

SERFF Tracking Number: GARD-127121352 State: Arkansas
 Filing Company: Berkshire Life Insurance Company of America State Tracking Number: 48464
 Company Tracking Number: DISCOUNT 2011
 TOI: H111 Individual Health - Disability Income Sub-TOI: H111.007 Long Term - Related to marketing with employer or association groups
 Product Name: Discount 2011
 Project Name/Number: /

Filing at a Glance

Company: Berkshire Life Insurance Company of America

Product Name: Discount 2011

SERFF Tr Num: GARD-127121352 State: Arkansas

TOI: H111 Individual Health - Disability Income

SERFF Status: Closed-Approved- Closed State Tr Num: 48464

Sub-TOI: H111.007 Long Term - Related to marketing with employer or association groups

Co Tr Num: DISCOUNT 2011

State Status: Approved-Closed

Filing Type: Rate

Author: Cindy Ego

Reviewer(s): Rosalind Minor

Date Submitted: 04/11/2011

Disposition Date: 04/14/2011

Disposition Status: Approved-Closed

Implementation Date Requested: On Approval

Implementation Date:

State Filing Description:

General Information

Project Name:

Status of Filing in Domicile: Pending

Project Number:

Date Approved in Domicile:

Requested Filing Mode: Review & Approval

Domicile Status Comments:

Explanation for Combination/Other:

Market Type: Individual

Submission Type: New Submission

Individual Market Type:

Overall Rate Impact:

Filing Status Changed: 04/14/2011

State Status Changed: 04/14/2011

Deemer Date:

Created By: Cindy Ego

Submitted By: Cindy Ego

Corresponding Filing Tracking Number:

Filing Description:

Berkshire Life Insurance Company of America is submitting a 10% Preferred Occupation discount to be applied to rates previously approved by your Department for the policy forms listed below as well as all related riders. This discount will be available to certain eligible occupations that have demonstrated better morbidity than their occupation class.

Policy Form Approval Date File Number

1400 (06/10) 03/02/2010 GARD-126519729

1500 (06/10) 03/02/2010 GARD-126519586

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1600 (06/10) 03/04/2010 GARD-126519929
 3200 (01/10) 09/30/2009 GARD-126295408
 4200 (01/10) 09/17/2009 GARD-126259672

Additionally, we are filing a discount which will be available to eligible insureds who choose a 24-month Maximum Benefit Period for Mental and/or Substance-Related Disorders. This discount may be applied to rates for policies 1400 (06/10), 1500 (06/10) and 1600 (06/10) along with their related riders which were approved as noted above.

Company and Contact

Filing Contact Information

Cindy Ego, Compliance Specialist
 700 South Street 413-395-4319 [Phone]
 Pittsfield, MA 01201

Filing Company Information

Berkshire Life Insurance Company of America CoCode: 71714 State of Domicile: Massachusetts
 700 South Street Group Code: Company Type:
 Pittsfield, MA 01201 Group Name: State ID Number:
 (413) 499-4321 ext. [Phone] FEIN Number: 75-1277524

Filing Fees

Fee Required? Yes
 Fee Amount: \$150.00
 Retaliatory? Yes
 Fee Explanation: Rates - \$150
 Per Company: No

COMPANY	AMOUNT	DATE PROCESSED	TRANSACTION #
Berkshire Life Insurance Company of America	\$150.00	04/11/2011	46460778

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Correspondence Summary

Dispositions

Status	Created By	Created On	Date Submitted
Approved-Closed	Rosalind Minor	04/14/2011	04/14/2011

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Disposition

Disposition Date: 04/14/2011
 Implementation Date:
 Status: Approved-Closed
 Comment:

Company Name:	Overall % Indicated Change:	Overall % Rate Impact:	Written Premium Change for this Program:	# of Policy Holders Affected for this Program:	Written Premium for this Program:	Maximum % Change (where required):	Minimum % Change (where required):
Berkshire Life Insurance Company of America	0.000%	0.000%	\$0	0	\$0	0.000%	0.000%

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Schedule	Schedule Item	Schedule Item Status	Public Access
Supporting Document	Health - Actuarial Justification	Approved-Closed	No

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Rate Information

Rate data applies to filing.

Filing Method:

Rate Change Type:

Neutral

Overall Percentage of Last Rate Revision:

0.000%

Effective Date of Last Rate Revision:

Filing Method of Last Filing:

Company Rate Information

Company Name:	Company Rate Change:	Overall % Indicated Change:	Overall % Rate Impact:	Written Premium Change for this Program:	# of Policy Holders Affected for this Program:	Written Premium for this Program:	Maximum % Change (where required):	Minimum % Change (where required):
Berkshire Life Insurance Company of America	N/A	0.000%	0.000%	\$0	0	\$0	0.000%	0.000%