

State: Arkansas **Filing Company:** Arkansas Blue Cross and Blue Shield
TOI/Sub-TOI: H16G Group Health - Major Medical/H16G.001A Any Size Group - PPO
Product Name: Special Amendment
Project Name/Number: Amendment/23-2669 10/12

Filing at a Glance

Company: Arkansas Blue Cross and Blue Shield
Product Name: Special Amendment
State: Arkansas
TOI: H16G Group Health - Major Medical
Sub-TOI: H16G.001A Any Size Group - PPO
Filing Type: Form
Date Submitted: 10/10/2012
SERFF Tr Num: ARBB-128721921
SERFF Status: Closed-Approved-Closed
State Tr Num:
State Status: Approved-Closed
Co Tr Num: 23-2669 10/12

Implementation: On Approval
Date Requested:
Author(s): Christi Kittler, Yvonne McNaughton, Frank Sewall, Rita Thatcher, Evelyn Laney
Reviewer(s): Rosalind Minor (primary)
Disposition Date: 10/10/2012
Disposition Status: Approved-Closed
Implementation Date:

State Filing Description:

State: Arkansas **Filing Company:** Arkansas Blue Cross and Blue Shield
TOI/Sub-TOI: H16G Group Health - Major Medical/H16G.001A Any Size Group - PPO
Product Name: Special Amendment
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General Information

Project Name: Amendment Status of Filing in Domicile: Pending
 Project Number: 23-2669 10/12 Date Approved in Domicile:
 Requested Filing Mode: Review & Approval Domicile Status Comments: Arkansas is 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: 10/10/2012
 State Status Changed: 10/10/2012 Deemer Date:
 Created By: Evelyn Laney Submitted By: Evelyn Laney
 Corresponding Filing Tracking Number:

PPACA: Not PPACA-Related

PPACA Notes: null

Filing Description:

Attached please find form 23-2669 10/12 for your review and approval if indicated.

This document amends the Eligibility Standards section of the group benefit certificate to include those who fail to work the required hours or weeks set out in the benefit certificate. It was developed specifically for the Sound Craft group and will be used only for that group.

Also enclosed is a Flesch Reading Ease score certification signed by an officer of the company as required by Arkansas Code Annotated §23-80-206(d). Please also note, we have scored the amendment as part of the benefit certificates with which it will be used as provided by Arkansas Code Annotated §23-80-206(e).

By way of this letter, I certify that the submission meets the provisions of Arkansas Insurance Department Rule & Regulation 19.

I certify that the Life and Health Guaranty Association Notices required by Arkansas Insurance Department Rule & Regulation 49 are incorporated in the benefit certificates to which this amendment will be attached.

I further certify that the consumer information notice required by Arkansas Code Annotated §23-79-138 is incorporated in the benefit certificates to which this amendment is attached.

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

Arkansas Blue Cross and Blue Shield	CoCode: 83470	State of Domicile: Arkansas
601 S. Gaines Street	Group Code:	Company Type:
Little Rock, AR 72201	Group Name:	State ID Number: N/A
(501) 378-2967 ext. [Phone]	FEIN Number: 71-0226428	

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Filing Fees

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

Company	Amount	Date Processed	Transaction #
Arkansas Blue Cross and Blue Shield	\$50.00	10/10/2012	63629437

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Correspondence Summary

Dispositions

Status	Created By	Created On	Date Submitted
Approved-Closed	Rosalind Minor	10/10/2012	10/10/2012

SERFF Tracking #:

ARBB-128721921

State Tracking #:

Company Tracking #:

23-2669 10/12

State:

Arkansas

Filing Company:

Arkansas Blue Cross and Blue Shield

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Amendment/23-2669 10/12

Disposition

Disposition Date: 10/10/2012

Implementation Date:

Status: Approved-Closed

HHS Status: HHS Approved

State Review: Reviewed-No Actuary

Comment:

Rate data does NOT apply to filing.

Schedule	Schedule Item	Schedule Item Status	Public Access
Supporting Document	Flesch Certification	Approved-Closed	Yes
Supporting Document	Application	Approved-Closed	Yes
Supporting Document	PPACA Uniform Compliance Summary	Approved-Closed	Yes
Form	Amendment	Approved-Closed	Yes

State: Arkansas

Filing Company:

Arkansas Blue Cross and Blue Shield

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Form Schedule

Lead Form Number: 23-2669 10/12

Item No.	Schedule Item Status	Form Number	Form Type	Form Name	Action/ Action Specific Data	Readability Score	Attachments
1	Approved-Closed 10/10/2012	23-2669 10/12	CERA	Amendment	Initial:	40.900	23-2669 10-12(Sound Craft).pdf

Form Type Legend:

ADV	Advertising	AEF	Application/Enrollment Form
CER	Certificate	CERA	Certificate Amendment, Insert Page, Endorsement or Rider
DDP	Data/Declaration Pages	FND	Funding Agreement (Annuity, Individual and Group)
MTX	Matrix	NOC	Notice of Coverage
OTH	Other	OUT	Outline of Coverage
PJK	Policy Jacket	POL	Policy/Contract/Fraternal Certificate
POLA	Policy/Contract/Fraternal Certificate: Amendment, Insert Page, Endorsement or Rider	SCH	Schedule Pages



**Arkansas
BlueCross BlueShield**
An Independent Licensee of the Blue Cross and Blue Shield Association

**AMENDMENT TO THE
ARKANSAS BLUE CROSS AND BLUE SHIELD
COMPREHENSIVE MAJOR MEDICAL
GROUP BENEFIT CERTIFICATES**

AMENDMENT NO. 2669

ELIGIBILITY STANDARDS, “Employee Coverage” is hereby amended to add the following subsection.

- e. be a participant in the Arkansas Department of Workforce Services “Shared Work Unemployment Compensation Program” if he or she fails to work the required hours or weeks set out in subsection d.

GLOSSARY OF TERMS, Full-Time Employee is hereby amended to add the following subsection.

- 4. be a participant in the Arkansas Department of Workforce Services “Shared Work Unemployment Compensation Program” if he or she fails to work the required hours or weeks set out in subsection 3.

This Amendment becomes a part of the Arkansas Blue Cross and Blue Shield Managed Benefits Comprehensive Major Medical Group Benefit Certificates. All other provisions of the Group Benefit Certificate remain in full force and effect.

P. Mark White

P. Mark White, President and Chief Executive Officer

ARKANSAS BLUE CROSS AND BLUE SHIELD
601 S. Gaines Street
Little Rock, Arkansas 72201

SERFF Tracking #:

ARBB-128721921

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Supporting Document Schedules

		Item Status:	Status Date:
Satisfied - Item:	Flesch Certification	Approved-Closed	10/10/2012
Comments:	Please see attached.		
Attachment(s):	FleschCertification Form 23-2669 10-12.pdf		

		Item Status:	Status Date:
Bypassed - Item:	Application	Approved-Closed	10/10/2012
Bypass Reason:	Not required.		
Comments:			

		Item Status:	Status Date:
Bypassed - Item:	PPACA Uniform Compliance Summary	Approved-Closed	10/10/2012
Bypass Reason:	Not PPACA related.		
Comments:			



**Arkansas
BlueCross BlueShield**

An Independent Licensee of the Blue Cross and Blue Shield Association

**RE: Arkansas Blue Cross and Blue Shield
Amendment No. 23-2669 10/12**

**FLESCH READING EASE
CERTIFICATION**

This is to certify that the above referenced documents has achieved a Flesch Reading Ease Score average of 40.9 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.

Name

Vice President
Title

October 10, 2012
Date