

SERFF Tracking Number: CMBD-126457819 State: Arkansas
 Filing Company: Combined Insurance Company of America State Tracking Number: 44899
 Company Tracking Number: REPORTING OF DUPLICATE MEDICARE SUPPLEMENT POLICIES
 TOI: MS06 Medicare Supplement - Other Sub-TOI: MS06.000 Medicare Supplement - Other
 Product Name: SENIOR REPORTING OF DUPLICATE MEDICARE SUPPLEMENT POLICIES
 Project Name/Number: REPORTING OF DUPLICATE MEDICARE SUPPLEMENT POLICIES/REPORTING OF DUPLICATE MEDICARE SUPPLEMENT POLICIES

Filing at a Glance

Company: Combined Insurance Company of America

Product Name: SENIOR REPORTING OF DUPLICATE MEDICARE SUPPLEMENT POLICIES
 SERFF Tr Num: CMBD-126457819 State: Arkansas

TOI: MS06 Medicare Supplement - Other SERFF Status: Closed-Accepted State Tr Num: 44899
 For Informational Purposes

Sub-TOI: MS06.000 Medicare Supplement - Other Co Tr Num: REPORTING OF DUPLICATE MEDICARE SUPPLEMENT POLICIES
 State Status: Filed-Closed

Filing Type: Form

Author: Sue Thill

Date Submitted: 02/17/2010

Reviewer(s): Stephanie Fowler

Disposition Date: 02/18/2010

Disposition Status: Accepted For Informational Purposes

Implementation Date:

Implementation Date Requested:

State Filing Description:

General Information

Project Name: REPORTING OF DUPLICATE MEDICARE SUPPLEMENT POLICIES

Status of Filing in Domicile:

Project Number: REPORTING OF DUPLICATE MEDICARE SUPPLEMENT POLICIES

Date Approved in Domicile:

Requested Filing Mode: Informational

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: 02/18/2010

Explanation for Other Group Market Type:

State Status Changed: 02/18/2010

Deemer Date:

Created By: Sue Thill

Submitted By: Sue Thill

Corresponding Filing Tracking Number:

Filing Description:

REPORTING OF DUPLICATE MEDICARE SUPPLEMENT POLICIES

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Company and Contact

Filing Contact Information

Sue Thill, Senior Policy Analyst Sue.A.Thill@combined.com
 1000 Milwaukee Avenue 847-953-1536 [Phone]
 Glenview, IL 60025 847-953-1557 [FAX]

Filing Company Information

Combined Insurance Company of America CoCode: 62146 State of Domicile: Illinois
 1000 Milwaukee Avenue Group Code: 626 Company Type:
 Glenview, IL 60025 Group Name: State ID Number:
 (847) 953-1531 ext. [Phone] FEIN Number: 36-2136262

Filing Fees

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

COMPANY	AMOUNT	DATE PROCESSED	TRANSACTION #
Combined Insurance Company of America	\$0.00	02/17/2010	

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Correspondence Summary

Dispositions

Status	Created By	Created On	Date Submitted
Accepted For Informational Purposes	Stephanie Fowler	02/18/2010	02/18/2010

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SUPPLEMENT POLICIES

Disposition

Disposition Date: 02/18/2010

Implementation Date:

Status: Accepted For Informational Purposes

Comment:

Rate data does NOT apply to filing.

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Schedule	Schedule Item	Schedule Item Status	Public Access
Supporting Document	Flesch Certification		Yes
Supporting Document	Application		Yes
Supporting Document	Health - Actuarial Justification		Yes
Supporting Document	Outline of Coverage		Yes
Supporting Document	COVER LETTER	Accepted for Informational Purposes	Yes
Supporting Document	REPORTING OF DUPLICATE MEDICARE SUPPLEMENT POLICIES	Accepted for Informational Purposes	Yes

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Supporting Document Schedules

		Item Status:	Status Date:
Bypassed - Item:	Flesch Certification		
Bypass Reason:	N/A		
Comments:			
		Item Status:	Status Date:
Bypassed - Item:	Application		
Bypass Reason:	N/A		
Comments:			
		Item Status:	Status Date:
Bypassed - Item:	Health - Actuarial Justification		
Bypass Reason:	N/A		
Comments:			
		Item Status:	Status Date:
Bypassed - Item:	Outline of Coverage		
Bypass Reason:	N/A		
Comments:			
		Item Status:	Status Date:
Satisfied - Item:	COVER LETTER	Accepted for Informational Purposes	02/18/2010
Comments:			
Attachment:	AR.pdf		

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	Item Status:	Status Date:
Satisfied - Item: REPORTING OF DUPLICATE MEDICARE SUPPLEMENT POLICIES	Accepted for Informational Purposes	02/18/2010

Comments:

Attachment:

FORM FOR REPORTING.pdf



February 17, 2010

Honorable Jay Bradford
Commissioner of Insurance
Arkansas Insurance Department
1200 West 3rd Street
Little Rock, Arkansas 72201-1904

SERFF Tracking Number: CMBD-126457819
Re: **Combined Insurance Company of America**
FEIN Number 36-2136262
NAIC Number 626-62146
Reporting of Duplicate Medicare Supplement Policies
IDIVIDUAL MEDICARE – AGENT MARKETED

Dear Commissioner Bradford:

Enclosed is the reporting form for the Medicare Supplement Policies for Combined Insurance Company of America.

Sincerely,

Sue Thill, DHP, DIA, HIA
Senior Policy Analyst

Sue Thill, DHP, DIA, HIA – Senior Policy Analyst - Product Filings/Government Relations/Law
Toll Free: 888-449-3623 Telephone: (847) 953-1536 Fax: (847) 953-1557 E-mail: Sue.A.Thill@combined.com

1000 N. Milwaukee Avenue • Glenview, Illinois 60025 • www.combinedinsurance.com
The ACE Group of Companies

FORM FOR REPORTING
MEDICARE SUPPLEMENT POLICIES

COMPANY NAME: Combined Insurance Company of America

ADDRESS: 5050 Broadway
Chicago, Illinois 60640

PHONE NUMBER: (800) 544-5531

DUE: March 1, Annually

The purpose of this form is to report the following information on each resident of this state who has in force more than one Medicare Supplement policy or certificate. The information is to be grouped by individual policyholder.

Policy and Certificate #	Date of Issuance
NONE	NONE

Michael J. Hollar

Signature

Michael J. Hollar – Assistant Secretary and
Director of Product Development/Filings
Name & Title (please type)

February 17, 2010

Date