

SERFF Tracking Number: NELLI-127868980 State: Arkansas
Filing Company: Philadelphia American Life Insurance Company State Tracking Number: 50411
Company Tracking Number:
TOI: H14I Individual Health - Hospital Indemnity Sub-TOI: H14I.000 Health - Hospital Indemnity
Product Name: Health Saver Plus 1
Project Name/Number: AMEND.1.1.12/

Filing at a Glance

Company: Philadelphia American Life Insurance Company

Product Name: Health Saver Plus 1 SERFF Tr Num: NELLI-127868980 State: Arkansas
TOI: H14I Individual Health - Hospital Indemnity SERFF Status: Closed-Approved-
Closed State Tr Num: 50411

Sub-TOI: H14I.000 Health - Hospital Indemnity Co Tr Num: State Status: Approved-Closed
Filing Type: Form Reviewer(s): Rosalind Minor
Author: Tony Robert Disposition Date: 12/07/2011
Date Submitted: 12/06/2011 Disposition Status: Approved-
Closed

Implementation Date Requested: 01/01/2012

Implementation Date:

State Filing Description:

General Information

Project Name: AMEND.1.1.12

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: 12/07/2011

State Status Changed: 12/07/2011

Deemer Date:

Created By: Tony Robert

Submitted By: Tony Robert

Corresponding Filing Tracking Number:

Filing Description:

We are submitting the captioned form for review and approval. This form is new and not intended to replace any previously approved forms. It will be used with policy form H-0084.AR approved on October 25, 2010 under SERFF Tracking Number NELLI-126856553 .

This Amendment changes the Outpatient Deductible from \$500 to \$50. This change does not affect rates.

Company and Contact

Filing Contact Information

Tony Robert, Assistant Vice President

arobert@neweralife.com

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200 Westlake Park #1200 281-368-7270 [Phone]
 Houston, TX 77079 281-368-7268 [FAX]

Filing Company Information

Philadelphia American Life Insurance Company CoCode: 67784 State of Domicile: Texas
 200 Westlake Park #1200 Group Code: 520 Company Type:
 Houston, TX 77079 Group Name: State ID Number:
 (281) 368-7200 ext. [Phone] FEIN Number: 74-1952955

Filing Fees

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

| COMPANY | AMOUNT | DATE PROCESSED | TRANSACTION # |
|--|---------|----------------|---------------|
| Philadelphia American Life Insurance Company | \$50.00 | 12/06/2011 | 54305715 |

SERFF Tracking Number: NELL-127868980 State: Arkansas
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TOI: H141 Individual Health - Hospital Indemnity Sub-TOI: H141.000 Health - Hospital Indemnity
Product Name: Health Saver Plus 1
Project Name/Number: AMEND.1.1.12/

Correspondence Summary

Dispositions

| Status | Created By | Created On | Date Submitted |
|-----------------|----------------|------------|----------------|
| Approved-Closed | Rosalind Minor | 12/07/2011 | 12/07/2011 |

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Disposition

Disposition Date: 12/07/2011

Implementation Date:

Status: Approved-Closed

Comment:

Rate data does NOT apply to filing.

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| Schedule | Schedule Item | Schedule Item Status | Public Access |
|----------------------------|----------------------------------|-----------------------------|----------------------|
| Supporting Document | Flesch Certification | Approved-Closed | Yes |
| Supporting Document | Application | Approved-Closed | Yes |
| Supporting Document | Health - Actuarial Justification | Approved-Closed | Yes |
| Supporting Document | Outline of Coverage | Approved-Closed | Yes |
| Form | AMENDMENT | Approved-Closed | Yes |

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Form Schedule

Lead Form Number: AMEND.1.1.12

| Schedule Item | Form Number | Form Type | Form Name | Action | Action Specific Data | Readability | Attachment |
|-----------------------------------|------------------|---|-----------|---------|----------------------|-------------|----------------------------------|
| Approved- Closed 12/07/2011 | AMEND.1.1 .12 | Policy/Cont ract/Fratern al Certificate: Amendmen t, Insert Page, Endorseme nt or Rider | AMENDMENT | Initial | | 44.400 | DOC-7808 AMEND.1.1.1 2.pdf |



AMENDMENT – Effective January 1, 2012

This Amendment is effective as of the later of January 1, 2012 or the Effective Date shown in the Policy Schedule of Benefits.

Calendar Year Deductible under **Additional Outpatient Benefits** section is amended as follows:

Calendar Year Deductible is changed from **\$500** to **\$50**.

This Amendment is attached to and made a part of your contract.

This Amendment is subject to all provisions, exclusions and limitations of the contract not inconsistent herewith. In all other respects, your coverage remains the same.

Philadelphia American Life Insurance Company

Bill S. Chen

President

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Supporting Document Schedules

| | Item Status: | Status Date: |
|---|-----------------|--------------|
| Satisfied - Item: Flesch Certification Comments: Attachment: Readability_Certification.pdf | Approved-Closed | 12/07/2011 |
| Bypassed - Item: Application Bypass Reason: Not a policy filing Comments: | Approved-Closed | 12/07/2011 |
| Bypassed - Item: Health - Actuarial Justification Bypass Reason: Not applicable to this filing Comments: | Approved-Closed | 12/07/2011 |
| Bypassed - Item: Outline of Coverage Bypass Reason: Not applicable to this filing Comments: | Approved-Closed | 12/07/2011 |

READABILITY CERTIFICATION

I hereby certify that the forms listed below meet the minimum reading ease score on a Flesch test basis:

| <u>New Form Number</u> | <u>Readability Score</u> |
|------------------------|--------------------------|
| AMEND.1.1.12 | 44.4 |



James B. Hobelman, FSA, MAAA
Vice-President & Actuary