

SERFF Tracking Number: AFLA-125739754 State: Arkansas
 Filing Company: American Family Life Assurance Company of Columbus State Tracking Number: 39708
 Company Tracking Number:
 TOI: H08I Individual Health - Intensive Care - Limited Benefit Sub-TOI: H08I.000 Health - Intensive Care - Limited Benefit
 Product Name: Hospital Intensive Care
 Project Name/Number: /

Filing at a Glance

Company: American Family Life Assurance Company of Columbus
 Product Name: Hospital Intensive Care SERFF Tr Num: AFLA-125739754 State: ArkansasLH
 TOI: H08I Individual Health - Intensive Care - Limited Benefit SERFF Status: Closed State Tr Num: 39708
 Sub-TOI: H08I.000 Health - Intensive Care - Limited Benefit Co Tr Num: State Status: Approved-Closed
 Filing Type: Form Co Status: Reviewer(s): Rosalind Minor
 Authors: Eve Black, Bridget Berryman Disposition Date: 07/24/2008
 Date Submitted: 07/23/2008 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: Group Market Type:
 Filing Status Changed: 07/24/2008 Deemer Date:
 State Status Changed: 07/24/2008
 Corresponding Filing Tracking Number:
 Filing Description:
 The below referenced form is submitted for your review and approval.

Endorsement Form A91347 will amend Hospital Intensive Care Unit Policy Forms A1840HAR and A18400AR,

SERFF Tracking Number: AFLA-125739754 State: Arkansas
Filing Company: American Family Life Assurance Company of Columbus State Tracking Number: 39708
Company Tracking Number:
TOI: H08I Individual Health - Intensive Care - Limited Benefit Sub-TOI: H08I.000 Health - Intensive Care - Limited Benefit
Product Name: Hospital Intensive Care
Project Name/Number: /

previously approved by your department on March 31, 2006.

The endorsement will make the following change to Part 1, Definitions:

- Under Step-Down Intensive Care Unit, progressive care units and intermediate care units are being added as covered units.

The endorsement will make the following changes to Part 2, Limitations and Exclusions:

- Under 5., reference to benefits applicable to confinements in a Hospital Intensive Care Unit and Step-Down Intensive Care Unit are being separated to clarify the coverage criteria for the two types of units, as well as uniformity with the stated benefits under Part 5, Benefits.

We intend to make the changes available to all policyholders upon approval by your department. The endorsement will be added to all policies issued after the date of implementation and will be mailed to all existing policyholders issued prior to the date of implementation.

This submission will not affect the premium rates currently on file with your department.

Certifications addressing Rule & Regulation 19 and 49, as well as the standards for minimum reading ease, have also been noted under the Supporting Documentation Schedules.

The appropriate filing fee is being submitted via EFT.

Company and Contact

Filing Contact Information

Bridget Berryman, Policy Analyst
1932 Wynnton Road

bberryman@aflac.com
(706) 660-7132 [Phone]

SERFF Tracking Number: AFLA-125739754 State: Arkansas
Filing Company: American Family Life Assurance Company of Columbus State Tracking Number: 39708
Company Tracking Number:
TOI: H08I Individual Health - Intensive Care - Limited Benefit Sub-TOI: H08I.000 Health - Intensive Care - Limited Benefit
Product Name: Hospital Intensive Care
Project Name/Number: /

Columbus, GA 31999 (706) 660-7080[FAX]

Filing Company Information

American Family Life Assurance Company of Columbus CoCode: 60380 State of Domicile: Nebraska
1932 Wynnton Road Group Code: Company Type: Life and Health
Columbus, GA 31999 Group Name: State ID Number:
(706) 323-3431 ext. [Phone] FEIN Number: 58-0663085

SERFF Tracking Number: AFLA-125739754 State: Arkansas
Filing Company: American Family Life Assurance Company of Columbus State Tracking Number: 39708
Company Tracking Number:
TOI: H08I Individual Health - Intensive Care - Limited Benefit Sub-TOI: H08I.000 Health - Intensive Care - Limited Benefit
Product Name: Hospital Intensive Care
Project Name/Number: /

Filing Fees

Fee Required? Yes
Fee Amount: \$20.00
Retaliatory? No
Fee Explanation: This filing consists of one endorsement form.
Per Company: No

COMPANY	AMOUNT	DATE PROCESSED	TRANSACTION #
American Family Life Assurance Company of Columbus	\$20.00	07/23/2008	21558226

SERFF Tracking Number: AFLA-125739754 State: Arkansas
Filing Company: American Family Life Assurance Company of Columbus State Tracking Number: 39708
Company Tracking Number:
TOI: H08I Individual Health - Intensive Care - Limited Benefit Sub-TOI: H08I.000 Health - Intensive Care - Limited Benefit
Product Name: Hospital Intensive Care
Project Name/Number: /

Correspondence Summary

Dispositions

Status	Created By	Created On	Date Submitted
Approved-Closed	Rosalind Minor	07/24/2008	07/24/2008

SERFF Tracking Number: AFLA-125739754 State: Arkansas
 Filing Company: American Family Life Assurance Company of Columbus State Tracking Number: 39708
 Company Tracking Number:
 TOI: H08I Individual Health - Intensive Care - Limited Benefit Sub-TOI: H08I.000 Health - Intensive Care - Limited Benefit
 Product Name: Hospital Intensive Care
 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	Yes
Supporting Document	Outline of Coverage	Approved-Closed	Yes
Form	A91347	Approved-Closed	Yes

SERFF Tracking Number: AFLA-125739754 State: Arkansas
 Filing Company: American Family Life Assurance Company of Columbus State Tracking Number: 39708
 Company Tracking Number:
 TOI: H08I Individual Health - Intensive Care - Limited Benefit Sub-TOI: H08I.000 Health - Intensive Care - Limited Benefit
 Product Name: Hospital Intensive Care
 Project Name/Number: /

Form Schedule

Lead Form Number: A91347

Review Status	Form Number	Form Type Form Name	Action	Action Specific Data	Readability	Attachment
Approved-Closed	A91347	Policy/Contract/Fraternal Certificate: Amendment, Insert Page, Endorsement or Rider	Initial		98	A91347.pdf

AMERICAN FAMILY LIFE ASSURANCE COMPANY OF COLUMBUS (AFLAC)
Worldwide Headquarters • 1932 Wynnton Road • Columbus, Georgia 31999
A Stock Company

ENDORSEMENT

CERTIFICATE OR
POLICY NUMBER:

DATE OF ISSUE:

INSURED:

ENDORSEMENT DATE: See Policy Schedule

This endorsement is subject to all of the provisions of, and is effective with, the policy to which it is attached. Additions or changes have been made to the policy and indicated as follows:

Part 1
DEFINITIONS

STEP-DOWN INTENSIVE CARE UNIT: specifically designated facility of the Hospital that provides a level of medical care below the highest level of acute medical care available at the Hospital, but above the level of medical care in a regular private or semiprivate room or ward. The facility must also be separate and apart from other Hospital areas, permanently equipped with telemetry equipment, and under constant and continual observation by specially trained nursing staff assigned exclusively to that area. Covered units include but are not limited to: progressive care units and intermediate care units. **It does not include:** telemetry or surgical recovery rooms; observation units located in emergency rooms or outpatient surgery units; postanesthesia care units; beds, wards, or private or semiprivate room with or without telemetry monitoring equipment; emergency rooms, or labor or delivery rooms.

Part 2
LIMITATIONS AND EXCLUSIONS

Under Part 5, A1 and B, **Hospital Intensive Care Unit**, confinement in units such as telemetry or surgical recovery rooms, postanesthesia care units, progressive care units, intermediate care units, private monitored rooms, observation units located in emergency room or outpatient surgery units; or other facilities that do not meet the standards for a Hospital Intensive Care Unit. Under Part 5, A2 and B, **Step-Down Intensive Care Unit**, confinement in units such as telemetry or surgical recovery rooms, postanesthesia care units, beds, wards, or private or semiprivate room with or without telemetry monitoring equipment, observation units located in emergency room or outpatient surgery units, emergency rooms, labor or delivery rooms; or other facilities that do not meet the standards for a Step-Down Intensive Care Unit.

This endorsement will automatically terminate with the policy.

In witness whereof, Aflac, at its worldwide headquarters, has caused this endorsement to be signed by our president and secretary in the city of Columbus, Georgia.



Paul S. Amos II, President



Joey M. Loudermilk, Secretary

SERFF Tracking Number: AFLA-125739754 State: Arkansas
Filing Company: American Family Life Assurance Company of Columbus State Tracking Number: 39708
Company Tracking Number:
TOI: H08I Individual Health - Intensive Care - Limited Benefit Sub-TOI: H08I.000 Health - Intensive Care - Limited Benefit
Product Name: Hospital Intensive Care
Project Name/Number: /

Rate Information

Rate data does NOT apply to filing.

SERFF Tracking Number: AFLA-125739754 State: Arkansas
 Filing Company: American Family Life Assurance Company of Columbus State Tracking Number: 39708
 Company Tracking Number:
 TOI: H08I Individual Health - Intensive Care - Limited Benefit Sub-TOI: H08I.000 Health - Intensive Care - Limited Benefit
 Product Name: Hospital Intensive Care
 Project Name/Number: /

Supporting Document Schedules

Satisfied -Name: Certification/Notice **Review Status:** Approved-Closed 07/24/2008

Comments:

We certify that this filing meets the standards of Rule and Regulation 19, as well as Rule & Regulation 49 (Guaranty Association Notice Form A14640R is attached here for your information). The Flesch score meets minimum standards and have been noted on the form schedule. The Consumer Information Notice for this product is included on the policy and application, and is not affected by this endorsement filing.

Attachment:

A14640R.pdf

Bypassed -Name: Application **Review Status:** Approved-Closed 07/24/2008

Bypass Reason: This filing does not affect the current applications for this product.

Comments:

Bypassed -Name: Health - Actuarial Justification **Review Status:** Approved-Closed 07/24/2008

Bypass Reason: The rates currently on file are not affected by this filing.

Comments:

Bypassed -Name: Outline of Coverage **Review Status:** Approved-Closed 07/24/2008

Bypass Reason: This filing does not affect the current outlines of coverage for this product.

Comments:

**LIMITATIONS AND EXCLUSIONS UNDER THE ARKANSAS LIFE AND HEALTH INSURANCE
GUARANTY ASSOCIATION ACT**

Residents of this state who purchase life insurance, annuities or health and accident insurance should know that the insurance companies licensed in this state to write these types of insurance are members of the Arkansas Life and Health Insurance Guaranty Association (“Guaranty Association”). The purpose of the Guaranty Association is to assure that policy and contract owners will be protected, within certain limits, in the unlikely event that a member insurer becomes financially unable to meet its obligations. If this should happen, the Guaranty Association will assess its other member insurance companies for the money to pay the claims of policy owners who live in this state and, in some cases, to keep coverage in force. The valuable extra protection provided by the member insurers through the Guaranty Association is not unlimited, however. And, as noted in the box below, this protection is not a substitute for consumers’ care in selecting insurance companies that are well managed and financially stable.

DISCLAIMER

The Arkansas Life and Health Insurance Guaranty Association (“Guaranty Association”) may not provide coverage for this policy. If coverage is provided, it may be subject to substantial limitations or exclusions and require continued residency in this state. You should not rely on coverage by the Guaranty Association in purchasing an insurance policy or contract.

Coverage is NOT provided for your policy or contract or any portion of it that is not guaranteed by the insurer or for which you have assumed the risk, such as non-guaranteed amounts held in a separate account under a variable life and variable annuity contract.

Insurance companies or their agents are required by law to provide you with this notice. However, insurance companies and their agents are prohibited by law from using the existence of the Guaranty Association to induce you to purchase any kind of insurance policy.

The Arkansas Life and Health Insurance Guaranty Association
C/O The Liquidation Division
1023 West Capitol
Little Rock, Arkansas 72201

Arkansas Insurance Department
1200 West Third Street
Little Rock, Arkansas 72201-1904

The state law that provides for this safety-net is called the Arkansas Life and Health Insurance Guaranty Association Act (“Act”). Below is a brief summary of the Act’s coverages, exclusions and limits. This summary does not cover all provisions of the Act; nor does it in any way change anyone’s rights or obligations under the Act or the rights or obligations of the Guaranty Association.

COVERAGE

Generally, individuals will be protected by the Guaranty Association if they live in this state and hold a life, annuity or health insurance contract or policy, or if they are insured under a group insurance contract issued by a member insurer. The beneficiaries, payees or assignees of policy or contract owners are protected as well, even if they live in another state.

EXCLUSIONS FROM COVERAGE

However, persons owning such policies are NOT protected by the Guaranty Association if:

- They are eligible for protection under the laws of another state (this may occur when the insolvent insurer was incorporated in another state whose guaranty association protects insureds who live outside that state);
- The insurer was not authorized to do business in this state;
- Their policy or contract was issued by a nonprofit hospital or medical service organization, an HMO, a fraternal benefit society, a mandatory state pooling plan, a mutual assessment company or similar plan in which the policy or contract owner is subject to future assessments, or by an insurance exchange.

The Guaranty Association also does NOT provide coverage for:

- Any policy or contract or portion thereof which is not guaranteed by the insurer or for which the owner has assumed the risk, such as non-guaranteed amounts held in a separate account under a variable life or variable annuity contract;
- Any policy of reinsurance (unless an assumption certificate was issued);
- Interest rate yields that exceed an average rate;
- Dividends and voting rights and experience rating credits;
- Credits given in connection with the administration of a policy by a group contract holder;
- Employers' plans to the extent they are self-funded (that is, not insured by an insurance company, even if an insurance company administers them);
- Unallocated annuity contracts (which give rights to group contractholders, not individuals);
- Unallocated annuity contracts issued to/in connection with benefit plans protected under Federal Pension Benefit Corporation ("FPBC") (whether the FPBC is yet liable or not);
- Portions of an unallocated annuity contract not owned by a benefit plan or a government lottery (unless the owner is a resident) or issued to a collective investment trust or similar pooled fund offered by a bank or other financial institution);
- Portions of a policy or contract to the extent assessments required by law for the Guaranty Association are preempted by State or Federal law;
- Obligations that do not arise under the policy or contract, including claims based on marketing materials or side letters, riders, or other documents which do not meet filing requirements, or claims for policy misrepresentations, or extra-contractual or penalty claims;
- Contractual agreements establishing the member insurer's obligations to provide book value accounting guarantees for defined contribution benefit plan participants (by reference to a portfolio of assets owned by a nonaffiliate benefit plan or its trustees).

LIMITS ON AMOUNT OF COVERAGE

The Act also limits the amount the Guaranty Association is obligated to cover: The Guaranty Association cannot pay more than what the insurance company would owe under a policy or contract. Also, for any one insured life, the Guaranty Association will pay a maximum of \$300,000—no matter how many policies or contracts there were with the same company, even if they provided different types of coverages. Within this overall \$300,000 limit, the Association will not pay more than \$300,000 in health insurance benefits, \$300,000 in present value of annuity benefits, or \$300,000 in life insurance death benefits or net cash surrender values—again, no matter how many policies and contracts there were with the same company, and no matter how many different types of coverages. There is a \$1,000,000 limit with respect to any contract holder for unallocated annuity benefits, irrespective of the number of contracts held by the contract holder. These are limitations for which the Guaranty Association is obligated before taking into account either its subrogation and assignment rights or the extent to which these benefits could be provided out of the assets of the impaired or insolvent insurer.