

SERFF Tracking Number: UTAC-125541731 State: Arkansas
 Filing Company: United Teacher Associates Insurance Company State Tracking Number: 38568
 Company Tracking Number: UTA-12-0004
 TOI: MS06 Medicare Supplement - Other Sub-TOI: MS06.000 Medicare Supplement - Other
 Product Name: Medicare Supplement Advertising
 Project Name/Number: /

Filing at a Glance

Company: United Teacher Associates Insurance Company

Product Name: Medicare Supplement SERFF Tr Num: UTAC-125541731 State: ArkansasLH

Advertising

TOI: MS06 Medicare Supplement - Other SERFF Status: Closed State Tr Num: 38568

Sub-TOI: MS06.000 Medicare Supplement - Other Co Tr Num: UTA-12-0004 State Status: Filed-Closed

Other

Filing Type: Advertisement

Co Status:

Reviewer(s): Stephanie Fowler

Author: Melissa MacLaurin

Disposition Date: 04/04/2008

Date Submitted: 03/31/2008

Disposition Status: Filed-Closed

Implementation Date Requested: On Approval

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: Individual

Submission Type: New Submission

Group Market Size:

Overall Rate Impact:

Group Market Type:

Filing Status Changed: 04/04/2008

State Status Changed: 04/04/2008

Deemer Date:

Corresponding Filing Tracking Number:

Filing Description:

Re: UNITED TEACHER ASSOCIATES INSURANCE COMPANY

NAIC # 63479 FEIN # 58-0869673

FORMS SUBMITTED

DESCRIPTION

UTA-12-0004

Medicare Supplement Advertising Flyer

UTA-12-0006-AR

Medicare Supplement Advertising Flyer

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UTA-12-0007 Medicare Supplement Advertising Flyer

TO BE USED WITH APPROVED POLICY FORMS

Form Name	Form #	Approval Date
Medicare Supplement Plan A	MS-020501-UTA-AR	7/15/2002
Medicare Supplement Plan B	MS-021001-UTA-AR	7/15/2002
Medicare Supplement Plan C	MS-020601-UTA-AR	7/15/2002
Medicare Supplement Plan D	MS-020901-UTA-AR	7/15/2002
Medicare Supplement Plan F	MS-020701-UTA-AR	7/15/2002
Medicare Supplement Plan G	MS-021201-UTA-AR	7/15/2002

Dear Sir or Madam:

The following forms are being submitted for your review and approval. These forms are new and do not replace any forms previously approved by your department. Please note that this filing contains no unusual or controversial items from the normal company or industry standards.

If you should have any questions regarding this submission, please feel free to call me toll-free at 1-800-880-2745, extension 8755 or fax me at (512) 451-0357. My email address is mmaclaurin@gafri.com.

Thank you in advance for your consideration.

Sincerely,

Melissa MacLaurin
Compliance Analyst

Company and Contact

Filing Contact Information

Melissa MacLaurin, mmaclaurin@gafri.com

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11200 Lakeline Blvd Ste 100 (512) 583-8755 [Phone]
Austin, TX 78717

Filing Company Information

United Teacher Associates Insurance Company CoCode: 63479 State of Domicile: Texas
5508 Parkcrest Drive Group Code: 84 Company Type: Insurance
Company

P.O. Box 26580
Austin, TX 78755-0580 Group Name: State ID Number:
(800) 880-8824 ext. [Phone] FEIN Number: 58-0869673

SERFF Tracking Number: UTAC-125541731 State: Arkansas
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Filing Fees

Fee Required? Yes
Fee Amount: \$75.00
Retaliatory? No
Fee Explanation: \$25.00 PER FORM (25X3=75.00)
Per Company: No

COMPANY	AMOUNT	DATE PROCESSED	TRANSACTION #
United Teacher Associates Insurance Company	\$75.00	03/31/2008	19150252

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Correspondence Summary

Dispositions

Status	Created By	Created On	Date Submitted
Filed-Closed	Stephanie Fowler	04/04/2008	04/04/2008

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Disposition

Disposition Date: 04/04/2008

Implementation Date:

Status: Filed-Closed

Comment:

Rate data does NOT apply to filing.

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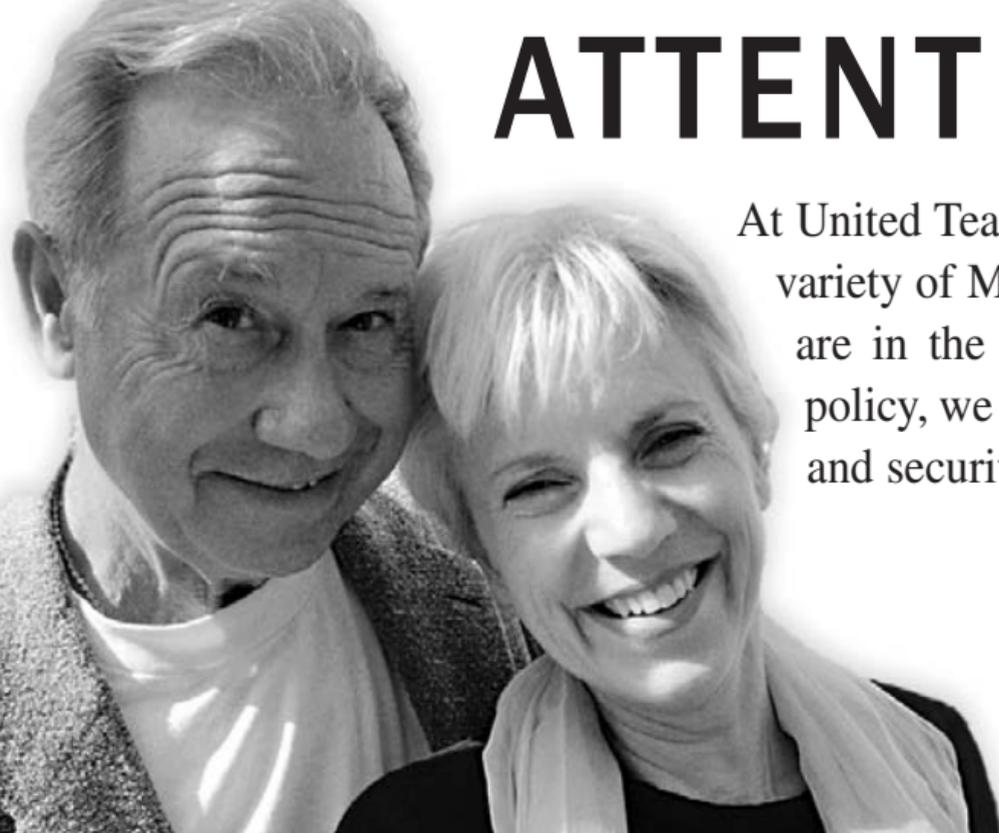
Item Type	Item Name	Item Status	Public Access
Supporting Document	CERTIFICATION	Filed-Closed	Yes
Supporting Document	COVER LETTER	Filed-Closed	Yes
Form	Advertising Flyer	Filed-Closed	Yes
Form	Advertising Flyer	Filed-Closed	Yes
Form	Advertising Flyer	Filed-Closed	Yes

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Form Schedule

Lead Form Number: UTA-12-0004

Review Status	Form Number	Form Type	Form Name	Action	Action Specific Data	Readability	Attachment
Filed-Closed	UTA-12-0004	Advertising	Advertising Flyer	Initial			UTA-12-0004 (3-3-08).pdf
Filed-Closed	UTA-12-0006-AR	Advertising	Advertising Flyer	Initial			UTA-12-0006-AR (3-27-08).pdf
Filed-Closed	UTA-12-0007	Advertising	Advertising Flyer	Initial			UTA-12-0007 (3-6-08).pdf



ATTENTION SENIORS

At United Teacher Associates Insurance Company, we offer a variety of Medicare Supplement policies* in [state]. If you are in the market for a Medicare Supplement insurance policy, we invite you to learn more about the service, value and security we can provide.

FOR MORE INFORMATION CALL:

[agent name]

[agent phone number]



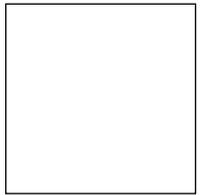
UNITED TEACHER ASSOCIATES
INSURANCE COMPANY

P.O. Box 26580 | Austin, TX 78755-0580

UTA-12-0004

* For specific cost and further details of the coverage, including exclusions, and reductions or limitations and the terms under which the policy may be continued in force, see your agent or write to the company. United Teacher Associates Insurance Company is not connected with Medicare, Social Security, or any other governmental agency. Do not send any money. You must first complete an application to obtain benefits. 3/3/08

John Q. Agent
1234 Mainstreet Blvd.
Anytown, USA 12345



Steve Senior
5678 Mainstreet Blvd.
Anytown, USA 12345

MEDICARE RECIPIENTS



Have we got a **Medicare Supplement insurance policy** for you...

This is a solicitation for insurance. An insurance agent will contact you.



**UNITED TEACHER ASSOCIATES
INSURANCE COMPANY**

PLACE
STAMP
HERE

John Q. Agent
1234 Mainstreet Blvd.
Anytown, USA 12345

THAT'S RIGHT!

United Teacher Associates Insurance Company is offering [Plan F] in Arkansas for:

SAMPLE RATE FOR PLAN F

\$112.⁰⁰/month

Plans A, B, C & D also available.

Rates vary by area.

FOR MORE INFORMATION FILL OUT THE REPLY CARD BELOW!

Yes! I am interested in being contacted about United Teacher Associates Insurance Company's Medicare Supplement policies.

NAME _____ EMAIL _____

ADDRESS _____

TELEPHONE # _____ BEST TIME TO CALL _____

Please fill out the appropriate information, detach the lower portion, fold and mail!
[Agent Name] will contact you with more information.

Note: This is a commercial message from Loyal American Life Insurance, a private insurance company which is not an agency of Social Security, Medicare or any other governmental agency. The insurance company will contact you.

UTA-12-0006-AR

3/27/08

EXCLUSIONS AND LIMITATIONS

THIS IS A LIMITED POLICY which should be used to supplement your Medicare coverage. Neither United Teacher Associates Insurance Company (UTA) nor its agents are connected with Medicare or any government agency. Premium and benefits vary by plan selected. Plan availability varies by state.

This mailer applies to Medicare Supplement policy form: [Policy Form Number]. All of the UTA Medicare Supplement policies are guaranteed renewable for life. Premiums can change on a class basis. The policy can not be cancelled because of health changes. We guarantee to renew the policy each time the premium is received within 31 days of its due date.

Pre-existing conditions are not covered for the first six months. However, if you have continuous creditable coverage or are replacing an existing Medicare Supplement policy, you will get credit for the time you were covered toward meeting this six month exclusionary period. A pre-existing condition is an injury or illness for which medical advice or treatment was recommended or given by a physician within six months prior to the Effective Date.

These policies will not pay benefits for:

1. Any expense which You are not legally obligated to pay;
2. Any services that are not medically necessary as determined by Medicare;
3. Any portion of any expense for which payment is made by Medicare or for which payment would have been made by Medicare if You were enrolled in Parts A and B of Medicare;
4. Any type of expense not a Medicare Eligible Expense except as provided for in the policy



**UNITED TEACHER ASSOCIATES
INSURANCE COMPANY**

[AGENT NAME / ADDRESS / PHONE NUMBER]

UTA-12-0006-AR

3/27/08

MEDICARE SUPPLEMENT INSURANCE

By law, all carriers must provide the same benefits for Medicare Supplement insurance policies. What separates us from the competition is the care, talent and technology that we strive to give to our policy-holders.

When it comes to Medicare supplement insurance,
We Make the Difference.



FOR MORE INFORMATION CALL: [AGENT NAME, AGENT PHONE NUMBER]

For specific cost and further details of the coverage, including exclusions, and reductions or limitations and the terms under which the policy may be continued in force, see your agent or write to the company. United Teacher Associates Insurance Company is not connected with Medicare, Social Security, or any other governmental agency. Do not send any money. You must first complete an application to obtain benefits.

UTA-12-0007



**UNITED TEACHER ASSOCIATES
INSURANCE COMPANY**

P.O. Box 26580 | Austin, TX 78755-0580

3/6/08

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UTA-12-0007



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INSURANCE COMPANY**

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3/6/08

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Rate Information

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Supporting Document Schedules

Satisfied -Name: CERTIFICATION **Review Status:** Filed-Closed 04/04/2008
Comments:
Attachment:
AR Certification.pdf

Satisfied -Name: COVER LETTER **Review Status:** Filed-Closed 04/04/2008
Comments:
Attachment:
AR Cover Letter - UTA.pdf

Arkansas Certification

This submission meets the provisions of Rule and Regulation 19, "Unfair sex discrimination in the sale of insurance" as well as all applicable requirements of this Department.

Melina M. Fauci

Name and Title

, Compliance Analyst

March 31, 2008

Date



UNITED TEACHER ASSOCIATES INSURANCE COMPANY

March 31, 2008

Policy Form Filing Division
Life and Health Division
Arkansas Department of Insurance
1200 West Third Street
Little Rock, AR 72201-1904

Re: *UNITED TEACHER ASSOCIATES INSURANCE COMPANY*
NAIC # 63479 FEIN # 58-0869673

FORMS SUBMITTED

UTA-12-0004
UTA-12-0006-AR
UTA-12-0007

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Medicare Supplement Advertising Flyer
Medicare Supplement Advertising Flyer

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