

SERFF Tracking Number: PHYS-125708468 State: Arkansas  
Filing Company: Physicians Mutual Insurance Company State Tracking Number: 39397  
Company Tracking Number:  
TOI: H14I Individual Health - Hospital Indemnity Sub-TOI: H14I.000 Health - Hospital Indemnity  
Product Name: 2008 P345 Rate Increase  
Project Name/Number: /

## Filing at a Glance

Company: Physicians Mutual Insurance Company

Product Name: 2008 P345 Rate Increase SERFF Tr Num: PHYS-125708468 State: ArkansasLH  
TOI: H14I Individual Health - Hospital Indemnity SERFF Status: Closed State Tr Num: 39397  
Sub-TOI: H14I.000 Health - Hospital Indemnity Co Tr Num: State Status: Approved-Closed  
Filing Type: Rate Co Status: Reviewer(s): Rosalind Minor  
Author: Richie Hinman Disposition Date: 06/30/2008  
Date Submitted: 06/24/2008 Disposition Status: Approved-Closed  
Implementation Date Requested: 11/01/2008 Implementation Date:

State Filing Description:

## General Information

Project Name: Status of Filing in Domicile: Pending  
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: 9% Group Market Type:  
Filing Status Changed: 06/30/2008  
State Status Changed: 06/30/2008 Deemer Date:  
Corresponding Filing Tracking Number:  
Filing Description:  
See attached Cover Letter.

## Company and Contact

### Filing Contact Information

Richie Hinman, Re-Rating Supervisor richie.hinman@physiciansmutual.com  
2600 Dodge Street (402) 633-5782 [Phone]



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## Filing Fees

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

COMPANY	AMOUNT	DATE PROCESSED	TRANSACTION #
Physicians Mutual Insurance Company	\$50.00	06/24/2008	21065387

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## Correspondence Summary

### Dispositions

<b>Status</b>	<b>Created By</b>	<b>Created On</b>	<b>Date Submitted</b>
Approved-Closed	Rosalind Minor	06/30/2008	06/30/2008

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## **Disposition**

Disposition Date: 06/30/2008

Implementation Date:

Status: Approved-Closed

Comment: We have approved an 9% level rate increase on the above referenced form. 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.

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<b>Item Type</b>	<b>Item Name</b>	<b>Item Status</b>	<b>Public Access</b>
<b>Supporting Document</b>	Health - Actuarial Justification	Approved-Closed	No
<b>Rate</b>	Hospital, Medical and Surgical Indemnity Policy	Approved-Closed	No