

State: Arkansas **Filing Company:** Philadelphia American Life Insurance Company
TOI/Sub-TOI: MS08I Individual Medicare Supplement - Standard Plans 2010/MS08I.001 Plan A 2010
Product Name: Medicare Supplement Standard Modernized Plans
Project Name/Number: /

Filing at a Glance

Company: Philadelphia American Life Insurance Company
Product Name: Medicare Supplement Standard Modernized Plans
State: Arkansas
TOI: MS08I Individual Medicare Supplement - Standard Plans 2010
Sub-TOI: MS08I.001 Plan A 2010
Filing Type: Rate
Date Submitted: 11/20/2012
SERFF Tr Num: NELI-128779231
SERFF Status: Closed-Disapproved
State Tr Num:
State Status: Disapproved-Closed
Co Tr Num: PALIC MEDSUP MOD

Implementation: 03/01/2013
Date Requested:
Author(s): Langston Johnson
Reviewer(s): Stephanie Fowler (primary)
Disposition Date: 01/03/2013
Disposition Status: Disapproved
Implementation Date:

State Filing Description:

State: Arkansas **Filing Company:** Philadelphia American Life Insurance Company
TOI/Sub-TOI: MS08I Individual Medicare Supplement - Standard Plans 2010/MS08I.001 Plan A 2010
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General Information

Project Name: Status of Filing in Domicile: Not Filed
 Project Number: Date Approved in Domicile:
 Requested Filing Mode: Domicile Status Comments:
 Explanation for Combination/Other: Market Type: Individual
 Submission Type: New Submission Individual Market Type:
 Overall Rate Impact: 5% Filing Status Changed: 01/03/2013
 State Status Changed: 01/03/2013
 Deemer Date: Created By: Langston Johnson
 Submitted By: Langston Johnson Corresponding Filing Tracking Number:

Filing Description:

The purpose of this filing is to request a rate revision on the company's 2010 Modernized Medicare Supplement effective March 1, 2013. The rate revision request is based upon the information given in the actuarial memorandum.

Company and Contact

Filing Contact Information

Langston Johnson, ljohnson@newerallife.com
 P.O. Box 4884 281-368-7170 [Phone]
 Houston, TX 77210

Filing Company Information

Philadelphia American Life Insurance Company CoCode: 67784 State of Domicile: Texas
 200 Westlake Park #1200 Group Code: 520 Company Type:
 Houston, TX 77079 Group Name: State ID Number:
 (281) 368-7200 ext. [Phone] FEIN Number: 74-1952955

Filing Fees

Fee Required? Yes
 Fee Amount: \$500.00
 Retaliatory? No
 Fee Explanation: \$50.00 per form for forms A,C,C,F,G,N, totaling \$500.00.
 Per Company: No

Company	Amount	Date Processed	Transaction #
Philadelphia American Life Insurance Company	\$500.00	11/20/2012	65091884

SERFF Tracking #:

NELI-128779231

State Tracking #:

Company Tracking #:

PALIC MEDSUP MOD

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Philadelphia American Life Insurance Company

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Correspondence Summary

Dispositions

Status	Created By	Created On	Date Submitted
Disapproved	Stephanie Fowler	01/03/2013	01/03/2013

Objection Letters and Response Letters

Objection Letters

Status	Created By	Created On	Date Submitted
Pending Industry Response	Stephanie Fowler	12/20/2012	12/20/2012

Response Letters

Responded By	Created On	Date Submitted
Langston Johnson	12/20/2012	12/20/2012

SERFF Tracking #:

NELI-128779231

State Tracking #:

Company Tracking #:

PALIC MEDSUP MOD

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Disposition

Disposition Date: 01/03/2013

Implementation Date:

Status: Disapproved

Comment: Given the lack of credibility on these Plans, we cannot approve this rate increase at this time.

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):
Philadelphia American Life Insurance Company	5.000%	5.000%	\$6,519	145	\$130,382	5.000%	5.000%

Schedule	Schedule Item	Schedule Item Status	Public Access
Supporting Document	Health - Actuarial Justification	Disapproved	No
Rate	2013 Rates	Disapproved	No

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Objection Letter

Objection Letter Status	Pending Industry Response
Objection Letter Date	12/20/2012
Submitted Date	12/20/2012
Respond By Date	01/21/2013

Dear Langston Johnson,

Introduction:

This will acknowledge receipt of the captioned filing.

Please attach the past, future and lifetime experience for Arkansas; with and without this increase. Also, please attached the rate increase history for these plans.

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,

Stephanie Fowler

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Response Letter

Response Letter Status	Submitted to State
Response Letter Date	12/20/2012
Submitted Date	12/20/2012

Dear Stephanie Fowler,

Introduction:

Thank you for your attention.

Response 1

Comments:

Seeing as we began marketing this product in 2011 and only have 174 inforce policies, we have no credible experience to provide or base a projection on. There have been no previous increases on these policy forms.

Changed Items:

No Supporting Documents changed.

No Form Schedule items changed.

No Rate/Rule Schedule items changed.

Conclusion:

Please feel free to contact us for any further inquiries or issues.

Sincerely,

Langston Johnson

SERFF Tracking #:

NELI-128779231

State Tracking #:

Company Tracking #:

PALIC MEDSUP MOD

State: Arkansas

Filing Company:

Philadelphia American Life Insurance Company

TOI/Sub-TOI: MS08I Individual Medicare Supplement - Standard Plans 2010/MS08I.001 Plan A 2010

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Rate Information

Rate data applies to filing.

Filing Method:

Rate Change Type: Increase

Overall Percentage of Last Rate Revision: 0.000%

Effective Date of Last Rate Revision:

Filing Method of Last Filing:

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):
Philadelphia American Life Insurance Company	5.000%	5.000%	\$6,519	145	\$130,382	5.000%	5.000%

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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
1	Disapproved 01/03/2013	2013 Rates	MS.A.PAL.AR; MS.C.PAL.AR; MS.D.PAL.AR; MS.F.PAL.AR; MS.G.PAL.AR; MS.N.PAL.AR	Revised	Previous State Filing Number:	N/A	AR PALIC Rate Schedule 3.1.2013.pdf
					Percent Rate Change Request:	5.000	

PHILADELPHIA AMERICAN LIFE INSURANCE COMPANY
 Medicare Supplement Premium
Arkansas
 March 1, 2013

		Age 65 and above	
		Area 1	Area 2
Plan A	NTU	102.06	113.40
	TU	113.40	126.00
Plan C	NTU	137.36	152.62
	TU	152.62	169.58
Plan D	NTU	127.58	141.75
	TU	141.75	157.50
Plan F	NTU	138.97	154.41
	TU	154.41	171.57
Plan F (High deductible)	NTU	32.40	36.00
	TU	36.00	40.00
Plan G	NTU	119.07	132.30
	TU	132.30	147.00
Plan N	NTU	102.06	113.40
	TU	113.40	126.00

Area 1 all zip codes except: 720-723, 755

Area 2 zip codes: 720-723, 755

Modal Factors: Monthly Bank Draft = 1.0,
 Bi-Monthly = 2.0, Quarterly = 3.0

NTU: Non-Tobacco User
TU: Tobacco User