

SERFF Tracking Number: LTCG-126407323 State: Arkansas  
Filing Company: AIG Life Insurance Company State Tracking Number: 44253  
Company Tracking Number: AIGRI3AR  
TOI: LTC03I Individual Long Term Care Sub-TOI: LTC03I.003 Other  
Product Name: AIG Life Individual Long Term Care Insurance  
Project Name/Number: AIG Life RI3 Filing/AIGRI3AR

## Filing at a Glance

Company: AIG Life Insurance Company

Product Name: AIG Life Individual Long Term Care Insurance SERFF Tr Num: LTCG-126407323 State: Arkansas

TOI: LTC03I Individual Long Term Care SERFF Status: Closed-Approved State Tr Num: 44253

Sub-TOI: LTC03I.003 Other Co Tr Num: AIGRI3AR State Status: Closed

Filing Type: Rate Reviewer(s): Harris Shearer

Author: Timothy Cassidy Disposition Date: 03/03/2010

Date Submitted: 12/03/2009 Disposition Status: Approved

Implementation Date Requested: On Approval Implementation Date:

State Filing Description:

## General Information

Project Name: AIG Life RI3 Filing

Project Number: AIGRI3AR

Requested Filing Mode: Review & Approval

Status of Filing in Domicile: Not Filed

Date Approved in Domicile:

Domicile Status Comments: The third rate increase filing will be submitted shortly to Delaware, AIG Life's state of domicile.

Explanation for Combination/Other:

Submission Type: New Submission

Overall Rate Impact: 25%

Filing Status Changed: 03/03/2010

Market Type: Individual

Group Market Size:

Group Market Type:

Explanation for Other Group Market Type:

State Status Changed: 03/03/2010

Deemer Date:

Submitted By: Timothy Cassidy

Filing Description:

Please see attached cover letter.

Created By: Timothy Cassidy

Corresponding Filing Tracking Number:

## Company and Contact

### Filing Contact Information

Timothy Cassidy, Compliance Manager

5 Commonwealth Road

Suite 2B

tcassidy@ltcg.com

508-651-8800 [Phone] 24 [Ext]

508-651-8804 [FAX]

*SERFF Tracking Number:* LTCG-126407323      *State:* Arkansas  
*Filing Company:* AIG Life Insurance Company      *State Tracking Number:* 44253  
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*Product Name:* AIG Life Individual Long Term Care Insurance  
*Project Name/Number:* AIG Life RI3 Filing/AIGRI3AR  
 Natick, MA 01760

**Filing Company Information**

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

AIG Life Insurance Company	CoCode: 66842	State of Domicile: Delaware
c/o LTCG	Group Code:	Company Type: Life and Health
5 Commonwealth Road	Group Name:	State ID Number:
Suite 2B	FEIN Number: 25-1118523	
Natick, MA 01760		
(508) 651-8800 ext. 24[Phone]		

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**Filing Fees**

Fee Required?	Yes
Fee Amount:	\$50.00
Retaliatory?	No
Fee Explanation:	Per AR regulations.
Per Company:	No

COMPANY	AMOUNT	DATE PROCESSED	TRANSACTION #
AIG Life Insurance Company	\$50.00	12/03/2009	32461299

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## Correspondence Summary

### Dispositions

Status	Created By	Created On	Date Submitted
Approved	Harris Shearer	03/03/2010	03/03/2010

### Objection Letters and Response Letters

Objection Letters				Response Letters		
Status	Created By	Created On	Date Submitted	Responded By	Created On	Date Submitted
Pending Industry Response	Harris Shearer	02/24/2010	02/24/2010	Timothy Cassidy	02/25/2010	02/25/2010
Pending Industry Response	Harris Shearer	01/22/2010	01/22/2010	Timothy Cassidy	01/25/2010	01/25/2010

### Amendments

Schedule	Schedule Item Name	Created By	Created On	Date Submitted
Supporting Document	2 18 10 Response Letter	Timothy Cassidy	02/18/2010	02/18/2010

### Filing Notes

Subject	Note Type	Created By	Created On	Date Submitted
Your response of February 12, 2010	Note To Filer	Rosalind Minor (FM)	02/16/2010	02/16/2010

*SERFF Tracking Number:*      *LTCG-126407323*                      *State:*                      *Arkansas*  
*Filing Company:*              *AIG Life Insurance Company*                      *State Tracking Number:*      *44253*  
*Company Tracking Number:*      *AIGRI3AR*  
*TOI:*                      *LTC03I Individual Long Term Care*                      *Sub-TOI:*                      *LTC03I.003 Other*  
*Product Name:*              *AIG Life Individual Long Term Care Insurance*  
*Project Name/Number:*      *AIG Life RI3 Filing/AIGRI3AR*

## **Disposition**

Disposition Date: 03/03/2010

Implementation Date:

Status: Approved

Comment:

Rate data does NOT apply to filing.

SERFF Tracking Number: *LTCG-126407323* State: *Arkansas*  
 Filing Company: *AIG Life Insurance Company* State Tracking Number: *44253*  
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 TOI: *LTC03I Individual Long Term Care* Sub-TOI: *LTC03I.003 Other*  
 Product Name: *AIG Life Individual Long Term Care Insurance*  
 Project Name/Number: *AIG Life RI3 Filing/AIGRI3AR*

<b>Schedule</b>	<b>Schedule Item</b>	<b>Schedule Item Status</b>	<b>Public Access</b>
<b>Supporting Document</b>	Health - Actuarial Justification	Filed	No
<b>Supporting Document</b>	Third Party Filer Authorization	Approved	Yes
<b>Supporting Document</b>	Cover Letter	Approved	Yes
<b>Supporting Document</b>	1 25 10 Response Letter	Approved	Yes
<b>Supporting Document</b>	2 18 10 Response Letter	Approved	Yes
<b>Supporting Document</b>	2 25 10 Response Letter	Approved	Yes
<b>Rate</b>	Actuarial Memorandum	Filed	No
<b>Rate</b>	AR Rate Sheets	Approved	Yes

SERFF Tracking Number: LTCG-126407323 State: Arkansas  
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Product Name: AIG Life Individual Long Term Care Insurance  
Project Name/Number: AIG Life RI3 Filing/AIGRI3AR

## Objection Letter

Objection Letter Status Pending Industry Response  
Objection Letter Date 02/24/2010  
Submitted Date 02/24/2010  
Respond By Date 03/12/2010

Dear Timothy Cassidy,

This will acknowledge receipt of the captioned filing.

### Objection 1

- Actuarial Memorandum, [64028-AR, 64032, 64031, C12271-AR] (Rate)

Comment: Please forward revised schedules reflecting the 12.5% rate increase accepted by your company.

Please feel free to contact me if you have questions.

Sincerely,

Harris Shearer

## Response Letter

Response Letter Status Submitted to State  
Response Letter Date 02/25/2010  
Submitted Date 02/25/2010

Dear Harris Shearer,

### Comments:

Thank you for your response of yesterday, February 24, 2010.

### Response 1

Comments: We have placed revised rate schedules reflecting the 12.5 percent increase amount under the Rate/Rule Tab of SERFF.

### Related Objection 1

Applies To:

- Actuarial Memorandum, [64028-AR, 64032, 64031, C12271-AR] (Rate)

Comment:

Please forward revised schedules reflecting the 12.5% rate increase accepted by your company.

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Product Name: AIG Life Individual Long Term Care Insurance  
Project Name/Number: AIG Life RI3 Filing/AIGRI3AR

**Changed Items:**

**Supporting Document Schedule Item Changes**

Satisfied -Name: 2 25 10 Response Letter

Comment:

No Form Schedule items changed.

**Rate/Rule Schedule Item Changes**

<b>Document Name:</b>	<b>Affected Form Numbers:</b>	<b>Rate Action:</b>	<b>Rate Action Information:</b>	<b>Attach Document:</b>
AR Rate Sheets	64028-AR, 64032, 64031, C12271-AR	Revised	<i>Previous State Filing Number</i>  LTCG-125725803 <i>Percent Rate Change Request</i> 12.5	

We trust that you now have everything you need to approve the filing.

Sincerely,  
Timothy Cassidy

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Product Name: AIG Life Individual Long Term Care Insurance  
Project Name/Number: AIG Life RI3 Filing/AIGRI3AR

## Objection Letter

Objection Letter Status Pending Industry Response  
Objection Letter Date 01/22/2010  
Submitted Date 01/22/2010  
Respond By Date 02/22/2010

Dear Timothy Cassidy,

This will acknowledge receipt of the captioned filing.

Objection 1

No Objections

Comment: We will only consider a 12.5% rate increase at this time. If you wish to accept this offer, please forward your acceptance of this offer and revised rates.

Please feel free to contact me if you have questions.

Sincerely,

Harris Shearer

## Response Letter

Response Letter Status Submitted to State  
Response Letter Date 01/25/2010  
Submitted Date 01/25/2010

Dear Harris Shearer,

### Comments:

Thank you for your response of January 22, 2010.

### Response 1

Comments: Would you please provide any information available upon which the Department based its decision not to accept the company's request for a 25% rate increase?

### Related Objection 1

Comment:

We will only consider a 12.5% rate increase at this time. If you wish to accept this offer, please forward your acceptance of this offer and revised rates.

*SERFF Tracking Number:*      *LTCG-126407323*                      *State:*                      *Arkansas*  
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*TOI:*                      *LTC03I Individual Long Term Care*                      *Sub-TOI:*                      *LTC03I.003 Other*  
*Product Name:*              *AIG Life Individual Long Term Care Insurance*  
*Project Name/Number:*      *AIG Life RI3 Filing/AIGRI3AR*

**Changed Items:**

**Supporting Document Schedule Item Changes**

Satisfied -Name: 1 25 10 Response Letter

Comment:

No Form Schedule items changed.

No Rate/Rule Schedule items changed.

Thank you.

Sincerely,  
Timothy Cassidy

SERFF Tracking Number: LTCG-126407323 State: Arkansas  
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Company Tracking Number: AIGRI3AR  
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Product Name: AIG Life Individual Long Term Care Insurance  
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**Amendment Letter**

Submitted Date: 02/18/2010

**Comments:**

Dear Ms. Minor:

Thank you for your response of February 16, 2010, which reads as follows:

“In Mr. Grace's letter of December 3, 2009, he stated that the first rate increase was approved on November 6, 2006, and that the second rate increase was approved on October 1, 2008. Since these premium increases were approved only two years apart, we felt like the increases should be a lesser amount than previous increases.”

AIG Life Insurance Company would like to accept the reduced rate increase of 12.5% offered in Harris Shearer's letter of January 22, 2010.

Sincerely,

Tim Cassidy

**Changed Items:**

**Supporting Document Schedule Item Changes:**

**User Added -Name: 2 18 10 Response Letter**

Comment:

AR RI3 2 18 10 Response.pdf

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**Note To Filer**

**Created By:**

Rosalind Minor (FM) on 02/16/2010 10:46 AM

**Last Edited By:**

Harris Shearer

**Submitted On:**

03/03/2010 12:43 PM

**Subject:**

Your response of February 12, 2010

**Comments:**

In Mr. Grace's letter of December 3, 2009, he stated that the first rate increase was approved on November 6, 2006, and that the second rate increase was approved on October 1, 2008. Since these premium increases were approved only two years apart, we felt like the increases should be a lesser amount than previous increases.

Should a company refuse to accept a reduction in premiums and deems the filing approved, the Commissioner may at any time, after notice and for cause shown, withdraw approval. See ACA 23-79-109 (5)(b)(4).

**Rate/Rule Schedule**

Schedule Item Status:	Document Name:	Affected Form Numbers: (Separated with commas)	Rate Action:	Rate Action Information:	Attachments
Approved 03/03/2010	AR Rate Sheets	64028-AR, 64032, 64031, C12271-AR	Revised	Previous State Filing Number:  Percent Rate Change Request:	LTCG- 1257258 03 Arkansas RI3 Rates.pdf
				12.500	

AIG Life Insurance Company  
Long Term Care Policy  
Rate Sheet  
Annual Premiums per \$10 of Daily Benefit  
0% Home Health Care Benefit  
Underwriting Table I, 0 Day Elim  
All Areas

Policy form Series 64028  
Level Benefits

Issue Age	24	36	48	60	Lifetime
18-49	44	54	61	63	93
50-59	56	71	82	99	146
60-64	86	105	117	124	183
65-69	125	150	169	181	209
70	187	215	245	273	322
71	208	237	271	303	359
72	230	259	296	332	398
73	264	299	344	387	459
74	297	338	393	442	521
75	332	378	442	496	584
76	366	420	489	549	646
77	401	457	539	603	708
78	443	506	595	667	781
79	485	555	651	731	856
80	528	602	708	794	929
81	569	651	764	858	1,005
82	612	698	820	921	1,078
83	669	766	900	1,011	1,176
84	730	836	979	1,101	1,272
85	789	905	1,061	1,193	1,371
86	849	972	1,141	1,281	1,468
87	909	1,041	1,222	1,373	1,565
88	1,011	1,158	1,359	1,526	1,742
89	1,115	1,275	1,496	1,681	1,917

AIG Life Insurance Company  
Long Term Care Policy  
Rate Sheet  
Annual Premiums per \$10 of Daily Benefit  
50% Home Health Care Benefit  
Underwriting Table I, 0 Day Elim  
Area 1

Policy form Series 64028  
Level Benefits

Issue Age	24	36	48	60	Lifetime
18-49	56	69	78	84	107
50-59	74	90	102	114	153
60-64	110	135	152	163	209
65-69	161	195	218	236	287
70	223	269	304	335	405
71	243	294	335	366	443
72	264	321	363	399	483
73	302	365	415	456	549
74	336	408	466	512	613
75	371	451	518	568	680
76	408	496	568	624	746
77	443	541	620	681	810
78	494	597	687	757	892
79	547	654	754	831	971
80	597	710	821	909	1,052
81	648	766	888	984	1,131
82	701	822	955	1,061	1,209
83	768	905	1,047	1,166	1,321
84	837	984	1,143	1,270	1,429
85	906	1,067	1,236	1,373	1,539
86	974	1,145	1,329	1,477	1,647
87	1,042	1,225	1,422	1,581	1,756
88	1,160	1,365	1,582	1,758	1,955
89	1,277	1,502	1,743	1,935	2,152

AIG Life Insurance Company  
Long Term Care Policy  
Rate Sheet  
Annual Premiums per \$10 of Daily Benefit  
100% Home Health Care Benefit  
Underwriting Table I, 0 Day Elim  
Area 1

Policy Form Series 64028  
Level Benefits

Issue Age	24	36	48	60	Lifetime
18-49	62	78	89	96	114
50-59	83	100	113	124	159
60-64	122	152	170	185	224
65-69	180	219	246	268	331
70	243	307	339	370	451
71	264	330	371	405	493
72	286	356	403	438	533
73	322	403	457	496	602
74	359	450	511	555	669
75	395	498	564	612	738
76	433	546	618	669	808
77	470	592	673	729	876
78	528	656	746	813	961
79	585	718	821	899	1,045
80	645	781	894	983	1,130
81	702	843	971	1,069	1,214
82	759	906	1,045	1,153	1,298
83	834	993	1,146	1,266	1,415
84	907	1,083	1,249	1,379	1,531
85	982	1,171	1,351	1,492	1,649
86	1,056	1,260	1,455	1,604	1,766
87	1,131	1,349	1,556	1,720	1,883
88	1,258	1,500	1,731	1,911	2,096
89	1,385	1,652	1,906	2,104	2,306

AIG Life Insurance Company  
Long Term Care Policy  
Rate Sheet  
Annual Premiums per \$10 of Daily Benefit  
0% Home Health Care Benefit  
Underwriting Table I, 0 Day Elim  
All Areas

Policy Form Series 64028 with 64032  
Level Benefits, With Nonforfeiture

Issue Age	24	36	48	60	Lifetime
18-49	55	65	74	79	117
50-59	71	89	100	122	181
60-64	107	128	145	153	226
65-69	153	183	208	223	258
70	225	259	296	330	388
71	251	287	325	365	433
72	275	309	356	399	477
73	315	358	412	462	549
74	353	401	466	527	619
75	394	449	522	588	691
76	431	494	577	647	761
77	471	539	633	709	830
78	521	595	698	782	918
79	569	651	765	860	1,006
80	620	708	830	934	1,095
81	669	765	898	1,007	1,180
82	719	820	963	1,083	1,266
83	788	900	1,059	1,188	1,383
84	858	982	1,151	1,294	1,496
85	928	1,062	1,247	1,401	1,612
86	999	1,143	1,342	1,506	1,725
87	1,068	1,224	1,436	1,614	1,839
88	1,188	1,359	1,596	1,793	2,045
89	1,310	1,497	1,758	1,974	2,251

AIG Life Insurance Company  
Long Term Care Policy  
Rate Sheet  
Annual Premiums per \$10 of Daily Benefit  
50% Home Health Care Benefit  
Underwriting Table I, 0 Day Elim  
Area 1

Policy Form Series 64028 with 64032  
Level Benefits, With Nonforfeiture

Issue Age	24	36	48	60	Lifetime
18-49	71	84	97	106	134
50-59	91	111	127	142	190
60-64	135	168	189	203	260
65-69	197	237	268	290	352
70	268	325	367	405	489
71	293	353	403	440	533
72	316	384	434	478	578
73	359	434	496	546	656
74	399	485	555	609	730
75	440	536	612	674	803
76	483	585	669	737	879
77	521	637	730	800	954
78	581	703	808	888	1,047
79	641	768	887	978	1,141
80	703	836	965	1,068	1,236
81	764	900	1,042	1,158	1,329
82	822	968	1,123	1,247	1,421
83	901	1,062	1,231	1,370	1,551
84	983	1,158	1,343	1,491	1,680
85	1,063	1,252	1,452	1,614	1,807
86	1,145	1,344	1,562	1,736	1,935
87	1,225	1,440	1,672	1,856	2,064
88	1,365	1,603	1,861	2,066	2,298
89	1,500	1,764	2,046	2,276	2,529

AIG Life Insurance Company  
Long Term Care Policy  
Rate Sheet  
Annual Premiums per \$10 of Daily Benefit  
100% Home Health Care Benefit  
Underwriting Table I, 0 Day Elim  
Area 1

Policy Form Series 64028 with 64032  
Level Benefits, With Nonforfeiture

Issue Age	24	36	48	60	Lifetime
18-49	77	97	110	118	142
50-59	102	125	140	153	197
60-64	152	189	212	230	276
65-69	219	271	303	330	406
70	294	365	410	448	546
71	318	395	448	487	592
72	342	426	484	527	640
73	386	483	547	592	719
74	428	536	606	659	797
75	470	590	668	725	876
76	511	645	729	792	954
77	552	696	789	855	1,028
78	620	771	876	955	1,130
79	687	843	965	1,055	1,227
80	757	918	1,052	1,154	1,326
81	825	990	1,141	1,256	1,427
82	893	1,063	1,227	1,356	1,524
83	979	1,168	1,348	1,488	1,664
84	1,067	1,272	1,467	1,621	1,799
85	1,153	1,377	1,590	1,755	1,938
86	1,242	1,481	1,709	1,886	2,076
87	1,329	1,584	1,828	2,019	2,212
88	1,477	1,762	2,034	2,244	2,463
89	1,629	1,940	2,240	2,473	2,711

AIG Life Insurance Company  
Long Term Care Policy  
Rate Sheet  
Annual Premiums per \$10 of Daily Benefit  
0% Home Health Care Benefit  
Underwriting Table I, 0 Day Elim  
All Areas

Policy Form Series 64028 with 64031  
Increasing Benefits

Issue Age	24	36	48	60	Lifetime
18-49	86	110	122	133	185
50-59	110	138	155	168	234
60-64	145	181	204	223	325
65-69	204	251	280	303	388
70	287	336	384	428	533
71	314	365	416	470	581
72	342	393	451	512	628
73	381	440	511	578	704
74	422	489	569	646	782
75	462	536	630	712	862
76	504	584	687	780	939
77	541	633	747	845	1,017
78	588	686	810	916	1,101
79	633	738	872	986	1,186
80	680	792	935	1,056	1,271
81	723	844	997	1,130	1,356
82	768	898	1,059	1,199	1,440
83	834	972	1,146	1,295	1,546
84	900	1,047	1,236	1,394	1,652
85	965	1,124	1,323	1,492	1,756
86	1,031	1,199	1,412	1,590	1,862
87	1,097	1,275	1,500	1,688	1,968
88	1,209	1,405	1,653	1,862	2,170
89	1,321	1,533	1,805	2,032	2,368

AIG Life Insurance Company  
Long Term Care Policy  
Rate Sheet  
Annual Premiums per \$10 of Daily Benefit  
50% Home Health Care Benefit  
Underwriting Table I, 0 Day Elim  
Area 1

Policy Form Series 64028 with 64031  
Increasing Benefits

Issue Age	24	36	48	60	Lifetime
18-49	110	140	156	170	219
50-59	140	178	201	218	280
60-64	183	234	266	288	388
65-69	259	322	363	394	521
70	339	421	477	527	684
71	366	451	515	569	740
72	394	484	555	613	794
73	438	540	619	684	883
74	479	596	684	757	971
75	524	651	749	828	1,061
76	568	708	815	900	1,148
77	612	764	879	972	1,236
78	665	821	951	1,056	1,323
79	719	879	1,024	1,141	1,412
80	774	939	1,096	1,225	1,500
81	827	997	1,168	1,310	1,586
82	881	1,055	1,239	1,394	1,674
83	956	1,145	1,343	1,509	1,798
84	1,033	1,235	1,446	1,621	1,919
85	1,106	1,322	1,548	1,736	2,041
86	1,181	1,412	1,652	1,850	2,165
87	1,258	1,502	1,755	1,963	2,287
88	1,387	1,654	1,935	2,166	2,523
89	1,513	1,807	2,111	2,363	2,754

AIG Life Insurance Company  
Long Term Care Policy  
Rate Sheet  
Annual Premiums per \$10 of Daily Benefit  
100% Home Health Care Benefit  
Underwriting Table I, 0 Day Elim  
Area 1

Policy Form Series 64028 with 64031  
Increasing Benefits

Issue Age	24	36	48	60	Lifetime
18-49	122	156	178	191	240
50-59	155	198	225	245	304
60-64	206	262	297	324	422
65-69	288	363	408	444	595
70	370	468	533	583	774
71	398	504	574	628	834
72	423	539	617	674	893
73	471	600	684	749	990
74	518	662	754	825	1,085
75	563	721	822	900	1,181
76	609	782	893	974	1,278
77	654	844	962	1,050	1,373
78	716	907	1,042	1,145	1,464
79	775	971	1,123	1,239	1,556
80	836	1,034	1,202	1,334	1,647
81	894	1,097	1,280	1,429	1,737
82	955	1,160	1,359	1,524	1,828
83	1,038	1,259	1,472	1,647	1,962
84	1,118	1,357	1,584	1,772	2,097
85	1,199	1,455	1,699	1,897	2,231
86	1,281	1,553	1,811	2,023	2,364
87	1,362	1,652	1,924	2,144	2,498
88	1,503	1,820	2,122	2,367	2,755
89	1,643	1,987	2,315	2,582	3,008

AIG Life Insurance Company  
Long Term Care Policy  
Rate Sheet  
Annual Premiums per \$10 of Daily Benefit  
0% Home Health Care Benefit  
Underwriting Table I, 0 Day Elim  
All Areas

Policy Form Series 64028 with 64031 and 64032  
Increasing Benefits, With Nonforfeiture

Issue Age	24	36	48	60	Lifetime
18-49	107	135	152	163	230
50-59	135	170	191	208	290
60-64	180	225	253	275	403
65-69	251	307	343	371	477
70	347	406	462	518	645
71	377	438	501	564	698
72	410	471	541	613	753
73	456	527	611	691	843
74	504	583	680	768	933
75	549	635	746	844	1,022
76	592	690	810	920	1,108
77	637	744	878	993	1,194
78	690	806	954	1,076	1,294
79	744	870	1,025	1,159	1,393
80	799	929	1,098	1,242	1,495
81	849	991	1,171	1,326	1,593
82	901	1,053	1,243	1,407	1,692
83	979	1,143	1,348	1,523	1,816
84	1,059	1,231	1,452	1,638	1,940
85	1,134	1,321	1,556	1,755	2,064
86	1,211	1,407	1,659	1,868	2,187
87	1,288	1,497	1,762	1,983	2,312
88	1,421	1,652	1,942	2,187	2,549
89	1,551	1,801	2,121	2,388	2,783

AIG Life Insurance Company  
Long Term Care Policy  
Rate Sheet  
Annual Premiums per \$10 of Daily Benefit  
50% Home Health Care Benefit  
Underwriting Table I, 0 Day Elim  
Area 1

Policy Form Series 64028 with 64031 and 64032  
Increasing Benefits, With Nonforfeiture

Issue Age	24	36	48	60	Lifetime
18-49	135	173	195	212	273
50-59	173	219	248	271	347
60-64	226	290	330	358	483
65-69	318	395	444	484	639
70	410	507	575	635	827
71	440	543	620	686	892
72	473	581	665	737	954
73	524	646	740	817	1,055
74	572	709	815	900	1,154
75	620	771	888	982	1,258
76	669	834	961	1,062	1,356
77	719	898	1,034	1,143	1,452
78	781	965	1,118	1,242	1,556
79	845	1,034	1,203	1,342	1,659
80	909	1,103	1,287	1,440	1,762
81	971	1,171	1,371	1,539	1,863
82	1,035	1,239	1,456	1,638	1,968
83	1,124	1,344	1,580	1,772	2,111
84	1,214	1,450	1,699	1,905	2,256
85	1,299	1,554	1,820	2,040	2,397
86	1,389	1,659	1,940	2,172	2,543
87	1,477	1,764	2,062	2,306	2,688
88	1,630	1,945	2,276	2,546	2,964
89	1,779	2,124	2,481	2,777	3,234

AIG Life Insurance Company  
Long Term Care Policy  
Rate Sheet  
Annual Premiums per \$10 of Daily Benefit  
100% Home Health Care Benefit  
Underwriting Table I, 0 Day Elim  
Area 1

Policy Form Series 64028 with 64031 and 64032  
Increasing Benefits, With Nonforfeiture

Issue Age	24	36	48	60	Lifetime
18-49	152	195	219	237	297
50-59	191	246	280	303	378
60-64	254	325	370	401	524
65-69	353	444	501	547	730
70	448	564	645	703	935
71	478	605	691	757	1,005
72	507	646	738	809	1,073
73	563	716	817	894	1,182
74	617	786	899	982	1,292
75	667	855	977	1,068	1,400
76	718	923	1,053	1,151	1,509
77	768	991	1,131	1,232	1,614
78	842	1,067	1,225	1,344	1,721
79	911	1,141	1,320	1,456	1,828
80	982	1,215	1,412	1,568	1,935
81	1,052	1,288	1,503	1,680	2,041
82	1,123	1,365	1,596	1,792	2,149
83	1,218	1,478	1,728	1,935	2,305
84	1,314	1,595	1,862	2,081	2,465
85	1,407	1,709	1,996	2,229	2,621
86	1,506	1,826	2,127	2,375	2,778
87	1,602	1,940	2,259	2,521	2,936
88	1,766	2,138	2,493	2,782	3,236
89	1,928	2,334	2,720	3,035	3,534

AIG Life Insurance Company  
Policy Form Series 64028  
Long Term Care Policy

Rate Schedule

I. Substandard Rate classifications

Issue Age	Standard	Select	Underwriting Problems
18-59	129%	175%	210%
60-64	129%	174%	210%
65-69	126%	170%	205%
70-74	125%	167%	202%
75-79	123%	166%	200%
80-84	118%	160%	192%
85-89	114%	154%	185%

II. Area Rating

Area 1: All other areas.

Area 2: California, New York, All other Florida counties not included in Area 3.

Area 3: Florida counties: Dade, Broward, Fort Lauderdale, Palm.

III. Elimination Period

Elimination Period	Percentage Discount
0	0%
7	6%
14	10%
20	12%
30	13%
60	22%
100	28%

SERFF Tracking Number: LTCG-126407323 State: Arkansas  
 Filing Company: AIG Life Insurance Company State Tracking Number: 44253  
 Company Tracking Number: AIGRI3AR  
 TOI: LTC03I Individual Long Term Care Sub-TOI: LTC03I.003 Other  
 Product Name: AIG Life Individual Long Term Care Insurance  
 Project Name/Number: AIG Life RI3 Filing/AIGRI3AR

## Supporting Document Schedules

	<b>Item Status:</b>	<b>Status Date:</b>
<b>Satisfied - Item:</b> Third Party Filer Authorization	Approved	03/03/2010
<b>Comments:</b>		
<b>Attachment:</b> 2009 AIG Filing Auth Letter.pdf		

	<b>Item Status:</b>	<b>Status Date:</b>
<b>Satisfied - Item:</b> Cover Letter	Approved	03/03/2010
<b>Comments:</b>		
<b>Attachment:</b> AR RI3 Cover Letter.pdf		

	<b>Item Status:</b>	<b>Status Date:</b>
<b>Satisfied - Item:</b> 1 25 10 Response Letter	Approved	03/03/2010
<b>Comments:</b>		
<b>Attachment:</b> AR RI3 1 25 10 Response.pdf		

	<b>Item Status:</b>	<b>Status Date:</b>
<b>Satisfied - Item:</b> 2 18 10 Response Letter	Approved	03/03/2010
<b>Comments:</b>		
<b>Attachment:</b> AR RI3 2 18 10 Response.pdf		

	<b>Item Status:</b>	<b>Status Date:</b>
<b>Satisfied - Item:</b> 2 25 10 Response Letter	Approved	03/03/2010
<b>Comments:</b>		

*SERFF Tracking Number:*      *LTCG-126407323*                      *State:*                      *Arkansas*  
*Filing Company:*              *AIG Life Insurance Company*                      *State Tracking Number:*      *44253*  
*Company Tracking Number:*      *AIGRI3AR*  
*TOI:*                      *LTC03I Individual Long Term Care*                      *Sub-TOI:*                      *LTC03I.003 Other*  
*Product Name:*              *AIG Life Individual Long Term Care Insurance*  
*Project Name/Number:*      *AIG Life RI3 Filing/AIGRI3AR*

**Attachment:**

AR RI3 2 25 10 Response.pdf



AIG Life Insurance Company  
600 King Street  
Wilmington, Delaware 19801  
A capital stock company

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January 7, 2009

Dear Insurance Commissioner:

This letter authorizes the Long Term Care Group, Inc. to make various policy form filings, including premium rate filings on behalf of AIG Life Insurance Company.

This authorization will remain in full force and effect until the earlier of (a) your receipt of a written notification from AIG Life Insurance Company expressly terminating this authorization; or (b) 31<sup>st</sup> of December 2009.

Please feel free to contact me directly should you have any questions concerning this authorization, c/o American General Life Companies, 2929 Allen Parkway, Mail Stop A38-40, Houston, TX, 77019. My e-mail address, telephone and fax numbers are below.

Sincerely,

A handwritten signature in blue ink that reads "Leo W. Grace".

Leo W. Grace  
Vice President  
Product Compliance  
Phone: (800) 247-8837, ext 3508  
Fax: 713-342-7550  
e-mail: leo\_grace@aigag.com



*The Long Term Care Group, Inc.*

Timothy P. Cassidy  
Compliance Manager  
Phone: (888) 312-5824  
Fax: (508) 651-8804  
E-mail: [tcassidy@ltcg.com](mailto:tcassidy@ltcg.com)

December 3, 2009

Arkansas Department of Insurance  
Life and Health Section  
Attn: Actuarial Review

**Re: AIG LIFE INSURANCE COMPANY**  
FEIN # 25-1118523 NAIC # **66842**  
INDIVIDUAL ACCIDENT AND HEALTH INSURANCE  
**Rate Increase for:**  
**Non-Tax Qualified Long Term Care Policy 64028-AR**  
**Tax-Qualified Long Term Care Policy Rider C12271-AR**  
**Inflation Benefit Rider 64031**  
**Nonforfeiture Benefit Rider 64032**

*Filing Submitted via SERFF*

Dear Sir or Madam:

On behalf of AIG Life Insurance Company (AIG), we at Long Term Care Group, Inc. (LTCG) are submitting the enclosed actuarial memorandum for your review and approval. A letter from AIG authorizing LTCG to make this rate filing on behalf of AIG is attached.

The enclosed actuarial memorandum details the request for a 25% increase in the rates for AIG's long term care insurance policy forms and associated riders noted above. We are requesting this rate increase because persistency and claim experience is expected to produce lifetime loss ratios that exceed the minimum required loss ratio. Your department approved the first rate increase request for this policy on November 6, 2006 and the second rate increase for this policy on October 1, 2008. At this time this additional rate increase of 25% is justifiable to bring lifetime loss ratios closer to an acceptable level.

The company will offer insureds the option to reduce their daily benefit amount by 25% in lieu of accepting the rate increase. This option will allow insureds the flexibility to maintain their current premium level, if desired.

The rates will be effective upon approval and will apply to all existing policyholders. The company discontinued sales of its long term care insurance product in 2001.

We trust that you will find our filing to be in order and hope that you will grant your Department's approval to this submission. Our fax number is (508) 651-8804. If you have any questions or would like to discuss any of the materials included in this submission, please feel free to call me toll free at 1-888-312-5824, extension 24. You may also send an email to [tcassidy@ltcg.com](mailto:tcassidy@ltcg.com).

We look forward to hearing from you.

Sincerely,

A handwritten signature in black ink, appearing to read "Timothy P. Cassidy". The signature is fluid and cursive, with the first name being the most prominent.

Timothy P. Cassidy  
Compliance Manager

# **LTCG**

*The Long Term Care Group, Inc.*

Timothy P. Cassidy  
Compliance Manager  
Phone: (888) 312-5824  
Fax: (508) 651-8804  
E-mail: tcassidy@ltcg.com

January 25, 2010

Arkansas Department of Insurance  
Life and Health Section  
Attn: Harris Shearer

**Re: AIG LIFE INSURANCE COMPANY**  
FEIN # 25-1118523                      NAIC # **66842**  
INDIVIDUAL ACCIDENT AND HEALTH INSURANCE  
**Rate Increase for:**  
**Non-Tax Qualified Long Term Care Policy 64028-AR**  
**Tax-Qualified Long Term Care Policy Rider C12271-AR**  
**Inflation Benefit Rider 64031**  
**Nonforfeiture Benefit Rider 64032**  
**SERFF Tracking Number: LTCG-126407323**  
**Arkansas Tracking Number: 44253**

*Filing Submitted via SERFF*

Dear Mr. Shearer:

Thank you for your response of January 22, 2010, which reads as follows:

"We will only consider a 12.5% rate increase at this time. If you wish to accept this offer, please forward your acceptance of this offer and revised rates."

Would you please provide any information available upon which the Department based its decision not to accept the company's request for a 25% rate increase?

Thank you.

Sincerely,



Timothy P. Cassidy  
Compliance Manager

# **LTCG**

*The Long Term Care Group, Inc.*

Timothy P. Cassidy  
Compliance Manager  
Phone: (888) 312-5824  
Fax: (508) 651-8804  
E-mail: tcassidy@ltcg.com

February 18, 2010

Arkansas Department of Insurance  
Life and Health Section  
Attn: Rosalind Minor

**Re: AIG LIFE INSURANCE COMPANY**  
FEIN # 25-1118523                      NAIC # **66842**  
INDIVIDUAL ACCIDENT AND HEALTH INSURANCE  
**Rate Increase for:**  
**Non-Tax Qualified Long Term Care Policy 64028-AR**  
**Tax-Qualified Long Term Care Policy Rider C12271-AR**  
**Inflation Benefit Rider 64031**  
**Nonforfeiture Benefit Rider 64032**  
**SERFF Tracking Number: LTCG-126407323**  
**Arkansas Tracking Number: 44253**

*Filing Submitted via SERFF*

Dear Ms. Minor:

Thank you for your response of February 16, 2010, which reads as follows:

"In Mr. Grace's letter of December 3, 2009, he stated that the first rate increase was approved on November 6, 2006, and that the second rate increase was approved on October 1, 2008. Since these premium increases were approved only two years apart, we felt like the increases should be a lesser amount than previous increases."

AIG Life Insurance Company would like to accept the reduced rate increase of 12.5% offered in Harris Shearer's letter of January 22, 2010.

Sincerely,



Timothy P. Cassidy  
Compliance Manager

# LTCG

*The Long Term Care Group, Inc.*

Timothy P. Cassidy  
Compliance Manager  
Phone: (888) 312-5824  
Fax: (508) 651-8804  
E-mail: tcassidy@ltcg.com

February 25, 2010

Arkansas Department of Insurance  
Life and Health Section  
Attn: Harris Shearer

**Re: AIG LIFE INSURANCE COMPANY**  
FEIN # 25-1118523                      NAIC # **66842**  
INDIVIDUAL ACCIDENT AND HEALTH INSURANCE  
**Rate Increase for:**  
**Non-Tax Qualified Long Term Care Policy 64028-AR**  
**Tax-Qualified Long Term Care Policy Rider C12271-AR**  
**Inflation Benefit Rider 64031**  
**Nonforfeiture Benefit Rider 64032**  
**SERFF Tracking Number: LTCG-126407323**  
**Arkansas Tracking Number: 44253**

*Filing Submitted via SERFF*

Dear Mr. Shearer:

Thank you for your response of yesterday, February 24, 2010, which reads as follows:

*Objection 1*

*- Actuarial Memorandum, [64028-AR, 64032, 64031, C12271-AR] (Rate)*

*Comment: Please forward revised schedules reflecting the 12.5% rate increase accepted by your company.*

Response: We have placed revised rate schedules reflecting the 12.5 percent increase amount under the Rate/Rule Tab of SERFF.

We trust that you now have everything you need to approve the filing.

Thank you.

Sincerely,



Timothy P. Cassidy  
Compliance Manager