

**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/23-2668 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: 10/19/2012  
SERFF Tr Num: ARBB-128735749  
SERFF Status: Closed-Approved-Closed  
State Tr Num:  
State Status: Approved-Closed  
Co Tr Num: 23-2668 10/12  
  
Implementation: 11/01/2012  
Date Requested:  
Author(s): Christi Kittler, Yvonne McNaughton, Frank Sewall, Rita Thatcher, Evelyn Laney  
Reviewer(s): Rosalind Minor (primary)  
Disposition Date: 10/22/2012  
Disposition Status: Approved-Closed  
Implementation Date:  
  
State Filing Description:

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## General Information

Project Name: Amendment	Status of Filing in Domicile: Pending
Project Number: 23-2668 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: 10/22/2012	Deemer Date:
State Status Changed: 10/22/2012	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 23-2668 10/12 for your review and approval if indicated. This amendment is for special continuation privileges for retirees of the L. R. Diagnostic Clinic. It was created specifically for L.R. Diagnostic Clinic, only. 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 rider 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](mailto: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	10/19/2012	64075135

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## Correspondence Summary

### Dispositions

Status	Created By	Created On	Date Submitted
Approved-Closed	Rosalind Minor	10/22/2012	10/22/2012

SERFF Tracking #:

ARBB-128735749

State Tracking #:

Company Tracking #:

23-2668 10/12

State:

Arkansas

Filing Company:

Arkansas Blue Cross and Blue Shield

TOI/Sub-TOI:

H16G Group Health - Major Medical/H16G.001A Any Size Group - PPO

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Amendment/23-2668 10/12

## Disposition

Disposition Date: 10/22/2012

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

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**Filing Company:**

Arkansas Blue Cross and Blue Shield

## Form Schedule

Lead Form Number: 23-2668 10/12

Item No.	Schedule Item Status	Form Number	Form Type	Form Name	Action/ Action Specific Data	Readability Score	Attachments
1	Approved-Closed 10/22/2012	23-2668 10/12	CERA	Amendment	Initial:	40.600	23-2668 10-12 (L.R.Diag.).pdf

### Form Type Legend:

<b>ADV</b>	Advertising	<b>AEF</b>	Application/Enrollment Form
<b>CER</b>	Certificate	<b>CERA</b>	Certificate Amendment, Insert Page, Endorsement or Rider
<b>DDP</b>	Data/Declaration Pages	<b>FND</b>	Funding Agreement (Annuity, Individual and Group)
<b>MTX</b>	Matrix	<b>NOC</b>	Notice of Coverage
<b>OTH</b>	Other	<b>OUT</b>	Outline of Coverage
<b>PJK</b>	Policy Jacket	<b>POL</b>	Policy/Contract/Fraternal Certificate
<b>POLA</b>	Policy/Contract/Fraternal Certificate: Amendment, Insert Page, Endorsement or Rider	<b>SCH</b>	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. 2668  
SPECIAL CONTINUATION FOR RETIREES  
L. R. Diagnostic Clinic**

**ELIGIBILITY STANDARDS**, Subsection 6.4. is hereby amended to add the following new Subsection.

**Special Continuation Privilege for Retirees**

Subject to all other terms, conditions, exclusions and limitations of the Plan as set forth in this Benefit Certificate, Employees who terminates employment with the Little Rock Diagnostic Clinic due to retirement after a minimum of fifteen (15) years of service, may elect to continue in the employee health benefits plan, with the same level and type of coverage the Employee had prior to retirement until they reach age sixty-five (65). The Employee will be responsible for one hundred percent (100%) of the premium cost. All premium payments must be made to the clinic prior to the last day of the month proceeding the month for which premiums are being paid.

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*

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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-128735749

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23-2668 10/12

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## Supporting Document Schedules

		<b>Item Status:</b>	<b>Status Date:</b>
Satisfied - Item:	Flesch Certification	Approved-Closed	10/22/2012
Comments:	Please see attached.		
Attachment(s):	Flesch Certification 23-2668 10-12.pdf		

		<b>Item Status:</b>	<b>Status Date:</b>
Bypassed - Item:	Application	Approved-Closed	10/22/2012
Bypass Reason:	Not required.		
Comments:			

		<b>Item Status:</b>	<b>Status Date:</b>
Bypassed - Item:	PPACA Uniform Compliance Summary	Approved-Closed	10/22/2012
Bypass Reason:	Not PPACA related.		
Comments:			



**Arkansas  
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**RE: Arkansas Blue Cross and Blue Shield  
Amendment No. 23-2668 10/12**

**FLESCH READING EASE  
CERTIFICATION**

This is to certify that the above referenced documents has achieved a Flesch Reading Ease Score average of 40.6 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 19, 2012  
Date