

SERFF Tracking Number: ICCI-125919755 State: Arkansas
 Filing Company: Standard Security Life Insurance Company of New York State Tracking Number: 40956
 Company Tracking Number: A001B (5/08)
 TOI: H21 Health - Other Sub-TOI: H21.000 Health - Other
 Product Name: Assumption Certificates
 Project Name/Number: /

Filing at a Glance

Company: Standard Security Life Insurance Company of New York

Product Name: Assumption Certificates	SERFF Tr Num: ICCI-125919755	State: ArkansasLH
TOI: H21 Health - Other	SERFF Status: Closed	State Tr Num: 40956
Sub-TOI: H21.000 Health - Other	Co Tr Num: A001B (5/08)	State Status: Approved-Closed
Filing Type: Form	Co Status:	Reviewer(s): Rosalind Minor
	Author: Lisa Mitchell	Disposition Date: 12/02/2008
	Date Submitted: 11/25/2008	Disposition Status: Approved-Closed
Implementation Date Requested:		Implementation Date:

State Filing Description:

General Information

Project Name:	Status of Filing in Domicile:
Project Number:	Date Approved in Domicile:
Requested Filing Mode:	Domicile Status Comments:
Explanation for Combination/Other:	Market Type:
Submission Type: New Submission	Group Market Size:
Overall Rate Impact:	Group Market Type:
Filing Status Changed: 12/02/2008	
State Status Changed: 12/02/2008	Deemer Date:
Corresponding Filing Tracking Number:	

Filing Description:

RE: Standard Security Life Insurance Company of New York

NAIC #69078

Certificates of Assumption – A001B (5/08) and A001C (5/08)

SERFF Tracking Number: ICCI-125919755 State: Arkansas
Filing Company: Standard Security Life Insurance Company of New York State Tracking Number: 40956
Company Tracking Number: A001B (5/08)
TOI: H21 Health - Other Sub-TOI: H21.000 Health - Other
Product Name: Assumption Certificates
Project Name/Number: /

I have been authorized by Standard Security Life Insurance Company of New York ("Standard Security") to correspond with you, on their behalf, regarding the filing of the new forms referenced above. The authorization letter from Standard Security is attached for your records.

Standard Security, a New York Corporation, and BEST Life and Health Insurance Company ("BEST"), a Texas Corporation, have entered into an assumption reinsurance agreement under which Standard Security will assume the responsibilities of BEST with regard to the insurance policies and certificates providing primarily individual major medical market insurance. The effective date of assumption is March 1, 2009. A Certificate of Assumption explaining this change will be forwarded to all Certificateholders. There are 15 Certificateholders, as of November 24, 2008, issued coverage in Arkansas with \$43,177.56 in annualized premium, affected by this change.

The assumption reinsurance transaction was approved by New York, the domiciliary state of Standard Security, on October 14, 2008. The assumption reinsurance transaction was approved by Texas, the domiciliary state of BEST, on November 13, 2008. A copy of the New York and Texas approvals are attached hereto.

Enclosed for your approval are two Certificates of Assumption: Form A001B (5/08) and A001C (5/08).

Inasmuch as the transaction has been approved by both domiciliary states, we are asking only for approval of the two Certificate of Assumption forms.

We will appreciate your expedited review and look forward to your early approval. Please contact me at 815/316-6716 or by email at edking@inscompliance.com in event you have any questions or wish to bring additional information to our attention.

Thank you for your consideration.

Company and Contact

Filing Contact Information

(This filing was made by a third party - insurancecomplianceconsultantsinc)

Lisa Mitchell, Authorized Representative lisamitchell@inscompliance.com

SERFF Tracking Number: ICCL-125919755 State: Arkansas
Filing Company: Standard Security Life Insurance Company of New York State Tracking Number: 40956
Company Tracking Number: A001B (5/08)
TOI: H21 Health - Other Sub-TOI: H21.000 Health - Other
Product Name: Assumption Certificates
Project Name/Number: /

519 Colman Center Drive (815) 316-6718 [Phone]
Rockford, IL 61108 (815) 316-6720[FAX]

Filing Company Information

Standard Security Life Insurance Company of New York CoCode: 69078 State of Domicile: New York
485 Madison Avenue, 14th Floor Group Code: Company Type:
New York, NY 10022 Group Name: State ID Number:
(212) 355-4141 ext. [Phone] FEIN Number: 13-5679267

SERFF Tracking Number: ICCI-125919755 State: Arkansas
Filing Company: Standard Security Life Insurance Company of New York State Tracking Number: 40956
Company Tracking Number: A001B (5/08)
TOI: H21 Health - Other Sub-TOI: H21.000 Health - Other
Product Name: Assumption Certificates
Project Name/Number: /

Filing Fees

Fee Required? Yes
Fee Amount: \$40.00
Retaliatory? No
Fee Explanation: 20 per form
Per Company: No

COMPANY	AMOUNT	DATE PROCESSED	TRANSACTION #
Standard Security Life Insurance Company of New York	\$40.00	11/25/2008	24153373

SERFF Tracking Number: ICCL-125919755 State: Arkansas
 Filing Company: Standard Security Life Insurance Company of New York State Tracking Number: 40956
 Company Tracking Number: A001B (5/08)
 TOI: H21 Health - Other Sub-TOI: H21.000 Health - Other
 Product Name: Assumption Certificates
 Project Name/Number: /

Correspondence Summary

Dispositions

Status	Created By	Created On	Date Submitted
Approved-Closed	Rosalind Minor	12/02/2008	12/02/2008

Objection Letters and Response Letters

Objection Letters				Response Letters		
Status	Created By	Created On	Date Submitted	Responded By	Created On	Date Submitted
Pending Industry Response	Rosalind Minor	12/01/2008	12/01/2008	Ann Collins	12/01/2008	12/01/2008
Pending Industry Response	Rosalind Minor	11/26/2008	11/26/2008	Ann Collins	11/26/2008	11/26/2008

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TOI: H21 Health - Other Sub-TOI: H21.000 Health - Other
Product Name: Assumption Certificates
Project Name/Number: /

Disposition

Disposition Date: 12/02/2008

Implementation Date:

Status: Approved-Closed

Comment:

Rate data does NOT apply to filing.

SERFF Tracking Number: ICCI-125919755 State: Arkansas
 Filing Company: Standard Security Life Insurance Company of New York State Tracking Number: 40956
 Company Tracking Number: A001B (5/08)
 TOI: H21 Health - Other Sub-TOI: H21.000 Health - Other
 Product Name: Assumption Certificates
 Project Name/Number: /

Item Type	Item Name	Item Status	Public Access
Supporting Document	Certification/Notice	Approved-Closed	Yes
Supporting Document	Application	Approved-Closed	Yes
Supporting Document	Health - Actuarial Justification	Approved-Closed	No
Supporting Document	Outline of Coverage	Approved-Closed	Yes
Supporting Document	SSL Approval Letters	Approved-Closed	Yes
Supporting Document	SSL Authorization Letter	Approved-Closed	Yes
Form (revised)	Certificate of Assumption	Approved-Closed	Yes
Form	Certificate of Assumption	Replaced	Yes
Form	Certificate of Assumption	Replaced	Yes
Form (revised)	Certificate of Assumption	Approved-Closed	Yes
Form	Certificate of Assumption	Replaced	Yes
Form	Certificate of Assumption	Replaced	Yes

SERFF Tracking Number: ICCI-125919755 State: Arkansas
Filing Company: Standard Security Life Insurance Company of New York State Tracking Number: 40956
Company Tracking Number: A001B (5/08)
TOI: H21 Health - Other Sub-TOI: H21.000 Health - Other
Product Name: Assumption Certificates
Project Name/Number: /

Objection Letter

Objection Letter Status Pending Industry Response
Objection Letter Date 12/01/2008
Submitted Date 12/01/2008

Respond By Date

Dear Lisa Mitchell,

This will acknowledge receipt of the captioned filing.

Objection 1

- Certificate of Assumption (Form)
- Certificate of Assumption (Form)

Comment: The address and telephone number which you have for the Arkansas Insurance Department is incorrect.
Please change to read:

1200 West Third Street
Little Rock, AR 72201-1904

(501)371-2640

Please feel free to contact me if you have questions.

Sincerely,

Rosalind Minor

Response Letter

Response Letter Status Submitted to State
Response Letter Date 12/01/2008
Submitted Date 12/01/2008

Dear Rosalind Minor,

Comments:

Response 1

SERFF Tracking Number: ICCI-125919755 State: Arkansas
 Filing Company: Standard Security Life Insurance Company of New York State Tracking Number: 40956
 Company Tracking Number: A001B (5/08)
 TOI: H21 Health - Other Sub-TOI: H21.000 Health - Other
 Product Name: Assumption Certificates
 Project Name/Number: /

Comments: Please find attached revised assumption certificates with the correct AR address.

If you have any questions, please let me know. Thank you.

Related Objection 1

Applies To:

- Certificate of Assumption (Form)
- Certificate of Assumption (Form)

Comment:

The address and telephone number which you have for the Arkansas Insurance Department is incorrect. Please change to read:

1200 West Third Street
 Little Rock, AR 72201-1904

(501)371-2640

Changed Items:

No Supporting Documents changed.

Form Schedule Item Changes

Form Name	Form Number	Edition Date	Form Type	Action	Action Specific Data	Readability Score	Attach Document
Certificate of Assumption	A001B-AR (5/08)		Certificate Amendment, Insert Page, Endorsement or Rider	Initial		0	AR Form Number A001B (5-08) 12-1-08.pdf

Previous Version

Certificate of Assumption	A001B-AR (5/08)		Certificate Amendment, Insert Page, Endorsement or Rider	Initial		0	AR Form Number A001B (5-08) no redline.pdf
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SERFF Tracking Number: ICCI-125919755 State: Arkansas
 Filing Company: Standard Security Life Insurance Company of New York State Tracking Number: 40956
 Company Tracking Number: A001B (5/08)
 TOI: H21 Health - Other Sub-TOI: H21.000 Health - Other
 Product Name: Assumption Certificates
 Project Name/Number: /

<i>Certificate of Assumption</i>	A001B (5/08)	<i>Certificate Amendment, Initial Insert Page, Endorsement or Rider</i>	0	Form Number A001B (5-08).pdf
<i>Certificate of Assumption</i>	A001C-AR (5/08)	<i>Certificate Amendment, Initial Insert Page, Endorsement or Rider</i>	0	AR Form Number A001C (5-08) 12-1-08.pdf
Previous Version				
<i>Certificate of Assumption</i>	A001C-AR (5/08)	<i>Certificate Amendment, Initial Insert Page, Endorsement or Rider</i>	0	AR Form Number A001C (5-08) no redline.pdf
<i>Certificate of Assumption</i>	A001C (5/08)	<i>Certificate Amendment, Initial Insert Page, Endorsement or Rider</i>	0	Form Number A001C (5-08).pdf

SERFF Tracking Number: ICCI-125919755 State: Arkansas
Filing Company: Standard Security Life Insurance Company of New York State Tracking Number: 40956
Company Tracking Number: A001B (5/08)
TOI: H21 Health - Other Sub-TOI: H21.000 Health - Other
Product Name: Assumption Certificates
Project Name/Number: /

Objection Letter

Objection Letter Status Pending Industry Response
Objection Letter Date 11/26/2008
Submitted Date 11/26/2008

Respond By Date

Dear Lisa Mitchell,

This will acknowledge receipt of the captioned filing.

Objection 1

- Certificate of Assumption (Form)
- Certificate of Assumption (Form)

Comment: The assumption certificates should contain all information outlined under Rule 55, Section 6.

Please feel free to contact me if you have questions.

Sincerely,

Rosalind Minor

Response Letter

Response Letter Status Submitted to State
Response Letter Date 11/26/2008
Submitted Date 11/26/2008

Dear Rosalind Minor,

Comments:

Response 1

Comments: Please find attached revised assumption certificates that contain the information outlined under Rule 55, Section 6.

If you have any further questions, please let me know. Thanks.

Related Objection 1

Applies To:

SERFF Tracking Number: ICCI-125919755 State: Arkansas
 Filing Company: Standard Security Life Insurance Company of New York State Tracking Number: 40956
 Company Tracking Number: A001B (5/08)
 TOI: H21 Health - Other Sub-TOI: H21.000 Health - Other
 Product Name: Assumption Certificates
 Project Name/Number: /

- Certificate of Assumption (Form)
- Certificate of Assumption (Form)

Comment:

The assumption certificates should contain all information outlined under Rule 55, Section 6.

Changed Items:

No Supporting Documents changed.

Form Schedule Item Changes

Form Name	Form Number	Edition Date	Form Type	Action	Action Specific Data	Readability Score	Attach Document
<i>Certificate of Assumption</i>	<i>A001B-AR (5/08)</i>		<i>Certificate Amendment, Insert Page, Endorsement or Rider</i>	<i>Initial</i>		<i>0</i>	AR Form Number A001B (5-08) no redline.pdf
Previous Version							
<i>Certificate of Assumption</i>	<i>A001B (5/08)</i>		<i>Certificate Amendment, Insert Page, Endorsement or Rider</i>	<i>Initial</i>		<i>0</i>	Form Number A001B (5-08).pdf
<i>Certificate of Assumption</i>	<i>A001C-AR (5/08)</i>		<i>Certificate Amendment, Insert Page, Endorsement or Rider</i>	<i>Initial</i>		<i>0</i>	AR Form Number A001C (5-08) no redline.pdf
Previous Version							
<i>Certificate of Assumption</i>	<i>A001C (5/08)</i>		<i>Certificate Amendment, Insert Page, Endorsement or Rider</i>	<i>Initial</i>		<i>0</i>	Form Number A001C (5-08).pdf

SERFF Tracking Number: ICCI-125919755 State: Arkansas
 Filing Company: Standard Security Life Insurance Company of New York State Tracking Number: 40956
 Company Tracking Number: A001B (5/08)
 TOI: H21 Health - Other Sub-TOI: H21.000 Health - Other
 Product Name: Assumption Certificates
 Project Name/Number: /

Form Schedule

Lead Form Number: A001B (5/08)

Review Status	Form Number	Form Type	Form Name	Action	Action Specific Data	Readability	Attachment
Approved-Closed	A001B-AR (5/08)	Certificate of Amendment, Insert Page, Endorsement or Rider	Certificate of Assumption	Initial		0	AR Form Number A001B (5-08) 12-1-08.pdf
Approved-Closed	A001C-AR (5/08)	Certificate of Amendment, Insert Page, Endorsement or Rider	Certificate of Assumption	Initial		0	AR Form Number A001C (5-08) 12-1-08.pdf

**STANDARD SECURITY LIFE INSURANCE COMPANY
OF NEW YORK**

485 Madison Avenue
New York, New York 10022

Policyholder:

Policy Number:

Effective Dates of Assumption: [dates] in [states]

CERTIFICATE OF ASSUMPTION

This will certify that Standard Security Life Insurance Company of New York (STANDARD SECURITY) does hereby assume all rights, liabilities and obligations under the policy of insurance to which this Certificate of Assumption is attached, such policy heretofore issued by BEST Life and Health Insurance Company (BEST Life), 2505 McCabe Way, Irvine, CA 92614.

This means that STANDARD SECURITY is substituted for BEST Life in all matters and documents relating to claims incurred on and after the Effective Dates of Assumption, including the rights, liabilities and obligations originally held by BEST Life under the policy. STANDARD SECURITY will pay all policy benefits for claims incurred on and after the Effective Dates of Assumption in strict accordance with the terms of the policy.

All premiums due for such assumed rights, liabilities and obligations after the Effective Dates of Assumption are to be paid to STANDARD SECURITY in accordance with the current method for such payment.

This Certificate of Assumption forms a part of the group insurance policy. Please keep it with the group insurance documents.

If you have any further questions about this notice, you may contact Insurers Administrative Corporation, administrator for Standard Security.

Insurers Administrative Corporation
P.O. Box 37457
Phoenix, AZ 85069-7457
Toll Free Number: [866-272-8553]
Facsimile Number: [602-678-4247]

You may contact the Arkansas Insurance Department for further information regarding the financial condition of STANDARD SECURITY.

Arkansas Department of Insurance
1200 West Third Street
Little Rock, AR 72201-1904
(501)371-2640

IN WITNESS WHEREOF, this instrument has been signed on behalf of STANDARD SECURITY.



Rachel Lipari
President



Adam Vandervoort
Secretary

**STANDARD SECURITY LIFE INSURANCE COMPANY
OF NEW YORK**

485 Madison Avenue
New York, New York 10022

Policyholder: []

Policy Number: []

Effective Date of Assumption: [date]
12:01 a.m.

CERTIFICATE OF ASSUMPTION

This will certify that Standard Security Life Insurance Company of New York (STANDARD SECURITY) does hereby assume all rights, liabilities and obligations under the policy of insurance under which your group insurance certificate was issued, such policy heretofore issued by BEST Life and Health Insurance Company (BEST Life), 2505 McCabe Way, Irvine, CA 92614.

This means that STANDARD SECURITY is substituted for BEST Life in all matters and documents relating to claims incurred on and after the Effective Date of Assumption, including the rights, liabilities and obligations originally held by BEST Life under the policy. STANDARD SECURITY will pay all policy benefits for claims incurred on and after the Effective Date of Assumption in strict accordance with the terms of the policy.

Your rights, liabilities and obligations remain in full force and effect; your rights and obligations run to, and your rights are enforceable against STANDARD SECURITY, and not BEST Life with respect to claims incurred on and after the Effective Date of Assumption. Claims incurred prior to the Effective Date of Assumption, whether or not reported by that date, remain the obligation of BEST Life.

All premiums due after the Effective Date of Assumption are to be paid to STANDARD SECURITY in accordance with the current method for such payment.

This Certificate of Assumption forms a part of your group insurance certificate. Please keep it with your group insurance documents.

If you have any further questions about this notice, you may contact Insurers Administrative Corporation, administrator for Standard Security.

Insurers Administrative Corporation
P.O. Box 37457
Phoenix, AZ 85069-7457
Toll Free Number: [866-272-8553]
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You may contact the Arkansas Insurance Department for further information regarding the financial condition of STANDARD SECURITY.

Arkansas Department of Insurance
1200 West Third Street
Little Rock, AR 72201-1904
(501)371-2640

IN WITNESS WHEREOF, this instrument has been signed on behalf of STANDARD SECURITY.



Rachel Lipari
President



Adam Vandervoort
Secretary

SERFF Tracking Number: ICCI-125919755 State: Arkansas
 Filing Company: Standard Security Life Insurance Company of New York State Tracking Number: 40956
 Company Tracking Number: A001B (5/08)
 TOI: H21 Health - Other Sub-TOI: H21.000 Health - Other
 Product Name: Assumption Certificates
 Project Name/Number: /

Supporting Document Schedules

Satisfied -Name: Certification/Notice	Review Status: Approved-Closed	12/02/2008
Comments:		
Attachments:		
Assumption Cert of Comp. with Rule 19.pdf		
Assumption Readability.pdf		
Bypassed -Name: Application	Review Status: Approved-Closed	12/02/2008
Bypass Reason: not applicable		
Comments:		
Bypassed -Name: Health - Actuarial Justification	Review Status: Approved-Closed	12/02/2008
Bypass Reason: not applicable		
Comments:		
Bypassed -Name: Outline of Coverage	Review Status: Approved-Closed	12/02/2008
Bypass Reason: not applicable		
Comments:		
Satisfied -Name: SSL Approval Letters	Review Status: Approved-Closed	12/02/2008
Comments:		
Attachment:		
Approval Letters.pdf		
Satisfied -Name: SSL Authorization Letter	Review Status: Approved-Closed	12/02/2008
Comments:		

**Certificate of Compliance with
Arkansas Rule and Regulation 19**

Insurer: Standard Security Life Insurance Company of New York

Form Number(s): A001B (5/08) and A001C (5/08)

I hereby certify that the filing above meets all applicable Arkansas requirements including the requirement of Rule and Regulation 19.

A handwritten signature in cursive script, reading "Rachel Lipari", is written over a vertical red line.

Signature of Company Officer

Rachel Lipari

Name

President

Title

November 25, 2008

Date

FLESCH READING EASE TEST CERTIFICATION

This is to certify that the forms listed below are in compliance with readability requirements of the Flesch Reading Ease Test, and the requirements of your state.

The Flesch Test was applied to the forms in their entirety, except that company name and address, form numbers, titles, captions, subcaptions, schedules, tables, defined words, and text required by law or regulation were excluded.

The Flesch Reading Ease scores are as follows:

<u>FORM NUMBERS</u>	<u>FLESCH SCORE</u>
A001B (5/08)	44
A001C (5/08)	46

STANDARD SECURITY LIFE INSURANCE COMPANY OF NEW YORK



Rachel Lipari, President

Date: **November 25, 2008**



STATE OF NEW YORK
INSURANCE DEPARTMENT
25 BEAVER STREET
NEW YORK, NEW YORK 10004



David A. Paterson
Governor

Eric R. Dinallo
Superintendent

October 14, 2008

Ann Collins, FMLI, AIRC, ACS
Insurance Compliance Consultant, Inc.
519 Colman Center Drive
Rockford, IL 61108

Re: Reinsurance and Assumption Agreement between BEST Life and Health Insurance Company ("BEST") and Standard Security Life Insurance Company of New York ("Standard Security") - Our File Number 40576

Dear Ms. Collins:

We have completed our review of the captioned agreement that was submitted to the Department in your letter dated July 1, 2008 on behalf of Standard Security. The agreement was submitted pursuant to Section 1308(f)(2) of the New York Insurance Law.

Pursuant to the coinsurance and assumption agreement, effective March 1, 2009, BEST will cede to Standard Security on a 100% quota share basis, the responsibilities with regards to insurance policies and certificates providing primarily individual market major medical insurance to eligible members and their dependents of the Consumer Benefits of America Association. BEST will subsequently novate this block of business to Standard Security. Policyholders who choose not to transfer their policies will continue to be policyholders of BEST and 100% coinsured by Standard Security.

Based upon our review of the submission and in reliance upon the facts and representations contained therein, the subject reinsurance and assumption agreement is hereby approved, effective March 1, 2009, pursuant to Section 1308(f)(2) of the New York Insurance Law. To complete our file, kindly furnish an executed copy of the agreement to the Life Bureau. Please include the captioned file number on all future correspondence pertaining to the subject agreement. In addition, submit copies of final assumption certificates to the Life Bureau's Albany policy forms filing bureau.

Very truly yours,

Eric R. Dinallo
Superintendent of Insurance

By:

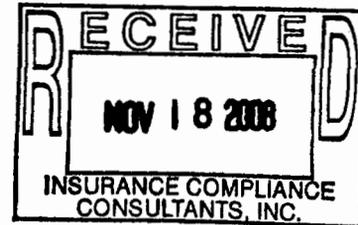
Gerard J. Connelly
Supervising Insurance Examiner
Life Bureau



Texas Department of Insurance

Financial, Company Licensing & Registration, Mail Code 305-2C
333 Guadalupe • P. O. Box 149104, Austin, Texas 78714-9104
512-322-3507 telephone • 512-322-3550 fax • www.tdi.state.tx.us

November 13, 2008



Ann Collins
Insurance Compliance Consultants, Inc.
519 Colman Center Drive
Rockford, Illinois 61108

RE: BEST LIFE AND HEALTH INSURANCE COMPANY
Partial Reinsurance by Standard Security Life Insurance Company of New
York

Dear Ms. Collins:

This letter evidences the submission and review of the captioned transaction pursuant to the provisions of TEX. INS. CODE art. 3.10. The effective date of such agreement is March 1, 2009. The Assumption Certificate Form No. A001B(5/08), along with Form A001C(5/08), was approved by the Life/Health Division. The Commissioner of Insurance will take no further action on this transaction at this time.

You should have received a copy of the approved Assumption Certificate from the Life/Health Division. If you have not, please contact that division at (512) 322-3409.

Very truly yours,

A handwritten signature in black ink, appearing to read "Jeff Hunt", enclosed within a hand-drawn oval.

Jeff Hunt
Admission's Officer

JH/dc



January 1, 2008

Mr. Brian Camling
President
Insurance Compliance Consultants, Inc.
519 Colman Center Dr.
Rockford, IL 61108

Dear Mr. Camling:

Please accept this letter as written confirmation that Insurance Compliance Consultants, Inc., has authority to file the attached form(s) or a state specific variation of it, and to act on behalf of Standard Security Life Insurance Company of New York regarding such filings, in all jurisdictions where this form(s) or a state specific variation of it is being filed. Standard Security may withdraw this authorization at any time, by giving notice to Insurance Compliance Consultants.

Sincerely,

A handwritten signature in black ink, appearing to read "D. Kettig". The signature is fluid and cursive, with a large, sweeping flourish at the end.

David Kettig

SERFF Tracking Number: *ICCI-125919755* State: *Arkansas*
 Filing Company: *Standard Security Life Insurance Company of New York* State Tracking Number: *40956*
 Company Tracking Number: *A001B (5/08)*
 TOI: *H21 Health - Other* Sub-TOI: *H21.000 Health - Other*
 Product Name: *Assumption Certificates*
 Project Name/Number: */*

Superseded Attachments

Please note that all items on the following pages are items, which have been replaced by a newer version. The newest version is located with the appropriate schedule on previous pages. These items are in date order with most recent first.

Original Date:	Schedule	Document Name	Replaced Date	Attach Document
No original date	Form	Certificate of Assumption	11/26/2008	AR Form Number A001B (5-08) no redline.pdf
No original date	Form	Certificate of Assumption	11/25/2008	Form Number A001B (5-08).pdf
No original date	Form	Certificate of Assumption	11/26/2008	AR Form Number A001C (5-08) no redline.pdf
No original date	Form	Certificate of Assumption	11/25/2008	Form Number A001C (5-08).pdf

**STANDARD SECURITY LIFE INSURANCE COMPANY
OF NEW YORK**

485 Madison Avenue
New York, New York 10022

Policyholder:

Policy Number:

Effective Dates of Assumption: [dates] in [states]

CERTIFICATE OF ASSUMPTION

This will certify that Standard Security Life Insurance Company of New York (STANDARD SECURITY) does hereby assume all rights, liabilities and obligations under the policy of insurance to which this Certificate of Assumption is attached, such policy heretofore issued by BEST Life and Health Insurance Company (BEST Life), 2505 McCabe Way, Irvine, CA 92614.

This means that STANDARD SECURITY is substituted for BEST Life in all matters and documents relating to claims incurred on and after the Effective Dates of Assumption, including the rights, liabilities and obligations originally held by BEST Life under the policy. STANDARD SECURITY will pay all policy benefits for claims incurred on and after the Effective Dates of Assumption in strict accordance with the terms of the policy.

All premiums due for such assumed rights, liabilities and obligations after the Effective Dates of Assumption are to be paid to STANDARD SECURITY in accordance with the current method for such payment.

This Certificate of Assumption forms a part of the group insurance policy. Please keep it with the group insurance documents.

If you have any further questions about this notice, you may contact Insurers Administrative Corporation, administrator for Standard Security.

Insurers Administrative Corporation
P.O. Box 37457
Phoenix, AZ 85069-7457
Toll Free Number: [866-272-8553]
Facsimile Number: [602-678-4247]

You may contact the Arkansas Insurance Department for further information regarding the financial condition of STANDARD SECURITY.

Arkansas Department of Insurance
1123 South University, Suite 400
Little Rock, Arkansas 72204
(501) 686-2900

IN WITNESS WHEREOF, this instrument has been signed on behalf of STANDARD SECURITY.



Rachel Lipari
President



Adam Vandervoort
Secretary

**STANDARD SECURITY LIFE INSURANCE COMPANY
OF NEW YORK**

485 Madison Avenue
New York, New York 10022

Policyholder:

Policy Number:

Effective Dates of Assumption: [dates] in [states]

CERTIFICATE OF ASSUMPTION

This will certify that Standard Security Life Insurance Company of New York (STANDARD SECURITY) does hereby assume all rights, liabilities and obligations under the policy of insurance to which this Certificate of Assumption is attached, such policy heretofore issued by BEST Life and Health Insurance Company (BEST Life).

This means that STANDARD SECURITY is substituted for BEST Life in all matters and documents relating to claims incurred on and after the Effective Dates of Assumption, including the rights, liabilities and obligations originally held by BEST Life under the policy. STANDARD SECURITY will pay all policy benefits for claims incurred on and after the Effective Dates of Assumption in strict accordance with the terms of the policy.

All premiums due for such assumed rights, liabilities and obligations after the Effective Dates of Assumption are to be paid to STANDARD SECURITY in accordance with the current method for such payment.

This Certificate of Assumption forms a part of the group insurance policy. Please keep it with the group insurance documents.

IN WITNESS WHEREOF, this instrument has been signed on behalf of STANDARD SECURITY.



Rachel Lipari
President



Adam Vandervoort
Secretary

**STANDARD SECURITY LIFE INSURANCE COMPANY
OF NEW YORK**

485 Madison Avenue
New York, New York 10022

Policyholder: []

Policy Number: []

Effective Date of Assumption: [date]
12:01 a.m.

CERTIFICATE OF ASSUMPTION

This will certify that Standard Security Life Insurance Company of New York (STANDARD SECURITY) does hereby assume all rights, liabilities and obligations under the policy of insurance under which your group insurance certificate was issued, such policy heretofore issued by BEST Life and Health Insurance Company (BEST Life), 2505 McCabe Way, Irvine, CA 92614.

This means that STANDARD SECURITY is substituted for BEST Life in all matters and documents relating to claims incurred on and after the Effective Date of Assumption, including the rights, liabilities and obligations originally held by BEST Life under the policy. STANDARD SECURITY will pay all policy benefits for claims incurred on and after the Effective Date of Assumption in strict accordance with the terms of the policy.

Your rights, liabilities and obligations remain in full force and effect; your rights and obligations run to, and your rights are enforceable against STANDARD SECURITY, and not BEST Life with respect to claims incurred on and after the Effective Date of Assumption. Claims incurred prior to the Effective Date of Assumption, whether or not reported by that date, remain the obligation of BEST Life.

All premiums due after the Effective Date of Assumption are to be paid to STANDARD SECURITY in accordance with the current method for such payment.

This Certificate of Assumption forms a part of your group insurance certificate. Please keep it with your group insurance documents.

If you have any further questions about this notice, you may contact Insurers Administrative Corporation, administrator for Standard Security.

Insurers Administrative Corporation
P.O. Box 37457
Phoenix, AZ 85069-7457
Toll Free Number: [866-272-8553]
Facsimile Number: [602-678-4247]

You may contact the Arkansas Insurance Department for further information regarding the financial condition of STANDARD SECURITY.

Arkansas Department of Insurance
1123 South University, Suite 400
Little Rock, Arkansas 72204
(501) 686-2900

IN WITNESS WHEREOF, this instrument has been signed on behalf of STANDARD SECURITY.



Rachel Lipari
President



Adam Vandervoort
Secretary

**STANDARD SECURITY LIFE INSURANCE COMPANY
OF NEW YORK**

485 Madison Avenue
New York, New York 10022

Policyholder: []

Policy Number: []

Effective Date of Assumption: [date]
12:01 a.m.

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