

SERFF Tracking Number: HUMA-128406599 State: Arkansas
Filing Company: Humana Insurance Company State Tracking Number:
Company Tracking Number: AR-12-003
TOI: H16G Group Health - Major Medical Sub-TOI: H16G.001A Any Size Group - PPO
Product Name: AR-12-003
Project Name/Number: /

Filing at a Glance

Company: Humana Insurance Company

Product Name: AR-12-003

TOI: H16G Group Health - Major Medical

Sub-TOI: H16G.001A Any Size Group - PPO

Filing Type: Form

SERFF Tr Num: HUMA-128406599 State: Arkansas

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

Co Tr Num: AR-12-003

Author: Lisa Geary

Date Submitted: 05/24/2012

State Status: Approved-Closed

Reviewer(s): Rosalind Minor

Disposition Date: 05/30/2012

Disposition Status: Approved-
Closed

Implementation Date:

Implementation Date Requested: On Approval

State Filing Description:

General Information

Project Name:

Project Number:

Requested Filing Mode: Review & Approval

Explanation for Combination/Other:

Submission Type: New Submission

Group Market Type: Employer

Filing Status Changed: 05/30/2012

State Status Changed: 05/30/2012

Created By: Lisa Geary

Corresponding Filing Tracking Number:

PPACA: Not PPACA-Related

PPACA Notes: null

Healthcare.gov ID:

Filing Description:

May 24, 2012

Status of Filing in Domicile: Not Filed

Date Approved in Domicile:

Domicile Status Comments:

Market Type: Group

Group Market Size: Small and Large

Overall Rate Impact:

Deemer Date:

Submitted By: Lisa Geary

Ms. Rosalind D. Minor

Certified Rate and Form Analyst

Life and Health Division

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Product Name: AR-12-003
Project Name/Number: /

Arkansas Department of Insurance
1200 West Third Street
Little Rock, AR 72201-1904

RE: GROUP HEALTH INSURANCE FORMS FILING
HUMANA INSURANCE COMPANY
FORM NUMBER(S): CC2003 REA
NAIC#: 73288
FEIN#: 39-1263473
INTERNAL FILING NUMBER: AR-12-003

Dear Ms. Minor:

Enclosed for your review and approval on a general use basis is a duplicate copy of the attached referenced form. This amendment is intended for general use with the CC2003 policy series.

This form is being submitted with variable language bracketed so that this form may be modified to reflect the nuances of the group's plan. Please be advised that it is not our intent to use variability to reduce any benefits or provisions below any statutory or regulatory requirements.

Should you have any questions, please do not hesitate to contact me at 1-800-664-4140, ext. 1862, via fax to 502-508-2256 or E-mail to lgeary@humana.com.

Sincerely,

Lisa Geary
Contract Analyst

Enclosures
State Narrative:

Company and Contact

Filing Contact Information

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Lisa Geary, Analyst lgeary@humana.com
 321 West Main Street 502-580-1862 [Phone]
 Louisville, KY 40202

Filing Company Information

Humana Insurance Company CoCode: 73288 State of Domicile: Wisconsin
 1100 Employers Boulevard Group Code: 119 Company Type: Life & Health
 Green Bay, WI 54344 Group Name: State ID Number:
 (800) 558-4444 ext. [Phone] FEIN Number: 39-1263473

Filing Fees

Fee Required? Yes
 Fee Amount: \$50.00
 Retaliatory? No
 Fee Explanation: 1 form X \$50.00
 Per Company: No

COMPANY	AMOUNT	DATE PROCESSED	TRANSACTION #
Humana Insurance Company	\$50.00	05/24/2012	59413803

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Correspondence Summary

Dispositions

Status	Created By	Created On	Date Submitted
Approved-Closed	Rosalind Minor	05/30/2012	05/30/2012

SERFF Tracking Number: HUMA-128406599

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Product Name: AR-12-003

Project Name/Number: /

Disposition

Disposition Date: 05/30/2012

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: HUMA-128406599 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
Form	Religious employer amendment	Approved-Closed	Yes

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Form Schedule

Lead Form Number: 4010000

Schedule Item	Form Number	Form Type	Form Name	Action	Action Specific Data	Readability	Attachment
Approved- Closed 05/30/2012	CC2003 REA	Certificate	Religious employer Amendmen amendment t, Insert Page, Endorseme nt or Rider	Initial			400 PGN Rlgs ER a.pdf

[RELIGIOUS EMPLOYER AMENDMENT]

This amendment is made part of the *policy* to which it is attached. The effective date of this change is the latter of the effective date of the *certificate* or the date this amendment is added to the *policy*.

All terms used in this amendment have the same meaning given to them in the *certificate* unless otherwise specifically defined in this amendment. Except as modified below all terms, conditions and limitations of the *policy* apply.

Your employer has certified they are a *religious employer* and have elected to exclude contraceptive coverage from the *policy*. This "Religious Employer Amendment" modifies the *policy* as follows:

In the "Limitations and Exclusions" section under "Other Limitations and Exclusions" the following exclusions are added:

- Contraceptive methods, sterilization procedures and contraceptive *prescriptions* for preventing pregnancy.
- Abortifacients.

In the "Glossary" section the definition of *preventive services* is replaced with the following:

Preventive services means services in the following recommendations appropriate for *you* during *your* plan year:

- Services with an A or B rating in the current recommendations of the U. S. Preventive Services Task Force (USPSTF). The recommendations by the USPSTF for breast cancer screenings, mammography and preventions issued prior to November 2009 will be considered current.
- Immunizations recommended by the Advisory Committee on Immunization Practices of the Centers for Disease Control and Prevention (CDC).
- Preventive care for infants, children and adolescents provided in the comprehensive guidelines supported by the Health Resources and Services Administration (HRSA).
- Preventive care for women provided in the comprehensive guidelines supported by HRSA, except for contraceptive methods, sterilization procedures and contraceptive *prescriptions*.

For the recommended *preventive services* that apply to *your* plan year, refer to the HHS website at www.healthcare.gov or call the customer service telephone number on *your* identification card.

[RELIGIOUS EMPLOYER AMENDMENT (continued)]

In the "Glossary" section the following definition is added:

A *religious employer* means the *employer*:

- Has the inculcation of religious values as its purpose;
- Primarily employs persons who share religious tenets;
- Primarily serves persons who share its religious tenets; and
- Is a non-profit organization under Internal Revenue Code section 6033(a)(1) and section 6033(a)(3)(A)(i) or (iii).

In the "Prescription Drug Benefit["] [Rider]" under "Coverage Description" the following is removed:

- Drugs, medicines or medications on the Women's Healthcare Drug List with a *prescription* from a *health care practitioner*.

And replaced with:

- Drugs, medicines or medications on the Women's Healthcare Drug List with a *prescription* from a *health care practitioner*, except for drugs, medicines and medications for preventing pregnancy.

In the "Prescription Drug Benefit["] [Rider]" under "Schedule of Benefits – Prescription Drugs" the following is removed:

***Drugs, medicines or medications on the Women's Healthcare Drug List from a *network pharmacy* are covered in full.

And replaced with:

***Drugs, medicines or medications on the Women's Healthcare Drug List from a *network pharmacy* are covered in full, except for drugs, medicines and medications for preventing pregnancy.

[Legal Entity]

[Signature of Officer]
[Typed Name of Officer]
[Title of Officer]

4010000

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Supporting Document Schedules

	Item Status:	Status Date:
Satisfied - Item: Flesch Certification	Approved-Closed	05/30/2012
Comments:		
Attachments:		
Certificate of Compliance-Bulletin 9-85.pdf		
Certification of Compliance-Rule & Regulation 19.pdf		

	Item Status:	Status Date:
Bypassed - Item: Application	Approved-Closed	05/30/2012
Bypass Reason: the applications that will be used are applications that were filed under file number HUMA-127855749 and approved on 12/20/2011. Form numbers are AR-71012-EA-LG-20111114, AR-71012-EA-SB-20111114, AR-72000-20111114, AR-72001-20111114, AR-72000-MH-20111114		
Comments:		

	Item Status:	Status Date:
Bypassed - Item: PPACA Uniform Compliance Summary	Approved-Closed	05/30/2012
Bypass Reason: not a ppaca filing		
Comments:		

TO: Arkansas Department of Insurance
1200 West Third Street
Little Rock, AR 72201-1904

RE: GROUP HEALTH INSURANCE FORMS FILING
HUMANA INSURANCE COMPANY
POLICY SERIES: CC2003
NAIC#: 73288
FEIN#: 39-1263473
INTERNAL FILING NUMBER: AR-12-003

CERTIFICATION OF COMPLIANCE

I have reviewed or supervised the review of the policy forms contained in this filing and hereby certify to the best of my knowledge and belief that they are in compliance with Bulletin 9-85 of the state of Arkansas.



(Signature)

J. Gregory Catron
Vice President and Assistant General Counsel
Humana Insurance Company

05/24/2012

(Date)

Individual responsible for this filing:

Lisa Geary
Contract Analyst
Product Compliance

TO: State of Arkansas
Office of the Commissioner of Insurance
1200 West Third Street
Little Rock, AR 72201-1904

FORM: See Form Schedule tab for a list of forms.

CERTIFICATION OF COMPLIANCE
Arkansas Rule and Regulation 19

I, J. Gregory Catron, an officer of Humana 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;



J. Gregory Catron
Vice President and Assistant General Counsel
Humana Insurance Company

05/24/2012
Date

Individual responsible for this filing:

Lisa Geary
Contract Analyst
Product Compliance