

NAIC BLANKS (E) WORKING GROUP

Blanks Agenda Item Submission Form

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|---|---|--|
| CONTACT PERSON: _____ TELEPHONE: _____ EMAIL ADDRESS: _____ ON BEHALF OF: _____ NAME: <u>Jacob W. Garn</u> TITLE: <u>Director, Financial Regulation & Licensing</u> AFFILIATION: <u>Utah Insurance Department</u> ADDRESS: <u>4315 South 2700 West, Ste. 2300</u> <u>Taylorsville, UT 84129</u> | DATE: <u>04/29/2022</u> | FOR NAIC USE ONLY |
| | Agenda Item # <u>2022-13BWG MOD</u> Year <u>2022</u> Changes to Existing Reporting <input checked="" type="checkbox"/> [X] New Reporting Requirement <input type="checkbox"/> [] | REVIEWED FOR ACCOUNTING PRACTICES AND PROCEDURES IMPACT |
| | No Impact <input checked="" type="checkbox"/> [X] Modifies Required Disclosure <input type="checkbox"/> [] | DISPOSITION |
| | <input type="checkbox"/> [] Rejected For Public Comment <input type="checkbox"/> [] Referred To Another NAIC Group <input type="checkbox"/> [] Received For Public Comment <input checked="" type="checkbox"/> [X] Adopted Date <u>06/08/2022</u> <input type="checkbox"/> [] Rejected Date _____ <input type="checkbox"/> [] Deferred Date _____ <input type="checkbox"/> [] Other (Specify) _____ | |
| | | |

BLANK(S) TO WHICH PROPOSAL APPLIES

- | | | |
|---|--|---|
| <input checked="" type="checkbox"/> [X] ANNUAL STATEMENT | <input checked="" type="checkbox"/> [X] INSTRUCTIONS | <input checked="" type="checkbox"/> [X] CROSSCHECKS |
| <input type="checkbox"/> [] QUARTERLY STATEMENT | <input checked="" type="checkbox"/> [X] BLANK | |
| <input checked="" type="checkbox"/> [X] Life, Accident & Health/Fraternal | <input type="checkbox"/> [] Separate Accounts | <input type="checkbox"/> [] Title |
| <input type="checkbox"/> [] Property/Casualty | <input type="checkbox"/> [] Protected Cell | <input type="checkbox"/> [] Other _____ |
| <input type="checkbox"/> [] Health | <input type="checkbox"/> [] Health (Life Supplement) | |

Anticipated Effective Date: Annual 2022

IDENTIFICATION OF ITEM(S) TO CHANGE

Modify Five-Year Historical Data questions 68 and 69 to reference group comprehensive and modify questions 70 and 71 to reflect inclusion of all health lines of business other than group comprehensive. Crosschecks for these questions are being modifies accordingly.

REASON, JUSTIFICATION FOR AND/OR BENEFIT OF CHANGE**

The purpose of the proposal is to make changes to the Five-Year Historical Data questions 68 through 71 to reflect the changes to the lines of business captured on Schedule H.

NAIC STAFF COMMENTS

Comment on Effective Reporting Date: _____

Other Comments:

** This section must be completed on all forms.

ANNUAL STATEMENT INSTRUCTIONS – LIFE/FRATERNAL

FIVE-YEAR HISTORICAL DATA



Detail Eliminated to Conserve Space

A & H Claim Reserve Adequacy

Line 68 – Incurred Losses on Prior Years’ Claims – ~~Group Comprehensive Health~~ Comprehensive Group Health

2022 through current year Schedule H, Part 3, Line 3.1, Column 3

2022..... Should be consistent with business reported on Schedule H, Part 3, Line 3.1, Column 2 in 2021

2018 through 2021 Schedule H, Part 3, Line 3.1, Column 2

Line 69 – Prior Years’ Claim Liability and Reserve – ~~Group Comprehensive Health~~ Comprehensive Group Health

2022 through current year Schedule H, Part 3, Line 3.2, Column 3

2022..... Should be consistent with business reported on Schedule H, Part 3, Line 3.2, Column 2 in 2021

2018 through 2021 Schedule H, Part 3, Line 3.2, Column 2

Line 70 – Incurred Losses on Prior Years’ Claims – Health Other than ~~Group Comprehensive~~ Comprehensive Group Health

2022 through current year Schedule H, Part 3, Line 3.1, Column 1 less Column 3

2022..... Should be consistent with business reported on Schedule H, Part 3, Line 3.1, Column 1 less Column 2 in 2021

2018 through 2021 Schedule H, Part 3, Line 3.1, Column 1 less Column 2

Line 71 – Prior Years’ Claim Liability and Reserve – Health Other than ~~Group Comprehensive~~ Comprehensive Group Health

2022 through current year Schedule H, Part 3, Line 3.2, Column 1 less Column 3

2022..... Should be consistent with business reported on Schedule H, Part 3, Line 3.2, Column 1 less Column 2 in 2021

2018 through 2021 Schedule H, Part 3, Line 3.2, Column 1 less Column 2



Detail Eliminated to Conserve Space

ANNUAL STATEMENT BLANK – LIFE\FRATERNAL

FIVE-YEAR HISTORICAL DATA
(Continued)

| | 1 20223 | 2 20212 | 3 20201 | 4 201920 | 5 20189 |
|--|------------|------------|------------|-------------|------------|
| A & H Claim Reserve Adequacy | | | | | |
| 68. Incurred losses on prior years' claims- group-comprehensive comprehensive_group health (Sch. H, Part 3, Line 3.1, Col. 3)..... | | | XXX | XXX | XXX |
| 69. Prior years' claim liability and reserve- group-comprehensive comprehensive_group health (Sch. H, Part 3, Line 3.2, Col. 3)..... | | | XXX | XXX | XXX |
| 70. Incurred losses on prior years' claims-health other than group comprehensive comprehensive_group health (Sch. H, Part 3, Line 3.1, Col. 1 less Col. 3)..... | | | XXX | XXX | XXX |
| 71. Prior years' claim liability and reserve-health other than group comprehensive comprehensive_group health (Sch. H, Part 3, Line 3.2, Col. 1 less Col. 3)..... | | | XXX | XXX | XXX |


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