

SERFF Tracking Number: AMLC-126269206 State: Arkansas  
 Filing Company: Liberty National Life Insurance Company State Tracking Number: 43265  
 Company Tracking Number: LPREWV  
 TOI: MS051 Individual Medicare Supplement - Sub-TOI: MS051.001 Plan A  
 Standard Plans  
 Product Name: Rider LPREWV  
 Project Name/Number: LPREWV:PREWV

## Filing at a Glance

Company: Liberty National Life Insurance Company

Product Name: Rider LPREWV SERFF Tr Num: AMLC-126269206 State: Arkansas  
 TOI: MS051 Individual Medicare Supplement - SERFF Status: Closed-Approved- State Tr Num: 43265  
 Standard Plans Closed  
 Sub-TOI: MS051.001 Plan A Co Tr Num: LPREWV State Status: Approved-Closed  
 Filing Type: Form Reviewer(s): Stephanie Fowler  
 Author: Phylis Ballard Disposition Date: 09/18/2009  
 Date Submitted: 08/18/2009 Disposition Status: Approved-Closed  
 Implementation Date Requested: On Approval Implementation Date:

State Filing Description:

## General Information

Project Name: LPREWV Status of Filing in Domicile: Pending  
 Project Number: :PREWV Date Approved in Domicile:  
 Requested Filing Mode: Informational Domicile Status Comments: Filed in Nebraska  
 Explanation for Combination/Other: Market Type: Individual  
 Submission Type: New Submission Group Market Size:  
 Overall Rate Impact: Group Market Type:  
 Filing Status Changed: 09/18/2009 Explanation for Other Group Market Type:  
 State Status Changed: 09/18/2009  
 Deemer Date: Created By: Phylis Ballard  
 Submitted By: Phylis Ballard Corresponding Filing Tracking Number:  
 LPREWV

Filing Description:  
 NAIC #290-65331  
 RE: Rider Form LPREWV

We are submitting as an informational filing a copy of the subject rider form. This form is being filed for general use with our individual Medicare Supplement portfolio. It will apply to new Medicare enrollees between 64½ and 65½ years of age, or who may otherwise qualify for open enrollment.

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Rider Form LPREWV deletes the Pre-Existing Conditions Limitations Provision from the policy to which it is attached.

The forms do not contain any unusual or unorthodox provisions and wording. The readability score for the above form is 51.

Your early review of this informational filing would be greatly appreciated. If you have any questions, please feel free to contact me collect at (972) 569-3748, or by e-mail at pballard@torchmarkcorp.com .

Sincerely,

Phylis Ballard  
Regulatory Compliance

/pb

## Company and Contact

### Filing Contact Information

Phylis Ballard, Compliance Analyst pballard@torchmarkcorp.com  
3700 S. Stonebridge Drive 972-569-3748 [Phone]  
McKinney, TX 75070 972-569-3728 [FAX]

### Filing Company Information

Liberty National Life Insurance Company CoCode: 65331 State of Domicile: Nebraska  
2001 Third Avenue South Group Code: 290 Company Type: Life and Health  
Birmingham, AL 35233 Group Name: Liberty National Life State ID Number:  
(800) 288-2722 ext. 2912[Phone] FEIN Number: 63-0124600

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## Filing Fees

Fee Required? Yes  
Fee Amount: \$20.00  
Retaliatory? No  
Fee Explanation: 1 rider  
Per Company: No

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COMPANY	AMOUNT	DATE PROCESSED	TRANSACTION #
Liberty National Life Insurance Company	\$20.00	08/18/2009	29914987

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## Correspondence Summary

### Dispositions

Status	Created By	Created On	Date Submitted
Approved-Closed	Stephanie Fowler	09/18/2009	09/18/2009



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Schedule	Schedule Item	Schedule Item Status	Public Access
Supporting Document	Flesch Certification		No
Supporting Document	Application		No
Supporting Document	Health - Actuarial Justification		No
Supporting Document	Outline of Coverage		No
Form	LPREWV	Approved	Yes

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## Form Schedule

Lead Form Number: LPREWV

Schedule Item	Form Number	Form Type	Form Name	Action	Action Specific Data	Readability	Attachment
Approved 09/18/2009	LPREWV	Policy/Cont ract/Fratern al Certificate: Amendmen t, Insert Page, Endorseme nt or Rider	LPREWV	Initial		51.000	LPREWV.pdf

# LIBERTY NATIONAL LIFE INSURANCE COMPANY

P.O. BOX 8080, MCKINNEY, TEXAS 75070 (972) 529-5085

A LEGAL RESERVE STOCK COMPANY \* ADMINISTRATIVE OFFICES: MCKINNEY, TX

This rider amends and is made a part of the policy or certificate to which it is attached. It is subject to all provisions, conditions, exclusions and limitations of the policy or certificate which are not in conflict with those of this rider.

The "Pre-Existing Conditions Limitations Provision" does not apply to your policy or certificate.

*Don M. [Signature]*  
**SPECIMEN**

Secretary

*[Signature]*  
**SPECIMEN**

President

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## Supporting Document Schedules

	Item Status:	Status Date:
<b>Satisfied - Item:</b> Flesch Certification <b>Comments:</b> <b>Attachment:</b> Readability Cert.pdf		

	Item Status:	Status Date:
<b>Satisfied - Item:</b> Application <b>Comments:</b> NA		

	Item Status:	Status Date:
<b>Satisfied - Item:</b> Outline of Coverage <b>Comments:</b> NA		

CERTIFICATION

This is to certify that the attached Policy Form see below

has achieved Flesch Reading Ease Score of     \*     and complies with the requirements of Arkansas Stat. Ann. SS66-3251 through 66-3258, cited as the Life and Disability Insurance Policy Language Simplification Act.



Michael J. Gaisbauer, Vice President

SUPPLEMENTAL FORMS  
Rider LPREWV

SCORE  
51