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CHAPTER _____

1 AN ACT concerning

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Long-Term Care Insurance - Premium Rates

3 FOR the purpose of requiring the Maryland Insurance Commissioner to establish by 4 regulation, and post provide information on the Maryland Insurance Administration's Web site, site describing certain factors and a certain process $\mathbf{5}$ 6 relating to premium rates for policies or contracts of long-term care insurance 7 certain rate tables to be used by certain carriers that offer, issue, or deliver policies, 8 contracts, or certificates of long-term care insurance in the State to determine 9 certain premium rates; prohibiting a carrier from imposing certain premium rate increases under certain circumstances; prohibiting a carrier from charging a 10 premium to an insured or changing a premium before the applicable premium rate 11 12or premium rate change is filed with and approved by the Commissioner; requiring any applicable premium rate or premium rate change of a carrier to be filed with the 1314 Commissioner in accordance with certain regulations; requiring the Commissioner 15to disapprove or modify a proposed premium rate filing under certain circumstances; 16 requiring the Commissioner to consider, to the extent appropriate, certain factors in 17determining whether to disapprove or modify a premium rate filing; requiring each 18premium rate filing and certain supporting information to be open to public 19inspection; authorizing a carrier to request a certain finding by the Commissioner; 20authorizing a person to obtain copies of a premium rate filing and any supporting 21information under certain circumstances; authorizing the Commissioner to require

EXPLANATION: CAPITALS INDICATE MATTER ADDED TO EXISTING LAW.

[Brackets] indicate matter deleted from existing law.

Underlining indicates amendments to bill.

Strike out indicates matter stricken from the bill by amendment or deleted from the law by amendment.



1 a carrier to demonstrate that, based on certain analysis and assumptions, its $\mathbf{2}$ premium rates for a policy or contract of long-term care insurance are not 3 inadequate, unfairly discriminatory, or excessive in relation to benefits, 4 notwithstanding the Commissioner's previous approval of the carrier's premium rate filing: requiring the Commissioner to issue a certain order to a carrier under certain $\mathbf{5}$ 6 circumstances; requiring the Commissioner to hold a hearing before issuing a certain 7 order and to provide written notice of the hearing; providing that an order does not 8 affect a certain policy, contract, or certificate of long-term care insurance; requiring 9 the Commissioner, at certain intervals and with a certain exception, to hold a public 10 hearing for a certain purpose; requiring the Commissioner to provide certain individuals an opportunity to testify at certain hearings, subject to a certain 11 limitation; providing that each decision or finding of the Commissioner about certain 1213 premium rates is subject to judicial review; requiring a carrier to provide a certain 14notice to its insureds each year: requiring a carrier to post a certain notice on the 15earrier's Web site; requiring an insurance producer who offers or sells policies or 16 contracts of long-term care insurance in the State to advise certain individuals about 17the availability and benefits of certain policies that qualify under the Qualified State 18 Long-Term Care Insurance Partnership; requiring the insurance producer to 19 maintain certain statements in a certain location and make the statements available to the Commissioner for inspection provide a certain statement to each applicant for 20long-term care insurance; authorizing the Commissioner to take certain actions for 2122a violation of a certain provision of this Act; requiring a carrier to provide an insured 23a certain nonforfeiture benefit under certain circumstances requiring the 24Administration to make a certain assessment and a certain determination relating 25to nonforfeiture benefits and to report on its assessment and determination to certain 26legislative committees on or before a certain date; defining certain terms; providing 27for the application of this Act; and generally relating to premium rates for long-term 28care insurance.

29 BY adding to

- 30 Article Insurance
- 31Section 11–701 through 11–704 to be under the new subtitle "Subtitle 7. Long–Term32Care Insurance Premium Rate Review"; and 18–103(d) and 18–116.132Amostated Code of Member d
- 33 Annotated Code of Maryland
- 34 (2011 Replacement Volume and 2016 Supplement)
- 35 SECTION 1. BE IT ENACTED BY THE GENERAL ASSEMBLY OF MARYLAND,
 36 That the Laws of Maryland read as follows:

37	Article – Insurance
38	SUBTITLE 7. LONG-TERM CARE INSURANCE PREMIUM RATE REVIEW.
39	11-701.
10	

40 (A) IN THIS SUBTITLE THE FOLLOWING WORDS HAVE THE MEANINGS 41 INDICATED.

1 (B) "CARRIER" MEANS AN INSURER, A NONPROFIT HEALTH SERVICE PLAN, 2 A HEALTH MAINTENANCE ORGANIZATION, OR A PREFERRED PROVIDER 3 ORGANIZATION THAT OFFERS, ISSUES, OR DELIVERS A POLICY, CONTRACT, OR 4 CERTIFICATE OF LONG-TERM CARE INSURANCE IN THE STATE.

5 (C) "CERTIFICATE" HAS THE MEANING STATED IN § 18–101 OF THIS 6 ARTICLE.

7 (D) "LONG-TERM CARE INSURANCE" HAS THE MEANING STATED IN § 8 18–101 OF THIS ARTICLE.

9 **11–702.**

10(A)THE COMMISSIONER SHALL ESTABLISH BY REGULATION A STANDARD11MORTALITY RATE TABLE AND A STANDARD MORBIDITY RATE TABLE A CARRIER12MUST USE TO DETERMINE PREMIUM RATES FOR POLICIES OR CONTRACTS OF13LONG-TERM CARE INSURANCE.

14(B)THE COMMISSIONER SHALL POST THE STANDARD RATE TABLES15ESTABLISHED UNDER SUBSECTION (A) OF THIS SECTION ON THE ADMINISTRATION'S16WEB SITE.

17 (C) A CARRIER MAY NOT:

18 (1) WITHIN ANY 10-YEAR PERIOD OF COVERAGE UNDER A POLICY OR
 19 CONTRACT OF LONG-TERM CARE INSURANCE, INCREASE THE PREMIUM RATE FOR
 20 THE POLICY OR CONTRACT BY MORE THAN 50% OF THE INITIAL PREMIUM RATE FOR
 21 THAT PERIOD; OR

22 (2) IMPOSE A PREMIUM RATE INCREASE FOR A POLICY OR CONTRACT 23 OF LONG TERM CARE INSURANCE THAT EXCEEDS 15% WITHIN A 12 MONTH PERIOD.

24The Commissioner shall provide information on the25Administration's Web site describing:

26(1)THE FACTORS THAT CARRIERS USE TO DETERMINE PREMIUM27RATES FOR POLICIES OR CONTRACTS OF LONG-TERM CARE INSURANCE; AND

28(2)THE PROCESS AND FACTORS THAT THE ADMINISTRATION USES IN29REVIEWING AND APPROVING PREMIUM RATES FOR POLICIES OR CONTRACTS OF30LONG-TERM CARE INSURANCE.

31 **11–703.**

1 (A) A CARRIER MAY NOT CHARGE A PREMIUM TO AN INSURED UNDER A 2 POLICY OR CONTRACT OF LONG-TERM CARE INSURANCE BEFORE THE APPLICABLE 3 PREMIUM RATE IS FILED WITH AND APPROVED BY THE COMMISSIONER.

4 (B) A CARRIER MAY NOT CHANGE THE PREMIUM CHARGED TO AN INSURED 5 UNDER A POLICY OR CONTRACT OF LONG-TERM CARE INSURANCE UNTIL THE 6 APPLICABLE PREMIUM RATE CHANGE HAS BEEN FILED WITH AND APPROVED BY THE 7 COMMISSIONER.

8 (C) (1) ANY APPLICABLE PREMIUM RATE OR PREMIUM RATE CHANGE OF 9 A CARRIER SHALL BE FILED WITH THE COMMISSIONER IN ACCORDANCE WITH 10 REGULATIONS ADOPTED BY THE COMMISSIONER.

11 (2) (I) THE COMMISSIONER SHALL DISAPPROVE OR MODIFY A 12 PROPOSED PREMIUM RATE FILING IF THE PROPOSED PREMIUM RATES APPEAR, 13 BASED ON STATISTICAL ACTUARIAL ANALYSIS AND REASONABLE ASSUMPTIONS, TO 14 BE INADEQUATE, UNFAIRLY DISCRIMINATORY, OR EXCESSIVE IN RELATION TO 15 BENEFITS.

16 (II) IN DETERMINING WHETHER TO DISAPPROVE OR MODIFY A 17 PREMIUM RATE FILING OF A CARRIER, THE COMMISSIONER SHALL CONSIDER, TO 18 THE EXTENT APPROPRIATE:

191.PAST AND PROSPECTIVE LOSS EXPERIENCE IN AND20OUTSIDE THE STATE;

21 **2.** UNDERWRITING PRACTICE AND JUDGMENT;

22 **3.** A REASONABLE MARGIN FOR RESERVE NEEDS;

234. PASTANDPROSPECTIVEEXPENSES,BOTH24COUNTRYWIDE AND THOSE SPECIFICALLY APPLICABLE TO THE STATE; AND

255.ANY OTHER RELEVANT FACTORS IN AND OUTSIDE THE26STATE.

27 (3) (I) EACH PREMIUM RATE FILING AND ANY SUPPORTING 28 INFORMATION FILED UNDER THIS SUBTITLE SHALL BE OPEN TO PUBLIC 29 INSPECTION AS SOON AS FILED.

30(II) A CARRIER MAY REQUEST A FINDING BY THE31COMMISSIONER THAT CERTAIN INFORMATION FILED WITH THE COMMISSIONER BE

1 CONSIDERED CONFIDENTIAL COMMERCIAL INFORMATION UNDER § 4–335 OF THE 2 GENERAL PROVISIONS ARTICLE AND NOT SUBJECT TO PUBLIC INSPECTION.

3 (III) ON REQUEST AND PAYMENT OF A REASONABLE FEE, A
4 PERSON MAY OBTAIN COPIES OF A PREMIUM RATE FILING AND ANY SUPPORTING
5 INFORMATION.

6 (D) NOTWITHSTANDING THE COMMISSIONER'S PREVIOUS APPROVAL OF A
 7 PREMIUM RATE FILING OF A CARRIER, THE COMMISSIONER, AT ANY TIME, MAY
 8 REQUIRE THE CARRIER TO DEMONSTRATE THAT, BASED ON STATISTICAL ANALYSIS
 9 AND REASONABLE ASSUMPTIONS AND CONSIDERING THE FACTORS LISTED IN
 10 SUBSECTION (C)(2) OF THIS SECTION, ITS PREMIUM RATES FOR A POLICY OR
 11 CONTRACT OF LONG-TERM CARE INSURANCE ARE NOT INADEQUATE, UNFAIRLY
 12 DISCRIMINATORY, OR EXCESSIVE IN RELATION TO BENEFITS.

(E) (1) IF, AFTER THE APPLICABLE REVIEW PERIOD, THE COMMISSIONER
 FINDS THAT THE PREMIUM RATES IN A PREMIUM RATE FILING OF A CARRIER ARE
 INADEQUATE, UNFAIRLY DISCRIMINATORY, OR EXCESSIVE, AS DETERMINED UNDER
 SUBSECTION (C)(2) OF THIS SECTION, THE COMMISSIONER SHALL ISSUE TO THE
 CARRIER AN ORDER THAT:

18(I)SPECIFIES THE REASONS WHY THE PREMIUM RATE FILING19IS INADEQUATE, UNFAIRLY DISCRIMINATORY, OR EXCESSIVE IN RELATION TO20BENEFITS; AND

21 (II) STATES WHEN, WITHIN A REASONABLE PERIOD OF TIME 22 AFTER THE ORDER, THE PREMIUM RATE FILING WILL NO LONGER BE EFFECTIVE.

23(2)(1)The Commissioner shall hold a hearing before24Issuing an order under paragraph (1) of this subsection.

25 (II) THE COMMISSIONER SHALL GIVE WRITTEN NOTICE OF THE 26 HEARING TO THE CARRIER AT LEAST 10 DAYS BEFORE THE HEARING.

27 (III) THE WRITTEN NOTICE SHALL SPECIFY THE MATTERS TO BE 28 CONSIDERED AT THE HEARING.

29 (3) AN ORDER ISSUED UNDER PARAGRAPH (1) OF THIS SUBSECTION
 30 DOES NOT AFFECT A POLICY, CONTRACT, OR CERTIFICATE OF LONG TERM CARE
 31 INSURANCE ISSUED OR DELIVERED BEFORE THE EXPIRATION OF THE PERIOD
 32 STATED IN THE ORDER.

33(F) (D)(1)ATEXCEPT AS PROVIDED IN PARAGRAPH(2) OF THIS34SUBSECTION, ATLEAST QUARTERLY, THE COMMISSIONER SHALL HOLD A PUBLIC

HEARING TO REVIEW LONG-TERM CARE INSURANCE RATE FILINGS RECEIVED BY
 THE COMMISSIONER DURING THE PRECEDING 3-MONTH PERIOD.

3(2)A PUBLIC HEARING IS NOT REQUIRED IF THE COMMISSIONER HAS4NOT RECEIVED A LONG-TERM CARE INSURANCE RATE FILING DURING THE5PRECEDING 3-MONTH PERIOD.

6 (G) (E) THE COMMISSIONER SHALL PROVIDE ALL INDIVIDUALS PRESENT 7 AT A PUBLIC HEARING HELD UNDER THIS SUBTITLE WHO WISH TO TESTIFY AN 8 OPPORTUNITY TO DO SO, BUT MAY LIMIT REPETITIOUS TESTIMONY.

9 (H) (F) EACH DECISION OR FINDING OF THE COMMISSIONER ABOUT 10 PREMIUM RATES MADE UNDER THIS SUBTITLE IS SUBJECT TO JUDICIAL REVIEW IN 11 ACCORDANCE WITH SUBTITLE 5 OF THIS TITLE.

12 **11–704.**

13(A)A CARRIER SHALL PROVIDE NOTICE TO ITS INSUREDS EACH YEAR, AND14POST A NOTICE ON THE CARRIER'S WEB SITE, THAT AN INSURED MAY ACCESS15INFORMATION ABOUT PROPOSED RATE INCREASES AND SUBMIT COMMENTS16REGARDING PROPOSED RATE INCREASES ON THE ADMINISTRATION'S WEB SITE.

(B) (1) AT LEAST 30 DAYS BEFORE A PUBLIC HEARING HELD IN
 ACCORDANCE WITH § 11–703(F) OF THIS SUBTIFLE, A CARRIER SHALL PROVIDE A
 WRITTEN NOTICE TO EACH INSURED OF THE FILING OF ANY PROPOSED PREMIUM
 INCREASE APPLICABLE TO THE INSURED.

21 (2) THE NOTICE REQUIRED UNDER PARAGRAPH (1) OF THIS 22 SUBSECTION SHALL INCLUDE:

23 (1) THE AMOUNT OR PERCENTAGE OF THE PROPOSED 24 PREMIUM INCREASE;

25 (II) THE DATE OF THE PUBLIC HEARING; AND

26 (III) A STATEMENT THAT THE INSURED MAY:

271.TESTIFY AT THE HEARING ON THE PROPOSED28PREMIUM INCREASE; OR

292.SUBMIT COMMENTS REGARDING THE PROPOSED30RATE INCREASE ON THE ADMINISTRATION'S WEB SITE.

1	(A) <u>A CARRIER SHALL PROVIDE A ONE-TIME WRITTEN NOTICE TO ITS</u>
2	INSUREDS THAT AN INSURED MAY ACCESS INFORMATION ABOUT PROPOSED RATE
3	INCREASES ON THE ADMINISTRATION'S WEB SITE.
4	(B) (1) FOR A POLICY OR CONTRACT ISSUED OR DELIVERED ON OR AFTER
5	JANUARY 1, 2018, THE ONE-TIME WRITTEN NOTICE SHALL BE PROVIDED AT THE
6	TIME THE POLICY OR CONTRACT IS ISSUED OR DELIVERED.
7	(2) FOR A POLICY OR CONTRACT ISSUED OR DELIVERED BEFORE
8	JANUARY 1, 2018, THE ONE-TIME WRITTEN NOTICE SHALL BE PROVIDED NO LATER
9	THAN THE NEXT POLICY OR CONTRACT ANNIVERSARY DATE AFTER JANUARY 1,
10	<u>2018.</u>
11	18–103.
12	(d) (1) An insurance producer who offers or sells policies or
12 13	(D) (1) AN INSURANCE PRODUCER WHO OFFERS OR SELLS POLICIES OR CONTRACTS OF LONG–TERM CARE INSURANCE IN THE STATE SHALL:
10	CONTRACTS OF LONG-TERM CARE INSURANCE IN THE STATE SHALL.
14	(1) ADVISE AN INDIVIDUAL CONSIDERING THE PURCHASE
15	OF A LONG-TERM CARE INSURANCE POLICY OR CONTRACT ABOUT THE
16	AVAILABILITY AND BENEFITS OF A POLICY THAT QUALIFIES UNDER THE QUALIFIED
17	STATE LONG–TERM CARE INSURANCE PARTNERSHIP ESTABLISHED UNDER TITLE
18	15, SUBTITLE 4 OF THE HEALTH – GENERAL ARTICLE;
10	
19	(II) MAINTAIN IN AN OFFICE THAT IS GENERALLY ACCESSIBLE
20	TO THE PUBLIC DURING NORMAL BUSINESS HOURS A DISCLOSURE STATEMENT
21	SIGNED BY THE INDIVIDUAL ATTESTING THAT THE INSURANCE PRODUCER HAS
22	ADVISED THE INDIVIDUAL IN ACCORDANCE WITH ITEM (I) OF THIS PARAGRAPH; AND
23	(2) PROVIDE A DISCLOSURE STATEMENT, APPROVED BY THE
24	COMMISSIONER, TO EACH APPLICANT FOR LONG-TERM CARE INSURANCE ABOUT
25	THE QUALIFIED STATE LONG-TERM CARE INSURANCE PARTNERSHIP; AND
26	(HI) (3) MAKE THE DISCLOSURE STATEMENTS STATEMENT
27	REQUIRED UNDER ITEM (H) (2) OF THIS SUBSECTION AVAILABLE TO THE
28	COMMISSIONER FOR INSPECTION.
29	(2) IF AN INSURANCE PRODUCER VIOLATES PARAGRAPH (1) OF THIS
30	SUBSECTION, THE COMMISSIONER MAY TAKE ANY ACTION AUTHORIZED UNDER §
31	10–126 OF THIS ARTICLE.
32	18-116.1.

1 A CARRIER SHALL PROVIDE AN INSURED WHO HAS MAINTAINED A CONTRACT $\mathbf{2}$ **OR POLICY OF LONG-TERM CARE INSURANCE THROUGH THE CARRIER FOR AT LEAST** 3 10 YEARS AND HAS PAID ALL PREMIUMS FOR THE CONTRACT OR POLICY IN FULL, A 4 **NONFORFEITURE BENEFIT THAT IS:** $\mathbf{5}$ (1) EQUIVALENT TO AT LEAST THE ACCUMULATED VALUE OF ALL 6 PREMIUMS PAID BY THE INSURED; AND 7(2) ADJUSTED FOR INFLATION BASED ON THE CONSUMER PRICE **INDEX FOR THE WASHINGTON-BALTIMORE METROPOLITAN AREA. AS COMPUTED** 8 BY THE U.S. DEPARTMENT OF LABOR'S BUREAU OF LABOR STATISTICS. 9 SECTION 2. AND BE IT FURTHER ENACTED. That the Maryland Insurance 10 11 Administration shall: 12assess the impact on long-term care insurance policyholders and (1)13carriers of the existing regulation requiring carriers to offer a nonforfeiture benefit; 14(2)based on its assessment and any other relevant factors, determine 15whether expanding the nonforfeiture benefit requirement may be desirable; and 16 (3)on or before January 1, 2018, report, in accordance with § 2–1246 of the 17State Government Article, on its assessment and determination to the Senate Finance Committee and the House Health and Government Operations Committee. 1819 SECTION 2-3. AND BE IT FURTHER ENACTED, That this Act shall apply to all: 20(1)policies, contracts, or certificates of long-term care insurance issued, 21delivered, or renewed in effect in the State on or after the effective date of this Act; and 22rate filings submitted to the Maryland Insurance Commissioner on or (2)after the effective date of this Act. 23SECTION 3. 4. AND BE IT FURTHER ENACTED, That this Act shall take effect 2425October 1, 2017.

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