

SERFF Tracking Number: ICCI-126877058 State: Arkansas  
Filing Company: Independence American Insurance Company State Tracking Number: 47140  
Company Tracking Number: IAIC DEN DEPAE 0910  
TOI: H10G Group Health - Dental Sub-TOI: H10G.000 Health - Dental  
Product Name: IAIC DEN DEPAE 0910  
Project Name/Number: IAIC DEN DEPAE 0910/IAIC DEN DEPAE 0910

## Filing at a Glance

Company: Independence American Insurance Company

Product Name: IAIC DEN DEPAE 0910 SERFF Tr Num: ICCI-126877058 State: Arkansas  
TOI: H10G Group Health - Dental SERFF Status: Closed-Approved- State Tr Num: 47140  
Closed

Sub-TOI: H10G.000 Health - Dental Co Tr Num: IAIC DEN 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: IAIC DEN DEPAE 0910  
Project Number: IAIC DEN DEPAE 0910  
Requested Filing Mode:  
Explanation for Combination/Other:  
Submission Type: New Submission  
Overall Rate Impact:  
Filing Status Changed: 11/14/2010

Status of Filing in Domicile:  
Date Approved in Domicile:  
Domicile Status Comments:  
Market Type: Group  
Group Market Size: Small  
Group Market Type: Association  
Explanation for Other Group Market Type:  
State Status Changed: 11/14/2010  
Created By: Brenda Dawson  
Corresponding Filing Tracking Number:

Deemer Date:

Submitted By: Brenda Dawson

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 Independence American 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 Dental Policy form IAIC ADEN POL 0206 previously approved by your Department on April 14, 2006.

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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 Brendaadawson@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)

Independence American Insurance Company CoCode: 26581 State of Domicile: Delaware  
 485 Madison Avenue Group Code: Company Type:  
 New York, NY 10022 Group Name: State ID Number:  
 (212) 355-4141 ext. [Phone] FEIN Number: 74-1746542

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## Filing Fees

Fee Required? Yes  
 Fee Amount: \$50.00  
 Retaliatory? No  
 Fee Explanation: Please use filing fee from SERFF Tracking # ICCI-126859190  
 Per Company: No

COMPANY	AMOUNT	DATE PROCESSED	TRANSACTION #
Independence American Insurance Company	\$0.00	10/26/2010	

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## Correspondence Summary

### Dispositions

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

*SERFF Tracking Number:*      *ICCI-126877058*                      *State:*                      *Arkansas*  
*Filing Company:*              *Independence American Insurance Company*      *State Tracking Number:*      *47140*  
*Company Tracking Number:*      *IAIC DEN DEPAE 0910*  
*TOI:*                      *H10G Group Health - Dental*                      *Sub-TOI:*                      *H10G.000 Health - Dental*  
*Product Name:*              *IAIC DEN DEPAE 0910*  
*Project Name/Number:*              *IAIC DEN DEPAE 0910/IAIC DEN DEPAE 0910*

## **Disposition**

Disposition Date: 11/14/2010

Implementation Date:

Status: Approved-Closed

Comment:

Rate data does NOT apply to filing.



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## Form Schedule

**Lead Form Number: IAIC DEN DEPAE 0910**

Schedule Item	Form Number	Form Type	Form Name	Action	Action Specific Data	Readability	Attachment
Approved-Closed	IAIC DEN DEPAE 0910	Certificate Amendmen t, Insert Page, Endorseme nt or Rider	Amendatory Endorsement	Initial		54.136	IAIC DEN DEPAE 0910 10-20-10.pdf

**INDEPENDENCE AMERICAN INSURANCE COMPANY**

[485 Madison Avenue, New York, NY 10022]

**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.

**INDEPENDENCE AMERICAN INSURANCE COMPANY**



David Kettig  
President



Adam C. Vandervoort  
Secretary

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## Supporting Document Schedules

	Item Status:	Status Date:
<b>Satisfied - Item:</b> Flesch Certification	Approved-Closed	11/14/2010
<b>Comments:</b>		
<b>Attachment:</b>		
Cert of Comp. with Rule 19 IAIC DEN DEPAE.pdf		

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

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

Insurer: Independence American Insurance Company

Form Number(s): IAIC DEN 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

David Kettig  
Name

President  
Title

October 22, 2010  
Date