

<b>State:</b>	Arkansas	<b>Filing Company:</b>	Delta Dental of Arkansas
<b>TOI/Sub-TOI:</b>	H10I Individual Health - Dental/H10I.000 Health - Dental		
<b>Product Name:</b>	DDARIN-CARRYOVER-12		
<b>Project Name/Number:</b>	DDARIN-CARRYOVER-12/		

## Filing at a Glance

Company:	Delta Dental of Arkansas
Product Name:	DDARIN-CARRYOVER-12
State:	Arkansas
TOI:	H10I Individual Health - Dental
Sub-TOI:	H10I.000 Health - Dental
Filing Type:	Form
Date Submitted:	07/19/2012
SERFF Tr Num:	DDAR-128586931
SERFF Status:	Closed-Approved-Closed
State Tr Num:	
State Status:	Approved-Closed
Co Tr Num:	
Implementation	09/01/2012
Date Requested:	
Author(s):	Sara Farris
Reviewer(s):	Rosalind Minor (primary)
Disposition Date:	07/19/2012
Disposition Status:	Approved-Closed
Implementation Date:	
State Filing Description:	

**State:** Arkansas      **Filing Company:** Delta Dental of Arkansas  
**TOI/Sub-TOI:** H101 Individual Health - Dental/H101.000 Health - Dental  
**Product Name:** DDARIN-CARRYOVER-12  
**Project Name/Number:** DDARIN-CARRYOVER-12/

## General Information

Project Name: DDARIN-CARRYOVER-12      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:  
Submission Type: New Submission      Overall Rate Impact:  
Filing Status Changed: 07/19/2012  
State Status Changed: 07/19/2012      Deemer Date:  
Created By: Sara Farris      Submitted By: Sara Farris  
Corresponding Filing Tracking Number:

### Filing Description:

Delta Dental of Arkansas is extending its carryover benefit to certain individuals under its individual dental product.

## Company and Contact

### Filing Contact Information

Sara Farris,      sfarris@ddpar.com  
1513 Country Club      501-992-1662 [Phone]  
Sherwood, AR 72120      501-992-1663 [FAX]

### Filing Company Information

Delta Dental of Arkansas      CoCode: 47155      State of Domicile: Arkansas  
1513 Country Club Rd.      Group Code:      Company Type:  
Sherwood, AR 72120      Group Name:      State ID Number:  
(501) 992-1662 ext. [Phone]      FEIN Number: 71-0561140

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## Filing Fees

Fee Required?      Yes  
Fee Amount:      \$0.00  
Retaliatory?      No  
Fee Explanation:  
Per Company:      No

Company	Amount	Date Processed	Transaction #
Delta Dental of Arkansas	\$50.00	07/19/2012	61033007

<b>SERFF Tracking #:</b>	DDAR-128586931	<b>State Tracking #:</b>		<b>Company Tracking #:</b>	
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## Correspondence Summary

### Dispositions

Status	Created By	Created On	Date Submitted
Approved-Closed	Rosalind Minor	07/19/2012	07/19/2012

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## Disposition

Disposition Date: 07/19/2012

Implementation Date:

Status: Approved-Closed

Comment:

Rate data does NOT apply to filing.

Schedule	Schedule Item	Schedule Item Status	Public Access
<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>	Outline of Coverage	Approved-Closed	Yes
<b>Form</b>	DDARIN-CARRYOVER-12	Approved-Closed	Yes

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## Form Schedule

Lead Form Number:							
Item No.	Schedule Item Status	Form Number	Form Type	Form Name	Action/Action Specific Data	Readability Score	Attachments
1	Approved-Closed 07/19/2012	DDARIN-CARRYOVER-12	POLA	DDARIN-CARRYOVER-12	Initial:	29.300	Ind Carryover Rider.pdf

### Form Type Legend:

<b>ADV</b>	Advertising	<b>AEF</b>	Application/Enrollment Form
<b>CER</b>	Certificate	<b>CERA</b>	Certificate Amendment, Insert Page, Endorsement or Rider
<b>DDP</b>	Data/Declaration Pages	<b>FND</b>	Funding Agreement (Annuity, Individual and Group)
<b>MTX</b>	Matrix	<b>NOC</b>	Notice of Coverage
<b>OTH</b>	Other	<b>OUT</b>	Outline of Coverage
<b>PJK</b>	Policy Jacket	<b>POL</b>	Policy/Contract/Fraternal Certificate
<b>POLA</b>	Policy/Contract/Fraternal Certificate: Amendment, Insert Page, Endorsement or Rider	<b>SCH</b>	Schedule Pages



## **DELTA DENTAL OF ARKANSAS Carryover Benefit Rider**

Subject to the conditions stated in this rider, each PARTICIPANT covered under the POLICY may carry over a portion of unused benefits from one POLICY YEAR (“Accumulation Year”) to the next POLICY YEAR (“Carryover Year”). This benefit is the “Carryover Benefit”.

To be able to carry over a portion of unused benefits to the Carryover Year, a PARTICIPANT must have one covered dental service during the Accumulation Year. A PARTICIPANT’s paid claims for the Accumulation Year must be less than [\$100 - \$1,000]. The maximum amount that can be carried over for each POLICY YEAR is [\$100 - \$1,000]. The total amount that can be carried over for the life of the policy cannot exceed [\$100 - \$2,000].

Claims are reimbursed from the PARTICIPANT’s annual MAXIMUM BENEFIT, which is renewed on the PARTICIPANT’s anniversary date each POLICY YEAR. When the PARTICIPANT’s annual MAXIMUM BENEFIT has been exhausted, claims will be paid from the PARTICIPANT’s Carryover Benefits. If a PARTICIPANT exhausts the Carryover Benefits, the following POLICY YEAR will begin a new Accumulation Year for that PARTICIPANT.

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## Supporting Document Schedules

		<b>Item Status:</b>	<b>Status Date:</b>
Satisfied - Item:	Flesch Certification	Approved-Closed	07/19/2012
Comments:			
Attachment(s):			
Compliance Certification DDARIN-CARRYOVER-12.pdf			

		<b>Item Status:</b>	<b>Status Date:</b>
Bypassed - Item:	Application	Approved-Closed	07/19/2012
Bypass Reason:	N/A		
Comments:			

		<b>Item Status:</b>	<b>Status Date:</b>
Bypassed - Item:	Health - Actuarial Justification	Approved-Closed	07/19/2012
Bypass Reason:	N/A		
Comments:			

		<b>Item Status:</b>	<b>Status Date:</b>
Bypassed - Item:	Outline of Coverage	Approved-Closed	07/19/2012
Bypass Reason:	N/A		
Comments:			

## COMPLIANCE CERTIFICATION

I, the undersigned, do hereby certify and attest to the best of my knowledge and belief that:

1. The Flesch reading score of Form DDARIN-CARRYOVER-12 is 29.3, which is below that required by Arkansas law.
2. The nature of the rider requires the use of terminology such as "accumulator" and "carryover", which inflate the Flesch reading score; and
3. Form DDARIN-CARRYOVER-12 should be approved with a Flesch reading score of 29.3.

Signed this 19th day of July, 2012.

A handwritten signature in cursive script that reads "Sara Farris".

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Sara Farris, Director of Compliance