

Legislative History for Connecticut Act

PA 14-8

SB9

| | | |
|-----------|---|-----------|
| House | 2882-2887 | 6 |
| Senate | 773-775, 871-873 | 6 |
| Insurance | 52-53, 108, 137-139, 161, <u>162, 165, 166</u> | 10 |
| | | 22 |

H - 1189

**CONNECTICUT
GENERAL ASSEMBLY
HOUSE**

**PROCEEDINGS
2014**

**VOL.57
PART 9
2693 - 3043**

DEPUTY SPEAKER MILLER:

Have all members voted? Have all members voted?
Will the members please check the board to determine
if your vote is properly cast?

If all members have voted, the machine will be
locked and the Clerk will take a tally.

Will the Clerk please announce the tally.

THE CLERK:

House Bill 5453 as amended by House "A."

| | |
|-----------------------------|-----|
| Total number voting | 147 |
| Necessary for passage | 74 |
| Those voting Yea | 147 |
| Those voting Nay | 0 |
| Those absent and not voting | 4 |

DEPUTY SPEAKER MILLER:

The bill as amended is passed.

Will the Clerk please call Calendar Number 409.

THE CLERK:

Yes, Madam Speaker, on page 24, House Calendar
409, favorable report of the joint standing committee
on Insurance and Real Estate, Senate Bill Number 9, AN
ACT REQUIRING CERTAIN DISCLOSURES FOR LONG-TERM CARE
INSURANCE POLICIES.

DEPUTY SPEAKER MILLER:

Representative Megna.

REP. MEGNA (97th):

Thank you, Madam Speaker.

Madam Speaker, I move the committee's joint favorable report and passage of the bill.

DEPUTY SPEAKER MILLER:

The question before the chamber is on acceptance of the joint committee's favorable report and passage of the bill. Is this in concurrence with the Senate, sir?

REP. MEGNA (97th):

In concurrence with the Senate, Madam.

DEPUTY SPEAKER MILLER:

And passage of the bill in concurrence with the Senate.

Representative Megna, you have the floor.

REP. MEGNA (97th):

Thank you, Madam Speaker. And I apologize.

Madam Speaker, one of the greatest issues that had come in front of our committee for the last several years is long-term care policy premium increases that people were seeing after having these policies for so many years. Some of them are 40, 60 percent increases. This bill in front of us seeks to

help that a little bit. This came out of our committee unanimous and I believe came down from the Senate unanimously.

Madam Clerk -- Madam Speaker, the Clerk is in possession of a strike-all amendment, LCO 3509. I would ask that it be called and I be permitted to summarize.

DEPUTY SPEAKER MILLER:

Will the Clerk please call LCO 3509, which is previously Senate Amendment Schedule "A."

THE CLERK:

Senate "A," LCO 3509, as introduced by Representative Crisco and Kelly.

DEPUTY SPEAKER MILLER:

The Representative seeks leave of the chamber to summarize the amendment. Is there objection to summarization? Is there objection?

Hearing none, Representative Megna, you may proceed with summarization, sir.

REP. MEGNA (97th):

Thank you, Madam Speaker.

Madam Speaker, the amendment which essentially becomes the bill just provides that the insurance companies on individual and group policies have to

provide certain disclosures to the policy holders and the individuals and those disclosures are about rate increases, potential future rate increases so on, important information that they should know at the time that they purchase these policies and helping them to realize that this particular type of policy because it's -- the premium is being paid over so many years has the risk of increasing as people age and things change. One of the biggest concerns with that -- that marketplace was that long-term care was becoming more expensive over the last ten or 15 or 20 years, expenses that really weren't anticipated when some of these policies -- groups of policies were initially put together and sold to the public. And this helps them -- these disclosures will help to educate individuals purchasing these policies. With that, I would move adoption of the amendment, Madam Speaker.

DEPUTY SPEAKER MILLER:

The question before the chamber is on adoption of Senate Amendment Schedule "A." Will you remark on the amendment? Will you remark on the amendment?

Representative Sampson.

REP. SAMPSON (80th):

Thank you, Madam Speaker.

I rise just briefly to agree and concur with the good chairman of the Insurance Committee that this particular bill is a good consumer protection bill. It is going to provide for additional disclosures for folks that have long-term care insurance policies. It has gone through the Insurance and Real Estate Committee, as well as the Senate unanimously. It has no fiscal impact and I urge my colleagues to support the amendment, which will become the bill and then the bill itself. Thank you, Madam Speaker.

DEPUTY SPEAKER MILLER:

Thank you, sir.

Will you remark further? Will you remark further on the amendment before us?

If not, let me try your minds. All those in favor, please signify by saying aye.

REPRESENTATIVES:

Aye.

DEPUTY SPEAKER MILLER:

All those opposed, nay.

The ayes have it and the amendment is adopted.

Will you remark further on the bill as amended?

Will you remark further on the bill as amended?

If not, will staff and guests please come to the well of the House. Would the members please take your seats. The machine will be opened.

THE CLERK:

The House of Representatives is voting by roll.

The House of Representatives is voting by roll. Will members please return to the chamber immediately.

DEPUTY SPEAKER MILLER:

Have all members voted? Have all members voted? Will the members please check the board to determine if your vote is properly cast?

If all members have voted, the machine will be locked and the Clerk will take a tally.

Will the Clerk please announce the tally.

THE CLERK:

Senate Bill 9 as amended by Senate "A."

Total number voting 144

Necessary for passage 73

Those voting Yea 144

Those voting Nay 0

Those absent and not voting 7

DEPUTY SPEAKER MILLER:

The bill as amended is passed in concurrence with the Senate.

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**CONNECTICUT
GENERAL ASSEMBLY
SENATE**

**PROCEEDINGS
2014**

**VOL. 57
PART 3
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mhr/gbr
SENATE

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April 17, 2014

Thank you, Senator.

Mr. Clerk, would your return to the call of the Calendar, please.

THE CLERK:

On page 6, Calendar 42, Senate Bill Number 9, AN ACT REQUIRING CERTAIN DISCLOSURES FOR LONG-TERM CARE INSURANCE POLICIES; Favorable Report of the Committee on Insurance and Real Estate.

THE CHAIR:

Senator Crisco.

SENATOR CRISCO:

I thank you, Mr. President.

Mr. President, I move for acceptance of the joint committee's Favorable Report and passage of the bill.

THE CHAIR:

The question is on acceptance and passage. Will you remark further?

SENATOR CRISCO:

Yes, Mr. President. I believe the Clerk has an amendment, 3509. I ask that it be called, the readings be -- be waived, and I would like to yield to Senator Kelly.

THE CHAIR:

Mr. Clerk.

THE CLERK:

LCO Number 3509, Senate Amendment Schedule "A," offered by Senators Crisco and Kelly.

THE CHAIR:

mhr/gbr
SENATE

April 17, 2014

Senator Welch -- Senator Kelly -- excuse me. Sorry, Senator.

SENATOR KELLY:

It's quite all right, Mr. President. Thank you, very much.

I rise in support of the amendment. What this does is the amendment requires disclosure in long-term care policies of any premium increase, and what this amendment does is it attempts to conform the bill to the NII -- NAIC model language.

THE CHAIR:

Thank you, Senator.

Will you remark further?

If not, the question is on adoption. We'll try your minds.

All those in favor, indicate by saying Aye.

SENATORS:

Aye.

THE CHAIR:

Opposed, Nay. The motion passes.

Senator Crisco.

SENATOR CRISCO:

Thank you, Mr. President.

This is an issue that has long, far-reaching implications in regards to our aging population, based on actuarial tables that were used some time ago, before long-term care really became as greatly needed as today. It really helps provide the preservation of those policies that people have contributed so much to; it means so much to them as they become active, you know, later on in their senior year.

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SENATE

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April 17, 2014

And if there's no objection, I'll ask that it be placed on a Consent Calendar.

THE CHAIR:

Is there any objection to this being placed on the Consent Calendar?

Seeing no objection, the Clerk will place this on a, on a, and revised in a second Consent Calendar.

Thank you, Senator.

Mr. Clerk, would you return to the call of the Calendar, please.

THE CLERK:

On page 7, Calendar 44, Substitute for Senate Bill Number 11, AN ACT CONCERNING THE DUTIES OF THE CONNECTICUT HEALTH INSURANCE EXCHANGE; Favorable Report of the Committee on Insurance and Real Estate, and there are amendments.

THE CHAIR:

Senator Crisco.

SENATOR CRISCO:

Mr. President, may I request we withdraw that, that the, that this be marked PT?

THE CHAIR:

Seeing no objection, mark this PT.

Mr. Clerk.

THE CLERK:

Also on page Number 7, Calendar 65, Senate Bill Number 197, AN ACT DECREASING THE TIME FRAMES FOR URGENT CARE ADVERSE DETERMINATION REVIEW REQUESTS; Favorable Report of the Committee on Insurance and Real Estate.

mhr/gbr
SENATE

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April 17, 2014

Seeing no objection, so ordered, sir.

SENATOR LOONEY:

And would ask that that bill be immediately referred.

THE CHAIR:

Seeing -- so ordered, sir.

SENATOR LOONEY:

Thank you, Madam President.

And Madam President, before voting, asking the Clerk to call the items on the Consent Calendar, there was one item to be removed from the Consent Calendar, to be voted on separately. And that is Calendar page 8, Calendar 78, Senate Bill 186. If we might remove that item from the Consent Calendar and --

THE CHAIR:

So ordered.

SENATOR LOONEY:

Yes. And if we would, we'll vote on that item separately.

And would now ask the Clerk to call the items on the Consent Calendar, so we might move to a vote on that second Consent Calendar.

THE CHAIR:

Mr. Clerk.

THE CLERK:

On the second Consent Calendar for today, on page 6, Calendar 42, Senate Bill Number 9.

On page 7, Calendar 65, Senate Bill 197.

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SENATE

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April 17, 2014

Page 8, Calendar 74, Senate Bill Number 95; also on page 8, Calendar 80, Senate Bill 188.

On Calendar page 9 -- I'm sorry -- on page, yeah, page 9, Calendar 110, Senate Bill 125; Calendar 112, Senate Bill 255; Calendar 113, Senate Bill Number 256; Calendar 122, Senate Bill 260.

On page 11, Calendar 163, Senate Bill 280; Calendar 177, Senate Bill 271.

On page 13, Calendar 207, Senate Bill Number 193.

On page 14, Calendar 225, Senate Bill Number 281.

On page 15, Calendar 244, Senate Bill 283.

Page 17, Calendar 255, Senate Bill 477.

On page 23, Calendar 288, Senate Bill 413; Calendar 290, Senate Bill 418.

And on page 25, Calendar 303, Senate Bill Number 217.

THE CHAIR:

I'm sorry. At this time, Mr. Clerk, will you call for a roll call vote, and the machine will be open on the second Consent Calendar.

THE CLERK:

Immediate roll call has been ordered in the Senate on the second Consent Calendar of the day. Immediate roll call has been ordered in the Senate.

THE CHAIR:

If all members voted, all members voted, the machine will be closed.

Mr. Clerk, will you please call the tally.

THE CLERK:

On the second Consent Calendar for today.

mhr/gbr
SENATE

142
April 17, 2014

| | |
|---------------------|----|
| Total Number Voting | 35 |
| Those voting Yea | 35 |
| Those voting Nay | 0 |
| Absent, not voting | 1 |

THE CHAIR:

The Consent Calendar passes.

Mr. Clerk -- oh, I'm sorry -- Senator Looney.

SENATOR LOONEY:

Thank you, Madam President.

Madam President, if we might go back to the item that was removed from Consent and ask for a roll call vote on that item. That was Calendar page 8, Calendar 78, Senate Bill 186.

THE CHAIR:

Mr. Clerk, will you call for a roll call vote, and the machine will be open.

THE CLERK:

Immediate roll call has been ordered in the Senate.
Immediate roll call has been ordered in the Senate.
Immediate roll call ordered in the Senate. An
immediate roll call has been ordered in the Senate.

THE CHAIR:

Have all members voted; all members voted? The machine will be closed.

Mr. Clerk, will you please call the tally.

THE CLERK:

Senate Bill Number 186.

| | |
|---------------------|----|
| Total Number Voting | 33 |
| Those voting Yea | 23 |
| Those voting Nay | 10 |
| Absent, not voting | 3 |

**JOINT
STANDING
COMMITTEE
HEARINGS**

**INSURANCE AND
REAL ESTATE
PART 1
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regulations concerning policy illustrations and those regulations require that the policy clearly disclose the rates, charges, and credit interests can and do change. This will force insurers to incur unnecessary administrative costs due to the resulting filing system update and implementation requirements.

We would respectfully request the Committee take no action on Senate Bill 6. Thank you.

SENATOR CRISCO: Thank you, sir.

Are there any questions? Any questions?

Thank you very much.

BOB KEHMNA: Thank you.

SENATOR CRISCO: Proceeding to Senate Bill Number 9, An Act Requiring Certain Disclosures For Long-term Care Insurance Policies.

Susan? Are you here, Susan?

SUSAN GIACALONE: Good afternoon, Senator Crisco, Representative Megna, and members of the Insurance and Real Estate Committee. For the record, my name is Susan Giacalone and I'm here on behalf of the Insurance Association of Connecticut. I am here to speak on Senate Bill Number 9, An Act Requiring Certain Disclosures -- darn, my time's up.

SENATOR CRISCO: Next, please.

SUSAN GIACALONE: I think I'm next.

This is a bill you had last year incorporating Section 9 of the NAIC, National Association of Insurance Commissioners, model dealing with

certain disclosures. It was actually amended from last year's version to better conform to the model provisions. However, there were some deviations in the redraft that do make some significant changes to the model. We would like to work with the Committee to get it back to more conforming with the model and please see that that juncture -- it's been adopted, I think, in 30 or 40 other states, pretty uniform, and consistent with the model.

SENATOR CRISCO: Thank you.

Questions? Senator Kelly? No questions?

Thank you very much, Susan. We'll call you shortly.

Mr. Quigley?

BRIAN QUIGLEY: Thank you again, Chairman Crisco, and I'll be very brief. I'm Brian Quigley. I'm the Regional Director for America's Health Insurance Plans and I would just echo Susan's comments, that we appreciate the movement of this bill in the direction of the model, but there are still some changes that need to be made. And we'd be happy to work with the Committee and other interested parties to make this better conform with the NAIC model Section 9.

Be happy to answer any questions.

SENATOR CRISCO: Thank you, sir.

Are there any questions for Mr. Quigley? No?

Thank you very much.

Proceeding to Bill Number 12, An Act

have -- then when we revert back to the public hearing with one other bill, 5024.

SENATOR LOONEY: Good afternoon, Senator Crisco, Representative Megna, and all distinguished members of the Insurance and Real Estate Committee. I'm Martin Looney, represent the 11th District in the Senate and Majority Leader in the Senate, and I'm here to testify in support of several bills on your Committee's public hearing Agenda today, the first of which is Senate Bill 11, An Act Concerning the Duties of the Connecticut Health Insurance Exchange; also Senate Bill 15, An Act Concerning the Connecticut Health Insurance Exchange Board of Directors; Senate Bill 6, An Act Concerning Disclosures to Universal Life Insurance Policies; Senate Bill 9, An Act Requiring Certain Disclosures For Long-term Care Insurance Policies; and Senate Bill 13, An Act Requiring Public Comment for Certain Long-term Care Insurance Policy Rate Increase Requests.

First of all, Senate Bill 11 would allow the Health Insurance Exchange to negotiate prices with the insurance carriers that sell products on access Connecticut -- Access Health Connecticut. I believe this legislation could lead to lower prices for consumers in our state over time. And under this bill, the Department of Insurance would retain its current authority to approve or to reject the insurers' rates. This approval or rejection is currently done by assessing whether or not the rates are actuarially sound. The Department does not then negotiate rates with the insurers. Allowing the exchange to negotiate rates -- negotiate prices while requiring the Insurance Department to reject rates that are not actuarially sound would protect both consumers and insurers, and this legislation would create



Testimony of the American Council of Life Insurers
Before the Committee on Insurance and Real Estate
Tuesday, February 18, 2014

Senate Bill 9 - An Act Regarding Certain Disclosures for Long-Term Care Policies

Senator Crisco, Representative Megna, and members of the Committee on Insurance and Real Estate, the American Council of Life Insurers (ACLI) appreciates the opportunity to offer the following comments in provisional support of **Senate Bill 9 - An Act Regarding Certain Disclosures for Long-Term Care Policies**.

The legislation would provide certain disclosures to long-term care policy holders at the time of solicitation, or at the time of application, regarding the potential for future rate increases. The disclosures would also describe policy holder options in the event of a rate increase. ACLI member companies offering long-term care insurance support consumer disclosure as outlined below.

The ACLI supports the adoption of the National Association of Insurance Commissioners' (NAIC) Long-term Care Model Regulation which the proposed legislation largely follows. However, we would ask the committee to amend the bill to more precisely follow the Model. Missing from the proposal are a number of provisions regarding certain exclusions, including blocks of business acquired from another insurer.

We are working closely with the Insurance Association of Connecticut on this issue and support their efforts.

Thank you again for raising the legislation and for your consideration of our position. Please contact John Larkin at (860) 508-9924 or Kate Kiernan at (202) 624-2463 with any questions.

Insurance Association of Connecticut
Insurance and Real Estate Committee

February 18th, 2014

SB 9, An Act Requiring Certain Disclosures
For Long-Term Care Policies

The Insurance Association of Connecticut, IAC, supports adoption of Section 9 of the National Association of Insurance Commissioners, NAIC, model regulation regarding disclosures required of rating practices for Long Term Care (LTC) insurance policies which SB 9, An Act Requiring Certain Disclosures For Long-Term Care Policies, attempts to embody.

Over 40 states have adopted Section 9 of the model, without deviations, and it has proven to provide important consumer benefits. Conformity with the model is critical. Conformity permits a uniform application of the model's provisions and avoids consumer confusion. However, SB 9, as drafted, contains numerous deviations unnecessarily altering model provisions and making implementation problematic.

SB 9, as drafted, drops critical terms, like "blocks of", changing the nature of the provision. SB 9 creates terms like "rights of policyholder" that are not found in the model nor defined which create unknown obligations and result in confusion. SB 9 unnecessarily changes optional provisions and makes them mandatory, like requiring an insurer to provide more explanatory information. SB 9 also drops a few key exemptions contained in the model that are critical for implementation. For example, SB 9 omits the provision that exempts certain non-cancellable or paid up policies.

Finally, SB 9 deviates greatly from the model in how group long-term care products are impacted. The model specifically states that the disclosures required under the model are not required in certain circumstances when the employer is the payor of the premiums. SB 9 does not include such key provisions. Furthermore, SB 9 simply inserts the language applicable to the individual long-term care product into the group product statutory section. There are many distinctions between the individual and group products that must be better addressed. As drafted, SB 9 is unworkable as it applies to group products.

The IAC would welcome the opportunity to work with the Insurance and Real Estate Committee to amend SB 9 so that it better conforms to the provisions found in the NAIC model.

Connecticut S.B. 9 – An Act Requiring Certain Disclosures for Long Term Care Policies.

Statement of
America's Health Insurance Plans
601 Pennsylvania Avenue, NW
South Building, Suite 500
Washington, DC 20004

Connecticut Insurance and Real Estate Committee Public Hearing
February 18, 2014

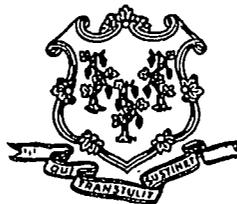
Chairmen Crisco and Megna and members of the Insurance and Real Estate Committee, America's Health Insurance Plans (AHIP) appreciates this opportunity to present testimony on Senate Bill 9, "An Act Requiring Certain Disclosures for Long-Term Care Policies." AHIP is the national association representing approximately 1,300 health insurance plans that provide coverage to more than 200 million Americans. Our members offer a broad range of insurance products, including private long-term care insurance coverage, to help consumers cover the costs of their long-term care.

AHIP and our member insurers writing long-term care insurance appreciate and share the Committee's interest in ensuring that consumers are aware of the potential for premium increases on long-term care insurance policies. However, we believe a better alternative is for the Committee to amend the bill to adopt the NAIC's Long-Term Care Insurance Model Regulation's Section 9 which requires carriers to provide consumers at initial solicitation and application with the NAIC Model's rate increase consumer disclosure form. This disclosure form forewarns the consumer that the policy may be subject to rate increases in the future, and provides an explanation of potential future premium rate revisions and the insured's options in the event of such a rate revision.

AHIP would welcome the opportunity to work with the Committee to develop amendment language to fully incorporate the NAIC Model language into Senate Bill 9.

SENATOR MARTIN M. LOONEY
MAJORITY LEADER

Eleventh District
New Haven, Hamden & North Haven



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February 18, 2014

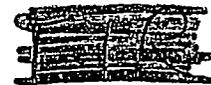
Good afternoon Senator Crisco, Representative Megna and members of the Insurance and Real Estate Committee. I am here to testify in support of S.B. 11 AN ACT CONCERNING THE DUTIES OF THE CONNECTICUT HEALTH INSURANCE EXCHANGE, S.B. 15 AN ACT CONCERNING THE CONNECTICUT HEALTH INSURANCE EXCHANGE BOARD OF DIRECTORS, S.B. 6 AN ACT CONCERNING DISCLOSURES FOR UNIVERSAL LIFE INSURANCE POLICIES, S.B. 9 AN ACT REQUIRING CERTAIN DISCLOSURES FOR LONG-TERM CARE INSURANCE POLICIES, and S.B. 13 AN ACT REQUIRING PUBLIC COMMENT FOR CERTAIN LONG-TERM CARE INSURANCE POLICY RATE INCREASE REQUESTS.

SB 11 would allow the Health Insurance Exchange to negotiate prices with the insurance carriers that sell products on Access Health CT. I believe that this legislation could lead to lower prices for consumers in our state. Under this bill, the Department of Insurance would retain its current authority to approve or reject the insurers' rates. This approval or rejection is currently done by assessing whether or not the rates are actuarially sound; the department does not then negotiate rates with the insurers. Allowing the Exchange to negotiate prices while requiring the

Insurance Department to reject rates that are not actuarially sound would protect both consumers and insurers. This legislation would create sound public policy in the public interest.

SB 6 would require insurers to include a disclosure for universal life insurance policies about the possibility of future increases in the cost of insurance payments. SB 9 would require that a full and fair written disclosure for Long Term Care policies of the benefits and limitations of the policy (including possible rate increases) be given to the consumer. These two bills would offer much needed protection for consumers of these products. In addition, SB 13 would provide a comment period for Long Term Care policies that is similar to that already offered for health insurance policies. Disclosure and the opportunity for public comment are important methods of empowering consumers.

Thank you for raising these important bills to protect Connecticut's citizens.



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alzheimer's association®

the compassion to care, the leadership to conquer

Insurance and Real Estate Committee
Public Hearing
Tuesday, February 18, 2014

SB 9
SB 13

Written Testimony of Laurie Julian, Director of Public Policy, Alzheimer's Association, CT Chapter (The Association).

Senator Crisco, Representative Menga and distinguished members of the Committee on Insurance and Real Estate, on behalf of the Alzheimer's Association, CT Chapter, thank you for allowing me to submit testimony on several bills that are before you today.

The Alzheimer's Association is a donor supported, non-profit organization serving the needs of families, health care professionals and those individuals who are affected with Alzheimer's disease and related dementias. The Association provides information and resources, support groups, education and training, and a 24 hour, 7 day a week Helpline.

The Chapter submits comment on the following bills:

S.B. 12 (Raised) An Act Establishing a Tax Credit for Long-Term Care Insurance Premium Payments

The need for assistance with daily living increases with age. Alzheimer's patients and individuals with dementia are high users of health and long-term care and as the disease progresses 24/7 care is required. In fact, Alzheimer's disease is the most expensive malady. Dementia care costs are significant and are often a burden to families providing unpaid care. Caring for people with Alzheimer's disease also strains health care and long-term care systems. As the number grows, which is projected to escalate rapidly in the next two decades, the disease will place a major strain on these systems as well as on Medicare and Medicaid, major funders of this care.

Few individuals with Alzheimer's disease and other dementias have sufficient long-term care insurance or can afford to pay out-of-pocket for long-term care services as long as the services are needed. One of the biggest challenges for people living with Alzheimer's disease and their caregivers is the financial burden of care. People living with Alzheimer's disease often rely heavily on government programs such as Medicare and Medicaid to mitigate these costs. Unfortunately, too often Medicare and Medicaid are inadequate, and

the overwhelming costs of this disease exceed available personal funds, leaving families affected by Alzheimer's in the difficult position of struggling to balance care for their loved ones without impoverishing themselves.

Private health and long-term care insurance policies funded only about 7 percent of total long-term care spending in 2009. The private long-term care insurance market has decreased substantially since 2010, with major insurance carriers exiting the market or substantially increasing premiums, making policies unaffordable for many individuals.

Allowing a tax deduction for premiums on a long-term care policy may provide an incentive to purchase long term care insurance which is often cost prohibitive and an unaffordable option. Since the repeal of the CLASS provision of the Affordable Care Act, which would of provided a voluntary incentive for the purchase of long-term care insurance, other options should be available to encourage saving for assistance with daily living supports to remain in the community and diminish the reliance on state funding of long-term care.

This is in accord with the recent Task Force on Alzheimer's disease and Dementia recommendation to amend the state tax code to provide a deduction or credit for tax filers for the premiums paid for a private long-term care insurance policy.
<http://www.cga.ct.gov/coa/pdfs/AlzheimersTF/AlzheimersTaskForceFINALREPORT.pdf>

The Association also supports ***S.B. 9, An Act Requiring Certain Disclosures for Long-Term Care Insurance Policies and S.B. 13 an Act Requiring Public Comment for Certain Long-term Care Insurance Policy Rate Increase Requests*** to the extent these bills increase access to long-term care at reasonable and affordable costs.

Thank you for the opportunity to submit this testimony. Please feel free to contact me at Ljulian@alz.org, or (860) 828-2828.