

SERFF Tracking Number: USHG-125671157 State: Arkansas
Filing Company: Freedom Life Insurance Company of America State Tracking Number: 39141
Company Tracking Number: BENEFIT USA
TOI: H21 Health - Other Sub-TOI: H21.000 Health - Other
Product Name: Addition of Association
Project Name/Number: Addition of Association/Benefit USA

Filing at a Glance

Company: Freedom Life Insurance Company of America

Product Name: Addition of Association

TOI: H21 Health - Other

Sub-TOI: H21.000 Health - Other

Filing Type: Form

SERFF Tr Num: USHG-125671157 State: ArkansasLH

SERFF Status: Closed

State Tr Num: 39141

Co Tr Num: BENEFIT USA

State Status: Withdrawn

Co Status:

Reviewer(s): Rosalind Minor

Authors: Crystal Allred, Georgiana

Disposition Date: 06/23/2008

Cozine

Date Submitted: 05/29/2008

Disposition Status: Withdrawn

Implementation Date Requested: On Approval

Implementation Date:

State Filing Description:

General Information

Project Name: Addition of Association

Project Number: Benefit USA

Requested Filing Mode: Informational

Explanation for Combination/Other:

Submission Type: New Submission

Overall Rate Impact:

Filing Status Changed: 06/23/2008

State Status Changed: 06/23/2008

Corresponding Filing Tracking Number: Benefit USA

Filing Description:

Letter to add an additional association for use with previously approved forms.

Status of Filing in Domicile: Pending

Date Approved in Domicile:

Domicile Status Comments: Filed for situs approval.

Market Type: Group

Group Market Size: Small and Large

Group Market Type: Association

Deemer Date:

Company and Contact

Filing Contact Information

Crystal Allred, Product Analyst

allredc@ushealthgroup.com

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3100 Burnett Plaza (817) 878-3429 [Phone]
Fort Worth, TX 76102 (817) 878-3310[FAX]

Filing Company Information

Freedom Life Insurance Company of America CoCode: 62324 State of Domicile: Texas
3100 Burnett Plaza Group Code: 839 Company Type: Accident, Life and Health

801 Cherry Street, Unit 33
Fort Worth, TX 76102 Group Name: State ID Number:
(817) 878-3328 ext. [Phone] FEIN Number: 61-1096685

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Filing Fees

Fee Required? No
Retaliatory? No
Fee Explanation:
Per Company: No

COMPANY	AMOUNT	DATE PROCESSED	TRANSACTION #
Freedom Life Insurance Company of America	\$0.00	05/29/2008	

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Correspondence Summary

Dispositions

Status	Created By	Created On	Date Submitted
Withdrawn	Rosalind Minor	06/23/2008	06/23/2008

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	06/06/2008	06/06/2008	Crystal Allred	06/19/2008	06/19/2008

Amendments

Item	Schedule	Created By	Created On	Date Submitted
Letter	Supporting Document	Crystal Allred	05/29/2008	05/29/2008
Letter	Supporting Document	Crystal Allred	05/29/2008	05/29/2008

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Disposition

Disposition Date: 06/23/2008

Implementation Date:

Status: Withdrawn

Comment: As per your request of 6/19/08, this filing is being withdrawn.

Rate data does NOT apply to filing.

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Item Type	Item Name	Item Status	Public Access
Supporting Document	Certification/Notice	Withdrawn	Yes
Supporting Document	Application	Withdrawn	Yes
Supporting Document	Health - Actuarial Justification	Withdrawn	Yes
Supporting Document	Outline of Coverage	Withdrawn	Yes
Supporting Document (revised)	Letter	Withdrawn	Yes
Supporting Document	Letter	Withdrawn	No
Supporting Document	Letter	Withdrawn	No

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Objection Letter

Objection Letter Status Pending Industry Response

Objection Letter Date 06/06/2008

Submitted Date 06/06/2008

Respond By Date

Dear Crystal Allred,

This will acknowledge receipt of the captioned filing.

Objection 1

- Letter (Supporting Document)

Comment: I am attaching a questionnaire that needs to be completed and submitted on the Association, Benefits, USA.

Please feel free to contact me if you have questions.

Sincerely,

Rosalind Minor

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Attachment "Discretionary Group.doc" is not a PDF document and cannot be reproduced here.

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Response Letter

Response Letter Status Submitted to State
Response Letter Date 06/19/2008
Submitted Date 06/19/2008

Dear Rosalind Minor,

Comments:

Response 1

Comments: Thank you for your review of our request to add a new association, Benefits USA, to the list of previously approved associations however, at this time we wish to withdraw our submission.

Related Objection 1

Applies To:

- Letter (Supporting Document)

Comment:

I am attaching a questionnaire that needs to be completed and submitted on the Association, Benefits, USA.

Changed Items:

No Supporting Documents changed.

No Form Schedule items changed.

No Rate/Rule Schedule items changed.

Sincerely,
Crystal Allred, Georgiana Cozine

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Amendment Letter

Amendment Date:

Submitted Date: 05/29/2008

Comments:

Letter in PDF format

Changed Items:

Supporting Document Schedule Item Changes:

User Added -Name: Letter

Comment:

AR Letter 5-08.pdf

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Amendment Letter

Amendment Date:

Submitted Date: 05/29/2008

Comments:

Replaced corrected letter.

Changed Items:

Supporting Document Schedule Item Changes:

User Added -Name: Letter

Comment:

AR Letter 5-08.doc

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Rate Information

Rate data does NOT apply to filing.

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Supporting Document Schedules

Bypassed -Name:	Certification/Notice	Review Status:	Withdrawn	06/23/2008
Bypass Reason:	NA			
Comments:				
Bypassed -Name:	Application	Review Status:	Withdrawn	06/23/2008
Bypass Reason:	NA			
Comments:				
Bypassed -Name:	Health - Actuarial Justification	Review Status:	Withdrawn	06/23/2008
Bypass Reason:	NA			
Comments:				
Bypassed -Name:	Outline of Coverage	Review Status:	Withdrawn	06/23/2008
Bypass Reason:	NA			
Comments:				
Satisfied -Name:	Letter	Review Status:	Withdrawn	06/23/2008
Comments:				
Attachment:				
AR Letter 5-08.pdf				

FREEDOM LIFE INSURANCE COMPANY OF AMERICA

3100 Burnett Plaza • 801 Cherry Street, Unit 33 • Fort Worth, Texas 76102 • 1-800-387-9027

May 29, 2008

Honorable Julia Benafield Bowman
Commissioner of Insurance
Arkansas Insurance Department
1200 West 3rd Street
Little Rock, AR 72201-1904

RE: Freedom Life Insurance Company of America
NAIC # 62324 FEIN # 61-1096685

Additional Association for use with the following Approved forms

USHG-2007-C-AR-FLIC Approved 2/20/2007

Dear Commissioner Bowman:

We are sending a courtesy letter to inform the Department that for our previous filing of the above referenced forms the group policies were to be issued to particular associations. We have decided to issue the policy to the following additional association: **Benefits USA**.

The group master policy will be issued to Benefits USA, a not-for-profit association organized under and by virtue of the laws of the state of Missouri. The group policy will be issued in Arizona. Please be advised this product is not employer/employee based and we are offering the product to individuals on an individual basis. The products are fully underwritten on an individual basis. A certificate of insurance will be issued to members of the association to evidence coverage under the group policy.

You have our assurance there have not been any changes made to any of the forms filed and approved by your Department. We would further like to extend use of the Association to any other forms previously approved for use in your state.

Your review and approval of the additional association would be greatly appreciated. If you have any questions or require additional information, please contact me via email at cozineg@ushealthgroup.com, or by telephone at 1-800-387-9027, ext. 812.

Sincerely,



Georgiana Cozine, FLMI
Product Analyst
Product Development

Enclosures