

SERFF Tracking Number: LFSC-127021340 State: Arkansas
Filing Company: LifeSecure Insurance Company State Tracking Number: 47914
Company Tracking Number: ADV-LS-0383NC ST 01/10
TOI: LTC03I Individual Long Term Care Sub-TOI: LTC03I.001 Qualified
Product Name: Endorsement Letters
Project Name/Number: /

Filing at a Glance

Company: LifeSecure Insurance Company

Product Name: Endorsement Letters

TOI: LTC03I Individual Long Term Care

Sub-TOI: LTC03I.001 Qualified

Filing Type: Advertisement

SERFF Tr Num: LFSC-127021340 State: Arkansas

SERFF Status: Closed-Filed- State Tr Num: 47914
Closed

Co Tr Num: ADV-LS-0383NC ST State Status: Filed-Closed
01/10

Reviewer(s): Harris Shearer,
Stephanie Fowler

Authors: Sue Howard, Judy Lucas, Disposition Date: 02/23/2011
Karilynn Bagnell

Date Submitted: 02/07/2011 Disposition Status: Filed-Closed
Implementation Date:

Implementation Date Requested:

State Filing Description:

General Information

Project Name:

Project Number:

Requested Filing Mode: Review & Approval

Explanation for Combination/Other:

Submission Type: New Submission

Overall Rate Impact:

Status of Filing in Domicile: Pending

Date Approved in Domicile:

Domicile Status Comments:

Market Type: Individual

Individual Market Type:

Filing Status Changed: 02/23/2011

State Status Changed: 02/23/2011

Created By: Karilynn Bagnell

Corresponding Filing Tracking Number:

Deemer Date:

Submitted By: Karilynn Bagnell

Filing Description:

LifeSecure Insurance Company

NAIC #77720

Advertising Filing:

LS-0383NC ST 01/10, Letter - Non-Contributing

LS-0383C ST 01/10, Letter - Contributing

Enclosed for your review and approval are the referenced letters. They are new and intended to replace LS-0383NC ST 08/09 and LS-0383C ST 08/09; approved 8/5/2009; SERFF Tracking Number LFSC-126069511.

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Statements of variability are included with this filing.

Should you require further information, please contact me at 810.220.4644 or kbagnell@lifeseureltc.com.

Sincerely,
 Karilynn C. Bagnell
 Senior Compliance Specialist

Company and Contact

Filing Contact Information

Karilynn Bagnell, Senior Compliance Specialist kbagnell@lifeseureltc.com
 LifeSecure Insurance Company 810-220-4644 [Phone]
 10559 Citation Drive 810-220-7707 [FAX]
 Suite 300
 Brighton, MI 48116

Filing Company Information

LifeSecure Insurance Company CoCode: 77720 State of Domicile: Michigan
 10559 Citation Drive Group Code: 572 Company Type: Life, A & H
 Suite 300 Group Name: BCBS of MI GRP State ID Number:
 Brighton, MI 48116 FEIN Number: 75-0956156
 (810) 220-8774 ext. [Phone]

Filing Fees

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

COMPANY	AMOUNT	DATE PROCESSED	TRANSACTION #
LifeSecure Insurance Company	\$100.00	02/07/2011	44441150

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Correspondence Summary

Dispositions

Status	Created By	Created On	Date Submitted
Filed-Closed	Stephanie Fowler	02/23/2011	02/23/2011

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Disposition

Disposition Date: 02/23/2011

Implementation Date:

Status: Filed-Closed

Comment:

Rate data does NOT apply to filing.

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Schedule	Schedule Item	Schedule Item Status	Public Access
Supporting Document	Statement of Variability	Filed	Yes
Form	Letter-Non-Contributing	Filed	Yes
Form	Letter-Contributing	Filed	Yes

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Form Schedule

Lead Form Number: LS-0383NC ST 01/10

Schedule Item	Form Number	Form Type	Form Name	Action	Action Specific Data	Readability	Attachment
Filed 02/23/2011	LS-0383NC ST 01/10	Advertising	Letter-Non-Contributing	Initial			LS-0383NC ST 01.10.pdf
Filed 02/23/2011	LS-0383C ST 01/10	Advertising	Letter-Contributing	Initial			LS-0383C ST 01.10.pdf

Letterhead

[Date]

[Salutation]

In an effort to enhance your benefit package and to encourage you to plan well for the future, [Company Name] is introducing a new voluntary benefit: **long term care (LTC) insurance** through **LifeSecure Insurance Company**. This insurance is available to you and your [spouse or domestic partner], as well as other family members* who may wish to apply.

LTC insurance is an important financial planning and asset protection tool. It can also be viewed as an extension of one's health insurance. LTC insurance pays benefits for custodial care, as well as skilled care which becomes necessary when individuals are no longer able to perform basic activities of daily living on their own – activities such as bathing or dressing. Most of us become aware of long term care when it is needed by a parent, grandparent or other close relative. Sometimes, however, the need for long term care can happen earlier in life as the result of an illness or accident. Fortunately, LTC insurance can help at any time that covered services are needed, not just when someone is older.

LTC insurance will pay benefits for care received in a variety of settings: your own home, an assisted living facility, adult day care, hospice, or in a nursing home facility. LifeSecure's policy is designed to also allow for benefit payments for care and assistance received at home by a spouse, other close family member or a friend.

To learn more about long term care, review a premium quote, or to apply for coverage:

- 1) Go to www.YourLifeSecure.com
- 2) To learn more about LTC, click [link name to be determined].
- 3) To review premiums, click [link name to be determined].
- 4) To apply for coverage, [secure portal login instructions], then enter: **[Group Number]**.

You are encouraged to take the time to learn about this important new benefit and to determine if LTC insurance is right for you. [LTC education meetings [Option A and/or B]. [During the initial LTC insurance enrollment period, [MM/DD/YYYY–MM/DD/YYYY], you have the opportunity to apply through a simplified issue (i.e., abbreviated) application process.]

This insurance plan requires completion of an individual application. You may or may not be approved for coverage based on current or past health conditions. The premiums for LTC insurance are based on your age [Option 1][Option 2]. This insurance is an individual plan, which means you could take the coverage with you if you were to pursue a new career or upon retirement.

For more information, you may contact [Name] [at {phone}] [or] [via email] [at {address}].

Sincerely,
[xxxxxxxxxxxxxxxxxxxxxx]

[* Other eligible family members include adult children, parents (in-law) and grandparents (in-law).]

Long term care insurance is individually underwritten by LifeSecure Insurance Company, Brighton MI. Rates are based on applicant's age; insurability is based on health history and current health conditions. Availability of benefits, amounts, options and discounts may vary by state. This is an insurance solicitation. A licensed agent may contact you.

Refer to the Policy for actual coverage amounts, terms, conditions, limitations and exclusions. Policy Series LS-0002.

Letterhead

[Date]

[Salutation]

In an effort to enhance your benefit package and to encourage you to plan well for the future, [Company Name] is introducing a new voluntary benefit: **long term care (LTC) insurance** through **LifeSecure Insurance Company**. Because we realize the importance of this insurance, [Company Name] [Option 1, 2, or 3] [Option A or B]

LTC insurance is an important financial planning and asset protection tool. It can also be viewed as an extension of one's health insurance. LTC insurance pays benefits for custodial care, as well as skilled care which becomes necessary when individuals are no longer able to perform basic activities of daily living on their own – activities such as bathing or dressing. Most of us become aware of long term care when it is needed by a parent, grandparent or other close relative. Sometimes, however, the need for long term care can happen earlier in life as the result of an illness or accident. Fortunately, LTC insurance can help at any time that covered services are needed, not just when someone is older.

LTC insurance will pay benefits for care received in a variety of settings: your own home, an assisted living facility, adult day care, hospice, or in a nursing home facility. LifeSecure's policy is designed to also allow for benefit payments for care and assistance received at home by a spouse, other close family member or a friend.

To learn more about long term care, review a premium quote, or to apply for coverage:

- 1) Go to www.YourLifeSecure.com
- 2) To learn more about LTC, click [link name to be determined].
- 3) To review premiums, click [link name to be determined].
- 4) To apply for coverage, [secure portal login instructions], then enter: **[Group Number]**.

You are encouraged to take the time to learn about this important new benefit and to determine if LTC insurance is right for you. [LTC education meetings [Option A and/or B.] [During the initial LTC insurance enrollment period, [MM/DD/YYYY – MM/DD/YYYY], you have the opportunity to apply through a simplified issue (i.e., abbreviated) application process.]

This insurance plan requires completion of an individual application. You may or may not be approved for coverage based on current or past health conditions. The premiums for LTC insurance are based on your age [Option 1][Option 2]. This insurance is an individual plan, which means you could take the coverage with you if you were to pursue a new career or upon retirement.

For more information, you may contact [Name] [at {phone}] [or] [via email] [at {address}].

Sincerely,
[xxxxxxxxxxxxxxxxxxxxxx]

[* Other eligible family members include adult children, parents (in-law) and grandparents (in-law).]

Long term care insurance is individually underwritten by LifeSecure Insurance Company, Brighton MI. Rates are based on applicant's age; insurability is based on health history and current health conditions. Availability of benefits, amounts, options and discounts may vary by state. This is an insurance solicitation. A licensed agent may contact you.

Refer to the Policy for actual coverage amounts, terms, conditions, limitations and exclusions. Policy Series LS-0002.

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Supporting Document Schedules

	Item Status:	Status
Satisfied - Item: Statement of Variability	Filed	Date: 02/23/2011
Comments:		
Attachments:		
LS-0383NC ST-V 01.10.pdf		
LS-0383C ST-V 01.10.pdf		

EXPLANATION OF VARIABILITY

MULTI-LIFE ENDORSEMENT LETTER FOR LONG TERM CARE INSURANCE NON-CONTRIBUTION LS-0383NC ST 01/10

Letterhead

- Employer or licensed entity's letter may be used for the endorsement.

Date

- Bracketed text for customization of current date

Salutation

- Bracketed text allows for two options:
 - Customized with recipients' name
 - General address to all employees of a group

Paragraph 1

1st Sentence

The "Company Name" will be customized with the name of the group or company that is endorsing the long term care insurance offer.

2nd Sentence

"Spouse or domestic partner" will be replaced as follows: **in DC:** spouse or domestic/legal partner; **in MT:** cohabitant.

To learn more...

This text will be used to provide general information about LifeSecure. When co-branded with a licensed insurance entity, this information may be omitted.

- LTC – click on "About Our Products"
- Premiums – click on "Quote Calculator"
- Apply – select "Group & Associations" under "Login" in the upper right corner of the screen

Paragraph 4

2nd Sentence

LTC Education Meetings

If LTC meetings are planned, one or both presentation options may be used:

Option A – on-site meetings

will be conducted on [Date(s),] at [Time(s),] in [Location(s)].

- Bracketed text will be customized by the agent or employer with specific dates, times and locations

Option B – online meeting (webinar)

will be conducted on-line on [Date(s),] at [Time(s)]. Contact [name] at [phone] [or] [email] to register.

- Bracketed text will be customized by the agent or employer with specific dates and times

3rd Sentence

Simplified issue underwriting

The text will only appear if the group is qualified for an abbreviated application process (simplified issue underwriting). Text in brackets will be customized when a limited enrollment period for the group is applicable.

Paragraph 5

3rd Sentence - two options for coverage effective date

Option 1

- at time of application

Option 2

- at the policy effective date

For more information

- Bracketed text will be customized with a contact name (such as an Agent or Entity contact) and phone number and/or email address

Signature

- To be customized with the Employer or Group representatives' name/signature

Footnote

- Bracketed text will appear when the offer is extended to family members.

EXPLANATION OF VARIABILITY

MULTI-LIFE ENDORSEMENT LETTER FOR LONG TERM CARE INSURANCE EMPLOYER CONTRIBUTION LS-0383C ST 01/10

Letterhead

- Employer or licensed entity's letter may be used for the endorsement.

Date

- Bracketed text for customization of current date

Salutation

- Bracketed text allows for two options:
 - Customized with recipients' name
 - General address to all employees of a group

Paragraph 1

1st Sentence

The "Company Name" will be customized with the name of the group or company that is endorsing the long term care insurance offer.

2nd Sentence

Option 1, 2, or 3

When an employer contribution is offered one of the following options will appear after the "company name":

Option 1

- will contribute \$X per month to eligible employees [and spouses/domestic partners] who are approved for coverage.
 - "X" will be customized with the employers' selected monthly contribution towards premium.
 - "spouses/domestic partners" will appear when they are included in the employer's contribution.
 - Spouses/domestic partners will be replaced as follows: **in DC:** spouses or domestic/legal partners; **in MT:** cohabitants.

Option 2

- will contribute X% of premium to eligible employees [and spouses/domestic partners] who are approved for coverage.
 - "X" will be customized with the employers' selected percentage of contribution towards premium.
 - "spouses/domestic partners" will appear when they are included in the employer's contribution.
 - Spouses/domestic partners will be replaced as follows: **in DC:** spouses or domestic/legal partners; **in MT:** cohabitants.

Options 3

- will cover the premium cost for a base LTC insurance plan for eligible employees [and spouses/domestic partners]. The base coverage will consist of a policy with a \$X Benefit Bank and a Monthly Benefit of \$Y. You may voluntarily elect to purchase additional coverage for an additional premium.
 - "X" will be customized with the employers' selected Benefit Bank amount and "Y" will be customized with the employers' selected Monthly Benefit amount for the base plan.
 - "spouses/domestic partners" will appear when they are included in the employer's contribution.
 - Spouses/domestic partners will be replaced as follows: **in DC:** spouses or domestic/legal partners; **in MT:** cohabitants.
 - Benefit Bank will be replaced as follows: **in WA:** Lifetime Benefit Amount
 - Monthly Benefit will be replaced as follows: **in PA:** Maximum Monthly Benefit Access Limit

Option A or B:

Option A

When spouse/domestic partner are not included in the employers' offer, the following text will appear:

- LifeSecure LTC insurance will also be made available on a voluntary basis to your [spouse/domestic partner], as well as other family members* who may wish to apply.
 - Spouses/domestic partners will be replaced as follows: **in DC:** spouses or domestic/legal partners; **in MT:** cohabitants.

Option B

When spouse/domestic partner is included in the employers' offer, the following text will appear:

- LifeSecure LTC insurance will also be made available on a voluntary basis to other family members* who may wish to apply.

To learn more...

This text will be used to provide general information about LifeSecure. When co-branded with a licensed insurance entity, this information may be omitted.

- LTC – click on “About Our Products”
- Premiums – click on “Quote Calculator”
- Apply – select “Group & Associations” under “Login” in the upper right corner of the screen

Paragraph 4

2nd Sentence

LTC Education Meetings

If LTC meetings are planned, one or both presentation options may be used:

Option A – on-site meetings

will be conducted on [Date(s),] at [Time(s),] in [Location(s)].

- Bracketed text will be customized by the agent or employer with specific dates, times and locations

Option B – on-line meeting (webinar)

will be conducted on-line on [Date(s),] at [Time(s)]. Contact [name] at [phone] [or] [email] to register.

- Bracketed text will be customized by the agent or employer with specific dates and times

3rd Sentence

Simplified issue underwriting

The text will only appear if the group is qualified for an abbreviated application process (simplified issue underwriting). Text in brackets will be customized when a limited enrollment period for the group is applicable.

Paragraph 5

3rd Sentence - two options for coverage effective dates

Option 1

- at time of application

Option 2

- at the policy effective date

For more information

- Bracketed text will be customized with a contact name (such as an Agent or Entity contact) and phone and/or email address

Signature

- To be customized with the Employer or Group representatives' name/signature

Footnote

- Bracketed text will appear when the offer is extended to family members.