

SERFF Tracking Number: PHYS-125680396 State: Arkansas  
Filing Company: Physicians Mutual Insurance Company State Tracking Number: 39192  
Company Tracking Number: PMA2908  
TOI: LTC03I Individual Long Term Care Sub-TOI: LTC03I.001 Qualified  
Product Name: Med Sup  
Project Name/Number: PMA2908AR/PMA2908AR

## Filing at a Glance

Company: Physicians Mutual Insurance Company

Product Name: Med Sup SERFF Tr Num: PHYS-125680396 State: ArkansasLH  
TOI: LTC03I Individual Long Term Care SERFF Status: Closed State Tr Num: 39192  
Sub-TOI: LTC03I.001 Qualified Co Tr Num: PMA2908 State Status: Filed-Closed  
Filing Type: Advertisement Co Status: Reviewer(s): Marie Bennett, Harris Shearer  
Authors: Sonya Dickey, Sara Magee-Garcia Disposition Date: 07/02/2008  
Date Submitted: 06/04/2008 Disposition Status: Filed  
Implementation Date Requested: On Approval Implementation Date:

State Filing Description:

## General Information

Project Name: PMA2908AR Status of Filing in Domicile: Not Filed  
Project Number: PMA2908AR 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: 07/02/2008 Deemer Date:  
State Status Changed: 07/02/2008  
Corresponding Filing Tracking Number: PMA2908AR  
Filing Description:  
RE: Long Term Care Advertisements  
Invitations to Inquire: PMA2503AR-0608 & PMA2908AR

The above referenced advertising material being submitted for your review and approval.

This material will to create an interest the following Long Term Care Policies:

POLICY APPROVAL DATE

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P145AR 8-11-04  
 P146AR 8-11-04  
 P147AR 8-11-04  
 P148AR 8-11-04

Form PMA2908AR will be used by licensed agents in face to face settings where as form PMA2530AR-0608 could be used in both face to face setting as well as through direct response. If you have any questions concerning material, please contact me at 1-800-228-9100, option 1, option 6, extension 2633. You may also contact me via email at Sara.Magee-Garcia@physiciansmutual.com. Your assistance in getting the material approved for use in your State is greatly appreciated.

## Company and Contact

### Filing Contact Information

Sara Magee-Garcia, sara.magee-garcia@physiciansmutual.com  
 2600 Dodge Street (800) 228-9100 [Phone]  
 Omaha, NE 68131 (402) 633-1096[FAX]

### Filing Company Information

Physicians Mutual Insurance Company CoCode: 80578 State of Domicile: Nebraska  
 2600 Dodge Street Group Code: 367 Company Type:  
 Omaha, NE 68131 Group Name: State ID Number:  
 (402) 633-1188 ext. [Phone] FEIN Number: 47-0270450

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## Filing Fees

Fee Required? Yes  
 Fee Amount: \$80.00  
 Retaliatory? No  
 Fee Explanation: \$40 per form, 2 forms being reviewed  
 Per Company: No

COMPANY	AMOUNT	DATE PROCESSED	TRANSACTION #
Physicians Mutual Insurance Company	\$80.00	06/04/2008	20656860

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## Correspondence Summary

### Dispositions

<b>Status</b>	<b>Created By</b>	<b>Created On</b>	<b>Date Submitted</b>
Filed	Marie Bennett	07/02/2008	07/02/2008

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## **Disposition**

Disposition Date: 07/02/2008

Implementation Date:

Status: Filed

Comment:

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>Form</b>	PMA2908AR		Yes
<b>Form</b>	PMA2530AR-0608		Yes

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## Form Schedule

**Lead Form Number:** PMA2908AR

Review Status	Form Number	Form Type	Form Name	Action	Action Specific Data	Readability	Attachment
	PMA2908A	Advertising	PMA2908AR	Initial			PMA2908AR.pdf
	PMA2530A	Advertising	PMA2530AR-0608	Initial			PMA2530AR-0608.pdf

# Yes! I'd like more information and personal service from a Physicians Mutual<sup>®</sup> Agent.

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Please tell me more about the following insurance products: (check all that apply)

**Long-Term Care Insurance**

**Medicare Supplement**

**Home Health Care Insurance**

**Medicare Part D\***

**Health Insurance**

**Life Insurance**

**Dental Insurance**

**Annuities**

**Cancer Insurance**

(Underwritten by Physicians Life Insurance Company)

\*Medicare Part D is provided by Aetna.

(Underwritten by Physicians Mutual Insurance Company)

**Career Opportunities**

Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_

Telephone Number ( \_\_\_\_\_ ) \_\_\_\_\_

Email: \_\_\_\_\_

Event Name: \_\_\_\_\_

We are not connected with or endorsed by the U. S. Government or the Federal Medicare Program.  
For complete details including costs and limitations return this card. An insurance agent will contact you. Insurance Policy Kinds: L260/L261/L265/L266/P145/P146/P147/P148/P345/C250A/P176/P210A/L708/L712/L726/L730/L731/L732/L762/AP111/AP112/AP114/AP116.

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**Long-Term Care Insurance]**

**Medicare Supplement Insurance Policy]**

**Home Health Care Insurance]**

**Medicare Part D\*]**

**Health Insurance]**

**Life Insurance]**

**Dental Insurance]**

**Annuities]**

**Cancer Insurance]**

(Underwritten by Physicians Life Insurance Company)

(Underwritten by Physicians Mutual Insurance Company)

\*Medicare Part D is provided by Aetna.

Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_

Telephone Number ( \_\_\_\_\_ ) \_\_\_\_\_

We are not connected with or endorsed by the U. S. Government or the Federal Medicare Program.

For complete details including costs and limitations return this card. An insurance agent will contact you. Insurance Policy Kinds: L260/L261/L265/L266/P145/P146/P147/P148/P345/C250A/P176/P210A/L708/L712/L726/L730/L731/L732/L762/AP111/AP112/AP114/AP116.

PMA2530AR-0608

Physicians Mutual Insurance Company®  
Physicians Life Insurance Company®



Physicians  
Mutual®

[Division Office]

[Attn:]

[Address]

[City, State ZIP]

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## **Rate Information**

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