

SERFF Tracking Number: META-127055693 State: Arkansas  
Filing Company: Teachers Insurance and Annuity Association of America State Tracking Number: 48122  
Company Tracking Number: CY 2010 RECISSION REPORTS\_TIAA  
TOI: LTC06 Long Term Care - Other Sub-TOI: LTC06.000 Long Term Care - Other  
Product Name: Individual LTCI Annual Reports  
Project Name/Number: CY 2010 Recission Reports\_TIAA/CY 2010 Recission Reports\_TIAA

## Filing at a Glance

Company: Teachers Insurance and Annuity Association of America

Product Name: Individual LTCI Annual Reports SERFF Tr Num: META-127055693 State: Arkansas

TOI: LTC06 Long Term Care - Other SERFF Status: Closed-Accepted State Tr Num: 48122  
For Informational Purposes

Sub-TOI: LTC06.000 Long Term Care - Other Co Tr Num: CY 2010 RECISSION REPORTS\_TIAA State Status: Filed-Closed

Filing Type: Form

Reviewer(s): Harris Shearer,  
Stephanie Fowler

Author: Cherise Crittenden  
Date Submitted: 03/01/2011

Disposition Date: 03/02/2011  
Disposition Status: Accepted For  
Informational Purposes  
Implementation Date:

Implementation Date Requested: On Approval  
State Filing Description:

## General Information

Project Name: CY 2010 Recission Reports\_TIAA  
Project Number: CY 2010 Recission Reports\_TIAA  
Requested Filing Mode: Informational  
Explanation for Combination/Other:  
Submission Type: New Submission  
Overall Rate Impact:

Status of Filing in Domicile:  
Date Approved in Domicile:  
Domicile Status Comments:  
Market Type: Individual  
Individual Market Type:  
Filing Status Changed: 03/02/2011  
State Status Changed: 03/02/2011  
Created By: Cherise Crittenden  
Corresponding Filing Tracking Number:

Deemer Date:  
Submitted By: Cherise Crittenden  
Filing Description:  
Please refer to the supporting document tab for the cover sheet.

## Company and Contact

### Filing Contact Information

Cherise Crittenden, Consultant-Compliance ccrittenden@metlife.com  
MKTG

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57 Green Farms Road 203-221-6594 [Phone]  
Westport, CT 06880

### Filing Company Information

Teachers Insurance and Annuity Association of America CoCode: 69345 State of Domicile: New York  
730 Third Avenue Group Code: Company Type:  
New York, NY 10017 Group Name: State ID Number:  
(212) 578-2944 ext. 2944[Phone] FEIN Number: 13-1624203

### Filing Fees

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

COMPANY	AMOUNT	DATE PROCESSED	TRANSACTION #
Teachers Insurance and Annuity Association of America	\$0.00	03/01/2011	

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## Correspondence Summary

### Dispositions

Status	Created By	Created On	Date Submitted
Accepted For Informational Purposes	Stephanie Fowler	03/02/2011	03/02/2011

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## Disposition

Disposition Date: 03/02/2011

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		Yes
Supporting Document	Application		Yes
Supporting Document	Health - Actuarial Justification		Yes
Supporting Document	Outline of Coverage		Yes
Supporting Document	RECISSION REPORT	Accepted for Informational Purposes	Yes
Supporting Document	RECISSION COVER LETTER	Accepted for Informational Purposes	Yes

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## Supporting Document Schedules

	Item Status:	Status Date:
<b>Bypassed - Item:</b> Flesch Certification <b>Bypass Reason:</b> N/A <b>Comments:</b>		
<b>Bypassed - Item:</b> Application <b>Bypass Reason:</b> N/A <b>Comments:</b>		
<b>Bypassed - Item:</b> Health - Actuarial Justification <b>Bypass Reason:</b> N/A <b>Comments:</b>		
<b>Bypassed - Item:</b> Outline of Coverage <b>Bypass Reason:</b> N/A <b>Comments:</b>		
<b>Satisfied - Item:</b> RECISSION REPORT <b>Comments:</b> <b>Attachment:</b> AR_Rescission Report TIAA 02_11.pdf	Accepted for Informational Purposes	03/02/2011

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**Item Status:** Accepted for Informational Purposes  
**Status Date:** 03/02/2011

**Satisfied - Item:** RECISSION COVER LETTER

**Comments:**

**Attachment:**

AR\_Rescission Letter TIAA 02\_11.pdf

**RESCISSION REPORTING FORM FOR  
LONG-TERM CARE POLICIES**

**FOR THE STATE OF ARKANSAS  
FOR THE REPORTING YEAR 2010**

Company Name: Metropolitan Life Insurance Company as  
administrator for Teachers Insurance Annuity  
Association of America

NAIC#: 69345

Address: P. O. Box 937  
Westport, CT 06881-0937

Phone Number: (203) 221-6553

Due: March 1, 2011

Policy Form #	Policy and Certificate #	Name of Insured	Date of Policy Issuance	Date/s Claim/s Submitted	Date of Rescission
		None			

Detailed reason for rescission: N/A



Signature

Thomas G. Reilly  
Director of Product Management & Compliance

February 22, 2011

Metropolitan Life Insurance Company  
Long-Term Care  
PO Box 937, Westport, CT 06881-0937



February 22, 2011

The Honorable Jay Bradford  
Arkansas Department of Insurance  
1200 West 3rd Street  
Little Rock, AR 72201-1904

Dear Commissioner Bradford:

Re: Metropolitan Life Insurance Company as Administrator for Teachers  
Insurance Annuity of America

In accordance with state long-term insurance requirements and/or Section 325 of Title III of the Health Insurance Portability and Accountability Act of 1996 ("HIPAA"), we are providing the following reports of rescission in this state (if any), and countrywide for calendar year 2010. This report contains information of a personal and confidential nature regarding insureds reported therein. We request that you treat this information accordingly.

Respectfully,

A handwritten signature in black ink, reading "Thomas G. Reilly". The signature is written in a cursive style with a large, stylized initial "T".

Thomas G. Reilly  
Director of Product Management & Compliance

Enclosure(s)