

SERFF Tracking Number: UHLC-125750861 State: Arkansas  
 Filing Company: United HealthCare Insurance Company State Tracking Number: 39983  
 Company Tracking Number:  
 TOI: MS02G Group Medicare Supplement - Pre- Standardized Sub-TOI: MS02G.000 Medicare Supplement - Pre- Standardized  
 Product Name: MEDICARE SUPPLEMENT PRE-STANDARDIZED PLANS  
 Project Name/Number: RATES/RERATE 2009 - PRE-STD

## Filing at a Glance

Company: United HealthCare Insurance Company

Product Name: MEDICARE SUPPLEMENT PRE-STANDARDIZED PLANS SERFF Tr Num: UHLC-125750861 State: ArkansasLH

TOI: MS02G Group Medicare Supplement - Pre-Standardized SERFF Status: Closed State Tr Num: 39983

Sub-TOI: MS02G.000 Medicare Supplement - Pre-Standardized Co Tr Num: State Status: Filed-Closed

Filing Type: Rate Co Status: Reviewer(s): Stephanie Fowler  
 Author: Wanda Augustus Disposition Date: 09/22/2008  
 Date Submitted: 08/19/2008 Disposition Status: Approved

Implementation Date Requested: Implementation Date: 01/01/2009

State Filing Description:

## General Information

Project Name: RATES

Project Number: RERATE 2009 - PRE-STD

Requested Filing Mode: Review & Approval

Explanation for Combination/Other:

Submission Type: New Submission

Overall Rate Impact:

Filing Status Changed: 09/22/2008

State Status Changed: 09/22/2008

Corresponding Filing Tracking Number:

Filing Description:

Rate Revision Filing

Rate for AARP Health Care Options Pre-Standardized Medicare Supplement Plans

NAIC #0707-79413

Status of Filing in Domicile: Pending

Date Approved in Domicile:

Domicile Status Comments:

Market Type: Group

Group Market Size: Large

Group Market Type: Association

Deemer Date:

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## Company and Contact

### Filing Contact Information

Karyn A. Feeney, Director, Contract and Compliance Karyn\_A\_Feeney@uhc.com  
 601 Office Center Drive (267) 470-1537 [Phone]  
 Ft. Washington, PA 19034 (267) 470-1906[FAX]

### Filing Company Information

United HealthCare Insurance Company CoCode: 79413 State of Domicile: Connecticut  
 450 Columbus Boulevard Group Code: 707 Company Type: Health  
 PO Box 150450  
 Hartford, CT 06115-0450 Group Name: State ID Number:  
 (215) 653-8046 ext. [Phone] FEIN Number: 36-2739571  
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## Filing Fees

Fee Required? Yes  
 Fee Amount: \$450.00  
 Retaliatory? No  
 Fee Explanation: \$50.00 X 9 RATES = \$450.00  
 Per Company: No

COMPANY	AMOUNT	DATE PROCESSED	TRANSACTION #
United HealthCare Insurance Company	\$450.00	08/19/2008	22015177

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## Correspondence Summary

### Dispositions

Status	Created By	Created On	Date Submitted
Approved	Stephanie Fowler	09/22/2008	09/22/2008

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## **Disposition**

Disposition Date: 09/22/2008

Implementation Date: 01/01/2009

Status: Approved

Comment: We have approved the requested 3% rate increase to be implemented on or after January 1, 2009. This approval is subject to the following:

Increases will not be given more frequently than once in a twelve-month period.

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	No
<b>Supporting Document</b>	COVER LETTER	Approved	Yes
<b>Rate</b>	ACTUARIAL MEMORANDUM, RATE SCHEDULE AND RATE ATTACHMENTS	Approved	No

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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 09/22/2008  
**Comments:** SEE ATTACHED COVER LETTER.  
**Attachment:** AR COVER LETTER - PRE-STD.pdf

August 18, 2008

Julie Benafield Bowman  
Commissioner  
State of Arkansas  
Department of Insurance  
1200 West Third Street  
Little Rock, Arkansas 72201-19044

RE: Rate Revision Filing  
Rate for AARP Health Care Options Pre-Standardized Medicare Supplement Plans  
NAIC #0707-79413

Dear Commissioner:

The attached filing is made to obtain approval for rates effective January 1, 2009 for Pre-Standardized Medicare Supplement Plans, issued to members of AARP through AARP HealthCare Options.

The proposed rates include an average rate increase of 3.0%. With these increases we project a loss ratio of 83.3%.

The enclosed actuarial memorandum provides supporting documentation. Certification regarding compliance with loss ratio standards for your state is also provided.

We would appreciate your acting expeditiously on this request so that we can provide AARP members with adequate notice of their 2009 rates.

If you need any further information regarding this matter, please contact me at (267) 470-1361, or via fax at (267) 470-1909. If you prefer to e-mail me, my address is [David\\_M\\_Walker@uhc.com](mailto:David_M_Walker@uhc.com).

Sincerely,



David M. Walker, ASA, MAAA, FLMI  
Director, Actuarial Services