Market Conduct Annual Statement
2017 Data Year Filings

Long-Term Care
Data Elements & Validation
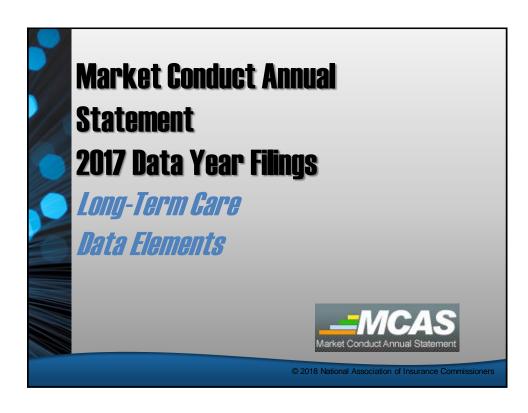
MCAS
Market Conduct Annual Statement

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Market Conduct Annual Statement
2017 Data Year Filings
Long-Term Care
Data Elements

MCAS
Market Conduct Annual Statement

MCAS Resources

Visit the 2017 MCAS Web page at:
http://www.naic.org/mcas_2017.htm

- Important Dates
- Participation Requirements
- Frequently Asked Questions
- Reporting Blanks
- Data Call and Definitions
- MCAS User Guide
- CSV Data Upload Instructions

Remember

The filing deadline is
April 30, 2018

Remember

MCAS Threshold:

There is no premium threshold - any positive premium in any state for stand-alone LTC, hybrid Life-LTC, or hybrid Annuity-LTC is reported for that state
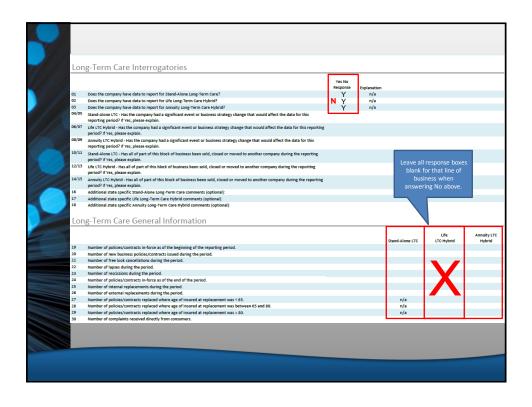
Arkansas Threshold:
~~$7 million in direct written premium~~
$50,000 in direct written premium

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?		--
04/05	Stand-Alone LTC - Has the company had a significant event or business strategy change that would affect the data for this reporting period? If Yes, please explain.		
06/07	Life LTC Hybrid - Has the company had a significant event or business strategy change that would affect the data for this reporting period? If Yes, please explain.		
08/09	Annuity LTC Hybrid - Has the company had a significant event or business strategy change that would affect the data for this reporting period? If Yes, please explain.		
10/11	Stand-Alone LTC - Has all of part of this block of business been sold, closed or moved to another company during the reporting period? If Yes, please explain.		
12/13	Life LTC Hybrid - Has all of part of this block of business been sold, closed or moved to another company during the reporting period? If Yes, please explain.		
14/15	Annuity LTC Hybrid - Has all of part of this block of business been sold, closed or moved to another company during the reporting period? If Yes, please explain.		
16	Additional state specific Stand-Alone Long-Term Care comments (optional):	--	
17	Additional state specific Life Long-Term Care Hybrid comments (optional):	--	
18	Additional state specific Annuity Long-Term Care Hybrid comments (optional):	--	

Long-Term Care Interrogatories

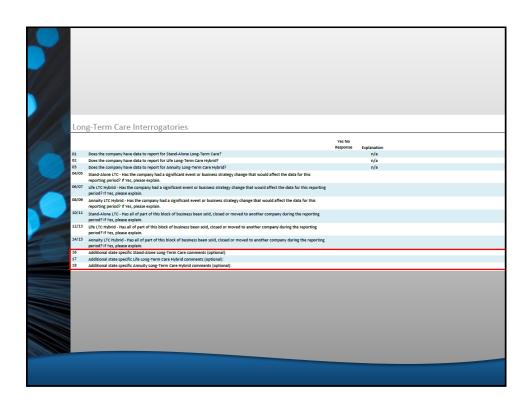|		Yes No Response	Explanation
01	Does the company have data to report for Stand-Alone Long-Term Care?		n/a
02	Does the company have data to report for Life Long-Term Care Hybrid?		n/a
03	Does the company have data to report for Annuity Long-Term Care Hybrid?		n/a
04/05	Stand-Alone LTC - Has the company had a significant event or business strategy change that would affect the data for this reporting period? If Yes, please explain.		
06/07	Life LTC Hybrid - Has the company had a significant event or business strategy change that would affect the data for this reporting period? If Yes, please explain.		
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14/15	Annuity LTC Hybrid - Has all of part of this block of business been sold, closed or moved to another company during the reporting period? If Yes, please explain.		
16	Additional state specific Stand-Alone Long-Term Care comments (optional):		
17	Additional state specific Life Long-Term Care Hybrid comments (optional):		
18	Additional state specific Annuity Long-Term Care Hybrid comments (optional):		

Long-Term Care General Information

		Stand-Alone LTC	Life LTC Hybrid	Annuity LTC Hybrid
19	Number of policies/contracts in-force as of the beginning of the reporting period.			
20	Number of new business policies/contracts issued during the period.			
21	Number of free look cancellations during the period.			
22	Number of lapses during the period.			
23	Number of rescissions during the period.			
24	Number of policies/contracts in-force as of the end of the period.			
25	Number of internal replacements during the period.			
26	Number of external replacements during the period.			
27	Number of policies/contracts replaced where age of insured at replacement was < 65.	n/a		
28	Number of policies/contracts replaced where age of insured at replacement was between 65 and 80.	n/a		
29	Number of policies/contracts replaced where age of insured at replacement was > 80.	n/a		
30	Number of complaints received directly from consumers.			

Long-Term Care Interrogatories

		Yes No Response	Explanation
01	Does the company have data to report for Stand-Alone Long-Term Care?		n/a
02	Does the company have data to report for Life Long-Term Care Hybrid?		n/a
03	Does the company have data to report for Annuity Long-Term Care Hybrid?		n/a
04/05	Stand-Alone LTC - Has the company had a significant event or business strategy change that would affect the data for this reporting period? If Yes, please explain.		
06/07	Life LTC Hybrid - Has the company had a significant event or business strategy change that would affect the data for this reporting period? If Yes, please explain.		
08/09	Annuity LTC Hybrid - Has the company had a significant event or business strategy change that would affect the data for this reporting period? If Yes, please explain.		
10/11	Stand-Alone LTC - Has all of part of this block of business been sold, closed or moved to another company during the reporting period? If Yes, please explain.		
12/13	Life LTC Hybrid - Has all of part of this block of business been sold, closed or moved to another company during the reporting period? If Yes, please explain.		
14/15	Annuity LTC Hybrid - Has all of part of this block of business been sold, closed or moved to another company during the reporting period? If Yes, please explain.		
16	Additional state specific Stand-Alone Long-Term Care comments (optional):		
17	Additional state specific Life Long-Term Care Hybrid comments (optional):		
18	Additional state specific Annuity Long-Term Care Hybrid comments (optional):		

Long-Term Care General Information

		Stand-Alone LTC	Life LTC Hybrid	Annuity LTC Hybrid
19	Number of policies/contracts in-force as of the beginning of the reporting period.			
20	Number of new business policies/contracts issued during the period.			
21	Number of free look cancellations during the period.			
22	Number of lapses during the period.			
23	Number of rescissions during the period.			
24	Number of policies/contracts in-force as of the end of the period.			
25	Number of internal replacements during the period.			
26	Number of external replacements during the period.			
27	Number of policies/contracts replaced where age of insured at replacement was < 65.	n/a		
28	Number of policies/contracts replaced where age of insured at replacement was between 65 and 80.	n/a		
29	Number of policies/contracts replaced where age of insured at replacement was > 80.	n/a		
30	Number of complaints received directly from consumers.			

Long-Term Care Interrogatories

		Yes No Response	Explanation
01	Does the company have data to report for Stand-Alone Long-Term Care?	Y	n/a
02	Does the company have data to report for Life Long-Term Care Hybrid?	N Y	n/a
03	Does the company have data to report for Annuity Long-Term Care Hybrid?	Y	n/a
04/05	Stand-Alone LTC - Has the company had a significant event or business strategy change that would affect the data for this reporting period? If Yes, please explain.		
06/07	Life LTC Hybrid - Has the company had a significant event or business strategy change that would affect the data for this reporting period? If Yes, please explain.		
08/09	Annuity LTC Hybrid - Has the company had a significant event or business strategy change that would affect the data for this reporting period? If Yes, please explain.		
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14/15	Annuity LTC Hybrid - Has all of part of this block of business been sold, closed or moved to another company during the reporting period? If Yes, please explain.		
16	Additional state specific Stand-Alone Long-Term Care comments (optional):		
17	Additional state specific Life Long-Term Care Hybrid comments (optional):		
18	Additional state specific Annuity Long-Term Care Hybrid comments (optional):		

Leave all response boxes blank for that line of business when answering No above.

Long-Term Care General Information

		Stand-Alone LTC	Life LTC Hybrid	Annuity LTC Hybrid
19	Number of policies/contracts in-force as of the beginning of the reporting period.			
20	Number of new business policies/contracts issued during the period.			
21	Number of free look cancellations during the period.			
22	Number of lapses during the period.			
23	Number of rescissions during the period.			
24	Number of policies/contracts in-force as of the end of the period.			
25	Number of internal replacements during the period.			
26	Number of external replacements during the period.			
27	Number of policies/contracts replaced where age of insured at replacement was < 65.	n/a		
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29	Number of policies/contracts replaced where age of insured at replacement was > 80.	n/a		
30	Number of complaints received directly from consumers.			

Long-Term Care Interrogatories

		Yes No Response	Explanation
01	Does the company have data to report for Stand-Alone Long-Term Care?		n/a
02	Does the company have data to report for Life Long-Term Care Hybrid?		n/a
03	Does the company have data to report for Annuity Long-Term Care Hybrid?		n/a
04/05	Stand-Alone LTC - Has the company had a significant event or business strategy change that would affect the data for this reporting period? If Yes, please explain.		
06/07	Life LTC Hybrid - Has the company had a significant event or business strategy change that would affect the data for this reporting period? If Yes, please explain.		
08/09	Annuity LTC Hybrid - Has the company had a significant event or business strategy change that would affect the data for this reporting period? If Yes, please explain.		
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12/13	Life LTC Hybrid - Has all of part of this block of business been sold, closed or moved to another company during the reporting period? If Yes, please explain.		
14/15	Annuity LTC Hybrid - Has all of part of this block of business been sold, closed or moved to another company during the reporting period? If Yes, please explain.		
16	Additional state specific Stand-Alone Long-Term Care comments (optional):		
17	Additional state specific Life Long-Term Care Hybrid comments (optional):		
18	Additional state specific Annuity Long-Term Care Hybrid comments (optional):		

Long-Term Care Interrogatories

		Yes No Response	Explanation
01	Does the company have data to report for Stand-Alone Long-Term Care?		n/a
02	Does the company have data to report for Life Long-Term Care Hybrid?		n/a
03	Does the company have data to report for Annuity Long-Term Care Hybrid?		n/a
04/05	Stand-Alone LTC - Has the company had a significant event or business strategy change that would affect the data for this reporting period? If Yes, please explain.		
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17	Additional state specific Life Long-Term Care Hybrid comments (optional):		
18	Additional state specific Annuity Long-Term Care Hybrid comments (optional):		

Long-Term Care Interrogatories

		Yes No Response	Explanation
01	Does the company have data to report for Stand-Alone Long-Term Care?		n/a
02	Does the company have data to report for Life Long-Term Care Hybrid?		n/a
03	Does the company have data to report for Annuity Long-Term Care Hybrid?		n/a
04/05	Stand-Alone LTC - Has the company had a significant event or business strategy change that would affect the data for this reporting period? If Yes, please explain.		
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14/15	Annuity LTC Hybrid - Has all of part of this block of business been sold, closed or moved to another company during the reporting period? If Yes, please explain.		
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17	Additional state specific Life Long-Term Care Hybrid comments (optional):		
18	Additional state specific Annuity Long-Term Care Hybrid comments (optional):		

Long-Term Care MCAS Data Elements

Market Conduct Data

Long-Term Care

- Stand-Alone LTC
- Life-Hybrid LTC
- Annuity-Hybrid LTC

    - Report experience on individual LTC hybrid policies and contracts.
    - Do not report experience on group policies and contracts.

Market Conduct Data

Stand-Alone Long-Term Care in MCAS:

- NAIC Long-Term Care Insurance Model Act (#640), Sec. 4A

    ➢ … any insurance policy …designed to provide coverage …for each covered person … for one or more necessary or medically necessary diagnostic, preventive, therapeutic, rehabilitative, maintenance or personal care services ….

Market Conduct Data

LTC-Hybrid Insurance in MCAS:

- Products providing LTC insurance [which is] 'built into the life policy or annuity contract, or … attached to such policy or contract by a rider….'

- NAIC Long-Term Care Insurance Model Act (#640), Sec. 4A

  - ➤ [Hybrid-LTC] **does not include** life insurance policies that accelerate the death benefit specifically for … terminal illness, medical conditions requiring extraordinary medical intervention or permanent institutional confinement, and that provide the option of a lump-sum payment for those benefits and **where neither the benefits nor the eligibility for the benefits is conditioned upon the receipt of long-term care**.

Data Reporting Methodology

Financial Statement Filing

In-Force & New Business

Long-Term Care General Information

		Stand-Alone LTC	Life LTC Hybrid	Annuity LTC Hybrid
19	Number of policies/contracts in-force as of the beginning of the reporting period.			
20	Number of new business policies/contracts issued during the period.			
21	Number of free look cancellations during the period.			
22	Number of lapses during the period.			
23	Number of rescissions during the period.			
24	Number of policies/contracts in-force as of the end of the period.			
25	Number of internal replacements during the period.			
26	Number of external replacements during the period.			
27	Number of policies/contracts replaced where age of insured at replacement was < 65.	n/a		
28	Number of policies/contracts replaced where age of insured at replacement was between 65 and 80.	n/a		
29	Number of policies/contracts replaced where age of insured at replacement was > 80.	n/a		
30	Number of complaints received directly from consumers.			

January 1, 2017 – December 31, 2017

Free Looks

Long-Term Care General Information

		Stand-Alone LTC	Life LTC Hybrid	Annuity LTC Hybrid
19	Number of policies/contracts in-force as of the beginning of the reporting period.			
20	Number of new business policies/contracts issued during the period.			
21	Number of free look cancellations during the period.			
22	Number of lapses during the period.			
23	Number of rescissions during the period.			
24	Number of policies/contracts in-force as of the end of the period.			
25	Number of internal replacements during the period.			
26	Number of external replacements during the period.			
27	Number of policies/contracts replaced where age of insured at replacement was < 65.	n/a		
28	Number of policies/contracts replaced where age of insured at replacement was between 65 and 80.	n/a		
29	Number of policies/contracts replaced where age of insured at replacement was > 80.	n/a		
30	Number of complaints received directly from consumers.			

January 1, 2017 – December 31, 2017

Long-Term Care Data Call & Definitions

Free Looks
A free look is a set number of days provided in a policy or contract that allows time for the purchaser to review the policy or contract provisions with the right to return the policy or contract for a full refund of all monies paid. Report the number of policies that were returned by the owner under the free look provision.

Free Looks

MCAS is not asking for the number of policies that have a Free Look provision; you are expected to provide the number of times the free look provision was exercised during the reporting period.

Policies with Free Look Provision

Policies where Free Look Provision was Exercised

Lapses

Long-Term Care General Information

		Stand-Alone LTC	Life LTC Hybrid	Annuity LTC Hybrid
19	Number of policies/contracts in-force as of the beginning of the reporting period.			
20	Number of new business policies/contracts issued during the period.			
21	Number of free look cancellations during the period.			
22	Number of lapses during the period.			
23	Number of rescissions during the period.			
24	Number of policies/contracts in-force as of the end of the period.			
25	Number of internal replacements during the period.			
26	Number of external replacements during the period.			
27	Number of policies/contracts replaced where age of insured at replacement was < 65.	n/a		
28	Number of policies/contracts replaced where age of insured at replacement was between 65 and 80.	n/a		
29	Number of policies/contracts replaced where age of insured at replacement was > 80.	n/a		
30	Number of complaints received directly from consumers.			

January 1, 2017 – December 31, 2017

Long-Term Care Data Call & Definitions

Lapse

A termination of the entire policy or contract

OR

The termination of the LTC benefit of the policy or contract

DUE TO

A nonpayment of premium

Rescissions

Long-Term Care General Information

		Stand-Alone LTC	Life LTC Hybrid	Annuity LTC Hybrid
19	Number of policies/contracts in-force as of the beginning of the reporting period.			
20	Number of new business policies/contracts issued during the period.			
21	Number of free look cancellations during the period.			
22	Number of lapses during the period.			
23	Number of rescissions during the period.			
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29	Number of policies/contracts replaced where age of insured at replacement was > 80.	n/a		
30	Number of complaints received directly from consumers.			

January 1, 2017 – December 31, 2017

Long-Term Care Data Call & Definitions

Rescissions

The invalidation of a policy or contract

OR

The invalidation of the LTC benefit of the policy or contract by an insurer

In accordance with

NAIC Long-Term Care Insurance Model Act (#640)

INVALID

Policies In-Force

Long-Term Care General Information

		Stand-Alone LTC	Life LTC Hybrid	Annuity LTC Hybrid
19	Number of policies/contracts in-force as of the beginning of the reporting period.			
20	Number of new business policies/contracts issued during the period.			
21	Number of free look cancellations during the period.			
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26	Number of external replacements during the period.			
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28	Number of policies/contracts replaced where age of insured at replacement was between 65 and 80.	n/a		
29	Number of policies/contracts replaced where age of insured at replacement was > 80.	n/a		
30	Number of complaints received directly from consumers.			

End of Reporting Period December 31, 2017

Replacements

Long-Term Care General Information

		Stand-Alone LTC	Life LTC Hybrid	Annuity LTC Hybrid
19	Number of policies/contracts in-force as of the beginning of the reporting period.			
20	Number of new business policies/contracts issued during the period.			
21	Number of free look cancellations during the period.			
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26	Number of external replacements during the period.			
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30	Number of complaints received directly from consumers.			

January 1, 2017 – December 31, 2017

Long-Term Care Data Call & Definitions

Replacements

- Stand-Alone LTC policies: The replacement of a policy or contract with LTC benefits already in force with a new stand-alone LTC policy.

- Hybrid LTC policies: The replacement of any life policy, annuity contract or LTC policy already in force with a new policy or contract with LTC hybrid insurance coverage.

Replacements

Reported as TWO Replacements

Internal Replacement

Your Company

Original Policy

INSURANCE POLICY

Your Company

Replacement

INSURANCE POLICY

External Replacement

Outside Company

Original Policy

INSURANCE POLICY

Your Company

Replacement

INSURANCE POLICY

Replacements

Long-Term Care General Information

		Stand-Alone LTC	Life LTC Hybrid	Annuity LTC Hybrid
19	Number of policies/contracts in-force as of the beginning of the reporting period.			
20	Number of new business policies/contracts issued during the period.			
21	Number of free look cancellations during the period.			
22	Number of lapses during the period.			
23	Number of rescissions during the period.			
24	Number of policies/contracts in-force as of the end of the period.			
25	Number of internal replacements during the period.			
26	Number of external replacements during the period.			
27	Number of policies/contracts replaced where age of insured at replacement was < 65.	n/a		
28	Number of policies/contracts replaced where age of insured at replacement was between 65 and 80.	n/a		
29	Number of policies/contracts replaced where age of insured at replacement was > 80.	n/a		
30	Number of complaints received directly from consumers.			

January 1, 2017 – December 31, 2017

Complaints

Long-Term Care General Information

		Stand-Alone LTC	Life LTC Hybrid	Annuity LTC Hybrid
19	Number of policies/contracts in-force as of the beginning of the reporting period.			
20	Number of new business policies/contracts issued during the period.			
21	Number of free look cancellations during the period.			
22	Number of lapses during the period.			
23	Number of rescissions during the period.			
24	Number of policies/contracts in-force as of the end of the period.			
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26	Number of external replacements during the period.			
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28	Number of policies/contracts replaced where age of insured at replacement was between 65 and 80.	n/a		
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30	Number of complaints received directly from consumers.			

January 1, 2017 – December 31, 2017

Long-Term Care Data Call & Definitions

Complaint

Any written communication that expresses dissatisfaction with a specific person or entity subject to regulation under the state's insurance laws. An oral communication, which is subsequently converted to a written form, will meet the definition of a complaint for this purpose.

Long-Term Care Data Call & Definitions

Complaints Include:

- Any complaint regardless of the subject of the complaint (claims, underwriting, marketing, etc.)
- Complaints received from third parties
- Complaints that are **directly** received by the company through social media applications should be included if the complaint has enough specificity to meet the definition of a complaint

Complaints Do Not Include:

- Complaints received from the state department of insurance

Claims

Long-Term Care Claimants and Claimant Requests Activity

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

Claims
Claimant and Claimant Requests Activity

"Per claimant" basis: Counting each individual who makes one or a series of requests or demands for payment of benefits under a policy or contract

Long-Term Care Claimants and Claimant Requests Activity

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

Long-Term Care Data Call & Definitions

Claimant

An insured under an in-force policy or contract who the insurer has determined has met the benefit trigger of the policy or contract, or is in the process of making such determination, and such insured is, or may be, eligible to submit benefit payment requests.

Long-Term Care Data Call & Definitions

Claimant Request

A claimant request is a request or demand for payment made by an insured, or a representative of the insured, for a loss that may be included within the terms of coverage of the LTC policy or contract.

- This does NOT include events that were reported by the insured for "information only" or an inquiry of coverage when a claim has not actually been presented (opened) for payment.

Long-Term Care Data Call & Definitions

Claim Request Determination

A claim request determination is a determination as to whether an insured has met a contractual provision of a LTC policy or contract that conditions the payment of benefits on the insured's ability to perform activities of daily living, cognitive impairment, or other loss of functional capacity.

Claims
Claimant and Claimant Requests Activity

Long-Term Care Claimants and Claimant Requests Activity

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

January 1, 2017

Claims
Claimant and Claimant Requests Activity

Long-Term Care Claimants and Claimant Requests Activity

		Stand-Alone LTC	Life LTC Hybrid	Annuity LTC Hybrid
31	Number of claimants approved for benefits as of the beginning of period.			
32	Number of claimants with pending claimant request determinations as of the beginning of period.			
33	Number of new claimants during the period.			
34	Number of claimants with pending claimant request determinations as of the end of the period.			
35	Number of claimants approved for benefits as of the end of the period.			
36	Number of claimant requests denied or not paid because claimant did not pursue (inactivity or death).			
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46	Number of claim request determinations made beyond 90 days.			

January 1, 2017 – December 31, 2017

Long-Term Care Data Call & Definitions

Claimant Request Denied/Not Paid Because Claimant Did Not Pursue

A claimant made a request or demand for payment for the purpose of receiving a claimant request determination and/or benefit payment under the LTC benefit of a policy or contract, but did not provide the necessary documentation or contact the insurer again (inactivity could be the result of death.)

Long-Term Care Data Call & Definitions

Claimant Request Denied/Not Paid Because of Preexisting Condition Exclusion

A denial of coverage because benefits for the medical advice or treatment recommended by, or received from a provider of health care services are subject to a restriction as a pre-existing condition for a period of time following the effective date of the claimant's LTC coverage.

Long-Term Care Data Call & Definitions

Claimant Request Denied/Not Paid Because Elimination/Waiting Period Not Met

A determination, following the initial claimant request for coverage under the LTC benefit of the policy or contract that the elimination/waiting period had not yet elapsed.

Long-Term Care Data Call & Definitions

Claimant Request Denied/Not Paid Because Services Provided Not Covered

Expenses incurred for services and support which are not eligible for reimbursement under the LTC benefit of a policy or contract, such as an expense incurred for home health care when the policy or contract only provides benefits for nursing home confinements.

Long-Term Care Data Call & Definitions

Claimant Request Denied/Not Paid Because Provider/Facility Not Qualified

A long-term care provider or facility does not meet the minimum level of requirements or licensing as outlined in the policy or contract.

Long-Term Care Data Call & Definitions

Claimant Request Denied/Not Paid because Benefit Eligibility Criteria Not Met

A determination, following the initial claimant request for coverage under the LTC benefit of the policy or contract, that a benefit trigger has not been met, or a required certification by a licensed health care practitioner has not been provided, or a plan of care has not been provided.

Long-Term Care Data Call & Definitions

All Other Claimant Requests Denied or Closed Without Payment

A claimant request that was denied or closed without payment for any reason other than those we have just discussed.

Claims
Claimant and Claimant Requests Activity

Long-Term Care Claimants and Claimant Requests Activity

		Stand-Alone LTC	Life LTC Hybrid	Annuity LTC Hybrid
31	Number of claimants approved for benefits as of the beginning of period.			
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January 1, 2017 – December 31, 2017

Long-Term Care Data Call & Definitions

Reporting Notes

- If a claim is re-opened:
  - Report the claim as a new claim.
  - The claim determination time period should be measured from the date the claim was re-opened to the benefit trigger determination date.

Claims

Benefit Payment Requests Activity

"per transaction" basis counts each benefit payment request pending and benefit payment paid or not paid/denied.

Long-Term Care Benefit Payment Requests Activity

		Stand-Alone LTC	Life LTC Hybrid	Annuity LTC Hybrid
47	Number of benefit payment requests pending as of the beginning of the period.			
48	Number of benefit payment requests received during the period.			
49	Number of benefit payment requests denied or not paid during the period.			
50	Number of benefit payment requests pending as of the end of the period.			
51	Number of benefit payment requests paid within 0-30 days.			
52	Number of benefit payment requests paid within 31-60 days.			
53	Number of benefit payment requests paid within 61-90 days.			
54	Number of benefit payment requests paid beyond 90 days.			
55	Number of benefit payment requests denied or not paid within 0-30 days.			
56	Number of benefit payment requests denied or not paid within 31-60 days.			
57	Number of benefit payment requests denied or not paid within 61-90 days.			
58	Number of benefit payment requests denied or not paid beyond 90 days.			

Long-Term Care Data Call & Definitions

Benefit Payment Request

A benefit payment request is a request for benefits after the insurer has determined the insured is entitled to benefits following the initial claimant request.

- Each request or demand for a benefit payment (after satisfaction of the waiting or elimination period, if any) is treated as a distinct benefit payment request, and continuing payments for the same service should each be treated as a distinct benefit payment.

Claims
Benefit Payment Requests Activity

Long-Term Care Benefit Payment Requests Activity

		Stand-Alone LTC	Life LTC Hybrid	Annuity LTC Hybrid
47	Number of benefit payment requests pending as of the beginning of the period.			
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January 1, 2017

Claims
Benefit Payment Requests Activity

Long-Term Care Benefit Payment Requests Activity

		Stand-Alone LTC	Life LTC Hybrid	Annuity LTC Hybrid
47	Number of benefit payment requests pending as of the beginning of the period.			
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January 1, 2017 – December 31, 2017

Claims
Benefit Payment Requests Activity

Long-Term Care Benefit Payment Requests Activity

	Stand-Alone LTC	Life LTC Hybrid	Annuity LTC Hybrid
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57	Number of benefit payment requests denied or not paid within 61-90 days.		
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December 31, 2017

Claims
Benefit Payment Requests Activity

Long-Term Care Benefit Payment Requests Activity

	Stand-Alone LTC	Life LTC Hybrid	Annuity LTC Hybrid
47	Number of benefit payment requests pending as of the beginning of the period.		
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January 1, 2017 – December 31, 2017

Claims
Benefit Payment Requests Activity

Long-Term Care Benefit Payment Requests Activity

		Stand-Alone LTC	Life LTC Hybrid	Annuity LTC Hybrid
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January 1, 2017 – December 31, 2017

Lawsuit Activity

Long-Term Care Lawsuit Activity

		Stand-Alone LTC	Life LTC Hybrid	Annuity LTC Hybrid
59	Number of lawsuits open as of the beginning of the period.			
60	Number of lawsuits opened during the period.			
61	Number of lawsuits closed during the period --- Total.			
62	Number of lawsuits closed during the reporting period with consideration for the consumer.			
63	Number of lawsuits open as of the end of the period.			

January 1, 2017 – December 31, 2017

Long-Term Care Data Call & Definitions

A **lawsuit** is an action brought in a court of law in which one party, the plaintiff, claims to have incurred a loss as a result of the action of another party, the defendant.

Long-Term Care Data Call & Definitions

For purposes of reporting lawsuits for LTC products:
- For Life LTC Hybrid and Annuity LTC Hybrid, report experience for those policies or contracts with some form of LTC hybrid benefit. Report lawsuit experience for all lawsuits related to the LTC hybrid product, regardless of what aspect of the product, coverage or benefit the lawsuit is about.
- Include only lawsuits brought by an applicant for insurance, a policyholder or a beneficiary as a plaintiff against the reporting insurer or its agent as a defendant;
- Include all lawsuits, whether or not a hearing or proceeding before the court occurred;
- Do not include arbitrations of any sort;

Long-Term Care Data Call & Definitions

For purposes of reporting lawsuits for LTC products (cont'd):

- If one lawsuit seeks damages under two or more policies or contracts, count the number of policies or contracts involved as the number of lawsuits. For example, if one lawsuit seeks damages under three policies or contracts, count the action as three lawsuits;
- If one lawsuit has two or more complainants, report the number of complainants as the number of lawsuits. For example, if one lawsuit has two complainants, report two lawsuits. If the lawsuit is a class action, see instructions for treatment of class action lawsuits;
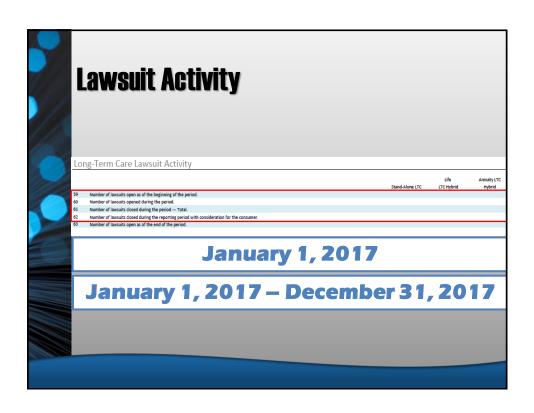
Long-Term Care Data Call & Definitions

For purposes of reporting lawsuits for LTC products (cont'd):

- Report a lawsuit in the jurisdiction in which the policy or contract was issued with the exception of class action lawsuits;
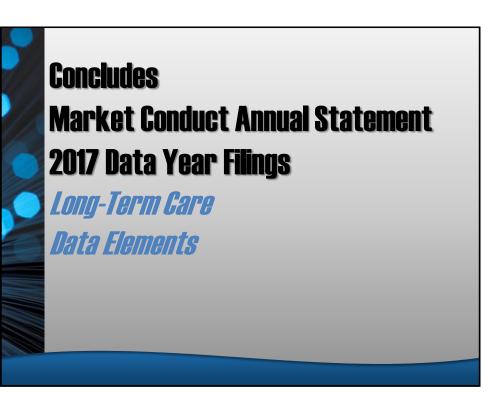
Long-Term Care Data Call & Definitions

For purposes of reporting lawsuits for LTC products (cont'd):

➢ Treatment of class action lawsuits:
- Report the opening and closing of a class action lawsuit once in each state in which a potential class member resides.

- Include an explanatory note with your submission stating the number of class action lawsuits included in the data and the general cause of action.

Lawsuit Activity

Long-Term Care Lawsuit Activity

		Stand-Alone LTC	Life LTC Hybrid	Annuity LTC Hybrid
59	Number of lawsuits open as of the beginning of the period.			
60	Number of lawsuits opened during the period.			
61	Number of lawsuits closed during the period --- Total.			
62	Number of lawsuits closed during the reporting period with consideration for the consumer.			
63	Number of lawsuits open as of the end of the period.			

January 1, 2017

January 1, 2017 – December 31, 2017
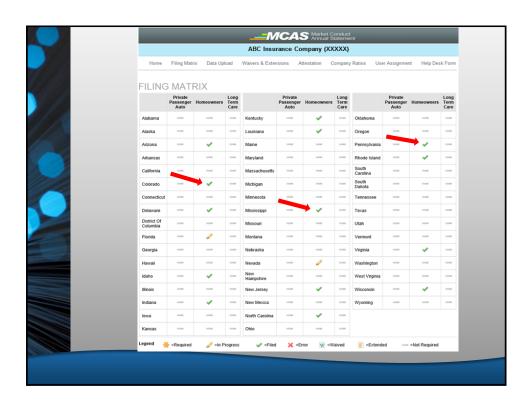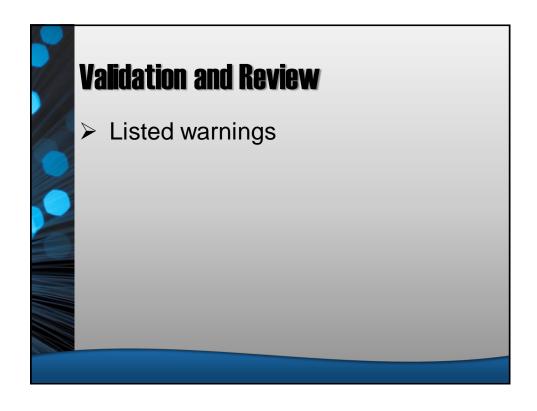
Long-Term Care Data Call & Definitions

Lawsuits Closed During the Period with Consideration for the Consumer is defined as a lawsuit closed during the reporting period in which a court order, jury verdict, or settlement resulted in payment, benefits, or other thing of value, i.e., consideration, to the applicant, policyholder, or beneficiary in an amount greater than offered by the reporting insurer before the lawsuit was brought.
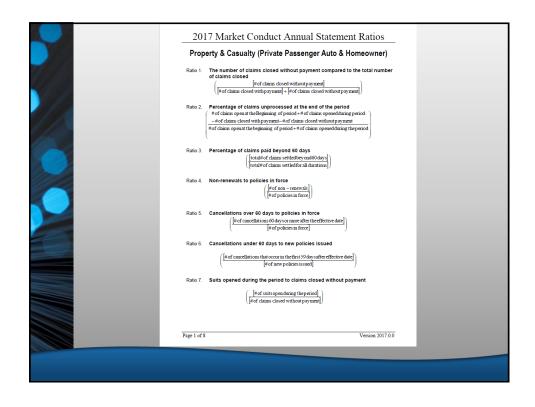
Lawsuit Activity

Long-Term Care Lawsuit Activity

		Stand-Alone LTC	Life LTC Hybrid	Annuity LTC Hybrid
59	Number of lawsuits open as of the beginning of the period.			
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61	Number of lawsuits closed during the period --- Total.			
62	Number of lawsuits closed during the reporting period with consideration for the consumer.			
63	Number of lawsuits open as of the end of the period.			

December 31, 2017

Concludes

Market Conduct Annual Statement

2017 Data Year Filings

Long-Term Care

Data Elements

Market Conduct Annual Statement

2017 Data Year Filings

Validation and Review

Validation and Review

➢ Listed warnings

Validation and Review

➢ Listed warnings
➢ Ratios

2017 Market Conduct Annual Statement Ratios

Property & Casualty (Private Passenger Auto & Homeowner)

Ratio 1. **The number of claims closed without payment compared to the total number of claims closed**

$$\left(\frac{[\text{\# of claims closed without payment}]}{[\text{\# of claims closed with payment}] + [\text{\# of claims closed without payment}]}\right)$$

Ratio 2. **Percentage of claims unprocessed at the end of the period**

$$\frac{\text{\# of claims open at the Beginning of period} + \text{\# of claims opened during period}}{\text{\# of claims open at the beginning of period} + \text{\# of claims opened during the period}}$$

Ratio 3. **Percentage of claims paid beyond 60 days**

$$\left(\frac{[\text{total \# of claims settled beyond 60 days}]}{[\text{total \# of claims settled for all durations}]}\right)$$

Ratio 4. **Non-renewals to policies in force**

$$\left(\frac{[\text{\# of non-renewals}]}{[\text{\# of policies in force}]}\right)$$

Ratio 5. **Cancellations over 60 days to policies in force**

$$\left(\frac{[\text{\# of cancellations 60 days or more after the effective date}]}{[\text{\# of policies in force}]}\right)$$

Ratio 6. **Cancellations under 60 days to new policies issued**

$$\left(\frac{[\text{\# of cancellations that occur in the first 59 days after effective date}]}{[\text{\# of new policies issued}]}\right)$$

Ratio 7. **Suits opened during the period to claims closed without payment**

$$\left(\frac{[\text{\# of suits open during the period}]}{[\text{\# of claims closed without payment}]}\right)$$

Page 1 of 8   Version 2017.0.0

Validation and Review

- ➢ Listed warnings
- ➢ Ratios
- ➢ Data comparisons

Validation and Review

- ➢ Listed warnings
- ➢ Ratios
- ➢ Data comparisons
- ➢ General review

State Regulators have Oversight

Data Validation Notifications

The ABC Group

Company A

Company B

Company C

Concludes
2017 Data Year Filings