

SERFF Tracking Number: UNAM-126226281 State: Arkansas  
Filing Company: American Pioneer Life Insurance Company State Tracking Number: 42925  
Company Tracking Number:  
TOI: LTC06 Long Term Care - Other Sub-TOI: LTC06.000 Long Term Care - Other  
Product Name: Long Term Care Lapse and Replacement - 2008  
Project Name/Number: /

## Filing at a Glance

Company: American Pioneer Life Insurance Company

Product Name: Long Term Care Lapse and Replacement - 2008 SERFF Tr Num: UNAM-126226281 State: ArkansasLH

TOI: LTC06 Long Term Care - Other SERFF Status: Closed State Tr Num: 42925  
Sub-TOI: LTC06.000 Long Term Care - Other Co Tr Num: State Status: Filed-Closed  
Filing Type: Advertisement Co Status: Reviewer(s): Marie Bennett  
Author: Alicia Phillips-Guiler Disposition Date: 07/17/2009  
Date Submitted: 07/13/2009 Disposition Status: Filed  
Implementation Date Requested: Implementation Date:

State Filing Description:

## General Information

Project Name: Status of Filing in Domicile:  
Project Number: Date Approved in Domicile:  
Requested Filing Mode: 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: 07/17/2009 Explanation for Other Group Market Type:  
State Status Changed: 07/17/2009  
Deemer Date: Corresponding Filing Tracking Number:  
Filing Description:  
Long-Term Care Lapse and Replacement Report – Reporting Year 2008

In compliance with your state's annual reporting requirements, we submit the above-referenced report.

Should you have any questions, please contact me at 407-995-8000, ext. 8334 or [Aguiler@uafc.com](mailto:Aguiler@uafc.com).

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Sincerely,

Alicia P. Guiler  
Senior Compliance Analyst

## Company and Contact

### Filing Contact Information

Alicia Guiler, AGuiler@uafc.com  
P.O. Box 958465 (407) 628-1776 [Phone]  
Lake Mary, FL 32795-8465 (407) 628-9021[FAX]

### Filing Company Information

American Pioneer Life Insurance Company CoCode: 60763 State of Domicile: Florida  
1001 Heathrow Park Lane Group Code: 953 Company Type:  
Suite 5001  
Lake Mary, FL 32746 Group Name: State ID Number:  
(407) 995-8000 ext. [Phone] FEIN Number: 59-0935083  
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## Filing Fees

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

COMPANY	AMOUNT	DATE PROCESSED	TRANSACTION #
American Pioneer Life Insurance Company	\$0.00	07/13/2009	

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## Correspondence Summary

### Dispositions

Status	Created By	Created On	Date Submitted
Filed	Marie Bennett	07/17/2009	07/17/2009

### 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	Marie Bennett	07/16/2009	07/16/2009	Alicia Phillips- Guiler	07/17/2009	07/17/2009

### Filing Notes

Subject	Note Type	Created By	Created On	Date Submitted
REPORT	Note To Filer	Marie Bennett	07/16/2009	07/16/2009

*SERFF Tracking Number:* UNAM-126226281      *State:* Arkansas  
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## **Disposition**

Disposition Date: 07/17/2009

Implementation Date:

Status: Filed

Comment:

Rate data does NOT apply to filing.

SERFF Tracking Number: UNAM-126226281 State: Arkansas  
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<b>Item Type</b>	<b>Item Name</b>	<b>Item Status</b>	<b>Public Access</b>
<b>Supporting Document</b>	LTC Lapse & Replacement 2008		Yes
<b>Supporting Document</b>	AR - LTC LAPSE & REPL 08		Yes

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## Objection Letter

Objection Letter Status Pending Industry Response  
Objection Letter Date 07/16/2009  
Submitted Date 07/16/2009  
Respond By Date 07/31/2009

Dear Alicia Guiler,

This will acknowledge receipt of the captioned filing.

### Objection 1

- LTC Lapse & Replacement 2008 (Supporting Document)

Comment: ALICIA, YOU FAILED TO ATTACH THE REPORT.

MARIE

Please feel free to contact me if you have questions.

Sincerely,

Marie Bennett

## Response Letter

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

Dear Marie Bennett,

### Comments:

### Response 1

Comments: See attached report. Thanks

### Related Objection 1

Applies To:

- LTC Lapse & Replacement 2008 (Supporting Document)

Comment:

ALICIA, YOU FAILED TO ATTACH THE REPORT.

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MARIE

**Changed Items:**

**Supporting Document Schedule Item Changes**

Satisfied -Name: AR - LTC LAPSE & REPL 08

Comment:

No Form Schedule items changed.

No Rate/Rule Schedule items changed.

Sincerely,  
Alicia Phillips-Guiler

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**Note To Filer**

**Created By:**

Marie Bennett on 07/16/2009 02:29 PM

**Last Edited By:**

Marie Bennett

**Submitted On:**

07/17/2009 03:32 PM

**Subject:**

REPORT

**Comments:**

ALICIA, I FOUND IT - RESPOND TO ME AND I WILL CLOSE THE FILE.

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## Rate Information

Rate data does NOT apply to filing.

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## Supporting Document Schedules

**Satisfied -Name:** LTC Lapse & Replacement 2008

**Comments:**

**Attachment:**

AR - LTC LAPSE & REPL 08.pdf

**Review Status:**

07/13/2009

**Satisfied -Name:** AR - LTC LAPSE & REPL 08

**Comments:**

**Attachment:**

AR - LTC LAPSE & REPL 08.pdf

**Review Status:**

07/17/2009



PO Box 958465, Lake Mary, FL 32795-8465  
ph: 407 628 1776 fax: 407 628 3679  
toll-free: 800 538 1053  
[www.americanpioneerlife.com](http://www.americanpioneerlife.com)

July 6, 2009

Life and Health Division  
Arkansas Department of Insurance  
1200 W. Third Street  
Little Rock, AR 72201-1904

RE: **AMERICAN PIONEER LIFE INSURANCE COMPANY**  
NAIC #60763  
Long-Term Care Lapse and Replacement Report – Reporting Year 2008

In compliance with your state's annual reporting requirements, we submit the above-referenced report.

Should you have any questions, please contact me at 407-995-8000, extension 8334 or [Aguiler@uafc.com](mailto:Aguiler@uafc.com).

Sincerely,

A handwritten signature in cursive script that reads "Alicia P. Guiler".

Alicia P. Guiler  
Senior Compliance Analyst

**Long-Term Care Insurance  
Replacement and Lapse Reporting Form**

For the State of Arkansas

For the Reporting Year of 2008

Company Name: American Pioneer Life Insurance Due: June 30 annually  
 Company Address: 1001 Heathrow Park Lane Company NAIC Number: 60763  
 Contact Person: Alicia P. Guiter Phone Number: (407) 995-8000

**Instructions**

The purpose of this form is to report on a statewide basis information regarding long-term care insurance policy replacements and lapses. Specifically, every insurer shall maintain records for each agent on that agent's amount of long-term care insurance replacement sales as a percent of the agent's total annual sales and the amount of lapses of long-term care insurance policies sold by the agent as a percent of the agent's total annual sales. The tables below should be used to report the ten percent (10%) of the insurer's agents with the greatest percentages of replacements and lapses.

**Listing of the 10% of Agents with the Greatest Percentage of Replacements**

Agent's Name	Number of Policies Sold By This Agent	Number of Policies Replaced By This Agent	Number of Replacements As % of Number Sold By This Agent
<i>N/A</i>			

**Listing of the 10% of Agents with the Greatest Percentage of Lapses**

Agent's Name	Number of Policies Sold By This Agent	Number of Policies Lapsed By This Agent	Number of Lapses As % of Number Sold By This Agent
<i>Steven F. Twomey</i>	<i>0</i>	<i>1</i>	<i>0%</i>

**Company Totals** statewide

Percentage of Replacement Policies Sold to Total Annual Sales 0 %  
 Percentage of Replacement Policies Sold to Policies In Force (as of the end of the preceding calendar year) 0 %  
 Percentage of Lapsed Policies to Total Annual Sales 0 %  
 Percentage of Lapsed Policies to Policies In Force (as of the end of the preceding calendar year) 0 %



PO Box 958465, Lake Mary, FL 32795-8465  
ph: 407 628 1776 fax: 407 628 3679  
toll-free: 800 538 1053  
[www.americanpioneerlife.com](http://www.americanpioneerlife.com)

July 6, 2009

Life and Health Division  
Arkansas Department of Insurance  
1200 W. Third Street  
Little Rock, AR 72201-1904

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Sincerely,

A handwritten signature in cursive script that reads "Alicia P. Guiler".

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For the State of Arkansas

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