

**State:** Arkansas **Filing Company:** UnitedHealthcare Insurance Company of the River Valley  
**TOI/Sub-TOI:** H16G Group Health - Major Medical/H16G.003G Small Group Only - Other  
**Product Name:** AR RV SG INS 2012.11.01  
**Project Name/Number:** /

### Filing at a Glance

Company: UnitedHealthcare Insurance Company of the River Valley  
 Product Name: AR RV SG INS 2012.11.01  
 State: Arkansas  
 TOI: H16G Group Health - Major Medical  
 Sub-TOI: H16G.003G Small Group Only - Other  
 Filing Type: Rate  
 Date Submitted: 10/10/2012  
 SERFF Tr Num: UHLC-128721078  
 SERFF Status: Closed-Approved-Closed  
 State Tr Num:  
 State Status: Approved-Closed  
 Co Tr Num:  
 Implementation: 11/01/2012  
 Date Requested:  
 Author(s): Denise Picard, Olivia He, Ben Rupert, Alexander Zaid  
 Reviewer(s): Rosalind Minor (primary)  
 Disposition Date: 10/11/2012  
 Disposition Status: Approved-Closed  
 Implementation Date: 11/01/2012

State Filing Description:

**State:** Arkansas **Filing Company:** UnitedHealthcare Insurance Company of the River Valley  
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### General Information

Project Name: Status of Filing in Domicile:  
 Project Number: Date Approved in Domicile:  
 Requested Filing Mode: Review & Approval Domicile Status Comments:  
 Explanation for Combination/Other: Market Type: Group  
 Submission Type: New Submission Group Market Size: Small  
 Group Market Type: Employer Overall Rate Impact:  
 Filing Status Changed: 10/11/2012 Deemer Date:  
 State Status Changed: 10/11/2012 Submitted By: Ben Rupert  
 Created By: Ben Rupert  
 Corresponding Filing Tracking Number:  
  
 PPACA: Not PPACA-Related  
  
 PPACA Notes: null  
  
 Filing Description:  
 AR RV SG INS 2012.11.01

### Company and Contact

#### Filing Contact Information

Ben Rupert, Sr. Actuarial Analyst brupert@uhc.com  
 48 Monroe Turnpike 203-459-6723 [Phone]  
 Trumbull, CT 06611

#### Filing Company Information

UnitedHealthcare Insurance CoCode: 12231 State of Domicile: Illinois  
 Company of the River Valley Group Code: 707 Company Type: Health  
 1300 River Drive, Suite 200 Group Name: State ID Number:  
 Moline, IL 61265 FEIN Number: 20-1902768  
 (309) 765-1485 ext. [Phone]

### Filing Fees

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

Company	Amount	Date Processed	Transaction #
UnitedHealthcare Insurance Company of the River Valley	\$50.00	10/10/2012	63648795

SERFF Tracking #:

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## Correspondence Summary

### Dispositions

Status	Created By	Created On	Date Submitted
Approved-Closed	Rosalind Minor	10/11/2012	10/11/2012

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### Disposition

Disposition Date: 10/11/2012  
Implementation Date: 11/01/2012  
Status: Approved-Closed  
HHS Status: HHS Approved  
State Review: Reviewed-No Actuary  
Comment:

Company Name:	Company Rate Change:	Overall % Indicated Change:	Overall % Rate Impact:	Written Premium Change for this Program:	# of Policy Holders Affected for this Program:	Written Premium for this Program:	Maximum % Change (where req'd):	Minimum % Change (where req'd):
UnitedHealthcare Insurance Company of the River Valley	New Product	0.000%	0.000%	\$0	0	\$0	0.000%	0.000%

### Percent Change Approved:

Minimum: %      Maximum: %      Weighted Average: %

Schedule	Schedule Item	Schedule Item Status	Public Access
Supporting Document	Flesch Certification	Approved-Closed	Yes
Supporting Document	Health - Actuarial Justification	Approved-Closed	No
Supporting Document	Rate Summary Worksheet	Approved-Closed	Yes
Supporting Document	Consumer Disclosure Form	Approved-Closed	Yes

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### Rate Information

Rate data applies to filing.

Filing Method:

Review and Approve

Rate Change Type:

Neutral

Overall Percentage of Last Rate Revision:

%

Effective Date of Last Rate Revision:

Filing Method of Last Filing:

Review and Approve

### Company Rate Information

Company Name:	Company Rate Change:	Overall % Indicated Change:	Overall % Rate Impact:	Written Premium Change for this Program:	# of Policy Holders Affected for this Program:	Written Premium for this Program:	Maximum % Change (where req'd):	Minimum % Change (where req'd):
UnitedHealthcare Insurance Company of the River Valley	New Product	0.000%	0.000%	\$0	0	\$0	0.000%	0.000%

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## Rate Review Detail

### COMPANY:

Company Name: UnitedHealthcare Insurance Company of the River Valley  
HHS Issuer Id: 22732  
Product Names: PPO  
Trend Factors:

### FORMS:

New Policy Forms: UHIC\_AR\_Heritage Plus\_Rev 8/12  
Affected Forms:  
Other Affected Forms:

### REQUESTED RATE CHANGE INFORMATION:

Change Period: Other  
Member Months: 0  
Benefit Change: None  
Percent Change Requested: Min: 0.0 Max: 0.0 Avg: 0.0

### PRIOR RATE:

Total Earned Premium: 0.00  
Total Incurred Claims: 0.00  
Annual \$: Min: 0.00 Max: 0.00 Avg: 0.00

### REQUESTED RATE:

Projected Earned Premium: 0.00  
Projected Incurred Claims: 0.00  
Annual \$: Min: 0.00 Max: 0.00 Avg: 0.00

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## Supporting Document Schedules

		Item Status:	Status Date:
Bypassed - Item:	Flesch Certification	Approved-Closed	10/11/2012
Bypass Reason:	n/a		
Comments:			

		Item Status:	Status Date:
Bypassed - Item:	Rate Summary Worksheet	Approved-Closed	10/11/2012
Bypass Reason:	New Plans		
Comments:			

		Item Status:	Status Date:
Bypassed - Item:	Consumer Disclosure Form	Approved-Closed	10/11/2012
Bypass Reason:	New Plans		
Comments:			