In the Matter Of:

LONG-TERM CARE RATE HEARING

HEARING

November 06, 2017

MARYLAND Insurance Administration
200 ST. PAUL PLACE, SUITE 2700
BALTIMORE, MARYLAND 21202

LONG-TERM CARE RATE HEARING

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TRANSCRIPT OF LONG-TERM CARE RATE HEARING
Before COMMISSIONER AL REDMER
Baltimore, Maryland
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Pursuant to Public Notice, before Susan Farrell Smith, Notary Public for the State of Maryland.

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P R O C E E D I N G S

COMMISSIONER REDMER: Good afternoon. I am Al Redmer, and I would like to welcome everybody today for both coming and being on the phone. This is our fourth public hearing on specific carrier rate increases for the long-term care insurance in 2017.

For those of you that are close enough to see, I'll apologize for my unshaven look. Some of us are participating in No Shave November, which is to bring awareness to prostate cancer.

So, all you men of a certain age if you have not had your checkup, go have your checkup. You will be glad you did, kind of.

And with that, today's hearing will focus on several rate increase requests now before the Maryland Insurance Administration in the individual long-term care market.

These include requests from John Hancock proposing increases of 7.5 percent. Genworth Life Insurance Company proposing increases of 23 to 168 percent depending upon the policy form. And then

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American General Insurance Company proposing increases of 15, and finally Brighthouse Life Insurance Company proposing increases of 15 percent.

These requests in aggregate affect about 28,000 Maryland policyholders. And the goal of today's hearing is for the insurance company officials to explain their reasons for the rate increases.

We're also going to listen to comments from consumers and other interested parties. We're here to listen, ask questions from the carriers and consumers regarding the specific rate increase request.

Before we get started, I want to introduce the folks from the Insurance Administration that are up front with me today.

From the far left is Todd Switzer our chief actuary. Next is Jeff Ji, a senior actuary. To my left is Bob Morrow, the Associate Commissioner of Life and Health.

To my right is Cathy Grason our chief of staff. To her right is Adam Zimmerman an actuarial

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analyst.

And I'm going to go over just a couple of procedures for today's hearing. First, outside we have a handout with all of our contact information. So, feel free to pick one up for any follow-up questions or comments.

Secondly, we hope that you submitted your comments in advance. If not, we will keep the record open until Monday the 13th for any additional written testimony. And we will naturally be posting all of the written comments on our website.

The transcript and written testimony will be available on the Insurance Administration's long-term care page as well as the quasi legislation hearings page.

The long-term care page can be found at the MIA website by clicking on the long-term care tab located under the quick links section on the far left side of the home page.

As a reminder, we do have a Court Reporter with us today to document the hearing. If you are going to speak, please state your name and

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any appropriate affiliation clearly for the record.

If you're dialing in today, thank you for joining us. We ask you to keep your phones muted unless you're going to speak.

Okay. With that, we're going to ask the carriers to come up in alphabetical order, and then we will be hearing from any consumers or interested parties.

And with that we would like to invite American General Life Insurance Company to come up and get us started.

MR. MORTON: My name is Matt Morton. I'm a senior consulting actuary in the long-term care group. We advise American General on all their long-term care actuarial needs.

I'm here to speak on behalf of our rate increase filing in -- as of September. So, before we get started on the specific filing, I just wanted to give a little bit of background about myself and our team and what we do for American General.

I'm a fellow in the Society of Actuaries, member of the academy in good standing. I've been

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in long-term care for over a decade doing primarily consulting work, but before that I did work with Cigna in disability.

Our team which has over 20 actuaries focused solely on long-term care provide services for a number of clients, and today we're specifically talking about American General.

The signing actuary was Caroline Bittner also a fellow in the Society of Actuaries. She was unable to attend the meeting. So, to the extent there are any specific questions for her, we will be happy to get them to her and get them back and submitted to the website.

The filing that we're here to talk about is under -- for the consumers, they would see either 64028 or C12271. There are also two rider forms which would be listed as 64031 or 64032 both of which -- all four of which are included in the public filing; so, you can see them there.

As the Commissioner mentioned this is a 15 percent rate increase on the long-term care policies. There are 166 Maryland policyholders that would be affected by this, and that was as of December 31st, 2016. So, there is likely a few less than that at this point.

The 15 percent would be applied to the entire premium both base and rider. And the purpose of the rate increase for American General is to mitigate future losses on the block as a whole.

So, this is a nationwide filing that's happening for American General. These are all individual long-term care policies that provide benefits for nursing homes, assisted living facilities and home care.

They are reimbursement. So, to the extent that a policy holder uses less than their maximum daily benefit, they are reimbursed up to that amount.

The drivers of this rate increase are similar to those that we've seen nationwide. The key actuarial assumptions that are included in the pricing that was done for the policies sold between 1990 and 2001, for these policies, included assumptions for morbidity, persistency and interest.

Specifically talking about each of those three, morbidity will account for the probability of claims occurring, the length of those claims and the amount that would be reimbursed. Persistency will account for the probability that an individual dies or policyholder dies or lapse -- voluntarily lapses their policy.

And then this is a guaranteed renewable product; so, the intent was that the policy would pay a level premium throughout their life. And that premium would earn interest, and there would be reserves built. So, obviously there is an investment component to that.

So, when we look at the analysis to justify this rate increase, we see that the -- both the persistency and morbidity assumptions are worse than originally intended. The justifiable -- so, these policies were all written prior to the rate stabilization act. And as a result, the regulations would suggest that we -- American General could increase the premiums up to 61 percent or up to a lifetime loss ratio of 61 percent which was the

original filing.

However, that's not a feasible rate increase level and the American General has decided to offer a much lower rate increase capped at the Maryland legislation of 15 percent.

The maximum justifiable would be in excess of 400 percent. In addition to the 15 percent increase, American General in addition to it being reduced from the maximum justifiable, American General would like to offer policyholders options to help mitigate the rate increase.

Understanding that the average age of the Maryland policyholder is 78, and likely on fixed income, they are offering in the standardized letter reductions to benefit periods, reductions to daily benefits, and increased elimination periods in conjunction with all policyholders qualifying for the contingent nonforfeiture benefit.

These options will -- in addition to any policyholder calling up the company and asking for a customized option, these options will allow policyholders the best mix of premium rate level and

benefits to be covered.

A couple additional statistics that I would like to provide just for context, this is a mixture of tax qualified and nontax qualified policies. The tax qualification represents about 60 percent of the Maryland policyholders.

As I mentioned, the average age is 78. Approximately a little bit less than 30 percent of the Maryland policyholders have lifetime benefits with the majority having limited benefit periods.

And the last statistic that I would like to mention is the life time loss ratio prior to this rate increase is 96 percent. That represents if you take all of the premiums collected historically, all the premiums collected in the future, and all the claims that have historically been paid and all of those paid out in the future, 96 cents of every dollar would be paid out in benefits.

With this rate increase, it would only reduce that number from 96 percent to 95 percent. So with that, I would like to ask if there are any questions regarding the American General long-term care rate increase filing.

COMMISSIONERy REDMER: Yeah. Matt, what years were these products sold?

MR. MORTON: In Maryland these policies represent 1988 -- 1998 to 2001. Sorry.

COMMISSIONER REDMER: 2001. And --

MR. MORTON: They are no longer sold. These products specifically were ceased selling in 2001 nationwide.

COMMISSIONER REDMER: You're not selling at all in Maryland; correct?

MR. MORTON: Correct.

COMMISSIONER REDMER: Tell me about the interest rates. What was it in '98 or '99 that led you to believe that interest rates were going to be much higher?

MR. MORTON: So the current assumptions represent kind of a curve over time representing anywhere from 4.9 to, I believe, 6.5 percent in the filing.

Back in 1998, I don't have a sense of what the actuary was thinking that priced the

product. We can certainly go back and dig through the records to find out the justification that they used.

COMMISSIONER REDMER: And what -- what's your actual loss ratio on this block?

MR. MORTON: The actual? To --

COMMISSIONER REDMER: Yes.

MR. MORTON: To-date I believe it's 68 percent to-date.

COMMISSIONER REDMER: Thank you. Todd.

MR. SWITZER: Thank you. You mentioned a mix of rate increase and benefit adjustments, would benefit adjustments be enough to completely offset the rate increase?

MR. MORTON: Yes, the intent would be that an individual could call in and reduce their daily benefit by the same amount that the premium is being increased. So, it would be a very neutral benefit from a premium perspective.

MR. SWITZER: And you mentioned the loss ratio nationwide of 68 percent actual with the increase, 243 projected for a total lifetime of 95.

Might you have a sense of what those numbers are for Maryland?

MR. MORTON: I don't off the top of my head given the small number of policies.

MR. SWITZER: Out of about 7,000 nationwide.

MR. MORTON: I wouldn't -- I wouldn't even have a guess whether it would be higher or lower than the nationwide. But we can certainly get that for you.

MR. SWITZER: I think that's one of things we would need. Thank you.

MR. MORTON: Okay.

MR. JI: So, you mentioned that there is only one percent impact to the lifetime loss ratio at 15 percent increase. You also you mention that the 61 percent is feasible to obtain. So, what is your official plan for -- do you have a loss ratio you want to target or --

MR. MORTON: There is not a target lifetime loss ratio. My understanding the company is going to continue to monitor experience to see

how it develops, given the small size of this. And their ultimate goal is just to mitigate future losses is to really not have any gains or losses on the block going forward in aggregate.

MR. JI: So, currently you don't have any -- how much total you are pursuing a month?

MR. MORTON: That's not my understanding.

MR. MORROW: Let's go back to the interest for a second. You mentioned morbidity, persistency and then interest. What -- how big a factor is the low interest environment in the, I guess the losses?

MR. MORTON: In this filing, it's not a very big impact. Morbidity and persistency far outweigh that issue.

MR. MORROW: Can you tag a percent to it or ball park?

MR. MORTON: I can come back with a more firm number, but I would assume that it would be less than 10 percent of the total kind of issue at hand here. It's primarily driven by morbidity and persistency, the overwhelming majority of it.

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MR. MORROW: Okay.

MR. JI: So, what is your near future plan like next year, the year after next? Are you going to follow up that rate increase?

MR. MORTON: For Maryland specifically?

MR. JI: Yeah, for Maryland.

MR. MORTON: Or nationwide?

MR. JI: For Maryland.

MR. MORTON: My understanding is this is the only one that we're intending to file in Maryland. But I think the company is looking to reserve the rights to come back for additional rate increases in the future.

COMMISSIONER REDMER: Adam? Okay. Thank you. I appreciate it.

Let's move to Brighthouse.

MR. FRAIN: Good afternoon. My name is Jason Frain. I'm a vice president of Brighthouse Financial responsible for our runoff businesses which include our block of long-term care.

Also with me today is Mike Bergerson, a principal consulting actuary with Milliman. He

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handles the actuarial analysis and filings for this block of business.

Thank you, Commissioner Redmer and the staff of the Insurance Administration for the opportunity to discuss our pending filings here today.

And I'd also like to thank consumers that are participating for their interest in this business and in the hearing.

My goal today is provide clarity on the long-term care business of Brighthouse Financial, provide rationale for the pending rate increase, and discuss ways that we're helping our policyholders to balance the premium cost and their benefits.

For background purposes I thought it would be helpful to start with some history on long-term care policies at Brighthouse.

The policies subject to our pending filings were originally written by Travelers Insurance Company, and written from 1990 to 2001. Met Life acquired these policies in the Travelers Insurance Company legal entity as part of its

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acquisition of the larger Travelers insurance business back in 2005.

The legal entity has gone through a handful of name changes since that time, including Met Life Insurance Company USA, which was the most recent name until March of this year when the entity became Brighthouse Life Insurance Company.

Brighthouse Life Insurance Company is now one of the operating companies of Brighthouse Financial which separated as an independent company from Met Life as of August 4th of this year.

As submitted in our filings on September 18th, 2017, Brighthouse is requesting a 15 percent rate increase across its long-term care products.

As of 12/31/2006, these products covered 2,766 insureds in Maryland and over 64,000 policyholders nationwide.

The decision to file for these increases was made only after careful evaluation of our experience that has shown a continued deviation from the original assumptions. The contributing factor

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for which we review experience are mortality, morbidity, voluntary lapse rate and interest rates.

As everyone is aware, we are continuing to live longer than was anticipated when these policies were sold 15, 20 or 25 years ago. That has the effect of additional policies for which we need to pay future claims.

We also have experienced higher total claim costs, increased frequency of claims, higher average costs of claims as well as a longer average duration of claims.

Additionally our policyholders are recognizing the value of this business so they are surrendering them at much lower rates than was anticipated.

As with lower mortalities, it means there is an increased number of policies for which we have to pay future claims.

Finally interest rates have continued to hold at or near historically low levels. Lower than the investment return that the reserves earn.

Each of these factors contributes to the need for higher premium rates that we are -- we have filed for. The effects of these factors deviating from the assumptions, we've seen in our loss ratios. Loss ratios were expected to be low in the early years for these policies and allowed the insured time to build up a reserve to pay future claims.

The loss ratios have grown more significantly than expected over time as the policies have aged.

After the pending rate increase, lifetime loss ratios are still expected to range from 108 to 151 percent in policies in the State of Maryland.

Nationwide loss ratios are expected to be 105 percent to 138 percent on a lifetime basis after the rate increase.

Given the continued expectation of lifetime loss ratios above 100 percent, it is likely that future rate increases will be required in Maryland as well as nationwide.

We understand that these rate increase are a challenge for our policyholders as many of them are retired and on fixed incomes. We also

appreciate that they have remained faithful customers.

To provide flexibility to our customers we offer options to give them a choice in managing to a premium level that works for their individual needs.

First, the policyholder can decide to pay the higher premium and maintain the level of benefits that they currently have under their policy.

Second, a policyholder can make benefit changes which could adjust their premium accordingly to give them a level of premium that could either be similar to or lower than the current premium level they are paying today.

Finally the policyholder can select a nonforfeiture options, something we call an optional limited benefit, that will provide a paid-up level of benefits equal to the total amount of premiums paid less any premiums waived and less any claims paid. The advantage of this option is not having any future premium payments.

Even with these additional options to manage premiums to a similar or lower level, our experience in Maryland has shown with other rate increases that 93 to 96 percent of policyholders decide to pay the higher premium anyway, recognizing the value of the protection their policy provides.

Once again, I would like to thank Commissioner Redmer and the insurance administration staff for the opportunity to speak today, and I would be happy to take any questions at this time.

COMMISSIONER REDMER: Actual loss ratio?

MR. FRAIN: In -- well, after the pending -- after the rate increase, it would be 108 to 150.

COMMISSIONER REDMER: I'm talking about current, like last year.

MR. BERGERSON: The historical nationwide loss ratios range from 51 percent to 105 percent nationwide. And in Maryland, from 47 percent to 120 percent. Maryland numbers wouldn't necessarily be fully credible though.

COMMISSIONER REDMER: And how many

policies are we talking about?

MR. FRAIN: There is about 2,800 as of the end of 2016.

COMMISSIONER REDMER: So, the swing from 47 to 120 percent loss ratio is that based on forms? Different products?

MR. BERGERSON: Yeah, different products.

COMMISSIONER REDMER: Okay. Thank you.

MR. SWITZER: So, I notice in the filing that nationwide target loss ratio was 133 percent or so. With a lifetime loss ratio with a needed increase of about 53 percent. I just want to clarify that I have that correct.

The anticipation is that it's for every dollar of premium, 133 in claims given the state of the block?

MR. BERGERSON: Yeah, so that's on the oldest products in the filings.

MR. SWITZER: Okay.

MR. BERGERSON: And really last year when we discussed the filings with the Administration, one of the things we heard was the Administration kind of wanted to know what's the future plans for this block and what might be the need for increases in the future.

And the company acknowledges that they won't be able to get down to their pricing target. So, a part of what they wanted to do with this filing was to be a little more upfront with the Administration and consumers ultimately as well about what they would request right now absent the 15 percent cap.

So, we disclosed that in the filings. It ranges from 34 percent up to around 55 percent is what they would ask for absent the 15 percent cap.

As part of that, the company also decided they would hold the loss ratio, and make that the new loss ratio target if they were able to get that amount and that results in loss ratios of a little over 100 percent up to the 132.9 that you referenced.

MR. SWITZER: I notice in the original pricing that -- again I just want to verify my understanding. The mortality table used was the

1983 individual annuity mortality, but you adjusted that to 2016 experience. Is that correct?

MR. BERGERSON: Yes.

MR. SWITZER: So that these filings reflect an update to 2016?

MR. BERGERSON: So, the current mortality assumptions reflect the 1983 IAM table with the selection factors based on the experience that has been observed on the block. But it doesn't have a separate mortality improvement assumption influence from 1983 to now. It has the selection based on the experience.

MR. SWITZER: Thank you.

MR. MORROW: Just so I understand this correctly, you've got a form that's got a 47 percent loss ratio, but you're asking for a 15 percent increase?

MR. BERGERSON: That's the historical loss ratio in Maryland. The projected lifetime loss ratio for that form in Maryland after the increase is 108 percent. So, it's still long -- well, in excess of 60 percent.

MR. MORROW: The lifetime, but not the actual last year?

MR. BERGERSON: Correct, yeah, the 47 percent was the historical year to-date.

MR. MORROW: Okay.

MS. GRASON: So, you mentioned these are just closed blocks of long-term care. Is any of the Brighthouse Financial companies still offering new business in long-term care?

MR. FRAIN: No. All we have is closed blocks of long-term care.

MS. GRASON: And thank you for the history on how this block came to live in Brighthouse Life Insurance Company.

I guess my only other question would be is there a broader -- is there a broad portfolio within Brighthouse Life, or is it just the long-term care stuff?

MR. FRAIN: Yes, there is --

MS. GRASON: The runoff?

MR. FRAIN: Within the runoff or within Brighthouse in total?

MS. GRASON: Not within the mothership, but within Brighthouse Life Insurance Company itself. Because you said the parent is Brighthouse Financial; right?

MR. FRAIN: The parent is Brighthouse Financial. Brighthouse Life Insurance Company is really the main operating company within Brighthouse.

MS. GRASON: Okay.

MR. FRAIN: So, there is a wide array of products within that.

MS. GRASON: Okay, great. Thank you.

COMMISSIONER REDMER: Adam? Okay. I think we're good. Thank you.

MR. FRAIN: Thanks.

COMMISSIONER REDMER: Let's go to Genworth.

MS. ASBURY: Good afternoon. My name is Pam Asbury, and I'm a vice president in Genworth long-term care in force management.

Mr. Redmer, thank you, and the Maryland Insurance Administration team for holding today's hearing and providing Genworth and our customers a forum to discuss what's happening with our long-term care insurance policies.

COMMISSIONER REDMER: Can you speak up?

MS. ASBURY: Sure.

COMMISSIONER REDMER: Thank you.

MS. ASBURY: We're here today to speak specifically to our current long-term care premium rate increase filings which are pending with the Maryland Insurance Administration.

I would like to thank any consumers for your interest and participation today as well.

Genworth has been selling long-term care insurance in the State of Maryland since 1978. And currently provides coverage for more than 31,000 Maryland residents and approximately 1.2 million policyholders nationwide.

We understand how difficult premium increases our for customers; so, we welcome this opportunity to provide information that explains why the rate increases are necessary.

We also want to discuss the various

options we provide for our policyholders including our new stable premium option to assist them in continuing to make informed choices addressing their specific needs.

I'm joined today by Jamala Murray Arland, the actuary leader for Genworth's long-term care in force management. She will provide some basic information about out current premium rate filings.

MS. ARLAND: Thank you, Commissioner Redmer, for this opportunity. Hello to the department of the Maryland Insurance Administration staff, to consumers present and on the phone.

My name is Jamala Murray Arland, and I am vice president in Genworth's long-term care in force business. I'm also an actuary in good standing with the Society of Actuaries and the American Academy of Actuaries.

Although significantly higher rate increases and actuarially justified have been filed, at the request of the Department Genworth is currently seeing rates increases of an amended amount of 15 percent, the maximum annual rate

increase permitted in the State of Maryland for our 50,000 series, our Classic Select series and a part of our Privileged Choice series issued before 2012 including the following policy form numbers.

I'm going to read some policy form numbers just for policyholders on the phone or present if you want to check your forms.

The policy numbers that will be affected by these rate increases are: 50,000; 50,001; 50,003; 50,018; 50,020; 50,021; 50,0022; 7000 AP; 7020BB; 7020V; 7030R; 7032R; 7035; 7042MD; 7044MD; 7042MD rev; 7044MD rev.

I also wanted to note that for the 7035 policy series, we are requesting that the department consider implementing our multi year rate option plan with an annual phased increase in Maryland that would adhere to Maryland's 15 percent per year cap.

The rate increases will impact approximately 25,000 policies. These policy forms have received at least two and up to five prior rate increases of similar magnitude.

When we priced these long-term care

insurance forms, we utilized professional actuarial judgement to develop assumptions that look as long as 60 years in the future.

The need for the rate increases today are primary driven by claims that are projected to be higher than expected based on our current experience and assumptions compounded by policy persistency rates that have been higher than expected.

As experience emerges over time, we continue to refine our insurance data analysis to inform our assumption setting.

The first assumptions that we see emerge, that we see as experience emerge after a policy is priced is persistency which is how many policyholders will keep their policy in force.

Persistency includes considerations for mortality, how long policyholders will live, and considerations for lapse, how many policies will decide to terminate their coverage before they exhaust their benefits.

Persistency experience begins to emerge in the first policy year but voluntary lapses generally reach an ultimate level by the 10th policy duration.

As the block ages, the second assumption where we see experience emerge is morbidity. You can think of this as how policies age and the condition of their health as they age.

There are two conditions or components of morbidity. The first is the frequency or incidence. And this is the likelihood of a policyholder having an eligible long-term care event and going on a claim. The second is severity. And this is how much the eligible claim costs and how long it will last.

Claim incident experience begins to emerge as the policy starts to submit claims which generally takes 10 to 20 policy years after issue.

Severity experience begins to emerge as policyholders terminate from claim which makes experience on claim termination the longest actuarial assumption experience to start to develop.

Genworth employs our best efforts to complete -- to compete -- to complete a thorough,

professional assessment at the time of original pricing and as we evaluate our blocks on an ongoing basis.

We actively monitor claims experience. Comparable to what you have heard from other long-term care carriers, we continue to see an increase in claims incidence and especially in claims severity.

We also understand that the longer we wait, the greater the required rate increase will be. And in fact the amount of the increase approximately doubles every five years if no action is taken.

To this end we have developed a multi year plan including an option to mitigate the rate increases that will allow us to continue to serve our policyholders well into the future.

While we're currently seeking premium rate increases of 15 percent on these blocks of insurance which is the maximum annual permitted in Maryland, our current projected claims experience actually justifies a greater increase. As a result,

we expect that we will request additional rate increase on these forms in the future.

MS. ASBURY: Thanks, Jamala. Like most long-term care insurance companies, Genworth has policies in force that are challenged. On our three generations of older products and one series of our newer products, Genworth has lost several million dollars collectively.

On the three older products we expect losses to continue for the next several years and have agreed with regulators that we will never recover the losses on these policies.

The premium rate request that we are currently seeking will not be used to offset losses already incurred on these blocks of business.

We understand that large premium increases are a tremendous burden for our policyholders because we talk to our customers every day.

In fact more than 250,000 policyholders have called us to discuss their rate increases over the last two years.

We currently offer policyholders subject to rate increase a variety of options. We have enhanced our rate increase communications to include examples of various options and answers to frequently asked questions.

Our customer service representatives are ready and willing to help each policyholder understand these options so he or she can determine the best course of action for each individual situation.

We also have a website that permits policyholders to learn more about their choices and a real time, web-based tool that financial advisers can utilize to access information to help them explain the options to their clients.

Our policyholders can choose among various options. They can pay the full amount of the rate increase and maintain the current level of protection. Make custom benefit adjustments instead of paying higher premiums to find the right balance of affordability and protection for their individual situations.

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For one of our blocks of business where we know we will need to pursue significant future rate increases, the 7035 policy form, we have developed a new stable premium option for approval by the Maryland Insurance Administration.

This option is designed to have a reduced but still meaningful set of benefits, and provides the stability of a premium rate guarantee until at least 2028.

For policyholders who can no longer afford or no longer want to pay any future premiums, we voluntarily offer a nonforfeiture option that equals a paid-up policy.

With this option if the policyholder becomes claim eligible, Genworth will reimburse eligible expenses up to the amount of premium paid by the policyholder minus any claims that we've previously paid on the policy.

From our overall nationwide experience on the rate increases we have implemented since 2012, even with the variety of options provided, we have consistently seen over 80 percent of our

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policyholders choose to pay the higher premium which suggests they understand the value of the coverage.

We actively manage our business to try to insure that we will be here for our policyholders when they need us most, to make sure we are available to provide the answers they need, and to pay eligible claims should those needs arise.

We remain committed to working with the Maryland Insurance Administration to implement actuarially justified rate increases in a reasonable and responsible manner keeping in mind consumer interest and concerns.

Commissioner, we appreciate the opportunity to participate in today's hearing and would be happy to answer any questions administration.

COMMISSIONER REDMER: Thank you.

MR. SWITZER: Thank you. Given that the six filings you have with us represent as much as 25,000 members out 31,000, so about 80 percent, options are particularly important to nix the rate increase.

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And it seems like you have a robust list of options in your filing, and I appreciate you mentioning the website. You mentioned that notification letters are individualized. Reduction options, daily benefit, inflation elimination period and the riders.

I was wondering if with those options if you have a sense of how many take that. And is that your 80 percent number? Do above 80 percent just take the full increase and 20 percent will go for one of these mix of increase and benefit reduction?

MS. ASBURY: Right. We've seen over 80 percent take the --

MR. SWITZER: The full increase?

MS. ASBURY: -- full increase. We've seen about 13 -- 13 percent take a reduced benefit option, and 5 to 6 percent -- I'm trying to do the math in my head, take the nonforfeiture option.

Now, we have -- we haven't introduced that stable premium, the new option that we've -- you know, we have. We haven't introduced that out yet so we're not seeing any results on that yet

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because it's very new.

MR. SWITZER: I noticed for the country the actual loss ratio is 66, projected future 314, for a total lifetime loss ratio of 128. I was wondering if you have a sense for the Maryland corresponding numbers.

MS. ARLAND: You're talking about the PCS2 series historically?

MR. SWITZER: The most populated one.

MS. ARLAND: The Maryland experience is about in the same range.

MR. SWITZER: Okay.

MS. ARLAND: I believe in the filing package we did provide or either we are providing today, in effect the response we were providing, the Maryland specific view which it's about the same ballpark.

MR. SWITZER: Thank you. Okay.

MR. JI: I would like to touch base on the nonforfeiture. You mentioned that would be original premium minus the benefit paid. Is that -- the manner would be interest adjusted or not, so talking the nonforfeiture?

MS. ARLAND: The nonforfeiture option is not interest adjusted. It's just a return of your premiums less claims paid to-date.

MR. JI: Okay. Thank you.

MR. MORROW: Is this original Genworth business, or was it acquired, or is it a mix?

MS. ARLAND: It's a mix. The oldest series were some acquired blocks. But the -- some of the series that were written since the '90s were written on Genworth paper or GE paper.

MS. GRASON: Are you all still actively marketing products here to customers in Maryland?

MS. ARLAND: We are still actively marketing policies and products in Maryland and several other states.

COMMISSIONER REDMER: Okay. All right. Thank you. I appreciate it. That takes care of the --

MS. GRASON: One more. Hancock.

COMMISSIONER REDMER: Oh, Hancock, I'm sorry.

MR. PLUMB: Thanks for not forgetting about us.

COMMISSIONER REDMER: Yeah, yeah, right. Got you all excited there for a minute; didn't I?

MR. PLUMB: Thanks for having this hearing. My name is Dave Plumb. I'm a vice president and actuary from John Hancock responsible for the long-term care in force management.

We first started issuing long-term care in 1987. I just want to say that long-term care costs of services can cost hundreds of thousands of dollars and could easily deplete someone's life savings. And then they have to turn to Medicaid to cover their costs after they don't have the money any more.

I do think that long-term care insurance makes a ton of sense in pooling the risks among people. It's so much more affordable than trying to save for hundreds of thousands of dollars of potential long-term care costs when you pay a couple thousand dollars each year in long-term care premium.

We do have an outstanding filing with the Maryland department for a policy form that we very recently issued in 2011 and 2013, where we requested a 19.4 percent premium increase. And that would impact 150 Maryland insureds.

And this is a -- this policy was first filed with the interstate compact in 2010. This is the first interstate compact product that's undergoing rate increase in the industry.

And we filed the rate increase with the compact in January of this year. And being the first time they have seen a rate increase request, they did a very, very extensive and thorough review of the filing.

And then they issued a positive advisory opinion in June of this year, where they found that we demonstrated compliance with the rate filing standards and we justified the 19.4 percent rate increase.

Since the increase is more than 15 percent, the compact rules state that they issue an advisory opinion whether positive or negative, and

then pass it over to the states to do further review.

So, each member of the interstate compact has to also approve the rate increase. So, the Maryland department is now reviewing that filing. And in the meantime we have been asked to reduce the request to 7 and a half percent. And it was stated in that request that additional increase would be sought in the future as the experience continues to emerge since I mentioned it's a very, very young policy form.

And we've agreed to do that to reduce our request to 7 and a half percent with the understanding that we will come back on an annual basis. And due to the delay in implementation, the ultimate rate increase would be somewhat higher than 19.4 percent depending on how long it takes to get there.

And of course we recognize that there is very little actual data on this particular policy form alone. Actually you can say there is zero data on this particular form alone.

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The life to-date loss ratio is 2 percent. In the most recent years was 4 percent, but we do have over 20 years of experience from our older similar policy forms. And we're following actuarial standards of practice by using that data in order to act early in this policy form's lifetime to avoid larger increases later.

As Jamala mentioned, you know, every five years, the rate increase can double. So, I did want to explain in general why we need this premium adjustment on this as well as our other businesses.

The long-term care insurance is a really, really long duration product. People buy in their 50s and most people don't claim until their 80s. And long-term care uses and expenses are really difficult to predict for many decades.

And writers of this product need to be able to adjust premiums to reflect emerging experience. If not, I think it's highly unlikely that any carrier would have ever sold this type of insurance which would have resulted in many millions more people spending all their assets on long-term

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care costs in the absence of long-term care insurance. And they would be relying on the Medicaid programs.

And in terms of the rate increases themselves, I think most of the earlier premium increases in the industry were driven by voluntary lapse rates being lower than expected. I think that's generally behind us now.

And most of the current premium increases are driven by claims experience and somewhat mortality experience. I think it's still a relatively young industry, and many companies have just recently started getting claim information at the older ages and later durations which is where most of the claims are going to happen.

So, you don't have later durations until you've been in business, you know, for 20 years to see what your claims are really going to look like down the road.

And in John Hancock, we're seeing more people than expected living to those older ages where long-term care events are more likely to

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happen to begin with.

And even once they get there, we're seeing a higher rate of claims than expected at those older ages and those claims lasting longer than we had expected at the older ages.

Basically it's more people living to later ages and staying on claim longer.

And of course we recognize, like everyone else, that premium increases can be difficult for our policyholders. So, we've taken some major steps to help ease the burden of our insureds.

So, we apply the more restrictive rates, NIC rates to building rules to our prerate stability block. And we insure that the resulting premiums on our in force aren't more than comparable new business premiums adjusted for benefit differences. And in fact they are often way, way less than new business rates.

And we provide the typical benefit reduction alternatives to mitigate the rate increase, like reducing the daily benefit or benefit period, increasing the elimination period.

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Most importantly in 2010 we pioneered a pretty unique and innovative alternative to completely offset the rate increase for those who have fixed automatic inflation protection by lowering their future rate increases on a prospective basis. So, we labeled that the future in place reduction landing spot or landing spot for short.

Under this option, the past inflation accruals are retained by the policyholder; so, it's only the future accruals that are reduced going forward to offset the rate increase.

So, for the policy form we're discussing today, had the originally requested rate increase of 19.4 been granted, customers with 5 percent would have been able to fully offset the rate increase of 19 and change by reducing their future inflation accrual from 5 percent to 3.4 percent.

And we developed this option to help our customers retain their valuable coverage. We really don't want our policyholders to lapse and get little or no benefit on their policies.

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And our experience has shown that this has helped them retain their coverage greatly. But for administrative reasons, we can't make this option available if the entire increase isn't approved. So, since the department is asking us to reduce the request to 7 and a half percent, that landing spot won't be available on this product in Maryland.

And thank you again for allowing us to talk about this important subject. I am happy to answer any questions you might have.

COMMISSIONER REDMER: Are you still writing new business?

MR. PLUMB: We are not. We ceased earlier this year.

COMMISSIONER REDMER: Anybody?

MR. PLUMB: Oh, I'm sorry we are writing -- we're not writing stand-alone long-term care but still sell riders on life insurance to accelerate that benefit.

MR. SWITZER: There was one exhibit that was brought to my attention, it listed for this form

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premiums for all the states?

MR. PLUMB: Yes.

MR. SWITZER: And it showed that as the rates stand currently that Maryland is the 36th least expensive -- 35 states have lower premiums and Maryland is higher than the national average by about 9 percent. I'm just wondering if there is something about Maryland that kind of has an increased cost component that comes to mind.

MR. PLUMB: Yeah, I don't know if that's true for all of our other products that we have, but I guess I would think that maybe the cost of care might be a little bit higher in this area. So, people buy more benefits, either longer benefit periods or more daily benefit.

The other thing that could cause that would be an older, elderly, more elderly population purchasing it. But we usually don't see that vary a whole lot from state-to-state. Usually it's the cost of care that will drive that.

MR. SWITZER: Sure. I saw in one of the exhibits in the filing, that 63 percent of the 19.4

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was attributed to morbidity. And on another page, Page 17, the actual to expected for morbidity on the components was 98 to 99 percent.

What comes to mind, just joining those two, the morbidity was the main driver but the A-to-E was pretty close to a hundred.

MR. PLUMB: Was this the A-to-E before or after the change to assumptions?

MR. SWITZER: I read it as after. But I will double-check.

MR. PLUMB: It may have been -- even if it was before, I can say that since most of the claims are in the future and if you see a problem in the future, you're A-to-Es could be 98, 99 percent, you know, not above a hundred.

But you can tell in the future it's going to be worse because now you've started seeing data at the older ages, but it's a really small portion of today's experience. But it's going to be a really big portion of the experience 20 or 30 years from now. Does that make sense?

MR. SWITZER: It does. I was reading it

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as an overall but maybe we can --

MR. PLUMB: Yeah, we would never -- I don't think we've ever calculated overall A-to-E for morbidity over the lifetime of all of the business.

MR. SWITZER: Okay.

MR. PLUMB: It's usually just a look back.

MR. SWITZER: Lastly, with the 19.4 increase, there was a shock lapse, as you know, of 1.4. Would you expect with the 7.5 that that would come down and be a number that would decrease?

MR. PLUMB: Yeah, that probably would be. It's usually just a function of the rate increase, and I know you had asked that so we would adjust just for that.

MR. SWITZER: Okay.

MR. PLUMB: Slightly lower shock points.

COMMISSIONER REDMER: Anybody else? No. Okay. Great. Thank you.

MR. PLUMB: Thank you.

COMMISSIONER REDMER: And, so, we are -- that's it. Right? That's it for all the carriers.

Let's go to the phone. And, Mr. Benjamin, are you with us? Mr. Benjamin going once, twice.

MR. BENJAMIN: Can you hear me?

COMMISSIONER REDMER: I can now. Yes, sir.

MR. BENJAMIN: Okay. I don't know if I have anything worthwhile to say because I'm in over my head with these experts here.

COMMISSIONER REDMER: Me too.

MR. BENJAMIN: Oh. Well, then, okay. I will begin. My wife and I bought long-term care from GE in 2001. And shortly after that, GE sold their interest to Genworth. The policy series, this particular one closed in 2004.

And it was fine for the first seven years, and then in 2008 we got our first rate increase. And ever since then, we've had rate increases.

Now, the reasons given were already stated by the experts that have been on, that people were living longer, and the lapse rate was inadequate.

Now, this one thing that confuses me about the lapse rate. The last gentleman said he doesn't want the policyholders to lapse their policies.

But this was one of the reasons given for a rate increase. As if we pay our rates, and the insurance company hopes that 5 percent of us just drop every year. That confused me, but that was one of the reasons given.

And of course the insurance actuaries underestimated liabilities. They say the people are living longer as if they didn't know this 20, 30 years ago. I knew this. Did you know that, Commissioner?

COMMISSIONER REDMER: No, I didn't. But --

MR. BENJAMIN: Okay. All right.

COMMISSIONER REDMER: I can't tell you what mortality is going to be next year, let alone 20 years down the road.

MR. BENJAMIN: No, I understand that, but I'm saying in a general sense, I think most us have

known for years that people were living longer. That's the only point I'm trying to make.

Anyway after 2008 when we got our first increase, Genworth aggressively went after new policies. And they become dominant certainly in Maryland as far as I can see.

We move onto 2011 or 2012, and they got a new CEO, and he claimed after one year to make the company profitable.

He received a 12 million dollar bonus, until the next year the company came back and said, oh, we made a mistake the previous year when we requested these premium increases which haven't stopped since.

I know that in all this time I've been paying these premiums, my agent gets 5 percent. The executive salaries are not reduced. So, there is some wiggle room there.

They claim that they can predict the future as to some extent they are going to pay out more based on the number of policies then.

But I have a question. In my particular

policy which was No. 7030, seven-zero-three-oh. I would like to know how many policyholders were active when the policy got closed which was back in 2004 and how many are active today?

Because as your experts explained if you have X number of participants, they can project what the liability is going to be. But they are still putting in a claim -- they say -- what do they say? 25,000 were affected by the requested increase, I believe that's what I wrote down. Is that correct? And there are 31,000 policyholders in Maryland.

COMMISSIONER REDMER: Yes.

MR. BENJAMIN: Yeah. Okay. If there were just one thousand, wouldn't they put in the same request? Because they have the same proportionate of liability however many policyholders are left. And this doesn't take in account how many premiums have been received by the insurance company over the years.

So, really, I'm sorry I'm not more articulate because that's about all I've got to say, Commissioner.

COMMISSIONER REDMER: We appreciate that feedback. Todd, do you want to tackle the question about consideration for prior premiums Mr. Benjamin just alluded to and how that comes into the rate increase and then the topic of the lapse rate?

MR. SWITZER: For prior premiums, could you distill that one more time? Your question in that regard, please.

MR. BENJAMIN: Yes, Commissioner, I just muted the phone. Yeah, what I'm saying is hypothetically, say, in my policy we had 20,000 policyholders when the policy closed, and we have again hypothetically 2,000 now. The proportions of expected claims are not going to change, but that doesn't take into consideration all the premiums that have been collected to-date.

They are always going to show a liability. If there was just like one policyholder left, they would show a liability as to the future claims. I'm sorry if I'm not making it clear.

MR. SWITZER: No, one of the key exhibits in the filings is a seriatim policyholder by

policyholder projection out over 50 years into the future. That -- and as a little bit of a tangent to your question, but as has been mentioned, LTC is unique in that early loss ratios are expected to be very low; loss ratios in the future very high, 400, 500 percent.

So that cumulative accounting and the projection forward accounts for all those factors including the premium to get the actual so far, the future, kind of hone in on the very different what's actually happened and if we're in line with that low early loss ratios and high later years loss ratio to get to a lifetime loss ratio that is compliant with the law and that's reasonable and fair.

So, the factors you mentioned are figured in and are part of the projection going forward and are influenced by all the key assumptions mentioned - mortality, morbidity, voluntary lapse.

So, it's all rolled together in the model and it goes far into the future.

MR. BENJAMIN: Okay. Now, just one more question because I do believe I think everybody

offers an alternative to rate increases. Though it was pointed out 80 percent of the people do go for the higher amount.

If you accept a lower term, because I have lifetime, does that mean that there won't be rate increases in the future once you accept the lower rate? Is there a way that we can stabilize these premiums once and for all.

COMMISSIONER REDMER: My recollection was that Genworth offered that there is an option that will be available to eliminate future premium increases. Did I hear that correctly?

MS. ARLAND: On one policy. 7035.

COMMISSIONER REDMER: On 7035.

MS. ARLAND: Yes.

MR. BENJAMIN: Oh, just that one policy, sir?

COMMISSIONER REDMER: Yes. So, any others would have a temporary reprieve, and any possible increases in the future could potentially be mitigated with a different landing option at that time.

MR. BENJAMIN: Okay.

MR. SWITZER: I think to your lapse question, the goal is just to get it right. Obviously if you assume that it's two percent and you want as many people to get as many benefits, you just want to be accurate in that call so that you've accounted for it in the premiums for stability.

I know as you mentioned it can go both ways. If you undershoot or overshoot, it hurts the premium, but it's really just being as accurate as we can.

COMMISSIONER REDMER: And there naturally are hundreds if not thousands of very talented advisers that can help you and other consumers through that process.

MR. BENJAMIN: Okay. Thank you sir.

COMMISSIONER REDMER: Thank you. Mr. McLaughlin. Thanks for coming out.

MR. McLAUGHLIN: Thank you. Give me a second.

I actually did not send in my comments, but I have written two letters. Why there are two

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is I just received the 10-Q reporting. I'm a Genworth policyholder, and Genworth just released their 10-Q filings for the third quarter.

So, I was waiting to write my second letter or cover certain questions until that 10-Q came out.

I do have some copies. I don't know if you want to -- I am going to read this, and I can give you a copy.

COMMISSIONER REDMER: Sure, that's great.

MR. McLAUGHLIN: Because I have got a lot of numbers, and I don't want to get the numbers wrong.

So, first, thank you and the Maryland Insurance Commission staff for the attention you have brought to long-term care issues in this state. I have said in comments dated January 15th, October 15th and November 9, 2016, I will not restate those issues regarding Genworth Financial's request for rate increases. However, I believe they remain valid.

Today the paradigm in which Genworth is

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requesting a rate increase is very different from any previous point in their history. The Maryland Insurance Administration should not grant further premium increases to Genworth. Why? Genworth Financial is seeking approval for a buyout from China Oceanwide, a Chinese company.

China Oceanwide has offered to pay 2.7 billion dollars for Genworth or $5.43 per share. This will result in an increase in shareholder value of 1.8 billion dollars. 1.8 billion.

Insiders hold 28 percent of the stock. So insiders will have a windfall worth 521 million dollars.

The agreement also includes golden parachutes of 70 million in addition to the above stock increase for a list of Genworth executives.

Given the magnitude and significance of the deal, I respectfully suggest that the Maryland Insurance Administration take appropriate action on behalf of the 31,000 Maryland Genworth policyholders.

Before granting approval of the deal with

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China Oceanwide, you should require Genworth to fund all the projected shortfalls within the long-term care business, and moreover that there will be no further increases requested for policyholders.

There is a lot of cash flowing in this deal. Plenty to permanently shore up the business. All of the parties involved are profiting from the transaction, 1.8 billion for shareholders. 521 million for Genworth insiders. 70 million for Genworth executives. And zero relief for premium increases for policyholders. In fact they are asking for more.

The policyholders are counting on the Maryland Insurance Administration to take the new factors into account. That was my first letter.

The second covers different subjects. It refers to my first letter, and makes the point that I think based on this current offer China Oceanside (sic) it really sets a new -- a new point of view or it should set a new point of view for the Insurance Administration.

But I think there are also -- while

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Genworth/Oceanwide proposal is I believe a significant enough basis for your office to reject future and current increases, there are other questions that I see as worthy of further investigation by your staff.

No. 1, the November 3rd, 2017 10-Q states on Page 36 the following: Quote, our liability for policy and contract claims is reviewed quarterly, and we conduct a detailed review of our claim reserve assumptions for long-term care insurance business annually, typically during the third quarter of each year.

During the third quarter of 2017, we reviewed our assumptions and methodologies relating to claim reserves on our long-term care insurance business, but did not make any significant changes to the assumptions or the methodologies other than -- other than routine updates to investor returns and benefit utilization rates as we typically do each quarter.

These updates in the third quarter of 2017 did not have a significant impact on claim reserves, end quote.

Given this public statement to shareholders and the SEC, one has to question the need for further increases if after review, they found the reserves adequate.

No. 2, one of the primary stated influences of long-term care business are the yields on investments. I did not find any mention of investment yields in Genworth actuarial memorandum, the one they give to you dated August 2017.

Given the growth in the equity markets over the past eight years Genworth must be reaping the benefit and be in an improved financial position. Of course, this would not help their argument for higher premiums.

No. 3, on Page 94 of the November 3rd, '17 10-Q under ongoing priorities, they state, quote, stabilizing our long-term care business continues to be our long-term goal. We will continue through our multi year long-term care insurance rate action increasing premiums and/or benefit modifications on our legacy long-term care

insurance policies, are critical to our ability to increase capital levels needed to support the business.

So, their only stated action to improve long-term care business is to keep asking for rate increases. There is no mention of trying to reduce operating costs as most businesses would do, and there is no mention of managing their investments to improve yields. Why? It is just easier to get increases granted.

No. 4, in Genworth's proxy statement -- I'm getting dry. Is there any --

COMMISSIONER REDMER: Here is a water.

MR. McLAUGHLIN: No. 4, in Genworth's proxy statement dated November 3rd, 2017, they outline their, quote, key financial objectives, end quote.

Their target to increase, quote, gross incremental premiums approved for long-term care in force rate actions, end quote, for 2016 was 160 million dollars. That was the corporate target for getting increases. They exceeded their target by 44

million dollars, for a total of 204 million dollars.

So, they were actually granted larger premium increases for the year than they expected. The reported 2016 compensation report which was the amended 10-K/A dated April 3rd, 2017, for the five highest paid executives was based in part on their achieving the key financial objectives, including the target above.

So, while Genworth continues to ask for higher premiums, the top five executives paid themselves 25.75 million dollars for their total 2016 compensation in part because they successfully raised premiums.

To continue this cycle of financially rewarding individuals for raising premiums should be troubling to the Maryland Insurance Administration.

Commissioner Redmer, thank you for protecting the interests of policyholders.

COMMISSIONER REDMER: Mr. McLaughlin, thank you. I appreciate you making the trip. Any questions?

MR. McLAUGHLIN: I have one other

comment.

COMMISSIONER REDMER: Sure.

MR. McLAUGHLIN: I hear mention of the return on investments only being referred to as interest rates. But it's my understanding that insurance companies invest in more than just pure government-issued interest.

And given the performance of the stock market, I got to believe that over the last -- at least since 2008, that their returns on investments have to be significantly higher than they were in the first ten years of at least my policy.

So, I never hear any mention of that. And I don't know whether they are required to give you that information.

COMMISSIONER REDMER: So, we do a very thorough financial analysis, and I'm going to hold your question because we have got everybody in the room except for our financial analyst. So, we will get you the detail on the percentage of equities that are in their portfolios.

MR. McLAUGHLIN: And then I have one

other comment. On the nonforfeiture agreement, I think almost every one of the companies today said they offer, I find that extremely unfair. Because basically if you've been paying into, let's say, a policy for ten years, what they are offering you is that when you need -- when you need the benefits of that policy, let's say in 15 or 20 years, they are going to basically give you back the money that you paid.

So, if somebody -- if I said to you loan me $50,000 and in 20 years, I will give you $50,000 back, I don't think you'd take that deal. And I don't think it's fair.

I don't know how you can consider it fair given that there is no -- no interest whatsoever and they have the value of the money for 20 years.

COMMISSIONER REDMER: Thank you. I appreciate that.

MR. SWITZER: One question, please.

MR. McLAUGHLIN: Yes.

MR. SWITZER: I will go look but when you mentioned the proxy statement, 2016, 160 million

corporate target, and actual was 204 --

MR. McLAUGHLIN: Yes.

MR. SWITZER: -- that was enterprise-wide for Genworth?

MR. McLAUGHLIN: Long-term care.

MR. SWITZER: Just long-term care.

MR. McLAUGHLIN: Just long-term care.

MR. SWITZER: Thank you.

COMMISSIONER REDMER: Thank you, Mr. McLaughlin. And that is all of the folks that we have signed up. Is there anybody else that would care to weigh in before we go?

MS. FITZGERALD: Hi, I'm one of the call-ins.

COMMISSIONER REDMER: Yes, go ahead.

MS. FITZGERALD: Hi, my name is Susan Fitzgerald. I have two Brighthouse policies that were originally Travelers. I was a financial advisor for almost 30 years. I sold myself the policies.

My premiums and my husband's premiums, we're expecting to get a notice of a increase any

day now, have more than doubled in the 17 years that we've had the policy.

I have also been very active selling living benefit annuities in my time as a financial advisor. And I know that those annuities that carry guaranteed income benefits have also risk to the insurance companies. But those insurance companies hedge that risk. They didn't come back to the consumer if they were wrong and the markets were bad and they wound up having to pay lifetime income that was way in excess of what the performance of the portfolio is.

I would like to know kind of like with other persons just saying, we know that they invest in the stock market. Why are they not hedging this risk? Why is the risk on the consumer?

COMMISSIONER REDMER: Anybody care to -- so, again we don't have our financial people in the room, but we are happy to give you that information. Let me give you my e-mail address. And if you could send it to me, we will --

MS. FITZGERALD: I mean, I've already

corresponded with Maryland about this rate increase, because as they said, I'm double -- more than doubled my premiums. Now I had 15 percent increase two years ago as well.

There is no guaranty that there won't be another request. In fact I found Brighthouse's letters to me to be a little snotty, you know, pointing out that I got the spousal 25 percent discount as well as the 5 percent sponsor discount.

Well, you know what, that was my commission that I waived. I got that discount because that was my commission.

I feel like all we have looking out for us is the insurance commission. And if they keep coming back asking for increases, which they will do, as often as they can for as high as they can because they made a mistake, we're the ones who pay for it.

I thank god that I am lucky enough that I can afford to pay premiums. But many clients who I sold these kind of policies to -- particularly Genworth by the way, not so much Met Life, formerly

Travelers. And for so many years I have had to talk them into keeping their policies and find a way to pay those premiums because I knew it was in their best interest.

I don't even remember, I think it was 2005 when Governor Ehrlich was the governor, that he wrote a letter saying that people should buy private insurance. Don't depend on the State. Don't depend on Medicaid to pay for their long-term care.

We actively sold these policies thinking that we were doing the right thing for the consumers, only to find out that they are getting squeezed.

And, so -- and I think you're finding that keeping the policy -- somebody said, I forget which carrier, that they are keeping policies and not forfeiting them as much as they thought they would. I think they's love you to forfeit them and keep the premiums that you paid in the course.

It's just so wrong. And we're depending on you, Commissioner, to look after not just the -- all these other people who I sold all these policies

to who are getting fleeced by these insurance companies who should have made a lot of money in the stock market and who should have been hedging this risk.

COMMISSIONER REDMER: Yep. Susan, let me give you my e-mail address.

MS. FITZGERALD: Shoot.

COMMISSIONER REDMER: It is Al -- or anybody else out there, Al dot R-E-D-M --

MS. FITZGERALD: M-E-R. Got it.

COMMISSIONER REDMER: -- E-R at Maryland, and you need to spell out the word Maryland, dot gov, G-O-V.

MS. FITZGERALD: Yes. Thanks, Commissioner, I will write you an e-mail about it.

COMMISSIONER REDMER: Okay, thank you. Anybody else on the phone with comments?

MR. KAUL: Roger Kaul.

COMMISSIONER REDMER: Hi, Roger. Go ahead.

MR. KAUL: Yes, the last name is spelled K-A-U-L. This is a point with Genworth. They

listed a whole series of policy groups, I guess. And I looked at my paperwork and no where does it have anything like that. So, I have no idea which policy I'm in.

And I have a UCG number that they give me. And, so, I would like to suggest that when you send out your premiums that, you know, your statement that you include what policy we're in and then how the rate increases compared to other policies.

COMMISSIONER REDMER: Okay. I appreciate that. And were you able to get my e-mail address when I just gave it?

MR. KAUL: Yes, I did.

COMMISSIONER REDMER: Okay. If you will shoot me an e-mail and include your policy information, we will try to compare that to see if your policy would be subject to any of these increases or not.

MR. KAUL: Okay. Well, I don't need you to do that. I think Genworth should do that. That's my point.

COMMISSIONER REDMER: Well, if you contact Genworth, I'm sure they will check as well.

MR. KAUL: Okay. But I will shoot you an e-mail. I'm not trying to short you. Sorry.

COMMISSIONER REDMER: That's all right. Not at all. I appreciate the feedback.

Any other comments out there?

MS. FITZGERALD: Commissioner Redmer, this is Susan again. May I just say one more thing?

COMMISSIONER REDMER: Sure.

MS. FITZGERALD: I too like the other gentleman, Benjamin, have a lifetime policy. I took it out young. I don't need a lifetime policy at this stage to tell you the truth. Let me call them and see what it would be in a premium decrease if I changed it to, say, ten years.

They don't offer a 10 year. They offer a five year. And, so, my premium is up to $1,750 at this point. The five year policy is $1,309. That's a 25 percent decrease for a whole lot less coverage. Is it fair? No, I don't think so. Why are they not even offering a 10-year option?

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COMMISSIONER REDMER: Good point.

MS. FITZGERALD: That's for Brighthouse if they want to answer.

COMMISSIONER REDMER: Yeah, the folks in the room are not the product development folks. Sadly. But they got the question.

Any other comments on the phone? All right. Hearing none, I will come back to the room. Any final comments?

MR. FRAIN: Can I address Susan's last question?

COMMISSIONER REDMER: Sure.

MR. FRAIN: So, the difference between a -- I have not had an offer from Brighthouse, but the difference between lifetime and 10-year benefit period in terms of premium would be pretty small. Not that many claims last beyond ten years.

COMMISSIONER REDMER: Okay.

MR. FRAIN: If it lasts 10 years, it's the same. And I think whatever the difference you gave, like I forget what it was, between lifetime and five year, that same math holds. A lot of

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claims -- most claims don't last beyond five years. It's a lot of risk but there are some people who use it a lot but don't need to. But on average not that many people go beyond five years.

COMMISSIONER REDMER: Interesting.

Anybody else?

All right. Once again thank you for coming. Those on the phone thank you for being here. I appreciate the participation, and we will see you at the next one. Thank you.

(Whereupon at 2:21 the hearing concluded.)

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STATE OF MARYLAND

COUNTY OF HOWARD SS:

I, Susan Farrell Smith, Notary Public of the State of Maryland, do hereby certify that above-captioned matter came on before me at the time and place herein set out.

I further certify that the proceeding was recorded stenographically by me and that this transcript is a true record of the proceedings.

I further certify that I am not of counsel to any of the parties, nor an employee of counsel, nor related to any of the parties, nor in any way interested in the outcome of this action.

As witness my hand and notarial seal this 19th day of November, 2017.

____

Susan Farrell Smith

Notary Public

(My Commission expires February 8, 2020)

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