

SERFF Tracking Number: EMCN-128221854 State: Arkansas  
Filing Company: EMC National Life Company State Tracking Number:  
Company Tracking Number: ELR011  
TOI: L071 Individual Life - Whole Sub-TOI: L071.111 Single Premium - Single Life  
Product Name: Additional Paid-Up Insurance Rider  
Project Name/Number: /

## Filing at a Glance

Company: EMC National Life Company

Product Name: Additional Paid-Up Insurance Rider SERFF Tr Num: EMCN-128221854 State: Arkansas

TOI: L071 Individual Life - Whole SERFF Status: Closed-Approved- Closed State Tr Num:

Sub-TOI: L071.111 Single Premium - Single Life Co Tr Num: ELR011

Filing Type: Form

State Status: Approved-Closed

Reviewer(s): Linda Bird

Author: Mark Rowley

Disposition Date: 04/04/2012

Date Submitted: 03/30/2012

Disposition Status: Approved-Closed

Implementation Date Requested: On Approval

Implementation Date:

State Filing Description:

## General Information

Project Name:

Status of Filing in Domicile: Pending

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:

Filing Status Changed: 04/04/2012

State Status Changed: 04/04/2012

Deemer Date:

Created By: Mark Rowley

Submitted By: Mark Rowley

Corresponding Filing Tracking Number:

Filing Description:

The following form is being filed:

ELR011 (2-12) – This is a Single Premium whole life rider form

This is a new forms and will not replace any existing forms.

This submission contains no unusual or possibly controversial items from normal company or industry standards.

ELR011 (2-12) will be used with applications EAP010, EAP011, or EAP014.

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We plan to also use this form with future individual life applications and products as they are developed.

Bracketed matter shown in the forms is subject to change. The accompanying Statements of Variability provide an explanation of the variable items applicable to these forms.

It may be issued from ages 0 to 85. The minimum death benefit issued is \$2,000. We may increase the death benefit each year on the anniversary.

This rider is sex-distinct and will not be used in any employer-employee plans that are subject to the Norris decision and/or Title VII of the Civil Rights Act of 1964. It is a non-illustrative product.

This form was written to be readable and easily understood by insureds. The form achieved a flesch score of 52.2.  
 State Narrative:

## Company and Contact

### Filing Contact Information

Mark Rowley, VP, Managing Actuary mrowley@emcnl.com  
 PO Box 9202 515-237-2147 [Phone]  
 Des Moines, IA 50306-9202

### Filing Company Information

EMC National Life Company CoCode: 62928 State of Domicile: Iowa  
 PO Box 9202 Group Code: Company Type: L and Health  
 Des Moines, IA 50306-9202 Group Name: State ID Number:  
 (515) 237-2147 ext. [Phone] FEIN Number: 42-0868851

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## Filing Fees

Fee Required? Yes  
 Fee Amount: \$50.00  
 Retaliatory? Yes  
 Fee Explanation: 1 Form  
 Per Company: No

COMPANY	AMOUNT	DATE PROCESSED	TRANSACTION #
EMC National Life Company	\$50.00	03/30/2012	57615543

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## Correspondence Summary

### Dispositions

Status	Created By	Created On	Date Submitted
Approved-Closed	Linda Bird	04/04/2012	04/04/2012

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## Disposition

Disposition Date: 04/04/2012

Implementation Date:

Status: Approved-Closed

Comment:

Rate data does NOT apply to filing.

SERFF Tracking Number: *EMCN-128221854* State: *Arkansas*  
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<b>Schedule</b>	<b>Schedule Item</b>	<b>Schedule Item Status</b>	<b>Public Access</b>
<b>Supporting Document</b>	Flesch Certification		Yes
<b>Supporting Document</b>	Application		Yes
<b>Supporting Document</b>	Life & Annuity - Acturial Memo		No
<b>Supporting Document</b>	Statement of Variability		Yes
<b>Form</b>	Additional Paid-Up Insurance Rider		Yes

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## Form Schedule

### Lead Form Number: ELR011 (2-12)

Schedule Item Status	Form Number	Form Type Form Name	Action	Action Specific Data	Readability	Attachment
	ELR011 (2-12)	Policy/Cont ract/Fraternal Insurance Rider Certificate: Amendment, Insert Page, Endorsement or Rider	Initial		52.200	ELR011(2-12).pdf

## **ADDITIONAL PAID-UP INSURANCE RIDER**

When we use the term “We,” “Us,” or “Our,” we mean EMC National Life Company. When we use the term “You” or “Your,” we mean the Owner. When we use the term “Insured,” we mean the person named on page 3 of the Policy. The Owner may or may not be the Insured. When we use the term “Policy,” we refer to the Policy to which this Rider is attached.

### **I. BENEFIT**

While this Policy and Rider are in effect, We will pay the additional paid-up life insurance amount purchased under this Rider to the beneficiary using the following calculations:

1. The additional paid-up life insurance amount as shown on page 3 of the Policy; less
2. Any existing loan charged to this Rider; less
3. Interest to the date of death on any existing loan charged to this Rider; plus
4. Interest on proceeds as specified in the Policy from the date of death to the date of payments.

We will pay this amount after We receive due proof of the Insured’s death. Payment is subject to the provisions, terms and conditions of this Rider and the Policy.

### **II. PREMIUM**

You must pay Us the single premium as shown on page 3 of the Policy. It is payable to Us on or before delivery of this Rider.

### **III. BENEFICIARY**

The beneficiary will be the beneficiary named in the Application or in the most recent change of beneficiary.

### **IV. EFFECTIVE DATE**

The effective date of this Rider is the effective date of the Policy.

### **V. EFFECTS ON POLICY NONFORFEITURE BENEFITS AND LOANS**

The cash value of the additional paid-up life insurance amount purchased under this Rider will be included with the cash value of the Policy to determine the Policy’s loan value, cash surrender value, reduced paid-up insurance amount or extended term insurance period. The provisions of the Policy related to nonforfeiture benefits and loans apply to this Rider.

### **VI. SURRENDER OF ADDITIONAL PAID-UP INSURANCE**

The Owner may request a partial or total surrender of the cash value of the additional paid-up life insurance amount purchased under this Rider during the lifetime of the Insured. The request must be written on a form acceptable to Us.

A partial surrender of the cash value of the additional paid-up life insurance amount may be for any cash value amount, but not less than \$500.00. A \$25.00 fee will be charged against each partial surrender.

If a partial surrender is taken, the amount of additional paid-up insurance is reduced proportionately.

## VII. TERMINATION

This Rider will end upon the occurrence of the earliest of the following:

1. The Insured dies.
2. The Owner surrenders this Rider for its cash value.
3. The cash value is used to purchase extended term insurance or reduced paid-up insurance when the nonforfeiture provisions of the Policy become effective.
4. The Policy terminates.

## VIII. DIVIDENDS

This Rider is non-participating.

## IX. GENERAL PROVISIONS

### A. COMPUTATION OF VALUES

Values are computed on the basis of the Commissioners' 2001 Standard Ordinary Mortality Tables, sex and smoker distinct. Values are computed assuming age last birthday and deaths occurring at the end of the policy year. Interest is calculated at 5%. Values are greater than or equal to the values required by law.

### B. INTERPRETATION

This Rider is part of the Policy to which it is attached. Unless stated otherwise, all provisions of the Policy also apply to this Rider. If there is a conflict between the terms of the Policy and the terms of this Rider, the Rider controls.

Signed for the Company at its Home Office

  
President

  
Secretary

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## Supporting Document Schedules

**Item Status:**                      **Status  
Date:**

**Satisfied - Item:**              Flesch Certification

**Comments:**

**Attachment:**

AR Certificates ELR011.pdf

**Item Status:**                      **Status  
Date:**

**Satisfied - Item:**              Application

**Comments:**

The form will be used with either EAP014 (11-11), which was approval on 3/12/2012, or applications EAP010 (11-10) or EAP011 (11-10), which were approved on 11/17/2010.

**Item Status:**                      **Status  
Date:**

**Satisfied - Item:**              Life & Annuity - Acturial Memo

**Comments:**

**Attachment:**

ELR011 (2-12) Actuarial Memorandum.pdf

**Item Status:**                      **Status  
Date:**

**Satisfied - Item:**              Statement of Variability

**Comments:**

**Attachment:**

Stmt of Variability ELR011 (2-12).pdf

**STATE OF ARKANSAS**  
**CERTIFICATE OF COMPLIANCE**

I hereby certify that this submission complies with the Arkansas Rule and Regulation 19 which relates to eliminating the act of denying benefits or coverage on the basis of sex or marital status in the terms and conditions of insurance contracts or underwriting criteria, as applicable.

I hereby certify that this submission complies with the Arkansas Rule and Regulation 49 which relates to providing Life and Health Guaranty Association notices, as applicable.

I hereby certify that this submission complies with the Arkansas Statutes – Insurance Laws 23-79-138 which relates to required policy information on every policy of life insurance, accident and health insurance issued, as applicable.



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Mark C. Rowley, FSA, MAAA  
Vice President, Managing Actuary

March 30, 2012  
Date

**READABILITY**

**CERTIFICATION**

I certify to the best of my knowledge that the forms being filed are readable based on the factors specified in Sections 66-3251 to 66-3258 of the Arkansas Statutes. The Flesch Scores are as follows:

<u>Form Number</u>	<u>Flesch Score</u>
ELP022 (11-11)	53.0
ELP023 (2-12)	52.6
EAP014 (11-11)	50.5



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Mark C. Rowley, FSA, MAAA  
Vice President, Managing Actuary

March 6, 2012  
Date

**EMC National Life Company**  
Statement of Variability

**Additional Paid-Up Insurance Rider ELR011 (2-12)**

- 1. Company Address, Phone Number, Website Address –  
Page 1**  
In the event of a change, the new information will be shown.
- 2. Company Officers' Signature and Titles –  
Page 2**  
In the event of a change, the new information will be shown.