

SERFF Tracking Number: HUMA-126126786 State: Arkansas
Filing Company: Humana Insurance Company State Tracking Number: 42204
Company Tracking Number: AR-03-2009
TOI: MS051 Individual Medicare Supplement - Sub-TOI: MS051.001 Plan A
Standard Plans
Product Name: Individual Medicare Supplement Plans
Project Name/Number: 2009 Rates/AR-03-2009

Filing at a Glance

Company: Humana Insurance Company

Product Name: Individual Medicare Supplement SERFF Tr Num: HUMA-126126786 State: ArkansasLH
Plans

TOI: MS051 Individual Medicare Supplement - SERFF Status: Closed State Tr Num: 42204
Standard Plans

Sub-TOI: MS051.001 Plan A

Co Tr Num: AR-03-2009

State Status: Approved-Closed

Filing Type: Rate

Co Status:

Reviewer(s): Stephanie Fowler

Authors: Paula Williamson, Dennis Disposition Date: 05/07/2009

Cowart, Michele Zabel

Date Submitted: 04/23/2009

Disposition Status: Approved-Closed

Implementation Date Requested: On Approval

Implementation Date: 09/01/2009

State Filing Description:

General Information

Project Name: 2009 Rates

Status of Filing in Domicile: Not Filed

Project Number: AR-03-2009

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: 12%

Group Market Type:

Filing Status Changed: 05/07/2009

Explanation for Other Group Market Type:

State Status Changed: 05/07/2009

Deemer Date:

Corresponding Filing Tracking Number:

Filing Description:

Humana Insurance Company

NAIC # 119, 73288

Individual Medicare Supplement Rate Filing

SERFF Tracking Number: HUMA-126126786 State: Arkansas
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Please find enclosed Humana Insurance Company's actuarial memorandum for a proposed rate increase of 12.0% for Individual Medicare Supplement Plans A, B, C, F, High Deductible F, K and L. The following forms are affected by this rate increase: Medicare Supplement Policies AR-MESA, AR-MESB, AR-MESC, AR-MESF, AR-MESF(HD), AR-MESK and AR-MESL. The proposed effective date for this increase is September 1, 2009.

The last rate increase of 11.8% was approved on May 27, 2008 (File # HUMA-125628352, State Tracking # 38825).

In addition to SERFF, I can be reached at (502) 580-8249 or by email at mzabel@humana.com.

Company and Contact

Filing Contact Information

Michele Zabel, Senior Products Compliance Analyst
 mzabel@humana.com
 500 W. Main Street
 Louisville, KY 40201
 (502) 580-8249 [Phone]

Filing Company Information

Humana Insurance Company	CoCode: 73288	State of Domicile: Wisconsin
1100 Employers Boulevard	Group Code: 119	Company Type: Life & Health
Green Bay, WI 54344	Group Name:	State ID Number:
(800) 558-4444 ext. [Phone]	FEIN Number: 39-1263473	

Filing Fees

Fee Required?	Yes
Fee Amount:	\$50.00
Retaliatory?	No
Fee Explanation:	\$50 per filing
Per Company:	No

COMPANY	AMOUNT	DATE PROCESSED	TRANSACTION #
Humana Insurance Company	\$50.00	04/23/2009	27387691

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Correspondence Summary

Dispositions

Status	Created By	Created On	Date Submitted
Approved-Closed	Stephanie Fowler	05/07/2009	05/07/2009

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Disposition

Disposition Date: 05/07/2009

Implementation Date: 09/01/2009

Status: Approved-Closed

Comment: We have approved the requested 12% rate increase for Plans A, B, C, F, HD-F, K, L to be implemented on or after September 1, 2009. This approval is subject to the following:

Increases will not be given more frequently than once in a twelve-month period.

Rate data does NOT apply to filing.

SERFF Tracking Number: HUMA-126126786 *State:* Arkansas
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Rate Information

Rate data does NOT apply to filing.

SERFF Tracking Number: HUMA-126126786 State: Arkansas
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Rate/Rule Schedule

Review Status:	Document Name:	Affected Form Numbers: (Separated with commas)	Rate Action:	Rate Action Information:	Attachments
Approved	Proposed Base Rates	AR-MESA, AR-MESB, AR-MESC, AR-MESF, AR-MESF(HD), AR-MESK, AR-MESL	Revised	Previous State Filing Number: Percent Rate Change Request: 38825 12.000	Proposed Base Rates.pdf

Exhibit B (continued)
Humana Insurance Company
Medicare Supplement Rates ^[1]

State: Arkansas
Form #s: AR-MESA, AR-MESB, AR-MESC, AR-MESF, AR-MESF(HD), AR-MESK, AR-MESL
Effective Date: September 1, 2009

Proposed Base Rates ^[3]

Community Rates	Plan A		Plan B		Plan C		Plan F	
	Preferred	Standard ^[2]						
<65 ^[2]	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a
65+	\$157.92	\$235.20	\$166.88	\$247.52	\$192.64	\$287.84	\$193.76	\$290.08

Community Rates	Plan F-High Deductible		Plan K		Plan L	
	Preferred	Standard ^[2]	Preferred	Standard ^[2]	Preferred	Standard ^[2]
<65 ^[2]	n/a	n/a	n/a	n/a	n/a	n/a
65+	\$76.16	\$115.36	\$92.96	\$138.88	\$134.40	\$201.60

[1] For monthly ACH/credit card payment modes. There is an additional \$2 for monthly coupon books. Other fees may apply in the future, including non-monthly modes and policy issue.

[2] Standard Rate applies to tobacco users and beneficiaries originally eligible due to disability.

[3] Preferred Rates are for non-tobacco users not originally eligible due to disability. For issues during open enrollment, the Preferred rates will apply. Geographic area factors are also applied (see Exhibit C) with the final rate rounded to the nearer whole dollar.

Exhibit C
Humana Insurance Company
Medicare Supplement Area Factors and Classification

State: Arkansas
Form #s: AR-MESA, AR-MESB, AR-MESC, AR-MESF, AR-MESF(HD), AR-MESK, AR-MESL
Effective Date: September 1, 2009

Area	Rate Factor
1	1.092
2	1.047
3	0.964
Out of State	1.200

County	Geographic Area	County	Geographic Area
Arkansas	2	Lee	3
Ashley	3	Lincoln	3
Baxter	3	Little River	3
Benton	3	Logan	3
Boone	3	Lonoke	2
Bradley	3	Madison	3
Calhoun	3	Marion	3
Carroll	3	Miller	3
Chicot	3	Mississippi	3
Clark	2	Monroe	2
Clay	3	Montgomery	2
Cleburne	3	Nevada	3
Cleveland	3	Newton	3
Columbia	3	Ouachita	3
Conway	2	Perry	2
Craighead	3	Phillips	3
Crawford	3	Pike	2
Crittenden	3	Poinsett	3
Cross	3	Polk	2
Dallas	3	Pope	3
Desha	3	Prairie	2
Drew	3	Pulaski	1
Faulkner	2	Randolph	3
Franklin	3	St. Francis	3
Fulton	3	Saline	2
Garland	2	Scott	3
Grant	2	Searcy	3
Greene	3	Sebastian	3
Hempstead	3	Sevier	3
Hot Spring	2	Sharp	3
Howard	3	Stone	3
Independence	3	Union	3
Izard	3	Van Buren	2
Jackson	2	Washington	3
Jefferson	3	White	2
Johnson	3	Woodruff	2
Lafayette	3	Yell	3
Lawrence	3		

Note 1: If the insured moves to a new state, the out of state factor will apply.

Note 2: The area classification for a county may change, or a different method of classification (e.g., by zip code) may be used.

Exhibit D
Humana Insurance Company
Medicare Supplement Monthly Premium Rates - Arkansas^{[1] [3]}
Effective September 1, 2009, pending regulatory approval

Area 1

	Plan A		Plan B		Plan C		Plan F		Plan F-High Deductible		Plan K		Plan L	
	Preferred	Standard ^[2]	Preferred	Standard ^[2]	Preferred	Standard ^[2]	Preferred	Standard ^[2]						
<65 ^[2]	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a
65+	\$172.00	\$257.00	\$182.00	\$270.00	\$210.00	\$314.00	\$212.00	\$317.00	\$83.00	\$126.00	\$101.00	\$152.00	\$147.00	\$220.00

Area 2

	Plan A		Plan B		Plan C		Plan F		Plan F-High Deductible		Plan K		Plan L	
	Preferred	Standard ^[2]	Preferred	Standard ^[2]	Preferred	Standard ^[2]	Preferred	Standard ^[2]						
<65 ^[2]	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a
65+	\$165.00	\$246.00	\$175.00	\$259.00	\$202.00	\$301.00	\$203.00	\$304.00	\$80.00	\$121.00	\$97.00	\$145.00	\$141.00	\$211.00

Area 3

	Plan A		Plan B		Plan C		Plan F		Plan F-High Deductible		Plan K		Plan L	
	Preferred	Standard ^[2]	Preferred	Standard ^[2]	Preferred	Standard ^[2]	Preferred	Standard ^[2]						
<65 ^[2]	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a
65+	\$152.00	\$227.00	\$161.00	\$239.00	\$186.00	\$278.00	\$187.00	\$280.00	\$73.00	\$111.00	\$90.00	\$134.00	\$130.00	\$194.00

Area 4 (Out-of-State)

	Plan A		Plan B		Plan C		Plan F		Plan F-High Deductible		Plan K		Plan L	
	Preferred	Standard ^[2]	Preferred	Standard ^[2]	Preferred	Standard ^[2]	Preferred	Standard ^[2]						
<65 ^[2]	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a
65+	\$190.00	\$282.00	\$200.00	\$297.00	\$231.00	\$345.00	\$233.00	\$348.00	\$91.00	\$138.00	\$112.00	\$167.00	\$161.00	\$242.00

[1] For monthly ACH/credit card payment modes. There is an additional \$2 for monthly coupon books. Other fees may apply in the future, including non-monthly modes and policy issue.

[2] Standard Rate applies to tobacco users and beneficiaries originally eligible due to disability.

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