources differ, depending on the state. Departments of insurance have varying policies about information or guidance they are willing to provide in the event of a rate increase.

UNDERSTANDING OPTIONS – PRESENTATION

Depending on the insurer, type of policy, and many other factors, it is possible policyholders could have dozens of RBOs. Including explanations for even 5 to 7 RBOs, as the Checklist suggests in question 39, is likely to be overwhelming and confusing to policyholders trying to decide amongst them. Consequently, we believe it is preferable to remove the reference to a specific number of RBOs and use “reasonable” as the guideline.

Question 40, referring to the right to reduce coverage at any time, ought to be removed entirely. Not all options are available at any time, some have time limits, and sometimes policyholders have the lowest level of benefits possible, based on a state’s minimum benefit standards, with no option to reduce further. Also, RBOs might not be offered to policyholders currently on claim. Additionally, question 40 is redundant with questions 45 and 46, which already address deadlines.

UNDERSTANDING OPTIONS – PAST RATE ACTIONS

Question 43 pertains to including a 10-year nationwide rate increase history in the RBO communication. This information could be pertinent to the decision to purchase coverage and is provided in the outline of coverage upon purchase of a policy. In contrast, the RBO communication focuses on the current change in premium, the policyholder’s options, and the potential for a future rate increase. Past rate increases vary widely due to prior state action and are not necessarily predictive of future increases. To avoid confusing policyholders, or inadvertently influencing them to decide against their best interests, we strongly recommend question 43 be removed entirely.

UNDERSTANDING OPTIONS – WINDOW OF TIME TO ACT

We tweaked the wording in question 45 to make it clearer.

We also amended question 47 to improve accuracy and account for differences in policies and state laws. We recommend the question read, “Does the communication indicate what happens if no payment is received? For example, if the policy lapses within 120 days, does it advise Contingent Benefit Upon Lapse will apply, if applicable?” Contingent benefit upon lapse (CBUL) is more accurate in this instance than “contingent non-forfeiture.” Additionally, it’s important to note that CBUL is not applicable for all forms in all states. In some states, CBUL is only effective for policies issued after a certain date or is not an option at all.

UNDERSTANDING OPTIONS – CURRENT BENEFITS

We believe question 48 should be edited to allow insurers to either include, or direct the policyholder to, helpful information. An RBO communication that includes *all* benefit-related information could easily become unwieldy, lengthy, and confusing. Directing a policyholder to a website or some other resource would likely be the more manageable and effective option.

We think question 49, which references inflation option illustrations, should be removed from the Checklist for a few reasons. First, not all policies have a lifetime maximum benefit in dollars. Second, any future projection included in an RBO communication could be construed as a promise of future benefits. Third, including inflation option projections could confuse and overwhelm a policyholder already comparing multiple RBOs. And finally, a general illustration does not account for critical elements such as whether some benefits had previously been received, the policyholder's location at the time of receiving benefits, cost of care when benefits are received, additional policy terms, etc.

UNDERSTANDING OPTIONS – PERSONAL DECISION

We would like clarification on question 50. Will an insurer be able to refer to options that *may* be applicable to an individual policyholder?

Question 51, pertaining to descriptions of the policyholder's RBOs, is duplicative of questions 30 and 39 and should be removed.

We suggest a change of wording in question 52.

Finally, question 53, which refers to providing an unbiased resource to research cost of care, should be removed. An insurer cannot ensure an unbiased resource exists, nor can cost of care be predicted since it is heavily dependent on location and timing of benefits, both uncertain.

UNDERSTANDING OPTIONS – VALUE OF OPTIONS

We recommend question 54 be amended to remove the reference to value and to read, "Are the resulting benefits from each presented option clearly explained?" The question could be interpreted to mean general value or monetary value. The concept of value is too subjective to be a guideline. Perception of value differs depending on the personal circumstances of each individual policyholder, including their current age, health conditions, financial position, availability of caregivers, spouse/partner considerations, etc. Further, assessing value on behalf of policyholders could constitute steering. The communication should be objective, thereby aiding policyholders to make decisions in their best interest.

UNDERSTANDING OPTIONS – IMPACT OF DECISION

We recommend clarifying question 59 to read, "For phased-in increases: Is there a table with all phase-in dates and premium amounts if no reduced benefit option is elected?" It would be

impossible to create a table with this information without knowing what the policyholder elected.

We also recommend question 60 be amended to accommodate a wider range of deadlines to send communications prior to a rate increase because states' time frames can differ quite a bit.

Lastly, the language in question 61, "Does the communication disclose that not all reduction options are equal in value?" is problematic. The same reasons we give for changing question 54 apply here. The concept of value is too subjective to be a guideline. Further, the entire communication, in addition to any supplemental information the insurer may direct the policyholder to consider, will demonstrate the differences between, and consequences of choosing, each RBO. For these reasons we advise deleting question 61.

CONCLUSION

Thank you for the opportunity to provide these comments. ACLI/AHIP welcome the opportunity to discuss our comments with you in the near future.

Sincerely,



Jan M. Graeber

Senior Actuary, ACLI



Ray Nelson

AHIP Consulting Actuary

ⁱ The American Council of Life Insurers advocates on behalf of 280 member companies dedicated to providing products and services that promote consumers' financial and retirement security. Ninety million American families depend on our members for life insurance, annuities, retirement plans, long-term care (LTC) insurance, disability income insurance, reinsurance, dental, vision, and other supplemental benefits. ACLI represents member companies in state, federal and international forums for public policy that supports the industry marketplace and the families that rely on life insurers' products for peace of mind. ACLI members represent 95 percent of industry assets in the United States.

ⁱⁱ AHIP is the national association whose members provide coverage for health care and related services to hundreds of millions of Americans every day. Through these offerings, we improve and protect the health and financial security of consumers, families, businesses, communities and the nation. We are committed to market-based solutions and public-private partnerships that improve affordability, value, access, and well-being for consumers.

Checklist for Premium Increase Communications

AUTHORITY

The Long-Term Care Insurance Reduced Benefit Options (RBO) (EX) Subgroup is composed of regulators from 17 state insurance departments. It has been tasked with assisting the Long-Term Care Insurance (EX) Task Force in completing the following charge:

Identify options to provide consumers with choices regarding modifications to long-term care insurance (LTCI) contract benefits where policies are no longer affordable due to rate increases.

The Long-Term Care Insurance (EX) Task Force adopted the Long-Term Care Insurance RBO Communication Principles. The Long-Term Care Insurance RBO EX Subgroup has been charged with developing a complementary checklist that can be leveraged by state regulators and Long-Term Care Insurance insurers.

INTRODUCTION

This checklist is intended to establish a consistent approach to drafting and reviewing Long-Term Care Insurance RBO policyholder communications. The checklist can be used as guidance and does not carry the weight of law or impose any legal liability.

State regulators may consider the checklist excessive, deficient, or not focused on issues specific to consumer experience in a particular state. State regulators are encouraged to modify the checklist to suit the needs of the Department.

Leveraging the checklist could enable insurers and state regulators to mitigate consumer confusion, complaints, improve the quality of the communication, and ensure the information presented:

- Reads in a clear, logical, not overly complex manner.
- Identifies if the options are presented fairly and without subtle coercion.
- Includes appropriate referrals to external resources, definitions, disclosures, and visualization tools.

RECOMMENDS that state regulators adapt the checklist to reflect their state regulations, laws, or statutes and adopt when reviewing filed Long-Term Care Insurance RBO Communications.

CALLS ON all insurance companies to consider the checklist when developing reduced benefit option policyholder communications in the event of a rate increase. [The insurance company is not expected to include the Checklist with the filings.](#)

DRAFT

Checklist for Premium Increase Communications

Insurer name:	
Date of filing:	
Product form:	
Tracking number(s) SERFF <i>rate</i> filing:	
Tracking number(s) SERFF <i>form</i> filing:	

Yes	No	N/A	SERFF FILING	Page Reference and Filing Notes
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	1. Does the filing contain all materials required to be filed in connection with the rate increase request? to include: policyholder communication, supplemental FAQ, graphs, illustrations, website screenshots (screenshots may be requested if communication refers policyholder to website for more information)?	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	2. Has actuarial review of the rate increase been completed?	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	3. Will the rate action increase notification be mailed sent pursuant to the notification timing requirements of the state? at least 45 days prior to the policyholder anniversary date (or billing date if state law allows)?	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	4. Have all new innovation options presented in the communication been mentioned prominently as part of the filing? Have they been vetted by policy and actuarial staff?	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	5. Are there sample policyholder communications included with the filing, if required by the state with a statement of variability?	

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	6. Are there insurer rules for customer service interactions regarding RBOs?	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	7. Were <u>any required</u> state-specific pre-rate increase filing notification procedures followed? <i>For example: VT has insurers notify consumers of rate increases when filed in addition to notification 45-60 days before effective date. PA posts filed rate increase details on their website.</i>	
Yes	No	N/A	READABILITY AND ACCESSIBILITY	Page Reference and Filing Notes
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	8. Is the communication easy to follow? Does it flow logically? Does it <u>display clearly present</u> the essential information and/or the primary action? <i>first (followed by the nonessential information)?</i>	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	9. Are all insurance technical terms clearly explained in the communication?	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	10. Are all technical terms used consistently throughout the communication?	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	11. Is the communication in an easily readable font <i>in at least [11 point] type?</i>	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	12. Does the communication use headings to help the reader find information easily?	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	13. Is white space (margins, lines spacing, and spacing between paragraphs) sufficient and consistent?	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	14. Are tables, charts, and other graphics, easy to read and understand?	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	15. <i>Are the grade level and reading ease scores appropriate ([8th grade] or lower; Flesch reading ease score [60] or higher)?</i>	

Commented [A1]: What does this mean? Clarification needed.

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	16. Are there side-by-side illustrations of options compared with current benefits? Are the <u>RBOs</u> clear and not misleading?	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	17. If FAQs are included, are they succinct and easy to understand?	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	18. Does the insurer provide appropriate accommodations for policyholders with disabilities or for policyholders for whom English is not a first language? For example, accessibility of its online and written material to all interested parties, including those with disabilities such as blindness or low vision, deafness and hearing loss, learning disabilities, cognitive limitations, limited movement, speech disabilities, photosensitivity and combinations of these.	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	19. Does the insurer provide access to translation services as needed for policyholders for whom English is not a first language?	
Yes	No	N/A	IDENTIFICATION	Page Reference and Filing Notes
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	20.18. Does the communication answer what is happening?	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	21.19. Does the communication answer why the consumer is receiving a rate increase?	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	22.20. Does the communication reflect negatively on the Department of Insurance?	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	23.21. Does the communication indicate when the rate increase will be effective?	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	24.22. Does the communication clearly indicate they have options?	

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<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	25-23. Does the communication clearly indicate-explain how to-the <u>consumer may</u> elect an option? Does the election documentation clearly indicate the <u>allow the</u> consumer <u>to clearly indicate his or her's</u> choice?	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	26. Does the communication clearly <u>explain that the consumer is not describe "class-basis"?</u> 24. Are consumers- Does the communication clearly explain that the <u>consumer is not</u> being singled out for the increase? Suggested text: "Overall experience of all contracts in your class...."	
Yes	No	N/A	COMMUNICATION TOUCH AND TONE	Page Reference and Filing Notes
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	27-25. Does the communication remind consumers to reflect on why they may have purchased the policy?	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	28-26. Does the communication express empathy?	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	29-27. Is there a statement telling consumers how to contact the insurer for more information or help understanding their options?	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	30-28. Are <u>examples of the o</u> ptions represented fairly? Is one option emphasized, mentioned multiple times or bolded where the others are not?	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	31-29. Are the words used that could influence a policyholder's decision, such as <i>must</i> or <i>avoid</i> ? For instance, consider "now," instead of "must." Consider "mitigation options," "offset premium impact," or "manage an increase" instead of "avoid an increase."	
Yes	No	N/A	CONSULTATION AND CONTACT INFORMATION	Page Reference and Filing Notes

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<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	32.30. Is the insurer's consumer service number easy to find? Is it clear what hours and days consumer service is open?	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	33.31. Are website links and phone numbers accurate and functional?	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	34.32. Does the Insurer encourage consumers to consult with multiple sources to include any of the following: Financial planner, producer, or trusted family member?	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	35.33. Does the communication include any required reference to SHIPP or other long-term care-related government resources? Insurer encourage consumers to consult the Department of Insurance? Does it specify the Departments can only give general information?	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	36.34. Does the communication encourage consumers to consult with a tax advisor if the reduction options include a cash buy out or could cause loss Partnership status?	
Yes	No	N/A	UNDERSTANDING OPTIONS - PRESENTATION	Page Reference and Filing Notes
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	37.35. Does the communication have a clearly worded, descriptive title or subject line? For example: Your Long-Term Care Premiums Are Increasing.	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	38.36. Are the options included with the rate increase notification communication? Is it clear that the policyholder can ask for additional options?	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	39.37. Are the number of options presented reasonable (5-7 options)?	

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	40.38. <u>Is the Right to Reduce Coverage at Any Time clear? Does the communication explain that outside of a rate increase, the consumer may have the right to reduce benefits?</u>	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	41.39. Is there enough information to make a decision? If other sources are referenced like videos, websites, etc. are they supplemental education materials or are they required sources to decide on an option?	
Yes	No	N/A	UNDERSTANDING OPTIONS – PAST RATE ACTIONS	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	42.40. Does the communication include a statement that premiums may increase in the future?	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	43.41. <u>Does the communication include a 10-year nationwide rate increase history for this and similar forms?</u>	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	44.42. Does the communication disclose the policy is guaranteed renewable?	
Yes	No	N/A	UNDERSTANDING OPTIONS – WINDOW OF TIME TO ACT	Page Reference and Filing Notes
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	45.43. Does the communication indicate what the reader must do <u>to elect an option</u> and <u>provide</u> the deadline to do it?	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	46.44. For options that are only available during the decision window, is it clear to consumers?	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	47.45. Does the communication answer what happens if no payment is <u>received</u> ? For example, if <u>no payment received</u> <u>the policy lapses</u>	

			within 120 days, does it advise Contingent Non-Forfeiture <u>Benefit Upon Lapse</u> will apply, <u>if applicable</u> ?	
Yes	No	N/A	UNDERSTANDING OPTIONS – CURRENT BENEFITS	Page Reference and Filing Notes
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	48.46. Does the communication include <u>or direct the policyholder to all the following helpful</u> information, <u>such as?</u> Current benefits (daily benefit, elimination period, current lifetime maximum benefit in dollars, inflation option, partnership status) <u>in list form??</u>	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	49.47. <u>If current benefits have an inflation option include lifetime maximum benefit in dollars illustrated both five and fifteen years into the future?</u>	
Yes	No	N/A	UNDERSTANDING OPTIONS – PERSONAL DECISION	Page Reference and Filing Notes
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	50.48. Are the options presented available to the policyholder?	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	51.49. Does the communication contain descriptions of the consumer's options (including daily benefit, elimination period, current lifetime maximum benefit in dollars, inflation option, partnership status)?	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	52.50. Does the communication prompt the policyholder to consider their personal situation, such as: current age, health conditions, financial position, availability of caregivers, spouse or partner impacts, and potential need <u>and cost of</u> for institutionalized care?	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	53.51. Does the communication provide an unbiased resource(s) for policyholders to research the cost of care?	

Commented [A2]: Clarification needed

Yes	No	N/A	UNDERSTANDING OPTIONS – VALUE OF OPTIONS	Page Reference and Filing Notes
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	54.52. Do options clearly indicate value for consumers? Are the resulting benefits from each presented option clearly explained? Does Contingent Nonforfeiture (CNF) Benefit Upon Lapse and other limited options clearly describe the reduction in value resulting benefits (benefit period)?	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	55.53. Is there a statement telling consumers how to contact the insurer for more information, the full list of options, or help understand their options?	
Yes	No	N/A	UNDERSTANDING OPTIONS – IMPACT OF DECISION	Page Reference and Filing Notes
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	56.54. Is there a statement telling policyholders they can maintain current benefits by paying the increased premium?	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	57.55. Do the options reflect the impact of the inflation option in terms of growth or reduction if the option is to remove or reduce inflation?	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	58.56. If dropping inflation protection results in the loss of accumulated benefit amount, is that disclosed?	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	59.57. For phased-in increases: Is there a table with all phase-in dates and premium amounts <u>if no reduced benefit option is elected</u> ?	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	60.58. For phased-in increases, are there communications sent <u>at least</u> 45- 60 days before each phase of the increase?	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	61.59. Does the communication disclose that not all reduction options are equal in value?	

