Long-Term Care (2027)

Approved by MCAS Blanks (D) Working Group on 05/21/26

Long-Term Care Interrogatories

		Yes/No Response	Explanation
01	Does the company have data to report for Stand-Alone Long-Term Care?		--
02	Does the company have data to report for Life Long-Term Care Hybrid?		--
03	Does the company have data to report for Annuity Long-Term Care Hybrid?		--
04	Stand-Alone LTC - Has the company had a significant event or business strategy change that would affect the data for this reporting period?		--
05	If yes, add additional comments.	--	
06	Life LTC Hybrid - Has the company had a significant event or business strategy change that would affect the data for this reporting period?		--
07	If yes, add additional comments.	--	
08	Annuity LTC Hybrid - Has the company had a significant event or business strategy change that would affect the data for this reporting period?		--
09	If yes, add additional comments.	--	
10	Stand-Alone LTC - Has all or part of this block of business been sold, closed or moved to another company during the reporting period?		--
11	If yes, add additional comments.	--	
12	Life LTC Hybrid - Has all or part of this block of business been sold, closed or moved to another company during the reporting period?		--
13	If yes, add additional comments.	--	
14	Annuity LTC Hybrid - Has all or part of this block of business been sold, closed or moved to another company during the reporting period?		--
15	If yes, add additional comments.	--	
16	Stand-Alone LTC - Is there a reason that the reported LTC information may identify the company as an outlier or be substantially different from previously reported data (such as assuming, selling or closing blocks of business; shifting market strategies; underwriting changes, etc.)?		--
17	If yes, add additional comments.	--	
18	Life LTC Hybrid - Is there a reason that the reported LTC information may identify the company as an outlier or be substantially different from previously reported data (such as assuming, selling or closing blocks of business; shifting market strategies; underwriting changes, etc.)?		--
19	If yes, add additional comments.	--	
20	Annuity LTC Hybrid - Is there a reason that the reported LTC information may identify the company as an outlier or be substantially different from previously reported data (such as assuming, selling or closing blocks of business; shifting market strategies; underwriting changes, etc.)?		--
21	If yes, add additional comments.	--	
22	Stand-Alone LTC - Was the company still actively writing policies in the state at year end?		--
23	Life LTC Hybrid - Was the company still actively writing policies in the state at year end?		--
24	Annuity LTC Hybrid - Was the company still actively writing policies in the state at year end?		--
25	Does the company use Managing General Agents (MGAs)?		--
26	Does the company use Third Party Administrators (TPAs)?		--
~~16~~ 27	Additional state specific Stand-Alone Long-Term Care comments (optional).	--	
~~17~~ 28	Additional state specific Life Long-Term Care Hybrid comments (optional).	--	
~~18~~ 29	Additional state specific Annuity Long-Term Care Hybrid comments (optional).	--	

Long-Term Care General Information

		Stand-Alone LTC	Life LTC Hybrid	Annuity LTC Hybrid
30	Direct written premium during the period.			
31	Direct earned premium during the period.			
~~19~~ 32	Number of policies/contracts in-force as of the beginning of the reporting period.			
~~20~~ 33	Number of applications approved during the period.			
34	Number of applications pending at the beginning of the period.			
35	Number of applications pending at the end of the period.			
36	Number of applications received.			
37	Number of applications denied during the period.			
~~21~~ 38	Number of free look cancellations during the period.			
~~22~~ 39	Number of lapses during the period.			

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Long-Term Care General Information Continued

		Stand-Alone LTC	Life LTC Hybrid	Annuity LTC Hybrid
40	Number of policies terminated or cancelled at the request of the insured.			
41	Number of policies terminated or cancelled by the insurer for reasons other than non-payment or at the request of the insured.			
~~23~~ 42	Number of rescissions during the period.			
~~24~~ 43	Number of policies/contracts in-force as of the end of the reporting period.			
~~25~~ 44	Number of internal replacements during the period.			
~~26~~ 45	Number of external replacements during the period.	--		
~~27~~ 46	Number of policies/contracts replaced where age of insured at replacement was < 65.	--		
~~28~~ 47	Number of policies/contracts replaced where age of insured at replacement was between 65 and 80.	--		
~~29~~ 48	Number of policies/contracts replaced where age of insured at replacement was > 80.			
~~30~~ 49	Number of complaints received directly from ~~consumers~~ any person or entity other than the DOI.			
50	Number of adverse determinations overturned upon request for internal review (Do not include additional voluntary levels of reviews).			
51	Number of adverse determinations upheld upon request for internal review (Do not include additional voluntary levels or reviews).			
52	Number of customer requested appeals on final adverse determinations to an external review organization.			
53	Number of final adverse determinations overturned upon request for external review.			
54	Number of final adverse determinations upheld upon request for external review.			

Long-Term Care Claimants and Claimant Requests Activity

		Stand-Alone LTC	Life LTC Hybrid	Annuity LTC Hybrid
~~31~~ 55	Number of claimants approved for benefits as of the beginning of the period.			
~~32~~ 56	Number of claimants with pending claimant request determinations as of the beginning of the period.			
~~33~~ 57	Number of new claimants during the period.			
~~34~~ 58	Number of claimants with pending claimant request determinations as of the end of the period.			
~~35~~ 59	Number of claimants approved for benefits as of the end of the period.			
~~36~~ 60	Number of claimant requests denied or not paid because claimant did not pursue (inactivity or death).			
~~37~~ 61	Number of claimant requests denied or not paid because of preexisting condition exclusion.			
~~38~~ 62	Number of claimant requests denied or not paid because of elimination or waiting period not met.			
~~39~~ 63	Number of claimant requests denied or not paid because services provided not covered under the policy.			
~~40~~ 64	Number of claimant requests denied or not paid because provider or facility not qualified under the policy.			
~~41~~ 65	Number of claimant requests denied or not paid because benefits eligibility criteria not met.			
~~42~~ 66	All other claimant requests denied or closed without payment.			
~~43~~ 67	Number of claim request determinations made within 0-30 days.			
~~44~~ 68	Number of claim request determinations made within 31-60 days.			
~~45~~ 69	Number of claim request determinations made within 61-90 days.			
~~46~~ 70	Number of claim request determinations made beyond 90 days.			

Long-Term Care Benefit Payment Requests Activity

		Stand-Alone LTC	Life LTC Hybrid	Annuity LTC Hybrid
~~47~~ 71	Number of benefit payment requests pending as of the beginning of the period.			
~~48~~ 72	Number of benefit payment requests received during the period.			
~~49~~ 73	Number of benefit payment requests denied or not paid during the period.			
~~50~~ 74	Number of benefit payment requests pending as of the end of the period.			
~~51~~ 75	Number of benefit payment requests paid within 0-30 days.			
~~52~~ 76	Number of benefit payment requests paid within 31-60 days.			
~~53~~ 77	Number of benefit payment requests paid within 61-90 days.			
~~54~~ 78	Number of benefit payment requests paid beyond 90 days.			
~~55~~ 79	Number of benefit payment requests denied or not paid within 0-30 days.			
~~56~~ 80	Number of benefit payment requests denied or not paid within 31-60 days.			
~~57~~ 81	Number of benefit payment requests denied or not paid within 61-90 days.			
~~58~~ 82	Number of benefit payment requests denied or not paid beyond 90 days.			

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Long-Term Care Lawsuit Activity

		Stand-Alone LTC	Life LTC Hybrid	Annuity LTC Hybrid
~~59~~ 83	Number of lawsuits open as of the beginning of the period.			
~~60~~ 84	Number of lawsuits opened during the period.			
~~61~~ 85	Number of lawsuits closed during the period - total.			
~~62~~ 86	Number of lawsuits closed during the reporting period with consideration for the consumer.			
~~63~~ 87	Number of lawsuits open as of the end of the period.			

Long-Term Care Attestation

		First Name	Middle Name	Last Name	Suffix	Title	Comments
~~64~~ 88	First Attestor Information.						--
~~65~~ 89	Second Attestor Information.						--
~~66~~ 90	Overall comments for the filing period.	--	--	--	--	--	

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