

SERFF Tracking Number: SFCM-127092476 State: Arkansas  
Filing Company: State Farm Mutual Automobile Insurance Company State Tracking Number: 48309  
Company Tracking Number: IH-HIXXPS.1 (XX REPRESENTS THE STATES ABBREVIATION)  
TOI: MS06 Medicare Supplement - Other Sub-TOI: MS06.000 Medicare Supplement - Other  
Product Name: IH-HIXXPS.1 (XX represents the states abbreviation)  
Project Name/Number: IH-HIXXPS.1 (XX represents the states abbreviation)/IH-HIXXPS.1 (XX represents the State abbr.)

## Filing at a Glance

Company: State Farm Mutual Automobile Insurance Company

Product Name: IH-HIXXPS.1 (XX represents the states abbreviation) SERFF Tr Num: SFCM-127092476 State: Arkansas

TOI: MS06 Medicare Supplement - Other SERFF Status: Closed-Filed-Closed State Tr Num: 48309

Sub-TOI: MS06.000 Medicare Supplement - Other Co Tr Num: IH-HIXXPS.1 (XX REPRESENTS THE STATES ABBREVIATION) State Status: Filed-Closed

Filing Type: Advertisement

Reviewer(s): Stephanie Fowler  
Authors: Tammie Mills, Gerald Younge  
Disposition Date: 04/05/2011

Date Submitted: 03/23/2011  
Disposition Status: Filed-Closed  
Implementation Date:

Implementation Date Requested:

State Filing Description:

## General Information

Project Name: IH-HIXXPS.1 (XX represents the states abbreviation)

Project Number: IH-HIXXPS.1 (XX represents the State abbr.)

Requested Filing Mode: Review & Approval

Status of Filing in Domicile: Pending

Date Approved in Domicile:

Domicile Status Comments: The State specific page for Illinois have been filed and are currently pending.

Explanation for Combination/Other:

Submission Type: New Submission

Overall Rate Impact:

Market Type: Individual

Individual Market Type:

Filing Status Changed: 04/05/2011

State Status Changed: 04/05/2011

Deemer Date:

Submitted By: Gerald Younge

Filing Description:

Created By: Gerald Younge

Corresponding Filing Tracking Number:

Re: State Farm Mutual Automobile Insurance Company

Individual Medicare Supplement

NAIC #176-25178

Medicare Supplement Rate Quote pages for Arkansas

SERFF Tracking Number: SFCM-127092476 State: Arkansas  
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Form:

IH-HIARPS.1 What Type of Coverage Screen for Arkansas

Enclosed for filing on behalf of the State Farm Mutual Automobile Insurance Company of Bloomington, Illinois are the referenced Medicare Supplement internet rate quote pages for Arkansas.

These pages will be available on Statefarm.com when someone requests a Medicare Supplement rate quote in Arkansas.

We filed the original flow of these Statefarm.com pages in Arkansas and we received an approval on 12/27/2001. The content/benefits on the original pages, IH-HLTHWELC.1, IH-MSARGI.1 and IH-MSARRQ.1 have not changed.

We have combined IH-HIARPS and IH-MSARCI.1. The new form number is IH-HIARPS.1. We have combined these two pages to make the process easier for the consumer.

We have also added the Hospice: Part A Coinsurance benefit to Plans A, C and F.

The format and colors that are on the internet pages are variable and may change from year to year.

The state specific pages for Illinois have been filed and are currently pending.

## Company and Contact

### Filing Contact Information

Gerald Younge, Tech - Contracts & Compliance gerald.younge.jbnp@statefarm.com

1 State Farm Plaza 309-766-0406 [Phone]

Bloomington, IL 61710-0001 309-766-8483 [FAX]

### Filing Company Information

State Farm Mutual Automobile Insurance Company CoCode: 25178 State of Domicile: Illinois

One State Farm Plaza Group Code: 176 Company Type:

Laura Walters / Marketing D-3 Group Name: State ID Number:

Bloomington, IL 61710 FEIN Number: 37-0533100

(309) 763-8104 ext. [Phone]

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## Filing Fees

Fee Required? Yes  
Fee Amount: \$50.00  
Retaliatory? No  
Fee Explanation: filing fee, \$50.00 per form filing one form at this time = \$50.00  
Per Company: No

COMPANY	AMOUNT	DATE PROCESSED	TRANSACTION #
State Farm Mutual Automobile Insurance Company	\$50.00	03/23/2011	45886093

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## Correspondence Summary

### Dispositions

Status	Created By	Created On	Date Submitted
Filed-Closed	Stephanie Fowler	04/05/2011	04/05/2011

### Objection Letters and Response Letters

Objection Letters				Response Letters		
Status	Created By	Created On	Date Submitted	Responded By	Created On	Date Submitted
Pending Industry Response	Stephanie Fowler	03/23/2011	03/23/2011	Tammie Mills	04/03/2011	04/03/2011

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## Disposition

Disposition Date: 04/05/2011

Implementation Date:

Status: Filed-Closed

Comment:

Rate data does NOT apply to filing.

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<b>Schedule Form (revised)</b>	<b>Schedule Item</b>	<b>Schedule Item Status</b>	<b>Public Access</b>
<b>Form</b>	What Type of Coverage Screen for Arkansas	Filed-Closed	Yes
<b>Form</b>	What Type of Coverage Screen for Arkansas	Disapproved	No

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## Objection Letter

Objection Letter Status Pending Industry Response  
Objection Letter Date 03/23/2011  
Submitted Date 03/23/2011  
Respond By Date 04/22/2011

Dear Gerald Younge,

This will acknowledge receipt of the captioned filing.

### Objection 1

- What Type of Coverage Screen for Arkansas, IH-HIARPS.1 (Form)

Comment: The second bullet under the Medicare Supplement popup needs to be hard coded onto the actual web page. This statement should be easily found; not everyone will open that link to see this information.

Please feel free to contact me if you have questions.

Sincerely,  
Stephanie Fowler

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## Response Letter

Response Letter Status Submitted to State  
 Response Letter Date 04/03/2011  
 Submitted Date 04/03/2011

Dear Stephanie Fowler,

### Comments:

We are responding to the objection that we received on 3/23/2011.

### Response 1

Comments: We have made the requested change and added the updated PDF.

### Related Objection 1

Applies To:

- What Type of Coverage Screen for Arkansas, IH-HIARPS.1 (Form)

Comment:

The second bullet under the Medicare Supplement popup needs to be hard coded onto the actual web page. This statement should be easily found; not everyone will open that link to see this information.

### Changed Items:

No Supporting Documents changed.

### Form Schedule Item Changes

Form Name	Form Number	Edition Date	Form Type	Action	Action Specific Data	Readability Score	Attach Document
What Type of Coverage Screen for Arkansas	IH-HIARPS.1		Advertising	Revised	paper filed		Arkansas.pdf
<b>Previous Version</b>							
What Type of Coverage Screen for Arkansas	IH-HIARPS.1		Advertising	Revised	paper filed		Arkansas.pdf



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## Form Schedule

### Lead Form Number:

Schedule Item Status	Form Number	Form Type	Form Name	Action	Action Specific Data	Readability	Attachment
Filed-Closed 04/05/2011	IH-HIARPS.1	Advertising	What Type of Coverage Screen for Arkansas	Revised	Replaced Form #: IH-HIARPS Previous Filing #: paper filed		Arkansas.pdf

Arkansas – Medicare Supplement

**STATE FARM INSURANCE** Health Rate Quote [FAQ](#) [Cancel Quote](#)

### Policy Information

Are you a current State Farm customer?  Yes  No

Please select type of coverage  Hospital Income  Medicare Supplement\*

Please select type of policy for Medicare Supplement  Plan A  Plan C  Plan F

\* These policies are not connected with or endorsed by the United States Government or the Federal Medicare program.

NAIC# 25178  
IH-HIARPS.1 [Continue](#)

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**Medicare Supplement**

- Covers the coinsurance and certain benefits and deductibles not covered by Medicare. When combined with Medicare, it provides a high level of health insurance protection.

**Your Agent** [Change](#)  
**Kurt Lenschow**  
[More about Kurt](#)  
2309 Village Green Place  
Suite C  
Champaign, IL 61822-7668  
(217) 352-1411  
**Office Hours** M-F 8:30am-5pm  
S 9am-12pm  
After Hours by Appointment  
[Forward your quote to Kurt](#)

Arkansas – Medicare Supplement – Plan A

**STATE FARM INSURANCE** Health Rate Quote [FAQ](#) [Cancel Quote](#)

### Policy Information

Are you a current State Farm customer?  Yes  No

Please select type of coverage  Hospital Income  Medicare Supplement\*

Please select type of policy for Medicare Supplement  Plan A  Plan C  Plan F

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**Plan A**

- Hospitalization: Part A coinsurance plus coverage for 365 additional days after Medicare benefits end
- Medical Expenses: Part B coinsurance
- Blood: First three pints of blood each year
- Hospice: Part A Coinsurance

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Arkansas – Medicare Supplement – Plan C

**STATE FARM**  
Auto  
Life Fire  
INSURANCE

**Health Rate Quote** [FAQ](#) [Cancel Quote](#)

### Policy Information

Are you a current State Farm customer?  Yes  No

Please select type of coverage  Hospital Income  **Plan C**

Please select type of policy for Medicare Supplement  **Plan C**  [Help for Plan C](#)

**Plan C**

- Part A Deductible
- Part B Deductible
- Hospitalization: Part A coinsurance plus coverage for 365 additional days after Medicare benefits end
- Medical Expenses: Part B coinsurance
- Blood: First three pints of blood each year
- Skilled Nursing Coinsurance
- Foreign Travel Emergency
- Hospice: Part A coinsurance

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Arkansas – Medicare Supplement – Plan F

**STATE FARM**  
Auto  
Life Fire  
INSURANCE

**Health Rate Quote** [FAQ](#) [Cancel Quote](#)

### Policy Information

Are you a current State Farm customer?  Yes  No

Please select type of coverage  Hospital Income  **Plan F**

Please select type of policy for Medicare Supplement  **Plan F**  [Help for Plan F](#)

**Plan F**

- Part A Deductible
- Part B Deductible
- Hospitalization: Part A coinsurance plus coverage for 365 additional days after Medicare benefits end
- Medical Expenses: Part B coinsurance
- Blood: First three pints of blood each year
- Skilled Nursing Coinsurance
- Part B Excess (up to Federal/State mandated limits)
- Foreign Travel Emergency
- Hospice: Part A coinsurance

**Your Agent** [Change](#)



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