

State: Arkansas **Filing Company:** Combined Insurance Company of America
TOI/Sub-TOI: MS05I Individual Medicare Supplement - Standard Plans/MS05I.004 Plan D
Product Name: Senior 2012 Medicare Supplement Rate Revision - Plan D
Project Name/Number: 2012 Medicare Supplement Rate Revision - Plan D/7085-AR-NT

Filing at a Glance

Company: Combined Insurance Company of America
Product Name: Senior 2012 Medicare Supplement Rate Revision - Plan D
State: Arkansas
TOI: MS05I Individual Medicare Supplement - Standard Plans
Sub-TOI: MS05I.004 Plan D
Filing Type: Rate
Date Submitted: 12/28/2012
SERFF Tr Num: ACEH-128829106
SERFF Status: Closed-Approved-Closed
State Tr Num:
State Status: Approved-Closed
Co Tr Num: 7085-AR-NT

Implementation: 02/15/2013
Date Requested:
Author(s): Sue Thill
Reviewer(s): Stephanie Fowler (primary)
Disposition Date: 01/14/2013
Disposition Status: Approved-Closed
Implementation Date:

State Filing Description:

State: Arkansas Filing Company: Combined Insurance Company of America
 TOI/Sub-TOI: MS05I Individual Medicare Supplement - Standard Plans/MS05I.004 Plan D
 Product Name: Senior 2012 Medicare Supplement Rate Revision - Plan D
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General Information

Project Name: 2012 Medicare Supplement Rate Revision - Plan D Status of Filing in Domicile: Authorized
 Project Number: 7085-AR-NT Date Approved in Domicile: 08/31/2012
 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: 01/14/2013
 State Status Changed: 01/14/2013
 Deemer Date: Created By: Sue Thill
 Submitted By: Sue Thill Corresponding Filing Tracking Number:

Filing Description:
 Combined Insurance Company of America
 FEIN Number 36-2136262
 NAIC Number 626-62146
 Individual Medicare Supplement Rate Filing
 Rate Sheet Numbers:
 7085-AR-NT for Standardized Plan D (Non-Tobacco)
 7085-AR-T for Standardized Plan D (Tobacco)
 INDIVIDUAL MEDICARE SUPPLEMENT

Attached is our 2012 Medicare Supplement Rate Revision for the above captured policy.

The filing fee, in the amount of \$50.00, was provided through EFT.

We are requesting the indicated increase on the following renew only form:

Increase Form Numbers	Description	Approval Date
0%	14977R06-AR-D Plan D	January 6, 2006
	14977-AR-D	December 28, 2004

The required actuarial material is enclosed.

Thank you for your review. If you need anything further, please feel free to contact me. If you have any questions or concerns regarding actuarial material, please contact Robert Turnholt, Senior Staff Actuary, at (847) 953-8154.

Company and Contact

Filing Contact Information

Sue Thill, Senior Policy Analyst sue.a.thill@combined.com
 1000 Milwaukee Ave 847-953-1536 [Phone]
 Glenview, IL 60025 847-953-1557 [FAX]

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Filing Company Information

Combined Insurance Company of America	CoCode: 62146	State of Domicile: Illinois
1000 North Milwaukee Ave.	Group Code: 626	Company Type: A&H
Glenview, IL 60025	Group Name: ACE USA	State ID Number:
(847) 953-2025 ext. [Phone]	FEIN Number: 36-2136262	

Filing Fees

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

Company	Amount	Date Processed	Transaction #
Combined Insurance Company of America	\$50.00	12/28/2012	66088069

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Correspondence Summary

Dispositions

Status	Created By	Created On	Date Submitted
Approved-Closed	Stephanie Fowler	01/14/2013	01/14/2013

SERFF Tracking #:

ACEH-128829106

State Tracking #:

Company Tracking #:

7085-AR-NT

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Disposition

Disposition Date: 01/14/2013

Implementation Date:

Status: Approved-Closed

Comment: We have approved this rate filing; no increase was requested nor approved.

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):
Combined Insurance Company of America	0.000%	0.000%	\$0	74	\$129,488	0.000%	0.000%

Schedule	Schedule Item	Schedule Item Status	Public Access
Supporting Document	Health - Actuarial Justification	Approved-Closed	No
Rate	RATE SHEETS	Approved-Closed	Yes

SERFF Tracking #:

ACEH-128829106

State Tracking #:

Company Tracking #:

7085-AR-NT

State:

Arkansas

Filing Company:

Combined Insurance Company of America

TOI/Sub-TOI:

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Rate Information

Rate data applies to filing.

Filing Method:

SERFF

Rate Change Type:

Neutral

Overall Percentage of Last Rate Revision:

0.000%

Effective Date of Last Rate Revision:

11/01/2010

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):
Combined Insurance Company of America	0.000%	0.000%	\$0	74	\$129,488	0.000%	0.000%

SERFF Tracking #:

ACEH-128829106

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

7085-AR-NT

State:

Arkansas

Filing Company:

Combined Insurance Company of America

TOI/Sub-TOI:

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Rate/Rule Schedule

Item No.	Schedule Item Status	Document Name	Affected Form Numbers (Separated with commas)	Rate Action	Rate Action Information		Attachments
					Previous State Filing Number:	CMBD-	
1	Approved-Closed 01/14/2013	RATE SHEETS	14977	Other	Previous State Filing Number:	CMBD-126709173	2012 Arkansas Rate Sheets Plan D.pdf
					Rate Action Other Explanation:	0% INCREASE	

**COMBINED INSURANCE COMPANY OF AMERICA
CHICAGO, ILLINOIS
NAIC COMPANY CODE #62146**

**MEDICARE SUPPLEMENT
FOR THE STATE OF ARKANSAS**

**2012 ANNUAL PREMIUM RATES
ISSUED BEFORE 6/1/2010
POLICY FORM 14977
PLAN D
Non-Tobacco Premium Rates**

Issue Age	Annual Premium
All Ages	\$1,500.00

Modal Factors:

Semi-Annual:	0.520
Quarterly:	0.265
PAC Monthly:	0.090

A 10% discount applies if the insured has another Combined Senior Health Policy.

**COMBINED INSURANCE COMPANY OF AMERICA
CHICAGO, ILLINOIS
NAIC COMPANY CODE #62146**

**MEDICARE SUPPLEMENT
FOR THE STATE OF ARKANSAS**

**2012 ANNUAL PREMIUM RATES
ISSUED BEFORE 6/1/2010
POLICY FORM 14977**

PLAN D

Tobacco Premium Rates

Issue Age	Annual Premium
All Ages	\$1,733.44

Modal Factors:

Semi-Annual:	0.520
Quarterly:	0.265
PAC Monthly:	0.090

A 10% discount applies if the insured has another Combined Senior Health Policy.