



Date: 10/26/21

Virtual Meeting

(in lieu of meeting at the 2021 Fall National Meeting)

HEALTH RISK-BASED CAPITAL (E) WORKING GROUP

Thursday, November 4, 2021

12:00 - 1:00 p.m. ET / 11:00 a.m. - 12:00 p.m. CT / 10:00 - 11:00 a.m. MT / 9:00 - 10:00 a.m. PT

ROLL CALL

Steve Drutz, Chair Washington Michael Muldoon Nebraska Jennifer Li Alabama Tom Dudek New York Wanchin Chou Connecticut Kimberly Rankin Pennsylvania Carolyn Morgan/Kyle Collins Florida Mike Boerner/Aaron Hodges Texas Tish Becker

NAIC Support Staff: Crystal Brown

AGENDA

1. Consider Exposure of Proposal 2021-18-H (Benchmarking Guidelines Attachment A Investment Income Adjustment in Underwriting Risk Factors) for Public Comment—Steve Drutz (WA)

2. Consider Adoption of its Working Agenda—Steve Drutz (WA)

Attachment B

3. Hear an Update on the H2 – Underwriting Risk Review from the American Academy of Actuaries (Academy)—Derek Skoog (Academy)

Kansas

- 4. Receive an Update on the Status of the Excessive Growth Charge and Health Test Ad Hoc Groups—Steve Drutz (WA)
- 5. Discuss Incorporating a Pandemic Risk Component into the Health Risk-Based Capital (RBC) Formula—Steve Drutz (WA)
- 6. Discuss Any Other Matters Brought Before the Task Force -Steve Drutz (WA)
- 7. Adjournment

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Capital Adequacy (E) Task Force

RBC Proposal Form

[] Capital Adequacy (E)[] Catastrophe Risk (E)[] C3 Phase II/ AG43 (II)	Subgroup [] Investment RBC (E) Workin	ng Group [] SMI RBC (E) Subgroup
CONTACT PERSON: TELEPHONE: EMAIL ADDRESS: ON BEHALF OF: NAME: TITLE: AFFILIATION: ADDRESS:	816-783-8146 cbrown@naic.org Health RBC (E) Working Group Steve Drutz Chief Financial Analyst/Chair WA Office of Insurance Commissioner 5000 Capitol Blvd SE Tumwater, WA 98501	FOR NAIC USE ONLY Agenda Item #_2021-18-H Year
[] Health RBC Blanks [] Life and Fraternal RB [] Property/Casualty RB Incorporate benchmarking	[x]Health RBC Instructions C Blanks [] Life and Fraternal RBC Instructions C Blanks [] Property/Casualty RBC Instructions DESCRIPTION OF CHANGE Guidelines for the Working Group to follow in upon or Comprehensive Medical, Medicare Supplement REASON OR JUSTIFICATION FOR COMME	[] Other E(S) dating the investment income adjustment in the and Dental & Vision.
	is to clearly identify the frequency and parameters he Comprehensive Medical, Medicare Supplement Additional Staff Comments	and Dental & Vision lines.
** This section must be	completed on all forms.	Revised 11-2013

UNDERWRITING RISK - L(1) THROUGH L(21) XR013

Detail Eliminated to Conserve Space

Line (12) Underwriting Risk Claims Ratio. For Columns (1) through (5), Line (11) / Line (6). If either Line (6) or Line (11) is zero or negative, Line (12) is zero.

Line (13) Underwriting Risk Factor. A weighted average factor based on the amount reported in Line (6), Underwriting Risk Revenue. The factors for Column (1) through (3) have incorporated an investment income yield of 0.5%.

	\$0 - \$3	\$3 - \$25	Over \$25
	Million	Million	Million
Comprehensive Medical & Hospital	0.1493	0.1493	0.0893
Medicare Supplement	0.1043	0.0663	0.0663
Dental & Vision	0.1195	0.0755	0.0755
Stand-Alone Medicare Part D Coverage	0.251	0.251	0.151
Other Health	0.130	0.130	0.130
Other Non-Health	0.130	0.130	0.130

The investment income yield was incorporated into the Comprehensive Medical & Hospital, Medicare Supplement and Dental & Vision lines of business. The purpose was to incorporate an offset to reduce the underwriting risk factor for investment income earned by the insurer. The Working Group incorporated a 0.5% income yield that was based on the yield of a 6-month US Treasury Bond. The Working Group will evaluate the yield of the 6-month Treasury bond as of January 13th each year and determine if further modifications to the 0.5% adjustment are needed. Any adjustments will be rounded up to the nearest 0.5%.

Line (14) Base Underwriting Risk RBC. Line (6) x Line (12) x Line (13).

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2021		2021	Expected Completion				Date Added to Agenda
#	Owner	Priority	Date	Working Agenda Item	Source	Comments	
				Ongoing Items – Health RBC			
19	Health RBC WG	Yearly	Yearly	Evaluate the yield of the 6-month U.S. Treasury Bond as of Jan. 1 each year to determine if further modification to the 0.5% adjustment to the Comprehensive Medical, Medicare Supplement and Dental and Vision underwriting risk factors is required. Any adjustments will be rounded up to the nearest 0.5%.	HRBCWG		11/4/2021
20	Health RBC WG	3	Year-end 2022 RBC or later			Adopted 2014-01H Adopted 2014-02H Adopted 2014-05H Adopted 2014-06H Adopted 2014-24H Adopted 2014-25H Adopted 2016-01-H Adopted 2017-09-CA Adopted 2017-10-H The Working Group will continually evaluate any changes to the health formula as a result of ongoing federal discussions and legislation.	
21	Health RBC WG	3	Year-end 2022 RBC or later	Discuss and monitor the development of federal level programs and actions and the potential impact of these changes to the HRBC formula: - Development of the state reinsurance programs; - Association Health Plans; - Cross-border sales	HRBCWG	Discuss and monitor the development of federal level programs and the potential impact on the HRBC formula.	1/11/2018
				Carry-Over Items Currently being Addressed – Health RBC			
22	Health RBC WG	3	Year-End 2023 RBC or Later	Consider changes for stop-loss insurance or reinsurance.		(Based on Academy report expected to be received at YE-2016) 2016-17-CA	
23	Health RBC WG	2	Year-end 2023 RBC or later	Review the individual factors for each health care receivables line within the Credit Risk H3 component of the RBC formula.		Adopted 2016-06-H Rejected 2019-04-H Annual Statement Guidance (Year-End 2020) and Annual Statement Blanks Proposal (Year-End 2021) referred to the Blanks (F) Working Group	
24	Health RBC WG	1	Year-end 2022 or later	Establish an Ad Hoc Group to review the Health Test and annual statement changes for reporting health business in the Life and P/C Blanks		Evaluate the applicability of the current Health Test in the Annual Statement instructions in today's health insurance market. Discuss ways to gather additional information for health business reported in other blanks.	8/4/2018
25	Health RBC WG	1	Year-end 2022 RBC or later	Review the Managed Care Credit calculation in the Health RBC formula - specifically Category 2a and 2b. Review Managed Care Credit across formulas.		Review the Managed Care Category and the credit calculated, more specifically the credit calculated when moving from Category 0 & 1 to 2a and 2b.	12/3/2018

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CAPITAL ADEQUACY (E) TASK FORCE WORKING AGENDA ITEMS FOR CALENDAR YEAR 2021

2021		2021	Expected Completion				Date Added to Agenda
#	Owner	Priority	Date	Working Agenda Item	Source	Comments	
26	Health RBC WG	1		Review referral letter from the Operational Risk (E) Subgroup on the excessive growth charge and the development of an Ad Hoc group to charge.		Review if changes are required to the Health RBC Formula	4/7/2019
27	Health RBC WG	1	Year-End 2022 or later	Consider impact of COVID-19 and pandemic risk in the Health RBC formula.	HRBCWG		7/30/2020
28	Health RBC WG	1	2021 or later	Work with the Academy to evaluate incorporating and including investment income in the Underwriting Risk component of the Health RBC formula. * Develop a process for reviewing investment income in the underwriting risk factors. * Determine the frequency for which the adjustment should be updated. *Determine if other lines of business should include investment income.		Referral Letter was sent to the Academy on Sept 21 Adopted 5/25/21 by the WG	8/18/2020
30	Health RBC WG	1	2022 or later	Work with the Academy to perform a comprehensive review of the H2 - Underwriting Risk component of the Health RBC formula including the Managed Care Credit review (Item 18 above)	HRBCWG		4/23/2021
29	Health RBC WG	1	2021	Discuss and determine the bond factors for the 20 designations.	July/2020	Working Group will use two- and five-year time horizon factors in 2020 impact analysis. Proposal 2021-09-H - Adopted 5/25/21 by the WG	9/11/2020

Carry-Over Items Currently being Addressed – Task Force

New Items - Health RBC

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