

Draft date: 7/26/2024

Virtual Meeting

THIRD-PARTY DATA AND MODELS (H) TASK FORCE

Tuesday, July 30, 2024

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

ROLL CALL

Michael Conway, Chair	Colorado	Kevin P. Beagan	Massachusetts
Michael Yaworsky, Vice Chair	Florida	Grace Arnold	Minnesota
Mark Fowler	Alabama	Chlora Lindley-Myers	Missouri
Lori K. Wing-Heier	Alaska	Scott Kipper	Nevada
Barbara D. Richardson	Arizona	D.J. Bettencourt	New Hampshire
Ricardo Lara	California	Adrienne A. Harris	New York
Andrew N. Mais	Connecticut	Jon Godfread	North Dakota
Gordon I. Ito	Hawaii	Judith L. French	Ohio
Dean L. Cameron	Idaho	Michael Humphreys	Pennsylvania
Ann Gillespie	Illinois	Elizabeth Kelleher Dwyer	Rhode Island
Doug Ommen	Iowa	Michael Wise	South Carolina
Vicki Schmidt	Kansas	Cassie Brown	Texas
Timothy J. Temple	Louisiana	Kevin Gaffney	Vermont
Robert L. Carey	Maine	Nathan Houdek	Wisconsin
Joy Y. Hatchette	Maryland		_

NAIC Support Staff: Kris DeFrain/Scott Sobel

AGENDA

1. Hear Presentations about U.S. Risk-Based Regulatory Frameworks

Attachment

- Financial Analysis and Examination including ORSA Jack Broccoli (CT)
- Market Analysis and Examination Jo LeDuc (MO)
- Colorado's "Trust but Verify" Approach Jason Lapham (CO)
- 2. Discuss Any Other Matters Brought Before the Task Force
 —Commissioner Michael Conway, Chair
- 3. Adjournment

Overview of Risk-Focused Surveillance Approach to Solvency Monitoring

Presentation to NAIC Third Party Data and Models (H) Task Force July 30, 2024

Jack Broccoli - Assistant Deputy Commissioner of Financial Analysis and Licensing Connecticut Insurance Department



Risk-Focused Surveillance

- Primary goal is to identify and assess risks in insurers' operations and utilize those assessments to formulate ongoing surveillance plans
 - Assists regulators in concentrating efforts on high-risk insurers
 - Company prioritization process
 - Also assists regulators in focusing efforts on the riskiest areas of an insurer's operations
 - Individual risk assessments

Risk-Focused vs. Traditional

Risk-Focused Surveillance	Traditional Surveillance	
Flexible	Structured	
Self-directed	Checklist directed	
Customized	Standardized	
Unique/Distinct	Uniform	
Risk-focused	Variance and compliance focused	
Prospective	Retrospective	

Company Prioritization

- Companies assigned a priority rating to ensure effective oversight
- Rating criteria include both quantitative and qualitative elements
 - Results of NAIC Prioritization Tools assist with quantitative elements
- Each state assigns priority rating for their own domestic insurers
 - Shared with other states through Insurer Profile Summary reports
- Prioritization reviewed and updated regularly (at least annually)
 - Change in priority rating requires detailed rationale and supervisory sign-off

Company Prioritization

- **Priority 1 (Troubled)** The highest priority insurers from a solvency monitoring perspective, based on significant financial solvency risks.
- **Priority 2 (Priority)** High priority insurers that are not yet considered troubled but may become so if recent trends or unfavorable metrics are not addressed.
- **Priority 3 (Non-Priority)** Moderate priority insurers that indicate some need for additional monitoring.
- **Priority 4 (Non-Priority)** Lower priority insurers that are fundamentally sound, not overly complex and/or nationally significant, and don't currently indicate a need for additional monitoring.

Impact of Company Prioritization

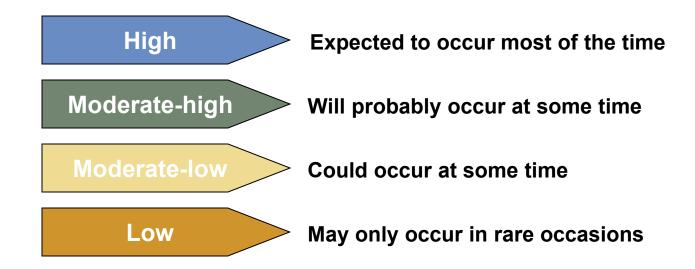
- Higher priority companies subject to increased depth of supervision
 - More frequent on-site, full-scope examinations
 - Potentially offset or supplemented by limited-scope examinations
 - Increased timeliness and frequency of off-site financial analysis
 - Earlier analysis due dates and full quarterly analysis for priority companies
 - Greater depth of review
 - Often more individual risks identified, and greater detail in risk investigation and testing

Individual Risk Assessment

- Regulators encouraged to identify and assess an insurer's exposure to various risks that could impact their solvency position
 - Focus on both current and prospective issues
- Branded risk classifications generally used as framework for identification
 - Credit Risk, Legal Risk, Pricing/Underwriting Risk, Strategic Risk, etc.
- Risk assessment process varies by function (analysis vs. exam)
 - Both functions assess risk levels to determine depth of review/testing to be performed

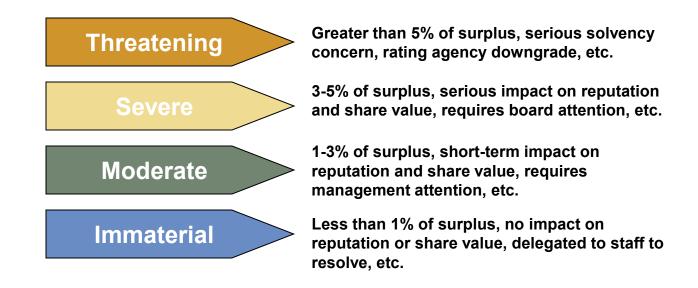
Individual Risk Assessment - Likelihood of Occurrence

The probability or likelihood that the risk will occur or would prevent a process or activity from attaining its objectives



Individual Risk Assessment - Magnitude of Impact

Potential impact/potential materiality of a risk



Individual Risk Assessment - Other Factors

- Risk Velocity/Speed of Onset The time it takes for a risk event to occur and for the company to feel its effects
- Risk Trend The direction in which a risk is moving over time
- Risk Connectivity The concept that various risks are interconnected and can affect one another
- Risk Mitigation/Controls Process used to reduce likelihood of and exposure to a risk

Own Risk & Solvency Assessment ("ORSA")

Section I - Description of ERM Framework

- Risk Culture and Governance
- Risk Identification and Prioritization
- Risk Appetite, Tolerances and Limits
- Risk Management and Controls
- Risk Reporting and Communication

Section II - Insurer Assessment of Risk Exposures

 High level summary of quantitative and qualitative assessments of risk exposure in both normal and stressed environments

Section III - Assessment of Risk Capital and Prospective Solvency

- Discussion of Capital Metric(s) Used
- Group Risk Capital (GRC) By Risk and In Aggregate
- Impact of Diversification Benefit
- Available Capital
- Excess Capital
- Impact of Stresses on GRC
- Governance and Validation
- Prospective Solvency Assessment

Risk Assessment Tracking and Communication

Supervisory Plan

Develop Ongoing Supervision That Includes:

- •Frequency of Exams
- Scope of Exams
- •Meetings with Company Management
- •Follow-Up on Recommendations
- •Financial Analysis Monitoring

Priority System

Company Priority Score Determined By:

- •Priority System Based on Dept. analysis and NAIC financial Analysis tools:
 - Scoring System
 - ATS Results
 - •IRIS Ratios
- Exam Results

INSURER PROFILE SUMMARY

Internal/External Changes

Consider Changes to:

- •NRSRO Ratings
- Ownership/Management/ Corporate Structure
- •Business Strategy/Plan
- CPA Report or Auditor
- ·Legal or Regulatory Status

Examination

Risk-Focused **Examination Seven Phase Process:**

- •Identify Functional Activities
- •Identify/Assess Inherent Risk
- •Identify & Evaluate Controls
- Determine Residual Risk
- ·Establish Procedures and Conduct Exam
- •Update Supervisory Plan
- •Exam Report//Mgmt Letter

Financial Analysis

Financial Analysis includes:

- •Risk Assessment Results
- •Financial Analysis Handbook **Process**
- •Ratio Analysis (IRIS, FAST, Internal Ratios)
- Actuarial Analysis
- •Update with internal/external changes

Conclusion

- Risk-Focused Surveillance allows for efficient and effective allocation of regulatory resources in company monitoring
 - Assists regulators in concentrating efforts on high-risk insurers
 - Company prioritization process
 - Also assists regulators in focusing efforts on the riskiest areas of an insurer's operations
 - Individual risk assessments
- Approach may be applied to other areas of insurance regulation
 - Modifications may be necessary to account for different risk exposures
 - For example, focus on factors relevant to privacy protection and preventing unfair discrimination

Questions



Market Analysis Framework

Third-Party Data and Models (H) Task Force July 30, 2024



Agenda

- Market Analysis Goals
- Market Analysis Process
- Baseline Analysis
- Level 1 Analysis
- Level 2 Analysis
- Continuum of Market Actions
- Questions



Market Analysis Goals

- Increase Effectiveness
 - Ability to Identify Market Conduct Issues
 - Identify Issues Across the Market
- Increase Efficiency
 - Focusing Resources
 - Less Costly
 - Less Intrusive
- Improve Uniformity
 - Collaboratively Developed Tools
 - Increased Transparency
- Improve Collaboration
 - NAIC Centralized Tools Accessible to Regulators in Other Jurisdictions
 - Improved Analysis Tools & Techniques Through Common Framework



Market Analysis Process

- Standardized Framework
- Market Regulation Handbook
- Process
 - Baseline
 - Level 1
 - Level 2
 - Continuum



Baseline Analysis

- Standardized Starting Point for Routine Analysis
- Line of Business Specific
- Broad Market Comparison
- Data Centric
 - Financial Annual Statement
 - Complaint Database System (CDS)
 - Regulatory Information Retrieval System (RIRS)
 - Market Action Tracking System (MATS)
 - Market Conduct Annual Statement (MCAS)



Level 1 Analysis

- Second Step in Routine Process
- Individual Company Reviews
- Guided Analysis of:
 - Company Operations
 - Financial Ratios
 - Regulatory Actions
 - Market Conduct Continuum Activity
 - Premiums
 - Market Share
 - Loss and Expense Ratios
 - Resisted or Unpaid Claims
 - Complaints
 - Market Conduct Annual Statement



Level 2 Analysis

- Final Step of Routine Analysis
- Extremely Detailed Review
 - Consumer Complaints
 - Continuum Activity
 - Examinations
 - Interdepartmental Communications
 - Market Analysis
 - Regulatory Actions
 - Insurance Department Filings
 - Dispute Resolution Activity
 - Financial Analysis
 - Financial Rating Agencies

- Geographic Analysis
- Human Resource Department
- Internet/World Wide Web
- Legal Information
- NAIC Bulletin Boards
- Other Governmental/Quasi-Governmental Agencies
- Product Licensing
- State Mandated Items
- Trade Publications & Other Media Sources
- Voluntary Accreditation/Certification Programs



Continuum of Market Actions

- Options for Responding to Identified Issue/Concern
- Guiding Principles
 - Appropriate
 - Cost-effective
 - Timely
 - Least Intrusive
- Factors Considered in Selecting a Response
 - Consumers
 - Regulator
 - Company



QUESTIONS

Jo A. LeDuc, CIE, MCM, CPCU, FLMI, AIDA

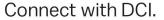
Director, Insurance Market Regulation Division

Missouri Department of Commerce & Insurance

Jo.LeDuc@insurance.mo.gov















Colorado Division of Insurance

Senate Bill 21-169, Governance and Risk Management, and Regulatory Oversight

NAIC Third-Party Data and Models (H) Task Force July 30, 2024

Agenda

- Overview of SB21-169
- Life Insurance Stakeholder Process and Survey: Lessons Learned
- Regulation 10-1-1:Life Insurer Governance and Risk Management Framework Requirements and Reporting
- Draft Life Insurance Underwriting Quantitative Testing Regulation

Goal of SB21-169

- Protect Colorado consumers from insurance practices that result in unfair discrimination on the basis of race, color, national or ethnic origin, religion, sex, sexual orientation, disability, gender identity, or gender expression
- Focuses on *outcomes*
- Not on individual factors or model variables

Applicability of SB21-169

- Insurers that use external consumer data and information sources ("ECDIS") as well as algorithms and predictive models that use ECDIS including life, auto, homeowners, and health insurance
- By insurance practice, i.e., Marketing, Underwriting, Pricing, Utilization Management, Reimbursement Methodologies, and Claims Management

SB21-169 Insurer Requirements

- Establish a risk management framework
- Quantitatively test whether any ECDIS, and/or algorithms and predictive models utilizing ECDIS, result in unfairly discriminatory outcomes

SB21-169 Stakeholder Engagement Process

- Prior to the adoption of rules, the statute requires the Division engage in a stakeholder process with carriers, producers, consumer representatives, and other interested parties by **type of insurance and insurance practice**
- Conducted a survey of life insurers regarding current risk management and governance practices related to the use ECDIS, algorithms, and predictive models
- A wide range of insurer preparedness with insurers in various stages of developing their governance and risk management processes

Life Insurance Survey: Lessons Learned

- Multi-disciplinary, cross-functional team
- Clearly defined roles and responsibilities for evaluating data and models and developing risk mitigation measures
- Comprehensive and detailed documentation of policies and procedures as well as thorough record keeping
- Bifurcated approach to address the required risk management framework and testing components contemplated by SB21-169 through two regulations

Rulemaking/Implementation

- Adopted the first regulation and drafted a second
- Governance and Risk Management Framework, Reg 10-1-1
 - Effective November 14, 2023
- Quantitative testing for unfair discrimination in life insurance underwriting
 - Exposed for comment September 28, 2023

Colorado Insurance Regulation 10-1-1 Life Insurer Governance and Risk Management Requirements

- Board oversight and senior management accountability
- Cross-functional governance group with clearly defined roles and responsibilities
- Inventory of all algorithms and predictive models, their purpose, and outputs
- Documented ongoing monitoring of predictive model performance including accounting for model drift
- Documented roles and responsibilities for the design, development, testing, deployment, use, and monitoring

Colorado Insurance Regulation 10-1-1 Life Insurer Governance and Risk Management Requirements

- Documented process for selecting third-party predictive models and third-party vendors that supply ECDIS, algorithms, and/or predictive models
- Insurers that use third-party vendors remain responsible for ensuring requirements are met including the production of any documents or information the Division deems necessary to ensure compliance
- Documented means for assessing and prioritizing risk

Colorado Insurance Regulation 10-1-1 Verification

- Insurers that do not use ECDIS, or algorithms and/or predictive models that use ECDIS, must submit an attestation annually
- Insurers that use ECDIS, or algorithms and/or predictive models that use ECDIS, were required to submit an interim report by June 1, 2024
- Insurers that use ECDIS, and algorithms and/or predictive models that use ECDIS, must submit a report by December 1, 2024 demonstrating compliance or corrective action plan

Colorado Insurance Regulation 10-1-1 Verification

- Regular reporting to demonstrate compliance
 - Serve as tools for continuous verification of compliance, allowing the Division to monitor adherence to the regulation
 - Through regular submissions and attestations, insurers provide external validation of their compliance efforts
- Progress and compliance reports help identify any issues or areas needing improvement, ensuring prompt action to rectify potential discrimination or non-compliance

Draft Life Insurance Underwriting Quantitative Testing Regulation

- Required for insurers that use ECDIS as well as algorithms and predictive models that use ECDIS
- Limited to testing for unfairly discriminatory outcomes based on race and ethnicity
- Similar Regulation 10-1-1 by establishing a quantitative testing protocol while also requiring insurers submit a report to the Division indicating the results of the testing and any necessary remediation

