

SERFF Tracking Number: NHIC-126630079 State: Arkansas
Filing Company: National Health Insurance Company State Tracking Number: 45681
Company Tracking Number:
TOI: MS06 Medicare Supplement - Other Sub-TOI: MS06.000 Medicare Supplement - Other
Product Name: Medicare Supplement Refund Calculation Form
Project Name/Number: Med Supp Ref Calc/

Filing at a Glance

Company: National Health Insurance Company

Product Name: Medicare Supplement Refund Calculation Form SERFF Tr Num: NHIC-126630079 State: Arkansas

TOI: MS06 Medicare Supplement - Other

SERFF Status: Closed-Accepted State Tr Num: 45681

For Informational Purposes

Sub-TOI: MS06.000 Medicare Supplement - Other Co Tr Num: State Status: Filed-Closed

Other

Filing Type: Form

Reviewer(s): Stephanie Fowler

Author: Rosie Mack

Disposition Date: 05/26/2010

Date Submitted: 05/14/2010

Disposition Status: Accepted For Informational Purposes

Implementation Date Requested:

Implementation Date:

State Filing Description:

General Information

Project Name: Med Supp Ref Calc

Project Number:

Requested Filing Mode:

Explanation for Combination/Other:

Submission Type:

Overall Rate Impact:

Filing Status Changed: 05/26/2010

Status of Filing in Domicile:

Date Approved in Domicile:

Domicile Status Comments:

Market Type:

Group Market Size:

Group Market Type:

Explanation for Other Group Market Type:

State Status Changed: 05/26/2010

Created By: Rosie Mack

Corresponding Filing Tracking Number:

Deemer Date:

Submitted By: Rosie Mack

Filing Description:

Medicare Supplement Refund Calculation for Calendar Year 2009

Company and Contact

Filing Contact Information

Connie Holmes, Accounting Manager

connie.holmes@nhic.com

P.O. Box 619999

817-640-1900 [Phone] 3077 [Ext]

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 Dallas, TX 75261-6199 817-640-3478 [FAX]

Filing Company Information

National Health Insurance Company CoCode: 82538 State of Domicile: Texas
 P.O. Box 619999 Group Code: 4669 Company Type: LAH
 Dallas, TX 75261-6199 Group Name: Southwest Ins State ID Number:
 Partners
 (817) 640-1900 ext. 3410[Phone] FEIN Number: 74-1541799

Filing Fees

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

COMPANY	AMOUNT	DATE PROCESSED	TRANSACTION #
National Health Insurance Company	\$0.00	05/14/2010	

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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

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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	Accepted for Informational Purposes	No

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Supporting Document Schedules

	Item Status:	Status Date:
Bypassed - Item: Flesch Certification		
Bypass Reason: Not Applicable for this reporting		
Comments:		

	Item Status:	Status Date:
Bypassed - Item: Application		
Bypass Reason: Not Applicable for this reporting		
Comments:		

	Item Status:	Status Date:
Bypassed - Item: Health - Actuarial Justification		
Bypass Reason: Not Applicable for this reporting		
Comments:		

	Item Status:	Status Date:
Bypassed - Item: Outline of Coverage		
Bypass Reason: Not Applicable for this reporting		
Comments:		