

SERFF Tracking Number: LFCR-126274201 State: Arkansas  
Filing Company: Berkshire Life Insurance Company of America State Tracking Number: 43284  
Company Tracking Number: AR BG001 PRT GUIDE  
TOI: LTC03I Individual Long Term Care Sub-TOI: LTC03I.004 Partnership  
Product Name: Care ProVider  
Project Name/Number: /

## Filing at a Glance

Company: Berkshire Life Insurance Company of America

Product Name: Care ProVider

SERFF Tr Num: LFCR-126274201 State: Arkansas

TOI: LTC03I Individual Long Term Care

SERFF Status: Closed-Accepted State Tr Num: 43284

For Informational Purposes

Sub-TOI: LTC03I.004 Partnership

Co Tr Num: AR BG001 PRT GUIDE State Status: Closed

Filing Type: Form

Reviewer(s): Harris Shearer

Authors: Smith Darlene, Trudy Weigel

Disposition Date: 09/03/2009

Date Submitted: 08/20/2009

Disposition Status: Accepted For Informational Purposes

Implementation Date Requested: On Approval

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: Not filed.

Explanation for Combination/Other:

Market Type: Individual

Submission Type: New Submission

Group Market Size:

Overall Rate Impact:

Group Market Type:

Filing Status Changed: 09/03/2009

Explanation for Other Group Market Type:

State Status Changed: 09/03/2009

Deemer Date:

Created By: Trudy Weigel

Submitted By: Trudy Weigel

Corresponding Filing Tracking Number:

Filing Description:

RE: BERKSHIRE LIFE INSURANCE COMPANY OF AMERICA - NAIC # 71714

BG01P(06/04)-AR et al Tax-Qualified Policy Forms - Partnership Certification Approval 6/22/09

As required by Rule 94, the Company is filing their proposed exchange procedures for review and approval.

Eligible existing policyholders who were issued policies on or after July 1, 2008, under either of the above referenced policy series, will receive notification that their existing policy is being exchanged for a Partnership-Qualified Long-Term Care Policy. The exchange will be accomplished through the issuance of an updated Policy Schedule Page, indicating

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the new effective date for Partnership qualification, as well as the notice of Important Information Regarding Your Policy's Long-Term Care Insurance Partnership Status.

An eligible policyholder has been issued a policy under either of the above referenced policy form series and has also purchased the necessary Inflation Protection required under Arkansas Partnership regulations.

Notification will include:

- (1) Cover Letter (sample letter attached)
- (2) Required Disclosure Notice BG01D-PRT(01/09)-AR (approved 11/12/08)
- (3) Updated Policy Schedule Pages (indicating Partnership eligibility) (samples attached).

Ineligible policyholders will not receive an exchange letter.

Thank you for your assistance with this filing.

## Company and Contact

### Filing Contact Information

Trudy Weigel, Compliance Analyst 2 trudy.weigel@lifecareassurance.com  
P.O. Box 4243 818-867-2240 [Phone]  
Woodland Hills, CA 91365-4243 818-867-2508 [FAX]

### Filing Company Information

(This filing was made by a third party - LCA01)

Berkshire Life Insurance Company of America CoCode: 71714 State of Domicile: Massachusetts  
Long Term Care Administrative Office Group Code: 429 Company Type:  
P.O. Box 4243 Group Name: State ID Number:  
Woodland Hills, CA 91365-4243 FEIN Number: 75-1277524  
(818) 867-2450 ext. [Phone]

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## Filing Fees

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

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COMPANY	AMOUNT	DATE PROCESSED	TRANSACTION #
Berkshire Life Insurance Company of America	\$0.00	08/20/2009	

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## Correspondence Summary

### Dispositions

Status	Created By	Created On	Date Submitted
Accepted For Harris Shearer Informational Purposes		09/03/2009	09/03/2009

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## Disposition

Disposition Date: 09/03/2009

Implementation Date:

Status: Accepted For Informational Purposes

Comment: In the absence of a Rule for procedures to be followed in an exchange program for Partnership policies, we are accepting this filing for use in Arkansas.

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		No
<b>Supporting Document</b>	Application		No
<b>Supporting Document</b>	Health - Actuarial Justification		No
<b>Supporting Document</b>	Outline of Coverage		No
<b>Supporting Document</b>	Sample Cover Letter		Yes
<b>Supporting Document</b>	Required Disclosure Previously Approved 11/12/2008		Yes
<b>Supporting Document</b>	Updated Policy Schedule Pages		Yes

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## Supporting Document Schedules

	<b>Item Status:</b>	<b>Status Date:</b>
<b>Bypassed - Item:</b> Outline of Coverage		
<b>Bypass Reason:</b> N/A		
<b>Comments:</b>		

	<b>Item Status:</b>	<b>Status Date:</b>
<b>Satisfied - Item:</b> Sample Cover Letter		
<b>Comments:</b>		
<b>Attachment:</b> BG LTC Partnership Exchange Ltr_AR.pdf		

	<b>Item Status:</b>	<b>Status Date:</b>
<b>Satisfied - Item:</b> Required Disclosure Previously Approved 11/12/2008		
<b>Comments:</b>		
<b>Attachment:</b> BG01D-PRT(01-09)-AR.pdf		

	<b>Item Status:</b>	<b>Status Date:</b>
<b>Satisfied - Item:</b> Updated Policy Schedule Pages		
<b>Comments:</b>		
<b>Attachment:</b> BG LTC Partnership Exchange Sch Pga AR.pdf		

Date

Name 1

Name 2

Address

City, State Zip

Re: Policy Number 15 KXXXXXXX

Dear Policyholder(s):

You chose wisely when you selected Berkshire Life Insurance Company of America for your long-term care insurance needs. Your Care ProVider™ long-term care policy has been enhanced, at no additional cost to you!

Because your state has adopted Long-Term Care (LTC) Partnership rules, your Care ProVider™ long-term care policy qualifies for LTC Partnership status and you will enjoy the benefits of the LTC Partnership program.

The Long-Term Care Partnership program was developed to encourage people who might otherwise turn to Medicaid to finance their long-term care to purchase long-term care insurance. Since you already purchased a qualifying policy, if you deplete your insurance benefits, you may then be permitted to retain a specified amount of assets and still qualify for Medicaid, provided you meet all other Medicaid eligibility criteria.

Enclosed are a Long-Term Care Partnership policy schedule page and an important notice. Please keep these documents with your policy.

If you have questions regarding your policy, please contact our office at 888-505-8743. If you have questions regarding the Arkansas Long-Term Care Partnership program, please see <https://ardhs.sharepointsite.net/LTCP/default.aspx>, or call the Arkansas Senior Health Insurance Program, 800-224-6330.

Sincerely,

Jeffrey Yeager

Vice-President, Claims and Client Services

CC: (Servicing Agent Name, Servicing Agent Number)

**Berkshire Life Insurance Company of America**

Home Office: Pittsfield, Massachusetts  
Long Term Care Administrative Office  
Post Office Box 4243  
Woodland Hills, CA 91365-4243  
888-505-8743

**Important Information Regarding Your Policy's  
Long-Term Care Insurance Partnership Status**

This disclosure notice is issued in conjunction with your long-term care policy:

Some long-term care insurance policies sold in Arkansas qualify for the Arkansas Long-Term Care Insurance Partnership Program. Insurance companies voluntarily agree to participate in the Partnership Program by offering long-term care insurance coverage that meets certain State and Federal requirements. Long-term care insurance policies that qualify as Partnership Policies may be entitled to special treatment, and in particular an "Asset Disregard," under Arkansas's Medicaid program.

**Asset Disregard** means that an amount of the policyholder's assets equal to the amount of long-term care insurance benefits received under a qualified Partnership Policy will be disregarded for the purpose of determining the insured's eligibility for Medicaid. This generally allows a person to keep assets equal to the insurance benefits received under a qualified Partnership Policy without affecting the person's eligibility for Medicaid. All other Medicaid eligibility criteria will apply. Asset Disregard is not available under a long-term care insurance policy that is not a Partnership Policy. **The purchase of a Partnership Policy does not automatically qualify you for Medicaid.**

**Partnership Policy Status.** Your long-term care insurance policy is intended to qualify as a Partnership Policy under the Arkansas Long-Term Care Partnership Program as of your Policy's effective date.

**What Could Disqualify Your Policy as a Partnership Policy?** If you make any changes to your policy, such changes could affect whether your policy continues to be a Partnership Policy. ***Before you make any changes, you should consult with Berkshire Life Insurance Company of America to determine the effect of a proposed change.*** In addition, if you move to a State that does not maintain a Partnership Program or does not recognize your policy as a Partnership Policy, you would not receive beneficial treatment of your policy under the Medicaid program of that State. The information contained in this Notice is based on current State and Federal laws. These laws may be subject to change. Any change in law could reduce or eliminate the beneficial treatment of your policy under Arkansas's Medicaid program.

**Additional Information.** If you have questions regarding your insurance policy please contact Berkshire Life Insurance Company of America. If you have questions regarding current laws governing Medicaid eligibility, you should contact the Arkansas Department of Human Services.

**This form and all benefit statements received should be kept with your policy.**

**POLICY SCHEDULE**  
**PARTNERSHIP POLICY**

**POLICY INFORMATION**

Policy Number: 15-12345678  
 Insured: John Doe Insuring Age: 55  
 Insured: Mary Doe Insuring Age: 50

POLICY FORMS	EFFECTIVE DATE	PREMIUM
Partnership Eligible	10/6/09	
Long Term Care Insurance Policy, BG01P(06/04)-AR	10/6/04	\$511.68
Compound 5% Inflation Protection Rider, BG01R-IP5(06/04)	10/6/04	\$1,238.26
Shortened Benefit Period Nonforfeiture Rider, BG01R-SBN(06/04)	10/6/04	\$570.48
10-Year Premium Payment Option, BG01E-10P(06/04)	10/6/04	\$1,756.56
Total Joint Annual Premium:*		\$4,076.98

Total Individual Annual Premium Insuring Age 55 - \$3,136.14  
 Total Individual Annual Premium Insuring Age 50 - \$2,742.22

\*If you choose a:

Semi-Annual Premium you will pay \$2,120.03 every 6 months. This means you are paying an additional \$163.08 or 4.0% per year, or a total annualized premium of \$4,240.06.

Quarterly Premium you will pay \$1,100.78 every 3 months. This means you are paying an additional \$326.16 or 8.0% per year, or a total annualized premium of \$4,403.14.

Monthly Premium you will pay \$358.77 every month. This means you are paying an additional \$228.31 or 5.6% per year, or a total annualized premium of \$4,305.29.

Premium Payment Period: 10 Years  
 Anniversary Date: 10/6/05 and each succeeding 7/1 thereafter.  
 Policy Schedule Date: 10/6/09

This Policy Schedule replaces any previously issued Policy Schedules.

Policy Number: 15-12345678  
Insured: John Doe  
Insured: Mary Doe

### **BENEFIT INFORMATION**

All Benefits, the Elimination Period and the Benefit Amount shown below apply individually to each Insured named above.

Elimination Period:	90 Days
Benefit Period:	3 Years
Daily Benefit for Facility Care Services (in a Nursing Facility or Assisted Living Facility) up to:	\$100.00
Daily Benefit for Home and Community Care Services	
up to:	\$100.00
Monthly Benefit for Emergency Response	
System: up to	\$50.00
Maximum Lifetime Caregiver Training: up to	\$500.00
Maximum Lifetime Alternative Plan of Care: up to	\$5,000.00
Facility Bed Reservation: up to	30 days per calendar year
Respite Care Services: up to	30 days per calendar year
Coverage outside the United States, or its territories, or Canada:	
up to	30 days per calendar year
Benefit Amount payable:	\$109,500.00
Daily Benefit of \$100.00 times Benefit Period of 1,095 days(3 years)	

**Our toll-free number for policy service and claims is 888-505-8743.**