

SERFF Tracking Number: ARLH-127046805 State: Arkansas
Filing Company: Arkansas Blue Cross and Blue Shield State Tracking Number: 48036
Company Tracking Number: MP2011-MP IS ANS
TOI: MS06 Medicare Supplement - Other Sub-TOI: MS06.000 Medicare Supplement - Other
Product Name: NA
Project Name/Number: /

Filing at a Glance

Company: Arkansas Blue Cross and Blue Shield

Product Name: NA

SERFF Tr Num: ARLH-127046805 State: Arkansas

TOI: MS06 Medicare Supplement - Other

SERFF Status: Closed-Filed-Closed

State Tr Num: 48036

Sub-TOI: MS06.000 Medicare Supplement - Other

Co Tr Num: MP2011-MP IS ANS

State Status: Filed-Closed

Filing Type: Advertisement

Reviewer(s): Stephanie Fowler

Author:

Disposition Date: 02/22/2011

Date Submitted: 02/21/2011

Disposition Status: Filed-Closed

Implementation Date Requested:

Implementation Date:

State Filing Description:

General Information

Project Name:

Status of Filing in Domicile:

Project Number:

Date Approved in Domicile:

Requested Filing Mode:

Domicile Status Comments:

Explanation for Combination/Other:

Market Type:

Submission Type:

Overall Rate Impact:

Filing Status Changed: 02/22/2011

State Status Changed: 02/22/2011

Deemer Date:

Created By: Jennifer Newkirk

Submitted By: Jennifer Newkirk

Corresponding Filing Tracking Number:

Filing Description:

Company and Contact

Filing Contact Information

NA NA,

NA@NA.COM

NA, NA

123-555-4567 [Phone]

LITTLE ROCK, AR 00000

Filing Company Information

Arkansas Blue Cross and Blue Shield

CoCode: 83470

State of Domicile: Arkansas

P.O. Box 2181

Group Code:

Company Type:

SERFF Tracking Number: ARLH-127046805 State: Arkansas
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TOI: MS06 Medicare Supplement - Other Sub-TOI: MS06.000 Medicare Supplement - Other
Product Name: NA
Project Name/Number: /
Little Rock, AR 72203-2181 Group Name: State ID Number:
(501) 378-3366 ext. [Phone] FEIN Number: 22-6666666

Filing Fees

Fee Required? No
Retaliatory? No
Fee Explanation:
Per Company: No

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Correspondence Summary

Dispositions

Status	Created By	Created On	Date Submitted
Filed-Closed	Stephanie Fowler	02/22/2011	02/22/2011

SERFF Tracking Number: *ARLH-127046805* *State:* *Arkansas*
Filing Company: *Arkansas Blue Cross and Blue Shield* *State Tracking Number:* *48036*
Company Tracking Number: *MP2011-MP IS ANS*
TOI: *MS06 Medicare Supplement - Other* *Sub-TOI:* *MS06.000 Medicare Supplement - Other*
Product Name: *NA*
Project Name/Number: */*

Disposition

Disposition Date: 02/22/2011

Implementation Date:

Status: Filed-Closed

Comment:

Rate data does NOT apply to filing.

SERFF Tracking Number: ARLH-127046805

State: Arkansas

Filing Company: Arkansas Blue Cross and Blue Shield

State Tracking Number: 48036

Company Tracking Number: MP2011-MP IS ANS

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Schedule	Schedule Item	Schedule Item Status	Public Access
Supporting Document	MP2011-MP IS ANS	Filed	Yes

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Supporting Document Schedules

	Item Status:	Status
Satisfied - Item: MP2011-MP IS ANS	Filed	Date: 02/22/2011
Comments:		
Attachment: ARLH-127046805.pdf		



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

601 S. Gaines
P.O. Box 2181
Little Rock, Arkansas 72203-2181
arkansasbluecross.com

#48036
ck # 00451194
\$50.00

ARLH-127046805

February 21, 2011

Stephanie Fowler
Arkansas Insurance Department
1200 W. Third St.
Little Rock, AR 72201-1904

Dear Ms. Fowler:

Attached please find for your review the following 2011 Medi-Pak flyer:

- "Medi-Pak Is The Answer" Flyer Form #MP2011-MP IS ANS

Also attached is check number 00451194 in the amount of \$50.00 for your review of this piece.

Best regards,

Matthew Creasman

Attachments

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ARKANSAS INSURANCE DEPARTMENT

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LIFE AND HEALTH
ARKANSAS INSURANCE DEPARTMENT

Exclusions

- ☞ No benefit available if you do not have Medicare Part A and Part B coverage.
- ☞ No benefit will be payable if you can obtain these benefits under Medicare or under any other federal or state law.

Limitations

- ☞ Benefits which supplement Medicare Part A and Part B services provided by a hospital only cover services provided by a Medicare-participating hospital.
- ☞ Benefits which supplement Medicare Part B will be limited to the reasonable charges as determined by Medicare.
- ☞ Emergency care in a foreign country is subject to a \$250 deductible and a \$50,000 lifetime maximum. (Only offered in Medi-Pak Plans F, G and N.)

Medi-Pak insurance plans are not connected with or endorsed by the U.S. government or the federal Medicare program.

For more information, call toll-free:
1-800-338-2312

Or write:

Arkansas Blue Cross and Blue Shield
Attention: Customer Service, P.O. Box 2181
Little Rock, AR 72203

Policy Form Numbers:
Plan A: 73-MPA, Plan F: 73-MPF
Plan G: 73-MPG, Plan N: 73-MPN

*When
you ask
for quality
protection
against
the costs
Medicare
does
NOT pay...*

**Medi-Pak
is the answer!**



**Arkansas
BlueCross BlueShield**

An Independent Licensee of the Blue Cross and Blue Shield Association

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Form #MP2011-MP IS ANS

FEB 21 2011

**LIFE AND HEALTH
ARKANSAS INSURANCE DEPARTMENT**

Medi-Pak Medicare Supplement Insurance Plan Benefits At-A-Glance

What YOU Pay With Medi-Pak in 2011	With Plan A, You Pay	With Plan F, You Pay	With Plan G, You Pay	With Plan N, You Pay
PART A – HOSPITAL SERVICES				
\$1,132 inpatient hospital deductible each benefit period	Inpatient hospital deductible	\$0	\$0	\$0
\$283 a day copayment for days 61-90 in a hospital	\$0	\$0	\$0	\$0
\$566 a day copayment for days 91-150 in a hospital (Lifetime Reserve)	\$0	\$0	\$0	\$0
Additional 365 days after Medicare hospital benefits end	\$0	\$0	\$0	\$0
Calendar-year blood deductible	\$0	\$0	\$0	\$0
Hospice care	\$0	\$0	\$0	\$0
\$141.50 per day for days 21-100 in a skilled nursing facility	Copayments	\$0	\$0	\$0
PART B – PHYSICIAN CARE AND MEDICAL SERVICES				
\$162 Part B deductible	Part B deductible	\$0	Part B deductible	Part B deductible
Part B coinsurance for:				
Health care provider visits	\$0	\$0	\$0	Lesser of a \$20 copayment or the Part B coinsurance
Emergency room visits	\$0	\$0	\$0	Lesser of a \$50 copayment or the Part B coinsurance
All other Part B services	\$0	\$0	\$0	\$0
Part B excess charges	100%	\$0	\$0	100%
ADDITIONAL BENEFITS NOT COVERED BY MEDICARE				
Emergency care in a foreign country*	100%	\$250 deductible then 20% coinsurance	\$250 deductible then 20% coinsurance	\$250 deductible then 20% coinsurance
SilverSneakers®	\$0	\$0	\$0	\$0
Monthly premiums for counties in Service Area 1	\$91.50	\$122.80	\$111.30	\$92.00
Monthly premiums for counties in Service Area 2	\$105.10	\$138.20	\$125.00	\$102.80

*\$50,000 lifetime maximum applies.

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