

**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:** Optional Amendment  
**Project Name/Number:** Amendment/23-2698 3/13

## Filing at a Glance

Company: Arkansas Blue Cross and Blue Shield  
Product Name: Optional Amendment  
State: Arkansas  
TOI: H16G Group Health - Major Medical  
Sub-TOI: H16G.001A Any Size Group - PPO  
Filing Type: Form  
Date Submitted: 01/25/2013  
SERFF Tr Num: ARBB-128867137  
SERFF Status: Closed-Approved-Closed  
State Tr Num:  
State Status: Approved-Closed  
Co Tr Num: 23-2698 3/13  
  
Implementation: 03/01/2013  
Date Requested:  
Author(s): Christi Kittler, Yvonne McNaughton, Frank Sewall, Rita Thatcher, Evelyn Laney  
Reviewer(s): Rosalind Minor (primary)  
Disposition Date: 01/25/2013  
Disposition Status: Approved-Closed  
Implementation Date:  
  
State Filing Description:

**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:** Optional Amendment  
**Project Name/Number:** Amendment/23-2698 3/13

## General Information

Project Name: Amendment	Status of Filing in Domicile: Pending
Project Number: 23-2698 3/13	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: 01/25/2013	Deemer Date:
State Status Changed: 01/25/2013	Submitted By: Evelyn Laney
Created By: Evelyn Laney	
Corresponding Filing Tracking Number:	
PPACA: Not PPACA-Related	
PPACA Notes: null	
Include Exchange Intentions:	No

### Filing Description:

Attached please find amendment 23-2698 3/13 for your review and approval if indicated.

This is an optional amendment and its purpose is to provide first dollar coverage for preventive medications, only. 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 rider 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.

## Company and Contact

### Filing Contact Information

Evelyn Laney, Senior Compliance Analyst [exlaney@arkbluecross.com](mailto: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	

## Filing Fees

**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:** Optional Amendment  
**Project Name/Number:** Amendment/23-2698 3/13

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	01/25/2013	66875199

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: Optional Amendment  
Project Name/Number: Amendment/23-2698 3/13

## Correspondence Summary

### Dispositions

Status	Created By	Created On	Date Submitted
Approved-Closed	Rosalind Minor	01/25/2013	01/25/2013

SERFF Tracking #:

ARBB-128867137

State Tracking #:

Company Tracking #:

23-2698 3/13

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:

Optional Amendment

Project Name/Number:

Amendment/23-2698 3/13

## Disposition

Disposition Date: 01/25/2013

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

**State:** Arkansas  
**TOI/Sub-TOI:** H16G Group Health - Major Medical/H16G.001A Any Size Group - PPO  
**Product Name:** Optional Amendment  
**Project Name/Number:** Amendment/23-2698 3/13

**Filing Company:** Arkansas Blue Cross and Blue Shield

## Form Schedule

Lead Form Number: 23-2698 3/13

Item No.	Schedule Item Status	Form Name	Form Number	Form Type	Form Action	Action Specific Data	Readability Score	Attachments
1	Approved-Closed 01/25/2013	Amendment	23-2698 3/13	CERA	Initial		40.100	23-2698 3-13 HSA Preventive RX.pdf

### Form Type Legend:

<b>ADV</b>	Advertising	<b>AEF</b>	Application/Enrollment Form
<b>CER</b>	Certificate	<b>CERA</b>	Certificate Amendment, Insert Page, Endorsement or Rider
<b>DDP</b>	Data/Declaration Pages	<b>FND</b>	Funding Agreement (Annuity, Individual and Group)
<b>MTX</b>	Matrix	<b>NOC</b>	Notice of Coverage
<b>OTH</b>	Other	<b>OUT</b>	Outline of Coverage
<b>PJK</b>	Policy Jacket	<b>POL</b>	Policy/Contract/Fraternal Certificate
<b>POLA</b>	Policy/Contract/Fraternal Certificate: Amendment, Insert Page, Endorsement or Rider	<b>SCH</b>	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. 2698  
HSA Preventive RX**

**BENEFITS AND SPECIFIC LIMITATIONS IN YOUR PLAN, "Medications"** Subsection 1.c. - Retail Pharmacy (Drug Store) is hereby amended to add the following new subsection.

**Preventive Medications.** Coverage is provided for Preventive Medications when prescribed by a Physician. Preventive Medications are not subject to any Deductible or Coinsurance requirements set out in the Schedule of Benefits.

**GLOSSARY OF TERMS** is hereby amended to add the following new Subsection. All remaining Subsections are hereby renumbered to correlate with the change.

**Preventive Medications** are those Prescription Medications prescribed to a Covered Person to prevent the occurrence of a disease or condition for those individuals with risk factors, or to prevent the recurrence of a disease or condition for those who have recovered, and do not include Prescription Medications used to treat an existing illness, injury or condition.

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  
601 S. Gaines Street  
Little Rock, Arkansas 72201

**SERFF Tracking #:**

ARBB-128867137

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

23-2698 3/13

**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:**

Optional Amendment

**Project Name/Number:**

Amendment/23-2698 3/13

## Supporting Document Schedules

		<b>Item Status:</b>	<b>Status Date:</b>
Satisfied - Item:	Flesch Certification	Approved-Closed	01/25/2013
Comments:	Please see attached.		
Attachment(s):	Flesch Certification Form 23-2698 3-13.pdf		

		<b>Item Status:</b>	<b>Status Date:</b>
Bypassed - Item:	Application	Approved-Closed	01/25/2013
Bypass Reason:	Not required.		

		<b>Item Status:</b>	<b>Status Date:</b>
Bypassed - Item:	PPACA Uniform Compliance Summary	Approved-Closed	01/25/2013
Bypass Reason:	Not PPACA related.		



**Arkansas  
BlueCross BlueShield**

An Independent Licensee of the Blue Cross and Blue Shield Association

**RE: Arkansas Blue Cross and Blue Shield  
Amendment No. 23-2698 3/13**

**FLESCH READING EASE  
CERTIFICATION**

This is to certify that the above referenced document has achieved a Flesch Reading Ease Score average of 40.1 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

\_\_\_\_\_  
January 25, 2013

Date