

SERFF Tracking Number: STLH-126735783 State: Arkansas
Filing Company: State Farm Mutual Automobile Insurance Company State Tracking Number: 46310
Company Tracking Number: 2011 AR ER PRE STD
TOI: MS02I Individual Medicare Supplement - Pre-Standardized Sub-TOI: MS02I.000 Medicare Supplement - Pre-Standardized
Product Name: Pre Standaardized Medicare Supplement
Project Name/Number: 2011 AR ER PRE STD/

Filing at a Glance

Company: State Farm Mutual Automobile Insurance Company

Product Name: Pre Standaardized Medicare Supplement SERFF Tr Num: STLH-126735783 State: Arkansas

TOI: MS02I Individual Medicare Supplement - Pre-Standardized SERFF Status: Closed-Approved- Closed State Tr Num: 46310

Sub-TOI: MS02I.000 Medicare Supplement - Pre-Standardized Co Tr Num: 2011 AR ER PRE STD State Status: Approved-Closed

Filing Type: Rate

Authors: Barb Baxter, Corin Chapman, Debbie Bryant
Date Submitted: 07/26/2010

Reviewer(s): Stephanie Fowler
Disposition Date: 08/19/2010

Disposition Status: Approved-Closed

Implementation Date Requested: 01/01/2011
State Filing Description:

Implementation Date: 01/01/2010

General Information

Project Name: 2011 AR ER PRE STD
Project Number:
Requested Filing Mode: Review & Approval
Explanation for Combination/Other:
Submission Type: New Submission
Overall Rate Impact: 3.3%
Filing Status Changed: 08/19/2010

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: 08/19/2010

Created By: Debbie Bryant

Corresponding Filing Tracking Number:

Deemer Date:

Submitted By: Debbie Bryant

Filing Description:

On behalf of State Farm Mutual Automobile Insurance Company of Bloomington, Illinois, I submit the following annual rate filing and rate revisions for the above referenced Pre-Standardized Medicare Supplement policy forms.

We are filing new rate tables for Policy Forms 97033, 97043, 97046, 97049, and 97050 and Rider Forms 99417 and

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99418. This filing represents an average rate increase of 3.3%. These rates will apply to renewals only since we no longer issue these forms. This filing complies with all applicable minimum loss ratio standards. Contingent upon approval, these rates will become effective January 1, 2011, or as soon thereafter as possible.

The following are included with this filing:

- an actuarial memorandum including an actuarial certification
- revised rate tables
- experience exhibits
- 10-year projections

EFT in the amount of \$50.00 has been submitted to pay filing fees.

Sincerely,

Corin Chapman, FSA, MAAA
Actuarial Analyst III
Phone no.: (309) 763-1383
Fax no.: (309) 766-1827
Email: corin.chapman.rog2@statefarm.com

Company and Contact

Filing Contact Information

Corin Chapman, Actuarial Analyst III Corin.Chapman.rog2@statefarm.com
One State Farm Plaza 309-763-1383 [Phone]
Bloomington, IL 61710 309-766-1827 [FAX]

Filing Company Information

State Farm Mutual Automobile Insurance CoCode: 25178 State of Domicile: Illinois
Company
One State Farm Plaza Group Code: Company Type:
Life/Health Actuarial, B-1 Group Name: State ID Number:
Bloomington, IL 61710 FEIN Number: 37-0533100
(309) 766-5188 ext. [Phone]

SERFF Tracking Number: *STLH-126735783* State: *Arkansas*
Filing Company: *State Farm Mutual Automobile Insurance Company* State Tracking Number: *46310*
Company Tracking Number: *2011 AR ER PRE STD*
TOI: *MS02I Individual Medicare Supplement - Pre-Standardized* Sub-TOI: *MS02I.000 Medicare Supplement - Pre-Standardized*
Product Name: *Pre Standaardized Medicare Supplement*
Project Name/Number: *2011 AR ER PRE STD/*

Filing Fees

Fee Required? Yes
Fee Amount: \$50.00
Retaliatory? Yes
Fee Explanation: For Pre Std rate filing the fee is \$50 for entire filing.
Per Company: No

| COMPANY | AMOUNT | DATE PROCESSED | TRANSACTION # |
|--|---------|----------------|---------------|
| State Farm Mutual Automobile Insurance Company | \$50.00 | 07/26/2010 | 38276879 |

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Correspondence Summary

Dispositions

| Status | Created By | Created On | Date Submitted |
|-----------------|-------------------|-------------------|-----------------------|
| Approved-Closed | Stephanie Fowler | 08/19/2010 | 08/19/2010 |

SERFF Tracking Number: *STLH-126735783* State: *Arkansas*
 Filing Company: *State Farm Mutual Automobile Insurance Company* State Tracking Number: *46310*
 Company Tracking Number: *2011 AR ER PRE STD*
 TOI: *MS021 Individual Medicare Supplement - Pre-Standardized* Sub-TOI: *MS021.000 Medicare Supplement - Pre-Standardized*
 Product Name: *Pre Standaardized Medicare Supplement*
 Project Name/Number: *2011 AR ER PRE STD/*

Disposition

Disposition Date: 08/19/2010

Implementation Date: 01/01/2010

Status: Approved-Closed

Comment: The requested rate increase has been approved to be implemented on or after May 1, 2009. 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): |
|--|--|-----------------------------------|---|---|--|---|---|
| State Farm Mutual Automobile Insurance Company | 3.300% | 3.300% | \$15,185 | 167 | \$460,166 | 3.310% | 0.000% |

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| Schedule | Schedule Item | Schedule Item Status | Public Access |
|----------------------------|--------------------------------------|-----------------------------|----------------------|
| Supporting Document | Health - Actuarial Justification | Approved-Closed | No |
| Supporting Document | Experience Exhibit | Approved-Closed | No |
| Supporting Document | 10 Year Projections | Approved-Closed | No |
| Rate | Pre Standardized Medicare Supplement | Approved-Closed | Yes |

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Rate Information

Rate data applies to filing.

Filing Method: SERFF
Rate Change Type: Increase
Overall Percentage of Last Rate Revision: 6.800%
Effective Date of Last Rate Revision: 01/01/2010
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): |
|--|-----------------------------|------------------------|--|--|-----------------------------------|------------------------------------|------------------------------------|
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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 08/19/2010 | Pre Standardized Medicare Supplement | 97033, 97043, 97046, 97049, 97050, 99417, 99418 | Revised | Previous State Filing Number: Percent Rate Change Request: 3.300 | AR Proposed Rates - Pre 2011.pdf |

State Farm Mutual Automobile Insurance Company
 Bloomington, Illinois

Medicare Supplement Policy Forms 97033, 97043, 97046, 97049, and 97050
 Additional Benefit Rider Forms 99417 and 99418
 Annual Premiums
 Individual Male or Female

Proposed Rates (Proposed 01/01/11 Effective Date)

| Community Rate | Policy Form 97033 Series ER_A34AR | Policy Form 97043 Series ER_B34AR | Policy Form 97043 Series without Prescription Drug Coverage | Policy Form 97046 Series ER_C34AR |
|-----------------------|--|--|--|--|
| All Ages | 2,592.00 | 8,323.00 | 7,074.55 | 2,643.00 |
| Community Rate | Policy Form 97049 Series ER_D34AR | Rider Form 99417 ER_F34AR | | |
| All Ages | 1,702.00 | 980.00 | | |
| Community Rate | Policy Form 97050 Series ER_E34AR | Rider Form 99418 ER_G34AR | | |
| All Ages | 4,801.00 | 859.00 | | |

Semiannual Mode: 51% of Annual
 Quarterly Mode: 26% of Annual

Arkansas