

SERFF Tracking Number: IASL-126643372 State: Arkansas
Filing Company: Principal Life Insurance Company State Tracking Number: 45760
Company Tracking Number: PG REFUND CALC
TOI: MS06 Medicare Supplement - Other Sub-TOI: MS06.000 Medicare Supplement - Other
Product Name: Principal Life Insurance Company 2009 Medicare Supplement Refund Calculation Filing
Project Name/Number: Principal Life Insurance Company 2009 Medicare Supplement Refund Calculation Filing/

Filing at a Glance

Company: Principal Life Insurance Company
Product Name: Principal Life Insurance Company 2009 Medicare Supplement Refund Calculation Filing
SERFF Tr Num: IASL-126643372 State: Arkansas
TOI: MS06 Medicare Supplement - Other
SERFF Status: Closed-Accepted For Informational Purposes
State Tr Num: 45760
Sub-TOI: MS06.000 Medicare Supplement - Other
Co Tr Num: PG REFUND CALC State Status: Filed-Closed
Filing Type: Form
Author: Courtney Crocker
Date Submitted: 05/25/2010
Reviewer(s): Stephanie Fowler
Disposition Date: 05/26/2010
Disposition Status: Accepted For Informational Purposes
Implementation Date: 05/26/2010
Implementation Date Requested:
State Filing Description:

General Information

Project Name: Principal Life Insurance Company 2009 Medicare Supplement Refund Calculation Filing
Project Number:
Requested Filing Mode: Informational
Explanation for Combination/Other:
Submission Type: New Submission
Overall Rate Impact:
Filing Status Changed: 05/26/2010
Status of Filing in Domicile:
Date Approved in Domicile:
Domicile Status Comments:
Market Type: Group
Group Market Size: Large
Group Market Type: Discretionary
Explanation for Other Group Market Type:
State Status Changed: 05/26/2010
Created By: Courtney Crocker
Corresponding Filing Tracking Number:
Deemer Date:
Submitted By: Courtney Crocker
Filing Description:
PRINCIPAL LIFE INSURANCE COMPANY
NAIC NUMBER: 332-61271
FEIN NUMBER: 42-0127290

MEDICARE SUPPLEMENT REFUND CALCULATION FORM

SERFF Tracking Number: IASL-126643372 State: Arkansas
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REPORTING FORM FOR THE CALCULATION OF BENCHMARK RATIO

GROUP MEDICARE SUPPLEMENT PRESTANDARDIZED PLANS AND GROUP MEDICARE SUPPLEMENT STANDARDIZED PLANS A, B, C, D, F, G, H, I AND J

Please be advised that on behalf of the Principal Life Insurance Company, Insurance Administrative Solutions, L.L.C. is providing you with the above-captioned forms for compliance with your state’s Medicare Supplement Regulation.

Enclosed you will find the completed Medicare Supplement Refund Calculation Form and the completed Reporting Form for the Calculation of Benchmark Ratio for the calendar year 2009 for the Medicare Supplement plans indicated above.

Company and Contact

Filing Contact Information

Courtney Crocker, Compliance Analyst courtney.crocker@iasadmin.com
 8545 126th Avenue North 727-584-0007 [Phone] 2192 [Ext]
 Suite 200 727-584-5613 [FAX]
 Largo, FL 33773-1502

Filing Company Information

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

Principal Life Insurance Company	CoCode: 61271	State of Domicile: Iowa
711 High Street	Group Code: 332	Company Type:
Des Moines, IA 50392-2300	Group Name:	State ID Number:
(515) 247-5111 ext. [Phone]	FEIN Number: 42-0127290	

Filing Fees

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

COMPANY	AMOUNT	DATE PROCESSED	TRANSACTION #
Principal Life Insurance Company	\$0.00	05/25/2010	

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Correspondence Summary

Dispositions

Status	Created By	Created On	Date Submitted
Accepted For Informational Purposes	Stephanie Fowler	05/26/2010	05/26/2010

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Disposition

Disposition Date: 05/26/2010

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		No
Supporting Document	Application		No
Supporting Document	Health - Actuarial Justification		No
Supporting Document	Outline of Coverage		No
Supporting Document	MEDICARE SUPPLEMENT REFUND CALCULATION FORM REPORTING FORM FOR THE CALCULATION OF BENCHMARK RATIO	Accepted for Informational Purposes	No
Supporting Document	Third party Authorization Letter	Accepted for Informational Purposes	No

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Supporting Document Schedules

	Item Status:	Status Date:
Bypassed - Item: Flesch Certification Bypass Reason: Filing refund calculation form filing only Comments:		
Bypassed - Item: Application Bypass Reason: Filing refund calculation form filing only Comments:		
Bypassed - Item: Health - Actuarial Justification Bypass Reason: Filing refund calculation form only Comments:		
Bypassed - Item: Outline of Coverage Bypass Reason: Filing refund calculation form only Comments:		
Satisfied - Item: Third party Authorization Letter Comments: Authorization letter Attachment: 2009 09 PG IAS Authorization letter.pdf	Accepted for Informational Purposes	05/26/2010



Principal Life
Insurance Company

September 22, 2009

Ms. Darcey Shaffer, FLMI, ACS
Compliance Manager
Insurance Administrative Solutions, L.L.C.
8545 126th Avenue North, Suite 200
Largo, Florida 33773-1502

Re: Filing/Reporting Requirements

Dear Ms. Shaffer,

This letter authorizes Insurance Administrative Solutions, L.L.C., "IAS" to file on behalf of Company Principal Life Insurance Company policy forms, rate filings and reports with the State Departments of Insurance.

Insurance Administrative Solutions, L.L.C. may correspond with the State Departments of Insurance regarding any questions they may have concerning the filings.

Sincerely,

A handwritten signature in black ink, appearing to read "Todd G. Smith".

Todd G. Smith, FSA, MAAA
Actuary – Pricing
Rating & Analysis
Phone: (515) 248-2926
Fax : (515) 362-2308
E-mail: Smith.Todd@Principal.com