

SERFF Tracking Number: HLAD-128506878 State: Arkansas  
Filing Company: HMO Partners, Inc. d/b/a Health Advantage State Tracking Number:  
Company Tracking Number: 34-150 6/12  
TOI: HOrg02G Group Health Organizations - Health Sub-TOI: HOrg02G.002A Any Size Group - PPO  
Maintenance (HMO)  
Product Name: Special Amendment  
Project Name/Number: Amendment/34-150 6/12

## Filing at a Glance

Company: HMO Partners, Inc. d/b/a Health Advantage

Product Name: Special Amendment SERFF Tr Num: HLAD-128506878 State: Arkansas  
TOI: HOrg02G Group Health Organizations - SERFF Status: Closed-Approved- State Tr Num:  
Health Maintenance (HMO) Closed  
Sub-TOI: HOrg02G.002A Any Size Group - Co Tr Num: 34-150 6/12 State Status: Approved-Closed  
PPO  
Filing Type: Form Reviewer(s): Rosalind Minor  
Disposition Date: 06/22/2012  
Authors: Christi Kittler, Yvonne  
McNaughton, Frank Sewall, Rita  
Thatcher, Evelyn Laney  
Date Submitted: 06/22/2012 Disposition Status: Approved-  
Closed  
Implementation Date Requested: On Approval Implementation Date:  
State Filing Description:

## General Information

Project Name: Amendment Status of Filing in Domicile: Pending  
Project Number: 34-150 6/12 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: 06/22/2012 Deemer Date:  
State Status Changed: 06/22/2012 Submitted By: Evelyn Laney  
Created By: Evelyn Laney  
Corresponding Filing Tracking Number:  
PPACA: Not PPACA-Related  
PPACA Notes: null  
Healthcare.gov ID:  
Filing Description:

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Attached please find amendment 34-150 6/12 for your review and approval if indicated.

This amendment provides a waiver of the waiting period for rehired employees who were laid off for no more than 90 days of their termination date. I was designed specifically for the RIC Construction group but can be used with any group with these same requirements.

Also attached is a Flesch Reading Ease score certification signed by an officer of the company as required by Arkansas Code Annotated §23-80-206(d).

I certify that the submission meets the provisions of Arkansas Insurance Department Rule & Regulation 19. I further certify that the Life and Health Guaranty Association Notices required by Arkansas Insurance Department Rule & Regulation 49 and the consumer information notice required by Arkansas Code Annotated §23-79-138 are incorporated in the Evidences of Coverage to which this amendment is attached.

Please feel free to contact me at 378-2165 with any questions you may have.

State Narrative:

## Company and Contact

### Filing Contact Information

Evelyn Laney, Senior Compliance Analyst exlaney@arkbluecross.com  
 320 West Capitol, Ste 211 501-378-2165 [Phone]  
 Little Rock, AR 72201 501-378-2975 [FAX]

### Filing Company Information

HMO Partners, Inc. d/b/a Health Advantage	CoCode: 95442	State of Domicile: Arkansas
320 West Capitol	Group Code:	Company Type:
Little Rock, AR 72203-8069	Group Name:	State ID Number: N/A
(501) 378-2967 ext. [Phone]	FEIN Number: 71-0747497	

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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 #
HMO Partners, Inc. d/b/a Health Advantage	\$50.00	06/22/2012	60360786

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## Correspondence Summary

### Dispositions

Status	Created By	Created On	Date Submitted
Approved-Closed	Rosalind Minor	06/22/2012	06/22/2012

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## Disposition

Disposition Date: 06/22/2012

Implementation Date:

Status: Approved-Closed

HHS Status: HHS Approved

State Review: Reviewed-No Actuary

Comment:

Rate data does NOT apply to filing.

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<b>Schedule</b>	<b>Schedule Item</b>	<b>Schedule Item Status</b>	<b>Public Access</b>
<b>Supporting Document</b>	Flesch Certification	Approved-Closed	Yes
<b>Supporting Document</b>	Application	Approved-Closed	Yes
<b>Supporting Document</b>	Health - Actuarial Justification	Approved-Closed	Yes
<b>Supporting Document</b>	PPACA Uniform Compliance Summary	Approved-Closed	Yes
<b>Form</b>	Amendment	Approved-Closed	Yes

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## Form Schedule

Lead Form Number: 34-150 6/12

Schedule Item	Form Number	Form Type	Form Name	Action	Action Specific Data	Readability	Attachment
Approved-Closed 06/22/2012	34-150 6/12	Certificate Amendmen t, Insert Page, Endorseme nt or Rider	Amendment	Initial		43.200	34-150 6- 12RICConst.. pdf



The Health Advantage Evidence of Coverage is hereby amended to read as follows.

**ELIGIBILITY STANDARDS**, Subsection 6.2 is hereby amended to add the following provision:

**Effective Date for Rehired Subscribers.** Subject to all other terms, conditions, exclusions and limitation in the Plan as set forth in this Benefit Certificate, a Subscriber who is rehired after being laid off for no more than ninety (90) days, will be exempt from satisfying the Waiting Period and will be effective in the employee's health benefit plan the first of the Contract Month following their rehire date.

This amendment becomes a part of the Health Advantage Evidence of Coverage. All provisions of the Evidence of Coverage which are not contrary to the provisions of this amendment remain in full force and effect.

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David F. Bridges, Chief Executive Officer  
HMO PARTNERS, INC, d/b/a/ HEALTH ADVANTAGE  
P.O. Office Box 8069  
Little Rock, Arkansas 72203-8069

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## Supporting Document Schedules

	Item Status:	Status Date:
<b>Satisfied - Item:</b> Flesch Certification <b>Comments:</b> Please see attached. <b>Attachment:</b> Flesch Certification Form HA, 34-150 6-12.pdf	Approved-Closed	06/22/2012
<b>Bypassed - Item:</b> Application <b>Bypass Reason:</b> Not required. <b>Comments:</b>	Approved-Closed	06/22/2012
<b>Bypassed - Item:</b> Health - Actuarial Justification <b>Bypass Reason:</b> Not required. <b>Comments:</b>	Approved-Closed	06/22/2012
<b>Bypassed - Item:</b> PPACA Uniform Compliance Summary <b>Bypass Reason:</b> Not PPACA related. <b>Comments:</b>	Approved-Closed	06/22/2012

# Health Advantage



An Independent Licensee of the Blue Cross and Blue Shield Association

**Re: HMO Partners, Inc. d/b/a Health Advantage  
Form Nos. 34-150 6/12**

## FLESCH READING EASE CERTIFICATION

This is to certify that the above referenced document has achieved a Flesch Reading Ease Score average of 43.2 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.



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Name

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President  
Title

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June 22, 2012  
Date