

SERFF Tracking Number: AFDL-125953376 State: Arkansas
Filing Company: American Public Life Insurance Company State Tracking Number: 41282
Company Tracking Number: APLHR26
TOI: H21 Health - Other Sub-TOI: H21.000 Health - Other
Product Name: APLHR26
Project Name/Number: APLHR26/APLHR26

Filing at a Glance

Company: American Public Life Insurance Company

Product Name: APLHR26 SERFF Tr Num: AFDL-125953376 State: ArkansasLH
TOI: H21 Health - Other SERFF Status: Closed State Tr Num: 41282
Sub-TOI: H21.000 Health - Other Co Tr Num: APLHR26 State Status: Approved-Closed
Filing Type: Form Co Status: Reviewer(s): Rosalind Minor
Authors: Janice Farmer, Shari Vick, Disposition Date: 01/13/2009
Ashlie Snyder
Date Submitted: 01/08/2009 Disposition Status: Approved-Closed
Implementation Date Requested: On Approval Implementation Date:

State Filing Description:

General Information

Project Name: APLHR26 Status of Filing in Domicile: Pending
Project Number: APLHR26 Date Approved in Domicile:
Requested Filing Mode: Review & Approval Domicile Status Comments:
Explanation for Combination/Other: Market Type: Group
Submission Type: New Submission Group Market Size: Small and Large
Overall Rate Impact: Group Market Type: Employer, Association
Filing Status Changed: 01/13/2009 Deemer Date:
State Status Changed: 01/13/2009
Corresponding Filing Tracking Number:
Filing Description:

American Fidelity Assurance Company is filing the above listed form for approval with your Department on behalf of American Public Life Insurance Company. A letter of authorization is enclosed.

Enclosed for your approval is the above captioned form. This is a new form and does not replace any other form.

This rider will be used with all previously approved group accident and health policies. The Flesch score of APLHR26 is

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50.

I hereby certify that to the best of my knowledge the forms submitted herewith are in compliance in all respects with the provisions of the insurance laws, rules and regulations of your State and such forms contain no provisions previously disapproved by the Department.

Thank you for your assistance with this matter. If you have any questions, please feel free to call me at 1-800-654-8489, extension 7782. My email address is shari.vick@af-group.com

Company and Contact

Filing Contact Information

Shari Vick, Compliance Analyst II shari.vick@af-group.com
 2000 Classen Blvd (800) 654-8489 [Phone]
 Oklahoma City, OK 73106 (405) 523-5793[FAX]

Filing Company Information

American Public Life Insurance Company CoCode: 60801 State of Domicile: Oklahoma
 2305 Lakeland Drive Group Code: 330 Company Type: LAH
 Flowood, MS 39232 Group Name: State ID Number:
 (601) 936-2157 ext. [Phone] FEIN Number: 64-0349942

Filing Fees

Fee Required? Yes
 Fee Amount: \$75.00
 Retaliatory? Yes
 Fee Explanation: \$50 per submission
 \$25 per rider
 Per Company: No

COMPANY	AMOUNT	DATE PROCESSED	TRANSACTION #
American Public Life Insurance Company	\$75.00	01/08/2009	24895658

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Correspondence Summary

Dispositions

Status	Created By	Created On	Date Submitted
Approved-Closed	Rosalind Minor	01/13/2009	01/13/2009

SERFF Tracking Number: *AFDL-125953376* *State:* *Arkansas*
Filing Company: *American Public Life Insurance Company* *State Tracking Number:* *41282*
Company Tracking Number: *APLHR26*
TOI: *H21 Health - Other* *Sub-TOI:* *H21.000 Health - Other*
Product Name: *APLHR26*
Project Name/Number: *APLHR26/APLHR26*

Disposition

Disposition Date: 01/13/2009

Implementation Date:

Status: Approved-Closed

Comment:

Rate data does NOT apply to filing.

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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	Amendment Rider	Approved-Closed	Yes

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Form Schedule

Lead Form Number: APLHR26

Review Status	Form Number	Form Type Form Name	Action	Action Specific Data	Readability	Attachment
Approved-Closed	APLHR26	Policy/Cont Amendment Rider ract/Fratern al Certificate: Amendmen t, Insert Page, Endorseme nt or Rider	Initial		50	APLHR26 Add Covered Person.pdf



American Public Life Insurance Company

A member of the American Fidelity Group

2305 Lakeland Drive, Flowood, Mississippi 39232
(601) 936-6600 • (800) 256-8606

Amendment Rider

This rider is a part of the policy/certificate to which it is attached. It is subject to all the provisions of the policy/certificate that are not in conflict with the provisions of this rider. This rider will terminate on the same date as the policy/certificate to which it is attached.

In accordance with Your written request for policy/certificate change, it is understood and agreed that [INSERT NAME], [spouse/dependent child] of the insured, is hereby added to the coverage of said policy/certificate.

With said change in policy/certificate, it is understood and agreed that the [weekly/bi-weekly/semi-monthly/monthly/monthly bank draft/semi-annual/annual/other] premium will [remain at/now be] \$[XX.xx].

Said changes in policy to be effective [INSERT EFFECTIVE DATE].

Handwritten signature of Sharon D. Starnes in black ink.

Assistant Secretary

Handwritten signature of William F. Weems in black ink.

Vice President

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Rate Information

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Supporting Document Schedules

Satisfied -Name:	Certification/Notice	Review Status:	Approved-Closed	01/13/2009
Comments:				
Attachment:				
	AR FLESCH HEALTH.pdf			
Bypassed -Name:	Application	Review Status:	Approved-Closed	01/13/2009
Bypass Reason:	n/a			
Comments:				
Bypassed -Name:	Health - Actuarial Justification	Review Status:	Approved-Closed	01/13/2009
Bypass Reason:	n/a			
Comments:				
Bypassed -Name:	Outline of Coverage	Review Status:	Approved-Closed	01/13/2009
Bypass Reason:	n/a			
Comments:				



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ARKANSAS FLESCH CERTIFICATION

This is to certify that the Flesch scores for the enclosed forms are as follows:

Form Number	Flesch Score	Words Contained in Text
APLHR26	50	120

The forms are printed in not less than 10 point type, one point leaded.

The application has been scored by the Flesch method.

A handwritten signature in black ink, appearing to read 'Alex M Bagby', written over a horizontal line.

Alex M Bagby, A.S.A., M.A.A.A.
Vice President and Chief Risk Officer

January 6, 2009

Date