

SERFF Tracking Number: UNAM-126259582 State: Arkansas
Filing Company: American Pioneer Life Insurance Company State Tracking Number: 43157
Company Tracking Number:
TOI: MS06 Medicare Supplement - Other Sub-TOI: MS06.000 Medicare Supplement - Other
Product Name: 2nd Quarter Hospital Network - 2009
Project Name/Number: /

Filing at a Glance

Company: American Pioneer Life Insurance Company

Product Name: 2nd Quarter Hospital Network - SERFF Tr Num: UNAM-126259582 State: ArkansasLH
2009

TOI: MS06 Medicare Supplement - Other

SERFF Status: Closed

State Tr Num: 43157

Sub-TOI: MS06.000 Medicare Supplement -
Other

Co Tr Num:

State Status: Filed-Closed

Filing Type: Advertisement

Co Status:

Reviewer(s): Stephanie Fowler

Author: Alicia Phillips-Guiler

Disposition Date: 08/11/2009

Date Submitted: 08/10/2009

Disposition Status: Accepted For

Informational Purposes

Implementation Date:

Implementation Date Requested:

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: 08/11/2009

Explanation for Other Group Market Type:

State Status Changed: 08/11/2009

Deemer Date:

Corresponding Filing Tracking Number:

Filing Description:

List of Hospital Network Providers – 2nd Qtr. 2009

NAIC# 60763

Dear Sir or Madam:

SERFF Tracking Number: UNAM-126259582 State: Arkansas
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In compliance with Arkansas Regulation 27 s. 10, please find an updated list of hospital network providers for our Medicare Supplement Select Plans, approved by the Department on November 29, 2005.

If you require further information, please contact me at 407-995-8000, ext. 8334 or aguiler@uafc.com

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

Filing Fees

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

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COMPANY	AMOUNT	DATE PROCESSED	TRANSACTION #
American Pioneer Life Insurance Company	\$0.00	08/10/2009	

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Correspondence Summary

Dispositions

Status	Created By	Created On	Date Submitted
Accepted For Informational Purposes	Stephanie Fowler	08/11/2009	08/11/2009

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Disposition

Disposition Date: 08/11/2009

Implementation Date:

Status: Accepted For Informational Purposes

Comment:

Rate data does NOT apply to filing.

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Item Type	Item Name	Item Status	Public Access
Supporting Document	2nd Qtr Hosp Ntwk 2009	Accepted for Informational Purposes	Yes

SERFF Tracking Number: UNAM-126259582 *State:* Arkansas
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Rate Information

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Product Name: 2nd Quarter Hospital Network - 2009
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Supporting Document Schedules

Satisfied -Name: 2nd Qtr Hosp Ntwk 2009

Review Status:

Accepted for Informational 08/11/2009
Purposes

Comments:

Attachment:

AR- 2ND QTR HOSP NTKW 09.pdf



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

August 4, 2009

Arkansas Department of Insurance
1200 West Third Street
Little Rock, AR 72201

Re: INFORMATIONAL Filing
American Pioneer Life Insurance Company (in AR d/b/a Florida American Pioneer
Life Insurance Company)
Medicare Supplement Select Insurance
Form# AMSI-S-06-PLAN B AR et al.
List of Hospital Network Providers – 2nd Qtr. 2009
NAIC# 60763

Dear Sir or Madam:

In compliance with Arkansas Regulation 27 s. 10, please find an updated list of hospital network providers for our Medicare Supplement Select Plans, approved by the Department on November 29, 2005.

If you require further information, please contact me at 407-995-8000, ext. 8334 or aguiler@uaafc.com

Sincerely,

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

Alicia P. Guiler
Senior Compliance Analyst

FLORIDA AMERICAN PIONEER LIFE INSURANCE COMPANY

**MEDICARE SUPPLEMENT SELECT
NETWORK PROVIDER HOSPITAL DIRECTORY**

ARKANSAS HOSPITAL NETWORK

As of 05/19/2008

CRAWFORD

Crawford Memorial Hospital

E. Main & South 20th Streets

Van Buren, AR 72957

(479) 474-3401

GARLAND

National Park Medical Center

1910 Malvern Avenue

Hot Springs, AR 71901

(501) 321-1000

PULASKI

St Vincent's Doctors Hospital

6101 St Vincent Circle

Little Rock, AR 72205

(501) 552-6000

St Vincent's Infirmary Medical Center

2 St. Vincent Circle

Little Rock, AR 72209

(501) 552-3000

St Vincent's Medical Center North

2215 Wildwood Ave.

Sherwood, AR 72120

(501) 552-7100

WHITE

Central Arkansas Hospital

1200 S. Main St.

Searcy, AR 72143

(501) 278-3100

NOTE: An updated Network Provider Hospital Directory is provided with the policy.
To verify current hospital participation call (toll free) 800-999-2224.