

State: Arkansas Filing Company: United National Life Insurance Company of America
 TOI/Sub-TOI: H14I Individual Health - Hospital Indemnity/H14I.000 Health - Hospital Indemnity
 Product Name: Hosptial Confinemnet U9911 Rate Filing
 Project Name/Number: /

Filing at a Glance

Company: United National Life Insurance Company of America
 Product Name: Hosptial Confinemnet U9911 Rate Filing
 State: Arkansas
 TOI: H14I Individual Health - Hospital Indemnity
 Sub-TOI: H14I.000 Health - Hospital Indemnity
 Filing Type: Rate
 Date Submitted: 06/11/2012
 SERFF Tr Num: GRTT-128455081
 SERFF Status: Closed-Disapproved
 State Tr Num:
 State Status: Disapproved-Closed
 Co Tr Num: UNLHCI9911_AR12
 Implementation: On Approval
 Date Requested:
 Author(s): Linda David
 Reviewer(s): Rosalind Minor (primary)
 Disposition Date: 08/17/2012
 Disposition Status: Disapproved
 Implementation Date:

State Filing Description:

State: Arkansas **Filing Company:** United National Life Insurance Company of America
TOI/Sub-TOI: H14I Individual Health - Hospital Indemnity/H14I.000 Health - Hospital Indemnity
Product Name: Hospitai Confinemnet U9911 Rate Filing
Project Name/Number: /

General Information

Project Name: Status of Filing in Domicile: Pending
 Project Number: Date Approved in Domicile:
 Requested Filing Mode: Review & Approval Domicile Status Comments:
 Explanation for Combination/Other: Market Type: Individual
 Submission Type: New Submission Individual Market Type:
 Overall Rate Impact: 25% Filing Status Changed: 08/17/2012
 State Status Changed: 08/17/2012
 Deemer Date: Created By: Linda David
 Submitted By: Linda David Corresponding Filing Tracking Number:

Filing Description:
 Annual loss ratio and rate revision filing for our Hospital Confinement and Home Care Policy.

Company and Contact

Filing Contact Information

Linda David, Product Analyst
 1275 MILWAUKEE AVE 847-904-5639 [Phone]
 GLENVIEW, IL 60025

Filing Company Information

United National Life Insurance CoCode: 92703 State of Domicile: Illinois
 Company of America Group Code: 687 Company Type:
 1275 Milwaukee Ave. Group Name: State ID Number:
 Glenview, IL 60025 FEIN Number: 37-1095206
 (847) 803-5252 ext. [Phone]

Filing Fees

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

Company	Amount	Date Processed	Transaction #
United National Life Insurance Company of America	\$50.00	06/11/2012	60050003

SERFF Tracking #:

GRTT-128455081

State Tracking #:**Company Tracking #:**

UNLHCI9911_AR12

State:

Arkansas

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H14I Individual Health - Hospital Indemnity/H14I.000 Health - Hospital Indemnity

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Correspondence Summary

Dispositions

Status	Created By	Created On	Date Submitted
Disapproved	Rosalind Minor	08/17/2012	08/17/2012

Objection Letters and Response Letters

Objection Letters

Status	Created By	Created On	Date Submitted
Pending Industry Response	Rosalind Minor	06/21/2012	06/21/2012
Pending Industry Response	Rosalind Minor	06/19/2012	06/19/2012

Response Letters

Responded By	Created On	Date Submitted
Linda David	06/19/2012	06/19/2012

State: Arkansas **Filing Company:** United National Life Insurance Company of America
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Disposition

Disposition Date: 08/17/2012

Implementation Date:

Status: Disapproved

Comment:

We are disapproving this submission since we have not received a response to our Objection Letter of 6/21/12.

Thank you for your understanding.

Company Name:	Overall % Indicated Change:	Overall % Rate Impact:	Written Premium Change for this Program:	# of Policy Holders Affected for this Program:	Written Premium for this Program:	Maximum % Change (where req'd):	Minimum % Change (where req'd):
United National Life Insurance Company of America	%	%				%	%

Schedule	Schedule Item	Schedule Item Status	Public Access
Supporting Document	Health - Actuarial Justification	Disapproved	No
Supporting Document	Cover Letter	Disapproved	Yes
Supporting Document (revised)	Exhibits 1, 2 and 3	Disapproved	No
Supporting Document	Exhibits 1, 2 and 3	Replaced	No
Supporting Document	AR Rates	Disapproved	No

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Objection Letter

Objection Letter Status	Pending Industry Response
Objection Letter Date	06/21/2012
Submitted Date	06/21/2012
Respond By Date	07/21/2012

Dear Linda David,

Introduction:

This will acknowledge receipt of the captioned filing.

Objection 1

- Exhibits 1, 2 and 3 (Supporting Document)

Comments: Why do the Exhibits reference major medical experience when this product is a hospital indemnity product and not major medical?

Conclusion:

A.C.A. 23-79-109(1)-(5) sets forth the procedure by which filings may be deemed approved upon the expiration of certain time periods with no affirmative action by the commissioner. If the commissioner determines that additional information is needed to make a decision regarding approval, such request for information will be made to the company. The filing will not be considered complete until said additional information is received. The time periods set forth in this statute will not begin to run until the filing is complete.

Please feel free to contact me if you have questions.

Sincerely,

Rosalind Minor

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Objection Letter

Objection Letter Status	Pending Industry Response
Objection Letter Date	06/19/2012
Submitted Date	06/19/2012
Respond By Date	

Dear Linda David,

Introduction:

This will acknowledge receipt of the captioned filing.

Objection 1

- Exhibits 1, 2 and 3 (Supporting Document)

Comments:

The supporting documents that are attached are for Guarantee Trust Life, Major Medical Products.

Please attach the correct documents for United National Life Insurance Company, Hospital Indemnity & Home Health Care Policy.

Conclusion:

A.C.A. 23-79-109(1)-(5) sets forth the procedure by which filings may be deemed approved upon the expiration of certain time periods with no affirmative action by the commissioner. If the commissioner determines that additional information is needed to make a decision regarding approval, such request for information will be made to the company. The filing will not be considered complete until said additional information is received. The time periods set forth in this statute will not begin to run until the filing is complete.

Please feel free to contact me if you have questions.

Sincerely,

Rosalind Minor

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Response Letter

Response Letter Status	Submitted to State
Response Letter Date	06/19/2012
Submitted Date	06/19/2012

Dear Rosalind Minor,

Introduction:

This is in response to your objection letter dated 6/19.

Response 1

Comments:

Attached are the exhibits for UNL. Please note the previous exhibits had the incorrect title only.

Related Objection 1

Applies To:

- Exhibits 1, 2 and 3 (Supporting Document)

Comments:

The supporting documents that are attached are for Guarantee Trust Life, Major Medical Products.

Please attach the correct documents for United National Life Insurance Company, Hospital Indemnity & Home Health Care Policy.

Changed Items:

Supporting Document Schedule Item Changes

Satisfied -Name: Exhibits 1, 2 and 3

Comment:

No Form Schedule items changed.

No Rate/Rule Schedule items changed.

Conclusion:

Thank you for your attention to this filing.

Linda David
 Sincerely,
 Linda David

SERFF Tracking #:

GRTT-128455081

State Tracking #:

Company Tracking #:

UNLHCI9911_AR12

State: Arkansas

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Rate Information

Rate data applies to filing.

Filing Method: Serff

Rate Change Type: Increase

Overall Percentage of Last Rate Revision: 15.000%

Effective Date of Last Rate Revision: 11/20/2009

Filing Method of Last Filing: Serff

Company Rate Information

Company Name:	Overall % Indicated Change:	Overall % Rate Impact:	Written Premium Change for this Program:	# of Policy Holders Affected for this Program:	Written Premium for this Program:	Maximum % Change (where req'd):	Minimum % Change (where req'd):
United National Life Insurance Company of America	%	%				%	%

SERFF Tracking #:

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Supporting Document Schedules

		Item Status:	Status Date:
Satisfied - Item:	Cover Letter	Disapproved	08/17/2012
Comments:			
Attachment(s):			
AR-LTR.pdf			



UNITED NATIONAL LIFE INSURANCE COMPANY OF

P. O. Box 1154 Glenview, Illinois 60025-1154

May 31, 2012

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

Re: Loss Ratio & Rate Revision Filing – Hospital Confinement and Home Care Policy
N.A.I.C. Company Code 92703
Federal ID Number 37-1095206

Dear Mr. Bradford:

Enclosed please find our annual loss ratio and rate revision filing for our Hospital Confinement and Home Care Policy. We are requesting changes shown below which will affect 46 in force policyholders in Arkansas with a current average annual premium of \$633. There was one prior rate increase of 15%, which was approved October 02, 2009 for these forms. The affected forms and requested increases are as follows:

Form	U9911A	U9911B	U9911C	U9911D	U9911E	U9911F	U9911G	Average
Request	25%	25%	25%	25%	25%	25%	25%	25%

Your attention to this filing is greatly appreciated. If you have any questions, please call me at 1-847-904-5639, fax me at 1-847-699-0093 or e-mail me at Linda_David@gtlic.com.

Sincerely,

United National Life Insurance Company

Linda David
Corporate Actuarial

Encl.