

SERFF Tracking Number: JHAN-128523279 State: Arkansas
Filing Company: John Hancock Life Insurance Company (U.S.A.) State Tracking Number: RPT-LTC 2011
Company Tracking Number: LTC 2011 CLAIMS DENIAL REPORTING
TOI: LTC06 Long Term Care - Other Sub-TOI: LTC06.000 Long Term Care - Other
Product Name: LTC 2011 Claims Denial Reporting
Project Name/Number: LTC 2011 Claims Denial Reporting/LTC 2011 Claims Denial Reporting

Filing at a Glance

Company: John Hancock Life Insurance Company (U.S.A.)

Product Name: LTC 2011 Claims Denial SERFF Tr Num: JHAN-128523279 State: Arkansas

Reporting

TOI: LTC06 Long Term Care - Other SERFF Status: Closed-Accepted State Tr Num: RPT-LTC 2011

For Informational Purposes

Sub-TOI: LTC06.000 Long Term Care - Other Co Tr Num: LTC 2011 CLAIMS DENIAL REPORTING State Status: Closed-Accepted for Informational Purposes

Filing Type: Form

Reviewer(s): Donna Lambert

Authors: Helene Landow, Karren Disposition Date: 07/02/2012

Phair, Debbie Tom, Jacqueline Lau,

Kelly Picard, Adam Goldstein

Date Submitted: 06/28/2012

Disposition Status: Accepted For Informational Purposes

Implementation Date Requested:

Implementation Date:

State Filing Description:

General Information

Project Name: LTC 2011 Claims Denial Reporting

Project Number: LTC 2011 Claims Denial Reporting

Requested Filing Mode: Informational

Status of Filing in Domicile:

Date Approved in Domicile:

Domicile Status Comments: State of Domicile: Michigan

Explanation for Combination/Other:

Market Type: Individual

Submission Type: New Submission

Individual Market Type:

Overall Rate Impact:

Filing Status Changed: 07/02/2012

State Status Changed: 07/02/2012

Deemer Date:

Created By: Kelly Picard

Submitted By: Kelly Picard

Corresponding Filing Tracking Number:

Filing Description:

Re: John Hancock Life Insurance Company (USA)

FEIN # 01-0233346 NAIC # 904-65838

Claims Denial Reporting - Long Term Care Insurance

Life Insurance Division - Acceleration of life insurance death benefit for qualified long term care services rider

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For the period ending December 31, 2011

As required in your jurisdiction, we are submitting the claims denial report for the period of January 1, 2011 through December 31, 2011.

Please note that for the period referenced above, there have been no claim denials to report.

Thank you for your attention to this filing, we look forward to your state's acknowledgement.

If you require anything further, please contact me at 416-852-5431 (collect) or via email at kelly_picard@jhancock.com.

Sincerely,

Kelly Picard
Compliance Consultant

Enclosures: Claims Denial Reporting Form
State Narrative:

Company and Contact

Filing Contact Information

Kelly Picard, Compliance Consultant Kelly_Picard@jhancock.com
200 Bloor Street East 416-852-5431 [Phone]
Toronto, ON M4W 1E5 416-926-3121 [FAX]

Filing Company Information

John Hancock Life Insurance Company (U.S.A.) CoCode: 65838 State of Domicile: Michigan
197 Clarendon Street Group Code: 904 Company Type: Life Insurance
C-7-09 Group Name: State ID Number:
Boston, MA 02117 FEIN Number: 01-0233346
(800) 370-1355 ext. [Phone]

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Filing Fees

Fee Required? No
Retaliatory? No
Fee Explanation:
Per Company: No

| COMPANY | AMOUNT | DATE PROCESSED | TRANSACTION # |
|---|---------|----------------|---------------|
| John Hancock Life Insurance Company (U.S.A.) | \$50.00 | 06/28/2012 | 60472955 |

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Correspondence Summary

Dispositions

| Status | Created By | Created On | Date Submitted |
|---|------------|------------|----------------|
| Accepted For Donna Lambert Informational Purposes | | 07/02/2012 | 07/02/2012 |

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Disposition

Disposition Date: 07/02/2012

Implementation Date:

Status: Accepted For Informational Purposes

Comment:

Rate data does NOT apply to filing.

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| Schedule | Schedule Item | Schedule Item Status | Public Access |
|---------------------|----------------------------------|--|---------------|
| Supporting Document | Flesch Certification | | No |
| Supporting Document | Application | | No |
| Supporting Document | Health - Actuarial Justification | | No |
| Supporting Document | Outline of Coverage | | No |
| Supporting Document | 2011 LTC Claims Denial Report | Accepted for Informational Purposes | No |

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Supporting Document Schedules

| | Item Status: | Status Date: |
|---|-------------------------------------|--------------|
| Bypassed - Item: Flesch Certification Bypass Reason: Not applicable Comments: | | |
| Bypassed - Item: Application Bypass Reason: Not applicable Comments: | | |
| Bypassed - Item: Health - Actuarial Justification Bypass Reason: Not applicable Comments: | | |
| Bypassed - Item: Outline of Coverage Bypass Reason: Not applicable Comments: | | |
| Satisfied - Item: 2011 LTC Claims Denial Report Comments: Attachment: AR 2011 claim denial reporting form JHUSA.pdf | Accepted for Informational Purposes | 07/02/2012 |

**Claims Denial Reporting Form
Long-Term Care Insurance**

Life Insurance Division

Acceleration of life insurance death benefit for qualified long term care services rider

For the State of Arkansas

For the Reporting Year of 2011

Company Name: John Hancock Life Insurance Company (U.S.A.)
 Company Address: P.O. Box 600, Buffalo, NY 14201-0600
 Company NAIC Number: 904-65838
 Contact Person: Kelly Picard

Due: June 30 annually

Phone Number: 416-852-5431

Line of Business: X Individual Group

Instructions

The purpose of this form is to report all long-term care claim denials under in force long-term care insurance policies. Indicate the manner of reporting by checking one of the boxes below:

- Per Claimant – counts each individual who makes one or a series of claim requests
- Per Transaction – counts each claim payment request

“Denied” means a claim that is not paid for any reason other than for claims not paid for failure to meet the waiting period or because of an applicable preexisting condition. It does not include a request for payment that is in excess of the applicable contractual limits.

Inforce Data

| | State Data | Nationwide Data ¹ |
|--|------------|------------------------------|
| Total Number of Inforce Policies as of December 31st | 128 | 16,982 |

| | | State Data | Nationwide Data ¹ |
|----|--|------------|------------------------------|
| 1 | Total Number of Long-Term Care Claims Reported | 0 | 10 |
| 2 | Total Number of Long-Term Care Claims Denied/Not Paid | 0 | 0 |
| 3 | Number of Claims Not Paid due to Preexisting Condition Exclusion | 0 | 0 |
| 4 | Number of Claims Not Paid due to Waiting (Elimination) Period Not Met | 0 | 0 |
| 5 | Net Number of Long-Term Care Claims Denied for Reporting Purposes (Line 2 Minus Line 3 Minus Line 4) | 0 | 0 |
| 6 | Percentage of Long-Term Care Claims Denied of Those Reported (Line 5 Divided By Line 1) | 0 | 0 |
| 7 | Number of Long-Term Care Claim Denied due to: | - | - |
| 8 | • Benefit Eligibility Criteria Not Met ² | 0 | 0 |
| 9 | • Long-Term Care Services Not Covered under the Policy ³ | 0 | 0 |
| 10 | • Provider/Facility Not Qualified under the Policy ⁴ | 0 | 0 |
| 11 | • Other | 0 | 0 |
| | • | | |

1. The nationwide data may be viewed as a more representative and credible indicator where the data for claims reported and denied for your state are small in number.
2. Examples – a benefit trigger not met, certification by a licensed health care practitioner not provided, no plan of care.
3. Example – home health care claim filed under a nursing home only policy
4. Example – a facility that does not meet the minimum level of care requirements or the licensing requirements as outlined in the policy