

SERFF Tracking Number: BNLA-125806070 State: Arkansas
Filing Company: Bankers Life and Casualty Company State Tracking Number: 40204
Company Tracking Number:
TOI: LTC06 Long Term Care - Other Sub-TOI: LTC06.000 Long Term Care - Other
Product Name: Long Term Care
Project Name/Number: Lead Generating LTC Partnership Letter/5202

Filing at a Glance

Company: Bankers Life and Casualty Company

Product Name: Long Term Care SERFF Tr Num: BNLA-125806070 State: ArkansasLH
TOI: LTC06 Long Term Care - Other SERFF Status: Closed State Tr Num: 40204
Sub-TOI: LTC06.000 Long Term Care - Other Co Tr Num: State Status: Filed-Closed
Filing Type: Advertisement Co Status: Reviewer(s): Stephanie Fowler
Author: Janice Fron Disposition Date: 10/03/2008
Date Submitted: 09/08/2008 Disposition Status: Filed
Implementation Date Requested: On Approval Implementation Date:

State Filing Description:

General Information

Project Name: Lead Generating LTC Partnership Letter Status of Filing in Domicile: Not Filed
Project Number: 5202 Date Approved in Domicile:
Requested Filing Mode: Review & Approval Domicile Status Comments:
Explanation for Combination/Other: Market Type: Individual
Submission Type: New Submission Group Market Size:
Overall Rate Impact: Group Market Type:
Filing Status Changed: 10/03/2008
State Status Changed: 10/03/2008 Deemer Date:
Corresponding Filing Tracking Number:
Filing Description:
TO: Insurance Department Personnel

RE: LONG TERM CARE ADVERTISING

Lead Generating Devices

Letter 5202-WC with Reply Card 5202-WC-1

Envelope BE-5202

Dear Sir or Madam:

SERFF Tracking Number: BNLA-125806070 State: Arkansas
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In accordance with your state's requirements, we are filing the above captioned forms.

This advertising material is designed to be sent out to prospective clients to generate interest in our previously approved Long Term Care Insurance policies and their relation to your state's Long Term Care Partnership Program.

These forms have not been filed in our home state of Illinois.

Your consideration of this filing is sincerely appreciated.

Very truly yours,

Janice D. Fron

Product Approval and Compliance

Company and Contact

Filing Contact Information

Janice Fron, Filing Project Leader j.fron@banklife.com
222 Merchandise Mart Plaza - 19th Floor (312) 396-7538 [Phone]
Chicago, IL 60654 (312) 396-5907[FAX]

Filing Company Information

Bankers Life and Casualty Company CoCode: 61263 State of Domicile: Illinois
600 West Chicago Ave Group Code: 233 Company Type:
Chicago, IL 60654-2800 Group Name: State ID Number:
(800) 621-3724 ext. [Phone] FEIN Number: 36-0770740

Filing Fees

Fee Required? Yes
Fee Amount: \$75.00
Retaliatory? No
Fee Explanation: Arkansas requires \$25.00 per form for advertising.

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COMPANY	AMOUNT	DATE PROCESSED	TRANSACTION #
Bankers Life and Casualty Company	\$75.00	09/08/2008	22353138

CHECK NUMBER	CHECK AMOUNT	CHECK DATE
	\$0.00	

SERFF Tracking Number: BNLA-125806070 State: Arkansas
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Correspondence Summary

Dispositions

Status	Created By	Created On	Date Submitted
Filed	Stephanie Fowler	10/03/2008	10/03/2008

SERFF Tracking Number: *BNLA-125806070* *State:* *Arkansas*
Filing Company: *Bankers Life and Casualty Company* *State Tracking Number:* *40204*
Company Tracking Number:
TOI: *LTC06 Long Term Care - Other* *Sub-TOI:* *LTC06.000 Long Term Care - Other*
Product Name: *Long Term Care*
Project Name/Number: *Lead Generating LTC Partnership Letter/5202*

Disposition

Disposition Date: 10/03/2008

Implementation Date:

Status: Filed

Comment:

Rate data does NOT apply to filing.

SERFF Tracking Number: BNLA-125806070 State: Arkansas
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 TOI: LTC06 Long Term Care - Other Sub-TOI: LTC06.000 Long Term Care - Other
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Form Schedule

Lead Form Number: 5202

Review Status	Form Number	Form Type	Form Name	Action	Action Specific Data	Readability	Attachment
Filed	5202-WC	Advertising	Eligibility Notice For Sate Residents	Initial		0	5202-WC.pdf
Filed	5202-WC-1	Advertising	Reply Card	Initial		0	5202-WC.pdf
Filed	BE-5202	Advertising	Envelope	Initial		0	BE-5202.pdf

ELIGIBILITY NOTICE FOR STATE RESIDENTS

FROM: ATTN: [STATE NAME] RESIDENTS
Bankers Life and Casualty Company
600 West Chicago Ave
Chicago, IL 60654-2800

TO: Information Registration I.D. # 123456789
Mr. John Doe
123 Main St.
Apt. 123
Anytown, US 12345-6789

POSTMARK DATE
Call or Mail request by:



[JANUARY 04 2008]

Dear [Sample A. Sample]:

This letter is to advise you that as a [state] resident, you are **NOW ELIGIBLE** for government assistance for **protecting your assets** under a new state sponsored program.

[state] residents can now receive Medicaid payments for long-term care services **without having to first SPEND DOWN their own savings to qualify.** This program is open to state residents only.

A **FREE INFORMATION GUIDE** is available to you as part of our statewide awareness program.

PLEASE REQUEST THE GUIDE FOR PROGRAM BENEFIT INFORMATION.

The guidebook provides critical information to help you answer:

- Who will take care of me in the event of an accident or illness?
- Can I get the care I need without sacrificing everything I've worked for?
- How can I make my own decisions about my future?
- How is the state helping people who plan for their futures?

THIS INFORMATION IS FREE TO STATE RESIDENTS WHO REQUEST IT:

- Call the Information Request Line toll-free: [1-800-XXX-XXXX]
- Or detach and mail the form below (postage has been paid)

5202-WC

(over please)

5202

FREE INFORMATION REQUEST for STATE RESIDENTS

Complete, detach & mail this request card to receive your free information

If address is NOT correct, please correct it on the back.

[State] Resident:

Mr. John Doe
123 Main St.
Anytown, US 12345-6789

Phone #: _____

Date of Birth: ____/____/____

Information Registration I.D. #

BARCODE NUMBER

Please mail on/before:

JAN 04 2008

FOR STATE RESIDENTS ONLY:

FREE INFORMATION GUIDE

- Yes!** Send me information on the new state program that helps residents pay long-term care bills and protect their savings.

Line 1
Booklet Fulfillment Center
PO Box 224907
Dallas, TX 75222-9729
Postal Barcode

An Agent may contact you.

Barcode Here

5202-WC-1

This information is distributed as a service free of charge and with no obligation by Bankers Life and Casualty Company to state residents who request it by phone or by mail.

Correct any change in address here:

ELIGIBILITY NOTICE FOR STATE RESIDENTS

FROM: ATTN: [STATE NAME] RESIDENTS
Bankers Life and Casualty Company
600 West Chicago Ave
Chicago, IL 60654-2800

TO: Information Registration I.D. # 123456789
Mr. John Doe
123 Main St.
Apt. 123
Anytown, US 12345-6789
|||||

POSTMARK DATE
Call or Mail request by:

[JANUARY 04 2008]

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PRSRT STD
U.S. POSTAGE
PAID
Bankers Life
and Casualty

[Redacted area]

NOTICE FOR STATE RESIDENTS
Residents NOW ELIGIBLE for
Long-Term Care Partnership Program

[Redacted area]

Mail request by:

[Redacted area]

BE-5202

(80)

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