

SERFF Tracking Number: PRUD-125689731 State: Arkansas  
Filing Company: The Prudential Insurance Company of America State Tracking Number: 39248  
Company Tracking Number: IIGH-83500COV5022-LH-AR  
TOI: LTC03G Group Long Term Care Sub-TOI: LTC03G.001 Qualified  
Product Name: 83500 COV 5022, et al  
Project Name/Number: GLTC 4 Rates/1828

## Filing at a Glance

Company: The Prudential Insurance Company of America

Product Name: 83500 COV 5022, et al

TOI: LTC03G Group Long Term Care

Sub-TOI: LTC03G.001 Qualified

Filing Type: Rate

Implementation Date Requested: On Approval

State Filing Description:

SERFF Tr Num: PRUD-125689731 State: ArkansasLH

SERFF Status: Closed

State Tr Num: 39248

Co Tr Num: IIGH-83500COV5022- State Status: Approved-Closed  
LH-AR

Co Status: IIGH

Author: Laura Hughes

Date Submitted: 06/10/2008

Reviewer(s): Harris Shearer

Disposition Date: 08/15/2008

Disposition Status: Approved-  
Closed

Implementation Date:

## General Information

Project Name: GLTC 4 Rates

Project Number: 1828

Requested Filing Mode:

Explanation for Combination/Other:

Submission Type: New Submission

Overall Rate Impact:

Filing Status Changed: 08/15/2008

State Status Changed: 08/15/2008

Corresponding Filing Tracking Number:

Filing Description:

Enclosed please find a revised actuarial memorandum which replaces the actuarial memorandum previously approved by the Department. The policy forms previously approved are unchanged.

Although previously approved, the policy forms that the actuarial memorandum applies to have never been marketed or issued for various internal administrative reasons. We have updated some of the assumptions to reflect emerging experience.

Status of Filing in Domicile: Pending

Date Approved in Domicile:

Domicile Status Comments:

Market Type: Group

Group Market Size: Large

Group Market Type: Employer

Deemer Date:

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The attached document highlights the changes from the originally approved actuarial memorandum.

This filing continues to comply with rate stabilization requirements and any required certifications.

## Company and Contact

### Filing Contact Information

Karen Smyth, Assistant Secretary karen.smyth@prudential.com  
 2101 Welsh Road (215) 658-6279 [Phone]  
 Dresher, PA 19025 (888) 294-6332[FAX]

### Filing Company Information

The Prudential Insurance Company of America CoCode: 68241 State of Domicile: New Jersey  
 751 Broad Street Group Code: 304 Company Type: Life  
 Newark, NJ 07102-3777 Group Name: State ID Number:  
 (973) 802-6000 ext. [Phone] FEIN Number: 22-1211670  
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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 #
The Prudential Insurance Company of America	\$50.00	06/10/2008	20762296

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## Correspondence Summary

### Dispositions

Status	Created By	Created On	Date Submitted
Approved-Closed	Rosalind Minor (FM)	08/15/2008	08/15/2008

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## Disposition

Disposition Date: 08/15/2008

Implementation Date:

Status: Approved-Closed

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>Supporting Document</b>	Health - Actuarial Justification	Approved-Closed	No
<b>Supporting Document</b>	Cover Letter	Approved-Closed	Yes
<b>Supporting Document</b>	Filing Fee Transmittal Form	Approved-Closed	Yes

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## **Rate Information**

Rate data does NOT apply to filing.

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## Supporting Document Schedules

**Satisfied -Name:** Cover Letter **Review Status:** Approved-Closed 08/15/2008  
**Comments:**  
**Attachment:**  
Arkansas Filing Letter.pdf

**Satisfied -Name:** Filing Fee Transmittal Form **Review Status:** Approved-Closed 08/15/2008  
**Comments:**  
**Attachment:**  
Filing Fee Transmittal.pdf



**Dianne Jones, FSA, MAAA**  
Actuarial Director  
Group Insurance

The Prudential Insurance Company of America  
Long Term Care Unit, NJ-09-00-41  
80 Livingston Ave.  
Roseland, NJ 07068  
Tel 973 548-6358 Fax 973 548-6630  
[dianne.jones@prudential.com](mailto:dianne.jones@prudential.com)

June 10, 2008

The Honorable Julie Benafield Bowman  
Commissioner of Insurance  
Department of Insurance  
1200 West Third Street  
Little Rock, AR 72201-1904

Re: The Prudential Insurance Company of America  
NAIC #304-68241  
Group Long Term Care Insurance  
Form Numbers: 83500 COV 5022, et al

Dear Commissioner Bowman:

Enclosed please find a revised actuarial memorandum which replaces the actuarial memorandum previously approved on February 9, 2007 under Department File Number: 31882. The policy forms previously approved are unchanged.

Although previously approved, the policy forms that the actuarial memorandum applies to have never been marketed or issued for various internal administrative reasons. Since it is over a year since approval, we have updated some of the assumptions to reflect emerging experience.

The attached document highlights the changes from the originally approved actuarial memorandum.

This filing continues to comply with the rate stabilization requirements and any required certifications.

Please correspond directly with my associate if there are any questions concerning this filing.

Laura Hughes, CLTC, LTCP  
Regulatory Contract Specialist  
The Prudential Insurance Company of America  
P. O. Box 7907  
Philadelphia, PA 19101-7907  
Voice: (800) 732-0416 or (215) 658-6282  
Fax: (888) 294-6332  
e-mail: [laura.hughes@prudential.com](mailto:laura.hughes@prudential.com)

Sincerely,

A handwritten signature in black ink, appearing to read 'DJ', is positioned above the typed name of the signatory.

Dianne Jones, FSA, MAAA  
Actuarial Director



ARKANSAS INSURANCE DEPARTMENT

400 University Tower Building
1123 South University Ave.
Little Rock, Arkansas 72204

Lee Douglass
Insurance Commissioner

ATTN: LIFE & HEALTH DIVISION, ARKANSAS INSURANCE DEPARTMENT

Company Name: The Prudential Insurance Company of America
Company NAIC Code: 304-68241
Company Contact Person: Raenonna L. Prince
Telephone #: 215-658-6281

INSURANCE DEPARTMENT USE ONLY
ANALYST: AMOUNT: ROUTE SLIP:

ALL FEES ARE PER EACH INSURER, PER ANNUAL STATEMENT LINE OF BUSINESS, UNLESS OTHERWISE INDICATED.

FEE SCHEDULE FOR ADMITTED INSURERS

RATE/FORM FILINGS

Life and/or Disability policy form filing and review, per each policy, Contract, annuity form, per each insurer, per each filing.
Life and/or Disability - Filing and review of each rate filing or loss ratio Guarantee filing, per each insurer.
Life and/or Disability Policy, Contract or Annuity Forms; Filing and review of each certificate, rider, endorsement Or application if each is filed separately from the basic form.
Life and/or Disability: Filing and review of Insurer's advertisements, Per advertisement, per each insurer.

AMEND CERTIFICATE OF AUTHORITY

Review and processing of information to amend an Insurer's Certificate of Authority.
Filing to amend Certificate of Authority.

\* THESE FEES ARE PAYABLE UNDER THE NEW FEE SCHEDULE AS OUTLINED UNDER RULE AND REGULATION 57.

\*\* THESE FEES ARE PAYABLE UNDER THE OLD FEE SCHEDULE AS OUTLINED UNDER ARK. CODE ANN. §23-63-102, RETALIATORY TAX.

\*\*\* THESE FEES ARE PAYABLE AS REQUIRED IN ARK. ANN. §23-61-401.