

SERFF Tracking Number: HLAD-127263443 State: Arkansas  
 Filing Company: HMO Partners, Inc. d/b/a Health Advantage State Tracking Number: 49054  
 Company Tracking Number: 34-50 R6/11  
 TOI: HOrg02G Group Health Organizations - Health Sub-TOI: HOrg02G.002C Any Size Group - HMO  
 Maintenance (HMO)  
 Product Name: Special Amendment  
 Project Name/Number: Hiwasse Amendment/34-50 R6/11

## Filing at a Glance

Company: HMO Partners, Inc. d/b/a Health Advantage

Product Name: Special Amendment SERFF Tr Num: HLAD-127263443 State: Arkansas  
 TOI: HOrg02G Group Health Organizations - Health Maintenance (HMO) SERFF Status: Closed-Approved- Closed State Tr Num: 49054  
 Sub-TOI: HOrg02G.002C Any Size Group - HMO Co Tr Num: 34-50 R6/11 State Status: Approved-Closed  
 Filing Type: Form Reviewer(s): Rosalind Minor  
 Authors: Christi Kittler, Yvonne McNaughton, Rita Thatcher, Evelyn Laney Disposition Date: 06/15/2011  
 Date Submitted: 06/14/2011 Disposition Status: Approved-Closed  
 Implementation Date Requested: On Approval Implementation Date:  
 State Filing Description:

## General Information

Project Name: Hiwasse Amendment Status of Filing in Domicile: Pending  
 Project Number: 34-50 R6/11 Date Approved in Domicile:  
 Requested Filing Mode: Review & Approval Domicile Status Comments: Arkansas is the state of domicile.  
 Explanation for Combination/Other: Market Type: Group  
 Submission Type: New Submission Group Market Size: Small and Large  
 Group Market Type: Employer Overall Rate Impact:  
 Filing Status Changed: 06/15/2011 Deemer Date:  
 State Status Changed: 06/15/2011 Submitted By: Evelyn Laney  
 Created By: Evelyn Laney  
 Corresponding Filing Tracking Number:  
 PPACA: Not PPACA-Related  
 PPACA Notes: null  
 Filing Description:  
 Attached please find form 34-50 R6/11 for your review and approval if indicated.  
 This amendment provides a waiver of the eligibility period for rehired employees. It was originally approved on January

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7, 2009, however more verbiage was added to bring it up to standards for this group. It is specifically designed for employees of Hiwasse but can be used for any group that has these same requirements. Also attached is a Flesch Reading Ease score certification signed by an officer of the company as required by Arkansas Code Annotated §23-80-206(d).

I certify that the submission meets the provisions of Arkansas Insurance Department Rule & Regulation 19. I further certify that the Life and Health Guaranty Association Notices required by Arkansas Insurance Department Rule & Regulation 49 and the consumer information notice required by Arkansas Code Annotated §23-79-138 are incorporated in the Evidences of Coverage

Please feel free to contact me at 378-2165 with any questions you may have.

## Company and Contact

### Filing Contact Information

Evelyn Laney, Senior Compliance Analyst exlaney@arkbluecross.com  
 320 West Capitol, Ste 211 501-378-2165 [Phone]  
 Little Rock, AR 72201 501-378-2975 [FAX]

### Filing Company Information

HMO Partners, Inc. d/b/a Health Advantage CoCode: 95442 State of Domicile: Arkansas  
 320 West Capitol Group Code: Company Type:  
 Little Rock, AR 72203-8069 Group Name: State ID Number: N/A  
 (501) 378-2967 ext. [Phone] FEIN Number: 71-0747497

## Filing Fees

Fee Required? Yes  
 Fee Amount: \$50.00  
 Retaliatory? No  
 Fee Explanation: \$50.00  
 Per Company: No

COMPANY	AMOUNT	DATE PROCESSED	TRANSACTION #
HMO Partners, Inc. d/b/a Health Advantage	\$50.00	06/14/2011	48697678

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## Correspondence Summary

### Dispositions

Status	Created By	Created On	Date Submitted
Approved-Closed	Rosalind Minor	06/15/2011	06/15/2011

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## **Disposition**

Disposition Date: 06/15/2011

Implementation Date:

Status: Approved-Closed

HHS Status: HHS Approved

State Review: Reviewed-No Actuary

Comment:

Rate data does NOT apply to filing.

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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	Approved-Closed	Yes
<b>Supporting Document</b>	Application	Approved-Closed	Yes
<b>Supporting Document</b>	Health - Actuarial Justification	Approved-Closed	Yes
<b>Supporting Document</b>	PPACA Uniform Compliance Summary	Approved-Closed	Yes
<b>Form</b>	Amendment	Approved-Closed	Yes

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## Form Schedule

**Lead Form Number: 34-50 R6/11**

Schedule Item	Form Number	Form Type	Form Name	Action	Action Specific Data	Readability	Attachment
Approved-Closed 06/15/2011	34-50 R6/11	Certificate Amendmen t, Insert Page, Endorseme nt or Rider	Amendment	Revised	Replaced Form #: 34-50 R6/11 Previous Filing #: 34-50 1/09	40.800	34-50 R6- 11Hiwasse(12 -mo).pdf



## AMENDMENT TO THE HEALTH ADVANTAGE EVIDENCE OF COVERAGE

The Health Advantage Evidence of Coverage, Form 31-05, is hereby amended effective December 1, 2008.

**ELIGIBILITY STANDARDS**, Subsection 6.2 is hereby amended to add the following new subsection.

**Effective Date for Subscribers Rehired by Group.** Subject to all other terms, conditions, exclusions and limitation of the Plan as set forth in this Evidence of Coverage, a Subscriber who is rehired after being laid off for no more than twelve (12) months, will be exempt from satisfying the Waiting Period. The Subscriber must have had coverage in the employee health benefit plan prior to being laid off. Coverage will be effective the first of the Contract Month following his or her rehire date.

This amendment becomes a part of the Health Advantage Evidence of Coverage. All provisions of the Evidence of Coverage which are not contrary to the provisions of this amendment remain in full force and effect.

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David F. Bridges, President  
HMO PARTNERS, INC, d/b/a/ HEALTH ADVANTAGE  
P.O. Office Box 8069, Little Rock, Arkansas 72203-8069

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## Supporting Document Schedules

		Item Status:	Status Date:
<b>Satisfied - Item:</b>	Flesch Certification	Approved-Closed	06/15/2011
<b>Comments:</b>	See attached.		
<b>Attachment:</b>	Flesch Certification Form HA 34-50 R6-11.pdf		
<b>Bypassed - Item:</b>	Application	Approved-Closed	06/15/2011
<b>Bypass Reason:</b>	Not needed.		
<b>Comments:</b>			
<b>Bypassed - Item:</b>	Health - Actuarial Justification	Approved-Closed	06/15/2011
<b>Bypass Reason:</b>	Not needed.		
<b>Comments:</b>			
<b>Bypassed - Item:</b>	PPACA Uniform Compliance Summary	Approved-Closed	06/15/2011
<b>Bypass Reason:</b>	Not PPACA related.		
<b>Comments:</b>			

# Health Advantage



An Independent Licensee of the Blue Cross and Blue Shield Association

**Re: HMO Partners, Inc. d/b/a Health Advantage  
Form Nos. 34-50 R6/11**

## **FLESCH READING EASE CERTIFICATION**

This is to certify that the above referenced document has achieved a Flesch Reading Ease Score average of 40.8 and complies with the requirements of A.C.A. §23-80-201 *et. seq.*, cited as the Life and Disability Insurance Policy Language Simplification Act.

*Dail Brulje*

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Name

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President  
Title

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June 14, 2011  
Date