

SERFF Tracking Number: CNAB-126446418 State: Arkansas
Filing Company: Continental Casualty Company State Tracking Number: 44514
Company Tracking Number: 2009-010
TOI: LTC03G Group Long Term Care Sub-TOI: LTC03G.001 Qualified
Product Name: Group Long Term Care
Project Name/Number: Restoration of Benefits/2009-010

Filing at a Glance

Company: Continental Casualty Company

Product Name: Group Long Term Care

TOI: LTC03G Group Long Term Care

Sub-TOI: LTC03G.001 Qualified

Filing Type: Form

SERFF Tr Num: CNAB-126446418 State: Arkansas

SERFF Status: Closed-Approved State Tr Num: 44514

Co Tr Num: 2009-010

State Status: Approved-Closed

Reviewer(s): Harris Shearer

Author: Todd Niemeier

Disposition Date: 02/02/2010

Date Submitted: 01/07/2010

Disposition Status: Approved

Implementation Date Requested: On Approval

Implementation Date:

State Filing Description:

General Information

Project Name: Restoration of Benefits

Project Number: 2009-010

Requested Filing Mode:

Explanation for Combination/Other:

Submission Type: New Submission

Overall Rate Impact:

Filing Status Changed: 02/02/2010

Status of Filing in Domicile: Not Filed

Date Approved in Domicile:

Domicile Status Comments:

Market Type: Group

Group Market Size: Large

Group Market Type: Employer

Explanation for Other Group Market Type:

State Status Changed: 02/02/2010

Created By: Todd Niemeier

Corresponding Filing Tracking Number:

Deemer Date:

Submitted By: Todd Niemeier

Filing Description:

Restoration of Lifetime Maximum subject to conditions.

Previously Approved and approval date

SR-LTCP-03 et.al. 2-5-1992

SPS1AA-TQ et.al. 6-25-1997

SCS1CA-TQ et. al. 1-1-1999

Enclosed for filing are the forms described in "Form Schedule."

These forms are being filed on a Single Case Basis for one of our Group Long Term Care clients, Wells Fargo Corporation which has residents in Arkansas.

SERFF Tracking Number: CNAB-126446418 State: Arkansas
 Filing Company: Continental Casualty Company State Tracking Number: 44514
 Company Tracking Number: 2009-010
 TOI: LTC03G Group Long Term Care Sub-TOI: LTC03G.001 Qualified
 Product Name: Group Long Term Care
 Project Name/Number: Restoration of Benefits/2009-010

Correspondence Summary

Dispositions

Status	Created By	Created On	Date Submitted
Approved	Harris Shearer	02/02/2010	02/02/2010

Objection Letters and Response Letters

Objection Letters				Response Letters		
Status	Created By	Created On	Date Submitted	Responded By	Created On	Date Submitted
Pending	Harris Shearer	01/25/2010	01/25/2010	Todd Niemeier	01/28/2010	01/28/2010

Industry Response

Filing Notes

Subject	Note Type	Created By	Created On	Date Submitted
Filing Fee	Note To Reviewer	Todd Niemeier	01/07/2010	01/07/2010

SERFF Tracking Number: CNAB-126446418 *State:* Arkansas
Filing Company: Continental Casualty Company *State Tracking Number:* 44514
Company Tracking Number: 2009-010
TOI: LTC03G Group Long Term Care *Sub-TOI:* LTC03G.001 Qualified
Product Name: Group Long Term Care
Project Name/Number: Restoration of Benefits/2009-010

Disposition

Disposition Date: 02/02/2010

Implementation Date:

Status: Approved

Comment:

Rate data does NOT apply to filing.

SERFF Tracking Number: CNAB-126446418 State: Arkansas
 Filing Company: Continental Casualty Company State Tracking Number: 44514
 Company Tracking Number: 2009-010
 TOI: LTC03G Group Long Term Care Sub-TOI: LTC03G.001 Qualified
 Product Name: Group Long Term Care
 Project Name/Number: Restoration of Benefits/2009-010

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
Form	Restoration of the Lifetime Maximum Benefit		Yes
Form (<i>revised</i>)	Restoration of The Lifetime Maximum Benefit		Yes
Form	Restoration of The Lifetime Maximum Benefit	Withdrawn	Yes

SERFF Tracking Number: CNAB-126446418 State: Arkansas
Filing Company: Continental Casualty Company State Tracking Number: 44514
Company Tracking Number: 2009-010
TOI: LTC03G Group Long Term Care Sub-TOI: LTC03G.001 Qualified
Product Name: Group Long Term Care
Project Name/Number: Restoration of Benefits/2009-010

Objection Letter

Objection Letter Status Pending Industry Response
Objection Letter Date 01/25/2010
Submitted Date 01/25/2010
Respond By Date 02/25/2010

Dear Todd Niemeier,

This will acknowledge receipt of the captioned filing.

Objection 1

- Restoration of The Lifetime Maximum Benefit, SKE24AA (WFC) (Form)

Comment: The phrase "or any medical care or treatment" seems to be in conflict with the Restoration Rider attached. Please explain.

Please feel free to contact me if you have questions.

Sincerely,

Harris Shearer

Response Letter

Response Letter Status Submitted to State
Response Letter Date 01/28/2010
Submitted Date 01/28/2010

Dear Harris Shearer,

Comments:

Response 1

Comments: Thank you for your response of 1/25/2010 in which you question the above named phrase in form SKE24AA (WFC). We agree, and we have removed said phrase from the form. It now agrees with the restoration rider.

We have revised the form accordingly and re-named it to form SKE24AA (WFC)-AR. We are withdrawing previous form SKE24AA (WFC).

Please review the revised form below.

thank you for your time and we look forward to Arkansas' approval.

SERFF Tracking Number: CNAB-126446418 State: Arkansas
 Filing Company: Continental Casualty Company State Tracking Number: 44514
 Company Tracking Number: 2009-010
 TOI: LTC03G Group Long Term Care Sub-TOI: LTC03G.001 Qualified
 Product Name: Group Long Term Care
 Project Name/Number: Restoration of Benefits/2009-010

Todd Niemeier

Related Objection 1

Applies To:

- Restoration of The Lifetime Maximum Benefit, SKE24AA (WFC) (Form)

Comment:

The phrase "or any medical care or treatment" seems to be in conflict with the Restoration Rider attached. Please explain.

Changed Items:

No Supporting Documents changed.

Form Schedule Item Changes

Form Name	Form Number	Edition Date	Form Type	Action	Action Specific Data	Readability Score	Attach Document
Restoration of The Lifetime Maximum Benefit	SKE24AA (WFC)-AR		Outline of Coverage	Initial		40.100	outline form2.pdf
Previous Version							
Restoration of The Lifetime Maximum Benefit	SKE24AA (WFC)		Outline of Coverage	Initial		40.100	outline form.pdf

No Rate/Rule Schedule items changed.

Sincerely,
 Todd Niemeier

SERFF Tracking Number: CNAB-126446418 *State:* Arkansas
Filing Company: Continental Casualty Company *State Tracking Number:* 44514
Company Tracking Number: 2009-010
TOI: LTC03G Group Long Term Care *Sub-TOI:* LTC03G.001 Qualified
Product Name: Group Long Term Care
Project Name/Number: Restoration of Benefits/2009-010

Note To Reviewer

Created By:

Todd Niemeier on 01/07/2010 02:45 PM

Last Edited By:

Harris Shearer

Submitted On:

02/02/2010 01:34 PM

Subject:

Filing Fee

Comments:

A check for \$50.00 will be drafted no later than Jan 11, 2010 and sent directly to the Department.

Another "Note to Reviewer" will be sent when we know the check number and exact draft date.

SERFF Tracking Number: CNAB-126446418 State: Arkansas
 Filing Company: Continental Casualty Company State Tracking Number: 44514
 Company Tracking Number: 2009-010
 TOI: LTC03G Group Long Term Care Sub-TOI: LTC03G.001 Qualified
 Product Name: Group Long Term Care
 Project Name/Number: Restoration of Benefits/2009-010

Form Schedule

Lead Form Number: SGNH13AA (WFC)

Schedule Item Status	Form Number	Form Type	Form Name	Action	Action Specific Data	Readability	Attachment
	SGNH13A A (WFC)	Policy/Cont ract/Fraternal Certificate	Restoration of the Lifetime Maximum Benefit	Initial		40.300	restoration of the Lifetime Maximum Benefit.pdf
	SKE24AA (WFC)-AR	Outline of Coverage	Restoration of The Lifetime Maximum Benefit	Initial		40.100	outline form2.pdf

RESTORATION OF THE LIFETIME MAXIMUM BENEFIT

Upon receipt of the Insured's written request to restore benefits, We will restore the Insured's Lifetime Maximum Benefit subject to the conditions below.

1. The Lifetime Maximum Benefit must not yet have been met;
2. The Insured has not received medical care or treatment for [one] [two] [three] [four] [five] consecutive years for a condition or combination of conditions resulting in the need for Long Term Care services during the [one] [two] [three] [four] [five] year period; and
3. The Insured is not currently receiving any benefits under the Policy nor is receiving Long Term Care services.

The Lifetime Maximum Benefit will be restored to an amount equal to 100% of the Lifetime Maximum Benefit prior to the receipt of benefits, plus 100% of any increases that have been purchased since that time.

SGNH13AA (WFC)

RESTORATION OF THE LIFETIME MAXIMUM BENEFIT. If you have not received any benefits or Long Term Care services for at least [1] [2] [3] [4] [5] continuous years, then, upon request, we will restore your Lifetime Maximum Benefit to the amount it was before benefits were paid. This amount will include any increases you received prior to the request to restore the Lifetime Maximum Benefit.

SKE24AA (WFC)-AR

READABILITY CERTIFICATION

This is to certify that the following forms submitted have the indicate Flesch
Score Certification(s):

<u>Form</u>	<u>Score</u>
SGNH13AA (WFC)	40.3
SKE24AA (WFC)	40.1

Signed by: *Dale Branda*
Dale Branda
Assistant Vice President

Date: 1/7/2010

<i>SERFF Tracking Number:</i>	<i>CNAB-126446418</i>	<i>State:</i>	<i>Arkansas</i>
<i>Filing Company:</i>	<i>Continental Casualty Company</i>	<i>State Tracking Number:</i>	<i>44514</i>
<i>Company Tracking Number:</i>	<i>2009-010</i>		
<i>TOI:</i>	<i>LTC03G Group Long Term Care</i>	<i>Sub-TOI:</i>	<i>LTC03G.001 Qualified</i>
<i>Product Name:</i>	<i>Group Long Term Care</i>		
<i>Project Name/Number:</i>	<i>Restoration of Benefits/2009-010</i>		

Superseded Schedule Items

Please note that all items on the following pages are items, which have been replaced by a newer version. The newest version is located with the appropriate schedule on previous pages. These items are in date order with most recent first.

Creation Date:	Schedule	Schedule Item Name	Replacement Creation Date	Attached Document(s)
01/07/2010	Form	Restoration of The Lifetime Maximum Benefit	01/28/2010	outline form.pdf (Superceded)

RESTORATION OF THE LIFETIME MAXIMUM BENEFIT. If you have not received any benefits, Long Term Care services or any medical care or treatment for at least [1] [2] [3] [4] [5] continuous years, then, upon request, we will restore your Lifetime Maximum Benefit to the amount it was before benefits were paid. This amount will include any increases you received prior to the request to restore the Lifetime Maximum Benefit.

SKE24AA (WFC)