

State: Arkansas **Filing Company:** Arkansas Blue Cross and Blue Shield
TOI/Sub-TOI: H16G Group Health - Major Medical/H16G.001A Any Size Group - PPO
Product Name: Special Amendment
Project Name/Number: Amendment/23-2662 8/12

Filing at a Glance

Company: Arkansas Blue Cross and Blue Shield
Product Name: Special Amendment
State: Arkansas
TOI: H16G Group Health - Major Medical
Sub-TOI: H16G.001A Any Size Group - PPO
Filing Type: Form
Date Submitted: 08/22/2012
SERFF Tr Num: ARBB-128654737
SERFF Status: Closed-Approved-Closed
State Tr Num:
State Status: Approved-Closed
Co Tr Num: 23-2662 8/12
Implementation: On Approval
Date Requested:
Author(s): zSERFFStaff zIndustrySupportCL, Christi Kittler, Yvonne McNaughton, Frank Sewall, Rita Thatcher, Evelyn Laney
Reviewer(s): Rosalind Minor (primary)
Disposition Date: 08/22/2012
Disposition Status: Approved-Closed
Implementation Date:
State Filing Description:

State: Arkansas **Filing Company:** Arkansas Blue Cross and Blue Shield
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General Information

Project Name: Amendment	Status of Filing in Domicile: Pending
Project Number: 23-2662 8/12	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: 08/22/2012	Deemer Date:
State Status Changed: 08/22/2012	Submitted By: Evelyn Laney
Created By: Evelyn Laney	
Corresponding Filing Tracking Number:	

PPACA: Not PPACA-Related

PPACA Notes: null

Filing Description:

Attached please find form 23-2662 8/12 for your review and approval if indicated. This amendment provides that all Full-Time Employees rehired within three (3) months of their termination date are eligible for coverage in the employee health benefit plan the first of the Policy Month following the rehire date. This amendment was specifically designed for the Arkansas Refrigerated group, but can be used with any group with these same requirements. Also enclosed is a Flesch Reading Ease score certification signed by an officer of the company as required by Arkansas Code Annotated §23-80-206(d). Please also note, we have scored the amendment as part of the benefit certificates with which it will be used as provided by Arkansas Code Annotated §23-80-206(e). By way of this letter, I certify that the submission meets the provisions of Arkansas Insurance Department Rule & Regulation 19. I certify that the Life and Health Guaranty Association Notices required by Arkansas Insurance Department Rule & Regulation 49 are incorporated in the benefit certificates to which this amendment will be attached. I further certify that the consumer information notice required by Arkansas Code Annotated §23-79-138 is incorporated in the benefit certificates to which this amendment is attached. Please feel free to contact me at 378-2165 with any questions you may have.

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

Arkansas Blue Cross and Blue Shield	CoCode: 83470	State of Domicile: Arkansas
601 S. Gaines Street	Group Code:	Company Type:
Little Rock, AR 72201	Group Name:	State ID Number: N/A
(501) 378-2967 ext. [Phone]	FEIN Number: 71-0226428	

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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 #
Arkansas Blue Cross and Blue Shield	\$50.00	08/22/2012	61905130

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Correspondence Summary

Dispositions

Status	Created By	Created On	Date Submitted
Approved-Closed	Rosalind Minor	08/22/2012	08/22/2012

SERFF Tracking #:

ARBB-128654737

State Tracking #:

Company Tracking #:

23-2662 8/12

State:

Arkansas

Filing Company:

Arkansas Blue Cross and Blue Shield

TOI/Sub-TOI:

H16G Group Health - Major Medical/H16G.001A Any Size Group - PPO

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Amendment/23-2662 8/12

Disposition

Disposition Date: 08/22/2012

Implementation Date:

Status: Approved-Closed

HHS Status: HHS Approved

State Review: Reviewed-No Actuary

Comment:

Rate data does NOT apply to filing.

Schedule	Schedule Item	Schedule Item Status	Public Access
Supporting Document	Flesch Certification	Approved-Closed	Yes
Supporting Document	Application	Approved-Closed	Yes
Supporting Document	PPACA Uniform Compliance Summary	Approved-Closed	Yes
Form	Amendment	Approved-Closed	Yes

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Form Schedule

Lead Form Number: 23-2662 8/12

Item No.	Schedule Item Status	Form Number	Form Type	Form Name	Action/ Action Specific Data	Readability Score	Attachments
1	Approved-Closed 08/22/2012	23-2662 8/12	CERA	Amendment	Initial:	42.100	23-2662 8-12(3 mo.)ARRef.pdf

Form Type Legend:

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



**Arkansas
BlueCross BlueShield**
An Independent Licensee of the Blue Cross and Blue Shield Association

**AMENDMENT TO THE
ARKANSAS BLUE CROSS AND BLUE SHIELD
COMPREHENSIVE MAJOR MEDICAL
GROUP BENEFIT CERTIFICATES**

AMENDMENT NO. 2662

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

Effective Date for Rehired Employees. Subject to all other terms, conditions, exclusions and limitation in the Plan as set forth in this Benefit Certificate, all full-time Employees rehired within three (3) months of their termination date will be eligible for coverage in the employee health benefit plan on the first of the Policy Month following the rehire date. If an Employee is hired after three (3) months then they will be required to satisfy the Waiting Period.

If an Employee loses coverage due to a reduction in work and returns to full-time status within three (3) months of their termination date, they will be exempt from satisfying the Waiting Period and will be eligible for coverage the first of the Policy month following the date they return to full-time status. If the Employee returns to full-time status after three (3) months then they will be required to satisfy the Waiting Period.

This Amendment becomes a part of the Arkansas Blue Cross and Blue Shield Managed Benefits Comprehensive Major Medical Group Benefit Certificates. All other provisions of the Group Benefit Certificate remain in full force and effect.

P. Mark White

P. Mark White, President and Chief Executive Officer

ARKANSAS BLUE CROSS AND BLUE SHIELD
A MUTUAL INSURANCE COMPANY
601 S. Gaines Street
Little Rock, Arkansas 72201

SERFF Tracking #:

ARBB-128654737

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Supporting Document Schedules

		Item Status:	Status Date:
Satisfied - Item:	Flesch Certification	Approved-Closed	08/22/2012
Comments:	Please see attached.		
Attachment(s):	Flesch Certification Form 23-2662 8-12.pdf		

		Item Status:	Status Date:
Bypassed - Item:	Application	Approved-Closed	08/22/2012
Bypass Reason:	Not required.		
Comments:			

		Item Status:	Status Date:
Bypassed - Item:	PPACA Uniform Compliance Summary	Approved-Closed	08/22/2012
Bypass Reason:	Not PPACA related.		
Comments:			



**Arkansas
BlueCross BlueShield**
An Independent Licensee of the Blue Cross and Blue Shield Association

**RE: Arkansas Blue Cross and Blue Shield
Amendment No. 23-2662 8/12**

**FLESCH READING EASE
CERTIFICATION**

This is to certify that the above referenced document has achieved a Flesch Reading Ease Score average of 42.1 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.

Name

Vice President
Title

August 22, 2012
Date