

SERFF Tracking Number: MUTM-126504290 State: Arkansas
Filing Company: New York Life Insurance Company State Tracking Number: 44922
Company Tracking Number: MARYJO GOODWIN
TOI: MS06 Medicare Supplement - Other Sub-TOI: MS06.000 Medicare Supplement - Other
Product Name: 2010 Duplicate Medicare Supplement Policy Annual Report
Project Name/Number: 2010 Duplicate Medicare Supplement Policy Annual Report/ Annual Report

Filing at a Glance

Company: New York Life Insurance Company
Product Name: 2010 Duplicate Medicare Supplement Policy Annual Report SERFF Tr Num: MUTM-126504290 State: Arkansas
TOI: MS06 Medicare Supplement - Other SERFF Status: Closed-Accepted State Tr Num: 44922
For Informational Purposes
Sub-TOI: MS06.000 Medicare Supplement - Other Co Tr Num: MARYJO GOODWIN State Status: Filed-Closed
Other
Filing Type: Form Reviewer(s): Stephanie Fowler
Disposition Date: 02/23/2010
Authors: Mary Cleasby, Helen Curry
Date Submitted: 02/19/2010 Disposition Status: Accepted For Informational Purposes
Implementation Date Requested: Implementation Date:
State Filing Description:

General Information

Project Name: 2010 Duplicate Medicare Supplement Policy Annual Report Status of Filing in Domicile:
Report
Project Number: Annual Report 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: 02/23/2010 Explanation for Other Group Market Type:
State Status Changed: 02/23/2010
Deemer Date: Created By: Mary Cleasby
Submitted By: Mary Cleasby Corresponding Filing Tracking Number:
Filing Description:
New York Life Insurance Company- 826-66915

RE: Reporting Multiple Medicare Supplemental Policies

This form is to report information on each resident of this state who has in force more than one Medicare Supplement

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 policy or certificate.

Sheri Tom
 Manager
 Underwriting

Company and Contact

Filing Contact Information

Mary Cleasby, Policy Drafting and Regulatory mary.cleasby@mutualofomaha.com
 Assistant
 Regulatory Affairs 402-351-8375 [Phone]
 Mutual of Omaha Plaza 402-351-5298 [FAX]
 Omaha, NE 68175

Filing Company Information

New York Life Insurance Company	CoCode: 66915	State of Domicile: New York
3316 Farnam Street	Group Code: 826	Company Type: Life and Health
Omaha, NE 68175	Group Name:	State ID Number:
(800) 995-5991 ext. [Phone]	FEIN Number: 13-5582869	

Filing Fees

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

COMPANY	AMOUNT	DATE PROCESSED	TRANSACTION #
New York Life Insurance Company	\$0.00	02/19/2010	

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Correspondence Summary

Dispositions

Status	Created By	Created On	Date Submitted
Accepted For Informational Purposes	Stephanie Fowler	02/23/2010	02/23/2010

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Disposition

Disposition Date: 02/23/2010

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	Duplicate Medicare Supplement Policy Annual Report	Accepted for Informational Purposes	Yes

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Supporting Document Schedules

	Item Status:	Status Date:
Bypassed - Item: Flesch Certification Bypass Reason: Not applicable as this is a Medicare Supplement Annual Report filing. Comments:		
Bypassed - Item: Application Bypass Reason: Not applicable as this is a Medicare Supplement Annual Report filing. Comments:		
Bypassed - Item: Health - Actuarial Justification Bypass Reason: Not applicable as this is a Medicare Supplement Annual Report filing. Comments:		
Bypassed - Item: Outline of Coverage Bypass Reason: Not applicable as this is a Medicare Supplement Annual Report filing. Comments:		
Satisfied - Item: Duplicate Medicare Supplement Policy Annual Report Attachment: NYL AR SERFF Lts. 10.pdf Comments:	Accepted for Informational Purposes	02/23/2010

NEW YORK LIFE INSURANCE COMPANY
3316 FARNAM STREET
OMAHA NE 68175-3150



REPORTING MULTIPLE MEDICARE SUPPLEMENTAL POLICIES

February 19, 2010

Arkansas Department of Insurance
1200 W. Third Street
Little Rock, Arkansas 72201-1904

New York Life Insurance Company
3316 Farnam Street
Omaha, NE 68175-3150
402-342-7600

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 by individual policyholder.

Name/Policy #

Date of Issue

None

A handwritten signature in black ink that reads "Sheri Toms".

Sheri Toms
Manager
Underwriting

mjg

ACQUIRED COMPANIES MEDICARE SUPPLEMENTS:

Aetna Life and Casualty
Travelers Insurance Company