

Case Name: _____

Case Number: _____ Case Actuary/Contractor: _____

ACTUARIAL CASE REPORT CHECKLIST

The actuarial case reviewer should fill out this checklist completely and sign the bottom line. He or she should check each item to make sure the case was done properly or **indicate "NA" if the item does not apply**. Once completed, the reviewer should place the checklist in the ACR so that it is the first page of the report below the blue cover.

I, _____, have checked the following:

- _____ 1. Amounts on first page of the Actuarial Case Memo match DOPT Listings totals
- _____ 2. Front page of Actuarial Case Memo is signed and dated
- _____ 3. Signed Actuarial Certification (for contractor cases)
- _____ 4. Plan Abstract
- _____ 5. CAS asset screens
- _____ 6. One calculation for each benefit formula in the plan
- _____ 7. Accrued at Normal Limitation
- _____ 8. Maximum Guaranteeable Benefit (MGB) Limitation
- _____ 9. Phase-in Limitation(s)
- _____ 10. Plan Asset Allocation
- _____ 11. UNGBs, BLs, 4022(c) Benefits, and Termination Benefits (blue print for the 4022(c) allocation if SPARR or UBL recoveries not yet final)
- _____ 12. Pre-retirement death benefit coverage
- _____ 13. Expense Load
- _____ 14. Substantial Owner Benefits
- _____ 15. XRA (terminated more than one year before DOPT, terminated less than one year before DOPT)
- _____ 16. List of purchased annuities or benefit offsets
- _____ 17. "Lump sum" vs. "annuity" status (including correct factors)
- _____ 18. Present value factors (each form of benefit: married, single, immed., deferred, etc.)
- _____ 19. Conversion factor tables (early, late, form conversion, etc.)
- _____ 20. DOPT Listings (clear headings, logical progression)
- _____ 21. Case Memo: clear, consistent and follows sample language and format shown in I:\ACTUARY.INF\ACM
- _____ 22. Guidance for PLS: clear, consistent and follows sample language and format shown in I:\ACTUARY.INF\GUIDEPLS
- _____ 23. Actuarial Case Memo: includes discussion of data complexities, policy issues, major interpretations, etc.
- _____ 24. Benefit Statements: includes an index (if applicable) and each type of statement (e.g., substantial owners, alternate formulas, etc.)

Comments/Exceptions: _____

Actuary's Signature: _____ Date: _____