Legal, Compliance & Regulatory

A 360° Perspective — Grappling with the Challenges of LTC Rate Increases

Reid Ashinoff, Dentons US LLP Patrick Reeder, Genworth Financial



15th Annual Intercompany Long Term Care Insurance Conference

Agenda



- Introduction -- Ongoing challenges for a valued product
- II. US Congressional Efforts/State LTC Partnership Programs
- III. An Overview of the Rate Increase Filing Process
- IV. The New NAIC Guidelines for Rate Increases
- V. State Standards for (Dis)Approving Rate Increases
- VI. Disparate State Responses to Similar Rate Increase Filings
- VII. Individual State Objections/Insurers' Efforts to Respond
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Introduction



- Over 12 million Americans currently rely on long-term services and supports ("LTSS").¹
- That number is projected to more than double by 2050.¹
- Despite the growing need for long-term services and supports, only 10% of the potential market of Americans age 50 and above currently has private LTCI.¹
- Due to recent challenges, many companies are discontinuing new sales and seeking rate increases on existing blocks of business.
 - A perfect storm: Morbidity, lapse, mortality, and interest rate challenges to original pricing assumptions

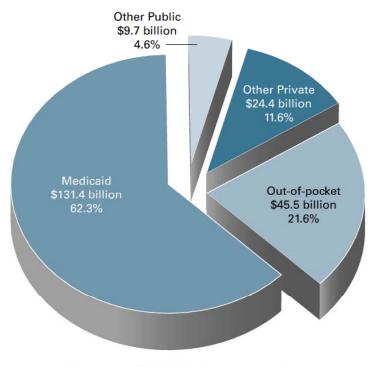
^{1.} Commission on Long-Term Care, REPORT TO THE CONGRESS, at 3, 5, 27 (Sept. 30, 2013).

I. Introduction



 Congress and the states have sought to make LTCI more widely available with mixed results.²

LTSS Expenditures by Source, 2011



Source: National Health Policy Forum, based on data from 2011 National Health Expenditure Accounts

2. Commission on Long-Term Care, REPORT TO THE CONGRESS at 4.

II. US Congressional Efforts/State LTC Partnership Programs



- The Federal LTC Act of 2000 created the largest group LTC policy in the United States for federal employees.
- Congress has not yet effectively addressed growing LTC needs.
 - The CLASS Act (halted in 2011, repealed in 2013)
 - 2013 Long-Term Care Commission Report to Congress
- States are trying to fill in the gaps.
 - State LTC Partnership Programs
 - Other State Initiatives to Encourage Private LTC Sales
- However, a huge unfunded future liability for elderly LTC in the United States remains.

III. An Overview of the Rate Increase Filing Process



- Filing Procedures
- Typical Timetable for State Action
- Rate Increase Implementation
 - Policyholder Options
- Policyholder Communications
 - What Should Be Covered
 - Role of Regulators

IV. The New NAIC Guidelines for Rate Increases



- The NAIC Senior Issues Task Force
- NAIC LTCI Rate Increase Model Bulletin
- NAIC LTCI Model Regulation Changes
- Proposed revisions to the NAIC Guidance Manual for Rating Aspects of the LTCi Model Regulation
- To date, very few states have officially adopted the new NAIC model regulations, though many states follow them.

IV. The New NAIC Guidelines for LTC Rate Increases -- Summary of NAIC LTC Bulletin and Regulation Changes



Pre-Rate Stabilization Bulletin – Formally adopted 12/2013	Post Rate Stabilization - NAIC LTC Model Regulation Changes - Formally adopted 8/2014
 All rate increases must be filed with and approved by DOI DOI may agree to phased in implementation with cost of delay Carrier must pay for outside actuary review States may use reviews done for other states Carrier must agree to 3-year monitoring/reporting 	 All rate increases must be filed with and approved by DOI DOI may agree to phased in implementation with cost of delay Carrier to pay for outside actuary review States may use reviews done for other states Carrier to agree to annual rate certification similar to Interstate Compact If carrier cannot certify, must submit plan of action
If full rate increase approved, carrier will not increase rates for next 3 years.	 If full rate increase approved, carrier will not increase rates for next 3 years
 Would apply a 60% loss ratio to current rate schedule and 80% (75% for GLTC) to increase portion 	 Using the greater of 58% and the original expected loss ratio on original premium
 Must file PH communication package Improved and more detailed information provided to consumers 	 Must file PH communication package Improved and more detailed information provided to consumers
 Administration of a liberalized contingent nonforfeiture ("CNF") Maximum aggregate threshold now 100% For policyholders who have held policy for 20 + years, CNF will be made available with no rate increase % threshold 	 Implementation of a liberalized contingent nonforfeiture ("CNF") Maximum aggregate threshold now 100% For policyholders who have held policy for 20 + years, CNF will be made available with no rate increase % threshold
	Also includes guidance for pre-RS business originally priced under loss ratios requirements consistent with many of the tenets above

V. State Standards for (Dis)Approving Rate Increases



- Each state promulgates its own version of NAIC Models governing LTC rate increase requirements.
- In addition, each state has statutes speaking to the discretion of the state DOI to (dis)approve insurance rates and increases.
- Typical state law criteria include:
 - must be actuarial justification for new rates
 - benefits must be reasonable in relationship to premiums charged
 - new policy must not contain provisions (including rates) that are unjust, unfair, inequitable, misleading or deceptive, or contrary to state laws
 - proposed rates may not be either excessive or inadequate
- Most of these terms are not defined.
- State laws uniformly give Commissioner wide discretion, and defer to regulators expertise.
- DOI decision reversible only under abuse of discretion or clearly erroneous filings.

VI. Disparate State Responses to Similar Rate Increase Filings



- Majority of states apply these statutes and regulations and work with insurers on implementation of rate increases, often over time.
- Some states have legislated or imposed regulatory limitations (percentages, amount, frequency, attained age, other) on LTC rate increases.
- A minority of states have refused to allow some or any LTC rate increases, notwithstanding data reflecting compliance with state statutory, regulatory, and actuarial requirements.
- This refusal creates issues for insurers and for other state regulators who are approving actuarially-justified rate increases.

VII. Individual State Objections



- States issuing non-actuarial based denials of rate increases have used various arguments that proposed increases:
 - are excessive
 - are not affordable
 - are not reasonable in relation to benefits
 - are not adequately documented and supported
 - will create shock lapses by (elderly) policyholders
 - are the result of faulty actuarial work at the time of original pricing and during prior rate increase requests
 - should have been rectified by prior rate increases granted
 - are unfair/inequitable to policyholders
 - constitute a deceptive trade practice
 - the insurer's actuarial assumptions keep changing and are not reliable
- In addition, states have asked for confidential economic data showing that:
 - the insurer has already sustained significant losses to date on the policy form
 - the insurer is sharing some of the projected lifetime loss under the policy form

VII. Insurers' Efforts to Respond



- Various landing spots/options to downgrade coverage/ retain premiums
- Contingent non-forfeiture benefits
- Issue age/attained age rate increase moratoriums
- Nationwide evidence of minimal policy surrenders/no shock lapse
- Enhanced communications with policyholders before/ during/after rate increases
- Spreading the increases over time

In the past year, insurers have considered less conventional options with persistently recalcitrant states:

- potential rate hearing/appeal of DOI's decision
- withdrawal from new LTC policy sales in the state

VIII. Continuing Litigation Challenges: Policyholder Attacks on Rate Increases



In the Courts

- Policyholder class actions filed over the past 20 years have challenged the original pricing and rate increases, with mixed results.
- Some insurers have settled; some have fought (and often won).
- These lawsuits claim breach of contract, fraud, intentional/negligent (i) underpricing and (ii) misrepresentations.

VIII. Continuing Litigation Challenges: Policyholder Attacks on Rate Increases



Insurers have done well on appeals.

Rakes v. Life Investors, 582 F.3d 886 (8th Cir. 2009):

"Where the plaintiffs have provided citations, the documents and testimony support Life Investors' position that it priced the policies using appropriate lapse rates . . ."

"The plaintiffs were not guaranteed a level premium for life; they were guaranteed the right to renew their LTC insurance policies . . . Life Investors disclosed its right to change premium rates on the first page of its policies, in boldface, capital letters."

Alvarez v. Ins. Co. of N. Am., 2008 WL 647784 (3d Cir. 2008):

"The policy was guaranteed renewable, not guaranteed affordable. . . . This guaranteed the right to renew the policy, and did not imply that premiums would never increase, or that they would only increase by a limited, affordable amount."

VIII. Litigation Challenges (continued)



- Flint v. Met Life, 2011 WL 7463938 (6th Cir. 2011):
 - Court affirmed dismissal based on policy language and the filed rate doctrine.
 - Other trial courts have also dismissed judicial challenges to LTC rates based on the filed rate doctrine.
 - Some courts have and some complaints have focused on elderly policyholders as a vulnerable class. See Milburn.

Administrative Hearings

- Hatfield v. Kentucky Dep't. of Insurance (2010):
 - KY policyholders and the KY Retired Teacher's Union brought an action to challenge the KY DOI's approval of LTC rate increases.
 - The KY DOI and Transamerica prevailed after a four day hearing before a KY administrative hearing officer, who issued a 60 page decision upholding the rate increases.
- Genworth on behalf of Met Life Insurance Company, USA v. MN Department of Commerce (2014)
 - Genworth filed an administrative appeal on behalf of Met Life of the MN DOC's denial of rate increase requests.

A 360° Perspective



Discussion

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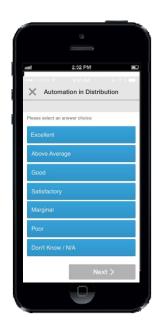






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