

SERFF Tracking Number: UNAM-127319522 State: Arkansas  
Filing Company: Union Bankers Insurance Company State Tracking Number: 49289  
Company Tracking Number:  
TOI: LTC06 Long Term Care - Other Sub-TOI: LTC06.000 Long Term Care - Other  
Product Name: LONG TERM CARE CLAIMS DENIED - 2010  
Project Name/Number: /

## Filing at a Glance

Company: Union Bankers Insurance Company

Product Name: LONG TERM CARE CLAIMS DENIED - 2010 SERFF Tr Num: UNAM-127319522 State: Arkansas

TOI: LTC06 Long Term Care - Other SERFF Status: Closed-Accepted State Tr Num: 49289  
For Informational Purposes

Sub-TOI: LTC06.000 Long Term Care - Other Co Tr Num: State Status: Filed-Closed  
Filing Type: Advertisement Reviewer(s): Stephanie Fowler  
Author: Alicia Phillips-Guiler Disposition Date: 07/15/2011  
Date Submitted: 07/13/2011 Disposition Status: Accepted For Informational Purposes  
Implementation Date: Implementation Date:

Implementation Date Requested:

State Filing Description:

## General Information

Project Name:

Project Number:

Requested Filing Mode:

Explanation for Combination/Other:

Submission Type: New Submission

Overall Rate Impact:

Deemer Date:

Submitted By: Alicia Phillips-Guiler

Filing Description:

Long Term Care Report of Denied Claims – Reporting Year 2010

Status of Filing in Domicile:

Date Approved in Domicile:

Domicile Status Comments:

Market Type: Individual

Individual Market Type:

Filing Status Changed: 07/15/2011

State Status Changed: 07/15/2011

Created By: Alicia Phillips-Guiler

Corresponding Filing Tracking Number:

Dear Sir/Madam:

Enclosed is the Claims Denial Reporting Form Long-Term Care Insurance for Arkansas for reporting year 2010.

Should you have any questions, please contact me at 407-444-4355 or [aguiler@universalamerican.com](mailto:aguiler@universalamerican.com)

Sincerely,

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Alicia P. Guiler  
 Senior Compliance Analyst

## Company and Contact

### Filing Contact Information

Alicia Guiler, AGuiler@uafc.com  
 P.O. Box 958465 407-628-1776 [Phone] 8334 [Ext]  
 Lake Mary, FL 32795-8465 407-628-9021 [FAX]

### Filing Company Information

Union Bankers Insurance Company CoCode: 69701 State of Domicile: Texas  
 1001 Heathrow Park Lane Group Code: 953 Company Type:  
 Suite 5001 Group Name: State ID Number:  
 Lake Mary, FL 32746 FEIN Number: 75-0860066  
 (407) 995-8000 ext. [Phone]

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## Filing Fees

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

COMPANY	AMOUNT	DATE PROCESSED	TRANSACTION #
Union Bankers Insurance Company	\$0.00	07/13/2011	

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## Correspondence Summary

### Dispositions

Status	Created By	Created On	Date Submitted
Accepted For Informational Purposes	Stephanie Fowler	07/15/2011	07/15/2011

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## Disposition

Disposition Date: 07/15/2011

Implementation Date:

Status: Accepted For Informational Purposes

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>	LONG TERM CARE CLAIMS DENIED	Accepted for Informational Purposes	No

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## Supporting Document Schedules

	<b>Item Status:</b>	<b>Status</b>
<b>Satisfied - Item:</b> LONG TERM CARE CLAIMS DENIED	Accepted for Informational Purposes	<b>Date:</b> 07/15/2011
<b>Comments:</b>		
<b>Attachment:</b>		
AR - UBIC 2010.pdf		

July 13, 2011

Life and Health Division  
Arkansas Department of Insurance  
1200 W. Third Street  
Little Rock, AR 72201-1904

RE: **UNION BANKERS INSURANCE COMPANY** **NAIC# 69701**  
Long Term Care Report of Denied Claims – Reporting Year 2010

Dear Sir/Madam:

Attached is a copy of the Claims Denial Reporting Form Long-Term Care Insurance for Arkansas for reporting year 2010.

Should you have any questions, please contact me at 407-444-4355 or [aguiler@universalamerican.com](mailto:aguiler@universalamerican.com)

Sincerely,



Alicia P. Guiler  
Senior Compliance Analyst

## Claims Denial Reporting Form Long-Term Care Insurance

For the State of Arkansas

For the Reporting Year of 2010  
Due: June 30 annually

Company Name: Union Bankers Insurance

Company Address: 1001 Heathrow Park Lane  
Lake Mary, FL 32795

Company NAIC Number: 69701

Contact Person: Alicia P. Guiler Phone Number: 407-444-4355

Line of Business:  Individual  Group

### Instructions

The purpose of this form is to report all long-term care claim denials under in force long-term care insurance policies. "Denied" means a claim that is not paid for any reason other than for claims not paid for failure to meet the waiting period or because of an applicable preexisting condition.

		State Data	Nationwide Data <sup>1</sup>
1	Total Number of Long-Term Care Claims Reported	0	5,617
2	Total Number of Long-Term Care Claims Denied/Not Paid	0	87
3	Number of Claims Not Paid due to Preexisting Condition Exclusion	0	0
4	Number of Claims Not Paid due to Waiting (Elimination) Period Not Met	0	19
5	Net Number of Long-Term Care Claims Denied for Reporting Purposes (Line 2 Minus Line 3 Minus Line 4)	0	68
6	Percentage of Long-Term Care Claims Denied of Those Reported (Line 5 Divided By Line 1)	0	2.90
7	Number of Long-Term Care Claim Denied due to:		
8	• Long-Term Care Services Not Covered under the Policy <sup>2</sup>	0	19
9	• Provider/Facility Not Qualified under the Policy <sup>3</sup>	0	0
10	• Benefit Eligibility Criteria Not Met <sup>4</sup>	0	27
11	• Other	0	22

1. The nationwide data may be viewed as a more representative and credible indicator where the data for claims reported and denied for your state are small in number.
2. Example—home health care claim filed under a nursing home only policy.
3. Example—a facility that does not meet the minimum level of care requirements or the licensing requirements as outlined in the policy.
4. Examples—a benefit trigger not met, certification by a licensed health care practitioner not provided, no plan of care.