

State: Pennsylvania **Filing Company:** MedAmerica Insurance Company
TOI/Sub-TOI: LTC03I Individual Long Term Care/LTC03I.003 Other
Product Name: Long-Term Care
Project Name/Number: MedAmerica Nationwide 2018 Rate Increase/145MAI01-30.06

Filing at a Glance

Company: MedAmerica Insurance Company
Product Name: Long-Term Care
State: Pennsylvania
TOI: LTC03I Individual Long Term Care
Sub-TOI: LTC03I.003 Other
Filing Type: Rate - Other (Not M.U. or G.I. Product)
Date Submitted: 08/21/2018
SERFF Tr Num: MILL-131567825
SERFF Status: Assigned
State Tr Num: MILL-131567825
State Status: Received Review in Progress
Co Tr Num: SERIES 11 AND PRIOR INDIVIDUAL (MEDAMERICA)

Implementation: On Approval
Date Requested:
Author(s): Missy Gordon, Courtney Williamson, Travis Reisch, Shawn Stender, Michael Emmert, Bryan Rask, Alex Moore, Brandon Johnson, Jack Bridges, Dexter Mosley, Cassi Noel, Megan Anderson, Peder Swenson, Derek Lesniak, Yi Shao, Matt Mickolichuk, Rylee Sevigny
Reviewer(s): Jim Laverty (primary)
Disposition Date:
Disposition Status:
Implementation Date:

State Filing Description:

Proposed 69.2% increase on 234 PA policyholders of LTC forms LTC-LBP-2PA, LTC-LBP8-MA-PA, LTC-CD5-2PA, LTC-CD8-MA-PA, LTC-CD9-MA-PA, NTQ11-337-MA-PA-601, NTQ11-337-MA-PA-998, LTQ11-336-MA-PA-601, LTQ11-336-MA-PA-998, FLQ11-336-MA-PA-601, HTQ11-338-MA-PA-601, and HTQ11-338-MA-PA-998.

State: Pennsylvania **Filing Company:** MedAmerica Insurance Company
TOI/Sub-TOI: LTC03I Individual Long Term Care/LTC03I.003 Other
Product Name: Long-Term Care
Project Name/Number: MedAmerica Nationwide 2018 Rate Increase/145MAI01-30.06

General Information

Project Name: MedAmerica Nationwide 2018 Rate Increase Status of Filing in Domicile: Pending
Project Number: 145MAI01-30.06 Date Approved in Domicile:
Requested Filing Mode: Review & Approval Domicile Status Comments: Pennsylvania is the state of
 domicile.
Explanation for Combination/Other: Market Type: Individual
Submission Type: New Submission Individual Market Type:
Overall Rate Impact: 69.2% Filing Status Changed: 08/22/2018
 State Status Changed: 08/22/2018
Deemer Date: Created By: Derek Lesniak
Submitted By: Michael Emmert Corresponding Filing Tracking Number:
 State TOI: LTC03I Individual Long Term Care

Filing Description:

On behalf of the company, we are submitting the referenced rate filing for your review. These are existing products that provide long-term care coverage on an individual basis. The company issued these products in Pennsylvania from October 12, 1992 to August 1, 2004 and is no longer marketing them in any jurisdiction. The company is making a similar request on the Series 11 Group policy form(s) in a concurrent filing (SERFF Tracking # MILL-131609778).

The company is requesting a premium rate increase on these form(s), including all associated riders. The need for a premium rate increase is due to emerging and projected experience running more adverse than previously expected.

Additionally, MedAmerica's affinity partner is making a similar request in concurrent filings. These filings use identical pooled nationwide experience of MedAmerica and its affinity partners individual and group business as described in the enclosed actuarial memorandum.

The company is requesting a premium rate increase that varies by benefit period to achieve the cumulative rate increases shown in the enclosed cover letter. The rate increase varies by benefit period to better align the rate increase with the adverse experience. The cover letter provides the average prior, requested, and cumulative rate increases by benefit period for these form(s).

The prior increase reflects the cumulative increase of two prior increase(s) that were filed for use in May 2010 and September 2017 on the forms. The company is seeking this rate increase request to help alleviate the adverse performance on this block of business.

Similar to the prior increase(s), the company will offer insureds affected by the premium increase the option of reducing their policy benefits 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. The company will offer a contingent benefit upon lapse to insureds that trigger a substantial rate increase. Additionally, the company will voluntarily offer a contingent benefit upon lapse to insureds affected by the rate increase, even if the increase is not considered substantial.

Company and Contact

Filing Contact Information

Michael Emmert, Associate Actuary michael.emmert@milliman.com

State: Pennsylvania **Filing Company:** MedAmerica Insurance Company
TOI/Sub-TOI: LTC03I Individual Long Term Care/LTC03I.003 Other
Product Name: Long-Term Care
Project Name/Number: MedAmerica Nationwide 2018 Rate Increase/145MAI01-30.06

8500 Normandale Lake Blvd. 952-820-3116 [Phone]
 Suite 1850
 Minneapolis, MN 55437

Filing Company Information

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

MedAmerica Insurance Company	CoCode: 69515	State of Domicile:
165 Court Street	Group Code: 1186	Pennsylvania
Rochester, NY 14647	Group Name: Lifetime HealthCare	Company Type:
(800) 544-0327 ext. [Phone]	Group	Life/Accident/Health
	FEIN Number: 34-0977231	State ID Number:

Filing Fees

Fee Required? No
 Retaliatory? No
 Fee Explanation:

State: Pennsylvania	Filing Company: MedAmerica Insurance Company
TOI/Sub-TOI: LTC03I Individual Long Term Care/LTC03I.003 Other	
Product Name: Long-Term Care	
Project Name/Number: MedAmerica Nationwide 2018 Rate Increase/145MAI01-30.06	

Rate Information

Rate data applies to filing.

Filing Method:	Review and Approval
Rate Change Type:	Increase
Overall Percentage of Last Rate Revision:	20.000%
Effective Date of Last Rate Revision:	09/22/2017
Filing Method of Last Filing:	Review and Approval
SERFF Tracking Number of Last Filing:	MILL-130925276

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):
MedAmerica Insurance Company	69.200%	69.200%	\$392,385	234	\$567,025	139.200%	40.900%

SERFF Tracking #:

MILL-131567825

State Tracking #:

MILL-131567825

Company Tracking #:

SERIES 11 AND PRIOR INDIVIDUAL
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State:

Pennsylvania

Filing Company:

MedAmerica Insurance Company

TOI/Sub-TOI:

LTC03I Individual Long Term Care/LTC03I.003 Other

Product Name:

Long-Term Care

Project Name/Number:

MedAmerica Nationwide 2018 Rate Increase/145MAI01-30.06

Rate/Rule Schedule

Item No.	Schedule Item Status	Document Name	Affected Form Numbers (Separated with commas)	Rate Action	Rate Action Information	Attachments
1		Prior to Series 11 Rate Tables	LTC-LBP-2PA, LTC-LBP8-MA-PA, LTC-CD5-2PA, LTC-CD8-MA-PA, LTC-CD9-MA-PA	Revised	Previous State Filing Number: MILL-130925276 Percent Rate Change Request: 69.2	PA_MedAmerica_Current Premium Rates_Prior to Series 11_20180815.pdf, PA_MedAmerica_Proposed Premium Rates_Prior to Series 11_20180815.pdf,
2		Series 11 Individual Rate Tables	NTQ11-337-MA-PA-601, NTQ11-337-MA-PA-998, LTQ11-336-MA-PA-601, LTQ11-336-MA-PA-998, FLQ11-336-MA-PA-601, HTQ11-338-MA-PA-601, HTQ11-338-MA-PA-998	Revised	Previous State Filing Number: MILL-130925276 Percent Rate Change Request: 69.2	PA_MedAmerica_Current Premium Rates_Series 11 Individual_20180815.pdf, PA_MedAmerica_Proposed Premium Rates_Series 11 Individual_20180815.p

MedAmerica Insurance Company
165 Court Street, Rochester, New York 14647

Facility Only Policy

Individual Rates for Lifetime Premium Payment Option
90 Day Elimination Period
Annual Premium Rates with 20% Rate Increase
Rates per \$10 Daily Benefit

Policy Form: LTC-LBP-2PA
Base Rates with No Inflation Protection

Rider: LTC-LBP-2PA-SIP
Simple Inflation Protection Rider

Rider: LTC-LBP-2PA-CIP
Compound Inflation Protection Rider

<i>Issue Age</i>	Benefit Period			Benefit Period			Benefit Period		
	<u>1 Year</u>	<u>2 Years</u>	<u>3 Years</u>	<u>1 Year</u>	<u>2 Years</u>	<u>3 Years</u>	<u>1 Year</u>	<u>2 Years</u>	<u>3 Years</u>
<45	13	17	18	3	5	7	12	18	23
45	15	17	18	3	7	8	12	20	27
46	15	18	20	3	7	8	13	20	28
47	15	18	22	5	8	10	15	23	28
48	17	20	23	5	8	10	15	23	30
49	17	22	23	7	8	13	17	25	33
50	18	22	25	7	12	13	17	28	37
51	18	23	28	8	12	13	18	30	37
52	20	25	30	8	13	17	18	32	40
53	22	27	32	8	15	18	20	33	43
54	22	30	35	10	15	20	22	33	45
55	23	32	37	12	17	23	23	37	48
56	25	33	40	13	20	25	25	40	52
57	27	37	43	13	22	28	27	42	55
58	30	40	48	13	23	30	27	45	58
59	32	43	53	17	27	33	30	48	62
60	35	48	58	17	28	37	30	50	65
61	38	53	65	20	32	43	33	55	73
62	42	58	73	23	38	48	38	62	80
63	45	67	82	27	42	55	43	67	88
64	50	73	92	30	47	62	47	75	97
65	57	83	105	33	53	68	50	82	105
66	63	95	118	37	58	77	55	87	115
67	72	107	133	38	63	83	58	95	123
68	80	120	150	42	70	92	62	102	133
69	90	137	172	47	77	100	67	108	142
70	100	155	195	52	83	110	73	115	152
71	105	162	205	52	83	110	73	115	152
72	118	182	230	53	88	117	75	118	155
73	132	203	257	57	93	125	75	123	163
74	145	225	285	62	100	133	80	130	170
75	162	252	319	63	105	140	82	133	177
76	178	279	354	68	112	148	85	140	185
77	197	309	390	70	117	157	88	143	192
78	217	339	429	73	122	165	90	150	198
79	235	369	467	77	128	172	92	155	207
80	237	370	469	77	128	172	92	155	207
81	255	400	505	77	130	175	93	155	207
82	275	432	544	78	130	175	93	157	210
83	297	464	584	78	135	182	93	157	210
84	320	502	630	82	138	187	95	158	213
85	345	542	681	85	143	193	98	163	220

MedAmerica Insurance Company
165 Court Street, Rochester, New York 14647

Facility Only Policy

Individual Rates for Lifetime Premium Payment Option
0-Day Elimination Period
Annual Premium Rates with 20% Rate Increase
Rates per \$10 Daily Benefit

Policy Form: LTC-LBP8-MA-PA
Base Rates with No Inflation Protection

Rider: LBP8-PA-SIP
Simple Inflation Protection Rider

Rider: LBP8-PA-CIP
Compound Inflation Protection Rider

Issue Age	Benefit Period					Benefit Period					Benefit Period				
	2 Years	3 Years	4 Years	5 Years	Lifetime	2 Years	3 Years	4 Years	5 Years	Lifetime	2 Years	3 Years	4 Years	5 Years	Lifetime
<40	22	25	28	32	35	15	18	18	18	27	22	28	32	33	43
40	25	28	32	33	37	17	18	22	25	32	22	30	35	38	50
41	27	30	33	37	40	18	22	25	27	33	25	35	40	43	55
42	28	33	37	40	45	20	22	27	30	33	28	38	43	48	57
43	30	35	40	43	48	22	25	28	32	37	32	42	47	52	62
44	33	38	43	47	52	22	27	30	33	38	33	45	52	57	67
45	35	42	47	50	55	23	27	32	37	42	37	48	55	62	72
46	37	43	50	53	58	23	30	33	38	43	40	52	58	65	77
47	38	47	52	57	62	25	30	37	40	45	43	55	63	70	80
48	42	48	55	60	65	25	33	38	42	48	45	58	67	75	85
49	43	52	58	63	68	27	33	40	45	50	47	62	72	80	90
50	45	55	62	67	72	28	35	42	47	52	50	65	75	83	95
51	48	57	65	70	75	28	38	43	48	55	52	68	78	88	98
52	50	60	67	73	80	30	38	45	52	55	55	72	83	93	102
53	52	62	70	77	83	32	42	47	53	58	58	77	87	97	107
54	53	65	73	80	87	33	42	48	55	60	62	78	90	102	112
55	57	68	77	83	90	33	43	50	57	62	63	82	95	107	117
56	60	73	83	92	98	37	47	53	60	65	67	85	97	108	120
57	65	78	90	98	105	38	50	57	63	70	68	88	100	113	125
58	68	85	97	105	113	42	52	58	67	73	72	90	103	117	128
59	73	90	102	113	122	43	55	63	70	77	73	93	108	120	132
60	78	95	108	120	130	43	58	67	73	80	73	97	112	123	135
61	85	105	120	133	143	48	62	72	78	88	80	102	117	130	143
62	93	115	132	147	158	52	67	77	85	93	83	107	123	137	150
63	102	125	143	160	172	55	72	82	90	100	87	112	128	143	158
64	110	135	155	172	187	58	77	87	97	107	90	117	135	152	165
65	117	145	167	185	200	62	80	92	102	113	95	122	140	158	173
66	132	163	188	208	227	67	87	98	110	122	100	130	148	165	182
67	145	182	208	232	252	72	93	107	118	132	107	137	157	173	193
68	160	200	230	255	277	77	98	113	127	142	110	143	165	182	203
69	173	218	250	279	302	82	105	122	135	150	117	150	173	192	213
70	188	237	272	302	330	87	112	128	143	157	122	157	180	202	222
71	212	267	307	342	370	93	118	142	162	170	128	165	188	208	234
72	237	299	342	379	414	98	125	157	183	178	133	170	197	220	242
73	262	329	379	422	457	103	133	168	198	188	138	178	203	224	252
74	285	360	414	457	499	110	138	183	224	198	143	183	212	237	262
75	312	392	450	500	547	113	143	195	239	203	148	188	218	244	267
76	345	435	500	555	605	120	155	200	240	218	153	198	229	254	280
77	380	480	554	615	669	127	162	202	237	229	158	205	234	257	290
78	415	529	605	669	734	132	165	205	242	239	165	208	242	274	299
79	450	570	657	732	797	138	177	207	232	249	170	217	249	275	309
80	494	622	716	796	871	138	177	205	229	250	170	217	252	280	309
81	534	677	779	864	947	148	188	217	242	267	177	227	262	292	322
82	579	739	851	946	1,034	155	193	220	244	275	183	232	265	294	329
83	630	801	921	1,022	1,123	155	198	230	257	282	183	235	270	300	332
84	679	862	991	1,097	1,209	158	203	237	267	289	185	239	277	312	337
85	726	922	1,061	1,178	1,296	165	212	244	274	297	190	244	282	315	344

MedAmerica Insurance Company
165 Court Street, Rochester, New York 14647

Facility Only Policy

Individual Rates for 10-Year Premium Payment Option
0-Day Elimination Period
Annual Premium Rates with 20% Rate Increase
Rates per \$10 Daily Benefit

Policy Form: LTC-LBP8-MA-PA
Base Rates with No Inflation Protection

Rider: LBP8-PA-SIP
Simple Inflation Protection Rider

Rider: LBP8-PA-CIP
Compound Inflation Protection Rider

Issue Age	Benefit Period					Lifetime	Benefit Period					Lifetime	Benefit Period					Lifetime
	2 Years	3 Years	4 Years	5 Years	Lifetime		2 Years	3 Years	4 Years	5 Years	Lifetime		2 Years	3 Years	4 Years	5 Years	Lifetime	
40	43	53	60	65	72	30	37	43	50	60	40	60	68	77	97			
41	47	58	65	72	78	32	40	47	53	63	45	65	77	85	105			
42	50	63	72	78	85	35	42	50	57	68	52	72	83	92	113			
43	55	68	77	85	92	37	45	53	60	72	55	78	90	100	122			
44	58	72	82	92	98	38	50	58	63	75	60	85	98	108	130			
45	63	77	88	97	105	40	53	60	68	80	65	92	105	117	138			
46	67	82	93	103	112	43	55	63	72	83	70	98	112	125	147			
47	70	87	98	110	118	45	58	68	75	88	77	103	120	132	155			
48	75	92	105	115	125	47	62	70	80	92	80	110	127	142	163			
49	78	97	110	122	132	50	63	75	83	95	85	117	133	148	172			
50	82	102	115	128	138	52	67	78	87	100	92	122	142	157	180			
51	87	107	122	133	145	53	70	82	92	103	95	128	148	167	188			
52	90	112	127	140	152	57	73	85	95	108	102	133	157	173	197			
53	95	117	132	147	158	57	75	88	98	112	105	140	163	182	207			
54	98	122	138	152	165	60	78	92	103	115	110	147	170	190	215			
55	102	127	143	158	172	63	82	95	107	120	117	152	178	198	224			
56	110	135	155	170	185	65	87	100	112	127	118	158	182	203	229			
57	117	145	165	183	198	70	92	105	117	132	123	162	187	208	235			
58	125	155	177	195	212	72	95	110	123	138	127	165	192	213	240			
59	132	163	187	207	225	77	100	117	128	145	130	170	197	220	247			
60	140	173	198	220	240	78	105	120	133	150	133	175	202	225	252			
61	148	187	213	235	257	85	108	125	140	157	138	178	205	230	259			
62	158	198	227	252	275	88	115	132	145	163	142	183	212	235	264			
63	168	212	242	269	294	92	118	137	152	170	145	187	217	240	269			
64	178	224	257	284	310	95	125	142	158	178	148	193	222	247	277			
65	188	237	272	300	329	100	130	148	165	185	152	198	227	254	284			
66	203	257	294	325	357	105	135	155	172	192	155	202	232	257	289			
67	218	275	317	350	384	108	142	160	178	202	160	207	237	264	295			
68	234	295	339	375	412	113	147	168	187	208	163	212	244	270	302			
69	250	315	362	400	440	117	152	173	193	217	167	217	249	277	309			
70	265	335	384	425	467	122	158	182	202	227	172	222	255	284	319			
71	289	364	419	464	509	125	163	193	220	230	173	225	255	285	319			
72	312	394	452	500	550	130	167	205	240	237	175	227	259	289	322			
73	335	424	485	539	590	133	172	218	259	245	178	230	264	292	327			
74	359	454	520	577	632	138	177	230	275	252	182	234	267	295	332			
75	384	484	554	614	674	142	182	244	295	259	183	237	272	302	337			
76	415	525	602	667	732	145	185	239	285	264	185	239	272	302	339			
77	447	565	649	721	791	148	190	237	277	270	187	242	275	304	342			
78	480	607	697	772	849	152	195	235	270	277	188	244	279	309	345			
79	512	649	744	826	907	155	200	235	264	284	192	247	282	312	350			
80	544	691	792	879	966	160	205	234	259	290	195	250	285	317	355			
81	589	747	857	951	1,046	162	207	239	265	295	193	250	287	320	355			
82	632	804	922	1,024	1,126	165	210	244	270	299	195	250	290	322	357			
83	677	861	987	1,097	1,206	167	213	249	275	304	197	252	292	324	359			
84	721	917	1,054	1,169	1,288	170	217	252	282	309	198	254	294	329	359			
85	766	974	1,119	1,243	1,368	173	222	257	289	314	200	255	297	332	362			

MedAmerica Insurance Company
165 Court Street, Rochester, New York 14647

Policy Form: LTC-CD5-2PA

Comprehensive Policy

Individual Rates for Lifetime Premium Payment Option
 90-Day Elimination Period

Premiums for Base Policy with No Inflation Protection
 Annual Premium Rates with 20% Rate Increase
 Rates per \$20 NCF

Issue Age	2 Years Nursing Home with 2 Years Home Care at:		3 Years Nursing Home with 3 Years Home Care at:		5 Years Nursing Home with 5 Years Home Care at:		Unlimited Nursing Home with 5 Years Home Care at:	
	50%	100%	50%	100%	50%	100%	50%	100%
<40	43	65	53	82	68	105	75	113
40	47	68	57	87	72	112	80	120
41	48	72	60	92	77	118	85	127
42	52	77	63	97	80	125	90	135
43	53	80	67	102	85	133	97	143
44	57	85	72	108	90	142	102	152
45	60	90	75	115	97	150	108	162
46	63	95	80	122	102	158	115	172
47	67	102	85	128	108	168	123	183
48	72	107	90	137	115	178	132	195
49	75	113	95	145	122	188	140	207
50	80	120	102	153	130	200	150	220
51	85	128	108	163	138	213	160	235
52	92	137	115	173	148	227	172	250
53	97	145	123	185	158	242	185	269
54	103	155	132	198	170	257	198	287
55	112	165	140	212	182	275	213	307
56	118	175	152	225	195	294	230	329
57	127	188	162	240	210	314	249	352
58	137	200	175	257	225	334	269	377
59	147	215	187	275	242	357	290	405
60	158	230	202	295	262	384	314	437
61	173	250	222	320	285	415	345	475
62	190	272	242	347	312	449	380	517
63	208	295	265	377	342	487	419	564
64	230	322	292	409	375	527	460	614
65	259	359	327	454	420	582	519	681
66	285	389	360	492	464	632	572	742
67	314	424	397	535	510	687	632	812
68	344	460	435	582	560	746	697	884
69	382	505	484	639	622	819	776	974
70	424	555	537	701	689	896	861	1,069
71	439	567	554	716	711	914	886	1,091
72	484	620	610	781	782	994	974	1,189
73	530	674	671	849	857	1,079	1,069	1,293
74	580	729	732	917	937	1,166	1,169	1,401
75	635	792	802	996	1,027	1,264	1,279	1,519
76	692	856	876	1,074	1,119	1,364	1,391	1,638
77	749	917	947	1,151	1,211	1,458	1,496	1,748
78	807	979	1,022	1,226	1,303	1,549	1,603	1,855
79	864	1,037	1,096	1,299	1,393	1,638	1,700	1,950
80	864	1,037	1,096	1,299	1,393	1,638	1,700	1,950
81	914	1,076	1,156	1,343	1,454	1,675	1,750	1,973
82	974	1,138	1,233	1,419	1,543	1,761	1,841	2,063
83	1,042	1,206	1,314	1,503	1,635	1,853	1,933	2,155
84	1,118	1,283	1,408	1,600	1,745	1,965	2,045	2,268
85	1,203	1,371	1,511	1,710	1,868	2,093	2,170	2,400

MedAmerica Insurance Company
165 Court Street, Rochester, New York 14647

Rider: LTC-CD5-2PA-SIP

Comprehensive Policy

Individual Rates for Lifetime Premium Payment Option

90-Day Elimination Period

Rider Premium for Simple Inflation Protection

Annual Premium Rates with 20% Rate Increase

Rates per \$20 NCF

Issue Age	2 Years Nursing Home with 2 Years Home Care at:		3 Years Nursing Home with 3 Years Home Care at:		5 Years Nursing Home with 5 Years Home Care at:		Unlimited Nursing Home with 5 Years Home Care at:	
	50%	100%	50%	100%	50%	100%	50%	100%
<40	22	33	28	47	40	68	48	75
40	22	37	30	50	43	72	52	80
41	23	40	32	52	45	77	55	87
42	25	42	33	57	50	82	60	92
43	27	45	37	60	52	87	63	98
44	28	47	38	63	57	92	68	105
45	30	50	42	67	58	97	73	112
46	33	53	43	72	63	103	78	118
47	35	55	47	77	67	108	83	125
48	37	60	50	82	72	115	90	133
49	40	63	55	87	78	123	97	143
50	43	68	58	92	82	132	105	153
51	47	72	62	98	88	138	113	163
52	48	75	67	103	93	147	122	177
53	53	82	72	110	102	157	132	187
54	57	85	77	117	108	167	143	200
55	60	92	83	123	117	177	153	215
56	67	98	88	133	125	187	167	230
57	72	103	95	142	133	198	180	247
58	77	112	102	150	143	213	195	265
59	82	117	110	158	153	225	212	284
60	88	125	117	168	163	237	230	302
61	97	137	128	183	182	257	255	332
62	107	147	142	198	198	279	280	360
63	117	160	155	213	217	299	307	390
64	125	172	167	230	235	322	337	422
65	138	185	185	247	259	347	369	459
66	150	200	198	265	279	370	400	494
67	162	212	213	284	299	394	434	529
68	173	225	230	299	322	417	465	564
69	187	242	249	320	347	445	505	605
70	202	255	269	342	375	475	544	647
71	198	252	265	335	370	464	540	637
72	208	262	279	349	390	485	570	667
73	220	274	294	362	410	505	599	697
74	229	284	307	377	430	525	629	727
75	240	295	322	392	450	545	660	759
76	252	305	337	407	474	567	691	791
77	260	314	350	419	490	584	717	812
78	270	322	364	432	510	600	739	832
79	280	330	377	442	527	614	757	847
80	280	330	377	442	527	614	757	847
81	272	319	369	427	512	589	721	824
82	282	327	379	437	525	599	731	809
83	290	335	390	447	540	612	741	817
84	300	345	402	460	555	627	756	831
85	310	355	417	474	574	645	772	846

MedAmerica Insurance Company
165 Court Street, Rochester, New York 14647

Rider: LTC-CD5-2PA-CIP

Comprehensive Policy

Individual Rates for Lifetime Premium Payment Option

90-Day Elimination Period

Rider Premium for Compound Inflation Protection

Annual Premium Rates with the 20% Rate Increase

Rates per \$20 NCF

Issue Age	2 Years Nursing Home with 2 Years Home Care at:		3 Years Nursing Home with 3 Years Home Care at:		5 Years Nursing Home with 5 Years Home Care at:		Unlimited Nursing Home with 5 Years Home Care at:	
	50%	100%	50%	100%	50%	100%	50%	100%
<40	55	83	73	113	103	162	133	192
40	57	88	77	118	108	168	140	200
41	60	92	80	123	112	175	147	210
42	62	95	83	128	118	183	155	220
43	67	100	88	135	123	190	162	229
44	68	103	92	140	130	197	170	239
45	72	108	97	145	135	205	178	249
46	75	113	100	150	142	213	187	260
47	78	117	103	157	147	222	195	270
48	82	122	108	163	153	230	205	282
49	87	127	115	170	162	240	217	295
50	90	132	120	177	168	250	227	309
51	93	137	125	183	175	259	239	320
52	97	142	130	192	183	269	249	335
53	103	148	137	198	192	279	260	349
54	107	153	143	205	198	290	274	364
55	112	158	150	213	208	299	287	379
56	117	167	155	222	217	310	302	395
57	123	172	163	232	227	322	317	414
58	128	180	170	240	239	335	334	432
59	135	187	178	249	249	349	350	450
60	142	193	187	259	259	360	369	469
61	153	208	202	275	282	384	400	504
62	165	222	218	295	302	410	430	539
63	177	237	234	314	324	434	464	575
64	188	250	250	332	347	460	499	612
65	205	267	270	354	374	489	537	655
66	217	284	287	374	397	515	574	696
67	230	297	304	392	420	540	610	732
68	245	310	322	410	444	565	645	769
69	260	329	342	432	472	594	689	814
70	275	344	362	454	500	625	731	859
71	267	332	352	439	487	607	714	837
72	275	340	364	449	504	619	741	859
73	284	349	375	460	522	635	767	886
74	292	357	389	472	539	652	796	912
75	302	367	402	484	557	669	826	942
76	312	375	414	497	577	687	852	969
77	320	382	427	505	592	701	876	987
78	327	389	437	515	610	714	894	1,002
79	335	395	449	524	622	724	907	1,012
80	335	395	449	524	622	724	907	1,012
81	322	375	432	499	597	687	857	989
82	330	380	439	505	607	691	857	946
83	335	387	449	514	619	701	862	949
84	345	395	459	524	632	714	874	959
85	354	404	472	537	649	731	886	971

MedAmerica Insurance Company
165 Court Street, Rochester, New York 14647

Comprehensive Policy

Individual Rates for Lifetime Premium Payment Option
0-Day Elimination Period
Annual Premium Rates with 20% Rate Increase
Rates per \$10 Daily Benefit

Policy Form: LTC-CD8-MA-PA
Base Rates with No Inflation Protection

Rider: LTC8-PA-SIP
Simple Inflation Protection Rider

Rider: LTC8-PA-CIP
Compound Inflation Protection Rider

Issue Age	Benefit Period					Benefit Period					Benefit Period				
	2 Years	3 Years	4 Years	5 Years	Lifetime	2 Years	3 Years	4 Years	5 Years	Lifetime	2 Years	3 Years	4 Years	5 Years	Lifetime
<40	50	62	72	80	92	28	40	42	43	60	52	68	80	90	107
40	53	68	78	88	100	32	43	45	47	67	57	75	88	100	118
41	57	70	82	92	103	33	45	47	48	70	58	78	92	105	122
42	58	73	85	95	107	35	47	48	50	72	62	82	95	108	127
43	60	75	87	98	112	37	48	50	52	75	63	83	98	112	132
44	62	78	90	102	115	37	50	52	53	77	65	87	102	115	135
45	65	80	93	105	118	38	52	53	55	80	68	90	105	120	140
46	67	83	97	108	122	40	52	55	57	82	70	92	108	123	145
47	68	85	100	112	127	40	53	57	58	85	72	95	112	127	148
48	70	88	102	115	130	42	55	58	60	87	73	98	115	130	153
49	72	90	105	118	133	43	57	60	62	90	77	102	118	135	158
50	75	93	108	122	137	45	58	62	65	92	78	103	122	138	162
51	77	95	112	123	142	45	60	63	67	95	80	107	125	142	167
52	78	98	113	127	145	47	62	65	68	97	83	110	128	147	172
53	80	100	117	130	148	48	63	67	70	100	85	112	132	150	175
54	82	103	120	133	152	50	65	68	72	102	87	115	135	153	180
55	85	105	123	137	157	50	67	70	73	105	88	118	138	157	185
56	92	115	133	150	170	53	70	73	77	110	92	122	143	162	190
57	98	125	145	162	185	55	73	77	80	115	93	125	147	167	195
58	107	133	157	175	200	58	77	80	83	120	97	127	150	170	200
59	113	143	167	187	215	60	80	83	87	125	98	130	155	175	205
60	120	153	178	200	230	63	83	87	90	130	102	133	158	180	210
61	132	167	195	218	252	65	88	95	100	138	103	140	165	187	218
62	142	182	212	239	274	72	93	103	112	147	112	145	172	193	227
63	153	195	229	259	295	73	98	112	122	155	113	150	178	200	235
64	163	210	245	277	319	80	105	120	133	162	120	157	183	208	245
65	173	224	264	297	340	83	110	128	143	170	122	162	190	215	254
66	192	245	289	325	374	87	117	137	153	180	125	168	198	225	262
67	207	267	314	354	407	93	122	143	162	192	132	173	207	235	277
68	224	289	339	382	442	97	128	152	170	200	135	182	213	242	285
69	240	310	364	410	475	100	135	158	180	212	140	188	222	252	297
70	255	332	390	439	510	107	142	167	188	220	148	197	232	264	307
71	282	365	429	482	560	110	147	173	197	232	150	200	237	269	317
72	307	399	469	527	612	117	153	182	205	242	157	208	244	275	325
73	334	434	507	570	662	120	160	188	213	254	158	212	250	284	337
74	359	467	547	614	714	125	167	197	222	264	165	218	259	294	345
75	384	500	585	659	769	130	173	205	232	270	168	225	265	300	354
76	419	545	640	722	839	135	182	212	237	284	173	232	270	304	364
77	454	592	694	781	911	138	185	220	249	295	175	234	279	317	374
78	487	637	749	842	984	145	193	229	259	305	180	242	285	324	382
79	522	684	802	902	1,056	150	200	237	269	317	185	247	294	334	392
80	555	732	862	972	1,136	153	205	239	267	320	188	252	299	339	397
81	605	797	936	1,052	1,236	157	212	250	284	335	190	255	304	345	405
82	655	864	1,016	1,144	1,343	162	217	257	289	342	193	259	305	347	410
83	706	931	1,094	1,234	1,448	165	222	262	295	352	195	262	310	350	417
84	756	997	1,174	1,326	1,554	168	229	267	300	360	197	265	314	355	422
85	806	1,066	1,253	1,413	1,661	172	232	274	310	369	198	269	317	359	427

MedAmerica Insurance Company
165 Court Street, Rochester, New York 14647

Comprehensive Policy

Individual Rates for 10-Year Premium Payment Option
0-Day Elimination Period
Annual Premium Rates with 20% Rate Increase
Rates per \$10 Daily Benefit

Policy Form: LTC-CD8-MA-PA
Base Rates with No Inflation Protection

Rider: LTC8-PA-SIP
Simple Inflation Protection Rider

Rider: LTC8-PA-CIP
Compound Inflation Protection Rider

<i>Issue Age</i>	Benefit Period					<i>Lifetime</i>	Benefit Period					<i>Lifetime</i>	Benefit Period					<i>Lifetime</i>
	<i>2 Years</i>	<i>3 Years</i>	<i>4 Years</i>	<i>5 Years</i>	<i>Lifetime</i>		<i>2 Years</i>	<i>3 Years</i>	<i>4 Years</i>	<i>5 Years</i>	<i>Lifetime</i>		<i>2 Years</i>	<i>3 Years</i>	<i>4 Years</i>	<i>5 Years</i>	<i>Lifetime</i>	
40	95	122	142	158	183	57	77	82	85	122	100	135	160	182	217			
41	98	125	147	165	190	58	80	83	88	127	103	140	167	188	224			
42	102	130	152	172	197	62	82	87	92	132	107	145	172	195	232			
43	105	135	158	177	203	63	85	90	93	137	112	150	178	202	240			
44	108	140	163	183	210	65	88	93	97	140	115	155	185	210	249			
45	113	143	168	188	217	67	92	97	100	145	118	160	190	217	257			
46	117	148	173	195	224	70	93	98	103	150	122	165	197	224	265			
47	120	153	178	200	230	72	97	102	107	155	127	170	202	230	274			
48	123	158	183	207	237	73	100	105	110	158	130	175	208	237	280			
49	127	162	190	213	244	75	103	108	113	163	133	180	215	244	289			
50	130	167	195	218	252	78	105	112	117	168	137	185	220	250	297			
51	133	172	200	225	259	80	108	115	120	173	142	190	227	257	305			
52	137	175	205	230	265	82	112	117	123	177	145	195	232	264	314			
53	142	180	210	237	272	85	113	120	125	182	148	200	239	270	322			
54	145	185	217	242	279	87	117	123	128	187	152	205	245	277	330			
55	148	190	222	249	285	88	120	127	132	192	157	210	250	285	337			
56	158	203	239	269	309	92	125	130	137	198	158	213	255	289	342			
57	170	218	255	287	330	95	128	135	142	205	162	218	259	294	347			
58	182	234	272	307	354	100	133	140	145	212	165	222	264	299	352			
59	192	247	290	325	375	103	138	145	150	220	168	225	269	304	359			
60	203	262	307	345	399	107	143	150	155	227	170	229	274	310	364			
61	215	279	327	367	424	110	147	158	168	234	173	232	275	314	369			
62	229	295	347	389	450	113	152	168	183	242	175	235	280	317	374			
63	242	312	365	412	475	117	157	178	197	249	178	240	284	322	380			
64	254	329	385	434	502	122	162	188	210	257	182	244	289	327	387			
65	267	345	405	455	529	125	167	198	224	265	185	249	294	332	394			
66	284	367	430	485	562	128	172	203	230	272	187	252	297	337	397			
67	300	389	457	514	597	132	177	210	237	280	190	255	302	340	404			
68	317	412	484	544	632	137	182	215	244	289	193	259	305	345	409			
69	334	434	509	572	667	140	188	222	252	297	197	264	312	352	415			
70	349	455	535	602	702	145	193	229	259	305	200	269	317	359	424			
71	374	487	572	644	749	147	197	232	262	310	200	269	317	359	424			
72	397	519	607	684	797	148	200	237	267	315	200	269	319	360	425			
73	420	549	644	726	846	152	203	240	272	322	202	270	320	362	429			
74	445	580	681	766	894	155	207	245	277	329	203	274	322	365	432			
75	469	612	717	807	941	158	212	250	284	335	205	275	325	369	437			
76	499	652	766	862	1,006	160	215	254	287	340	205	275	327	369	437			
77	529	694	814	916	1,071	163	218	259	292	345	207	277	327	370	439			
78	560	734	862	971	1,136	165	224	264	297	352	207	279	329	374	440			
79	590	776	911	1,026	1,199	168	227	269	304	359	208	280	332	375	444			
80	620	816	959	1,079	1,264	172	232	274	309	367	210	282	335	379	449			
81	665	877	1,031	1,161	1,363	173	234	275	312	369	210	282	334	377	447			
82	712	939	1,104	1,243	1,461	175	235	279	315	374	208	282	334	377	447			
83	757	1,001	1,176	1,326	1,558	177	239	282	319	379	208	282	334	377	449			
84	802	1,062	1,249	1,408	1,656	178	242	285	322	384	210	282	334	377	449			
85	849	1,123	1,321	1,489	1,753	180	244	289	327	389	210	284	335	379	384			

MedAmerica Insurance Company
165 Court Street, Rochester, New York 14647

Comprehensive Policy

Individual Rates for Lifetime Premium Payment Option
0-Day Elimination Period
Annual Premium Rates with 20% Rate Increase
50% Home Care, 20% Copayment Option
Rates per \$10 Daily Benefit

Issue Age	Policy Form: LTC-CD9-MA-PA Base Rates with No Inflation Protection					Rider: LTC9-PA-SIP Simple Inflation Protection Rider					Rider: LTC9-PA-CIP Compound Inflation Protection Rider				
	2 Years	3 Years	4 Years	5 Years	Lifetime	2 Years	3 Years	4 Years	5 Years	Lifetime	2 Years	3 Years	4 Years	5 Years	Lifetime
<40	32	37	42	45	55	18	23	28	30	40	33	42	48	52	75
40	33	40	45	50	62	20	25	30	30	40	38	47	55	57	80
41	35	42	48	53	65	22	27	32	32	43	40	50	57	60	83
42	37	45	50	55	68	23	28	33	35	45	43	52	62	63	87
43	40	47	53	58	72	23	30	35	37	48	43	55	63	67	90
44	42	50	57	62	77	25	30	37	38	48	45	55	65	70	92
45	43	52	58	65	80	27	33	40	40	52	47	58	68	72	95
46	45	55	62	67	83	28	33	40	43	53	50	60	72	77	98
47	47	57	65	70	87	30	35	42	45	57	52	63	73	80	102
48	50	60	67	73	90	28	37	45	45	58	52	65	77	82	107
49	52	62	70	77	93	30	38	47	47	62	53	68	78	85	110
50	53	65	73	78	97	32	38	47	50	63	57	70	82	90	113
51	55	67	75	82	100	33	42	50	52	67	58	73	85	92	117
52	57	70	78	85	105	35	42	52	53	67	60	73	87	95	118
53	60	72	82	88	108	35	43	53	55	70	60	77	88	98	122
54	62	75	83	90	112	37	45	55	58	72	63	78	93	102	125
55	63	77	87	93	115	38	47	57	60	75	65	82	95	105	128
56	68	83	93	102	123	40	50	60	63	80	68	85	100	112	133
57	73	88	100	108	133	42	53	63	67	82	70	90	105	120	138
58	77	95	108	117	142	45	57	65	70	87	75	92	107	125	143
59	82	100	115	123	152	47	60	68	73	88	77	97	112	133	148
60	87	107	122	132	160	48	63	72	77	93	80	100	117	140	153
61	93	115	132	142	172	50	65	75	82	98	82	103	120	142	158
62	100	123	140	152	185	53	68	80	85	103	85	105	125	143	163
63	105	130	150	163	197	57	72	82	88	108	88	110	127	143	168
64	112	138	158	173	210	60	75	87	92	113	92	112	132	145	173
65	118	147	168	183	222	62	77	90	97	118	93	115	135	147	178
66	133	165	190	207	250	67	82	97	103	127	98	122	142	155	188
67	148	183	210	229	277	70	88	103	112	137	103	128	150	165	200
68	162	200	232	252	305	77	95	110	120	147	108	137	158	172	210
69	177	218	252	274	332	80	102	117	128	157	113	143	167	182	222
70	192	237	274	297	360	85	107	123	135	165	118	150	173	190	232
71	215	265	305	332	405	88	112	130	142	173	122	155	180	197	240
72	237	294	337	367	449	93	117	137	148	183	127	160	187	203	250
73	260	320	370	402	494	97	123	143	157	193	130	165	192	208	259
74	282	349	402	437	537	102	128	150	163	203	135	170	198	215	269
75	305	377	434	472	582	105	133	157	170	212	138	175	205	222	277
76	344	425	490	534	657	113	143	168	182	224	147	185	217	234	287
77	384	472	549	597	732	120	155	178	192	237	153	197	225	244	297
78	422	520	605	659	806	127	165	188	205	250	160	207	237	257	310
79	462	567	664	722	881	133	177	198	215	264	167	218	245	267	320
80	500	615	721	784	956	142	187	210	227	275	175	229	257	279	330
81	545	672	786	856	1,054	145	192	217	234	285	178	232	260	282	339
82	592	731	852	927	1,153	148	195	224	240	295	180	234	264	287	345
83	637	787	917	997	1,251	152	202	230	249	305	182	239	267	292	354
84	684	846	984	1,069	1,349	155	205	237	255	315	183	240	270	297	360
85	729	902	1,049	1,141	1,448	158	210	244	262	325	187	244	274	300	369

MedAmerica Insurance Company
165 Court Street, Rochester, New York 14647

Comprehensive Policy

Individual Rates for Lifetime Premium Payment Option
0-Day Elimination Period
Annual Premium Rates with 20% Rate Increase
50% Home Care, 0% Copayment Option
Rates per \$10 Daily Benefit

Issue Age	Policy Form: LTC-CD9-MA-PA Base Rates with No Inflation Protection					Rider: LTC9-PA-SIP Simple Inflation Protection Rider					Rider: LTC9-PA-CIP Compound Inflation Protection Rider				
	2 Years	3 Years	4 Years	5 Years	Lifetime	2 Years	3 Years	4 Years	5 Years	Lifetime	2 Years	3 Years	4 Years	5 Years	Lifetime
<40	33	38	43	47	57	18	23	30	32	42	35	43	50	53	78
40	35	42	47	52	63	20	27	32	32	42	40	48	57	60	83
41	37	43	50	55	68	22	28	33	33	45	42	52	60	63	87
42	38	47	52	57	72	23	30	35	37	47	45	53	65	67	90
43	42	48	55	60	75	25	32	37	38	50	45	57	67	70	93
44	43	52	58	63	80	27	32	38	40	50	47	58	68	73	95
45	45	53	60	68	83	28	35	42	42	53	48	62	72	73	98
46	47	57	63	70	87	30	35	42	45	55	52	63	75	78	102
47	48	58	68	73	90	32	37	43	47	58	53	67	75	83	107
48	52	62	70	77	93	30	38	47	47	62	53	68	78	85	112
49	53	63	73	80	97	32	40	48	48	65	57	72	82	88	115
50	55	68	77	82	100	33	38	48	52	67	60	72	85	93	118
51	57	70	78	85	103	35	43	52	53	70	62	75	88	95	122
52	58	73	82	88	110	37	43	53	55	68	63	75	90	98	122
53	62	75	85	92	113	37	45	55	57	72	63	80	92	102	127
54	63	78	87	93	117	38	47	57	62	73	67	82	97	107	130
55	67	80	90	97	120	38	48	58	63	78	67	85	98	110	133
56	72	87	97	105	128	42	52	63	67	83	70	88	105	117	138
57	77	92	103	113	138	43	55	67	68	85	72	93	110	123	145
58	80	98	113	122	147	47	60	67	72	90	78	95	110	130	150
59	85	103	120	128	158	48	63	70	77	92	80	102	115	138	153
60	90	112	127	137	167	50	65	75	80	97	83	103	122	147	160
61	97	120	137	147	178	52	67	78	85	102	85	107	125	148	165
62	103	128	145	158	192	57	72	83	88	108	88	108	130	148	170
63	110	135	157	170	205	58	75	85	92	112	92	115	132	148	175
64	117	143	165	180	218	62	78	90	95	118	95	117	137	152	180
65	123	153	175	190	230	63	78	93	102	123	97	118	140	153	187
66	138	172	198	215	260	70	85	100	107	132	103	127	147	162	197
67	155	190	218	237	289	72	93	108	117	142	107	133	157	172	207
68	168	208	242	262	317	80	98	113	125	153	112	142	163	178	218
69	183	227	262	285	345	83	107	122	133	163	118	150	173	188	230
70	200	247	285	309	375	88	110	128	140	172	122	155	180	198	240
71	224	275	317	345	422	92	117	135	147	180	127	162	188	205	249
72	247	305	350	382	467	97	122	142	153	190	132	167	195	212	260
73	270	334	385	419	514	102	128	148	162	200	135	172	198	217	269
74	294	362	419	454	559	105	133	155	170	212	140	177	205	225	279
75	317	392	450	490	605	110	138	163	177	220	145	182	213	232	289
76	357	442	510	555	684	118	150	175	188	232	153	193	225	242	299
77	399	490	570	620	762	125	162	185	200	245	160	205	235	254	309
78	439	540	630	686	837	132	172	195	213	260	167	215	245	267	324
79	480	590	691	751	916	138	183	207	224	274	173	227	255	279	334
80	520	640	749	816	994	147	193	218	235	287	182	237	267	289	344
81	567	699	817	891	1,096	152	200	225	242	297	185	242	270	292	352
82	615	761	886	964	1,199	155	202	234	250	307	188	242	275	299	359
83	662	819	954	1,037	1,301	158	210	240	259	317	190	249	277	304	367
84	711	879	1,024	1,112	1,403	162	213	245	265	329	192	250	280	309	375
85	757	939	1,091	1,186	1,506	165	218	254	274	339	195	252	285	314	384

MedAmerica Insurance Company
165 Court Street, Rochester, New York 14647

Comprehensive Policy

Individual Rates for Lifetime Premium Payment Option
0-Day Elimination Period
Annual Premium Rates with 20% Rate Increase
100% Home Care, 20% Copayment Option
Rates per \$10 Daily Benefit

Issue Age	Policy Form: LTC-CD9-MA-PA Base Rates with No Inflation Protection					Rider: LTC9-PA-SIP Simple Inflation Protection Rider					Rider: LTC9-PA-CIP Compound Inflation Protection Rider				
	2 Years	3 Years	4 Years	5 Years	Lifetime	2 Years	3 Years	4 Years	5 Years	Lifetime	2 Years	3 Years	4 Years	5 Years	Lifetime
<40	40	47	53	57	73	22	28	33	35	48	40	50	60	63	85
40	42	50	57	62	78	27	32	38	40	55	47	58	68	72	97
41	45	53	60	65	83	27	33	40	43	58	48	60	72	75	100
42	47	57	63	70	88	30	35	43	43	60	50	62	73	77	105
43	50	60	68	73	93	30	37	43	47	63	52	65	75	80	108
44	52	63	72	77	98	32	37	45	48	65	55	67	78	83	112
45	55	67	75	82	105	33	38	47	50	67	55	68	82	85	113
46	57	68	78	85	110	35	42	50	52	70	58	72	83	88	118
47	60	72	82	88	115	35	43	52	55	72	60	73	87	92	122
48	62	75	87	93	120	37	45	52	55	75	62	77	88	93	125
49	65	78	90	97	125	38	47	53	58	77	63	78	90	97	128
50	68	82	93	102	130	38	48	57	60	80	65	80	93	100	133
51	70	85	97	105	135	40	48	58	62	83	67	82	97	103	137
52	73	88	100	108	140	42	50	60	65	85	68	83	98	107	140
53	75	92	105	113	145	43	52	60	65	88	70	87	100	108	143
54	78	95	108	117	150	43	53	63	68	90	72	88	103	112	148
55	80	98	112	120	157	47	55	65	70	92	75	90	107	115	150
56	83	100	115	125	162	47	58	67	72	95	75	93	108	117	153
57	85	103	118	128	167	48	58	68	73	97	78	95	112	120	157
58	88	107	123	132	172	48	60	70	77	100	80	98	113	123	162
59	90	110	127	137	177	52	62	72	77	102	82	100	115	125	165
60	93	113	130	140	182	52	63	73	80	105	83	102	118	128	168
61	102	123	142	153	198	53	67	77	83	110	85	105	122	132	173
62	110	133	153	165	215	57	70	80	88	115	88	108	125	137	180
63	117	143	165	178	230	60	73	85	92	123	92	112	130	142	187
64	125	153	177	190	247	63	77	88	97	128	95	115	133	147	193
65	133	163	188	203	264	65	80	92	100	133	97	118	137	150	198
66	148	182	208	225	294	68	85	98	108	142	100	123	143	158	208
67	162	198	229	249	322	73	92	105	113	152	107	130	152	165	218
68	177	217	250	270	352	78	95	110	122	160	110	137	157	172	229
69	190	234	270	294	380	83	102	117	127	170	117	143	165	178	239
70	205	252	290	315	410	87	107	123	135	178	120	148	172	187	249
71	229	282	324	352	459	92	112	132	143	188	125	153	180	195	259
72	254	310	359	389	507	95	118	137	150	198	128	160	185	202	269
73	277	340	392	425	555	102	125	145	158	208	135	167	193	210	279
74	302	369	427	462	604	105	132	150	165	218	138	173	198	217	289
75	325	399	460	499	652	110	137	158	173	229	143	178	207	225	299
76	365	449	517	560	736	117	145	170	185	242	150	187	217	237	312
77	405	497	574	624	817	123	155	182	195	257	157	195	227	247	327
78	444	547	632	686	901	130	162	190	205	272	163	203	237	257	342
79	484	595	689	749	982	137	172	202	215	287	170	212	247	267	357
80	524	645	746	811	1,066	143	180	213	227	300	177	220	257	279	370
81	570	704	812	884	1,164	147	185	220	234	310	178	224	260	282	375
82	617	762	881	957	1,263	150	190	227	240	319	182	227	262	285	382
83	665	822	947	1,031	1,363	152	192	234	249	327	182	229	267	287	385
84	712	881	1,016	1,104	1,461	155	197	240	255	335	185	232	269	290	392
85	759	939	1,082	1,178	1,560	158	202	247	262	345	187	235	272	294	397

MedAmerica Insurance Company
165 Court Street, Rochester, New York 14647

Comprehensive Policy

Individual Rates for Lifetime Premium Payment Option
0-Day Elimination Period
Annual Premium Rates with 20% Rate Increase
100% Home Care, 0% Copayment Option
Rates per \$10 Daily Benefit

Issue Age	Policy Form: LTC-CD9-MA-PA Base Rates with No Inflation Protection					Rider: LTC9-PA-SIP Simple Inflation Protection Rider					Rider: LTC9-PA-CIP Compound Inflation Protection Rider				
	2 Years	3 Years	4 Years	5 Years	Lifetime	2 Years	3 Years	4 Years	5 Years	Lifetime	2 Years	3 Years	4 Years	5 Years	Lifetime
<40	42	48	55	58	77	22	30	35	37	50	42	52	63	67	88
40	43	52	58	63	82	28	33	40	42	57	48	62	72	75	100
41	47	55	62	68	87	28	35	42	45	60	50	63	75	77	103
42	48	58	67	73	92	32	37	45	45	63	52	65	75	80	110
43	52	62	72	77	97	32	38	45	48	67	53	68	77	83	113
44	53	67	75	80	102	33	37	47	50	68	58	68	82	87	117
45	57	70	78	85	110	35	40	48	52	68	58	70	85	88	117
46	58	72	82	88	115	37	43	52	53	72	62	73	87	92	122
47	62	75	85	92	120	37	45	53	57	73	63	75	90	95	127
48	63	78	90	97	125	38	47	53	58	78	65	80	92	97	130
49	68	82	93	100	130	38	48	55	62	80	65	82	93	102	133
50	72	85	97	105	135	40	50	60	63	83	67	83	97	105	138
51	73	88	100	110	140	42	50	62	63	87	68	85	102	107	143
52	77	92	103	113	145	43	52	63	67	88	70	87	103	110	147
53	78	95	110	118	150	45	53	62	67	93	72	90	103	112	150
54	82	98	113	122	157	45	57	65	70	93	75	92	107	115	153
55	83	102	117	125	163	48	58	67	73	95	78	95	110	120	155
56	87	103	120	130	168	48	62	68	75	98	78	98	112	122	160
57	88	107	123	133	173	50	62	70	77	100	82	100	117	125	163
58	92	112	128	137	178	50	62	73	80	105	83	102	118	128	168
59	93	115	132	142	183	53	63	75	80	107	85	103	120	130	172
60	97	118	135	145	188	53	65	77	83	110	87	105	123	133	175
61	105	128	147	160	207	57	70	80	87	113	88	108	127	137	180
62	115	138	160	172	224	58	73	83	92	120	92	113	130	142	187
63	122	148	172	185	240	62	77	88	95	127	95	117	135	148	193
64	130	160	183	198	257	67	80	92	100	133	98	118	138	152	202
65	138	170	197	212	274	68	83	95	103	140	102	123	142	155	207
66	155	188	217	234	305	70	88	102	113	147	103	128	148	165	217
67	168	207	237	259	335	77	95	110	118	157	110	135	158	172	227
68	183	225	260	280	365	82	98	115	127	167	115	142	163	180	239
69	198	244	280	305	395	87	105	122	132	177	120	148	172	185	249
70	213	262	302	329	427	90	112	128	140	185	125	155	178	193	259
71	237	294	337	365	477	97	115	137	150	197	130	158	187	203	269
72	264	322	374	404	527	98	123	142	157	207	133	167	192	210	280
73	289	354	407	442	577	105	130	152	165	217	140	173	202	218	290
74	314	384	444	480	627	110	137	157	172	229	145	180	207	225	300
75	339	415	479	519	679	113	142	165	180	237	148	185	215	234	310
76	380	467	537	582	766	122	150	177	193	250	155	193	227	247	324
77	422	517	597	649	851	128	162	188	203	267	162	203	235	257	339
78	462	569	657	712	937	135	168	198	213	282	170	212	247	269	355
79	504	619	717	779	1,022	142	178	208	224	297	177	220	255	277	370
80	545	671	776	842	1,109	148	188	222	237	312	183	230	267	290	384
81	594	732	844	919	1,211	152	192	230	244	322	185	232	272	294	390
82	642	792	916	996	1,313	155	198	237	250	332	188	237	272	297	397
83	692	856	986	1,072	1,418	158	198	242	259	340	188	237	277	299	400
84	741	916	1,056	1,148	1,519	162	205	250	267	349	193	242	280	302	407
85	789	977	1,126	1,224	1,621	165	208	257	274	360	195	244	282	305	414

MedAmerica Insurance Company
165 Court Street, Rochester, New York 14647

Comprehensive Policy

Individual Rates for 10-Year Premium Payment Option
0-Day Elimination Period
Annual Premium Rates with 20% Rate Increase
50% Home Care, 20% Copayment Option
Rates per \$10 Daily Benefit

Policy Form: LTC-CD9-MA-PA
Base Rates with No Inflation Protection

Rider: LTC9-PA-SIP
Simple Inflation Protection Rider

Rider: LTC9-PA-CIP
Compound Inflation Protection Rider

<i>Issue Age</i>	Benefit Period					Benefit Period					Benefit Period				
	<u>2 Years</u>	<u>3 Years</u>	<u>4 Years</u>	<u>5 Years</u>	<u>Lifetime</u>	<u>2 Years</u>	<u>3 Years</u>	<u>4 Years</u>	<u>5 Years</u>	<u>Lifetime</u>	<u>2 Years</u>	<u>3 Years</u>	<u>4 Years</u>	<u>5 Years</u>	<u>Lifetime</u>
40	57	68	78	83	108	43	53	62	68	90	83	105	122	133	175
41	60	73	83	88	115	47	57	65	73	95	88	110	128	142	183
42	63	77	88	95	122	48	60	70	77	98	93	118	137	148	192
43	67	82	93	100	127	52	63	73	82	105	100	123	143	158	202
44	72	85	98	105	133	53	68	78	87	110	103	132	152	167	212
45	75	90	103	110	140	57	72	82	92	115	108	137	158	175	220
46	78	95	108	117	147	58	73	87	95	118	113	142	167	182	229
47	82	98	113	122	153	62	78	90	100	123	118	150	173	190	237
48	85	103	118	127	158	65	82	95	103	130	125	155	182	200	247
49	88	107	123	132	165	68	87	98	108	135	130	163	188	208	255
50	92	112	128	138	172	70	88	103	112	138	135	168	197	215	264
51	95	117	133	143	178	73	92	107	117	143	140	173	203	224	272
52	100	120	138	148	185	75	97	112	122	148	143	182	212	232	282
53	103	125	143	153	190	78	100	115	127	155	150	187	218	242	292
54	107	128	148	160	197	80	103	120	130	158	155	195	227	249	300
55	110	133	153	165	203	83	107	123	135	163	160	200	234	257	309
56	117	142	163	175	215	87	110	127	140	170	163	205	239	264	319
57	123	150	173	185	227	90	115	132	145	177	167	210	244	270	327
58	128	158	182	197	240	95	118	137	150	180	173	215	250	274	335
59	135	167	192	207	252	98	123	142	155	187	177	220	255	280	344
60	142	175	202	217	264	102	127	145	160	193	180	225	260	287	354
61	148	183	212	229	277	103	130	148	163	198	180	227	262	289	355
62	157	193	222	240	292	103	132	152	167	200	178	227	264	290	355
63	163	202	234	252	305	107	135	155	170	205	178	230	265	290	357
64	172	212	244	264	320	107	137	158	173	207	177	230	267	292	357
65	178	220	254	275	334	108	140	162	177	212	177	232	269	294	359
66	197	239	275	300	364	108	145	167	182	218	175	234	270	294	359
67	215	259	297	324	392	110	148	172	187	227	175	234	272	295	360
68	234	277	320	349	422	110	152	177	192	234	173	235	272	295	362
69	252	297	342	372	450	112	155	182	197	242	173	235	274	297	364
70	270	315	364	397	480	112	160	187	202	249	172	237	275	297	364
71	289	342	394	429	525	117	162	190	205	250	173	235	274	297	360
72	307	367	424	462	570	122	165	193	208	252	177	235	274	295	359
73	324	394	454	494	614	127	168	195	212	254	180	235	272	295	357
74	342	419	484	527	659	132	172	198	215	255	183	235	272	294	355
75	360	445	514	559	704	137	173	202	218	257	185	234	270	294	352
76	397	492	569	619	772	142	180	208	225	267	188	239	275	299	359
77	434	540	624	677	839	147	185	215	235	280	192	240	279	305	367
78	472	587	677	737	907	152	190	224	242	290	195	245	285	309	375
79	509	635	732	796	974	157	195	230	252	304	198	247	289	315	384
80	545	682	787	856	1,042	162	202	237	259	314	202	252	294	320	390
81	587	734	847	922	1,134	163	205	240	262	319	202	254	295	322	384
82	629	786	907	987	1,224	165	207	244	267	325	202	254	297	327	377
83	671	839	967	1,054	1,316	168	208	249	269	332	200	254	300	329	370
84	712	891	1,027	1,119	1,406	170	210	252	274	339	200	254	302	334	364
85	754	942	1,087	1,186	1,498	172	213	255	277	344	200	255	304	335	357

MedAmerica Insurance Company
165 Court Street, Rochester, New York 14647

Comprehensive Policy

Individual Rates for 10-Year Premium Payment Option
0-Day Elimination Period
Annual Premium Rates with 20% Rate Increase
50% Home Care, 0% Copayment Option
Rates per \$10 Daily Benefit

Policy Form: LTC-CD9-MA-PA
Base Rates with No Inflation Protection

Rider: LTC9-PA-SIP
Simple Inflation Protection Rider

Rider: LTC9-PA-CIP
Compound Inflation Protection Rider

Issue Age	Benefit Period					Benefit Period					Benefit Period				
	2 Years	3 Years	4 Years	5 Years	Lifetime	2 Years	3 Years	4 Years	5 Years	Lifetime	2 Years	3 Years	4 Years	5 Years	Lifetime
40	58	72	82	87	113	45	55	63	72	93	87	108	127	138	182
41	62	77	87	92	120	50	58	68	77	98	93	113	133	148	190
42	67	80	92	98	127	50	62	73	80	102	97	123	142	155	200
43	70	85	97	103	132	53	65	77	85	110	103	128	150	165	210
44	75	88	102	110	138	55	72	82	90	115	107	137	158	173	220
45	78	93	107	115	145	58	75	85	95	120	112	142	165	182	230
46	82	98	113	122	153	60	77	90	98	122	118	148	173	188	237
47	85	102	118	127	160	63	82	93	103	128	123	157	180	197	245
48	88	107	123	132	165	68	85	98	108	135	130	162	188	208	257
49	92	112	128	137	172	72	90	102	113	140	135	168	195	217	265
50	95	117	133	143	178	73	92	108	117	143	140	175	205	224	274
51	98	122	138	148	185	77	95	112	122	150	147	180	212	234	284
52	103	125	143	155	192	78	100	117	125	155	150	188	220	240	294
53	107	130	148	160	198	82	103	120	132	160	157	193	229	250	304
54	112	133	155	167	205	82	108	123	135	165	160	203	235	259	312
55	115	138	160	172	212	87	112	128	140	170	165	208	242	267	320
56	122	147	170	182	224	90	115	132	147	177	170	213	249	275	332
57	128	157	180	192	235	93	118	137	152	185	173	218	254	282	340
58	133	165	188	205	250	98	123	143	155	187	180	224	260	284	349
59	140	173	200	215	262	103	128	147	162	195	183	229	265	292	357
60	147	182	210	225	274	107	132	150	167	202	188	235	270	299	369
61	155	190	220	237	289	107	137	155	170	205	187	237	272	300	369
62	163	202	230	250	304	107	137	158	173	208	185	235	275	302	370
63	170	210	244	262	317	110	140	160	177	213	185	239	275	302	372
64	178	220	254	274	334	112	142	165	180	215	183	240	277	304	370
65	185	229	264	287	347	113	147	168	183	220	185	242	280	305	374
66	205	249	287	312	379	112	150	173	190	227	182	242	280	305	372
67	224	269	309	337	407	115	155	178	193	237	182	244	284	307	375
68	244	289	334	362	439	113	157	183	200	244	180	244	282	307	377
69	262	309	355	387	469	117	162	190	205	252	180	245	285	309	379
70	280	329	379	414	500	117	165	193	208	257	180	245	285	309	377
71	300	355	409	445	547	122	168	198	213	260	180	245	285	309	374
72	319	382	440	480	594	127	172	202	217	262	185	244	285	307	372
73	337	409	472	514	639	132	175	203	220	264	187	245	282	307	370
74	355	435	504	549	686	137	178	205	224	265	192	245	282	305	369
75	375	464	534	580	732	142	180	210	229	267	192	242	282	305	365
76	414	512	592	644	804	147	187	217	234	277	195	249	285	310	372
77	450	562	649	704	872	153	192	224	245	292	200	250	290	319	382
78	490	610	704	767	944	158	198	234	250	302	203	255	297	320	390
79	529	660	762	827	1,012	163	203	239	262	317	207	257	299	329	400
80	567	709	819	891	1,084	168	210	247	269	327	210	262	305	332	405
81	610	764	881	959	1,179	170	213	250	272	332	210	264	307	335	399
82	654	817	944	1,027	1,273	172	215	254	277	339	210	264	309	340	392
83	697	872	1,006	1,096	1,369	175	217	259	280	345	208	264	312	342	384
84	741	926	1,069	1,164	1,463	177	218	262	284	352	208	264	314	347	377
85	784	981	1,131	1,233	1,558	178	222	265	289	357	208	265	315	349	370

MedAmerica Insurance Company
165 Court Street, Rochester, New York 14647

Comprehensive Policy

Individual Rates for 10-Year Premium Payment Option
0-Day Elimination Period
Annual Premium Rates with 20% Rate Increase
100% Home Care, 20% Copayment Option
Rates per \$10 Daily Benefit

Policy Form: LTC-CD9-MA-PA
Base Rates with No Inflation Protection

Rider: LTC9-PA-SIP
Simple Inflation Protection Rider

Rider: LTC9-PA-CIP
Compound Inflation Protection Rider

<i>Issue Age</i>	Benefit Period					Benefit Period					Benefit Period				
	<u>2 Years</u>	<u>3 Years</u>	<u>4 Years</u>	<u>5 Years</u>	<u>Lifetime</u>	<u>2 Years</u>	<u>3 Years</u>	<u>4 Years</u>	<u>5 Years</u>	<u>Lifetime</u>	<u>2 Years</u>	<u>3 Years</u>	<u>4 Years</u>	<u>5 Years</u>	<u>Lifetime</u>
40	72	87	98	105	137	53	67	77	87	113	105	128	148	165	215
41	75	92	103	112	145	57	70	82	90	118	110	133	155	170	224
42	80	97	110	118	153	58	73	83	93	123	113	138	160	177	230
43	83	102	115	123	162	62	75	88	98	128	117	143	167	183	239
44	88	107	122	130	168	63	78	90	102	133	120	148	170	190	249
45	92	112	127	137	177	67	82	95	105	138	125	153	177	195	255
46	97	117	133	143	185	68	85	98	108	143	128	157	182	200	264
47	100	122	138	148	193	72	88	102	113	148	133	162	188	208	272
48	105	127	145	155	202	73	90	105	117	153	135	167	193	213	279
49	108	132	150	162	210	77	93	108	120	158	140	172	200	220	287
50	113	137	157	168	218	78	97	112	125	163	143	177	205	225	295
51	117	140	162	173	225	80	102	117	130	168	148	183	210	232	304
52	120	145	167	180	234	83	105	120	133	173	153	188	217	239	312
53	125	150	173	187	242	85	107	123	137	178	155	193	222	244	319
54	128	155	178	193	250	88	110	127	140	183	160	198	229	250	327
55	133	160	185	198	259	90	113	130	145	188	163	203	234	257	335
56	137	165	190	205	267	93	117	135	148	193	168	207	240	262	342
57	142	170	197	212	274	95	120	137	152	198	172	212	244	269	352
58	145	175	202	218	282	98	122	142	155	203	175	217	250	274	360
59	150	180	208	224	290	100	125	143	160	208	178	222	255	282	367
60	153	185	213	230	299	103	128	148	163	213	183	227	262	287	375
61	162	197	227	244	317	105	130	150	167	217	183	225	260	287	374
62	170	207	239	257	335	107	132	153	168	220	183	225	260	285	372
63	180	218	252	272	352	108	133	155	170	224	180	224	259	284	374
64	188	229	264	285	370	110	135	158	172	227	180	224	259	282	372
65	197	240	277	299	389	112	137	160	175	230	180	222	257	282	370
66	218	259	299	322	419	108	140	163	180	237	173	224	259	284	374
67	240	277	319	345	450	103	145	170	185	244	168	225	260	284	374
68	260	295	340	369	480	102	148	173	188	250	163	225	262	285	377
69	282	314	360	392	512	97	153	180	193	257	158	227	264	285	377
70	304	332	382	415	542	93	157	183	198	264	152	229	265	287	380
71	320	360	414	450	587	102	160	187	202	270	158	230	267	289	384
72	335	387	445	485	634	112	165	192	207	274	167	232	270	290	385
73	352	415	479	519	679	122	167	193	212	280	175	234	270	295	389
74	367	442	510	554	726	132	172	198	217	284	183	235	274	297	390
75	384	470	542	589	771	140	175	202	220	290	190	237	275	299	394
76	420	517	597	647	849	145	182	208	229	300	193	240	277	302	399
77	459	564	650	707	927	150	187	218	235	312	193	242	282	305	404
78	495	612	706	766	1,006	155	192	225	244	322	197	244	284	309	409
79	534	659	759	826	1,084	160	197	235	250	334	197	245	289	312	414
80	570	706	814	884	1,163	165	203	242	259	344	200	249	290	315	419
81	612	759	876	951	1,253	167	205	245	262	349	200	249	290	315	407
82	654	812	937	1,019	1,343	170	208	249	265	352	202	249	290	314	394
83	697	864	997	1,086	1,431	170	212	252	269	359	200	250	294	315	384
84	739	917	1,059	1,154	1,521	173	215	255	272	362	202	250	294	314	370
85	781	971	1,121	1,221	1,611	175	217	259	275	367	202	250	294	314	359

MedAmerica Insurance Company
165 Court Street, Rochester, New York 14647

Comprehensive Policy

Individual Rates for 10-Year Premium Payment Option
0-Day Elimination Period
Annual Premium Rates with 20% Rate Increase
100% Home Care, 0% Copayment Option
Rates per \$10 Daily Benefit

Issue Age	Policy Form: LTC-CD9-MA-PA Base Rates with No Inflation Protection					Rider: LTC9-PA-SIP Simple Inflation Protection Rider					Rider: LTC9-PA-CIP Compound Inflation Protection Rider				
	2 Years	3 Years	4 Years	5 Years	Lifetime	2 Years	3 Years	4 Years	5 Years	Lifetime	2 Years	3 Years	4 Years	5 Years	Lifetime
40	75	90	102	110	142	55	70	80	90	118	108	133	155	170	224
41	78	95	107	117	150	58	73	85	93	123	113	138	162	177	234
42	83	100	115	123	160	60	77	87	97	128	118	145	165	183	239
43	87	105	120	128	168	63	78	92	102	133	122	150	173	190	249
44	92	112	127	135	175	67	80	93	107	138	125	153	177	198	259
45	95	117	132	142	183	70	85	98	110	145	130	158	183	203	265
46	100	122	138	148	192	72	88	103	113	150	133	163	190	208	275
47	103	127	143	155	202	75	92	107	117	153	140	168	197	217	282
48	110	132	150	162	210	75	93	110	122	160	140	173	202	222	290
49	113	137	157	168	218	78	97	112	125	165	145	178	207	229	299
50	118	142	163	175	227	82	102	115	130	170	148	185	213	234	307
51	122	145	168	180	234	83	107	122	135	175	153	192	218	242	317
52	125	150	173	187	244	87	110	125	140	180	160	197	225	249	324
53	130	157	180	193	252	88	110	128	143	185	162	200	230	254	330
54	133	162	185	202	260	92	113	132	145	190	167	205	239	260	340
55	138	167	192	207	269	93	118	137	150	197	170	212	244	267	349
56	142	172	198	213	277	98	122	140	153	202	175	215	249	272	357
57	147	177	205	220	285	100	125	142	158	205	180	220	254	280	365
58	150	182	210	227	294	103	127	147	162	212	183	225	260	285	374
59	157	187	217	232	302	103	130	148	167	217	185	232	265	294	382
60	160	192	222	240	310	107	135	155	168	222	190	237	272	297	390
61	168	205	235	254	330	108	135	157	173	225	190	234	272	299	389
62	177	215	249	267	349	112	137	158	175	229	190	234	270	297	387
63	187	227	262	284	365	113	138	162	177	234	188	234	269	294	389
64	197	237	274	297	385	113	142	165	178	235	187	234	270	294	387
65	205	250	289	310	404	115	142	165	182	240	187	230	267	294	385
66	227	269	310	335	435	113	147	170	187	247	180	234	269	295	389
67	250	289	332	359	469	107	150	177	193	254	175	234	270	295	389
68	270	307	354	384	500	107	155	180	195	260	170	234	272	297	392
69	294	327	375	407	532	100	158	187	202	267	165	235	274	297	392
70	315	345	397	432	564	98	163	192	207	274	158	237	277	299	395
71	334	375	430	469	610	105	165	193	210	282	163	239	277	300	399
72	349	402	464	505	659	117	172	198	215	285	173	242	280	302	400
73	365	432	497	539	706	127	173	202	222	292	183	244	282	309	405
74	382	460	530	575	754	137	178	207	225	295	190	244	285	309	407
75	399	489	564	612	801	147	182	210	229	302	198	247	287	310	410
76	437	537	620	674	882	152	190	217	237	314	202	250	289	314	415
77	477	587	677	736	964	157	193	227	245	325	202	250	292	317	420
78	515	637	734	796	1,046	162	198	234	254	335	205	254	295	322	425
79	555	686	789	859	1,128	167	205	245	260	347	205	255	300	324	430
80	594	734	847	919	1,209	172	212	250	269	357	207	259	300	329	435
81	637	789	911	989	1,303	173	213	255	272	362	207	259	302	327	424
82	681	844	974	1,059	1,396	177	217	259	277	367	210	259	302	327	410
83	726	899	1,037	1,129	1,488	177	220	262	279	374	208	260	305	329	400
84	769	954	1,101	1,201	1,581	180	224	267	282	377	210	260	305	325	385
85	812	1,009	1,166	1,269	1,676	182	225	269	287	380	210	260	305	327	372

MedAmerica Insurance Company
165 Court Street, Rochester, New York 14647

Facility Only Policy

Individual Rates for Lifetime Premium Payment Option
90 Day Elimination Period
Annual Premium Rates with the Requested Rate Increase
Rates per \$10 Daily Benefit

<i>Issue Age</i>	Policy Form: LTC-LBP-2PA			Rider: LTC-LBP-2PA-SIP			Rider: LTC-LBP-2PA-CIP		
	Base Rates with No Inflation Protection			Simple Inflation Protection Rider			Compound Inflation Protection Rider		
	Benefit Period			Benefit Period			Benefit Period		
	<u>1 Year</u>	<u>2 Years</u>	<u>3 Years</u>	<u>1 Year</u>	<u>2 Years</u>	<u>3 Years</u>	<u>1 Year</u>	<u>2 Years</u>	<u>3 Years</u>
<45	19	24	26	5	7	9	16	26	33
45	21	24	26	5	9	12	16	28	38
46	21	26	28	5	9	12	19	28	40
47	21	26	31	7	12	14	21	33	40
48	24	28	33	7	12	14	21	33	42
49	24	31	33	9	12	19	24	35	47
50	26	31	35	9	16	19	24	40	52
51	26	33	40	12	16	19	26	42	52
52	28	35	42	12	19	24	26	45	56
53	31	38	45	12	21	26	28	47	61
54	31	42	49	14	21	28	31	47	63
55	33	45	52	16	24	33	33	52	68
56	35	47	56	19	28	35	35	56	73
57	38	52	61	19	31	40	38	59	78
58	42	56	68	19	33	42	38	63	82
59	45	61	75	24	38	47	42	68	87
60	49	68	82	24	40	52	42	71	92
61	54	75	92	28	45	61	47	78	103
62	59	82	103	33	54	68	54	87	113
63	63	94	115	38	59	78	61	94	125
64	71	103	129	42	66	87	66	106	136
65	80	118	148	47	75	96	71	115	148
66	89	134	167	52	82	108	78	122	162
67	101	150	188	54	89	118	82	134	174
68	113	169	212	59	99	129	87	143	188
69	127	193	242	66	108	141	94	153	200
70	141	219	275	73	118	155	103	162	214
71	148	228	289	73	118	155	103	162	214
72	167	256	324	75	125	165	106	167	219
73	186	287	362	80	132	176	106	174	230
74	204	317	402	87	141	188	113	183	240
75	228	355	449	89	148	197	115	188	249
76	251	392	498	96	157	209	120	197	261
77	277	435	550	99	165	221	125	202	270
78	306	477	604	103	172	233	127	212	280
79	331	519	658	108	181	242	129	219	291
80	334	522	660	108	181	242	129	219	291
81	360	564	712	108	183	247	132	219	291
82	388	609	766	110	183	247	132	221	296
83	418	653	823	110	190	256	132	221	296
84	451	707	888	115	195	263	134	223	301
85	486	764	959	120	202	273	139	230	310

MedAmerica Insurance Company
165 Court Street, Rochester, New York 14647

Facility Only Policy

Individual Rates for Lifetime Premium Payment Option
0-Day Elimination Period
Annual Premium Rates with the Requested Rate Increase
Rates per \$10 Daily Benefit

Policy Form: LTC-LBP8-MA-PA
Base Rates with No Inflation Protection

Rider: LBP8-PA-SIP
Simple Inflation Protection Rider

Rider: LBP8-PA-CIP
Compound Inflation Protection Rider

Issue Age	Benefit Period					Benefit Period					Benefit Period				
	2 Years	3 Years	4 Years	5 Years	Lifetime	2 Years	3 Years	4 Years	5 Years	Lifetime	2 Years	3 Years	4 Years	5 Years	Lifetime
<40	31	35	40	45	84	21	26	26	26	64	31	40	45	47	104
40	35	40	45	47	88	24	26	31	35	76	31	42	49	54	120
41	38	42	47	52	96	26	31	35	38	80	35	49	56	61	132
42	40	47	52	56	108	28	31	38	42	80	40	54	61	68	136
43	42	49	56	61	116	31	35	40	45	88	45	59	66	73	148
44	47	54	61	66	124	31	38	42	47	92	47	63	73	80	160
45	49	59	66	71	132	33	38	45	52	100	52	68	78	87	172
46	52	61	71	75	140	33	42	47	54	104	56	73	82	92	184
47	54	66	73	80	148	35	42	52	56	108	61	78	89	99	192
48	59	68	78	85	156	35	47	54	59	116	63	82	94	106	203
49	61	73	82	89	164	38	47	56	63	120	66	87	101	113	215
50	63	78	87	94	172	40	49	59	66	124	71	92	106	118	227
51	68	80	92	99	180	40	54	61	68	132	73	96	110	125	235
52	71	85	94	103	192	42	54	63	73	132	78	101	118	132	243
53	73	87	99	108	200	45	59	66	75	140	82	108	122	136	255
54	75	92	103	113	207	47	59	68	78	144	87	110	127	143	267
55	80	96	108	118	215	47	61	71	80	148	89	115	134	150	279
56	85	103	118	129	235	52	66	75	85	156	94	120	136	153	287
57	92	110	127	139	251	54	71	80	89	168	96	125	141	160	299
58	96	120	136	148	271	59	73	82	94	176	101	127	146	165	307
59	103	127	143	160	291	61	78	89	99	184	103	132	153	169	315
60	110	134	153	169	311	61	82	94	103	192	103	136	157	174	323
61	120	148	169	188	343	68	87	101	110	211	113	143	165	183	343
62	132	162	186	207	379	73	94	108	120	223	118	150	174	193	359
63	143	176	202	226	411	78	101	115	127	239	122	157	181	202	379
64	155	190	219	242	447	82	108	122	136	255	127	165	190	214	395
65	165	204	235	261	479	87	113	129	143	271	134	172	197	223	415
66	186	230	266	294	543	94	122	139	155	291	141	183	209	233	435
67	204	256	294	327	602	101	132	150	167	315	150	193	221	244	463
68	226	282	324	360	662	108	139	160	179	339	155	202	233	256	487
69	244	308	353	392	722	115	148	172	190	359	165	212	244	270	511
70	266	334	383	425	790	122	157	181	202	375	172	221	254	284	531
71	298	376	432	482	886	132	167	200	228	407	181	233	266	294	559
72	334	421	482	533	990	139	176	221	259	427	188	240	277	310	579
73	369	463	533	595	1,093	146	188	237	280	451	195	251	287	315	602
74	402	508	583	644	1,193	155	195	259	315	475	202	259	298	334	626
75	439	552	635	705	1,309	160	202	275	336	487	209	266	308	343	638
76	486	613	705	783	1,448	169	219	282	338	523	216	280	322	357	670
77	536	677	780	867	1,600	179	228	284	334	547	223	289	329	362	694
78	585	745	853	942	1,756	186	233	289	341	571	233	294	341	385	714
79	635	804	926	1,032	1,907	195	249	291	327	595	240	306	350	388	738
80	696	877	1,008	1,121	2,083	195	249	289	322	599	240	306	355	395	738
81	752	954	1,097	1,217	2,266	209	266	306	341	638	249	320	369	411	770
82	815	1,041	1,199	1,332	2,474	219	273	310	343	658	259	327	374	414	786
83	888	1,128	1,297	1,441	2,685	219	280	324	362	674	259	331	381	423	794
84	956	1,215	1,396	1,546	2,893	223	287	334	376	690	261	336	390	439	806
85	1,022	1,300	1,495	1,659	3,100	233	298	343	385	710	268	343	397	444	822

MedAmerica Insurance Company
165 Court Street, Rochester, New York 14647

Facility Only Policy

Individual Rates for 10-Year Premium Payment Option
0-Day Elimination Period
Annual Premium Rates with the Requested Rate Increase
Rates per \$10 Daily Benefit

Policy Form: LTC-LBP8-MA-PA
Base Rates with No Inflation Protection

Rider: LBP8-PA-SIP
Simple Inflation Protection Rider

Rider: LBP8-PA-CIP
Compound Inflation Protection Rider

Issue Age	Benefit Period					Benefit Period					Benefit Period				
	2 Years	3 Years	4 Years	5 Years	Lifetime	2 Years	3 Years	4 Years	5 Years	Lifetime	2 Years	3 Years	4 Years	5 Years	Lifetime
40	61	75	85	92	172	42	52	61	71	144	56	85	96	108	231
41	66	82	92	101	188	45	56	66	75	152	63	92	108	120	251
42	71	89	101	110	203	49	59	71	80	164	73	101	118	129	271
43	78	96	108	120	219	52	63	75	85	172	78	110	127	141	291
44	82	101	115	129	235	54	71	82	89	180	85	120	139	153	311
45	89	108	125	136	251	56	75	85	96	192	92	129	148	165	331
46	94	115	132	146	267	61	78	89	101	200	99	139	157	176	351
47	99	122	139	155	283	63	82	96	106	211	108	146	169	186	371
48	106	129	148	162	299	66	87	99	113	219	113	155	179	200	391
49	110	136	155	172	315	71	89	106	118	227	120	165	188	209	411
50	115	143	162	181	331	73	94	110	122	239	129	172	200	221	431
51	122	150	172	188	347	75	99	115	129	247	134	181	209	235	451
52	127	157	179	197	363	80	103	120	134	259	143	188	221	244	471
53	134	165	186	207	379	80	106	125	139	267	148	197	230	256	495
54	139	172	195	214	395	85	110	129	146	275	155	207	240	268	515
55	143	179	202	223	411	89	115	134	150	287	165	214	251	280	535
56	155	190	219	240	443	92	122	141	157	303	167	223	256	287	547
57	165	204	233	259	475	99	129	148	165	315	174	228	263	294	563
58	176	219	249	275	507	101	134	155	174	331	179	233	270	301	575
59	186	230	263	291	539	108	141	165	181	347	183	240	277	310	591
60	197	244	280	310	575	110	148	169	188	359	188	247	284	317	602
61	209	263	301	331	614	120	153	176	197	375	195	251	289	324	618
62	223	280	320	355	658	125	162	186	204	391	200	259	298	331	630
63	237	298	341	378	702	129	167	193	214	407	204	263	306	338	642
64	251	315	362	400	742	134	176	200	223	427	209	273	313	348	662
65	266	334	383	423	786	141	183	209	233	443	214	280	320	357	678
66	287	362	414	458	854	148	190	219	242	459	219	284	327	362	690
67	308	388	447	494	918	153	200	226	251	483	226	291	334	371	706
68	329	416	477	529	986	160	207	237	263	499	230	298	343	381	722
69	353	444	510	564	1,053	165	214	244	273	519	235	306	350	390	738
70	374	472	541	599	1,117	172	223	256	284	543	242	313	360	400	762
71	407	512	590	653	1,217	176	230	273	310	551	244	317	360	402	762
72	439	555	637	705	1,317	183	235	289	338	567	247	320	364	407	770
73	472	597	684	759	1,412	188	242	308	364	587	251	324	371	411	782
74	505	639	733	813	1,512	195	249	324	388	602	256	329	376	416	794
75	541	682	780	865	1,612	200	256	343	416	618	259	334	383	425	806
76	585	740	848	940	1,752	204	261	336	402	630	261	336	383	425	810
77	630	797	914	1,015	1,891	209	268	334	390	646	263	341	388	428	818
78	677	855	982	1,088	2,031	214	275	331	381	662	266	343	392	435	826
79	721	914	1,048	1,163	2,171	219	282	331	371	678	270	348	397	439	838
80	766	973	1,116	1,238	2,310	226	289	329	364	694	275	353	402	447	850
81	830	1,053	1,208	1,340	2,502	228	291	336	374	706	273	353	404	451	850
82	891	1,133	1,300	1,443	2,693	233	296	343	381	714	275	353	409	454	854
83	954	1,213	1,391	1,546	2,885	235	301	350	388	726	277	355	411	456	858
84	1,015	1,293	1,485	1,647	3,080	240	306	355	397	738	280	357	414	463	858
85	1,079	1,372	1,577	1,751	3,272	244	313	362	407	750	282	360	418	468	866

MedAmerica Insurance Company
165 Court Street, Rochester, New York 14647

Policy Form: LTC-CD5-2PA

Comprehensive Policy

Individual Rates for Lifetime Premium Payment Option
 90-Day Elimination Period

Premiums for Base Policy with No Inflation Protection
 Annual Premium Rates with the Requested Rate Increase
 Rates per \$20 NCF

Issue Age	2 Years Nursing Home with 2 Years Home Care at:		3 Years Nursing Home with 3 Years Home Care at:		5 Years Nursing Home with 5 Years Home Care at:		Unlimited Nursing Home with 5 Years Home Care at:	
	50%	100%	50%	100%	50%	100%	50%	100%
<40	61	92	75	115	96	148	180	271
40	66	96	80	122	101	157	192	287
41	68	101	85	129	108	167	203	303
42	73	108	89	136	113	176	215	323
43	75	113	94	143	120	188	231	343
44	80	120	101	153	127	200	243	363
45	85	127	106	162	136	212	259	387
46	89	134	113	172	143	223	275	411
47	94	143	120	181	153	237	295	439
48	101	150	127	193	162	251	315	467
49	106	160	134	204	172	266	335	495
50	113	169	143	216	183	282	359	527
51	120	181	153	230	195	301	383	563
52	129	193	162	244	209	320	411	599
53	136	204	174	261	223	341	443	642
54	146	219	186	280	240	362	475	686
55	157	233	197	298	256	388	511	734
56	167	247	214	317	275	414	551	786
57	179	266	228	338	296	442	595	842
58	193	282	247	362	317	470	642	902
59	207	303	263	388	341	503	694	970
60	223	324	284	416	369	541	750	1,045
61	244	353	313	451	402	585	826	1,137
62	268	383	341	489	439	632	910	1,237
63	294	416	374	531	482	686	1,001	1,349
64	324	454	411	576	529	743	1,101	1,468
65	364	505	461	639	592	820	1,241	1,628
66	402	548	508	693	653	891	1,369	1,776
67	442	597	559	754	719	968	1,512	1,943
68	484	649	613	820	790	1,050	1,668	2,115
69	538	712	682	900	877	1,154	1,855	2,330
70	597	783	757	987	971	1,262	2,059	2,558
71	618	799	780	1,008	1,001	1,288	2,119	2,609
72	682	874	860	1,100	1,102	1,401	2,330	2,845
73	747	949	945	1,196	1,208	1,520	2,558	3,092
74	818	1,027	1,032	1,293	1,321	1,643	2,797	3,352
75	895	1,116	1,130	1,403	1,448	1,781	3,060	3,635
76	975	1,206	1,234	1,513	1,577	1,922	3,328	3,918
77	1,055	1,293	1,335	1,622	1,706	2,054	3,579	4,182
78	1,137	1,379	1,441	1,727	1,835	2,183	3,834	4,437
79	1,217	1,462	1,544	1,831	1,962	2,308	4,066	4,664
80	1,217	1,462	1,544	1,831	1,962	2,308	4,066	4,664
81	1,288	1,516	1,629	1,892	2,049	2,359	4,186	4,720
82	1,372	1,603	1,737	2,000	2,174	2,482	4,405	4,936
83	1,469	1,699	1,852	2,117	2,303	2,611	4,624	5,155
84	1,575	1,807	1,983	2,254	2,458	2,768	4,892	5,426
85	1,694	1,932	2,129	2,409	2,632	2,949	5,191	5,742

MedAmerica Insurance Company
165 Court Street, Rochester, New York 14647

Rider: LTC-CD5-2PA-SIP

Comprehensive Policy

Individual Rates for Lifetime Premium Payment Option

90-Day Elimination Period

Rider Premium for Simple Inflation Protection

Annual Premium Rates with the Requested Rate Increase

Rates per \$20 NCF

Issue Age	2 Years Nursing Home with 2 Years Home Care at:		3 Years Nursing Home with 3 Years Home Care at:		5 Years Nursing Home with 5 Years Home Care at:		Unlimited Nursing Home with 5 Years Home Care at:	
	50%	100%	50%	100%	50%	100%	50%	100%
<40	31	47	40	66	56	96	116	180
40	31	52	42	71	61	101	124	192
41	33	56	45	73	63	108	132	207
42	35	59	47	80	71	115	144	219
43	38	63	52	85	73	122	152	235
44	40	66	54	89	80	129	164	251
45	42	71	59	94	82	136	176	267
46	47	75	61	101	89	146	188	283
47	49	78	66	108	94	153	200	299
48	52	85	71	115	101	162	215	319
49	56	89	78	122	110	174	231	343
50	61	96	82	129	115	186	251	367
51	66	101	87	139	125	195	271	391
52	68	106	94	146	132	207	291	423
53	75	115	101	155	143	221	315	447
54	80	120	108	165	153	235	343	479
55	85	129	118	174	165	249	367	515
56	94	139	125	188	176	263	399	551
57	101	146	134	200	188	280	431	591
58	108	157	143	212	202	301	467	634
59	115	165	155	223	216	317	507	678
60	125	176	165	237	230	334	551	722
61	136	193	181	259	256	362	610	794
62	150	207	200	280	280	392	670	862
63	165	226	219	301	306	421	734	934
64	176	242	235	324	331	454	806	1,009
65	195	261	261	348	364	489	882	1,097
66	212	282	280	374	392	522	958	1,181
67	228	298	301	400	421	555	1,037	1,265
68	244	317	324	421	454	588	1,113	1,349
69	263	341	350	451	489	627	1,209	1,448
70	284	360	378	482	529	670	1,301	1,548
71	280	355	374	472	522	653	1,293	1,524
72	294	369	392	491	550	684	1,365	1,596
73	310	385	414	510	578	712	1,432	1,668
74	322	400	432	531	606	740	1,504	1,740
75	338	416	454	552	635	768	1,580	1,815
76	355	430	475	573	667	799	1,652	1,891
77	367	442	494	590	691	823	1,716	1,943
78	381	454	512	609	719	846	1,768	1,991
79	395	465	531	623	743	865	1,811	2,027
80	395	465	531	623	743	865	1,811	2,027
81	383	449	519	602	721	830	1,724	1,971
82	397	461	533	616	740	844	1,748	1,935
83	409	472	550	630	761	862	1,772	1,955
84	423	486	566	649	783	884	1,807	1,987
85	437	501	588	667	808	909	1,847	2,023

MedAmerica Insurance Company
165 Court Street, Rochester, New York 14647

Rider: LTC-CD5-2PA-CIP

Comprehensive Policy

Individual Rates for Lifetime Premium Payment Option
 90-Day Elimination Period

Rider Premium for Compound Inflation Protection
 Annual Premium Rates with the Requested Rate Increase
 Rates per \$20 NCF

Issue Age	2 Years Nursing Home with 2 Years Home Care at:		3 Years Nursing Home with 3 Years Home Care at:		5 Years Nursing Home with 5 Years Home Care at:		Unlimited Nursing Home with 5 Years Home Care at:	
	50%	100%	50%	100%	50%	100%	50%	100%
<40	78	118	103	160	146	228	319	459
40	80	125	108	167	153	237	335	479
41	85	129	113	174	157	247	351	503
42	87	134	118	181	167	259	371	527
43	94	141	125	190	174	268	387	547
44	96	146	129	197	183	277	407	571
45	101	153	136	204	190	289	427	595
46	106	160	141	212	200	301	447	622
47	110	165	146	221	207	313	467	646
48	115	172	153	230	216	324	491	674
49	122	179	162	240	228	338	519	706
50	127	186	169	249	237	353	543	738
51	132	193	176	259	247	364	571	766
52	136	200	183	270	259	378	595	802
53	146	209	193	280	270	392	622	834
54	150	216	202	289	280	409	654	870
55	157	223	212	301	294	421	686	906
56	165	235	219	313	306	437	722	946
57	174	242	230	327	320	454	758	990
58	181	254	240	338	336	472	798	1,033
59	190	263	251	350	350	491	838	1,077
60	200	273	263	364	364	508	882	1,121
61	216	294	284	388	397	541	958	1,205
62	233	313	308	416	425	578	1,029	1,289
63	249	334	329	442	456	611	1,109	1,377
64	266	353	353	468	489	649	1,193	1,464
65	289	376	381	498	526	689	1,285	1,568
66	306	400	404	526	559	726	1,373	1,664
67	324	418	428	552	592	761	1,460	1,752
68	345	437	454	578	625	797	1,544	1,839
69	367	463	482	609	665	837	1,648	1,947
70	388	484	510	639	705	881	1,748	2,055
71	376	468	496	618	686	855	1,708	2,003
72	388	479	512	632	710	872	1,772	2,055
73	400	491	529	649	736	895	1,835	2,119
74	411	503	548	665	759	919	1,903	2,183
75	425	517	566	682	785	942	1,975	2,254
76	439	529	583	700	813	968	2,039	2,318
77	451	538	602	712	834	987	2,095	2,362
78	461	548	616	726	860	1,006	2,139	2,398
79	472	557	632	738	877	1,020	2,171	2,422
80	472	557	632	738	877	1,020	2,171	2,422
81	454	529	609	703	841	968	2,051	2,366
82	465	536	618	712	855	973	2,051	2,262
83	472	545	632	724	872	987	2,063	2,270
84	486	557	646	738	891	1,006	2,091	2,294
85	498	569	665	757	914	1,029	2,119	2,322

MedAmerica Insurance Company
165 Court Street, Rochester, New York 14647

Comprehensive Policy

Individual Rates for Lifetime Premium Payment Option
0-Day Elimination Period
Annual Premium Rates with the Requested Rate Increase
Rates per \$10 Daily Benefit

Policy Form: LTC-CD8-MA-PA
Base Rates with No Inflation Protection

Rider: LTC8-PA-SIP
Simple Inflation Protection Rider

Rider: LTC8-PA-CIP
Compound Inflation Protection Rider

Issue Age	Benefit Period					Benefit Period					Benefit Period				
	2 Years	3 Years	4 Years	5 Years	Lifetime	2 Years	3 Years	4 Years	5 Years	Lifetime	2 Years	3 Years	4 Years	5 Years	Lifetime
<40	71	87	101	113	219	40	56	59	61	144	73	96	113	127	255
40	75	96	110	125	239	45	61	63	66	160	80	106	125	141	283
41	80	99	115	129	247	47	63	66	68	168	82	110	129	148	291
42	82	103	120	134	255	49	66	68	71	172	87	115	134	153	303
43	85	106	122	139	267	52	68	71	73	180	89	118	139	157	315
44	87	110	127	143	275	52	71	73	75	184	92	122	143	162	323
45	92	113	132	148	283	54	73	75	78	192	96	127	148	169	335
46	94	118	136	153	291	56	73	78	80	196	99	129	153	174	347
47	96	120	141	157	303	56	75	80	82	203	101	134	157	179	355
48	99	125	143	162	311	59	78	82	85	207	103	139	162	183	367
49	101	127	148	167	319	61	80	85	87	215	108	143	167	190	379
50	106	132	153	172	327	63	82	87	92	219	110	146	172	195	387
51	108	134	157	174	339	63	85	89	94	227	113	150	176	200	399
52	110	139	160	179	347	66	87	92	96	231	118	155	181	207	411
53	113	141	165	183	355	68	89	94	99	239	120	157	186	212	419
54	115	146	169	188	363	71	92	96	101	243	122	162	190	216	431
55	120	148	174	193	375	71	94	99	103	251	125	167	195	221	443
56	129	162	188	212	407	75	99	103	108	263	129	172	202	228	455
57	139	176	204	228	443	78	103	108	113	275	132	176	207	235	467
58	150	188	221	247	479	82	108	113	118	287	136	179	212	240	479
59	160	202	235	263	515	85	113	118	122	299	139	183	219	247	491
60	169	216	251	282	551	89	118	122	127	311	143	188	223	254	503
61	186	235	275	308	602	92	125	134	141	331	146	197	233	263	523
62	200	256	298	336	654	101	132	146	157	351	157	204	242	273	543
63	216	275	322	364	706	103	139	157	172	371	160	212	251	282	563
64	230	296	345	390	762	113	148	169	188	387	169	221	259	294	587
65	244	315	371	418	814	118	155	181	202	407	172	228	268	303	606
66	270	345	407	458	894	122	165	193	216	431	176	237	280	317	626
67	291	376	442	498	974	132	172	202	228	459	186	244	291	331	662
68	315	407	477	538	1,057	136	181	214	240	479	190	256	301	341	682
69	338	437	512	578	1,137	141	190	223	254	507	197	266	313	355	710
70	360	468	550	618	1,221	150	200	235	266	527	209	277	327	371	734
71	397	515	604	679	1,341	155	207	244	277	555	212	282	334	378	758
72	432	562	660	743	1,464	165	216	256	289	579	221	294	343	388	778
73	470	611	714	804	1,584	169	226	266	301	606	223	298	353	400	806
74	505	658	771	865	1,708	176	235	277	313	630	233	308	364	414	826
75	541	705	825	928	1,839	183	244	289	327	646	237	317	374	423	846
76	590	768	902	1,018	2,007	190	256	298	334	678	244	327	381	428	870
77	639	834	978	1,100	2,179	195	261	310	350	706	247	329	392	447	894
78	686	898	1,055	1,187	2,354	204	273	322	364	730	254	341	402	456	914
79	736	964	1,130	1,271	2,526	212	282	334	378	758	261	348	414	470	938
80	783	1,032	1,215	1,370	2,717	216	289	336	376	766	266	355	421	477	950
81	853	1,123	1,318	1,483	2,957	221	298	353	400	802	268	360	428	486	970
82	924	1,217	1,431	1,612	3,212	228	306	362	407	818	273	364	430	489	982
83	994	1,311	1,542	1,739	3,463	233	313	369	416	842	275	369	437	494	998
84	1,065	1,405	1,654	1,868	3,719	237	322	376	423	862	277	374	442	501	1,009
85	1,135	1,502	1,765	1,990	3,974	242	327	385	437	882	280	378	447	505	1,021

MedAmerica Insurance Company
165 Court Street, Rochester, New York 14647

Comprehensive Policy

Individual Rates for 10-Year Premium Payment Option
0-Day Elimination Period
Annual Premium Rates with the Requested Rate Increase
Rates per \$10 Daily Benefit

Policy Form: LTC-CD8-MA-PA
Base Rates with No Inflation Protection

Rider: LTC8-PA-SIP
Simple Inflation Protection Rider

Rider: LTC8-PA-CIP
Compound Inflation Protection Rider

Issue Age	Benefit Period					Lifetime	Benefit Period					Lifetime	Benefit Period					Lifetime
	2 Years	3 Years	4 Years	5 Years	2 Years		3 Years	4 Years	5 Years	2 Years	3 Years		4 Years	5 Years				
40	134	172	200	223	439	80	108	115	120	291	141	190	226	256	519			
41	139	176	207	233	455	82	113	118	125	303	146	197	235	266	535			
42	143	183	214	242	471	87	115	122	129	315	150	204	242	275	555			
43	148	190	223	249	487	89	120	127	132	327	157	212	251	284	575			
44	153	197	230	259	503	92	125	132	136	335	162	219	261	296	595			
45	160	202	237	266	519	94	129	136	141	347	167	226	268	306	614			
46	165	209	244	275	535	99	132	139	146	359	172	233	277	315	634			
47	169	216	251	282	551	101	136	143	150	371	179	240	284	324	654			
48	174	223	259	291	567	103	141	148	155	379	183	247	294	334	670			
49	179	228	268	301	583	106	146	153	160	391	188	254	303	343	690			
50	183	235	275	308	602	110	148	157	165	403	193	261	310	353	710			
51	188	242	282	317	618	113	153	162	169	415	200	268	320	362	730			
52	193	247	289	324	634	115	157	165	174	423	204	275	327	371	750			
53	200	254	296	334	650	120	160	169	176	435	209	282	336	381	770			
54	204	261	306	341	666	122	165	174	181	447	214	289	345	390	790			
55	209	268	313	350	682	125	169	179	186	459	221	296	353	402	806			
56	223	287	336	378	738	129	176	183	193	475	223	301	360	407	818			
57	240	308	360	404	790	134	181	190	200	491	228	308	364	414	830			
58	256	329	383	432	846	141	188	197	204	507	233	313	371	421	842			
59	270	348	409	458	898	146	195	204	212	527	237	317	378	428	858			
60	287	369	432	486	954	150	202	212	219	543	240	322	385	437	870			
61	303	392	461	517	1,013	155	207	223	237	559	244	327	388	442	882			
62	322	416	489	548	1,077	160	214	237	259	579	247	331	395	447	894			
63	341	439	515	580	1,137	165	221	251	277	595	251	338	400	454	910			
64	357	463	543	611	1,201	172	228	266	296	614	256	343	407	461	926			
65	376	486	571	642	1,265	176	235	280	315	634	261	350	414	468	942			
66	400	517	606	684	1,345	181	242	287	324	650	263	355	418	475	950			
67	423	548	644	724	1,428	186	249	296	334	670	268	360	425	479	966			
68	447	580	682	766	1,512	193	256	303	343	690	273	364	430	486	978			
69	470	611	717	806	1,596	197	266	313	355	710	277	371	439	496	994			
70	491	642	754	848	1,680	204	273	322	364	730	282	378	447	505	1,013			
71	526	686	806	907	1,792	207	277	327	369	742	282	378	447	505	1,013			
72	559	731	855	964	1,907	209	282	334	376	754	282	378	449	508	1,017			
73	592	773	907	1,022	2,023	214	287	338	383	770	284	381	451	510	1,025			
74	627	818	959	1,079	2,139	219	291	345	390	786	287	385	454	515	1,033			
75	660	862	1,011	1,137	2,250	223	298	353	400	802	289	388	458	519	1,045			
76	703	919	1,079	1,215	2,406	226	303	357	404	814	289	388	461	519	1,045			
77	745	978	1,147	1,290	2,562	230	308	364	411	826	291	390	461	522	1,049			
78	790	1,034	1,215	1,368	2,717	233	315	371	418	842	291	392	463	526	1,053			
79	832	1,093	1,283	1,445	2,869	237	320	378	428	858	294	395	468	529	1,061			
80	874	1,149	1,351	1,520	3,024	242	327	385	435	878	296	397	472	533	1,073			
81	938	1,236	1,452	1,636	3,260	244	329	388	439	882	296	397	470	531	1,069			
82	1,003	1,323	1,556	1,751	3,495	247	331	392	444	894	294	397	470	531	1,069			
83	1,067	1,410	1,657	1,868	3,727	249	336	397	449	906	294	397	470	531	1,073			
84	1,130	1,497	1,760	1,983	3,962	251	341	402	454	918	296	397	470	531	1,073			
85	1,196	1,582	1,861	2,099	4,193	254	343	407	461	930	296	400	472	533	918			

MedAmerica Insurance Company
165 Court Street, Rochester, New York 14647

Comprehensive Policy

Individual Rates for Lifetime Premium Payment Option
0-Day Elimination Period
Annual Premium Rates with the Requested Rate Increase
50% Home Care, 20% Copayment Option
Rates per \$10 Daily Benefit

Policy Form: LTC-CD9-MA-PA
Base Rates with No Inflation Protection

Rider: LTC9-PA-SIP
Simple Inflation Protection Rider

Rider: LTC9-PA-CIP
Compound Inflation Protection Rider

Issue Age	Benefit Period					Benefit Period					Benefit Period				
	2 Years	3 Years	4 Years	5 Years	Lifetime	2 Years	3 Years	4 Years	5 Years	Lifetime	2 Years	3 Years	4 Years	5 Years	Lifetime
<40	45	52	59	63	132	26	33	40	42	96	47	59	68	73	180
40	47	56	63	71	148	28	35	42	42	96	54	66	78	80	192
41	49	59	68	75	156	31	38	45	45	104	56	71	80	85	200
42	52	63	71	78	164	33	40	47	49	108	61	73	87	89	207
43	56	66	75	82	172	33	42	49	52	116	61	78	89	94	215
44	59	71	80	87	184	35	42	52	54	116	63	78	92	99	219
45	61	73	82	92	192	38	47	56	56	124	66	82	96	101	227
46	63	78	87	94	200	40	47	56	61	128	71	85	101	108	235
47	66	80	92	99	207	42	49	59	63	136	73	89	103	113	243
48	71	85	94	103	215	40	52	63	63	140	73	92	108	115	255
49	73	87	99	108	223	42	54	66	66	148	75	96	110	120	263
50	75	92	103	110	231	45	54	66	71	152	80	99	115	127	271
51	78	94	106	115	239	47	59	71	73	160	82	103	120	129	279
52	80	99	110	120	251	49	59	73	75	160	85	103	122	134	283
53	85	101	115	125	259	49	61	75	78	168	85	108	125	139	291
54	87	106	118	127	267	52	63	78	82	172	89	110	132	143	299
55	89	108	122	132	275	54	66	80	85	180	92	115	134	148	307
56	96	118	132	143	295	56	71	85	89	192	96	120	141	157	319
57	103	125	141	153	319	59	75	89	94	196	99	127	148	169	331
58	108	134	153	165	339	63	80	92	99	207	106	129	150	176	343
59	115	141	162	174	363	66	85	96	103	211	108	136	157	188	355
60	122	150	172	186	383	68	89	101	108	223	113	141	165	197	367
61	132	162	186	200	411	71	92	106	115	235	115	146	169	200	379
62	141	174	197	214	443	75	96	113	120	247	120	148	176	202	391
63	148	183	212	230	471	80	101	115	125	259	125	155	179	202	403
64	157	195	223	244	503	85	106	122	129	271	129	157	186	204	415
65	167	207	237	259	531	87	108	127	136	283	132	162	190	207	427
66	188	233	268	291	599	94	115	136	146	303	139	172	200	219	451
67	209	259	296	322	662	99	125	146	157	327	146	181	212	233	479
68	228	282	327	355	730	108	134	155	169	351	153	193	223	242	503
69	249	308	355	385	794	113	143	165	181	375	160	202	235	256	531
70	270	334	385	418	862	120	150	174	190	395	167	212	244	268	555
71	303	374	430	468	970	125	157	183	200	415	172	219	254	277	575
72	334	414	475	517	1,073	132	165	193	209	439	179	226	263	287	599
73	367	451	522	566	1,181	136	174	202	221	463	183	233	270	294	618
74	397	491	566	616	1,285	143	181	212	230	487	190	240	280	303	642
75	430	531	611	665	1,393	148	188	221	240	507	195	247	289	313	662
76	484	599	691	752	1,572	160	202	237	256	535	207	261	306	329	686
77	541	665	773	841	1,752	169	219	251	270	567	216	277	317	343	710
78	595	733	853	928	1,927	179	233	266	289	599	226	291	334	362	742
79	651	799	935	1,018	2,107	188	249	280	303	630	235	308	345	376	766
80	705	867	1,015	1,105	2,286	200	263	296	320	658	247	322	362	392	790
81	768	947	1,107	1,206	2,522	204	270	306	329	682	251	327	367	397	810
82	834	1,029	1,201	1,307	2,757	209	275	315	338	706	254	329	371	404	826
83	898	1,109	1,293	1,405	2,993	214	284	324	350	730	256	336	376	411	846
84	964	1,191	1,387	1,506	3,228	219	289	334	360	754	259	338	381	418	862
85	1,027	1,271	1,478	1,607	3,463	223	296	343	369	778	263	343	385	423	882

MedAmerica Insurance Company
165 Court Street, Rochester, New York 14647

Comprehensive Policy

Individual Rates for Lifetime Premium Payment Option
0-Day Elimination Period
Annual Premium Rates with the Requested Rate Increase
50% Home Care, 0% Copayment Option
Rates per \$10 Daily Benefit

Policy Form: LTC-CD9-MA-PA
Base Rates with No Inflation Protection

Rider: LTC9-PA-SIP
Simple Inflation Protection Rider

Rider: LTC9-PA-CIP
Compound Inflation Protection Rider

Issue Age	Benefit Period					Lifetime	Benefit Period					Lifetime	Benefit Period					Lifetime
	2 Years	3 Years	4 Years	5 Years	Lifetime		2 Years	3 Years	4 Years	5 Years	Lifetime		2 Years	3 Years	4 Years	5 Years	Lifetime	
<40	47	54	61	66	136	26	33	42	45	100	49	61	71	75	188			
40	49	59	66	73	152	28	38	45	45	100	56	68	80	85	200			
41	52	61	71	78	164	31	40	47	47	108	59	73	85	89	207			
42	54	66	73	80	172	33	42	49	52	112	63	75	92	94	215			
43	59	68	78	85	180	35	45	52	54	120	63	80	94	99	223			
44	61	73	82	89	192	38	45	54	56	120	66	82	96	103	227			
45	63	75	85	96	200	40	49	59	59	128	68	87	101	103	235			
46	66	80	89	99	207	42	49	59	63	132	73	89	106	110	243			
47	68	82	96	103	215	45	52	61	66	140	75	94	106	118	255			
48	73	87	99	108	223	42	54	66	66	148	75	96	110	120	267			
49	75	89	103	113	231	45	56	68	68	156	80	101	115	125	275			
50	78	96	108	115	239	47	54	68	73	160	85	101	120	132	283			
51	80	99	110	120	247	49	61	73	75	168	87	106	125	134	291			
52	82	103	115	125	263	52	61	75	78	164	89	106	127	139	291			
53	87	106	120	129	271	52	63	78	80	172	89	113	129	143	303			
54	89	110	122	132	279	54	66	80	87	176	94	115	136	150	311			
55	94	113	127	136	287	54	68	82	89	188	94	120	139	155	319			
56	101	122	136	148	307	59	73	89	94	200	99	125	148	165	331			
57	108	129	146	160	331	61	78	94	96	203	101	132	155	174	347			
58	113	139	160	172	351	66	85	94	101	215	110	134	155	183	359			
59	120	146	169	181	379	68	89	99	108	219	113	143	162	195	367			
60	127	157	179	193	399	71	92	106	113	231	118	146	172	207	383			
61	136	169	193	207	427	73	94	110	120	243	120	150	176	209	395			
62	146	181	204	223	459	80	101	118	125	259	125	153	183	209	407			
63	155	190	221	240	491	82	106	120	129	267	129	162	186	209	419			
64	165	202	233	254	523	87	110	127	134	283	134	165	193	214	431			
65	174	216	247	268	551	89	110	132	143	295	136	167	197	216	447			
66	195	242	280	303	622	99	120	141	150	315	146	179	207	228	471			
67	219	268	308	334	690	101	132	153	165	339	150	188	221	242	495			
68	237	294	341	369	758	113	139	160	176	367	157	200	230	251	523			
69	259	320	369	402	826	118	150	172	188	391	167	212	244	266	551			
70	282	348	402	435	898	125	155	181	197	411	172	219	254	280	575			
71	315	388	447	486	1,009	129	165	190	207	431	179	228	266	289	595			
72	348	430	494	538	1,117	136	172	200	216	455	186	235	275	298	622			
73	381	470	543	590	1,229	143	181	209	228	479	190	242	280	306	642			
74	414	510	590	639	1,337	148	188	219	240	507	197	249	289	317	666			
75	447	552	635	691	1,448	155	195	230	249	527	204	256	301	327	690			
76	503	623	719	783	1,636	167	212	247	266	555	216	273	317	341	714			
77	562	691	804	874	1,823	176	228	261	282	587	226	289	331	357	738			
78	618	761	888	966	2,003	186	242	275	301	622	235	303	345	376	774			
79	677	832	973	1,058	2,191	195	259	291	315	654	244	320	360	392	798			
80	733	902	1,055	1,149	2,378	207	273	308	331	686	256	334	376	407	822			
81	799	985	1,152	1,255	2,621	214	282	317	341	710	261	341	381	411	842			
82	867	1,072	1,248	1,358	2,869	219	284	329	353	734	266	341	388	421	858			
83	933	1,154	1,344	1,462	3,112	223	296	338	364	758	268	350	390	428	878			
84	1,001	1,238	1,443	1,567	3,356	228	301	345	374	786	270	353	395	435	898			
85	1,067	1,323	1,537	1,671	3,603	233	308	357	385	810	275	355	402	442	918			

MedAmerica Insurance Company
165 Court Street, Rochester, New York 14647

Comprehensive Policy

Individual Rates for Lifetime Premium Payment Option
0-Day Elimination Period
Annual Premium Rates with the Requested Rate Increase
100% Home Care, 20% Copayment Option
Rates per \$10 Daily Benefit

Issue Age	Policy Form: LTC-CD9-MA-PA Base Rates with No Inflation Protection					Rider: LTC9-PA-SIP Simple Inflation Protection Rider					Rider: LTC9-PA-CIP Compound Inflation Protection Rider				
	2 Years	3 Years	4 Years	5 Years	Lifetime	2 Years	3 Years	4 Years	5 Years	Lifetime	2 Years	3 Years	4 Years	5 Years	Lifetime
<40	56	66	75	80	176	31	40	47	49	116	56	71	85	89	203
40	59	71	80	87	188	38	45	54	56	132	66	82	96	101	231
41	63	75	85	92	200	38	47	56	61	140	68	85	101	106	239
42	66	80	89	99	211	42	49	61	61	144	71	87	103	108	251
43	71	85	96	103	223	42	52	61	66	152	73	92	106	113	259
44	73	89	101	108	235	45	52	63	68	156	78	94	110	118	267
45	78	94	106	115	251	47	54	66	71	160	78	96	115	120	271
46	80	96	110	120	263	49	59	71	73	168	82	101	118	125	283
47	85	101	115	125	275	49	61	73	78	172	85	103	122	129	291
48	87	106	122	132	287	52	63	73	78	180	87	108	125	132	299
49	92	110	127	136	299	54	66	75	82	184	89	110	127	136	307
50	96	115	132	143	311	54	68	80	85	192	92	113	132	141	319
51	99	120	136	148	323	56	68	82	87	200	94	115	136	146	327
52	103	125	141	153	335	59	71	85	92	203	96	118	139	150	335
53	106	129	148	160	347	61	73	85	92	211	99	122	141	153	343
54	110	134	153	165	359	61	75	89	96	215	101	125	146	157	355
55	113	139	157	169	375	66	78	92	99	219	106	127	150	162	359
56	118	141	162	176	387	66	82	94	101	227	106	132	153	165	367
57	120	146	167	181	399	68	82	96	103	231	110	134	157	169	375
58	125	150	174	186	411	68	85	99	108	239	113	139	160	174	387
59	127	155	179	193	423	73	87	101	108	243	115	141	162	176	395
60	132	160	183	197	435	73	89	103	113	251	118	143	167	181	403
61	143	174	200	216	475	75	94	108	118	263	120	148	172	186	415
62	155	188	216	233	515	80	99	113	125	275	125	153	176	193	431
63	165	202	233	251	551	85	103	120	129	295	129	157	183	200	447
64	176	216	249	268	591	89	108	125	136	307	134	162	188	207	463
65	188	230	266	287	630	92	113	129	141	319	136	167	193	212	475
66	209	256	294	317	702	96	120	139	153	339	141	174	202	223	499
67	228	280	322	350	770	103	129	148	160	363	150	183	214	233	523
68	249	306	353	381	842	110	134	155	172	383	155	193	221	242	547
69	268	329	381	414	910	118	143	165	179	407	165	202	233	251	571
70	289	355	409	444	982	122	150	174	190	427	169	209	242	263	595
71	322	397	456	496	1,097	129	157	186	202	451	176	216	254	275	618
72	357	437	505	548	1,213	134	167	193	212	475	181	226	261	284	642
73	390	479	552	599	1,329	143	176	204	223	499	190	235	273	296	666
74	425	519	602	651	1,444	148	186	212	233	523	195	244	280	306	690
75	458	562	649	703	1,560	155	193	223	244	547	202	251	291	317	714
76	515	632	729	790	1,760	165	204	240	261	579	212	263	306	334	746
77	571	700	808	879	1,955	174	219	256	275	614	221	275	320	348	782
78	625	771	891	966	2,155	183	228	268	289	650	230	287	334	362	818
79	682	839	971	1,055	2,350	193	242	284	303	686	240	298	348	376	854
80	738	909	1,050	1,142	2,550	202	254	301	320	718	249	310	362	392	886
81	804	992	1,144	1,246	2,785	207	261	310	329	742	251	315	367	397	898
82	870	1,074	1,241	1,349	3,020	212	268	320	338	762	256	320	369	402	914
83	938	1,159	1,335	1,452	3,260	214	270	329	350	782	256	322	376	404	922
84	1,003	1,241	1,431	1,556	3,495	219	277	338	360	802	261	327	378	409	938
85	1,069	1,323	1,525	1,659	3,731	223	284	348	369	826	263	331	383	414	950

MedAmerica Insurance Company
165 Court Street, Rochester, New York 14647

Comprehensive Policy

Individual Rates for Lifetime Premium Payment Option
0-Day Elimination Period
Annual Premium Rates with the Requested Rate Increase
100% Home Care, 0% Copayment Option
Rates per \$10 Daily Benefit

Policy Form: LTC-CD9-MA-PA
Base Rates with No Inflation Protection

Rider: LTC9-PA-SIP
Simple Inflation Protection Rider

Rider: LTC9-PA-CIP
Compound Inflation Protection Rider

Issue Age	Benefit Period						Benefit Period						Benefit Period				
	2 Years	3 Years	4 Years	5 Years	Lifetime		2 Years	3 Years	4 Years	5 Years	Lifetime		2 Years	3 Years	4 Years	5 Years	Lifetime
<40	59	68	78	82	184		31	42	49	52	120		59	73	89	94	211
40	61	73	82	89	196		40	47	56	59	136		68	87	101	106	239
41	66	78	87	96	207		40	49	59	63	144		71	89	106	108	247
42	68	82	94	103	219		45	52	63	63	152		73	92	106	113	263
43	73	87	101	108	231		45	54	63	68	160		75	96	108	118	271
44	75	94	106	113	243		47	52	66	71	164		82	96	115	122	279
45	80	99	110	120	263		49	56	68	73	164		82	99	120	125	279
46	82	101	115	125	275		52	61	73	75	172		87	103	122	129	291
47	87	106	120	129	287		52	63	75	80	176		89	106	127	134	303
48	89	110	127	136	299		54	66	75	82	188		92	113	129	136	311
49	96	115	132	141	311		54	68	78	87	192		92	115	132	143	319
50	101	120	136	148	323		56	71	85	89	200		94	118	136	148	331
51	103	125	141	155	335		59	71	87	89	207		96	120	143	150	343
52	108	129	146	160	347		61	73	89	94	211		99	122	146	155	351
53	110	134	155	167	359		63	75	87	94	223		101	127	146	157	359
54	115	139	160	172	375		63	80	92	99	223		106	129	150	162	367
55	118	143	165	176	391		68	82	94	103	227		110	134	155	169	371
56	122	146	169	183	403		68	87	96	106	235		110	139	157	172	383
57	125	150	174	188	415		71	87	99	108	239		115	141	165	176	391
58	129	157	181	193	427		71	87	103	113	251		118	143	167	181	403
59	132	162	186	200	439		75	89	106	113	255		120	146	169	183	411
60	136	167	190	204	451		75	92	108	118	263		122	148	174	188	419
61	148	181	207	226	495		80	99	113	122	271		125	153	179	193	431
62	162	195	226	242	535		82	103	118	129	287		129	160	183	200	447
63	172	209	242	261	575		87	108	125	134	303		134	165	190	209	463
64	183	226	259	280	614		94	113	129	141	319		139	167	195	214	483
65	195	240	277	298	654		96	118	134	146	335		143	174	200	219	495
66	219	266	306	329	730		99	125	143	160	351		146	181	209	233	519
67	237	291	334	364	802		108	134	155	167	375		155	190	223	242	543
68	259	317	367	395	874		115	139	162	179	399		162	200	230	254	571
69	280	343	395	430	946		122	148	172	186	423		169	209	242	261	595
70	301	369	425	463	1,021		127	157	181	197	443		176	219	251	273	618
71	334	414	475	515	1,141		136	162	193	212	471		183	223	263	287	642
72	371	454	526	569	1,261		139	174	200	221	495		188	235	270	296	670
73	407	498	573	623	1,381		148	183	214	233	519		197	244	284	308	694
74	442	541	625	677	1,500		155	193	221	242	547		204	254	291	317	718
75	477	585	674	731	1,624		160	200	233	254	567		209	261	303	329	742
76	536	658	757	820	1,831		172	212	249	273	599		219	273	320	348	774
77	595	729	841	914	2,035		181	228	266	287	638		228	287	331	362	810
78	651	801	926	1,003	2,242		190	237	280	301	674		240	298	348	378	850
79	710	872	1,011	1,097	2,446		200	251	294	315	710		249	310	360	390	886
80	768	945	1,093	1,187	2,653		209	266	313	334	746		259	324	376	409	918
81	837	1,032	1,189	1,295	2,897		214	270	324	343	770		261	327	383	414	934
82	905	1,116	1,290	1,403	3,140		219	280	334	353	794		266	334	383	418	950
83	975	1,206	1,389	1,511	3,392		223	280	341	364	814		266	334	390	421	958
84	1,043	1,290	1,488	1,617	3,635		228	289	353	376	834		273	341	395	425	974
85	1,112	1,377	1,586	1,725	3,878		233	294	362	385	862		275	343	397	430	990

MedAmerica Insurance Company
165 Court Street, Rochester, New York 14647

Comprehensive Policy

Individual Rates for 10-Year Premium Payment Option
0-Day Elimination Period
Annual Premium Rates with the Requested Rate Increase
50% Home Care, 20% Copayment Option
Rates per \$10 Daily Benefit

Policy Form: LTC-CD9-MA-PA
Base Rates with No Inflation Protection

Rider: LTC9-PA-SIP
Simple Inflation Protection Rider

Rider: LTC9-PA-CIP
Compound Inflation Protection Rider

<i>Issue Age</i>	Benefit Period					Benefit Period					Benefit Period				
	<i>2 Years</i>	<i>3 Years</i>	<i>4 Years</i>	<i>5 Years</i>	<i>Lifetime</i>	<i>2 Years</i>	<i>3 Years</i>	<i>4 Years</i>	<i>5 Years</i>	<i>Lifetime</i>	<i>2 Years</i>	<i>3 Years</i>	<i>4 Years</i>	<i>5 Years</i>	<i>Lifetime</i>
40	80	96	110	118	259	61	75	87	96	215	118	148	172	188	419
41	85	103	118	125	275	66	80	92	103	227	125	155	181	200	439
42	89	108	125	134	291	68	85	99	108	235	132	167	193	209	459
43	94	115	132	141	303	73	89	103	115	251	141	174	202	223	483
44	101	120	139	148	319	75	96	110	122	263	146	186	214	235	507
45	106	127	146	155	335	80	101	115	129	275	153	193	223	247	527
46	110	134	153	165	351	82	103	122	134	283	160	200	235	256	547
47	115	139	160	172	367	87	110	127	141	295	167	212	244	268	567
48	120	146	167	179	379	92	115	134	146	311	176	219	256	282	591
49	125	150	174	186	395	96	122	139	153	323	183	230	266	294	610
50	129	157	181	195	411	99	125	146	157	331	190	237	277	303	630
51	134	165	188	202	427	103	129	150	165	343	197	244	287	315	650
52	141	169	195	209	443	106	136	157	172	355	202	256	298	327	674
53	146	176	202	216	455	110	141	162	179	371	212	263	308	341	698
54	150	181	209	226	471	113	146	169	183	379	219	275	320	350	718
55	155	188	216	233	487	118	150	174	190	391	226	282	329	362	738
56	165	200	230	247	515	122	155	179	197	407	230	289	336	371	762
57	174	212	244	261	543	127	162	186	204	423	235	296	343	381	782
58	181	223	256	277	575	134	167	193	212	431	244	303	353	385	802
59	190	235	270	291	602	139	174	200	219	447	249	310	360	395	822
60	200	247	284	306	630	143	179	204	226	463	254	317	367	404	846
61	209	259	298	322	662	146	183	209	230	475	254	320	369	407	850
62	221	273	313	338	698	146	186	214	235	479	251	320	371	409	850
63	230	284	329	355	730	150	190	219	240	491	251	324	374	409	854
64	242	298	343	371	766	150	193	223	244	495	249	324	376	411	854
65	251	310	357	388	798	153	197	228	249	507	249	327	378	414	858
66	277	336	388	423	870	153	204	235	256	523	247	329	381	414	858
67	303	364	418	456	938	155	209	242	263	543	247	329	383	416	862
68	329	390	451	491	1,009	155	214	249	270	559	244	331	383	416	866
69	355	418	482	524	1,077	157	219	256	277	579	244	331	385	418	870
70	381	444	512	559	1,149	157	226	263	284	595	242	334	388	418	870
71	407	482	555	604	1,257	165	228	268	289	599	244	331	385	418	862
72	432	517	597	651	1,365	172	233	273	294	602	249	331	385	416	858
73	456	555	639	696	1,468	179	237	275	298	606	254	331	383	416	854
74	482	590	682	743	1,576	186	242	280	303	610	259	331	383	414	850
75	508	627	724	787	1,684	193	244	284	308	614	261	329	381	414	842
76	559	693	801	872	1,847	200	254	294	317	638	266	336	388	421	858
77	611	761	879	954	2,007	207	261	303	331	670	270	338	392	430	878
78	665	827	954	1,039	2,171	214	268	315	341	694	275	345	402	435	898
79	717	895	1,032	1,121	2,330	221	275	324	355	726	280	348	407	444	918
80	768	961	1,109	1,206	2,494	228	284	334	364	750	284	355	414	451	934
81	827	1,034	1,194	1,300	2,713	230	289	338	369	762	284	357	416	454	918
82	886	1,107	1,278	1,391	2,929	233	291	343	376	778	284	357	418	461	902
83	945	1,182	1,363	1,485	3,148	237	294	350	378	794	282	357	423	463	886
84	1,003	1,255	1,448	1,577	3,364	240	296	355	385	810	282	357	425	470	870
85	1,062	1,328	1,532	1,671	3,583	242	301	360	390	822	282	360	428	472	854

MedAmerica Insurance Company
165 Court Street, Rochester, New York 14647

Comprehensive Policy

Individual Rates for 10-Year Premium Payment Option
0-Day Elimination Period
Annual Premium Rates with the Requested Rate Increase
50% Home Care, 0% Copayment Option
Rates per \$10 Daily Benefit

Policy Form: LTC-CD9-MA-PA
Base Rates with No Inflation Protection

Rider: LTC9-PA-SIP
Simple Inflation Protection Rider

Rider: LTC9-PA-CIP
Compound Inflation Protection Rider

Issue Age	Benefit Period					Lifetime	Benefit Period					Lifetime	Benefit Period					Lifetime
	2 Years	3 Years	4 Years	5 Years	Lifetime		2 Years	3 Years	4 Years	5 Years	Lifetime		2 Years	3 Years	4 Years	5 Years	Lifetime	
40	82	101	115	122	271	63	78	89	101	223	122	153	179	195	435			
41	87	108	122	129	287	71	82	96	108	235	132	160	188	209	455			
42	94	113	129	139	303	71	87	103	113	243	136	174	200	219	479			
43	99	120	136	146	315	75	92	108	120	263	146	181	212	233	503			
44	106	125	143	155	331	78	101	115	127	275	150	193	223	244	527			
45	110	132	150	162	347	82	106	120	134	287	157	200	233	256	551			
46	115	139	160	172	367	85	108	127	139	291	167	209	244	266	567			
47	120	143	167	179	383	89	115	132	146	307	174	221	254	277	587			
48	125	150	174	186	395	96	120	139	153	323	183	228	266	294	614			
49	129	157	181	193	411	101	127	143	160	335	190	237	275	306	634			
50	134	165	188	202	427	103	129	153	165	343	197	247	289	315	654			
51	139	172	195	209	443	108	134	157	172	359	207	254	298	329	678			
52	146	176	202	219	459	110	141	165	176	371	212	266	310	338	702			
53	150	183	209	226	475	115	146	169	186	383	221	273	322	353	726			
54	157	188	219	235	491	115	153	174	190	395	226	287	331	364	746			
55	162	195	226	242	507	122	157	181	197	407	233	294	341	376	766			
56	172	207	240	256	535	127	162	186	207	423	240	301	350	388	794			
57	181	221	254	270	563	132	167	193	214	443	244	308	357	397	814			
58	188	233	266	289	599	139	174	202	219	447	254	315	367	400	834			
59	197	244	282	303	626	146	181	207	228	467	259	322	374	411	854			
60	207	256	296	317	654	150	186	212	235	483	266	331	381	421	882			
61	219	268	310	334	690	150	193	219	240	491	263	334	383	423	882			
62	230	284	324	353	726	150	193	223	244	499	261	331	388	425	886			
63	240	296	343	369	758	155	197	226	249	511	261	336	388	425	890			
64	251	310	357	385	798	157	200	233	254	515	259	338	390	428	886			
65	261	322	371	404	830	160	207	237	259	527	261	341	395	430	894			
66	289	350	404	439	906	157	212	244	268	543	256	341	395	430	890			
67	315	378	435	475	974	162	219	251	273	567	256	343	400	432	898			
68	343	407	470	510	1,049	160	221	259	282	583	254	343	397	432	902			
69	369	435	501	545	1,121	165	228	268	289	602	254	345	402	435	906			
70	395	463	533	583	1,197	165	233	273	294	614	254	345	402	435	902			
71	423	501	576	627	1,309	172	237	280	301	622	254	345	402	435	894			
72	449	538	620	677	1,420	179	242	284	306	626	261	343	402	432	890			
73	475	576	665	724	1,528	186	247	287	310	630	263	345	397	432	886			
74	501	613	710	773	1,640	193	251	289	315	634	270	345	397	430	882			
75	529	653	752	818	1,752	200	254	296	322	638	270	341	397	430	874			
76	583	721	834	907	1,923	207	263	306	329	662	275	350	402	437	890			
77	635	792	914	992	2,087	216	270	315	345	698	282	353	409	449	914			
78	691	860	992	1,081	2,258	223	280	329	353	722	287	360	418	451	934			
79	745	931	1,074	1,166	2,422	230	287	336	369	758	291	362	421	463	958			
80	799	999	1,154	1,255	2,594	237	296	348	378	782	296	369	430	468	970			
81	860	1,076	1,241	1,351	2,821	240	301	353	383	794	296	371	432	472	954			
82	921	1,152	1,330	1,448	3,044	242	303	357	390	810	296	371	435	479	938			
83	982	1,229	1,417	1,544	3,276	247	306	364	395	826	294	371	439	482	918			
84	1,043	1,304	1,506	1,640	3,499	249	308	369	400	842	294	371	442	489	902			
85	1,105	1,382	1,593	1,737	3,727	251	313	374	407	854	294	374	444	491	886			

MedAmerica Insurance Company
165 Court Street, Rochester, New York 14647

Comprehensive Policy

Individual Rates for 10-Year Premium Payment Option
0-Day Elimination Period
Annual Premium Rates with the Requested Rate Increase
100% Home Care, 20% Copayment Option
Rates per \$10 Daily Benefit

Policy Form: LTC-CD9-MA-PA
Base Rates with No Inflation Protection

Rider: LTC9-PA-SIP
Simple Inflation Protection Rider

Rider: LTC9-PA-CIP
Compound Inflation Protection Rider

Issue Age	Benefit Period					Benefit Period					Benefit Period				
	2 Years	3 Years	4 Years	5 Years	Lifetime	2 Years	3 Years	4 Years	5 Years	Lifetime	2 Years	3 Years	4 Years	5 Years	Lifetime
40	101	122	139	148	327	75	94	108	122	271	148	181	209	233	515
41	106	129	146	157	347	80	99	115	127	283	155	188	219	240	535
42	113	136	155	167	367	82	103	118	132	295	160	195	226	249	551
43	118	143	162	174	387	87	106	125	139	307	165	202	235	259	571
44	125	150	172	183	403	89	110	127	143	319	169	209	240	268	595
45	129	157	179	193	423	94	115	134	148	331	176	216	249	275	610
46	136	165	188	202	443	96	120	139	153	343	181	221	256	282	630
47	141	172	195	209	463	101	125	143	160	355	188	228	266	294	650
48	148	179	204	219	483	103	127	148	165	367	190	235	273	301	666
49	153	186	212	228	503	108	132	153	169	379	197	242	282	310	686
50	160	193	221	237	523	110	136	157	176	391	202	249	289	317	706
51	165	197	228	244	539	113	143	165	183	403	209	259	296	327	726
52	169	204	235	254	559	118	148	169	188	415	216	266	306	336	746
53	176	212	244	263	579	120	150	174	193	427	219	273	313	343	762
54	181	219	251	273	599	125	155	179	197	439	226	280	322	353	782
55	188	226	261	280	618	127	160	183	204	451	230	287	329	362	802
56	193	233	268	289	638	132	165	190	209	463	237	291	338	369	818
57	200	240	277	298	654	134	169	193	214	475	242	298	343	378	842
58	204	247	284	308	674	139	172	200	219	487	247	306	353	385	862
59	212	254	294	315	694	141	176	202	226	499	251	313	360	397	878
60	216	261	301	324	714	146	181	209	230	511	259	320	369	404	898
61	228	277	320	343	758	148	183	212	235	519	259	317	367	404	894
62	240	291	336	362	802	150	186	216	237	527	259	317	367	402	890
63	254	308	355	383	842	153	188	219	240	535	254	315	364	400	894
64	266	322	371	402	886	155	190	223	242	543	254	315	364	397	890
65	277	338	390	421	930	157	193	226	247	551	254	313	362	397	886
66	308	364	421	454	1,001	153	197	230	254	567	244	315	364	400	894
67	338	390	449	486	1,077	146	204	240	261	583	237	317	367	400	894
68	367	416	479	519	1,149	143	209	244	266	599	230	317	369	402	902
69	397	442	508	552	1,225	136	216	254	273	614	223	320	371	402	902
70	428	468	538	585	1,297	132	221	259	280	630	214	322	374	404	910
71	451	508	583	635	1,404	143	226	263	284	646	223	324	376	407	918
72	472	545	627	684	1,516	157	233	270	291	654	235	327	381	409	922
73	496	585	674	731	1,624	172	235	273	298	670	247	329	381	416	930
74	517	623	719	780	1,736	186	242	280	306	678	259	331	385	418	934
75	541	663	764	830	1,843	197	247	284	310	694	268	334	388	421	942
76	592	729	841	912	2,031	204	256	294	322	718	273	338	390	425	954
77	646	794	917	996	2,218	212	263	308	331	746	273	341	397	430	966
78	698	862	994	1,079	2,406	219	270	317	343	770	277	343	400	435	978
79	752	928	1,069	1,163	2,594	226	277	331	353	798	277	345	407	439	990
80	804	994	1,147	1,246	2,781	233	287	341	364	822	282	350	409	444	1,001
81	862	1,069	1,234	1,340	2,996	235	289	345	369	834	282	350	409	444	974
82	921	1,144	1,321	1,436	3,212	240	294	350	374	842	284	350	409	442	942
83	982	1,217	1,405	1,530	3,423	240	298	355	378	858	282	353	414	444	918
84	1,041	1,293	1,492	1,626	3,639	244	303	360	383	866	284	353	414	442	886
85	1,100	1,368	1,579	1,720	3,854	247	306	364	388	878	284	353	414	442	858

MedAmerica Insurance Company
165 Court Street, Rochester, New York 14647

Comprehensive Policy

Individual Rates for 10-Year Premium Payment Option
0-Day Elimination Period
Annual Premium Rates with the Requested Rate Increase
100% Home Care, 0% Copayment Option
Rates per \$10 Daily Benefit

Policy Form: LTC-CD9-MA-PA
Base Rates with No Inflation Protection

Rider: LTC9-PA-SIP
Simple Inflation Protection Rider

Rider: LTC9-PA-CIP
Compound Inflation Protection Rider

Issue Age	Benefit Period					Lifetime	Benefit Period					Lifetime	Benefit Period					Lifetime
	2 Years	3 Years	4 Years	5 Years	Lifetime		2 Years	3 Years	4 Years	5 Years	Lifetime		2 Years	3 Years	4 Years	5 Years	Lifetime	
40	106	127	143	155	339	78	99	113	127	283	153	188	219	240	535			
41	110	134	150	165	359	82	103	120	132	295	160	195	228	249	559			
42	118	141	162	174	383	85	108	122	136	307	167	204	233	259	571			
43	122	148	169	181	403	89	110	129	143	319	172	212	244	268	595			
44	129	157	179	190	419	94	113	132	150	331	176	216	249	280	618			
45	134	165	186	200	439	99	120	139	155	347	183	223	259	287	634			
46	141	172	195	209	459	101	125	146	160	359	188	230	268	294	658			
47	146	179	202	219	483	106	129	150	165	367	197	237	277	306	674			
48	155	186	212	228	503	106	132	155	172	383	197	244	284	313	694			
49	160	193	221	237	523	110	136	157	176	395	204	251	291	322	714			
50	167	200	230	247	543	115	143	162	183	407	209	261	301	329	734			
51	172	204	237	254	559	118	150	172	190	419	216	270	308	341	758			
52	176	212	244	263	583	122	155	176	197	431	226	277	317	350	774			
53	183	221	254	273	602	125	155	181	202	443	228	282	324	357	790			
54	188	228	261	284	622	129	160	186	204	455	235	289	336	367	814			
55	195	235	270	291	642	132	167	193	212	471	240	298	343	376	834			
56	200	242	280	301	662	139	172	197	216	483	247	303	350	383	854			
57	207	249	289	310	682	141	176	200	223	491	254	310	357	395	874			
58	212	256	296	320	702	146	179	207	228	509	259	317	367	402	894			
59	221	263	306	327	722	146	183	209	235	519	261	327	374	414	914			
60	226	270	313	338	742	150	190	219	237	531	268	334	383	418	934			
61	237	289	331	357	790	153	190	221	244	539	268	329	383	421	930			
62	249	303	350	376	834	157	193	223	247	547	268	329	381	418	926			
63	263	320	369	400	874	160	195	228	249	559	266	329	378	414	930			
64	277	334	385	418	922	160	200	233	251	563	263	329	381	414	926			
65	289	353	407	437	966	162	200	233	256	575	263	324	376	414	922			
66	320	378	437	472	1,041	160	207	240	263	591	254	329	378	416	930			
67	353	407	468	505	1,121	150	212	249	273	606	247	329	381	416	930			
68	381	432	498	541	1,197	150	219	254	275	622	240	329	383	418	938			
69	414	461	529	573	1,273	141	223	263	284	638	233	331	385	418	938			
70	444	486	559	609	1,349	139	230	270	291	654	223	334	390	421	946			
71	470	529	606	660	1,460	148	233	273	296	674	230	336	390	423	954			
72	491	566	653	712	1,576	165	242	280	303	682	244	341	395	425	958			
73	515	609	700	759	1,688	179	244	284	313	698	259	343	397	435	970			
74	538	649	747	811	1,803	193	251	291	317	706	268	343	402	435	974			
75	562	689	794	862	1,915	207	256	296	322	722	280	348	404	437	982			
76	616	757	874	949	2,111	214	268	306	334	750	284	353	407	442	994			
77	672	827	954	1,036	2,306	221	273	320	345	778	284	353	411	447	1,005			
78	726	898	1,034	1,121	2,502	228	280	329	357	802	289	357	416	454	1,017			
79	783	966	1,112	1,210	2,697	235	289	345	367	830	289	360	423	456	1,029			
80	837	1,034	1,194	1,295	2,893	242	298	353	378	854	291	364	423	463	1,041			
81	898	1,112	1,283	1,394	3,116	244	301	360	383	866	291	364	425	461	1,013			
82	959	1,189	1,372	1,492	3,340	249	306	364	390	878	296	364	425	461	982			
83	1,022	1,267	1,462	1,591	3,559	249	310	369	392	894	294	367	430	463	958			
84	1,083	1,344	1,551	1,692	3,783	254	315	376	397	902	296	367	430	458	922			
85	1,144	1,422	1,643	1,788	4,010	256	317	378	404	910	296	367	430	461	890			

MedAmerica Insurance Company
165 Court Street, Rochester, New York 14647

Facility Only Tax Qualified Policy

Individual Rates for Lifetime Premium Payment Option
 0 Day Elimination Period
 Annual Premium Rates with 20% Rate Increase
 Rates per \$10 Daily Benefit

Policy Form: NTQ11-337-MA-PA-601
Base Rates with No Inflation Protection

Rider: 11-SIP-PA-998
Simple Inflation Protection Rider

Rider: 11-CIP-PA-998
Compound Inflation Protection Rider

Issue Age	Benefit Period					Benefit Period					Benefit Period				
	2 Years	3 Years	4 Years	5 Years	Lifetime	2 Years	3 Years	4 Years	5 Years	Lifetime	2 Years	3 Years	4 Years	5 Years	Lifetime
<40	17	20	22	25	30	8	10	13	15	20	42	53	67	75	92
40	17	20	23	27	32	10	13	15	17	22	45	57	68	78	95
41	18	22	25	28	33	10	13	17	18	23	45	58	72	82	98
42	20	23	27	30	37	10	13	17	20	25	47	60	73	85	102
43	20	25	28	32	38	12	15	18	22	28	50	63	77	88	107
44	22	27	30	33	42	13	17	20	23	30	52	65	80	92	110
45	23	28	32	37	45	13	17	23	25	32	53	68	83	95	113
46	25	30	35	38	48	15	20	23	28	33	55	70	85	100	117
47	27	32	37	42	52	17	22	27	30	37	57	73	90	103	122
48	28	33	40	45	55	17	23	28	32	40	58	77	92	107	127
49	30	37	43	48	60	20	25	30	35	43	62	80	95	110	130
50	32	38	47	52	63	22	28	33	38	48	63	82	97	113	133
51	32	40	47	53	65	22	27	33	38	47	65	82	100	113	135
52	35	43	50	57	70	23	30	37	43	52	65	83	102	117	137
53	37	47	55	62	77	27	32	40	47	55	68	87	105	122	142
54	40	50	60	68	82	28	35	42	48	60	70	90	108	125	148
55	43	55	65	73	90	30	38	47	53	65	73	93	113	130	153
56	47	58	70	80	97	33	42	52	58	70	77	98	118	135	160
57	52	65	77	88	107	35	45	55	62	75	78	100	122	140	163
58	57	70	83	95	115	37	48	60	68	82	80	105	127	147	172
59	62	77	92	105	127	40	53	63	73	87	83	108	132	152	177
60	65	82	98	112	133	43	55	67	77	93	85	110	133	153	180
61	70	90	107	122	147	47	58	73	83	98	88	113	138	160	185
62	77	98	117	133	160	50	63	78	90	107	92	118	143	165	192
63	85	107	128	147	175	53	70	83	97	113	95	123	148	172	198
64	92	117	140	162	192	58	75	90	103	120	100	128	155	177	205
65	102	130	155	178	210	62	78	97	110	130	103	132	162	183	215
66	117	148	180	205	244	70	90	108	125	145	112	145	175	202	232
67	128	163	197	225	265	73	95	115	133	155	115	150	182	208	242
68	140	180	217	249	292	78	100	122	140	163	120	155	187	215	249
69	153	197	237	272	319	83	107	130	150	173	125	160	195	224	257
70	168	217	262	300	350	88	113	137	157	182	128	165	200	230	265
71	195	252	304	349	405	98	125	153	175	203	140	180	218	250	289
72	213	275	334	382	445	102	132	160	185	212	143	185	224	259	295
73	234	302	364	419	487	107	137	168	193	222	147	188	230	265	304
74	255	329	399	457	530	110	143	175	202	232	150	193	235	272	310
75	275	352	425	489	564	110	145	177	202	232	147	192	234	267	307
76	319	410	497	570	659	123	160	193	224	255	160	208	252	290	332
77	349	450	545	627	722	127	163	200	230	265	163	210	257	295	339
78	382	494	599	689	792	130	168	205	237	272	163	213	260	300	342
79	417	540	655	756	867	112	145	177	203	234	167	215	264	304	347
80	457	592	721	831	954	115	148	180	210	239	170	222	269	310	354
81	499	649	789	911	1,044	115	148	183	210	240	172	222	270	314	357
82	544	707	862	996	1,141	117	152	183	213	240	172	224	272	315	359
83	592	771	941	1,087	1,244	115	152	183	213	242	172	225	274	317	360
84	645	841	1,026	1,188	1,358	115	150	185	213	242	172	225	275	319	362
85	702	916	1,119	1,298	1,481	115	148	182	210	240	172	225	275	319	364

MedAmerica Insurance Company
165 Court Street, Rochester, New York 14647

Facility Only Tax Qualified Policy

Individual Rates for 10-Year Premium Payment Option
0 Day Elimination Period
Annual Premium Rates with 20% Rate Increase
Rates per \$10 Daily Benefit

Policy Form: NTQ11-337-MA-PA-601
Base Rates with No Inflation Protection

Rider: 11-SIP-PA-998
Simple Inflation Protection Rider

Rider: 11-CIP-PA-998
Compound Inflation Protection Rider

Issue Age	Benefit Period					Benefit Period					Benefit Period				
	2 Years	3 Years	4 Years	5 Years	Lifetime	2 Years	3 Years	4 Years	5 Years	Lifetime	2 Years	3 Years	4 Years	5 Years	Lifetime
<40	40	50	58	65	80	28	35	43	50	62	157	200	242	279	330
40	42	52	60	68	83	30	38	47	53	67	158	203	247	284	337
41	45	55	65	73	88	32	40	48	57	72	160	207	250	287	342
42	47	58	68	77	93	33	43	52	62	75	163	210	254	294	347
43	50	62	72	82	100	35	45	57	65	80	165	213	259	297	350
44	52	65	77	87	105	38	48	58	68	85	168	217	262	300	357
45	55	68	80	92	112	40	52	63	73	90	170	220	267	305	360
46	58	72	85	97	118	42	55	67	78	95	172	224	270	310	365
47	62	75	90	103	125	45	60	72	82	102	175	227	274	314	370
48	65	80	95	108	133	48	63	77	88	107	177	230	279	319	375
49	68	85	102	115	140	52	67	80	95	115	173	225	272	314	369
50	70	88	107	122	147	55	70	85	98	120	178	229	275	317	374
51	72	90	107	123	150	55	72	87	98	120	177	229	277	317	372
52	75	95	113	128	157	58	73	90	105	125	178	230	279	322	377
53	80	100	120	137	167	60	80	95	112	133	175	227	274	315	369
54	85	107	128	147	177	63	83	102	117	142	177	229	277	319	374
55	90	113	137	157	188	68	88	107	123	148	178	232	279	320	377
56	95	122	145	167	200	73	93	113	130	157	180	232	282	324	380
57	102	128	155	177	213	77	100	120	138	165	182	235	285	329	384
58	108	137	165	188	229	80	105	127	147	172	183	237	287	330	385
59	115	147	175	202	242	85	108	133	153	182	182	235	287	329	382
60	118	150	180	207	249	85	112	135	155	183	182	235	285	327	382
61	125	160	193	222	265	90	117	140	162	192	180	234	282	324	377
62	133	170	205	237	282	93	122	148	168	200	182	235	284	325	379
63	142	182	220	252	300	98	127	153	177	207	182	235	284	327	380
64	152	193	234	269	319	102	132	160	183	217	182	235	285	329	380
65	162	207	250	287	340	105	137	167	192	224	183	237	287	330	382
66	182	234	282	324	382	115	148	182	210	245	193	250	304	349	404
67	193	249	300	345	407	118	153	187	215	250	192	250	304	349	402
68	205	264	320	367	432	122	158	192	222	257	193	250	302	349	402
69	218	282	340	392	459	125	162	198	227	264	192	249	302	347	402
70	232	300	364	417	489	128	165	202	234	269	192	249	300	347	399
71	262	339	410	472	550	138	180	218	252	292	202	262	319	367	424
72	279	360	437	504	585	140	183	222	257	297	200	260	317	364	420
73	297	384	465	535	624	142	185	225	260	300	198	259	315	364	417
74	314	407	494	570	662	145	188	229	264	304	198	257	314	359	412
75	329	424	514	590	682	140	183	222	257	295	188	245	299	345	395
76	374	482	585	674	781	150	197	240	277	317	198	260	317	365	417
77	399	517	629	724	836	152	198	240	279	320	198	257	312	362	414
78	427	554	674	777	896	153	200	244	282	322	197	255	310	359	410
79	459	595	724	836	962	128	168	207	239	272	193	252	309	357	407
80	494	642	782	904	1,037	128	168	205	237	272	193	250	307	354	405
81	532	691	842	974	1,118	128	168	205	237	270	190	249	304	352	400
82	572	746	909	1,052	1,206	127	165	203	235	267	188	245	302	347	397
83	615	802	981	1,136	1,299	125	165	200	232	265	188	245	299	345	394
84	664	866	1,059	1,228	1,403	123	162	198	230	262	187	244	297	342	392
85	717	936	1,146	1,328	1,518	122	160	195	227	259	183	240	294	340	387

MedAmerica Insurance Company
165 Court Street, Rochester, New York 14647

Facility Only Tax Qualified Policy

Individual Rates for 20-Year Premium Payment Option
0 Day Elimination Period
Annual Premium Rates with 20% Rate Increase
Rates per \$10 Daily Benefit

Policy Form: NTQ11-337-MA-PA-601
Base Rates with No Inflation Protection

Rider: 11-SIP-PA-998
Simple Inflation Protection Rider

Rider: 11-CIP-PA-998
Compound Inflation Protection Rider

Issue Age	Benefit Period					Benefit Period					Benefit Period				
	2 Years	3 Years	4 Years	5 Years	Lifetime	2 Years	3 Years	4 Years	5 Years	Lifetime	2 Years	3 Years	4 Years	5 Years	Lifetime
<40	25	30	35	38	48	17	22	25	30	37	92	118	143	165	195
40	25	32	37	42	50	18	22	28	32	40	95	120	147	168	198
41	27	33	38	43	53	20	23	30	35	42	97	123	150	172	202
42	28	35	42	47	57	20	25	30	37	45	97	125	150	173	205
43	30	37	43	50	60	22	28	33	38	48	98	128	153	177	208
44	32	38	47	52	63	23	30	35	42	52	100	130	157	180	213
45	33	42	48	55	68	25	32	38	45	53	102	132	160	183	215
46	35	43	52	58	72	27	33	40	47	57	105	135	162	187	218
47	37	47	55	62	77	28	35	43	50	60	107	137	165	190	222
48	40	50	58	67	82	28	37	47	53	63	107	138	168	192	225
49	42	52	62	70	87	32	42	50	58	68	108	140	168	195	227
50	45	55	67	75	92	33	43	52	62	73	107	138	165	192	225
51	45	55	67	75	92	33	43	52	62	73	110	143	172	198	232
52	47	60	70	80	98	37	45	57	65	77	108	138	170	195	227
53	50	63	75	87	105	38	48	60	68	82	110	140	170	195	229
54	53	68	80	92	112	42	52	65	73	88	112	142	173	200	232
55	57	72	87	98	120	43	57	68	78	93	113	147	175	202	235
56	62	78	93	107	128	45	58	72	83	98	115	147	178	205	240
57	67	83	100	115	138	48	63	77	88	105	115	150	182	208	244
58	70	90	107	123	148	53	67	82	93	110	118	152	185	212	247
59	77	97	115	132	158	55	72	87	100	118	120	155	188	217	252
60	80	102	122	138	167	57	73	88	103	122	118	153	185	213	249
61	85	108	132	150	180	62	78	93	108	127	122	157	188	217	252
62	92	118	142	162	193	65	82	100	115	135	123	158	192	220	255
63	100	127	153	175	208	67	87	105	122	142	125	162	195	224	260
64	107	137	165	190	225	72	93	112	128	150	128	165	198	227	264
65	117	148	178	205	244	75	98	118	135	157	130	168	203	234	269
66	132	170	205	235	277	83	107	130	148	173	138	178	215	249	287
67	143	183	222	255	299	87	113	137	157	183	142	182	220	252	294
68	155	200	240	277	324	92	117	143	163	192	143	185	225	257	297
69	168	217	262	300	352	95	123	150	172	198	147	188	229	262	302
70	183	235	285	327	382	100	130	157	180	207	148	192	232	267	307
71	210	270	327	377	439	110	142	173	197	229	158	207	250	287	330
72	229	294	357	409	477	113	148	178	207	237	162	210	254	294	335
73	249	320	387	445	517	117	152	187	213	245	163	212	259	297	340
74	269	347	420	484	560	122	158	192	220	254	165	215	262	300	345
75	287	370	447	514	594	122	157	192	220	252	163	210	257	295	337
76	332	429	519	597	689	132	172	210	242	277	175	227	275	317	364
77	362	467	567	652	752	135	177	215	249	284	175	229	279	320	365
78	394	509	619	712	819	138	182	220	255	292	177	232	280	324	370
79	429	555	676	777	894	118	155	188	218	249	178	232	282	327	372
80	467	605	737	851	977	120	158	193	222	252	180	235	285	330	375
81	509	660	804	929	1,066	120	158	193	224	254	180	234	287	330	377
82	552	719	876	1,012	1,159	122	157	193	224	257	180	235	287	332	379
83	599	781	952	1,102	1,261	122	158	193	224	255	180	235	287	332	379
84	650	847	1,036	1,201	1,371	120	158	192	222	254	180	235	287	332	379
85	706	921	1,126	1,306	1,491	118	157	192	222	252	180	235	287	332	379

MedAmerica Insurance Company
165 Court Street, Rochester, New York 14647

Comprehensive Tax Qualified Policy

Individual Rates for Lifetime Premium Payment Option
0 Day Elimination Period
Annual Premium Rates with 20% Rate Increase
Rates per \$10 Daily Benefit

Policy Form: LTQ11-336-MA-PA-601
Base Rates with No Inflation Protection

Rider: 11-SIP-PA-998
Simple Inflation Protection Rider

Rider: 11-CIP-PA-998
Compound Inflation Protection Rider

Issue Age	Benefit Period					Benefit Period					Benefit Period				
	2 Years	3 Years	4 Years	5 Years	Lifetime	2 Years	3 Years	4 Years	5 Years	Lifetime	2 Years	3 Years	4 Years	5 Years	Lifetime
<40	22	27	32	35	47	13	17	20	25	32	53	68	83	98	122
40	23	28	33	38	50	13	18	22	25	33	55	72	87	100	125
41	25	30	35	40	52	15	20	25	28	37	57	73	92	105	130
42	27	32	38	43	55	15	18	25	30	40	58	77	93	108	135
43	28	33	40	47	60	17	23	28	32	42	60	80	97	112	138
44	30	37	43	48	63	18	23	30	35	45	62	82	100	117	143
45	32	38	45	52	68	20	27	33	38	48	65	85	105	122	148
46	33	42	48	57	72	22	27	35	40	52	67	87	108	123	153
47	35	43	52	60	77	23	32	38	43	57	70	92	112	130	160
48	38	47	57	65	83	25	33	40	47	60	72	95	115	133	163
49	40	50	60	70	88	27	35	43	50	65	75	98	120	138	170
50	43	53	65	75	95	30	38	47	53	70	75	100	122	140	172
51	43	55	65	75	97	30	38	48	55	70	78	100	123	143	175
52	47	58	72	82	103	32	42	50	60	75	78	102	123	143	177
53	50	63	77	88	112	35	45	55	63	80	82	105	128	148	182
54	55	68	83	95	122	37	48	58	70	85	83	110	133	155	187
55	58	75	90	103	130	40	52	63	75	93	87	112	138	160	195
56	63	80	98	112	142	43	57	68	82	100	90	117	142	167	200
57	68	88	107	122	153	47	60	73	87	107	93	120	147	172	207
58	75	95	115	133	167	50	65	80	92	113	95	125	153	177	213
59	82	103	125	145	180	53	70	87	100	123	98	128	158	182	220
60	85	110	133	153	192	57	73	90	105	127	100	130	158	185	222
61	93	120	145	168	208	60	78	97	112	137	103	133	165	190	229
62	102	130	158	183	227	63	85	103	120	145	105	138	170	195	235
63	110	142	173	200	247	68	90	110	128	155	110	143	173	202	242
64	120	155	188	218	269	73	95	118	137	165	113	147	180	208	249
65	132	170	207	239	294	78	102	127	147	177	117	152	187	217	259
66	150	195	237	275	337	88	115	142	163	197	127	165	203	234	279
67	165	213	260	300	367	92	122	150	175	208	128	168	208	242	287
68	180	232	284	329	400	97	130	160	185	222	132	175	215	249	295
69	195	254	310	360	437	103	137	168	195	234	137	180	220	255	302
70	213	279	340	395	479	108	143	177	205	245	140	183	225	262	310
71	245	320	394	457	552	122	160	197	229	274	152	198	244	282	335
72	269	350	430	500	604	125	167	205	239	285	153	202	249	289	342
73	292	382	470	545	659	130	173	213	250	297	155	205	252	295	347
74	317	415	512	595	717	137	180	224	260	309	158	208	257	299	352
75	339	442	544	634	759	137	182	225	260	310	155	205	252	292	344
76	392	514	634	739	886	150	200	247	289	344	165	218	270	314	370
77	429	564	696	812	972	153	205	255	299	354	165	220	272	315	370
78	467	617	764	892	1,066	160	212	262	307	365	167	220	272	315	372
79	510	676	837	979	1,169	137	182	225	265	314	167	218	272	317	370
80	560	742	922	1,081	1,289	140	185	230	270	322	167	220	272	317	372
81	610	811	1,011	1,186	1,414	140	188	234	275	325	167	218	270	314	367
82	665	887	1,106	1,301	1,549	142	188	235	277	329	163	215	267	309	360
83	726	967	1,209	1,424	1,696	142	190	237	277	329	160	212	262	304	352
84	791	1,056	1,323	1,560	1,856	142	190	237	279	329	157	207	254	295	342
85	861	1,153	1,444	1,706	2,032	140	188	235	279	329	153	200	247	287	330

MedAmerica Insurance Company
165 Court Street, Rochester, New York 14647

Comprehensive Tax Qualified Policy

Individual Rates for 10-Year Premium Payment Option
0 Day Elimination Period
Annual Premium Rates with 20% Rate Increase
Rates per \$10 Daily Benefit

Policy Form: LTQ11-336-MA-PA-601
Base Rates with No Inflation Protection

Rider: 11-SIP-PA-998
Simple Inflation Protection Rider

Rider: 11-CIP-PA-998
Compound Inflation Protection Rider

Issue Age	Benefit Period					Benefit Period					Benefit Period				
	2 Years	3 Years	4 Years	5 Years	Lifetime	2 Years	3 Years	4 Years	5 Years	Lifetime	2 Years	3 Years	4 Years	5 Years	Lifetime
<40	55	68	82	93	122	40	52	63	73	95	190	247	304	352	430
40	57	72	87	98	128	43	55	67	78	100	193	252	307	357	435
41	60	75	90	105	135	45	58	72	82	107	195	255	312	360	442
42	63	80	95	110	142	47	62	77	88	113	198	259	317	367	449
43	67	83	102	117	150	50	65	80	93	118	200	262	320	370	454
44	70	88	107	123	158	53	68	85	98	125	203	265	325	375	459
45	73	93	113	130	167	57	73	88	105	133	207	269	329	380	465
46	78	98	118	137	177	58	78	95	112	140	208	272	334	387	470
47	82	105	127	145	187	63	82	100	117	148	212	274	335	390	475
48	87	110	133	153	197	67	87	107	125	157	213	279	340	395	480
49	92	117	142	163	208	70	92	112	132	165	208	272	334	387	469
50	95	122	148	170	217	73	95	117	137	172	212	275	337	392	477
51	97	123	150	173	220	75	97	118	138	175	210	275	337	390	474
52	102	128	157	182	230	77	102	123	143	180	213	279	340	395	480
53	107	137	167	192	244	82	107	130	153	190	208	272	334	387	467
54	113	145	177	205	259	87	113	138	160	198	210	274	335	389	470
55	120	155	188	217	274	90	118	145	170	210	212	275	337	392	474
56	127	163	200	232	290	97	125	153	177	220	213	279	340	394	477
57	135	173	212	245	307	100	132	162	188	232	213	280	342	397	479
58	143	185	225	262	327	105	137	168	195	242	213	280	344	399	480
59	152	197	240	277	345	110	143	177	207	254	212	275	339	395	474
60	155	200	245	285	354	112	145	178	207	254	212	277	339	392	474
61	165	213	260	302	375	115	152	187	217	264	207	272	335	389	465
62	175	227	277	322	397	120	157	193	225	275	207	272	335	387	465
63	185	240	294	342	422	125	163	202	234	285	208	272	335	387	464
64	197	255	312	362	447	128	170	210	244	295	207	272	334	389	464
65	208	272	334	387	475	133	175	217	252	305	207	272	334	387	462
66	234	304	372	434	530	145	192	237	275	334	217	285	352	407	487
67	247	322	395	460	562	150	197	244	284	342	215	284	350	405	484
68	262	342	420	489	595	153	202	249	290	350	213	282	347	402	480
69	277	362	445	519	632	157	207	255	297	357	212	280	345	400	475
70	294	385	474	552	671	160	210	260	304	365	210	277	342	395	470
71	329	432	534	622	754	172	227	280	329	395	220	290	357	415	495
72	349	459	565	660	801	173	230	287	334	400	217	285	354	410	487
73	369	485	600	702	849	177	234	290	339	405	213	282	349	405	480
74	390	515	637	746	899	178	235	294	342	409	210	277	344	399	472
75	405	534	659	769	924	173	230	285	334	397	200	264	325	379	447
76	459	605	751	877	1,056	185	247	307	359	427	208	275	340	397	467
77	490	649	804	942	1,131	187	249	310	362	432	203	270	334	389	459
78	525	696	864	1,012	1,214	187	250	312	365	434	200	264	327	380	447
79	562	747	929	1,089	1,304	160	210	264	310	369	197	257	319	374	437
80	605	806	1,004	1,179	1,409	158	212	264	310	369	192	254	312	365	429
81	650	867	1,082	1,274	1,521	158	210	262	307	367	188	247	305	355	415
82	701	936	1,169	1,378	1,645	158	208	262	307	364	182	240	297	345	402
83	756	1,009	1,264	1,491	1,778	153	208	259	304	360	177	234	287	334	389
84	816	1,091	1,368	1,616	1,925	153	205	255	300	357	170	225	277	322	374
85	881	1,181	1,481	1,753	2,087	150	200	254	297	352	165	215	267	309	357

MedAmerica Insurance Company
165 Court Street, Rochester, New York 14647

Comprehensive Tax Qualified Policy

Individual Rates for 20-Year Premium Payment Option
0 Day Elimination Period
Annual Premium Rates with 20% Rate Increase
Rates per \$10 Daily Benefit

Policy Form: LTQ11-336-MA-PA-601
Base Rates with No Inflation Protection

Rider: 11-SIP-PA-998
Simple Inflation Protection Rider

Rider: 11-CIP-PA-998
Compound Inflation Protection Rider

Issue Age	Benefit Period					Benefit Period					Benefit Period				
	2 Years	3 Years	4 Years	5 Years	Lifetime	2 Years	3 Years	4 Years	5 Years	Lifetime	2 Years	3 Years	4 Years	5 Years	Lifetime
<40	33	42	48	57	73	23	30	38	43	57	113	147	180	208	254
40	35	43	52	60	77	25	33	40	47	60	115	150	183	210	259
41	37	45	55	63	82	27	35	42	48	63	117	152	185	215	262
42	38	48	58	67	85	28	37	45	52	68	118	153	188	218	267
43	40	52	62	70	90	30	38	47	57	72	122	155	185	222	270
44	43	53	65	75	95	32	42	50	58	77	122	160	193	225	275
45	45	57	68	78	102	33	45	53	63	78	123	162	197	229	277
46	48	60	73	83	107	35	47	57	67	85	125	163	200	232	282
47	50	63	77	88	113	38	50	62	72	90	128	167	203	235	285
48	53	68	82	95	120	40	52	65	75	95	130	168	207	239	290
49	57	72	87	100	127	43	57	68	80	102	130	170	207	240	290
50	60	77	92	107	135	45	58	73	83	105	128	167	205	235	287
51	60	77	92	107	135	45	58	73	85	107	132	172	212	244	295
52	63	82	98	113	143	48	62	77	90	112	130	168	207	239	290
53	68	87	105	122	153	50	67	82	93	117	130	168	207	239	289
54	72	92	112	130	163	55	72	87	100	123	132	172	210	242	292
55	77	98	120	138	173	58	75	92	107	132	133	173	212	247	297
56	82	105	128	148	185	62	80	97	112	138	135	177	215	249	300
57	88	113	137	158	198	63	83	103	120	147	137	178	218	254	304
58	93	120	147	170	212	68	90	108	127	155	138	182	222	255	307
59	100	130	157	182	227	72	93	117	133	163	140	182	225	260	310
60	105	135	165	190	237	73	97	118	138	167	138	180	220	257	307
61	113	145	177	205	254	77	102	125	145	177	138	183	224	259	310
62	122	157	190	220	272	82	107	132	153	185	140	185	227	262	314
63	130	168	205	237	292	87	112	138	162	195	143	187	229	265	317
64	140	180	220	255	314	90	120	147	170	205	145	190	232	269	320
65	150	195	239	277	339	95	125	153	177	213	147	192	235	272	324
66	170	222	270	314	382	105	137	170	197	237	157	203	250	290	347
67	183	239	292	339	412	110	143	177	205	249	158	207	254	294	350
68	198	259	317	367	445	115	150	185	215	259	160	208	257	297	354
69	213	279	342	397	482	120	157	193	225	269	162	212	260	302	357
70	232	302	372	430	522	123	163	200	235	280	163	215	262	305	360
71	264	345	425	494	597	137	180	220	259	309	173	229	280	325	385
72	285	374	460	537	647	142	187	230	267	319	175	230	284	327	389
73	309	405	500	582	701	145	192	237	277	330	175	232	284	330	392
74	334	439	540	630	759	150	198	245	285	340	177	232	287	332	392
75	354	465	572	667	799	150	197	245	285	340	172	225	280	324	382
76	409	537	664	774	929	162	215	267	314	370	182	240	295	345	405
77	444	585	724	847	1,014	167	222	275	320	382	182	240	297	344	405
78	482	637	791	926	1,107	172	229	282	330	390	182	240	295	342	402
79	525	696	864	1,012	1,209	145	195	242	284	335	180	237	292	340	399
80	572	761	946	1,109	1,324	148	197	245	289	340	178	235	290	339	395
81	622	827	1,032	1,213	1,446	150	198	247	290	344	177	234	287	334	390
82	677	902	1,126	1,324	1,580	148	198	250	294	345	173	229	282	329	382
83	736	981	1,228	1,446	1,723	148	200	249	294	345	168	224	275	320	372
84	799	1,067	1,338	1,578	1,878	147	197	247	292	345	165	218	269	312	362
85	867	1,161	1,456	1,721	2,048	147	197	245	292	344	160	210	260	302	349

MedAmerica Insurance Company
165 Court Street, Rochester, New York 14647

Franchise Comprehensive Tax Qualified Policy

Individual Rates for Lifetime Premium Payment Option
 0 Day Elimination Period
 Annual Premium Rates with 20% Rate Increase
 Rates per \$10 Daily Benefit

Policy Form: FLQ11-336-MA-PA-601
 Base Rates with No Inflation Protection

Rider: 11-SIP-PA-998
 Simple Inflation Protection Rider

Rider: 11-CIP-PA-998
 Compound Inflation Protection Rider

Issue Age	Benefit Period					Benefit Period					Benefit Period				
	2 Years	3 Years	4 Years	5 Years	Lifetime	2 Years	3 Years	4 Years	5 Years	Lifetime	2 Years	3 Years	4 Years	5 Years	Lifetime
<40	20	23	28	32	42	12	15	18	22	28	48	62	75	88	110
40	22	25	30	35	45	12	17	20	22	30	48	65	78	90	113
41	23	27	32	37	47	13	18	22	25	33	50	67	82	93	117
42	23	28	35	38	50	15	17	22	28	35	53	70	83	98	122
43	25	30	37	42	53	15	22	25	28	38	55	72	87	102	125
44	27	33	38	43	57	17	20	28	32	42	57	73	90	105	130
45	28	35	40	47	62	18	23	30	35	43	58	77	95	110	133
46	30	38	43	52	65	20	23	32	35	47	60	77	98	110	138
47	32	38	47	53	68	22	30	35	40	52	63	83	100	118	145
48	35	42	52	58	75	22	30	35	42	53	63	87	103	120	147
49	37	45	53	63	80	23	32	40	45	58	67	88	108	125	153
50	38	48	58	68	85	28	35	42	47	63	68	90	110	125	155
51	38	50	58	68	87	28	33	43	48	63	72	90	112	128	158
52	42	53	65	73	93	28	37	45	55	67	72	90	110	130	158
53	45	57	68	80	100	32	42	50	57	73	73	95	117	133	163
54	50	62	75	85	110	33	43	53	63	77	75	98	120	140	168
55	53	68	82	93	117	35	45	57	67	85	77	100	123	143	177
56	57	72	88	100	128	40	52	62	73	90	82	105	128	150	180
57	62	80	97	110	138	42	53	65	78	95	83	108	132	153	185
58	68	85	103	120	150	45	58	72	83	102	85	113	138	158	192
59	73	93	113	130	162	48	63	77	90	112	88	115	142	163	198
60	77	98	120	138	173	52	67	82	95	113	90	118	143	167	198
61	83	108	130	152	188	55	70	88	100	122	93	120	148	172	205
62	92	117	143	165	203	57	77	92	108	132	95	125	152	175	212
63	98	128	157	180	222	62	80	98	115	140	100	128	155	182	218
64	108	140	170	197	242	65	85	107	123	148	102	132	162	187	224
65	118	153	187	215	264	70	92	113	132	160	105	137	167	195	234
66	135	175	213	249	304	80	103	127	147	177	113	148	183	210	250
67	148	192	234	270	330	83	110	135	158	188	115	152	188	218	259
68	162	208	255	295	360	87	117	143	167	200	118	158	193	224	265
69	175	229	279	324	394	93	123	152	177	210	123	162	198	230	272
70	192	250	307	355	430	98	130	158	185	222	127	165	202	237	280
71	220	289	354	412	497	110	143	178	205	247	137	178	220	254	302
72	242	315	387	450	544	112	150	185	215	257	138	182	224	260	307
73	264	344	424	490	594	117	157	192	225	267	138	185	227	267	312
74	285	374	460	535	645	123	162	202	235	279	143	188	232	269	317
75	305	399	489	570	684	123	163	203	234	279	138	183	227	264	309
76	354	462	570	665	797	135	180	222	259	309	148	197	244	282	334
77	385	507	625	731	876	138	185	230	269	319	148	198	245	284	334
78	420	555	687	804	959	143	190	237	275	329	150	198	245	284	335
79	459	609	754	881	1,052	123	163	202	239	282	150	195	245	285	334
80	504	669	831	972	1,161	127	165	207	244	289	150	197	244	285	334
81	549	729	909	1,067	1,273	127	170	210	247	294	150	197	244	282	330
82	599	799	996	1,171	1,394	128	170	212	249	295	147	193	240	279	325
83	654	871	1,089	1,283	1,526	127	172	212	249	297	143	190	235	272	317
84	712	951	1,191	1,404	1,671	127	170	213	250	295	140	185	229	265	307
85	774	1,037	1,299	1,536	1,828	127	170	212	250	297	138	180	224	259	297

MedAmerica Insurance Company
165 Court Street, Rochester, New York 14647

Franchise Comprehensive Tax Qualified Policy

Individual Rates for 20-Year Premium Payment Option
 0 Day Elimination Period
 Annual Premium Rates with 20% Rate Increase
 Rates per \$10 Daily Benefit

Policy Form: FLQ11-336-MA-PA-601
Base Rates with No Inflation Protection

Rider: 11-SIP-PA-998
Simple Inflation Protection Rider

Rider: 11-CIP-PA-998
Compound Inflation Protection Rider

Issue Age	Benefit Period					Benefit Period					Benefit Period				
	2 Years	3 Years	4 Years	5 Years	Lifetime	2 Years	3 Years	4 Years	5 Years	Lifetime	2 Years	3 Years	4 Years	5 Years	Lifetime
<40	30	38	43	52	67	22	27	35	38	50	102	132	162	187	227
40	32	38	47	53	68	22	30	37	43	55	103	135	165	190	234
41	33	40	50	57	73	23	32	37	43	57	105	137	167	193	235
42	35	43	53	60	77	25	33	40	47	62	107	138	168	197	240
43	37	47	55	63	82	27	35	43	50	63	108	140	167	200	242
44	38	48	58	68	85	30	37	45	52	70	110	143	175	202	249
45	40	52	62	70	92	30	40	48	58	70	112	145	177	207	249
46	43	53	67	75	97	32	43	50	60	77	113	148	180	208	254
47	45	57	68	80	102	35	45	57	63	82	115	150	183	212	257
48	48	62	73	85	108	35	47	58	68	85	117	152	187	215	260
49	52	65	78	90	113	38	50	62	72	92	117	153	185	217	262
50	53	68	83	97	122	42	53	65	75	95	117	150	183	212	259
51	53	68	83	97	122	42	53	65	77	97	120	155	190	218	265
52	57	73	88	102	128	43	55	70	82	102	117	152	187	215	262
53	62	78	95	110	138	45	60	73	83	105	117	152	185	213	260
54	65	83	100	117	147	48	63	78	90	112	118	153	190	218	264
55	68	88	108	125	157	53	68	82	95	118	120	157	190	222	267
56	73	95	115	133	167	55	72	88	100	125	122	158	193	224	270
57	80	102	123	143	178	57	75	93	107	132	123	162	197	227	274
58	83	108	132	153	190	62	80	98	113	140	125	163	200	230	277
59	90	117	142	163	203	65	85	105	120	148	127	163	202	235	280
60	95	122	148	172	213	65	87	107	123	150	123	162	198	230	275
61	102	130	158	185	229	70	92	113	130	158	125	165	202	232	279
62	110	142	172	198	245	73	95	118	138	167	125	167	203	235	282
63	117	152	185	213	264	78	100	123	145	175	130	168	205	239	285
64	127	162	198	230	282	80	108	132	153	185	130	172	208	242	289
65	135	175	215	249	305	85	113	138	160	192	132	173	212	245	290
66	153	200	244	282	344	95	123	153	177	213	140	183	225	262	312
67	165	215	264	305	370	98	128	158	183	224	143	185	227	264	315
68	178	234	285	330	400	103	135	167	193	234	145	187	232	267	319
69	192	250	309	357	434	108	142	173	203	242	147	192	234	272	322
70	208	272	335	387	470	112	147	180	212	252	147	193	235	275	324
71	237	310	384	444	537	123	163	197	234	279	157	207	252	294	347
72	257	337	414	484	582	127	167	208	240	287	157	207	255	294	350
73	279	365	450	524	630	130	172	213	250	297	157	208	255	297	354
74	300	395	487	567	684	135	178	220	257	305	158	208	257	299	352
75	319	419	515	600	719	135	177	220	257	307	155	203	252	292	344
76	369	484	597	697	836	145	193	240	282	334	163	215	267	310	365
77	399	527	652	762	912	150	200	247	289	344	165	217	267	310	365
78	434	574	712	834	997	155	205	254	297	350	163	215	265	307	362
79	474	625	777	911	1,089	130	177	218	255	300	162	213	264	307	359
80	515	684	851	999	1,193	133	178	222	259	305	160	212	262	304	355
81	560	744	929	1,091	1,301	135	180	222	262	310	158	210	259	300	352
82	609	812	1,014	1,193	1,421	135	178	225	264	312	157	205	254	295	344
83	662	882	1,104	1,301	1,551	133	180	225	265	310	152	202	249	289	334
84	719	961	1,204	1,419	1,690	132	177	222	264	312	148	197	242	282	327
85	781	1,044	1,311	1,549	1,843	132	178	220	262	310	143	190	234	272	314

MedAmerica Insurance Company
165 Court Street, Rochester, New York 14647

Home Health Only Tax Qualified Policy

Individual Rates for Lifetime Premium Payment Option
0 Day Elimination Period
Annual Premium Rates with 20% Rate Increase
Rates per \$10 Daily Benefit

Policy Form: HTQ11-338-MA-PA-601
Base Rates with No Inflation Protection

Rider: 11-SIP-PA-998
Simple Inflation Protection Rider

Rider: 11-CIP-PA-998
Compound Inflation Protection Rider

Issue Age	Benefit Period					Benefit Period					Benefit Period				
	2 Years	3 Years	4 Years	5 Years	Lifetime	2 Years	3 Years	4 Years	5 Years	Lifetime	2 Years	3 Years	4 Years	5 Years	Lifetime
<40	23	27	28	32	40	10	13	15	18	23	40	48	55	63	75
40	23	27	30	33	43	12	15	17	18	23	43	52	57	65	75
41	25	28	32	35	45	12	15	17	20	25	43	53	58	67	77
42	25	30	33	37	47	13	17	18	22	27	47	53	60	68	80
43	27	32	35	38	48	15	17	18	22	28	47	55	62	70	82
44	28	33	37	40	50	15	18	20	23	30	48	57	63	73	85
45	30	35	38	43	53	15	18	22	23	30	48	58	65	73	85
46	30	37	40	45	55	18	20	23	27	33	52	60	68	77	88
47	32	38	42	47	58	18	22	25	28	33	53	62	70	78	90
48	33	40	43	50	60	20	23	27	28	37	55	65	73	80	93
49	37	42	47	52	63	20	25	28	32	38	55	67	75	83	95
50	38	43	48	55	67	22	27	30	33	38	55	67	75	82	93
51	38	45	50	55	67	22	27	28	33	40	57	68	75	85	97
52	40	47	52	58	70	23	28	32	35	42	57	68	77	85	95
53	42	50	55	62	73	25	30	33	38	43	60	70	78	87	98
54	45	53	58	65	77	27	32	37	40	47	62	72	82	90	102
55	48	57	62	70	82	28	33	38	42	50	63	75	83	92	103
56	52	60	67	75	87	30	37	40	45	52	65	77	85	95	107
57	55	65	72	80	92	32	38	43	48	55	67	78	87	97	108
58	58	68	77	85	98	35	42	45	52	58	70	82	90	100	112
59	63	73	82	90	105	37	45	48	55	60	70	85	93	105	113
60	65	77	85	95	108	38	45	50	55	63	72	85	93	103	113
61	70	83	92	102	115	40	47	53	58	67	73	87	95	107	117
62	75	88	98	108	123	43	52	55	63	70	77	90	98	110	118
63	82	95	105	117	132	45	53	60	67	73	77	92	100	112	122
64	87	102	113	125	140	48	57	62	70	77	80	95	103	115	125
65	95	110	122	135	150	50	60	67	73	82	82	98	107	118	128
66	107	125	138	153	170	57	67	73	80	88	90	105	115	127	137
67	115	135	148	165	182	60	70	77	85	93	92	107	118	130	140
68	125	145	160	177	195	62	73	80	90	97	93	110	120	133	143
69	135	157	172	190	210	65	77	85	93	100	95	113	123	137	145
70	145	170	185	205	225	68	78	88	97	103	98	113	127	138	147
71	165	192	210	234	254	75	88	97	105	113	105	123	135	148	158
72	177	207	227	250	270	78	90	98	110	117	108	125	137	152	160
73	190	222	244	269	289	80	93	102	112	120	108	127	138	153	162
74	203	237	260	287	307	83	97	105	115	122	110	128	140	153	162
75	218	254	275	304	322	82	95	105	113	120	108	125	137	150	158
76	249	289	314	345	365	88	103	113	123	130	117	133	147	160	168
77	269	310	337	370	390	90	105	115	127	132	117	135	148	162	168
78	289	334	362	397	419	93	107	117	128	132	117	135	148	162	167
79	310	359	389	427	447	78	92	100	108	112	118	137	148	162	167
80	335	387	420	459	479	80	92	98	110	112	120	138	148	163	168
81	362	417	450	494	512	80	92	100	107	112	120	138	150	162	167
82	392	449	485	529	549	78	92	98	108	112	118	138	148	162	167
83	424	485	522	569	589	78	92	98	107	110	118	137	148	160	163
84	457	524	562	610	630	80	90	98	105	108	118	135	147	158	163
85	494	564	604	655	676	78	90	97	103	105	118	135	145	157	160

MedAmerica Insurance Company
165 Court Street, Rochester, New York 14647

Home Health Only Tax Qualified Policy

Individual Rates for 10-Year Premium Payment Option
0 Day Elimination Period
Annual Premium Rates with 20% Rate Increase
Rates per \$10 Daily Benefit

Policy Form: HTQ11-338-MA-PA-601
Base Rates with No Inflation Protection

Rider: 11-SIP-PA-998
Simple Inflation Protection Rider

Rider: 11-CIP-PA-998
Compound Inflation Protection Rider

Issue Age	Benefit Period					Benefit Period					Benefit Period				
	2 Years	3 Years	4 Years	5 Years	Lifetime	2 Years	3 Years	4 Years	5 Years	Lifetime	2 Years	3 Years	4 Years	5 Years	Lifetime
<40	52	60	67	75	93	30	38	43	48	62	140	168	187	208	240
40	53	62	68	77	97	33	40	47	53	65	142	170	190	213	244
41	55	65	72	80	100	35	42	48	55	68	145	172	192	215	245
42	57	67	75	83	105	37	45	50	57	68	147	175	193	217	245
43	60	70	78	87	108	38	47	52	60	72	147	175	195	218	249
44	62	73	82	92	112	40	48	55	62	77	148	177	197	218	250
45	65	75	85	95	117	42	52	57	65	78	150	180	198	222	250
46	67	78	88	98	120	45	53	60	68	82	152	180	200	224	252
47	70	82	92	102	125	47	57	63	72	85	152	182	202	225	254
48	73	85	95	107	130	48	60	67	75	87	150	180	198	220	244
49	75	90	100	112	133	52	62	68	77	92	152	178	198	222	250
50	77	92	102	113	135	53	62	70	78	92	152	178	197	220	244
51	80	93	103	117	140	53	65	72	80	93	152	180	200	224	250
52	80	95	105	118	140	55	65	73	82	95	153	180	200	222	245
53	85	100	110	123	145	57	68	77	87	100	150	180	200	222	250
54	88	105	115	130	152	60	72	80	88	102	148	175	195	217	240
55	93	110	122	135	158	62	73	83	93	105	148	177	195	218	239
56	97	115	127	142	165	67	78	87	97	108	150	177	197	218	239
57	102	120	133	148	172	68	82	90	100	112	150	178	195	218	239
58	107	127	140	155	178	72	83	93	105	117	152	177	195	218	239
59	112	132	147	163	185	73	88	97	107	122	147	173	190	210	229
60	113	133	148	165	187	73	87	95	107	118	150	177	193	215	237
61	118	140	155	172	195	77	90	98	112	122	145	172	187	208	225
62	125	147	162	180	203	78	93	103	113	125	145	170	187	208	224
63	132	153	170	188	212	80	95	105	117	128	143	170	187	207	224
64	138	162	178	197	220	82	97	107	120	132	143	168	185	205	222
65	145	170	187	207	230	85	100	110	123	135	143	168	185	205	220
66	160	188	207	229	254	92	107	118	132	143	150	175	193	213	229
67	168	197	217	240	265	93	110	120	133	145	148	175	190	210	225
68	177	207	227	250	275	95	112	123	137	147	147	172	188	210	224
69	185	217	237	264	287	97	113	125	137	148	145	170	187	205	220
70	193	227	249	275	300	98	115	127	138	148	145	168	185	203	215
71	215	252	275	304	330	103	122	133	148	157	150	175	192	213	224
72	225	264	289	319	344	105	122	133	148	157	148	173	188	208	220
73	235	275	300	332	357	105	123	135	148	157	147	170	187	205	215
74	247	287	314	347	370	105	123	135	147	155	143	168	183	200	210
75	257	297	324	357	379	102	118	130	142	150	137	160	173	190	198
76	285	332	360	397	420	108	125	138	150	157	143	165	182	198	205
77	302	349	380	417	440	108	127	137	150	157	140	163	177	195	202
78	319	369	400	440	462	108	125	137	148	155	138	160	175	190	197
79	337	390	424	464	485	90	105	113	123	128	137	157	170	187	193
80	359	414	449	490	512	90	103	112	123	127	135	157	168	185	190
81	382	440	477	520	540	88	102	108	120	123	133	153	165	180	187
82	409	469	507	552	572	87	102	108	118	123	130	152	162	177	182
83	437	500	540	587	609	87	100	107	117	118	128	150	158	173	177
84	469	535	575	625	645	83	98	105	115	117	127	147	158	172	175
85	502	574	615	667	687	83	95	102	112	112	127	143	153	167	170

MedAmerica Insurance Company
165 Court Street, Rochester, New York 14647

Home Health Only Tax Qualified Policy

Individual Rates for 20-Year Premium Payment Option
0 Day Elimination Period
Annual Premium Rates with 20% Rate Increase
Rates per \$10 Daily Benefit

Policy Form: HTQ11-338-MA-PA-601
Base Rates with No Inflation Protection

Rider: 11-SIP-PA-998
Simple Inflation Protection Rider

Rider: 11-CIP-PA-998
Compound Inflation Protection Rider

Issue Age	Benefit Period					Benefit Period					Benefit Period				
	2 Years	3 Years	4 Years	5 Years	Lifetime	2 Years	3 Years	4 Years	5 Years	Lifetime	2 Years	3 Years	4 Years	5 Years	Lifetime
<40	32	37	40	45	57	18	23	27	30	37	83	100	112	125	143
40	32	38	42	47	58	20	23	28	32	40	85	102	113	127	145
41	33	40	43	50	62	22	25	30	32	40	87	102	115	127	145
42	35	42	45	52	63	22	27	30	33	42	87	103	117	128	148
43	37	43	48	53	67	23	28	32	37	43	88	105	117	132	148
44	38	45	50	55	68	23	28	33	38	47	88	107	118	133	150
45	40	47	52	58	72	25	30	35	38	47	90	108	120	133	152
46	42	48	53	60	75	27	33	37	42	48	92	110	122	135	152
47	43	52	57	63	77	28	33	38	43	52	92	110	122	137	153
48	45	53	58	67	80	30	35	42	45	53	93	112	125	137	153
49	47	55	62	70	83	32	38	42	47	57	93	110	122	135	152
50	48	57	63	72	85	33	40	43	48	57	93	112	123	137	153
51	50	58	65	73	87	33	40	45	50	58	93	112	123	137	153
52	52	60	67	75	88	33	42	47	52	60	93	112	125	138	155
53	53	63	70	78	93	37	43	48	55	62	93	110	122	137	152
54	57	67	75	83	98	38	45	50	57	63	93	112	122	137	150
55	60	70	78	88	102	40	48	53	58	68	95	113	123	137	153
56	63	75	83	92	107	42	50	55	63	72	97	113	125	140	153
57	67	78	87	98	112	45	53	58	65	73	97	115	127	140	155
58	72	83	92	103	118	45	55	62	68	77	97	117	128	142	155
59	75	88	98	108	125	48	58	63	72	78	98	117	128	143	155
60	78	92	100	112	127	48	58	65	73	82	97	115	127	140	153
61	82	97	107	118	135	52	62	68	75	83	98	117	127	142	153
62	87	103	113	127	142	55	63	70	78	87	100	117	128	142	155
63	93	108	120	133	150	55	67	73	82	90	100	118	130	143	155
64	98	117	128	142	158	58	68	75	85	93	102	118	130	145	157
65	105	123	137	152	168	62	73	78	88	97	103	122	132	145	157
66	118	138	152	168	187	67	78	87	97	105	108	128	140	155	167
67	127	148	163	180	198	68	82	88	100	108	110	128	140	157	168
68	135	158	173	192	212	72	85	93	103	110	112	130	143	158	168
69	145	168	185	205	225	73	88	97	107	113	112	132	143	158	168
70	155	180	198	220	240	77	90	98	108	117	113	133	145	158	168
71	175	203	224	247	269	83	98	107	118	125	120	140	153	168	178
72	187	218	239	264	285	85	100	110	122	128	120	140	153	170	178
73	198	232	254	280	302	88	103	113	125	130	122	142	155	170	178
74	212	247	270	299	319	90	105	115	127	133	122	142	155	170	178
75	225	262	285	314	334	90	103	113	125	130	120	138	150	165	173
76	257	297	324	355	377	95	112	122	133	138	125	147	158	175	182
77	275	319	347	380	402	97	113	123	135	140	125	147	158	175	180
78	295	342	370	407	427	98	113	125	137	142	127	145	158	173	180
79	317	365	397	435	455	83	97	105	115	120	125	147	158	172	178
80	340	394	427	467	487	83	97	105	113	118	127	145	157	172	177
81	367	422	457	500	519	85	97	105	113	118	125	145	157	170	177
82	395	454	490	535	555	83	97	103	113	115	125	145	155	168	173
83	425	489	527	574	594	83	95	102	112	113	125	143	153	167	172
84	459	525	565	614	634	82	95	100	112	112	125	143	152	167	170
85	495	565	607	657	677	82	93	98	108	110	123	142	150	163	167

MedAmerica Insurance Company
165 Court Street, Rochester, New York 14647

Facility Only Tax Qualified Policy

Individual Rates for Lifetime Premium Payment Option
0 Day Elimination Period
Annual Premium Rates with the Requested Rate Increase
Rates per \$10 Daily Benefit

Policy Form: NTQ11-337-MA-PA-601
Base Rates with No Inflation Protection

Rider: 11-SIP-PA-998
Simple Inflation Protection Rider

Rider: 11-CIP-PA-998
Compound Inflation Protection Rider

Issue Age	Benefit Period					Benefit Period					Benefit Period				
	2 Years	3 Years	4 Years	5 Years	Lifetime	2 Years	3 Years	4 Years	5 Years	Lifetime	2 Years	3 Years	4 Years	5 Years	Lifetime
<40	24	28	31	35	72	12	14	19	21	48	59	75	94	106	219
40	24	28	33	38	76	14	19	21	24	52	63	80	96	110	227
41	26	31	35	40	80	14	19	24	26	56	63	82	101	115	235
42	28	33	38	42	88	14	19	24	28	60	66	85	103	120	243
43	28	35	40	45	92	16	21	26	31	68	71	89	108	125	255
44	31	38	42	47	100	19	24	28	33	72	73	92	113	129	263
45	33	40	45	52	108	19	24	33	35	76	75	96	118	134	271
46	35	42	49	54	116	21	28	33	40	80	78	99	120	141	279
47	38	45	52	59	124	24	31	38	42	88	80	103	127	146	291
48	40	47	56	63	132	24	33	40	45	96	82	108	129	150	303
49	42	52	61	68	144	28	35	42	49	104	87	113	134	155	311
50	45	54	66	73	152	31	40	47	54	116	89	115	136	160	319
51	45	56	66	75	156	31	38	47	54	112	92	115	141	160	323
52	49	61	71	80	168	33	42	52	61	124	92	118	143	165	327
53	52	66	78	87	184	38	45	56	66	132	96	122	148	172	339
54	56	71	85	96	196	40	49	59	68	144	99	127	153	176	355
55	61	78	92	103	215	42	54	66	75	156	103	132	160	183	367
56	66	82	99	113	231	47	59	73	82	168	108	139	167	190	383
57	73	92	108	125	255	49	63	78	87	180	110	141	172	197	391
58	80	99	118	134	275	52	68	85	96	196	113	148	179	207	411
59	87	108	129	148	303	56	75	89	103	207	118	153	186	214	423
60	92	115	139	157	319	61	78	94	108	223	120	155	188	216	431
61	99	127	150	172	351	66	82	103	118	235	125	160	195	226	443
62	108	139	165	188	383	71	89	110	127	255	129	167	202	233	459
63	120	150	181	207	419	75	99	118	136	271	134	174	209	242	475
64	129	165	197	228	459	82	106	127	146	287	141	181	219	249	491
65	143	183	219	251	503	87	110	136	155	311	146	186	228	259	515
66	165	209	254	289	583	99	127	153	176	347	157	204	247	284	555
67	181	230	277	317	634	103	134	162	188	371	162	212	256	294	579
68	197	254	306	350	698	110	141	172	197	391	169	219	263	303	595
69	216	277	334	383	762	118	150	183	212	415	176	226	275	315	614
70	237	306	369	423	838	125	160	193	221	435	181	233	282	324	634
71	275	355	428	491	970	139	176	216	247	487	197	254	308	353	690
72	301	388	470	538	1,065	143	186	226	261	507	202	261	315	364	706
73	329	425	512	590	1,165	150	193	237	273	531	207	266	324	374	726
74	360	463	562	644	1,269	155	202	247	284	555	212	273	331	383	742
75	388	496	599	689	1,349	155	204	249	284	555	207	270	329	376	734
76	449	578	700	804	1,576	174	226	273	315	610	226	294	355	409	794
77	491	635	768	884	1,728	179	230	282	324	634	230	296	362	416	810
78	538	696	844	971	1,895	183	237	289	334	650	230	301	367	423	818
79	588	761	924	1,065	2,075	157	204	249	287	559	235	303	371	428	830
80	644	834	1,015	1,170	2,282	162	209	254	296	571	240	313	378	437	846
81	703	914	1,112	1,283	2,498	162	209	259	296	575	242	313	381	442	854
82	766	996	1,215	1,403	2,729	165	214	259	301	575	242	315	383	444	858
83	834	1,086	1,325	1,532	2,977	162	214	259	301	579	242	317	385	447	862
84	909	1,184	1,445	1,673	3,248	162	212	261	301	579	242	317	388	449	866
85	989	1,290	1,577	1,828	3,543	162	209	256	296	575	242	317	388	449	870

MedAmerica Insurance Company
165 Court Street, Rochester, New York 14647

Facility Only Tax Qualified Policy

Individual Rates for 10-Year Premium Payment Option
0 Day Elimination Period
Annual Premium Rates with the Requested Rate Increase
Rates per \$10 Daily Benefit

Policy Form: NTQ11-337-MA-PA-601
Base Rates with No Inflation Protection

Rider: 11-SIP-PA-998
Simple Inflation Protection Rider

Rider: 11-CIP-PA-998
Compound Inflation Protection Rider

Issue Age	Benefit Period					Benefit Period					Benefit Period				
	2 Years	3 Years	4 Years	5 Years	Lifetime	2 Years	3 Years	4 Years	5 Years	Lifetime	2 Years	3 Years	4 Years	5 Years	Lifetime
<40	56	71	82	92	192	40	49	61	71	148	221	282	341	392	790
40	59	73	85	96	200	42	54	66	75	160	223	287	348	400	806
41	63	78	92	103	211	45	56	68	80	172	226	291	353	404	818
42	66	82	96	108	223	47	61	73	87	180	230	296	357	414	830
43	71	87	101	115	239	49	63	80	92	192	233	301	364	418	838
44	73	92	108	122	251	54	68	82	96	203	237	306	369	423	854
45	78	96	113	129	267	56	73	89	103	215	240	310	376	430	862
46	82	101	120	136	283	59	78	94	110	227	242	315	381	437	874
47	87	106	127	146	299	63	85	101	115	243	247	320	385	442	886
48	92	113	134	153	319	68	89	108	125	255	249	324	392	449	898
49	96	120	143	162	335	73	94	113	134	275	244	317	383	442	882
50	99	125	150	172	351	78	99	120	139	287	251	322	388	447	894
51	101	127	150	174	359	78	101	122	139	287	249	322	390	447	890
52	106	134	160	181	375	82	103	127	148	299	251	324	392	454	902
53	113	141	169	193	399	85	113	134	157	319	247	320	385	444	882
54	120	150	181	207	423	89	118	143	165	339	249	322	390	449	894
55	127	160	193	221	451	96	125	150	174	355	251	327	392	451	902
56	134	172	204	235	479	103	132	160	183	375	254	327	397	456	910
57	143	181	219	249	511	108	141	169	195	395	256	331	402	463	918
58	153	193	233	266	547	113	148	179	207	411	259	334	404	465	922
59	162	207	247	284	579	120	153	188	216	435	256	331	404	463	914
60	167	212	254	291	595	120	157	190	219	439	256	331	402	461	914
61	176	226	273	313	634	127	165	197	228	459	254	329	397	456	902
62	188	240	289	334	674	132	172	209	237	479	256	331	400	458	906
63	200	256	310	355	718	139	179	216	249	495	256	331	400	461	910
64	214	273	329	378	762	143	186	226	259	519	256	331	402	463	910
65	228	291	353	404	814	148	193	235	270	535	259	334	404	465	914
66	256	329	397	456	914	162	209	256	296	587	273	353	428	491	966
67	273	350	423	486	974	167	216	263	303	599	270	353	428	491	962
68	289	371	451	517	1,033	172	223	270	313	614	273	353	425	491	962
69	308	397	479	552	1,097	176	228	280	320	630	270	350	425	489	962
70	327	423	512	588	1,169	181	233	284	329	642	270	350	423	489	954
71	369	477	578	665	1,317	195	254	308	355	698	284	369	449	517	1,013
72	392	508	616	710	1,400	197	259	313	362	710	282	367	447	512	1,005
73	418	541	656	754	1,492	200	261	317	367	718	280	364	444	512	998
74	442	573	696	804	1,584	204	266	322	371	726	280	362	442	505	986
75	463	597	724	832	1,632	197	259	313	362	706	266	345	421	486	946
76	526	679	825	949	1,867	212	277	338	390	758	280	367	447	515	998
77	562	729	886	1,020	1,999	214	280	338	392	766	280	362	439	510	990
78	602	780	949	1,095	2,143	216	282	343	397	770	277	360	437	505	982
79	646	839	1,020	1,177	2,302	181	237	291	336	650	273	355	435	503	974
80	696	905	1,102	1,274	2,482	181	237	289	334	650	273	353	432	498	970
81	750	973	1,187	1,372	2,673	181	237	289	334	646	268	350	428	496	958
82	806	1,050	1,281	1,483	2,885	179	233	287	331	638	266	345	425	489	950
83	867	1,130	1,382	1,600	3,108	176	233	282	327	634	266	345	421	486	942
84	935	1,220	1,492	1,730	3,356	174	228	280	324	626	263	343	418	482	938
85	1,011	1,318	1,614	1,871	3,631	172	226	275	320	618	259	338	414	479	926

MedAmerica Insurance Company
165 Court Street, Rochester, New York 14647

Facility Only Tax Qualified Policy

Individual Rates for 20-Year Premium Payment Option
0 Day Elimination Period
Annual Premium Rates with the Requested Rate Increase
Rates per \$10 Daily Benefit

Policy Form: NTQ11-337-MA-PA-601
Base Rates with No Inflation Protection

Rider: 11-SIP-PA-998
Simple Inflation Protection Rider

Rider: 11-CIP-PA-998
Compound Inflation Protection Rider

Issue Age	Benefit Period					Benefit Period					Benefit Period				
	2 Years	3 Years	4 Years	5 Years	Lifetime	2 Years	3 Years	4 Years	5 Years	Lifetime	2 Years	3 Years	4 Years	5 Years	Lifetime
<40	35	42	49	54	116	24	31	35	42	88	129	167	202	233	467
40	35	45	52	59	120	26	31	40	45	96	134	169	207	237	475
41	38	47	54	61	128	28	33	42	49	100	136	174	212	242	483
42	40	49	59	66	136	28	35	42	52	108	136	176	212	244	491
43	42	52	61	71	144	31	40	47	54	116	139	181	216	249	499
44	45	54	66	73	152	33	42	49	59	124	141	183	221	254	511
45	47	59	68	78	164	35	45	54	63	128	143	186	226	259	515
46	49	61	73	82	172	38	47	56	66	136	148	190	228	263	523
47	52	66	78	87	184	40	49	61	71	144	150	193	233	268	531
48	56	71	82	94	196	40	52	66	75	152	150	195	237	270	539
49	59	73	87	99	207	45	59	71	82	164	153	197	237	275	543
50	63	78	94	106	219	47	61	73	87	176	150	195	233	270	539
51	63	78	94	106	219	47	61	73	87	176	155	202	242	280	555
52	66	85	99	113	235	52	63	80	92	184	153	195	240	275	543
53	71	89	106	122	251	54	68	85	96	196	155	197	240	275	547
54	75	96	113	129	267	59	73	92	103	211	157	200	244	282	555
55	80	101	122	139	287	61	80	96	110	223	160	207	247	284	563
56	87	110	132	150	307	63	82	101	118	235	162	207	251	289	575
57	94	118	141	162	331	68	89	108	125	251	162	212	256	294	583
58	99	127	150	174	355	75	94	115	132	263	167	214	261	298	591
59	108	136	162	186	379	78	101	122	141	283	169	219	266	306	602
60	113	143	172	195	399	80	103	125	146	291	167	216	261	301	595
61	120	153	186	212	431	87	110	132	153	303	172	221	266	306	602
62	129	167	200	228	463	92	115	141	162	323	174	223	270	310	610
63	141	179	216	247	499	94	122	148	172	339	176	228	275	315	622
64	150	193	233	268	539	101	132	157	181	359	181	233	280	320	630
65	165	209	251	289	583	106	139	167	190	375	183	237	287	329	642
66	186	240	289	331	662	118	150	183	209	415	195	251	303	350	686
67	202	259	313	360	714	122	160	193	221	439	200	256	310	355	702
68	219	282	338	390	774	129	165	202	230	459	202	261	317	362	710
69	237	306	369	423	842	134	174	212	242	475	207	266	322	369	722
70	259	331	402	461	914	141	183	221	254	495	209	270	327	376	734
71	296	381	461	531	1,049	155	200	244	277	547	223	291	353	404	790
72	322	414	503	576	1,141	160	209	251	291	567	228	296	357	414	802
73	350	451	545	627	1,237	165	214	263	301	587	230	298	364	418	814
74	378	489	592	682	1,341	172	223	270	310	606	233	303	369	423	826
75	404	522	630	724	1,420	172	221	270	310	602	230	296	362	416	806
76	468	604	731	841	1,648	186	242	296	341	662	247	320	388	447	870
77	510	658	799	919	1,799	190	249	303	350	678	247	322	392	451	874
78	555	717	872	1,003	1,959	195	256	310	360	698	249	327	395	456	886
79	604	783	952	1,095	2,139	167	219	266	308	595	251	327	397	461	890
80	658	853	1,039	1,199	2,338	169	223	273	313	602	254	331	402	465	898
81	717	931	1,133	1,309	2,550	169	223	273	315	606	254	329	404	465	902
82	778	1,013	1,234	1,426	2,773	172	221	273	315	614	254	331	404	468	906
83	844	1,100	1,342	1,553	3,016	172	223	273	315	610	254	331	404	468	906
84	917	1,194	1,459	1,692	3,280	169	223	270	313	606	254	331	404	468	906
85	994	1,297	1,586	1,840	3,567	167	221	270	313	602	254	331	404	468	906

MedAmerica Insurance Company
165 Court Street, Rochester, New York 14647

Comprehensive Tax Qualified Policy

Individual Rates for Lifetime Premium Payment Option
0 Day Elimination Period
Annual Premium Rates with the Requested Rate Increase
Rates per \$10 Daily Benefit

Policy Form: LTQ11-336-MA-PA-601
Base Rates with No Inflation Protection

Rider: 11-SIP-PA-998
Simple Inflation Protection Rider

Rider: 11-CIP-PA-998
Compound Inflation Protection Rider

Issue Age	Benefit Period					Benefit Period					Benefit Period				
	2 Years	3 Years	4 Years	5 Years	Lifetime	2 Years	3 Years	4 Years	5 Years	Lifetime	2 Years	3 Years	4 Years	5 Years	Lifetime
<40	31	38	45	49	112	19	24	28	35	76	75	96	118	139	291
40	33	40	47	54	120	19	26	31	35	80	78	101	122	141	299
41	35	42	49	56	124	21	28	35	40	88	80	103	129	148	311
42	38	45	54	61	132	21	26	35	42	96	82	108	132	153	323
43	40	47	56	66	144	24	33	40	45	100	85	113	136	157	331
44	42	52	61	68	152	26	33	42	49	108	87	115	141	165	343
45	45	54	63	73	164	28	38	47	54	116	92	120	148	172	355
46	47	59	68	80	172	31	38	49	56	124	94	122	153	174	367
47	49	61	73	85	184	33	45	54	61	136	99	129	157	183	383
48	54	66	80	92	200	35	47	56	66	144	101	134	162	188	391
49	56	71	85	99	211	38	49	61	71	156	106	139	169	195	407
50	61	75	92	106	227	42	54	66	75	168	106	141	172	197	411
51	61	78	92	106	231	42	54	68	78	168	110	141	174	202	419
52	66	82	101	115	247	45	59	71	85	180	110	143	174	202	423
53	71	89	108	125	267	49	63	78	89	192	115	148	181	209	435
54	78	96	118	134	291	52	68	82	99	203	118	155	188	219	447
55	82	106	127	146	311	56	73	89	106	223	122	157	195	226	467
56	89	113	139	157	339	61	80	96	115	239	127	165	200	235	479
57	96	125	150	172	367	66	85	103	122	255	132	169	207	242	495
58	106	134	162	188	399	71	92	113	129	271	134	176	216	249	511
59	115	146	176	204	431	75	99	122	141	295	139	181	223	256	527
60	120	155	188	216	459	80	103	127	148	303	141	183	223	261	531
61	132	169	204	237	499	85	110	136	157	327	146	188	233	268	547
62	143	183	223	259	543	89	120	146	169	347	148	195	240	275	563
63	155	200	244	282	591	96	127	155	181	371	155	202	244	284	579
64	169	219	266	308	642	103	134	167	193	395	160	207	254	294	595
65	186	240	291	336	702	110	143	179	207	423	165	214	263	306	618
66	212	275	334	388	806	125	162	200	230	471	179	233	287	329	666
67	233	301	367	423	878	129	172	212	247	499	181	237	294	341	686
68	254	327	400	463	958	136	183	226	261	531	186	247	303	350	706
69	275	357	437	508	1,045	146	193	237	275	559	193	254	310	360	722
70	301	392	479	557	1,145	153	202	249	289	587	197	259	317	369	742
71	345	451	555	644	1,321	172	226	277	322	654	214	280	343	397	802
72	378	494	606	705	1,444	176	235	289	336	682	216	284	350	407	818
73	411	538	663	768	1,576	183	244	301	353	710	219	289	355	416	830
74	447	585	721	839	1,716	193	254	315	367	738	223	294	362	421	842
75	477	623	766	893	1,815	193	256	317	367	742	219	289	355	411	822
76	552	724	893	1,041	2,119	212	282	348	407	822	233	308	381	442	886
77	604	794	980	1,144	2,326	216	289	360	421	846	233	310	383	444	886
78	658	870	1,076	1,257	2,550	226	298	369	432	874	235	310	383	444	890
79	719	952	1,180	1,379	2,797	193	256	317	374	750	235	308	383	447	886
80	790	1,046	1,300	1,523	3,084	197	261	324	381	770	235	310	383	447	890
81	860	1,142	1,424	1,671	3,384	197	266	329	388	778	235	308	381	442	878
82	938	1,250	1,558	1,833	3,707	200	266	331	390	786	230	303	376	435	862
83	1,022	1,363	1,704	2,007	4,058	200	268	334	390	786	226	298	369	428	842
84	1,114	1,488	1,864	2,197	4,441	200	268	334	392	786	221	291	357	416	818
85	1,213	1,624	2,035	2,404	4,860	197	266	331	392	786	216	282	348	404	790

MedAmerica Insurance Company
165 Court Street, Rochester, New York 14647

Comprehensive Tax Qualified Policy

Individual Rates for 10-Year Premium Payment Option
0 Day Elimination Period
Annual Premium Rates with the Requested Rate Increase
Rates per \$10 Daily Benefit

Policy Form: LTQ11-336-MA-PA-601
Base Rates with No Inflation Protection

Rider: 11-SIP-PA-998
Simple Inflation Protection Rider

Rider: 11-CIP-PA-998
Compound Inflation Protection Rider

Issue Age	Benefit Period					Lifetime	Benefit Period					Lifetime	Benefit Period					Lifetime
	2 Years	3 Years	4 Years	5 Years	Lifetime		2 Years	3 Years	4 Years	5 Years	Lifetime		2 Years	3 Years	4 Years	5 Years	Lifetime	
<40	78	96	115	132	291	56	73	89	103	227	268	348	428	496	1,029			
40	80	101	122	139	307	61	78	94	110	239	273	355	432	503	1,041			
41	85	106	127	148	323	63	82	101	115	255	275	360	439	508	1,057			
42	89	113	134	155	339	66	87	108	125	271	280	364	447	517	1,073			
43	94	118	143	165	359	71	92	113	132	283	282	369	451	522	1,085			
44	99	125	150	174	379	75	96	120	139	299	287	374	458	529	1,097			
45	103	132	160	183	399	80	103	125	148	319	291	378	463	536	1,113			
46	110	139	167	193	423	82	110	134	157	335	294	383	470	545	1,125			
47	115	148	179	204	447	89	115	141	165	355	298	385	472	550	1,137			
48	122	155	188	216	471	94	122	150	176	375	301	392	479	557	1,149			
49	129	165	200	230	499	99	129	157	186	395	294	383	470	545	1,121			
50	134	172	209	240	519	103	134	165	193	411	298	388	475	552	1,141			
51	136	174	212	244	527	106	136	167	195	419	296	388	475	550	1,133			
52	143	181	221	256	551	108	143	174	202	431	301	392	479	557	1,149			
53	150	193	235	270	583	115	150	183	216	455	294	383	470	545	1,117			
54	160	204	249	289	618	122	160	195	226	475	296	385	472	548	1,125			
55	169	219	266	306	654	127	167	204	240	503	298	388	475	552	1,133			
56	179	230	282	327	694	136	176	216	249	527	301	392	479	555	1,141			
57	190	244	298	345	734	141	186	228	266	555	301	395	482	559	1,145			
58	202	261	317	369	782	148	193	237	275	579	301	395	484	562	1,149			
59	214	277	338	390	826	155	202	249	291	606	298	388	477	557	1,133			
60	219	282	345	402	846	157	204	251	291	606	298	390	477	552	1,133			
61	233	301	367	425	898	162	214	263	306	630	291	383	472	548	1,113			
62	247	320	390	454	950	169	221	273	317	658	291	383	472	545	1,113			
63	261	338	414	482	1,009	176	230	284	329	682	294	383	472	545	1,109			
64	277	360	439	510	1,069	181	240	296	343	706	291	383	470	548	1,109			
65	294	383	470	545	1,137	188	247	306	355	730	291	383	470	545	1,105			
66	329	428	524	611	1,269	204	270	334	388	798	306	402	496	573	1,165			
67	348	454	557	649	1,345	212	277	343	400	818	303	400	494	571	1,157			
68	369	482	592	689	1,424	216	284	350	409	838	301	397	489	566	1,149			
69	390	510	627	731	1,512	221	291	360	418	854	298	395	486	564	1,137			
70	414	543	667	778	1,604	226	296	367	428	874	296	390	482	557	1,125			
71	463	609	752	877	1,803	242	320	395	463	946	310	409	503	585	1,185			
72	491	646	797	931	1,915	244	324	404	470	958	306	402	498	578	1,165			
73	519	684	846	989	2,031	249	329	409	477	970	301	397	491	571	1,149			
74	550	726	898	1,050	2,151	251	331	414	482	978	296	390	484	562	1,129			
75	571	752	928	1,083	2,210	244	324	402	470	950	282	371	458	533	1,069			
76	646	853	1,058	1,236	2,526	261	348	432	505	1,021	294	388	479	559	1,117			
77	691	914	1,133	1,328	2,705	263	350	437	510	1,033	287	381	470	548	1,097			
78	740	980	1,217	1,426	2,905	263	353	439	515	1,037	282	371	461	536	1,069			
79	792	1,053	1,309	1,535	3,120	226	296	371	437	882	277	362	449	526	1,045			
80	853	1,135	1,415	1,661	3,372	223	298	371	437	882	270	357	439	515	1,025			
81	917	1,222	1,525	1,795	3,639	223	296	369	432	878	266	348	430	501	994			
82	987	1,318	1,647	1,941	3,934	223	294	369	432	870	256	338	418	486	962			
83	1,065	1,422	1,781	2,101	4,253	216	294	364	428	862	249	329	404	470	930			
84	1,149	1,537	1,927	2,277	4,604	216	289	360	423	854	240	317	390	454	894			
85	1,241	1,664	2,087	2,470	4,991	212	282	357	418	842	233	303	376	435	854			

MedAmerica Insurance Company
165 Court Street, Rochester, New York 14647

Comprehensive Tax Qualified Policy

Individual Rates for 20-Year Premium Payment Option
0 Day Elimination Period
Annual Premium Rates with the Requested Rate Increase
Rates per \$10 Daily Benefit

Policy Form: LTQ11-336-MA-PA-601
Base Rates with No Inflation Protection

Rider: 11-SIP-PA-998
Simple Inflation Protection Rider

Rider: 11-CIP-PA-998
Compound Inflation Protection Rider

Issue Age	Benefit Period					Benefit Period					Benefit Period				
	2 Years	3 Years	4 Years	5 Years	Lifetime	2 Years	3 Years	4 Years	5 Years	Lifetime	2 Years	3 Years	4 Years	5 Years	Lifetime
<40	47	59	68	80	176	33	42	54	61	136	160	207	254	294	606
40	49	61	73	85	184	35	47	56	66	144	162	212	259	296	618
41	52	63	78	89	196	38	49	59	68	152	165	214	261	303	626
42	54	68	82	94	203	40	52	63	73	164	167	216	266	308	638
43	56	73	87	99	215	42	54	66	80	172	172	219	261	313	646
44	61	75	92	106	227	45	59	71	82	184	172	226	273	317	658
45	63	80	96	110	243	47	63	75	89	188	174	228	277	322	662
46	68	85	103	118	255	49	66	80	94	203	176	230	282	327	674
47	71	89	108	125	271	54	71	87	101	215	181	235	287	331	682
48	75	96	115	134	287	56	73	92	106	227	183	237	291	336	694
49	80	101	122	141	303	61	80	96	113	243	183	240	291	338	694
50	85	108	129	150	323	63	82	103	118	251	181	235	289	331	686
51	85	108	129	150	323	63	82	103	120	255	186	242	298	343	706
52	89	115	139	160	343	68	87	108	127	267	183	237	291	336	694
53	96	122	148	172	367	71	94	115	132	279	183	237	291	336	690
54	101	129	157	183	391	78	101	122	141	295	186	242	296	341	698
55	108	139	169	195	415	82	106	129	150	315	188	244	298	348	710
56	115	148	181	209	443	87	113	136	157	331	190	249	303	350	718
57	125	160	193	223	475	89	118	146	169	351	193	251	308	357	726
58	132	169	207	240	507	96	127	153	179	371	195	256	313	360	734
59	141	183	221	256	543	101	132	165	188	391	197	256	317	367	742
60	148	190	233	268	567	103	136	167	195	399	195	254	310	362	734
61	160	204	249	289	606	108	143	176	204	423	195	259	315	364	742
62	172	221	268	310	650	115	150	186	216	443	197	261	320	369	750
63	183	237	289	334	698	122	157	195	228	467	202	263	322	374	758
64	197	254	310	360	750	127	169	207	240	491	204	268	327	378	766
65	212	275	336	390	810	134	176	216	249	511	207	270	331	383	774
66	240	313	381	442	914	148	193	240	277	567	221	287	353	409	830
67	259	336	411	477	986	155	202	249	289	595	223	291	357	414	838
68	280	364	447	517	1,065	162	212	261	303	618	226	294	362	418	846
69	301	392	482	559	1,153	169	221	273	317	642	228	298	367	425	854
70	327	425	524	606	1,249	174	230	282	331	670	230	303	369	430	862
71	371	486	599	696	1,428	193	254	310	364	738	244	322	395	458	922
72	402	526	649	757	1,548	200	263	324	376	762	247	324	400	461	930
73	435	571	705	820	1,676	204	270	334	390	790	247	327	400	465	938
74	470	618	761	888	1,815	212	280	345	402	814	249	327	404	468	938
75	498	656	806	940	1,911	212	277	345	402	814	242	317	395	456	914
76	576	757	935	1,090	2,222	228	303	376	442	886	256	338	416	486	970
77	625	825	1,020	1,194	2,426	235	313	388	451	914	256	338	418	484	970
78	679	898	1,114	1,304	2,649	242	322	397	465	934	256	338	416	482	962
79	740	980	1,217	1,426	2,893	204	275	341	400	802	254	334	411	479	954
80	806	1,072	1,332	1,563	3,168	209	277	345	407	814	251	331	409	477	946
81	877	1,166	1,455	1,708	3,459	212	280	348	409	822	249	329	404	470	934
82	954	1,271	1,586	1,866	3,779	209	280	353	414	826	244	322	397	463	914
83	1,036	1,382	1,730	2,037	4,122	209	282	350	414	826	237	315	388	451	890
84	1,126	1,504	1,885	2,223	4,493	207	277	348	411	826	233	308	378	439	866
85	1,222	1,636	2,052	2,425	4,900	207	277	345	411	822	226	296	367	425	834

MedAmerica Insurance Company
165 Court Street, Rochester, New York 14647

Franchise Comprehensive Tax Qualified Policy

Individual Rates for Lifetime Premium Payment Option
0 Day Elimination Period
Annual Premium Rates with the Requested Rate Increase
Rates per \$10 Daily Benefit

Policy Form: FLQ11-336-MA-PA-601
Base Rates with No Inflation Protection

Rider: 11-SIP-PA-998
Simple Inflation Protection Rider

Rider: 11-CIP-PA-998
Compound Inflation Protection Rider

Issue Age	Benefit Period					Benefit Period					Benefit Period				
	2 Years	3 Years	4 Years	5 Years	Lifetime	2 Years	3 Years	4 Years	5 Years	Lifetime	2 Years	3 Years	4 Years	5 Years	Lifetime
<40	28	33	40	45	100	16	21	26	31	68	68	87	106	125	263
40	31	35	42	49	108	16	24	28	31	72	68	92	110	127	271
41	33	38	45	52	112	19	26	31	35	80	71	94	115	132	279
42	33	40	49	54	120	21	24	31	40	84	75	99	118	139	291
43	35	42	52	59	128	21	31	35	40	92	78	101	122	143	299
44	38	47	54	61	136	24	28	40	45	100	80	103	127	148	311
45	40	49	56	66	148	26	33	42	49	104	82	108	134	155	319
46	42	54	61	73	156	28	33	45	49	112	85	108	139	155	331
47	45	54	66	75	164	31	42	49	56	124	89	118	141	167	347
48	49	59	73	82	180	31	42	49	59	128	89	122	146	169	351
49	52	63	75	89	192	33	45	56	63	140	94	125	153	176	367
50	54	68	82	96	203	40	49	59	66	152	96	127	155	176	371
51	54	71	82	96	207	40	47	61	68	152	101	127	157	181	379
52	59	75	92	103	223	40	52	63	78	160	101	127	155	183	379
53	63	80	96	113	239	45	59	71	80	176	103	134	165	188	391
54	71	87	106	120	263	47	61	75	89	184	106	139	169	197	403
55	75	96	115	132	279	49	63	80	94	203	108	141	174	202	423
56	80	101	125	141	307	56	73	87	103	215	115	148	181	212	431
57	87	113	136	155	331	59	75	92	110	227	118	153	186	216	443
58	96	120	146	169	359	63	82	101	118	243	120	160	195	223	459
59	103	132	160	183	387	68	89	108	127	267	125	162	200	230	475
60	108	139	169	195	415	73	94	115	134	271	127	167	202	235	475
61	118	153	183	214	451	78	99	125	141	291	132	169	209	242	491
62	129	165	202	233	487	80	108	129	153	315	134	176	214	247	507
63	139	181	221	254	531	87	113	139	162	335	141	181	219	256	523
64	153	197	240	277	579	92	120	150	174	355	143	186	228	263	535
65	167	216	263	303	630	99	129	160	186	383	148	193	235	275	559
66	190	247	301	350	726	113	146	179	207	423	160	209	259	296	599
67	209	270	329	381	790	118	155	190	223	451	162	214	266	308	618
68	228	294	360	416	862	122	165	202	235	479	167	223	273	315	634
69	247	322	392	456	942	132	174	214	249	503	174	228	280	324	650
70	270	353	432	501	1,029	139	183	223	261	531	179	233	284	334	670
71	310	407	498	580	1,189	155	202	251	289	591	193	251	310	357	722
72	341	444	545	635	1,301	157	212	261	303	614	195	256	315	367	734
73	371	484	597	691	1,420	165	221	270	317	638	195	261	320	376	746
74	402	526	649	754	1,544	174	228	284	331	666	202	266	327	378	758
75	430	562	689	804	1,636	174	230	287	329	666	195	259	320	371	738
76	498	651	804	938	1,907	190	254	313	364	738	209	277	343	397	798
77	543	714	881	1,029	2,095	195	261	324	378	762	209	280	345	400	798
78	592	783	968	1,133	2,294	202	268	334	388	786	212	280	345	400	802
79	646	858	1,062	1,241	2,518	174	230	284	336	674	212	275	345	402	798
80	710	942	1,170	1,370	2,777	179	233	291	343	690	212	277	343	402	798
81	773	1,027	1,281	1,504	3,044	179	240	296	348	702	212	277	343	397	790
82	844	1,126	1,403	1,650	3,336	181	240	298	350	706	207	273	338	392	778
83	921	1,227	1,535	1,807	3,651	179	242	298	350	710	202	268	331	383	758
84	1,003	1,340	1,678	1,979	3,998	179	240	301	353	706	197	261	322	374	734
85	1,090	1,462	1,831	2,164	4,373	179	240	298	353	710	195	254	315	364	710

MedAmerica Insurance Company
165 Court Street, Rochester, New York 14647

Franchise Comprehensive Tax Qualified Policy

Individual Rates for 20-Year Premium Payment Option
0 Day Elimination Period
Annual Premium Rates with the Requested Rate Increase
Rates per \$10 Daily Benefit

Policy Form: FLQ11-336-MA-PA-601
Base Rates with No Inflation Protection

Rider: 11-SIP-PA-998
Simple Inflation Protection Rider

Rider: 11-CIP-PA-998
Compound Inflation Protection Rider

Issue Age	Benefit Period					Benefit Period					Benefit Period				
	2 Years	3 Years	4 Years	5 Years	Lifetime	2 Years	3 Years	4 Years	5 Years	Lifetime	2 Years	3 Years	4 Years	5 Years	Lifetime
<40	42	54	61	73	160	31	38	49	54	120	143	186	228	263	543
40	45	54	66	75	164	31	42	52	61	132	146	190	233	268	559
41	47	56	71	80	176	33	45	52	61	136	148	193	235	273	563
42	49	61	75	85	184	35	47	56	66	148	150	195	237	277	575
43	52	66	78	89	196	38	49	61	71	152	153	197	235	282	579
44	54	68	82	96	203	42	52	63	73	168	155	202	247	284	595
45	56	73	87	99	219	42	56	68	82	168	157	204	249	291	595
46	61	75	94	106	231	45	61	71	85	184	160	209	254	294	606
47	63	80	96	113	243	49	63	80	89	196	162	212	259	298	614
48	68	87	103	120	259	49	66	82	96	203	165	214	263	303	622
49	73	92	110	127	271	54	71	87	101	219	165	216	261	306	626
50	75	96	118	136	291	59	75	92	106	227	165	212	259	298	618
51	75	96	118	136	291	59	75	92	108	231	169	219	268	308	634
52	80	103	125	143	307	61	78	99	115	243	165	214	263	303	626
53	87	110	134	155	331	63	85	103	118	251	165	214	261	301	622
54	92	118	141	165	351	68	89	110	127	267	167	216	268	308	630
55	96	125	153	176	375	75	96	115	134	283	169	221	268	313	638
56	103	134	162	188	399	78	101	125	141	299	172	223	273	315	646
57	113	143	174	202	427	80	106	132	150	315	174	228	277	320	654
58	118	153	186	216	455	87	113	139	160	335	176	230	282	324	662
59	127	165	200	230	487	92	120	148	169	355	179	230	284	331	670
60	134	172	209	242	511	92	122	150	174	359	174	228	280	324	658
61	143	183	223	261	547	99	129	160	183	379	176	233	284	327	666
62	155	200	242	280	587	103	134	167	195	399	176	235	287	331	674
63	165	214	261	301	630	110	141	174	204	419	183	237	289	336	682
64	179	228	280	324	674	113	153	186	216	443	183	242	294	341	690
65	190	247	303	350	730	120	160	195	226	459	186	244	298	345	694
66	216	282	343	397	822	134	174	216	249	511	197	259	317	369	746
67	233	303	371	430	886	139	181	223	259	535	202	261	320	371	754
68	251	329	402	465	958	146	190	235	273	559	204	263	327	376	762
69	270	353	435	503	1,037	153	200	244	287	579	207	270	329	383	770
70	294	383	472	545	1,125	157	207	254	298	602	207	273	331	388	774
71	334	437	541	625	1,285	174	230	277	329	666	221	291	355	414	830
72	362	475	583	682	1,393	179	235	294	338	686	221	291	360	414	838
73	392	515	635	738	1,508	183	242	301	353	710	221	294	360	418	846
74	423	557	686	799	1,636	190	251	310	362	730	223	294	362	421	842
75	449	590	726	846	1,720	190	249	310	362	734	219	287	355	411	822
76	519	682	841	982	1,999	204	273	338	397	798	230	303	376	437	874
77	562	743	919	1,074	2,183	212	282	348	407	822	233	306	376	437	874
78	611	808	1,003	1,175	2,386	219	289	357	418	838	230	303	374	432	866
79	667	881	1,095	1,283	2,605	183	249	308	360	718	228	301	371	432	858
80	726	964	1,199	1,408	2,853	188	251	313	364	730	226	298	369	428	850
81	790	1,048	1,309	1,537	3,112	190	254	313	369	742	223	296	364	423	842
82	858	1,144	1,429	1,680	3,399	190	251	317	371	746	221	289	357	416	822
83	933	1,243	1,556	1,833	3,711	188	254	317	374	742	214	284	350	407	798
84	1,013	1,354	1,697	2,000	4,042	186	249	313	371	746	209	277	341	397	782
85	1,100	1,471	1,847	2,183	4,409	186	251	310	369	742	202	268	329	383	750

MedAmerica Insurance Company
165 Court Street, Rochester, New York 14647

Home Health Only Tax Qualified Policy

Individual Rates for Lifetime Premium Payment Option
0 Day Elimination Period
Annual Premium Rates with the Requested Rate Increase
Rates per \$10 Daily Benefit

Policy Form: HTQ11-338-MA-PA-601
Base Rates with No Inflation Protection

Rider: 11-SIP-PA-998
Simple Inflation Protection Rider

Rider: 11-CIP-PA-998
Compound Inflation Protection Rider

Issue Age	Benefit Period					Benefit Period					Benefit Period				
	2 Years	3 Years	4 Years	5 Years	Lifetime	2 Years	3 Years	4 Years	5 Years	Lifetime	2 Years	3 Years	4 Years	5 Years	Lifetime
<40	33	38	40	45	96	14	19	21	26	56	56	68	78	89	180
40	33	38	42	47	104	16	21	24	26	56	61	73	80	92	180
41	35	40	45	49	108	16	21	24	28	60	61	75	82	94	184
42	35	42	47	52	112	19	24	26	31	64	66	75	85	96	192
43	38	45	49	54	116	21	24	26	31	68	66	78	87	99	196
44	40	47	52	56	120	21	26	28	33	72	68	80	89	103	203
45	42	49	54	61	128	21	26	31	33	72	68	82	92	103	203
46	42	52	56	63	132	26	28	33	38	80	73	85	96	108	211
47	45	54	59	66	140	26	31	35	40	80	75	87	99	110	215
48	47	56	61	71	144	28	33	38	40	88	78	92	103	113	223
49	52	59	66	73	152	28	35	40	45	92	78	94	106	118	227
50	54	61	68	78	160	31	38	42	47	92	78	94	106	115	223
51	54	63	71	78	160	31	38	40	47	96	80	96	106	120	231
52	56	66	73	82	168	33	40	45	49	100	80	96	108	120	227
53	59	71	78	87	176	35	42	47	54	104	85	99	110	122	235
54	63	75	82	92	184	38	45	52	56	112	87	101	115	127	243
55	68	80	87	99	196	40	47	54	59	120	89	106	118	129	247
56	73	85	94	106	207	42	52	56	63	124	92	108	120	134	255
57	78	92	101	113	219	45	54	61	68	132	94	110	122	136	259
58	82	96	108	120	235	49	59	63	73	140	99	115	127	141	267
59	89	103	115	127	251	52	63	68	78	144	99	120	132	148	271
60	92	108	120	134	259	54	63	71	78	152	101	120	132	146	271
61	99	118	129	143	275	56	66	75	82	160	103	122	134	150	279
62	106	125	139	153	295	61	73	78	89	168	108	127	139	155	283
63	115	134	148	165	315	63	75	85	94	176	108	129	141	157	291
64	122	143	160	176	335	68	80	87	99	184	113	134	146	162	299
65	134	155	172	190	359	71	85	94	103	196	115	139	150	167	307
66	150	176	195	216	407	80	94	103	113	211	127	148	162	179	327
67	162	190	209	233	435	85	99	108	120	223	129	150	167	183	335
68	176	204	226	249	467	87	103	113	127	231	132	155	169	188	343
69	190	221	242	268	503	92	108	120	132	239	134	160	174	193	347
70	204	240	261	289	539	96	110	125	136	247	139	160	179	195	351
71	233	270	296	329	606	106	125	136	148	271	148	174	190	209	379
72	249	291	320	353	646	110	127	139	155	279	153	176	193	214	383
73	268	313	343	378	690	113	132	143	157	287	153	179	195	216	387
74	287	334	367	404	734	118	136	148	162	291	155	181	197	216	387
75	308	357	388	428	770	115	134	148	160	287	153	176	193	212	379
76	350	407	442	486	874	125	146	160	174	311	165	188	207	226	403
77	378	437	475	522	934	127	148	162	179	315	165	190	209	228	403
78	407	470	510	559	1,001	132	150	165	181	315	165	190	209	228	399
79	437	505	548	602	1,069	110	129	141	153	267	167	193	209	228	399
80	472	545	592	646	1,145	113	129	139	155	267	169	195	209	230	403
81	510	588	635	696	1,225	113	129	141	150	267	169	195	212	228	399
82	552	632	684	745	1,313	110	129	139	153	267	167	195	209	228	399
83	597	684	736	801	1,408	110	129	139	150	263	167	193	209	226	391
84	644	738	792	860	1,508	113	127	139	148	259	167	190	207	223	391
85	696	794	851	924	1,616	110	127	136	146	251	167	190	204	221	383

MedAmerica Insurance Company
165 Court Street, Rochester, New York 14647

Home Health Only Tax Qualified Policy

Individual Rates for 10-Year Premium Payment Option
0 Day Elimination Period
Annual Premium Rates with the Requested Rate Increase
Rates per \$10 Daily Benefit

Policy Form: HTQ11-338-MA-PA-601
Base Rates with No Inflation Protection

Rider: 11-SIP-PA-998
Simple Inflation Protection Rider

Rider: 11-CIP-PA-998
Compound Inflation Protection Rider

Issue Age	Benefit Period					Lifetime	Benefit Period					Lifetime	Benefit Period					Lifetime
	2 Years	3 Years	4 Years	5 Years	Lifetime		2 Years	3 Years	4 Years	5 Years	Lifetime		2 Years	3 Years	4 Years	5 Years	Lifetime	
<40	73	85	94	106	223	42	54	61	68	148	197	237	263	294	575			
40	75	87	96	108	231	47	56	66	75	156	200	240	268	301	583			
41	78	92	101	113	239	49	59	68	78	164	204	242	270	303	587			
42	80	94	106	118	251	52	63	71	80	164	207	247	273	306	587			
43	85	99	110	122	259	54	66	73	85	172	207	247	275	308	595			
44	87	103	115	129	267	56	68	78	87	184	209	249	277	308	599			
45	92	106	120	134	279	59	73	80	92	188	212	254	280	313	599			
46	94	110	125	139	287	63	75	85	96	196	214	254	282	315	602			
47	99	115	129	143	299	66	80	89	101	203	214	256	284	317	606			
48	103	120	134	150	311	68	85	94	106	207	212	254	280	310	583			
49	106	127	141	157	319	73	87	96	108	219	214	251	280	313	599			
50	108	129	143	160	323	75	87	99	110	219	214	251	277	310	583			
51	113	132	146	165	335	75	92	101	113	223	214	254	282	315	599			
52	113	134	148	167	335	78	92	103	115	227	216	254	282	313	587			
53	120	141	155	174	347	80	96	108	122	239	212	254	282	313	599			
54	125	148	162	183	363	85	101	113	125	243	209	247	275	306	575			
55	132	155	172	190	379	87	103	118	132	251	209	249	275	308	571			
56	136	162	179	200	395	94	110	122	136	259	212	249	277	308	571			
57	143	169	188	209	411	96	115	127	141	267	212	251	275	308	571			
58	150	179	197	219	427	101	118	132	148	279	214	249	275	308	571			
59	157	186	207	230	443	103	125	136	150	291	207	244	268	296	547			
60	160	188	209	233	447	103	122	134	150	283	212	249	273	303	567			
61	167	197	219	242	467	108	127	139	157	291	204	242	263	294	539			
62	176	207	228	254	487	110	132	146	160	299	204	240	263	294	535			
63	186	216	240	266	507	113	134	148	165	307	202	240	263	291	535			
64	195	228	251	277	527	115	136	150	169	315	202	237	261	289	531			
65	204	240	263	291	551	120	141	155	174	323	202	237	261	289	527			
66	226	266	291	322	606	129	150	167	186	343	212	247	273	301	547			
67	237	277	306	338	634	132	155	169	188	347	209	247	268	296	539			
68	249	291	320	353	658	134	157	174	193	351	207	242	266	296	535			
69	261	306	334	371	686	136	160	176	193	355	204	240	263	289	527			
70	273	320	350	388	718	139	162	179	195	355	204	237	261	287	515			
71	303	355	388	428	790	146	172	188	209	375	212	247	270	301	535			
72	317	371	407	449	822	148	172	188	209	375	209	244	266	294	527			
73	331	388	423	468	854	148	174	190	209	375	207	240	263	289	515			
74	348	404	442	489	886	148	174	190	207	371	202	237	259	282	503			
75	362	418	456	503	906	143	167	183	200	359	193	226	244	268	475			
76	402	468	508	559	1,005	153	176	195	212	375	202	233	256	280	491			
77	425	491	536	588	1,053	153	179	193	212	375	197	230	249	275	483			
78	449	519	564	620	1,105	153	176	193	209	371	195	226	247	268	471			
79	475	550	597	653	1,161	127	148	160	174	307	193	221	240	263	463			
80	505	583	632	691	1,225	127	146	157	174	303	190	221	237	261	455			
81	538	620	672	733	1,293	125	143	153	169	295	188	216	233	254	447			
82	576	660	714	778	1,369	122	143	153	167	295	183	214	228	249	435			
83	616	705	761	827	1,456	122	141	150	165	283	181	212	223	244	423			
84	660	754	811	881	1,544	118	139	148	162	279	179	207	223	242	419			
85	707	808	867	940	1,644	118	134	143	157	267	179	202	216	235	407			

MedAmerica Insurance Company
165 Court Street, Rochester, New York 14647

Home Health Only Tax Qualified Policy

Individual Rates for 20-Year Premium Payment Option
0 Day Elimination Period
Annual Premium Rates with the Requested Rate Increase
Rates per \$10 Daily Benefit

Policy Form: HTQ11-338-MA-PA-601
Base Rates with No Inflation Protection

Rider: 11-SIP-PA-998
Simple Inflation Protection Rider

Rider: 11-CIP-PA-998
Compound Inflation Protection Rider

Issue Age	Benefit Period					Benefit Period					Benefit Period				
	2 Years	3 Years	4 Years	5 Years	Lifetime	2 Years	3 Years	4 Years	5 Years	Lifetime	2 Years	3 Years	4 Years	5 Years	Lifetime
<40	45	52	56	63	136	26	33	38	42	88	118	141	157	176	343
40	45	54	59	66	140	28	33	40	45	96	120	143	160	179	347
41	47	56	61	71	148	31	35	42	45	96	122	143	162	179	347
42	49	59	63	73	152	31	38	42	47	100	122	146	165	181	355
43	52	61	68	75	160	33	40	45	52	104	125	148	165	186	355
44	54	63	71	78	164	33	40	47	54	112	125	150	167	188	359
45	56	66	73	82	172	35	42	49	54	112	127	153	169	188	363
46	59	68	75	85	180	38	47	52	59	116	129	155	172	190	363
47	61	73	80	89	184	40	47	54	61	124	129	155	172	193	367
48	63	75	82	94	192	42	49	59	63	128	132	157	176	193	367
49	66	78	87	99	200	45	54	59	66	136	132	155	172	190	363
50	68	80	89	101	203	47	56	61	68	136	132	157	174	193	367
51	71	82	92	103	207	47	56	63	71	140	132	157	174	193	367
52	73	85	94	106	211	47	59	66	73	144	132	157	176	195	371
53	75	89	99	110	223	52	61	68	78	148	132	155	172	193	363
54	80	94	106	118	235	54	63	71	80	152	132	157	172	193	359
55	85	99	110	125	243	56	68	75	82	164	134	160	174	193	367
56	89	106	118	129	255	59	71	78	89	172	136	160	176	197	367
57	94	110	122	139	267	63	75	82	92	176	136	162	179	197	371
58	101	118	129	146	283	63	78	87	96	184	136	165	181	200	371
59	106	125	139	153	299	68	82	89	101	188	139	165	181	202	371
60	110	129	141	157	303	68	82	92	103	196	136	162	179	197	367
61	115	136	150	167	323	73	87	96	106	200	139	165	179	200	367
62	122	146	160	179	339	78	89	99	110	207	141	165	181	200	371
63	132	153	169	188	359	78	94	103	115	215	141	167	183	202	371
64	139	165	181	200	379	82	96	106	120	223	143	167	183	204	375
65	148	174	193	214	403	87	103	110	125	231	146	172	186	204	375
66	167	195	214	237	447	94	110	122	136	251	153	181	197	219	399
67	179	209	230	254	475	96	115	125	141	259	155	181	197	221	403
68	190	223	244	270	507	101	120	132	146	263	157	183	202	223	403
69	204	237	261	289	539	103	125	136	150	271	157	186	202	223	403
70	219	254	280	310	575	108	127	139	153	279	160	188	204	223	403
71	247	287	315	348	642	118	139	150	167	299	169	197	216	237	427
72	263	308	336	371	682	120	141	155	172	307	169	197	216	240	427
73	280	327	357	395	722	125	146	160	176	311	172	200	219	240	427
74	298	348	381	421	762	127	148	162	179	319	172	200	219	240	427
75	317	369	402	442	798	127	146	160	176	311	169	195	212	233	415
76	362	418	456	501	902	134	157	172	188	331	176	207	223	247	435
77	388	449	489	536	962	136	160	174	190	335	176	207	223	247	431
78	416	482	522	573	1,021	139	160	176	193	339	179	204	223	244	431
79	447	515	559	613	1,089	118	136	148	162	287	176	207	223	242	427
80	479	555	602	658	1,165	118	136	148	160	283	179	204	221	242	423
81	517	595	644	705	1,241	120	136	148	160	283	176	204	221	240	423
82	557	639	691	754	1,329	118	136	146	160	275	176	204	219	237	415
83	599	689	743	808	1,420	118	134	143	157	271	176	202	216	235	411
84	646	740	797	865	1,516	115	134	141	157	267	176	202	214	235	407
85	698	797	855	926	1,620	115	132	139	153	263	174	200	212	230	399

State: Pennsylvania	Filing Company: MedAmerica Insurance Company
TOI/Sub-TOI: LTC03I Individual Long Term Care/LTC03I.003 Other	
Product Name: Long-Term Care	
Project Name/Number: MedAmerica Nationwide 2018 Rate Increase/145MAI01-30.06	

Supporting Document Schedules

Satisfied - Item:	Transmittal Letter (A&H)
Comments:	
Attachment(s):	PA_Cover Letter_MedAmerica_Individual_LRRS_20180815.pdf
Item Status:	
Status Date:	

Bypassed - Item:	Actuarial Certification (A&H)
Bypass Reason:	Not applicable as this is not a form filing.
Attachment(s):	
Item Status:	
Status Date:	

Satisfied - Item:	Actuarial Memorandum and Explanatory Information (A&H)
Comments:	
Attachment(s):	PA_ActMemo_MedAmerica_Individual_LRRS_20180815.pdf PA_Supplement_MedAmerica_Individual_LRRS_20180815.pdf
Item Status:	
Status Date:	

Bypassed - Item:	Advertisements (A&H)
Bypass Reason:	Not applicable as this is not a form filing.
Attachment(s):	
Item Status:	
Status Date:	

Satisfied - Item:	Authorization to File (A&H)
Comments:	
Attachment(s):	Authorization to file MedAmerica 20180111.pdf
Item Status:	
Status Date:	

Bypassed - Item:	Insert Page Explanation (A&H)
Bypass Reason:	Not applicable as this is not a form filing.
Attachment(s):	
Item Status:	

State:	Pennsylvania	Filing Company:	MedAmerica Insurance Company
TOI/Sub-TOI:	LTC03I Individual Long Term Care/LTC03I.003 Other		
Product Name:	Long-Term Care		
Project Name/Number:	MedAmerica Nationwide 2018 Rate Increase/145MAI01-30.06		

Status Date:	
Satisfied - Item:	Rate Table (A&H)
Comments:	Rate tables are attached on the Rate/Rule Schedule tab.
Attachment(s):	
Item Status:	
Status Date:	
Bypassed - Item:	Replacement Form with Highlighted Changes (A&H)
Bypass Reason:	Not applicable as this is not a form filing.
Attachment(s):	
Item Status:	
Status Date:	
Bypassed - Item:	Reserve Calculation (A&H)
Bypass Reason:	Not applicable as this is not a form filing.
Attachment(s):	
Item Status:	
Status Date:	
Bypassed - Item:	Variability Explanation (A&H)
Bypass Reason:	Not applicable as this is not a form filing.
Attachment(s):	
Item Status:	
Status Date:	
Satisfied - Item:	Numerical Data in Excel
Comments:	
Attachment(s):	PA_Supplement Attachments_LRRS_20180815.xlsb
Item Status:	
Status Date:	
Satisfied - Item:	Sample Policyholder Notification Letter
Comments:	
Attachment(s):	MAPA Legacy-Assumed CNF 5.5.17.pdf MAPA Legacy-Assumed PH Letter 6.29.17.pdf
Item Status:	
Status Date:	

SERFF Tracking #:	MILL-131567825	State Tracking #:	MILL-131567825	Company Tracking #:	SERIES 11 AND PRIOR INDIVIDUAL (MEDAMERI...
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State:	Pennsylvania	Filing Company:	MedAmerica Insurance Company
TOI/Sub-TOI:	LTC03I Individual Long Term Care/LTC03I.003 Other		
Product Name:	Long-Term Care		
Project Name/Number:	MedAmerica Nationwide 2018 Rate Increase/145MAI01-30.06		

SERFF Tracking #:	MILL-131567825	State Tracking #:	MILL-131567825	Company Tracking #:	SERIES 11 AND PRIOR INDIVIDUAL (MEDAMERI...
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State:	Pennsylvania	Filing Company:	MedAmerica Insurance Company
TOI/Sub-TOI:	LTC03I Individual Long Term Care/LTC03I.003 Other		
Product Name:	Long-Term Care		
Project Name/Number:	MedAmerica Nationwide 2018 Rate Increase/145MAI01-30.06		

Attachment PA_Supplement Attachments_LRRS_20180815.xlsb is not a PDF document and cannot be reproduced here.



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August 15, 2018

Honorable Jessica K. Altman
Insurance Commissioner
Pennsylvania Department of Insurance (Department)

Via *SERFF*

**Re: MedAmerica Insurance Company (MedAmerica)
Company NAIC # 69515
SERFF Tracking # MILL-131567825
Prior to Series 11**

**Facility Only Form
Facility Only Form
Comprehensive Form
Comprehensive Form
Comprehensive Form
Series 11 Individual
Comprehensive Form
Facility Only Form
Home Health Only Form
Comprehensive Form
Franchise Comprehensive Form
Facility Only Form
Home Health Only Form**

**LTC-LBP-2PA
LTC-LBP8-MA-PA
LTC-CD5-2PA
LTC-CD8-MA-PA
LTC-CD9-MA-PA
LTQ11-336-MA-PA-998
NTQ11-337-MA-PA-998
HTQ11-338-MA-PA-998
LTQ11-336-MA-PA-601
FLQ11-336-MA-PA-601
NTQ11-337-MA-PA-601
HTQ11-338-MA-PA-601**

Dear Commissioner Altman:

On behalf of the company, we are submitting the referenced rate filing for your review. These are existing products that provide long-term care coverage on an individual basis. The company issued these products in Pennsylvania from October 12, 1992 to August 1, 2004 and is no longer marketing them in any jurisdiction. The company is making a similar request on the Series 11 Group policy form(s) in a concurrent filing (SERFF Tracking # MILL-131609778).

The company is requesting a premium rate increase on the above-listed form(s), including all associated riders. The need for a premium rate increase is due to emerging and projected experience running more adverse than previously expected.

Additionally, MedAmerica's affinity partner is making a similar request in concurrent filings. These filings use identical pooled nationwide experience of MedAmerica and its affinity partners individual and group business as described in the enclosed actuarial memorandum.

The company is requesting a premium rate increase that varies by benefit period to achieve the cumulative rate increases shown in the following table. The rate increase varies by benefit period to better align the rate increase

Offices in Principal Cities Worldwide

This work product was prepared solely to provide assistance to MedAmerica. Milliman does not intend to benefit and assumes no duty or liability to other parties who receive this work. Milliman recommends recipient be aided by its own actuary or other qualified professional when reviewing the Milliman work product.

with the adverse experience. The following table provides the average prior, requested, and cumulative rate increases by benefit period for the above-listed form(s).

**Pennsylvania – MedAmerica
Rate Increase Request**

Policy Form Cohort	Benefit Period	Prior Increase	Requested Increase	Cumulative Increase
Prior to Series 11	Non-Lifetime	66.8%	40.9%	135%
	Lifetime	66.8	139.2	299
Series 11 Individual	Non-Lifetime	66.8	40.9	135
	Lifetime	66.8	139.2	299
Average ^[1]		66.8	69.2	182

[1] As of December 31, 2017 and excludes policies assumed to be paid up prior to implementation of the requested rate increase.

The prior increase reflects the cumulative increase of two prior increase(s) that were filed for use in May 2010 and September 2017 on the forms. The company is seeking this rate increase request to help alleviate the adverse performance on this block of business.

Similar to the prior increase(s), the company will offer insureds affected by the premium increase the option of reducing their policy benefits 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. The company will offer a contingent benefit upon lapse to insureds that trigger a substantial rate increase. Additionally, the company will voluntarily offer a contingent benefit upon lapse to insureds affected by the rate increase, even if the increase is not considered substantial.

The following electronic items are included with this submission:

- cover letter
- letter from the company authorizing submission of this filing on its behalf
- actuarial memorandum
- supplement to the actuarial memorandum
- current and proposed premium rate schedules
- sample policyholder notification letter*

*Please note that in the future slight variations in language may occur that do not materially change the information being provided to the policyholder. It is our understanding that such variations do not need to be filed with the Department.

No filing fee is required for this submission.



Honorable Jessica Altman
8/15/2018

The contact person for this filing is:

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Thank you for your assistance in reviewing this filing.

Respectfully,

A handwritten signature in blue ink that reads 'Missy Gordon'.

Missy Gordon, FSA, MAAA
Principal and Consulting Actuary

MAG/dpl

Enclosures

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<u>Product</u>	<u>Number</u>
Prior to Series 11	
Facility Only Form	LTC-LBP-2PA
Facility Only Form	LTC-LBP8-MA-PA
Comprehensive Form	LTC-CD5-2PA
Comprehensive Form	LTC-CD8-MA-PA
Comprehensive Form	LTC-CD9-MA-PA
Series 11 Individual	
Comprehensive Form	LTQ11-336-MA-PA-998
Facility Only Form	NTQ11-337-MA-PA-998
Home Health Only Form	HTQ11-338-MA-PA-998
Comprehensive Form	LTQ11-336-MA-PA-601
Franchise Comprehensive Form	FLQ11-336-MA-PA-601
Facility Only Form	NTQ11-337-MA-PA-601
Home Health Only Form	HTQ11-338-MA-PA-601

MedAmerica Insurance Company (MedAmerica) is requesting a rate increase on the above-listed long-term care policy form(s). The company issued this policy form(s) in Pennsylvania from October 1992 through August 2004 and is no longer marketing it in any jurisdiction.

Nationwide, MedAmerica and its affinity partners are requesting a premium rate increase that varies by benefit period to achieve the same cumulative rate increase, except where limited by regulatory restrictions. This actuarial memorandum captures the pooled nationwide experience of the above-listed policy form(s) and similar individual and group policy forms of the same product series issued nationwide by MedAmerica and its affinity partners.

1. Purpose of Filing

This actuarial memorandum has been prepared for the purpose of demonstrating that the nationwide cumulative rate increase discussed in Section 2 meets the minimum requirements of the applicable sections of the 2014 National Association of Insurance Commissioners (NAIC) Long-Term Care Insurance Model Regulation (Model Regulation). The enclosed supplement to the actuarial memorandum demonstrates compliance with the applicable regulatory requirements of this jurisdiction to the extent they differ from the Model Regulation, and includes other commonly requested information of this jurisdiction. It may not be suitable for other purposes.

2. Requested Rate Increase

The company is requesting a rate increase that varies by benefit period to achieve the cumulative rate increases shown below. The company is seeking this current rate increase request to help alleviate the adverse performance on this block of business.

The cumulative rate increase levels were determined to vary by benefit period to better align the rate increase with the adverse experience. MedAmerica's goal is equity across all jurisdictions, to the extent practical. The rate increase was determined in such a way that minimizes subsidization across jurisdictions due to differences in the previously filed rate increases.

The table below provides the average prior, requested, and cumulative increases by benefit period based on the nationwide distribution business. The enclosed cover letter provides similar information based on the jurisdiction-specific distribution.

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Nationwide Average^[1] Rate Increase Request

Policy Form Cohort	Benefit Period	Prior Increase	Requested Increase	Cumulative Increase
Prior to Series 11	Non-Lifetime	62.0%	45.1%	135%
	Lifetime	73.5	130.0	299
Series 11 Individual	Non-Lifetime	51.5	55.2	135
	Lifetime	67.0	138.9	299
Series 11 Group	Non-Lifetime	77.0	32.8	135
	Lifetime	69.6	135.2	299
Average		63.8	67.1	174

[1] As of December 31, 2017 and excludes policies assumed to be paid up prior to implementation of the requested rate increase. The enclosed cover letter provides the jurisdiction-specific distribution.

A larger cumulative rate increase is needed to certify that rates will remain stable under moderately adverse conditions. The company will continue to monitor the business and reserves the right to request additional rate increases in the future.

Corresponding rate tables reflecting the proposed rate increases for the policy form(s) affected by this rate increase are enclosed with this filing. Please note that the actual rates implemented may vary from those in the enclosed rate tables slightly due to implementation rounding algorithms.

As the company is not currently marketing new business, the required statement that the renewal premium rate schedules are not greater than the new business premium rate schedules is not applicable.

3. Description of Benefits

These products provide long-term care coverage. The Series 11 products are tax-qualified, and were issued on an individual or group basis. The Prior to Series 11 product includes tax-qualified and non-tax qualified policy forms, and was issued on an individual basis. Each product has benefit eligibility requirements that involve activities of daily living (ADL) deficiencies or cognitive impairment. Waiver of premium is provided when certain benefits are being paid. A daily benefit, benefit period, and elimination period were selected at issue.

At issue, the insured may have had the option to choose one of the following inflation options, the availability of which varied by policy form: simple inflation for life, simple inflation for 20 years, or compound inflation. The two simple inflation options provide for benefit levels that increase on each anniversary date by 5% of the daily benefit amount chosen at issue for either the life of the insured or 20 years depending on the option chosen. The compound inflation option provides for benefit levels that increase on each anniversary date by 5% compounded annually for the life of the insured. These automatic increasing benefits apply even when the insured is in claim status. For Series 11 Group forms, the insured may have also had the option of a guaranteed purchase option. Under this option, the insured can purchase additional coverage amounts of 5% per year without additional underwriting.

The available choices for benefit period, elimination period, and inflation option are shown in Section 21.

At issue the insured may have had the option of selecting riders that provide the following types of coverage: nonforfeiture, restoration of benefits, return of premium, shortened benefit period, spousal benefit transfer, survivorship benefit, or monthly home health care benefit. The insured may have had the option to select a lifetime, ten-year, or twenty-year premium payment option.

A contingent benefit upon lapse (CBUL) will be available to all insureds at the time of the rate increase.

4. Renewability

These policies are guaranteed renewable for life.

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5. Applicability

This rate increase applies to all policies issued on the above-listed form(s) in this jurisdiction. The rate changes will apply to the premium of the base form and all applicable options and riders associated with the base form.

6. Actuarial Assumptions

The following assumptions are used to project the experience shown in this filing.

- a. Morbidity reflects claim costs developed using the 2014 Milliman *Long-Term Care Guidelines (Guidelines)* with adjustments for underwriting selection, an all-lives exposure basis, and three years of retrospective improvement to bring the *Guidelines* forward to 2017. The claim costs were further adjusted based on historical claim experience by policy form cohort, attained age, duration, individual vs. group, payment type, and coverage type, to the extent credible. These adjustment factors can be found in Exhibit A-4a of Appendix A to this memorandum.
- b. Mortality Rates reflect the 1994 Group Annuitant Mortality (GAM) Static gender-distinct table with retrospective improvement applied to bring this table forward to 2017. These mortality rates are further adjusted based on historical mortality experience by individual/group, issue age band, and duration as shown in the following tables.

Mortality Durational Adjustment Factors for Individual Business												
Duration*	Issue Age											
	<25	25-29	30-34	35-39	40-44	45-49	50-54	55-59	60-64	65-69	70-74	75+
1	25%	25%	25%	25%	25%	25%	25%	25%	25%	25%	25%	20%
2	35	35	35	35	35	35	35	35	35	35	35	30
3	40	40	40	40	40	40	40	40	40	40	40	45
4	43	43	43	43	43	43	43	43	44	45	45	50
5	46	46	46	46	46	46	46	46	48	50	50	55
6	49	49	49	49	49	49	49	49	52	55	55	60
7	52	52	52	52	52	52	52	52	56	60	60	65
8	55	55	55	55	55	55	55	55	60	65	65	70
9	56	56	56	56	56	56	56	56	61	68	69	76
10	57	57	57	57	57	57	57	57	62	71	73	82
11	58	58	58	58	58	58	58	58	63	74	77	88
12	59	59	59	59	59	59	59	59	64	77	81	94
13	60	60	60	60	60	60	60	60	65	80	85	100
14	62	62	62	62	62	62	62	62	69	82	88	101
15	64	64	64	64	64	64	64	64	73	84	91	102
16	66	66	66	66	66	66	66	66	77	86	94	103
17	68	68	68	68	68	68	68	68	81	88	97	104
18	70	70	70	70	70	70	70	70	85	90	100	105
23	70	70	70	70	70	70	70	85	90	100	105	105
28	70	70	70	70	70	70	85	90	100	105	105	105
33	70	70	70	70	70	85	90	100	105	105	105	105
38	70	70	70	70	85	90	100	105	105	105	105	105
43	70	70	70	85	90	100	105	105	105	105	105	105
48	70	70	85	90	100	105	105	105	105	105	105	105
53	70	85	90	100	105	105	105	105	105	105	105	105
58	85	90	100	105	105	105	105	105	105	105	105	105
63	90	100	105	105	105	105	105	105	105	105	105	105
68	100	105	105	105	105	105	105	105	105	105	105	105
73+	105	105	105	105	105	105	105	105	105	105	105	105

* The assumption varies by duration for 18+, but is shown every five years for display purposes.

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Mortality Durational Adjustment Factors for Group Business												
Duration*	Issue Age											
	<25	25-29	30-34	35-39	40-44	45-49	50-54	55-59	60-64	65-69	70-74	75+
1	50%	50%	50%	50%	50%	50%	50%	50%	50%	50%	50%	40%
2	70	70	70	70	70	70	70	70	70	70	70	60
3	80	80	80	80	80	80	80	80	80	80	80	90
4	86	86	86	86	86	86	86	86	88	90	90	100
5	92	92	92	92	92	92	92	92	96	100	100	105
6	83	83	83	83	83	83	83	83	88	94	94	102
7	83	83	83	83	83	83	83	83	90	96	96	104
8	83	83	83	83	83	83	83	83	90	98	98	105
9	81	81	81	81	81	81	81	81	88	98	99	105
10	79	79	79	79	79	79	79	79	86	98	101	105
11	77	77	77	77	77	77	77	77	83	98	102	105
12	74	74	74	74	74	74	74	74	81	97	102	105
13	72	72	72	72	72	72	72	72	78	96	102	105
14	74	74	74	74	74	74	74	74	82	98	105	105
15	76	76	76	76	76	76	76	76	86	99	105	105
16	77	77	77	77	77	77	77	77	90	101	105	105
17	79	79	79	79	79	79	79	79	94	102	105	105
18	81	81	81	81	81	81	81	81	98	104	105	105
23	77	77	77	77	77	77	77	94	99	105	105	105
28	74	74	74	74	74	74	89	95	105	105	105	105
33	70	70	70	70	70	85	90	100	105	105	105	105
38	70	70	70	70	85	90	100	105	105	105	105	105
43	70	70	70	85	90	100	105	105	105	105	105	105
48	70	70	85	90	100	105	105	105	105	105	105	105
53	70	85	90	100	105	105	105	105	105	105	105	105
58	85	90	100	105	105	105	105	105	105	105	105	105
63	90	100	105	105	105	105	105	105	105	105	105	105
68	100	105	105	105	105	105	105	105	105	105	105	105
73+	105	105	105	105	105	105	105	105	105	105	105	105

* The assumption varies by duration for 18+, but is shown every five years for display purposes.

- c. Voluntary Lapse Rates vary by policy duration, policy form cohort, and premium payment option. The lifetime-pay voluntary lapse rates are shown in the table below.

Duration	Prior to Series 11	Series 11 Individual	Series 11 Group
1	16.50%	8.50%	6.50%
2	8.50	4.00	6.00
3	5.00	2.75	4.00
4	3.50	2.00	3.50
5	2.00	1.50	3.00
6	1.50	1.25	2.50
7	1.50	1.25	2.00
8	1.50	1.00	1.50
9	1.50	0.75	1.30
10+	1.00	0.60	1.30

The voluntary lapse rates in the above table were adjusted based on the following criteria for the limited-pay options:

- For the ten-pay option, a reduction of 65% of the above lapse rates is assumed for durations one through four, a reduction of 70% of the above lapse rates is assumed for durations five through eight, and 0% lapse thereafter.

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- For the twenty-pay option, a reduction of 50% of the above lapse rates is assumed for durations one through eight, a reduction of 75% of the above lapse rates is assumed for durations nine through fifteen, and 0% lapse thereafter.

d. Benefit Expiry Rates reflect assumed policy termination due to exhaustion of benefits on limited benefit period policies. The rates are based on the *Guidelines* with adjustments for historical benefit expiry experience and vary by gender, benefit period, and attained age as shown in the following table.

Gender	Benefit Period in Years	Attained Age*										
		<65	65	70	75	80	85	90	95	100	105	110+
Female	1	0.0%	0.1%	0.1%	0.3%	0.7%	2.5%	6.1%	10.7%	13.4%	16.7%	33.0%
	2	0.0	0.0	0.1	0.2	0.5	1.6	4.5	8.7	11.7	16.3	33.0
	3	0.0	0.0	0.1	0.1	0.4	1.2	3.4	6.9	9.7	15.0	33.0
	4	0.0	0.0	0.0	0.1	0.3	1.0	2.5	5.0	7.8	13.2	33.0
	5	0.0	0.0	0.0	0.1	0.2	0.7	1.7	3.8	6.3	11.2	33.0
	Unlimited	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
Male	1	0.0	0.0	0.1	0.2	0.5	1.5	3.9	6.3	7.8	9.4	33.0
	2	0.0	0.0	0.1	0.1	0.3	1.0	2.5	4.3	5.4	7.3	33.0
	3	0.0	0.0	0.1	0.1	0.2	0.7	1.7	3.0	4.0	5.8	33.0
	4	0.0	0.0	0.0	0.1	0.1	0.4	1.1	2.0	2.8	4.6	33.0
	5	0.0	0.0	0.0	0.0	0.1	0.3	0.8	1.5	2.3	3.6	33.0
	Unlimited	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0

* The assumption varies by attained age, but is shown every five years for display purposes.

- e. Policyholder Behavior Due to the Rate Increase. At the time of a rate increase, insureds have the option to elect a CBUL or reduced benefit options (RBO). An increase in morbidity for adverse selection due to the rate increase based on the percentage of policies that elect CBUL and RBO is assumed.

Insureds who elect a CBUL are modeled as a lapse (i.e., the CBUL benefit is not modeled), which results in a slightly lower lifetime loss ratio than if the CBUL benefit had been modeled. The following table provides the CBUL and RBO election rates, reduction to premiums and benefits due to the impact of RBO elections, and increase in morbidity for lifetime-pay policies based on the varying cumulative rate increase levels. Limited-pay policies are assumed to not elect CBUL or RBO.

Policyholder Behavior Assumptions^[1]

Benefit Period	CBUL Election Rate	RBO Election Rate	Approximate Reduction for RBO	Morbidity Increase for Adverse Selection
Non-Lifetime	11%	20%	13%	5.5%
Lifetime	12	25	21	6.5

[1] The values shown are based on the average cumulative amounts found in Section 2. The assumption is applied on a seriatim basis and prorated for the requested increase needed to achieve the cumulative amounts in Section 2.

- f. Interest Rate consistent with the maximum valuation interest rate applicable to the year of issue (ranges from 3.5% to 5.5% and averages 4.3%) is used to demonstrate compliance with the minimum loss ratio requirements.

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- g. Annual Improvement in the mortality and morbidity assumptions is assumed for 15 years starting in 2018. Annual mortality improvement factors vary by attained age based on the G2 improvement scale from the 2012 Individual Annuity Mortality table. Annual morbidity improvement is assumed to be 1.0%.
- h. Expenses have not been explicitly projected. Originally filed expense assumptions are assumed to remain appropriate, except that reductions are made to the renewal commission rates so that the total commissions paid before and after any increase in premium are similar (i.e., commissions are not paid on the increased premium).

The above assumptions are based on the experience of the above-listed policy form(s) and similar forms issued by MedAmerica and its affinity partners and, where appropriate, other similar business, industry experience, and actuarial judgment. The above assumptions are deemed reasonable for the particular policy form(s) in this filing and are considered "most likely" (without explicit margin).

In establishing the assumptions described in this section, the policy design, underwriting, and claims adjudication practices for the above-referenced policy form(s) were taken into consideration. Appendix A to this memorandum provides a description of the development of and justification for the assumptions used in this filing.

The company is not currently marketing long-term care products. As a result, the requirement to reflect on any assumptions that deviate from those used for pricing other forms currently available for sale is not applicable.

7. Marketing Method

Agents and brokers of the company marketed these products.

8. Underwriting Description

Policies on the individual forms were fully underwritten.

On the group forms, actively at work employees were subject to short form underwriting. All others were subject to full underwriting.

Groups of at least 500 employees were eligible to elect modified guaranteed issue underwriting for those actively at work. If the employer agreed to contribute 100% of premium for a base plan for a minimum of three years, no underwriting was required for those actively at work.

For both individual and group business, the company used 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.

9. Premiums

Premiums are unisex and payable for life unless the insured selected a ten-year or twenty-year premium payment option. The premiums may vary by policy form, issue age, elimination period, benefit period, initial daily benefit, inflation option, premium payment option, underwriting class, joint/group discounts, home care percentage, copayment option, marital status at issue, and the selection of any riders.

10. Issue Age Range

Issue ages are from 18 to 85.

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11. Area Factors

Area factors are not used for these products.

12. Premium Modalization Rules

The following modal factors and percent distributions (based on the nationwide in-force count as of December 31, 2017) are applied to the annual premium (AP):

Premium Mode	Modal Factors	Percent Distribution
Annual	1.00*AP	45%
Semi-Annual	0.52*AP	4
Quarterly	0.26*AP	29
Monthly	0.09*AP	22

13. Reserves

Active life reserves and reserves for the election of a CBUL have not been used in the experience exhibits for this rate increase analysis. Claim reserves as of December 31, 2017 have been discounted to the incurral date of each respective claim and included in historical incurred claims. An incurred but not reported (IBNR) reserve balance as of December 31, 2017 has been allocated to the 2017 calendar year and included in historical incurred claims.

14. Trend Assumptions

As this is not medical insurance, an explicit medical cost trend is not included in the projections.

15. Demonstration of Satisfaction of Loss Ratio Requirements

This filing uses pooled nationwide experience of the above-listed form(s) and similar individual and group policy forms issued nationwide by MedAmerica and its affinity partners. The pooled experience is appropriate to increase credibility and allow for a uniform rate increase request across similar business. Applying a uniform rate increase to the pool of forms maintains the original pricing relationships of the product design and differences between individual and group business.

Further, pooling experience is appropriate because the products issued are identical, the marketing and distribution employed is similar, and the same company (MedAmerica) administers and manages the entire block (including underwriting and claims handling). MedAmerica has 50% to 100% of the risk of the affinity partner forms via reinsurance arrangements with each affinity partner.

Exhibit I provides actual and projected experience using current assumptions. Actual experience is provided from inception through 2017 and then projected on a seriatim basis for 60 years using the current assumptions described above in Section 6. The actual and projected experience is based on nationwide premiums that reflect prior rate increases filed for use between 2010 and April 2018, which average 64% across all jurisdictions. The after increase projected experience reflects the additional increase needed to achieve the cumulative increases shown in Section 2 on a seriatim basis.

Values in Exhibit I are shown (a) before and (b) after the nationwide requested rate increase. Included are calendar year earned premiums, incurred claims, end of year lives, annual loss ratios, and cumulative loss ratios. As shown in Exhibit I-b, the anticipated lifetime loss ratio with the nationwide requested rate increase exceeds the minimum loss ratio required by pre-rate stability regulation.

The following table demonstrates that the lifetime loss ratios by policy form cohort and benefit period exceed the minimum loss ratio required by pre-rate stability regulation. The final row corresponds to that shown in Exhibit I.

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**Lifetime Loss Ratios at the Maximum Valuation
Interest Rate by Policy Form Cohort and Benefit Period**

Policy Form Cohort	Benefit Period	Before Increase	After Increase
Prior to Series 11	All	103%	98%
Series 11 Individual	All	124	105
Series 11 Group	All	103	91
All	Non-Lifetime	96	87
All	Lifetime	161	132
All	All	113	100

Exhibit II provides a demonstration that the nationwide requested rate increase meets the 58%/85% test required by post-rate stability regulation. This exhibit shows that the sum of the accumulated value of incurred claims without the inclusion of active life reserves, and the present value of projected incurred claims, without the inclusion of active life reserves, will not be less than the sum of the following:

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

The projected incurred claims in Exhibit II were increased by 15% from the current assumptions described in Section 6 to reflect assumptions that include moderately adverse conditions.

The following table demonstrates that the 58%/85% test is passed by policy form cohort and benefit period. The 'All' row corresponds to that shown in Exhibit II. Values in the table are shown in millions of dollars.

58%/85% Test by Policy Form Cohort and Benefit Period

Policy Form Cohort	Benefit Period	Item 5^[1]	Item 7^[2]	Result^[3]
Prior to Series 11	All	\$148.5	\$256.7	Pass
Series 11 Individual	All	322.9	585.2	Pass
Series 11 Group	All	138.8	216.0	Pass
All	Non-Lifetime	431.0	655.9	Pass
All	Lifetime	179.2	402.0	Pass
All	All	610.2	1,057.9	Pass

[1] Item 5 is the Lifetime Earned Premium Times Prescribed Factor.

[2] Item 7 is Lifetime Incurred Claims with Rate Increase.

[3] Test of whether Item 7 is not less than Item 5.

16. Actual-to-Expected Experience

The following table provides a comparison of actual and projected experience using current assumptions to that expected using original pricing assumptions. Values in the following table are shown (a) before and (b) after the nationwide requested rate increase.

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Actual and Expected Loss Ratios by Policy Form Cohort and Benefit Period

Policy Form Cohort	Benefit Period	Lifetime Loss Ratio			Actual-to-Expected	
		Before Increase	After Increase	Expected	Before Increase	After Increase
Prior to Series 11	All	98%	93%	66%	1.49	1.42
Series 11 Individual	All	115	98	58	1.97	1.69
Series 11 Group	All	91	81	70	1.31	1.16
All	Non-Lifetime	88	81	64	1.39	1.27
All	Lifetime	150	124	60	2.51	2.08
All	All	105	93	63	1.68	1.49

Actual and projected experience in the above table is identical to that described in Exhibit I, except uses the current most-likely interest rate assumption of 5.00%. This rate represents MedAmerica's expectation of its long-term investment earnings rate, which is supported by the average net investment earnings rate projected for MedAmerica's cash flow testing.

Expected experience uses the actual policies sold and projects from issue on a seriatim basis using the original pricing assumptions.

Exhibit III provides a comparison of the current and original pricing assumptions that underlie the actual and expected experience described above.

17. History of Previous Rate Revisions

Please see the enclosed cover letter, which provides the jurisdiction-specific average prior rate increase and rate history for the above-listed form(s).

Nationwide, there have been two prior rate increase requests on this block of business, which began in December 2009. Departments of insurance filed these increases for use between 2010 and 2017. As the goal of achieving similar cumulative rate increases across all jurisdictions is ongoing, additional increases have also been filed for use in 2018. On average, a cumulative increase of 64% has been filed for use on this block of business.

18. Analysis Performed to Consider a Rate Increase

The experience table in Section 16 above demonstrates that experience has been more adverse from that expected using original pricing assumptions as the A:E loss ratios exceeds 1.0. The adverse experience is due to a combination of higher persistency and lower interest.

The following table provides a comparison of actual and projected nationwide experience to that expected in pricing with respect to morbidity, mortality, lapse (combination of voluntary lapse and benefit expiry), interest, and improvement. The current and original pricing assumptions are provided in Exhibit III. Please note that to isolate the impact of each changed assumption from pricing, the experience in the table below has been restated to reflect no prior rate increases.

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Impact of Changing from Pricing to Current Assumptions

Scenario	Lifetime Loss Ratio (LLR)	Incremental Impact on the LLR^[1]	Increase Needed^[2]
Original pricing assumptions	63%	N/A	N/A
Historical experience through 2017 & projections with pricing assumptions	71	14%	180%
Historical experience through 2017 & projections with pricing assumptions except for current:			
Interest	92	29	265
Interest, lapse	97	5	41
Interest, lapse, mortality	123	28	198
Interest, lapse, mortality, morbidity	124	0	2
Interest, lapse, mortality, morbidity, improvement	119	-4	-26
Historical experience through 2017 & projections with all current most-likely assumptions ^[3]	119	90	634

[1] Calculated as the ratio of the lifetime loss ratio in a given row to that in the row immediately above it less one.

[2] Shows the rate increase needed to reproduce the lifetime loss ratio in the row immediately above it. Calculated without regard to CBUL, RBO, adverse selection, and higher waiver claims due to the needed rate increase.

[3] This row is calculated in regards to the pricing lifetime loss ratio of 63%.

For the business subject to rate stability regulation, an analysis of the projected loss ratio compared to that assumed at the time of original pricing revealed that experience has unfolded more than moderately adverse and crossed the original pricing threshold for which the company could consider a rate increase. At the time the product was priced, MedAmerica management determined the threshold for future increases would be defined as experience exhibiting deterioration of more than 10% of premium compared to that assumed in pricing. Section 16 demonstrates that the 'All' lifetime loss ratio before the requested rate increase using current assumptions is over 100% and well in excess of this original pricing threshold.

19. Average Annual Premium in Pennsylvania (Based on December 31, 2017 In-Force)

The number of insureds and the corresponding average annual premium that will be affected by this and the identical, concurrent rate increase filing are shown in the table(s) below. The values provided in the table(s) below exclude policies assumed to be paid up prior to implementation of the requested rate increase, and the annualized premium reflects all rate increases filed for use as of April 12, 2018.

Pennsylvania – MedAmerica

Policy Form Cohort	Benefit Period	Number of Insureds	Before Increase Premium	After Requested Increase Premium
Prior to Series 11	Non-Lifetime	111	\$1,774	\$2,499
	Lifetime	15	3,469	8,298
	Total	126	1,975	3,189
Series 11 Individual	Non-Lifetime	76	2,723	3,836
	Lifetime	32	3,475	8,313
	Total	108	2,946	5,163
Series 11 Group	Non-Lifetime	67	1,663	2,343
	Lifetime	0	0	0
	Total	67	1,663	2,343
Total	Non-Lifetime	254	2,028	2,858
	Lifetime	47	3,473	8,308
	Total	301	2,254	3,709

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Pennsylvania – Blue Cross of Northeastern Pennsylvania

Policy Form Cohort	Benefit Period	Number of Insureds	Before Increase Premium	After Requested Increase Premium
Series 11 Individual	Non-Lifetime	96	\$2,034	\$2,865
	Lifetime	1	5,301	12,681
	Total	97	2,067	2,967
Series 11 Group	Non-Lifetime	10	885	1,246
	Lifetime	0	0	0
	Total	10	885	1,246
Total	Non-Lifetime	106	1,925	2,713
	Lifetime	1	5,301	12,681
	Total	107	1,957	2,806

20. Proposed Effective Date

This rate increase will apply to policies on their next premium payment date following at least a 60-day policyholder notification period following being filed for use by the department of insurance, but no sooner than 12 months after the prior rate increase was effective.

21. Distribution of Business as of December 31, 2017 (Based on Nationwide In-Force Insured Count)

Issue Ages	Percent Distribution
<40	8%
40-44	7
45-49	11
50-54	17
55-59	21
60-64	18
65-69	11
70-74	6
75+	1

Elimination Period	Percent Distribution
0-Day	4%
20-Day	21
30-Day	<1
60-Day	6
90-Day	53
100-Day	5
180-Day	10
365-Day	<1

Benefit Period	Percent Distribution
1-Year	<1%
2-Year	17
3-Year	39
4-Year	8
5-Year	18
Lifetime	18

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Inflation Option	Percent Distribution
None	40%
Simple for Life	3
Compound for Life	38
Simple for 20 Years	19
GPO	<1

Premium Payment Option	Percent Distribution
Ten-Pay	14%
Twenty-Pay	10
Lifetime-Pay	76

Coverage Type	Percent Distribution
Facility Only	11%
Comprehensive	88
Home Health Only	1

22. Number of Insureds and Annualized Premium (Based on December 31, 2017 In-Force)

The number of insureds and annualized premium that will be affected by this and the identical, concurrent rate increase filing are shown in the tables below. The values provided in the tables below exclude policies assumed to be paid up prior to implementation of the requested rate increase, and the annualized premium reflects all rate increases filed for use as of April 12, 2018.

Pennsylvania – MedAmerica

Policy Form Cohort	Benefit Period	Number of Insureds	Annualized Premium
Prior to Series 11	Non-Lifetime	111	\$196,859
	Lifetime	15	52,031
	Total	126	248,890
Series 11 Individual	Non-Lifetime	76	206,931
	Lifetime	32	111,204
	Total	108	318,135
Series 11 Group	Non-Lifetime	67	111,402
	Lifetime	0	0
	Total	67	111,402
Total	Non-Lifetime	254	515,192
	Lifetime	47	163,235
	Total	301	678,427

Pennsylvania – Blue Cross of Northeastern Pennsylvania

Policy Form Cohort	Benefit Period	Number of Insureds	Annualized Premium
Series 11 Individual	Non-Lifetime	96	\$195,242
	Lifetime	1	5,301
	Total	97	200,543
Series 11 Group	Non-Lifetime	10	8,847
	Lifetime	0	0
	Total	10	8,847
Total	Non-Lifetime	106	204,089
	Lifetime	1	5,301
	Total	107	209,390

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Nationwide

Policy Form Cohort	Benefit Period	Number of Insureds	Annualized Premium
Prior to Series 11	Non-Lifetime	855	\$1,882,265
	Lifetime	401	1,054,068
	Total	1,256	2,936,333
Series 11 Individual	Non-Lifetime	5,095	8,845,290
	Lifetime	1,713	4,713,899
	Total	6,808	13,559,189
Series 11 Group	Non-Lifetime	5,149	7,885,909
	Lifetime	73	179,276
	Total	5,222	8,065,185
Total	Non-Lifetime	11,099	18,613,464
	Lifetime	2,187	5,947,243
	Total	13,286	24,560,707

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23. Actuarial Certification

I am a Principal and Consulting Actuary for Milliman, Inc. and retained by MedAmerica to render an opinion with regard to long-term care insurance rates. I am a member of the American Academy of Actuaries. I meet the Academy's qualification standards to render this actuarial opinion and am familiar with the requirements for filing long-term care insurance premiums and rate increases.

This memorandum has been prepared in conformity with all applicable Actuarial Standards of Practice, including Actuarial Standards of Practice No. 8, "Regulatory Filings for Health Benefits, Accident and Health Insurance, and Entities Providing Health Benefits" and 18, "Long-Term Care Insurance".

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 this jurisdiction and the rules of this department of insurance.

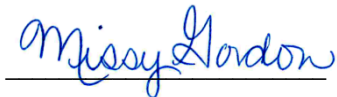
In my opinion, the rates are not excessive or unfairly discriminatory, and bear reasonable relationship to the benefits based on the loss ratio standards of this jurisdiction.

This filing will enhance premium adequacy, but may not be sufficient to prevent future rate action. Additional rate increases are needed to certify that rates will remain stable under moderately adverse conditions.

In forming my opinion, I have used actuarial assumptions and actuarial methods (which gave consideration to policy design, underwriting, and claim adjudication) and such tests of the actuarial calculations as I considered necessary. Based on these assumptions, or statutory requirements where necessary, this premium rate filing is in compliance with the loss ratio standards of this jurisdiction.

I have relied on data and information provided by MedAmerica to develop this memorandum, including but not limited to management's view of when a rate change may be considered, policy design, underwriting and claim adjudication process, seriatim in-force data, claim data, and the company's long-term earnings rate. I have not audited or independently verified the data and information provided, but have reviewed it for reasonableness.

The basis for contract reserves has been previously filed and there is no anticipation of any changes.



Missy Gordon, FSA, MAAA
Principal and Consulting Actuary

Date: August 15, 2018

**Exhibit I-a
MedAmerica and Affinity Partners
Actual and Projected Experience by Calendar Year
Nationwide Experience Before Requested Rate Increase
Series 11 and Prior Policy Forms**

		Actual or Projected Experience using Current Assumptions				Cumulative LR with Interest
	Calendar Year	A Earned Premium	B Incurred Claims	C = B / A Incurred Loss Ratio	D End of Year Lives	E Actual (Column C) with Max. Val. Interest
Historical Experience	1992	17,324	0	0%	111	0%
	1993	557,528	112,935	20%	634	19%
	1994	1,500,482	28,746	2%	1,376	7%
	1995	2,485,029	109,652	4%	1,943	6%
	1996	3,462,207	134,262	4%	2,687	5%
	1997	4,391,783	264,541	6%	3,003	5%
	1998	5,340,763	631,867	12%	3,664	7%
	1999	6,825,955	1,469,714	22%	4,763	11%
	2000	8,935,626	1,172,992	13%	6,197	11%
	2001	11,902,742	2,210,887	19%	8,449	13%
	2002	16,096,324	4,269,807	27%	11,471	16%
	2003	21,497,993	3,540,618	16%	17,712	16%
	2004	27,113,898	6,347,428	23%	19,115	18%
	2005	28,578,579	6,751,292	24%	20,244	19%
	2006	28,839,355	7,395,470	26%	20,095	20%
	2007	28,383,387	10,644,803	38%	20,145	22%
	2008	27,838,059	8,302,139	30%	19,941	23%
2009	26,881,880	11,107,735	41%	19,480	24%	
2010	25,543,217	15,851,176	62%	18,490	27%	
2011	24,605,324	14,100,771	57%	17,662	29%	
2012	25,238,498	16,193,346	64%	17,589	31%	
2013	24,380,172	14,635,134	60%	17,254	33%	
2014	22,501,372	23,851,886	106%	16,796	36%	
2015	21,535,035	24,822,983	115%	16,188	39%	
2016	21,200,216	22,803,799	108%	15,979	41%	
2017	20,290,067	24,920,645	123%	15,486	44%	
Projected Future Experience (60 Years)	2018	20,160,101	23,437,745	116%	14,591	46%
	2019	20,409,564	24,519,507	120%	14,074	48%
	2020	20,280,014	25,947,839	128%	13,589	50%
	2021	19,511,160	27,458,679	141%	13,103	52%
	2022	18,478,095	29,023,103	157%	12,617	54%
	2023	17,235,027	30,574,267	177%	12,132	56%
	2024	16,001,079	32,186,531	201%	11,649	58%
	2025	14,960,197	33,746,050	226%	11,167	60%
	2026	13,997,487	35,318,229	252%	10,687	63%
	2027	13,097,004	36,915,618	282%	10,210	65%
	2028	12,169,960	38,493,952	316%	9,737	67%
	2029	11,337,776	40,050,776	353%	9,269	70%
	2030	10,539,591	41,549,905	394%	8,806	72%
	2031	9,772,280	42,944,911	439%	8,350	74%
	2032	9,035,048	44,180,071	489%	7,900	77%
	2033	8,329,513	45,499,037	546%	7,458	79%
	2034	7,653,677	46,871,039	612%	7,022	81%
	2035	7,007,189	48,086,821	686%	6,593	84%
	2036	6,390,910	48,984,238	766%	6,173	86%
	2037	5,805,860	49,641,116	855%	5,762	88%
	2038	5,252,740	49,951,719	951%	5,362	90%
	2039	4,732,129	49,936,198	1,055%	4,974	92%
	2040	4,244,382	49,556,133	1,168%	4,600	94%
	2041	3,789,925	48,805,734	1,288%	4,240	96%
	2042	3,369,174	47,677,195	1,415%	3,897	98%
	2043	2,981,852	46,247,223	1,551%	3,571	99%
	2044	2,627,355	44,626,890	1,699%	3,263	101%
2045	2,304,637	42,794,267	1,857%	2,973	102%	
2046	2,012,700	40,800,636	2,027%	2,702	104%	
2047	1,750,230	38,606,295	2,206%	2,450	105%	
2048-2052	5,729,232	157,780,238	2,754%	9,105	109%	
2053-2057	2,572,498	101,166,015	3,933%	5,318	112%	
2058-2062	1,086,882	58,328,449	5,367%	3,008	113%	
2063-2067	437,018	31,208,982	7,141%	1,591	113%	
2068-2072	166,355	14,977,982	9,004%	736	113%	
2073-2077	60,394	6,593,432	10,917%	277	113%	

With Interest Accum./Disc. To 12/31/2017 at Max. Val. Interest

History	676,463,033	295,592,596	44%
Future	207,442,993	707,218,337	341%
Lifetime	883,906,026	1,002,810,933	113%

**Exhibit I-b
MedAmerica and Affinity Partners
Actual and Projected Experience by Calendar Year
Nationwide Experience After Requested Rate Increase
Series 11 and Prior Policy Forms**

	Calendar Year	Actual or Projected Experience using Current Assumptions				Cumulative LR with Interest
		A Earned Premium	B Incurred Claims	C = B / A Incurred Loss Ratio	D End of Year Lives	E Actual (Column C) with Max. Val. Interest
Historical Experience	1992	17,324	0	0%	111	0%
	1993	557,528	112,935	20%	634	19%
	1994	1,500,482	28,746	2%	1,376	7%
	1995	2,485,029	109,652	4%	1,943	6%
	1996	3,462,207	134,262	4%	2,687	5%
	1997	4,391,783	264,541	6%	3,003	5%
	1998	5,340,763	631,867	12%	3,664	7%
	1999	6,825,955	1,469,714	22%	4,763	11%
	2000	8,935,626	1,172,992	13%	6,197	11%
	2001	11,902,742	2,210,887	19%	8,449	13%
	2002	16,096,324	4,269,807	27%	11,471	16%
	2003	21,497,993	3,540,618	16%	17,712	16%
	2004	27,113,898	6,347,428	23%	19,115	18%
	2005	28,578,579	6,751,292	24%	20,244	19%
	2006	28,839,355	7,395,470	26%	20,095	20%
	2007	28,383,387	10,644,803	38%	20,145	22%
	2008	27,838,059	8,302,139	30%	19,941	23%
2009	26,881,880	11,107,735	41%	19,480	24%	
2010	25,543,217	15,851,176	62%	18,490	27%	
2011	24,605,324	14,100,771	57%	17,662	29%	
2012	25,238,498	16,193,346	64%	17,589	31%	
2013	24,380,172	14,635,134	60%	17,254	33%	
2014	22,501,372	23,851,886	106%	16,796	36%	
2015	21,535,035	24,822,983	115%	16,188	39%	
2016	21,200,216	22,803,799	108%	15,979	41%	
2017	20,290,067	24,920,645	123%	15,486	44%	
Projected Future Experience (60 Years)	2018	20,160,101	23,437,745	116%	14,591	46%
	2019	23,940,291	23,836,189	100%	13,538	47%
	2020	27,226,638	24,345,168	89%	12,921	49%
	2021	27,446,759	25,633,115	93%	12,403	50%
	2022	26,662,533	26,999,149	101%	11,937	52%
	2023	24,891,098	28,397,202	114%	11,485	53%
	2024	23,073,543	29,863,010	129%	11,034	55%
	2025	21,562,554	31,288,551	145%	10,585	56%
	2026	20,164,124	32,734,152	162%	10,137	58%
	2027	18,849,598	34,208,980	181%	9,691	60%
	2028	17,491,936	35,672,675	204%	9,249	62%
	2029	16,276,327	37,124,754	228%	8,811	63%
	2030	15,110,600	38,533,648	255%	8,378	65%
	2031	13,990,305	39,855,468	285%	7,950	67%
	2032	12,914,476	41,035,606	318%	7,528	69%
	2033	11,885,784	42,302,158	356%	7,113	71%
	2034	10,901,426	43,623,147	400%	6,703	73%
	2035	9,961,176	44,805,033	450%	6,299	75%
	2036	9,066,553	45,696,313	504%	5,902	77%
	2037	8,218,997	46,364,725	564%	5,514	78%
	2038	7,419,435	46,710,600	630%	5,136	80%
	2039	6,668,635	46,751,367	701%	4,768	82%
	2040	5,966,935	46,446,529	778%	4,413	84%
	2041	5,314,804	45,791,886	862%	4,072	85%
	2042	4,712,524	44,776,689	950%	3,746	87%
	2043	4,159,472	43,476,736	1,045%	3,435	88%
	2044	3,654,613	41,994,709	1,149%	3,142	89%
2045	3,196,271	40,307,806	1,261%	2,865	91%	
2046	2,782,780	38,461,398	1,382%	2,606	92%	
2047	2,412,014	36,414,550	1,510%	2,365	93%	
2048-2052	7,819,761	149,015,565	1,906%	8,808	96%	
2053-2057	3,440,166	95,678,209	2,781%	5,165	98%	
2058-2062	1,419,019	55,182,238	3,889%	2,932	99%	
2063-2067	555,906	29,587,701	5,322%	1,555	100%	
2068-2072	206,207	14,241,293	6,906%	720	100%	
2073-2077	73,271	6,275,070	8,564%	271	100%	

With Interest Accum./Disc. To 12/31/2017 at Max. Val. Interest

History	676,463,033	295,592,596	44%
Future	281,100,696	662,874,765	236%
Lifetime	957,563,729	958,467,361	100%

Exhibit II
Demonstration that the Requested Cumulative Rate Increase Passes the 58%/85% Loss Ratio Minimum
MedAmerica and Affinity Partners' Nationwide Experience with Prior Approved Increases
Series 11 and Prior Policy Forms

1	Accumulated value of initial earned premium	646,425,805	x	58%	=	374,926,967
2a	Accumulated value of earned premium	676,463,033				
2b	Accumulated value of prior premium rate schedule increases (2a - 1)	30,037,228	x	85%	=	25,531,644
3	Present value of future projected initial earned premium	108,296,977	x	58%	=	62,812,246
4a	Present value of future projected premium	281,100,696				
4b	Present value of future projected premium in excess of the projected initial earned premiums (4a - 3)	172,803,719	x	85%	=	146,883,161
5	Lifetime Earned Premium Times Prescribed Factor: Sum of 1, 2b, 3, and 4b					610,154,018
6a	Accumulated value of incurred claims without the inclusion of active life reserves					295,592,596
6b	Present value of future projected incurred claims without the inclusion of active life reserves					762,305,980
7	Lifetime Incurred Claims with Rate Increase: Sum 6a and 6b					1,057,898,576
8	Test: 7 is not less than 5					Pass
<p><i>All values are accumulated or discounted at the maximum valuation interest rate for contract reserves applicable for the year of issue, which ranges from 3.5% to 5.5%.</i></p> <p><i>Future projected initial earned premium schedule (i.e., without the requested rate increase) reflects the assumed impact of CBUL and RBO.</i></p> <p><i>The future projected incurred claims (item 6b) were increased by 15% to reflect assumptions with moderately adverse experience.</i></p>						

**Exhibit III
MedAmerica and Affinity Partners
Comparison of Current and Original Pricing Assumptions**

		Morbidity
Current Assumptions	Series 11 and Prior	Expected claim costs are developed using the 2014 Milliman <i>Long-Term Care Guidelines (Guidelines)</i> with adjustments for underwriting selection, all-lives exposure basis, and three years of retrospective improvement to bring the <i>Guidelines</i> forward to 2017. The claim costs were further adjusted based on historical claim experience by policy form cohort, attained age, duration, individual vs. group, payment type, and coverage type, to the extent credible. These adjustment factors can be found in Exhibit A-4a of Appendix A of the actuarial memorandum.
Original Assumptions	Prior to Series 11	For Series 5, the original pricing expected nursing home incidence rates and continuance tables were developed from a number of sources, but primarily using data published by the Connecticut Department of Health Services. The 1985 National Nursing Home Survey was also used. Selected frequencies were adjusted up for up to the first 12 years following issue to reflect the favorable morbidity expected as a result of the underwriting process. Frequency and length of treatment of the home care and adult day care benefit were based on the 1982 National Long-Term Care Survey. They are adjusted to reflect the effects of elimination periods, policy maximums, and eligibility standards. For Series 8 and 9, the Institutional Benefit rates were developed using source data from the 1977 and 1985 National Nursing Home Surveys. The Home and Community Benefits were developed using source data from the 1989 National Long-Term Care Survey. Adjustments were made to the source data to reflect the selection effect of underwriting and the non-duplication of benefits with other payment sources.
	Series 11	The original pricing expected nursing home and home care incidence rates and continuance tables were taken from the 1997 <i>Guidelines</i> and adjusted for MedAmerica's experience available at the time this rate schedule was developed relative to the <i>Guidelines</i> . All values were adjusted to reflect the effects of product types, elimination periods, policy maximums, and the eligibility standards.
		Mortality
Current Assumptions	Series 11 and Prior	1994 Group Annuitant Mortality (GAM) Static gender-distinct table with retrospective improvement applied to bring this table forward to 2017. These mortality rates are further adjusted based on historical mortality experience by issue age band and duration. Tables providing these adjustment factors are provided in Section 6 of the actuarial memorandum.
Original Assumptions	Prior to Series 11	Series 5 policy forms used the 1965-70 US Society of Actuaries Basic Mortality Table without selection. Series 8 and Series 9 policy forms used the 1980 Commissioners Standard Ordinary Basic Mortality Tables assuming a gender mix of 60% female and 40% male and without selection.
	Series 11 Individual	1980 Commissioners Standard Ordinary Basic Mortality Table.
	Series 11 Group	Premier Group policy forms use the 1980 Commissioners Standard Ordinary Basic Mortality Table. TNSE policy forms use the 1983 GAM Static table.

**Exhibit III
MedAmerica and Affinity Partners
Comparison of Current and Original Pricing Assumptions**

		Lapse Rates			
		Voluntary lapse rates (excludes benefit expiry) vary by policy duration and policy form cohort.			
Current Assumptions	Series 11 and Prior	Lifetime-Pay Lapse Rates			
		Duration	Prior to Series 11	Series 11 Individual	Series 11 Group
		1	16.50%	8.50%	6.50%
		2	8.50%	4.00%	6.00%
		3	5.00%	2.75%	4.00%
		4	3.50%	2.00%	3.50%
		5	2.00%	1.50%	3.00%
		6	1.50%	1.25%	2.50%
		7	1.50%	1.25%	2.00%
		8	1.50%	1.00%	1.50%
		9	1.50%	0.75%	1.30%
10+	1.00%	0.60%	1.30%		
<p>For the 10-pay option, a reduction of 65% of these lapse rates is assumed for durations 1 to 4, a reduction of 70% of these lapse rates is assumed for durations 5 to 8, and 0% lapse thereafter. For the 20-pay option, a reduction of 50% of these lapse rates is assumed for durations 1 to 8, a reduction of 75% of these lapse rates is assumed for durations 9 to 15, and 0% lapse thereafter.</p>					

**Exhibit III
MedAmerica and Affinity Partners
Comparison of Current and Original Pricing Assumptions**

Original Assumptions

Prior to Series 11

Lapse Rates

Lapse rates vary by policy form series, duration, premium payment option, and issue age.

Series 5 Lapse Rates											
Duration	Issue Age										
	<61	61	62	63	64	65	66	67	68	69	70+
1	20.00%	19.00%	18.00%	17.00%	16.00%	15.00%	14.00%	13.00%	12.00%	11.00%	10.00%
2	15.00%	14.00%	13.00%	12.00%	11.00%	10.00%	9.00%	8.00%	7.00%	6.00%	5.00%
3	10.00%	9.40%	8.80%	8.20%	7.60%	7.00%	6.40%	5.80%	5.20%	4.60%	4.00%
4	8.00%	7.60%	7.20%	6.80%	6.40%	6.00%	5.60%	5.20%	4.80%	4.40%	4.00%
5	6.00%	5.70%	5.40%	5.10%	4.80%	4.50%	4.20%	3.90%	3.60%	3.30%	3.00%
6	5.00%	4.80%	4.60%	4.40%	4.20%	4.00%	3.80%	3.60%	3.40%	3.20%	3.00%
7	5.00%	4.80%	4.60%	4.40%	4.20%	4.00%	3.80%	3.60%	3.40%	3.20%	3.00%
8	5.00%	4.80%	4.60%	4.40%	4.20%	4.00%	3.80%	3.60%	3.40%	3.20%	3.00%
9+	5.00%	4.70%	4.40%	4.10%	3.80%	3.50%	3.20%	2.90%	2.60%	2.30%	2.00%

Series 8 Lapse Rates		
Duration	Issue Age	
	<85	85+
1	15.00%	12.00%
2	10.00%	8.00%
3	8.00%	6.40%
4	6.00%	4.80%
5+	5.00%	4.00%

Series 9 Lapse Rates											
Duration	Issue Age										
	<76	76	77	78	79	80	81	82	83	84	85+
1	15.00%	14.70%	14.40%	14.10%	13.80%	13.50%	13.20%	12.90%	12.60%	12.30%	12.00%
2	10.00%	9.80%	9.60%	9.40%	9.20%	9.00%	8.80%	8.60%	8.40%	8.20%	8.00%
3	8.00%	7.84%	7.68%	7.52%	7.36%	7.20%	7.04%	6.88%	6.72%	6.56%	6.40%
4	6.00%	5.88%	5.76%	5.64%	5.52%	5.40%	5.28%	5.16%	5.04%	4.92%	4.80%
5+	5.00%	4.90%	4.80%	4.70%	4.60%	4.50%	4.40%	4.30%	4.20%	4.10%	4.00%

Policy Form Series 8 and 9 issued business under a group trust in a small number of jurisdictions. The original pricing assumptions for claim costs, mortality, and interest did not vary between individual and group trust business but the original pricing voluntary termination rates did. The Series 8 and 9 group trust original pricing voluntary termination rates are shown in the following table

Series 8 and 9 Group Trust										
Duration	Issue Age									
	<25	25-29	30-34	35-39	40-44	45-49	50-54	55-59	60-64	65+
1	16.00%	15.00%	13.50%	12.00%	11.00%	10.00%	8.00%	6.00%	4.00%	3.00%
2	11.00%	10.00%	8.50%	7.00%	7.00%	7.00%	5.50%	4.50%	3.50%	3.00%
3	7.00%	6.00%	6.00%	6.00%	6.00%	6.00%	5.00%	4.50%	3.00%	2.00%
4	5.00%	5.00%	5.00%	5.00%	5.00%	5.00%	5.00%	4.50%	3.00%	2.00%
5	5.00%	5.00%	5.00%	5.00%	5.00%	5.00%	5.00%	4.50%	3.00%	2.00%
6	5.00%	5.00%	5.00%	5.00%	5.00%	5.00%	5.00%	4.50%	3.00%	2.00%
7+	2.00%	2.00%	2.00%	2.00%	2.00%	2.00%	2.00%	2.00%	2.00%	2.00%

The original pricing voluntary lapse rates were expected to be 0.0% for durations 10 and later for policyholders who selected the 10-pay option.

**Exhibit III
MedAmerica and Affinity Partners
Comparison of Current and Original Pricing Assumptions**

		Lapse Rates						
		Lapse rates vary by duration, premium payment option, and issue age. Lapse rates for the lifetime payment option are provided in the tables below for Series 11 Individual, Premier Group, and TNSE policy forms.						
Original Assumptions	Series 11	Series 11 Individual						
			Lapse Rates by Issue Age					
		Duration	<60	60-64	65-69	70-74	75-79	80+
		1	10.00%	11.00%	12.00%	12.00%	12.00%	12.00%
		2	7.00%	7.00%	7.00%	6.00%	4.00%	2.00%
		3	5.00%	4.00%	3.00%	3.00%	3.00%	2.00%
		4	3.00%	3.00%	2.00%	2.00%	2.00%	2.00%
		5	3.00%	2.00%	2.00%	2.00%	2.00%	2.00%
		6+	2.00%	2.00%	2.00%	2.00%	2.00%	2.00%
			Premier Group					
			Lapse Rates by Issue Age					
		Duration	<60	60-64	65-69	70-74	75-79	80+
		1	10.00%	11.00%	12.00%	12.00%	12.00%	12.00%
		2	7.00%	7.00%	7.00%	6.00%	4.00%	2.00%
		3	5.00%	4.00%	3.00%	3.00%	3.00%	2.00%
		4	3.00%	3.00%	2.00%	2.00%	2.00%	2.00%
		5	3.00%	2.00%	2.00%	2.00%	2.00%	2.00%
		6+	2.00%	2.00%	2.00%	2.00%	2.00%	2.00%
			TNSE					
	Lapse Rates by Issue Age							
Duration	<60	60-64	65-69	70-79	80+			
1	5.00%	5.00%	5.00%	4.00%	3.00%			
2	5.00%	5.00%	5.00%	4.00%	3.00%			
3	5.00%	4.00%	3.00%	3.00%	3.00%			
4	4.00%	4.00%	3.00%	3.00%	3.00%			
5	4.00%	3.00%	3.00%	3.00%	3.00%			
6+	3.00%	3.00%	3.00%	3.00%	3.00%			
For the 10-pay option, a reduction of 50% of these lapse rates is assumed for durations 1 to 6, and 0% lapse thereafter. For the 20-pay option, a reduction of 50% of these lapse rates is assumed for durations 1 to 13, and 0% lapse thereafter.								

**Exhibit III
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Comparison of Current and Original Pricing Assumptions**

		Benefit Expiry Rates
Current Assumptions	Series 11 and Prior	Benefit expiry rates reflect assumed policy termination due to exhaustion of benefits on limited benefit period policies. The rates are based on the <i>Guidelines</i> with adjustments for historical benefit expiry experience and vary by gender, benefit period, and attained age. A table containing the benefit expiry rates is provided in Section 6 of the actuarial memorandum.
Original Assumptions	Series 11 and Prior	Benefit expiry was not separated from the lapse assumption.
		Interest Rate
Current Assumptions	Series 11 and Prior	The current most-likely earnings rate assumption is 5.00%. This rate represents MedAmerica's expectation of its long-term investment earnings rate, which is supported by the average net investment earnings rate projected for MedAmerica's cash flow testing The maximum valuation interest rate applicable to the year of issue ranges from 3.5% to 5.5% and averages 4.3%
Original Assumptions	Prior to Series 11	Series 5 policy forms used an original pricing earnings rate assumption of 7.10% and Series 8 and 9 policy forms used an original pricing earnings rate assumption of 7.50%.
	Series 11 Individual	An original pricing earnings rate assumption of 7.50% was assumed.
	Series 11 Group	Premier Group policy forms used an original pricing earnings rate assumption of 7.50% and TNSE policy forms used an original pricing earnings rate assumption of 6.00%.
		Improvement
Current Assumptions	Series 11 and Prior	Annual improvement in the mortality and morbidity assumptions is assumed for 15 years starting in 2018. Annual mortality improvement factors vary by attained age based on the G2 improvement scale from the 2012 Individual Annuity Mortality table. Annual morbidity improvement is assumed to be 1.0%.
Original Assumptions	Series 11 and Prior	No mortality or morbidity improvement was assumed.

Appendix A Development and Justification of Current Assumptions

Milliman developed the current actuarial assumptions used in this filing.

The persistency and morbidity assumptions were developed using historical experience. Where actual experience had low credibility or did not exist, industry experience and actuarial judgement was also used. The experience used to develop these assumptions includes historical experience of MedAmerica Insurance Company (MAPA); MAPA's two sister companies, MedAmerica Insurance Company of Florida (MAFL) and MedAmerica Insurance Company of New York (MANY) (MAPA, MAFL, and MANY collectively referred to as MedAmerica); and MedAmerica's affinity partners that issued the same products and, where appropriate, other similar business. For persistency, policy termination experience through December 31, 2015 was used. For morbidity, claim experience through June 30, 2016 was used with six months of runout.

Improvement (mortality and morbidity) was developed based on individual annuitant or industry experience, along with actuarial judgment. The rate increase dependent assumptions were developed using historical experience, and actuarial judgement where experience had low credibility or did not exist.

Predictive analytics was used in the development of the morbidity assumption. The persistency assumption utilized traditional techniques and credibility measures.

The rest of this appendix provides details on the development and justification of the current assumptions.

Persistency

The assumptions for mortality and lifetime-pay voluntary lapse were developed based on detailed historical experience through December 31, 2015 for MedAmerica's organic (including affinity partners) and acquired business. For the acquired business, experience prior to acquisition was excluded as it predates MedAmerica's administration of the block. The assumptions for limited-pay voluntary lapse were developed based on experience through March 31, 2015.

The benefit expiry assumption was developed using the 2014 Milliman *Long-Term Care Guidelines (Guidelines)* with adjustments based on MedAmerica's actual benefit expiry experience through December 31, 2015 on its organic business.

Mortality Durational Factors for Individual Policies

Exhibit A-1a supports the individual business mortality assumption and provides the following information for all companies and products (both individual and group) combined, but separately for issue age bands (i) 75 and older, (ii) 70 to 74, (iii) 65 to 69, and (iv) 60 to 64:

- Exposure that reflects a full year of exposure for each death and the length of time a covered life is exposed to the risk of death during the year for each life that does not die.
- Mortality rates for actual, expected, and an additional standard table for comparison. All of these rates were brought forward to 2015 for consistency with the basis of the expected table by applying mortality improvement factors that reflect annual improvement of 0.5% for females and 1.0% for males.

Actual mortality rates equal the number of deaths divided by exposure. The number of deaths includes a scalar to capture improvement between the year of death and 2015. For example, if 10 males died in 2010, then the number of deaths (10) would be multiplied by 5 years of improvement (0.951).

2015GAM mortality rates equal 94GAM with 21 years of improvement, which results in scalars of 90% for females and 81% for males. These are the expected mortality rates to which the factors in Section 6 of the actuarial memorandum are applied.

2015IAM is equal to 2012 Individual Annuity Mortality (2012IAM) Period standard table mortality rates with 3 years of improvement (scalars of 98.5% for females and 97% for males).

- Ratios of actual and standard table mortality rates to the 2015GAM expected (A:E) mortality rates.
- Credibility percentage based on the number of deaths (with improvement scalars described above) and the credibility measure described at the end of this appendix.
- A:E ratio that is credibility weighted with the two standard table options for a complement.
- Smoothed durational factors that correspond to that shown in Section 6 of the actuarial memorandum.

Appendix A Development and Justification of Current Assumptions

We developed the smoothed factors by issue age band and duration. We started with the older issue ages to develop an ultimate factor and then worked backward to younger issue age bands, making experience adjustments for the first 20 durations. In developing these experience adjustments, we considered the A:E ratios, level of credibility, whether in the select or ultimate period, and A:E credibility-weighted ratios.

An ultimate level of 105% of 2015GAM was assumed based on the combined experience of issue ages 70 and older for attained ages older than 95 to the extent credible. For the first 20 durations, the factors were pegged for the mid-point of a quinquennial durational band and then interpolated in between to develop smoothed factors. The smoothed factors were determined such that the bands of quinquennial durations reproduced the actual experience, to the extent credible.

Theoretical adjustments are made, following the diagonal, according to the adjustments made for older issue age bands to maintain mortality relationships across attained ages. For example, we assume an 85% factor for attained age 80, which appears in duration 18 for issue age 62 and duration 23 for issue age 57 as shown in Section 6 of the actuarial memorandum; following along this diagonal the assumption is consistent.

Exhibit A-1b provides similar information as Exhibit A-1a for individual business only with issue ages under 60. For development of the mortality assumption for issue ages under 60, the experience was split between individual and group because there is a material amount of group experience under 60. Mortality can differ between individual and group business because of adverse selection associated with group underwriting.

For projection purposes, two years of additional improvement was applied to the 2015GAM mortality rates to bring them forward to 2017 using the G2 improvement scale from the 2012IAM table. The G2 scale is discussed further in the Improvement section below.

Mortality Durational Factors for Group Certificates

Exhibit A-1c supports the group business mortality assumption and provides exposure, actual and expected mortality rates, mortality A:E ratios, credibility percent, and smoothed scalars. The expected mortality rates include the individual durational mortality factors described above. The smoothed scalars were developed based on group products for issue ages under 60 only because it captures most of the group experience. We did not analyze group experience for other issue ages. These scalars are applied to the individual mortality durational factors, but capped at 105%, to produce the group mortality durational factors shown in Section 6 of the actuarial memorandum.

Lifetime-Pay Voluntary Lapse Rates

Exhibit A-2a provides total exposure, composite termination rates, expected mortality rates, derived voluntary lapse rates, credibility percent, and smoothed voluntary lapse rates by duration for lifetime-pay Prior to Series 11 policies. Exhibit A-2b and Exhibit A-2c provide similar information for Series 11 Individual and Series 11 Group policies, respectively.

In general, the smoothed voluntary lapse rates were set in such a way that the combined duration smoothed rates were close to the derived voluntary lapse rates (see the rows at the bottom of the exhibits). The smoothed voluntary lapse rates in the early durations were chosen to reproduce actual history, to the extent possible, so that the transition from historical to projected policy persistency was smooth. In developing the ultimate voluntary lapse rate, the level of credibility of the actual voluntary lapse experience and the experience of other forms were considered, as applicable. The degree of closeness of the smoothed voluntary lapse rate compared to actual experience depends on the level of credibility.

The actual composite (mortality and voluntary lapse) termination rates were calculated by duration as follows:

$$\text{Annualized Composite Termination Rate} = \frac{\text{Number of Deaths and Voluntary Lapses during the Year}}{\text{Number of Lives Exposed during the Year}}$$

A death or voluntary lapse (excluding benefit expiry) was assigned to the duration in which it occurred, or the preceding duration, if the termination was on the anniversary date. Each death or voluntary lapse contributes 1.0 to the numerator and a full year to the denominator. For lives whose benefits expire or do not terminate, the number of lives exposed to termination is based on the length of time a covered life is exposed to the risk of termination due to death or voluntary lapse during the year. This calculation logic is consistent with that used in the LTC Insurance Persistency Experience reports sponsored by LIMRA International and the SOA LTC Experience Committee.

Appendix A Development and Justification of Current Assumptions

The expected mortality rate assumes the gender-distinct 2015GAM table with the durational factors shown in Section 6 of the actuarial memorandum applied by duration.

The derived voluntary lapse rate is then calculated according to the following formula:

$$\text{Derived Voluntary Lapse Rate} = 1 - \frac{1 - \text{Composite Termination Rate}}{1 - \text{Expected Mortality Rate}}$$

Limited-Pay Voluntary Lapse Rates

The algorithm for the limited-pay options is similar to that used in original pricing. The smoothed lapse rates are a scalar of the lifetime-pay lapse rates. Less than 4% of the in-force policies with a limited-pay option will be subject to the lapse assumption because they will not yet be paid-up during the first six years of the projection. As a result, the impact of the limited-pay assumptions on the projections is assumed to be immaterial.

For the ten-pay and twenty-pay options, the scalars were developed from a comparison of the lifetime-pay derived lapse rates to the limited-pay option's derived lapse rates based on MedAmerica and its affinity partners' experience on all products combined. The relationships derived from this analysis were used to develop the smoothed lapse assumptions as shown in Section 6 of the actuarial memorandum.

Benefit Expiry

Benefit expiry rates reflect assumed policy lapses due to exhaustion of benefits based on the 2014 *Guidelines* with adjustments for historical benefit expiry experience and vary by attained age, gender, and benefit period. Policies with lifetime benefits do not have an expiry assumption (i.e., rate of 0%).

We compared MedAmerica's actual benefit expiry experience through December 31, 2015 to that expected by the 2014 *Guidelines*. We developed adjustment factors by attained age based on the experience of a subset of MedAmerica's organic business, which included the Series 11 and Prior business. Factors were developed by quinquennial attained age band and then interpolated to produce scalars for each attained age. These scalars were then applied to the benefit expiry rates developed by the 2014 *Guidelines* in order to produce the final benefit expiry assumptions shown in Section 6 of the actuarial memorandum.

Exhibit A-3 provides exposure, actual and expected benefit expiry rates, A:E ratios, credibility percent, credibility-weighted A:E ratios, and smoothed adjustment factors. The exposure used reflects a full year of exposure for each benefit expiry and the length of time a covered life is exposed to the risk of benefit expiry during the year for each life that does not expire benefits.

Morbidity

The claim costs were developed using the 2014 *Guidelines* with experience-adjustment factors based on all products of MedAmerica, its affinity partners, and any acquired business from January 1, 2004 through June 30, 2016, with runout through December 31, 2016. The experience-adjustment factors were developed using predictive analytics as described in the Predictive Analytics section below.

- Exhibit A-4a – provides the adjustment factors that are to be applied to the 2014 *Guidelines* claim costs for the Series 11 and Prior policy forms.
- Exhibit A-4b – provides a summary of A:E experience for the Series 11 and Prior policy forms.
 - Exposure [A] reflects the length of time a covered life is in force (i.e., an exact exposure basis).
 - Actual incurred claim counts [B] and dollars [C] are based on historical claim experience from inception through June 30, 2016, with runout through December 31, 2016. Actual incurred claim dollars were valued as paid claims plus claim reserves. Paid claims and claim reserves were discounted to the year of incurral.
 - 2014 *Guidelines* expected incurred claims [D] are valued as the 2014 *Guidelines* claim costs multiplied by actual all-lives exposure. The claim costs vary by gender, attained age, policy duration, benefit period, elimination period, payment type, level of home care coverage, inflation type, and coverage type (comprehensive/facility only/home health care only). Policy design, claims adjudication, and degree of underwriting were considered in developing the claim costs.
 - Adjusted expected incurred claims [E] are calculated by applying each applicable adjustment from Exhibit A-4a to the 2014 *Guidelines* expected incurred claims [D].

Appendix A Development and Justification of Current Assumptions

- A:E ratios are calculated as actual incurred claims to the 2014 *Guidelines* expected incurred claims [F] and adjusted expected incurred claims [G]. The adjusted A:E [G] provides an indication of fit. This fit will not be perfect (i.e., ratio deviates from 1.0) because the main goal is to develop an assumption that generalizes well to new data by balancing assumption complexity and fit on the historical experience.
- Exhibit A-4c – provides information similar to Exhibit A-4b, except provides the experience for all products of MedAmerica, its affinity partners, and any acquired business.

Prior to developing the experience-adjustment factors, the 2014 *Guidelines* were adjusted for an assumed level of morbidity improvement. The 2014 *Guidelines* claim costs reflect morbidity improvement such that they are as of calendar year 2014. We assume this improvement has also occurred in the actual historical experience. Therefore, a backward or forward projection of morbidity improvement was applied to the expected claim costs on a seriatim basis based on the calendar year in which a given policy's duration fell. An annual improvement level of 1.0% was used in the backward or forward projections.

For projection purposes, three years of 1.0% improvement was applied to the 2014 *Guidelines* to bring them forward to 2017.

Improvement

For projected mortality improvement, the G2 improvement scale from the 2012IAM mortality table was used. The G2 improvement scale varies by attained age and is applied beginning in the first projection year and continues for 15 projection years.

For projected morbidity improvement, a level of 1.0% is assumed for 15 years beginning January 1, 2018. This assumption is set based on the underlying morbidity improvement from the 2014 *Guidelines*. This level is also reasonable based on the SOA July 2016 study, *Long Term Care Morbidity Improvement Study: Estimates for the Non-Insured U.S. Elderly Population Based on the National Long Term Care Survey 1984-2004*. This study reported population annual morbidity improvement of 2.3% for unisex, 2.5% for males, and 2.1% for females. The SOA July 2016 study uses population data, so it is uncertain how well these findings will translate to an insured population. The SOA June 2011 study suggests that an annuitant cohort has more mortality improvement over the general population, so it is possible that this could be true for morbidity as well. Based on these studies, a reasonable range for morbidity improvement is between 0.0% to 2.5% for males and 0.0% to 2.1% for females for 10 to 20 years.

Rate Increase Dependent Assumptions

At the time of a rate increase, insureds have options to elect a contingent benefit upon lapse (CBUL) or reduced benefit options (RBO). Adverse selection is assumed relative to CBUL and RBO elections. These insured behavior assumptions are provided in Section 6 of the actuarial memorandum. These assumptions are based on MedAmerica's actual CBUL and RBO election rate experience to the extent it exists and is credible and actuarial judgment, particularly at the higher rate increase magnitudes where little experience exists.

Contingent Benefit Upon Lapse Election

The assumed CBUL election rate varies based on the cumulative rate increase. The assumption is applied on a seriatim basis and prorated for the requested increase needed to achieve the cumulative rate increase amounts. No CBUL elections are assumed for limited-pay policies.

Reduced Benefit Options

We assume that those electing RBO will reduce their benefits so that premiums after the increase are closer to those before the increase. We assume that the percent reduction in premium corresponds to an equivalent percent reduction in claims. We assume a RBO election rate that varies based on the cumulative rate increase. The assumption is applied on a seriatim basis and prorated for the requested increase needed to achieve the cumulative rate increase amounts. No RBO elections are assumed for limited-pay policies.

The reduction to premium and claims varies based on the level of the rate increase and can then be determined as follows:

Appendix A Development and Justification of Current Assumptions

Reduction to premium and claims due to the election of RBO
= $1 - (\text{Average premium level after the rate increase with RBO election} / \text{Premium level after the full rate increase without any RBO election})$, where

Average premium level after the rate increase with RBO election
= weighted average premium level of those assumed to elect RBO with those assumed to accept the full rate increase

Adverse Selection

The adverse selection assumption is a function of the CBUL and RBO election rates, such that the relative increase to morbidity due to adverse selection varies by the rate increase's magnitude. The increase to morbidity due to adverse selection was developed from the following formula and actuarial judgment. We assume that at the time of the rate increase, insureds that elect a CBUL will be selective in that their relative morbidity is 25% lower than that of the remaining pool. Similarly, we assume that at the time of the rate increase, insureds that elect an RBO will be selective in that their relative morbidity is 12.5% lower than that of the remaining pool.

$\text{PoolMorb} = \text{AdvSelMorb} \times (1 - \text{CBUL} - \text{RBO}) + [(1 - 25\%) \times \text{AdvSelMorb}] \times \text{CBUL} + [(1 - 12.5\%) \times \text{AdvSelMorb}] \times \text{RBO}$, where

PoolMorb = morbidity of the pool before the rate increase = 1.0
AdvSelMorb = adverse morbidity of the remaining pool after the rate increase due to selective lapses
CBUL = percentage of policies that elect CBUL
RBO = percentage of policies that elect RBO

Solving the above for the adverse selection component results in the following formula for lifetime-pay policies:

Adverse Selection = $1 / (1 - 25\% \times \text{CBUL} - 12.5\% \times \text{RBO})$

Predictive Analytics

In developing the morbidity experience-adjustment factors, predictive analytics was employed in the form of a penalized generalized linear model (GLM).

A penalized GLM is similar to a traditional GLM. The only difference is that it adds an additional constraint that penalizes the size of the model's coefficients in order to control overfitting the model to the historical data. This penalty placed on the coefficients can be seen as a credibility lever, which controls how much weight is given to the company's actual experience. A high penalty would give no weight to the data, leaving the benchmark assumption (i.e., the 2014 *Guidelines* for morbidity) unadjusted. No penalty would give full weight to the company's actual data potentially making large adjustments to the benchmark, which could be overfitting the actual experience. When using a penalized GLM it is important to choose a penalty that gives the right amount of weight to the actual data to avoid underfitting or overfitting the experience.

A standard approach for choosing such a penalty is to use a *k*-fold cross-validation to test a series of penalty values. A *k*-fold cross-validation splits the data into *k* subsets and iteratively trains and tests the model independently on each subset of the data. This process gives an estimation of how well a model will generalize to new data that was not used to develop the assumption. Through the *k*-fold cross-validation we evaluated the impact the penalty had on the model's generalizability by testing a range of 100 penalties. We selected the penalty that minimized the *k*-fold cross-validation prediction error. Using this approach, we were able to determine the amount of weight to give actual experience versus the benchmark assumption through a statistically robust and automated process.

Credibility

The methodology employed to develop the persistency assumptions considers actual historical experience and its associated credibility. Credibility percentage for the persistency assumptions was determined as $(\text{Number of Events} / \text{Credibility Threshold})^{1/2}$, with events defined as deaths, voluntary lapses, or benefit expiries. A credibility standard of a 90% confidence interval for the number of events with an error of plus or minus 7.5% was chosen. Based on these parameters, 481 events is the criterion for full credibility.

Exhibit A-1a
Actual-to-Expected (A:E) Mortality Experience through December 31, 2015
All Products

Duration	Exposure	Mortality Rate			Ratios to 2015GAM		Credibility Percent	A:E Credibility-Weighted with:		Smoothed Durational Factors
		Actual (A)	2015GAM (E)	2015IAM (X)	Actual (A:E)	2015IAM (X:E)		2015GAM (E:E=1.00)	2015IAM (X:E)	
Issue Age 75+										
1-5	24,998	1.8%	4.4%	3.1%	0.40	0.70	95%	0.43	0.41	0.41
6-10	20,553	5.0%	7.0%	5.5%	0.71	0.78	100%	0.71	0.71	0.71
11-15	11,268	10.1%	10.5%	8.8%	0.96	0.84	100%	0.96	0.96	0.96
16-20	3,330	16.3%	16.1%	14.2%	1.02	0.88	100%	1.02	1.02	1.04
21-25	415	25.3%	22.2%	20.6%	1.14	0.93	47%	1.07	1.03	1.05
26+	25	7.8%	32.1%	30.8%	0.24	0.96	6%	0.95	0.91	1.05
21+	440	24.3%	22.8%	21.2%	1.07	0.93	47%	1.03	0.99	1.05
All	60,589	5.4%	7.2%	5.7%	0.75	0.79	100%	0.75	0.75	0.75
Issue Ages 70 - 74										
1-5	39,706	0.9%	2.2%	1.4%	0.41	0.64	87%	0.49	0.45	0.40
6-10	38,186	2.4%	3.7%	2.5%	0.66	0.67	100%	0.66	0.66	0.65
11-15	27,286	4.9%	6.0%	4.4%	0.83	0.74	100%	0.83	0.83	0.84
16-20	10,157	9.1%	9.4%	7.7%	0.98	0.82	100%	0.98	0.98	0.98
21-25	2,029	14.6%	14.3%	12.3%	1.02	0.86	78%	1.02	0.99	1.04
26+	138	25.8%	20.4%	18.6%	1.27	0.91	27%	1.07	1.01	1.05
21+	2,167	15.3%	14.7%	12.7%	1.04	0.87	83%	1.03	1.01	1.04
All	117,501	3.3%	4.4%	3.2%	0.75	0.73	100%	0.75	0.75	0.75
Issue Ages 65 - 69										
1-5	67,094	0.6%	1.4%	0.9%	0.42	0.65	90%	0.48	0.44	0.40
6-10	65,409	1.4%	2.2%	1.4%	0.64	0.64	100%	0.64	0.64	0.65
11-15	50,103	2.9%	3.7%	2.4%	0.78	0.66	100%	0.78	0.78	0.79
16-20	23,101	5.3%	5.9%	4.3%	0.90	0.74	100%	0.90	0.90	0.90
21-25	6,829	9.5%	9.3%	7.6%	1.03	0.82	100%	1.03	1.03	0.99
26+	533	13.8%	13.6%	11.6%	1.01	0.86	39%	1.01	0.92	1.04
21+	7,362	9.8%	9.6%	7.9%	1.03	0.82	100%	1.03	1.03	0.99
All	213,069	2.2%	3.0%	2.0%	0.75	0.69	100%	0.75	0.75	0.74
Issue Ages 60 - 64										
1-5	93,335	0.3%	0.9%	0.6%	0.41	0.72	82%	0.51	0.46	0.39
6-10	85,284	0.8%	1.4%	0.9%	0.57	0.65	100%	0.57	0.57	0.59
11-15	58,636	1.5%	2.3%	1.5%	0.68	0.65	100%	0.68	0.68	0.67
16-20	27,386	3.2%	3.8%	2.5%	0.85	0.67	100%	0.85	0.85	0.83
21-25	9,435	5.5%	6.1%	4.5%	0.90	0.75	100%	0.90	0.90	0.90
26+	782	9.5%	9.1%	7.5%	1.05	0.82	39%	1.02	0.91	0.97
21+	10,217	5.8%	6.3%	4.8%	0.92	0.76	100%	0.92	0.92	0.91
All	274,857	1.2%	1.8%	1.2%	0.68	0.68	100%	0.68	0.68	0.67

Exhibit A-1b
Actual-to-Expected (A:E) Mortality Experience through December 31, 2015
Individual Products

Duration	Exposure	Mortality Rate			Ratios to 2015GAM		Credibility Percent	A:E Credibility-Weighted with:		Smoothed Durational Factors
		Actual (A)	2015GAM (E)	2015IAM (X)	Actual (A:E)	2015IAM (X:E)		2015GAM (E:E=1.00)	2015IAM (X:E)	
Issue Age <60										
1-5	213,822	0.1%	0.3%	0.2%	0.39	0.86	66%	0.59	0.55	0.38
6-10	134,800	0.3%	0.5%	0.4%	0.54	0.77	88%	0.59	0.56	0.54
11-15	57,646	0.6%	0.9%	0.7%	0.61	0.69	83%	0.67	0.62	0.60
16-20	24,577	1.1%	1.5%	1.0%	0.70	0.67	74%	0.78	0.69	0.70
21-25	9,193	1.7%	2.4%	1.6%	0.70	0.67	57%	0.83	0.68	0.79
26+	759	2.9%	4.4%	3.1%	0.65	0.72	21%	0.93	0.70	0.87
21+	9,952	1.8%	2.6%	1.7%	0.69	0.68	61%	0.81	0.68	0.80
All	440,797	0.3%	0.6%	0.4%	0.56	0.75	100%	0.56	0.56	0.57

Exhibit A-1c
Actual-to-Expected (A:E) Mortality Experience through December 31, 2015
Group Products

Duration	Exposure	Actual Mortality Rate	Expected Mortality Rate ^[1]	Mortality A:E	Credibility Percent	Smoothed Scalars
Issue Age <60						
1-5	120,598	0.2%	0.1%	2.00	65%	2.00
6-10	109,681	0.3%	0.2%	1.48	85%	1.50
11-15	71,689	0.5%	0.4%	1.20	83%	1.20
16-20	25,556	0.7%	0.6%	1.15	59%	1.15
21-25	11,926	0.8%	0.9%	0.93	45%	1.10
26-30	305	1.3%	1.2%	1.06	9%	1.05
31+	0	N/A	N/A	N/A	0%	1.00

[1] Includes the durational adjustment factors developed for individual business.

Exhibit A-2a
Derived Lifetime-Pay Voluntary Lapse Experience through December 31, 2015
Prior to Series 11 Policy Forms

Duration	Exposure	Composite Termination Rates	Expected Mortality Rates	Derived Lapse Rates	Credibility Percent	Smoothed Lapse Rates
1	5,409	16.9%	0.6%	16.4%	100%	16.50%
2	4,493	9.3%	0.9%	8.4%	89%	8.50%
3	4,076	6.5%	1.3%	5.2%	68%	5.00%
4	3,810	5.3%	1.5%	3.6%	55%	3.50%
5	3,607	4.0%	1.9%	2.0%	41%	2.00%
6	3,457	3.1%	2.0%	0.9%	34%	1.50%
7	3,345	3.7%	2.3%	1.2%	29%	1.50%
8	3,209	4.6%	2.5%	1.8%	33%	1.50%
9	3,047	4.0%	2.8%	1.0%	30%	1.50%
10	2,913	4.5%	3.1%	1.2%	31%	1.00%
11	2,765	5.4%	3.4%	1.8%	27%	1.00%
12	2,604	5.2%	3.7%	1.3%	25%	1.00%
13	2,447	5.5%	3.9%	1.4%	22%	1.00%
14	2,289	5.6%	4.2%	1.2%	20%	1.00%
15	2,087	4.9%	4.6%	0.2%	16%	1.00%
16	1,858	5.7%	5.0%	0.6%	18%	1.00%
17	1,504	6.8%	5.5%	1.3%	18%	1.00%
18	1,104	6.6%	6.0%	0.5%	9%	1.00%
19	710	7.2%	6.6%	0.5%	8%	1.00%
20	422	8.8%	7.1%	1.7%	6%	1.00%
21	224	8.9%	7.5%	1.4%	6%	1.00%
22	99	12.1%	8.9%	3.5%	6%	1.00%
23	28	7.2%	10.6%	-3.8%	5%	1.00%
24	1	0.0%	12.6%	-14.4%	0%	1.00%
1-3	13,978	11.4%	0.9%	10.5%	100%	10.6%
4-6	10,875	4.1%	1.8%	2.2%	77%	2.4%
7-9	9,601	4.1%	2.5%	1.4%	53%	1.5%
5+	37,720	4.8%	3.4%	1.3%	100%	1.3%
6+	34,113	4.9%	3.6%	1.2%	92%	1.2%
7+	30,656	5.1%	3.8%	1.2%	85%	1.2%
8+	27,311	5.3%	4.0%	1.2%	80%	1.1%
9+	24,103	5.4%	4.2%	1.1%	73%	1.1%
10+	21,056	5.6%	4.3%	1.1%	66%	1.0%
All	55,509	6.5%	2.7%	3.8%	100%	3.8%

Exhibit A-2b
Derived Lifetime-Pay Voluntary Lapse Experience through December 31, 2015
Series 11 Individual Policy Forms

Duration	Exposure	Composite Termination Rates	Expected Mortality Rates	Derived Lapse Rates	Credibility Percent	Smoothed Lapse Rates
1	12,157	8.6%	0.2%	8.3%	100%	8.50%
2	11,116	4.4%	0.4%	4.0%	96%	4.00%
3	10,632	3.4%	0.5%	2.8%	79%	2.75%
4	10,244	2.6%	0.6%	2.0%	65%	2.00%
5	9,933	2.1%	0.8%	1.3%	54%	1.50%
6	9,696	2.3%	0.9%	1.4%	54%	1.25%
7	9,432	2.4%	1.1%	1.3%	52%	1.25%
8	9,116	2.1%	1.3%	0.8%	41%	1.00%
9	8,825	2.4%	1.5%	0.9%	38%	0.75%
10	8,499	2.5%	1.7%	0.8%	36%	0.60%
11	8,129	2.5%	1.9%	0.6%	34%	0.60%
12	7,460	2.7%	2.1%	0.5%	31%	0.60%
13	5,806	3.0%	2.4%	0.5%	25%	0.60%
14	4,305	3.2%	2.8%	0.4%	23%	0.60%
15	2,813	3.4%	3.2%	0.2%	12%	0.60%
16	1,878	3.6%	3.4%	0.2%	8%	0.60%
17	1,351	5.0%	3.5%	1.6%	8%	0.60%
18	108	2.8%	3.7%	-1.0%	0%	0.60%
1-3	33,905	5.6%	0.4%	5.2%	100%	5.2%
4-6	29,874	2.4%	0.8%	1.6%	100%	1.6%
7-9	27,373	2.3%	1.3%	1.0%	76%	1.0%
5+	87,352	2.6%	1.6%	0.9%	100%	0.9%
6+	77,419	2.6%	1.8%	0.8%	100%	0.8%
7+	67,722	2.7%	1.9%	0.8%	100%	0.8%
8+	58,290	2.7%	2.0%	0.7%	89%	0.7%
9+	49,175	2.8%	2.1%	0.6%	80%	0.6%
10+	40,349	2.9%	2.3%	0.6%	70%	0.6%
All	131,501	3.3%	1.2%	2.1%	100%	2.1%

Exhibit A-2c
Derived Lifetime-Pay Voluntary Lapse Experience through December 31, 2015
Series 11 Group Policy Forms

Duration	Exposure	Composite Termination Rates	Expected Mortality Rates	Derived Lapse Rates	Credibility Percent	Smoothed Lapse Rates
1	7,058	6.4%	0.1%	6.3%	95%	6.50%
2	6,497	6.4%	0.2%	6.2%	91%	6.00%
3	5,951	4.4%	0.2%	4.2%	71%	4.00%
4	5,489	4.0%	0.3%	3.7%	63%	3.50%
5	5,008	3.3%	0.3%	3.0%	56%	3.00%
6	4,811	2.7%	0.4%	2.3%	46%	2.50%
7	4,644	2.2%	0.4%	1.8%	40%	2.00%
8	4,498	2.3%	0.5%	1.8%	40%	1.50%
9	4,297	1.7%	0.6%	1.1%	32%	1.30%
10	4,093	2.0%	0.6%	1.4%	36%	1.30%
11	3,468	2.4%	0.7%	1.7%	32%	1.30%
12	2,846	1.8%	0.8%	1.0%	26%	1.30%
13	1,498	1.3%	0.8%	0.5%	12%	1.30%
14	346	3.2%	0.7%	2.5%	10%	1.30%
15	74	1.4%	0.9%	0.5%	5%	1.30%
16	31	3.2%	1.0%	2.2%	5%	1.30%
17	3	0.0%	1.5%	-1.5%	0%	1.30%
1-3	19,506	5.8%	0.2%	5.6%	100%	5.6%
4-6	15,308	3.4%	0.3%	3.0%	96%	3.0%
7-9	13,439	2.1%	0.5%	1.6%	65%	1.6%
5+	35,618	2.3%	0.5%	1.8%	100%	1.8%
6+	30,609	2.2%	0.6%	1.6%	98%	1.6%
7+	25,799	2.1%	0.6%	1.5%	87%	1.5%
8+	21,154	2.0%	0.6%	1.4%	77%	1.3%
9+	16,656	1.9%	0.7%	1.3%	66%	1.3%
10+	12,359	2.0%	0.7%	1.3%	57%	1.3%
All	60,612	3.6%	0.4%	3.2%	100%	3.2%

Exhibit A-3
Actual-to-Expected (A:E) Benefit Expiration Experience through December 31, 2015
Subset of MedAmerica Organic Business

Attained Age Band	Exposure	Actual Expiry Rate	Expected Expiry Rate	Expiry A:E	Credibility Percent	Credibility-Weighted A:E	Smoothed Adjustment Factors
<80	528,089	0.03%	0.04%	0.70	56%	0.83	0.85
80-84	50,683	0.52%	0.41%	1.27	74%	1.20	1.25
85-89	22,568	1.52%	1.04%	1.46	85%	1.39	1.45
90+	6,638	4.43%	2.47%	1.79	78%	1.62	1.65
All	607,979	0.17%	0.14%	1.28	100%	1.28	1.28

Exhibit A-4a
MedAmerica and Affinity Partners
Morbidity Adjustment Factors
Series 11 and Prior Policy Forms

Duration	Product-Specific Adjustment Factors		
	Prior to Series 11	Series 11 Individual	Series 11 Group
1	1.01	1.00	0.89
2	1.03	0.98	0.83
3	1.04	0.96	0.78
4	1.09	0.99	0.74
5	1.17	0.97	0.71
6	1.19	0.97	0.76
7	1.18	1.00	0.82
8	1.16	1.02	0.91
9	1.09	0.97	1.01
10	1.01	0.98	1.13
11	0.96	1.01	1.23
12	0.97	1.04	1.24
13	1.00	1.06	1.17
14	1.05	1.09	1.09
15	1.11	1.14	1.00
16	1.12	1.11	0.96
17	1.11	1.07	0.95
18	1.08	1.05	0.96
19	1.04	1.03	0.98
20+	1.02	1.02	0.99

Attained Age	Product-Specific Adjustment Factors		
	Prior to Series 11	Series 11 Individual	Series 11 Group
<55	1.05	1.00	1.02
55	1.05	1.00	1.02
56	1.05	1.00	1.02
57	1.04	1.00	1.01
58	1.02	0.97	0.99
59	1.09	0.94	0.99
60	1.09	0.93	0.97
61	1.15	0.93	0.98
62	1.23	0.89	0.99
63	1.36	0.86	1.00
64	1.28	0.87	0.99
65	1.23	0.90	0.97
66	1.20	0.90	0.95
67	1.18	0.95	0.93
68	1.08	1.07	0.95
69	1.08	1.11	0.93
70	1.06	1.09	0.93
71	1.00	1.10	0.94
72	0.94	1.13	0.95
73	0.94	1.09	0.95
74	0.94	1.10	0.98
75	0.91	1.13	0.99
76	0.90	1.13	1.00
77	0.92	1.05	0.99
78	0.90	1.05	0.98
79	0.89	1.04	0.98
80	0.93	1.03	1.00
81	0.98	1.03	1.01
82	0.96	1.09	1.04
83	0.99	1.10	1.06
84	0.99	1.09	1.06
85	0.99	1.09	1.04
86	0.96	1.09	1.03
87	0.98	1.06	1.01
88	0.97	1.05	1.00
89	0.98	1.07	0.99
90	0.98	1.06	0.99
91	0.99	1.06	0.99
92	1.00	1.05	0.99
93	1.01	1.02	0.99
94	1.01	0.99	0.99
95	1.02	0.98	1.00
96	1.01	0.97	1.00
97	1.00	0.97	1.00
98	1.00	0.98	1.00
99	1.00	0.99	1.00
100	1.00	0.99	1.00
101+	1.00	1.00	1.00

Attained Age	Payment Type Adjustment Factors		
	Series 11 and Prior Individual		Series 11 Group
	Non-Tax-Qualified (NTQ)	Tax-Qualified (TQ)	
<55	0.99	0.94	1.07
55	0.99	0.94	1.07
56	0.99	0.94	1.07
57	0.94	0.92	1.12
58	0.88	0.92	1.11
59	0.90	0.88	1.11
60	0.91	0.91	1.04
61	0.91	0.90	1.02
62	0.96	0.87	0.92
63	1.05	0.81	0.90
64	0.96	0.81	0.90
65	0.89	0.85	0.91
66	0.89	0.82	0.93
67	0.90	0.87	1.01
68	0.83	0.95	1.07
69	0.88	1.01	1.04
70	0.94	0.99	1.01
71	0.98	1.03	0.99
72	1.00	1.05	0.96
73	1.06	1.05	0.96
74	1.11	1.04	0.97
75	1.14	1.04	0.93
76	1.10	1.08	0.93
77	1.08	1.07	0.88
78	1.07	1.09	0.82
79	1.06	1.12	0.77
80	1.03	1.19	0.79
81	1.06	1.15	0.78
82	1.08	1.14	0.82
83	1.14	1.14	0.87
84	1.08	1.10	0.94
85	1.10	1.07	0.95
86	1.09	1.09	0.98
87	1.10	1.17	0.98
88	1.06	1.18	0.97
89	1.09	1.22	0.97
90	1.06	1.24	0.96
91	1.04	1.24	0.97
92	1.02	1.15	0.98
93	1.02	1.11	0.99
94	1.01	1.06	0.99
95	1.03	1.04	0.99
96	1.02	1.01	0.98
97	1.03	1.01	0.98
98	1.00	1.01	0.97
99	1.00	1.01	0.97
100	1.00	1.02	0.98
101+	1.00	1.02	0.98

Attained Age	Non-MANY Adjustment Factor	
	Series 11 and Prior Individual	Series 11 Group
<55	1.07	1.01
55	1.07	1.01
56	1.07	1.01
57	1.06	1.00
58	0.99	0.98
59	0.95	0.99
60	0.89	0.99
61	0.89	1.01
62	0.88	1.03
63	0.94	1.03
64	1.00	1.01
65	1.00	1.00
66	1.09	0.98
67	1.17	0.97
68	1.25	1.00
69	1.26	1.00
70	1.28	1.00
71	1.13	1.01
72	1.09	1.02
73	1.03	1.01
74	1.03	1.02
75	0.99	1.03
76	1.00	1.03
77	0.97	1.02
78	0.97	1.00
79	0.97	1.00
80	1.02	1.01
81	1.08	1.01
82	1.12	1.03
83	1.13	1.05
84	1.11	1.04
85	1.08	1.03
86	1.05	1.02
87	1.03	1.01
88	1.02	1.00
89	1.05	0.99
90	1.05	0.99
91	1.05	0.99
92	1.05	0.99
93	1.04	0.99
94	1.00	0.99
95	1.00	1.00
96	0.98	1.00
97	0.97	1.00
98	0.98	1.00
99	0.99	1.00
100	0.99	1.00
101+	1.00	1.00

Coverage Type	Adjustment Factor
Comprehensive	0.90
Nursing Home Only	1.03
Home Care Only	1.10

Exhibit A-4b
MedAmerica and Affinity Partners
Actual-to-Expected (A:E) Morbidity Experience through June 30, 2016 with Claim Runout
Series 11 and Prior Policy Forms

Policy or Policyowner Characteristic	Exposure [A]	Actual Incurred Claims		Expected Incurred Claims		A:E Incurred Claims	
		Count [B]	Dollars [C]	2014 Guidelines [D]	New [E]	2014 Guidelines [F] = [C] / [D]	New [G] = [C] / [E]
Group / Individual							
Individual	193,242	2,249	178,975,634	156,954,375	176,559,724	1.14	1.01
Group	70,814	144	12,926,716	15,433,614	12,861,010	0.84	1.01
Payment-Type / Tax Status (TQ = Tax-Qualified, NTQ = Non-Tax-Qualified)							
Cash / TQ	-	-	-	-	-	-	-
Reimbursement / NTQ	39,927	917	65,409,856	59,812,646	63,796,383	1.09	1.03
Reimbursement / TQ	224,130	1,476	126,492,493	112,575,343	125,624,350	1.12	1.01
Coverage Type							
Comprehensive	227,746	1,884	150,906,765	139,676,235	147,922,870	1.08	1.02
Nursing Home Only	32,685	460	38,605,492	30,464,462	38,400,192	1.27	1.01
Home Care Only	3,625	49	2,390,092	2,247,291	3,097,671	1.06	0.77
Attained Age							
< 60	83,038	42	4,870,844	5,365,561	4,676,717	0.91	1.04
60 - 69	79,848	159	19,010,143	18,287,944	16,392,665	1.04	1.16
70 - 79	70,206	692	61,059,411	58,372,138	61,346,118	1.05	1.00
80 - 89	28,701	1,254	93,780,632	78,168,887	93,335,869	1.20	1.00
90 +	2,264	246	13,181,321	12,193,459	13,669,365	1.08	0.96
Policy Duration							
< 7	100,261	233	18,673,085	21,414,416	20,738,173	0.87	0.90
7 - 10	81,762	596	50,705,841	45,309,295	48,390,377	1.12	1.05
11 - 15	68,137	1,050	84,288,017	73,690,605	83,520,887	1.14	1.01
16 - 20	13,264	475	36,640,193	30,113,053	34,827,994	1.22	1.05
21 +	632	39	1,595,214	1,860,621	1,943,302	0.86	0.82
Product							
Series 11 Group	70,814	144	12,926,716	15,433,614	12,861,010	0.84	1.01
Series 11 Individual	153,316	1,332	113,565,777	97,141,729	112,763,341	1.17	1.01
Prior to Series 11	39,927	917	65,409,856	59,812,646	63,796,383	1.09	1.03
Total	264,057	2,393	191,902,350	172,387,989	189,420,734	1.11	1.01

Exhibit A-4c
MedAmerica, Affinity Partners, and Acquired Business
Actual-to-Expected (A:E) Morbidity Experience through June 30, 2016 with Claim Runout
All Products

Policy or Policyowner Characteristic	Exposure [A]	Actual Incurred Claims		Expected Incurred Claims		A:E Incurred Claims	
		Count [B]	Dollars [C]	2014 Guidelines [D]	New [E]	2014 Guidelines [F] = [C] / [D]	New [G] = [C] / [E]
Group / Individual							
Individual	912,916	9,926	800,367,697	733,049,215	794,361,129	1.09	1.01
Group	346,699	1,374	130,339,904	156,675,596	133,888,114	0.83	0.97
Payment-Type / Tax Status (TQ = Tax-Qualified, NTQ = Non-Tax-Qualified)							
Cash / TQ	343,731	558	62,039,510	57,638,053	59,620,193	1.08	1.04
Reimbursement / NTQ	300,053	6,653	510,365,552	479,343,318	507,745,230	1.06	1.01
Reimbursement / TQ	615,831	4,089	358,302,538	352,743,439	360,883,820	1.02	0.99
Coverage Type							
Comprehensive	1,136,716	8,789	756,597,258	749,849,298	758,592,612	1.01	1.00
Nursing Home Only	106,185	2,145	154,205,174	127,829,789	153,061,713	1.21	1.01
Home Care Only	16,715	366	19,905,169	12,045,724	16,594,918	1.65	1.20
Attained Age							
< 60	453,624	244	33,805,437	30,149,268	30,328,735	1.12	1.11
60 - 69	360,462	666	78,589,161	88,054,403	75,788,341	0.89	1.04
70 - 79	291,092	2,748	262,147,876	268,144,812	267,494,038	0.98	0.98
80 - 89	138,826	5,979	465,876,836	417,634,186	464,847,833	1.12	1.00
90 +	15,611	1,663	90,288,290	85,742,142	89,790,297	1.05	1.01
Policy Duration							
< 7	497,039	823	75,787,355	82,648,988	79,201,077	0.92	0.96
7 - 10	307,411	1,867	174,015,180	164,578,241	170,058,801	1.06	1.02
11 - 15	278,526	3,765	317,411,016	297,015,693	316,181,994	1.07	1.00
16 - 20	129,643	3,188	245,115,546	230,142,856	242,291,028	1.07	1.01
21 +	46,996	1,657	118,378,503	115,339,033	120,516,343	1.03	0.98
Total	1,259,615	11,300	930,707,601	889,724,811	928,249,243	1.05	1.00

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<u>Product</u>	<u>Number</u>
Prior to Series 11	
Facility Only Form	LTC-LBP-2PA
Facility Only Form	LTC-LBP8-MA-PA
Comprehensive Form	LTC-CD5-2PA
Comprehensive Form	LTC-CD8-MA-PA
Comprehensive Form	LTC-CD9-MA-PA
Series 11 Individual	
Comprehensive Form	LTQ11-336-MA-PA-998
Facility Only Form	NTQ11-337-MA-PA-998
Home Health Only Form	HTQ11-338-MA-PA-998
Comprehensive Form	LTQ11-336-MA-PA-601
Franchise Comprehensive Form	FLQ11-336-MA-PA-601
Facility Only Form	NTQ11-337-MA-PA-601
Home Health Only Form	HTQ11-338-MA-PA-601

1. Purpose of Filing

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

This supplement to the actuarial memorandum captures the pooled nationwide experience of the above-listed policy form(s) and similar individual and group policy forms of the same product series issued nationwide by MedAmerica Insurance Company (MedAmerica) and its affinity partners. Pennsylvania-specific experience is not considered fully credible, but is being provided as required.

2. Demonstration of Compliance with Chapter 18 Section 3803

(c) and (e): We believe that we comply with these subsections of the regulation by submitting these rates before they are being used.

3. Demonstration of Compliance with Reg. 89.83

89.83 (a): This subsection requires no action.

89.83 (b): This subsection is not applicable since this filing is not for rates for a new policy form.

89.83 (c): Revision of Current Rates

(1): For policies issued prior to September 16, 2002, the effective date of rate stability in Pennsylvania, the minimum loss ratio requirement is 60%, as specified in Reg. 89a.117.(b). For policies issued on or after September 16, 2002, the loss ratio requirements are specified in Reg. 89a.118.(c)(2), (i.e., the 58%/85% test). Demonstration of satisfaction of these requirements is discussed in Section 15 of the enclosed actuarial memorandum.

As of December 31, 2017, 149 of the 408 policies that are in force and subject to the requested rate increase in Pennsylvania were issued on or after September 16, 2002 (approximately 37%). However, because the company manages this block of business as a whole, this rate increase filing complies with both sets of requirements for all of the policies, regardless of issue date.

(2): Section 3 of the actuarial memorandum provides a description of benefits. Copies of the affected policy forms may be provided upon request.

(2)(i): The primary reason why these forms are in need of a premium rate increase is due to emerging experience running more adverse than expected in pricing.

The company is requesting a premium rate increase that varies by benefit period to achieve the cumulative rate increases as shown in Section 2 of the enclosed actuarial memorandum. The company

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is seeking this current rate increase request to help alleviate the adverse performance on this block of business. The cumulative rate increase levels were determined to vary by benefit period to better align the rate increase with the adverse experience. The table in Section 2 of the enclosed actuarial memorandum provides the average prior, requested, and cumulative increase by benefit period based on the nationwide distribution. The enclosed cover letter provides similar information on a Pennsylvania-specific distribution.

The current rate schedules along with the proposed rate schedules are enclosed with this filing. Please note that the actual rates implemented may vary slightly from those shown due to rounding algorithms.

Exhibit I of the actuarial memorandum provides nationwide earned premium and incurred claim actual and projected experience using current assumptions, as described in Section 6 of the actuarial memorandum. Attachment 1 to this supplement provides nationwide written premium and paid claim actual and projected experience using current assumptions. Values in Exhibit I and Attachment 1 are shown both before and after the requested rate increase. The interest rate used in Exhibit I and Attachment 1 to accumulate and discount values is the maximum valuation interest rate for contract reserves applicable for the year of issue (which ranges from 3.5% to 5.5%, and averages 4.3%).

Attachments 2 and 3 to this supplement provide similar information as Exhibit I and Attachment 1 respectively, except provides Pennsylvania-specific experience.

(2)(ii)(A): There have been two rate increases approved and implemented on these policy forms in Pennsylvania. The cumulative prior approved increase is 67% and has been implemented on the individual and group policy forms. The most recent rate increase was filed for use by the Department on September 22, 2017.

(2)(ii)(B): Table 1a shows the original pricing commission scales by issue age and duration for lifetime-pay individual policies.

Table 1a
Commission Percentages by Issue Age and Duration^[1]

Individual Policy Form	Issue Ages	Commissions by Duration		
		1	2-10	11+
LTC-LBP-2PA	<71	45-78	10-21	0-5
LTC-LBP8-MA-PA	71-79	40-68	8-18	0-5
LTC-CD5-2PA	80+	35-58	5-15	0-5
LTC-CD8-MA-PA				
LTC-CD9-MA-PA	All Ages	30-50	5-10	5-10
LTQ11-336-PA-998				
NTQ11-337-PA-998				
HTQ11-338-PA-998				
LTQ11-336-MA-PA-998	<75	30-50	5-10	0-10
NTQ11-337-MA-PA-998	75+	20-40	5-10	0-10
HTQ11-338-MA-PA-998				
LTQ11-336-MA-PA-601				
HTQ11-338-MA-PA-601				
NTQ11-337-MA-PA-601				
FLQ11-336-PA-998	<75	25-45	0-5	0-5
FLQ11-336-MA-PA-601	75+	15-35	0-5	0-5

[1] The maximum writing agent commissions are 50% in the first policy year and 10% for policy years two through ten.

Table 1b provides similar information for lifetime-pay group certificates by duration and whether the group was sold by a commissioned agent. The commission scale, without other sales and marketing

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expenses, was not readily available.

Table 1b
Commission Percentages by Duration and Agent Type
Group Policy Forms: GRP11-341-MA-PA-601 and GRP11-341-PA-200

Duration	Commissioned	Non-Commissioned
1	30%	40%
2+	7%	0%

Commissions for limited-pay policies are reduced to levels that are approximately equivalent to the above commissions for lifetime-pay policies and certificates, on a present value basis, based on original pricing assumptions.

The actual commission scales will differ slightly from those that appear in Table 1 as the company adjusts renewal commission rates so that the total commissions paid before and after any increase in premium are similar (i.e., commissions are not paid on the increased premium).

(2)(ii)(C)(I): Premiums earned and written since inception for nationwide experience can be found in Exhibit I of the actuarial memorandum and Attachment 1 to this supplement, respectively. Premiums earned and written since inception for Pennsylvania-specific experience can be found in Attachments 2 and 3, respectively. Attachment 4 to this supplement provides reserve balances and the calculation basis for both nationwide and Pennsylvania-specific experience.

(2)(ii)(C)(II): Attachment 4 to this supplement provides a breakdown of historical incurred claims and active life reserve balance, including a description of the calculation basis, for both nationwide and Pennsylvania-specific experience.

Attachment 5 to this supplement provides actual and projected experience on a durational basis using current assumptions. Included are policy year earned premiums, incurred claims, durational loss ratios, end of year lives, and cumulative loss ratios with interest. Values in Attachment 5 are shown both before and after the requested rate increase. The number of durations shown was chosen to capture the majority of the durations underlying Exhibit I. Similar to Exhibit I and Attachments 1 through 3, the values used to calculate the cumulative loss ratios are accumulated and discounted at the maximum valuation interest rate.

Attachment 6 to this supplement provides similar information to Attachment 5 for Pennsylvania-specific experience.

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

(2)(iii): We understand 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): We believe the proposed rate tables provided with this filing comply with this subsection.

4. Microsoft Excel spreadsheet containing all numerical data

An Excel workbook containing the values shown in Exhibits I and II of the actuarial memorandum and Attachments 1 through 6 of this supplement is enclosed with this filing, as required.

Attachment 1-a
MedAmerica and Affinity Partners
Written Premium and Paid Claim Experience and Projections by Calendar Year
Nationwide Experience Before Requested Rate Increase
Series 11 and Prior Policy Forms

	Calendar Year	Actual or Projected Experience using Current Assumptions			
		Without Interest			Cumulative Loss Ratio w/ Max. Val. Interest
		Written Premium	Paid Claims	Loss Ratio	
Historical Experience	1992	127,778	0	0%	0%
	1993	820,223	435	0%	0%
	1994	1,859,170	45,498	2%	2%
	1995	2,806,773	63,694	2%	2%
	1996	3,903,160	75,596	2%	2%
	1997	4,551,144	67,538	1%	2%
	1998	5,678,298	125,276	2%	2%
	1999	7,358,468	465,964	6%	3%
	2000	9,549,709	970,921	10%	5%
	2001	12,759,812	1,121,497	9%	6%
	2002	17,246,296	1,445,750	8%	6%
	2003	23,386,345	2,546,158	11%	7%
	2004	27,585,079	3,105,399	11%	8%
	2005	28,686,362	4,315,104	15%	9%
	2006	28,696,090	5,258,176	18%	11%
	2007	28,305,082	6,694,088	24%	12%
	2008	27,586,766	8,446,221	31%	14%
2009	26,643,606	8,314,848	31%	15%	
2010	25,164,298	9,151,070	36%	17%	
2011	24,665,824	11,323,437	46%	19%	
2012	25,263,705	13,322,263	53%	21%	
2013	23,672,984	15,681,015	66%	23%	
2014	22,143,196	17,656,283	80%	25%	
2015	21,396,467	20,902,456	98%	28%	
2016	20,967,910	21,690,779	103%	30%	
2017	20,134,198	23,189,988	115%	33%	
Projected Future Experience (60 Years)	2018	20,197,632	25,010,516	124%	35%
	2019	20,404,820	23,992,732	118%	38%
	2020	20,103,807	26,193,624	130%	40%
	2021	19,245,584	25,273,392	131%	42%
	2022	18,183,066	27,035,029	149%	44%
	2023	16,826,582	28,651,925	170%	46%
	2024	15,723,641	30,208,948	192%	48%
	2025	14,697,399	31,800,481	216%	50%
	2026	13,766,339	33,443,815	243%	53%
	2027	12,830,331	35,137,970	274%	55%
	2028	11,954,715	36,830,801	308%	57%
	2029	11,133,053	38,519,259	346%	59%
	2030	10,345,240	40,193,337	389%	62%
	2031	9,587,177	41,834,566	436%	64%
	2032	8,859,642	43,413,680	490%	66%
	2033	8,163,214	44,951,688	551%	69%
	2034	7,495,998	46,472,785	620%	71%
	2035	6,858,137	47,952,641	699%	73%
	2036	6,250,749	49,328,826	789%	75%
	2037	5,674,587	50,556,514	891%	78%
	2038	5,130,410	51,588,684	1,006%	80%
	2039	4,618,674	52,384,538	1,134%	82%
	2040	4,139,694	52,904,873	1,278%	84%
	2041	3,694,053	53,116,312	1,438%	86%
	2042	3,281,823	52,991,841	1,615%	88%
	2043	2,902,813	52,524,296	1,809%	90%
	2044	2,556,226	51,735,500	2,024%	92%
2045	2,241,006	50,645,859	2,260%	93%	
2046	1,956,099	49,284,270	2,520%	95%	
2047	1,700,208	47,667,687	2,804%	96%	
2048-2052	5,559,786	207,468,960	3,732%	102%	
2053-2057	2,493,525	148,359,344	5,950%	105%	
2058-2062	1,053,534	93,809,214	8,904%	107%	
2063-2067	423,987	54,174,980	12,777%	108%	
2068-2072	161,570	28,538,559	17,663%	108%	
2073-2077	58,744	13,733,153	23,378%	109%	

With Interest Accum./Disc. To 12/31/2017 at Max. Val. Interest

History	689,721,452	227,096,145	33%
Future	204,492,115	744,122,821	364%
Lifetime	894,213,567	971,218,966	109%

**Attachment 1-b
MedAmerica and Affinity Partners
Written Premium and Paid Claim Experience and Projections by Calendar Year
Nationwide Experience After Requested Rate Increase
Series 11 and Prior Policy Forms**

	Calendar Year	Actual or Projected Experience using Current Assumptions			
		Without Interest			Cumulative Loss Ratio w/ Max. Val. Interest
		Written Premium	Paid Claims	Loss Ratio	
Historical Experience	1992	127,778	0	0%	0%
	1993	820,223	435	0%	0%
	1994	1,859,170	45,498	2%	2%
	1995	2,806,773	63,694	2%	2%
	1996	3,903,160	75,596	2%	2%
	1997	4,551,144	67,538	1%	2%
	1998	5,678,298	125,276	2%	2%
	1999	7,358,468	465,964	6%	3%
	2000	9,549,709	970,921	10%	5%
	2001	12,759,812	1,121,497	9%	6%
	2002	17,246,296	1,445,750	8%	6%
	2003	23,386,345	2,546,158	11%	7%
	2004	27,585,079	3,105,399	11%	8%
	2005	28,686,362	4,315,104	15%	9%
	2006	28,696,090	5,258,176	18%	11%
	2007	28,305,082	6,694,088	24%	12%
	2008	27,586,766	8,446,221	31%	14%
2009	26,643,606	8,314,848	31%	15%	
2010	25,164,298	9,151,070	36%	17%	
2011	24,665,824	11,323,437	46%	19%	
2012	25,263,705	13,322,263	53%	21%	
2013	23,672,984	15,681,015	66%	23%	
2014	22,143,196	17,656,283	80%	25%	
2015	21,396,467	20,902,456	98%	28%	
2016	20,967,910	21,690,779	103%	30%	
2017	20,134,198	23,189,988	115%	33%	
Projected Future Experience (60 Years)	2018	20,198,468	25,010,516	124%	35%
	2019	25,670,134	23,844,499	93%	37%
	2020	27,244,327	25,681,826	94%	39%
	2021	27,399,614	24,458,255	89%	41%
	2022	26,265,349	25,887,698	99%	42%
	2023	24,285,564	27,203,771	112%	44%
	2024	22,669,589	28,489,718	126%	45%
	2025	21,178,879	29,838,017	141%	47%
	2026	19,824,971	31,264,271	158%	49%
	2027	18,454,605	32,763,536	178%	51%
	2028	17,174,419	34,279,784	200%	52%
	2029	15,973,784	35,807,175	224%	54%
	2030	14,822,994	37,334,920	252%	56%
	2031	13,716,036	38,845,240	283%	58%
	2032	12,654,363	40,309,877	319%	60%
	2033	11,639,001	41,747,747	359%	62%
	2034	10,667,386	43,180,246	405%	64%
	2035	9,740,017	44,583,721	458%	66%
	2036	8,858,743	45,899,129	518%	68%
	2037	8,024,506	47,083,268	587%	69%
	2038	7,238,399	48,090,682	664%	71%
	2039	6,500,924	48,881,755	752%	73%
	2040	5,812,375	49,417,859	850%	75%
	2041	5,173,418	49,666,141	960%	77%
	2042	4,583,818	49,599,330	1,082%	78%
	2043	4,043,127	49,209,773	1,217%	80%
	2044	3,550,005	48,517,316	1,367%	81%
2045	3,102,776	47,540,129	1,532%	83%	
2046	2,699,659	46,303,966	1,715%	84%	
2047	2,338,605	44,822,855	1,917%	85%	
2048-2052	7,571,687	195,468,492	2,582%	90%	
2053-2057	3,325,083	140,095,314	4,213%	93%	
2058-2062	1,370,739	88,669,592	6,469%	95%	
2063-2067	537,388	51,269,465	9,541%	95%	
2068-2072	199,700	27,067,311	13,554%	96%	
2073-2077	71,166	13,053,096	18,342%	96%	

With Interest Accum./Disc. To 12/31/2017 at Max. Val. Interest

History	689,721,452	227,096,145	33%
Future	278,940,307	701,456,765	251%
Lifetime	968,661,759	928,552,910	96%

Attachment 2-a
MedAmerica and BCNEPA
Earned Premium and Incurred Claim Experience and Projections by Calendar Year
Pennsylvania-Specific Experience Before Requested Rate Increase
Series 11 and Prior Policy Forms

	Calendar Year	Actual or Projected Experience using Current Assumptions				
		Earned Premium	Incurred Claims	Incurred Loss Ratio	End of Year Lives	Cumulative Loss Ratio w/ Max. Val. Interest
Historical Experience	1992	17,324	0	0%	111	0%
	1993	547,119	112,935	21%	580	19%
	1994	1,333,538	28,746	2%	1,190	8%
	1995	1,802,548	55,039	3%	1,165	5%
	1996	1,608,703	5,871	0%	1,055	4%
	1997	1,439,865	114,890	8%	953	5%
	1998	1,347,126	235,553	17%	912	7%
	1999	1,286,732	377,829	29%	872	9%
	2000	1,267,260	481,212	38%	859	12%
	2001	1,235,696	713,556	58%	895	16%
	2002	1,431,379	745,816	52%	1,036	19%
	2003	1,554,846	464,534	30%	1,078	20%
	2004	1,652,124	958,964	58%	1,139	23%
	2005	1,597,784	656,165	41%	1,089	24%
	2006	1,498,700	747,377	50%	1,021	26%
	2007	1,403,330	934,486	67%	983	28%
	2008	1,324,472	806,835	61%	906	29%
	2009	1,241,850	771,521	62%	858	30%
2010	1,132,473	811,757	72%	720	31%	
2011	1,041,535	1,452,008	139%	664	34%	
2012	1,071,362	1,319,481	123%	605	36%	
2013	1,063,820	974,543	92%	553	38%	
2014	996,939	1,467,384	147%	516	40%	
2015	911,937	2,584,558	283%	472	44%	
2016	835,842	525,602	63%	440	44%	
2017	775,386	1,243,392	160%	408	46%	
Projected Future Experience (60 Years)	2018	760,674	946,118	124%	368	47%
	2019	754,171	912,244	121%	347	47%
	2020	704,396	902,411	128%	327	48%
	2021	654,895	899,849	137%	308	49%
	2022	604,697	906,857	150%	289	50%
	2023	551,089	914,609	166%	272	50%
	2024	474,637	930,780	196%	256	51%
	2025	393,735	952,011	242%	240	52%
	2026	360,503	981,243	272%	225	53%
	2027	327,655	1,013,561	309%	211	54%
	2028	298,791	1,047,988	351%	198	54%
	2029	272,820	1,089,016	399%	186	55%
	2030	248,557	1,125,401	453%	174	56%
	2031	225,879	1,155,672	512%	162	57%
	2032	204,655	1,179,162	576%	151	58%
	2033	184,750	1,207,986	654%	141	59%
	2034	166,046	1,231,213	741%	131	59%
	2035	148,495	1,258,584	848%	121	60%
	2036	132,090	1,269,015	961%	111	61%
	2037	116,799	1,264,527	1,083%	103	62%
	2038	102,620	1,246,486	1,215%	94	62%
	2039	89,556	1,211,482	1,353%	86	63%
	2040	77,609	1,161,816	1,497%	78	64%
	2041	66,781	1,099,251	1,646%	71	64%
	2042	57,055	1,035,565	1,815%	64	65%
	2043	48,384	975,089	2,015%	58	65%
	2044	40,721	920,292	2,260%	52	66%
	2045	34,004	860,118	2,529%	46	66%
2046	28,170	801,480	2,845%	41	66%	
2047	23,146	740,704	3,200%	36	67%	
2048-2052		63,486	2,740,701	4,317%	121	68%
2053-2057		18,324	1,267,612	6,918%	52	68%
2058-2062		4,035	411,685	10,203%	18	68%
2063-2067		633	97,526	15,408%	5	68%
2068-2072		60	14,674	24,644%	1	68%
2073-2077		3	1,407	48,074%	0	68%

With Interest Accum./Disc. To 12/31/2017 at Max. Val. Interest

History	62,246,630	28,376,392	46%
Future	5,964,173	18,048,511	303%
Lifetime	68,210,803	46,424,902	68%

Attachment 2-b
MedAmerica and BCNEPA
Earned Premium and Incurred Claim Experience and Projections by Calendar Year
Pennsylvania-Specific Experience After Requested Rate Increase
Series 11 and Prior Policy Forms

	Calendar Year	Actual or Projected Experience using Current Assumptions				
		Earned Premium	Incurred Claims	Incurred Loss Ratio	End of Year Lives	Cumulative Loss Ratio w/ Max. Val. Interest
Historical Experience	1992	17,324	0	0%	111	0%
	1993	547,119	112,935	21%	580	19%
	1994	1,333,538	28,746	2%	1,190	8%
	1995	1,802,548	55,039	3%	1,165	5%
	1996	1,608,703	5,871	0%	1,055	4%
	1997	1,439,865	114,890	8%	953	5%
	1998	1,347,126	235,553	17%	912	7%
	1999	1,286,732	377,829	29%	872	9%
	2000	1,267,260	481,212	38%	859	12%
	2001	1,235,696	713,556	58%	895	16%
	2002	1,431,379	745,816	52%	1,036	19%
	2003	1,554,846	464,534	30%	1,078	20%
	2004	1,652,124	958,964	58%	1,139	23%
	2005	1,597,784	656,165	41%	1,089	24%
	2006	1,498,700	747,377	50%	1,021	26%
	2007	1,403,330	934,486	67%	983	28%
	2008	1,324,472	806,835	61%	906	29%
	2009	1,241,850	771,521	62%	858	30%
2010	1,132,473	811,757	72%	720	31%	
2011	1,041,535	1,452,008	139%	664	34%	
2012	1,071,362	1,319,481	123%	605	36%	
2013	1,063,820	974,543	92%	553	38%	
2014	996,939	1,467,384	147%	516	40%	
2015	911,937	2,584,558	283%	472	44%	
2016	835,842	525,602	63%	440	44%	
2017	775,386	1,243,392	160%	408	46%	
Projected Future Experience (60 Years)	2018	760,674	946,118	124%	368	47%
	2019	907,254	898,719	99%	331	47%
	2020	1,029,343	870,116	85%	312	48%
	2021	958,603	866,234	90%	293	48%
	2022	887,762	871,494	98%	276	49%
	2023	812,496	877,624	108%	260	49%
	2024	704,891	891,492	126%	244	50%
	2025	590,874	910,248	154%	230	51%
	2026	543,882	936,877	172%	216	51%
	2027	497,291	966,509	194%	203	52%
	2028	456,178	998,067	219%	190	53%
	2029	418,998	1,035,736	247%	178	53%
	2030	384,065	1,068,843	278%	167	54%
	2031	351,199	1,096,165	312%	156	55%
	2032	320,210	1,116,959	349%	145	56%
	2033	290,899	1,142,764	393%	135	56%
	2034	263,102	1,163,419	442%	126	57%
	2035	236,757	1,187,865	502%	116	58%
	2036	211,874	1,196,725	565%	108	58%
	2037	188,425	1,191,851	633%	99	59%
	2038	166,441	1,174,616	706%	91	60%
	2039	145,965	1,141,944	782%	83	60%
	2040	127,043	1,095,841	863%	76	61%
	2041	109,723	1,037,805	946%	69	61%
	2042	94,023	978,903	1,041%	62	62%
	2043	79,906	923,395	1,156%	56	62%
	2044	67,335	873,181	1,297%	50	62%
	2045	56,248	817,902	1,454%	45	63%
2046	46,570	763,899	1,640%	40	63%	
2047	38,206	707,459	1,852%	35	63%	
2048-2052	103,980	2,626,208	2,526%	119	64%	
2053-2057	29,371	1,221,021	4,157%	52	64%	
2058-2062	6,326	399,073	6,309%	18	65%	
2063-2067	970	95,135	9,805%	5	65%	
2068-2072	86	14,458	16,764%	1	65%	
2073-2077	4	1,402	37,112%	0	65%	

With Interest Accum./Disc. To 12/31/2017 at Max. Val. Interest

History	62,246,630	28,376,392	46%
Future	8,388,229	17,253,536	206%
Lifetime	70,634,859	45,629,928	65%

**Attachment 3-a
MedAmerica and BCNEPA
Written Premium and Paid Claim Experience and Projections by Calendar Year
Pennsylvania-Specific Experience Before Requested Rate Increase
Series 11 and Prior Policy Forms**

	Calendar Year	Actual or Projected Experience using Current Assumptions			
		Without Interest			Cumulative Loss Ratio w/ Max. Val. Interest
		Written Premium	Paid Claims	Loss Ratio	
Historical Experience	1992	127,778	0	0%	0%
	1993	771,602	435	0%	0%
	1994	1,645,943	45,498	3%	2%
	1995	1,722,034	63,694	4%	3%
	1996	1,554,699	57,268	4%	3%
	1997	1,395,175	34,233	2%	3%
	1998	1,334,369	1,801	0%	2%
	1999	1,284,526	169,733	13%	4%
	2000	1,267,362	413,900	33%	6%
	2001	1,240,506	488,498	39%	9%
	2002	1,491,280	609,346	41%	12%
	2003	1,584,734	748,375	47%	15%
	2004	1,622,837	647,095	40%	17%
	2005	1,563,977	660,435	42%	18%
	2006	1,461,395	842,743	58%	20%
	2007	1,384,149	909,721	66%	22%
	2008	1,305,785	953,070	73%	24%
2009	1,225,767	769,442	63%	26%	
2010	1,088,485	781,353	72%	27%	
2011	1,043,979	922,011	88%	28%	
2012	1,065,687	1,110,217	104%	30%	
2013	1,052,019	1,452,492	138%	33%	
2014	970,770	1,354,569	140%	35%	
2015	882,638	1,342,599	152%	36%	
2016	818,490	1,227,672	150%	38%	
2017	760,776	1,107,692	146%	39%	
Projected Future Experience (60 Years)	2018	768,048	1,114,166	145%	41%
	2019	735,083	1,041,033	142%	42%
	2020	686,564	1,091,422	159%	43%
	2021	636,519	1,004,184	158%	44%
	2022	581,413	1,018,060	175%	45%
	2023	535,512	1,021,265	191%	46%
	2024	452,822	1,021,291	226%	46%
	2025	381,065	1,025,182	269%	47%
	2026	349,812	1,035,829	296%	48%
	2027	316,773	1,053,169	332%	49%
	2028	289,689	1,073,913	371%	50%
	2029	264,365	1,098,796	416%	51%
	2030	240,710	1,126,880	468%	52%
	2031	218,567	1,156,487	529%	52%
	2032	197,817	1,185,708	599%	53%
	2033	178,350	1,215,338	681%	54%
	2034	160,029	1,244,461	778%	55%
	2035	142,880	1,273,419	891%	56%
	2036	126,848	1,299,446	1,024%	57%
	2037	111,927	1,319,626	1,179%	57%
	2038	98,124	1,331,759	1,357%	58%
	2039	85,431	1,333,798	1,561%	59%
	2040	73,857	1,324,036	1,793%	59%
	2041	63,404	1,301,513	2,053%	60%
	2042	54,033	1,267,629	2,346%	61%
	2043	45,706	1,225,347	2,681%	61%
	2044	38,365	1,177,953	3,070%	62%
2045	31,943	1,126,016	3,525%	62%	
2046	26,382	1,070,507	4,058%	63%	
2047	21,602	1,011,871	4,684%	63%	
2048-2052	58,660	4,078,047	6,952%	64%	
2053-2057	16,494	2,386,124	14,467%	65%	
2058-2062	3,492	1,068,505	30,598%	65%	
2063-2067	519	368,806	71,126%	65%	
2068-2072	44	96,891	222,173%	65%	
2073-2077	2	19,191	935,328%	65%	

With Interest Accum./Disc. To 12/31/2017 at Max. Val. Interest

History	63,514,860	25,010,392	39%
Future	5,803,498	20,373,916	351%
Lifetime	69,318,358	45,384,308	65%

**Attachment 3-b
MedAmerica and BCNEPA
Written Premium and Paid Claim Experience and Projections by Calendar Year
Pennsylvania-Specific Experience After Requested Rate Increase
Series 11 and Prior Policy Forms**

	Calendar Year	Actual or Projected Experience using Current Assumptions			
		Without Interest			Cumulative Loss Ratio w/ Max. Val. Interest
		Written Premium	Paid Claims	Loss Ratio	
Historical Experience	1992	127,778	0	0%	0%
	1993	771,602	435	0%	0%
	1994	1,645,943	45,498	3%	2%
	1995	1,722,034	63,694	4%	3%
	1996	1,554,699	57,268	4%	3%
	1997	1,395,175	34,233	2%	3%
	1998	1,334,369	1,801	0%	2%
	1999	1,284,526	169,733	13%	4%
	2000	1,267,362	413,900	33%	6%
	2001	1,240,506	488,498	39%	9%
	2002	1,491,280	609,346	41%	12%
	2003	1,584,734	748,375	47%	15%
	2004	1,622,837	647,095	40%	17%
	2005	1,563,977	660,435	42%	18%
	2006	1,461,395	842,743	58%	20%
	2007	1,384,149	909,721	66%	22%
	2008	1,305,785	953,070	73%	24%
2009	1,225,767	769,442	63%	26%	
2010	1,088,485	781,353	72%	27%	
2011	1,043,979	922,011	88%	28%	
2012	1,065,687	1,110,217	104%	30%	
2013	1,052,019	1,452,492	138%	33%	
2014	970,770	1,354,569	140%	35%	
2015	882,638	1,342,599	152%	36%	
2016	818,490	1,227,672	150%	38%	
2017	760,776	1,107,692	146%	39%	
Projected Future Experience (60 Years)	2018	768,134	1,114,166	145%	41%
	2019	1,001,678	1,038,071	104%	42%
	2020	1,004,397	1,080,977	108%	42%
	2021	932,807	988,162	106%	43%
	2022	854,988	996,455	117%	44%
	2023	790,514	994,939	126%	45%
	2024	674,059	990,783	147%	45%
	2025	572,868	990,846	173%	46%
	2026	528,608	997,974	189%	47%
	2027	481,693	1,012,024	210%	48%
	2028	443,030	1,029,603	232%	48%
	2029	406,702	1,051,293	258%	49%
	2030	372,558	1,076,123	289%	50%
	2031	340,379	1,102,476	324%	51%
	2032	309,984	1,128,508	364%	51%
	2033	281,233	1,154,948	411%	52%
	2034	253,901	1,180,946	465%	53%
	2035	228,067	1,206,803	529%	53%
	2036	203,655	1,229,976	604%	54%
	2037	180,685	1,247,779	691%	55%
	2038	159,206	1,258,206	790%	55%
	2039	139,240	1,259,405	904%	56%
	2040	120,847	1,249,804	1,034%	57%
	2041	104,075	1,228,480	1,180%	57%
	2042	88,905	1,196,730	1,346%	58%
	2043	75,316	1,157,368	1,537%	58%
	2044	63,253	1,113,441	1,760%	59%
2045	52,641	1,065,427	2,024%	59%	
2046	43,412	1,014,164	2,336%	60%	
2047	35,461	959,966	2,707%	60%	
2048-2052	95,303	3,883,746	4,075%	61%	
2053-2057	26,094	2,284,367	8,754%	62%	
2058-2062	5,376	1,027,736	19,119%	62%	
2063-2067	778	356,166	45,785%	62%	
2068-2072	61	93,889	154,878%	62%	
2073-2077	3	18,654	704,457%	62%	

With Interest Accum./Disc. To 12/31/2017 at Max. Val. Interest

History	63,514,860	25,010,392	39%
Future	8,265,714	19,611,028	237%
Lifetime	71,780,574	44,621,421	62%

Attachment 4
MedAmerica and Affinity Partners
Breakdown of Historical Incurred Claims and Reserve Balances at December 31, 2017
Series 11 and Prior Policy Forms

Nationwide Experience						
Incurred Year	Discounted to the Year of Incurral					Year-End Active Life Reserve ^[3]
	Incurred Claims ^[1]	Paid Claims	Disabled Life Reserve	IBNR Reserve	Total Claim Reserve ^[2]	
1992	0	0	0		0	
1993	112,935	112,935	0		0	
1994	28,746	28,746	0		0	
1995	109,652	109,652	0		0	
1996	134,262	134,262	0		0	
1997	264,541	264,541	0		0	
1998	631,867	631,867	0		0	
1999	1,469,714	1,469,714	0		0	
2000	1,172,992	1,172,992	0		0	
2001	2,210,887	2,210,887	0		0	
2002	4,269,807	4,064,255	205,552		205,552	
2003	3,540,618	3,458,785	81,833		81,833	
2004	6,347,428	6,347,428	0		0	
2005	6,751,292	6,696,149	55,142		55,142	
2006	7,395,470	7,250,654	144,815		144,815	
2007	10,644,803	10,436,770	208,033		208,033	
2008	8,302,139	8,054,916	247,223		247,223	
2009	11,107,735	10,753,245	354,490		354,490	
2010	15,851,176	14,586,415	1,264,761		1,264,761	
2011	14,100,771	12,993,675	1,107,096		1,107,096	
2012	16,193,346	14,615,192	1,578,154		1,578,154	
2013	14,635,134	12,960,808	1,674,325		1,674,325	
2014	23,851,886	18,031,891	5,819,995		5,819,995	
2015	24,822,983	12,768,901	12,054,082		12,054,082	
2016	22,803,799	8,083,382	14,720,417		14,720,417	
2017	24,920,645	2,347,721	18,261,410	4,311,514	22,572,924	364,824,332

Pennsylvania-Specific Experience						
Incurred Year	Discounted to the Year of Incurral					Year-End Active Life Reserve ^[3]
	Incurred Claims ^[1]	Paid Claims	Disabled Life Reserve	IBNR Reserve	Total Claim Reserve ^[2]	
1992	0	0	0		0	
1993	112,935	112,935	0		0	
1994	28,746	28,746	0		0	
1995	55,039	55,039	0		0	
1996	5,871	5,871	0		0	
1997	114,890	114,890	0		0	
1998	235,553	235,553	0		0	
1999	377,829	377,829	0		0	
2000	481,212	481,212	0		0	
2001	713,556	713,556	0		0	
2002	745,816	745,816	0		0	
2003	464,534	464,534	0		0	
2004	958,964	958,964	0		0	
2005	656,165	656,165	0		0	
2006	747,377	747,377	0		0	
2007	934,486	934,486	0		0	
2008	806,835	806,835	0		0	
2009	771,521	771,521	0		0	
2010	811,757	811,757	0		0	
2011	1,452,008	1,387,348	64,660		64,660	
2012	1,319,481	1,319,481	0		0	
2013	974,543	974,543	0		0	
2014	1,467,384	1,289,703	177,681		177,681	
2015	2,584,558	1,076,139	1,508,419		1,508,419	
2016	525,602	333,238	192,364		192,364	
2017	1,243,392	179,432	900,732	163,229	1,063,960	7,914,795

[1] Incurred claims are the sum of paid claims, disabled life reserve, and incurred but not reported (IBNR) reserve.

[2] Claim reserve is the sum of disabled life reserve and IBNR reserve.

[3] Active life reserve is defined as interpolated terminal reserves plus unearned premium reserves.

Attachment 5-a
MedAmerica and Affinity Partners
Nationwide Experience and Projections by Policy Year - Before Requested Rate Increase
Series 11 and Prior Policy Forms

Policy Year	Actual and Projected Experience using Current Assumptions				
	Earned Premium	Incurred Claims	Incurred Loss Ratio	End of Year Lives	Cumulative Loss Ratio w/ Max. Val. Interest
1	40,275,560	1,790,212	4%	26,501	4%
2	37,032,678	1,729,579	5%	24,979	5%
3	35,321,458	3,355,869	10%	23,897	6%
4	34,016,996	7,663,584	23%	22,928	10%
5	33,082,266	6,111,353	18%	22,287	11%
6	32,236,859	9,180,833	28%	21,670	13%
7	31,566,303	9,263,909	29%	21,045	15%
8	31,036,982	14,824,301	48%	20,354	18%
9	30,607,480	15,252,383	50%	19,680	21%
10	30,850,832	14,088,046	46%	19,090	23%
11	23,940,528	15,743,219	66%	18,461	25%
12	23,458,850	19,515,154	83%	17,881	28%
13	22,909,980	20,069,844	88%	17,285	30%
14	22,357,195	20,948,952	94%	16,619	33%
15	21,880,393	25,206,442	115%	15,928	36%
16	21,635,429	26,143,634	121%	15,240	38%
17	21,254,521	25,845,168	122%	14,662	41%
18	20,619,386	29,805,039	145%	14,092	44%
19	19,748,712	29,473,692	149%	13,547	46%
20	18,873,510	31,469,623	167%	12,989	49%
21	16,976,069	33,022,731	195%	12,419	51%
22	15,935,403	34,346,390	216%	11,884	54%
23	14,904,863	36,462,246	245%	11,340	57%
24	13,912,995	39,088,811	281%	10,812	59%
25	12,949,490	41,031,726	317%	10,284	62%
26	12,004,731	43,060,339	359%	9,759	65%
27	11,076,341	45,085,790	407%	9,237	68%
28	10,177,589	46,959,068	461%	8,721	71%
29	9,314,782	48,608,638	522%	8,212	74%
30	8,491,031	50,027,930	589%	7,712	77%
31	7,708,194	51,300,127	666%	7,223	80%
32	6,966,224	52,430,692	753%	6,743	82%
33	6,264,675	53,290,986	851%	6,275	85%
34	5,605,543	53,914,070	962%	5,820	88%
35	4,990,495	54,114,933	1,084%	5,381	90%
36	4,419,959	53,881,883	1,219%	4,958	93%
37	3,893,685	53,221,693	1,367%	4,552	95%
38	3,411,321	52,170,072	1,529%	4,166	98%
39	2,972,835	50,746,406	1,707%	3,801	100%
40	2,577,401	49,033,101	1,902%	3,457	102%
41	2,223,063	47,018,934	2,115%	3,135	104%
42	1,907,594	44,802,883	2,349%	2,834	105%
43	1,628,555	42,442,056	2,606%	2,556	107%
44	1,383,668	39,918,797	2,885%	2,299	108%
45	1,170,353	37,252,023	3,183%	2,063	109%
46	985,666	34,542,256	3,504%	1,848	111%
47	826,717	31,870,919	3,855%	1,652	112%
48	690,769	29,295,161	4,241%	1,474	112%
49	575,177	26,866,556	4,671%	1,313	113%
50	477,448	24,526,559	5,137%	1,168	114%
51-55	1,390,243	89,798,673	6,459%	4,129	116%
56-60	506,612	47,819,793	9,439%	2,186	117%
61-65	169,793	22,337,374	13,156%	1,053	117%
66-70	50,688	9,094,629	17,942%	416	117%
Total	741,245,890	1,796,865,085	242%	560,016	117%

Attachment 5-b
MedAmerica and Affinity Partners
Nationwide Experience and Projections by Policy Year - After Requested Rate Increase
Series 11 and Prior Policy Forms

Policy Year	Actual and Projected Experience using Current Assumptions				
	Earned Premium	Incurred Claims	Incurred Loss Ratio	End of Year Lives	Cumulative Loss Ratio w/ Max. Val. Interest
1	40,275,560	1,790,212	4%	26,501	4%
2	37,032,678	1,729,579	5%	24,979	5%
3	35,325,127	3,355,832	9%	23,895	6%
4	34,043,332	7,663,302	23%	22,921	10%
5	33,168,899	6,110,456	18%	22,270	11%
6	32,359,669	9,179,241	28%	21,648	13%
7	31,714,439	9,261,471	29%	21,017	15%
8	31,230,351	14,820,139	47%	20,317	18%
9	30,892,348	15,245,091	49%	19,631	21%
10	31,214,055	14,077,314	45%	19,038	23%
11	24,372,761	15,728,501	65%	18,407	25%
12	23,994,041	19,495,312	81%	17,821	28%
13	23,581,204	20,042,339	85%	17,218	30%
14	23,244,407	20,903,051	90%	16,531	33%
15	23,233,806	25,106,897	108%	15,791	35%
16	24,058,554	25,892,054	108%	14,981	38%
17	25,307,317	25,324,752	100%	14,229	40%
18	26,275,375	28,933,831	110%	13,536	42%
19	26,395,659	28,212,589	107%	12,942	44%
20	25,946,825	29,841,524	115%	12,369	46%
21	23,724,464	31,054,673	131%	11,801	48%
22	22,686,237	32,085,897	141%	11,278	50%
23	21,452,085	33,936,297	158%	10,758	52%
24	20,111,279	36,338,236	181%	10,261	54%
25	18,743,428	38,102,273	203%	9,764	57%
26	17,421,578	39,957,754	229%	9,267	59%
27	16,113,418	41,824,754	260%	8,778	61%
28	14,814,421	43,569,499	294%	8,294	64%
29	13,557,474	45,122,755	333%	7,817	66%
30	12,356,165	46,472,337	376%	7,348	68%
31	11,213,581	47,692,789	425%	6,888	71%
32	10,130,214	48,788,032	482%	6,437	73%
33	9,105,893	49,636,816	545%	5,996	75%
34	8,143,738	50,267,911	617%	5,567	78%
35	7,246,215	50,506,233	697%	5,152	80%
36	6,413,990	50,345,252	785%	4,752	82%
37	5,646,673	49,785,553	882%	4,368	84%
38	4,943,648	48,859,057	988%	4,001	86%
39	4,304,811	47,583,820	1,105%	3,654	88%
40	3,728,891	46,033,892	1,235%	3,327	89%
41	3,212,985	44,200,051	1,376%	3,020	91%
42	2,753,869	42,166,870	1,531%	2,734	92%
43	2,347,921	39,989,892	1,703%	2,468	93%
44	1,991,805	37,649,638	1,890%	2,222	95%
45	1,681,781	35,167,458	2,091%	1,996	96%
46	1,413,549	32,639,171	2,309%	1,790	97%
47	1,182,938	30,143,905	2,548%	1,601	98%
48	985,991	27,729,768	2,812%	1,430	98%
49	818,835	25,450,309	3,108%	1,275	99%
50	677,797	23,248,079	3,430%	1,135	99%
51-55	1,958,005	85,149,266	4,349%	4,023	101%
56-60	702,875	45,295,819	6,444%	2,139	102%
61-65	232,436	21,137,730	9,094%	1,034	103%
66-70	68,519	8,598,533	12,549%	410	103%
Total	855,553,917	1,699,243,810	199%	548,825	103%

Attachment 6-a
MedAmerica and BCNEPA
Pennsylvania-Specific Experience and Projections by Policy Year - Before Requested Rate Increase
Series 11 and Prior Policy Forms

Policy Year	Actual and Projected Experience using Current Assumptions				
	Earned Premium	Incurred Claims	Incurred Loss Ratio	End of Year Lives	Cumulative Loss Ratio w/ Max. Val. Interest
1	3,430,753	141,681	4%	1,862	4%
2	2,690,162	35,491	1%	1,638	3%
3	2,388,306	71,375	3%	1,512	3%
4	2,220,615	148,292	7%	1,423	4%
5	2,098,971	295,852	14%	1,347	5%
6	2,002,605	849,104	42%	1,293	10%
7	1,895,650	920,877	49%	1,228	13%
8	1,785,541	1,024,625	57%	1,159	17%
9	1,694,587	814,502	48%	1,084	19%
10	1,603,044	900,193	56%	1,015	21%
11	1,491,289	821,530	55%	946	23%
12	1,409,043	2,291,972	163%	879	29%
13	1,319,121	1,119,196	85%	832	31%
14	1,257,597	846,335	67%	779	32%
15	1,189,458	1,791,491	151%	725	35%
16	1,119,389	1,288,212	115%	659	37%
17	1,053,440	947,196	90%	588	39%
18	986,070	1,798,403	182%	522	41%
19	930,786	1,450,592	156%	481	43%
20	880,008	1,686,415	192%	444	45%
21	704,040	1,457,929	207%	403	47%
22	626,550	1,174,940	188%	363	49%
23	551,883	982,597	178%	328	50%
24	496,470	1,543,166	311%	304	52%
25	452,920	1,285,888	284%	280	53%
26	414,767	1,257,166	303%	258	54%
27	373,997	1,270,255	340%	238	56%
28	334,726	1,283,427	383%	219	57%
29	298,523	1,294,137	434%	201	58%
30	265,477	1,298,849	489%	184	59%
31	235,400	1,302,025	553%	169	60%
32	208,078	1,315,925	632%	154	61%
33	183,325	1,328,723	725%	140	63%
34	160,968	1,338,096	831%	127	64%
35	140,832	1,337,987	950%	116	65%
36	122,713	1,332,745	1,086%	104	66%
37	106,422	1,308,820	1,230%	94	67%
38	91,802	1,267,639	1,381%	85	67%
39	78,733	1,215,393	1,544%	76	68%
40	67,098	1,160,844	1,730%	68	69%
41	56,796	1,098,083	1,933%	60	70%
42	47,707	1,039,156	2,178%	53	70%
43	39,730	972,647	2,448%	47	71%
44	32,785	902,515	2,753%	41	71%
45	26,796	829,189	3,094%	35	72%
46	21,676	747,872	3,450%	30	72%
47	17,341	659,519	3,803%	26	72%
48	13,713	577,813	4,214%	22	73%
49	10,715	497,037	4,639%	19	73%
50	8,269	422,650	5,111%	15	73%
51-55	18,937	1,187,780	6,272%	44	73%
56-60	3,532	348,231	9,859%	14	74%
61-65	429	71,887	16,767%	3	74%
66-70	26	9,290	35,113%	0	74%
Total	39,659,611	54,363,553	137%	24,736	74%

Attachment 6-b
MedAmerica and BCNEPA
Pennsylvania-Specific Experience and Projections by Policy Year - After Requested Rate Increase
Series 11 and Prior Policy Forms

Policy Year	Actual and Projected Experience using Current Assumptions				
	Earned Premium	Incurred Claims	Incurred Loss Ratio	End of Year Lives	Cumulative Loss Ratio w/ Max. Val. Interest
1	3,430,753	141,681	4%	1,862	4%
2	2,690,162	35,491	1%	1,638	3%
3	2,388,306	71,375	3%	1,512	3%
4	2,220,615	148,292	7%	1,423	4%
5	2,098,971	295,852	14%	1,347	5%
6	2,002,605	849,104	42%	1,293	10%
7	1,895,650	920,877	49%	1,228	13%
8	1,785,541	1,024,625	57%	1,159	17%
9	1,694,587	814,502	48%	1,084	19%
10	1,603,044	900,193	56%	1,015	21%
11	1,491,289	821,530	55%	946	23%
12	1,409,346	2,291,973	163%	879	29%
13	1,320,534	1,119,202	85%	832	31%
14	1,260,169	846,328	67%	779	32%
15	1,205,700	1,791,432	149%	724	35%
16	1,170,871	1,287,074	110%	657	37%
17	1,158,052	943,009	81%	582	38%
18	1,162,410	1,788,862	154%	512	41%
19	1,163,541	1,433,950	123%	471	43%
20	1,126,593	1,665,574	148%	434	45%
21	904,721	1,432,110	158%	393	46%
22	821,739	1,145,181	139%	353	48%
23	739,033	949,158	128%	318	48%
24	676,361	1,505,801	223%	294	50%
25	632,476	1,242,882	197%	270	51%
26	599,497	1,206,719	201%	248	52%
27	558,391	1,214,188	217%	228	53%
28	507,082	1,223,914	241%	210	54%
29	455,919	1,232,212	270%	192	55%
30	408,652	1,234,874	302%	177	56%
31	365,299	1,236,021	338%	162	57%
32	325,568	1,247,249	383%	148	58%
33	289,213	1,257,649	435%	135	59%
34	256,007	1,265,028	494%	122	60%
35	225,740	1,263,806	560%	111	61%
36	198,173	1,258,021	635%	101	62%
37	173,080	1,235,160	714%	91	63%
38	150,280	1,196,398	796%	82	64%
39	129,654	1,147,521	885%	73	64%
40	111,077	1,096,622	987%	65	65%
41	94,458	1,038,323	1,099%	58	65%
42	79,653	983,706	1,235%	51	66%
43	66,549	921,922	1,385%	45	66%
44	55,058	856,534	1,556%	40	67%
45	45,086	787,919	1,748%	34	67%
46	36,515	711,659	1,949%	30	68%
47	29,228	628,438	2,150%	25	68%
48	23,116	551,216	2,385%	22	68%
49	18,055	474,685	2,629%	18	68%
50	13,923	404,083	2,902%	15	68%
51-55	31,759	1,139,746	3,589%	43	69%
56-60	5,835	336,534	5,767%	14	69%
61-65	689	70,102	10,178%	3	69%
66-70	39	9,182	23,466%	0	69%
Total	43,306,666	52,695,485	122%	24,546	69%



An  Excellus Company

Letter of Authorization

To: Department of Insurance

MedAmerica Insurance Company ("MedAmerica") has entered into a service agreement with Milliman, Inc. ("Milliman") effective October 3, 2016, that includes long-term care rate filing services on our behalf. The agreement provides, in part, that Milliman is responsible for preparing and filing for approval with state insurance departments MedAmerica's long-term care rate increase filings as directed by MedAmerica. Milliman is also authorized to receive, on MedAmerica's behalf, written and oral communication from each state department of insurance for the purpose of completing the rate increase filing process.

Please accept this letter of authorization for the purpose stated above. Should you have any questions regarding the above, please forward your comments to:

MedAmerica Insurance Company
165 Court Street
Rochester, NY 14647

A handwritten signature in black ink that reads "Bill Naylor". The signature is written in a cursive style and is positioned above a horizontal line.

Bill Naylor, President
MedAmerica Insurance Company

A handwritten date in black ink that reads "1/11/18". The date is written in a simple, legible style and is positioned above a horizontal line.

Date

Contingent Non-Forfeiture Benefit Election Form

<<FIRST_NAME>> <<LAST_NAME>> <<Date>>
<<STREET_ADDRESS1>> Billing Account ID: <<POLICY_NUMBER>>
<<STREET_ADDRESS2>>
<<CITY>> <<STATE>> <<ZIP>>

I have decided to stop future premium payments and accept the reduced Contingent Non-Forfeiture Benefit.

I understand the following:

- No future premium is due; and
- I will have a reduced lifetime benefit equal to the sum of all premiums paid and applied to date, **OR** thirty (30) times the Daily Benefit Amount, whichever is greater; and
- The Contingent Non-Forfeiture Benefit is significantly less than the benefit provided if I chose to keep paying my premium; and
- The Contingent Non-Forfeiture Benefit is only available if I satisfy the requirements for Benefit Eligibility as defined in my policy or certificate; and
- The Contingent Non-Forfeiture Benefit will be payable up to my Daily Benefit Amount in effect on the date of this change; and
- All riders and inflation options will be terminated; and
- All other terms, conditions, limitations and exclusions in my current coverage apply to the Contingent Non-Forfeiture Benefit.

Signature:

I request my current long term care insurance coverage be reduced to the Contingent Non-Forfeiture Benefit offered by the company. This option becomes effective as of my current paid through date. A summary of Contingent Non-Forfeiture Benefits will be sent to me when this request is processed.

Signature

Date

Mailing Instructions: Sign and date this form and return in the enclosed postage-paid envelope.

***Time-Sensitive!* Review Options and Make Your Decision**
RE: Your Long Term Care Insurance
Notice of Premium Increase — Please Read & Retain for Your Records

<<FIRST_NAME>> <<LAST_NAME>>
<<STREET_ADDRESS1>>
<<STREET_ADDRESS2>>
<<CITY>> <<STATE>> <<ZIP>>

<< DATE>>
Billing Account ID: <<POLICY_NUMBER>>

Dear <<SALUTATION LAST_NAME>>:

We are writing to notify you that we have filed a premium increase of <<INC_AMT>> with the Department of Insurance. This premium change is based on the overall experience of all contracts in your class and has nothing to do with your current age, health status, claims history or any other personal factors. This increase applies to all insureds having the same policy form as you, regardless of the effective date of coverage. Please be advised that premiums are subject to future rate increases.

The premium rate increase for your long term care insurance coverage will change on <<NEXT_BILL_DATE>>. Your <<MODAL>> premium payment will change from <<CURRENT_RATE>> to <<FUTURE_RATE>>.

We understand this premium increase may affect your ability to afford your current level of benefits. Please review the options regarding your coverage that are outlined below, and make the decision that best meets your needs.

- **Option #1: Continue your coverage at your current level of benefits.** You may keep your current level of benefits by paying the increased premium when it is due on <<NEXT_BILL_DATE>>. If you choose this option, no additional action, other than your premium payment, is required. Please understand that paying the increased premium for coverage through 120 days from the date of the rate increase constitutes your acceptance of the rate increase and voids the offer of the Contingent Non-Forfeiture Benefit outlined in Option #3 below.
- **Option #2: Offset the increased premium by reducing your level of benefits.** You may be able to adjust your benefits to reduce your premium. Please understand that this option is not always available as you may have selected the state-mandated minimum benefits allowable for long term care insurance. Please call Customer Service toll-free at 1-800-240-1675 to discuss your options.
- **Option #3: Elect the reduced Contingent Non-Forfeiture Benefit.**

If you elect the Contingent Non-Forfeiture Benefit Option, no further premium is due. This option becomes effective as of your current paid through date. As of the date of this letter, your Contingent Non-Forfeiture Benefit would be <<RESULT_OF_CNF_FORMULA>>.

There are two ways to elect the Contingent Non-Forfeiture Benefit:

- Choose this option today by signing and dating the enclosed Contingent Non-Forfeiture Benefit Election Form and returning it in the enclosed postage-paid envelope; OR
- If you do not pay the increased premium **within 120 days of the due date**, which is <<NEXT_BILL_DATE>>, you will be entitled to the Contingent Non-Forfeiture Benefit. We will automatically change your coverage to the Contingent Non-Forfeiture Benefit in lieu of your policy lapsing for non-payment of premium.

IMPORTANT: Paying the increased premium for coverage through 120 days from <<NEXT_BILL_DATE>>, constitutes your acceptance of the rate increase and voids the Contingent Non-Forfeiture Benefit offer.

What is the Contingent Non-Forfeiture Benefit?

The Contingent Non-Forfeiture Benefit Option allows you to retain reduced long term care insurance benefits in the event you can no longer afford your premium due to a substantial premium increase. Under this option, the same **Daily Benefit Amount** in effect at the time of the lapse will be payable, but the **Lifetime Benefit Amount** will be equal to the greater of the items a) or b) below:

- a) The total amount of premiums paid and applied to Your Policy; **OR**
- b) Thirty (30) times the **Daily Benefit Amount**

The total of all benefits paid under your policy will not exceed the **Lifetime Benefit Amount** that would have been payable if your policy did not lapse.

Important facts to know about this reduced benefit are:

- No future premium is due.
- The **Lifetime Benefit Amount** is significantly less than the benefit provided if you choose to continue paying your premium.
- All riders and inflation options will be terminated.
- All other terms, conditions, limitations and exclusions in your current coverage apply to the Contingent Non-Forfeiture Benefit.

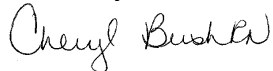
IMPORTANT NOTE: If your policy includes a Spousal Benefit Transfer Rider, both you and your spouse must continue to maintain identical coverage. You must both select the same option regarding this rate increase.

If you have questions on the above options please call Customer Service toll free at **1-800-240-1675**.

If you are currently on claim and your premium is being waived, the increase will be applied when your premium is no longer being waived. Please be assured that your benefits are not affected and that your claims will continue to be paid.

As always, thank you for your business with the company.

Sincerely,



Cheryl Bush, RN
Senior Vice President, Long Term Care Operations