

SERFF Tracking Number: IASL-126436052 State: Arkansas
 Filing Company: American General Life and Accident Insurance Company State Tracking Number: 44434
 Company Tracking Number: AGLA MS RI
 TOI: MS06 Medicare Supplement - Other Sub-TOI: MS06.000 Medicare Supplement - Other
 Product Name: American General Life and Accident Insurance Company Rate Filing for Individual Standardized and Prestandardized Medicare Supplement Plans
 Project Name/Number: /

Filing at a Glance

Company: American General Life and Accident Insurance Company

Product Name: American General Life and Accident Insurance Company Rate Filing for Individual Standardized and Prestandardized Medicare Supplement Plans
 SERFF Tr Num: IASL-126436052 State: Arkansas

TOI: MS06 Medicare Supplement - Other SERFF Status: Closed-Approved-Closed State Tr Num: 44434

Sub-TOI: MS06.000 Medicare Supplement - Other Co Tr Num: AGLA MS RI State Status: Approved-Closed

Filing Type: Rate

Author: Jeffrey McGinn Reviewer(s): Stephanie Fowler
 Date Submitted: 12/30/2009 Disposition Date: 01/27/2010
 Disposition Status: Approved-Closed

Implementation Date Requested:

Implementation Date:

State Filing Description:

General Information

Project Name:

Status of Filing in Domicile: Authorized

Project Number:

Date Approved in Domicile: 12/23/2009

Requested Filing Mode: Review & Approval

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: 01/27/2010

Explanation for Other Group Market Type:

State Status Changed: 01/27/2010

Deemer Date:

Created By: Jeffrey McGinn

Submitted By: Jeffrey McGinn

Corresponding Filing Tracking Number:

Filing Description:

American General Life and Accident Insurance Company Rate Filing for Individual Standardized and Prestandardized Medicare Supplement Plans

SERFF Tracking Number: IASL-126436052 State: Arkansas
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Form Numbers: AGLA 82192 – Plan A, AGLA 82292 – Plan B; Prestandardized: 6001 M-1, 6001 M-2, 74087, AGLA 77089, AGLA 79090, AGLA 79190

Rate Increase Amount: 0.0%

This filing was approved in the Company's domicile state of Tennessee on December 23, 2009.

Company and Contact

Filing Contact Information

Jeffrey McGinn, Compliance Analyst jeffrey.mcginn@iasadmin.com
 8545 126th Avenue North 727-584-0007 [Phone] 2389 [Ext]
 Suite 200 727-584-5613 [FAX]
 Largo, FL 33773-1502

Filing Company Information

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

American General Life and Accident Insurance CoCode: 66672 State of Domicile: Tennessee
 Company
 American General Center Group Code: 11 Company Type:
 Nashville, TN 37250 Group Name: State ID Number:
 (615) 749-1000 ext. [Phone] FEIN Number: 62-0306330

Filing Fees

Fee Required? Yes
 Fee Amount: \$150.00
 Retaliatory? No
 Fee Explanation:
 Per Company: No

COMPANY	AMOUNT	DATE PROCESSED	TRANSACTION #
American General Life and Accident Insurance Company	\$150.00	12/30/2009	33171217

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Correspondence Summary

Dispositions

Status	Created By	Created On	Date Submitted
Approved-Closed	Stephanie Fowler	01/27/2010	01/27/2010

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Disposition

Disposition Date: 01/27/2010

Implementation Date:

Status: Approved-Closed

Comment: We have approved this rate filing. There was no increase requested.

Company Name:	Overall % Indicated Change:	Overall % Rate Impact:	Written Premium Change for this Program:	# of Policy Holders Affected for this Program:	Written Premium for this Program:	Maximum % Change (where required):	Minimum % Change (where required):
American General Life and Accident Insurance Company	0.000%	0.000%	\$0	4	\$22,407	0.000%	0.000%

SERFF Tracking Number: IASL-126436052 State: Arkansas
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Schedule	Schedule Item	Schedule Item Status	Public Access
Supporting Document	Health - Actuarial Justification	Accepted for Informational Purposes	No
Supporting Document	Third Party Authorization Letter	Accepted for Informational Purposes	Yes
Rate	Rate Pages	Approved	Yes

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 Project Name/Number: /

Rate Information

Rate data applies to filing.

Filing Method: SERFF
 Rate Change Type: Neutral
 Overall Percentage of Last Rate Revision: 0.000%
 Effective Date of Last Rate Revision:
 Filing Method of Last Filing: SERFF

Company Rate Information

Company Name:	Overall % Indicated Change:	Overall % Rate Impact:	Written Premium Change for this Program:	# of Policy Holders Affected for this Program:	Written Premium for this Program:	Maximum % Change (where required):	Minimum % Change (where required):
American General Life and Accident Insurance Company	0.000%	0.000%	\$0	4	\$22,407	0.000%	0.000%

SERFF Tracking Number: IASL-126436052 State: Arkansas
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Rate/Rule Schedule

Schedule Item Status:	Document Name:	Affected Form Numbers: (Separated with commas)	Rate Action:	Rate Action Information:	Attachments
Approved 01/27/2010	Rate Pages	AGLA 82192, AGLA 82292, 6001 M-1, AGLA 79190, 74087, AGLA 77089, AGLA 79090, 6001 M-2	Revised	Previous State Filing Number: Percent Rate Change Request:	40863 Rate Pages.pdf

AMERICAN GENERAL LIFE AND ACCIDENT INSURANCE COMPANY

Actuarial Justification for Medicare Supplement Rate Increase Individual Standardized Medicare Supplement Plans

ARKANSAS RATES

Policy Forms AGLA 82192

	<u>Issue Age</u>	<u>Current Annual Premium</u>	<u>Proposed Rate Increase</u>	<u>Proposed Annual Premium</u>
Male	65-69	\$ 2,125	0.0%	\$ 2,125
	70-74	\$ 2,125	0.0%	\$ 2,125
	75-79	\$ 2,125	0.0%	\$ 2,125
	80+	\$ 2,125	0.0%	\$ 2,125
Female	65-69	\$ 2,125	0.0%	\$ 2,125
	70-74	\$ 2,125	0.0%	\$ 2,125
	75-79	\$ 2,125	0.0%	\$ 2,125
	80+	\$ 2,125	0.0%	\$ 2,125

To calculate modes other than annual, multiply the total annual premium less the \$15 policy premium by the appropriate factor from the following table and add the corresponding policy premium.

<u>Mode</u>	<u>Factor</u>	<u>Policy Premium</u>
Semi-Annual	0.515	\$ 8.00
Quarterly	0.262	\$ 4.50
Monthly	0.093	\$ 2.50
Monthly Pre-Authorized Check	0.093	\$ 1.75

AMERICAN GENERAL LIFE AND ACCIDENT INSURANCE COMPANY

Actuarial Justification for Medicare Supplement Rate Increase Individual Standardized Medicare Supplement Plans

ARKANSAS RATES

Policy Forms AGLA 82292

	<u>Issue Age</u>	<u>Current Annual Premium</u>	<u>Proposed Rate Increase</u>	<u>Proposed Annual Premium</u>
Male	65-69	\$ 4,448	0.0%	\$ 4,448
	70-74	\$ 4,448	0.0%	\$ 4,448
	75-79	\$ 4,448	0.0%	\$ 4,448
	80+	\$ 4,448	0.0%	\$ 4,448
Female	65-69	\$ 4,448	0.0%	\$ 4,448
	70-74	\$ 4,448	0.0%	\$ 4,448
	75-79	\$ 4,448	0.0%	\$ 4,448
	80+	\$ 4,448	0.0%	\$ 4,448

To calculate modes other than annual, multiply the total annual premium less the \$15 policy premium by the appropriate factor from the following table and add the corresponding policy premium.

<u>Mode</u>	<u>Factor</u>	<u>Policy Premium</u>
Semi-Annual	0.515	\$ 8.00
Quarterly	0.262	\$ 4.50
Monthly	0.093	\$ 2.50
Monthly Pre-Authorized Check	0.093	\$ 1.75

AMERICAN GENERAL LIFE AND ACCIDENT INSURANCE COMPANY

Actuarial Justification for Medicare Supplement Rate Increase Individual Pre-Standardized Medicare Supplement Plans

ARKANSAS RATES

Policy Forms 6001 M-1 & 737

	<u>Issue Age</u>	<u>Current Annual Premium</u>	<u>Proposed Rate Increase</u>	<u>Proposed Annual Premium</u>
Male	00-69	\$ 4,186	0.0%	\$ 4,186
	70-74	\$ 4,186	0.0%	\$ 4,186
	75-79	\$ 4,186	0.0%	\$ 4,186
Female	65-69	\$ 4,186	0.0%	\$ 4,186
	70-74	\$ 4,186	0.0%	\$ 4,186
	75-79	\$ 4,186	0.0%	\$ 4,186

To calculate modes other than annual, multiply the total annual premium less the \$15 policy premium by the appropriate factor from the following table and add the corresponding policy premium.

<u>Mode</u>	<u>Factor</u>	<u>Policy Premium</u>
Semi-Annual	0.515	\$ 8.75
Quarterly	0.262	\$ 4.75
Monthly	0.090	\$ 1.75
Monthly Pre-Authorized Check	0.090	\$ 1.25

AMERICAN GENERAL LIFE AND ACCIDENT INSURANCE COMPANY

Actuarial Justification for Medicare Supplement Rate Increase

Individual Pre-Standardized Medicare Supplement Plans

ARKANSAS RATES

Policy Forms 6001 M-2 & 738

	<u>Issue Age</u>	<u>Current Annual Premium</u>	<u>Proposed Rate Increase</u>	<u>Proposed Annual Premium</u>
Male	65-69	\$ 5,964	0.0%	\$ 5,964
	70-74	\$ 5,964	0.0%	\$ 5,964
	75-79	\$ 5,964	0.0%	\$ 5,964
Female	65-69	\$ 5,964	0.0%	\$ 5,964
	70-74	\$ 5,964	0.0%	\$ 5,964
	75-79	\$ 5,964	0.0%	\$ 5,964

To calculate modes other than annual, multiply the total annual premium less the \$15 policy premium by the appropriate factor from the following table and add the corresponding policy premium.

<u>Mode</u>	<u>Factor</u>	<u>Policy Premium</u>
Semi-Annual	0.515	\$ 8.75
Quarterly	0.262	\$ 4.75
Monthly	0.090	\$ 1.75
Monthly Pre-Authorized Check	0.090	\$ 1.25

AMERICAN GENERAL LIFE AND ACCIDENT INSURANCE COMPANY

Actuarial Justification for Medicare Supplement Rate Increase Individual Pre-Standardized Medicare Supplement Plans

ARKANSAS RATES

Policy Form 74087

	<u>Issue Age</u>	<u>Current Annual Premium</u>	<u>Proposed Rate Increase</u>	<u>Proposed Annual Premium</u>
Male	00-69	\$ 6,336	0.0%	\$ 6,336
	70-74	\$ 6,336	0.0%	\$ 6,336
	75-79	\$ 6,336	0.0%	\$ 6,336
Female	00-69	\$ 6,336	0.0%	\$ 6,336
	70-74	\$ 6,336	0.0%	\$ 6,336
	75-79	\$ 6,336	0.0%	\$ 6,336

To calculate modes other than annual, multiply the total annual premium less the \$15 policy premium by the appropriate factor from the following table and add the corresponding policy premium.

<u>Mode</u>	<u>Factor</u>	<u>Policy Premium</u>
Semi-Annual	0.515	\$ 8.00
Quarterly	0.262	\$ 4.50
Monthly	0.100	\$ 1.75
Monthly Pre-Authorized Check	0.093	\$ 1.75

AMERICAN GENERAL LIFE AND ACCIDENT INSURANCE COMPANY

Actuarial Justification for Medicare Supplement Rate Increase Individual Pre-Standardized Medicare Supplement Plans

ARKANSAS RATES

(Form 75187) used with Form 74087, 50% Rider

	<u>Issue Age</u>	<u>Current Annual Premium</u>	<u>Proposed Rate Increase</u>	<u>Proposed Annual Premium</u>
Male	00-69	\$ 1,047	0.0%	\$ 1,047
	70-74	\$ 1,047	0.0%	\$ 1,047
	75-79	\$ 1,047	0.0%	\$ 1,047
	80+	\$ 1,047	0.0%	\$ 1,047
Female	00-69	\$ 1,047	0.0%	\$ 1,047
	70-74	\$ 1,047	0.0%	\$ 1,047
	75-79	\$ 1,047	0.0%	\$ 1,047
	80+	\$ 1,047	0.0%	\$ 1,047

AMERICAN GENERAL LIFE AND ACCIDENT INSURANCE COMPANY

Actuarial Justification for Medicare Supplement Rate Increase Individual Pre-Standardized Medicare Supplement Plans

ARKANSAS RATES

(Form 75687) used with Form 74087, 90% Rider

	<u>Issue Age</u>	<u>Current Annual Premium</u>	<u>Proposed Rate Increase</u>	<u>Proposed Annual Premium</u>
Male	00-69	\$ 1,879	0.0%	\$ 1,879
	70-74	\$ 1,879	0.0%	\$ 1,879
	75-79	\$ 1,879	0.0%	\$ 1,879
	80+	\$ 1,879	0.0%	\$ 1,879
Female	00-69	\$ 1,879	0.0%	\$ 1,879
	70-74	\$ 1,879	0.0%	\$ 1,879
	75-79	\$ 1,879	0.0%	\$ 1,879
	80+	\$ 1,879	0.0%	\$ 1,879

AMERICAN GENERAL LIFE AND ACCIDENT INSURANCE COMPANY

Actuarial Justification for Medicare Supplement Rate Increase Individual Pre-Standardized Medicare Supplement Plans

ARKANSAS RATES

Policy Form AGLA 79090

	<u>Issue Age</u>	<u>Current Annual Premium</u>	<u>Proposed Rate Increase</u>	<u>Proposed Annual Premium</u>
Male	00-69	\$ 4,714	0.0%	\$ 4,714
	70-74	\$ 4,714	0.0%	\$ 4,714
	75-79	\$ 4,714	0.0%	\$ 4,714
Female	00-69	\$ 4,714	0.0%	\$ 4,714
	70-74	\$ 4,714	0.0%	\$ 4,714
	75-79	\$ 4,714	0.0%	\$ 4,714

To calculate modes other than annual, multiply the total annual premium less the \$15 policy premium by the appropriate factor from the following table and add the corresponding policy premium.

<u>Mode</u>	<u>Factor</u>	<u>Policy Premium</u>
Semi-Annual	0.515	\$ 8.00
Quarterly	0.262	\$ 4.50
Monthly	0.093	\$ 2.50
Monthly Pre-Authorized Check	0.093	\$ 1.75

AMERICAN GENERAL LIFE AND ACCIDENT INSURANCE COMPANY

Actuarial Justification for Medicare Supplement Rate Increase Individual Pre-Standardized Medicare Supplement Plans

ARKANSAS RATES

(Form 75087) used with Form AGLA 79090, 50% Rider

	<u>Issue Age</u>	<u>Current Annual Premium</u>	<u>Proposed Increase</u>	<u>Proposed Annual Premium</u>
Male	00-69	\$ 1,047	0.0%	\$ 1,047
	70-74	\$ 1,047	0.0%	\$ 1,047
	75-79	\$ 1,047	0.0%	\$ 1,047
	80+	\$ 1,047	0.0%	\$ 1,047
Female	00-69	\$ 1,047	0.0%	\$ 1,047
	70-74	\$ 1,047	0.0%	\$ 1,047
	75-79	\$ 1,047	0.0%	\$ 1,047
	80+	\$ 1,047	0.0%	\$ 1,047

AMERICAN GENERAL LIFE AND ACCIDENT INSURANCE COMPANY

Actuarial Justification for Medicare Supplement Rate Increase Individual Pre-Standardized Medicare Supplement Plans

ARKANSAS RATES

(Form 75587) used with Form AGLA 79090, 90% Rider

	<u>Issue Age</u>	<u>Current Annual Premium</u>	<u>Proposed Increase</u>	<u>Proposed Annual Premium</u>
Male	00-69	\$ 1,879	0.0%	\$ 1,879
	70-74	\$ 1,879	0.0%	\$ 1,879
	75-79	\$ 1,879	0.0%	\$ 1,879
	80+	\$ 1,879	0.0%	\$ 1,879
Female	00-69	\$ 1,879	0.0%	\$ 1,879
	70-74	\$ 1,879	0.0%	\$ 1,879
	75-79	\$ 1,879	0.0%	\$ 1,879
	80+	\$ 1,879	0.0%	\$ 1,879

AMERICAN GENERAL LIFE AND ACCIDENT INSURANCE COMPANY

Actuarial Justification for Medicare Supplement Rate Increase Individual Pre-Standardized Medicare Supplement Plans

ARKANSAS RATES

Policy Form AGLA 79190

	<u>Issue Age</u>	<u>Current Annual Premium</u>	<u>Proposed Rate Increase</u>	<u>Proposed Annual Premium</u>
Male	00-69	\$ 4,303	0.0%	\$ 4,303
	70-74	\$ 4,303	0.0%	\$ 4,303
	75-79	\$ 4,303	0.0%	\$ 4,303
Female	00-69	\$ 4,303	0.0%	\$ 4,303
	70-74	\$ 4,303	0.0%	\$ 4,303
	75-79	\$ 4,303	0.0%	\$ 4,303

To calculate modes other than annual, multiply the total annual premium less the \$15 policy premium by the appropriate factor from the following table and add the corresponding policy premium.

<u>Mode</u>	<u>Factor</u>	<u>Policy Premium</u>
Semi-Annual	0.515	\$ 8.00
Quarterly	0.262	\$ 4.50
Monthly	0.093	\$ 2.50
Monthly Pre-Authorized Check	0.093	\$ 1.75

AMERICAN GENERAL LIFE AND ACCIDENT INSURANCE COMPANY

Actuarial Justification for Medicare Supplement Rate Increase Individual Pre-Standardized Medicare Supplement Plans

ARKANSAS RATES

(Form 75187) used with Form AGLA 79190, 50% Rider

	<u>Issue Age</u>	<u>Current Annual Premium</u>	<u>Proposed Increase</u>	<u>Proposed Annual Premium</u>
Male	00-69	\$ 1,047	0.0%	\$ 1,047
	70-74	\$ 1,047	0.0%	\$ 1,047
	75-79	\$ 1,047	0.0%	\$ 1,047
	80+	\$ 1,047	0.0%	\$ 1,047
Female	00-69	\$ 1,047	0.0%	\$ 1,047
	70-74	\$ 1,047	0.0%	\$ 1,047
	75-79	\$ 1,047	0.0%	\$ 1,047
	80+	\$ 1,047	0.0%	\$ 1,047

AMERICAN GENERAL LIFE AND ACCIDENT INSURANCE COMPANY

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(Form 75687) used with Form AGLA 79190, 90% Rider

	<u>Issue Age</u>	<u>Current Annual Premium</u>	<u>Proposed Increase</u>	<u>Proposed Annual Premium</u>
Male	00-69	\$ 1,879	0.0%	\$ 1,879
	70-74	\$ 1,879	0.0%	\$ 1,879
	75-79	\$ 1,879	0.0%	\$ 1,879
	80+	\$ 1,879	0.0%	\$ 1,879
Female	00-69	\$ 1,879	0.0%	\$ 1,879
	70-74	\$ 1,879	0.0%	\$ 1,879
	75-79	\$ 1,879	0.0%	\$ 1,879
	80+	\$ 1,879	0.0%	\$ 1,879

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Supporting Document Schedules

	Item Status:	Status Date:
Satisfied - Item: Third Party Authorization Letter	Accepted for Informational Purposes	01/27/2010
Comments:		
Attachment: 2009 11 AGLA IAS Authorization Letter.pdf		

November 23, 2009

Ms. Darcey Shaffer, FLMI, ACS
Compliance Manager
Insurance Administrative Solutions, L.L.C.
8545 126th Avenue North, Suite 200
Largo, Florida 33773-1502

Re: Filing/Reporting Requirements

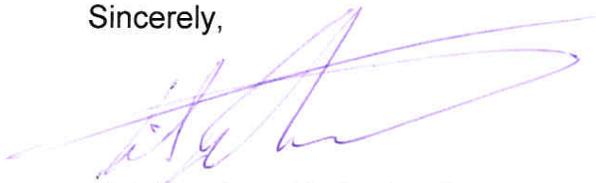
Dear Ms. Shaffer:

This letter authorizes Insurance Administrative Solutions, L.L.C. to file, on behalf of American General Life and Accident Insurance Company, Medicare Supplement rate filings and reports with the State Departments of Insurance.

Insurance Administrative Solutions, L.L.C. may correspond with the State Departments of Insurance regarding any questions they may have concerning the filings.

A copy of this letter is as valid as the original. This authorization will be valid for twelve months from the date of this letter.

Sincerely,



Rick Borchert, FSA, MAAA
Senior Vice President & Chief Actuary