

SERFF Tracking Number: LHLI-127951902 State: Arkansas
Filing Company: Lincoln Heritage Life Insurance Company State Tracking Number:
Company Tracking Number: MS MUL POL REP 11 WM
TOI: MS06 Medicare Supplement - Other Sub-TOI: MS06.000 Medicare Supplement - Other
Product Name: Medicare Multiple Policy Report
Project Name/Number: /

Filing at a Glance

Company: Lincoln Heritage Life Insurance Company

Product Name: Medicare Multiple Policy Report SERFF Tr Num: LHLI-127951902 State: Arkansas

TOI: MS06 Medicare Supplement - Other SERFF Status: Closed-Accepted State Tr Num:
For Informational Purposes

Sub-TOI: MS06.000 Medicare Supplement - Other Co Tr Num: MS MUL POL REP 11 State Status: Filed-Closed
Other WM

Filing Type: Form

Reviewer(s): Stephanie Fowler

Authors: Shirley Grossman, Cathy Patterson, Wanda McNeece, Sally

Disposition Date: 01/05/2012

Roudebush, Rodney Hartwig

Date Submitted: 01/04/2012

Disposition Status: Accepted For
Informational Purposes

Implementation Date:

Implementation Date Requested: On Approval

State Filing Description:

General Information

Project Name:

Status of Filing in Domicile: Pending

Project Number:

Date Approved in Domicile:

Requested Filing Mode: Informational

Domicile Status Comments: Illinois is state of
domicile - this report was filed in that state on
1/4/2012

Explanation for Combination/Other:

Market Type: Individual

Submission Type: New Submission

Individual Market Type:

Overall Rate Impact:

Filing Status Changed: 01/05/2012

State Status Changed: 01/05/2012

Deemer Date:

Created By: Wanda McNeece

Submitted By: Wanda McNeece

Corresponding Filing Tracking Number:

Filing Description:

Medicare Supplement Multiple Policy Report for 2011

Company and Contact

Filing Contact Information

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Wanda McNeece, wanda.mcneece@londen-insurance.com
 4343 E Camelback Rd 800-433-8181 [Phone]
 Phoenix, AZ 85018 602-808-8845 [FAX]

Filing Company Information

Lincoln Heritage Life Insurance Company CoCode: 65927 State of Domicile: Illinois
 4343 East Camelback Road Group Code: Company Type: Life and Health
 Phoenix, AZ 85018 Group Name: State ID Number:
 (800) 433-8181 ext. [Phone] FEIN Number: 04-2314290

Filing Fees

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

| COMPANY | AMOUNT | DATE PROCESSED | TRANSACTION # |
|---|--------|----------------|---------------|
| Lincoln Heritage Life Insurance Company | \$0.00 | 01/04/2012 | |

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Correspondence Summary

Dispositions

| Status | Created By | Created On | Date Submitted |
|-------------------------------------|------------------|------------|----------------|
| Accepted For Informational Purposes | Stephanie Fowler | 01/05/2012 | 01/05/2012 |

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Disposition

Disposition Date: 01/05/2012

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Status: Accepted For Informational Purposes

Comment:

Rate data does NOT apply to filing.

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| Schedule | Schedule Item | Schedule Item Status | Public Access |
|---------------------|----------------------------------|--|---------------|
| Supporting Document | Flesch Certification | | Yes |
| Supporting Document | Application | | Yes |
| Supporting Document | Health - Actuarial Justification | | Yes |
| Supporting Document | Outline of Coverage | | Yes |
| Supporting Document | Cover Letter | Accepted for Informational Purposes | Yes |
| Supporting Document | MS MUL POL REP 11 | Accepted for Informational Purposes | Yes |

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Supporting Document Schedules

| | Item Status: | Status Date: |
|---|-------------------------------------|--------------|
| Bypassed - Item: Flesch Certification Bypass Reason: N/A Comments: | | |
| Bypassed - Item: Application Bypass Reason: N/A Comments: | | |
| Bypassed - Item: Health - Actuarial Justification Bypass Reason: N/A Comments: | | |
| Bypassed - Item: Outline of Coverage Bypass Reason: N/A Comments: | | |
| Satisfied - Item: Cover Letter Comments: Attachment: Arkansas.pdf | Accepted for Informational Purposes | 01/05/2012 |

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Item Status: **Status**
Date:
Satisfied - Item: MS MUL POL REP 11 Accepted for Informational 01/05/2012
Purposes

Comments:

Attachment:

MS MUL POL REP 11.pdf



Lincoln Heritage
LIFE INSURANCE COMPANY

January 4, 2012

Jay Bradford, Commissioner
Arkansas Department of Insurance
1200 West 3rd Street
Little Rock AR 72201-1904

RE: Lincoln Heritage Life Insurance Company
NAIC #65927
Annual Reporting of Duplicate Medicare Supplement Policies

Dear Mr. Bradford:

We have enclosed the completed form for reporting Multiple Medicare Supplement Policies to comply with the annual Medicare Supplement Multiple Policies reporting requirement.

We will continue to send this annual report by March 1st of each year. If you have any questions, or need any additional information, please call me at (602)957-1650.

Sincerely,

Shirley Grossman, FLMI, FLHC, AIRC, ARA, ACS, CCP
Vice President, Compliance Officer
1-800-433-8181 (Toll-Free)
EMAIL: shirley.grossman@londen-insurance.com

Our Business is You

4343 East Camelback Road
Suite 400
Phoenix, AZ 85018-2705
www.lhlic.com
Toll Free (800) 433-8181
Direct (602) 957-1650
Fax (602) 840-9726

FORM FOR REPORTING MEDICARE SUPPLEMENT POLICIES

Company Name: **Lincoln Heritage Life Insurance Company NAIC # 65927**

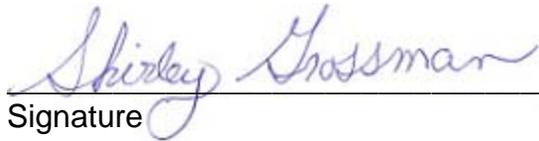
Address: 4343 E. Camelback Road, Suite 400, Phoenix, Arizona 85018

Phone Number: 602-957-1650

Due: March 1, annually

The purpose of this form is to report the following information on each resident of this State who has in force more than one Medicare supplement policy or certificate. The information is to be grouped by individual policyholder.

None to report



Signature

January 4, 2012

Date

Shirley Grossman, Vice President, Compliance Officer

Name and Title