

SERFF Tracking Number: UNUM-126524115 State: Arkansas
Filing Company: Unum Life Insurance Company of America State Tracking Number: 45136
Company Tracking Number: CIVD.7
TOI: H07G Group Health - Specified Disease - Sub-TOI: H07G.001 Critical Illness
Limited Benefit
Product Name: GCI 2010 CIVD.7
Project Name/Number: /

Filing at a Glance

Company: Unum Life Insurance Company of America

Product Name: GCI 2010 CIVD.7

SERFF Tr Num: UNUM-126524115 State: Arkansas

TOI: H07G Group Health - Specified Disease - Limited Benefit

SERFF Status: Closed-Approved- Closed
State Tr Num: 45136

Sub-TOI: H07G.001 Critical Illness

Co Tr Num: CIVD.7

State Status: Approved-Closed

Filing Type: Form

Reviewer(s): Rosalind Minor

Authors: Jay Burt, Laneeta Derrick, Disposition Date: 03/10/2010

Karen Gibson, Annise Henson,

Julie Mader, Vanessa Vice

Date Submitted: 03/08/2010

Disposition Status: Approved-Closed

Implementation Date Requested: On Approval

Implementation Date:

State Filing Description:

General Information

Project Name:

Status of Filing in Domicile: Pending

Project Number:

Date Approved in Domicile:

Requested Filing Mode:

Domicile Status Comments:

Explanation for Combination/Other:

Market Type: Group

Submission Type: New Submission

Group Market Size: Small and Large

Overall Rate Impact:

Group Market Type: Employer

Filing Status Changed: 03/10/2010

Explanation for Other Group Market Type:

State Status Changed: 03/10/2010

Deemer Date:

Created By: Julie Mader

Submitted By: Jay Burt

Corresponding Filing Tracking Number:

Filing Description:

RE:

Unum Life Insurance Company of America

NAIC # 416-62235

Group Critical Illness/Group Cancer

CIVD.7 - Additional Variables

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Dear Examiner:

The above-mentioned form is being submitted for your review and approval. It will be used with our Form CI-1 group critical illness combined policy/certificate and associated forms, which were approved by your Department on June 28, 2007.

Form CIVD.7 provides additional variables that address the evolving needs of our Customers by integrating our product offerings and allow us to remain competitive in the marketplace. These new variables are in addition to those already approved and on file with your Department. Any modifications will be made within the confines of the laws of the governing jurisdiction.

All new or revised text is highlighted in the form, and any non-highlighted text shown was previously approved by your department.

There is no rate impact for this filing.

Our previously approved policy/certificate form CI-1 and associated forms are currently marketed to employer groups by brokers and worksite marketing groups. However, we're now requesting that the marketing be expanded to also include associations and unions.

We request the right to make non-substantive formatting changes and request that all prior approved variables be available for use with this filing.

Your time and attention to this filing is appreciated. If you have questions or need additional information, please do not hesitate to contact me at (800) 974-2266, extension 5738, by fax at (423) 294-3499 or by email at jburt@unum.com.

Sincerely,

Jay K. Burt
Senior Contract Analyst
Unum Life Insurance Company of America

Company and Contact

Filing Contact Information

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Correspondence Summary

Dispositions

Status	Created By	Created On	Date Submitted
Approved-Closed	Rosalind Minor	03/10/2010	03/10/2010

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Disposition

Disposition Date: 03/10/2010

Implementation Date:

Status: Approved-Closed

Comment:

Rate data does NOT apply to filing.

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Form Schedule

Lead Form Number: CIVD.7

Schedule Item	Form Number	Form Type	Form Name	Action	Action Specific Data	Readability	Attachment
Approved-Closed 03/10/2010	CIVD.7	Other	Additional Variables	Initial			CIVD.7, Additional Variables (Std.) - Final.pdf

Unum Life Insurance Company of America
Portland, Maine

Additional Policy/Certificate variables to be used with our previously approved CI-1 policy and related certificate for group critical illness and group cancer plans are shown below.

For ease of review purposes new or changed text has been **highlighted**. Non-highlighted text reflects language already on file with your Department. Bracketed text may be inserted, deleted or modified.

1) *The following new provisions may be added to the **GENERAL PROVISIONS** section to read as follows:*

[Premium Payments. If premium is paid directly by You to Unum, all premiums due, including any adjustments, must be paid on or before the applicable premium due date. [Your bill will include important information regarding premium remittance.] [Premiums are payable in U.S. currency only.]

[Grace Period. Your coverage will remain in effect during the [31-90] day Grace Period; however, if premium is not paid during that time, Your coverage will terminate at the end of the Grace Period. There is no Grace Period for the first premium.

If Unum, at its sole discretion, agrees to waive the Grace Period in any instance, such agreement will not preclude or prejudice enforcement of the Grace Period in any other instance.

Termination of coverage will not prejudice any Payable Claim for a Covered Loss that begins prior to termination of coverage.]

2) *The **WELLNESS BENEFIT** in the **BENEFIT INFORMATION** section may be modified to add a new second paragraph to read as follows:*

[If [Your] [the Insured's] coverage is in force on the Employer's Original Policy Effective Date, Unum will pay the Wellness Benefit Amount shown in the Benefits at a Glance for a Wellness Test [You have] [the Insured has] performed [[within the [[0-365] days] [[one-six] month[s]] prior to the Employer's Original Policy Effective Date[, as part of an approved Employer sponsored wellness screening program]] [on or after the date You apply for coverage but prior to the Employer's Original Policy Effective Date]. Any Wellness Benefit paid for a Wellness Test performed prior to the Employer's Original Policy Effective Date will be the Wellness Benefit for the first Calendar Year during which the policy becomes effective.]

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Supporting Document Schedules

	Item Status:	Status Date:
Satisfied - Item: Flesch Certification	Approved-Closed	03/10/2010
Comments:		
Attachment: Readability Cert (0114k).pdf		

	Item Status:	Status Date:
Bypassed - Item: Application	Approved-Closed	03/10/2010
Bypass Reason: Not Applicable		
Comments:		

