

SERFF Tracking Number: UTAC-126005454 State: Arkansas
 Filing Company: Great American Life Insurance Company State Tracking Number: 41890
 Company Tracking Number: GALIC-12-0002
 TOI: MS06 Medicare Supplement - Other Sub-TOI: MS06.000 Medicare Supplement - Other
 Product Name: Medicare Supplement Advertisements
 Project Name/Number: /GALIC-12-0002

Filing at a Glance

Company: Great American Life Insurance Company

Product Name: Medicare Supplement SERFF Tr Num: UTAC-126005454 State: ArkansasLH

Advertisements

TOI: MS06 Medicare Supplement - Other SERFF Status: Closed State Tr Num: 41890

Sub-TOI: MS06.000 Medicare Supplement - Other Co Tr Num: GALIC-12-0002 State Status: Filed-Closed

Other

Filing Type: Advertisement

Co Status:

Reviewer(s): Stephanie Fowler

Author: Melissa MacLaurin

Disposition Date: 01/26/2009

Date Submitted: 01/23/2009

Disposition Status: Filed

Implementation Date Requested: On Approval

Implementation Date:

State Filing Description:

General Information

Project Name:

Status of Filing in Domicile:

Project Number: GALIC-12-0002

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: 01/26/2009

State Status Changed: 01/26/2009

Deemer Date:

Corresponding Filing Tracking Number:

Filing Description:

Re: GREAT AMERICAN® LIFE INSURANCE COMPANY

NAIC # 63312 FEIN # 13-1935920

NEW FORMS

DESCRIPTION

GALIC-12-0002 Medicare Supplement Advertising Flyer

GALIC-12-0004-AR Medicare Supplement Advertising Flyer

GALIC-12-0005 Medicare Supplement Advertising Flyer

SERFF Tracking Number: UTAC-126005454 State: Arkansas
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TO BE USED WITH APPROVED POLICY FORMS

1MSPA0001-AR Medicare Supplement Policy Plan A
1MSPB0001-AR Medicare Supplement Policy Plan B
1MSPC0001-AR Medicare Supplement Policy Plan C
1MSPD0001-AR Medicare Supplement Policy Plan D
1MSPF0001-AR Medicare Supplement Policy Plan F
1MSPG0001-AR Medicare Supplement Policy Plan G

-Approved March 02, 2004

Dear Sir or Madam:

The following forms are being submitted for your review and approval. These forms are new and do not replace any forms previously approved by your department.

These forms will be marketed by career and independent agents.

If you should have any questions regarding this submission, please feel free to call me toll-free at 1-866-459-4272, extension 4794 or fax me at (512) 451-0357. My email address is mmaclaurin@gafri.com.

Thank you in advance for your consideration.

Sincerely,

Melissa MacLaurin
Compliance Analyst

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Company and Contact

Filing Contact Information

Melissa MacLaurin, Compliance Analyst mmaclaurin@gafri.com
 11200 Lakeline Blvd Ste 100 (512) 807-4794 [Phone]
 Austin, TX 78717

Filing Company Information

Great American Life Insurance Company CoCode: 63312 State of Domicile: Ohio
 11200 Lakeline Blvd., Suite 100 Group Code: 84 Company Type: Insurance
 Company
 P.O. Box 559002
 Austin, TX 78755-9002 Group Name: State ID Number:
 (800) 880-8824 ext. [Phone] FEIN Number: 13-1935920

Filing Fees

Fee Required? Yes
 Fee Amount: \$75.00
 Retaliatory? No
 Fee Explanation: \$25 per form times 3
 Per Company: No

COMPANY	AMOUNT	DATE PROCESSED	TRANSACTION #
Great American Life Insurance Company	\$75.00	01/23/2009	25234030

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Correspondence Summary

Dispositions

Status	Created By	Created On	Date Submitted
Filed	Stephanie Fowler	01/26/2009	01/26/2009

SERFF Tracking Number: *UTAC-126005454* *State:* *Arkansas*
Filing Company: *Great American Life Insurance Company* *State Tracking Number:* *41890*
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Product Name: *Medicare Supplement Advertisements*
Project Name/Number: */GALIC-12-0002*

Disposition

Disposition Date: 01/26/2009

Implementation Date:

Status: Filed

Comment:

Rate data does NOT apply to filing.

SERFF Tracking Number: UTAC-126005454 State: Arkansas
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 Project Name/Number: /GALIC-12-0002

Item Type	Item Name	Item Status	Public Access
Supporting Document	CERTIFICATION	Accepted for Informational Purposes	Yes
Supporting Document	COVER LETTER	Accepted for Informational Purposes	Yes
Form	Medicare Supplement Advertising Flyer	Filed	Yes
Form	Medicare Supplement Advertising Flyer	Filed	Yes
Form	Medicare Supplement Advertising Flyer	Filed	Yes

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Form Schedule

Lead Form Number: GALIC-12-0002

Review Status	Form Number	Form Type	Form Name	Action	Action Specific Data	Readability	Attachment
Filed	GALIC-12-0002	Advertising	Medicare Supplement Advertising Flyer	Initial			GALIC-12-0002 (3-3-08).pdf
Filed	GALIC-12-0004-AR	Advertising	Medicare Supplement Advertising Flyer	Initial			GALIC-12-0004-AR (3-27-08).pdf
Filed	GALIC-12-0005	Advertising	Medicare Supplement Advertising Flyer	Initial			GALIC-12-0005 (3-6-08).pdf



ATTENTION SENIORS

At Great American Life Insurance Company,[®] we offer a variety of Medicare Supplement policies* in [state]. If you are in the market for a Medicare Supplement insurance policy, we invite you to learn more about the service, value and security we can provide.

FOR MORE INFORMATION CALL:

[agent name]

[agent phone number]



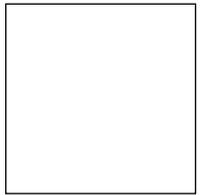
P.O. Box 559002
Austin, TX 78755-9002

GALIC-12-0002

* For specific cost and further details of the coverage, including exclusions, and reductions or limitations and the terms under which the policy may be continued in force, see your agent or write to the company. Great American Life Insurance Company is not connected with Medicare, Social Security, or any other governmental agency. Do not send any money. You must first complete an application to obtain benefits.

3/3/08

John Q. Agent
1234 Mainstreet Blvd.
Anytown, USA 12345



Steve Senior
5678 Mainstreet Blvd.
Anytown, USA 12345

MEDICARE RECIPIENTS



Have we got a **Medicare Supplement insurance policy** for you...

This is a solicitation for insurance. An insurance agent will contact you.



PLACE
STAMP
HERE

John Q. Agent
1234 Mainstreet Blvd.
Anytown, USA 12345

THAT'S RIGHT!

Great American Life Insurance Company® is offering [Plan F] in Arkansas for:

SAMPLE RATE FOR PLAN F

\$112.⁰⁰/month

Plans A, B, C & D also available.
Rates vary by area.

FOR MORE INFORMATION FILL OUT THE REPLY CARD BELOW!

Yes! I am interested in being contacted about Great American Life Insurance Company's Medicare Supplement policies.

NAME _____ EMAIL _____

ADDRESS _____

TELEPHONE # _____ BEST TIME TO CALL _____

Please fill out the appropriate information, detach the lower portion, fold and mail!
[Agent Name] will contact you with more information.

Note: This is a commercial message from Great American Life Insurance, a private insurance company which is not an agency of Social Security, Medicare or any other governmental agency. The insurance company will contact you.

GALIC-12-0004-AR

3/27/08

EXCLUSIONS AND LIMITATIONS

THIS IS A LIMITED POLICY which should be used to supplement your Medicare coverage. Neither Great American Life Insurance Company (GALIC) nor its agents are connected with Medicare or any government agency. Premium and benefits vary by plan selected. Plan availability varies by state.

This mailer applies to Medicare Supplement policy form: [Policy Form Number]. All of the GALIC Medicare Supplement policies are guaranteed renewable for life. Premiums can change on a class basis. The policy cannot be cancelled because of health changes. We guarantee to renew the policy each time the premium is received within 31 days of its due date.

Pre-existing conditions are not covered for the first six months. However, if you have continuous creditable coverage or are replacing an existing Medicare Supplement policy, you will get credit for the time you were covered toward meeting this six month exclusionary period. A pre-existing condition is an injury or illness for which medical advice or treatment was recommended or given by a physician within six months prior to the Effective Date.

These policies will not pay benefits for:

1. Any expense which You are not legally obligated to pay;
2. Any services that are not medically necessary as determined by Medicare;
3. Any portion of any expense for which payment is made by Medicare or for which payment would have been made by Medicare if You were enrolled in Parts A and B of Medicare;
4. Any type of expense not a Medicare Eligible Expense except as provided for in the policy



[AGENT NAME / ADDRESS / PHONE NUMBER]

GALIC-12-0004-AR

3/27/08

MEDICARE SUPPLEMENT INSURANCE

By law, all carriers must provide the same benefits for Medicare Supplement insurance policies. What separates us from the competition is the care, talent and technology that we strive to give to our policy-holders.

When it comes to Medicare supplement insurance,
We Make the Difference.



FOR MORE INFORMATION CALL: [AGENT NAME, AGENT PHONE NUMBER]

For specific cost and further details of the coverage, including exclusions, and reductions or limitations and the terms under which the policy may be continued in force, see your agent or write to the company. Great American Life Insurance Company® is not connected with Medicare, Social Security, or any other governmental agency. Do not send any money. You must first complete an application to obtain benefits.

GALIC-12-0005



P.O. Box 559002
Austin, TX 78755-9002

3/6/08

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GALIC-12-0005



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Austin, TX 78755-9002

3/6/08

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Rate Information

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Supporting Document Schedules

Satisfied -Name: CERTIFICATION

Review Status:

Accepted for Informational 01/26/2009
Purposes

Comments:

Attachment:

AR Certification.pdf

Satisfied -Name: COVER LETTER

Review Status:

Accepted for Informational 01/26/2009
Purposes

Comments:

Attachment:

AR Cover Letter.pdf

Arkansas Certification

This submission meets the provisions of Rule and Regulation 19, "Unfair sex discrimination in the sale of insurance" as well as all applicable requirements of this Department.

Melina M. Fauci

, Compliance Analyst

Name and Title

January 23, 2009

Date



Great American Life
Insurance Company
P.O. Box 559002
Austin, Texas 78755-9002

Shipping Address:
11200 Lakeline Blvd.
Ste.100
Austin, Texas 78717

Phone 800-880-2745
Fax 512-451-0357

January 23, 2009

Policy Form Filing Division
Life and Health Division
Arkansas Department of Insurance
1200 West Third Street
Little Rock, AR 72201-1904

Re: **GREAT AMERICAN® LIFE INSURANCE COMPANY**
NAIC # 63312 **FEIN # 13-1935920**

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Melissa MacLaurin
Compliance Analyst