#### **Important Exam Information:**

Exam Date and Time A read-through time will be given prior to the start of the exam—15

minutes in the morning session and 15 minutes in the afternoon session.

Exam Registration Candidates may register online or with an application.

Order Study Notes Study notes are part of the required syllabus and are not

available electronically but may be purchased through the

online store.

Introductory Study Note The Introductory Study Note has a complete listing of all study notes

as well as errata and other important information.

Case Study A case study will not be used for this exam.

Past Exams from 2000-present are available on SOA website.

<u>Updates</u> Candidates should be sure to check the Updates page on the exam

home page periodically for additional corrections or notices.

### Exam **Group/Health CORE US** Learning Objectives 1. The candidate will understand how to describe plan provisions typically offered under: a. Group and individual medical, dental and pharmacy plans b. Group and individual long-term disability plans c. Group short-term disability plans d. Supplementary plans, like Medicare Supplement e. Group and Individual Long Term Care Insurance **Learning Outcomes** The candidate will be able to: Describe typical organizations offering these coverages including the historical context Understand the historical context for each coverage Describe each of the coverages listed above c) Evaluate the potential financial, legal and moral risks associated with each coverage d) Describe various markets for these products Syllabus Resources Group Insurance, Bluhm, 6<sup>th</sup> Edition Ch. 4 Group Life Insurance Benefits Ch. 5 **Group Disability Income Benefits** Ch. 6 Medical Benefits in the United States Ch. 7 Health Benefits in Canada Ch. 8 Dental Benefits in the United States Ch. 9 Prescription Drug Benefits in the United States Ch. 10 Group Long-Term Care Insurance Essentials of Managed Health Care, Kongstvedt, 6<sup>th</sup> Edition, Ch. 1 A History of Managed Health Care and Health Insurance in the United States (background only) Types of Health Insurers, Managed Health Care Organizations and Integrated Health Care Ch. 2 **Delivery Systems** Individual Health Insurance, Bluhm

Ch. 2 The Products, pp. 33-60

Exam **Group/Health CORE US** Learning Objectives 2. The candidate will understand and recommend a manual rate for each of the coverages described in Learning Objective 1 **Learning Outcomes** The candidate will be able to: Identify and evaluate sources of data needed pricing, including the quality, appropriateness and limitations of each data source Develop an experience analysis Calculate and recommend assumptions Recommend a manual rate Identify critical metrics to evaluate actual vs. expected results **Syllabus Resources** ° Group Insurance, Bluhm, 6<sup>th</sup> Edition o Ch. 31 Pricing of Group Insurance Ch. 32 **Estimating Claim Costs for Life Benefits** Ch. 33 **Estimating Medical Claim Costs** Ch. 34 **Estimating Claim Costs for Disability Benefits** Ch. 35 **Estimating Dental Claim Costs** Ch. 36 Pricing Group Long-Term Care Insurance Ch. 37 **Experience Rating and Funding Methods** o Ch. 38 Medical Claim Cost Trend Analysis Essentials of Managed Health Care, Kongstvedt, 6<sup>th</sup> Edition o Ch. 22 **Underwriting and Rating** 

- Individual Health Insurance, Bluhm
  - o Ch. 5 Setting Premium Rates
- GHC-101-13: Group Disability Insurance (Sections 4 & 7)
- GHC-102-13: Loss Ratios and Health Coverages, American Academy of Actuaries' Loss Ratio Work Group
- GHC-103-13: The Challenges of Pricing Health Insurance for the 2014 Exchanges <u>Timing's Everything: The Impact of Benefit Rush</u>, Health Watch, May 2008

- Fwa				Crave / Haalik CORF HS			
Exa		- Obis at		Group/Health CORE US			
Learning Objectives							
3.	3. The candidate will understand how to recommend an employee benefit strategy						
Learning Outcomes							
The candidate will be able to:							
a)	Des	Describe employer's rationale and strategies for offering employee benefit plans					
b)	Eva	Evaluate the elements of cafeteria plan design, pricing and management					
c)	Red	Recommend an employee benefit strategy in light of an employer's objectives					
Syll	Syllabus Resources						
•	The Handbook of Employee Benefits, Rosenbloom, 7 <sup>th</sup> Edition						
	0	Ch. 1	The Environment of Employee Benefit Pla	ans			
	0	Ch. 2	Functional Approach to Designing and Ev	aluating Employee Benefits			
	0	Ch. 7	Consumer-Driven Health Plans				
	0	Ch. 18	Selected Additional Benefits, (pp. 491-49	96)			
	0	Ch. 24	Strategic Benefit Plan Management				
	0	Ch. 25	Cafeteria Plan Design and Administration	, (pp. 671 – 699)			
	0	Ch. 27	Employee Benefits Communications				
	0	Ch. 32	Employee Benefit Plans for Small Compa	nies			
•	Canadian Handbook of Flexible Benefits, McKay, 3 <sup>rd</sup> Edition						
	0	Ch. 7	Flexible Accounts – Health Spending, Per	sonal, and Perquisite, sections 7.1 – 7.3, 7.5 - 7.7			
	0	Ch. 14	Pricing				
	0	Ch. 16	Adverse Selection				
	0	Ch. 23	Case Studies				

Exam	Group/Health CORE US						
Learning Objectives							
4. The candidate will understand Government Programs providing Health and Disability Benefits in the U.S.							
Learning Outcomes							
The candidate will be able to:							
a) Describe benefits and eligibility requirements for							
i. Medicare, including Part D							
ii. Social Security, including disability income							
iii. Medicaid							
Syllabus Resources							
° Group Insurance, Bluhm, 6 <sup>th</sup> Edition							
o Ch. 12 Government Old-Age, Survivors and Disa	bility Plans in the United States						
o Ch. 13 Government Health Care Plans in the Un	ited States						
o Ch. 25 Filings and Certifications for Medicare-Re	elated Group Coverages						
• The Handbook of Employee Benefits, Rosenbloom, 7 <sup>th</sup> Edition							
o Ch. 21 Medicare Part D Prescription Drug Benef	its						
• Essentials of Managed Health Care, Kongstvedt, 6 <sup>th</sup> Edition							
o Ch. 25 Medicaid Managed Health Care							
GHC-800-13: AAA Issue Brief: Medicare's Financial Condition, Beyond Actuarial Balance							
Payment Reform Under the Medicare-Medicaid Finar	• Payment Reform Under the Medicare-Medicaid Financial Alignment Demonstrations, Health Watch, May 2013						

Exam	Group/Health CORE US
Learning Objectives	

5. The candidate will understand how to prepare and interpret insurance company financial statements in accordance with US Statutory Principles and GAAP

#### **Learning Outcomes**

#### The candidate will be able to:

- Develop exhibits for the US statutory blank for Life and Health Companies
- Prepare a financial statement in accordance with generally accepted accounting principles
- Interpret the results of both statutory and GAAP statements from the viewpoint of various stakeholders, including regulators, senior management, investors

#### **Syllabus Resources**

- US GAAP for Life Insurers, Herget, 2<sup>nd</sup> Edition
  - o Ch. 1 GAAP Objectives and their Implications to Life Insurers
  - o Ch. 2 Authorities (except Section 2.2.1.5)
  - o Ch. 10 Individual Health Insurance
  - o Ch. 12 Group Insurance, Large Case Pension Liabilities and Related Liabilities (pages 381 389)
  - o Ch. 14 Shadow Adjustments (pages 441-444)
- Analysis for Financial Management, Higgins, 10<sup>th</sup> Edition
  - o Ch. 1 Interpreting Financial Statements
  - o Ch. 3 Financial Forecasting
  - o Ch. 4 Managing Growth
- ° Group Insurance, Bluhm, 6<sup>th</sup> Edition
  - o Ch. 21 Group Insurance Financial Reporting: United States & Canada
  - o Ch. 45 Analysis of Financial and Operational Performance
- Statement of Financial Accounting Standards No. 60 (excl. Appendix B)

Exam	Group/Health CORE US				
Learning Objectives					
6. Evaluate the impact of regulation and taxation on companies and plan sponsors in the US					
Learning Outcomes					
The candidate will be able to:					

- Describe the regulatory and policy making process in the US
- Describe the major applicable laws and regulations and evaluate their impact

#### **Syllabus Resources**

- ° Group Insurance, Bluhm, 6<sup>th</sup> Edition
  - o Ch. 3 Health Policy and Group Insurance
  - o Ch. 14 Principles of Health Insurance Regulations
  - o Ch. 15 Regulation in the United States
  - o Ch. 17 Health Exchanges and Connectors
  - o Ch. 20 Federal Regulation & Taxation of Employer-Sponsored Group Insurance Benefits
- The Handbook of Employee Benefits, Rosenbloom, 7<sup>th</sup> Edition
  - o Ch. 25 Cafeteria Plan Design and Administration, pages 699-720
- GHC-801-13: U.S. Health Insurance
- GHC-802-13: AAA Health Reform Implementation: Understanding the Terminology
- GHC-803-13: Brief For the AAA as Amicus Curiae Supporting Respondents on the Severability Issue to the Supreme Court
- GHC-804-13: Letter to NAIC on White Paper on Adverse Selection and Exchanges
- GHC-805-13: Risk Adjustment and Other Risk-Sharing Provisions in the Affordable Care Act June 01, 2011

### Exam **Group/Health CORE US Learning Objectives** 7. The candidate will understand and evaluate Retiree Group and Life Benefits in the United States **Learning Outcomes** The candidate will be able to: Describe why employers offer retiree group and life benefits Determine appropriate baseline assumptions for benefits and population Determine employer liabilities for retiree benefits under various accounting standards Describe funding alternatives for retiree benefits Apply actuarial standards of practice to retiree benefit plans **Syllabus Resources** Group Insurance, Bluhm, 6th Edition, **Retiree Group Benefits** o Ch. 19 Fundamentals of Retiree Group Benefits, Yamamoto Ch. 7 Accounting under FAS 106 Ch. 8 Other Accounting o Ch. 9 Actuarial Methods and Assumptions (pages 251-278 and 287-291) Appendix F- Measuring Retiree Group Benefit Obligations (through pg. 37) GHC-104-13: CIA Note - Overview of Post-retirement Benefit Calculations Statement of Financial Accounting Standards No. 106

o Appendix C – Illustrations