

SERFF Tracking Number: ARBB-127634856 State: Arkansas  
 Filing Company: Arkansas Blue Cross and Blue Shield State Tracking Number: 49827  
 Company Tracking Number: 23-2610 9/11  
 TOI: MS07G Group Medicare Supplement - Medicare Sub-TOI: MS07G.012 Other 2010  
 Select 2010  
 Product Name: Vision Rider  
 Project Name/Number: Amendment/23-2610 9/11

## Filing at a Glance

Company: Arkansas Blue Cross and Blue Shield

Product Name: Vision Rider SERFF Tr Num: ARBB-127634856 State: Arkansas  
 TOI: MS07G Group Medicare Supplement - SERFF Status: Closed-Accepted State Tr Num: 49827  
 Medicare Select 2010 For Informational Purposes  
 Sub-TOI: MS07G.012 Other 2010 Co Tr Num: 23-2610 9/11 State Status: Filed-Closed  
 Filing Type: Form Reviewer(s): Stephanie Fowler  
 Disposition Date: 10/05/2011  
 Authors: Christi Kittler, Yvonne  
 McNaughton, Frank Sewall, Rita  
 Thatcher, Evelyn Laney  
 Date Submitted: 09/19/2011 Disposition Status: Accepted For  
 Informational Purposes  
 Implementation Date: Implementation Date:

Implementation Date Requested: On Approval  
 State Filing Description:

## General Information

Project Name: Amendment Status of Filing in Domicile:  
 Project Number: 23-2610 9/11 Date Approved in Domicile:  
 Requested Filing Mode: Domicile Status Comments: Arkansas is state  
 of domicile.  
 Explanation for Combination/Other: Market Type: Group  
 Submission Type: New Submission Group Market Size: Small and Large  
 Group Market Type: Employer Overall Rate Impact:  
 Filing Status Changed: 10/05/2011  
 State Status Changed: 10/05/2011 Deemer Date:  
 Created By: Evelyn Laney Submitted By: Evelyn Laney  
 Corresponding Filing Tracking Number:  
 Filing Description:

Attached please find form 23-2610 9/11 your review and approval if indicated.

This is vision rider for the 2010 Medipak plans that is filed for informational purposes, only. There will be no premium rates and it is an enhancement to the 2010 plans.

Also attached is a Flesch Reading Ease score certification signed by an officer of the company as required by Arkansas Code Annotated §23-80-206(d).

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I certify that the submission meets the provisions of Arkansas Insurance Department Rule & Regulation 19. I further certify that the Life and Health Guaranty Association Notices required by Arkansas Insurance Department Rule & Regulation 49 and the consumer information notice required by Arkansas Code Annotated §23-79-138 are incorporated in the policies to which this amendment is attached.

Please feel free to contact me at 378-2165 with any questions you may have.

## Company and Contact

### Filing Contact Information

Evelyn Laney, Senior Compliance Analyst exlaney@arkbluecross.com  
 320 West Capitol, Ste 211 501-378-2165 [Phone]  
 Little Rock, AR 72201 501-378-2975 [FAX]

### Filing Company Information

Arkansas Blue Cross and Blue Shield CoCode: 83470 State of Domicile: Arkansas  
 601 S. Gaines Street Group Code: Company Type:  
 Little Rock, AR 72201 Group Name: State ID Number: N/A  
 (501) 378-2967 ext. [Phone] FEIN Number: 71-0226428

## Filing Fees

Fee Required? Yes  
 Fee Amount: \$50.00  
 Retaliatory? No  
 Fee Explanation: \$50.00  
 Per Company: No

COMPANY	AMOUNT	DATE PROCESSED	TRANSACTION #
Arkansas Blue Cross and Blue Shield	\$50.00	09/19/2011	51774487

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## Correspondence Summary

### Dispositions

Status	Created By	Created On	Date Submitted
Accepted For Informational Purposes	Stephanie Fowler	10/05/2011	10/05/2011

### Amendments

Schedule	Schedule Item Name	Created By	Created On	Date Submitted
Form	Amendment	Christi Kittler	09/30/2011	09/30/2011

*SERFF Tracking Number:* ARBB-127634856      *State:* Arkansas  
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*TOI:* MS07G Group Medicare Supplement - Medicare Sub-TOI: MS07G.012 Other 2010  
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*Project Name/Number:* Amendment/23-2610 9/11

## **Disposition**

Disposition Date: 10/05/2011

Implementation Date:

Status: Accepted For Informational Purposes

Comment:

Rate data does NOT apply to filing.

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Schedule	Schedule Item	Schedule Item Status	Public Access
Supporting Document	Flesch Certification	Accepted for Informational Purposes	Yes
Supporting Document	Application		Yes
Supporting Document	Health - Actuarial Justification		Yes
Supporting Document	Outline of Coverage		Yes
Form ( <i>revised</i> )	Amendment	Accepted for Informational Purposes	Yes
Form	Amendment	Replaced	No

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**Amendment Letter**

Submitted Date: 09/30/2011

**Comments:**

Stephanie -

Please review this new form instead of the previously filed version. We added a definition of asymptomatic eye exams to help members understand what we mean.

Thanks so much!

Christi

**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
23-2610 9/11	Certificate Amendment, Insert Page, Endorsement or Rider	Amendment	Initial				40.900	23-2610 9-11 Vision Rider for 2010 plans.pdf

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## Form Schedule

Lead Form Number: 23-2610 9/11

Schedule Item Status	Form Number	Form Type	Form Name	Action	Action Specific Data	Readability	Attachment
Accepted for Information al Purposes 10/05/2011	23-2610 9/11	Certificate Amendmen t, Insert Page, Endorseme nt or Rider	Amendment	Initial		40.900	23-2610 9-11Vision Rider for 2010 plans.pdf



Arkansas  
**BlueCross BlueShield**  
An Independent Licensee of the Blue Cross and Blue Shield Association

**ARKANSAS BLUE CROSS AND BLUE SHIELD  
MEDIPAK<sup>®</sup>  
CERTIFICATE OF GROUP INSURANCE**

**AMENDMENT NO. 2610**

**VISION PLAN**

**ARKANSAS EYE ASSOCIATES, INC. AND ARKANSAS PRIMARY EYE CARE, INC.  
CERTIFICATE OF BENEFITS  
VISION SERVICES AND OPHTHALMIC MATERIALS**

Arkansas Eye Associates, Inc. ("AEA"), and Arkansas Primary Eye Care, Inc. ("APEC"), nonprofit vision service plan corporations, certify that they have contracted with the Medi-Pak<sup>®</sup> Group Insurance Trust to provide, through Member Providers, the following services and benefits to persons participating in the Trust:

1. Asymptomatic eye examinations at no cost to the participants in the Trust, if provided by a Member Provider, and
2. A discount of 15% off the price of eyeglass lenses, frames, tints and coating. A 15% discount on regular wear contact lenses or a 5% discount on disposable contact lenses. The discount for ophthalmic materials shall only be applicable if the examination is provided by the Member Provider furnishing the ophthalmic materials.

**DEFINITIONS:**

1. Asymptomatic eye examinations are routine eye examinations for individuals who are not experiencing any symptoms or problems with their eyes. Individuals are encouraged to get these examinations to detect and prevent eye disease. An annual eye examination is **not** always considered asymptomatic. If your examination is considered symptomatic, the provider will bill Medicare for the service. You will be responsible for the Medicare Part B deductible and coinsurance if your examination is determined to be symptomatic.
2. "Member Provider" means an optometrist or ophthalmologist who has entered into an agreement with AEA or APEC to provide the services and benefits described above to participants in the Trust.
3. "Ophthalmic Materials" means prescription eyeglasses, including frames, lenses, tints, coating, and contact lenses customarily offered for sale by a Member Provider or any optical service wholly or partially owned by a Member Provider.

**CONDITIONS AND LIMITATIONS:**

1. This certificate does not entitle a participant in the Trust to any services or benefits by any optometrist or ophthalmologist who is not a Member Provider. You should determine whether an optometrist or ophthalmologist is a Member Provider before obtaining any examination or agreeing to purchase any ophthalmic materials thought to be covered by this certificate. Any questions concerning the Member Provider status of any optometrist or ophthalmologist should be referred to either AEA at 3004 East Kiehl, Sherwood, Arkansas (501) 834-4563, or APEC at 924 Main Street, Conway, Arkansas (501) 327-8377 or (501) 327-4444.
2. All services and benefits provided by this certificate are provided directly by Member Providers to participants in the Trust. Claim forms will be filed with Medicare and/or Medi-Pak<sup>®</sup>.
3. It shall be the determination of each Member Provider as to the number of examinations provided to a participant in the Trust. Symptomatic eye examinations may be covered by Medicare and/or the Medi-Pak<sup>®</sup> Medicare Supplement Certificate. Only one asymptomatic

examination shall be provided at no cost to the participant in the Trust during a calendar year. The number of prescriptions provided to each participant shall not be limited.

4. The benefits described in this certificate are in addition to and not instead of your benefits under Medicare or the Medi-Pak<sup>®</sup> Medicare Supplement Certificate and shall not be applied or interpreted to reduce or interfere with those benefits in any way.

This Rider becomes a part of the Arkansas Blue Cross and Blue Shield MediPak<sup>®</sup> Group Benefit Certificate. All other provisions of the Group Benefit Certificate remain in full force and effect.

*P. Mark White*

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P. Mark White, President and Chief Executive Officer

ARKANSAS BLUE CROSS AND BLUE SHIELD  
601 S. Gaines Street  
Little Rock, Arkansas 72201

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## Supporting Document Schedules

	<b>Item Status:</b>	<b>Status Date:</b>
<b>Satisfied - Item:</b> Flesch Certification	Accepted for Informational Purposes	10/05/2011

**Comments:**  
See attached.

**Attachment:**  
Flesch Certification Form 23-2610 9-11.pdf

	<b>Item Status:</b>	<b>Status Date:</b>
<b>Bypassed - Item:</b> Application		
<b>Bypass Reason:</b> Not needed.		
<b>Comments:</b>		

	<b>Item Status:</b>	<b>Status Date:</b>
<b>Bypassed - Item:</b> Health - Actuarial Justification		
<b>Bypass Reason:</b> Not needed.		
<b>Comments:</b>		

	<b>Item Status:</b>	<b>Status Date:</b>
<b>Bypassed - Item:</b> Outline of Coverage		
<b>Bypass Reason:</b> Not needed.		
<b>Comments:</b>		



# Arkansas BlueCross BlueShield

An Independent Licensee of the Blue Cross and Blue Shield Association

RE: **Arkansas Blue Cross and Blue Shield  
Amendment No. 23-2610 9/11**

## FLESCH READING EASE CERTIFICATION

This is to certify that the above referenced documents have achieved a Flesch Reading Ease Score average of 40.9 and comply with the requirements of A.C.A. §23-80-201 *et. seq.*, cited as the Life and Disability Insurance Policy Language Simplification Act.

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Name

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Vice President

Title

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September 19, 2011

Date