

SERFF Tracking Number:	AMMS-126279453	State:	Arkansas
Filing Company:	Golden Rule Insurance Company	State Tracking Number:	43325
Company Tracking Number:	SA-S-1457		
TOI:	H16G Group Health - Major Medical	Sub-TOI:	H16G.002A Large Group Only - PPO
Product Name:	Association Group		
Project Name/Number:	SA-S-1457/SA-S-1457		

## Filing at a Glance

Company: Golden Rule Insurance Company

Product Name: Association Group

SERFF Tr Num: AMMS-126279453 State: Arkansas

TOI: H16G Group Health - Major Medical

SERFF Status: Closed-Approved-  
Closed State Tr Num: 43325

Sub-TOI: H16G.002A Large Group Only - PPO Co Tr Num: SA-S-1457

State Status: Approved-Closed

Filing Type: Form

Reviewer(s): Rosalind Minor

Authors: Pat Allison, Deb Paris

Disposition Date: 09/09/2009

Date Submitted: 08/25/2009

Disposition Status: Approved-  
Closed

Implementation Date Requested: On Approval

Implementation Date:

State Filing Description:

## General Information

Project Name: SA-S-1457

Status of Filing in Domicile: Not Filed

Project Number: SA-S-1457

Date Approved in Domicile:

Requested Filing Mode: Review & Approval

Domicile Status Comments:

Explanation for Combination/Other:

Market Type: Group

Submission Type: New Submission

Group Market Size: Large

Overall Rate Impact:

Group Market Type: Association

Filing Status Changed: 09/09/2009

Explanation for Other Group Market Type:

State Status Changed: 09/09/2009

Deemer Date:

Created By: Pat Allison

Submitted By: Pat Allison

Corresponding Filing Tracking Number:

Filing Description:

The enclosed optional rider is submitted for your review and approval for use with our existing portfolio of group health forms. Golden Rule intends to issue this form in conjunction with previously approved policies and certificates delivered to evidence coverage under master policies issued in the state of Illinois to a non-employer based association group. The addition of rider amendment SA-S-1457 is intended to document Golden Rule's compliance with Arkansas Act 1179, which requires insurers to offer coverage for hearing aids effective after January 1, 2010.

To the best of my knowledge, this form complies with the statutory and regulatory requirements of your state. The required documents are enclosed, accordingly.

If you should have any questions concerning this filing, please feel free to contact Policy Compliance at 800-926-7602 and request to speak with me. If you prefer, I may be contacted via e-mail at the following address:

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*Product Name:* Association Group  
*Project Name/Number:* SA-S-1457/SA-S-1457  
 dlparis@goldenrule.com.

## Company and Contact

### Filing Contact Information

Debra Paris, Manager      dlparis@goldenrule.com  
 7440 Woodland Drive      800-926-7602 [Phone] 7771 [Ext]  
 Indianapolis, IN 46278-1719      317-328-9645 [FAX]

### Filing Company Information

Golden Rule Insurance Company	CoCode: 62286	State of Domicile: Indiana
7440 Woodland Drive	Group Code: 707	Company Type: Life and Health
Indianapolis, IN 46278	Group Name:	State ID Number:
(317) 297-0358 ext. [Phone]	FEIN Number: 37-6028756	

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## Filing Fees

Fee Required?      Yes  
 Fee Amount:      \$35.00  
 Retaliatory?      No  
 Fee Explanation:      \$35 per form x 1 form = \$35.  
                                  Paid via EFT.  
 Per Company:      No

COMPANY	AMOUNT	DATE PROCESSED	TRANSACTION #
Golden Rule Insurance Company	\$35.00	08/25/2009	30094462

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## Correspondence Summary

### Dispositions

Status	Created By	Created On	Date Submitted
Approved-Closed	Rosalind Minor	09/09/2009	09/09/2009

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## **Disposition**

Disposition Date: 09/09/2009

Implementation Date:

Status: Approved-Closed

Comment:

Rate data does NOT apply to filing.

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<b>Schedule</b>	<b>Schedule Item</b>	<b>Schedule Item Status</b>	<b>Public Access</b>
<b>Supporting Document</b>	Flesch Certification	Approved-Closed	Yes
<b>Supporting Document</b>	Application	Approved-Closed	Yes
<b>Form</b>	Arkansas Hearing Aids Rider	Approved-Closed	Yes

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## Form Schedule

**Lead Form Number: SA-S-1457**

Schedule Item	Form Number	Form Type Form Name	Action	Action Specific Data	Readability	Attachment
Approved-Closed 09/09/2009	SA-S-1457	Policy/Cont ract/Fratern Aids Rider al Certificate: Amendmen t, Insert Page, Endorseme nt or Rider	Initial		59.140	SA-S-1457 Form.pdf

## ARKANSAS HEARING AIDS RIDER

By the attachment of this rider, *covered expenses* are amended to include charges for *hearing aids* purchased from a professional licensed by the state of Arkansas to dispense a hearing aid or hearing instrument. *Covered expenses* for hearing aids shall be exempt from any *deductible amount*, copayment amount or *coinsurance percentage*, but shall be limited to a maximum of [\$1,400 per ear in a three-year period], per *covered person*.

As used in this rider, "*hearing aid*" means an instrument or device, including repair and replacement parts, that:

- A. Is designed and offered for the purpose of aiding persons with or compensating for impaired hearing;
- B. Is worn in or on the body; and
- C. Is generally not useful to a person in the absence of a hearing impairment.

This rider will not change, waive or extend any part of the *policy/certificate*, other than as set forth above.

This rider is effective on January 1, 2010, or at the same time as the certificate whichever is later.

Golden Rule Insurance Company



Secretary

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## Supporting Document Schedules

	<b>Item Status:</b>	<b>Status Date:</b>
<b>Satisfied - Item:</b> Flesch Certification	Approved-Closed	09/09/2009
<b>Comments:</b>		
<b>Attachment:</b>		
C006.3 P006.3 Readability 42008.pdf		

	<b>Item Status:</b>	<b>Status Date:</b>
<b>Bypassed - Item:</b> Application	Approved-Closed	09/09/2009
<b>Bypass Reason:</b> Not applicable to this filing.		
<b>Comments:</b>		

Certification of Reading Ease

RE: Form (s) P-006.3, et al  
C-006.3, et al

Golden Rule Insurance Company by Steven L. Pollack, President, does hereby certify to the best of our knowledge and belief that:

1. The Flesch reading ease test score of the above is: P-006.3, et al = 59.06  
C-006.3, et al = 59.14

2. The above is printed (except for : specification pages, schedules, tables and, with regard to any application, minor instructions concerning preparation) in not less than ten point type, one point leaded.

3. The number of words contained in the text is: P-006.3, et al = 17,116  
C-006.3, et al = 17,234

4. The numbers used in arriving at the above scores were:

Form #	<u>P-006.3, et al</u>	<u>C-006.3, et al</u>
Syllables	<u>27,303</u>	<u>27,497</u>
Words	<u>17,116</u>	<u>17,234</u>
Sentences	<u>1,354</u>	<u>1,368</u>

5. All text has been included in arriving at the above score(s), except for the following: Headings, defined terms, medical terminology and table of contents.

6. The entire text of the form(s) was analyzed in arriving at the above score(s), except as follows: See #5 above.

7. The readability of the above form(s) complies with the statutory and/or regulatory requirements of the following states: All states.

8. The above form(s) will be used in:

individual health insurance

individual life insurance

group health insurance

group life insurance

APR 19 2008

Date



Steven L. Pollack  
President