

State: Arkansas **Filing Company:** State Farm Mutual Automobile Insurance Company
TOI/Sub-TOI: MS06 Medicare Supplement - Other/MS06.000 Medicare Supplement - Other
Product Name: General Description of Benefits-Medicare Supplement
Project Name/Number: General Description of Benefits-Medicare Supplement/MS-2.3

Filing at a Glance

Company: State Farm Mutual Automobile Insurance Company
Product Name: General Description of Benefits-Medicare Supplement
State: Arkansas
TOI: MS06 Medicare Supplement - Other
Sub-TOI: MS06.000 Medicare Supplement - Other
Filing Type: Advertisement
Date Submitted: 08/07/2012
SERFF Tr Num: SFCM-128619051
SERFF Status: Closed-Filed-Closed
State Tr Num:
State Status: Filed-Closed
Co Tr Num: MS-2.3
Implementation: On Approval
Date Requested:
Author(s): Sandy Barnes, Tammie Mills, Sherry Boitnott, Regina King, Maureen Macak
Reviewer(s): Stephanie Fowler (primary)
Disposition Date: 08/10/2012
Disposition Status: Filed-Closed
Implementation Date:
State Filing Description:

State: Arkansas **Filing Company:** State Farm Mutual Automobile Insurance Company
TOI/Sub-TOI: MS06 Medicare Supplement - Other/MS06.000 Medicare Supplement - Other
Product Name: General Description of Benefits-Medicare Supplement
Project Name/Number: General Description of Benefits-Medicare Supplement/MS-2.3

General Information

Project Name: General Description of Benefits-Medicare Supplement	Status of Filing in Domicile: Not Filed
Project Number: MS-2.3	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:	Filing Status Changed: 08/10/2012
	State Status Changed: 08/10/2012
Deemer Date:	Created By: Sandy Barnes
Submitted By: Sandy Barnes	Corresponding Filing Tracking Number:
Filing Description:	
August 6, 2012	

Re: State Farm Mutual Automobile Insurance Company
 NAIC #176-25178
 FEIN # 37-0533100
 Medicare Supplemental Health Insurance
 Company Tracking Number: MS 2.3

Form #: MS 2.3
 Form Name: General Description of Benefits-Medicare Supplement
 Replaces: MS 2.2
 Approved: 12/16/2009
 Tracking #: SFCM-127178302

Enclosed for filing on behalf of the State Farm Mutual Automobile Insurance Company of Bloomington, Illinois is the referenced advertising form. This form is being filed for use in your state and contains information regarding Medicare Supplement Insurance

This marketing material will be used with policy series numbers 97037HAR, 97038HAR and 97039 HAR approved 12/16/2009 under SERFF # STFH-126337913.

The changes to the StateFarm.com page are updates language in skiller nursing coinsurance, Emergency Care in a Foreign Country and updated form number.

The format and colors that are on the internet pages are variable and may change from year to year.

These pages will be available on Statefarm.com. Once someone selects the state they reside in, the policy benefits page for their state will be available.

The anticipated effective date of this form will be on approval.

Sincerely,

State: Arkansas **Filing Company:** State Farm Mutual Automobile Insurance Company
TOI/Sub-TOI: MS06 Medicare Supplement - Other/MS06.000 Medicare Supplement - Other
Product Name: General Description of Benefits-Medicare Supplement
Project Name/Number: General Description of Benefits-Medicare Supplement/MS-2.3

Tammie Mills
 Analyst-L/H Contracts & Compliance
 1-309-994-0300
 e-mail: tammie.mills.csag@statefarm.com

Company and Contact

Filing Contact Information

Sandy Barnes, Tech - Contracts & Compliance sandy.barnes.abbs@statefarm.com
 One State Farm Plaza 309-766-2477 [Phone]
 Bloomington, IL 61710-0001 309-766-8483 [FAX]

Filing Company Information

State Farm Mutual Automobile Insurance Company CoCode: 25178 State of Domicile: Illinois
 One State Farm Plaza Group Code: 176 Company Type:
 Laura Walters / Marketing D-3 Group Name: State ID Number:
 Bloomington, IL 61710 FEIN Number: 37-0533100
 (309) 763-8104 ext. [Phone]

Filing Fees

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

Company	Amount	Date Processed	Transaction #
State Farm Mutual Automobile Insurance Company	\$50.00	08/07/2012	61465970

SERFF Tracking #:

SFCM-128619051

State Tracking #:

Company Tracking #:

MS-2.3

State:

Arkansas

Filing Company:

State Farm Mutual Automobile Insurance Company

TOI/Sub-TOI:

MS06 Medicare Supplement - Other/MS06.000 Medicare Supplement - Other

Product Name:

General Description of Benefits-Medicare Supplement

Project Name/Number:

General Description of Benefits-Medicare Supplement/MS-2.3

Correspondence Summary

Dispositions

Status	Created By	Created On	Date Submitted
Filed-Closed	Stephanie Fowler	08/10/2012	08/10/2012

SERFF Tracking #:

SFCM-128619051

State Tracking #:

Company Tracking #:

MS-2.3

State:

Arkansas

Filing Company:

State Farm Mutual Automobile Insurance Company

TOI/Sub-TOI:

MS06 Medicare Supplement - Other/MS06.000 Medicare Supplement - Other

Product Name:

General Description of Benefits-Medicare Supplement

Project Name/Number:

General Description of Benefits-Medicare Supplement/MS-2.3

Disposition

Disposition Date: 08/10/2012

Implementation Date:

Status: Filed-Closed

Comment:

Rate data does NOT apply to filing.

Schedule	Schedule Item	Schedule Item Status	Public Access
Form	General Description of Benefits-Medicare Supplement	Filed-Closed	Yes

State: Arkansas **Filing Company:** State Farm Mutual Automobile Insurance Company
TOI/Sub-TOI: MS06 Medicare Supplement - Other/MS06.000 Medicare Supplement - Other
Product Name: General Description of Benefits-Medicare Supplement
Project Name/Number: General Description of Benefits-Medicare Supplement/MS-2.3

Form Schedule

Lead Form Number: MS-2.3

Item No.	Schedule Item Status	Form Number	Form Type	Form Name	Action/ Action Specific Data	Readability Score	Attachments
1	Filed-Closed 08/10/2012	MS-2.3	ADV	General Description of Benefits-Medicare Supplement	Revised: Replaced Form #: MS-2.2 Previous Filing #: SFCM-127178302		MS 2.3 7-26-12.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



Insurance

Mutual Funds

State Farm Bank®

Search statefarm.com Search

Home > Insurance > Health > Medicare Supplement Insurance

- Auto
- Homeowners
- Condo Owners
- Renters
- Life
- Annuities
- Health
- Disability
- Long-Term Care
- Business
- Boat
- Other Insurance
- Login
- Register
- Find Agents
- Claims Center
- Service Center
- Learning Center
- About Us
- Contact

Medicare Supplement Insurance

The purpose of this communication is the solicitation of insurance. Contact will be made by an agent/insurance producer or insurance company.

State Farm sells Plans A, C, and F, and B in some states.

In all states except MN, WI, MA, NJ and RI.

Ready to get started?

[Find an Agent/Insurance Producer](#)

State Farm® Medicare Supplement insurance is designed to help cover the deductibles and coinsurance or copayment amounts not covered by Medicare. Once you have a Medicare Supplement Plan, both your plan and Medicare will help pay your covered medical expenses, lowering your out-of-pocket costs and giving you the confidence that your health insurance needs are met. And at State Farm we give you the flexibility to choose between different plans to meet your individual needs and budget.

A brief description of the Plans available in your state and the coverage provided by the Plans follows.

Plan A

- Part A coinsurance, plus coverage for 365 additional days after Medicare benefits end
- Part B coinsurance
- Hospice coinsurance
- First three pints of blood each year

Plan C

- Part A inpatient hospital deductible
- Part A coinsurance, plus coverage for 365 additional days after Medicare benefits end
- Skilled nursing facility coinsurance
- Part B deductible
- Part B coinsurance
- Hospice coinsurance
- First three pints of blood each year
- Emergency care in a foreign country- 80% of the cost of emergency care beginning during the first 60 days of each trip, after you pay a \$ 250 deductible, subject to a \$ 50,000 lifetime maximum , if such care would have been covered by Medicare if provided in the U.S.

Plan F

- Part A inpatient hospital deductible
- Part A coinsurance, plus coverage for 365 additional days after Medicare benefits end
- Skilled nursing facility coinsurance
- Part B deductible
- Part B coinsurance
- Hospice coinsurance
- Emergency care in a foreign country- 80% of the cost of emergency care beginning during the first 60 days of each trip, after you pay a \$ 250 deductible, subject to a \$ 50,000 lifetime maximum , if such care would have been covered by Medicare if provided in the U.S.
- Part B excess- 100% of the excess charge above Medicare's reasonable charge if medical provider does not accept Medicare assignment, subject to Federal/State mandated limit

Note: This is a Marketing tool intended for use in the sale of insurance. Completion of an application for a State Farm insurance policy will require contact with a State Farm agent/insurance producer.

In some states coverage is available if you are under age 65 and are Medicare eligible due to disability and/or kidney disease. These policies are not connected with or endorsed by the U.S.

Service Center

- [Get a quote](#)
- [Find an agent](#)
- [Manage my policies](#)
- [Benefits of Online Registration](#)
- [Power To Pay Your Way](#)
- [Report a claim](#)
- [Buy Insurance Online](#)

Make an Informed Choice

- [How to request a change to a Health Policy](#)
- [Individual Medical Coverage](#)
- [Medicare Part C \(Medicare Advantage\) Coverage](#)
- [Prescription Drug \(Part D\) Plans](#)
- [Medicare Supplement](#)
- [Supplemental Medical Insurance](#)
- [Health Savings Account](#)

Government or the Federal Medicare program. This information is only a general description of coverage. A complete statement of coverage is found only in the policy. Renewal premiums may increase periodically depending on your age. Policy coverage's, exclusions and limitations may vary in some states. For exact terms and conditions see: Medicare Supplement Insurance Policy series 97037H, 97038H, and 97039H. For additional details on coverage and cost, contact a [State Farm agent](#)/insurance producer.

MS 2.3

[Home](#) | [About Us](#) | [Contact Us](#) | [Licensing Information](#) | [Privacy Policy](#) | [Security](#) | [Site Map](#) | [Terms of Use](#)

© Copyright, State Farm Mutual Automobile Insurance Company, 2012.