

SERFF Tracking Number: UHLC-126332285 State: Arkansas
Filing Company: UnitedHealthcare Insurance Company State Tracking Number: 43699
Company Tracking Number: SA25026ST
TOI: MS05G Group Medicare Supplement - Standard Sub-TOI: MS05G.001 Plan A
Plans
Product Name: MEDICARE SUPPLEMENT
Project Name/Number: MEMBER SERVICES STUFFER/SA25025ST

Filing at a Glance

Company: UnitedHealthcare Insurance Company

Product Name: MEDICARE SUPPLEMENT SERFF Tr Num: UHLC-126332285 State: Arkansas
TOI: MS05G Group Medicare Supplement - Standard Plans SERFF Status: Closed-Filed State Tr Num: 43699
Sub-TOI: MS05G.001 Plan A Co Tr Num: SA25026ST State Status: Filed-Closed
Filing Type: Advertisement Reviewer(s): Stephanie Fowler
Author: Bobbie Walton Disposition Date: 11/17/2009
Date Submitted: 10/06/2009 Disposition Status: Filed
Implementation Date Requested: On Approval Implementation Date:

State Filing Description:

General Information

Project Name: MEMBER SERVICES STUFFER
Project Number: SA25025ST
Requested Filing Mode: Review & Approval
Explanation for Combination/Other:
Submission Type: New Submission
Overall Rate Impact:
Filing Status Changed: 11/17/2009

Status of Filing in Domicile: Pending
Date Approved in Domicile:
Domicile Status Comments:
Market Type: Group
Group Market Size: Large
Group Market Type: Association
Explanation for Other Group Market Type:
State Status Changed: 11/17/2009
Created By: Bobbie Walton
Corresponding Filing Tracking Number:

Deemer Date:

Submitted By: Bobbie Walton

Filing Description:

MEDICARE SUPPLEMENT ADVERTISING MATERIAL

Company and Contact

Filing Contact Information

Susan Cipollo, Director
680 Blair Mill Rd.
Horsham, PA 19044

Susan_J_Cipollo@uhc.com
215-902-8444 [Phone]
215-902-8813 [FAX]

Filing Company Information

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UnitedHealthcare Insurance Company CoCode: 79413 State of Domicile: Connecticut
 450 Columbus Boulevard Group Code: 707 Company Type: Life and Health
 PO Box 150450 Group Name: State ID Number:
 Hartford, CT 06115-0450 FEIN Number: 36-2739571
 (860) 702-5000 ext. [Phone]

Filing Fees

Fee Required? Yes
 Fee Amount: \$25.00
 Retaliatory? No
 Fee Explanation: \$25 per component - 1 component = \$25
 Per Company: No

COMPANY	AMOUNT	DATE PROCESSED	TRANSACTION #
UnitedHealthcare Insurance Company	\$25.00	10/06/2009	31100542

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Correspondence Summary

Dispositions

Status	Created By	Created On	Date Submitted
Filed	Stephanie Fowler	11/17/2009	11/17/2009

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Disposition

Disposition Date: 11/17/2009

Implementation Date:

Status: Filed

Comment:

Rate data does NOT apply to filing.

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Schedule Form	Schedule Item	Schedule Item Status	Public Access
	STUFFER	Filed	Yes

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Form Schedule

Lead Form Number: SA25026ST

Schedule Item Status	Form Number	Form Type	Form Name	Action	Action Specific Data	Readability	Attachment
Filed 11/17/2009 T	SA25025S	Advertising	STUFFER	Initial		45.000	SA25025ST.pdf

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These are additional insured member services apart from the AARP Medicare Supplement Plan benefits, are not insurance programs and may be discontinued at any time.

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