

SERFF Tracking Number: UHLC-126693988 State: Arkansas
Filing Company: UnitedHealthcare Insurance Company State Tracking Number: 46059
Company Tracking Number: AS2591ST
TOI: MS08G Group Medicare Supplement - Standard Sub-TOI: MS08G.001 Plan A 2010
Plans 2010
Product Name: Medicare Supplement
Project Name/Number: Print Advertising/AS2591ST

Filing at a Glance

Company: UnitedHealthcare Insurance Company

Product Name: Medicare Supplement SERFF Tr Num: UHLC-126693988 State: Arkansas
TOI: MS08G Group Medicare Supplement - Standard Plans 2010 SERFF Status: Closed-Filed-Closed State Tr Num: 46059
Sub-TOI: MS08G.001 Plan A 2010 Co Tr Num: AS2591ST State Status: Filed-Closed
Filing Type: Advertisement Reviewer(s): Stephanie Fowler
Author: Tammy Frederick Disposition Date: 07/16/2010
Date Submitted: 06/25/2010 Disposition Status: Filed-Closed
Implementation Date Requested: On Approval Implementation Date:

State Filing Description:

General Information

Project Name: Print Advertising Status of Filing in Domicile: Not Filed
Project Number: AS2591ST Date Approved in Domicile:
Requested Filing Mode: File & Use Domicile Status Comments:
Explanation for Combination/Other: Market Type: Group
Submission Type: New Submission Group Market Size: Large
Overall Rate Impact: Group Market Type: Association
Filing Status Changed: 07/16/2010 Explanation for Other Group Market Type:
State Status Changed: 07/16/2010
Deemer Date: Created By: Tammy Frederick
Submitted By: Tammy Frederick Corresponding Filing Tracking Number:
AS2591ST

Filing Description:

RE: UnitedHealthcare Insurance Company
AARP Medicare Supplement Advertising Material
Print Advertising
NAIC No: 0707-79413
File No: AS2591ST (PLEASE USE THIS NUMBER IN ALL CORRESPONDENCE)

Dear Commissioner:

SERFF Tracking Number: UHLC-126693988 State: Arkansas
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We enclose for your information and review, proof copies of advertising for use in connection with the AARP group health insurance program. This advertising is new and does not replace any material previously submitted to the Department.

These Invitations to Inquire are Medicare Supplement Advertisements and will be used in various newspapers and magazines. The Policy Form Number GRP79171 GPS-1 appears on AS2591ST.

The business reply card, MS2519ST, is also attached to the print advertisement for your review.

We trust the enclosed forms are in order and look forward to your prompt acknowledgment of this filing. If you have any further questions you can contact me at 215-902-8444. If you prefer, you may also send a facsimile to me at Fax: 215-902-8813 or send an email to Susan_J_Cipollo@uhc.com.

Sincerely,

Susan J. Cipollo
Director Marketing Compliance

SJC:tmf
Enclosures

LIST OF ENCLOSURES
MEDICARE SUPPLEMENT
Print Advertising
2010

AS2591ST - Print Advertisement
MS2519ST - Business Reply Card

Company and Contact

Filing Contact Information

Susan Cipollo, Director
680 Blair Mill Rd.
Horsham, PA 19044

Susan_J_Cipollo@uhc.com
215-902-8444 [Phone]
215-902-8813 [FAX]

Filing Company Information

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UnitedHealthcare Insurance Company CoCode: 79413 State of Domicile: Connecticut
 185 Asylum Street Group Code: 707 Company Type: Life and Health
 Hartford, CT 06103 Group Name: State ID Number:
 (860) 702-5000 ext. [Phone] FEIN Number: 36-2739571

Filing Fees

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

COMPANY	AMOUNT	DATE PROCESSED	TRANSACTION #
UnitedHealthcare Insurance Company	\$100.00	06/25/2010	37544110

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Correspondence Summary

Dispositions

Status	Created By	Created On	Date Submitted
Filed-Closed	Stephanie Fowler	07/16/2010	07/16/2010

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Plans 2010
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Disposition

Disposition Date: 07/16/2010

Implementation Date:

Status: Filed-Closed

Comment:

Rate data does NOT apply to filing.

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Form Schedule

Lead Form Number: AS2591ST

Schedule Item	Form Number	Form Type	Form Name	Action	Action Specific Data	Readability	Attachment
Filed 07/16/2010	AS2591ST	Advertising	Print Advertisement	Initial		45.000	AS2591ST.pdf
Filed 07/16/2010	MS2519ST	Advertising	Business Reply Card	Initial		45.000	MS2519ST.pdf

**Attention Area
Residents**

**Consider a Medicare supplement insurance plan
with a competitive rate.**



Medicare Supplement Plans
insured by **UnitedHealthcare
Insurance Company**



**Finding supplemental health insurance that fits your budget
isn't a game. Choose a plan that offers competitive rates.**

An AARP® Medicare Supplement Insurance Plan, insured by UnitedHealthcare Insurance Company, could save you up to **THOUSANDS** in out-of-pocket expenses.*

**Request your FREE information kit today, even
if you're not an AARP member.**

Remember, you must be a member to enroll.

**Call toll-free [1-XXX-XXX-XXXX], ext. [XXX]
(TTY: 711) or mail in the attached card.**

AS2591ST

Give this card to a friend.

*Medicare Payment Advisory Commission (MedPAC). A Data Book: Healthcare spending and the Medicare Program, June 2009. <http://www.medpac.gov/documents/Jun09DataBookEntireReport.pdf> (8 Mar, 2010) p. 63,65.

The AARP Medicare Supplement Insurance Plans carry the AARP name and UnitedHealthcare pays a royalty fee to AARP for use of the AARP intellectual property. Amounts paid are used for the general purpose of AARP and its members. Neither AARP nor its affiliate is the insurer.

YES! I'd like to know more about AARP® Medicare Supplement Insurance Plans, including benefits, costs, eligibility requirements, exclusions and limitations.

Return this card or call toll-free: [1-XXX-XXX-XXXX] ext. [XXX] (TTY: 711)

Member Name: _____

Date of Birth: _____ (MR., MRS., MS.) PLEASE PRINT
Medicare (Part B) Effective Date: _____

Spouse Name: _____

Date of Birth: _____ (MR., MRS., MS.) PLEASE PRINT
Medicare (Part B) Effective Date: _____

Address: _____

City: _____ State: _____ ZIP: _____

My AARP Membership number is (not required): _____

Phone: (____) _____ - _____

E-mail Address: _____

**If you provide your phone number or email address, a representative may contact you.
This is a solicitation of insurance. An agent/producer may contact you.**

Insured by UnitedHealthcare Insurance Company, Horsham, PA (UnitedHealthcare Insurance Company of New York, Islandia, NY for New York residents).

AARP does not employ or endorse agents, brokers, producers, representatives or advisors.

Not connected with or endorsed by the U.S. Government or the Federal Medicare Program.

YES! I'd like to know more about AARP® Medicare Supplement Insurance Plans, including benefits, costs, eligibility requirements, exclusions and limitations.

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Don't play games with your Medicare supplement rates.



With so many Medicare supplement insurance plans out there, it makes sense to choose one with competitive rates so you can make the most of your dollars. AARP® Medicare Supplement Insurance Plans, insured by UnitedHealthcare Insurance Company (UnitedHealthcare Insurance Company of New York for New York residents), have a selection of plans that could meet your needs and budget. And, like all standardized plans, they offer:

- The freedom to choose any doctor and hospital that accept Medicare patients
- Absolutely no referrals needed to see specialists

Plus, they:

- Are the only Medicare supplement insurance plans that carry the AARP name
- Offer the stability of UnitedHealthcare Insurance Company*
- Feature competitive rates available only to AARP members

Discover a plan with competitive rates. Request your FREE information kit – even if you're not an AARP member (you must be a member to enroll). And feel free to tell a friend. There's no obligation.

Call toll-free today.
[1-XXX-XXX-XXXX] ext. [XXX]
(TTY: 711)

Or, mail the attached reply card.



Consider a plan with a competitive rate.

*In 2009, UnitedHealthcare Insurance Company was rated "A-stable" by A.M. Best, an independent organization that evaluates insurance company financial performance.

AARP does not recommend health related products, services, insurance and programs. You are strongly encouraged to evaluate your needs.

Insured by UnitedHealthcare Insurance Company, Horsham, PA (UnitedHealthcare Insurance Company of New York, Islandia, NY for New York residents). Policy Form No. GRP 79171 GPS-1 (G-36000-4). In some states, plans may be available to persons eligible for Medicare by reason of disability. All plans may not be available in your state/area.

Not connected with or endorsed by the U.S. Government or the Federal Medicare Program.

This is a solicitation of insurance. An agent/producer may contact you.

AARP and its affiliate are not insurance agencies or carriers and do not employ or endorse insurance agents, brokers, producers, representatives or advisors.

Call to receive complete information including benefits, costs, eligibility requirements, exclusions and limitations.

AARP Medicare Supplement Plans
insured by UnitedHealthcare
Insurance Company



NO POSTAGE
NECESSARY
IF MAILED
IN THE
UNITED STATES



BUSINESS REPLY MAIL

FIRST-CLASS MAIL PERMIT NO. 45 LEHIGH VALLEY, PA

POSTAGE WILL BE PAID BY ADDRESSEE

**UNITEDHEALTHCARE
INSURANCE COMPANY**
P.O. BOX 25601
LEHIGH VALLEY, PA 18003-9905



MS2519ST

AARP Medicare Supplement Plans
insured by UnitedHealthcare
Insurance Company



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BUSINESS REPLY MAIL

FIRST-CLASS MAIL PERMIT NO. 45 LEHIGH VALLEY, PA

POSTAGE WILL BE PAID BY ADDRESSEE

**UNITEDHEALTHCARE
INSURANCE COMPANY**
P.O. BOX 25601
LEHIGH VALLEY, PA 18003-9905



MS2519ST

YES! I'd like to know more about AARP® Medicare Supplement Insurance Plans, including benefits, costs, eligibility requirements, exclusions and limitations.

Return this card or call toll-free: [1-XXX-XXX-XXXX] ext. [XXX] (TTY: 711)

Member Name: _____

(MR., MRS., MS.) PLEASE PRINT

Date of Birth: _____ Medicare (Part B) Effective Date: _____

MM/DD/YY

MM/YY

Spouse Name: _____

(MR., MRS., MS.) PLEASE PRINT

Date of Birth: _____ Medicare (Part B) Effective Date: _____

MM/DD/YY

MM/YY

Address: _____

City: _____ State: _____ ZIP: _____

My AARP Membership number is (not required): _____

Phone: (_____) _____ - _____

E-mail Address: _____

If you provide your phone number or email address, a representative may contact you. This is a solicitation of insurance. An agent/producer may contact you.

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MS2519ST