

State: Arkansas Filing Company: John Hancock Life Insurance Company (USA)
TOI/Sub-TOI: LTC05I Individual Long Term Care - Nursing Home & Home Health Care/LTC05I.004 Partnership
Product Name: Long-Term Care Insurance
Project Name/Number: CCIII-Benefit Builder DRA Partnership Cert/

Filing at a Glance

Company: John Hancock Life Insurance Company (USA)
Product Name: Long-Term Care Insurance
State: Arkansas
TOI: LTC05I Individual Long Term Care - Nursing Home & Home Health Care
Sub-TOI: LTC05I.004 Partnership
Filing Type: Form
Date Submitted: 07/13/2012
SERFF Tr Num: MULF-128510421
SERFF Status: Closed-Filed
State Tr Num:
State Status: Filed-Closed
Co Tr Num: CCIII-BENEFIT BUILDER PARTNERSHIP CERT
Implementation: On Approval
Date Requested:
Author(s): Michelle Fluet, Carol Folsom, Pat Hamlett, Joanne Witham
Reviewer(s): Donna Lambert (primary)
Disposition Date: 07/16/2012
Disposition Status: Filed
Implementation Date:

State Filing Description:

State: Arkansas Filing Company: John Hancock Life Insurance Company (USA)
TOI/Sub-TOI: LTC05I Individual Long Term Care - Nursing Home & Home Health Care/LTC05I.004 Partnership
Product Name: Long-Term Care Insurance
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General Information

Project Name: CCIII-Benefit Builder DRA Partnership Cert Status of Filing in Domicile: Not Filed
Project Number: Date Approved in Domicile:
Requested Filing Mode: Review & Approval Domicile Status Comments: Our domicile state of Michigan is not a Partnership state.
Explanation for Combination/Other: Market Type: Individual
Submission Type: New Submission Individual Market Type:
Overall Rate Impact: Filing Status Changed: 07/16/2012
State Status Changed: 07/16/2012
Deemer Date: Created By: Joanne Witham
Submitted By: Joanne Witham Corresponding Filing Tracking Number: MULF-128202460

Filing Description:

On June 27, 2012, we received approval from your department for changes to our individual long-term care insurance policy, form LTC-11 AR, SERFF# MULF-128202460. We are submitting a revised Partnership Certification to certify the new Benefit Builder inflation option.

Partnership Certification

We are submitting a Partnership certification that the form referenced below meets all applicable consumer protection standards required to qualify as a Partnership policy. We intend to use all disclosure forms previously approved by your Department as referenced below. All assertions made in that submissions are applicable as well.

Policy Form – LTC-11 AR Approved 3/16/2011 and changes were approved 6/27/2012

Partnership Related Disclosure Forms

We intend to use the following disclosures as required without modification which were previously approved by your department for use for prior policy forms on 7/8/2008, SERFF# MULF-125695861.

We will use Partnership Disclosure Notice LTC-PRT AR 10/07 at time of issuance with a Partnership policy if the policy meets Partnership requirements at such time.

Non-Partnership Policy Notice Form LTC-NPRT AR 10/07 will be provided to a policyholder whose policy does not meet the requirements for a Partnership policy at issuance.

We will use the Partnership Program Notice LTC-OC-PRT AR 10/07 at time of solicitation and such form will be provided with the outline of coverage. This form provides general information regarding the Virginia Partnership program.

Inflation Coverage

In order to meet the inflation requirements of the DRA requirements relating to allowable inflation requirements, the following inflation options are intended to be Partnership compliant under this form by age tier:

State: Arkansas **Filing Company:** John Hancock Life Insurance Company (USA)
TOI/Sub-TOI: LTC05I Individual Long Term Care - Nursing Home & Home Health Care/LTC05I.004 Partnership
Product Name: Long-Term Care Insurance
Project Name/Number: CCIII-Benefit Builder DRA Partnership Cert/
Age Tier Type of Inflation Coverage Form #

for issue ages under 61 CPI Compound Inflation Coverage LTC-CPI/GIO 4/11
CPI Compound Inflation Coverage through Age 75 LTC-CPI75GIO 4/11
5% Compound Inflation Coverage LTC-5COMP 4/11
3% Compound Inflation Coverage LTC-3COMP 4/11
for issue ages 61-75 CPI Compound Inflation Coverage LTC-CPI/GIO 4/11
CPI Compound Inflation Coverage through Age 75 (only available thru age 70) LTC-CPI75GIO 4/11
5% Compound Inflation Coverage LTC-5COMP 4/11
3% Compound Inflation Coverage LTC-3COMP 4/11
for issue ages 76 and over CPI Compound Inflation Coverage LTC-CPI/GIO 4/11
5% Compound Inflation Coverage LTC-5COMP 4/11
3% Compound Inflation Coverage LTC-3COMP 4/11
Benefit Builder LTC-BLD/GIO

We look forward to hearing from you that our certifications have been accepted.

Company and Contact

Filing Contact Information

Joanne Witham ,	jwitham@jhancock.com
200 Berkeley Street	617-572-0281 [Phone]
Boston, MA 02117	617-572-0399 [FAX]

Filing Company Information

John Hancock Life Insurance Company (USA)	CoCode: 65838	State of Domicile: Michigan
200 Berkeley Street	Group Code: 904	Company Type:
Boston, MA 02176	Group Name:	State ID Number:
(617) 572-6000 ext. [Phone]	FEIN Number: 01-0233346	

Filing Fees

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

Company	Amount	Date Processed	Transaction #
John Hancock Life Insurance Company (USA)	\$0.00	07/13/2012	

SERFF Tracking #:	MULF-128510421	State Tracking #:		Company Tracking #:	CCIII-BENEFIT BUILDER PARTNERSHIP CERT
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State:	Arkansas	Filing Company:	John Hancock Life Insurance Company (USA)
TOI/Sub-TOI:	LTC05I Individual Long Term Care - Nursing Home & Home Health Care/LTC05I.004 Partnership		
Product Name:	Long-Term Care Insurance		
Project Name/Number:	CCIII-Benefit Builder DRA Partnership Cert/		

Correspondence Summary

Dispositions

Status	Created By	Created On	Date Submitted
Filed	Donna Lambert	07/16/2012	07/16/2012

SERFF Tracking #:

MULF-128510421

State Tracking #:**Company Tracking #:**CCIII-BENEFIT BUILDER
PARTNERSHIP CERT

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Product Name: Long-Term Care Insurance
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Filing Company: John Hancock Life Insurance Company (USA)

Disposition

Disposition Date: 07/16/2012

Implementation Date:

Status: Filed

Comment:

Rate data does NOT apply to filing.

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	Cover Letter and Partnership Certification	Filed	Yes

SERFF Tracking #:

MULF-128510421

State Tracking #:**Company Tracking #:**CCIII-BENEFIT BUILDER
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Supporting Document Schedules

		Item Status:	Status Date:
Bypassed - Item:	Flesch Certification		
Bypass Reason:	Partnership certification submission.		
Comments:			

		Item Status:	Status Date:
Bypassed - Item:	Application		
Bypass Reason:	Partnership certification submission.		
Comments:			

		Item Status:	Status Date:
Bypassed - Item:	Health - Actuarial Justification		
Bypass Reason:	Partnership certification submission.		
Comments:			

		Item Status:	Status Date:
Bypassed - Item:	Outline of Coverage		
Bypass Reason:	Partnership certification submission.		
Comments:			

		Item Status:	Status Date:
Satisfied - Item:	Cover Letter and Partnership Certification	Filed	07/16/2012
Comments:			
Attachment(s):	2012 Arkansas DRA Partnership Cover.pdf Issuer Certification FormLTC-11AR_2012.pdf		

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

John Hancock Place
Post Office Box 111
Boston, Massachusetts 02117
1-888-877-6075
Fax: (617) 450-8198
E-mail: jwitham@jhancock.com



Joanne Witham
Director
LTC Contracts and Legislative Services

July 13, 2012

Commissioner Jay Bradford
Arkansas Insurance Department
1200 West 3rd Street
Little Rock, AR 72201-1904

Re: **John Hancock Life Insurance Company (U.S.A.)**
Individual Long-Term Care Partnership Program Submission
Company NAIC # 65838; FEIN #: 01-0233346
Policy Form LTC-11 AR

Dear Commissioner:

On June 27, 2012, we received approval from your department for changes to our individual long-term care insurance policy, form LTC-11 AR, SERFF# MULF-128202460. We are submitting a revised Partnership Certification to certify the new Benefit Builder inflation option.

Partnership Certification

We are submitting a Partnership certification that the form referenced below meets all applicable consumer protection standards required to qualify as a Partnership policy. We intend to use all disclosure forms previously approved by your Department as referenced below. All assertions made in that submissions are applicable as well.

Policy Form – LTC-11 AR	Approved 3/16/2011 and changes were approved 6/27/2012
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Partnership Related Disclosure Forms

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Age Tier	Type of Inflation Coverage	Form #
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	CPI Compound Inflation Coverage through Age 75	LTC-CPI75GIO 4/11
	5% Compound Inflation Coverage	LTC-5COMP 4/11
	3% Compound Inflation Coverage	LTC-3COMP 4/11
for issue ages 61-75	CPI Compound Inflation Coverage	LTC-CPI/GIO 4/11
	CPI Compound Inflation Coverage through Age 75 (only available thru age 70)	LTC-CPI75GIO 4/11
	5% Compound Inflation Coverage	LTC-5COMP 4/11
	3% Compound Inflation Coverage	LTC-3COMP 4/11
for issue ages 76 and over	CPI Compound Inflation Coverage	LTC-CPI/GIO 4/11
	5% Compound Inflation Coverage	LTC-5COMP 4/11
	3% Compound Inflation Coverage	LTC-3COMP 4/11
	Benefit Builder	LTC-BLD/GIO

We look forward to hearing from you that our certifications have been accepted.

Please feel free to call me at 1-888-877-6075 or email me at jwitham@jhancock.com should you have any questions.

Thank you for your time and consideration in this matter.

Sincerely,



Joanne Witham
Director

ISSUER CERTIFICATION FORM

(relating to Qualified State Long-Term Care Insurance Partnership)

In order to provide each State insurance commissioner with information necessary to provide a certification for policies, this Issuer Certification Form requests information and a certification from issuers of long-term care insurance policies with respect to policy forms that may be covered under the Qualified Partnership of the State.

An insurance company may request certification of policies from time to time and, accordingly, may supplement this issuer certification form, e.g., as it introduces new long-term care insurance policy forms for issuance.

I. GENERAL INFORMATION

A. Name, address and telephone number of issuer:

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

John Hancock Place
Post Office Box 111
Boston, Massachusetts 02117
Phone: (617) 572-6000

NAIC #: 65838

FEIN #: 01-0233346

B. Name, address, telephone number, and email address (if available) of an employee of issuer who will be the contact person for information relating to this form:

Marie Roche

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

John Hancock Place
Post Office Box 111
Boston, Massachusetts 02117
Phone: (617) 572-7500
mroche@jhancock.com

C. Policy form number(s) (or other identifying information, such as certificate series) for policies covered by this Issuer Certification Form (expand the space below as required):

- Policy Series LTC-11 AR with changes approved 6/27/2012.

Specimen copies of each of the above policy forms, including any riders and endorsements, shall be provided upon request.

II. CERTIFICATIONS

- A.** I hereby certify that the policy forms listed above are in compliance with Rule 94 and all other Arkansas statutes and rules regarding long-term care insurance.
- B.** I hereby certify to the best of my knowledge and belief that all producers who sell, solicit or negotiate long-term care insurance products on {insert issuer name's} behalf have received the training required for Partnership policies and that they demonstrate an understanding of the policies and their relationship to public and private long-term care coverage.
- C.** I hereby certify that the answers, accompanying documents, and other information set forth herein are, to the best of my knowledge and belief, true, correct, and complete.

7/13/12
Date

Marie Roche, Assistant Vice President
Name and title of officer of the Issuer



Signature of officer of the Issuer