

SERFF Tracking Number: AMMS-128255684 State: Arkansas
Filing Company: Golden Rule Insurance Company State Tracking Number:
Company Tracking Number: SA-S-1604
TOI: H16G Group Health - Major Medical Sub-TOI: H16G.002A Large Group Only - PPO
Product Name: Association Group
Project Name/Number: SA-S-1604/SA-S-1604

Filing at a Glance

Company: Golden Rule Insurance Company

Product Name: Association Group

TOI: H16G Group Health - Major Medical

Sub-TOI: H16G.002A Large Group Only - PPO

Filing Type: Form

SERFF Tr Num: AMMS-128255684 State: Arkansas

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

Co Tr Num: SA-S-1604

Authors: Pat Allison, Lori Moline,
Deb Paris

Date Submitted: 04/11/2012

State Status: Approved-Closed

Reviewer(s): Rosalind Minor

Disposition Date: 04/27/2012

Disposition Status: Approved-
Closed

Implementation Date:

Implementation Date Requested: On Approval

State Filing Description:

General Information

Project Name: SA-S-1604

Project Number: SA-S-1604

Requested Filing Mode: Review & Approval

Explanation for Combination/Other:

Submission Type: New Submission

Group Market Type: Association

Filing Status Changed: 04/27/2012

State Status Changed: 04/27/2012

Created By: Pat Allison

Corresponding Filing Tracking Number:

PPACA: Not PPACA-Related

PPACA Notes: null

Healthcare.gov ID:

Filing Description:

The enclosed rider is submitted for your review and approval for use with our existing portfolio of group health forms. Golden Rule intends to use this rider in conjunction with previously approved policies and certificates delivered to evidence coverage under master policies issued in the state of Arkansas to a non-employer based association group, the Federation of American Consumers and Travelers.

Status of Filing in Domicile: Pending

Date Approved in Domicile:

Domicile Status Comments: Submitted to our
domiciliary state of Indiana on April 10, 2012.

Market Type: Group

Group Market Size: Large

Overall Rate Impact:

Deemer Date:

Submitted By: Pat Allison

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The purpose of this rider form is to document the application of reasonable medical management techniques, as provided in 45CFR 147.130(a)(3), to preventive services as required to be covered under the Federal Affordable Care Act.

On August 1, 2011, the Department of Health and Human Services issued a press release announcing the women's preventive services amendment to relevant federal regulations specifically addressing reasonable medical management techniques in the context of cost sharing and women's contraceptives coverage:

The rules governing coverage of preventive services which allow plans to use reasonable medical management to help define the nature of the covered service apply to women's preventive services. Plans will retain the flexibility to control costs and promote efficient delivery of care by, for example, continuing to charge cost-sharing for branded drugs if a generic version is available and is just as effective and safe for the patient to use.

<http://www.hhs.gov/news/press/2011pres/08/20110801b.html>

Golden Rule Insurance Company intends to begin including the enclosed rider form in policy/certificates being issued in your state after regulatory approval of this rider form filing is obtained. The appropriate filing fee required by your state is included. When attached to a policy, the policy and rider together will achieve a Flesch score of higher than the required score of 40.

To the best of my knowledge, this filing complies with the statutory and regulatory requirements of your state. If you should have any questions regarding this filing, please call me at 1-800-996-7602 extension 77771. If you prefer, you may email me at dlparis@goldenrule.com

Thank you for your time and attention to this filing. I look forward to your reply.

State Narrative:

Company and Contact

Filing Contact Information

Debra Paris, Manager dlparis@goldenrule.com
7440 Woodland Drive 800-926-7602 [Phone] 7771 [Ext]
Indianapolis, IN 46278-1719 317-328-9645 [FAX]

Filing Company Information

Golden Rule Insurance Company CoCode: 62286 State of Domicile: Indiana
7440 Woodland Drive Group Code: 707 Company Type: Life and Health
Indianapolis, IN 46278 Group Name: State ID Number:
(800) 926-7602 ext. [Phone] FEIN Number: 37-6028756

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Filing Fees

Fee Required? Yes
Fee Amount: \$50.00
Retaliatory? No
Fee Explanation: \$50 per form X 1 form = \$50
Paid via EFT.
Per Company: No

COMPANY	AMOUNT	DATE PROCESSED	TRANSACTION #
Golden Rule Insurance Company	\$50.00	04/11/2012	57900060

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Correspondence Summary

Dispositions

Status	Created By	Created On	Date Submitted
Approved-Closed	Rosalind Minor	04/27/2012	04/27/2012

Amendments

Schedule	Schedule Item Name	Created By	Created On	Date Submitted
Supporting Document	Materials in response to April 16, 2012 Note to Filer	Pat Allison	04/17/2012	04/17/2012

Filing Notes

Subject	Note Type	Created By	Created On	Date Submitted
Federation of American Consumers and Travelers	Note To Reviewer	Pat Allison	04/17/2012	04/17/2012
Federation of American Consumers and Travelers	Note To Filer	Rosalind Minor	04/16/2012	04/16/2012

SERFF Tracking Number: AMMS-128255684 *State:* Arkansas
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Disposition

Disposition Date: 04/27/2012

Implementation Date:

Status: Approved-Closed

HHS Status: HHS Approved

State Review: Reviewed-No Actuary

Comment:

Rate data does NOT apply to filing.

SERFF Tracking Number: AMMS-128255684 *State:* Arkansas
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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	PPACA Uniform Compliance Summary	Approved-Closed	Yes
Supporting Document	Materials in response to April 16, 2012 Note to Filer	Approved-Closed	Yes
Form	Reasonable Medical Management Techniques Rider	Approved-Closed	Yes

SERFF Tracking Number: AMMS-128255684 State: Arkansas
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Product Name: Association Group
Project Name/Number: SA-S-1604/SA-S-1604

Amendment Letter

Submitted Date: 04/17/2012

Comments:

I am amending this filing to add documents referenced in our April 17, 2012 "Note to Reviewer."

Changed Items:

Supporting Document Schedule Item Changes:

User Added -Name: Materials in response to April 16, 2012 Note to Filer

Comment:

P-008 Portfolio Filing Cover Letter.pdf

P-008 Portfolio Filing Approval.pdf

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Note To Reviewer

Created By:

Pat Allison on 04/17/2012 03:19 PM

Last Edited By:

Rosalind Minor

Submitted On:

04/27/2012 11:10 AM

Subject:

Federation of American Consumers and Travelers

Comments:

1. Golden Rule has been marketing certificates under master policies issued to the Federation of American Consumers and Travelers (F.A.C.T) in Arkansas since 1990.
2. Golden Rule recently met with the Department regarding F.A.C.T.'s new offices in Jonesboro, Arkansas.
3. We are amending this filing to add our cover letter and your March 14, 2012 approval of the entire portfolio of forms to be available to F.A.C.T. members.
4. Please let me know if you need additional information.

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Product Name: Association Group
Project Name/Number: SA-S-1604/SA-S-1604

Note To Filer

Created By:

Rosalind Minor on 04/16/2012 09:03 AM

Last Edited By:

Rosalind Minor

Submitted On:

04/27/2012 11:10 AM

Subject:

Federation of American Consumers and Travelers

Comments:

Debra, I do not have the above listed association on my list as an approved association. Do you have any information as to the date our Department approved this association? Was it approved through Golden Rule?

Thank you for your assistance.

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 Product Name: Association Group
 Project Name/Number: SA-S-1604/SA-S-1604

Form Schedule

Lead Form Number: SA-S-1604

Schedule Item	Form Number	Form Type	Form Name	Action	Action Specific Data	Readability	Attachment
Approved-Closed 04/27/2012	SA-S-1604	Policy/Cont ract/Fratern al	Reasonable Medical Management Techniques Rider	Initial		59.140	SA-S-1604 Rider.pdf
		Certificate: Amendmen t, Insert Page, Endorseme nt or Rider					

REASONABLE MEDICAL MANAGEMENT TECHNIQUES RIDER

This rider is effective [on the *effective date* of the *policy/certificate* on or after August 1, 2012, or no later than January 1, 2013].

By the attachment of this rider, the *policy* is amended as follows:

Benefits for *covered expenses* for preventive care expense benefits may include the use of reasonable medical management techniques authorized by federal law to promote the use of high value preventive services from *network providers*. Reasonable medical management techniques may result in the application of [stated deductible/*deductible amounts*], coinsurance provisions, or *copayment amounts*, when a *covered person* chooses not to use a high value service [as identified on myuhone.com] otherwise exempt from deductibles, coinsurance provisions, and *copayment amounts*, when received from a *network provider*.

Any provision in the *policy/certificate*, or in a rider/amendment or endorsement attached to the *policy/certificate*, that conflicts with this rider is amended to conform to this rider only to the extent of the conflict.

This rider will not change, waive, or extend any part of the *policy/certificate*, other than as stated herein.

Golden Rule Insurance Company

A handwritten signature in black ink that reads "Patrick F. Carr". The signature is written in a cursive style with a large initial "P".

President

SERFF Tracking Number: AMMS-128255684

State: Arkansas

Filing Company: Golden Rule Insurance Company

State Tracking Number:

Company Tracking Number: SA-S-1604

TOI: H16G Group Health - Major Medical

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Product Name: Association Group

Project Name/Number: SA-S-1604/SA-S-1604

Supporting Document Schedules

	Item Status:	Status Date:
Satisfied - Item: Flesch Certification Comments: Attachment: P-008 C-008 Readability Signed and Dated.pdf	Approved-Closed	04/27/2012

	Item Status:	Status Date:
Bypassed - Item: Application Bypass Reason: Does not apply to this filing. Comments:	Approved-Closed	04/27/2012

	Item Status:	Status Date:
Bypassed - Item: PPACA Uniform Compliance Summary Bypass Reason: Does not apply to this filing. Comments:	Approved-Closed	04/27/2012

	Item Status:	Status Date:
Satisfied - Item: Materials in response to April 16, 2012 Note to Filer Comments: Attachments: P-008 Portfolio Filing Cover Letter.pdf P-008 Portfolio Filing Approval.pdf	Approved-Closed	04/27/2012

February 21, 2012

Rosalind Minor
Arkansas Insurance Department
1200 West 3rd Street
Little Rock, AR 72201-1904

Dear Ms. Minor:

Subject: Golden Rule Insurance Company
NAIC Company No.: 62286
Filing for Group Health Approval
Forms: P-008 et al Forms on attached Form Schedule
SERFF Tracking No.: AMMS-128089694

We solicit your approval of the enclosed matrix paragraphs for delivery in the state of Arkansas. Golden Rule intends to use these forms in conjunction with our previously approved portfolio of group health forms to issue master policies to non-employer based association groups situated in the state of Arkansas. As discussed with Mr. Corne and Mr. Hampton during their visit on February 9, 2012, Golden Rule initially intends to issue these forms to the Federation of American Consumers and Travelers at their offices in Jonesboro, Arkansas.

F.A.C.T. is a legitimate association as set forth in the N.A.I.C. model group law. F.A.C.T. was incorporated as a not-for-profit corporation on December 18, 1984. As you are well aware, Golden Rule has made health insurance available to members of F.A.C.T. residing in Arkansas since 1990 under master policies issued at the F.A.C.T. offices located in Edwardsville, Illinois. It is my understanding that it was agreed that your Department had reviewed F.A.C.T. as a legitimate association group in the past and therefore it would not be necessary to resubmit the F.A.C.T. documentation with this filing.

The enclosed forms are filed in and will utilize a matrix format. The matrix format allows Golden Rule to facilitate production of a variety of plan designs, including major medical, basic hospital/surgical, and high deductible health plans for use with health savings accounts. As in previous filings, some provisions reflect listing of multiple paragraphs/text pieces that are bracketed primarily because they contain all possible components. Each separate policy/certificate will contain only those matrix provisions applicable to its plan design. Please note that we have included a list of all previously approved matrix forms that will continue to be issued in conjunction with Golden Rule's future policies situated in your state. Although considered variable, the enclosed master data page reflects all products currently issued by Golden Rule.

Rosalind Minor
Page 2
February 21, 2012

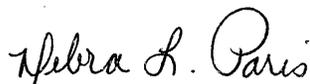
In addition, under supporting documentation we have included three sample policies which reflect the Arkansas mandated benefits in the base policy. As discussed with Mr. Corne and Mr. Hampton, additional benefits/requirements mandated by states other than Arkansas will generally be provided via a state endorsement attached to certificates issued to residents of the applicable state. The additional forms required by other states will be filed with your Department on an informational basis with the understanding that they do not apply to residents of your state. The exception to this will be forms applicable to residents of Florida and Virginia. Both of these states require that state specific forms issued to residents of their respective states be approved by the situs state of the policyholder before they will accept any filing of the forms. We will be certain to denote in any filing of these forms that the forms will not be included in certificates issued to residents of Arkansas.

To the best of my knowledge, these forms comply with the statutory and regulatory requirements of your state. A Readability Certificate indicating the Flesch score is enclosed. Depending on the combination of pages that would be used in a particular policy, we will always exceed the minimum Flesch score of 40.

If you should have any questions with regard to this filing, or if I may be of assistance, please feel free to contact Policy Compliance at (800) 926-7602 and request to speak with me. If you prefer, I may be contacted via e-mail at the following address: dlparis@goldenrule.com.

Thank you for your time and attention to this filing. I look forward to your reply.

Sincerely,



Debra L. Paris, FLMI, HIA
Manager
Policy Compliance

Disposition for AMMS-128089694

SERFF Tracking Number:	AMMS-128089694	State:	Arkansas
Filing Company:	Golden Rule Insurance Company	State Tracking Number:	
Company Tracking Number:	P-008		
TOI:	H16G Group Health - Major Medical	Sub-TOI:	H16G.002A Large Group Only - PPO
Product Name:	Association Group		
Project Name:	P-008		

Disposition Date: 03/14/2012

Implementation Date: * 03/14/2012

Status: * Approved-Closed

Comments:

Company Rate Information

Company Name:	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 required):	Minimum % Change (where required):
Golden Rule Insurance Company	%	%	\$		\$	%	%

Schedule Items

Item Type	Item Name	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
Supporting Document	Previously Approved Forms List	Approved-Closed	Yes
Supporting Document	Sample Plans	Approved-Closed	Yes
Supporting Document	Cover Letter	Approved-Closed	Yes
Supporting Document	Actuarial Memorandum and Rate Manual	Approved-Closed	Yes

Form	P-008, Policy Jacket, Policy Face Page	Approved-Closed	Yes
Form	C-008, Certificate Amendment, Insert Page, Endorsement or Rider, Certificate Face Page	Approved-Closed	Yes
Form	MGR04674, Policy/Contract/Fraternal Certificate: Amendment, Insert Page, Endorsement or Rider, Definitions	Approved-Closed	Yes
Form	MGR04675, Policy/Contract/Fraternal Certificate: Amendment, Insert Page, Endorsement or Rider, Definitions	Approved-Closed	Yes
Form	MGR04676, Policy/Contract/Fraternal Certificate: Amendment, Insert Page, Endorsement or Rider, Eligibility	Approved-Closed	Yes
Form	MGR04677, Policy/Contract/Fraternal Certificate: Amendment, Insert Page, Endorsement or Rider, Medical Benefits	Approved-Closed	Yes
Form	MGR04678, Policy/Contract/Fraternal Certificate: Amendment, Insert Page, Endorsement or Rider, Medical Benefits	Approved-Closed	Yes
Form	MGR04679, Policy/Contract/Fraternal Certificate: Amendment, Insert Page, Endorsement or Rider, Medical Benefits	Approved-Closed	Yes
Form	MGR04680, Policy/Contract/Fraternal Certificate: Amendment, Insert Page, Endorsement or Rider, Health Insurance Conversion Privilege	Approved-Closed	Yes
Form	MGR04681, Policy/Contract/Fraternal Certificate: Amendment, Insert Page, Endorsement or Rider, Health Insurance Conversion Privilege	Approved-Closed	Yes
Form	MGR04682, Policy/Contract/Fraternal Certificate: Amendment, Insert Page, Endorsement or Rider, Medical Benefits	Approved-Closed	Yes
Form	MGR04683, Policy/Contract/Fraternal Certificate: Amendment, Insert Page, Endorsement or Rider, Medical Benefits	Approved-Closed	Yes
Form	MGR04686, Policy/Contract/Fraternal Certificate: Amendment, Insert Page, Endorsement or Rider, Coordination of Benefits ("COB")	Approved-Closed	Yes
Form	MGR04684, Policy/Contract/Fraternal Certificate: Amendment, Insert Page, Endorsement or Rider, Definitions	Approved-Closed	Yes
Form	MGR04685, Policy/Contract/Fraternal Certificate: Amendment, Insert Page, Endorsement or Rider, General Exclusions and Limitations	Approved-Closed	Yes
Form	MGR04687, Policy/Contract/Fraternal Certificate: Amendment, Insert Page, Endorsement or Rider, Coordination of Benefits ("COB")	Approved-Closed	Yes
Form	MGR04688, Policy/Contract/Fraternal Certificate: Amendment, Insert Page, Endorsement or Rider, Coordination of Benefits ("COB")	Approved-Closed	Yes
Form	MGR04689, Policy/Contract/Fraternal Certificate:	Approved-	Yes

	Amendment, Insert Page, Endorsement or Rider, Coordination of Benefits ("COB")	Closed	
Form	MGR04690, Policy/Contract/Fraternal Certificate: Amendment, Insert Page, Endorsement or Rider, Coordination of Benefits ("COB")	Approved-Closed	Yes
Form	MGR04691, Policy/Contract/Fraternal Certificate: Amendment, Insert Page, Endorsement or Rider, Coordination of Benefits ("COB")	Approved-Closed	Yes
Form	MGR04692, Policy/Contract/Fraternal Certificate: Amendment, Insert Page, Endorsement or Rider, Medical Benefits	Approved-Closed	Yes
Form	MGR04693, Policy/Contract/Fraternal Certificate: Amendment, Insert Page, Endorsement or Rider, Coordination of Benefits ("COB")	Approved-Closed	Yes
Form	6-P-410, Policy/Contract/Fraternal Certificate: Amendment, Insert Page, Endorsement or Rider, Supplemental Accident Expense Benefits	Approved-Closed	Yes
Form	7-P-620.3, Policy/Contract/Fraternal Certificate: Amendment, Insert Page, Endorsement or Rider, Limitation of Payment for Aids or HIV Related Disease Claims	Approved-Closed	Yes
Form	8-P-710.1, Policy/Contract/Fraternal Certificate: Amendment, Insert Page, Endorsement or Rider, Preexisting Conditions and Limitations	Approved-Closed	Yes
Form	8-P-852, Policy/Contract/Fraternal Certificate: Amendment, Insert Page, Endorsement or Rider, Reinstatement	Approved-Closed	Yes