

SERFF Tracking Number: AMNH-126630727 State: Arkansas
 Filing Company: Standard Life and Accident Insurance Company State Tracking Number: 45967
 Company Tracking Number: AR PSTD 2010
 TOI: MS021 Individual Medicare Supplement - Pre- Standardized Sub-TOI: MS021.000 Medicare Supplement - Pre- Standardized
 Product Name: Pre-Standardized Medicare Supplement Plans
 Project Name/Number: AR PStd 2010/AR PStd 2010

Filing at a Glance

Company: Standard Life and Accident Insurance Company

Product Name: Pre-Standardized Medicare Supplement Plans SERFF Tr Num: AMNH-126630727 State: Arkansas

TOI: MS021 Individual Medicare Supplement - Pre-Standardized SERFF Status: Closed-Approved- Closed State Tr Num: 45967

Sub-TOI: MS021.000 Medicare Supplement - Pre-Standardized Co Tr Num: AR PSTD 2010 State Status: Approved-Closed

Filing Type: Rate
 Author: Andrea Link Reviewer(s): Stephanie Fowler
 Date Submitted: 06/16/2010 Disposition Date: 06/23/2010
 Disposition Status: Approved-Closed

Implementation Date Requested: 08/15/2010
 State Filing Description:

Implementation Date: 08/15/2010

General Information

Project Name: AR PStd 2010
 Project Number: AR PStd 2010
 Requested Filing Mode: Review & Approval
 Explanation for Combination/Other:
 Submission Type: New Submission
 Overall Rate Impact: 17%
 Filing Status Changed: 06/23/2010

Status of Filing in Domicile: Pending
 Date Approved in Domicile:
 Domicile Status Comments:
 Market Type: Individual
 Group Market Size:
 Group Market Type:
 Explanation for Other Group Market Type:
 State Status Changed: 06/23/2010
 Created By: Jerome Belle
 Corresponding Filing Tracking Number:

Deemer Date:
 Submitted By: Andrea Link
 Filing Description:
 Rate Filing – Pre-Standardized Medicare Supplement Policies
 Form: 1240-190

We request a rate increase of 17%. The rate changes will be implemented on the next due date following approval, required policyholder notice, and August 15, 2010 but not before 12 months following any previous rate increase or before 12 months following the date of policy issue.

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Company and Contact

Filing Contact Information

Jerome Belle, Rate Analyst Jerome.Belle@Anico.com
 One Moody Plaza 409-763-1112 [Phone] 2924 [Ext]
 17th Floor 409-621-3800 [FAX]
 Galveston, TX 77550

Filing Company Information

Standard Life and Accident Insurance Company CoCode: 86355 State of Domicile: Texas
 One Moody Plaza Group Code: 408 Company Type: Industry
 Galveston, TX 77550 Group Name: State ID Number:
 (281) 538-4827 ext. [Phone] FEIN Number: 73-0994234

Filing Fees

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

| COMPANY | AMOUNT | DATE PROCESSED | TRANSACTION # |
|--|---------|----------------|---------------|
| Standard Life and Accident Insurance Company | \$50.00 | 06/16/2010 | 37261195 |

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Correspondence Summary

Dispositions

| Status | Created By | Created On | Date Submitted |
|-----------------|------------------|------------|----------------|
| Approved-Closed | Stephanie Fowler | 06/23/2010 | 06/23/2010 |

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 | Stephanie Fowler | 06/21/2010 | 06/21/2010 | Andrea Link | 06/23/2010 | 06/23/2010 |

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Disposition

Disposition Date: 06/23/2010

Implementation Date: 08/15/2010

Status: Approved-Closed

Comment: The negotiated rate increase of 15% has been approved to be implemented on or after August 15, 2010. This approval is subject to the following:

- Increases will not be given more frequently than once in a twelve-month period;
- The insured shall be notified by the insurer of its intention to increase the rate for renewal not less than thirty (30) days prior to the effective date of the renewal.

| Company Name: | Overall % Indicated Change: | Overall % Rate Impact: | Written Premium Change for this Program: | # of Policy Holders Affected for this Program: | Written Premium for this Program: | Maximum % Change (where required): | Minimum % Change (where required): |
|--|-----------------------------------|---------------------------|--|---|---|--|--|
| Standard Life and Accident Insurance Company | 15.000% | 15.000% | \$3,222 | 6 | \$21,477 | 15.000% | 15.000% |

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| Schedule | Schedule Item | Schedule Item Status | Public Access |
|---------------------|----------------------------------|----------------------|---------------|
| Supporting Document | Health - Actuarial Justification | Approved | No |
| Rate (revised) | Rates | Approved | Yes |
| Rate | Rates | Disapproved | Yes |

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Objection Letter

Objection Letter Status Pending Industry Response
Objection Letter Date 06/21/2010
Submitted Date 06/21/2010
Respond By Date 07/21/2010

Dear Jerome Belle,

This will acknowledge receipt of the captioned filing. Based the possible impact a 17% increase would have on the citizens of Arkansas, we would be willing to accept a 15% increase for the plans contained in this filing.

Please feel free to contact me if you have questions.

Sincerely,

Stephanie Fowler

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Response Letter

Response Letter Status Submitted to State
 Response Letter Date 06/23/2010
 Submitted Date 06/23/2010

Dear Stephanie Fowler,

Comments:

Response 1

Comments: We will accept a 15% increase. Please find the revised rates attached.

Changed Items:

No Supporting Documents changed.

No Form Schedule items changed.

Rate/Rule Schedule Item Changes

| Document Name: | Affected Form Numbers: | Rate Action: | Rate Action Information: | Attach Document: |
|-------------------------|------------------------|--------------|---|------------------|
| Rates | 1240-190 | Revised | Previous State Filing Number Percent Rate Change Request 15 | |
| Previous Version | | | | |
| Rates | 1240-190 | Revised | Previous State Filing Number Percent Rate Change Request 17 | |

Sincerely,
 Andrea Link

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Post Submission Update Request Processed On 06/23/2010

Status: Allowed
Created By: Andrea Link
Processed By: Stephanie Fowler
Comments:

Company Rate Information:

Company Name: Standard Life and Accident Insurance Company

| Field Name | Requested Change | Prior Value |
|---|------------------|-------------|
| Overall % Indicated Change | 15.000% | 17.000% |
| Overall % Rate Impact | 15.000% | 17.000% |
| Written Premium Change for this Program | \$3222 | \$3651 |
| Maximum %Change (where required) | 15.000% | 17.000% |
| Minimum %Change (where required) | 15.000% | 17.000% |

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Rate Information

Rate data applies to filing.

Filing Method: SERFF
Rate Change Type: Increase
Overall Percentage of Last Rate Revision: 12.500%
Effective Date of Last Rate Revision: 08/15/2009
Filing Method of Last Filing: SERFF

Company Rate Information

| Company Name: | Overall % Indicated Change: | Overall % Rate Impact: | Written Premium Change for this Program: | # of Policy Holders Affected for this Program: | Written Premium for this Program: | Maximum % Change (where required): | Minimum % Change (where required): |
|--|-----------------------------------|---------------------------|--|---|---|--|--|
| Standard Life and Accident Insurance Company | 15.000% | 15.000% | \$3,222 | 6 | \$21,477 | 15.000% | 15.000% |

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Rate/Rule Schedule

| Schedule Item Status: | Document Name: | Affected Form Numbers: (Separated with commas) | Rate Action: | Rate Action Information: | Attachments |
|------------------------------|----------------|---|--------------|---|----------------------------|
| Approved Rates 06/23/2010 | | 1240-190 | Revised | Previous State Filing Number: Percent Rate Change 15.000 Request: | AR 15% PRES Rates 2010.pdf |

Standard Life and Accident Insurance Company

PRE-STANDARDIZED MEDICARE SUPPLEMENT POLICIES

ARKANSAS

CURRENT ANNUAL PREMIUMS

| Form 1240* | | | |
|------------|-------------|-------------|-------------|
| Issue Age | Plan 1 | Plan 2 | Plan 3 |
| 65+ | \$ 5,018.97 | \$ 4,060.82 | \$ 3,787.04 |

PROPOSED ANNUAL PREMIUMS

| Form 1240* | | | |
|------------|-------------|-------------|-------------|
| Issue Age | Plan 1 | Plan 2 | Plan 3 |
| 65+ | \$ 5,771.82 | \$ 4,669.94 | \$ 4,355.10 |

Modal Factors:

- 0.52 - Semi-Annual
- 0.27 - Quarterly
- 0.10 - Monthly
- 0.0875 - C.O.M

* Premium shown will be discounted 10% for qualified non-smokers.

AR 2010

Standard Life and Accident Insurance Company

PRE-STANDARDIZED MEDICARE SUPPLEMENT POLICIES

ARKANSAS

APPROVAL HISTORY

| FORM M/Y | 1240 % |
|-------------|-----------|
| 1/91 | 10% |
| 1/92 | 20% |
| 1/93 | 12% |
| 3/94 | 15% |
| 4/95 | 7% |
| 6/96 | 15% |
| 9/97 | 12% |
| 12/98 | 20% |
| 05/00 | 11% |
| 06/01 | 13% |
| 05/02 | 15% |
| 08/09 | 12.5% |

APPROVAL DATES, ISSUE YEARS AND POLICIES IN FORCE

| Policy Form | Approval Date | Issue Years | Policies in Force* | |
|----------------|------------------|----------------|--------------------|--------|
| | | | State | Nation |
| 1240-190** | 01/30/1990 | 1990-92 | 6 | 6 |

* One Insured per policy

** Also, includes 1240-190A (Approved 08/29/90) which replaced 1240-190 with respect to new issues

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Superseded Schedule Items

Please note that all items on the following pages are items, which have been replaced by a newer version. The newest version is located with the appropriate schedule on previous pages. These items are in date order with most recent first.

| Creation Date: | Schedule | Schedule Item Name | Replacement Creation Date | Attached Document(s) |
|----------------|---------------|--------------------|---------------------------|-------------------------------------|
| 06/16/2010 | Rate and Rule | Rates | 06/23/2010 | AR PRES Rates 2010.pdf (Superseded) |

Standard Life and Accident Insurance Company

PRE-STANDARDIZED MEDICARE SUPPLEMENT POLICIES

ARKANSAS

CURRENT ANNUAL PREMIUMS

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|------------|-------------|-------------|-------------|
| Issue Age | Plan 1 | Plan 2 | Plan 3 |
| 65+ | \$ 5,018.97 | \$ 4,060.82 | \$ 3,787.04 |

PROPOSED ANNUAL PREMIUMS

| Form 1240* | | | |
|------------|-------------|-------------|-------------|
| Issue Age | Plan 1 | Plan 2 | Plan 3 |
| 65+ | \$ 5,872.19 | \$ 4,751.16 | \$ 4,430.84 |

Modal Factors:

- 0.52 - Semi-Annual
- 0.27 - Quarterly
- 0.10 - Monthly
- 0.0875 - C.O.M

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AR 2010

Standard Life and Accident Insurance Company

PRE-STANDARDIZED MEDICARE SUPPLEMENT POLICIES

ARKANSAS

APPROVAL HISTORY

| FORM M/Y | 1240 % |
|-------------|-----------|
| 1/91 | 10% |
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| 1/93 | 12% |
| 3/94 | 15% |
| 4/95 | 7% |
| 6/96 | 15% |
| 9/97 | 12% |
| 12/98 | 20% |
| 05/00 | 11% |
| 06/01 | 13% |
| 05/02 | 15% |
| 08/09 | 12.5% |

APPROVAL DATES, ISSUE YEARS AND POLICIES IN FORCE

| Policy Form | Approval Date | Issue Years | Policies in Force* | |
|----------------|------------------|----------------|--------------------|--------|
| | | | State | Nation |
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