

SERFF Tracking Number: HUMA-128047553 State: Arkansas
Filing Company: Kanawha Insurance Company State Tracking Number:
Company Tracking Number:
TOI: H21 Health - Other Sub-TOI: H21.000 Health - Other
Product Name: KMG Notice1759 2012
Project Name/Number: KMG Notice1759 2012/KMG Notice1759 2012

Filing at a Glance

Company: Kanawha Insurance Company

Product Name: KMG Notice1759 2012

TOI: H21 Health - Other

Sub-TOI: H21.000 Health - Other

Filing Type: Form

SERFF Tr Num: HUMA-128047553 State: Arkansas

SERFF Status: Closed-Approved-
Closed State Tr Num:

Co Tr Num:

State Status: Approved-Closed

Reviewer(s): Rosalind Minor

Authors: Antoine Stewart, John
Goodwin

Disposition Date: 02/01/2012

Date Submitted: 01/31/2012

Disposition Status: Approved-
Closed

Implementation Date:

Implementation Date Requested: On Approval

State Filing Description:

General Information

Project Name: KMG Notice1759 2012

Project Number: KMG Notice1759 2012

Requested Filing Mode: Review & Approval

Explanation for Combination/Other:

Submission Type: New Submission

Group Market Type: Employer

Filing Status Changed: 02/01/2012

State Status Changed: 02/01/2012

Created By: John Goodwin

Corresponding Filing Tracking Number: KMG Notice1759 2012

PPACA: Not PPACA-Related

PPACA Notes: null

Filing Description:

Cover letter under Supporting Documentation tab.

Status of Filing in Domicile:

Date Approved in Domicile:

Domicile Status Comments:

Market Type: Group

Group Market Size: Small and Large

Overall Rate Impact:

Deemer Date:

Submitted By: John Goodwin

Company and Contact

Filing Contact Information

John Goodwin, Senior Compliance Analyst

jgoodwin@compbenefits.com

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 100 Mansell Court E. 770-998-8936 [Phone] 88065 [Ext]

Suite 400
 Roswell, GA 30076

Filing Company Information

Kanawha Insurance Company	CoCode: 65110	State of Domicile: South Carolina
210 South White Street	Group Code: 119	Company Type:
Lancaster, SC 29720	Group Name:	State ID Number:
(800) 635-4252 ext. [Phone]	FEIN Number: 57-0380426	

Filing Fees

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

COMPANY	AMOUNT	DATE PROCESSED	TRANSACTION #
Kanawha Insurance Company	\$50.00	01/31/2012	55949666

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Correspondence Summary

Dispositions

Status	Created By	Created On	Date Submitted
Approved-Closed	Rosalind Minor	02/01/2012	02/01/2012

SERFF Tracking Number: HUMA-128047553 *State:* Arkansas
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Disposition

Disposition Date: 02/01/2012

Implementation Date:

Status: Approved-Closed

HHS Status: Not Reported

State Review: Reviewed-No Actuary

Comment:

Rate data does NOT apply to filing.

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Schedule	Schedule Item	Schedule Item Status	Public Access
Supporting Document	Flesch Certification	Approved-Closed	Yes
Supporting Document	Application	Approved-Closed	Yes
Supporting Document	Health - Actuarial Justification	Approved-Closed	Yes
Supporting Document	Outline of Coverage	Approved-Closed	Yes
Supporting Document	PPACA Uniform Compliance Summary	Approved-Closed	Yes
Supporting Document	Cover letter	Approved-Closed	Yes
Form	NOTICE OF NON-INSURED BENEFITS	Approved-Closed	Yes

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Form Schedule

Lead Form Number: 1759

Schedule Item	Form Number	Form Type	Form Name	Action	Action Specific Data	Readability	Attachment
Approved-Closed 02/01/2012	1759	Other	NOTICE OF NON-INSURED BENEFITS	Initial		0.000	Discount Disclosure Form.pdf

KANAWHA INSURANCE COMPANY

NOTICE OF NON-INSURED BENEFITS

Discount/access disclosure

From time to time, we may offer or provide you with additional goods and/or services that are not related to the benefits provided under the Policy. In addition, we may arrange for third-party service providers to provide you with discounts on goods and services. Some of these third-party service providers may make payments to us when these discount programs are used. These payments offset the cost to us of making these programs available and may help reduce the costs of your plan administration.

Who has responsibility for these discounts?

Although we have arranged for third parties to offer discounts on these goods and services, these discount programs are not insured benefits under the Policy. The third-party providers are solely responsible for providing the goods and/ or services. We are not responsible for any goods and/ or services nor are we liable if vendors refuse to honor such discounts. Further, we are not liable for the negligent provision of such goods and/ or services by third-party service providers.

Discount programs may not be available to people who "opt out" of marketing communications, or where otherwise restricted by law.

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Supporting Document Schedules

		Item Status:	Status Date:
Satisfied - Item:	Flesch Certification	Approved-Closed	02/01/2012
Comments:			
Attachment:			
Compliance Cert..pdf			

		Item Status:	Status Date:
Bypassed - Item:	Application	Approved-Closed	02/01/2012
Bypass Reason:	N/A		
Comments:			

		Item Status:	Status Date:
Bypassed - Item:	Health - Actuarial Justification	Approved-Closed	02/01/2012
Bypass Reason:	N/A No rate inpact		
Comments:			

		Item Status:	Status Date:
Bypassed - Item:	Outline of Coverage	Approved-Closed	02/01/2012
Bypass Reason:	N/A		
Comments:			

		Item Status:	Status Date:
Bypassed - Item:	PPACA Uniform Compliance Summary	Approved-Closed	02/01/2012
Bypass Reason:	N/A		
Comments:			

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	Item Status:	Status
Satisfied - Item: Cover letter	Approved-Closed	Date: 02/01/2012
Comments:		
Attachment:		
AR DC Cover Letter.pdf		

CERTIFICATION OF COMPLIANCE
Arkansas Rule and Regulation 19

I, R. Dale Vaughan, President, Kanawha Insurance Company, hereby certify that I have authority to bind and obligate the company by the filing of this form. I further certify that, to the best of my knowledge, information and belief:

(a) The accompanying form as identified above does comply with all applicable provisions of the Arkansas Rule and Regulation 19; and

(b) The form does meet the Flesch reading ease test for a score of 40 for all applicable policies, certificates and certificate riders unless the Commissioner of Insurance of the State of Arkansas requires a lower score;

Form(s): 1759



President

01.31.2012
Date

January 31, 2012

Commissioner
Arkansas Department of Insurance
1200 West Third Street
Little Rock, AR 72201

RE: Kanawha Insurance Company
Notice of Non-Insured Benefits Form No.:1759

Dear Commissioner:

Kanawha Insurance Company is submitting the above captioned form for the Department's review and approval. This form is new and will be used with previously approved:

Critical Illness, Form: 8011, MCHX-125366777, approved 12/03/07
Critical Life, Form: 8013, KANX-125624479, approved 4/17/08
Group Disability Income Plus, Form: 8014, KANX-12599313, approved 09/05/08
Supplemental Health, Form: 8015, HUMA-126563983, approved 04/15/10

In addition, this form is a multi-purpose form and will be used with all of Kanawha's previously approved group life, health and individual products as well as any life, health and individual products which may be approved by the Department in the future.

The form is in final print, subject to minor variations in formatting, duplexing, shading and fonts. While every effort is made to submit filings without mistakes, the Company reserves the right to make corrections to any typographical errors such as misspellings or minor grammatical errors noted after filing and approval. The Company will provide you a highlighted copy of any corrections it makes for your records.

This filing is a "Forms Only" filing. The above referenced form is new and does not replace any previously approved form. There is no rate impact as a result of this form filing.

Thank you for your attention to this filing. If you should have any questions, please contact me at 770.998.8936 Ext. 88065. My email address is jgoodwin5@humana.com.

Sincerely,
John Goodwin
Analyst