

**DISTRICT OF COLUMBIA  
DEPARTMENT OF INSURANCE, SECURITIES AND BANKING**

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**NOTICE OF PROPOSED RULEMAKING**

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The Commissioner of the Department of Insurance and Securities Regulation, pursuant to the authority set forth in section 2 of the "Life Insurance Actuarial Opinion of Reserves Act of 1993", effective October 21, 1993 (D.C. Law 10-50; D.C. Official Code § 31-4901(b)(2) (2001)), Reorganization Plan No. 1 of 1983, effective March 31, 1983, and Mayor's Order No. 94-54, March 7, 1994, gives notice of his intent to adopt the following amendments to Title 26 (Insurance and Securities) of the District of Columbia Municipal Regulation ("DCMR"), in not less than thirty (30) days from the date of publication of this notice in the D.C. Register. The purpose of the amendments is to prescribe the revised requirements for statements of actuarial opinion that are to be submitted in accordance with the Standard Valuation Law and for memoranda in support thereof; the rules applicable to the appointment of an appointed actuary; and guidance as to the meaning of "adequacy of reserves."

Title 26, DCMR, Chapter 29 is amended to read as follows:

**CHAPTER 29            STATEMENTS OF ACTUARIAL OPINION AND  
                             MEMORANDUM REGULATION**

**2900                    SCOPE**

2900.1            This chapter shall apply to all life insurance companies and fraternal benefit societies doing business in this State and to all life insurance companies and fraternal benefit societies that are authorized to reinsure life insurance, annuities or accident and health insurance business in this State. This chapter shall be applied in a manner that allows the appointed actuary to utilize his or her professional judgment in performing the asset analysis and developing the actuarial opinion and supporting memoranda, consistent with relevant actuarial standards of practice. However, the Commissioner shall have the authority to specify specific methods of actuarial analysis and actuarial assumptions when, in the Commissioner's judgment, these specifications are necessary for an acceptable opinion to be rendered relative to the adequacy of reserves and related items. This chapter shall be applicable to all annual statements filed with the Commissioner after the effective date of this regulation. A statement of opinion on the adequacy of the reserves and related actuarial items

based on an asset adequacy analysis in accordance with section 2902 of this chapter, and a memorandum in support thereof in accordance with section 2903 of this chapter, shall be required each year.

**2901 GENERAL REQUIREMENTS**

- 2901.1 There is to be included on or attached to page 1 of the annual statement for each year, beginning with the year in which this chapter becomes effective, the statement of an appointed actuary, entitled "Statement of Actuarial Opinion," setting forth an opinion relating to reserves and related actuarial items held in support of policies and contracts, in accordance with section 2902 of this chapter.
- 2901.2 Upon written request by the company, the Commissioner may grant an extension of the date for submission of the statement of actuarial opinion.
- 2901.3 A "qualified actuary" is an individual who:
- (a) Is a member in good standing of the American Academy of Actuaries;
  - (b) Is qualified to sign statements of actuarial opinion for life and health insurance company annual statements in accordance with the American Academy of Actuaries qualification standards for actuaries signing such statements;
  - (c) Is familiar with the valuation requirements applicable to life and health insurance companies;
  - (d) Has not been found by the Commissioner (or if so found has subsequently been reinstated as a qualified actuary), following appropriate notice and hearing to have:
    - (1) Violated any provision of or any obligation imposed by, the Insurance Law or other law in the course of his or her dealings as a qualified actuary;
    - (2) Been found guilty of fraudulent or dishonest practices;
    - (3) Demonstrated his or her incompetency, lack of cooperation, or untrustworthiness to act as a qualified actuary;
    - (4) Submitted to the Commissioner during the past five (5) years, pursuant to this chapter, an actuarial opinion or

memorandum that the Commissioner rejected because it did not meet the provisions of this chapter including standards set by the Actuarial Standards Board; or

(5) resigned or been removed as an actuary within the past five (5) years as a result of acts or omissions indicated in any adverse report on examination or as a result of failure to adhere to generally acceptable actuarial standards; and

(e) Has not failed to notify the Commissioner of any action taken by any agency or official of any other state or foreign jurisdiction similar to that under paragraph (d) above.

2901.4 An "appointed actuary" is a qualified actuary who is appointed or retained to prepare the Statement of Actuarial Opinion required by this chapter, either directly by or by the authority of the board of directors through an executive officer of the company other than the qualified actuary. The company shall give the Commissioner timely written notice of the name, title (and, in the case of a consulting actuary, the name of the firm) and manner of appointment or retention of each person appointed or retained by the company as an appointed actuary and shall state in the notice that the person meets the requirements set forth in subsection 2901.3. Once notice is furnished, no further notice is required with respect to this person, provided that the company shall give the Commissioner timely written notice in the event the actuary ceases to be appointed or retained as an appointed actuary or to meet the requirements set forth in subsection 2901.2. If any person appointed or retained as an appointed actuary replaces a previously appointed actuary, the notice shall so state and give the reasons for replacement.

2901.5 The asset adequacy analysis required by this chapter:

(a) Shall conform to the Standards of Practice as promulgated from time to time by the Actuarial Standards Board and on any additional standards under this chapter, which standards are to form the basis of the statement of actuarial opinion in accordance with this chapter; and

(b) Shall be based on methods of analysis as are deemed appropriate for such purposes by the Actuarial Standards Board.

2901.6 Under authority of Section 2 of the Life Insurance Actuarial Opinion of Reserves Act of 1993, effective October 21, 1993 (D.C. Law 10-50;

D.C. Official Code § 31-4901 *et seq.*) (2001) (hereinafter the "Act"), the statement of actuarial opinion shall apply to all in force business on the statement date, whether directly issued or assumed, regardless of when or where issued, e.g., reserves of Exhibits 8, 9 and 10, and claim liabilities in Exhibit 11, Part 1 and equivalent items in the separate account statement or statements.

2901.7 If the appointed actuary determines as the result of asset adequacy analysis that a reserve should be held in addition to the aggregate reserve held by the company and calculated in accordance with methods set forth in the Act, the company shall establish the additional reserve.

2901.8 Additional reserves established under subsection 2901.7 above and deemed not necessary in subsequent years may be released. Any amounts released shall be disclosed in the actuarial opinion for the applicable year. The release of such reserves would not be deemed an adoption of a lower standard of valuation.

**2902 STATEMENT OF ACTUARIAL OPINION BASED ON AN ASSET ADEQUACY ANALYSIS**

2902.1 The statement of actuarial opinion submitted in accordance with this section shall consist of:

- (a) A paragraph identifying the appointed actuary and his or her qualifications (*see* paragraph 2902.2(a));
- (b) A scope paragraph identifying the subjects on which an opinion is to be expressed and describing the scope of the appointed actuary's work, including a tabulation delineating the reserves and related actuarial items that have been analyzed for asset adequacy and the method of analysis, (*see* paragraph 2902.2(b)) and identifying the reserves and related actuarial items covered by the opinion that have not been so analyzed;
- (c) A reliance paragraph describing those areas, if any, where the appointed actuary has deferred to other experts in developing data, procedures or assumptions, (*e.g.*, anticipated cash flows from currently owned assets, including variation in cash flows according to economic scenarios (*see* paragraph 2902.2(c)), supported by a statement of each such expert in the manner prescribed by subsection 2902.5;
- (d) An opinion paragraph expressing the appointed actuary's opinion with respect to the adequacy of the supporting assets to

mature the liabilities (*see* paragraph 2902.2(g)); and

- (e) One or more additional paragraphs will be needed in individual company cases as follows:
  - (1) If the appointed actuary considers it necessary to state a qualification of his or her opinion;
  - (2) If the appointed actuary must disclose an inconsistency in the method of analysis or basis of asset allocation used at the prior opinion date with that used for this opinion;
  - (3) If the appointed actuary must disclose whether additional reserves as of the prior opinion date are released as of this opinion date, and the extent of the release; and
  - (4) If the appointed actuary chooses to add a paragraph briefly describing the assumptions that form the basis for the actuarial opinion.

2902.2

The following paragraphs are to be included in the statement of actuarial opinion in accordance with this section. Language is that which in typical circumstances should be included in a statement of actuarial opinion. The language may be modified as needed to meet the circumstances of a particular case, but the appointed actuary should use language that clearly expresses his or her professional judgment. However, in any event the opinion shall retain all pertinent aspects of the language provided in this section:

- (a) The opening paragraph should generally indicate the appointed actuary's relationship to the company and his or her qualifications to sign the opinion. For a company actuary, the opening paragraph of the actuarial opinion should include a statement such as:

"I, [name], am [title] of [insurance company name] and a member of the American Academy of Actuaries. I was appointed by, or by the authority of the Board of Directors of said insurer to render this opinion as stated in the letter to the Commissioner dated [insert date]. I meet the Academy qualification standards for rendering the opinion and am familiar with the valuation requirements applicable to life and health insurance companies."

For a consulting actuary, the opening paragraph should include

a statement such as:

“I, [name], a member of the American Academy of Actuaries, am associated with the firm of [name of consulting firm]. I have been appointed by, or by the authority of the Board of Directors of [name of company] to render this opinion as stated in the letter to the Commissioner dated [insert date]. I meet the Academy qualification standards for rendering the opinion and am familiar with the valuation requirements applicable to life and health insurance companies’;

(b) The scope paragraph should include a statement such as:

“I have examined the actuarial assumptions and actuarial methods used in determining reserves and related actuarial items listed below, as shown in the annual statement of the company, as prepared for filing with state regulatory officials, as of December 31, 20\_\_\_. Tabulated below are those reserves and related actuarial items, which have been subjected to asset adequacy analysis.”;

<b>Asset Adequacy Tested Amounts—Reserves and Liabilities</b>					
<b>Statement Item</b>	<b>Formula Reserves (1)</b>	<b>Additional Actuarial Reserves (a) (2)</b>	<b>Analysis Method (b)</b>	<b>Other Amount (3)</b>	<b>Total Amount (1)+(2)+(3) (4)</b>
<b>Aggregate Reserve for Life Contracts</b>					
A. Life Insurance					
B. Annuities					
C. Supplementary Contracts Involving Life Contingencies					
D. Accidental Death Benefit					
E. Disability – Active					

F. Disability – Disabled					
G. Miscellaneous					
Total (Item 1, Page3)					
<b>Aggregate Reserves for Accident &amp; Health Contracts</b>					
A. Activate Life Reserve					
B. Claim Reserve					
Total (Item2, Page 3)					
<b>Deposit Type Contracts</b>					
Premium and Other Deposit Funds (Column 5, Line 14)					
Guaranteed Interest Contracts (Column 2, Line 14)					
Other (Column 6, Line 14)					
Supplemental Contracts and Annuities Certain (Column 3, Line 14)					

Dividend Accumulations Or Refunds (Column 4, Line 14)					
Total (Column 1, Line 14)					
<b>Claims for Life and Accident &amp; Health Contracts Part I</b>					
1 Life (Page 3, Line 4.1)					
2 Health (Page 3, Line 4.2)					
Total Part 1					
Separate Accounts (Page 3 of the Annual Statement of the Separate Accounts, Lines 1, 2, 3.1, 3.2, 3.3)					
<b>TOTAL RESERVES</b>					

IMR (General Account, Page ___ Line ___)	
(Separate Accounts, Page ___ Line ___)	
AVR (Page ___ Line ___)	(c)
Net Deferred and Uncollected Premium	

**Notes:**

- (a) The additional actuarial reserves are the reserves established under subsection 2901.7.
- (b) The appointed actuary should indicate the method of analysis, determined in accordance with the standards for asset adequacy analysis referred to in subsection 2901.5 of this chapter, by means of symbols that should be defined in footnotes to the table.
- (c) Allocated amount of Asset Valuation Reserve (AVR).

- (c) If the appointed actuary has relied on other experts to develop certain portions of the analysis, the reliance paragraph should include a statement such as:

“I have relied on [name], [title] for [e.g., “anticipated cash flows from currently owned assets, including variations in cash flows according to economic scenarios” or “certain critical aspects of the analysis performed in conjunction with forming my opinion”], as certified in the attached statement. I have reviewed the information relied upon for reasonableness.”;

- (d) If an expert will be relying on other experts, a statement of reliance thereto shall accompany the statement of actuarial opinion in the manner prescribed by subsection 2902.5;

- (e) If the appointed actuary has examined the underlying asset and liability records, the reliance paragraph should include a statement such as:

“My examination included such review of the actuarial assumptions and actuarial methods and of the underlying basic asset and liability records and such tests of the actuarial calculations as I considered necessary. I also reconciled the underlying basic asset and liability records to [exhibits and schedules listed as applicable] of the company’s current annual statement.”;

- (f) If the appointed actuary has not examined the underlying records, but has relied upon data (e.g., listings and summaries of policies in force or asset records) prepared by the company, the reliance paragraph should include a statement such as:

“In forming my opinion on [specify types of reserves] I relied upon data prepared by [name and title of company officer certifying in force records or other data] as certified in the attached statements. I evaluated that data for reasonableness and consistency. I also reconciled that data to [exhibits and schedules to be listed as applicable] of the company’s current annual statement. In other respects, my examination included review of the actuarial assumptions and actuarial methods used and tests of the calculations I considered necessary.”;

Such a statement shall be accompanied by a statement by each person relied upon in the manner prescribed by subsection 2902.5;

- (g) The opinion paragraph should include a statement such as:

"In my opinion the reserves and related actuarial values concerning the statement items identified above:

- (1) Are computed in accordance with presently accepted actuarial standards consistently applied and are fairly stated, in accordance with sound actuarial principles;
- (2) Are based on actuarial assumptions that produce reserves at least as great as those called for in any contract provision as to reserve basis and method, and are in accordance with all other contract provisions;
- (3) Meet the requirements of the insurance laws and regulations of the state of [state of domicile]; and are at least as great as the minimum aggregate amounts required by the state in which this statement is filed;
- (4) Are computed on the basis of assumptions consistent with those used in computing the corresponding items in the annual statement of the preceding year-end (with any exceptions noted below); and
- (5) Include provision for all actuarial reserves and related statement items, which ought to be established:

The reserves and related items, when considered in light of the assets held by the company with respect to such reserves and related actuarial items including, but not limited to, the investment earnings on the assets, and the considerations anticipated to be received and retained under the policies and contracts, make adequate provision, according to presently accepted actuarial standards of practice, for the anticipated cash flows required by the contractual obligations and related expenses of the company. (At the discretion of the Commissioner, this language may be omitted for an opinion filed on behalf of a company doing business only in this state and in no other state.)

The actuarial methods, considerations and analyses used in forming my opinion conform to the appropriate Standards of Practice as promulgated by the Actuarial Standards Board, which standards form the basis of this statement of opinion.

This opinion is updated annually as required by statute. To the best of my knowledge, there have been no material changes from the applicable date of the annual statement to the date of the rendering of this opinion which should be considered in reviewing this opinion.

or

The following material changes which occurred between the date of the statement for which this opinion is applicable and the date of this opinion should be considered in reviewing this opinion:

(Describe the change or changes.)

The impact of unanticipated events subsequent to the date of this opinion is beyond the scope of this opinion. The analysis of asset adequacy portion of this opinion should be viewed recognizing that the company's future experience may not follow all the assumptions used in the analysis.

\_\_\_\_\_  
Signature of Appointed Actuary

\_\_\_\_\_  
Address of Appointed Actuary

\_\_\_\_\_  
Telephone Number of Appointed Actuary

\_\_\_\_\_  
Date

2902.3 The adoption for new issues or new claims or other new liabilities of an actuarial assumption that differs from a corresponding assumption used for prior new issues or new claims or other new liabilities is not a change in actuarial assumptions within the meaning of this section.

2902.4 If the appointed actuary is unable to form an opinion, then he or she shall refuse to issue a statement of actuarial opinion. If the appointed actuary's opinion is adverse or qualified, then he or she shall issue an adverse or qualified actuarial opinion explicitly stating the reasons for the opinion. This statement should follow the scope paragraph and precede the opinion paragraph.

2902.5 If the appointed actuary relies on the certification of others on matters concerning the accuracy or completeness of any data underlying the actuarial opinion, or the appropriateness of any other information used by the appointed actuary in forming the actuarial opinion, the actuarial opinion should so indicate the persons the actuary is relying upon and a precise identification of the items subject to reliance. In addition, the persons on whom the appointed actuary relies shall provide a certification that precisely identifies the items on which the person is providing information and a statement as to the accuracy, completeness or reasonableness, as applicable, of the items. This certification shall include the signature, title, company, address and telephone number of the person rendering the certification, as well as the date on which it is signed.

2902.6 The Standard Valuation Law gives the Commissioner broad authority to accept the valuation of a foreign insurer when that valuation meets the requirements applicable to a company domiciled in this state in the aggregate. As an alternative to the requirements of subparagraph 2902.2(g)(3), the Commissioner may make one or more of the following additional approaches available to the opining actuary:

- (a) A statement that the reserves “meet the requirements of the insurance laws and regulations of the District of Columbia and the formal written standards and conditions for filing an opinion based on the law of state where the company is domiciled.” If the Commissioner chooses to allow this alternative, a formal written list of standards and conditions shall be made available. If a company chooses to use this alternative, the standards and conditions in effect on July 1 of a calendar year shall apply to statements for that calendar year, and they shall remain in effect until they are revised or revoked. If no list is available, this alternative is not available;
- (b) A statement that the reserves “meet the requirements of the insurance laws and regulations of the District of Columbia and I have verified that the company’s request to file an opinion based on the law of the state of its domicile has been approved and that any conditions required by the Commissioner for approval of that request have been met.” If the Commissioner chooses to allow this alternative, a formal written statement of such allowance shall be issued no later than March 31 of the year it is first effective. It shall remain valid until rescinded or modified by the Commissioner. The rescission or modifications shall be issued no later than March 31 of the year they are first effective. Subsequent to that statement being issued, if a company chooses to use this alternative, the

company shall file a request to do so, along with justification for its use, no later than April 30 of the year of the opinion to be filed. The request shall be deemed approved on October 1 of that year if the Commissioner has not denied the request by that date;

(c) A statement that the reserves “meet the requirements of the insurance laws and regulations of the District of Columbia and I have submitted the required comparison as specified by this state,” and:

(1) If the Commissioner chooses to allow this alternative, a formal written list of products (to be added to the table in subparagraph 2902.6(c)(2) below) for which the required comparison shall be provided will be published;

(2) If a company chooses to use this alternative, the list in effect on July 1 of a calendar year shall apply to statements for that calendar year, and it shall remain in effect until it is revised or revoked. If no list is available, this alternative is not available;

(3) If a company desires to use this alternative, the appointed actuary shall provide a comparison of the gross nationwide reserves held to the gross nationwide reserves that would be held under NAIC codification standards; Gross nationwide reserves are the total reserves calculated for the total company in force business directly sold and assumed, indifferent to the state in which the risk resides, without reduction for reinsurance ceded.

(4) The information shall be presented in a table as shown below;

(1)	(2)	(3)	(4)	(5)
Product Type	Death Benefit or Account Value	Reserves Held	Codification Reserves	Codification Standard

(5) The information listed shall include all products identified by either the state of filing or any other states subscribing to this alternative;

- (6) If there is no codification standard for the type of product or risk in force or if the codification standard does not directly address the type of product or risk in force, the appointed actuary shall provide detailed disclosure of the specific method and assumptions used in determining the reserves held; and
- (7) The comparison provided by the company is to be kept confidential to the same extent and under the same conditions as the actuarial memorandum.

2902.7 Notwithstanding the above, the Commissioner may reject an opinion based on the laws and regulations of the company's state of domicile and require an opinion based on the laws of the District of Columbia. If a company is unable to provide the opinion within sixty (60) days of the request or such other period of time determined by the Commissioner after consultation with the company, the Commissioner may contract an independent actuary at the company's expense to prepare and file the opinion.

**2903 DESCRIPTION OF ACTUARIAL MEMORANDUM  
INCLUDING AN ASSET ADEQUACY ANALYSIS AND  
REGULATORY ASSEST ADEQUACY ISSUES  
SUMMARY**

2903.1 In accordance with the Act, the appointed actuary shall prepare a memorandum to the company describing the analysis done in support of his or her opinion regarding the reserves. The memorandum shall be made available for examination by the Commissioner upon his or her request but shall be returned to the company after such examination and shall not be considered a record of the Department or subject to automatic filing with the Commissioner.

2903.2 In preparing the memorandum, the appointed actuary may rely on, and include as a part of his or her own memorandum, memoranda prepared and signed by other actuaries who are qualified within the meaning of subsection 2901.3 of this chapter, with respect to the areas covered in such memoranda, and so state in their memoranda.

2903.3 If the Commissioner requests a memorandum and no such memorandum exists or if the Commissioner finds that the analysis described in the memorandum fails to meet the standards of the Actuarial Standards Board or the standards and requirements of this chapter, the Commissioner may designate a qualified actuary to review the opinion and prepare such supporting memorandum as is required for review. The reasonable and necessary expense of the independent review shall be paid by the company but shall be directed and

controlled by the Commissioner.

- 2903.4 The reviewing actuary shall have the same status as an examiner for purposes of obtaining data from the company and the work papers and documentation of the reviewing actuary shall be retained by the Commissioner; provided, however, that any information provided by the company to the reviewing actuary and included in the work papers shall be considered as material provided by the company to the Commissioner and shall be kept confidential to the same extent as is prescribed by the Act with respect to other material provided by the company to the Commissioner. The reviewing actuary shall not be an employee of a consulting firm involved with the preparation of any prior memorandum or opinion for the insurer pursuant to this chapter for either the current year or the preceding three (3) years.
- 2903.5 In accordance with the Act, the appointed actuary shall prepare a regulatory asset adequacy issues summary, the contents of which are specified in subsection 2903.7. The regulatory asset adequacy issues summary will be submitted no later than March 15 of the year following the year for which a statement of actuarial opinion based on asset adequacy is required. The regulatory asset adequacy issues summary is to be kept confidential to the same extent and under the same conditions as the actuarial memorandum.
- 2903.6 When an actuarial opinion is provided, the memorandum shall demonstrate that the analysis has been done in accordance with the standards for asset adequacy referred to in subsection 2901.5 of this chapter and any additional standards under this chapter. It shall specify:
- (a) For reserves:
    - (1) Product descriptions including market description, underwriting and other aspects of a risk profile and the specific risks the appointed actuary deems significant;
    - (2) Source of liability in force;
    - (3) Reserve method and basis;
    - (4) Investment reserves;
    - (5) Reinsurance arrangements;
    - (6) Identification of any explicit or implied guarantees made by the general account in support of benefits

provided through a separate account or under a separate account policy or contract and the methods used by the appointed actuary to provide for the guarantees in the asset adequacy analysis;

- (7) Documentation of assumptions to test reserves for the following:
    - (A) Lapse rates (both base and excess);
    - (B) Interest crediting rate strategy;
    - (C) Mortality;
    - (D) Policyholder dividend strategy;
    - (E) Competitor or market interest rate;
    - (F) Annuitization rates;
    - (G) Commissions and expenses; and
    - (H) Morbidity; and
  - (8) The documentation of the assumptions shall be such that an actuary reviewing the actuarial memorandum could form a conclusion as to the reasonableness of the assumptions;
- (b) For assets:
- (1) Portfolio descriptions, including a risk profile disclosing the quality, distribution and types of assets;
  - (2) Investment and disinvestment assumptions;
  - (3) Source of asset data;
  - (4) Asset valuation bases;
  - (5) Documentation of assumptions made for:
    - (A) Default costs;
    - (B) Bond call function;
    - (C) Mortgage prepayment function;

- (D) Determining market value for assets sold due to disinvestment strategy; and
  - (E) Determining yield on assets acquired through the investment strategy; and
  - (6) The documentation of the assumptions shall be such that an actuary reviewing the actuarial memorandum could form a conclusion as to the reasonableness of the assumptions;
  - (c) For the analysis basis:
    - (1) Methodology;
    - (2) Rationale for inclusion or exclusion of different blocks of business and how pertinent risks were analyzed;
    - (3) Rationale for degree of rigor in analyzing different blocks of business (include in the rationale the level of "materiality" that was used in determining how rigorously to analyze different blocks of business);
    - (4) Criteria for determining asset adequacy (include in the criteria the precise basis for determining if assets are adequate to cover reserves under "moderately adverse conditions" or other conditions as specified in relevant actuarial standards of practice); and
    - (5) Whether the impact of federal income taxes was considered and the method of treating reinsurance in the asset adequacy analysis;
  - (d) Summary of material changes in methods, procedures, or assumptions from prior years asset adequacy analysis;
  - (e) Summary of results; and
  - (f) Conclusions.
- 2903.7 The regulatory asset adequacy issues summary shall include:
- (a) Descriptions of the scenarios tested (including whether those scenarios are stochastic or deterministic) and the sensitivity testing done relative to those scenarios. If a negative ending

surplus results under certain scenarios tested in the aggregate, the actuary should describe those scenarios tested and the amount of additional reserve as of the valuation date which, if held, would eliminate the negative aggregate surplus values. Ending surplus values shall be determined by either:

- 1) Extending the projection period until the in force and associated assets and liabilities at the end of the projection period are immaterial; or
  - 2) By adjusting the surplus amount at the end of the projection period by an amount that appropriately estimates the value that can reasonably be expected to arise from the assets and liabilities remaining in force;
- (b) The extent to which the appointed actuary uses assumptions in the asset adequacy analysis that is materially different than the assumptions used in the previous asset adequacy analysis;
- (c) The amount of reserves and the identity of the product lines that had been subjected to asset adequacy analysis in the prior opinion but were not subject to analysis for the current opinion;
- (d) Comments on any interim results that may be of significant concern to the appointed actuary;
- (e) The methods used by the actuary to recognize the impact of reinsurance on the company's cash flows, including both assets and liabilities, under each of the scenarios tested; and
- (f) Whether the actuary has been satisfied that all options, whether explicit or embedded in any asset or liability (including but not limited to those affecting cash flows embedded in fixed income securities), and equity-like features in any investments, have been appropriately considered in the asset adequacy analysis.

2903.8 The regulatory asset adequacy issues summary shall contain the name of the company for which the regulatory asset adequacy issues summary is being supplied and shall be signed and dated by the appointed actuary rendering the actuarial opinion.

2903.9 The memorandum shall include a statement:

“Actuarial methods, considerations and analyses used in the preparation of this memorandum conform to the appropriate Standards of Practice as promulgated by the Actuarial Standards Board, which

standards form the basis for this memorandum”

- 2903.10 An appropriate allocation of assets in the amount of the interest maintenance reserve (“IMR”), whether positive or negative, shall be used in any asset adequacy analysis. Analysis of risks regarding asset default may include an appropriate allocation of assets supporting the asset valuation reserve (“AVR”); these AVR assets may not be applied for any other risks with respect to reserve adequacy. Analysis of these and other risks may include assets supporting other mandatory or voluntary reserves available to the extent not used for risk analysis and reserve support.
- 2903.11 The amount of the assets used for the AVR shall be disclosed in the table of reserves and liabilities of the opinion and in the memorandum. The method used for selecting particular assets or allocated portions of assets shall be disclosed in the memorandum.
- 2903.12 The appointed actuary shall retain on file, for at least seven (7) years, sufficient documentation so that it will be possible to determine the procedures followed, the analyses performed, the basis for assumptions, and the results obtained.

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#### DEFINITIONS

“Act” means section 2 of the Life Insurance Actuarial Opinion of Reserves Act of 1993, effective October 21, 1993 (D.C. Law 10-50; D.C. Official Code § 31-4901 *et seq.*) (2001).

“Actuarial Opinion” means the opinion of an appointed actuary regarding the adequacy of the reserves and related actuarial items based on an asset adequacy analysis in accordance with section 2902 of this chapter and with applicable Actuarial Standards of Practice.

“Actuarial Standards Board” means the board established by the American Academy of Actuaries to develop and promulgate standards of actuarial practice.

“Annual statement” means that statement required by the Act, which is to be filed by the company with the Commissioner annually.

“Appointed actuary” means an individual who is appointed or retained in accordance with the requirements set forth in subsection 2901.3 of this chapter to provide the actuarial opinion and supporting memorandum as required by the Act.

“Asset adequacy analysis” means an analysis that meets the standards

and other requirements referred to in subsection 2901.5 of this chapter.

“Commissioner” means the District of Columbia Department of Insurance, Securities, and Banking Commissioner.

“Company” means a life insurance company, fraternal benefit society or reinsurer subject to the provisions of the Act and this chapter.

“Department” means the District of Columbia Department of Insurance, Securities and Banking.

“Qualified actuary” means an individual who meets the requirements set forth in subsection 2901.3 of this chapter.

“Standard Valuation Law” means section 31-4701 of the D.C. Official Code (2001).

Persons desiring to comment on the proposed rulemaking may submit their comments in writing not later than thirty (30) days after the date of publication of this notice in the D.C. Register. Comments should be addressed to Leslie Johnson, Hearing Officer, Department of Insurance, Securities and Banking, 810 First Street, N.E., Room 701, Washington, DC 20002. Copies of the proposed rules may be obtained from the Department at the above address.

## D.C. OFFICE OF PERSONNEL

## NOTICE OF PROPOSED RULEMAKING

The Acting Director, D.C. Office of Personnel, with the concurrence of the City Administrator, pursuant to Mayor's Order 2000-83, dated May 30, 2000, and in accordance with section 1201 of D.C. Law 15-194, the Omnibus Public Safety Agency Reform Amendment Act of 2004 (Act), effective September 30, 2004 (D.C. Act 15-463; 51 DCR 9805, October 8, 2004), hereby gives notice of the intent to adopt the following rules in not less than thirty (30) days from the date of publication of this notice in the *D.C. Register*. Section 1201 of the Act repealed D.C. Official Code § 5-105.08 (2001), as well as the second sentence of D.C. Official Code § 5-410 (2001). The repealed sections: (1) prescribed the area within which uniformed members of the Metropolitan Police Department (MPD) or the Fire and Emergency Medical Services Department (FEMSD) may reside as the "Washington, District of Columbia, Metropolitan District;" (2) specified that any uniformed member of the MPD or FEMSD living outside of the District of Columbia was required to have and maintain a telephone at all times in his or her residence; and (3) provided that the Chiefs of the MPD and the FEMSD could waive these provisions. Because of the repeal of these sections, it is necessary to amend Chapter 3 of the *D.C. Personnel Regulations, Residency*, to rescind section 308, which contained the special residency provisions applicable to the MPD and FEMSD. Upon adoption, these rules will amend Chapter 3 of the *D.C. Personnel Regulations, Residency*, published at 37 DCR 851 (January 26, 1990) and amended at 37 DCR 4117 (June 22, 1990), 40 DCR 2485 (April 16, 1993), 47 DCR 2416 (April 7, 2000), 50 DCR 6993 (August 22, 2003), and 51 DCR 9309 (October 1, 2004).

## CHAPTER 3

## RESIDENCY

*Section 308 is rescinded.*

Comments on these proposed regulations should be submitted, in writing, to Ms. Lisa R. Marin, SPHR, Acting Director of Personnel, 441 4<sup>th</sup> Street, NW, Suite 300S, Washington, D.C. 20001, within thirty (30) days of the date of publication of this notice in the *D.C. Register*. Additional copies of these proposed rules are available from the above address.

PUBLIC SERVICE COMMISSION OF THE DISTRICT OF COLUMBIA  
1333 H STREET, NW, SUITE 200 WEST, WASHINGTON, DC 20005

NOTICE OF PROPOSED RULEMAKING

FORMAL CASE NO. 1005, IN THE MATTER OF VERIZON WASHINGTON, DC  
INC.'S APPLICATION TO RECLASSIFY LOCAL DIRECTORY ASSISTANCE AND  
CONNECT REQUEST SERVICES AS COMPETITIVE UNDER PRICE CAP PLAN 2004

1. The Public Service Commission of the District of Columbia ("Commission") hereby gives notice, pursuant to District of Columbia Code Section 2-505,<sup>1</sup> of its intent to act upon the Application of Verizon Washington, DC Inc. ("Verizon") to reclassify Local Directory Assistance and Connect ReQuest services in not less than 60 days from the date of the publication of this Notice of Proposed Rulemaking ("NOPR") in the *D.C. Register*.

2. On December 27, 2004, Verizon filed an application<sup>2</sup> requesting the reclassification of Local Directory Assistance and Connect ReQuest services as competitive services pursuant to Price Cap Plan 2004.<sup>3</sup> Presently, Verizon's Local Directory Assistance for business and residential customers is classified as a basic service. Verizon's Connect ReQuest service enables a customer calling from touch-tone phones to have a telephone number that is provided by Verizon's Local Directory Assistance to be dialed automatically. Verizon's Connect ReQuest service for business and residential customers is currently classified as a discretionary service under the Price Cap Plan 2004. Under Price Cap Plan 2004, prices for basic and discretionary services are regulated but prices for competitive services are not regulated by the Commission.<sup>4</sup> Verizon's request would therefore remove existing price restrictions on these services.

3. Verizon's directory assistance service allows customers to receive directory information from its directory database in the Washington local service area. Residential customers, with the exception of certain exemptions, are allowed five (5) free directory assistance calls per month. After the customer has exhausted the five (5) free calls per month, the customer is billed forty-two cent (\$0.42) per call. Call allowances are not applicable to business customers.

4. Connect ReQuest is a service provided to directory assistance customers calling from touch-tone telephones. After the requested number is located, the customer has the option to have

<sup>1</sup> D. C. Code, 2001 Ed. § 2-505.

<sup>2</sup> *Formal Case No. 1005, In the Matter of Verizon Washington, D.C. Inc.'s Application to Reclassify Local Directory Assistance and Connect ReQuest Services as Competitive Under Price Cap Plan 2004*, filed December 27, 2004 (Verizon's Application).

<sup>3</sup> *Formal Case No. 1005, In the Matter of Verizon Washington, D.C. Inc.'s Price Cap Plan 2004 for the Provision of Local Telecommunications Services in the District of Columbia*, Order No. 13370, rel. September 9, 2004.

<sup>4</sup> See, Order No. 13370, ¶ 15.

the number automatically dialed. When the customer chooses to use this service, the numbers are automatically dialed at the cost of thirty-four cents (\$0.34) per call.

5. Section 5(a) of Price Cap Plan 2004 requires the Commission to determine, no later than 60 days after the date of publication of the NOPR, that either the reclassification is approved, the reclassification is approved on an interim basis subject to the Commission completing its review, the reclassification is denied, or the reclassification request is held in abeyance because additional time is needed for the Commission to complete its review due to the complexity of the application.<sup>5</sup>

6. Verizon's Application is on file with the Commission and can be reviewed at the Office of the Commission Secretary, 1333 H Street, N.W., Second Floor, West Tower, Washington, D.C. 20005, between the hours of 9:00 a.m. and 5:30 p.m., Monday through Friday. Copies of the application are available upon request, at a per-page reproduction cost.

7. Comments on Verizon's reclassification request must be made in writing to Christine D. Brooks, Commission Secretary, at the above address. All initial comments must be received within 30 days of the date of publication of this NOPR in the *D.C. Register*. Persons wishing to file reply comments may do so no later than 40 days of the date of publication of this NOPR. After the comments have been received, the Commission will take final action on Verizon's Application as prescribed by Section 5(a) of Price Cap Plan 2004.

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<sup>5</sup> See, Price Cap Plan 2004 § 5(a).