

SERFF Tracking Number: WAKE-126685611 State: Arkansas  
Filing Company: USAbLe Life State Tracking Number: 46003  
Company Tracking Number: KEGUSABLEC3C4AR  
TOI: H07I Individual Health - Specified Disease - Sub-TOI: H07I.002A Dread Disease - Cancer Only  
Limited Benefit  
Product Name: Cancer C3C4 Rate 2011  
Project Name/Number: USAbLe Life Insurance Company/KEGUSABLEC3C4AR

## Filing at a Glance

Company: USAbLe Life

Product Name: Cancer C3C4 Rate 2011 SERFF Tr Num: WAKE-126685611 State: Arkansas  
TOI: H07I Individual Health - Specified Disease SERFF Status: Closed-Approved- State Tr Num: 46003  
- Limited Benefit Closed  
Sub-TOI: H07I.002A Dread Disease - Cancer Co Tr Num: KEGUSABLEC3C4AR State Status: Approved-Closed  
Only  
Filing Type: Rate

Authors: Toni Hess, Katlyn  
Gorman, Austin Taylor, Michelle  
Miller, Ben Cohen

Reviewer(s): Rosalind Minor  
Disposition Date: 07/09/2010

Date Submitted: 06/21/2010

Disposition Status: Approved-  
Closed

Implementation Date Requested: On Approval  
State Filing Description:

Implementation Date:

## General Information

Project Name: USAbLe Life Insurance Company  
Project Number: KEGUSABLEC3C4AR  
Requested Filing Mode: Review & Approval  
Explanation for Combination/Other:  
Submission Type: New Submission  
Overall Rate Impact: 25%  
Filing Status Changed: 07/09/2010

Status of Filing in Domicile: Not Filed  
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: 07/09/2010  
Created By: Katlyn Gorman  
Corresponding Filing Tracking Number:

Deemer Date:  
Submitted By: Katlyn Gorman  
Filing Description:  
RE: NAIC NUMBER: 876-94358/USABLE LIFE

SUBMISSION  
RATE INCREASE FILING  
CANCER POLICIES

SERFF Tracking Number: WAKE-126685611 State: Arkansas  
 Filing Company: USable Life State Tracking Number: 46003  
 Company Tracking Number: KEGUSABLEC3C4AR  
 TOI: H071 Individual Health - Specified Disease - Limited Benefit Sub-TOI: H071.002A Dread Disease - Cancer Only  
 Product Name: Cancer C3C4 Rate 2011  
 Project Name/Number: USable Life Insurance Company/KEGUSABLEC3C4AR  
 FORM NUMBERS: CSD3-POL(2-92), CSD4-POL(2-92)

Wakely Actuarial Services, Inc. has been authorized to file the above captioned filing on behalf of USable Life.

The Company is requesting a 25.0% rate increase in premiums. The proposed effective date for this rate increase is 02/01/2011.

We appreciate the Department's time and consideration in the review of this filing for USable Life.

## Company and Contact

### Filing Contact Information

Katlyn Gorman, Administrative Assistant katlyn.gorman@wakelyactuarial.com  
 34125 US Highway 19 North 888-590-5504 [Phone] 2100 [Ext]  
 Suite 310 727-373-4559 [FAX]  
 Palm Harbor, FL 34684

### Filing Company Information

(This filing was made by a third party - WAS01)

USable Life	CoCode: 94358	State of Domicile: Arkansas
320 W. Capitol	Group Code: 876	Company Type:
P. O. Box 1650	Group Name:	State ID Number:
Little Rock, AR 72203-1650	FEIN Number: 71-0505232	
(501) 375-7200 ext. [Phone]		

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## Filing Fees

Fee Required?	Yes
Fee Amount:	\$100.00
Retaliatory?	Yes
Fee Explanation:	\$50.00 per rate filing X 2
Per Company:	No

COMPANY	AMOUNT	DATE PROCESSED	TRANSACTION #
USable Life	\$100.00	06/21/2010	37349800

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## Correspondence Summary

### Dispositions

Status	Created By	Created On	Date Submitted
Approved-Closed	Rosalind Minor	07/09/2010	07/09/2010

### 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	06/29/2010	06/29/2010	Katlyn Gorman	07/09/2010	07/09/2010

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## Disposition

Disposition Date: 07/09/2010

Implementation Date:

Status: Approved-Closed

Comment:

We have approved a 15% level rate increase on your submission. The approval is subject to the following conditions:

1. Rate increases will not be given prior to the first annual anniversary date of any policy.
2. After the first annual anniversary date of any policy, increases will not be given more frequently than once in a twelve (12) month period.
3. All increases in rates, other than a change in age or an individual moving to another geographical area, must be submitted to our Department for approval.

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):
USable Life	25.000%	25.000%	\$390,212	514	\$1,560,848	25.000%	25.000%

SERFF Tracking Number: WAKE-126685611 State: Arkansas  
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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>	Authorization Letter	Approved-Closed	Yes
<b>Supporting Document</b>	Actuarial Response to 6/29/10 Objection	Approved-Closed	No
<b>Rate (revised)</b>	Rate Page	Approved-Closed	Yes
<b>Rate</b>	Rate Page	Replaced	Yes

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## Objection Letter

Objection Letter Status Pending Industry Response  
Objection Letter Date 06/29/2010  
Submitted Date 06/29/2010

Respond By Date

Dear Katlyn Gorman,

This will acknowledge receipt of the captioned filing.

Objection 1

- Health - Actuarial Justification (Supporting Document)

Comment:

Our Department has been working with the insurance companies on the rate increases which they are submitting to our Department.

The majority of the companies have been filing rate increase request in excess of 15% on cancer/specified disease policies. Our Department is requesting that the companies consider no more than a 15% increase due to substantial increases in past years and/or the impact that another increase would have on the insureds during this difficult economic time.

If you wish to accept the 15%, please provide us with a revised actuarial memorandum and rates.

We appreciate your understanding and cooperation.

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 07/09/2010  
Submitted Date 07/09/2010

Dear Rosalind Minor,

### Comments:

This is in response to your objection letter dated June 29, 2010.

### Response 1

Comments: Please see the attached actuarial response.

### Related Objection 1

Applies To:

- Health - Actuarial Justification (Supporting Document)

Comment:

Our Department has been working with the insurance companies on the rate increases which they are submitting to our Department.

The majority of the companies have been filing rate increase request in excess of 15% on cancer/specified disease policies. Our Department is requesting that the companies consider no more than a 15% increase due to substantial increases in past years and/or the impact that another increase would have on the insureds during this difficult economic time.

If you wish to accept the 15%, please provide us with a revised actuarial memorandum and rates.

We appreciate your understanding and cooperation.

### Changed Items:

#### Supporting Document Schedule Item Changes

Satisfied -Name: Actuarial Response to 6/29/10 Objection

Comment:

SERFF Tracking Number: WAKE-126685611 State: Arkansas  
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No Form Schedule items changed.

### Rate/Rule Schedule Item Changes

Document Name:	Affected Form Numbers:	Rate Action:	Rate Action Information:	Attach Document:
Rate Page	CSC3-POL(2-92), CSC4-POL(2-92)	New	Previous State Filing Number	0
<b>Previous Version</b>				
Rate Page	CSC3-POL(2-92), CSC4-POL(2-92)	New	Previous State Filing Number	0

Thank you,  
Katlyn Gorman

Sincerely,  
Austin Taylor, Ben Cohen, Katlyn Gorman, Michelle Miller, Toni Hess

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## Rate Information

Rate data applies to filing.

**Filing Method:** SERFF  
**Rate Change Type:** Increase  
**Overall Percentage of Last Rate Revision:** 25.000%  
**Effective Date of Last Rate Revision:** 02/01/2010  
**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):
USable Life	25.000%	25.000%	\$390,212	514	\$1,560,848	25.000%	25.000%

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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- Closed 07/09/2010	Rate Page	CSC3-POL(2-92),New CSC4-POL(2-92)			C3C4 AR - Exhibit A rev.pdf

## USABLE LIFE INSURANCE COMPANY (NAIC #94358)

### Actuarial Memorandum for Individual A&H Rate Increase Unlimited Cancer Plans with Chemotherapy Benefits

#### Exhibit A - Current and Proposed Monthly Premiums

#### I. Policy Form CSD3-POL(2-92)

<u>Coverage Type</u>	<u>Current Premium</u>	<u>Proposed Premium</u>
Individual	\$ 224.42	\$ 258.08
One Parent	\$ 269.38	\$ 309.80
Family	\$ 414.14	\$ 476.26

#### II. Policy Form CSD4-POL(2-92)

<u>Coverage Type</u>	<u>Current Premium</u>	<u>Proposed Premium</u>
Individual	\$ 159.34	\$ 183.24
One Parent	\$ 191.28	\$ 219.98
Family	\$ 307.54	\$ 353.68

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## Supporting Document Schedules

	Item Status:	Status
<b>Satisfied - Item:</b> Authorization Letter	Approved-Closed	<b>Date:</b> 07/09/2010
<b>Comments:</b>		
<b>Attachment:</b>		
Authorization Letter.pdf		



**Hank Reed**  
**Vice President Group Underwriting**

June 8, 2010

To Whom It May Concern:

This letter authorizes Wakely Actuarial Services, Inc. to make filings on behalf of US Able Life for the CancerCare III, CancerCare IV, CancerCare Series and CancerCare Silver products in your state. This letter is effective as of June 1, 2010 and will continue through June 30, 2011.

Sincerely,

A handwritten signature in black ink that reads "Hank Reed". The signature is written in a cursive style with a large, prominent 'H' and 'R'.

Vice President Group Underwriting

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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)
06/21/2010	Rate and Rule	Rate Page	07/09/2010	C3 and C4 Exh A AR.pdf (Superseded)

# USABLE LIFE INSURANCE COMPANY (NAIC #94358)

## Actuarial Memorandum for Individual A&H Rate Increase Unlimited Cancer Plans with Chemotherapy Benefits

### Exhibit A - Current and Proposed Monthly Premiums

#### I. Policy Form CSD3-POL(2-92)

<u>Coverage Type</u>	<u>Current Premium</u>	<u>Proposed Premium</u>
Individual	\$ 224.42	\$ 280.54
One Parent	\$ 269.38	\$ 336.74
Family	\$ 414.14	\$ 517.68

#### II. Policy Form CSD4-POL(2-92)

<u>Coverage Type</u>	<u>Current Premium</u>	<u>Proposed Premium</u>
Individual	\$ 159.34	\$ 199.18
One Parent	\$ 191.28	\$ 239.10
Family	\$ 307.54	\$ 384.44