

SERFF Tracking Number: ELCC-126318222 State: Arkansas  
 Filing Company: Equitable Life & Casualty Insurance Company State Tracking Number: 43589  
 Company Tracking Number: 990RI2009 AR  
 TOI: MS02I Individual Medicare Supplement - Pre- Standardized Sub-TOI: MS02I.000 Medicare Supplement - Pre- Standardized  
 Product Name: Medicare Supplement  
 Project Name/Number: 990RI2009 AR/990RI2009 AR

## Filing at a Glance

Company: Equitable Life & Casualty Insurance Company

Product Name: Medicare Supplement SERFF Tr Num: ELCC-126318222 State: Arkansas  
 TOI: MS02I Individual Medicare Supplement - Pre-Standardized SERFF Status: Closed-Approved- Closed State Tr Num: 43589  
 Sub-TOI: MS02I.000 Medicare Supplement - Pre-Standardized Co Tr Num: 990RI2009 AR State Status: Approved-Closed  
 Filing Type: Rate Reviewer(s): Stephanie Fowler  
 Authors: Mark Banks, Jana Peterson, Kathy Foster Disposition Date: 12/15/2009  
 Date Submitted: 09/24/2009 Disposition Status: Approved-Closed  
 Implementation Date Requested: 11/01/2009 Implementation Date:

State Filing Description:

## General Information

Project Name: 990RI2009 AR Status of Filing in Domicile: Not Filed  
 Project Number: 990RI2009 AR 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: 12/15/2009 Explanation for Other Group Market Type:  
 State Status Changed: 12/15/2009  
 Deemer Date: Created By: Jana Peterson  
 Submitted By: Jana Peterson Corresponding Filing Tracking Number:  
 Filing Description:  
 Attached is an actuarial memorandum outlining our request for a rate increase on Medicare Supplement Policy Form 990.

We are seeking a 29.5% increase on the Alternative plan and 5.5% on the Ultimate plan. We are filing these rate increases to bring the cumulative lifetime loss ratio closer to the filed and approved loss ratio.

SERFF Tracking Number: ELCC-126318222 State: Arkansas  
 Filing Company: Equitable Life & Casualty Insurance Company State Tracking Number: 43589  
 Company Tracking Number: 990RI2009 AR  
 TOI: MS02I Individual Medicare Supplement - Pre- Standardized Sub-TOI: MS02I.000 Medicare Supplement - Pre- Standardized  
 Product Name: Medicare Supplement  
 Project Name/Number: 990RI2009 AR/990RI2009 AR

We intend for this increase to take effect on the later of November 1, 2009 or the date this rate revision is approved.

## Company and Contact

### Filing Contact Information

Jana Peterson, Compliance Specialist      Jana.Peterson@Equilife.com  
 3 Triad Center      877-579-3782 [Phone]  
 Suite 200      801-579-3781 [FAX]  
 Salt Lake City, UT 84180

### Filing Company Information

Equitable Life & Casualty Insurance Company      CoCode: 62952      State of Domicile: Utah  
 3 Triad Center      Group Code: -99      Company Type: Life and Health  
 Suite 200      Group Name:      State ID Number:  
 Salt Lake City, UT 84180      FEIN Number: 87-0129771  
 (801) 579-3400 ext. [Phone]

## Filing Fees

Fee Required?      Yes  
 Fee Amount:      \$50.00  
 Retaliatory?      No  
 Fee Explanation:      AR State Filing Fee  
 Per Company:      No

COMPANY	AMOUNT	DATE PROCESSED	TRANSACTION #
Equitable Life & Casualty Insurance Company	\$50.00	09/24/2009	30806275

SERFF Tracking Number: ELCC-126318222 State: Arkansas  
 Filing Company: Equitable Life & Casualty Insurance Company State Tracking Number: 43589  
 Company Tracking Number: 990RI2009 AR  
 TOI: MS021 Individual Medicare Supplement - Pre- Standardized Sub-TOI: MS021.000 Medicare Supplement - Pre- Standardized  
 Product Name: Medicare Supplement  
 Project Name/Number: 990RI2009 AR/990RI2009 AR

## Correspondence Summary

### Dispositions

Status	Created By	Created On	Date Submitted
Approved-Closed	Stephanie Fowler	12/15/2009	12/15/2009

### Objection Letters and Response Letters

Objection Letters				Response Letters		
Status	Created By	Created On	Date Submitted	Responded By	Created On	Date Submitted
Pending Industry Response	Stephanie Fowler	10/27/2009	10/27/2009	Jana Peterson	11/23/2009	11/23/2009

*SERFF Tracking Number:* ELCC-126318222      *State:* Arkansas  
*Filing Company:* Equitable Life & Casualty Insurance Company      *State Tracking Number:* 43589  
*Company Tracking Number:* 990RI2009 AR  
*TOI:* MS02I Individual Medicare Supplement - Pre-Standardized      *Sub-TOI:* MS02I.000 Medicare Supplement - Pre-Standardized  
*Product Name:* Medicare Supplement  
*Project Name/Number:* 990RI2009 AR/990RI2009 AR

## **Disposition**

Disposition Date: 12/15/2009

Implementation Date:

Status: Approved-Closed

Comment: The negotiated rate increases of 15% on the Alternative plan and 5.5% on the Ultimate plan have been approved to be implemented. 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.

Rate data does NOT apply to filing.

SERFF Tracking Number: ELCC-126318222 State: Arkansas  
 Filing Company: Equitable Life & Casualty Insurance Company State Tracking Number: 43589  
 Company Tracking Number: 990RI2009 AR  
 TOI: MS021 Individual Medicare Supplement - Pre- Standardized Sub-TOI: MS021.000 Medicare Supplement - Pre- Standardized  
 Product Name: Medicare Supplement  
 Project Name/Number: 990RI2009 AR/990RI2009 AR

Schedule	Schedule Item	Schedule Item Status	Public Access
<b>Supporting Document (revised)</b>	Health - Actuarial Justification	Accepted for Informational Purposes	No
<b>Supporting Document</b>	Health - Actuarial Justification	Disapproved	No
<b>Rate (revised)</b>	Attachment A	Accepted for Informational Purposes	No
<b>Rate</b>	Attachment A	Disapproved	No
<b>Rate (revised)</b>	Attachment B	Accepted for Informational Purposes	No
<b>Rate</b>	Attachment B	Disapproved	No
<b>Rate (revised)</b>	Attachment C	Approved	Yes
<b>Rate</b>	Attachment C	Disapproved	No

SERFF Tracking Number: ELCC-126318222 State: Arkansas  
Filing Company: Equitable Life & Casualty Insurance Company State Tracking Number: 43589  
Company Tracking Number: 990RI2009 AR  
TOI: MS02I Individual Medicare Supplement - Pre- Standardized Sub-TOI: MS02I.000 Medicare Supplement - Pre- Standardized  
Product Name: Medicare Supplement  
Project Name/Number: 990RI2009 AR/990RI2009 AR

## Objection Letter

Objection Letter Status Pending Industry Response  
Objection Letter Date 10/27/2009  
Submitted Date 10/27/2009  
Respond By Date 11/27/2009

Dear Jana Peterson,

This will acknowledge receipt of the captioned filing.

Based on the possible impact a 29.5% increase would have on the citizens of Arkansas, we would be willing to accept a 15% increase for the plans contained in this filing.

Please feel free to contact me if you have questions.

Sincerely,  
Stephanie Fowler

## Response Letter

Response Letter Status Submitted to State  
Response Letter Date 11/23/2009  
Submitted Date 11/23/2009

Dear Stephanie Fowler,

### Comments:

I received Stephanie Fowler's letter dated 10/23/09 and we are willing to reduce the rate increase request to 15% on the Alternative plan.

### Response 1

Comments: Attached is an actuarial memorandum outlining our request for a rate increase on Medicare Supplement Policy Form 990. We are seeking a 15% increase on the Alternative plan and 5.5% on the Ultimate plan. We are filing these rate increases to bring the cumulative lifetime loss ratio closer to the filed and approved loss ratio. We intend for this increase to take effect on the later of December 15, 2009 or the date this rate revision is approved.

### Changed Items:

### Supporting Document Schedule Item Changes

SERFF Tracking Number: ELCC-126318222 State: Arkansas  
 Filing Company: Equitable Life & Casualty Insurance Company State Tracking Number: 43589  
 Company Tracking Number: 990RI2009 AR  
 TOI: MS02I Individual Medicare Supplement - Pre- Standardized Sub-TOI: MS02I.000 Medicare Supplement - Pre- Standardized  
 Product Name: Medicare Supplement  
 Project Name/Number: 990RI2009 AR/990RI2009 AR  
 Satisfied -Name: Health - Actuarial Justification  
 Comment:

No Form Schedule items changed.

**Rate/Rule Schedule Item Changes**

Document Name:	Affected Form Numbers:	Rate Action:	Rate Action Information:	Attach Document:
Attachment A	990	Revised	Previous State Filing Number 39602 Percent Rate Change Request 29.5	
<b>Previous Version</b>				
Attachment A	990	Revised	Previous State Filing Number 39602 Percent Rate Change Request 29.5	
Attachment B	990	Revised	Previous State Filing Number 39602 Percent Rate Change Request 29.5	
<b>Previous Version</b>				
Attachment B	990	Revised	Previous State Filing Number 39602 Percent Rate Change Request 29.5	
Attachment C	990	Revised	Previous State Filing Number 39602 Percent Rate Change Request 29.5	
<b>Previous Version</b>				
Attachment C	990	Revised	Previous State Filing Number 39602 Percent Rate Change Request 29.5	

SERFF Tracking Number: ELCC-126318222 State: Arkansas  
 Filing Company: Equitable Life & Casualty Insurance Company State Tracking Number: 43589  
 Company Tracking Number: 990RI2009 AR  
 TOI: MS021 Individual Medicare Supplement - Pre- Standardized Sub-TOI: MS021.000 Medicare Supplement - Pre- Standardized  
 Product Name: Medicare Supplement  
 Project Name/Number: 990RI2009 AR/990RI2009 AR

Thank you for your consideration in this matter. If you should have any questions, please call our Actuary, Rick Klar Jr., at (801) 579-3414.

Sincerely,  
 Jana Peterson, Kathy Foster, Mark Banks

## Rate/Rule Schedule

Schedule Item Status:	Document Name:	Affected Form Numbers: (Separated with commas)	Rate Action:	Rate Action Information:	Attachments
Approved 12/15/2009	Attachment C	990	Revised	Previous State Filing Number: Percent Rate Change Request: 39602 29.500	Attachment C.pdf

## Attachment C

### In-force Policy Count History for Form 990 Arkansas

<u>Calendar Year</u>	<u>Nationwide</u>		<u>Total</u>
	<u>Ultimate</u>	<u>Alternative</u>	
1990	2,734	568	3,302
1991	17,504	3,636	21,140
1992	15,657	2,553	18,210
1993	11,009	1,592	12,601
1994	8,933	1,226	10,159
1995	7,684	1,009	8,693
1996	6,443	837	7,280
1997	5,224	684	5,908
1998	4,493	585	5,078
1999	3,621	476	4,097
2000	3,193	412	3,605
2001	2,777	350	3,127
2002	2,384	300	2,684
2003	2,082	262	2,344
2004	1,807	230	2,037
2005	1,549	204	1,753
2006	1,287	160	1,447
2007	1,103	134	1,237
2008	942	117	1,059

<u>Calendar Year</u>	<u>Arkansas</u>		<u>Total</u>
	<u>Ultimate</u>	<u>Alternative</u>	
1990	49	10	59
1991	805	298	1,103
1992	634	194	828
1993	365	73	438
1994	258	58	316
1995	212	39	251
1996	164	29	193
1997	128	23	151
1998	104	17	121
1999	69	11	80
2000	52	6	58
2001	42	4	46
2002	35	3	38
2003	32	2	34
2004	27	2	29
2005	22	2	24
2006	17	1	18
2007	14	1	15
2008	13	1	14