



Partnership Regulations Overview

California Partnership for
Long Term Care Task Force
June 20, 2017



Partnership Background

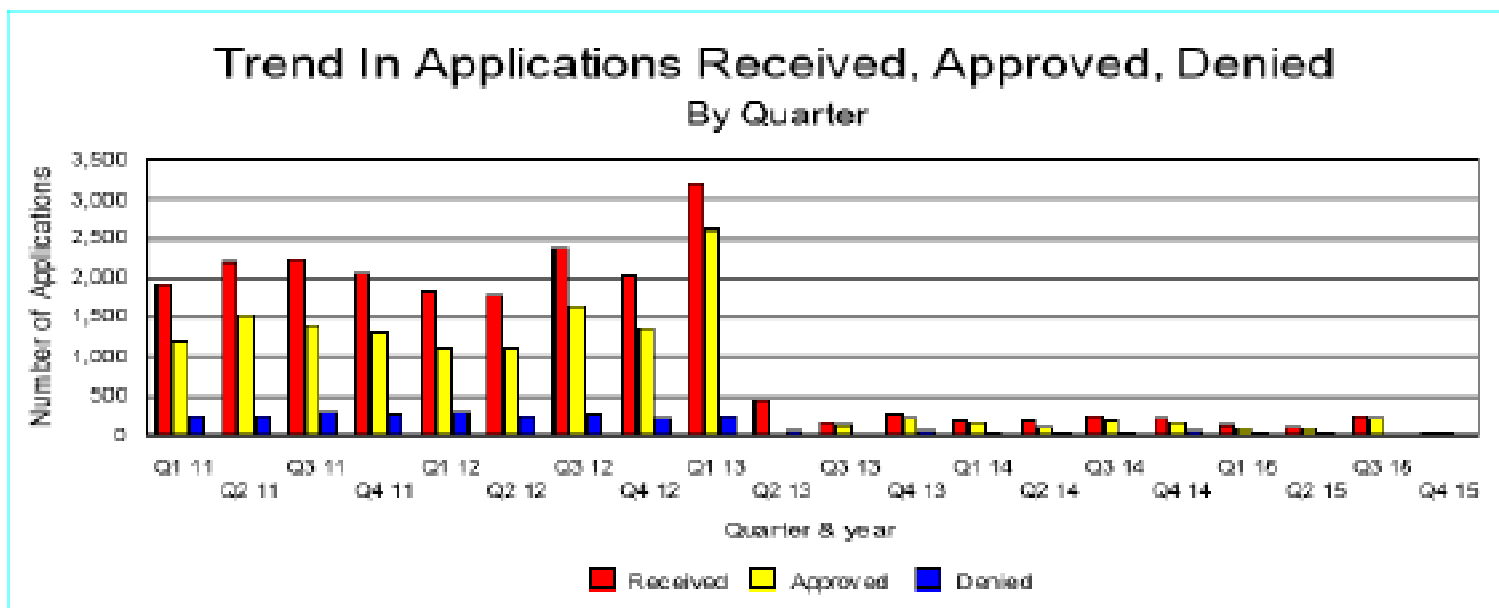
- Present Condition
- Loss of Policy Sales
- Loss of Insurers
- Emergency Regulations Approval Process
- Efforts in Progress



Partnership Background

- Policy Sales Decline

By Quarter (2011 – 2015)





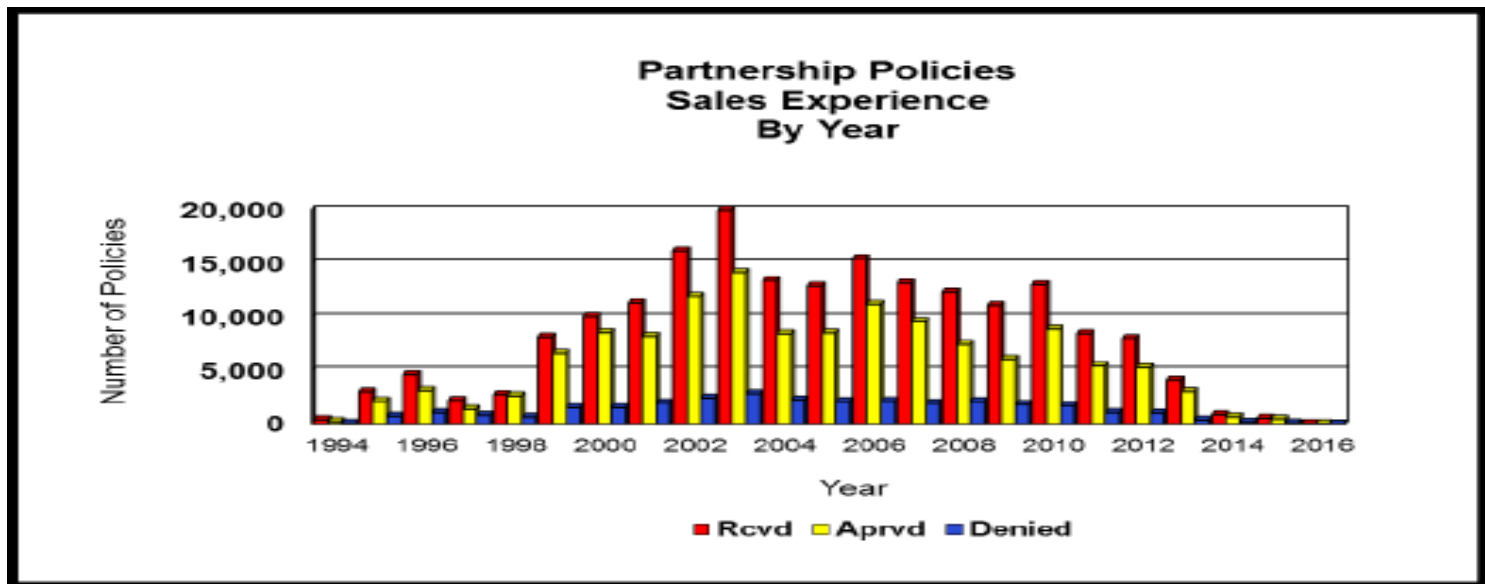
Partnership Background

- Policy Sales Decline

HIGHEST = 16,146 policy sales in the year 2002

LOWEST = 533 policy sales in the year 2015

Drop-Off = 20 Policies were sold in the year 2016





Partnership Background

Contributing Factors:

- Policies have become unaffordable
- Regulatory lack of flexibility in policy designs
- Job losses to other states
- Medi-Cal (Medicaid) crowd out
- Lack of stronger and active federal and state role in finding solutions
- Silver Tsunami



Partnership Background Loss of Insurers

BEFORE

- Bankers Life & Casualty
- Continental Casualty Co.
- Genworth (GE Capital Assurance)
- New York Life
- Transamerica Occidental
- MetLife
- Time Life Insurance
- CalPERS

NOW

- Genworth
- CalPERS



Partnership Background

Loss of Insurer Contributing Factors:

- Original premium pricing assumptions were off
- Re-pricing and rate increases created public doubt
- Lack of policy design freedom leading to increasingly more expensive premiums
- Excessive time waiting for policy forms and associated materials to be reviewed



Partnership Background

- Authority to implement change (Emergency Regulations)– Welfare and Institutions Code Section 22009
- Policy premiums high for moderate income Californians



Partnership Background

- Prior to initiating the Emergency Regulation process, DHCS consulted Partnership LTCI stakeholders to identify key issues to address in the Emergency Regulation
- Stakeholders included:
 - Partner Insurers
 - Agent Community
 - Consumers



New Partnership Regulations

Changes in Inflation Escalators (5% compound is still required to be offered)

- ***Age Based Inflation Protection (targets the employer marketplace)***
- < 50 Years of Age 4% compounded
- 50 – 64 Years of Age 5% Simple
- 65 and over, 3% compounded

Selectable Inflation Protection, regardless of age at purchase

- 4% Compound
- 5% Simple
- 3% Compound



New Partnership Regulations

- To Existing Comprehensive and Facility Only Policies
Assumptions: 57 Year old, Single, Male, Select Underwriting,
\$150 DB, 90 day EP, 3 Year Policy

| Inflation Escalator | Yearly Premium | Difference | Premium Reduction Percent | Yearly Premium As Monthly |
|---------------------|----------------|------------|---------------------------|---------------------------|
| 5% Compound | \$5,130.60 | N/A | N/A | \$427.55 |
| 4% Compound | \$3,811.20 | \$1,319.40 | 26% | \$317.60 |
| 5% Simple | \$2,246.55 | \$2,884.05 | 56% | \$187.21 |
| 3% Compound | \$2,151.45 | \$2,979.15 | 58% | \$179.29 |
| 2% Compound | \$1,750.65 | \$3,379.95 | 66% | \$145.89 |
| FPO | \$1,629.60 | \$3501.00 | 68% | \$135.80 |
| None | \$1,455.00 | \$3675.60 | 72% | \$121.25 |



New Partnership Regulations

Make available a Home Care ONLY policy

Includes minimal levels of protection while also including meaningful features in tune with supporting the Safety Net System

Key features:

- Value at a minimum 50% of the ADPPR and 2% compounded Inflation Protection and 30 day Elimination Period
- Adult Day Health/Social Care
- Personal Care Services
- Hands-On Assistance
- Standby Assistance
- Homemaker Services
- Hospice Services etc.
- Coverage for Home Modifications Assistive Devices as identified in a Plan of Care
- Emergency Medical Response Systems
- Caregiver Training EXCLUDES Home Health Care services.

EXCLUDES Home Health Care services.



New Partnership Regulations

Efforts In Progress Through Legislation (SB-1384)

Home and Community Based Services Policy . Same as a Comprehensive policy EXCEPT it excludes Nursing Facility Care. Minimum value 50% of the ADPPR and 3% compounded Inflation Protection

Task Force may propose and deliberate on:

- a) Linking this policy to Medi-Cal such that if Skilled Nursing Facility care be necessary then Medi-Cal can seamlessly transition policyholder coverage to Medi-Cal
- b) New and innovative consumer centric approaches to funding long-term care. Let a policyholder buy what they can afford.



Questions?

