SERFF Tracking #: UNUM-131865115 State Tracking #: UNUM-131865115

Company Tracking #: 2019 GLTC04 RATE INITIATIVE
- PHASE I

State: Virginia Filing Company: Unum Life Insurance Company of America

TOI/Sub-TOI: LTC03G Group Long Term Care/LTC03G.001 Qualified

Product Name: 2019 GLTC04 RATE INITIATIVE - PHASE I **Project Name/Number:** 2019 GLTC04 RATE INITIATIVE - PHASE I/

Filing at a Glance

Company: Unum Life Insurance Company of America
Product Name: 2019 GLTC04 RATE INITIATIVE - PHASE I

State: Virginia

TOI: LTC03G Group Long Term Care

Sub-TOI: LTC03G.001 Qualified

Filing Type: Form/Rate
Date Submitted: 03/28/2019

SERFF Tr Num: UNUM-131865115

SERFF Status: Closed-Approved and Filed

State Tr Num: UNUM-131865115 State Status: Approved & Filed

Co Tr Num: 2019 GLTC04 RATE INITIATIVE - PHASE I

Effective On Approval

Date Requested:

Author(s): Jay Burt, Ellen Desrosiers, Michelle Gibbons, Scott Abbott

Reviewer(s): Bobby Toone (primary)

Disposition Date: 11/29/2022

Disposition Status: Approved and Filed

Effective Date:

State: Virginia Filing Company: Unum Life Insurance Company of America

TOI/Sub-TOI: LTC03G Group Long Term Care/LTC03G.001 Qualified

Product Name: 2019 GLTC04 RATE INITIATIVE - PHASE I **Project Name/Number:** 2019 GLTC04 RATE INITIATIVE - PHASE I/

General Information

Project Name: 2019 GLTC04 RATE INITIATIVE - PHASE I Status of Filing in Domicile: Not Filed

Project Number: Date Approved in Domicile:
Requested Filing Mode: Review & Approval Domicile Status Comments:

Explanation for Combination/Other: Market Type: Group

Submission Type: New Submission Group Market Size: Small and Large

Group Market Type: Employer Overall Rate Impact:

Filing Status Changed: 12/01/2022

State Status Changed: 12/01/2022

Created By: Ellen Desrosiers

Deemer Date: 12/03/2022

Submitted By: Ellen Desrosiers

Corresponding Filing Tracking Number:

State TOI: LTC03G Group Long Term Care State Sub-TOI: LTC03G.001 Qualified

Filing Description:

State: Virginia Filing Company: Unum Life Insurance Company of America

TOI/Sub-TOI: LTC03G Group Long Term Care/LTC03G.001 Qualified

Product Name: 2019 GLTC04 RATE INITIATIVE - PHASE I **Project Name/Number:** 2019 GLTC04 RATE INITIATIVE - PHASE I/

March 28, 2019

Re: Unum Life Insurance Company of America

Group Long Term Care

NAIC #416-62235 FEIN #01-0278678 Policy Forms: GLTC04, RGLTC04

Dear Commissioner:

The purpose of this letter and attached actuarial memorandum is to request a rate increase for the inforce business sold under the Unum group long-term care policy forms referenced in the subject line above. These policy forms were priced prior to rate stability regulations and are no longer marketed in any state.

The factors driving the Company's need for premium increases are the same as those impacting the LTC industry, with our experience developing unfavorably for key pricing assumptions:

- •Lower than expected lapse rates (e.g. less than 1%)
- •Continued mortality improvements (e.g. people living longer)
- •Increasing claim durations; and
- Persistent low interest rate environment.

Unum is requesting the approval of an 89% premium rate increase on policies with compound inflation (5% and CPI) and a 44% increase on policies with simple inflation. The company will also consider an actuarially equivalent phased-in rate increase over multiple years.

Please note that the policy forms subject to this rate increase are group long-term care policies that have characteristics that differ from a typical individual long-term care policy such as:

- •the employer chooses the plan designs that will be offered to employees
- •the employer may pay for a base level of coverage for all employees and employees will usually be able to buy additional coverage such as higher benefit amounts, longer duration coverage, inflation coverage and higher home care coverage; o78% of Virginia insureds have some level of employer funded of premiums
- •Group long term care premiums are generally much lower than individual long term care premium. oin Virginia, the average annual group premium is \$469 vs. \$2,897 for Unum's individual policy forms
- •The average issue age and attained age is generally much lower for group coverage vs. individual coverage. oin Virginia, the average group issue age for these policy forms is 43 vs. 56 for Unum's individual policy forms oin Virginia, the average group attained age for these policy forms is 49 vs. 74 for Unum's individual policy forms

Any approved premium rate increase will be effective upon the employer policyholder's next anniversary, subject to at least a 60-day notification to the insured or longer if required by your state. We anticipate implementation of these rates beginning in October 2019, if approved with rates becoming effective in 2020.

Unum will offer all insureds affected by the premium rate increase the option of reducing their coverage to mitigate the impact of the rate increase. Employers and insureds will have the option to reduce their monthly benefit, elect to continue the policy under contingent non-forfeiture, or make other benefit changes that will best meet their needs.

State: Virginia Filing Company: Unum Life Insurance Company of America

TOI/Sub-TOI: LTC03G Group Long Term Care/LTC03G.001 Qualified

Product Name: 2019 GLTC04 RATE INITIATIVE - PHASE I **Project Name/Number:** 2019 GLTC04 RATE INITIATIVE - PHASE I/

The company will offer a contingent benefit upon lapse, to all insureds, regardless of the rate increase amount or the insured's issue age. Each insured will be given the option to

exchange their current policy for a non-forfeiture benefit (paid-up policy) upon lapse which is equal to 100% of the sum of all premiums paid. Insureds who select this option will immediately be entitled to the non-forfeiture benefit and will not be obligated to pay the higher premiums associated with the rate increase. If a policy lapses for non-payment of premiums, the insured's coverage will automatically convert to the contingent non-forfeiture benefit.

Insureds who choose this option will also receive copies of Amendment 04CNF19G-VA and 04ECNF19G-APO-VA. Copies of these amendments are enclosed for your review

No premium increases have previously been approved in your state on the listed policy form.

The following items are included in this submission:

- Cover letter
- •Actuarial memorandum and Supporting Loss Ratio Exhibits 1(a,b) and 2(a,b)
- Nationwide filing and approval status, Exhibit 3
- Sample certificateholder letter and FAQ
- •New base rate schedules reflecting the requested increase; and

Amendment 04CNF19G-VA and 04ECNF19G-APO-VA

We respectfully request non-disclosure of this information if your Department grants it.

Please note that Unum exited the individual long term care market in 2009 and the group long term care market in 2012.

If there is anything I can do to expedite this filing including presenting myself and my colleagues for an in person meeting, please let me know. Should you have any questions regarding this filing, please feel free to contact me by phone or e-mail.

Thank you for your time and consideration of this filing. Sincerely,

Ronald (Jake) L Lucas, FSA, MAAA Vice President, Long Term Care Pricing Unum (207) 575-3895 rlucas@unum.com

Company and Contact

Filing Contact Information

Portland, ME 04122

Ellen Desrosiers, Regulatory Analyst 2211 Congress Street C456 EllenDesrosiers@unum.com 866-679-3054 [Phone] 54505 [Ext] 423-785-2914 [FAX]

State: Virginia Filing Company: Unum Life Insurance Company of America

TOI/Sub-TOI: LTC03G Group Long Term Care/LTC03G.001 Qualified

Product Name: 2019 GLTC04 RATE INITIATIVE - PHASE I **Project Name/Number:** 2019 GLTC04 RATE INITIATIVE - PHASE I/

Filing Company Information

Unum Life Insurance Company ofCoCode: 62235State of Domicile: MaineAmericaGroup Code: 565Company Type: L&H2211 Congress StreetGroup Name:State ID Number:

Portland, ME 04122 FEIN Number: 01-0278678

(207) 575-2211 ext. [Phone]

State: Virginia Filing Company: Unum Life Insurance Company of America

TOI/Sub-TOI: LTC03G Group Long Term Care/LTC03G.001 Qualified

Product Name: 2019 GLTC04 RATE INITIATIVE - PHASE I **Project Name/Number:** 2019 GLTC04 RATE INITIATIVE - PHASE I/

Filing Fees

State Fees

Fee Required? No Retaliatory? No

Fee Explanation:

State: Virginia Filing Company: Unum Life Insurance Company of America

TOI/Sub-TOI: LTC03G Group Long Term Care/LTC03G.001 Qualified

Product Name:2019 GLTC04 RATE INITIATIVE - PHASE IProject Name/Number:2019 GLTC04 RATE INITIATIVE - PHASE I/

Correspondence Summary

Dispositions

Status	Created By	Created On	Date Submitted
Approved and Filed	Bobby Toone	11/29/2022	12/01/2022

Objection Letters and Response Letters

Objection Letters Response Letters

Objection Lett	objection Letters			Response Letters			
Status	Created By	Created On	Date Submitted	Responded By	Created On	Date Submitted	
Info has been requested from company	Bobby Toone	10/27/2022	10/27/2022	Ellen Desrosiers	11/03/2022	11/03/2022	
Info has been requested from company	Bobby Toone	10/24/2022	10/24/2022	Scott Abbott	10/25/2022	10/26/2022	
Info has been requested from company	Bobby Toone	10/24/2022	10/24/2022	Scott Abbott	10/24/2022	10/24/2022	
Info has been requested from company	Bobby Toone	10/20/2022	10/20/2022	Scott Abbott	10/20/2022	10/20/2022	
Info has been requested from company	Bobby Toone	10/19/2022	10/19/2022	Scott Abbott	10/20/2022	10/20/2022	
Info has been requested from company	Bobby Toone	10/19/2022	10/19/2022	Scott Abbott	10/19/2022	10/20/2022	
Info has been requested from company	Bobby Toone	09/08/2022	09/08/2022	Ellen Desrosiers	09/15/2022	09/15/2022	
Info has been requested from company	Bobby Toone	05/13/2022	05/13/2022	Ellen Desrosiers	05/16/2022	05/16/2022	
Info has been requested from company	Bobby Toone	01/05/2022	01/05/2022	Ellen Desrosiers	02/04/2022	02/04/2022	
Info has been requested from company	Bobby Toone	12/10/2021	12/10/2021	Ellen Desrosiers	09/07/2022	09/07/2022	

State: Virginia Filing Company: Unum Life Insurance Company of America

TOI/Sub-TOI: LTC03G Group Long Term Care/LTC03G.001 Qualified

Product Name:2019 GLTC04 RATE INITIATIVE - PHASE IProject Name/Number:2019 GLTC04 RATE INITIATIVE - PHASE I/

Objection Letters and Response Letters

Objection Letters Response Letters

Objection Letters			Nesponse Letters			
Status	Created By	Created On	Date Submitted	Responded By	Created On	Date Submitted
Info has been requested from company	Bobby Toone	07/21/2021	07/21/2021	Ellen Desrosiers	07/30/2021	07/30/2021
Info has been requested from company	Bobby Toone	04/12/2021	04/12/2021	Scott Abbott	04/13/2021	04/13/2021
Info has been requested from company	Bobby Toone	03/08/2021	03/08/2021	Ellen Desrosiers	03/12/2021	03/12/2021
Info has been requested from company	Bobby Toone	02/17/2021	02/17/2021	Ellen Desrosiers	02/18/2021	02/18/2021
Info has been requested from company	Bobby Toone	01/11/2021	01/11/2021	Ellen Desrosiers	01/13/2021	01/13/2021
Info has been requested from company	Bobby Toone	12/21/2020	12/21/2020	Ellen Desrosiers	01/06/2021	01/06/2021
Info has been requested from company	Bobby Toone	10/19/2020	10/19/2020	Ellen Desrosiers	10/23/2020	10/23/2020
Info has been requested from company	Bobby Toone	04/07/2020	04/07/2020	Ellen Desrosiers	04/13/2020	04/13/2020
Disapproved	Elsie Andy	02/21/2020	02/21/2020	Ellen Desrosiers	03/22/2020	03/22/2020
Info has been requested from company	Bobby Toone	02/19/2020	02/19/2020	Ellen Desrosiers	02/25/2020	02/25/2020
Info has been requested from company	Bobby Toone	02/19/2020	02/19/2020	Ellen Desrosiers	03/04/2020	03/04/2020
Info has been requested from company	Bobby Toone	12/18/2019	12/18/2019	Ellen Desrosiers	12/20/2019	12/20/2019
Info has been requested from company	Bobby Toone	04/26/2019	04/26/2019	Ellen Desrosiers	04/30/2019	04/30/2019

State: Virginia Filing Company: Unum Life Insurance Company of America

TOI/Sub-TOI: LTC03G Group Long Term Care/LTC03G.001 Qualified

Product Name:2019 GLTC04 RATE INITIATIVE - PHASE IProject Name/Number:2019 GLTC04 RATE INITIATIVE - PHASE I/

Amendments

Amendment				
Schedule	Schedule Item Name	Created By	Created On	Date Submitted
Supporting Document	Sample Certificate Holder Letters	Ellen Desrosiers	05/18/2022	05/18/2022
Form	Certificate Holder Letter	Ellen Desrosiers	05/24/2021	05/24/2021
Form	Certificate Holder Letter	Ellen Desrosiers	05/24/2021	05/24/2021
Supporting Document	Sample Certificate Holder Letter	Ellen Desrosiers	05/24/2021	05/24/2021
Supporting Document	Sample Certificate Holder Letters	Ellen Desrosiers	01/29/2021	01/29/2021
Form	Certificate Holder Letter	Ellen Desrosiers	01/29/2021	01/29/2021
Form	Certificate Holder Letter	Ellen Desrosiers	01/29/2021	01/29/2021
Supporting Document	Statement of Variability	Ellen Desrosiers	01/29/2021	01/29/2021
Form	Certificate Holder Letter	Ellen Desrosiers	06/30/2020	06/30/2020
Form	Frequently Asked Questions	Ellen Desrosiers	06/16/2020	06/16/2020
Form	Certificate Holder Letter	Ellen Desrosiers	06/16/2020	06/16/2020
Supporting Document	Premium Increase History	Ellen Desrosiers	06/16/2020	06/16/2020
Form	Certificate Holder Letter	Ellen Desrosiers	05/12/2020	05/12/2020
Supporting Document	Exhibit 11a-b - Nationwide Loss Ratio	Ellen Desrosiers	02/28/2020	02/28/2020
Supporting Document	Objection Response - GLTC04 Virginia	Ellen Desrosiers	02/28/2020	02/28/2020
Supporting Document	GLTC0419 CH ECNF_v4_cln_VA	Ellen Desrosiers	10/07/2019	10/07/2019
Supporting Document	GLTC0419 CH ECNF_v2_cln_VA	Ellen Desrosiers	05/29/2019	05/29/2019

Filing Notes

Subject	Note Type	Created By	Created On	Date Submitted
Actuary Opinion & Final Report	Reviewer Note	Bobby Toone	01/05/2022	
RRS	Reviewer Note	Bobby Toone	04/11/2019	

State: Virginia Filing Company: Unum Life Insurance Company of America

TOI/Sub-TOI: LTC03G Group Long Term Care/LTC03G.001 Qualified

Product Name:2019 GLTC04 RATE INITIATIVE - PHASE IProject Name/Number:2019 GLTC04 RATE INITIATIVE - PHASE I/

Disposition

Disposition Date: 11/29/2022

Effective Date:

Status: Approved and Filed

Comment: In approving this filing, the Company is reminded that pursuant to 14VAC5-200-153 D, it is required to provide updated experience reports for the next 3 years comparing the actual results to the results that the company projected in justifying the rate increase. We would expect the first of the three experience report filings to be made no later than 15-18 months after implementation, capturing a full 12 months of experience following the rate implementation, and including updated data through the most recent year end.

	Overall %	Overall %	Written Premium	Number of Policy	Written	Maximum %	Minimum %
Company	Indicated	Rate	Change for	Holders Affected	Premium for	Change	Change
Name:	Change:	Impact:	this Program:	for this Program:	this Program:	(where req'd):	(where req'd):
Unum Life Insurance Company of America	26.300%	26.300%	\$538,940	4,375	\$2,052,941	64.900%	0.000%

Schedule	Schedule Item	Schedule Item Status	Public Access
Form (revised)	Certificate Amendment - Contingent Non-Forfeiture Benefit	Approved	Yes
Form	Certificate Amendment - Contingent Non-Forfeiture Benefit	Withdrawn	No
Form	Certificate Amendment - Contingent Non-Forfeiture Benefit	Withdrawn	No
Form	Certificate Amendment - Contingent Non-Forfeiture Benefit	Withdrawn	No
Form (revised)	Certificate Amendment - Enhanced Contingent Non- Forfeiture Benefit	Approved	Yes
Form	Certificate Amendment - Enhanced Contingent Non- Forfeiture Benefit	Withdrawn	No
Form	Certificate Amendment - Enhanced Contingent Non- Forfeiture Benefit	Withdrawn	No
Form	Certificate Amendment - Enhanced Contingent Non- Forfeiture Benefit	Withdrawn	No
Form (revised)	Frequently Asked Questions	Filed	Yes
Form	Frequently Asked Questions	Withdrawn	No
Form	Frequently Asked Questions	Withdrawn	No

State: Virginia Filing Company: Unum Life Insurance Company of America

TOI/Sub-TOI: LTC03G Group Long Term Care/LTC03G.001 Qualified

Product Name:2019 GLTC04 RATE INITIATIVE - PHASE IProject Name/Number:2019 GLTC04 RATE INITIATIVE - PHASE I/

Schedule	Schedule Item	Schedule Item Status	Public Access
Form	Frequently Asked Questions	Withdrawn	No
Form	Frequently Asked Questions	Withdrawn	No
Form (revised)	Certificate Holder Letter	Filed	Yes
Form	Certificate Holder Letter	Withdrawn	No
Form	Certificate Holder Letter	Withdrawn	No
Form	Certificate Holder Letter	Withdrawn	No
Form	Certificate Holder Letter	Withdrawn	No
Form	Certificate Holder Letter	Withdrawn	No
Form	Certificate Holder Letter	Withdrawn	No
Form	Certificate Holder Letter	Withdrawn	No
Form	Certificate Holder Letter	Withdrawn	No
Form	Certificate Holder Letter	Withdrawn	No
Form (revised)	Certificate Holder Letter	Filed	Yes
Form	Certificate Holder Letter	Withdrawn	No
Form	Certificate Holder Letter	Withdrawn	No
Form	Certificate Holder Letter	Withdrawn	No
Form	Certificate Holder Letter	Withdrawn	No
Form	Certificate Holder Letter	Withdrawn	No
Form	Group Long Term Care Request to Change Coverage	Filed	Yes
Rate (revised)	Compound Inflation Rates (current, tier 1, tier 2) - VA	Approved	Yes
Rate (revised)	Simple Inflation Rates (current, tier 1, tier 2) - VA	Approved	Yes
Rate	Compound Inflation Rates (current, tier 1, tier 2) - VA	Withdrawn	No
Rate	VA Proposed Rates - GLTC04&RGLTC04 - 2019	Withdrawn	No
Rate	VA Proposed Rates - GLTC04&RGLTC04 - 2019	Withdrawn	No
Rate	Simple Inflation Rates (current, tier 1, tier 2) - VA	Withdrawn	No
Supporting Document	Certification of Compliance	Received & Acknowledged	Yes
Supporting Document	Product Checklist	Received & Acknowledged	Yes
Supporting Document (revised)	L&H Actuarial Memorandum	Received & Acknowledged	Yes
Supporting Document (revised)	Long Term Care Insurance Rate Request Summary	Received & Acknowledged	Yes
Supporting Document (revised)	L&H Readability - Health	Received & Acknowledged	Yes
Supporting Document (revised)	Exhibit 1a-b - Nationwide Loss Ratio- 2 Tier Rate Incr	Received & Acknowledged	Yes

State: Virginia Filing Company: Unum Life Insurance Company of America

TOI/Sub-TOI: LTC03G Group Long Term Care/LTC03G.001 Qualified

Product Name:2019 GLTC04 RATE INITIATIVE - PHASE IProject Name/Number:2019 GLTC04 RATE INITIATIVE - PHASE I/

Schedule	Schedule Item	Schedule Item Status	Public Access
Supporting Document (revised)	Exhibit 2a-b - Virginia Loss Ratios - 2 Tier Rate Incr	Received & Acknowledged	Yes
Supporting Document (revised)	EXHIBIT 3 - Nationwide Filing Status	Received & Acknowledged	Yes
Supporting Document	Exhibit 4a Virginia Durational Loss Ratio A-E - Compound Inflation	Received & Acknowledged	Yes
Supporting Document	Exhibit 4b Virginia Durational Loss Ratio A-E - Simple Inflation	Received & Acknowledged	Yes
Supporting Document	Exhibit 5a Nationwide Durational Loss Ratio AtoE - Compound Inflation	Received & Acknowledged	Yes
Supporting Document	Exhibit 5b Nationwide Durational Loss Ratio AtoE - Simple Inflation	Received & Acknowledged	Yes
Supporting Document	Exhibit 6 - LTC Lives Diagram Example	Received & Acknowledged	Yes
Supporting Document	Exhibit 7(a,b) - Nationwide Lives Projection	Received & Acknowledged	Yes
Supporting Document (revised)	Premium Increase History	Received & Acknowledged	Yes
Supporting Document (revised)	GLTC0419 CH ECNF_v4_cln_VA	Withdrawn	Yes
Supporting Document (revised)	GLTC0419 CH FAQ ECNF-VA	Withdrawn	Yes
Supporting Document	Cover Letter - VA	Received & Acknowledged	Yes
Supporting Document	Exhibit 9 - Prospective Present Value Loss Ratio Test	Received & Acknowledged	Yes
Supporting Document	Exhibit 10a-b - Original Pricing - Actual Sales	Received & Acknowledged	Yes
Supporting Document (revised)	Exhibit 11a-b - Nationwide Loss Ratio	Received & Acknowledged	Yes
Supporting Document (revised)	Objection Response - GLTC04 Virginia	Received & Acknowledged	Yes
Supporting Document	VA - 2019 GLTC04 Objection Response 4-13-20	Received & Acknowledged	Yes
Supporting Document	Objection #4 Responses	Received & Acknowledged	Yes
Supporting Document (revised)	Sample Certificate Holder Letters	Received & Acknowledged	Yes
Supporting Document	Sample Certificate Holder Letters	Withdrawn	No
Supporting Document (revised)	Statement of Variability	Received & Acknowledged	Yes
Supporting Document	Objection Response 3-12-21	Received & Acknowledged	Yes
Supporting Document	Administrative Statement	Received & Acknowledged	Yes
Supporting Document	Virginia Objections_Final Responses 1.20.22	Received & Acknowledged	Yes
Supporting Document	Sample Request to Change Coverage Form	Received & Acknowledged	Yes
Supporting Document	Sample Contingent Non-Forfeiture Benefit "John Doe"	Received & Acknowledged	Yes
Supporting Document	L&H Actuarial Memorandum	Withdrawn	No
Supporting Document	L&H Actuarial Memorandum	Withdrawn	No
Supporting Document	Long Term Care Insurance Rate Request Summary	Withdrawn	No

State: Virginia Filing Company: Unum Life Insurance Company of America

TOI/Sub-TOI: LTC03G Group Long Term Care/LTC03G.001 Qualified

Product Name:2019 GLTC04 RATE INITIATIVE - PHASE IProject Name/Number:2019 GLTC04 RATE INITIATIVE - PHASE I/

Schedule	Schedule Item	Schedule Item Status	Public Access
Supporting Document	Long Term Care Insurance Rate Request Summary	Withdrawn	No
Supporting Document	L&H Readability - Health	Withdrawn	No
Supporting Document	L&H Readability - Health	Withdrawn	No
Supporting Document	Exhibit 1(a,b) - Nationwide Loss Ratio	Withdrawn	No
Supporting Document	Exhibit 1(a,b) - Nationwide Loss Ratio	Withdrawn	No
Supporting Document	Exhibit 2(a,b) - Virginia Loss Ratios	Withdrawn	No
Supporting Document	EXHIBIT 3 - Nationwide Filing Status	Withdrawn	No
Supporting Document	Premium Increase History	Withdrawn	No
Supporting Document	GLTC0419 Prem Inc History_VA	Withdrawn	No
Supporting Document	GLTC0419 CH ECNF_v4_cln_VA	Withdrawn	No
Supporting Document	GLTC0419 CH ECNF_v2_cln_VA	Withdrawn	No
Supporting Document	GLTC0419 CH ECNF_v2_cln_VA	Withdrawn	No
Supporting Document	GLTC0419 CH FAQ ECNF-VA	Withdrawn	No
Supporting Document	Exhibit 11a-b - Nationwide Loss Ratio	Withdrawn	No
Supporting Document	Objection Response - GLTC04 Virginia	Withdrawn	No
Supporting Document	Sample Certificate Holder Letters	Withdrawn	No
Supporting Document	Sample Certificate Holder Letters	Withdrawn	No
Supporting Document	Sample Certificate Holder Letter	Withdrawn	No
Supporting Document	Sample Certificate Holder Letter	Withdrawn	No
Supporting Document	Sample Certificate Holder Letters	Withdrawn	No
Supporting Document	Sample Certificate Holder Letter	Withdrawn	No
Supporting Document	Statement of Variability	Withdrawn	No
Supporting Document	Statement of Variability	Withdrawn	No
Supporting Document	Statement of Variability	Withdrawn	No
Supporting Document	GLTC Administrative Statement	Received & Acknowledged	Yes

State: Virginia Filing Company: Unum Life Insurance Company of America

TOI/Sub-TOI: LTC03G Group Long Term Care/LTC03G.001 Qualified

Product Name: 2019 GLTC04 RATE INITIATIVE - PHASE I **Project Name/Number:** 2019 GLTC04 RATE INITIATIVE - PHASE I/

Objection Letter

Objection Letter Status Info has been requested from company

Objection Letter Date 10/27/2022 Submitted Date 10/27/2022 Respond By Date 11/26/2022

Dear Ellen Desrosiers,

Introduction:

The Bureau has the following concerns and/or needs additional information to continue its review.

Please note, any revisions, modifications, or changes of any type to this filing must be clearly identified and explained in detail. For clarity, multiple changes should be summarized in a cover letter, etc.

Objection 1

- Certificate Holder Letter, CHGLTC-T1-VA (Form)
- Certificate Holder Letter, CHGLTC-T2-VA (Form)

Comments: 1. Consider making all three Inflation Options variable in the 5th and 6th paragraphs. An employee and spouse may have different benefits and making each option variable will allow the letter to be better tailored to each employee. Be certain to fully describe any new variable information in the Statement of Variability (SOV).

- 2. For clarity, spell out what CPI stands for.
- 3. For clarity, the paragraphs at the end of page 2 that begin with, To review your plan change options and end with Unum Customer Service Center at might read better if the last paragraph replaced the first.
- 4. The first paragraph on page 3 mentions a statement outlining in force coverage and the cost for this coverage before the increase. Please provide a copy of this form and include it in the list of Attachments at the end of the letter.

Objection 2

- Frequently Asked Questions, GLTC-FAQ-VA (Form)
- Certificate Holder Letter, CHGLTC-T1-VA (Form)
- Certificate Holder Letter, CHGLTC-T2-VA (Form)

Comments: Once all revisions have been completed, make sure to provide updated "John Doe" versions of each form.

Objection 3

- Certificate Holder Letter, CHGLTC-T2-VA (Form)

Comments: For consistency, please revise the 4th paragraph to match the 5th paragraph in GLTC CH ECNF T1-2_cln_v3_VA - (final).pdf .

Objection 4

- Frequently Asked Questions, GLTC-FAQ-VA (Form)

Comments: In the 3rd paragraph on page 2, the certificate holder is told they have to submit any change requests 30 days in advance of the effective date. What happens if a certificate holder is unable to submit their requests by the 30-day deadline?

Conclusion:

We shall be glad to continue our review of this submission upon receipt of the requested information or resolution of the issues described above. Upon subsequent review, other concerns may require attention.

State: Virginia Filing Company: Unum Life Insurance Company of America

TOI/Sub-TOI: LTC03G Group Long Term Care/LTC03G.001 Qualified

Product Name: 2019 GLTC04 RATE INITIATIVE - PHASE I **Project Name/Number:** 2019 GLTC04 RATE INITIATIVE - PHASE I/

A response to this request for information is expected within 30 days. After 30 days, the filing will be DISAPPROVED and CLOSED unless an extension is requested. An initial extension of up to 30-days will be granted upon request made before the Respond By Date.

Once a submission has been closed, a new SERFF submission will be required. To expedite the review, the new submission should reference the SERFF tracking number of the prior submission and verify that all outstanding issues have been addressed. Should you wish to discuss any of the objections or provide additional information related to any of the objections, this should be done prior to making a new SERFF submission.

Please let me know if you need additional clarification.

Thank you for your courtesy and consideration in this matter.

Sincerely, Bobby Toone

State: Virginia Filing Company: Unum Life Insurance Company of America

TOI/Sub-TOI: LTC03G Group Long Term Care/LTC03G.001 Qualified

Product Name: 2019 GLTC04 RATE INITIATIVE - PHASE I **Project Name/Number:** 2019 GLTC04 RATE INITIATIVE - PHASE I/

Objection Letter

Objection Letter Status Info has been requested from company

Objection Letter Date 10/24/2022 Submitted Date 10/24/2022 Respond By Date 10/31/2022

Dear Ellen Desrosiers,

Introduction:

The Bureau has the following concerns and/or needs additional information to continue its review.

Please note, any revisions, modifications, or changes of any type to this filing must be clearly identified and explained in detail. For clarity, multiple changes should be summarized in a cover letter, etc.

Objection 1

- Frequently Asked Questions, GLTC-FAQ-VA (Form)

Comments: 1. Per a previous objection, does the company wish the phone numbers on this form to be variable, in case of a change? If so, please bracket the numbers and add a description to the Statement of Variability.

2. Virginia regulations require that the company's full licensed name appear at the top of each form. please correct.

Conclusion:

We shall be glad to continue our review of this submission upon receipt of the requested information or resolution of the issues described above. Upon subsequent review, other concerns may require attention.

A response to this request for information is expected within 30 days. After 30 days, the filing will be DISAPPROVED and CLOSED unless an extension is requested. An initial extension of up to 30-days will be granted upon request made before the Respond By Date.

Once a submission has been closed, a new SERFF submission will be required. To expedite the review, the new submission should reference the SERFF tracking number of the prior submission and verify that all outstanding issues have been addressed. Should you wish to discuss any of the objections or provide additional information related to any of the objections, this should be done prior to making a new SERFF submission.

Please let me know if you need additional clarification.

Thank you for your courtesy and consideration in this matt

Sincerely,

State: Virginia Filing Company: Unum Life Insurance Company of America

TOI/Sub-TOI: LTC03G Group Long Term Care/LTC03G.001 Qualified

Product Name: 2019 GLTC04 RATE INITIATIVE - PHASE I **Project Name/Number:** 2019 GLTC04 RATE INITIATIVE - PHASE I/

Objection Letter

Objection Letter Status Info has been requested from company

Objection Letter Date 10/24/2022 Submitted Date 10/24/2022 Respond By Date 10/31/2022

Dear Ellen Desrosiers,

Introduction:

The Bureau has the following concerns and/or needs additional information to continue its review.

Please note, any revisions, modifications, or changes of any type to this filing must be clearly identified and explained in detail. For clarity, multiple changes should be summarized in a cover letter, etc.

Objection 1

- Compound Inflation Rates (current, tier 1, tier 2) VA, [GLTC04, RGLTC04] (Rate)
- Simple Inflation Rates (current, tier 1, tier 2) VA, [GLTC04, RGLTC04] (Rate)

Comments: The rate files submitted 3/12/2021 (Compound Inflation Rates (current, tier 1, tier 2) - VA.xlsx (Updated) and Simple Inflation Rates (current, tier 1, tier 2) - VA.xlsx) both appear to be corrupted. Please correct.

Conclusion:

We shall be glad to continue our review of this submission upon receipt of the requested information or resolution of the issues described above. Upon subsequent review, other concerns may require attention.

A response to this request for information is expected within 30 days. After 30 days, the filing will be DISAPPROVED and CLOSED unless an extension is requested. An initial extension of up to 30-days will be granted upon request made before the Respond By Date.

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Please let me know if you need additional clarification.

Thank you for your courtesy and consideration in this matt

Sincerely,

State: Virginia Filing Company: Unum Life Insurance Company of America

TOI/Sub-TOI: LTC03G Group Long Term Care/LTC03G.001 Qualified

Product Name: 2019 GLTC04 RATE INITIATIVE - PHASE I **Project Name/Number:** 2019 GLTC04 RATE INITIATIVE - PHASE I/

Objection Letter

Objection Letter Status Info has been requested from company

Objection Letter Date 10/20/2022
Submitted Date 10/20/2022
Respond By Date 11/19/2022

Dear Ellen Desrosiers,

Introduction:

The Bureau has the following concerns and/or needs additional information to continue its review.

Please note, any revisions, modifications, or changes of any type to this filing must be clearly identified and explained in detail. For clarity, multiple changes should be summarized in a cover letter, etc.

Objection 1

- Certificate Holder Letter, CHGLTC-T1-VA (Form)

Comments: Please remove the "DRAFT" watermark from this form, as requested in the objection sent 10/19/2022.

Conclusion:

We shall be glad to continue our review of this submission upon receipt of the requested information or resolution of the issues described above. Upon subsequent review, other concerns may require attention.

A response to this request for information is expected within 30 days. After 30 days, the filing will be DISAPPROVED and CLOSED unless an extension is requested. An initial extension of up to 30-days will be granted upon request made before the Respond By Date.

Once a submission has been closed, a new SERFF submission will be required. To expedite the review, the new submission should reference the SERFF tracking number of the prior submission and verify that all outstanding issues have been addressed. Should you wish to discuss any of the objections or provide additional information related to any of the objections, this should be done prior to making a new SERFF submission.

Please let me know if you need additional clarification.

Thank you for your courtesy and consideration in this matt Sincerely, Bobby Toone

State: Virginia Filing Company: Unum Life Insurance Company of America

TOI/Sub-TOI: LTC03G Group Long Term Care/LTC03G.001 Qualified

Product Name: 2019 GLTC04 RATE INITIATIVE - PHASE I **Project Name/Number:** 2019 GLTC04 RATE INITIATIVE - PHASE I/

Objection Letter

Objection Letter Status Info has been requested from company

Objection Letter Date 10/19/2022 Submitted Date 10/19/2022 Respond By Date 11/19/2022

Dear Ellen Desrosiers,

Introduction:

The Bureau has the following concerns and/or needs additional information to continue its review.

Please note, any revisions, modifications, or changes of any type to this filing must be clearly identified and explained in detail. For clarity, multiple changes should be summarized in a cover letter, etc.

Objection 1

- Certificate Amendment Contingent Non-Forfeiture Benefit, 04CBUL22G-VA (Form)
- Certificate Amendment Enhanced Contingent Non-Forfeiture Benefit, 04CBUL22G-APO-VA (Form)

Comments: In compliance with Virginia Regulation 14VAC5-101-60 5, please provide a "John Doe" copy of each form, sufficiently filled out to indicate how it is to be used.

Conclusion:

We shall be glad to continue our review of this submission upon receipt of the requested information or resolution of the issues described above. Upon subsequent review, other concerns may require attention.

A response to this request for information is expected within 30 days. After 30 days, the filing will be DISAPPROVED and CLOSED unless an extension is requested. An initial extension of up to 30-days will be granted upon request made before the Respond By Date.

Once a submission has been closed, a new SERFF submission will be required. To expedite the review, the new submission should reference the SERFF tracking number of the prior submission and verify that all outstanding issues have been addressed. Should you wish to discuss any of the objections or provide additional information related to any of the objections, this should be done prior to making a new SERFF submission.

Please let me know if you need additional clarification.

Thank you for your courtesy and consideration in this matt Sincerely, Bobby Toone

State: Virginia Filing Company: Unum Life Insurance Company of America

TOI/Sub-TOI: LTC03G Group Long Term Care/LTC03G.001 Qualified

Product Name: 2019 GLTC04 RATE INITIATIVE - PHASE I **Project Name/Number:** 2019 GLTC04 RATE INITIATIVE - PHASE I/

Objection Letter

Objection Letter Status Info has been requested from company

Objection Letter Date 10/19/2022 Submitted Date 10/19/2022 Respond By Date 11/18/2022

Dear Ellen Desrosiers,

Introduction:

The Bureau has the following concerns and/or needs additional information to continue its review.

Please note, any revisions, modifications, or changes of any type to this filing must be clearly identified and explained in detail. For clarity, multiple changes should be summarized in a cover letter, etc.

Objection 1

- Certificate Holder Letter, CHGLTC-T1-VA (Form)
- Sample Certificate Holder Letters (Supporting Document)

Comments: As a Policyholder Letter is expected to be submitted in its final form, please remove the DRAFT watermark from the form.

Please remove the SAMPLE watermark from the John Doe versions as well.

Objection 2

- Certificate Holder Letter, CHGLTC-T1-VA (Form)

Comments: Please specify if a return envelope will be included with the Policyholder Notification letter and other forms. If so, please include it in the Attachments at the end of the letter.

Conclusion:

We shall be glad to continue our review of this submission upon receipt of the requested information or resolution of the issues described above. Upon subsequent review, other concerns may require attention.

A response to this request for information is expected within 30 days. After 30 days, the filing will be DISAPPROVED and CLOSED unless an extension is requested. An initial extension of up to 30-days will be granted upon request made before the Respond By Date.

Once a submission has been closed, a new SERFF submission will be required. To expedite the review, the new submission should reference the SERFF tracking number of the prior submission and verify that all outstanding issues have been addressed. Should you wish to discuss any of the objections or provide additional information related to any of the objections, this should be done prior to making a new SERFF submission.

Please let me know if you need additional clarification.

Thank you for your courtesy and consideration in this matt

Sincerely,

State: Virginia Filing Company: Unum Life Insurance Company of America

TOI/Sub-TOI: LTC03G Group Long Term Care/LTC03G.001 Qualified

Product Name: 2019 GLTC04 RATE INITIATIVE - PHASE I **Project Name/Number:** 2019 GLTC04 RATE INITIATIVE - PHASE I/

Objection Letter

Objection Letter Status Info has been requested from company

Objection Letter Date 09/08/2022
Submitted Date 09/08/2022
Respond By Date 10/08/2022

Dear Ellen Desrosiers,

Introduction:

The Bureau has the following concerns and/or needs additional information to continue its review.

Please note, any revisions, modifications, or changes of any type to this filing must be clearly identified and explained in detail. For clarity, multiple changes should be summarized in a cover letter, etc.

Objection 1

- Certificate Amendment Contingent Non-Forfeiture Benefit, 04CBUL22G-VA (Form)
- Certificate Amendment Enhanced Contingent Non-Forfeiture Benefit, 04CBUL22G-APO-VA (Form)
- Frequently Asked Questions, GLTC-FAQ-VA (Form)

Comments: The company may consider add brackets around the company address, phone numbers, and office hours in the event those items need to be changed. If this is done, be certain to add a description in the Statement of Variability.

Conclusion:

We shall be glad to continue our review of this submission upon receipt of the requested information or resolution of the issues described above. Upon subsequent review, other concerns may require attention.

A response to this request for information is expected within 30 days. After 30 days, the filing will be DISAPPROVED and CLOSED unless an extension is requested. An initial extension of up to 30-days will be granted upon request made before the Respond By Date.

Once a submission has been closed, a new SERFF submission will be required. To expedite the review, the new submission should reference the SERFF tracking number of the prior submission and verify that all outstanding issues have been addressed. Should you wish to discuss any of the objections or provide additional information related to any of the objections, this should be done prior to making a new SERFF submission.

Please let me know if you need additional clarification.

Thank you for your courtesy and consideration in this matter.

Sincerely,

State: Virginia Filing Company: Unum Life Insurance Company of America

TOI/Sub-TOI: LTC03G Group Long Term Care/LTC03G.001 Qualified

Product Name: 2019 GLTC04 RATE INITIATIVE - PHASE I **Project Name/Number:** 2019 GLTC04 RATE INITIATIVE - PHASE I/

Objection Letter

Objection Letter Status Info has been requested from company

Objection Letter Date 05/13/2022
Submitted Date 05/13/2022
Respond By Date 06/12/2022

Dear Ellen Desrosiers,

Introduction:

The Bureau has the following concerns and/or needs additional information to continue its review.

Please note, any revisions, modifications, or changes of any type to this filing must be clearly identified and explained in detail. For clarity, multiple changes should be summarized in a cover letter, etc.

Objection 1

- Frequently Asked Questions, GLTC-FAQ-VA (Form)
- Certificate Holder Letter, CHGLTC-T1-VA (Form)
- Certificate Holder Letter, CHGLTC-T2-VA (Form)
- Group Long Term Care Request to Change Coverage, AE1181-VA (Form)
- Sample Certificate Holder Letter (Supporting Document)

Comments: Please submit revised "John Doe" versions of each of the above noted forms.

Conclusion:

We shall be glad to continue our review of this submission upon receipt of the requested information or resolution of the issues described above. Upon subsequent review, other concerns may require attention.

A response to this request for information is expected within 30 days. After 30 days, the filing will be DISAPPROVED and CLOSED unless an extension is requested. An initial extension of up to 30-days will be granted upon request made before the Respond By Date.

Once a submission has been closed, a new SERFF submission will be required. To expedite the review, the new submission should reference the SERFF tracking number of the prior submission and verify that all outstanding issues have been addressed. Should you wish to discuss any of the objections or provide additional information related to any of the objections, this should be done prior to making a new SERFF submission.

Please let me know if you need additional clarification.

Thank you for your courtesy and consideration in this matter.

Sincerely,

State: Virginia Filing Company: Unum Life Insurance Company of America

TOI/Sub-TOI: LTC03G Group Long Term Care/LTC03G.001 Qualified

Product Name: 2019 GLTC04 RATE INITIATIVE - PHASE I **Project Name/Number:** 2019 GLTC04 RATE INITIATIVE - PHASE I/

Objection Letter

Objection Letter Status Info has been requested from company

Objection Letter Date 01/05/2022
Submitted Date 01/05/2022
Respond By Date 02/04/2022

Dear Ellen Desrosiers,

Introduction:

The Bureau has the following concerns and/or needs additional information to continue its review.

Please note, any revisions, modifications, or changes of any type to this filing must be clearly identified and explained in detail. For clarity, multiple changes should be summarized in a cover letter, etc.

Objection 1

- Certificate Holder Letter, CHGLTC-T1-VA (Form)
- Certificate Holder Letter, CHGLTC-T2-VA (Form)

Comments: At the end of each letter, include a section of "Enclosures". This will be a list of all forms included with the policyholder notification. Any forms that would only be sent to certain policyholders should be noted as variable, with a description of the variability shown in the Statement of Variability.

Objection 2

- Certificate Holder Letter, CHGLTC-T1-VA (Form)
- Certificate Holder Letter, CHGLTC-T2-VA (Form)

Comments: Referring to the [Date Created] on the first page, please verify that a policyholder will have a minimum of 75 days, from the time the letter is received, to make an informed decision about their insurance coverage.

Objection 3

- Certificate Holder Letter, CHGLTC-T1-VA (Form)
- Certificate Holder Letter, CHGLTC-T2-VA (Form)

Comments: In accordance with Virginia Regulation 14VAC5-200-75, please provide a statement describing the policyholder's options in the event of future rate increases.

Objection 4

- Certificate Holder Letter, CHGLTC-T1-VA (Form)
- Certificate Holder Letter, CHGLTC-T2-VA (Form)

Comments: As mentioned in the section of the letter labeled "Your current coverage" please include a copy of the statement used to show current coverage and cost for this coverage.

Objection 5

- Certificate Holder Letter, CHGLTC-T1-VA (Form)
- Certificate Holder Letter, CHGLTC-T2-VA (Form)

Comments: Please verify the website, https://longtermcare.acl.gov/costs-how-to-pay/costs-of-care.html, is correct. We attempted to reach the site and were unable to connect.

Objection 6

- Certificate Holder Letter, CHGLTC-T1-VA (Form)
- Certificate Holder Letter, CHGLTC-T2-VA (Form)

Comments: In the section of the letter titled "Why the increase in premium", please include a statement in compliance with Virginia Regulation 14VAC5-200-75 A4(b), which gives the policyholder(certificate holder) the right to a revised rate or rate schedule

State: Virginia Filing Company: Unum Life Insurance Company of America

TOI/Sub-TOI: LTC03G Group Long Term Care/LTC03G.001 Qualified

Product Name: 2019 GLTC04 RATE INITIATIVE - PHASE I **Project Name/Number:** 2019 GLTC04 RATE INITIATIVE - PHASE I/

in the event of a premium rate increase.

Objection 7

- Certificate Holder Letter, CHGLTC-T1-VA (Form)
- Certificate Holder Letter, CHGLTC-T2-VA (Form)

Comments: Virginia Regulation 14VAC5-100-50 2 requires that the full and proper name of the company appear prominently on the form. Please include the full name of the company above the address.

Objection 8

- Certificate Holder Letter, CHGLTC-T1-VA (Form)
- Certificate Holder Letter, CHGLTC-T2-VA (Form)

Comments: Please specify whether there are any partnership policies in this block of business. If there are such policies, please include a disclosure that some benefit reduction options may result in a loss of partnership status that may reduce policyholder protections.

A disclosure such as this should be emphasized, such as bold, highlight, larger print, etc.

Objection 9

- Frequently Asked Questions, VA-GLTC04-FAQ (Form)
- Certificate Holder Letter, CHGLTC-T1-VA (Form)
- Certificate Holder Letter, CHGLTC-T2-VA (Form)
- Group Long Term Care Request to Change Coverage, AE1181-VA (Form)

Comments: Although not required, the company may consider bracketing the home office address, phone number, and website to simplify the process if a change is ever made. This would also apply to the company contact number listed in the body of the letter and or any other forms.

Objection 10

- Certificate Holder Letter, CHGLTC-T1-VA (Form)
- Certificate Holder Letter, CHGLTC-T2-VA (Form)

Comments: Please revise the paragraph on page one of the policyholder letter to more closely match Virginia Regulation 14VAC5-200-75 D4. A more acceptable version might be the following:

"The rate increase request was reviewed by the Virginia State Corporation Commission and was found to be compliant with applicable Virginia laws and regulations addressing long-term care insurance. All premium rate filings are available for public inspection and may be accessed online through the State Corporation Commission's webpage at https://scc.virginia.gov/boi/SERFFInquiry/LtcFilings.aspx

.The rate increase will be incrementally applied..."

Objection 11

- Certificate Holder Letter, CHGLTC-T1-VA (Form)

Comments: Will this letter be sent to policyholders without any type of inflation protection? If not, is the paragraph that starts with "You are receiving this notification package..." a necessary part of the letter?

Objection 12

- Certificate Holder Letter, CHGLTC-T1-VA (Form)

Comments: We could not find either instance of the variable item, "[For coverage that includes CPI Benefit, the increase will be approximately [x%].]" in the letter. Please explain and make the necessary revisions.

Objection 13

State: Virginia Filing Company: Unum Life Insurance Company of America

TOI/Sub-TOI: LTC03G Group Long Term Care/LTC03G.001 Qualified

Product Name: 2019 GLTC04 RATE INITIATIVE - PHASE I **Project Name/Number:** 2019 GLTC04 RATE INITIATIVE - PHASE I/

- Certificate Holder Letter, CHGLTC-T1-VA (Form)
- Statement of Variability (Supporting Document)

Comments: The variability in the sixth paragraph of the letter does not match the description on item 10 in the SOV. Please correct.

Objection 14

- Certificate Holder Letter, CHGLTC-T1-VA (Form)
- Statement of Variability (Supporting Document)

Comments: The variable item [include info site link here in bold] in the letter does not match the description in the SOV. Please correct.

Objection 15

- Statement of Variability (Supporting Document)

Comments: Please explain item number 13 in the SOV section referring to Certificateholder letter Teir 1.

Objection 16

- Certificate Holder Letter, CHGLTC-T1-VA (Form)
- Certificate Holder Letter, CHGLTC-T2-VA (Form)

Comments: The Bureau that the 4th paragraph of both letters as well as the 5th and 6th paragraphs of CHGLTC-T1-VA, could be confusing to a certificate holder to receive a letter talking about both Simple and Compound Inflation protection.

We would suggest making each sentence variable, that describes the type of inflation protection. For example: [For coverage that includes Simple inflation...]. this would allow each letter to be more tailored to each individual.

Objection 17

- Certificate Amendment Contingent Non-Forfeiture Benefit, 04CNF19G-VA (Form)
- Certificate Amendment Enhanced Contingent Non-Forfeiture Benefit, 04ECNF19G-APO-VA (Form)

Comments: Forms 04CNF19G-VA and 04ECNF19G-APO-VA provide a contingent benefit upon lapse. While the nonforfeiture benefit and the contingent benefit upon lapse provide similar benefits, the contingent benefit upon lapse is a separate offer from the benefit provided in a nonforfeiture rider. As such, the endorsement should not be referred to or considered the same as a nonforfeiture benefit.

Conclusion:

We shall be glad to continue our review of this submission upon receipt of the requested information or resolution of the issues described above. Upon subsequent review, other concerns may require attention.

A response to this request for information is expected within 30 days. After 30 days, the filing will be DISAPPROVED and CLOSED unless an extension is requested. An initial extension of up to 30-days will be granted upon request made before the Respond By Date.

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Please let me know if you need additional clarification.

Thank you for your courtesy and consideration in this matter.

Sincerely,

State: Virginia Filing Company: Unum Life Insurance Company of America

TOI/Sub-TOI: LTC03G Group Long Term Care/LTC03G.001 Qualified

Product Name: 2019 GLTC04 RATE INITIATIVE - PHASE I **Project Name/Number:** 2019 GLTC04 RATE INITIATIVE - PHASE I/

State: Virginia Filing Company: Unum Life Insurance Company of America

TOI/Sub-TOI: LTC03G Group Long Term Care/LTC03G.001 Qualified

Product Name: 2019 GLTC04 RATE INITIATIVE - PHASE I **Project Name/Number:** 2019 GLTC04 RATE INITIATIVE - PHASE I/

Objection Letter

Objection Letter Status Info has been requested from company

Objection Letter Date 12/10/2021 Submitted Date 12/10/2021 Respond By Date 01/09/2022

Dear Ellen Desrosiers,

Introduction:

The Bureau has the following concerns and/or needs additional information to continue its review.

Please note, any revisions, modifications, or changes of any type to this filing must be clearly identified and explained in detail. For clarity, multiple changes should be summarized in a cover letter, etc.

Objection 1

Comments: The rate review for this filing is complete, however the filing cannot be approved until the forms review is complete. No response to this objection is required.

Conclusion:

We shall be glad to continue our review of this submission upon receipt of the requested information or resolution of the issues described above. Upon subsequent review, other concerns may require attention.

A response to this request for information is expected within 30 days. After 30 days, the filing will be DISAPPROVED and CLOSED unless an extension is requested. An initial extension of up to 30-days will be granted upon request made before the Respond By Date.

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Please let me know if you need additional clarification.

Thank you for your courtesy and consideration in this matter.

Sincerely,

State: Virginia Filing Company: Unum Life Insurance Company of America

TOI/Sub-TOI: LTC03G Group Long Term Care/LTC03G.001 Qualified

Product Name: 2019 GLTC04 RATE INITIATIVE - PHASE I **Project Name/Number:** 2019 GLTC04 RATE INITIATIVE - PHASE I/

Objection Letter

Objection Letter Status Info has been requested from company

Objection Letter Date 07/21/2021
Submitted Date 07/21/2021
Respond By Date 08/20/2021

Dear Ellen Desrosiers,

Introduction:

The Bureau has the following concerns and/or needs additional information to continue its review.

Please note, any revisions, modifications, or changes of any type to this filing must be clearly identified and explained in detail. For clarity, multiple changes should be summarized in a cover letter, etc.

Objection 1

- Certificate Holder Letter, CHGLTC-T1-VA (Form)
- Certificate Holder Letter, CHGLTC-T2-VA (Form)
- Sample Certificate Holder Letter (Supporting Document)

Comments: Each form submitted for review should be submitted in it's final form. Please remove "DRAFT" from the above noted forms.

Objection 2

- Certificate Holder Letter, CHGLTC-T1-VA (Form)
- Certificate Holder Letter, CHGLTC-T2-VA (Form)
- Sample Certificate Holder Letter (Supporting Document)

Comments: Is it he company's intention to keep the information highlighted in blue and orange in the final form of the letters that will go out to policyholders? If not, please remove the colored highlights.

Conclusion:

We shall be glad to continue our review of this submission upon receipt of the requested information or resolution of the issues described above. Upon subsequent review, other concerns may require attention.

A response to this request for information is expected within 30 days. After 30 days, the filing will be DISAPPROVED and CLOSED unless an extension is requested. An initial extension of up to 30-days will be granted upon request made before the Respond By Date.

Once a submission has been closed, a new SERFF submission will be required. To expedite the review, the new submission should reference the SERFF tracking number of the prior submission and verify that all outstanding issues have been addressed. Should you wish to discuss any of the objections or provide additional information related to any of the objections, this should be done prior to making a new SERFF submission.

Please let me know if you need additional clarification.

Thank you for your courtesy and consideration in this matter.

Sincerely,

State: Virginia Filing Company: Unum Life Insurance Company of America

TOI/Sub-TOI: LTC03G Group Long Term Care/LTC03G.001 Qualified

Product Name: 2019 GLTC04 RATE INITIATIVE - PHASE I **Project Name/Number:** 2019 GLTC04 RATE INITIATIVE - PHASE I/

Objection Letter

Objection Letter Status Info has been requested from company

Objection Letter Date 04/12/2021 Submitted Date 04/12/2021 Respond By Date 04/26/2021

Dear Ellen Desrosiers,

Introduction:

The Bureau has the following concerns and/or needs additional information to continue its review.

Please note, any revisions, modifications, or changes of any type to this filing must be clearly identified and explained in detail. For clarity, multiple changes should be summarized in a cover letter, etc.

Objection 1

- Compound Inflation Rates (current, tier 1, tier 2) VA, [GLTC04, RGLTC04] (Rate)
- Simple Inflation Rates (current, tier 1, tier 2) VA, [GLTC04, RGLTC04] (Rate)

Comments: Please submit a post submission update to revise the Company Rate Information section of the Rate/Rule Schedule to reflect the change in the requested rate increase.

Conclusion:

We shall be glad to continue our review of this submission upon receipt of the requested information or resolution of the issues described above. Upon subsequent review, other concerns may require attention.

A response to this request for information is expected within 30 days. After 30 days, the filing will be DISAPPROVED and CLOSED unless an extension is requested. An initial extension of up to 30-days will be granted upon request made before the Respond By Date.

Once a submission has been closed, a new SERFF submission will be required. To expedite the review, the new submission should reference the SERFF tracking number of the prior submission and verify that all outstanding issues have been addressed. Should you wish to discuss any of the objections or provide additional information related to any of the objections, this should be done prior to making a new SERFF submission.

Please let me know if you need additional clarification.

Thank you for your courtesy and consideration in this matter.

Sincerely,

State: Virginia Filing Company: Unum Life Insurance Company of America

TOI/Sub-TOI: LTC03G Group Long Term Care/LTC03G.001 Qualified

Product Name: 2019 GLTC04 RATE INITIATIVE - PHASE I **Project Name/Number:** 2019 GLTC04 RATE INITIATIVE - PHASE I/

Objection Letter

Objection Letter Status Info has been requested from company

Objection Letter Date 03/08/2021
Submitted Date 03/08/2021
Respond By Date 04/07/2021

Dear Ellen Desrosiers,

Introduction:

The Bureau has the following concerns and/or needs additional information to continue its review.

Please note, any revisions, modifications, or changes of any type to this filing must be clearly identified and explained in detail. For clarity, multiple changes should be summarized in a cover letter, etc.

Objection 1

- Certificate Holder Letter, CHGLTC-T1-VA (Form)
- Certificate Holder Letter, CHGLTC-T2-VA (Form)
- Sample Certificate Holder Letters (Supporting Document)

Comments: Both policyholder letters and the sample letter seem to imply the requested increase will be implemented over 2 years. There has been no mention of this in any of the rates or actuarial information.

If the company wishes to implement this increase over 2-3 years, please notify the Bureau.

Objection 2

- Certificate Holder Letter, CHGLTC-T1-VA (Form)

Comments: In the 4th and 5th paragraphs on page 1 of the letter, please explain why the phrases describing the increase for simple inflation and compound inflation blocks would not be variable. As it is, it could give the impression that all policyholders have both simple and compound inflation protection.

Objection 3

- Certificate Holder Letter, CHGLTC-T1-VA (Form)

Comments: Please submit a copy of the Request to Change Coverage Form. If the form has been previously approved by the Virginia Bureau, submit it through Supporting Documentation, and include the SERFF tracking number in which the form was originally submitted.

If the form is a new form, submit it through the Forms Schedule for review and approval.

Objection 4

- VA Proposed Rates GLTC04&RGLTC04 2019, [GLTC04, RGLTC04] (Rate)
- L&H Actuarial Memorandum (Supporting Document)
- Long Term Care Insurance Rate Request Summary (Supporting Document)

Comments: We have received the revised rates for this filing. In addition to the Rate/Rule Schedule, the Actuarial Memorandum will also need to be updated to reflect the 2-year implementation as well as the loss ratio exhibits.

The LTC Rate Request Summary will need to be revised to show the new increase amounts (dont need to show both increases, just the total). Please use the revised LTC Rate Request Summary attached below.

UNUM-131895942 will need to be treated the same way. Even though theres only a small change being implemented, it still needs to be documented the same way.

State: Virginia Filing Company: Unum Life Insurance Company of America

TOI/Sub-TOI: LTC03G Group Long Term Care/LTC03G.001 Qualified

Product Name: 2019 GLTC04 RATE INITIATIVE - PHASE I **Project Name/Number:** 2019 GLTC04 RATE INITIATIVE - PHASE I/

Conclusion:

We shall be glad to continue our review of this submission upon receipt of the requested information or resolution of the issues described above. Upon subsequent review, other concerns may require attention.

A response to this request for information is expected within 30 days. After 30 days, the filing will be DISAPPROVED and CLOSED unless an extension is requested. An initial extension of up to 30-days will be granted upon request made before the Respond By Date.

Once a submission has been closed, a new SERFF submission will be required. To expedite the review, the new submission should reference the SERFF tracking number of the prior submission and verify that all outstanding issues have been addressed. Should you wish to discuss any of the objections or provide additional information related to any of the objections, this should be done prior to making a new SERFF submission.

Please let me know if you need additional clarification.

Thank you for your courtesy and consideration in this matter. Sincerely,

Long Term Care Insurance Rate Request Summary Part 1 – To Be Completed By Company

SERFF Tracking Nu Revised Rates Average Ar Average Re Range of Ro	and NAIC Number: umber: nnual Premium Per Member: equested Percentage Rate Change Per equested Rate Changes: Virginia Policyholders Affected:	Member:		
Form Number	Product Name	Issue Dates	Prior Rate Increases – Date and Percentage Approved	Outlook for Future Rate Increases

Attach a narrative to summarize the key information used to develop the rates including the main drivers for the revised rates.

This document is prepared by the carrier to help explain the requested rate change and is only a summary of the company's request. It is not intended to describe or include all factors or information considered in the review process. For more detailed information, please refer to the complete filing at https://www.scc.virginia.gov/boi/SERFFInquiry/default.aspx. (Rev. 06/19)

State: Virginia Filing Company: Unum Life Insurance Company of America

TOI/Sub-TOI: LTC03G Group Long Term Care/LTC03G.001 Qualified

Product Name: 2019 GLTC04 RATE INITIATIVE - PHASE I **Project Name/Number:** 2019 GLTC04 RATE INITIATIVE - PHASE I/

Objection Letter

Objection Letter Status Info has been requested from company

Objection Letter Date 02/17/2021
Submitted Date 02/17/2021
Respond By Date 03/19/2021

Dear Ellen Desrosiers,

Introduction:

The Bureau has the following concerns and/or needs additional information to continue its review.

Please note, any revisions, modifications, or changes of any type to this filing not specifically requested by us must be brought to our attention upon resubmission and explained in detail.

Objection 1

- L&H Actuarial Memorandum (Supporting Document)

Comments: Section 21 of the Actuarial Memorandum states that this rate increase will apply to policies on their anniversary date following a 60-day policyholder notification period.

Virginia Regulation 14VAC5-200-75 D requires that an insurer shall provide notice of an upcoming premium increase at least 75 days prior to the implementation date of the requested increase. Please make the necessary revisions to comply with the regulation.

Conclusion:

We will be glad to continue our review of this submission upon receipt of the requested information or resolution of the issues described above. Upon subsequent review, other concerns may require attention.

A response to this request for information is expected within 30 days. After 30 days, the filing will be DISAPPROVED and CLOSED unless an extension is requested. An initial extension of up to 30-days will be granted upon request before the Respond By Date.

Once a submission has been closed, a new SERFF submission will be required. To expedite the review, the new submission should reference the SERFF tracking number of the prior submission and verify that all outstanding issues have been addressed. Should you wish to discuss any of the objections or provide additional information related to any of the objections, this should be done prior to making a new SERFF submission.

Should you need clarification, please contact me

Thank you for your courtesy and consideration in this matter.

Sincerely,

State: Virginia Filing Company: Unum Life Insurance Company of America

TOI/Sub-TOI: LTC03G Group Long Term Care/LTC03G.001 Qualified

Product Name: 2019 GLTC04 RATE INITIATIVE - PHASE I **Project Name/Number:** 2019 GLTC04 RATE INITIATIVE - PHASE I/

Objection Letter

Objection Letter Status Info has been requested from company

Objection Letter Date 01/11/2021
Submitted Date 01/11/2021
Respond By Date 01/25/2021

Dear Ellen Desrosiers,

Introduction:

The Bureau has the following concerns and/or needs additional information to continue its review.

Please note, any revisions, modifications, or changes of any type to this filing not specifically requested by us must be brought to our attention upon resubmission and explained in detail.

Objection 1

- L&H Actuarial Memorandum (Supporting Document)

Comments: In your 2017 Long-Term Care Annual Report (UNUM-131551857), premiums were considered sufficient with a nationwide lifetime loss ratio of 119%. Please explain why it is necessary to reach a loss ratio of 70%, when 119% was considered sufficient.

Conclusion:

We will be glad to continue our review of this submission upon receipt of the requested information or resolution of the issues described above. Upon subsequent review, other concerns may require attention.

A response to this objection (or request for information if more applicable) is expected within 30 days. After 30 days, the filing will be DISAPPROVED unless a 30-day extension is requested.

Once a submission has been closed, a new SERFF submission will be required. To expedite the review, the new submission should reference the SERFF tracking number of the prior submission and verify that all outstanding issues have been addressed.

Should you wish to discuss any of the objections or provide additional information related to any of the objections, this should be done prior to making a new SERFF submission.

Thank you for your courtesy and consideration in this matter.

Sincerely,

State: Virginia Filing Company: Unum Life Insurance Company of America

TOI/Sub-TOI: LTC03G Group Long Term Care/LTC03G.001 Qualified

Product Name: 2019 GLTC04 RATE INITIATIVE - PHASE I **Project Name/Number:** 2019 GLTC04 RATE INITIATIVE - PHASE I/

Objection Letter

Objection Letter Status Info has been requested from company

Objection Letter Date 12/21/2020 Submitted Date 12/21/2020 Respond By Date 01/20/2021

Dear Ellen Desrosiers,

Introduction:

The submission is DISAPPROVED and may not be used in the Commonwealth of Virginia.

One or more forms included within the submission were found to be in non-conformity with statutory, regulatory or administrative requirements as set forth below.

Objection 1

- Certificate Holder Letter, CH-GLTC04-VA (Form)

Comments: On page 2 of the letter, in the space labeled [include info site link here in bold], please provide the actual weblink the policyholder will use.

Conclusion:

We shall be glad to reconsider this submission upon receipt of the revised forms to address the objections noted above. Should you need clarification of any of the information contained in this letter, please contact the undersigned.

A response to this objection (or request for information if more applicable) is expected within 30 days. After 30 days, the filing will be DISAPPROVED unless a 30-day extension is requested.

Once a submission has been closed, a new SERFF submission will be required. To expedite the review, the new submission should reference the SERFF tracking number of the prior submission and verify that all outstanding issues have been addressed.

Should you wish to discuss any of the objections or provide additional information related to any of the objections, this should be done prior to making a new SERFF submission.

Thank you for your courtesy and consideration in this matter.

Sincerely,

State: Virginia Filing Company: Unum Life Insurance Company of America

TOI/Sub-TOI: LTC03G Group Long Term Care/LTC03G.001 Qualified

Product Name: 2019 GLTC04 RATE INITIATIVE - PHASE I **Project Name/Number:** 2019 GLTC04 RATE INITIATIVE - PHASE I/

Objection Letter

Objection Letter Status Info has been requested from company

Objection Letter Date 10/19/2020 Submitted Date 10/19/2020 Respond By Date 11/02/2020

Dear Ellen Desrosiers,

Introduction:

The Bureau has the following concerns and/or needs additional information to continue its review.

Please note, any revisions, modifications, or changes of any type to this filing not specifically requested by us must be brought to our attention upon resubmission and explained in detail.

Objection 1

- L&H Actuarial Memorandum (Supporting Document)

Comments: The Actuarial memorandum shows that these policies were sold and issued between 2004 and 2012. According to that, the newest policies have been in effect for 8+ years. Please explain why, with all the concern and publicity about long-term care insurance in recent years, it has taken so long to file a rate increase request.

Objection 2

Comments: Virginia Regulation 14VAC5-200-125 requires that every insurer shall report to the commission premium rates for all long-term care insurance policies. We could find no record that any annual report had ever been filed for these policy forms (GLTC04 and RGLTC04). Please explain why no annual reports have been filed for these policy forms.

Objection 3

Comments: Please state if there are any other blocks that have not had annual reports filed in any year.

Conclusion:

We will be glad to continue our review of this submission upon receipt of the requested information or resolution of the issues described above. Upon subsequent review, other concerns may require attention.

A response to this objection (or request for information if more applicable) is expected within 30 days. After 30 days, the filing will be DISAPPROVED unless a 30-day extension is requested.

Once a submission has been closed, a new SERFF submission will be required. To expedite the review, the new submission should reference the SERFF tracking number of the prior submission and verify that all outstanding issues have been addressed.

Should you wish to discuss any of the objections or provide additional information related to any of the objections, this should be done prior to making a new SERFF submission.

Thank you for your courtesy and consideration in this matter.

Sincerely,

State: Virginia Filing Company: Unum Life Insurance Company of America

TOI/Sub-TOI: LTC03G Group Long Term Care/LTC03G.001 Qualified

Product Name: 2019 GLTC04 RATE INITIATIVE - PHASE I **Project Name/Number:** 2019 GLTC04 RATE INITIATIVE - PHASE I/

Objection Letter

Objection Letter Status Info has been requested from company

Objection Letter Date 04/07/2020 Submitted Date 04/07/2020 Respond By Date 05/07/2020

Dear Ellen Desrosiers,

Introduction:

The Bureau has the following concerns and/or needs additional information to continue its review.

Please note, any revisions, modifications, or changes of any type to this filing not specifically requested by us must be brought to our attention upon resubmission and explained in detail.

Objection 1

- L&H Actuarial Memorandum (Supporting Document)

Comments: 1.Please provide the active life reserve balance on a nationwide basis as of 12/31/2018, separately for the policies with compound inflation and simple inflation.

2.Please provide the calculation and data which you used in response to Objection 5 of the 2/19/2020 Objection Letter. We were unable to match the nationwide average rate increase values using the data in Exhibit 3.

Conclusion:

We will be glad to continue our review of this submission upon receipt of the requested information or resolution of the issues described above. Upon subsequent review, other concerns may require attention.

A response to this objection (or request for information if more applicable) is expected within 30 days. After 30 days, the filing will be DISAPPROVED unless a 30-day extension is requested.

Once a submission has been closed, a new SERFF submission will be required. To expedite the review, the new submission should reference the SERFF tracking number of the prior submission and verify that all outstanding issues have been addressed.

Should you wish to discuss any of the objections or provide additional information related to any of the objections, this should be done prior to making a new SERFF submission.

Thank you for your courtesy and consideration in this matter.

Sincerely,

Bobby Toone

State: Virginia Filing Company: Unum Life Insurance Company of America

TOI/Sub-TOI: LTC03G Group Long Term Care/LTC03G.001 Qualified

Product Name: 2019 GLTC04 RATE INITIATIVE - PHASE I **Project Name/Number:** 2019 GLTC04 RATE INITIATIVE - PHASE I/

Objection Letter

Objection Letter Status
Objection Letter Date
Objection Letter Date
Submitted Date
O2/21/2020
Respond By Date
O3/22/2020

Dear Ellen Desrosiers,

Introduction:

Unum Life Insurance Company of America

SERFF Tracking No: UNUM-131865115

Form Nos.: 04CNF19G -VA and 04ECNF19G-APO - VA

The submission is DISAPPROVED and may not be used in the Commonwealth of Virginia.

The forms included within the submission were found to be in non-conformity with statutory, regulatory or administrative requirements as set forth below.

Objection 1

- Certificate Amendment Contingent Non-Forfeiture Benefit, 04CNF19G-VA (Form)
- Certificate Amendment Enhanced Contingent Non-Forfeiture Benefit, 04ECNF19G-APO-VA (Form)

Comments: Please provide us with the certification of readability required by 14 VAC 5-110-60.

Objection 2

- Certificate Amendment Contingent Non-Forfeiture Benefit, 04CNF19G-VA (Form)
- Certificate Amendment Enhanced Contingent Non-Forfeiture Benefit, 04ECNF19G-APO-VA (Form)

Comments: 14 VAC 5-100-50 2 requires that the full and proper corporate name appear prominently on the form. The logo should not appear more prominently than the corporate name, and the font size of the corporate name should not be smaller than other text.

Objection 3

- Certificate Amendment Contingent Non-Forfeiture Benefit, 04CNF19G-VA (Form)
- Certificate Amendment Enhanced Contingent Non-Forfeiture Benefit, 04ECNF19G-APO-VA (Form)

Comments: Please advise if the street address, the officers signature, and the officers title are intended to be variable. If so, the fields should be bracketed and described in a statement of variability (SOV).

Objection 4

- Certificate Amendment Contingent Non-Forfeiture Benefit, 04CNF19G-VA (Form)
- Certificate Amendment Enhanced Contingent Non-Forfeiture Benefit, 04ECNF19G-APO-VA (Form)

Comments: The form contains variable fields. Even though the fields are self-explanatory, please provide us with a SOV that describes how these fields are subject to change.

Conclusion:

We shall be glad to reconsider this submission upon receipt of the revised forms to address the objections noted above. Should you need clarification of any of the information contained in this letter, please contact the undersigned.

A response to this objection is expected within 30 days. After 30 days, the filing will be DISAPPROVED unless a 30-day extension is requested.

State: Virginia Filing Company: Unum Life Insurance Company of America

TOI/Sub-TOI: LTC03G Group Long Term Care/LTC03G.001 Qualified

Product Name: 2019 GLTC04 RATE INITIATIVE - PHASE I **Project Name/Number:** 2019 GLTC04 RATE INITIATIVE - PHASE I/

Once a submission has been closed, a new SERFF submission will be required. To expedite the review, the new submission should reference the SERFF tracking number of the prior submission and verify that all outstanding issues have been addressed.

Should you wish to discuss any of the objections or provide additional information related to any of the objections, this should be done prior to making a new SERFF submission.

Thank you for your courtesy and consideration in this matter.

Elsie Andy Manager, Forms and Rates Life and Health Division (804) 371-9072

> Sincerely, Elsie Andy

State: Virginia Filing Company: Unum Life Insurance Company of America

TOI/Sub-TOI: LTC03G Group Long Term Care/LTC03G.001 Qualified

Product Name: 2019 GLTC04 RATE INITIATIVE - PHASE I **Project Name/Number:** 2019 GLTC04 RATE INITIATIVE - PHASE I/

Objection Letter

Objection Letter Status Info has been requested from company

Objection Letter Date 02/19/2020 Submitted Date 02/19/2020 Respond By Date 03/20/2020

Dear Ellen Desrosiers,

Introduction:

The Bureau has the following concerns and/or needs additional information to continue its review.

Please note, any revisions, modifications, or changes of any type to this filing not specifically requested by us must be brought to our attention upon resubmission and explained in detail.

Objection 1

- L&H Actuarial Memorandum (Supporting Document)

Comments: Please advise if the actuarial assumptions associated with the rate increase request are consistent with the assumptions embedded in the most recent asset adequacy testing. If not, either make the appropriate revisions or explain any discrepancies.

Objection 2

- VA Proposed Rates - GLTC04&RGLTC04 - 2019, [GLTC04, RGLTC04] (Rate)

Comments: Please complete the top section of the Rate/Rule Schedule to include all information requested.

Objection 3

- L&H Actuarial Memorandum (Supporting Document)

Comments: Please re-state the nationwide experience using Virginia approved rates.

Objection 4

- L&H Actuarial Memorandum (Supporting Document)

Comments: Provide a separate calculation of the Lifetime Loss Ratio so that the historical premium component is restated to what it would be if the proposed premium had been charged (collected) since the forms introduction.

Objection 5

- L&H Actuarial Memorandum (Supporting Document)

Comments: Please provide the current national cumulative average increase, and what that average would be if all outstanding rate increase requests were approved for the full amount.

Objection 6

- L&H Actuarial Memorandum (Supporting Document)

Comments: Please provide the current Virginia cumulative average increase, and what that average would be if the current rate increase request were approved for the full amount.

Objection 7

- L&H Actuarial Memorandum (Supporting Document)

Comments: Please provide a loss ratio projection (both past and future) which reflects all the original pricing assumptions for interest, mortality, morbidity, persistency and premium scale, but uses the actual distribution of policies as issued rather than the originally assumed mix of business.

State: Virginia Filing Company: Unum Life Insurance Company of America

TOI/Sub-TOI: LTC03G Group Long Term Care/LTC03G.001 Qualified

Product Name: 2019 GLTC04 RATE INITIATIVE - PHASE I **Project Name/Number:** 2019 GLTC04 RATE INITIATIVE - PHASE I/

Objection 8

- L&H Actuarial Memorandum (Supporting Document)

Comments: Please state the lifetime loss ratio anticipated in the original filing.

Objection 9

- L&H Actuarial Memorandum (Supporting Document)

Comments: Is the intent of the company to not request any further rate increases if the proposed rate increase is approved and the experience develops as projected? If not, please explain.

Objection 10

- L&H Actuarial Memorandum (Supporting Document)

Comments: What steps have been taken to minimize rate increases on this block of business?

Objection 11

- L&H Actuarial Memorandum (Supporting Document)

Comments: Please provide all projections necessary to evaluate the requests based on both the Prospective Present Value Approach (or Texas Method) and the "If-Knew/Makeup Blend" approach (or Minnesota Method).

Conclusion:

We will be glad to continue our review of this submission upon receipt of the requested information or resolution of the issues described above. Upon subsequent review, other concerns may require attention.

A response to this objection (or request for information if more applicable) is expected within 30 days. After 30 days, the filing will be DISAPPROVED unless a 30-day extension is requested.

Once a submission has been closed, a new SERFF submission will be required. To expedite the review, the new submission should reference the SERFF tracking number of the prior submission and verify that all outstanding issues have been addressed.

Should you wish to discuss any of the objections or provide additional information related to any of the objections, this should be done prior to making a new SERFF submission.

Thank you for your courtesy and consideration in this matter.

Sincerely,

Bobby Toone

State: Virginia Filing Company: Unum Life Insurance Company of America

TOI/Sub-TOI: LTC03G Group Long Term Care/LTC03G.001 Qualified

Product Name: 2019 GLTC04 RATE INITIATIVE - PHASE I **Project Name/Number:** 2019 GLTC04 RATE INITIATIVE - PHASE I/

Objection Letter

Objection Letter Status Info has been requested from company

Objection Letter Date 02/19/2020 Submitted Date 02/19/2020 Respond By Date 03/20/2020

Dear Ellen Desrosiers,

Introduction:

The Bureau has the following concerns and/or needs additional information to continue its review.

Please note, any revisions, modifications, or changes of any type to this filing not specifically requested by us must be brought to our attention upon resubmission and explained in detail.

Objection 1

- GLTC0419 CH ECNF_v4_cln_VA (Supporting Document)

Comments: Please move the policyholder letter (GLTC0419 CH ECNF_v4_cln_VA.pdf) and the FAQ (GLTC0419 CH FAQ ECNF-VA.pdf) to the Form Schedule for review.

Objection 2

- Certificate Amendment Contingent Non-Forfeiture Benefit, 04CNF19G-VA (Form)
- Certificate Amendment Enhanced Contingent Non-Forfeiture Benefit, 04ECNF19G-APO-VA (Form)
- GLTC0419 CH ECNF_v4_cln_VA (Supporting Document)
- GLTC0419 CH FAQ ECNF-VA (Supporting Document)

Comments: Pursuant to 14VAC5-101-80 A-E and the Variability Guidance Document located in the SERFF instructions, please provide a Statement of Variability, providing a detailed explanation of all variable language in each form.

Conclusion:

We will be glad to continue our review of this submission upon receipt of the requested information or resolution of the issues described above. Upon subsequent review, other concerns may require attention.

A response to this objection (or request for information if more applicable) is expected within 30 days. After 30 days, the filing will be DISAPPROVED unless a 30-day extension is requested.

Once a submission has been closed, a new SERFF submission will be required. To expedite the review, the new submission should reference the SERFF tracking number of the prior submission and verify that all outstanding issues have been addressed.

Should you wish to discuss any of the objections or provide additional information related to any of the objections, this should be done prior to making a new SERFF submission.

Thank you for your courtesy and consideration in this matter.

Sincerely,

Bobby Toone

State: Virginia Filing Company: Unum Life Insurance Company of America

TOI/Sub-TOI: LTC03G Group Long Term Care/LTC03G.001 Qualified

Product Name: 2019 GLTC04 RATE INITIATIVE - PHASE I **Project Name/Number:** 2019 GLTC04 RATE INITIATIVE - PHASE I/

Objection Letter

Objection Letter Status Info has been requested from company

Objection Letter Date 12/18/2019
Submitted Date 12/18/2019
Respond By Date 01/17/2020

Dear Ellen Desrosiers,

Introduction:

The Bureau has the following concerns and/or needs additional information to continue its review.

Please note, any revisions, modifications, or changes of any type to this filing not specifically requested by us must be brought to our attention upon resubmission and explained in detail.

Objection 1

- L&H Actuarial Memorandum (Supporting Document)

Comments: Please advise if the actuarial assumptions associated with the rate increase request are consistent with the assumptions embedded in the most recent asset adequacy testing. If not, either make the appropriate revisions or explain any discrepancies.

Objection 2

- VA Proposed Rates - GLTC04&RGLTC04 - 2019, [GLTC04, RGLTC04] (Rate)

Comments: The Actuarial Memorandum shows there are 5,167 insureds, while the Rate/Rule Schedule says there are 4,375. Please explain this difference and make the necessary revisions to reconcile these figures.

Objection 3

- VA Proposed Rates - GLTC04&RGLTC04 - 2019, [GLTC04, RGLTC04] (Rate)

Comments: Please change the Rate Action form "New" to "Revised", since these rates are being revised from the original rates.

Objection 4

- GLTC0419 Prem Inc History_VA (Supporting Document)

Comments: Given the much publicized issues and concerns with the adequacy of long term care rates over the last 10-15 years, please explain why you have not requested a rate increase on these forms before now.

Conclusion:

We will be glad to continue our review of this submission upon receipt of the requested information or resolution of the issues described above. Upon subsequent review, other concerns may require attention

A response to this objection (or request for information if more applicable) is expected within 30 days. After 30 days, the filing will be DISAPPROVED unless a 30-day extension is requested.

Once a submission has been closed, a new SERFF submission will be required. To expedite the review, the new submission should reference the SERFF tracking number of the prior submission and verify that all outstanding issues have been addressed.

Should you wish to discuss any of the objections or provide additional information related to any of the objections, this should be done prior to making a new SERFF submission.

Thank you for your courtesy and consideration in this matter.

State: Virginia Filing Company: Unum Life Insurance Company of America

TOI/Sub-TOI: LTC03G Group Long Term Care/LTC03G.001 Qualified

Product Name: 2019 GLTC04 RATE INITIATIVE - PHASE I **Project Name/Number:** 2019 GLTC04 RATE INITIATIVE - PHASE I/

Sincerely, Bobby Toone

State: Virginia Filing Company: Unum Life Insurance Company of America

TOI/Sub-TOI: LTC03G Group Long Term Care/LTC03G.001 Qualified

Product Name: 2019 GLTC04 RATE INITIATIVE - PHASE I **Project Name/Number:** 2019 GLTC04 RATE INITIATIVE - PHASE I/

Objection Letter

Objection Letter Status Info has been requested from company

Objection Letter Date 04/26/2019
Submitted Date 04/26/2019
Respond By Date 05/26/2019

Dear Ellen Desrosiers,

Introduction:

An initial review of this filing indicates the following concerns and questions.

Please note, any revisions, modifications or changes of any type to a rate or form not specifically requested by us should be brought to our attention upon resubmission and explained in detail.

Objection 1

- Long Term Care Insurance Rate Request Summary (Supporting Document)

Comments: Please complete the Long-Term Care Rate Request Summary by completing the narrative requested at the bottom of the page.

The narrative should put into consumer-friendly language a clear explanation of the justification for the rate increase. The narrative should be written so that any person reviewing this filing would understand the reason for the rate increase and its driving factors.

Conclusion:

We shall be glad to reconsider this submission upon receipt of the revised information necessary to address the objections noted above. Should you need clarification of any of the information contained in this letter, please contact the undersigned.

A response to this objection (or request for information if more applicable) is expected within 30 days. After 30 days, the filing will be DISAPPROVED unless a 30-day extension is requested.

Once a submission has been closed, a new SERFF submission will be required. To expedite the review, the new submission should reference the SERFF tracking number of the prior submission and verify that all outstanding issues have been addressed.

Should you wish to discuss any of the objections or provide additional information related to any of the objections, this should be done prior to making a new SERFF submission.

Thank you for your courtesy and consideration in this matter.

Sincerely,

Bobby Toone

State: Virginia Filing Company: Unum Life Insurance Company of America

TOI/Sub-TOI: LTC03G Group Long Term Care/LTC03G.001 Qualified

Product Name:2019 GLTC04 RATE INITIATIVE - PHASE IProject Name/Number:2019 GLTC04 RATE INITIATIVE - PHASE I/

Response Letter

Response Letter Status Submitted to State

Response Letter Date 11/03/2022 Submitted Date 11/03/2022

Dear Bobby Toone,

Introduction:

Response 1

Comments:

- 1. Consider making all three Inflation Options variable in the 5th and 6th paragraphs. An employee and spouse may have different benefits and making each option variable will allow the letter to be better tailored to each employee. Be certain to fully describe any new variable information in the Statement of Variability (SOV). Unum Response: The certificateholder letters have been updated.
- 2. For clarity, spell out what CPI stands for.

Unum Response: The certificateholder letters have been updated.

3. For clarity, the paragraphs at the end of page 2 that begin with, To review your plan change options and end with Unum Customer Service Center at might read better if the last paragraph replaced the first.

Unum Response: The certificateholder letters have been updated.

4. The first paragraph on page 3 mentions a statement outlining in force coverage and the cost for this coverage before the increase. Please provide a copy of this form and include it in the list of Attachments at the end of the letter.

Unum Response: Weve included a copy of the administrative statement, per your request. We have redacted the employers name, and certificateholder PHI. This administrative statement supports billing and customer service. It reflects the inforce cost and coverage issued to the certificateholder under the employers group policy. Weve also updated the certificateholder letter to include it in the list of attachments

Related Objection 1

Applies To:

- Certificate Holder Letter, CHGLTC-T1-VA (Form)
- Certificate Holder Letter, CHGLTC-T2-VA (Form)

State: Virginia Filing Company: Unum Life Insurance Company of America

TOI/Sub-TOI: LTC03G Group Long Term Care/LTC03G.001 Qualified

Product Name:2019 GLTC04 RATE INITIATIVE - PHASE IProject Name/Number:2019 GLTC04 RATE INITIATIVE - PHASE I/

Comments: 1. Consider making all three Inflation Options variable in the 5th and 6th paragraphs. An employee and spouse may have different benefits and making each option variable will allow the letter to be better tailored to each employee. Be certain to fully describe any new variable information in the Statement of Variability (SOV).

- 2. For clarity, spell out what CPI stands for.
- 3. For clarity, the paragraphs at the end of page 2 that begin with, To review your plan change options and end with Unum Customer Service Center at might read better if the last paragraph replaced the first.
- 4. The first paragraph on page 3 mentions a statement outlining in force coverage and the cost for this coverage before the increase. Please provide a copy of this form and include it in the list of Attachments at the end of the letter.

Changed Items:

State: Virginia Filing Company: Unum Life Insurance Company of America

TOI/Sub-TOI: LTC03G Group Long Term Care/LTC03G.001 Qualified

ltem	Form	Form	Form	Form	Action Specific	Readability		
No.		Number	Туре	Action	Data	Score	Attachments	Submitted
1	Frequently Asked Questions		ОТН	Initial		47.600	GLTC CH FAQ ECNF_v3_cln_V A .pdf	Date Submitted: 11/03/2022 By: Ellen Desrosiers
Previous Ve	ersion			<u>'</u>	<u>'</u>	'	'	
1	Frequently Asked Questions	GLTC-FAQ-VA	ОТН	Initial		47.600	GLTC CH FAQ ECNF_v2_cln_V A.pdf	Date Submitted: 10/26/2022 By: Scott Abbott
Previous Ve	ersion							
1	Frequently Asked Questions	GLTC-FAQ-VA	ОТН	Initial		47.600	GLTC CH FAQ ECNF_v2_cln_V A (final).pdf	Date Submitted: 02/04/2022 By: Ellen Desrosiers
Previous Ve	ersion							
1	Frequently Asked Questions	VA-GLTC04-FAQ	ОТН	Initial		47.600	GLTC0419 CH FAQ ECNF_v2_cln_G en.pdf	Date Submitted: 06/16/2020 By:
Previous Ve	ersion							
1	Frequently Asked Questions	VA-GLTC04-FAQ	ОТН	Initial		47.600	GLTC0419 CH FAQ ECNF- VA.pdf	Date Submitted: 03/22/2020 By: Ellen Desrosiers
2	Certificate Holder Letter	CHGLTC-T1-VA	ОТН	Initial		51.400	GLTC CH ECNF T1-2_cln_v6_VA .pdf	Date Submitted: 11/03/2022 By: Ellen Desrosiers
Previous Ve	ersion							
2	Certificate Holder Letter	CHGLTC-T1-VA	ОТН	Initial		51.400	GLTC CH ECNF T1-2_cln_v3_VA (final).pdf	
Previous Ve	ersion							
2	Certificate Holder Letter	CHGLTC-T1-VA	OTH	Initial		51.400	GLTC CH ECNF T1-2_cln_v3_VA (final).pdf	

State: Virginia Filing Company: Unum Life Insurance Company of America

TOI/Sub-TOI: LTC03G Group Long Term Care/LTC03G.001 Qualified

Item	Form	Form	Form	Form	Action Specific	Readability		
No.	Name	Number	Туре	Action	Data	Score	Attachments	Submitted
1	Frequently Asked Questions		ОТН	Initial	Dutu	47.600	GLTC CH FAQ	Date Submitted: 11/03/2022 By: Ellen Desrosiers
2	Certificate Holder Letter	CHGLTC-T1-VA	ОТН	Initial		51.400	GLTC19 CH T1-2 Infl Ins ECNF_v1_cln_V A.pdf	07/30/2021
Previous Ve	ersion							
2	Certificate Holder Letter	CHGLTC-T1-VA	ОТН	Initial		51.400	GLTC19 CH T1-2 Infl Ins ECNF_v1_cln_V A.pdf	05/24/2021
Previous Ve	ersion							
2	Certificate Holder Letter	CHGLTC-T1-VA	ОТН	Initial		51.400	GLTC ECNF T1- 2- VA.pdf	Date Submitted: 01/29/2021 By:
Previous Ve	ersion							
2	Certificate Holder Letter	CH-GLTC04-VA	OTH	Initial		51.400	GLTC0419 CH ECNF_v7_cln_V A .pdf	
Previous Ve	ersion							
2	Certificate Holder Letter	CH-GLTC04-VA	ОТН	Initial		51.400	GLTC0419 CH ECNF_v6_cln_V A.pdf	Date Submitted: 06/16/2020 By:
Previous Ve	ersion							
2	Certificate Holder Letter	CH-GLTC04-VA	OTH	Initial		51.400	GLTC0419 CH ECNF_v6_cln_V A.pdf	Date Submitted: 05/12/2020 By:
Previous Ve	ersion						<u>'</u>	
2	Certificate Holder Letter	CH-GLTC04-VA	ОТН	Initial		51.400	GLTC0419 CH ECNF_v4_cln_V A.pdf	Date Submitted: 03/22/2020 By: Ellen Desrosiers
3	Certificate Holder Letter	CHGLTC-T2-VA	ОТН	Initial		51.200	GLTC CH ECNF T2-2_cln_v6_VA .pdf	Date Submitted: 11/03/2022 By: Ellen

State: Virginia Filing Company: Unum Life Insurance Company of America

TOI/Sub-TOI: LTC03G Group Long Term Care/LTC03G.001 Qualified

Product Name:2019 GLTC04 RATE INITIATIVE - PHASE IProject Name/Number:2019 GLTC04 RATE INITIATIVE - PHASE I/

Item	Form	Form	Form	Form	Action Specific	Readability		
No.	Name	Number	Туре	Action	Data	Score	Attachments	Submitted
1	Frequently Asked Questions	GLTC-FAQ-VA	OTH	Initial		47.600	GLTC CH FAQ ECNF_v3_cln_V A .pdf	Date Submitted: 11/03/2022 By: Ellen Desrosiers
								Desrosiers
Previous V	'ersion							
3	Certificate Holder Letter	CHGLTC-T2-VA	ОТН	Initial		51.200	GLTC CH ECNF T2-2_cln_v3_VA (final).pdf	
Previous Vo	'ersion							
3	Certificate Holder Letter	CHGLTC-T2-VA	ОТН	Initial		51.200	GLTC CH ECNF T2-2_cln_v3_VA (final).pdf	
Previous Ve	'ersion	'	<u>'</u>	'	'	'	'	<u>'</u>
3	Certificate Holder Letter	CHGLTC-T2-VA	ОТН	Initial		51.200	GLTC19 CH T2-2 Infl Ins ECNF_v1_cln_V A.pdf	07/30/2021
Previous Vo	'ersion							
3	Certificate Holder Letter	CHGLTC-T2-VA	ОТН	Initial		51.200	GLTC19 CH T2-2 Infl Ins ECNF_v1_cln_V A.pdf	05/24/2021
Previous V	'ersion							
3	Certificate Holder Letter	CHGLTC-T2-VA	ОТН	Initial		51.200	GLTC ECNF T2-2 - VA.pdf	2 Date Submitted: 01/29/2021 By:

No Rate/Rule Schedule items changed.

Filing Company:

Unum Life Insurance Company of America

TOI/Sub-TOI: LTC03G Group Long Term Care/LTC03G.001 Qualified

Product Name:2019 GLTC04 RATE INITIATIVE - PHASE IProject Name/Number:2019 GLTC04 RATE INITIATIVE - PHASE I/

Virginia

State:

Supporting Document So	chedule Item Changes
Satisfied - Item:	Sample Certificate Holder Letters
Comments:	
Attachment(s):	GLTC CH ECNF T1-2_v6_VA-Sample.pdf GLTC CH ECNF T2-2_v6_VA-Sample.pdf
Previous Version	
Satisfied - Item:	Sample Certificate Holder Letters
Comments:	
Attachment(s):	GLTC CH ECNF T1-2_cln_v3_VA - Sample.pdf GLTC CH ECNF T2-2_cln_v3_VA - Sample.pdf
Previous Version	
Satisfied - Item:	Sample Certificate Holder Letters
Comments:	
Attachment(s):	GLTC CH ECNF T1-2_cln_v3_VA - Sample.pdf GLTC CH ECNF T2-2_cln_v3_VA - Sample.pdf
Previous Version	
Satisfied - Item:	Sample Certificate Holder Letters
Comments:	
Attachment(s):	GLTC CH ECNF T1-2_cln_v3_VA - Sample.pdf GLTC CH ECNF T2-2_cln_v3_VA - Sample.pdf
Previous Version	
Satisfied - Item:	Sample Certificate Holder Letter
Comments:	
Attachment(s):	GLTC19 CH T1-2 Infl Ins ECNF_VA-Sample.pdf
Previous Version	
Satisfied - Item:	Sample Certificate Holder Letter
Comments:	
Attachment(s):	GLTC19 CH T1-2 Infl Ins ECNF_VA-Sample.pdf
Previous Version	
Satisfied - Item:	Sample Certificate Holder Letters
Comments:	
Attachment(s):	GLTC0419 CH ECNF T1-2_Sample_VA.pdf
Previous Version	
Satisfied - Item:	Sample Certificate Holder Letter
Comments:	

State: Virginia Filing Company: Unum Life Insurance Company of America

TOI/Sub-TOI: LTC03G Group Long Term Care/LTC03G.001 Qualified

Product Name:2019 GLTC04 RATE INITIATIVE - PHASE IProject Name/Number:2019 GLTC04 RATE INITIATIVE - PHASE I/

Attachment(s): GLTC0419 CH ECNF_v7_sample-VA.pdf

Filing Company:

Unum Life Insurance Company of America

TOI/Sub-TOI: LTC03G Group Long Term Care/LTC03G.001 Qualified

Product Name:2019 GLTC04 RATE INITIATIVE - PHASE IProject Name/Number:2019 GLTC04 RATE INITIATIVE - PHASE I/

Virginia

State:

Supporting Document So	chedule Item Changes
Satisfied - Item:	Sample Certificate Holder Letters
Comments:	
Attachment(s):	GLTC CH ECNF T1-2_v6_VA-Sample.pdf GLTC CH ECNF T2-2_v6_VA-Sample.pdf
Previous Version	
Satisfied - Item:	Sample Certificate Holder Letters
Comments:	
Attachment(s):	GLTC CH ECNF T1-2_cln_v3_VA - Sample.pdf GLTC CH ECNF T2-2_cln_v3_VA - Sample.pdf
Previous Version	
Satisfied - Item:	Sample Certificate Holder Letters
Comments:	
Attachment(s):	GLTC CH ECNF T1-2_cln_v3_VA - Sample.pdf GLTC CH ECNF T2-2_cln_v3_VA - Sample.pdf
Previous Version	
Satisfied - Item:	Sample Certificate Holder Letters
Comments:	
Attachment(s):	GLTC CH ECNF T1-2_cln_v3_VA - Sample.pdf GLTC CH ECNF T2-2_cln_v3_VA - Sample.pdf
Previous Version	
Satisfied - Item:	Sample Certificate Holder Letter
Comments:	
Attachment(s):	GLTC19 CH T1-2 Infl Ins ECNF_VA-Sample.pdf
Previous Version	
Satisfied - Item:	Sample Certificate Holder Letter
Comments:	
Attachment(s):	GLTC19 CH T1-2 Infl Ins ECNF_VA-Sample.pdf
Previous Version	
Satisfied - Item:	Sample Certificate Holder Letters
Comments:	
Attachment(s):	GLTC0419 CH ECNF T1-2_Sample_VA.pdf
Previous Version	
Satisfied - Item:	Sample Certificate Holder Letter
Comments:	

State: Virginia Filing Company: Unum Life Insurance Company of America

TOI/Sub-TOI: LTC03G Group Long Term Care/LTC03G.001 Qualified

Product Name:2019 GLTC04 RATE INITIATIVE - PHASE IProject Name/Number:2019 GLTC04 RATE INITIATIVE - PHASE I/

Attachment(s): GLTC0419 CH ECNF_v7_sample-VA.pdf

Satisfied - Item:	GLTC Administrative Statement
Comments:	
Attachment(s):	GLTC Administrative Statement.pdf

Response 2

Comments:

John Doe sample materials have been provided

Related Objection 2

Applies To:

- Certificate Holder Letter, CHGLTC-T1-VA (Form)
- Certificate Holder Letter, CHGLTC-T2-VA (Form)
- Frequently Asked Questions, GLTC-FAQ-VA (Form)

Comments: Once all revisions have been completed, make sure to provide updated "John Doe" versions of each form.

Changed Items:

State: Virginia Filing Company: Unum Life Insurance Company of America

TOI/Sub-TOI: LTC03G Group Long Term Care/LTC03G.001 Qualified

ltem	Form	Form	Form	Form	Action Specific	Readability		
No.		Number	Туре	Action	Data	Score	Attachments	Submitted
1	Frequently Asked Questions		ОТН	Initial		47.600	GLTC CH FAQ ECNF_v3_cln_V A .pdf	Date Submitted: 11/03/2022 By: Ellen Desrosiers
Previous Ve	ersion			<u>'</u>	<u>'</u>	'	'	
1	Frequently Asked Questions	GLTC-FAQ-VA	ОТН	Initial		47.600	GLTC CH FAQ ECNF_v2_cln_V A.pdf	Date Submitted: 10/26/2022 By: Scott Abbott
Previous Ve	ersion							
1	Frequently Asked Questions	GLTC-FAQ-VA	ОТН	Initial		47.600	GLTC CH FAQ ECNF_v2_cln_V A (final).pdf	Date Submitted: 02/04/2022 By: Ellen Desrosiers
Previous Ve	ersion							
1	Frequently Asked Questions	VA-GLTC04-FAQ	ОТН	Initial		47.600	GLTC0419 CH FAQ ECNF_v2_cln_G en.pdf	Date Submitted: 06/16/2020 By:
Previous Ve	ersion							
1	Frequently Asked Questions	VA-GLTC04-FAQ	ОТН	Initial		47.600	GLTC0419 CH FAQ ECNF- VA.pdf	Date Submitted: 03/22/2020 By: Ellen Desrosiers
2	Certificate Holder Letter	CHGLTC-T1-VA	ОТН	Initial		51.400	GLTC CH ECNF T1-2_cln_v6_VA .pdf	Date Submitted: 11/03/2022 By: Ellen Desrosiers
Previous Ve	ersion							
2	Certificate Holder Letter	CHGLTC-T1-VA	ОТН	Initial		51.400	GLTC CH ECNF T1-2_cln_v3_VA (final).pdf	
Previous Ve	ersion							
2	Certificate Holder Letter	CHGLTC-T1-VA	OTH	Initial		51.400	GLTC CH ECNF T1-2_cln_v3_VA (final).pdf	

State: Virginia Filing Company: Unum Life Insurance Company of America

TOI/Sub-TOI: LTC03G Group Long Term Care/LTC03G.001 Qualified

Item	Form	Form	Form	Form	Action Specific	Readability		
No.	Name	Number	Туре	Action	Data	Score	Attachments	Submitted
1	Frequently Asked Questions		ОТН	Initial	Dutu	47.600	GLTC CH FAQ	Date Submitted: 11/03/2022 By: Ellen Desrosiers
2	Certificate Holder Letter	CHGLTC-T1-VA	ОТН	Initial		51.400	GLTC19 CH T1-2 Infl Ins ECNF_v1_cln_V A.pdf	07/30/2021
Previous Ve	ersion							
2	Certificate Holder Letter	CHGLTC-T1-VA	ОТН	Initial		51.400	GLTC19 CH T1-2 Infl Ins ECNF_v1_cln_V A.pdf	05/24/2021
Previous Ve	ersion							
2	Certificate Holder Letter	CHGLTC-T1-VA	ОТН	Initial		51.400	GLTC ECNF T1- 2- VA.pdf	Date Submitted: 01/29/2021 By:
Previous Ve	ersion							
2	Certificate Holder Letter	CH-GLTC04-VA	OTH	Initial		51.400	GLTC0419 CH ECNF_v7_cln_V A .pdf	
Previous Ve	ersion							
2	Certificate Holder Letter	CH-GLTC04-VA	ОТН	Initial		51.400	GLTC0419 CH ECNF_v6_cln_V A.pdf	Date Submitted: 06/16/2020 By:
Previous Ve	ersion							
2	Certificate Holder Letter	CH-GLTC04-VA	OTH	Initial		51.400	GLTC0419 CH ECNF_v6_cln_V A.pdf	Date Submitted: 05/12/2020 By:
Previous Ve	ersion						<u>'</u>	
2	Certificate Holder Letter	CH-GLTC04-VA	ОТН	Initial		51.400	GLTC0419 CH ECNF_v4_cln_V A.pdf	Date Submitted: 03/22/2020 By: Ellen Desrosiers
3	Certificate Holder Letter	CHGLTC-T2-VA	ОТН	Initial		51.200	GLTC CH ECNF T2-2_cln_v6_VA .pdf	Date Submitted: 11/03/2022 By: Ellen

State: Virginia Filing Company: Unum Life Insurance Company of America

TOI/Sub-TOI: LTC03G Group Long Term Care/LTC03G.001 Qualified

Product Name:2019 GLTC04 RATE INITIATIVE - PHASE IProject Name/Number:2019 GLTC04 RATE INITIATIVE - PHASE I/

Item	Form	Form	Form	Form	Action Specific	Readability		
No.	Name	Number	Туре	Action	Data	Score	Attachments	Submitted
1	Frequently Asked Questions	GLTC-FAQ-VA	OTH	Initial		47.600	GLTC CH FAQ ECNF_v3_cln_V A .pdf	Date Submitted: 11/03/2022 By: Ellen Desrosiers
								Desrosiers
Previous V	'ersion							
3	Certificate Holder Letter	CHGLTC-T2-VA	ОТН	Initial		51.200	GLTC CH ECNF T2-2_cln_v3_VA (final).pdf	
Previous Vo	'ersion							
3	Certificate Holder Letter	CHGLTC-T2-VA	ОТН	Initial		51.200	GLTC CH ECNF T2-2_cln_v3_VA (final).pdf	
Previous Ve	'ersion	'	<u>'</u>	'	'	'	'	<u>'</u>
3	Certificate Holder Letter	CHGLTC-T2-VA	ОТН	Initial		51.200	GLTC19 CH T2-2 Infl Ins ECNF_v1_cln_V A.pdf	07/30/2021
Previous Vo	'ersion							
3	Certificate Holder Letter	CHGLTC-T2-VA	ОТН	Initial		51.200	GLTC19 CH T2-2 Infl Ins ECNF_v1_cln_V A.pdf	05/24/2021
Previous V	'ersion							
3	Certificate Holder Letter	CHGLTC-T2-VA	ОТН	Initial		51.200	GLTC ECNF T2-2 - VA.pdf	2 Date Submitted: 01/29/2021 By:

No Rate/Rule Schedule items changed.

Filing Company:

Unum Life Insurance Company of America

TOI/Sub-TOI: LTC03G Group Long Term Care/LTC03G.001 Qualified

Product Name:2019 GLTC04 RATE INITIATIVE - PHASE IProject Name/Number:2019 GLTC04 RATE INITIATIVE - PHASE I/

Virginia

State:

Supporting Document So	chedule Item Changes
Satisfied - Item:	Sample Certificate Holder Letters
Comments:	
Attachment(s):	GLTC CH ECNF T1-2_v6_VA-Sample.pdf GLTC CH ECNF T2-2_v6_VA-Sample.pdf
Previous Version	
Satisfied - Item:	Sample Certificate Holder Letters
Comments:	
Attachment(s):	GLTC CH ECNF T1-2_cln_v3_VA - Sample.pdf GLTC CH ECNF T2-2_cln_v3_VA - Sample.pdf
Previous Version	
Satisfied - Item:	Sample Certificate Holder Letters
Comments:	
Attachment(s):	GLTC CH ECNF T1-2_cln_v3_VA - Sample.pdf GLTC CH ECNF T2-2_cln_v3_VA - Sample.pdf
Previous Version	
Satisfied - Item:	Sample Certificate Holder Letters
Comments:	
Attachment(s):	GLTC CH ECNF T1-2_cln_v3_VA - Sample.pdf GLTC CH ECNF T2-2_cln_v3_VA - Sample.pdf
Previous Version	
Satisfied - Item:	Sample Certificate Holder Letter
Comments:	
Attachment(s):	GLTC19 CH T1-2 Infl Ins ECNF_VA-Sample.pdf
Previous Version	
Satisfied - Item:	Sample Certificate Holder Letter
Comments:	
Attachment(s):	GLTC19 CH T1-2 Infl Ins ECNF_VA-Sample.pdf
Previous Version	
Satisfied - Item:	Sample Certificate Holder Letters
Comments:	
Attachment(s):	GLTC0419 CH ECNF T1-2_Sample_VA.pdf
Previous Version	
Satisfied - Item:	Sample Certificate Holder Letter
Comments:	

State: Virginia Filing Company: Unum Life Insurance Company of America

TOI/Sub-TOI: LTC03G Group Long Term Care/LTC03G.001 Qualified

Product Name:2019 GLTC04 RATE INITIATIVE - PHASE IProject Name/Number:2019 GLTC04 RATE INITIATIVE - PHASE I/

Attachment(s): GLTC0419 CH ECNF_v7_sample-VA.pdf

Filing Company:

Unum Life Insurance Company of America

TOI/Sub-TOI: LTC03G Group Long Term Care/LTC03G.001 Qualified

Product Name:2019 GLTC04 RATE INITIATIVE - PHASE IProject Name/Number:2019 GLTC04 RATE INITIATIVE - PHASE I/

Virginia

State:

Supporting Document So	chedule Item Changes
Satisfied - Item:	Sample Certificate Holder Letters
Comments:	
Attachment(s):	GLTC CH ECNF T1-2_v6_VA-Sample.pdf GLTC CH ECNF T2-2_v6_VA-Sample.pdf
Previous Version	
Satisfied - Item:	Sample Certificate Holder Letters
Comments:	
Attachment(s):	GLTC CH ECNF T1-2_cln_v3_VA - Sample.pdf GLTC CH ECNF T2-2_cln_v3_VA - Sample.pdf
Previous Version	
Satisfied - Item:	Sample Certificate Holder Letters
Comments:	
Attachment(s):	GLTC CH ECNF T1-2_cln_v3_VA - Sample.pdf GLTC CH ECNF T2-2_cln_v3_VA - Sample.pdf
Previous Version	
Satisfied - Item:	Sample Certificate Holder Letters
Comments:	
Attachment(s):	GLTC CH ECNF T1-2_cln_v3_VA - Sample.pdf GLTC CH ECNF T2-2_cln_v3_VA - Sample.pdf
Previous Version	
Satisfied - Item:	Sample Certificate Holder Letter
Comments:	
Attachment(s):	GLTC19 CH T1-2 Infl Ins ECNF_VA-Sample.pdf
Previous Version	
Satisfied - Item:	Sample Certificate Holder Letter
Comments:	
Attachment(s):	GLTC19 CH T1-2 Infl Ins ECNF_VA-Sample.pdf
Previous Version	
Satisfied - Item:	Sample Certificate Holder Letters
Comments:	
Attachment(s):	GLTC0419 CH ECNF T1-2_Sample_VA.pdf
Previous Version	
Satisfied - Item:	Sample Certificate Holder Letter
Comments:	

State: Virginia Filing Company: Unum Life Insurance Company of America

TOI/Sub-TOI: LTC03G Group Long Term Care/LTC03G.001 Qualified

Product Name:2019 GLTC04 RATE INITIATIVE - PHASE IProject Name/Number:2019 GLTC04 RATE INITIATIVE - PHASE I/

Attachment(s): GLTC0419 CH ECNF_v7_sample-VA.pdf

Satisfied - Item:	GLTC Administrative Statement
Comments:	
Attachment(s):	GLTC Administrative Statement.pdf

Response 3

Comments:

The certificateholder letters have been updated.

Related Objection 3

Applies To:

- Certificate Holder Letter, CHGLTC-T2-VA (Form)

Comments: For consistency, please revise the 4th paragraph to match the 5th paragraph in GLTC CH ECNF T1-2_cln_v3_VA - (final).pdf .

Changed Items:

State: Virginia Filing Company: Unum Life Insurance Company of America

TOI/Sub-TOI: LTC03G Group Long Term Care/LTC03G.001 Qualified

Item	Form	Form	Form	Form	Action Specific	Readability		
No.		Number	Туре	Action	Data	Score	Attachments	Submitted
1	Frequently Asked Questions		ОТН	Initial		47.600	GLTC CH FAQ ECNF_v3_cln_V A .pdf	Date Submitted: 11/03/2022 By: Ellen Desrosiers
Previous Ve	ersion			·	·		·	
1	Frequently Asked Questions	GLTC-FAQ-VA	ОТН	Initial		47.600	GLTC CH FAQ ECNF_v2_cln_V A.pdf	Date Submitted: 10/26/2022 By: Scott Abbott
Previous Ve	ersion							
1	Frequently Asked Questions	GLTC-FAQ-VA	ОТН	Initial		47.600	GLTC CH FAQ ECNF_v2_cln_V A (final).pdf	Date Submitted: 02/04/2022 By: Ellen Desrosiers
Previous Ve	ersion							
1	Frequently Asked Questions	VA-GLTC04-FAQ	OTH	Initial		47.600	GLTC0419 CH FAQ ECNF_v2_cln_G en.pdf	Date Submitted: 06/16/2020 By:
Previous Ve	ersion							
1	Frequently Asked Questions	VA-GLTC04-FAQ	ОТН	Initial		47.600	GLTC0419 CH FAQ ECNF- VA.pdf	Date Submitted: 03/22/2020 By: Ellen Desrosiers
2	Certificate Holder Letter	CHGLTC-T1-VA	ОТН	Initial		51.400	GLTC CH ECNF T1-2_cln_v6_VA .pdf	Date Submitted: 11/03/2022 By: Ellen Desrosiers
Previous Ve	ersion							
2	Certificate Holder Letter	CHGLTC-T1-VA	ОТН	Initial		51.400	GLTC CH ECNF T1-2_cln_v3_VA (final).pdf	
Previous Ve	ersion			·				
2	Certificate Holder Letter	CHGLTC-T1-VA	ОТН	Initial		51.400	GLTC CH ECNF T1-2_cln_v3_VA (final).pdf	

State: Virginia Filing Company: Unum Life Insurance Company of America

TOI/Sub-TOI: LTC03G Group Long Term Care/LTC03G.001 Qualified

Item	Form	Form	Form	Form	Action Specific	Readability		
No.	Name	Number	Туре	Action	Data	Score	Attachments	Submitted
1	Frequently Asked Questions		ОТН	Initial	Dutu	47.600	GLTC CH FAQ	Date Submitted: 11/03/2022 By: Ellen Desrosiers
2	Certificate Holder Letter	CHGLTC-T1-VA	ОТН	Initial		51.400	GLTC19 CH T1-2 Infl Ins ECNF_v1_cln_V A.pdf	07/30/2021
Previous Ve	ersion							
2	Certificate Holder Letter	CHGLTC-T1-VA	ОТН	Initial		51.400	GLTC19 CH T1-2 Infl Ins ECNF_v1_cln_V A.pdf	05/24/2021
Previous Ve	ersion							
2	Certificate Holder Letter	CHGLTC-T1-VA	OTH	Initial		51.400	GLTC ECNF T1- 2- VA.pdf	Date Submitted: 01/29/2021 By:
Previous Ve	ersion							
2	Certificate Holder Letter	CH-GLTC04-VA	ОТН	Initial		51.400	GLTC0419 CH ECNF_v7_cln_V A .pdf	
Previous Ve	ersion							
2	Certificate Holder Letter	CH-GLTC04-VA	ОТН	Initial		51.400	GLTC0419 CH ECNF_v6_cln_V A.pdf	Date Submitted: 06/16/2020 By:
Previous Ve	ersion							
2	Certificate Holder Letter	CH-GLTC04-VA	ОТН	Initial		51.400	GLTC0419 CH ECNF_v6_cln_V A.pdf	Date Submitted: 05/12/2020 By:
Previous Ve	ersion							
2	Certificate Holder Letter	CH-GLTC04-VA	ОТН	Initial		51.400	GLTC0419 CH ECNF_v4_cln_V A.pdf	Date Submitted: 03/22/2020 By: Ellen Desrosiers
3	Certificate Holder Letter	CHGLTC-T2-VA	ОТН	Initial		51.200	GLTC CH ECNF T2-2_cln_v6_VA .pdf	Date Submitted: 11/03/2022 By: Ellen

State: Virginia Filing Company: Unum Life Insurance Company of America

TOI/Sub-TOI: LTC03G Group Long Term Care/LTC03G.001 Qualified

Product Name:2019 GLTC04 RATE INITIATIVE - PHASE IProject Name/Number:2019 GLTC04 RATE INITIATIVE - PHASE I/

ltem	Form	Form	Form Type	Form	Action Specific	Readability		
No.	Name	Number		Action	Data	Score	Attachments	Submitted
1	Frequently Asked Questions	GLTC-FAQ-VA	OTH	Initial		47.600	GLTC CH FAQ ECNF_v3_cln_V A .pdf	Date Submitted: 11/03/2022 By: Ellen Desrosiers
								Desrosiers
Previous V	'ersion							
3	Certificate Holder Letter	CHGLTC-T2-VA	ОТН	Initial		51.200	GLTC CH ECNF T2-2_cln_v3_VA (final).pdf	
Previous Vo	'ersion							
3	Certificate Holder Letter	CHGLTC-T2-VA	ОТН	Initial		51.200	GLTC CH ECNF T2-2_cln_v3_VA (final).pdf	
Previous Ve	'ersion	'	<u>'</u>	'	'	'	'	'
3	Certificate Holder Letter	CHGLTC-T2-VA	ОТН	Initial		51.200	GLTC19 CH T2-2 Infl Ins ECNF_v1_cln_V A.pdf	07/30/2021
Previous Vo	'ersion							
3	Certificate Holder Letter	CHGLTC-T2-VA	ОТН	Initial		51.200	GLTC19 CH T2-2 Infl Ins ECNF_v1_cln_V A.pdf	05/24/2021
Previous V	'ersion							
3	Certificate Holder Letter	CHGLTC-T2-VA	ОТН	Initial		51.200	GLTC ECNF T2-2 - VA.pdf	2 Date Submitted: 01/29/2021 By:

No Rate/Rule Schedule items changed.

Filing Company:

Unum Life Insurance Company of America

TOI/Sub-TOI: LTC03G Group Long Term Care/LTC03G.001 Qualified

Product Name:2019 GLTC04 RATE INITIATIVE - PHASE IProject Name/Number:2019 GLTC04 RATE INITIATIVE - PHASE I/

Virginia

State:

Supporting Document Se	chedule Item Changes
Satisfied - Item:	Sample Certificate Holder Letters
Comments:	
Attachment(s):	GLTC CH ECNF T1-2_v6_VA-Sample.pdf GLTC CH ECNF T2-2_v6_VA-Sample.pdf
Previous Version	
Satisfied - Item:	Sample Certificate Holder Letters
Comments:	
Attachment(s):	GLTC CH ECNF T1-2_cln_v3_VA - Sample.pdf GLTC CH ECNF T2-2_cln_v3_VA - Sample.pdf
Previous Version	
Satisfied - Item:	Sample Certificate Holder Letters
Comments:	
Attachment(s):	GLTC CH ECNF T1-2_cln_v3_VA - Sample.pdf GLTC CH ECNF T2-2_cln_v3_VA - Sample.pdf
Previous Version	
Satisfied - Item:	Sample Certificate Holder Letters
Comments:	
Attachment(s):	GLTC CH ECNF T1-2_cln_v3_VA - Sample.pdf GLTC CH ECNF T2-2_cln_v3_VA - Sample.pdf
Previous Version	
Satisfied - Item:	Sample Certificate Holder Letter
Comments:	
Attachment(s):	GLTC19 CH T1-2 Infl Ins ECNF_VA-Sample.pdf
Previous Version	
Satisfied - Item:	Sample Certificate Holder Letter
Comments:	
Attachment(s):	GLTC19 CH T1-2 Infl Ins ECNF_VA-Sample.pdf
Previous Version	
Satisfied - Item:	Sample Certificate Holder Letters
Comments:	
Attachment(s):	GLTC0419 CH ECNF T1-2_Sample_VA.pdf
Previous Version	
Satisfied - Item:	Sample Certificate Holder Letter
Comments:	

State: Virginia Filing Company: Unum Life Insurance Company of America

TOI/Sub-TOI: LTC03G Group Long Term Care/LTC03G.001 Qualified

Product Name:2019 GLTC04 RATE INITIATIVE - PHASE IProject Name/Number:2019 GLTC04 RATE INITIATIVE - PHASE I/

Attachment(s): GLTC0419 CH ECNF_v7_sample-VA.pdf

Filing Company:

Unum Life Insurance Company of America

TOI/Sub-TOI: LTC03G Group Long Term Care/LTC03G.001 Qualified

Product Name:2019 GLTC04 RATE INITIATIVE - PHASE IProject Name/Number:2019 GLTC04 RATE INITIATIVE - PHASE I/

Virginia

State:

Supporting Document Se	chedule Item Changes
Satisfied - Item:	Sample Certificate Holder Letters
Comments:	
Attachment(s):	GLTC CH ECNF T1-2_v6_VA-Sample.pdf GLTC CH ECNF T2-2_v6_VA-Sample.pdf
Previous Version	
Satisfied - Item:	Sample Certificate Holder Letters
Comments:	
Attachment(s):	GLTC CH ECNF T1-2_cln_v3_VA - Sample.pdf GLTC CH ECNF T2-2_cln_v3_VA - Sample.pdf
Previous Version	
Satisfied - Item:	Sample Certificate Holder Letters
Comments:	
Attachment(s):	GLTC CH ECNF T1-2_cln_v3_VA - Sample.pdf GLTC CH ECNF T2-2_cln_v3_VA - Sample.pdf
Previous Version	
Satisfied - Item:	Sample Certificate Holder Letters
Comments:	
Attachment(s):	GLTC CH ECNF T1-2_cln_v3_VA - Sample.pdf GLTC CH ECNF T2-2_cln_v3_VA - Sample.pdf
Previous Version	
Satisfied - Item:	Sample Certificate Holder Letter
Comments:	
Attachment(s):	GLTC19 CH T1-2 Infl Ins ECNF_VA-Sample.pdf
Previous Version	
Satisfied - Item:	Sample Certificate Holder Letter
Comments:	
Attachment(s):	GLTC19 CH T1-2 Infl Ins ECNF_VA-Sample.pdf
Previous Version	
Satisfied - Item:	Sample Certificate Holder Letters
Comments:	
Attachment(s):	GLTC0419 CH ECNF T1-2_Sample_VA.pdf
Previous Version	
Satisfied - Item:	Sample Certificate Holder Letter
Comments:	

State: Virginia Filing Company: Unum Life Insurance Company of America

TOI/Sub-TOI: LTC03G Group Long Term Care/LTC03G.001 Qualified

Product Name:2019 GLTC04 RATE INITIATIVE - PHASE IProject Name/Number:2019 GLTC04 RATE INITIATIVE - PHASE I/

Attachment(s): GLTC0419 CH ECNF_v7_sample-VA.pdf

Satisfied - Item:	GLTC Administrative Statement
Comments:	
Attachment(s):	GLTC Administrative Statement.pdf

Response 4

Comments:

The certificateholder FAQ has been updated.

Related Objection 4

Applies To:

- Frequently Asked Questions, GLTC-FAQ-VA (Form)

Comments: In the 3rd paragraph on page 2, the certificate holder is told they have to submit any change requests 30 days in advance of the effective date. What happens if a certificate holder is unable to submit their requests by the 30-day deadline?

Changed Items:

State: Virginia Filing Company: Unum Life Insurance Company of America

TOI/Sub-TOI: LTC03G Group Long Term Care/LTC03G.001 Qualified

Item	Form	Form	Form	Form	Action Specific	Readability		
No.		Number	Туре	Action	Data	Score	Attachments	Submitted
1	Frequently Asked Questions		ОТН	Initial		47.600	GLTC CH FAQ ECNF_v3_cln_V A .pdf	Date Submitted: 11/03/2022 By: Ellen Desrosiers
Previous Ve	ersion			·	·		·	
1	Frequently Asked Questions	GLTC-FAQ-VA	ОТН	Initial		47.600	GLTC CH FAQ ECNF_v2_cln_V A.pdf	Date Submitted: 10/26/2022 By: Scott Abbott
Previous Ve	ersion							
1	Frequently Asked Questions	GLTC-FAQ-VA	ОТН	Initial		47.600	GLTC CH FAQ ECNF_v2_cln_V A (final).pdf	Date Submitted: 02/04/2022 By: Ellen Desrosiers
Previous Ve	ersion							
1	Frequently Asked Questions	VA-GLTC04-FAQ	OTH	Initial		47.600	GLTC0419 CH FAQ ECNF_v2_cln_G en.pdf	Date Submitted: 06/16/2020 By:
Previous Ve	ersion							
1	Frequently Asked Questions	VA-GLTC04-FAQ	ОТН	Initial		47.600	GLTC0419 CH FAQ ECNF- VA.pdf	Date Submitted: 03/22/2020 By: Ellen Desrosiers
2	Certificate Holder Letter	CHGLTC-T1-VA	ОТН	Initial		51.400	GLTC CH ECNF T1-2_cln_v6_VA .pdf	Date Submitted: 11/03/2022 By: Ellen Desrosiers
Previous Ve	ersion							
2	Certificate Holder Letter	CHGLTC-T1-VA	ОТН	Initial		51.400	GLTC CH ECNF T1-2_cln_v3_VA (final).pdf	
Previous Ve	ersion			·				
2	Certificate Holder Letter	CHGLTC-T1-VA	ОТН	Initial		51.400	GLTC CH ECNF T1-2_cln_v3_VA (final).pdf	

State: Virginia Filing Company: Unum Life Insurance Company of America

TOI/Sub-TOI: LTC03G Group Long Term Care/LTC03G.001 Qualified

Item	Form	Form	Form	Form	Action Specific	Readability		
No.	Name	Number	Туре	Action	Data	Score	Attachments	Submitted
1	Frequently Asked Questions		ОТН	Initial	Dutu	47.600	GLTC CH FAQ	Date Submitted: 11/03/2022 By: Ellen Desrosiers
2	Certificate Holder Letter	CHGLTC-T1-VA	ОТН	Initial		51.400	GLTC19 CH T1-2 Infl Ins ECNF_v1_cln_V A.pdf	07/30/2021
Previous Ve	ersion							
2	Certificate Holder Letter	CHGLTC-T1-VA	ОТН	Initial		51.400	GLTC19 CH T1-2 Infl Ins ECNF_v1_cln_V A.pdf	05/24/2021
Previous Ve	ersion							
2	Certificate Holder Letter	CHGLTC-T1-VA	OTH	Initial		51.400	GLTC ECNF T1- 2- VA.pdf	Date Submitted: 01/29/2021 By:
Previous Ve	ersion							
2	Certificate Holder Letter	CH-GLTC04-VA	ОТН	Initial		51.400	GLTC0419 CH ECNF_v7_cln_V A .pdf	
Previous Ve	ersion							
2	Certificate Holder Letter	CH-GLTC04-VA	ОТН	Initial		51.400	GLTC0419 CH ECNF_v6_cln_V A.pdf	Date Submitted: 06/16/2020 By:
Previous Ve	ersion							
2	Certificate Holder Letter	CH-GLTC04-VA	ОТН	Initial		51.400	GLTC0419 CH ECNF_v6_cln_V A.pdf	Date Submitted: 05/12/2020 By:
Previous Ve	ersion							
2	Certificate Holder Letter	CH-GLTC04-VA	ОТН	Initial		51.400	GLTC0419 CH ECNF_v4_cln_V A.pdf	Date Submitted: 03/22/2020 By: Ellen Desrosiers
3	Certificate Holder Letter	CHGLTC-T2-VA	ОТН	Initial		51.200	GLTC CH ECNF T2-2_cln_v6_VA .pdf	Date Submitted: 11/03/2022 By: Ellen

State: Virginia Filing Company: Unum Life Insurance Company of America

TOI/Sub-TOI: LTC03G Group Long Term Care/LTC03G.001 Qualified

Product Name:2019 GLTC04 RATE INITIATIVE - PHASE IProject Name/Number:2019 GLTC04 RATE INITIATIVE - PHASE I/

ltem	Form	Form	Form Type	Form	Action Specific	Readability		
No.	Name	Number		Action	Data	Score	Attachments	Submitted
1	Frequently Asked Questions	GLTC-FAQ-VA	OTH	Initial		47.600	GLTC CH FAQ ECNF_v3_cln_V A .pdf	Date Submitted: 11/03/2022 By: Ellen Desrosiers
								Desrosiers
Previous V	'ersion							
3	Certificate Holder Letter	CHGLTC-T2-VA	ОТН	Initial		51.200	GLTC CH ECNF T2-2_cln_v3_VA (final).pdf	
Previous Vo	'ersion							
3	Certificate Holder Letter	CHGLTC-T2-VA	ОТН	Initial		51.200	GLTC CH ECNF T2-2_cln_v3_VA (final).pdf	
Previous Ve	'ersion	'	<u>'</u>	'	'	'	'	'
3	Certificate Holder Letter	CHGLTC-T2-VA	ОТН	Initial		51.200	GLTC19 CH T2-2 Infl Ins ECNF_v1_cln_V A.pdf	07/30/2021
Previous Vo	'ersion							
3	Certificate Holder Letter	CHGLTC-T2-VA	ОТН	Initial		51.200	GLTC19 CH T2-2 Infl Ins ECNF_v1_cln_V A.pdf	05/24/2021
Previous V	'ersion							
3	Certificate Holder Letter	CHGLTC-T2-VA	ОТН	Initial		51.200	GLTC ECNF T2-2 - VA.pdf	2 Date Submitted: 01/29/2021 By:

No Rate/Rule Schedule items changed.

Filing Company:

Unum Life Insurance Company of America

TOI/Sub-TOI: LTC03G Group Long Term Care/LTC03G.001 Qualified

Product Name:2019 GLTC04 RATE INITIATIVE - PHASE IProject Name/Number:2019 GLTC04 RATE INITIATIVE - PHASE I/

Virginia

State:

Supporting Document Se	chedule Item Changes
Satisfied - Item:	Sample Certificate Holder Letters
Comments:	
Attachment(s):	GLTC CH ECNF T1-2_v6_VA-Sample.pdf GLTC CH ECNF T2-2_v6_VA-Sample.pdf
Previous Version	
Satisfied - Item:	Sample Certificate Holder Letters
Comments:	
Attachment(s):	GLTC CH ECNF T1-2_cln_v3_VA - Sample.pdf GLTC CH ECNF T2-2_cln_v3_VA - Sample.pdf
Previous Version	
Satisfied - Item:	Sample Certificate Holder Letters
Comments:	
Attachment(s):	GLTC CH ECNF T1-2_cln_v3_VA - Sample.pdf GLTC CH ECNF T2-2_cln_v3_VA - Sample.pdf
Previous Version	
Satisfied - Item:	Sample Certificate Holder Letters
Comments:	
Attachment(s):	GLTC CH ECNF T1-2_cln_v3_VA - Sample.pdf GLTC CH ECNF T2-2_cln_v3_VA - Sample.pdf
Previous Version	
Satisfied - Item:	Sample Certificate Holder Letter
Comments:	
Attachment(s):	GLTC19 CH T1-2 Infl Ins ECNF_VA-Sample.pdf
Previous Version	
Satisfied - Item:	Sample Certificate Holder Letter
Comments:	
Attachment(s):	GLTC19 CH T1-2 Infl Ins ECNF_VA-Sample.pdf
Previous Version	
Satisfied - Item:	Sample Certificate Holder Letters
Comments:	
Attachment(s):	GLTC0419 CH ECNF T1-2_Sample_VA.pdf
Previous Version	
Satisfied - Item:	Sample Certificate Holder Letter
Comments:	

State: Virginia Filing Company: Unum Life Insurance Company of America

TOI/Sub-TOI: LTC03G Group Long Term Care/LTC03G.001 Qualified

Product Name:2019 GLTC04 RATE INITIATIVE - PHASE IProject Name/Number:2019 GLTC04 RATE INITIATIVE - PHASE I/

Attachment(s): GLTC0419 CH ECNF_v7_sample-VA.pdf

Filing Company:

Unum Life Insurance Company of America

TOI/Sub-TOI: LTC03G Group Long Term Care/LTC03G.001 Qualified

Product Name:2019 GLTC04 RATE INITIATIVE - PHASE IProject Name/Number:2019 GLTC04 RATE INITIATIVE - PHASE I/

Virginia

State:

Supporting Document So	chedule Item Changes
Satisfied - Item:	Sample Certificate Holder Letters
Comments:	
Attachment(s):	GLTC CH ECNF T1-2_v6_VA-Sample.pdf GLTC CH ECNF T2-2_v6_VA-Sample.pdf
Previous Version	
Satisfied - Item:	Sample Certificate Holder Letters
Comments:	
Attachment(s):	GLTC CH ECNF T1-2_cln_v3_VA - Sample.pdf GLTC CH ECNF T2-2_cln_v3_VA - Sample.pdf
Previous Version	
Satisfied - Item:	Sample Certificate Holder Letters
Comments:	
Attachment(s):	GLTC CH ECNF T1-2_cln_v3_VA - Sample.pdf GLTC CH ECNF T2-2_cln_v3_VA - Sample.pdf
Previous Version	
Satisfied - Item:	Sample Certificate Holder Letters
Comments:	
Attachment(s):	GLTC CH ECNF T1-2_cln_v3_VA - Sample.pdf GLTC CH ECNF T2-2_cln_v3_VA - Sample.pdf
Previous Version	
Satisfied - Item:	Sample Certificate Holder Letter
Comments:	
Attachment(s):	GLTC19 CH T1-2 Infl Ins ECNF_VA-Sample.pdf
Previous Version	
Satisfied - Item:	Sample Certificate Holder Letter
Comments:	
Attachment(s):	GLTC19 CH T1-2 Infl Ins ECNF_VA-Sample.pdf
Previous Version	
Satisfied - Item:	Sample Certificate Holder Letters
Comments:	
Attachment(s):	GLTC0419 CH ECNF T1-2_Sample_VA.pdf
Previous Version	
Satisfied - Item:	Sample Certificate Holder Letter
Comments:	

State: Virginia Filing Company: Unum Life Insurance Company of America

TOI/Sub-TOI: LTC03G Group Long Term Care/LTC03G.001 Qualified

Product Name:2019 GLTC04 RATE INITIATIVE - PHASE IProject Name/Number:2019 GLTC04 RATE INITIATIVE - PHASE I/

Attachment(s): GLTC0419 CH ECNF_v7_sample-VA.pdf

Satisfied - Item:	GLTC Administrative Statement
Comments:	
Attachment(s):	GLTC Administrative Statement.pdf

Conclusion:

Sincerely,

Ellen Desrosiers

State: Virginia Filing Company: Unum Life Insurance Company of America

TOI/Sub-TOI: LTC03G Group Long Term Care/LTC03G.001 Qualified

Product Name:2019 GLTC04 RATE INITIATIVE - PHASE IProject Name/Number:2019 GLTC04 RATE INITIATIVE - PHASE I/

Response Letter

Response Letter Status Submitted to State

Response Letter Date 10/25/2022 Submitted Date 10/26/2022

Dear Bobby Toone,

Introduction:

Response 1

Comments:

The FAQ has been updated with the company's full licensed name and variability around the address and phone number. The Statement of Variability has been updated.

Related Objection 1

Applies To:

- Frequently Asked Questions, GLTC-FAQ-VA (Form)

Comments: 1. Per a previous objection, does the company wish the phone numbers on this form to be variable, in case of a change? If so, please bracket the numbers and add a description to the Statement of Variability.

2. Virginia regulations require that the company's full licensed name appear at the top of each form. please correct.

Changed Items:

State: Virginia Filing Company: Unum Life Insurance Company of America

TOI/Sub-TOI: LTC03G Group Long Term Care/LTC03G.001 Qualified

Product Name:2019 GLTC04 RATE INITIATIVE - PHASE IProject Name/Number:2019 GLTC04 RATE INITIATIVE - PHASE I/

Form Schedule Item Changes								
Item	Form	Form	Form	Form	Action Specific	Readability		
No.	Name	Number	Type	Action	Data	Score	Attachments	Submitted
1	Frequently Asked Questions	GLTC-FAQ-VA	OTH	Initial		47.600	GLTC CH FAQ ECNF_v2_cln_V A.pdf	Date Submitted: 10/26/2022 By: Scott Abbott
Previous Ve	ersion							
1	Frequently Asked Questions	GLTC-FAQ-VA	ОТН	Initial		47.600	GLTC CH FAQ ECNF_v2_cln_V A (final).pdf	Date Submitted: 02/04/2022 By: Ellen Desrosiers
Previous Ve	ersion							
1	Frequently Asked Questions	VA-GLTC04-FAQ	ОТН	Initial		47.600	GLTC0419 CH FAQ ECNF_v2_cln_G en.pdf	Date Submitted: 06/16/2020 By:
Previous Ve	ersion							
1	Frequently Asked Questions	VA-GLTC04-FAQ	ОТН	Initial		47.600	GLTC0419 CH FAQ ECNF- VA.pdf	Date Submitted: 03/22/2020 By: Ellen Desrosiers

No Rate/Rule Schedule items changed.

State: Virginia Filing Company: Unum Life Insurance Company of America

TOI/Sub-TOI: LTC03G Group Long Term Care/LTC03G.001 Qualified

Product Name:2019 GLTC04 RATE INITIATIVE - PHASE IProject Name/Number:2019 GLTC04 RATE INITIATIVE - PHASE I/

Supporting Document Schedule I	Supporting Document Schedule Item Changes					
Satisfied - Item:	Statement of Variability					
Comments:						
Attachment(s):	Statement of Variability.pdf					
Previous Version						
Satisfied - Item:	Statement of Variability					
Comments:						
Attachment(s):	Statement of Variability.pdf					
Previous Version						
Satisfied - Item:	Statement of Variability					
Comments:						
Attachment(s):	Statement of Variability.pdf					
Previous Version						
Satisfied - Item:	Statement of Variability					
Comments:						
Attachment(s):	Statement of Variability.pdf					

Conclusion:

Sincerely,

Scott Abbott

State: Virginia Filing Company: Unum Life Insurance Company of America

TOI/Sub-TOI: LTC03G Group Long Term Care/LTC03G.001 Qualified

Product Name:2019 GLTC04 RATE INITIATIVE - PHASE IProject Name/Number:2019 GLTC04 RATE INITIATIVE - PHASE I/

Response Letter

Response Letter Status Submitted to State

Response Letter Date 10/24/2022 Submitted Date 10/24/2022

Dear Bobby Toone,

Introduction:

Response 1

Comments:

Corrected version have been attached. Please let us know if you are still having problems.

Related Objection 1

Applies To:

- Compound Inflation Rates (current, tier 1, tier 2) VA, [GLTC04, RGLTC04] (Rate)
- Simple Inflation Rates (current, tier 1, tier 2) VA, [GLTC04, RGLTC04] (Rate)

Comments: The rate files submitted 3/12/2021 (Compound Inflation Rates (current, tier 1, tier 2) - VA.xlsx (Updated) and Simple Inflation Rates (current, tier 1, tier 2) - VA.xlsx) both appear to be corrupted. Please correct.

Changed Items:

No Form Schedule items changed.

State: Virginia Filing Company: Unum Life Insurance Company of America

TOI/Sub-TOI: LTC03G Group Long Term Care/LTC03G.001 Qualified

Product Name:2019 GLTC04 RATE INITIATIVE - PHASE IProject Name/Number:2019 GLTC04 RATE INITIATIVE - PHASE I/

	chedule Item Changes					
Item No.	Document Name	Affected Form Numbers (Separated with	Rate Action	Rate Action Information	Attachments	Date Submitted
		commas)				
1	Compound Inflation Rates (current, tier 1, tier 2) - VA	GLTC04, RGLTC04	Revised	Previous State Filing Number: rates were filed prior to SERFF Percent Rate Change Request:	Compound Inflation Rates (current - tier 1 - tier 2) - VA.xlsx,	10/24/2022 By: Scott Abbott
Previous Versi	ion					
1	Compound Inflation Rates (current, tier 1, tier 2) - VA	GLTC04, RGLTC04	Revised	Previous State Filing Number: rates were filed prior to SERFF Percent Rate Change Request:	Compound Inflation Rates (current, tier 1, tier 2) - VA.xlsx,	03/12/2021 By: Ellen Desrosiers
Previous Versi	ion					
1	VA Proposed Rates - GLTC04&RGLTC04 - 2019	GLTC04, RGLTC04	Revised	Previous State Filing Number: rates were filed prior to SERFF Percent Rate Change Request:	VA Proposed Rates - GLTC04&RGLTC04 - 2019.pdf,	12/20/2019 By: Ellen Desrosiers
Previous Versi	ion			,		
1	VA Proposed Rates - GLTC04&RGLTC04 - 2019	GLTC04, RGLTC04	New		VA Proposed Rates - GLTC04&RGLTC04 - 2019.pdf,	03/28/2019 By: Ellen Desrosiers
2	Simple Inflation Rates (current, tier 1, tier 2) - VA	GLTC04, RGLTC04	Revised	Previous State Filing Number: rates were filed prior to SERFF Percent Rate Change Request:	Simple Inflation Rates (current - tier 1 - tier 2) - VA.xlsx,	10/24/2022 By: Scott Abbott
Previous Versi	ion	·	·	•		
2	Simple Inflation Rates (current, tier 1, tier 2) - VA		Revised	Previous State Filing Number: rates were filed prior to SERFF Percent Rate Change	Simple Inflation Rates (current, tier 1, tier 2) - VA.xlsx,	

Company Tracking #: SERFF Tracking #: UNUM-131865115 State Tracking #: UNUM-131865115 2019 GLTC04 RATE INITIATIVE - PHASE I

Virginia Filing Company: Unum Life Insurance Company of America State:

TOI/Sub-TOI: LTC03G Group Long Term Care/LTC03G.001 Qualified

Product Name: 2019 GLTC04 RATE INITIATIVE - PHASE I Project Name/Number: 2019 GLTC04 RATE INITIATIVE - PHASE I/

Rate/Rule Schedule Item Changes

Request:

No Supporting Documents changed.

Conclusion:

Sincerely, Scott Abbott

State: Virginia Filing Company: Unum Life Insurance Company of America

TOI/Sub-TOI: LTC03G Group Long Term Care/LTC03G.001 Qualified

Product Name:2019 GLTC04 RATE INITIATIVE - PHASE IProject Name/Number:2019 GLTC04 RATE INITIATIVE - PHASE I/

Response Letter

Response Letter Status Submitted to State

Response Letter Date 10/20/2022 Submitted Date 10/20/2022

Dear Bobby Toone,

Introduction:

Response 1

Comments:

I apologize, but the letters I see on my end do not have the "draft" watermark. I have attached them again here in hope that it works.

Related Objection 1

Applies To:

- Certificate Holder Letter, CHGLTC-T1-VA (Form)

Comments: Please remove the "DRAFT" watermark from this form, as requested in the objection sent 10/19/2022.

Changed Items:

State: Virginia Filing Company: Unum Life Insurance Company of America

TOI/Sub-TOI: LTC03G Group Long Term Care/LTC03G.001 Qualified

Product Name:2019 GLTC04 RATE INITIATIVE - PHASE IProject Name/Number:2019 GLTC04 RATE INITIATIVE - PHASE I/

Form Sche	edule Item Changes							
Item	Form	Form	Form	Form	Action Specific	Readability		
No.	Name	Number	Туре	Action	Data	Score	Attachments	Submitted
1	Certificate Holder Letter	CHGLTC-T1-VA	ОТН	Initial		51.400	GLTC CH ECNF T1-2_cln_v3_VA (final).pdf	
Previous Ve	ersion							
1	Certificate Holder Letter	CHGLTC-T1-VA	ОТН	Initial		51.400	GLTC CH ECNF T1-2_cln_v3_VA (final).pdf	Date Submitted: - 02/04/2022 By: Ellen Desrosiers
Previous Ve	ersion							
1	Certificate Holder Letter	CHGLTC-T1-VA	ОТН	Initial		51.400	GLTC19 CH T1-2 Infl Ins ECNF_v1_cln_V A.pdf	07/30/2021
Previous Ve	ersion							
1	Certificate Holder Letter	CHGLTC-T1-VA	ОТН	Initial		51.400	GLTC19 CH T1-2 Infl Ins ECNF_v1_cln_V A.pdf	05/24/2021
Previous Ve	ersion							
1	Certificate Holder Letter	CHGLTC-T1-VA	ОТН	Initial		51.400	GLTC ECNF T1- 2- VA.pdf	Date Submitted: 01/29/2021 By:
Previous Ve	ersion							
1	Certificate Holder Letter	CH-GLTC04-VA	ОТН	Initial		51.400	GLTC0419 CH ECNF_v7_cln_V A .pdf	
Previous Ve	ersion							
1	Certificate Holder Letter	CH-GLTC04-VA	ОТН	Initial		51.400	GLTC0419 CH ECNF_v6_cln_V A.pdf	Date Submitted: 06/16/2020 By:
Previous Ve	ersion							
1	Certificate Holder Letter	CH-GLTC04-VA	ОТН	Initial		51.400	GLTC0419 CH ECNF_v6_cln_V A.pdf	Date Submitted: 05/12/2020 By:
Previous Ve	ersion							
1	Certificate Holder	CH-GLTC04-VA	ОТН	Initial		51.400	GLTC0419 CH	Date Submitted:

State: Virginia Filing Company: Unum Life Insurance Company of America

TOI/Sub-TOI: LTC03G Group Long Term Care/LTC03G.001 Qualified

Product Name:2019 GLTC04 RATE INITIATIVE - PHASE IProject Name/Number:2019 GLTC04 RATE INITIATIVE - PHASE I/

Form Sche	dule Item Changes							
Item	Form	Form	Form	Form	Action Specific	Readability		
No.	Name	Number	Туре	Action	Data	Score	Attachments	Submitted
1	Certificate Holder Letter	CHGLTC-T1-VA	ОТН	Initial		51.400	GLTC CH ECNF T1-2_cln_v3_VA (final).pdf	Date Submitted: -10/20/2022 By: Scott Abbott
	Letter						ECNF_v4_cln_V A.pdf	03/22/2020 By: Ellen Desrosiers
2	Certificate Holder Letter	CHGLTC-T2-VA	ОТН	Initial		51.200	GLTC CH ECNF T2-2_cln_v3_VA (final).pdf	
Previous Ve	rsion							
2	Certificate Holder Letter	CHGLTC-T2-VA	ОТН	Initial		51.200	GLTC CH ECNF T2-2_cln_v3_VA (final).pdf	
Previous Ve	rsion							
2	Certificate Holder Letter	CHGLTC-T2-VA	ОТН	Initial		51.200	GLTC19 CH T2-2 Infl Ins ECNF_v1_cln_V A.pdf	07/30/2021
Previous Ve	rsion							
2	Certificate Holder Letter	CHGLTC-T2-VA	ОТН	Initial		51.200	GLTC19 CH T2-2 Infl Ins ECNF_v1_cln_V A.pdf	05/24/2021
Previous Ve	rsion							
2	Certificate Holder Letter	CHGLTC-T2-VA	ОТН	Initial		51.200	GLTC ECNF T2-2 - VA.pdf	P Date Submitted: 01/29/2021 By:

No Rate/Rule Schedule items changed.

No Supporting Documents changed.

Conclusion:

Sincerely,

Scott Abbott

State: Virginia Filing Company: Unum Life Insurance Company of America

TOI/Sub-TOI: LTC03G Group Long Term Care/LTC03G.001 Qualified

Product Name:2019 GLTC04 RATE INITIATIVE - PHASE IProject Name/Number:2019 GLTC04 RATE INITIATIVE - PHASE I/

Response Letter

Response Letter Status Submitted to State

Response Letter Date 10/20/2022 Submitted Date 10/20/2022

Dear Bobby Toone,

Introduction:

Response 1

Comments:

When an insured lapses their coverage and it moves to contingent non forfeiture or enhanced CNF, they receive this amendment to their coverage noting as such, to keep for their records.

Related Objection 1

Applies To:

- Certificate Amendment Contingent Non-Forfeiture Benefit, 04CBUL22G-VA (Form)
- Certificate Amendment Enhanced Contingent Non-Forfeiture Benefit, 04CBUL22G-APO-VA (Form)

Comments: In compliance with Virginia Regulation 14VAC5-101-60 5, please provide a "John Doe" copy of each form, sufficiently filled out to indicate how it is to be used.

Changed Items:

No Form Schedule items changed.

No Rate/Rule Schedule items changed.

Supporting Document Schedule Item Changes				
Satisfied - Item: Sample Contingent Non-Forfeiture Benefit "John Doe"				
Comments:				
Attachment(s):	GLTC04 CNF 04CBUL22G-VA_Sample.pdf GLTC04 04ECBUL22G-APO-VA_SAMPLE.pdf			

Conclusion:

Sincerely,

Scott Abbott

State: Virginia Filing Company: Unum Life Insurance Company of America

TOI/Sub-TOI: LTC03G Group Long Term Care/LTC03G.001 Qualified

Product Name:2019 GLTC04 RATE INITIATIVE - PHASE IProject Name/Number:2019 GLTC04 RATE INITIATIVE - PHASE I/

Response Letter

Response Letter Status Submitted to State

Response Letter Date 10/19/2022 Submitted Date 10/20/2022

Dear Bobby Toone,

Introduction:

Response 1

Comments:

The updated forms have been attached to the "Supporting Documentation" tab.

Related Objection 1

Applies To:

- Certificate Holder Letter, CHGLTC-T1-VA (Form)
- Sample Certificate Holder Letters (Supporting Document)

Comments: As a Policyholder Letter is expected to be submitted in its final form, please remove the DRAFT watermark from the form.

Please remove the SAMPLE watermark from the John Doe versions as well.

Changed Items:

No Form Schedule items changed.

No Rate/Rule Schedule items changed.

Filing Company:

Unum Life Insurance Company of America

TOI/Sub-TOI: LTC03G Group Long Term Care/LTC03G.001 Qualified

Product Name:2019 GLTC04 RATE INITIATIVE - PHASE IProject Name/Number:2019 GLTC04 RATE INITIATIVE - PHASE I/

Virginia

State:

Supporting Document So	Supporting Document Schedule Item Changes					
Satisfied - Item:	Sample Certificate Holder Letters					
Comments:						
Attachment(s):	GLTC CH ECNF T1-2_cln_v3_VA - Sample.pdf GLTC CH ECNF T2-2_cln_v3_VA - Sample.pdf					
Previous Version						
Satisfied - Item:	Sample Certificate Holder Letters					
Comments:						
Attachment(s):	GLTC CH ECNF T1-2_cln_v3_VA - Sample.pdf GLTC CH ECNF T2-2_cln_v3_VA - Sample.pdf					
Previous Version						
Satisfied - Item:	Sample Certificate Holder Letters					
Comments:						
Attachment(s):	GLTC CH ECNF T1-2_cln_v3_VA - Sample.pdf GLTC CH ECNF T2-2_cln_v3_VA - Sample.pdf					
Previous Version						
Satisfied - Item:	Sample Certificate Holder Letter					
Comments:						
Attachment(s):	GLTC19 CH T1-2 Infl Ins ECNF_VA-Sample.pdf					
Previous Version						
Satisfied - Item:	Sample Certificate Holder Letter					
Comments:						
Attachment(s):	GLTC19 CH T1-2 Infl Ins ECNF_VA-Sample.pdf					
Previous Version						
Satisfied - Item:	Sample Certificate Holder Letters					
Comments:						
Attachment(s):	GLTC0419 CH ECNF T1-2_Sample_VA.pdf					
Previous Version						
Satisfied - Item:	Sample Certificate Holder Letter					
Comments:						
Attachment(s):	GLTC0419 CH ECNF_v7_sample-VA.pdf					

State: Virginia Filing Company: Unum Life Insurance Company of America

TOI/Sub-TOI: LTC03G Group Long Term Care/LTC03G.001 Qualified

Product Name:2019 GLTC04 RATE INITIATIVE - PHASE IProject Name/Number:2019 GLTC04 RATE INITIATIVE - PHASE I/

Response 2

Comments:

There is not a return envelope included in the certificateholder rate increase communications.

Related Objection 2

Applies To:

- Certificate Holder Letter, CHGLTC-T1-VA (Form)

Comments: Please specify if a return envelope will be included with the Policyholder Notification letter and other forms. If so, please include it in the Attachments at the end of the letter.

Changed Items:

No Form Schedule items changed.

No Rate/Rule Schedule items changed.

No Supporting Documents changed.

Conclusion:

Sincerely,

Scott Abbott

State: Virginia Filing Company: Unum Life Insurance Company of America

TOI/Sub-TOI: LTC03G Group Long Term Care/LTC03G.001 Qualified

Product Name:2019 GLTC04 RATE INITIATIVE - PHASE IProject Name/Number:2019 GLTC04 RATE INITIATIVE - PHASE I/

Response Letter

Response Letter Status Submitted to State

Response Letter Date 09/15/2022 Submitted Date 09/15/2022

Dear Bobby Toone,

Introduction:

Response 1

Comments:

The amendments have been updated with the suggested bracketing. The FAQ will remain unchanged. An updated SOV reflecting the changes in variability to the amendments is attached. Thank you.

Related Objection 1

Applies To:

- Certificate Amendment Contingent Non-Forfeiture Benefit, 04CBUL22G-VA (Form)
- Certificate Amendment Enhanced Contingent Non-Forfeiture Benefit, 04CBUL22G-APO-VA (Form)
- Frequently Asked Questions, GLTC-FAQ-VA (Form)

Comments: The company may consider add brackets around the company address, phone numbers, and office hours in the event those items need to be changed. If this is done, be certain to add a description in the Statement of Variability.

Changed Items:

State: Virginia Filing Company: Unum Life Insurance Company of America

TOI/Sub-TOI: LTC03G Group Long Term Care/LTC03G.001 Qualified

Product Name:2019 GLTC04 RATE INITIATIVE - PHASE IProject Name/Number:2019 GLTC04 RATE INITIATIVE - PHASE I/

Form Sche	edule Item Changes							
Item	Form	Form	Form	Form	Action Specific	Readability		
No.	Name	Number	Туре	Action	Data	Score	Attachments	Submitted
1	Certificate Amendment - Contingent Non- Forfeiture Benefit	04CBUL22G-VA	CERA	Initial		41.200	GLTC04 CNF Form_v1_cln - 04CBUL22G-VA (final).pdf	Date Submitted: 09/15/2022 By: Ellen Desrosiers
Previous Ve	ersion							
1	Certificate Amendment - Contingent Non- Forfeiture Benefit	04CBUL22G-VA	CERA	Initial		41.200	GLTC04 CNF Form_v1_cln - 04CBUL22G-VA (final).pdf	Date Submitted: 02/04/2022 By: Ellen Desrosiers
Previous Ve	ersion							
1	Certificate Amendment - Contingent Non- Forfeiture Benefit	04CNF19G-VA	CERA	Initial		41.200	GLTC04 CNF Form_v2_cln - 04CNF19G- VA.pdf	Date Submitted: 03/22/2020 By: Ellen Desrosiers
Previous Ve	ersion							
1	Certificate Amendment - Contingent Non- Forfeiture Benefit	04CNF19G-VA	CERA	Initial			GLTC04 CNF Form - 04CNF19G- VA.pdf	Date Submitted: 03/28/2019 By: Ellen Desrosiers
2	Certificate Amendment - Enhanced Contingent Non- Forfeiture Benefit	04CBUL22G- APO-VA	CERA	Initial		41.100	GLTC04 ECNF Form_v1_cln- 04ECBUL22G- APO-VA.pdf	Date Submitted: 09/15/2022 By: Ellen Desrosiers
Previous Ve	ersion							
2	Certificate Amendment - Enhanced Contingent Non- Forfeiture Benefit	04CBUL22G- APO-VA	CERA	Initial		41.100	GLTC04 ECNF Form_v1_cln- 04ECBUL22G- APO-VA.pdf	Date Submitted: 02/04/2022 By: Ellen Desrosiers
Previous Ve	ersion							
2	Certificate Amendment - Enhanced Contingent Non- Forfeiture Benefit	04ECNF19G- APO-VA	CERA	Initial		41.100	GLTC04 ECNF Form_v2_cln- 04ECNF19G- APO-VA.pdf	Date Submitted: 03/22/2020 By: Ellen Desrosiers
Previous Ve	ersion							
2	Certificate	04ECNF19G-	CERA	Initial			GLTC04 ECNF	Date Submitted:

State: Virginia Filing Company: Unum Life Insurance Company of America

TOI/Sub-TOI: LTC03G Group Long Term Care/LTC03G.001 Qualified

Product Name:2019 GLTC04 RATE INITIATIVE - PHASE IProject Name/Number:2019 GLTC04 RATE INITIATIVE - PHASE I/

Form Schedule	Form Schedule Item Changes							
Item	Form	Form	Form	Form	Action Specific	Readability		
No.	Name	Number	Туре	Action	Data	Score	Attachments	Submitted
1	Certificate Amendment - Contingent Non- Forfeiture Benefit	04CBUL22G-VA	CERA	Initial		41.200	GLTC04 CNF Form_v1_cln - 04CBUL22G-VA (final).pdf	Date Submitted: 09/15/2022 By: Ellen Desrosiers
	Amendment - Enhanced Contingent Non- Forfeiture Benefit	APO-VA					Form- 04ECNF19G- APO-VA.pdf	03/28/2019 By: Ellen Desrosiers

No Rate/Rule Schedule items changed.

Supporting Document Schedule Item Changes				
Satisfied - Item:	Statement of Variability			
Comments:				
Attachment(s):	Statement of Variability.pdf			
Previous Version				
Satisfied - Item:	Statement of Variability			
Comments:				
Attachment(s):	Statement of Variability.pdf			
Previous Version				
Satisfied - Item:	Statement of Variability			
Comments:				
Attachment(s):	Statement of Variability.pdf			

Conclusion:

Sincerely,

Ellen Desrosiers

State: Virginia Filing Company: Unum Life Insurance Company of America

TOI/Sub-TOI: LTC03G Group Long Term Care/LTC03G.001 Qualified

Product Name:2019 GLTC04 RATE INITIATIVE - PHASE IProject Name/Number:2019 GLTC04 RATE INITIATIVE - PHASE I/

Response Letter

Response Letter Status Submitted to State

Response Letter Date 05/16/2022 Submitted Date 05/16/2022

Dear Bobby Toone,

Introduction:

Response 1

Comments:

Attached are John Doe certificate holder letters, FAQ, and Request to Change Coverage form.

Related Objection 1

Applies To:

- Group Long Term Care Request to Change Coverage, AE1181-VA (Form)
- Sample Certificate Holder Letter (Supporting Document)
- Frequently Asked Questions, GLTC-FAQ-VA (Form)
- Certificate Holder Letter, CHGLTC-T1-VA (Form)
- Certificate Holder Letter, CHGLTC-T2-VA (Form)

Comments: Please submit revised "John Doe" versions of each of the above noted forms.

Changed Items:

No Form Schedule items changed.

No Rate/Rule Schedule items changed.

Supporting Document Scl	Supporting Document Schedule Item Changes				
Satisfied - Item:	Satisfied - Item: Sample Request to Change Coverage Form				
Comments:					
Attachment(s):	AE1181-VA - Sample.pdf				

Filing Company:

Unum Life Insurance Company of America

TOI/Sub-TOI: LTC03G Group Long Term Care/LTC03G.001 Qualified

Product Name:2019 GLTC04 RATE INITIATIVE - PHASE IProject Name/Number:2019 GLTC04 RATE INITIATIVE - PHASE I/

Virginia

Supporting Document Se	chedule Item Changes
Satisfied - Item:	Sample Request to Change Coverage Form
Comments:	
Attachment(s):	AE1181-VA - Sample.pdf
Satisfied - Item:	Sample Certificate Holder Letters
Comments:	
Attachment(s):	GLTC CH ECNF T1-2_cln_v3_VA - Sample.pdf GLTC CH ECNF T2-2_cln_v3_VA - Sample.pdf
Previous Version	
Satisfied - Item:	Sample Certificate Holder Letter
Comments:	
Attachment(s):	GLTC19 CH T1-2 Infl Ins ECNF_VA-Sample.pdf
Previous Version	
Satisfied - Item:	Sample Certificate Holder Letter
Comments:	
Attachment(s):	GLTC19 CH T1-2 Infl Ins ECNF_VA-Sample.pdf
Previous Version	
Satisfied - Item:	Sample Certificate Holder Letters
Comments:	
Attachment(s):	GLTC0419 CH ECNF T1-2_Sample_VA.pdf
Previous Version	
Satisfied - Item:	Sample Certificate Holder Letter
Comments:	
Attachment(s):	GLTC0419 CH ECNF_v7_sample-VA.pdf

Conclusion:

Sincerely,

State:

Ellen Desrosiers

State: Virginia Filing Company: Unum Life Insurance Company of America

TOI/Sub-TOI: LTC03G Group Long Term Care/LTC03G.001 Qualified

Product Name:2019 GLTC04 RATE INITIATIVE - PHASE IProject Name/Number:2019 GLTC04 RATE INITIATIVE - PHASE I/

Response Letter

Response Letter Status Submitted to State

Response Letter Date 02/04/2022 Submitted Date 02/04/2022

Dear Bobby Toone,

Introduction:

Response 1

Comments:

Updated forms, a statement of variability and additional requested documents are attached along with the objection response dated 1-20-22.

Related Objection 1

Applies To:

- Certificate Holder Letter, CHGLTC-T1-VA (Form)
- Certificate Holder Letter, CHGLTC-T2-VA (Form)

Comments: At the end of each letter, include a section of "Enclosures". This will be a list of all forms included with the policyholder notification. Any forms that would only be sent to certain policyholders should be noted as variable, with a description of the variability shown in the Statement of Variability.

Changed Items:

State: Virginia Filing Company: Unum Life Insurance Company of America

TOI/Sub-TOI: LTC03G Group Long Term Care/LTC03G.001 Qualified

Product Name:2019 GLTC04 RATE INITIATIVE - PHASE IProject Name/Number:2019 GLTC04 RATE INITIATIVE - PHASE I/

ltem	Form	Form	Form	Form	Action Specific	Readability		
No.	Name	Number	Туре	Action	Data	Score	Attachments	Submitted
1	Certificate Amendment - Contingent Non- Forfeiture Benefit	04CBUL22G-VA	CERA	Initial		41.200	GLTC04 CNF Form_v1_cln - 04CBUL22G-VA (final).pdf	Date Submitted: 02/04/2022 By: Ellen Desrosiers
Previous Ve	ersion							
1	Certificate Amendment - Contingent Non- Forfeiture Benefit	04CNF19G-VA	CERA	Initial		41.200	GLTC04 CNF Form_v2_cln - 04CNF19G- VA.pdf	Date Submitted 03/22/2020 By: Ellen Desrosiers
Previous Ve	ersion							
1	Certificate Amendment - Contingent Non- Forfeiture Benefit	04CNF19G-VA	CERA	Initial			GLTC04 CNF Form - 04CNF19G- VA.pdf	Date Submitted 03/28/2019 By: Ellen Desrosiers
2		04CBUL22G- APO-VA	CERA	Initial		41.100	GLTC04 ECNF Form_v1_cln- 04ECBUL22G- APO-VA.pdf	Date Submitted: 02/04/2022 By: Ellen Desrosiers
Previous Ve	ersion							
2	Certificate Amendment - Enhanced Contingent Non- Forfeiture Benefit	04ECNF19G- APO-VA	CERA	Initial		41.100	GLTC04 ECNF Form_v2_cln- 04ECNF19G- APO-VA.pdf	Date Submitted 03/22/2020 By: Ellen Desrosiers
Previous Ve	ersion							
2	Certificate Amendment - Enhanced Contingent Non- Forfeiture Benefit	04ECNF19G- APO-VA	CERA	Initial			GLTC04 ECNF Form- 04ECNF19G- APO-VA.pdf	Date Submitted: 03/28/2019 By: Ellen Desrosiers
3	Frequently Asked Questions	GLTC-FAQ-VA	ОТН	Initial		47.600	GLTC CH FAQ ECNF_v2_cln_V A (final).pdf	Date Submitted: 02/04/2022 By: Ellen Desrosiers
Previous Ve	ersion							
3	Frequently Asked Questions	VA-GLTC04-FAQ	OTH	Initial		47.600	GLTC0419 CH FAQ	Date Submitted 06/16/2020

State: Virginia Filing Company: Unum Life Insurance Company of America

TOI/Sub-TOI: LTC03G Group Long Term Care/LTC03G.001 Qualified

Product Name:2019 GLTC04 RATE INITIATIVE - PHASE IProject Name/Number:2019 GLTC04 RATE INITIATIVE - PHASE I/

ltem	Form	Form	Form	Form	Action Specific	Readability		
No.	Name	Number	Туре	Action	Data	Score	Attachments	Submitted
1	Certificate Amendment - Contingent Non- Forfeiture Benefit	04CBUL22G-VA	CERA	Initial		41.200	GLTC04 CNF Form_v1_cln - 04CBUL22G-VA (final).pdf	Date Submitted: 02/04/2022 By: Ellen Desrosiers
							ECNF_v2_cln_G en.pdf	Ву:
Previous Ve	ersion							
3	Frequently Asked Questions	VA-GLTC04-FAQ	ОТН	Initial		47.600	GLTC0419 CH FAQ ECNF- VA.pdf	Date Submitted 03/22/2020 By: Ellen Desrosiers
4	Certificate Holder Letter	CHGLTC-T1-VA	ОТН	Initial		51.400	GLTC CH ECNF T1-2_cln_v3_VA (final).pdf	Date Submitted: -02/04/2022 By: Ellen Desrosiers
Previous Ve	ersion							
4	Certificate Holder Letter	CHGLTC-T1-VA	ОТН	Initial		51.400	GLTC19 CH T1-2 Infl Ins ECNF_v1_cln_V A.pdf	07/30/2021
Previous Ve	ersion							
4	Certificate Holder Letter	CHGLTC-T1-VA	ОТН	Initial		51.400	GLTC19 CH T1-2 Infl Ins ECNF_v1_cln_V A.pdf	05/24/2021
Previous Ve	ersion							
4	Certificate Holder Letter	CHGLTC-T1-VA	OTH	Initial		51.400	GLTC ECNF T1- 2- VA.pdf	Date Submitted 01/29/2021 By:
Previous Ve	ersion							
4	Certificate Holder Letter	CH-GLTC04-VA	ОТН	Initial		51.400	GLTC0419 CH ECNF_v7_cln_V A .pdf	Date Submitted 06/30/2020 By:
Previous Ve	ersion			· ·				-
4	Certificate Holder Letter	CH-GLTC04-VA	OTH	Initial		51.400	GLTC0419 CH ECNF_v6_cln_V A.pdf	Date Submitted 06/16/2020 By:

State: Virginia Filing Company: Unum Life Insurance Company of America

TOI/Sub-TOI: LTC03G Group Long Term Care/LTC03G.001 Qualified

Product Name:2019 GLTC04 RATE INITIATIVE - PHASE IProject Name/Number:2019 GLTC04 RATE INITIATIVE - PHASE I/

	edule Item Changes	Form	Form	Form	Action Chastin	Doodobility:		
Item	Form	Form	Form -		Action Specific			
No.	Name	Number	Type	Action	Data	Score	Attachments	Submitted
1	Certificate Amendment - Contingent Non- Forfeiture Benefit	04CBUL22G-VA	CERA	Initial		41.200	GLTC04 CNF Form_v1_cln - 04CBUL22G-VA (final).pdf	Date Submitted: 02/04/2022 By: Ellen Desrosiers
Previous Ve	ersion							
4	Certificate Holder Letter	CH-GLTC04-VA	OTH	Initial		51.400	GLTC0419 CH ECNF_v6_cln_V A.pdf	Date Submitted: 05/12/2020 By:
Previous Ve	ersion							
4	Certificate Holder Letter	CH-GLTC04-VA	ОТН	Initial		51.400	GLTC0419 CH ECNF_v4_cln_V A.pdf	Date Submitted: 03/22/2020 By: Ellen Desrosiers
5	Certificate Holder Letter	CHGLTC-T2-VA	OTH	Initial		51.200	GLTC CH ECNF T2-2_cln_v3_VA (final).pdf	Date Submitted: 02/04/2022 By: Ellen Desrosiers
Previous Ve	ersion							
5	Certificate Holder Letter	CHGLTC-T2-VA	ОТН	Initial		51.200	GLTC19 CH T2-2 Infl Ins ECNF_v1_cln_V A.pdf	07/30/2021
Previous Ve	ersion							
5	Certificate Holder Letter	CHGLTC-T2-VA	ОТН	Initial		51.200	GLTC19 CH T2-2 Infl Ins ECNF_v1_cln_V A.pdf	05/24/2021
Previous Ve	ersion							
5	Certificate Holder Letter	CHGLTC-T2-VA	OTH	Initial		51.200	GLTC ECNF T2-2 - VA.pdf	Date Submitted: 01/29/2021 By:

No Rate/Rule Schedule items changed.

Filing Company:

Unum Life Insurance Company of America

TOI/Sub-TOI: LTC03G Group Long Term Care/LTC03G.001 Qualified

Product Name:2019 GLTC04 RATE INITIATIVE - PHASE IProject Name/Number:2019 GLTC04 RATE INITIATIVE - PHASE I/

Virginia

State:

Attachment(s):

Supporting Document Se	chedule Item Changes
Satisfied - Item:	Premium Increase History
Comments:	
Attachment(s):	GLTC Prem Inc History_v2_VA.pdf
Previous Version	
Satisfied - Item:	Premium Increase History
Comments:	
Attachment(s):	GLTC0419 Prem Inc History_v2_VA.pdf
Previous Version	
Satisfied - Item:	GLTC0419 Prem Inc History_VA
Comments:	

GLTC0419 Prem Inc History_VA.pdf

Supporting Document Schedule	Item Changes
Satisfied - Item:	Premium Increase History
Comments:	
Attachment(s):	GLTC Prem Inc History_v2_VA.pdf
Previous Version	
Satisfied - Item:	Premium Increase History
Comments:	
Attachment(s):	GLTC0419 Prem Inc History_v2_VA.pdf
Previous Version	
Satisfied - Item:	GLTC0419 Prem Inc History_VA
Comments:	
Attachment(s):	GLTC0419 Prem Inc History_VA.pdf

Satisfied - Item:	Administrative Statement
Comments:	
Attachment(s):	GLTC Administrative Statement (1).pdf

State: Virginia Filing Company: Unum Life Insurance Company of America

Virginia Objections_Final Responses 1.20.22.pdf

TOI/Sub-TOI: LTC03G Group Long Term Care/LTC03G.001 Qualified

Product Name:2019 GLTC04 RATE INITIATIVE - PHASE IProject Name/Number:2019 GLTC04 RATE INITIATIVE - PHASE I/

Comments: Attachment(s):

Supporting Document Sch	
Satisfied - Item:	Premium Increase History
Comments:	
Attachment(s):	GLTC Prem Inc History_v2_VA.pdf
Previous Version	
Satisfied - Item:	Premium Increase History
Comments:	
Attachment(s):	GLTC0419 Prem Inc History_v2_VA.pdf
Previous Version	
Satisfied - Item:	GLTC0419 Prem Inc History_VA
Comments:	
Attachment(s):	GLTC0419 Prem Inc History_VA.pdf
0.0.0.1.1	
Satisfied - Item:	Administrative Statement
Comments:	
Attachment(s):	GLTC Administrative Statement (1).pdf
Satisfied - Item:	Virginia Objections_Final Responses 1.20.22

Filing Company:

Unum Life Insurance Company of America

TOI/Sub-TOI: LTC03G Group Long Term Care/LTC03G.001 Qualified

Product Name:2019 GLTC04 RATE INITIATIVE - PHASE IProject Name/Number:2019 GLTC04 RATE INITIATIVE - PHASE I/

Virginia

O	ah a duda Karu Oh an na a
Supporting Document So	
Satisfied - Item:	Premium Increase History
Comments:	
Attachment(s):	GLTC Prem Inc History_v2_VA.pdf
Previous Version	
Satisfied - Item:	Premium Increase History
Comments:	
Attachment(s):	GLTC0419 Prem Inc History_v2_VA.pdf
Previous Version	
Satisfied - Item:	GLTC0419 Prem Inc History_VA
Comments:	
Attachment(s):	GLTC0419 Prem Inc History_VA.pdf
Satisfied - Item: Comments:	Administrative Statement
Attachment(s):	GLTC Administrative Statement (1).pdf
Satisfied - Item:	Virginia Objections_Final Responses 1.20.22
Comments:	
Attachment(s):	Virginia Objections_Final Responses 1.20.22.pdf
Satisfied - Item:	Statement of Variability
Comments:	
Attachment(s):	Statement of Variability.pdf
Previous Version	
Satisfied - Item:	Statement of Variability
Comments:	
Attachment(s):	Statement of Variability.pdf

Response 2

State:

Comments:

Updated forms, a statement of variability and additional requested documents are attached along with the objection response dated 1-20-22.

Related Objection 2

State: Virginia Filing Company: Unum Life Insurance Company of America

TOI/Sub-TOI: LTC03G Group Long Term Care/LTC03G.001 Qualified

Product Name:2019 GLTC04 RATE INITIATIVE - PHASE IProject Name/Number:2019 GLTC04 RATE INITIATIVE - PHASE I/

Applies To:

- Certificate Holder Letter, CHGLTC-T1-VA (Form)
- Certificate Holder Letter, CHGLTC-T2-VA (Form)

Comments: Referring to the [Date Created] on the first page, please verify that a policyholder will have a minimum of 75 days, from the time the letter is received, to make an informed decision about their insurance coverage.

Changed Items:

State: Virginia Filing Company: Unum Life Insurance Company of America

TOI/Sub-TOI: LTC03G Group Long Term Care/LTC03G.001 Qualified

Product Name:2019 GLTC04 RATE INITIATIVE - PHASE IProject Name/Number:2019 GLTC04 RATE INITIATIVE - PHASE I/

ltem	Form	Form	Form	Form	Action Specific	Readability		
No.	Name	Number	Туре	Action	Data	Score	Attachments	Submitted
1	Certificate Amendment - Contingent Non- Forfeiture Benefit	04CBUL22G-VA	CERA	Initial		41.200	GLTC04 CNF Form_v1_cln - 04CBUL22G-VA (final).pdf	Date Submitted: 02/04/2022 By: Ellen Desrosiers
Previous Ve	ersion							
1	Certificate Amendment - Contingent Non- Forfeiture Benefit	04CNF19G-VA	CERA	Initial		41.200	GLTC04 CNF Form_v2_cln - 04CNF19G- VA.pdf	Date Submitted 03/22/2020 By: Ellen Desrosiers
Previous Ve	ersion							
1	Certificate Amendment - Contingent Non- Forfeiture Benefit	04CNF19G-VA	CERA	Initial			GLTC04 CNF Form - 04CNF19G- VA.pdf	Date Submitted 03/28/2019 By: Ellen Desrosiers
2		04CBUL22G- APO-VA	CERA	Initial		41.100	GLTC04 ECNF Form_v1_cln- 04ECBUL22G- APO-VA.pdf	Date Submitted: 02/04/2022 By: Ellen Desrosiers
Previous Ve	ersion							
2	Certificate Amendment - Enhanced Contingent Non- Forfeiture Benefit	04ECNF19G- APO-VA	CERA	Initial		41.100	GLTC04 ECNF Form_v2_cln- 04ECNF19G- APO-VA.pdf	Date Submitted 03/22/2020 By: Ellen Desrosiers
Previous Ve	ersion							
2	Certificate Amendment - Enhanced Contingent Non- Forfeiture Benefit	04ECNF19G- APO-VA	CERA	Initial			GLTC04 ECNF Form- 04ECNF19G- APO-VA.pdf	Date Submitted: 03/28/2019 By: Ellen Desrosiers
3	Frequently Asked Questions	GLTC-FAQ-VA	ОТН	Initial		47.600	GLTC CH FAQ ECNF_v2_cln_V A (final).pdf	Date Submitted: 02/04/2022 By: Ellen Desrosiers
Previous Ve	ersion							
3	Frequently Asked Questions	VA-GLTC04-FAQ	OTH	Initial		47.600	GLTC0419 CH FAQ	Date Submitted 06/16/2020

State: Virginia Filing Company: Unum Life Insurance Company of America

TOI/Sub-TOI: LTC03G Group Long Term Care/LTC03G.001 Qualified

Product Name:2019 GLTC04 RATE INITIATIVE - PHASE IProject Name/Number:2019 GLTC04 RATE INITIATIVE - PHASE I/

ltem	Form	Form	Form	Form	Action Specific	Readability		
No.	Name	Number	Туре	Action	Data	Score	Attachments	Submitted
1	Certificate Amendment - Contingent Non- Forfeiture Benefit	04CBUL22G-VA	CERA	Initial		41.200	GLTC04 CNF Form_v1_cln - 04CBUL22G-VA (final).pdf	Date Submitted: 02/04/2022 By: Ellen Desrosiers
							ECNF_v2_cln_G en.pdf	Ву:
Previous Ve	ersion							
3	Frequently Asked Questions	VA-GLTC04-FAQ	ОТН	Initial		47.600	GLTC0419 CH FAQ ECNF- VA.pdf	Date Submitted 03/22/2020 By: Ellen Desrosiers
4	Certificate Holder Letter	CHGLTC-T1-VA	ОТН	Initial		51.400	GLTC CH ECNF T1-2_cln_v3_VA (final).pdf	Date Submitted: -02/04/2022 By: Ellen Desrosiers
Previous Ve	ersion							
4	Certificate Holder Letter	CHGLTC-T1-VA	ОТН	Initial		51.400	GLTC19 CH T1-2 Infl Ins ECNF_v1_cln_V A.pdf	07/30/2021
Previous Ve	ersion							
4	Certificate Holder Letter	CHGLTC-T1-VA	ОТН	Initial		51.400	GLTC19 CH T1-2 Infl Ins ECNF_v1_cln_V A.pdf	05/24/2021
Previous Ve	ersion							
4	Certificate Holder Letter	CHGLTC-T1-VA	OTH	Initial		51.400	GLTC ECNF T1- 2- VA.pdf	Date Submitted 01/29/2021 By:
Previous Ve	ersion							
4	Certificate Holder Letter	CH-GLTC04-VA	ОТН	Initial		51.400	GLTC0419 CH ECNF_v7_cln_V A .pdf	Date Submitted 06/30/2020 By:
Previous Ve	ersion			· ·				-
4	Certificate Holder Letter	CH-GLTC04-VA	OTH	Initial		51.400	GLTC0419 CH ECNF_v6_cln_V A.pdf	Date Submitted 06/16/2020 By:

State: Virginia Filing Company: Unum Life Insurance Company of America

TOI/Sub-TOI: LTC03G Group Long Term Care/LTC03G.001 Qualified

Product Name:2019 GLTC04 RATE INITIATIVE - PHASE IProject Name/Number:2019 GLTC04 RATE INITIATIVE - PHASE I/

	dule Item Changes	F	Ганна	Form	Action Coccitic	Dandahilit		
Item	Form	Form	Form -		Action Specific			
No.	Name	Number	Type	Action	Data	Score	Attachments	Submitted
1	Certificate Amendment - Contingent Non- Forfeiture Benefit	04CBUL22G-VA	CERA	Initial		41.200	GLTC04 CNF Form_v1_cln - 04CBUL22G-VA (final).pdf	Date Submitted: 02/04/2022 By: Ellen Desrosiers
Previous Ve	ersion							
4	Certificate Holder Letter	CH-GLTC04-VA	OTH	Initial		51.400	GLTC0419 CH ECNF_v6_cln_V A.pdf	Date Submitted: 05/12/2020 By:
Previous Ve	ersion							
4	Certificate Holder Letter	CH-GLTC04-VA	ОТН	Initial		51.400	GLTC0419 CH ECNF_v4_cln_V A.pdf	Date Submitted: 03/22/2020 By: Ellen Desrosiers
5	Certificate Holder Letter	CHGLTC-T2-VA	ОТН	Initial		51.200	GLTC CH ECNF T2-2_cln_v3_VA (final).pdf	Date Submitted: 02/04/2022 By: Ellen Desrosiers
Previous Ve	ersion							
5	Certificate Holder Letter	CHGLTC-T2-VA	ОТН	Initial		51.200	GLTC19 CH T2-2 Infl Ins ECNF_v1_cln_V A.pdf	07/30/2021
Previous Ve	ersion							
5	Certificate Holder Letter	CHGLTC-T2-VA	ОТН	Initial		51.200	GLTC19 CH T2-2 Infl Ins ECNF_v1_cln_V A.pdf	05/24/2021
Previous Ve	ersion							
5	Certificate Holder Letter	CHGLTC-T2-VA	OTH	Initial		51.200	GLTC ECNF T2-2 - VA.pdf	P Date Submitted: 01/29/2021 By:

No Rate/Rule Schedule items changed.

Filing Company:

Unum Life Insurance Company of America

TOI/Sub-TOI: LTC03G Group Long Term Care/LTC03G.001 Qualified

Product Name:2019 GLTC04 RATE INITIATIVE - PHASE IProject Name/Number:2019 GLTC04 RATE INITIATIVE - PHASE I/

Virginia

State:

Attachment(s):

Supporting Document Schedule Item Changes			
Satisfied - Item:	Premium Increase History		
Comments:			
Attachment(s):	GLTC Prem Inc History_v2_VA.pdf		
Previous Version			
Satisfied - Item:	Premium Increase History		
Comments:			
Attachment(s):	GLTC0419 Prem Inc History_v2_VA.pdf		
Previous Version			
Satisfied - Item:	GLTC0419 Prem Inc History_VA		
Comments:			

GLTC0419 Prem Inc History_VA.pdf

Supporting Document Schedule Item Changes	
Satisfied - Item:	Premium Increase History
Comments:	
Attachment(s):	GLTC Prem Inc History_v2_VA.pdf
Previous Version	
Satisfied - Item:	Premium Increase History
Comments:	
Attachment(s):	GLTC0419 Prem Inc History_v2_VA.pdf
Previous Version	
Satisfied - Item:	GLTC0419 Prem Inc History_VA
Comments:	
Attachment(s):	GLTC0419 Prem Inc History_VA.pdf

Satisfied - Item:	Administrative Statement
Comments:	
Attachment(s):	GLTC Administrative Statement (1).pdf

State: Virginia Filing Company: Unum Life Insurance Company of America

Virginia Objections_Final Responses 1.20.22.pdf

TOI/Sub-TOI: LTC03G Group Long Term Care/LTC03G.001 Qualified

Product Name:2019 GLTC04 RATE INITIATIVE - PHASE IProject Name/Number:2019 GLTC04 RATE INITIATIVE - PHASE I/

Comments: Attachment(s):

Supporting Document Sch	
Satisfied - Item:	Premium Increase History
Comments:	
Attachment(s):	GLTC Prem Inc History_v2_VA.pdf
Previous Version	
Satisfied - Item:	Premium Increase History
Comments:	
Attachment(s):	GLTC0419 Prem Inc History_v2_VA.pdf
Previous Version	
Satisfied - Item:	GLTC0419 Prem Inc History_VA
Comments:	
Attachment(s):	GLTC0419 Prem Inc History_VA.pdf
0.0.0.1.1	
Satisfied - Item:	Administrative Statement
Comments:	
Attachment(s):	GLTC Administrative Statement (1).pdf
Satisfied - Item:	Virginia Objections_Final Responses 1.20.22

State: Virginia Filing Company: Unum Life Insurance Company of America

TOI/Sub-TOI: LTC03G Group Long Term Care/LTC03G.001 Qualified

Product Name:2019 GLTC04 RATE INITIATIVE - PHASE IProject Name/Number:2019 GLTC04 RATE INITIATIVE - PHASE I/

Supporting Document S	chedule Item Changes		
Satisfied - Item:	Premium Increase History		
Comments:			
Attachment(s):	GLTC Prem Inc History_v2_VA.pdf		
Previous Version			
Satisfied - Item:	Premium Increase History		
Comments:			
Attachment(s):	GLTC0419 Prem Inc History_v2_VA.pdf		
Previous Version			
Satisfied - Item:	GLTC0419 Prem Inc History_VA		
Comments:			
Attachment(s):	GLTC0419 Prem Inc History_VA.pdf		
Satisfied - Item:	Administrative Statement		
Comments:			
Attachment(s):	GLTC Administrative Statement (1).pdf		
Satisfied - Item:	Virginia Objections_Final Responses 1.20.22		
Comments:			
Attachment(s):	Virginia Objections_Final Responses 1.20.22.pdf		
Satisfied - Item:	Statement of Variability		
Comments:	·		
Attachment(s):	Statement of Variability.pdf		
Previous Version			
Satisfied - Item:	Statement of Variability		
Comments:			

Response 3

Attachment(s):

Comments:

Updated forms, a statement of variability and additional requested documents are attached along with the objection response dated 1-20-22.

Statement of Variability.pdf

Related Objection 3

State: Virginia Filing Company: Unum Life Insurance Company of America

TOI/Sub-TOI: LTC03G Group Long Term Care/LTC03G.001 Qualified

Product Name:2019 GLTC04 RATE INITIATIVE - PHASE IProject Name/Number:2019 GLTC04 RATE INITIATIVE - PHASE I/

Applies To:

- Certificate Holder Letter, CHGLTC-T1-VA (Form)
- Certificate Holder Letter, CHGLTC-T2-VA (Form)

Comments: In accordance with Virginia Regulation 14VAC5-200-75, please provide a statement describing the policyholder's options in the event of future rate increases.

Changed Items:

State: Virginia Filing Company: Unum Life Insurance Company of America

TOI/Sub-TOI: LTC03G Group Long Term Care/LTC03G.001 Qualified

ltem	Form	Form	Form	Form	Action Specific	Readability		
No.	Name	Number	Туре	Action	Data	Score	Attachments	Submitted
1	Certificate Amendment - Contingent Non- Forfeiture Benefit	04CBUL22G-VA	CERA	Initial		41.200	GLTC04 CNF Form_v1_cln - 04CBUL22G-VA (final).pdf	Date Submitted: 02/04/2022 By: Ellen Desrosiers
Previous Ve	ersion							
1	Certificate Amendment - Contingent Non- Forfeiture Benefit	04CNF19G-VA	CERA	Initial		41.200	GLTC04 CNF Form_v2_cln - 04CNF19G- VA.pdf	Date Submitted 03/22/2020 By: Ellen Desrosiers
Previous Ve	ersion							
1	Certificate Amendment - Contingent Non- Forfeiture Benefit	04CNF19G-VA	CERA	Initial			GLTC04 CNF Form - 04CNF19G- VA.pdf	Date Submitted 03/28/2019 By: Ellen Desrosiers
2		04CBUL22G- APO-VA	CERA	Initial		41.100	GLTC04 ECNF Form_v1_cln- 04ECBUL22G- APO-VA.pdf	Date Submitted: 02/04/2022 By: Ellen Desrosiers
Previous Ve	ersion							
2	Certificate Amendment - Enhanced Contingent Non- Forfeiture Benefit	04ECNF19G- APO-VA	CERA	Initial		41.100	GLTC04 ECNF Form_v2_cln- 04ECNF19G- APO-VA.pdf	Date Submitted 03/22/2020 By: Ellen Desrosiers
Previous Ve	ersion							
2	Certificate Amendment - Enhanced Contingent Non- Forfeiture Benefit	04ECNF19G- APO-VA	CERA	Initial			GLTC04 ECNF Form- 04ECNF19G- APO-VA.pdf	Date Submitted: 03/28/2019 By: Ellen Desrosiers
3	Frequently Asked Questions	GLTC-FAQ-VA	ОТН	Initial		47.600	GLTC CH FAQ ECNF_v2_cln_V A (final).pdf	Date Submitted: 02/04/2022 By: Ellen Desrosiers
Previous Ve	ersion							
3	Frequently Asked Questions	VA-GLTC04-FAQ	OTH	Initial		47.600	GLTC0419 CH FAQ	Date Submitted 06/16/2020

State: Virginia Filing Company: Unum Life Insurance Company of America

TOI/Sub-TOI: LTC03G Group Long Term Care/LTC03G.001 Qualified

ltem	Form	Form	Form	Form	Action Specific	Readability		
No.	Name	Number	Туре	Action	Data	Score	Attachments	Submitted
1	Certificate Amendment - Contingent Non- Forfeiture Benefit	04CBUL22G-VA	CERA	Initial		41.200	GLTC04 CNF Form_v1_cln - 04CBUL22G-VA (final).pdf	Date Submitted: 02/04/2022 By: Ellen Desrosiers
							ECNF_v2_cln_G en.pdf	Ву:
Previous Ve	ersion							
3	Frequently Asked Questions	VA-GLTC04-FAQ	ОТН	Initial		47.600	GLTC0419 CH FAQ ECNF- VA.pdf	Date Submitted 03/22/2020 By: Ellen Desrosiers
4	Certificate Holder Letter	CHGLTC-T1-VA	ОТН	Initial		51.400	GLTC CH ECNF T1-2_cln_v3_VA (final).pdf	Date Submitted: -02/04/2022 By: Ellen Desrosiers
Previous Ve	ersion							
4	Certificate Holder Letter	CHGLTC-T1-VA	ОТН	Initial		51.400	GLTC19 CH T1-2 Infl Ins ECNF_v1_cln_V A.pdf	07/30/2021
Previous Ve	ersion							
4	Certificate Holder Letter	CHGLTC-T1-VA	ОТН	Initial		51.400	GLTC19 CH T1-2 Infl Ins ECNF_v1_cln_V A.pdf	05/24/2021
Previous Ve	ersion							
4	Certificate Holder Letter	CHGLTC-T1-VA	OTH	Initial		51.400	GLTC ECNF T1- 2- VA.pdf	Date Submitted 01/29/2021 By:
Previous Ve	ersion							
4	Certificate Holder Letter	CH-GLTC04-VA	ОТН	Initial		51.400	GLTC0419 CH ECNF_v7_cln_V A .pdf	Date Submitted 06/30/2020 By:
Previous Ve	ersion			· ·				-
4	Certificate Holder Letter	CH-GLTC04-VA	OTH	Initial		51.400	GLTC0419 CH ECNF_v6_cln_V A.pdf	Date Submitted 06/16/2020 By:

State: Virginia Filing Company: Unum Life Insurance Company of America

TOI/Sub-TOI: LTC03G Group Long Term Care/LTC03G.001 Qualified

Product Name:2019 GLTC04 RATE INITIATIVE - PHASE IProject Name/Number:2019 GLTC04 RATE INITIATIVE - PHASE I/

	edule Item Changes	Form	Form	Form	Action Chastin	Doodobility:		
Item	Form	Form	Form -		Action Specific			
No.	Name	Number	Type	Action	Data	Score	Attachments	Submitted
1	Certificate Amendment - Contingent Non- Forfeiture Benefit	04CBUL22G-VA	CERA	Initial		41.200	GLTC04 CNF Form_v1_cln - 04CBUL22G-VA (final).pdf	Date Submitted: 02/04/2022 By: Ellen Desrosiers
Previous Ve	ersion							
4	Certificate Holder Letter	CH-GLTC04-VA	OTH	Initial		51.400	GLTC0419 CH ECNF_v6_cln_V A.pdf	Date Submitted: 05/12/2020 By:
Previous Ve	ersion							
4	Certificate Holder Letter	CH-GLTC04-VA	ОТН	Initial		51.400	GLTC0419 CH ECNF_v4_cln_V A.pdf	Date Submitted: 03/22/2020 By: Ellen Desrosiers
5	Certificate Holder Letter	CHGLTC-T2-VA	OTH	Initial		51.200	GLTC CH ECNF T2-2_cln_v3_VA (final).pdf	Date Submitted: 02/04/2022 By: Ellen Desrosiers
Previous Ve	ersion							
5	Certificate Holder Letter	CHGLTC-T2-VA	ОТН	Initial		51.200	GLTC19 CH T2-2 Infl Ins ECNF_v1_cln_V A.pdf	07/30/2021
Previous Ve	ersion							
5	Certificate Holder Letter	CHGLTC-T2-VA	ОТН	Initial		51.200	GLTC19 CH T2-2 Infl Ins ECNF_v1_cln_V A.pdf	05/24/2021
Previous Ve	ersion							
5	Certificate Holder Letter	CHGLTC-T2-VA	OTH	Initial		51.200	GLTC ECNF T2-2 - VA.pdf	Date Submitted: 01/29/2021 By:

No Rate/Rule Schedule items changed.

Filing Company:

Unum Life Insurance Company of America

TOI/Sub-TOI: LTC03G Group Long Term Care/LTC03G.001 Qualified

Product Name:2019 GLTC04 RATE INITIATIVE - PHASE IProject Name/Number:2019 GLTC04 RATE INITIATIVE - PHASE I/

Virginia

State:

Attachment(s):

Supporting Document Se	chedule Item Changes
Satisfied - Item:	Premium Increase History
Comments:	
Attachment(s):	GLTC Prem Inc History_v2_VA.pdf
Previous Version	
Satisfied - Item:	Premium Increase History
Comments:	
Attachment(s):	GLTC0419 Prem Inc History_v2_VA.pdf
Previous Version	
Satisfied - Item:	GLTC0419 Prem Inc History_VA
Comments:	

GLTC0419 Prem Inc History_VA.pdf

Supporting Document Schedule	Item Changes
Satisfied - Item:	Premium Increase History
Comments:	
Attachment(s):	GLTC Prem Inc History_v2_VA.pdf
Previous Version	
Satisfied - Item:	Premium Increase History
Comments:	
Attachment(s):	GLTC0419 Prem Inc History_v2_VA.pdf
Previous Version	
Satisfied - Item:	GLTC0419 Prem Inc History_VA
Comments:	
Attachment(s):	GLTC0419 Prem Inc History_VA.pdf

Satisfied - Item:	Administrative Statement
Comments:	
Attachment(s):	GLTC Administrative Statement (1).pdf

State: Virginia Filing Company: Unum Life Insurance Company of America

Virginia Objections_Final Responses 1.20.22.pdf

TOI/Sub-TOI: LTC03G Group Long Term Care/LTC03G.001 Qualified

Product Name:2019 GLTC04 RATE INITIATIVE - PHASE IProject Name/Number:2019 GLTC04 RATE INITIATIVE - PHASE I/

Comments: Attachment(s):

Supporting Document Sch	
Satisfied - Item:	Premium Increase History
Comments:	
Attachment(s):	GLTC Prem Inc History_v2_VA.pdf
Previous Version	
Satisfied - Item:	Premium Increase History
Comments:	
Attachment(s):	GLTC0419 Prem Inc History_v2_VA.pdf
Previous Version	
Satisfied - Item:	GLTC0419 Prem Inc History_VA
Comments:	
Attachment(s):	GLTC0419 Prem Inc History_VA.pdf
0.0.0.1.1	
Satisfied - Item:	Administrative Statement
Comments:	
Attachment(s):	GLTC Administrative Statement (1).pdf
Satisfied - Item:	Virginia Objections_Final Responses 1.20.22

Filing Company:

Unum Life Insurance Company of America

TOI/Sub-TOI: LTC03G Group Long Term Care/LTC03G.001 Qualified

Product Name:2019 GLTC04 RATE INITIATIVE - PHASE IProject Name/Number:2019 GLTC04 RATE INITIATIVE - PHASE I/

Virginia

Satisfied - Item:	Premium Increase History
Comments:	
Attachment(s):	GLTC Prem Inc History_v2_VA.pdf
Previous Version	
Satisfied - Item:	Premium Increase History
Comments:	
Attachment(s):	GLTC0419 Prem Inc History_v2_VA.pdf
Previous Version	
Satisfied - Item:	GLTC0419 Prem Inc History_VA
Comments:	
Attachment(s):	GLTC0419 Prem Inc History_VA.pdf
Satisfied - Item:	Administrative Statement
Satisfied - Item: Comments:	Administrative Statement
Comments:	Administrative Statement GLTC Administrative Statement (1).pdf
Comments:	
Comments: Attachment(s):	GLTC Administrative Statement (1).pdf
Comments: Attachment(s): Satisfied - Item: Comments:	GLTC Administrative Statement (1).pdf
Comments: Attachment(s): Satisfied - Item:	GLTC Administrative Statement (1).pdf Virginia Objections_Final Responses 1.20.22 Virginia Objections_Final Responses 1.20.22.pdf
Comments: Attachment(s): Satisfied - Item: Comments: Attachment(s): Satisfied - Item:	GLTC Administrative Statement (1).pdf Virginia Objections_Final Responses 1.20.22
Comments: Attachment(s): Satisfied - Item: Comments: Attachment(s):	GLTC Administrative Statement (1).pdf Virginia Objections_Final Responses 1.20.22 Virginia Objections_Final Responses 1.20.22.pdf
Comments: Attachment(s): Satisfied - Item: Comments: Attachment(s): Satisfied - Item: Comments: Attachment(s):	GLTC Administrative Statement (1).pdf Virginia Objections_Final Responses 1.20.22 Virginia Objections_Final Responses 1.20.22.pdf Statement of Variability
Comments: Attachment(s): Satisfied - Item: Comments: Attachment(s): Satisfied - Item: Comments:	GLTC Administrative Statement (1).pdf Virginia Objections_Final Responses 1.20.22 Virginia Objections_Final Responses 1.20.22.pdf Statement of Variability

Response 4

Attachment(s):

State:

Comments:

Updated forms, a statement of variability and additional requested documents are attached along with the objection response dated 1-20-22.

Statement of Variability.pdf

Related Objection 4

State: Virginia Filing Company: Unum Life Insurance Company of America

TOI/Sub-TOI: LTC03G Group Long Term Care/LTC03G.001 Qualified

Product Name:2019 GLTC04 RATE INITIATIVE - PHASE IProject Name/Number:2019 GLTC04 RATE INITIATIVE - PHASE I/

Applies To:

- Certificate Holder Letter, CHGLTC-T1-VA (Form)
- Certificate Holder Letter, CHGLTC-T2-VA (Form)

Comments: As mentioned in the section of the letter labeled "Your current coverage" please include a copy of the statement used to show current coverage and cost for this coverage.

Changed Items:

State: Virginia Filing Company: Unum Life Insurance Company of America

TOI/Sub-TOI: LTC03G Group Long Term Care/LTC03G.001 Qualified

Item	Form	Form	Form	Form	Action Specific	Readability		
No.	Name	Number	Туре	Action	Data	Score	Attachments	Submitted
1	Certificate Holder Letter	CHGLTC-T1-VA	OTH	Initial		51.400	GLTC CH ECNF T1-2_cln_v3_VA - (final).pdf	Date Submitted: 02/04/2022 By: Ellen Desrosiers
Previous Ve	ersion							
1	Certificate Holder Letter	CHGLTC-T1-VA	ОТН	Initial		51.400	GLTC19 CH T1-2 Infl Ins ECNF_v1_cln_V A.pdf	07/30/2021
Previous Ve	ersion							
1	Certificate Holder Letter	CHGLTC-T1-VA	ОТН	Initial		51.400	GLTC19 CH T1-2 Infl Ins ECNF_v1_cln_V A.pdf	05/24/2021
Previous Ve	ersion							
1	Certificate Holder Letter	CHGLTC-T1-VA	OTH	Initial		51.400	GLTC ECNF T1- 2- VA.pdf	Date Submitted. 01/29/2021 By:
Previous Ve	ersion							
1	Certificate Holder Letter	CH-GLTC04-VA	OTH	Initial		51.400	GLTC0419 CH ECNF_v7_cln_V A .pdf	
Previous Ve	ersion							
1	Certificate Holder Letter	CH-GLTC04-VA	OTH	Initial		51.400	GLTC0419 CH ECNF_v6_cln_V A.pdf	Date Submitted. 06/16/2020 By:
Previous Ve	ersion							
1	Certificate Holder Letter	CH-GLTC04-VA	ОТН	Initial		51.400	GLTC0419 CH ECNF_v6_cln_V A.pdf	Date Submitted. 05/12/2020 By:
Previous Ve	ersion						· ·	
1	Certificate Holder Letter	CH-GLTC04-VA	ОТН	Initial		51.400	GLTC0419 CH ECNF_v4_cln_V A.pdf	Date Submitted. 03/22/2020 By: Ellen Desrosiers
2	Certificate Holder Letter	CHGLTC-T2-VA	ОТН	Initial		51.200	GLTC CH ECNF T2-2_cln_v3_VA	

State: Virginia Filing Company: Unum Life Insurance Company of America

TOI/Sub-TOI: LTC03G Group Long Term Care/LTC03G.001 Qualified

Product Name:2019 GLTC04 RATE INITIATIVE - PHASE IProject Name/Number:2019 GLTC04 RATE INITIATIVE - PHASE I/

Form Sched	dule Item Changes							
Item	Form	Form	Form	Form	Action Specific	Readability		
No.	Name	Number	Туре	Action	Data	Score	Attachments	Submitted
1	Certificate Holder Letter	CHGLTC-T1-VA	ОТН	Initial		51.400	GLTC CH ECNF T1-2_cln_v3_VA (final).pdf	Date Submitted: -02/04/2022 By: Ellen Desrosiers
							(final).pdf	By: Ellen Desrosiers
Previous Vers	sion							
2	Certificate Holder Letter	CHGLTC-T2-VA	ОТН	Initial		51.200	GLTC19 CH T2-2 Infl Ins ECNF_v1_cln_V A.pdf	07/30/2021
Previous Vers	sion							
2	Certificate Holder Letter	CHGLTC-T2-VA	ОТН	Initial		51.200	GLTC19 CH T2-2 Infl Ins ECNF_v1_cln_V A.pdf	05/24/2021
Previous Vers	sion							
2	Certificate Holder Letter	CHGLTC-T2-VA	ОТН	Initial		51.200	GLTC ECNF T2-2 - VA.pdf	P. Date Submitted: 01/29/2021 By:

No Rate/Rule Schedule items changed.

No Supporting Documents changed.

Response 5

Comments:

Updated forms, a statement of variability and additional requested documents are attached along with the objection response dated 1-20-22.

Related Objection 5

Applies To:

- Certificate Holder Letter, CHGLTC-T1-VA (Form)
- Certificate Holder Letter, CHGLTC-T2-VA (Form)

Comments: Please verify the website, https://longtermcare.acl.gov/costs-how-to-pay/costs-of-care.html, is correct. We attempted to reach the site and were unable to connect.

State: Virginia Filing Company: Unum Life Insurance Company of America

TOI/Sub-TOI: LTC03G Group Long Term Care/LTC03G.001 Qualified

Product Name:2019 GLTC04 RATE INITIATIVE - PHASE IProject Name/Number:2019 GLTC04 RATE INITIATIVE - PHASE I/

Changed Items:

State: Virginia Filing Company: Unum Life Insurance Company of America

TOI/Sub-TOI: LTC03G Group Long Term Care/LTC03G.001 Qualified

ltem	Form	Form	Form	Form	Action Specific	Readability		
No.	Name	Number	Туре	Action	Data	Score	Attachments	Submitted
1	Certificate Amendment - Contingent Non- Forfeiture Benefit	04CBUL22G-VA	CERA	Initial		41.200	GLTC04 CNF Form_v1_cln - 04CBUL22G-VA (final).pdf	Date Submitted: 02/04/2022 By: Ellen Desrosiers
Previous Ve	ersion							
1	Certificate Amendment - Contingent Non- Forfeiture Benefit	04CNF19G-VA	CERA	Initial		41.200	GLTC04 CNF Form_v2_cln - 04CNF19G- VA.pdf	Date Submitted 03/22/2020 By: Ellen Desrosiers
Previous Ve	ersion							
1	Certificate Amendment - Contingent Non- Forfeiture Benefit	04CNF19G-VA	CERA	Initial			GLTC04 CNF Form - 04CNF19G- VA.pdf	Date Submitted 03/28/2019 By: Ellen Desrosiers
2		04CBUL22G- APO-VA	CERA	Initial		41.100	GLTC04 ECNF Form_v1_cln- 04ECBUL22G- APO-VA.pdf	Date Submitted: 02/04/2022 By: Ellen Desrosiers
Previous Ve	ersion							
2	Certificate Amendment - Enhanced Contingent Non- Forfeiture Benefit	04ECNF19G- APO-VA	CERA	Initial		41.100	GLTC04 ECNF Form_v2_cln- 04ECNF19G- APO-VA.pdf	Date Submitted 03/22/2020 By: Ellen Desrosiers
Previous Ve	ersion							
2	Certificate Amendment - Enhanced Contingent Non- Forfeiture Benefit	04ECNF19G- APO-VA	CERA	Initial			GLTC04 ECNF Form- 04ECNF19G- APO-VA.pdf	Date Submitted: 03/28/2019 By: Ellen Desrosiers
3	Frequently Asked Questions	GLTC-FAQ-VA	ОТН	Initial		47.600	GLTC CH FAQ ECNF_v2_cln_V A (final).pdf	Date Submitted: 02/04/2022 By: Ellen Desrosiers
Previous Ve	ersion							
3	Frequently Asked Questions	VA-GLTC04-FAQ	OTH	Initial		47.600	GLTC0419 CH FAQ	Date Submitted 06/16/2020

State: Virginia Filing Company: Unum Life Insurance Company of America

TOI/Sub-TOI: LTC03G Group Long Term Care/LTC03G.001 Qualified

ltem	Form	Form	Form	Form	Action Specific	Readability		
No.	Name	Number	Туре	Action	Data	Score	Attachments	Submitted
1	Certificate Amendment - Contingent Non- Forfeiture Benefit	04CBUL22G-VA	CERA	Initial		41.200	GLTC04 CNF Form_v1_cln - 04CBUL22G-VA (final).pdf	Date Submitted: 02/04/2022 By: Ellen Desrosiers
							ECNF_v2_cln_G en.pdf	Ву:
Previous Ve	ersion							
3	Frequently Asked Questions	VA-GLTC04-FAQ	ОТН	Initial		47.600	GLTC0419 CH FAQ ECNF- VA.pdf	Date Submitted 03/22/2020 By: Ellen Desrosiers
4	Certificate Holder Letter	CHGLTC-T1-VA	ОТН	Initial		51.400	GLTC CH ECNF T1-2_cln_v3_VA (final).pdf	Date Submitted: -02/04/2022 By: Ellen Desrosiers
Previous Ve	ersion							
4	Certificate Holder Letter	CHGLTC-T1-VA	ОТН	Initial		51.400	GLTC19 CH T1-2 Infl Ins ECNF_v1_cln_V A.pdf	07/30/2021
Previous Ve	ersion							
4	Certificate Holder Letter	CHGLTC-T1-VA	ОТН	Initial		51.400	GLTC19 CH T1-2 Infl Ins ECNF_v1_cln_V A.pdf	05/24/2021
Previous Ve	ersion							
4	Certificate Holder Letter	CHGLTC-T1-VA	OTH	Initial		51.400	GLTC ECNF T1- 2- VA.pdf	Date Submitted 01/29/2021 By:
Previous Ve	ersion							
4	Certificate Holder Letter	CH-GLTC04-VA	ОТН	Initial		51.400	GLTC0419 CH ECNF_v7_cln_V A .pdf	Date Submitted 06/30/2020 By:
Previous Ve	ersion			· ·				-
4	Certificate Holder Letter	CH-GLTC04-VA	OTH	Initial		51.400	GLTC0419 CH ECNF_v6_cln_V A.pdf	Date Submitted 06/16/2020 By:

State: Virginia Filing Company: Unum Life Insurance Company of America

TOI/Sub-TOI: LTC03G Group Long Term Care/LTC03G.001 Qualified

Product Name:2019 GLTC04 RATE INITIATIVE - PHASE IProject Name/Number:2019 GLTC04 RATE INITIATIVE - PHASE I/

	edule Item Changes	Form	Form	Form	Action Chastin	Doodobility:		
Item	Form	Form	Form -		Action Specific			
No.	Name	Number	Type	Action	Data	Score	Attachments	Submitted
1	Certificate Amendment - Contingent Non- Forfeiture Benefit	04CBUL22G-VA	CERA	Initial		41.200	GLTC04 CNF Form_v1_cln - 04CBUL22G-VA (final).pdf	Date Submitted: 02/04/2022 By: Ellen Desrosiers
Previous Ve	ersion							
4	Certificate Holder Letter	CH-GLTC04-VA	OTH	Initial		51.400	GLTC0419 CH ECNF_v6_cln_V A.pdf	Date Submitted: 05/12/2020 By:
Previous Ve	ersion							
4	Certificate Holder Letter	CH-GLTC04-VA	ОТН	Initial		51.400	GLTC0419 CH ECNF_v4_cln_V A.pdf	Date Submitted: 03/22/2020 By: Ellen Desrosiers
5	Certificate Holder Letter	CHGLTC-T2-VA	OTH	Initial		51.200	GLTC CH ECNF T2-2_cln_v3_VA (final).pdf	Date Submitted: 02/04/2022 By: Ellen Desrosiers
Previous Ve	ersion							
5	Certificate Holder Letter	CHGLTC-T2-VA	ОТН	Initial		51.200	GLTC19 CH T2-2 Infl Ins ECNF_v1_cln_V A.pdf	07/30/2021
Previous Ve	ersion							
5	Certificate Holder Letter	CHGLTC-T2-VA	ОТН	Initial		51.200	GLTC19 CH T2-2 Infl Ins ECNF_v1_cln_V A.pdf	05/24/2021
Previous Ve	ersion							
5	Certificate Holder Letter	CHGLTC-T2-VA	OTH	Initial		51.200	GLTC ECNF T2-2 - VA.pdf	Date Submitted: 01/29/2021 By:

No Rate/Rule Schedule items changed.

Filing Company:

Unum Life Insurance Company of America

TOI/Sub-TOI: LTC03G Group Long Term Care/LTC03G.001 Qualified

Product Name:2019 GLTC04 RATE INITIATIVE - PHASE IProject Name/Number:2019 GLTC04 RATE INITIATIVE - PHASE I/

Virginia

State:

Attachment(s):

Supporting Document Se	chedule Item Changes
Satisfied - Item:	Premium Increase History
Comments:	
Attachment(s):	GLTC Prem Inc History_v2_VA.pdf
Previous Version	
Satisfied - Item:	Premium Increase History
Comments:	
Attachment(s):	GLTC0419 Prem Inc History_v2_VA.pdf
Previous Version	
Satisfied - Item:	GLTC0419 Prem Inc History_VA
Comments:	

GLTC0419 Prem Inc History_VA.pdf

Supporting Document Schedule	Item Changes
Satisfied - Item:	Premium Increase History
Comments:	
Attachment(s):	GLTC Prem Inc History_v2_VA.pdf
Previous Version	
Satisfied - Item:	Premium Increase History
Comments:	
Attachment(s):	GLTC0419 Prem Inc History_v2_VA.pdf
Previous Version	
Satisfied - Item:	GLTC0419 Prem Inc History_VA
Comments:	
Attachment(s):	GLTC0419 Prem Inc History_VA.pdf

Satisfied - Item:	Administrative Statement
Comments:	
Attachment(s):	GLTC Administrative Statement (1).pdf

State: Virginia Filing Company: Unum Life Insurance Company of America

Virginia Objections_Final Responses 1.20.22.pdf

TOI/Sub-TOI: LTC03G Group Long Term Care/LTC03G.001 Qualified

Product Name:2019 GLTC04 RATE INITIATIVE - PHASE IProject Name/Number:2019 GLTC04 RATE INITIATIVE - PHASE I/

Comments: Attachment(s):

Supporting Document Sch	
Satisfied - Item:	Premium Increase History
Comments:	
Attachment(s):	GLTC Prem Inc History_v2_VA.pdf
Previous Version	
Satisfied - Item:	Premium Increase History
Comments:	
Attachment(s):	GLTC0419 Prem Inc History_v2_VA.pdf
Previous Version	
Satisfied - Item:	GLTC0419 Prem Inc History_VA
Comments:	
Attachment(s):	GLTC0419 Prem Inc History_VA.pdf
0.0.0.1.1	
Satisfied - Item:	Administrative Statement
Comments:	
Attachment(s):	GLTC Administrative Statement (1).pdf
Satisfied - Item:	Virginia Objections_Final Responses 1.20.22

State: Virginia Filing Company: Unum Life Insurance Company of America

TOI/Sub-TOI: LTC03G Group Long Term Care/LTC03G.001 Qualified

Product Name:2019 GLTC04 RATE INITIATIVE - PHASE IProject Name/Number:2019 GLTC04 RATE INITIATIVE - PHASE I/

chedule Item Changes
Premium Increase History
GLTC Prem Inc History_v2_VA.pdf
Premium Increase History
GLTC0419 Prem Inc History_v2_VA.pdf
GLTC0419 Prem Inc History_VA
GLTC0419 Prem Inc History_VA.pdf
Administrative Statement
GLTC Administrative Statement (1).pdf
Virginia Objections_Final Responses 1.20.22
Virginia Objections_Final Responses 1.20.22.pdf
Statement of Variability
Statement of Variability
Statement of Variability Statement of Variability.pdf

Response 6

Satisfied - Item:

Comments:
Attachment(s):

Comments:

Updated forms, a statement of variability and additional requested documents are attached along with the objection response dated 1-20-22.

Statement of Variability

Statement of Variability.pdf

Related Objection 6

State: Virginia Filing Company: Unum Life Insurance Company of America

TOI/Sub-TOI: LTC03G Group Long Term Care/LTC03G.001 Qualified

Product Name:2019 GLTC04 RATE INITIATIVE - PHASE IProject Name/Number:2019 GLTC04 RATE INITIATIVE - PHASE I/

Applies To:

- Certificate Holder Letter, CHGLTC-T1-VA (Form)
- Certificate Holder Letter, CHGLTC-T2-VA (Form)

Comments: In the section of the letter titled "Why the increase in premium", please include a statement in compliance with Virginia Regulation 14VAC5-200-75 A4(b), which gives the policyholder(certificate holder) the right to a revised rate or rate schedule in the event of a premium rate increase.

Changed Items:

State: Virginia Filing Company: Unum Life Insurance Company of America

TOI/Sub-TOI: LTC03G Group Long Term Care/LTC03G.001 Qualified

ltem	Form	Form	Form	Form	Action Specific	Readability		
No.	Name	Number	Туре	Action	Data	Score	Attachments	Submitted
1	Certificate Amendment - Contingent Non- Forfeiture Benefit	04CBUL22G-VA	CERA	Initial		41.200	GLTC04 CNF Form_v1_cln - 04CBUL22G-VA (final).pdf	Date Submitted: 02/04/2022 By: Ellen Desrosiers
Previous Ve	ersion							
1	Certificate Amendment - Contingent Non- Forfeiture Benefit	04CNF19G-VA	CERA	Initial		41.200	GLTC04 CNF Form_v2_cln - 04CNF19G- VA.pdf	Date Submitted 03/22/2020 By: Ellen Desrosiers
Previous Ve	ersion							
1	Certificate Amendment - Contingent Non- Forfeiture Benefit	04CNF19G-VA	CERA	Initial			GLTC04 CNF Form - 04CNF19G- VA.pdf	Date Submitted 03/28/2019 By: Ellen Desrosiers
2		04CBUL22G- APO-VA	CERA	Initial		41.100	GLTC04 ECNF Form_v1_cln- 04ECBUL22G- APO-VA.pdf	Date Submitted: 02/04/2022 By: Ellen Desrosiers
Previous Ve	ersion							
2	Certificate Amendment - Enhanced Contingent Non- Forfeiture Benefit	04ECNF19G- APO-VA	CERA	Initial		41.100	GLTC04 ECNF Form_v2_cln- 04ECNF19G- APO-VA.pdf	Date Submitted 03/22/2020 By: Ellen Desrosiers
Previous Ve	ersion							
2	Certificate Amendment - Enhanced Contingent Non- Forfeiture Benefit	04ECNF19G- APO-VA	CERA	Initial			GLTC04 ECNF Form- 04ECNF19G- APO-VA.pdf	Date Submitted: 03/28/2019 By: Ellen Desrosiers
3	Frequently Asked Questions	GLTC-FAQ-VA	ОТН	Initial		47.600	GLTC CH FAQ ECNF_v2_cln_V A (final).pdf	Date Submitted: 02/04/2022 By: Ellen Desrosiers
Previous Ve	ersion							
3	Frequently Asked Questions	VA-GLTC04-FAQ	OTH	Initial		47.600	GLTC0419 CH FAQ	Date Submitted 06/16/2020

State: Virginia Filing Company: Unum Life Insurance Company of America

TOI/Sub-TOI: LTC03G Group Long Term Care/LTC03G.001 Qualified

ltem	Form	Form	Form	Form	Action Specific	Readability		
No.	Name	Number	Туре	Action	Data	Score	Attachments	Submitted
1	Certificate Amendment - Contingent Non- Forfeiture Benefit	04CBUL22G-VA	CERA	Initial		41.200	GLTC04 CNF Form_v1_cln - 04CBUL22G-VA (final).pdf	Date Submitted: 02/04/2022 By: Ellen Desrosiers
							ECNF_v2_cln_G en.pdf	Ву:
Previous Ve	ersion							
3	Frequently Asked Questions	VA-GLTC04-FAQ	ОТН	Initial		47.600	GLTC0419 CH FAQ ECNF- VA.pdf	Date Submitted 03/22/2020 By: Ellen Desrosiers
4	Certificate Holder Letter	CHGLTC-T1-VA	ОТН	Initial		51.400	GLTC CH ECNF T1-2_cln_v3_VA (final).pdf	Date Submitted: -02/04/2022 By: Ellen Desrosiers
Previous Ve	ersion							
4	Certificate Holder Letter	CHGLTC-T1-VA	ОТН	Initial		51.400	GLTC19 CH T1-2 Infl Ins ECNF_v1_cln_V A.pdf	07/30/2021
Previous Ve	ersion							
4	Certificate Holder Letter	CHGLTC-T1-VA	ОТН	Initial		51.400	GLTC19 CH T1-2 Infl Ins ECNF_v1_cln_V A.pdf	05/24/2021
Previous Ve	ersion							
4	Certificate Holder Letter	CHGLTC-T1-VA	OTH	Initial		51.400	GLTC ECNF T1- 2- VA.pdf	Date Submitted 01/29/2021 By:
Previous Ve	ersion							
4	Certificate Holder Letter	CH-GLTC04-VA	ОТН	Initial		51.400	GLTC0419 CH ECNF_v7_cln_V A .pdf	Date Submitted 06/30/2020 By:
Previous Ve	ersion			· ·				-
4	Certificate Holder Letter	CH-GLTC04-VA	OTH	Initial		51.400	GLTC0419 CH ECNF_v6_cln_V A.pdf	Date Submitted 06/16/2020 By:

State: Virginia Filing Company: Unum Life Insurance Company of America

TOI/Sub-TOI: LTC03G Group Long Term Care/LTC03G.001 Qualified

Product Name:2019 GLTC04 RATE INITIATIVE - PHASE IProject Name/Number:2019 GLTC04 RATE INITIATIVE - PHASE I/

	edule Item Changes	Form	Form	Form	Action Chastin	Doodobility:		
Item	Form	Form	Form -		Action Specific			
No.	Name	Number	Type	Action	Data	Score	Attachments	Submitted
1	Certificate Amendment - Contingent Non- Forfeiture Benefit	04CBUL22G-VA	CERA	Initial		41.200	GLTC04 CNF Form_v1_cln - 04CBUL22G-VA (final).pdf	Date Submitted: 02/04/2022 By: Ellen Desrosiers
Previous Ve	ersion							
4	Certificate Holder Letter	CH-GLTC04-VA	OTH	Initial		51.400	GLTC0419 CH ECNF_v6_cln_V A.pdf	Date Submitted: 05/12/2020 By:
Previous Ve	ersion							
4	Certificate Holder Letter	CH-GLTC04-VA	ОТН	Initial		51.400	GLTC0419 CH ECNF_v4_cln_V A.pdf	Date Submitted: 03/22/2020 By: Ellen Desrosiers
5	Certificate Holder Letter	CHGLTC-T2-VA	OTH	Initial		51.200	GLTC CH ECNF T2-2_cln_v3_VA (final).pdf	Date Submitted: 02/04/2022 By: Ellen Desrosiers
Previous Ve	ersion							
5	Certificate Holder Letter	CHGLTC-T2-VA	ОТН	Initial		51.200	GLTC19 CH T2-2 Infl Ins ECNF_v1_cln_V A.pdf	07/30/2021
Previous Ve	ersion							
5	Certificate Holder Letter	CHGLTC-T2-VA	ОТН	Initial		51.200	GLTC19 CH T2-2 Infl Ins ECNF_v1_cln_V A.pdf	05/24/2021
Previous Ve	ersion							
5	Certificate Holder Letter	CHGLTC-T2-VA	OTH	Initial		51.200	GLTC ECNF T2-2 - VA.pdf	Date Submitted: 01/29/2021 By:

No Rate/Rule Schedule items changed.

Filing Company:

Unum Life Insurance Company of America

TOI/Sub-TOI: LTC03G Group Long Term Care/LTC03G.001 Qualified

Product Name:2019 GLTC04 RATE INITIATIVE - PHASE IProject Name/Number:2019 GLTC04 RATE INITIATIVE - PHASE I/

Virginia

State:

Attachment(s):

Supporting Document Se	chedule Item Changes
Satisfied - Item:	Premium Increase History
Comments:	
Attachment(s):	GLTC Prem Inc History_v2_VA.pdf
Previous Version	
Satisfied - Item:	Premium Increase History
Comments:	
Attachment(s):	GLTC0419 Prem Inc History_v2_VA.pdf
Previous Version	
Satisfied - Item:	GLTC0419 Prem Inc History_VA
Comments:	

GLTC0419 Prem Inc History_VA.pdf

Supporting Document Schedule	Item Changes
Satisfied - Item:	Premium Increase History
Comments:	
Attachment(s):	GLTC Prem Inc History_v2_VA.pdf
Previous Version	
Satisfied - Item:	Premium Increase History
Comments:	
Attachment(s):	GLTC0419 Prem Inc History_v2_VA.pdf
Previous Version	
Satisfied - Item:	GLTC0419 Prem Inc History_VA
Comments:	
Attachment(s):	GLTC0419 Prem Inc History_VA.pdf

Satisfied - Item:	Administrative Statement
Comments:	
Attachment(s):	GLTC Administrative Statement (1).pdf

State: Virginia Filing Company: Unum Life Insurance Company of America

Virginia Objections_Final Responses 1.20.22.pdf

TOI/Sub-TOI: LTC03G Group Long Term Care/LTC03G.001 Qualified

Product Name:2019 GLTC04 RATE INITIATIVE - PHASE IProject Name/Number:2019 GLTC04 RATE INITIATIVE - PHASE I/

Comments: Attachment(s):

Supporting Document Sch	
Satisfied - Item:	Premium Increase History
Comments:	
Attachment(s):	GLTC Prem Inc History_v2_VA.pdf
Previous Version	
Satisfied - Item:	Premium Increase History
Comments:	
Attachment(s):	GLTC0419 Prem Inc History_v2_VA.pdf
Previous Version	
Satisfied - Item:	GLTC0419 Prem Inc History_VA
Comments:	
Attachment(s):	GLTC0419 Prem Inc History_VA.pdf
0.0.0.1.1	
Satisfied - Item:	Administrative Statement
Comments:	
Attachment(s):	GLTC Administrative Statement (1).pdf
Satisfied - Item:	Virginia Objections_Final Responses 1.20.22

Filing Company:

Unum Life Insurance Company of America

TOI/Sub-TOI: LTC03G Group Long Term Care/LTC03G.001 Qualified

Product Name:2019 GLTC04 RATE INITIATIVE - PHASE IProject Name/Number:2019 GLTC04 RATE INITIATIVE - PHASE I/

Virginia

Supporting Document So	chedule Item Changes
Satisfied - Item:	Premium Increase History
Comments:	
Attachment(s):	GLTC Prem Inc History_v2_VA.pdf
Previous Version	
Satisfied - Item:	Premium Increase History
Comments:	
Attachment(s):	GLTC0419 Prem Inc History_v2_VA.pdf
Previous Version	
Satisfied - Item:	GLTC0419 Prem Inc History_VA
Comments:	
Attachment(s):	GLTC0419 Prem Inc History_VA.pdf
Satisfied - Item:	Administrative Statement
Comments:	
Attachment(s):	GLTC Administrative Statement (1).pdf
Satisfied - Item:	Virginia Objections_Final Responses 1.20.22
Comments:	Virginia Objectione_1 intal 1/00poness 1.20.22
Attachment(s):	Virginia Objections_Final Responses 1.20.22.pdf
Satisfied - Item:	Statement of Variability
Comments:	·
Attachment(s):	Statement of Variability.pdf
Previous Version	
Satisfied - Item:	Statement of Variability

Response 7

Comments:
Attachment(s):

State:

Comments:

Updated forms, a statement of variability and additional requested documents are attached along with the objection response dated 1-20-22.

Statement of Variability.pdf

Related Objection 7

State: Virginia Filing Company: Unum Life Insurance Company of America

TOI/Sub-TOI: LTC03G Group Long Term Care/LTC03G.001 Qualified

Product Name:2019 GLTC04 RATE INITIATIVE - PHASE IProject Name/Number:2019 GLTC04 RATE INITIATIVE - PHASE I/

Applies To:

- Certificate Holder Letter, CHGLTC-T1-VA (Form)
- Certificate Holder Letter, CHGLTC-T2-VA (Form)

Comments: Virginia Regulation 14VAC5-100-50 2 requires that the full and proper name of the company appear prominently on the form. Please include the full name of the company above the address.

Changed Items:

State: Virginia Filing Company: Unum Life Insurance Company of America

TOI/Sub-TOI: LTC03G Group Long Term Care/LTC03G.001 Qualified

ltem	Form	Form	Form	Form	Action Specific	Readability		
No.	Name	Number	Туре	Action	Data	Score	Attachments	Submitted
1	Certificate Amendment - Contingent Non- Forfeiture Benefit	04CBUL22G-VA	CERA	Initial		41.200	GLTC04 CNF Form_v1_cln - 04CBUL22G-VA (final).pdf	Date Submitted: 02/04/2022 By: Ellen Desrosiers
Previous Ve	ersion							
1	Certificate Amendment - Contingent Non- Forfeiture Benefit	04CNF19G-VA	CERA	Initial		41.200	GLTC04 CNF Form_v2_cln - 04CNF19G- VA.pdf	Date Submitted 03/22/2020 By: Ellen Desrosiers
Previous Ve	ersion							
1	Certificate Amendment - Contingent Non- Forfeiture Benefit	04CNF19G-VA	CERA	Initial			GLTC04 CNF Form - 04CNF19G- VA.pdf	Date Submitted 03/28/2019 By: Ellen Desrosiers
2		04CBUL22G- APO-VA	CERA	Initial		41.100	GLTC04 ECNF Form_v1_cln- 04ECBUL22G- APO-VA.pdf	Date Submitted: 02/04/2022 By: Ellen Desrosiers
Previous Ve	ersion							
2	Certificate Amendment - Enhanced Contingent Non- Forfeiture Benefit	04ECNF19G- APO-VA	CERA	Initial		41.100	GLTC04 ECNF Form_v2_cln- 04ECNF19G- APO-VA.pdf	Date Submitted 03/22/2020 By: Ellen Desrosiers
Previous Ve	ersion							
2	Certificate Amendment - Enhanced Contingent Non- Forfeiture Benefit	04ECNF19G- APO-VA	CERA	Initial			GLTC04 ECNF Form- 04ECNF19G- APO-VA.pdf	Date Submitted: 03/28/2019 By: Ellen Desrosiers
3	Frequently Asked Questions	GLTC-FAQ-VA	ОТН	Initial		47.600	GLTC CH FAQ ECNF_v2_cln_V A (final).pdf	Date Submitted: 02/04/2022 By: Ellen Desrosiers
Previous Ve	ersion							
3	Frequently Asked Questions	VA-GLTC04-FAQ	OTH	Initial		47.600	GLTC0419 CH FAQ	Date Submitted 06/16/2020

State: Virginia Filing Company: Unum Life Insurance Company of America

TOI/Sub-TOI: LTC03G Group Long Term Care/LTC03G.001 Qualified

ltem	Form	Form	Form	Form	Action Specific	Readability		
No.	Name	Number	Type	Action	Data	Score	Attachments	Submitted
1	Certificate Amendment - Contingent Non- Forfeiture Benefit	04CBUL22G-VA	CERA	Initial		41.200	GLTC04 CNF Form_v1_cln - 04CBUL22G-VA (final).pdf	Date Submitted: 02/04/2022 By: Ellen Desrosiers
							ECNF_v2_cln_G en.pdf	Ву:
Previous Ve	ersion							
3	Frequently Asked Questions	VA-GLTC04-FAQ	ОТН	Initial		47.600	GLTC0419 CH FAQ ECNF- VA.pdf	Date Submitted 03/22/2020 By: Ellen Desrosiers
4	Certificate Holder Letter	CHGLTC-T1-VA	ОТН	Initial		51.400	GLTC CH ECNF T1-2_cln_v3_VA (final).pdf	Date Submitted: -02/04/2022 By: Ellen Desrosiers
Previous Ve	ersion							
4	Certificate Holder Letter	CHGLTC-T1-VA	ОТН	Initial		51.400	GLTC19 CH T1-2 Infl Ins ECNF_v1_cln_V A.pdf	07/30/2021
Previous Ve	ersion							
4	Certificate Holder Letter	CHGLTC-T1-VA	ОТН	Initial		51.400	GLTC19 CH T1-2 Infl Ins ECNF_v1_cln_V A.pdf	05/24/2021
Previous Ve	ersion							
4	Certificate Holder Letter	CHGLTC-T1-VA	OTH	Initial		51.400	GLTC ECNF T1- 2- VA.pdf	Date Submitted 01/29/2021 By:
Previous Ve	ersion							
4	Certificate Holder Letter	CH-GLTC04-VA	ОТН	Initial		51.400	GLTC0419 CH ECNF_v7_cln_V A .pdf	Date Submitted 06/30/2020 By:
Previous Ve	ersion			· ·				-
4	Certificate Holder Letter	CH-GLTC04-VA	OTH	Initial		51.400	GLTC0419 CH ECNF_v6_cln_V A.pdf	Date Submitted 06/16/2020 By:

State: Virginia Filing Company: Unum Life Insurance Company of America

TOI/Sub-TOI: LTC03G Group Long Term Care/LTC03G.001 Qualified

Product Name:2019 GLTC04 RATE INITIATIVE - PHASE IProject Name/Number:2019 GLTC04 RATE INITIATIVE - PHASE I/

	edule Item Changes	Form	Form	Form	Action Chastin	Doodobility:		
Item	Form	Form	Form -		Action Specific			
No.	Name	Number	Type	Action	Data	Score	Attachments	Submitted
1	Certificate Amendment - Contingent Non- Forfeiture Benefit	04CBUL22G-VA	CERA	Initial		41.200	GLTC04 CNF Form_v1_cln - 04CBUL22G-VA (final).pdf	Date Submitted: 02/04/2022 By: Ellen Desrosiers
Previous Ve	ersion							
4	Certificate Holder Letter	CH-GLTC04-VA	OTH	Initial		51.400	GLTC0419 CH ECNF_v6_cln_V A.pdf	Date Submitted: 05/12/2020 By:
Previous Ve	ersion							
4	Certificate Holder Letter	CH-GLTC04-VA	ОТН	Initial		51.400	GLTC0419 CH ECNF_v4_cln_V A.pdf	Date Submitted: 03/22/2020 By: Ellen Desrosiers
5	Certificate Holder Letter	CHGLTC-T2-VA	OTH	Initial		51.200	GLTC CH ECNF T2-2_cln_v3_VA (final).pdf	Date Submitted: 02/04/2022 By: Ellen Desrosiers
Previous Ve	ersion							
5	Certificate Holder Letter	CHGLTC-T2-VA	ОТН	Initial		51.200	GLTC19 CH T2-2 Infl Ins ECNF_v1_cln_V A.pdf	07/30/2021
Previous Ve	ersion							
5	Certificate Holder Letter	CHGLTC-T2-VA	ОТН	Initial		51.200	GLTC19 CH T2-2 Infl Ins ECNF_v1_cln_V A.pdf	05/24/2021
Previous Ve	ersion							
5	Certificate Holder Letter	CHGLTC-T2-VA	OTH	Initial		51.200	GLTC ECNF T2-2 - VA.pdf	Date Submitted: 01/29/2021 By:

No Rate/Rule Schedule items changed.

Filing Company:

Unum Life Insurance Company of America

TOI/Sub-TOI: LTC03G Group Long Term Care/LTC03G.001 Qualified

Product Name:2019 GLTC04 RATE INITIATIVE - PHASE IProject Name/Number:2019 GLTC04 RATE INITIATIVE - PHASE I/

Virginia

State:

Attachment(s):

Supporting Document Se	chedule Item Changes
Satisfied - Item:	Premium Increase History
Comments:	
Attachment(s):	GLTC Prem Inc History_v2_VA.pdf
Previous Version	
Satisfied - Item:	Premium Increase History
Comments:	
Attachment(s):	GLTC0419 Prem Inc History_v2_VA.pdf
Previous Version	
Satisfied - Item:	GLTC0419 Prem Inc History_VA
Comments:	

GLTC0419 Prem Inc History_VA.pdf

Supporting Document Schedule	Supporting Document Schedule Item Changes					
Satisfied - Item:	Premium Increase History					
Comments:						
Attachment(s):	GLTC Prem Inc History_v2_VA.pdf					
Previous Version						
Satisfied - Item:	Premium Increase History					
Comments:						
Attachment(s):	GLTC0419 Prem Inc History_v2_VA.pdf					
Previous Version						
Satisfied - Item:	GLTC0419 Prem Inc History_VA					
Comments:						
Attachment(s):	GLTC0419 Prem Inc History_VA.pdf					

Satisfied - Item:	Administrative Statement
Comments:	
Attachment(s):	GLTC Administrative Statement (1).pdf

State: Virginia Filing Company: Unum Life Insurance Company of America

Virginia Objections_Final Responses 1.20.22.pdf

TOI/Sub-TOI: LTC03G Group Long Term Care/LTC03G.001 Qualified

Product Name:2019 GLTC04 RATE INITIATIVE - PHASE IProject Name/Number:2019 GLTC04 RATE INITIATIVE - PHASE I/

Comments: Attachment(s):

Supporting Document Sch	
Satisfied - Item:	Premium Increase History
Comments:	
Attachment(s):	GLTC Prem Inc History_v2_VA.pdf
Previous Version	
Satisfied - Item:	Premium Increase History
Comments:	
Attachment(s):	GLTC0419 Prem Inc History_v2_VA.pdf
Previous Version	
Satisfied - Item:	GLTC0419 Prem Inc History_VA
Comments:	
Attachment(s):	GLTC0419 Prem Inc History_VA.pdf
0.0.0.1.1	
Satisfied - Item:	Administrative Statement
Comments:	
Attachment(s):	GLTC Administrative Statement (1).pdf
Satisfied - Item:	Virginia Objections_Final Responses 1.20.22

State: Virginia Filing Company: Unum Life Insurance Company of America

TOI/Sub-TOI: LTC03G Group Long Term Care/LTC03G.001 Qualified

Product Name:2019 GLTC04 RATE INITIATIVE - PHASE IProject Name/Number:2019 GLTC04 RATE INITIATIVE - PHASE I/

Supporting Document Se	chedule Item Changes
Satisfied - Item:	Premium Increase History
Comments:	
Attachment(s):	GLTC Prem Inc History_v2_VA.pdf
Previous Version	
Satisfied - Item:	Premium Increase History
Comments:	
Attachment(s):	GLTC0419 Prem Inc History_v2_VA.pdf
Previous Version	
Satisfied - Item:	GLTC0419 Prem Inc History_VA
Comments:	
Attachment(s):	GLTC0419 Prem Inc History_VA.pdf
Satisfied - Item:	Administrative Statement
Comments:	
Attachment(s):	GLTC Administrative Statement (1).pdf
Satisfied - Item:	Virginia Objections_Final Responses 1.20.22
Comments:	
Attachment(s):	Virginia Objections_Final Responses 1.20.22.pdf
Satisfied - Item:	Statement of Variability
Comments:	
Attachment(s):	Statement of Variability.pdf
Previous Version	
Satisfied - Item:	Statement of Variability

Response 8

Comments:
Attachment(s):

Comments:

Updated forms, a statement of variability and additional requested documents are attached along with the objection response dated 1-20-22.

Statement of Variability.pdf

Related Objection 8

State: Virginia Filing Company: Unum Life Insurance Company of America

TOI/Sub-TOI: LTC03G Group Long Term Care/LTC03G.001 Qualified

Product Name:2019 GLTC04 RATE INITIATIVE - PHASE IProject Name/Number:2019 GLTC04 RATE INITIATIVE - PHASE I/

Applies To:

- Certificate Holder Letter, CHGLTC-T1-VA (Form)
- Certificate Holder Letter, CHGLTC-T2-VA (Form)

Comments: Please specify whether there are any partnership policies in this block of business. If there are such policies, please include a disclosure that some benefit reduction options may result in a loss of partnership status that may reduce policyholder protections.

A disclosure such as this should be emphasized, such as bold, highlight, larger print, etc.

Changed Items:

State: Virginia Filing Company: Unum Life Insurance Company of America

TOI/Sub-TOI: LTC03G Group Long Term Care/LTC03G.001 Qualified

Item	Form	Form	Form	Form	Action Specific	Readability		
No.	Name	Number	Туре	Action	Data	Score	Attachments	Submitted
1	Certificate Holder Letter	CHGLTC-T1-VA	OTH	Initial		51.400	GLTC CH ECNF T1-2_cln_v3_VA - (final).pdf	Date Submitted: 02/04/2022 By: Ellen Desrosiers
Previous Ve	ersion							
1	Certificate Holder Letter	CHGLTC-T1-VA	ОТН	Initial		51.400	GLTC19 CH T1-2 Infl Ins ECNF_v1_cln_V A.pdf	07/30/2021
Previous Ve	ersion							
1	Certificate Holder Letter	CHGLTC-T1-VA	ОТН	Initial		51.400	GLTC19 CH T1-2 Infl Ins ECNF_v1_cln_V A.pdf	05/24/2021
Previous Ve	ersion							
1	Certificate Holder Letter	CHGLTC-T1-VA	OTH	Initial		51.400	GLTC ECNF T1- 2- VA.pdf	Date Submitted. 01/29/2021 By:
Previous Ve	ersion							
1	Certificate Holder Letter	CH-GLTC04-VA	OTH	Initial		51.400	GLTC0419 CH ECNF_v7_cln_V A .pdf	
Previous Ve	ersion							
1	Certificate Holder Letter	CH-GLTC04-VA	OTH	Initial		51.400	GLTC0419 CH ECNF_v6_cln_V A.pdf	Date Submitted. 06/16/2020 By:
Previous Ve	ersion							
1	Certificate Holder Letter	CH-GLTC04-VA	ОТН	Initial		51.400	GLTC0419 CH ECNF_v6_cln_V A.pdf	Date Submitted. 05/12/2020 By:
Previous Ve	ersion						· ·	
1	Certificate Holder Letter	CH-GLTC04-VA	ОТН	Initial		51.400	GLTC0419 CH ECNF_v4_cln_V A.pdf	Date Submitted. 03/22/2020 By: Ellen Desrosiers
2	Certificate Holder Letter	CHGLTC-T2-VA	ОТН	Initial		51.200	GLTC CH ECNF T2-2_cln_v3_VA	

State: Virginia Filing Company: Unum Life Insurance Company of America

TOI/Sub-TOI: LTC03G Group Long Term Care/LTC03G.001 Qualified

Product Name:2019 GLTC04 RATE INITIATIVE - PHASE IProject Name/Number:2019 GLTC04 RATE INITIATIVE - PHASE I/

Form Sche	edule Item Changes							
Item	Form	Form	Form	Form	Action Specific	Readability		
No.	Name	Number	Туре	Action	Data	Score	Attachments	Submitted
1	Certificate Holder Letter	CHGLTC-T1-VA	OTH	Initial		51.400	GLTC CH ECNF T1-2_cln_v3_VA - (final).pdf	Date Submitted: -02/04/2022 By: Ellen Desrosiers
							(final).pdf	By: Ellen Desrosiers
Previous Ve	ersion							
2	Certificate Holder Letter	CHGLTC-T2-VA	ОТН	Initial		51.200	GLTC19 CH T2-2 Infl Ins ECNF_v1_cln_V A.pdf	07/30/2021
Previous Ve	ersion							
2	Certificate Holder Letter	CHGLTC-T2-VA	ОТН	Initial		51.200	GLTC19 CH T2-2 Infl Ins ECNF_v1_cln_V A.pdf	05/24/2021
Previous Ve	ersion							
2	Certificate Holder Letter	CHGLTC-T2-VA	ОТН	Initial		51.200	GLTC ECNF T2-2 - VA.pdf	P. Date Submitted: 01/29/2021 By:

No Rate/Rule Schedule items changed.

No Supporting Documents changed.

Response 9

Comments:

Updated forms, a statement of variability and additional requested documents are attached along with the objection response dated 1-20-22.

Related Objection 9

Applies To:

- Frequently Asked Questions, VA-GLTC04-FAQ (Form)
- Group Long Term Care Request to Change Coverage, AE1181-VA (Form)
- Certificate Holder Letter, CHGLTC-T1-VA (Form)
- Certificate Holder Letter, CHGLTC-T2-VA (Form)

State: Virginia Filing Company: Unum Life Insurance Company of America

TOI/Sub-TOI: LTC03G Group Long Term Care/LTC03G.001 Qualified

Product Name:2019 GLTC04 RATE INITIATIVE - PHASE IProject Name/Number:2019 GLTC04 RATE INITIATIVE - PHASE I/

Comments: Although not required, the company may consider bracketing the home office address, phone number, and website to simplify the process if a change is ever made. This would also apply to the company contact number listed in the body of the letter and or any other forms.

Changed Items:

State: Virginia Filing Company: Unum Life Insurance Company of America

TOI/Sub-TOI: LTC03G Group Long Term Care/LTC03G.001 Qualified

Item No.	Form Name	Form Number	Form Type	Form Action	Action Specific Data	Readability Score	Attachments	Submitted
Previous Ve	ersion							
1	Certificate Amendment - Contingent Non- Forfeiture Benefit	04CNF19G-VA	CERA	Initial		41.200	GLTC04 CNF Form_v2_cln - 04CNF19G- VA.pdf	Date Submitted 03/22/2020 By: Ellen Desrosiers
Previous Ve	ersion							
1	Certificate Amendment - Contingent Non- Forfeiture Benefit	04CNF19G-VA	CERA	Initial			GLTC04 CNF Form - 04CNF19G- VA.pdf	Date Submitted 03/28/2019 By: Ellen Desrosiers
2	Certificate Amendment - Enhanced Contingent Non- Forfeiture Benefit	04CBUL22G- APO-VA	CERA	Initial		41.100	GLTC04 ECNF Form_v1_cln- 04ECBUL22G- APO-VA.pdf	Date Submitted: 02/04/2022 By: Ellen Desrosiers
Previous Ve	ersion							
2	Certificate Amendment - Enhanced Contingent Non- Forfeiture Benefit	04ECNF19G- APO-VA	CERA	Initial		41.100	GLTC04 ECNF Form_v2_cln- 04ECNF19G- APO-VA.pdf	Date Submitted 03/22/2020 By: Ellen Desrosiers
Previous Ve	ersion							
2	Certificate Amendment - Enhanced Contingent Non- Forfeiture Benefit	04ECNF19G- APO-VA	CERA	Initial			GLTC04 ECNF Form- 04ECNF19G- APO-VA.pdf	Date Submitted 03/28/2019 By: Ellen Desrosiers
3	Frequently Asked Questions	GLTC-FAQ-VA	ОТН	Initial		47.600	GLTC CH FAQ ECNF_v2_cln_V A (final).pdf	Date Submitted: 02/04/2022 By: Ellen Desrosiers
Previous Ve	ersion							
3	Frequently Asked Questions	VA-GLTC04-FAQ	ОТН	Initial		47.600	GLTC0419 CH FAQ	Date Submitted 06/16/2020

State: Virginia Filing Company: Unum Life Insurance Company of America

TOI/Sub-TOI: LTC03G Group Long Term Care/LTC03G.001 Qualified

Item No.	Form	Form Number	Form Type	Form Action	Action Specific Data	Readability Score	Attachments	Submitted
	Name							
1	Certificate Amendment - Contingent Non- Forfeiture Benefit	04CBUL22G-VA	CERA	Initial		41.200	GLTC04 CNF Form_v1_cln - 04CBUL22G-VA (final).pdf	Date Submitted: 02/04/2022 By: Ellen Desrosiers
							ECNF_v2_cln_G en.pdf	Ву:
Previous Ve	ersion							
3	Frequently Asked Questions	VA-GLTC04-FAQ	ОТН	Initial		47.600	GLTC0419 CH FAQ ECNF- VA.pdf	Date Submitted 03/22/2020 By: Ellen Desrosiers
4	Certificate Holder Letter	CHGLTC-T1-VA	ОТН	Initial		51.400	GLTC CH ECNF T1-2_cln_v3_VA · (final).pdf	Date Submitted: -02/04/2022 By: Ellen Desrosiers
Previous Ve	ersion							
4	Certificate Holder Letter	CHGLTC-T1-VA	ОТН	Initial		51.400	GLTC19 CH T1-2 Infl Ins ECNF_v1_cln_V A.pdf	07/30/2021
Previous Ve	ersion							
4	Certificate Holder Letter	CHGLTC-T1-VA	ОТН	Initial		51.400	GLTC19 CH T1-2 Infl Ins ECNF_v1_cln_V A.pdf	05/24/2021
Previous Ve	ersion							
4	Certificate Holder Letter	CHGLTC-T1-VA	ОТН	Initial		51.400	GLTC ECNF T1- 2- VA.pdf	Date Submitted 01/29/2021 By:
Previous Ve	ersion							
4	Certificate Holder Letter	CH-GLTC04-VA	ОТН	Initial		51.400	GLTC0419 CH ECNF_v7_cln_V A .pdf	Date Submitted 06/30/2020 By:
Previous Ve	ersion						,	_
4	Certificate Holder Letter	CH-GLTC04-VA	OTH	Initial		51.400	GLTC0419 CH ECNF_v6_cln_V A.pdf	Date Submitted 06/16/2020 By:

State: Virginia Filing Company: Unum Life Insurance Company of America

TOI/Sub-TOI: LTC03G Group Long Term Care/LTC03G.001 Qualified

Product Name:2019 GLTC04 RATE INITIATIVE - PHASE IProject Name/Number:2019 GLTC04 RATE INITIATIVE - PHASE I/

	edule Item Changes	Form	Form	Form	Action Chastin	Doodobility:		
Item	Form	Form	Form -		Action Specific			
No.	Name	Number	Type	Action	Data	Score	Attachments	Submitted
1	Certificate Amendment - Contingent Non- Forfeiture Benefit	04CBUL22G-VA	CERA	Initial		41.200	GLTC04 CNF Form_v1_cln - 04CBUL22G-VA (final).pdf	Date Submitted: 02/04/2022 By: Ellen Desrosiers
Previous Ve	ersion							
4	Certificate Holder Letter	CH-GLTC04-VA	OTH	Initial		51.400	GLTC0419 CH ECNF_v6_cln_V A.pdf	Date Submitted: 05/12/2020 By:
Previous Ve	ersion							
4	Certificate Holder Letter	CH-GLTC04-VA	ОТН	Initial		51.400	GLTC0419 CH ECNF_v4_cln_V A.pdf	Date Submitted: 03/22/2020 By: Ellen Desrosiers
5	Certificate Holder Letter	CHGLTC-T2-VA	OTH	Initial		51.200	GLTC CH ECNF T2-2_cln_v3_VA (final).pdf	Date Submitted: 02/04/2022 By: Ellen Desrosiers
Previous Ve	ersion							
5	Certificate Holder Letter	CHGLTC-T2-VA	ОТН	Initial		51.200	GLTC19 CH T2-2 Infl Ins ECNF_v1_cln_V A.pdf	07/30/2021
Previous Ve	ersion							
5	Certificate Holder Letter	CHGLTC-T2-VA	ОТН	Initial		51.200	GLTC19 CH T2-2 Infl Ins ECNF_v1_cln_V A.pdf	05/24/2021
Previous Ve	ersion							
5	Certificate Holder Letter	CHGLTC-T2-VA	OTH	Initial		51.200	GLTC ECNF T2-2 - VA.pdf	Date Submitted: 01/29/2021 By:

No Rate/Rule Schedule items changed.

Filing Company:

Unum Life Insurance Company of America

TOI/Sub-TOI: LTC03G Group Long Term Care/LTC03G.001 Qualified

Product Name:2019 GLTC04 RATE INITIATIVE - PHASE IProject Name/Number:2019 GLTC04 RATE INITIATIVE - PHASE I/

Virginia

State:

Attachment(s):

Supporting Document Se	chedule Item Changes
Satisfied - Item:	Premium Increase History
Comments:	
Attachment(s):	GLTC Prem Inc History_v2_VA.pdf
Previous Version	
Satisfied - Item:	Premium Increase History
Comments:	
Attachment(s):	GLTC0419 Prem Inc History_v2_VA.pdf
Previous Version	
Satisfied - Item:	GLTC0419 Prem Inc History_VA
Comments:	

GLTC0419 Prem Inc History_VA.pdf

Supporting Document Schedule	Item Changes
Satisfied - Item:	Premium Increase History
Comments:	
Attachment(s):	GLTC Prem Inc History_v2_VA.pdf
Previous Version	
Satisfied - Item:	Premium Increase History
Comments:	
Attachment(s):	GLTC0419 Prem Inc History_v2_VA.pdf
Previous Version	
Satisfied - Item:	GLTC0419 Prem Inc History_VA
Comments:	
Attachment(s):	GLTC0419 Prem Inc History_VA.pdf

Satisfied - Item:	Administrative Statement
Comments:	
Attachment(s):	GLTC Administrative Statement (1).pdf

State: Virginia Filing Company: Unum Life Insurance Company of America

Virginia Objections_Final Responses 1.20.22.pdf

TOI/Sub-TOI: LTC03G Group Long Term Care/LTC03G.001 Qualified

Product Name:2019 GLTC04 RATE INITIATIVE - PHASE IProject Name/Number:2019 GLTC04 RATE INITIATIVE - PHASE I/

Comments: Attachment(s):

Supporting Document Sch	
Satisfied - Item:	Premium Increase History
Comments:	
Attachment(s):	GLTC Prem Inc History_v2_VA.pdf
Previous Version	
Satisfied - Item:	Premium Increase History
Comments:	
Attachment(s):	GLTC0419 Prem Inc History_v2_VA.pdf
Previous Version	
Satisfied - Item:	GLTC0419 Prem Inc History_VA
Comments:	
Attachment(s):	GLTC0419 Prem Inc History_VA.pdf
0.0.0.1.1	
Satisfied - Item:	Administrative Statement
Comments:	
Attachment(s):	GLTC Administrative Statement (1).pdf
Satisfied - Item:	Virginia Objections_Final Responses 1.20.22

Filing Company:

Unum Life Insurance Company of America

TOI/Sub-TOI: LTC03G Group Long Term Care/LTC03G.001 Qualified

Product Name:2019 GLTC04 RATE INITIATIVE - PHASE IProject Name/Number:2019 GLTC04 RATE INITIATIVE - PHASE I/

Virginia

Supporting Document S	chedule Item Changes
Satisfied - Item:	Premium Increase History
Comments:	
Attachment(s):	GLTC Prem Inc History_v2_VA.pdf
Previous Version	
Satisfied - Item:	Premium Increase History
Comments:	
Attachment(s):	GLTC0419 Prem Inc History_v2_VA.pdf
Previous Version	
Satisfied - Item:	GLTC0419 Prem Inc History_VA
Comments:	
Attachment(s):	GLTC0419 Prem Inc History_VA.pdf
Satisfied - Item:	Administrative Statement
Comments:	
Attachment(s):	GLTC Administrative Statement (1).pdf
Satisfied - Item:	Virginia Objections_Final Responses 1.20.22
Comments:	ringinia cojecticio nell'interiore n
Attachment(s):	Virginia Objections_Final Responses 1.20.22.pdf
Satisfied - Item:	Statement of Variability
Comments:	
Attachment(s):	Statement of Variability.pdf
Previous Version	
Satisfied - Item:	Statement of Variability

Response 10

Comments:
Attachment(s):

State:

Comments:

Updated forms, a statement of variability and additional requested documents are attached along with the objection response dated 1-20-22.

Statement of Variability.pdf

Related Objection 10

State: Virginia Filing Company: Unum Life Insurance Company of America

TOI/Sub-TOI: LTC03G Group Long Term Care/LTC03G.001 Qualified

Product Name:2019 GLTC04 RATE INITIATIVE - PHASE IProject Name/Number:2019 GLTC04 RATE INITIATIVE - PHASE I/

Applies To:

- Certificate Holder Letter, CHGLTC-T1-VA (Form)
- Certificate Holder Letter, CHGLTC-T2-VA (Form)

Comments: Please revise the paragraph on page one of the policyholder letter to more closely match Virginia Regulation 14VAC5-200-75 D4. A more acceptable version might be the following:

"The rate increase request was reviewed by the Virginia State Corporation Commission and was found to be compliant with applicable Virginia laws and regulations addressing long-term care insurance. All premium rate filings are available for public inspection and may be accessed online through the State Corporation Commission's webpage at https://scc.virginia.gov/boi/SERFFInquiry/LtcFilings.aspx

.The rate increase will be incrementally applied..."

Changed Items:

State: Virginia Filing Company: Unum Life Insurance Company of America

TOI/Sub-TOI: LTC03G Group Long Term Care/LTC03G.001 Qualified

Item	Form	Form	Form	Form	Action Specific	Readability		
No.	Name	Number	Туре	Action	Data	Score	Attachments	Submitted
1	Certificate Holder Letter	CHGLTC-T1-VA	OTH	Initial		51.400	GLTC CH ECNF T1-2_cln_v3_VA - (final).pdf	Date Submitted: 02/04/2022 By: Ellen Desrosiers
Previous Ve	ersion							
1	Certificate Holder Letter	CHGLTC-T1-VA	ОТН	Initial		51.400	GLTC19 CH T1-2 Infl Ins ECNF_v1_cln_V A.pdf	07/30/2021
Previous Ve	ersion							
1	Certificate Holder Letter	CHGLTC-T1-VA	ОТН	Initial		51.400	GLTC19 CH T1-2 Infl Ins ECNF_v1_cln_V A.pdf	05/24/2021
Previous Ve	ersion							
1	Certificate Holder Letter	CHGLTC-T1-VA	OTH	Initial		51.400	GLTC ECNF T1- 2- VA.pdf	Date Submitted. 01/29/2021 By:
Previous Ve	ersion							
1	Certificate Holder Letter	CH-GLTC04-VA	OTH	Initial		51.400	GLTC0419 CH ECNF_v7_cln_V A .pdf	
Previous Ve	ersion							
1	Certificate Holder Letter	CH-GLTC04-VA	OTH	Initial		51.400	GLTC0419 CH ECNF_v6_cln_V A.pdf	Date Submitted. 06/16/2020 By:
Previous Ve	ersion							
1	Certificate Holder Letter	CH-GLTC04-VA	ОТН	Initial		51.400	GLTC0419 CH ECNF_v6_cln_V A.pdf	Date Submitted. 05/12/2020 By:
Previous Ve	ersion						· ·	
1	Certificate Holder Letter	CH-GLTC04-VA	ОТН	Initial		51.400	GLTC0419 CH ECNF_v4_cln_V A.pdf	Date Submitted. 03/22/2020 By: Ellen Desrosiers
2	Certificate Holder Letter	CHGLTC-T2-VA	ОТН	Initial		51.200	GLTC CH ECNF T2-2_cln_v3_VA	

State: Virginia Filing Company: Unum Life Insurance Company of America

TOI/Sub-TOI: LTC03G Group Long Term Care/LTC03G.001 Qualified

Product Name:2019 GLTC04 RATE INITIATIVE - PHASE IProject Name/Number:2019 GLTC04 RATE INITIATIVE - PHASE I/

Form Sch	edule Item Changes							
Item	Form	Form	Form	Form	Action Specific	Readability		
No.	Name	Number	Туре	Action	Data	Score	Attachments	Submitted
1	Certificate Holder Letter	CHGLTC-T1-VA	ОТН	Initial		51.400	GLTC CH ECNF T1-2_cln_v3_VA - (final).pdf	Date Submitted: 02/04/2022 By: Ellen Desrosiers
							(final).pdf	By: Ellen Desrosiers
Previous Ve	'ersion							
2	Certificate Holder Letter	CHGLTC-T2-VA	ОТН	Initial		51.200	GLTC19 CH T2-2 Infl Ins ECNF_v1_cln_V A.pdf	07/30/2021
Previous Ve	'ersion							
2	Certificate Holder Letter	CHGLTC-T2-VA	ОТН	Initial		51.200	GLTC19 CH T2-2 Infl Ins ECNF_v1_cln_V A.pdf	05/24/2021
Previous Ve	'ersion							
2	Certificate Holder Letter	CHGLTC-T2-VA	ОТН	Initial		51.200	GLTC ECNF T2-2 - VA.pdf	P Date Submitted: 01/29/2021 By:

No Rate/Rule Schedule items changed.

No Supporting Documents changed.

Response 11

Comments:

Updated forms, a statement of variability and additional requested documents are attached along with the objection response dated 1-20-22.

Related Objection 11

Applies To:

- Certificate Holder Letter, CHGLTC-T1-VA (Form)

Comments: Will this letter be sent to policyholders without any type of inflation protection? If not, is the paragraph that starts with "You are receiving this notification package..." a necessary part of the letter?

Changed Items:

State: Virginia Filing Company: Unum Life Insurance Company of America

TOI/Sub-TOI: LTC03G Group Long Term Care/LTC03G.001 Qualified

Item	Form	Form	Form	Form	Action Specific	Readability		
No.	Name	Number	Туре	Action	Data	Score	Attachments	Submitted
1	Certificate Holder Letter	CHGLTC-T1-VA	ОТН	Initial		51.400	GLTC CH ECNF T1-2_cln_v3_VA - (final).pdf	Date Submitted: 02/04/2022 By: Ellen Desrosiers
Previous Ve	ersion							
1	Certificate Holder Letter	CHGLTC-T1-VA	ОТН	Initial		51.400	GLTC19 CH T1-2 Infl Ins ECNF_v1_cln_V A.pdf	07/30/2021
Previous Ve	ersion							
1	Certificate Holder Letter	CHGLTC-T1-VA	OTH	Initial		51.400	GLTC19 CH T1-2 Infl Ins ECNF_v1_cln_V A.pdf	05/24/2021
Previous Ve	ersion							
1	Certificate Holder Letter	CHGLTC-T1-VA	OTH	Initial		51.400	GLTC ECNF T1- 2- VA.pdf	Date Submitted: 01/29/2021 By:
Previous Ve	ersion							
1	Certificate Holder Letter	CH-GLTC04-VA	ОТН	Initial		51.400	GLTC0419 CH ECNF_v7_cln_V A .pdf	
Previous Ve	ersion							
1	Certificate Holder Letter	CH-GLTC04-VA	ОТН	Initial		51.400	GLTC0419 CH ECNF_v6_cln_V A.pdf	Date Submitted: 06/16/2020 By:
Previous Ve	ersion							
1	Certificate Holder Letter	CH-GLTC04-VA	ОТН	Initial		51.400	GLTC0419 CH ECNF_v6_cln_V A.pdf	Date Submitted: 05/12/2020 By:
Previous Ve	ersion							
1	Certificate Holder Letter	CH-GLTC04-VA	ОТН	Initial		51.400	GLTC0419 CH ECNF_v4_cln_V A.pdf	Date Submitted: 03/22/2020 By: Ellen Desrosiers

State: Virginia Filing Company: Unum Life Insurance Company of America

TOI/Sub-TOI: LTC03G Group Long Term Care/LTC03G.001 Qualified

Product Name:2019 GLTC04 RATE INITIATIVE - PHASE IProject Name/Number:2019 GLTC04 RATE INITIATIVE - PHASE I/

No Rate/Rule Schedule items changed.

No Supporting Documents changed.

Response 12

Comments:

Updated forms, a statement of variability and additional requested documents are attached along with the objection response dated 1-20-22.

Related Objection 12

Applies To:

- Certificate Holder Letter, CHGLTC-T1-VA (Form)

Comments: We could not find either instance of the variable item, "[For coverage that includes CPI Benefit, the increase will be approximately [x%].]" in the letter. Please explain and make the necessary revisions.

Changed Items:

State: Virginia Filing Company: Unum Life Insurance Company of America

TOI/Sub-TOI: LTC03G Group Long Term Care/LTC03G.001 Qualified

ltem	Form	Form	Form	Form	Action Specific	Readability		
No.	Name	Number	Туре	Action	Data	Score	Attachments	Submitted
1	Certificate Amendment - Contingent Non- Forfeiture Benefit	04CBUL22G-VA	CERA	Initial		41.200	GLTC04 CNF Form_v1_cln - 04CBUL22G-VA (final).pdf	Date Submitted: 02/04/2022 By: Ellen Desrosiers
Previous Ve	ersion							
1	Certificate Amendment - Contingent Non- Forfeiture Benefit	04CNF19G-VA	CERA	Initial		41.200	GLTC04 CNF Form_v2_cln - 04CNF19G- VA.pdf	Date Submitted 03/22/2020 By: Ellen Desrosiers
Previous Ve	ersion							
1	Certificate Amendment - Contingent Non- Forfeiture Benefit	04CNF19G-VA	CERA	Initial			GLTC04 CNF Form - 04CNF19G- VA.pdf	Date Submitted 03/28/2019 By: Ellen Desrosiers
2		04CBUL22G- APO-VA	CERA	Initial		41.100	GLTC04 ECNF Form_v1_cln- 04ECBUL22G- APO-VA.pdf	Date Submitted: 02/04/2022 By: Ellen Desrosiers
Previous Ve	ersion							
2	Certificate Amendment - Enhanced Contingent Non- Forfeiture Benefit	04ECNF19G- APO-VA	CERA	Initial		41.100	GLTC04 ECNF Form_v2_cln- 04ECNF19G- APO-VA.pdf	Date Submitted 03/22/2020 By: Ellen Desrosiers
Previous Ve	ersion							
2	Certificate Amendment - Enhanced Contingent Non- Forfeiture Benefit	04ECNF19G- APO-VA	CERA	Initial			GLTC04 ECNF Form- 04ECNF19G- APO-VA.pdf	Date Submitted: 03/28/2019 By: Ellen Desrosiers
3	Frequently Asked Questions	GLTC-FAQ-VA	ОТН	Initial		47.600	GLTC CH FAQ ECNF_v2_cln_V A (final).pdf	Date Submitted: 02/04/2022 By: Ellen Desrosiers
Previous Ve	ersion							
3	Frequently Asked Questions	VA-GLTC04-FAQ	OTH	Initial		47.600	GLTC0419 CH FAQ	Date Submitted 06/16/2020

State: Virginia Filing Company: Unum Life Insurance Company of America

TOI/Sub-TOI: LTC03G Group Long Term Care/LTC03G.001 Qualified

ltem	Form	Form	Form	Form	Action Specific	Readability		
No.	Name	Number	Туре	Action	Data	Score	Attachments	Submitted
1	Certificate Amendment - Contingent Non- Forfeiture Benefit	04CBUL22G-VA	CERA	Initial		41.200	GLTC04 CNF Form_v1_cln - 04CBUL22G-VA (final).pdf	Date Submitted: 02/04/2022 By: Ellen Desrosiers
							ECNF_v2_cln_G en.pdf	By:
Previous Ve	ersion							
3	Frequently Asked Questions	VA-GLTC04-FAQ	ОТН	Initial		47.600	GLTC0419 CH FAQ ECNF- VA.pdf	Date Submitted 03/22/2020 By: Ellen Desrosiers
4	Certificate Holder Letter	CHGLTC-T1-VA	ОТН	Initial		51.400	GLTC CH ECNF T1-2_cln_v3_VA (final).pdf	Date Submitted: -02/04/2022 By: Ellen Desrosiers
Previous Ve	ersion							
4	Certificate Holder Letter	CHGLTC-T1-VA	ОТН	Initial		51.400	GLTC19 CH T1-2 Infl Ins ECNF_v1_cln_V A.pdf	07/30/2021
Previous Ve	ersion							
4	Certificate Holder Letter	CHGLTC-T1-VA	ОТН	Initial		51.400	GLTC19 CH T1-2 Infl Ins ECNF_v1_cln_V A.pdf	05/24/2021
Previous Ve	ersion							
4	Certificate Holder Letter	CHGLTC-T1-VA	OTH	Initial		51.400	GLTC ECNF T1- 2- VA.pdf	Date Submitted 01/29/2021 By:
Previous Ve	ersion							
4	Certificate Holder Letter	CH-GLTC04-VA	ОТН	Initial		51.400	GLTC0419 CH ECNF_v7_cln_V A .pdf	Date Submitted 06/30/2020 By:
Previous Ve	ersion			· ·				-
4	Certificate Holder Letter	CH-GLTC04-VA	OTH	Initial		51.400	GLTC0419 CH ECNF_v6_cln_V A.pdf	Date Submitted 06/16/2020 By:

State: Virginia Filing Company: Unum Life Insurance Company of America

TOI/Sub-TOI: LTC03G Group Long Term Care/LTC03G.001 Qualified

Product Name:2019 GLTC04 RATE INITIATIVE - PHASE IProject Name/Number:2019 GLTC04 RATE INITIATIVE - PHASE I/

	edule Item Changes	Form	Form	Form	Action Chastin	Doodobility:		
Item	Form	Form	Form -		Action Specific			
No.	Name	Number	Type	Action	Data	Score	Attachments	Submitted
1	Certificate Amendment - Contingent Non- Forfeiture Benefit	04CBUL22G-VA	CERA	Initial		41.200	GLTC04 CNF Form_v1_cln - 04CBUL22G-VA (final).pdf	Date Submitted: 02/04/2022 By: Ellen Desrosiers
Previous Ve	ersion							
4	Certificate Holder Letter	CH-GLTC04-VA	OTH	Initial		51.400	GLTC0419 CH ECNF_v6_cln_V A.pdf	Date Submitted: 05/12/2020 By:
Previous Ve	ersion							
4	Certificate Holder Letter	CH-GLTC04-VA	ОТН	Initial		51.400	GLTC0419 CH ECNF_v4_cln_V A.pdf	Date Submitted: 03/22/2020 By: Ellen Desrosiers
5	Certificate Holder Letter	CHGLTC-T2-VA	OTH	Initial		51.200	GLTC CH ECNF T2-2_cln_v3_VA (final).pdf	Date Submitted: 02/04/2022 By: Ellen Desrosiers
Previous Ve	ersion							
5	Certificate Holder Letter	CHGLTC-T2-VA	ОТН	Initial		51.200	GLTC19 CH T2-2 Infl Ins ECNF_v1_cln_V A.pdf	07/30/2021
Previous Ve	ersion							
5	Certificate Holder Letter	CHGLTC-T2-VA	ОТН	Initial		51.200	GLTC19 CH T2-2 Infl Ins ECNF_v1_cln_V A.pdf	05/24/2021
Previous Ve	ersion							
5	Certificate Holder Letter	CHGLTC-T2-VA	OTH	Initial		51.200	GLTC ECNF T2-2 - VA.pdf	Date Submitted: 01/29/2021 By:

No Rate/Rule Schedule items changed.

Filing Company:

Unum Life Insurance Company of America

TOI/Sub-TOI: LTC03G Group Long Term Care/LTC03G.001 Qualified

Product Name:2019 GLTC04 RATE INITIATIVE - PHASE IProject Name/Number:2019 GLTC04 RATE INITIATIVE - PHASE I/

Virginia

State:

Attachment(s):

Supporting Document Schedule Item Changes					
Satisfied - Item:	Premium Increase History				
Comments:					
Attachment(s):	GLTC Prem Inc History_v2_VA.pdf				
Previous Version					
Satisfied - Item:	Premium Increase History				
Comments:					
Attachment(s):	GLTC0419 Prem Inc History_v2_VA.pdf				
Previous Version					
Satisfied - Item:	GLTC0419 Prem Inc History_VA				
Comments:					

GLTC0419 Prem Inc History_VA.pdf

Supporting Document Schedule Item Changes					
Satisfied - Item:	Premium Increase History				
Comments:					
Attachment(s):	GLTC Prem Inc History_v2_VA.pdf				
Previous Version					
Satisfied - Item:	remium Increase History				
Comments:					
Attachment(s):	GLTC0419 Prem Inc History_v2_VA.pdf				
Previous Version					
Satisfied - Item:	TC0419 Prem Inc History_VA				
Comments:					
Attachment(s):	GLTC0419 Prem Inc History_VA.pdf				

Satisfied - Item:	Administrative Statement
Comments:	
Attachment(s):	GLTC Administrative Statement (1).pdf

State: Virginia Filing Company: Unum Life Insurance Company of America

Virginia Objections_Final Responses 1.20.22.pdf

TOI/Sub-TOI: LTC03G Group Long Term Care/LTC03G.001 Qualified

Product Name:2019 GLTC04 RATE INITIATIVE - PHASE IProject Name/Number:2019 GLTC04 RATE INITIATIVE - PHASE I/

Comments: Attachment(s):

Supporting Document Sch						
Satisfied - Item:	Premium Increase History					
Comments:						
Attachment(s):	GLTC Prem Inc History_v2_VA.pdf					
Previous Version						
Satisfied - Item:	Premium Increase History					
Comments:						
Attachment(s):	GLTC0419 Prem Inc History_v2_VA.pdf					
Previous Version						
Satisfied - Item:	GLTC0419 Prem Inc History_VA					
Comments:						
Attachment(s):	GLTC0419 Prem Inc History_VA.pdf					
0.0.0.1.1						
Satisfied - Item:	Administrative Statement					
Comments:						
Attachment(s):	GLTC Administrative Statement (1).pdf					
Satisfied - Item:	Virginia Objections_Final Responses 1.20.22					

State: Virginia Filing Company: Unum Life Insurance Company of America

TOI/Sub-TOI: LTC03G Group Long Term Care/LTC03G.001 Qualified

Product Name:2019 GLTC04 RATE INITIATIVE - PHASE IProject Name/Number:2019 GLTC04 RATE INITIATIVE - PHASE I/

	Dramium Ingrango History
Satisfied - Item:	Premium Increase History
Comments:	
Attachment(s):	GLTC Prem Inc History_v2_VA.pdf
Previous Version	
Satisfied - Item:	Premium Increase History
Comments:	
Attachment(s):	GLTC0419 Prem Inc History_v2_VA.pdf
Previous Version	
Satisfied - Item:	GLTC0419 Prem Inc History_VA
Comments:	
Attachment(s):	GLTC0419 Prem Inc History_VA.pdf
Satisfied Itams	Administrative Statement
	Administrative Statement
Satisfied - Item: Comments:	
Comments:	Administrative Statement GLTC Administrative Statement (1).pdf
Comments: Attachment(s):	
	GLTC Administrative Statement (1).pdf
Comments: Attachment(s): Satisfied - Item:	GLTC Administrative Statement (1).pdf
Comments: Attachment(s): Satisfied - Item: Comments:	GLTC Administrative Statement (1).pdf Virginia Objections_Final Responses 1.20.22

Response 13

Attachment(s):

Previous Version

Satisfied - Item:

Comments:
Attachment(s):

Comments:

Updated forms, a statement of variability and additional requested documents are attached along with the objection response dated 1-20-22.

Statement of Variability.pdf

Statement of Variability.pdf

Statement of Variability

Related Objection 13

State: Virginia Filing Company: Unum Life Insurance Company of America

TOI/Sub-TOI: LTC03G Group Long Term Care/LTC03G.001 Qualified

Product Name:2019 GLTC04 RATE INITIATIVE - PHASE IProject Name/Number:2019 GLTC04 RATE INITIATIVE - PHASE I/

Applies To:

- Statement of Variability (Supporting Document)
- Certificate Holder Letter, CHGLTC-T1-VA (Form)

Comments: The variability in the sixth paragraph of the letter does not match the description on item 10 in the SOV. Please correct.

Changed Items:

State: Virginia Filing Company: Unum Life Insurance Company of America

TOI/Sub-TOI: LTC03G Group Long Term Care/LTC03G.001 Qualified

Item	Form	Form	Form	Form	Action Specific	Readability		
No.	Name	Number	Туре	Action	Data	Score	Attachments	Submitted
1	Certificate Holder Letter	CHGLTC-T1-VA	ОТН	Initial		51.400	GLTC CH ECNF T1-2_cln_v3_VA - (final).pdf	Date Submitted: 02/04/2022 By: Ellen Desrosiers
Previous V	ersion							
1	Certificate Holder Letter	CHGLTC-T1-VA	ОТН	Initial		51.400	GLTC19 CH T1-2 Infl Ins ECNF_v1_cln_V A.pdf	07/30/2021
Previous Ve	ersion							
1	Certificate Holder Letter	CHGLTC-T1-VA	OTH	Initial		51.400	GLTC19 CH T1-2 Infl Ins ECNF_v1_cln_V A.pdf	05/24/2021
Previous V	ersion							
1	Certificate Holder Letter	CHGLTC-T1-VA	ОТН	Initial		51.400	GLTC ECNF T1- 2- VA.pdf	Date Submitted: 01/29/2021 By:
Previous V	ersion			<u> </u>				
1	Certificate Holder Letter	CH-GLTC04-VA	ОТН	Initial		51.400	GLTC0419 CH ECNF_v7_cln_V A .pdf	
Previous V	ersion							
1	Certificate Holder Letter	CH-GLTC04-VA	ОТН	Initial		51.400	GLTC0419 CH ECNF_v6_cln_V A.pdf	Date Submitted: 06/16/2020 By:
Previous V	ersion						<u>'</u>	, -
1	Certificate Holder Letter	CH-GLTC04-VA	ОТН	Initial		51.400	GLTC0419 CH ECNF_v6_cln_V A.pdf	Date Submitted: 05/12/2020 By:
Previous V	ersion							
1	Certificate Holder Letter	CH-GLTC04-VA	ОТН	Initial		51.400	GLTC0419 CH ECNF_v4_cln_V A.pdf	Date Submitted: 03/22/2020 By: Ellen Desrosiers

State: Virginia Filing Company: Unum Life Insurance Company of America

TOI/Sub-TOI: LTC03G Group Long Term Care/LTC03G.001 Qualified

Product Name:2019 GLTC04 RATE INITIATIVE - PHASE IProject Name/Number:2019 GLTC04 RATE INITIATIVE - PHASE I/

Supporting Document Schedule Item Changes				
Satisfied - Item:	Statement of Variability			
Comments:				
Attachment(s):	Statement of Variability.pdf			
Previous Version				
Satisfied - Item:	Statement of Variability			
Comments:				
Attachment(s):	Statement of Variability.pdf			

Response 14

Comments:

Updated forms, a statement of variability and additional requested documents are attached along with the objection response dated 1-20-22.

Related Objection 14

Applies To:

- Statement of Variability (Supporting Document)
- Certificate Holder Letter, CHGLTC-T1-VA (Form)

Comments: The variable item [include info site link here in bold] in the letter does not match the description in the SOV. Please correct.

Changed Items:

State: Virginia Filing Company: Unum Life Insurance Company of America

TOI/Sub-TOI: LTC03G Group Long Term Care/LTC03G.001 Qualified

ltem	Form	Form	Form	Form	Action Specific	Readability		
No.	Name	Number	Туре	Action	Data	Score	Attachments	Submitted
1	Certificate Amendment - Contingent Non- Forfeiture Benefit	04CBUL22G-VA	CERA	Initial		41.200	GLTC04 CNF Form_v1_cln - 04CBUL22G-VA (final).pdf	Date Submitted: 02/04/2022 By: Ellen Desrosiers
Previous Ve	ersion							
1	Certificate Amendment - Contingent Non- Forfeiture Benefit	04CNF19G-VA	CERA	Initial		41.200	GLTC04 CNF Form_v2_cln - 04CNF19G- VA.pdf	Date Submitted 03/22/2020 By: Ellen Desrosiers
Previous Ve	ersion							
1	Certificate Amendment - Contingent Non- Forfeiture Benefit	04CNF19G-VA	CERA	Initial			GLTC04 CNF Form - 04CNF19G- VA.pdf	Date Submitted 03/28/2019 By: Ellen Desrosiers
2		04CBUL22G- APO-VA	CERA	Initial		41.100	GLTC04 ECNF Form_v1_cln- 04ECBUL22G- APO-VA.pdf	Date Submitted: 02/04/2022 By: Ellen Desrosiers
Previous Ve	ersion							
2	Certificate Amendment - Enhanced Contingent Non- Forfeiture Benefit	04ECNF19G- APO-VA	CERA	Initial		41.100	GLTC04 ECNF Form_v2_cln- 04ECNF19G- APO-VA.pdf	Date Submitted 03/22/2020 By: Ellen Desrosiers
Previous Ve	ersion							
2	Certificate Amendment - Enhanced Contingent Non- Forfeiture Benefit	04ECNF19G- APO-VA	CERA	Initial			GLTC04 ECNF Form- 04ECNF19G- APO-VA.pdf	Date Submitted: 03/28/2019 By: Ellen Desrosiers
3	Frequently Asked Questions	GLTC-FAQ-VA	ОТН	Initial		47.600	GLTC CH FAQ ECNF_v2_cln_V A (final).pdf	Date Submitted: 02/04/2022 By: Ellen Desrosiers
Previous Ve	ersion							
3	Frequently Asked Questions	VA-GLTC04-FAQ	OTH	Initial		47.600	GLTC0419 CH FAQ	Date Submitted 06/16/2020

State: Virginia Filing Company: Unum Life Insurance Company of America

TOI/Sub-TOI: LTC03G Group Long Term Care/LTC03G.001 Qualified

ltem	Form	Form	Form	Form	Action Specific	Readability		
No.	Name	Number	Туре	Action	Data	Score	Attachments	Submitted
1	Certificate Amendment - Contingent Non- Forfeiture Benefit	04CBUL22G-VA	CERA	Initial		41.200	GLTC04 CNF Form_v1_cln - 04CBUL22G-VA (final).pdf	Date Submitted: 02/04/2022 By: Ellen Desrosiers
							ECNF_v2_cln_G en.pdf	By:
Previous Ve	ersion							
3	Frequently Asked Questions	VA-GLTC04-FAQ	ОТН	Initial		47.600	GLTC0419 CH FAQ ECNF- VA.pdf	Date Submitted 03/22/2020 By: Ellen Desrosiers
4	Certificate Holder Letter	CHGLTC-T1-VA	ОТН	Initial		51.400	GLTC CH ECNF T1-2_cln_v3_VA (final).pdf	Date Submitted: -02/04/2022 By: Ellen Desrosiers
Previous Ve	ersion							
4	Certificate Holder Letter	CHGLTC-T1-VA	ОТН	Initial		51.400	GLTC19 CH T1-2 Infl Ins ECNF_v1_cln_V A.pdf	07/30/2021
Previous Ve	ersion							
4	Certificate Holder Letter	CHGLTC-T1-VA	ОТН	Initial		51.400	GLTC19 CH T1-2 Infl Ins ECNF_v1_cln_V A.pdf	05/24/2021
Previous Ve	ersion							
4	Certificate Holder Letter	CHGLTC-T1-VA	OTH	Initial		51.400	GLTC ECNF T1- 2- VA.pdf	Date Submitted 01/29/2021 By:
Previous Ve	ersion							
4	Certificate Holder Letter	CH-GLTC04-VA	ОТН	Initial		51.400	GLTC0419 CH ECNF_v7_cln_V A .pdf	Date Submitted 06/30/2020 By:
Previous Ve	ersion			· ·				-
4	Certificate Holder Letter	CH-GLTC04-VA	OTH	Initial		51.400	GLTC0419 CH ECNF_v6_cln_V A.pdf	Date Submitted 06/16/2020 By:

State: Virginia Filing Company: Unum Life Insurance Company of America

TOI/Sub-TOI: LTC03G Group Long Term Care/LTC03G.001 Qualified

Product Name:2019 GLTC04 RATE INITIATIVE - PHASE IProject Name/Number:2019 GLTC04 RATE INITIATIVE - PHASE I/

	edule Item Changes	Form	Form	Form	Action Chastin	Doodobility:		
Item	Form	Form	Form -		Action Specific			
No.	Name	Number	Type	Action	Data	Score	Attachments	Submitted
1	Certificate Amendment - Contingent Non- Forfeiture Benefit	04CBUL22G-VA	CERA	Initial		41.200	GLTC04 CNF Form_v1_cln - 04CBUL22G-VA (final).pdf	Date Submitted: 02/04/2022 By: Ellen Desrosiers
Previous Ve	ersion							
4	Certificate Holder Letter	CH-GLTC04-VA	OTH	Initial		51.400	GLTC0419 CH ECNF_v6_cln_V A.pdf	Date Submitted: 05/12/2020 By:
Previous Ve	ersion							
4	Certificate Holder Letter	CH-GLTC04-VA	ОТН	Initial		51.400	GLTC0419 CH ECNF_v4_cln_V A.pdf	Date Submitted: 03/22/2020 By: Ellen Desrosiers
5	Certificate Holder Letter	CHGLTC-T2-VA	OTH	Initial		51.200	GLTC CH ECNF T2-2_cln_v3_VA (final).pdf	Date Submitted: 02/04/2022 By: Ellen Desrosiers
Previous Ve	ersion							
5	Certificate Holder Letter	CHGLTC-T2-VA	ОТН	Initial		51.200	GLTC19 CH T2-2 Infl Ins ECNF_v1_cln_V A.pdf	07/30/2021
Previous Ve	ersion							
5	Certificate Holder Letter	CHGLTC-T2-VA	ОТН	Initial		51.200	GLTC19 CH T2-2 Infl Ins ECNF_v1_cln_V A.pdf	05/24/2021
Previous Ve	ersion							
5	Certificate Holder Letter	CHGLTC-T2-VA	OTH	Initial		51.200	GLTC ECNF T2-2 - VA.pdf	Date Submitted: 01/29/2021 By:

No Rate/Rule Schedule items changed.

Filing Company:

Unum Life Insurance Company of America

TOI/Sub-TOI: LTC03G Group Long Term Care/LTC03G.001 Qualified

Product Name:2019 GLTC04 RATE INITIATIVE - PHASE IProject Name/Number:2019 GLTC04 RATE INITIATIVE - PHASE I/

Virginia

State:

Attachment(s):

Supporting Document Schedule Item Changes					
Satisfied - Item:	Premium Increase History				
Comments:					
Attachment(s):	GLTC Prem Inc History_v2_VA.pdf				
Previous Version					
Satisfied - Item:	Premium Increase History				
Comments:					
Attachment(s):	GLTC0419 Prem Inc History_v2_VA.pdf				
Previous Version					
Satisfied - Item:	GLTC0419 Prem Inc History_VA				
Comments:					

GLTC0419 Prem Inc History_VA.pdf

Supporting Document Schedule Item Changes					
Satisfied - Item:	Premium Increase History				
Comments:					
Attachment(s):	GLTC Prem Inc History_v2_VA.pdf				
Previous Version					
Satisfied - Item:	remium Increase History				
Comments:					
Attachment(s):	GLTC0419 Prem Inc History_v2_VA.pdf				
Previous Version					
Satisfied - Item:	TC0419 Prem Inc History_VA				
Comments:					
Attachment(s):	GLTC0419 Prem Inc History_VA.pdf				

Satisfied - Item:	Administrative Statement
Comments:	
Attachment(s):	GLTC Administrative Statement (1).pdf

State: Virginia Filing Company: Unum Life Insurance Company of America

Virginia Objections_Final Responses 1.20.22.pdf

TOI/Sub-TOI: LTC03G Group Long Term Care/LTC03G.001 Qualified

Product Name:2019 GLTC04 RATE INITIATIVE - PHASE IProject Name/Number:2019 GLTC04 RATE INITIATIVE - PHASE I/

Comments: Attachment(s):

Supporting Document Sch	
Satisfied - Item:	Premium Increase History
Comments:	
Attachment(s):	GLTC Prem Inc History_v2_VA.pdf
Previous Version	
Satisfied - Item:	Premium Increase History
Comments:	
Attachment(s):	GLTC0419 Prem Inc History_v2_VA.pdf
Previous Version	
Satisfied - Item:	GLTC0419 Prem Inc History_VA
Comments:	
Attachment(s):	GLTC0419 Prem Inc History_VA.pdf
0.0.0.1.1	
Satisfied - Item:	Administrative Statement
Comments:	
Attachment(s):	GLTC Administrative Statement (1).pdf
Satisfied - Item:	Virginia Objections_Final Responses 1.20.22

State: Virginia Filing Company: Unum Life Insurance Company of America

TOI/Sub-TOI: LTC03G Group Long Term Care/LTC03G.001 Qualified

Product Name:2019 GLTC04 RATE INITIATIVE - PHASE IProject Name/Number:2019 GLTC04 RATE INITIATIVE - PHASE I/

Item Changes
Premium Increase History
GLTC Prem Inc History_v2_VA.pdf
Premium Increase History
GLTC0419 Prem Inc History_v2_VA.pdf
GLTC0419 Prem Inc History_VA
GLTC0419 Prem Inc History_VA.pdf
Administrative Statement
GLTC Administrative Statement (1).pdf
Virginia Objections_Final Responses 1.20.22
Virginia Objections_Final Responses 1.20.22.pdf
Statement of Variability
Statement of Variability.pdf
Statement of Variability

Response 15

Attachment(s):

Comments:

Updated forms, a statement of variability and additional requested documents are attached along with the objection response dated 1-20-22.

Statement of Variability.pdf

Related Objection 15

State: Virginia Filing Company: Unum Life Insurance Company of America

TOI/Sub-TOI: LTC03G Group Long Term Care/LTC03G.001 Qualified

Product Name:2019 GLTC04 RATE INITIATIVE - PHASE IProject Name/Number:2019 GLTC04 RATE INITIATIVE - PHASE I/

Applies To:

- Statement of Variability (Supporting Document)

Comments: Please explain item number 13 in the SOV section referring to Certificateholder letter Teir 1.

Changed Items:

No Form Schedule items changed.

No Rate/Rule Schedule items changed.

Supporting Document Schedule Item Changes		
Satisfied - Item:	Statement of Variability	
Comments:		
Attachment(s):	Statement of Variability.pdf	
Previous Version		
Satisfied - Item:	Statement of Variability	
Comments:		
Attachment(s):	Statement of Variability.pdf	

Response 16

Comments:

Updated forms, a statement of variability and additional requested documents are attached along with the objection response dated 1-20-22.

Related Objection 16

Applies To:

- Certificate Holder Letter, CHGLTC-T1-VA (Form)
- Certificate Holder Letter, CHGLTC-T2-VA (Form)

Comments: The Bureau that the 4th paragraph of both letters as well as the 5th and 6th paragraphs of CHGLTC-T1-VA, could be confusing to a certificate holder to receive a letter talking about both Simple and Compound Inflation protection.

We would suggest making each sentence variable, that describes the type of inflation protection. For example: [For coverage that includes Simple inflation...]. this would allow each letter to be more tailored to each individual.

Changed Items:

State: Virginia Filing Company: Unum Life Insurance Company of America

TOI/Sub-TOI: LTC03G Group Long Term Care/LTC03G.001 Qualified

ltem	Form	Form	Form	Form	Action Specific	Readability		
No.	Name	Number	Туре	Action	Data	Score	Attachments	Submitted
1	Certificate Amendment - Contingent Non- Forfeiture Benefit	04CBUL22G-VA	CERA	Initial		41.200	GLTC04 CNF Form_v1_cln - 04CBUL22G-VA (final).pdf	Date Submitted: 02/04/2022 By: Ellen Desrosiers
Previous Ve	ersion							
1	Certificate Amendment - Contingent Non- Forfeiture Benefit	04CNF19G-VA	CERA	Initial		41.200	GLTC04 CNF Form_v2_cln - 04CNF19G- VA.pdf	Date Submitted 03/22/2020 By: Ellen Desrosiers
Previous Ve	ersion							
1	Certificate Amendment - Contingent Non- Forfeiture Benefit	04CNF19G-VA	CERA	Initial			GLTC04 CNF Form - 04CNF19G- VA.pdf	Date Submitted 03/28/2019 By: Ellen Desrosiers
2		04CBUL22G- APO-VA	CERA	Initial		41.100	GLTC04 ECNF Form_v1_cln- 04ECBUL22G- APO-VA.pdf	Date Submitted: 02/04/2022 By: Ellen Desrosiers
Previous Ve	ersion							
2	Certificate Amendment - Enhanced Contingent Non- Forfeiture Benefit	04ECNF19G- APO-VA	CERA	Initial		41.100	GLTC04 ECNF Form_v2_cln- 04ECNF19G- APO-VA.pdf	Date Submitted 03/22/2020 By: Ellen Desrosiers
Previous Ve	ersion							
2	Certificate Amendment - Enhanced Contingent Non- Forfeiture Benefit	04ECNF19G- APO-VA	CERA	Initial			GLTC04 ECNF Form- 04ECNF19G- APO-VA.pdf	Date Submitted: 03/28/2019 By: Ellen Desrosiers
3	Frequently Asked Questions	GLTC-FAQ-VA	ОТН	Initial		47.600	GLTC CH FAQ ECNF_v2_cln_V A (final).pdf	Date Submitted: 02/04/2022 By: Ellen Desrosiers
Previous Ve	ersion							
3	Frequently Asked Questions	VA-GLTC04-FAQ	OTH	Initial		47.600	GLTC0419 CH FAQ	Date Submitted 06/16/2020

State: Virginia Filing Company: Unum Life Insurance Company of America

TOI/Sub-TOI: LTC03G Group Long Term Care/LTC03G.001 Qualified

ltem	Form	Form	Form	Form	Action Specific	Readability		
No.	Name	Number	Туре	Action	Data	Score	Attachments	Submitted
1	Certificate Amendment - Contingent Non- Forfeiture Benefit	04CBUL22G-VA	CERA	Initial		41.200	GLTC04 CNF Form_v1_cln - 04CBUL22G-VA (final).pdf	Date Submitted: 02/04/2022 By: Ellen Desrosiers
							ECNF_v2_cln_G en.pdf	By:
Previous Ve	ersion							
3	Frequently Asked Questions	VA-GLTC04-FAQ	ОТН	Initial		47.600	GLTC0419 CH FAQ ECNF- VA.pdf	Date Submitted 03/22/2020 By: Ellen Desrosiers
4	Certificate Holder Letter	CHGLTC-T1-VA	ОТН	Initial		51.400	GLTC CH ECNF T1-2_cln_v3_VA (final).pdf	Date Submitted: -02/04/2022 By: Ellen Desrosiers
Previous Ve	ersion							
4	Certificate Holder Letter	CHGLTC-T1-VA	ОТН	Initial		51.400	GLTC19 CH T1-2 Infl Ins ECNF_v1_cln_V A.pdf	07/30/2021
Previous Ve	ersion							
4	Certificate Holder Letter	CHGLTC-T1-VA	ОТН	Initial		51.400	GLTC19 CH T1-2 Infl Ins ECNF_v1_cln_V A.pdf	05/24/2021
Previous Ve	ersion							
4	Certificate Holder Letter	CHGLTC-T1-VA	OTH	Initial		51.400	GLTC ECNF T1- 2- VA.pdf	Date Submitted 01/29/2021 By:
Previous Ve	ersion							
4	Certificate Holder Letter	CH-GLTC04-VA	ОТН	Initial		51.400	GLTC0419 CH ECNF_v7_cln_V A .pdf	Date Submitted 06/30/2020 By:
Previous Ve	ersion			· ·				-
4	Certificate Holder Letter	CH-GLTC04-VA	OTH	Initial		51.400	GLTC0419 CH ECNF_v6_cln_V A.pdf	Date Submitted 06/16/2020 By:

State: Virginia Filing Company: Unum Life Insurance Company of America

TOI/Sub-TOI: LTC03G Group Long Term Care/LTC03G.001 Qualified

Product Name:2019 GLTC04 RATE INITIATIVE - PHASE IProject Name/Number:2019 GLTC04 RATE INITIATIVE - PHASE I/

	edule Item Changes	Form	Form	Form	Action Chastin	Doodobility:		
Item	Form	Form	Form -		Action Specific			
No.	Name	Number	Type	Action	Data	Score	Attachments	Submitted
1	Certificate Amendment - Contingent Non- Forfeiture Benefit	04CBUL22G-VA	CERA	Initial		41.200	GLTC04 CNF Form_v1_cln - 04CBUL22G-VA (final).pdf	Date Submitted: 02/04/2022 By: Ellen Desrosiers
Previous Ve	ersion							
4	Certificate Holder Letter	CH-GLTC04-VA	OTH	Initial		51.400	GLTC0419 CH ECNF_v6_cln_V A.pdf	Date Submitted: 05/12/2020 By:
Previous Ve	ersion							
4	Certificate Holder Letter	CH-GLTC04-VA	ОТН	Initial		51.400	GLTC0419 CH ECNF_v4_cln_V A.pdf	Date Submitted: 03/22/2020 By: Ellen Desrosiers
5	Certificate Holder Letter	CHGLTC-T2-VA	OTH	Initial		51.200	GLTC CH ECNF T2-2_cln_v3_VA (final).pdf	Date Submitted: 02/04/2022 By: Ellen Desrosiers
Previous Ve	ersion							
5	Certificate Holder Letter	CHGLTC-T2-VA	ОТН	Initial		51.200	GLTC19 CH T2-2 Infl Ins ECNF_v1_cln_V A.pdf	07/30/2021
Previous Ve	ersion							
5	Certificate Holder Letter	CHGLTC-T2-VA	ОТН	Initial		51.200	GLTC19 CH T2-2 Infl Ins ECNF_v1_cln_V A.pdf	05/24/2021
Previous Ve	ersion							
5	Certificate Holder Letter	CHGLTC-T2-VA	OTH	Initial		51.200	GLTC ECNF T2-2 - VA.pdf	Date Submitted: 01/29/2021 By:

No Rate/Rule Schedule items changed.

Filing Company:

Unum Life Insurance Company of America

TOI/Sub-TOI: LTC03G Group Long Term Care/LTC03G.001 Qualified

Product Name:2019 GLTC04 RATE INITIATIVE - PHASE IProject Name/Number:2019 GLTC04 RATE INITIATIVE - PHASE I/

Virginia

State:

Attachment(s):

Supporting Document Schedule Item Changes				
Satisfied - Item:	Premium Increase History			
Comments:				
Attachment(s):	GLTC Prem Inc History_v2_VA.pdf			
Previous Version				
Satisfied - Item:	Premium Increase History			
Comments:				
Attachment(s):	GLTC0419 Prem Inc History_v2_VA.pdf			
Previous Version				
Satisfied - Item:	GLTC0419 Prem Inc History_VA			
Comments:				

GLTC0419 Prem Inc History_VA.pdf

Supporting Document Schedule	upporting Document Schedule Item Changes		
Satisfied - Item:	Premium Increase History		
Comments:			
Attachment(s):	GLTC Prem Inc History_v2_VA.pdf		
Previous Version			
Satisfied - Item:	Premium Increase History		
Comments:			
Attachment(s):	GLTC0419 Prem Inc History_v2_VA.pdf		
Previous Version			
Satisfied - Item:	GLTC0419 Prem Inc History_VA		
Comments:			
Attachment(s):	GLTC0419 Prem Inc History_VA.pdf		

Satisfied - Item:	Administrative Statement
Comments:	
Attachment(s):	GLTC Administrative Statement (1).pdf

State: Virginia Filing Company: Unum Life Insurance Company of America

Virginia Objections_Final Responses 1.20.22.pdf

TOI/Sub-TOI: LTC03G Group Long Term Care/LTC03G.001 Qualified

Product Name:2019 GLTC04 RATE INITIATIVE - PHASE IProject Name/Number:2019 GLTC04 RATE INITIATIVE - PHASE I/

Comments: Attachment(s):

Supporting Document Sch	
Satisfied - Item:	Premium Increase History
Comments:	
Attachment(s):	GLTC Prem Inc History_v2_VA.pdf
Previous Version	
Satisfied - Item:	Premium Increase History
Comments:	
Attachment(s):	GLTC0419 Prem Inc History_v2_VA.pdf
Previous Version	
Satisfied - Item:	GLTC0419 Prem Inc History_VA
Comments:	
Attachment(s):	GLTC0419 Prem Inc History_VA.pdf
0.0.0.1.1	
Satisfied - Item:	Administrative Statement
Comments:	
Attachment(s):	GLTC Administrative Statement (1).pdf
Satisfied - Item:	Virginia Objections_Final Responses 1.20.22

Filing Company:

Unum Life Insurance Company of America

TOI/Sub-TOI: LTC03G Group Long Term Care/LTC03G.001 Qualified

Product Name:2019 GLTC04 RATE INITIATIVE - PHASE IProject Name/Number:2019 GLTC04 RATE INITIATIVE - PHASE I/

Virginia

State:

Supporting Document So	chedule Item Changes
Satisfied - Item:	Premium Increase History
Comments:	
Attachment(s):	GLTC Prem Inc History_v2_VA.pdf
Previous Version	
Satisfied - Item:	Premium Increase History
Comments:	
Attachment(s):	GLTC0419 Prem Inc History_v2_VA.pdf
Previous Version	
Satisfied - Item:	GLTC0419 Prem Inc History_VA
Comments:	
Attachment(s):	GLTC0419 Prem Inc History_VA.pdf
Satisfied - Item:	Administrative Statement
Comments:	
Attachment(s):	GLTC Administrative Statement (1).pdf
Satisfied - Item:	Virginia Objections_Final Responses 1.20.22
Comments:	
Attachment(s):	Virginia Objections_Final Responses 1.20.22.pdf
Satisfied - Item:	Statement of Variability
Comments:	
Attachment(s):	Statement of Variability.pdf
Previous Version	
Satisfied - Item:	Statement of Variability

Response 17

Comments: Attachment(s):

Comments:

Updated forms, a statement of variability and additional requested documents are attached along with the objection response dated 1-20-22.

Statement of Variability.pdf

Related Objection 17

State: Virginia Filing Company: Unum Life Insurance Company of America

TOI/Sub-TOI: LTC03G Group Long Term Care/LTC03G.001 Qualified

Product Name:2019 GLTC04 RATE INITIATIVE - PHASE IProject Name/Number:2019 GLTC04 RATE INITIATIVE - PHASE I/

Applies To:

- Certificate Amendment Contingent Non-Forfeiture Benefit, 04CNF19G-VA (Form)
- Certificate Amendment Enhanced Contingent Non-Forfeiture Benefit, 04ECNF19G-APO-VA (Form)

Comments: Forms 04CNF19G-VA and 04ECNF19G-APO-VA provide a contingent benefit upon lapse. While the nonforfeiture benefit and the contingent benefit upon lapse provide similar benefits, the contingent benefit upon lapse is a separate offer from the benefit provided in a nonforfeiture rider. As such, the endorsement should not be referred to or considered the same as a nonforfeiture benefit.

Changed Items:

State: Virginia Filing Company: Unum Life Insurance Company of America

TOI/Sub-TOI: LTC03G Group Long Term Care/LTC03G.001 Qualified

ltem	Form	Form	Form	Form	Action Specific	Readability		
No.	Name	Number	Туре	Action	Data	Score	Attachments	Submitted
1	Certificate Amendment - Contingent Non- Forfeiture Benefit	04CBUL22G-VA	CERA	Initial		41.200	GLTC04 CNF Form_v1_cln - 04CBUL22G-VA (final).pdf	Date Submitted: 02/04/2022 By: Ellen Desrosiers
Previous Ve	ersion							
1	Certificate Amendment - Contingent Non- Forfeiture Benefit	04CNF19G-VA	CERA	Initial		41.200	GLTC04 CNF Form_v2_cln - 04CNF19G- VA.pdf	Date Submitted 03/22/2020 By: Ellen Desrosiers
Previous Ve	ersion							
1	Certificate Amendment - Contingent Non- Forfeiture Benefit	04CNF19G-VA	CERA	Initial			GLTC04 CNF Form - 04CNF19G- VA.pdf	Date Submitted 03/28/2019 By: Ellen Desrosiers
2	Certificate Amendment - Enhanced Contingent Non- Forfeiture Benefit	04CBUL22G- APO-VA	CERA	Initial		41.100	GLTC04 ECNF Form_v1_cln- 04ECBUL22G- APO-VA.pdf	Date Submitted: 02/04/2022 By: Ellen Desrosiers
Previous Ve	ersion							
2	Certificate Amendment - Enhanced Contingent Non- Forfeiture Benefit	04ECNF19G- APO-VA	CERA	Initial		41.100	GLTC04 ECNF Form_v2_cln- 04ECNF19G- APO-VA.pdf	Date Submitted 03/22/2020 By: Ellen Desrosiers
Previous Ve	ersion							
2	Certificate Amendment - Enhanced Contingent Non- Forfeiture Benefit	04ECNF19G- APO-VA	CERA	Initial			GLTC04 ECNF Form- 04ECNF19G- APO-VA.pdf	Date Submitted 03/28/2019 By: Ellen Desrosiers
3	Frequently Asked Questions	GLTC-FAQ-VA	ОТН	Initial		47.600	GLTC CH FAQ ECNF_v2_cln_V A (final).pdf	Date Submitted: 02/04/2022 By: Ellen Desrosiers
Previous Ve	ersion							
3	Frequently Asked Questions	VA-GLTC04-FAQ	ОТН	Initial		47.600	GLTC0419 CH FAQ	Date Submitted 06/16/2020

State: Virginia Filing Company: Unum Life Insurance Company of America

TOI/Sub-TOI: LTC03G Group Long Term Care/LTC03G.001 Qualified

ltem	Form	Form	Form	Form	Action Specific	Readability		
No.	Name	Number	Type	Action	Data	Score	Attachments	Submitted
1	Certificate Amendment - Contingent Non- Forfeiture Benefit	04CBUL22G-VA	CERA	Initial		41.200	GLTC04 CNF Form_v1_cln - 04CBUL22G-VA (final).pdf	Date Submitted: 02/04/2022 By: Ellen Desrosiers
							ECNF_v2_cln_G en.pdf	By:
Previous Ve	ersion							
3	Frequently Asked Questions	VA-GLTC04-FAQ	ОТН	Initial		47.600	GLTC0419 CH FAQ ECNF- VA.pdf	Date Submitted 03/22/2020 By: Ellen Desrosiers
4	Certificate Holder Letter	CHGLTC-T1-VA	ОТН	Initial		51.400	GLTC CH ECNF T1-2_cln_v3_VA · (final).pdf	Date Submitted: -02/04/2022 By: Ellen Desrosiers
Previous Ve	ersion							
4	Certificate Holder Letter	CHGLTC-T1-VA	ОТН	Initial		51.400	GLTC19 CH T1-2 Infl Ins ECNF_v1_cln_V A.pdf	07/30/2021
Previous Ve	ersion							
4	Certificate Holder Letter	CHGLTC-T1-VA	ОТН	Initial		51.400	GLTC19 CH T1-2 Infl Ins ECNF_v1_cln_V A.pdf	05/24/2021
Previous Ve	ersion							
4	Certificate Holder Letter	CHGLTC-T1-VA	ОТН	Initial		51.400	GLTC ECNF T1- 2- VA.pdf	Date Submitted 01/29/2021 By:
Previous Ve	ersion							
4	Certificate Holder Letter	CH-GLTC04-VA	OTH	Initial		51.400	GLTC0419 CH ECNF_v7_cln_V A .pdf	Date Submitted 06/30/2020 By:
Previous Ve	ersion						,	_
4	Certificate Holder Letter	CH-GLTC04-VA	OTH	Initial		51.400	GLTC0419 CH ECNF_v6_cln_V A.pdf	Date Submitted 06/16/2020 By:

State: Virginia Filing Company: Unum Life Insurance Company of America

TOI/Sub-TOI: LTC03G Group Long Term Care/LTC03G.001 Qualified

Product Name:2019 GLTC04 RATE INITIATIVE - PHASE IProject Name/Number:2019 GLTC04 RATE INITIATIVE - PHASE I/

Item Form Form Form Action Specific Readability								
Item					•			
No.	Name	Number	Type	Action	Data	Score	Attachments	Submitted
1	Certificate Amendment - Contingent Non- Forfeiture Benefit	04CBUL22G-VA	CERA	Initial		41.200	GLTC04 CNF Form_v1_cln - 04CBUL22G-VA (final).pdf	Date Submitted: 02/04/2022 By: Ellen Desrosiers
Previous Ve	ersion							
4	Certificate Holder Letter	CH-GLTC04-VA	OTH	Initial		51.400	GLTC0419 CH ECNF_v6_cln_V A.pdf	Date Submitted: 05/12/2020 By:
Previous Ve	ersion							
4	Certificate Holder Letter	CH-GLTC04-VA	ОТН	Initial		51.400	GLTC0419 CH ECNF_v4_cln_V A.pdf	Date Submitted: 03/22/2020 By: Ellen Desrosiers
5	Certificate Holder Letter	CHGLTC-T2-VA	ОТН	Initial		51.200	GLTC CH ECNF T2-2_cln_v3_VA (final).pdf	Date Submitted: 02/04/2022 By: Ellen Desrosiers
Previous Ve	ersion							
5	Certificate Holder Letter	CHGLTC-T2-VA	ОТН	Initial		51.200	GLTC19 CH T2-2 Infl Ins ECNF_v1_cln_V A.pdf	07/30/2021
Previous Ve	ersion							
5	Certificate Holder Letter	CHGLTC-T2-VA	ОТН	Initial		51.200	GLTC19 CH T2-2 Infl Ins ECNF_v1_cln_V A.pdf	05/24/2021
Previous Ve	ersion							
5	Certificate Holder Letter	CHGLTC-T2-VA	OTH	Initial		51.200	GLTC ECNF T2-2 - VA.pdf	P Date Submitted: 01/29/2021 By:

No Rate/Rule Schedule items changed.

Filing Company:

Unum Life Insurance Company of America

TOI/Sub-TOI: LTC03G Group Long Term Care/LTC03G.001 Qualified

Product Name:2019 GLTC04 RATE INITIATIVE - PHASE IProject Name/Number:2019 GLTC04 RATE INITIATIVE - PHASE I/

Virginia

State:

Attachment(s):

Supporting Document Schedule Item Changes					
Satisfied - Item:	Premium Increase History				
Comments:					
Attachment(s):	GLTC Prem Inc History_v2_VA.pdf				
Previous Version					
Satisfied - Item:	Premium Increase History				
Comments:					
Attachment(s):	GLTC0419 Prem Inc History_v2_VA.pdf				
Previous Version					
Satisfied - Item:	GLTC0419 Prem Inc History_VA				
Comments:					

GLTC0419 Prem Inc History_VA.pdf

Supporting Document Schedule	Item Changes
Satisfied - Item:	Premium Increase History
Comments:	
Attachment(s):	GLTC Prem Inc History_v2_VA.pdf
Previous Version	
Satisfied - Item:	Premium Increase History
Comments:	
Attachment(s):	GLTC0419 Prem Inc History_v2_VA.pdf
Previous Version	
Satisfied - Item:	GLTC0419 Prem Inc History_VA
Comments:	
Attachment(s):	GLTC0419 Prem Inc History_VA.pdf

Satisfied - Item:	Administrative Statement
Comments:	
Attachment(s):	GLTC Administrative Statement (1).pdf

State: Virginia Filing Company: Unum Life Insurance Company of America

Virginia Objections_Final Responses 1.20.22.pdf

TOI/Sub-TOI: LTC03G Group Long Term Care/LTC03G.001 Qualified

Product Name:2019 GLTC04 RATE INITIATIVE - PHASE IProject Name/Number:2019 GLTC04 RATE INITIATIVE - PHASE I/

Comments: Attachment(s):

Supporting Document Sch	
Satisfied - Item:	Premium Increase History
Comments:	
Attachment(s):	GLTC Prem Inc History_v2_VA.pdf
Previous Version	
Satisfied - Item:	Premium Increase History
Comments:	
Attachment(s):	GLTC0419 Prem Inc History_v2_VA.pdf
Previous Version	
Satisfied - Item:	GLTC0419 Prem Inc History_VA
Comments:	
Attachment(s):	GLTC0419 Prem Inc History_VA.pdf
0.0.0.1.1	
Satisfied - Item:	Administrative Statement
Comments:	
Attachment(s):	GLTC Administrative Statement (1).pdf
Satisfied - Item:	Virginia Objections_Final Responses 1.20.22

Virginia Filing Company: Unum Life Insurance Company of America

LTC03G Group Long Term Care/LTC03G.001 Qualified TOI/Sub-TOI:

2019 GLTC04 RATE INITIATIVE - PHASE I Product Name: Project Name/Number: 2019 GLTC04 RATE INITIATIVE - PHASE I/

Supporting Document So	chedule Item Changes
Satisfied - Item:	Premium Increase History
Comments:	
Attachment(s):	GLTC Prem Inc History_v2_VA.pdf
Previous Version	
Satisfied - Item:	Premium Increase History
Comments:	
Attachment(s):	GLTC0419 Prem Inc History_v2_VA.pdf
Previous Version	
Satisfied - Item:	GLTC0419 Prem Inc History_VA
Comments:	
Attachment(s):	GLTC0419 Prem Inc History_VA.pdf

Satisfied - Item:	Administrative Statement
Comments:	
Attachment(s):	GLTC Administrative Statement (1).pdf
Satisfied - Item:	Virginia Objections_Final Responses 1.20.22
Comments:	
Attachment(s):	Virginia Objections_Final Responses 1.20.22.pdf
Satisfied - Item:	Statement of Variability
Comments:	
Attachment(s):	Statement of Variability.pdf
Previous Version	
Satisfied - Item:	Statement of Variability
Comments:	
Attachment(s):	Statement of Variability.pdf

Conclusion:

Sincerely,

State:

Ellen Desrosiers

State: Virginia Filing Company: Unum Life Insurance Company of America

TOI/Sub-TOI: LTC03G Group Long Term Care/LTC03G.001 Qualified

Product Name: 2019 GLTC04 RATE INITIATIVE - PHASE I **Project Name/Number:** 2019 GLTC04 RATE INITIATIVE - PHASE I/

Response Letter

Response Letter Status Submitted to State

Response Letter Date 09/07/2022 Submitted Date 09/07/2022

Dear Bobby Toone,

Introduction:

Response 1

Comments:

We acknowledge the receipt of this objection.

Related Objection 1

Comments: The rate review for this filing is complete, however the filing cannot be approved until the forms review is complete. No response to this objection is required.

Changed Items:

No Form Schedule items changed.

No Rate/Rule Schedule items changed.

No Supporting Documents changed.

Conclusion:

Sincerely,

Ellen Desrosiers

State: Virginia Filing Company: Unum Life Insurance Company of America

TOI/Sub-TOI: LTC03G Group Long Term Care/LTC03G.001 Qualified

Product Name:2019 GLTC04 RATE INITIATIVE - PHASE IProject Name/Number:2019 GLTC04 RATE INITIATIVE - PHASE I/

Response Letter

Response Letter Status Submitted to State

Response Letter Date 07/30/2021 Submitted Date 07/30/2021

Dear Bobby Toone,

Introduction:

Response 1

Comments:

The watermark has been removed from the forms.

Related Objection 1

Applies To:

- Certificate Holder Letter, CHGLTC-T1-VA (Form)
- Certificate Holder Letter, CHGLTC-T2-VA (Form)
- Sample Certificate Holder Letter (Supporting Document)

Comments: Each form submitted for review should be submitted in it's final form. Please remove "DRAFT" from the above noted forms.

Changed Items:

State: Virginia Filing Company: Unum Life Insurance Company of America

TOI/Sub-TOI: LTC03G Group Long Term Care/LTC03G.001 Qualified

Letter L				Action Specific	Form	Form	Form		tem
Letter Infil Ins ECNF_v1_cin_V A.pdf	ts Submitted	Attachments	Score	Data	Action	Туре	Number	Name	No.
Certificate Holder CHGLTC-T1-VA OTH Initial 51.400 GLTC19 CH T1-Infl Ins ECNF_V1_cln_V Previous Version Certificate Holder CHGLTC-T1-VA OTH Initial 51.400 GLTC ECNF_T1-2-VA.pdf Previous Version Certificate Holder CH-GLTC04-VA OTH Initial 51.400 GLTC0419 CH ECNF_V7_cln_V A.pdf Previous Version Certificate Holder CH-GLTC04-VA OTH Initial 51.400 GLTC0419 CH ECNF_V7_cln_V A.pdf Previous Version Certificate Holder CH-GLTC04-VA OTH Initial 51.400 GLTC0419 CH ECNF_V7_cln_V A.pdf Previous Version Certificate Holder CH-GLTC04-VA OTH Initial 51.400 GLTC0419 CH ECNF_V6_cln_V A.pdf Previous Version Certificate Holder CH-GLTC04-VA OTH Initial 51.400 GLTC0419 CH ECNF_V6_cln_V A.pdf Previous Version Certificate Holder CH-GLTC04-VA OTH Initial 51.400 GLTC0419 CH ECNF_V6_cln_V A.pdf Certificate Holder CH-GLTC04-VA OTH Initial 51.400 GLTC0419 CH ECNF_V4_cln_V A.pdf Certificate Holder CH-GLTC04-VA OTH Initial 51.400 GLTC0419 CH ECNF_V4_cln_V A.pdf Certificate Holder CH-GLTC04-VA OTH Initial 51.400 GLTC0419 CH ECNF_V4_cln_V A.pdf Certificate Holder CH-GLTC-T2-VA OTH Initial 51.200 GLTC19 CH T2-Initial Ins ECNF_V1_cln_V A.pdf Previous Version	T1-2 Date Submitte 07/30/2021 In_V By: Ellen Desrosiers	Infl Ins ECNF_v1_cln_V	51.400		Initial	OTH	CHGLTC-T1-VA		
Letter Infl Ins ECNF_v1_cln_v Apdr Previous Version Certificate Holder CHGLTC-T1-VA OTH Initial 51.400 GLTC ECNF T1- Letter S1.400 GLTC ECNF T1- Letter S1.400 GLTC0419 CH Certificate Holder CH-GLTC04-VA OTH Initial 51.400 GLTC0419 CH ECNF_v7_cln_v Apdr Previous Version Certificate Holder CH-GLTC04-VA OTH Initial 51.400 GLTC0419 CH ECNF_v6_cln_v Apdr Previous Version Certificate Holder CH-GLTC04-VA OTH Initial 51.400 GLTC0419 CH Letter S1.400 GLTC0419 CH ECNF_v6_cln_v Apdr Previous Version Certificate Holder CH-GLTC04-VA OTH Initial 51.400 GLTC0419 CH Letter S1.400 GLTC0419 CH ECNF_v6_cln_v Apdr Previous Version Certificate Holder CH-GLTC04-VA OTH Initial 51.400 GLTC0419 CH ECNF_v6_cln_v Apdr Certificate Holder CH-GLTC04-VA OTH Initial 51.400 GLTC0419 CH ECNF_v4_cln_v Apdr Certificate Holder CH-GLTC04-VA OTH Initial 51.400 GLTC0419 CH ECNF_v4_cln_v Apdr Certificate Holder CH-GLTC04-VA OTH Initial 51.400 GLTC0419 CH ECNF_v4_cln_v Apdr Certificate Holder CH-GLTC04-VA OTH Initial 51.400 GLTC0419 CH ECNF_v4_cln_v Apdr Certificate Holder CH-GLTC04-VA OTH Initial 51.400 GLTC0419 CH ECNF_v4_cln_v Apdr Certificate Holder CH-GLTC04-VA OTH Initial 51.400 GLTC0419 CH ECNF_v4_cln_v Apdr									Previous Version
Certificate Holder Letter CHGLTC-T1-VA OTH Initial 51.400 GLTC ECNF T1-2-VA.pdf Previous Version Certificate Holder Letter CH-GLTCO4-VA OTH Initial 51.400 GLTCO419 CH ECNF, V7. cln., v A. pdf Previous Version Certificate Holder CH-GLTCO4-VA OTH Initial 51.400 GLTCO419 CH ECNF, v6. cln., v A. pdf Previous Version Certificate Holder CH-GLTCO4-VA OTH Initial 51.400 GLTCO419 CH ECNF, v6. cln., v A. pdf Previous Version Certificate Holder CH-GLTCO4-VA OTH Initial 51.400 GLTCO419 CH ECNF, v6. cln., v A. pdf Previous Version Certificate Holder CH-GLTCO4-VA OTH Initial 51.400 GLTCO419 CH ECNF, v6. cln., v A. pdf Certificate Holder CH-GLTCO4-VA OTH Initial 51.400 GLTCO419 CH ECNF, v6. cln., v A. pdf Certificate Holder CH-GLTCO4-VA OTH Initial 51.400 GLTCO419 CH ECNF, v4. cln., v A. pdf Certificate Holder CH-GLTCO4-VA OTH Initial 51.400 GLTCO419 CH ECNF, v4. cln., v A. pdf Certificate Holder CH-GLTC-T2-VA OTH Initial 51.200 GLTC19 CH T2-1 lnfl lns ECNF, v1. cln., v A. pdf Previous Version	HT1-2 Date Submitte 05/24/2021 eln_V By:	Infl Ins ECNF_v1_cIn_V	51.400		Initial	ОТН	CHGLTC-T1-VA		1
Previous Version 1 Certificate Holder CH-GLTC04-VA OTH Initial 51.400 GLTC0419 CH ECNF_V7_cln_V A .pdf Previous Version 1 Certificate Holder CH-GLTC04-VA OTH Initial 51.400 GLTC0419 CH ECNF_V6_cln_V A .pdf Previous Version 1 Certificate Holder CH-GLTC04-VA OTH Initial 51.400 GLTC0419 CH ECNF_V6_cln_V A .pdf Previous Version 1 Certificate Holder CH-GLTC04-VA OTH Initial 51.400 GLTC0419 CH ECNF_V6_cln_V A .pdf Previous Version 1 Certificate Holder CH-GLTC04-VA OTH Initial 51.400 GLTC0419 CH ECNF_V6_cln_V A .pdf 2 Certificate Holder CH-GLTC04-VA OTH Initial 51.400 GLTC0419 CH ECNF_V4_cln_V A .pdf 2 Certificate Holder CH-GLTC-T2-VA OTH Initial 51.200 GLTC19 CH T2-tol. Infi lns ECNF_V1_cln_V A .pdf Previous Version									Previous Version
1 Certificate Holder Letter CH-GLTC04-VA OTH Initial 51.400 GLTC0419 CH ECNF v7, cln_ v A .pdf Previous Version 1 Certificate Holder Letter CH-GLTC04-VA OTH Initial 51.400 GLTC0419 CH ECNF v6_cln_ v A.pdf Previous Version 1 Certificate Holder CH-GLTC04-VA OTH Initial 51.400 GLTC0419 CH ECNF_v6_cln_ v A.pdf Previous Version 1 Certificate Holder CH-GLTC04-VA OTH Initial 51.400 GLTC0419 CH ECNF_v6_cln_ v A.pdf Previous Version 2 Certificate Holder Letter CH-GLTC04-VA OTH Initial 51.400 GLTC0419 CH ECNF_v4_cln_ v A.pdf 2 Certificate Holder Letter CH-GLTC04-VA OTH Initial 51.200 GLTC19 CH T2:Infl Ins ECNF_v1_cln_ v A.pdf Previous Version	FT1- Date Submitte 01/29/2021 By:	2- VA.pdf	51.400		Initial	OTH	CHGLTC-T1-VA		1
Letter SCNF_v7_cln_v A.pdf									Previous Version
1 Certificate Holder CH-GLTC04-VA OTH Initial 51.400 GLTC0419 CH ECNF_v6_cln_v A.pdf Previous Version 1 Certificate Holder CH-GLTC04-VA OTH Initial 51.400 GLTC0419 CH ECNF_v6_cln_v A.pdf Previous Version 1 Certificate Holder CH-GLTC04-VA OTH Initial 51.400 GLTC0419 CH ECNF_v6_cln_v A.pdf Previous Version 2 Certificate Holder CH-GLTC04-VA OTH Initial 51.400 GLTC0419 CH ECNF_v4_cln_v A.pdf 2 Certificate Holder CHGLTC-T2-VA OTH Initial 51.200 GLTC19 CH T2-1 Infl Ins ECNF_v1_cln_v A.pdf Previous Version	CH Date Submitte eln_V 06/30/2020 By:	ECNF_v7_cln_V	51.400		Initial	ОТН	CH-GLTC04-VA		1
Letter ECNF_v6_cln_v A.pdf									Previous Version
Certificate Holder Letter CH-GL TC04-VA OTH Initial 51.400 GL TC0419 CH ECNF_ v4_ cln_ v A.pdf CH-GL TC04-VA OTH Initial 51.400 GL TC0419 CH ECNF_ v4_ cln_ v A.pdf CH-GL TC04-VA OTH Initial The second of the seco		ECNF_v6_cln_V	51.400		Initial	OTH	CH-GLTC04-VA		1
Previous Version 1 Certificate Holder Letter Certificate Holder Letter Certificate Holder Letter CHGLTC-T2-VA OTH Initial Initial S1.400 GLTC0419 CH ECNF_v4_cln_V A.pdf CHGLTC-T2-VA OTH Initial 51.200 GLTC19 CH T2-1 Infl Ins ECNF_v1_cln_V A.pdf Previous Version									Previous Version
1 Certificate Holder Letter CH-GLTC04-VA OTH Initial 51.400 GLTC0419 CH ECNF_v4_cIn_V A.pdf 2 Certificate Holder Letter CHGLTC-T2-VA OTH Initial 51.200 GLTC19 CH T2-1 Infl Ins ECNF_v1_cln_V A.pdf Previous Version		ECNF_v6_cln_V	51.400		Initial	ОТН	CH-GLTC04-VA		1
Letter Certificate Holder CHGLTC-T2-VA OTH Initial 51.200 GLTC19 CH T2-2 Infl Ins ECNF_v1_cln_V A.pdf Previous Version									Previous Version
Letter Infl Ins ECNF_v1_cln_V A.pdf		ECNF_v4_cln_V A.pdf	51.400		Initial	ОТН	CH-GLTC04-VA		1
	Date Submitte 07/30/2021 In_V By: Ellen Desrosiers	Infl Ins ECNF_v1_cln_V	51.200		Initial	OTH	CHGLTC-T2-VA	.	2
2 Certificate Holder CHGLTC-T2-VA OTH Initial 51.200 GLTC19 CH T2-									Previous Version
Letter Infl Ins	H T2-2 Date Submitte 05/24/2021		51.200		Initial	ОТН	CHGLTC-T2-VA		?

State: Virginia Filing Company: Unum Life Insurance Company of America

TOI/Sub-TOI: LTC03G Group Long Term Care/LTC03G.001 Qualified

Product Name:2019 GLTC04 RATE INITIATIVE - PHASE IProject Name/Number:2019 GLTC04 RATE INITIATIVE - PHASE I/

Form Schedule	Form Schedule Item Changes							
Item	Form	Form	Form	Form	Action Specific	Readability		
No.	Name	Number	Туре	Action	Data	Score	Attachments	Submitted
1	Certificate Holder Letter	CHGLTC-T1-VA	ОТН	Initial		51.400	ECNF_v1_cln_V	07/30/2021
							ECNF_v1_cln_V A.pdf	Ву:
Previous Version	Previous Version							
2	Certificate Holder Letter	CHGLTC-T2-VA	ОТН	Initial		51.200	GLTC ECNF T2-2 - VA.pdf	Date Submitted: 01/29/2021 By:

No Rate/Rule Schedule items changed.

Supporting Document Schedule Item Changes					
Satisfied - Item:	Sample Certificate Holder Letter				
Comments:					
Attachment(s):	GLTC19 CH T1-2 Infl Ins ECNF_VA-Sample.pdf				
Previous Version					
Satisfied - Item:	Sample Certificate Holder Letter				
Comments:					
Attachment(s):	GLTC19 CH T1-2 Infl Ins ECNF_VA-Sample.pdf				
Previous Version					
Satisfied - Item:	Sample Certificate Holder Letters				
Comments:					
Attachment(s):	GLTC0419 CH ECNF T1-2_Sample_VA.pdf				
Previous Version					
Satisfied - Item:	Sample Certificate Holder Letter				
Comments:					
Attachment(s):	GLTC0419 CH ECNF_v7_sample-VA.pdf				

State: Virginia Filing Company: Unum Life Insurance Company of America

TOI/Sub-TOI: LTC03G Group Long Term Care/LTC03G.001 Qualified

Product Name:2019 GLTC04 RATE INITIATIVE - PHASE IProject Name/Number:2019 GLTC04 RATE INITIATIVE - PHASE I/

Comments:

The letters are now in the final format.

Related Objection 2

Applies To:

- Certificate Holder Letter, CHGLTC-T1-VA (Form)
- Certificate Holder Letter, CHGLTC-T2-VA (Form)
- Sample Certificate Holder Letter (Supporting Document)

Comments: Is it he company's intention to keep the information highlighted in blue and orange in the final form of the letters that will go out to policyholders? If not, please remove the colored highlights.

Changed Items:

State: Virginia Filing Company: Unum Life Insurance Company of America

TOI/Sub-TOI: LTC03G Group Long Term Care/LTC03G.001 Qualified

Letter L				Action Specific	Form	Form	Form		tem
Letter Infil Ins ECNF_v1_cin_V A.pdf	ts Submitted	Attachments	Score	Data	Action	Туре	Number	Name	No.
Certificate Holder CHGLTC-T1-VA OTH Initial 51.400 GLTC19 CH T1-Infl Ins ECNF_V1_cln_V Previous Version Certificate Holder CHGLTC-T1-VA OTH Initial 51.400 GLTC ECNF_T1-2-VA.pdf Previous Version Certificate Holder CH-GLTC04-VA OTH Initial 51.400 GLTC0419 CH ECNF_V7_cln_V A.pdf Previous Version Certificate Holder CH-GLTC04-VA OTH Initial 51.400 GLTC0419 CH ECNF_V7_cln_V A.pdf Previous Version Certificate Holder CH-GLTC04-VA OTH Initial 51.400 GLTC0419 CH ECNF_V7_cln_V A.pdf Previous Version Certificate Holder CH-GLTC04-VA OTH Initial 51.400 GLTC0419 CH ECNF_V6_cln_V A.pdf Previous Version Certificate Holder CH-GLTC04-VA OTH Initial 51.400 GLTC0419 CH ECNF_V6_cln_V A.pdf Previous Version Certificate Holder CH-GLTC04-VA OTH Initial 51.400 GLTC0419 CH ECNF_V6_cln_V A.pdf Certificate Holder CH-GLTC04-VA OTH Initial 51.400 GLTC0419 CH ECNF_V4_cln_V A.pdf Certificate Holder CH-GLTC04-VA OTH Initial 51.400 GLTC0419 CH ECNF_V4_cln_V A.pdf Certificate Holder CH-GLTC04-VA OTH Initial 51.400 GLTC0419 CH ECNF_V4_cln_V A.pdf Certificate Holder CH-GLTC-T2-VA OTH Initial 51.200 GLTC19 CH T2-Initial Ins ECNF_V1_cln_V A.pdf Previous Version	T1-2 Date Submitte 07/30/2021 In_V By: Ellen Desrosiers	Infl Ins ECNF_v1_cln_V	51.400		Initial	OTH	CHGLTC-T1-VA		
Letter Infl Ins ECNF_v1_cln_v Apdr Previous Version Certificate Holder CHGLTC-T1-VA OTH Initial 51.400 GLTC ECNF T1- Letter S1.400 GLTC ECNF T1- Letter S1.400 GLTC0419 CH Certificate Holder CH-GLTC04-VA OTH Initial 51.400 GLTC0419 CH ECNF_v7_cln_v Apdr Previous Version Certificate Holder CH-GLTC04-VA OTH Initial 51.400 GLTC0419 CH ECNF_v6_cln_v Apdr Previous Version Certificate Holder CH-GLTC04-VA OTH Initial 51.400 GLTC0419 CH Letter S1.400 GLTC0419 CH ECNF_v6_cln_v Apdr Previous Version Certificate Holder CH-GLTC04-VA OTH Initial 51.400 GLTC0419 CH Letter S1.400 GLTC0419 CH ECNF_v6_cln_v Apdr Previous Version Certificate Holder CH-GLTC04-VA OTH Initial 51.400 GLTC0419 CH ECNF_v6_cln_v Apdr Certificate Holder CH-GLTC04-VA OTH Initial 51.400 GLTC0419 CH ECNF_v4_cln_v Apdr Certificate Holder CH-GLTC04-VA OTH Initial 51.400 GLTC0419 CH ECNF_v4_cln_v Apdr Certificate Holder CH-GLTC04-VA OTH Initial 51.400 GLTC0419 CH ECNF_v4_cln_v Apdr Certificate Holder CH-GLTC04-VA OTH Initial 51.400 GLTC0419 CH ECNF_v4_cln_v Apdr Certificate Holder CH-GLTC04-VA OTH Initial 51.400 GLTC0419 CH ECNF_v4_cln_v Apdr Certificate Holder CH-GLTC04-VA OTH Initial 51.400 GLTC0419 CH ECNF_v4_cln_v Apdr									Previous Version
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Letter SCNF_v7_cln_v A.pdf									Previous Version
1 Certificate Holder CH-GLTC04-VA OTH Initial 51.400 GLTC0419 CH ECNF_v6_cln_v A.pdf Previous Version 1 Certificate Holder CH-GLTC04-VA OTH Initial 51.400 GLTC0419 CH ECNF_v6_cln_v A.pdf Previous Version 1 Certificate Holder CH-GLTC04-VA OTH Initial 51.400 GLTC0419 CH ECNF_v6_cln_v A.pdf Previous Version 2 Certificate Holder CH-GLTC04-VA OTH Initial 51.400 GLTC0419 CH ECNF_v4_cln_v A.pdf 2 Certificate Holder CHGLTC-T2-VA OTH Initial 51.200 GLTC19 CH T2-1 Infl Ins ECNF_v1_cln_v A.pdf Previous Version	CH Date Submitte eln_V 06/30/2020 By:	ECNF_v7_cln_V	51.400		Initial	ОТН	CH-GLTC04-VA		1
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State: Virginia Filing Company: Unum Life Insurance Company of America

TOI/Sub-TOI: LTC03G Group Long Term Care/LTC03G.001 Qualified

Product Name:2019 GLTC04 RATE INITIATIVE - PHASE IProject Name/Number:2019 GLTC04 RATE INITIATIVE - PHASE I/

Form Schedule	Form Schedule Item Changes							
Item	Form	Form	Form	Form	Action Specific	Readability		
No.	Name	Number	Туре	Action	Data	Score	Attachments	Submitted
1	Certificate Holder Letter	CHGLTC-T1-VA	ОТН	Initial		51.400	GLTC19 CH T1-2 Infl Ins ECNF_v1_cln_V A.pdf	07/30/2021
							ECNF_v1_cln_V A.pdf	Ву:
Previous Version	Previous Version							
2	Certificate Holder Letter	CHGLTC-T2-VA	ОТН	Initial		51.200	GLTC ECNF T2-2 - VA.pdf	Date Submitted: 01/29/2021 By:

No Rate/Rule Schedule items changed.

Supporting Document Schedule Item Changes					
Satisfied - Item:	Sample Certificate Holder Letter				
Comments:					
Attachment(s):	GLTC19 CH T1-2 Infl Ins ECNF_VA-Sample.pdf				
Previous Version					
Satisfied - Item:	Sample Certificate Holder Letter				
Comments:					
Attachment(s):	GLTC19 CH T1-2 Infl Ins ECNF_VA-Sample.pdf				
Previous Version					
Satisfied - Item:	Sample Certificate Holder Letters				
Comments:					
Attachment(s):	GLTC0419 CH ECNF T1-2_Sample_VA.pdf				
Previous Version					
Satisfied - Item:	Sample Certificate Holder Letter				
Comments:					
Attachment(s):	GLTC0419 CH ECNF_v7_sample-VA.pdf				

Conclusion:

State: Virginia Filing Company: Unum Life Insurance Company of America

TOI/Sub-TOI: LTC03G Group Long Term Care/LTC03G.001 Qualified

Product Name:2019 GLTC04 RATE INITIATIVE - PHASE IProject Name/Number:2019 GLTC04 RATE INITIATIVE - PHASE I/

Sincerely,

Ellen Desrosiers

State: Virginia Filing Company: Unum Life Insurance Company of America

TOI/Sub-TOI: LTC03G Group Long Term Care/LTC03G.001 Qualified

Product Name: 2019 GLTC04 RATE INITIATIVE - PHASE I **Project Name/Number:** 2019 GLTC04 RATE INITIATIVE - PHASE I/

Response Letter

Response Letter Status Submitted to State

Response Letter Date 04/13/2021 Submitted Date 04/13/2021

Dear Bobby Toone,

Introduction:

Response 1

Comments:

A Post Submission Update has been submitted with the revised Company Rate Information.

Related Objection 1

Applies To:

- Compound Inflation Rates (current, tier 1, tier 2) VA, [GLTC04, RGLTC04] (Rate)
- Simple Inflation Rates (current, tier 1, tier 2) VA, [GLTC04, RGLTC04] (Rate)

Comments: Please submit a post submission update to revise the Company Rate Information section of the Rate/Rule Schedule to reflect the change in the requested rate increase.

Changed Items:

No Form Schedule items changed.

No Rate/Rule Schedule items changed.

No Supporting Documents changed.

Conclusion:

Sincerely,

Scott Abbott

State: Virginia Filing Company: Unum Life Insurance Company of America

TOI/Sub-TOI: LTC03G Group Long Term Care/LTC03G.001 Qualified

Product Name:2019 GLTC04 RATE INITIATIVE - PHASE IProject Name/Number:2019 GLTC04 RATE INITIATIVE - PHASE I/

Response Letter

Response Letter Status Submitted to State

Response Letter Date 03/12/2021 Submitted Date 03/12/2021

Dear Bobby Toone,

Introduction:

Response 1

Comments:

The updated rates, the additional change request form, updated actuarial memorandum, updated exhibits, objection response, readability certification are attached.

Related Objection 1

Applies To:

- Certificate Holder Letter, CHGLTC-T1-VA (Form)
- Certificate Holder Letter, CHGLTC-T2-VA (Form)
- Sample Certificate Holder Letters (Supporting Document)

Comments: Both policyholder letters and the sample letter seem to imply the requested increase will be implemented over 2 years. There has been no mention of this in any of the rates or actuarial information.

If the company wishes to implement this increase over 2-3 years, please notify the Bureau.

Changed Items:

State: Virginia Filing Company: Unum Life Insurance Company of America

TOI/Sub-TOI: LTC03G Group Long Term Care/LTC03G.001 Qualified

Rate/Rule Sc	Rate/Rule Schedule Item Changes						
Item No.	Document Name	Affected Form Numbers (Separated with commas)	Rate Action	Rate Action Information	Attachments	Date Submitted	
1	Compound Inflation Rates (current, tier 1, tier 2) - VA	GLTC04, RGLTC04	Revised	Previous State Filing Number: rates were filed prior to SERFF Percent Rate Change Request:	Compound Inflation Rates (current, tier 1, tier 2) - VA.xlsx,	03/12/2021 By: Ellen Desrosiers	
Previous Version	on						
1	VA Proposed Rates - GLTC04&RGLTC04 - 2019	GLTC04, RGLTC04	Revised	Previous State Filing Number: rates were filed prior to SERFF Percent Rate Change Request:	VA Proposed Rates - GLTC04&RGLTC04 - 2019.pdf,	12/20/2019 By: Ellen Desrosiers	
Previous Versi	on						
1	VA Proposed Rates - GLTC04&RGLTC04 - 2019	GLTC04, RGLTC04	New		VA Proposed Rates - GLTC04&RGLTC04 - 2019.pdf,	03/28/2019 By: Ellen Desrosiers	
2	Simple Inflation Rates (current, tier 1, tier 2) - VA	GLTC04, RGLTC04	Revised	Previous State Filing Number: rates were filed prior to SERFF Percent Rate Change Request:	Simple Inflation Rates (current, tier 1, tier 2) - VA.xlsx,		

State: Virginia Filing Company: Unum Life Insurance Company of America

TOI/Sub-TOI: LTC03G Group Long Term Care/LTC03G.001 Qualified

upporting Document Schedule Item Changes				
Satisfied - Item:	L&H Actuarial Memorandum			
Comments:				
Attachment(s):	ActMemo - VA.pdf			
Previous Version				
Satisfied - Item:	L&H Actuarial Memorandum			
Comments:				
Attachment(s):	ActMemo - VA.pdf			
Previous Version				
Satisfied - Item:	L&H Actuarial Memorandum			
Comments:				
Attachment(s):	ActMemo - VA.pdf			

State: Virginia Filing Company: Unum Life Insurance Company of America

TOI/Sub-TOI: LTC03G Group Long Term Care/LTC03G.001 Qualified

Supporting Document Scheo	Supporting Document Schedule Item Changes				
Satisfied - Item:	L&H Actuarial Memorandum				
Comments:					
Attachment(s):	ActMemo - VA.pdf				
Previous Version					
Satisfied - Item:	L&H Actuarial Memorandum				
Comments:					
Attachment(s):	ActMemo - VA.pdf				
Previous Version					
Satisfied - Item:	L&H Actuarial Memorandum				
Comments:					
Attachment(s):	ActMemo - VA.pdf				

Satisfied - Item:	Long Term Care Insurance Rate Request Summary
Comments:	
Attachment(s):	Rate Increase Narrative.pdf LTC Rate Request Summary.pdf
Previous Version	
Satisfied - Item:	Long Term Care Insurance Rate Request Summary
Comments:	
Attachment(s):	LTC Rate Request Summary.pdf Rate Increase Narrative.pdf
Previous Version	
Satisfied - Item:	Long Term Care Insurance Rate Request Summary
Comments:	
Attachment(s):	LTC Rate Request Summary.pdf

Filing Company:

Unum Life Insurance Company of America

LTC03G Group Long Term Care/LTC03G.001 Qualified TOI/Sub-TOI:

Product Name: 2019 GLTC04 RATE INITIATIVE - PHASE I Project Name/Number: 2019 GLTC04 RATE INITIATIVE - PHASE I/

Virginia

Supporting Document Schedule Item Changes		
Satisfied - Item:	L&H Actuarial Memorandum	
Comments:		
Attachment(s):	ActMemo - VA.pdf	
Previous Version	Previous Version	
Satisfied - Item:	L&H Actuarial Memorandum	
Comments:		
Attachment(s):	ActMemo - VA.pdf	
Previous Version		
Satisfied - Item:	L&H Actuarial Memorandum	
Comments:		
Attachment(s):	ActMemo - VA.pdf	

Satisfied - Item:	Long Term Care Insurance Rate Request Summary
Comments:	
Attachment(s):	Rate Increase Narrative.pdf LTC Rate Request Summary.pdf
Previous Version	
Satisfied - Item:	Long Term Care Insurance Rate Request Summary
Comments:	
Attachment(s):	LTC Rate Request Summary.pdf Rate Increase Narrative.pdf
Previous Version	
Satisfied - Item:	Long Term Care Insurance Rate Request Summary
Comments:	
Attachment(s):	LTC Rate Request Summary.pdf

Satisfied - Item:	L&H Readability - Health
Comments:	
Attachment(s):	READABILITY CERTIFICATION.pdf
Previous Version	
Satisfied - Item:	L&H Readability - Health
Comments:	

State: Virginia Filing Company: Unum Life Insurance Company of America

TOI/Sub-TOI: LTC03G Group Long Term Care/LTC03G.001 Qualified

Product Name:2019 GLTC04 RATE INITIATIVE - PHASE IProject Name/Number:2019 GLTC04 RATE INITIATIVE - PHASE I/

Attachment(s): READABILITY CERTIFICATION.pdf

Previous Version

Bypassed - Item: L&H Readability - Health

Bypass Reason: n/a
Attachment(s):

Filing Company:

Unum Life Insurance Company of America

LTC03G Group Long Term Care/LTC03G.001 Qualified TOI/Sub-TOI:

Product Name: 2019 GLTC04 RATE INITIATIVE - PHASE I Project Name/Number: 2019 GLTC04 RATE INITIATIVE - PHASE I/

Virginia

Supporting Document Schedule Item Changes		
Satisfied - Item:	L&H Actuarial Memorandum	
Comments:		
Attachment(s):	ActMemo - VA.pdf	
Previous Version	Previous Version	
Satisfied - Item:	L&H Actuarial Memorandum	
Comments:		
Attachment(s):	ActMemo - VA.pdf	
Previous Version		
Satisfied - Item:	L&H Actuarial Memorandum	
Comments:		
Attachment(s):	ActMemo - VA.pdf	

Satisfied - Item:	Long Term Care Insurance Rate Request Summary
Comments:	
Attachment(s):	Rate Increase Narrative.pdf LTC Rate Request Summary.pdf
Previous Version	
Satisfied - Item:	Long Term Care Insurance Rate Request Summary
Comments:	
Attachment(s):	LTC Rate Request Summary.pdf Rate Increase Narrative.pdf
Previous Version	
Satisfied - Item:	Long Term Care Insurance Rate Request Summary
Comments:	
Attachment(s):	LTC Rate Request Summary.pdf

Satisfied - Item:	L&H Readability - Health
Comments:	
Attachment(s):	READABILITY CERTIFICATION.pdf
Previous Version	
Satisfied - Item:	L&H Readability - Health
Comments:	

State: Virginia Filing Company: Unum Life Insurance Company of America

TOI/Sub-TOI: LTC03G Group Long Term Care/LTC03G.001 Qualified

Attachment(s):	READABILITY CERTIFICATION.pdf
Previous Version	
Bypassed - Item:	L&H Readability - Health
Bypass Reason:	n/a
Attachment(s):	

Satisfied - Item:	Exhibit 1a-b - Nationwide Loss Ratio- 2 Tier Rate Incr
Comments:	
Attachment(s):	Exhibit 1a-b - Nationwide Loss Ratio- 2 Tier Rate Incr.pdf Exhibit 1a-b - Nationwide Loss Ratio- 2 Tier Rate Incr.xlsx
Previous Version	
Satisfied - Item:	Exhibit 1(a,b) - Nationwide Loss Ratio
Comments:	
Attachment(s):	Exhibit 1(a,b) - Nationwide Loss Ratio.pdf Exhibit 1(a,b) - Nationwide Loss Ratio.xlsx Exhibit 1.1a-b - Nationwide Loss Ratio.xlsx
Previous Version	
Satisfied - Item:	Exhibit 1(a,b) - Nationwide Loss Ratio
Comments:	
Attachment(s):	Exhibit 1(a,b) - Nationwide Loss Ratio.pdf Exhibit 1(a,b) - Nationwide Loss Ratio.xlsx

Filing Company:

Unum Life Insurance Company of America

LTC03G Group Long Term Care/LTC03G.001 Qualified TOI/Sub-TOI:

Product Name: 2019 GLTC04 RATE INITIATIVE - PHASE I Project Name/Number: 2019 GLTC04 RATE INITIATIVE - PHASE I/

Virginia

Supporting Document Schedule Item Changes		
Satisfied - Item:	L&H Actuarial Memorandum	
Comments:		
Attachment(s):	ActMemo - VA.pdf	
Previous Version	Previous Version	
Satisfied - Item:	L&H Actuarial Memorandum	
Comments:		
Attachment(s):	ActMemo - VA.pdf	
Previous Version		
Satisfied - Item:	L&H Actuarial Memorandum	
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Attachment(s):	ActMemo - VA.pdf	

Satisfied - Item:	Long Term Care Insurance Rate Request Summary
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Satisfied - Item:	Long Term Care Insurance Rate Request Summary
Comments:	
Attachment(s):	LTC Rate Request Summary.pdf

Satisfied - Item:	L&H Readability - Health
Comments:	
Attachment(s):	READABILITY CERTIFICATION.pdf
Previous Version	
Satisfied - Item:	L&H Readability - Health
Comments:	

Company Tracking #: 2019 GLTC04 RATE INITIATIVE - PHASE I SERFF Tracking #: UNUM-131865115 State Tracking #: UNUM-131865115 Unum Life Insurance Company of America State: Virginia Filing Company: TOI/Sub-TOI: LTC03G Group Long Term Care/LTC03G.001 Qualified 2019 GLTC04 RATE INITIATIVE - PHASE I Product Name: Project Name/Number: 2019 GLTC04 RATE INITIATIVE - PHASE I/ Attachment(s): READABILITY CERTIFICATION.pdf Previous Version Bypassed - Item: L&H Readability - Health **Bypass Reason:** n/a Attachment(s): Satisfied - Item: Exhibit 1a-b - Nationwide Loss Ratio- 2 Tier Rate Incr. Comments: Exhibit 1a-b - Nationwide Loss Ratio- 2 Tier Rate Incr.pdf Attachment(s): Exhibit 1a-b - Nationwide Loss Ratio- 2 Tier Rate Incr.xlsx Previous Version Satisfied - Item: Exhibit 1(a,b) - Nationwide Loss Ratio Comments: Exhibit 1(a,b) - Nationwide Loss Ratio.pdf Attachment(s): Exhibit 1(a,b) - Nationwide Loss Ratio.xlsx Exhibit 1.1a-b - Nationwide Loss Ratio.xlsx Previous Version Satisfied - Item: Exhibit 1(a,b) - Nationwide Loss Ratio Comments: Exhibit 1(a,b) - Nationwide Loss Ratio.pdf Attachment(s): Exhibit 1(a,b) - Nationwide Loss Ratio.xlsx Satisfied - Item: Exhibit 2a-b - Virginia Loss Ratios - 2 Tier Rate Incr **Comments:** Exhibit 2a-b - Virginia Loss Ratios - 2 Tier Rate Incr.pdf Attachment(s): Exhibit 2a-b - Virginia Loss Ratios- 2 Tier Rate Incr.xlsx Previous Version Satisfied - Item: Exhibit 2(a,b) - Virginia Loss Ratios Comments: Exhibit 2(a,b) - Virginia Loss Ratios.pdf Attachment(s):

Exhibit 2(a,b) - Virginia Loss Ratios.xlsx

Filing Company:

Unum Life Insurance Company of America

LTC03G Group Long Term Care/LTC03G.001 Qualified TOI/Sub-TOI:

Product Name: 2019 GLTC04 RATE INITIATIVE - PHASE I Project Name/Number: 2019 GLTC04 RATE INITIATIVE - PHASE I/

Virginia

Supporting Document Schedule Item Changes	
Satisfied - Item:	L&H Actuarial Memorandum
Comments:	
Attachment(s):	ActMemo - VA.pdf
Previous Version	
Satisfied - Item:	L&H Actuarial Memorandum
Comments:	
Attachment(s):	ActMemo - VA.pdf
Previous Version	
Satisfied - Item:	L&H Actuarial Memorandum
Comments:	
Attachment(s):	ActMemo - VA.pdf

Satisfied - Item:	Long Term Care Insurance Rate Request Summary
Comments:	
Attachment(s):	Rate Increase Narrative.pdf LTC Rate Request Summary.pdf
Previous Version	
Satisfied - Item:	Long Term Care Insurance Rate Request Summary
Comments:	
Attachment(s):	LTC Rate Request Summary.pdf Rate Increase Narrative.pdf
Previous Version	
Satisfied - Item:	Long Term Care Insurance Rate Request Summary
Comments:	
Attachment(s):	LTC Rate Request Summary.pdf

Satisfied - Item:	L&H Readability - Health
Comments:	
Attachment(s):	READABILITY CERTIFICATION.pdf
Previous Version	
Satisfied - Item:	L&H Readability - Health
Comments:	

ERFF Tracking #:	UNUM-131865115	State Tracking #:	UNUM-131865115	Company Tracking #:	2019 GLTC04 RATE INITIATIVE - PHASE I
ate:	Virginia		Filing Co	mpany: Unum Life Insurai	nce Company of America
DI/Sub-TOI:	LTC03G Group	Long Term Care/LTC03G.00	01 Qualified		
oduct Name:	2019 GLTC04 F	RATE INITIATIVE - PHASE I			
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ypassed - Item:		L&H Readability - Heal	th		
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atisfied - Item:	E	Exhibit 1a-b - Nationwic	de Loss Ratio- 2 Tier Rate	Incr	
omments:					
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revious Version					
atisfied - Item:		Exhibit 1(a,b) - Nationw	vide Loss Ratio		
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ttachment(s):		Exhibit 1(a,b) - Nationw Exhibit 1(a,b) - Nationw Exhibit 1.1a-b - Nationv	vide Loss Ratio.xlsx		
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atisfied - Item:		Exhibit 1(a,b) - Nationw	vide Loss Ratio		
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ttachment(s):		Exhibit 1(a,b) - Nationw Exhibit 1(a,b) - Nationw			
atisfied - Item:	E	Exhibit 2a-b - Virginia L	oss Ratios - 2 Tier Rate In	cr	
omments:					
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revious Version					
atisfied - Item:		Exhibit 2(a,b) - Virginia	Loss Ratios		
omments:					
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State: Virginia Filing Company: Unum Life Insurance Company of America

TOI/Sub-TOI: LTC03G Group Long Term Care/LTC03G.001 Qualified

Product Name:2019 GLTC04 RATE INITIATIVE - PHASE IProject Name/Number:2019 GLTC04 RATE INITIATIVE - PHASE I/

Response 2

Comments:

The updated rates, the additional change request form, updated actuarial memorandum, updated exhibits, objection response, readability certification are attached.

Related Objection 2

Applies To:

- Certificate Holder Letter, CHGLTC-T1-VA (Form)

Comments: In the 4th and 5th paragraphs on page 1 of the letter, please explain why the phrases describing the increase for simple inflation and compound inflation blocks would not be variable. As it is, it could give the impression that all policyholders have both simple and compound inflation protection.

Changed Items:

State: Virginia Filing Company: Unum Life Insurance Company of America

TOI/Sub-TOI: LTC03G Group Long Term Care/LTC03G.001 Qualified

Rate/Rule Sc	Rate/Rule Schedule Item Changes					
Item No.	Document Name	Affected Form Numbers (Separated with commas)	Rate Action	Rate Action Information	Attachments	Date Submitted
1	Compound Inflation Rates (current, tier 1, tier 2) - VA	GLTC04, RGLTC04	Revised	Previous State Filing Number: rates were filed prior to SERFF Percent Rate Change Request:	Compound Inflation Rates (current, tier 1, tier 2) - VA.xlsx,	03/12/2021 By: Ellen Desrosiers
Previous Version	on					
1	VA Proposed Rates - GLTC04&RGLTC04 - 2019	GLTC04, RGLTC04	Revised	Previous State Filing Number: rates were filed prior to SERFF Percent Rate Change Request:	VA Proposed Rates - GLTC04&RGLTC04 - 2019.pdf,	12/20/2019 By: Ellen Desrosiers
Previous Versi	on					
1	VA Proposed Rates - GLTC04&RGLTC04 - 2019	GLTC04, RGLTC04	New		VA Proposed Rates - GLTC04&RGLTC04 - 2019.pdf,	03/28/2019 By: Ellen Desrosiers
2	Simple Inflation Rates (current, tier 1, tier 2) - VA	GLTC04, RGLTC04	Revised	Previous State Filing Number: rates were filed prior to SERFF Percent Rate Change Request:	Simple Inflation Rates (current, tier 1, tier 2) - VA.xlsx,	

State: Virginia Filing Company: Unum Life Insurance Company of America

TOI/Sub-TOI: LTC03G Group Long Term Care/LTC03G.001 Qualified

Supporting Document Schedule Item Changes	
Satisfied - Item:	L&H Actuarial Memorandum
Comments:	
Attachment(s):	ActMemo - VA.pdf
Previous Version	
Satisfied - Item:	L&H Actuarial Memorandum
Comments:	
Attachment(s):	ActMemo - VA.pdf
Previous Version	
Satisfied - Item:	L&H Actuarial Memorandum
Comments:	
Attachment(s):	ActMemo - VA.pdf

State: Virginia Filing Company: Unum Life Insurance Company of America

TOI/Sub-TOI: LTC03G Group Long Term Care/LTC03G.001 Qualified

Supporting Document Schedule Item Changes	
Satisfied - Item:	L&H Actuarial Memorandum
Comments:	
Attachment(s):	ActMemo - VA.pdf
Previous Version	
Satisfied - Item:	L&H Actuarial Memorandum
Comments:	
Attachment(s):	ActMemo - VA.pdf
Previous Version	
Satisfied - Item:	L&H Actuarial Memorandum
Comments:	
Attachment(s):	ActMemo - VA.pdf

Satisfied - Item:	Long Term Care Insurance Rate Request Summary
Comments:	
Attachment(s):	Rate Increase Narrative.pdf LTC Rate Request Summary.pdf
Previous Version	
Satisfied - Item:	Long Term Care Insurance Rate Request Summary
Comments:	
Attachment(s):	LTC Rate Request Summary.pdf Rate Increase Narrative.pdf
Previous Version	
Satisfied - Item:	Long Term Care Insurance Rate Request Summary
Comments:	
Attachment(s):	LTC Rate Request Summary.pdf

Filing Company:

Unum Life Insurance Company of America

LTC03G Group Long Term Care/LTC03G.001 Qualified TOI/Sub-TOI:

Product Name: 2019 GLTC04 RATE INITIATIVE - PHASE I Project Name/Number: 2019 GLTC04 RATE INITIATIVE - PHASE I/

Virginia

Supporting Document Schedule Item Changes	
Satisfied - Item:	L&H Actuarial Memorandum
Comments:	
Attachment(s):	ActMemo - VA.pdf
Previous Version	
Satisfied - Item:	L&H Actuarial Memorandum
Comments:	
Attachment(s):	ActMemo - VA.pdf
Previous Version	
Satisfied - Item:	L&H Actuarial Memorandum
Comments:	
Attachment(s):	ActMemo - VA.pdf

Satisfied - Item:	Long Term Care Insurance Rate Request Summary
Comments:	
Attachment(s):	Rate Increase Narrative.pdf LTC Rate Request Summary.pdf
Previous Version	
Satisfied - Item:	Long Term Care Insurance Rate Request Summary
Comments:	
Attachment(s):	LTC Rate Request Summary.pdf Rate Increase Narrative.pdf
Previous Version	
Satisfied - Item:	Long Term Care Insurance Rate Request Summary
Comments:	
Attachment(s):	LTC Rate Request Summary.pdf

Satisfied - Item:	L&H Readability - Health
Comments:	
Attachment(s):	READABILITY CERTIFICATION.pdf
Previous Version	
Satisfied - Item:	L&H Readability - Health
Comments:	

State: Virginia Filing Company: Unum Life Insurance Company of America

TOI/Sub-TOI: LTC03G Group Long Term Care/LTC03G.001 Qualified

Product Name:2019 GLTC04 RATE INITIATIVE - PHASE IProject Name/Number:2019 GLTC04 RATE INITIATIVE - PHASE I/

Attachment(s): READABILITY CERTIFICATION.pdf

Previous Version

Bypassed - Item: L&H Readability - Health

Bypass Reason: n/a
Attachment(s):

Filing Company:

Unum Life Insurance Company of America

LTC03G Group Long Term Care/LTC03G.001 Qualified TOI/Sub-TOI:

Product Name: 2019 GLTC04 RATE INITIATIVE - PHASE I Project Name/Number: 2019 GLTC04 RATE INITIATIVE - PHASE I/

Virginia

Supporting Document Schedule Item Changes	
Satisfied - Item:	L&H Actuarial Memorandum
Comments:	
Attachment(s):	ActMemo - VA.pdf
Previous Version	
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Previous Version	
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Attachment(s):	LTC Rate Request Summary.pdf Rate Increase Narrative.pdf
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Comments:	
Attachment(s):	LTC Rate Request Summary.pdf

Satisfied - Item:	L&H Readability - Health
Comments:	
Attachment(s):	READABILITY CERTIFICATION.pdf
Previous Version	
Satisfied - Item:	L&H Readability - Health
Comments:	

State: Virginia Filing Company: Unum Life Insurance Company of America

TOI/Sub-TOI: LTC03G Group Long Term Care/LTC03G.001 Qualified

Attachment(s):	READABILITY CERTIFICATION.pdf			
Previous Version				
Bypassed - Item:	L&H Readability - Health			
Bypass Reason:	n/a			
Attachment(s):				

Satisfied - Item:	Exhibit 1a-b - Nationwide Loss Ratio- 2 Tier Rate Incr
Comments:	
Attachment(s):	Exhibit 1a-b - Nationwide Loss Ratio- 2 Tier Rate Incr.pdf Exhibit 1a-b - Nationwide Loss Ratio- 2 Tier Rate Incr.xlsx
Previous Version	
Satisfied - Item:	Exhibit 1(a,b) - Nationwide Loss Ratio
Comments:	
Attachment(s):	Exhibit 1(a,b) - Nationwide Loss Ratio.pdf Exhibit 1(a,b) - Nationwide Loss Ratio.xlsx Exhibit 1.1a-b - Nationwide Loss Ratio.xlsx
Previous Version	
Satisfied - Item:	Exhibit 1(a,b) - Nationwide Loss Ratio
Comments:	
Attachment(s):	Exhibit 1(a,b) - Nationwide Loss Ratio.pdf Exhibit 1(a,b) - Nationwide Loss Ratio.xlsx

Filing Company:

Unum Life Insurance Company of America

LTC03G Group Long Term Care/LTC03G.001 Qualified TOI/Sub-TOI:

Product Name: 2019 GLTC04 RATE INITIATIVE - PHASE I Project Name/Number: 2019 GLTC04 RATE INITIATIVE - PHASE I/

Virginia

Supporting Document Schedule Item Changes		
Satisfied - Item:	L&H Actuarial Memorandum	
Comments:		
Attachment(s):	ActMemo - VA.pdf	
Previous Version		
Satisfied - Item:	L&H Actuarial Memorandum	
Comments:		
Attachment(s):	ActMemo - VA.pdf	
Previous Version		
Satisfied - Item:	L&H Actuarial Memorandum	
Comments:		
Attachment(s):	ActMemo - VA.pdf	

Satisfied - Item:	Long Term Care Insurance Rate Request Summary
Comments:	
Attachment(s):	Rate Increase Narrative.pdf LTC Rate Request Summary.pdf
Previous Version	
Satisfied - Item:	Long Term Care Insurance Rate Request Summary
Comments:	
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Satisfied - Item:	Long Term Care Insurance Rate Request Summary
Comments:	
Attachment(s):	LTC Rate Request Summary.pdf

Satisfied - Item:	L&H Readability - Health
Comments:	
Attachment(s):	READABILITY CERTIFICATION.pdf
Previous Version	
Satisfied - Item:	L&H Readability - Health
Comments:	

Company Tracking #: 2019 GLTC04 RATE INITIATIVE - PHASE I SERFF Tracking #: UNUM-131865115 State Tracking #: UNUM-131865115 Unum Life Insurance Company of America State: Virginia Filing Company: TOI/Sub-TOI: LTC03G Group Long Term Care/LTC03G.001 Qualified 2019 GLTC04 RATE INITIATIVE - PHASE I Product Name: Project Name/Number: 2019 GLTC04 RATE INITIATIVE - PHASE I/ Attachment(s): READABILITY CERTIFICATION.pdf Previous Version Bypassed - Item: L&H Readability - Health **Bypass Reason:** n/a Attachment(s): Satisfied - Item: Exhibit 1a-b - Nationwide Loss Ratio- 2 Tier Rate Incr. Comments: Exhibit 1a-b - Nationwide Loss Ratio- 2 Tier Rate Incr.pdf Attachment(s): Exhibit 1a-b - Nationwide Loss Ratio- 2 Tier Rate Incr.xlsx Previous Version Satisfied - Item: Exhibit 1(a,b) - Nationwide Loss Ratio Comments: Exhibit 1(a,b) - Nationwide Loss Ratio.pdf Attachment(s): Exhibit 1(a,b) - Nationwide Loss Ratio.xlsx Exhibit 1.1a-b - Nationwide Loss Ratio.xlsx Previous Version Satisfied - Item: Exhibit 1(a,b) - Nationwide Loss Ratio Comments: Exhibit 1(a,b) - Nationwide Loss Ratio.pdf Attachment(s): Exhibit 1(a,b) - Nationwide Loss Ratio.xlsx Satisfied - Item: Exhibit 2a-b - Virginia Loss Ratios - 2 Tier Rate Incr **Comments:** Exhibit 2a-b - Virginia Loss Ratios - 2 Tier Rate Incr.pdf Attachment(s): Exhibit 2a-b - Virginia Loss Ratios- 2 Tier Rate Incr.xlsx Previous Version Satisfied - Item: Exhibit 2(a,b) - Virginia Loss Ratios Comments: Exhibit 2(a,b) - Virginia Loss Ratios.pdf Attachment(s):

Exhibit 2(a,b) - Virginia Loss Ratios.xlsx

Filing Company:

Unum Life Insurance Company of America

LTC03G Group Long Term Care/LTC03G.001 Qualified TOI/Sub-TOI:

Product Name: 2019 GLTC04 RATE INITIATIVE - PHASE I Project Name/Number: 2019 GLTC04 RATE INITIATIVE - PHASE I/

Virginia

Supporting Document Schedule Item Changes		
Satisfied - Item:	L&H Actuarial Memorandum	
Comments:		
Attachment(s):	ActMemo - VA.pdf	
Previous Version		
Satisfied - Item:	L&H Actuarial Memorandum	
Comments:		
Attachment(s):	ActMemo - VA.pdf	
Previous Version		
Satisfied - Item:	L&H Actuarial Memorandum	
Comments:		
Attachment(s):	ActMemo - VA.pdf	

Satisfied - Item:	Long Term Care Insurance Rate Request Summary
Comments:	
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Comments:	
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Previous Version	
Satisfied - Item:	Long Term Care Insurance Rate Request Summary
Comments:	
Attachment(s):	LTC Rate Request Summary.pdf

Satisfied - Item:	L&H Readability - Health
Comments:	
Attachment(s):	READABILITY CERTIFICATION.pdf
Previous Version	
Satisfied - Item:	L&H Readability - Health
Comments:	

RFF Tracking #:	UNUM-131865115	State Tracking #:	UNUM-131865115	Company Tracking #:	2019 GLTC04 RATE INITIATIVE - PHASE I
ate:	Virginia		Filing Co.	mpany: Unum Life Insurar	nce Company of America
N/Sub-TOI:	LTC03G Group	Long Term Care/LTC03G.00	01 Qualified		
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oject Name/Number:	2019 GLTC04 F	RATE INITIATIVE - PHASE I,	/		
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ypass Reason:	,	n/a			
ttachment(s):					
atisfied - Item:	E	Exhibit 1a-b - Nationwic	le Loss Ratio- 2 Tier Rate	Incr	
omments:					
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atisfied - Item:		Exhibit 1(a,b) - Nationw	ride Loss Ratio		
omments:					
ttachment(s):		Exhibit 1(a,b) - Nationw Exhibit 1(a,b) - Nationw Exhibit 1.1a-b - Nationv	ide Loss Ratio.xlsx		
revious Version					
atisfied - Item:		Exhibit 1(a,b) - Nationw	ride Loss Ratio		
omments:					
ttachment(s):		Exhibit 1(a,b) - Nationw Exhibit 1(a,b) - Nationw			
atisfied - Item:	E	Exhibit 2a-b - Virginia L	oss Ratios - 2 Tier Rate Inc	cr	
omments:					
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evious Version					
atisfied - Item:		Exhibit 2(a,b) - Virginia	Loss Ratios		
omments:					
ttachment(s):		Exhibit 2(a,b) - Virginia Exhibit 2(a,b) - Virginia			
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atisfied - Item:		Objection Response 3-	12-21		
omments:					
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State: Virginia Filing Company: Unum Life Insurance Company of America

TOI/Sub-TOI: LTC03G Group Long Term Care/LTC03G.001 Qualified

Product Name:2019 GLTC04 RATE INITIATIVE - PHASE IProject Name/Number:2019 GLTC04 RATE INITIATIVE - PHASE I/

Response 3

Comments:

The updated rates, the additional change request form, updated actuarial memorandum, updated exhibits, objection response, readability certification are attached.

Related Objection 3

Applies To:

- Certificate Holder Letter, CHGLTC-T1-VA (Form)

Comments: Please submit a copy of the Request to Change Coverage Form. If the form has been previously approved by the Virginia Bureau, submit it through Supporting Documentation, and include the SERFF tracking number in which the form was originally submitted.

If the form is a new form, submit it through the Forms Schedule for review and approval.

Changed Items:

State: Virginia Filing Company: Unum Life Insurance Company of America

TOI/Sub-TOI: LTC03G Group Long Term Care/LTC03G.001 Qualified

Rate/Rule Sc	hedule Item Changes					
Item No.	Document Name	Affected Form Numbers (Separated with commas)	Rate Action	Rate Action Information	Attachments	Date Submitted
1	Compound Inflation Rates (current, tier 1, tier 2) - VA	GLTC04, RGLTC04	Revised	Previous State Filing Number: rates were filed prior to SERFF Percent Rate Change Request:	Compound Inflation Rates (current, tier 1, tier 2) - VA.xlsx,	03/12/2021 By: Ellen Desrosiers
Previous Version	on					
1	VA Proposed Rates - GLTC04&RGLTC04 - 2019	GLTC04, RGLTC04	Revised	Previous State Filing Number: rates were filed prior to SERFF Percent Rate Change Request:	VA Proposed Rates - GLTC04&RGLTC04 - 2019.pdf,	12/20/2019 By: Ellen Desrosiers
Previous Versi	on					
1	VA Proposed Rates - GLTC04&RGLTC04 - 2019	GLTC04, RGLTC04	New		VA Proposed Rates - GLTC04&RGLTC04 - 2019.pdf,	03/28/2019 By: Ellen Desrosiers
2	Simple Inflation Rates (current, tier 1, tier 2) - VA	GLTC04, RGLTC04	Revised	Previous State Filing Number: rates were filed prior to SERFF Percent Rate Change Request:	Simple Inflation Rates (current, tier 1, tier 2) - VA.xlsx,	

State: Virginia Filing Company: Unum Life Insurance Company of America

TOI/Sub-TOI: LTC03G Group Long Term Care/LTC03G.001 Qualified

Supporting Document Schedule Item Changes		
Satisfied - Item:	L&H Actuarial Memorandum	
Comments:		
Attachment(s):	ActMemo - VA.pdf	
Previous Version		
Satisfied - Item:	L&H Actuarial Memorandum	
Comments:		
Attachment(s):	ActMemo - VA.pdf	
Previous Version		
Satisfied - Item:	L&H Actuarial Memorandum	
Comments:		
Attachment(s):	ActMemo - VA.pdf	

State: Virginia Filing Company: Unum Life Insurance Company of America

TOI/Sub-TOI: LTC03G Group Long Term Care/LTC03G.001 Qualified

Supporting Document Schedule Item Changes		
Satisfied - Item:	L&H Actuarial Memorandum	
Comments:		
Attachment(s):	ActMemo - VA.pdf	
Previous Version		
Satisfied - Item:	L&H Actuarial Memorandum	
Comments:		
Attachment(s):	ActMemo - VA.pdf	
Previous Version		
Satisfied - Item:	L&H Actuarial Memorandum	
Comments:		
Attachment(s):	ActMemo - VA.pdf	

Satisfied - Item:	Long Term Care Insurance Rate Request Summary
Comments:	
Attachment(s):	Rate Increase Narrative.pdf LTC Rate Request Summary.pdf
Previous Version	
Satisfied - Item:	Long Term Care Insurance Rate Request Summary
Comments:	
Attachment(s):	LTC Rate Request Summary.pdf Rate Increase Narrative.pdf
Previous Version	
Satisfied - Item:	Long Term Care Insurance Rate Request Summary
Comments:	
Attachment(s):	LTC Rate Request Summary.pdf

SERFF Tracking #: State Tracking #: Company Tracking #: UNUM-131865115 UNUM-131865115 2019 GLTC04 RATE INITIATIVE - PHASE I

Filing Company:

Unum Life Insurance Company of America

LTC03G Group Long Term Care/LTC03G.001 Qualified TOI/Sub-TOI:

Product Name: 2019 GLTC04 RATE INITIATIVE - PHASE I Project Name/Number: 2019 GLTC04 RATE INITIATIVE - PHASE I/

Virginia

Supporting Document Schedule Item Changes		
Satisfied - Item:	L&H Actuarial Memorandum	
Comments:		
Attachment(s):	ActMemo - VA.pdf	
Previous Version		
Satisfied - Item:	L&H Actuarial Memorandum	
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Previous Version		
Satisfied - Item:	L&H Actuarial Memorandum	
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Attachment(s):	ActMemo - VA.pdf	

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Satisfied - Item:	L&H Readability - Health
Comments:	
Attachment(s):	READABILITY CERTIFICATION.pdf
Previous Version	
Satisfied - Item:	L&H Readability - Health
Comments:	

State: Virginia Filing Company: Unum Life Insurance Company of America

TOI/Sub-TOI: LTC03G Group Long Term Care/LTC03G.001 Qualified

Product Name:2019 GLTC04 RATE INITIATIVE - PHASE IProject Name/Number:2019 GLTC04 RATE INITIATIVE - PHASE I/

Attachment(s): READABILITY CERTIFICATION.pdf

Previous Version

Bypassed - Item: L&H Readability - Health

Bypass Reason: n/a
Attachment(s):

SERFF Tracking #: State Tracking #: Company Tracking #: UNUM-131865115 UNUM-131865115 2019 GLTC04 RATE INITIATIVE - PHASE I

Filing Company:

Unum Life Insurance Company of America

LTC03G Group Long Term Care/LTC03G.001 Qualified TOI/Sub-TOI:

Product Name: 2019 GLTC04 RATE INITIATIVE - PHASE I Project Name/Number: 2019 GLTC04 RATE INITIATIVE - PHASE I/

Virginia

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Satisfied - Item:	L&H Actuarial Memorandum	
Comments:		
Attachment(s):	ActMemo - VA.pdf	

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Satisfied - Item:	L&H Readability - Health
Comments:	
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Previous Version	
Satisfied - Item:	L&H Readability - Health
Comments:	

State: Virginia Filing Company: Unum Life Insurance Company of America

TOI/Sub-TOI: LTC03G Group Long Term Care/LTC03G.001 Qualified

Attachment(s):	READABILITY CERTIFICATION.pdf	
Previous Version		
Bypassed - Item:	L&H Readability - Health	
Bypass Reason:	n/a	
Attachment(s):		

Satisfied - Item:	Exhibit 1a-b - Nationwide Loss Ratio- 2 Tier Rate Incr
Comments:	
Attachment(s):	Exhibit 1a-b - Nationwide Loss Ratio- 2 Tier Rate Incr.pdf Exhibit 1a-b - Nationwide Loss Ratio- 2 Tier Rate Incr.xlsx
Previous Version	
Satisfied - Item:	Exhibit 1(a,b) - Nationwide Loss Ratio
Comments:	
Attachment(s):	Exhibit 1(a,b) - Nationwide Loss Ratio.pdf Exhibit 1(a,b) - Nationwide Loss Ratio.xlsx Exhibit 1.1a-b - Nationwide Loss Ratio.xlsx
Previous Version	
Satisfied - Item:	Exhibit 1(a,b) - Nationwide Loss Ratio
Comments:	
Attachment(s):	Exhibit 1(a,b) - Nationwide Loss Ratio.pdf Exhibit 1(a,b) - Nationwide Loss Ratio.xlsx

SERFF Tracking #: State Tracking #: Company Tracking #: UNUM-131865115 UNUM-131865115 2019 GLTC04 RATE INITIATIVE - PHASE I

Filing Company:

Unum Life Insurance Company of America

LTC03G Group Long Term Care/LTC03G.001 Qualified TOI/Sub-TOI:

Product Name: 2019 GLTC04 RATE INITIATIVE - PHASE I Project Name/Number: 2019 GLTC04 RATE INITIATIVE - PHASE I/

Virginia

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Satisfied - Item:	L&H Readability - Health
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Comments:	

Company Tracking #: 2019 GLTC04 RATE INITIATIVE - PHASE I SERFF Tracking #: UNUM-131865115 State Tracking #: UNUM-131865115 Unum Life Insurance Company of America State: Virginia Filing Company: TOI/Sub-TOI: LTC03G Group Long Term Care/LTC03G.001 Qualified 2019 GLTC04 RATE INITIATIVE - PHASE I Product Name: Project Name/Number: 2019 GLTC04 RATE INITIATIVE - PHASE I/ Attachment(s): READABILITY CERTIFICATION.pdf Previous Version Bypassed - Item: L&H Readability - Health **Bypass Reason:** n/a Attachment(s): Satisfied - Item: Exhibit 1a-b - Nationwide Loss Ratio- 2 Tier Rate Incr. Comments: Exhibit 1a-b - Nationwide Loss Ratio- 2 Tier Rate Incr.pdf Attachment(s): Exhibit 1a-b - Nationwide Loss Ratio- 2 Tier Rate Incr.xlsx Previous Version Satisfied - Item: Exhibit 1(a,b) - Nationwide Loss Ratio Comments: Exhibit 1(a,b) - Nationwide Loss Ratio.pdf Attachment(s): Exhibit 1(a,b) - Nationwide Loss Ratio.xlsx Exhibit 1.1a-b - Nationwide Loss Ratio.xlsx Previous Version Satisfied - Item: Exhibit 1(a,b) - Nationwide Loss Ratio Comments: Exhibit 1(a,b) - Nationwide Loss Ratio.pdf Attachment(s): Exhibit 1(a,b) - Nationwide Loss Ratio.xlsx Satisfied - Item: Exhibit 2a-b - Virginia Loss Ratios - 2 Tier Rate Incr **Comments:** Exhibit 2a-b - Virginia Loss Ratios - 2 Tier Rate Incr.pdf Attachment(s): Exhibit 2a-b - Virginia Loss Ratios- 2 Tier Rate Incr.xlsx Previous Version Satisfied - Item: Exhibit 2(a,b) - Virginia Loss Ratios Comments: Exhibit 2(a,b) - Virginia Loss Ratios.pdf Attachment(s):

Exhibit 2(a,b) - Virginia Loss Ratios.xlsx

SERFF Tracking #: State Tracking #: Company Tracking #: UNUM-131865115 UNUM-131865115 2019 GLTC04 RATE INITIATIVE - PHASE I

Filing Company:

Unum Life Insurance Company of America

LTC03G Group Long Term Care/LTC03G.001 Qualified TOI/Sub-TOI:

Product Name: 2019 GLTC04 RATE INITIATIVE - PHASE I Project Name/Number: 2019 GLTC04 RATE INITIATIVE - PHASE I/

Virginia

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Comments:	

ERFF Tracking #:	UNUM-131865115	State Tracking #:	UNUM-131865115	Company Tracking #:	2019 GLTC04 RATE INITIATIVE - PHASE I
ate:	Virginia		Filing Co	mpany: Unum Life Insurai	nce Company of America
DI/Sub-TOI:	LTC03G Group	Long Term Care/LTC03G.00	01 Qualified		
oduct Name:	2019 GLTC04 F	RATE INITIATIVE - PHASE I			
oject Name/Number:	2019 GLTC04 F	RATE INITIATIVE - PHASE I,	/		
ttachment(s):	,	READABILITY CERTIF	FICATION.pdf		
revious Version					
ypassed - Item:		L&H Readability - Heal	th		
ypass Reason:		n/a			
ttachment(s):					
atisfied - Item:	E	Exhibit 1a-b - Nationwic	de Loss Ratio- 2 Tier Rate	Incr	
omments:					
ttachment(s):	E	Exhibit 1a-b - Nationwic Exhibit 1a-b - Nationwic	de Loss Ratio- 2 Tier Rate de Loss Ratio- 2 Tier Rate	Incr.pdf Incr.xlsx	
revious Version					
atisfied - Item:		Exhibit 1(a,b) - Nationw	vide Loss Ratio		
omments:		, , ,			
ttachment(s):		Exhibit 1(a,b) - Nationw Exhibit 1(a,b) - Nationw Exhibit 1.1a-b - Nationv	vide Loss Ratio.xlsx		
revious Version	'				
atisfied - Item:		Exhibit 1(a,b) - Nationw	vide Loss Ratio		
omments:					
ttachment(s):		Exhibit 1(a,b) - Nationw Exhibit 1(a,b) - Nationw			
atisfied - Item:	E	Exhibit 2a-b - Virginia L	oss Ratios - 2 Tier Rate In	cr	
omments:					
ttachment(s):			oss Ratios - 2 Tier Rate In oss Ratios- 2 Tier Rate Ind		
revious Version					
atisfied - Item:		Exhibit 2(a,b) - Virginia	Loss Ratios		
omments:					
ttachment(s):		Exhibit 2(a,b) - Virginia Exhibit 2(a,b) - Virginia			
		· , · · ·			
atisfied - Item:		Objection Response 3-	12-21		
omments:					
ttachment(s):	(Objection Response.pd	f		

State: Virginia Filing Company: Unum Life Insurance Company of America

TOI/Sub-TOI: LTC03G Group Long Term Care/LTC03G.001 Qualified

Product Name:2019 GLTC04 RATE INITIATIVE - PHASE IProject Name/Number:2019 GLTC04 RATE INITIATIVE - PHASE I/

Response 4

Comments:

The updated rates, the additional change request form, updated actuarial memorandum, updated exhibits, objection response, readability certification are attached.

Related Objection 4

Applies To:

- Long Term Care Insurance Rate Request Summary (Supporting Document)
- VA Proposed Rates GLTC04&RGLTC04 2019, [GLTC04, RGLTC04] (Rate)
- L&H Actuarial Memorandum (Supporting Document)

Comments: We have received the revised rates for this filing. In addition to the Rate/Rule Schedule, the Actuarial Memorandum will also need to be updated to reflect the 2-year implementation as well as the loss ratio exhibits.

The LTC Rate Request Summary will need to be revised to show the new increase amounts (dont need to show both increases, just the total). Please use the revised LTC Rate Request Summary attached below.

UNUM-131895942 will need to be treated the same way. Even though theres only a small change being implemented, it still needs to be documented the same way.

Changed Items:

No Form Schedule items changed.

State: Virginia Filing Company: Unum Life Insurance Company of America

TOI/Sub-TOI: LTC03G Group Long Term Care/LTC03G.001 Qualified

Rate/Rule Schedule Item Changes						
Item No.	Document Name	Affected Form Numbers (Separated with commas)	Rate Action	Rate Action Information	Attachments	Date Submitted
1	Compound Inflation Rates (current, tier 1, tier 2) - VA	GLTC04, RGLTC04	Revised	Previous State Filing Number: rates were filed prior to SERFF Percent Rate Change Request:	Compound Inflation Rates (current, tier 1, tier 2) - VA.xlsx,	03/12/2021 By: Ellen Desrosiers
Previous Version						
1	VA Proposed Rates - GLTC04&RGLTC04 - 2019	GLTC04, RGLTC04	Revised	Previous State Filing Number: rates were filed prior to SERFF Percent Rate Change Request:	VA Proposed Rates - GLTC04&RGLTC04 - 2019.pdf,	12/20/2019 By: Ellen Desrosiers
Previous Version						
1	VA Proposed Rates - GLTC04&RGLTC04 - 2019	GLTC04, RGLTC04	New		VA Proposed Rates - GLTC04&RGLTC04 - 2019.pdf,	03/28/2019 By: Ellen Desrosiers

Supporting Document Schedule Item Changes	
Satisfied - Item:	L&H Actuarial Memorandum
Comments:	
Attachment(s):	ActMemo - VA.pdf
Previous Version	
Satisfied - Item:	L&H Actuarial Memorandum
Comments:	
Attachment(s):	ActMemo - VA.pdf
Previous Version	
Satisfied - Item:	L&H Actuarial Memorandum
Comments:	
Attachment(s):	ActMemo - VA.pdf

Filing Company:

Unum Life Insurance Company of America

TOI/Sub-TOI: LTC03G Group Long Term Care/LTC03G.001 Qualified

ActMemo - VA.pdf

Product Name:2019 GLTC04 RATE INITIATIVE - PHASE IProject Name/Number:2019 GLTC04 RATE INITIATIVE - PHASE I/

Virginia

State:

Comments:
Attachment(s):

Supporting Document S	Supporting Document Schedule Item Changes		
Satisfied - Item:	L&H Actuarial Memorandum		
Comments:			
Attachment(s):	ActMemo - VA.pdf		
Previous Version			
Satisfied - Item:	L&H Actuarial Memorandum		
Comments:			
Attachment(s):	ActMemo - VA.pdf		
Previous Version			
Satisfied - Item:	I &H Actuarial Memorandum		

Satisfied - Item:	Long Term Care Insurance Rate Request Summary
Comments:	
Attachment(s):	Rate Increase Narrative.pdf LTC Rate Request Summary.pdf
Previous Version	
Satisfied - Item:	Long Term Care Insurance Rate Request Summary
Comments:	
Attachment(s):	LTC Rate Request Summary.pdf Rate Increase Narrative.pdf
Previous Version	
Satisfied - Item:	Long Term Care Insurance Rate Request Summary
Comments:	
Attachment(s):	LTC Rate Request Summary.pdf

Conclusion:

Sincerely,

State: Virginia Filing Company: Unum Life Insurance Company of America

TOI/Sub-TOI: LTC03G Group Long Term Care/LTC03G.001 Qualified

Product Name:2019 GLTC04 RATE INITIATIVE - PHASE IProject Name/Number:2019 GLTC04 RATE INITIATIVE - PHASE I/

Response Letter

Response Letter Status Submitted to State

Response Letter Date 02/18/2021 Submitted Date 02/18/2021

Dear Bobby Toone,

Introduction:

Response 1

Comments:

An updated actuarial memorandum is attached.

Related Objection 1

Applies To:

- L&H Actuarial Memorandum (Supporting Document)

Comments: Section 21 of the Actuarial Memorandum states that this rate increase will apply to policies on their anniversary date following a 60-day policyholder notification period.

Virginia Regulation 14VAC5-200-75 D requires that an insurer shall provide notice of an upcoming premium increase at least 75 days prior to the implementation date of the requested increase. Please make the necessary revisions to comply with the regulation.

Changed Items:

No Form Schedule items changed.

No Rate/Rule Schedule items changed.

Supporting Document S	Supporting Document Schedule Item Changes		
Satisfied - Item:	L&H Actuarial Memorandum		
Comments:			
Attachment(s):	ActMemo - VA.pdf		
Previous Version	Previous Version		
Satisfied - Item:	L&H Actuarial Memorandum		
Comments:			
Attachment(s):	ActMemo - VA.pdf		

State: Virginia Filing Company: Unum Life Insurance Company of America

TOI/Sub-TOI: LTC03G Group Long Term Care/LTC03G.001 Qualified

Product Name:2019 GLTC04 RATE INITIATIVE - PHASE IProject Name/Number:2019 GLTC04 RATE INITIATIVE - PHASE I/

Conclusion:

Sincerely,

State: Virginia Filing Company: Unum Life Insurance Company of America

TOI/Sub-TOI: LTC03G Group Long Term Care/LTC03G.001 Qualified

Product Name: 2019 GLTC04 RATE INITIATIVE - PHASE I **Project Name/Number:** 2019 GLTC04 RATE INITIATIVE - PHASE I/

Response Letter

Response Letter Status Submitted to State

Response Letter Date 01/13/2021 Submitted Date 01/13/2021

Dear Bobby Toone,

Introduction:

Response 1

Comments:

Policy forms GLTC04 and RGLTC04 were not part of the 2017 Long-Term Care Annual Report (UNUM-131551857). These policy forms did not support a rate increase as of 12/31/17. Based on an experience study completed in late 2018, we updated our actuarial assumptions. With the assumption update, a rate increase was supported, in aggregate, for these policy forms. Rate increase filings were initiated in 2019 for compound and simple inflation coverage for these policy forms. This information was captured in the 2019 Long-Term Care Annual Report (UNUM-132428089) which notes a pre-rate increase lifetime loss ratio of 84% as of 12/31/19.

Related Objection 1

Applies To:

- L&H Actuarial Memorandum (Supporting Document)

Comments: In your 2017 Long-Term Care Annual Report (UNUM-131551857), premiums were considered sufficient with a nationwide lifetime loss ratio of 119%. Please explain why it is necessary to reach a loss ratio of 70%, when 119% was considered sufficient.

Changed Items:

No Form Schedule items changed.

No Rate/Rule Schedule items changed.

No Supporting Documents changed.

Conclusion:

Sincerely,

State: Virginia Filing Company: Unum Life Insurance Company of America

TOI/Sub-TOI: LTC03G Group Long Term Care/LTC03G.001 Qualified

Product Name:2019 GLTC04 RATE INITIATIVE - PHASE IProject Name/Number:2019 GLTC04 RATE INITIATIVE - PHASE I/

Response Letter

Response Letter Status Submitted to State

Response Letter Date 01/06/2021 Submitted Date 01/06/2021

Dear Bobby Toone,

Introduction:

Response 1

Comments:

We are unable to include an exact website address in the letter template, as these are designed specifically for each policyholder; therefore, the address is unique to each policyholder. As certificateholder letters are generated for those insureds that have coverage under a specific policy, the letters are populated with the link to the infosite unique to that policy. For illustrative purposes only, the sample certificateholder letter provided has been updated to show a sample of an infosite link, which demonstrates the naming convention of those unique infosites created for our policyholders.

Related Objection 1

Applies To:

- Certificate Holder Letter, CH-GLTC04-VA (Form)

Comments: On page 2 of the letter, in the space labeled [include info site link here in bold], please provide the actual weblink the policyholder will use.

Changed Items:

No Form Schedule items changed.

No Rate/Rule Schedule items changed.

Supporting Document Schedule Item Changes		
Satisfied - Item:	mple Certificate Holder Letter	
Comments:		
Attachment(s):	GLTC0419 CH ECNF_v7_sample-VA.pdf	

Conclusion:

Sincerely,

Filing Company:

Unum Life Insurance Company of America

TOI/Sub-TOI: LTC03G Group Long Term Care/LTC03G.001 Qualified

Product Name:2019 GLTC04 RATE INITIATIVE - PHASE IProject Name/Number:2019 GLTC04 RATE INITIATIVE - PHASE I/

Virginia

Response Letter

State:

Response Letter Status Submitted to State

Response Letter Date 10/23/2020 Submitted Date 10/23/2020

Dear Bobby Toone,

Introduction:

Response 1

Comments:

Please see the attached objection responses.

Related Objection 1

Applies To:

- L&H Actuarial Memorandum (Supporting Document)

Comments: The Actuarial memorandum shows that these policies were sold and issued between 2004 and 2012. According to that, the newest policies have been in effect for 8+ years. Please explain why, with all the concern and publicity about long-term care insurance in recent years, it has taken so long to file a rate increase request.

Changed Items:

No Form Schedule items changed.

No Rate/Rule Schedule items changed.

Supporting Document Schedule Item Changes		
Satisfied - Item:	bjection #4 Responses	
Comments:		
Attachment(s):	Objection #4.pdf	

Response 2

Comments:

Please see the attached objection responses.

Related Objection 2

State: Virginia Filing Company: Unum Life Insurance Company of America

TOI/Sub-TOI: LTC03G Group Long Term Care/LTC03G.001 Qualified

Product Name:2019 GLTC04 RATE INITIATIVE - PHASE IProject Name/Number:2019 GLTC04 RATE INITIATIVE - PHASE I/

Comments: Virginia Regulation 14VAC5-200-125 requires that every insurer shall report to the commission premium rates for all long-term care insurance policies. We could find no record that any annual report had ever been filed for these policy forms (GLTC04 and RGLTC04). Please explain why no annual reports have been filed for these policy forms.

Changed Items:

No Form Schedule items changed.

No Rate/Rule Schedule items changed.

Supporting Document Schedule Item Changes		
Satisfied - Item:	ojection #4 Responses	
Comments:		
Attachment(s):	Objection #4.pdf	

Response 3

Comments:

Please see the attached objection responses.

Related Objection 3

Comments: Please state if there are any other blocks that have not had annual reports filed in any year.

Changed Items:

No Form Schedule items changed.

No Rate/Rule Schedule items changed.

Supporting Document Schedule Item Changes		
Satisfied - Item:	pjection #4 Responses	
Comments:		
Attachment(s):	Objection #4.pdf	

Conclusion:

Sincerely,

State: Virginia Filing Company: Unum Life Insurance Company of America

TOI/Sub-TOI: LTC03G Group Long Term Care/LTC03G.001 Qualified

Product Name:2019 GLTC04 RATE INITIATIVE - PHASE IProject Name/Number:2019 GLTC04 RATE INITIATIVE - PHASE I/

Response Letter

Response Letter Status Submitted to State

Response Letter Date 04/13/2020 Submitted Date 04/13/2020

Dear Bobby Toone,

Introduction:

Response 1

Comments:

Please see the attached updated exhibit 3 and the objection response dated 4-13-20.

Related Objection 1

Applies To:

- L&H Actuarial Memorandum (Supporting Document)

Comments: 1.Please provide the active life reserve balance on a nationwide basis as of 12/31/2018, separately for the policies with compound inflation and simple inflation.

2.Please provide the calculation and data which you used in response to Objection 5 of the 2/19/2020 Objection Letter. We were unable to match the nationwide average rate increase values using the data in Exhibit 3.

Changed Items:

No Form Schedule items changed.

No Rate/Rule Schedule items changed.

Supporting Document Schedule Item Changes		
Satisfied - Item:	EXHIBIT 3 - Nationwide Filing Status	
Comments:		
Attachment(s):	Exhibit 3 - Current Nationwide Filing Status.xlsx	
Previous Version		
Satisfied - Item:	EXHIBIT 3 - Nationwide Filing Status	
Comments:		
Attachment(s):	EXHIBIT 3 - Nationwide Filing Status.xlsx	

State: Virginia Filing Company: Unum Life Insurance Company of America

VA - 2019 GLTC04 Objection Response 4-13-20

VA - 2019 GLTC04 Objection Response 4-13-20.pdf

TOI/Sub-TOI: LTC03G Group Long Term Care/LTC03G.001 Qualified

Product Name:2019 GLTC04 RATE INITIATIVE - PHASE IProject Name/Number:2019 GLTC04 RATE INITIATIVE - PHASE I/

Supporting Document Schedule Item Changes			
Satisfied - Item:	EXHIBIT 3 - Nationwide Filing Status		
Comments:			
Attachment(s):	Exhibit 3 - Current Nationwide Filing Status.xlsx		
Previous Version			
Satisfied - Item:	EXHIBIT 3 - Nationwide Filing Status		
Comments:			
Attachment(s):	EXHIBIT 3 - Nationwide Filing Status.xlsx		

Attachment(s): Conclusion:

Satisfied - Item:

Comments:

Sincerely,

State: Virginia Filing Company: Unum Life Insurance Company of America

TOI/Sub-TOI: LTC03G Group Long Term Care/LTC03G.001 Qualified

Product Name:2019 GLTC04 RATE INITIATIVE - PHASE IProject Name/Number:2019 GLTC04 RATE INITIATIVE - PHASE I/

Response Letter

Response Letter Status Submitted to State

Response Letter Date 03/22/2020 Submitted Date 03/22/2020

Dear Bobby Toone,

Introduction:

Response 1

Comments:

Please see the attached forms, statement of variability, certificate of readability with the requested updates.

Related Objection 1

Applies To:

- Certificate Amendment Contingent Non-Forfeiture Benefit, 04CNF19G-VA (Form)
- Certificate Amendment Enhanced Contingent Non-Forfeiture Benefit, 04ECNF19G-APO-VA (Form)

Comments: Please provide us with the certification of readability required by 14 VAC 5-110-60.

Changed Items:

State: Virginia Filing Company: Unum Life Insurance Company of America

TOI/Sub-TOI: LTC03G Group Long Term Care/LTC03G.001 Qualified

Product Name:2019 GLTC04 RATE INITIATIVE - PHASE IProject Name/Number:2019 GLTC04 RATE INITIATIVE - PHASE I/

Form Sch	Form Schedule Item Changes							
Item	Form	Form	Form	Form	Action Specific	Readability		
No.	Name	Number	Туре	Action	Data	Score	Attachments	Submitted
1	Certificate Amendment - Contingent Non- Forfeiture Benefit	04CNF19G-VA	CERA	Initial		41.200	GLTC04 CNF Form_v2_cln - 04CNF19G- VA.pdf	Date Submitted: 03/22/2020 By: Ellen Desrosiers
Previous Ve	ersion							
1	Certificate Amendment - Contingent Non- Forfeiture Benefit	04CNF19G-VA	CERA	Initial			GLTC04 CNF Form - 04CNF19G- VA.pdf	Date Submitted: 03/28/2019 By: Ellen Desrosiers
2	Certificate Amendment - Enhanced Contingent Non- Forfeiture Benefit	04ECNF19G- APO-VA	CERA	Initial		41.100	GLTC04 ECNF Form_v2_cln- 04ECNF19G- APO-VA.pdf	Date Submitted: 03/22/2020 By: Ellen Desrosiers
Previous Ve	ersion							
2	Certificate Amendment - Enhanced Contingent Non- Forfeiture Benefit	04ECNF19G- APO-VA	CERA	Initial			GLTC04 ECNF Form- 04ECNF19G- APO-VA.pdf	Date Submitted: 03/28/2019 By: Ellen Desrosiers
3	Frequently Asked Questions	VA-GLTC04-FAQ	ОТН	Initial		47.600	GLTC0419 CH FAQ ECNF- VA.pdf	Date Submitted: 03/22/2020 By: Ellen Desrosiers
4	Certificate Holder Letter	CH-GLTC04-VA	ОТН	Initial		51.400	GLTC0419 CH ECNF_v4_cln_V A.pdf	Date Submitted: 03/22/2020 By: Ellen Desrosiers

No Rate/Rule Schedule items changed.

Filing Company:

Unum Life Insurance Company of America

TOI/Sub-TOI: LTC03G Group Long Term Care/LTC03G.001 Qualified

Product Name:2019 GLTC04 RATE INITIATIVE - PHASE IProject Name/Number:2019 GLTC04 RATE INITIATIVE - PHASE I/

Virginia

Supporting Document Schedule Item Changes				
Satisfied - Item:	LTC0419 CH ECNF_v4_cln_VA			
Comments:	nis has been moved to the form schedule tab per your request.			
Attachment(s):				
Previous Version				
Satisfied - Item:	GLTC0419 CH ECNF_v4_cln_VA			
Comments:				
Attachment(s):	GLTC0419 CH ECNF_v4_cln_VA.pdf			
Previous Version				
Satisfied - Item:	GLTC0419 CH ECNF_v2_cln_VA			
Comments:				
Attachment(s):	GLTC0419 CH ECNF_v3_cln_VA.pdf			
Previous Version				
Satisfied - Item:	GLTC0419 CH ECNF_v2_cln_VA			
Comments:				
Attachment(s):	GLTC0419 CH ECNF_v2_cln_VA.pdf			

Filing Company:

Unum Life Insurance Company of America

TOI/Sub-TOI: LTC03G Group Long Term Care/LTC03G.001 Qualified

Product Name:2019 GLTC04 RATE INITIATIVE - PHASE IProject Name/Number:2019 GLTC04 RATE INITIATIVE - PHASE I/

Virginia

Supporting Document School	edule Item Changes		
Satisfied - Item:	GLTC0419 CH ECNF_v4_cln_VA		
Comments:	This has been moved to the form schedule tab per your request.		
Attachment(s):			
Previous Version			
Satisfied - Item:	GLTC0419 CH ECNF_v4_cln_VA		
Comments:			
Attachment(s):	GLTC0419 CH ECNF_v4_cln_VA.pdf		
Previous Version			
Satisfied - Item:	GLTC0419 CH ECNF_v2_cln_VA		
Comments:			
Attachment(s):	GLTC0419 CH ECNF_v3_cln_VA.pdf		
Previous Version			
Satisfied - Item:	GLTC0419 CH ECNF_v2_cln_VA		
Comments:			
Attachment(s):	GLTC0419 CH ECNF_v2_cln_VA.pdf		

Satisfied - Item:	GLTC0419 CH FAQ ECNF-VA
Comments:	This has been moved to the form schedule tab per your request.
Attachment(s):	
Previous Version	
Satisfied - Item:	GLTC0419 CH FAQ ECNF-VA
Comments:	
Attachment(s):	GLTC0419 CH FAQ ECNF-VA.pdf

State: Virginia Filing Company: Unum Life Insurance Company of America

TOI/Sub-TOI: LTC03G Group Long Term Care/LTC03G.001 Qualified

Supporting Document So	hedule Item Changes		
Satisfied - Item:	LTC0419 CH ECNF_v4_cln_VA		
Comments:	This has been moved to the form schedule tab per your request.		
Attachment(s):			
Previous Version			
Satisfied - Item:	GLTC0419 CH ECNF_v4_cln_VA		
Comments:			
Attachment(s):	GLTC0419 CH ECNF_v4_cln_VA.pdf		
Previous Version			
Satisfied - Item:	GLTC0419 CH ECNF_v2_cln_VA		
Comments:			
Attachment(s):	GLTC0419 CH ECNF_v3_cln_VA.pdf		
Previous Version			
Satisfied - Item:	GLTC0419 CH ECNF_v2_cln_VA		
Comments:			
Attachment(s):	GLTC0419 CH ECNF_v2_cln_VA.pdf		

GLTC0419 CH FAQ ECNF-VA		
his has been moved to the form schedule tab per your request.		
GLTC0419 CH FAQ ECNF-VA		
GLTC0419 CH FAQ ECNF-VA.pdf		
&H Readability - Health		
EADABILITY CERTIFICATION.pdf		
&H Readability - Health		
Va		
8 8		

State: Virginia Filing Company: Unum Life Insurance Company of America

TOI/Sub-TOI: LTC03G Group Long Term Care/LTC03G.001 Qualified

Product Name:2019 GLTC04 RATE INITIATIVE - PHASE IProject Name/Number:2019 GLTC04 RATE INITIATIVE - PHASE I/

Response 2

Comments:

Please see the attached forms, statement of variability, certificate of readability with the requested updates.

Related Objection 2

Applies To:

- Certificate Amendment Contingent Non-Forfeiture Benefit, 04CNF19G-VA (Form)
- Certificate Amendment Enhanced Contingent Non-Forfeiture Benefit, 04ECNF19G-APO-VA (Form)

Comments: 14 VAC 5-100-50 2 requires that the full and proper corporate name appear prominently on the form. The logo should not appear more prominently than the corporate name, and the font size of the corporate name should not be smaller than other text.

Changed Items:

State: Virginia Filing Company: Unum Life Insurance Company of America

TOI/Sub-TOI: LTC03G Group Long Term Care/LTC03G.001 Qualified

Product Name:2019 GLTC04 RATE INITIATIVE - PHASE IProject Name/Number:2019 GLTC04 RATE INITIATIVE - PHASE I/

Form Sch	Form Schedule Item Changes							
Item	Form	Form	Form	Form	Action Specific	Readability		
No.	Name	Number	Туре	Action	Data	Score	Attachments	Submitted
1	Certificate Amendment - Contingent Non- Forfeiture Benefit	04CNF19G-VA	CERA	Initial		41.200	GLTC04 CNF Form_v2_cln - 04CNF19G- VA.pdf	Date Submitted: 03/22/2020 By: Ellen Desrosiers
Previous Ve	ersion							
1	Certificate Amendment - Contingent Non- Forfeiture Benefit	04CNF19G-VA	CERA	Initial			GLTC04 CNF Form - 04CNF19G- VA.pdf	Date Submitted: 03/28/2019 By: Ellen Desrosiers
2	Certificate Amendment - Enhanced Contingent Non- Forfeiture Benefit	04ECNF19G- APO-VA	CERA	Initial		41.100	GLTC04 ECNF Form_v2_cln- 04ECNF19G- APO-VA.pdf	Date Submitted: 03/22/2020 By: Ellen Desrosiers
Previous Ve	ersion							
2	Certificate Amendment - Enhanced Contingent Non- Forfeiture Benefit	04ECNF19G- APO-VA	CERA	Initial			GLTC04 ECNF Form- 04ECNF19G- APO-VA.pdf	Date Submitted: 03/28/2019 By: Ellen Desrosiers
3	Frequently Asked Questions	VA-GLTC04-FAQ	ОТН	Initial		47.600	GLTC0419 CH FAQ ECNF- VA.pdf	Date Submitted: 03/22/2020 By: Ellen Desrosiers
4	Certificate Holder Letter	CH-GLTC04-VA	OTH	Initial		51.400	GLTC0419 CH ECNF_v4_cln_V A.pdf	Date Submitted: 03/22/2020 By: Ellen Desrosiers

No Rate/Rule Schedule items changed.

Filing Company:

Unum Life Insurance Company of America

TOI/Sub-TOI: LTC03G Group Long Term Care/LTC03G.001 Qualified

Product Name:2019 GLTC04 RATE INITIATIVE - PHASE IProject Name/Number:2019 GLTC04 RATE INITIATIVE - PHASE I/

Virginia

Supporting Document Schedule Item Changes				
Satisfied - Item:	GLTC0419 CH ECNF_v4_cln_VA			
Comments:	This has been moved to the form schedule tab per your request.			
Attachment(s):				
Previous Version				
Satisfied - Item:	GLTC0419 CH ECNF_v4_cln_VA			
Comments:				
Attachment(s):	GLTC0419 CH ECNF_v4_cln_VA.pdf			
Previous Version				
Satisfied - Item:	GLTC0419 CH ECNF_v2_cln_VA			
Comments:				
Attachment(s):	GLTC0419 CH ECNF_v3_cln_VA.pdf			
Previous Version				
Satisfied - Item:	GLTC0419 CH ECNF_v2_cln_VA			
Comments:				
Attachment(s):	GLTC0419 CH ECNF_v2_cln_VA.pdf			

Filing Company:

Unum Life Insurance Company of America

TOI/Sub-TOI: LTC03G Group Long Term Care/LTC03G.001 Qualified

Product Name:2019 GLTC04 RATE INITIATIVE - PHASE IProject Name/Number:2019 GLTC04 RATE INITIATIVE - PHASE I/

Virginia

Supporting Document Schedule Item Changes				
Satisfied - Item:	GLTC0419 CH ECNF_v4_cln_VA			
Comments:	This has been moved to the form schedule tab per your request.			
Attachment(s):				
Previous Version				
Satisfied - Item:	GLTC0419 CH ECNF_v4_cln_VA			
Comments:				
Attachment(s):	GLTC0419 CH ECNF_v4_cln_VA.pdf			
Previous Version				
Satisfied - Item:	GLTC0419 CH ECNF_v2_cln_VA			
Comments:				
Attachment(s):	GLTC0419 CH ECNF_v3_cln_VA.pdf			
Previous Version				
Satisfied - Item:	GLTC0419 CH ECNF_v2_cln_VA			
Comments:				
Attachment(s):	GLTC0419 CH ECNF_v2_cln_VA.pdf			

Satisfied - Item:	GLTC0419 CH FAQ ECNF-VA			
Comments:	This has been moved to the form schedule tab per your request.			
Attachment(s):				
Previous Version				
Satisfied - Item:	GLTC0419 CH FAQ ECNF-VA			
Comments:				
Attachment(s):	GLTC0419 CH FAQ ECNF-VA.pdf			

State: Virginia Filing Company: Unum Life Insurance Company of America

TOI/Sub-TOI: LTC03G Group Long Term Care/LTC03G.001 Qualified

Supporting Document So	Supporting Document Schedule Item Changes			
Satisfied - Item:	GLTC0419 CH ECNF_v4_cln_VA			
Comments:	This has been moved to the form schedule tab per your request.			
Attachment(s):				
Previous Version				
Satisfied - Item:	GLTC0419 CH ECNF_v4_cln_VA			
Comments:				
Attachment(s):	GLTC0419 CH ECNF_v4_cln_VA.pdf			
Previous Version				
Satisfied - Item:	GLTC0419 CH ECNF_v2_cln_VA			
Comments:				
Attachment(s):	GLTC0419 CH ECNF_v3_cln_VA.pdf			
Previous Version				
Satisfied - Item:	GLTC0419 CH ECNF_v2_cln_VA			
Comments:				
Attachment(s):	GLTC0419 CH ECNF_v2_cln_VA.pdf			

This has been moved to the form schedule tab per your request.			
GLTC0419 CH FAQ ECNF-VA			
GLTC0419 CH FAQ ECNF-VA.pdf			
&H Readability - Health			
EADABILITY CERTIFICATION.pdf			
&H Readability - Health			
Va			
8 8			

State: Virginia Filing Company: Unum Life Insurance Company of America

TOI/Sub-TOI: LTC03G Group Long Term Care/LTC03G.001 Qualified

Product Name:2019 GLTC04 RATE INITIATIVE - PHASE IProject Name/Number:2019 GLTC04 RATE INITIATIVE - PHASE I/

Response 3

Comments:

Please see the attached forms, statement of variability, certificate of readability with the requested updates.

Related Objection 3

Applies To:

- Certificate Amendment Contingent Non-Forfeiture Benefit, 04CNF19G-VA (Form)
- Certificate Amendment Enhanced Contingent Non-Forfeiture Benefit, 04ECNF19G-APO-VA (Form)

Comments: Please advise if the street address, the officers signature, and the officers title are intended to be variable. If so, the fields should be bracketed and described in a statement of variability (SOV).

Changed Items:

State: Virginia Filing Company: Unum Life Insurance Company of America

TOI/Sub-TOI: LTC03G Group Long Term Care/LTC03G.001 Qualified

Product Name:2019 GLTC04 RATE INITIATIVE - PHASE IProject Name/Number:2019 GLTC04 RATE INITIATIVE - PHASE I/

Form Sch	Form Schedule Item Changes							
Item	Form	Form	Form	Form	Action Specific	Readability		
No.	Name	Number	Туре	Action	Data	Score	Attachments	Submitted
1	Certificate Amendment - Contingent Non- Forfeiture Benefit	04CNF19G-VA	CERA	Initial		41.200	GLTC04 CNF Form_v2_cln - 04CNF19G- VA.pdf	Date Submitted: 03/22/2020 By: Ellen Desrosiers
Previous Ve	ersion							
1	Certificate Amendment - Contingent Non- Forfeiture Benefit	04CNF19G-VA	CERA	Initial			GLTC04 CNF Form - 04CNF19G- VA.pdf	Date Submitted: 03/28/2019 By: Ellen Desrosiers
2	Certificate Amendment - Enhanced Contingent Non- Forfeiture Benefit	04ECNF19G- APO-VA	CERA	Initial		41.100	GLTC04 ECNF Form_v2_cln- 04ECNF19G- APO-VA.pdf	Date Submitted: 03/22/2020 By: Ellen Desrosiers
Previous Ve	ersion							
2	Certificate Amendment - Enhanced Contingent Non- Forfeiture Benefit	04ECNF19G- APO-VA	CERA	Initial			GLTC04 ECNF Form- 04ECNF19G- APO-VA.pdf	Date Submitted: 03/28/2019 By: Ellen Desrosiers
3	Frequently Asked Questions	VA-GLTC04-FAQ	ОТН	Initial		47.600	GLTC0419 CH FAQ ECNF- VA.pdf	Date Submitted: 03/22/2020 By: Ellen Desrosiers
4	Certificate Holder Letter	CH-GLTC04-VA	OTH	Initial		51.400	GLTC0419 CH ECNF_v4_cln_V A.pdf	Date Submitted: 03/22/2020 By: Ellen Desrosiers

No Rate/Rule Schedule items changed.

Filing Company:

Unum Life Insurance Company of America

TOI/Sub-TOI: LTC03G Group Long Term Care/LTC03G.001 Qualified

Product Name:2019 GLTC04 RATE INITIATIVE - PHASE IProject Name/Number:2019 GLTC04 RATE INITIATIVE - PHASE I/

Virginia

Supporting Document Schedule Item Changes				
Satisfied - Item:	GLTC0419 CH ECNF_v4_cln_VA			
Comments:	This has been moved to the form schedule tab per your request.			
Attachment(s):				
Previous Version				
Satisfied - Item:	GLTC0419 CH ECNF_v4_cln_VA			
Comments:				
Attachment(s):	GLTC0419 CH ECNF_v4_cln_VA.pdf			
Previous Version				
Satisfied - Item:	GLTC0419 CH ECNF_v2_cln_VA			
Comments:				
Attachment(s):	GLTC0419 CH ECNF_v3_cln_VA.pdf			
Previous Version				
Satisfied - Item:	GLTC0419 CH ECNF_v2_cln_VA			
Comments:				
Attachment(s):	GLTC0419 CH ECNF_v2_cln_VA.pdf			

Filing Company:

Unum Life Insurance Company of America

TOI/Sub-TOI: LTC03G Group Long Term Care/LTC03G.001 Qualified

Product Name:2019 GLTC04 RATE INITIATIVE - PHASE IProject Name/Number:2019 GLTC04 RATE INITIATIVE - PHASE I/

Virginia

Supporting Document Schedule Item Changes			
Satisfied - Item:	GLTC0419 CH ECNF_v4_cln_VA		
Comments:	This has been moved to the form schedule tab per your request.		
Attachment(s):			
Previous Version			
Satisfied - Item:	GLTC0419 CH ECNF_v4_cln_VA		
Comments:			
Attachment(s):	GLTC0419 CH ECNF_v4_cln_VA.pdf		
Previous Version			
Satisfied - Item:	GLTC0419 CH ECNF_v2_cln_VA		
Comments:			
Attachment(s):	GLTC0419 CH ECNF_v3_cln_VA.pdf		
Previous Version			
Satisfied - Item:	GLTC0419 CH ECNF_v2_cln_VA		
Comments:			
Attachment(s):	GLTC0419 CH ECNF_v2_cln_VA.pdf		

Satisfied - Item:	GLTC0419 CH FAQ ECNF-VA			
Comments:	This has been moved to the form schedule tab per your request.			
Attachment(s):				
Previous Version				
Satisfied - Item:	GLTC0419 CH FAQ ECNF-VA			
Comments:				
Attachment(s):	GLTC0419 CH FAQ ECNF-VA.pdf			

State: Virginia Filing Company: Unum Life Insurance Company of America

TOI/Sub-TOI: LTC03G Group Long Term Care/LTC03G.001 Qualified

Supporting Document Schedule Item Changes			
Satisfied - Item:	GLTC0419 CH ECNF_v4_cln_VA		
Comments:	This has been moved to the form schedule tab per your request.		
Attachment(s):			
Previous Version			
Satisfied - Item:	GLTC0419 CH ECNF_v4_cln_VA		
Comments:			
Attachment(s):	GLTC0419 CH ECNF_v4_cln_VA.pdf		
Previous Version			
Satisfied - Item:	GLTC0419 CH ECNF_v2_cln_VA		
Comments:			
Attachment(s):	GLTC0419 CH ECNF_v3_cln_VA.pdf		
Previous Version			
Satisfied - Item:	GLTC0419 CH ECNF_v2_cln_VA		
Comments:			
Attachment(s):	GLTC0419 CH ECNF_v2_cln_VA.pdf		

his has been moved to the form schedule tab per your request.
GLTC0419 CH FAQ ECNF-VA
GLTC0419 CH FAQ ECNF-VA.pdf
&H Readability - Health
EADABILITY CERTIFICATION.pdf
&H Readability - Health
Va
8 8

State: Virginia Filing Company: Unum Life Insurance Company of America

TOI/Sub-TOI: LTC03G Group Long Term Care/LTC03G.001 Qualified

Product Name:2019 GLTC04 RATE INITIATIVE - PHASE IProject Name/Number:2019 GLTC04 RATE INITIATIVE - PHASE I/

Response 4

Comments:

Please see the attached forms, statement of variability, certificate of readability with the requested updates.

Related Objection 4

Applies To:

- Certificate Amendment Contingent Non-Forfeiture Benefit, 04CNF19G-VA (Form)
- Certificate Amendment Enhanced Contingent Non-Forfeiture Benefit, 04ECNF19G-APO-VA (Form)

Comments: The form contains variable fields. Even though the fields are self-explanatory, please provide us with a SOV that describes how these fields are subject to change.

Changed Items:

State: Virginia Filing Company: Unum Life Insurance Company of America

TOI/Sub-TOI: LTC03G Group Long Term Care/LTC03G.001 Qualified

Product Name:2019 GLTC04 RATE INITIATIVE - PHASE IProject Name/Number:2019 GLTC04 RATE INITIATIVE - PHASE I/

Form Schedule Item Changes								
Item	Form	Form	Form	Form	Action Specific	Readability		
No.	Name	Number	Туре	Action	Data	Score	Attachments	Submitted
1	Certificate Amendment - Contingent Non- Forfeiture Benefit	04CNF19G-VA	CERA	Initial		41.200	GLTC04 CNF Form_v2_cln - 04CNF19G- VA.pdf	Date Submitted: 03/22/2020 By: Ellen Desrosiers
Previous Ve	ersion							
1	Certificate Amendment - Contingent Non- Forfeiture Benefit	04CNF19G-VA	CERA	Initial			GLTC04 CNF Form - 04CNF19G- VA.pdf	Date Submitted: 03/28/2019 By: Ellen Desrosiers
2	Certificate Amendment - Enhanced Contingent Non- Forfeiture Benefit	04ECNF19G- APO-VA	CERA	Initial		41.100	GLTC04 ECNF Form_v2_cln- 04ECNF19G- APO-VA.pdf	Date Submitted: 03/22/2020 By: Ellen Desrosiers
Previous Ve	ersion							
2	Certificate Amendment - Enhanced Contingent Non- Forfeiture Benefit	04ECNF19G- APO-VA	CERA	Initial			GLTC04 ECNF Form- 04ECNF19G- APO-VA.pdf	Date Submitted: 03/28/2019 By: Ellen Desrosiers
3	Frequently Asked Questions	VA-GLTC04-FAQ	ОТН	Initial		47.600	GLTC0419 CH FAQ ECNF- VA.pdf	Date Submitted: 03/22/2020 By: Ellen Desrosiers
4	Certificate Holder Letter	CH-GLTC04-VA	ОТН	Initial		51.400	GLTC0419 CH ECNF_v4_cln_V A.pdf	Date Submitted: 03/22/2020 By: Ellen Desrosiers

Filing Company:

Unum Life Insurance Company of America

TOI/Sub-TOI: LTC03G Group Long Term Care/LTC03G.001 Qualified

Product Name:2019 GLTC04 RATE INITIATIVE - PHASE IProject Name/Number:2019 GLTC04 RATE INITIATIVE - PHASE I/

Virginia

Supporting Document Schedule Item Changes		
Satisfied - Item:	GLTC0419 CH ECNF_v4_cln_VA	
Comments:	This has been moved to the form schedule tab per your request.	
Attachment(s):		
Previous Version		
Satisfied - Item:	GLTC0419 CH ECNF_v4_cln_VA	
Comments:		
Attachment(s):	GLTC0419 CH ECNF_v4_cln_VA.pdf	
Previous Version		
Satisfied - Item:	GLTC0419 CH ECNF_v2_cln_VA	
Comments:		
Attachment(s):	GLTC0419 CH ECNF_v3_cln_VA.pdf	
Previous Version		
Satisfied - Item:	GLTC0419 CH ECNF_v2_cln_VA	
Comments:		
Attachment(s):	GLTC0419 CH ECNF_v2_cln_VA.pdf	

Filing Company:

Unum Life Insurance Company of America

TOI/Sub-TOI: LTC03G Group Long Term Care/LTC03G.001 Qualified

Product Name:2019 GLTC04 RATE INITIATIVE - PHASE IProject Name/Number:2019 GLTC04 RATE INITIATIVE - PHASE I/

Virginia

Supporting Document Schedule Item Changes			
Satisfied - Item:	GLTC0419 CH ECNF_v4_cln_VA		
Comments:	This has been moved to the form schedule tab per your request.		
Attachment(s):			
Previous Version			
Satisfied - Item:	GLTC0419 CH ECNF_v4_cln_VA		
Comments:			
Attachment(s):	GLTC0419 CH ECNF_v4_cln_VA.pdf		
Previous Version			
Satisfied - Item:	GLTC0419 CH ECNF_v2_cln_VA		
Comments:			
Attachment(s):	GLTC0419 CH ECNF_v3_cln_VA.pdf		
Previous Version			
Satisfied - Item:	GLTC0419 CH ECNF_v2_cln_VA		
Comments:			
Attachment(s):	GLTC0419 CH ECNF_v2_cln_VA.pdf		

Satisfied - Item:	GLTC0419 CH FAQ ECNF-VA
Comments:	This has been moved to the form schedule tab per your request.
Attachment(s):	
Previous Version	
Satisfied - Item:	GLTC0419 CH FAQ ECNF-VA
Comments:	
Attachment(s):	GLTC0419 CH FAQ ECNF-VA.pdf

State: Virginia Filing Company: Unum Life Insurance Company of America

TOI/Sub-TOI: LTC03G Group Long Term Care/LTC03G.001 Qualified

Supporting Document Schedule Item Changes			
Satisfied - Item:	GLTC0419 CH ECNF_v4_cln_VA		
Comments:	This has been moved to the form schedule tab per your request.		
Attachment(s):			
Previous Version			
Satisfied - Item:	GLTC0419 CH ECNF_v4_cln_VA		
Comments:			
Attachment(s):	GLTC0419 CH ECNF_v4_cln_VA.pdf		
Previous Version			
Satisfied - Item:	GLTC0419 CH ECNF_v2_cln_VA		
Comments:			
Attachment(s):	GLTC0419 CH ECNF_v3_cln_VA.pdf		
Previous Version			
Satisfied - Item:	GLTC0419 CH ECNF_v2_cln_VA		
Comments:			
Attachment(s):	GLTC0419 CH ECNF_v2_cln_VA.pdf		

his has been moved to the form schedule tab per your request.
GLTC0419 CH FAQ ECNF-VA
GLTC0419 CH FAQ ECNF-VA.pdf
&H Readability - Health
EADABILITY CERTIFICATION.pdf
&H Readability - Health
Va
8 8

State: Virginia Filing Company: Unum Life Insurance Company of America

TOI/Sub-TOI: LTC03G Group Long Term Care/LTC03G.001 Qualified

Product Name:2019 GLTC04 RATE INITIATIVE - PHASE IProject Name/Number:2019 GLTC04 RATE INITIATIVE - PHASE I/

Conclusion:

Sincerely,

Ellen Desrosiers

State: Virginia Filing Company: Unum Life Insurance Company of America

TOI/Sub-TOI: LTC03G Group Long Term Care/LTC03G.001 Qualified

Product Name:2019 GLTC04 RATE INITIATIVE - PHASE IProject Name/Number:2019 GLTC04 RATE INITIATIVE - PHASE I/

Response Letter

Response Letter Status Submitted to State

Response Letter Date 02/25/2020 Submitted Date 02/25/2020

Dear Bobby Toone,

Introduction:

Response 1

Comments:

Please see the attached exhibits and objection response.

Related Objection 1

Applies To:

- L&H Actuarial Memorandum (Supporting Document)

Comments: Please advise if the actuarial assumptions associated with the rate increase request are consistent with the assumptions embedded in the most recent asset adequacy testing. If not, either make the appropriate revisions or explain any discrepancies.

Changed Items:

No Form Schedule items changed.

Supporting Document Schedule Item Changes			
Satisfied - Item:	Exhibit 9 - Prospective Present Value Loss Ratio Test		
Comments:			
Attachment(s):	Exhibit 9 - Prospective Present Value Loss Ratio Test.xlsx		

Filing Company:

Unum Life Insurance Company of America

TOI/Sub-TOI: LTC03G Group Long Term Care/LTC03G.001 Qualified

2019 GLTC04 RATE INITIATIVE - PHASE I Product Name: 2010 CLTCOA DATE INITIATIVE DUASE I/

Virginia

State:

Previous Version Satisfied - Item:

Attachment(s):

Comments:

Project Name/Number:	2019 GLTC04 RATE INITIATIVE - PHASE I/
0 11 0	
Supporting Documen	t Schedule Item Changes
Satisfied - Item:	Exhibit 9 - Prospective Present Value Loss Ratio Test
Comments:	
Attachment(s):	Exhibit 9 - Prospective Present Value Loss Ratio Test.xlsx
Satisfied - Item:	Exhibit 10a-b Original Pricing - Actual Sales
Comments:	
Attachment(s):	Exhibit 10a-b – Original Pricing - Actual Sales.xlsx
Supporting Documen	t Schedule Item Changes
Satisfied - Item:	Exhibit 9 - Prospective Present Value Loss Ratio Test
Comments:	
Attachment(s):	Exhibit 9 - Prospective Present Value Loss Ratio Test.xlsx
Satisfied - Item:	Exhibit 10a-b Original Pricing - Actual Sales
Comments:	
Attachment(s):	Exhibit 10a-b – Original Pricing - Actual Sales.xlsx
Satisfied - Item:	Exhibit 1(a,b) - Nationwide Loss Ratio
Comments:	
Attachment(s):	Exhibit 1(a,b) - Nationwide Loss Ratio.pdf Exhibit 1(a,b) - Nationwide Loss Ratio.xlsx

Exhibit 1.1a-b - Nationwide Loss Ratio.xlsx

Exhibit 1(a,b) - Nationwide Loss Ratio.pdf Exhibit 1(a,b) - Nationwide Loss Ratio.xlsx

Exhibit 1(a,b) - Nationwide Loss Ratio

Filing Company:

Unum Life Insurance Company of America

TOI/Sub-TOI: LTC03G Group Long Term Care/LTC03G.001 Qualified

Product Name:2019 GLTC04 RATE INITIATIVE - PHASE IProject Name/Number:2019 GLTC04 RATE INITIATIVE - PHASE I/

Virginia

Supporting Document So	chedule Item Changes
Satisfied - Item:	Exhibit 9 - Prospective Present Value Loss Ratio Test
Comments:	
Attachment(s):	Exhibit 9 - Prospective Present Value Loss Ratio Test.xlsx
Satisfied - Item:	Exhibit 10a-b Original Pricing - Actual Sales
Comments:	
Attachment(s):	Exhibit 10a-b – Original Pricing - Actual Sales.xlsx
Satisfied - Item:	Exhibit 1(a,b) - Nationwide Loss Ratio
Comments:	
Attachment(s):	Exhibit 1(a,b) - Nationwide Loss Ratio.pdf Exhibit 1(a,b) - Nationwide Loss Ratio.xlsx Exhibit 1.1a-b - Nationwide Loss Ratio.xlsx
Previous Version	
Satisfied - Item:	Exhibit 1(a,b) - Nationwide Loss Ratio
Comments:	
Attachment(s):	Exhibit 1(a,b) - Nationwide Loss Ratio.pdf Exhibit 1(a,b) - Nationwide Loss Ratio.xlsx
Satisfied - Item:	Exhibit 11a-b - Nationwide Loss Ratio
Comments:	
Attachment(s):	Exhibit 11a-b - Nationwide Loss Ratio.xlsx

Filing Company:

Unum Life Insurance Company of America

TOI/Sub-TOI: LTC03G Group Long Term Care/LTC03G.001 Qualified

Product Name:2019 GLTC04 RATE INITIATIVE - PHASE IProject Name/Number:2019 GLTC04 RATE INITIATIVE - PHASE I/

Virginia

Supporting Document So	chedule Item Changes		
Satisfied - Item:	Exhibit 9 - Prospective Present Value Loss Ratio Test		
Comments:			
Attachment(s):	Exhibit 9 - Prospective Present Value Loss Ratio Test.xlsx		
Satisfied - Item:	Exhibit 10a-b Original Pricing - Actual Sales		
Comments:			
Attachment(s):	Exhibit 10a-b – Original Pricing - Actual Sales.xlsx		
Satisfied - Item:	Exhibit 1(a,b) - Nationwide Loss Ratio		
Comments:			
Attachment(s):	Exhibit 1(a,b) - Nationwide Loss Ratio.pdf Exhibit 1(a,b) - Nationwide Loss Ratio.xlsx Exhibit 1.1a-b - Nationwide Loss Ratio.xlsx		
Previous Version			
Satisfied - Item:	Exhibit 1(a,b) - Nationwide Loss Ratio		
Comments:			
Attachment(s):	Exhibit 1(a,b) - Nationwide Loss Ratio.pdf Exhibit 1(a,b) - Nationwide Loss Ratio.xlsx		
Satisfied - Item:	Exhibit 11a-b - Nationwide Loss Ratio		
Comments:			
Attachment(s):	Exhibit 11a-b - Nationwide Loss Ratio.xlsx		
Satisfied - Item:	Objection Response - GLTC04 Virginia		
Comments:			
Attachment(s):	Objection Response - GLTC04 Virginia.pdf		

Response 2

State:

Comments:

A post submission update will be submitted.

Related Objection 2

Applies To:

- VA Proposed Rates - GLTC04&RGLTC04 - 2019, [GLTC04, RGLTC04] (Rate)

Comments: Please complete the top section of the Rate/Rule Schedule to include all information requested.

State: Virginia Filing Company: Unum Life Insurance Company of America

TOI/Sub-TOI: LTC03G Group Long Term Care/LTC03G.001 Qualified

Product Name:2019 GLTC04 RATE INITIATIVE - PHASE IProject Name/Number:2019 GLTC04 RATE INITIATIVE - PHASE I/

Changed Items:

No Form Schedule items changed.

No Rate/Rule Schedule items changed.

No Supporting Documents changed.

Response 3

Comments:

Please see the attached exhibits and objection response.

Related Objection 3

Applies To:

- L&H Actuarial Memorandum (Supporting Document)

Comments: Please re-state the nationwide experience using Virginia approved rates.

Changed Items:

No Form Schedule items changed.

Supporting Document Schedule Item Changes	
Satisfied - Item:	Exhibit 9 - Prospective Present Value Loss Ratio Test
Comments:	
Attachment(s):	Exhibit 9 - Prospective Present Value Loss Ratio Test.xlsx

Supporting Document Schedule Item Changes	
Satisfied - Item:	Exhibit 9 - Prospective Present Value Loss Ratio Test
Comments:	
Attachment(s):	Exhibit 9 - Prospective Present Value Loss Ratio Test.xlsx
Ontintinal Hames	
Satisfied - Item:	Exhibit 10a-b Original Pricing - Actual Sales
Comments:	
Attachment(s):	Exhibit 10a-b – Original Pricing - Actual Sales.xlsx

State: Virginia Filing Company: Unum Life Insurance Company of America

TOI/Sub-TOI: LTC03G Group Long Term Care/LTC03G.001 Qualified

Supporting Document Schedule Item Changes	
Satisfied - Item:	Exhibit 9 - Prospective Present Value Loss Ratio Test
Comments:	
Attachment(s):	Exhibit 9 - Prospective Present Value Loss Ratio Test.xlsx
Satisfied - Item:	Exhibit 10a-b Original Pricing - Actual Sales
Comments:	
Attachment(s):	Exhibit 10a-b – Original Pricing - Actual Sales.xlsx
Satisfied - Item:	Exhibit 1(a,b) - Nationwide Loss Ratio
Comments:	
Attachment(s):	Exhibit 1(a,b) - Nationwide Loss Ratio.pdf Exhibit 1(a,b) - Nationwide Loss Ratio.xlsx Exhibit 1.1a-b - Nationwide Loss Ratio.xlsx
Previous Version	
Satisfied - Item:	Exhibit 1(a,b) - Nationwide Loss Ratio
Comments:	
Attachment(s):	Exhibit 1(a,b) - Nationwide Loss Ratio.pdf Exhibit 1(a,b) - Nationwide Loss Ratio.xlsx

Filing Company:

Unum Life Insurance Company of America

TOI/Sub-TOI: LTC03G Group Long Term Care/LTC03G.001 Qualified

Product Name:2019 GLTC04 RATE INITIATIVE - PHASE IProject Name/Number:2019 GLTC04 RATE INITIATIVE - PHASE I/

Virginia

Supporting Document Schedule Item Changes	
Satisfied - Item:	Exhibit 9 - Prospective Present Value Loss Ratio Test
Comments:	
Attachment(s):	Exhibit 9 - Prospective Present Value Loss Ratio Test.xlsx
Satisfied - Item:	Exhibit 10a-b Original Pricing - Actual Sales
Comments:	
Attachment(s):	Exhibit 10a-b – Original Pricing - Actual Sales.xlsx
Satisfied - Item:	Exhibit 1(a,b) - Nationwide Loss Ratio
Comments:	
Attachment(s):	Exhibit 1(a,b) - Nationwide Loss Ratio.pdf Exhibit 1(a,b) - Nationwide Loss Ratio.xlsx Exhibit 1.1a-b - Nationwide Loss Ratio.xlsx
Previous Version	
Satisfied - Item:	Exhibit 1(a,b) - Nationwide Loss Ratio
Comments:	
Attachment(s):	Exhibit 1(a,b) - Nationwide Loss Ratio.pdf Exhibit 1(a,b) - Nationwide Loss Ratio.xlsx
Satisfied - Item:	Exhibit 11a-b - Nationwide Loss Ratio
Comments:	
Attachment(s):	Exhibit 11a-b - Nationwide Loss Ratio.xlsx

State: Virginia Filing Company: Unum Life Insurance Company of America

TOI/Sub-TOI: LTC03G Group Long Term Care/LTC03G.001 Qualified

Product Name:2019 GLTC04 RATE INITIATIVE - PHASE IProject Name/Number:2019 GLTC04 RATE INITIATIVE - PHASE I/

Supporting Document Schedule Item Changes	
Satisfied - Item:	Exhibit 9 - Prospective Present Value Loss Ratio Test
Comments:	
Attachment(s):	Exhibit 9 - Prospective Present Value Loss Ratio Test.xlsx
Satisfied - Item:	Exhibit 10a-b Original Pricing - Actual Sales
Comments:	
Attachment(s):	Exhibit 10a-b – Original Pricing - Actual Sales.xlsx
Satisfied - Item:	Exhibit 1(a,b) - Nationwide Loss Ratio
Comments:	
Attachment(s):	Exhibit 1(a,b) - Nationwide Loss Ratio.pdf Exhibit 1(a,b) - Nationwide Loss Ratio.xlsx Exhibit 1.1a-b - Nationwide Loss Ratio.xlsx
Previous Version	
Satisfied - Item:	Exhibit 1(a,b) - Nationwide Loss Ratio
Comments:	
Attachment(s):	Exhibit 1(a,b) - Nationwide Loss Ratio.pdf Exhibit 1(a,b) - Nationwide Loss Ratio.xlsx
Satisfied - Item:	Exhibit 11a-b - Nationwide Loss Ratio
Comments:	
Attachment(s):	Exhibit 11a-b - Nationwide Loss Ratio.xlsx
Satisfied - Item:	Objection Response - GLTC04 Virginia
Comments:	
Attachment(s):	Objection Response - GLTC04 Virginia.pdf

Response 4

Comments:

Please see the attached exhibits and objection response.

Related Objection 4

Applies To:

- L&H Actuarial Memorandum (Supporting Document)

Filing Company:

Unum Life Insurance Company of America

TOI/Sub-TOI: LTC03G Group Long Term Care/LTC03G.001 Qualified

Product Name:2019 GLTC04 RATE INITIATIVE - PHASE IProject Name/Number:2019 GLTC04 RATE INITIATIVE - PHASE I/

Virginia

Comments: Provide a separate calculation of the Lifetime Loss Ratio so that the historical premium component is restated to what it would be if the proposed premium had been charged (collected) since the forms introduction.

Changed Items:

State:

No Form Schedule items changed.

Supporting Document Schedule Item Changes	
Satisfied - Item:	Exhibit 9 - Prospective Present Value Loss Ratio Test
Comments:	
Attachment(s):	Exhibit 9 - Prospective Present Value Loss Ratio Test.xlsx

Supporting Document Schedule Item Changes	
Satisfied - Item:	Exhibit 9 - Prospective Present Value Loss Ratio Test
Comments:	
Attachment(s):	Exhibit 9 - Prospective Present Value Loss Ratio Test.xlsx
Satisfied - Item:	Exhibit 10a-b Original Pricing - Actual Sales
Comments:	
Attachment(s):	Exhibit 10a-b - Original Pricing - Actual Sales.xlsx

State: Virginia Filing Company: Unum Life Insurance Company of America

TOI/Sub-TOI: LTC03G Group Long Term Care/LTC03G.001 Qualified

Supporting Document Schedule Item Changes	
Satisfied - Item:	Exhibit 9 - Prospective Present Value Loss Ratio Test
Comments:	
Attachment(s):	Exhibit 9 - Prospective Present Value Loss Ratio Test.xlsx
Satisfied - Item:	Exhibit 10a-b Original Pricing - Actual Sales
Comments:	
Attachment(s):	Exhibit 10a-b – Original Pricing - Actual Sales.xlsx
Satisfied - Item:	Exhibit 1(a,b) - Nationwide Loss Ratio
Comments:	
Attachment(s):	Exhibit 1(a,b) - Nationwide Loss Ratio.pdf Exhibit 1(a,b) - Nationwide Loss Ratio.xlsx Exhibit 1.1a-b - Nationwide Loss Ratio.xlsx
Previous Version	
Satisfied - Item:	Exhibit 1(a,b) - Nationwide Loss Ratio
Comments:	
Attachment(s):	Exhibit 1(a,b) - Nationwide Loss Ratio.pdf Exhibit 1(a,b) - Nationwide Loss Ratio.xlsx

Filing Company:

Unum Life Insurance Company of America

TOI/Sub-TOI: LTC03G Group Long Term Care/LTC03G.001 Qualified

Product Name:2019 GLTC04 RATE INITIATIVE - PHASE IProject Name/Number:2019 GLTC04 RATE INITIATIVE - PHASE I/

Virginia

Supporting Document Schedule Item Changes	
Satisfied - Item:	Exhibit 9 - Prospective Present Value Loss Ratio Test
Comments:	
Attachment(s):	Exhibit 9 - Prospective Present Value Loss Ratio Test.xlsx
Satisfied - Item:	Exhibit 10a-b Original Pricing - Actual Sales
Comments:	
Attachment(s):	Exhibit 10a-b – Original Pricing - Actual Sales.xlsx
Satisfied - Item:	Exhibit 1(a,b) - Nationwide Loss Ratio
Comments:	
Attachment(s):	Exhibit 1(a,b) - Nationwide Loss Ratio.pdf Exhibit 1(a,b) - Nationwide Loss Ratio.xlsx Exhibit 1.1a-b - Nationwide Loss Ratio.xlsx
Previous Version	
Satisfied - Item:	Exhibit 1(a,b) - Nationwide Loss Ratio
Comments:	
Attachment(s):	Exhibit 1(a,b) - Nationwide Loss Ratio.pdf Exhibit 1(a,b) - Nationwide Loss Ratio.xlsx
Satisfied - Item:	Exhibit 11a-b - Nationwide Loss Ratio
Comments:	
Attachment(s):	Exhibit 11a-b - Nationwide Loss Ratio.xlsx

State: Virginia Filing Company: Unum Life Insurance Company of America

TOI/Sub-TOI: LTC03G Group Long Term Care/LTC03G.001 Qualified

Product Name:2019 GLTC04 RATE INITIATIVE - PHASE IProject Name/Number:2019 GLTC04 RATE INITIATIVE - PHASE I/

Supporting Document Schedule Item Changes	
Satisfied - Item:	Exhibit 9 - Prospective Present Value Loss Ratio Test
Comments:	
Attachment(s):	Exhibit 9 - Prospective Present Value Loss Ratio Test.xlsx
Satisfied - Item:	Exhibit 10a-b Original Pricing - Actual Sales
Comments:	
Attachment(s):	Exhibit 10a-b – Original Pricing - Actual Sales.xlsx
Satisfied - Item:	Exhibit 1(a,b) - Nationwide Loss Ratio
Comments:	
Attachment(s):	Exhibit 1(a,b) - Nationwide Loss Ratio.pdf Exhibit 1(a,b) - Nationwide Loss Ratio.xlsx Exhibit 1.1a-b - Nationwide Loss Ratio.xlsx
Previous Version	
Satisfied - Item:	Exhibit 1(a,b) - Nationwide Loss Ratio
Comments:	
Attachment(s):	Exhibit 1(a,b) - Nationwide Loss Ratio.pdf Exhibit 1(a,b) - Nationwide Loss Ratio.xlsx
Satisfied - Item:	Exhibit 11a-b - Nationwide Loss Ratio
Comments:	
Attachment(s):	Exhibit 11a-b - Nationwide Loss Ratio.xlsx
Satisfied - Item:	Objection Response - GLTC04 Virginia
Comments:	
Attachment(s):	Objection Response - GLTC04 Virginia.pdf

Response 5

Comments:

Please see the attached exhibits and objection response.

Related Objection 5

Applies To:

- L&H Actuarial Memorandum (Supporting Document)

State: Virginia Filing Company: Unum Life Insurance Company of America

TOI/Sub-TOI: LTC03G Group Long Term Care/LTC03G.001 Qualified

Product Name:2019 GLTC04 RATE INITIATIVE - PHASE IProject Name/Number:2019 GLTC04 RATE INITIATIVE - PHASE I/

Comments: Please provide the current national cumulative average increase, and what that average would be if all outstanding rate increase requests were approved for the full amount.

Changed Items:

No Form Schedule items changed.

Supporting Document Schedule Item Changes	
Satisfied - Item:	Exhibit 9 - Prospective Present Value Loss Ratio Test
Comments:	
Attachment(s):	Exhibit 9 - Prospective Present Value Loss Ratio Test.xlsx

Supporting Document Schedule Item Changes	
Satisfied - Item:	Exhibit 9 - Prospective Present Value Loss Ratio Test
Comments:	
Attachment(s):	Exhibit 9 - Prospective Present Value Loss Ratio Test.xlsx
Satisfied - Item:	Exhibit 10a-b Original Pricing - Actual Sales
Comments:	
Attachment(s):	Exhibit 10a-b - Original Pricing - Actual Sales.xlsx

State: Virginia Filing Company: Unum Life Insurance Company of America

TOI/Sub-TOI: LTC03G Group Long Term Care/LTC03G.001 Qualified

Supporting Document Schedule Item Changes	
Satisfied - Item:	Exhibit 9 - Prospective Present Value Loss Ratio Test
Comments:	
Attachment(s):	Exhibit 9 - Prospective Present Value Loss Ratio Test.xlsx
Satisfied - Item:	Exhibit 10a-b Original Pricing - Actual Sales
Comments:	
Attachment(s):	Exhibit 10a-b – Original Pricing - Actual Sales.xlsx
Satisfied - Item:	Exhibit 1(a,b) - Nationwide Loss Ratio
Comments:	
Attachment(s):	Exhibit 1(a,b) - Nationwide Loss Ratio.pdf Exhibit 1(a,b) - Nationwide Loss Ratio.xlsx Exhibit 1.1a-b - Nationwide Loss Ratio.xlsx
Previous Version	
Satisfied - Item:	Exhibit 1(a,b) - Nationwide Loss Ratio
Comments:	
Attachment(s):	Exhibit 1(a,b) - Nationwide Loss Ratio.pdf Exhibit 1(a,b) - Nationwide Loss Ratio.xlsx

Filing Company:

Unum Life Insurance Company of America

TOI/Sub-TOI: LTC03G Group Long Term Care/LTC03G.001 Qualified

Product Name:2019 GLTC04 RATE INITIATIVE - PHASE IProject Name/Number:2019 GLTC04 RATE INITIATIVE - PHASE I/

Virginia

Supporting Document So	chedule Item Changes
Satisfied - Item:	Exhibit 9 - Prospective Present Value Loss Ratio Test
Comments:	
Attachment(s):	Exhibit 9 - Prospective Present Value Loss Ratio Test.xlsx
Satisfied - Item:	Exhibit 10a-b Original Pricing - Actual Sales
Comments:	
Attachment(s):	Exhibit 10a-b – Original Pricing - Actual Sales.xlsx
Satisfied - Item:	Exhibit 1(a,b) - Nationwide Loss Ratio
Comments:	
Attachment(s):	Exhibit 1(a,b) - Nationwide Loss Ratio.pdf Exhibit 1(a,b) - Nationwide Loss Ratio.xlsx Exhibit 1.1a-b - Nationwide Loss Ratio.xlsx
Previous Version	
Satisfied - Item:	Exhibit 1(a,b) - Nationwide Loss Ratio
Comments:	
Attachment(s):	Exhibit 1(a,b) - Nationwide Loss Ratio.pdf Exhibit 1(a,b) - Nationwide Loss Ratio.xlsx
Satisfied - Item:	Exhibit 11a-b - Nationwide Loss Ratio
Comments:	
Attachment(s):	Exhibit 11a-b - Nationwide Loss Ratio.xlsx

State: Virginia Filing Company: Unum Life Insurance Company of America

TOI/Sub-TOI: LTC03G Group Long Term Care/LTC03G.001 Qualified

Product Name:2019 GLTC04 RATE INITIATIVE - PHASE IProject Name/Number:2019 GLTC04 RATE INITIATIVE - PHASE I/

Supporting Document S	chedule Item Changes
Satisfied - Item:	Exhibit 9 - Prospective Present Value Loss Ratio Test
Comments:	
Attachment(s):	Exhibit 9 - Prospective Present Value Loss Ratio Test.xlsx
Satisfied - Item:	Exhibit 10a-b Original Pricing - Actual Sales
Comments:	
Attachment(s):	Exhibit 10a-b – Original Pricing - Actual Sales.xlsx
Satisfied - Item:	Exhibit 1(a,b) - Nationwide Loss Ratio
Comments:	
Attachment(s):	Exhibit 1(a,b) - Nationwide Loss Ratio.pdf Exhibit 1(a,b) - Nationwide Loss Ratio.xlsx Exhibit 1.1a-b - Nationwide Loss Ratio.xlsx
Previous Version	
Satisfied - Item:	Exhibit 1(a,b) - Nationwide Loss Ratio
Comments:	
Attachment(s):	Exhibit 1(a,b) - Nationwide Loss Ratio.pdf Exhibit 1(a,b) - Nationwide Loss Ratio.xlsx
Satisfied - Item:	Exhibit 11a-b - Nationwide Loss Ratio
Comments:	
Attachment(s):	Exhibit 11a-b - Nationwide Loss Ratio.xlsx
Satisfied - Item:	Objection Response - GLTC04 Virginia
Comments:	
Attachment(s):	Objection Response - GLTC04 Virginia.pdf

Response 6

Comments:

Please see the attached exhibits and objection response.

Related Objection 6

Applies To:

- L&H Actuarial Memorandum (Supporting Document)

State: Virginia Filing Company: Unum Life Insurance Company of America

TOI/Sub-TOI: LTC03G Group Long Term Care/LTC03G.001 Qualified

Product Name:2019 GLTC04 RATE INITIATIVE - PHASE IProject Name/Number:2019 GLTC04 RATE INITIATIVE - PHASE I/

Comments: Please provide the current Virginia cumulative average increase, and what that average would be if the current rate increase request were approved for the full amount.

Changed Items:

No Form Schedule items changed.

Supporting Document Schedule Item Changes	
Satisfied - Item:	Exhibit 9 - Prospective Present Value Loss Ratio Test
Comments:	
Attachment(s):	Exhibit 9 - Prospective Present Value Loss Ratio Test.xlsx

Supporting Document Schedule Item Changes	
Satisfied - Item:	Exhibit 9 - Prospective Present Value Loss Ratio Test
Comments:	
Attachment(s):	Exhibit 9 - Prospective Present Value Loss Ratio Test.xlsx
Satisfied - Item:	Exhibit 10a-b Original Pricing - Actual Sales
Comments:	
Attachment(s):	Exhibit 10a-b - Original Pricing - Actual Sales.xlsx

State: Virginia Filing Company: Unum Life Insurance Company of America

TOI/Sub-TOI: LTC03G Group Long Term Care/LTC03G.001 Qualified

Supporting Document Schedule Item Changes	
Satisfied - Item:	Exhibit 9 - Prospective Present Value Loss Ratio Test
Comments:	
Attachment(s):	Exhibit 9 - Prospective Present Value Loss Ratio Test.xlsx
Satisfied - Item:	Exhibit 10a-b Original Pricing - Actual Sales
Comments:	
Attachment(s):	Exhibit 10a-b – Original Pricing - Actual Sales.xlsx
Satisfied - Item:	Exhibit 1(a,b) - Nationwide Loss Ratio
Comments:	
Attachment(s):	Exhibit 1(a,b) - Nationwide Loss Ratio.pdf Exhibit 1(a,b) - Nationwide Loss Ratio.xlsx Exhibit 1.1a-b - Nationwide Loss Ratio.xlsx
Previous Version	
Satisfied - Item:	Exhibit 1(a,b) - Nationwide Loss Ratio
Comments:	
Attachment(s):	Exhibit 1(a,b) - Nationwide Loss Ratio.pdf Exhibit 1(a,b) - Nationwide Loss Ratio.xlsx

Filing Company:

Unum Life Insurance Company of America

TOI/Sub-TOI: LTC03G Group Long Term Care/LTC03G.001 Qualified

Product Name:2019 GLTC04 RATE INITIATIVE - PHASE IProject Name/Number:2019 GLTC04 RATE INITIATIVE - PHASE I/

Virginia

Supporting Document So	chedule Item Changes
Satisfied - Item:	Exhibit 9 - Prospective Present Value Loss Ratio Test
Comments:	
Attachment(s):	Exhibit 9 - Prospective Present Value Loss Ratio Test.xlsx
Satisfied - Item:	Exhibit 10a-b Original Pricing - Actual Sales
Comments:	
Attachment(s):	Exhibit 10a-b – Original Pricing - Actual Sales.xlsx
Satisfied - Item:	Exhibit 1(a,b) - Nationwide Loss Ratio
Comments:	
Attachment(s):	Exhibit 1(a,b) - Nationwide Loss Ratio.pdf Exhibit 1(a,b) - Nationwide Loss Ratio.xlsx Exhibit 1.1a-b - Nationwide Loss Ratio.xlsx
Previous Version	
Satisfied - Item:	Exhibit 1(a,b) - Nationwide Loss Ratio
Comments:	
Attachment(s):	Exhibit 1(a,b) - Nationwide Loss Ratio.pdf Exhibit 1(a,b) - Nationwide Loss Ratio.xlsx
Satisfied - Item:	Exhibit 11a-b - Nationwide Loss Ratio
Comments:	
Attachment(s):	Exhibit 11a-b - Nationwide Loss Ratio.xlsx

State: Virginia Filing Company: Unum Life Insurance Company of America

TOI/Sub-TOI: LTC03G Group Long Term Care/LTC03G.001 Qualified

Product Name:2019 GLTC04 RATE INITIATIVE - PHASE IProject Name/Number:2019 GLTC04 RATE INITIATIVE - PHASE I/

Supporting Document S	chedule Item Changes
Satisfied - Item:	Exhibit 9 - Prospective Present Value Loss Ratio Test
Comments:	
Attachment(s):	Exhibit 9 - Prospective Present Value Loss Ratio Test.xlsx
Satisfied - Item:	Exhibit 10a-b Original Pricing - Actual Sales
Comments:	
Attachment(s):	Exhibit 10a-b – Original Pricing - Actual Sales.xlsx
Satisfied - Item:	Exhibit 1(a,b) - Nationwide Loss Ratio
Comments:	
Attachment(s):	Exhibit 1(a,b) - Nationwide Loss Ratio.pdf Exhibit 1(a,b) - Nationwide Loss Ratio.xlsx Exhibit 1.1a-b - Nationwide Loss Ratio.xlsx
Previous Version	
Satisfied - Item:	Exhibit 1(a,b) - Nationwide Loss Ratio
Comments:	
Attachment(s):	Exhibit 1(a,b) - Nationwide Loss Ratio.pdf Exhibit 1(a,b) - Nationwide Loss Ratio.xlsx
Satisfied - Item:	Exhibit 11a-b - Nationwide Loss Ratio
Comments:	
Attachment(s):	Exhibit 11a-b - Nationwide Loss Ratio.xlsx
Satisfied - Item:	Objection Response - GLTC04 Virginia
Comments:	
Attachment(s):	Objection Response - GLTC04 Virginia.pdf

Response 7

Comments:

Please see the attached exhibits and objection response.

Related Objection 7

Applies To:

- L&H Actuarial Memorandum (Supporting Document)

State: Virginia Filing Company: Unum Life Insurance Company of America

TOI/Sub-TOI: LTC03G Group Long Term Care/LTC03G.001 Qualified

Product Name:2019 GLTC04 RATE INITIATIVE - PHASE IProject Name/Number:2019 GLTC04 RATE INITIATIVE - PHASE I/

Comments: Please provide a loss ratio projection (both past and future) which reflects all the original pricing assumptions for interest, mortality, morbidity, persistency and premium scale, but uses the actual distribution of policies as issued rather than the originally assumed mix of business.

Changed Items:

No Form Schedule items changed.

Supporting Document Schedule Item Changes	
Satisfied - Item:	Exhibit 9 - Prospective Present Value Loss Ratio Test
Comments:	
Attachment(s):	Exhibit 9 - Prospective Present Value Loss Ratio Test.xlsx

Supporting Document Schedule Item Changes	
Satisfied - Item:	Exhibit 9 - Prospective Present Value Loss Ratio Test
Comments:	
Attachment(s):	Exhibit 9 - Prospective Present Value Loss Ratio Test.xlsx
Satisfied - Item:	Exhibit 10a-b Original Pricing - Actual Sales
Comments:	
Attachment(s):	Exhibit 10a-b - Original Pricing - Actual Sales.xlsx

State: Virginia Filing Company: Unum Life Insurance Company of America

TOI/Sub-TOI: LTC03G Group Long Term Care/LTC03G.001 Qualified

Supporting Document Schedule Item Changes	
Satisfied - Item:	Exhibit 9 - Prospective Present Value Loss Ratio Test
Comments:	
Attachment(s):	Exhibit 9 - Prospective Present Value Loss Ratio Test.xlsx
Satisfied - Item:	Exhibit 10a-b Original Pricing - Actual Sales
Comments:	
Attachment(s):	Exhibit 10a-b – Original Pricing - Actual Sales.xlsx
Satisfied - Item:	Exhibit 1(a,b) - Nationwide Loss Ratio
Comments:	
Attachment(s):	Exhibit 1(a,b) - Nationwide Loss Ratio.pdf Exhibit 1(a,b) - Nationwide Loss Ratio.xlsx Exhibit 1.1a-b - Nationwide Loss Ratio.xlsx
Previous Version	
Satisfied - Item:	Exhibit 1(a,b) - Nationwide Loss Ratio
Comments:	
Attachment(s):	Exhibit 1(a,b) - Nationwide Loss Ratio.pdf Exhibit 1(a,b) - Nationwide Loss Ratio.xlsx

Filing Company:

Unum Life Insurance Company of America

TOI/Sub-TOI: LTC03G Group Long Term Care/LTC03G.001 Qualified

Product Name:2019 GLTC04 RATE INITIATIVE - PHASE IProject Name/Number:2019 GLTC04 RATE INITIATIVE - PHASE I/

Virginia

Supporting Document So	chedule Item Changes
Satisfied - Item:	Exhibit 9 - Prospective Present Value Loss Ratio Test
Comments:	
Attachment(s):	Exhibit 9 - Prospective Present Value Loss Ratio Test.xlsx
Satisfied - Item:	Exhibit 10a-b Original Pricing - Actual Sales
Comments:	
Attachment(s):	Exhibit 10a-b – Original Pricing - Actual Sales.xlsx
Satisfied - Item:	Exhibit 1(a,b) - Nationwide Loss Ratio
Comments:	
Attachment(s):	Exhibit 1(a,b) - Nationwide Loss Ratio.pdf Exhibit 1(a,b) - Nationwide Loss Ratio.xlsx Exhibit 1.1a-b - Nationwide Loss Ratio.xlsx
Previous Version	
Satisfied - Item:	Exhibit 1(a,b) - Nationwide Loss Ratio
Comments:	
Attachment(s):	Exhibit 1(a,b) - Nationwide Loss Ratio.pdf Exhibit 1(a,b) - Nationwide Loss Ratio.xlsx
Satisfied - Item:	Exhibit 11a-b - Nationwide Loss Ratio
Comments:	
Attachment(s):	Exhibit 11a-b - Nationwide Loss Ratio.xlsx

Filing Company:

Unum Life Insurance Company of America

TOI/Sub-TOI: LTC03G Group Long Term Care/LTC03G.001 Qualified

Product Name:2019 GLTC04 RATE INITIATIVE - PHASE IProject Name/Number:2019 GLTC04 RATE INITIATIVE - PHASE I/

Virginia

Supporting Document S	chedule Item Changes
Satisfied - Item:	Exhibit 9 - Prospective Present Value Loss Ratio Test
Comments:	
Attachment(s):	Exhibit 9 - Prospective Present Value Loss Ratio Test.xlsx
Satisfied - Item:	Exhibit 10a-b Original Pricing - Actual Sales
Comments:	
Attachment(s):	Exhibit 10a-b – Original Pricing - Actual Sales.xlsx
Satisfied - Item:	Exhibit 1(a,b) - Nationwide Loss Ratio
Comments:	
Attachment(s):	Exhibit 1(a,b) - Nationwide Loss Ratio.pdf Exhibit 1(a,b) - Nationwide Loss Ratio.xlsx Exhibit 1.1a-b - Nationwide Loss Ratio.xlsx
Previous Version	
Satisfied - Item:	Exhibit 1(a,b) - Nationwide Loss Ratio
Comments:	
Attachment(s):	Exhibit 1(a,b) - Nationwide Loss Ratio.pdf Exhibit 1(a,b) - Nationwide Loss Ratio.xlsx
Satisfied - Item:	Exhibit 11a-b - Nationwide Loss Ratio
Comments:	
Attachment(s):	Exhibit 11a-b - Nationwide Loss Ratio.xlsx
Satisfied - Item:	Objection Response - GLTC04 Virginia
Comments:	
Attachment(s):	Objection Response - GLTC04 Virginia.pdf

Response 8

State:

Comments:

Please see the attached exhibits and objection response.

Related Objection 8

Applies To:

- L&H Actuarial Memorandum (Supporting Document)

Comments: Please state the lifetime loss ratio anticipated in the original filing.

State: Virginia Filing Company: Unum Life Insurance Company of America

TOI/Sub-TOI: LTC03G Group Long Term Care/LTC03G.001 Qualified

Product Name:2019 GLTC04 RATE INITIATIVE - PHASE IProject Name/Number:2019 GLTC04 RATE INITIATIVE - PHASE I/

Changed Items:

No Form Schedule items changed.

No Rate/Rule Schedule items changed.

No Supporting Documents changed.

Response 9

Comments:

Please see the attached exhibits and objection response.

Related Objection 9

Applies To:

- L&H Actuarial Memorandum (Supporting Document)

Comments: Is the intent of the company to not request any further rate increases if the proposed rate increase is approved and the experience develops as projected? If not, please explain.

Changed Items:

No Form Schedule items changed.

No Rate/Rule Schedule items changed.

No Supporting Documents changed.

Response 10

Comments:

Please see the attached exhibits and objection response.

Related Objection 10

Applies To:

- L&H Actuarial Memorandum (Supporting Document)

Comments: What steps have been taken to minimize rate increases on this block of business?

Changed Items:

No Form Schedule items changed.

State: Virginia Filing Company: Unum Life Insurance Company of America

TOI/Sub-TOI: LTC03G Group Long Term Care/LTC03G.001 Qualified

Product Name:2019 GLTC04 RATE INITIATIVE - PHASE IProject Name/Number:2019 GLTC04 RATE INITIATIVE - PHASE I/

No Rate/Rule Schedule items changed.

No Supporting Documents changed.

Response 11

Comments:

Please see the attached exhibits and objection response.

Related Objection 11

Applies To:

- L&H Actuarial Memorandum (Supporting Document)

Comments: Please provide all projections necessary to evaluate the requests based on both the Prospective Present Value Approach (or Texas Method) and the "If-Knew/Makeup Blend" approach (or Minnesota Method).

Changed Items:

No Form Schedule items changed.

Supporting Document Schedule Item Changes		
Satisfied - Item:	Exhibit 9 - Prospective Present Value Loss Ratio Test	
Comments:		
Attachment(s):	Exhibit 9 - Prospective Present Value Loss Ratio Test.xlsx	

Supporting Document Schedule Item Changes		
Satisfied - Item:	Exhibit 9 - Prospective Present Value Loss Ratio Test	
Comments:		
Attachment(s):	Exhibit 9 - Prospective Present Value Loss Ratio Test.xlsx	
Satisfied - Item:	Exhibit 10a-b Original Pricing - Actual Sales	
Comments:		
Attachment(s):	Exhibit 10a-b – Original Pricing - Actual Sales.xlsx	

State: Virginia Filing Company: Unum Life Insurance Company of America

TOI/Sub-TOI: LTC03G Group Long Term Care/LTC03G.001 Qualified

Supporting Document Schedule Item Changes		
Satisfied - Item:	Exhibit 9 - Prospective Present Value Loss Ratio Test	
Comments:		
Attachment(s):	Exhibit 9 - Prospective Present Value Loss Ratio Test.xlsx	
Satisfied - Item:	Exhibit 10a-b Original Pricing - Actual Sales	
Comments:		
Attachment(s):	Exhibit 10a-b – Original Pricing - Actual Sales.xlsx	
Satisfied - Item:	Exhibit 1(a,b) - Nationwide Loss Ratio	
Comments:		
Attachment(s):	Exhibit 1(a,b) - Nationwide Loss Ratio.pdf Exhibit 1(a,b) - Nationwide Loss Ratio.xlsx Exhibit 1.1a-b - Nationwide Loss Ratio.xlsx	
Previous Version		
Satisfied - Item:	Exhibit 1(a,b) - Nationwide Loss Ratio	
Comments:		
Attachment(s):	Exhibit 1(a,b) - Nationwide Loss Ratio.pdf Exhibit 1(a,b) - Nationwide Loss Ratio.xlsx	

Filing Company:

Unum Life Insurance Company of America

TOI/Sub-TOI: LTC03G Group Long Term Care/LTC03G.001 Qualified

Product Name:2019 GLTC04 RATE INITIATIVE - PHASE IProject Name/Number:2019 GLTC04 RATE INITIATIVE - PHASE I/

Virginia

Supporting Document Schedule Item Changes		
Satisfied - Item:	Exhibit 9 - Prospective Present Value Loss Ratio Test	
Comments:		
Attachment(s):	Exhibit 9 - Prospective Present Value Loss Ratio Test.xlsx	
Satisfied - Item:	Exhibit 10a-b Original Pricing - Actual Sales	
Comments:		
Attachment(s):	Exhibit 10a-b – Original Pricing - Actual Sales.xlsx	
Satisfied - Item:	Exhibit 1(a,b) - Nationwide Loss Ratio	
Comments:		
Attachment(s):	Exhibit 1(a,b) - Nationwide Loss Ratio.pdf Exhibit 1(a,b) - Nationwide Loss Ratio.xlsx Exhibit 1.1a-b - Nationwide Loss Ratio.xlsx	
Previous Version		
Satisfied - Item:	Exhibit 1(a,b) - Nationwide Loss Ratio	
Comments:		
Attachment(s):	Exhibit 1(a,b) - Nationwide Loss Ratio.pdf Exhibit 1(a,b) - Nationwide Loss Ratio.xlsx	
Satisfied - Item:	Exhibit 11a-b - Nationwide Loss Ratio	
Comments:		
Attachment(s):	Exhibit 11a-b - Nationwide Loss Ratio.xlsx	

SERFF Tracking #: State Tracking #: Company Tracking #: UNUM-131865115 UNUM-131865115 2019 GLTC04 RATE INITIATIVE - PHASE I

Filing Company:

Unum Life Insurance Company of America

Virginia LTC03G Group Long Term Care/LTC03G.001 Qualified TOI/Sub-TOI:

Product Name: 2019 GLTC04 RATE INITIATIVE - PHASE I Project Name/Number: 2019 GLTC04 RATE INITIATIVE - PHASE I/

Supporting Document Schedule Item Changes		
Satisfied - Item:	Exhibit 9 - Prospective Present Value Loss Ratio Test	
Comments:		
Attachment(s):	Exhibit 9 - Prospective Present Value Loss Ratio Test.xlsx	
Satisfied - Item:	Exhibit 10a-b Original Pricing - Actual Sales	
Comments:		
Attachment(s):	Exhibit 10a-b – Original Pricing - Actual Sales.xlsx	
Satisfied - Item:	Exhibit 1(a,b) - Nationwide Loss Ratio	
Comments:		
Attachment(s):	Exhibit 1(a,b) - Nationwide Loss Ratio.pdf Exhibit 1(a,b) - Nationwide Loss Ratio.xlsx Exhibit 1.1a-b - Nationwide Loss Ratio.xlsx	
Previous Version		
Satisfied - Item:	Exhibit 1(a,b) - Nationwide Loss Ratio	
Comments:		
Attachment(s):	Exhibit 1(a,b) - Nationwide Loss Ratio.pdf Exhibit 1(a,b) - Nationwide Loss Ratio.xlsx	
Satisfied - Item:	Exhibit 11a-b - Nationwide Loss Ratio	
Comments:		
Attachment(s):	Exhibit 11a-b - Nationwide Loss Ratio.xlsx	
Satisfied - Item:	Objection Response - GLTC04 Virginia	
Comments:		
Attachment(s):	Objection Response - GLTC04 Virginia.pdf	

Conclusion:

Sincerely,

State:

Ellen Desrosiers

State: Virginia Filing Company: Unum Life Insurance Company of America

TOI/Sub-TOI: LTC03G Group Long Term Care/LTC03G.001 Qualified

Product Name: 2019 GLTC04 RATE INITIATIVE - PHASE I **Project Name/Number:** 2019 GLTC04 RATE INITIATIVE - PHASE I/

Response Letter

Response Letter Status Submitted to State

Response Letter Date 03/04/2020 Submitted Date 03/04/2020

Dear Bobby Toone,

Introduction:

Response 1

Comments:

We will be responding to this objection within the most recent objection submitted on 2/21.

Related Objection 1

Applies To:

- GLTC0419 CH ECNF_v4_cln_VA (Supporting Document)

Comments: Please move the policyholder letter (GLTC0419 CH ECNF_v4_cln_VA.pdf) and the FAQ (GLTC0419 CH FAQ ECNF-VA.pdf) to the Form Schedule for review.

Changed Items:

No Form Schedule items changed.

No Rate/Rule Schedule items changed.

No Supporting Documents changed.

Response 2

Comments:

We will be responding to this objection within the most recent objection submitted on 2/21.

Related Objection 2

Applies To:

- Certificate Amendment Contingent Non-Forfeiture Benefit, 04CNF19G-VA (Form)
- Certificate Amendment Enhanced Contingent Non-Forfeiture Benefit, 04ECNF19G-APO-VA (Form)
- GLTC0419 CH FAQ ECNF-VA (Supporting Document)
- GLTC0419 CH ECNF_v4_cln_VA (Supporting Document)

Comments: Pursuant to 14VAC5-101-80 A-E and the Variability Guidance Document located in the SERFF instructions, please provide a Statement of Variability, providing a detailed explanation of all variable language in each form.

Changed Items:

No Form Schedule items changed.

No Rate/Rule Schedule items changed.

No Supporting Documents changed.

Conclusion:

Sincerely,

Ellen Desrosiers

State: Virginia Filing Company: Unum Life Insurance Company of America

TOI/Sub-TOI: LTC03G Group Long Term Care/LTC03G.001 Qualified

Product Name:2019 GLTC04 RATE INITIATIVE - PHASE IProject Name/Number:2019 GLTC04 RATE INITIATIVE - PHASE I/

Response Letter

Response Letter Status Submitted to State

Response Letter Date 12/20/2019
Submitted Date 12/20/2019

Dear Bobby Toone,

Introduction:

Response 1

Comments:

The actuarial assumptions used in this filing are the same assumptions used in our reserve adequacy testing.

Related Objection 1

Applies To:

- L&H Actuarial Memorandum (Supporting Document)

Comments: Please advise if the actuarial assumptions associated with the rate increase request are consistent with the assumptions embedded in the most recent asset adequacy testing. If not, either make the appropriate revisions or explain any discrepancies.

Changed Items:

No Form Schedule items changed.

No Rate/Rule Schedule items changed.

No Supporting Documents changed.

Response 2

Comments:

There are 5,167 total insureds inforce in Virginia and 4,375 of the insureds are still paying premium and would be subject to the rate increase.

Related Objection 2

Applies To:

- VA Proposed Rates - GLTC04&RGLTC04 - 2019, [GLTC04, RGLTC04] (Rate)

Comments: The Actuarial Memorandum shows there are 5,167 insureds, while the Rate/Rule Schedule says there are 4,375. Please explain this difference and make the necessary revisions to reconcile these figures.

State: Virginia Filing Company: Unum Life Insurance Company of America

TOI/Sub-TOI: LTC03G Group Long Term Care/LTC03G.001 Qualified

Product Name:2019 GLTC04 RATE INITIATIVE - PHASE IProject Name/Number:2019 GLTC04 RATE INITIATIVE - PHASE I/

Changed Items:

No Form Schedule items changed.

No Rate/Rule Schedule items changed.

No Supporting Documents changed.

Response 3

Comments:

We have changed the rate action to revised. However, the rates were filed prior to SERFF so there is not a tracking number associated with the previous filing.

Related Objection 3

Applies To:

- VA Proposed Rates - GLTC04&RGLTC04 - 2019, [GLTC04, RGLTC04] (Rate)

Comments: Please change the Rate Action form "New" to "Revised", since these rates are being revised from the original rates.

Changed Items:

No Form Schedule items changed.

Rate/Rule Schedule Item Changes								
Item No.	Document Name	Affected Form Numbers (Separated with commas)	Rate Action	Rate Action Information	Attachments	Date Submitted		
1	VA Proposed Rates - GLTC04&RGLTC04 - 2019	GLTC04, RGLTC04	Revised	Previous State Filing Number: rates were filed prior to SERFF Percent Rate Change Request:	VA Proposed Rates - GLTC04&RGLTC04 - 2019.pdf,	12/20/2019 By: Ellen Desrosiers		
Previous Version								
1	VA Proposed Rates - GLTC04&RGLTC04 - 2019	GLTC04, RGLTC04	New		VA Proposed Rates - GLTC04&RGLTC04 - 2019.pdf,	03/28/2019 By: Ellen Desrosiers		

No Supporting Documents changed.

State: Virginia Filing Company: Unum Life Insurance Company of America

TOI/Sub-TOI: LTC03G Group Long Term Care/LTC03G.001 Qualified

Product Name:2019 GLTC04 RATE INITIATIVE - PHASE IProject Name/Number:2019 GLTC04 RATE INITIATIVE - PHASE I/

Response 4

Comments:

We updated our Long Term Care assumptions in 2018. Prior to this update, we could not support a rate increase on these policy forms

Related Objection 4

Applies To:

- GLTC0419 Prem Inc History_VA (Supporting Document)

Comments: Given the much publicized issues and concerns with the adequacy of long term care rates over the last 10-15 years, please explain why you have not requested a rate increase on these forms before now.

Changed Items:

No Form Schedule items changed.

No Rate/Rule Schedule items changed.

No Supporting Documents changed.

Conclusion:

Sincerely,

Ellen Desrosiers

State: Virginia Filing Company: Unum Life Insurance Company of America

TOI/Sub-TOI: LTC03G Group Long Term Care/LTC03G.001 Qualified

Product Name:2019 GLTC04 RATE INITIATIVE - PHASE IProject Name/Number:2019 GLTC04 RATE INITIATIVE - PHASE I/

Response Letter

Response Letter Status Submitted to State

Response Letter Date 04/30/2019
Submitted Date 04/30/2019

Dear Bobby Toone,

Introduction:

Response 1

Comments:

Please see the attached narrative that explains the drivers for the need for the proposed premium rate increases.

Related Objection 1

Applies To:

- Long Term Care Insurance Rate Request Summary (Supporting Document)

Comments: Please complete the Long-Term Care Rate Request Summary by completing the narrative requested at the bottom of the page.

The narrative should put into consumer-friendly language a clear explanation of the justification for the rate increase. The narrative should be written so that any person reviewing this filing would understand the reason for the rate increase and its driving factors.

Changed Items:

No Form Schedule items changed.

No Rate/Rule Schedule items changed.

Supporting Document Schedule Item Changes					
Satisfied - Item:	Long Term Care Insurance Rate Request Summary				
Comments:					
Attachment(s):	LTC Rate Request Summary.pdf Rate Increase Narrative.pdf				
Previous Version					
Satisfied - Item:	Long Term Care Insurance Rate Request Summary				
Comments:					
Attachment(s):	LTC Rate Request Summary.pdf				

State: Virginia Filing Company: Unum Life Insurance Company of America

TOI/Sub-TOI: LTC03G Group Long Term Care/LTC03G.001 Qualified

Product Name:2019 GLTC04 RATE INITIATIVE - PHASE IProject Name/Number:2019 GLTC04 RATE INITIATIVE - PHASE I/

Conclusion:

Thank you.

Sincerely,

Ellen Desrosiers

State: Virginia Filing Company: Unum Life Insurance Company of America

TOI/Sub-TOI: LTC03G Group Long Term Care/LTC03G.001 Qualified

Product Name:2019 GLTC04 RATE INITIATIVE - PHASE IProject Name/Number:2019 GLTC04 RATE INITIATIVE - PHASE I/

Amendment Letter

Submitted Date: 05/18/2022

Comments:

There was a typo in one of the sample letters provided and we have replaced it with the correct letter sample.

Changed Items:

No Form Schedule Items Changed.

No Rate Schedule Items Changed.

Filing Company:

Unum Life Insurance Company of America

TOI/Sub-TOI: LTC03G Group Long Term Care/LTC03G.001 Qualified

Product Name:2019 GLTC04 RATE INITIATIVE - PHASE IProject Name/Number:2019 GLTC04 RATE INITIATIVE - PHASE I/

Virginia

State:

Supporting Document So	chedule Item Changes
Satisfied - Item:	Sample Certificate Holder Letters
Comments:	
Attachment(s):	GLTC CH ECNF T1-2_cln_v3_VA - Sample.pdf GLTC CH ECNF T2-2_cln_v3_VA - Sample.pdf
Previous Version	
Satisfied - Item:	Sample Certificate Holder Letters
Comments:	
Attachment(s):	GLTC CH ECNF T1-2_cln_v3_VA - Sample.pdf GLTC CH ECNF T2-2_cln_v3_VA - Sample.pdf
Previous Version	
Satisfied - Item:	Sample Certificate Holder Letter
Comments:	
Attachment(s):	GLTC19 CH T1-2 Infl Ins ECNF_VA-Sample.pdf
Previous Version	
Satisfied - Item:	Sample Certificate Holder Letter
Comments:	
Attachment(s):	GLTC19 CH T1-2 Infl Ins ECNF_VA-Sample.pdf
Previous Version	
Satisfied - Item:	Sample Certificate Holder Letters
Comments:	
Attachment(s):	GLTC0419 CH ECNF T1-2_Sample_VA.pdf
Previous Version	
Satisfied - Item:	Sample Certificate Holder Letter
Comments:	
Attachment(s):	GLTC0419 CH ECNF_v7_sample-VA.pdf

State: Virginia Filing Company: Unum Life Insurance Company of America

TOI/Sub-TOI: LTC03G Group Long Term Care/LTC03G.001 Qualified

Product Name:2019 GLTC04 RATE INITIATIVE - PHASE IProject Name/Number:2019 GLTC04 RATE INITIATIVE - PHASE I/

Amendment Letter

Submitted Date: 05/24/2021

Comments:

Due to a recent objection on corresponding rate filing UNUM-131895942, we have submitted updated certificate holder letters.

Changed Items:

State: Virginia Filing Company: Unum Life Insurance Company of America

TOI/Sub-TOI: LTC03G Group Long Term Care/LTC03G.001 Qualified

Product Name:2019 GLTC04 RATE INITIATIVE - PHASE IProject Name/Number:2019 GLTC04 RATE INITIATIVE - PHASE I/

ltem	Form	Form	Form	Form	Action Specific	Readability		
No.	Name	Number	Туре	Action	Data	Score	Attachments	Submitted
1	Certificate Holder Letter	CHGLTC-T1-VA	ОТН	Initial		51.400	GLTC19 CH T1-2 Infl Ins ECNF_v1_cln_V A.pdf	Date Submitted: 05/24/2021 By:
Previous Ve	'ersion							
1	Certificate Holder Letter	CHGLTC-T1-VA	ОТН	Initial		51.400	GLTC ECNF T1- 2- VA.pdf	Date Submitted: 01/29/2021 By:
Previous Ve	'ersion							
1	Certificate Holder Letter	CH-GLTC04-VA	ОТН	Initial		51.400	GLTC0419 CH ECNF_v7_cln_V A .pdf	
Previous Ve	ersion							
1	Certificate Holder Letter	CH-GLTC04-VA	OTH	Initial		51.400	GLTC0419 CH ECNF_v6_cln_V A.pdf	Date Submitted: 06/16/2020 By:
Previous Ve	ersion							
1	Certificate Holder Letter	CH-GLTC04-VA	ОТН	Initial		51.400	GLTC0419 CH ECNF_v6_cln_V A.pdf	Date Submitted: 05/12/2020 By:
Previous Ve	'ersion							
1	Certificate Holder Letter	CH-GLTC04-VA	ОТН	Initial		51.400	GLTC0419 CH ECNF_v4_cln_V A.pdf	Date Submitted: 03/22/2020 By: Ellen Desrosiers
2	Certificate Holder Letter	CHGLTC-T2-VA	ОТН	Initial		51.200	GLTC19 CH T2-2 Infl Ins ECNF_v1_cln_V A.pdf	05/24/2021
Previous Ve	'ersion			·	·			
2	Certificate Holder Letter	CHGLTC-T2-VA	ОТН	Initial		51.200	GLTC ECNF T2-2 - VA.pdf	Date Submitted: 01/29/2021 By:

No Rate Schedule Items Changed.

State: Virginia Filing Company: Unum Life Insurance Company of America

TOI/Sub-TOI: LTC03G Group Long Term Care/LTC03G.001 Qualified

Product Name:2019 GLTC04 RATE INITIATIVE - PHASE IProject Name/Number:2019 GLTC04 RATE INITIATIVE - PHASE I/

Supporting Document Schedule Item Changes						
Satisfied - Item:	Sample Certificate Holder Letter					
Comments:						
Attachment(s):	GLTC19 CH T1-2 Infl Ins ECNF_VA-Sample.pdf					
Previous Version						
Satisfied - Item:	Sample Certificate Holder Letters					
Comments:						
Attachment(s):	GLTC0419 CH ECNF T1-2_Sample_VA.pdf					
Previous Version						
Satisfied - Item:	Sample Certificate Holder Letter					
Comments:						
Attachment(s):	GLTC0419 CH ECNF_v7_sample-VA.pdf					

State: Virginia Filing Company: Unum Life Insurance Company of America

TOI/Sub-TOI: LTC03G Group Long Term Care/LTC03G.001 Qualified

Product Name:2019 GLTC04 RATE INITIATIVE - PHASE IProject Name/Number:2019 GLTC04 RATE INITIATIVE - PHASE I/

Amendment Letter

Submitted Date: 01/29/2021

Comments:

A sample certificate holder letter is also included.

Changed Items:

No Form Schedule Items Changed.

No Rate Schedule Items Changed.

Supporting Document Schedule Item Changes					
Satisfied - Item:	Sample Certificate Holder Letters				
Comments:					
Attachment(s):	GLTC0419 CH ECNF T1-2_Sample_VA.pdf				
Previous Version					
Satisfied - Item:	Sample Certificate Holder Letter				
Comments:					
Attachment(s):	GLTC0419 CH FCNF_v7_sample-VA.pdf				

State: Virginia Filing Company: Unum Life Insurance Company of America

TOI/Sub-TOI: LTC03G Group Long Term Care/LTC03G.001 Qualified

Product Name:2019 GLTC04 RATE INITIATIVE - PHASE IProject Name/Number:2019 GLTC04 RATE INITIATIVE - PHASE I/

Amendment Letter

Submitted Date: 01/29/2021

Comments:

Attached are updated certificate holder letter and a statement of variability. These letters also correspond with SERFF tracking number UNUM-131895942.

Changed Items:

Form Schee	dule Item Changes							
Item	Form	Form	Form	Form	Action Specific	Readability		
No.	Name	Number	Type	Action	Data	Score	Attachments	Submitted
1	Certificate Holder Letter	CHGLTC-T1-VA	OTH	Initial		51.400	GLTC ECNF T1- 2- VA.pdf	Date Submitted: 01/29/2021 By:
Previous Ver	sion							
1	Certificate Holder Letter	CH-GLTC04-VA	ОТН	Initial		51.400	GLTC0419 CH ECNF_v7_cln_V A .pdf	Date Submitted: 06/30/2020 By:
Previous Ver	sion							
1	Certificate Holder Letter	CH-GLTC04-VA	OTH	Initial		51.400	GLTC0419 CH ECNF_v6_cln_V A.pdf	Date Submitted: 06/16/2020 By:
Previous Ver	sion						<u>'</u>	
1	Certificate Holder Letter	CH-GLTC04-VA	ОТН	Initial		51.400	GLTC0419 CH ECNF_v6_cln_V A.pdf	Date Submitted: 05/12/2020 By:
Previous Ver	sion							
1	Certificate Holder Letter	CH-GLTC04-VA	ОТН	Initial		51.400	GLTC0419 CH ECNF_v4_cln_V A.pdf	Date Submitted: 03/22/2020 By: Ellen Desrosiers
2	Certificate Holder Letter	CHGLTC-T2-VA	OTH	Initial		51.200	GLTC ECNF T2-2 - VA.pdf	Date Submitted: 01/29/2021 By:

No Rate Schedule Items Changed.

State: Virginia Filing Company: Unum Life Insurance Company of America

TOI/Sub-TOI: LTC03G Group Long Term Care/LTC03G.001 Qualified

Product Name:2019 GLTC04 RATE INITIATIVE - PHASE IProject Name/Number:2019 GLTC04 RATE INITIATIVE - PHASE I/

Supporting Document Schedule Item Changes						
Satisfied - Item:	Statement of Variability					
Comments:						
Attachment(s):	Statement of Variability.pdf					

State: Virginia Filing Company: Unum Life Insurance Company of America

TOI/Sub-TOI: LTC03G Group Long Term Care/LTC03G.001 Qualified

Product Name:2019 GLTC04 RATE INITIATIVE - PHASE IProject Name/Number:2019 GLTC04 RATE INITIATIVE - PHASE I/

Amendment Letter

Submitted Date: 06/30/2020

Comments:

We have made a required update to the government web address included in the certificate holder letter. An updated version is attached.

Changed Items:

Form Sched	Form Schedule Item Changes								
Item	Form	Form	Form	Form	Action Specific	Readability			
No.	Name	Number	Туре	Action	Data	Score	Attachments	Submitted	
1	Certificate Holder Letter	CH-GLTC04-VA	ОТН	Initial		51.400	GLTC0419 CH ECNF_v7_cln_V A .pdf	Date Submitted: 06/30/2020 By:	
Previous Versi	ion			·			· ·		
1	Certificate Holder Letter	CH-GLTC04-VA	ОТН	Initial		51.400	GLTC0419 CH ECNF_v6_cln_V A.pdf	Date Submitted: 06/16/2020 By:	
Previous Versi	ion						<u>'</u>	,	
1	Certificate Holder Letter	CH-GLTC04-VA	ОТН	Initial		51.400	GLTC0419 CH ECNF_v6_cln_V A.pdf	Date Submitted: 05/12/2020 By:	
Previous Versi	Previous Version								
1	Certificate Holder Letter	CH-GLTC04-VA	ОТН	Initial		51.400	GLTC0419 CH ECNF_v4_cln_V A.pdf	Date Submitted: 03/22/2020 By: Ellen Desrosiers	

No Rate Schedule Items Changed.

No Supporting Documents Changed.

State: Virginia Filing Company: Unum Life Insurance Company of America

TOI/Sub-TOI: LTC03G Group Long Term Care/LTC03G.001 Qualified

Product Name:2019 GLTC04 RATE INITIATIVE - PHASE IProject Name/Number:2019 GLTC04 RATE INITIATIVE - PHASE I/

Amendment Letter

Submitted Date: 06/16/2020

Comments:

Attached is an updated certificate holder letter, FAQ and premium increase history.

Changed Items:

Form Sch	edule Item Changes							
Item	Form	Form	Form	Form	Action Specific	Readability		
No.	Name	Number	Type	Action	Data	Score	Attachments	Submitted
1	Frequently Asked Questions	VA-GLTC04-FAQ	ОТН	Initial		47.600	GLTC0419 CH FAQ ECNF_v2_cln_G en.pdf	Date Submitted: 06/16/2020 By:
Previous Ve	ersion							
1	Frequently Asked Questions	VA-GLTC04-FAQ	ОТН	Initial		47.600	GLTC0419 CH FAQ ECNF- VA.pdf	Date Submitted: 03/22/2020 By: Ellen Desrosiers
2	Certificate Holder Letter	CH-GLTC04-VA	OTH	Initial		51.400	GLTC0419 CH ECNF_v6_cln_V A.pdf	Date Submitted: 06/16/2020 By:
Previous Ve	ersion							
2	Certificate Holder Letter	CH-GLTC04-VA	ОТН	Initial		51.400	GLTC0419 CH ECNF_v6_cln_V A.pdf	Date Submitted: 05/12/2020 By:
Previous Ve	ersion							
2	Certificate Holder Letter	CH-GLTC04-VA	ОТН	Initial		51.400	GLTC0419 CH ECNF_v4_cln_V A.pdf	Date Submitted: 03/22/2020 By: Ellen Desrosiers

No Rate Schedule Items Changed.

State: Virginia Filing Company: Unum Life Insurance Company of America

TOI/Sub-TOI: LTC03G Group Long Term Care/LTC03G.001 Qualified

Product Name:2019 GLTC04 RATE INITIATIVE - PHASE IProject Name/Number:2019 GLTC04 RATE INITIATIVE - PHASE I/

Supporting Document Schedule Item Changes						
Satisfied - Item:	Premium Increase History					
Comments:	Comments:					
Attachment(s):	GLTC0419 Prem Inc History_v2_VA.pdf					
Previous Version						
Satisfied - Item:	GLTC0419 Prem Inc History_VA					
Comments:						
Attachment(s):	GLTC0419 Prem Inc History_VA.pdf					

State: Virginia Filing Company: Unum Life Insurance Company of America

TOI/Sub-TOI: LTC03G Group Long Term Care/LTC03G.001 Qualified

Product Name:2019 GLTC04 RATE INITIATIVE - PHASE IProject Name/Number:2019 GLTC04 RATE INITIATIVE - PHASE I/

Amendment Letter

Submitted Date: 05/12/2020

Comments:

An updated certificate holder letter is attached. The readability score remains the same.

Changed Items:

Form Schedule Item Changes								
Item	Form	Form	Form	Form	Action Specific	Readability		
No.	Name	Number	Туре	Action	Data	Score	Attachments	Submitted
1	Certificate Holder Letter	CH-GLTC04-VA	ОТН	Initial		51.400	GLTC0419 CH ECNF_v6_cln_V A.pdf	Date Submitted: 05/12/2020 By:
Previous Version								
1	Certificate Holder Letter	CH-GLTC04-VA	ОТН	Initial		51.400	GLTC0419 CH ECNF_v4_cln_V A.pdf	Date Submitted: 03/22/2020 By: Ellen Desrosiers

No Rate Schedule Items Changed.

No Supporting Documents Changed.

State: Virginia Filing Company: Unum Life Insurance Company of America

TOI/Sub-TOI: LTC03G Group Long Term Care/LTC03G.001 Qualified

Product Name:2019 GLTC04 RATE INITIATIVE - PHASE IProject Name/Number:2019 GLTC04 RATE INITIATIVE - PHASE I/

Amendment Letter

Submitted Date: 02/28/2020

Comments:

Please see the attached updated exhibit 11a-b and the update objection response.

Thank you.

Changed Items:

Attachment(s):

No Form Schedule Items Changed.

No Rate Schedule Items Changed.

Supporting Document Schedule Item Changes

Satisfied - Item:	Exhibit 11a-b - Nationwide Loss Ratio
Comments:	
Attachment(s):	Exhibit 11a-b - Nationwide Loss Ratio.pdf Exhibit 11a-b - Nationwide Loss Ratio.xlsx
Previous Version	
Satisfied - Item:	Exhibit 11a-b - Nationwide Loss Ratio
Comments:	
Attachment(s):	Exhibit 11a-b - Nationwide Loss Ratio.xlsx
Satisfied - Item:	Objection Response - GLTC04 Virginia
Comments:	
Attachment(s):	Objection Response - GLTC04 Virginia.pdf
Previous Version	
Satisfied - Item:	Objection Response - GLTC04 Virginia
Comments:	

Objection Response - GLTC04 Virginia.pdf

State: Virginia Filing Company: Unum Life Insurance Company of America

TOI/Sub-TOI: LTC03G Group Long Term Care/LTC03G.001 Qualified

Product Name:2019 GLTC04 RATE INITIATIVE - PHASE IProject Name/Number:2019 GLTC04 RATE INITIATIVE - PHASE I/

Amendment Letter

Submitted Date: 10/07/2019

Comments:

An updated certificate holder letter is attached.

Changed Items:

No Form Schedule Items Changed.

No Rate Schedule Items Changed.

Supporting Document Sche	Supporting Document Schedule Item Changes				
Satisfied - Item:	GLTC0419 CH ECNF_v4_cln_VA				
Comments:					
Attachment(s):	GLTC0419 CH ECNF_v4_cln_VA.pdf				
Previous Version					
Satisfied - Item:	GLTC0419 CH ECNF_v2_cln_VA				
Comments:					
Attachment(s):	GLTC0419 CH ECNF_v3_cln_VA.pdf				
Previous Version					
Satisfied - Item:	GLTC0419 CH ECNF_v2_cln_VA				
Comments:					
Attachment(s):	GLTC0419 CH ECNF_v2_cln_VA.pdf				

State: Virginia Filing Company: Unum Life Insurance Company of America

TOI/Sub-TOI: LTC03G Group Long Term Care/LTC03G.001 Qualified

Product Name:2019 GLTC04 RATE INITIATIVE - PHASE IProject Name/Number:2019 GLTC04 RATE INITIATIVE - PHASE I/

Amendment Letter

Submitted Date: 05/29/2019

Comments:

Updates have been made to the sample Certificate Holder letter and the letter has been attached for your reference.

Changed Items:

No Form Schedule Items Changed.

No Rate Schedule Items Changed.

Supporting Document Schedule Item Changes				
Satisfied - Item: GLTC0419 CH ECNF_v2_cln_VA				
Comments:				
Attachment(s): GLTC0419 CH ECNF_v3_cln_VA.pdf				
Previous Version				
Satisfied - Item:	GLTC0419 CH ECNF_v2_cln_VA			
Comments:				
Attachment(s):	GLTC0419 CH ECNF_v2_cln_VA.pdf			

State: Virginia Filing Company: Unum Life Insurance Company of America

TOI/Sub-TOI: LTC03G Group Long Term Care/LTC03G.001 Qualified

Product Name: 2019 GLTC04 RATE INITIATIVE - PHASE I **Project Name/Number:** 2019 GLTC04 RATE INITIATIVE - PHASE I/

Reviewer Note

Created By:

Bobby Toone on 01/05/2022 03:05 PM

Last Edited By:

Bobby Toone

Submitted On:

12/01/2022 08:21 AM

Subject:

Actuary Opinion & Final Report

Comments:

Rec'd final report - 6/2/2020

Recommend approval at lower rate

JOHN T. CONDO, FSA, MAAA, PHD ROBERT B. CROMPTON, FSA, MAAA DAVID E. NEVE, FSA, MAAA, CERA CANDE OLSEN, FSA, MAAA, CLU

SHAWN D. PARKS, FSA, MAAA

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SHAWN D. PARKS, FSA, MAAA NAZNEE RIAS, FSA, MAAA, CERA NICOLE L. RUSSO, ASA, MAAA LORNE W. SCHINBEIN, FSA, MAAA

June 2, 2020

Life and Health Division Bureau of Insurance State Corporation Commission P. O. Box 1157 Richmond, VA 23218

Subject: SERFF Tracking #UNUM-131865115

At the request of the Virginia SCC Bureau of Insurance (the "Bureau"), I have reviewed the filing for the above captioned submission from **Unum Life Insurance Company of America** (the "Company"). This is a filing of revised premium rates for a block of group Long Term Care Insurance plans. This block of business is not available for issue to new groups, but new certificates can still be added for existing groups.

Recommendation

My review of this filing was performed according to the provisions of 14VAC5-200-153. Applicable Actuarial Standards of Practice were considered, including Actuarial Standard of Practice No. 18, "Long-Term Care Insurance" and Actuarial Standard of Practice No. 8, "Regulatory Filings for Rates and Financial Projections for Health Plans". After review of the Company's submission, I believe that the Company has failed to demonstrate that the full amount of their requested increase is in compliance with all applicable regulations. Based on this and other non-regulatory analyses, I recommend the Bureau ask the Company to reduce their request as detailed in the Summary section below.

Background

The Company has submitted a request for rate increases ranging from 0% to 89% averaging 34.3% for this block of business. The request is for an 89% increase on policies with compound inflation coverage, 44% on policies with simple inflation, and 0% on non-inflation policies. This policy form was actively marketed from 2004 through 2012 and, as of 12/31/2018, there were a total of 5,167 Virginia certificateholders in force; however, the increase would apply only to the 508 certificateholders with inflation coverage. There have been no prior increases on these policies in Virginia.

Methodology

My approach was to a) review the filing materials, b) check the filing contents and assumptions for compliance with all relevant regulations, c) verify the calculations in the supplied exhibits, and d) review the assumptions and projections for reasonableness.



Assumptions

The assumptions are based on experience studies completed in 2018 and are consistent with cash flow testing assumptions.

Interest – The average valuation rate of 3.98% is used for the present values in all projections.

Mortality – The current mortality assumptions are using the 2012 IAM table with adjustments to reflect actual Company experience and exhibit an aggregate A/E of 100.5%. The original assumptions were based on the 1983 GAM. This assumption was derived from the experience of all of the Company's LTC policy forms.

Lapses – The current best-estimate ultimate lapse rate is assumed to be 0.85%. This is consistent with the range that we normally see in the industry. This assumption is slightly aggressive versus 0.90% actual lapses in durations 15+ for policies with inflation coverage.

Morbidity – The morbidity assumption was developed using 2007 through 2018 Company experience. The overall experience for this form produces a 97.2% A/E for incidence and 100% for terminations. The original pricing assumptions were derived from the 1985 NNHS and 1982 NLTCS.

Based on the formula recommended by the American Academy of Actuaries ("AAA") in the Long-term Care Credibility Monograph issued in August 2016, the standard for full credibility is set at 3,246 claims. Since the Company's experience has approximately 13,000 claims in the last 10 years, the credibility is 100%.

Analysis

Loss Ratio Testing

The results below show the results of the loss ratio projections.

	Original	No Increase		With I	ncrease	From
Subset	LR	Future*	Lifetime	Future*	Lifetime	Inception
Simple Inflation	59%	102%	79%	86%	67%	55%
Compound Inflation	68%	126%	95%	107%	70%	50%

^{*} after deducting ALR

58/85 Test

Subset	Test	Required Claims	Projected Claims	PASS/ FAIL	Allowed
Simple Inflation	59/85	420.4M	446.2M	PASS	44%
Compound Inflation	68/85	296.1M	288.0M	FAIL	81%



Present Value Future Loss Test

The goal of this test is to ensure that, when looking only into the future, the company is not in a better position financially than if the assumptions were to play out according to original assumptions (except for interest). This is done by calculating the present value of the future expected loss under original assumptions and comparing that to the current assumptions with and without the proposed premium action. For this filing, the loss is lower with the increase than under original assumptions, so this test would limit the increases allowed.

Subset	Original	Current	Proposed	Allowed
Simple	-48M	-149M	-45M	43%
Compound	-48M	-133M	-27M	72%

Prospective Present Value

Based on the data provided by the Company, the maximum rate increases under this method, which is under consideration at the NAIC, are shown in the table below:

Subset	Allowed
Simple Inflation	53.7%
Compound Inflation	65.2%

If-Knew/Makeup Blend

Based on the data provided by the Company, the maximum rate increases under this method, which is under consideration at the NAIC, are shown in the table below:

Subset	Allowed
Simple Inflation	84.4%
Compound Inflation	126.7%

State Rate Equity

The Company has filed the same rate increase (44%/89%) in all states to achieve rate equity. For the states which have reached a final decision (representing about 50% of the nationwide premium), the current approved averages are 35% and 52%. The Company intends to file follow-up requests where the full amount was not approved. The Bureau has not typically utilized this measure to limit the increase on a first rate increase, but the information is included here for information purposes.

Subset	VA Curr	VA Prop	NW Curr
Simple Inflation	0%	44%	35%
Compound Inflation	0%	89%	52%



Summary

Maximum allowable increase under each of the following methods is presented below, capped at the actual requested percentages of 44%/89%:

Subset	58/85	PVFL	Prospective PV	If-Knew/ Makeup	Rate Equity
Simple Inflation	44%	43%	44%	44%	35%
Compound Inflation	81%	72%	65%	89%	52%

My final recommendation is a mixture of art and science looking at the blend of the various test results. <u>I recommend approval of the full 44% for simple inflation policies and a reduced</u> increase of 65% for policies with compound inflation.

Reliance and Qualifications

I am providing this letter to the Bureau as the sole intended user. The scope of the review relates only to compliance with applicable laws and regulations relating to the actuarial aspects of the filing under consideration, and the intended purpose is to communicate my findings regarding this filing. Distribution of this letter to parties other than the Bureau by me or any other party does not constitute advice by me to those parties. The reliance of parties other than the Bureau on any aspect of this work is not authorized by me and is done at their own risk.

In arriving at my opinion, I used and relied on information provided by the Company and the Bureau without independent investigation or verification. If this information is inaccurate, incomplete, or out of date, my findings and conclusions may need to be revised. While I have relied on the data provided without independent investigation or verification, I have reviewed the data for consistency and reasonableness. In the event that I found the data inconsistent or unreasonable, I have requested clarification.

I am a member of the American Academy of Actuaries and meet that body's Qualification Standards to render this opinion. I am responsible for this work and have utilized generally accepted actuarial methodologies in arriving at my opinion.

If you have any questions regarding this filing, please contact me for discussion.

Sincerely,

Shawn D. Parks, FSA, MAAA

SERFF Tracking #: UNUM-131865115 State Tracking #: UNUM-131865115 Company T

Company Tracking #: 2019 GLTC04 RATE INITIATIVE - PHASE I

State: Virginia Filing Company: Unum Life Insurance Company of America

TOI/Sub-TOI: LTC03G Group Long Term Care/LTC03G.001 Qualified

Product Name: 2019 GLTC04 RATE INITIATIVE - PHASE I **Project Name/Number:** 2019 GLTC04 RATE INITIATIVE - PHASE I/

Reviewer Note

Created By:

Bobby Toone on 04/11/2019 02:59 PM

Last Edited By:

Bobby Toone

Submitted On:

12/01/2022 08:21 AM

Subject:

RRS

Comments:

RRS1

RRS2

Reset Form

Long Term Care Insurance Rate Request Summary Part 1 – To Be Completed By Company

Company Name and NAIC Number:	Unum Life Insurance Company of America				
SERFF Tracking Number:	UNUM-131865115				
Effective Date:	Estimated effective date	e of September 2020			
Revised Rates					
Average Annual Premium Per Me	mber: 630				
Average Requested Percentage R	ate Change Per Member:	34%			
Minimum Requested Percentage	Rate Change Per Member:	0%			
Maximum Requested Percentage	Rate Change Per Member:	89%			
Number of Policy Holders Affected	d: 4,375				
Plans Affected (The Form Number and "Product Na	me")				
Form#	"Product Name"(if appli	icable)			
GLTC04 RGLTC04	Long Term Care Ind Long Term Care Re				

Attach a brief narrative to summarize the key information used to develop the rates including the main drivers for the revised rates.

This document is intended to help explain the rate filing and it is only a summary of the company's request. It is not intended to describe or include all factors or information considered in the review process. For more detailed information, please refer to the complete filing.

Part 2 - Long Term Care Insurance Rate Request Summary

Completed by the Bureau of Insurance (Bureau) of the Virginia State Corporation Commission

Company Name and NAIC Number: Unum Life Insurance Co. – NAIC # 62235

SERFF Tracking Number: UNUM-131865115

Disposition: Approved and Filed

Approval Date: 11/29/2022

Current Average Annual Premium Per Member: \$469.00

Rate Changes:

Average Percentage Rate Change Per Member: 26.30%

Minimum Requested Percentage Rate Change Per Member: 0.00%

Maximum Requested Percentage Rate Change Per Member: 64.90%

Number of Virginia Policy Holders Affected: 4,375

Summary of the Bureau's review of the rate request:

The Company requested a 34% rate increase on this block of group long-term care insurance policy forms. However, after discussion with the Bureau, the increase was reduced to 26.3%.

The Bureau and its consulting actuary reviewed the documentation and determined that this rate increase complies with the regulatory and actuarial requirements for a rate increase as set forth in 14VAC5-200-153 of the Virginia Administrative Code. The review indicated that the anticipated lifetime loss ratio after the increase will be 65.0%, which exceeds the minimum required loss ratio of 60%.

The Company has advised that they do not intend to request future rates increases on this block unless the actual experience is worse than projected.

The primary reasons for the rate increase are that policyholders are living longer and keeping their policies in force longer, which has resulted in more claims being filed than the Company anticipated when the policy was originally priced. The Company determined that a premium increase is necessary to reflect that future claims are expected to be significantly higher on these policies than originally expected or priced and to ensure that sufficient funds are available to pay claims.

The Company is offering all policyholders options to reduce the premium increase by reducing their coverage. These reductions could be in the form of lower daily benefits, a shorter benefit period, a longer elimination period, the termination of riders or any combination of these reductions, or a paid-up policy. Specific options are included in the letter sent to all

policyholders notifying them of the rate increase and can be discussed with the Company by calling its customer service department.

The filing can be reviewed on the Bureau's webpage under the Rate/Policy Form Search at: https://scc.virginia.gov/boi/SERFFInquiry/LtcFilings.aspx

State: Virginia Filing Company: Unum Life Insurance Company of America

TOI/Sub-TOI: LTC03G Group Long Term Care/LTC03G.001 Qualified

Product Name: 2019 GLTC04 RATE INITIATIVE - PHASE I **Project Name/Number:** 2019 GLTC04 RATE INITIATIVE - PHASE I/

Post Submission Update Request Processed On 04/13/2021

Status: Allowed

Created By: Scott Abbott
Processed By: Bobby Toone

Comments:

Company Rate Information:

Company Name: Unum Life Insurance Company of America

Field Name	Requested Change	Prior Value
Overall % Indicated Change	26.300%	34.300%
Overall % Rate Impact	26.300%	34.300%
Written Premium Change for this Program	n\$538940	\$703359
Maximum %Change (where required)	64.900%	89.000%

State: Virginia Filing Company: Unum Life Insurance Company of America

TOI/Sub-TOI: LTC03G Group Long Term Care/LTC03G.001 Qualified

Product Name:2019 GLTC04 RATE INITIATIVE - PHASE IProject Name/Number:2019 GLTC04 RATE INITIATIVE - PHASE I/

Form Schedule

Lead Form Number:								
Item	Schedule Item	Form	Form	Form	Form	Action Specific	Readability	
No.	Status	Name	Number	Туре	Action	Data	Score	Attachments
1	Approved 11/29/2022	Certificate Amendment - Contingent Non- Forfeiture Benefit	04CBUL22 G-VA	CERA	Initial		41.200	GLTC04 CNF Form_v1_cln - 04CBUL22G-VA (final).pdf
2	Approved 11/29/2022	Certificate Amendment - Enhanced Contingent Non-Forfeiture Benefit		CERA	Initial		41.100	GLTC04 ECNF Form_v1_cln- 04ECBUL22G- APO-VA.pdf
3	Filed 11/29/2022	Frequently Asked Questions	GLTC-FAQ- VA	OTH	Initial		47.600	GLTC CH FAQ ECNF_v3_cln_VA .pdf
4	Filed 11/29/2022	Certificate Holder Letter	CHGLTC- T1-VA	OTH	Initial		51.400	GLTC CH ECNF T1-2_cln_v6_VA .pdf
5	Filed 11/29/2022	Certificate Holder Letter	CHGLTC- T2-VA	ОТН	Initial		51.200	GLTC CH ECNF T2-2_cln_v6_VA .pdf
6	Filed 11/29/2022	Group Long Term Care Request to Change Coverage	AE1181-VA	ОТН	Initial		50.100	AE1181-VA.pdf

Form Type Legend:

ADV	Advertising	AEF	Application/Enrollment Form
CER	Certificate	CERA	Certificate Amendment, Insert Page, Endorsement or Rider
DDP	Data/Declaration Pages	FND	Funding Agreement (Annuity, Individual and Group)
MTX	Matrix	NAP	Network Access Plan
NOC	Notice of Coverage	ОТН	Other
OUT	Outline of Coverage	PJK	Policy Jacket
POL	Policy/Contract/Fraternal Certificate	POLA	Policy/Contract/Fraternal Certificate: Amendment, Insert Page, Endorsement or Rider
PRC	Provider Contract/Provider Addendum/Provider Leading Agreement	PRD	Provider Directory



Unum Life Insurance Company of America [2211 Congress Street Portland, ME 04122]

CERTIFICATE AMENDMENT (Amendments may be made only by the Company at its Home Office.)

Contingent Benefit Upon Lapse

Since your premium rates have been increased by us, and you have elected not to continue paying premiums, your coverage under this Certificate will continue automatically with the same level of benefits, except for a reduction in your Maximum Benefit Amount. Your Maximum Benefit Amount under this provision will be equal to the total premium paid up to the date you stopped paying premiums.

In no event will your Maximum Benefit Amount:

- be less than one (1) Nursing Facility Monthly Benefit payment; or
- exceed that which would have been paid had you not stopped paying premiums.

If your coverage includes Inflation Protection, no Inflation Protection increases will be made after the end of the period for which premiums were last remitted to us for your coverage under this Certificate.

The effective date of this change is [January 1, 2019].

The Certificate's terms and provisions will apply other than as stated in this amendment.

Dated at Portland, Maine this [1st day of January, 2019].

Unum Life Insurance Company of America

Secretary

By: 1. MI IM



Unum Life Insurance Company of America [2211 Congress Street Portland, ME 04122]

CERTIFICATE AMENDMENT (Amendments may be made only by the Company at its Home Office.)

Enhanced Contingent Benefit Upon Lapse

Since your premium rates have been increased by us, and you have elected not to continue paying premiums, your coverage under this Certificate will continue automatically except that each benefit amount, including your Lifetime Maximum Benefit amount, will be reduced according to the calculation described below:

The reduction in each benefit is determined by multiplying each benefit amount in effect immediately prior to the effective date of this Amendment by (0.90), then multiplying the resulting amount by the ratio of the number of completed months of paid premiums divided by the total number of months in your Accelerated Payment Option period.

In no event will your Lifetime Maximum Benefit:

- be less than one (1) Nursing Facility Monthly Benefit payment; or
- exceed that which would have been paid had you not stopped paying premiums.

If your coverage includes Inflation Protection, no Inflation Protection increases will be made after the end of the period for which premiums were last remitted to us for your coverage under this Certificate.

The effective date of this change is [January 1, 2019].

The Certificate's terms and provisions will apply other than as stated in this amendment.

Dated at Portland, Maine this [1st day of January, 2019].

Unum Life Insurance Company of America

By: /- /////////
Secretary





Group Long Term Care Frequently Asked Questions for Certificateholders (Insureds)

Q. Why is Unum increasing premiums on these policies?

A. The premium increases we are requesting are due to a number of factors that impact the pricing for long term care coverage, including persistency, mortality and morbidity. The LTC industry is still relatively young and claims experience trends are emerging differently than originally priced. As more customers recognize the value of LTC coverage, they are retaining this important insurance coverage at higher rates than anticipated, resulting in more claims as insureds age. This adjustment will result in your coverage's cost being more closely aligned with current products being sold in the market today.

Q. I thought my premiums were guaranteed never to increase. Am I being singled out for this rate increase because of my age or health?

A. No. As a guaranteed renewable insurance product, your premiums for long term care insurance will never increase based on changes in your age or health, however, the premiums for an entire class of customers can increase if necessary to ensure future claims obligations can be met. A change in premiums on a class basis must be actuarially justified.

Q. When will my premiums increase?

A. Premium for your inforce coverage will increase on the group policy's plan anniversary date. If your premium is paid through payroll deductions, your employer will be provided the increased amount to update your deductions. If you pay your premium directly to Unum, and the anniversary date is off cycle from your regular billing cycle, a bill will be sent to you for any prorated amounts from the time of the anniversary date through your next billing cycle.

Q. Why did I receive an off-cycle bill for additional premium due?

A. An off-cycle bill (commonly referred to as an "interim bill") is sent to you when a change in your premium is applied in the middle of your billing cycle, but after you already received a bill for that billing cycle. The interim bill is for the additional amount due for that billing cycle and it is due upon receipt.

Q. When I compare the current cost to the new cost, the increase is not the exact percentage stated in the letter. Why?

A. The actual increase percentage can and will vary based on the certificateholder's insurance age and current coverage amount. The percentage outlined in the letter is applied at the base rate level that supports all similar group long term care policies. Certain pricing adjustments are then applied to the base rates based on the demographics of the group policyholder. As a result of these adjustments and due to premium rate calculation rounding rules, the increase for the certificateholder's coverage may be higher or lower than the stated increase.

Q. As a direct billed participant, my premium payment is withdrawn directly from my bank account. Do I need to complete a new bank withdrawal request for Unum to withdraw the increased premium amount?

A. No. The premium will continue to be automatically withdrawn from your account unless you advise us otherwise. The new premium amount will be withdrawn beginning with the billing period that includes your rate increase effective date.

Q. Will my premiums be increased again in the future?

A. It is possible that future increases to your premium may be needed based on a number of developing factors, including overall claims experience.





Group Long Term Care Frequently Asked Questions for Certificateholders (Insureds)

Q. What are the options to reduce my cost?

A. There are defined plan options that may be available to you under the group policy from which you obtained your current coverage. You can find these options by either visiting the informational website address provided in your premium increase notification letter or by contacting our Customer Service Center to obtain a paper enrollment kit. We recommend that you consult with a broker or other financial advisor prior to reducing your coverage. If you have additional questions, you can call our Customer Service Center at [1-800-227-4165].

Q. How do I change my coverage?

A. To decrease your coverage, please complete a *Request to Change Coverage* form. Additional state-required forms may also need to be completed. You can obtain the necessary forms by visiting the informational website created for the group plan or you can request a paper enrollment kit by contacting the Unum Customer Service Center at [1-800-227-4165].

Q. How long do I have to make any coverage changes before the effective date of the increase?

A. Any requests to change coverage should be received 30 days in advance of the effective date of the increase. If we do not receive your Request to Change Coverage form at least 30 days in advance, your next billing statement will reflect the increased premium rate applied to your prior coverage through the date when your requested coverage change becomes effective.

Q. How long do I have to continue paying premium in order to be eligible for the Contingent Benefit Upon Lapse?

A. You must pay premium for coverage up to the rate increase effective date in order to be eligible for the Contingent Benefit Upon Lapse.

Q. How can I estimate my Contingent Benefit Upon Lapse Benefit amount in the event that I cancel my coverage?

A. If you discontinue paying premium for your coverage within the first 120 days following your rate increase effective date, then your coverage will automatically be placed in Contingent Benefit Upon Lapse status. Contingent Benefit Upon Lapse status means that your current Lifetime Maximum benefit will be reduced to the greater of the total premium paid into the policy for your coverage or one Facility monthly benefit amount. To estimate the total premium paid into the policy for your coverage, multiply your monthly premium by the number months that your coverage was inforce and then compare this total premium amount to your current Facility monthly benefit (adjusted for inflation, if your coverage includes an automatic inflation provision). Your new reduced Lifetime Maximum benefit will be the greater of these two amounts. Note: If you changed your coverage at any point prior to the rate increase effective date and had a corresponding change in premium, then please contact our Customer Service Center at [1-800-227-4165] for assistance in determining the estimated total premium paid into the policy for your coverage.

Q. What is the Enhanced Contingent Benefit Upon Lapse for Accelerated Payment Option (APO)?

A. The Enhanced Contingent Benefit Upon Lapse is only available to participants who are enrolled in an APO and who have paid a certain percentage of the expected premium in the APO schedule. As a participant enrolled in an APO, if you qualify for the Enhanced Contingent Benefit Upon Lapse, the benefit may be of higher value to you than the standard Contingent Benefit Upon Lapse option. If you are enrolled in an APO, you will receive a letter notifying you of the options available to you.





Group Long Term Care Frequently Asked Questions for Certificateholders (Insureds)

- Q. I am currently receiving Long Term Care benefits. Do I have to remit the new premium?
- A. The premium increase will not impact your current claim. Your policy will continue to provide you with benefits in accordance with the terms of the coverage you purchased. The policy provision that waives premium will continue to work the same way. If your premiums are currently being waived, the new premium will also be waived until such time as you are no longer eligible for waiver of premium, as stated in your certificate of coverage. You will have to pay the increased premium only after you return to a premium paying status.
- Q. Whom should I contact at Unum if I have additional questions about this rate increase?
- A. If you have additional questions, please contact the Unum Customer Service Center at [1-800-227-4165], Monday through Friday from 8 a.m. to 8 p.m. Eastern time.





[Date Created]

RE: Notice of Long Term Care Premium Rate Increase

[Group Policyholder Name]

Group Long Term Care Policy Number [Policy Number]

Dear Certificateholder:

The purpose of this letter is to notify you of an upcoming premium rate increase that may impact your premiums.

You made the prudent financial decision to purchase long term care coverage to give yourself more control over the type of care you may want in the future. Our responsibility is to ensure that the coverage you purchased and planned for is available when you need it.

We take this responsibility very seriously, which is why after careful consideration, we have determined that it is necessary to raise premiums for your coverage. Details regarding your premium increase are outlined below. After reviewing this letter, if you have questions about your increase, please contact our Customer Service Center at [1-800-227-4165] and a service representative can assist you. Representatives are available Monday through Friday from 8:00 am to 8:00 pm EST.

As a guaranteed renewable insurance product, your premiums for long term care insurance will never increase based on changes in your age or health, however, the premiums for an entire class of customers can increase, if necessary, to ensure future claims obligations can be met. A change in premiums on a class basis must be actuarially justified.

The rate increase request was reviewed by the Virginia State Corporation Commission and was found to be compliant with applicable Virginia laws and regulations addressing long-term care insurance. All premium rate filings are available for public inspection and may be accessed online through the State Corporation Commission's webpage at https://scc.virginia.gov/boi/SERFFInquiry/LtcFilings.aspx

The increase in pricing will vary by inflation coverage, and be incrementally applied over a two-year period. The timing of the increases will be based on the plan anniversary date of the group policy:

The first incremental increase will be effective on [1st Anniversary Date.]

- [For coverage that includes Simple inflation, the increase will be approximately x%.].
- [For coverage that includes Compound inflation, the increase will be approximately x%.]
- [For coverage that includes Consumer Price Index (CPI) Benefit, the increase will be approximately x%.]

The second incremental increase will be effective on [2nd Anniversary Date.]

- [For coverage that includes Simple inflation, the increase will be approximately x%.].
- [For coverage that includes Compound inflation, the increase will be approximately x%.]
- [For coverage that includes Consumer Price Index (CPI) Benefit, the increase will be approximately x%.]

Since each incremental increase is compounded on the prior year's increase, the total cumulative increase after both incremental increases are applied will be:

- [For coverage that includes Simple inflation, approximately x%.]
- [For coverage that includes Compound inflation, approximately x%.]
- [For coverage that includes Consumer Price Index (CPI) Benefit, approximately x%.]

You are receiving this notification package because our records show that you and/or your spouse have inflation coverage. Your specific premium increase is dependent on the inflation coverage for which you are enrolled. If coverage does not include inflation, no pricing increase will be applied.

To obtain your new premium, you may contact our Customer Service Center at [1-800-227-4165] and a service representative can assist you.

The group policy is a guaranteed renewable policy that renews on each plan anniversary. Therefore, your new long term care premium will take effect on the plan anniversary date of the group policy which is [Anniversary Date.]

Please note that if you are currently receiving long term care benefits and you are on waiver of premium, this increase will be deferred until your premium payments resume.

Why the increase in premium

It is important that our policies remain priced at an appropriate level to meet our future claims obligations. Premium increases are necessary to support higher claims associated with insureds living longer, filing more claims, and staying on claim longer, which are expected to be higher than initially anticipated and for which the policy was priced. These new premiums will better reflect overall claims rates and other factors related to the pricing of long term care coverage. You have a right to request a copy of your premium rate schedule at any time.

Please be assured that you have not been singled out and this is not a reflection of any previous claims history you may have had, if any. Instead, the premium increase will affect a broad group of certificateholders issued similar coverage under similar group policies. Additional increases may be necessary in the future. Of course, we will notify you at least 75 days prior to any future increase.

Coverage change options

We do not take this action lightly and we recognize that raising premiums may have a significant impact on you. If you wish to keep your exact coverage without any changes, no further action is required on your part and the new premium will automatically take effect on [Anniversary Date.]

You may also consider reducing your coverage to help manage the impact of the premium increase. Options may include any one or a combination of the following items depending on your specific coverage. Please note that if there are future premium increases, similar options for reducing the increase will be offered at that time. *All options available are not of equal value*:

- a. Decreasing your benefit amount
- b. Decreasing the duration of your benefits
- c. Decreasing your plan choice (such as home care coverage, or inflation)

Any reduction in coverage needs to be within the plan options offered in the group policy. The value associated with any decrease in coverage will depend on your specific coverage, the age

that you purchased your coverage, and the plan options available to you in the group long term care policy through which your coverage was issued. Please note that you may request coverage changes at any time, not just at the time of a rate increase.

You can obtain the necessary forms to change your coverage by visiting the informational website created specifically for this group policy, or you can request this information by contacting the Unum Customer Service Center at 1-800-227-4165.

To review your plan change options, please visit the website specially designed for this group policy:

[Employer specific informational website link to be input here in bold]

This site provides an interactive cost calculator that can assist you in modeling out the coverage change options that may be available to you. To change your coverage, please complete a Request to Change Coverage form.

Your current coverage

To assist you in evaluating your coverage change options, we have enclosed a statement outlining your inforce coverage and your cost for this coverage before the increase in pricing.

If you would like more information about the cost of long term care specific to your area, please see the following website: https://www.genworth.com/aging-and-you/finances/cost-of-care.html. Cost of care information provided on this website may be useful as you review your current Long Term Care Insurance coverage.

Contingent Benefit Upon Lapse

If you pay the premiums due through the last day before the premium increase is scheduled to go into effect for you, and then stop paying premiums on or within 120 days of the rate increase effective date, then your coverage will automatically be converted to a Contingent Benefit Upon Lapse. This benefit will result in an automatic reduction in your current lifetime maximum benefit, which would be equal to the greater of (i) one Facility Monthly Benefit payment or (ii) the total premium paid into the policy for your coverage (including any employer contributions, if applicable). In no event will your Maximum Benefit Amount exceed the maximum benefits which would be payable if the coverage had remained in a premium paying status.

Important: This Contingent Benefit Upon Lapse would not supersede any other non-forfeiture provision currently included in your policy that would be of equal or greater value to you.

Enhanced Contingent Benefit Upon Lapse for Accelerated Payment Option (APO)

If you are currently enrolled in an APO under this plan (where you chose, at the time of purchase, to pay premiums within a fixed and accelerated time period), you may be eligible for an Enhanced Contingent Benefit Upon Lapse that may be of higher value than what is outlined above. As a result, you will receive a separate packet of information in the next few weeks with specific details pertaining to the Contingent Benefit Upon Lapse that is available to you. (Please check the enclosed statement outlining your coverage to see if you have an APO). If you have an APO, please do not take Contingent Benefit Upon Lapse action until you receive the information packet.

To obtain more information about your options and how they impact your coverage, we recommend that you call our Customer Service Center at [1-800-227-4165] and a service representative can assist you.

We have enclosed additional information about this pricing increase in the Frequently Asked Questions document. Please carefully review all enclosed materials and the premium increase history summary. If you decide to make any changes to your coverage, updated materials reflecting your requested coverage change and your revised premium rate will be provided. You have a right to request a copy of your premium rate and a confirmation of your coverage at any time.

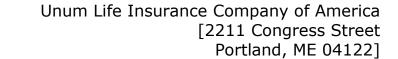
Again, we value your business. Thank you for choosing Unum and for the trust you place in our company.

Sincerely,

Unum Long Term Care Operations

Attachments:

Administrative Statement: Outline of Inforce Coverage Group Long Term Care Premium History Summary Group Long Term Care Frequently Asked Questions





[Date Created]

RE: Notice of Long Term Care Premium Rate Increase

[Group Policyholder Name]

Dear Certificateholder:

You made the prudent financial decision to purchase long term care coverage to give yourself more control over the type of care you may want in the future. Our responsibility is to ensure that the coverage you purchased and planned for is available when you need it.

We take this responsibility very seriously, which is why after careful consideration, we have determined that it is necessary to raise premiums for your coverage. Details regarding your premium increase are outlined below. After reviewing this letter, if you have questions about your increase, please contact our Customer Service Center at [1-800-227-4165] and a service representative can assist you. Representatives are available Monday through Friday from 8:00 am to 8:00 pm EST.

As a guaranteed renewable insurance product, your premiums for long term care insurance will never increase based on changes in your age or health, however, the premiums for an entire class of customers can increase if necessary, to ensure future claims obligations can be met. A change in premiums on a class basis must be actuarially justified.

The rate increase request was reviewed by the Virginia State Corporation Commission and was found to be compliant with applicable Virginia laws and regulations addressing long-term care insurance. All premium rate filings are available for public inspection and may be accessed online through the State Corporation Commission's webpage at https://scc.virginia.gov/boi/SERFFInguiry/LtcFilings.aspx

The premium increase varied by inflation coverage, and was scheduled to be incrementally applied over a two (2) year period.

The intent of this letter is to inform you that the last of the two scheduled premium increases will be applied on the plan anniversary of [Anniversary Date]:

- [For coverage that includes Simple inflation, the increase will be approximately x%.]
- [For coverage that includes Compound inflation, the increase will be approximately x%.]
- [For coverage that includes Consumer Price Index (CPI) Benefit, the increase will be approximately x%.]

You are receiving this notification package because our records show that you and/or your spouse have inflation coverage. Your specific premium increase is dependent on the inflation coverage for which you are enrolled. If coverage does not include inflation, no pricing increase will be applied.

To obtain your new premium, you may contact our Customer Service Center at [1-800-227-4165] and a service representative can assist you.

The group policy is a guaranteed renewable policy that renews on each plan anniversary. Therefore, your new long term care premium will take effect on the plan anniversary date of the group policy which is [Anniversary Date.]

Please note that if you are currently receiving long term care benefits and you are on waiver of premium, this increase will be deferred until your premium payments resume.

Why the increase in premium

It is important that our policies remain priced at an appropriate level to meet our future claims obligations. Premium increases are necessary to support higher claims associated with insureds living longer, filing more claims, and staying on claim longer, which are expected to be higher than initially anticipated and for which the policy was priced. These new premiums will better reflect overall claims rates and other factors related to the pricing of long term care coverage. You have a right to request a copy of your premium rate schedule at any time.

Please be assured that you have not been singled out and this is not a reflection of any previous claims history you may have had, if any. Instead, the premium increase will affect a broad

group of certificateholders issued similar coverage under similar group policies. Additional increases may be necessary in the future. Of course, we will notify you at least 75 days prior to any future increase.

Coverage change options

We do not take this action lightly and we recognize that raising premiums may have a significant impact on you. If you wish to keep your exact coverage without any changes, no further action is required on your part and the new premium will automatically take effect on [Anniversary Date.]

You may also consider reducing your coverage to help manage the impact of the premium increase. Options may include any one or a combination of the following items depending on your specific coverage. Please note that if there are future premium increases, similar options for reducing the increase will be offered at that time. *All options available are not of equal value*:

- a. Decreasing your benefit amount
- b. Decreasing the duration of your benefits
- c. Decreasing your plan choice (such as home care coverage, or inflation)

Any reduction in coverage needs to be within the plan options offered in the group policy. The value associated with any decrease in coverage will depend on your specific coverage, the age that you purchased your coverage, and the plan options available to you in the group long term care policy through which your coverage was issued. Please note that you may request coverage changes at any time, not just at the time of a rate increase.

You can obtain the necessary forms to change your coverage by visiting the informational website created specifically for this group policy, or you can request this information by contacting the Unum Customer Service Center at 1-800-227-4165.

To review your plan change options and/or to obtain a long term care enrollment kit, please visit the website specially designed for this group policy:

[Employer specific informational website link to be input here in bold]

This site provides an interactive cost calculator that can assist you in modeling out the coverage change options that may be available to you. To change your coverage, please complete a Request to Change Coverage form.

Your current coverage

To assist you in evaluating your coverage change options, we have enclosed a statement outlining your inforce coverage and your cost for this coverage before the increase in pricing.

If you would like more information about the cost of long term care specific to your area, please see the following website: https://acl.gov/ltc/costs-and-who-pays/costs-of-care

Cost of care information provided on this website may be useful as you review your current Long Term Care Insurance coverage.

Contingent Benefit Upon Lapse

If you pay the premiums due through the last day before the premium increase is scheduled to go into effect for you, and then stop paying premiums on or within 120 days after that date, then your coverage will automatically be converted to a Contingent Benefit Upon Lapse. This benefit will result in an automatic reduction in your current lifetime maximum benefit, which would be equal to the greater of (i) one Facility Monthly Benefit payment or (ii) the total premium paid into the policy for your coverage (including any employer contributions, if applicable). In no event will your Maximum Benefit Amount exceed the maximum benefits which would be payable if the coverage had remained in a premium paying status.

Important: This Contingent Benefit Upon Lapse would not supersede any other non-forfeiture provision currently included in your policy that would be of equal or greater value to you.

Enhanced Contingent Benefit Upon Lapse for Accelerated Payment Option (APO)

If you are currently enrolled in an APO under this plan (where you chose, at the time of purchase, to pay premiums within a fixed and accelerated time period), you may be eligible for an Enhanced Contingent Benefit Upon Lapse that may be of higher value than what is outlined above. As a result, you will receive a separate packet of information in the next few weeks with specific details pertaining to the Contingent Benefit Upon Lapse benefit that is available to you. (Please check the enclosed statement outlining your coverage to see if you have an APO). If you have an APO, please do not take Contingent Benefit Upon Lapse action until you receive the information packet.

To obtain more information about your options and how they impact your coverage, we recommend that you call our Customer Service Center at [1-800-227-4165] and a service representative can assist you.

We have enclosed additional information about this pricing increase in the Frequently Asked Questions document. Please carefully review all enclosed materials and the premium increase history summary. If you decide to make any changes to your coverage, updated materials reflecting your requested coverage change and your revised premium rate will be provided. You have a right to request a copy of your premium rate and a confirmation of your coverage at any time.

Again, we value your business. Thank you for choosing Unum and for the trust you place in our company.

Sincerely,

Unum Long Term Care Operations

Attachments:

Administrative Statement: Outline of I Coverage Group Long Term Care Premium History Summary Group Long Term Care Frequently Asked Questions



GROUP LONG TERM CARE REQUEST TO CHANGE COVERAGE

Return Form to:

Long Term Care Operations 2211 Congress Street Portland, ME 04122 Fax: 207-541-7606

Use this form to change your voluntary Group Long Term Care (GLTC) insurance coverage amount. If you wish to increase your coverage, you will need to complete a Benefit Election Form and Evidence of Insurability if applicable.

SECTION 1: INSURED INFORMATION SECTION (Complete all f	ields)
Policy or BL# Div# Div#	
Group Policyholder Name:	
Group Policyholder Address:	
Insured Name:	
☐ Check here to report an address change	
Insured's Mailing Address	
Social Security Number:	
Relationship to Employee (if applicable):	Employee Name:
Email Address: Daytime	Telephone Number
SECTION 2: CHANGE IN COVERAGE SECTION (Complete all a Refer to your certificate of insurance or enrollment kit for cove under the group policy.	pplicable fields, sign and date the form) rage options and rates available to you
CANCEL coverage, complete the following (check all that apply) □ Cancel all Group Long Term Care Coverage □ Cancel Spouse Group Long Term Care Coverage - Spouse ma 7712-04 (Elect to Continue Group Long Term Care Insurance). DECREASE coverage complete the following (check all that app □ Decrease my benefit amount to: □ Decrease my EXERCISE Non-Forfeiture Option: □ I wish to exercise the non-forfeiture option in my plan. Please select the appropriate non-forfeiture option below: □ Shorten Benefit Period □ Reduced Paid Up □ Continger TERMINATE your Inflation provision, complete the following: □ I wish to terminate the Inflation provision included in my coverace coverage will no longer receive automatic inflation credits. (No option that is only available to you if the group policy through vecoverage option that does not include the Inflation provision.) CHANGE your billing mode, complete the following: □ Annual premium □ Semi-annual premium □ Quarterly premulation my premium □ Semi-annual premium □ Quarterly premulation premium □ Semi-annual	y continue coverage by completing form ly): ny benefit duration to: y coverage to the employer funded plan, if any. nt, if applicable age. Once terminated, I understand that my te: Terminating the inflation provision is an which your coverage was issued offers a
Insured Signature:	
The effective date of this change will be based on your signature date	e and/or the terms of your policy.

Retain a copy of this form for your records. Return completed form to the address reflected at the top of the form. Please contact Unum's Customer Service Center @ 1-800-227-4165 if you have any questions.

Unum is a registered trademark and marketing brand of Unum Goup and its insuring subsidiaries. Group long term care insurance is underwritten by Unum Life Insurance Company of America. In New York: underwritten by First Unum Life Insurance Company.

State: Virginia Filing Company: Unum Life Insurance Company of America

TOI/Sub-TOI: LTC03G Group Long Term Care/LTC03G.001 Qualified

Product Name:2019 GLTC04 RATE INITIATIVE - PHASE IProject Name/Number:2019 GLTC04 RATE INITIATIVE - PHASE I/

Rate Information

Rate data applies to filing.

Filing Method:

Rate Change Type: %

Overall Percentage of Last Rate Revision: %

Effective Date of Last Rate Revision:

Filing Method of Last Filing:

SERFF Tracking Number of Last Filing:

Company Rate Information

	Overall %	Overall %	Written Premium	Number of Policy	Written	Maximum %	Minimum %
Company	Indicated	Rate	Change for	Holders Affected	Premium for	Change	Change
Name:	Change:	Impact:	this Program:	for this Program:	this Program:	(where req'd):	(where req'd):
Unum Life Insurance Company of America	26.300%	26.300%	\$538,940	4,375	\$2,052,941	64.900%	0.000%

State: Virginia Filing Company: Unum Life Insurance Company of America

TOI/Sub-TOI: LTC03G Group Long Term Care/LTC03G.001 Qualified

Product Name:2019 GLTC04 RATE INITIATIVE - PHASE IProject Name/Number:2019 GLTC04 RATE INITIATIVE - PHASE I/

Rate/Rule Schedule

Item No.	Schedule Item Status	Document Name	Affected Form Numbers (Separated with commas)	Rate Action	Rate Action Information	Attachments
1		Compound Inflation Rates (current, tier 1, tier 2) - VA	GLTC04, RGLTC04	Revised	Previous State Filing Number: rates were filed prior to SERFF Percent Rate Change Request:	Compound Inflation Rates (current - tier 1 - tier 2) - VA.xlsx,
2		Simple Inflation Rates (current, tier 1, tier 2) - VA	GLTC04, RGLTC04	Revised	Previous State Filing Number: rates were filed prior to SERFF Percent Rate Change Request:	Simple Inflation Rates (current - tier 1 - tier 2) - VA.xlsx,

State: Virginia Filing Company: Unum Life Insurance Company of America

TOI/Sub-TOI: LTC03G Group Long Term Care/LTC03G.001 Qualified

Product Name:2019 GLTC04 RATE INITIATIVE - PHASE IProject Name/Number:2019 GLTC04 RATE INITIATIVE - PHASE I/

Attachment Compound Inflation Rates (current - tier 1 - tier 2) - VA.xIsx is not a PDF document and cannot be reproduced here.

Attachment Simple Inflation Rates (current - tier 1 - tier 2) - VA.xIsx is not a PDF document and cannot be reproduced here.

Filing Company:

Unum Life Insurance Company of America

TOI/Sub-TOI: LTC03G Group Long Term Care/LTC03G.001 Qualified

Product Name:2019 GLTC04 RATE INITIATIVE - PHASE IProject Name/Number:2019 GLTC04 RATE INITIATIVE - PHASE I/

Virginia

Supporting Document Schedules

State:

Satisfied - Item:	Certification of Compliance
Comments:	
Attachment(s):	Certificate of Compliance.pdf
Item Status:	Received & Acknowledged
Status Date:	02/21/2020
Satisfied - Item:	Product Checklist
Comments:	The checklist has been reviewed.
Attachment(s):	
Item Status:	Received & Acknowledged
Status Date:	02/21/2020
Satisfied - Item:	L&H Actuarial Memorandum
Comments:	
Attachment(s):	ActMemo - VA.pdf
Item Status:	Received & Acknowledged
Status Date:	10/24/2022
Satisfied - Item:	Long Term Care Insurance Rate Request Summary
Comments:	
Attachment(s):	Rate Increase Narrative.pdf LTC Rate Request Summary.pdf
Item Status:	Received & Acknowledged
Status Date:	10/24/2022
Satisfied - Item:	L&H Readability - Health
Comments:	
Attachment(s):	READABILITY CERTIFICATION.pdf
Item Status:	Received & Acknowledged
Status Date:	10/24/2022
Satisfied - Item:	Exhibit 1a-b - Nationwide Loss Ratio- 2 Tier Rate Incr
Comments:	
Attachment(s):	Exhibit 1a-b - Nationwide Loss Ratio- 2 Tier Rate Incr.pdf Exhibit 1a-b - Nationwide Loss Ratio- 2 Tier Rate Incr.xlsx

State: Virginia Filing Company: Unum Life Insurance Company of America

TOI/Sub-TOI: LTC03G Group Long Term Care/LTC03G.001 Qualified

Product Name:2019 GLTC04 RATE INITIATIVE - PHASE IProject Name/Number:2019 GLTC04 RATE INITIATIVE - PHASE I/

rioject Name/Number.	2019 GET CO4 NATE INITIATIVE - FITAGE I/
Item Status:	Received & Acknowledged
Status Date:	10/24/2022
Satisfied - Item:	Exhibit 2a-b - Virginia Loss Ratios - 2 Tier Rate Incr
Comments:	
Attachment(s):	Exhibit 2a-b - Virginia Loss Ratios - 2 Tier Rate Incr.pdf Exhibit 2a-b - Virginia Loss Ratios- 2 Tier Rate Incr.xlsx
Item Status:	Received & Acknowledged
Status Date:	10/24/2022
Satisfied - Item:	EXHIBIT 3 - Nationwide Filing Status
Comments:	
Attachment(s):	Exhibit 3 - Current Nationwide Filing Status.xlsx
Item Status:	Received & Acknowledged
Status Date:	10/24/2022
Satisfied - Item:	Exhibit 4a Virginia Durational Loss Ratio A-E - Compound Inflation
Comments:	
Attachment(s):	Exhibit 4a Virginia Durational Loss Ratio A-E - Compound Inflation.pdf Exhibit 4a Virginia Durational Loss Ratio A-E - Compound Inflation.xlsx
Item Status:	Received & Acknowledged
Status Date:	10/24/2022
Satisfied - Item:	Exhibit 4b Virginia Durational Loss Ratio A-E - Simple Inflation
Comments:	
Attachment(s):	Exhibit 4b Virginia Durational Loss Ratio A-E - Simple Inflation.pdf Exhibit 4b Virginia Durational Loss Ratio A-E - Simple Inflation.xlsx
Item Status:	Received & Acknowledged
Status Date:	10/24/2022
Satisfied - Item:	Exhibit 5a Nationwide Durational Loss Ratio AtoE - Compound Inflation
Comments:	
Attachment(s):	Exhibit 5a Nationwide Durational Loss Ratio AtoE - Compound Inflation.pdf Exhibit 5a Nationwide Durational Loss Ratio AtoE - Compound Inflation.xlsx
Item Status:	Received & Acknowledged
Status Date:	10/24/2022
Satisfied - Item:	Exhibit 5b Nationwide Durational Loss Ratio AtoE - Simple Inflation

Filing Company:

Unum Life Insurance Company of America

TOI/Sub-TOI: LTC03G Group Long Term Care/LTC03G.001 Qualified

Product Name:2019 GLTC04 RATE INITIATIVE - PHASE IProject Name/Number:2019 GLTC04 RATE INITIATIVE - PHASE I/

Virginia

State:

Comments:	
Attachment(s):	Exhibit 5b Nationwide Durational Loss Ratio AtoE - Simple Inflation.pdf Exhibit 5b Nationwide Durational Loss Ratio AtoE - Simple Inflation.xlsx
Item Status:	Received & Acknowledged
Status Date:	10/24/2022
Satisfied - Item:	Exhibit 6 - LTC Lives Diagram Example
Comments:	
Attachment(s):	Exhibit 6 - LTC Lives Diagram Example.pdf
Item Status:	Received & Acknowledged
Status Date:	10/24/2022
Satisfied - Item:	Exhibit 7(a,b) - Nationwide Lives Projection
Comments:	
Attachment(s):	Exhibit 7(a,b) - Nationwide Lives Projection.xlsx
Item Status:	Received & Acknowledged
Status Date:	10/24/2022
Satisfied - Item:	Premium Increase History
Comments:	
Attachment(s):	GLTC Prem Inc History_v2_VA.pdf
Item Status:	Received & Acknowledged
Status Date:	10/24/2022
Satisfied - Item:	GLTC0419 CH ECNF_v4_cln_VA
Comments:	This has been moved to the form schedule tab per your request.
Attachment(s):	
Item Status:	Withdrawn
Status Date:	10/24/2022
Satisfied - Item:	GLTC0419 CH FAQ ECNF-VA
Comments:	This has been moved to the form schedule tab per your request.
Attachment(s):	
Item Status:	Withdrawn
Status Date:	10/24/2022
Satisfied - Item:	Cover Letter - VA

State: Virginia Filing Company: Unum Life Insurance Company of America

TOI/Sub-TOI: LTC03G Group Long Term Care/LTC03G.001 Qualified

Product Name:2019 GLTC04 RATE INITIATIVE - PHASE IProject Name/Number:2019 GLTC04 RATE INITIATIVE - PHASE I/

Comments:	
Attachment(s):	Cover Letter - VA.pdf
Item Status:	Received & Acknowledged
Status Date:	02/21/2020
Satisfied - Item:	Exhibit 9 - Prospective Present Value Loss Ratio Test
Comments:	
Attachment(s):	Exhibit 9 - Prospective Present Value Loss Ratio Test.xlsx
Item Status:	Received & Acknowledged
Status Date:	10/24/2022
Satisfied - Item:	Exhibit 10a-b Original Pricing - Actual Sales
Comments:	
Attachment(s):	Exhibit 10a-b - Original Pricing - Actual Sales.xlsx
Item Status:	Received & Acknowledged
Status Date:	10/24/2022
Satisfied - Item:	Exhibit 11a-b - Nationwide Loss Ratio
Comments:	
Attachment(s):	Exhibit 11a-b - Nationwide Loss Ratio.pdf Exhibit 11a-b - Nationwide Loss Ratio.xlsx
Item Status:	Received & Acknowledged
Status Date:	10/24/2022
Satisfied - Item:	Objection Response - GLTC04 Virginia
Comments:	
Attachment(s):	Objection Response - GLTC04 Virginia.pdf
Item Status:	Received & Acknowledged
Status Date:	10/24/2022
Satisfied - Item:	VA - 2019 GLTC04 Objection Response 4-13-20
Comments:	
Attachment(s):	VA - 2019 GLTC04 Objection Response 4-13-20.pdf
Item Status:	Received & Acknowledged
Status Date:	10/24/2022
Satisfied - Item:	Objection #4 Responses

State: Virginia Filing Company: Unum Life Insurance Company of America

TOI/Sub-TOI: LTC03G Group Long Term Care/LTC03G.001 Qualified

Product Name:2019 GLTC04 RATE INITIATIVE - PHASE IProject Name/Number:2019 GLTC04 RATE INITIATIVE - PHASE I/

Comments:	
Attachment(s):	Objection #4.pdf
Item Status:	Received & Acknowledged
Status Date:	10/24/2022
Status Date.	10/24/2022
Satisfied - Item:	Sample Certificate Holder Letters
Comments:	
Attachment(s):	GLTC CH ECNF T1-2_v6_VA-Sample.pdf GLTC CH ECNF T2-2_v6_VA-Sample.pdf
Item Status:	Received & Acknowledged
Status Date:	11/29/2022
Satisfied - Item:	Otatana ant of Maniah ilita
Comments:	Statement of Variability
Attachment(s):	Statement of Variability.pdf
Item Status:	Received & Acknowledged
Status Date:	11/29/2022
Status Date.	1 1/29/2022
Satisfied - Item:	Objection Response 3-12-21
Comments:	
Attachment(s):	Objection Response.pdf
Item Status:	Received & Acknowledged
Status Date:	11/29/2022
Satisfied - Item:	Administrative Statement
Comments:	
Attachment(s):	GLTC Administrative Statement (1).pdf
Item Status:	Received & Acknowledged
Status Date:	11/29/2022
Satisfied - Item:	Virginia Objections_Final Responses 1.20.22
Comments:	Virginia Objections_Final Responses 1.20.22
Attachment(s):	Virginia Objections_Final Responses 1.20.22.pdf
Item Status:	Received & Acknowledged
Status Date:	11/29/2022
Olaius Date.	1 1/23/2022
Satisfied - Item:	Sample Request to Change Coverage Form

SERFF Tracking #: UNUM-131865115 State Tracking #: UNUM-131865115 Company Tracking #: 2019 GLTC04 RATE INITIATIVE - PHASE I Filing Company: Unum Life Insurance Company of America State: Virginia TOI/Sub-TOI: LTC03G Group Long Term Care/LTC03G.001 Qualified 2019 GLTC04 RATE INITIATIVE - PHASE I Product Name: Project Name/Number: 2019 GLTC04 RATE INITIATIVE - PHASE I/ **Comments:** Attachment(s): AE1181-VA - Sample.pdf **Item Status:** Received & Acknowledged **Status Date:** 11/29/2022 Satisfied - Item: Sample Contingent Non-Forfeiture Benefit "John Doe" Comments: GLTC04 CNF 04CBUL22G-VA_Sample.pdf Attachment(s): GLTC04 04ECBUL22G-APO-VA_SAMPLE.pdf **Item Status:** Received & Acknowledged **Status Date:** 11/29/2022 Satisfied - Item: **GLTC Administrative Statement Comments:**

GLTC Administrative Statement.pdf

Received & Acknowledged

11/29/2022

Attachment(s): Item Status:

Status Date:

State: Virginia Filing Company: Unum Life Insurance Company of America

TOI/Sub-TOI: LTC03G Group Long Term Care/LTC03G.001 Qualified

Product Name:2019 GLTC04 RATE INITIATIVE - PHASE IProject Name/Number:2019 GLTC04 RATE INITIATIVE - PHASE I/

Attachment Exhibit 1a-b - Nationwide Loss Ratio- 2 Tier Rate Incr.xlsx is not a PDF document and cannot be reproduced here.

Attachment Exhibit 2a-b - Virginia Loss Ratios- 2 Tier Rate Incr.xlsx is not a PDF document and cannot be reproduced here.

Attachment Exhibit 3 - Current Nationwide Filing Status.xlsx is not a PDF document and cannot be reproduced here.

Attachment Exhibit 4a Virginia Durational Loss Ratio A-E - Compound Inflation.xlsx is not a PDF document and cannot be reproduced here.

Attachment Exhibit 4b Virginia Durational Loss Ratio A-E - Simple Inflation.xlsx is not a PDF document and cannot be reproduced here.

Attachment Exhibit 5a Nationwide Durational Loss Ratio AtoE - Compound Inflation.xlsx is not a PDF document and cannot be reproduced here.

Attachment Exhibit 5b Nationwide Durational Loss Ratio AtoE - Simple Inflation.xlsx is not a PDF document and cannot be reproduced here.

Attachment Exhibit 7(a,b) - Nationwide Lives Projection.xlsx is not a PDF document and cannot be reproduced here.

Attachment Exhibit 9 - Prospective Present Value Loss Ratio Test.xlsx is not a PDF document and cannot be reproduced here.

Attachment Exhibit 10a-b Original Pricing - Actual Sales.xlsx is not a PDF document and cannot be reproduced here.

State: Virginia Filing Company: Unum Life Insurance Company of America

TOI/Sub-TOI: LTC03G Group Long Term Care/LTC03G.001 Qualified

Product Name:2019 GLTC04 RATE INITIATIVE - PHASE IProject Name/Number:2019 GLTC04 RATE INITIATIVE - PHASE I/

Attachment Exhibit 11a-b - Nationwide Loss Ratio.xlsx is not a PDF document and cannot be reproduced here.

THE COMPANY HAS REVIEWED THE ENCLOSED POLICY FORMS(S) AND CERTIFIES THAT, TO THE BEST OF ITS KNOWLEDGE AND BELIEF, EACH FORM SUBMITTED IS CONSISTENT AND COMPLIES WITH THE REQUIREMENTS OF TITLE 38.2 OF THE CODE OF VIRGINIA AND THE REGULATIONS PROMULGATED PURSUANT THERETO.

Karen Sabasteanski

Karen Sabasteanski

AVP, Product Compliance

Actuarial Memorandum Group Long Term Care March 2021

Virginia

<u>Form Number</u>	<u>Description</u>	<u>Available for Sale</u>
GLTC04	Long Term Care Indemnity Policy	01/2004-12/2012

RGLTC04 Long Term Care Reimbursement Policy 01/2004-12/2012

These group long term care policy (LTC) forms were actively marketed through 2012. Although no longer actively marketed, new employees have been added after 2012 and can still be added to existing inforce group policies according to employer contracts.

These policy forms were originally priced at the time rate stability under the NAIC model regulation was being adopted. Therefore, this filing is being made according to rate stabilization requirements.

These policy forms were marketed primarily to employers. In a few instances, policyholders may be associations or other eligible groups permitted by state law. Therefore, the terms "employer" and "employee" used in this Memorandum include "group policyholder" and "insured."

We respectfully request non-disclosure of this actuarial memorandum, if your Department grants it.

1. Scope & Purpose

This actuarial memorandum has been prepared for the purpose of demonstrating that the loss ratio requirements have been met in your state with respect to premium rate increases and is not intended to be used for other purposes.

2. Benefit Description

LTC Facility Monthly Benefit: Pays 100% of actual charges up to the monthly maximum benefit for covered services provided in a nursing facility, assisted living facility, hospice facility, rehabilitation facility, Alzheimer's facility or residential care facility. For the indemnity benefit plans, 100% of the monthly maximum benefit is paid for each month of covered services.

Home and Community Care Benefits: For reimbursement benefit plans, 100% of actual charge up to the home and community care monthly benefit maximum is paid for covered services provided by a licensed professional. For indemnity benefit plans, 1/30th of the monthly maximum benefit is paid for each day of covered services. For the Total Choice Home Care Benefit, a family member or an informal caregiver may provide services. Monthly Home and Community Care Benefit percentage options are equal to the following percentages of the LTC Facility Monthly Benefit: 50%, 75%, 100%.

Additional Care Benefit: Includes special services, equipment or Caregiver Training designed to assist the insured while living at home or in other residential housing. The lifetime maximum benefit is \$5,000.

Bed Reservation Benefit: If an insured is receiving an LTC Facility Monthly Benefit and their stay in the LTC Facility is interrupted due to relocation to an acute care facility or a temporary absence and a charge is made to reserve the insured's LTC Facility accommodations, the

policy will pay for each day the patient is absent from the LTC Facility as follows: 1) up to 90 days per calendar year if absence is due to a stay in an acute care facility; or 2) up to 30 days per calendar year for a temporary absence not related to a stay in an acute care facility.

<u>Respite Care Benefit</u>: Provides temporary relief to primary informal caregiver from his or her care giving duties. The policy provides respite care benefits for up to 21 days each calendar year.

<u>Waiver of Premium</u>: Premiums are waived after the insured satisfies the elimination period and is receiving benefits. Premium payments are not waived if the insured is only receiving Respite Care Benefits or Additional Care Benefits.

<u>International Benefits</u>: Provides coverage for Long-Term Care services outside the United States, its territories or possessions or Canada. The Indemnity Amount for these benefits is paid at 75% of the Home Care Monthly Benefit shown in the Schedule of Benefits. This benefit is not available under the LTC Facility only policy.

<u>Benefit Triggers</u>: Based on the insured's inability to perform, without Substantial Assistance from another individual, two (2) or more Activities of Daily Living or the requirement of Substantial Supervision by another individual to protect the insured's health and safety due to Severe Cognitive Impairment. Policy forms RGLTC04 and GLTC04 articulate the provisions required of a qualified long-term care contract under 7702B(b) of the Internal Revenue code of 1986.

Optional Coverage

<u>Accelerated Payment Option (APO)</u>: Accelerated premium payment options include the Single Premium, 5-year, 10-year, To Age 65 and the Greater of 10 Years or To Age 65.

<u>Non-forfeiture</u>: Non-forfeiture options include a cash surrender option or a shortened benefit period option. Both options require at least 3 years of coverage.

Inflation Protection: Options include Simple, CPI, or Compound inflation protection.

<u>Restoration of Benefits</u>: Following recovery from an illness, 100% of the LTC Facility Monthly Benefit and the Lifetime Maximum Benefit will be restored as long as the Lifetime Maximum Benefits have not been depleted. Both these benefits will be restored after: 1) the insured has not been Chronically III for at least 180 consecutive days; and 2) the insured has not received benefits during that 180 consecutive day period.

Return of Premium at Death: Premiums paid for coverage will be refunded to the insured's estate if: 1) this provision has been continuously In Force from its Coverage Effective Date; and 2) proof of insured's death, in the form of a notarized copy of the death certificate, is received. The lump sum payment to be paid to the estate will equal premium payments remitted for coverage from the Coverage Effective date, minus the total benefits already

3. Renewability

These are guaranteed renewable group long term care policies and certificates.

4. Applicability

This filing is applicable to inforce and new certificate holders. These policy forms are no longer being sold in the market. The premium changes will apply to the base rates of the policy. New certificates will be added at the rates applicable at the time they are issued and subject to future applicable rate changes.

5. Actuarial Assumptions

As part of our inforce management of the Company's LTC business, experience is monitored regularly, and studies continue to be expanded and enhanced. The actual-to-expected (A/E) ratio are provided below and are based upon extensive experience studies completed in 2018.

The updated studies utilized 4 additional year of experience since our 2014 assumption update and the study also included a review of third-party industry data.

- The incidence study analyzed numerous claim factors including variations by age, gender, product and funding-method; the updated assumptions reflect recent elevated claims experience.
- a. The claim termination assumptions were strengthened to better align with Unum's experience.
- The mortality review utilized the 2012 Individual Annuitant Mortality industry table as a starting point. Unum used Mortality improvement scales G2 to project the subsequent improvement of mortality rates from 2012 to 2018 which was developed in conjunction with the 2012 IAM mortality table. Selection factors were also applied to the base mortality table to align with company experience.
- b. The ultimate lapse rate assumptions were adjusted to 0.25% for individual coverage and 0.85% for individual multi-life coverage and group coverage to adjust for underreporting of deaths in recent years which has resulted in many deaths being classified as lapses. With these lapse rate adjustments, the Company's total policy termination rate assumptions consistent with Unum experience.

The sections below illustrate how our current assumptions compare to actual experience for key risk assumptions.

Morbidity

The original pricing morbidity assumptions were based on the 1985 National Nursing Home Survey, the 1982 National Long Term Care Survey and its follow-up surveys, company disability experience, and information provided by actuarial consultants. Incidence and claim termination experience are described below.

c. Incidence

Based upon experience from 2007 through 2018, our current assumptions supporting this rate increase request, have a 97.2% actual-to-expected ratio. Under the previous experience study (2014) assumption basis the A/E was 106% over the same experience period.

Attained Age	Actual Count	Projection Assumption A/E
0-59	1,237	106.9%
60-69	3,214	101.8%
70-74	3,447	91.6%
75-79	5,362	94.4%
80-84	6,563	99.7%
85-89	5,388	96.6%
90+	2,434	96.0%
Total	27,645	97.2%

Issue Age	Actual Count	Projection Assumption A/E
0-49	1,137	105.2%
50-54	1,528	102.3%
55-59	3,263	98.2%
60-64	5,789	84.6%
65-69	6,779	103.2%
70-74	5,515	96.4%
75-79	3,023	106.3%
80+	611	105.7%
Total	27,645	97.2%

Policy Duration	Actual Count	Projection Assumption A/E
0-2	348	122.4%
3-5	823	113.0%
6-9	3,412	108.5%
10-14	9,770	99.8%
15+	13,292	91.6%
Total	27,645	97.2%

b. Claim Terminations

The "expected" claim termination assumption supporting this projection is based upon total company (individual and group LTC) experience from 2008 through 2017. The table below provides a comparison of LTC experience vs. the expected claims terminations derived from total company experience.

Disability Age	Actual Count	Current Assumption A/E
0-69	2,152	102%
70-74	1,604	101%
75-79	2,439	97%
80-84	3,047	107%
85-89	2,462	104%
90-94	1,054	85%
95+	159	72%
Total	12,917	100%

Issue Age	Actual Count	Current Assumption A/E
0-54	1,128	99%
55-59	1,352	102%
60-64	2,437	100%
65-69	3,115	103%
70-74	2,773	98%
75-79	1,709	102%
80-84	376	86%
85+	27	114%
Total	12,917	100%

Claim Duration	Actual Count	Current Assumption A/E
0-2	7,078	98%
3-5	4,347	105%
6-9	1,273	101%
10-14	194	77%
15+	25	68%
Total	12,917	100%

Mortality

Under original pricing, the 1983 Group Annuity Mortality Table for males was used for male mortality. The same table was used for female mortality with a six-year adjustment.

The "expected" active life mortality assumptions, supporting this filing, is based on 2012 Individual Annuitant Mortality industry table with modifications to align with company experience from 2007-2018 and produce an aggregate actual-to-expected ratio of 100.5%. Under the previous experience study (2014) assumption basis the A/E was 92% over the same experience period.

Attained Age	Actual Count	Current Assumption A/E
0-59	5,932	110.4%
60-69	8,210	92.6%
70-74	4,550	96.8%
75-79	4,233	99.5%
80-84	3,418	108.1%
85-89	2,353	101.7%
90+	1,140	99.2%
Total	29,834	100.5%

Issue Age	Actual Count	Current Assumption A/E
0-49	4,970	106.1%
50-54	4,186	94.9%
55-59	6,184	89.5%
60-64	6,992	87.0%
65-69	3,625	125.6%
70-74	2,442	120.1%
75-79	1,180	113.6%
80+	255	115.3%
Total	29,834	100.5%

Policy Duration	Actual Count	Current Assumption A/E
0-2	1,691	114.3%
3-5	2,587	117.3%
6-9	5,301	110.8%
10-14	9,219	101.6%
15+	11,037	88.6%
Total	29,834	100.5%

Voluntary Lapses

Original pricing lapse assumptions had ultimate lapse rates of 1-2% and were based on company experience under earlier group LTC policy forms. The table below includes actual lapse rates the company has experienced. The ultimate group lapse rate assumption is 0.85%.

Aggregate Experience			
Policy Duration	Annual Exposure	Lapse Count	Lapse Rate
0-2	1,996,319	387,948	19.43%
3-5	2,041,682	256,617	12.57%
6-9	2,280,234	140,620	6.17%
10-14	1,958,983	60,111	3.07%
15+	1,084,506	22,675	2.09%
Total	9,361,725	867,971	9.27%

Inflation Coverage Only			
Policy Duration	Annual Exposure	Lapse Count	Lapse Rate
0-2	319,160	31,430	9.85%
3-5	499,679	30,440	6.09%
6-9	923,418	25,715	2.78%
10-14	1,042,298	12,786	1.23%
15+	624,733	5,607	0.90%
Total	3,409,288	105,979	3.11%

Expenses

The present value of future expenses, including commissions, are projected to be 27% of premium.

6. Trend Assumptions

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

7. Marketing Method

Coverage under in-force group policies was offered through the worksite marketplace to meet the needs of the employer and employees. Marketing was done through plan administrators and employer sponsorship. This product is no longer marketed.

8. Underwriting Description

This product is subject to medical underwriting. Guarantee issue and modified medical underwriting are available to active employees in an employer group where the plan offered meets specified risk characteristics (e.g. minimum participation requirements, employer funding).

9. Premium Classes

The base policy premium rates vary by issue age, benefit period, inflation option, and home care benefit percentage. Premium rates within a specified group do not vary. Employees, spouses and other eligible participants will have the same premium rates. Premium rates do not change when a participant leaves employment or when the employer terminates the policy. If an employer terminates the policy, all insures are allowed to maintain their coverage at the same premium rates under a direct bill basis.

10. Premium Modes

Available premium modes include annual, semi-annual, quarterly, monthly and monthly electronic funds transfer.

11. Issue Ages

The issue ages are age 18 to 100.

12. Area Factors

Area factors within your state are not used for this product.

13. Average Annual Premium

The table below summarizes the average annual premium per policy, before and after the requested rate increase, both nationwide and in your state based on the proposed rate increases in your state.

	Nationwide		\	/irginia
	before	after the	before	
	the rate	rate	the rate	after the rate
	increase	increase	increase	increase
Total	380	457	469	592

14. Number of Certificateholders

The table below summarizes the number of policies inforce and their annualized premium as of 12/31/2018.

		Number of	
	Number of	Premium Paying	Annualized
	Insured	Insured	Premium
Virginia	5,167	4,375	2,052,941
Nationwide	273,336	255,048	96,943,453

15. Distribution of Business

The table below summarizes, as of 12/31/2018, the distribution of insureds by several characteristics.

This information below is based on national inforce business.

Issue Age	%
<40	41.6%
40-44	12.8%
45-49	13.9%
50-54	13.7%
55-59	10.6%
60-64	5.4%
65+	2.0%

Attained Age	%
<40	29.0%
40-44	10.5%
45-49	12.0%
50-54	12.6%
55-59	13.4%
60-64	11.5%
65-69	6.9%
70+	4.1%

Elimination Period	%
0	0.1%
30	0.1%
60	3.1%
90	96.3%
100+	0.4%

Inflation Type	%
Compound	2.3%
Simple	7.7%
None	90.0%

Benefit Period	%
Periou	
2	22.0%
3	60.2%
4	0.8%
5	1.7%
6	13.0%
10	0.0%
Lifetime	2.3%

This information below is based on Virginia inforce business.

Issue Age	%
<40	40.7%
40-44	13.1%
45-49	13.2%
50-54	13.2%
55-59	10.8%
60-64	6.8%
65+	2.2%

Attained Age	%
<40	26.3%
40-44	11.0%
45-49	11.9%
50-54	11.5%
55-59	13.1%
60-64	12.3%
65-69	7.8%
70+	6.3%

Elimination Period	%
0	0.0%
30	0.0%
60	1.0%
90	98.3%
100+	0.7%

Inflation Type	%
Compound	5.5%
Simple	4.3%
None	90.2%

Benefit Period	%
2	0.6%
3	80.4%
4	0.2%
5	3.4%
6	13.3%
10	0.0%
Lifetime	2.1%

16. History of Previous Rate Revisions

No premium rate increases have previously been approved in your state on the applicable policy forms.

Please see Exhibit 3 for the current filing status of rate increases in other states.

17. Requested Premium Increase

The company is requesting a Nationwide initiative of 89% rate increase on policies with compound inflation (5% and CPI) and 44% on policies with simple inflation. In accordance with your proposal, the company is limiting the rate increase to 2-tiers of 28.4% for a total rate increase of 64.9% on policies with compound inflation and 20.0% for a total increase of 44.0% on policies with simple inflation.

Ninety percent of the insured under these policy forms, in your state, are being excluded from this rate request. The average rate increase request across all insured is 26%.

Please see the table below for a distribution of insureds by inflation type and the requested rate increase amount.

Inflation Type	Requested Rate In- crease	DOI Proposed Rate Increase	Cumulative Increase	Virginia Pre- mium-Paying Insureds
5% CPI/Compound Un-				
capped	89.0%	28.4%/28.4%	64.9%	277
5% Simple Uncapped	44.0%	20.0%/20.0%	44.0%	224
No Inflation	0.0%	0.0%	0.0%	3,874
Total				4,375

18. Reserves

Active life reserves have not been used in this rate increase demonstration. Statutory claim reserves as of 12/31/2018 have been discounted to the date of incurrals of each respective claim and included in the historical incurred claims. Incurred But Not Reported claim reserves as of 12/31/2018 have also been allocated to the expected calendar year of incurrals and included in historical incurred claims and runoff in the projected experience.

19. Past and Future Projected Policy Experience and Demonstration of Satisfaction of Loss Ratio Requirements

Nationwide historical and projected experience for these policy forms with and without the proposed rate increase is provided in Exhibit 1. State specific experience is provided in Exhibit 2. Exhibit 1 and 2 include only premium-paying policies.

The policy counts provided in Exhibit 1 and 2 reflect the number of total coverages. This count is likely to deviate from the number of distinct policyholders, which is provided in sections 14 and 17 above due to policyholders holding multiple coverages.

Historical results reflect earned premium by calendar year with claims captured by incurral year. That is, incurred claims for a calendar represent all payments through December 31,

2018 for a claim incurred in a particular calendar year plus any claim reserve held as of December 31, 2018. Incurred claims also include IBNR held as of December 31, 2018.

Our projection process is based on a first principles basis at the seriatim insured level. At the seriatim level each insured's projection is based on their own coverage, age and effective dates. Please see the attached Exhibit 7 for an example of our projection system of inforce lives and decrements. Please see Exhibit 6 for a diagram of projected lives from our projection system.

Future expected experience is based upon the updated assumptions outlined in Section 5 of this memo plus a 10% provision for moderate adverse experience.

Upon a contingent benefit upon lapse, an active life reserve will be held to support the expected benefits to be paid under the contingent benefit upon lapse. These reserves are not incorporated in the loss ratio demonstration supporting this rate revision.

The discount rate used to accumulate past experience and for discounting future experience is 3.98%, consistent with the average statutory valuation rate for contract reserves on these policy forms.

Projected lifetime experience, assuming the requested rate increase is implemented, is shown in the table below and demonstrates that the lifetime loss ratio exceeds the minimum loss ratio requirement of your state. See Exhibit 1 for more details.

Expected Incurred Nationwide Lifetime Loss Ratios				
	Compound Inflation		Simple	Inflation
	Before Pre-		Before Pre-	
	mium	After Proposed	mium	After Proposed
	Increase	Premium Increase	Increase	Premium Increase
Historical	7%	7%	5%	5%
Future	192%	132%	152%	116%
Lifetime	95%	78%	79%	69%

Expenses are not reflected in the above loss ratio analysis. The present value of future expenses, including current commissions, are projected to be 27% of premium.

20. Cost of Waiting

The loss ratios provided in the first table of section 19 above assume that the proposed rate increase will begin to be implemented in July 2022. If a delay in implementation were to occur, the rate increases necessary to achieve the same target nationwide loss ratio becomes larger, as seen in the table below.

Delay	New Rate Increase Needed		
	Compound Inflation	Simple Inflation	
1 Year	97%	48%	
2 Years	106%	52%	
3 Years	116%	57%	
4 Years	126%	62%	

21. Proposed Effective Date

The rate increase will apply to policies on their policy anniversary date following a 75-day policyholder notification period.

22. Similar Forms

There are no similar forms currently marketed by the company.

23. Actuarial Certification

I am a Fellow of the Society of Actuaries and 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 long-term care insurance premiums and filing for increases in long-term care insurance premiums.

To the best of my knowledge, this rate filing is in compliance with the applicable laws and regulations of this state. This memorandum has been prepared in conformity with all applicable Actuarial Standards of Practice including ASOP Number 8.

I certify that renewal premium rate schedules are not greater than new business premium rates schedules except for differences attributable to benefits. Unum is no longer writing any new group long term care employer policies.

I have taken into consideration the policy design, underwriting, and claims adjudication practices.

To the best of my knowledge, a premium rate increase request of 89% on policies with compound inflation and 44% on policies with simple inflation is necessary to certify that the premium rate schedule is sufficient to cover anticipated cost under moderately adverse experience, if the underlying assumptions are realized and the premium rates schedules are reasonably expected to be sustainable over the life of the policies with no further premium rate schedule increases anticipated. Emerging experience will continue be monitored to assess future rate increase needs.

Rosald L. L. Man

Ronald L. Lucas, F.S.A., M.A.A.A. Vice President, Long Term Care Pricing Unum 2211 Congress St. Portland, ME 04122

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Email: rlucas@Unum.com

Rate Increase Narrative

This narrative summarizes the key information used to develop the rates including the main drivers for the revised rates.

The Company continues to see pricing trends emerging differently than expected, with people living longer, filing more claims, and staying on claim longer than initially anticipated. These trends have led to the need for premium rate increases.

Long Term Care Insurance Rate Request Summary Part 1 – To Be Completed By Company

Company Name and NAIC Number:	Unum Life Insurance Company of America, #416-62235							
SERFF Tracking Number:	UNUM-131865115							
Revised Rates								
Average Annual Premium Per Member:		592						
Average Requested Percentage Rate Change Per Member:		26%						
Range of Requested Rate Changes:		0% - 64.9%						
Number of Virginia Policyhold	ers Affected:	4375						

Form Number	Product Name	Issue Dates	Prior Rate Increases – Date and Percentage Approved	Outlook for Future Rate Increases
GLTC04	Long Term Care Indemnity	1/1/04-12/31/1 8	NA	None anticipated at this time
RGLTC04	Long Term Care Reimbursement	1/1/04-12/31/1 8	NA	None anticipated at this time

Attach a narrative to summarize the key information used to develop the rates including the main drivers for the revised rates.

This document is prepared by the carrier to help explain the requested rate change and is only a summary of the company's request. It is not intended to describe or include all factors or information considered in the review process. For more detailed information, please refer to the complete filing at https://www.scc.virginia.gov/boi/SERFFInquiry/default.aspx. (Rev. 06/19)

READABILITY CERTIFICATION

Company Name: Unum Life Insurance Company of America

NAIC #: 565-62235

This is to certify that the forms listed below have achieved a Flesch Reading Ease Score of:

Form	Form Number	Flesch Score	Words	Sentences	Syllables
Certificateholder Letter	CH-GLTC04-VA	51.4	918	33	1130.29
Certificate Amendment – Contingent Non- Forfeiture	04CNF19G-VA	41.2	202	8	398.78
Certificate Amendment – Enhanced Contingent Non- Forfeiture	04ECNF19G-APO-VA	41.1	240	7	412.22
Frequently Ask Questions	VA-GLTC04-FAQ	47.6	1285	63	982.43
Group Long Term Care Request to Change Coverage	AE-1181-VA	50.1	420	8	322.7

Unum Life Insurance Company of America Exhibit 1a - Historical and Projected Experience Policy Form Series: GLTC04, RGLTC04

Nationwide Experience 2-Tier Rate Increase (28.4% per tier)

Com	ound Inflation	n						Before Rate Increase	After Rate Inc	rease
										Incurred
	Calendar	Inforce	Incurred							Loss
	Year	Policies	Claims	Earned Premium	Paid Claims	DLR + IBNR	Incurred Claims	Incurred Loss Ratio	Earned Premium	Ratio
	2004	2	-	21,188	-	-	-	0%	21,188	0%
	2005	359	-	142,174	-	-	=	0%	142,174	0%
-	2006	1,564	-	1,367,424	-	-	=	0%	1,367,424	0%
8	2007	2,828	1	3,255,450	289,576	-	289,576	9%	3,255,450	9%
e	2008	4,110	-	6,114,505	-	-	-	0%	6,114,505	0%
Ē.	2009	4,714	2	7,387,240	581,434	64,904	646,338	9%	7,387,240	9%
ě	2010	5,596	4	9,260,454	892,627	25,367	917,994	10%	9,260,454	10%
ú	2011	6,638	1	11,332,550	463,599	92,499	556,098	5%	11,332,550	5%
7	2012	7,089	5	13,588,732	1,331,093	98,009	1,429,102	11%	13,588,732	11%
Æ	2013	6,793	3	13,762,201	589,701	74,982	664,683	5%	13,762,201	5%
\$	2014	6,634	-	12,996,407	7,028	-	7,028	0%	12,996,407	0%
÷	2015	6,580	10	12,592,631	857,526	658,193	1,515,719	12%	12,592,631	12%
_	2016	6,469	2	12,284,718	155,187	381,227	536,414	4%	12,284,718	4%
	2017	6,340	5	11,946,444	120,694	1,161,014	1,281,708	11%	11,946,444	11%
	2018	6,223	1	11,928,407	15,719	954,957	970,676	8%	11,928,407	8%
	Total Past			127,980,525	5,304,184	3,511,152	8,815,336	7%	127,980,525	7%

										Incurred
	Calendar	Inforce	Incurred							Loss
	Year	Policies	Claims	Earned Premium	Paid Claims	DLR + IBNR	Incurred Claims	Incurred Loss Ratio	Earned Premium	Ratio
Ī	2019	5,972	5	12,626,702	907,612	377,173	1,284,784	10%	12,626,702	10%
	2020	5,760	9	11,939,352	963,823	600,552	1,564,375	13%	11,939,352	13%
	2021	5,575	13	11,337,516	1,124,658	686,321	1,810,979	16%	11,337,516	16%
	2022	5,408	17	10,553,733	1,283,796	727,753	2,011,549	19%	11,003,322	18%
	2023	5,255	21	10,087,498	1,432,626	974,870	2,407,496	24%	15,903,256	15%
	2024	5,111	25	9,719,095	1,600,485	1,009,088	2,609,574	27%	16,023,444	16%
	2025	4,976	29	9,357,919	1,857,864	1,400,083	3,257,947	35%	15,427,990	21%
	2026	4,847	34	8,969,723	2,224,754	1,544,495	3,769,249	42%	14,787,988	25%
	2027	4,722	38	8,619,265	2,624,657	1,725,586	4,350,242	50%	14,210,204	31%
9	2028	4,600	43	8,293,850	3,078,433	1,911,794	4,990,227	60%	13,673,706	36%
Experience	2029	4,480	48	7,970,278	3,593,824	2,108,684	5,702,508	72%	13,140,247	43%
Ē.	2030	4,361	53	7,704,036	4,176,454	2,286,599	6,463,053	84%	12,701,304	51%
ĕ	2031	4,242	59	7,435,139	4,826,479	2,458,169	7,284,648	98%	12,257,986	59%
ũ	2032	4,123	64	7,160,834	5,543,280	2,642,186	8,185,466	114%	11,805,752	69%
<u> </u>	2033	4,003	70	6,882,855	6,330,933	2,803,462	9,134,395	133%	11,347,460	80%
ij.	2034	3,882	77	6,602,024	7,189,383	2,964,439	10,153,822	154%	10,884,467	93%
Projection	2035	3,760	83	6,327,847	8,115,138	3,120,102	11,235,239	178%	10,432,442	108%
<u>.</u> 5	2036	3,636	89	6,050,959	9,105,859	3,293,962	12,399,820	205%	9,975,951	124%
₫	2037	3,511	95	5,771,880	10,158,297	3,470,115	13,628,412	236%	9,515,845	143%
	2038	3,384	101	5,490,586	11,273,149	3,624,738	14,897,887	271%	9,052,087	165%
	2039	3,254	106	5,208,491	12,439,497	3,876,328	16,315,825	313%	8,587,010	190%
	2040	3,123	112	4,925,484	13,690,793	4,118,048	17,808,842	362%	8,120,429	219%
	2041	2,990	118	4,642,084	15,023,993	4,308,830	19,332,823	416%	7,653,199	253%
	2042	2,855	123	4,358,961	16,431,746	4,404,023	20,835,768	478%	7,186,428	290%
	2043	2,719	128	4,077,469	17,895,470	4,405,285	22,300,755	547%	6,722,344	332%
	2044	2,582	132	3,800,485	19,389,700	4,350,561	23,740,260	625%	6,265,692	379%
	2045	2,444	135	3,528,289	20,884,978	4,174,296	25,059,274	710%	5,816,934	431%
	2046	2,307	137	3,262,027	22,355,766	3,919,653	26,275,419	805%	5,377,961	489%
	2047	2,170	138	3,002,935	23,767,085	3,492,082	27,259,167	908%	4,950,806	551%
	2048	2,035	139	2,752,348	25,086,317	2,939,354	28,025,670	1018%	4,537,675	618%
	2049	1,902	138	2,511,637	26,272,371	2,285,255	28,557,626	1137%	4,140,825	690%
	2050	1,771	136	2,282,007	27,277,873	1,628,210	28,906,083	1267%	3,762,244	768%
	2051	1,643	133	2,064,455	28,073,382	934,733	29,008,116	1405%	3,403,576	852%
	2052	1,519	129	1,859,538	28,651,840	260,126	28,911,967	1555%	3,065,738	943%
	2053	1,400	124	1,667,723	29,002,717	(392,002)	28,610,715	1716%	2,749,501	1041%
	2054	1,286	119	1,489,426	29,123,102	(928,375)	28,194,727	1893%	2,455,550	1148%
	2055	1,177	113	1,324,708	29,031,317	(1,419,797)	27,611,520	2084%	2,183,987	1264%
	2056	1,073	107	1,173,408	28,757,369	(1,841,424)	26,915,945	2294%	1,934,545	1391%
	2057	975	100	1,035,228	28,324,215	(2,168,762)	26,155,454	2527%	1,706,735	1532%
	2058	883	94	909,729	27,758,278	(2,488,463)	25,269,815	2778%	1,499,830	1685%
	2059	798	88	796,326	27,078,421	(2,762,338)	24,316,083	3054%	1,312,868	1852%
	2060	717	82	694,365	26,297,229	(3,002,872)	23,294,357	3355%	1,144,769	2035%
	2061	643	76	603,109	25,422,819	(3,239,461)	22,183,358	3678%	994,320	2231%
	2062	574	70	521,875	24,458,087	(3,447,792)	21,010,296	4026%	860,393	2442%
	2063	511	64	449,855	23,407,870	(3,564,705)	19,843,165	4411%	741,656	2676%
	2064	453	58	386,282	22,287,348	(3,619,042)	18,668,306	4833%	636,846	2931%
	2065+	2,715	427	1,978,486	219,029,842	(59,948,574)	159,081,268	8041%	3,261,842	4877%
Ī	Total Future			230,207,820	924,630,930	(3,996,653)	920,634,277	400%	349,120,727	264%

of 12/31/18 at 3 98% Interest Adjusted Valu

_ 1	Interest Aajusted	1 Values as of 12/31/18 at 3.98%				
	Past	158,480,692	10,766,124	7%	158,480,692	7%
	Future	144,172,629	277,258,390	192%	209,494,448	132%
	Lifetime	302,653,321	288,024,515	95%	367,975,140	78%

NAIC Rate Stability Requirement:

Accumulated value of past incurred claims + present value of future incurred claims:

Accumulated past +present value of original premium x 58% + rate increase premium x 85%:

Discount Rate Loss Ratio Target Rate increase Loss Ratio Target

	1
(1) Accumulated value of past incurred claims	\$10,766,124
(2) Present value of future incurred claims	\$277,258,390
(3) Total incurred claims	\$288,024,515
(4) 58% of original premiums plus	\$175,538,926
(5) 85% of rate increase premium	\$55,523,547
(6) Total premiums	\$231,062,473
Since (3) total incurred claims	Loss Ratio Test Passed

<u>Test</u>

288,024,515 231,062,473

Pass

Unum Life Insurance Company of America Exhibit 1b - Historical and Projected Experience Policy Form Series: GLTC04, RGLTC04

Nationwide Experience 2-Tier Rate Increase (20.0% per tier)

Simp	e Inflation							Before Rate Increase	After Rate In	crease
	Calendar Year	Inforce Policies	Incurred Claims	Earned Premium	Paid Claims	DLR + IBNR	Incurred Claims	Incurred Loss Ratio	Earned Premium	Incurred Loss Ratio
	2004	7	-	1,611	-	-	-	0%	1,611	0%
	2005	1,092	-	177,367	=	=	-	0%	177,367	0%
	2006	3,323	1	1,696,523	52,525	=	52,525	3%	1,696,523	3%
9	2007	6,882	-	4,419,785	-	=	=	0%	4,419,785	0%
Ĕ	2008	9,979	2	7,871,057	221,040	=	221,040	3%	7,871,057	3%
Ē	2009	13,052	4	11,067,638	665,948	70,507	736,455	7%	11,067,638	7%
ğ	2010	14,841	3	14,112,160	156,353	=	156,353	1%	14,112,160	1%
ũ	2011	18,950	5	17,286,172	640,029	=	640,029	4%	17,286,172	4%
<u> </u>	2012	24,071	11	24,241,799	692,853	-	692,853	3%	24,241,799	3%
Ĕ	2013	23,192	7	26,252,805	663,783	129,747	793,530	3%	26,252,805	3%
sto	2014	22,404	6	25,347,744	505,250	197,728	702,978	3%	25,347,744	3%
Ξ̈́	2015	21,907	13	24,572,233	1,267,329	1,189,530	2,456,859	10%	24,572,233	10%
	2016	21,381	6	24,193,563	346,384	580,241	926,625	4%	24,193,563	4%
	2017	21,211	9	23,667,750	352,608	1,740,539	2,093,147	9%	23,667,750	9%
	2018	21,440	2	23,597,795	18,640	1,736,030	1,754,670	7%	23,597,795	7%
	Total Past	•	•	228,506,002	5,582,742	5,644,322	11,227,064	5%	228,506,002	5%

Ī										
	Calendar	Inforce	Incurred							Incurred
Ļ	Year	Policies	Claims	Earned Premium	Paid Claims	DLR + IBNR	Incurred Claims	Incurred Loss Ratio	Earned Premium	Loss Ratio
	2019	20,473	15	24,458,355	1,664,517	1,650,191	3,314,708	14%	24,458,355	14%
	2020	19,652	28	23,277,611	2,012,256	1,952,414	3,964,671	17%	23,277,611	17%
	2021	18,943	41	22,068,066	2,431,939	2,132,361	4,564,300	21%	22,068,066	21%
	2022	18,326	54	20,739,553	2,825,442	2,503,936	5,329,377	26%	21,361,739	25%
	2023	17,765	67	19,927,755	3,414,202	2,569,754	5,983,956	30%	27,747,406	22%
	2024	17,247	80	19,214,570	3,999,731	2,746,093	6,745,824	35%	27,668,981	24%
	2025	16,762	93	18,482,002	4,759,202	3,262,317	8,021,519	43%	26,614,083	30%
	2026	16,304	106	17,818,610	5,649,340	3,449,381	9,098,721	51%	25,658,798	35%
	2027	15,866	120	17,153,622	6,606,158	3,692,107	10,298,265	60%	24,701,215	42%
9	2028	15,442	135	16,543,375	7,622,392	3,921,593	11,543,985	70%	23,822,460	48%
e	2029	15,026	150	15,975,754	8,734,943	4,252,709	12,987,651	81%	23,005,085	56%
Experience	2030	14,614	167	15,423,528	9,964,668	4,502,684	14,467,352	94%	22,209,880	65%
×	2031	14,203	184	14,870,834	11,300,908	4,748,805	16,049,714	108%	21,414,001	75%
ш	2032	13,793	202	14,311,302	12,742,665	4,939,499	17,682,164	124%	20,608,275	86%
6	2033	13,382	221	13,751,876	14,287,776	5,064,996	19,352,771	141%	19,802,702	98%
퍙	2034	12,967	240	13,189,845	15,923,289	5,150,335	21,073,624	160%	18,993,377	111%
je.	2035	12,549	260	12,618,731	17,632,909	5,192,659	22,825,569	181%	18,170,972	126%
Projection	2036	12,126	279	12,045,829	19,402,271	5,186,201	24,588,471	204%	17,345,994	142%
_	2037	11,699	298	11,467,227	21,213,528	5,135,558	26,349,086	230%	16,512,807	160%
	2038	11,267	317	10,885,513	23,049,023	4,998,006	28,047,028	258%	15,675,138	179%
	2039	10,829	335	10,304,761	24,877,313	5,048,484	29,925,797	290%	14,838,856	202%
	2040	10,385	352	9,720,141	26,723,167	5,041,793	31,764,960	327%	13,997,003	227%
	2041	9,936	369	9,136,630	28,585,900	4,944,032	33,529,933	367%	13,156,747	255%
	2042	9,483	385	8,557,812	30,436,213	4,687,191	35,123,404	410%	12,323,249	285%
	2043	9,028	398	7,984,338	32,228,322	4,287,898	36,516,220	457%	11,497,447	318%
	2044	8,570	410	7,419,946	33,916,088	3,761,528	37,677,616	508%	10,684,723	353%
	2045	8,112	419	6,869,334	35,455,731	3,103,670	38,559,401	561%	9,891,841	390%
	2046	7,656	425	6,333,176	36,805,287	2,370,110	39,175,397	619%	9,119,773	430%
	2047	7,202	429	5,815,370	37,929,704	1,598,869	39,528,572	680%	8,374,132	472%
	2048	6,755	429	5,318,258	38,796,377	736,277	39,532,654	743%	7,658,291	516%
	2049	6,314	425	4,844,050	39,377,558	(125,464)	39,252,095	810%	6,975,432	563%
	2050	5,884	419	4,394,564	39,661,190	(973,255)	38,687,935	880%	6,328,172	611%
	2051	5,465	410	3,971,215	39,645,070	(1,795,746)	37,849,324	953%	5,718,550	662%
	2052	5,059	398	3,574,430	39,338,279	(2,499,699)	36,838,579	1031%	5,147,178	716%
	2053	4,669	384	3,205,317	38,761,868	(3,152,499)	35,609,369	1111%	4,615,656	771%
	2054	4,294	369	2,863,895	37,941,114	(3,678,338)	34,262,775	1196%	4,124,009	831%
	2055	3,937	352	2,549,482	36,905,958	(4,079,879)	32,826,079	1288%	3,671,254	894%
	2056	3,598	335	2,261,337	35,698,440	(4,368,248)	31,330,192	1385%	3,256,325	962%
	2057	3,278	317	1,998,441	34,357,674	(4,585,747)	29,771,926	1490%	2,877,755	1035%
	2058	2,976	299	1,759,673	32,913,563	(4,792,511)	28,121,052	1598%	2,533,929	1110%
	2059	2,692	280	1,543,481	31,389,740	(4,934,887)	26,454,853	1714%	2,222,612	1190%
	2060	2,428	262	1,349,050	29,804,708	(5,056,604)	24,748,103	1834%	1,942,632	1274%
	2061	2,181	244	1,174,768	28,171,309	(5,188,170)	22,983,139	1956%	1,691,666	1359%
	2062	1,952	227	1,019,211	26,490,778	(5,227,763)	21,263,015	2086%	1,467,664	1449%
	2063	1,740	209	880,976	24,768,771	(5,212,915)	19,555,855	2220%	1,268,605	1542%
	2064	1,545	192	758,660	23,027,219	(5,092,308)	17,934,911	2364%	1,092,471	1642%
	2065+	9,485	1,437	3,987,354	186,183,414	(57,760,356)	128,423,059	3221%	5,741,790	2237%
	Total Future		·	453,819,625	1,245,427,913	(5,892,940)	1,239,534,974	273%	613,334,708	202%

Interest Adjus	sted values as of 12/31/18 at 3.98%				
Past	278,705,974	13,122,154	5%	278,705,974	5%
Future	284,285,111	433,036,295	152%	372,136,501	116%
Lifetime	562 991 086	446 158 449	79%	650 842 476	69%

NAIC Rate Stability Requirement:
Accumulated value of past incurred claims + present value of future incurred claims:

Accumulated past +present value of original premium x 58% + rate increase premium x 85%:

Discount Rate Loss Ratio Target Rate increase Loss Ratio Target 85%

(Accumulated value of past incurred claims	\$13,122,154		
(Present value of future incurred claims	\$433,036,295		
(Total incurred claims	\$446,158,449		
(4) 58% of original premiums plus	\$326,534,830	\$326,534,830	\$326,5
(5) 85% of rate increase premium	\$74,673,681	\$210,558,666	#1
(6) Total premiums	\$401,208,511	\$537,093,496	#1
	<u>-</u>			
9	Since (3) total incurred claims exceed	Loss Ratio Test Passed		

<u>Test</u>

Pass

446,158,449

401,208,511

Unum Life Insurance Company of America Exhibit 2a - Historical and Projected Experience Policy Form Series: GLTC04, RGLTC04

Virginia Experience 2-Tier Rate Increase (28.4% per tier)

Com	pound Inflation	7						Before Rate Increase	After Rate	Increase
										Incurred
	Calendar	Inforce	Incurred							Loss
	Year	Policies	Claims	Earned Premium	Paid Claims	DLR + IBNR	Incurred Claims	Incurred Loss Ratio	Earned Premium	Ratio
	2004	=.	=.	=	-	=	=		-	
	2005	26	-	3,441	-	=	-	0%	3,441	0%
	2006	62	-	84,299	-	=	-	0%	84,299	0%
9	2007	137	-	151,758	-	=	-	0%	151,758	0%
e	2008	279	-	316,177	-	=	-	0%	316,177	0%
Ω.	2009	339	-	572,908	-	=	-	0%	572,908	0%
ě	2010	334	-	621,449	-	=	-	0%	621,449	0%
ũ	2011	388	-	685,196	-	=	-	0%	685,196	0%
a	2012	374	-	755,565	-	=	-	0%	755,565	0%
÷	2013	340	-	717,781	-	=	-	0%	717,781	0%
ţ	2014	329	-	675,238	-	=	-	0%	675,238	0%
Hist	2015	306	-	638,376	-	=	-	0%	638,376	0%
_	2016	302	1	616,979	66,738	371,656	438,394	71%	616,979	71%
	2017	303	-	616,342	-	4,033	4,033	1%	616,342	1%
	2018	277	=	611,746	-	18,980	18,980	3%	611,746	3%
	Total Past	•		7,067,255	66,738	394,669	461,407	7 7%	7,067,255	7%

ſ	6.1.1									Incurred
	Calendar Year	Inforce Policies	Incurred Claims	Earned Premium	Paid Claims	DLR + IBNR	Incurred Claims	Incurred Loss Ratio	Earned Premium	Loss Ratio
ŀ	2019	267	0	649,430	185,021	(68,325)	116,696	18%	649,430	18%
	2020	259	1	619,366	181,026	(51,718)	129,309	21%	619,366	21%
	2021	251	1	599,555	190,000	(48,843)	141,157	24%	599,555	24%
	2022	244	1	580,820	202,538	(45,431)	157,106	27%	605,563	26%
	2023	237	1	562,986	207,043	(34,681)	172,361	31%	887,565	19%
	2024	230	2	545,810	119,200	(63,126)	56,073	10%	899,852	6%
	2025	223	2	526,328	126,199	94,651	220,850	42%	867,734	25%
	2026	217	2 2	489,698	152,520	98,272	250,791	51%	807,344	31%
	2027	212	2	468,806	180,861	108,262	289,122	62%	772,900	37%
9	2028	206	3	431,192	211,408	117,521	328,929	76%	710,887	46%
Ē	2029	200	3	382,259	245,322	124,151	369,473	97%	630,214	59%
Experience	2030	195	3	366,354	283,027	130,082	413,110	113%	603,991	68%
ă	2031	189	3	352,014	324,058	133,328	457,386	130%	580,350	79%
ũ	2032	183	4	337,545	367,713	133,519	501,233	148%	556,496	90%
Ξ	2033	177	4	322,928	413,114	135,898	549,012	170%	532,398	103%
Projection	2034	171	4	308,172	460,272	129,366	589,639	191%	508,069	116%
e	2035	166	4	293,357	507,471	126,229	633,700	216%	483,644	131%
<u>.</u> 5	2036	160	4	278,547	554,244	126,390	680,633	244%	459,228	148%
•	2037	154	5	263,789	600,883	129,567	730,451	277%	434,898	168%
	2038	148	5	249,142	648,360	124,127	772,487	310%	410,749	188%
	2039	141	5	234,667	695,937	123,486	819,424	349%	386,885	212%
	2040	135	5	220,409	743,264	129,713	872,978	396%	363,378	240%
	2041	129	5	206,442	790,869	134,065	924,934	448%	340,353	272%
	2042	123	5 5 5 5	192,813	839,887	141,337	981,223	509%	317,882	309%
	2043	117	5	179,573	890,138	143,381	1,033,519	576%	296,054	349%
	2044	111	5 5 5	166,767	941,118	139,385	1,080,503	648%	274,941	393%
	2045	105	5	154,398	992,415	130,055	1,122,470	727%	254,550	441%
	2046	99		142,481	1,042,676	129,907	1,172,582	823%	234,902	499%
	2047	93	6	131,027	1,092,199	124,827	1,217,025	929%	216,019	563%
	2048	87	6	120,053	1,141,716	121,576	1,263,292	1052%	197,926	638%
	2049	81	6	109,557	1,192,303	105,013	1,297,316	1184%	180,622	718%
	2050	76	6	99,561	1,240,378	91,624	1,332,001	1338%	164,142	811%
	2051	70	6	90,085	1,284,211	63,570	1,347,781	1496%	148,519	907%
	2052	65	5	81,135	1,321,063	27,001	1,348,064	1662%	133,764	1008%
	2053	59	5	72,710	1,347,174	(26,881)	1,320,292	1816%	119,874	1101%
	2054	54	5	64,845	1,357,944	(54,553)	1,303,390	2010%	106,907	1219%
	2055	49	5	57,550	1,353,928	(81,621)	1,272,307	2211%	94,881	1341%
	2056	45	5	50,819	1,337,497	(92,525)	1,244,972	2450%	83,783	1486%
	2057	40	4	44,633	1,312,043	(111,594)	1,200,449	2690%	73,584	1631%
	2058	36	4	38,977	1,278,747	(116,954)	1,161,793	2981%	64,260	1808%
	2059	32	4	33,845	1,239,483	(130,239)	1,109,244	3277%	55,798	1988%
	2060	28	4	29,209	1,196,516	(148,892)	1,047,625	3587%	48,156	2175%
	2061	25	3	25,063	1,148,712	(177,284)	971,428	3876%	41,320	2351%
	2062	22	3	21,390	1,092,053	(196,097)	895,957	4189%	35,265	2541%
	2063	19	3	18,166	1,026,693	(199,782)	826,911	4552%	29,949	2761%
	2064	16	2	15,345	955,255	(204,525)	750,729	4892%	25,299	2967%
	2065+	85	14	71,634	7,130,443	(2,295,353)	4,835,090	6750%	118,101	4094%
L	Total Future			11,301,250	42,144,940	(832,122)	41,312,818	366%	17,027,342	243%

Interest Adjusted	values as of 12/31/18 at 3.98%				
Past	8,828,966	506,955	6%	8,828,966	6%
Future	7,290,914	13,533,090	186%	10,534,302	128%
Lifetime	16,119,880	14,040,046	87%	19,363,268	73%

<u>Test</u>

Pass

14,040,046 12,106,410

Discount Rate Loss Ratio Target Rate increase Loss Ratio Target

(1) Accumulated value of past incurred claims	\$506,955
(2) Present value of future incurred claims	\$13,533,090
(3) Total incurred claims	\$14,040,046
(4) 58% of original premiums plus	\$9,349,531
(5) 85% of rate increase premium	\$2,756,880
(6) Total premiums	\$12,106,410
Since (3) total incurred claims	Loss Ratio Test Passed

Unum Life Insurance Company of America Exhibit 2b - Historical and Projected Experience Policy Form Series: GLTC04, RGLTC04 2-Tier Rate Increase (20.0% per tier)

Virginia Experience

Simp	le Inflation							Before Rate Increase	After Rate	
										Incurred
	Calendar	Inforce	Incurred							Loss
	Year	Policies	Claims	Earned Premium	Paid Claims	DLR + IBNR	Incurred Claims	Incurred Loss Ratio	Earned Premium	Ratio
	2004	-	-	-	-	-	-		-	
	2005	-	-	-	-	-	-		-	
	2006	3	-	820	-	-	-	0%	820	0%
8	2007	61	-	44,377	-	-	-	0%	44,377	0%
e	2008	137	-	100,875	-	-	-	0%	100,875	0%
. <u>.</u>	2009	192	-	159,825	-	-	-	0%	159,825	0%
ĕ	2010	229	-	208,732	-	-	-	0%	208,732	0%
ũ	2011	270	-	252,533	-	-	-	0%	252,533	0%
To.	2012	300	1	287,236	145,260	-	145,260	51%	287,236	51%
-5	2013	294	-	288,954	-	-	-	0%	288,954	0%
2	2014	289	-	287,566	-	-	-	0%	287,566	0%
₽	2015	288	-	273,265	-	-	-	0%	273,265	0%
_	2016	255	-	278,999	-	317	317	0%	278,999	0%
	2017	265	-	239,895	-	1,798	1,798	1%	239,895	1%
	2018	227	-	210,808	=	8,462	8,462	4%	210,808	4%
	Total Past			2,633,885	145,260	10,578	155,838	6%	2,633,885	6%

ſ										Incurred
	Calendar	Inforce	Incurred							Loss
ļ	Year	Policies	Claims	Earned Premium	Paid Claims	DLR + IBNR	Incurred Claims	Incurred Loss Ratio	Earned Premium	Ratio
	2019	215	0	211,376	1,723	32,771	34,494	16%	211,376	16%
	2020	205	0	188,249	8,540	33,034	41,574	22%	188,249	22%
	2021	197	0	179,962	15,800	32,584	48,385	27%	179,962	27%
	2022	189	0	171,072	23,550	32,459	56,009	33%	176,204	32%
	2023	182	1	161,041	31,747	33,183	64,930	40%	224,234	29%
	2024	176	1	155,356	40,546	34,535	75,081	48%	223,713	34%
	2025	171	1	150,291	50,114	36,972	87,085	58%	216,418	40%
	2026	166	1	145,389	60,051	38,899	98,950	68%	209,360	47%
au	2027	161	1	140,626	71,024	40,646	111,669	79%	202,502	55%
Experience	2028	157	1	135,934	82,551	42,743	125,295	92%	195,745	64%
<u>ē</u> .	2029	153	1	131,252	94,919	46,683	141,602	108%	189,003	75%
ē	2030	149	2	126,535	108,518	47,702	156,220	123%	182,211	86%
×	2031	145	2	121,752	123,234	48,282	171,517	141%	175,324	98%
	2032	140	2	116,909	138,755	47,737	186,492	160%	168,349	111%
.ō	2033	136	2	112,009	154,889	45,869	200,758	179%	161,293	124%
ŭ	2034	132	2 2	107,054	171,275	42,053	213,328	199%	154,157	138%
ě	2035	128 124		102,051	187,481	38,273	225,754	221%	146,953	154%
Projection	2036		2 2	97,019	202,755	33,586	236,341	244% 267%	139,707	169%
_	2037 2038	120 116	3	91,994 86,995	216,689 229,035	29,392 24,858	246,081 253,893	292%	132,471 125,272	186% 203%
	2038	110	3	82,042	239,969	23,166	263,135	321%	118.140	203%
	2039	107	3	77,162	249,782	18,773	268,555	348%	111,114	242%
	2040	107	3	72,395	258,652	15,710	274,363	379%	104,249	263%
	2041	99	3	67,770	266,358	12,293	274,303	411%	97,589	286%
	2042	95	3	63,296	272,688	8,471	281,159	444%	91,147	308%
	2043	90	3	58,979	277,336	7,408	284,744	483%	84,930	335%
	2045	86	3	54,823	280,994	7,721	288,715	527%	78,945	366%
	2046	82	3	50,837	283,951	3,907	287,859	566%	73,205	393%
	2047	78	3	47,037	286,186	(2,649)	283,537	603%	67,733	419%
	2048	74	3	43,429	287,578	(5,137)	282,441	650%	62,538	452%
	2049	70	3	40,011	288,007	(5,652)	282,355	706%	57,615	490%
	2050	66	3	36,777	287,819	(7,187)	280,631	763%	52,959	530%
	2051	62	3	33,723	287,283	(11,769)	275,514	817%	48,561	567%
	2052	58	3	30,854	285,321	(14,371)	270,950	878%	44,430	610%
	2053	54	3	28,168	282,036	(16,077)	265,959	944%	40,562	656%
	2054	51	3	25,658	277,809	(17,922)	259,888	1013%	36,947	703%
	2055	47	3	23,318	273,098	(19,557)	253,540	1087%	33,578	755%
	2056	44	3	21,141	268,004	(21,020)	246,984	1168%	30,443	811%
	2057	41	3	19,122	262,263	(20,450)	241,813	1265%	27,536	878%
	2058	38	3	17,254	256,028	(19,110)	236,918	1373%	24,846	954%
	2059	35	2	15,522	249,740	(17,749)	231,992	1495%	22,352	1038%
	2060	32	2	13,918	244,100	(22,755)	221,346	1590%	20,041	1104%
	2061	29	2	12,441	238,464	(27,360)	211,104	1697%	17,915	1178%
	2062	27	2	11,089	231,770	(30,837)	200,933	1812%	15,968	1258%
	2063	25	2	9,858	223,464	(33,154)	190,310	1931%	14,195	1341%
	2064	22	2	8,737	214,125	(36,217)	177,907	2036%	12,581	1414%
L	2065+	171	18	57,037	2,138,927	(541,231)	1,597,697	2801%	82,133	1945%
	Total Future			3,755,262	11,024,950	(10,492)	11,014,458	293%	5,074,755	217%

Interest Adjusted	values as of 12/31/18 at 3.98%				
Past	3,244,910	198,092	6%	3,244,910	6%
Future	2,332,977	3,872,590	166%	3,050,723	127%
Lifetime	5,577,888	4,070,681	73%	6,295,633	65%

<u>Test</u>

Pass

4,070,681 3,845,259

Discount Rate Loss Ratio Target Rate increase Loss Ratio Target

(1) Accumulated value of past incurred claims	\$198,092
(2) Present value of future incurred claims	\$3,872,590
(3) Total incurred claims	\$4,070,681
(4) 58% of original premiums plus	\$3,235,175
(5) 85% of rate increase premium	\$610,084
(6) Total premiums	\$3,845,259
Since (3) total incurred claims	Loss Ratio Test Passed

Virginia Experience: Compound Inflation

Experience Year	Policy Duration		Incurred Claims	Earned Premiums	Actual Loss Ratio	Expected Loss Ratio	Actual to Expected
2004		1		-	Natio	3%	Lxpecteu
2005		1	-	3,441	0%	3%	0%
		2	-	-		3%	
	Sub Total		-	3,441	0%	3%	0%
2006		1	-	77,832	0%	3%	0%
		2	-	6,467	0%	3%	0%
		3	-	-		3%	
	Sub Total		-	84,299	0%	3%	0%
2007		1	-	70,207	0%	3%	0%
		2	-	75,084	0%	3%	0%
		3	-	6,467	0%	3%	0%
		4	-	-		3%	
	Sub Total		-	151,758	0%	3%	0%
2008		1	-	172,810	0%	3%	0%
		2	-	71,417	0%	3%	0%
		3	-	65,483	0%	3%	0%
		4	-	6,467	0%	3%	0%
		5	-	-		4%	
	Sub Total		-	316,177	0%	3%	0%
2009		1	-	276,900	0%	3%	0%
		2	-	165,754	0%	3%	0%
		3	-	69,658	0%	3%	0%
		4	-	54,951	0%	3%	0%
		5	-	5,645	0%	4%	0%
		6	-	-		4%	
	Sub Total		-	572,908	0%	3%	0%
2010		1	-	92,303	0%	3%	0%
		2	-	259,063	0%	3%	0%
		3	-	150,302	0%	3%	0%
		4	-	65,934	0%	3%	0%
		5	-	48,655	0%	4%	0%
		6	-	5,192	0%	4%	0%
		7	-	-		5%	
	Sub Total		-	621,449	0%	3%	0%

Virginia Experience: Compound Inflation

xperience Year	Policy Duration		Incurred Claims	Earned Premiums	Actual Loss Ratio	Expected Loss Ratio	Actual to Expected
2011		1	-	94,544	0%	3%	0%
		2	-	83,738	0%	3%	0%
		3	-	251,104	0%	3%	0%
		4	-	141,950	0%	3%	0%
		5	-	59,882	0%	4%	0%
		6	-	47,657	0%	4%	0%
		7	-	6,321	0%	5%	0%
		8	-	-		5%	
	Sub Total		-	685,196	0%	3%	0%
2012		1	-	85,381	0%	3%	0%
		2	-	101,604	0%	3%	0%
		3	-	78,770	0%	3%	0%
		4	-	246,776	0%	3%	0%
		5	-	134,657	0%	4%	0%
		6	-	56,310	0%	4%	0%
		7	-	46,344	0%	5%	0%
		8	-	5,723	0%	5%	0%
		9	-	-		6%	
	Sub Total		-	755,565	0%	3%	0%
2013		1	-	23,767	0%	3%	0%
		2	-	84,124	0%	3%	0%
		3	-	85,717	0%	3%	0%
		4	-	71,462	0%	3%	0%
		5	-	228,061	0%	4%	0%
		6	-	126,569	0%	4%	0%
		7	-	51,460	0%	5%	0%
		8	-	42,517	0%	5%	0%
		9	-	4,104	0%	6%	0%
	1	LO	-	_		6%	
	Sub Total		-	717,781	0%	4%	0%
2014		1	-	21,189	0%	3%	0%
		2	-	23,860	0%	3%	0%
		3	-	72,416	0%	3%	0%
		4	-	79,965	0%	3%	0%
		5	-	65,642	0%	4%	0%
		6	-	207,647	0%	4%	0%
		7	-	112,283	0%	5%	0%
		8	-	50,802	0%	5%	0%
		9	-	37,330	0%	6%	0%
	1	LO	-	4,104	0%	6%	0%
		l 1				7%	

Virginia Experience: Compound Inflation

[&]quot;Expected" is equal to original pricing, Incurred Claims exclude IBNR

xperience Year	Policy Duration	Incurred Claims	Earned Premiums	Actual Loss Ratio	Expected Loss Ratio	Actual to Expected
2015	1	_	12,454	0%	3%	09
	2	_	21,897	0%	3%	09
	3	-	23,184	0%	3%	09
	2	-	68,282	0%	3%	09
		-	75,066	0%	4%	09
	ϵ	-	61,974	0%	4%	09
	7	7 -	186,481	0%	5%	00
	8	3 -	102,798	0%	5%	00
	g		46,452	0%	6%	00
	10		36,047	0%	6%	0.
	11		3,741	0%	7%	0'
	12		-	0 70	8%	Ū
_			620 276	0%		0.0
:	Sub Total	-	638,376	0%	5%	0'
2016	1	<u> </u>	24,097	0%	3%	0'
	2	_	13,131	0%	3%	0'
	3	-	26,226	0%	3%	00
	2	-	19,971	0%	3%	0'
			60,961	0%	4%	0'
	6		69,147	633%	4%	15100
	-	-	54,522	0%	5%	0'
	8		177,692	0%	5%	0
	9		95,809	0%	6%	0
	10		43,816		6%	0
			•	0%		
	11		29,427	0%	7%	0
	12		2,180	0%	8%	0
_	13			0%	8%	1462
`	Sub Total	437,682	616,979	71%	5%	1462
2017	1	_	27,218	0%	3%	0
	2	_	18,334	0%	3%	0
	3	-	11,224	0%	3%	0
	4		26,036	0%	3%	0
			19,622	0%	4%	0
	6		57,167	0%	4%	0
	7		64,732	0%	5%	0'
	8		53,552	0%	5%	0
	٥		171,811	0%	6%	0
	10		93,664	0%	6%	0
	11		43,816	0%	7%	0
	12		27,490	0%	8%	0
	13		1,676	0%	8%	0
_	14 Sub Total			001	9%	
``	Sub Total	-	616,342	0%	5%	0
2018	1	L -	15,523	0%	3%	0
	2	_	24,039	0%	3%	0
	3		13,443	0%	3%	0
	2		11,224	0%	3%	0
			25,558	0%	4%	0
	6		18,047	0%	4%	0
	7				4% 5%	0'
			56,744	0%		
	3		61,992	0%	5%	0
	9		53,629	0%	6%	0
	10		166,513	0%	6%	0
	11		93,546	0%	7%	0
	12	_	43,136	0%	8%	0
	13	-	26,706	0%	8%	0
	14	-	1,646	0%	9%	00
	15		-		10%	

Virginia Experience: Compound Inflation

[&]quot;Expected" is equal to original pricing, Incurred Claims exclude IBNR

Year	Policy Duration	Incurred Claims	Earned Premiums	Actual Loss Ratio	Expected Loss Ratio	Actual to Expected
Summary b	y Duration					•
	1	-	997,666	0%	3%	0%
	2	-	948,512	0%	3%	0%
	3	-	853,994	0%	3%	0%
	4	-	793,018	0%	3%	0%
	5	-	723,749	0%	4%	0%
	6	437,682	649,710	67%	4%	1607%
	7	-	578,887	0%	5%	0%
	8	-	495,076	0%	5%	0%
	9	-	409,135	0%	6%	0%
	10	-	344,144	0%	6%	0%
	11	-	170,530	0%	7%	0%
	12	-	72,806	0%	8%	0%
	13	-	28,382	0%	8%	0%
	14	-	1,646	0%	9%	0%
_	15	-	_			
	Total	437,682	7,067,255	6%	4%	156%
Summary b	y Calendar `	Year of Incurral				
Summary b 2004	y Calendar `	Year of Incurral	-			
-	y Calendar '	Year of Incurral - -	- 3,441	0%	3%	0%
2004	y Calendar '	Year of Incurral - - -	- 3,441 84,299	0% 0%	3% 3%	
2004 2005	y Calendar `	Year of Incurral - - - -	•			0%
2004 2005 2006	y Calendar `	Year of Incurral	84,299	0%	3%	0% 0%
2004 2005 2006 2007	y Calendar '	Year of Incurral	84,299 151,758	0% 0%	3% 3%	0% 0% 0%
2004 2005 2006 2007 2008	y Calendar `	Year of Incurral	84,299 151,758 316,177	0% 0% 0%	3% 3% 3%	0% 0% 0% 0%
2004 2005 2006 2007 2008 2009	y Calendar '	Year of Incurral	84,299 151,758 316,177 572,908	0% 0% 0% 0%	3% 3% 3% 3%	0% 0% 0% 0%
2004 2005 2006 2007 2008 2009 2010	y Calendar `	Year of Incurral	84,299 151,758 316,177 572,908 621,449	0% 0% 0% 0% 0%	3% 3% 3% 3% 3%	0% 0% 0% 0% 0%
2004 2005 2006 2007 2008 2009 2010 2011	y Calendar `	Year of Incurral	84,299 151,758 316,177 572,908 621,449 685,196	0% 0% 0% 0% 0% 0%	3% 3% 3% 3% 3% 3%	0% 0% 0% 0% 0% 0%
2004 2005 2006 2007 2008 2009 2010 2011 2012	y Calendar '	Year of Incurral	84,299 151,758 316,177 572,908 621,449 685,196 755,565	0% 0% 0% 0% 0% 0%	3% 3% 3% 3% 3% 3% 3%	0% 0% 0% 0% 0% 0% 0%
2004 2005 2006 2007 2008 2009 2010 2011 2012 2013	y Calendar Y	Year of Incurral	84,299 151,758 316,177 572,908 621,449 685,196 755,565 717,781	0% 0% 0% 0% 0% 0% 0%	3% 3% 3% 3% 3% 3% 3% 4%	0% 0% 0% 0% 0% 0% 0%
2004 2005 2006 2007 2008 2009 2010 2011 2012 2013 2014	y Calendar Y	Year of Incurral	84,299 151,758 316,177 572,908 621,449 685,196 755,565 717,781 675,238	0% 0% 0% 0% 0% 0% 0% 0%	3% 3% 3% 3% 3% 3% 4% 4%	0% 0% 0% 0% 0% 0% 0% 0%
2004 2005 2006 2007 2008 2009 2010 2011 2012 2013 2014 2015	y Calendar Y	- - - - - - - - -	84,299 151,758 316,177 572,908 621,449 685,196 755,565 717,781 675,238 638,376	0% 0% 0% 0% 0% 0% 0% 0%	3% 3% 3% 3% 3% 3% 4% 4% 5%	0% 0% 0% 0% 0% 0% 0% 0% 1462%
2004 2005 2006 2007 2008 2009 2010 2011 2012 2013 2014 2015 2016	y Calendar Y	- - - - - - - - -	84,299 151,758 316,177 572,908 621,449 685,196 755,565 717,781 675,238 638,376 616,979	0% 0% 0% 0% 0% 0% 0% 0% 0%	3% 3% 3% 3% 3% 3% 4% 4% 5%	0% 0% 0% 0% 0% 0% 0% 0% 1462% 0%

Virginia Experience: Simple Inflation

Experience Year	Policy Duration		Incurred Claims	Earned Premiums	Actual Loss Ratio	Expected Loss Ratio	Actual to Expected
2004		1	-	-	Ratio	3%	Lxpected
2005		1	-	-		3%	
		2	-			3%	
	Sub Total		-	-			
2006		1	-	820	0%	3%	0%
		2	-	-		3%	
		3	-	-		3%	
	Sub Total		-	820	0%	3%	0%
2007		1	-	43,557	0%	3%	0%
		2	-	820	0%	3%	0%
		3	-	-		3%	
		4	-	-		3%	
	Sub Total		-	44,377	0%	3%	0%
2008		1	_	56,442	0%	3%	0%
2000		2	_	43,613	0%	3%	0%
		3	-	820	0%	3%	0%
		4	-	-		3%	
		5	-	-		4%	
	Sub Total		-	100,875	0%	3%	0%
2009	1	1	-	56,409	0%	3%	0%
		2	-	58,983	0%	3%	0%
		3	-	43,613	0%	3%	0%
		4	-	820	0%	3%	0%
		5	-	-		4%	
		6	-	-		4%	
	Sub Total		-	159,825	0%	3%	0%
2010)	1	_	54,457	0%	3%	0%
		2	-	51,345	0%	3%	0%
		3	-	58,788	0%	3%	0%
		4	-	43,322	0%	3%	0%
		5	-	820	0%	4%	0%
		6	-	-		4%	
		7	_	-		5%	
	Sub Total		-	208,732	0%	3%	0%

Virginia Experience: Simple Inflation

kperience Year	Policy Duration	Incurred Claims	Earned Premiums	Actual Loss Ratio	Expected Loss Ratio	Actual to Expected
2011		1 -	38,940	0%	3%	00
		2 -	54,305	0%	3%	00
		3 -	57,743	0%	3%	0
		4 -	58,340	0%	3%	0
		5 -	42,385	0%	4%	0
		6 -	820	0%	4%	0
		7 -	-		5%	_
		8 -	-		5%	
	Sub Total	-	252,533	0%	3%	0
2012		1 -	47,018	0%	3%	0
2012		2 -	35,458	0%	3%	0
		3 -	-	0%		0
			51,706	0%	3%	0
		4 - 5 -	54,878		3% 4%	0
			55,861	0% 350%		
		6 145,260	41,495	350%	4%	8351
		7 -	820	0%	5%	0
		8 -	-		5%	
	Sub Total	9 - 145,260	287,236	51%	6% 3%	1493
2013		1 -	36,917	0%	3%	0
		2 -	37,714	0%	3%	0
		3 -	33,289	0%	3%	0
		4 -	50,537	0%	3%	0
		5 -	52,630	0%	4%	0
		6 -	48,218	0%	4%	0
		7 -	28,829	0%	5%	0
		8 -	820	0%	5%	0
		9 -	-		6%	
		0 -	-		6%	
	Sub Total	-	288,954	0%	4%	0
2014		1 -	32,144	0%	3%	0
		2 -	31,285	0%	3%	0
		3 -	28,982	0%	3%	0
		4 -	29,550	0%	3%	0
		5 -	47,956	0%	4%	0
		6 -	50,798	0%	4%	0
		7 -	39,176	0%	5%	0
		8 -	26,921	0%	5%	0
		9 -	754	0%	6%	0
		0 -	-		6%	
		1 -	-		7%	
	Sub Total		287,566	0%		0

Virginia Experience: Simple Inflation

Year	Policy Duration	Incurred Claims	Earned Premiums	Actual Loss Ratio	Expected Loss Ratio	Actual to Expected
2015	1	-	25,437	0%	3%	0%
	2	-	24,442	0%	3%	09
	3	-	22,195	0%	3%	09
	4		24,282	0%	3%	09
	5		25,476	0%	4%	09
	6	-	47,356	0%	4%	09
	7		46,402	0%	5%	09
	8		31,041	0%	5%	09
	9	-	25,880	0%	6%	00
	10	-	754	0%	6%	00
	11	-	-		7%	
_	12	-	-	00/	8%	
S	ub Total	-	273,265	0%	4%	00
2016	1	-	23,867	0%	3%	09
	2	-	18,983	0%	3%	09
	3	-	19,417	0%	3%	09
	4	-	18,883	0%	3%	00
	5	-	17,384	0%	4%	00
	6		23,933	0%	4%	00
	7		45,990	0%	5%	00
	8		45,787	0%	5%	00
	9		32,171	0%	6%	00
	10		31,830	0%	6%	00
	11	_	754	0%	7%	00
	12	_	-	0.70	8%	ū
	13		_	0%	8%	00
	ub Total		278,999	0%	4%	0,
			•			
2017	1	-	10,352	0%	3%	00
	2	-	10,822	0%	3%	00
	3	-	12,580	0%	3%	00
	4	-	11,517	0%	3%	00
	5	-	11,554	0%	4%	00
	6	-	14,742	0%	4%	00
	7	-	22,669	0%	5%	00
	8	-	44,409	0%	5%	0
	9		41,192	0%	6%	0
	10		28,698	0%	6%	0
	11	-	30,606	0%	7%	0
	12	_	754	0%	8%	0,
	13		-	3 73	8%	3
	14		_		9%	
S	ub Total	-	239,895	0%	5%	0.
2010	4		10 701	00/	20/	0.0
2018	1 2		10,781	0%	3%	0.0
			10,085	0%	3%	0.0
	3		7,485	0%	3%	0.0
	4		8,708 8 F04	0%	3%	0.0
	5		8,504	0%	4%	00
	6		4,519	0%	4%	00
	7		12,886	0%	5%	00
	8		21,734	0%	5%	00
	9		39,254	0%	6%	00
	10		26,930	0%	6%	00
	11		28,562	0%	7%	00
	12		30,606	0%	8%	00
	13	_	754	0%	8%	00
	14 15	-	-		9% 10%	

Virginia Experience: Simple Inflation

[&]quot;Expected" is equal to original pricing, Incurred Claims exclude IBNR

Experience Year	Policy Duration	Incurred Claims	Earned Premiums	Actual Loss Ratio	Expected Loss Ratio	Actual to Expected
Summary b		THEATTER CIGITIS	Tremiums	Natio	LOSS Ratio	Lxpcctcu
,	1	_	437,141	0%	3%	0%
	2		377,855	0%	3%	0%
	3	-	336,618	0%	3%	0%
	4	-	300,837	0%	3%	0%
	5	-	262,570	0%	4%	0%
	6	145,260	231,881	63%	4%	1494%
	7	-	196,772	0%	5%	0%
	8	-	170,712	0%	5%	0%
	9	-	139,251	0%	6%	0%
	10	-	88,212	0%	6%	0%
	11		59,922	0%	7%	0%
	12	-	31,360	0%	8%	0%
	13	-	754	0%	8%	0%
	14	-	-			
_	15	-	-			
-	Total	145,260	2,633,885	6%	4%	143%
Summary b	y Calendar `	Year of Incurral				
2004		-	-			
2005		-	-			
2006		-	820	0%	3%	0%
2007		-	44,377	0%	3%	0%
2008		-	100,875	0%	3%	0%
2009		-	159,825	0%	3%	0%
2010		-	208,732	0%	3%	0%
2011		-	252,533	0%	3%	0%
2012		145,260	287,236	51%	3%	1493%
2013		-	288,954	0%	4%	0%
2014		-	287,566	0%	4%	0%
2015		-	273,265	0%	4%	0%
2016		-	278,999	0%	4%	0%
2017		-	239,895	0%	5%	0%
2018		-	210,808	0%	6%	0%
Total		145,260	2,633,885	6%	4%	143%

Nationwide Experience: Compound Inflation

-	-	rig	inal pricing, Incurr				
Experience Year	Policy Duration		Incurred Claims	Earned Premiums	Actual Loss Ratio	Expected Loss Ratio	Actual to Expected
2004		1	incurred Claims	21,188	0%	3%	0%
2004		_	_	21,100	0 70	370	0 70
2005		1	_	120,890	0%	3%	0%
		2	-	21,284	0%	3%	0%
	Sub Total		-	142,174	0%	3%	0%
2006		1	-	1,206,729	0%	3%	0%
		2	-	139,411	0%	3%	0%
		3	-	21,284	0%	3%	0%
	Sub Total		-	1,367,424	0%	3%	0%
2007		1	289,576	1,937,836	15%	3%	560%
2007		2	-	1,167,066	0%	3%	0%
		3	_	129,264	0%	3%	0%
		4	_	21,284	0%	3%	0%
	Sub Total		289,576	3,255,450	9%	3%	319%
	Sub Total		205,570	3,233,430	3 70	370	31370
2008		1	-	3,026,209	0%	3%	0%
		2	-	1,856,558	0%	3%	0%
		3	-	1,084,215	0%	3%	0%
		4	-	126,239	0%	3%	0%
		5	-	21,284	0%	4%	0%
	Sub Total		-	6,114,505	0%	3%	0%
2009		1	7,466	2,473,565	0%	3%	11%
2003		2	-	2,089,066	0%	3%	0%
		3	638,872	1,698,022	38%	3%	1177%
		4	-	991,046	0%	3%	0%
		5	_	114,257	0%	4%	0%
		6	_	21,284	0%	4%	0%
	Sub Total		646,338	7,387,240	9%	3%	292%
2010		1	303,004	2,280,547	13%	3%	498%
		2	-	2,373,099	0%	3%	0%
		3	611,247	1,940,091	32%	3%	986%
		4	3,743	1,596,607	0%	3%	7%
		5	-	937,500	0%	4%	0%
		6	-	111,326	0%	4%	0%
		7		21,284	0%	5%	0%
	Sub Total		917,994	9,260,454	10%	3%	318%

Nationwide Experience: Compound Inflation

Experience Year	Policy Duration		Incurred Claims	Earned Premiums	Actual Loss Ratio	Expected Loss Ratio	Actual to Expected
2011		1	-	2,711,635	0%	3%	0%
		2	556,098	2,142,834	26%	3%	885%
		3	-	2,224,783	0%	3%	0%
		4	-	1,778,504	0%	3%	0%
		5	-	1,475,952	0%	4%	0%
		6	-	869,518	0%	4%	0%
		7	-	108,040	0%	5%	0%
		8	-	21,284	0%	5%	0%
	Sub Total		556,098	11,332,550	5%	3%	152%
2012		1	-	2,885,142	0%	3%	0%
		2	-	2,579,006	0%	3%	0%
		3	426,995	2,035,409	21%	3%	656%
		4	-	2,105,930	0%	3%	0%
		5	308,796	1,652,113	19%	4%	498%
		6	-	1,382,150	0%	4%	0%
		7	693,311	825,180	84%	5%	1796%
		8	-	102,518	0%	5%	0%
		9	-	21,284	0%	6%	0%
	Sub Total		1,429,102	13,588,732	11%	3%	313%
2013		1	-	1,047,335	0%	3%	0%
		2	353,190	2,691,785	13%	3%	448%
		3	4,630	2,347,055	0%	3%	6%
		4	-	1,924,006	0%	3%	0%
		5	282,946	1,984,751	14%	4%	380%
		6	-	1,556,836	0%	4%	0%
		7	23,917	1,335,382	2%	5%	38%
		8	-	765,137	0%	5%	0%
		9	-	88,988	0%	6%	0%
	1	.0	-	20,926	0%	6%	0%
	Sub Total		664,683	13,762,201	5%	4%	134%
2014		1	-	520,555	0%	3%	0%
		2	7,028	950,294	1%	3%	25%
		3	-	2,447,012	0%	3%	0%
		4	-	2,176,124	0%	3%	0%
		5	-	1,611,446	0%	4%	0%
		6	-	1,697,699	0%	4%	0%
		7	-	1,473,324	0%	5%	0%
		8	-	1,294,764	0%	5%	0%
		9	-	724,441	0%	6%	0%
		10	-	79,822	0%	6%	0%
		1		20,926	0%	7%	0%
	Sub Total		7,028	12,996,407	0%	4%	1%

Nationwide Experience: Compound Inflation

rperience Year	Policy Duration	Incurred Claims	Earned Premiums	Actual Loss Ratio	Expected Loss Ratio	Actual to Expected
2015	1	,	595,467	56%	3%	2079%
	2		455,007	0%	3%	09
	3	17,595	839,296	2%	3%	669
	4	•	2,278,071	42%	3%	12169
	5	-	1,998,115	0%	4%	119
	6		1,432,349	0%	4%	19
	7		1,613,864	0%	5%	0%
	8	· ·	1,393,494	14%	5%	267%
	g	•	1,227,828	0%	6%	79
	10	-	667,077	0%	6%	0%
	11	-	71,137	0%	7%	0%
_	12	-	20,926	0%	8%	09
S	Sub Total	1,515,719	12,592,631	12%	4%	282%
2016	1	-	470,030	0%	3%	0%
	2	-	547,805	0%	3%	0%
	3	-	422,935	0%	3%	0%
	4	-	776,197	0%	3%	0%
	5	1,458	2,117,597	0%	4%	29
	6	524,673	1,856,035	28%	4%	6749
	7	-	1,349,476	0%	5%	0%
	8	-	1,531,314	0%	5%	0%
	9	-	1,333,745	0%	6%	0%
	10	-	1,181,807	0%	6%	09
	11	-	615,637	0%	7%	0%
	12	-	62,925	0%	8%	09
_	13	-	19,215	0%	8%	09
Ç	Sub Total	526,131	12,284,718	4%	5%	939
2017	1		412,886	0%	3%	0%
	2	-	435,714	0%	3%	09
	3	-	495,383	0%	3%	09
	4	. <u>-</u>	390,623	0%	3%	09
	5	; -	739,215	0%	4%	09
	6		1,968,742	0%	4%	09
	7		1,731,276	0%	5%	09
	8	421,926	1,278,139	33%	5%	6369
	9		1,475,248	17%	6%	2969
	10	-	1,263,893	0%	6%	09
	11		1,085,401	48%	7%	7019
	12	•	598,956	0%	8%	09
	13		53,297	52%	8%	6249
	14	-	17,671	0%	9%	09
	Sub Total	1,223,440	11,946,444	10%	5%	2049
2018	1	-	210,941	0%	3%	0%
	2		408,422	0%	3%	09
	3		414,111	0%	3%	09
	4		473,068	0%	3%	09
	5		377,637	0%	4%	09
	6		712,257	0%	4%	09
	7		1,944,189	0%	5%	09
	8		1,749,612	16%	5%	3149
	9	•	1,271,380	0%	6%	09
	10		1,459,050	21%	6%	3419
	11	•	1,214,067	0%	7%	09
	12		1,040,809	10%	8%	1269
	13	•	584,593	0%	8%	09
	13		50,600	0%	9%	09
	14		-			
	15	_	17,671	0%	10%	0%

Nationwide Experience: Compound Inflation

[&]quot;Expected" is equal to original pricing, Incurred Claims exclude IBNR

Experience	Policy		Earned	Actual Loss	Expected	Actual to
Year	Duration	Incurred Claims	Premiums	Ratio	Loss Ratio	Expected
Summary b	-					
	1	•	19,920,955	5%	3%	175%
	2	•	17,857,351	5%	3%	175%
	3	, ,	16,098,860	11%	3%	330%
	4	•	14,637,699	7%	3%	190%
	5	601,141	13,029,867	5%	4%	123%
	6	525,055	11,608,196	5%	4%	108%
	7	717,228	10,402,015	7%	5%	147%
	8	899,972	8,136,262	11%	5%	213%
	9	254,632	6,142,914	4%	6%	72%
	10	312,172	4,672,575	7%	6%	106%
	11	524,113	3,007,168	17%	7%	253%
	12	99,295	1,723,616	6%	8%	76%
	13	27,536	657,105	4%	8%	51%
	14	-	68,271	0%	9%	0%
_	15	-	17,671	0%	10%	0%
-	Total	8,472,582	127,980,525	7%	4%	169%
Summary b	y Calendar \	Year of Incurral				
2004		-	21,188	0%	3%	0%
2005		-	142,174	0%	3%	0%
2006		-	1,367,424	0%	3%	0%
2007		289,576	3,255,450	9%	3%	319%
2008		-	6,114,505	0%	3%	0%
2009		646,338	7,387,240	9%	3%	292%
2010		917,994	9,260,454	10%	3%	318%
2011		556,098	11,332,550	5%	3%	152%
2012		1,429,102	13,588,732	11%	3%	313%
2013		664,683	13,762,201	5%	4%	134%
2014		7,028	12,996,407	0%	4%	1%
2015		1,515,719	12,592,631	12%	4%	282%
2016		526,131	12,284,718	4%	5%	93%
2017		1,223,440	11,946,444	10%	5%	204%
2018		696,473	11,928,407	6%	5%	106%
Total		8,472,582	127,980,525	7%	4%	169%

Nationwide Experience: Simple Inflation

Experience	Policy		In account of Cl.	Earned	Actual Loss	Expected	Actual to
Year	Duration		Incurred Claims	Premiums	Ratio	Loss Ratio	Expected
2004		1	-	1,611	0%	3%	0%
2005		1	-	175,510	0%	3%	0%
		2	-	1,857	0%	3%	0%
	Sub Total		-	177,367	0%	3%	0%
2006		1	52,525	1,513,719	3%	3%	130%
		2	-	180,947	0%	3%	0%
		3	-	1,857	0%	3%	0%
	Sub Total		52,525	1,696,523	3%	3%	115%
2007		1	-	2,813,285	0%	3%	0%
		2	-	1,440,427	0%	3%	0%
		3	-	164,216	0%	3%	0%
		4	-	1,857	0%	3%	0%
	Sub Total		-	4,419,785	0%	3%	0%
2008		1	90,575	3,732,157	2%	3%	91%
		2	-	2,680,899	0%	3%	0%
		3	130,465	1,300,493	10%	3%	314%
		4	-	155,651	0%	3%	0%
		5	-	1,857	0%	4%	0%
	Sub Total		221,040	7,871,057	3%	3%	98%
2009		1	266,615	3,889,354	7%	3%	257%
		2	99,117	3,462,680	3%	3%	98%
		3	354,853	2,389,769	15%	3%	465%
		4	15,870	1,190,980	1%	3%	38%
		5	-	132,998	0%	4%	0%
		6	-	1,857	0%	4%	0%
	Sub Total		736,455	11,067,638	7%	3%	224%
2010		1	77,380	3,977,768	2%	3%	73%
		2	5,133	3,599,000	0%	3%	5%
		3	-	3,128,978	0%	3%	0%
		4	73,840	2,191,645	3%	3%	97%
		5	-	1,088,293	0%	4%	0%
		6	-	124,619	0%	4%	0%
		7	-	1,857	0%	5%	0%
	Sub Total		156,353	14,112,160	1%	3%	36%

Nationwide Experience: Simple Inflation

Experience Year	Policy Duration		curred Claims	Earned Premiums	Actual Loss Ratio	Expected Loss Ratio	Actual to Expected
2011		1	-	4,733,166	0%	3%	0%
2011		2	_	3,295,115	0%	3%	0%
		3	-	3,303,526	0%	3%	0%
		4	178,780	2,811,779	6%	3%	183%
		5	461,249	2,031,508	23%	4%	605%
		6	-	989,676	0%	4%	0%
		7	-	119,545	0%	5%	0%
	;	8	-	1,857	0%	5%	0%
	Sub Total		640,029	17,286,172	4%	3%	116%
2012		1	28,210	8,097,894	0%	3%	13%
		2	278,545	4,535,861	6%	3%	210%
	;	3	233,533	2,984,015	8%	3%	245%
	•	4	3,830	3,055,463	0%	3%	4%
	!	5	1,600	2,610,627	0%	4%	2%
	(6	147,135	1,885,932	8%	4%	186%
	•	7	-	953,741	0%	5%	0%
	;	8	-	116,409	0%	5%	0%
		9	-	1,857	0%	6%	0%
	Sub Total		692,853	24,241,799	3%	3%	89%
2013		1	497,064	3,397,900	15%	3%	548%
		2	-	7,860,859	0%	3%	0%
		3	166,727	4,164,266	4%	3%	125%
	•	4	121,960	2,773,247	4%	3%	127%
	!	5	1,155	2,839,503	0%	4%	1%
	(6	6,624	2,404,393	0%	4%	7%
	•	7	-	1,787,497	0%	5%	0%
	;	8	-	911,212	0%	5%	0%
	9	9	-	112,071	0%	6%	0%
	1	0	-	1,857	0%	6%	0%
	Sub Total		793,530	26,252,805	3%	3%	89%
2014		1	-	970,560	0%	3%	0%
		2	-	3,073,775	0%	3%	0%
		3	550,573	7,369,708	7%	3%	234%
		4	19,450	3,838,875	1%	3%	15%
	!	5	-	2,534,040	0%	4%	0%
	(6	7,250	2,654,157	0%	4%	7%
	•	7	125,239	2,259,106	6%	5%	118%
	;	8	466	1,670,101	0%	5%	1%
	•	9	-	866,224	0%	6%	0%
	10	0	-	109,479	0%	6%	0%
	1	1	<u>-</u>	1,719	0%	7%	0%
	Sub Total	_	702,978	25,347,744	3%	4%	75%

Nationwide Experience: Simple Inflation

rperience Year	Policy Duration	Incurred Claims	Earned Premiums	Actual Loss Ratio	Expected Loss Ratio	Actual to Expected
2015	1	-	971,056	0%	3%	0%
	2	_	839,748	0%	3%	0%
	3	-	2,810,336	0%	3%	0%
	4	132,852	6,861,734	2%	3%	569
	5	633,839	3,594,560	18%	4%	4709
	6	482,521	2,363,313	20%	4%	4879
	7	44,155	2,483,008	2%	5%	389
	8	3 277,396	2,154,176	13%	5%	2489
	g	886,096	1,580,215	56%	6%	9809
	10	-	812,379	0%	6%	09
	11	- -	101,093	0%	7%	09
_	12		615	0%	8%	09
9	Sub Total	2,456,859	24,572,233	10%	4%	2489
2016	1	-	1,013,318	0%	3%	09
	2	_	904,504	0%	3%	09
	3	-	767,870	0%	3%	09
	4	-	2,610,899	0%	3%	00
	5	34,024	6,522,677	1%	4%	140
	ϵ	· -	3,340,494	0%	4%	00
	7	238,132	2,211,512	11%	5%	2300
	8	-	2,370,306	0%	5%	00
	g	146,616	2,064,454	7%	6%	124 ⁰
	10	478,954	1,522,695	31%	6%	501°
	11	_	770,749	0%	7%	00
	12	_	93,470	0%	8%	00
_	13	-	615	0%	8%	00
	Sub Total	897,726	24,193,563	4%	4%	85°
2017	1	<u>-</u>	937,879	0%	3%	00
	2	48,784	904,096	5%	3%	1840
	3	-	803,052	0%	3%	00
	4	-	687,529	0%	3%	00
	5	329,979	2,442,713	14%	4%	360°
	ϵ	1,750	6,187,448	0%	4%	10
	7	191,023	3,169,728	6%	5%	1299
	8	413,397	2,036,218	20%	5%	3919
	g	576,324	2,240,354	26%	6%	450°
	10	1,855	1,988,049	0%	6%	10
	11	292,446	1,435,611	20%	7%	296°
	12	73,830	744,677	10%	8%	1310
	13	-	89,781	0%	8%	00
_	14	-	615	0%	9%	00
9	Sub Total	1,929,388	23,667,750	8%	5%	1729
2018	1	_	819,858	0%	3%	00
	2	<u>-</u>	875,870	0%	3%	00
	3	-	820,456	0%	3%	00
	4	-	735,576	0%	3%	00
	5	-	662,096	0%	4%	00
	ϵ	-	2,346,811	0%	4%	00
	7	251,201	6,015,741	4%	5%	899
	8	270,030	3,112,125	9%	5%	1679
	g	-	1,960,813	0%	6%	00
	10	230,439	2,139,241	11%	6%	1720
	11	<u>-</u>	1,880,141	0%	7%	00
	12	_	1,412,266	0%	8%	00
	13	3 232,369	731,481	32%	8%	3849
	14	-	84,705	0%	9%	09
_	15	-	615	0%	10%	09
_	Sub Total	984,039	23,597,795	4%	5%	819

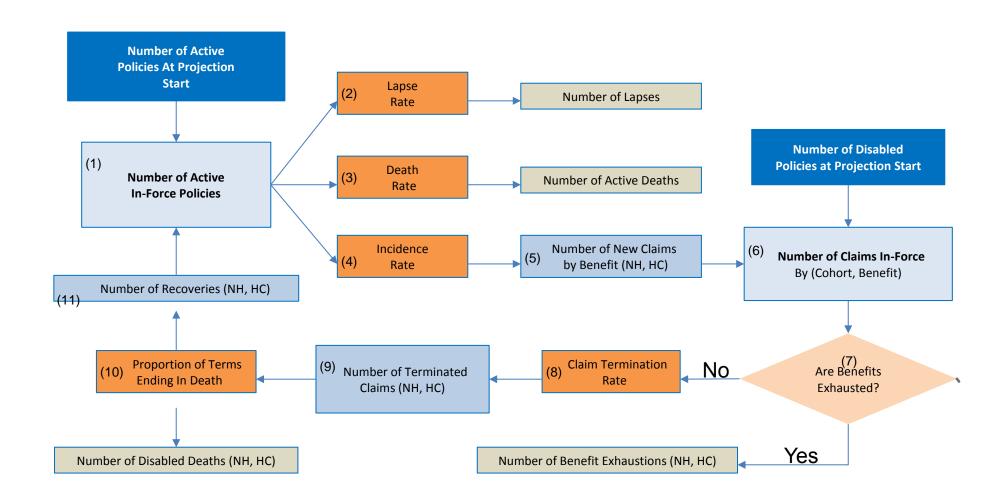
Nationwide Experience: Simple Inflation

[&]quot;Expected" is equal to original pricing, Incurred Claims exclude IBNR

Experience	Policy		Earned	Actual Loss	Expected	Actual to
Year	Duration	Incurred Claims	Premiums	Ratio	Loss Ratio	Expected
Summary b	y Duration					
	1	1,012,369	37,045,035	3%	3%	102%
	2	•	33,655,638	1%	3%	44%
	3	1,436,151	30,008,542	5%	3%	150%
	4	•	26,915,235	2%	3%	59%
	5	1,461,846	24,460,872	6%	4%	159%
	6	645,280	22,298,700	3%	4%	69%
	7	849,750	19,001,735	4%	5%	96%
	8	961,289	12,372,404	8%	5%	150%
	9	1,609,036	8,825,988	18%	6%	319%
	10	711,248	6,573,700	11%	6%	172%
	11	292,446	4,189,313	7%	7%	101%
	12	73,830	2,251,028	3%	8%	43%
	13	232,369	821,877	28%	8%	341%
	14	-	85,320	0%	9%	0%
_	15	-	615	0%	10%	0%
-	Total	10,263,775	228,506,002	4%	4%	118%
Summary b	y Calendar \	ear of Incurral				
2004		-	1,611	0%	3%	0%
2005		-	177,367	0%	3%	0%
2006		52,525	1,696,523	3%	3%	115%
2007		-	4,419,785	0%	3%	0%
2008		221,040	7,871,057	3%	3%	98%
2009		736,455	11,067,638	7%	3%	224%
2010		156,353	14,112,160	1%	3%	36%
2011		640,029	17,286,172	4%	3%	116%
2012		692,853	24,241,799	3%	3%	89%
2013		793,530	26,252,805	3%	3%	89%
2014		702,978	25,347,744	3%	4%	75%
2015		2,456,859	24,572,233	10%	4%	248%
2016		897,726	24,193,563	4%	4%	85%
2017		1,929,388	23,667,750	8%	5%	172%
2018		984,039	23,597,795	4%	5%	81%
Total		10,263,775	228,506,002	4%	4%	118%

This is a simple schematic of how Prophet projects lives e.g. Active, Deaths, New Claims, etc. (see numbered notes below).

Projected Lives



Notes:

- (1) For a given model point the number of Active In-force policies is input into the model at projection start. If a policy is disabled at Projection start, then they start at (6).
- (2) Lapses are input as annual rates and converted to effective monthly rates. Lapses are assumed to occur at the end of the month. However the lapse timing is assumed to be consistent with the premium payment frequency for each policy. This means that lapses are assumed to occur only at the end of the month prior to a month in which premium payment is due for a given policy. Policies that are flagged within the model point file with an APO indicator variable are attributed a lapse rate that is 50% of the lapse assumption for an otherwise identical non-APO policy during the premium payment period and a 0% lapse rate after the premium becomes paid up. Similarly policies in NFO at the start of the projection have a 0% lapse rate throughout the projection.
- (3) Mortality rates are input as annual rates from the assumption tables and are converted to the effective monthly rates. Active deaths are assumed to occur at the end of each month.
- (4) Incidence rates are input as annual rates (together with multiplicative factor adjustments that are applied in the model). New claims are assumed to occur at the end of each month. The model utilizes submitted incidence when projecting future incurrals. Claim termination rates are applied to new claims while they are still in the elimination period. The model can be easily adjusted to utilize Paid incidence rates. The total monthly incidence rate is split into separate NH and HC incidence rates according to an assumed distribution of claim types.
- (5) New claims are tracked separately for each location type.
- (6) Each cohort of claims (by month of disability and location) is tracked separately.
- (7) Claims can terminate either through death, recovery or exhaustion of benefits and these terminations are assumed to occur at the end of each month. Exhaustion of benefits are dependent on the benefit period. For each policy, the BP for the NH portion of a claim is read directly from the input data, while the BP associated with the HC portion of a claim is calculated from the NH BP according to the HC percent associated with that model point. If the HC type is PHC an additional PHC adjustment is included in the calculation of the HC BP. Consequently, the model tracks exhaustion separately by location.
- (8) A total claim termination rate (accounting for disabled death and recovery) is applied monthly to each cohort of claims that has not yet reached benefit exhaustion. The model can accommodate different termination rates by location (or any other factor), but currently uses one table for both NH and HC.

- (9) The number of claim terminations is calculated monthly by location.
- (10) The number of disabled deaths is then calculated by using an assumption that is expressed as a percentage of claim terminations.
- (11)By default, the remaining claim terminations are deemed to be recoveries and are added back into the count of active in-force policies at the start of the following month. No adjustment is made to the benefit pool for that model point to recognize any prior payou of benefits.

Long Term Care Nationwide Premium Increase History

Unum Group's insuring subsidiaries have sold long term care insurance since 1988 and have increased premiums on the following policy forms. The chart below shows the premium increases we have sought on these forms on a nationwide basis. Premium increase amounts and timing of increases vary by state.

Unum Life Insurance Company of America

Onum Life Insurance Company of America											
Policy Forms	Years Available for Sale	Years of Premium Increase	Percentage Premium Increase								
LTC94, LTC94Q	1994-2002	2006-2007	0-30%								
LTC5092, LTC5192, LTC5292, LTC5392, LTC5492,LTC5592	1992-1996	2010-2011	0-25%								
LTC94, LTC94Q	1994-2002	2010-2011	0-25%								
LTC99Q	1997-2002	2010-2011	0-25%								
LTC5092, LTC5192, LTC5292, LTC5392, LTC5492,LTC5592	1992-1996	2014-2018	0-174%								
LTC94, LTC94Q	1994-2002	2014-2018	0-174%								
LTC99Q	1997-2002	2014-2018	0-174%								
B.LTC	1990-2005	2013-2018	0-103%								
GLTC95	1997-2008	2013-2018	0-103%								
LTC5092, LTC5192, LTC5292, LTC5392, LTC5492,LTC5592	1992-1996	2019 - Present	0-53%								
LTC94, LTC94Q	1994-2002	2019 - Present	0-53%								
LTC99Q	1997-2002	2019 - Present	0-53%								
B.LTC	1990-2005	2019-Present	0-143%								
GLTC95	1997-2008	2019-Present	0-143%								
GLTC04	2005 - 2012	2019-Present	0-105%								
RGLTC04	2005 - 2012	2019-Present	0-105%								

Provident Life and Accident

Policy Forms	Years Available for Sale	Years of Premium Increase	Percentage Premium Increase
RLTCP03, LTCP03	2003-2009	2013-present	0-240%
RLTC03, LTC03	2003-2009	2013-present	0-240%
LTCT03	2003-2009	2013-present	0-240%



March 28, 2019

Re: Unum Life Insurance Company of America

Group Long Term Care

NAIC #416-62235 FEIN #01-0278678 Policy Forms: GLTC04, RGLTC04

Dear Commissioner:

The purpose of this letter and attached actuarial memorandum is to request a rate increase for the inforce business sold under the Unum group long-term care policy forms referenced in the subject line above. These policy forms were priced prior to rate stability regulations and are no longer marketed in any state.

The factors driving the Company's need for premium increases are the same as those impacting the LTC industry, with our experience developing unfavorably for key pricing assumptions:

- Lower than expected lapse rates (e.g. less than 1%)
- Continued mortality improvements (e.g. people living longer)
- Increasing claim durations; and
- Persistent low interest rate environment.

Unum is requesting the approval of an 89% premium rate increase on policies with compound inflation (5% and CPI) and a 44% increase on policies with simple inflation. The company will also consider an actuarially equivalent phased-in rate increase over multiple years.

Please note that the policy forms subject to this rate increase are group long-term care policies that have characteristics that differ from a typical individual long-term care policy such as:

- the employer chooses the plan designs that will be offered to employees
- the employer may pay for a base level of coverage for all employees and employees will usually be able to buy additional coverage such as higher benefit amounts, longer duration coverage, inflation coverage and higher home care coverage;
 - o 78% of Virginia insureds have some level of employer funded of premiums
- Group long term care premiums are generally much lower than individual long term care premium.
 - in Virginia, the average annual group premium is \$469 vs. \$2,897 for Unum's individual policy forms
- The average issue age and attained age is generally much lower for group coverage vs. individual coverage.
 - in Virginia, the average group issue age for these policy forms is 43 vs. 56 for Unum's individual policy forms

in Virginia, the average group attained age for these policy forms is 49 vs.
 74 for Unum's individual policy forms

Any approved premium rate increase will be effective upon the employer policyholder's next anniversary, subject to at least a 60-day notification to the insured or longer if required by your state. We anticipate implementation of these rates beginning in October 2019, if approved with rates becoming effective in 2020.

Unum will offer all insureds affected by the premium rate increase the option of reducing their coverage to mitigate the impact of the rate increase. Employers and insureds will have the option to reduce their monthly benefit, elect to continue the policy under contingent non-forfeiture, or make other benefit changes that will best meet their needs.

The company will offer a contingent benefit upon lapse, to all insureds, regardless of the rate increase amount or the insured's issue age. Each insured will be given the option to

exchange their current policy for a non-forfeiture benefit (paid-up policy) upon lapse which is equal to 100% of the sum of all premiums paid. Insureds who select this option will immediately be entitled to the non-forfeiture benefit and will not be obligated to pay the higher premiums associated with the rate increase. If a policy lapses for non-payment of premiums, the insured's coverage will automatically convert to the contingent non-forfeiture benefit.

Insureds who choose this option will also receive copies of Amendment 04CNF19G-VA and 04ECNF19G-APO-VA. Copies of these amendments are enclosed for your review.

The proposed rate increase would only be applicable to insureds with compound or simple inflation. All other insureds are excluded from this rate increase request. Please see the table below for the distribution of insureds in your state by the proposed rate increase request.

Ninety percent of insureds will be excluded from the rate increase request. The average rate increase request across all insured is 34%.

Inflation Type	Rate Increase	Virginia Insureds
5%/CPI Compound Uncapped	89.0%	284
5% Simple Uncapped	44.0%	224
No Inflation	0.0%	4,659
Total		5,167

No premium increases have previously been approved in your state on the listed policy form.

The following items are included in this submission:

- Cover letter
- Actuarial memorandum and Supporting Loss Ratio Exhibits 1(a,b) and 2(a,b)
- Nationwide filing and approval status, Exhibit 3
- Sample certificateholder letter and FAQ
- New base rate schedules reflecting the requested increase; and Amendment 04CNF19G-VA and 04ECNF19G-APO-VA

We respectfully request non-disclosure of this information if your Department grants it.

Please note that Unum exited the individual long term care market in 2009 and the group long term care market in 2012.

If there is anything I can do to expedite this filing including presenting myself and my colleagues for an in person meeting, please let me know. Should you have any questions regarding this filing, please feel free to contact me by phone or e-mail.

Thank you for your time and consideration of this filing. Sincerely,

Ronald (Jake) L Lucas, FSA, MAAA Vice President, Long Term Care Pricing

Rosald L. L. wood

Unum (207) 575-3895

rlucas@unum.com

Unum Life Insurance Company of America Exhibit 1a - Historical and Projected Experience Policy Form Series: GLTC04, RGLTC04

Nationwide Experience

Comp	ound Inflation							Before Rate Increase	After Rate Inc	rease	"If Knew App	proach"	"Make Up	Increase"
	Calendar Year	Inforce Policies	Incurred Claims	Earned Premium	Paid Claims	DLR + IBNR	Incurred Claims	Incurred Loss Ratio	Earned Premium	Incurred Loss Ratio	Earned Premium	Incurred Loss Ratio	Earned Premium	Incurred Loss Ratio
	2004	2	-	21,188	-	-	-	0%	21,188	0%	40,363	0%	21,188	0%
	2005	359	-	142,174	-	-	-	0%	142,174	0%	270,841	0%	142,174	0%
	2006	1,564	-	1,367,424	-	-	-	0%	1,367,424	0%	2,604,943	0%	1,367,424	0%
8	2007	2,828	1	3,255,450	289,576	-	289,576	9%	3,255,450	9%	6,201,632	5%	3,255,450	9%
<u>=</u>	2008	4,110	-	6,114,505	-	-	-	0%	6,114,505	0%	11,648,132	0%	6,114,505	0%
ē	2009	4,714	2	7,387,240	581,434	64,904	646,338	9%	7,387,240	9%	14,072,692	5%	7,387,240	9%
ᅕ	2010	5,596	4	9,260,454	892,627	25,367	917,994	10%	9,260,454	10%	17,641,165	5%	9,260,454	10%
=	2011	6,638	1	11,332,550	463,599	92,499	556,098	5%	11,332,550	5%	21,588,508	3%	11,332,550	5%
<u>.8</u>	2012	7,089	5	13,588,732	1,331,093	98,009	1,429,102	11%	13,588,732	11%	25,886,534	6%	13,588,732	11%
6	2013	6,793	3	13,762,201	589,701	74,982	664,683	5%	13,762,201	5%	26,216,993	3%	13,762,201	5%
ist	2014	6,634	-	12,996,407	7,028	-	7,028	0%	12,996,407	0%	24,758,155	0%	12,996,407	0%
I	2015	6,580	10	12,592,631	857,526	658,193	1,515,719	12%	12,592,631	12%	23,988,962	6%	12,592,631	12%
	2016	6,469	2	12,284,718	155,187	381,227	536,414	4%	12,284,718	4%	23,402,388	2%	12,284,718	4%
	2017	6,340	5	11,946,444	120,694	1,161,014	1,281,708	11%	11,946,444	11%	22,757,976	6%	11,946,444	11%
	2018	6,223	1	11,928,407	15,719	954,957	970,676	8%	11,928,407	8%	22,723,615	4%	11,928,407	8%
	Total Past			127,980,525	5,304,184	3,511,152	8,815,336	7%	127,980,525	7%	243,802,900	4%	127,980,525	7%

	Calendar	Inforce	Incurred								Incurred		Incurred Loss		
	Year	Policies	Claims	Earned Premium	Paid Claims	DLR + IBNR	Incurred Claims	Incurred Loss Ratio		Earned Premium	Loss Ratio	Earned Premium	Ratio	Earned Premium	Incurred Loss Ratio
F	2019	5,972	5	12,626,702	907,612	377,173	1,284,784	10%		12,626,702	10%	24.053.868	5%	12,626,702	10%
	2020	5,760	9	11,939,352	963,823	600,552	1,564,375	13%		12,677,270	12%	22,744,465	7%	13,838,041	11%
	2021	5,575	13	11,337,516	1,124,658	686,321	1,810,979	16%		19,465,885	9%	21,597,968	8%	32,252,083	6%
	2022	5,408	17	10,553,733	1,283,796	727,753	2,011,549	19%		19,946,556	10%	20,104,862	10%	34,721,782	6%
	2023	5,255	21	10,087,498	1,432,626	974,870	2,407,496	24%		19,065,371	13%	19,216,683	13%	33,187,867	7%
	2024	5,111	25	9,719,095	1,600,485	1,009,088	2,609,574	27%		18,369,089	14%	18,514,875	14%	31,975,821	8%
	2025	4,976	29	9,357,919	1,857,864	1,400,083	3,257,947	35%		17,686,467	18%	17,826,836	18%	30,787,554	11%
	2026	4,847	34	8,969,723	2,224,754	1,544,495	3,769,249	42%		16,952,777	22%	17,087,323	22%	29,510,390	13%
_	2027	4,722	38	8,619,265	2,624,657	1,725,586	4,350,242	50%		16,290,412	27%	16,419,701	26%	28,357,383	15%
Experience	2028	4,600	43	8,293,850	3,078,433	1,911,794	4,990,227	60%		15,675,377	32%	15,799,785	32%	27,286,767	18%
ē.	2029	4,480	48	7,970,278	3,593,824	2,108,684	5,702,508	72%		15,063,825	38%	15,183,379	38%	26,222,214	22%
ā	2030	4,361	53	7,704,036	4,176,454	2,286,599	6,463,053	84%		14,560,627	44%	14,676,188	44%	25,346,277	25%
훘	2031	4,242	59	7,435,139	4,826,479	2,458,169	7,284,648	98%		14,052,412	52%	14,163,939	51%	24,461,606	30%
	2032	4,123	64	7,160,834	5,543,280	2,642,186	8,185,466	114%		13,533,976	60%	13,641,388	60%	23,559,143	35%
Projection	2033	4,003	70	6,882,855	6,330,933	2,803,462	9,134,395	133%		13,008,596	70%	13,111,839	70%	22,644,593	40%
뒪	2034	3,882	77	6,602,024	7,189,383	2,964,439	10,153,822	154%		12,477,826	81%	12,576,856	81%	21,720,660	47%
ē	2035	3,760	83	6,327,847	8,115,138	3,120,102	11,235,239	178%		11,959,630	94%	12,054,548	93%	20,818,615	54%
<u>-</u>	2036	3,636	89	6,050,959	9,105,859	3,293,962	12,399,820	205%		11,436,313	108%	11,527,078	108%	19,907,657	62%
	2037	3,511	95	5,771,880	10,158,297	3,470,115	13,628,412	236%		10,908,854	125%	10,995,432	124%	18,989,486	72%
	2038	3,384	101	5,490,586	11,273,149	3,624,738	14,897,887	271%		10,377,207	144%	10,459,566	142%	18,064,027	82%
	2039	3,254	106	5,208,491	12,439,497	3,876,328	16,315,825	313%		9,844,048	166%	9,922,175	164%	17,135,935	95%
	2040	3,123	112	4,925,484	13,690,793	4,118,048	17,808,842	362%		9,309,165	191%	9,383,047	190%	16,204,843	110%
	2041	2,990	118	4,642,084	15,023,993	4,308,830	19,332,823	416%		8,773,538	220%	8,843,170	219%	15,272,456	127%
	2042	2,855	123	4,358,961	16,431,746	4,404,023	20,835,768	478%		8,238,437	253%	8,303,822	251%	14,340,983	145%
	2043	2,719	128	4,077,469	17,895,470	4,405,285	22,300,755	547%		7,706,417	289%	7,767,579	287%	13,414,874	166%
	2044	2,582	132	3,800,485	19,389,700	4,350,561	23,740,260	625%		7,182,916	331%	7,239,923	328%	12,503,595	190%
	2045	2,444	135	3,528,289	20,884,978	4,174,296	25,059,274	710%		6,668,466	376%	6,721,390	373%	11,608,070	216%
	2046	2,307	137	3,262,027	22,355,766	3,919,653	26,275,419	805%		6,165,232	426%	6,214,162	423%	10,732,070	245%
	2047	2,170	138	3,002,935	23,767,085	3,492,082	27,259,167	908%		5,675,547	480%	5,720,591	477%	9,879,655	276%
	2048	2,035	139	2,752,348	25,086,317	2,939,354	28,025,670	1018%		5,201,938	539%	5,243,223	535%	9,055,226	309%
	2049	1,902	138	2,511,637	26,272,371	2,285,255	28,557,626	1137%		4,746,994	602%	4,784,669	597%	8,263,286	346%
	2050	1,771	136	2,282,007	27,277,873	1,628,210	28,906,083	1267%		4,312,993	670%	4,347,223	665%	7,507,802	385%
ı	2051	1,643	133	2,064,455	28,073,382	934,733	29,008,116	1405%		3,901,820	743%	3,932,787	738%	6,792,058	427%
	2052	1,519	129	1,859,538	28,651,840	260,126	28,911,967	1555%		3,514,527	823%	3,542,420	816%	6,117,880	473%
	2053 2054	1,400	124 119	1,667,723	29,002,717	(392,002)	28,610,715	1716% 1893%		3,151,996	908% 1002%	3,177,012	901% 994%	5,486,808	521% 575%
	2054	1,286 1,177	119	1,489,426 1,324,708	29,123,102 29,031,317	(928,375)	28,194,727	1893% 2084%	- 1	2,815,014 2,503,698	1103%	2,837,356 2,523,568	994% 1094%	4,900,210 4,358,288	634%
	2055	1,073	107	1,173,408	28,757,369	(1,419,797) (1,841,424)	27,611,520 26,915,945	2084%		2,503,698	1214%	2,323,368	1204%	4,358,288 3,860,511	697%
	2057	975	100	1,035,228	28,324,215	(2,168,762)	26,155,454	2527%		1,956,581	1337%	1,972,109	1326%	3,405,900	768%
	2057	883	94	909,729	28,324,215	(2,188,463)	25,269,815	2527%	- 1	1,719,388	1470%	1,733,034	1458%	2,993,008	844%
ı	2059	798	88	796,326	27,078,421	(2,762,338)	24,316,083	3054%		1,505,056	1616%	1,517,001	1603%	2,619,913	928%
J	2060	717	82	694,365	26,297,229	(3,002,872)	23,294,357	3355%	- 1	1,312,350	1775%	1,322,766	1761%	2,284,461	1020%
	2060	643	76	603,109	25,422,819	(3,002,872)	23,294,357	3678%	- 1	1,312,350	1946%	1,148,923	1931%	1,984,229	1118%
	2061	574	76 70	521,875	25,422,819	(3,239,461)	22,183,358	4026%	- 1	986,344	2130%	994,172	2113%	1,716,969	1224%
	2063	511	64	449,855	23,407,870	(3,564,705)	19,843,165	4411%		850,226	2334%	856,974	2315%	1,480,024	1341%
	2064	453	58	386,282	22,287,348	(3,619,042)	18,668,306	4833%		730,072	2557%	735,867	2537%	1,270,867	1469%
	2065+	2.715	427	1,978,486	219,029,842	(59,948,574)	159,081,268	8041%		3,739,338	4254%	3,769,015	4221%	6,509,218	2444%
-	Total Future	2,/13	74/	230,207,820	924,630,930	(3,996,653)	920,634,277	400%	+	412,004,890	223%	438,545,897	210%	697,977,808	132%

Interest Adjuste	ed Values as of 12/31/18 at 3.98%								
Past	158,480,692	10,766,124	7%	158,480,692	7%	301,905,719	4%	158,480,692	7%
Future	144,172,629	277,258,390	192%	250,360,198	111%	274,648,858	101%	417,396,825	66%
Lifetime	302 653 321	200 024 515	OE0/	400 040 000	700/-	E76 EE4 E76	EO 00/-	575 977 517	EO 00/

 $\label{eq:NAIC Rate Stability Requirement:} Accumulated value of past incurred daims + present value of future incurred claims: Accumulated past +present value of original premium x 58% + rate increase premium x 85%:$

Discount Rate Loss Ratio Target Rate increase Loss Ratio Target

d value of past incurred claims	\$10,766,124
ue of future incurred claims	\$277,258,39
ed claims	\$288,024,51

(1) Accumulated value of past incurred claims	\$10,766,124
(2) Present value of future incurred claims	\$277,258,390
(3) Total incurred claims	\$288,024,515
(4) 58% of original premiums plus	\$175,538,926
(5) 85% of rate increase premium	\$90,259,434
(6) Total premiums	\$265,798,360
Since (3) total incurred claims exceed	Loce Datio Test Dassed

If Knew Increase 90.5% Make-up Increase Test Active/Total 58%

Cost Sharing

Policyholder share of the increase	Rate Increase
100%	15.0%
90%	31.5%
75%	37.5%
65%	32.5%
50%	10.2%
Total	126.7%
	share of the increase 100% 90% 75% 65% 50%

Unum Life Insurance Company of America Exhibit 1b - Historical and Projected Experience Policy Form Series: GLTC04, RGLTC04

Nationwide Experience Simple Inflation

Simple	Inflation							Before Rate Increase	After Rate Inc	crease	"If Knew Ap	proach"	"Make Up Ir	crease"
	Calendar Year	Inforce Policies	Incurred Claims	Earned Premium	Paid Claims	DLR + IBNR	Incurred Claims	Incurred Loss Ratio	Earned Premium	Incurred Loss Ratio	Earned Premium	Incurred Loss Ratio	Earned Premium	Incurred Loss Ratio
	2004	7	-	1,611	-	-	-	0%	1,611	0%	2,553	0 %	1,611	0 %
	2005	1,092	-	177,367	-	-	-	0%	177,367	0%	281,127	0 %	177,367	0 %
	2006	3,323	1	1,696,523	52,525	-	52,525	3%	1,696,523	3%	2,688,989	2 %	1,696,523	0 %
8	2007	6,882	-	4,419,785	-	-	-	0%	4,419,785	0%	7,005,359	0 %	4,419,785	0 %
e	2008	9,979	2	7,871,057	221,040	-	221,040	3%	7,871,057	3%	12,475,625	2 %	7,871,057	0 %
Ē.	2009	13,052	4	11,067,638	665,948	70,507	736,455	7%	11,067,638	7%	17,542,206	4 %	11,067,638	0 %
×	2010	14,841	3	14,112,160	156,353	-	156,353	1%	14,112,160	1%	22,367,774	1 %	14,112,160	0 %
	2011	18,950	5	17,286,172	640,029	-	640,029	4%	17,286,172	4%	27,398,583	2 %	17,286,172	0 %
2	2012	24,071	11	24,241,799	692,853	-	692,853	3%	24,241,799	3%	38,423,251	2 %	24,241,799	0 %
-	2013	23,192	7	26,252,805	663,783	129,747	793,530	3%	26,252,805	3%	41,610,696	2 %	26,252,805	0 %
st	2014	22,404	6	25,347,744	505,250	197,728	702,978	3%	25,347,744	3%	40,176,174	2 %	25,347,744	0 %
Ŧ	2015	21,907	13	24,572,233	1,267,329	1,189,530	2,456,859	10%	24,572,233	10%	38,946,989	6%	24,572,233	0 %
	2016	21,381	6	24,193,563	346,384	580,241	926,625	4%	24,193,563	4%	38,346,797	2 %	24,193,563	0 %
	2017	21,211	9	23,667,750	352,608	1,740,539	2,093,147	9%	23,667,750	9%	37,513,384	6%	23,667,750	0 %
	2018	21,440	2	23,597,795	18,640	1,736,030	1,754,670	7%	23,597,795	7%	37,402,505	5 %	23,597,795	0 %
	Total Past			228,506,002	5,582,742	5,644,322	11,227,064	5%	228,506,002	5%	362,182,013	3%	228,506,002	0%

	Calendar	Inforce	Incurred	Earned						Incurred		Incurred Loss		Incurred Loss
	Year	Policies	Claims	Premium	Paid Claims	DLR + IBNR	Incurred Claims	Incurred Loss Ratio	Earned Premium	Loss Ratio	Earned Premium	Ratio	Earned Premium	Ratio
	2019	20,473	15	24,458,355	1,664,517	1,650,191	3,314,708	14%	24,458,355	14%	38,766,493	9%	24,458,355	14%
	2020	19,652	28	23,277,611	2,012,256	1,952,414	3,964,671	17%	23,988,871	17%	36,895,013	11%	25,532,630	16%
	2021	18,943	41	22,068,066	2,431,939	2,132,361	4,564,300	21%	29,889,969	15%	34,977,884	13%	46,867,055	10%
	2022	18,326	54	20,739,553	2,825,442	2,503,936	5,329,377	26%	29,864,956	18%	32,872,191	16%	49,671,229	11%
	2023	17,765	67	19,927,755	3,414,202	2,569,754	5,983,956	30%	28,695,967	21%	31,585,491	19%	47,726,973	13%
	2024	17,247	80	19,214,570	3,999,731	2,746,093	6,745,824	35%	27,668,981	24%	30,455,093	22%	46,018,895	15%
	2025	16,762	93	18,482,002	4,759,202	3,262,317	8,021,519	43%	26,614,083	30%	29,293,973	27%	44,264,395	18%
	2026	16,304	106	17,818,610	5,649,340	3,449,381	9,098,721	51%	25,658,798	35%	28,242,497	32%	42,675,570	21%
	2027	15,866	120	17,153,622	6,606,158	3,692,107	10,298,265	60%	24,701,215	42%	27,188,490	38%	41,082,924	25%
erience	2028	15,442	135	16,543,375	7,622,392	3,921,593	11,543,985	70%	23,822,460	48%	26,221,250	44%	39,621,383	29%
ē	2029	15,026	150	15,975,754	8,734,943	4,252,709	12,987,651	81%	23,005,085	56%	25,321,569	51%	38,261,930	34%
<u>=</u>	2030	14,614	167	15,423,528	9,964,668	4,502,684	14,467,352	94%	22,209,880	65%	24,446,292	59%	36,939,349	39%
Εχ	2031	14,203	184	14,870,834	11,300,908	4,748,805	16,049,714	108%	21,414,001	75%	23,570,272	68%	35,615,648	45%
ш	2032	13,793	202	14,311,302	12,742,665	4,939,499	17,682,164	124%	20,608,275	86%	22,683,414	78%	34,275,568	52%
6	2033	13,382	221	13,751,876	14,287,776	5,064,996	19,352,771	141%	19,802,702	98%	21,796,724	89%	32,935,744	59%
퓽	2034	12,967	240	13,189,845	15,923,289	5,150,335	21,073,624	160%	18,993,377	111%	20,905,904	101%	31,589,679	67%
Projectio	2035	12,549	260	12,618,731	17,632,909	5,192,659	22,825,569	181%	18,170,972	126%	20,000,688	114%	30,221,860	76%
ž	2036	12,126	279	12,045,829	19,402,271	5,186,201	24,588,471	204%	17,345,994	142%	19,092,639	129%	28,849,760	85%
_	2037	11,699	298	11,467,227	21,213,528	5,135,558	26,349,086	230%	16,512,807	160%	18,175,554	145%	27,464,008	96%
	2038	11,267	317	10,885,513	23,049,023	4,998,006	28,047,028	258%	15,675,138	179%	17,253,538	163%	26,070,803	108%
	2039	10,829	335	10,304,761	24,877,313	5,048,484	29,925,797	290%	14,838,856	202%	16,333,046	183%	24,679,903	121%
	2040	10,385	352	9,720,141	26,723,167	5,041,793	31,764,960	327%	13,997,003	227%	15,406,424	206%	23,279,738	136%
	2041	9,936	369	9,136,630	28,585,900	4,944,032	33,529,933	367%	13,156,747	255%	14,481,558	232%	21,882,228	153%
	2042	9,483	385	8,557,812	30,436,213	4,687,191	35,123,404	410%	12,323,249	285%	13,564,132	259%	20,495,960	171%
	2043	9,028	398	7,984,338	32,228,322	4,287,898	36,516,220	457%	11,497,447	318%	12,655,176	289%	19,122,489	191%
	2044	8,570	410	7,419,946	33,916,088	3,761,528	37,677,616	508%	10,684,723	353%	11,760,615	320%	17,770,772	212%
	2045	8,112	419	6,869,334	35,455,731	3,103,670	38,559,401	561%	9,891,841	390%	10,887,895	354%	16,452,055	234%
	2046	7,656	425	6,333,176	36,805,287	2,370,110	39,175,397	619%	9,119,773	430%	10,038,083	390%	15,167,956	258%
	2047	7,202	429	5,815,370	37,929,704	1,598,869	39,528,572	680%	8,374,132	472%	9,217,361	429%	13,927,810	284%
	2048	6,755	429	5,318,258	38,796,377	736,277	39,532,654	743%	7,658,291	516%	8,429,438	469%	12,737,227	310%
	2049	6,314	425	4,844,050	39,377,558	(125,464)	39,252,095	810%	6,975,432	563%	7,677,819	511%	11,601,500	338%
	2050	5,884	419	4,394,564	39,661,190	(973,255)	38,687,935	880%	6,328,172	611%	6,965,384	555%	10,524,980	368%
	2051	5,465	410	3,971,215	39,645,070	(1,795,746)	37,849,324	953%	5,718,550	662%	6,294,376	601%	9,511,061	398%
	2052	5,059	398	3,574,430	39,338,279	(2,499,699)	36,838,579	1031%	5,147,178	716%	5,665,471	650%	8,560,759	430%
	2053	4,669	384	3,205,317	38,761,868	(3,152,499)	35,609,369	1111%	4,615,656	771%	5,080,427	701%	7,676,733	464%
	2054	4,294	369	2,863,895	37,941,114	(3,678,338)	34,262,775	1196%	4,124,009	831%	4,539,274	755%	6,859,029	500%
	2055	3,937	352	2,549,482	36,905,958	(4,079,879)	32,826,079	1288%	3,671,254	894%	4,040,929	812%	6,106,009	538%
	2056	3,598	335	2,261,337	35,698,440	(4,368,248)	31,330,192	1385%	3,256,325	962%	3,584,218	874%	5,415,901	578%
	2057	3,278	317	1,998,441	34,357,674	(4,585,747)	29,771,926	1490%	2,877,755	1035%	3,167,529	940%	4,786,266	622%
	2058	2,976	299	1,759,673	32,913,563	(4,792,511)	28,121,052	1598%	2,533,929	1110%	2,789,082	1008%	4,214,417	667%
	2059	2,692	280	1,543,481	31,389,740	(4,934,887)	26,454,853	1714%	2,222,612	1190%	2,446,417	1081%	3,696,636	716%
	2060	2,428	262	1,349,050	29,804,708	(5,056,604)	24,748,103	1834%	1,942,632	1274%	2,138,245	1157%	3,230,975	766%
	2061	2,181	244	1,174,768	28,171,309	(5,188,170)	22,983,139	1956%	1,691,666	1359%	1,862,007	1234%	2,813,569	817%
	2062	1,952	227	1,019,211	26,490,778	(5,227,763)	21,263,015	2086%	1,467,664	1449%	1,615,449	1316%	2,441,010	871%
	2063	1,740	209	880,976	24,768,771	(5,212,915)	19,555,855	2220%	1,268,605	1542%	1,396,347	1401%	2,109,937	927%
	2064	1,545	192	758,660	23,027,219	(5,092,308)	17,934,911	2364%	1,092,471	1642%	1,202,477	1491%	1,816,992	987%
L	2065+	9,485	1,437	3,987,354	########	(57,760,356)	128,423,059	3221%	5,741,790	2237%	6,319,956	2032%	9,549,713	1345%
	otal Future			453,819,625	########	(5,892,940)	1,239,534,974	273%	########	196%	########	172%	##########	122%

Interest Adjusted Values as of 12/31/18 at 3.98%

Past 278,705,974

Future 284,285,111 5% 71% 0.0% 13,122,154 433,036,295 ######## ######### ######## ########## 3% 278,705,974 96% 613,474,261

NAIC Rate Stability Requirement:
Accumulated value of past incurred claims + present value of future incurred claims:
Accumulated past +present value of original premium x 58% + rate increase premium x 8

Discount Rate Loss Ratio Target Rate increase Loss Ratio Target

	Test	
	446,158,449	
85%:	414,790,559 Pass	

If Knew Increase	58.5%	Make-up Increase	139.5%
	Active	Total	Active/Total
Insureds	21,127	40,665	52.0%

Blended Increase 100.6%

Cost Sharing

Blended increase	Policyholder share of the increase	Rate Increase		
0-15%	100%	15.0%		
15-50%	90%	31.5%		
50-100%	75%	37.5%		
100-150%	65%	0.4%		
>150%	50%	0.0%		
	Total	84.4%		

(1) Accumulated value of past incurred claims	\$13,122,154
(2) Present value of future incurred claims	\$433,036,295
(3) Total incurred claims	\$446,158,449
(4) 58% of original premiums plus	\$326,534,830
(5) 85% of rate increase premium	\$88,255,729
(6) Total premiums	\$414,790,559
Since (3) total incurred claims exceed	Loss Ratio Test Passed

Objection 1

L&H Actuarial Memorandum (Supporting Document)

Comments:

Please advise if the actuarial assumptions associated with the rate increase request are consistent with the assumptions embedded in the most recent asset adequacy testing. If not, either make the appropriate revisions or explain any discrepancies.

Response: The actuarial assumptions associated with the rate increase request are consistent with the assumptions in the most recent asset adequacy testing.

Objection 2

VA Proposed Rates - GLTC04&RGLTC04 - 2019 (Rate)

Comments:

Please complete the top section of the Rate/Rule Schedule to include all information requested.

Response: This request has been completed.

Objection 3

• L&H Actuarial Memorandum (Supporting Document)

Comments:

Please re-state the nationwide experience using Virginia approved rates.

Response: There have been no requested rate increases on this block of business. The earned premium provided in the Exhibit 1 is using current Virginia rates.

Objection 4

• L&H Actuarial Memorandum (Supporting Document)

Comments:

Provide a separate calculation of the Lifetime Loss Ratio so that the historical premium component is restated to what it would be if the proposed premium had been charged (collected) since the forms' introduction.

Response: Please see below table for Loss Ratio's restated to what they would have been if the proposed rate increase had been applied since inception. Please also refer to Exhibit 1.1a-b columns M&N for the rate increase applied since inception.

		Expected Incurred Nationwide Lifetime Loss Ratios								
	Compound Inflation			Simple Inflation						
	Before Premium Increase	After Proposed Premium Increase	Premiums Applied From Inception	Before Premium Increase	After Proposed Premium Increase	Premiums Applied From Inception				
Historical	7%	7%	4%	5%	5%	3%				
Future	192%	111%	102%	152%	112%	106%				
Lifetime	95%	70%	50%	79%	67%	55%				

Objection 5

• L&H Actuarial Memorandum (Supporting Document)

Comments:

Please provide the current national cumulative average increase, and what that average would be if all outstanding rate increase requests were approved for the full amount.

Response: The current Nationwide average increase accounting for states who have approved the rate increase is 16% across all insureds with an average increase on compound inflation of 51% and simple inflation of 33%. The average Nationwide rate increase using all current approved rate increases and with all other states approving the full amount is 25% across all insureds.

Objection 6

• L&H Actuarial Memorandum (Supporting Document)

Comments:

Please provide the current Virginia cumulative average increase, and what that average would be if the current rate increase request were approved for the full amount.

Response: There have been no prior rate increases on these policy forms for Virginia. The average Virginia increase for the full amount is 34% across all insureds. The rate increase request is the same (or equivalent) across all states but the average increase will vary based on the mix of insured by inflation category (no inflation, simple, compound).

Objection 7

• L&H Actuarial Memorandum (Supporting Document)

Comments:

Please provide a loss ratio projection (both past and future) which reflects all the original pricing assumptions for interest, mortality, morbidity, persistency and premium scale, but uses the actual distribution of policies as issued rather than the originally assumed mix of business.

Response: Please see Exhibit 10a-b for the original pricing loss ratio exhibit.

Objection 8

L&H Actuarial Memorandum (Supporting Document)

Comments:

Please state the lifetime loss ratio anticipated in the original filing.

Response: The lifetime loss ratio anticipated in the original filing was 50% using expected sales.

Objection 9

• L&H Actuarial Memorandum (Supporting Document)

Comments:

Is the intent of the company to not request any further rate increases if the proposed rate increase is approved and the experience develops as projected? If not, please explain.

Response: To the best of our knowledge, the premium rate increase requests outlined in the Actuarial Memorandum are necessary to certify that the premium rate schedules are sufficient to cover anticipated cost under moderately adverse experience, if the underlying assumptions are realized and the premium rate schedules are reasonably expected to be sustainable over the life of the policies with no further premium rate schedule increases anticipated. Emerging experience will continue be monitored to assess future rate increase needs.

Objection 10

• L&H Actuarial Memorandum (Supporting Document)

Comments:

What steps have been taken to minimize rate increases on this block of business?

Response: There have been no prior rate increases on these policy forms. Beyond rate increases, there are ongoing activities that include ensuring accurate claims management, fraud prevention, investment strategies, reinsurance and expense management.

Objection 11

• L&H Actuarial Memorandum (Supporting Document)

Comments: Please provide all projections necessary to evaluate the requests based on both the "Exhibit 1e - Voluntary SNC" (or Texas Method) and the "If-Knew/Makeup Blend" approach (or Minnesota Method).

Response: Please see Exhibit 11a-b for the "If-Knew/Makeup Blend" approach with the increase applied from inception. Please see Exhibit 9a-b for the Prospective Present Value Approach.

Rate Increase Supported

Segment	Prospective Present Value	If-Knew/Makeup Blend
Compound	65.2%	126.7%
Simple	53.7%	84.4%

1.Please provide the active life reserve balance on a nationwide basis as of 12/31/2018, separately for the policies with compound inflation and simple inflation.

Response: The Nationwide active life reserves for compound inflation are \$95.6M and for simple inflation are \$144.3M as of 12/31/2018.

2.Please provide the calculation and data which you used in response to Objection 5 of the 2/19/2020 Objection Letter. We were unable to match the nationwide average rate increase values using the data in Exhibit 3.

Response: We've provided an updated Exhibit 3 – Nationwide Filing Status with the most current view of approvals. As well as some additional information with updated averages based on current approvals. Please note that the first section in the table based on "Approved" increases only and their inforce premiums only. This is consistent with what was provided in the previous objection 5. The formulas used in the calculation can be reviewed in the attached undated Exhibit 3.

Current Approvals	Compound Inflation	Simple Inflation	All Policies
Approved+Exempt RI Prem	4,525,030	4,712,052	9,237,081
Approved States Inforce Prem	8,692,040	13,528,655	56,948,480
Avg RI Approved	52.1%	34.8%	16.2%
Current Approvals + Full approval from Remaining	Compound Inflation	Simple Inflation	All Policies
Approved+Exempt RI Prem	14,593,377	12,187,261	26,780,638
Inforce Prem	16,395,425	27,672,223	106,608,242
Avg RI Approved	89.0%	44.0%	25.1%

If we compare the approved rate increases to the inforce premium of all 51 jurisdictions, the results are provided below.

Current Approvals	Compound Inflation	Simple Inflation	All Policies
Approved+Exempt RI Prem	4,525,030	4,712,052	9,237,081
All 51 States Inforce Prem	16,395,425	27,672,223	106,608,242
Avg RI Approved	27.6%	17.0%	8.7%

Objection 1

Applies To:

• L&H Actuarial Memorandum (Supporting Document)

Comments:

The Actuarial memorandum shows that these policies were sold and issued between 2004 and 2012. According to that, the newest policies have been in effect for 8+ years. Please explain why, with all the concern and publicity about long-term care insurance in recent years, it has taken so long to file a rate increase request.

Response: We evaluate expected lifetime loss ratios and potential rate increase needs annually for this block of business. Prior to our 2018 assumption update, rate increases were not supported under the 58/85 loss ratio test or the pre-rate stability 60% loss ratio requirement. In 2017, prior to the 2018 assumption update, the expected aggregate lifetime loss ratio had grown to 58% but would not support any rate increase. Only with the 2018 assumption update, did the aggregate loss ratio increase sufficiently to support premium rate increases.

Objection 2

Applies To:

Comments:

Virginia Regulation 14VAC5-200-125 requires that every insurer shall report to the commission premium rates for all long-term care insurance policies. We could find no record that any annual report had ever been filed for these policy forms (GLTC04 and RGLTC04). Please explain why no annual reports have been filed for these policy forms.

Response: The annual report that was filed in 2020, for calendar year 2019, did include policy forms GLTC04 and RGLTC04. Please see SERFF number UNUM-132428089. It was our understanding that the annual reporting was only required when rate actions were being taken, which we acknowledge was incorrect upon our recent review of Virginia Regulation 14VAC5-200-125. We apologize for not being aware of the requirement that an annual report was required regardless of rate increase activity. Please let us know if we should create annual reports for prior years to bring these policy forms into compliance for prior years.

Objection 3

Applies To:

Comments:

Please state if there are any other blocks that have not had annual reports filed in any year.

Response: The company has been filing annual reports for all other LTC blocks of business.





March 17, 2023

RE: Notice of Long Term Care Premium Rate Increase

ABC Company

Group Long Term Care Policy Number 123456

Dear Certificateholder:

The purpose of this letter is to notify you of an upcoming premium rate increase that may impact your premiums.

You made the prudent financial decision to purchase long term care coverage to give yourself more control over the type of care you may want in the future. Our responsibility is to ensure that the coverage you purchased and planned for is available when you need it.

We take this responsibility very seriously, which is why after careful consideration, we have determined that it is necessary to raise premiums for your coverage. Details regarding your premium increase are outlined below. After reviewing this letter, if you have questions about your increase, please contact our Customer Service Center at 1-800-227-4165 and a service representative can assist you. Representatives are available Monday through Friday from 8:00 am to 8:00 pm EST.

As a guaranteed renewable insurance product, your premiums for long term care insurance will never increase based on changes in your age or health, however, the premiums for an entire class of customers can increase, if necessary, to ensure future claims obligations can be met. A change in premiums on a class basis must be actuarially justified.

The rate increase request was reviewed by the Virginia State Corporation Commission and was found to be compliant with applicable Virginia laws and regulations addressing long-term care insurance. All premium rate filings are available for public inspection and may be accessed online through the State Corporation Commission's webpage

at https://scc.virginia.gov/boi/SERFFInquiry/LtcFilings.aspx

The increase in pricing will vary by inflation coverage, and be incrementally applied over a twoyear period. The timing of the increases will be based on the plan anniversary date of the group policy:

The first incremental increase will be effective on June 1, 2023.

- For coverage that includes Simple inflation, the increase will be approximately 27.5%
- For coverage that includes Compound inflation, the increase will be approximately 26.3%.

The second incremental increase will be effective on June 1, 2024.

- For coverage that includes Simple inflation, the increase will be approximately 27.5%
- For coverage that includes Compound inflation, the increase will be approximately 26.3%.

Since each incremental increase is compounded on the prior year's increase, the total cumulative increase after both incremental increases are applied will be:

- For coverage that includes Simple inflation, approximately 62.6%.
- For coverage that includes Compound inflation, approximately 59.5%.

You are receiving this notification package because our records show that you and/or your spouse have inflation coverage. Your specific premium increase is dependent on the inflation coverage for which you are enrolled. If coverage does not include inflation, no pricing increase will be applied.

To obtain your new premium, you may contact our Customer Service Center at 1-800-227-4165 and a service representative can assist you.

The group policy is a guaranteed renewable policy that renews on each plan anniversary. Therefore, your new long term care premium will take effect on the plan anniversary date of the group policy which is June 1, 2023.

Please note that if you are currently receiving long term care benefits and you are on waiver of premium, this increase will be deferred until your premium payments resume.

Why the increase in premium

It is important that our policies remain priced at an appropriate level to meet our future claims obligations. Premium increases are necessary to support higher claims associated with insureds living longer, filing more claims, and staying on claim longer, which are expected to be higher than initially anticipated and for which the policy was priced. These new premiums will better reflect overall claims rates and other factors related to the pricing of long term care coverage. You have a right to request a copy of your premium rate schedule at any time.

Please be assured that you have not been singled out and this is not a reflection of any previous claims history you may have had, if any. Instead, the premium increase will affect a broad group of certificateholders issued similar coverage under similar group policies. Additional increases may be necessary in the future. Of course, we will notify you at least 75 days prior to any future increase.

Coverage change options

We do not take this action lightly and we recognize that raising premiums may have a significant impact on you. If you wish to keep your exact coverage without any changes, no further action is required on your part and the new premium will automatically take effect on June 1, 2023.

You may also consider reducing your coverage to help manage the impact of the premium increase. Options may include any one or a combination of the following items depending on your specific coverage. Please note that if there are future premium increases, similar options for reducing the increase will be offered at that time. *All options available are not of equal value*:

- a. Decreasing your benefit amount
- b. Decreasing the duration of your benefits
- c. Decreasing your plan choice (such as home care coverage, or inflation)

Any reduction in coverage needs to be within the plan options offered in the group policy. The value associated with any decrease in coverage will depend on your specific coverage, the age that you purchased your coverage, and the plan options available to you in the group long term care policy through which your coverage was issued. Please note that you may request coverage changes at any time, not just at the time of a rate increase.

You can obtain the necessary forms by visiting the informational website created specifically for this group policy, or you can request a paper enrollment kit by contacting the Unum Customer Service Center at 1-800-227-4165.

To review your plan change options, please visit the website specially designed for this group policy:

https://unuminfo.com/abccompany/index.aspx

This site provides an interactive cost calculator that may assist you in modeling out the coverage change options that may be available to you. To decrease your coverage, please complete a Request to Change Coverage form.

Your current coverage

To assist you in evaluating your coverage change options, we have enclosed a statement outlining your inforce coverage and your cost for this coverage before the increase in pricing.

If you would like more information about the cost of long term care specific to your area, please see the following website: https://www.genworth.com/aging-and-you/finances/cost-of-care.html. Cost of care information provided on this website may be useful as you review your current Long Term Care Insurance coverage.

Contingent Benefit Upon Lapse

If you pay the premiums due through the last day before the premium increase is scheduled to go into effect for you, and then stop paying premiums on or within 120 days of the rate increase effective date, then your coverage will automatically be converted to a Contingent Benefit Upon Lapse. This benefit will result in an automatic reduction in your current lifetime maximum benefit, which would be equal to the greater of (i) one Facility Monthly Benefit payment or (ii) the total premium paid into the policy for your coverage (including any employer contributions, if applicable). In no event will your Maximum Benefit Amount exceed the maximum benefits which would be payable if the coverage had remained in a premium paying status.

Important: This Contingent Benefit Upon Lapse would not supersede any other non-forfeiture provision currently included in your policy that would be of equal or greater value to you.

Enhanced Contingent Benefit Upon Lapse for Accelerated Payment Option (APO)

If you are currently enrolled in an APO under this plan (where you chose, at the time of purchase, to pay premiums within a fixed and accelerated time period), you may be eligible for an Enhanced Contingent Benefit Upon Lapse that may be of higher value than what is outlined above. As a result, you will receive a separate packet of information in the next few weeks with specific details pertaining to the Contingent Benefit Upon Lapse that is available to you. (Please check the enclosed statement outlining your coverage to see if you have an APO). If you have an APO, please do not take Contingent Benefit Upon Lapse action until you receive the information packet.

To obtain more information about your options and how they impact your coverage, we recommend that you call our Customer Service Center at 1-800-227-4165 and a service representative can assist you.

We have enclosed additional information about this pricing increase in the Frequently Asked Questions document. Please carefully review all enclosed materials and the premium increase history summary. If you decide to make any changes to your coverage, updated materials reflecting your requested coverage change and your revised premium rate will be provided. You have a right to request a copy of your premium rate and a confirmation of your coverage at any time.

Again, we value your business. Thank you for choosing Unum and for the trust you place in our company.

Sincerely,

Unum Long Term Care Operations

Attachments:

Administrative Statement: Outline of Inforce Coverage Group Long Term Care Premium History Summary Group Long Term Care Frequently Asked Questions





March 18,2024

RE: Notice of Long Term Care Premium Rate Increase

ABC Company

Dear Certificateholder:

You made the prudent financial decision to purchase long term care coverage to give yourself more control over the type of care you may want in the future. Our responsibility is to ensure that the coverage you purchased and planned for is available when you need it.

We take this responsibility very seriously, which is why after careful consideration, we have determined that it is necessary to raise premiums for your coverage. Details regarding your premium increase are outlined below. After reviewing this letter, if you have questions about your increase, please contact our Customer Service Center at 1-800-227-4165 and a service representative can assist you. Representatives are available Monday through Friday from 8:00 am to 8:00 pm EST.

As a guaranteed renewable insurance product, your premiums for long term care insurance will never increase based on changes in your age or health, however, the premiums for an entire class of customers can increase if necessary, to ensure future claims obligations can be met. A change in premiums on a class basis must be actuarially justified.

The rate increase request was reviewed by the Virginia State Corporation Commission and was found to be compliant with applicable Virginia laws and regulations addressing long-term care insurance. All premium rate filings are available for public inspection and may be accessed online through the State Corporation Commission's webpage

at https://scc.virginia.gov/boi/SERFFInguiry/LtcFilings.aspx

The premium increase varied by inflation coverage, and was scheduled to be incrementally applied over a two (2) year period.

The intent of this letter is to inform you that the last of the two scheduled premium increases will be applied on the plan anniversary of June 1, 2024.

- For coverage that includes Simple inflation, the increase will be approximately 27.5%
- For coverage that includes Compound inflation, the increase will be approximately 26.3%.

You are receiving this notification package because our records show that you and/or your spouse have inflation coverage. Your specific premium increase is dependent on the inflation coverage for which you are enrolled. If coverage does not include inflation, no pricing increase will be applied.

To obtain your new premium, you may contact our Customer Service Center at 1-800-227-4165 and a service representative can assist you.

The group policy is a guaranteed renewable policy that renews on each plan anniversary. Therefore, your new long term care premium will take effect on the plan anniversary date of the group policy which is June 1, 2024.

Please note that if you are currently receiving long term care benefits and you are on waiver of premium, this increase will be deferred until your premium payments resume.

Why the increase in premium

It is important that our policies remain priced at an appropriate level to meet our future claims obligations. Premium increases are necessary to support higher claims associated with insureds living longer, filing more claims, and staying on claim longer, which are expected to be higher than initially anticipated and for which the policy was priced. These new premiums will better reflect overall claims rates and other factors related to the pricing of long term care coverage. You have a right to request a copy of your premium rate schedule at any time.

Please be assured that you have not been singled out and this is not a reflection of any previous claims history you may have had, if any. Instead, the premium increase will affect a broad

group of certificateholders issued similar coverage under similar group policies. Additional increases may be necessary in the future. Of course, we will notify you at least 75 days prior to any future increase.

Coverage change options

We do not take this action lightly and we recognize that raising premiums may have a significant impact on you. If you wish to keep your exact coverage without any changes, no further action is required on your part and the new premium will automatically take effect on June 1, 2024.

You may also consider reducing your coverage to help manage the impact of the premium increase. Options may include any one or a combination of the following items depending on your specific coverage. Please note that if there are future premium increases, similar options for reducing the increase will be offered at that time. *All options available are not of equal value*:

- a. Decreasing your benefit amount
- b. Decreasing the duration of your benefits
- c. Decreasing your plan choice (such as home care coverage, or inflation)

Any reduction in coverage needs to be within the plan options offered in the group policy. The value associated with any decrease in coverage will depend on your specific coverage, the age that you purchased your coverage, and the plan options available to you in the group long term care policy through which your coverage was issued. Please note that you may request coverage changes at any time, not just at the time of a rate increase.

You can obtain the necessary forms by visiting the informational website created specifically for this group policy, or you can request a paper enrollment kit by contacting the Unum Customer Service Center at 1-800-227-4165.

To review your plan change options and/or to obtain a long term care enrollment kit, please visit the website specially designed for this group policy:

https://unuminfo.com/abccompany/index.aspx

This site provides an interactive cost calculator that may assist you in modeling out the coverage change options that may be available to you. To decrease your coverage, please complete a Request to Change Coverage form.

Your current coverage

To assist you in evaluating your coverage change options, we have enclosed a statement outlining your inforce coverage and your cost for this coverage before the increase in pricing.

If you would like more information about the cost of long term care specific to your area, please see the following website: https://acl.gov/ltc/costs-and-who-pays/costs-of-care

Cost of care information provided on this website may be useful as you review your current Long Term Care Insurance coverage.

Contingent Benefit Upon Lapse

If you pay the premiums due through the last day before the premium increase is scheduled to go into effect for you, and then stop paying premiums on or within 120 days after that date, then your coverage will automatically be converted to a Contingent Benefit Upon Lapse. This benefit will result in an automatic reduction in your current lifetime maximum benefit, which would be equal to the greater of (i) one Facility Monthly Benefit payment or (ii) the total premium paid into the policy for your coverage (including any employer contributions, if applicable). In no event will your Maximum Benefit Amount exceed the maximum benefits which would be payable if the coverage had remained in a premium paying status.

Important: This Contingent Benefit Upon Lapse would not supersede any other non-forfeiture provision currently included in your policy that would be of equal or greater value to you.

Enhanced Contingent Benefit Upon Lapse for Accelerated Payment Option (APO) If you are currently enrolled in an APO under this plan (where you chose, at the time of purchase, to pay premiums within a fixed and accelerated time period), you may be eligible for an Enhanced Contingent Benefit Upon Lapse that may be of higher value than what is outlined above. As a result, you will receive a separate packet of information in the next few weeks with specific details pertaining to the Contingent Benefit Upon Lapse benefit that is available to you. (Please check the enclosed statement outlining your coverage to see if you have an APO). If you have an APO, please do not take Contingent Benefit Upon Lapse action until you receive the information packet.

To obtain more information about your options and how they impact your coverage, we recommend that you call our Customer Service Center at 1-800-227-4165 and a service representative can assist you.

We have enclosed additional information about this pricing increase in the Frequently Asked Questions document. Please carefully review all enclosed materials and the premium increase history summary. If you decide to make any changes to your coverage, updated materials reflecting your requested coverage change and your revised premium rate will be provided. You have a right to request a copy of your premium rate and a confirmation of your coverage at any time.

Again, we value your business. Thank you for choosing Unum and for the trust you place in our company.

Sincerely,

Unum Long Term Care Operations

Attachments: Administrative Statement Group Long Term Care Premium History Summary Group Long Term Care Frequently Asked Questions

Statement of Variability

Certificateholder Letter Tier 1

- 1. The bracketed [Date Created] will be populated with the date the letter is created.
- 2. [Group Policyholder Name] [Policy Number]

The bracketed fields above will be populated with the Policyholder Name and Policy Number.

- 3. The bracketed [1st Anniversary Date] will be populated with the applicable Anniversary Date of the policy.
- 4. The first bracketed [X%] in the 5th paragraph will populated with the Tier 1 increase percentage that includes simple inflation.
- 5. The second bracketed [X%] in the 5th paragraph will be populated with the Tier 1 increase percentage that includes compound inflation.
- 6. The bracketed [For coverage that includes CPI Benefit, the increase will be approximately x%.] in the 5^{th} paragraph will be populated with the Tier 1 increase percentage that includes CPI benefit.
- 7. The bracketed [2nd Anniversary Date] will be populated with the applicable 2nd Anniversary Date of the policy.
- 8. The first bracketed [X%] in the 6th paragraph will populated with the Tier 2 increase percentage that includes simple inflation.
- 9. The second bracketed [X%] in the 6th paragraph will be populated with the Tier 2 increase percentage that includes compound inflation.
- 10. The bracketed [For coverage that includes CPI Benefit, the increase will be approximately x%.] in the 6th paragraph will be populated with the Tier 2 increase percentage that includes CPI benefit.
- 11. The bracketed [X%] in the 7th paragraph will be populated with the total cumulative increase percentage for simple inflation.
- 12. The bracketed [,] and the bracketed [and] in the 7th paragraph can be included or omitted depending on the type of rate increase.
- 13. The second bracketed [X%] in the 7th paragraph will be populated with the increase percentage for compound inflation.
- 14. The bracketed [, and for CPI benefit, approximately [X%]] in the 7th paragraph will be populated with the increase percentage for the CPI benefit.

- 15. The bracketed [Anniversary Date] will be populated throughout the document with the Policy Anniversary date.
- 16. The bracketed [Employer specific informational website link to be input here in bold] will be populated with the website link.
- 17. Grammar, such as capitalization and punctuation are variable.

Certificateholder Letter Tier 2

- 1. The bracketed [Date Created] will be populated with the date the letter is created.
- 2. [Group Policyholder Name] [Policy Number]

The bracketed fields above will be populated with the Policyholder Name and Policy Number.

- 3. The bracketed [2] in the 4th paragraph will populated with the number of years the in tiered rate request will be applied.
- 4. The first bracketed [x%] in the 4th paragraph will be populated with the increase percentage for simple inflation.
- 5. The second bracketed [x%] in the 4th paragraph will be populated with the increase percentage for compound inflation.
- 6. The bracketed [,] and the bracketed [and] in the 4th paragraph can be included or omitted depending on the type of rate increase.
- 7. The second bracketed [X%] in the 7th paragraph will be populated with the increase percentage for compound inflation.
- 8. The bracketed [, and x% for insured with CPI benefit] in the 4th paragraph will be populated with the increase percentage for the CPI benefit.
- 9. The bracketed [Anniversary Date] will be populated throughout the document with the Policy Anniversary date.
- 10. The bracketed [Employer specific informational website link to be input here in bold] will be populated with the website link.
- 11. Grammar, such as capitalization and punctuation are variable.

04CBUL22G-VA CERTIFICATE AMENDMENT

- 1. The bracketed company address [2211 Congress Street Portland, ME 04122] may be revised to reflect the most current and accurate information.
- 2. The bracketed [January 1, 2019] will be populated with the effective date of the change.
- 3. The bracketed [1st day of January, 2019] will be populated with the date the amendment is issued.

04ECBUL22G-APO-VA CERTIFICATE AMENDMENT

- 1. The bracketed company address [2211 Congress Street Portland, ME 04122] may be revised to reflect the most current and accurate information.
- 2. The bracketed [January 1, 2019] will be populated with the effective date of the change.
- 3. The bracketed [1st day of January, 2019] will be populated with the date the amendment is issued.

GLTC-FAQ-VA

- 1. The bracketed address [2211 Congress Street Portland, ME 04122] will be populated with the appropriate address.
- 2. The bracketed phone number [1-800-227-4165] will be populated with the appropriate phone number.

Objection 1

Applies To:

- Sample Certificate Holder Letters (Supporting Document)
- CHGLTC-T1-VA, Other, Certificate Holder Letter (Form)
- CHGLTC-T2-VA, Other, Certificate Holder Letter (Form)

Comments:

Both policyholder letters and the sample letter seem to imply the requested increase will be implemented over 2 years. There has been no mention of this in any of the rates or actuarial information.

If the company wishes to implement this increase over 2-3 years, please notify the Bureau.

Response: The company has had discussions with the Department with respect to implementing the rate increase over 2 years as outlined below. Please see our response to objection #4 that provides additional documentation that has been updated for a rate increase over 2 years.

Inflation Type	Year 1	Year 2	Cumulative
Compound	28.4%	28.4%	64.9%
Simple	20.0%	20.0%	44.0%

Objection 2

Applies To:

• CHGLTC-T1-VA, Other, Certificate Holder Letter (Form)

Comments:

In the 4th and 5th paragraphs on page 1 of the letter, please explain why the phrases describing the increase for simple inflation and compound inflation blocks would not be variable. As it is, it could give the impression that all policyholders have both simple and compound inflation protection.

Response: For this block of business, a group policyholder can choose to offer both inflation types to their certificateholders. Administratively, our rate increase notification letters are sent to the employee and include information for the employee's coverage and the spouse's coverage. Given that both inflation options can be offered, a spouse could have elected a different inflation option than the employee. Therefore, the letter needs to outline the rate increases for all inflation types.

Objection 3

Applies To:

• CHGLTC-T1-VA, Other, Certificate Holder Letter (Form)

Comments:

Please submit a copy of the Request to Change Coverage Form. If the form has been previously approved by the Virginia Bureau, submit it through Supporting Documentation, and include the SERFF tracking number in which the form was originally submitted.

If the form is a new form, submit it through the Forms Schedule for review and approval.

Response: We have attached the request to change coverage form to the forms tab.

Objection 4

Applies To:

- <u>L&H Actuarial Memorandum (Supporting Document)</u>
- Long Term Care Insurance Rate Request Summary (Supporting Document)
- VA Proposed Rates GLTC04&RGLTC04 2019 (Rate)

Comments:

We have received the revised rates for this filing. In addition to the Rate/Rule Schedule, the Actuarial Memorandum will also need to be updated to reflect the 2-year implementation as well as the loss ratio exhibits.

The LTC Rate Request Summary will need to be revised to show the new increase amounts (don't need to show both increases, just the total). Please use the revised LTC Rate Request Summary attached below.

Response: The items below have been updated to reflect the implementation of the rate increase over 2 years.

1. Rates for current, year 1 (tier1), and year (2) for both simple and compound inflation according to the table below.

Inflation Type	Year 1	Year 2	Cumulative
Compound	28.4%	28.4%	64.9%
Simple	20.0%	20.0%	44.0%

- 2. Actuarial memorandum
- 3. Rate/Rule Schedule
- 4. LTC Rate Request Summary
- 5. Loss ratio exhibits 1a-b and 2a-b



ID#: DOB: SPOUSE DOB:

Monthly Monthly Monthly Lifetime	Maximum - Maximum - Maximum -	Facility Assisted Professio	age Living F nal Home	Effective Facility Care	December 1, \$6,000 \$3,600 \$3,000 \$Unlimited Yes	2011
Monthly Co	st			· • • • • • • • • • • • • • • • • • • •	\$	
Monthly Monthly Monthly Lifetime Non-Forf	Maximum - Maximum - Maximum - Maximum	Facility Assisted Professio	e Living F nal Home	Effective Facility Care	March 1, 203 \$6,000 \$3,600 \$3,000 \$Unlimited Yes Yes	15
Monthly Co	st				\$	
TOTAL COST					\$	
NOTE: The exclusions certificat	amounts sh shown in e.	own are s the Sched	ubject t ule of E	o the limi Benefits ar	itations and nd in your	

If you have any questions concerning this letter, please call our toll-free Customer Service number, 1-800-227-4165

UNUM LIFE INSURANCE COMPANY OF AMERICA, PORTLAND, ME 04122

DATE:

VIRGINIA – 2019 GLTC04 RATE INITIATIVE PHASE I – Objections

Response due: 2/4

Objection 1

Applies To:

- CHGLTC-T1-VA, Other, Certificate Holder Letter (Form)
- CHGLTC-T2-VA, Other, Certificate Holder Letter (Form)

Comments:

At the end of each letter, include a section of "Enclosures". This will be a list of all forms included with the policyholder notification. Any forms that would only be sent to certain policyholders should be noted as variable, with a description of the variability shown in the Statement of Variability.

Response The letters have been updated.

Objection 2

Applies To:

- <u>CHGLTC-T1-VA</u>, Other, Certificate Holder Letter (Form)
- CHGLTC-T2-VA, Other, Certificate Holder Letter (Form)

Comments:

Referring to the [Date Created] on the first page, please verify that a policyholder will have a minimum of 75 days, from the time the letter is received, to make an informed decision about their insurance coverage.

Response: A certificateholder will have a minimum of 75 days from the time their letter is received to make an informed decision about their insurance coverage.

Objection 3

Applies To:

- CHGLTC-T1-VA, Other, Certificate Holder Letter (Form)
- CHGLTC-T2-VA, Other, Certificate Holder Letter (Form)

Comments:

In accordance with Virginia Regulation 14VAC5-200-75, please provide a statement describing the policyholder's options in the event of future rate increases.

Response: The letters have been updated

Objection 4

Applies To:

• CHGLTC-T1-VA, Other, Certificate Holder Letter (Form)

• CHGLTC-T2-VA, Other, Certificate Holder Letter (Form)

Comments:

As mentioned in the section of the letter labeled "Your current coverage" please include a copy of the statement used to show current coverage and cost for this coverage.

Response: We've included a copy of the administrative statement, per your request and it has been attached to the supporting documentation tab. We have redacted the employer's name, and certificateholder PHI. This administrative statement supports billing and customer service. It reflects the inforce cost and coverage issued to the certificateholder under the employer's group policy.

Objection 5

Applies To:

- CHGLTC-T1-VA, Other, Certificate Holder Letter (Form)
- CHGLTC-T2-VA, Other, Certificate Holder Letter (Form)

Comments:

Please verify the website, https://longtermcare.acl.gov/costs-how-to-pay/costs-of-care.html, is correct. We attempted to reach the site and were unable to connect.

Response: The link has been updated in the letters.

Objection 6

Applies To:

- CHGLTC-T1-VA, Other, Certificate Holder Letter (Form)
- CHGLTC-T2-VA, Other, Certificate Holder Letter (Form)

Comments:

In the section of the letter titled "Why the increase in premium", please include a statement in compliance with Virginia Regulation 14VAC5-200-75 A4(b), which gives the policyholder(certificate holder) the right to a revised rate or rate schedule in the event of a premium rate increase.

Response: The letters have been updated.

Objection 7

Applies To:

- CHGLTC-T1-VA, Other, Certificate Holder Letter (Form)
- CHGLTC-T2-VA, Other, Certificate Holder Letter (Form)

Comments:

Virginia Regulation 14VAC5-100-50 2 requires that the full and proper name of the company appear prominently on the form. Please include the full name of the company above the address.

Response: The letters have been updated.

Objection 8

Applies To:

- CHGLTC-T1-VA, Other, Certificate Holder Letter (Form)
- CHGLTC-T2-VA, Other, Certificate Holder Letter (Form)

Comments:

Please specify whether there are any partnership policies in this block of business. If there are such policies, please include a disclosure that some benefit reduction options may result in a loss of partnership status that may reduce policyholder protections.

A disclosure such as this should be emphasized, such as bold, highlight, larger print, etc.

Response: There are no partnership policies for this block of business.

Objection 9

Applies To:

- VA-GLTC04-FAQ, Other, Frequently Asked Questions (Form)
- CHGLTC-T1-VA, Other, Certificate Holder Letter (Form)
- CHGLTC-T2-VA, Other, Certificate Holder Letter (Form)
- AE1181-VA, Other, Group Long Term Care Request to Change Coverage (Form)

Comments:

Although not required, the company may consider bracketing the home office address, phone number, and website to simplify the process if a change is ever made. This would also apply to the company contact number listed in the body of the letter and or any other forms.

Response: The letters have been updated.

Objection 10

Applies To:

- CHGLTC-T1-VA, Other, Certificate Holder Letter (Form)
- CHGLTC-T2-VA, Other, Certificate Holder Letter (Form)

Comments:

Please revise the paragraph on page one of the policyholder letter to more closely match Virginia Regulation 14VAC5-200-75 D4. A more acceptable version might be the following:

"The rate increase request was reviewed by the Virginia State Corporation Commission and was found to be compliant with applicable Virginia laws and regulations addressing long-term care insurance. All premium rate filings are available for public inspection and may be accessed online through the State Corporation Commission's webpage at https://scc.virginia.gov/boi/SERFFInquiry/LtcFilings.aspx

.The rate increase will be incrementally applied..."

Response: The letters have been updated

Objection 11 Applies To:

• CHGLTC-T1-VA, Other, Certificate Holder Letter (Form)

Comments:

Will this letter be sent to policyholders without any type of inflation protection? If not, is the paragraph that starts with "You are receiving this notification package..." a necessary part of the letter?

Response: Yes, it can be sent to certificateholders without any type of inflation protection. Administratively, our rate increase notification letters are sent to the employee and include information for the employee and spouse. It's possible one or the other may have coverage without inflation. The statement is included as additional clarification on what coverages are impacted by the increase.

Objection 12

Applies To:

• CHGLTC-T1-VA, Other, Certificate Holder Letter (Form)

Comments:

We could not find either instance of the variable item, "[For coverage that includes CPI Benefit, the increase will be approximately [x%].]" in the letter. Please explain and make the necessary revisions.

Response: The letters have been updated.

Objection 13

Applies To:

- Statement of Variability (Supporting Document)
- CHGLTC-T1-VA, Other, Certificate Holder Letter (Form)

Comments:

The variability in the sixth paragraph of the letter does not match the description on item 10 in the SOV. Please correct.

Response: The statement of variability has been updated.

Objection 14

Applies To:

- Statement of Variability (Supporting Document)
- <u>CHGLTC-T1-VA</u>, Other, Certificate Holder Letter (Form)

Comments:

The variable item [include info site link here in bold] in the letter does not match the description in the SOV. Please correct.

Response: These items have been updated.

Objection 15

Statement of Variability (Supporting Document)

Comments:

Please explain item number 13 in the SOV section referring to Certificateholder letter Teir 1.

Response: The SOV has been updated.

Objection 16

Applies To:

- CHGLTC-T1-VA, Other, Certificate Holder Letter (Form)
- <u>CHGLTC-T2-VA</u>, Other, Certificate Holder Letter (Form)

Comments:

The Bureau that the 4th paragraph of both letters as well as the 5th and 6th paragraphs of CHGLTC-T1-VA, could be confusing to a certificate holder to receive a letter talking about both Simple and Compound Inflation protection.

We would suggest making each sentence variable, that describes the type of inflation protection. For example: [For coverage that includes Simple inflation...]. this would allow each letter to be more tailored to each individual.

Response: Administratively, our rate increase notification letters are sent to the employee and include information for the employee and spouse. Given that multiple inflation options can be offered, a spouse could have elected a different inflation option than the employee. Therefore, the letter needs to outline the rate increases for all inflation types.

Objection 17

Applies To:

- 04CNF19G-VA, Certificate Amendment, Insert Page, Endorsement or Rider, Certificate Amendment Contingent Non-Forfeiture Benefit (Form)
- <u>04ECNF19G-APO-VA</u>, <u>Certificate Amendment</u>, <u>Insert Page</u>, <u>Endorsement or Rider</u>, <u>Certificate Amendment</u> <u>Enhanced Contingent Non-Forfeiture Benefit</u> (Form)

Comments:

Forms 04CNF19G-VA and 04ECNF19G-APO-VA provide a contingent benefit upon lapse. While the nonforfeiture benefit and the contingent benefit upon lapse provide similar benefits, the contingent

benefit upon lapse is a separate offer from the benefit provided in a nonforfeiture rider. As such, the endorsement should not be referred to or considered the same as a nonforfeiture benefit.

Response: The forms have been updated.



GROUP LONG TERM CARE REQUEST TO CHANGE COVERAGE

Return Form to:

Long Term Care Operations 2211 Congress Street Portland, ME 04122 Fax: 207-541-7606

Use this form to change your voluntary Group Long Term Care (GLTC) insurance coverage amount. If you wish to increase your coverage, you will need to complete a Benefit Election Form and Evidence of Insurability if applicable.

SECTION 1: INSURED INFORMATION SECTION (Complete all fields)
Policy or BL# 1 2 3 4 5 6 7 Div#
Group Policyholder Name: ABC Company
Group Policyholder Address: 123 Main Street, Norfolk VA 12534
Insured Name: John Doe
☐ Check here to report an address change
Insured's Mailing Address45 Blue Street, Norfolk VA 12543
Social Security Number: 5 1 1 - 0 0 - 1 1 1 1
Relationship to Employee (if applicable): Employee Name:
Email Address: DoeJohn@mailbox.com Daytime Telephone Number 757-555-1122
SECTION 2: CHANGE IN COVERAGE SECTION (Complete all applicable fields, sign and date the form) Refer to your certificate of insurance or enrollment kit for coverage options and rates available to you under the group policy.
CANCEL coverage, complete the following (check all that apply): □ Cancel all Group Long Term Care Coverage □ Cancel Spouse Group Long Term Care Coverage - Spouse may continue coverage by completing form 7712-04 (Elect to Continue Group Long Term Care Insurance). DECREASE coverage complete the following (check all that apply): □ Decrease my benefit amount to: □ Decrease my benefit duration to: □ Decrease my plan design to: □ Decrease my coverage to the employer funded plan, if any. EXERCISE Non-Forfeiture Option: □ I wish to exercise the non-forfeiture option in my plan. Please select the appropriate non-forfeiture option below: □ Shorten Benefit Period □ Reduced Paid Up □ Contingent, if applicable TERMINATE your Inflation provision, complete the following: □ I wish to terminate the Inflation provision included in my coverage. Once terminated, I understand that my coverage will no longer receive automatic inflation credits. (Note: Terminating the inflation provision is an option that is only available to you if the group policy through which your coverage was issued offers a coverage option that does not include the Inflation provision.) CHANGE your billing mode, complete the following: □ Annual premium □ Semi-annual premium □ Quarterly premium □ Monthly automated checking account withdrawal (UNUM ACH election form must be attached - Form #7713-04.)
Insured Signature:John Doe Date:June 6,2022
The effective date of this change will be based on your signature date and/or the terms of your policy.
Retain a copy of this form for your records. Return completed form to the address reflected at the top of the form. Please contact Unum's Customer Service Center @ 1-800-227-4165 if you have any questions. Unum is a registered trademark and marketing brand of Unum Goup and its insuring subsidiaries. Group long term care

insurance is underwritten by Unum Life Insurance Company of America. In New York: underwritten by First Unum Life Insurance



Unum Life Insurance Company of America 2211 Congress Street Portland, ME 04122

CERTIFICATE AMENDMENT (Amendments may be made only by the Company at its Home Office.)

Contingent Benefit Upon Lapse

Since your premium rates have been increased by us, and you have elected not to continue paying premiums, your coverage under this Certificate will continue automatically with the same level of benefits, except for a reduction in your Maximum Benefit Amount. Your Maximum Benefit Amount under this provision will be equal to the total premium paid up to the date you stopped paying premiums.

In no event will your Maximum Benefit Amount:

- be less than one (1) Nursing Facility Monthly Benefit payment; or
- exceed that which would have been paid had you not stopped paying premiums.

If your coverage includes Inflation Protection, no Inflation Protection increases will be made after the end of the period for which premiums were last remitted to us for your coverage under this Certificate.

The effective date of this change is December 1, 2023.

The Certificate's terms and provisions will apply other than as stated in this amendment.

Dated at Portland, Maine this 1st day of December, 2023.

Unum Life Insurance Company of America

By: / ////////
Secretary



Unum Life Insurance Company of America 2211 Congress Street Portland, ME 04122

CERTIFICATE AMENDMENT (Amendments may be made only by the Company at its Home Office.)

Enhanced Contingent Benefit Upon Lapse

Since your premium rates have been increased by us, and you have elected not to continue paying premiums, your coverage under this Certificate will continue automatically except that each benefit amount, including your Lifetime Maximum Benefit amount, will be reduced according to the calculation described below:

The reduction in each benefit is determined by multiplying each benefit amount in effect immediately prior to the effective date of this Amendment by (0.90), then multiplying the resulting amount by the ratio of the number of completed months of paid premiums divided by the total number of months in your Accelerated Payment Option period.

In no event will your Lifetime Maximum Benefit:

- be less than one (1) Nursing Facility Monthly Benefit payment; or
- exceed that which would have been paid had you not stopped paying premiums.

If your coverage includes Inflation Protection, no Inflation Protection increases will be made after the end of the period for which premiums were last remitted to us for your coverage under this Certificate.

The effective date of this change is December 1, 2023.

The Certificate's terms and provisions will apply other than as stated in this amendment.

Dated at Portland, Maine this 1st day of December, 2023.

Unum Life Insurance Company of America



ID#: DOB: SPOUSE DOB:

Monthly Monthly Monthly Lifetime	Maximum - Maximum - Maximum -	Facility Assisted Professio	age Living F nal Home	Effective Facility Care	December 1, \$6,000 \$3,600 \$3,000 \$Unlimited Yes	2011
Monthly Co	st			· • • • • • • • • • • • • • • • • • • •	\$	
Monthly Monthly Monthly Lifetime Non-Forf	Maximum - Maximum - Maximum - Maximum	Facility Assisted Professio	e Living F nal Home	Effective Facility Care	March 1, 203 \$6,000 \$3,600 \$3,000 \$Unlimited Yes Yes	15
Monthly Co	st				\$	
TOTAL COST					\$	
NOTE: The exclusions certificat	amounts sh shown in e.	own are s the Sched	ubject t ule of E	o the limi Benefits ar	itations and nd in your	

If you have any questions concerning this letter, please call our toll-free Customer Service number, 1-800-227-4165

UNUM LIFE INSURANCE COMPANY OF AMERICA, PORTLAND, ME 04122

DATE: