

SERFF Tracking Number: ALST-127664369 State: Arkansas  
Filing Company: American Heritage Life Insurance Company State Tracking Number: 49912  
Company Tracking Number: RADCP10  
TOI: H071 Individual Health - Specified Disease - Sub-TOI: H071.002 Dread Disease  
Limited Benefit  
Product Name: Cancer/Specified Disease Amendment  
Project Name/Number: /

## Filing at a Glance

Company: American Heritage Life Insurance Company

Product Name: Cancer/Specified Disease Amendment SERFF Tr Num: ALST-127664369 State: Arkansas

TOI: H071 Individual Health - Specified Disease - Limited Benefit SERFF Status: Closed-Approved State Tr Num: 49912

Sub-TOI: H071.002 Dread Disease Co Tr Num: RADCP10 State Status: Approved-Closed  
Filing Type: Form Reviewer(s): Donna Lambert

Authors: Angie Redden, Jennifer Aiello, Lynn Bautista, Sara Welch

Date Submitted: 09/28/2011

Disposition Date: 10/06/2011

Disposition Status: Approved

Implementation Date Requested:

Implementation Date: 11/07/2011

State Filing Description:

## General Information

Project Name:

Status of Filing in Domicile: Pending

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

Individual Market Type:

Overall Rate Impact:

Filing Status Changed: 10/06/2011

State Status Changed: 10/06/2011

Deemer Date:

Created By: Angie Redden

Submitted By: Angie Redden

Corresponding Filing Tracking Number:

Filing Description:

American Heritage Life Insurance Company, NAIC Number: 60534

Amendment Form Numbers RADCP10A and RADCP10B

We submit the above referenced forms for your review and approval. These forms are new and do not replace any forms currently approved by your department. Amendments RADCP10A and RADCP10B will be used with our cancer and specified disease policy, CP10AR, approved on 09/13/1994.

The purpose of this amendment is to revise our Radiation Therapy, Radio-Active Isotopes Therapy, Chemotherapy, or

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Immunotherapy benefit. This new language clarifies which drugs are not eligible for benefits under this benefit. Policy form CP10AR contains two different benefit levels which the proposed insured may elect, CP10A or CP10B. Therefore, the only difference between the two amendments is the benefit amount.

Please note that this change does not affect the rates of the policy.

We have included a Readability Certification, as well as any filing fees and/or forms required by your state. If you have any questions, feel free to call me at (904) 992-2541. I can also be reached by email at jhop4@allstate.com.

## Company and Contact

### Filing Contact Information

Jennifer Aiello, Filing Analyst jhop4@allstate.com  
 Attn: Legal/Compliance 904-992-2541 [Phone]  
 1776 American Heritage Life Drive 904-992-2975 [FAX]  
 Jacksonville, FL 32224-9983

### Filing Company Information

American Heritage Life Insurance Company CoCode: 60534 State of Domicile: Florida  
 ATTN: Legal/Compliance Group Code: 8 Company Type: Life and Health  
 1776 American Heritage Life Drive Group Name: Allstate State ID Number:  
 Jacksonville, FL 32224-9983 FEIN Number: 59-0781901  
 (904) 992-1776 ext. [Phone]  
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## Filing Fees

Fee Required? Yes  
 Fee Amount: \$100.00  
 Retaliatory? No  
 Fee Explanation: \$50.00 per endorsement = \$100.00.  
 Per Company: No

COMPANY	AMOUNT	DATE PROCESSED	TRANSACTION #
American Heritage Life Insurance Company	\$100.00	09/28/2011	52234969

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## Correspondence Summary

### Dispositions

Status	Created By	Created On	Date Submitted
Approved	Donna Lambert	10/06/2011	10/06/2011

### Amendments

Schedule	Schedule Item Name	Created By	Created On	Date Submitted
Form	Amendment	Angie Redden	10/06/2011	10/06/2011
Form	Amendment	Angie Redden	10/06/2011	10/06/2011

### Filing Notes

Subject	Note Type	Created By	Created On	Date Submitted
OFFICER'S SIGNATURE	Note To Filer	Donna Lambert	10/04/2011	10/04/2011

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## Disposition

Disposition Date: 10/06/2011

Implementation Date: 11/07/2011

Status: Approved

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>	Flesch Certification	Approved	No
<b>Supporting Document</b>	Application	Approved	No
<b>Supporting Document</b>	Health - Actuarial Justification	Approved	No
<b>Supporting Document</b>	Outline of Coverage	Approved	No
<b>Form (revised)</b>	Amendment	Approved	No
<b>Form</b>	Amendment	Approved	No
<b>Form (revised)</b>	Amendment	Approved	No
<b>Form</b>	Amendment	Approved	No

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**Amendment Letter**

Submitted Date: 10/06/2011

**Comments:**

Thank you for your note and pointing out this issue. The word "Signature" located under the Officer's signature is an error. We have attached revised forms replacing "Signature" with the Officer's title, "Secretary". Regarding the brackets, we prefer not to include them in these amendments.

Thank you,

Angie Redden

**Changed Items:**

**Form Schedule Item Changes:**

**Form Schedule Item Changes:**

Form Number	Form Type	Form Name	Action	Form Action Other	Previous Filing #	Replaced Form #	Readability Score	Attachments
RADCP10A	Policy/Contr act/Fraternal Certificate: Amendment, Insert Page, Endorsement or Rider	Amendment	Initial				51.100	RADCP10A.pdf
RADCP10B	Policy/Contr act/Fraternal Certificate: Amendment, Insert Page, Endorsement or Rider	Amendment	Initial				51.100	RADCP10B.pdf

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**Note To Filer**

**Created By:**

Donna Lambert on 10/04/2011 03:57 PM

**Last Edited By:**

Donna Lambert

**Submitted On:**

10/04/2011 03:57 PM

**Subject:**

OFFICER'S SIGNATURE

**Comments:**

You may want to consider placing the officer's signature and title (instead of "signature") in brackets so they can be revised without refiling the forms. I will approve the filing after hearing from you regarding this revision.

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## Form Schedule

Lead Form Number: RADCP10A

Schedule Item	Form Number	Form Type Form Name	Action	Action Specific Data	Readability	Attachment
Approved 10/06/2011	RADCP10A	Policy/Cont Amendment ract/Fraternal Certificate: Amendment, Insert Page, Endorsement or Rider	Initial		51.100	RADCP10A.pdf
Approved 10/06/2011	RADCP10B	Policy/Cont Amendment ract/Fraternal Certificate: Amendment, Insert Page, Endorsement or Rider	Initial		51.100	RADCP10B.pdf



## AMERICAN HERITAGE LIFE INSURANCE COMPANY

HOME OFFICE:  
1776 AMERICAN HERITAGE LIFE DRIVE  
JACKSONVILLE, FLORIDA 32224-6687  
(904) 992-1776

A Stock Company

### AMENDMENT

The Policy to which this Amendment is attached is amended as follows:

I. The following is added to the **DEFINITIONS** section:

**Chemotherapeutic Drug.** A drug which directly modifies or destroys cancerous tissue. Drugs that are supportive or protective of, necessary for use with, or used in conjunction with, drugs that directly modify or destroy cancerous tissue but which do not themselves directly modify or destroy cancerous tissue are not chemotherapeutic drugs.

II. The **Radiation Therapy, Radioactive Isotopes Therapy, Chemotherapy, or Immunotherapy** benefit is deleted in its entirety and replaced with the following:

**G. Radiation Therapy, Radioactive Isotopes Therapy, Chemotherapy, or Immunotherapy.** We pay actual charges, up to the limit stated below, for only those individual charges, within the following treatment techniques, that are directly for the modification or destruction of cancerous tissue:

1. teleradio therapy using either natural or artificially propagated radiation;
2. interstitial or intracavity application of radium or radioactive isotopes in sealed or non-sealed sources;
3. chemical substances, including hormonal therapy;
4. antigenic preparation or immunosuppressive techniques.

This benefit is limited to \$5,000 per 12 month period beginning with the first day of benefit under this provision. Hospital confinement is not necessary to receive this benefit. Treatment must be administered by a Radiologist, Chemotherapist or Oncologist.

Unless specified elsewhere in the policy, we do not pay for:

1. treatment planning, consultation, or management;
2. the design and construction of treatment devices;
3. medications or drugs, other than chemotherapeutic drugs;
4. emergency or treatment room charges;
5. supplies or devices related to treatment;
6. X-rays, scans and their interpretations;
7. drugs, charges or expenses that do not directly modify or destroy cancerous tissue, even though they may be supportive or protective of, necessary for use with, or used in conjunction with, drugs, charges or expenses that directly modify or destroy cancerous tissue.

This Amendment will not change, alter, or amend the Policy it is attached to except as stated.

This Amendment becomes effective as of the issue date of the Policy.

  
Secretary



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## Supporting Document Schedules

		<b>Item Status:</b>	<b>Status Date:</b>
<b>Satisfied - Item:</b>	Flesch Certification	Approved	10/06/2011
<b>Comments:</b>			
<b>Attachment:</b>			
	Readability Certification.pdf		

		<b>Item Status:</b>	<b>Status Date:</b>
<b>Bypassed - Item:</b>	Application	Approved	10/06/2011
<b>Bypass Reason:</b>	Not applicable to this filing of endorsements.		
<b>Comments:</b>			

		<b>Item Status:</b>	<b>Status Date:</b>
<b>Bypassed - Item:</b>	Health - Actuarial Justification	Approved	10/06/2011
<b>Bypass Reason:</b>	Not applicable to this filing of endorsements.		
<b>Comments:</b>			

		<b>Item Status:</b>	<b>Status Date:</b>
<b>Bypassed - Item:</b>	Outline of Coverage	Approved	10/06/2011
<b>Bypass Reason:</b>	The change in language to the policy by this endorsement does not affect the approved language in the outline of coverage.		
<b>Comments:</b>			

**AMERICAN HERITAGE LIFE INSURANCE COMPANY**

Jacksonville, Florida 32224-6687

To the Policy Review Section, Arkansas Department of Insurance.

I certify that I have carefully reviewed the form(s) listed below and to the best of my knowledge and ability, find that the form(s) meet the minimum reading ease score on the test used.

<u>Form</u>	<u>Score</u>
RADCP10A	51.1
RADCP10B	51.1

Date: September 28, 2011



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Diane Ierna  
Assistant Vice President, Compliance Department

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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)
09/28/2011	Form	Amendment	10/06/2011	RADCP10A.pdf (Superseded)
09/28/2011	Form	Amendment	10/06/2011	RADCP10B.pdf (Superseded)



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A handwritten signature in cursive script that reads "Gary Stewart".

Signature



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