Rate Filing Decision
January 14, 2016
MetLife Insurance Company USA

Policy form number: H-LTC3J-20, H-5AI, H-COLR, H-NF3, H-IBOR
SERFF #:MILL-129997453
Number of policyholders: 11
Requested rate change: 43.8%
Approved rate change: 0% (disapproved)

The Oregon Department of Consumer and Business Services, Insurance Division has analyzed the rate filing and disapproved a rate increase on these policies. The division considers many pieces of information (called "factors") when reviewing a rate request, including whether the increase is supported by accurate data and actuarial analysis.

The current policies in place are not generating sufficient premium to pay future claims to policyholders. This is a common problem for a number of insurers nationwide because policyholders are keeping their policies longer than expected and are living longer than projected. This uses more benefits than the company anticipated when the policies were originally sold. Additionally, the cost of providing long-term care is increasing at a rate much higher than anticipated.

In making this decision, the division considered the amount of benefits to be paid versus projected profit to the company. In addition, the company projected "mortality" (how long a policyholder is expected to live) and "lapse" (how likely policyholders will cancel their policy). Finally, the company made projections regarding interest earnings which are intended to help pay benefits. After careful actuarially review, DCBS disapproved the company's request for a 43.8% increase on its long term care plans. In its filing, the company failed to include several key pieces resulting in the division being unable to deem this filing complete and therefore having to disapprove it.

The division also considered the financial impact this rate increase would pose to consumers. The division considered how long policyholders have had their policies, past rate increases policyholders have faced, the availability and type of options to limit the rate increase by reducing benefits, and how the company has responded to changes in Oregon rules to alleviate the burden on policyholders.

This Rate Filing Decision Summary is a tool to help explain the rate filing and does not describe all the factors considered as part of the division's rate review.

Before a company can begin selling or increase a rate on long-term care policies, it must receive the division's approval of the rates it plans to charge. Oregon law requires that the rate the division approves must be adequate to cover projected costs, not too large as to provide excessive profit for the company, fairly applied to policyholders, and reasonable in relation to the benefits provided under the policy. In that light, the division reviews multiple factors related to proposed rate changes, including the company's revenues, actual and projected profits, and past rate changes, as well as the affect the change will have on Oregon consumers. An insurer cannot increase your rates more than once in a 12-month period.