

SERFF Tracking Number: MGCA-125611081 State: Arkansas
 Filing Company: Mid-West National Life Insurance Company of Tennessee State Tracking Number: 38720
 Company Tracking Number: MW-25885 (09/03)-IR 200804 AR MIDWEST 13296
 TOI: H151 Individual Health - Hospital/Surgical/Medical Expense Sub-TOI: H151.001 Health - Hospital/Surgical/Medical Expense
 Product Name: MW-25885 - Ambulatory Care
 Project Name/Number: /

Filing at a Glance

Company: Mid-West National Life Insurance Company of Tennessee
 Product Name: MW-25885 - Ambulatory Care SERFF Tr Num: MGCA-125611081 State: ArkansasLH
 TOI: H151 Individual Health - Hospital/Surgical/Medical Expense SERFF Status: Closed State Tr Num: 38720
 Sub-TOI: H151.001 Health - Hospital/Surgical/Medical Expense Co Tr Num: MW-25885 (09/03)-IR 200804 AR MIDWEST 13296 State Status: Approved-Closed
 Filing Type: Rate Co Status: Reviewer(s): Rosalind Minor
 Authors: EDS EDSSupport, Opal Disposition Date: 05/13/2008
 Autry, Jackie Horstmann, Sergei Mordovine, Aliya Panjwani, Yan Yuan, Virgil Meier, Eliseo Rodriguez, Charles Schneeberger
 Date Submitted: 04/15/2008 Disposition Status: Approved-Closed
 Implementation Date Requested: On Approval Implementation Date:
 State Filing Description:

General Information

Project Name: Status of Filing in Domicile: Not Filed
 Project Number: 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: 14.7% Group Market Type:
 Filing Status Changed: 05/13/2008
 State Status Changed: 05/13/2008 Deemer Date:
 Corresponding Filing Tracking Number:

SERFF Tracking Number: MGCA-125611081 State: Arkansas
Filing Company: Mid-West National Life Insurance Company of Tennessee State Tracking Number: 38720
Company Tracking Number: MW-25885 (09/03)-IR 200804 AR MIDWEST 13296
TOI: H151 Individual Health - Hospital/Surgical/Medical Expense Sub-TOI: H151.001 Health - Hospital/Surgical/Medical Expense
Product Name: MW-25885 - Ambulatory Care
Project Name/Number: /

Filing Description:

We are requesting a rate increase of 26.5% for plan codes AOAP39G and AOAB41G. All other plan codes will receive a 10% increase. This increase is to account for trend and nationwide experience.

Company and Contact

Filing Contact Information

Jackie Horstmann, jackie.horstmann@healthmarkets.com
Healthmarkets (817) 255-5377 [Phone]
North Richland Hills, TX 76180 (817) 255-8274[FAX]

Filing Company Information

Mid-West National Life Insurance Company of Tennessee CoCode: 66087 State of Domicile: Texas
9151 Boulevard 26 Group Code: 264 Company Type:
North Richland Hills, TX 76180 Group Name: State ID Number:
(817) 255-3100 ext. [Phone] FEIN Number: 62-0724538

Filing Fees

Fee Required? Yes
Fee Amount: \$50.00
Retaliatory? No
Fee Explanation:
Per Company: No

CHECK NUMBER	CHECK AMOUNT	CHECK DATE
374153	\$50.00	04/15/2008

SERFF Tracking Number: MGCA-125611081 State: Arkansas
 Filing Company: Mid-West National Life Insurance Company of Tennessee State Tracking Number: 38720
 Company Tracking Number: MW-25885 (09/03)-IR 200804 AR MIDWEST 13296
 TOI: H151 Individual Health - Hospital/Surgical/Medical Expense Sub-TOI: H151.001 Health - Hospital/Surgical/Medical Expense
 Product Name: MW-25885 - Ambulatory Care
 Project Name/Number: /

Correspondence Summary

Dispositions

Status	Created By	Created On	Date Submitted
Approved-Closed	Rosalind Minor	05/13/2008	05/13/2008

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	04/22/2008	04/22/2008	Eliseo Rodriguez	05/12/2008	05/12/2008

SERFF Tracking Number: MGCA-125611081 State: Arkansas
Filing Company: Mid-West National Life Insurance Company of Tennessee State Tracking Number: 38720
Company Tracking Number: MW-25885 (09/03)-IR 200804 AR MIDWEST 13296
TOI: H151 Individual Health - Hospital/Surgical/Medical Expense Sub-TOI: H151.001 Health - Hospital/Surgical/Medical Expense
Product Name: MW-25885 - Ambulatory Care
Project Name/Number: /

Disposition

Disposition Date: 05/13/2008

Implementation Date:

Status: Approved-Closed

Comment: We have approved a 15% level rate increase for plan codes AOAP39G and AOAB41G. All other plan codes will receive a 10% level rate increase. The approval is subject to the following conditions:

1. Rate increases will not be given prior to the first annual anniversary date of any policy.
2. After the first annual anniversary date of any policy, increases will not be given more frequently than once in a twelve (12) month period.
3. All increases in rates, other than change in age or an individual moving to another geographical area, must be submitted to our Department for approval

Rate data does NOT apply to filing.

SERFF Tracking Number: MGCA-125611081 State: Arkansas
 Filing Company: Mid-West National Life Insurance Company of Tennessee State Tracking Number: 38720
 Company Tracking Number: MW-25885 (09/03)-IR 200804 AR MIDWEST 13296
 TOI: H151 Individual Health - Hospital/Surgical/Medical Expense Sub-TOI: H151.001 Health - Hospital/Surgical/Medical Expense
 Product Name: MW-25885 - Ambulatory Care
 Project Name/Number: /

Item Type	Item Name	Item Status	Public Access
Supporting Document (revised)	Health - Actuarial Justification	Approved-Closed	No
Supporting Document	Health - Actuarial Justification	Withdrawn	No
Supporting Document	Supporting Documentation	Approved-Closed	No
Rate (revised)	Ambulatory Care Rates	Approved-Closed	No
Rate	Ambulatory Care Rates	Withdrawn	No

SERFF Tracking Number: MGCA-125611081 State: Arkansas
Filing Company: Mid-West National Life Insurance Company of Tennessee State Tracking Number: 38720
Company Tracking Number: MW-25885 (09/03)-IR 200804 AR MIDWEST 13296
TOI: H151 Individual Health - Hospital/Surgical/Medical Expense Sub-TOI: H151.001 Health - Hospital/Surgical/Medical Expense
Product Name: MW-25885 - Ambulatory Care
Project Name/Number: /

Objection Letter

Objection Letter Status Pending Industry Response
Objection Letter Date 04/22/2008
Submitted Date 04/22/2008

Respond By Date

Dear Jackie Horstmann,

This will acknowledge receipt of the captioned filing.

Objection 1

- Supporting Documentation (Supporting Document)

Comment: I have reviewed your request for a 26.5% rate increase on Form MW-25885 (09/03)-IR. Based on the nationwide experience, a 26.5% increase is not justified.

Our Department will consider a 15% rate increase. If you wish to accept the 15% rate increase, please notify in writing along with sending me the updated actuarial memo and rates.

Thank you for your understanding and cooperation in this matter.

Please feel free to contact me if you have questions.

Sincerely,

Rosalind Minor

Response Letter

Response Letter Status Submitted to State
Response Letter Date 05/12/2008
Submitted Date 05/12/2008

Dear Rosalind Minor,

Comments:

We are attaching updated rates and actuarial memorandum reflecting the 15% rate increase recommended.

SERFF Tracking Number: MGCA-125611081 State: Arkansas
 Filing Company: Mid-West National Life Insurance Company of Tennessee State Tracking Number: 38720
 Company Tracking Number: MW-25885 (09/03)-IR 200804 AR MIDWEST 13296
 TOI: H151 Individual Health - Hospital/Surgical/Medical Expense Sub-TOI: H151.001 Health - Hospital/Surgical/Medical Expense
 Product Name: MW-25885 - Ambulatory Care
 Project Name/Number: /

Response 1

Comments: Updated rate page and actuarial memorandum reflecting 15% rate increase.

Related Objection 1

Applies To:

- Supporting Documentation (Supporting Document)

Comment:

I have reviewed your request for a 26.5% rate increase on Form MW-25885 (09/03)-IR. Based on the nationwide experience, a 26.5% increase is not justified.

Our Department will consider a 15% rate increase. If you wish to accept the 15% rate increase, please notify in writing along with sending me the updated actuarial memo and rates.

Thank you for your understanding and cooperation in this matter.

Changed Items:

Supporting Document Schedule Item Changes

Satisfied -Name: Health - Actuarial Justification

Comment:

No Form Schedule items changed.

Rate/Rule Schedule Item Changes

Document Name: Affected Form Numbers: Rate Action: Rate Action Information: Attach Document:

Ambulatory Care MW-25885 Rates New Previous State Filing Number
 Percent Rate Change Request
 0

Previous Version

Ambulatory Care MW-25885 Rates New Previous State Filing Number
 Percent Rate Change Request
 0

SERFF Tracking Number: MGCA-125611081 State: Arkansas
Filing Company: Mid-West National Life Insurance Company of Tennessee State Tracking Number: 38720
Company Tracking Number: MW-25885 (09/03)-IR 200804 AR MIDWEST 13296
TOI: H151 Individual Health - Hospital/Surgical/Medical Expense Sub-TOI: H151.001 Health - Hospital/Surgical/Medical Expense
Product Name: MW-25885 - Ambulatory Care
Project Name/Number: /

Rate Information

Rate data does NOT apply to filing.

SERFF Tracking Number: MGCA-125611081 State: Arkansas
 Filing Company: Mid-West National Life Insurance Company of Tennessee State Tracking Number: 38720
 Company Tracking Number: MW-25885 (09/03)-IR 200804 AR MIDWEST 13296
 TOI: H151 Individual Health - Hospital/Surgical/Medical Expense Sub-TOI: H151.001 Health - Hospital/Surgical/Medical Expense
 Product Name: MW-25885 - Ambulatory Care
 Project Name/Number: /

Rate/Rule Schedule

Review Status:	Document Name:	Affected Form Numbers: (Separated with commas)	Rate Action:	Rate Action Information:	Attachments
Approved-Closed	Ambulatory Care Rates MW-25885		New		MW-25885 AR Rate Pages_Revised.pdf

SERFF Tracking Number: MGCA-125611081 State: Arkansas
Filing Company: Mid-West National Life Insurance Company of Tennessee State Tracking Number: 38720
Company Tracking Number: MW-25885 (09/03)-IR 200804 AR MIDWEST 13296
TOI: H151 Individual Health - Hospital/Surgical/Medical Expense Sub-TOI: H151.001 Health - Hospital/Surgical/Medical Expense
Product Name: MW-25885 - Ambulatory Care
Project Name/Number: /

Supporting Document Schedules

Satisfied -Name: Health - Actuarial Justification **Review Status:** Approved-Closed 05/13/2008
Comments:
Attachment:
AR MW-25885 ActMemo_Revised.pdf

Satisfied -Name: Supporting Documentation **Review Status:** Approved-Closed 05/13/2008
Comments:
Attachments:
AR MW-25885 Cert.pdf
AR MW-25885 Cover.pdf
AR MW-25885 Rate History.pdf
MW-25885 AR Experience.pdf
MW-25885 Nationwide Experience.pdf

Certification of Compliance with Arkansas Rule and Regulation 19

Insurer: NAIC # 264-66087
Form Number(s): MW-25885 (09/03)-IR

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



Signature of Company Officer

John Ames, FSA, MAAA
Name

4/10/2008
Date



**Mid-West National
Life Insurance
Company of Tennessee**
Home Office: Oklahoma City, OK

9151 Boulevard 26
N Richland Hills, TX 76182
www.midwestlife.com
Phone: 800.729.2302
Fax: 817.255.8274

4/10/2008

Ms. Rosalind Minor
Arkansas Insurance Department
1200 West Third Street
Little Rock AR 72201-1904

**RE: Mid-West National Life Insurance Company of Tennessee
Individual Rate Filing for:
Ambulatory Care Benefit Rider
MW-25885 (09/03)-IR
Company NAIC # 264-66087
Company FEIN # 62-0724538**

Dear Ms. Minor,

The above referenced product requires a rate change. Enclosed please find an actuarial memorandum and exhibits in support of the modification. This rate filing is being made in the states of AR, CO, DC, DE, GA, IL, KS, KY, LA, MS, NM, UT & WV. Our state of domicile is Texas and a rate filing is pending there as well.

We appreciate your review of our rate filing. If acceptable, please return the duplicate stamped copy of this filing in the enclosed envelope. If you have any questions, please contact me at the following number or email address.

Sincerely,

A handwritten signature in black ink, appearing to read 'S. Mordovine', with a horizontal line extending to the right.

Sergei Mordovine
Actuarial Analyst
Phone: (800) 729-2302 x3509
Fax: (817) 255-8274
Email: NRHAct-Comp@HealthMarkets.com

Enclosures

SERFF Tracking Number: MGCA-125611081 State: Arkansas
 Filing Company: Mid-West National Life Insurance Company of Tennessee State Tracking Number: 38720
 Company Tracking Number: MW-25885 (09/03)-IR 200804 AR MIDWEST 13296
 TOI: H151 Individual Health - Hospital/Surgical/Medical Expense Sub-TOI: H151.001 Health - Hospital/Surgical/Medical Expense
 Product Name: MW-25885 - Ambulatory Care
 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	Rate and Rule	Ambulatory Care Rates	04/15/2008	AR MW-25885 (09-03) (AMR & AMT).pdf
No original date	Supporting Document	Health - Actuarial Justification	04/15/2008	AR MW-25885 ActMemo.pdf