

SERFF Tracking Number: CNSC-127108682 State: Arkansas  
Filing Company: Consec Life Insurance Company State Tracking Number: 48381  
Company Tracking Number:  
TOI: L09I Individual Life - Flexible Premium Sub-TOI: L09I.001 Single Life  
Adjustable Life  
Product Name: CLIC-3001-AR - revised cost of Insurance  
Project Name/Number: /

## Filing at a Glance

Company: Consec Life Insurance Company

Product Name: CLIC-3001-AR - revised cost of Insurance SERFF Tr Num: CNSC-127108682 State: Arkansas

TOI: L09I Individual Life - Flexible Premium SERFF Status: Closed-Accepted State Tr Num: 48381  
Adjustable Life For Informational Purposes  
Sub-TOI: L09I.001 Single Life Co Tr Num: State Status: Filed-Closed  
Filing Type: Form Reviewer(s): Linda Bird  
Authors: David Dennie, Janet Jones Disposition Date: 04/04/2011  
Date Submitted: 04/01/2011 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: Not Filed  
Project Number: Date Approved in Domicile:  
Requested Filing Mode: Informational Domicile Status Comments:  
Explanation for Combination/Other: Market Type: Individual  
Submission Type: New Submission Individual Market Type:  
Overall Rate Impact: Filing Status Changed: 04/04/2011  
State Status Changed: 04/04/2011  
Deemer Date: Created By: Janet Jones  
Submitted By: Janet Jones Corresponding Filing Tracking Number:  
Filing Description:  
Pursuant to Arkansas Bulletin 11-83, we are filing changes to the cost of insurance charges and expense charges used with previously approved Flexible Premium Adjustable Life Insurance Policy, Form CLIC-3001-AR. We are notifying your department 60 days in advance of the proposed changes.

I am attaching the revised cost of insurance rates. Please note that the revised cost of insurance rates are all less than or equal to the guaranteed cost of insurance rates which were originally filed and approved on December 4, 1998. The revised rates are consistent with the form's description of cost of insurance rates contained in the Nonforfeiture Provision section.

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I am also attaching revised expense charges. The revised expense charges are all less than or equal to the guaranteed maximum expense charges which were originally filed and approved on December 4, 1998 and are Consistent with the form's description of expense charges shown on the Policy 'Data Page.

An officer's certification to our review of the guidelines and that the form complies with these guidelines is attached. We have also completed the Consent to Submit Rates and/or Cost Bases for Approval form.

If you have any questions or need any additional information, please do not hesitate to contact me.

Sincerely,

Janet Jones, HIA, AIRC  
Product Filing Analyst  
Policy Approval & Compliance  
CNO Financial Group  
1-800-888-4918 extension 73177

## Company and Contact

### Filing Contact Information

Janet Jones, Janet\_Jones@conseco.com  
11815 N. Pennsylvania Street 800-888-4918 [Phone] 3177 [Ext]  
Carmel, IN 46032 317-817-2333 [FAX]

### Filing Company Information

Conseco Life Insurance Company CoCode: 65900 State of Domicile: Indiana  
11815 N. Pennsylvania Street Group Code: 233 Company Type:  
Carmel, IN 46032 Group Name: State ID Number:  
(800) 888-4918 ext. [Phone] FEIN Number: 04-2299444

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## Filing Fees

SERFF Tracking Number: CNSC-127108682 State: Arkansas  
Filing Company: Conesco Life Insurance Company State Tracking Number: 48381  
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Fee Required? Yes  
Fee Amount: \$50.00  
Retaliatory? No  
Fee Explanation: Domiciliary state Indiana \$35 per form.

Arkansas \$50  
Per Company: No

COMPANY	AMOUNT	DATE PROCESSED	TRANSACTION #
Conesco Life Insurance Company	\$50.00	04/01/2011	46173577

SERFF Tracking Number: CNSC-127108682 State: Arkansas  
Filing Company: Conseco Life Insurance Company State Tracking Number: 48381  
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TOI: L091 Individual Life - Flexible Premium Sub-TOI: L091.001 Single Life  
Adjustable Life  
Product Name: CLIC-3001-AR - revised cost of Insurance  
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## Correspondence Summary

### Dispositions

Status	Created By	Created On	Date Submitted
Accepted For Informational Purposes	Linda Bird	04/04/2011	04/04/2011

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## Disposition

Disposition Date: 04/04/2011

Implementation Date:

Status: Accepted For Informational Purposes

Comment:

Rate data does NOT apply to filing.

SERFF Tracking Number: CNSC-127108682 State: Arkansas  
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<b>Schedule</b>	<b>Schedule Item</b>	<b>Schedule Item Status</b>	<b>Public Access</b>
<b>Supporting Document</b>	Flesch Certification		No
<b>Supporting Document</b>	Application		No
<b>Supporting Document</b>	Health - Actuarial Justification		No
<b>Supporting Document</b>	Outline of Coverage		No
<b>Supporting Document</b>	Cover Letter		Yes
<b>Supporting Document</b>	Officer's Certification		Yes
<b>Supporting Document</b>	Signed Consent to Submit Rates and/or Cost Bases for Approval		Yes

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## Supporting Document Schedules

	<b>Item Status:</b>	<b>Status Date:</b>
<b>Satisfied - Item:</b> Cover Letter		
<b>Comments:</b>		
<b>Attachment:</b> AR Cover Letter.pdf		

	<b>Item Status:</b>	<b>Status Date:</b>
<b>Satisfied - Item:</b> Officer's Certification		
<b>Comments:</b> Officer's Certification to Bulletin 11-83.		
<b>Attachment:</b> AR Officer's Certification.pdf		

	<b>Item Status:</b>	<b>Status Date:</b>
<b>Satisfied - Item:</b> Signed Consent to Sbumit Rates and/or Cost Bases for Approval		
<b>Comments:</b>		
<b>Attachment:</b> CONSENT TO SUBMIT RATES AND.pdf		



CNO FINANCIAL GROUP

**Conseco Life Insurance Company**

11825 N. Pennsylvania St.  
Carmel, IN 46032

April 1, 2011

Arkansas Insurance Department  
Life & Health Division  
1200 West Third Street  
Little Rock, AR 72201-1904

**Re: Conseco Life Insurance Company / NAIC No.: 65900 / FEIN No.: 04-2299444**  
CLIC-3001-AR – Flexible Premium Adjustable Life Insurance Policy – approved 12/4/1998

Dear Sir or Madam:

Pursuant to Arkansas Bulletin 11-83, we are filing changes to the cost of insurance charges and expense charges used with previously approved Flexible Premium Adjustable Life Insurance Policy, Form CLIC-3001-AR. We are notifying your department 60 days in advance of the proposed changes.

I am attaching the revised cost of insurance rates. Please note that the revised cost of insurance rates are all less than or equal to the guaranteed cost of insurance rates which were originally filed and approved on December 4, 1998. The revised rates are consistent with the form's description of cost of insurance rates contained in the Nonforfeiture Provision section.

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Sincerely,

Janet Jones, HIA, AIRC  
Product Filing Analyst  
Policy Approval & Compliance  
CNO Financial Group  
1-800-888-4918 extension 73177

**CONSECO LIFE INSURANCE COMPANY**

**OFFICER'S CERTIFICATION**

**TO ARKANSAS BULLETIN 11-83**

**CLIC-3001-AR**

I hereby certify, as an officer of the company, that all the guidelines to Bulletin 11-83 have been reviewed and that the form complies with these guidelines.

A handwritten signature in black ink, appearing to read 'Mathias E. Brown', written in a cursive style.

---

Mathias E. Brown, Assistant Secretary

Date:

**CONSENT TO SUBMIT RATES AND/OR  
COST BASES FOR APPROVAL**

The Conseco Life Insurance Company ("Company") of Carmel, Indiana does hereby consent and agree:  
(Company Name) (City and State)

- A) that all premium rates and/or cost bases both "maximum" and "current or projected," used in relation to policy form number CLIC-3001-AR must be filed with the Insurance Commissioner for the State of Arkansas ("Commissioner") at least sixty (60) days prior to their proposed effective date. Such rates and/or cost bases shall be deemed effective sixty (60) days after they are filed with the Commissioner, unless the Commissioner shall approve or disapprove such rates and/or cost bases prior to the expiration of sixty (60) days, or
- B) that where the policy is a flexible or indeterminate premium whole life policy which provides for frequent changes in interest rates based on financial market conditions, the company may file a range of rates will stay within and will notify the Department at least sixty days prior to any change in the range of rates. The company must also document the method used to calculate its premium and range of rates

Conseco Life Insurance Company  
(Company Name )

BY



\_\_\_\_\_  
Mathias E. Brown  
(Name)

\_\_\_\_\_  
Assistant Secretary  
(Title or Position)