

SERFF Tracking Number: MGCA-126654207 State: Arkansas  
Filing Company: The Chesapeake Life Insurance Company State Tracking Number: 45836  
Company Tracking Number: CH-26114-IP (01/10) AR 201006 AR CHESAPEAKE 15291  
TOI: H111 Individual Health - Disability Income Sub-TOI: H111.004 Other  
Product Name: CH-26114-IP  
Project Name/Number: /

## Filing at a Glance

Company: The Chesapeake Life Insurance Company

Product Name: CH-26114-IP

SERFF Tr Num: MGCA-126654207 State: Arkansas

TOI: H111 Individual Health - Disability Income SERFF Status: Closed-Approved-  
Closed State Tr Num: 45836

Sub-TOI: H111.004 Other

Co Tr Num: CH-26114-IP (01/10) State Status: Approved-Closed  
AR 201006 AR CHESAPEAKE  
15291

Filing Type: Rate

Reviewer(s): Rosalind Minor

Authors: EDS EDSSupport, Sergei Mordovine, Yan Yuan, Eliseo Rodriguez, David Beimesch, Tony Huang, Chanel Orallo, Sommay Khounlo, Ashley Toner, Jennifer Schilb

Disposition Date: 06/07/2010

Date Submitted: 06/01/2010

Disposition Status: Approved-Closed

Implementation Date Requested: On Approval

Implementation Date:

State Filing Description:

## General Information

Project Name:

Status of Filing in Domicile:

Project Number:

Date Approved in Domicile:

Requested Filing Mode: Review & Approval

Domicile Status Comments:

Explanation for Combination/Other:

Market Type: Individual

Submission Type: New Submission

Group Market Size:

Overall Rate Impact:

Group Market Type:

Filing Status Changed: 06/07/2010

Explanation for Other Group Market Type:

State Status Changed: 06/07/2010

Deemer Date:

Created By: Eliseo Rodriguez

Submitted By: Eliseo Rodriguez

Corresponding Filing Tracking Number:

Filing Description:

We are extending maximum issue age from 55 to 60.

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## Company and Contact

### Filing Contact Information

David Beimesch, nrhact-comp@healthmarkets.com  
 9151 boulevard 26 817-255-3752 [Phone]  
 north richland hills, TX 76180

### Filing Company Information

The Chesapeake Life Insurance Company CoCode: 61832 State of Domicile: Oklahoma  
 9151 Boulevard 26 Group Code: 264 Company Type:  
 North Richland Hills, TX 76180 Group Name: State ID Number:  
 (817) 255-3100 ext. [Phone] FEIN Number: 52-0676509

## Filing Fees

Fee Required? Yes  
 Fee Amount: \$25.00  
 Retaliatory? Yes  
 Fee Explanation:  
 Per Company: No

COMPANY	AMOUNT	DATE PROCESSED	TRANSACTION #
The Chesapeake Life Insurance Company	\$25.00	06/01/2010	36922239
The Chesapeake Life Insurance Company	\$25.00	06/02/2010	36949750

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## Correspondence Summary

### Dispositions

Status	Created By	Created On	Date Submitted
Approved-Closed	Rosalind Minor	06/07/2010	06/07/2010

### 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	Rosalind Minor	06/02/2010	06/02/2010	Eliseo Rodriguez	06/02/2010	06/02/2010

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## Disposition

Disposition Date: 06/07/2010

Implementation Date:

Status: Approved-Closed

Comment:

Rate data does NOT apply to filing.

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<b>Schedule</b>	<b>Schedule Item</b>	<b>Schedule Item Status</b>	<b>Public Access</b>
<b>Supporting Document</b>	Health - Actuarial Justification	Approved-Closed	No
<b>Supporting Document</b>	Supporting Documents	Approved-Closed	Yes
<b>Rate</b>	CH-26114-IP (0110) AR Rates.pdf	Approved-Closed	Yes

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## Objection Letter

Objection Letter Status Pending Industry Response

Objection Letter Date 06/02/2010

Submitted Date 06/02/2010

Respond By Date

Dear David Beimesch,

This will acknowledge receipt of the captioned filing.

Objection 1

- CH-26114-IP (0110) AR Rates.pdf , [] (Rate)

Comment:

Under our Rule and Regulation 57, Subsection II, Category "B", the amount of fee for the filing/review of each Life and/or accident and health rate filing is \$50.00 per form.

Please submit an additional \$25.00 for this filing.

Please feel free to contact me if you have questions.

Sincerely,

Rosalind Minor

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## Response Letter

Response Letter Status Submitted to State  
Response Letter Date 06/02/2010  
Submitted Date 06/02/2010

Dear Rosalind Minor,

### Comments:

### Response 1

Comments: The additional \$25.00 has been submitted.

### Related Objection 1

Applies To:

- CH-26114-IP (0110) AR Rates.pdf , [] (Rate)

Comment:

Under our Rule and Regulation 57, Subsection II, Category "B", the amount of fee for the filing/review of each Life and/or accident and health rate filing is \$50.00 per form.

Please submit an additional \$25.00 for this filing.

### Changed Items:

No Supporting Documents changed.

No Form Schedule items changed.

No Rate/Rule Schedule items changed.

Thank you.

Sincerely,

Ashley Toner, Chanel Orallo, David Beimesch, EDS EDSSupport, Eliseo Rodriguez, Jennifer Schilb, Sergei Mordovine, Sommay Khounlo, Tony Huang, Yan Yuan

## Rate/Rule Schedule

SERFF Tracking Number: MGCA-126654207 State: Arkansas  
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Schedule Item Status:	Document Name:	Affected Form Numbers: (Separated with commas)	Rate Action:	Rate Action Information:	Attachments
Approved-Closed 06/07/2010	CH-26114-IP (0110) AR Rates.pdf		New		CH-26114-IP (0110) AR Rates.pdf

# The Chesapeake Life Insurance Company

Administration Office: P.O. Box 982010, North Richland Hills, TX 76182-8010

## Accident-Only Disability Income Insurance Policy

CH-26114-IP (01/10) AR

Formula
Round( AgeSex x Base x Inflation x Benefit Amount x Benefit Period x Elimination Period x Occupational Class ,2)

Multiply the Base Rate by 3 for quarterly rates, 6 for semi-annual, and 12 for annual premium rates.

Inflation
1.000000000

A billing fee of up to \$5 may be charged on direct bill modes. A one-time application fee of up to \$30 may be applicable.

Base	Factor
Base	6.910

Benefit Options	Factor
Benefit Period 6 months	0.650000
Benefit Period 12 months	0.850000
Benefit Period 18 months	1.000000
Benefit Period 24 months	1.100000
Benefit Period 36 months	1.250000
Benefit Period 48 months	1.450000
Benefit Period 60 months	1.600000
Benefit Amount 500	1.125000
Benefit Amount 1000	1.900000
Benefit Amount 1500	2.900000
Benefit Amount 2000	3.950000
Benefit Amount 2500	5.000000
Occupational Class White collar	0.770000
Occupational Class Blue collar	1.925000
Elimination Period 14 Days Male	1.100000
Elimination Period 14 Days Female	0.800000
Elimination Period 30 Days Male	0.700000
Elimination Period 30 Days Female	0.600000

Age*	Factor	Gender	Adult/Dep
18 - 55	1.0000	Female	Adult
56 - 60	1.2000	Female	Adult
18 - 55	1.0000	Male	Adult
56 - 60	1.2000	Male	Adult

\*Issue Age Rating

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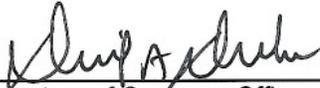
## Supporting Document Schedules

	Item Status:	Status
<b>Satisfied - Item:</b> Supporting Documents	Approved-Closed	06/07/2010
<b>Comments:</b>		
<b>Attachments:</b>		
CH-26114-IP (0110) AR Certificate of Compliance.pdf		
CH-26114-IP (0110) AR Cover Letter.pdf		
CH-26114-IP (0110) AR Rate History.pdf		

Certification of Compliance with  
Arkansas Rule and Regulation 19

Insurer: NAIC # 264-61832  
Form Number(s): CH-26114-IP (01/10) AR

I hereby certify that the filing above meets all applicable Arkansas requirements including the requirements of Rule and Regulation 19.



\_\_\_\_\_  
Signature of Company Officer

Derrick Duke  
\_\_\_\_\_  
Name

5/25/2010  
\_\_\_\_\_  
Date



**The Chesapeake  
Life Insurance Company**

Home Office: Oklahoma City, OK

9151 Boulevard 26  
N Richland Hills, TX 76180  
www.chesapeakelife.com  
Phone: 800.729.2302  
Fax: 817.255.8274

5/25/2010

Ms. Rosalind Minor  
Arkansas Insurance Department  
1200 West Third Street  
Little Rock AR 72201-1904

**RE: The Chesapeake Life Insurance Company  
Individual Policy Form Rate Change Filing for:  
Accident-Only Disability Income Insurance Policy  
Policy Form Number: CH-26114-IP (01/10) AR  
Company NAIC # 264-61832  
Company FEIN # 52-0676509**

Dear Ms. Minor,

For your approval, we are submitting filing documents in support for the added issue age rates for age 56 through 60. We are increasing our issue age limit from age 55 to age 60, therefore, making this product more available to the public. The new issue age rates for age 56 through 60 are added to our previously approved rates for this form.

Currently, there are 0 policies in force in your state under this form.

This rate filing has been filed as "File and Use" with our domicile state of Oklahoma. Please let us know if you have any questions or need additional information regarding this filing. Thank you in advance for your review.

Sincerely,

Chanél Orallo  
Actuarial Analyst  
Phone: (800) 729-2302 x6427  
Fax: (817)255-8274  
Email: NRHAct-Comp@HealthMarkets.com

Enclosures

**CH-26114-IP (01/10) AR**  
Individual Accident-Only Disability Income Policy

Effective Date	Rate Increase/Decrease
No Rate History	