

SERFF Tracking Number: UHLC-128526317 State: Arkansas  
 Filing Company: UnitedHealthcare Insurance Company State Tracking Number:  
 Company Tracking Number: FM12-489  
 TOI: MS08G Group Medicare Supplement - Standard Sub-TOI: MS08G.001 Plan A 2010  
 Plans 2010  
 Product Name: GROUP MEDICARE SUPPLEMENT  
 Project Name/Number: ADVERTISING/FM12-489

## Filing at a Glance

Company: UnitedHealthcare Insurance Company

Product Name: GROUP MEDICARE SUPPLEMENT SERFF Tr Num: UHLC-128526317 State: Arkansas

TOI: MS08G Group Medicare Supplement - Standard Plans 2010 SERFF Status: Closed-Filed-Closed State Tr Num:

Sub-TOI: MS08G.001 Plan A 2010 Co Tr Num: FM12-489 State Status: Filed-Closed

Filing Type: Advertisement Reviewer(s): Stephanie Fowler

Authors: Michelle Ambach, Wanda Augustus, Tammy Frederick, Bobbie Walton, Lisa Muhammad Disposition Date: 07/10/2012

Date Submitted: 06/29/2012

Disposition Status: Filed-Closed

Implementation Date Requested: On Approval

Implementation Date:

State Filing Description:

## General Information

Project Name: ADVERTISING

Status of Filing in Domicile: Not Filed

Project Number: FM12-489

Date Approved in Domicile:

Requested Filing Mode: File & Use

Domicile Status Comments:

Explanation for Combination/Other:

Market Type: Group

Submission Type: New Submission

Group Market Size: Large

Group Market Type: Association

Overall Rate Impact:

Filing Status Changed: 07/10/2012

State Status Changed: 07/10/2012

Deemer Date:

Created By: Lisa Muhammad

Submitted By: Lisa Muhammad

Corresponding Filing Tracking Number: FM12-489

Filing Description:

Submitted, for your review is advertising for use in connection with the AARP group health insurance plans. The enclosed advertising is substantially similar in content to advertising previously approved by the Department on 10/21/2011 under SERFF Tracking Number UHLC-127729762 .

This advertising was accepted by CMS on June 23, 2012.

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State Narrative:

## Company and Contact

### Filing Contact Information

Susan Cipollo, Director Susan\_J\_Cipollo@uhc.com  
 680 Blair Mill Rd. 215-902-8444 [Phone]  
 Horsham, PA 19044 215-902-8813 [FAX]

### Filing Company Information

UnitedHealthcare Insurance Company CoCode: 79413 State of Domicile: Connecticut  
 185 Asylum Street Group Code: 707 Company Type: Life and Health  
 Hartford, CT 06103 Group Name: State ID Number:  
 (860) 702-5000 ext. [Phone] FEIN Number: 36-2739571

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## Filing Fees

Fee Required? Yes  
 Fee Amount: \$50.00  
 Retaliatory? No  
 Fee Explanation: \$50 X 1 = \$50.00  
 Per Company: No

COMPANY	AMOUNT	DATE PROCESSED	TRANSACTION #
UnitedHealthcare Insurance Company	\$50.00	06/29/2012	60558653

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## Correspondence Summary

### Dispositions

Status	Created By	Created On	Date Submitted
Filed-Closed	Stephanie Fowler	07/10/2012	07/10/2012

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## Disposition

Disposition Date: 07/10/2012

Implementation Date:

Status: Filed-Closed

Comment:

Rate data does NOT apply to filing.



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## Form Schedule

**Lead Form Number: CA25166ST (04-12)**

Schedule Item	Form Number	Form Type	Form Name	Action	Action Specific Data	Readability	Attachment
Filed-Closed 07/10/2012	CA25166S T (04-12)	Advertising	SELF MAILER	Initial		45.000	CA25166ST (04-12)_filing.pdf



**MedicareRx Plans**  
insured through **UnitedHealthcare**



**Medicare Supplement Plans**  
insured by **UnitedHealthcare  
Insurance Company**

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**= More Complete Health Care Coverage**

Want to learn about how both AARP® MedicareRx Plans and AARP® Medicare Supplement Insurance Plans, insured by UnitedHealthcare Insurance Company (UnitedHealthcare), can work together to provide you with more complete health coverage?

**[It's not too late!]**



**Call now [Agent/Producer Name]  
[1-800-272-2146], TTY: 711**

Licensed Insurance Agent/Producer Contracted with UnitedHealthcare

The AARP Medicare Prescription Drug Plan (PDP) is insured or covered by UnitedHealthcare Insurance Company or one of its affiliates, a Medicare-approved Part D sponsor.

UnitedHealthcare Insurance Company pays royalty fees to AARP for the use of its intellectual property. These fees are used for the general purposes of AARP. AARP and its affiliates are not insurers. You do not need to be an AARP member to enroll in a Part D plan. AARP encourages you to consider your needs when selecting products and does not make specific product recommendations for individuals.

AARP does not employ or endorse agents, brokers or producers.

Insured by UnitedHealthcare Insurance Company, Horsham, PA (UnitedHealthcare Insurance Company of New York, Islandia, NY for New York residents). Policy form No. GRP 79171 GPS-1 (G-36000-4). In some states plans may be available to persons under age 65 who are eligible for Medicare by reason of disability or end-stage renal disease.

**Not connected with or endorsed by the U.S. Government or the federal Medicare program.**

**This is a solicitation of insurance. A licensed insurance agent/producer may contact you.**

If you prefer, you can contact UnitedHealthcare directly for more information at 1-888-867-5564, TTY 711, from 8 a.m. to 8 p.m., 7 days a week.

An agent/producer can provide complete information including benefits, costs, eligibility requirements, exclusions and limitations.

**One Company. Two Plans. More Complete Coverage.**

Get your prescription drug coverage and Medicare supplement insurance from the same insurer—UnitedHealthcare.

**Call today for more info!**

[Agent/Producer Name]  
[Agent/Producer Address]  
[Agent/Producer Address]



[SAMPLE A. SAMPLE]  
[123 ANY STREET]  
[ANY CITY, STATE 12345-6789]

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## Supporting Document Schedules

	Item Status:	Status
<b>Satisfied - Item:</b> SOV	Filed-Closed	<b>Date:</b> 07/10/2012
<b>Comments:</b>		
<b>Attachment:</b>		
Co Mkt Postcard STSOV.pdf		

## Statement of Variability

Variable Information	Description
[It's not too late!]	"It's Not Too Late" will only be included when mailed during the PDP annual enrollment period and removed when mailed outside of this period.
[Agent/Producer Name] [1-800-272-2146]	Each Agent/Producer will include his/her own name and phone number.
[Agent/Producer Name] [Agent/Producer Address] [Agent/Producer Address]	Each Agent/Producer will include his/her own contact information.
[SAMPLE A. SAMPLE] [123 ANY STREET] [ANY CITY, STATE 12345-6789]	Customer address will vary