

SERFF Tracking Number: SUNL-126075658 State: Arkansas
Filing Company: Sun Life Assurance Company of Canada State Tracking Number: 41830
Company Tracking Number: ABRLTC RESCISSION REPORTING 2008
TOI: L08 Life - Other Sub-TOI: L08.000 Life - Other
Product Name: ABRLTC Rescission Report 2008
Project Name/Number: ABRLTC Rescission Report 2008/ABRLTC Rescission Report 2008

Filing at a Glance

Company: Sun Life Assurance Company of Canada

Product Name: ABRLTC Rescission Report 2008 SERFF Tr Num: SUNL-126075658 State: Arkansas

TOI: L08 Life - Other

SERFF Status: Closed-Accepted State Tr Num: 41830
For Informational Purposes

Sub-TOI: L08.000 Life - Other

Co Tr Num: ABRLTC RESCISSION REPORTING 2008 State Status: Filed-Closed

Filing Type: Form

Reviewer(s): Linda Bird

Authors: Margaret Carvalho,
Thomas Miele, Christopher
McAuliffe, Pat Squillacioti

Disposition Date: 03/18/2009

Date Submitted: 03/16/2009

Disposition Status: Accepted For
Informational Purposes

Implementation Date Requested: On Approval

Implementation Date:

State Filing Description:

General Information

Project Name: ABRLTC Rescission Report 2008

Status of Filing in Domicile: Not Filed

Project Number: ABRLTC Rescission Report 2008

Date Approved in Domicile:

Requested Filing Mode: Informational

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: 03/18/2009

Explanation for Other Group Market Type:

State Status Changed: 03/18/2009

Deemer Date:

Created By: Christopher McAuliffe

Submitted By: Christopher McAuliffe

Corresponding Filing Tracking Number:

Filing Description:

Sun Life Assurance Company of Canada

NAIC # 549-80802

FEIN # 38-1082080

Re: Long Term Care Rescission Reporting - Informational Filing

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 UL-ABRLTC-2007 - Accelerated Benefit Rider for Long Term Care Services

Dear Sir or Madam:

We make this filing on an informational basis to notify the Department regarding any rescission of the coverage provided by the above-named rider that may have occurred in the previous year.

Accordingly, please find the attached Rescission Reporting Form for Long Term Care Policies.

Please do not hesitate to contact me if you have any questions regarding this submission. Thank you for your attention to this matter.

Company and Contact

Filing Contact Information

Chris McAuliffe, Compliance Consultant chris.mcauliffe@sunlife.com
 One Sun Life Executive Park 781-446-6828 [Phone]
 Wellesley Hills, MA 02481 781-237-3327 [FAX]

Filing Company Information

Sun Life Assurance Company of Canada	CoCode: 80802	State of Domicile: Michigan
One Sun Life Executive Park	Group Code: 549	Company Type:
SC2175, State Filings	Group Name:	State ID Number:
Wellesley Hills, MA 02481	FEIN Number: 38-1082080	
(800) 432-1102 ext. [Phone]		

Filing Fees

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

COMPANY	AMOUNT	DATE PROCESSED	TRANSACTION #
Sun Life Assurance Company of Canada	\$0.00	03/16/2009	

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Correspondence Summary

Dispositions

Status	Created By	Created On	Date Submitted
Accepted For Informational Purposes	Linda Bird	03/18/2009	03/18/2009

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Disposition

Disposition Date: 03/18/2009

Implementation Date:

Status: Accepted For Informational Purposes

Comment:

Rate data does NOT apply to filing.

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Schedule	Schedule Item	Schedule Item Status	Public Access
Supporting Document	Flesch Certification		No
Supporting Document	Application		No
Supporting Document	2008 LTC Rescission Report		Yes

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Supporting Document Schedules

	Item Status:	Status Date:
Bypassed - Item: Flesch Certification		
Bypass Reason: Not applicable - Annual LTC Rescission Report only.		
Comments:		

	Item Status:	Status Date:
Bypassed - Item: Application		
Bypass Reason: Not applicable - Annual LTC Rescission Report only.		
Comments:		

	Item Status:	Status Date:
Satisfied - Item: 2008 LTC Rescission Report		
Comments:		
Attachment: 2008 AR.pdf		

APPENDIX A

RESCISSION REPORTING FORM FOR LONG-TERM CARE POLICIES
FOR THE STATE OF Arkansas
FOR THE **REPORTING** YEAR OF 2008

Company Name: Sun Life Assurance Company of Canada

Address: One Sun Life Executive Park, Wellesley Hills, MA 02481

Phone Number: 800-786-5433

Due: March 1 annually

Instructions:

The purpose of this form is to **report** all **rescissions** of **long-term care** insurance policies or certificates. Those **rescissions** voluntarily effectuated by an insured are not required to be included in this **report**. Please furnish one form per **rescission**.

Policy Form #	Policy and Certificate #	Name of Insured	Date of Policy Issuance	Date/s Claim/s Submitted	Date of Rescission
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Detailed reason for **rescission**: None to report. Please be advised that at this time Sun Life has not sold any riders and has no LTC contracts for sale in your state.



Signature

David Healy, Vice President, Customer Service

Name and Title (please type)

March 3, 2009

Date