

State: Pennsylvania **Filing Company:** RiverSource Life Insurance Company
TOI/Sub-TOI: LTC03I Individual Long Term Care/LTC03I.001 Qualified
Product Name: Long Term Care
Project Name/Number: 30160A32100 RS 2015/30160A32100 RS 2015

Filing at a Glance

Company: RiverSource Life Insurance Company
Product Name: Long Term Care
State: Pennsylvania
TOI: LTC03I Individual Long Term Care
Sub-TOI: LTC03I.001 Qualified
Filing Type: Rate - M.U. (Medically underwritten)
Date Submitted: 06/23/2015
SERFF Tr Num: AERS-129957562
SERFF Status: Assigned
State Tr Num: AERS-129957562
State Status: Received Review in Progress
Co Tr Num: 30160A32100 RS 2015

Implementation: On Approval
Date Requested:
Author(s): Jeff Pederson, Cheryl Meyer, Kathleen Felton, Peg VanDrisse, Elaine Zurovski, Erik Stone,
Lynn Blount, Peg VanDrisse
Reviewer(s): Jim Laverty (primary)
Disposition Date:
Disposition Status:
Implementation Date:

State Filing Description:

Proposed 85% increase on 256 policyholders of RiverSource form 30160A-PA issued after 9-15-2002.

State: Pennsylvania **Filing Company:** RiverSource Life Insurance Company
TOI/Sub-TOI: LTC03I Individual Long Term Care/LTC03I.001 Qualified
Product Name: Long Term Care
Project Name/Number: 30160A32100 RS 2015/30160A32100 RS 2015

General Information

Project Name: 30160A32100 RS 2015 Status of Filing in Domicile: Not Filed
 Project Number: 30160A32100 RS 2015 Date Approved in Domicile:
 Requested Filing Mode: Review & Approval Domicile Status Comments:
 Explanation for Combination/Other: Market Type: Individual
 Submission Type: New Submission Individual Market Type:
 Overall Rate Impact: 85.2% Filing Status Changed: 06/23/2015
 State Status Changed: 06/23/2015
 Deemer Date: Created By: Cheryl Meyer
 Submitted By: Cheryl Meyer Corresponding Filing Tracking Number:

Filing Description:
 See attached cover letter under Supporting Documentation tab.

Company and Contact

Filing Contact Information

Cheryl Meyer, Sr. Contract Analyst Cheryl.D.Meyer@ampf.com
 9550 Ameriprise Financial Center 612-671-5583 [Phone]
 H25/9550 612-671-3866 [FAX]
 Minneapolis, MN 55474

Filing Company Information

RiverSource Life Insurance CoCode: 65005 State of Domicile: Minnesota
 Company Group Code: 4 Company Type: Life
 9550 Ameriprise Financial Center, Group Name: Insurance
 H22/9550 FEIN Number: 41-0823832 State ID Number:
 Minneapolis, MN 55474
 (612) 671-2465 ext. [Phone]

Filing Fees

Fee Required? Yes
 Fee Amount: \$125.00
 Retaliatory? Yes
 Fee Explanation: MN rate fee
 Per Company: Yes

Company	Amount	Date Processed	Transaction #
RiverSource Life Insurance Company	\$125.00	06/23/2015	96838543

SERFF Tracking #:

AERS-129957562

State Tracking #:

AERS-129957562

Company Tracking #:

30160A32100 RS 2015

State:

Pennsylvania

Filing Company:

RiverSource Life Insurance Company

TOI/Sub-TOI:

LTC03I Individual Long Term Care/LTC03I.001 Qualified

Product Name:

Long Term Care

Project Name/Number:

30160A32100 RS 2015/30160A32100 RS 2015

Rate Information

Rate data applies to filing.

Filing Method:

Review and Approve

Rate Change Type:

Increase

Overall Percentage of Last Rate Revision:

0.000%

Effective Date of Last Rate Revision:

11/11/1111

Filing Method of Last Filing:

na

Company Rate Information

Company Name:	Overall % Indicated Change:	Overall % Rate Impact:	Written Premium Change for this Program:	Number of Policy Holders Affected for this Program:	Written Premium for this Program:	Maximum % Change (where req'd):	Minimum % Change (where req'd):
RiverSource Life Insurance Company	%	85.200%	\$320,050	256	\$375,645	85.200%	85.200%

SERFF Tracking #:

AERS-129957562

State Tracking #:

AERS-129957562

Company Tracking #:

30160A32100 RS 2015

State:

Pennsylvania

Filing Company:

RiverSource Life Insurance Company

TOI/Sub-TOI:

LTC03I Individual Long Term Care/LTC03I.001 Qualified

Product Name:

Long Term Care

Project Name/Number:

30160A32100 RS 2015/30160A32100 RS 2015

Rate/Rule Schedule

Item No.	Schedule Item Status	Document Name	Affected Form Numbers (Separated with commas)	Rate Action	Rate Action Information	Attachments
1		PA ExhVIII Premiums 30160A 32100 RS	30160A-PA, 32100-PA	Revised	Previous State Filing Number: Percent Rate Change Request: 85.2	PA ExhVIII_Premiums_30160A_32100_RS_20150623.pdf,

EXHIBIT VIII

RiverSource Life Insurance Company
 227 Ameriprise Financial Center
 Minneapolis, MN 55474

Annual Premiums with 85.2% Rate Increase
 Policies Issued On or After September 16, 2002

Comprehensive Reimbursement Policy
 FORM: 30160A-PA, with Endorsement Form 32100-PA

Annual Premiums Per \$10 Daily Benefit

LIFETIME BENEFIT PERIOD

Issue Age	No Benefit Increase Option						Simple Benefit Increase Option						Compound Benefit Increase Option					
	Deductible			Deductible			Deductible			Deductible			Deductible			Deductible		
	20 days		90 days	20 days		90 days	20 days		90 days	20 days		90 days	20 days		90 days	20 days		90 days
	Home Care Percentage	Home Care Percentage	Home Care Percentage	Home Care Percentage	Home Care Percentage	Home Care Percentage	Home Care Percentage	Home Care Percentage	Home Care Percentage	Home Care Percentage	Home Care Percentage	Home Care Percentage	Home Care Percentage	Home Care Percentage	Home Care Percentage	Home Care Percentage	Home Care Percentage	Home Care Percentage
	50%	75%	100%	50%	75%	100%	50%	75%	100%	50%	75%	100%	50%	75%	100%	50%	75%	100%
40	103.72	118.52	133.34	85.20	98.16	111.12	164.82	187.98	211.12	151.86	172.24	192.60	222.24	250.02	277.80	200.02	224.10	248.16
41	103.72	118.52	133.34	85.20	98.16	111.12	164.82	187.98	211.12	151.86	172.24	192.60	222.24	250.02	277.80	200.02	224.10	248.16
42	103.72	118.52	133.34	85.20	98.16	111.12	164.82	187.98	211.12	151.86	172.24	192.60	222.24	250.02	277.80	200.02	224.10	248.16
43	103.72	118.52	133.34	85.20	98.16	111.12	164.82	187.98	211.12	151.86	172.24	192.60	222.24	250.02	277.80	200.02	224.10	248.16
44	103.72	118.52	133.34	85.20	98.16	111.12	164.82	187.98	211.12	151.86	172.24	192.60	222.24	250.02	277.80	200.02	224.10	248.16
45	103.72	118.52	133.34	85.20	98.16	111.12	164.82	187.98	211.12	151.86	172.24	192.60	222.24	250.02	277.80	200.02	224.10	248.16
46	103.72	118.52	133.34	85.20	98.16	111.12	168.54	191.68	214.84	151.86	172.24	192.60	229.64	257.42	285.20	207.42	231.50	255.58
47	105.56	121.30	137.04	87.04	100.94	114.82	177.80	201.86	225.94	157.42	178.72	200.02	238.90	267.62	296.32	214.84	240.76	266.68
48	105.56	121.30	137.04	90.74	104.64	118.52	185.20	211.12	237.06	161.12	182.42	203.72	251.88	281.50	311.14	220.38	247.24	274.10
49	111.12	127.78	144.46	92.60	107.42	122.24	188.90	214.84	240.76	162.98	185.20	207.42	261.14	291.70	322.24	227.80	254.66	281.50
50	111.12	127.78	144.46	96.30	111.12	125.94	194.46	221.32	248.16	166.68	188.90	211.12	279.66	312.06	344.48	233.36	261.14	288.92
51	114.82	133.34	151.86	98.16	113.90	129.64	200.02	227.80	255.58	175.94	199.10	222.24	287.06	319.48	351.88	238.90	267.62	296.32
52	118.52	137.04	155.56	98.16	113.90	129.64	203.72	231.50	259.28	175.94	199.10	222.24	296.32	329.66	363.00	250.02	278.72	307.44
53	120.38	139.82	159.28	107.42	124.08	140.76	209.28	237.98	266.68	181.50	205.58	229.64	305.58	339.84	374.10	255.58	285.20	314.84
54	120.38	139.82	159.28	107.42	124.08	140.76	218.54	248.16	277.80	185.20	209.28	233.36	318.54	353.74	388.92	261.14	291.70	322.24
55	125.94	146.30	166.68	114.82	133.34	151.86	224.10	254.66	285.20	192.60	218.54	244.46	331.50	367.62	403.74	272.24	304.66	337.06
56	135.20	156.50	177.80	118.52	137.04	155.56	238.90	271.32	303.72	205.58	232.42	259.28	351.88	388.92	425.96	292.62	325.96	359.28
57	148.16	170.38	192.60	127.78	147.24	166.68	255.58	288.92	322.24	222.24	250.02	277.80	368.54	406.52	444.48	312.98	347.26	381.52
58	157.42	180.58	203.72	137.04	157.42	177.80	268.54	302.80	337.06	235.20	263.92	292.62	390.78	430.60	470.40	329.66	364.84	400.04
59	166.68	190.76	214.84	146.30	167.60	188.90	288.92	324.10	359.28	251.88	281.50	311.14	411.14	451.88	492.64	350.02	386.14	422.26
60	181.50	207.42	233.36	155.56	177.80	200.02	301.88	338.00	374.10	272.24	304.66	337.06	427.82	469.48	511.16	366.70	403.74	440.78
61	190.76	217.62	244.46	162.98	185.20	207.42	318.54	355.58	392.62	288.92	322.24	355.58	448.18	490.78	533.38	387.06	425.04	463.00
62	200.02	227.80	255.58	168.54	191.68	214.84	335.22	373.18	411.14	301.88	336.14	370.40	464.86	508.38	551.90	409.30	449.12	488.92
63	209.28	237.98	266.68	181.50	205.58	229.64	353.74	393.56	433.36	318.54	353.74	388.92	485.22	529.68	574.12	425.96	466.70	507.44
64	222.24	251.88	281.50	192.60	218.54	244.46	366.70	407.44	448.18	331.50	367.62	403.74	505.60	550.98	596.34	446.34	488.00	529.68
65	235.20	267.62	300.02	201.86	228.72	255.58	388.92	431.52	474.12	353.74	391.70	429.66	527.82	575.04	622.28	464.86	508.38	551.90
66	275.94	310.22	344.48	235.20	263.92	292.62	450.04	495.42	540.78	403.74	444.48	485.22	600.04	650.06	700.06	524.12	571.34	618.56
67	322.24	359.28	396.32	279.66	312.06	344.48	513.00	562.08	611.16	457.44	500.96	544.48	674.12	727.84	781.54	581.52	631.54	681.54
68	366.70	407.44	448.18	314.84	350.02	385.22	574.12	625.98	677.84	513.00	560.24	607.46	742.66	799.14	855.62	640.80	694.50	748.20
69	416.70	460.22	503.74	353.74	391.70	429.66	633.38	688.94	744.50	570.42	620.42	670.42	822.28	883.40	944.52	698.20	754.70	811.18
70	461.14	508.38	555.60	390.78	432.44	474.12	696.36	755.62	814.88	622.28	675.98	729.68	894.52	958.42	999.98	751.92	811.18	870.44
71	501.90	550.98	600.04	427.82	471.34	514.86	759.32	822.28	885.26	674.12	729.68	785.24	963.04	999.98	999.98	811.18	874.14	937.12
72	551.90	603.76	655.60	464.86	512.08	559.30	820.44	886.18	951.92	731.54	789.88	848.22	999.98	999.98	999.98	868.58	934.34	999.98
73	596.34	651.90	707.46	503.74	553.74	603.76	883.40	952.86	999.98	783.40	845.44	907.48	999.98	999.98	999.98	927.86	997.30	999.98
74	638.94	697.28	755.62	540.78	594.50	648.20	944.52	999.98	999.98	837.10	901.92	966.74	999.98	999.98	999.98	985.26	999.98	999.98
75	690.80	752.84	814.88	583.38	639.86	696.36	999.98	999.98	999.98	896.36	964.90	999.98	999.98	999.98	999.98	999.98	999.98	999.98
76	746.36	815.80	885.26	631.54	695.42	759.32	999.98	999.98	999.98	964.90	999.98	999.98	999.98	999.98	999.98	999.98	999.98	999.98
77	805.62	882.48	959.34	679.68	750.98	822.28	999.98	999.98	999.98	999.98	999.98	999.98	999.98	999.98	999.98	999.98	999.98	999.98
78	861.18	945.44	999.98	727.84	806.54	885.26	999.98	999.98	999.98	999.98	999.98	999.98	999.98	999.98	999.98	999.98	999.98	999.98
79	920.44	999.98	999.98	775.98	862.10	948.22	999.98	999.98	999.98	999.98	999.98	999.98	999.98	999.98	999.98	999.98	999.98	999.98

EXHIBIT VIII

RiverSource Life Insurance Company
 227 Ameriprise Financial Center
 Minneapolis, MN 55474

Annual Premiums with 85.2% Rate Increase
 Policies Issued On or After September 16, 2002

Comprehensive Reimbursement Policy
 FORM: 30160A-PA, with Endorsement Form 32100-PA

Annual Premiums Per \$10 Daily Benefit

6 YEAR BENEFIT PERIOD

Issue Age	No Benefit Increase Option						Simple Benefit Increase Option						Compound Benefit Increase Option					
	Deductible			Deductible			Deductible			Deductible			Deductible			Deductible		
	20 days		90 days	20 days		90 days	20 days		90 days	20 days		90 days	20 days		90 days	20 days		90 days
	Home Care Percentage		Home Care Percentage		Home Care Percentage		Home Care Percentage		Home Care Percentage		Home Care Percentage		Home Care Percentage		Home Care Percentage		Home Care Percentage	
	50%	75%	100%	50%	75%	100%	50%	75%	100%	50%	75%	100%	50%	75%	100%	50%	75%	100%
40	85.20	98.16	111.12	74.08	85.20	96.30	122.24	138.90	155.56	103.72	118.52	133.34	177.80	200.02	222.24	148.16	166.68	185.20
41	85.20	98.16	111.12	74.08	85.20	96.30	122.24	138.90	155.56	103.72	118.52	133.34	177.80	200.02	222.24	148.16	166.68	185.20
42	85.20	98.16	111.12	74.08	85.20	96.30	122.24	138.90	155.56	103.72	118.52	133.34	177.80	200.02	222.24	148.16	166.68	185.20
43	85.20	98.16	111.12	74.08	85.20	96.30	122.24	138.90	155.56	103.72	118.52	133.34	177.80	200.02	222.24	148.16	166.68	185.20
44	85.20	98.16	111.12	74.08	85.20	96.30	122.24	138.90	155.56	103.72	118.52	133.34	177.80	200.02	222.24	148.16	166.68	185.20
45	85.20	98.16	111.12	74.08	85.20	96.30	122.24	138.90	155.56	103.72	118.52	133.34	177.80	200.02	222.24	148.16	166.68	185.20
46	85.20	98.16	111.12	74.08	85.20	96.30	122.24	138.90	155.56	103.72	118.52	133.34	177.80	200.02	222.24	151.86	170.38	188.90
47	87.04	100.94	114.82	74.08	85.20	96.30	129.64	148.16	166.68	107.42	122.24	137.04	183.34	206.50	229.64	157.42	176.86	196.32
48	87.04	100.94	114.82	75.94	87.98	100.00	135.20	154.64	174.08	112.98	128.72	144.46	187.06	210.20	233.36	161.12	180.58	200.02
49	88.90	103.72	118.52	75.94	87.98	100.00	142.60	162.06	181.50	116.68	132.42	148.16	192.60	216.68	240.76	170.38	190.76	211.12
50	92.60	107.42	122.24	81.48	94.46	107.42	148.16	168.54	188.90	122.24	138.90	155.56	196.32	220.38	244.46	179.64	200.94	222.24
51	94.46	110.20	125.94	81.48	94.46	107.42	153.72	175.02	196.32	122.24	138.90	155.56	203.72	229.64	255.58	183.34	204.64	225.94
52	94.46	110.20	125.94	81.48	94.46	107.42	157.42	178.72	200.02	125.94	142.60	159.28	211.12	237.06	262.98	188.90	211.12	233.36
53	96.30	112.98	129.64	83.34	97.24	111.12	162.98	185.20	207.42	133.34	151.86	170.38	216.68	243.54	270.40	192.60	214.84	237.06
54	96.30	112.98	129.64	83.34	97.24	111.12	168.54	191.68	214.84	140.76	159.28	177.80	220.38	247.24	274.10	198.16	221.32	244.46
55	103.72	122.24	140.76	88.90	103.72	118.52	177.80	201.86	225.94	146.30	165.76	185.20	225.94	253.72	281.50	211.12	235.20	259.28
56	111.12	129.64	148.16	92.60	107.42	122.24	188.90	214.84	240.76	155.56	175.94	196.32	238.90	267.62	296.32	222.24	248.16	274.10
57	120.38	139.82	159.28	98.16	113.90	129.64	198.16	225.02	251.88	164.82	186.12	207.42	255.58	285.20	314.84	235.20	262.06	288.92
58	129.64	150.02	170.38	107.42	124.08	140.76	214.84	242.62	270.40	181.50	203.72	225.94	275.94	306.50	337.06	251.88	279.66	307.44
59	135.20	156.50	177.80	118.52	137.04	155.56	224.10	252.80	281.50	190.76	213.90	237.06	290.76	323.18	355.58	264.84	293.54	322.24
60	148.16	170.38	192.60	124.08	143.54	162.98	237.06	266.68	296.32	207.42	231.50	255.58	311.14	344.48	377.80	281.50	311.14	340.76
61	155.56	177.80	200.02	127.78	147.24	166.68	250.02	280.58	311.14	218.54	244.46	270.40	324.10	358.36	392.62	294.46	325.02	355.58
62	161.12	184.28	207.42	137.04	157.42	177.80	261.14	293.54	325.96	227.80	254.66	281.50	337.06	372.26	407.44	312.98	345.40	377.80
63	170.38	194.46	218.54	146.30	167.60	188.90	274.10	307.44	340.76	244.46	272.24	300.02	357.44	393.56	429.66	325.96	359.28	392.62
64	185.20	211.12	237.06	151.86	174.08	196.32	287.06	321.32	355.58	253.72	282.44	311.14	374.10	411.14	448.18	342.62	376.88	411.14
65	194.46	221.32	248.16	161.12	184.28	207.42	301.88	338.00	374.10	268.54	299.10	329.66	394.48	434.30	474.12	355.58	390.78	425.96
66	224.10	252.80	281.50	188.90	214.84	240.76	342.62	382.44	422.26	311.14	344.48	377.80	448.18	490.78	533.38	394.48	432.44	470.40
67	257.42	289.84	322.24	218.54	246.32	274.10	388.92	431.52	474.12	353.74	389.84	425.96	501.90	549.12	596.34	437.08	479.66	522.26
68	287.06	321.32	355.58	240.76	270.40	300.02	431.52	476.90	522.26	394.48	434.30	474.12	555.60	605.60	655.60	483.38	528.74	574.12
69	318.54	355.58	392.62	274.10	307.44	340.76	472.26	521.34	570.42	435.22	476.90	518.56	613.02	667.64	722.28	525.96	575.98	625.98
70	348.18	388.92	429.66	303.72	338.92	374.10	518.56	570.42	622.28	477.82	522.26	566.72	663.02	720.42	777.84	572.26	626.90	681.54
71	377.80	420.40	463.00	329.66	366.70	403.74	563.00	618.56	674.12	522.26	570.42	618.56	720.42	782.48	844.52	614.86	672.28	729.68
72	409.30	454.66	500.04	363.00	403.74	444.48	601.90	660.24	718.58	559.30	609.30	659.32	774.14	838.96	903.78	657.46	719.50	781.54
73	440.78	488.92	537.08	388.92	431.52	474.12	646.34	708.40	770.44	607.46	661.16	714.88	827.84	897.30	966.74	700.06	764.88	829.70
74	472.26	523.20	574.12	418.56	463.00	507.44	692.64	757.46	822.28	646.34	702.84	759.32	881.56	953.78	999.98	742.66	812.10	881.56
75	509.30	563.94	618.56	448.18	496.34	544.48	738.94	808.40	877.84	688.94	748.20	807.48	942.66	999.98	999.98	790.80	863.96	937.12
76	572.26	630.60	688.94	511.16	563.00	614.86	824.14	899.14	974.16	774.14	838.96	903.78	999.98	999.98	999.98	877.84	957.48	999.98
77	637.08	700.06	763.02	575.98	632.46	688.94	907.48	987.12	999.98	859.32	929.70	999.98	999.98	999.98	999.98	968.60	999.98	999.98
78	700.06	766.72	833.40	640.80	701.90	763.02	998.22	999.98	999.98	950.08	999.98	999.98	999.98	999.98	999.98	999.98	999.98	999.98
79	770.44	842.66	914.88	709.32	775.06	840.80	999.98	999.98	999.98	999.98	999.98	999.98	999.98	999.98	999.98	999.98	999.98	999.98

EXHIBIT VIII

RiverSource Life Insurance Company
227 Ameriprise Financial Center
Minneapolis, MN 55474

Annual Premiums with 85.2% Rate Increase
Policies Issued On or After September 16, 2002

Comprehensive Reimbursement Policy
FORM: 30160A-PA, with Endorsement Form 32100-PA

Annual Premiums Per \$10 Daily Benefit

4 YEAR BENEFIT PERIOD

Issue Age	No Benefit Increase Option						Simple Benefit Increase Option						Compound Benefit Increase Option					
	Deductible			Deductible			Deductible			Deductible			Deductible			Deductible		
	20 days		90 days	20 days		90 days	20 days		90 days	20 days		90 days	20 days		90 days	20 days		90 days
	Home Care Percentage	Home Care Percentage	Home Care Percentage	Home Care Percentage	Home Care Percentage	Home Care Percentage	Home Care Percentage	Home Care Percentage	Home Care Percentage	Home Care Percentage	Home Care Percentage	Home Care Percentage	Home Care Percentage	Home Care Percentage	Home Care Percentage	Home Care Percentage	Home Care Percentage	Home Care Percentage
	50%	75%	100%	50%	75%	100%	50%	75%	100%	50%	75%	100%	50%	75%	100%	50%	75%	100%
40	70.38	81.48	92.60	50.00	58.34	66.68	103.72	118.52	133.34	85.20	98.16	111.12	159.28	177.80	196.32	140.76	155.56	170.38
41	70.38	81.48	92.60	50.00	58.34	66.68	103.72	118.52	133.34	85.20	98.16	111.12	159.28	177.80	196.32	140.76	155.56	170.38
42	70.38	81.48	92.60	50.00	58.34	66.68	103.72	118.52	133.34	85.20	98.16	111.12	159.28	177.80	196.32	140.76	155.56	170.38
43	70.38	81.48	92.60	50.00	58.34	66.68	103.72	118.52	133.34	85.20	98.16	111.12	159.28	177.80	196.32	140.76	155.56	170.38
44	70.38	81.48	92.60	50.00	58.34	66.68	103.72	118.52	133.34	85.20	98.16	111.12	159.28	177.80	196.32	140.76	155.56	170.38
45	70.38	81.48	92.60	50.00	58.34	66.68	103.72	118.52	133.34	85.20	98.16	111.12	159.28	177.80	196.32	140.76	155.56	170.38
46	70.38	81.48	92.60	50.00	58.34	66.68	103.72	118.52	133.34	85.20	98.16	111.12	159.28	177.80	196.32	140.76	155.56	170.38
47	70.38	81.48	92.60	50.00	58.34	66.68	107.42	122.24	137.04	85.20	98.16	111.12	166.68	185.20	203.72	140.76	155.56	170.38
48	72.22	84.26	96.30	51.86	61.12	70.38	109.26	125.02	140.76	88.90	101.86	114.82	168.54	187.98	207.42	146.30	162.06	177.80
49	75.94	87.98	100.00	55.56	64.82	74.08	112.98	128.72	144.46	90.74	104.64	118.52	172.24	191.68	211.12	146.30	162.06	177.80
50	77.78	90.74	103.72	59.26	70.38	81.48	118.52	135.20	151.86	94.46	108.34	122.24	177.80	198.16	218.54	151.86	168.54	185.20
51	77.78	90.74	103.72	59.26	70.38	81.48	118.52	135.20	151.86	94.46	108.34	122.24	177.80	198.16	218.54	151.86	168.54	185.20
52	81.48	94.46	107.42	66.68	77.78	88.90	122.24	138.90	155.56	96.30	111.12	125.94	181.50	201.86	222.24	151.86	168.54	185.20
53	83.34	97.24	111.12	68.52	80.56	92.60	125.94	144.46	162.98	103.72	118.52	133.34	183.34	204.64	225.94	159.28	177.80	196.32
54	83.34	97.24	111.12	68.52	80.56	92.60	129.64	148.16	166.68	103.72	118.52	133.34	187.06	208.36	229.64	159.28	177.80	196.32
55	88.90	103.72	118.52	74.08	87.04	100.00	135.20	154.64	174.08	109.26	125.02	140.76	192.60	214.84	237.06	168.54	187.98	207.42
56	92.60	107.42	122.24	77.78	90.74	103.72	148.16	168.54	188.90	118.52	135.20	151.86	205.58	228.72	251.88	177.80	198.16	218.54
57	98.16	113.90	129.64	83.34	97.24	111.12	157.42	178.72	200.02	129.64	148.16	166.68	214.84	238.90	262.98	187.06	208.36	229.64
58	107.42	124.08	140.76	88.90	103.72	118.52	166.68	188.90	211.12	142.60	162.06	181.50	231.50	258.36	285.20	196.32	218.54	240.76
59	118.52	137.04	155.56	94.46	110.20	125.94	179.64	202.80	225.94	151.86	172.24	192.60	244.46	272.24	300.02	214.84	238.90	262.98
60	124.08	143.54	162.98	107.42	124.08	140.76	192.60	218.54	244.46	166.68	188.90	211.12	259.28	288.92	318.54	225.94	251.88	277.80
61	129.64	150.02	170.38	111.12	127.78	144.46	201.86	228.72	255.58	179.64	202.80	225.94	268.54	299.10	329.66	235.20	262.06	288.92
62	138.90	160.20	181.50	118.52	137.04	155.56	214.84	242.62	270.40	188.90	212.98	237.06	283.36	315.76	348.18	253.72	282.44	311.14
63	148.16	170.38	192.60	124.08	143.54	162.98	224.10	252.80	281.50	200.02	225.94	251.88	298.18	332.44	366.70	262.98	292.62	322.24
64	153.72	176.86	200.02	129.64	150.02	170.38	233.36	262.98	292.62	212.98	239.84	266.68	307.44	342.62	377.80	275.94	306.50	337.06
65	162.98	187.06	211.12	138.90	160.20	181.50	253.72	286.14	318.54	227.80	256.50	285.20	325.96	363.00	400.04	292.62	325.96	359.28
66	190.76	217.62	244.46	161.12	184.28	207.42	287.06	321.32	355.58	257.42	287.98	318.54	366.70	407.44	448.18	327.80	363.92	400.04
67	218.54	248.16	277.80	188.90	214.84	240.76	322.24	359.28	396.32	294.46	328.74	363.00	409.30	452.82	496.34	368.54	408.36	448.18
68	242.62	275.02	307.44	214.84	242.62	270.40	363.00	403.74	444.48	327.80	363.92	400.04	457.44	504.68	551.90	407.44	450.04	492.64
69	270.40	305.58	340.76	233.36	262.98	292.62	398.18	441.70	485.22	361.14	400.96	440.78	501.90	552.82	603.76	453.74	500.96	548.20
70	298.18	336.14	374.10	262.98	296.32	329.66	438.92	486.16	533.38	396.32	438.92	481.52	546.34	600.98	655.60	492.64	542.64	592.64
71	325.96	366.70	407.44	288.92	324.10	359.28	474.12	524.12	574.12	429.66	474.12	518.56	588.94	646.34	703.76	529.68	583.38	637.08
72	350.02	393.56	437.08	307.44	344.48	381.52	511.16	564.86	618.56	463.00	511.16	559.30	635.24	697.28	759.32	570.42	627.82	685.24
73	375.96	421.34	466.70	335.22	375.04	414.84	550.04	606.54	663.02	496.34	546.34	596.34	677.84	742.66	807.48	611.16	672.28	733.40
74	405.58	454.66	503.74	361.14	402.82	444.48	588.94	648.20	707.46	533.38	587.08	640.80	725.98	794.50	863.04	650.06	713.94	777.84
75	437.08	488.92	540.78	388.92	433.36	477.82	629.68	692.64	755.62	568.56	625.06	681.54	770.44	842.66	914.88	696.36	764.88	833.40
76	498.18	554.68	611.16	446.34	495.42	544.48	696.36	764.88	833.40	635.24	697.28	759.32	838.96	917.66	996.38	764.88	839.88	914.88
77	555.60	616.72	677.84	507.44	561.16	614.86	764.88	838.04	911.18	703.76	770.44	837.10	907.48	992.68	999.98	831.54	912.12	992.68
78	618.56	683.38	748.20	570.42	627.82	685.24	837.10	916.74	996.38	775.98	849.14	922.30	979.70	999.98	999.98	903.78	990.82	999.98
79	681.54	751.92	822.28	633.38	696.36	759.32	907.48	992.68	999.98	846.36	925.08	999.98	999.98	999.98	999.98	972.30	999.98	999.98
80				696.36	763.02					918.60	999.98					999.98	999.98	
81				757.46	828.78					992.68	999.98					999.98	999.98	
82				824.14	901.00					999.98	999.98					999.98	999.98	
83				890.82	973.22					999.98	999.98					999.98	999.98	
84				951.92	999.98					999.98	999.98					999.98	999.98	

EXHIBIT VIII

RiverSource Life Insurance Company
227 Ameriprise Financial Center
Minneapolis, MN 55474

Annual Premiums with 85.2% Rate Increase
Policies Issued On or After September 16, 2002

Comprehensive Reimbursement Policy
FORM: 30160A-PA, with Endorsement Form 32100-PA

Annual Premiums Per \$10 Daily Benefit

2 YEAR BENEFIT PERIOD

Issue Age	No Benefit Increase Option						Simple Benefit Increase Option						Compound Benefit Increase Option					
	Deductible			Deductible			Deductible			Deductible			Deductible			Deductible		
	20 days		90 days	20 days		90 days	20 days		90 days	20 days		90 days	20 days		90 days	20 days		90 days
	Home Care Percentage	Home Care Percentage	Home Care Percentage	Home Care Percentage	Home Care Percentage	Home Care Percentage	Home Care Percentage	Home Care Percentage	Home Care Percentage	Home Care Percentage	Home Care Percentage	Home Care Percentage	Home Care Percentage	Home Care Percentage	Home Care Percentage	Home Care Percentage	Home Care Percentage	Home Care Percentage
	50%	75%	100%	50%	75%	100%	50%	75%	100%	50%	75%	100%	50%	75%	100%	50%	75%	100%
40	50.00	58.34	66.68	38.90	45.38	51.86	79.64	91.68	103.72	62.96	72.22	81.48	112.98	126.86	140.76	90.74	102.78	114.82
41	50.00	58.34	66.68	38.90	45.38	51.86	79.64	91.68	103.72	62.96	72.22	81.48	112.98	126.86	140.76	90.74	102.78	114.82
42	50.00	58.34	66.68	38.90	45.38	51.86	79.64	91.68	103.72	62.96	72.22	81.48	112.98	126.86	140.76	90.74	102.78	114.82
43	50.00	58.34	66.68	38.90	45.38	51.86	79.64	91.68	103.72	62.96	72.22	81.48	112.98	126.86	140.76	90.74	102.78	114.82
44	50.00	58.34	66.68	38.90	45.38	51.86	79.64	91.68	103.72	62.96	72.22	81.48	112.98	126.86	140.76	90.74	102.78	114.82
45	50.00	58.34	66.68	38.90	45.38	51.86	79.64	91.68	103.72	62.96	72.22	81.48	112.98	126.86	140.76	90.74	102.78	114.82
46	50.00	58.34	66.68	38.90	45.38	51.86	79.64	91.68	103.72	62.96	72.22	81.48	112.98	126.86	140.76	90.74	102.78	114.82
47	50.00	58.34	66.68	38.90	45.38	51.86	83.34	95.38	107.42	66.68	75.94	85.20	118.52	133.34	148.16	98.16	110.20	122.24
48	51.86	61.12	70.38	40.74	48.16	55.56	85.20	98.16	111.12	70.38	81.48	92.60	118.52	133.34	148.16	103.72	116.68	129.64
49	51.86	61.12	70.38	40.74	48.16	55.56	88.90	101.86	114.82	74.08	85.20	96.30	124.08	139.82	155.56	103.72	116.68	129.64
50	59.26	70.38	81.48	46.30	54.64	62.96	94.46	108.34	122.24	79.64	91.68	103.72	124.08	139.82	155.56	109.26	123.16	137.04
51	59.26	70.38	81.48	46.30	54.64	62.96	94.46	108.34	122.24	79.64	91.68	103.72	129.64	146.30	162.98	112.98	126.86	140.76
52	59.26	70.38	81.48	46.30	54.64	62.96	101.86	115.76	129.64	83.34	95.38	107.42	129.64	146.30	162.98	112.98	126.86	140.76
53	61.12	73.16	85.20	48.16	57.42	66.68	103.72	118.52	133.34	85.20	98.16	111.12	140.76	159.28	177.80	118.52	133.34	148.16
54	61.12	73.16	85.20	48.16	57.42	66.68	107.42	122.24	137.04	88.90	101.86	114.82	140.76	159.28	177.80	122.24	137.04	151.86
55	70.38	83.34	96.30	55.56	66.68	77.78	112.98	128.72	144.46	94.46	108.34	122.24	146.30	165.76	185.20	127.78	143.54	159.28
56	74.08	87.04	100.00	55.56	66.68	77.78	116.68	132.42	148.16	101.86	115.76	129.64	151.86	172.24	192.60	137.04	153.72	170.38
57	79.64	93.52	107.42	61.12	73.16	85.20	125.94	142.60	159.28	111.12	125.94	140.76	161.12	182.42	203.72	144.46	162.98	181.50
58	85.20	100.00	114.82	70.38	83.34	96.30	133.34	151.86	170.38	116.68	132.42	148.16	174.08	196.32	218.54	153.72	173.16	192.60
59	90.74	106.50	122.24	74.08	87.04	100.00	146.30	165.76	185.20	125.94	142.60	159.28	183.34	206.50	229.64	159.28	179.64	200.02
60	100.00	116.68	133.34	79.64	93.52	107.42	151.86	172.24	192.60	133.34	151.86	170.38	192.60	216.68	240.76	172.24	193.54	214.84
61	107.42	124.08	140.76	85.20	100.00	114.82	161.12	182.42	203.72	146.30	165.76	185.20	203.72	229.64	255.58	177.80	200.02	222.24
62	114.82	133.34	151.86	88.90	103.72	118.52	166.68	188.90	211.12	151.86	172.24	192.60	216.68	243.54	270.40	183.34	206.50	229.64
63	120.38	139.82	159.28	94.46	110.20	125.94	179.64	202.80	225.94	161.12	182.42	203.72	225.94	253.72	281.50	192.60	216.68	240.76
64	125.94	146.30	166.68	100.00	116.68	133.34	185.20	209.28	233.36	166.68	188.90	211.12	235.20	263.92	292.62	200.02	225.94	251.88
65	135.20	156.50	177.80	111.12	129.64	148.16	196.32	222.24	248.16	179.64	202.80	225.94	248.16	277.80	307.44	212.98	239.84	266.68
66	153.72	176.86	200.02	125.94	146.30	166.68	218.54	246.32	274.10	196.32	222.24	248.16	279.66	312.06	344.48	231.50	260.20	288.92
67	170.38	196.32	222.24	140.76	162.98	185.20	237.06	266.68	296.32	214.84	242.62	270.40	305.58	339.84	374.10	253.72	284.28	314.84
68	192.60	220.38	248.16	159.28	183.34	207.42	262.98	296.32	329.66	229.64	259.28	288.92	337.06	374.10	411.14	275.94	310.22	344.48
69	207.42	237.06	266.68	175.94	202.80	229.64	285.20	320.40	355.58	246.32	278.72	311.14	368.54	408.36	448.18	298.18	334.28	370.40
70	233.36	266.68	300.02	194.46	223.16	251.88	309.28	347.26	385.22	264.84	299.10	333.36	400.04	442.62	485.22	324.10	363.92	403.74
71	248.16	283.36	318.54	209.28	239.84	270.40	333.36	374.10	414.84	279.66	315.76	351.88	429.66	474.12	518.56	342.62	384.30	425.96
72	266.68	303.72	340.76	229.64	262.98	296.32	351.88	394.48	437.08	298.18	336.14	374.10	461.14	508.38	555.60	364.84	408.36	451.88
73	287.06	326.88	366.70	244.46	279.66	314.84	375.96	421.34	466.70	314.84	355.58	396.32	492.64	542.64	592.64	387.06	434.30	481.52
74	305.58	347.26	388.92	262.98	300.02	337.06	400.04	448.18	496.34	333.36	375.96	418.56	522.26	574.12	625.98	409.30	458.38	507.44
75	325.96	370.40	414.84	283.36	323.18	363.00	424.10	475.04	525.96	348.18	392.62	437.08	555.60	611.16	666.72	437.08	488.92	540.78
76	372.26	421.34	470.40	324.10	367.62	411.14	463.00	518.56	574.12	387.06	436.14	485.22	600.04	659.32	718.58	483.38	539.86	596.34
77	418.56	472.26	525.96	374.10	422.26	470.40	507.44	566.72	625.98	429.66	483.38	537.08	646.34	710.24	774.14	529.68	590.78	651.90
78	464.86	523.20	581.52	422.26	475.96	529.68	546.34	610.24	674.12	466.70	524.12	581.52	696.36	764.88	833.40	577.82	642.64	707.46
79	511.16	574.12	637.08	463.00	520.42	577.82	590.78	660.24	729.68	514.86	577.82	640.80	740.80	813.02	885.26	624.12	693.58	763.02
80				514.86	577.82					551.90	618.56					668.58	741.72	
81				559.30	625.98					594.50	665.80					718.58	796.36	
82				607.46	679.68					638.94	715.80					764.88	847.30	
83				659.32	737.10					683.38	765.80					813.02	899.14	
84				707.46	790.80					729.68	816.74					859.32	950.08	

SERFF Tracking #:

AERS-129957562

State Tracking #:

AERS-129957562

Company Tracking #:

30160A32100 RS 2015

State: Pennsylvania

Filing Company:

RiverSource Life Insurance Company

TOI/Sub-TOI: LTC03I Individual Long Term Care/LTC03I.001 Qualified

Product Name: Long Term Care

Project Name/Number: 30160A32100 RS 2015/30160A32100 RS 2015

Supporting Document Schedules

Satisfied - Item:	Transmittal Letter (A&H)
Comments:	
Attachment(s):	PA CovLtr_30160A_32100_RS_20150623.pdf
Item Status:	
Status Date:	

Bypassed - Item:	Actuarial Certification (A&H)
Bypass Reason:	na
Attachment(s):	
Item Status:	
Status Date:	

Satisfied - Item:	Actuarial Memorandum and Explanatory Information (A&H)
Comments:	
Attachment(s):	PA ActMem_30160A_32100_RS_20150623.pdf PA Supplement_to_ActMem_30160A_32100_RS_20150623.pdf PA Supplement_Exhibits_30160A_32100_RS_20150623.xlsx
Item Status:	
Status Date:	

Bypassed - Item:	Advertisements (A&H)
Bypass Reason:	na
Attachment(s):	
Item Status:	
Status Date:	

Bypassed - Item:	Authorization to File (A&H)
Bypass Reason:	na
Attachment(s):	
Item Status:	
Status Date:	

Bypassed - Item:	Insert Page Explanation (A&H)
Bypass Reason:	na
Attachment(s):	

SERFF Tracking #:

AERS-129957562

State Tracking #:

AERS-129957562

Company Tracking #:

30160A32100 RS 2015

State: Pennsylvania

Filing Company:

RiverSource Life Insurance Company

TOI/Sub-TOI: LTC03I Individual Long Term Care/LTC03I.001 Qualified

Product Name: Long Term Care

Project Name/Number: 30160A32100 RS 2015/30160A32100 RS 2015

Item Status:	
Status Date:	
Bypassed - Item:	Rate Table (A&H)
Bypass Reason:	na
Attachment(s):	
Item Status:	
Status Date:	
Bypassed - Item:	Replacement Form with Highlighted Changes (A&H)
Bypass Reason:	na
Attachment(s):	
Item Status:	
Status Date:	
Bypassed - Item:	Reserve Calculation (A&H)
Bypass Reason:	na
Attachment(s):	
Item Status:	
Status Date:	
Bypassed - Item:	Variability Explanation (A&H)
Bypass Reason:	na
Attachment(s):	
Item Status:	
Status Date:	
Satisfied - Item:	Third Party Document
Comments:	
Attachment(s):	Milliman_Involvement_PA_RS30160A_32100_RS_20150623.pdf
Item Status:	
Status Date:	
Satisfied - Item:	Policy Forms
Comments:	Sample Policyholder letters attached.

SERFF Tracking #:

AERS-129957562

State Tracking #:

AERS-129957562

Company Tracking #:

30160A32100 RS 2015

State:

Pennsylvania

Filing Company:

RiverSource Life Insurance Company

TOI/Sub-TOI:

LTC03I Individual Long Term Care/LTC03I.001 Qualified

Product Name:

Long Term Care

Project Name/Number:

30160A32100 RS 2015/30160A32100 RS 2015

Attachment(s):	30273A.pdf 30274A.pdf 30165A-PA.pdf 30160A-PA.pdf 32100-PA.pdf
Item Status:	
Status Date:	

SERFF Tracking #: AERS-129957562 **State Tracking #:** AERS-129957562 **Company Tracking #:** 30160A32100 RS 2015

State: Pennsylvania **Filing Company:** RiverSource Life Insurance Company
TOI/Sub-TOI: LTC03I Individual Long Term Care/LTC03I.001 Qualified
Product Name: Long Term Care
Project Name/Number: 30160A32100 RS 2015/30160A32100 RS 2015

Attachment PA Supplement_Exhibits_30160A_32100_RS_20150623.xlsx is not a PDF document and cannot be reproduced here.

June 23, 2015

Honorable Teresa D. Miller
Insurance Commissioner
Pennsylvania Insurance Department
1326 Strawberry Square
Harrisburg, Pennsylvania 17120

RE: RiverSource Life Insurance Company ("RiverSource Life")
Company NAIC # 65005
Company FEIN # 41-0823832
SERFF Tracking # AERS-129957562
Policy Form: Long Term Care Policy Form 30160A-PA
Long Term Care Insurance Endorsement Form 32100-PA

Dear Commissioner Miller:

The referenced rate filing is being submitted by RiverSource Life Insurance Company (previously IDS Life Insurance Company) for your review.

30160A-PA, subject to endorsement form 32100-PA, is an existing individual policy form providing benefits for confinement in a nursing home with home care services and was previously approved in 2000. The form, with endorsement, was introduced for all policies with application date May 19, 2000 and later and was issued in Pennsylvania from June 2000 through March 2003, and is no longer being marketed in any state and, outside of Pennsylvania, was last issued in 2003. This rate filing does not apply to policies without the endorsement.

Some policies on form 30160A-PA with endorsement 32100-PA were issued before the September 16, 2002 effective date of rate stability requirements in Pennsylvania. This filing is only applicable to policies issued with endorsement on or after September 16, 2002.

The company is requesting the approval of a premium rate increase of 85.2% on the above listed form and all associated riders for policies issued in Pennsylvania on or after September 16, 2002 with endorsement form 32100-PA.

As noted in the attached actuarial memorandum, there have been no previous rate revisions on this form for policies issued on or after September 16, 2002.

The company will offer insureds affected by the premium increase the option of reducing their policy benefit to provide flexibility of choice for those insureds who wish to maintain a premium level reasonably similar to what they were paying prior to the rate increase.

If the requested 85.2% increase is approved, the company will offer insureds a contingent nonforfeiture benefit in accordance with the requirements set forth in Pennsylvania Code §89a.123.

The following electronic items are included in this submission:

- this cover letter;
- a letter from Milliman Inc. describing their involvement and review of this filing;
- an Actuarial Memorandum and Rate Schedules;
- a Supplement to the Actuarial Memorandum;
- a copy of policy form 30160A-PA, endorsement form 32100-PA, Simple Benefit Increase Option Rider 30273A, Compound Benefit Increase Option Rider 30274A, Nonforfeiture Benefit Rider 30165A-PA; and
- a Microsoft Excel spreadsheet containing all numerical data.

The required retaliatory filing fee of \$125 will be paid via Electronic Funds Transfer (EFT).

The contact person for this filing is:

Cheryl Meyer
Senior Contract Analyst
9550 Ameriprise Financial Center
Minneapolis, MN 55474
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Thank you for your assistance in reviewing this filing.

Respectfully,



Anju Gupta-Lavey, FSA, MAAA
Director - Actuary
RiverSource Life Insurance Company

Enclosures

RIVERSOURCE LIFE INSURANCE COMPANY

Address: 227 Ameriprise Financial Center, Minneapolis MN 55474

Actuarial Memorandum for 30160A, Subject to Endorsement Form 32100

June 2015

Policy form 30160A-PA, subject to endorsement form 32100-PA, is an individual policy form providing benefits to individuals for confinement in a nursing home with home care services. This form was issued in Pennsylvania from June 15, 2000 to March 15, 2003; however, this filing is only applicable to policies issued on or after September 16, 2002.

1. Purpose of Filing

This actuarial memorandum has been prepared for the purpose of demonstrating that the requested rate increase of this product meets the minimum requirements of your state and may not be suitable for other purposes.

2. Description of Benefits

This is a federally tax qualified, individually underwritten policy form that provides comprehensive long term care coverage. Benefits are payable for nursing home and assisted living facility (ALF) care, home and community care, adult day care, respite care, caregiver training, and case management services. Equipment purchase benefits are also included with a lifetime maximum of 50 times the home and community care daily maximum benefit amount. Benefits may be payable for other supplies and services if they are specified in an alternate plan of care agreed to by the insured, the insured's physician and RiverSource Life Insurance Company ("RiverSource Life").

This policy reimburses expenses incurred by the insured subject to the amount of coverage purchased. The facility care daily maximum benefit (FCDMB) is elected by the proposed insured at the time of application. This facility care daily maximum benefit amount is applied to nursing home, ALF, bed reservation, respite care, and alternative plan of care benefits. The home and community care daily maximum benefit amount is also elected by the proposed insured at the time of application and is a percentage (50%, 75%, or 100%) of the facility care daily maximum benefit amount. The home and community care daily maximum benefit amount is applied to home care and adult day care.

A lifetime maximum benefit amount is also elected at the time of application. This establishes the maximum amount that will be paid under the policy for the combined total of all benefit payments. The choices are 730 x FCDMB, 1,460 x FCDMB, 2,190 x FCDMB, and unlimited.

INFLATION PROTECTION

At the time of application the proposed insured can elect no benefit increase, the simple benefit increase option, or the compound benefit increase option. The simple benefit increase option will increase the daily maximum benefit amounts (both facility and home and community care amounts) by 5% of the original daily maximum benefit amount each year starting with the second policy year and continuing for the life of the policy, while the compound benefit increase option will increase the previous year's daily maximum benefit amounts (both the facility and home and community care amounts) by 5% each year starting with the second policy year and continuing for the life of the policy. The increasing benefits apply even when the policy is in claim status. Also, the remaining lifetime maximum benefit amount, before the increase, will increase each policy year by

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the same percentage that the facility care daily maximum benefit amount increases. When the total amount paid under a policy is equal to the current lifetime maximum benefit amount, the policy is terminated.

ELIMINATION PERIOD

Benefit payments commence after an elimination period of 20 or 90 days of service, depending on the plan initially chosen. Satisfaction of the elimination period begins with the first day on which benefit eligibility is established and expenses are incurred for which payment would be made if there were no elimination period. Only days in which services are used are credited toward satisfaction of the elimination period. These days do not need to be consecutive, but they must occur within a continuous period of three times the number of days in the elimination period. Only one elimination period needs to be satisfied during the lifetime of the policy.

The elimination period applies to all policy benefits except caregiver training, case management, equipment purchase, and respite care. Days for which the only expenses incurred are expenses that are not subject to the elimination period will not be used to satisfy the elimination period.

BENEFIT ELIGIBILITY AND CONDITIONS

A licensed health care practitioner must certify the following eligibility conditions at least annually. Benefit eligibility is based on the following: (a) the insured being unable to perform at least 2 or more of the following 6 activities of daily living (ADLs): (1) eating, (2) toileting, (3) transferring, (4) dressing, (5) continence, and (6) bathing, without substantial assistance for a period of at least 90 days due to a loss of functional capacity, or (b) severe cognitive impairment requiring substantial supervision, or (c) the insured having a level of disability similar to that described in (a) above, based on standards established by the Secretary of the Treasury.

A Medicare non-duplication provision excludes benefits that otherwise would be paid but for the application of a Medicare deductible or coinsurance amount.

FACILITY CARE BENEFITS

Facility care benefits are payable for nursing home confinement, whether skilled, intermediate, or custodial levels of care are received. Hospital confinement is not a prerequisite for benefit entitlement. Once benefit eligibility is established and the elimination period is satisfied, expenses incurred as a resident inpatient in a nursing home will be reimbursed up to the facility care daily maximum benefit amount that applies on the day expenses are incurred.

Facility care benefits are also payable for stays in a qualified ALF. A qualified ALF is one that has a minimum of 8 inpatients and has a 24-hour awake, trained, and ready to respond staff. Once benefit eligibility is established and the elimination period is satisfied, expenses incurred as a resident inpatient in an ALF will be reimbursed up to the facility care daily maximum benefit amount that applies on the day expenses are incurred.

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Premium payments will be waived during extended nursing home and ALF stays. This waiver begins after 90 days of confinement (including during the elimination period) in a nursing home or ALF. These days do not need to be consecutive, but they must occur within a continuous period of 180 days. The waiver stops once nursing home and ALF benefits cease.

If a temporary hospitalization is required during a period of confinement in a nursing home or ALF and there is a charge to reserve a bed in the facility, this policy will pay the facility care daily maximum benefit amount for up to 21 days per policy year. These days also count towards satisfying the elimination period.

HOME CARE BENEFITS

Home care benefits covered at 100% of the home and community care daily maximum benefit amount are services provided by a nurse, a licensed physical, occupational or speech therapist, a home health aide, a personal care attendant, and adult day care. Home care benefits covered at 80% of the home and community care daily maximum benefit amount are homemaker and chore services. These expenses will be reimbursed subject to the percent of the home and community care daily maximum benefit amount listed above on the day expenses are incurred.

Premium payments will be reimbursed on a month-to-month basis during extended periods of home and community care. This premium waiver begins after expenses for home and community care services, excluding homemaker and chore services, have been incurred for 90 days. The expenses may be incurred while the elimination period is being satisfied or policy benefits are being received. These days do not need to be consecutive, but they must occur within a continuous period of 270 days. The premiums will continue to be reimbursed for each month in which at least 12 days of home and community care services, excluding homemaker and chore services, are received.

ADDITIONAL BENEFITS

Benefits in this section do not count against either the facility or home and community care daily maximum benefit amounts. They are, however, deducted from the lifetime maximum benefit amount, except for certain case management services described below. These expenses are not subject to the elimination period and they may not be used to satisfy the elimination period.

Expenses incurred for the first 14 days of respite care received during a policy year will be reimbursed subject to the facility care daily maximum benefit amount that applies on the day expenses are incurred.

Pre-approved equipment purchase expenses will be reimbursed up to a lifetime maximum of 50 times the home and community care daily maximum benefit amount. This equipment must be expected to help the insured remain in their home for at least 90 days.

Caregiver training expenses will be reimbursed up to a lifetime maximum of 5 times the home and community care daily maximum benefit amount.

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The initial assessment fee for case management services is reimbursable, but to the extent it exceeds 5 times the facility care daily maximum benefit amount, it will be deducted from the lifetime maximum benefit amount. Other fees charged for case management services are reimbursable, but to the extent they exceed 2 times the facility care daily maximum benefit amount per use, they are deducted from the lifetime maximum benefit amount.

NONFORFEITURE BENEFIT RIDER

At issue, the insured has the option to select a nonforfeiture benefit rider. The nonforfeiture benefit rider provides a reduced lifetime maximum benefit amount upon lapse. The facility and home and community care daily maximum benefit amounts will continue at the same level as of the date of lapse, regardless of whether a benefit increase option was selected by the insured at issue.

The nonforfeiture benefit will begin if the policy terminates due to nonpayment of premium after the policy and rider have been in force for at least 3 years. The reduced lifetime maximum benefit amount is determined as the sum of all premiums paid at the time of lapse, including the premiums for the nonforfeiture benefit rider. The reduced lifetime maximum benefit amount will not be less than 30 times the facility care daily maximum benefit amount at the time of lapse. However, in no case will the sum of the benefits paid during the premium paying period and the reduced lifetime maximum benefit amount exceed the lifetime maximum benefit amount at time of lapse.

The provisions for the benefit are at least as favorable as those prescribed by the 1996 NAIC Model Regulation.

3. Renewability

This policy form is guaranteed renewable for life.

4. Applicability

This filing is applicable to inforce policies issued on or after September 16, 2002 with endorsement form 32100-PA only, as this policy form is no longer being sold in the market.

5. Actuarial Assumptions

Exhibit I provides a comparison of the original pricing assumptions and the current assumptions used in this filing for mortality, lapses, morbidity and interest.

Exhibits II, III, IV and V provide experience analysis summaries for morbidity, mortality and lapse in support of the current rate increase assumptions.

The following discussion describes the actuarial assumptions used in the current rate increase analysis and summarizes our experience analysis in support of these current rate increase assumptions as well as the company's management of this block of

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business. We believe the current assumptions are justified by the underlying experience and that the changed assumptions from original pricing are reasonable.

Morbidity

Expected claim costs are the product of original pricing expected claim costs and an actual-to-expected adjustment factor.

Starting in 1989, RiverSource Life marketed nursing home policies with a zero day prior hospitalization requirement. Using the emerging experience on this business, statistics from the "1985 National Nursing Home Survey" published by the National Center for Health Statistics, and input provided from RiverSource Life's reinsurer, the expected frequencies and severities of claims were developed for nursing home benefits. Incidence rates by issue age and duration were developed to reflect the effects of underwriting on nursing home claims incidence. It was understood that the underwriting process would include an assessment of functional and cognitive abilities if considered appropriate.

Starting in 1990, RiverSource Life also marketed home health care benefit riders. At the time of original pricing, only limited insured experience was available for home and community care benefits. Therefore the expected claim costs for these benefits were derived from general population data with the assistance of RiverSource Life's reinsurer. Both the incidence rates and the length of home care usage for the first two years were determined through analysis of the "1982-1984 National Long Term Care Surveys", which polled elderly people who manifested impairments in ADLs. The home care incidence rates were modified by loading for cognitive impairment as a benefit trigger.

The data from the "1985 National Nursing Home Survey" was used to extrapolate the length of home care usage after the first two years. Additionally, experience data from continuing care retirement communities was used to verify the claim cost assumptions and to provide guidance in translating general population experience to anticipated insured population experience. Incidence rates by issue age and duration were developed to reflect the effects of underwriting on home care claims incidence.

Claim costs for the Benefit Increase Options were based on these claim costs with the benefit loaded to reflect the scheduled increases in benefits. The nonforfeiture benefit claim costs were determined by assumptions consistent with those used in establishing premium rates. The above described experience was also used to determine marital discounts.

It should be recognized that considerable judgment was made with respect to expected claim costs, especially for non-institutional benefits. After using all available data, total expected claim costs were developed that represented reasonable estimates of aggregate long term care experience under the applicable underwriting criteria.

The following selection factors were used:

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Duration	Issue Age Band			
	40-59	60-69	70-79	80+
1	40%	35%	30%	20%
2	50%	55%	60%	80%
3	55%	60%	75%	100%
4	60%	65%	90%	100%
5	65%	70%	100%	100%
6	70%	75%	100%	100%
7	75%	80%	100%	100%
8	80%	90%	100%	100%
9	90%	100%	100%	100%
10+	100%	100%	100%	100%

Actual-to-expected adjustment factors have been developed from actual emerging experience through anniversaries ending December 2013 and are shown in the following tables:

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Lifetime Benefit Actual-to-Expected Adjustment Factors

Duration	Age at Issue						
	<53	53-57	58-62	63-67	68-72	73-77	78+
1	0.10	0.35	0.35	1.00	1.10	1.35	1.60
2	0.10	0.35	0.35	1.00	1.10	1.35	1.60
3	0.10	0.35	0.35	1.00	1.10	1.35	1.60
4	0.10	0.35	0.35	1.00	1.10	1.35	1.60
5	0.10	0.35	0.35	1.00	1.10	1.35	1.60
6	0.15	0.35	0.40	1.00	1.15	1.35	1.60
7	0.15	0.35	0.40	1.00	1.15	1.35	1.60
8	0.15	0.35	0.40	1.00	1.15	1.35	1.60
9	0.15	0.35	0.40	1.00	1.15	1.35	1.60
10	0.15	0.35	0.50	1.05	1.20	1.40	1.60
11	0.25	0.35	0.70	1.05	1.20	1.40	1.60
12	0.25	0.35	0.70	1.05	1.20	1.40	1.60
13	0.25	0.35	0.70	1.05	1.20	1.40	1.60
14	0.25	0.35	0.70	1.05	1.20	1.40	1.60
15	0.25	0.35	0.70	1.05	1.20	1.40	1.60
16	0.35	0.60	0.80	1.10	1.25	1.55	1.75
17	0.35	0.60	0.80	1.10	1.25	1.55	1.75
18	0.35	0.60	0.80	1.10	1.25	1.55	1.75
19	0.35	0.60	0.80	1.10	1.25	1.55	1.75
20	0.35	0.60	0.80	1.10	1.25	1.55	1.75
21	0.60	0.80	0.90	1.10	1.25	1.75	2.00
22	0.60	0.80	0.90	1.10	1.25	1.75	2.00
23	0.60	0.80	0.90	1.10	1.25	1.75	2.00
24	0.60	0.80	0.90	1.10	1.25	1.75	2.00
25	0.60	0.80	0.90	1.10	1.25	1.75	2.00
26	0.85	0.90	1.00	1.10	1.25	2.00	2.00
27	0.85	0.90	1.00	1.10	1.25	2.00	2.00
28	0.85	0.90	1.00	1.10	1.25	2.00	2.00
29	0.85	0.90	1.00	1.10	1.25	2.00	2.00
30	0.85	0.90	1.00	1.10	1.25	2.00	2.00
31	0.90	1.00	1.05	1.10	1.25	2.10	2.05
32	0.93	1.00	1.05	1.10	1.25	2.10	2.05
33	0.95	1.00	1.05	1.10	1.25	2.10	2.05
34	0.98	1.00	1.05	1.10	1.25	2.10	2.05
35+	1.00	1.00	1.05	1.10	1.25	2.10	2.05

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Non-Lifetime Benefit Actual-to-Expected Adjustment Factors

Duration	Age at Issue							
	<53	53-57	58-62	63-67	68-72	73-77	78-82	83+
1	0.10	0.10	0.20	0.20	0.45	0.65	0.70	1.50
2	0.10	0.10	0.25	0.30	0.45	0.85	0.90	1.60
3	0.15	0.15	0.30	0.35	0.55	1.05	0.90	1.70
4	0.20	0.20	0.40	0.35	0.80	1.15	1.10	2.15
5	0.25	0.25	0.45	0.45	0.80	1.40	1.40	2.15
6	0.30	0.35	0.50	0.60	1.00	1.40	1.85	2.15
7	0.30	0.40	0.55	0.75	1.05	1.45	2.05	2.15
8	0.30	0.45	0.60	0.85	1.15	1.55	2.30	2.15
9	0.35	0.55	0.75	0.95	1.20	1.70	2.60	2.20
10	0.40	0.55	0.80	1.00	1.25	1.70	2.60	2.20
11	0.40	0.55	0.90	1.05	1.25	1.75	2.65	2.20
12	0.40	0.55	0.90	1.05	1.25	1.75	2.65	2.20
13	0.40	0.55	0.90	1.05	1.25	1.75	2.65	2.20
14	0.40	0.55	0.90	1.05	1.25	1.75	2.65	2.20
15	0.45	0.55	0.95	1.05	1.25	1.75	2.65	2.20
16	0.45	0.55	0.95	1.05	1.25	1.75	2.65	2.20
17	0.50	0.60	0.95	1.05	1.25	1.75	2.65	2.20
18	0.50	0.65	0.95	1.05	1.25	1.75	2.65	2.20
19	0.55	0.70	0.95	1.05	1.25	1.80	2.65	2.20
20	0.55	0.80	0.95	1.05	1.25	1.80	2.65	2.20
21	0.60	0.80	0.95	1.05	1.25	1.80	2.70	2.20
22	0.60	0.85	0.95	1.05	1.25	1.80	2.70	2.20
23	0.65	0.85	1.00	1.05	1.25	1.80	2.70	2.20
24	0.65	0.90	1.00	1.05	1.25	1.90	2.70	2.20
25	0.70	0.90	1.00	1.05	1.25	1.90	2.70	2.20
26	0.75	0.95	1.00	1.05	1.25	1.90	2.70	2.20
27	0.80	0.95	1.00	1.05	1.25	1.90	2.70	2.20
28	0.85	1.00	1.00	1.05	1.25	1.90	2.70	2.20
29	0.90	1.00	1.05	1.05	1.25	2.00	2.70	2.20
30	0.90	1.00	1.05	1.05	1.25	2.00	2.70	2.20
31	0.95	1.00	1.05	1.08	1.25	2.00	2.70	2.20
32	0.95	1.00	1.05	1.08	1.25	2.00	2.70	2.20
33	0.95	1.00	1.05	1.08	1.25	2.00	2.70	2.20
34	0.95	1.00	1.05	1.08	1.25	2.00	2.70	2.20
35+	1.00	1.00	1.05	1.10	1.25	2.00	2.70	2.20

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Beginning in 2003, we have taken steps to improve claim experience by reviewing and tightening claim adjudication and care coordination practices where possible. To reflect these improvements, we have reduced our expected claim costs by 5% for 2004 and later.

We conduct a morbidity study every year to analyze the current actual-to-expected adjustment factors (A/E factors). Our analysis is done on a claim cost basis, rather than on a frequency and severity basis, which is not readily available.

The morbidity study is performed by comparing actual incurred claims to expected incurred claims, where expected claims reflect the original pricing claim costs adjusted with the company's most recent set of A/E factors. If the resulting cumulative actual-to-expected ratio is near 100% while minimizing the squared error, no changes are made to the A/E factors. However, if the actual-to-expected ratio has shifted away from 100% or the squared error is too high, we develop a new set of A/E factors and retest them until a good fit is found (measured by actual-to-expected ratio and squared error).

Exhibit II displays "expected" experience using our current adjustment factors compared to actual incurred claims. The expected basis shown in this exhibit reflects the currently assumed claim costs. As shown in Exhibit II, the total actual-to-expected ratio using the A/E factors described above is 101.6%. This experience is based on 1,843 actual claims (583 lifetime and 1,260 non-lifetime). Actual claim counts split by issue age band are also displayed in Exhibit II.

Professional judgment was applied to create factors for periods beyond that for which there is experience. It has been credibly observed on older forms, including 30160A subject to endorsement form 32100, that experience has been favorable at younger attained ages but much worse than priced for at older attained ages. Thus, we believe A/E factors that increase by duration are appropriate.

Mortality

Durational mortality selection factors were developed from actual experience on all long-term care ("LTC") forms combined and are applied to the 1983 Individual Annuity Mortality (IAM) Basic table.

Exhibit III is based on deaths on all LTC policies incurred from policy anniversaries in 2000 through policy anniversaries in 2013. The expected basis shown in this exhibit reflects 1983 IAM Basic mortality with the currently assumed selection factors. The selection factors fit the observed data very well with the resulting A/E at or near 100%.

The data was used in the development of the current selection factors, subject to the constraints that the factors must be non-decreasing by duration and cannot exceed 100%.

Selection factors are assumed to differ by issue age band, since the selection period is expected to be shorter at older issue ages.

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At the older issue ages, mortality increases to approximately 100% of the table. In general, that has not been the case through duration 23 for younger issue ages, but we expect that it would as insureds reach a very advanced age. For this reason the effect of selection is extended up to duration 34 for younger issue ages. This experience includes 40,344 deaths.

Lapse Rates

Ultimate lapse rates range from 1.1% to 6.0% based on issue age band and benefit category (lifetime and non-lifetime). In the year of rate increase notification to policyholders, an additional 2.8% of inforce policyholders is assumed to lapse, and a 3.0% reduction in benefits due to election of reduced benefit options is also assumed. Exhibit IV provides the additional lapses and risk amount reductions experienced by the company at different levels of rate increase.

Exhibit V provides the lapse experience across all LTC forms combined from policy anniversaries in 2000 through policy anniversaries in 2013. The expected basis shown in this exhibit reflects the currently assumed lapse rates.

Lapse experience varies by issue age and benefit type (lifetime benefit versus non-lifetime benefit). We applied judgment to the data contained in this exhibit to derive the best estimate lapse assumption. For later durations, we often looked at several durations' experience together to improve credibility. We also made an effort to reflect that lapse rates seem to increase some at older attained ages. This experience includes 35,596 lapses, including 11,061 in durations 8 and later. The exposure and actual lapses close to the implementation of rate increases are excluded from this analysis. For non-lifetime benefits, lapses include policies that have maximized their benefits.

We have experienced much stronger customer loyalty than anticipated at the time these policy forms were initially priced. The resulting high policy persistency has unfortunately had an adverse impact on loss ratios.

Adverse Selection

5.8% in the year of rate increase notification to policyholders, grading down to 0% in the 7th year after rate increase notification.

Expenses

Expenses have not been explicitly projected. It is assumed that the originally filed expense assumptions remain appropriate, except that renewal commission rates were periodically reduced from 2008 through 2013.

The above assumptions are based on actual inforce experience of RiverSource Life and are deemed reasonable for this particular policy form; they do not include any provision for profit or contingencies. The assumptions used in this filing are considered best-estimate and do not reflect moderately adverse conditions.

In establishing the assumptions described in this section, the policy design, underwriting and claims adjudication practices for this particular policy form was taken into consideration.

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RiverSource Life does not currently market any stand-alone LTC policies in Pennsylvania or any other state. Therefore, the requirement to provide a comparison of the projection assumptions used in this filing with those used for pricing new business is not applicable.

6. Marketing Method

This policy form was marketed by agents of RiverSource Life.

7. Underwriting Description

This policy form was fully underwritten with the use of various underwriting tools in addition to the application, which may have included medical records, an attending physician's statement, telephone interview and/or face-to-face assessment.

8. Premiums

Premiums are unisex and payable for life. The premiums vary by issue age, the initial amount of the facility and home and community care daily maximum benefit amounts, the maximum lifetime benefit amount, the elimination period, the Benefit Increase Option, and marital status at issue.

9. Issue Age Range

The issue ages are from 40 to 79 except for the benefit structures with 90-day elimination period, 2- or 4-year maximum policy benefit, and home and community care daily maximum 50% or 75% of facility care daily maximum, which are issued to age 84.

10. Area Factors

Area factors are not used for this product.

11. Premium Modalization Rules

The following modal factors and nationwide percent distributions (based on inforce count as of 12/31/2014) are applied to the annual premium (AP):

Premium Mode	Modal Factors	Percent Distribution
Annual	$1.0000*AP + 0.0$	39.8%
Semi-Annual	$0.5020*AP + 0.4$	6.2%
Quarterly	$0.2580*AP + 0.5$	7.1%
Monthly	$0.0868*AP + 0.6$	46.9%

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12. Active Life Reserves

Active life reserves, although they have significant impact, have not been used in this rate increase analysis, except as described in the Supplement to the Actuarial Memorandum.

13. Trend Assumptions

As this is not medical insurance, we have not included any explicit medical cost trends in the projections.

14. Past and Future Policy Experience

Nationwide experience for policy form 30160A, subject to endorsement form 32100, is shown in Exhibit VI, assuming that there have been no previous rate increases implemented on any policy.

Historical experience is shown by claim incurral year with the loss ratio for each calendar year. The following formula provides an illustration of the historical loss ratio calculation for each calendar year:

$$LR_j = \frac{\sum_k \sum_t {}_j Pmt_t^k * v^{t-k} + \sum_k ({}_j CR_{ValDate}^k + {}_j IBNR_{ValDate}^k) * v^{ValDate-k}}{EP_j}$$

LR_j = loss ratio for year j

${}_j Pmt_t^k$ = claim payments at time t on claims incurred at time k in year j

${}_j CR_{ValDate}^k$ = open claim reserve held on December 31, 2014 for claims incurred at time k in year j

${}_j IBNR_{ValDate}^k$ = incurred but not reported reserve as of December 31, 2014 attributable to claims incurred at time k in year j

EP_j = earned premium in year j

$ValDate$ = December 31, 2014

j = year of claim incurral

k = date of claim incurral

t = date of claim payment

$v = 1 / 1.045 = 0.956938$

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A historical annual loss ratio is calculated, with and without interest, as historical incurred claims divided by historical earned premiums. Actual historical earned premiums used in Exhibit VI are calculated based on the issue and, if appropriate, termination date for each policy. Actual historical incurred claims used in Exhibit VI are determined by discounting claim payments and open claim reserves to the actual original loss date for each claim and by discounting IBNR to the time it is assumed to occur. These items are then summed to produce a total for each calendar year. For purposes of accumulating historical experience for a historical or for a lifetime loss ratio calculation, these calendar year totals are assumed to represent a mid-year value.

A future annual loss ratio is calculated, with and without interest, as anticipated incurred claims divided by anticipated earned premiums. The anticipated incurred claims and earned premiums are projected on a seriatim basis and then summed to produce a total for each calendar year. For purposes of accumulating experience for an anticipated or for a lifetime loss ratio calculation, these calendar year totals are assumed to represent a mid-year value.

A lifetime loss ratio as of December 31, 2014 is calculated as the sum of accumulated historical experience and discounted future experience where accumulation and discounting of the total for each calendar year occur at 4.5% and assume mid-year values.

15. History of Previous Rate Revisions

There have been no previous rate revisions on this form, for policies issued on or after September 16, 2002.

The actual and projected premiums in Exhibit VI assume that no previous rate increases implemented on any policies on a Pennsylvania and nationwide basis.

16. Analysis Performed to Consider a Rate Increase

The initial premium schedule was based on pricing assumptions believed to be appropriate, based on the company's experience when the initial rate schedule was developed. The original pricing assumptions for morbidity, mortality, lapse rates and interest are shown in Exhibit I and were as follows:

Original Pricing Morbidity

See description in Section 5 of this memorandum.

Original Pricing Expected Mortality

1983 Individual Annuity Mortality Basic Table.

Original Pricing Expected Lapse Rates

Original pricing lapse rates varied by issue age and duration, as shown in the following table:

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Duration	Issue Age				
	45	55	65	75	82
1	10%	9%	8%	7%	6%
2	9%	8%	7%	6%	5%
3	8%	7%	6%	5%	4%
4	7%	6%	5%	4%	3%
5	6%	5%	5%	4%	3%
6+	5%	5%	5%	4%	3%

At the time the product was priced, the company's management determined that a rate schedule increase would be considered if experience exhibited deterioration such that the lifetime loss ratio exceeded 73.0%, which is the expected loss ratio at the time of original pricing assuming a 10% deterioration.

As part of the inforce management of this block of business, at least once a year since 1999, the company has performed detailed experience analysis and has continued to revise assumptions for the LTC block of business in light of these analyses. Additionally, since 1999, the company has performed at least annually a gross premium valuation on its LTC blocks of business. An analysis of the projected lifetime loss ratio based on current assumptions compared to those assumed at the time original pricing revealed that experience has deteriorated such that the lifetime loss ratio is much higher than 73.0%.

The assumptions used in this filing described in Section 5 of this memorandum are based on the actual inforce experience of RiverSource Life and are deemed reasonable for this particular policy form. Actual voluntary lapse and mortality have been lower than expected in pricing and actual morbidity experience is worse than expected for older attained ages.

17. Requested Rate Increase and Demonstration of Satisfaction of Loss Ratio Requirements

The company is requesting an increase of 85.2% for policies issued on or after September 16, 2002.

The company's management has indicated that no additional future premium rate increases are anticipated unless experience becomes worse than moderately adverse. Moderately adverse experience is defined as a 10% increase in the future loss ratio, which would produce an 85.5% lifetime loss ratio. This is equivalent to an 8.5% increase in the lifetime loss ratio, due to any combination of deterioration in the experience from that expected based on the current best-estimate assumptions described in Section 5 of this memorandum.

Exhibit VII provides a demonstration that the sum of the accumulated value of incurred claims without the inclusion of active life reserves, and the present value of future incurred claims, without the inclusion of active life reserves, will not be less than the sum of the following:

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1. Accumulated value of the initial earned premiums times 58%,
2. 85% of the accumulated value of premium rate schedule increases,
3. Present value of the future projected initial earned premiums times 58%, and
4. 85% of the present value of future projected premiums in excess of the projected initial earned premiums.

The future projected incurred claims in Exhibit VII are increased by 10% from the best-estimate projections in Exhibit VI to reflect assumptions that include moderately adverse conditions. A 10% increase in future incurred claims was determined as one scenario that results in a 10% increase in the future loss ratio (which is the definition of moderately adverse experience as defined above). It is among many possible alternative moderately adverse experience scenarios, but is considered one of the simplest since it involves only one assumption shift.

Present and accumulated values in Exhibit VII are determined at 4.5%, which is the maximum valuation rate for contract reserves for this policy form.

Corresponding rate tables are included with this memorandum in Exhibit VIII.

RiverSource Life does not currently market any stand-alone LTC policies in Pennsylvania or any other state. Therefore, the required statement that the renewal premium rate schedules with the requested 85.2% increase are not greater than new business premium rate schedules is not applicable.

18. Pennsylvania Average Annual Premium for Policies Issued On or After September 16, 2002 (Annual Premium Based on December 31, 2014 Inforce)

Before increase: \$1,467
After increase: \$2,718

19. Proposed Effective Date

This rate increase will apply to policies on their policy anniversary date following a 60-day policyholder notification period.

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20. Nationwide Distribution of Business as of 12/31/2014 (based on inforce count)

By Issue Age:

Issue Ages	Percent Distribution
<55	38.0%
55-59	27.9%
60-64	20.6%
65-69	9.0%
70-74	3.3%
75-79	1.1%
>79	0.1%

By Elimination Period:

Elimination Period	Percent Distribution
20-day	19.1%
90-day	80.9%

By Benefit Period:

Benefit Period	Percent Distribution
2-Year	2.9%
4-Year	29.3%
6-Year	30.8%
Unlimited	37.0%

By Inflation Protection Option:

Inflation Option	Percent Distribution
None	6.0%
Simple	35.5%
Compound	58.5%

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21. Number of Policyholders

As of 12/31/2014, the number of policies and annual premium inforce, assuming there have been no previous premium increases in both the state* and nationwide, is:

	Number of Insured	Annual Premium
Pennsylvania:		
Issued before September 16, 2002	1,499	\$2,837,818*
Issued September 16, 2002 and later	256	375,645
Nationwide	29,233	\$41,199,707

* The premium for Pennsylvania policies issued prior to September 16, 2002 only reflects the cumulative 33.1% premium increases that have been previously approved for these policies.

22. Actuarial Certification

I am a Fellow of the Society of Actuaries and a Member of the American Academy of Actuaries, and I meet the Academy's qualification standards for preparing health rate filings and to render the actuarial opinion contained herein.

I believe this rate filing is in compliance with the applicable laws of the State of Pennsylvania and with the rules of the Department. This memorandum has been prepared in conformity with all applicable Actuarial Standards of Practice, including ASOP No. 8.

I hereby certify that, to the best of my knowledge and judgment, this rate submission is in compliance with the applicable laws and regulations of the state where it is filed. Furthermore, the actuarial assumptions are appropriate. In my opinion, the rates are not excessive or unfairly discriminatory. I hereby certify that, if the requested 85.2% premium rate schedule increase is implemented and the underlying assumptions, which reflect moderately adverse conditions, are realized, no further premium rate schedule increases are anticipated.



Anju Gupta-Lavey, FSA, MAAA
Director - Actuary
RiverSource Life Insurance Company
Date: June 23, 2015

EXHIBIT I
RiverSource Life Insurance Company
Original Pricing & Current Assumptions Comparison

Policy Form: 30160A, Subject to Endorsement Form 32100

Original Pricing Assumptions:

Mortality: 1983 Individual Annuity Mortality Table

Lapse Rates:

Duration	Issue Age				
	45	55	65	75	82
1	10%	9%	8%	7%	6%
2	9%	8%	7%	6%	5%
3	8%	7%	6%	5%	4%
4	7%	6%	5%	4%	3%
5	6%	5%	5%	4%	3%
6+	5%	5%	5%	4%	3%

Morbidity:

Starting in 1989, RiverSource Life marketed nursing home policies with a zero day prior hospitalization requirement. Using the emerging experience on this business, statistics from the "1985 National Nursing Home Survey" published by the National Center for Health Statistics, and input provided from RiverSource Life's reinsurer, the expected frequencies and severities of claims were developed for nursing home benefits. Incidence rates by issue age and duration were developed to reflect the effects of underwriting on nursing home claims incidence. It was understood that the underwriting process would include an assessment of functional and cognitive abilities if considered appropriate.

Starting in 1990, RiverSource Life also marketed home health care benefit riders. At the time of original pricing, only limited insured experience was available for home health and community care benefits. Therefore the expected claim costs for these benefits were derived from general population data with the assistance of RiverSource Life's reinsurer. Both the incidence rates and the length of home health care usage for the first two years were determined through analysis of the "1982-1984 National Long Term Care Surveys", which polled elderly people who manifested impairments in ADLs. The home health care incidence rates were modified by loading for cognitive impairment as a benefit trigger.

The data from the "1985 National Nursing Home Survey" was used to extrapolate the length of home health care usage after the first two years. Additionally, experience data from continuing care retirement communities was used to verify the claim cost assumptions and to provide guidance in translating general population experience to anticipated insured population experience. Incidence rates by issue age and duration were developed to reflect the effects of underwriting on home health care claims incidence.

Claim costs for the Benefit Increase Options were based on these claim costs with the benefit loaded to reflect the scheduled increases in benefits. The nonforfeiture benefit claim costs were determined by assumptions consistent with those used in establishing premium rates. The above described experience was also used to determine marital discounts.

It should be recognized that considerable judgment was made with respect to expected claim costs, especially for non-institutional benefits. After using all available data, total expected claim costs were developed that represented reasonable estimates of aggregate long term care experience under the applicable underwriting criteria.

The following selection factors were used:

Duration	Issue Age Band			
	40-59	60-69	70-79	80+
1	40%	35%	30%	20%
2	50%	55%	60%	80%
3	55%	60%	75%	100%
4	60%	65%	90%	100%
5	65%	70%	100%	100%
6	70%	75%	100%	100%
7	75%	80%	100%	100%
8	80%	90%	100%	100%
9	90%	100%	100%	100%
10+	100%	100%	100%	100%

Interest Rate: 5.0%

EXHIBIT I
RiverSource Life Insurance Company
Original Pricing & Current Assumptions Comparison

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Current Assumptions:

Mortality: 1983 Individual Annuitant Mortality Basic Table with selection consistent with experience

Mortality Selection Factors						
Duration	Issue Age Band					
	<58	58-62	63-67	68-72	73-77	78+
1	20%	20%	25%	20%	20%	25%
2	25%	35%	40%	30%	25%	25%
3	35%	45%	45%	40%	40%	40%
4	40%	50%	45%	45%	45%	45%
5	45%	50%	45%	55%	50%	55%
6	50%	50%	55%	55%	60%	60%
7	50%	55%	60%	60%	65%	65%
8	50%	55%	60%	60%	70%	75%
9	50%	55%	66%	71%	73%	88%
10	55%	66%	66%	74%	73%	88%
11	57%	67%	71%	78%	74%	88%
12	57%	67%	72%	78%	90%	89%
13	57%	67%	75%	83%	90%	92%
14	57%	68%	77%	89%	90%	95%
15	57%	69%	78%	90%	95%	98%
16	64%	69%	81%	90%	95%	100%
17	67%	69%	81%	91%	100%	100%
18	70%	70%	84%	95%	100%	100%
19	72%	70%	85%	96%	100%	100%
20	72%	73%	86%	97%	100%	100%
21	75%	75%	88%	100%	100%	100%
22	80%	77%	90%	100%	100%	100%
23	80%	80%	95%	100%	100%	100%
24	85%	82%	95%	100%	100%	100%
25	85%	85%	100%	100%	100%	100%
26	85%	90%	100%	100%	100%	100%
27	87%	90%	100%	100%	100%	100%
28	87%	95%	100%	100%	100%	100%
29	90%	95%	100%	100%	100%	100%
30	90%	100%	100%	100%	100%	100%
31	90%	100%	100%	100%	100%	100%
32	95%	100%	100%	100%	100%	100%
33	95%	100%	100%	100%	100%	100%
34	95%	100%	100%	100%	100%	100%
35+	100%	100%	100%	100%	100%	100%

EXHIBIT I
RiverSource Life Insurance Company
Original Pricing & Current Assumptions Comparison

Policy Form: 30160A, Subject to Endorsement Form 32100

Current Assumptions (continued):

Lapse Rates:

Lifetime Benefit				Non-Lifetime Benefit			
Duration	Issue Age Band			Duration	Issue Age Band		
	<63	63-72	73+		<63	63-72	73+
1	6.9%	6.8%	7.0%	1	6.9%	7.1%	5.3%
2	6.5%	4.5%	3.5%	2	6.0%	4.8%	4.6%
3	4.8%	3.5%	3.5%	3	4.2%	3.3%	3.1%
4	3.6%	2.6%	1.9%	4	3.1%	2.9%	2.9%
5	2.6%	1.9%	1.3%	5	2.3%	2.0%	2.2%
6	1.9%	1.6%	1.3%	6	1.7%	1.9%	2.1%
7	1.5%	1.1%	1.3%	7	1.5%	1.6%	2.3%
8	1.1%	1.1%	1.3%	8	1.2%	1.4%	2.4%
9	1.1%	1.1%	1.3%	9	1.1%	1.3%	2.5%
10	0.9%	1.2%	1.3%	10	1.0%	1.3%	3.3%
11	0.8%	1.0%	1.4%	11	1.0%	1.5%	3.6%
12	0.7%	0.9%	1.5%	12	0.9%	1.5%	3.9%
13	0.7%	0.9%	1.5%	13	0.8%	1.5%	4.2%
14	0.7%	0.9%	1.6%	14	0.8%	1.5%	5.3%
15	0.6%	0.9%	1.6%	15	0.7%	1.6%	5.3%
16	0.6%	1.0%	1.7%	16	0.7%	1.8%	5.3%
17	0.6%	1.2%	1.7%	17	0.8%	2.0%	5.9%
18	0.6%	1.2%	1.8%	18	1.0%	2.2%	5.9%
19	0.6%	1.2%	1.8%	19	1.1%	2.4%	5.9%
20	0.8%	1.2%	1.9%	20	1.1%	2.7%	5.9%
21	0.8%	1.2%	1.9%	21	1.1%	2.9%	6.0%
22	0.9%	1.2%	2.0%	22	1.1%	3.1%	6.0%
23	0.9%	1.2%	2.0%	23	1.1%	3.4%	6.0%
24	0.9%	1.3%	2.0%	24	1.2%	3.4%	6.0%
25	0.9%	1.3%	2.0%	25	1.4%	3.6%	6.0%
26	0.9%	1.3%	2.0%	26	1.5%	3.8%	6.0%
27	1.0%	1.3%	2.0%	27	1.6%	4.0%	6.0%
28	1.0%	1.3%	2.0%	28	2.1%	4.2%	6.0%
29	1.0%	1.3%	2.0%	29	2.4%	4.4%	6.0%
30	1.0%	1.3%	2.0%	30	2.6%	4.5%	6.0%
31	1.1%	1.3%	2.0%	31	2.9%	4.5%	6.0%
32	1.1%	1.3%	2.0%	32	3.1%	4.5%	6.0%
33	1.1%	1.3%	2.0%	33	3.2%	4.5%	6.0%
34	1.1%	1.3%	2.0%	34	3.3%	4.5%	6.0%
35	1.1%	1.4%	2.0%	35	3.4%	4.5%	6.0%
36	1.1%	1.4%	2.0%	36	3.5%	4.5%	6.0%
37	1.1%	1.4%	2.0%	37	3.5%	4.5%	6.0%
38	1.1%	1.4%	2.0%	38	3.5%	4.5%	6.0%
39	1.1%	1.4%	2.0%	39	3.5%	4.5%	6.0%
40+	1.1%	1.4%	2.0%	40+	3.5%	4.5%	6.0%

In the year of rate increase notification to policyholders, an additional 2.8% of inforce policyholders is assumed to lapse, and a 3.0% reduction in benefits due to election of reduced benefit options is also assumed.

EXHIBIT I
RiverSource Life Insurance Company
Original Pricing & Current Assumptions Comparison

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Current Assumptions (continued):

Morbidity: Expected Claim Costs are the product of original pricing expected claim costs and an actual-to-expected adjustment factor. Actual-to-expected adjustment factors were developed from actual emerging experience through anniversaries ending December 2013. Morbidity used in the projections has also been reduced by 5% for anticipated improved claim experience from changes in claim management starting in 2003.

Lifetime Benefit Actual-to-Expected Adjustment Factors

Duration	Age at Issue						
	<53	53-57	58-62	63-67	68-72	73-77	78+
1	0.10	0.35	0.35	1.00	1.10	1.35	1.60
2	0.10	0.35	0.35	1.00	1.10	1.35	1.60
3	0.10	0.35	0.35	1.00	1.10	1.35	1.60
4	0.10	0.35	0.35	1.00	1.10	1.35	1.60
5	0.10	0.35	0.35	1.00	1.10	1.35	1.60
6	0.15	0.35	0.40	1.00	1.15	1.35	1.60
7	0.15	0.35	0.40	1.00	1.15	1.35	1.60
8	0.15	0.35	0.40	1.00	1.15	1.35	1.60
9	0.15	0.35	0.40	1.00	1.15	1.35	1.60
10	0.15	0.35	0.50	1.05	1.20	1.40	1.60
11	0.25	0.35	0.70	1.05	1.20	1.40	1.60
12	0.25	0.35	0.70	1.05	1.20	1.40	1.60
13	0.25	0.35	0.70	1.05	1.20	1.40	1.60
14	0.25	0.35	0.70	1.05	1.20	1.40	1.60
15	0.25	0.35	0.70	1.05	1.20	1.40	1.60
16	0.35	0.60	0.80	1.10	1.25	1.55	1.75
17	0.35	0.60	0.80	1.10	1.25	1.55	1.75
18	0.35	0.60	0.80	1.10	1.25	1.55	1.75
19	0.35	0.60	0.80	1.10	1.25	1.55	1.75
20	0.35	0.60	0.80	1.10	1.25	1.55	1.75
21	0.60	0.80	0.90	1.10	1.25	1.75	2.00
22	0.60	0.80	0.90	1.10	1.25	1.75	2.00
23	0.60	0.80	0.90	1.10	1.25	1.75	2.00
24	0.60	0.80	0.90	1.10	1.25	1.75	2.00
25	0.60	0.80	0.90	1.10	1.25	1.75	2.00
26	0.85	0.90	1.00	1.10	1.25	2.00	2.00
27	0.85	0.90	1.00	1.10	1.25	2.00	2.00
28	0.85	0.90	1.00	1.10	1.25	2.00	2.00
29	0.85	0.90	1.00	1.10	1.25	2.00	2.00
30	0.85	0.90	1.00	1.10	1.25	2.00	2.00
31	0.90	1.00	1.05	1.10	1.25	2.10	2.05
32	0.93	1.00	1.05	1.10	1.25	2.10	2.05
33	0.95	1.00	1.05	1.10	1.25	2.10	2.05
34	0.98	1.00	1.05	1.10	1.25	2.10	2.05
35+	1.00	1.00	1.05	1.10	1.25	2.10	2.05

EXHIBIT I
RiverSource Life Insurance Company
Original Pricing & Current Assumptions Comparison

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Current Assumptions (continued):

Morbidity (continued):

Non-Lifetime Benefit Actual-to-Expected Adjustment Factors

Duration	Age at Issue							
	<53	53-57	58-62	63-67	68-72	73-77	78-82	83+
1	0.10	0.10	0.20	0.20	0.45	0.65	0.70	1.50
2	0.10	0.10	0.25	0.30	0.45	0.85	0.90	1.60
3	0.15	0.15	0.30	0.35	0.55	1.05	0.90	1.70
4	0.20	0.20	0.40	0.35	0.80	1.15	1.10	2.15
5	0.25	0.25	0.45	0.45	0.80	1.40	1.40	2.15
6	0.30	0.35	0.50	0.60	1.00	1.40	1.85	2.15
7	0.30	0.40	0.55	0.75	1.05	1.45	2.05	2.15
8	0.30	0.45	0.60	0.85	1.15	1.55	2.30	2.15
9	0.35	0.55	0.75	0.95	1.20	1.70	2.60	2.20
10	0.40	0.55	0.80	1.00	1.25	1.70	2.60	2.20
11	0.40	0.55	0.90	1.05	1.25	1.75	2.65	2.20
12	0.40	0.55	0.90	1.05	1.25	1.75	2.65	2.20
13	0.40	0.55	0.90	1.05	1.25	1.75	2.65	2.20
14	0.40	0.55	0.90	1.05	1.25	1.75	2.65	2.20
15	0.45	0.55	0.95	1.05	1.25	1.75	2.65	2.20
16	0.45	0.55	0.95	1.05	1.25	1.75	2.65	2.20
17	0.50	0.60	0.95	1.05	1.25	1.75	2.65	2.20
18	0.50	0.65	0.95	1.05	1.25	1.75	2.65	2.20
19	0.55	0.70	0.95	1.05	1.25	1.80	2.65	2.20
20	0.55	0.80	0.95	1.05	1.25	1.80	2.65	2.20
21	0.60	0.80	0.95	1.05	1.25	1.80	2.70	2.20
22	0.60	0.85	0.95	1.05	1.25	1.80	2.70	2.20
23	0.65	0.85	1.00	1.05	1.25	1.80	2.70	2.20
24	0.65	0.90	1.00	1.05	1.25	1.90	2.70	2.20
25	0.70	0.90	1.00	1.05	1.25	1.90	2.70	2.20
26	0.75	0.95	1.00	1.05	1.25	1.90	2.70	2.20
27	0.80	0.95	1.00	1.05	1.25	1.90	2.70	2.20
28	0.85	1.00	1.00	1.05	1.25	1.90	2.70	2.20
29	0.90	1.00	1.05	1.05	1.25	2.00	2.70	2.20
30	0.90	1.00	1.05	1.05	1.25	2.00	2.70	2.20
31	0.95	1.00	1.05	1.08	1.25	2.00	2.70	2.20
32	0.95	1.00	1.05	1.08	1.25	2.00	2.70	2.20
33	0.95	1.00	1.05	1.08	1.25	2.00	2.70	2.20
34	0.95	1.00	1.05	1.08	1.25	2.00	2.70	2.20
35+	1.00	1.00	1.05	1.10	1.25	2.00	2.70	2.20

The following adverse selection factors are used:

Year of Policyholder Notification	With Current Requested Increase
1	5.8%
2	4.8%
3	3.8%
4	2.8%
5	1.8%
6	0.8%
7	0.0%

Interest Rate: 4.5%

EXHIBIT II
RiverSource Life Insurance Company
Nationwide Long Term Care Claim Experience
For Policy Anniversaries through 2013
Policy Form 30160A, Subject to Endorsement Form 32100
Expected Claims Based on Current Assumptions

SPLIT BY BENEFIT PERIOD AND DURATION									
Duration	Lifetime Benefit Period			Non-Lifetime Benefit Period			All		
	Actual	Expected	A/E	Actual	Expected	A/E	Actual	Expected	A/E
1	594,192	794,739	74.8%	197,412	501,950	39.3%	791,604	1,296,689	61.0%
2	1,480,257	1,281,478	115.5%	978,154	1,166,030	83.9%	2,458,411	2,447,508	100.4%
3	510,274	1,533,177	33.3%	1,814,375	1,762,442	102.9%	2,324,649	3,295,618	70.5%
4	3,870,412	1,872,350	206.7%	2,610,310	2,612,205	99.9%	6,480,722	4,484,556	144.5%
5	3,415,013	2,224,850	153.5%	2,828,877	3,628,492	78.0%	6,243,890	5,853,342	106.7%
6	2,031,717	2,781,619	73.0%	6,400,842	4,937,076	129.6%	8,432,559	7,718,695	109.2%
7	4,546,539	3,299,416	137.8%	5,553,621	6,253,635	88.8%	10,100,160	9,553,051	105.7%
8	1,992,838	3,899,182	51.1%	7,664,459	7,912,964	96.9%	9,657,297	11,812,146	81.8%
9	4,766,360	4,484,775	106.3%	11,614,790	10,077,627	115.3%	16,381,151	14,562,402	112.5%
10	5,303,312	5,533,391	95.8%	11,071,497	11,838,518	93.5%	16,374,810	17,371,910	94.3%
11	7,476,199	6,474,070	115.5%	11,553,141	12,947,398	89.2%	19,029,339	19,421,469	98.0%
12	4,713,678	4,738,361	99.5%	9,946,236	9,242,201	107.6%	14,659,914	13,980,562	104.9%
13	1,789,190	2,094,006	85.4%	4,846,405	3,751,599	129.2%	6,635,595	5,845,605	113.5%
Total	42,489,982	41,011,414	103.6%	77,080,120	76,632,138	100.6%	119,570,102	117,643,552	101.6%

SPLIT BY ISSUE AGE				
Issue Age	Actual	Expected	A/E	Claim Count
<43	215,089	100,488	214.0%	5
43-47	195,344	608,141	32.1%	12
48-52	2,634,366	2,884,617	91.3%	44
53-57	9,872,172	11,320,475	87.2%	164
58-62	20,296,081	21,107,809	96.2%	335
63-67	28,910,939	28,353,223	102.0%	388
68-72	24,616,106	22,468,870	109.6%	379
73-77	21,410,671	20,164,639	106.2%	342
78-82	10,152,540	9,462,488	107.3%	151
83+	1,266,795	1,172,800	108.0%	23
Total	119,570,102	117,643,552	101.6%	1,843

EXHIBIT III
RiverSource Life Insurance Company
Long-Term Care Mortality Experience
For Policy Anniversaries in 2000 through Policy Anniversaries in 2013
Experience Includes All Long-Term Care Forms Combined
Expressing Deaths in Terms of Policy Count
Expected Deaths Based on Current Assumptions

SUMMARY BY DURATION				
Duration	Actual Deaths	Expected Deaths	A/E	Difference
1	100	98	102%	2
2	216	218	99%	(2)
3	418	399	105%	19
4	531	544	98%	(13)
5	811	800	101%	11
6	1,130	1,114	101%	16
7	1,470	1,434	103%	36
8	1,731	1,726	100%	5
9	2,154	2,174	99%	(20)
10	2,637	2,657	99%	(20)
11	3,196	3,200	100%	(4)
12	3,323	3,380	98%	(57)
13	3,332	3,385	98%	(53)
14	3,187	3,276	97%	(89)
15	2,965	3,050	97%	(85)
16	2,688	2,770	97%	(82)
17	2,540	2,563	99%	(23)
18	2,159	2,150	100%	9
19	1,737	1,742	100%	(5)
20	1,401	1,430	98%	(29)
21	1,182	1,145	103%	37
22	882	838	105%	44
23	487	484	101%	3
24	67	74	90%	(7)
Total	40,344	40,652	99%	(308)

SUMMARY BY ISSUE AGE				
Issue Age	Actual Deaths	Expected Deaths	A/E	Difference
<43	23	24	95%	(1)
43-47	131	145	91%	(14)
48-52	956	986	97%	(30)
53-57	2,912	2,920	100%	(8)
58-62	6,674	6,687	100%	(13)
63-67	10,067	10,269	98%	(202)
68-72	9,968	9,996	100%	(28)
73-77	6,604	6,606	100%	(2)
78-82	2,651	2,654	100%	(3)
83+	358	366	98%	(8)
Total	40,344	40,652	99%	(308)

SUMMARY BY ALL DURATION / ISSUE AGE CELLS			
Actual Deaths	Expected Deaths	A/E	Difference
40,344	40,652	99%	(308)

EXHIBIT IV
RiverSource Life Insurance Company
Lapses and Benefit Reductions¹
Nationwide Experience
Experience Includes All Long-Term Care Forms Combined

Additional Lapses Due to Rate Increase											
Increase Percent	Average Increase	Year of Increase									Weighted Average
		2005	2006	2007	2008	2009	2010	2011	2012	2013	
< 10%	6.3%			0.9%	1.5%	1.7%	0.9%	1.2%	1.0%	0.7%	1.2%
10% - 19.9%	11.9%	0.7%	2.1%	1.5%	1.8%	1.9%	1.4%	1.3%	1.2%	1.1%	1.5%
20% - 29.9%	20.8%	1.8%	1.7%	1.2%	1.6%	2.5%		4.4%	2.6%	1.8%	1.8%
30%+	33.6%	2.9%	2.7%	2.0%	3.4%	3.1%	1.0%	1.9%			2.8%
Total	16.2%	2.6%	2.5%	1.3%	1.8%	1.9%	1.4%	1.3%	1.2%	1.2%	1.7%

Overall Reduction in Benefits in Relation to Rate Increase Percentage											
Increase Percent	Average Increase	Year of Increase									Weighted Average
		2005	2006	2007	2008	2009	2010	2011	2012	2013	
< 10%	6.3%			0.3%	0.2%	0.1%	0.3%	0.2%	0.3%	0.3%	0.2%
10% - 19.9%	11.9%	0.8%	0.7%	0.5%	0.5%	0.6%	0.5%	0.6%	0.6%	0.7%	0.6%
20% - 29.9%	20.8%	1.5%	1.6%	1.6%	1.3%	2.3%		1.6%	0.9%	0.9%	1.4%
30%+	33.6%	3.0%	2.7%	2.6%	2.5%	2.3%	1.8%	1.5%			2.7%
Total	16.2%	1.4%	1.3%	0.8%	0.7%	0.8%	0.7%	0.8%	0.8%	0.9%	0.9%

¹ The total percent reduction in benefit is typically no more than the percentage increase in premium.

EXHIBIT V
RiverSource Life Insurance Company
Long-Term Care Lapse Experience
For Policy Anniversaries in 2000 through Policy Anniversaries in 2013
Experience Includes All Long-Term Care Forms Combined
Expressing Lapses in Terms of Policy Count
Expected Lapses Based on Current Assumptions

LIFETIME BENEFIT PERIOD																
Duration	Issue Ages 35-62				Issue Ages 63-72				Issue Ages 73+				All Issue Ages			
	Actual			Expected Lapses	Actual			Expected Lapses	Actual			Expected Lapses	Actual			Expected Lapses
	Lapses	Exposure	Rate		Lapses	Exposure	Rate		Lapses	Exposure	Rate		Lapses	Exposure	Rate	
1	1,352	19,701	6.9%	6.9%	261	3,859	6.8%	6.8%	37	529	7.0%	7.0%	1,650	24,088	6.8%	6.9%
2	1,669	25,851	6.5%	6.5%	265	5,869	4.5%	4.5%	30	856	3.5%	3.5%	1,964	32,576	6.0%	6.1%
3	1,552	32,493	4.8%	4.8%	287	8,144	3.5%	3.5%	42	1,213	3.5%	3.5%	1,881	41,850	4.5%	4.5%
4	1,416	39,280	3.6%	3.6%	265	10,078	2.6%	2.6%	29	1,494	1.9%	1.9%	1,710	50,852	3.4%	3.4%
5	1,270	48,520	2.6%	2.6%	254	13,213	1.9%	1.9%	27	2,028	1.3%	1.3%	1,551	63,762	2.4%	2.4%
6	967	52,208	1.9%	1.9%	255	15,516	1.6%	1.6%	31	2,497	1.2%	1.3%	1,253	70,220	1.8%	1.8%
7	773	52,358	1.5%	1.5%	195	16,645	1.2%	1.1%	48	2,770	1.7%	1.3%	1,016	71,773	1.4%	1.4%
8	550	50,915	1.1%	1.1%	195	17,353	1.1%	1.1%	38	2,869	1.3%	1.3%	783	71,137	1.1%	1.1%
9	498	47,453	1.0%	1.1%	187	17,441	1.1%	1.1%	31	2,893	1.1%	1.3%	716	67,788	1.1%	1.1%
10	371	42,435	0.9%	0.9%	212	17,566	1.2%	1.2%	32	2,936	1.1%	1.3%	615	62,938	1.0%	1.0%
11	353	40,934	0.9%	0.8%	200	19,218	1.0%	1.0%	34	3,302	1.0%	1.4%	587	63,454	0.9%	0.9%
12	231	34,246	0.7%	0.7%	148	17,789	0.8%	0.9%	43	2,984	1.4%	1.5%	422	55,019	0.8%	0.8%
13	204	29,273	0.7%	0.7%	141	15,703	0.9%	0.9%	31	2,485	1.2%	1.5%	376	47,461	0.8%	0.8%
14	166	24,961	0.7%	0.7%	109	12,961	0.8%	0.9%	31	1,881	1.6%	1.6%	306	39,803	0.8%	0.8%
15	116	19,732	0.6%	0.6%	93	9,829	0.9%	0.9%	20	1,288	1.6%	1.6%	229	30,850	0.7%	0.8%
16	96	15,227	0.6%	0.6%	78	7,407	1.1%	1.0%	22	887	2.5%	1.7%	196	23,520	0.8%	0.8%
17	87	13,423	0.6%	0.6%	80	6,807	1.2%	1.2%	19	750	2.5%	1.7%	186	20,979	0.9%	0.8%
18	46	8,709	0.5%	0.6%	68	5,058	1.3%	1.2%	14	482	2.9%	1.8%	128	14,249	0.9%	0.9%
19	31	5,555	0.6%	0.6%	37	3,172	1.2%	1.2%	5	258	1.9%	1.8%	73	8,984	0.8%	0.9%
20	31	4,116	0.8%	0.8%	37	2,582	1.4%	1.2%	3	176	1.7%	1.9%	71	6,874	1.0%	0.9%
21	30	3,758	0.8%	0.8%	27	2,847	0.9%	1.2%	7	182	3.8%	1.9%	64	6,787	0.9%	1.0%
22	31	3,341	0.9%	0.9%	21	2,689	0.8%	1.2%	5	173	2.9%	2.0%	57	6,203	0.9%	1.0%
23	19	1,819	1.0%	0.9%	16	1,460	1.1%	1.2%	3	85	3.5%	2.0%	38	3,364	1.1%	1.0%
24	2	240	0.8%	0.9%	4	179	2.2%	1.3%	0	11	0.0%	2.0%	6	430	1.4%	1.1%
All Durations	11,861	616,549	1.9%	1.9%	3,435	233,382	1.5%	1.5%	582	35,030	1.7%	1.7%	15,878	884,961	1.8%	1.8%
Durations 8 and later	2,862	346,139	0.8%	0.8%	1,653	160,058	1.0%	1.0%	338	23,643	1.4%	1.5%	4,853	529,840	0.9%	0.9%

NON-LIFETIME BENEFIT PERIOD																
Duration	Issue Ages 35-62				Issue Ages 63-72				Issue Ages 73+				All Issue Ages			
	Actual			Expected Lapses	Actual			Expected Lapses	Actual			Expected Lapses	Actual			Expected Lapses
	Lapses	Exposure	Rate		Lapses	Exposure	Rate		Lapses	Exposure	Rate		Lapses	Exposure	Rate	
1	1,927	27,994	6.9%	6.9%	677	9,598	7.1%	7.1%	116	2,177	5.3%	5.3%	2,720	39,770	6.8%	6.9%
2	2,079	34,647	6.0%	6.0%	644	13,309	4.8%	4.8%	151	3,289	4.6%	4.6%	2,874	51,244	5.6%	5.6%
3	1,599	38,297	4.2%	4.2%	542	16,222	3.3%	3.3%	128	4,194	3.1%	3.1%	2,269	58,713	3.9%	3.9%
4	1,227	39,300	3.1%	3.1%	503	17,424	2.9%	2.9%	134	4,614	2.9%	2.9%	1,864	61,338	3.0%	3.0%
5	975	41,636	2.3%	2.3%	391	19,997	2.0%	2.0%	124	5,566	2.2%	2.2%	1,490	67,199	2.2%	2.2%
6	712	40,884	1.7%	1.7%	408	21,641	1.9%	1.9%	133	6,387	2.1%	2.1%	1,253	68,912	1.8%	1.8%
7	566	37,665	1.5%	1.5%	325	21,705	1.5%	1.6%	149	6,647	2.2%	2.3%	1,040	66,016	1.6%	1.6%
8	431	36,886	1.2%	1.2%	316	22,005	1.4%	1.4%	150	6,595	2.3%	2.4%	897	65,486	1.4%	1.4%
9	386	36,096	1.1%	1.1%	292	21,699	1.3%	1.3%	156	6,334	2.5%	2.5%	834	64,129	1.3%	1.3%
10	278	30,581	0.9%	1.0%	225	20,119	1.1%	1.3%	188	5,892	3.2%	3.3%	691	56,592	1.2%	1.3%
11	247	27,376	0.9%	1.0%	294	19,999	1.5%	1.5%	206	5,765	3.6%	3.6%	747	53,140	1.4%	1.4%
12	220	22,285	1.0%	0.9%	248	17,841	1.4%	1.5%	191	4,939	3.9%	3.9%	659	45,065	1.5%	1.5%
13	151	19,248	0.8%	0.8%	237	15,702	1.5%	1.5%	166	4,050	4.1%	4.2%	554	39,000	1.4%	1.4%
14	115	14,226	0.8%	0.8%	173	12,574	1.4%	1.5%	160	2,957	5.4%	5.3%	448	29,758	1.5%	1.5%
15	66	9,358	0.7%	0.7%	159	9,135	1.7%	1.6%	89	1,936	4.6%	5.3%	314	20,429	1.5%	1.5%
16	50	6,784	0.7%	0.7%	124	6,589	1.9%	1.8%	75	1,305	5.7%	5.3%	249	14,678	1.7%	1.6%
17	45	5,861	0.8%	0.8%	115	5,797	2.0%	2.0%	49	1,041	4.7%	5.9%	209	12,700	1.6%	1.8%
18	45	3,979	1.1%	1.0%	76	4,231	1.8%	2.2%	44	694	6.3%	5.9%	165	8,904	1.9%	1.9%
19	30	2,707	1.1%	1.1%	62	2,780	2.2%	2.4%	22	373	5.9%	5.9%	114	5,860	1.9%	2.0%
20	25	2,127	1.2%	1.1%	65	2,190	3.0%	2.7%	11	255	4.3%	5.9%	101	4,572	2.2%	2.1%
21	19	1,686	1.1%	1.1%	66	2,027	3.3%	2.9%	15	208	7.2%	6.0%	100	3,921	2.6%	2.3%
22	13	1,245	1.0%	1.1%	48	1,636	2.9%	3.1%	20	157	12.7%	6.0%	81	3,037	2.7%	2.4%
23	5	626	0.8%	1.1%	29	809	3.6%	3.4%	4	50	8.1%	6.0%	38	1,484	2.6%	2.5%
24	4	104	3.9%	1.2%	2	113	1.8%	3.4%	1	3	30.8%	6.0%	7	220	3.2%	2.4%
All Durations	11,215	481,599	2.3%	2.3%	6,021	285,142	2.1%	2.1%	2,482	75,427	3.3%	3.3%	19,718	842,168	2.3%	2.4%
Durations 8 and later	2,130	221,176	1.0%	1.0%	2,531	165,246	1.5%	1.6%	1,547	42,553	3.6%	3.7%	6,208	428,976	1.4%	1.5%

EXHIBIT VI
RiverSource Life Insurance Company
Nationwide Experience Projections, All Policies
Projections with No Increase
Adjusted to Reflect No Prior Rate Increases on a Nationwide Basis
Policy Form: 30160A, Subject to Endorsement Form 32100

	Calendar Year	Ending Policies Inforce	Loss Ratio Demonstration						Factors Derived from Projected Values for Illustrative Purposes Only				Interest Rate Factors	
			Without Interest			With Interest			Premium Rate Increase Factor	Morbidity Factor	Persistence Factors		Calendar Year Effective Int Rate	Mid-Year Disc / Accum Factor
			Earned Premiums	Incurred Claims	Loss Ratio	Earned Premiums	Incurred Claims	Loss Ratio			Policy Lapse & Mortality	Policy Persistence		
Historical Experience	2000	9,836	3,316,794	0	0.0%	6,279,206	0	0.0%			0.0075	0.993	4.50%	1.8932
	2001	25,543	26,853,376	521,781	1.9%	48,648,429	945,275	1.9%			0.0308	0.969	4.50%	1.8116
	2002	39,113	48,218,444	1,959,886	4.1%	83,592,406	3,397,696	4.1%			0.0397	0.960	4.50%	1.7336
	2003	37,806	58,076,515	1,472,260	2.5%	96,346,932	2,442,429	2.5%			0.0736	0.926	4.50%	1.6590
	2004	36,450	55,097,014	4,307,861	7.8%	87,467,984	6,838,844	7.8%			0.0359	0.964	4.50%	1.5875
	2005	35,452	53,275,196	6,546,597	12.3%	80,933,779	9,945,357	12.3%			0.0274	0.973	4.50%	1.5192
	2006	34,703	51,925,705	5,963,336	11.5%	75,486,775	8,669,175	11.5%			0.0211	0.979	4.50%	1.4537
	2007	34,072	50,913,530	12,391,734	24.3%	70,828,067	17,238,690	24.3%			0.0182	0.982	4.50%	1.3911
	2008	33,149	48,826,374	9,129,425	18.7%	64,999,552	12,153,442	18.7%			0.0271	0.973	4.50%	1.3312
	2009	32,432	47,340,156	16,181,857	34.2%	60,307,217	20,614,270	34.2%			0.0216	0.978	4.50%	1.2739
	2010	31,769	46,216,589	14,821,483	32.1%	56,340,565	18,068,203	32.1%			0.0204	0.980	4.50%	1.2191
	2011	31,153	45,107,452	21,538,689	47.7%	52,620,542	25,126,169	47.7%			0.0194	0.981	4.50%	1.1666
	2012	30,484	44,042,119	21,912,482	49.8%	49,165,327	24,461,456	49.8%			0.0215	0.979	4.50%	1.1163
	2013	29,849	42,823,301	20,657,071	48.2%	45,746,153	22,066,994	48.2%			0.0208	0.979	4.50%	1.0683
2014	29,233	41,679,207	21,306,306	51.1%	42,606,670	21,780,423	51.1%			0.0206	0.979	4.50%	1.0223	
Projected Future Experience	2015	28,446	40,535,619	27,802,463	68.6%	39,653,239	27,197,258	68.6%	1.0000	1.3410	0.0269	0.973	4.50%	0.9782
	2016	27,646	39,156,399	30,953,003	79.0%	36,654,585	28,975,328	79.0%	1.0000	1.1455	0.0281	0.972	4.50%	0.9361
	2017	26,813	37,747,556	34,272,824	90.8%	33,814,122	30,701,470	90.8%	1.0000	1.1417	0.0301	0.970	4.50%	0.8958
	2018	25,934	36,297,744	37,439,997	103.1%	31,115,202	32,094,365	103.1%	1.0000	1.1294	0.0328	0.967	4.50%	0.8572
	2019	25,013	34,805,077	40,537,220	116.5%	28,550,867	33,252,987	116.5%	1.0000	1.1226	0.0355	0.964	4.50%	0.8203
	2020	24,052	33,276,726	44,176,106	132.8%	26,121,673	34,677,505	132.8%	1.0000	1.1333	0.0384	0.962	4.50%	0.7850
	2021	23,058	31,718,995	49,116,432	154.8%	23,826,680	36,895,290	154.8%	1.0000	1.1598	0.0413	0.959	4.50%	0.7512
	2022	22,028	30,133,891	54,092,229	179.5%	21,661,226	38,883,262	179.5%	1.0000	1.1528	0.0446	0.955	4.50%	0.7188
	2023	20,967	28,523,905	58,771,185	206.0%	19,620,972	40,427,416	206.0%	1.0000	1.1415	0.0482	0.952	4.50%	0.6879
	2024	19,875	26,894,638	62,935,430	234.0%	17,703,574	41,427,664	234.0%	1.0000	1.1297	0.0521	0.948	4.50%	0.6583
	2025	18,750	25,247,579	67,262,042	266.4%	15,903,719	42,369,076	266.4%	1.0000	1.1329	0.0566	0.943	4.50%	0.6299
	2026	17,599	23,585,723	72,941,465	309.3%	14,217,127	43,968,043	309.3%	1.0000	1.1554	0.0614	0.939	4.50%	0.6028
	2027	16,433	21,922,529	78,425,559	357.7%	12,645,529	45,238,062	357.7%	1.0000	1.1515	0.0663	0.934	4.50%	0.5768
	2028	15,252	20,266,710	83,160,202	410.3%	11,186,992	45,903,480	410.3%	1.0000	1.1425	0.0719	0.928	4.50%	0.5520
	2029	14,060	18,620,354	86,706,695	465.7%	9,835,620	45,800,100	465.7%	1.0000	1.1311	0.0782	0.922	4.50%	0.5282
	2030	12,866	16,989,768	89,589,354	527.3%	8,587,860	45,284,951	527.3%	1.0000	1.1291	0.0849	0.915	4.50%	0.5055
	2031	11,691	15,394,815	92,467,839	600.6%	7,446,560	44,727,221	600.6%	1.0000	1.1359	0.0913	0.909	4.50%	0.4837
	2032	10,544	13,850,662	94,339,282	681.1%	6,411,143	43,667,415	681.1%	1.0000	1.1312	0.0981	0.902	4.50%	0.4629
	2033	9,438	12,371,006	94,937,289	767.4%	5,479,660	42,051,883	767.4%	1.0000	1.1242	0.1048	0.895	4.50%	0.4429
	2034	8,388	10,970,519	94,151,000	858.2%	4,650,070	39,907,753	858.2%	1.0000	1.1159	0.1112	0.889	4.50%	0.4239
	2035	7,397	9,658,548	92,741,735	960.2%	3,917,670	37,617,615	960.2%	1.0000	1.1170	0.1182	0.882	4.50%	0.4056
	2036	6,469	8,436,296	90,348,209	1070.9%	3,274,550	35,068,671	1070.9%	1.0000	1.1140	0.1255	0.874	4.50%	0.3882
	2037	5,611	7,307,947	86,854,670	1188.5%	2,714,431	32,260,912	1188.5%	1.0000	1.1084	0.1326	0.867	4.50%	0.3714
	2038	4,830	6,282,863	82,433,994	1312.0%	2,233,185	29,300,398	1312.0%	1.0000	1.1024	0.1390	0.861	4.50%	0.3554
	2039	4,128	5,362,212	77,518,974	1445.7%	1,823,874	26,366,890	1445.7%	1.0000	1.1004	0.1455	0.855	4.50%	0.3401
	2040	3,500	4,542,347	72,176,046	1589.0%	1,478,478	23,492,416	1589.0%	1.0000	1.0980	0.1520	0.848	4.50%	0.3255
	2041	2,944	3,818,232	66,525,074	1742.3%	1,189,270	20,720,664	1742.3%	1.0000	1.0957	0.1588	0.841	4.50%	0.3115
	2042	2,456	3,184,127	60,695,519	1906.2%	949,057	18,090,836	1906.2%	1.0000	1.0936	0.1657	0.834	4.50%	0.2981
	2043	2,032	2,633,721	54,815,018	2081.3%	751,200	15,634,546	2081.3%	1.0000	1.0917	0.1728	0.827	4.50%	0.2852
	2044	1,666	2,160,279	49,004,273	2268.4%	589,630	13,375,295	2268.4%	1.0000	1.0901	0.1799	0.820	4.50%	0.2729
	2045	1,354	1,756,801	43,355,654	2467.9%	458,855	11,323,975	2467.9%	1.0000	1.0885	0.1872	0.813	4.50%	0.2612
	2046	1,091	1,416,173	37,962,580	2680.6%	353,959	9,488,391	2680.6%	1.0000	1.0873	0.1947	0.805	4.50%	0.2499
	2047	870	1,131,332	32,891,015	2907.3%	270,589	7,866,795	2907.3%	1.0000	1.0860	0.2022	0.798	4.50%	0.2392
	2048	687	895,428	28,190,801	3148.3%	204,944	6,452,257	3148.3%	1.0000	1.0849	0.2100	0.790	4.50%	0.2289
	2049	538	701,949	23,896,823	3404.4%	153,742	5,233,933	3404.4%	1.0000	1.0839	0.2179	0.782	4.50%	0.2190
	2050	416	544,835	20,023,199	3675.1%	114,192	4,196,673	3675.1%	1.0000	1.0827	0.2261	0.774	4.50%	0.2096
	2051	319	418,539	16,576,161	3960.5%	83,944	3,324,600	3960.5%	1.0000	1.0815	0.2345	0.765	4.50%	0.2006
	2052	241	318,074	13,552,468	4260.8%	61,047	2,601,103	4260.8%	1.0000	1.0803	0.2432	0.757	4.50%	0.1919
	2053	180	239,020	10,935,907	4575.3%	43,899	2,008,527	4575.3%	1.0000	1.0790	0.2522	0.748	4.50%	0.1837
	2054	133	177,515	8,707,116	4905.0%	31,199	1,530,315	4905.0%	1.0000	1.0780	0.2614	0.739	4.50%	0.1758
2055	97	130,225	6,836,640	5249.9%	21,902	1,149,828	5249.9%	1.0000	1.0770	0.2710	0.729	4.50%	0.1682	
2056	70	94,312	5,291,085	5610.2%	15,179	851,567	5610.2%	1.0000	1.0762	0.2809	0.719	4.50%	0.1609	
2057	49	67,386	4,034,237	5986.8%	10,378	621,325	5986.8%	1.0000	1.0756	0.2911	0.709	4.50%	0.1540	
2058	35	47,467	3,028,339	6379.9%	6,996	446,319	6379.9%	1.0000	1.0752	0.3018	0.698	4.50%	0.1474	
2059	24	32,933	2,235,025	6786.5%	4,645	315,215	6786.5%	1.0000	1.0744	0.3131	0.687	4.50%	0.1410	
2060	16	22,481	1,619,619	7204.4%	3,034	218,586	7204.4%	1.0000	1.0736	0.3251	0.675	4.50%	0.1350	
2061	11	15,076	1,149,707	7626.3%	1,947	148,484	7626.3%	1.0000	1.0723	0.3380	0.662	4.50%	0.1291	
2062	7	9,912	797,613	8046.7%	1,225	98,575	8046.7%	1.0000	1.0708	0.3521	0.648	4.50%	0.1236	
2063	4	6,374	539,447	8462.6%	754	63,798	8462.6%	1.0000	1.0697	0.3677	0.632	4.50%	0.1183	
2064	3	3,997	354,740	8874.4%	452	40,147	8874.4%	1.0000	1.0694	0.3851	0.615	4.50%	0.1132	
Past			663,711,774	158,710,768	23.9%	921,369,601	193,748,422	21.0%						
Future			579,726,618	2,289,169,303	394.9%	395,850,650	1,093,359,185	276.2%						
Lifetime			1,243,438,392	2,447,880,070	196.9%	1,317,220,251	1,287,107,607	97.7%						

EXHIBIT VI
RiverSource Life Insurance Company
Nationwide Experience Projections, All Policies
Projections with 85.2% Increase
Adjusted to Reflect No Prior Rate Increases on a Nationwide Basis
Policy Form: 30160A, Subject to Endorsement Form 32100

	Calendar Year	Ending Policies Inforce	Loss Ratio Demonstration						Factors Derived from Projected Values for Illustrative Purposes Only				Interest Rate Factors	
			Without Interest			With Interest			Premium Rate Increase Factor	Morbidity Factor	Persistence Factors		Calendar Year Effective Int Rate	Mid-Year Disc / Accum Factor
			Earned Premiums	Incurred Claims	Loss Ratio	Earned Premiums	Incurred Claims	Loss Ratio			Policy Lapse & Mortality	Policy Persistence		
Historical Experience	2000	9,836	3,316,794	0	0.0%	6,279,206	0	0.0%			0.0075	0.993	4.50%	1.8932
	2001	25,543	26,853,376	521,781	1.9%	48,648,429	945,275	1.9%			0.0308	0.969	4.50%	1.8116
	2002	39,113	48,218,444	1,959,886	4.1%	83,592,406	3,397,696	4.1%			0.0397	0.960	4.50%	1.7336
	2003	37,806	58,076,515	1,472,260	2.5%	96,346,932	2,442,429	2.5%			0.0736	0.926	4.50%	1.6590
	2004	36,450	55,097,014	4,307,861	7.8%	87,467,984	6,838,844	7.8%			0.0359	0.964	4.50%	1.5875
	2005	35,452	53,275,196	6,546,597	12.3%	80,933,779	9,945,357	12.3%			0.0274	0.973	4.50%	1.5192
	2006	34,703	51,925,705	5,963,336	11.5%	75,486,775	8,669,175	11.5%			0.0211	0.979	4.50%	1.4537
	2007	34,072	50,913,530	12,391,734	24.3%	70,828,067	17,238,690	24.3%			0.0182	0.982	4.50%	1.3911
	2008	33,149	48,826,374	9,129,425	18.7%	64,999,552	12,153,442	18.7%			0.0271	0.973	4.50%	1.3312
	2009	32,432	47,340,156	16,181,857	34.2%	60,307,217	20,614,270	34.2%			0.0216	0.978	4.50%	1.2739
	2010	31,769	46,216,589	14,821,483	32.1%	56,340,565	18,068,203	32.1%			0.0204	0.980	4.50%	1.2191
	2011	31,153	45,107,452	21,538,689	47.7%	52,620,542	25,126,169	47.7%			0.0194	0.981	4.50%	1.1666
	2012	30,484	44,042,119	21,912,482	49.8%	49,165,327	24,461,456	49.8%			0.0215	0.979	4.50%	1.1163
	2013	29,849	42,823,301	20,657,071	48.2%	45,746,153	22,066,994	48.2%			0.0208	0.979	4.50%	1.0683
2014	29,233	41,679,207	21,306,306	51.1%	42,606,670	21,780,423	51.1%			0.0206	0.979	4.50%	1.0223	
Projected Future Experience	2015	28,141	42,016,201	27,771,494	66.1%	41,101,592	27,166,963	66.1%	1.0966	1.3540	0.0374	0.963	4.50%	0.9782
	2016	26,869	60,911,509	31,334,133	51.4%	57,019,700	29,332,106	51.4%	1.6458	1.1817	0.0452	0.955	4.50%	0.9361
	2017	26,059	65,904,284	34,756,028	52.7%	59,036,815	31,134,322	52.7%	1.0261	1.1437	0.0301	0.970	4.50%	0.8958
	2018	25,205	63,373,405	37,545,083	59.2%	54,325,036	32,184,447	59.2%	1.0000	1.1169	0.0328	0.967	4.50%	0.8572
	2019	24,310	60,767,658	40,198,274	66.2%	49,848,167	32,974,947	66.2%	1.0000	1.1101	0.0355	0.964	4.50%	0.8203
	2020	23,376	58,099,564	43,316,600	74.6%	45,607,186	34,002,806	74.6%	1.0000	1.1206	0.0384	0.962	4.50%	0.7850
	2021	22,410	55,380,142	47,623,195	86.0%	41,600,464	35,773,600	86.0%	1.0000	1.1468	0.0413	0.959	4.50%	0.7512
	2022	21,409	52,612,896	51,948,025	98.7%	37,819,870	37,341,939	98.7%	1.0000	1.1418	0.0446	0.955	4.50%	0.7188
	2023	20,378	49,802,167	56,241,841	112.9%	34,257,824	38,687,535	112.9%	1.0000	1.1374	0.0482	0.952	4.50%	0.6879
	2024	19,316	46,957,735	60,165,645	128.1%	30,910,240	39,604,435	128.1%	1.0000	1.1286	0.0521	0.948	4.50%	0.6583
	2025	18,223	44,082,197	64,241,316	145.7%	27,767,845	40,466,289	145.7%	1.0000	1.1318	0.0566	0.943	4.50%	0.6299
	2026	17,104	41,180,778	69,604,009	169.0%	24,823,168	41,956,274	169.0%	1.0000	1.1543	0.0614	0.939	4.50%	0.6028
	2027	15,971	38,276,981	74,777,575	195.4%	22,079,236	43,133,803	195.4%	1.0000	1.1506	0.0663	0.934	4.50%	0.5768
	2028	14,824	35,386,028	79,234,119	223.9%	19,532,682	43,736,327	223.9%	1.0000	1.1416	0.0718	0.928	4.50%	0.5520
	2029	13,665	32,511,567	82,557,657	253.9%	17,173,218	43,608,500	253.9%	1.0000	1.1303	0.0782	0.922	4.50%	0.5282
	2030	12,505	29,664,610	85,250,362	287.4%	14,994,643	43,091,710	287.4%	1.0000	1.1284	0.0849	0.915	4.50%	0.5055
	2031	11,363	26,879,842	87,940,746	327.2%	13,001,933	42,537,440	327.2%	1.0000	1.1352	0.0913	0.909	4.50%	0.4837
	2032	10,248	24,183,751	89,675,230	370.8%	11,194,084	41,508,536	370.8%	1.0000	1.1307	0.0981	0.902	4.50%	0.4629
	2033	9,173	21,600,257	90,201,318	417.6%	9,567,700	39,954,115	417.6%	1.0000	1.1237	0.1048	0.895	4.50%	0.4429
	2034	8,153	19,154,980	89,414,436	466.8%	8,119,215	37,900,067	466.8%	1.0000	1.1154	0.1112	0.889	4.50%	0.4239
	2035	7,189	16,864,245	88,039,006	522.0%	6,840,423	35,710,109	522.0%	1.0000	1.1166	0.1182	0.882	4.50%	0.4056
	2036	6,287	14,730,157	85,733,203	582.0%	5,717,513	33,277,355	582.0%	1.0000	1.1136	0.1255	0.874	4.50%	0.3882
	2037	5,453	12,760,016	82,388,053	645.7%	4,739,523	30,601,852	645.7%	1.0000	1.1079	0.1326	0.867	4.50%	0.3714
	2038	4,695	10,970,173	78,168,172	712.6%	3,899,246	27,784,151	712.6%	1.0000	1.1020	0.1390	0.861	4.50%	0.3554
	2039	4,012	9,362,674	73,483,975	784.9%	3,184,570	24,994,446	784.9%	1.0000	1.1001	0.1455	0.855	4.50%	0.3401
	2040	3,402	7,931,149	68,398,557	862.4%	2,581,492	22,262,890	862.4%	1.0000	1.0977	0.1520	0.848	4.50%	0.3255
	2041	2,862	6,666,810	63,025,473	945.4%	2,076,521	19,630,638	945.4%	1.0000	1.0954	0.1588	0.841	4.50%	0.3115
	2042	2,387	5,559,632	57,487,237	1034.0%	1,657,097	17,134,579	1034.0%	1.0000	1.0933	0.1657	0.834	4.50%	0.2981
	2043	1,975	4,598,595	51,904,518	1128.7%	1,311,629	14,804,403	1128.7%	1.0000	1.0914	0.1728	0.827	4.50%	0.2852
	2044	1,620	3,771,943	46,391,301	1229.9%	1,029,519	12,662,107	1229.9%	1.0000	1.0899	0.1799	0.820	4.50%	0.2729
	2045	1,316	3,067,451	41,034,705	1337.7%	801,181	10,717,771	1337.7%	1.0000	1.0883	0.1872	0.813	4.50%	0.2612
	2046	1,060	2,472,698	35,922,774	1452.8%	618,028	8,978,561	1452.8%	1.0000	1.0870	0.1947	0.805	4.50%	0.2499
	2047	846	1,975,354	31,117,546	1575.3%	472,460	7,442,621	1575.3%	1.0000	1.0858	0.2022	0.798	4.50%	0.2392
	2048	668	1,563,453	26,665,794	1705.6%	357,840	6,103,217	1705.6%	1.0000	1.0847	0.2100	0.790	4.50%	0.2289
	2049	523	1,225,632	22,600,132	1844.0%	268,440	4,949,929	1844.0%	1.0000	1.0837	0.2179	0.782	4.50%	0.2190
	2050	404	951,303	18,933,573	1990.3%	199,384	3,968,298	1990.3%	1.0000	1.0825	0.2261	0.774	4.50%	0.2096
2051	310	730,785	15,671,683	2144.5%	146,570	3,143,193	2144.5%	1.0000	1.0813	0.2345	0.765	4.50%	0.2006	
2052	234	555,369	12,811,109	2306.8%	106,591	2,458,815	2306.8%	1.0000	1.0802	0.2432	0.757	4.50%	0.1919	
2053	175	417,338	10,336,264	2476.7%	76,650	1,898,394	2476.7%	1.0000	1.0789	0.2522	0.748	4.50%	0.1837	
2054	129	309,947	8,228,621	2654.8%	54,475	1,446,217	2654.8%	1.0000	1.0779	0.2614	0.739	4.50%	0.1758	
2055	94	227,378	6,460,152	2841.2%	38,242	1,086,508	2841.2%	1.0000	1.0769	0.2710	0.729	4.50%	0.1682	
2056	68	164,671	4,999,137	3035.8%	26,503	804,580	3035.8%	1.0000	1.0761	0.2809	0.719	4.50%	0.1609	
2057	48	117,658	3,811,230	3239.3%	18,121	586,979	3239.3%	1.0000	1.0755	0.2911	0.709	4.50%	0.1540	
2058	34	82,878	2,860,647	3451.6%	12,215	421,605	3451.6%	1.0000	1.0750	0.3018	0.698	4.50%	0.1474	
2059	23	57,502	2,111,062	3671.3%	8,110	297,732	3671.3%	1.0000	1.0743	0.3131	0.687	4.50%	0.1410	
2060	16	39,252	1,529,653	3897.0%	5,298	206,444	3897.0%	1.0000	1.0736	0.3251	0.675	4.50%	0.1350	
2061	10	26,322	1,085,753	4124.8%	3,400	140,224	4124.8%	1.0000	1.0722	0.3380	0.662	4.50%	0.1291	
2062	7	17,307	753,186	4351.9%	2,139	93,085	4351.9%	1.0000	1.0708	0.3521	0.648	4.50%	0.1236	
2063	4	11,130	509,363	4576.5%	1,316	60,240	4576.5%	1.0000	1.0696	0.3677	0.632	4.50%	0.1183	
2064	3	6,979	334,934	4798.8%	790	37,906	4798.8%	1.0000	1.0693	0.3851	0.615	4.50%	0.1132	
Past			663,711,774	158,710,768	23.9%	921,369,601	193,748,422	21.0%						
Future			975,982,353	2,186,593,900	224.0%	656,035,903	1,049,801,009	160.0%						
Lifetime			1,639,694,127	2,345,304,667	143.0%	1,577,405,504	1,243,549,431	78.8%						

EXHIBIT VII
Demonstration that Lifetime Incurred Claims with Requested 85.2% Increase are
Not Less than Lifetime Earned Premium with Prescribed Factors

Nationwide Experience, All Policies
Adjusted to Reflect No Prior Rate Increases on a Nationwide Basis
Accumulation and Discounting Occur at 4.5%
Policy Form: 30160A, Subject to Endorsement Form 32100

1	Accumulated value of initial earned premiums	921,369,601	x	58%	=	534,394,369
2a	Accumulated value of earned premiums	921,369,601				
2b	Accumulated value of prior premium rate schedule increases (2a - 1)	0	x	85%	=	0
3	Present value of future projected initial earned premiums	395,850,650	x	58%	=	229,593,377
4a	Present value of future projected earned premiums	656,035,903				
4b	Present value of future projected earned premiums in excess of the projected initial earned premiums (4a - 3)	260,185,253	x	85%	=	221,157,465
5	Lifetime Earned Premium Times Prescribed Factor: Sum of 1, 2b, 3 and 4b					985,145,211
6a	Accumulated value of past incurred claims without the inclusion of active life reserves					193,748,422
6b	Present value of future projected incurred claims without the inclusion of active life reserves					1,154,781,110
7	Lifetime Incurred Claims with Rate Increase: Sum 6a and 6b					1,348,529,532
8	Test: 7 is not less than 5					PASS
<i>The future projected incurred claims reflect assumptions that include moderately adverse conditions.</i>						
<i>Present and accumulated values are determined at 4.5%, which is the maximum valuation rate for contract reserves for this policy form.</i>						

EXHIBIT VIII

RiverSource Life Insurance Company
227 Ameriprise Financial Center
Minneapolis, MN 55474

Annual Premiums with 85.2% Rate Increase
Policies Issued On or After September 16, 2002

Comprehensive Reimbursement Policy
FORM: 30160A-PA, with Endorsement Form 32100-PA

Annual Premiums Per \$10 Daily Benefit

LIFETIME BENEFIT PERIOD

Issue Age	No Benefit Increase Option						Simple Benefit Increase Option						Compound Benefit Increase Option					
	Deductible			Deductible			Deductible			Deductible			Deductible			Deductible		
	20 days		90 days	20 days		90 days	20 days		90 days	20 days		90 days	20 days		90 days	20 days		90 days
	Home Care Percentage		Home Care Percentage		Home Care Percentage		Home Care Percentage		Home Care Percentage		Home Care Percentage		Home Care Percentage		Home Care Percentage		Home Care Percentage	
	50%	75%	100%	50%	75%	100%	50%	75%	100%	50%	75%	100%	50%	75%	100%	50%	75%	100%
40	103.72	118.52	133.34	85.20	98.16	111.12	164.82	187.98	211.12	151.86	172.24	192.60	222.24	250.02	277.80	200.02	224.10	248.16
41	103.72	118.52	133.34	85.20	98.16	111.12	164.82	187.98	211.12	151.86	172.24	192.60	222.24	250.02	277.80	200.02	224.10	248.16
42	103.72	118.52	133.34	85.20	98.16	111.12	164.82	187.98	211.12	151.86	172.24	192.60	222.24	250.02	277.80	200.02	224.10	248.16
43	103.72	118.52	133.34	85.20	98.16	111.12	164.82	187.98	211.12	151.86	172.24	192.60	222.24	250.02	277.80	200.02	224.10	248.16
44	103.72	118.52	133.34	85.20	98.16	111.12	164.82	187.98	211.12	151.86	172.24	192.60	222.24	250.02	277.80	200.02	224.10	248.16
45	103.72	118.52	133.34	85.20	98.16	111.12	164.82	187.98	211.12	151.86	172.24	192.60	222.24	250.02	277.80	200.02	224.10	248.16
46	103.72	118.52	133.34	85.20	98.16	111.12	168.54	191.68	214.84	151.86	172.24	192.60	229.64	257.42	285.20	207.42	231.50	255.58
47	105.56	121.30	137.04	87.04	100.94	114.82	177.80	201.86	225.94	157.42	178.72	200.02	238.90	267.62	296.32	214.84	240.76	266.68
48	105.56	121.30	137.04	90.74	104.64	118.52	185.20	211.12	237.06	161.12	182.42	203.72	251.88	281.50	311.14	220.38	247.24	274.10
49	111.12	127.78	144.46	92.60	107.42	122.24	188.90	214.84	240.76	162.98	185.20	207.42	261.14	291.70	322.24	227.80	254.66	281.50
50	111.12	127.78	144.46	96.30	111.12	125.94	194.46	221.32	248.16	166.68	188.90	211.12	279.66	312.06	344.48	233.36	261.14	288.92
51	114.82	133.34	151.86	98.16	113.90	129.64	200.02	227.80	255.58	175.94	199.10	222.24	287.06	319.48	351.88	238.90	267.62	296.32
52	118.52	137.04	155.56	98.16	113.90	129.64	203.72	231.50	259.28	175.94	199.10	222.24	296.32	329.66	363.00	250.02	278.72	307.44
53	120.38	139.82	159.28	107.42	124.08	140.76	209.28	237.98	266.68	181.50	205.58	229.64	305.58	339.84	374.10	255.58	285.20	314.84
54	120.38	139.82	159.28	107.42	124.08	140.76	218.54	248.16	277.80	185.20	209.28	233.36	318.54	353.74	388.92	261.14	291.70	322.24
55	125.94	146.30	166.68	114.82	133.34	151.86	224.10	254.66	285.20	192.60	218.54	244.46	331.50	367.62	403.74	272.24	304.66	337.06
56	135.20	156.50	177.80	118.52	137.04	155.56	238.90	271.32	303.72	205.58	232.42	259.28	351.88	388.92	425.96	292.62	325.96	359.28
57	148.16	170.38	192.60	127.78	147.24	166.68	255.58	288.92	322.24	222.24	250.02	277.80	368.54	406.52	444.48	312.98	347.26	381.52
58	157.42	180.58	203.72	137.04	157.42	177.80	268.54	302.80	337.06	235.20	263.92	292.62	390.78	430.60	470.40	329.66	364.84	400.04
59	166.68	190.76	214.84	146.30	167.60	188.90	288.92	324.10	359.28	251.88	281.50	311.14	411.14	451.88	492.64	350.02	386.14	422.26
60	181.50	207.42	233.36	155.56	177.80	200.02	301.88	338.00	374.10	272.24	304.66	337.06	427.82	469.48	511.16	366.70	403.74	440.78
61	190.76	217.62	244.46	162.98	185.20	207.42	318.54	355.58	392.62	288.92	322.24	355.58	448.18	490.78	533.38	387.06	425.04	463.00
62	200.02	227.80	255.58	168.54	191.68	214.84	335.22	373.18	411.14	301.88	336.14	370.40	464.86	508.38	551.90	409.30	449.12	488.92
63	209.28	237.98	266.68	181.50	205.58	229.64	353.74	393.56	433.36	318.54	353.74	388.92	485.22	529.68	574.12	425.96	466.70	507.44
64	222.24	251.88	281.50	192.60	218.54	244.46	366.70	407.44	448.18	331.50	367.62	403.74	505.60	550.98	596.34	446.34	488.00	529.68
65	235.20	267.62	300.02	201.86	228.72	255.58	388.92	431.52	474.12	353.74	391.70	429.66	527.82	575.04	622.28	464.86	508.38	551.90
66	275.94	310.22	344.48	235.20	263.92	292.62	450.04	495.42	540.78	403.74	444.48	485.22	600.04	650.06	700.06	524.12	571.34	618.56
67	322.24	359.28	396.32	279.66	312.06	344.48	513.00	562.08	611.16	457.44	500.96	544.48	674.12	727.84	781.54	581.52	631.54	681.54
68	366.70	407.44	448.18	314.84	350.02	385.22	574.12	625.98	677.84	513.00	560.24	607.46	742.66	799.14	855.62	640.80	694.50	748.20
69	416.70	460.22	503.74	353.74	391.70	429.66	633.38	688.94	744.50	570.42	620.42	670.42	822.28	883.40	944.52	698.20	754.70	811.18
70	461.14	508.38	555.60	390.78	432.44	474.12	696.36	755.62	814.88	622.28	675.98	729.68	894.52	958.42	999.98	751.92	811.18	870.44
71	501.90	550.98	600.04	427.82	471.34	514.86	759.32	822.28	885.26	674.12	729.68	785.24	963.04	999.98	999.98	811.18	874.14	937.12
72	551.90	603.76	655.60	464.86	512.08	559.30	820.44	886.18	951.92	731.54	789.88	848.22	999.98	999.98	999.98	868.58	934.34	999.98
73	596.34	651.90	707.46	503.74	553.74	603.76	883.40	952.86	999.98	783.40	845.44	907.48	999.98	999.98	999.98	927.86	997.30	999.98
74	638.94	697.28	755.62	540.78	594.50	648.20	944.52	999.98	999.98	837.10	901.92	966.74	999.98	999.98	999.98	985.26	999.98	999.98
75	690.80	752.84	814.88	583.38	639.86	696.36	999.98	999.98	999.98	896.36	964.90	999.98	999.98	999.98	999.98	999.98	999.98	999.98
76	746.36	815.80	885.26	631.54	695.42	759.32	999.98	999.98	999.98	964.90	999.98	999.98	999.98	999.98	999.98	999.98	999.98	999.98
77	805.62	882.48	959.34	679.68	750.98	822.28	999.98	999.98	999.98	999.98	999.98	999.98	999.98	999.98	999.98	999.98	999.98	999.98
78	861.18	945.44	999.98	727.84	806.54	885.26	999.98	999.98	999.98	999.98	999.98	999.98	999.98	999.98	999.98	999.98	999.98	999.98
79	920.44	999.98	999.98	775.98	862.10	948.22	999.98	999.98	999.98	999.98	999.98	999.98	999.98	999.98	999.98	999.98	999.98	999.98

EXHIBIT VIII

RiverSource Life Insurance Company
 227 Ameriprise Financial Center
 Minneapolis, MN 55474

Annual Premiums with 85.2% Rate Increase
 Policies Issued On or After September 16, 2002

Comprehensive Reimbursement Policy
 FORM: 30160A-PA, with Endorsement Form 32100-PA

Annual Premiums Per \$10 Daily Benefit

6 YEAR BENEFIT PERIOD

Issue Age	No Benefit Increase Option						Simple Benefit Increase Option						Compound Benefit Increase Option					
	Deductible			Deductible			Deductible			Deductible			Deductible			Deductible		
	20 days		90 days	20 days		90 days	20 days		90 days	20 days		90 days	20 days		90 days	20 days		90 days
	Home Care Percentage		Home Care Percentage		Home Care Percentage		Home Care Percentage		Home Care Percentage		Home Care Percentage		Home Care Percentage		Home Care Percentage		Home Care Percentage	
	50%	75%	100%	50%	75%	100%	50%	75%	100%	50%	75%	100%	50%	75%	100%	50%	75%	100%
40	85.20	98.16	111.12	74.08	85.20	96.30	122.24	138.90	155.56	103.72	118.52	133.34	177.80	200.02	222.24	148.16	166.68	185.20
41	85.20	98.16	111.12	74.08	85.20	96.30	122.24	138.90	155.56	103.72	118.52	133.34	177.80	200.02	222.24	148.16	166.68	185.20
42	85.20	98.16	111.12	74.08	85.20	96.30	122.24	138.90	155.56	103.72	118.52	133.34	177.80	200.02	222.24	148.16	166.68	185.20
43	85.20	98.16	111.12	74.08	85.20	96.30	122.24	138.90	155.56	103.72	118.52	133.34	177.80	200.02	222.24	148.16	166.68	185.20
44	85.20	98.16	111.12	74.08	85.20	96.30	122.24	138.90	155.56	103.72	118.52	133.34	177.80	200.02	222.24	148.16	166.68	185.20
45	85.20	98.16	111.12	74.08	85.20	96.30	122.24	138.90	155.56	103.72	118.52	133.34	177.80	200.02	222.24	148.16	166.68	185.20
46	85.20	98.16	111.12	74.08	85.20	96.30	122.24	138.90	155.56	103.72	118.52	133.34	177.80	200.02	222.24	151.86	170.38	188.90
47	87.04	100.94	114.82	74.08	85.20	96.30	129.64	148.16	166.68	107.42	122.24	137.04	183.34	206.50	229.64	157.42	176.86	196.32
48	87.04	100.94	114.82	75.94	87.98	100.00	135.20	154.64	174.08	112.98	128.72	144.46	187.06	210.20	233.36	161.12	180.58	200.02
49	88.90	103.72	118.52	75.94	87.98	100.00	142.60	162.06	181.50	116.68	132.42	148.16	192.60	216.68	240.76	170.38	190.76	211.12
50	92.60	107.42	122.24	81.48	94.46	107.42	148.16	168.54	188.90	122.24	138.90	155.56	196.32	220.38	244.46	179.64	200.94	222.24
51	94.46	110.20	125.94	81.48	94.46	107.42	153.72	175.02	196.32	122.24	138.90	155.56	203.72	229.64	255.58	183.34	204.64	225.94
52	94.46	110.20	125.94	81.48	94.46	107.42	157.42	178.72	200.02	125.94	142.60	159.28	211.12	237.06	262.98	188.90	211.12	233.36
53	96.30	112.98	129.64	83.34	97.24	111.12	162.98	185.20	207.42	133.34	151.86	170.38	216.68	243.54	270.40	192.60	214.84	237.06
54	96.30	112.98	129.64	83.34	97.24	111.12	168.54	191.68	214.84	140.76	159.28	177.80	220.38	247.24	274.10	198.16	221.32	244.46
55	103.72	122.24	140.76	88.90	103.72	118.52	177.80	201.86	225.94	146.30	165.76	185.20	225.94	253.72	281.50	211.12	235.20	259.28
56	111.12	129.64	148.16	92.60	107.42	122.24	188.90	214.84	240.76	155.56	175.94	196.32	238.90	267.62	296.32	222.24	248.16	274.10
57	120.38	139.82	159.28	98.16	113.90	129.64	198.16	225.02	251.88	164.82	186.12	207.42	255.58	285.20	314.84	235.20	262.06	288.92
58	129.64	150.02	170.38	107.42	124.08	140.76	214.84	242.62	270.40	181.50	203.72	225.94	275.94	306.50	337.06	251.88	279.66	307.44
59	135.20	156.50	177.80	118.52	137.04	155.56	224.10	252.80	281.50	190.76	213.90	237.06	290.76	323.18	355.58	264.84	293.54	322.24
60	148.16	170.38	192.60	124.08	143.54	162.98	237.06	266.68	296.32	207.42	231.50	255.58	311.14	344.48	377.80	281.50	311.14	340.76
61	155.56	177.80	200.02	127.78	147.24	166.68	250.02	280.58	311.14	218.54	244.46	270.40	324.10	358.36	392.62	294.46	325.02	355.58
62	161.12	184.28	207.42	137.04	157.42	177.80	261.14	293.54	325.96	227.80	254.66	281.50	337.06	372.26	407.44	312.98	345.40	377.80
63	170.38	194.46	218.54	146.30	167.60	188.90	274.10	307.44	340.76	244.46	272.24	300.02	357.44	393.56	429.66	325.96	359.28	392.62
64	185.20	211.12	237.06	151.86	174.08	196.32	287.06	321.32	355.58	253.72	282.44	311.14	374.10	411.14	448.18	342.62	376.88	411.14
65	194.46	221.32	248.16	161.12	184.28	207.42	301.88	338.00	374.10	268.54	299.10	329.66	394.48	434.30	474.12	355.58	390.78	425.96
66	224.10	252.80	281.50	188.90	214.84	240.76	342.62	382.44	422.26	311.14	344.48	377.80	448.18	490.78	533.38	394.48	432.44	470.40
67	257.42	289.84	322.24	218.54	246.32	274.10	388.92	431.52	474.12	353.74	389.84	425.96	501.90	549.12	596.34	437.08	479.66	522.26
68	287.06	321.32	355.58	240.76	270.40	300.02	431.52	476.90	522.26	394.48	434.30	474.12	555.60	605.60	655.60	483.38	528.74	574.12
69	318.54	355.58	392.62	274.10	307.44	340.76	472.26	521.34	570.42	435.22	476.90	518.56	613.02	667.64	722.28	525.96	575.98	625.98
70	348.18	388.92	429.66	303.72	338.92	374.10	518.56	570.42	622.28	477.82	522.26	566.72	663.02	720.42	777.84	572.26	626.90	681.54
71	377.80	420.40	463.00	329.66	366.70	403.74	563.00	618.56	674.12	522.26	570.42	618.56	720.42	782.48	844.52	614.86	672.28	729.68
72	409.30	454.66	500.04	363.00	403.74	444.48	601.90	660.24	718.58	559.30	609.30	659.32	774.14	838.96	903.78	657.46	719.50	781.54
73	440.78	488.92	537.08	388.92	431.52	474.12	646.34	708.40	770.44	607.46	661.16	714.88	827.84	897.30	966.74	700.06	764.88	829.70
74	472.26	523.20	574.12	418.56	463.00	507.44	692.64	757.46	822.28	646.34	702.84	759.32	881.56	953.78	999.98	742.66	812.10	881.56
75	509.30	563.94	618.56	448.18	496.34	544.48	738.94	808.40	877.84	688.94	748.20	807.48	942.66	999.98	999.98	790.80	863.96	937.12
76	572.26	630.60	688.94	511.16	563.00	614.86	824.14	899.14	974.16	774.14	838.96	903.78	999.98	999.98	999.98	877.84	957.48	999.98
77	637.08	700.06	763.02	575.98	632.46	688.94	907.48	987.12	999.98	859.32	929.70	999.98	999.98	999.98	999.98	968.60	999.98	999.98
78	700.06	766.72	833.40	640.80	701.90	763.02	998.22	999.98	999.98	950.08	999.98	999.98	999.98	999.98	999.98	999.98	999.98	999.98
79	770.44	842.66	914.88	709.32	775.06	840.80	999.98	999.98	999.98	999.98	999.98	999.98	999.98	999.98	999.98	999.98	999.98	999.98

EXHIBIT VIII

RiverSource Life Insurance Company
227 Ameriprise Financial Center
Minneapolis, MN 55474

Annual Premiums with 85.2% Rate Increase
Policies Issued On or After September 16, 2002

Comprehensive Reimbursement Policy
FORM: 30160A-PA, with Endorsement Form 32100-PA

Annual Premiums Per \$10 Daily Benefit

4 YEAR BENEFIT PERIOD

Issue Age	No Benefit Increase Option						Simple Benefit Increase Option						Compound Benefit Increase Option					
	Deductible			Deductible			Deductible			Deductible			Deductible			Deductible		
	20 days		90 days	20 days		90 days	20 days		90 days	20 days		90 days	20 days		90 days	20 days		90 days
	Home Care Percentage	Home Care Percentage	Home Care Percentage	Home Care Percentage	Home Care Percentage	Home Care Percentage	Home Care Percentage	Home Care Percentage	Home Care Percentage	Home Care Percentage	Home Care Percentage	Home Care Percentage	Home Care Percentage	Home Care Percentage	Home Care Percentage	Home Care Percentage	Home Care Percentage	Home Care Percentage
	50%	75%	100%	50%	75%	100%	50%	75%	100%	50%	75%	100%	50%	75%	100%	50%	75%	100%
40	70.38	81.48	92.60	50.00	58.34	66.68	103.72	118.52	133.34	85.20	98.16	111.12	159.28	177.80	196.32	140.76	155.56	170.38
41	70.38	81.48	92.60	50.00	58.34	66.68	103.72	118.52	133.34	85.20	98.16	111.12	159.28	177.80	196.32	140.76	155.56	170.38
42	70.38	81.48	92.60	50.00	58.34	66.68	103.72	118.52	133.34	85.20	98.16	111.12	159.28	177.80	196.32	140.76	155.56	170.38
43	70.38	81.48	92.60	50.00	58.34	66.68	103.72	118.52	133.34	85.20	98.16	111.12	159.28	177.80	196.32	140.76	155.56	170.38
44	70.38	81.48	92.60	50.00	58.34	66.68	103.72	118.52	133.34	85.20	98.16	111.12	159.28	177.80	196.32	140.76	155.56	170.38
45	70.38	81.48	92.60	50.00	58.34	66.68	103.72	118.52	133.34	85.20	98.16	111.12	159.28	177.80	196.32	140.76	155.56	170.38
46	70.38	81.48	92.60	50.00	58.34	66.68	103.72	118.52	133.34	85.20	98.16	111.12	159.28	177.80	196.32	140.76	155.56	170.38
47	70.38	81.48	92.60	50.00	58.34	66.68	107.42	122.24	137.04	85.20	98.16	111.12	166.68	185.20	203.72	140.76	155.56	170.38
48	72.22	84.26	96.30	51.86	61.12	70.38	109.26	125.02	140.76	88.90	101.86	114.82	168.54	187.98	207.42	146.30	162.06	177.80
49	75.94	87.98	100.00	55.56	64.82	74.08	112.98	128.72	144.46	90.74	104.64	118.52	172.24	191.68	211.12	146.30	162.06	177.80
50	77.78	90.74	103.72	59.26	70.38	81.48	118.52	135.20	151.86	94.46	108.34	122.24	177.80	198.16	218.54	151.86	168.54	185.20
51	77.78	90.74	103.72	59.26	70.38	81.48	118.52	135.20	151.86	94.46	108.34	122.24	177.80	198.16	218.54	151.86	168.54	185.20
52	81.48	94.46	107.42	66.68	77.78	88.90	122.24	138.90	155.56	96.30	111.12	125.94	181.50	201.86	222.24	151.86	168.54	185.20
53	83.34	97.24	111.12	68.52	80.56	92.60	125.94	144.46	162.98	103.72	118.52	133.34	183.34	204.64	225.94	159.28	177.80	196.32
54	83.34	97.24	111.12	68.52	80.56	92.60	129.64	148.16	166.68	103.72	118.52	133.34	187.06	208.36	229.64	159.28	177.80	196.32
55	88.90	103.72	118.52	74.08	87.04	100.00	135.20	154.64	174.08	109.26	125.02	140.76	192.60	214.84	237.06	168.54	187.98	207.42
56	92.60	107.42	122.24	77.78	90.74	103.72	148.16	168.54	188.90	118.52	135.20	151.86	205.58	228.72	251.88	177.80	198.16	218.54
57	98.16	113.90	129.64	83.34	97.24	111.12	157.42	178.72	200.02	129.64	148.16	166.68	214.84	238.90	262.98	187.06	208.36	229.64
58	107.42	124.08	140.76	88.90	103.72	118.52	166.68	188.90	211.12	142.60	162.06	181.50	231.50	258.36	285.20	196.32	218.54	240.76
59	118.52	137.04	155.56	94.46	110.20	125.94	179.64	202.80	225.94	151.86	172.24	192.60	244.46	272.24	300.02	214.84	238.90	262.98
60	124.08	143.54	162.98	107.42	124.08	140.76	192.60	218.54	244.46	166.68	188.90	211.12	259.28	288.92	318.54	225.94	251.88	277.80
61	129.64	150.02	170.38	111.12	127.78	144.46	201.86	228.72	255.58	179.64	202.80	225.94	268.54	299.10	329.66	235.20	262.06	288.92
62	138.90	160.20	181.50	118.52	137.04	155.56	214.84	242.62	270.40	188.90	212.98	237.06	283.36	315.76	348.18	253.72	282.44	311.14
63	148.16	170.38	192.60	124.08	143.54	162.98	224.10	252.80	281.50	200.02	225.94	251.88	298.18	332.44	366.70	262.98	292.62	322.24
64	153.72	176.86	200.02	129.64	150.02	170.38	233.36	262.98	292.62	212.98	239.84	266.68	307.44	342.62	377.80	275.94	306.50	337.06
65	162.98	187.06	211.12	138.90	160.20	181.50	253.72	286.14	318.54	227.80	256.50	285.20	325.96	363.00	400.04	292.62	325.96	359.28
66	190.76	217.62	244.46	161.12	184.28	207.42	287.06	321.32	355.58	257.42	287.98	318.54	366.70	407.44	448.18	327.80	363.92	400.04
67	218.54	248.16	277.80	188.90	214.84	240.76	322.24	359.28	396.32	294.46	328.74	363.00	409.30	452.82	496.34	368.54	408.36	448.18
68	242.62	275.02	307.44	214.84	242.62	270.40	363.00	403.74	444.48	327.80	363.92	400.04	457.44	504.68	551.90	407.44	450.04	492.64
69	270.40	305.58	340.76	233.36	262.98	292.62	398.18	441.70	485.22	361.14	400.96	440.78	501.90	552.82	603.76	453.74	500.96	548.20
70	298.18	336.14	374.10	262.98	296.32	329.66	438.92	486.16	533.38	396.32	438.92	481.52	546.34	600.98	655.60	492.64	542.64	592.64
71	325.96	366.70	407.44	288.92	324.10	359.28	474.12	524.12	574.12	429.66	474.12	518.56	588.94	646.34	703.76	529.68	583.38	637.08
72	350.02	393.56	437.08	307.44	344.48	381.52	511.16	564.86	618.56	463.00	511.16	559.30	635.24	697.28	759.32	570.42	627.82	685.24
73	375.96	421.34	466.70	335.22	375.04	414.84	550.04	606.54	663.02	496.34	546.34	596.34	677.84	742.66	807.48	611.16	672.28	733.40
74	405.58	454.66	503.74	361.14	402.82	444.48	588.94	648.20	707.46	533.38	587.08	640.80	725.98	794.50	863.04	650.06	713.94	777.84
75	437.08	488.92	540.78	388.92	433.36	477.82	629.68	692.64	755.62	568.56	625.06	681.54	770.44	842.66	914.88	696.36	764.88	833.40
76	498.18	554.68	611.16	446.34	495.42	544.48	696.36	764.88	833.40	635.24	697.28	759.32	838.96	917.66	996.38	764.88	839.88	914.88
77	555.60	616.72	677.84	507.44	561.16	614.86	764.88	838.04	911.18	703.76	770.44	837.10	907.48	992.68	999.98	831.54	912.12	992.68
78	618.56	683.38	748.20	570.42	627.82	685.24	837.10	916.74	996.38	775.98	849.14	922.30	979.70	999.98	999.98	903.78	990.82	999.98
79	681.54	751.92	822.28	633.38	696.36	759.32	907.48	992.68	999.98	846.36	925.08	999.98	999.98	999.98	999.98	972.30	999.98	999.98
80				696.36	763.02					918.60	999.98					999.98	999.98	
81				757.46	828.78					992.68	999.98					999.98	999.98	
82				824.14	901.00					999.98	999.98					999.98	999.98	
83				890.82	973.22					999.98	999.98					999.98	999.98	
84				951.92	999.98					999.98	999.98					999.98	999.98	

EXHIBIT VIII

RiverSource Life Insurance Company
227 Ameriprise Financial Center
Minneapolis, MN 55474

Annual Premiums with 85.2% Rate Increase
Policies Issued On or After September 16, 2002

Comprehensive Reimbursement Policy
FORM: 30160A-PA, with Endorsement Form 32100-PA

Annual Premiums Per \$10 Daily Benefit

2 YEAR BENEFIT PERIOD

Issue Age	No Benefit Increase Option						Simple Benefit Increase Option						Compound Benefit Increase Option					
	Deductible			Deductible			Deductible			Deductible			Deductible			Deductible		
	20 days		90 days	20 days		90 days	20 days		90 days	20 days		90 days	20 days		90 days	20 days		90 days
	Home	Care	Percentage	Home	Care	Percentage	Home	Care	Percentage	Home	Care	Percentage	Home	Care	Percentage	Home	Care	Percentage
40	50.00	58.34	66.68	38.90	45.38	51.86	79.64	91.68	103.72	62.96	72.22	81.48	112.98	126.86	140.76	90.74	102.78	114.82
41	50.00	58.34	66.68	38.90	45.38	51.86	79.64	91.68	103.72	62.96	72.22	81.48	112.98	126.86	140.76	90.74	102.78	114.82
42	50.00	58.34	66.68	38.90	45.38	51.86	79.64	91.68	103.72	62.96	72.22	81.48	112.98	126.86	140.76	90.74	102.78	114.82
43	50.00	58.34	66.68	38.90	45.38	51.86	79.64	91.68	103.72	62.96	72.22	81.48	112.98	126.86	140.76	90.74	102.78	114.82
44	50.00	58.34	66.68	38.90	45.38	51.86	79.64	91.68	103.72	62.96	72.22	81.48	112.98	126.86	140.76	90.74	102.78	114.82
45	50.00	58.34	66.68	38.90	45.38	51.86	79.64	91.68	103.72	62.96	72.22	81.48	112.98	126.86	140.76	90.74	102.78	114.82
46	50.00	58.34	66.68	38.90	45.38	51.86	79.64	91.68	103.72	62.96	72.22	81.48	112.98	126.86	140.76	90.74	102.78	114.82
47	50.00	58.34	66.68	38.90	45.38	51.86	83.34	95.38	107.42	66.68	75.94	85.20	118.52	133.34	148.16	98.16	110.20	122.24
48	51.86	61.12	70.38	40.74	48.16	55.56	85.20	98.16	111.12	70.38	81.48	92.60	118.52	133.34	148.16	103.72	116.68	129.64
49	51.86	61.12	70.38	40.74	48.16	55.56	88.90	101.86	114.82	74.08	85.20	96.30	124.08	139.82	155.56	103.72	116.68	129.64
50	59.26	70.38	81.48	46.30	54.64	62.96	94.46	108.34	122.24	79.64	91.68	103.72	124.08	139.82	155.56	109.26	123.16	137.04
51	59.26	70.38	81.48	46.30	54.64	62.96	94.46	108.34	122.24	79.64	91.68	103.72	129.64	146.30	162.98	112.98	126.86	140.76
52	59.26	70.38	81.48	46.30	54.64	62.96	101.86	115.76	129.64	83.34	95.38	107.42	129.64	146.30	162.98	112.98	126.86	140.76
53	61.12	73.16	85.20	48.16	57.42	66.68	103.72	118.52	133.34	85.20	98.16	111.12	140.76	159.28	177.80	118.52	133.34	148.16
54	61.12	73.16	85.20	48.16	57.42	66.68	107.42	122.24	137.04	88.90	101.86	114.82	140.76	159.28	177.80	122.24	137.04	151.86
55	70.38	83.34	96.30	55.56	66.68	77.78	112.98	128.72	144.46	94.46	108.34	122.24	146.30	165.76	185.20	127.78	143.54	159.28
56	74.08	87.04	100.00	55.56	66.68	77.78	116.68	132.42	148.16	101.86	115.76	129.64	151.86	172.24	192.60	137.04	153.72	170.38
57	79.64	93.52	107.42	61.12	73.16	85.20	125.94	142.60	159.28	111.12	125.94	140.76	161.12	182.42	203.72	144.46	162.98	181.50
58	85.20	100.00	114.82	70.38	83.34	96.30	133.34	151.86	170.38	116.68	132.42	148.16	174.08	196.32	218.54	153.72	173.16	192.60
59	90.74	106.50	122.24	74.08	87.04	100.00	146.30	165.76	185.20	125.94	142.60	159.28	183.34	206.50	229.64	159.28	179.64	200.02
60	100.00	116.68	133.34	79.64	93.52	107.42	151.86	172.24	192.60	133.34	151.86	170.38	192.60	216.68	240.76	172.24	193.54	214.84
61	107.42	124.08	140.76	85.20	100.00	114.82	161.12	182.42	203.72	146.30	165.76	185.20	203.72	229.64	255.58	177.80	200.02	222.24
62	114.82	133.34	151.86	88.90	103.72	118.52	166.68	188.90	211.12	151.86	172.24	192.60	216.68	243.54	270.40	183.34	206.50	229.64
63	120.38	139.82	159.28	94.46	110.20	125.94	179.64	202.80	225.94	161.12	182.42	203.72	225.94	253.72	281.50	192.60	216.68	240.76
64	125.94	146.30	166.68	100.00	116.68	133.34	185.20	209.28	233.36	166.68	188.90	211.12	235.20	263.92	292.62	200.02	225.94	251.88
65	135.20	156.50	177.80	111.12	129.64	148.16	196.32	222.24	248.16	179.64	202.80	225.94	248.16	277.80	307.44	212.98	239.84	266.68
66	153.72	176.86	200.02	125.94	146.30	166.68	218.54	246.32	274.10	196.32	222.24	248.16	279.66	312.06	344.48	231.50	260.20	288.92
67	170.38	196.32	222.24	140.76	162.98	185.20	237.06	266.68	296.32	214.84	242.62	270.40	305.58	339.84	374.10	253.72	284.28	314.84
68	192.60	220.38	248.16	159.28	183.34	207.42	262.98	296.32	329.66	229.64	259.28	288.92	337.06	374.10	411.14	275.94	310.22	344.48
69	207.42	237.06	266.68	175.94	202.80	229.64	285.20	320.40	355.58	246.32	278.72	311.14	368.54	408.36	448.18	298.18	334.28	370.40
70	233.36	266.68	300.02	194.46	223.16	251.88	309.28	347.26	385.22	264.84	299.10	333.36	400.04	442.62	485.22	324.10	363.92	403.74
71	248.16	283.36	318.54	209.28	239.84	270.40	333.36	374.10	414.84	279.66	315.76	351.88	429.66	474.12	518.56	342.62	384.30	425.96
72	266.68	303.72	340.76	229.64	262.98	296.32	351.88	394.48	437.08	298.18	336.14	374.10	461.14	508.38	555.60	364.84	408.36	451.88
73	287.06	326.88	366.70	244.46	279.66	314.84	375.96	421.34	466.70	314.84	355.58	396.32	492.64	542.64	592.64	387.06	434.30	481.52
74	305.58	347.26	388.92	262.98	300.02	337.06	400.04	448.18	496.34	333.36	375.96	418.56	522.26	574.12	625.98	409.30	458.38	507.44
75	325.96	370.40	414.84	283.36	323.18	363.00	424.10	475.04	525.96	348.18	392.62	437.08	555.60	611.16	666.72	437.08	488.92	540.78
76	372.26	421.34	470.40	324.10	367.62	411.14	463.00	518.56	574.12	387.06	436.14	485.22	600.04	659.32	718.58	483.38	539.86	596.34
77	418.56	472.26	525.96	374.10	422.26	470.40	507.44	566.72	625.98	429.66	483.38	537.08	646.34	710.24	774.14	529.68	590.78	651.90
78	464.86	523.20	581.52	422.26	475.96	529.68	546.34	610.24	674.12	466.70	524.12	581.52	696.36	764.88	833.40	577.82	642.64	707.46
79	511.16	574.12	637.08	463.00	520.42	577.82	590.78	660.24	729.68	514.86	577.82	640.80	740.80	813.02	885.26	624.12	693.58	763.02
80				514.86	577.82					551.90	618.56					668.58	741.72	
81				559.30	625.98					594.50	665.80					718.58	796.36	
82				607.46	679.68					638.94	715.80					764.88	847.30	
83				659.32	737.10					683.38	765.80					813.02	899.14	
84				707.46	790.80					729.68	816.74					859.32	950.08	

RIVERSOURCE LIFE INSURANCE COMPANY

Address: 227 Ameriprise Financial Center, Minneapolis, MN 55474

**Pennsylvania Supplement to the
Actuarial Memorandum for 30160A, Subject to Endorsement Form 32100**

June 2015

<u>Product or Rider</u>	<u>Form Number</u>
Long Term Care Policy Form	30160A-PA
Long Term Care Insurance Endorsement Form	32100-PA

1. Purpose of Filing

This supplement has been prepared for the purpose of demonstrating the compliance of the requested rate increase with Chapter 18 Section 3803(c) and Regulation 89.83 of the Insurance Regulations for the state of Pennsylvania. It may not be appropriate for other purposes.

2. Demonstration of Compliance with Chapter 18 Section 3803(c)

We believe that we comply with this subsection of the regulation by submitting these rates before they are being used.

3. Demonstration of Compliance with Regulation 89.83

89.83(a): General. This subsection requires no action.

89.83(b): New Filings. This subsection is not applicable.

89.83(c): Revision of Current Rates.

(1): This rate increase filing complies with the requirements set forth in Regulation 89a.118.

(2): Section 2 of the Actuarial Memorandum provides a description of benefits. A copy of the policy form and endorsement form are included with this filing.

(2)(i): The reason for this rate increase is due to a combination of actual voluntary lapse and mortality running less than expected in pricing. A rate increase is considered an effective way to reduce projected losses.

At this time, a premium rate increase of 85.2% is being requested for policies issued on or after September 16, 2002 in Pennsylvania with endorsement form 32100-PA.

Existing rates can be found in Attachment 1 to this supplement, and revised rates are shown in Attachment 2 to this supplement. As shown in Section 18 of the Actuarial Memorandum, the average annual premium based on December 31, 2014 inforce before and after the requested rate increase for policies issued on or after September 16, 2002 is as follows:

Before increase:	\$1,467
After increase:	\$2,718

Attachment 3 to this supplement displays nationwide experience showing earned

RIVERSOURCE LIFE INSURANCE COMPANY

Address: 227 Ameriprise Financial Center, Minneapolis, MN 55474

**Pennsylvania Supplement to the
Actuarial Memorandum for 30160A, Subject to Endorsement Form 32100**

June 2015

premiums and incurred claims, both with and without the requested rate increase. Attachment 4 to this supplement displays nationwide experience showing written premiums and paid claims, both with and without the requested rate increase. The actual and projected premiums in Attachments 3 and 4 assume that there were no previous rate increases implemented on all policies on a nationwide basis.

Attachments 5 and 6 display corresponding Pennsylvania-specific experience. Note that the actual and projected premiums in these attachments assume that there were no previous rate increases implemented on all policies, regardless of issue date. Please note that RiverSource Life does not view Pennsylvania-specific experience as fully credible but is providing it as required.

(2)(ii)(A): There have been no previous rate increases on this form, for policies issued on or after September 16, 2002.

(2)(ii)(B): RiverSource Life currently pays a commission of 4.55% of premium in most states. This renewal commission rate was reduced periodically from 2008 through 2013.

(2)(ii)(C)(I): Premiums earned and written since inception for nationwide experience can be found in Attachments 3 and 4 to this supplement, respectively. The actual and projected premiums in Attachments 3 and 4 assume that there were no previous rate increases implemented on all policies on a nationwide basis.

Premiums earned and written since inception for Pennsylvania-specific experience can be found in Attachments 5 and 6 to this supplement, respectively. Note that the actual and projected premiums in these attachments assume that there were no previous rate increases implemented on all policies, regardless of issue date. Please note that RiverSource Life does not view Pennsylvania-specific experience as fully credible but is providing it as required.

Details of reserve balances and calculation basis for both nationwide and Pennsylvania-specific experience can be found in Attachment 7. Please note that RiverSource Life does not view Pennsylvania-specific experience as fully credible but is providing it as required.

(2)(ii)(C)(II): Claims incurred and paid since inception for nationwide experience can be found in Attachments 3 and 4 to this supplement, respectively.

Claims incurred and paid since inception for Pennsylvania-specific experience can be found in Attachments 5 and 6 to this supplement, respectively. Please note that RiverSource Life does not view Pennsylvania-specific experience as fully credible but is providing it as required.

Attachments 8 and 9 provide a durational loss ratio analysis for nationwide and Pennsylvania-specific experience, respectively. The actual and projected premiums in Attachment 8 assume that there were no previous rate increases implemented on

RIVERSOURCE LIFE INSURANCE COMPANY

Address: 227 Ameriprise Financial Center, Minneapolis, MN 55474

**Pennsylvania Supplement to the
Actuarial Memorandum for 30160A, Subject to Endorsement Form 32100**

June 2015

all policies on a nationwide basis, and the actual and projected premiums in Attachment 9 assume that there were no previous rate increases implemented on all policies, regardless of issue date. Please note that RiverSource Life does not view Pennsylvania-specific experience as fully credible but is providing it as required.

(2)(ii)(D): We believe that we have provided information sufficient to support the rate increase requested in this filing.

(2)(iii): We believe that data used in this rate increase filing is in agreement with those used in the annual statement filed with the Department.

89.83 (d): *Filing Procedure*. We believe this rate increase filing complies with this subsection.

Attachment 1

RiverSource Life Insurance Company
227 Ameriprise Financial Center
Minneapolis, MN 55474

Current Annual Premiums
Policies Issued On or After September 16, 2002

Comprehensive Reimbursement Policy
FORM: 30160A-PA, with Endorsement Form 32100-PA

Annual Premiums Per \$10 Daily Benefit

LIFETIME BENEFIT PERIOD

Issue Age	No Benefit Increase Option						Simple Benefit Increase Option						Compound Benefit Increase Option					
	Deductible			Deductible			Deductible			Deductible			Deductible			Deductible		
	20 days		90 days	20 days		90 days	20 days		90 days	20 days		90 days	20 days		90 days	20 days		90 days
	Home Care Percentage		Home Care Percentage		Home Care Percentage		Home Care Percentage		Home Care Percentage		Home Care Percentage		Home Care Percentage		Home Care Percentage		Home Care Percentage	
	50%	75%	100%	50%	75%	100%	50%	75%	100%	50%	75%	100%	50%	75%	100%	50%	75%	100%
40	56.00	64.00	72.00	46.00	53.00	60.00	89.00	101.50	114.00	82.00	93.00	104.00	120.00	135.00	150.00	108.00	121.00	134.00
41	56.00	64.00	72.00	46.00	53.00	60.00	89.00	101.50	114.00	82.00	93.00	104.00	120.00	135.00	150.00	108.00	121.00	134.00
42	56.00	64.00	72.00	46.00	53.00	60.00	89.00	101.50	114.00	82.00	93.00	104.00	120.00	135.00	150.00	108.00	121.00	134.00
43	56.00	64.00	72.00	46.00	53.00	60.00	89.00	101.50	114.00	82.00	93.00	104.00	120.00	135.00	150.00	108.00	121.00	134.00
44	56.00	64.00	72.00	46.00	53.00	60.00	89.00	101.50	114.00	82.00	93.00	104.00	120.00	135.00	150.00	108.00	121.00	134.00
45	56.00	64.00	72.00	46.00	53.00	60.00	89.00	101.50	114.00	82.00	93.00	104.00	120.00	135.00	150.00	108.00	121.00	134.00
46	56.00	64.00	72.00	46.00	53.00	60.00	91.00	103.50	116.00	82.00	93.00	104.00	124.00	139.00	154.00	112.00	125.00	138.00
47	57.00	65.50	74.00	47.00	54.50	62.00	96.00	109.00	122.00	85.00	96.50	108.00	129.00	144.50	160.00	116.00	130.00	144.00
48	57.00	65.50	74.00	49.00	56.50	64.00	100.00	114.00	128.00	87.00	98.50	110.00	136.00	152.00	168.00	119.00	133.50	148.00
49	60.00	69.00	78.00	50.00	58.00	66.00	102.00	116.00	130.00	88.00	100.00	112.00	141.00	157.50	174.00	123.00	137.50	152.00
50	60.00	69.00	78.00	52.00	60.00	68.00	105.00	119.50	134.00	90.00	102.00	114.00	151.00	168.50	186.00	126.00	141.00	156.00
51	62.00	72.00	82.00	53.00	61.50	70.00	108.00	123.00	138.00	95.00	107.50	120.00	155.00	172.50	190.00	129.00	144.50	160.00
52	64.00	74.00	84.00	53.00	61.50	70.00	110.00	125.00	140.00	95.00	107.50	120.00	160.00	178.00	196.00	135.00	150.50	166.00
53	65.00	75.50	86.00	58.00	67.00	76.00	113.00	128.50	144.00	98.00	111.00	124.00	165.00	183.50	202.00	138.00	154.00	170.00
54	65.00	75.50	86.00	58.00	67.00	76.00	118.00	134.00	150.00	100.00	113.00	126.00	172.00	191.00	210.00	141.00	157.50	174.00
55	68.00	79.00	90.00	62.00	72.00	82.00	121.00	137.50	154.00	104.00	118.00	132.00	179.00	198.50	218.00	147.00	164.50	182.00
56	73.00	84.50	96.00	64.00	74.00	84.00	129.00	146.50	164.00	111.00	125.50	140.00	190.00	210.00	230.00	158.00	176.00	194.00
57	80.00	92.00	104.00	69.00	79.50	90.00	138.00	156.00	174.00	120.00	135.00	150.00	199.00	219.50	240.00	169.00	187.50	206.00
58	85.00	97.50	110.00	74.00	85.00	96.00	145.00	163.50	182.00	127.00	142.50	158.00	211.00	232.50	254.00	178.00	197.00	216.00
59	90.00	103.00	116.00	79.00	90.50	102.00	156.00	175.00	194.00	136.00	152.00	168.00	222.00	244.00	266.00	189.00	208.50	228.00
60	98.00	112.00	126.00	84.00	96.00	108.00	163.00	182.50	202.00	147.00	164.50	182.00	231.00	253.50	276.00	198.00	218.00	238.00
61	103.00	117.50	132.00	88.00	100.00	112.00	172.00	192.00	212.00	156.00	174.00	192.00	242.00	265.00	288.00	209.00	229.50	250.00
62	108.00	123.00	138.00	91.00	103.50	116.00	181.00	201.50	222.00	163.00	181.50	200.00	251.00	274.50	298.00	221.00	242.50	264.00
63	113.00	128.50	144.00	98.00	111.00	124.00	191.00	212.50	234.00	172.00	191.00	210.00	262.00	286.00	310.00	230.00	252.00	274.00
64	120.00	136.00	152.00	104.00	118.00	132.00	198.00	220.00	242.00	179.00	198.50	218.00	273.00	297.50	322.00	241.00	263.50	286.00
65	127.00	144.50	162.00	109.00	123.50	138.00	210.00	233.00	256.00	191.00	211.50	232.00	285.00	310.50	336.00	251.00	274.50	298.00
66	149.00	167.50	186.00	127.00	142.50	158.00	243.00	267.50	292.00	218.00	240.00	262.00	324.00	351.00	378.00	283.00	308.50	334.00
67	174.00	194.00	214.00	151.00	168.50	186.00	277.00	303.50	330.00	247.00	270.50	294.00	364.00	393.00	422.00	314.00	341.00	368.00
68	198.00	220.00	242.00	170.00	189.00	208.00	310.00	338.00	366.00	277.00	302.50	328.00	401.00	431.50	462.00	346.00	375.00	404.00
69	225.00	248.50	272.00	191.00	211.50	232.00	342.00	372.00	402.00	308.00	335.00	362.00	444.00	477.00	510.00	377.00	407.50	438.00
70	249.00	274.50	300.00	211.00	233.50	256.00	376.00	408.00	440.00	336.00	365.00	394.00	483.00	517.50	552.00	406.00	438.00	470.00
71	271.00	297.50	324.00	231.00	254.50	278.00	410.00	444.00	478.00	364.00	394.00	424.00	520.00	556.00	592.00	438.00	472.00	506.00
72	298.00	326.00	354.00	251.00	276.50	302.00	443.00	478.50	514.00	395.00	426.50	458.00	563.00	601.50	640.00	469.00	504.50	540.00
73	322.00	352.00	382.00	272.00	299.00	326.00	477.00	514.50	552.00	423.00	456.50	490.00	601.00	641.50	682.00	501.00	538.50	576.00
74	345.00	376.50	408.00	292.00	321.00	350.00	510.00	549.00	588.00	452.00	487.00	522.00	640.00	682.00	724.00	532.00	571.00	610.00
75	373.00	406.50	440.00	315.00	345.50	376.00	547.00	588.50	630.00	484.00	521.00	558.00	683.00	727.50	772.00	567.00	608.50	650.00
76	403.00	440.50	478.00	341.00	375.50	410.00	588.00	634.00	680.00	521.00	562.50	604.00	728.00	777.00	826.00	604.00	650.00	696.00
77	435.00	476.50	518.00	367.00	405.50	444.00	631.00	681.50	732.00	556.00	602.00	648.00	775.00	828.50	882.00	643.00	693.50	744.00
78	465.00	510.50	556.00	393.00	435.50	478.00	672.00	727.00	782.00	593.00	643.50	694.00	820.00	878.00	936.00	682.00	737.00	792.00
79	497.00	546.50	596.00	419.00	465.50	512.00	715.00	775.50	836.00	632.00	688.00	744.00	865.00	927.50	990.00	722.00	782.00	842.00

Attachment 1

RiverSource Life Insurance Company
 227 Ameriprise Financial Center
 Minneapolis, MN 55474

Current Annual Premiums
 Policies Issued On or After September 16, 2002

Comprehensive Reimbursement Policy
 FORM: 30160A-PA, with Endorsement Form 32100-PA

Annual Premiums Per \$10 Daily Benefit

6 YEAR BENEFIT PERIOD

Issue Age	No Benefit Increase Option						Simple Benefit Increase Option						Compound Benefit Increase Option					
	Deductible			Deductible			Deductible			Deductible			Deductible			Deductible		
	20 days			90 days			20 days			90 days			20 days			90 days		
	Home Care Percentage	Home Care Percentage	Home Care Percentage	Home Care Percentage	Home Care Percentage	Home Care Percentage	Home Care Percentage	Home Care Percentage	Home Care Percentage	Home Care Percentage	Home Care Percentage	Home Care Percentage	Home Care Percentage	Home Care Percentage	Home Care Percentage	Home Care Percentage	Home Care Percentage	Home Care Percentage
40	50%	75%	100%	50%	75%	100%	50%	75%	100%	50%	75%	100%	50%	75%	100%	50%	75%	100%
41	46.00	53.00	60.00	40.00	46.00	52.00	66.00	75.00	84.00	56.00	64.00	72.00	96.00	108.00	120.00	80.00	90.00	100.00
42	46.00	53.00	60.00	40.00	46.00	52.00	66.00	75.00	84.00	56.00	64.00	72.00	96.00	108.00	120.00	80.00	90.00	100.00
43	46.00	53.00	60.00	40.00	46.00	52.00	66.00	75.00	84.00	56.00	64.00	72.00	96.00	108.00	120.00	80.00	90.00	100.00
44	46.00	53.00	60.00	40.00	46.00	52.00	66.00	75.00	84.00	56.00	64.00	72.00	96.00	108.00	120.00	80.00	90.00	100.00
45	46.00	53.00	60.00	40.00	46.00	52.00	66.00	75.00	84.00	56.00	64.00	72.00	96.00	108.00	120.00	80.00	90.00	100.00
46	46.00	53.00	60.00	40.00	46.00	52.00	66.00	75.00	84.00	56.00	64.00	72.00	96.00	108.00	120.00	82.00	92.00	102.00
47	47.00	54.50	62.00	40.00	46.00	52.00	70.00	80.00	90.00	58.00	66.00	74.00	99.00	111.50	124.00	85.00	95.50	106.00
48	47.00	54.50	62.00	41.00	47.50	54.00	73.00	83.50	94.00	61.00	69.50	78.00	101.00	113.50	126.00	87.00	97.50	108.00
49	48.00	56.00	64.00	41.00	47.50	54.00	77.00	87.50	98.00	63.00	71.50	80.00	104.00	117.00	130.00	92.00	103.00	114.00
50	50.00	58.00	66.00	44.00	51.00	58.00	80.00	91.00	102.00	66.00	75.00	84.00	106.00	119.00	132.00	97.00	108.50	120.00
51	51.00	59.50	68.00	44.00	51.00	58.00	83.00	94.50	106.00	66.00	75.00	84.00	110.00	124.00	138.00	99.00	110.50	122.00
52	51.00	59.50	68.00	44.00	51.00	58.00	85.00	96.50	108.00	68.00	77.00	86.00	114.00	128.00	142.00	102.00	114.00	126.00
53	52.00	61.00	70.00	45.00	52.50	60.00	88.00	100.00	112.00	72.00	82.00	92.00	117.00	131.50	146.00	104.00	116.00	128.00
54	52.00	61.00	70.00	45.00	52.50	60.00	91.00	103.50	116.00	76.00	86.00	96.00	119.00	133.50	148.00	107.00	119.50	132.00
55	56.00	66.00	76.00	48.00	56.00	64.00	96.00	109.00	122.00	79.00	89.50	100.00	122.00	137.00	152.00	114.00	127.00	140.00
56	60.00	70.00	80.00	50.00	58.00	66.00	102.00	116.00	130.00	84.00	95.00	106.00	129.00	144.50	160.00	120.00	134.00	148.00
57	65.00	75.50	86.00	53.00	61.50	70.00	107.00	121.50	136.00	89.00	100.50	112.00	138.00	154.00	170.00	127.00	141.50	156.00
58	70.00	81.00	92.00	58.00	67.00	76.00	116.00	131.00	146.00	98.00	110.00	122.00	149.00	165.50	182.00	136.00	151.00	166.00
59	73.00	84.50	96.00	64.00	74.00	84.00	121.00	136.50	152.00	103.00	115.50	128.00	157.00	174.50	192.00	143.00	158.50	174.00
60	80.00	92.00	104.00	67.00	77.50	88.00	128.00	144.00	160.00	112.00	125.00	138.00	168.00	186.00	204.00	152.00	168.00	184.00
61	84.00	96.00	108.00	69.00	79.50	90.00	135.00	151.50	168.00	118.00	132.00	146.00	175.00	193.50	212.00	159.00	175.50	192.00
62	87.00	99.50	112.00	74.00	85.00	96.00	141.00	158.50	176.00	123.00	137.50	152.00	182.00	201.00	220.00	169.00	186.50	204.00
63	92.00	105.00	118.00	79.00	90.50	102.00	148.00	166.00	184.00	132.00	147.00	162.00	193.00	212.50	232.00	176.00	194.00	212.00
64	100.00	114.00	128.00	82.00	94.00	106.00	155.00	173.50	192.00	137.00	152.50	168.00	202.00	222.00	242.00	185.00	203.50	222.00
65	105.00	119.50	134.00	87.00	99.50	112.00	163.00	182.50	202.00	145.00	161.50	178.00	213.00	234.50	256.00	192.00	211.00	230.00
66	121.00	136.50	152.00	102.00	116.00	130.00	185.00	206.50	228.00	168.00	186.00	204.00	242.00	265.00	288.00	213.00	233.50	254.00
67	139.00	156.50	174.00	118.00	133.00	148.00	210.00	233.00	256.00	191.00	210.50	230.00	271.00	296.50	322.00	236.00	259.00	282.00
68	155.00	173.50	192.00	130.00	146.00	162.00	233.00	257.50	282.00	213.00	234.50	256.00	300.00	327.00	354.00	261.00	285.50	310.00
69	172.00	192.00	212.00	148.00	166.00	184.00	255.00	281.50	308.00	235.00	257.50	280.00	331.00	360.50	390.00	284.00	311.00	338.00
70	188.00	210.00	232.00	164.00	183.00	202.00	280.00	308.00	336.00	258.00	282.00	306.00	358.00	389.00	420.00	309.00	338.50	368.00
71	204.00	227.00	250.00	178.00	198.00	218.00	304.00	334.00	364.00	282.00	308.00	334.00	389.00	422.50	456.00	332.00	363.00	394.00
72	221.00	245.50	270.00	196.00	218.00	240.00	325.00	356.50	388.00	302.00	329.00	356.00	418.00	453.00	488.00	355.00	388.50	422.00
73	238.00	264.00	290.00	210.00	233.00	256.00	349.00	382.50	416.00	328.00	357.00	386.00	447.00	484.50	522.00	378.00	413.00	448.00
74	255.00	282.50	310.00	226.00	250.00	274.00	374.00	409.00	444.00	349.00	379.50	410.00	476.00	515.00	554.00	401.00	438.50	476.00
75	275.00	304.50	334.00	242.00	268.00	294.00	399.00	436.50	474.00	372.00	404.00	436.00	509.00	550.50	592.00	427.00	466.50	506.00
76	309.00	340.50	372.00	276.00	304.00	332.00	445.00	485.50	526.00	418.00	453.00	488.00	556.00	601.00	646.00	474.00	517.00	560.00
77	344.00	378.00	412.00	311.00	341.50	372.00	490.00	533.00	576.00	464.00	502.00	540.00	605.00	653.50	702.00	523.00	569.50	616.00
78	378.00	414.00	450.00	346.00	379.00	412.00	539.00	585.50	632.00	513.00	554.50	596.00	654.00	706.00	758.00	572.00	622.00	672.00
79	416.00	455.00	494.00	383.00	418.50	454.00	587.00	636.50	686.00	561.00	605.50	650.00	702.00	757.00	812.00	619.00	672.50	726.00

Attachment 1

RiverSource Life Insurance Company
227 Ameriprise Financial Center
Minneapolis, MN 55474

Current Annual Premiums
Policies Issued On or After September 16, 2002

Comprehensive Reimbursement Policy
FORM: 30160A-PA, with Endorsement Form 32100-PA

Annual Premiums Per \$10 Daily Benefit

4 YEAR BENEFIT PERIOD

Issue Age	No Benefit Increase Option						Simple Benefit Increase Option						Compound Benefit Increase Option					
	Deductible			Deductible			Deductible			Deductible			Deductible			Deductible		
	20 days		90 days	20 days		90 days	20 days		90 days	20 days		90 days	20 days		90 days	20 days		90 days
	Home Care Percentage	Home Care Percentage	Home Care Percentage	Home Care Percentage	Home Care Percentage	Home Care Percentage	Home Care Percentage	Home Care Percentage	Home Care Percentage	Home Care Percentage	Home Care Percentage	Home Care Percentage	Home Care Percentage	Home Care Percentage	Home Care Percentage	Home Care Percentage	Home Care Percentage	Home Care Percentage
	50%	75%	100%	50%	75%	100%	50%	75%	100%	50%	75%	100%	50%	75%	100%	50%	75%	100%
40	38.00	44.00	50.00	27.00	31.50	36.00	56.00	64.00	72.00	46.00	53.00	60.00	86.00	96.00	106.00	76.00	84.00	92.00
41	38.00	44.00	50.00	27.00	31.50	36.00	56.00	64.00	72.00	46.00	53.00	60.00	86.00	96.00	106.00	76.00	84.00	92.00
42	38.00	44.00	50.00	27.00	31.50	36.00	56.00	64.00	72.00	46.00	53.00	60.00	86.00	96.00	106.00	76.00	84.00	92.00
43	38.00	44.00	50.00	27.00	31.50	36.00	56.00	64.00	72.00	46.00	53.00	60.00	86.00	96.00	106.00	76.00	84.00	92.00
44	38.00	44.00	50.00	27.00	31.50	36.00	56.00	64.00	72.00	46.00	53.00	60.00	86.00	96.00	106.00	76.00	84.00	92.00
45	38.00	44.00	50.00	27.00	31.50	36.00	56.00	64.00	72.00	46.00	53.00	60.00	86.00	96.00	106.00	76.00	84.00	92.00
46	38.00	44.00	50.00	27.00	31.50	36.00	56.00	64.00	72.00	46.00	53.00	60.00	86.00	96.00	106.00	76.00	84.00	92.00
47	38.00	44.00	50.00	27.00	31.50	36.00	58.00	66.00	74.00	46.00	53.00	60.00	90.00	100.00	110.00	76.00	84.00	92.00
48	39.00	45.50	52.00	28.00	33.00	38.00	59.00	67.50	76.00	48.00	55.00	62.00	91.00	101.50	112.00	79.00	87.50	96.00
49	41.00	47.50	54.00	30.00	35.00	40.00	61.00	69.50	78.00	49.00	56.50	64.00	93.00	103.50	114.00	79.00	87.50	96.00
50	42.00	49.00	56.00	32.00	38.00	44.00	64.00	73.00	82.00	51.00	58.50	66.00	96.00	107.00	118.00	82.00	91.00	100.00
51	42.00	49.00	56.00	32.00	38.00	44.00	64.00	73.00	82.00	51.00	58.50	66.00	96.00	107.00	118.00	82.00	91.00	100.00
52	44.00	51.00	58.00	36.00	42.00	48.00	66.00	75.00	84.00	52.00	60.00	68.00	98.00	109.00	120.00	82.00	91.00	100.00
53	45.00	52.50	60.00	37.00	43.50	50.00	68.00	78.00	88.00	56.00	64.00	72.00	99.00	110.50	122.00	86.00	96.00	106.00
54	45.00	52.50	60.00	37.00	43.50	50.00	70.00	80.00	90.00	56.00	64.00	72.00	101.00	112.50	124.00	86.00	96.00	106.00
55	48.00	56.00	64.00	40.00	47.00	54.00	73.00	83.50	94.00	59.00	67.50	76.00	104.00	116.00	128.00	91.00	101.50	112.00
56	50.00	58.00	66.00	42.00	49.00	56.00	80.00	91.00	102.00	64.00	73.00	82.00	111.00	123.50	136.00	96.00	107.00	118.00
57	53.00	61.50	70.00	45.00	52.50	60.00	85.00	96.50	108.00	70.00	80.00	90.00	116.00	129.00	142.00	101.00	112.50	124.00
58	58.00	67.00	76.00	48.00	56.00	64.00	90.00	102.00	114.00	77.00	87.50	98.00	125.00	139.50	154.00	106.00	118.00	130.00
59	64.00	74.00	84.00	51.00	59.50	68.00	97.00	109.50	122.00	82.00	93.00	104.00	132.00	147.00	162.00	116.00	129.00	142.00
60	67.00	77.50	88.00	58.00	67.00	76.00	104.00	118.00	132.00	90.00	102.00	114.00	140.00	156.00	172.00	122.00	136.00	150.00
61	70.00	81.00	92.00	60.00	69.00	78.00	109.00	123.50	138.00	97.00	109.50	122.00	145.00	161.50	178.00	127.00	141.50	156.00
62	75.00	86.50	98.00	64.00	74.00	84.00	116.00	131.00	146.00	102.00	115.00	128.00	153.00	170.50	188.00	137.00	152.50	168.00
63	80.00	92.00	104.00	67.00	77.50	88.00	121.00	136.50	152.00	108.00	122.00	136.00	161.00	179.50	198.00	142.00	158.00	174.00
64	83.00	95.50	108.00	70.00	81.00	92.00	126.00	142.00	158.00	115.00	129.50	144.00	166.00	185.00	204.00	149.00	165.50	182.00
65	88.00	101.00	114.00	75.00	86.50	98.00	137.00	154.50	172.00	123.00	138.50	154.00	176.00	196.00	216.00	158.00	176.00	194.00
66	103.00	117.50	132.00	87.00	99.50	112.00	155.00	173.50	192.00	139.00	155.50	172.00	198.00	220.00	242.00	177.00	196.50	216.00
67	118.00	134.00	150.00	102.00	116.00	130.00	174.00	194.00	214.00	159.00	177.50	196.00	221.00	244.50	268.00	199.00	220.50	242.00
68	131.00	148.50	166.00	116.00	131.00	146.00	196.00	218.00	240.00	177.00	196.50	216.00	247.00	272.50	298.00	220.00	243.00	266.00
69	146.00	165.00	184.00	126.00	142.00	158.00	215.00	238.50	262.00	195.00	216.50	238.00	271.00	298.50	326.00	245.00	270.50	296.00
70	161.00	181.50	202.00	142.00	160.00	178.00	237.00	262.50	288.00	214.00	237.00	260.00	295.00	324.50	354.00	266.00	293.00	320.00
71	176.00	198.00	220.00	156.00	175.00	194.00	256.00	283.00	310.00	232.00	256.00	280.00	318.00	349.00	380.00	286.00	315.00	344.00
72	189.00	212.50	236.00	166.00	186.00	206.00	276.00	305.00	334.00	250.00	276.00	302.00	343.00	376.50	410.00	308.00	339.00	370.00
73	203.00	227.50	252.00	181.00	202.50	224.00	297.00	327.50	358.00	268.00	295.00	322.00	366.00	401.00	436.00	330.00	363.00	396.00
74	219.00	245.50	272.00	195.00	217.50	240.00	318.00	350.00	382.00	288.00	317.00	346.00	392.00	429.00	466.00	351.00	385.50	420.00
75	236.00	264.00	292.00	210.00	234.00	258.00	340.00	374.00	408.00	307.00	337.50	368.00	416.00	455.00	494.00	376.00	413.00	450.00
76	269.00	299.50	330.00	241.00	267.50	294.00	376.00	413.00	450.00	343.00	376.50	410.00	453.00	495.50	538.00	413.00	453.50	494.00
77	300.00	333.00	366.00	274.00	303.00	332.00	413.00	452.50	492.00	380.00	416.00	452.00	490.00	536.00	582.00	449.00	492.50	536.00
78	334.00	369.00	404.00	308.00	339.00	370.00	452.00	495.00	538.00	419.00	458.50	498.00	529.00	578.50	628.00	488.00	535.00	582.00
79	368.00	406.00	444.00	342.00	376.00	410.00	490.00	536.00	582.00	457.00	499.50	542.00	566.00	619.00	672.00	525.00	575.50	626.00
80				376.00	412.00					496.00	542.00					564.00	618.00	
81				409.00	447.50					536.00	585.00					601.00	658.50	
82				445.00	486.50					575.00	627.50					640.00	701.00	
83				481.00	525.50					614.00	670.00					679.00	743.50	
84				514.00	561.00					652.00	711.00					718.00	786.00	

Attachment 1

RiverSource Life Insurance Company
227 Ameriprise Financial Center
Minneapolis, MN 55474

Current Annual Premiums
Policies Issued On or After September 16, 2002

Comprehensive Reimbursement Policy
FORM: 30160A-PA, with Endorsement Form 32100-PA

Annual Premiums Per \$10 Daily Benefit

2 YEAR BENEFIT PERIOD

Issue Age	No Benefit Increase Option						Simple Benefit Increase Option						Compound Benefit Increase Option					
	Deductible			Deductible			Deductible			Deductible			Deductible			Deductible		
	20 days			90 days			20 days			90 days			20 days			90 days		
	Home Care Percentage			Home Care Percentage			Home Care Percentage			Home Care Percentage			Home Care Percentage			Home Care Percentage		
	50%	75%	100%	50%	75%	100%	50%	75%	100%	50%	75%	100%	50%	75%	100%	50%	75%	100%
40	27.00	31.50	36.00	21.00	24.50	28.00	43.00	49.50	56.00	34.00	39.00	44.00	61.00	68.50	76.00	49.00	55.50	62.00
41	27.00	31.50	36.00	21.00	24.50	28.00	43.00	49.50	56.00	34.00	39.00	44.00	61.00	68.50	76.00	49.00	55.50	62.00
42	27.00	31.50	36.00	21.00	24.50	28.00	43.00	49.50	56.00	34.00	39.00	44.00	61.00	68.50	76.00	49.00	55.50	62.00
43	27.00	31.50	36.00	21.00	24.50	28.00	43.00	49.50	56.00	34.00	39.00	44.00	61.00	68.50	76.00	49.00	55.50	62.00
44	27.00	31.50	36.00	21.00	24.50	28.00	43.00	49.50	56.00	34.00	39.00	44.00	61.00	68.50	76.00	49.00	55.50	62.00
45	27.00	31.50	36.00	21.00	24.50	28.00	43.00	49.50	56.00	34.00	39.00	44.00	61.00	68.50	76.00	49.00	55.50	62.00
46	27.00	31.50	36.00	21.00	24.50	28.00	43.00	49.50	56.00	34.00	39.00	44.00	61.00	68.50	76.00	49.00	55.50	62.00
47	27.00	31.50	36.00	21.00	24.50	28.00	45.00	51.50	58.00	36.00	41.00	46.00	64.00	72.00	80.00	53.00	59.50	66.00
48	28.00	33.00	38.00	22.00	26.00	30.00	46.00	53.00	60.00	38.00	44.00	50.00	64.00	72.00	80.00	56.00	63.00	70.00
49	28.00	33.00	38.00	22.00	26.00	30.00	48.00	55.00	62.00	40.00	46.00	52.00	67.00	75.50	84.00	56.00	63.00	70.00
50	32.00	38.00	44.00	25.00	29.50	34.00	51.00	58.50	66.00	43.00	49.50	56.00	67.00	75.50	84.00	59.00	66.50	74.00
51	32.00	38.00	44.00	25.00	29.50	34.00	51.00	58.50	66.00	43.00	49.50	56.00	70.00	79.00	88.00	61.00	68.50	76.00
52	32.00	38.00	44.00	25.00	29.50	34.00	55.00	62.50	70.00	45.00	51.50	58.00	70.00	79.00	88.00	61.00	68.50	76.00
53	33.00	39.50	46.00	26.00	31.00	36.00	56.00	64.00	72.00	46.00	53.00	60.00	76.00	86.00	96.00	64.00	72.00	80.00
54	33.00	39.50	46.00	26.00	31.00	36.00	58.00	66.00	74.00	48.00	55.00	62.00	76.00	86.00	96.00	66.00	74.00	82.00
55	38.00	45.00	52.00	30.00	36.00	42.00	61.00	69.50	78.00	51.00	58.50	66.00	79.00	89.50	100.00	69.00	77.50	86.00
56	40.00	47.00	54.00	30.00	36.00	42.00	63.00	71.50	80.00	55.00	62.50	70.00	82.00	93.00	104.00	74.00	83.00	92.00
57	43.00	50.50	58.00	33.00	39.50	46.00	68.00	77.00	86.00	60.00	68.00	76.00	87.00	98.50	110.00	78.00	88.00	98.00
58	46.00	54.00	62.00	38.00	45.00	52.00	72.00	82.00	92.00	63.00	71.50	80.00	94.00	106.00	118.00	83.00	93.50	104.00
59	49.00	57.50	66.00	40.00	47.00	54.00	79.00	89.50	100.00	68.00	77.00	86.00	99.00	111.50	124.00	86.00	97.00	108.00
60	54.00	63.00	72.00	43.00	50.50	58.00	82.00	93.00	104.00	72.00	82.00	92.00	104.00	117.00	130.00	93.00	104.50	116.00
61	58.00	67.00	76.00	46.00	54.00	62.00	87.00	98.50	110.00	79.00	89.50	100.00	110.00	124.00	138.00	96.00	108.00	120.00
62	62.00	72.00	82.00	48.00	56.00	64.00	90.00	102.00	114.00	82.00	93.00	104.00	117.00	131.50	146.00	99.00	111.50	124.00
63	65.00	75.50	86.00	51.00	59.50	68.00	97.00	109.50	122.00	87.00	98.50	110.00	122.00	137.00	152.00	104.00	117.00	130.00
64	68.00	79.00	90.00	54.00	63.00	72.00	100.00	113.00	126.00	90.00	102.00	114.00	127.00	142.50	158.00	108.00	122.00	136.00
65	73.00	84.50	96.00	60.00	70.00	80.00	106.00	120.00	134.00	97.00	109.50	122.00	134.00	150.00	166.00	115.00	129.50	144.00
66	83.00	95.50	108.00	68.00	79.00	90.00	118.00	133.00	148.00	106.00	120.00	134.00	151.00	168.50	186.00	125.00	140.50	156.00
67	92.00	106.00	120.00	76.00	88.00	100.00	128.00	144.00	160.00	116.00	131.00	146.00	165.00	183.50	202.00	137.00	153.50	170.00
68	104.00	119.00	134.00	86.00	99.00	112.00	142.00	160.00	178.00	124.00	140.00	156.00	182.00	202.00	222.00	149.00	167.50	186.00
69	112.00	128.00	144.00	95.00	109.50	124.00	154.00	173.00	192.00	133.00	150.50	168.00	199.00	220.50	242.00	161.00	180.50	200.00
70	126.00	144.00	162.00	105.00	120.50	136.00	167.00	187.50	208.00	143.00	161.50	180.00	216.00	239.00	262.00	175.00	196.50	218.00
71	134.00	153.00	172.00	113.00	129.50	146.00	180.00	202.00	224.00	151.00	170.50	190.00	232.00	256.00	280.00	185.00	207.50	230.00
72	144.00	164.00	184.00	124.00	142.00	160.00	190.00	213.00	236.00	161.00	181.50	202.00	249.00	274.50	300.00	197.00	220.50	244.00
73	155.00	176.50	198.00	132.00	151.00	170.00	203.00	227.50	252.00	170.00	192.00	214.00	266.00	293.00	320.00	209.00	234.50	260.00
74	165.00	187.50	210.00	142.00	162.00	182.00	216.00	242.00	268.00	180.00	203.00	226.00	282.00	310.00	338.00	221.00	247.50	274.00
75	176.00	200.00	224.00	153.00	174.50	196.00	229.00	256.50	284.00	188.00	212.00	236.00	300.00	330.00	360.00	236.00	264.00	292.00
76	201.00	227.50	254.00	175.00	198.50	222.00	250.00	280.00	310.00	209.00	235.50	262.00	324.00	356.00	388.00	261.00	291.50	322.00
77	226.00	255.00	284.00	202.00	228.00	254.00	274.00	306.00	338.00	232.00	261.00	290.00	349.00	383.50	418.00	286.00	319.00	352.00
78	251.00	282.50	314.00	228.00	257.00	286.00	295.00	329.50	364.00	252.00	283.00	314.00	376.00	413.00	450.00	312.00	347.00	382.00
79	276.00	310.00	344.00	250.00	281.00	312.00	319.00	356.50	394.00	278.00	312.00	346.00	400.00	439.00	478.00	337.00	374.50	412.00
80				278.00	312.00					298.00	334.00					361.00	400.50	
81				302.00	338.00					321.00	359.50					388.00	430.00	
82				328.00	367.00					345.00	386.50					413.00	457.50	
83				356.00	398.00					369.00	413.50					439.00	485.50	
84				382.00	427.00					394.00	441.00					464.00	513.00	

Attachment 2

RiverSource Life Insurance Company
227 Ameriprise Financial Center
Minneapolis, MN 55474

Annual Premiums with 85.2% Rate Increase
Policies Issued On or After September 16, 2002

Comprehensive Reimbursement Policy
FORM: 30160A-PA, with Endorsement Form 32100-PA

Annual Premiums Per \$10 Daily Benefit

LIFETIME BENEFIT PERIOD

Issue Age	No Benefit Increase Option						Simple Benefit Increase Option						Compound Benefit Increase Option					
	Deductible			Deductible			Deductible			Deductible			Deductible			Deductible		
	20 days		90 days	20 days		90 days	20 days		90 days	20 days		90 days	20 days		90 days	20 days		90 days
	Home Care Percentage		Home Care Percentage		Home Care Percentage		Home Care Percentage		Home Care Percentage		Home Care Percentage		Home Care Percentage		Home Care Percentage		Home Care Percentage	
	50%	75%	100%	50%	75%	100%	50%	75%	100%	50%	75%	100%	50%	75%	100%	50%	75%	100%
40	103.72	118.52	133.34	85.20	98.16	111.12	164.82	187.98	211.12	151.86	172.24	192.60	222.24	250.02	277.80	200.02	224.10	248.16
41	103.72	118.52	133.34	85.20	98.16	111.12	164.82	187.98	211.12	151.86	172.24	192.60	222.24	250.02	277.80	200.02	224.10	248.16
42	103.72	118.52	133.34	85.20	98.16	111.12	164.82	187.98	211.12	151.86	172.24	192.60	222.24	250.02	277.80	200.02	224.10	248.16
43	103.72	118.52	133.34	85.20	98.16	111.12	164.82	187.98	211.12	151.86	172.24	192.60	222.24	250.02	277.80	200.02	224.10	248.16
44	103.72	118.52	133.34	85.20	98.16	111.12	164.82	187.98	211.12	151.86	172.24	192.60	222.24	250.02	277.80	200.02	224.10	248.16
45	103.72	118.52	133.34	85.20	98.16	111.12	164.82	187.98	211.12	151.86	172.24	192.60	222.24	250.02	277.80	200.02	224.10	248.16
46	103.72	118.52	133.34	85.20	98.16	111.12	168.54	191.68	214.84	151.86	172.24	192.60	229.64	257.42	285.20	207.42	231.50	255.58
47	105.56	121.30	137.04	87.04	100.94	114.82	177.80	201.86	225.94	157.42	178.72	200.02	238.90	267.62	296.32	214.84	240.76	266.68
48	105.56	121.30	137.04	90.74	104.64	118.52	185.20	211.12	237.06	161.12	182.42	203.72	251.88	281.50	311.14	220.38	247.24	274.10
49	111.12	127.78	144.46	92.60	107.42	122.24	188.90	214.84	240.76	162.98	185.20	207.42	261.14	291.70	322.24	227.80	254.66	281.50
50	111.12	127.78	144.46	96.30	111.12	125.94	194.46	221.32	248.16	166.68	188.90	211.12	279.66	312.06	344.48	233.36	261.14	288.92
51	114.82	133.34	151.86	98.16	113.90	129.64	200.02	227.80	255.58	175.94	199.10	222.24	287.06	319.48	351.88	238.90	267.62	296.32
52	118.52	137.04	155.56	98.16	113.90	129.64	203.72	231.50	259.28	175.94	199.10	222.24	296.32	329.66	363.00	250.02	278.72	307.44
53	120.38	139.82	159.28	107.42	124.08	140.76	209.28	237.98	266.68	181.50	205.58	229.64	305.58	339.84	374.10	255.58	285.20	314.84
54	120.38	139.82	159.28	107.42	124.08	140.76	218.54	248.16	277.80	185.20	209.28	233.36	318.54	353.74	388.92	261.14	291.70	322.24
55	125.94	146.30	166.68	114.82	133.34	151.86	224.10	254.66	285.20	192.60	218.54	244.46	331.50	367.62	403.74	272.24	304.66	337.06
56	135.20	156.50	177.80	118.52	137.04	155.56	238.90	271.32	303.72	205.58	232.42	259.28	351.88	388.92	425.96	292.62	325.96	359.28
57	148.16	170.38	192.60	127.78	147.24	166.68	255.58	288.92	322.24	222.24	250.02	277.80	368.54	406.52	444.48	312.98	347.26	381.52
58	157.42	180.58	203.72	137.04	157.42	177.80	268.54	302.80	337.06	235.20	263.92	292.62	390.78	430.60	470.40	329.66	364.84	400.04
59	166.68	190.76	214.84	146.30	167.60	188.90	288.92	324.10	359.28	251.88	281.50	311.14	411.14	451.88	492.64	350.02	386.14	422.26
60	181.50	207.42	233.36	155.56	177.80	200.02	301.88	338.00	374.10	272.24	304.66	337.06	427.82	469.48	511.16	366.70	403.74	440.78
61	190.76	217.62	244.46	162.98	185.20	207.42	318.54	355.58	392.62	288.92	322.24	355.58	448.18	490.78	533.38	387.06	425.04	463.00
62	200.02	227.80	255.58	168.54	191.68	214.84	335.22	373.18	411.14	301.88	336.14	370.40	464.86	508.38	551.90	409.30	449.12	488.92
63	209.28	237.98	266.68	181.50	205.58	229.64	353.74	393.56	433.36	318.54	353.74	388.92	485.22	529.68	574.12	425.96	466.70	507.44
64	222.24	251.88	281.50	192.60	218.54	244.46	366.70	407.44	448.18	331.50	367.62	403.74	505.60	550.98	596.34	446.34	488.00	529.68
65	235.20	267.62	300.02	201.86	228.72	255.58	388.92	431.52	474.12	353.74	391.70	429.66	527.82	575.04	622.28	464.86	508.38	551.90
66	275.94	310.22	344.48	235.20	263.92	292.62	450.04	495.42	540.78	403.74	444.48	485.22	600.04	650.06	700.06	524.12	571.34	618.56
67	322.24	359.28	396.32	279.66	312.06	344.48	513.00	562.08	611.16	457.44	500.96	544.48	674.12	727.84	781.54	581.52	631.54	681.54
68	366.70	407.44	448.18	314.84	350.02	385.22	574.12	625.98	677.84	513.00	560.24	607.46	742.66	799.14	855.62	640.80	694.50	748.20
69	416.70	460.22	503.74	353.74	391.70	429.66	633.38	688.94	744.50	570.42	620.42	670.42	822.28	883.40	944.52	698.20	754.70	811.18
70	461.14	508.38	555.60	390.78	432.44	474.12	696.36	755.62	814.88	622.28	675.98	729.68	894.52	958.42	999.98	751.92	811.18	870.44
71	501.90	550.98	600.04	427.82	471.34	514.86	759.32	822.28	885.26	674.12	729.68	785.24	963.04	999.98	999.98	811.18	874.14	937.12
72	551.90	603.76	655.60	464.86	512.08	559.30	820.44	886.18	951.92	731.54	789.88	848.22	999.98	999.98	999.98	868.58	934.34	999.98
73	596.34	651.90	707.46	503.74	553.74	603.76	883.40	952.86	999.98	783.40	845.44	907.48	999.98	999.98	999.98	927.86	997.30	999.98
74	638.94	697.28	755.62	540.78	594.50	648.20	944.52	999.98	999.98	837.10	901.92	966.74	999.98	999.98	999.98	985.26	999.98	999.98
75	690.80	752.84	814.88	583.38	639.86	696.36	999.98	999.98	999.98	896.36	964.90	999.98	999.98	999.98	999.98	999.98	999.98	999.98
76	746.36	815.80	885.26	631.54	695.42	759.32	999.98	999.98	999.98	964.90	999.98	999.98	999.98	999.98	999.98	999.98	999.98	999.98
77	805.62	882.48	959.34	679.68	750.98	822.28	999.98	999.98	999.98	999.98	999.98	999.98	999.98	999.98	999.98	999.98	999.98	999.98
78	861.18	945.44	999.98	727.84	806.54	885.26	999.98	999.98	999.98	999.98	999.98	999.98	999.98	999.98	999.98	999.98	999.98	999.98
79	920.44	999.98	999.98	775.98	862.10	948.22	999.98	999.98	999.98	999.98	999.98	999.98	999.98	999.98	999.98	999.98	999.98	999.98

Attachment 2

RiverSource Life Insurance Company
227 Ameriprise Financial Center
Minneapolis, MN 55474

Annual Premiums with 85.2% Rate Increase
Policies Issued On or After September 16, 2002

Comprehensive Reimbursement Policy
FORM: 30160A-PA, with Endorsement Form 32100-PA

Annual Premiums Per \$10 Daily Benefit

6 YEAR BENEFIT PERIOD

Issue Age	No Benefit Increase Option						Simple Benefit Increase Option						Compound Benefit Increase Option					
	Deductible			Deductible			Deductible			Deductible			Deductible			Deductible		
	20 days			90 days			20 days			90 days			20 days			90 days		
	Home Care Percentage			Home Care Percentage			Home Care Percentage			Home Care Percentage			Home Care Percentage			Home Care Percentage		
	50%	75%	100%	50%	75%	100%	50%	75%	100%	50%	75%	100%	50%	75%	100%	50%	75%	100%
40	85.20	98.16	111.12	74.08	85.20	96.30	122.24	138.90	155.56	103.72	118.52	133.34	177.80	200.02	222.24	148.16	166.68	185.20
41	85.20	98.16	111.12	74.08	85.20	96.30	122.24	138.90	155.56	103.72	118.52	133.34	177.80	200.02	222.24	148.16	166.68	185.20
42	85.20	98.16	111.12	74.08	85.20	96.30	122.24	138.90	155.56	103.72	118.52	133.34	177.80	200.02	222.24	148.16	166.68	185.20
43	85.20	98.16	111.12	74.08	85.20	96.30	122.24	138.90	155.56	103.72	118.52	133.34	177.80	200.02	222.24	148.16	166.68	185.20
44	85.20	98.16	111.12	74.08	85.20	96.30	122.24	138.90	155.56	103.72	118.52	133.34	177.80	200.02	222.24	148.16	166.68	185.20
45	85.20	98.16	111.12	74.08	85.20	96.30	122.24	138.90	155.56	103.72	118.52	133.34	177.80	200.02	222.24	148.16	166.68	185.20
46	85.20	98.16	111.12	74.08	85.20	96.30	122.24	138.90	155.56	103.72	118.52	133.34	177.80	200.02	222.24	151.86	170.38	188.90
47	87.04	100.94	114.82	74.08	85.20	96.30	129.64	148.16	166.68	107.42	122.24	137.04	183.34	206.50	229.64	157.42	176.86	196.32
48	87.04	100.94	114.82	75.94	87.98	100.00	135.20	154.64	174.08	112.98	128.72	144.46	187.06	210.20	233.36	161.12	180.58	200.02
49	88.90	103.72	118.52	75.94	87.98	100.00	142.60	162.06	181.50	116.68	132.42	148.16	192.60	216.68	240.76	170.38	190.76	211.12
50	92.60	107.42	122.24	81.48	94.46	107.42	148.16	168.54	188.90	122.24	138.90	155.56	196.32	220.38	244.46	179.64	200.94	222.24
51	94.46	110.20	125.94	81.48	94.46	107.42	153.72	175.02	196.32	122.24	138.90	155.56	203.72	229.64	255.58	183.34	204.64	225.94
52	94.46	110.20	125.94	81.48	94.46	107.42	157.42	178.72	200.02	125.94	142.60	159.28	211.12	237.06	262.98	188.90	211.12	233.36
53	96.30	112.98	129.64	83.34	97.24	111.12	162.98	185.20	207.42	133.34	151.86	170.38	216.68	243.54	270.40	192.60	214.84	237.06
54	96.30	112.98	129.64	83.34	97.24	111.12	168.54	191.68	214.84	140.76	159.28	177.80	220.38	247.24	274.10	198.16	221.32	244.46
55	103.72	122.24	140.76	88.90	103.72	118.52	177.80	201.86	225.94	146.30	165.76	185.20	225.94	253.72	281.50	211.12	235.20	259.28
56	111.12	129.64	148.16	92.60	107.42	122.24	188.90	214.84	240.76	155.56	175.94	196.32	238.90	267.62	296.32	222.24	248.16	274.10
57	120.38	139.82	159.28	98.16	113.90	129.64	198.16	225.02	251.88	164.82	186.12	207.42	255.58	285.20	314.84	235.20	262.06	288.92
58	129.64	150.02	170.38	107.42	124.08	140.76	214.84	242.62	270.40	181.50	203.72	225.94	275.94	306.50	337.06	251.88	279.66	307.44
59	135.20	156.50	177.80	118.52	137.04	155.56	224.10	252.80	281.50	190.76	213.90	237.06	290.76	323.18	355.58	264.84	293.54	322.24
60	148.16	170.38	192.60	124.08	143.54	162.98	237.06	266.68	296.32	207.42	231.50	255.58	311.14	344.48	377.80	281.50	311.14	340.76
61	155.56	177.80	200.02	127.78	147.24	166.68	250.02	280.58	311.14	218.54	244.46	270.40	324.10	358.36	392.62	294.46	325.02	355.58
62	161.12	184.28	207.42	137.04	157.42	177.80	261.14	293.54	325.96	227.80	254.66	281.50	337.06	372.26	407.44	312.98	345.40	377.80
63	170.38	194.46	218.54	146.30	167.60	188.90	274.10	307.44	340.76	244.46	272.24	300.02	357.44	393.56	429.66	325.96	359.28	392.62
64	185.20	211.12	237.06	151.86	174.08	196.32	287.06	321.32	355.58	253.72	282.44	311.14	374.10	411.14	448.18	342.62	376.88	411.14
65	194.46	221.32	248.16	161.12	184.28	207.42	301.88	338.00	374.10	268.54	299.10	329.66	394.48	434.30	474.12	355.58	390.78	425.96
66	224.10	252.80	281.50	188.90	214.84	240.76	342.62	382.44	422.26	311.14	344.48	377.80	448.18	490.78	533.38	394.48	432.44	470.40
67	257.42	289.84	322.24	218.54	246.32	274.10	388.92	431.52	474.12	353.74	389.84	425.96	501.90	549.12	596.34	437.08	479.66	522.26
68	287.06	321.32	355.58	240.76	270.40	300.02	431.52	476.90	522.26	394.48	434.30	474.12	555.60	605.60	655.60	483.38	528.74	574.12
69	318.54	355.58	392.62	274.10	307.44	340.76	472.26	521.34	570.42	435.22	476.90	518.56	613.02	667.64	722.28	525.96	575.98	625.98
70	348.18	388.92	429.66	303.72	338.92	374.10	518.56	570.42	622.28	477.82	522.26	566.72	663.02	720.42	777.84	572.26	626.90	681.54
71	377.80	420.40	463.00	329.66	366.70	403.74	563.00	618.56	674.12	522.26	570.42	618.56	720.42	782.48	844.52	614.86	672.28	729.68
72	409.30	454.66	500.04	363.00	403.74	444.48	601.90	660.24	718.58	559.30	609.30	659.32	774.14	838.96	903.78	657.46	719.50	781.54
73	440.78	488.92	537.08	388.92	431.52	474.12	646.34	708.40	770.44	607.46	661.16	714.88	827.84	897.30	966.74	700.06	764.88	829.70
74	472.26	523.20	574.12	418.56	463.00	507.44	692.64	757.46	822.28	646.34	702.84	759.32	881.56	953.78	999.98	742.66	812.10	881.56
75	509.30	563.94	618.56	448.18	496.34	544.48	738.94	808.40	877.84	688.94	748.20	807.48	942.66	999.98	999.98	790.80	863.96	937.12
76	572.26	630.60	688.94	511.16	563.00	614.86	824.14	899.14	974.16	774.14	838.96	903.78	999.98	999.98	999.98	877.84	957.48	999.98
77	637.08	700.06	763.02	575.98	632.46	688.94	907.48	987.12	999.98	859.32	929.70	999.98	999.98	999.98	999.98	968.60	999.98	999.98
78	700.06	766.72	833.40	640.80	701.90	763.02	998.22	999.98	999.98	950.08	999.98	999.98	999.98	999.98	999.98	999.98	999.98	999.98
79	770.44	842.66	914.88	709.32	775.06	840.80	999.98	999.98	999.98	999.98	999.98	999.98	999.98	999.98	999.98	999.98	999.98	999.98

Attachment 2

RiverSource Life Insurance Company
227 Ameriprise Financial Center
Minneapolis, MN 55474

Annual Premiums with 85.2% Rate Increase
Policies Issued On or After September 16, 2002

Comprehensive Reimbursement Policy
FORM: 30160A-PA, with Endorsement Form 32100-PA

Annual Premiums Per \$10 Daily Benefit

4 YEAR BENEFIT PERIOD

Issue Age	No Benefit Increase Option						Simple Benefit Increase Option						Compound Benefit Increase Option					
	Deductible			Deductible			Deductible			Deductible			Deductible			Deductible		
	20 days		90 days	20 days		90 days	20 days		90 days	20 days		90 days	20 days		90 days	20 days		90 days
	Home Care Percentage	Home Care Percentage	Home Care Percentage	Home Care Percentage	Home Care Percentage	Home Care Percentage	Home Care Percentage	Home Care Percentage	Home Care Percentage	Home Care Percentage	Home Care Percentage	Home Care Percentage	Home Care Percentage	Home Care Percentage	Home Care Percentage	Home Care Percentage	Home Care Percentage	Home Care Percentage
	50%	75%	100%	50%	75%	100%	50%	75%	100%	50%	75%	100%	50%	75%	100%	50%	75%	100%
40	70.38	81.48	92.60	50.00	58.34	66.68	103.72	118.52	133.34	85.20	98.16	111.12	159.28	177.80	196.32	140.76	155.56	170.38
41	70.38	81.48	92.60	50.00	58.34	66.68	103.72	118.52	133.34	85.20	98.16	111.12	159.28	177.80	196.32	140.76	155.56	170.38
42	70.38	81.48	92.60	50.00	58.34	66.68	103.72	118.52	133.34	85.20	98.16	111.12	159.28	177.80	196.32	140.76	155.56	170.38
43	70.38	81.48	92.60	50.00	58.34	66.68	103.72	118.52	133.34	85.20	98.16	111.12	159.28	177.80	196.32	140.76	155.56	170.38
44	70.38	81.48	92.60	50.00	58.34	66.68	103.72	118.52	133.34	85.20	98.16	111.12	159.28	177.80	196.32	140.76	155.56	170.38
45	70.38	81.48	92.60	50.00	58.34	66.68	103.72	118.52	133.34	85.20	98.16	111.12	159.28	177.80	196.32	140.76	155.56	170.38
46	70.38	81.48	92.60	50.00	58.34	66.68	103.72	118.52	133.34	85.20	98.16	111.12	159.28	177.80	196.32	140.76	155.56	170.38
47	70.38	81.48	92.60	50.00	58.34	66.68	107.42	122.24	137.04	85.20	98.16	111.12	166.68	185.20	203.72	140.76	155.56	170.38
48	72.22	84.26	96.30	51.86	61.12	70.38	109.26	125.02	140.76	88.90	101.86	114.82	168.54	187.98	207.42	146.30	162.06	177.80
49	75.94	87.98	100.00	55.56	64.82	74.08	112.98	128.72	144.46	90.74	104.64	118.52	172.24	191.68	211.12	146.30	162.06	177.80
50	77.78	90.74	103.72	59.26	70.38	81.48	118.52	135.20	151.86	94.46	108.34	122.24	177.80	198.16	218.54	151.86	168.54	185.20
51	77.78	90.74	103.72	59.26	70.38	81.48	118.52	135.20	151.86	94.46	108.34	122.24	177.80	198.16	218.54	151.86	168.54	185.20
52	81.48	94.46	107.42	66.68	77.78	88.90	122.24	138.90	155.56	96.30	111.12	125.94	181.50	201.86	222.24	151.86	168.54	185.20
53	83.34	97.24	111.12	68.52	80.56	92.60	125.94	144.46	162.98	103.72	118.52	133.34	183.34	204.64	225.94	159.28	177.80	196.32
54	83.34	97.24	111.12	68.52	80.56	92.60	129.64	148.16	166.68	103.72	118.52	133.34	187.06	208.36	229.64	159.28	177.80	196.32
55	88.90	103.72	118.52	74.08	87.04	100.00	135.20	154.64	174.08	109.26	125.02	140.76	192.60	214.84	237.06	168.54	187.98	207.42
56	92.60	107.42	122.24	77.78	90.74	103.72	148.16	168.54	188.90	118.52	135.20	151.86	205.58	228.72	251.88	177.80	198.16	218.54
57	98.16	113.90	129.64	83.34	97.24	111.12	157.42	178.72	200.02	129.64	148.16	166.68	214.84	238.90	262.98	187.06	208.36	229.64
58	107.42	124.08	140.76	88.90	103.72	118.52	166.68	188.90	211.12	142.60	162.06	181.50	231.50	258.36	285.20	196.32	218.54	240.76
59	118.52	137.04	155.56	94.46	110.20	125.94	179.64	202.80	225.94	151.86	172.24	192.60	244.46	272.24	300.02	214.84	238.90	262.98
60	124.08	143.54	162.98	107.42	124.08	140.76	192.60	218.54	244.46	166.68	188.90	211.12	259.28	288.92	318.54	225.94	251.88	277.80
61	129.64	150.02	170.38	111.12	127.78	144.46	201.86	228.72	255.58	179.64	202.80	225.94	268.54	299.10	329.66	235.20	262.06	288.92
62	138.90	160.20	181.50	118.52	137.04	155.56	214.84	242.62	270.40	188.90	212.98	237.06	283.36	315.76	348.18	253.72	282.44	311.14
63	148.16	170.38	192.60	124.08	143.54	162.98	224.10	252.80	281.50	200.02	225.94	251.88	298.18	332.44	366.70	262.98	292.62	322.24
64	153.72	176.86	200.02	129.64	150.02	170.38	233.36	262.98	292.62	212.98	239.84	266.68	307.44	342.62	377.80	275.94	306.50	337.06
65	162.98	187.06	211.12	138.90	160.20	181.50	253.72	286.14	318.54	227.80	256.50	285.20	325.96	363.00	400.04	292.62	325.96	359.28
66	190.76	217.62	244.46	161.12	184.28	207.42	287.06	321.32	355.58	257.42	287.98	318.54	366.70	407.44	448.18	327.80	363.92	400.04
67	218.54	248.16	277.80	188.90	214.84	240.76	322.24	359.28	396.32	294.46	328.74	363.00	409.30	452.82	496.34	368.54	408.36	448.18
68	242.62	275.02	307.44	214.84	242.62	270.40	363.00	403.74	444.48	327.80	363.92	400.04	457.44	504.68	551.90	407.44	450.04	492.64
69	270.40	305.58	340.76	233.36	262.98	292.62	398.18	441.70	485.22	361.14	400.96	440.78	501.90	552.82	603.76	453.74	500.96	548.20
70	298.18	336.14	374.10	262.98	296.32	329.66	438.92	486.16	533.38	396.32	438.92	481.52	546.34	600.98	655.60	492.64	542.64	592.64
71	325.96	366.70	407.44	288.92	324.10	359.28	474.12	524.12	574.12	429.66	474.12	518.56	588.94	646.34	703.76	529.68	583.38	637.08
72	350.02	393.56	437.08	307.44	344.48	381.52	511.16	564.86	618.56	463.00	511.16	559.30	635.24	697.28	759.32	570.42	627.82	685.24
73	375.96	421.34	466.70	335.22	375.04	414.84	550.04	606.54	663.02	496.34	546.34	596.34	677.84	742.66	807.48	611.16	672.28	733.40
74	405.58	454.66	503.74	361.14	402.82	444.48	588.94	648.20	707.46	533.38	587.08	640.80	725.98	794.50	863.04	650.06	713.94	777.84
75	437.08	488.92	540.78	388.92	433.36	477.82	629.68	692.64	755.62	568.56	625.06	681.54	770.44	842.66	914.88	696.36	764.88	833.40
76	498.18	554.68	611.16	446.34	495.42	544.48	696.36	764.88	833.40	635.24	697.28	759.32	838.96	917.66	996.38	764.88	839.88	914.88
77	555.60	616.72	677.84	507.44	561.16	614.86	764.88	838.04	911.18	703.76	770.44	837.10	907.48	992.68	999.98	831.54	912.12	992.68
78	618.56	683.38	748.20	570.42	627.82	685.24	837.10	916.74	996.38	775.98	849.14	922.30	979.70	999.98	999.98	903.78	990.82	999.98
79	681.54	751.92	822.28	633.38	696.36	759.32	907.48	992.68	999.98	846.36	925.08	999.98	999.98	999.98	999.98	972.30	999.98	999.98
80				696.36	763.02					918.60	999.98					999.98	999.98	
81				757.46	828.78					992.68	999.98					999.98	999.98	
82				824.14	901.00					999.98	999.98					999.98	999.98	
83				890.82	973.22					999.98	999.98					999.98	999.98	
84				951.92	999.98					999.98	999.98					999.98	999.98	

Attachment 2

RiverSource Life Insurance Company
227 Ameriprise Financial Center
Minneapolis, MN 55474

Annual Premiums with 85.2% Rate Increase
Policies Issued On or After September 16, 2002

Comprehensive Reimbursement Policy
FORM: 30160A-PA, with Endorsement Form 32100-PA

Annual Premiums Per \$10 Daily Benefit

2 YEAR BENEFIT PERIOD

Issue Age	No Benefit Increase Option						Simple Benefit Increase Option						Compound Benefit Increase Option					
	Deductible			Deductible			Deductible			Deductible			Deductible			Deductible		
	20 days		90 days	20 days		90 days	20 days		90 days	20 days		90 days	20 days		90 days	20 days		90 days
	Home Care Percentage	Home Care Percentage	Home Care Percentage	Home Care Percentage	Home Care Percentage	Home Care Percentage	Home Care Percentage	Home Care Percentage	Home Care Percentage	Home Care Percentage	Home Care Percentage	Home Care Percentage	Home Care Percentage	Home Care Percentage	Home Care Percentage	Home Care Percentage	Home Care Percentage	Home Care Percentage
	50%	75%	100%	50%	75%	100%	50%	75%	100%	50%	75%	100%	50%	75%	100%	50%	75%	100%
40	50.00	58.34	66.68	38.90	45.38	51.86	79.64	91.68	103.72	62.96	72.22	81.48	112.98	126.86	140.76	90.74	102.78	114.82
41	50.00	58.34	66.68	38.90	45.38	51.86	79.64	91.68	103.72	62.96	72.22	81.48	112.98	126.86	140.76	90.74	102.78	114.82
42	50.00	58.34	66.68	38.90	45.38	51.86	79.64	91.68	103.72	62.96	72.22	81.48	112.98	126.86	140.76	90.74	102.78	114.82
43	50.00	58.34	66.68	38.90	45.38	51.86	79.64	91.68	103.72	62.96	72.22	81.48	112.98	126.86	140.76	90.74	102.78	114.82
44	50.00	58.34	66.68	38.90	45.38	51.86	79.64	91.68	103.72	62.96	72.22	81.48	112.98	126.86	140.76	90.74	102.78	114.82
45	50.00	58.34	66.68	38.90	45.38	51.86	79.64	91.68	103.72	62.96	72.22	81.48	112.98	126.86	140.76	90.74	102.78	114.82
46	50.00	58.34	66.68	38.90	45.38	51.86	79.64	91.68	103.72	62.96	72.22	81.48	112.98	126.86	140.76	90.74	102.78	114.82
47	50.00	58.34	66.68	38.90	45.38	51.86	83.34	95.38	107.42	66.68	75.94	85.20	118.52	133.34	148.16	98.16	110.20	122.24
48	51.86	61.12	70.38	40.74	48.16	55.56	85.20	98.16	111.12	70.38	81.48	92.60	118.52	133.34	148.16	103.72	116.68	129.64
49	51.86	61.12	70.38	40.74	48.16	55.56	88.90	101.86	114.82	74.08	85.20	96.30	124.08	139.82	155.56	103.72	116.68	129.64
50	59.26	70.38	81.48	46.30	54.64	62.96	94.46	108.34	122.24	79.64	91.68	103.72	124.08	139.82	155.56	109.26	123.16	137.04
51	59.26	70.38	81.48	46.30	54.64	62.96	94.46	108.34	122.24	79.64	91.68	103.72	129.64	146.30	162.98	112.98	126.86	140.76
52	59.26	70.38	81.48	46.30	54.64	62.96	101.86	115.76	129.64	83.34	95.38	107.42	129.64	146.30	162.98	112.98	126.86	140.76
53	61.12	73.16	85.20	48.16	57.42	66.68	103.72	118.52	133.34	85.20	98.16	111.12	140.76	159.28	177.80	118.52	133.34	148.16
54	61.12	73.16	85.20	48.16	57.42	66.68	107.42	122.24	137.04	88.90	101.86	114.82	140.76	159.28	177.80	122.24	137.04	151.86
55	70.38	83.34	96.30	55.56	66.68	77.78	112.98	128.72	144.46	94.46	108.34	122.24	146.30	165.76	185.20	127.78	143.54	159.28
56	74.08	87.04	100.00	55.56	66.68	77.78	116.68	132.42	148.16	101.86	115.76	129.64	151.86	172.24	192.60	137.04	153.72	170.38
57	79.64	93.52	107.42	61.12	73.16	85.20	125.94	142.60	159.28	111.12	125.94	140.76	161.12	182.42	203.72	144.46	162.98	181.50
58	85.20	100.00	114.82	70.38	83.34	96.30	133.34	151.86	170.38	116.68	132.42	148.16	174.08	196.32	218.54	153.72	173.16	192.60
59	90.74	106.50	122.24	74.08	87.04	100.00	146.30	165.76	185.20	125.94	142.60	159.28	183.34	206.50	229.64	159.28	179.64	200.02
60	100.00	116.68	133.34	79.64	93.52	107.42	151.86	172.24	192.60	133.34	151.86	170.38	192.60	216.68	240.76	172.24	193.54	214.84
61	107.42	124.08	140.76	85.20	100.00	114.82	161.12	182.42	203.72	146.30	165.76	185.20	203.72	229.64	255.58	177.80	200.02	222.24
62	114.82	133.34	151.86	88.90	103.72	118.52	166.68	188.90	211.12	151.86	172.24	192.60	216.68	243.54	270.40	183.34	206.50	229.64
63	120.38	139.82	159.28	94.46	110.20	125.94	179.64	202.80	225.94	161.12	182.42	203.72	225.94	253.72	281.50	192.60	216.68	240.76
64	125.94	146.30	166.68	100.00	116.68	133.34	185.20	209.28	233.36	166.68	188.90	211.12	235.20	263.92	292.62	200.02	225.94	251.88
65	135.20	156.50	177.80	111.12	129.64	148.16	196.32	222.24	248.16	179.64	202.80	225.94	248.16	277.80	307.44	212.98	239.84	266.68
66	153.72	176.86	200.02	125.94	146.30	166.68	218.54	246.32	274.10	196.32	222.24	248.16	279.66	312.06	344.48	231.50	260.20	288.92
67	170.38	196.32	222.24	140.76	162.98	185.20	237.06	266.68	296.32	214.84	242.62	270.40	305.58	339.84	374.10	253.72	284.28	314.84
68	192.60	220.38	248.16	159.28	183.34	207.42	262.98	296.32	329.66	229.64	259.28	288.92	337.06	374.10	411.14	275.94	310.22	344.48
69	207.42	237.06	266.68	175.94	202.80	229.64	285.20	320.40	355.58	246.32	278.72	311.14	368.54	408.36	448.18	298.18	334.28	370.40
70	233.36	266.68	300.02	194.46	223.16	251.88	309.28	347.26	385.22	264.84	299.10	333.36	400.04	442.62	485.22	324.10	363.92	403.74
71	248.16	283.36	318.54	209.28	239.84	270.40	333.36	374.10	414.84	279.66	315.76	351.88	429.66	474.12	518.56	342.62	384.30	425.96
72	266.68	303.72	340.76	229.64	262.98	296.32	351.88	394.48	437.08	298.18	336.14	374.10	461.14	508.38	555.60	364.84	408.36	451.88
73	287.06	326.88	366.70	244.46	279.66	314.84	375.96	421.34	466.70	314.84	355.58	396.32	492.64	542.64	592.64	387.06	434.30	481.52
74	305.58	347.26	388.92	262.98	300.02	337.06	400.04	448.18	496.34	333.36	375.96	418.56	522.26	574.12	625.98	409.30	458.38	507.44
75	325.96	370.40	414.84	283.36	323.18	363.00	424.10	475.04	525.96	348.18	392.62	437.08	555.60	611.16	666.72	437.08	488.92	540.78
76	372.26	421.34	470.40	324.10	367.62	411.14	463.00	518.56	574.12	387.06	436.14	485.22	600.04	659.32	718.58	483.38	539.86	596.34
77	418.56	472.26	525.96	374.10	422.26	470.40	507.44	566.72	625.98	429.66	483.38	537.08	646.34	710.24	774.14	529.68	590.78	651.90
78	464.86	523.20	581.52	422.26	475.96	529.68	546.34	610.24	674.12	466.70	524.12	581.52	696.36	764.88	833.40	577.82	642.64	707.46
79	511.16	574.12	637.08	463.00	520.42	577.82	590.78	660.24	729.68	514.86	577.82	640.80	740.80	813.02	885.26	624.12	693.58	763.02
80				514.86	577.82					551.90	618.56					668.58	741.72	
81				559.30	625.98					594.50	665.80					718.58	796.36	
82				607.46	679.68					638.94	715.80					764.88	847.30	
83				659.32	737.10					683.38	765.80					813.02	899.14	
84				707.46	790.80					729.68	816.74					859.32	950.08	

Attachment 3
RiverSource Life Insurance Company
Nationwide Experience Projections, All Policies
Projections with No Increase
Adjusted to Reflect No Prior Rate Increases on a Nationwide Basis
Policy Form: 30160A, Subject to Endorsement Form 32100

	Calendar Year	Loss Ratio Demonstration						Interest Rate Factors	
		Without Interest			With Interest			Calendar Year	Mid-Year
		Earned Premiums	Incurred Claims	Loss Ratio	Earned Premiums	Incurred Claims	Loss Ratio	Effective Int Rate	Disc / Accum Factor
Historical Experience	2000	3,316,794	0	0.0%	6,279,206	0	0.0%	4.50%	1.8932
	2001	26,853,376	521,781	1.9%	48,648,429	945,275	1.9%	4.50%	1.8116
	2002	48,218,444	1,959,886	4.1%	83,592,406	3,397,696	4.1%	4.50%	1.7336
	2003	58,076,515	1,472,260	2.5%	96,346,932	2,442,429	2.5%	4.50%	1.6590
	2004	55,097,014	4,307,861	7.8%	87,467,984	6,838,844	7.8%	4.50%	1.5875
	2005	53,275,196	6,546,597	12.3%	80,933,779	9,945,357	12.3%	4.50%	1.5192
	2006	51,925,705	5,963,336	11.5%	75,486,775	8,669,175	11.5%	4.50%	1.4537
	2007	50,913,530	12,391,734	24.3%	70,828,067	17,238,690	24.3%	4.50%	1.3911
	2008	48,826,374	9,129,425	18.7%	64,999,552	12,153,442	18.7%	4.50%	1.3312
	2009	47,340,156	16,181,857	34.2%	60,307,217	20,614,270	34.2%	4.50%	1.2739
	2010	46,216,589	14,821,483	32.1%	56,340,565	18,068,203	32.1%	4.50%	1.2191
	2011	45,107,452	21,538,689	47.7%	52,620,542	25,126,169	47.7%	4.50%	1.1666
	2012	44,042,119	21,912,482	49.8%	49,165,327	24,461,456	49.8%	4.50%	1.1163
	2013	42,823,301	20,657,071	48.2%	45,746,153	22,066,994	48.2%	4.50%	1.0683
2014	41,679,207	21,306,306	51.1%	42,606,670	21,780,423	51.1%	4.50%	1.0223	
Projected Future Experience	2015	40,535,619	27,802,463	68.6%	39,653,239	27,197,258	68.6%	4.50%	0.9782
	2016	39,156,399	30,953,003	79.0%	36,654,585	28,975,328	79.0%	4.50%	0.9361
	2017	37,747,556	34,272,824	90.8%	33,814,122	30,701,470	90.8%	4.50%	0.8958
	2018	36,297,744	37,439,997	103.1%	31,115,202	32,094,365	103.1%	4.50%	0.8572
	2019	34,805,077	40,537,220	116.5%	28,550,867	33,252,987	116.5%	4.50%	0.8203
	2020	33,276,726	44,176,106	132.8%	26,121,673	34,677,505	132.8%	4.50%	0.7850
	2021	31,718,995	49,116,432	154.8%	23,826,680	36,895,290	154.8%	4.50%	0.7512
	2022	30,133,891	54,092,229	179.5%	21,661,226	38,883,262	179.5%	4.50%	0.7188
	2023	28,523,905	58,771,185	206.0%	19,620,972	40,427,416	206.0%	4.50%	0.6879
	2024	26,894,638	62,935,430	234.0%	17,703,574	41,427,664	234.0%	4.50%	0.6583
	2025	25,247,579	67,262,042	266.4%	15,903,719	42,369,076	266.4%	4.50%	0.6299
	2026	23,585,723	72,941,465	309.3%	14,217,127	43,968,043	309.3%	4.50%	0.6028
	2027	21,922,529	78,425,559	357.7%	12,645,529	45,238,062	357.7%	4.50%	0.5768
	2028	20,266,710	83,160,202	410.3%	11,186,992	45,903,480	410.3%	4.50%	0.5520
	2029	18,620,354	86,706,695	465.7%	9,835,620	45,800,100	465.7%	4.50%	0.5282
	2030	16,989,768	89,589,354	527.3%	8,587,860	45,284,951	527.3%	4.50%	0.5055
	2031	15,394,815	92,467,839	600.6%	7,446,560	44,727,221	600.6%	4.50%	0.4837
	2032	13,850,662	94,339,282	681.1%	6,411,143	43,667,415	681.1%	4.50%	0.4629
	2033	12,371,006	94,937,289	767.4%	5,479,660	42,051,883	767.4%	4.50%	0.4429
	2034	10,970,519	94,151,000	858.2%	4,650,070	39,907,753	858.2%	4.50%	0.4239
	2035	9,658,548	92,741,735	960.2%	3,917,670	37,617,615	960.2%	4.50%	0.4056
	2036	8,436,296	90,348,209	1070.9%	3,274,550	35,068,671	1070.9%	4.50%	0.3882
	2037	7,307,947	86,854,670	1188.5%	2,714,431	32,260,912	1188.5%	4.50%	0.3714
	2038	6,282,863	82,433,994	1312.0%	2,233,185	29,300,398	1312.0%	4.50%	0.3554
	2039	5,362,212	77,518,974	1445.7%	1,823,874	26,366,890	1445.7%	4.50%	0.3401
	2040	4,542,347	72,176,046	1589.0%	1,478,478	23,492,416	1589.0%	4.50%	0.3255
	2041	3,818,232	66,525,074	1742.3%	1,189,270	20,720,664	1742.3%	4.50%	0.3115
	2042	3,184,127	60,695,519	1906.2%	949,057	18,090,836	1906.2%	4.50%	0.2981
	2043	2,633,721	54,815,018	2081.3%	751,200	15,634,546	2081.3%	4.50%	0.2852
	2044	2,160,279	49,004,273	2268.4%	589,630	13,375,295	2268.4%	4.50%	0.2729
	2045	1,756,801	43,355,654	2467.9%	458,855	11,323,975	2467.9%	4.50%	0.2612
	2046	1,416,173	37,962,580	2680.6%	353,959	9,488,391	2680.6%	4.50%	0.2499
	2047	1,131,332	32,891,015	2907.3%	270,589	7,866,795	2907.3%	4.50%	0.2392
	2048	895,428	28,190,801	3148.3%	204,944	6,452,257	3148.3%	4.50%	0.2289
	2049	701,949	23,896,823	3404.4%	153,742	5,233,933	3404.4%	4.50%	0.2190
	2050	544,835	20,023,199	3675.1%	114,192	4,196,673	3675.1%	4.50%	0.2096
	2051	418,539	16,576,161	3960.5%	83,944	3,324,600	3960.5%	4.50%	0.2006
2052	318,074	13,552,468	4260.8%	61,047	2,601,103	4260.8%	4.50%	0.1919	
2053	239,020	10,935,907	4575.3%	43,899	2,008,527	4575.3%	4.50%	0.1837	
2054	177,515	8,707,116	4905.0%	31,199	1,530,315	4905.0%	4.50%	0.1758	
2055	130,225	6,836,640	5249.9%	21,902	1,149,828	5249.9%	4.50%	0.1682	
2056	94,312	5,291,085	5610.2%	15,179	851,567	5610.2%	4.50%	0.1609	
2057	67,386	4,034,237	5986.8%	10,378	621,325	5986.8%	4.50%	0.1540	
2058	47,467	3,028,339	6379.9%	6,996	446,319	6379.9%	4.50%	0.1474	
2059	32,933	2,235,025	6786.5%	4,645	315,215	6786.5%	4.50%	0.1410	
2060	22,481	1,619,619	7204.4%	3,034	218,586	7204.4%	4.50%	0.1350	
2061	15,076	1,149,707	7626.3%	1,947	148,484	7626.3%	4.50%	0.1291	
2062	9,912	797,613	8046.7%	1,225	98,575	8046.7%	4.50%	0.1236	
2063	6,374	539,447	8462.6%	754	63,798	8462.6%	4.50%	0.1183	
2064	3,997	354,740	8874.4%	452	40,147	8874.4%	4.50%	0.1132	
Past		663,711,774	158,710,768	23.9%	921,369,601	193,748,422	21.0%		
Future		579,726,618	2,289,169,303	394.9%	395,850,650	1,093,359,185	276.2%		
Lifetime		1,243,438,392	2,447,880,070	196.9%	1,317,220,251	1,287,107,607	97.7%		

Attachment 3
RiverSource Life Insurance Company
Nationwide Experience Projections, All Policies
Projections with 85.2% Increase
Adjusted to Reflect No Prior Rate Increases on a Nationwide Basis
Policy Form: 30160A, Subject to Endorsement Form 32100

	Calendar Year	Loss Ratio Demonstration						Interest Rate Factors	
		Without Interest			With Interest			Calendar Year	Mid-Year
		Earned Premiums	Incurred Claims	Loss Ratio	Earned Premiums	Incurred Claims	Loss Ratio	Effective Int Rate	Disc / Accum Factor
Historical Experience	2000	3,316,794	0	0.0%	6,279,206	0	0.0%	4.50%	1.8932
	2001	26,853,376	521,781	1.9%	48,648,429	945,275	1.9%	4.50%	1.8116
	2002	48,218,444	1,959,886	4.1%	83,592,406	3,397,696	4.1%	4.50%	1.7336
	2003	58,076,515	1,472,260	2.5%	96,346,932	2,442,429	2.5%	4.50%	1.6590
	2004	55,097,014	4,307,861	7.8%	87,467,984	6,838,844	7.8%	4.50%	1.5875
	2005	53,275,196	6,546,597	12.3%	80,933,779	9,945,357	12.3%	4.50%	1.5192
	2006	51,925,705	5,963,336	11.5%	75,486,775	8,669,175	11.5%	4.50%	1.4537
	2007	50,913,530	12,391,734	24.3%	70,828,067	17,238,690	24.3%	4.50%	1.3911
	2008	48,826,374	9,129,425	18.7%	64,999,552	12,153,442	18.7%	4.50%	1.3312
	2009	47,340,156	16,181,857	34.2%	60,307,217	20,614,270	34.2%	4.50%	1.2739
	2010	46,216,589	14,821,483	32.1%	56,340,565	18,068,203	32.1%	4.50%	1.2191
	2011	45,107,452	21,538,689	47.7%	52,620,542	25,126,169	47.7%	4.50%	1.1666
	2012	44,042,119	21,912,482	49.8%	49,165,327	24,461,456	49.8%	4.50%	1.1163
	2013	42,823,301	20,657,071	48.2%	45,746,153	22,066,994	48.2%	4.50%	1.0683
2014	41,679,207	21,306,306	51.1%	42,606,670	21,780,423	51.1%	4.50%	1.0223	
Projected Future Experience	2015	42,016,201	27,771,494	66.1%	41,101,592	27,166,963	66.1%	4.50%	0.9782
	2016	60,911,509	31,334,133	51.4%	57,019,700	29,332,106	51.4%	4.50%	0.9361
	2017	65,904,284	34,756,028	52.7%	59,036,815	31,134,322	52.7%	4.50%	0.8958
	2018	63,373,405	37,545,083	59.2%	54,325,036	32,184,447	59.2%	4.50%	0.8572
	2019	60,767,658	40,198,274	66.2%	49,848,167	32,974,947	66.2%	4.50%	0.8203
	2020	58,099,564	43,316,600	74.6%	45,607,186	34,002,806	74.6%	4.50%	0.7850
	2021	55,380,142	47,623,195	86.0%	41,600,464	35,773,600	86.0%	4.50%	0.7512
	2022	52,612,896	51,948,025	98.7%	37,819,870	37,341,939	98.7%	4.50%	0.7188
	2023	49,802,167	56,241,841	112.9%	34,257,824	38,687,535	112.9%	4.50%	0.6879
	2024	46,957,735	60,165,645	128.1%	30,910,240	39,604,435	128.1%	4.50%	0.6583
	2025	44,082,197	64,241,316	145.7%	27,767,845	40,466,289	145.7%	4.50%	0.6299
	2026	41,180,778	69,604,009	169.0%	24,823,168	41,956,274	169.0%	4.50%	0.6028
	2027	38,276,981	74,777,575	195.4%	22,079,236	43,133,803	195.4%	4.50%	0.5768
	2028	35,386,028	79,234,119	223.9%	19,532,682	43,736,327	223.9%	4.50%	0.5520
	2029	32,511,567	82,557,657	253.9%	17,173,218	43,608,500	253.9%	4.50%	0.5282
	2030	29,664,610	85,250,362	287.4%	14,994,643	43,091,710	287.4%	4.50%	0.5055
	2031	26,879,842	87,940,746	327.2%	13,001,933	42,537,440	327.2%	4.50%	0.4837
	2032	24,183,751	89,675,230	370.8%	11,194,084	41,508,536	370.8%	4.50%	0.4629
	2033	21,600,257	90,201,318	417.6%	9,567,700	39,954,115	417.6%	4.50%	0.4429
	2034	19,154,980	89,414,436	466.8%	8,119,215	37,900,067	466.8%	4.50%	0.4239
	2035	16,864,245	88,039,006	522.0%	6,840,423	35,710,109	522.0%	4.50%	0.4056
	2036	14,730,157	85,733,203	582.0%	5,717,513	33,277,355	582.0%	4.50%	0.3882
	2037	12,760,016	82,388,053	645.7%	4,739,523	30,601,852	645.7%	4.50%	0.3714
	2038	10,970,173	78,168,172	712.6%	3,899,246	27,784,151	712.6%	4.50%	0.3554
	2039	9,362,674	73,483,975	784.9%	3,184,570	24,994,446	784.9%	4.50%	0.3401
	2040	7,931,149	68,398,557	862.4%	2,581,492	22,262,890	862.4%	4.50%	0.3255
	2041	6,666,810	63,025,473	945.4%	2,076,521	19,630,638	945.4%	4.50%	0.3115
	2042	5,559,632	57,487,237	1034.0%	1,657,097	17,134,579	1034.0%	4.50%	0.2981
	2043	4,598,595	51,904,518	1128.7%	1,311,629	14,804,403	1128.7%	4.50%	0.2852
	2044	3,771,943	46,391,301	1229.9%	1,029,519	12,662,107	1229.9%	4.50%	0.2729
	2045	3,067,451	41,034,705	1337.7%	801,181	10,717,771	1337.7%	4.50%	0.2612
	2046	2,472,698	35,922,774	1452.8%	618,028	8,978,561	1452.8%	4.50%	0.2499
	2047	1,975,354	31,117,546	1575.3%	472,460	7,442,621	1575.3%	4.50%	0.2392
	2048	1,563,453	26,665,794	1705.6%	357,840	6,103,217	1705.6%	4.50%	0.2289
	2049	1,225,632	22,600,132	1844.0%	268,440	4,949,929	1844.0%	4.50%	0.2190
	2050	951,303	18,933,573	1990.3%	199,384	3,968,298	1990.3%	4.50%	0.2096
2051	730,785	15,671,683	2144.5%	146,570	3,143,193	2144.5%	4.50%	0.2006	
2052	555,369	12,811,109	2306.8%	106,591	2,458,815	2306.8%	4.50%	0.1919	
2053	417,338	10,336,264	2476.7%	76,650	1,898,394	2476.7%	4.50%	0.1837	
2054	309,947	8,228,621	2654.8%	54,475	1,446,217	2654.8%	4.50%	0.1758	
2055	227,378	6,460,152	2841.2%	38,242	1,086,508	2841.2%	4.50%	0.1682	
2056	164,671	4,999,137	3035.8%	26,503	804,580	3035.8%	4.50%	0.1609	
2057	117,658	3,811,230	3239.3%	18,121	586,979	3239.3%	4.50%	0.1540	
2058	82,878	2,860,647	3451.6%	12,215	421,605	3451.6%	4.50%	0.1474	
2059	57,502	2,111,062	3671.3%	8,110	297,732	3671.3%	4.50%	0.1410	
2060	39,252	1,529,653	3897.0%	5,298	206,444	3897.0%	4.50%	0.1350	
2061	26,322	1,085,753	4124.8%	3,400	140,224	4124.8%	4.50%	0.1291	
2062	17,307	753,186	4351.9%	2,139	93,085	4351.9%	4.50%	0.1236	
2063	11,130	509,363	4576.5%	1,316	60,240	4576.5%	4.50%	0.1183	
2064	6,979	334,934	4798.8%	790	37,906	4798.8%	4.50%	0.1132	
Past		663,711,774	158,710,768	23.9%	921,369,601	193,748,422	21.0%		
Future		975,982,353	2,186,593,900	224.0%	656,035,903	1,049,801,009	160.0%		
Lifetime		1,639,694,127	2,345,304,667	143.0%	1,577,405,504	1,243,549,431	78.8%		

Attachment 4
RiverSource Life Insurance Company
Nationwide Written Premiums and Paid Claim Experience, All Policies
Projections with No Increase
Adjusted to Reflect No Prior Rate Increases on a Nationwide Basis
Policy Form: 30160A, Subject to Endorsement Form 32100

	Calendar Year	Loss Ratio Demonstration						Interest Rate Factors	
		Without Interest			With Interest			Calendar Year	Mid-Year
		Written Premiums	Paid Claims	Loss Ratio	Written Premiums	Paid Claims	Loss Ratio	Effective Int Rate	Disc / Accum Factor
Historical Experience	2000	9,088,168	0	0.0%	17,205,312	0	0.0%	4.50%	1.8932
	2001	32,595,440	21,276	0.1%	59,050,933	38,545	0.1%	4.50%	1.8116
	2002	52,856,981	136,954	0.3%	91,633,861	237,425	0.3%	4.50%	1.7336
	2003	57,311,938	556,372	1.0%	95,078,524	923,003	1.0%	4.50%	1.6590
	2004	54,599,779	985,329	1.8%	86,678,609	1,564,237	1.8%	4.50%	1.5875
	2005	52,865,306	1,787,976	3.4%	80,311,089	2,716,230	3.4%	4.50%	1.5192
	2006	51,619,122	2,925,405	5.7%	75,041,081	4,252,795	5.7%	4.50%	1.4537
	2007	50,932,606	4,416,093	8.7%	70,854,605	6,143,422	8.7%	4.50%	1.3911
	2008	48,364,627	6,393,858	13.2%	64,384,856	8,511,751	13.2%	4.50%	1.3312
	2009	47,017,800	8,283,118	17.6%	59,896,563	10,551,967	17.6%	4.50%	1.2739
	2010	45,900,711	11,263,345	24.5%	55,955,492	13,730,637	24.5%	4.50%	1.2191
	2011	44,792,783	14,532,518	32.4%	52,253,461	16,953,052	32.4%	4.50%	1.1666
	2012	43,637,839	17,709,914	40.6%	48,714,019	19,770,023	40.6%	4.50%	1.1163
	2013	42,485,805	20,613,192	48.5%	45,385,622	22,020,120	48.5%	4.50%	1.0683
2014	41,386,573	22,264,250	53.8%	42,307,525	22,759,684	53.8%	4.50%	1.0223	
Projected Future Experience	2015	40,453,996	24,553,704	60.7%	39,573,393	24,019,219	60.7%	4.50%	0.9782
	2016	39,077,503	24,312,997	62.2%	36,580,730	22,759,571	62.2%	4.50%	0.9361
	2017	37,670,394	29,005,303	77.0%	33,745,000	25,982,843	77.0%	4.50%	0.8958
	2018	36,219,639	33,744,760	93.2%	31,048,248	28,926,729	93.2%	4.50%	0.8572
	2019	34,726,476	37,893,962	109.1%	28,486,389	31,084,702	109.1%	4.50%	0.8203
	2020	33,197,579	41,218,213	124.2%	26,059,544	32,355,608	124.2%	4.50%	0.7850
	2021	31,641,429	44,933,873	142.0%	23,768,414	33,753,434	142.0%	4.50%	0.7512
	2022	30,058,562	48,914,110	162.7%	21,607,077	35,161,061	162.7%	4.50%	0.7188
	2023	28,451,952	53,297,963	187.3%	19,571,477	36,662,506	187.3%	4.50%	0.6879
	2024	26,825,884	57,823,090	215.5%	17,658,316	38,062,432	215.5%	4.50%	0.6583
	2025	25,181,049	62,380,139	247.7%	15,861,811	39,293,914	247.7%	4.50%	0.6299
	2026	23,521,027	67,180,625	285.6%	14,178,130	40,495,494	285.6%	4.50%	0.6028
	2027	21,859,275	72,399,605	331.2%	12,609,043	41,762,123	331.2%	4.50%	0.5768
	2028	20,203,999	77,861,708	385.4%	11,152,376	42,978,773	385.4%	4.50%	0.5520
	2029	18,557,866	83,147,687	448.0%	9,802,612	43,920,165	448.0%	4.50%	0.5282
	2030	16,927,510	87,983,891	519.8%	8,556,390	44,473,434	519.8%	4.50%	0.5055
	2031	15,334,386	92,336,407	602.2%	7,417,330	44,663,646	602.2%	4.50%	0.4837
	2032	13,792,834	96,149,301	697.1%	6,384,376	44,505,230	697.1%	4.50%	0.4629
	2033	12,316,763	99,214,028	805.5%	5,455,634	43,946,239	805.5%	4.50%	0.4429
	2034	10,920,661	101,256,761	927.2%	4,628,937	42,919,669	927.2%	4.50%	0.4239
	2035	9,613,744	102,260,877	1063.7%	3,899,497	41,478,740	1063.7%	4.50%	0.4056
	2036	8,396,316	102,287,479	1218.2%	3,259,031	39,702,900	1218.2%	4.50%	0.3882
	2037	7,272,195	101,309,324	1393.1%	2,701,152	37,629,884	1393.1%	4.50%	0.3714
	2038	6,251,589	99,275,127	1588.0%	2,222,069	35,286,422	1588.0%	4.50%	0.3554
	2039	5,335,226	96,266,144	1804.4%	1,814,695	32,743,452	1804.4%	4.50%	0.3401
	2040	4,519,233	92,415,298	2044.9%	1,470,955	30,080,044	2044.9%	4.50%	0.3255
	2041	3,798,596	87,847,192	2312.6%	1,183,154	27,361,896	2312.6%	4.50%	0.3115
	2042	3,167,589	82,695,276	2610.7%	944,128	24,648,058	2610.7%	4.50%	0.2981
	2043	2,619,920	77,097,084	2942.7%	747,263	21,989,921	2942.7%	4.50%	0.2852
	2044	2,148,874	71,198,545	3313.3%	586,517	19,433,031	3313.3%	4.50%	0.2729
	2045	1,747,473	65,134,635	3727.4%	456,419	17,012,382	3727.4%	4.50%	0.2612
	2046	1,408,623	59,029,751	4190.6%	352,072	14,753,933	4190.6%	4.50%	0.2499
	2047	1,125,290	52,997,194	4709.6%	269,144	12,675,743	4709.6%	4.50%	0.2392
	2048	890,646	47,134,524	5292.2%	203,849	10,788,061	5292.2%	4.50%	0.2289
2049	698,210	41,525,745	5947.5%	152,923	9,095,057	5947.5%	4.50%	0.2190	
2050	541,946	36,235,419	6686.2%	113,587	7,594,601	6686.2%	4.50%	0.2096	
2051	416,336	31,311,910	7520.8%	83,503	6,280,077	7520.8%	4.50%	0.2006	
2052	316,417	26,788,998	8466.4%	60,729	5,141,568	8466.4%	4.50%	0.1919	
2053	237,792	22,686,595	9540.5%	43,674	4,166,699	9540.5%	4.50%	0.1837	
2054	176,618	19,012,394	10764.7%	31,041	3,341,514	10764.7%	4.50%	0.1758	
2055	129,581	15,763,251	12164.8%	21,794	2,651,161	12164.8%	4.50%	0.1682	
2056	93,856	12,926,409	13772.6%	15,106	2,080,424	13772.6%	4.50%	0.1609	
2057	67,069	10,481,190	15627.4%	10,330	1,614,241	15627.4%	4.50%	0.1540	
2058	47,250	8,400,817	17779.3%	6,964	1,238,120	17779.3%	4.50%	0.1474	
2059	32,788	6,653,570	20292.4%	4,624	938,382	20292.4%	4.50%	0.1410	
2060	22,386	5,205,204	23252.1%	3,021	702,500	23252.1%	4.50%	0.1350	
2061	15,015	4,020,227	26775.2%	1,939	519,210	26775.2%	4.50%	0.1291	
2062	9,874	3,063,531	31025.1%	1,220	378,616	31025.1%	4.50%	0.1236	
2063	6,352	2,301,702	36237.6%	751	272,213	36237.6%	4.50%	0.1183	
2064	3,984	1,703,712	42761.6%	451	192,815	42761.6%	4.50%	0.1132	
Past		675,455,478	111,889,601	16.6%	944,751,551	130,172,891	13.8%		
Future		578,049,574	2,620,637,254	453.4%	394,806,831	1,149,518,457	291.2%		
Lifetime		1,253,505,052	2,732,526,855	218.0%	1,339,558,382	1,279,691,348	95.5%		

Attachment 4
RiverSource Life Insurance Company
Nationwide Written Premiums and Paid Claim Experience, All Policies
Projections with 85.2% Increase
Adjusted to Reflect No Prior Rate Increases on a Nationwide Basis
Policy Form: 30160A, Subject to Endorsement Form 32100

	Calendar Year	Loss Ratio Demonstration						Interest Rate Factors	
		Without Interest			With Interest			Calendar Year	Mid-Year
		Written Premiums	Paid Claims	Loss Ratio	Written Premiums	Paid Claims	Loss Ratio	Effective Int Rate	Disc / Accum Factor
Historical Experience	2000	9,088,168	0	0.0%	17,205,312	0	0.0%	4.50%	1.8932
	2001	32,595,440	21,276	0.1%	59,050,933	38,545	0.1%	4.50%	1.8116
	2002	52,856,981	136,954	0.3%	91,633,861	237,425	0.3%	4.50%	1.7336
	2003	57,311,938	556,372	1.0%	95,078,524	923,003	1.0%	4.50%	1.6590
	2004	54,599,779	985,329	1.8%	86,678,609	1,564,237	1.8%	4.50%	1.5875
	2005	52,865,306	1,787,976	3.4%	80,311,089	2,716,230	3.4%	4.50%	1.5192
	2006	51,619,122	2,925,405	5.7%	75,041,081	4,252,795	5.7%	4.50%	1.4537
	2007	50,932,606	4,416,093	8.7%	70,854,605	6,143,422	8.7%	4.50%	1.3911
	2008	48,364,627	6,393,858	13.2%	64,384,856	8,511,751	13.2%	4.50%	1.3312
	2009	47,017,800	8,283,118	17.6%	59,896,563	10,551,967	17.6%	4.50%	1.2739
	2010	45,900,711	11,263,345	24.5%	55,955,492	13,730,637	24.5%	4.50%	1.2191
	2011	44,792,783	14,532,518	32.4%	52,253,461	16,953,052	32.4%	4.50%	1.1666
	2012	43,637,839	17,709,914	40.6%	48,714,019	19,770,023	40.6%	4.50%	1.1163
	2013	42,485,805	20,613,192	48.5%	45,385,622	22,020,120	48.5%	4.50%	1.0683
2014	41,386,573	22,264,250	53.8%	42,307,525	22,759,684	53.8%	4.50%	1.0223	
Projected Future Experience	2015	45,315,967	24,552,688	54.2%	44,329,528	24,018,225	54.2%	4.50%	0.9782
	2016	64,261,043	24,326,420	37.9%	60,155,222	22,772,136	37.9%	4.50%	0.9361
	2017	65,767,788	29,181,163	44.4%	58,914,542	26,140,378	44.4%	4.50%	0.8958
	2018	63,235,298	33,992,022	53.8%	54,206,648	29,138,688	53.8%	4.50%	0.8572
	2019	60,628,724	38,058,313	62.8%	49,734,199	31,219,520	62.8%	4.50%	0.8203
	2020	57,959,716	41,156,951	71.0%	45,497,408	32,307,518	71.0%	4.50%	0.7850
	2021	55,243,084	44,499,531	80.6%	41,497,509	33,427,165	80.6%	4.50%	0.7512
	2022	52,479,764	47,988,104	91.4%	37,724,170	34,495,418	91.4%	4.50%	0.7188
	2023	49,674,955	51,822,363	104.3%	34,170,317	35,647,473	104.3%	4.50%	0.6879
	2024	46,836,137	55,855,378	119.3%	30,830,198	36,767,173	119.3%	4.50%	0.6583
	2025	43,964,522	59,988,001	136.4%	27,693,721	37,787,081	136.4%	4.50%	0.6299
	2026	41,066,361	64,407,054	156.8%	24,754,199	38,823,626	156.8%	4.50%	0.6028
	2027	38,165,153	69,265,637	181.5%	22,014,731	39,954,362	181.5%	4.50%	0.5768
	2028	35,275,227	74,380,172	210.9%	19,471,522	41,057,004	210.9%	4.50%	0.5520
	2029	32,401,240	79,340,861	244.9%	17,114,942	41,909,328	244.9%	4.50%	0.5282
	2030	29,554,779	83,878,644	283.8%	14,939,127	42,398,344	283.8%	4.50%	0.5055
	2031	26,773,307	87,959,888	328.5%	12,950,401	42,546,700	328.5%	4.50%	0.4837
	2032	24,081,861	91,531,240	380.1%	11,146,922	42,367,639	380.1%	4.50%	0.4629
	2033	21,504,728	94,394,096	438.9%	9,525,386	41,811,279	438.9%	4.50%	0.4429
	2034	19,067,207	96,288,010	505.0%	8,082,011	40,813,566	505.0%	4.50%	0.4239
	2035	16,785,390	97,197,038	579.1%	6,808,438	39,424,762	579.1%	4.50%	0.4056
	2036	14,659,809	97,179,665	662.9%	5,690,207	37,720,301	662.9%	4.50%	0.3882
	2037	12,697,134	96,210,898	757.7%	4,716,167	35,736,147	757.7%	4.50%	0.3714
	2038	10,915,188	94,243,077	863.4%	3,879,702	33,497,827	863.4%	4.50%	0.3554
	2039	9,315,242	91,353,979	980.7%	3,168,437	31,072,654	980.7%	4.50%	0.3401
	2040	7,890,539	87,670,263	1111.1%	2,568,274	28,535,593	1111.1%	4.50%	0.3255
	2041	6,632,320	83,310,475	1256.1%	2,065,779	25,948,838	1256.1%	4.50%	0.3115
	2042	5,530,593	78,401,382	1417.6%	1,648,442	23,368,225	1417.6%	4.50%	0.2981
	2043	4,574,371	73,073,439	1597.5%	1,304,719	20,842,282	1597.5%	4.50%	0.2852
	2044	3,751,931	67,464,921	1798.1%	1,024,057	18,413,971	1798.1%	4.50%	0.2729
	2045	3,051,087	61,703,594	2022.3%	796,907	16,116,236	2022.3%	4.50%	0.2612
	2046	2,459,459	55,907,103	2273.1%	614,719	13,973,456	2273.1%	4.50%	0.2499
	2047	1,964,759	50,182,479	2554.1%	469,927	12,002,526	2554.1%	4.50%	0.2392
	2048	1,555,072	44,621,783	2869.4%	355,922	10,212,950	2869.4%	4.50%	0.2289
	2049	1,219,078	39,304,189	3224.1%	267,005	8,608,487	3224.1%	4.50%	0.2190
	2050	946,242	34,290,447	3623.9%	198,323	7,186,953	3623.9%	4.50%	0.2096
2051	726,927	29,625,962	4075.5%	145,796	5,941,934	4075.5%	4.50%	0.2006	
2052	552,467	25,342,344	4587.1%	106,034	4,863,914	4587.1%	4.50%	0.1919	
2053	415,187	21,458,097	5168.3%	76,255	3,941,069	5168.3%	4.50%	0.1837	
2054	308,377	17,980,187	5830.6%	54,199	3,160,099	5830.6%	4.50%	0.1758	
2055	226,250	14,905,359	6588.0%	38,052	2,506,875	6588.0%	4.50%	0.1682	
2056	163,874	12,221,297	7457.7%	26,374	1,966,941	7457.7%	4.50%	0.1609	
2057	117,104	9,908,231	8461.1%	18,036	1,525,997	8461.1%	4.50%	0.1540	
2058	82,500	7,940,654	9625.0%	12,159	1,170,301	9625.0%	4.50%	0.1474	
2059	57,249	6,288,422	10984.3%	8,074	886,884	10984.3%	4.50%	0.1410	
2060	39,086	4,919,033	12585.1%	5,275	663,878	12585.1%	4.50%	0.1350	
2061	26,216	3,798,833	14490.5%	3,386	490,617	14490.5%	4.50%	0.1291	
2062	17,241	2,894,558	16789.0%	2,131	357,733	16789.0%	4.50%	0.1236	
2063	11,090	2,174,562	19608.0%	1,312	257,177	19608.0%	4.50%	0.1183	
2064	6,956	1,609,475	23136.3%	787	182,149	23136.3%	4.50%	0.1132	
Past		675,455,478	111,889,601	16.6%	944,751,551	130,172,891	13.8%		
Future		979,955,603	2,506,048,281	255.7%	660,827,596	1,105,979,401	167.4%		
Lifetime		1,655,411,081	2,617,937,883	158.1%	1,605,579,147	1,236,152,292	77.0%		

Attachment 5
RiverSource Life Insurance Company
Pennsylvania Experience Projections, All Policies
Projections with No Increase
Adjusted to Reflect No Prior Rate Increases on All Policies
Policy Form: 30160A-PA, Subject to Endorsement Form 32100-PA

	Calendar Year	Loss Ratio Demonstration						Interest Rate Factors	
		Without Interest			With Interest			Calendar Year	Mid-Year
		Earned Premiums	Incurred Claims	Loss Ratio	Earned Premiums	Incurred Claims	Loss Ratio	Effective Int Rate	Disc / Accum Factor
Historical Experience	2000	191,933	0	0.0%	363,359	0	0.0%	4.50%	1.8932
	2001	1,613,839	0	0.0%	2,923,682	0	0.0%	4.50%	1.8116
	2002	2,855,973	0	0.0%	4,951,168	0	0.0%	4.50%	1.7336
	2003	3,512,912	0	0.0%	5,827,799	0	0.0%	4.50%	1.6590
	2004	3,393,631	423,802	12.5%	5,387,480	672,797	12.5%	4.50%	1.5875
	2005	3,302,468	850,620	25.8%	5,016,992	1,292,231	25.8%	4.50%	1.5192
	2006	3,208,258	247,267	7.7%	4,663,992	359,464	7.7%	4.50%	1.4537
	2007	3,146,842	1,247,125	39.6%	4,377,711	1,734,930	39.6%	4.50%	1.3911
	2008	3,017,644	0	0.0%	4,017,204	0	0.0%	4.50%	1.3312
	2009	2,922,239	757,123	25.9%	3,722,677	964,508	25.9%	4.50%	1.2739
	2010	2,861,256	1,307,452	45.7%	3,488,028	1,593,856	45.7%	4.50%	1.2191
	2011	2,779,778	1,265,624	45.5%	3,242,778	1,476,426	45.5%	4.50%	1.1666
	2012	2,692,145	1,135,542	42.2%	3,005,309	1,267,634	42.2%	4.50%	1.1163
	2013	2,623,461	168,636	6.4%	2,802,522	180,146	6.4%	4.50%	1.0683
2014	2,542,814	1,138,842	44.8%	2,599,398	1,164,184	44.8%	4.50%	1.0223	
Projected Future Experience	2015	2,463,662	1,814,875	73.7%	2,410,033	1,775,369	73.7%	4.50%	0.9782
	2016	2,375,744	2,010,855	84.6%	2,223,951	1,882,375	84.6%	4.50%	0.9361
	2017	2,285,677	2,211,773	96.8%	2,047,501	1,981,298	96.8%	4.50%	0.8958
	2018	2,192,937	2,407,236	109.8%	1,879,832	2,063,534	109.8%	4.50%	0.8572
	2019	2,097,429	2,588,489	123.4%	1,720,536	2,123,357	123.4%	4.50%	0.8203
	2020	1,999,663	2,799,924	140.0%	1,569,702	2,197,894	140.0%	4.50%	0.7850
	2021	1,900,270	3,084,294	162.3%	1,427,445	2,316,861	162.3%	4.50%	0.7512
	2022	1,799,509	3,357,544	186.6%	1,293,546	2,413,512	186.6%	4.50%	0.7188
	2023	1,697,555	3,616,675	213.1%	1,167,711	2,487,832	213.1%	4.50%	0.6879
	2024	1,594,996	3,841,589	240.9%	1,049,917	2,528,751	240.9%	4.50%	0.6583
	2025	1,491,990	4,069,246	272.7%	939,820	2,563,261	272.7%	4.50%	0.6299
	2026	1,388,771	4,364,888	314.3%	837,131	2,631,090	314.3%	4.50%	0.6028
	2027	1,286,197	4,649,786	361.5%	741,914	2,682,127	361.5%	4.50%	0.5768
	2028	1,184,826	4,894,998	413.1%	654,010	2,701,983	413.1%	4.50%	0.5520
	2029	1,084,804	5,076,264	467.9%	573,014	2,681,378	467.9%	4.50%	0.5282
	2030	986,369	5,212,342	528.4%	498,582	2,634,695	528.4%	4.50%	0.5055
	2031	890,721	5,347,932	600.4%	430,847	2,586,825	600.4%	4.50%	0.4837
	2032	798,754	5,417,727	678.3%	369,724	2,507,737	678.3%	4.50%	0.4629
	2033	711,173	5,424,590	762.8%	315,010	2,402,789	762.8%	4.50%	0.4429
	2034	628,757	5,352,346	851.3%	266,511	2,268,697	851.3%	4.50%	0.4239
	2035	552,013	5,249,550	951.0%	223,906	2,129,306	951.0%	4.50%	0.4056
	2036	480,901	5,093,774	1059.2%	186,662	1,977,149	1059.2%	4.50%	0.3882
	2037	415,562	4,882,219	1174.8%	154,354	1,813,430	1174.8%	4.50%	0.3714
	2038	356,455	4,617,834	1295.5%	126,698	1,641,366	1295.5%	4.50%	0.3554
	2039	303,585	4,328,973	1426.0%	103,260	1,472,434	1426.0%	4.50%	0.3401
	2040	256,684	4,020,759	1566.4%	83,547	1,308,708	1566.4%	4.50%	0.3255
	2041	215,410	3,695,720	1715.7%	67,094	1,151,111	1715.7%	4.50%	0.3115
	2042	179,388	3,365,709	1876.2%	53,468	1,003,179	1876.2%	4.50%	0.2981
	2043	148,218	3,036,469	2048.6%	42,275	866,073	2048.6%	4.50%	0.2852
	2044	121,482	2,710,944	2231.6%	33,158	739,929	2231.6%	4.50%	0.2729
	2045	98,755	2,397,304	2427.5%	25,794	626,147	2427.5%	4.50%	0.2612
	2046	79,610	2,098,326	2635.8%	19,898	524,457	2635.8%	4.50%	0.2499
	2047	63,630	1,817,939	2857.1%	15,219	434,810	2857.1%	4.50%	0.2392
	2048	50,413	1,559,144	3092.7%	11,538	356,854	3092.7%	4.50%	0.2289
	2049	39,582	1,323,338	3343.3%	8,669	289,840	3343.3%	4.50%	0.2190
	2050	30,789	1,111,011	3608.4%	6,453	232,857	3608.4%	4.50%	0.2096
	2051	23,719	922,030	3887.4%	4,757	184,927	3887.4%	4.50%	0.2006
	2052	18,088	756,270	4181.1%	3,472	145,150	4181.1%	4.50%	0.1919
	2053	13,650	612,871	4490.0%	2,507	112,562	4490.0%	4.50%	0.1837
	2054	10,188	490,339	4813.0%	1,791	86,179	4813.0%	4.50%	0.1758
2055	7,517	386,977	5148.1%	1,264	65,084	5148.1%	4.50%	0.1682	
2056	5,479	301,184	5496.6%	882	48,474	5496.6%	4.50%	0.1609	
2057	3,944	231,078	5859.6%	607	35,589	5859.6%	4.50%	0.1540	
2058	2,800	174,707	6239.2%	413	25,749	6239.2%	4.50%	0.1474	
2059	1,960	130,007	6633.8%	276	18,335	6633.8%	4.50%	0.1410	
2060	1,350	95,048	7038.3%	182	12,828	7038.3%	4.50%	0.1350	
2061	915	68,088	7442.6%	118	8,794	7442.6%	4.50%	0.1291	
2062	608	47,725	7847.7%	75	5,898	7847.7%	4.50%	0.1236	
2063	396	32,552	8225.0%	47	3,850	8225.0%	4.50%	0.1183	
2064	251	21,589	8586.6%	28	2,443	8586.6%	4.50%	0.1132	
Past		40,665,193	8,542,033	21.0%	56,390,099	10,706,177	19.0%		
Future		34,343,146	133,122,850	387.6%	23,595,153	64,754,878	274.4%		
Lifetime		75,008,339	141,664,883	188.9%	79,985,252	75,461,055	94.3%		

Attachment 5
RiverSource Life Insurance Company
Pennsylvania Experience Projections, All Policies
Projections with 85.2% Increase
Adjusted to Reflect No Prior Rate Increases on All Policies
Policy Form: 30160A-PA, Subject to Endorsement Form 32100-PA

	Calendar Year	Loss Ratio Demonstration						Interest Rate Factors	
		Without Interest			With Interest			Calendar Year	Mid-Year
		Earned Premiums	Incurred Claims	Loss Ratio	Earned Premiums	Incurred Claims	Loss Ratio	Effective Int Rate	Disc / Accum Factor
Historical Experience	2000	191,933	0	0.0%	363,359	0	0.0%	4.50%	1.8932
	2001	1,613,839	0	0.0%	2,923,682	0	0.0%	4.50%	1.8116
	2002	2,855,973	0	0.0%	4,951,168	0	0.0%	4.50%	1.7336
	2003	3,512,912	0	0.0%	5,827,799	0	0.0%	4.50%	1.6590
	2004	3,393,631	423,802	12.5%	5,387,480	672,797	12.5%	4.50%	1.5875
	2005	3,302,468	850,620	25.8%	5,016,992	1,292,231	25.8%	4.50%	1.5192
	2006	3,208,258	247,267	7.7%	4,663,992	359,464	7.7%	4.50%	1.4537
	2007	3,146,842	1,247,125	39.6%	4,377,711	1,734,930	39.6%	4.50%	1.3911
	2008	3,017,644	0	0.0%	4,017,204	0	0.0%	4.50%	1.3312
	2009	2,922,239	757,123	25.9%	3,722,677	964,508	25.9%	4.50%	1.2739
	2010	2,861,256	1,307,452	45.7%	3,488,028	1,593,856	45.7%	4.50%	1.2191
	2011	2,779,778	1,265,624	45.5%	3,242,778	1,476,426	45.5%	4.50%	1.1666
	2012	2,692,145	1,135,542	42.2%	3,005,309	1,267,634	42.2%	4.50%	1.1163
	2013	2,623,461	168,636	6.4%	2,802,522	180,146	6.4%	4.50%	1.0683
2014	2,542,814	1,138,842	44.8%	2,599,398	1,164,184	44.8%	4.50%	1.0223	
Projected Future Experience	2015	2,552,361	1,812,925	71.0%	2,496,801	1,773,462	71.0%	4.50%	0.9782
	2016	3,665,750	2,033,889	55.5%	3,431,535	1,903,938	55.5%	4.50%	0.9361
	2017	3,990,526	2,243,728	56.2%	3,574,698	2,009,923	56.2%	4.50%	0.8958
	2018	3,828,638	2,415,052	63.1%	3,281,990	2,070,234	63.1%	4.50%	0.8572
	2019	3,661,913	2,568,156	70.1%	3,003,895	2,106,678	70.1%	4.50%	0.8203
	2020	3,491,245	2,746,923	78.7%	2,740,569	2,156,288	78.7%	4.50%	0.7850
	2021	3,317,733	2,992,082	90.2%	2,492,215	2,247,593	90.2%	4.50%	0.7512
	2022	3,141,830	3,225,957	102.7%	2,258,450	2,318,923	102.7%	4.50%	0.7188
	2023	2,963,842	3,462,021	116.8%	2,038,762	2,381,449	116.8%	4.50%	0.6879
	2024	2,784,795	3,673,429	131.9%	1,833,110	2,418,059	131.9%	4.50%	0.6583
	2025	2,604,965	3,887,299	149.2%	1,640,896	2,448,651	149.2%	4.50%	0.6299
	2026	2,424,761	4,165,875	171.8%	1,461,610	2,511,128	171.8%	4.50%	0.6028
	2027	2,245,678	4,434,077	197.4%	1,295,370	2,557,700	197.4%	4.50%	0.5768
	2028	2,068,695	4,664,368	225.5%	1,141,896	2,574,678	225.5%	4.50%	0.5520
	2029	1,894,065	4,833,680	255.2%	1,000,481	2,553,240	255.2%	4.50%	0.5282
	2030	1,722,203	4,960,092	288.0%	870,526	2,507,190	288.0%	4.50%	0.5055
	2031	1,555,205	5,086,191	327.0%	752,261	2,460,220	327.0%	4.50%	0.4837
	2032	1,394,634	5,149,880	369.3%	645,543	2,383,757	369.3%	4.50%	0.4629
	2033	1,241,720	5,153,926	415.1%	550,012	2,282,900	415.1%	4.50%	0.4429
	2034	1,097,821	5,082,973	463.0%	465,333	2,154,518	463.0%	4.50%	0.4239
	2035	963,827	4,983,206	517.0%	390,945	2,021,272	517.0%	4.50%	0.4056
	2036	839,665	4,833,403	575.6%	325,916	1,876,086	575.6%	4.50%	0.3882
	2037	725,582	4,630,945	638.2%	269,507	1,720,097	638.2%	4.50%	0.3714
	2038	622,379	4,378,662	703.5%	221,219	1,556,355	703.5%	4.50%	0.3554
	2039	530,066	4,103,435	774.1%	180,294	1,395,721	774.1%	4.50%	0.3401
	2040	448,177	3,810,116	850.1%	145,876	1,240,146	850.1%	4.50%	0.3255
	2041	376,111	3,501,102	930.9%	117,148	1,090,493	930.9%	4.50%	0.3115
	2042	313,216	3,187,606	1017.7%	93,357	950,094	1017.7%	4.50%	0.2981
	2043	258,792	2,875,054	1111.0%	73,814	820,034	1111.0%	4.50%	0.2852
	2044	212,111	2,566,217	1209.8%	57,894	700,427	1209.8%	4.50%	0.2729
	2045	172,428	2,268,808	1315.8%	45,036	592,585	1315.8%	4.50%	0.2612
	2046	139,001	1,985,436	1428.4%	34,742	496,241	1428.4%	4.50%	0.2499
	2047	111,099	1,719,793	1548.0%	26,572	411,336	1548.0%	4.50%	0.2392
	2048	88,022	1,474,695	1675.4%	20,146	337,525	1675.4%	4.50%	0.2289
	2049	69,112	1,251,441	1810.8%	15,137	274,093	1810.8%	4.50%	0.2190
	2050	53,759	1,050,476	1954.0%	11,267	220,170	1954.0%	4.50%	0.2096
	2051	41,413	871,659	2104.8%	8,306	174,824	2104.8%	4.50%	0.2006
	2052	31,582	714,851	2263.5%	6,061	137,200	2263.5%	4.50%	0.1919
	2053	23,833	579,227	2430.4%	4,377	106,383	2430.4%	4.50%	0.1837
	2054	17,788	463,363	2604.9%	3,126	81,438	2604.9%	4.50%	0.1758
2055	13,125	365,644	2786.0%	2,207	61,496	2786.0%	4.50%	0.1682	
2056	9,567	284,549	2974.2%	1,540	45,796	2974.2%	4.50%	0.1609	
2057	6,886	218,293	3170.3%	1,060	33,620	3170.3%	4.50%	0.1540	
2058	4,889	165,025	3375.4%	721	24,321	3375.4%	4.50%	0.1474	
2059	3,422	122,791	3588.5%	483	17,318	3588.5%	4.50%	0.1410	
2060	2,358	89,764	3807.0%	318	12,115	3807.0%	4.50%	0.1350	
2061	1,597	64,298	4025.4%	206	8,304	4025.4%	4.50%	0.1291	
2062	1,062	45,065	4244.1%	131	5,570	4244.1%	4.50%	0.1236	
2063	691	30,735	4447.9%	82	3,635	4447.9%	4.50%	0.1183	
2064	439	20,383	4643.1%	50	2,307	4643.1%	4.50%	0.1132	
Past		40,665,193	8,542,033	21.0%	56,390,099	10,706,177	19.0%		
Future		57,730,378	127,248,567	220.4%	39,033,492	62,237,533	159.4%		
Lifetime		98,395,570	135,790,599	138.0%	95,423,591	72,943,710	76.4%		

Attachment 6
RiverSource Life Insurance Company
Pennsylvania Written Premiums and Paid Claim Experience, All Policies
Projections with No Increase
Adjusted to Reflect No Prior Rate Increases on All Policies
Policy Form: 30160A-PA, Subject to Endorsement Form 32100-PA

	Calendar Year	Loss Ratio Demonstration						Interest Rate Factors	
		Without Interest			With Interest			Calendar Year	Mid-Year
		Written Premiums	Paid Claims	Loss Ratio	Written Premiums	Paid Claims	Loss Ratio	Effective Int Rate	Disc / Accum Factor
Historical Experience	2000	585,110	0	0.0%	1,107,705	0	0.0%	4.50%	1.8932
	2001	1,996,380	0	0.0%	3,616,706	0	0.0%	4.50%	1.8116
	2002	3,194,846	0	0.0%	5,538,645	0	0.0%	4.50%	1.7336
	2003	3,479,645	0	0.0%	5,772,611	0	0.0%	4.50%	1.6590
	2004	3,366,191	5,916	0.2%	5,343,919	9,392	0.2%	4.50%	1.5875
	2005	3,274,475	135,976	4.2%	4,974,466	206,570	4.2%	4.50%	1.5192
	2006	3,179,563	272,023	8.6%	4,622,277	395,452	8.6%	4.50%	1.4537
	2007	3,146,475	293,713	9.3%	4,377,201	408,597	9.3%	4.50%	1.3911
	2008	2,987,960	409,969	13.7%	3,977,688	545,767	13.7%	4.50%	1.3312
	2009	2,900,280	441,684	15.2%	3,694,703	562,667	15.2%	4.50%	1.2739
	2010	2,839,837	688,712	24.3%	3,461,918	839,578	24.3%	4.50%	1.2191
	2011	2,760,977	805,694	29.2%	3,220,845	939,890	29.2%	4.50%	1.1666
	2012	2,663,185	1,023,473	38.4%	2,972,981	1,142,528	38.4%	4.50%	1.1163
	2013	2,590,549	1,196,446	46.2%	2,767,364	1,278,108	46.2%	4.50%	1.0683
2014	2,522,215	1,048,589	41.6%	2,578,340	1,071,923	41.6%	4.50%	1.0223	
Projected Future Experience	2015	2,455,513	1,590,990	64.8%	2,402,061	1,556,357	64.8%	4.50%	0.9782
	2016	2,367,721	1,587,923	67.1%	2,216,440	1,486,466	67.1%	4.50%	0.9361
	2017	2,277,795	1,885,729	82.8%	2,040,440	1,689,229	82.8%	4.50%	0.8958
	2018	2,185,055	2,197,256	100.6%	1,873,076	1,883,535	100.6%	4.50%	0.8572
	2019	2,089,560	2,459,408	117.7%	1,714,082	2,017,471	117.7%	4.50%	0.8203
	2020	1,991,849	2,654,602	133.3%	1,563,568	2,083,818	133.3%	4.50%	0.7850
	2021	1,892,676	2,872,636	151.8%	1,421,741	2,157,867	151.8%	4.50%	0.7512
	2022	1,792,168	3,102,004	173.1%	1,288,269	2,229,822	173.1%	4.50%	0.7188
	2023	1,690,584	3,350,950	198.2%	1,162,916	2,305,045	198.2%	4.50%	0.6879
	2024	1,588,384	3,601,779	226.8%	1,045,564	2,370,895	226.8%	4.50%	0.6583
	2025	1,485,727	3,851,830	259.3%	935,875	2,426,309	259.3%	4.50%	0.6299
	2026	1,382,784	4,114,997	297.6%	833,522	2,480,460	297.6%	4.50%	0.6028
	2027	1,280,458	4,394,527	343.2%	738,604	2,534,887	343.2%	4.50%	0.5768
	2028	1,179,293	4,681,328	397.0%	650,956	2,584,040	397.0%	4.50%	0.5520
	2029	1,079,438	4,957,275	459.2%	570,180	2,618,526	459.2%	4.50%	0.5282
	2030	981,150	5,206,484	530.7%	495,944	2,631,734	530.7%	4.50%	0.5055
	2031	885,759	5,425,874	612.6%	428,447	2,624,526	612.6%	4.50%	0.4837
	2032	794,075	5,611,466	706.7%	367,558	2,597,414	706.7%	4.50%	0.4629
	2033	706,849	5,751,958	813.7%	313,094	2,547,794	813.7%	4.50%	0.4429
	2034	624,825	5,833,945	933.7%	264,844	2,472,832	933.7%	4.50%	0.4239
	2035	548,509	5,856,919	1067.8%	222,484	2,375,665	1067.8%	4.50%	0.4056
	2036	477,815	5,826,297	1219.4%	185,464	2,261,478	1219.4%	4.50%	0.3882
	2037	412,828	5,742,648	1391.1%	153,339	2,133,024	1391.1%	4.50%	0.3714
	2038	354,085	5,602,568	1582.3%	125,856	1,991,381	1582.3%	4.50%	0.3554
	2039	301,560	5,409,970	1794.0%	102,571	1,840,118	1794.0%	4.50%	0.3401
	2040	254,966	5,173,239	2029.0%	82,988	1,683,826	2029.0%	4.50%	0.3255
	2041	213,964	4,899,245	2289.8%	66,644	1,525,975	2289.8%	4.50%	0.3115
	2042	178,180	4,596,029	2579.4%	53,108	1,369,887	2579.4%	4.50%	0.2981
	2043	147,217	4,271,493	2901.5%	41,990	1,218,331	2901.5%	4.50%	0.2852
	2044	120,659	3,933,550	3260.1%	32,933	1,073,629	3260.1%	4.50%	0.2729
	2045	98,083	3,589,401	3659.5%	25,618	937,508	3659.5%	4.50%	0.2612
	2046	79,067	3,245,629	4104.9%	19,762	811,215	4104.9%	4.50%	0.2499
	2047	63,194	2,908,419	4602.4%	15,115	695,629	4602.4%	4.50%	0.2392
	2048	50,067	2,582,607	5158.4%	11,459	591,102	5158.4%	4.50%	0.2289
	2049	39,309	2,272,446	5781.0%	8,610	497,716	5781.0%	4.50%	0.2190
	2050	30,575	1,981,239	6479.9%	6,408	415,249	6479.9%	4.50%	0.2096
	2051	23,552	1,711,166	7265.5%	4,724	343,200	7265.5%	4.50%	0.2006
	2052	17,959	1,463,849	8151.0%	3,447	280,954	8151.0%	4.50%	0.1919
	2053	13,550	1,240,070	9151.5%	2,489	227,756	9151.5%	4.50%	0.1837
	2054	10,112	1,039,927	10284.3%	1,777	182,772	10284.3%	4.50%	0.1758
2055	7,459	863,034	11570.5%	1,254	145,150	11570.5%	4.50%	0.1682	
2056	5,436	708,564	13035.7%	875	114,039	13035.7%	4.50%	0.1609	
2057	3,911	575,308	14711.6%	602	88,605	14711.6%	4.50%	0.1540	
2058	2,776	461,811	16638.8%	409	68,062	16638.8%	4.50%	0.1474	
2059	1,942	366,365	18869.5%	274	51,670	18869.5%	4.50%	0.1410	
2060	1,337	287,116	21472.3%	180	38,750	21472.3%	4.50%	0.1350	
2061	905	222,160	24540.9%	117	28,692	24540.9%	4.50%	0.1291	
2062	601	169,585	28201.0%	74	20,959	28201.0%	4.50%	0.1236	
2063	391	127,604	32632.9%	46	15,091	32632.9%	4.50%	0.1183	
2064	248	94,540	38089.4%	28	10,699	38089.4%	4.50%	0.1132	
Past		41,487,692	6,322,195	15.2%	58,027,370	7,400,472	12.8%		
Future		34,191,916	152,355,759	445.6%	23,497,827	68,337,159	290.8%		
Lifetime		75,679,608	158,677,954	209.7%	81,525,197	75,737,631	92.9%		

Attachment 6
RiverSource Life Insurance Company
Pennsylvania Written Premiums and Paid Claim Experience, All Policies
Projections with 85.2% Increase
Adjusted to Reflect No Prior Rate Increases on All Policies
Policy Form: 30160A-PA, Subject to Endorsement Form 32100-PA

	Calendar Year	Loss Ratio Demonstration						Interest Rate Factors	
		Without Interest			With Interest			Calendar Year	Mid-Year
		Written Premiums	Paid Claims	Loss Ratio	Written Premiums	Paid Claims	Loss Ratio	Effective Int Rate	Disc / Accum Factor
Historical Experience	2000	585,110	0	0.0%	1,107,705	0	0.0%	4.50%	1.8932
	2001	1,996,380	0	0.0%	3,616,706	0	0.0%	4.50%	1.8116
	2002	3,194,846	0	0.0%	5,538,645	0	0.0%	4.50%	1.7336
	2003	3,479,645	0	0.0%	5,772,611	0	0.0%	4.50%	1.6590
	2004	3,366,191	5,916	0.2%	5,343,919	9,392	0.2%	4.50%	1.5875
	2005	3,274,475	135,976	4.2%	4,974,466	206,570	4.2%	4.50%	1.5192
	2006	3,179,563	272,023	8.6%	4,622,277	395,452	8.6%	4.50%	1.4537
	2007	3,146,475	293,713	9.3%	4,377,201	408,597	9.3%	4.50%	1.3911
	2008	2,987,960	409,969	13.7%	3,977,688	545,767	13.7%	4.50%	1.3312
	2009	2,900,280	441,684	15.2%	3,694,703	562,667	15.2%	4.50%	1.2739
	2010	2,839,837	688,712	24.3%	3,461,918	839,578	24.3%	4.50%	1.2191
	2011	2,760,977	805,694	29.2%	3,220,845	939,890	29.2%	4.50%	1.1666
	2012	2,663,185	1,023,473	38.4%	2,972,981	1,142,528	38.4%	4.50%	1.1163
	2013	2,590,549	1,196,446	46.2%	2,767,364	1,278,108	46.2%	4.50%	1.0683
2014	2,522,215	1,048,589	41.6%	2,578,340	1,071,923	41.6%	4.50%	1.0223	
Projected Future Experience	2015	2,795,282	1,590,925	56.9%	2,734,434	1,556,293	56.9%	4.50%	0.9782
	2016	3,897,535	1,588,489	40.8%	3,648,510	1,486,996	40.8%	4.50%	0.9361
	2017	3,976,652	1,896,776	47.7%	3,562,270	1,699,125	47.7%	4.50%	0.8958
	2018	3,814,767	2,213,289	58.0%	3,270,100	1,897,279	58.0%	4.50%	0.8572
	2019	3,648,068	2,470,291	67.7%	2,992,538	2,026,399	67.7%	4.50%	0.8203
	2020	3,477,498	2,651,297	76.2%	2,729,778	2,081,224	76.2%	4.50%	0.7850
	2021	3,304,373	2,845,655	86.1%	2,482,180	2,137,600	86.1%	4.50%	0.7512
	2022	3,128,915	3,044,213	97.3%	2,249,166	2,188,280	97.3%	4.50%	0.7188
	2023	2,951,575	3,259,168	110.4%	2,030,324	2,241,911	110.4%	4.50%	0.6879
	2024	2,773,157	3,480,060	125.5%	1,825,449	2,290,772	125.5%	4.50%	0.6583
	2025	2,593,939	3,704,844	142.8%	1,633,950	2,333,721	142.8%	4.50%	0.6299
	2026	2,414,220	3,945,937	163.4%	1,455,256	2,378,553	163.4%	4.50%	0.6028
	2027	2,235,576	4,205,230	188.1%	1,289,543	2,425,695	188.1%	4.50%	0.5768
	2028	2,058,957	4,472,883	217.2%	1,136,521	2,468,980	217.2%	4.50%	0.5520
	2029	1,884,625	4,731,101	251.0%	995,494	2,499,056	251.0%	4.50%	0.5282
	2030	1,713,026	4,964,212	289.8%	865,887	2,509,273	289.8%	4.50%	0.5055
	2031	1,546,484	5,169,212	334.3%	748,043	2,500,378	334.3%	4.50%	0.4837
	2032	1,386,411	5,342,319	385.3%	641,737	2,472,833	385.3%	4.50%	0.4629
	2033	1,234,123	5,472,762	443.5%	546,647	2,424,126	443.5%	4.50%	0.4429
	2034	1,090,915	5,547,795	508.5%	462,406	2,351,542	508.5%	4.50%	0.4239
	2035	957,673	5,566,924	581.3%	388,448	2,258,038	581.3%	4.50%	0.4056
	2036	834,246	5,535,313	663.5%	323,813	2,148,532	663.5%	4.50%	0.3882
	2037	720,783	5,453,541	756.6%	267,724	2,025,639	756.6%	4.50%	0.3714
	2038	618,221	5,318,431	860.3%	219,741	1,890,387	860.3%	4.50%	0.3554
	2039	526,514	5,133,731	975.0%	179,086	1,746,160	975.0%	4.50%	0.3401
	2040	445,164	4,907,415	1102.4%	144,895	1,597,303	1102.4%	4.50%	0.3255
	2041	373,575	4,646,016	1243.7%	116,358	1,447,102	1243.7%	4.50%	0.3115
	2042	311,098	4,357,164	1400.6%	92,726	1,298,691	1400.6%	4.50%	0.2981
	2043	257,037	4,048,347	1575.0%	73,313	1,154,685	1575.0%	4.50%	0.2852
	2044	210,668	3,727,060	1769.2%	57,500	1,017,269	1769.2%	4.50%	0.2729
	2045	171,251	3,400,116	1985.5%	44,729	888,069	1985.5%	4.50%	0.2612
	2046	138,049	3,073,738	2226.6%	34,504	768,252	2226.6%	4.50%	0.2499
	2047	110,336	2,753,765	2495.8%	26,390	658,639	2495.8%	4.50%	0.2392
	2048	87,415	2,444,757	2796.7%	20,007	559,551	2796.7%	4.50%	0.2289
	2049	68,633	2,150,719	3133.7%	15,032	471,055	3133.7%	4.50%	0.2190
	2050	53,384	1,874,757	3511.8%	11,189	392,931	3511.8%	4.50%	0.2096
	2051	41,121	1,618,910	3936.9%	8,248	324,697	3936.9%	4.50%	0.2006
2052	31,356	1,384,694	4416.0%	6,018	265,762	4416.0%	4.50%	0.1919	
2053	23,659	1,172,831	4957.2%	4,345	215,406	4957.2%	4.50%	0.1837	
2054	17,655	983,394	5570.0%	3,103	172,836	5570.0%	4.50%	0.1758	
2055	13,023	816,004	6265.7%	2,190	137,241	6265.7%	4.50%	0.1682	
2056	9,490	669,864	7058.3%	1,527	107,810	7058.3%	4.50%	0.1609	
2057	6,828	543,820	7964.7%	1,052	83,755	7964.7%	4.50%	0.1540	
2058	4,846	436,485	9007.0%	714	64,330	9007.0%	4.50%	0.1474	
2059	3,390	346,236	10213.5%	478	48,831	10213.5%	4.50%	0.1410	
2060	2,335	271,314	11621.1%	315	36,617	11621.1%	4.50%	0.1350	
2061	1,581	209,913	13280.6%	204	27,110	13280.6%	4.50%	0.1291	
2062	1,050	160,222	15260.0%	130	19,802	15260.0%	4.50%	0.1236	
2063	683	120,550	17656.7%	81	14,257	17656.7%	4.50%	0.1183	
2064	433	89,307	20607.5%	49	10,107	20607.5%	4.50%	0.1132	
Past		41,487,692	6,322,195	15.2%	58,027,370	7,400,472	12.8%		
Future		57,967,596	145,811,798	251.5%	39,344,142	65,820,900	167.3%		
Lifetime		99,455,287	152,133,993	153.0%	97,371,512	73,221,372	75.2%		

Attachment 7
RiverSource Life Insurance Company
Reserve Balance at 12/31/2014, All Policies

Incurred Year	Nationwide Form 30160A, Subject to Endorsement Form 32100		Pennsylvania Form 30160A-PA, Subject to Endorsement Form 32100-PA	
	Claim Reserve ¹	Active Life Reserve ²	Claim Reserve ¹	Active Life Reserve ²
2000	0		0	
2001	0		0	
2002	75,243		0	
2003	0		0	
2004	12,390		0	
2005	132,941		0	
2006	112,492		0	
2007	748,137		112,101	
2008	346,221		0	
2009	1,524,103		75,213	
2010	2,963,386		229,788	
2011	6,731,421		425,201	
2012	10,408,234		663,826	
2013	14,269,778		237,907	
2014	20,390,181	587,634,145	1,266,051	34,941,980

¹ Claim reserve is the sum of disabled life reserve and incurred but not reported reserve (IBNR). Disabled life reserve is discounted to the original loss date using 4.50%, and IBNR is allocated to calendar years 2012, 2013 and 2014 then discounted to the time it is assumed to incur at 4.50%

² Active Life Reserve is defined as "midterminal" and includes an unearned premium reserve.

Attachment 8
RiverSource Life Insurance Company
Nationwide Experience by Duration, All Policies
Projections with No Increase
Adjusted to Reflect No Prior Rate Increases on a Nationwide Basis
Policy Form: 30160A, Subject to Endorsement Form 32100

Policy Duration	Earned Premiums	Incurred Claims	Incurred Loss Ratio
1	63,251,793	725,461	1.1%
2	59,034,607	2,669,128	4.5%
3	55,776,420	2,515,454	4.5%
4	53,716,087	6,888,005	12.8%
5	52,327,112	6,604,422	12.6%
6	50,967,545	8,996,512	17.7%
7	49,397,674	10,682,326	21.6%
8	47,828,676	10,162,278	21.2%
9	46,585,755	17,724,774	38.0%
10	45,566,894	17,228,350	37.8%
11	44,395,925	21,430,726	48.3%
12	43,126,691	21,125,212	49.0%
13	41,482,720	24,027,977	57.9%
14	40,252,569	24,924,266	61.9%
15	39,260,344	29,801,509	75.9%
16	38,215,116	33,717,909	88.2%
17	36,780,328	36,604,824	99.5%
18	35,293,235	39,535,916	112.0%
19	33,763,304	42,927,779	127.1%
20	32,213,856	46,737,093	145.1%
21	30,631,518	53,636,433	175.1%
22	29,021,444	57,593,646	198.5%
23	27,391,345	62,028,338	226.5%
24	25,745,282	66,205,521	257.2%
25	24,077,231	69,909,317	290.4%
26	22,399,444	78,677,603	351.2%
27	20,737,083	82,290,584	396.8%
28	19,081,933	86,294,284	452.2%
29	17,430,162	89,691,263	514.6%
30	15,810,056	91,075,014	576.1%
31	14,245,634	95,408,281	669.7%
32	12,735,282	95,534,536	750.2%
33	11,300,831	94,862,057	839.4%
34	9,965,851	93,514,733	938.4%
35	8,714,917	91,991,245	1055.6%
36	7,553,661	88,299,880	1169.0%
37	6,499,460	83,989,520	1292.3%
38	5,551,998	79,140,249	1425.4%
39	4,707,190	73,840,361	1568.7%
40	3,960,100	68,201,350	1722.2%
41	3,305,048	62,343,127	1886.3%
42	2,735,756	56,408,692	2061.9%
43	2,245,473	50,511,417	2249.5%
44	1,827,153	44,769,275	2450.2%
45	1,473,606	39,247,844	2663.4%
46	1,177,670	34,034,915	2890.0%
47	932,363	29,211,362	3133.0%
48	731,022	24,789,156	3391.0%
49	567,421	20,787,613	3663.5%
50	435,844	17,220,999	3951.2%
51	331,140	14,083,228	4253.0%
52	248,730	11,369,399	4571.0%
53	184,608	9,051,883	4903.3%
54	135,311	7,103,128	5249.5%
55	97,882	5,493,347	5612.2%
56	69,837	4,185,657	5993.5%
57	49,107	3,138,544	6391.2%
58	34,002	2,313,487	6803.9%
59	23,156	1,673,954	7228.9%
60	15,487	1,186,888	7663.7%
Total	1,243,417,688	2,446,138,049	196.7%

Attachment 9
RiverSource Life Insurance Company
Pennsylvania Experience by Duration, All Policies
Projections with No Increase
Adjusted to Reflect No Prior Rate Increases on All Policies
Policy Form: 30160A-PA, Subject to Endorsement Form 32100-PA

Policy Duration	Earned Premiums	Incurred Claims	Incurred Loss Ratio
1	3,760,889	0	0.0%
2	3,556,467	0	0.0%
3	3,408,275	0	0.0%
4	3,326,865	539,388	16.2%
5	3,244,912	1,742,482	53.7%
6	3,164,443	437,884	13.8%
7	3,071,037	136,856	4.5%
8	2,969,130	0	0.0%
9	2,886,256	1,541,661	53.4%
10	2,811,333	832,494	29.6%
11	2,722,954	797,697	29.3%
12	2,638,383	1,338,988	50.8%
13	2,535,404	831,427	32.8%
14	2,447,224	1,390,472	56.8%
15	2,381,583	2,102,399	88.3%
16	2,312,101	2,176,418	94.1%
17	2,220,489	2,350,827	105.9%
18	2,125,451	2,530,395	119.1%
19	2,027,758	2,731,994	134.7%
20	1,929,055	2,951,623	153.0%
21	1,828,566	3,334,629	182.4%
22	1,726,778	3,551,994	205.7%
23	1,624,234	3,799,900	234.0%
24	1,521,296	4,024,819	264.6%
25	1,417,699	4,218,431	297.6%
26	1,314,097	4,679,827	356.1%
27	1,212,143	4,866,934	401.5%
28	1,111,315	5,074,301	456.6%
29	1,011,356	5,245,101	518.6%
30	913,948	5,292,110	579.0%
31	820,499	5,497,755	670.0%
32	730,905	5,473,410	748.9%
33	646,362	5,406,070	836.4%
34	568,131	5,301,441	933.1%
35	495,269	5,192,217	1048.4%
36	428,007	4,962,569	1159.5%
37	367,238	4,701,690	1280.3%
38	312,876	4,415,763	1411.3%
39	264,619	4,104,905	1551.3%
40	222,125	3,778,871	1701.2%
41	185,018	3,444,251	1861.6%
42	152,895	3,108,778	2033.3%
43	125,332	2,780,519	2218.5%
44	101,894	2,460,997	2415.3%
45	82,145	2,155,915	2624.5%
46	65,655	1,869,466	2847.4%
47	52,014	1,605,531	3086.7%
48	40,832	1,364,530	3341.8%
49	31,753	1,146,664	3611.2%
50	24,449	952,691	3896.6%
51	18,633	781,952	4196.7%
52	14,047	634,254	4515.2%
53	10,471	507,452	4846.1%
54	7,714	400,471	5191.7%
55	5,612	311,561	5551.6%
56	4,030	239,086	5932.9%
57	2,854	180,646	6330.1%
58	1,991	134,321	6745.7%
59	1,367	98,146	7178.1%
60	922	70,316	7623.0%
Total	75,007,101	141,603,290	188.8%



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Fax +1 952 897 5301

milliman.com

June 23, 2015

To: Pennsylvania Insurance Department

RE: RiverSource Life Insurance Company
Company NAIC # 65005
SERFF Tracking # AERS-129957562
Policy Form: Long Term Care Policy Form 30160A-PA
Long Term Care Insurance Endorsement Form 32100-PA

Ameriprise Financial, Inc., the parent company of RiverSource Life Insurance Company ("RiverSource Life"), formerly IDS Life Insurance Company, has entered into a service agreement with Milliman, Inc. ("Milliman") effective April 5, 2007, that includes individual long term care rate filing services.

RiverSource Life prepared and submitted the above referenced rate filing in June 2015. Milliman has conducted a high-level review of the cover letter, actuarial memorandum, and supplement to the actuarial memorandum items of this filing and believes them to be in compliance with the applicable laws of this state as indicated in the filing. However, Milliman has not performed any technical checking of the filing for accuracy.

I, Amy Pahl, am a Principal and Consulting Actuary for Milliman, Inc. I am a member of the American Academy of Actuaries and I meet the Qualification Standards of the American Academy of Actuaries to render an actuarial opinion as described herein.

Should you have any questions regarding the above, please feel free to contact me directly at (952) 820-2419 or by email at amy.pahl@milliman.com.

Respectfully,

A handwritten signature in blue ink that reads "Amy Pahl".

Amy Pahl, FSA, MAAA
Principal and Consulting Actuary

AP/mag

IDS Life Insurance Company
 IDS Tower 10
 Minneapolis, MN 55440

11-5-97

Benefit Increases Option Rider

Based on the application for this Rider and the payment of the premium, this Rider is made a part of this Policy. This rider is subject to all policy terms and provisions unless this Rider changes them.

Simple Increases Option

Your applicable Facility Care and Home and Community Care Daily Maximum Benefit Amounts will increase on each anniversary of the Policy Date. Increases will apply to expenses You incur on or after the date of the increase. The first increase, and each increase thereafter, will be equal to 5% of Your original Facility Care and Home and Community care Daily Maximum Benefit Amounts.

Your Lifetime Maximum Benefit Amount will also increase on each anniversary of the Policy Date. It will be increased by an amount equal to (a) times (b), where:

- (a) is the remaining amount of the Maximum Lifetime Benefit Amount before the increase; and
- (b) is the percent of increase in the Facility Care Daily Maximum Benefit Amount from the previous year to the current year.

This rider is issued as of the Effective Date of the Policy unless a different date is shown under the Schedule.

IDS Life Insurance Company

William R. Stutzmann

Secretary

Approved, Effective DEC 31 1997

PID FILE # A09772001
 Pennsylvania Insurance Department

By *Richard W. Stoner*

11-5-97

IDS Life Insurance Company
 IDS Tower 10
 Minneapolis, MN 55440

Benefit Increases Option Rider

Based on the application for this Rider and the payment of the premium, this Rider is made a part of this Policy. This rider is subject to all policy terms and provisions unless this Rider changes them.

Compound Increases Option

Your applicable Facility Care and Home and Community Care Daily Maximum Benefit Amounts will increase on each anniversary of the Policy Date. Increases will apply to expenses You incur on or after the date of the increase. The first increase will be equal to 5% of Your original Facility Care and Home and Community care Daily Maximum Benefit Amounts. Each increase thereafter will be equal to 5% of the increased amounts that applied on the date of the prior year's increase.

Your Lifetime Maximum Benefit Amount will also be increased. It will be increased by an amount equal to (a) times (b), where:

- (a) is the remaining amount of the Maximum Lifetime Benefit Amount before the increase; and
- (b) is the percent of increase in the Facility Care Daily Maximum Benefit Amount from the previous year to the current year.

This rider is issued as of the Effective Date of the Policy unless a different date is shown under the Schedule.

IDS Life Insurance Company

William A. Stutzman

Secretary

Approved Effective DEC 31 1997
 PDA A09779001
 Pennsylvania Insurance Department

By *Richard W. Stoner*

11-5-97

IDS Life Insurance Company
 IDS Tower 10
 Minneapolis, Minnesota 55440
 Tele: 612-671-3733

Nonforfeiture Benefit Rider

This rider was issued on the basis of Your application and payment of the required premium. This rider is made a part of the policy. This rider is subject to all terms, exceptions, and provisions of the policy unless changed by this rider. All changes are explained below.

If Your policy terminates due to nonpayment of premiums, it will continue automatically with a Reduced Lifetime Benefit. Your Facility Care Daily Benefit amount, Home and Community Care Daily Maximum Benefit amount, and Elimination Period will not change after the date of lapse. Increases to the Facility Care Daily Benefit amount and the Home and Community Care Daily Maximum Benefit amount as provided under the Benefit Increases Option, if applicable to the policy, will cease to apply.

The amount of Your Reduced Lifetime Benefit will be the total of all policy premiums paid including the premium for this nonforfeiture benefit.

If the policy has been in force for at least 3 years, the Reduced Lifetime Benefit will not be less than thirty (30) times the Facility Care Daily Maximum Benefit amount at the time of lapse.

The Reduced Lifetime Benefit will apply only to benefit amounts paid:

- for Facility Care that occurs after the lapse date, and
- for Home and Community Care You receive after the lapse date.

In no case will the sum of:

1. The expenses incurred for Facility Care while the policy was in force, and the expenses incurred for Facility Care after the lapse date, exceed the Lifetime Maximum Benefit amount as stated in the Schedule in effect at the time of lapse; and
2. The expenses incurred for Home and Community Care You receive for which benefits were paid while the policy was in force, and the expenses incurred for Home and Community Care You receive for which benefits were paid after the lapse date, exceed the Lifetime Maximum Benefit amount as stated in the Schedule in effect at the date of lapse.

This rider is issued as of the policy date of the policy unless a different date is shown here.

IDS Life Insurance Company

William A. Stutzman

Secretary

Approved, Effective DEC 31 1997
 PID # A09779001
 Pennsylvania Insurance Department

By *Richard W. Stoner*

30165A-PA

9/97

IDS Life Insurance Company
 IDS Tower 10
 Minneapolis, Minnesota 55440

11-17-97

Long-Term Care Insurance Policy

This policy is intended to be a tax qualified long-term care insurance contract under Section 7702B(b) of the Internal Revenue Code of 1986 (as amended by the Health Insurance Portability and Accountability Act of 1996 - Public Law 104-191).

Insured: (John Q. Doe) Policy Number: 9100-(1234567)

We at IDS Life Insurance Company are pleased to issue this insurance policy to You. This policy has many important features. We urge You to read it carefully.

- THIS POLICY IS GUARANTEED RENEWABLE FOR LIFE
- WE HAVE A LIMITED RIGHT TO CHANGE PREMIUMS
- THIS POLICY IS NON-PARTICIPATING (Does not pay dividends)

All You have to do to keep this policy in force until benefits have been exhausted is to pay premiums on time. We cannot cancel or refuse to renew this policy. Your premiums will not increase due to a change in Your age or the deterioration of Your mental or physical health. We can, however, change Your premiums based on Your premium class; but only if We change the premiums for all similar policies issued in Your state on the same form as this policy. Premium changes will only be made as of an anniversary of the Policy Date. We must give You at least 31 days written notice before We change Your premiums.

30 DAY RIGHT TO EXAMINE YOUR POLICY

You have 30 days from the day You receive this policy to examine and return it to Us if You decide not to keep it. You do not have to tell Us Your reason for returning the policy. Simply return it to Us or Our representative within 30 days after You receive it. We will refund the full amount of any premium paid; and the policy will be void from the start.

CAUTION ABOUT APPLICATION ANSWERS

The issuance of this policy is based upon Your responses to questions on Your application. A copy of Your application is enclosed. If Your answers are incorrect or untrue, We may have the right to deny benefits or rescind coverage. The best time to clear up any questions is now, before a claim arises! If for any reason, any of Your answers are incorrect, contact Us at Our Home Office. Our address is: IDS Tower 10, Minneapolis, Minnesota 55440.

Signed for and issued by IDS Life Insurance Company in Minneapolis, Minnesota, as of the Policy Date.

President:

Richard W. Kling

Secretary:

William A. Stutzmann

THIS POLICY IS NOT A MEDICARE SUPPLEMENT POLICY: If You are eligible for Medicare, review the Medicare Supplement Buyer's Guide available from Us.

NOTICE TO BUYER: This policy may not cover all the costs associated with long-term care incurred by the buyer during the period of coverage. The buyer is advised to review carefully all policy limitations.

Approved, Effective DEC 31 1997
 PID # A09779001
 Pennsylvania Insurance Department
 By *Richard W. Storer*

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A copy of Your Application	Attached
Any appropriate Riders, Endorsements, Notices and other papers	Attached

Schedule

Insured:	(John Q. Doe)	Policy Number:	9100-(1234,567)
First Premium:	\$(xxx.xx)	Renewal Premium:	\$(xxx.xx)
Premium Mode:	(Annual)	Policy Date:	(June 15, 1997)
Effective Date:	(June 15, 1997)		

FACILITY CARE BENEFIT: Nursing Home Care; Assisted Living Facility Care; Bed Reservation Benefit; Waiver of Premium

HOME AND COMMUNITY CARE BENEFIT: Home Care; Adult Day Care; Respite Care; Equipment Purchases; Caregiver Training; Alternate Plan of Care; Case Management Services

FACILITY CARE BENEFIT

Daily Maximum Benefit Amount: \$(100.00)

HOME AND COMMUNITY CARE BENEFIT

Daily Maximum Benefit Amount:

- \$(100) (100% of Facility Care Daily Maximum)
- \$(75.00) (75% of Facility Care Daily Maximum)
- \$(50.00) (50% of Facility Care Daily Maximum)

LIFETIME MAXIMUM BENEFIT AMOUNT:
 (Lifetime limit for all Facility Care and Home and Community Care Benefits Combined)

- \$(73,000) (730 days x \$100)
- \$(146,000) (1460 days x \$100)
- \$(219,000) (2190 days x \$100)
- \$(Lifetime/Unlimited)

ELIMINATION PERIOD: (20)(90) Days

MONTHLY WAIVER OF PREMIUM FOR FACILITY CARE: Automatically Included

(NONFORFEITURE BENEFIT OPTION):
 (Do You have this Option?) (Yes - see attached rider)

BENEFIT INCREASE OPTION:
 Do You have this Option? (Yes - see attached rider)

Basic Contract Provisions

This section tells You: the documents which state all of the contractual agreements; the importance of completing Your application truthfully; and other basic rights, obligations and features.

The Contract

Entire Contract; Changes: The entire contract between You and Us is as stated in this policy, Your application and any attached papers. No change in this policy will be effective until approved by one of Our officers. That approval must be noted on or attached to this policy. None of Our representatives or other persons may change this policy or waive any of its provisions.

Contesting Coverage

Time Limit on Certain Defenses:

(a) Misstatements in Your Application: During the first 6 months the policy is in force, We may rescind (void) the policy or deny an otherwise valid claim upon a showing of misrepresentation that is material to the acceptance of You for coverage.

While the policy has been in force for at least 6 months but less than 2 years, We may rescind the policy or deny an otherwise valid claim upon a showing of misrepresentation that is material to the acceptance of You for coverage; and pertinent to the conditions for which benefits are sought.

After the policy has been in force for 2 years it will not be contestable upon the grounds of misrepresentation alone; and may be contested only upon a showing that You knowingly and intentionally misrepresented relevant facts relating to Your health. If We pay any benefits under the policy, the benefit payments will not be recovered by Us in the event the policy is rescinded.

(b) Pre-existing Conditions: Except as provided for misstatements in Your application, We will not reduce or deny any claim under this policy because a sickness or physical or medical condition had existed before the policy date.

Other Provisions

Misstatement of Age: Your age may have been misstated in Your application. In that case, We will pay the benefits that the premiums You have paid would have purchased at Your true age.

Conformity with State Statutes: If this policy does not comply with the laws of the state in which You reside on the Effective Date, We will treat it as if it had been changed to comply with those laws.

Time Periods: All time periods begin and end at 12:01 a.m. Standard Time at Your residence.

Non-Participating; Dividends Not Payable: This policy does not participate in Our profits or surplus earnings; and no dividends will be paid at any time.

Conformity with Internal Revenue Code: It is intended that the policy be a tax qualified long-term care insurance contract under Section 7702B(b) of the Internal Revenue Code of 1986 (as amended by the Health Insurance Portability and Accountability Act of 1996 - Public Law 104-191).

Glossary Of Important Terms

This section gives the meaning of special words and phrases used in the policy.

Activities of Daily Living (ADLs)

The following six (6) basic functions are the Activities of Daily Living:

- Bathing:** Your ability to wash Yourself in the tub, shower, or by sponge bath.
- Continence:** Your ability to maintain control of bowel and bladder function; or when unable to maintain control of bowel or bladder function, the ability to perform associated personal hygiene, including care for catheter or colostomy bag.
- Dressing:** Your ability to put on and take off all clothing and any necessary braces, fasteners or artificial limbs.
- Eating:** Your ability to get nourishment into Your body by any means once it has been prepared and made available to You.
- Toileting:** Your ability to go to and from the toilet, getting on and off the toilet, and performing associated personal hygiene.
- Transferring:** Your ability to move in or out of a chair, bed, or wheelchair.

Adult Day Care Center

An organization which provides a program of adult day care and:

- Is state licensed, if the state in which it is located licenses adult day care facilities;
- Operates at least 5 days a week for a minimum of 6 hours and is not an overnight facility;
- Maintains a written record for each client which includes a Plan of Care and a record of all services provided;
- Has established procedures for obtaining appropriate aid in the event of medical emergency;
- Has formal arrangements for providing services of: a dietician; a licensed physical therapist; a licensed speech therapist; and a licensed occupational therapist; and
- Its staff includes: a full time director and one or more Nurses in attendance during operating hours for at least 4 hours a day.

Assisted Living Facility

A facility* that is engaged primarily in providing ongoing care and related services to 8 (eight) inpatients in one location and meets all of the following criteria:

- It provides 24 hour a day care and services sufficient to support needs resulting from inability to perform Activities of Daily Living or Severe Cognitive Impairment; and
- Has an awake, trained and ready to respond employee on duty at all times to provide that care; and
- Provides 3 meals a day and accommodates special dietary needs; and
- Is licensed by the appropriate licensing agency (if any) to provide such care; and
- Has formal arrangements for the services of a Doctor or Nurse to furnish medical care in case of emergency; and
- Has appropriate methods and procedures for handling and administering drugs and biologicals.

An Assisted Living Facility is NOT: a hospital or clinic; a place which operates primarily for the treatment of alcoholism, drug addiction or mental illness; a Nursing Home; Your primary place of residence in an area used principally for independent residential living; or a similar establishment.

* If a facility has multiple licenses or purposes, a portion, ward, wing or unit thereof will qualify as an Assisted Living Facility only if it is engaged principally in providing, to inpatients, not only room and board, but also care and services which meets all of the above criteria.

Case Management Services

Assistance in developing and implementing a plan to meet Your long-term care needs. This includes, but is not limited to:

- a comprehensive evaluation which may include a personal interview, identification of the services You use, and identification of the availability of care;
- care planning to identify problem areas and determine the optimal level of service to meet Your needs;
- assistance from a care coordinator who works with You, Your Doctor, and primary unpaid caregivers to suggest possible solutions using a variety of formal and informal support services and available financial support;
- develop, implement and coordinate a Plan of Care as appropriate; assist in the selection of providers and explain the needs and expectations; and make arrangements to initiate the services;
- ongoing care monitoring that includes: monitoring the delivery of the long-term care services; and periodic reevaluations and revisions of the Plan of Care as warranted.

Chore Services

Assistance a person provides to You with light work or household tasks You would normally perform (but can no longer do because of Your need for assistance) that are necessary to or consistent with Your ability to remain safely in Your home. This may include such activities as: simple household repairs; taking out the garbage; and related tasks that do not require the services of a trained aide or attendant.

Custodial Care

Care which can be performed by persons without professional medical training and which is primarily for the purpose of meeting the personal needs of the patient, including feeding and personal hygiene.

Daily Maximum Benefit Amount

The Daily Maximum Benefit Amount is the greatest amount We will pay for all expenses You incur on any one day that are covered by the benefits of the policy. The Daily Maximum Benefit Amount is stated in the Schedule. If the Schedule states that You have a Benefit Increases Option, the Benefit Increases Option provision of the Schedule explains how this amount will increase over time.

Elimination Period

The Elimination Period is the number of days of service needed to qualify for benefits. It begins on the first day on which You incur an expense for which benefits would have been paid if there were no Elimination Period. It ends with the expiration of the number of days shown in the Schedule as the Elimination Period. Only days on which you incur expenses for which benefits would have been paid if there were no Elimination Period can be used to satisfy the Elimination Period. The days do not need to be consecutive days of care, but must be satisfied within 60 days if Your Elimination Period is 20 days; or, must be satisfied within 270 days if Your Elimination Period is 90 days. Benefits are not payable for any expenses incurred during the Elimination Period. Only one Elimination Period must be met during the lifetime of the policy.

Doctor

Someone, other than a Nurse, who is legally qualified and licensed to practice medicine and is operating within the scope of that license. The term "Doctor" does NOT include: You or a member of Your immediate family; anyone who normally resides in Your home or residence; or anyone who has an ownership interest in, or is an employee of, any facility in which You stay.

Home Health Aide and Personal Attendant Services

Assistance a person provides to You with: simple health care tasks; personal hygiene; performing Activities of Daily Living; managing medications; and other related supportive services.

Homemaker Services

Assistance a person provides to You with activities necessary to or consistent with Your needs to manage and maintain a household when You are no longer capable of managing those activities and an informal caregiver is not available. This may include such activities as: preparing meals; doing laundry; and doing incidental household tasks.

Immediate Family

Your spouse and the following relatives of You and Your spouse: Parents; grandparents; brothers; sisters; children and grandchildren.

Intermediate Nursing Care

Basic care including physical, emotional, social and other restorative services under periodic medical supervision. This nursing care requires the skill of the registered nurse in administration, including observation and recording of reactions and symptoms, and supervision of nursing care.

Licensed Health Care Practitioner

Any of the following who is not a member of the Immediate Family:

- a physician (as defined in section 1861(r)(1) of the Social Security Act);
- a registered professional nurse;
- a licensed social worker; or
- any other individual who meets such requirements as may be prescribed by the Secretary of the Treasury.

Licensed Therapist

A licensed physical, occupational or speech therapist who is operating within the scope of his or her license.

Lifetime Maximum Benefit Amount

The Lifetime Maximum Benefit amount is shown in the Schedule. It is the maximum benefit dollar amount that will be paid for all policy benefits. If the Schedule states that you have a Benefit Increase Option, the Benefit Increase Option provision of the Schedule explains how this amount will increase over time.

Nurse

Someone who is licensed as: a Registered Graduate Nurse (RN); or a Licensed Practical Nurse (LPN); or a Licensed Vocational Nurse (LVN). The term "Nurse" does NOT include: You; a member of Your immediate family; or anyone who normally resides in Your home or residence.

Nursing Home

A facility* or distinctly separate part of a hospital or other institution which is licensed by the appropriate licensing agency to engage primarily in providing nursing care and related services to inpatients and:

- Provides 24 hour a day nursing service under a planned program of policies and procedures which was developed with the advice of, and is periodically reviewed and executed by, a professional group of at least one Doctor and one Nurse; and
- Has a Doctor available to furnish medical care in case of emergency; and
- Has at least one Nurse who is employed there full time (or at least 24 hours per week if the facility has less than 10 beds); and
- Has a Nurse on duty or on call at all times; and
- Maintains clinical records for all patients; and
- Has appropriate methods and procedures for handling and administering drugs and biologicals.

A Nursing Home is not: a hospital or clinic, a place which operates primarily for the treatment of alcoholism, drug addiction or mental illness, an Assisted Living Facility, Your primary place of residence in an area used principally for independent residential living, or a similar establishment.

* If an institution has multiple licenses or purposes, a portion, ward, wing or unit thereof will qualify as a Nursing Home only if it meets all of the above criteria, is authorized by license to provide nursing care to inpatients, and is engaged principally in providing such nursing care in accordance with that license.

Plan of Care

Plan of Care means a written document prepared and signed by a Licensed Health Care Practitioner specifying the long-term care service, type of care, treatment or procedure that is consistent with an assessment of Your ability to perform Activities of Daily Living or to perform basic cognitive functions appropriately.

Policy Date

Your Policy Date is shown in the Schedule. It is the date used to determine policy anniversaries, policy years, and premium due dates.

Qualified Long-Term Care Services

Qualified Long-Term Care Services are the necessary diagnostic, preventative, therapeutic, curing, treating, mitigating, and rehabilitative services and maintenance or personal care services which (a) are required by a chronically ill individual, and (b) are provided pursuant to a plan of care prescribed by a licensed health care practitioner.

Respite Care

Short-term care provided to You in an institution, Your home or at a community based program, in order to relieve Your primary caregiver in Your home. Examples of Respite Care Facilities are: community-based residential facilities; assisted living facilities; rest homes; custodial care facilities; personal care facilities; and alternate long-term care facilities.

Severe Cognitive Impairment

Deterioration or loss in Your intellectual capacity as measured by clinical evidence and standardized tests that reliably measure Your impairment in the areas of:

- Your short or long-term memory;
- Your orientation as to person (such as who You and others are), place (such as Your location) and time (such as day, date and year); and
- Your deductive or abstract reasoning.

Coverage is provided for Alzheimer's Disease and similar forms of senility and irreversible dementia that result in Severe Cognitive Impairment.

Skilled Nursing Care

Skilled care which requires the technical expertise of professional personnel such as a registered or a licensed practical nurse and is provided either directly by or under the supervision of these personnel in a Nursing Home, Assisted Living Facility, Your home, or community based program.

Substantial Assistance

The hands-on or standby assistance of another person without which You would be unable to perform an Activity of Daily Living.

Hands-on assistance is the physical assistance of another person without which You would be unable to perform an Activity of Daily Living. Standby assistance is the presence of another person within arm's reach that is necessary to prevent, by physical intervention, injury to You while performing an Activity of Daily Living.

Substantial Supervision

Continual supervision (which may include verbal cueing, gestures, or other demonstrations) by another person that is necessary to protect You, as a severely cognitively impaired individual, from threats to Your health or safety (such as may result from wandering).

We, Us, Our

IDS Life Insurance Company, A Stock Company.

You, Your

The Insured named in the Schedule.

Exclusions and Limitations

This section states the conditions under which payment will not be paid even if You otherwise qualify for benefits.

What's Not Covered

The policy will not pay benefits for any expenses incurred for anything:

- Provided by a member of Your Immediate Family; unless
 - the Immediate Family member is a regular employee of the organization that is providing the services; and
 - the organization receives the payment for the services; and
 - the Immediate Family member receives no compensation other than the normal compensation for employees in his or her job category.
- For which no charge is made in the absence of insurance.
- Provided outside of the United States of America or its possessions.
- Provided in a Veteran's Administration or federal government facility; unless You or Your estate are charged for the services or confinement.
- That results from war or act of war, whether declared or not.
- That results from an attempt at suicide or an intentionally self-inflicted injury.
- That results from alcoholism or addiction to drugs or narcotics; but not addiction which results from the administration of those substances in accordance with the advice and written instruction of a Doctor.

Non-Duplication

The policy will pay benefits only for covered expenses You incur that are in excess of the amount paid or payable under Medicare (including amounts that would be reimburseable but for the application of an elimination or coinsurance amount) and any other federal, state or other governmental health care plan or law (except Medicaid).

As used above, "Medicare" means the Health Insurance for the Aged Act, Title XVIII of the Social Security Amendments of 1965 as then constituted or later amended.

Facility Care Benefit Provisions

This section describes the benefits payable under the policy for the Facility Care benefits of Nursing Home or Assisted Living Facilities.

LIMITATIONS OR CONDITIONS ON ELIGIBILITY FOR BENEFITS

Policy in Force

The policy must be in force when the Nursing Home or Assisted Living Facility stay starts.

Conditions

Benefits will be paid for expenses You incur after Your Elimination Period has been satisfied and while the policy is in force. Benefits are not payable for any day used to satisfy the Elimination Period. The Elimination Period is shown in the Schedule and is described in the Definitions section of this policy. Benefit payments are subject to the Facility Care Daily Maximum Benefit, the Lifetime Maximum Benefit, and all other provisions of the policy.

Confined in a Nursing Home or Assisted Living Facility

Your Nursing Home and Assisted Living Facility stay must be Necessary and You must be confined in the Nursing Home or an Assisted Living Facility as an overnight resident inpatient and a room and board or subsistence charge is made for each day.

Stay is Necessary

We consider Your Nursing Home or Assisted Living Facility stay to be necessary if We are given proof, in the form of a certification at least annually, and a written Plan of Care prepared and signed by a Licensed Health Care Practitioner that Your stay is appropriate because You are a chronically ill individual. You are a chronically ill individual when You have been certified by Licensed Health Care Practitioner, within the preceding 12-month period, as either:

- (a) - Being unable to perform without substantial assistance from another individual, 3 or more Activities of Daily Living for a period of at least 90 days due to a loss of functional capacity; or
- (b) - Requiring substantial supervision to protect You from threats to health and safety due to Severe Cognitive Impairment; or
- (c) - Having a level of disability similar (as determined under regulations prescribed by the Secretary of the Treasury in consultation with the Secretary of Health and Human Services) to the level of disability described in clause (a).

All Levels of Care Covered

Benefit payments will not change based on the level of care You receive during a Nursing Home or Assisted Living Facility stay, whether skilled, intermediate or custodial.

How Much We Pay

We will pay the expenses You incur, up to the Facility Care Daily Maximum Benefit amount for each day of confinement in a Nursing Home or Assisted Living Facility after the Elimination Period. The Schedule shows the Facility Care Daily Maximum Benefit amount. It may be changed, over time, by a Benefit Increase Option, if applicable.

The benefit amounts We pay for reimbursement of expenses for Nursing Home or Assisted Living Facility stays will be deducted from the Lifetime Maximum Benefit amount.

How Long Benefits Will Be Paid

The Facility Care Benefit will be paid for as long as: You qualify for benefits; the policy remains in force; and the Lifetime Maximum Benefit amount has not been reached, or an extension of benefits has been granted.

Bed Reservation Feature

If You become hospitalized during a Nursing Home or Assisted Living Facility stay and You are charged to reserve Your accommodations in the Nursing Home or Assisted Living Facility, We will:

- pay the same benefits; and

- give the same Elimination Period credit;

that You would have received if You had stayed in the Nursing Home or Assisted Living Facility instead of a hospital. We will do this for a total of 21 days of hospitalization (continuous or not) each policy year.

The benefits paid for reserving Your accommodations in the Nursing Home or Assisted Living Facility will be deducted from the Lifetime Maximum Benefit Amount.

Home And Community Care Benefit Provisions

This section describes the coverage available for Home and Community Care.

LIMITATIONS OR CONDITIONS ON ELIGIBILITY FOR BENEFITS

Policy in Force

The policy must be in force when You receive the Covered Care.

Conditions

Benefits will be paid for expenses You incur after Your Elimination Period has been satisfied and while the policy is in force. Benefits are not payable for any day used to satisfy the Elimination Period. The Elimination Period is shown in the Schedule and is described in the Definitions section of this policy. Benefit payments are subject to the Home and Community Care Daily Maximum Benefit, the Lifetime Maximum Benefit Amount, and all other provisions of the policy. Benefits will not be paid for services received while hospitalized.

Covered Care

Covered Care is any of the following:

100% of the expenses You incur for:

- Home health care services provided by a Nurse;
- Home health care services provided by a Licensed Therapist;
- Home Health Aide and Personal Care Attendant Services; and
- Day care services You receive at an Adult Day Care Center.

80% of the expenses You incur for:

- Homemaker Services; or
- Chore Services.

when the care is necessary because of Your:

- (a) - Being unable to perform, without substantial assistance from another individual, 3 or more Activities of Daily Living for a period of at least 90 days due to a loss of functional capacity; or
- (b) - Requiring substantial supervision to protect You from threats to health and safety due to Severe Cognitive Impairment; or
- (c) - Having a level of disability similar (as determined under regulations prescribed by the Secretary of the Treasury in consultation with the Secretary of Health and Human Services) to the level of disability described in clause (a).

Determining When Care is Necessary

We consider care to be necessary if We are given proof, in the form of a certification at least annually, and a written Plan of Care prepared and signed by a Licensed Health Care Practitioner that Your stay is appropriate because You are a chronically ill individual. You are a chronically ill individual when You have been certified by a Licensed Health Care Practitioner, within the preceding 12-month period, that You meet the requirements of (a), (b), or (c) above.

How Much We Pay

We will pay the Covered Care expenses You incur, up to the Home and Community Care Daily Maximum Benefit amount after the Elimination Period. The Schedule shows the Home and Community Care Daily Maximum Benefit amount. It may be changed, over time, by a Benefit Increase Option, if applicable.

The benefit amounts We pay for reimbursement of Covered Care expenses will be deducted from the Lifetime Maximum Benefit amount.

How Long Will Benefits Be Paid

Benefit payments will be paid for as long as: You qualify for benefits; the policy remains in force; and the Lifetime Maximum Benefit Amount has not been reached, or an extension of benefits has been granted.

ADDITIONAL COMMUNITY CARE BENEFIT PROVISIONS
 (Respite Care; Equipment Purchases; Caregiver Training; Case Management Services; Alternate Plan of Care)

LIMITATIONS OR CONDITIONS ON ELIGIBILITY FOR BENEFITS

Covered Community Care

Covered Community Care is Covered Respite Care, Covered Equipment Purchases, Caregiver Training (as defined below), Case Management Services, and an Alternate Plan of Care when the care is necessary because of Your:

- (a) Being unable to perform without substantial assistance from another individual, 3 or more Activities of Daily Living for a period of at least 90 days due to a loss of functional capacity; or
- (b) Requiring substantial supervision to protect You from threats to health and safety due to Severe Cognitive Impairment; or
- (c) Having a level of disability similar (as determined under regulations prescribed by the Secretary of the Treasury in consultation with the Secretary of Health and Human Services) to the level of disability described in clause (a).

Determining When Care is Necessary

We consider care to be necessary if We are given proof, in the form of a certification at least annually, and a written Plan of Care prepared and signed by a Licensed Health Care Practitioner that Your receipt of care is appropriate because You are a chronically ill individual. You are a chronically ill individual when You have been certified by a Licensed Health Care Practitioner, within the preceding 12-month period, that You meet the requirements of (a), (b), or (c) above.

How Long Benefits Will Be Paid

Benefit payments will be paid for as long as: You qualify for benefits; the policy remains in force; and the Lifetime Maximum Benefit Amount has not been reached, or an extension of benefits has been granted. Benefit payments are deducted from the Lifetime Maximum Benefit Amount unless stated otherwise by the provision.

Covered Respite Care

We will pay the expenses You incur, up to the Facility Care Daily Maximum, for Covered Respite Care that is provided to You in an institution, Your home or at a community based program in order to relieve Your primary caregiver in Your home.

Limitations on Benefit Payments: Covered Respite Care is limited to the actual expenses You incur, up to the Facility Care Daily Maximum, for the first 14 days of Respite Care per policy year. Respite Care is not subject to the Elimination Period, and may not be used to satisfy Your Elimination Period. Benefit payments are deducted from the Lifetime Maximum Benefit Amount.

Covered Equipment Purchases

We will pay the expenses You incur, up to fifty (50) times the Home and Community Care Daily Maximum, for Covered Equipment Purchases. Covered Equipment Purchases are the purchases of medically appropriate equipment that are made while the policy is in force and are:

- Intended to assist You in living at home or in other residential housing by relieving Your need for direct, physical assistance; and
- Expected to enable You to remain at home for at least 90 days after the purchase date; and
- Specified and provided in accordance with Your Plan of Care.

Covered Equipment Purchases will NOT include:

- Any equipment that will, other than incidentally, increase the value of the residence in which it is installed; or
- Artificial limbs, teeth or equipment that is placed in Your body, temporarily or permanently.

Examples of Eligible Equipment: Based on Your situation, the eligible equipment may include such items as:

- Pumps and other devices for intravenous injection;
- Grab bars to assist in toileting;
- Special hospital style beds; crutches; or wheelchairs;
- Interior and exterior ramps to permit movement from one level of the residence to another; or
- Other mechanical aids.

Limitations on Benefit Payments: The lifetime maximum total amount We will pay for expenses incurred under the Equipment Purchase Benefit is an amount equal to fifty (50) times the Home and Community Care Daily Maximum Benefit amount. Equipment purchases must be pre-approved by Us. Benefits paid for the Equipment Purchase Benefit are deducted from the Lifetime Maximum Benefit Amount. The Equipment Purchase Benefit is not subject to the Elimination Period, and may not be used to satisfy Your Elimination Period.

Caregiver Training Benefit

We will pay the expenses You incur, up to a lifetime maximum of five (5) times the Home and Community Care Daily Maximum Benefit, for the training of an informal caregiver to care for You in Your home. All of the following conditions apply to the payment of this benefit:

- We will not pay for training provided to someone who will be paid to care for You; and
- The training cannot be received while You are confined in a hospital, a Nursing Home, or an Assisted Living Facility, unless it is reasonably expected that the training will make it possible for You to return to Your home where You can be cared for by the person receiving the training.

Expenses covered by this benefit are not subject to the Elimination Period and may not be used to satisfy Your Elimination Period.

Limitations on Benefit Payments: The lifetime maximum total amount We will pay under this Caregiver Training Benefit is an amount equal to five (5) times Your Home and Community Care Daily Maximum Benefit. Payment under this Caregiver Training Benefit will not count against Your Facility Daily Maximum Benefit or Your Home and Community Care Daily Maximum Benefit for any day. Benefits paid for this Caregiver Training Benefit are deducted from the Lifetime Maximum Benefit Amount.

Alternate Plan of Care

We will pay the expenses You incur for care, treatment, services, supplies or other items You receive in accordance with an Alternate Plan of Care.

An Alternate Plan of Care must clearly specify the benefits to be payable, and is mutually agreeable to You, Your Doctor, and Us as a cost effective alternative to benefits otherwise covered by this policy. Benefits are not payable for any expenses incurred prior to the date of mutual agreement. Agreement to participate in an Alternate Plan of Care will not waive any of the rights You or We have under the policy.

Examples of an Alternate Plan of Care: An Alternate Plan of Care may indicate the use of providers, facilities, or supports not otherwise covered by the policy. Examples include, but are not limited to:

- In-home safety devices.
- Home delivered meals.
- Stays in other types of facilities.
- Additional Equipment Benefits.

Limitations of the Alternate Plan of Care: We will pay the expenses You incur up to the Facility Care Daily Maximum Benefit. Benefits are paid after the Elimination Period has been satisfied and are deducted from the Lifetime Maximum Benefit Amount.

Case Management Services

You have the option of selecting Case Management Services to assist You in developing and implementing a Plan of Care. You also have the option to reject recommendations provided.

We will pay the expenses You incur for Case Management Services which are provided by a Case Manager, chosen by You.

A Case Manager's initial assessment fee is subject to a maximum charge of five (5) times the Facility Care Daily Maximum Benefit. This amount will not be deducted from the Lifetime Maximum Benefit amount. A Case Manager's initial assessment fee in excess of five (5) times the Facility Care Daily Maximum Benefit amount will be deducted from the Lifetime Maximum Benefit amount.

Other fees charged for Case Management Services are subject to a maximum of two (2) times the Facility Care Daily Maximum Benefit amount per use. This amount will not be deducted from the Lifetime Maximum Benefit amount. Fees in excess of two (2) times the Facility Care Daily Maximum Benefit amount are deducted from the Lifetime Maximum Benefit amount.

The Case Management Services benefit is not subject to the Home and Community Care Daily Maximum benefit.

Expenses covered by this benefit are not subject to the Elimination Period and may not be used to satisfy Your Elimination Period.

Claims Information

This section tells You when to notify Us of a claim; what to send Us; how We pay claims; and other rights and responsibilities under the contract.

Telling Us About a Claim

Early awareness by Our Claims Department will facilitate a timely review of Your claim. You can help Us in this process by letting Us know immediately when You first become disabled to the extent that You may soon need care covered by the policy. Of course someone else who is authorized to act on Your behalf can also contact Us for You.

Notice of Claim: We must be told when You have a claim for benefits. The notice can be given to Us at Our Home Office or to Our representative. It must be received within 30 days of the date the covered loss starts, or as soon as reasonably possible. Include in the notice at least: Your name; Your policy number; and an address to which the claim form should be sent.

How to File a Claim

Claim Forms: When We get notice of Your claim We will send out a claim form to be used to file proof of loss.

The claim form has instructions on how to fill it out and where to send it. Please read the form carefully. Answer all questions and send all required information to the address on the form. This will assist Us in the evaluation of Your claim so that We can determine the benefits for which you are eligible.

If You or Your representative do not get the claim form within 15 days, proof of loss can be filed without it by sending Us a letter which describes the occurrence, the character and the extent of the loss for which claim is made. That letter must be sent to Us at Our Home Office within the time period stated in the next paragraph. As a minimum, the description should tell Us such things as: Your name and address; the care for which You are claiming benefits; the names and addresses of the medical professionals and care providers who are aware of Your condition or have provided care covered by the policy; the periods for which You are claiming benefits; and copies of Your expense statements for covered items.

When to File a Claim

Proofs of Loss: We must get written proof of loss within 120 days after the end of each month for which benefits may be payable. If it was not reasonably possible to give Us written proof in the time required, We shall not reduce or deny a claim for being late if the proof is filed as soon as reasonably possible. Unless the claimant is not legally capable, the required proof must always be given to Us no later than 1 year from the time specified.

Our Evaluation Criteria and Claims Payment Process

How We Determine When Proof of Loss is Satisfactory: We must be furnished a written Plan of Care, prepared and certified by a licensed health care practitioner acting within the scope of his/her license and prescribing treatment accepted by the general medical community. We will also need a copy of Your Medicare Explanation of Benefits (or similar form for other plans and programs subject to the Non-Duplication provision to determine which expenses (if any) are excluded from coverage.

Physical Examinations: As part of Our evaluation of Your claim, We have the right to require a medical examination when a claim is made and at reasonable intervals while You are claiming continued benefits. If an examination is required, You will not have to pay for it.

Time of Payment of Claim: After We receive the proper written proof of loss, We will pay any benefits then due immediately; and at the end of each 30 days thereafter, when the loss is expected to result in on-going benefits.

Payment of Claims: All benefits will be paid to You. Any benefits unpaid at Your death will be paid to Your beneficiary. If no beneficiary is designated and benefits are payable to Your estate, We may pay benefits up to \$1,000 to someone related to You by blood or marriage who is deemed by Us to be justly entitled to the benefits. We will be discharged to the extent of any such payment made in good faith.

How to Appeal A Claim

Claim Denial: You will be informed by Us in writing if a claim, or any part of a claim, is denied. We will make available to You all information directly relating to the claim denial within 60 days of the date of Your written request, unless such disclosure is prohibited under state or federal law.

Appeal Process: If You believe that Our claim decision is in error, We will reconsider Your claim. You must send Us a brief note (no special form needed) that tells Us why You feel We should change Our decision. You may authorize someone else to act for You in this appeal process.

The note should include the names, addresses and phone numbers of any of the following providers who You think We should contact to learn more about Your health and the care You received: the Doctors and other health care professionals who treated You; and the facilities from which You received care or treatment.

Once We complete Our review of Your claim, We will act promptly on Your request and give You an answer within 30 days after We receive Your appeal; and pay any benefits then due as a result of Our reconsideration.

Legal Actions: You cannot sue on Your claim before 60 days after written proof of loss has been given as required by this policy. You cannot sue after 3 years from the time written proof of loss is required to be given.

Effective Date And Premium Payment Provisions

This section tells You such things as: when the policy becomes effective; how and when to pay premiums; the importance of paying premiums on time; and what happens if premiums are not paid on time.

The Policy Taking Effect

Effective Date and Consideration: This policy is issued based on: the statements made in Your application; and, payment of the First Premium shown in the Schedule. It takes effect on the Effective Date shown in the Schedule; provided the First Premium is paid.

Your Right to Cancel the Policy at Any Time

You may cancel Your policy at any time by sending Us written notice. Your policy will be canceled as of the date We receive the notice, or the later date stated in Your notice. We will promptly return the unearned portion of any premium paid. The cancellation will not prejudice any claim for any uninterrupted institutional confinement that begins before the effective date of the cancellation.

Refund of Premium Paid Beyond Your Death

If You die while insured under this policy, We will refund the pro rata portion of any premium paid for a period after Your death. The refund will be made within 30 days of Our receipt of written notice of Your death and will be payable to Your estate.

Paying Premiums

The Premium Mode shown in the Schedule states how often premiums are to be paid. Your first premium is due as of the Policy Date as shown in the Schedule. Each premium after the first is due at the end of the period for which the prior premium was paid.

Monthly Waiver of Premium During Covered Confinements

We will waive premium payments on a month-to-month basis during extended Nursing Home and Assisted Living Facility stays. The waiver begins after You have been confined in a Nursing Home or Assisted Living Facility for 90 days during which You are satisfying Your Elimination Period or receiving policy benefits for the confinement. The 90 days does not have to be consecutive days, but must be satisfied within 180 days. We will then:

- refund the pro rata premium paid for monthly periods beyond that for which the waiver begins; and
- waive the payment of premium for each coverage month which begins while You continue to receive uninterrupted Nursing Home or Assisted Living Facility Benefits.

This waiver of premium payment stops when You cease to receive Nursing Home or Assisted Living Facility Benefits. At the end of the period for which the last premium has been waived, You will be required to pay the pro rata premium needed to return the policy to its previous premium payment mode. You must pay future premiums as they become due.

What Happens When Premiums are Not Paid

Grace Period: This policy has a 31 day grace period. If a premium is not paid on or before the date it is due, it may be paid during the following 31 days. The policy will stay in force during the grace period. If the premium is not paid during the grace period, the policy will terminate at the end of the grace period. This is called a lapse. Lapse will not affect any continuing claim that begins before the policy terminates.

Extension of Benefits: Termination of this policy will not affect any claim for uninterrupted institutional confinement that begins while the policy is in force and continues beyond the date of termination. This extension of benefits, beyond the period the policy was in force, will terminate when the Lifetime Maximum Benefit Amount that applies on the date of termination is reached, and is subject to the Elimination Period and all other applicable provisions of the policy. For the purposes of this provision, an uninterrupted institutional confinement will include: being transferred to another Nursing Home or Assisted Living Facility; receiving another level of care in the same facility; and transferring back to a Nursing Home or Assisted Living Facility from a temporary or acute hospitalization.

Reinstatement: Once this policy lapses, We may or may not put it back in force (reinstatement) at Our option. An acceptance of late premium by Us (or by Our representative, if authorized to accept payment) without requiring an application for reinstatement will reinstate this policy.

If We or Our representative require an application, You will be given a conditional receipt for the premium. If the application is approved, this policy will be reinstated as of the approval date. If We do not give You prior written notice of Our disapproval, the policy will be reinstated on the 45th day after the date of the conditional receipt.

The reinstated policy will cover only losses that begin after the date of reinstatement. In all other respects Your rights and Our rights will remain the same; subject to any provisions noted on or attached to the reinstated policy.

Any premiums We accept for a reinstatement will be applied to a period which begins on the date of reinstatement.

Unpaid Premiums: When a claim is paid, any premium due and unpaid will be deducted from the claim payment.

Protection Against Unintentional Lapse: You have the option to direct us to notify someone else when the 31 day grace period has expired and Your policy is about to terminate because premiums have not been paid on time. We will then give the person You name an additional 31 days during which premiums may be paid before the policy will terminate because the premium has not been paid. You may change the designation at any time.

Continuation for Alzheimer's Disease and Other Forms of Cognitive or Functional Impairment: If Your policy lapses because premiums have not been paid by the end of the grace period and before Your benefits have been exhausted, We will provide a continuation of coverage. To be eligible for this continuation You must provide us with proof that beginning on or before the date of lapse and continuing without interruption, You:

- (a) Are unable to perform, without substantial assistance from another individual, 3 or more Activities of Daily Living for a period of at least 90 days due to a loss of functional capacity; or
- (b) Require substantial supervision to protect You from threats to health and safety due to Severe Cognitive Impairment; or
- (c) Have a level of disability similar (as determined under regulations prescribed by the Secretary of the Treasury in consultation with the Secretary of Health and Human Services) to the level of disability described in clause (a).

The proof, in the form of a certification by a Licensed Health Care Practitioner, must specify that the above requirements have been met and must be provided to Us:

- within 5 months of the lapse date, when You are eligible for continuation because You have been functionally impaired; and
- within 9 months of the lapse date, when You are eligible for continuation because You have been cognitively impaired.

You must pay all past-due premiums for the policy and all riders that were in force immediately prior to the date of lapse.

This continuation will then provide uninterrupted coverage to the same extent that the policy and all riders in force immediately prior to the termination date would have provided if they had not terminated. If You become eligible for benefits during the continuation period, they will be payable; subject to any applicable elimination periods, maximum payment periods and all other provisions of the policy and its riders.

Long-Term Care Insurance Policy

- **THIS POLICY IS GUARANTEED RENEWABLE FOR LIFE.**
- **WE HAVE A LIMITED RIGHT TO CHANGE PREMIUMS.**
- **THIS POLICY IS NON-PARTICIPATING (Does not pay dividends).**

**IDS Life Insurance Company
IDS Tower 10
Minneapolis, Minnesota 55440**

A+H - Pennsylvania 2/22/2000

Form # 32100-PA

IDS Life Insurance Company
IDS Tower 10
Minneapolis, Minnesota 55440

Long-Term Care Insurance Endorsement

This Endorsement is made a part of the Policy to which it is attached. It changes terms of the Policy.

I. The "Stay is Necessary" provision of the "Facility Care Benefit Provisions" section of the policy is amended to read:

Stay is Necessary

We consider Your Nursing Home or Assisted Living Facility stay to be necessary if We are given proof, in the form of a certification at least annually, and a written Plan of Care prepared and signed by a Licensed Health Care Practitioner that Your stay is appropriate because You are a chronically ill individual. You are a chronically ill individual when You have been certified by a Licensed Health Care Practitioner, within the preceding 12-month period, as either:

- (a) - Being unable to perform without substantial assistance from another individual, 2 or more Activities of Daily Living for a period of at least 90 days due to a loss of functional capacity; or
- (b) - Requiring substantial supervision to protect You from threats to health and safety due to Severe Cognitive Impairment; or
- (c) - Having a level of disability similar (as determined under regulations prescribed by the Secretary of the Treasury in Consultation with the Secretary of Health and Human Services) to the level of disability described in clause (a)

II. The "Covered Care" provision of the "Home and Community Care Benefit Provisions" section of the policy is amended to read:

Covered Care

Covered Care is any of the following:

100% of the expenses You incur for:

- Home health care services provided by a Nurse;
- Home health care services provided by a Licensed Therapist;
- Home Health Aide and Personal Care Attendant Services; and
- Day care services You receive at an Adult Day Care Center.

80% of the expenses You incur for:

- Homemaker Services; or
- Chore Services.

when the care is necessary because of Your:

- (a) - Being unable to perform, without substantial assistance from another individual, 2 or more Activities of Daily Living for a period of at least 90 days due to a loss of functional capacity; or
- (b) - Requiring substantial supervision to protect You from threats to health and safety due to Severe Cognitive Impairment; or
- (c) - Having a level of disability similar (as determined under regulations prescribed by the Secretary of the Treasury in consultation with the Secretary of Health and Human Services) to the level of disability described in clause (a).

ENDORSEMENT TO LTC POL. # 30160-A-PA

IDS LIFE. PID # A379522001

Approved, Effective MAR 2, 2000
PID # A379522001
Pennsylvania Insurance Department
Richard W. Steiner

Form # 32100-PA
10/10/99

III. The "Covered Community Care" provision of the "ADDITIONAL COMMUNITY CARE BENEFIT PROVISIONS" section of the policy is amended to read:

Covered Community Care

Covered Community Care is Covered Respite Care, Covered Equipment Purchases, Caregiver Training (as defined below), Case Management Services, and an Alternate Plan of Care when the care is necessary because of Your:

- (a) - Being unable to perform without substantial assistance from another individual, 2 or more Activities of Daily Living for a period of at least 90 days due to a loss of functional capacity; or
- (b) - Requiring substantial supervision to protect You from threats to health and safety due to Severe Cognitive Impairment; or
- (c) - Having a level of disability similar (as determined under regulations prescribed by the Secretary of the Treasury in consultation with the Secretary of Health and Human Services) to the level of disability described in clause (a).

IV. A Provision entitled "Monthly Reimbursement of Premium During Covered Home and Community Care" is added to the section of the Policy "Effective Date and Premium Payment Provisions" and reads:

Monthly Reimbursement of Premium During Covered Home and Community Care

We will reimburse premium payments on a calendar month basis during extended periods of Home and Community Care. You must continue to pay premiums as they become due.

The reimbursement begins after You have incurred an eligible expense for covered Home and Community Care, excluding Homemaker and Chore Services, for 90 days during which You are satisfying Your Elimination Period or are receiving Policy benefits for Home and Community Care. The 90 days does not have to be consecutive days but must be satisfied within 270 consecutive days. We will then:

- reimburse the pro-rata premium paid for monthly periods beyond that for which the waiver begins; and
- reimburse the payment of premium for each calendar month which begins while You continue to receive at least 12 days of covered Home and Community Care Services, excluding Homemaker and Chore Services.

Your premiums will not be reimbursed for any calendar month in which You:

- Receive less than 12 days of covered Home and Community Care Services; or
- Receive Homemaker and Chore Services only; or
- Have reached Your Lifetime Maximum Benefit amount.

V. The "Continuation for Alzheimer's Disease and Other Forms of Cognitive or Functional Impairment" section of the "Effective Date and Premium Payment Provisions" section of the Policy is amended to read:

Continuation for Alzheimer's Disease and Other Forms of Cognitive or Funtional Impairment: If Your policy lapses because premiums have not been paid by the end of the grace period and before Your benefits have been exhausted, We will provide a continuation of coverage. To be eligible for this continuation you must provide us with proof that beginning on or before the date of lapse and continuing without interruption, You:

- (a) - Are unable to perform without substantial assistance from another individual, 2 or more Activities of Daily Living for a period of at least 90 days due to a loss of functional capacity;
or
- (b) - Require substantial supervision to protect You from threats to health and safety due to Severe Cognitive Impairment; or
- (c) - Have a level of disability similar (as determined under regulations prescribed by the Secretary of the Treasury in consultation with the Secretary of Health and Human Services) to the level of disability described in clause (a).

The proof, in the form of a certification by a Licensed Health Care Practitioner, must specify that the above requirements have been met and must be provided to Us:

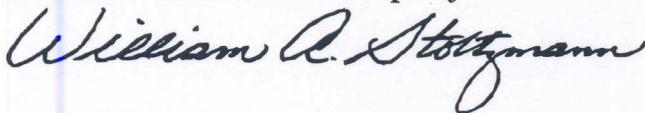
- within 5 months of the lapse date, when You are eligible for continuation because You have been functionally impaired; and
- within 9 months of the lapse date, when You are eligible for continuation because You have been cognitvely impaired.

You must pay all past-due premiums for the policy and all riders that were in force immediately prior to the date of lapse.

This continuation will then provide uninterrupted coverage to the same extent that the policy and all riders in force immediately prior to the termination date would have provided if they had not terminated. If You become eligible for benefits during the continuation period, they will be payable; subject to any applicable deductible (elimination) periods, maximum payment periods and all other provisions of the policy and its riders.

This endorsement is issued as of the Policy Date of the Policy.

IDS Life Insurance Company



Secretary

