

SERFF Tracking Number: META-126054375 State: Arkansas
Filing Company: Metropolitan Life Insurance Company. State Tracking Number: 41738
Company Tracking Number: CY 2008 RESCISSION REPORT_M
TOI: LTC06 Long Term Care - Other Sub-TOI: LTC06.000 Long Term Care - Other
Product Name: Individual Long-Term Care Insurance
Project Name/Number: CY 2008 Rescission Report_M/CY 2008 Rescission Report_M

Filing at a Glance

Company: Metropolitan Life Insurance Company.

Product Name: Individual Long-Term Care Insurance SERFF Tr Num: META-126054375 State: Arkansas

TOI: LTC06 Long Term Care - Other SERFF Status: Closed-Filed State Tr Num: 41738
Sub-TOI: LTC06.000 Long Term Care - Other Co Tr Num: CY 2008 RESCISSION REPORT_M State Status: Filed-Closed

Filing Type: Form Reviewer(s): Harris Shearer
Author: Disposition Date: 03/12/2009
Date Submitted: 03/02/2009 Disposition Status: Filed

Implementation Date Requested: On Approval

Implementation Date:

State Filing Description:

General Information

Project Name: CY 2008 Rescission Report_M
Project Number: CY 2008 Rescission Report_M
Requested Filing Mode: Informational
Explanation for Combination/Other:
Submission Type: New Submission
Overall Rate Impact:
Filing Status Changed: 03/12/2009

Status of Filing in Domicile: Authorized
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: 03/12/2009
Created By: Mary Rinaldi
Corresponding Filing Tracking Number:

Deemer Date:
Submitted By: Mary Rinaldi
Filing Description:
February 25, 2009

The Honorable Jay Bradford
Arkansas Department of Insurance
1200 West 3rd Street
Little Rock, AR 72201-1904

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Dear Commissioner Bradford:

Re: Metropolitan Life Insurance Company

In accordance with state long-term insurance requirements and/or Section 325 of Title III of the Health Insurance Portability and Accountability Act of 1996 ("HIPAA"), we are providing the following reports of rescission in this state (if any), and countrywide for calendar year 2008. This report contains information of a personal and confidential nature regarding insureds reported therein. We request that you treat this information accordingly.

Respectfully,

Loren Balletto
Sr. Product Consultant

Enclosure(s)

Company and Contact

Filing Contact Information

Mary Rinaldi, Consultant- Compliance mrinaldi@metlife.com
MKTG/AD
Green Farms Road 203-221-3859 [Phone]
Westport, CT 06880

Filing Company Information

Metropolitan Life Insurance Company. CoCode: 65978 State of Domicile: New York
MetLife Group Code: -99 Company Type: Life
1095 Avenue of the Americas Group Name: State ID Number:
New York, NY 10036-6796 FEIN Number: 13-5581829
(212) 578-2211 ext. [Phone]

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Filing Fees

Fee Required? No
Retaliatory? No
Fee Explanation:
Per Company: No

COMPANY	AMOUNT	DATE PROCESSED	TRANSACTION #
Metropolitan Life Insurance Company.	\$0.00	03/02/2009	

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Correspondence Summary

Dispositions

Status	Created By	Created On	Date Submitted
Filed	Harris Shearer	03/12/2009	03/12/2009

SERFF Tracking Number: *META-126054375* *State:* *Arkansas*
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Disposition

Disposition Date: 03/12/2009

Implementation Date:

Status: Filed

Comment:

Rate data does NOT apply to filing.

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Schedule	Schedule Item	Schedule Item Status	Public Access
Supporting Document	Flesch Certification		Yes
Supporting Document	Application		Yes
Supporting Document	Health - Actuarial Justification		Yes
Supporting Document	Outline of Coverage		Yes
Supporting Document	rescission report		Yes
Supporting Document	cover letter		Yes

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Supporting Document Schedules

	Item Status:	Status Date:
Bypassed - Item: Flesch Certification		
Bypass Reason: NA		
Comments:		

	Item Status:	Status Date:
Bypassed - Item: Application		
Bypass Reason: NA		
Comments:		

	Item Status:	Status Date:
Bypassed - Item: Outline of Coverage		
Bypass Reason: NA		
Comments:		

	Item Status:	Status Date:
Satisfied - Item: rescission report		
Comments:		
Attachment: AR MLIC 20080001.pdf		

	Item Status:	Status Date:
Satisfied - Item: cover letter		
Comments:		
Attachment: AR MLIC 20080001.pdf		

RESCISSION REPORTING FORM FOR
LONG-TERM CARE POLICIES COUNTRYWIDE

FOR THE REPORTING YEAR 2008

Company Name: Metropolitan Life Insurance Company
NAIC#: 65978
Address: P.O. Box 937
Westport, CT 06881-0937
Phone Number: (203) 221-6546
Due: March 1, 2009

State	Policy Form #	Policy and Certificate	Name of Insured	Date of Policy Insurance	Date/s Claim/s Submitted	Date of Rescission
CA	LTC2-IDEAL-CAP	14363-63352	Bruce Olmanson	7/15/08	-----	10/30/08
FL	LTC2-PREM-FL	114630	Denis Chira	07/28/08	10/06/08	11/17/08
NE	LTC2007-NE	22860-1133	Thomas Karch	7/2/08	-----	8/22/08

February 25, 2009:



Signature

Loren Balletto
Sr. Product Consultant

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**FOR THE STATE OF ARKANSAS
FOR THE REPORTING YEAR 2008**

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Westport, CT 06881-0937

Phone Number: (203) 221-6546

Due: March 1, 2009

Policy Form #	Policy and Certificate #	Name of Insured	Date of Policy Issuance	Date/s Claim/s Submitted	Date of Rescission
		None			

Detailed reason for rescission: N/A



Signature

Loren Balletto
Sr. Product Consultant

February 25, 2009

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