

SERFF Tracking Number: UNUM-127045637 State: Arkansas
Filing Company: Unum Life Insurance Company of America State Tracking Number: 48115
Company Tracking Number: ANNUAL REPORT
TOI: LTC06 Long Term Care - Other Sub-TOI: LTC06.000 Long Term Care - Other
Product Name: Long Term Care
Project Name/Number: /

Filing at a Glance

Company: Unum Life Insurance Company of America

Product Name: Long Term Care

SERFF Tr Num: UNUM-127045637 State: Arkansas

TOI: LTC06 Long Term Care - Other

SERFF Status: Closed-Accepted State Tr Num: 48115

For Informational Purposes

Sub-TOI: LTC06.000 Long Term Care - Other

Co Tr Num: ANNUAL REPORT

State Status: Filed-Closed

Filing Type: Form

Reviewer(s): Harris Shearer,
Stephanie Fowler

Authors: Lynn Bower, Shawna
Weitz

Disposition Date: 03/02/2011

Date Submitted: 02/26/2011

Disposition Status: Accepted For
Informational Purposes

Implementation Date Requested: On Approval

Implementation Date:

State Filing Description:

General Information

Project Name:

Status of Filing in Domicile:

Project Number:

Date Approved in Domicile:

Requested Filing Mode: Informational

Domicile Status Comments:

Explanation for Combination/Other:

Market Type:

Submission Type: New Submission

Overall Rate Impact:

Filing Status Changed: 03/02/2011

State Status Changed: 03/02/2011

Deemer Date:

Created By: Shawna Weitz

Submitted By: Shawna Weitz

Corresponding Filing Tracking Number:

Filing Description:

LTC 2010 Rescission reporting for Unum Life Insurance Company of America

Company and Contact

Filing Contact Information

Shawna Weitz, Contract Analyst

sweitz@unum.com

2211 Congress Street, C4556

207-575-2631 [Phone]

Portland, ME 04122

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Filing Company Information

Unum Life Insurance Company of America	CoCode: 62235	State of Domicile: Maine
2211 Congress Street	Group Code: 416	Company Type: L&H
Portland, ME 04122	Group Name:	State ID Number:
(207) 575-2211 ext. [Phone]	FEIN Number: 01-0278678	

Filing Fees

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

COMPANY	AMOUNT	DATE PROCESSED	TRANSACTION #
Unum Life Insurance Company of America	\$0.00	02/26/2011	

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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

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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	Cover Letter and Rescission Report	Accepted for Informational Purposes	Yes

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Supporting Document Schedules

	Item Status:	Status Date:
Bypassed - Item: Flesch Certification Bypass Reason: n/a Comments:		
Bypassed - Item: Application Bypass Reason: n/a Comments:		
Bypassed - Item: Health - Actuarial Justification Bypass Reason: n/a Comments:		
Bypassed - Item: Outline of Coverage Bypass Reason: n/a Comments:		
Satisfied - Item: Cover Letter and Rescission Report Comments: Attachments: UA AR LETTER.pdf UA AR.pdf	Accepted for Informational Purposes	03/02/2011

February 24, 2011

Jay Bradford
Commissioner of Insurance
State of Arkansas
Department of Insurance

Re: UNUM Life Insurance Company of America – NAIC # 423-62235
FEIN # 01-0278678
Annual Report of Rescissions of LTC Policies

Dear Commissioner Bradford:

This letter will confirm that UNUM Life Insurance Company of America did not have any rescissions of Long Term Care policies, riders, or certificates in your state for the calendar year of 2010.

Sincerely,

A handwritten signature in cursive script that reads "Shawna Weitz". The signature is written in black ink and is positioned above the typed name and title.

Shawna Weitz
Contract Analyst
Long Term Care Compliance

**Rescission Reporting for Long Term Care Policies
For the State of Arkansas
For the Reporting Year of 2010**

Due: March 1st Annually

Company Name: UNUM Life Insurance Company of America
Company Address: 2211 Congress Street
Portland, Maine, 04122

Contact: Shawna Weitz, Contract Analyst
Phone Number: (207) 575-2631
Date: 2/17/2011

Instructions:

The purpose of this form is to report all rescissions of long term care policies or certificates. Those rescissions voluntarily effectuated by an insured are not required to be included in this report. Please furnish one form per rescission.

Policy Form #	Policy and certificate #	Name of Insured	Date of Policy Issuance	Date(s) Claim(s) Submitted	Date of Rescission

Detailed rescission:

No Rescissions for 2010
