2020 Spring National Meeting
Phoenix, Arizona

LONG-TERM CARE INSURANCE (EX) TASK FORCE
Monday, March 23, 2020
11:30 a.m.–12:30 p.m.
Sheraton Grand Phoenix—Phoenix Ballroom CDE—3rd Level

ROLL CALL

Scott A. White, Chair          Virginia          Mike Chaney          Mississippi
Michael Conway, Vice Chair    Colorado          Chlora Lindley-Myers Missouri
Jim L. Ridling                Alabama           Matthew Rosendale  Montana
Lori K. Wing-Heier            Alaska            Bruce R. Ramge     Nebraska
Christina Corieri             Arizona           Barbara D. Richardson Nevada
Allen W. Kerr                 Arkansas          Marlene Caride     New Jersey
Ricardo Lara                  California        Russell Toal      New Mexico
Trinidad Navarro              Delaware          Mike Causey       North Carolina
Karima M. Woods               District of Columbia Jon Godfrey    North Dakota
David Altmaier                Florida           Glen Mulready    Oklahoma
Colin M. Hayashida            Hawaii           Andrew R. Stolfi  Oregon
Dean L. Cameron               Idaho            Jessica K. Altman Pennsylvania
Robert H. Muriel              Illinois         Elizabeth Kelleher Dwyer Rhode Island
Stephen W. Robertson          Indiana          Raymond G. Farmer South Carolina
Doug Ommen                     Iowa              Larry D. Deiter  South Dakota
Vicki Schmidt                 Kansas            Hodgren Mainda   Tennessee
Sharon P. Clark               Kentucky         Kent Sullivan    Texas
James J. Donelon              Louisiana        Todd E. Kiser    Utah
Eric A. Cioppa                Maine            Michael S. Pieciak Vermont
Gary Anderson                 Massachusetts    Mike Kredler    Washington
Anita G. Fox                  Michigan         James A. Dodrill West Virginia
Steve Kelley                   Minnesota        Mark Afable      Wisconsin
Jeff Rude

NAIC Support Staff: Jeffrey C. Johnston

AGENDA

1. Consider Adoption of its 2019 Fall National Meeting Minutes
   — Commissioner Scott A. White (VA)
   Attachment One

2. Receive Status Reports on the Current Activity of the Task Force’s Workstreams
   a. Multistate Rate Review Practices—Commissioner Michael Conway (CO)
   b. Restructuring Techniques—Doug Slape (TX)
   c. Reduced Benefit Options and Consumer Notices—Commissioner Jessica K. Altman (PA)
   d. Valuation of Long-Term Care Insurance (LTCI) Reserves—Fred Andersen (MN)
   e. Non-Actuarial Variance Among the States—Commissioner Mike Kreidler (WA)
   f. Data Call Design and Oversight—Doug Stolte (VA)

3. Discuss 2020 Plan for the Task Force’s Workstreams—Commissioner Scott A. White (VA)

4. Discuss Any Other Matters Brought Before the Task Force—Commissioner Scott A. White (VA)

5. Adjournment
The Long-Term Care Insurance (EX) Task Force met in Austin, TX, Dec. 9, 2019. The following Task Force members participated: Scott A. White, Chair, and Doug Stolte (VA); Michael Conway, Vice Chair, represented by Eric Unger (CO); Lori K. Wing-Heier (AK); Allen W. Kerr represented by William Lacy (AR); Stephen C. Taylor (DC); Trinidad Navarro (DE); David Altmaier (FL); Colin M. Hayashida (HI); Doug Ommen (IA); Dean L. Cameron (ID); Robert H. Muriel (IL); Stephen W. Robertson represented by Amy Beard and Karl Knable (IN); Nancy G. Atkins (KY); James J. Donelon represented by Rich Piazza (LA); Gary Anderson (MA); Eric A. Cioppa (ME); Anita G. Fox represented by Karen Dennis (MI); Steve Kelley, Grace Arnold and Fred Anderson (MN); Bruce R. Ramge and Rhonda Ahrens (NE); Marlene Caride (NJ); John G. Franchini represented by Anna Krylova (NM); Barbara D. Richardson represented by Stephanie McGee (NV); Glen Mulready represented by Ron Kreiter (OK); Andrew Stolfi (OR); Jessica Altman (PA); Elizabeth Kelleher Dwyer (RI); Raymond G. Farmer (SC); Larry Deiter (SD); Hodgen Mainda (TN); Kent Sullivan and Doug Slape (TX); Todd E. Kiser represented by Tanji Northrop (UT); Michael S. Pieciak represented by Anna Van Fleet (VT); Mike Kreidler (WA); Mark Afable (WI); and James A. Dodrill (WV).

1. **Adopted its Oct. 31 and Summer National Meeting Minutes**

The Task Force conducted an e-vote that concluded Oct. 31 to adopt its 2020 proposed charges.

Commissioner Kreidler made a motion, seconded by Commissioner Altman, to adopt the Task Force’s Oct. 31 (Attachment One) and Aug. 4 (see NAIC Proceedings – Summer 2019, Long-Term Care Insurance (EX) Task Force) minutes. The motion passed unanimously.

Commissioner White said the Task Force also met Oct 16, in regulator-to-regulator session pursuant to paragraph 8 (consideration of strategic planning issues) of the NAIC Policy Statement on Open Meetings, to discuss workstream planning.

2. **Received a Progress Report on Activities of the Task Force**

Commissioner White said the goals of the Task Force were divided into six workstreams, each of which has work underway or planned. Commissioner White said a public summary report on each of the workstreams was posted to the Task Force’s webpage and was distributed to all interested state insurance regulators and interested parties on Oct. 25.

   a. **Multistate Rate Review Practice**

Ms. Ahrens said the workstream met Nov. 13 to discuss base questions and criteria for selecting a recommended long-term care insurance (LTCI) rate increase review methodology to use in a multistate review. Next, several actuaries were asked to refine the base questions and criteria, which will be discussed during a conference call in December.

   b. **Restructuring Techniques**

Mr. Slape said the workstream was organized to consider if any restructuring techniques could be used to protect policyholders as opposed to receivership. The group has met to develop a set of guiding principles and a scope of work. He said a conference call is scheduled for next week to review the scope of work and consider next steps for analysis.

   c. **Reduced Benefit Options and Consumer Notices**

Commissioner Altman said the workstream has met several times and is focused on information gathering from state insurance regulators on states’ practices for the review of reduced benefit options and consumer notices sent by companies, sample of notices and decisions states have made related to reduced benefit options. The group plans to continue information gathering by hearing from states that have robust review processes, discuss specific types of reduced benefit options and then shift to consumer disclosures.
Bonnie Burns (California Health Advocates—CHA) asked how reduced benefit options are regulated by the states because they are not included in NAIC models and there is inconsistency between states.

Commissioner Altman said the workstream has found that states have different review processes. One of the goals of the workstream is to reach a high level of consistency, keeping in mind the concerns affecting policyholders.

Ms. Burns asked when the workstream meetings would be open to interested parties. Commissioner White said the Task Force wants to be transparent and get input from stakeholders. Therefore, at the appropriate time, more information will be made available and more feedback will be requested from interested stakeholders. Commissioner Altman said with respect to this workstream, the input from consumer representatives and industry is necessary; it is just a matter of reaching the right point in the process to involve interested parties.

d. Valuation of LTCI Reserves

Mr. Andersen said the workstream’s primary charge regarding coordination and communication of LTCI reserving issues is being accomplished under the Valuation Analysis (E) Working Group and its review of companies’ Actuarial Guideline LI— The Application of Asset Adequacy Testing to Long-Term Care Insurance Reserves (AG 51) filings and meeting with companies. In 2019, the Working Group’s focus was on morbidity improvement, rate increase and investment return assumptions. In 2020, the focus has been on morbidity, including cost of care projections, effect of underwriting and what happens with older age policies. The workstream is also looking at ways to assist states in understanding the commonality between drivers of rate increases and reserving. The workstream conducted a survey on states’ interdepartmental coordination and communication between rate review actuaries and valuation actuaries and found that with few exceptions, states’ actuaries do communicate with each other.

Ms. Burns asked what happens to policyholder reserves when benefits are reduced. Mr. Andersen said companies are required to project out all cash flows, including premium, claims and investment income. When there are rate increases, the premium cash-flow projection for premium is changed for the new premium rate. When there are benefit changes, the cash-flow projections for benefits would be changed. That is something the workstream will focus on but does not have any data yet.

Birny Birnbaum (Center for Economic Justice—CEJ) asked which workstream will be looking at if the reduced benefit options offered to consumers are fair and equitable. Commissioner Altman, Mr. Andersen and Ms. Ahrens confirmed that the prospective review of reduced benefit options is within the scope of the reduced benefit option and consumer notice workstream and the multistate rate review practice workstream, while the historical review falls within the scope of the valuation of LTCI reserves workstream.

e. Non-Actuarial Variations

Commissioner Kreidler said the workstream is focused on evaluating the variances between states’ use of non-actuarial factors and review considerations in reviewing rate increase requests and develop best practices.

The workstream began with a limited scope survey of 14 workstream members about their departments’ policies, practices and authority to modify rate increase determinations of LTC rate filings based on non-actuarial factors. Nearly all states responding indicated they have authority to consider non-actuarial factors in the rate approval process. The top three factors were phase-in periods, caps (or limits) on the amount of allowed rate increases, and waiting periods between rate increase approvals and subsequent requests. The workstream also found that the length of phase-in and waiting periods and the threshold for caps varied from state to state. The workstream noted other factors included such things as the size of the block of policyholders, prior rate increase approvals, the size of the rate increase and its impact on consumers.

The workstream thinks the results of the survey are a representative sample of states’ practices, and it intends to use the results to develop recommendations for possible best practices. Over the next few weeks, the workstream will first be working on gathering additional information to better understand how the states determined these factors and established thresholds. Following that, the workstream will begin to develop possible best practices for the use of non-actuarial practices in the rate determination process that the Task Force can consider at a future date.

f. Data Call Design and Oversight
Mr. Stolte said the workstream was organized to perform two functions: 1) define a scope of work data call for certain long-term care (LTC) insurers in order to accumulate and analyze the current level of potential LTCI rate inequity among states’ policyholders; and 2) review the work of a consultant performing such a data call for communication to the Task Force.

Mr. Stolte said the workstream held preliminary discussions in July to brainstorm the type of data that may be needed to achieve the objective, and then in August, the actuaries began designing the data call. In September, testing and proposed improvements were made mostly from an instructional perspective. Ultimately, the workstream drafted a proposed scope of work for a consultant to complete such work. On Nov. 11, the NAIC released a Request for Proposal (RFP), which is posted to the NAIC website. Some key dates in the RFP are as follows:

- On Nov. 19, notification of intent to bid and submission of questions from bidders was due. Ten firms responded with their intent to bid, and on Nov. 22, responses to questions were provided.
- Bids are due Dec. 11.
- Firm selection is expected to be made in mid-February 2020.

Commissioner Stolfi said one data point that he is interested in receiving is how carriers have distributed dividends, whether currently available in annual financial reporting or through the data call.

3. Received Comments from Consumer and Industry Representatives

Patrick Cantilo (Cantilo & Bennett LLP) said the problem with LTCI rates is that pricing was originally based on modeling like life and annuities. The assumptions for lapse rates, termination rates, morbidity and mortality were misjudged. Investment yield assumptions have changed due to economic changes. For policies sold in the 1970s and 1980s, the premium was found to be grossly underpriced. It is not uncommon today for a company to have policies for a single product with rates that vary as much as sevenfold to tenfold between states. State insurance regulators have had a variety of valid concerns regarding companies’ rate increase requests. He said he has two observations:

- Policyholders had little input in the setting of premium rates and were often led to believe the rates would not change over time.
- Policyholders were inadvertently receiving a bargain, which was not a sustainable model.

Mr. Cantilo said there are three options for legacy blocks of LTCI:

- Market solutions are like the work being evaluated by the restructuring workstream group. Some in industry are developing creative solutions that have not been tested. Criteria should be observed with those solutions, including that the solutions be nondiscriminatory and treat policyholders fairly, and that the solutions must be effective and workable.
- Rehabilitation gives the domiciliary regulator broad authority to restructure the company and an opportunity to provide a better outcome for policyholders than market solutions or liquidation.
- Liquidation adds the value of guaranty association safety net but comes with benefit limitations.

Charles Piacentini (American Council of Life Insurers—ACLI) said the first message to convey is that the ACLI is committed to providing resources to answer questions and provide information. He said that all the workstreams are important and that the multistate rate review workstream is the cornerstone of all the workstreams. Industry has coalesced around the prospective present value (PPV) methodology, also known as the “Texas Approach,” as it achieves the objectives identified by state insurance regulators and concerns expressed by consumers. Stabilization and addressing legacy blocks are important to having coverage in the future and providing solutions to protect the financial security for consumers. He said coming up with a standard methodology will also enable streamlining of the information provided to each state. Applying a common methodology addresses the concerns across jurisdictions to treat similarly situated policyholders equitably.

Jan Graeber (ACLI) said she encourages the Task Force to leverage the work completed by the Long-Term Care Pricing (B) Subgroup. She said the ACLI is committed to devoting resources to demonstrate how the PPV address state insurance regulators’ concerns. The PPV requires carriers to share in the cost by absorbing the losses that have occurred in the past. The PPV addresses the inequity between states that have approved different rate increases. Internally, the ACLI is developing a high-level demonstration to show how the PPV addresses these concerns. Carriers need a level of predictability to price and manage their business.
Mr. Knable said that while Indiana is fine with a consistent approach to reviewing rates, he emphasized the need to maintain a state-based approach to applying rate increases to policyholders that considers actuarial factors and policyholder expectations.

Having no further business, the Long-Term Care Insurance (EX) Task Force adjourned.