

SERFF Tracking Number: UNAM-126714793 State: Arkansas  
Filing Company: Union Bankers Insurance Company State Tracking Number: 46170  
Company Tracking Number:  
TOI: LTC06 Long Term Care - Other Sub-TOI: LTC06.000 Long Term Care - Other  
Product Name: LONG TERM CARE CLAIMS DENIED 09  
Project Name/Number: /

## Filing at a Glance

Company: Union Bankers Insurance Company

Product Name: LONG TERM CARE CLAIMS DENIED 09 SERFF Tr Num: UNAM-126714793 State: Arkansas

TOI: LTC06 Long Term Care - Other

SERFF Status: Closed-Filed

State Tr Num: 46170

Sub-TOI: LTC06.000 Long Term Care - Other

Co Tr Num:

State Status: Closed

Filing Type: Advertisement

Reviewer(s): Harris Shearer, Marie Bennett

Author: Alicia Phillips-Guiler

Disposition Date: 07/19/2010

Date Submitted: 07/09/2010

Disposition Status: Filed

Implementation Date Requested:

Implementation Date:

State Filing Description:

## General Information

Project Name:

Status of Filing in Domicile:

Project Number:

Date Approved in Domicile:

Requested Filing Mode:

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: 07/19/2010

Explanation for Other Group Market Type:

State Status Changed: 07/19/2010

Deemer Date:

Created By: Alicia Phillips-Guiler

Submitted By: Alicia Phillips-Guiler

Corresponding Filing Tracking Number:

Filing Description:

Long Term Care Report of Denied Claims – Reporting Year 2009

Dear Sir/Madam:

Attached is a copy of the Claims Denial Reporting Form Long-Term Care Insurance for Arkansas for reporting year 2009.

Should you have any questions, please contact me at 407-444-4355 or [aguiler@universalamerican.com](mailto:aguiler@universalamerican.com)

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Sincerely,

Alicia P. Guiler  
Senior Compliance Analyst

## Company and Contact

### Filing Contact Information

Alicia Guiler, AGuiler@uafc.com  
P.O. Box 958465 407-628-1776 [Phone] 8334 [Ext]  
Lake Mary, FL 32795-8465 407-628-9021 [FAX]

### Filing Company Information

Union Bankers Insurance Company CoCode: 69701 State of Domicile: Texas  
1001 Heathrow Park Lane Group Code: 953 Company Type:  
Suite 5001 Group Name: State ID Number:  
Lake Mary, FL 32746 FEIN Number: 75-0860066  
(407) 995-8000 ext. [Phone]

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## Filing Fees

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

COMPANY	AMOUNT	DATE PROCESSED	TRANSACTION #
Union Bankers Insurance Company	\$0.00	07/09/2010	

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## Correspondence Summary

### Dispositions

Status	Created By	Created On	Date Submitted
Filed	Marie Bennett	07/19/2010	07/19/2010

*SERFF Tracking Number:* UNAM-126714793      *State:* Arkansas  
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*Product Name:* LONG TERM CARE CLAIMS DENIED 09  
*Project Name/Number:* /

## **Disposition**

Disposition Date: 07/19/2010

Implementation Date:

Status: Filed

Comment:

Rate data does NOT apply to filing.

SERFF Tracking Number: UNAM-126714793

State: Arkansas

Filing Company: Union Bankers Insurance Company

State Tracking Number: 46170

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TOI: LTC06 Long Term Care - Other

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**Schedule**

**Schedule Item**

**Schedule Item Status Public Access**

**Supporting Document**

LTC CLAIMS DENIED 09

No

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State: Arkansas

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TOI: LTC06 Long Term Care - Other

Sub-TOI: LTC06.000 Long Term Care - Other

Product Name: LONG TERM CARE CLAIMS DENIED 09

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## Supporting Document Schedules

**Item Status:**

**Status**

**Date:**

**Satisfied - Item:** LTC CLAIMS DENIED 09

**Comments:**

**Attachment:**

AR LTC CLAIMS DENIED 09 UBIC.pdf



1001 Heathrow Park Lane, Suite 5001  
Lake Mary, FL 32746  
800 824 3577 phone  
407 995 8029 fax

July 7, 2010

Life and Health Division  
Arkansas Department of Insurance  
1200 W. Third Street  
Little Rock, AR 72201-1904

RE: **UNION BANKERS INSURANCE COMPANY** NAIC# 69701  
Long Term Care Report of Denied Claims – Reporting Year 2009

Dear Sir/Madam:

Attached is a copy of the Claims Denial Reporting Form Long-Term Care Insurance for Arkansas for reporting year 2009.

Should you have any questions, please contact me at 407-444-4355 or [aguiler@universalamerican.com](mailto:aguiler@universalamerican.com)

Sincerely,

A handwritten signature in cursive script that reads "Alicia P. Guiler".

Alicia P. Guiler  
Senior Compliance Analyst

**Claims Denial Reporting Form Long-Term Care Insurance  
For the State of Arkansas  
For the Reporting Year 2009**

Union Bankers Insurance Company  
1001 Heathrow Park Lane  
Lake Mary FL 32746

NAIC No. 69701

Contact Person: Alicia P. Guiler, Senior Compliance Analyst  
Phone Number: 407-444-4355

Line of Business: Individual

The purpose of this form is to report all long-term care claim denials under in force long-term care insurance policies. "Denied" means a claim that is not paid for any reason other than for claims not paid for failure to meet the waiting period or because of an applicable preexisting condition.

	State Data	Nationwide Data <sup>1</sup>
1. Total Number of Long-Term Care Claims Reported	62	8,585
2. Total Number of Long-Term Care Claims Denied/ Not Paid	2	128
3. Number of Claims Not Paid due to Preexisting Condition Exclusion	0	0
4. Number of Claims Not Paid due to Waiting (Elimination) Period Not Met	2	43
5. Net Number of Long-Term Care Claims Denied for Reporting Purposes (Line 2 Minus Line 3 Minus Line 4)	0	85
6. Percentage of Long-Term Care Claims Denied of Those Reported (Line 5 Divided By Line 1)	4%	1%
7. Number of Long-Term Care Claims Denied due to:		
8. * Long-Term Care Services Not Covered under the Policy <sup>2</sup>	0	27
9. * Provider/Facility Not Qualified under the Policy <sup>3</sup>	0	0
10. * Benefit Eligibility Criteria Not Met <sup>4</sup>	0	33
11. Other	0	25

<sup>1</sup> The nationwide data may be viewed as a more representative and credible indicator where the data for claims reported and denied for your state are small in number.

<sup>2</sup> Example – home health care claim filed under a nursing home only policy.

<sup>3</sup> Example – a facility that does not meet the minimum level of care requiring licensing requirements or the licensing requirements as outlined in the policy.

<sup>4</sup> Example – a benefit trigger not met, certification by a licensed health care practitioner not provided, no plan of care.