

SERFF Tracking Number: PNTX-126562007 State: Arkansas
Filing Company: American Network Insurance Company State Tracking Number: 45283
Company Tracking Number: LTCAR0023230F01
TOI: LTC06 Long Term Care - Other Sub-TOI: LTC06.000 Long Term Care - Other
Product Name: 10 Rep- 2010 Reports
Project Name/Number: 10 Rep- 2010 Reports/LTCAR0023230F01

Filing at a Glance

Company: American Network Insurance Company

Product Name: 10 Rep- 2010 Reports SERFF Tr Num: PNTX-126562007 State: Arkansas
TOI: LTC06 Long Term Care - Other SERFF Status: Closed-Accepted State Tr Num: 45283
For Informational Purposes
Sub-TOI: LTC06.000 Long Term Care - Other Co Tr Num: LTCAR0023230F01 State Status: Closed
Filing Type: Form Reviewer(s): Marie Bennett
Author: SPI PennTreatyNetwork Disposition Date: 03/31/2010
Date Submitted: 03/29/2010 Disposition Status: Accepted For Informational Purposes
Implementation Date: Implementation Date:

Implementation Date Requested:

State Filing Description:

General Information

Project Name: 10 Rep- 2010 Reports
Project Number: LTCAR0023230F01
Requested Filing Mode: Informational
Explanation for Combination/Other:
Submission Type: New Submission
Overall Rate Impact:
Filing Status Changed: 03/31/2010

Status of Filing in Domicile: Pending
Date Approved in Domicile:
Domicile Status Comments:
Market Type:
Group Market Size:
Group Market Type:
Explanation for Other Group Market Type:
State Status Changed: 03/31/2010
Created By: SPI PennTreatyNetwork
Corresponding Filing Tracking Number:

Deemer Date:

Submitted By: SPI PennTreatyNetwork

Filing Description:

RE: NAIC Number: 81078/American Network Insurance Company
AR-Lapse and Replacement Report for 2009

Dear Commissioner:

According to your Long Term Care insurance regulation, we are required to provide you with a copy of the Long Term Care Lapse and Replacement report which includes agent sales data.

As you may be aware, our company ceased marketing and selling long-term care insurance on October 3rd 2008.

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Thereafter, the Commonwealth Court of Pennsylvania ordered our company into "Rehabilitation" on January 6th, 2009. The court assigned the Insurance Commissioner of Pennsylvania, Joel Ario, as the court appointed "rehabilitator". Since his appointment, he has been responsible for the overall operations of the company.

As a result, of the company's current status, there are no sales or agent data to report. It is our understanding that the intent of the report is to provide information that may identify inappropriate sales activities. Accordingly, we respectfully submit that providing lapse data provided exclusively without the benefit of agent sales figures would not be beneficial for the purposes of this report.

Therefore, we trust that this note will satisfy the department's requirement. If you have any questions or need additional information, please feel free to contact me at 800-222-3469 e. 6150.

Company and Contact

Filing Contact Information

Kevin Carney, Senior Analyst kcarney@penntreaty.com
 3440 Lehigh St 610-965-2222 [Phone] 6150 [Ext]
 Allentown, PA 18103 484-232-6638 [FAX]

Filing Company Information

American Network Insurance Company CoCode: 81078 State of Domicile: Pennsylvania
 3440 Lehigh Street Group Code: 810 Company Type:
 Allentown, PA 18103 Group Name: Penn Treaty State ID Number:
 (610) 965-2222 ext. [Phone] FEIN Number: 03-0211497

Filing Fees

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

COMPANY	AMOUNT	DATE PROCESSED	TRANSACTION #
American Network Insurance Company	\$0.00	03/29/2010	

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Correspondence Summary

Dispositions

Status	Created By	Created On	Date Submitted
Accepted For Marie Bennett Informational Purposes		03/31/2010	03/31/2010

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Disposition

Disposition Date: 03/31/2010

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

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Supporting Document Schedules

	Item Status:	Status Date:
Bypassed - Item: Flesch Certification		
Bypass Reason: Not required with this filing.		
Comments:		

	Item Status:	Status Date:
Bypassed - Item: Application		
Bypass Reason: Not required with this filing.		
Comments:		

	Item Status:	Status Date:
Bypassed - Item: Health - Actuarial Justification		
Bypass Reason: Not required with this filing.		
Comments:		

	Item Status:	Status Date:
Bypassed - Item: Outline of Coverage		
Bypass Reason: Not required with this filing.		
Comments:		