

DEPARTMENT OF INSURANCE

STATISTICAL ANALYSIS DIVISION
300 SOUTH SPRING STREET, 14th Floor
LOS ANGELES, CA 90013

**CIRCULAR**

May 8, 2009

LTC-2009

TO: All companies required to comply under the Long-Term Care Insurance Experience Study

SUBJECT: **The Long-Term Care Insurance Experience Statistical Plan & Reporting Instructions per California Insurance Codes 10232.3(h); 10234.86; 10234.95(i) & 10235.9**

In compliance with California Insurance Codes 10232.3(h), 10234.86, 10234.95(i) and 10235.9, the purpose of this Circular release is to advise your company of its reporting obligations and to provide you with the Statistical Plan and reporting instructions for the **2008 experience year**. For additional questions, please refer to the list of contact numbers and addresses provided at the end of this letter. What follows is a list of important dates and instructions to remember.

- **LTC-2009 Acknowledgement Form:** **DUE May 29, 2009**

IMPORTANT Regardless of your reporting experience, the ACKNOWLEDGEMENT FORM (excel version) **MUST BE ELECTRONICALLY SUBMITTED NO LATER THAN MAY 29, 2009 TO submissions@insurance.ca.gov**. We will not accept scanned copies, photo copies or “pdf” documents in lieu of the original excel file format.

- **LTC-2009 Data Workbook:** **DUE JULY 03, 2009**

Your LTC-2009 Data Workbook must be received no later than July 03, 2009.

- **LTC-2009 Affidavit Form:** **DUE JULY 03, 2009**

The affidavit form must be signed and notarized to confirm the validity of the data workbook. As an alternative to mailing or faxing the Affidavit Form, you my e-mail it ([preferred method](#)). Note that if you are scanning the original, an imprint seal may not appear on the scanned copy. We suggest that you take a led pencil and lightly brush over the imprint seal on the original copy to allow the seal to appear on the scanned copy. If the notary’s seal is visible on the scanned copy (saved in the Adobe format), you may e-mail it to submissions@insurance.ca.gov as an attachment.

- **REQUESTS FOR EXTENSION** must be received: **by JUNE 16, 2009**

Requests for extensions in submitting the LTC-2009 data must be received no later than JUNE 16, 2009. All extension requests must be in writing via e-mail and must be sent to the attention of Shawn Dadah at dadahs@insurance.ca.gov.

HOW TO RETRIEVE THE LTC-2009 REPORTING INSTRUCTIONS:

To retrieve the LTC-2009 reporting forms (Acknowledgement Form, Statistical Plan, Transmittal Forms and the Affidavit Forms) from the California Department of Insurance's website, please follow the instructions below:

- Go to the Department of Insurance web site at www.insurance.ca.gov.
- Click on the **INSURERS** link at the top portion of the webpage.
- Click on the **DATA & REPORTS** link, (located on the left-hand column of the page).
- Click on the **STATISTICAL PLANS** link and choose **REPORTING YEAR 2009 STATISTICAL PLANS**.
- A message will appear requesting the user name and password. Enter the following:
User Name: **GOTNUMBERS09** (case sensitive)
Password: **STAT2009** (case sensitive)
- Select **Long-Term Care Experience - LTC-2009**.
- From the LTC-2009 site, you can retrieve:
 - **Circular LTC-2009**
 - **Acknowledgement***
 - **Statistical Plan.** Contains detailed instructions on how to complete the LTC-2009 Data Workbook.
 - **Data Workbook***
 - **Affidavit**

CORRECT SUBMISSION PROCESS:

DO NOT SUBMIT YOUR ACKNOWLEDGEMENT FORM(S) OR DATA WORKBOOK(S) TO SHAWN DADAH UNLESS REQUESTED TO DO SO. SEE THE IMPORTANT NOTE BELOW FOR THE CORRECT SUBMISSION E-MAIL ADDRESS AND METHOD OF REPORTING.

***IMPORTANT NOTES:**

Although the LTC-2009 *Acknowledgement Form* and *Data Workbook* can be completed and transmitted to this Department via the CDI Internet, it is advisable to **save** a copy of each to your local directory. There are macro buttons on both forms for saving and transmitting the data.

After saving the Acknowledgement Form and Data workbook (if required) to your local directory, it is preferable that you submit these forms **via e-mail** using the links/buttons contained in each form, which will electronically transmit the filing to submissions@insurance.ca.gov.

Should you have an extension request, and/or questions related to the Statistical Plan or programming of the Transmittal Forms, please address your inquiries or concerns to the contact person indicated below.

Shawn Dadah
LTC Team Leader
CALIFORNIA DEPARTMENT OF INSURANCE
Tel: (213) 346-6317 / Fax: (213) 897-6571
Correspondence: dadahs@insurance.ca.gov

Sincerely,

Ben J. Gentile

Benjamin J. Gentile
Chief, Statistical Analysis Division

