

SERFF Tracking Number: CEUL-126395203 State: Arkansas  
Filing Company: Central United Life Insurance Company State Tracking Number: 44210  
Company Tracking Number: AR\_CEP350\_2009  
TOI: H07I Individual Health - Specified Disease - Limited Benefit Sub-TOI: H07I.002A Dread Disease - Cancer Only  
Product Name: CEP350  
Project Name/Number: Cancer Group CEP350/

## Filing at a Glance

Company: Central United Life Insurance Company

Product Name: CEP350 SERFF Tr Num: CEUL-126395203 State: Arkansas  
TOI: H07I Individual Health - Specified Disease - Limited Benefit SERFF Status: Closed-Approved- Closed State Tr Num: 44210  
Sub-TOI: H07I.002A Dread Disease - Cancer Only Co Tr Num: AR\_CEP350\_2009 State Status: Approved-Closed  
Filing Type: Rate

Author: Velvet Giron

Date Submitted: 12/01/2009

Reviewer(s): Rosalind Minor

Disposition Date: 12/10/2009

Disposition Status: Approved-Closed

Implementation Date Requested: 02/01/2009

Implementation Date:

State Filing Description:

## General Information

Project Name: Cancer Group CEP350  
Project Number:  
Requested Filing Mode: Review & Approval  
Explanation for Combination/Other:  
Submission Type: New Submission  
Overall Rate Impact: 15%  
Filing Status Changed: 12/10/2009

Status of Filing in Domicile: Pending

Date Approved in Domicile:

Domicile Status Comments:

Market Type: Individual

Group Market Size:

Group Market Type:

Explanation for Other Group Market Type:

State Status Changed: 12/10/2009

Created By: Velvet Giron

Corresponding Filing Tracking Number:

Deemer Date:

Submitted By: Velvet Giron

Filing Description:

Re:

NAIC # 61883 Central United Life Insurance

Rate Increase: CANCER GROUP CEP350

An actuarial study of our business in this line has revealed that our current rates are inadequate to support our experience. We have included the required Actuarial Memorandum detailing the actuarial analysis of our experience.

SERFF Tracking Number: CEUL-126395203 State: Arkansas  
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 Company Tracking Number: AR\_CEP350\_2009  
 TOI: H071 Individual Health - Specified Disease - Limited Benefit Sub-TOI: H071.002A Dread Disease - Cancer Only  
 Product Name: CEP350  
 Project Name/Number: Cancer Group CEP350/

The Company is requesting a 15% rate increase. The increase will be applied uniformly to all policyholders within the state.

We appreciate the Department's time and consideration in the review of this filing.

## Company and Contact

### Filing Contact Information

Velvet Giron, Statistician Technician I  
 Wortham Tower  
 2727 Allen Parkway  
 Suite 500  
 Houston, TX 99019-2100

vgiron@manhattanlife.com  
 713-529-0045 [Phone] 5109 [Ext]  
 713-529-9425 [FAX]

### Filing Company Information

Central United Life Insurance Company  
 Wortham Tower  
 2727 Allen Parkway  
 Suite 500  
 Houston, TX 77019-2100  
 (713) 529-0045 ext. [Phone]

CoCode: 61883  
 Group Code:  
 Group Name:  
 FEIN Number: 42-0884060

State of Domicile: Arkansas  
 Company Type:  
 State ID Number:

## Filing Fees

Fee Required? Yes  
 Fee Amount: \$50.00  
 Retaliatory? No  
 Fee Explanation: Rates=\$50.00  
 Per Company: No

COMPANY	AMOUNT	DATE PROCESSED	TRANSACTION #
Central United Life Insurance Company	\$50.00	12/01/2009	32379042

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TOI: H071 Individual Health - Specified Disease - Limited Benefit Sub-TOI: H071.002A Dread Disease - Cancer Only  
Product Name: CEP350  
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## Correspondence Summary

### Dispositions

Status	Created By	Created On	Date Submitted
Approved-Closed	Rosalind Minor	12/10/2009	12/10/2009

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## Disposition

Disposition Date: 12/10/2009

Implementation Date:

Status: Approved-Closed

Comment:

We have approved your request of a 15% level rate increase on this submission. The approval is subject to the following conditions:

1. Rate increases will not be given prior to the first annual anniversary date of any policy.
2. After the first annual anniversary date of any policy, increases will not be given more frequently than once in a twelve (12) month period.
3. All increases in rates, other than a change in age or an individual moving to another geographical area, must be submitted to our Department for approval.

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 United Life Insurance Company	15.000%	15.000%	\$144,105	264	\$960,698	15.000%	15.000%

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<b>Schedule</b>	<b>Schedule Item</b>	<b>Schedule Item Status</b>	<b>Public Access</b>
<b>Supporting Document</b>	Health - Actuarial Justification	Approved-Closed	No
<b>Rate</b>	Appendix D	Approved-Closed	No

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**Rate Information**

Rate data applies to filing.

**Filing Method:** serff  
**Rate Change Type:** Increase  
**Overall Percentage of Last Rate Revision:** 12.500%  
**Effective Date of Last Rate Revision:** 02/01/2009  
**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 United Life Insurance Company	15.000%	15.000%	\$144,105	264	\$960,698	15.000%	15.000%