

SERFF Tracking Number: MHPL-126074349 State: Arkansas  
Filing Company: Mercy Health Plans State Tracking Number: 41864  
Company Tracking Number: AR-AMEND2-09  
TOI: H16G Group Health - Major Medical Sub-TOI: H16G.001A Any Size Group - PPO  
Product Name: AR-AMEND2-09  
Project Name/Number: /

## Filing at a Glance

Company: Mercy Health Plans  
Product Name: AR-AMEND2-09  
TOI: H16G Group Health - Major Medical  
Sub-TOI: H16G.001A Any Size Group - PPO  
Filing Type: Form

SERFF Tr Num: MHPL-126074349 State: ArkansasLH  
SERFF Status: Closed State Tr Num: 41864  
Co Tr Num: AR-AMEND2-09 State Status: Approved-Closed  
Co Status: Reviewer(s): Rosalind Minor  
Author: Karen Hosack Disposition Date: 03/20/2009  
Date Submitted: 03/19/2009 Disposition Status: Approved-Closed  
Implementation Date: Implementation Date:

Implementation Date Requested: 04/01/2009  
State Filing Description:

## General Information

Project Name:  
Project Number:  
Requested Filing Mode: Review & Approval  
Explanation for Combination/Other:  
Submission Type: New Submission  
Overall Rate Impact:  
Filing Status Changed: 03/20/2009

Status of Filing in Domicile:  
Date Approved in Domicile:  
Domicile Status Comments:  
Market Type: Group  
Group Market Size: Small and Large  
Group Market Type: Employer  
Explanation for Other Group Market Type:  
State Status Changed: 03/20/2009  
Corresponding Filing Tracking Number:

Deemer Date:  
Filing Description:  
March 19, 2009

Ms. Rosalind Minor  
Senior Certified Rate and Form Analyst  
Arkansas Insurance Department  
Life and Health Division  
1200 West Third Street

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Little Rock, AR 72201-1904

RE: PHI AR AMEND2-09

NAIC: 11529

Dear Rosalind:

I have attached the above-referenced document for your review and approval. The form is new and is intended to amend the Certificates of Coverage stated therein. This Amendment is in compliance with the Federal Children's Health Insurance Program (CHIP) Reauthorization Act of 2009 that is effective April 1, 2009.

Please contact me at (314) 214-2342 or by email at khosack@mhp.mercy.net if you have any questions.

Sincerely,

Karen Hosack, MHP, CCP

Compliance Analyst

## Company and Contact

### Filing Contact Information

Karen Hosack, Compliance Analyst

Mercy Health Plans

Chesterfield, MO 63017

khosack@mhp.mercy.net

(314) 214-2342 [Phone]

(314) 214-8103[FAX]

### Filing Company Information

Mercy Health Plans

14528 South Outer Forty Rd.

Suite 300

Chesterfield, MO 63017

(314) 214-8100 ext. [Phone]

CoCode: 11529

Group Code:

Group Name:

FEIN Number: 48-1262342

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State of Domicile: Missouri

Company Type: LAH/PPO

State ID Number:

## Filing Fees

SERFF Tracking Number: MHPL-126074349 State: Arkansas  
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Fee Required? Yes  
Fee Amount: \$50.00  
Retaliatory? No  
Fee Explanation:  
Per Company: No

CHECK NUMBER	CHECK AMOUNT	CHECK DATE
0000107171	\$50.00	

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## Correspondence Summary

### Dispositions

Status	Created By	Created On	Date Submitted
Approved-Closed	Rosalind Minor	03/20/2009	03/20/2009

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## Disposition

Disposition Date: 03/20/2009

Implementation Date:

Status: Approved-Closed

Comment:

Rate data does NOT apply to filing.

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<b>Item Type</b>	<b>Item Name</b>	<b>Item Status</b>	<b>Public Access</b>
<b>Supporting Document</b>	Flesch Certification	Approved-Closed	Yes
<b>Supporting Document</b>	Application	Approved-Closed	Yes
<b>Form</b>	Special Enrollment Amendment	Approved-Closed	Yes

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## Form Schedule

### Lead Form Number:

Review Status	Form Number	Form Type	Form Name	Action	Action Specific Data	Readability	Attachment
Approved-Closed	PHI AR AMEND2-09	Certificate	Special Enrollment Amendment	Initial			AR CHIP Act Amendment.pdf
		t, Insert Page, Endorsement or Rider					

**Mercy Health Plans**  
**AMENDMENT**  
**SPECIAL ENROLLMENT UNDER MEDICAID OR CHIP**

**This Amendment applies to the following Certificates of Coverage:**

**PHI AR 2009COC v.2 (01/09)**  
**PHI AR COC (01/08)**

This document amends the Certificates of Coverage (COC) listed above. Except for this amendment, the terms of your COC continues in full force and effect.

**I. CERTIFICATE OF COVERAGE, Section 2: *When Coverage Begins***

*Special Enrollment Period, the fourth paragraph of this section is deleted in its entirety and replaced by the following:*

A Special Enrollment Period also applies to an Eligible Person and any Dependents when one of the following events described below occurs. Subscribers may enroll Dependents who join their family because of any of the following events:

- Birth
- Legal adoption
- Placement for adoption
- Marriage
- Legal permanent general guardianship
- Court or administrative order
- Coverage under Medicaid or the Children's Health Insurance Program

Coverage under Medicaid or CHIP

An Eligible Person and/or Dependent may enroll during a Special Enrollment Period within 60 days of the date s/he —

- Loses eligibility for coverage under Medicaid or the Children's Health Insurance Program (CHIP), or
- Becomes eligible for premium assistance under Medicaid or CHIP.



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Charles S. Gilham, Vice-President  
Mercy Health Plans

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## **Rate Information**

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## Supporting Document Schedules

**Bypassed -Name:** Flesch Certification

**Bypass Reason:** N/A

**Comments:**

**Review Status:**

Approved-Closed

03/20/2009

**Bypassed -Name:** Application

**Bypass Reason:** N/A

**Comments:**

**Review Status:**

Approved-Closed

03/20/2009