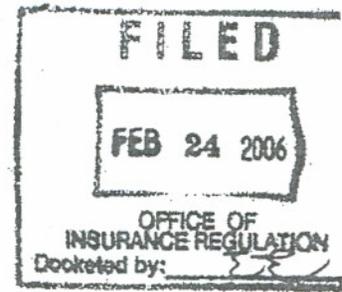




OFFICE OF INSURANCE REGULATION



KEVIN M. McCARTY
COMMISSIONER

IN THE MATTER OF:

EMC NATIONAL LIFE COMPANY
Life and Health Market Conduct Investigation

CASE NO: 83931-05-CO

CONSENT ORDER

THIS CAUSE came on to be considered as the result of an agreement between EMC NATIONAL LIFE COMPANY (hereinafter referred to as "EMC") with the OFFICE OF INSURANCE REGULATION (hereinafter referred to as the "OFFICE"). Following a complete review of the entire record, and upon consideration thereof, and being otherwise fully advised in the premises, the OFFICE hereby finds as follows:

1. The OFFICE has jurisdiction over the subject matter and parties to this proceeding.
2. EMC is a foreign insurer authorized to transact insurance business in Florida.
3. The OFFICE has conducted an investigation of EMC pursuant to section 624.318, Florida Statutes. As a result of such investigation, the OFFICE has determined that EMC committed the following violations of Florida Statutes, due to its failure to file annual rate certifications for its cancer policies for a period of seven (7) year, in violation of section 627.410(7) (a), Florida Statutes, that requires that insurer shall make an annual filing with the OFFICE no later than twelve (12) months after its previous filing.

4. The OFFICE AND EMC expressly waive a hearing in this matter, and the making of Findings of Fact and Conclusions of Law by the OFFICE, and all further and other proceedings herein to which the parties may be entitled by law or rules of the OFFICE. EMC hereby knowingly and voluntarily waives all rights to challenge or contest this Consent Order in any forum now available to it, including the right to any administrative proceeding, circuit, or federal court action or any appeal.

5. EMC agrees that failure to adhere to one or more of the terms and conditions of this Consent Order shall constitute a violation of a lawful order of the OFFICE, and shall subject EMC to administrative action as the OFFICE may deem appropriate.

6. EMC agrees that upon the execution of this Consent Order, it shall be subject to the following terms and condition:

a. EMC shall pay an administrative penalty of twenty thousand dollars (\$20,000) and costs of two thousand dollars (\$2,000) on or before the 30th day after this Consent Order is executed.

b. EMC shall implement procedures to assure that annual rate certifications will be filed in the future on all health insurance products for which such certifications are required by Florida Statutes, and a copy of such procedures, certified by an officer of EMC, shall be provided to the OFFICE by the 30th day after this Consent Order is executed.

c. EMC is hereby placed on notice of the requirements of the above-referenced sections of law and agrees that any future violations of these sections by EMC may be deemed willful, subjecting EMC to appropriate penalties.

7. Except as noted above, each party to this action shall bear its own costs and attorney's fees.

WHEREFORE, the agreement between EMC and the OFFICE, that EMC shall timely submit its annual rate filings, the terms and conditions which are set forth above, is approved.

FURTHER, all terms and conditions contained herein are hereby ORDERED.

DONE and ORDERED this 24th day of February, 2006.



Kevin M. McCarty
Commissioner
Office of Insurance Regulation

By execution hereof, EMC NATIONAL LIFE COMPANY, consent to entry of this Order, agrees without reservation to all of the above terms and conditions and shall be bound by all provisions herein. The undersigned represents that he/she has the authority to bind EMC NATIONAL LIFE COMPANY, to the terms and conditions of this Consent Order.

EMC NATIONAL LIFE COMPANY

By: _____

Corporate Seal

Print Name: Alan D. Huisinga

Title: President and COO

Date: 15 February 2006

State of Iowa

County of Polk

The foregoing instrument was acknowledged before me this 15th day of February 2006.

by Alan D. Huisinga

(Signature of Notary Public)

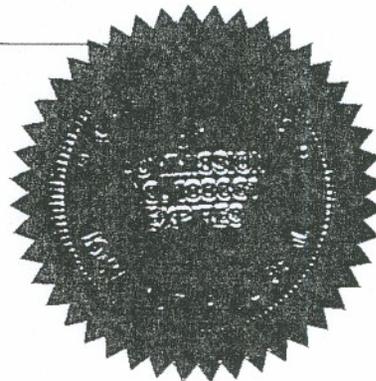
Carolyn King
(Print, Type, or Stamp Commissioned
Name of Notary Public)

Personally Known or Produced Identification _____

Type of Identification Produced _____

My Commission Expires:

2-6-09



COPIES FURNISHED TO:

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