

SERFF Tracking Number: ALST-126126334 State: Arkansas
Filing Company: American Heritage Life Insurance Company State Tracking Number: 42370
Company Tracking Number:
TOI: H07I Individual Health - Specified Disease - Limited Benefit Sub-TOI: H07I.002A Dread Disease - Cancer Only
Product Name: CP4ARK, CP8, CP9, and CCR
Project Name/Number: /

Filing at a Glance

Company: American Heritage Life Insurance Company
Product Name: CP4ARK, CP8, CP9, and CCR SERFF Tr Num: ALST-126126334 State: ArkansasLH
TOI: H07I Individual Health - Specified Disease - Limited Benefit SERFF Status: Closed State Tr Num: 42370
Sub-TOI: H07I.002A Dread Disease - Cancer Only Co Tr Num: State Status: Approved-Closed
Filing Type: Rate Co Status: Reviewer(s): Rosalind Minor
Authors: Bridget Tennant, Crystal Sackman Disposition Date: 06/08/2009
Date Submitted: 05/12/2009 Disposition Status: Approved-Closed
Implementation Date Requested: 11/01/2009 Implementation Date:
State Filing Description:

General Information

Project Name: Status of Filing in Domicile: Not Filed
Project Number: Date Approved in Domicile:
Requested Filing Mode: Review & Approval Domicile Status Comments: Will file at a later date.
Explanation for Combination/Other: Market Type: Individual
Submission Type: New Submission Group Market Size:
Overall Rate Impact: 50% Group Market Type:
Filing Status Changed: 06/08/2009 Explanation for Other Group Market Type:
State Status Changed: 06/08/2009
Deemer Date: Corresponding Filing Tracking Number:
Filing Description:
Rate increase request for uncapped cancer forms CP4, CP8, CP9, and CCR.

SERFF Tracking Number: ALST-126126334 State: Arkansas
 Filing Company: American Heritage Life Insurance Company State Tracking Number: 42370
 Company Tracking Number:
 TOI: H071 Individual Health - Specified Disease - Limited Benefit Sub-TOI: H071.002A Dread Disease - Cancer Only
 Product Name: CP4ARK, CP8, CP9, and CCR
 Project Name/Number: /

Company and Contact

Filing Contact Information

Crystal Sackman , Actuarial Technician/Product Development
 1776 American Heritage Life Dr.
 Jacksonville, FL 32224
 csack@allstate.com
 (904) 992-2572 [Phone]

Filing Company Information

American Heritage Life Insurance Company
 ATTN: Legal/Compliance
 1776 American Heritage Life Drive
 Jacksonville, FL 32224-9983
 (904) 992-1776 ext. [Phone]
 CoCode: 60534
 Group Code: 8
 Group Name: Allstate
 FEIN Number: 59-0781901
 State of Domicile: Florida
 Company Type: Life and Health
 State ID Number:

Filing Fees

Fee Required? Yes
 Fee Amount: \$200.00
 Retaliatory? No
 Fee Explanation: Four forms at \$50.00 per form
 Per Company: No

COMPANY	AMOUNT	DATE PROCESSED	TRANSACTION #
American Heritage Life Insurance Company	\$200.00	05/12/2009	27813693

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 Product Name: CP4ARK, CP8, CP9, and CCR
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Correspondence Summary

Dispositions

Status	Created By	Created On	Date Submitted
Approved-Closed	Rosalind Minor	06/08/2009	06/08/2009

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	Rosalind Minor	06/02/2009	06/02/2009	Crystal Sackman	06/05/2009	06/05/2009

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Disposition

Disposition Date: 06/08/2009

Implementation Date:

Status: Approved-Closed

Comment:

We have approved a 15% level rate increase on your submission. The approval is subject to the following conditions:

1. Rate increases will not be given prior to the first annual anniversary date of any policy.
2. After the first annual anniversary date of any policy, increases will not be given more frequently than once in a twelve (12) month period.
3. All increases in rates, other than a change in age or an individual moving to another geographical area, must be submitted to our Department for approval

Company Name:	Overall % Indicated Change:	Overall % Rate Impact:	Written Premium Change for this Program:	# of Policy Holders Affected for this Program:	Written Premium for this Program:	Maximum % Change (where required):	Minimum % Change (where required):
American Heritage Life Insurance Company	50.000%	50.000%	\$257,622	581	\$515,244	50.000%	50.000%

SERFF Tracking Number: ALST-126126334 State: Arkansas
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 Product Name: CP4ARK, CP8, CP9, and CCR
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Item Type	Item Name	Item Status	Public Access
Supporting Document (revised)	Health - Actuarial Justification	Approved-Closed	No
Supporting Document	Health - Actuarial Justification	Replaced	No
Supporting Document	Cover Letter	Approved-Closed	No
Rate (revised)	Exhibit A (Premium Rates)	Approved-Closed	Yes
Rate (revised)	Exhibit A (Premium Rates)	Approved-Closed	Yes
Rate (revised)	Exhibit A (Premium Rates)	Approved-Closed	Yes
Rate (revised)	Exhibit A (Premium Rates)	Approved-Closed	Yes
Rate	Exhibit A (Premium Rates)	Replaced	Yes
Rate	Exhibit A (Premium Rates)	Replaced	Yes
Rate	Exhibit A (Premium Rates)	Replaced	Yes
Rate	Exhibit A (Premium Rates)	Replaced	Yes

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TOI: H071 Individual Health - Specified Disease - Limited Benefit Sub-TOI: H071.002A Dread Disease - Cancer Only
Product Name: CP4ARK, CP8, CP9, and CCR
Project Name/Number: /

Objection Letter

Objection Letter Status Pending Industry Response
Objection Letter Date 06/02/2009
Submitted Date 06/02/2009
Respond By Date

Dear Crystal Sackman ,

This will acknowledge receipt of the captioned filing.

Objection 1

- Health - Actuarial Justification (Supporting Document)
- Exhibit A (Premium Rates) (Rate)

Comment:

Based on the fact that the policyholders have continually received rate increases since 2002 and the impact that a 50% rate increase will have on the insureds, our Department will consider a 15% rate increase in lieu of the 50% requested.

If you wish to accept the 15% rate increase, please provide us with an amended actuarial memorandum along with the adjusted rates.

Please feel free to contact me if you have questions.

Sincerely,

Rosalind Minor

Response Letter

Response Letter Status Submitted to State
Response Letter Date 06/05/2009

SERFF Tracking Number: ALST-126126334 State: Arkansas
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TOI: H071 Individual Health - Specified Disease - Limited Benefit Sub-TOI: H071.002A Dread Disease - Cancer Only
Product Name: CP4ARK, CP8, CP9, and CCR
Project Name/Number: /

Dear Rosalind Minor,

Comments:

Response 1

Comments: Thank you for your review of this filing. After considering your objection, the Company would like to reduce its rate increase request to 15% as per the recommendation of the State. I have attached revised Exhibit A's of the Actuarial Memorandum for each policy form as well as a revised memorandum reflecting this change. Please feel free to contact me if you should need any additional documentation.

Related Objection 1

Applies To:

- Health - Actuarial Justification (Supporting Document)
- Exhibit A (Premium Rates) (Rate)

Comment:

Based on the fact that the policyholders have continually received rate increases since 2002 and the impact that a 50% rate increase will have on the insureds, our Department will consider a 15% rate increase in lieu of the 50% requested.

If you wish to accept the 15% rate increase, please provide us with an amended actuarial memorandum along with the adjusted rates.

Changed Items:

Supporting Document Schedule Item Changes

Satisfied -Name: Health - Actuarial Justification

Comment:

No Form Schedule items changed.

SERFF Tracking Number: ALST-126126334 State: Arkansas
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 Product Name: CP4ARK, CP8, CP9, and CCR
 Project Name/Number: /

Rate/Rule Schedule Item Changes

Document Name: Affected Form Numbers: Rate Action: Rate Action Information: Attach Document:

Exhibit A CP4ARK Revised Previous State Filing Number
 (Premium Rates)
 15
 Percent Rate Change Request
 50

Previous Version

Exhibit A CP4ARK Revised Previous State Filing Number
 (Premium Rates)
 Percent Rate Change Request
 50

Exhibit A CP8 Revised Previous State Filing Number
 (Premium Rates)
 15
 Percent Rate Change Request
 50

Previous Version

Exhibit A CP8 Revised Previous State Filing Number
 (Premium Rates)
 Percent Rate Change Request
 50

Exhibit A CP9 Revised Previous State Filing Number
 (Premium Rates)
 15
 Percent Rate Change Request
 50

Previous Version

Exhibit A CP9 Revised Previous State Filing Number
 (Premium Rates)
 Percent Rate Change Request
 50

Exhibit A CCR Revised Previous State Filing Number
 (Premium Rates)

SERFF Tracking Number: ALST-126126334 State: Arkansas
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Company Tracking Number:
TOI: H071 Individual Health - Specified Disease - Limited Benefit Sub-TOI: H071.002A Dread Disease - Cancer Only
Product Name: CP4ARK, CP8, CP9, and CCR
Project Name/Number: /

15

Percent Rate Change Request

50

Previous Version

Exhibit A CCR
(Premium Rates)

Revised

Previous State Filing Number

Percent Rate Change Request

50

SERFF Tracking Number: ALST-126126334 *State:* Arkansas
Filing Company: American Heritage Life Insurance Company *State Tracking Number:* 42370
Company Tracking Number:
TOI: H071 Individual Health - Specified Disease - Limited Benefit *Sub-TOI:* H071.002A Dread Disease - Cancer Only
Product Name: CP4ARK, CP8, CP9, and CCR
Project Name/Number: /

Sincerely,
Bridget Tennant, Crystal Sackman

SERFF Tracking Number: ALST-126126334 State: Arkansas
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 Company Tracking Number:
 TOI: H071 Individual Health - Specified Disease - Limited Benefit Sub-TOI: H071.002A Dread Disease - Cancer Only
 Product Name: CP4ARK, CP8, CP9, and CCR
 Project Name/Number: /

Rate Information

Rate data applies to filing.

Filing Method: Electronic
 Rate Change Type: Increase
 Overall Percentage of Last Rate Revision: 15.000%
 Effective Date of Last Rate Revision: 11/01/2008
 Filing Method of Last Filing: Electronic

Company Rate Information

Company Name:	Overall % Indicated Change:	Overall % Rate Impact:	Written Premium Change for this Program:	# of Policy Holders Affected for this Program:	Written Premium for this Program:	Maximum % Change (where required):	Minimum % Change (where required):
American Heritage Life Insurance Company	50.000%	50.000%	\$257,622	581	\$515,244	50.000%	50.000%

SERFF Tracking Number: ALST-126126334 State: Arkansas
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 Company Tracking Number:
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 Product Name: CP4ARK, CP8, CP9, and CCR
 Project Name/Number: /

Rate/Rule Schedule

Review Status:	Document Name:	Affected Form Numbers: (Separated with commas)	Rate Action:	Rate Action Information:		Attachments
Approved-Closed	Exhibit A (Premium Rates)	CP4ARK	Revised	Previous State Filing Number: Percent Rate Change Request:	15 50.000	CP4_AR.pdf
Approved-Closed	Exhibit A (Premium Rates)	CP8	Revised	Previous State Filing Number: Percent Rate Change Request:	15 50.000	CP8_AR.pdf
Approved-Closed	Exhibit A (Premium Rates)	CP9	Revised	Previous State Filing Number: Percent Rate Change Request:	15 50.000	CP9_AR.pdf
Approved-Closed	Exhibit A (Premium Rates)	CCR	Revised	Previous State Filing Number: Percent Rate Change Request:	15 50.000	CCR_AR.pdf

American Heritage Life Insurance Company (NAIC #60534)

Actuarial Memorandum for Individual A&H Rate Increase -- Exhibit A
Policy Form CP4ARK
Arkansas

	Issue Ages	Current Monthly Premium	Requested Monthly Premium	Requested Increase Percent
Individual -Payroll	All	556.12	639.52	15%
Family -Payroll	All	834.44	959.60	15%
Individual -Direct	All	672.36	773.20	15%
Family -Direct	All	1008.42	1159.68	15%

Modal Factors:	Semi-Annual:	0.50000000
	Quarterly:	0.25000000
	Monthly:	0.08333333

Rounding Methodology: Monthly premiums may have been rounded down to ensure that even premiums resulted to facilitate administration of payroll cases.

American Heritage Life Insurance Company (NAIC #60534)

Actuarial Memorandum for Individual A&H Rate Increase -- Exhibit A
Policy Form CP8
Arkansas

	Issue Ages	Current Monthly Premium	Requested Monthly Premium	Requested Increase Percent
Individual -Payroll	All	435.20	500.48	15%
Family -Payroll	All	685.74	788.60	15%

Modal Factors:	Semi-Annual:	0.50000000
	Quarterly:	0.25000000
	Monthly:	0.08333333

Rounding Methodology: Monthly premiums may have been rounded down to ensure that even premiums resulted to facilitate administration of payroll cases.

American Heritage Life Insurance Company (NAIC #60534)

Actuarial Memorandum for Individual A&H Rate Increase -- Exhibit A
Policy Form CP10AR and CCR
Arkansas

CCR	Base Plan	Issue Ages	Current Base Plan Premium	Current CCR Premium	Requested CCR Premium	Requested CCR Increase Percent	New Total	Base and Rider Effective Increase
20% CCR	Ind CP10A	All	\$9.40	\$14.20	\$16.32	15%	\$25.72	9.0%
	Fam CP10A	All	\$15.50	\$26.40	\$30.36	15%	\$45.86	9.5%
	Ind CP10B	All	\$14.98	\$10.10	\$11.60	15%	\$26.58	6.0%
	Fam CP10B	All	\$25.82	\$18.62	\$21.40	15%	\$47.22	6.3%
50% CCR	Ind CP10A	All	\$9.40	\$35.48	\$40.80	15%	\$50.20	11.9%
	Fam CP10A	All	\$15.50	\$66.04	\$75.94	15%	\$91.44	12.1%
	Ind CP10B	All	\$14.98	\$25.36	\$29.16	15%	\$44.14	9.4%
	Fam CP10B	All	\$25.82	\$46.76	\$53.76	15%	\$79.58	9.6%
100% CCR	Ind CP10A	All	\$9.40	\$71.16	\$81.82	15%	\$91.22	13.2%
	Fam CP10A	All	\$15.50	\$132.20	\$152.02	15%	\$167.52	13.4%
	Ind CP10B	All	\$14.98	\$50.82	\$58.44	15%	\$73.42	11.6%
	Fam CP10B	All	\$25.82	\$93.50	\$107.52	15%	\$133.34	11.7%

Modal Factors: Semi-Annual: 0.52000000
 Quarterly: 0.26500000
 Monthly: 0.09000000

Rounding Methodology: Monthly premiums may have been rounded down to ensure that ever
 premiums resulted to facilitate administration of payroll cases

SERFF Tracking Number: ALST-126126334 State: Arkansas
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TOI: H071 Individual Health - Specified Disease - Limited Benefit Sub-TOI: H071.002A Dread Disease - Cancer Only
Product Name: CP4ARK, CP8, CP9, and CCR
Project Name/Number: /

Supporting Document Schedules

Satisfied -Name:	Cover Letter	Review Status:	Approved-Closed	06/08/2009
Comments:				
Attachment:				
	ltrAR.pdf			

May 4, 2009
NAIC No. 60534
FEIN No. 59-0781901

Rosalind Minor, Sr. Analyst
Policy & Other Form Filings, Life, A&H, Annuities
Arkansas Insurance Division
1200 W. Third Street
Little Rock, Arkansas 72201-1904

**SUBMISSION
RATE INCREASE FILING
FORMS CP4ARK, CP8, CP9 and Rider CCR**

Dear Ms. Minor:

Enclosed you will find the actuarial memorandum in support of the rate increase we are requesting for the above-mentioned forms.

We appreciate your Department's time and consideration in the review of this filing. If you have any questions regarding this filing, you may contact me at American Heritage Life's home office at 904-992-2572 or via email at csack@allstate.com.

Sincerely,



Crystal Sackman
Actuarial Technician

Enclosures

SERFF Tracking Number: ALST-126126334 State: Arkansas
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 Project Name/Number: /

Superseded Attachments

Please note that all items on the following pages are items, which have been replaced by a newer version. The newest version is located with the appropriate schedule on previous pages. These items are in date order with most recent first.

Original Date:	Schedule	Document Name	Replaced Date	Attach Document
No original date	Rate and Rule	Exhibit A (Premium Rates)	04/23/2009	CP4_AR.pdf
No original date	Rate and Rule	Exhibit A (Premium Rates)	04/23/2009	CP8_AR.pdf
No original date	Rate and Rule	Exhibit A (Premium Rates)	04/23/2009	CP9_AR.pdf
No original date	Rate and Rule	Exhibit A (Premium Rates)	04/23/2009	CCR_AR.pdf

American Heritage Life Insurance Company (NAIC #60534)

Actuarial Memorandum for Individual A&H Rate Increase -- Exhibit A
Policy Form CP4ARK
Arkansas

	Issue Ages	Current Monthly Premium	Requested Monthly Premium	Requested Increase Percent
Individual -Payroll	All	556.12	834.18	50%
Family -Payroll	All	834.44	1251.66	50%
Individual -Direct	All	672.36	1008.54	50%
Family -Direct	All	1008.42	1512.62	50%

Modal Factors:	Semi-Annual:	0.50000000
	Quarterly:	0.25000000
	Monthly:	0.08333333

Rounding Methodology: Monthly premiums may have been rounded down to ensure that even premiums resulted to facilitate administration of payroll cases.

American Heritage Life Insurance Company (NAIC #60534)

Actuarial Memorandum for Individual A&H Rate Increase -- Exhibit A
Policy Form CP8
Arkansas

	Issue Ages	Current Monthly Premium	Requested Monthly Premium	Requested Increase Percent
Individual -Payroll	All	435.20	652.80	50%
Family -Payroll	All	685.74	1028.60	50%

Modal Factors:	Semi-Annual:	0.50000000
	Quarterly:	0.25000000
	Monthly:	0.08333333

Rounding Methodology: Monthly premiums may have been rounded down to ensure that even premiums resulted to facilitate administration of payroll cases.

American Heritage Life Insurance Company (NAIC #60534)

Actuarial Memorandum for Individual A&H Rate Increase -- Exhibit A
Policy Form CP9
Arkansas

	Daily Hospital Benefit	Issue Ages	Current Monthly Premium	Requested Monthly Premium	Requested Increase Percent
Individual	\$200 Plan	All	447.04	670.56	50%
Individual	\$300 Plan	All	513.74	770.60	50%
Individual	\$400 Plan	All	591.04	886.56	50%
Family	\$200 Plan	All	710.74	1066.10	50%
Family	\$300 Plan	All	816.94	1225.40	50%
Family	\$400 Plan	All	947.38	1421.06	50%

Modal Factors: Semi-Annual: 0.50000000
 Quarterly: 0.25000000
 Monthly: 0.08667000

Rounding Methodology: Monthly premiums may have been rounded down to ensure that even premiums resulted to facilitate administration of payroll cases.

American Heritage Life Insurance Company (NAIC #60534)

Actuarial Memorandum for Individual A&H Rate Increase -- Exhibit A
Policy Form CP10AR and CCR
Arkansas

CCR	Base Plan	Issue Ages	Current Base Plan Premium	Current CCR Premium	Requested CCR Premium	Requested CCR Increase Percent	New Total	Base and Rider Effective Increase
20% CCR	Ind CP10A	All	\$9.40	\$14.20	\$21.30	50%	\$30.70	30.1%
	Fam CP10A	All	\$15.50	\$26.40	\$39.60	50%	\$55.10	31.5%
	Ind CP10B	All	\$14.98	\$10.10	\$15.14	50%	\$30.12	20.1%
	Fam CP10B	All	\$25.82	\$18.62	\$27.92	50%	\$53.74	20.9%
50% CCR	Ind CP10A	All	\$9.40	\$35.48	\$53.22	50%	\$62.62	39.5%
	Fam CP10A	All	\$15.50	\$66.04	\$99.06	50%	\$114.56	40.5%
	Ind CP10B	All	\$14.98	\$25.36	\$38.04	50%	\$53.02	31.4%
	Fam CP10B	All	\$25.82	\$46.76	\$70.14	50%	\$95.96	32.2%
100% CCR	Ind CP10A	All	\$9.40	\$71.16	\$106.74	50%	\$116.14	44.2%
	Fam CP10A	All	\$15.50	\$132.20	\$198.30	50%	\$213.80	44.8%
	Ind CP10B	All	\$14.98	\$50.82	\$76.22	50%	\$91.20	38.6%
	Fam CP10B	All	\$25.82	\$93.50	\$140.24	50%	\$166.06	39.2%

Modal Factors: Semi-Annual: 0.52000000
 Quarterly: 0.26500000
 Monthly: 0.09000000

Rounding Methodology: Monthly premiums may have been rounded down to ensure that ever premiums resulted to facilitate administration of payroll cases