SERFF Tracking #: LFCR-133399593 State Tracking #: LFCR-133399593

Company Tracking #: VA 2022 LTCINLM AL2100

State: Virginia Filing Company: Assurity Life Insurance Company

TOI/Sub-TOI: LTC Annual Rate Report/LTCINLM

Product Name: VA 2022 Assurity Annual Rate Report

Project Name/Number: /

### Filing at a Glance

Company: Assurity Life Insurance Company
Product Name: VA 2022 Assurity Annual Rate Report

State: Virginia

TOI: LTC Annual Rate Report

Sub-TOI: LTCINLM

Filing Type: LTC Annual Rate Report

Date Submitted: 09/14/2022

SERFF Tr Num: LFCR-133399593

SERFF Status: Closed-Filed

State Tr Num: LFCR-133399593

State Status: Filed

Co Tr Num: VA 2022 LTCINLM AL2100

Effective On Approval

Date Requested:

Author(s): Scarlett Nazari, Anoush Chngidakyan, Dianne Bowdish

Reviewer(s): Colleen Moore (primary)

Disposition Date: 11/28/2022

Disposition Status: Filed

Effective Date:

State: Virginia

TOI/Sub-TOI: LTC Annual Rate Report/LTCINLM

Product Name: VA 2022 Assurity Annual Rate Report

Project Name/Number: /

Filing Company: Assurity Life Insurance Company

Filing Status Changed: 11/28/2022 State Status Changed: 11/28/2022

Corresponding Filing Tracking Number: State TOI: LTC Annual Rate Report 2022

Created By: Dianne Bowdish

#### **General Information**

Project Name: Status of Filing in Domicile:
Project Number: Date Approved in Domicile:
Requested Filing Mode: Informational Domicile Status Comments:
Explanation for Combination/Other: Market Type: Individual
Submission Type: New Submission Individual Market Type:

Overall Rate Impact:

Deemer Date:

Submitted By: Dianne Bowdish

Filing Description:

September 14, 2022

Virginia Bureau of Insurance - SCC 1300 East Main Street Richmond, Virginia 23219

To Whom It May Concern:

Annual Rate Reporting under 14 VAC 5-200-125

In accordance with the annual rate-reporting requirement under 14 VAC 5-200-125, attached please find the requisite information on behalf of Assurity Life Insurance Company.

LifeCare Assurance Company is submitting this filing in its capacity as Third party administrator on behalf of Assurity Life Insurance Company. Attached is a letter authorizing LifeCare Assurance Company to submit the long-term care insurance filings on behalf of Assurity Life Insurance Company.

Please contact me if you have questions or require additional information.

Sincerely,

Xiaoyan Song, FSA, MAAA, FLMI, LTCP Consulting Actuary 800-366-5463 ext. 2232 Xiaoyan.Song@LifeCareAssurance.com

## **Company and Contact**

**Filing Contact Information** 

State: Virginia Filing Company: Assurity Life Insurance Company

TOI/Sub-TOI: LTC Annual Rate Report/LTCINLM

Product Name: VA 2022 Assurity Annual Rate Report

Project Name/Number: /

Loga Crossette-Thambiah, Regulatory loga.thambiah@lifecareassurance.com

Compliance Analyst 2 - Legislation

P.O. Box 4243 818-867-2323 [Phone] Woodland Hills, CA 91365-4243 818-867-6423 [FAX]

**Filing Company Information** 

(This filing was made by a third party - LCA01)

Assurity Life Insurance Company CoCode: 71439 State of Domicile: Nebraska

Long Term Care Administrative Group Code: Company Type:
Office Group Name: Assurity Security State ID Number:

P.O. Box 4243 Grp

Woodland Hills, CA 91365-4243 FEIN Number: 38-1843471

(818) 867-2450 ext. [Phone]

State: Virginia Filing Company: Assurity Life Insurance Company

TOI/Sub-TOI: LTC Annual Rate Report/LTCINLM

Product Name: VA 2022 Assurity Annual Rate Report

Project Name/Number: /

## **Filing Fees**

#### **State Fees**

Fee Required? No Retaliatory? No

Fee Explanation:

 SERFF Tracking #:
 LFCR-133399593
 State Tracking #:
 LFCR-133399593
 Company Tracking #:
 VA 2022 LTCINLM AL2100

State: Virginia Filing Company: Assurity Life Insurance Company

TOI/Sub-TOI: LTC Annual Rate Report/LTCINLM

Product Name: VA 2022 Assurity Annual Rate Report

Project Name/Number: /

## **Correspondence Summary**

**Dispositions** 

- Status	Created By	Created On	Date Submitted
Filed	Colleen Moore	11/28/2022	11/28/2022

State: Virginia Filing Company: Assurity Life Insurance Company

TOI/Sub-TOI: LTC Annual Rate Report/LTCINLM

Product Name: VA 2022 Assurity Annual Rate Report

Project Name/Number: /

## **Disposition**

Disposition Date: 11/28/2022

Effective Date: Status: Filed

Comment:

	Overall %	Overall %	Written Premium	<b>Number of Policy</b>	Written	Maximum %	Minimum %
Company	Indicated	Rate	Change for	<b>Holders Affected</b>	Premium for	Change	Change
Name:	Change:	Impact:	this Program:	for this Program:	this Program:	(where req'd):	(where req'd):
Assurity Life Insurance Company	0.000%	0.000%	\$0	11	\$22,796	0.000%	0.000%

Schedule	Schedule Item	Schedule Item Status	Public Access
Rate	LTCINLM	Filed	Yes
Supporting Document	Actuarial Memorandum	Received & Acknowledged	Yes
Supporting Document	Product Checklist	Received & Acknowledged	Yes
Supporting Document	LTC Annual Report Instructions	Received & Acknowledged	Yes
Supporting Document	TPA Authorization Letter	Received & Acknowledged	Yes

State: Virginia Filing Company: Assurity Life Insurance Company

TOI/Sub-TOI: LTC Annual Rate Report/LTCINLM

Product Name: VA 2022 Assurity Annual Rate Report

Project Name/Number: /

#### **Rate Information**

Rate data applies to filing.

Filing Method: SERFF
Rate Change Type: Neutral
Overall Percentage of Last Rate Revision: 0.000%
Effective Date of Last Rate Revision: 01/25/2021

Filing Method of Last Filing: SERFF

SERFF Tracking Number of Last Filing: LFCR-132948454

#### **Company Rate Information**

	Overall %	Overall %	Written Premium	Number of Policy	Written	Maximum %	Minimum %
Company	Indicated	Rate	Change for	<b>Holders Affected</b>	Premium for	Change	Change
Name:	Change:	Impact:	this Program:	for this Program:	this Program:	(where req'd):	(where req'd):
Assurity Life Insurance Company	0.000%	0.000%	\$0	11	\$22,796	0.000%	0.000%

State: Virginia Filing Company: Assurity Life Insurance Company

TOI/Sub-TOI: LTC Annual Rate Report/LTCINLM

Product Name: VA 2022 Assurity Annual Rate Report

Project Name/Number: /

### Rate/Rule Schedule

	tem Io.	Schedule Item Status	Document Name	Affected Form Numbers (Separated with commas)	Rate Action	Rate Action Information	Attachments
1			LTCINLM	AL2100P-VA, AL2100R-ROP, AL2100R-SBN-VA, AL2100R- CBI, AL2100R-SBI, AL2100R- IND-VA, AL2100R-F-IND-VA, AL2100R-MTH, AL2100R- ROB, AL2100R-WOP-VA, AL2100R-FDC, AL2100R-SBA AL2100R-OPS		Previous State Filing Number: LFCR-132948454 Rate Action Other Explanation: Annual Rate Certification filing	LTCINLM.pdf,

## Annual Rate Report for Long-Term Care Insurance [Policy/Policies] Issued On or After October 1, 2003 that [is/are] No Longer Marketed

14 VAC 5-200-125 A 1 a. (2)

Reporting Period 1/1/2021 – 12/31/2021

Company Name Assurity Life Insurance Company

Company NAIC Number 71439

Form Number(s) Forms: AL2100P-VA, AL2100R-ROP, AL2100R-SBN-VA, AL2100R-CBI,

AL2100R-SBI, AL2100R-IND-VA, AL2100R-F-IND-VA, AL2100R-MTH,

AL2100R-ROB, AL2100R-WOP-VA, AL2100R-FDC, AL2100R-SBA, AL2100R-

OPS

Issue Date(s) 10/28/2009 – 5/13/2011

SERFF Filing Number LFCR-133399593

Prior SERFF Filing Number(s) LFCR-132948454

I, Xiaoyan Song, am a member of the American Academy of Actuaries. I meet the Academy's qualification standards for rendering this opinion and am familiar with the requirements for filing and reviewing long-term care insurance premiums.

In my opinion, the premium rate schedule is not sufficient to cover anticipated costs under best estimate assumptions and the premium rate schedule may not be reasonably expected to be sustainable over the life of the policy with no future premium increases anticipated. Based on my review of recent experience of the policy involved, in my opinion, a rate action is necessary as a result of this analysis.

We are now preparing a rate increase filing for this block and plan to submit it in the first quarter of 2023.

In forming my opinion, I have used actuarial assumptions and actuarial methods and such tests of the actuarial calculations as I considered necessary. The details of my review are included in the attached actuarial memorandum that provides the historical experience and the expected future and lifetime loss ratios based on the current best-estimate assumptions; and a detailed description and actuarial support for each assumption used in the projections.

Xiaoyan Song, FSA, MAAA, FLMI, LTCP

Post Office Box 4243 (818) 867-2232 September 14, 2021

Note:

If margins are sufficient but not equal to or greater than those originally filed, the actuary should amend this statement accordingly, describing the basis for the revised margin levels.

LTCINLM 09/22

 SERFF Tracking #:
 LFCR-133399593
 State Tracking #:
 LFCR-133399593
 Company Tracking #:
 VA 2022 LTCINLM AL2100

Filing Company:

Assurity Life Insurance Company

TOI/Sub-TOI: LTC Annual Rate Report/LTCINLM

Product Name: VA 2022 Assurity Annual Rate Report

Virginia

Project Name/Number: /

State:

## **Supporting Document Schedules**

Satisfied - Item:	Actuarial Memorandum
Comments:	
Attachment(s):	Assurity VA ARC Actuarial Memo VA 2021 w Attach.pdf
Item Status:	Received & Acknowledged
Status Date:	11/28/2022
Bypassed - Item:	Product Checklist
Bypass Reason:	N/A
Attachment(s):	
Item Status:	Received & Acknowledged
Status Date:	11/28/2022
Satisfied - Item:	LTC Annual Report Instructions
Comments:	See report submitted in Rate/Rule Schedule
Attachment(s):	·
Item Status:	Received & Acknowledged
Status Date:	11/28/2022
Satisfied - Item:	TPA Authorization Letter
Comments:	
Attachment(s):	Assurity LifeCare 2022 Authorization.pdf
Item Status:	Received & Acknowledged
Status Date:	11/28/2022

Home Office: Lincoln, Nebraska Company NAIC No. 71439 Administrative Office: Post Office Box 4243 Woodland Hills, California 91365-4243

#### **Actuarial Memorandum**

September 2022

**Long Term Care Insurance Policy:** Form AL2100P-VA **Full Return of Premium Rider:** Form AL2100R-ROP **Shortened Benefit Period Nonforfeiture Rider:** Form AL2100R-SBN-VA **Compound Benefit Increase Rider:** Form AL2100R-CBI **Simple Benefit Increase Rider:** Form AL2100R-SBI Facility Care and Home and Community Based Care Indemnity Benefit Rider: Form AL2100R-IND-VA Facility Care Only Indemnity Benefit Rider: Form AL2100R-F-IND-VA Monthly Home and Community Based Care Benefit Rider: Form AL2100R-MTH **Restoration of Benefits Rider:** Form AL2100R-ROB Home and Community Based Care Waiver of Premium Benefit Rider: Form AL2100R-WOP-VA First Day Home and Community Based Care Benefit Rider: Form AL2100R-FDC **Shared Benefit Amount Rider:** Form AL2100R-SBA Form AL2100R-OPS **Optional Policy Surrender Rider:** 

These form and riders were issued in Virginia from 2009 through 2011. The above form and riders are no longer being marketed.

Home Office: Lincoln, Nebraska Company NAIC No. 71439

Administrative Office: Post Office Box 4243 Woodland Hills, California 91365-4243

**Actuarial Memorandum** 

September 2022

1. Purpose of Filing

This actuarial memorandum has been prepared for the purpose of documenting that the rates meet the requirements

in the statutes of Virginia.

2. Premiums

Premiums are unisex, level, lifetime or limited pay. Premiums vary by issue age, initial daily benefit, benefit period,

elimination period, risk class, individual vs. joint coverage, and the riders selected.

Please see attachment B for policy form AL2100P-VA current premium rates and factors.

3. Description of Benefits

BASE POLICY BENEFITS PER (\$10.00) UNIT OF COVERAGE

a. Coverage Outside the United States – Benefits are payable for Qualified Long Term Care Services received

outside the United States or its territories, or Canada for up to 30 days per calendar year. Actual expenses

incurred up to \$10 per day for covered services. Benefits paid are deducted from the Benefit Amount.

b. Facility Care Benefit (FC) - Actual expenses incurred up to \$10.00 per day for FC (qualified long term care

services, including skilled, intermediate and custodial care) while confined in a qualified Nursing Facility or

Assisted Living Facility and maintenance or personal care performed in an Assisted Living Facility. Benefits

paid are deducted from the Benefit Amount.

c. Facility Bed Reservation Benefit - Actual FC expenses incurred up to \$10.00 per day to reserve a bed in a

Nursing Facility or Assisted Living Facility during a temporary absence from the facility. Benefit is payable

up to 30 days per calendar year. Benefits paid are deducted from the Benefit Amount.

Assurity Life Insurance Company

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Home Office: Lincoln, Nebraska Company NAIC No. 71439 Administrative Office: Post Office Box 4243 Woodland Hills, California 91365-4243

#### **Actuarial Memorandum**

September 2022

- d. HCBC This optional benefit must be selected by the insured to be covered under the policy. Actual expenses incurred up to \$10.00 per day. Coverage is provided for Home Health Care (services performed through a home health care agency or independent home health caregiver, including care by a professional nurse, therapist, dietician or home health aide, and homemaker services) Adult Day Care, Hospice Care and Caregiver Training. The Caregiver Training benefit payable is a maximum lifetime benefit equal to three times the daily benefit selected. Benefits paid are deducted from the Benefit Amount.
- e. Respite Care Actual expenses incurred up to \$10.00 per day for FC or HCBC (if covered) payable as short term care to relieve primary caregiver. Benefit is payable up to 30 days per calendar year. Benefits paid are deducted from the Benefit Amount.
- f. Alternative Plan of Care Benefit (APC) Provides for qualified long term care services not specifically shown as being available under the policy for chronically ill individual, if agreed upon by the insured, licensed health care practitioner and the company, which may include equipment purchases or rentals; permanent or temporary modifications to the insured's residence (such as ramps or rails) or care services not normally covered under the HCBC. The APC amount agreed upon, divided by the daily benefit selected, equals the number of subsequent days for which additional benefits for HCBC (if selected) and FC will not be paid under the policy. The APC is not available for providing HCBC on policies providing FC benefits only.
- g. Optional Personal Care Advisor, accessible through toll-free telephone number, is available to insured to provide assistance with any questions about their coverage. No benefits are deducted from the Benefit Amount for this service.
- h. Optional Care Coordination, if after speaking with the Personal Care Advisor, the insured still requests additional care coordination, the company will arrange for a care coordinator to contact the insured. If the insured wishes, an RN will be available to assist with assessment and coordination of appropriate care and services. No benefits are deducted from the Benefit Amount for this service.
- i. Waiver of Premium is provided after confinement in a Nursing Facility or an Assisted Living Facility for a period of 90 days. Premiums already paid, but not earned will be refunded on a pro-rata basis.

Home Office: Lincoln, Nebraska Company NAIC No. 71439 Administrative Office: Post Office Box 4243 Woodland Hills, California 91365-4243

#### **Actuarial Memorandum**

September 2022

#### **OPTIONAL BENEFIT RIDERS**

- a. Full Return of Premium Rider (ROP) Upon the insured's death (second-to-die in the case of joint coverage) while the policy is in force the total of premiums paid, with no deduction for benefits paid, will be paid to the beneficiary. Not available with Optional Policy Surrender Rider.
- b. Shortened Benefit Period Nonforfeiture Rider (SBN) This rider provides the nonforfeiture credit as adopted by the NAIC. If the policy has been in force for at least three years and lapses due to nonpayment of premiums, coverage will continue and benefits will be payable based on the daily benefits in effect on the date of lapse. No further benefit increases will occur under any Benefit Increase Rider, if attached to the policy. The Benefit Amount becomes equal to the greater of: (a) the total of premiums paid for the policy and riders; or (b) 30 times the daily benefit in effect on the date of lapse. Any benefits paid after lapse will be deducted from this new Benefit Amount. Not available with Optional Policy Surrender Rider.
- c. Compound Benefit Increase Rider (CBI) This rider increases the daily benefits and the remaining Benefit Amount by 5%, compounded annually. Increases are made regardless of claims status. Policy premiums may be payable on either the Standard Premium Payment or Step Rated Premium Payment Options. Step Rated Premium Payment Option is not available with the 10-pay or 20-pay premium options.
- d. Simple Benefit Increase Rider (SBI) This rider increases the daily benefits and the Benefit Amount annually by 5% of the dollar amounts originally issued. The remaining Benefit Amount will be increased by the same proportion as the increase in daily benefits. Increases are made regardless of claims status.
- e. Facility Care and HCBC Indemnity Benefit Rider (IND) This rider provides that all benefits covered under the policy will be payable on an indemnity basis at the full daily benefit selected, regardless of actual expenses incurred. This rider is not available with either the Monthly HCBC Benefit Rider or the Facility Care Only Indemnity Benefit Rider.
- f. Facility Care Only Indemnity Benefit Rider (F-IND) This rider provides that all benefits payable for Facility Care under the policy will be payable on an indemnity basis at the full daily benefit selected, regardless of actual expenses incurred. This rider is not available with the Facility Care and HCBC Indemnity Benefit Rider.

Home Office: Lincoln, Nebraska Company NAIC No. 71439 Administrative Office: Post Office Box 4243 Woodland Hills, California 91365-4243

#### **Actuarial Memorandum**

September 2022

- g. Monthly HCBC Benefit Rider (MTH) This rider provides that benefits payable for HCBC under the policy will be payable on a monthly basis rather than a daily basis, times the actual number of days in that calendar month. Not available with the Facility Care and HCBC Indemnity Benefit Rider or the Facility Care Only Indemnity Benefit Rider. One of the benefit increase riders must also be selected.
- h. Restoration of Benefits Rider (ROB) If the policy remains in force and claims paid during a single claim period have not exceeded the Benefit Amount and the insured is not eligible for the payment of benefits for 180 consecutive days, the Benefit Amount payable will be restored. Restoration of Benefits is subject to a maximum of twice the Benefit Amount selected. Not available with Lifetime Benefit Period nor Shared Benefit Amount Rider.
- HCBC Waiver of Premium Benefit Rider (WOP) This rider waives premiums after 90 service days of HCBC. Premiums paid but not earned will be refunded on a pro-rata basis. Not available with Facility Care Only coverage.
- j. First Day HCBC Benefit Rider (FDC) This rider allows benefits to be paid on the first day of a claim for HCBC, regardless if a 30, 90 or 180 day elimination period is selected for FC. Not available with Facility Care Only coverage.
- k. Shared Benefit Amount Rider (SBA) This rider provides a shared third benefit pool on joint policies available to either or both insureds who have exhausted their benefit pool under the base policy. Not available with Lifetime Benefit Period nor with the Restoration of Benefits Rider.
- 1. Optional Policy Surrender Rider (OPS) This rider provides a policy surrender option after the policy has been in force for at least five years, subject to prior claim payment or current claim considerations. The surrender value will be in the form of a lump sum payment equal to 80% of the total of premium paid for the policy and any attached riders, payable upon satisfactory evidence of insurability. If satisfactory evidence of insurability is not provided, the surrender value will be offered as a lifetime monthly income benefit, payable until the earlier of the insured's death (last death in the case of joint coverage) or 80% of the total of premiums paid for the policy and any attached riders has been paid. Not available with Full Return of Premium Rider nor with the Shortened Benefit Period Nonforfeiture Rider.

Home Office: Lincoln, Nebraska Company NAIC No. 71439 Administrative Office: Post Office Box 4243 Woodland Hills, California 91365-4243

#### **Actuarial Memorandum**

September 2022

#### 4. Marketing Method

This policy form was marketed by individual agents who primarily sell on an individual basis.

#### 5. Underwriting Description

This policy form was fully underwritten with the use of various underwriting tools in addition to the application, which may have included medical records, an attending physician's statement, telephone interview and/or face-to-face assessment.

#### 6. Renewability

These policies are guaranteed renewable for life.

#### 7. Actuarial Assumptions

#### a. Lapse

Attachment C includes a comparison of experience and best estimate lapse rates by duration.

#### b. Mortality

The current best estimate mortality assumptions are based on experience from the reinsurer's entire similarly underwritten and administered block of LTC policies. Attachment D2 includes a comparison of actual deaths and expected deaths based on best estimate assumptions for the combined reinsurer's block of LTC policies.

Original Pricing: 1994 GAM

Best estimate: Attained age mortality is 100% of the 2012 IAR Mortality Table

with G2 Scale mortality improvement, with duration selection factors varied by joint vs. single, shown in Attachment D1.

#### c. Morbidity

The current best estimate morbidity assumptions are also based on the reinsurer's combined experience.

Home Office: Lincoln, Nebraska Company NAIC No. 71439 Administrative Office: Post Office Box 4243 Woodland Hills, California 91365-4243

#### **Actuarial Memorandum**

September 2022

Studies are performed for incidence, continuance, utilization, and recovery from claim data. Incidence rates by gender, marital status, and attained age have been developed.

Continuance termination rates are derived from reinsurer data that has been credibility blended with the latest industry data. Utilization factors are then applied to the claim costs, which are as follows: 85% for COLA reimbursement policies and 100% for non-COLA reimbursement policies. No underwriting selection durational factors or morbidity improvement is assumed in the projection.

Policy design features have been taken into consideration. Benefit provisions, elimination periods, benefit periods, number of units, benefit growth, etc. have been accounted for either in the development of claim costs or projection model formulas.

Attachment E1 shows the best estimate incidence rates by gender and marital status. Attachment E2 shows the best estimate claim continuance rates. Attachment E3 shows the best estimate claim recovery rates.

Attachments E4 and E5 contain the analysis of actual to expected incidence and termination respectively, with expected based on best estimate assumptions, for the combined reinsurer block of LTC policies.

Original Pricing Claim Costs for skilled, intermediate and custodial Nursing Care Benefits are derived from The Reports of the Society of Actuaries based on the 1985 National Nursing Home Survey Utilization Data in Transactions, Society of Actuaries, 1988-89-90 Reports; and the Long Term Care Intercompany Study: 1984-1991 Experience in Transactions, Society of Actuaries, 1993-94 Reports. Claim costs factors shown in the original actuarial memorandum are applied to the inforce lives and represent the expected cost per life of incurred benefits.

Claim costs for Home and Community Based Care are decreasing percentages of Nursing Care claim costs derived from information provided by a reinsurer.

Home Office: Lincoln, Nebraska Company NAIC No. 71439

Administrative Office: Post Office Box 4243

Woodland Hills, California 91365-4243

**Actuarial Memorandum** 

September 2022

Claim costs for the Shortened Benefit Period Nonforfeiture Rider, the Full Return of Premium Rider, and

the Optional Policy Surrender Rider are developed by using mortality rates and nonforfeiture benefits

appropriate at each duration.

For the Benefit Increase Riders, the foregoing claim costs are increased by 5% each duration (simple

interest rider) or compounded by 5% each duration (compound interest rider) to obtain the actual claim

costs by duration.

Claim costs were adjusted to accommodate the Waiver of Premium, which is treated as an increment of

the daily benefit.

The original pricing joint claim costs are 150% of the individual claim costs.

The original pricing underwriting selection factors are by duration: 35%, 40%, 45%, 50%, 60%, 80%,

90%, 100% for durations 8 & later.

d. Interest

The maximum valuation interest rate for contract reserves, 4.0%, has been used for accumulating

historical experience and for discounting projected future experience.

Original Pricing:

5.5%

Maximum Valuation:

4.0%

e. Expenses

Expenses have not been explicitly projected. It is assumed that the originally filed expense

assumptions remain appropriate.

The above discussed current best estimate assumptions are based on the experience of the company, reinsurer

and industry experience, and judgment. The best estimate assumptions reflect an estimate of the most likely

outcome and do not reflect an explicit margin for conservatism.

Assurity Life Insurance Company

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Home Office: Lincoln, Nebraska Company NAIC No. 71439

Administrative Office: Post Office Box 4243

Woodland Hills, California 91365-4243

**Actuarial Memorandum** 

September 2022

8. Issue Age Range

The issue ages are from 40 to 84 on an age nearest birthday basis, except for endorsed groups where the issue age

range is 18 to 84.

9. Claim Liability and Reserves

Claim reserves as of December 31, 2021 have been discounted to the incurral date of each respective claim and

included in historical incurred claims. Incurred but not reported reserve (IBNR) balances as of December 31, 2021

have been allocated to a calendar year of incurral and included in historic incurred claims. Paid claims have been

discounted to the incurral date and included in historical incurred claims. Claim Reserves are calculated for active

and pending claimants as present value of benefit payments discounted by interest and terminations. The IBNR is

based on lag factors which are applied to the claim reserves and survivor payments based on the difference between

the incurral date and the valuation date.

10. Trend Assumptions

As this is not medical insurance, we have not included any explicit medical cost trends in the projections.

11. Past and Future Policy Experience

Earned premiums and incurred claims for projection years 2022 through 2061 are developed from a projection model

representing actual contracts in force as of December 31, 2021. The assumptions described above for morbidity,

voluntary lapse and mortality are used to project life years, earned premiums and incurred claims.

Nationwide experience and projections by calendar year are shown in Attachment F.

A future annual loss ratio is calculated, with and without interest, as anticipated incurred claims divided by earned

premiums. A lifetime loss ratio as of December 31, 2021 is calculated as the sum of accumulated past experience and

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discounted future experience where accumulation and discounting occur at 4.0%, the maximum valuation interest

rate.

Assurity Life Insurance Company

Home Office: Lincoln, Nebraska Company NAIC No. 71439

Administrative Office: Post Office Box 4243

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**Actuarial Memorandum** 

September 2022

12. Loss Ratio Requirement Compliance Demonstration

Historical experience and projected experience using current best estimates are shown in Attachment F, which

demonstrates that the accumulated lifetime loss ratio exceeds the minimum loss ratio requirement.

13. Nationwide and Virginia Distribution of Business

The distributions of policies and premiums as of December 31, 2021 are shown in the following attachments:

Nationwide distribution:

Attachment A1

Virginia distribution:

Attachment A2

.

14. Rate Increase History

No prior rate increases were requested.

15. Credibility of Experience Data

According to Florida's insurance regulation (FAC Rule 69O-149.0025) regarding credible data, for policy forms with

low expected claims frequency, a total of 1,000 claims shall be assigned 100 percent credibility; 200 claims shall be

assigned 0 percent credibility. If 100 percent credibility is not achieved by using the most recent five-year period, the

data from the most recent five-year period only shall be used. Long Term Care insurance falls into this category of

policy forms with low expected claim frequency.

Since this block of business is 100% reinsured, the experience from the reinsurer's similarly underwritten and

administered long term care products is pooled together to set the best estimate assumptions.

The reinsurer's data contains over 25,000 claims. Therefore, we believe the reinsurer's experience data used to set the

best estimate assumption is fully credible on an aggregate basis. However, it may not be 100 percent credible at each

individual attained age. The industry experience, SOA LTC Intercompany Experience Study 2000-2011 Report, has

been blended with reinsurer's data where credibility is low for some attained ages.

Assurity Life Insurance Company

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Home Office: Lincoln, Nebraska Company NAIC No. 71439

Administrative Office: Post Office Box 4243 Woodland Hills, California 91365-4243

**Actuarial Memorandum** 

September 2022

16. Actuarial Certification

I, Xiaoyan Song, am a member of the American Academy of Actuaries. I meet the Academy's qualification standards

for rendering this opinion and am familiar with the requirements for filing and reviewing long-term care insurance

premiums.

In my opinion, the premium rate schedule is not sufficient to cover anticipated costs under current best estimate

assumptions and the premium rate schedule may not be reasonably expected to be sustainable over the life of the

policy with no future premium increases anticipated. Based on my review of recent experience of the policy

involved, in my opinion, a rate action is necessary at this time as a result of this analysis.

In forming my opinion, I have used actuarial assumptions and actuarial methods and such tests of the actuarial

calculations as I considered necessary. The details of my review are included in the attached actuarial memorandum

that provides the historical experience and the expected future and lifetime loss ratios based on the current best

estimate assumptions; and a detailed description and actuarial support for each assumption used in the projections.

Xiaoyan Song, FSA, MAAA, FLMI, LTCP

Consulting Actuary

## Assurity Life Insurance Company Policy Form: AL-2100 Attachment A1

#### Nationwide Policy and Premium Distribution

	Policies*	Premium	% of Policies	% of Premium
Base				
Comprehensive Care	576	1,593,315	90%	92%
Facility Only	65	146,359	10%	8%
Total	641	1,739,674	100%	100%
COLA Options				
No COLA	126	236,691	20%	14%
Compound COLA 5%	345	1,021,900	54%	59%
Step-Rated Compound COLA 5%	12	36,643	2%	2%
Simple COLA 5%	158	444,440	25%	26%
Total	641	1,739,674	100%	100%
Nonforfeiture Options				
None	602	1,627,662	94%	94%
Full Return of Premium	8	28,158	1%	2%
Shortened Benefit Period	4	4,771	1%	0%
			4%	
Optional Surrender Total	27 641	79,083 1,739,674	100%	5% 100%
Pav Period				
Lifetime	550	1,690,909	86%	97%
10 Pay	81	0	13%	0%
20 Pay		48.765		
	10	- /	2%	3%
Total	641	1,739,674	100%	100%
Joint/Single Life	264	1.064.656	<b>5</b> 70	(10)
Joint	364	1,064,656	57%	61%
Single	277	675,018	43%	39%
Fotal	641	1,739,674	100%	100%
Billing Mode				
Annual	344	970,194	54%	56%
Semi-Annual	26	73,612	4%	4%
Quarterly	43	116,253	7%	7%
Monthly	228	579,615	36%	33%
Total	641	1,739,674	100%	100%
Elimination Period				
0 Day	10	18,044	2%	1%
30 Days	31	92,433	5%	5%
•	557	1,527,810	87%	88%
90 Days				
180 Days	43 641	101,386	7%	6%
Total	641	1,739,674	100%	100%
Benefit Period (NH/HH)	17	24.220	201	201
2 Year / 2 Year	16	34,239	2%	2%
3 Year / 3 Year	69	191,090	11%	11%
4 Year / 4 Year	23	55,224	4%	3%
5 Year / 5 Year	72	190,907	11%	11%
6 Year / 6 Year	16	42,897	2%	2%
10 Year / 10 Year	18	67,133	3%	4%
Lifetime / Lifetime	427	1,158,185	67%	67%
Total	641	1,739,674	100%	100%
Issue Age Cohort				
20-29	1	711	0%	0%
30-39	7	15,855	1%	1%
40-49	43	65,570	7%	4%
50-59	265	584,125	41%	34%
60-69	295	946,586	46%	54%
	20	110.077		
70-79	28	118,856	4%	7%
70-79 80-89 Total	28 2 641	118,856 7,970 1,739,674	4% 0% 100%	0% 100%

<sup>\*</sup>Note: The number of policies in Exhibit A1 may differ from the number of policyholders listed on the SERFF Rate/Rule Schedule tab.

This is because joint policies consist of two policyholders under a single policy.

<sup>\*</sup>Note: This exhibit includes paid-up policies that no longer pay premiums (i.e. premium = 0).

## Assurity Life Insurance Company Policy Form: AL-2100 Attachment A2 Virginia Policy and Premium Distribution

	Policies*	Premium	% of Policies	% of Premium
Base				
Comprehensive Care	6	20,339	86%	89%
Facility Only	1	2,457	14%	11%
Total	7	22,796	100%	100%
		,		
COLA Options				
No COLA	3	9,395	43%	41%
Compound COLA 5%	2	4,818	29%	21%
Compound COLA 5%	0	0	0%	0%
Simple COLA 5%	2	8,583	29%	38%
Total	7	22,796	100%	100%
		,		
Nonforfeiture Options				
None	7	22,796	100%	100%
Full Return of Premium	0	0	0%	0%
Shortened Benefit Period	0	0	0%	0%
Optional Surrender	0	0	0%	0%
Total	7	22,796	100%	100%
Pay Period				
Lifetime	7	22,796	100%	100%
10 Pay	0	0	0%	0%
20 Pay	0	0	0%	0%
Total	7	22,796	100%	100%
Joint/Single Life				
Joint	4	12,405	57%	54%
Single	3	10,391	43%	46%
Total	7	22,796	100%	100%
Billing Mode				
Annual	3	8,548	43%	37%
Semi-Annual	0	0	0%	0%
Quarterly	0	0	0%	0%
Monthly	4	14,248	57%	63%
Total	7	22,796	100%	100%
Elimination Period				
0 Day	0	0	0%	0%
30 Days	0	0	0%	0%
90 Days	6	20,435	86%	90%
180 Days	1	2,360	14%	10%
Total	7	22,796	100%	100%
Benefit Period (NH/HH)				
2 Year / 2 Year	1	3,208	14%	14%
3 Year / 3 Year	1	3,699	14%	16%
4 Year / 4 Year	2	6,806	29%	30%
5 Year / 5 Year	3	9,084	43%	40%
6 Year / 6 Year	0	0	0%	0%
10 Year / 10 Year	0	0	0%	0%
Lifetime / Lifetime	0	0	0%	0%
Total	7	22,796	100%	100%
Issue Age Cohort				
20-29	0	0	0%	0%
30-39	0	0	0%	0%
40-49	0	0	0%	0%
50-59	2	4,849	29%	21%
60-69	3	10,013	43%	44%
70-79	2	7,933	29%	35%
80-89	0	0	0%	0%
Total	7	22,796	100%	100%

<sup>\*</sup>Note: The number of policies in Exhibit A2 may differ from the number of policyholders listed on the SERFF Rate/Rule Schedule tab.

This is because joint policies consist of two policyholders under a single policy.

\*Note: This exhibit includes paid-up policies that no longer pay premiums (i.e. premium = 0).

# Assurity Life Insurance Company Policy Form: AL-2100-VA Attachment B Rates and Factors Individual / Select Risk / Lifetime Benefit Period / 90 Day Elimination Period

	ANNUAI	RATES	Benefit Increase Factors					Other I	Riders Factors				
	Standard 1				me Pay			ed Pay					
	PER \$10 DAII	LY BENEFIT		5% Compound		5% Simple	5% Compound	5% Simple			1		
Issue	Facility	Comprehensive		Step	Rate Annual				Limite	ed Pay			нсвс
Age	Care	Care	All Years	1st Year	Increase *	All Years	All Years	All Years	10 Year	20 Year	ROP	SBP	Waiver
18	51.50	64.38	8.750	1.330	0.510	6.300	9.500	8.430	4.030	2.400	1.600	1.030	1.010
19	52.63	65.75	8.340	1.330	0.483	6.000	9.090	7.980	3.980	2.370	1.610	1.035	1.011
20	53.75	67.25	7.940	1.330	0.457	5.720	8.700	7.560	3.920	2.350	1.615	1.040	1.013
21 22	54.88 56.00	68.63 70.00	7.580 7.240	1.330 1.330	0.434 0.412	5.460 5.210	8.340 8.000	7.180 6.820	3.870 3.820	2.320 2.300	1.620 1.630	1.045 1.050	1.015 1.016
23	57.00	71.25	6.920	1.330	0.392	4.980	7.680	6.480	3.770	2.270	1.640	1.060	1.018
24	58.00	72.50	6.620	1.330	0.372	4.770	7.390	6.170	3.720	2.250	1.650	1.070	1.020
25	59.00	73.75	6.340	1.330	0.354	4.570	7.110	5.880	3.670	2.230	1.660	1.075	1.022
26	59.88	74.88	6.080	1.330	0.337	4.380	6.850	5.600	3.620	2.200	1.670	1.080	1.023
27 28	60.75 61.63	76.00 77.00	5.840 5.610	1.330 1.330	0.322 0.307	4.200 4.040	6.600 6.370	5.350 5.110	3.570 3.520	2.180 2.160	1.680 1.690	1.090 1.095	1.025 1.027
29	62.38	78.00	5.390	1.330	0.293	3.880	6.160	4.890	3.480	2.130	1.695	1.100	1.027
30	63.13	78.88	5.190	1.330	0.280	3.740	5.950	4.680	3.430	2.110	1.700	1.115	1.031
31	63.75	79.75	5.000	1.330	0.268	3.600	5.760	4.490	3.390	2.090	1.710	1.120	1.033
32	64.37	80.50	4.830	1.330	0.257	3.470	5.580	4.300	3.340	2.070	1.720	1.130	1.035
33 34	64.88 65.38	81.13 81.75	4.660 4.500	1.330 1.330	0.246 0.235	3.360 3.240	5.420 5.260	4.130 3.970	3.300 3.250	2.050 2.020	1.730 1.740	1.140 1.145	1.036 1.038
34 35	65.38 65.88	81.75 <b>82.38</b>	4.500 <b>4.360</b>	1.330 1.330	0.235 <b>0.226</b>	3.240 3.140	5.260 <b>5.110</b>	3.970 3.820	3.250 3.210	2.020 <b>2.000</b>	1.740 1.750	1.145 1.150	1.038 1.040
36	66.25	82.88	4.220	1.330	0.217	3.040	4.970	3.680	3.170	1.980	1.760	1.160	1.042
37	66.50	83.13	4.090	1.330	0.209	2.950	4.840	3.550	3.120	1.960	1.770	1.170	1.044
38	66.75	83.50	3.970	1.330	0.201	2.860	4.720	3.430	3.080	1.940	1.780	1.180	1.046
39	66.88	83.63	3.860	1.330	0.194	2.780	4.610	3.310	3.040	1.920	1.790	1.190	1.048
<b>40</b> 41	<b>67.00</b> 68.00	83.75 85.00	3.750 3.650	1.330 1.330	0.187 0.180	2.700 2.630	4.500 4.400	3.200 3.100	3.000 2.960	1.900 1.880	1.800 1.810	1.200 1.210	1.050 1.052
42	69.00	86.25	3.550	1.330	0.174	2.560	4.300	3.000	2.920	1.860	1.820	1.220	1.052
43	70.00	87.50	3.450	1.330	0.167	2.490	4.200	2.900	2.880	1.840	1.830	1.230	1.056
44	71.00	88.75	3.350	1.330	0.161	2.420	4.100	2.800	2.840	1.820	1.840	1.240	1.058
45	72.00	90.00	3.250	1.330	0.154	2.350	4.000	2.700	2.800	1.800	1.850	1.250	1.060
46 47	73.00	91.25 92.50	3.150	1.330 1.330	0.148 0.142	2.280 2.210	3.900 3.800	2.600	2.760 2.720	1.780 1.760	1.870	1.260 1.270	1.062 1.064
47	74.00 75.00	92.30 93.75	3.050 2.950	1.330	0.142	2.210	3.700	2.500 2.400	2.720	1.740	1.890 1.910	1.270	1.064
49	76.00	95.00	2.850	1.330	0.129	2.070	3.600	2.300	2.640	1.720	1.930	1.290	1.068
50	77.00	96.25	2.750	1.330	0.122	2.000	3.500	2.200	2.600	1.700	1.950	1.300	1.070
51	80.00	100.00	2.700	1.330	0.119	1.960	3.400	2.150	2.560	1.680	1.970	1.310	1.072
52	83.00	103.75	2.650	1.330	0.116	1.920	3.300	2.100	2.520	1.660	1.990	1.320	1.074
53 54	87.00 90.00	108.75 112.50	2.570 2.470	1.330 1.330	0.111 0.104	1.880 1.840	3.200 3.100	2.050 2.000	2.480 2.440	1.640 1.620	2.010 2.030	1.330 1.340	1.076 1.078
55	93.00	112.30 116.25	2.360	1.330	0.104	1.800	3.000	1.950	2.440	1.600	2.050	1.340	1.078
56	100.00	125.00	2.310	1.330	0.094	1.770	2.900	1.930	2.360	1.580	2.070	1.360	1.082
57	107.00	133.75	2.260	1.330	0.091	1.740	2.800	1.900	2.320	1.560	2.090	1.370	1.084
58	114.00	142.50	2.210	1.330	0.087	1.710	2.700	1.870	2.280	1.540	2.110	1.380	1.086
59	122.00	152.50	2.150	1.330	0.083	1.680	2.600	1.840	2.240	1.520	2.130	1.390	1.088
60	129.00 138.00	161.25 172.50	2.100 2.060	1.330 1.330	0.080 0.078	1.650 1.620	2.500 2.450	1.810 1.780	2.200 2.160	1.500 1.480	2.150 2.170	1.400 1.410	1.090 1.092
61 62	147.00	172.50	2.000	1.330	0.075	1.520	2.450	1.750	2.100	1.480	2.170	1.410	1.092
63	157.00	196.25	1.970	1.330	0.072	1.560	2.350	1.720	2.080	1.440	2.210	1.430	1.096
64	166.00	207.50	1.930	1.330	0.069	1.530	2.300	1.690	2.040	1.420	2.230	1.440	1.098
65	175.00	218.75	1.890	1.330	0.067	1.500	2.250	1.670	2.000	1.400	2.250	1.450	1.100
66 67	192.00 208.00	240.00 260.00	1.850 1.810	1.330 1.330	0.064 0.061	1.480 1.460	2.200 2.150	1.650 1.630	1.950 1.900	1.390 1.380	2.280 2.310	1.460 1.470	1.102 1.104
68	208.00	281.25	1.810	1.330	0.061	1.460	2.100	1.610	1.850	1.380	2.310	1.470	1.104
69	241.00	301.25	1.720	1.330	0.056	1.420	2.050	1.590	1.800	1.360	2.340	1.490	1.108
70	258.00	322.50	1.680	1.330	0.053	1.400	2.000	1.570	1.750	1.350	2.400	1.500	1.110
71	309.00	386.25	1.660	1.330	0.052	1.390	1.960	1.550	1.700	1.340	2.430	1.510	1.112
72	361.00	451.25	1.640	1.330	0.051	1.380	1.920	1.540	1.650	1.330	2.460	1.520	1.114
73 74	412.00 464.00	515.00 580.00	1.620 1.600	1.330 1.330	0.049 0.048	1.370 1.360	1.880 1.840	1.530 1.520	1.600 1.550	1.320 1.310	2.490 2.520	1.530 1.540	1.116 1.118
75	515.00	643.75	1.580	1.330	0.048	1.350	1.840	1.520 1.510	1.500 1.500	1.310	2.520 2.550	1.540 1.550	1.118
76	567.00	708.75	1.560	1.330	0.045	1.340	1.770	1.500	1.480	1.290	2.580	1.560	1.122
77	618.00	772.50	1.550	1.330	0.045	1.330	1.740	1.490	1.460	1.280	2.610	1.570	1.124
78	670.00	837.50	1.540	1.330	0.044	1.320	1.710	1.480	1.440	1.270	2.640	1.580	1.126
79	721.00	901.25	1.520	1.330	0.043	1.310	1.680	1.470	1.420	1.260	2.670	1.590	1.128
80	773.00	966.25 1,030.00	1.500	1.330 1.330	0.041 0.041	1.300 1.290	1.650 1.630	1.450	1.400 1.380	1.250	2.700 2.730	1.600	1.130
81 82	824.00 876.00	1,030.00	1.490 1.480	1.330	0.041	1.290	1.610	1.430 1.410	1.360	1.240 1.230	2.760	1.610 1.620	1.132 1.134
83	927.00	1,158.75	1.470	1.330	0.040	1.270	1.590	1.390	1.340	1.220	2.790	1.630	1.136
84	979.00	1,223.75	1.460	1.330	0.039	1.260	1.570	1.370	1.320	1.210	2.820	1.640	1.138
		,											

				Issue Ag	e Independent Fa	ectors					
Joint Policy	1.20	Risk Cl	asses		Payme	Payment Mode		Eliminat	ion Period	0 Day HCBC El	limination Period
		Preferred	0.60		Annual	1.000	1	0-Day	1.40		
Facility Only Indemnity	1.05	Select	0.80		Semi-Annual	0.520		30-Day	1.20	30-Day	1.08
Comprehensive Indemnity	1.20	Standard	1.00		Quarterly	0.270		90-Day	1.00	90-Day	1.16
Monthly HCBC	1.10	Substandard*	1.60		Monthly	0.090		180-Day	0.90	180-Day	1.20
Optional Policy Surrender	1.10	Substandard*	2.40	]							
Employer/Association Group Discount	5% for all ages	Benefit I	Period	Restoration	of Benefits	Shared Ber	nefit Amount	٦			
		10-Year	0.95	10-Year	1.011	10-Year	1.02				
		6-Year	0.88	6-Year	1.034	6-Year	1.08				
		5-Year	0.85	5-Year	1.047	5-Year	1.11				
		4-Year	0.78	4-Year	1.051	4-Year	1.15				
		3-Year	0.63	3-Year	1.063	3-Year	1.21				
		2-Year	0.55	2-Year	1.075	2-Year	1.29				

<sup>\* 5%</sup> Compound Step Rate COLA Annual Increase: the factor for any policy year is calculated by adding the annual increase to the previous year factor.

#### **Assurity Life Insurance Company Combined Reinsurer Experience** Attachment C Lapse Rates

Duration*	Exposure**	Lapses	Actual Lapse Rates	Best Estimate Lapse Rates	A/E
10	155,154	968	0.62%	0.50%	1.25
11	145,396	917	0.63%	0.50%	1.26
12	137,407	875	0.64%	0.50%	1.27
13	130,004	763	0.59%	0.50%	1.17
14	122,488	613	0.50%	0.50%	1.00
15	114,351	543	0.47%	0.50%	0.95
16	105,969	473	0.45%	0.50%	0.89
17	92,583	372	0.40%	0.50%	0.80
18	76,560	384	0.50%	0.50%	1.00
19	59,629	301	0.50%	0.50%	1.01
20	43,565	218	0.50%	0.50%	1.00
21	33,028	170	0.51%	0.50%	1.03
22	25,772	123	0.48%	0.50%	0.95
23	17,433	112	0.64%	0.50%	1.28
24	10,971	69	0.63%	0.50%	1.26
25	6,248	41	0.66%	0.50%	1.31
26	3,099	17	0.55%	0.50%	1.10
27	1,355	10	0.74%	0.50%	1.48
28	523	1	0.19%	0.50%	0.38
29	261	1	0.38%	0.50%	0.77
30	92	1	1.09%	0.50%	2.17
31	28	0	0.00%	0.50%	0.00
Average	1,281,917	6,972	0.54%	0.50%	1.09

<sup>\*</sup> All Assurity policies are duration 10+ \*\* Lifetime-pay & 20-pay policies only

#### Assurity Life Insurance Company Policy Form: AL-2100 Attachment D1 Mortality Selection Factors

Policy Duration		ction
Burution	Single	Joint
1	0.200	0.200
2	0.370	0.310
3	0.470	0.390
4	0.500	0.410
5	0.530	0.430
6	0.550	0.480
7	0.590	0.500
8	0.620	0.520
9	0.670	0.540
10	0.740	0.560
11	0.790	0.580
12	0.820	0.640
13	0.870	0.670
14	0.920	0.710
15	1.000	0.730
16	1.000	0.760
17	1.000	0.810
18	1.000	0.910
19	1.000	1.000
20+	1.000	1.000

#### Assurity Life Insurance Company Combined Reinsurer Experience Attachment D2 Mortality A to E Analysis

Attained	Single Lives Death Counts			Joint	Joint Lives Death Counts**			Total Death Counts		
Age	Actual	Expected*	A/E	Actual	Expected*	A/E	Actual	Expected*	A/E	
<40	1	1	69%	1	3	37%	2	4	48%	
40-44	2	4	55%	14	10	135%	16	14	114%	
45-49	25	14	175%	52	40	128%	77	55	141%	
50-54	63	58	109%	148	158	94%	211	215	98%	
55-59	162	184	88%	443	481	92%	605	666	91%	
60-64	375	486	77%	1,014	1,162	87%	1,389	1,648	84%	
65-69	711	867	82%	1,537	1,868	82%	2,248	2,735	82%	
70-74	1,033	1,133	91%	2,155	2,205	98%	3,188	3,338	96%	
75-79	1,255	1,202	104%	2,224	2,004	111%	3,479	3,206	109%	
80-84	1,275	1,096	116%	1,625	1,333	122%	2,900	2,429	119%	
85-89	926	811	114%	806	595	135%	1,732	1,407	123%	
90+	576	468	123%	231	170	136%	807	638	126%	
Total	6,404	6,325	101%	10,250	10,030	102%	16,654	16,355	102%	

<sup>\*</sup> Expected - 100% of 2012 IAR mortality table with the mortality selection factors shown in Exhibit D2

<sup>\*\*</sup> Joint lives - joint policy at issue

#### Assurity Life Insurance Company Policy Form: AL-2100 Attachment E1 Incidence Rates Per 100

Best Estimate								
			are Incidence Rates		Incidence Rate Factors			
Attained		a			Home and Community Based Care and	Assisted Living Facility		
Age	Single Male	Single Female	Married Male 0.0004	Married Female	Assisted Living Facility			
<b>40</b> 41	<b>0.0016</b> 0.0019	<b>0.0015</b> 0.0017	0.0004 0.0005	<b>0.0003</b> 0.0004	<b>1.550</b> 1.550	<b>0.300</b> 0.300		
42	0.0019	0.0017	0.0006	0.0004	1.550	0.300		
43	0.0023	0.0020	0.0008	0.0006	1.550	0.300		
44	0.0027	0.0029	0.0009	0.0007	1.550	0.300		
45	0.0037	0.0034	0.0011	0.0009	1.550	0.300		
46	0.0043	0.0040	0.0013	0.0011	1.550	0.300		
47	0.0050	0.0048	0.0016	0.0013	1.550	0.300		
48	0.0059	0.0056	0.0019	0.0016	1.550	0.300		
49	0.0069	0.0067	0.0023	0.0020	1.550	0.300		
50	0.0081	0.0079	0.0028	0.0024	1.550	0.300		
51	0.0096	0.0094	0.0034	0.0029	1.550	0.300		
52	0.0112	0.0111	0.0041	0.0036	1.550	0.300		
53	0.0132	0.0132	0.0049	0.0043	1.550	0.300		
54	0.0155	0.0156	0.0059	0.0053	1.550	0.300		
55	0.0181	0.0185	0.0071	0.0064	1.550	0.300		
56	0.0214	0.0220	0.0086	0.0079	1.550	0.300		
57	0.0251	0.0261	0.0104	0.0096	1.550	0.300		
58 59	0.0310 0.0384	0.0324 0.0406	0.0132 0.0169	0.0123 0.0159	1.436 1.311	0.290 0.290		
6 <b>0</b>	0.0384 0.0474	0.0406	0.0169	0.0139	1.311 1.206	0.290 <b>0.280</b>		
61	0.0582	0.0627	0.0214	0.0259	1.111	0.270		
62	0.0707	0.0768	0.0337	0.0327	1.045	0.270		
63	0.0852	0.0934	0.0417	0.0409	0.969	0.260		
64	0.1039	0.1149	0.0523	0.0517	0.872	0.260		
65	0.1255	0.1401	0.0650	0.0649	0.795	0.250		
66	0.1511	0.1702	0.0804	0.0812	0.728	0.240		
67	0.1810	0.2058	0.0990	0.1010	0.671	0.240		
68	0.2161	0.2480	0.1214	0.1251	0.613	0.230		
69	0.2582	0.2990	0.1491	0.1552	0.555	0.230		
70	0.3068	0.3585	0.1821	0.1915	0.507	0.220		
71	0.3620	0.4269	0.2209	0.2346	0.470	0.220		
72	0.4217	0.5019	0.2644	0.2837	0.452	0.210		
73	0.4986	0.5988	0.3213	0.3483	0.425	0.210		
74	0.5900	0.7150	0.3908	0.4279	0.397	0.200		
75	0.6983	0.8541	0.4755	0.5259	0.369	0.200		
76	0.8268	1.0205	0.5786	0.6465	0.341	0.190		
77	0.9718	1.2105	0.6990	0.7890	0.323	0.190		
78 79	1.1475 1.3448	1.4426 1.7061	0.8484 1.0220	0.9674 1.1771	0.305 0.297	0.190 0.180		
80	1.5883	2.0334	1.0220 1.2406	1.1//1 1.4434	0.297 <b>0.279</b>	0.180 <b>0.180</b>		
81	1.8761	2.4239	1.5062	1.7703	0.261	0.170		
82	2.1987	2.8668	1.8143	2.1541	0.253	0.170		
83	2.6767	3.3665	2.2410	2.7070	0.235	0.170		
84	3.1916	3.9559	2.7468	3.3211	0.227	0.160		
85	3.7395	4.6271	3.3229	3.9827	0.219	0.160		
86	4.2889	5.3353	3.9344	4.6458	0.212	0.150		
87	4.8111	6.0364	4.5450	5.2599	0.204	0.150		
88	5.2326	6.6271	5.0715	5.7174	0.196	0.150		
89	5.5194	7.0495	5.4617	5.9417	0.188	0.140		
90	5.9225	7.7277	5.9683	6.4251	0.180	0.140		
91	6.2515	8.3074	6.3991	6.8276	0.182	0.140		
92	6.6943	9.0377	6.9459	7.3542	0.174	0.130		
93	7.1432	9.0997	7.5003	7.8880	0.166	0.130		
94	7.5268	9.0764	7.4810	7.8677	0.169	0.130		
95	7.5140	9.0609	7.4683	7.8543	0.171	0.130		
96	7.5657	9.1232	7.5196	7.9083	0.163	0.120		
97	7.5462	9.0997	7.5003	7.8880	0.166	0.120		
98	7.5333	9.0841	7.4874	7.8745	0.168	0.120		
99 <b>100</b>	7.5140 <b>7.4948</b>	9.0609 <b>9.0377</b>	7.4683 <b>7.4492</b>	7.8543 <b>7.8342</b>	0.171 <b>0.174</b>	0.110 <b>0.110</b>		
100	7.4948 7.4820	9.0224	7.4492 7.4365	7.8342 7.8209	0.174 0.176	0.110		
101	7.4630	8.9994	7.4363	7.8209	0.176	0.110		
102	7.4503	8.9994 8.9842	7.4176	7.7878	0.179	0.110		
103	7.4305	8.9614	7.3863	7.7680	0.184	0.100		
105	7.4127	8.9387	7.3676	7.7484	0.187	0.100		
106	7.4002	8.9237	7.3552	7.7354	0.189	0.100		
107	7.3816	8.9012	7.3367	7.7159	0.192	0.100		
108	7.3631	8.8789	7.3183	7.6965	0.195	0.100		
109	7.3508	8.8641	7.3060	7.6837	0.197	0.100		
110	7.3324	8.8419	7.2878	7.6645	0.200	0.100		

#### Assurity Life Insurance Company Policy Form: AL-2100 Exhibit E2 Claim Continuance\*

	Claim Continuance - Male								
Claim Months \Attained Age	52	62	67	72	77	82	87	92	
0	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	
12	0.2682	0.2512	0.3530	0.3889	0.4357	0.4826	0.4841	0.4709	
24	0.1973	0.1954	0.2638	0.2845	0.3098	0.3307	0.3157	0.2780	
36	0.1645	0.1614	0.2027	0.2098	0.2189	0.2198	0.1963	0.1473	
48	0.1360	0.1371	0.1618	0.1495	0.1481	0.1422	0.1117	0.0732	
60	0.1227	0.1163	0.1240	0.1082	0.0993	0.0860	0.0596	0.0332	
72	0.0979	0.0954	0.0975	0.0779	0.0657	0.0519	0.0357	0.0213	
84	0.0771	0.0859	0.0717	0.0526	0.0434	0.0328	0.0196	0.0040	
96	0.0743	0.0750	0.0560	0.0380	0.0279	0.0213	0.0132	0.0039	
108	0.0712	0.0632	0.0499	0.0314	0.0173	0.0152	0.0044	0.0039	
120	0.0707	0.0576	0.0384	0.0204	0.0124	0.0101	0.0011	0.0034	
132	0.0596	0.0513	0.0307	0.0132	0.0063	0.0052	0.0011	0.0024	
144	0.0471	0.0343	0.0208	0.0070	0.0040	0.0019	0.0009	0.0016	
156	0.0468	0.0267	0.0141	0.0037	0.0024	0.0008	0.0004	0.0010	
168	0.0468	0.0267	0.0134	0.0033	0.0003	0.0005	0.0002	0.0006	
180	0.0467	0.0266	0.0054	0.0022	0.0002	0.0003	0.0001	0.0004	
300	0.0000	0.0000	0.0000	0.0000	0.0000	0.0000	0.0000	0.0000	

	Claim Continuance - Female							
Claim Months \Attained Age	52	62	67	72	77	82	87	92
0	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000	1.0000
12	0.2873	0.2477	0.3480	0.4583	0.5157	0.5779	0.6189	0.5840
24	0.2168	0.1867	0.2702	0.3674	0.4197	0.4627	0.4785	0.4197
36	0.1750	0.1519	0.2242	0.2973	0.3374	0.3579	0.3460	0.2576
48	0.1490	0.1258	0.1852	0.2380	0.2631	0.2683	0.2408	0.1670
60	0.1354	0.1014	0.1505	0.1883	0.1986	0.1920	0.1566	0.0945
72	0.1185	0.0897	0.1261	0.1505	0.1526	0.1363	0.1038	0.0583
84	0.1038	0.0730	0.1052	0.1186	0.1168	0.0991	0.0682	0.0320
96	0.0965	0.0672	0.0845	0.0926	0.0874	0.0698	0.0439	0.0158
108	0.0893	0.0598	0.0675	0.0716	0.0610	0.0501	0.0324	0.0104
120	0.0794	0.0492	0.0489	0.0539	0.0422	0.0353	0.0206	0.0044
132	0.0734	0.0391	0.0422	0.0426	0.0324	0.0233	0.0156	0.0023
144	0.0693	0.0311	0.0314	0.0363	0.0215	0.0149	0.0065	0.0001
156	0.0636	0.0105	0.0279	0.0228	0.0122	0.0085	0.0002	0.0001
168	0.0549	0.0075	0.0217	0.0132	0.0082	0.0069	0.0002	0.0000
180	0.0418	0.0075	0.0132	0.0056	0.0069	0.0046	0.0002	0.0000
300	0.0000	0.0000	0.0000	0.0000	0.0000	0.0000	0.0000	0.0000

<sup>\*</sup>claim continuance reflects total terminations from both death and recovery.

#### Assurity Life Insurance Company Policy Form: AL-2100 Exhibit F3 Claim Recovery

Attained	Recovery
Age	Rates*
40	36.76%
45	29.22%
50	23.23%
55	18.47%
60	14.68%
65	11.67%
70	9.28%
75	7.38%
80	5.86%
85	4.66%
90	3.71%
95	2.95%
100	2.34%
105	1.86%
110	1.48%
115	1.18%
120+	0.00%

<sup>\*</sup> Claim recovery is based on Lifetime Benefit Period policies.

The claim recovery rates are developed using a linear regression method.

#### Assurity Life Insurance Company Combined Reinsurer Experience Exhibit E4 Incidence A to E Analysis

	Single Male				Single Female			
Attained		Claim	Expected			Claim	Expected	
Age	Exposure	Count	Claim Count	A/E	Exposure	Count	Claim Count	A/E
40-44	1,373	0	0	0%	1,700	0	0	0%
45-49	4,192	6	1	649%	6,477	9	2	598%
50-54	9,858	7	5	153%	18,707	24	9	255%
55-59	21,305	36	21	173%	45,893	71	50	143%
60-64	35,804	77	73	106%	85,058	218	197	110%
65-69	46,764	192	199	97%	116,663	584	579	101%
70-74	45,076	407	397	102%	117,133	1,233	1,241	99%
75-79	31,647	594	583	102%	87,505	2,011	1,995	101%
80-84	17,359	689	668	103%	52,140	2,573	2,535	101%
85-89	6,686	498	500	100%	22,845	2,094	2,148	97%
90+	1,752	206	198	104%	7,020	1,003	980	102%
Total	221,815	2,712	2,645	103%	561,141	9,820	9,737	101%

	Married Male				Married Female			
Attained		Claim	Expected			Claim	Expected	
Age	Exposure	Count	Claim Count	A/E	Exposure	Count	Claim Count	A/E
40-44	4,401	1	0	774%	7,848	6	0	2900%
45-49	14,952	5	1	473%	23,905	18	2	1148%
50-54	39,623	24	7	355%	58,441	49	10	512%
55-59	94,706	87	39	224%	125,352	127	51	249%
60-64	175,639	249	172	145%	206,425	311	207	150%
65-69	235,068	559	546	102%	240,263	600	591	102%
70-74	219,787	1,151	1,207	95%	200,665	1,157	1,210	96%
75-79	144,383	1,960	1,890	104%	122,637	1,828	1,829	100%
80-84	69,695	2,188	2,199	99%	56,809	2,139	2,072	103%
85-89	23,060	1,653	1,694	98%	17,578	1,369	1,400	98%
90+	2,166	279	248	113%	3,176	403	393	103%
Total	1,023,481	8,156	8,002	102%	1,063,099	8,007	7,765	103%

#### Assurity Life Insurance Company Combined Reinsurer Experience Exhibit E5 Claim Termination A to E Analysis

Duration	Claim Exposure	Actual	Expected	A/E
1st quarter	2,116	552	676	82%
2nd quarter	5,215	806	720	112%
3rd quarter	4,439	397	421	94%
4th quarter	3,939	306	314	98%
2	13,877	3,288	3,458	95%
3	9,583	2,310	2,561	90%
4	6,542	2,058	1,955	105%
5	3,993	1,068	1,202	89%
6	2,605	632	740	85%
7	1,742	405	507	80%
8	1,179	274	321	85%
9	792	179	200	90%
10	540	125	159	79%
11	365	87	99	88%
12	245	65	88	74%
13	153	26	57	46%
14	101	54	27	200%
15	68	34	24	142%
16	48	22	9	232%
17	34	16	6	290%
18	22	11	2	516%
19	13	6	3	204%
20	9	4	2	198%
21	6	3	1	224%
22	3	2	1	399%
23	2	2	1	400%
24	1	1	1	200%
25	1	1	1	200%
Average	57,626	12,728	13,553	94%

#### Assurity Life Insurance Company Nationwide Experience Projection Policy Form: AL-2100

#### Attachment F

					at:	4.00%
	Calendar	Earned	Incurred	Loss	Year End	Disc/Accum
	Year	Premium	Claims*	Ratio	2020	Factor
	2007	68,440	0	0.0%	14.5	1.7660
	2008	746,042	0	0.0%	13.5	1.6980
	2009	1,351,495	0	0.0%	12.5	1.6327
	2010	2,331,471	0	0.0%	11.5	1.5699
	2011	3,170,680	0 1,705	0.0%	10.5	1.5096
	2012 2013	3,090,183 2,890,783	1,703	0.1% 0.0%	9.5 8.5	1.4515 1.3957
Historical	2013	2,829,016	7,724	0.3%	7.5	1.3420
Experience	2015	2,772,639	0	0.0%	6.5	1.2904
	2016	2,776,166	223,216	8.0%	5.5	1.2407
	2017	2,716,891	0	0.0%	4.5	1.1930
	2018	2,468,904	358,266	14.5%	3.5	1.1471
	2019	2,397,694	54,427	2.3%	2.5	1.1030 1.0606
	2020 2021	1,991,988 1,795,899	544,483 317,127	27.3% 17.7%	1.5 0.5	1.0006
	2022	1,758,548	719,835	40.9%	-0.5	0.9806
	2023	1,704,734	847,510	49.7%	-1.5	0.9429
	2024	1,648,606	990,834	60.1%	-2.5	0.9066
	2025	1,590,065	1,151,099	72.4%	-3.5	0.8717
	2026	1,529,103	1,328,439	86.9%	-4.5	0.8382
	2027	1,459,884	1,523,270	104.3%	-5.5	0.8060
	2028	1,387,401	1,734,289	125.0%	-6.5	0.7750
	2029 2030	1,304,877 1,229,328	1,955,681 2,186,555	149.9% 177.9%	-7.5 -8.5	0.7452 0.7165
	2030	1,229,328	2,186,333	210.7%	-8.3 -9.5	0.7163
	2032	1,078,767	2,662,680	246.8%	-10.5	0.6624
	2033	1,007,143	2,897,405	287.7%	-11.5	0.6370
	2034	935,492	3,122,182	333.7%	-12.5	0.6125
	2035	864,460	3,332,655	385.5%	-13.5	0.5889
	2036	794,560	3,519,324	442.9%	-14.5	0.5663
	2037	726,369	3,679,540	506.6%	-15.5	0.5445
	2038	660,358	3,805,701	576.3%	-16.5	0.5235
	2039 2040	597,012 536,675	3,892,280 3,940,366	652.0% 734.2%	-17.5 -18.5	0.5034 0.4840
Projected	2040	479,646	3,948,634	823.2%	-19.5	0.4654
Future	2042	426,195	3,917,366	919.1%	-20.5	0.4475
Experience	2043	376,428	3,849,246	1022.6%	-21.5	0.4303
	2044	330,511	3,741,772	1132.1%	-22.5	0.4138
	2045	288,455	3,602,901	1249.0%	-23.5	0.3978
	2046	250,210	3,437,102	1373.7%	-24.5	0.3825
	2047 2048	215,706	3,239,545	1501.8%	-25.5	0.3678
	2048	184,833 157,442	3,011,845 2,768,046	1629.5% 1758.1%	-26.5 -27.5	0.3537 0.3401
	2050	133,372	2,512,574	1883.9%	-27.5	0.3270
	2051	112,394	2,253,123	2004.7%	-29.5	0.3144
	2052	94,261	1,995,884	2117.4%	-30.5	0.3023
	2053	78,723	1,750,410	2223.5%	-31.5	0.2907
	2054	65,505	1,525,921	2329.5%	-32.5	0.2795
	2055	54,323	1,323,387	2436.2%	-33.5	0.2688
	2056	44,932	1,144,651	2547.5%	-34.5	0.2584
	2057 2058	37,088 30,559	983,577 841,100	2652.0% 2752.4%	-35.5 -36.5	0.2485 0.2389
	2059	25,172	719,702	2859.1%	-30.5	0.2389
	2060	20,712	615,649	2972.4%	-38.5	0.2209
	2061	17,033	522,464	3067.4%	-39.5	0.2124
	Past	33,398,291	1,506,947	4.5%		
	Future Lifetime	25,387,301	93,418,587	368.0%		
	PHEHIIIC	58,785,592	94,925,534	161.5%		
Interest	4.00%					
	Past w/ int	44,042,055	1,661,694	3.8%		
	Future w/ int	17,908,156 61,950,211	46,445,658 48 107 352	259.4% 77.7%		
	Lifetime w/ int	61,950,211	48,107,352	77.7%		



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Jill D. Fiddler Vice President, General Counsel and Secretary DIR 402-437-3427 | FAX 402-437-3881 jfiddler@assurity.com

MR. JORGE GOMES
SENIOR VICE PRESIDENT
LIFECARE ASSURANCE COMPANY
SENT VIA EMAIL ONLY TO LOGA CROSSETTE-THAMBIAH:
LOGA.CROSSETTE.THAMBIAH@LIFECAREASSURANCE.COM

February 11, 2022

Re: Assurity Life Insurance Company - NAIC 71439

Dear Mr. Gomes,

This letter will serve as the Company's authorization for LifeCare Assurance Company, Long Term Care Administrators, to file Long Term Care products on behalf of Assurity Life Insurance Company. This authorizes LifeCare to file on our behalf from today through December 31, 2022.

Sincerely,

/s/ Jill D. Fiddler