

SERFF Tracking Number: UTAC-126332195 State: Arkansas
Filing Company: Central Reserve Life Insurance Company State Tracking Number: 43823
Company Tracking Number: CRL 2009 AR
TOI: MS051 Individual Medicare Supplement - Sub-TOI: MS051.001 Plan A
Standard Plans
Product Name: CRL 2009 STANDARD PLANS
Project Name/Number: /

Filing at a Glance

Company: Central Reserve Life Insurance Company

Product Name: CRL 2009 STANDARD PLANS SERFF Tr Num: UTAC-126332195 State: Arkansas

TOI: MS051 Individual Medicare Supplement - SERFF Status: Closed-Approved- State Tr Num: 43823

Standard Plans Closed

Sub-TOI: MS051.001 Plan A

Co Tr Num: CRL 2009 AR

State Status: Approved-Closed

Filing Type: Rate

Author: Naz Melyas

Reviewer(s): Stephanie Fowler

Date Submitted: 10/20/2009

Disposition Date: 11/19/2009

Disposition Status: Approved-

Closed

Implementation Date Requested: 01/01/2010

Implementation Date: 01/01/2010

State Filing Description:

General Information

Project Name:

Status of Filing in Domicile: Pending

Project Number:

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: 9%

Group Market Type:

Filing Status Changed: 11/19/2009

Explanation for Other Group Market Type:

State Status Changed: 11/19/2009

Deemer Date:

Created By: Naz Melyas

Submitted By: Naz Melyas

Corresponding Filing Tracking Number:

Filing Description:

Enclosed for your review and approval, please find copies of an Actuarial Memorandum and rate sheets in support of a proposed rate increase on the above referenced product. The rate increase will be effective on the policy anniversary date subsequent to state insurance department approval and in accordance with state policyholder notification requirements.

This filing applies to all new and in-force policies in this state with the above referenced form number.

Enclosed are any necessary certifications, transmittals and/or filing fees as may be required by your state.

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If you have any questions or comments regarding this filing, please feel free to contact me at (800) 880-8824 extension 1595 or at nmelyas@gafri.com. Our fax number is 512-451-1399.
 Sincerely,

Naz Melyas

Company and Contact

Filing Contact Information

Naz Melyas, Actuarial Analyst NMelyas@gafri.com
 11200 Lakeline Boulevard #100 866-459-4272 [Phone] 1595 [Ext]
 Austin, TX 78717

Filing Company Information

Central Reserve Life Insurance Company CoCode: 61727 State of Domicile: Ohio
 11200 Lakeline Blvd., Suite 100 Group Code: 84 Company Type: Life & Health
 P. O. Box 26580 Group Name: State ID Number:
 Austin, TX 78755-0580 FEIN Number: 34-0970995
 (800) 880-8824 ext. [Phone]

Filing Fees

Fee Required? Yes
 Fee Amount: \$50.00
 Retaliatory? Yes
 Fee Explanation: OH FEE SCHEDULE
 Per Company: No

COMPANY	AMOUNT	DATE PROCESSED	TRANSACTION #
Central Reserve Life Insurance Company	\$50.00	10/20/2009	31407068

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Correspondence Summary

Dispositions

Status	Created By	Created On	Date Submitted
Approved-Closed	Stephanie Fowler	11/19/2009	11/19/2009

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Disposition

Disposition Date: 11/19/2009

Implementation Date: 01/01/2010

Status: Approved-Closed

Comment: The requested rate increase has been approved to be implemented on or after January 1, 2010. This approval is subject to the following:

- Increases will not be given more frequently than once in a twelve-month period
- Both the insured and agent shall be notified by the insurer of its intention to increase the rate for renewal not less than thirty (30) days prior to the effective date of the renewal.

Company Name:	Overall % Indicated Change:	Overall % Rate Impact:	Written Premium Change for this Program:	# of Policy Holders Affected for this Program:	Written Premium for this Program:	Maximum % Change (where required):	Minimum % Change (where required):
Central Reserve Life Insurance Company	9.000%	9.000%	\$18,092	65	\$201,019	9.000%	0.000%

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Rate Information

Rate data applies to filing.

Filing Method: SERFF
Rate Change Type: Increase
Overall Percentage of Last Rate Revision: 13.100%
Effective Date of Last Rate Revision: 01/24/2009
Filing Method of Last Filing: SERFF

Company Rate Information

Company Name:	Overall % Indicated Change:	Overall % Rate Impact:	Written Premium Change for this Program:	# of Policy Holders Affected for this Program:	Written Premium for this Program:	Maximum % Change (where required):	Minimum % Change (where required):
Central Reserve Life Insurance Company	9.000%	9.000%	\$18,092	65	\$201,019	9.000%	0.000%

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Rate/Rule Schedule

Schedule Item Status:	Document Name:	Affected Form Numbers: (Separated with commas)	Rate Action:	Rate Action Information:	Attachments
Approved 11/19/2009	RATES	3IA, 3IC, 3ID, 3IE, 3IF, 3IG, 3IK	New		Exhibit 4 - Proposed rates.pdf

Central Reserve Life Insurance Company

Rate Chart

Form 3IA
 Medicare Supplement Plan A
 Issue Age Annual Rates
 Arkansas Proposed Rates

Attained Age	CURRENT		PROPOSED	
	Non-Smoker	Smoker	Non-Smoker	Smoker
65+	3,409.35	3,749.69	3,716.19	4,087.16

Area Factors: 1 1.000 720-723
 2 0.900 716-719, 724-729

Modal Factors: 0.5200 Semi-Annual
 0.2650 Quarter
 0.0850 Month

Central Reserve Life Insurance Company

Rate Chart

Form 31C
 Medicare Supplement Plan C
 Issue Age Annual Rates
 Arkansas Proposed Rates

Attained Age	CURRENT		PROPOSED	
	Non-Smoker	Smoker	Non-Smoker	Smoker
65+	4,200.70	4,620.77	4,578.76	5,036.64

Area Factors: 1 1.000 720-723
 2 0.900 716-719, 724-729

Modal Factors: 0.5200 Semi-Annual
 0.2650 Quarter
 0.0850 Month

Central Reserve Life Insurance Company

Rate Chart

Form 3ID
Medicare Supplement Plan D
Issue Age Annual Rates
Arkansas Proposed Rates

Attained Age	CURRENT		PROPOSED	
	Non-Smoker	Smoker	Non-Smoker	Smoker
65+	3,470.04	3,817.52	3,782.34	4,161.10

Area Factors: 1 1.000 720-723
 2 0.900 716-719, 724-729

Modal Factors: 0.5200 Semi-Annual
 0.2650 Quarter
 0.0850 Month

Central Reserve Life Insurance Company

Rate Chart

Form 3IE

Medicare Supplement Plan E

Issue Age Annual Rates

Arkansas Proposed Rates

Attained Age	CURRENT		PROPOSED	
	Non-Smoker	Smoker	Non-Smoker	Smoker
65+	2,612.05	2,872.66	2,847.13	3,131.20

Area Factors: 1 1.000 720-723
 2 0.900 716-719, 724-729

Modal Factors: 0.5200 Semi-Annual
 0.2650 Quarter
 0.0850 Month

Central Reserve Life Insurance Company

Rate Chart

Form 3IK

Medicare Supplement Plan F High Deductible

Issue Age Annual Rates

Arkansas Proposed Rates

Attained Age	CURRENT		PROPOSED	
	Non-Smoker	Smoker	Non-Smoker	Smoker
65+	998.00	1,097.00	998.00	1,097.00

Area Factors: 1 1.000 720-723
 2 0.900 716-719, 724-729

Modal Factors: 0.5200 Semi-Annual
 0.2650 Quarter
 0.0850 Month

Central Reserve Life Insurance Company

Rate Chart

Form 3IF
 Medicare Supplement Plan F
 Issue Age Annual Rates
 Arkansas Proposed Rates

Attained Age	CURRENT		PROPOSED	
	Non-Smoker	Smoker	Non-Smoker	Smoker
65+	3,866.86	4,254.45	4,214.88	4,637.35

Area Factors: 1 1.000 720-723
 2 0.900 716-719, 724-729

Modal Factors: 0.5200 Semi-Annual
 0.2650 Quarter
 0.0850 Month

Central Reserve Life Insurance Company

Rate Chart

Form 3IG
 Medicare Supplement Plan G
 Issue Age Annual Rates
 Arkansas Proposed Rates

Attained Age	CURRENT		PROPOSED	
	Non-Smoker	Smoker	Non-Smoker	Smoker
65+	3,481.94	3,830.61	3,795.31	4,175.36

Area Factors: 1 1.000 720-723
 2 0.900 716-719, 724-729

Modal Factors: 0.5200 Semi-Annual
 0.2650 Quarter
 0.0850 Month