

SERFF Tracking Number: MGCA-126209697 State: Arkansas
 Filing Company: Mid-West National Life Insurance Company of Tennessee State Tracking Number: 42822
 Company Tracking Number: MW-25884-IR AR 200907 AR MIDWEST 14431
 TOI: H15I Individual Health - Hospital/Surgical/Medical Expense Sub-TOI: H15I.001 Health - Hospital/Surgical/Medical Expense
 Product Name: MW-25884-IR AR -Pregnancy/Childbirth Benefit Rider
 Project Name/Number: /

Filing at a Glance

Company: Mid-West National Life Insurance Company of Tennessee

Product Name: MW-25884-IR AR -
 Pregnancy/Childbirth Benefit Rider

SERFF Tr Num: MGCA-126209697 State: ArkansasLH

TOI: H15I Individual Health -
 Hospital/Surgical/Medical Expense

SERFF Status: Closed

State Tr Num: 42822

Sub-TOI: H15I.001 Health -
 Hospital/Surgical/Medical Expense

Co Tr Num: MW-25884-IR AR
 200907 AR MIDWEST 14431

State Status: Approved-Closed

Filing Type: Rate

Co Status:

Reviewer(s): Rosalind Minor

Authors: EDS EDSSupport, Sergei Mordovine, Aliya Panjwani, Yan Yuan, Eliseo Rodriguez, Charles Schneeberger, Joanna Gulling, Liz Hart, Trent Bridges, Sean Casey, David Beimesch, Tony Huang, Kendall Daniels, Chanel Orallo, Sommay Khounlo, Ashley Toner

Disposition Date: 07/27/2009

Date Submitted: 07/01/2009

Disposition Status: Approved-Closed

Implementation Date Requested:

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:

Domicile Status Comments: Our state of domicile is Texas and does not require rate changes to be filed.

Explanation for Combination/Other:

Market Type:

Submission Type: New Submission

Group Market Size:

SERFF Tracking Number: MGCA-126209697 State: Arkansas
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Project Name/Number: /

Overall Rate Impact:

Filing Status Changed: 07/27/2009

Deemer Date:

Group Market Type:

Explanation for Other Group Market Type:

State Status Changed: 07/27/2009

Corresponding Filing Tracking Number:

SERFF Tracking Number: MGCA-126209697 State: Arkansas
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 Hospital/Surgical/Medical Expense Expense
 Product Name: MW-25884-IR AR -Pregnancy/Childbirth Benefit Rider
 Project Name/Number: /

Filing Description:

This rider form will pay benefits for Covered Expenses incurred by an Insured Person, while this Rider is inforce, as a result of normal pregnancy and childbirth up to the maximum benefit selected, according to the rider schedule.

Company and Contact

Filing Contact Information

Aliya Panjwani, aliya.panywani@healthmarkets.com
 Healthmarkets (817) 255-3884 [Phone]
 North Richland Hills, TX 76180 (817) 255-8274[FAX]

Filing Company Information

Mid-West National Life Insurance Company of Tennessee CoCode: 66087 State of Domicile: Texas
 9151 Boulevard 26 Group Code: 264 Company Type:
 North Richland Hills, TX 76180 Group Name: State ID Number:
 (817) 255-3100 ext. [Phone] FEIN Number: 62-0724538

Filing Fees

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

COMPANY	AMOUNT	DATE PROCESSED	TRANSACTION #
Mid-West National Life Insurance Company of Tennessee	\$50.00	07/01/2009	28922089

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Correspondence Summary

Dispositions

Status	Created By	Created On	Date Submitted
Approved-Closed	Rosalind Minor	07/27/2009	07/27/2009

Objection Letters and Response Letters

Objection Letters

Status	Created By	Created On	Date Submitted
Pending Industry Response	Rosalind Minor	07/17/2009	07/17/2009
Pending Industry Response	Rosalind Minor	07/09/2009	07/09/2009

Response Letters

Responded By	Created On	Date Submitted
David Beimesch	07/20/2009	07/20/2009
Chanel Orallo	07/17/2009	07/17/2009

Amendments

Item	Schedule	Created By	Created On	Date Submitted
MW-25884-IR Rate AR Rate Page Health - Actuarial Justification	Supporting Document	David Beimesch	07/23/2009	07/23/2009
		David Beimesch	07/23/2009	07/23/2009

Filing Notes

Subject	Note Type	Created By	Created On	Date Submitted
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SERFF Tracking Number: MGCA-126209697 State: Arkansas
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Rate Increase Note To Reviewer David Beimesch 07/23/2009 07/23/2009

Rate Increase Note To Filer Rosalind Minor 07/20/2009 07/20/2009

SERFF Tracking Number: MGCA-126209697 State: Arkansas
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Project Name/Number: /

Disposition

Disposition Date: 07/27/2009

Implementation Date:

Status: Approved-Closed

Comment:

We have approved your request of a 10% level rate increase on this 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.

Rate data does NOT apply to filing.

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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	Supporting Documents	Approved-Closed	Yes
Supporting Document	Objection Response	Approved-Closed	Yes
Rate (revised)	MW-25884-IR AR Rate Page	Approved-Closed	Yes
Rate	MW-25884-IR AR Rate Page	Replaced	Yes

SERFF Tracking Number: MGCA-126209697 State: Arkansas
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Project Name/Number: /

Objection Letter

Objection Letter Status Pending Industry Response
Objection Letter Date 07/17/2009
Submitted Date 07/17/2009

Respond By Date

Dear Aliya Panjwani,

This will acknowledge receipt of the captioned filing.

Objection 1

- Health - Actuarial Justification (Supporting Document)

Comment:

Our Department has thoroughly reviewed your request for a 35% rate increase on the pregnancy/childbirth rider.

After thorough review, we will consider a 10% increase in lieu of the 35% requested. The Arkansas experience is not creditable and a 35% rate increase in the rider will have an impact on the three policyholders.

If you wish to accept the 10%, please submit a revised actuarial memorandum along with the adjusted rates.

We appreciate your understanding and cooperation.

Please feel free to contact me if you have questions.

Sincerely,

Rosalind Minor

Response Letter

Response Letter Status Submitted to State
Response Letter Date 07/20/2009
Submitted Date 07/20/2009

Dear Rosalind Minor,

Comments:

SERFF Tracking Number: MGCA-126209697 State: Arkansas
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Product Name: MW-25884-IR AR -Pregnancy/Childbirth Benefit Rider
Project Name/Number: /

Thank you for your review of this filing.

Response 1

Comments: We would like to accept the 10% increase.

Related Objection 1

Applies To:

- Health - Actuarial Justification (Supporting Document)

Comment:

Our Department has thoroughly reviewed your request for a 35% rate increase on the pregnancy/childbirth rider.

After thorough review, we will consider a 10% increase in lieu of the 35% requested. The Arkansas experience is not creditable and a 35% rate increase in the rider will have an impact on the three policyholders.

If you wish to accept the 10%, please submit a revised actuarial memorandum along with the adjusted rates.

We appreciate your understanding and cooperation.

Changed Items:

No Supporting Documents changed.

No Form Schedule items changed.

No Rate/Rule Schedule items changed.

Thank you.

Sincerely,

Aliya Panjwani, Ashley Toner, Chanel Orallo, Charles Schneeberger, David Beimesch, EDS EDSSupport, Eliseo Rodriguez, Joanna Gulling, Kendall Daniels, Liz Hart, Sean Casey, Sergei Mordovine, Sommay Khounlo, Tony Huang, Trent Bridges, Yan Yuan

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Product Name: MW-25884-IR AR -Pregnancy/Childbirth Benefit Rider
Project Name/Number: /

Objection Letter

Objection Letter Status Pending Industry Response
Objection Letter Date 07/09/2009
Submitted Date 07/09/2009

Respond By Date

Dear Aliya Panjwani,

This will acknowledge receipt of the captioned filing.

Objection 1

- MW-25884-IR AR Rate Page (Rate)

Comment:

For the three insureds in Arkansas, please provide the existing monthly rate and the proposed monthly rate on each individual.

Please feel free to contact me if you have questions.

Sincerely,

Rosalind Minor

Response Letter

Response Letter Status Submitted to State
Response Letter Date 07/17/2009
Submitted Date 07/17/2009

Dear Rosalind Minor,

Comments:

Thank you for your review of this filing.

Response 1

Comments: We have attached a cover letter that provides the premium information requested.

Related Objection 1

Applies To:

SERFF Tracking Number: MGCA-126209697 State: Arkansas
Filing Company: Mid-West National Life Insurance Company of Tennessee State Tracking Number: 42822
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Hospital/Surgical/Medical Expense Expense
Product Name: MW-25884-IR AR -Pregnancy/Childbirth Benefit Rider
Project Name/Number: /
- MW-25884-IR AR Rate Page (Rate)

Comment:

For the three insureds in Arkansas, please provide the existing monthly rate and the proposed monthly rate on each individual.

Changed Items:

Supporting Document Schedule Item Changes

Satisfied -Name: Objection Response

Comment:

No Form Schedule items changed.

No Rate/Rule Schedule items changed.

Thank you for your review of this filing.

Sincerely,

Aliya Panjwani, Ashley Toner, Chanel Orallo, Charles Schneeberger, David Beimesch, EDS EDSSupport, Eliseo Rodriguez, Joanna Gulling, Kendall Daniels, Liz Hart, Sean Casey, Sergei Mordovine, Sommay Khounlo, Tony Huang, Trent Bridges, Yan Yuan

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Hospital/Surgical/Medical Expense
Product Name: MW-25884-IR AR -Pregnancy/Childbirth Benefit Rider
Project Name/Number: /

Note To Reviewer

Created By:

David Beimesch on 07/23/2009 01:59 PM

Last Edited By:

Rosalind Minor

Submitted On:

07/27/2009 01:59 PM

Subject:

Rate Increase

Comments:

We have attached the updated rate page and actuarial memorandum.

SERFF Tracking Number: MGCA-126209697 State: Arkansas
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 Product Name: MW-25884-IR AR -Pregnancy/Childbirth Benefit Rider
 Project Name/Number: /

Amendment Letter

Amendment Date:
 Submitted Date: 07/23/2009

Comments:

We have attached an updated actuarial memorandum and rate page to reflect the 10% increase.

Changed Items:

Rate/Rule Schedule Item Changes:

Document Name:	Affected Form Numbers: (Comma Separated list)	Rate Action:	Rate Action Information:	Attach Document:
MW-25884-IR AR Rate Page	MW-25884-IR AR	New		MW-25884-IR AR Rate Page.pdf
MW-25884-IR AR Rate Page.pdf				

Supporting Document Schedule Item Changes:

Satisfied -Name: Health - Actuarial Justification

Comment:
 MW-25884-IR AR Act Memo.pdf

SERFF Tracking Number: MGCA-126209697 State: Arkansas
Filing Company: Mid-West National Life Insurance Company of Tennessee State Tracking Number: 42822
Company Tracking Number: MW-25884-IR AR 200907 AR MIDWEST 14431
TOI: H151 Individual Health - Hospital/Surgical/Medical Expense Sub-TOI: H151.001 Health - Hospital/Surgical/Medical Expense
Product Name: MW-25884-IR AR -Pregnancy/Childbirth Benefit Rider
Project Name/Number: /

Note To Filer

Created By:

Rosalind Minor on 07/20/2009 12:48 PM

Last Edited By:

Rosalind Minor

Submitted On:

07/27/2009 01:59 PM

Subject:

Rate Increase

Comments:

Thank you for your response on this date, stating that you would accept the 10% increase in lieu of the 35% which you requested.

Before we approve the 10%, please submit to us revised rates reflecting the 10% increase and a revised actuarial memorandum.

SERFF Tracking Number: MGCA-126209697 State: Arkansas
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Product Name: MW-25884-IR AR -Pregnancy/Childbirth Benefit Rider
Project Name/Number: /

Rate Information

Rate data does NOT apply to filing.

SERFF Tracking Number: MGCA-126209697 State: Arkansas
 Filing Company: Mid-West National Life Insurance Company of Tennessee State Tracking Number: 42822
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 TOI: H151 Individual Health - Hospital/Surgical/Medical Expense Sub-TOI: H151.001 Health - Hospital/Surgical/Medical Expense
 Product Name: MW-25884-IR AR -Pregnancy/Childbirth Benefit Rider
 Project Name/Number: /

Rate/Rule Schedule

Review Status:	Document Name:	Affected Form Numbers: (Separated with commas)	Rate Action:	Rate Action Information:	Attachments
Approved-Closed	MW-25884-IR AR Rate Page	MW-25884-IR AR	New		MW-25884-IR AR Rate Page.pdf

Mid-West National Life Insurance Company of Tennessee

Pregnancy/Childbirth Benefit Rider MW-25884-IR AR

For annual, semi-annual, or quarterly rates, multiply the appropriate monthly rate by 11, 6, or 3 respectively.

Formula = Round(Monthly Rate x Inflation, 0)

Plan Codes
ABAB36U

<u>Benefit Maximum</u>	<u>Monthly Rate</u>
\$1,000	\$32
\$2,000	\$64
\$3,000	\$96
\$4,000	\$128
\$5,000	\$160
\$6,000	\$192

Inflation	1.10000000
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Plan Codes
ABAP20U

<u>Benefit Maximum</u>	<u>Monthly Rate</u>
\$2,000	\$250

Inflation	1.10000000
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SERFF Tracking Number: MGCA-126209697 State: Arkansas
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Company Tracking Number: MW-25884-IR AR 200907 AR MIDWEST 14431
TOI: H151 Individual Health - Hospital/Surgical/Medical Expense Sub-TOI: H151.001 Health - Hospital/Surgical/Medical Expense
Product Name: MW-25884-IR AR -Pregnancy/Childbirth Benefit Rider
Project Name/Number: /

Supporting Document Schedules

Satisfied -Name: Supporting Documents **Review Status:** Approved-Closed 07/27/2009

Comments:

Attachments:

MW-25884 Arkansas Experience.pdf
MW-25884 Nationwide Experience.pdf
MW-25884-IR AR Certification.pdf
MW-25884-IR AR Cover Letter.pdf
MW-25884-IR AR Rate History.pdf

Satisfied -Name: Objection Response **Review Status:** Approved-Closed 07/27/2009

Comments:

Attachment:

MW-25884 Objection Cover Letter.pdf

MidWest National Life Insurance Company of Tennessee

Arkansas Experience

Pregnancy/Childbirth Benefit Rider MW-25884

Experience Period	Earned Premium	Incurred Claims	Loss Ratio
2006	2,989	75	2.5%
2007	2,106	308	14.6%
2008	3,156	162	5.1%
2009 YTD	258	25	9.8%
Total	8,508	571	6.7%

With Proposed Rate Increase

Experience Period	Earned Premium	Incurred Claims	Loss Ratio
Experience Period*	4,317	363	8.4%
Projection Period**	3,487	153	4.4%

Without Proposed Rate Increase

Experience Period	Earned Premium	Incurred Claims	Loss Ratio
Experience Period*	4,317	363	8.4%
Projection Period**	2,870	153	5.3%

* Experience Period: January 1, 2007 through August 31, 2008

** Projection includes the effect of prior increases and a trend factor of 8%.
Projection period: May 1, 2009 through April 30, 2010

MidWest National Life Insurance Company of Tennessee

Nationwide Experience

Pregnancy/Childbirth Benefit Rider MW-25884 and State Variants

Experience Period	Earned Premium	Incurred Claims	Loss Ratio
2006	835,022	416,127	49.8%
2007	725,983	475,301	65.5%
2008	480,708	346,978	72.2%
2009 YTD	34,063	26,102	76.6%
Total	2,075,776	1,264,509	60.9%

With Proposed Rate Increase

Experience Period	Earned Premium	Incurred Claims	Loss Ratio
Experience Period*	1,059,514	711,690	67.2%
Projection Period**	460,359	300,329	65.2%

Without Proposed Rate Increase

Experience Period	Earned Premium	Incurred Claims	Loss Ratio
Experience Period*	1,059,514	711,690	67.2%
Projection Period**	378,967	300,329	79.2%

* Experience Period: January 1, 2007 through August 31, 2008

** Projection includes the effect of prior increases and a trend factor of 8%.
Projection period: May 1, 2009 through April 30, 2010

Certification of Compliance with Arkansas Rule and Regulation 19

Insurer: NAIC # 264-66087
Form Number(s): MW-25884-IR AR

I hereby certify that the filing above meets all applicable Arkansas requirements including the requirements of Rule and Regulation 19.



Signature of Company Officer

John Ames, FSA, MAAA
Name

6/12/2009
Date



**Mid-West National
Life Insurance
Company of Tennessee**
Home Office: Oklahoma City, OK

9151 Boulevard 26
N Richland Hills, TX 76180
www.midwestlife.com
Phone: 800.729.2302
Fax: 817.255.8274

6/8/2009

Ms. Rosalind Minor
Arkansas Insurance Department
1200 West Third Street
Little Rock AR 72201-1904

**RE: Mid-West National Life Insurance Company of Tennessee
Individual Rate Filing for:
Pregnancy/Childbirth Benefit Rider
MW-25884-IR AR
Company NAIC # 264-66087
Company FEIN # 62-0724538**

Dear Ms. Minor,

The above referenced product requires a rate change. Enclosed please find an actuarial memorandum and exhibits in support of the modification. This rate filing is being made in the states of AL, AR, CO, DC, DE, GA, IN, KS, KY, LA, MS, NH, NM, and WV . Our state of domicile is Texas and does not require rate changes to be filed.

We appreciate your review of our rate filing. If you have any questions, please contact me at the following number or email address.

Sincerely,

A handwritten signature in blue ink that reads "Aliya Panjwani". The signature is fluid and cursive, with a long horizontal flourish extending to the right.

Aliya Panjwani
Actuarial Analyst
Phone: (800) 729-2302 x3884
Fax: (817) 255-8274
Email: NRHAct-Comp@HealthMarkets.com

Enclosures

ARKANSAS RATE HISTORY
Pregnancy/Childbirth Benefit Rider
MW-25884-IR AR

Plan Codes: ABAB36U and ABAP20U	
Effective Date	Rate Increase/Decrease
No Rate History	



**Mid-West National
Life Insurance
Company of Tennessee**
Home Office: Oklahoma City, OK

9151 Boulevard 26
N Richland Hills, TX 76180
www.midwestlife.com
Phone: 800.729.2302
Fax: 817.255.8274

7/17/2009

Ms. Rosalind Minor
Arkansas Insurance Department
1200 West Third Street
Little Rock AR 72201-1904

**RE: Mid-West National Life Insurance Company of Tennessee
Individual Rate Filing for:
Pregnancy/Childbirth Benefit Rider
MW-25884-IR AR
Company NAIC # 264-66087
Company FEIN # 62-0724538**

Dear Ms. Minor,

This is a response in regard to the objection for MW-25884-IR AR. Below you will find the premium information that was requested.

We appreciate your review of our rate filing. If you have any questions, please contact me at the following number or email address.

Certificate #	Current Premium	Proposed Increase	Proposed Premium	Maternity Benefit Maximum
403941128	\$128.00	1.35	\$172.80	\$4,000
485252696	\$65.00	1.35	\$87.75	\$2,000
485335231	\$65.00	1.35	\$87.75	\$2,000

Sincerely,

Chanel Orallo
Rate Filing Analyst
Phone: (800) 729-2302 x6427
Fax: (817) 255-8274
Email: NRHAct-Comp@HealthMarkets.com

Enclosures

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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	MW-25884-IR AR Rate Page	06/29/2009	MW-25884-IR AR Rate Page.pdf

Mid–West National Life Insurance Company of Tennessee

Pregnancy/Childbirth Benefit Rider MW–25884–IR AR

For annual, semi-annual, or quarterly rates, multiply the appropriate monthly rate by 11, 6, or 3 respectively.

Formula = Round(Monthly Rate x Inflation, 0)

Plan Codes
ABAB36U

<u>Benefit Maximum</u>	<u>Monthly Rate</u>
\$1,000	\$32
\$2,000	\$64
\$3,000	\$96
\$4,000	\$128
\$5,000	\$160
\$6,000	\$192

Inflation	1.35000000
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Plan Codes
ABAP20U

<u>Benefit Maximum</u>	<u>Monthly Rate</u>
\$2,000	\$250

Inflation	1.35000000
-----------	------------