

SERFF Tracking Number: ICCL-126859376 State: Arkansas
Filing Company: Madison National Life Insurance Company, Inc. State Tracking Number: 47143
Company Tracking Number: MNL VIS DEPAE 0910
TOI: H20G Group Health - Vision Sub-TOI: H20G.000 Health - Vision
Product Name: MNL VIS DEPAE 0910
Project Name/Number: MNL VIS DEPAE 0910/MNL VIS DEPAE 0910

Filing at a Glance

Company: Madison National Life Insurance Company, Inc.

Product Name: MNL VIS DEPAE 0910

SERFF Tr Num: ICCL-126859376 State: Arkansas

TOI: H20G Group Health - Vision

SERFF Status: Closed-Approved-
Closed State Tr Num: 47143

Sub-TOI: H20G.000 Health - Vision

Co Tr Num: MNL VIS DEPAE 0910 State Status: Approved-Closed

Filing Type: Form

Reviewer(s): Rosalind Minor

Author: Brenda Dawson

Disposition Date: 11/14/2010

Date Submitted: 10/26/2010

Disposition Status: Approved-
Closed

Implementation Date Requested: On Approval

Implementation Date:

State Filing Description:

General Information

Project Name: MNL VIS DEPAE 0910

Status of Filing in Domicile:

Project Number: MNL VIS DEPAE 0910

Date Approved in Domicile:

Requested Filing Mode:

Domicile Status Comments:

Explanation for Combination/Other:

Market Type: Group

Submission Type: New Submission

Group Market Size: Small

Overall Rate Impact:

Group Market Type: Employer, Association

Filing Status Changed: 11/14/2010

Explanation for Other Group Market Type:

State Status Changed: 11/14/2010

Deemer Date:

Created By: Brenda Dawson

Submitted By: Brenda Dawson

Corresponding Filing Tracking Number: ICCL-
125476631, ICCL-125476649

Filing Description:

Enclosed for review and approval for use in your state is the form attached to the Form Schedule tab. This form is new and is not intended to replace any form previously approved by your Department.

Insurance Compliance Consultants, Inc., is making this filing on behalf of Madison National Life Insurance Company. A filing authorization letter is attached. All correspondence should be addressed to Insurance Compliance Consultants, Inc., at the address shown above.

This Amendatory Endorsement is intended to be attached to Group Vision Policy form MNL AGVIS POL 1107 previously

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approved by your Department on February 8, 2008 under SERFF Tracking # ICCI-125476631, and Group Vision Policy form MNL GVIS POL 1107 previously approved by your Department on February 8, 2008 under SERFF Tracking # ICCI-125476649.

This Endorsement revises the definition of Dependent by providing coverage for a Child who is less than 26 years of age.

The document was prepared on a personal computer and will ultimately be printed from another data processing system that may cause some print style and/or page spacing changes. However, there will not be any changes to the actual text of the contract other than listed or bracketed variables, or to the general print size.

We certify that to the best of our knowledge and belief, these forms do not violate any laws or regulations of your state and do not contain any previously disapproved provisions.

Company and Contact

Filing Contact Information

Brenda Dawson, Authorized Representative Brendadawson@inscompliance.com
 3925 East State Street, Suite 200 815-316-6714 [Phone]
 Rockford, IL 61108 815-986-2355 [FAX]

Filing Company Information

(This filing was made by a third party - insurancecomplianceconsultantsinc)

Madison National Life Insurance Company, Inc. CoCode: 65781	State of Domicile: Wisconsin
P. O. Box 5008	Group Code: Company Type:
Madison, WI 53705	Group Name: State ID Number:
(800) 356-9601 ext. [Phone]	FEIN Number: 39-0990296

Filing Fees

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

COMPANY	AMOUNT	DATE PROCESSED	TRANSACTION #
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Madison National Life Insurance Company, Inc. \$50.00 10/26/2010 41185900

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Correspondence Summary

Dispositions

Status	Created By	Created On	Date Submitted
Approved-Closed	Rosalind Minor	11/14/2010	11/14/2010

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Form Schedule

Lead Form Number: MNL VIS DEPAE 0910

Schedule Item	Form Number	Form Type	Form Name	Action	Action Specific Data	Readability	Attachment
Approved-Closed 11/14/2010	MNL VIS DEPAE 0910	Certificate Amendmen t, Insert Page, Endorseme nt or Rider	Amendatory Endorsement	Initial		54.136	MNL VIS DEPAE 0910 10-21-10.pdf

MADISON NATIONAL LIFE INSURANCE COMPANY, INC
[P.O. Box 5008, Madison, WI 53705]

AMENDATORY ENDORSEMENT

Notwithstanding anything in the Policy and Certificate of Insurance to the contrary, it is hereby understood and agreed that the Policy and any Certificate of Insurance issued in connection therewith is amended as follows:

SECTION 2 – DEFINITIONS, item 2 under the definition of “**Dependent**” is deleted and replaced with the following:

2. Child who is less than 26 years of age.

This Amendatory Endorsement is endorsed and made part of the Policy/Certificate as of [January 1, 2011 or its Effective Date, whichever is later].

Nothing in this Amendatory Endorsement shall be held to vary, alter, waive or extend any of the terms, conditions, agreements, provisions or limitations of the Policy, other than as stated above.

IN WITNESS WHEREOF, the Insurance Company has caused this Amendatory Endorsement to be signed by its President and Secretary.

MADISON NATIONAL LIFE INSURANCE COMPANY, INC.



Larry R. Graber
President



Adam C. Vandervoort
Secretary

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Supporting Document Schedules

	Item Status:	Status Date:
Satisfied - Item: Flesch Certification	Approved-Closed	11/14/2010
Comments:		
Attachment:		
Cert of Comp. with Rule 19 MNL VIS DEPAE.pdf		

	Item Status:	Status Date:
Bypassed - Item: Application	Approved-Closed	11/14/2010
Bypass Reason: NA		
Comments:		

	Item Status:	Status Date:
Satisfied - Item: MNL Authorization Letter	Approved-Closed	11/14/2010
Comments:		
Attachment:		
ICC Authorization letter Madison Nat 2010.pdf		

**Certificate of Compliance with
Arkansas Rule and Regulation 19**

Insurer: Madison National Life Insurance Company, Inc.

Form Number(s): MNL VIS DEPAE 0910

I hereby certify that the filing above meets all applicable Arkansas requirements including the requirement of Rule and Regulation 19.



Signature of Company Officer

Larry R. Graber

Name

President

Title

October 26, 2010

Date



Madison National Life

January 1, 2010

Mr. Brian Camling
President
Insurance Compliance Consultants, Inc.
3925 East State Street, Suite 200
Rockford, IL 61108

Dear Mr. Camling:

Please accept this letter as written confirmation that Insurance Compliance Consultants, Inc., has authority to file the attached form(s) or a state specific variation of it, and to act on behalf of Madison National Life Insurance Company, Inc. regarding such filings, in all jurisdictions where this form(s) or a state specific variation of it is being filed. Madison National may withdraw this authorization at any time, by giving notice to Insurance Compliance Consultants.

Sincerely,

A handwritten signature in cursive script, reading "Larry R. Graber". The signature is written in black ink and is positioned above the printed name.

Larry Graber