

SERFF Tracking Number: UNAM-125882339 *State:* Arkansas
Filing Company: American Pioneer Life Insurance Company *State Tracking Number:* 40740
Company Tracking Number: FNL PRE 2008 AR
TOI: MS021 Individual Medicare Supplement - Pre-Standardized *Sub-TOI:* MS021.000 Medicare Supplement - Pre-Standardized
Product Name: Pre-Standard Medicare Supplement
Project Name/Number: FNL PRE 2008 AR/MS-182

Filing at a Glance

Company: American Pioneer Life Insurance Company

Product Name: Pre-Standard Medicare Supplement SERFF Tr Num: UNAM-125882339 State: ArkansasLH

TOI: MS021 Individual Medicare Supplement - Pre-Standardized SERFF Status: Closed State Tr Num: 40740

Sub-TOI: MS021.000 Medicare Supplement - Pre-Standardized Co Tr Num: FNL PRE 2008 AR State Status: Approved-Closed

Filing Type: Rate Co Status: Reviewer(s): Stephanie Fowler
 Authors: Carmen Boyd, Trudi Goldenberg Disposition Date: 11/07/2008
 Date Submitted: 10/31/2008 Disposition Status: Approved-Closed

Implementation Date Requested: 12/15/2008

Implementation Date:

State Filing Description:

General Information

Project Name: FNL PRE 2008 AR

Project Number: MS-182

Requested Filing Mode: Review & Approval

Explanation for Combination/Other:

Submission Type: New Submission

Overall Rate Impact: 11%

Filing Status Changed: 11/07/2008

State Status Changed: 11/07/2008

Corresponding Filing Tracking Number: FNL PRE 2008 AR

Filing Description:

FNL – American Pioneer Life Insurance Company

NAIC # 60763

Request for Rate Revision – Individual Pre-Standard Medicare Supplement

Status of Filing in Domicile: Authorized

Date Approved in Domicile: 02/01/2008

Domicile Status Comments:

Market Type: Individual

Group Market Size:

Group Market Type:

Deemer Date:

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Forms: MS-182 & MS-90

Enclosed for your review and approval is a rate revision request for the above referenced forms. American Pioneer Life Insurance Company is requesting an 11% increase on all Pre-Standardized Medicare Supplement plans.

If you have any questions or require additional information, please contact me at 1-800-538-1053, ext. 8278, by email at tgoldenberg@uafc.com or by fax at 407-995-8023.

Company and Contact

Filing Contact Information

Trudi Goldenberg, tgoldenberg@uafc.com
 P.O. Box 958465 (407) 628-1776 [Phone]
 Lake Mary, FL 32795-8465

Filing Company Information

American Pioneer Life Insurance Company CoCode: 60763 State of Domicile: Florida
 1001 Heathrow Park Lane Group Code: 953 Company Type:
 Suite 5001
 Lake Mary, FL 32746 Group Name: State ID Number:
 (407) 995-8000 ext. [Phone] FEIN Number: 59-0935083

Filing Fees

Fee Required? Yes
 Fee Amount: \$50.00
 Retaliatory? No
 Fee Explanation: 50 Pre-Standard Rate Filing Fee
 Per Company: No

COMPANY	AMOUNT	DATE PROCESSED	TRANSACTION #
American Pioneer Life Insurance Company	\$50.00	10/31/2008	23641453

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Correspondence Summary

Dispositions

Status	Created By	Created On	Date Submitted
Approved-Closed	Rosalind Minor (FM)	11/07/2008	11/07/2008

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Disposition

Disposition Date: 11/07/2008

Implementation Date:

Status: Approved-Closed

Comment: We have approved a 11% rate increase on the pre-standardized Medicare Supplement forms MS-182, et al. The approval is subject to the following:

Increase will not be given more frequently than once in a twelve-month period.

Company Name:	Overall % Rate Impact:	Written Premium Change for this Program:	# of Policy Holders Affected for this Program:	Premium:	Maximum % Change (where required):	Minimum % Change (where required):	Overall % Indicated Change:
American Pioneer Life Insurance Company	11.000%	\$721	2	\$6,552	11.000%	11.000%	11.000%

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Item Type	Item Name	Item Status	Public Access
Supporting Document	Health - Actuarial Justification	Approved-Closed	No
Rate	Current and Requested Rates	Approved-Closed	Yes
Rate	Rate History	Approved-Closed	Yes

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Rate Information

Rate data applies to filing.

Filing Method: SERFF
 Rate Change Type: Increase
 Overall Percentage of Last Rate Revision: 9.000%
 Effective Date of Last Rate Revision: 12/15/2007
 Filing Method of Last Filing: SERFF

Company Rate Information

Company Name:	Overall % Indicated Change:	Overall % Rate Impact:	Written Premium Change for this Program:	# of Policy Holders Affected for this Program:	Premium:	Maximum % Change (where required):	Minimum % Change (where required):
American Pioneer Life Insurance Company	11.000%	11.000%	\$721	2	\$6,552	11.000%	11.000%

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Rate/Rule Schedule

Review Status:	Document Name:	Affected Form Numbers: (Separated with commas)	Rate Action:	Rate Action Information:	Attachments
Approved-Closed	Current and Requested Rates	MS-182, MS-90	New		AR Pre Std Rates.pdf
Approved-Closed	Rate History	MS-182, MS-90	New		Ex B AR Rate History.pdf

American Pioneer Life Insurance Company

Actuarial Justification for Individual A&H Rate Increase
FNL Pre-Standardized Medicare Supplement Forms MS-182, et al

Current and Requested Premiums

Issue State	Policy#	FORM	Current Prem	Req %	Proposed Prem
AR	018013940	MS 90	3,276	11%	3,636
AR	010085257	MS 90	3,276	11%	3,636

Exhibit B
American Pioneer Life Insurance Company
Pre-Standardized Medicare Supplement
Rate Increase History

Arkansas

Rate Increase History - Post 1996

<u>Policy Form</u>	<u>Options</u>	<u>Effective Date</u>	<u>Rate Increase</u>
All Forms	All Options	12/15/2007	9.0%
		12/15/2006	9.0%
		12/15/2005	9.0%
		12/15/2004	9.0%
		9/15/2003	9.0%
		9/15/2002	22.5%
		5/1/2001	19.0%
		4/1/2000	19.0%
		2/1/1999	23.0%

Rate Increase History - Prior to 1997

<u>Policy Form</u>	<u>Options</u>	<u>Effective Date</u>	<u>Rate Increase</u>
MS 182	All Options	12/1/1989	15.0%
		Option 1	36.0%
		Option 2	42.0%
		Options 3, 4, 5 & 6	64.0%
		All Options	25.0%
MS 183	All Options	12/1/1989	21.0%
		Option 1	27.0%
		Option 2	32.0%
		Options 3, 4, 5 & 6	54.0%
		All Options	25.0%
MS 189 (1989 Issue)	Option 1	12/1/1990	13.0%
		Option 2	18.0%
		Options 3, 4, 5 & 6	36.0%
		All Options	25.0%
MS 189 (1990 Issue)	All Options	11/1/1992	15.0%
MS 90 (1990 Issue)	All Options	11/1/1992	15.0%
Various Policy Forms - (GFL/FFL Issues)		11/1/1993	17.0%