



SOCIETY OF ACTUARIES

Article from:

Long-Term Care News

February 2009 – Issue 22

And the Survey Says ...

by Brad S. Linder



Brad S. Linder, ASA, MAAA, FLMI, ACS, ARA, is an A & H valuation actuary at General Electric Company Employers Reassurance Corporation in Plainville, Conn. He can be reached at Brad.Linder@GE.com.

Every time I hear the words ‘survey results’ a mental picture comes to mind of Richard Dawson hosting the “Family Feud” television show. While surveys on his TV show consolidated the results so that we could guess at what the top popular answers to a question were, the game show was actually fun to watch as we cast guesses for the correct answers from our favorite family room chairs. With our recent Long-Term Care (LTC) Section Survey, it would be fun to have the presentation possibilities that Mr. Dawson had. Perhaps for the future, we could have fun rigging up something similar through the Society of Actuaries’ Web site.

We include the survey questions and responses in this issue of the newsletter. No consolidation occurs except to quantify the results numerically as well as some bar graphics. No answers were thrown out. We considered ways to include all of the suggestions and comments in this issue, but that would make this publication quite thick and a bit unreadable. So, please know that the LTC Council, Bruce Stahl and I are each reviewing them in order to act upon them in the most advantageous way for our membership. On behalf of the LTC Section Council, the folks at the Society of Actuaries and the newsletter, please accept our thanks. There were a lot of really great suggestions and comments. Many thanks to Jill Leprich, project support specialist, for preparing this survey and the results.

Included in this issue is a summary of Eric Stallard’s award winning paper. Congratulations go to Eric for his 1st place win of the Society’s Ed Lew Award.

This writing is actually taking place at the close of the Thanksgiving holiday. We’ve just elected Mr. Barack Obama to the Presidency. There’s huge turmoil in the financial markets. With Mr. Obama’s election, we know that health care issues are on his wish list for change. Look for changes impacting LTC. The most obvious ones will be in the way health care is provided or paid for. There will be a review of Medicare as well as Medicaid. The survey says no matter what your political background and preferences, we have a lot of issues to help him be aware of when he officially takes the reigns as President of the United States.

Long-Term Care News

Issue Number 22 | February 2009

Published by the
Long-Term Care Insurance
Section Council of the
Society of Actuaries

This newsletter is free to section members. To join the section, SOA members and non-members can locate a membership form on the LTCI Web page at www.soaltci.org. Back issues of section newsletters have been placed in the SOA library and on the SOA Web site (www.soa.org).

2008-2009 Section Leadership

Steven W. Schoonveld
Chair, Treasurer

Amy Pahl
Vice Chair

William J. Falk
BOD Partner

Allen Schmitz
Membership Liaison

John L. Timmerberg
Professional Community Liaison

David Kerr
Basic Education Liaison

David Benz
Web Coordinator

Loretta Jacobs
Education Coordinator, Spring Meeting

Mark Costello
Education Coordinator, Webinars

Roger Gagne
Research Coordinator

Content Managers

Brad S. Linder
Content Manager

A&H Valuation Actuary
GE
41 Woodford Avenue
Building 5-2
Plainville, CT 06062
Phone: 860.793.5931
Fax: 860.793.5918
E-mail: Brad.Linder@GE.com

Bruce A. Stahl
Content Manager

Vice President and Actuary
Long Term Care Insurance
RGA Reinsurance Company
1370 Timberlake Manor Parkway
Chesterfield, MO 63017
Phone: 636.736.8303
Fax: 636.736.7155
E-mail: bstahl@rgare.com

SOA Staff

Jacque Kirkwood, *Staff Editor*
E-mail: jkirkwood@soa.org

Sara Teppema, *Staff Partner*
E-mail: steppema@soa.org

Jill Leprich, *Section Specialist*
E-mail: jleprich@soa.org

Julissa Sweeney, *Graphic Designer*
E-mail: jsweeney@soa.org

Facts and opinions contained herein are the sole responsibility of the persons expressing them and should not be attributed to the Society of Actuaries, its committees, the Long-Term Care Insurance Section or the employers of the authors. We will promptly correct errors brought to our attention.

© Copyright 2009 Society of Actuaries.
All rights reserved. Printed in the United States of America.

That very first e-mail announcing the upcoming ILTCI Conference always gets my heart racing. We're now at the 9th conference. These conferences are always exciting—packed with good presentations and LTC industry experts in many difference areas of practice. The survey says you concur it's the best conference. To whet your appetite further for this year, Laurel Kastrup and Alisa Widmer present their descriptive article of the 8th conference. Although this survey does not say what the new sessions will be, I'll bet you'll love them!

Since our last issue, I noticed two intriguing news stories that happen to have an impact our industry. I believe that they are important. They both come under the broad category of misdiagnosis. The first story was one concerning Lyme Disease. Many folks throughout the country know this only as a simple tick-borne disease and assume that it's only located in Connecticut (particularly around the town of Lyme). Both assumptions are false. Not only is Lyme Disease occurring in a number of areas outside of Connecticut—it's prevalent across the United States—but it's occurring in epidemic proportions.

Secondly, this is not a simple illness. Please know that there are at least two other possible tick-borne coinfections that are just as bad. They come under the heading names of Ehrlichiosis and Babesiosis. Usually folks assume that they would be safe if they do not see the classic bull's eye rash indicating the Lyme Disease infection. Please know that there are significant numbers of victims who never show the rash as a symptom. Indeed there can be unexplained fevers, chills, sweats, vision impairments or related problems, hearing impairments or related problems, twitching, nausea, vomiting, gastritis, abdominal cramping, diarrhea or constipation, irritable bladder or bladder dysfunction, pelvic pain, joint pain and swelling, TMJ, neck difficulties including stiffness, stiffness and pain in the joints and back, muscle cramps or pain, headaches, tingling, numbness, stabbing sensations, tremors, dizziness, poor balance, difficulty walking, seizure, personality changes, mood swings, irritability, depression, confusion, difficulty concentrating, difficulty thinking or reading, trouble speaking and disorientation. The list of symptoms is much longer than this.

Lyme Disease may mimic some 200 other diseases including Multiple Sclerosis (MS), Fibromyalgia, Chronic Fatigue Syndrome (CFS), Infectious Mononucleosis, Systemic Lupus, Attention Deficit Disorder (ADD), Alzheimer's Disease (AD), Guillan-Barre Syndrome, Lou Gehrig's Disease (ALS) and Rheumatoid Arthritis. Interestingly, the longer that Lyme Disease goes UNDIAGNOSED, the more severe the symptoms' progression to the victim and the more difficult it is to kick the disease out of the body. There are quite a number of folks who have been asymptomatic in youth and now start showing symptoms later on as an adult. Ten years ago, most doctors did not or could not make a correct diagnosis. Only a handful of doctors were experts in these diseases.

The particular story that caught my eye concerned doctors who made a connection between autism in young children and Lyme's Disease. The doctors additionally tested the autistic children for Lyme's Disease and found quite a number of positives with the Western Blot Test—looking for the band-specific markers. (Note that the simple doctor office test is an extremely poor test as it is unreliable.) When the children were subsequently put on the medicine protocol for Lyme Disease, the symptoms reversed. You can imagine the joy at reversing autism symptoms!

It's interesting to note the similarity of the Lyme Disease symptoms listed above to those who are LTC claimants. It is recommended to be in the differential diagnosis for cases showing these symptoms. Could you imagine the joy at reversing misdiagnosed Lyme's Disease in LTC claimants?

CONTINUED ON **PAGE 4**

The second news story that got my attention featured Dr. Timothy Johnson who reported on the topic of Normal Pressure Hydrocephalus (NPH). Basically, accumulating water inside the brain starts to cause pressure on the brain. This added pressure affects a person's walking, bladder control and memory. Memory problems include slowed thinking. Since these three symptoms happen to be common symptoms in the elderly population, it is often a misdiagnosed condition. Interestingly, an MRI will show the enlarged ventricles in the brain. Should a claimant present with these symptoms, a differential should include the possibility of using a MRI. It appears that the simple procedure of alleviating the water pressure in the brain has the effect of reversing the symptoms. Imagine the joy at reversing these symptoms!

SOURCES

Many thanks to each of the following:

- the Lyme Disease Association of Massachusetts, Inc.
- the Greenwich Lyme Disease Task Force, Inc.
- International Lyme and Associated Diseases Society
- Kirby C. Stafford III, Ph.D., "Tick Associated Diseases," Connecticut Agricultural Experiment Station
- JuJu Chang, Thea Tractenberg, and Imaeyen Ibang, "Is It Really Alzheimer's?— NPH Commonly Is Misdiagnosed as Alzheimer's Disease," Nov. 6, 2008; and of course to Dr. Timothy Johnson. ■

Pay Your Dues and Section Memberships Online*

Using your credit card and our easy-to-use online payment system, you can pay your dues, renew section memberships or sign up for new section memberships. For your convenience, you can also sign up for IAA special interest sections at the same time you renew your SOA membership.

*To pay by check, visit the site below to print your invoice.

Renew today at <http://dues.soa.org>!

