

SERFF Tracking Number: AMLC-126525140 State: Arkansas  
Filing Company: United American Insurance Company State Tracking Number: 45083  
Company Tracking Number: 2010 AR UA K & L  
TOI: MS08I Individual Medicare Supplement - Sub-TOI: MS08I.008 Plan K 2010  
Standard Plans 2010  
Product Name: 2010 United American Individual Medicare Supplement  
Project Name/Number: 2010 UA Factor Changes/2010 AR UA K & L

## Filing at a Glance

Company: United American Insurance Company

Product Name: 2010 United American Individual Medicare Supplement SERFF Tr Num: AMLC-126525140 State: Arkansas

TOI: MS08I Individual Medicare Supplement - Standard Plans 2010 SERFF Status: Closed-Approved-Closed State Tr Num: 45083

Sub-TOI: MS08I.008 Plan K 2010 Co Tr Num: 2010 AR UA K & L State Status: Approved-Closed  
Filing Type: Rate Reviewer(s): Stephanie Fowler

Author: Darla Grisolia

Date Submitted: 03/02/2010

Disposition Date: 03/23/2010

Disposition Status: Approved-Closed

Implementation Date Requested: 06/01/2010

Implementation Date: 06/01/2010

State Filing Description:

## General Information

Project Name: 2010 UA Factor Changes  
Project Number: 2010 AR UA K & L  
Requested Filing Mode: Review & Approval

Status of Filing in Domicile: Pending

Date Approved in Domicile:

Domicile Status Comments: The rate filing in our state of domicile, Nebraska, was submitted on February 25, 2010 and is currently pending.

Explanation for Combination/Other:

Submission Type: New Submission

Overall Rate Impact:

Filing Status Changed: 03/23/2010

Market Type: Individual

Group Market Size:

Group Market Type:

Explanation for Other Group Market Type:

State Status Changed: 03/23/2010

Deemer Date:

Submitted By: Darla Grisolia

Created By: Darla Grisolia

Corresponding Filing Tracking Number: 2010 AR UA K & L

Filing Description:

Request to Change Premium Adjustment Factors for New and Renewal Business

Standardized Individual Medicare Supplement Policy Forms MSK06 AND MSL06.

United American Insurance Company, NAIC # 92916, requests approval to begin using revised premium adjustment

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factors for new and renewal business for the above plans effective June 1, 2010, or as soon thereafter as possible. This will allow the Premium Adjustment Factors for Plans K and L to be consistent with all of our other 2010 Medicare Supplement products.

In order to comply with the new 2010 Medicare Supplement Policy requirements we submitted new form filings with the revised Premium Adjustment Factors on our Medicare Supplement products. Policy forms MSK06 and MSL06 already comply with the requirements applicable to the 2010 Medicare Supplement products so a new form filing is not needed.

The above referenced policy forms were approved in your state on January 31, 2006. We are not requesting a change to the annual base rate with this filing. Policies currently in force on these plans that do not pay annually will see a reduction in their Semi-Annual, Quarterly and Monthly payments. Annual paying policyholders will see no change.

An Actuarial Memorandum and rate pages reflecting the current and proposed premium adjustment factors are attached.

## Company and Contact

### Filing Contact Information

Darla Grisolia, Rate Compliance Specialist dgrisolia@torchmarkcorp.com  
 3700 S. Stonebridge Drive 469-525-4752 [Phone]  
 McKinney, TX 75070 972-569-3679 [FAX]

### Filing Company Information

United American Insurance Company	CoCode: 92916	State of Domicile: Nebraska
P.O. Box 8080	Group Code: 290	Company Type: Life and Health
McKinney, TX 75070-8080	Group Name: Liberty National	State ID Number:
(972) 529-5085 ext. [Phone]	FEIN Number: 73-1128555	

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## Filing Fees

Fee Required? Yes  
 Fee Amount: \$100.00  
 Retaliatory? No  
 Fee Explanation: 2 forms at \$50.00 each  
 Per Company: No

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COMPANY	AMOUNT	DATE PROCESSED	TRANSACTION #
United American Insurance Company	\$100.00	03/02/2010	34550392

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## Correspondence Summary

### Dispositions

Status	Created By	Created On	Date Submitted
Approved-Closed	Stephanie Fowler	03/23/2010	03/23/2010

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## Disposition

Disposition Date: 03/23/2010

Implementation Date: 06/01/2010

Status: Approved-Closed

Comment: This approval is subject to the following:

- Increases will not be given more frequently than once in a twelve-month period;
- Both the insured and agent shall be notified by the insurer of its intention to increase the rate for renewal not less than thirty (30) days prior to the effective date of the renewal.

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):
United American Insurance Company	%	%	\$		\$	%	%

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Schedule	Schedule Item	Schedule Item Status	Public Access
Supporting Document	Health - Actuarial Justification	Approved	No
Supporting Document	2010 AR UA K & L Factor Change Letter	Approved	Yes
Rate	2010 MSK06 Rate Page	Approved	Yes
Rate	2010 MSL06 Rate Page	Approved	Yes

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**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:** 02/01/2010  
**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):
United American Insurance Company	%	%				%	%

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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 03/23/2010	2010 MSK06 Rate Page	MSK06	Other	Previous State Filing Number: Rate Action Other Explanation:	43869 No Change to Annual Base Rate 2010 MSK06 Rate Pages (AR).pdf
Approved 03/23/2010	2010 MSL06 Rate Page	MSL06	Other	Previous State Filing Number: Rate Action Other Explanation:	43869 No Change to Annual Base Rate 2010 MSL06 Rate Pages (AR).pdf

# UNITED AMERICAN INSURANCE COMPANY

McKinney, Texas

Policy Form MSK06

2010 Request to Change Modal Premium Formulas  
For New Business and Renewal Business

## ARKANSAS

Current and Proposed Annual Premium Rates  
For Policies Issued with Issue Age Rates

Issue Age (Male or Female)	Current Annual Rate	Issue Age (Male or Female)	Proposed Annual Rate
Ages 65 & Over	\$1,660	Ages 65 & Over	\$1,660
<b>Current Modal Premium Formulas:</b>		<b>Proposed Modal Premium Formulas:</b>	
Semi-Annual = Annual * .510 (rounded to near dollar)		Semi-Annual = Annual / 2 (rounded to near dollar)	
Quarterly = Annual * .260 (rounded to near dollar)		Quarterly = Annual / 4 (rounded to near dollar)	
Monthly = Annual * .088 (rounded to near dollar)		Monthly = Annual / 12 (rounded to near dollar)	

For Company Use: Plan Code P87

# UNITED AMERICAN INSURANCE COMPANY

McKinney, Texas

Policy Form MSL06

2010 Request to Change Modal Premium Formulas  
For New Business and Renewal Business

## ARKANSAS

Current and Proposed Annual Premium Rates  
For Policies Issued with Issue Age Rates

Issue Age (Male or Female)	Current Annual Rate	Issue Age (Male or Female)	Proposed Annual Rate
Ages 65 & Over	\$2,341	Ages 65 & Over	\$2,341
<b>Current Modal Premium Formulas:</b>		<b>Proposed Modal Premium Formulas:</b>	
Semi-Annual = Annual * .510 (rounded to near dollar)		Semi-Annual = Annual / 2 (rounded to near dollar)	
Quarterly = Annual * .260 (rounded to near dollar)		Quarterly = Annual / 4 (rounded to near dollar)	
Monthly = Annual * .088 (rounded to near dollar)		Monthly = Annual / 12 (rounded to near dollar)	

For Company Use: Plan Code P90

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## Supporting Document Schedules

	Item Status:	Status
<b>Satisfied - Item:</b> 2010 AR UA K & L Factor Change Letter	Approved	<b>Date:</b> 03/23/2010
<b>Comments:</b>		
<b>Attachment:</b> 2010 AR UA K & L Factor Change letter.pdf		

*united american insurance company*

March 2, 2010

VIA SERFF

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

RE: **Request to Change Premium Adjustment Factors for New and Renewal Business**  
Standardized Individual Medicare Supplement Policy Forms **MSK06 AND MSL06**  
NAIC# 92916

ATTN: Mr. Dan Honey

United American Insurance Company requests approval to begin using revised premium adjustment factors for new and renewal business for the above plans effective June 1, 2010, or as soon thereafter as possible. This will allow the Premium Adjustment Factors for Plans K and L to be consistent with all of our other 2010 Medicare Supplement products.

In order to comply with the new 2010 Medicare Supplement Policy requirements we submitted new form filings with the revised Premium Adjustment Factors on our Medicare Supplement products. Policy forms MSK06 and MSL06 already comply with the requirements applicable to the 2010 Medicare Supplement products so a new form filing is not needed.

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An Actuarial Memorandum and rate pages reflecting the current and proposed premium adjustment factors are attached.

If you have any additional questions, I may be contacted by phone at (469) 525-4752, by e-mail at [dgrisolia@torchmarkcorp.com](mailto:dgrisolia@torchmarkcorp.com), or via SERFF.

We look forward to a favorable and timely response.

Sincerely,  


Darla Grisolia  
Rate Compliance Specialist