

State: Arkansas **Filing Company:** United Teacher Associates Insurance Company
TOI/Sub-TOI: MS04I Individual Medicare Supplement - Medicare Select/MS04I.001 Plan A
Product Name: UTA Med Supp Closed Select
Project Name/Number: UTA Med Supp Closed Select Rate 2012/UTA Med Supp Closed Select Rate 2012

Filing at a Glance

Company: United Teacher Associates Insurance Company
Product Name: UTA Med Supp Closed Select
State: Arkansas
TOI: MS04I Individual Medicare Supplement - Medicare Select
Sub-TOI: MS04I.001 Plan A
Filing Type: Rate
Date Submitted: 12/10/2012
SERFF Tr Num: UTAC-128802631
SERFF Status: Closed-Approved-Closed
State Tr Num:
State Status: Approved-Closed
Co Tr Num: AR UTA CLOSED SELECT RATE 2012

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

State Filing Description:

State: Arkansas **Filing Company:** United Teacher Associates Insurance Company
TOI/Sub-TOI: MS04I Individual Medicare Supplement - Medicare Select/MS04I.001 Plan A
Product Name: UTA Med Supp Closed Select
Project Name/Number: UTA Med Supp Closed Select Rate 2012/UTA Med Supp Closed Select Rate 2012

General Information

Project Name: UTA Med Supp Closed Select Rate 2012 Status of Filing in Domicile: Pending
 Project Number: UTA Med Supp Closed Select Rate 2012 Date Approved in Domicile:
 Requested Filing Mode: Review & Approval Domicile Status Comments: Domicile state is TX.
 Explanation for Combination/Other: Market Type: Individual
 Submission Type: New Submission Individual Market Type:
 Overall Rate Impact: 2% Filing Status Changed: 01/14/2013
 State Status Changed: 01/14/2013
 Deemer Date: Created By: Jake Stevens
 Submitted By: Jake Stevens Corresponding Filing Tracking Number:

Filing Description:

Subject: UTA Closed Standard Select Medicare Supplement Rate Filing for 2012
 Company NAIC Number: 63479
 Form Number: MSLT020501, MSLT020801

Dear Sir/Madam:

Enclosed for your review and approval, please find copies of an Actuarial Memorandum and rate sheets in support of a proposed rate increase on the above referenced product. The rate increase will be effective upon the state insurance department approval and in accordance with state policyholder notification requirements.

This filing applies to all in-force policies in this state with the above referenced form number. Enclosed are any necessary certifications, transmittals and/or filing fees as may be required by your state.

If you have any questions or comments regarding this filing, please feel free to contact me at (800) 880-8824 extension 4846 or at jstevens@gafri.com. Our fax number is 512-451-1399.

Sincerely,
 Naz Melyas
 Insurance Analyst II

Company and Contact

Filing Contact Information

Jakob Stevens, Intern jstevens@gafri.com
 11200 Lakeline Blvd. 512-531-4846 [Phone]
 Austin, TX 78717

Filing Company Information

United Teacher Associates	CoCode: 63479	State of Domicile: Texas
Insurance Company	Group Code: 84	Company Type: Insurance
11200 Lakeline Blvd., Suite 100	Group Name:	Company
P.O. Box 26580	FEIN Number: 58-0869673	State ID Number:
Austin, TX 78755-0580		
(800) 880-8824 ext. [Phone]		

State: Arkansas **Filing Company:** United Teacher Associates Insurance Company
TOI/Sub-TOI: MS04I Individual Medicare Supplement - Medicare Select/MS04I.001 Plan A
Product Name: UTA Med Supp Closed Select
Project Name/Number: UTA Med Supp Closed Select Rate 2012/UTA Med Supp Closed Select Rate 2012

Filing Fees

Fee Required? Yes
Fee Amount: \$50.00
Retaliatory? Yes
Fee Explanation:
Per Company: No

Company	Amount	Date Processed	Transaction #
United Teacher Associates Insurance Company	\$50.00	12/10/2012	65587645

SERFF Tracking #:

UTAC-128802631

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

AR UTA CLOSED SELECT RATE 2012

State:

Arkansas

Filing Company:

United Teacher Associates Insurance Company

TOI/Sub-TOI:

MS04I Individual Medicare Supplement - Medicare Select/MS04I.001 Plan A

Product Name:

UTA Med Supp Closed Select

Project Name/Number:

UTA Med Supp Closed Select Rate 2012/UTA Med Supp Closed Select Rate 2012

Correspondence Summary

Dispositions

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

Amendments

Schedule	Schedule Item Name	Created By	Created On	Date Submitted
Rate	Exhibit 4 - Current & Proposed Rates	Jake Stevens	01/11/2013	01/11/2013

Filing Notes

Subject	Note Type	Created By	Created On	Date Submitted
Reopen for Annual Rate Certification	Note To Reviewer	Jake Stevens	01/11/2013	01/11/2013

State: Arkansas **Filing Company:** United Teacher Associates Insurance Company
TOI/Sub-TOI: MS04I Individual Medicare Supplement - Medicare Select/MS04I.001 Plan A
Product Name: UTA Med Supp Closed Select
Project Name/Number: UTA Med Supp Closed Select Rate 2012/UTA Med Supp Closed Select Rate 2012

Disposition

Disposition Date: 01/14/2013

Implementation Date:

Status: Approved-Closed

Comment: This filing is approved as the company's "annual rate filing". No increase is 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):
United Teacher Associates Insurance Company	2.000%	2.000%	\$79	2	\$3,945	2.000%	2.000%

Schedule	Schedule Item	Schedule Item Status	Public Access
Supporting Document	Health - Actuarial Justification	Approved-Closed	No
Rate (revised)	Exhibit 4 - Current & Proposed Rates	Approved-Closed	Yes
Rate	Exhibit 4 - Current & Proposed Rates	Disapproved	No

State: Arkansas **Filing Company:** United Teacher Associates Insurance Company
TOI/Sub-TOI: MS04I Individual Medicare Supplement - Medicare Select/MS04I.001 Plan A
Product Name: UTA Med Supp Closed Select
Project Name/Number: UTA Med Supp Closed Select Rate 2012/UTA Med Supp Closed Select Rate 2012

Amendment Letter

Submitted Date: 01/11/2013

Comments:

I have attached a revised current & proposed rate chart reflecting our request for a 0% rate increase.

Please do not hesitate to contact me at jacob.stevens@cigna.com if you have any questions or concerns.

Thank you for your time.

Changed Items:

No Form Schedule Items Changed.

Rate/Rule Schedule Item Changes						
Item No.	Document Name	Affected Form Numbers	Rate Action	Rate Action Information	Attachments	Date Submitted
1	Exhibit 4 - Current & Proposed Rates	MSLT020501, MSLT020801	Revised	Previous State Filing Number: 50027 Percent Rate Change Request:	Exhibit 4 - Current & Proposed Rates @ 0%.pdf,	01/11/2013 By:
<i>Previous Version</i>						
1	<i>Exhibit 4 - Current & Proposed Rates</i>	<i>MSLT020501, MSLT020801</i>	<i>Revised</i>	<i>Previous State Filing Number: 50027 Percent Rate Change Request: 2</i>	<i>Exhibit 4 - Current & Proposed Rates.pdf,</i>	<i>12/10/2012 By: Jake Stevens</i>

No Supporting Documents Changed.

State: Arkansas **Filing Company:** United Teacher Associates Insurance Company
TOI/Sub-TOI: MS04I Individual Medicare Supplement - Medicare Select/MS04I.001 Plan A
Product Name: UTA Med Supp Closed Select
Project Name/Number: UTA Med Supp Closed Select Rate 2012/UTA Med Supp Closed Select Rate 2012

Note To Reviewer

Created By:

Jake Stevens on 01/11/2013 02:26 PM

Last Edited By:

Jake Stevens

Submitted On:

01/11/2013 02:26 PM

Subject:

Reopen for Annual Rate Certification

Comments:

Thank you for your correspondence on this filing. May you please reopen the filing so that I can submit proposed rates reflecting a 0% increase in order to satisfy the annual rate certification requirement?

Please feel free to contact me by email at jacob.stevens@cigna.com if you have any questions or concerns.

State: Arkansas **Filing Company:** United Teacher Associates Insurance Company
TOI/Sub-TOI: MS04I Individual Medicare Supplement - Medicare Select/MS04I.001 Plan A
Product Name: UTA Med Supp Closed Select
Project Name/Number: UTA Med Supp Closed Select Rate 2012/UTA Med Supp Closed Select Rate 2012

Rate Information

Rate data applies to filing.

Filing Method: SERFF
Rate Change Type: Increase
Overall Percentage of Last Rate Revision: 0.000%
Effective Date of Last Rate Revision: 02/01/2012
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 Teacher Associates Insurance Company	2.000%	2.000%	\$79	2	\$3,945	2.000%	2.000%

State: Arkansas **Filing Company:** United Teacher Associates Insurance Company
TOI/Sub-TOI: MS04I Individual Medicare Supplement - Medicare Select/MS04I.001 Plan A
Product Name: UTA Med Supp Closed Select
Project Name/Number: UTA Med Supp Closed Select Rate 2012/UTA Med Supp Closed Select Rate 2012

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:	50027	
1	Approved-Closed 01/14/2013	Exhibit 4 - Current & Proposed Rates	MSLT020501, MSLT020801	Revised	Percent Rate Change Request:		Exhibit 4 - Current & Proposed Rates @ 0%.pdf

United Teacher Associates Insurance Company

Plan F Select - Rates Effective 2/1/2012									
Area	Age	NON-SMOKER				SMOKER			
		Monthly Bank Draft	Quarterly	Semi-annual	Annual	Monthly Bank Draft	Quarterly	Semi-annual	Annual
1	All	160.53	509.43	1,009.25	1,922.37	198.48	629.86	1,247.84	2,376.84
2	All	168.65	535.22	1,060.35	2,019.71	208.51	661.75	1,311.02	2,497.18
3	All	187.94	596.48	1,181.72	2,250.89	232.37	737.50	1,461.08	2,783.00

United Teacher Associates Insurance Company

Plan F Select - Proposed Rates									
Area	Age	NON-SMOKER				SMOKER			
		Monthly Bank Draft	Quarterly	Semi-annual	Annual	Monthly Bank Draft	Quarterly	Semi-annual	Annual
1	All	160.53	509.43	1,009.25	1,922.37	198.48	629.86	1,247.84	2,376.84
2	All	168.65	535.22	1,060.35	2,019.71	208.51	661.75	1,311.02	2,497.18
3	All	187.94	596.48	1,181.72	2,250.89	232.37	737.50	1,461.08	2,783.00

United Teacher Associates Insurance Company

Plan G Select - Rates Effective 2/1/2012									
Area	Age	NON-SMOKER				SMOKER			
		Monthly Bank Draft	Quarterly	Semi-annual	Annual	Monthly Bank Draft	Quarterly	Semi-annual	Annual
1	All	136.79	434.12	860.05	1,638.19	171.11	543.04	1,075.83	2,049.20
2	All	143.71	456.10	903.59	1,721.13	179.77	570.53	1,130.30	2,152.96
3	All	160.16	508.31	1,007.02	1,918.14	200.35	635.84	1,259.68	2,399.39

United Teacher Associates Insurance Company

Plan G Select - Proposed Rates									
Area	Age	NON-SMOKER				SMOKER			
		Monthly Bank Draft	Quarterly	Semi-annual	Annual	Monthly Bank Draft	Quarterly	Semi-annual	Annual
1	All	136.79	434.12	860.05	1,638.19	171.11	543.04	1,075.83	2,049.20
2	All	143.71	456.10	903.59	1,721.13	179.77	570.53	1,130.30	2,152.96
3	All	160.16	508.31	1,007.02	1,918.14	200.35	635.84	1,259.68	2,399.39