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:	04/29/2022
SERFF Tr Num:	MILL-133176375
SERFF Status:	Closed-Approved
State Tr Num:	MILL-133176375
State Status:	Approved
Co Tr Num:	SERIES 11 AND PRIOR INDIVIDUAL
Effective Date Requested:	On Approval
Author(s):	Courtney Williamson, Joe Neary, Cassi Noel, Derek Lesniak, Matt Mickolichek, Lola Heimlich, Ben Pearson, Nicholas Kuder
Reviewer(s):	Valerie Romig (primary), Jim Laverty
Disposition Date:	11/17/2022
Disposition Status:	Approved
Effective Date:	

State Filing Description:

Proposed 129% rate increase on 159 PA policyholders of LTC forms LTC-LBP-2PA, LTC-CD5-2PA, LTC-CD8-MA-PA, LTC-CD9-MA-PA & Series 11 forms 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 2022 Rate Increase/145MAI01-30.09*

General Information

Project Name: MedAmerica Nationwide 2022 Rate Increase
Project Number: 145MAI01-30.09
Requested Filing Mode: Review & Approval

Explanation for Combination/Other:
Submission Type: New Submission
Overall Rate Impact: 83%

Deemer Date:
Submitted By: Joe Neary

Status of Filing in Domicile: Pending
Date Approved in Domicile:
Domicile Status Comments: Pennsylvania is the state of domicile.

Market Type: Individual
Individual Market Type:
Filing Status Changed: 11/17/2022
State Status Changed: 11/17/2022
Created By: Lola Heimlich
Corresponding Filing Tracking Number:
State TOI: LTC03I Individual Long Term Care

Filing Description:

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 2022 Rate Increase/145MAI01-30.09*		

On behalf of the company, we are submitting this rate filing for your review. This is an existing product(s) that provides long-term care coverage on an individual basis. The company issued this product(s) in Pennsylvania from October 12, 1992 to August 1, 2004 and is no longer marketing it in any jurisdiction. The company is making a similar request on the group product(s) in a concurrent filing (SERFF Tracking # MILL-133176421).

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

The cumulative requested rate increase varies by benefit period and inflation option. The rate increase request was determined as described in Section 2 of the enclosed actuarial memorandum. The enclosed cover letter provides the requested rate increases for this form(s) by benefit period, inflation option, and issue date.

Prior rate increases have been approved and implemented on this form(s). Exhibit IV of the enclosed actuarial memorandum provides a nationwide status listing of the current and all prior rate increase filings for each jurisdiction in which there is business in force. The company is seeking this current rate increase request to help alleviate the adverse performance on this block of business.

While a prior rate increase in Pennsylvania varied by issue date, the company is currently requesting a cumulative rate increase that varies by benefit period and inflation option only (rather than also by issue date), as described in Section 2 of the enclosed actuarial memorandum. However, the company reserves the right to vary future cumulative rate increases by issue date due to differences in the rate history.

If the Department approves the increase requested in full, then the company does not anticipate additional rate increases beyond the current request. However, the company will continue to monitor experience and reserves the right to request additional rate increases if experience deteriorates from the current expectations in this filing.

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. If the cumulative requested rate increase is filed for use, a majority of policyholders will be eligible for a contingent benefit upon lapse.

To comply with rate stability regulation in this jurisdiction, enclosed with this filing is a plan, subject to the Department’s review, which demonstrates that appropriate administration and claims processing procedures are in effect.

Company and Contact

Filing Contact Information

Courtney Williamson, Associate Actuary
8500 Normandale Lake Blvd.
Suite 1850
Minneapolis, MN 55437

courtney.williamson@milliman.com
952-820-2413 [Phone]

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 2022 Rate Increase/145MAI01-30.09*		

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

State 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 2022 Rate Increase/145MAI01-30.09*

Correspondence Summary

Dispositions

Status	Created By	Created On	Date Submitted
Approved	Valerie Romig	11/17/2022	11/17/2022

Objection Letters and Response Letters

Objection Letters

Status	Created By	Created On	Date Submitted
Disapproved	Valerie Romig	10/26/2022	10/26/2022
Disapproved	Valerie Romig	09/15/2022	09/15/2022
Disapproved	Valerie Romig	06/03/2022	06/03/2022

Response Letters

Responded By	Created On	Date Submitted
Ben Pearson	11/17/2022	11/17/2022
Courtney Williamson	10/18/2022	10/18/2022
Lola Heimlich	08/16/2022	08/16/2022

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 2022 Rate Increase/145MAI01-30.09*

Disposition

Disposition Date: 11/17/2022
Effective Date:
Status: Approved

Comment: November 17, 2022

Courtney Williamson, Associate Actuary
MedAmerica Insurance Company
8500 Normandale Lake Blvd.
Suite 1850
Minneapolis, MN 55437

RE: Proposed 129% rate increase on 159 PA policyholders of LTC forms LTC-LBP-2PA, LTC-CD5-2PA, LTC-CD8-MA-PA, LTC-CD9-MA-PA & Series 11 forms 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.
Pennsylvania Insurance Department ID # MILL-133176375

Dear Courtney Williamson:

The Department approves the rate increase schedule shown in Table 1 of the PDF called "PA_Response_to_20221026_Objection_MedAmerica_Series_11_and_Prior_LRRS_20221116.pdf" which was submitted on 11/17/2022.

Sincerely,

Valerie Romig
Actuary
Bureau of Life, Accident and Health Insurance

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	83.000%	83.000%	$446,326	159	$537,494	99.900%	0.000%

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 2022 Rate Increase/145MAI01-30.09

Schedule	Schedule Item	Schedule Item Status	Public Access
Rate (revised)	Prior to Series 11 Rate Tables		Yes
Rate (revised)	Series 11 Individual Rate Tables		Yes
Rate	Prior to Series 11 Rate Tables		No
Rate	Series 11 Individual Rate Tables		No
Supporting Document	Transmittal Letter (A&H)		Yes
Supporting Document	Actuarial Certification (A&H)		Yes
Supporting Document	Actuarial Memorandum and Explanatory Information (A&H)		Yes
Supporting Document	Advertisements (A&H)		Yes
Supporting Document	Authorization to File (A&H)		Yes
Supporting Document	Insert Page Explanation (A&H)		Yes
Supporting Document	Rate Table (A&H)		Yes
Supporting Document	Replacement Form with Highlighted Changes (A&H)		Yes
Supporting Document	Advertisement Compliance Certification		Yes
Supporting Document	Reserve Calculation (A&H)		Yes
Supporting Document	Variability Explanation (A&H)		Yes
Supporting Document	Claims and Administration Processing Plan		Yes
Supporting Document	Sample Policyholder Notification Letter		Yes
Supporting Document	Response to June 3, 2022 Objection		Yes
Supporting Document	Response to September 15, 2022 Objection		Yes
Supporting Document	Response to October 26, 2022 Objection		Yes

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 2022 Rate Increase/145MAI01-30.09		

Objection Letter

Objection Letter Status	Disapproved
Objection Letter Date	10/26/2022
Submitted Date	10/26/2022
Respond By Date	

Dear Courtney Williamson,

Introduction:

October 26, 2022

Courtney Williamson, Associate Actuary
MedAmerica Insurance Company
165 Court Street
Rochester, NY 14647

RE: Proposed 129% rate increase on 159 PA policyholders of LTC forms LTC-LBP-2PA, LTC-CD5-2PA, LTC-CD8-MA-PA, LTC-CD9-MA-PA & Series 11 forms 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.
Pennsylvania Insurance Department ID # MILL-133176375

Dear Courtney Williamson:

The captioned filing has been reviewed by the Pennsylvania Insurance Department. It has been determined that the filing fails to meet the requirements of our Insurance Company Laws or regulations and is therefore disapproved pursuant to the authority granted under Section 304(a) of Act 134, the Accident and Health Filing Reform Act. In the event you have any questions regarding the stated concerns, please feel free to contact the Department for further clarification.

The disapproved filing may be resubmitted within 120 days of the date of disapproval. If the Department does not hear from you within 120 days, the subject filing will be permanently closed. Such filings resubmitted after 120 days must be submitted as a new filing, inclusive of appropriate filing fees and disclosure of the closed filing SERFF tracking number.

The Department cannot approve this filing as submitted. Please propose a series of increases staged over no more than four years such that the cumulative aggregate value of the proposed increases is no greater than that scheduled in this filing, no greater than 99.9% over the implementation period, and no greater than 30% in any year.

Lastly, please provide a seriatim listing of the 159 MedAmerica policies in this block in Excel. Each row within the worksheet must contain the policy's unique identification number, form number, series, issue age, issue date, inflation status indicator, benefit period, current premium, and MedAmerica's suggested premium increase in each year of the proposed implementation period.

If MedAmerica would like to accept our offer, then please respond with an acceptance letter and the seriatim listing in Excel.

Sincerely,

Valerie Romig
Actuary
Bureau of Life, Accident and Health Insurance

Conclusion:

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 2022 Rate Increase/145MAI01-30.09		

Sincerely,
Valerie Romig

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 2022 Rate Increase/145MAI01-30.09

Objection Letter

Objection Letter Status	Disapproved
Objection Letter Date	09/15/2022
Submitted Date	09/15/2022
Respond By Date	

Dear Courtney Williamson,

Introduction:

September 15, 2022

Courtney Williamson, Associate Actuary
MedAmerica Insurance Company
8500 Normandale Lake Blvd.
Suite 1850
Minneapolis, MN 55437

RE: Proposed 129% rate increase on 159 PA policyholders of LTC forms LTC-LBP-2PA, LTC-CD5-2PA, LTC-CD8-MA-PA, LTC-CD9-MA-PA called Pre-Series 11 & individual Series 11 forms 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.
Pennsylvania Insurance Department ID # MILL-133176375

Dear Courtney Williamson:

The captioned filing has been reviewed by the Pennsylvania Insurance Department. It has been determined that the filing fails to meet the requirements of our Insurance Company Laws or regulations and is therefore disapproved pursuant to the authority granted under Section 304(a) of Act 134, the Accident and Health Filing Reform Act. In the event you have any questions regarding the stated concerns, please feel free to contact the Department for further clarification.

The disapproved filing may be resubmitted within 120 days of the date of disapproval. If the Department does not hear from you within 120 days, the subject filing will be permanently closed. Such filings resubmitted after 120 days must be submitted as a new filing, inclusive of appropriate filing fees and disclosure of the closed filing SERFF tracking number.

Please furnish the following information to the Department.

1.Please provide a detailed narrative on what is driving the large future loss ratios. For example, if morbidity changes are negatively impacting the future loss ratios, please explain what the original assumption was, what the revised assumption was, and what is driving the revised assumption to differ from the original assumption.

2.On page 9 of the actuarial memorandum, it states, “The adverse experience may be due to a combination of higher persistency, higher morbidity, and lower interest.” Please provide a detailed narrative on each of these factors and explain what the original assumption was, what the revised assumption was, and what is driving the revised assumption to differ from the original assumption.

3.Exhibit III provides a summary of the original pricing assumptions. Please provide a similar exhibit that explains what the experience has actually been.

4.On page 1 of Appendix A, it states, “The persistency and morbidity assumptions were developed using historical experience and predictive analytics. Where actual experience was limited or did not exist, industry experience and actuarial judgment was also used.” Please provide a detailed narrative that explains how actuarial judgment was used in any of the current actuarial assumptions that were used in this filing.

Sincerely,

Valerie Romig
Actuary
Bureau of Life, Accident & Health Insurance

Conclusion:

Sincerely,
Valerie Romig

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 2022 Rate Increase/145MAI01-30.09		

Objection Letter

Objection Letter Status	Disapproved
Objection Letter Date	06/03/2022
Submitted Date	06/03/2022
Respond By Date	

Dear Courtney Williamson,

Introduction:

June 3, 2022

Courtney Williamson, Associate Actuary
MedAmerica Insurance Company
8500 Normandale Lake Blvd, Suite 1850
Minneapolis, MN 55437

RE: Proposed 129% rate increase on 159 PA policyholders of LTC forms LTC-LBP-2PA, LTC-CD5-2PA, LTC-CD8-MA-PA, LTC-CD9-MA-PA called Pre-Series 11 & individual Series 11 forms 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.
Pennsylvania Insurance Department ID #: MILL-133176375

Dear Courtney Williamson:

The captioned filing has been reviewed by the Pennsylvania Insurance Department. It has been determined that the filing fails to meet the requirements of our Insurance Company Laws or regulations and is therefore disapproved pursuant to the authority granted under Section 304(a) of Act 134, the Accident and Health Filing Reform Act. In the event you have any questions regarding the stated concerns, please feel free to contact the Department for further clarification.

The disapproved filing may be resubmitted within 120 days of the date of disapproval. If the Department does not hear from you within 120 days, the subject filing will be permanently closed. Such filings resubmitted after 120 days must be submitted as a new filing, inclusive of appropriate filing fees and disclosure of the closed filing SERFF tracking number.

Please furnish the following information to the Department.

1.Please provide a table in an Excel spreadsheet (perhaps similar to Exhibit I-a, Series 11 and Prior Policy Forms) for this nationwide block of policies which shows the historical and projected nationwide earned premium and incurred claims on a calendar year basis assuming no rate increase is granted. Please restate the nationwide historical and projected earned premium so that the business from inception appears to have all been earned at the current Pennsylvania rate level.

2.Please provide a table in an Excel spreadsheet (perhaps similar to Exhibit I-a, Series 11 and Prior Policy Forms) for this nationwide block of policies which shows the historical and projected nationwide earned premium and incurred claims on a calendar year basis assuming no rate increase is granted. Please restate the nationwide historical and projected earned premium so that the business from inception appears to have all been earned at the original rate level.

3.Please provide the percent of active policyholders remaining on a nationwide basis. How many policies were issued nationwide? How many policies remain in force nationwide? Please provide this information considering the entire block (i.e. pre Series 11, individual Series 11, and group Series 11).

4.Please provide the cumulative weighted average increase granted on policies in force on this block in PA. Please provide this information considering pre Series 11 and Individual Series 11.

5.The cover letter describes the nonforfeiture options but no other downgrade choices. Please describe the other options policyholders have to mitigate the rate increase.

6.Please provide a table in Excel for the 159 Pennsylvania policies in force. Each row should contain the following information:
a.Policy number,
b.Policy form,
c.Issue age,
d.Inflation status indicator,
e.Benefit period,
f.Issue date,
g.Requested rate increase.

7.How many “Pre-Series 11” policies issued prior to 9/16/2002 have (a) Non-Lifetime Benefit Periods and Non-Auto Inflation, (b) Non-Lifetime Benefit Periods and Auto Inflation, (c) Lifetime Benefit Periods and Non-Auto Inflation, and (d) Lifetime Benefit Periods and Non-Auto Inflation?

8.How many “Pre-Series 11” policies issued after 9/15/2002 have (a) Non-Lifetime Benefit Periods and Non-Auto Inflation, (b) Non-Lifetime Benefit Periods and Auto Inflation, (c) Lifetime Benefit Periods and Non-Auto Inflation, and (d) Lifetime Benefit Periods and Non-Auto Inflation?

9.How many “Individual Series 11” policies issued prior to 9/16/2002 have (a) Non-Lifetime Benefit Periods and Non-Auto Inflation, (b) Non-Lifetime Benefit Periods and Auto Inflation, (c) Lifetime Benefit Periods and Non-Auto Inflation, and (d) Lifetime Benefit Periods and Non-Auto Inflation?

10.How many “Individual Series 11” policies issued after 9/15/2002 have (a) Non-Lifetime Benefit Periods and Non-Auto Inflation, (b) Non-Lifetime Benefit Periods and Auto Inflation, (c) Lifetime Benefit Periods and Non-Auto Inflation, and (d) Lifetime Benefit Periods and Non-Auto Inflation?

Sincerely,

Valerie Romig
Actuarial Associate
Bureau of Life, Accident & Health Insurance

Conclusion:

Sincerely,
Valerie Romig

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 2022 Rate Increase/145MAI01-30.09

Response Letter

Response Letter Status	Submitted to State
Response Letter Date	11/17/2022
Submitted Date	11/17/2022

Dear Valerie Romig,

Introduction:

On behalf of Missy Gordon, thank you for reviewing this filing.

Response 1

Comments:

Please see the attached documents in response to your October 26, 2022 requests.

Changed Items:

No Form Schedule items changed.

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 2022 Rate Increase/145MAI01-30.09*

Rate/Rule Schedule Item Changes

Item No.	Document Name	Affected Form Numbers (Separated with commas)	Rate Action	Rate Action Information	Attachments	Date Submitted
1	Prior to Series 11 Rate Tables	LTC-LBP-2PA, LTC-CD5-2PA, LTC-CD8-MA-PA, LTC-CD9-MA-PA	Revised	Previous State Filing Number: MILL-132544158 Percent Rate Change Request: 64.3	PA_MedAmerica_Premium Rates_Prior to Series 11_LR_Year 1_20221116.pdf, PA_MedAmerica_Premium Rates_Prior to Series 11_LR_Year 2_20221116.pdf, PA_MedAmerica_Premium Rates_Prior to Series 11_LR_Year 3_20221116.pdf, PA_MedAmerica_Premium Rates_Prior to Series 11_RS_Year 1_20221116.pdf, PA_MedAmerica_Premium Rates_Prior to Series 11_RS_Year 2_20221116.pdf, PA_MedAmerica_Premium Rates_Prior to Series 11_RS_Year 3_20221116.pdf, PA_MedAmerica_Current Premium Rates_Prior to Series 11_LR_20220425.pdf, PA_MedAmerica_Current Premium Rates_Prior to Series 11_RS_20220425.pdf,	11/17/2022 By: Courtney Williamson
Previous Version						
1	*Prior to Series 11 Rate Tables*	*LTC-LBP-2PA, LTC-CD5-2PA, LTC-CD8-MA-PA, LTC-CD9-MA-PA*	*Revised*	*Previous State Filing Number: MILL-132544158 Percent Rate Change Request: 96.4*	*PA_MedAmerica_Current Premium Rates_Prior to Series 11_LR_20220425.pdf, PA_MedAmerica_Current Premium*	*04/29/2022 By: Joe Neary*

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 2022 Rate Increase/145MAI01-30.09*

Rate/Rule Schedule Item Changes

					Rates_Prior to Series 11_RS_20220425.pdf, PA_MedAmerica_Proposed Premium Rates_Prior to Series 11_20220425.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-132544158 Percent Rate Change Request: 94.3	PA_MedAmerica_Premium Rates_Series 11 Individual_LR_Year 1_20221116.pdf, PA_MedAmerica_Premium Rates_Series 11 Individual_LR_Year 2_20221116.pdf, PA_MedAmerica_Premium Rates_Series 11 Individual_LR_Year 3_20221116.pdf, PA_MedAmerica_Premium Rates_Series 11 Individual_RS_Year 1_20221116.pdf, PA_MedAmerica_Premium Rates_Series 11 Individual_RS_Year 2_20221116.pdf, PA_MedAmerica_Premium Rates_Series 11 Individual_RS_Year 3_20221116.pdf, PA_MedAmerica_Current Premium Rates_Series 11 Individual_LR_20220425.pdf, PA_MedAmerica_Current Premium Rates_Series 11 Individual_RS_20220425.pdf,	11/17/2022 By: Courtney Williamson
Previous Version						
2	*Series 11 Individual Rate Tables*	*NTQ11-337-MA-PA-601, NTQ11-337-MA-PA-998, LTQ11-336-MA-PA-601, LTQ11-*	*Revised*	*Previous State Filing Number: MILL-132544158 Percent Rate Change*	*PA_MedAmerica_Current Premium Rates_Series 11 Individual_LR_202204*	*04/29/2022 By: Joe Neary*

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 2022 Rate Increase/145MAI01-30.09

Rate/Rule Schedule Item Changes

		336-MA-PA-998, FLQ11-336-MA-PA-601, HTQ11-338-MA-PA-601, HTQ11-338-MA-PA-998		Request: 148.6	25.pdf, PA_MedAmerica_Current Premium Rates_Series 11 Individual_RS_20220425.pdf, PA_MedAmerica_Proposed Premium Rates_Series 11 Individual_20220425.pdf,	

Supporting Document Schedule Item Changes

Satisfied - Item:	Response to October 26, 2022 Objection
Comments:	
Attachment(s):	PA_Response to 20221026 Objection_MedAmerica_Series 11 and Prior_LRRS_20221116.pdf PA_Premier_Response Attachments_MedAmerica_Series 11 and Prior_20221116.xlsb

Conclusion:

Thank you for working with us to complete this filing. Please let us know if you have any additional questions.

Sincerely,

Courtney Williamson

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 2022 Rate Increase/145MAI01-30.09

Response Letter

Response Letter Status	Submitted to State
Response Letter Date	10/18/2022
Submitted Date	10/18/2022

Dear Valerie Romig,

Introduction:

On behalf of Missy Gordon, thank you for reviewing this filing.

Response 1

Comments:

Please see the attached document in response to your September 15, 2022 requests.

Changed Items:

No Form Schedule items changed.

No Rate/Rule Schedule items changed.

Supporting Document Schedule Item Changes	
Satisfied - Item:	Response to September 15, 2022 Objection
Comments:	
Attachment(s):	PA_Response to 20220915 Objection_MedAmerica_Series 11 and Prior_Individual_LRRS_20221018.pdf

Conclusion:

Thank you for working with us to complete this filing. Please let us know if you have any additional questions.

Sincerely,

Courtney Williamson

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 2022 Rate Increase/145MAI01-30.09		

Response Letter

Response Letter Status	Submitted to State
Response Letter Date	08/16/2022
Submitted Date	08/16/2022

Dear Valerie Romig,

Introduction:

On behalf of Missy Gordon, thank you for reviewing this filing.

Response 1

Comments:

Please see the attached documents in response to your June 3, 2022 requests.

Changed Items:

No Form Schedule items changed.

No Rate/Rule Schedule items changed.

Supporting Document Schedule Item Changes	
Satisfied - Item:	Response to June 3, 2022 Objection
Comments:	
Attachment(s):	PA_Response to 20220603 Objection_MedAmerica_Series 11 and Prior Individual_LRRS_20220808.pdf PA_Premier_Response Attachments_MedAmerica_Series 11 and Prior Individual_20220808.xlsb

Conclusion:

Thank you for working with us to complete this filing. Please let us know if you have any additional questions.

Sincerely,

Courtney Williamson

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 2022 Rate Increase/145MAI01-30.09*

Post Submission Update Request Processed On 11/17/2022

Status:	Allowed
Created By:	Ben Pearson
Processed By:	Valerie Romig
Comments:	

General Information:

Field Name	Requested Change	Prior Value
Overall Rate Impact	83	129

Company Rate Information:

Company Name:MedAmerica Insurance Company

Field Name	Requested Change	Prior Value
Overall % Indicated Change	83.000%	129.000%
Overall % Rate Impact	83.000%	129.000%
Written Premium Change for this Program	$446326	$693126
Maximum %Change (where required)	99.900%	259.300%

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 2022 Rate Increase/145MAI01-30.09*

Rate Information

Rate data applies to filing.

Filing Method: Review and Approval
Rate Change Type: Increase
Overall Percentage of Last Rate Revision: 12.200%
Effective Date of Last Rate Revision: 09/14/2021
Filing Method of Last Filing: Review and Approval
SERFF Tracking Number of Last Filing: MILL-132544158

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	83.000%	83.000%	$446,326	159	$537,494	99.900%	0.000%

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 2022 Rate Increase/145MAI01-30.09

Rate/Rule Schedule

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 2022 Rate Increase/145MAI01-30.09*

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-CD5-2PA, LTC-CD8-MA-PA, LTC-CD9-MA-PA	Revised	Previous State Filing Number: MILL-132544158 Percent Rate Change Request: 64.3	PA_MedAmerica_Premium Rates_Prior to Series 11_LR_Year 1_20221116.pdf, PA_MedAmerica_Premium Rates_Prior to Series 11_LR_Year 2_20221116.pdf, PA_MedAmerica_Premium Rates_Prior to Series 11_LR_Year 3_20221116.pdf, PA_MedAmerica_Premium Rates_Prior to Series 11_RS_Year 1_20221116.pdf, PA_MedAmerica_Premium Rates_Prior to Series 11_RS_Year 2_20221116.pdf, PA_MedAmerica_Premium Rates_Prior to Series 11_RS_Year 3_20221116.pdf, PA_MedAmerica_Current Premium Rates_Prior to Series 11_LR_20220425.pdf, PA_MedAmerica_Current Premium Rates_Prior to Series 11_RS_20220425.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-132544158 Percent Rate Change Request: 94.3	PA_MedAmerica_Premium Rates_Series 11 Individual_LR_Year 1_20221116.pdf, PA_MedAmerica_Premium Rates_Series 11 Individual_LR_Year 2_20221116.pdf, PA_MedAmerica_Pre

						mium Rates_Series 11 Individual_LR_Year 3_20221116.pdf, PA_MedAmerica_Premium Rates_Series 11 Individual_RS_Year 1_20221116.pdf, PA_MedAmerica_Premium Rates_Series 11 Individual_RS_Year 2_20221116.pdf, PA_MedAmerica_Premium Rates_Series 11 Individual_RS_Year 3_20221116.pdf, PA_MedAmerica_Current Premium Rates_Series 11 Individual_LR_20220425.pdf, PA_MedAmerica_Current Premium Rates_Series 11 Individual_RS_20220425.pdf,

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 for Policies Issued Prior to 9/16/2002 - Year 1
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		
Issue	**Benefit Period**			**Benefit Period**			**Benefit Period**		
Age	*1 Year*	*2 Years*	*3 Years*	*1 Year*	*2 Years*	*3 Years*	*1 Year*	*2 Years*	*3 Years*
<45	20	24	27	6	10	13	22	35	44
45	22	24	27	6	13	16	22	38	51
46	22	27	29	6	13	16	25	38	54
47	22	27	32	10	16	19	29	44	54
48	24	29	34	10	16	19	29	44	57
49	24	32	34	13	16	25	32	48	64
50	27	32	37	13	22	25	32	54	70
51	27	34	42	16	22	25	35	57	70
52	29	37	44	16	25	32	35	60	76
53	32	39	46	16	29	35	38	64	83
54	32	44	51	19	29	38	41	64	86
55	34	46	54	22	32	44	44	70	92
56	37	49	59	25	38	48	48	76	98
57	39	54	64	25	41	54	51	79	105
58	44	59	71	25	44	57	51	86	111
59	46	64	78	32	51	64	57	92	118
60	51	71	86	32	54	70	57	95	124
61	56	78	95	38	60	83	64	105	140
62	61	86	108	44	73	92	73	118	152
63	66	98	120	51	79	105	83	127	168
64	73	108	134	57	89	118	89	143	184
65	83	122	154	64	102	130	95	156	200
66	93	139	174	70	111	146	105	165	219
67	105	156	196	73	121	159	111	181	235
68	117	176	220	79	133	175	118	194	254
69	132	200	252	89	146	191	127	207	270
70	147	227	286	98	159	210	140	219	289
71	154	237	301	98	159	210	140	219	289
72	174	266	337	102	168	222	143	226	295
73	193	298	376	108	178	238	143	235	311
74	213	330	418	118	191	254	152	248	324
75	237	369	467	121	200	267	156	254	337
76	261	408	518	130	213	283	162	267	353
77	288	452	572	133	222	299	168	273	365
78	318	496	628	140	232	315	172	286	378
79	345	540	684	146	245	327	175	295	394
80	347	543	687	146	245	327	175	295	394
81	374	587	740	146	248	334	178	295	394
82	403	633	797	149	248	334	178	299	400
83	435	679	855	149	257	346	178	299	400
84	469	736	924	156	264	356	181	302	407
85	506	794	997	162	273	369	187	311	419

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 for Policies Issued Prior to 9/16/2002 - Year 1
Rates per $20 NCF

Issue	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:	
Age	50%	100%	50%	100%	50%	100%	50%	100%
<40	64	95	78	120	100	154	155	234
40	68	100	83	127	105	164	165	247
41	71	105	88	134	112	174	175	261
42	76	112	93	142	117	183	185	278
43	78	117	98	149	125	196	199	295
44	83	125	105	159	132	208	210	313
45	88	132	110	169	142	220	223	333
46	93	139	117	178	149	232	237	354
47	98	149	125	188	159	247	254	378
48	105	156	132	200	169	261	271	402
49	110	166	139	213	178	276	289	426
50	117	176	149	225	191	293	309	453
51	125	188	159	239	203	313	330	484
52	134	200	169	254	218	332	354	515
53	142	213	181	271	232	354	381	553
54	152	227	193	291	249	376	409	591
55	164	242	205	310	266	403	440	632
56	174	257	222	330	286	430	474	677
57	186	276	237	352	308	459	512	725
58	200	293	257	376	330	489	553	776
59	215	315	274	403	354	523	598	835
60	232	337	296	433	384	562	646	900
61	254	367	325	469	418	609	711	979
62	279	398	354	508	457	657	783	1,065
63	305	433	389	552	501	714	862	1,161
64	337	472	428	599	550	772	948	1,264
65	379	525	479	665	616	853	1,068	1,401
66	418	569	528	721	679	926	1,178	1,528
67	459	621	582	784	748	1,007	1,302	1,673
68	503	674	638	853	821	1,092	1,436	1,820
69	560	740	709	936	912	1,200	1,597	2,006
70	621	814	787	1,026	1,009	1,312	1,772	2,202
71	643	831	811	1,048	1,041	1,339	1,824	2,246
72	709	909	894	1,144	1,146	1,457	2,006	2,449
73	777	987	982	1,244	1,256	1,581	2,202	2,662
74	850	1,068	1,073	1,344	1,373	1,708	2,408	2,885
75	931	1,161	1,175	1,459	1,505	1,852	2,634	3,129
76	1,014	1,254	1,283	1,574	1,640	1,999	2,864	3,373
77	1,097	1,344	1,388	1,686	1,774	2,136	3,081	3,599
78	1,183	1,435	1,498	1,796	1,909	2,270	3,301	3,819
79	1,266	1,520	1,606	1,904	2,041	2,400	3,500	4,015
80	1,266	1,520	1,606	1,904	2,041	2,400	3,500	4,015
81	1,339	1,576	1,694	1,967	2,131	2,454	3,603	4,063
82	1,427	1,667	1,806	2,080	2,261	2,581	3,792	4,249
83	1,527	1,767	1,926	2,202	2,395	2,715	3,981	4,437
84	1,637	1,879	2,063	2,344	2,556	2,879	4,211	4,671
85	1,762	2,009	2,214	2,505	2,737	3,067	4,468	4,942

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 for Policies Issued Prior to 9/16/2002 - Year 1
Rates per $20 NCF

Issue	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:	
Age	50%	100%	50%	100%	50%	100%	50%	100%
<40	41	64	54	89	76	130	100	155
40	41	70	57	95	83	137	106	165
41	44	76	60	98	86	146	113	179
42	48	79	64	108	95	156	124	189
43	51	86	70	114	98	165	131	203
44	54	89	73	121	108	175	141	216
45	57	95	79	127	111	184	151	230
46	64	102	83	137	121	197	161	244
47	67	105	89	146	127	207	172	258
48	70	114	95	156	137	219	185	275
49	76	121	105	165	149	235	199	295
50	83	130	111	175	156	251	216	316
51	89	137	118	187	168	264	234	337
52	92	143	127	197	178	280	251	364
53	102	156	137	210	194	299	271	385
54	108	162	146	222	207	318	295	412
55	114	175	159	235	222	337	316	443
56	127	187	168	254	238	356	343	474
57	137	197	181	270	254	378	371	508
58	146	213	194	286	273	407	402	546
59	156	222	210	302	292	429	436	584
60	168	238	222	321	311	451	474	622
61	184	261	245	349	346	489	525	683
62	203	280	270	378	378	531	577	742
63	222	305	295	407	413	569	632	804
64	238	327	318	438	448	613	694	869
65	264	353	353	470	492	661	759	945
66	286	381	378	505	531	705	824	1,017
67	308	403	407	540	569	750	893	1,089
68	330	429	438	569	613	794	958	1,161
69	356	461	473	610	661	848	1,041	1,247
70	384	486	511	651	715	905	1,120	1,333
71	378	480	505	639	705	883	1,113	1,312
72	397	499	531	664	743	925	1,175	1,374
73	419	521	559	689	782	963	1,233	1,436
74	435	540	585	718	820	1,001	1,295	1,497
75	457	562	613	747	858	1,039	1,360	1,563
76	480	581	642	775	902	1,080	1,422	1,628
77	496	597	667	797	934	1,112	1,477	1,673
78	515	613	693	823	972	1,144	1,522	1,714
79	534	629	718	842	1,004	1,169	1,559	1,745
80	534	629	718	842	1,004	1,169	1,559	1,745
81	518	607	702	813	975	1,121	1,484	1,697
82	537	623	721	832	1,001	1,141	1,504	1,666
83	553	639	743	851	1,029	1,166	1,525	1,683
84	572	658	766	877	1,058	1,195	1,556	1,710
85	591	677	794	902	1,093	1,229	1,590	1,741

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 for Policies Issued Prior to 9/16/2002 - Year 1
Rates per $20 NCF

Issue	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:	
Age	50%	100%	50%	100%	50%	100%	50%	100%
<40	105	159	140	216	197	308	275	395
40	108	168	146	226	207	321	289	412
41	114	175	152	235	213	334	302	433
42	118	181	159	245	226	349	319	453
43	127	191	168	257	235	362	333	471
44	130	197	175	267	248	375	350	491
45	137	207	184	276	257	391	367	512
46	143	216	191	286	270	407	385	536
47	149	222	197	299	280	423	402	556
48	156	232	207	311	292	438	422	580
49	165	241	219	324	308	457	446	608
50	172	251	229	337	321	477	467	635
51	178	261	238	349	334	492	491	659
52	184	270	248	365	349	511	512	690
53	197	283	261	378	365	531	536	718
54	203	292	273	391	378	553	563	749
55	213	302	286	407	397	569	591	780
56	222	318	295	423	413	591	622	814
57	235	327	311	442	432	613	653	852
58	245	343	324	457	454	639	687	890
59	257	356	340	473	473	664	721	927
60	270	369	356	492	492	686	759	965
61	292	397	384	524	537	731	824	1,037
62	315	423	416	562	575	782	886	1,109
63	337	451	445	597	616	826	955	1,185
64	359	477	477	632	661	877	1,027	1,260
65	391	508	515	674	712	931	1,106	1,350
66	413	540	546	712	756	982	1,181	1,432
67	438	566	578	747	801	1,029	1,257	1,508
68	467	591	613	782	845	1,077	1,329	1,583
69	496	626	651	823	899	1,131	1,418	1,676
70	524	654	689	864	953	1,191	1,504	1,769
71	508	632	670	836	928	1,156	1,470	1,724
72	524	648	693	855	959	1,179	1,525	1,769
73	540	664	715	877	994	1,210	1,580	1,824
74	556	680	740	899	1,026	1,242	1,638	1,879
75	575	699	766	921	1,061	1,274	1,700	1,941
76	594	715	788	947	1,099	1,309	1,755	1,995
77	610	728	813	963	1,128	1,334	1,803	2,033
78	623	740	832	982	1,163	1,360	1,841	2,064
79	639	753	855	998	1,185	1,379	1,868	2,085
80	639	753	855	998	1,185	1,379	1,868	2,085
81	613	715	823	950	1,137	1,309	1,765	2,037
82	629	724	836	963	1,156	1,315	1,765	1,947
83	639	737	855	979	1,179	1,334	1,776	1,954
84	658	753	874	998	1,204	1,360	1,800	1,975
85	674	769	899	1,023	1,236	1,392	1,824	1,999

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 for Policies Issued Prior to 9/16/2002 - Year 1
Rates per $10 Daily Benefit

	Policy Form: LTC-CD8-MA-PA					**Rider: LTC8-PA-SIP**					**Rider: LTC8-PA-CIP**				
	Base Rates with No Inflation Protection					**Simple Inflation Protection Rider**					**Compound Inflation Protection Rider**				
Issue	**Benefit Period**					**Benefit Period**					**Benefit Period**				
Age	*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	90	105	117	189	54	76	79	83	124	98	130	152	172	220
40	78	100	115	130	206	60	83	86	89	137	108	143	168	191	244
41	83	103	120	134	213	64	86	89	92	144	111	149	175	200	251
42	86	108	125	139	220	67	89	92	95	148	118	156	181	207	261
43	88	110	127	144	230	70	92	95	98	155	121	159	187	213	271
44	90	115	132	149	237	70	95	98	102	158	124	165	194	219	278
45	95	117	137	154	244	73	98	102	105	165	130	172	200	229	289
46	98	122	142	159	251	76	98	105	108	168	133	175	207	235	299
47	100	125	147	164	261	76	102	108	111	175	137	181	213	241	306
48	103	130	149	169	268	79	105	111	114	179	140	187	219	248	316
49	105	132	154	174	275	83	108	114	118	185	146	194	226	257	326
50	110	137	159	178	282	86	111	118	124	189	149	197	232	264	333
51	112	139	164	181	292	86	114	121	127	196	152	203	238	270	343
52	115	144	166	186	299	89	118	124	130	199	159	210	245	280	354
53	117	147	171	191	306	92	121	127	133	206	162	213	251	286	361
54	120	152	176	196	313	95	124	130	137	210	165	219	257	292	371
55	125	154	181	200	323	95	127	133	140	216	168	226	264	299	381
56	134	169	196	220	350	102	133	140	146	227	175	232	273	308	392
57	144	183	213	237	381	105	140	146	152	237	178	238	280	318	402
58	156	196	230	257	412	111	146	152	159	247	184	241	286	324	412
59	166	210	244	274	443	114	152	159	165	258	187	248	295	334	422
60	176	225	261	293	474	121	159	165	172	268	194	254	302	343	433
61	193	244	286	320	519	124	168	181	191	285	197	267	315	356	450
62	208	266	310	349	563	137	178	197	213	302	213	276	327	369	467
63	225	286	335	379	608	140	187	213	232	319	216	286	340	381	484
64	239	308	359	406	656	152	200	229	254	333	229	299	349	397	505
65	254	327	386	435	701	159	210	245	273	350	232	308	362	410	522
66	281	359	423	477	769	165	222	261	292	371	238	321	378	429	539
67	303	391	459	518	838	178	232	273	308	395	251	330	394	448	570
68	327	423	496	560	910	184	245	289	324	412	257	346	407	461	587
69	352	455	533	601	979	191	257	302	343	436	267	359	423	480	611
70	374	486	572	643	1,051	203	270	318	359	453	283	375	442	502	632
71	413	535	628	706	1,154	210	280	330	375	477	286	381	451	511	653
72	450	584	687	772	1,260	222	292	346	391	498	299	397	464	524	670
73	489	635	743	836	1,364	229	305	359	407	522	302	403	477	540	694
74	525	684	802	899	1,470	238	318	375	423	543	315	416	492	559	711
75	562	733	858	965	1,583	248	330	391	442	556	321	429	505	572	728
76	613	799	938	1,058	1,728	257	346	403	451	584	330	442	515	578	749
77	665	868	1,017	1,144	1,875	264	353	419	473	608	334	445	531	604	769
78	714	934	1,097	1,234	2,026	276	369	435	492	629	343	461	543	616	787
79	765	1,002	1,175	1,322	2,174	286	381	451	511	653	353	470	559	635	807
80	814	1,073	1,263	1,425	2,339	292	391	454	508	659	359	480	569	645	817
81	887	1,168	1,371	1,542	2,545	299	403	477	540	690	362	486	578	658	835
82	960	1,266	1,488	1,676	2,765	308	413	489	550	704	369	492	581	661	845
83	1,034	1,364	1,603	1,808	2,981	315	423	499	562	725	372	499	591	667	859
84	1,107	1,461	1,720	1,943	3,201	321	435	508	572	742	375	505	597	677	869
85	1,180	1,562	1,835	2,070	3,421	327	442	521	591	759	378	511	604	683	879

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 for Policies Issued Prior to 9/16/2002 - Year 1
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	**Benefit Period**					**Benefit Period**					**Benefit Period**				
Age	*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	139	178	208	232	378	108	146	156	162	251	191	257	305	346	446
41	144	183	215	242	392	111	152	159	168	261	197	267	318	359	460
42	149	191	222	252	405	118	156	165	175	271	203	276	327	372	477
43	154	198	232	259	419	121	162	172	178	282	213	286	340	384	495
44	159	205	239	269	433	124	168	178	184	289	219	295	353	400	512
45	166	210	247	276	446	127	175	184	191	299	226	305	362	413	529
46	171	218	254	286	460	133	178	187	197	309	232	315	375	426	546
47	176	225	261	293	474	137	184	194	203	319	241	324	384	438	563
48	181	232	269	303	488	140	191	200	210	326	248	334	397	451	577
49	186	237	279	313	501	143	197	207	216	337	254	343	410	464	594
50	191	244	286	320	519	149	200	213	222	347	261	353	419	477	611
51	196	252	293	330	532	152	207	219	229	357	270	362	432	489	629
52	200	257	301	337	546	156	213	222	235	364	276	372	442	502	646
53	208	264	308	347	560	162	216	229	238	374	283	381	454	515	663
54	213	271	318	354	574	165	222	235	245	385	289	391	467	527	680
55	218	279	325	364	587	168	229	241	251	395	299	400	477	543	694
56	232	298	349	393	635	175	238	248	261	409	302	407	486	550	704
57	249	320	374	420	680	181	245	257	270	422	308	416	492	559	714
58	266	342	398	450	728	191	254	267	276	436	315	423	502	569	725
59	281	362	425	477	773	197	264	276	286	453	321	429	511	578	738
60	298	384	450	506	821	203	273	286	295	467	324	435	521	591	749
61	315	408	479	538	872	210	280	302	321	481	330	442	524	597	759
62	335	433	508	569	927	216	289	321	349	498	334	448	534	604	769
63	354	457	535	604	979	222	299	340	375	512	340	457	540	613	783
64	371	481	565	635	1,034	232	308	359	400	529	346	464	550	623	797
65	391	506	594	667	1,089	238	318	378	426	546	353	473	559	632	811
66	415	538	631	711	1,157	245	327	388	438	560	356	480	566	642	817
67	440	569	670	753	1,230	251	337	400	451	577	362	486	575	648	831
68	464	604	709	797	1,302	261	346	410	464	594	369	492	581	658	841
69	489	635	745	838	1,374	267	359	423	480	611	375	502	594	670	855
70	511	667	784	882	1,446	276	369	435	492	629	381	511	604	683	872
71	547	714	838	943	1,542	280	375	442	499	639	381	511	604	683	872
72	582	760	890	1,002	1,642	283	381	451	508	649	381	511	607	686	876
73	616	804	943	1,063	1,741	289	388	457	518	663	384	515	610	689	883
74	653	850	997	1,122	1,841	295	394	467	527	677	388	521	613	696	890
75	687	897	1,051	1,183	1,937	302	403	477	540	690	391	524	620	702	900
76	731	956	1,122	1,263	2,071	305	410	483	546	701	391	524	623	702	900
77	775	1,017	1,193	1,342	2,205	311	416	492	556	711	394	527	623	705	903
78	821	1,075	1,263	1,422	2,339	315	426	502	566	725	394	531	626	712	907
79	865	1,136	1,334	1,503	2,469	321	432	511	578	738	397	534	632	715	914
80	909	1,195	1,405	1,581	2,603	327	442	521	588	756	400	537	639	721	924
81	975	1,285	1,510	1,701	2,806	330	445	524	594	759	400	537	635	718	920
82	1,044	1,376	1,618	1,821	3,009	334	448	531	600	769	397	537	635	718	920
83	1,109	1,466	1,723	1,943	3,208	337	454	537	607	780	397	537	635	718	924
84	1,175	1,557	1,830	2,063	3,411	340	461	543	613	790	400	537	635	718	924
85	1,244	1,645	1,936	2,182	3,610	343	464	550	623	800	400	540	639	721	790

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

Comprehensive Policy

Individual Rates for Lifetime Premium Payment Optior
0-Day Elimination Period
Annual Premium Rates for Policies Issued Prior to 9/16/2002 - Year 1
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	**Benefit Period**					**Benefit Period**					**Benefit Period**				
Age	*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	46	54	61	66	113	35	44	54	57	82	64	79	92	98	155
40	49	59	66	73	127	38	48	57	57	82	73	89	105	108	165
41	51	61	71	78	134	41	51	60	60	89	76	95	108	114	172
42	54	66	73	81	141	44	54	64	67	93	83	98	118	121	179
43	59	68	78	86	148	44	57	67	70	100	83	105	121	127	185
44	61	73	83	90	158	48	57	70	73	100	86	105	124	133	189
45	64	76	86	95	165	51	64	76	76	106	89	111	130	137	196
46	66	81	90	98	172	54	64	76	83	110	95	114	137	146	203
47	68	83	95	103	179	57	67	79	86	117	98	121	140	152	210
48	73	88	98	108	185	54	70	86	86	120	98	124	146	156	220
49	76	90	103	112	192	57	73	89	89	127	102	130	149	162	227
50	78	95	108	115	199	60	73	89	95	131	108	133	156	172	234
51	81	98	110	120	206	64	79	95	98	137	111	140	162	175	240
52	83	103	115	125	216	67	79	98	102	137	114	140	165	181	244
53	88	105	120	130	223	67	83	102	105	144	114	146	168	187	251
54	90	110	122	132	230	70	86	105	111	148	121	149	178	194	258
55	93	112	127	137	237	73	89	108	114	155	124	156	181	200	264
56	100	122	137	149	254	76	95	114	121	165	130	162	191	213	275
57	108	130	147	159	275	79	102	121	127	168	133	172	200	229	285
58	112	139	159	171	292	86	108	124	133	179	143	175	203	238	295
59	120	147	169	181	313	89	114	130	140	182	146	184	213	254	306
60	127	156	178	193	330	92	121	137	146	192	152	191	222	267	316
61	137	169	193	208	354	95	124	143	156	203	156	197	229	270	326
62	147	181	205	222	381	102	130	152	162	213	162	200	238	273	337
63	154	191	220	239	405	108	137	156	168	223	168	210	241	273	347
64	164	203	232	254	433	114	143	165	175	234	175	213	251	276	357
65	174	215	247	269	457	118	146	172	184	244	178	219	257	280	367
66	196	242	279	303	515	127	156	184	197	261	187	232	270	295	388
67	218	269	308	335	570	133	168	197	213	282	197	245	286	315	412
68	237	293	340	369	629	146	181	210	229	302	207	261	302	327	433
69	259	320	369	401	683	152	194	222	245	323	216	273	318	346	457
70	281	347	401	435	742	162	203	235	257	340	226	286	330	362	477
71	315	389	447	486	835	168	213	248	270	357	232	295	343	375	495
72	347	430	494	538	924	178	222	261	283	378	241	305	356	388	515
73	381	469	543	589	1,017	184	235	273	299	398	248	315	365	397	532
74	413	511	589	640	1,106	194	245	286	311	419	257	324	378	410	553
75	447	552	635	692	1,199	200	254	299	324	436	264	334	391	423	570
76	503	623	718	782	1,353	216	273	321	346	460	280	353	413	445	591
77	562	692	804	875	1,508	229	295	340	365	488	292	375	429	464	611
78	618	762	887	965	1,659	241	315	359	391	515	305	394	451	489	639
79	677	831	973	1,058	1,813	254	337	378	410	543	318	416	467	508	659
80	733	902	1,056	1,149	1,968	270	356	400	432	567	334	435	489	531	680
81	799	985	1,151	1,254	2,171	276	365	413	445	587	340	442	496	537	697
82	868	1,070	1,249	1,359	2,373	283	372	426	457	608	343	445	502	546	711
83	934	1,153	1,344	1,461	2,576	289	384	438	473	629	346	454	508	556	728
84	1,002	1,239	1,442	1,566	2,779	295	391	451	486	649	349	457	515	566	742
85	1,068	1,322	1,537	1,672	2,981	302	400	464	499	670	356	464	521	572	759

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

Comprehensive Policy

Individual Rates for Lifetime Premium Payment Optior
0-Day Elimination Period
Annual Premium Rates for Policies Issued Prior to 9/16/2002 - Year 1
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	**Benefit Period**					**Benefit Period**					**Benefit Period**				
Age	*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	49	56	64	68	117	35	44	57	60	86	67	83	95	102	161
40	51	61	68	76	131	38	51	60	60	86	76	92	108	114	172
41	54	64	73	81	141	41	54	64	64	93	79	98	114	121	179
42	56	68	76	83	148	44	57	67	70	96	86	102	124	127	185
43	61	71	81	88	155	48	60	70	73	103	86	108	127	133	192
44	64	76	86	93	165	51	60	73	76	103	89	111	130	140	196
45	66	78	88	100	172	54	67	79	79	110	92	118	137	140	203
46	68	83	93	103	179	57	67	79	86	113	98	121	143	149	210
47	71	86	100	108	185	60	70	83	89	120	102	127	143	159	220
48	76	90	103	112	192	57	73	89	89	127	102	130	149	162	230
49	78	93	108	117	199	60	76	92	92	134	108	137	156	168	237
50	81	100	112	120	206	64	73	92	98	137	114	137	162	178	244
51	83	103	115	125	213	67	83	98	102	144	118	143	168	181	251
52	86	108	120	130	227	70	83	102	105	141	121	143	172	187	251
53	90	110	125	134	234	70	86	105	108	148	121	152	175	194	261
54	93	115	127	137	240	73	89	108	118	151	127	156	184	203	268
55	98	117	132	142	247	73	92	111	121	161	127	162	187	210	275
56	105	127	142	154	264	79	98	121	127	172	133	168	200	222	285
57	112	134	152	166	285	83	105	127	130	175	137	178	210	235	299
58	117	144	166	178	302	89	114	127	137	185	149	181	210	248	309
59	125	152	176	188	326	92	121	133	146	189	152	194	219	264	316
60	132	164	186	200	343	95	124	143	152	199	159	197	232	280	330
61	142	176	200	215	367	98	127	149	162	210	162	203	238	283	340
62	152	188	213	232	395	108	137	159	168	223	168	207	248	283	350
63	161	198	230	249	422	111	143	162	175	230	175	219	251	283	361
64	171	210	242	264	450	118	149	172	181	244	181	222	261	289	371
65	181	225	257	279	474	121	149	178	194	254	184	226	267	292	385
66	203	252	291	315	536	133	162	191	203	271	197	241	280	308	405
67	227	279	320	347	594	137	178	207	222	292	203	254	299	327	426
68	247	305	354	384	653	152	187	216	238	316	213	270	311	340	450
69	269	332	384	418	711	159	203	232	254	337	226	286	330	359	474
70	293	362	418	452	773	168	210	245	267	354	232	295	343	378	495
71	327	403	464	506	869	175	222	257	280	371	241	308	359	391	512
72	362	447	513	560	962	184	232	270	292	392	251	318	372	403	536
73	396	489	565	613	1,058	194	245	283	308	412	257	327	378	413	553
74	430	530	613	665	1,151	200	254	295	324	436	267	337	391	429	574
75	464	574	660	718	1,247	210	264	311	337	453	276	346	407	442	594
76	523	648	748	814	1,408	226	286	334	359	477	292	369	429	461	615
77	584	718	836	909	1,570	238	308	353	381	505	305	391	448	483	635
78	643	792	924	1,004	1,724	251	327	372	407	536	318	410	467	508	666
79	704	865	1,012	1,100	1,886	264	349	394	426	563	330	432	486	531	687
80	762	938	1,097	1,195	2,047	280	369	416	448	591	346	451	508	550	708
81	831	1,024	1,197	1,305	2,257	289	381	429	461	611	353	461	515	556	725
82	902	1,114	1,298	1,413	2,469	295	384	445	477	632	359	461	524	569	738
83	970	1,200	1,398	1,520	2,679	302	400	457	492	653	362	473	527	578	756
84	1,041	1,288	1,501	1,630	2,888	308	407	467	505	677	365	477	534	588	773
85	1,109	1,376	1,598	1,738	3,101	315	416	483	521	697	372	480	543	597	790

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

Comprehensive Policy

Individual Rates for Lifetime Premium Payment Optior
0-Day Elimination Period
Annual Premium Rates for Policies Issued Prior to 9/16/2002 - Year 1
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				
	Benefit Period					Benefit Period					Benefit Period				
Issue Age	*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	83	151	41	54	64	67	100	76	95	114	121	175
40	61	73	83	90	161	51	60	73	76	113	89	111	130	137	199
41	66	78	88	95	172	51	64	76	83	120	92	114	137	143	206
42	68	83	93	103	182	57	67	83	83	124	95	118	140	146	216
43	73	88	100	108	192	57	70	83	89	131	98	124	143	152	223
44	76	93	105	112	203	60	70	86	92	134	105	127	149	159	230
45	81	98	110	120	216	64	73	89	95	137	105	130	156	162	234
46	83	100	115	125	227	67	79	95	98	144	111	137	159	168	244
47	88	105	120	130	237	67	83	98	105	148	114	140	165	175	251
48	90	110	127	137	247	70	86	98	105	155	118	146	168	178	258
49	95	115	132	142	258	73	89	102	111	158	121	149	172	184	264
50	100	120	137	149	268	73	92	108	114	165	124	152	178	191	275
51	103	125	142	154	278	76	92	111	118	172	127	156	184	197	282
52	108	130	147	159	289	79	95	114	124	175	130	159	187	203	289
53	110	134	154	166	299	83	98	114	124	182	133	165	191	207	295
54	115	139	159	171	309	83	102	121	130	185	137	168	197	213	306
55	117	144	164	176	323	89	105	124	133	189	143	172	203	219	309
56	122	147	169	183	333	89	111	127	137	196	143	178	207	222	316
57	125	152	174	188	343	92	111	130	140	199	149	181	213	229	323
58	130	156	181	193	354	92	114	133	146	206	152	187	216	235	333
59	132	161	186	200	364	98	118	137	146	210	156	191	219	238	340
60	137	166	191	205	374	98	121	140	152	216	159	194	226	245	347
61	149	181	208	225	409	102	127	146	159	227	162	200	232	251	357
62	161	196	225	242	443	108	133	152	168	237	168	207	238	261	371
63	171	210	242	261	474	114	140	162	175	254	175	213	248	270	385
64	183	225	259	279	508	121	146	168	184	264	181	219	254	280	398
65	196	239	276	298	543	124	152	175	191	275	184	226	261	286	409
66	218	266	305	330	604	130	162	187	207	292	191	235	273	302	429
67	237	291	335	364	663	140	175	200	216	313	203	248	289	315	450
68	259	318	367	396	725	149	181	210	232	330	210	261	299	327	471
69	279	342	396	430	783	159	194	222	241	350	222	273	315	340	491
70	301	369	425	462	845	165	203	235	257	367	229	283	327	356	512
71	335	413	474	516	945	175	213	251	273	388	238	292	343	372	532
72	371	455	525	569	1,044	181	226	261	286	409	245	305	353	384	553
73	406	499	574	623	1,144	194	238	276	302	429	257	318	369	400	574
74	442	540	626	677	1,243	200	251	286	315	450	264	330	378	413	594
75	477	584	674	731	1,343	210	261	302	330	471	273	340	394	429	615
76	535	657	758	821	1,515	222	276	324	353	498	286	356	413	451	642
77	594	728	841	914	1,683	235	295	346	372	529	299	372	432	470	673
78	650	802	926	1,004	1,855	248	308	362	391	560	311	388	451	489	704
79	709	872	1,009	1,097	2,023	261	327	384	410	591	324	403	470	508	735
80	767	946	1,092	1,188	2,195	273	343	407	432	618	337	419	489	531	762
81	836	1,031	1,190	1,295	2,397	280	353	419	445	639	340	426	496	537	773
82	904	1,117	1,290	1,403	2,600	286	362	432	457	656	346	432	499	543	787
83	975	1,205	1,388	1,510	2,806	289	365	445	473	673	346	435	508	546	793
84	1,044	1,290	1,488	1,618	3,009	295	375	457	486	690	353	442	511	553	807
85	1,112	1,376	1,586	1,725	3,211	302	384	470	499	711	356	448	518	559	817

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

Comprehensive Policy

Individual Rates for Lifetime Premium Payment Optior
0-Day Elimination Period
Annual Premium Rates for Policies Issued Prior to 9/16/2002 - Year 1
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	**Benefit Period**					**Benefit Period**					**Benefit Period**				
Age	*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	71	81	86	158	41	57	67	70	103	79	98	121	127	182
40	64	76	86	93	168	54	64	76	79	117	92	118	137	143	206
41	68	81	90	100	179	54	67	79	86	124	95	121	143	146	213
42	71	86	98	108	189	60	70	86	86	131	98	124	143	152	227
43	76	90	105	112	199	60	73	86	92	137	102	130	146	159	234
44	78	98	110	117	210	64	70	89	95	141	111	130	156	165	240
45	83	103	115	125	227	67	76	92	98	141	111	133	162	168	240
46	86	105	120	130	237	70	83	98	102	148	118	140	165	175	251
47	90	110	125	134	247	70	86	102	108	151	121	143	172	181	261
48	93	115	132	142	258	73	89	102	111	161	124	152	175	184	268
49	100	120	137	147	268	73	92	105	118	165	124	156	178	194	275
50	105	125	142	154	278	76	95	114	121	172	127	159	184	200	285
51	108	130	147	161	289	79	95	118	121	179	130	162	194	203	295
52	112	134	152	166	299	83	98	121	127	182	133	165	197	210	302
53	115	139	161	174	309	86	102	118	127	192	137	172	197	213	309
54	120	144	166	178	323	86	108	124	133	192	143	175	203	219	316
55	122	149	171	183	337	92	111	127	140	196	149	181	210	229	319
56	127	152	176	191	347	92	118	130	143	203	149	187	213	232	330
57	130	156	181	196	357	95	118	133	146	206	156	191	222	238	337
58	134	164	188	200	367	95	118	140	152	216	159	194	226	245	347
59	137	169	193	208	378	102	121	143	152	220	162	197	229	248	354
60	142	174	198	213	388	102	124	146	159	227	165	200	235	254	361
61	154	188	215	235	426	108	133	152	165	234	168	207	241	261	371
62	169	203	235	252	460	111	140	159	175	247	175	216	248	270	385
63	178	218	252	271	495	118	146	168	181	261	181	222	257	283	398
64	191	235	269	291	529	127	152	175	191	275	187	226	264	289	416
65	203	249	288	310	563	130	159	181	197	289	194	235	270	295	426
66	227	276	318	342	629	133	168	194	216	302	197	245	283	315	446
67	247	303	347	379	690	146	181	210	226	323	210	257	302	327	467
68	269	330	381	411	752	156	187	219	241	343	219	270	311	343	491
69	291	357	411	447	814	165	200	232	251	364	229	283	327	353	512
70	313	384	442	481	879	172	213	245	267	381	238	295	340	369	532
71	347	430	494	535	982	184	219	261	286	405	248	302	356	388	553
72	386	472	547	591	1,085	187	235	270	299	426	254	318	365	400	577
73	423	518	596	648	1,188	200	248	289	315	446	267	330	384	416	598
74	459	562	650	704	1,291	210	261	299	327	471	276	343	394	429	618
75	496	609	701	760	1,398	216	270	315	343	488	283	353	410	445	639
76	557	684	787	853	1,576	232	286	337	369	515	295	369	432	470	666
77	618	758	875	951	1,752	245	308	359	388	550	308	388	448	489	697
78	677	833	963	1,044	1,930	257	321	378	407	580	324	403	470	511	732
79	738	907	1,051	1,141	2,105	270	340	397	426	611	337	419	486	527	762
80	799	982	1,136	1,234	2,284	283	359	423	451	642	349	438	508	553	790
81	870	1,073	1,237	1,347	2,493	289	365	438	464	663	353	442	518	559	804
82	941	1,161	1,342	1,459	2,703	295	378	451	477	683	359	451	518	566	817
83	1,014	1,254	1,444	1,571	2,919	302	378	461	492	701	359	451	527	569	824
84	1,085	1,342	1,547	1,681	3,129	308	391	477	508	718	369	461	534	575	838
85	1,156	1,432	1,650	1,794	3,338	315	397	489	521	742	372	464	537	581	852

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 for Policies Issued Prior to 9/16/2002 - Year 1
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				
	Benefit Period					Benefit Period					Benefit Period				
Issue Age	*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	83	100	115	122	223	83	102	118	130	185	159	200	232	254	361
41	88	108	122	130	237	89	108	124	140	196	168	210	245	270	378
42	93	112	130	139	251	92	114	133	146	203	178	226	261	283	395
43	98	120	137	147	261	98	121	140	156	216	191	235	273	302	416
44	105	125	144	154	275	102	130	149	165	227	197	251	289	318	436
45	110	132	152	161	289	108	137	156	175	237	207	261	302	334	453
46	115	139	159	171	302	111	140	165	181	244	216	270	318	346	471
47	120	144	166	178	316	118	149	172	191	254	226	286	330	362	488
48	125	152	174	186	326	124	156	181	197	268	238	295	346	381	508
49	130	156	181	193	340	130	165	187	207	278	248	311	359	397	525
50	134	164	188	203	354	133	168	197	213	285	257	321	375	410	543
51	139	171	196	210	367	140	175	203	222	295	267	330	388	426	560
52	147	176	203	218	381	143	184	213	232	306	273	346	403	442	580
53	152	183	210	225	392	149	191	219	241	319	286	356	416	461	601
54	156	188	218	235	405	152	197	229	248	326	295	372	432	473	618
55	161	196	225	242	419	159	203	235	257	337	305	381	445	489	635
56	171	208	239	257	443	165	210	241	267	350	311	391	454	502	656
57	181	220	254	271	467	172	219	251	276	364	318	400	464	515	673
58	188	232	266	288	495	181	226	261	286	371	330	410	477	521	690
59	198	244	281	303	519	187	235	270	295	385	337	419	486	534	708
60	208	257	296	318	543	194	241	276	305	398	343	429	496	546	728
61	218	269	310	335	570	197	248	283	311	409	343	432	499	550	732
62	230	283	325	352	601	197	251	289	318	412	340	432	502	553	732
63	239	296	342	369	629	203	257	295	324	422	340	438	505	553	735
64	252	310	357	386	659	203	261	302	330	426	337	438	508	556	735
65	261	323	371	403	687	207	267	308	337	436	337	442	511	559	738
66	288	349	403	440	749	207	276	318	346	450	334	445	515	559	738
67	315	379	435	474	807	210	283	327	356	467	334	445	518	562	742
68	342	406	469	511	869	210	289	337	365	481	330	448	518	562	745
69	369	435	501	545	927	213	295	346	375	498	330	448	521	566	749
70	396	462	533	582	989	213	305	356	384	512	327	451	524	566	749
71	423	501	577	628	1,082	222	308	362	391	515	330	448	521	566	742
72	450	538	621	677	1,175	232	315	369	397	519	337	448	521	562	738
73	474	577	665	723	1,264	241	321	372	403	522	343	448	518	562	735
74	501	613	709	772	1,357	251	327	378	410	525	349	448	518	559	732
75	528	653	753	819	1,449	261	330	384	416	529	353	445	515	559	725
76	582	721	833	907	1,590	270	343	397	429	550	359	454	524	569	738
77	635	792	914	992	1,728	280	353	410	448	577	365	457	531	581	756
78	692	860	992	1,080	1,868	289	362	426	461	598	372	467	543	588	773
79	745	931	1,073	1,166	2,006	299	372	438	480	625	378	470	550	600	790
80	799	1,000	1,153	1,254	2,147	308	384	451	492	646	384	480	559	610	804
81	860	1,075	1,241	1,351	2,336	311	391	457	499	656	384	483	562	613	790
82	921	1,151	1,329	1,447	2,521	315	394	464	508	670	384	483	566	623	776
83	982	1,229	1,417	1,544	2,710	321	397	473	511	683	381	483	572	626	762
84	1,044	1,305	1,505	1,640	2,895	324	400	480	521	697	381	483	575	635	749
85	1,105	1,381	1,593	1,738	3,084	327	407	486	527	708	381	486	578	639	735

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 for Policies Issued Prior to 9/16/2002 - Year 1
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	**Benefit Period**					**Benefit Period**					**Benefit Period**				
Age	*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	86	105	120	127	234	86	105	121	137	192	165	207	241	264	374
41	90	112	127	134	247	95	111	130	146	203	178	216	254	283	392
42	98	117	134	144	261	95	118	140	152	210	184	235	270	295	412
43	103	125	142	152	271	102	124	146	162	227	197	245	286	315	433
44	110	130	149	161	285	105	137	156	172	237	203	261	302	330	453
45	115	137	156	169	299	111	143	162	181	247	213	270	315	346	474
46	120	144	166	178	316	114	146	172	187	251	226	283	330	359	488
47	125	149	174	186	330	121	156	178	197	264	235	299	343	375	505
48	130	156	181	193	340	130	162	187	207	278	248	308	359	397	529
49	134	164	188	200	354	137	172	194	216	289	257	321	372	413	546
50	139	171	196	210	367	140	175	207	222	295	267	334	391	426	563
51	144	178	203	218	381	146	181	213	232	309	280	343	403	445	584
52	152	183	210	227	395	149	191	222	238	319	286	359	419	457	604
53	156	191	218	235	409	156	197	229	251	330	299	369	435	477	625
54	164	196	227	244	422	156	207	235	257	340	305	388	448	492	642
55	169	203	235	252	436	165	213	245	267	350	315	397	461	508	659
56	178	215	249	266	460	172	219	251	280	364	324	407	473	524	683
57	188	230	264	281	484	178	226	261	289	381	330	416	483	537	701
58	196	242	276	301	515	187	235	273	295	385	343	426	496	540	718
59	205	254	293	315	539	197	245	280	308	402	349	435	505	556	735
60	215	266	308	330	563	203	251	286	318	416	359	448	515	569	759
61	227	279	323	347	594	203	261	295	324	422	356	451	518	572	759
62	239	296	337	367	625	203	261	302	330	429	353	448	524	575	762
63	249	308	357	384	653	210	267	305	337	440	353	454	524	575	766
64	261	323	371	401	687	213	270	315	343	443	349	457	527	578	762
65	271	335	386	420	714	216	280	321	349	453	353	461	534	581	769
66	301	364	420	457	780	213	286	330	362	467	346	461	534	581	766
67	327	393	452	494	838	219	295	340	369	488	346	464	540	585	773
68	357	423	489	530	903	216	299	349	381	501	343	464	537	585	776
69	384	452	521	567	965	222	308	362	391	519	343	467	543	588	780
70	411	481	555	606	1,030	222	315	369	397	529	343	467	543	588	776
71	440	521	599	653	1,127	232	321	378	407	536	343	467	543	588	769
72	467	560	645	704	1,223	241	327	384	413	539	353	464	543	585	766
73	494	599	692	753	1,315	251	334	388	419	543	356	467	537	585	762
74	521	638	738	804	1,412	261	340	391	426	546	365	467	537	581	759
75	550	679	782	850	1,508	270	343	400	435	550	365	461	537	581	752
76	606	750	868	943	1,655	280	356	413	445	570	372	473	543	591	766
77	660	824	951	1,031	1,796	292	365	426	467	601	381	477	553	607	787
78	718	894	1,031	1,124	1,944	302	378	445	477	622	388	486	566	610	804
79	775	968	1,117	1,212	2,085	311	388	454	499	653	394	489	569	626	824
80	831	1,039	1,200	1,305	2,232	321	400	470	511	673	400	499	581	632	835
81	894	1,119	1,290	1,405	2,428	324	407	477	518	683	400	502	585	639	821
82	958	1,197	1,383	1,505	2,621	327	410	483	527	697	400	502	588	648	807
83	1,022	1,278	1,474	1,606	2,820	334	413	492	534	711	397	502	594	651	790
84	1,085	1,356	1,566	1,706	3,012	337	416	499	540	725	397	502	597	661	776
85	1,149	1,437	1,657	1,806	3,208	340	423	505	550	735	397	505	600	664	762

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 for Policies Issued Prior to 9/16/2002 - Year 1
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	**Benefit Period**					**Benefit Period**					**Benefit Period**				
Age	*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	105	127	144	154	282	102	127	146	165	234	200	245	283	315	443
41	110	134	152	164	299	108	133	156	172	244	210	254	295	324	460
42	117	142	161	174	316	111	140	159	178	254	216	264	305	337	474
43	122	149	169	181	333	118	143	168	187	264	222	273	318	349	491
44	130	156	178	191	347	121	149	172	194	275	229	283	324	362	512
45	134	164	186	200	364	127	156	181	200	285	238	292	337	372	525
46	142	171	196	210	381	130	162	187	207	295	245	299	346	381	543
47	147	178	203	218	398	137	168	194	216	306	254	308	359	397	560
48	154	186	213	227	416	140	172	200	222	316	257	318	369	407	574
49	159	193	220	237	433	146	178	207	229	326	267	327	381	419	591
50	166	200	230	247	450	149	184	213	238	337	273	337	391	429	608
51	171	205	237	254	464	152	194	222	248	347	283	349	400	442	625
52	176	213	244	264	481	159	200	229	254	357	292	359	413	454	642
53	183	220	254	274	498	162	203	235	261	367	295	369	423	464	656
54	188	227	261	283	515	168	210	241	267	378	305	378	435	477	673
55	196	235	271	291	532	172	216	248	276	388	311	388	445	489	690
56	200	242	279	301	550	178	222	257	283	398	321	394	457	499	704
57	208	249	288	310	563	181	229	261	289	409	327	403	464	511	725
58	213	257	296	320	580	187	232	270	295	419	334	413	477	521	742
59	220	264	305	327	598	191	238	273	305	429	340	423	486	537	756
60	225	271	313	337	615	197	245	283	311	440	349	432	499	546	773
61	237	288	332	357	653	200	248	286	318	446	349	429	496	546	769
62	249	303	349	376	690	203	251	292	321	453	349	429	496	543	766
63	264	320	369	398	725	207	254	295	324	460	343	426	492	540	769
64	276	335	386	418	762	210	257	302	327	467	343	426	492	537	766
65	288	352	406	437	800	213	261	305	334	474	343	423	489	537	762
66	320	379	437	472	862	207	267	311	343	488	330	426	492	540	769
67	352	406	467	506	927	197	276	324	353	501	321	429	496	540	769
68	381	433	499	540	989	194	283	330	359	515	311	429	499	543	776
69	413	459	528	574	1,054	184	292	343	369	529	302	432	502	543	776
70	445	486	560	609	1,116	178	299	349	378	543	289	435	505	546	783
71	469	528	606	660	1,209	194	305	356	384	556	302	438	508	550	790
72	491	567	653	711	1,305	213	315	365	394	563	318	442	515	553	793
73	516	609	701	760	1,398	232	318	369	403	577	334	445	515	562	800
74	538	648	748	811	1,494	251	327	378	413	584	349	448	521	566	804
75	562	689	794	863	1,587	267	334	384	419	598	362	451	524	569	811
76	616	758	875	948	1,748	276	346	397	435	618	369	457	527	575	821
77	672	826	953	1,036	1,910	286	356	416	448	642	369	461	537	581	831
78	726	897	1,034	1,122	2,071	295	365	429	464	663	375	464	540	588	841
79	782	965	1,112	1,210	2,232	305	375	448	477	687	375	467	550	594	852
80	836	1,034	1,193	1,295	2,394	315	388	461	492	708	381	473	553	600	862
81	897	1,112	1,283	1,393	2,579	318	391	467	499	718	381	473	553	600	838
82	958	1,190	1,373	1,493	2,765	324	397	473	505	725	384	473	553	597	811
83	1,022	1,266	1,461	1,591	2,947	324	403	480	511	738	381	477	559	600	790
84	1,083	1,344	1,552	1,691	3,132	330	410	486	518	745	384	477	559	597	762
85	1,144	1,422	1,642	1,789	3,318	334	413	492	524	756	384	477	559	597	738

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 for Policies Issued Prior to 9/16/2002 - Year 1
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	**Benefit Period**					**Benefit Period**					**Benefit Period**				
Age	*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	110	132	149	161	292	105	133	152	172	244	207	254	295	324	460
41	115	139	156	171	309	111	140	162	178	254	216	264	308	337	481
42	122	147	169	181	330	114	146	165	184	264	226	276	315	349	491
43	127	154	176	188	347	121	149	175	194	275	232	286	330	362	512
44	134	164	186	198	361	127	152	178	203	285	238	292	337	378	532
45	139	171	193	208	378	133	162	187	210	299	248	302	349	388	546
46	147	178	203	218	395	137	168	197	216	309	254	311	362	397	567
47	152	186	210	227	416	143	175	203	222	316	267	321	375	413	580
48	161	193	220	237	433	143	178	210	232	330	267	330	384	423	598
49	166	200	230	247	450	149	184	213	238	340	276	340	394	435	615
50	174	208	239	257	467	156	194	219	248	350	283	353	407	445	632
51	178	213	247	264	481	159	203	232	257	361	292	365	416	461	653
52	183	220	254	274	501	165	210	238	267	371	305	375	429	473	666
53	191	230	264	283	519	168	210	245	273	381	308	381	438	483	680
54	196	237	271	296	536	175	216	251	276	392	318	391	454	496	701
55	203	244	281	303	553	178	226	261	286	405	324	403	464	508	718
56	208	252	291	313	570	187	232	267	292	416	334	410	473	518	735
57	215	259	301	323	587	191	238	270	302	422	343	419	483	534	752
58	220	266	308	332	604	197	241	280	308	436	349	429	496	543	769
59	230	274	318	340	622	197	248	283	318	446	353	442	505	559	787
60	235	281	325	352	639	203	257	295	321	457	362	451	518	566	804
61	247	301	345	371	680	207	257	299	330	464	362	445	518	569	800
62	259	315	364	391	718	213	261	302	334	471	362	445	515	566	797
63	274	332	384	415	752	216	264	308	337	481	359	445	511	559	800
64	288	347	401	435	793	216	270	315	340	484	356	445	515	559	797
65	301	367	423	455	831	219	270	315	346	495	356	438	508	559	793
66	332	393	455	491	896	216	280	324	356	508	343	445	511	562	800
67	367	423	486	525	965	203	286	337	369	522	334	445	515	562	800
68	396	450	518	562	1,030	203	295	343	372	536	324	445	518	566	807
69	430	479	550	596	1,096	191	302	356	384	550	315	448	521	566	807
70	462	506	582	633	1,161	187	311	365	394	563	302	451	527	569	814
71	489	550	631	687	1,257	200	315	369	400	580	311	454	527	572	821
72	511	589	679	740	1,357	222	327	378	410	587	330	461	534	575	824
73	535	633	728	789	1,453	241	330	384	423	601	349	464	537	588	835
74	560	674	777	843	1,552	261	340	394	429	608	362	464	543	588	838
75	584	716	826	897	1,649	280	346	400	435	622	378	470	546	591	845
76	640	787	909	987	1,817	289	362	413	451	646	384	477	550	597	855
77	699	860	992	1,078	1,985	299	369	432	467	670	384	477	556	604	866
78	755	934	1,075	1,166	2,153	308	378	445	483	690	391	483	562	613	876
79	814	1,004	1,156	1,259	2,322	318	391	467	496	714	391	486	572	616	886
80	870	1,075	1,241	1,347	2,490	327	403	477	511	735	394	492	572	626	896
81	934	1,156	1,334	1,449	2,682	330	407	486	518	745	394	492	575	623	872
82	997	1,237	1,427	1,552	2,875	337	413	492	527	756	400	492	575	623	845
83	1,063	1,317	1,520	1,654	3,064	337	419	499	531	769	397	496	581	626	824
84	1,127	1,398	1,613	1,760	3,256	343	426	508	537	776	400	496	581	620	793
85	1,190	1,479	1,708	1,860	3,452	346	429	511	546	783	400	496	581	623	766

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 for Policies Issued Prior to 9/16/2002 - Year 2
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		
Issue	**Benefit Period**			**Benefit Period**			**Benefit Period**		
Age	*1 Year*	*2 Years*	*3 Years*	*1 Year*	*2 Years*	*3 Years*	*1 Year*	*2 Years*	*3 Years*
<45	20	24	27	8	12	17	29	45	58
45	22	24	27	8	17	21	29	50	66
46	22	27	29	8	17	21	33	50	70
47	22	27	32	12	21	25	37	58	70
48	24	29	34	12	21	25	37	58	74
49	24	32	34	17	21	33	41	62	83
50	27	32	37	17	29	33	41	70	91
51	27	34	42	21	29	33	45	74	91
52	29	37	44	21	33	41	45	78	99
53	32	39	46	21	37	45	50	83	107
54	32	44	51	25	37	50	54	83	112
55	34	46	54	29	41	58	58	91	120
56	37	49	59	33	50	62	62	99	128
57	39	54	64	33	54	70	66	103	136
58	44	59	71	33	58	74	66	112	145
59	46	64	78	41	66	83	74	120	153
60	51	71	86	41	70	91	74	124	161
61	56	78	95	50	78	107	83	136	182
62	61	86	108	58	95	120	95	153	198
63	66	98	120	66	103	136	107	165	219
64	73	108	134	74	116	153	116	186	240
65	83	122	154	83	132	169	124	202	260
66	93	139	174	91	145	190	136	215	285
67	105	156	196	95	157	207	145	235	306
68	117	176	220	103	173	227	153	252	330
69	132	200	252	116	190	248	165	268	351
70	147	227	286	128	207	273	182	285	376
71	154	237	301	128	207	273	182	285	376
72	174	266	337	132	219	289	186	293	384
73	193	298	376	140	231	310	186	306	405
74	213	330	418	153	248	330	198	322	421
75	237	369	467	157	260	347	202	330	438
76	261	408	518	169	277	368	211	347	458
77	288	452	572	173	289	388	219	355	475
78	318	496	628	182	301	409	223	372	491
79	345	540	684	190	318	425	227	384	512
80	347	543	687	190	318	425	227	384	512
81	374	587	740	190	322	434	231	384	512
82	403	633	797	194	322	434	231	388	520
83	435	679	855	194	335	450	231	388	520
84	469	736	924	202	343	463	235	392	529
85	506	794	997	211	355	479	244	405	545

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 for Policies Issued Prior to 9/16/2002 - Year 2
Rates per $20 NCF

Issue	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:	
Age	50%	100%	50%	100%	50%	100%	50%	100%
<40	64	95	78	120	100	154	201	304
40	68	100	83	127	105	164	214	321
41	71	105	88	134	112	174	228	339
42	76	112	93	142	117	183	241	362
43	78	117	98	149	125	196	259	384
44	83	125	105	159	132	208	272	406
45	88	132	110	169	142	220	290	433
46	93	139	117	178	149	232	308	460
47	98	149	125	188	159	247	330	491
48	105	156	132	200	169	261	353	522
49	110	166	139	213	178	276	375	554
50	117	176	149	225	191	293	402	589
51	125	188	159	239	203	313	429	630
52	134	200	169	254	218	332	460	670
53	142	213	181	271	232	354	496	719
54	152	227	193	291	249	376	531	768
55	164	242	205	310	266	403	572	822
56	174	257	222	330	286	430	616	880
57	186	276	237	352	308	459	665	942
58	200	293	257	376	330	489	719	1,009
59	215	315	274	403	354	523	777	1,085
60	232	337	296	433	384	562	839	1,170
61	254	367	325	469	418	609	924	1,273
62	279	398	354	508	457	657	1,018	1,384
63	305	433	389	552	501	714	1,121	1,509
64	337	472	428	599	550	772	1,232	1,643
65	379	525	479	665	616	853	1,389	1,822
66	418	569	528	721	679	926	1,531	1,987
67	459	621	582	784	748	1,007	1,692	2,174
68	503	674	638	853	821	1,092	1,866	2,366
69	560	740	709	936	912	1,200	2,076	2,608
70	621	814	787	1,026	1,009	1,312	2,304	2,862
71	643	831	811	1,048	1,041	1,339	2,371	2,920
72	709	909	894	1,144	1,146	1,457	2,608	3,184
73	777	987	982	1,244	1,256	1,581	2,862	3,460
74	850	1,068	1,073	1,344	1,373	1,708	3,130	3,751
75	931	1,161	1,175	1,459	1,505	1,852	3,425	4,068
76	1,014	1,254	1,283	1,574	1,640	1,999	3,724	4,385
77	1,097	1,344	1,388	1,686	1,774	2,136	4,005	4,679
78	1,183	1,435	1,498	1,796	1,909	2,270	4,291	4,965
79	1,266	1,520	1,606	1,904	2,041	2,400	4,550	5,220
80	1,266	1,520	1,606	1,904	2,041	2,400	4,550	5,220
81	1,339	1,576	1,694	1,967	2,131	2,454	4,684	5,282
82	1,427	1,667	1,806	2,080	2,261	2,581	4,929	5,523
83	1,527	1,767	1,926	2,202	2,395	2,715	5,175	5,769
84	1,637	1,879	2,063	2,344	2,556	2,879	5,474	6,072
85	1,762	2,009	2,214	2,505	2,737	3,067	5,809	6,425

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 for Policies Issued Prior to 9/16/2002 - Year 2
Rates per $20 NCF

Issue	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:	
Age	50%	100%	50%	100%	50%	100%	50%	100%
<40	54	83	70	116	99	169	129	201
40	54	91	74	124	107	178	138	214
41	58	99	78	128	112	190	147	232
42	62	103	83	140	124	202	161	246
43	66	112	91	149	128	215	170	263
44	70	116	95	157	140	227	183	281
45	74	124	103	165	145	240	196	299
46	83	132	107	178	157	256	210	317
47	87	136	116	190	165	268	223	335
48	91	149	124	202	178	285	241	357
49	99	157	136	215	194	306	259	384
50	107	169	145	227	202	326	281	411
51	116	178	153	244	219	343	304	438
52	120	186	165	256	231	363	326	473
53	132	202	178	273	252	388	353	500
54	140	211	190	289	268	413	384	536
55	149	227	207	306	289	438	411	576
56	165	244	219	330	310	463	446	616
57	178	256	235	351	330	491	482	661
58	190	277	252	372	355	529	522	710
59	202	289	273	392	380	558	567	759
60	219	310	289	417	405	586	616	808
61	240	339	318	454	450	636	683	889
62	264	363	351	491	491	690	750	964
63	289	396	384	529	537	739	822	1,045
64	310	425	413	570	582	797	902	1,130
65	343	458	458	611	640	859	987	1,228
66	372	496	491	657	690	917	1,072	1,322
67	401	525	529	702	739	975	1,161	1,415
68	430	558	570	739	797	1,033	1,246	1,509
69	463	599	615	793	859	1,103	1,353	1,621
70	500	632	665	847	929	1,177	1,456	1,732
71	491	624	657	830	917	1,148	1,447	1,706
72	516	648	690	863	966	1,202	1,527	1,786
73	545	677	727	896	1,016	1,251	1,603	1,866
74	566	702	760	933	1,066	1,301	1,683	1,947
75	595	731	797	971	1,115	1,351	1,768	2,032
76	624	756	834	1,008	1,173	1,404	1,848	2,116
77	644	776	867	1,037	1,214	1,446	1,920	2,174
78	669	797	900	1,070	1,264	1,487	1,978	2,228
79	694	818	933	1,094	1,305	1,520	2,027	2,268
80	694	818	933	1,094	1,305	1,520	2,027	2,268
81	673	789	913	1,057	1,268	1,458	1,929	2,206
82	698	809	938	1,082	1,301	1,483	1,956	2,165
83	719	830	966	1,107	1,338	1,516	1,982	2,188
84	743	855	995	1,140	1,375	1,553	2,023	2,224
85	768	880	1,033	1,173	1,421	1,598	2,067	2,264

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 for Policies Issued Prior to 9/16/2002 - Year 2
Rates per $20 NCF

Issue	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:	
Age	50%	100%	50%	100%	50%	100%	50%	100%
<40	136	207	182	281	256	401	357	513
40	140	219	190	293	268	417	375	536
41	149	227	198	306	277	434	393	563
42	153	235	207	318	293	454	415	589
43	165	248	219	335	306	471	433	612
44	169	256	227	347	322	487	455	638
45	178	268	240	359	335	508	478	665
46	186	281	248	372	351	529	500	697
47	194	289	256	388	363	549	522	723
48	202	301	268	405	380	570	549	755
49	215	314	285	421	401	595	580	790
50	223	326	297	438	417	620	607	826
51	231	339	310	454	434	640	638	857
52	240	351	322	475	454	665	665	897
53	256	368	339	491	475	690	697	933
54	264	380	355	508	491	719	732	973
55	277	392	372	529	516	739	768	1,014
56	289	413	384	549	537	768	808	1,058
57	306	425	405	574	562	797	848	1,107
58	318	446	421	595	591	830	893	1,156
59	335	463	442	615	615	863	938	1,206
60	351	479	463	640	640	892	987	1,255
61	380	516	500	681	698	950	1,072	1,348
62	409	549	541	731	748	1,016	1,152	1,442
63	438	586	578	776	801	1,074	1,241	1,540
64	467	620	620	822	859	1,140	1,335	1,639
65	508	661	669	876	925	1,210	1,438	1,755
66	537	702	710	925	983	1,276	1,536	1,862
67	570	735	752	971	1,041	1,338	1,634	1,960
68	607	768	797	1,016	1,099	1,400	1,728	2,058
69	644	814	847	1,070	1,169	1,470	1,844	2,179
70	681	851	896	1,123	1,239	1,549	1,956	2,299
71	661	822	871	1,086	1,206	1,503	1,911	2,241
72	681	843	900	1,111	1,247	1,532	1,982	2,299
73	702	863	929	1,140	1,293	1,574	2,054	2,371
74	723	884	962	1,169	1,334	1,615	2,130	2,442
75	748	909	995	1,198	1,379	1,656	2,210	2,523
76	772	929	1,024	1,231	1,429	1,702	2,282	2,594
77	793	946	1,057	1,251	1,466	1,735	2,344	2,643
78	809	962	1,082	1,276	1,512	1,768	2,393	2,683
79	830	979	1,111	1,297	1,541	1,792	2,429	2,710
80	830	979	1,111	1,297	1,541	1,792	2,429	2,710
81	797	929	1,070	1,235	1,479	1,702	2,295	2,648
82	818	942	1,086	1,251	1,503	1,710	2,295	2,532
83	830	958	1,111	1,272	1,532	1,735	2,308	2,541
84	855	979	1,136	1,297	1,565	1,768	2,340	2,567
85	876	999	1,169	1,330	1,607	1,809	2,371	2,599

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 for Policies Issued Prior to 9/16/2002 - Year 2
Rates per $10 Daily Benefit

	Policy Form: LTC-CD8-MA-PA					**Rider: LTC8-PA-SIP**					**Rider: LTC8-PA-CIP**				
	Base Rates with No Inflation Protection					**Simple Inflation Protection Rider**					**Compound Inflation Protection Rider**				
Issue	**Benefit Period**					**Benefit Period**					**Benefit Period**				
Age	*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	90	105	117	246	70	99	103	107	161	128	169	198	223	286
40	78	100	115	130	268	78	107	112	116	179	140	186	219	248	317
41	83	103	120	134	277	83	112	116	120	188	145	194	227	260	326
42	86	108	125	139	286	87	116	120	124	192	153	202	235	268	339
43	88	110	127	144	299	91	120	124	128	201	157	207	244	277	353
44	90	115	132	149	308	91	124	128	132	205	161	215	252	285	362
45	95	117	137	154	317	95	128	132	136	214	169	223	260	297	375
46	98	122	142	159	326	99	128	136	140	219	173	227	268	306	388
47	100	125	147	164	339	99	132	140	145	228	178	235	277	314	397
48	103	130	149	169	348	103	136	145	149	232	182	244	285	322	411
49	105	132	154	174	357	107	140	149	153	241	190	252	293	335	424
50	110	137	159	178	366	112	145	153	161	246	194	256	301	343	433
51	112	139	164	181	380	112	149	157	165	255	198	264	310	351	446
52	115	144	166	186	388	116	153	161	169	259	207	273	318	363	460
53	117	147	171	191	397	120	157	165	173	268	211	277	326	372	469
54	120	152	176	196	406	124	161	169	178	272	215	285	335	380	482
55	125	154	181	200	420	124	165	173	182	281	219	293	343	388	496
56	134	169	196	220	455	132	173	182	190	295	227	301	355	401	509
57	144	183	213	237	496	136	182	190	198	308	231	310	363	413	522
58	156	196	230	257	536	145	190	198	207	321	240	314	372	421	536
59	166	210	244	274	576	149	198	207	215	335	244	322	384	434	549
60	176	225	261	293	616	157	207	215	223	348	252	330	392	446	563
61	193	244	286	320	674	161	219	235	248	371	256	347	409	463	585
62	208	266	310	349	732	178	231	256	277	393	277	359	425	479	607
63	225	286	335	379	790	182	244	277	301	415	281	372	442	496	630
64	239	308	359	406	853	198	260	297	330	433	297	388	454	516	656
65	254	327	386	435	911	207	273	318	355	455	301	401	471	533	679
66	281	359	423	477	1,000	215	289	339	380	482	310	417	491	558	701
67	303	391	459	518	1,089	231	301	355	401	513	326	430	512	582	741
68	327	423	496	560	1,183	240	318	376	421	536	335	450	529	599	764
69	352	455	533	601	1,273	248	335	392	446	567	347	467	549	624	795
70	374	486	572	643	1,366	264	351	413	467	589	368	487	574	653	822
71	413	535	628	706	1,500	273	363	430	487	621	372	496	586	665	848
72	450	584	687	772	1,639	289	380	450	508	647	388	516	603	681	871
73	489	635	743	836	1,773	297	396	467	529	679	392	525	620	702	902
74	525	684	802	899	1,911	310	413	487	549	705	409	541	640	727	924
75	562	733	858	965	2,058	322	430	508	574	723	417	558	657	743	947
76	613	799	938	1,058	2,246	335	450	525	586	759	430	574	669	752	973
77	665	868	1,017	1,144	2,438	343	458	545	615	790	434	578	690	785	1,000
78	714	934	1,097	1,234	2,634	359	479	566	640	817	446	599	706	801	1,022
79	765	1,002	1,175	1,322	2,826	372	496	586	665	848	458	611	727	826	1,049
80	814	1,073	1,263	1,425	3,041	380	508	591	661	857	467	624	739	838	1,063
81	887	1,168	1,371	1,542	3,309	388	525	620	702	897	471	632	752	855	1,085
82	960	1,266	1,488	1,676	3,594	401	537	636	715	915	479	640	756	859	1,098
83	1,034	1,364	1,603	1,808	3,876	409	549	648	731	942	483	648	768	867	1,116
84	1,107	1,461	1,720	1,943	4,161	417	566	661	743	964	487	657	776	880	1,130
85	1,180	1,562	1,835	2,070	4,447	425	574	677	768	987	491	665	785	888	1,143

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 for Policies Issued Prior to 9/16/2002 - Year 2
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	**Benefit Period**					**Benefit Period**					**Benefit Period**				
Age	*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	139	178	208	232	491	140	190	202	211	326	248	335	396	450	580
41	144	183	215	242	509	145	198	207	219	339	256	347	413	467	598
42	149	191	222	252	527	153	202	215	227	353	264	359	425	483	621
43	154	198	232	259	545	157	211	223	231	366	277	372	442	500	643
44	159	205	239	269	563	161	219	231	240	375	285	384	458	520	665
45	166	210	247	276	580	165	227	240	248	388	293	396	471	537	688
46	171	218	254	286	598	173	231	244	256	402	301	409	487	553	710
47	176	225	261	293	616	178	240	252	264	415	314	421	500	570	732
48	181	232	269	303	634	182	248	260	273	424	322	434	516	586	750
49	186	237	279	313	652	186	256	268	281	438	330	446	533	603	772
50	191	244	286	320	674	194	260	277	289	451	339	458	545	620	795
51	196	252	293	330	692	198	268	285	297	464	351	471	562	636	817
52	200	257	301	337	710	202	277	289	306	473	359	483	574	653	839
53	208	264	308	347	728	211	281	297	310	487	368	496	591	669	862
54	213	271	318	354	746	215	289	306	318	500	376	508	607	686	884
55	218	279	325	364	764	219	297	314	326	513	388	520	620	706	902
56	232	298	349	393	826	227	310	322	339	531	392	529	632	715	915
57	249	320	374	420	884	235	318	335	351	549	401	541	640	727	929
58	266	342	398	450	947	248	330	347	359	567	409	549	653	739	942
59	281	362	425	477	1,005	256	343	359	372	589	417	558	665	752	960
60	298	384	450	506	1,067	264	355	372	384	607	421	566	677	768	973
61	315	408	479	538	1,134	273	363	392	417	625	430	574	681	776	987
62	335	433	508	569	1,206	281	376	417	454	647	434	582	694	785	1,000
63	354	457	535	604	1,273	289	388	442	487	665	442	595	702	797	1,018
64	371	481	565	635	1,344	301	401	467	520	688	450	603	715	809	1,036
65	391	506	594	667	1,415	310	413	491	553	710	458	615	727	822	1,054
66	415	538	631	711	1,505	318	425	504	570	728	463	624	735	834	1,063
67	440	569	670	753	1,598	326	438	520	586	750	471	632	748	843	1,081
68	464	604	709	797	1,692	339	450	533	603	772	479	640	756	855	1,094
69	489	635	745	838	1,786	347	467	549	624	795	487	653	772	871	1,112
70	511	667	784	882	1,880	359	479	566	640	817	496	665	785	888	1,134
71	547	714	838	943	2,005	363	487	574	648	830	496	665	785	888	1,134
72	582	760	890	1,002	2,134	368	496	586	661	844	496	665	789	892	1,139
73	616	804	943	1,063	2,264	376	504	595	673	862	500	669	793	896	1,147
74	653	850	997	1,122	2,393	384	512	607	686	880	504	677	797	904	1,156
75	687	897	1,051	1,183	2,518	392	525	620	702	897	508	681	805	913	1,170
76	731	956	1,122	1,263	2,692	396	533	628	710	911	508	681	809	913	1,170
77	775	1,017	1,193	1,342	2,866	405	541	640	723	924	512	686	809	917	1,174
78	821	1,075	1,263	1,422	3,041	409	553	653	735	942	512	690	814	925	1,179
79	865	1,136	1,334	1,503	3,210	417	562	665	752	960	516	694	822	929	1,188
80	909	1,195	1,405	1,581	3,384	425	574	677	764	982	520	698	830	938	1,201
81	975	1,285	1,510	1,701	3,648	430	578	681	772	987	520	698	826	933	1,197
82	1,044	1,376	1,618	1,821	3,911	434	582	690	781	1,000	516	698	826	933	1,197
83	1,109	1,466	1,723	1,943	4,170	438	591	698	789	1,014	516	698	826	933	1,201
84	1,175	1,557	1,830	2,063	4,434	442	599	706	797	1,027	520	698	826	933	1,201
85	1,244	1,645	1,936	2,182	4,693	446	603	715	809	1,040	520	702	830	938	1,027

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

Comprehensive Policy

Individual Rates for Lifetime Premium Payment Optior
0-Day Elimination Period
Annual Premium Rates for Policies Issued Prior to 9/16/2002 - Year 2
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	**Benefit Period**					**Benefit Period**					**Benefit Period**				
Age	*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	46	54	61	66	147	45	58	70	74	107	83	103	120	128	201
40	49	59	66	73	165	50	62	74	74	107	95	116	136	140	214
41	51	61	71	78	174	54	66	78	78	116	99	124	140	149	223
42	54	66	73	81	183	58	70	83	87	121	107	128	153	157	232
43	59	68	78	86	192	58	74	87	91	129	107	136	157	165	241
44	61	73	83	90	205	62	74	91	95	129	112	136	161	173	246
45	64	76	86	95	214	66	83	99	99	138	116	145	169	178	255
46	66	81	90	98	223	70	83	99	107	143	124	149	178	190	263
47	68	83	95	103	232	74	87	103	112	152	128	157	182	198	272
48	73	88	98	108	241	70	91	112	112	156	128	161	190	202	286
49	76	90	103	112	250	74	95	116	116	165	132	169	194	211	295
50	78	95	108	115	259	78	95	116	124	170	140	173	202	223	304
51	81	98	110	120	268	83	103	124	128	179	145	182	211	227	313
52	83	103	115	125	281	87	103	128	132	179	149	182	215	235	317
53	88	105	120	130	290	87	107	132	136	188	149	190	219	244	326
54	90	110	122	132	299	91	112	136	145	192	157	194	231	252	335
55	93	112	127	137	308	95	116	140	149	201	161	202	235	260	344
56	100	122	137	149	330	99	124	149	157	214	169	211	248	277	357
57	108	130	147	159	357	103	132	157	165	219	173	223	260	297	371
58	112	139	159	171	380	112	140	161	173	232	186	227	264	310	384
59	120	147	169	181	406	116	149	169	182	237	190	240	277	330	397
60	127	156	178	193	429	120	157	178	190	250	198	248	289	347	411
61	137	169	193	208	460	124	161	186	202	263	202	256	297	351	424
62	147	181	205	222	496	132	169	198	211	277	211	260	310	355	438
63	154	191	220	239	527	140	178	202	219	290	219	273	314	355	451
64	164	203	232	254	563	149	186	215	227	304	227	277	326	359	464
65	174	215	247	269	594	153	190	223	240	317	231	285	335	363	478
66	196	242	279	303	670	165	202	240	256	339	244	301	351	384	505
67	218	269	308	335	741	173	219	256	277	366	256	318	372	409	536
68	237	293	340	369	817	190	235	273	297	393	268	339	392	425	563
69	259	320	369	401	889	198	252	289	318	420	281	355	413	450	594
70	281	347	401	435	964	211	264	306	335	442	293	372	430	471	621
71	315	389	447	486	1,085	219	277	322	351	464	301	384	446	487	643
72	347	430	494	538	1,201	231	289	339	368	491	314	396	463	504	670
73	381	469	543	589	1,322	240	306	355	388	518	322	409	475	516	692
74	413	511	589	640	1,438	252	318	372	405	545	335	421	491	533	719
75	447	552	635	692	1,558	260	330	388	421	567	343	434	508	549	741
76	503	623	718	782	1,759	281	355	417	450	598	363	458	537	578	768
77	562	692	804	875	1,960	297	384	442	475	634	380	487	558	603	795
78	618	762	887	965	2,157	314	409	467	508	670	396	512	586	636	830
79	677	831	973	1,058	2,357	330	438	491	533	705	413	541	607	661	857
80	733	902	1,056	1,149	2,558	351	463	520	562	737	434	566	636	690	884
81	799	985	1,151	1,254	2,822	359	475	537	578	764	442	574	644	698	906
82	868	1,070	1,249	1,359	3,085	368	483	553	595	790	446	578	653	710	924
83	934	1,153	1,344	1,461	3,349	376	500	570	615	817	450	591	661	723	947
84	1,002	1,239	1,442	1,566	3,612	384	508	586	632	844	454	595	669	735	964
85	1,068	1,322	1,537	1,672	3,876	392	520	603	648	871	463	603	677	743	987

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

Comprehensive Policy

Individual Rates for Lifetime Premium Payment Optior
0-Day Elimination Period
Annual Premium Rates for Policies Issued Prior to 9/16/2002 - Year 2
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	**Benefit Period**					**Benefit Period**					**Benefit Period**				
Age	*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	49	56	64	68	152	45	58	74	78	112	87	107	124	132	210
40	51	61	68	76	170	50	66	78	78	112	99	120	140	149	223
41	54	64	73	81	183	54	70	83	83	121	103	128	149	157	232
42	56	68	76	83	192	58	74	87	91	125	112	132	161	165	241
43	61	71	81	88	201	62	78	91	95	134	112	140	165	173	250
44	64	76	86	93	214	66	78	95	99	134	116	145	169	182	255
45	66	78	88	100	223	70	87	103	103	143	120	153	178	182	263
46	68	83	93	103	232	74	87	103	112	147	128	157	186	194	272
47	71	86	100	108	241	78	91	107	116	156	132	165	186	207	286
48	76	90	103	112	250	74	95	116	116	165	132	169	194	211	299
49	78	93	108	117	259	78	99	120	120	174	140	178	202	219	308
50	81	100	112	120	268	83	95	120	128	179	149	178	211	231	317
51	83	103	115	125	277	87	107	128	132	188	153	186	219	235	326
52	86	108	120	130	295	91	107	132	136	183	157	186	223	244	326
53	90	110	125	134	304	91	112	136	140	192	157	198	227	252	339
54	93	115	127	137	313	95	116	140	153	196	165	202	240	264	348
55	98	117	132	142	321	95	120	145	157	210	165	211	244	273	357
56	105	127	142	154	344	103	128	157	165	223	173	219	260	289	371
57	112	134	152	166	371	107	136	165	169	228	178	231	273	306	388
58	117	144	166	178	393	116	149	165	178	241	194	235	273	322	402
59	125	152	176	188	424	120	157	173	190	246	198	252	285	343	411
60	132	164	186	200	446	124	161	186	198	259	207	256	301	363	429
61	142	176	200	215	478	128	165	194	211	272	211	264	310	368	442
62	152	188	213	232	513	140	178	207	219	290	219	268	322	368	455
63	161	198	230	249	549	145	186	211	227	299	227	285	326	368	469
64	171	210	242	264	585	153	194	223	235	317	235	289	339	376	482
65	181	225	257	279	616	157	194	231	252	330	240	293	347	380	500
66	203	252	291	315	697	173	211	248	264	353	256	314	363	401	527
67	227	279	320	347	772	178	231	268	289	380	264	330	388	425	554
68	247	305	354	384	848	198	244	281	310	411	277	351	405	442	585
69	269	332	384	418	924	207	264	301	330	438	293	372	430	467	616
70	293	362	418	452	1,005	219	273	318	347	460	301	384	446	491	643
71	327	403	464	506	1,130	227	289	335	363	482	314	401	467	508	665
72	362	447	513	560	1,250	240	301	351	380	509	326	413	483	525	697
73	396	489	565	613	1,375	252	318	368	401	536	335	425	491	537	719
74	430	530	613	665	1,496	260	330	384	421	567	347	438	508	558	746
75	464	574	660	718	1,621	273	343	405	438	589	359	450	529	574	772
76	523	648	748	814	1,831	293	372	434	467	621	380	479	558	599	799
77	584	718	836	909	2,040	310	401	458	496	656	396	508	582	628	826
78	643	792	924	1,004	2,241	326	425	483	529	697	413	533	607	661	866
79	704	865	1,012	1,100	2,451	343	454	512	553	732	430	562	632	690	893
80	762	938	1,097	1,195	2,661	363	479	541	582	768	450	586	661	715	920
81	831	1,024	1,197	1,305	2,933	376	496	558	599	795	458	599	669	723	942
82	902	1,114	1,298	1,413	3,210	384	500	578	620	822	467	599	681	739	960
83	970	1,200	1,398	1,520	3,483	392	520	595	640	848	471	615	686	752	982
84	1,041	1,288	1,501	1,630	3,755	401	529	607	657	880	475	620	694	764	1,005
85	1,109	1,376	1,598	1,738	4,032	409	541	628	677	906	483	624	706	776	1,027

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

Comprehensive Policy

Individual Rates for Lifetime Premium Payment Optior
0-Day Elimination Period
Annual Premium Rates for Policies Issued Prior to 9/16/2002 - Year 2
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	**Benefit Period**					**Benefit Period**					**Benefit Period**				
Age	*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	83	196	54	70	83	87	129	99	124	149	157	228
40	61	73	83	90	210	66	78	95	99	147	116	145	169	178	259
41	66	78	88	95	223	66	83	99	107	156	120	149	178	186	268
42	68	83	93	103	237	74	87	107	107	161	124	153	182	190	281
43	73	88	100	108	250	74	91	107	116	170	128	161	186	198	290
44	76	93	105	112	263	78	91	112	120	174	136	165	194	207	299
45	81	98	110	120	281	83	95	116	124	179	136	169	202	211	304
46	83	100	115	125	295	87	103	124	128	188	145	178	207	219	317
47	88	105	120	130	308	87	107	128	136	192	149	182	215	227	326
48	90	110	127	137	321	91	112	128	136	201	153	190	219	231	335
49	95	115	132	142	335	95	116	132	145	205	157	194	223	240	344
50	100	120	137	149	348	95	120	140	149	214	161	198	231	248	357
51	103	125	142	154	362	99	120	145	153	223	165	202	240	256	366
52	108	130	147	159	375	103	124	149	161	228	169	207	244	264	375
53	110	134	154	166	388	107	128	149	161	237	173	215	248	268	384
54	115	139	159	171	402	107	132	157	169	241	178	219	256	277	397
55	117	144	164	176	420	116	136	161	173	246	186	223	264	285	402
56	122	147	169	183	433	116	145	165	178	255	186	231	268	289	411
57	125	152	174	188	446	120	145	169	182	259	194	235	277	297	420
58	130	156	181	193	460	120	149	173	190	268	198	244	281	306	433
59	132	161	186	200	473	128	153	178	190	272	202	248	285	310	442
60	137	166	191	205	487	128	157	182	198	281	207	252	293	318	451
61	149	181	208	225	531	132	165	190	207	295	211	260	301	326	464
62	161	196	225	242	576	140	173	198	219	308	219	268	310	339	482
63	171	210	242	261	616	149	182	211	227	330	227	277	322	351	500
64	183	225	259	279	661	157	190	219	240	344	235	285	330	363	518
65	196	239	276	298	705	161	198	227	248	357	240	293	339	372	531
66	218	266	305	330	786	169	211	244	268	380	248	306	355	392	558
67	237	291	335	364	862	182	227	260	281	406	264	322	376	409	585
68	259	318	367	396	942	194	235	273	301	429	273	339	388	425	612
69	279	342	396	430	1,018	207	252	289	314	455	289	355	409	442	638
70	301	369	425	462	1,098	215	264	306	335	478	297	368	425	463	665
71	335	413	474	516	1,228	227	277	326	355	505	310	380	446	483	692
72	371	455	525	569	1,357	235	293	339	372	531	318	396	458	500	719
73	406	499	574	623	1,487	252	310	359	392	558	335	413	479	520	746
74	442	540	626	677	1,616	260	326	372	409	585	343	430	491	537	772
75	477	584	674	731	1,746	273	339	392	430	612	355	442	512	558	799
76	535	657	758	821	1,969	289	359	421	458	647	372	463	537	586	835
77	594	728	841	914	2,188	306	384	450	483	688	388	483	562	611	875
78	650	802	926	1,004	2,411	322	401	471	508	728	405	504	586	636	915
79	709	872	1,009	1,097	2,630	339	425	500	533	768	421	525	611	661	955
80	767	946	1,092	1,188	2,853	355	446	529	562	804	438	545	636	690	991
81	836	1,031	1,190	1,295	3,117	363	458	545	578	830	442	553	644	698	1,005
82	904	1,117	1,290	1,403	3,380	372	471	562	595	853	450	562	648	706	1,022
83	975	1,205	1,388	1,510	3,648	376	475	578	615	875	450	566	661	710	1,031
84	1,044	1,290	1,488	1,618	3,911	384	487	595	632	897	458	574	665	719	1,049
85	1,112	1,376	1,586	1,725	4,175	392	500	611	648	924	463	582	673	727	1,063

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

Comprehensive Policy

Individual Rates for Lifetime Premium Payment Optior
0-Day Elimination Period
Annual Premium Rates for Policies Issued Prior to 9/16/2002 - Year 2
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	**Benefit Period**					**Benefit Period**					**Benefit Period**				
Age	*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	71	81	86	205	54	74	87	91	134	103	128	157	165	237
40	64	76	86	93	219	70	83	99	103	152	120	153	178	186	268
41	68	81	90	100	232	70	87	103	112	161	124	157	186	190	277
42	71	86	98	108	246	78	91	112	112	170	128	161	186	198	295
43	76	90	105	112	259	78	95	112	120	179	132	169	190	207	304
44	78	98	110	117	272	83	91	116	124	183	145	169	202	215	313
45	83	103	115	125	295	87	99	120	128	183	145	173	211	219	313
46	86	105	120	130	308	91	107	128	132	192	153	182	215	227	326
47	90	110	125	134	321	91	112	132	140	196	157	186	223	235	339
48	93	115	132	142	335	95	116	132	145	210	161	198	227	240	348
49	100	120	137	147	348	95	120	136	153	214	161	202	231	252	357
50	105	125	142	154	362	99	124	149	157	223	165	207	240	260	371
51	108	130	147	161	375	103	124	153	157	232	169	211	252	264	384
52	112	134	152	166	388	107	128	157	165	237	173	215	256	273	393
53	115	139	161	174	402	112	132	153	165	250	178	223	256	277	402
54	120	144	166	178	420	112	140	161	173	250	186	227	264	285	411
55	122	149	171	183	438	120	145	165	182	255	194	235	273	297	415
56	127	152	176	191	451	120	153	169	186	263	194	244	277	301	429
57	130	156	181	196	464	124	153	173	190	268	202	248	289	310	438
58	134	164	188	200	478	124	153	182	198	281	207	252	293	318	451
59	137	169	193	208	491	132	157	186	198	286	211	256	297	322	460
60	142	174	198	213	505	132	161	190	207	295	215	260	306	330	469
61	154	188	215	235	554	140	173	198	215	304	219	268	314	339	482
62	169	203	235	252	598	145	182	207	227	321	227	281	322	351	500
63	178	218	252	271	643	153	190	219	235	339	235	289	335	368	518
64	191	235	269	291	688	165	198	227	248	357	244	293	343	376	540
65	203	249	288	310	732	169	207	235	256	375	252	306	351	384	554
66	227	276	318	342	817	173	219	252	281	393	256	318	368	409	580
67	247	303	347	379	897	190	235	273	293	420	273	335	392	425	607
68	269	330	381	411	978	202	244	285	314	446	285	351	405	446	638
69	291	357	411	447	1,058	215	260	301	326	473	297	368	425	458	665
70	313	384	442	481	1,143	223	277	318	347	496	310	384	442	479	692
71	347	430	494	535	1,277	240	285	339	372	527	322	392	463	504	719
72	386	472	547	591	1,411	244	306	351	388	554	330	413	475	520	750
73	423	518	596	648	1,545	260	322	376	409	580	347	430	500	541	777
74	459	562	650	704	1,679	273	339	388	425	612	359	446	512	558	804
75	496	609	701	760	1,817	281	351	409	446	634	368	458	533	578	830
76	557	684	787	853	2,049	301	372	438	479	670	384	479	562	611	866
77	618	758	875	951	2,277	318	401	467	504	714	401	504	582	636	906
78	677	833	963	1,044	2,509	335	417	491	529	755	421	525	611	665	951
79	738	907	1,051	1,141	2,737	351	442	516	553	795	438	545	632	686	991
80	799	982	1,136	1,234	2,969	368	467	549	586	835	454	570	661	719	1,027
81	870	1,073	1,237	1,347	3,242	376	475	570	603	862	458	574	673	727	1,045
82	941	1,161	1,342	1,459	3,514	384	491	586	620	889	467	586	673	735	1,063
83	1,014	1,254	1,444	1,571	3,795	392	491	599	640	911	467	586	686	739	1,072
84	1,085	1,342	1,547	1,681	4,068	401	508	620	661	933	479	599	694	748	1,089
85	1,156	1,432	1,650	1,794	4,340	409	516	636	677	964	483	603	698	756	1,107

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 for Policies Issued Prior to 9/16/2002 - Year 2
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	**Benefit Period**					**Benefit Period**					**Benefit Period**				
Age	*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	83	100	115	122	290	107	132	153	169	241	207	260	301	330	469
41	88	108	122	130	308	116	140	161	182	255	219	273	318	351	491
42	93	112	130	139	326	120	149	173	190	263	231	293	339	368	513
43	98	120	137	147	339	128	157	182	202	281	248	306	355	392	540
44	105	125	144	154	357	132	169	194	215	295	256	326	376	413	567
45	110	132	152	161	375	140	178	202	227	308	268	339	392	434	589
46	115	139	159	171	393	145	182	215	235	317	281	351	413	450	612
47	120	144	166	178	411	153	194	223	248	330	293	372	430	471	634
48	125	152	174	186	424	161	202	235	256	348	310	384	450	496	661
49	130	156	181	193	442	169	215	244	268	362	322	405	467	516	683
50	134	164	188	203	460	173	219	256	277	371	335	417	487	533	705
51	139	171	196	210	478	182	227	264	289	384	347	430	504	553	728
52	147	176	203	218	496	186	240	277	301	397	355	450	525	574	755
53	152	183	210	225	509	194	248	285	314	415	372	463	541	599	781
54	156	188	218	235	527	198	256	297	322	424	384	483	562	615	804
55	161	196	225	242	545	207	264	306	335	438	396	496	578	636	826
56	171	208	239	257	576	215	273	314	347	455	405	508	591	653	853
57	181	220	254	271	607	223	285	326	359	473	413	520	603	669	875
58	188	232	266	288	643	235	293	339	372	482	430	533	620	677	897
59	198	244	281	303	674	244	306	351	384	500	438	545	632	694	920
60	208	257	296	318	705	252	314	359	396	518	446	558	644	710	947
61	218	269	310	335	741	256	322	368	405	531	446	562	648	715	951
62	230	283	325	352	781	256	326	376	413	536	442	562	653	719	951
63	239	296	342	369	817	264	335	384	421	549	442	570	657	719	955
64	252	310	357	386	857	264	339	392	430	554	438	570	661	723	955
65	261	323	371	403	893	268	347	401	438	567	438	574	665	727	960
66	288	349	403	440	973	268	359	413	450	585	434	578	669	727	960
67	315	379	435	474	1,049	273	368	425	463	607	434	578	673	731	964
68	342	406	469	511	1,130	273	376	438	475	625	430	582	673	731	969
69	369	435	501	545	1,206	277	384	450	487	647	430	582	677	735	973
70	396	462	533	582	1,286	277	396	463	500	665	425	586	681	735	973
71	423	501	577	628	1,406	289	401	471	508	670	430	582	677	735	964
72	450	538	621	677	1,527	301	409	479	516	674	438	582	677	731	960
73	474	577	665	723	1,643	314	417	483	525	679	446	582	673	731	955
74	501	613	709	772	1,764	326	425	491	533	683	454	582	673	727	951
75	528	653	753	819	1,884	339	430	500	541	688	458	578	669	727	942
76	582	721	833	907	2,067	351	446	516	558	714	467	591	681	739	960
77	635	792	914	992	2,246	363	458	533	582	750	475	595	690	756	982
78	692	860	992	1,080	2,429	376	471	553	599	777	483	607	706	764	1,005
79	745	931	1,073	1,166	2,608	388	483	570	624	813	491	611	715	781	1,027
80	799	1,000	1,153	1,254	2,791	401	500	586	640	839	500	624	727	793	1,045
81	860	1,075	1,241	1,351	3,036	405	508	595	648	853	500	628	731	797	1,027
82	921	1,151	1,329	1,447	3,277	409	512	603	661	871	500	628	735	809	1,009
83	982	1,229	1,417	1,544	3,523	417	516	615	665	889	496	628	743	814	991
84	1,044	1,305	1,505	1,640	3,764	421	520	624	677	906	496	628	748	826	973
85	1,105	1,381	1,593	1,738	4,010	425	529	632	686	920	496	632	752	830	955

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 for Policies Issued Prior to 9/16/2002 - Year 2
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	**Benefit Period**					**Benefit Period**					**Benefit Period**				
Age	*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	86	105	120	127	304	112	136	157	178	250	215	268	314	343	487
41	90	112	127	134	321	124	145	169	190	263	231	281	330	368	509
42	98	117	134	144	339	124	153	182	198	272	240	306	351	384	536
43	103	125	142	152	353	132	161	190	211	295	256	318	372	409	563
44	110	130	149	161	371	136	178	202	223	308	264	339	392	430	589
45	115	137	156	169	388	145	186	211	235	321	277	351	409	450	616
46	120	144	166	178	411	149	190	223	244	326	293	368	430	467	634
47	125	149	174	186	429	157	202	231	256	344	306	388	446	487	656
48	130	156	181	193	442	169	211	244	268	362	322	401	467	516	688
49	134	164	188	200	460	178	223	252	281	375	335	417	483	537	710
50	139	171	196	210	478	182	227	268	289	384	347	434	508	553	732
51	144	178	203	218	496	190	235	277	301	402	363	446	525	578	759
52	152	183	210	227	513	194	248	289	310	415	372	467	545	595	786
53	156	191	218	235	531	202	256	297	326	429	388	479	566	620	813
54	164	196	227	244	549	202	268	306	335	442	396	504	582	640	835
55	169	203	235	252	567	215	277	318	347	455	409	516	599	661	857
56	178	215	249	266	598	223	285	326	363	473	421	529	615	681	889
57	188	230	264	281	630	231	293	339	376	496	430	541	628	698	911
58	196	242	276	301	670	244	306	355	384	500	446	553	644	702	933
59	205	254	293	315	701	256	318	363	401	522	454	566	657	723	955
60	215	266	308	330	732	264	326	372	413	540	467	582	669	739	987
61	227	279	323	347	772	264	339	384	421	549	463	586	673	743	987
62	239	296	337	367	813	264	339	392	430	558	458	582	681	748	991
63	249	308	357	384	848	273	347	396	438	572	458	591	681	748	996
64	261	323	371	401	893	277	351	409	446	576	454	595	686	752	991
65	271	335	386	420	929	281	363	417	454	589	458	599	694	756	1,000
66	301	364	420	457	1,014	277	372	430	471	607	450	599	694	756	996
67	327	393	452	494	1,089	285	384	442	479	634	450	603	702	760	1,005
68	357	423	489	530	1,174	281	388	454	496	652	446	603	698	760	1,009
69	384	452	521	567	1,255	289	401	471	508	674	446	607	706	764	1,014
70	411	481	555	606	1,339	289	409	479	516	688	446	607	706	764	1,009
71	440	521	599	653	1,465	301	417	491	529	697	446	607	706	764	1,000
72	467	560	645	704	1,590	314	425	500	537	701	458	603	706	760	996
73	494	599	692	753	1,710	326	434	504	545	705	463	607	698	760	991
74	521	638	738	804	1,835	339	442	508	553	710	475	607	698	756	987
75	550	679	782	850	1,960	351	446	520	566	714	475	599	698	756	978
76	606	750	868	943	2,152	363	463	537	578	741	483	615	706	768	996
77	660	824	951	1,031	2,335	380	475	553	607	781	496	620	719	789	1,022
78	718	894	1,031	1,124	2,527	392	491	578	620	808	504	632	735	793	1,045
79	775	968	1,117	1,212	2,710	405	504	591	648	848	512	636	739	814	1,072
80	831	1,039	1,200	1,305	2,902	417	520	611	665	875	520	648	756	822	1,085
81	894	1,119	1,290	1,405	3,157	421	529	620	673	889	520	653	760	830	1,067
82	958	1,197	1,383	1,505	3,407	425	533	628	686	906	520	653	764	843	1,049
83	1,022	1,278	1,474	1,606	3,666	434	537	640	694	924	516	653	772	847	1,027
84	1,085	1,356	1,566	1,706	3,916	438	541	648	702	942	516	653	776	859	1,009
85	1,149	1,437	1,657	1,806	4,170	442	549	657	715	955	516	657	781	863	991

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 for Policies Issued Prior to 9/16/2002 - Year 2
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	**Benefit Period**					**Benefit Period**					**Benefit Period**				
Age	*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	105	127	144	154	366	132	165	190	215	304	260	318	368	409	576
41	110	134	152	164	388	140	173	202	223	317	273	330	384	421	598
42	117	142	161	174	411	145	182	207	231	330	281	343	396	438	616
43	122	149	169	181	433	153	186	219	244	344	289	355	413	454	638
44	130	156	178	191	451	157	194	223	252	357	297	368	421	471	665
45	134	164	186	200	473	165	202	235	260	371	310	380	438	483	683
46	142	171	196	210	496	169	211	244	268	384	318	388	450	496	705
47	147	178	203	218	518	178	219	252	281	397	330	401	467	516	728
48	154	186	213	227	540	182	223	260	289	411	335	413	479	529	746
49	159	193	220	237	563	190	231	268	297	424	347	425	496	545	768
50	166	200	230	247	585	194	240	277	310	438	355	438	508	558	790
51	171	205	237	254	603	198	252	289	322	451	368	454	520	574	813
52	176	213	244	264	625	207	260	297	330	464	380	467	537	591	835
53	183	220	254	274	647	211	264	306	339	478	384	479	549	603	853
54	188	227	261	283	670	219	273	314	347	491	396	491	566	620	875
55	196	235	271	291	692	223	281	322	359	505	405	504	578	636	897
56	200	242	279	301	714	231	289	335	368	518	417	512	595	648	915
57	208	249	288	310	732	235	297	339	376	531	425	525	603	665	942
58	213	257	296	320	755	244	301	351	384	545	434	537	620	677	964
59	220	264	305	327	777	248	310	355	396	558	442	549	632	698	982
60	225	271	313	337	799	256	318	368	405	572	454	562	648	710	1,005
61	237	288	332	357	848	260	322	372	413	580	454	558	644	710	1,000
62	249	303	349	376	897	264	326	380	417	589	454	558	644	706	996
63	264	320	369	398	942	268	330	384	421	598	446	553	640	702	1,000
64	276	335	386	418	991	273	335	392	425	607	446	553	640	698	996
65	288	352	406	437	1,040	277	339	396	434	616	446	549	636	698	991
66	320	379	437	472	1,121	268	347	405	446	634	430	553	640	702	1,000
67	352	406	467	506	1,206	256	359	421	458	652	417	558	644	702	1,000
68	381	433	499	540	1,286	252	368	430	467	670	405	558	648	706	1,009
69	413	459	528	574	1,371	240	380	446	479	688	392	562	653	706	1,009
70	445	486	560	609	1,451	231	388	454	491	705	376	566	657	710	1,018
71	469	528	606	660	1,572	252	396	463	500	723	392	570	661	715	1,027
72	491	567	653	711	1,697	277	409	475	512	732	413	574	669	719	1,031
73	516	609	701	760	1,817	301	413	479	525	750	434	578	669	731	1,040
74	538	648	748	811	1,942	326	425	491	537	759	454	582	677	735	1,045
75	562	689	794	863	2,063	347	434	500	545	777	471	586	681	739	1,054
76	616	758	875	948	2,273	359	450	516	566	804	479	595	686	748	1,067
77	672	826	953	1,036	2,483	372	463	541	582	835	479	599	698	756	1,081
78	726	897	1,034	1,122	2,692	384	475	558	603	862	487	603	702	764	1,094
79	782	965	1,112	1,210	2,902	396	487	582	620	893	487	607	715	772	1,107
80	836	1,034	1,193	1,295	3,112	409	504	599	640	920	496	615	719	781	1,121
81	897	1,112	1,283	1,393	3,353	413	508	607	648	933	496	615	719	781	1,089
82	958	1,190	1,373	1,493	3,594	421	516	615	657	942	500	615	719	776	1,054
83	1,022	1,266	1,461	1,591	3,831	421	525	624	665	960	496	620	727	781	1,027
84	1,083	1,344	1,552	1,691	4,072	430	533	632	673	969	500	620	727	776	991
85	1,144	1,422	1,642	1,789	4,313	434	537	640	681	982	500	620	727	776	960

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 for Policies Issued Prior to 9/16/2002 - Year 2
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	**Benefit Period**					**Benefit Period**					**Benefit Period**				
Age	*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	110	132	149	161	380	136	173	198	223	317	268	330	384	421	598
41	115	139	156	171	402	145	182	211	231	330	281	343	401	438	625
42	122	147	169	181	429	149	190	215	240	344	293	359	409	454	638
43	127	154	176	188	451	157	194	227	252	357	301	372	430	471	665
44	134	164	186	198	469	165	198	231	264	371	310	380	438	491	692
45	139	171	193	208	491	173	211	244	273	388	322	392	454	504	710
46	147	178	203	218	513	178	219	256	281	402	330	405	471	516	737
47	152	186	210	227	540	186	227	264	289	411	347	417	487	537	755
48	161	193	220	237	563	186	231	273	301	429	347	430	500	549	777
49	166	200	230	247	585	194	240	277	310	442	359	442	512	566	799
50	174	208	239	257	607	202	252	285	322	455	368	458	529	578	822
51	178	213	247	264	625	207	264	301	335	469	380	475	541	599	848
52	183	220	254	274	652	215	273	310	347	482	396	487	558	615	866
53	191	230	264	283	674	219	273	318	355	496	401	496	570	628	884
54	196	237	271	296	697	227	281	326	359	509	413	508	591	644	911
55	203	244	281	303	719	231	293	339	372	527	421	525	603	661	933
56	208	252	291	313	741	244	301	347	380	540	434	533	615	673	955
57	215	259	301	323	764	248	310	351	392	549	446	545	628	694	978
58	220	266	308	332	786	256	314	363	401	567	454	558	644	706	1,000
59	230	274	318	340	808	256	322	368	413	580	458	574	657	727	1,022
60	235	281	325	352	830	264	335	384	417	594	471	586	673	735	1,045
61	247	301	345	371	884	268	335	388	430	603	471	578	673	739	1,040
62	259	315	364	391	933	277	339	392	434	612	471	578	669	735	1,036
63	274	332	384	415	978	281	343	401	438	625	467	578	665	727	1,040
64	288	347	401	435	1,031	281	351	409	442	630	463	578	669	727	1,036
65	301	367	423	455	1,081	285	351	409	450	643	463	570	661	727	1,031
66	332	393	455	491	1,165	281	363	421	463	661	446	578	665	731	1,040
67	367	423	486	525	1,255	264	372	438	479	679	434	578	669	731	1,040
68	396	450	518	562	1,339	264	384	446	483	697	421	578	673	735	1,049
69	430	479	550	596	1,424	248	392	463	500	714	409	582	677	735	1,049
70	462	506	582	633	1,509	244	405	475	512	732	392	586	686	739	1,058
71	489	550	631	687	1,634	260	409	479	520	755	405	591	686	743	1,067
72	511	589	679	740	1,764	289	425	491	533	764	430	599	694	748	1,072
73	535	633	728	789	1,889	314	430	500	549	781	454	603	698	764	1,085
74	560	674	777	843	2,018	339	442	512	558	790	471	603	706	764	1,089
75	584	716	826	897	2,143	363	450	520	566	808	491	611	710	768	1,098
76	640	787	909	987	2,362	376	471	537	586	839	500	620	715	776	1,112
77	699	860	992	1,078	2,581	388	479	562	607	871	500	620	723	785	1,125
78	755	934	1,075	1,166	2,800	401	491	578	628	897	508	628	731	797	1,139
79	814	1,004	1,156	1,259	3,018	413	508	607	644	929	508	632	743	801	1,152
80	870	1,075	1,241	1,347	3,237	425	525	620	665	955	512	640	743	814	1,165
81	934	1,156	1,334	1,449	3,487	430	529	632	673	969	512	640	748	809	1,134
82	997	1,237	1,427	1,552	3,737	438	537	640	686	982	520	640	748	809	1,098
83	1,063	1,317	1,520	1,654	3,983	438	545	648	690	1,000	516	644	756	814	1,072
84	1,127	1,398	1,613	1,760	4,233	446	553	661	698	1,009	520	644	756	805	1,031
85	1,190	1,479	1,708	1,860	4,487	450	558	665	710	1,018	520	644	756	809	996

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 for Policies Issued Prior to 9/16/2002 - Year 3
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		
Issue	**Benefit Period**			**Benefit Period**			**Benefit Period**		
Age	*1 Year*	*2 Years*	*3 Years*	*1 Year*	*2 Years*	*3 Years*	*1 Year*	*2 Years*	*3 Years*
<45	20	24	27	10	14	19	34	53	68
45	22	24	27	10	19	24	34	58	77
46	22	27	29	10	19	24	39	58	82
47	22	27	32	14	24	29	43	68	82
48	24	29	34	14	24	29	43	68	87
49	24	32	34	19	24	39	48	72	97
50	27	32	37	19	34	39	48	82	106
51	27	34	42	24	34	39	53	87	106
52	29	37	44	24	39	48	53	92	116
53	32	39	46	24	43	53	58	97	126
54	32	44	51	29	43	58	63	97	130
55	34	46	54	34	48	68	68	106	140
56	37	49	59	39	58	72	72	116	150
57	39	54	64	39	63	82	77	121	159
58	44	59	71	39	68	87	77	130	169
59	46	64	78	48	77	97	87	140	179
60	51	71	86	48	82	106	87	145	188
61	56	78	95	58	92	126	97	159	213
62	61	86	108	68	111	140	111	179	232
63	66	98	120	77	121	159	126	193	256
64	73	108	134	87	135	179	135	217	280
65	83	122	154	97	155	198	145	237	304
66	93	139	174	106	169	222	159	251	333
67	105	156	196	111	184	242	169	275	358
68	117	176	220	121	203	266	179	295	387
69	132	200	252	135	222	290	193	314	411
70	147	227	286	150	242	319	213	333	440
71	154	237	301	150	242	319	213	333	440
72	174	266	337	155	256	338	217	343	449
73	193	298	376	164	271	362	217	358	474
74	213	330	418	179	290	387	232	377	493
75	237	369	467	184	304	406	237	387	512
76	261	408	518	198	324	430	246	406	536
77	288	452	572	203	338	454	256	416	556
78	318	496	628	213	353	478	261	435	575
79	345	540	684	222	372	498	266	449	599
80	347	543	687	222	372	498	266	449	599
81	374	587	740	222	377	507	271	449	599
82	403	633	797	227	377	507	271	454	609
83	435	679	855	227	391	527	271	454	609
84	469	736	924	237	401	541	275	459	619
85	506	794	997	246	416	561	285	474	638

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 for Policies Issued Prior to 9/16/2002 - Year 3
Rates per $20 NCF

Issue	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:	
Age	50%	100%	50%	100%	50%	100%	50%	100%
<40	64	95	78	120	100	154	238	359
40	68	100	83	127	105	164	254	380
41	71	105	88	134	112	174	269	401
42	76	112	93	142	117	183	285	428
43	78	117	98	149	125	196	306	454
44	83	125	105	159	132	208	322	481
45	88	132	110	169	142	220	343	512
46	93	139	117	178	149	232	364	544
47	98	149	125	188	159	247	391	581
48	105	156	132	200	169	261	417	618
49	110	166	139	213	178	276	444	655
50	117	176	149	225	191	293	475	697
51	125	188	159	239	203	313	507	745
52	134	200	169	254	218	332	544	792
53	142	213	181	271	232	354	586	850
54	152	227	193	291	249	376	628	908
55	164	242	205	310	266	403	676	972
56	174	257	222	330	286	430	729	1,040
57	186	276	237	352	308	459	787	1,114
58	200	293	257	376	330	489	850	1,194
59	215	315	274	403	354	523	919	1,283
60	232	337	296	433	384	562	993	1,384
61	254	367	325	469	418	609	1,093	1,505
62	279	398	354	508	457	657	1,204	1,637
63	305	433	389	552	501	714	1,326	1,785
64	337	472	428	599	550	772	1,458	1,944
65	379	525	479	665	616	853	1,642	2,155
66	418	569	528	721	679	926	1,811	2,350
67	459	621	582	784	748	1,007	2,002	2,572
68	503	674	638	853	821	1,092	2,208	2,799
69	560	740	709	936	912	1,200	2,456	3,084
70	621	814	787	1,026	1,009	1,312	2,725	3,385
71	643	831	811	1,048	1,041	1,339	2,804	3,454
72	709	909	894	1,144	1,146	1,457	3,084	3,766
73	777	987	982	1,244	1,256	1,581	3,385	4,093
74	850	1,068	1,073	1,344	1,373	1,708	3,702	4,436
75	931	1,161	1,175	1,459	1,505	1,852	4,051	4,811
76	1,014	1,254	1,283	1,574	1,640	1,999	4,405	5,186
77	1,097	1,344	1,388	1,686	1,774	2,136	4,737	5,535
78	1,183	1,435	1,498	1,796	1,909	2,270	5,075	5,873
79	1,266	1,520	1,606	1,904	2,041	2,400	5,382	6,174
80	1,266	1,520	1,606	1,904	2,041	2,400	5,382	6,174
81	1,339	1,576	1,694	1,967	2,131	2,454	5,540	6,248
82	1,427	1,667	1,806	2,080	2,261	2,581	5,831	6,533
83	1,527	1,767	1,926	2,202	2,395	2,715	6,121	6,823
84	1,637	1,879	2,063	2,344	2,556	2,879	6,475	7,183
85	1,762	2,009	2,214	2,505	2,737	3,067	6,871	7,600

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 for Policies Issued Prior to 9/16/2002 - Year 3
Rates per $20 NCF

Issue	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:	
Age	50%	100%	50%	100%	50%	100%	50%	100%
<40	63	97	82	135	116	198	153	238
40	63	106	87	145	126	208	164	254
41	68	116	92	150	130	222	174	275
42	72	121	97	164	145	237	190	290
43	77	130	106	174	150	251	201	312
44	82	135	111	184	164	266	217	333
45	87	145	121	193	169	280	232	354
46	97	155	126	208	184	300	248	375
47	101	159	135	222	193	314	264	396
48	106	174	145	237	208	333	285	423
49	116	184	159	251	227	358	306	454
50	126	198	169	266	237	382	333	486
51	135	208	179	285	256	401	359	518
52	140	217	193	300	271	425	386	560
53	155	237	208	319	295	454	417	592
54	164	246	222	338	314	483	454	634
55	174	266	242	358	338	512	486	681
56	193	285	256	387	362	541	528	729
57	208	300	275	411	387	575	570	782
58	222	324	295	435	416	619	618	840
59	237	338	319	459	445	652	671	898
60	256	362	338	488	474	686	729	956
61	280	396	372	532	527	744	808	1,051
62	309	425	411	575	575	807	887	1,141
63	338	464	449	619	628	865	972	1,236
64	362	498	483	667	681	933	1,067	1,336
65	401	536	536	715	749	1,005	1,167	1,452
66	435	580	575	768	807	1,073	1,268	1,563
67	469	614	619	821	865	1,140	1,373	1,674
68	503	652	667	865	933	1,208	1,473	1,785
69	541	701	720	928	1,005	1,290	1,600	1,917
70	585	739	778	991	1,087	1,377	1,722	2,049
71	575	730	768	971	1,073	1,343	1,711	2,017
72	604	759	807	1,010	1,131	1,406	1,806	2,113
73	638	792	850	1,049	1,189	1,464	1,896	2,208
74	662	821	889	1,092	1,247	1,522	1,991	2,303
75	696	855	933	1,136	1,305	1,580	2,091	2,403
76	730	884	976	1,179	1,372	1,643	2,186	2,503
77	754	908	1,015	1,213	1,421	1,691	2,271	2,572
78	783	933	1,053	1,252	1,479	1,740	2,340	2,635
79	812	957	1,092	1,281	1,527	1,778	2,398	2,683
80	812	957	1,092	1,281	1,527	1,778	2,398	2,683
81	788	923	1,068	1,237	1,483	1,706	2,282	2,609
82	817	947	1,097	1,266	1,522	1,735	2,313	2,561
83	841	971	1,131	1,295	1,566	1,773	2,345	2,588
84	870	1,000	1,165	1,334	1,609	1,817	2,392	2,630
85	899	1,029	1,208	1,372	1,662	1,870	2,445	2,678

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 for Policies Issued Prior to 9/16/2002 - Year 3
Rates per $20 NCF

Issue	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:	
Age	50%	100%	50%	100%	50%	100%	50%	100%
<40	159	242	213	329	300	469	423	607
40	164	256	222	343	314	488	444	634
41	174	266	232	358	324	507	465	665
42	179	275	242	372	343	532	491	697
43	193	290	256	391	358	551	512	724
44	198	300	266	406	377	570	539	755
45	208	314	280	420	391	594	565	787
46	217	329	290	435	411	619	592	824
47	227	338	300	454	425	643	618	856
48	237	353	314	474	445	667	650	893
49	251	367	333	493	469	696	687	935
50	261	382	348	512	488	725	718	977
51	271	396	362	532	507	749	755	1,014
52	280	411	377	556	532	778	787	1,062
53	300	430	396	575	556	807	824	1,104
54	309	445	416	594	575	841	866	1,151
55	324	459	435	619	604	865	908	1,199
56	338	483	449	643	628	899	956	1,252
57	358	498	474	672	657	933	1,003	1,310
58	372	522	493	696	691	971	1,056	1,368
59	391	541	517	720	720	1,010	1,109	1,426
60	411	561	541	749	749	1,044	1,167	1,484
61	445	604	585	797	817	1,111	1,268	1,595
62	478	643	633	855	875	1,189	1,363	1,706
63	512	686	677	908	937	1,256	1,468	1,822
64	546	725	725	962	1,005	1,334	1,579	1,938
65	594	773	783	1,024	1,082	1,416	1,701	2,076
66	628	821	831	1,082	1,150	1,493	1,817	2,202
67	667	860	879	1,136	1,218	1,566	1,933	2,318
68	710	899	933	1,189	1,285	1,638	2,044	2,435
69	754	952	991	1,252	1,368	1,720	2,181	2,577
70	797	995	1,049	1,314	1,450	1,812	2,313	2,720
71	773	962	1,020	1,271	1,411	1,759	2,260	2,651
72	797	986	1,053	1,300	1,459	1,793	2,345	2,720
73	821	1,010	1,087	1,334	1,512	1,841	2,429	2,804
74	846	1,034	1,126	1,368	1,561	1,889	2,519	2,889
75	875	1,063	1,165	1,401	1,614	1,938	2,614	2,984
76	904	1,087	1,198	1,440	1,672	1,991	2,699	3,068
77	928	1,107	1,237	1,464	1,715	2,030	2,773	3,127
78	947	1,126	1,266	1,493	1,769	2,068	2,831	3,174
79	971	1,145	1,300	1,517	1,802	2,097	2,873	3,206
80	971	1,145	1,300	1,517	1,802	2,097	2,873	3,206
81	933	1,087	1,252	1,445	1,730	1,991	2,715	3,132
82	957	1,102	1,271	1,464	1,759	2,001	2,715	2,995
83	971	1,121	1,300	1,488	1,793	2,030	2,730	3,005
84	1,000	1,145	1,329	1,517	1,831	2,068	2,767	3,037
85	1,024	1,169	1,368	1,556	1,880	2,116	2,804	3,074

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 for Policies Issued Prior to 9/16/2002 - Year 3
Rates per $10 Daily Benefit

	Policy Form: LTC-CD8-MA-PA					**Rider: LTC8-PA-SIP**					**Rider: LTC8-PA-CIP**				
	Base Rates with No Inflation Protection					**Simple Inflation Protection Rider**					**Compound Inflation Protection Rider**				
Issue	**Benefit Period**					**Benefit Period**					**Benefit Period**				
Age	*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	90	105	117	290	82	116	121	126	190	150	198	232	261	338
40	78	100	115	130	317	92	126	130	135	211	164	217	256	290	375
41	83	103	120	134	327	97	130	135	140	222	169	227	266	304	386
42	86	108	125	139	338	101	135	140	145	227	179	237	275	314	401
43	88	110	127	144	354	106	140	145	150	238	184	242	285	324	417
44	90	115	132	149	364	106	145	150	155	243	188	251	295	333	428
45	95	117	137	154	375	111	150	155	159	254	198	261	304	348	444
46	98	122	142	159	386	116	150	159	164	259	203	266	314	358	459
47	100	125	147	164	401	116	155	164	169	269	208	275	324	367	470
48	103	130	149	169	412	121	159	169	174	275	213	285	333	377	486
49	105	132	154	174	423	126	164	174	179	285	222	295	343	391	502
50	110	137	159	178	433	130	169	179	188	290	227	300	353	401	512
51	112	139	164	181	449	130	174	184	193	301	232	309	362	411	528
52	115	144	166	186	459	135	179	188	198	306	242	319	372	425	544
53	117	147	171	191	470	140	184	193	203	317	246	324	382	435	555
54	120	152	176	196	481	145	188	198	208	322	251	333	391	445	570
55	125	154	181	200	496	145	193	203	213	333	256	343	401	454	586
56	134	169	196	220	539	155	203	213	222	349	266	353	416	469	602
57	144	183	213	237	586	159	213	222	232	364	271	362	425	483	618
58	156	196	230	257	634	169	222	232	242	380	280	367	435	493	634
59	166	210	244	274	681	174	232	242	251	396	285	377	449	507	650
60	176	225	261	293	729	184	242	251	261	412	295	387	459	522	665
61	193	244	286	320	797	188	256	275	290	438	300	406	478	541	692
62	208	266	310	349	866	208	271	300	324	465	324	420	498	561	718
63	225	286	335	379	935	213	285	324	353	491	329	435	517	580	745
64	239	308	359	406	1,009	232	304	348	387	512	348	454	532	604	776
65	254	327	386	435	1,077	242	319	372	416	539	353	469	551	623	803
66	281	359	423	477	1,183	251	338	396	445	570	362	488	575	652	829
67	303	391	459	518	1,289	271	353	416	469	607	382	503	599	681	877
68	327	423	496	560	1,400	280	372	440	493	634	391	527	619	701	903
69	352	455	533	601	1,505	290	391	459	522	671	406	546	643	730	940
70	374	486	572	643	1,616	309	411	483	546	697	430	570	672	763	972
71	413	535	628	706	1,775	319	425	503	570	734	435	580	686	778	1,003
72	450	584	687	772	1,938	338	445	527	594	766	454	604	705	797	1,030
73	489	635	743	836	2,097	348	464	546	619	803	459	614	725	821	1,067
74	525	684	802	899	2,260	362	483	570	643	834	478	633	749	850	1,093
75	562	733	858	965	2,435	377	503	594	672	856	488	652	768	870	1,120
76	613	799	938	1,058	2,656	391	527	614	686	898	503	672	783	879	1,151
77	665	868	1,017	1,144	2,884	401	536	638	720	935	507	677	807	918	1,183
78	714	934	1,097	1,234	3,116	420	561	662	749	966	522	701	826	937	1,209
79	765	1,002	1,175	1,322	3,343	435	580	686	778	1,003	536	715	850	966	1,241
80	814	1,073	1,263	1,425	3,597	445	594	691	773	1,014	546	730	865	981	1,257
81	887	1,168	1,371	1,542	3,913	454	614	725	821	1,062	551	739	879	1,000	1,283
82	960	1,266	1,488	1,676	4,251	469	628	744	836	1,083	561	749	884	1,005	1,299
83	1,034	1,364	1,603	1,808	4,584	478	643	759	855	1,114	565	759	899	1,015	1,320
84	1,107	1,461	1,720	1,943	4,922	488	662	773	870	1,141	570	768	908	1,029	1,336
85	1,180	1,562	1,835	2,070	5,260	498	672	792	899	1,167	575	778	918	1,039	1,352

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 for Policies Issued Prior to 9/16/2002 - Year 3
Rates per $10 Daily Benefit

	Policy Form: LTC-CD8-MA-PA					**Rider: LTC8-PA-SIP**					**Rider: LTC8-PA-CIP**				
	Base Rates with No Inflation Protection					**Simple Inflation Protection Rider**					**Compound Inflation Protection Rider**				
Issue	**Benefit Period**					**Benefit Period**					**Benefit Period**				
Age	*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	139	178	208	232	581	164	222	237	246	386	290	391	464	527	687
41	144	183	215	242	602	169	232	242	256	401	300	406	483	546	708
42	149	191	222	252	623	179	237	251	266	417	309	420	498	565	734
43	154	198	232	259	644	184	246	261	271	433	324	435	517	585	761
44	159	205	239	269	665	188	256	271	280	444	333	449	536	609	787
45	166	210	247	276	687	193	266	280	290	459	343	464	551	628	813
46	171	218	254	286	708	203	271	285	300	475	353	478	570	648	840
47	176	225	261	293	729	208	280	295	309	491	367	493	585	667	866
48	181	232	269	303	750	213	290	304	319	502	377	507	604	686	887
49	186	237	279	313	771	217	300	314	329	518	387	522	623	705	914
50	191	244	286	320	797	227	304	324	338	533	396	536	638	725	940
51	196	252	293	330	819	232	314	333	348	549	411	551	657	744	966
52	200	257	301	337	840	237	324	338	358	560	420	565	672	763	993
53	208	264	308	347	861	246	329	348	362	576	430	580	691	783	1,019
54	213	271	318	354	882	251	338	358	372	592	440	594	710	802	1,046
55	218	279	325	364	903	256	348	367	382	607	454	609	725	826	1,067
56	232	298	349	393	977	266	362	377	396	628	459	619	739	836	1,083
57	249	320	374	420	1,046	275	372	391	411	650	469	633	749	850	1,099
58	266	342	398	450	1,120	290	387	406	420	671	478	643	763	865	1,114
59	281	362	425	477	1,188	300	401	420	435	697	488	652	778	879	1,135
60	298	384	450	506	1,262	309	416	435	449	718	493	662	792	899	1,151
61	315	408	479	538	1,341	319	425	459	488	739	503	672	797	908	1,167
62	335	433	508	569	1,426	329	440	488	532	766	507	681	812	918	1,183
63	354	457	535	604	1,505	338	454	517	570	787	517	696	821	933	1,204
64	371	481	565	635	1,590	353	469	546	609	813	527	705	836	947	1,225
65	391	506	594	667	1,674	362	483	575	648	840	536	720	850	962	1,246
66	415	538	631	711	1,780	372	498	590	667	861	541	730	860	976	1,257
67	440	569	670	753	1,891	382	512	609	686	887	551	739	875	986	1,278
68	464	604	709	797	2,002	396	527	623	705	914	561	749	884	1,000	1,294
69	489	635	745	838	2,113	406	546	643	730	940	570	763	904	1,020	1,315
70	511	667	784	882	2,223	420	561	662	749	966	580	778	918	1,039	1,341
71	547	714	838	943	2,371	425	570	672	759	982	580	778	918	1,039	1,341
72	582	760	890	1,002	2,524	430	580	686	773	998	580	778	923	1,044	1,347
73	616	804	943	1,063	2,678	440	590	696	788	1,019	585	783	928	1,049	1,357
74	653	850	997	1,122	2,831	449	599	710	802	1,040	590	792	933	1,058	1,368
75	687	897	1,051	1,183	2,979	459	614	725	821	1,062	594	797	942	1,068	1,384
76	731	956	1,122	1,263	3,185	464	623	734	831	1,077	594	797	947	1,068	1,384
77	775	1,017	1,193	1,342	3,391	474	633	749	846	1,093	599	802	947	1,073	1,389
78	821	1,075	1,263	1,422	3,597	478	648	763	860	1,114	599	807	952	1,082	1,394
79	865	1,136	1,334	1,503	3,797	488	657	778	879	1,135	604	812	962	1,087	1,405
80	909	1,195	1,405	1,581	4,003	498	672	792	894	1,162	609	817	971	1,097	1,421
81	975	1,285	1,510	1,701	4,315	503	677	797	904	1,167	609	817	966	1,092	1,415
82	1,044	1,376	1,618	1,821	4,626	507	681	807	913	1,183	604	817	966	1,092	1,415
83	1,109	1,466	1,723	1,943	4,933	512	691	817	923	1,199	604	817	966	1,092	1,421
84	1,175	1,557	1,830	2,063	5,244	517	701	826	933	1,215	609	817	966	1,092	1,421
85	1,244	1,645	1,936	2,182	5,551	522	705	836	947	1,231	609	821	971	1,097	1,215

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

Comprehensive Policy

Individual Rates for Lifetime Premium Payment Optior
0-Day Elimination Period
Annual Premium Rates for Policies Issued Prior to 9/16/2002 - Year 3
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				
	Benefit Period					Benefit Period					Benefit Period				
Issue Age	*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	46	54	61	66	174	53	68	82	87	127	97	121	140	150	238
40	49	59	66	73	195	58	72	87	87	127	111	135	159	164	254
41	51	61	71	78	206	63	77	92	92	137	116	145	164	174	264
42	54	66	73	81	217	68	82	97	101	143	126	150	179	184	275
43	59	68	78	86	227	68	87	101	106	153	126	159	184	193	285
44	61	73	83	90	243	72	87	106	111	153	130	159	188	203	290
45	64	76	86	95	254	77	97	116	116	164	135	169	198	208	301
46	66	81	90	98	264	82	97	116	126	169	145	174	208	222	312
47	68	83	95	103	275	87	101	121	130	180	150	184	213	232	322
48	73	88	98	108	285	82	106	130	130	185	150	188	222	237	338
49	76	90	103	112	296	87	111	135	135	195	155	198	227	246	349
50	78	95	108	115	306	92	111	135	145	201	164	203	237	261	359
51	81	98	110	120	317	97	121	145	150	211	169	213	246	266	370
52	83	103	115	125	333	101	121	150	155	211	174	213	251	275	375
53	88	105	120	130	343	101	126	155	159	222	174	222	256	285	386
54	90	110	122	132	354	106	130	159	169	227	184	227	271	295	396
55	93	112	127	137	364	111	135	164	174	238	188	237	275	304	407
56	100	122	137	149	391	116	145	174	184	254	198	246	290	324	423
57	108	130	147	159	423	121	155	184	193	259	203	261	304	348	438
58	112	139	159	171	449	130	164	188	203	275	217	266	309	362	454
59	120	147	169	181	481	135	174	198	213	280	222	280	324	387	470
60	127	156	178	193	507	140	184	208	222	296	232	290	338	406	486
61	137	169	193	208	544	145	188	217	237	312	237	300	348	411	502
62	147	181	205	222	586	155	198	232	246	327	246	304	362	416	518
63	154	191	220	239	623	164	208	237	256	343	256	319	367	416	533
64	164	203	232	254	665	174	217	251	266	359	266	324	382	420	549
65	174	215	247	269	702	179	222	261	280	375	271	333	391	425	565
66	196	242	279	303	792	193	237	280	300	401	285	353	411	449	597
67	218	269	308	335	877	203	256	300	324	433	300	372	435	478	634
68	237	293	340	369	966	222	275	319	348	465	314	396	459	498	665
69	259	320	369	401	1,051	232	295	338	372	496	329	416	483	527	702
70	281	347	401	435	1,141	246	309	358	391	523	343	435	503	551	734
71	315	389	447	486	1,283	256	324	377	411	549	353	449	522	570	761
72	347	430	494	538	1,421	271	338	396	430	581	367	464	541	590	792
73	381	469	543	589	1,563	280	358	416	454	613	377	478	556	604	819
74	413	511	589	640	1,701	295	372	435	474	644	391	493	575	623	850
75	447	552	635	692	1,843	304	387	454	493	671	401	507	594	643	877
76	503	623	718	782	2,081	329	416	488	527	708	425	536	628	677	908
77	562	692	804	875	2,318	348	449	517	556	750	445	570	652	705	940
78	618	762	887	965	2,551	367	478	546	594	792	464	599	686	744	982
79	677	831	973	1,058	2,789	387	512	575	623	834	483	633	710	773	1,014
80	733	902	1,056	1,149	3,026	411	541	609	657	871	507	662	744	807	1,046
81	799	985	1,151	1,254	3,338	420	556	628	677	903	517	672	754	817	1,072
82	868	1,070	1,249	1,359	3,649	430	565	648	696	935	522	677	763	831	1,093
83	934	1,153	1,344	1,461	3,961	440	585	667	720	966	527	691	773	846	1,120
84	1,002	1,239	1,442	1,566	4,273	449	594	686	739	998	532	696	783	860	1,141
85	1,068	1,322	1,537	1,672	4,584	459	609	705	759	1,030	541	705	792	870	1,167

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

Comprehensive Policy

Individual Rates for Lifetime Premium Payment Optior
0-Day Elimination Period
Annual Premium Rates for Policies Issued Prior to 9/16/2002 - Year 3
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				
	Benefit Period					Benefit Period					Benefit Period				
Issue Age	*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	49	56	64	68	180	53	68	87	92	132	101	126	145	155	248
40	51	61	68	76	201	58	77	92	92	132	116	140	164	174	264
41	54	64	73	81	217	63	82	97	97	143	121	150	174	184	275
42	56	68	76	83	227	68	87	101	106	148	130	155	188	193	285
43	61	71	81	88	238	72	92	106	111	158	130	164	193	203	296
44	64	76	86	93	254	77	92	111	116	158	135	169	198	213	301
45	66	78	88	100	264	82	101	121	121	169	140	179	208	213	312
46	68	83	93	103	275	87	101	121	130	174	150	184	217	227	322
47	71	86	100	108	285	92	106	126	135	185	155	193	217	242	338
48	76	90	103	112	296	87	111	135	135	195	155	198	227	246	354
49	78	93	108	117	306	92	116	140	140	206	164	208	237	256	364
50	81	100	112	120	317	97	111	140	150	211	174	208	246	271	375
51	83	103	115	125	327	101	126	150	155	222	179	217	256	275	386
52	86	108	120	130	349	106	126	155	159	217	184	217	261	285	386
53	90	110	125	134	359	106	130	159	164	227	184	232	266	295	401
54	93	115	127	137	370	111	135	164	179	232	193	237	280	309	412
55	98	117	132	142	380	111	140	169	184	248	193	246	285	319	423
56	105	127	142	154	407	121	150	184	193	264	203	256	304	338	438
57	112	134	152	166	438	126	159	193	198	269	208	271	319	358	459
58	117	144	166	178	465	135	174	193	208	285	227	275	319	377	475
59	125	152	176	188	502	140	184	203	222	290	232	295	333	401	486
60	132	164	186	200	528	145	188	217	232	306	242	300	353	425	507
61	142	176	200	215	565	150	193	227	246	322	246	309	362	430	523
62	152	188	213	232	607	164	208	242	256	343	256	314	377	430	539
63	161	198	230	249	650	169	217	246	266	354	266	333	382	430	555
64	171	210	242	264	692	179	227	261	275	375	275	338	396	440	570
65	181	225	257	279	729	184	227	271	295	391	280	343	406	445	592
66	203	252	291	315	824	203	246	290	309	417	300	367	425	469	623
67	227	279	320	347	914	208	271	314	338	449	309	387	454	498	655
68	247	305	354	384	1,003	232	285	329	362	486	324	411	474	517	692
69	269	332	384	418	1,093	242	309	353	387	518	343	435	503	546	729
70	293	362	418	452	1,188	256	319	372	406	544	353	449	522	575	761
71	327	403	464	506	1,336	266	338	391	425	570	367	469	546	594	787
72	362	447	513	560	1,479	280	353	411	445	602	382	483	565	614	824
73	396	489	565	613	1,627	295	372	430	469	634	391	498	575	628	850
74	430	530	613	665	1,769	304	387	449	493	671	406	512	594	652	882
75	464	574	660	718	1,917	319	401	474	512	697	420	527	619	672	914
76	523	648	748	814	2,165	343	435	507	546	734	445	561	652	701	945
77	584	718	836	909	2,414	362	469	536	580	776	464	594	681	734	977
78	643	792	924	1,004	2,651	382	498	565	619	824	483	623	710	773	1,025
79	704	865	1,012	1,100	2,899	401	532	599	648	866	503	657	739	807	1,056
80	762	938	1,097	1,195	3,148	425	561	633	681	908	527	686	773	836	1,088
81	831	1,024	1,197	1,305	3,470	440	580	652	701	940	536	701	783	846	1,114
82	902	1,114	1,298	1,413	3,797	449	585	677	725	972	546	701	797	865	1,135
83	970	1,200	1,398	1,520	4,119	459	609	696	749	1,003	551	720	802	879	1,162
84	1,041	1,288	1,501	1,630	4,442	469	619	710	768	1,040	556	725	812	894	1,188
85	1,109	1,376	1,598	1,738	4,769	478	633	734	792	1,072	565	730	826	908	1,215

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

Comprehensive Policy

Individual Rates for Lifetime Premium Payment Optior
0-Day Elimination Period
Annual Premium Rates for Policies Issued Prior to 9/16/2002 - Year 3
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	**Benefit Period**					**Benefit Period**					**Benefit Period**				
Age	*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	83	232	63	82	97	101	153	116	145	174	184	269
40	61	73	83	90	248	77	92	111	116	174	135	169	198	208	306
41	66	78	88	95	264	77	97	116	126	185	140	174	208	217	317
42	68	83	93	103	280	87	101	126	126	190	145	179	213	222	333
43	73	88	100	108	296	87	106	126	135	201	150	188	217	232	343
44	76	93	105	112	312	92	106	130	140	206	159	193	227	242	354
45	81	98	110	120	333	97	111	135	145	211	159	198	237	246	359
46	83	100	115	125	349	101	121	145	150	222	169	208	242	256	375
47	88	105	120	130	364	101	126	150	159	227	174	213	251	266	386
48	90	110	127	137	380	106	130	150	159	238	179	222	256	271	396
49	95	115	132	142	396	111	135	155	169	243	184	227	261	280	407
50	100	120	137	149	412	111	140	164	174	254	188	232	271	290	423
51	103	125	142	154	428	116	140	169	179	264	193	237	280	300	433
52	108	130	147	159	444	121	145	174	188	269	198	242	285	309	444
53	110	134	154	166	459	126	150	174	188	280	203	251	290	314	454
54	115	139	159	171	475	126	155	184	198	285	208	256	300	324	470
55	117	144	164	176	496	135	159	188	203	290	217	261	309	333	475
56	122	147	169	183	512	135	169	193	208	301	217	271	314	338	486
57	125	152	174	188	528	140	169	198	213	306	227	275	324	348	496
58	130	156	181	193	544	140	174	203	222	317	232	285	329	358	512
59	132	161	186	200	560	150	179	208	222	322	237	290	333	362	523
60	137	166	191	205	576	150	184	213	232	333	242	295	343	372	533
61	149	181	208	225	628	155	193	222	242	349	246	304	353	382	549
62	161	196	225	242	681	164	203	232	256	364	256	314	362	396	570
63	171	210	242	261	729	174	213	246	266	391	266	324	377	411	592
64	183	225	259	279	782	184	222	256	280	407	275	333	387	425	613
65	196	239	276	298	834	188	232	266	290	423	280	343	396	435	628
66	218	266	305	330	930	198	246	285	314	449	290	358	416	459	660
67	237	291	335	364	1,019	213	266	304	329	481	309	377	440	478	692
68	259	318	367	396	1,114	227	275	319	353	507	319	396	454	498	724
69	279	342	396	430	1,204	242	295	338	367	539	338	416	478	517	755
70	301	369	425	462	1,299	251	309	358	391	565	348	430	498	541	787
71	335	413	474	516	1,452	266	324	382	416	597	362	445	522	565	819
72	371	455	525	569	1,606	275	343	396	435	628	372	464	536	585	850
73	406	499	574	623	1,759	295	362	420	459	660	391	483	561	609	882
74	442	540	626	677	1,912	304	382	435	478	692	401	503	575	628	914
75	477	584	674	731	2,065	319	396	459	503	724	416	517	599	652	945
76	535	657	758	821	2,329	338	420	493	536	766	435	541	628	686	988
77	594	728	841	914	2,588	358	449	527	565	813	454	565	657	715	1,035
78	650	802	926	1,004	2,852	377	469	551	594	861	474	590	686	744	1,083
79	709	872	1,009	1,097	3,111	396	498	585	623	908	493	614	715	773	1,130
80	767	946	1,092	1,188	3,375	416	522	619	657	951	512	638	744	807	1,172
81	836	1,031	1,190	1,295	3,686	425	536	638	677	982	517	648	754	817	1,188
82	904	1,117	1,290	1,403	3,998	435	551	657	696	1,009	527	657	759	826	1,209
83	975	1,205	1,388	1,510	4,315	440	556	677	720	1,035	527	662	773	831	1,220
84	1,044	1,290	1,488	1,618	4,626	449	570	696	739	1,062	536	672	778	841	1,241
85	1,112	1,376	1,586	1,725	4,938	459	585	715	759	1,093	541	681	788	850	1,257

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 for Policies Issued Prior to 9/16/2002 - Year 3
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				
	Benefit Period					Benefit Period					Benefit Period				
Issue Age	*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	71	81	86	243	63	87	101	106	158	121	150	184	193	280
40	64	76	86	93	259	82	97	116	121	180	140	179	208	217	317
41	68	81	90	100	275	82	101	121	130	190	145	184	217	222	327
42	71	86	98	108	290	92	106	130	130	201	150	188	217	232	349
43	76	90	105	112	306	92	111	130	140	211	155	198	222	242	359
44	78	98	110	117	322	97	106	135	145	217	169	198	237	251	370
45	83	103	115	125	349	101	116	140	150	217	169	203	246	256	370
46	86	105	120	130	364	106	126	150	155	227	179	213	251	266	386
47	90	110	125	134	380	106	130	155	164	232	184	217	261	275	401
48	93	115	132	142	396	111	135	155	169	248	188	232	266	280	412
49	100	120	137	147	412	111	140	159	179	254	188	237	271	295	423
50	105	125	142	154	428	116	145	174	184	264	193	242	280	304	438
51	108	130	147	161	444	121	145	179	184	275	198	246	295	309	454
52	112	134	152	166	459	126	150	184	193	280	203	251	300	319	465
53	115	139	161	174	475	130	155	179	193	296	208	261	300	324	475
54	120	144	166	178	496	130	164	188	203	296	217	266	309	333	486
55	122	149	171	183	518	140	169	193	213	301	227	275	319	348	491
56	127	152	176	191	533	140	179	198	217	312	227	285	324	353	507
57	130	156	181	196	549	145	179	203	222	317	237	290	338	362	518
58	134	164	188	200	565	145	179	213	232	333	242	295	343	372	533
59	137	169	193	208	581	155	184	217	232	338	246	300	348	377	544
60	142	174	198	213	597	155	188	222	242	349	251	304	358	387	555
61	154	188	215	235	655	164	203	232	251	359	256	314	367	396	570
62	169	203	235	252	708	169	213	242	266	380	266	329	377	411	592
63	178	218	252	271	761	179	222	256	275	401	275	338	391	430	613
64	191	235	269	291	813	193	232	266	290	423	285	343	401	440	639
65	203	249	288	310	866	198	242	275	300	444	295	358	411	449	655
66	227	276	318	342	966	203	256	295	329	465	300	372	430	478	687
67	247	303	347	379	1,062	222	275	319	343	496	319	391	459	498	718
68	269	330	381	411	1,157	237	285	333	367	528	333	411	474	522	755
69	291	357	411	447	1,252	251	304	353	382	560	348	430	498	536	787
70	313	384	442	481	1,352	261	324	372	406	586	362	449	517	561	819
71	347	430	494	535	1,510	280	333	396	435	623	377	459	541	590	850
72	386	472	547	591	1,669	285	358	411	454	655	387	483	556	609	887
73	423	518	596	648	1,827	304	377	440	478	687	406	503	585	633	919
74	459	562	650	704	1,986	319	396	454	498	724	420	522	599	652	951
75	496	609	701	760	2,149	329	411	478	522	750	430	536	623	677	982
76	557	684	787	853	2,424	353	435	512	561	792	449	561	657	715	1,025
77	618	758	875	951	2,693	372	469	546	590	845	469	590	681	744	1,072
78	677	833	963	1,044	2,968	391	488	575	619	893	493	614	715	778	1,125
79	738	907	1,051	1,141	3,237	411	517	604	648	940	512	638	739	802	1,172
80	799	982	1,136	1,234	3,512	430	546	643	686	988	532	667	773	841	1,215
81	870	1,073	1,237	1,347	3,834	440	556	667	705	1,019	536	672	788	850	1,236
82	941	1,161	1,342	1,459	4,156	449	575	686	725	1,051	546	686	788	860	1,257
83	1,014	1,254	1,444	1,571	4,489	459	575	701	749	1,077	546	686	802	865	1,268
84	1,085	1,342	1,547	1,681	4,811	469	594	725	773	1,104	561	701	812	875	1,289
85	1,156	1,432	1,650	1,794	5,133	478	604	744	792	1,141	565	705	817	884	1,310

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 for Policies Issued Prior to 9/16/2002 - Year 3
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	**Benefit Period**					**Benefit Period**					**Benefit Period**				
Age	*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	83	100	115	122	343	126	155	179	198	285	242	304	353	387	555
41	88	108	122	130	364	135	164	188	213	301	256	319	372	411	581
42	93	112	130	139	386	140	174	203	222	312	271	343	396	430	607
43	98	120	137	147	401	150	184	213	237	333	290	358	416	459	639
44	105	125	144	154	423	155	198	227	251	349	300	382	440	483	671
45	110	132	152	161	444	164	208	237	266	364	314	396	459	507	697
46	115	139	159	171	465	169	213	251	275	375	329	411	483	527	724
47	120	144	166	178	486	179	227	261	290	391	343	435	503	551	750
48	125	152	174	186	502	188	237	275	300	412	362	449	527	580	782
49	130	156	181	193	523	198	251	285	314	428	377	474	546	604	808
50	134	164	188	203	544	203	256	300	324	438	391	488	570	623	834
51	139	171	196	210	565	213	266	309	338	454	406	503	590	648	861
52	147	176	203	218	586	217	280	324	353	470	416	527	614	672	893
53	152	183	210	225	602	227	290	333	367	491	435	541	633	701	924
54	156	188	218	235	623	232	300	348	377	502	449	565	657	720	951
55	161	196	225	242	644	242	309	358	391	518	464	580	677	744	977
56	171	208	239	257	681	251	319	367	406	539	474	594	691	763	1,009
57	181	220	254	271	718	261	333	382	420	560	483	609	705	783	1,035
58	188	232	266	288	761	275	343	396	435	570	503	623	725	792	1,062
59	198	244	281	303	797	285	358	411	449	592	512	638	739	812	1,088
60	208	257	296	318	834	295	367	420	464	613	522	652	754	831	1,120
61	218	269	310	335	877	300	377	430	474	628	522	657	759	836	1,125
62	230	283	325	352	924	300	382	440	483	634	517	657	763	841	1,125
63	239	296	342	369	966	309	391	449	493	650	517	667	768	841	1,130
64	252	310	357	386	1,014	309	396	459	503	655	512	667	773	846	1,130
65	261	323	371	403	1,056	314	406	469	512	671	512	672	778	850	1,135
66	288	349	403	440	1,151	314	420	483	527	692	507	677	783	850	1,135
67	315	379	435	474	1,241	319	430	498	541	718	507	677	788	855	1,141
68	342	406	469	511	1,336	319	440	512	556	739	503	681	788	855	1,146
69	369	435	501	545	1,426	324	449	527	570	766	503	681	792	860	1,151
70	396	462	533	582	1,521	324	464	541	585	787	498	686	797	860	1,151
71	423	501	577	628	1,664	338	469	551	594	792	503	681	792	860	1,141
72	450	538	621	677	1,806	353	478	561	604	797	512	681	792	855	1,135
73	474	577	665	723	1,944	367	488	565	614	803	522	681	788	855	1,130
74	501	613	709	772	2,086	382	498	575	623	808	532	681	788	850	1,125
75	528	653	753	819	2,229	396	503	585	633	813	536	677	783	850	1,114
76	582	721	833	907	2,445	411	522	604	652	845	546	691	797	865	1,135
77	635	792	914	992	2,656	425	536	623	681	887	556	696	807	884	1,162
78	692	860	992	1,080	2,873	440	551	648	701	919	565	710	826	894	1,188
79	745	931	1,073	1,166	3,084	454	565	667	730	961	575	715	836	913	1,215
80	799	1,000	1,153	1,254	3,301	469	585	686	749	993	585	730	850	928	1,236
81	860	1,075	1,241	1,351	3,591	474	594	696	759	1,009	585	734	855	933	1,215
82	921	1,151	1,329	1,447	3,876	478	599	705	773	1,030	585	734	860	947	1,194
83	982	1,229	1,417	1,544	4,167	488	604	720	778	1,051	580	734	870	952	1,172
84	1,044	1,305	1,505	1,640	4,452	493	609	730	792	1,072	580	734	875	966	1,151
85	1,105	1,381	1,593	1,738	4,743	498	619	739	802	1,088	580	739	879	971	1,130

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 for Policies Issued Prior to 9/16/2002 - Year 3
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	**Benefit Period**					**Benefit Period**					**Benefit Period**				
Age	*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	86	105	120	127	359	130	159	184	208	296	251	314	367	401	576
41	90	112	127	134	380	145	169	198	222	312	271	329	387	430	602
42	98	117	134	144	401	145	179	213	232	322	280	358	411	449	634
43	103	125	142	152	417	155	188	222	246	349	300	372	435	478	665
44	110	130	149	161	438	159	208	237	261	364	309	396	459	503	697
45	115	137	156	169	459	169	217	246	275	380	324	411	478	527	729
46	120	144	166	178	486	174	222	261	285	386	343	430	503	546	750
47	125	149	174	186	507	184	237	271	300	407	358	454	522	570	776
48	130	156	181	193	523	198	246	285	314	428	377	469	546	604	813
49	134	164	188	200	544	208	261	295	329	444	391	488	565	628	840
50	139	171	196	210	565	213	266	314	338	454	406	507	594	648	866
51	144	178	203	218	586	222	275	324	353	475	425	522	614	677	898
52	152	183	210	227	607	227	290	338	362	491	435	546	638	696	930
53	156	191	218	235	628	237	300	348	382	507	454	561	662	725	961
54	164	196	227	244	650	237	314	358	391	523	464	590	681	749	988
55	169	203	235	252	671	251	324	372	406	539	478	604	701	773	1,014
56	178	215	249	266	708	261	333	382	425	560	493	619	720	797	1,051
57	188	230	264	281	745	271	343	396	440	586	503	633	734	817	1,077
58	196	242	276	301	792	285	358	416	449	592	522	648	754	821	1,104
59	205	254	293	315	829	300	372	425	469	618	532	662	768	846	1,130
60	215	266	308	330	866	309	382	435	483	639	546	681	783	865	1,167
61	227	279	323	347	914	309	396	449	493	650	541	686	788	870	1,167
62	239	296	337	367	961	309	396	459	503	660	536	681	797	875	1,172
63	249	308	357	384	1,003	319	406	464	512	676	536	691	797	875	1,178
64	261	323	371	401	1,056	324	411	478	522	681	532	696	802	879	1,172
65	271	335	386	420	1,099	329	425	488	532	697	536	701	812	884	1,183
66	301	364	420	457	1,199	324	435	503	551	718	527	701	812	884	1,178
67	327	393	452	494	1,289	333	449	517	561	750	527	705	821	889	1,188
68	357	423	489	530	1,389	329	454	532	580	771	522	705	817	889	1,194
69	384	452	521	567	1,484	338	469	551	594	797	522	710	826	894	1,199
70	411	481	555	606	1,584	338	478	561	604	813	522	710	826	894	1,194
71	440	521	599	653	1,732	353	488	575	619	824	522	710	826	894	1,183
72	467	560	645	704	1,880	367	498	585	628	829	536	705	826	889	1,178
73	494	599	692	753	2,023	382	507	590	638	834	541	710	817	889	1,172
74	521	638	738	804	2,171	396	517	594	648	840	556	710	817	884	1,167
75	550	679	782	850	2,318	411	522	609	662	845	556	701	817	884	1,157
76	606	750	868	943	2,546	425	541	628	677	877	565	720	826	899	1,178
77	660	824	951	1,031	2,762	445	556	648	710	924	580	725	841	923	1,209
78	718	894	1,031	1,124	2,989	459	575	677	725	956	590	739	860	928	1,236
79	775	968	1,117	1,212	3,206	474	590	691	759	1,003	599	744	865	952	1,268
80	831	1,039	1,200	1,305	3,433	488	609	715	778	1,035	609	759	884	962	1,283
81	894	1,119	1,290	1,405	3,734	493	619	725	788	1,051	609	763	889	971	1,262
82	958	1,197	1,383	1,505	4,030	498	623	734	802	1,072	609	763	894	986	1,241
83	1,022	1,278	1,474	1,606	4,336	507	628	749	812	1,093	604	763	904	991	1,215
84	1,085	1,356	1,566	1,706	4,632	512	633	759	821	1,114	604	763	908	1,005	1,194
85	1,149	1,437	1,657	1,806	4,933	517	643	768	836	1,130	604	768	913	1,010	1,172

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 for Policies Issued Prior to 9/16/2002 - Year 3
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	**Benefit Period**					**Benefit Period**					**Benefit Period**				
Age	*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	105	127	144	154	433	155	193	222	251	359	304	372	430	478	681
41	110	134	152	164	459	164	203	237	261	375	319	387	449	493	708
42	117	142	161	174	486	169	213	242	271	391	329	401	464	512	729
43	122	149	169	181	512	179	217	256	285	407	338	416	483	532	755
44	130	156	178	191	533	184	227	261	295	423	348	430	493	551	787
45	134	164	186	200	560	193	237	275	304	438	362	445	512	565	808
46	142	171	196	210	586	198	246	285	314	454	372	454	527	580	834
47	147	178	203	218	613	208	256	295	329	470	387	469	546	604	861
48	154	186	213	227	639	213	261	304	338	486	391	483	561	619	882
49	159	193	220	237	665	222	271	314	348	502	406	498	580	638	908
50	166	200	230	247	692	227	280	324	362	518	416	512	594	652	935
51	171	205	237	254	713	232	295	338	377	533	430	532	609	672	961
52	176	213	244	264	739	242	304	348	387	549	445	546	628	691	988
53	183	220	254	274	766	246	309	358	396	565	449	561	643	705	1,009
54	188	227	261	283	792	256	319	367	406	581	464	575	662	725	1,035
55	196	235	271	291	819	261	329	377	420	597	474	590	677	744	1,062
56	200	242	279	301	845	271	338	391	430	613	488	599	696	759	1,083
57	208	249	288	310	866	275	348	396	440	628	498	614	705	778	1,114
58	213	257	296	320	893	285	353	411	449	644	507	628	725	792	1,141
59	220	264	305	327	919	290	362	416	464	660	517	643	739	817	1,162
60	225	271	313	337	945	300	372	430	474	676	532	657	759	831	1,188
61	237	288	332	357	1,003	304	377	435	483	687	532	652	754	831	1,183
62	249	303	349	376	1,062	309	382	445	488	697	532	652	754	826	1,178
63	264	320	369	398	1,114	314	387	449	493	708	522	648	749	821	1,183
64	276	335	386	418	1,172	319	391	459	498	718	522	648	749	817	1,178
65	288	352	406	437	1,231	324	396	464	507	729	522	643	744	817	1,172
66	320	379	437	472	1,326	314	406	474	522	750	503	648	749	821	1,183
67	352	406	467	506	1,426	300	420	493	536	771	488	652	754	821	1,183
68	381	433	499	540	1,521	295	430	503	546	792	474	652	759	826	1,194
69	413	459	528	574	1,621	280	445	522	561	813	459	657	763	826	1,194
70	445	486	560	609	1,716	271	454	532	575	834	440	662	768	831	1,204
71	469	528	606	660	1,859	295	464	541	585	856	459	667	773	836	1,215
72	491	567	653	711	2,007	324	478	556	599	866	483	672	783	841	1,220
73	516	609	701	760	2,149	353	483	561	614	887	507	677	783	855	1,231
74	538	648	748	811	2,297	382	498	575	628	898	532	681	792	860	1,236
75	562	689	794	863	2,440	406	507	585	638	919	551	686	797	865	1,246
76	616	758	875	948	2,688	420	527	604	662	951	561	696	802	875	1,262
77	672	826	953	1,036	2,936	435	541	633	681	988	561	701	817	884	1,278
78	726	897	1,034	1,122	3,185	449	556	652	705	1,019	570	705	821	894	1,294
79	782	965	1,112	1,210	3,433	464	570	681	725	1,056	570	710	836	904	1,310
80	836	1,034	1,193	1,295	3,681	478	590	701	749	1,088	580	720	841	913	1,326
81	897	1,112	1,283	1,393	3,966	483	594	710	759	1,104	580	720	841	913	1,289
82	958	1,190	1,373	1,493	4,251	493	604	720	768	1,114	585	720	841	908	1,246
83	1,022	1,266	1,461	1,591	4,531	493	614	730	778	1,135	580	725	850	913	1,215
84	1,083	1,344	1,552	1,691	4,817	503	623	739	788	1,146	585	725	850	908	1,172
85	1,144	1,422	1,642	1,789	5,102	507	628	749	797	1,162	585	725	850	908	1,135

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 for Policies Issued Prior to 9/16/2002 - Year 3
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	**Benefit Period**					**Benefit Period**					**Benefit Period**				
Age	*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	110	132	149	161	449	159	203	232	261	375	314	387	449	493	708
41	115	139	156	171	475	169	213	246	271	391	329	401	469	512	739
42	122	147	169	181	507	174	222	251	280	407	343	420	478	532	755
43	127	154	176	188	533	184	227	266	295	423	353	435	503	551	787
44	134	164	186	198	555	193	232	271	309	438	362	445	512	575	819
45	139	171	193	208	581	203	246	285	319	459	377	459	532	590	840
46	147	178	203	218	607	208	256	300	329	475	387	474	551	604	871
47	152	186	210	227	639	217	266	309	338	486	406	488	570	628	893
48	161	193	220	237	665	217	271	319	353	507	406	503	585	643	919
49	166	200	230	247	692	227	280	324	362	523	420	517	599	662	945
50	174	208	239	257	718	237	295	333	377	539	430	536	619	677	972
51	178	213	247	264	739	242	309	353	391	555	445	556	633	701	1,003
52	183	220	254	274	771	251	319	362	406	570	464	570	652	720	1,025
53	191	230	264	283	797	256	319	372	416	586	469	580	667	734	1,046
54	196	237	271	296	824	266	329	382	420	602	483	594	691	754	1,077
55	203	244	281	303	850	271	343	396	435	623	493	614	705	773	1,104
56	208	252	291	313	877	285	353	406	445	639	507	623	720	788	1,130
57	215	259	301	323	903	290	362	411	459	650	522	638	734	812	1,157
58	220	266	308	332	930	300	367	425	469	671	532	652	754	826	1,183
59	230	274	318	340	956	300	377	430	483	687	536	672	768	850	1,209
60	235	281	325	352	982	309	391	449	488	702	551	686	788	860	1,236
61	247	301	345	371	1,046	314	391	454	503	713	551	677	788	865	1,231
62	259	315	364	391	1,104	324	396	459	507	724	551	677	783	860	1,225
63	274	332	384	415	1,157	329	401	469	512	739	546	677	778	850	1,231
64	288	347	401	435	1,220	329	411	478	517	745	541	677	783	850	1,225
65	301	367	423	455	1,278	333	411	478	527	761	541	667	773	850	1,220
66	332	393	455	491	1,378	329	425	493	541	782	522	677	778	855	1,231
67	367	423	486	525	1,484	309	435	512	561	803	507	677	783	855	1,231
68	396	450	518	562	1,584	309	449	522	565	824	493	677	788	860	1,241
69	430	479	550	596	1,685	290	459	541	585	845	478	681	792	860	1,241
70	462	506	582	633	1,785	285	474	556	599	866	459	686	802	865	1,252
71	489	550	631	687	1,933	304	478	561	609	893	474	691	802	870	1,262
72	511	589	679	740	2,086	338	498	575	623	903	503	701	812	875	1,268
73	535	633	728	789	2,234	367	503	585	643	924	532	705	817	894	1,283
74	560	674	777	843	2,387	396	517	599	652	935	551	705	826	894	1,289
75	584	716	826	897	2,535	425	527	609	662	956	575	715	831	899	1,299
76	640	787	909	987	2,794	440	551	628	686	993	585	725	836	908	1,315
77	699	860	992	1,078	3,053	454	561	657	710	1,030	585	725	846	918	1,331
78	755	934	1,075	1,166	3,311	469	575	677	734	1,062	594	734	855	933	1,347
79	814	1,004	1,156	1,259	3,570	483	594	710	754	1,099	594	739	870	937	1,363
80	870	1,075	1,241	1,347	3,829	498	614	725	778	1,130	599	749	870	952	1,378
81	934	1,156	1,334	1,449	4,125	503	619	739	788	1,146	599	749	875	947	1,341
82	997	1,237	1,427	1,552	4,420	512	628	749	802	1,162	609	749	875	947	1,299
83	1,063	1,317	1,520	1,654	4,711	512	638	759	807	1,183	604	754	884	952	1,268
84	1,127	1,398	1,613	1,760	5,007	522	648	773	817	1,194	609	754	884	942	1,220
85	1,190	1,479	1,708	1,860	5,308	527	652	778	831	1,204	609	754	884	947	1,178

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 for Policies Issued On or After 9/16/2002 - Year 1
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		
Issue	**Benefit Period**			**Benefit Period**			**Benefit Period**		
Age	*1 Year*	*2 Years*	*3 Years*	*1 Year*	*2 Years*	*3 Years*	*1 Year*	*2 Years*	*3 Years*
<45	20	24	27	6	10	13	22	35	44
45	22	24	27	6	13	16	22	38	51
46	22	27	29	6	13	16	25	38	54
47	22	27	32	10	16	19	29	44	54
48	24	29	34	10	16	19	29	44	57
49	24	32	34	13	16	25	32	48	64
50	27	32	37	13	22	25	32	54	70
51	27	34	42	16	22	25	35	57	70
52	29	37	44	16	25	32	35	60	76
53	32	39	46	16	29	35	38	64	83
54	32	44	51	19	29	38	41	64	86
55	34	46	54	22	32	44	44	70	92
56	37	49	59	25	38	48	48	76	99
57	39	54	64	25	41	54	51	79	105
58	44	59	71	25	44	57	51	86	111
59	46	64	78	32	51	64	57	92	118
60	51	71	86	32	54	70	57	95	124
61	56	78	95	38	60	83	64	105	140
62	61	86	108	44	73	92	73	118	153
63	66	98	120	51	79	105	83	127	168
64	73	108	134	57	89	118	89	143	184
65	83	122	154	64	102	130	95	156	200
66	93	139	174	70	111	146	105	165	219
67	105	156	196	73	121	159	111	181	235
68	117	176	220	79	133	175	118	194	254
69	132	200	252	89	146	191	127	207	270
70	147	227	286	99	159	210	140	219	289
71	154	237	301	99	159	210	140	219	289
72	174	267	337	102	168	222	143	226	296
73	193	298	377	108	178	238	143	235	311
74	213	330	418	118	191	254	153	248	324
75	237	369	467	121	200	267	156	254	337
76	262	408	518	130	213	283	162	267	353
77	289	452	572	133	222	299	168	273	366
78	318	496	628	140	232	315	172	286	378
79	345	540	685	146	245	327	175	296	394
80	347	543	687	146	245	327	175	296	394
81	374	587	741	146	248	334	178	296	394
82	403	633	797	149	248	334	178	299	400
83	435	680	856	149	257	346	178	299	400
84	469	736	924	156	264	356	181	302	407
85	506	795	998	162	273	369	188	311	420

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 for Policies Issued On or After 9/16/2002 - Year 1
Rates per $20 NCF

Issue	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:	
Age	50%	100%	50%	100%	50%	100%	50%	100%
<40	64	95	78	120	100	154	169	255
40	68	100	83	127	105	164	180	270
41	71	105	88	134	112	174	191	285
42	76	112	93	142	117	183	202	303
43	78	117	98	149	125	196	217	322
44	83	125	105	159	132	208	229	341
45	88	132	110	169	142	220	244	363
46	93	139	117	178	149	232	259	386
47	98	149	125	188	159	247	277	412
48	105	156	132	200	169	262	296	438
49	110	166	139	213	178	276	315	465
50	117	176	149	225	191	293	337	495
51	125	188	159	240	203	313	360	528
52	134	200	169	254	218	333	386	562
53	142	213	181	271	232	355	416	603
54	152	227	193	291	249	377	446	644
55	164	242	205	311	267	403	480	689
56	174	257	222	330	286	430	517	738
57	186	276	237	352	308	460	558	791
58	200	293	257	377	330	489	603	847
59	215	315	274	403	355	523	652	910
60	232	337	296	433	384	562	704	982
61	254	367	325	469	418	609	776	1,068
62	279	399	355	509	457	658	854	1,162
63	306	433	389	553	501	714	940	1,266
64	337	472	428	599	550	773	1,034	1,379
65	379	526	479	665	616	853	1,165	1,529
66	418	570	528	721	680	927	1,285	1,667
67	460	621	582	785	748	1,007	1,420	1,825
68	504	675	638	853	822	1,093	1,566	1,986
69	560	741	709	936	912	1,201	1,742	2,188
70	621	814	787	1,027	1,010	1,313	1,933	2,402
71	643	831	812	1,049	1,042	1,340	1,990	2,450
72	709	910	895	1,144	1,147	1,457	2,188	2,671
73	778	988	983	1,245	1,257	1,582	2,402	2,904
74	851	1,068	1,073	1,345	1,374	1,709	2,627	3,147
75	932	1,161	1,176	1,460	1,506	1,853	2,874	3,413
76	1,015	1,254	1,284	1,575	1,641	2,000	3,125	3,679
77	1,098	1,345	1,389	1,687	1,775	2,137	3,361	3,927
78	1,183	1,435	1,499	1,797	1,910	2,271	3,601	4,166
79	1,267	1,521	1,606	1,905	2,042	2,401	3,818	4,380
80	1,267	1,521	1,606	1,905	2,042	2,401	3,818	4,380
81	1,340	1,577	1,694	1,968	2,132	2,455	3,930	4,432
82	1,428	1,668	1,807	2,081	2,262	2,582	4,136	4,635
83	1,528	1,768	1,927	2,203	2,396	2,716	4,343	4,841
84	1,638	1,880	2,064	2,345	2,558	2,880	4,594	5,096
85	1,763	2,010	2,215	2,506	2,738	3,069	4,875	5,392

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 for Policies Issued On or After 9/16/2002 - Year 1
Rates per $20 NCF

Issue	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:	
Age	50%	100%	50%	100%	50%	100%	50%	100%
<40	41	64	54	89	76	130	109	169
40	41	70	57	95	83	137	116	180
41	44	76	60	99	86	146	124	195
42	48	79	64	108	95	156	135	206
43	51	86	70	114	99	165	142	221
44	54	89	73	121	108	175	154	236
45	57	95	79	127	111	184	165	251
46	64	102	83	137	121	197	176	266
47	67	105	89	146	127	207	187	281
48	70	114	95	156	137	219	202	300
49	76	121	105	165	149	235	217	322
50	83	130	111	175	156	251	236	345
51	89	137	118	188	168	264	255	367
52	92	143	127	197	178	280	274	397
53	102	156	137	210	194	299	296	420
54	108	162	146	222	207	318	322	450
55	114	175	159	235	222	337	345	483
56	127	188	168	254	238	356	375	517
57	137	197	181	270	254	378	405	555
58	146	213	194	286	273	407	438	596
59	156	222	210	302	292	429	476	637
60	168	238	222	321	311	451	517	678
61	184	261	245	350	346	489	573	746
62	203	280	270	378	378	531	629	809
63	222	305	296	407	413	569	689	877
64	238	327	318	439	448	613	757	948
65	264	353	353	470	493	661	828	1,030
66	286	381	378	505	531	706	899	1,109
67	308	404	407	540	569	750	974	1,188
68	331	429	439	569	613	795	1,045	1,266
69	356	461	474	610	661	849	1,135	1,360
70	385	486	512	652	715	906	1,221	1,454
71	378	480	505	639	706	884	1,214	1,431
72	397	499	531	664	744	925	1,281	1,499
73	420	521	559	690	782	963	1,345	1,566
74	435	540	585	718	820	1,001	1,413	1,634
75	458	563	613	747	858	1,039	1,484	1,705
76	480	582	642	776	903	1,081	1,551	1,776
77	496	598	667	798	934	1,112	1,611	1,825
78	515	613	693	823	973	1,144	1,660	1,870
79	534	629	718	842	1,004	1,170	1,701	1,903
80	534	629	718	842	1,004	1,170	1,701	1,903
81	518	607	702	814	976	1,122	1,619	1,851
82	537	623	722	833	1,001	1,141	1,641	1,817
83	553	639	744	852	1,030	1,167	1,664	1,836
84	572	658	766	877	1,058	1,195	1,697	1,866
85	591	677	795	903	1,093	1,230	1,735	1,900

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 for Policies Issued On or After 9/16/2002 - Year 1
Rates per $20 NCF

Issue	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:	
Age	50%	100%	50%	100%	50%	100%	50%	100%
<40	105	159	140	216	197	308	300	431
40	108	168	146	226	207	321	315	450
41	114	175	153	235	213	334	330	472
42	118	181	159	245	226	350	348	495
43	127	191	168	257	235	362	363	513
44	130	197	175	267	248	375	382	536
45	137	207	184	277	257	391	401	558
46	143	216	191	286	270	407	420	585
47	149	222	197	299	280	423	438	607
48	156	232	207	311	292	439	461	633
49	165	242	219	324	308	458	487	663
50	172	251	229	337	321	477	510	693
51	178	261	238	350	334	493	536	719
52	184	270	248	366	350	512	558	753
53	197	283	261	378	366	531	585	783
54	203	292	273	391	378	553	614	817
55	213	302	286	407	397	569	644	851
56	222	318	296	423	413	591	678	888
57	235	327	311	442	432	613	712	929
58	245	343	324	458	455	639	749	970
59	257	356	340	474	474	664	787	1,012
60	270	369	356	493	493	687	828	1,053
61	292	397	385	524	537	731	899	1,132
62	315	423	416	563	575	782	967	1,210
63	337	451	445	598	617	826	1,042	1,293
64	359	477	477	633	661	877	1,120	1,375
65	391	509	515	674	712	931	1,206	1,472
66	413	540	547	712	756	982	1,289	1,562
67	439	566	578	747	801	1,030	1,371	1,645
68	467	591	613	782	845	1,078	1,450	1,727
69	496	626	652	823	900	1,132	1,547	1,828
70	524	655	690	865	954	1,192	1,641	1,930
71	509	633	671	836	928	1,157	1,604	1,881
72	524	648	693	855	960	1,179	1,664	1,930
73	540	664	715	877	995	1,211	1,724	1,990
74	556	680	741	900	1,027	1,243	1,787	2,050
75	575	699	766	922	1,062	1,275	1,855	2,117
76	594	715	788	947	1,100	1,310	1,915	2,177
77	610	728	814	963	1,128	1,335	1,967	2,218
78	623	741	833	982	1,163	1,360	2,008	2,252
79	639	753	855	998	1,186	1,379	2,038	2,274
80	639	753	855	998	1,186	1,379	2,038	2,274
81	613	715	823	950	1,138	1,310	1,926	2,222
82	629	725	836	963	1,157	1,316	1,926	2,124
83	639	737	855	979	1,179	1,335	1,937	2,132
84	658	753	874	998	1,205	1,360	1,963	2,154
85	674	769	900	1,023	1,236	1,392	1,990	2,181

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 for Policies Issued On or After 9/16/2002 - Year 1
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	**Benefit Period**					**Benefit Period**					**Benefit Period**				
Age	*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	90	105	117	206	54	76	79	83	135	99	130	153	172	240
40	78	100	115	130	225	60	83	86	89	150	108	143	168	191	266
41	83	103	120	134	232	64	86	89	92	157	111	149	175	200	274
42	86	108	125	139	240	67	89	92	95	161	118	156	181	207	285
43	88	110	127	144	251	70	92	95	99	169	121	159	188	213	296
44	90	115	132	149	259	70	95	99	102	172	124	165	194	219	303
45	95	117	137	154	266	73	99	102	105	180	130	172	200	229	315
46	98	122	142	159	274	76	99	105	108	184	133	175	207	235	326
47	100	125	147	164	285	76	102	108	111	191	137	181	213	242	333
48	103	130	149	169	292	79	105	111	114	195	140	188	219	248	345
49	105	132	154	174	300	83	108	114	118	202	146	194	226	257	356
50	110	137	159	178	307	86	111	118	124	206	149	197	232	264	363
51	112	139	164	181	318	86	114	121	127	214	153	203	238	270	375
52	115	144	166	186	326	89	118	124	130	217	159	210	245	280	386
53	117	147	171	191	333	92	121	127	133	225	162	213	251	286	393
54	120	152	176	196	341	95	124	130	137	229	165	219	257	292	405
55	125	154	181	200	352	95	127	133	140	236	168	226	264	299	416
56	134	169	196	220	382	102	133	140	146	247	175	232	273	308	427
57	144	183	213	237	416	105	140	146	153	259	178	238	280	318	438
58	156	196	230	257	450	111	146	153	159	270	184	242	286	324	450
59	166	210	245	274	483	114	153	159	165	281	188	248	296	334	461
60	176	225	262	293	517	121	159	165	172	292	194	254	302	343	472
61	193	245	286	320	566	124	168	181	191	311	197	267	315	356	491
62	208	267	311	350	614	137	178	197	213	330	213	277	327	369	510
63	225	286	335	379	663	140	188	213	232	348	216	286	340	381	528
64	240	308	359	406	716	153	200	229	254	363	229	299	350	397	551
65	254	328	386	435	764	159	210	245	273	382	232	308	362	410	570
66	281	359	423	477	839	165	222	261	292	405	238	321	378	429	588
67	303	391	460	518	914	178	232	273	308	431	251	331	394	448	622
68	328	423	496	560	993	184	245	289	324	450	257	346	407	461	641
69	352	455	533	601	1,068	191	257	302	343	476	267	359	423	480	667
70	374	487	572	643	1,147	203	270	318	359	495	283	375	442	502	689
71	413	535	628	707	1,259	210	280	331	375	521	286	381	451	512	712
72	450	584	687	773	1,375	222	292	346	391	543	299	397	464	524	731
73	489	636	743	836	1,487	229	305	359	407	570	302	404	477	540	757
74	526	685	802	900	1,604	238	318	375	423	592	315	416	493	559	776
75	562	734	858	966	1,727	248	331	391	442	607	321	429	505	572	794
76	614	800	939	1,059	1,885	257	346	404	451	637	331	442	515	578	817
77	665	868	1,017	1,144	2,046	264	353	420	474	663	334	445	531	604	839
78	714	934	1,098	1,235	2,211	277	369	435	493	686	343	461	544	617	858
79	765	1,002	1,176	1,323	2,372	286	381	451	512	712	353	470	559	636	880
80	814	1,073	1,264	1,425	2,552	292	391	455	509	719	359	480	569	645	892
81	888	1,169	1,372	1,543	2,776	299	404	477	540	753	362	486	578	658	910
82	961	1,267	1,489	1,677	3,016	308	413	489	550	768	369	493	582	661	922
83	1,034	1,364	1,604	1,809	3,252	315	423	499	563	791	372	499	591	667	937
84	1,108	1,462	1,721	1,944	3,492	321	435	509	572	809	375	505	598	677	948
85	1,181	1,562	1,836	2,071	3,732	327	442	521	591	828	378	512	604	683	959

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 for Policies Issued On or After 9/16/2002 - Year 1
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	**Benefit Period**					**Benefit Period**					**Benefit Period**				
Age	*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	139	178	208	232	412	108	146	156	162	274	191	257	305	346	487
41	144	183	215	242	427	111	153	159	168	285	197	267	318	359	502
42	149	191	222	252	442	118	156	165	175	296	203	277	327	372	521
43	154	198	232	259	457	121	162	172	178	307	213	286	340	385	540
44	159	205	240	269	472	124	168	178	184	315	219	296	353	400	558
45	166	210	247	276	487	127	175	184	191	326	226	305	362	413	577
46	171	218	254	286	502	133	178	188	197	337	232	315	375	426	596
47	176	225	262	293	517	137	184	194	203	348	242	324	385	439	614
48	181	232	269	303	532	140	191	200	210	356	248	334	397	451	629
49	186	237	279	313	547	143	197	207	216	367	254	343	410	464	648
50	191	245	286	320	566	149	200	213	222	378	261	353	420	477	667
51	196	252	293	330	581	153	207	219	229	390	270	362	432	489	686
52	200	257	301	337	596	156	213	222	235	397	277	372	442	502	704
53	208	264	308	347	611	162	216	229	238	408	283	381	455	515	723
54	213	271	318	355	626	165	222	235	245	420	289	391	467	528	742
55	218	279	325	364	641	168	229	242	251	431	299	400	477	544	757
56	232	298	350	394	693	175	238	248	261	446	302	407	486	550	768
57	249	320	374	421	742	181	245	257	270	461	308	416	493	559	779
58	267	342	399	450	794	191	254	267	277	476	315	423	502	569	791
59	281	362	425	477	843	197	264	277	286	495	321	429	512	578	806
60	298	384	450	506	895	203	273	286	296	510	324	435	521	591	817
61	315	408	479	538	952	210	280	302	321	525	331	442	524	598	828
62	335	433	509	570	1,012	216	289	321	350	543	334	448	534	604	839
63	355	457	535	604	1,068	222	299	340	375	558	340	458	540	613	854
64	372	482	565	636	1,128	232	308	359	400	577	346	464	550	623	869
65	391	506	594	667	1,188	238	318	378	426	596	353	474	559	633	884
66	416	538	631	712	1,263	245	327	388	439	611	356	480	566	642	892
67	440	570	670	753	1,341	251	337	400	451	629	362	486	575	648	907
68	465	604	709	797	1,420	261	346	410	464	648	369	493	582	658	918
69	489	636	746	839	1,499	267	359	423	480	667	375	502	594	671	933
70	511	667	785	883	1,577	277	369	435	493	686	381	512	604	683	952
71	548	714	839	944	1,682	280	375	442	499	697	381	512	604	683	952
72	582	760	890	1,002	1,791	283	381	451	509	708	381	512	607	687	955
73	616	804	944	1,064	1,900	289	388	458	518	723	385	515	610	690	963
74	653	851	998	1,122	2,008	296	394	467	528	738	388	521	613	696	970
75	687	897	1,051	1,183	2,113	302	404	477	540	753	391	524	620	702	982
76	731	956	1,122	1,264	2,259	305	410	483	547	764	391	524	623	702	982
77	775	1,017	1,193	1,342	2,405	311	416	493	556	776	394	528	623	706	985
78	822	1,076	1,264	1,423	2,552	315	426	502	566	791	394	531	626	712	989
79	866	1,137	1,335	1,504	2,694	321	432	512	578	806	397	534	633	715	997
80	910	1,196	1,406	1,582	2,840	327	442	521	588	824	400	537	639	722	1,008
81	976	1,286	1,511	1,702	3,061	331	445	524	594	828	400	537	636	718	1,004
82	1,044	1,377	1,619	1,822	3,282	334	448	531	601	839	397	537	636	718	1,004
83	1,110	1,467	1,724	1,944	3,500	337	455	537	607	851	397	537	636	718	1,008
84	1,176	1,557	1,831	2,064	3,721	340	461	544	613	862	400	537	636	718	1,008
85	1,245	1,646	1,936	2,183	3,938	343	464	550	623	873	400	540	639	722	862

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

Comprehensive Policy

Individual Rates for Lifetime Premium Payment Optior
0-Day Elimination Period
Annual Premium Rates for Policies Issued On or After 9/16/2002 - Year 1
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	**Benefit Period**					**Benefit Period**					**Benefit Period**				
Age	*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	46	54	61	66	124	35	44	54	57	90	64	79	92	99	169
40	49	59	66	73	139	38	48	57	57	90	73	89	105	108	180
41	51	61	71	78	146	41	51	60	60	97	76	95	108	114	187
42	54	66	73	81	154	44	54	64	67	101	83	99	118	121	195
43	59	68	78	86	161	44	57	67	70	109	83	105	121	127	202
44	61	73	83	90	172	48	57	70	73	109	86	105	124	133	206
45	64	76	86	95	180	51	64	76	76	116	89	111	130	137	214
46	66	81	90	98	187	54	64	76	83	120	95	114	137	146	221
47	68	83	95	103	195	57	67	79	86	127	99	121	140	153	229
48	73	88	98	108	202	54	70	86	86	131	99	124	146	156	240
49	76	90	103	112	210	57	73	89	89	139	102	130	149	162	247
50	78	95	108	115	217	60	73	89	95	142	108	133	156	172	255
51	81	98	110	120	225	64	79	95	99	150	111	140	162	175	262
52	83	103	115	125	236	67	79	99	102	150	114	140	165	181	266
53	88	105	120	130	244	67	83	102	105	157	114	146	168	188	274
54	90	110	122	132	251	70	86	105	111	161	121	149	178	194	281
55	93	112	127	137	259	73	89	108	114	169	124	156	181	200	289
56	100	122	137	149	277	76	95	114	121	180	130	162	191	213	300
57	108	130	147	159	300	79	102	121	127	184	133	172	200	229	311
58	112	139	159	171	318	86	108	124	133	195	143	175	203	238	322
59	120	147	169	181	341	89	114	130	140	199	146	184	213	254	333
60	127	156	178	193	360	92	121	137	146	210	153	191	222	267	345
61	137	169	193	208	386	95	124	143	156	221	156	197	229	270	356
62	147	181	205	222	416	102	130	153	162	232	162	200	238	273	367
63	154	191	220	240	442	108	137	156	168	244	168	210	242	273	378
64	164	203	232	254	472	114	143	165	175	255	175	213	251	277	390
65	174	215	247	269	498	118	146	172	184	266	178	219	257	280	401
66	196	242	279	303	562	127	156	184	197	285	188	232	270	296	423
67	218	269	308	335	622	133	168	197	213	307	197	245	286	315	450
68	237	293	340	369	686	146	181	210	229	330	207	261	302	327	472
69	259	320	369	401	746	153	194	222	245	352	216	273	318	346	498
70	281	347	401	435	809	162	203	235	257	371	226	286	331	362	521
71	315	389	447	487	910	168	213	248	270	390	232	296	343	375	540
72	347	430	494	538	1,008	178	222	261	283	412	242	305	356	388	562
73	381	469	543	589	1,109	184	235	273	299	435	248	315	366	397	581
74	413	511	589	641	1,206	194	245	286	311	457	257	324	378	410	603
75	447	553	636	692	1,308	200	254	299	324	476	264	334	391	423	622
76	504	623	719	782	1,476	216	273	321	346	502	280	353	413	445	644
77	562	692	804	875	1,645	229	296	340	366	532	292	375	429	464	667
78	619	763	888	966	1,810	242	315	359	391	562	305	394	451	489	697
79	677	831	973	1,059	1,978	254	337	378	410	592	318	416	467	509	719
80	734	902	1,056	1,149	2,147	270	356	400	432	618	334	435	489	531	742
81	800	985	1,152	1,254	2,368	277	366	413	445	641	340	442	496	537	761
82	868	1,071	1,249	1,359	2,589	283	372	426	458	663	343	445	502	547	776
83	934	1,154	1,345	1,462	2,810	289	385	439	474	686	346	455	509	556	794
84	1,002	1,240	1,443	1,567	3,031	296	391	451	486	708	350	458	515	566	809
85	1,068	1,323	1,538	1,672	3,252	302	400	464	499	731	356	464	521	572	828

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

Comprehensive Policy

Individual Rates for Lifetime Premium Payment Optior
0-Day Elimination Period
Annual Premium Rates for Policies Issued On or After 9/16/2002 - Year 1
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	**Benefit Period**					**Benefit Period**					**Benefit Period**				
Age	*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	49	56	64	68	127	35	44	57	60	94	67	83	95	102	176
40	51	61	68	76	142	38	51	60	60	94	76	92	108	114	187
41	54	64	73	81	154	41	54	64	64	101	79	99	114	121	195
42	56	68	76	83	161	44	57	67	70	105	86	102	124	127	202
43	61	71	81	88	169	48	60	70	73	112	86	108	127	133	210
44	64	76	86	93	180	51	60	73	76	112	89	111	130	140	214
45	66	78	88	100	187	54	67	79	79	120	92	118	137	140	221
46	68	83	93	103	195	57	67	79	86	124	99	121	143	149	229
47	71	86	100	108	202	60	70	83	89	131	102	127	143	159	240
48	76	90	103	112	210	57	73	89	89	139	102	130	149	162	251
49	78	93	108	117	217	60	76	92	92	146	108	137	156	168	259
50	81	100	112	120	225	64	73	92	99	150	114	137	162	178	266
51	83	103	115	125	232	67	83	99	102	157	118	143	168	181	274
52	86	108	120	130	247	70	83	102	105	154	121	143	172	188	274
53	90	110	125	134	255	70	86	105	108	161	121	153	175	194	285
54	93	115	127	137	262	73	89	108	118	165	127	156	184	203	292
55	98	117	132	142	270	73	92	111	121	176	127	162	188	210	300
56	105	127	142	154	289	79	99	121	127	187	133	168	200	222	311
57	112	134	152	166	311	83	105	127	130	191	137	178	210	235	326
58	117	144	166	178	330	89	114	127	137	202	149	181	210	248	337
59	125	152	176	188	356	92	121	133	146	206	153	194	219	264	345
60	132	164	186	200	375	95	124	143	153	217	159	197	232	280	360
61	142	176	200	215	401	99	127	149	162	229	162	203	238	283	371
62	152	188	213	232	431	108	137	159	168	244	168	207	248	283	382
63	161	198	230	249	461	111	143	162	175	251	175	219	251	283	393
64	171	210	242	264	491	118	149	172	181	266	181	222	261	289	405
65	181	225	257	279	517	121	149	178	194	277	184	226	267	292	420
66	203	252	291	315	585	133	162	191	203	296	197	242	280	308	442
67	227	279	320	347	648	137	178	207	222	318	203	254	299	327	465
68	247	306	355	384	712	153	188	216	238	345	213	270	311	340	491
69	269	333	384	418	776	159	203	232	254	367	226	286	331	359	517
70	293	362	418	452	843	168	210	245	267	386	232	296	343	378	540
71	328	403	465	506	948	175	222	257	280	405	242	308	359	391	558
72	362	447	513	560	1,049	184	232	270	292	427	251	318	372	404	585
73	396	489	565	614	1,154	194	245	283	308	450	257	327	378	413	603
74	430	531	614	665	1,255	200	254	296	324	476	267	337	391	429	626
75	465	575	660	719	1,360	210	264	311	337	495	277	346	407	442	648
76	523	648	748	814	1,536	226	286	334	359	521	292	369	429	461	671
77	584	719	836	910	1,712	238	308	353	381	551	305	391	448	483	693
78	643	792	924	1,005	1,881	251	327	372	407	585	318	410	467	509	727
79	704	866	1,012	1,100	2,057	264	350	394	426	614	331	432	486	531	749
80	763	939	1,098	1,196	2,233	280	369	416	448	644	346	451	509	550	772
81	831	1,024	1,198	1,306	2,462	289	381	429	461	667	353	461	515	556	791
82	902	1,115	1,298	1,413	2,694	296	385	445	477	689	359	461	524	569	806
83	971	1,201	1,399	1,521	2,923	302	400	458	493	712	362	474	528	578	824
84	1,042	1,289	1,501	1,631	3,151	308	407	467	505	738	366	477	534	588	843
85	1,110	1,377	1,599	1,738	3,383	315	416	483	521	761	372	480	544	598	862

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

Comprehensive Policy

Individual Rates for Lifetime Premium Payment Optior
0-Day Elimination Period
Annual Premium Rates for Policies Issued On or After 9/16/2002 - Year 1
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	**Benefit Period**					**Benefit Period**					**Benefit Period**				
Age	*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	83	165	41	54	64	67	109	76	95	114	121	191
40	61	73	83	90	176	51	60	73	76	124	89	111	130	137	217
41	66	78	88	95	187	51	64	76	83	131	92	114	137	143	225
42	68	83	93	103	199	57	67	83	83	135	95	118	140	146	236
43	73	88	100	108	210	57	70	83	89	142	99	124	143	153	244
44	76	93	105	112	221	60	70	86	92	146	105	127	149	159	251
45	81	98	110	120	236	64	73	89	95	150	105	130	156	162	255
46	83	100	115	125	247	67	79	95	99	157	111	137	159	168	266
47	88	105	120	130	259	67	83	99	105	161	114	140	165	175	274
48	90	110	127	137	270	70	86	99	105	169	118	146	168	178	281
49	95	115	132	142	281	73	89	102	111	172	121	149	172	184	289
50	100	120	137	149	292	73	92	108	114	180	124	153	178	191	300
51	103	125	142	154	303	76	92	111	118	187	127	156	184	197	307
52	108	130	147	159	315	79	95	114	124	191	130	159	188	203	315
53	110	134	154	166	326	83	99	114	124	199	133	165	191	207	322
54	115	139	159	171	337	83	102	121	130	202	137	168	197	213	333
55	117	144	164	176	352	89	105	124	133	206	143	172	203	219	337
56	122	147	169	183	363	89	111	127	137	214	143	178	207	222	345
57	125	152	174	188	375	92	111	130	140	217	149	181	213	229	352
58	130	156	181	193	386	92	114	133	146	225	153	188	216	235	363
59	132	161	186	200	397	99	118	137	146	229	156	191	219	238	371
60	137	166	191	205	408	99	121	140	153	236	159	194	226	245	378
61	149	181	208	225	446	102	127	146	159	247	162	200	232	251	390
62	161	196	225	242	483	108	133	153	168	259	168	207	238	261	405
63	171	210	242	262	517	114	140	162	175	277	175	213	248	270	420
64	183	225	259	279	555	121	146	168	184	289	181	219	254	280	435
65	196	240	276	298	592	124	153	175	191	300	184	226	261	286	446
66	218	267	306	330	659	130	162	188	207	318	191	235	273	302	468
67	237	291	335	364	723	140	175	200	216	341	203	248	289	315	491
68	259	318	367	396	791	149	181	210	232	360	210	261	299	327	513
69	279	342	396	430	854	159	194	222	242	382	222	273	315	340	536
70	301	369	425	462	922	165	203	235	257	401	229	283	327	356	558
71	335	413	474	516	1,030	175	213	251	273	423	238	292	343	372	581
72	372	455	526	570	1,139	181	226	261	286	446	245	305	353	385	603
73	406	499	575	623	1,248	194	238	277	302	468	257	318	369	400	626
74	443	540	626	677	1,356	200	251	286	315	491	264	331	378	413	648
75	477	584	675	731	1,465	210	261	302	331	513	273	340	394	429	671
76	535	658	758	822	1,652	222	277	324	353	543	286	356	413	451	701
77	594	729	841	914	1,836	235	296	346	372	577	299	372	432	470	734
78	650	802	927	1,005	2,023	248	308	362	391	611	311	388	451	489	768
79	709	873	1,010	1,098	2,207	261	327	385	410	644	324	404	470	509	802
80	768	946	1,093	1,188	2,394	273	343	407	432	674	337	420	489	531	832
81	836	1,032	1,191	1,296	2,615	280	353	420	445	697	340	426	496	537	843
82	905	1,117	1,291	1,403	2,836	286	362	432	458	716	346	432	499	544	858
83	976	1,205	1,389	1,511	3,061	289	366	445	474	734	346	435	509	547	866
84	1,044	1,291	1,489	1,619	3,282	296	375	458	486	753	353	442	512	553	880
85	1,112	1,377	1,587	1,726	3,503	302	385	470	499	776	356	448	518	559	892

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

Comprehensive Policy

Individual Rates for Lifetime Premium Payment Optior
0-Day Elimination Period
Annual Premium Rates for Policies Issued On or After 9/16/2002 - Year 1
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	**Benefit Period**					**Benefit Period**					**Benefit Period**				
Age	*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	71	81	86	172	41	57	67	70	112	79	99	121	127	199
40	64	76	86	93	184	54	64	76	79	127	92	118	137	143	225
41	68	81	90	100	195	54	67	79	86	135	95	121	143	146	232
42	71	86	98	108	206	60	70	86	86	142	99	124	143	153	247
43	76	90	105	112	217	60	73	86	92	150	102	130	146	159	255
44	78	98	110	117	229	64	70	89	95	154	111	130	156	165	262
45	83	103	115	125	247	67	76	92	99	154	111	133	162	168	262
46	86	105	120	130	259	70	83	99	102	161	118	140	165	175	274
47	90	110	125	134	270	70	86	102	108	165	121	143	172	181	285
48	93	115	132	142	281	73	89	102	111	176	124	153	175	184	292
49	100	120	137	147	292	73	92	105	118	180	124	156	178	194	300
50	105	125	142	154	303	76	95	114	121	187	127	159	184	200	311
51	108	130	147	161	315	79	95	118	121	195	130	162	194	203	322
52	112	134	152	166	326	83	99	121	127	199	133	165	197	210	330
53	115	139	161	174	337	86	102	118	127	210	137	172	197	213	337
54	120	144	166	178	352	86	108	124	133	210	143	175	203	219	345
55	122	149	171	183	367	92	111	127	140	214	149	181	210	229	348
56	127	152	176	191	378	92	118	130	143	221	149	188	213	232	360
57	130	156	181	196	390	95	118	133	146	225	156	191	222	238	367
58	134	164	188	200	401	95	118	140	153	236	159	194	226	245	378
59	137	169	193	208	412	102	121	143	153	240	162	197	229	248	386
60	142	174	198	213	423	102	124	146	159	247	165	200	235	254	393
61	154	188	215	235	465	108	133	153	165	255	168	207	242	261	405
62	169	203	235	252	502	111	140	159	175	270	175	216	248	270	420
63	178	218	252	271	540	118	146	168	181	285	181	222	257	283	435
64	191	235	269	291	577	127	153	175	191	300	188	226	264	289	453
65	203	249	289	311	614	130	159	181	197	315	194	235	270	296	465
66	227	276	318	342	686	133	168	194	216	330	197	245	283	315	487
67	247	303	347	379	753	146	181	210	226	352	210	257	302	327	510
68	269	330	381	411	821	156	188	219	242	375	219	270	311	343	536
69	291	357	411	447	888	165	200	232	251	397	229	283	327	353	558
70	313	384	443	482	959	172	213	245	267	416	238	296	340	369	581
71	347	430	494	535	1,072	184	219	261	286	442	248	302	356	388	603
72	386	472	548	592	1,184	188	235	270	299	465	254	318	366	400	629
73	423	518	597	648	1,296	200	248	289	315	487	267	331	385	416	652
74	460	562	650	704	1,409	210	261	299	327	513	277	343	394	429	674
75	496	609	702	760	1,525	216	270	315	343	532	283	353	410	445	697
76	557	685	787	853	1,720	232	286	337	369	562	296	369	432	470	727
77	619	758	875	951	1,911	245	308	359	388	599	308	388	448	489	761
78	677	834	963	1,044	2,106	257	321	378	407	633	324	404	470	512	798
79	738	907	1,051	1,142	2,297	270	340	397	426	667	337	420	486	528	832
80	800	983	1,137	1,235	2,492	283	359	423	451	701	350	439	509	553	862
81	870	1,073	1,237	1,347	2,720	289	366	439	464	723	353	442	518	559	877
82	941	1,161	1,342	1,460	2,949	296	378	451	477	746	359	451	518	566	892
83	1,015	1,254	1,445	1,572	3,185	302	378	461	493	764	359	451	528	569	899
84	1,086	1,342	1,548	1,682	3,413	308	391	477	509	783	369	461	534	575	914
85	1,156	1,433	1,650	1,795	3,642	315	397	489	521	809	372	464	537	582	929

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 for Policies Issued On or After 9/16/2002 - Year 1
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	**Benefit Period**					**Benefit Period**					**Benefit Period**				
Age	*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	83	100	115	122	244	83	102	118	130	202	159	200	232	254	393
41	88	108	122	130	259	89	108	124	140	214	168	210	245	270	412
42	93	112	130	139	274	92	114	133	146	221	178	226	261	283	431
43	98	120	137	147	285	99	121	140	156	236	191	235	273	302	453
44	105	125	144	154	300	102	130	149	165	247	197	251	289	318	476
45	110	132	152	161	315	108	137	156	175	259	207	261	302	334	495
46	115	139	159	171	330	111	140	165	181	266	216	270	318	346	513
47	120	144	166	178	345	118	149	172	191	277	226	286	331	362	532
48	125	152	174	186	356	124	156	181	197	292	238	296	346	381	555
49	130	156	181	193	371	130	165	188	207	303	248	311	359	397	573
50	134	164	188	203	386	133	168	197	213	311	257	321	375	410	592
51	139	171	196	210	401	140	175	203	222	322	267	331	388	426	611
52	147	176	203	218	416	143	184	213	232	333	273	346	404	442	633
53	152	183	210	225	427	149	191	219	242	348	286	356	416	461	656
54	156	188	218	235	442	153	197	229	248	356	296	372	432	474	674
55	161	196	225	242	457	159	203	235	257	367	305	381	445	489	693
56	171	208	240	257	483	165	210	242	267	382	311	391	455	502	716
57	181	220	254	271	510	172	219	251	277	397	318	400	464	515	734
58	188	232	267	289	540	181	226	261	286	405	331	410	477	521	753
59	198	245	281	303	566	188	235	270	296	420	337	420	486	534	772
60	208	257	296	318	592	194	242	277	305	435	343	429	496	547	794
61	218	269	311	335	622	197	248	283	311	446	343	432	499	550	798
62	230	284	325	352	656	197	251	289	318	450	340	432	502	553	798
63	240	296	342	369	686	203	257	296	324	461	340	439	505	553	802
64	252	311	357	386	719	203	261	302	331	465	337	439	509	556	802
65	262	323	372	403	749	207	267	308	337	476	337	442	512	559	806
66	289	350	403	440	817	207	277	318	346	491	334	445	515	559	806
67	315	379	435	474	880	210	283	327	356	510	334	445	518	563	809
68	342	406	469	511	948	210	289	337	366	525	331	448	518	563	813
69	369	435	501	545	1,012	213	296	346	375	543	331	448	521	566	817
70	396	462	533	582	1,079	213	305	356	385	558	327	451	524	566	817
71	423	501	577	628	1,180	222	308	362	391	562	331	448	521	566	809
72	450	538	621	677	1,281	232	315	369	397	566	337	448	521	563	806
73	474	577	665	724	1,379	242	321	372	404	570	343	448	518	563	802
74	501	614	709	773	1,480	251	327	378	410	573	350	448	518	559	798
75	528	653	753	819	1,581	261	331	385	416	577	353	445	515	559	791
76	582	721	834	907	1,735	270	343	397	429	599	359	455	524	569	806
77	636	792	914	993	1,885	280	353	410	448	629	366	458	531	582	824
78	692	861	993	1,081	2,038	289	362	426	461	652	372	467	544	588	843
79	746	932	1,073	1,166	2,188	299	372	439	480	682	378	470	550	601	862
80	800	1,000	1,154	1,254	2,342	308	385	451	493	704	385	480	559	610	877
81	861	1,076	1,242	1,352	2,548	311	391	458	499	716	385	483	563	613	862
82	922	1,152	1,330	1,447	2,750	315	394	464	509	731	385	483	566	623	847
83	983	1,230	1,418	1,545	2,956	321	397	474	512	746	381	483	572	626	832
84	1,044	1,306	1,506	1,641	3,159	324	400	480	521	761	381	483	575	636	817
85	1,105	1,381	1,594	1,738	3,365	327	407	486	528	772	381	486	578	639	802

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 for Policies Issued On or After 9/16/2002 - Year 1
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	**Benefit Period**					**Benefit Period**					**Benefit Period**				
Age	*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	86	105	120	127	255	86	105	121	137	210	165	207	242	264	408
41	90	112	127	134	270	95	111	130	146	221	178	216	254	283	427
42	98	117	134	144	285	95	118	140	153	229	184	235	270	296	450
43	103	125	142	152	296	102	124	146	162	247	197	245	286	315	472
44	110	130	149	161	311	105	137	156	172	259	203	261	302	331	495
45	115	137	156	169	326	111	143	162	181	270	213	270	315	346	517
46	120	144	166	178	345	114	146	172	188	274	226	283	331	359	532
47	125	149	174	186	360	121	156	178	197	289	235	299	343	375	551
48	130	156	181	193	371	130	162	188	207	303	248	308	359	397	577
49	134	164	188	200	386	137	172	194	216	315	257	321	372	413	596
50	139	171	196	210	401	140	175	207	222	322	267	334	391	426	614
51	144	178	203	218	416	146	181	213	232	337	280	343	404	445	637
52	152	183	210	227	431	149	191	222	238	348	286	359	420	458	659
53	156	191	218	235	446	156	197	229	251	360	299	369	435	477	682
54	164	196	227	245	461	156	207	235	257	371	305	388	448	493	701
55	169	203	235	252	476	165	213	245	267	382	315	397	461	509	719
56	178	215	249	267	502	172	219	251	280	397	324	407	474	524	746
57	188	230	264	281	528	178	226	261	289	416	331	416	483	537	764
58	196	242	276	301	562	188	235	273	296	420	343	426	496	540	783
59	205	254	293	315	588	197	245	280	308	438	350	435	505	556	802
60	215	267	308	330	614	203	251	286	318	453	359	448	515	569	828
61	227	279	323	347	648	203	261	296	324	461	356	451	518	572	828
62	240	296	337	367	682	203	261	302	331	468	353	448	524	575	832
63	249	308	357	384	712	210	267	305	337	480	353	455	524	575	836
64	262	323	372	401	749	213	270	315	343	483	350	458	528	578	832
65	271	335	386	421	779	216	280	321	350	495	353	461	534	582	839
66	301	364	421	457	851	213	286	331	362	510	346	461	534	582	836
67	328	394	452	494	914	219	296	340	369	532	346	464	540	585	843
68	357	423	489	531	985	216	299	350	381	547	343	464	537	585	847
69	384	452	521	567	1,053	222	308	362	391	566	343	467	544	588	851
70	411	482	555	606	1,124	222	315	369	397	577	343	467	544	588	847
71	440	521	599	653	1,229	232	321	378	407	585	343	467	544	588	839
72	467	560	645	704	1,334	242	327	385	413	588	353	464	544	585	836
73	494	599	692	753	1,435	251	334	388	420	592	356	467	537	585	832
74	521	638	738	804	1,540	261	340	391	426	596	366	467	537	582	828
75	550	680	782	851	1,645	270	343	400	435	599	366	461	537	582	821
76	606	751	868	944	1,806	280	356	413	445	622	372	474	544	591	836
77	660	824	951	1,032	1,960	292	366	426	467	656	381	477	553	607	858
78	719	895	1,032	1,125	2,121	302	378	445	477	678	388	486	566	610	877
79	775	968	1,117	1,213	2,274	311	388	455	499	712	394	489	569	626	899
80	831	1,039	1,201	1,306	2,435	321	400	470	512	734	400	499	582	633	910
81	895	1,120	1,291	1,406	2,649	324	407	477	518	746	400	502	585	639	895
82	958	1,198	1,384	1,506	2,859	327	410	483	528	761	400	502	588	648	880
83	1,022	1,279	1,474	1,606	3,076	334	413	493	534	776	397	502	594	652	862
84	1,086	1,357	1,567	1,707	3,286	337	416	499	540	791	397	502	598	661	847
85	1,149	1,438	1,658	1,807	3,500	340	423	505	550	802	397	505	601	664	832

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 for Policies Issued On or After 9/16/2002 - Year 1
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	**Benefit Period**					**Benefit Period**					**Benefit Period**				
Age	*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	105	127	144	154	307	102	127	146	165	255	200	245	283	315	483
41	110	134	152	164	326	108	133	156	172	266	210	254	296	324	502
42	117	142	161	174	345	111	140	159	178	277	216	264	305	337	517
43	122	149	169	181	363	118	143	168	188	289	222	273	318	350	536
44	130	156	178	191	378	121	149	172	194	300	229	283	324	362	558
45	134	164	186	200	397	127	156	181	200	311	238	292	337	372	573
46	142	171	196	210	416	130	162	188	207	322	245	299	346	381	592
47	147	178	203	218	435	137	168	194	216	333	254	308	359	397	611
48	154	186	213	227	453	140	172	200	222	345	257	318	369	407	626
49	159	193	220	237	472	146	178	207	229	356	267	327	381	420	644
50	166	200	230	247	491	149	184	213	238	367	273	337	391	429	663
51	171	205	237	254	506	153	194	222	248	378	283	350	400	442	682
52	176	213	245	264	525	159	200	229	254	390	292	359	413	455	701
53	183	220	254	274	543	162	203	235	261	401	296	369	423	464	716
54	188	227	262	284	562	168	210	242	267	412	305	378	435	477	734
55	196	235	271	291	581	172	216	248	277	423	311	388	445	489	753
56	200	242	279	301	599	178	222	257	283	435	321	394	458	499	768
57	208	249	289	311	614	181	229	261	289	446	327	404	464	512	791
58	213	257	296	320	633	188	232	270	296	457	334	413	477	521	809
59	220	264	306	328	652	191	238	273	305	468	340	423	486	537	824
60	225	271	313	337	671	197	245	283	311	480	350	432	499	547	843
61	237	289	333	357	712	200	248	286	318	487	350	429	496	547	839
62	249	303	350	377	753	203	251	292	321	495	350	429	496	544	836
63	264	320	369	399	791	207	254	296	324	502	343	426	493	540	839
64	276	335	386	418	832	210	257	302	327	510	343	426	493	537	836
65	289	352	406	438	873	213	261	305	334	517	343	423	489	537	832
66	320	379	438	472	940	207	267	311	343	532	331	426	493	540	839
67	352	406	467	506	1,012	197	277	324	353	547	321	429	496	540	839
68	381	433	499	540	1,079	194	283	331	359	562	311	429	499	544	847
69	413	460	528	575	1,150	184	292	343	369	577	302	432	502	544	847
70	445	487	560	609	1,218	178	299	350	378	592	289	435	505	547	854
71	469	528	606	660	1,319	194	305	356	385	607	302	439	509	550	862
72	491	567	653	712	1,424	213	315	366	394	614	318	442	515	553	866
73	516	609	702	760	1,525	232	318	369	404	629	334	445	515	563	873
74	538	648	748	812	1,630	251	327	378	413	637	350	448	521	566	877
75	562	689	795	863	1,731	267	334	385	420	652	362	451	524	569	884
76	616	758	875	949	1,907	277	346	397	435	674	369	458	528	575	895
77	672	826	954	1,037	2,083	286	356	416	448	701	369	461	537	582	907
78	726	897	1,034	1,122	2,259	296	366	429	464	723	375	464	540	588	918
79	782	966	1,112	1,210	2,435	305	375	448	477	749	375	467	550	594	929
80	836	1,034	1,193	1,296	2,612	315	388	461	493	772	381	474	553	601	940
81	897	1,112	1,284	1,394	2,814	318	391	467	499	783	381	474	553	601	914
82	958	1,191	1,374	1,494	3,016	324	397	474	505	791	385	474	553	598	884
83	1,022	1,267	1,462	1,592	3,215	324	404	480	512	806	381	477	559	601	862
84	1,083	1,345	1,553	1,692	3,417	331	410	486	518	813	385	477	559	598	832
85	1,144	1,423	1,643	1,790	3,619	334	413	493	524	824	385	477	559	598	806

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 for Policies Issued On or After 9/16/2002 - Year 1
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	**Benefit Period**					**Benefit Period**					**Benefit Period**				
Age	*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	110	132	149	161	318	105	133	153	172	266	207	254	296	324	502
41	115	139	156	171	337	111	140	162	178	277	216	264	308	337	525
42	122	147	169	181	360	114	146	165	184	289	226	277	315	350	536
43	127	154	176	188	378	121	149	175	194	300	232	286	331	362	558
44	134	164	186	198	393	127	153	178	203	311	238	292	337	378	581
45	139	171	193	208	412	133	162	188	210	326	248	302	350	388	596
46	147	178	203	218	431	137	168	197	216	337	254	311	362	397	618
47	152	186	210	227	453	143	175	203	222	345	267	321	375	413	633
48	161	193	220	237	472	143	178	210	232	360	267	331	385	423	652
49	166	200	230	247	491	149	184	213	238	371	277	340	394	435	671
50	174	208	240	257	510	156	194	219	248	382	283	353	407	445	689
51	178	213	247	264	525	159	203	232	257	393	292	366	416	461	712
52	183	220	254	274	547	165	210	238	267	405	305	375	429	474	727
53	191	230	264	284	566	168	210	245	273	416	308	381	439	483	742
54	196	237	271	296	585	175	216	251	277	427	318	391	455	496	764
55	203	245	281	303	603	178	226	261	286	442	324	404	464	509	783
56	208	252	291	313	622	188	232	267	292	453	334	410	474	518	802
57	215	259	301	323	641	191	238	270	302	461	343	420	483	534	821
58	220	267	308	333	659	197	242	280	308	476	350	429	496	544	839
59	230	274	318	340	678	197	248	283	318	487	353	442	505	559	858
60	235	281	325	352	697	203	257	296	321	498	362	451	518	566	877
61	247	301	345	372	742	207	257	299	331	506	362	445	518	569	873
62	259	315	364	391	783	213	261	302	334	513	362	445	515	566	869
63	274	333	384	416	821	216	264	308	337	525	359	445	512	559	873
64	289	347	401	435	866	216	270	315	340	528	356	445	515	559	869
65	301	367	423	455	907	219	270	315	346	540	356	439	509	559	866
66	333	394	455	491	978	216	280	324	356	555	343	445	512	563	873
67	367	423	487	526	1,053	203	286	337	369	570	334	445	515	563	873
68	396	450	518	562	1,124	203	296	343	372	585	324	445	518	566	880
69	430	479	550	597	1,195	191	302	356	385	599	315	448	521	566	880
70	462	506	582	633	1,266	188	311	366	394	614	302	451	528	569	888
71	489	550	631	687	1,371	200	315	369	400	633	311	455	528	572	895
72	511	589	680	741	1,480	222	327	378	410	641	331	461	534	575	899
73	535	633	729	790	1,585	242	331	385	423	656	350	464	537	588	910
74	560	675	778	844	1,694	261	340	394	429	663	362	464	544	588	914
75	584	716	826	897	1,798	280	346	400	435	678	378	470	547	591	922
76	641	787	910	988	1,982	289	362	413	451	704	385	477	550	598	933
77	699	861	993	1,078	2,166	299	369	432	467	731	385	477	556	604	944
78	756	934	1,076	1,166	2,349	308	378	445	483	753	391	483	563	613	955
79	814	1,005	1,156	1,259	2,533	318	391	467	496	779	391	486	572	617	967
80	870	1,076	1,242	1,347	2,716	327	404	477	512	802	394	493	572	626	978
81	934	1,156	1,335	1,450	2,926	331	407	486	518	813	394	493	575	623	952
82	998	1,237	1,428	1,553	3,136	337	413	493	528	824	400	493	575	623	922
83	1,064	1,318	1,521	1,655	3,342	337	420	499	531	839	397	496	582	626	899
84	1,127	1,399	1,614	1,760	3,552	343	426	509	537	847	400	496	582	620	866
85	1,191	1,479	1,709	1,861	3,766	346	429	512	547	854	400	496	582	623	836

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 for Policies Issued On or After 9/16/2002 - Year 2
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		
Issue	**Benefit Period**			**Benefit Period**			**Benefit Period**		
Age	*1 Year*	*2 Years*	*3 Years*	*1 Year*	*2 Years*	*3 Years*	*1 Year*	*2 Years*	*3 Years*
<45	20	24	27	8	12	17	29	45	58
45	22	24	27	8	17	21	29	50	66
46	22	27	29	8	17	21	33	50	70
47	22	27	32	12	21	25	37	58	70
48	24	29	34	12	21	25	37	58	74
49	24	32	34	17	21	33	41	62	83
50	27	32	37	17	29	33	41	70	91
51	27	34	42	21	29	33	45	74	91
52	29	37	44	21	33	41	45	79	99
53	32	39	46	21	37	45	50	83	107
54	32	44	51	25	37	50	54	83	112
55	34	46	54	29	41	58	58	91	120
56	37	49	59	33	50	62	62	99	128
57	39	54	64	33	54	70	66	103	136
58	44	59	71	33	58	74	66	112	145
59	46	64	78	41	66	83	74	120	153
60	51	71	86	41	70	91	74	124	161
61	56	78	95	50	79	107	83	136	182
62	61	86	108	58	95	120	95	153	198
63	66	98	120	66	103	136	107	165	219
64	73	108	134	74	116	153	116	186	240
65	83	122	154	83	132	169	124	202	260
66	93	139	174	91	145	190	136	215	285
67	105	156	196	95	157	207	145	236	306
68	117	176	220	103	174	227	153	252	331
69	132	200	252	116	190	248	165	269	351
70	147	227	286	128	207	273	182	285	376
71	154	237	301	128	207	273	182	285	376
72	174	267	337	132	219	289	186	293	384
73	193	298	377	140	231	310	186	306	405
74	213	330	418	153	248	331	198	322	421
75	237	369	467	157	260	347	202	331	438
76	262	408	518	169	277	368	211	347	459
77	289	452	572	174	289	388	219	355	475
78	318	496	628	182	302	409	223	372	492
79	345	540	685	190	318	426	227	384	512
80	347	543	687	190	318	426	227	384	512
81	374	587	741	190	322	434	231	384	512
82	403	633	797	194	322	434	231	388	521
83	435	680	856	194	335	450	231	388	521
84	469	736	924	202	343	463	236	393	529
85	506	795	998	211	355	479	244	405	545

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 for Policies Issued On or After 9/16/2002 - Year 2
Rates per $20 NCF

Issue	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:	
Age	50%	100%	50%	100%	50%	100%	50%	100%
<40	64	95	78	120	100	154	219	331
40	68	100	83	127	105	164	234	351
41	71	105	88	134	112	174	248	370
42	76	112	93	142	117	183	263	395
43	78	117	98	149	125	196	283	419
44	83	125	105	159	132	208	297	443
45	88	132	110	169	142	220	317	472
46	93	139	117	178	149	232	336	502
47	98	149	125	188	159	247	360	536
48	105	156	132	200	169	262	385	570
49	110	166	139	213	178	276	409	604
50	117	176	149	225	191	293	438	643
51	125	188	159	240	203	313	468	687
52	134	200	169	254	218	333	502	731
53	142	213	181	271	232	355	541	784
54	152	227	193	291	249	377	580	838
55	164	242	205	311	267	403	623	896
56	174	257	222	330	286	430	672	960
57	186	276	237	352	308	460	726	1,028
58	200	293	257	377	330	489	784	1,101
59	215	315	274	403	355	523	848	1,184
60	232	337	296	433	384	562	916	1,276
61	254	367	325	469	418	609	1,008	1,388
62	279	399	355	509	457	658	1,111	1,510
63	306	433	389	553	501	714	1,223	1,646
64	337	472	428	599	550	773	1,344	1,792
65	379	526	479	665	616	853	1,515	1,987
66	418	570	528	721	680	927	1,671	2,168
67	460	621	582	785	748	1,007	1,846	2,372
68	504	675	638	853	822	1,093	2,036	2,582
69	560	741	709	936	912	1,201	2,265	2,845
70	621	814	787	1,027	1,010	1,313	2,513	3,122
71	643	831	812	1,049	1,042	1,340	2,586	3,186
72	709	910	895	1,144	1,147	1,457	2,845	3,473
73	778	988	983	1,245	1,257	1,582	3,122	3,775
74	851	1,068	1,073	1,345	1,374	1,709	3,414	4,092
75	932	1,161	1,176	1,460	1,506	1,853	3,736	4,437
76	1,015	1,254	1,284	1,575	1,641	2,000	4,062	4,783
77	1,098	1,345	1,389	1,687	1,775	2,137	4,369	5,105
78	1,183	1,435	1,499	1,797	1,910	2,271	4,681	5,416
79	1,267	1,521	1,606	1,905	2,042	2,401	4,963	5,694
80	1,267	1,521	1,606	1,905	2,042	2,401	4,963	5,694
81	1,340	1,577	1,694	1,968	2,132	2,455	5,110	5,762
82	1,428	1,668	1,807	2,081	2,262	2,582	5,377	6,025
83	1,528	1,768	1,927	2,203	2,396	2,716	5,645	6,293
84	1,638	1,880	2,064	2,345	2,558	2,880	5,972	6,624
85	1,763	2,010	2,215	2,506	2,738	3,069	6,337	7,009

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 for Policies Issued On or After 9/16/2002 - Year 2
Rates per $20 NCF

Issue	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:	
Age	50%	100%	50%	100%	50%	100%	50%	100%
<40	54	83	70	116	99	169	141	219
40	54	91	74	124	107	178	151	234
41	58	99	79	128	112	190	161	253
42	62	103	83	140	124	202	175	268
43	66	112	91	149	128	215	185	287
44	70	116	95	157	140	227	200	307
45	74	124	103	165	145	240	214	326
46	83	132	107	178	157	256	229	346
47	87	136	116	190	165	269	244	365
48	91	149	124	202	178	285	263	390
49	99	157	136	215	194	306	283	419
50	107	169	145	227	202	326	307	448
51	116	178	153	244	219	343	331	477
52	120	186	165	256	231	364	356	516
53	132	202	178	273	252	388	385	546
54	140	211	190	289	269	413	419	585
55	149	227	207	306	289	438	448	628
56	165	244	219	331	310	463	487	672
57	178	256	236	351	331	492	526	721
58	190	277	252	372	355	529	570	774
59	202	289	273	393	380	558	619	828
60	219	310	289	417	405	587	672	882
61	240	339	318	455	450	636	745	969
62	264	364	351	492	492	690	818	1,052
63	289	397	384	529	537	740	896	1,140
64	310	426	413	570	583	797	984	1,232
65	343	459	459	612	640	859	1,076	1,339
66	372	496	492	657	690	917	1,169	1,442
67	401	525	529	702	740	975	1,266	1,544
68	430	558	570	740	797	1,033	1,359	1,646
69	463	599	616	793	859	1,103	1,476	1,768
70	500	632	665	847	930	1,178	1,588	1,890
71	492	624	657	831	917	1,149	1,578	1,861
72	517	649	690	864	967	1,202	1,666	1,948
73	545	678	727	897	1,016	1,252	1,749	2,036
74	566	702	760	934	1,066	1,302	1,836	2,124
75	595	731	797	971	1,116	1,351	1,929	2,216
76	624	756	835	1,008	1,174	1,405	2,017	2,309
77	645	777	868	1,037	1,215	1,446	2,094	2,372
78	669	797	901	1,070	1,264	1,488	2,158	2,431
79	694	818	934	1,095	1,306	1,521	2,211	2,474
80	694	818	934	1,095	1,306	1,521	2,211	2,474
81	674	789	913	1,058	1,269	1,459	2,104	2,406
82	698	810	938	1,083	1,302	1,483	2,133	2,362
83	719	831	967	1,107	1,339	1,516	2,163	2,387
84	744	855	996	1,140	1,376	1,554	2,206	2,426
85	769	880	1,033	1,174	1,421	1,599	2,255	2,470

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 for Policies Issued On or After 9/16/2002 - Year 2
Rates per $20 NCF

Issue	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:	
Age	50%	100%	50%	100%	50%	100%	50%	100%
<40	136	207	182	281	256	401	390	560
40	140	219	190	293	269	417	409	585
41	149	227	198	306	277	434	429	614
42	153	236	207	318	293	455	453	643
43	165	248	219	335	306	471	472	667
44	169	256	227	347	322	488	497	697
45	178	269	240	359	335	508	521	726
46	186	281	248	372	351	529	546	760
47	194	289	256	388	364	550	570	789
48	202	302	269	405	380	570	599	823
49	215	314	285	421	401	595	633	862
50	223	326	298	438	417	620	662	901
51	231	339	310	455	434	640	697	935
52	240	351	322	475	455	665	726	979
53	256	368	339	492	475	690	760	1,018
54	264	380	355	508	492	719	799	1,062
55	277	393	372	529	517	740	838	1,106
56	289	413	384	550	537	769	882	1,154
57	306	426	405	574	562	797	925	1,208
58	318	446	421	595	591	831	974	1,262
59	335	463	442	616	616	864	1,023	1,315
60	351	479	463	640	640	893	1,076	1,369
61	380	517	500	682	698	950	1,169	1,471
62	409	550	541	731	748	1,016	1,257	1,573
63	438	587	578	777	802	1,074	1,354	1,680
64	467	620	620	822	859	1,140	1,456	1,788
65	508	661	669	876	926	1,211	1,568	1,914
66	537	702	711	926	983	1,277	1,676	2,031
67	570	736	752	971	1,041	1,339	1,783	2,138
68	607	769	797	1,016	1,099	1,401	1,885	2,245
69	645	814	847	1,070	1,169	1,471	2,012	2,377
70	682	851	897	1,124	1,240	1,550	2,133	2,508
71	661	822	872	1,087	1,207	1,504	2,085	2,445
72	682	843	901	1,112	1,248	1,533	2,163	2,508
73	702	864	930	1,140	1,293	1,574	2,241	2,586
74	723	884	963	1,169	1,335	1,616	2,323	2,664
75	748	909	996	1,198	1,380	1,657	2,411	2,752
76	773	930	1,025	1,231	1,430	1,702	2,489	2,830
77	793	946	1,058	1,252	1,467	1,735	2,557	2,884
78	810	963	1,083	1,277	1,512	1,769	2,611	2,927
79	831	979	1,112	1,297	1,541	1,793	2,650	2,957
80	831	979	1,112	1,297	1,541	1,793	2,650	2,957
81	797	930	1,070	1,235	1,479	1,702	2,504	2,888
82	818	942	1,087	1,252	1,504	1,711	2,504	2,762
83	831	959	1,112	1,273	1,533	1,735	2,518	2,772
84	855	979	1,136	1,297	1,566	1,769	2,552	2,801
85	876	1,000	1,169	1,331	1,607	1,810	2,586	2,835

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 for Policies Issued On or After 9/16/2002 - Year 2
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	**Benefit Period**					**Benefit Period**					**Benefit Period**				
Age	*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	90	105	117	268	70	99	103	107	175	128	169	198	223	312
40	78	100	115	130	292	79	107	112	116	195	140	186	219	248	346
41	83	103	120	134	302	83	112	116	120	205	145	194	227	260	356
42	86	108	125	139	312	87	116	120	124	209	153	202	236	269	370
43	88	110	127	144	326	91	120	124	128	219	157	207	244	277	385
44	90	115	132	149	336	91	124	128	132	224	161	215	252	285	395
45	95	117	137	154	346	95	128	132	136	234	169	223	260	298	409
46	98	122	142	159	356	99	128	136	140	239	174	227	269	306	424
47	100	125	147	164	370	99	132	140	145	248	178	236	277	314	434
48	103	130	149	169	380	103	136	145	149	253	182	244	285	322	448
49	105	132	154	174	390	107	140	149	153	263	190	252	293	335	463
50	110	137	159	178	399	112	145	153	161	268	194	256	302	343	472
51	112	139	164	181	414	112	149	157	165	278	198	264	310	351	487
52	115	144	166	186	424	116	153	161	169	283	207	273	318	364	502
53	117	147	171	191	434	120	157	165	174	292	211	277	326	372	511
54	120	152	176	196	443	124	161	169	178	297	215	285	335	380	526
55	125	154	181	200	458	124	165	174	182	307	219	293	343	388	541
56	134	169	196	220	497	132	174	182	190	321	227	302	355	401	555
57	144	183	213	237	541	136	182	190	198	336	231	310	364	413	570
58	156	196	230	257	585	145	190	198	207	351	240	314	372	421	585
59	166	210	245	274	628	149	198	207	215	365	244	322	384	434	599
60	176	225	262	293	672	157	207	215	223	380	252	331	393	446	614
61	193	245	286	320	735	161	219	236	248	404	256	347	409	463	638
62	208	267	311	350	799	178	231	256	277	429	277	359	426	479	662
63	225	286	335	379	862	182	244	277	302	453	281	372	442	496	687
64	240	308	359	406	930	198	260	298	331	472	298	388	455	517	716
65	254	328	386	435	994	207	273	318	355	497	302	401	471	533	740
66	281	359	423	477	1,091	215	289	339	380	526	310	417	492	558	765
67	303	391	460	518	1,188	231	302	355	401	560	326	430	512	583	809
68	328	423	496	560	1,291	240	318	376	421	585	335	450	529	599	833
69	352	455	533	601	1,388	248	335	393	446	619	347	467	550	624	867
70	374	487	572	643	1,490	264	351	413	467	643	368	488	574	653	896
71	413	535	628	707	1,637	273	364	430	488	677	372	496	587	665	925
72	450	584	687	773	1,788	289	380	450	508	706	388	517	603	682	950
73	489	636	743	836	1,934	298	397	467	529	740	393	525	620	702	984
74	526	685	802	900	2,085	310	413	488	550	770	409	541	640	727	1,008
75	562	734	858	966	2,245	322	430	508	574	789	417	558	657	744	1,033
76	614	800	939	1,059	2,450	335	450	525	587	828	430	574	669	752	1,062
77	665	868	1,017	1,144	2,659	343	459	545	616	862	434	578	690	785	1,091
78	714	934	1,098	1,235	2,874	359	479	566	640	891	446	599	707	802	1,115
79	765	1,002	1,176	1,323	3,083	372	496	587	665	925	459	612	727	826	1,145
80	814	1,073	1,264	1,425	3,317	380	508	591	661	935	467	624	740	839	1,159
81	888	1,169	1,372	1,543	3,609	388	525	620	702	979	471	632	752	855	1,184
82	961	1,267	1,489	1,677	3,921	401	537	636	715	999	479	640	756	859	1,198
83	1,034	1,364	1,604	1,809	4,228	409	550	649	731	1,028	483	649	769	868	1,218
84	1,108	1,462	1,721	1,944	4,540	417	566	661	744	1,052	488	657	777	880	1,232
85	1,181	1,562	1,836	2,071	4,851	426	574	678	769	1,076	492	665	785	888	1,247

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 for Policies Issued On or After 9/16/2002 - Year 2
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	**Benefit Period**					**Benefit Period**					**Benefit Period**				
Age	*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	139	178	208	232	536	140	190	202	211	356	248	335	397	450	633
41	144	183	215	242	555	145	198	207	219	370	256	347	413	467	653
42	149	191	222	252	575	153	202	215	227	385	264	359	426	483	677
43	154	198	232	259	594	157	211	223	231	399	277	372	442	500	701
44	159	205	240	269	614	161	219	231	240	409	285	384	459	521	726
45	166	210	247	276	633	165	227	240	248	424	293	397	471	537	750
46	171	218	254	286	653	174	231	244	256	438	302	409	488	554	774
47	176	225	262	293	672	178	240	252	264	453	314	421	500	570	799
48	181	232	269	303	692	182	248	260	273	463	322	434	517	587	818
49	186	237	279	313	711	186	256	269	281	477	331	446	533	603	843
50	191	245	286	320	735	194	260	277	289	492	339	459	545	620	867
51	196	252	293	330	755	198	269	285	298	507	351	471	562	636	891
52	200	257	301	337	774	202	277	289	306	516	359	483	574	653	916
53	208	264	308	347	794	211	281	298	310	531	368	496	591	669	940
54	213	271	318	355	813	215	289	306	318	546	376	508	607	686	964
55	218	279	325	364	833	219	298	314	326	560	388	521	620	707	984
56	232	298	350	394	901	227	310	322	339	580	393	529	632	715	999
57	249	320	374	421	964	236	318	335	351	599	401	541	640	727	1,013
58	267	342	399	450	1,033	248	331	347	359	619	409	550	653	740	1,028
59	281	362	425	477	1,096	256	343	359	372	643	417	558	665	752	1,047
60	298	384	450	506	1,164	264	355	372	384	662	421	566	678	769	1,062
61	315	408	479	538	1,237	273	364	393	417	682	430	574	682	777	1,076
62	335	433	509	570	1,315	281	376	417	455	706	434	583	694	785	1,091
63	355	457	535	604	1,388	289	388	442	488	726	442	595	702	797	1,111
64	372	482	565	636	1,466	302	401	467	521	750	450	603	715	810	1,130
65	391	506	594	667	1,544	310	413	492	554	774	459	616	727	822	1,150
66	416	538	631	712	1,641	318	426	504	570	794	463	624	736	835	1,159
67	440	570	670	753	1,744	326	438	521	587	818	471	632	748	843	1,179
68	465	604	709	797	1,846	339	450	533	603	843	479	640	756	855	1,193
69	489	636	746	839	1,948	347	467	550	624	867	488	653	773	872	1,213
70	511	667	785	883	2,051	359	479	566	640	891	496	665	785	888	1,237
71	548	714	839	944	2,187	364	488	574	649	906	496	665	785	888	1,237
72	582	760	890	1,002	2,328	368	496	587	661	921	496	665	789	893	1,242
73	616	804	944	1,064	2,470	376	504	595	674	940	500	669	793	897	1,252
74	653	851	998	1,122	2,611	384	512	607	686	960	504	678	797	905	1,262
75	687	897	1,051	1,183	2,747	393	525	620	702	979	508	682	806	913	1,276
76	731	956	1,122	1,264	2,937	397	533	628	711	994	508	682	810	913	1,276
77	775	1,017	1,193	1,342	3,127	405	541	640	723	1,008	512	686	810	917	1,281
78	822	1,076	1,264	1,423	3,317	409	554	653	736	1,028	512	690	814	926	1,286
79	866	1,137	1,335	1,504	3,502	417	562	665	752	1,047	517	694	822	930	1,296
80	910	1,196	1,406	1,582	3,692	426	574	678	764	1,072	521	698	831	938	1,310
81	976	1,286	1,511	1,702	3,979	430	578	682	773	1,076	521	698	826	934	1,305
82	1,044	1,377	1,619	1,822	4,267	434	583	690	781	1,091	517	698	826	934	1,305
83	1,110	1,467	1,724	1,944	4,549	438	591	698	789	1,106	517	698	826	934	1,310
84	1,176	1,557	1,831	2,064	4,837	442	599	707	797	1,120	521	698	826	934	1,310
85	1,245	1,646	1,936	2,183	5,119	446	603	715	810	1,135	521	702	831	938	1,120

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

Comprehensive Policy

Individual Rates for Lifetime Premium Payment Optior
0-Day Elimination Period
Annual Premium Rates for Policies Issued On or After 9/16/2002 - Year 2
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	**Benefit Period**					**Benefit Period**					**Benefit Period**				
Age	*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	46	54	61	66	161	45	58	70	74	117	83	103	120	128	219
40	49	59	66	73	180	50	62	74	74	117	95	116	136	140	234
41	51	61	71	78	190	54	66	79	79	127	99	124	140	149	244
42	54	66	73	81	200	58	70	83	87	132	107	128	153	157	253
43	59	68	78	86	209	58	74	87	91	141	107	136	157	165	263
44	61	73	83	90	224	62	74	91	95	141	112	136	161	174	268
45	64	76	86	95	234	66	83	99	99	151	116	145	169	178	278
46	66	81	90	98	244	70	83	99	107	156	124	149	178	190	287
47	68	83	95	103	253	74	87	103	112	166	128	157	182	198	297
48	73	88	98	108	263	70	91	112	112	170	128	161	190	202	312
49	76	90	103	112	273	74	95	116	116	180	132	169	194	211	321
50	78	95	108	115	283	79	95	116	124	185	140	174	202	223	331
51	81	98	110	120	292	83	103	124	128	195	145	182	211	227	341
52	83	103	115	125	307	87	103	128	132	195	149	182	215	236	346
53	88	105	120	130	317	87	107	132	136	205	149	190	219	244	356
54	90	110	122	132	326	91	112	136	145	209	157	194	231	252	365
55	93	112	127	137	336	95	116	140	149	219	161	202	236	260	375
56	100	122	137	149	360	99	124	149	157	234	169	211	248	277	390
57	108	130	147	159	390	103	132	157	165	239	174	223	260	298	404
58	112	139	159	171	414	112	140	161	174	253	186	227	264	310	419
59	120	147	169	181	443	116	149	169	182	258	190	240	277	331	434
60	127	156	178	193	468	120	157	178	190	273	198	248	289	347	448
61	137	169	193	208	502	124	161	186	202	287	202	256	298	351	463
62	147	181	205	222	541	132	169	198	211	302	211	260	310	355	477
63	154	191	220	240	575	140	178	202	219	317	219	273	314	355	492
64	164	203	232	254	614	149	186	215	227	331	227	277	326	359	507
65	174	215	247	269	648	153	190	223	240	346	231	285	335	364	521
66	196	242	279	303	731	165	202	240	256	370	244	302	351	384	550
67	218	269	308	335	809	174	219	256	277	399	256	318	372	409	585
68	237	293	340	369	891	190	236	273	298	429	269	339	393	426	614
69	259	320	369	401	969	198	252	289	318	458	281	355	413	450	648
70	281	347	401	435	1,052	211	264	306	335	482	293	372	430	471	677
71	315	389	447	487	1,184	219	277	322	351	507	302	384	446	488	701
72	347	430	494	538	1,310	231	289	339	368	536	314	397	463	504	731
73	381	469	543	589	1,442	240	306	355	388	565	322	409	475	517	755
74	413	511	589	641	1,568	252	318	372	405	594	335	421	492	533	784
75	447	553	636	692	1,700	260	331	388	421	619	343	434	508	550	809
76	504	623	719	782	1,919	281	355	417	450	653	364	459	537	578	838
77	562	692	804	875	2,138	298	384	442	475	692	380	488	558	603	867
78	619	763	888	966	2,353	314	409	467	508	731	397	512	587	636	906
79	677	831	973	1,059	2,572	331	438	492	533	770	413	541	607	661	935
80	734	902	1,056	1,149	2,791	351	463	521	562	804	434	566	636	690	964
81	800	985	1,152	1,254	3,078	359	475	537	578	833	442	574	645	698	989
82	868	1,071	1,249	1,359	3,366	368	483	554	595	862	446	578	653	711	1,008
83	934	1,154	1,345	1,462	3,653	376	500	570	616	891	450	591	661	723	1,033
84	1,002	1,240	1,443	1,567	3,941	384	508	587	632	921	455	595	669	736	1,052
85	1,068	1,323	1,538	1,672	4,228	393	521	603	649	950	463	603	678	744	1,076

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

Comprehensive Policy

Individual Rates for Lifetime Premium Payment Optior
0-Day Elimination Period
Annual Premium Rates for Policies Issued On or After 9/16/2002 - Year 2
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	**Benefit Period**					**Benefit Period**					**Benefit Period**				
Age	*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	49	56	64	68	166	45	58	74	79	122	87	107	124	132	229
40	51	61	68	76	185	50	66	79	79	122	99	120	140	149	244
41	54	64	73	81	200	54	70	83	83	132	103	128	149	157	253
42	56	68	76	83	209	58	74	87	91	136	112	132	161	165	263
43	61	71	81	88	219	62	79	91	95	146	112	140	165	174	273
44	64	76	86	93	234	66	79	95	99	146	116	145	169	182	278
45	66	78	88	100	244	70	87	103	103	156	120	153	178	182	287
46	68	83	93	103	253	74	87	103	112	161	128	157	186	194	297
47	71	86	100	108	263	79	91	107	116	170	132	165	186	207	312
48	76	90	103	112	273	74	95	116	116	180	132	169	194	211	326
49	78	93	108	117	283	79	99	120	120	190	140	178	202	219	336
50	81	100	112	120	292	83	95	120	128	195	149	178	211	231	346
51	83	103	115	125	302	87	107	128	132	205	153	186	219	236	356
52	86	108	120	130	321	91	107	132	136	200	157	186	223	244	356
53	90	110	125	134	331	91	112	136	140	209	157	198	227	252	370
54	93	115	127	137	341	95	116	140	153	214	165	202	240	264	380
55	98	117	132	142	351	95	120	145	157	229	165	211	244	273	390
56	105	127	142	154	375	103	128	157	165	244	174	219	260	289	404
57	112	134	152	166	404	107	136	165	169	248	178	231	273	306	424
58	117	144	166	178	429	116	149	165	178	263	194	236	273	322	438
59	125	152	176	188	463	120	157	174	190	268	198	252	285	343	448
60	132	164	186	200	487	124	161	186	198	283	207	256	302	364	468
61	142	176	200	215	521	128	165	194	211	297	211	264	310	368	482
62	152	188	213	232	560	140	178	207	219	317	219	269	322	368	497
63	161	198	230	249	599	145	186	211	227	326	227	285	326	368	511
64	171	210	242	264	638	153	194	223	236	346	236	289	339	376	526
65	181	225	257	279	672	157	194	231	252	360	240	293	347	380	546
66	203	252	291	315	760	174	211	248	264	385	256	314	364	401	575
67	227	279	320	347	843	178	231	269	289	414	264	331	388	426	604
68	247	306	355	384	925	198	244	281	310	448	277	351	405	442	638
69	269	333	384	418	1,008	207	264	302	331	477	293	372	430	467	672
70	293	362	418	452	1,096	219	273	318	347	502	302	384	446	492	701
71	328	403	465	506	1,232	227	289	335	364	526	314	401	467	508	726
72	362	447	513	560	1,364	240	302	351	380	555	326	413	483	525	760
73	396	489	565	614	1,500	252	318	368	401	585	335	426	492	537	784
74	430	531	614	665	1,632	260	331	384	421	619	347	438	508	558	813
75	465	575	660	719	1,768	273	343	405	438	643	359	450	529	574	843
76	523	648	748	814	1,997	293	372	434	467	677	380	479	558	599	872
77	584	719	836	910	2,226	310	401	459	496	716	397	508	583	628	901
78	643	792	924	1,005	2,445	326	426	483	529	760	413	533	607	661	945
79	704	866	1,012	1,100	2,674	343	455	512	554	799	430	562	632	690	974
80	763	939	1,098	1,196	2,903	364	479	541	583	838	450	587	661	715	1,003
81	831	1,024	1,198	1,306	3,200	376	496	558	599	867	459	599	669	723	1,028
82	902	1,115	1,298	1,413	3,502	384	500	578	620	896	467	599	682	740	1,047
83	971	1,201	1,399	1,521	3,799	393	521	595	640	925	471	616	686	752	1,072
84	1,042	1,289	1,501	1,631	4,096	401	529	607	657	960	475	620	694	764	1,096
85	1,110	1,377	1,599	1,738	4,398	409	541	628	678	989	483	624	707	777	1,120

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

Comprehensive Policy

Individual Rates for Lifetime Premium Payment Optior
0-Day Elimination Period
Annual Premium Rates for Policies Issued On or After 9/16/2002 - Year 2
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	**Benefit Period**					**Benefit Period**					**Benefit Period**				
Age	*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	83	214	54	70	83	87	141	99	124	149	157	248
40	61	73	83	90	229	66	79	95	99	161	116	145	169	178	283
41	66	78	88	95	244	66	83	99	107	170	120	149	178	186	292
42	68	83	93	103	258	74	87	107	107	175	124	153	182	190	307
43	73	88	100	108	273	74	91	107	116	185	128	161	186	198	317
44	76	93	105	112	287	79	91	112	120	190	136	165	194	207	326
45	81	98	110	120	307	83	95	116	124	195	136	169	202	211	331
46	83	100	115	125	321	87	103	124	128	205	145	178	207	219	346
47	88	105	120	130	336	87	107	128	136	209	149	182	215	227	356
48	90	110	127	137	351	91	112	128	136	219	153	190	219	231	365
49	95	115	132	142	365	95	116	132	145	224	157	194	223	240	375
50	100	120	137	149	380	95	120	140	149	234	161	198	231	248	390
51	103	125	142	154	395	99	120	145	153	244	165	202	240	256	399
52	108	130	147	159	409	103	124	149	161	248	169	207	244	264	409
53	110	134	154	166	424	107	128	149	161	258	174	215	248	269	419
54	115	139	159	171	438	107	132	157	169	263	178	219	256	277	434
55	117	144	164	176	458	116	136	161	174	268	186	223	264	285	438
56	122	147	169	183	472	116	145	165	178	278	186	231	269	289	448
57	125	152	174	188	487	120	145	169	182	283	194	236	277	298	458
58	130	156	181	193	502	120	149	174	190	292	198	244	281	306	472
59	132	161	186	200	516	128	153	178	190	297	202	248	285	310	482
60	137	166	191	205	531	128	157	182	198	307	207	252	293	318	492
61	149	181	208	225	580	132	165	190	207	321	211	260	302	326	507
62	161	196	225	242	628	140	174	198	219	336	219	269	310	339	526
63	171	210	242	262	672	149	182	211	227	360	227	277	322	351	546
64	183	225	259	279	721	157	190	219	240	375	236	285	331	364	565
65	196	240	276	298	770	161	198	227	248	390	240	293	339	372	580
66	218	267	306	330	857	169	211	244	269	414	248	306	355	393	609
67	237	291	335	364	940	182	227	260	281	443	264	322	376	409	638
68	259	318	367	396	1,028	194	236	273	302	468	273	339	388	426	667
69	279	342	396	430	1,111	207	252	289	314	497	289	355	409	442	697
70	301	369	425	462	1,198	215	264	306	335	521	298	368	426	463	726
71	335	413	474	516	1,339	227	277	326	355	550	310	380	446	483	755
72	372	455	526	570	1,481	236	293	339	372	580	318	397	459	500	784
73	406	499	575	623	1,622	252	310	359	393	609	335	413	479	521	813
74	443	540	626	677	1,763	260	326	372	409	638	343	430	492	537	843
75	477	584	675	731	1,905	273	339	393	430	667	355	442	512	558	872
76	535	658	758	822	2,148	289	359	421	459	706	372	463	537	587	911
77	594	729	841	914	2,387	306	384	450	483	750	388	483	562	612	955
78	650	802	927	1,005	2,630	322	401	471	508	794	405	504	587	636	999
79	709	873	1,010	1,098	2,869	339	426	500	533	838	421	525	612	661	1,042
80	768	946	1,093	1,188	3,112	355	446	529	562	877	438	545	636	690	1,081
81	836	1,032	1,191	1,296	3,400	364	459	545	578	906	442	554	645	698	1,096
82	905	1,117	1,291	1,403	3,687	372	471	562	595	930	450	562	649	707	1,115
83	976	1,205	1,389	1,511	3,979	376	475	578	616	955	450	566	661	711	1,125
84	1,044	1,291	1,489	1,619	4,267	384	488	595	632	979	459	574	665	719	1,145
85	1,112	1,377	1,587	1,726	4,554	393	500	612	649	1,008	463	583	674	727	1,159

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

Comprehensive Policy

Individual Rates for Lifetime Premium Payment Optior
0-Day Elimination Period
Annual Premium Rates for Policies Issued On or After 9/16/2002 - Year 2
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	**Benefit Period**					**Benefit Period**					**Benefit Period**				
Age	*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	71	81	86	224	54	74	87	91	146	103	128	157	165	258
40	64	76	86	93	239	70	83	99	103	166	120	153	178	186	292
41	68	81	90	100	253	70	87	103	112	175	124	157	186	190	302
42	71	86	98	108	268	79	91	112	112	185	128	161	186	198	321
43	76	90	105	112	283	79	95	112	120	195	132	169	190	207	331
44	78	98	110	117	297	83	91	116	124	200	145	169	202	215	341
45	83	103	115	125	321	87	99	120	128	200	145	174	211	219	341
46	86	105	120	130	336	91	107	128	132	209	153	182	215	227	356
47	90	110	125	134	351	91	112	132	140	214	157	186	223	236	370
48	93	115	132	142	365	95	116	132	145	229	161	198	227	240	380
49	100	120	137	147	380	95	120	136	153	234	161	202	231	252	390
50	105	125	142	154	395	99	124	149	157	244	165	207	240	260	404
51	108	130	147	161	409	103	124	153	157	253	169	211	252	264	419
52	112	134	152	166	424	107	128	157	165	258	174	215	256	273	429
53	115	139	161	174	438	112	132	153	165	273	178	223	256	277	438
54	120	144	166	178	458	112	140	161	174	273	186	227	264	285	448
55	122	149	171	183	477	120	145	165	182	278	194	236	273	298	453
56	127	152	176	191	492	120	153	169	186	287	194	244	277	302	468
57	130	156	181	196	507	124	153	174	190	292	202	248	289	310	477
58	134	164	188	200	521	124	153	182	198	307	207	252	293	318	492
59	137	169	193	208	536	132	157	186	198	312	211	256	298	322	502
60	142	174	198	213	550	132	161	190	207	321	215	260	306	331	511
61	154	188	215	235	604	140	174	198	215	331	219	269	314	339	526
62	169	203	235	252	653	145	182	207	227	351	227	281	322	351	546
63	178	218	252	271	701	153	190	219	236	370	236	289	335	368	565
64	191	235	269	291	750	165	198	227	248	390	244	293	343	376	589
65	203	249	289	311	799	169	207	236	256	409	252	306	351	384	604
66	227	276	318	342	891	174	219	252	281	429	256	318	368	409	633
67	247	303	347	379	979	190	236	273	293	458	273	335	393	426	662
68	269	330	381	411	1,067	202	244	285	314	487	285	351	405	446	697
69	291	357	411	447	1,154	215	260	302	326	516	298	368	426	459	726
70	313	384	443	482	1,247	223	277	318	347	541	310	384	442	479	755
71	347	430	494	535	1,393	240	285	339	372	575	322	393	463	504	784
72	386	472	548	592	1,539	244	306	351	388	604	331	413	475	521	818
73	423	518	597	648	1,685	260	322	376	409	633	347	430	500	541	848
74	460	562	650	704	1,831	273	339	388	426	667	359	446	512	558	877
75	496	609	702	760	1,982	281	351	409	446	692	368	459	533	578	906
76	557	685	787	853	2,236	302	372	438	479	731	384	479	562	612	945
77	619	758	875	951	2,484	318	401	467	504	779	401	504	583	636	989
78	677	834	963	1,044	2,737	335	417	492	529	823	421	525	612	665	1,037
79	738	907	1,051	1,142	2,986	351	442	517	554	867	438	545	632	686	1,081
80	800	983	1,137	1,235	3,239	368	467	550	587	911	455	570	661	719	1,120
81	870	1,073	1,237	1,347	3,536	376	475	570	603	940	459	574	674	727	1,140
82	941	1,161	1,342	1,460	3,833	384	492	587	620	969	467	587	674	736	1,159
83	1,015	1,254	1,445	1,572	4,140	393	492	599	640	994	467	587	686	740	1,169
84	1,086	1,342	1,548	1,682	4,437	401	508	620	661	1,018	479	599	694	748	1,188
85	1,156	1,433	1,650	1,795	4,734	409	517	636	678	1,052	483	603	698	756	1,208

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 for Policies Issued On or After 9/16/2002 - Year 2
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	**Benefit Period**					**Benefit Period**					**Benefit Period**				
Age	*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	83	100	115	122	317	107	132	153	169	263	207	260	302	331	511
41	88	108	122	130	336	116	140	161	182	278	219	273	318	351	536
42	93	112	130	139	356	120	149	174	190	287	231	293	339	368	560
43	98	120	137	147	370	128	157	182	202	307	248	306	355	393	589
44	105	125	144	154	390	132	169	194	215	321	256	326	376	413	619
45	110	132	152	161	409	140	178	202	227	336	269	339	393	434	643
46	115	139	159	171	429	145	182	215	236	346	281	351	413	450	667
47	120	144	166	178	448	153	194	223	248	360	293	372	430	471	692
48	125	152	174	186	463	161	202	236	256	380	310	384	450	496	721
49	130	156	181	193	482	169	215	244	269	395	322	405	467	517	745
50	134	164	188	203	502	174	219	256	277	404	335	417	488	533	770
51	139	171	196	210	521	182	227	264	289	419	347	430	504	554	794
52	147	176	203	218	541	186	240	277	302	434	355	450	525	574	823
53	152	183	210	225	555	194	248	285	314	453	372	463	541	599	852
54	156	188	218	235	575	198	256	298	322	463	384	483	562	616	877
55	161	196	225	242	594	207	264	306	335	477	397	496	578	636	901
56	171	208	240	257	628	215	273	314	347	497	405	508	591	653	930
57	181	220	254	271	662	223	285	326	359	516	413	521	603	669	955
58	188	232	267	289	701	236	293	339	372	526	430	533	620	678	979
59	198	245	281	303	735	244	306	351	384	546	438	545	632	694	1,003
60	208	257	296	318	770	252	314	359	397	565	446	558	645	711	1,033
61	218	269	311	335	809	256	322	368	405	580	446	562	649	715	1,037
62	230	284	325	352	852	256	326	376	413	585	442	562	653	719	1,037
63	240	296	342	369	891	264	335	384	421	599	442	570	657	719	1,042
64	252	311	357	386	935	264	339	393	430	604	438	570	661	723	1,042
65	262	323	372	403	974	269	347	401	438	619	438	574	665	727	1,047
66	289	350	403	440	1,062	269	359	413	450	638	434	578	669	727	1,047
67	315	379	435	474	1,145	273	368	426	463	662	434	578	674	731	1,052
68	342	406	469	511	1,232	273	376	438	475	682	430	583	674	731	1,057
69	369	435	501	545	1,315	277	384	450	488	706	430	583	678	736	1,062
70	396	462	533	582	1,403	277	397	463	500	726	426	587	682	736	1,062
71	423	501	577	628	1,534	289	401	471	508	731	430	583	678	736	1,052
72	450	538	621	677	1,666	302	409	479	517	735	438	583	678	731	1,047
73	474	577	665	724	1,792	314	417	483	525	740	446	583	674	731	1,042
74	501	614	709	773	1,924	326	426	492	533	745	455	583	674	727	1,037
75	528	653	753	819	2,055	339	430	500	541	750	459	578	669	727	1,028
76	582	721	834	907	2,255	351	446	517	558	779	467	591	682	740	1,047
77	636	792	914	993	2,450	364	459	533	583	818	475	595	690	756	1,072
78	692	861	993	1,081	2,650	376	471	554	599	848	483	607	707	764	1,096
79	746	932	1,073	1,166	2,845	388	483	570	624	886	492	612	715	781	1,120
80	800	1,000	1,154	1,254	3,044	401	500	587	640	916	500	624	727	793	1,140
81	861	1,076	1,242	1,352	3,312	405	508	595	649	930	500	628	731	797	1,120
82	922	1,152	1,330	1,447	3,575	409	512	603	661	950	500	628	736	810	1,101
83	983	1,230	1,418	1,545	3,843	417	517	616	665	969	496	628	744	814	1,081
84	1,044	1,306	1,506	1,641	4,106	421	521	624	678	989	496	628	748	826	1,062
85	1,105	1,381	1,594	1,738	4,374	426	529	632	686	1,003	496	632	752	831	1,042

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 for Policies Issued On or After 9/16/2002 - Year 2
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				
	Benefit Period					Benefit Period					Benefit Period				
Issue Age	*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	86	105	120	127	331	112	136	157	178	273	215	269	314	343	531
41	90	112	127	134	351	124	145	169	190	287	231	281	331	368	555
42	98	117	134	144	370	124	153	182	198	297	240	306	351	384	585
43	103	125	142	152	385	132	161	190	211	321	256	318	372	409	614
44	110	130	149	161	404	136	178	202	223	336	264	339	393	430	643
45	115	137	156	169	424	145	186	211	236	351	277	351	409	450	672
46	120	144	166	178	448	149	190	223	244	356	293	368	430	467	692
47	125	149	174	186	468	157	202	231	256	375	306	388	446	488	716
48	130	156	181	193	482	169	211	244	269	395	322	401	467	517	750
49	134	164	188	200	502	178	223	252	281	409	335	417	483	537	774
50	139	171	196	210	521	182	227	269	289	419	347	434	508	554	799
51	144	178	203	218	541	190	236	277	302	438	364	446	525	578	828
52	152	183	210	227	560	194	248	289	310	453	372	467	545	595	857
53	156	191	218	235	580	202	256	298	326	468	388	479	566	620	886
54	164	196	227	245	599	202	269	306	335	482	397	504	583	640	911
55	169	203	235	252	619	215	277	318	347	497	409	517	599	661	935
56	178	215	249	267	653	223	285	326	364	516	421	529	616	682	969
57	188	230	264	281	687	231	293	339	376	541	430	541	628	698	994
58	196	242	276	301	731	244	306	355	384	546	446	554	645	702	1,018
59	205	254	293	315	765	256	318	364	401	570	455	566	657	723	1,042
60	215	267	308	330	799	264	326	372	413	589	467	583	669	740	1,076
61	227	279	323	347	843	264	339	384	421	599	463	587	674	744	1,076
62	240	296	337	367	886	264	339	393	430	609	459	583	682	748	1,081
63	249	308	357	384	925	273	347	397	438	623	459	591	682	748	1,086
64	262	323	372	401	974	277	351	409	446	628	455	595	686	752	1,081
65	271	335	386	421	1,013	281	364	417	455	643	459	599	694	756	1,091
66	301	364	421	457	1,106	277	372	430	471	662	450	599	694	756	1,086
67	328	394	452	494	1,188	285	384	442	479	692	450	603	702	760	1,096
68	357	423	489	531	1,281	281	388	455	496	711	446	603	698	760	1,101
69	384	452	521	567	1,369	289	401	471	508	735	446	607	707	764	1,106
70	411	482	555	606	1,461	289	409	479	517	750	446	607	707	764	1,101
71	440	521	599	653	1,598	302	417	492	529	760	446	607	707	764	1,091
72	467	560	645	704	1,734	314	426	500	537	765	459	603	707	760	1,086
73	494	599	692	753	1,866	326	434	504	545	770	463	607	698	760	1,081
74	521	638	738	804	2,002	339	442	508	554	774	475	607	698	756	1,076
75	550	680	782	851	2,138	351	446	521	566	779	475	599	698	756	1,067
76	606	751	868	944	2,348	364	463	537	578	809	483	616	707	769	1,086
77	660	824	951	1,032	2,547	380	475	554	607	852	496	620	719	789	1,115
78	719	895	1,032	1,125	2,757	393	492	578	620	882	504	632	736	793	1,140
79	775	968	1,117	1,213	2,957	405	504	591	649	925	512	636	740	814	1,169
80	831	1,039	1,201	1,306	3,166	417	521	612	665	955	521	649	756	822	1,184
81	895	1,120	1,291	1,406	3,444	421	529	620	674	969	521	653	760	831	1,164
82	958	1,198	1,384	1,506	3,716	426	533	628	686	989	521	653	764	843	1,145
83	1,022	1,279	1,474	1,606	3,999	434	537	640	694	1,008	517	653	773	847	1,120
84	1,086	1,357	1,567	1,707	4,272	438	541	649	702	1,028	517	653	777	859	1,101
85	1,149	1,438	1,658	1,807	4,549	442	550	657	715	1,042	517	657	781	864	1,081

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 for Policies Issued On or After 9/16/2002 - Year 2
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	**Benefit Period**					**Benefit Period**					**Benefit Period**				
Age	*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	105	127	144	154	399	132	165	190	215	331	260	318	368	409	628
41	110	134	152	164	424	140	174	202	223	346	273	331	384	421	653
42	117	142	161	174	448	145	182	207	231	360	281	343	397	438	672
43	122	149	169	181	472	153	186	219	244	375	289	355	413	455	697
44	130	156	178	191	492	157	194	223	252	390	298	368	421	471	726
45	134	164	186	200	516	165	202	236	260	404	310	380	438	483	745
46	142	171	196	210	541	169	211	244	269	419	318	388	450	496	770
47	147	178	203	218	565	178	219	252	281	434	331	401	467	517	794
48	154	186	213	227	589	182	223	260	289	448	335	413	479	529	813
49	159	193	220	237	614	190	231	269	298	463	347	426	496	545	838
50	166	200	230	247	638	194	240	277	310	477	355	438	508	558	862
51	171	205	237	254	658	198	252	289	322	492	368	455	521	574	886
52	176	213	245	264	682	207	260	298	331	507	380	467	537	591	911
53	183	220	254	274	706	211	264	306	339	521	384	479	550	603	930
54	188	227	262	284	731	219	273	314	347	536	397	492	566	620	955
55	196	235	271	291	755	223	281	322	359	550	405	504	578	636	979
56	200	242	279	301	779	231	289	335	368	565	417	512	595	649	999
57	208	249	289	311	799	236	298	339	376	580	426	525	603	665	1,028
58	213	257	296	320	823	244	302	351	384	594	434	537	620	678	1,052
59	220	264	306	328	848	248	310	355	397	609	442	550	632	698	1,072
60	225	271	313	337	872	256	318	368	405	623	455	562	649	711	1,096
61	237	289	333	357	925	260	322	372	413	633	455	558	645	711	1,091
62	249	303	350	377	979	264	326	380	417	643	455	558	645	707	1,086
63	264	320	369	399	1,028	269	331	384	421	653	446	554	640	702	1,091
64	276	335	386	418	1,081	273	335	393	426	662	446	554	640	698	1,086
65	289	352	406	438	1,135	277	339	397	434	672	446	550	636	698	1,081
66	320	379	438	472	1,223	269	347	405	446	692	430	554	640	702	1,091
67	352	406	467	506	1,315	256	359	421	459	711	417	558	645	702	1,091
68	381	433	499	540	1,403	252	368	430	467	731	405	558	649	707	1,101
69	413	460	528	575	1,495	240	380	446	479	750	393	562	653	707	1,101
70	445	487	560	609	1,583	231	388	455	492	770	376	566	657	711	1,111
71	469	528	606	660	1,715	252	397	463	500	789	393	570	661	715	1,120
72	491	567	653	712	1,851	277	409	475	512	799	413	574	669	719	1,125
73	516	609	702	760	1,982	302	413	479	525	818	434	578	669	731	1,135
74	538	648	748	812	2,119	326	426	492	537	828	455	583	678	736	1,140
75	562	689	795	863	2,250	347	434	500	545	848	471	587	682	740	1,150
76	616	758	875	949	2,479	359	450	517	566	877	479	595	686	748	1,164
77	672	826	954	1,037	2,708	372	463	541	583	911	479	599	698	756	1,179
78	726	897	1,034	1,122	2,937	384	475	558	603	940	488	603	702	764	1,193
79	782	966	1,112	1,210	3,166	397	488	583	620	974	488	607	715	773	1,208
80	836	1,034	1,193	1,296	3,395	409	504	599	640	1,003	496	616	719	781	1,223
81	897	1,112	1,284	1,394	3,658	413	508	607	649	1,018	496	616	719	781	1,188
82	958	1,191	1,374	1,494	3,921	421	517	616	657	1,028	500	616	719	777	1,150
83	1,022	1,267	1,462	1,592	4,179	421	525	624	665	1,047	496	620	727	781	1,120
84	1,083	1,345	1,553	1,692	4,442	430	533	632	674	1,057	500	620	727	777	1,081
85	1,144	1,423	1,643	1,790	4,705	434	537	640	682	1,072	500	620	727	777	1,047

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 for Policies Issued On or After 9/16/2002 - Year 2
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	**Benefit Period**					**Benefit Period**					**Benefit Period**				
Age	*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	110	132	149	161	414	136	174	198	223	346	269	331	384	421	653
41	115	139	156	171	438	145	182	211	231	360	281	343	401	438	682
42	122	147	169	181	468	149	190	215	240	375	293	359	409	455	697
43	127	154	176	188	492	157	194	227	252	390	302	372	430	471	726
44	134	164	186	198	511	165	198	231	264	404	310	380	438	492	755
45	139	171	193	208	536	174	211	244	273	424	322	393	455	504	774
46	147	178	203	218	560	178	219	256	281	438	331	405	471	517	804
47	152	186	210	227	589	186	227	264	289	448	347	417	488	537	823
48	161	193	220	237	614	186	231	273	302	468	347	430	500	550	848
49	166	200	230	247	638	194	240	277	310	482	359	442	512	566	872
50	174	208	240	257	662	202	252	285	322	497	368	459	529	578	896
51	178	213	247	264	682	207	264	302	335	511	380	475	541	599	925
52	183	220	254	274	711	215	273	310	347	526	397	488	558	616	945
53	191	230	264	284	735	219	273	318	355	541	401	496	570	628	964
54	196	237	271	296	760	227	281	326	359	555	413	508	591	645	994
55	203	245	281	303	784	231	293	339	372	575	421	525	603	661	1,018
56	208	252	291	313	809	244	302	347	380	589	434	533	616	674	1,042
57	215	259	301	323	833	248	310	351	393	599	446	545	628	694	1,067
58	220	267	308	333	857	256	314	364	401	619	455	558	645	707	1,091
59	230	274	318	340	882	256	322	368	413	633	459	574	657	727	1,115
60	235	281	325	352	906	264	335	384	417	648	471	587	674	736	1,140
61	247	301	345	372	964	269	335	388	430	658	471	578	674	740	1,135
62	259	315	364	391	1,018	277	339	393	434	667	471	578	669	736	1,130
63	274	333	384	416	1,067	281	343	401	438	682	467	578	665	727	1,135
64	289	347	401	435	1,125	281	351	409	442	687	463	578	669	727	1,130
65	301	367	423	455	1,179	285	351	409	450	701	463	570	661	727	1,125
66	333	394	455	491	1,271	281	364	421	463	721	446	578	665	731	1,135
67	367	423	487	526	1,369	264	372	438	479	740	434	578	669	731	1,135
68	396	450	518	562	1,461	264	384	446	483	760	421	578	674	736	1,145
69	430	479	550	597	1,554	248	393	463	500	779	409	583	678	736	1,145
70	462	506	582	633	1,646	244	405	475	512	799	393	587	686	740	1,154
71	489	550	631	687	1,783	260	409	479	521	823	405	591	686	744	1,164
72	511	589	680	741	1,924	289	426	492	533	833	430	599	694	748	1,169
73	535	633	729	790	2,060	314	430	500	550	852	455	603	698	764	1,184
74	560	675	778	844	2,202	339	442	512	558	862	471	603	707	764	1,188
75	584	716	826	897	2,338	364	450	521	566	882	492	612	711	769	1,198
76	641	787	910	988	2,577	376	471	537	587	916	500	620	715	777	1,213
77	699	861	993	1,078	2,815	388	479	562	607	950	500	620	723	785	1,227
78	756	934	1,076	1,166	3,054	401	492	578	628	979	508	628	731	797	1,242
79	814	1,005	1,156	1,259	3,293	413	508	607	645	1,013	508	632	744	802	1,257
80	870	1,076	1,242	1,347	3,531	426	525	620	665	1,042	512	640	744	814	1,271
81	934	1,156	1,335	1,450	3,804	430	529	632	674	1,057	512	640	748	810	1,237
82	998	1,237	1,428	1,553	4,077	438	537	640	686	1,072	521	640	748	810	1,198
83	1,064	1,318	1,521	1,655	4,345	438	545	649	690	1,091	517	645	756	814	1,169
84	1,127	1,399	1,614	1,760	4,618	446	554	661	698	1,101	521	645	756	806	1,125
85	1,191	1,479	1,709	1,861	4,895	450	558	665	711	1,111	521	645	756	810	1,086

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 for Policies Issued On or After 9/16/2002 - Year 3
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		
Issue	**Benefit Period**			**Benefit Period**			**Benefit Period**		
Age	*1 Year*	*2 Years*	*3 Years*	*1 Year*	*2 Years*	*3 Years*	*1 Year*	*2 Years*	*3 Years*
<45	20	24	27	10	15	19	34	53	68
45	22	24	27	10	19	24	34	58	77
46	22	27	29	10	19	24	39	58	82
47	22	27	32	15	24	29	44	68	82
48	24	29	34	15	24	29	44	68	87
49	24	32	34	19	24	39	48	73	97
50	27	32	37	19	34	39	48	82	106
51	27	34	42	24	34	39	53	87	106
52	29	37	44	24	39	48	53	92	116
53	32	39	46	24	44	53	58	97	126
54	32	44	51	29	44	58	63	97	131
55	34	46	54	34	48	68	68	106	140
56	37	49	59	39	58	73	73	116	150
57	39	54	64	39	63	82	77	121	160
58	44	59	71	39	68	87	77	131	169
59	46	64	78	48	77	97	87	140	179
60	51	71	86	48	82	106	87	145	189
61	56	78	95	58	92	126	97	160	213
62	61	86	108	68	111	140	111	179	232
63	66	98	120	77	121	160	126	193	256
64	73	108	134	87	135	179	135	218	280
65	83	122	154	97	155	198	145	237	305
66	93	139	174	106	169	222	160	251	334
67	105	156	196	111	184	242	169	276	358
68	117	176	220	121	203	266	179	295	387
69	132	200	252	135	222	290	193	314	411
70	147	227	286	150	242	319	213	334	440
71	154	237	301	150	242	319	213	334	440
72	174	267	337	155	256	338	218	343	450
73	193	298	377	164	271	363	218	358	474
74	213	330	418	179	290	387	232	377	493
75	237	369	467	184	305	406	237	387	512
76	262	408	518	198	324	430	247	406	537
77	289	452	572	203	338	454	256	416	556
78	318	496	628	213	353	479	261	435	575
79	345	540	685	222	372	498	266	450	599
80	347	543	687	222	372	498	266	450	599
81	374	587	741	222	377	508	271	450	599
82	403	633	797	227	377	508	271	454	609
83	435	680	856	227	392	527	271	454	609
84	469	736	924	237	401	541	276	459	619
85	506	795	998	247	416	561	285	474	638

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 for Policies Issued On or After 9/16/2002 - Year 3
Rates per $20 NCF

Issue	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:	
Age	50%	100%	50%	100%	50%	100%	50%	100%
<40	64	95	78	120	100	154	259	392
40	68	100	83	127	105	164	277	415
41	71	105	88	134	112	174	294	438
42	76	112	93	142	117	183	311	467
43	78	117	98	149	125	196	334	495
44	83	125	105	159	132	208	351	524
45	88	132	110	169	142	220	374	559
46	93	139	117	178	149	232	398	593
47	98	149	125	188	159	247	426	634
48	105	156	132	200	169	262	455	674
49	110	166	139	213	178	276	484	714
50	117	176	149	225	191	293	519	761
51	125	188	159	240	203	313	553	812
52	134	200	169	254	218	333	593	864
53	142	213	181	271	232	355	640	928
54	152	227	193	291	249	377	686	991
55	164	242	205	311	267	403	737	1,060
56	174	257	222	330	286	430	795	1,135
57	186	276	237	352	308	460	858	1,216
58	200	293	257	377	330	489	928	1,302
59	215	315	274	403	355	523	1,002	1,400
60	232	337	296	433	384	562	1,083	1,509
61	254	367	325	469	418	609	1,193	1,642
62	279	399	355	509	457	658	1,314	1,786
63	306	433	389	553	501	714	1,446	1,947
64	337	472	428	599	550	773	1,590	2,120
65	379	526	479	665	616	853	1,792	2,351
66	418	570	528	721	680	927	1,976	2,564
67	460	621	582	785	748	1,007	2,184	2,806
68	504	675	638	853	822	1,093	2,408	3,054
69	560	741	709	936	912	1,201	2,679	3,365
70	621	814	787	1,027	1,010	1,313	2,973	3,693
71	643	831	812	1,049	1,042	1,340	3,059	3,768
72	709	910	895	1,144	1,147	1,457	3,365	4,108
73	778	988	983	1,245	1,257	1,582	3,693	4,465
74	851	1,068	1,073	1,345	1,374	1,709	4,039	4,840
75	932	1,161	1,176	1,460	1,506	1,853	4,419	5,249
76	1,015	1,254	1,284	1,575	1,641	2,000	4,805	5,658
77	1,098	1,345	1,389	1,687	1,775	2,137	5,168	6,038
78	1,183	1,435	1,499	1,797	1,910	2,271	5,537	6,407
79	1,267	1,521	1,606	1,905	2,042	2,401	5,871	6,735
80	1,267	1,521	1,606	1,905	2,042	2,401	5,871	6,735
81	1,340	1,577	1,694	1,968	2,132	2,455	6,044	6,816
82	1,428	1,668	1,807	2,081	2,262	2,582	6,361	7,127
83	1,528	1,768	1,927	2,203	2,396	2,716	6,677	7,444
84	1,638	1,880	2,064	2,345	2,558	2,880	7,064	7,836
85	1,763	2,010	2,215	2,506	2,738	3,069	7,496	8,291

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 for Policies Issued On or After 9/16/2002 - Year 3
Rates per $20 NCF

Issue	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:	
Age	50%	100%	50%	100%	50%	100%	50%	100%
<40	63	97	82	135	116	198	167	259
40	63	106	87	145	126	208	179	277
41	68	116	92	150	131	222	190	300
42	73	121	97	164	145	237	207	317
43	77	131	106	174	150	251	219	340
44	82	135	111	184	164	266	236	363
45	87	145	121	193	169	280	254	386
46	97	155	126	208	184	300	271	409
47	102	160	135	222	193	314	288	432
48	106	174	145	237	208	334	311	461
49	116	184	160	251	227	358	334	495
50	126	198	169	266	237	382	363	530
51	135	208	179	285	256	401	392	565
52	140	218	193	300	271	425	421	611
53	155	237	208	319	295	454	455	645
54	164	247	222	338	314	483	495	691
55	174	266	242	358	338	512	530	743
56	193	285	256	387	363	541	576	795
57	208	300	276	411	387	575	622	853
58	222	324	295	435	416	619	674	916
59	237	338	319	459	445	653	732	979
60	256	363	338	488	474	687	795	1,043
61	280	396	372	532	527	745	881	1,147
62	309	425	411	575	575	807	968	1,244
63	338	464	450	619	628	865	1,060	1,348
64	363	498	483	667	682	933	1,164	1,458
65	401	537	537	716	749	1,006	1,273	1,584
66	435	580	575	769	807	1,073	1,383	1,705
67	469	614	619	822	865	1,141	1,498	1,826
68	503	653	667	865	933	1,209	1,607	1,947
69	541	701	720	928	1,006	1,291	1,746	2,091
70	585	740	778	991	1,088	1,378	1,878	2,235
71	575	730	769	972	1,073	1,344	1,867	2,201
72	604	759	807	1,010	1,131	1,407	1,970	2,305
73	638	793	851	1,049	1,189	1,465	2,068	2,408
74	662	822	890	1,093	1,247	1,523	2,172	2,512
75	696	856	933	1,136	1,305	1,581	2,282	2,621
76	730	885	977	1,180	1,373	1,644	2,385	2,731
77	754	909	1,015	1,213	1,421	1,692	2,477	2,806
78	783	933	1,054	1,252	1,479	1,740	2,552	2,875
79	812	957	1,093	1,281	1,528	1,779	2,616	2,927
80	812	957	1,093	1,281	1,528	1,779	2,616	2,927
81	788	923	1,068	1,238	1,484	1,707	2,489	2,846
82	817	948	1,097	1,267	1,523	1,736	2,524	2,794
83	841	972	1,131	1,296	1,566	1,774	2,558	2,823
84	870	1,001	1,165	1,334	1,610	1,818	2,610	2,869
85	899	1,030	1,209	1,373	1,663	1,871	2,668	2,921

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 for Policies Issued On or After 9/16/2002 - Year 3
Rates per $20 NCF

Issue	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:	
Age	50%	100%	50%	100%	50%	100%	50%	100%
<40	160	242	213	329	300	469	461	663
40	164	256	222	343	314	488	484	691
41	174	266	232	358	324	508	507	726
42	179	276	242	372	343	532	536	761
43	193	290	256	392	358	551	559	789
44	198	300	266	406	377	570	588	824
45	208	314	280	421	392	595	616	858
46	218	329	290	435	411	619	645	899
47	227	338	300	454	425	643	674	933
48	237	353	314	474	445	667	709	974
49	251	367	334	493	469	696	749	1,020
50	261	382	348	512	488	725	784	1,066
51	271	396	363	532	508	749	824	1,106
52	280	411	377	556	532	778	858	1,158
53	300	430	396	575	556	807	899	1,204
54	309	445	416	595	575	841	945	1,256
55	324	459	435	619	604	865	991	1,308
56	338	483	450	643	628	899	1,043	1,365
57	358	498	474	672	657	933	1,095	1,429
58	372	522	493	696	691	972	1,152	1,492
59	392	541	517	720	720	1,010	1,210	1,556
60	411	561	541	749	749	1,044	1,273	1,619
61	445	604	585	798	817	1,112	1,383	1,740
62	479	643	633	856	875	1,189	1,486	1,861
63	512	687	677	909	938	1,257	1,602	1,988
64	546	725	725	962	1,006	1,334	1,723	2,114
65	595	774	783	1,025	1,083	1,417	1,855	2,264
66	628	822	832	1,083	1,151	1,494	1,982	2,403
67	667	861	880	1,136	1,218	1,566	2,109	2,529
68	711	899	933	1,189	1,286	1,639	2,230	2,656
69	754	952	991	1,252	1,368	1,721	2,379	2,812
70	798	996	1,049	1,315	1,450	1,813	2,524	2,967
71	774	962	1,020	1,271	1,412	1,760	2,466	2,892
72	798	986	1,054	1,300	1,460	1,794	2,558	2,967
73	822	1,010	1,088	1,334	1,513	1,842	2,650	3,059
74	846	1,035	1,126	1,368	1,562	1,890	2,748	3,152
75	875	1,064	1,165	1,402	1,615	1,939	2,852	3,255
76	904	1,088	1,199	1,441	1,673	1,992	2,944	3,347
77	928	1,107	1,238	1,465	1,716	2,031	3,025	3,411
78	948	1,126	1,267	1,494	1,769	2,069	3,088	3,463
79	972	1,146	1,300	1,518	1,803	2,098	3,134	3,497
80	972	1,146	1,300	1,518	1,803	2,098	3,134	3,497
81	933	1,088	1,252	1,446	1,731	1,992	2,961	3,417
82	957	1,102	1,271	1,465	1,760	2,002	2,961	3,267
83	972	1,122	1,300	1,489	1,794	2,031	2,979	3,278
84	1,001	1,146	1,330	1,518	1,832	2,069	3,019	3,313
85	1,025	1,170	1,368	1,557	1,881	2,118	3,059	3,353

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 for Policies Issued On or After 9/16/2002 - Year 3
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	**Benefit Period**					**Benefit Period**					**Benefit Period**				
Age	*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	90	105	117	317	82	116	121	126	207	150	198	232	261	369
40	78	100	115	130	346	92	126	131	135	230	164	218	256	290	409
41	83	103	120	134	357	97	131	135	140	242	169	227	266	305	421
42	86	108	125	139	369	102	135	140	145	248	179	237	276	314	438
43	88	110	127	144	386	106	140	145	150	259	184	242	285	324	455
44	90	115	132	149	398	106	145	150	155	265	189	251	295	334	467
45	95	117	137	154	409	111	150	155	160	277	198	261	305	348	484
46	98	122	142	159	421	116	150	160	164	282	203	266	314	358	501
47	100	125	147	164	438	116	155	164	169	294	208	276	324	367	513
48	103	130	149	169	449	121	160	169	174	300	213	285	334	377	530
49	105	132	154	174	461	126	164	174	179	311	222	295	343	392	547
50	110	137	159	178	472	131	169	179	189	317	227	300	353	401	559
51	112	139	164	181	490	131	174	184	193	328	232	309	363	411	576
52	115	144	166	186	501	135	179	189	198	334	242	319	372	425	593
53	117	147	171	191	513	140	184	193	203	346	247	324	382	435	605
54	120	152	176	196	524	145	189	198	208	351	251	334	392	445	622
55	125	154	181	200	542	145	193	203	213	363	256	343	401	454	640
56	134	169	196	220	588	155	203	213	222	380	266	353	416	469	657
57	144	183	213	237	640	160	213	222	232	398	271	363	425	483	674
58	156	196	230	257	691	169	222	232	242	415	280	367	435	493	691
59	166	210	245	274	743	174	232	242	251	432	285	377	450	508	709
60	176	225	262	293	795	184	242	251	261	449	295	387	459	522	726
61	193	245	286	320	870	189	256	276	290	478	300	406	479	541	755
62	208	267	311	350	945	208	271	300	324	507	324	421	498	561	784
63	225	286	335	379	1,020	213	285	324	353	536	329	435	517	580	812
64	240	308	359	406	1,100	232	305	348	387	559	348	454	532	604	847
65	254	328	386	435	1,175	242	319	372	416	588	353	469	551	624	876
66	281	359	423	477	1,291	251	338	396	445	622	363	488	575	653	905
67	303	391	460	518	1,406	271	353	416	469	663	382	503	599	682	956
68	328	423	496	560	1,527	280	372	440	493	691	392	527	619	701	985
69	352	455	533	601	1,642	290	392	459	522	732	406	546	643	730	1,026
70	374	487	572	643	1,763	309	411	483	546	761	430	570	672	764	1,060
71	413	535	628	707	1,936	319	425	503	570	801	435	580	687	778	1,095
72	450	584	687	773	2,114	338	445	527	595	835	454	604	706	798	1,123
73	489	636	743	836	2,287	348	464	546	619	876	459	614	725	822	1,164
74	526	685	802	900	2,466	363	483	570	643	910	479	633	749	851	1,193
75	562	734	858	966	2,656	377	503	595	672	933	488	653	769	870	1,221
76	614	800	939	1,059	2,898	392	527	614	687	979	503	672	783	880	1,256
77	665	868	1,017	1,144	3,146	401	537	638	720	1,020	508	677	807	919	1,291
78	714	934	1,098	1,235	3,399	421	561	662	749	1,054	522	701	827	938	1,319
79	765	1,002	1,176	1,323	3,647	435	580	687	778	1,095	537	716	851	967	1,354
80	814	1,073	1,264	1,425	3,924	445	595	691	774	1,106	546	730	865	981	1,371
81	888	1,169	1,372	1,543	4,269	454	614	725	822	1,158	551	740	880	1,001	1,400
82	961	1,267	1,489	1,677	4,638	469	628	745	836	1,181	561	749	885	1,006	1,417
83	1,034	1,364	1,604	1,809	5,001	479	643	759	856	1,216	566	759	899	1,015	1,440
84	1,108	1,462	1,721	1,944	5,370	488	662	774	870	1,244	570	769	909	1,030	1,458
85	1,181	1,562	1,836	2,071	5,738	498	672	793	899	1,273	575	778	919	1,039	1,475

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 for Policies Issued On or After 9/16/2002 - Year 3
Rates per $10 Daily Benefit

	Policy Form: LTC-CD8-MA-PA					**Rider: LTC8-PA-SIP**					**Rider: LTC8-PA-CIP**				
	Base Rates with No Inflation Protection					**Simple Inflation Protection Rider**					**Compound Inflation Protection Rider**				
Issue	**Benefit Period**					**Benefit Period**					**Benefit Period**				
Age	*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	139	178	208	232	634	164	222	237	247	421	290	392	464	527	749
41	144	183	215	242	657	169	232	242	256	438	300	406	483	546	772
42	149	191	222	252	680	179	237	251	266	455	309	421	498	566	801
43	154	198	232	259	703	184	247	261	271	472	324	435	517	585	830
44	159	205	240	269	726	189	256	271	280	484	334	450	537	609	858
45	166	210	247	276	749	193	266	280	290	501	343	464	551	628	887
46	171	218	254	286	772	203	271	285	300	519	353	479	570	648	916
47	176	225	262	293	795	208	280	295	309	536	367	493	585	667	945
48	181	232	269	303	818	213	290	305	319	547	377	508	604	687	968
49	186	237	279	313	841	218	300	314	329	565	387	522	624	706	997
50	191	245	286	320	870	227	305	324	338	582	396	537	638	725	1,026
51	196	252	293	330	893	232	314	334	348	599	411	551	657	745	1,054
52	200	257	301	337	916	237	324	338	358	611	421	566	672	764	1,083
53	208	264	308	347	939	247	329	348	363	628	430	580	691	783	1,112
54	213	271	318	355	962	251	338	358	372	645	440	595	711	803	1,141
55	218	279	325	364	985	256	348	367	382	663	454	609	725	827	1,164
56	232	298	350	394	1,066	266	363	377	396	686	459	619	740	836	1,181
57	249	320	374	421	1,141	276	372	392	411	709	469	633	749	851	1,198
58	267	342	399	450	1,221	290	387	406	421	732	479	643	764	865	1,216
59	281	362	425	477	1,296	300	401	421	435	761	488	653	778	880	1,239
60	298	384	450	506	1,377	309	416	435	450	784	493	662	793	899	1,256
61	315	408	479	538	1,463	319	425	459	488	807	503	672	798	909	1,273
62	335	433	509	570	1,556	329	440	488	532	835	508	682	812	919	1,291
63	355	457	535	604	1,642	338	454	517	570	858	517	696	822	933	1,314
64	372	482	565	636	1,734	353	469	546	609	887	527	706	836	948	1,337
65	391	506	594	667	1,826	363	483	575	648	916	537	720	851	962	1,360
66	416	538	631	712	1,942	372	498	590	667	939	541	730	861	977	1,371
67	440	570	670	753	2,063	382	512	609	687	968	551	740	875	986	1,394
68	465	604	709	797	2,184	396	527	624	706	997	561	749	885	1,001	1,412
69	489	636	746	839	2,305	406	546	643	730	1,026	570	764	904	1,020	1,435
70	511	667	785	883	2,426	421	561	662	749	1,054	580	778	919	1,039	1,463
71	548	714	839	944	2,587	425	570	672	759	1,072	580	778	919	1,039	1,463
72	582	760	890	1,002	2,754	430	580	687	774	1,089	580	778	923	1,044	1,469
73	616	804	944	1,064	2,921	440	590	696	788	1,112	585	783	928	1,049	1,481
74	653	851	998	1,122	3,088	450	599	711	803	1,135	590	793	933	1,059	1,492
75	687	897	1,051	1,183	3,249	459	614	725	822	1,158	595	798	943	1,068	1,509
76	731	956	1,122	1,264	3,474	464	624	735	832	1,175	595	798	948	1,068	1,509
77	775	1,017	1,193	1,342	3,699	474	633	749	846	1,193	599	803	948	1,073	1,515
78	822	1,076	1,264	1,423	3,924	479	648	764	861	1,216	599	807	952	1,083	1,521
79	866	1,137	1,335	1,504	4,142	488	657	778	880	1,239	604	812	962	1,088	1,533
80	910	1,196	1,406	1,582	4,367	498	672	793	894	1,268	609	817	972	1,097	1,550
81	976	1,286	1,511	1,702	4,707	503	677	798	904	1,273	609	817	967	1,093	1,544
82	1,044	1,377	1,619	1,822	5,047	508	682	807	914	1,291	604	817	967	1,093	1,544
83	1,110	1,467	1,724	1,944	5,381	512	691	817	923	1,308	604	817	967	1,093	1,550
84	1,176	1,557	1,831	2,064	5,721	517	701	827	933	1,325	609	817	967	1,093	1,550
85	1,245	1,646	1,936	2,183	6,055	522	706	836	948	1,342	609	822	972	1,097	1,325

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

Comprehensive Policy

Individual Rates for Lifetime Premium Payment Optior
0-Day Elimination Period
Annual Premium Rates for Policies Issued On or After 9/16/2002 - Year 3
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	**Benefit Period**					**Benefit Period**					**Benefit Period**				
Age	*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	46	54	61	66	190	53	68	82	87	138	97	121	140	150	259
40	49	59	66	73	213	58	73	87	87	138	111	135	160	164	277
41	51	61	71	78	225	63	77	92	92	150	116	145	164	174	288
42	54	66	73	81	236	68	82	97	102	156	126	150	179	184	300
43	59	68	78	86	248	68	87	102	106	167	126	160	184	193	311
44	61	73	83	90	265	73	87	106	111	167	131	160	189	203	317
45	64	76	86	95	277	77	97	116	116	179	135	169	198	208	328
46	66	81	90	98	288	82	97	116	126	184	145	174	208	222	340
47	68	83	95	103	300	87	102	121	131	196	150	184	213	232	351
48	73	88	98	108	311	82	106	131	131	202	150	189	222	237	369
49	76	90	103	112	323	87	111	135	135	213	155	198	227	247	380
50	78	95	108	115	334	92	111	135	145	219	164	203	237	261	392
51	81	98	110	120	346	97	121	145	150	230	169	213	247	266	403
52	83	103	115	125	363	102	121	150	155	230	174	213	251	276	409
53	88	105	120	130	374	102	126	155	160	242	174	222	256	285	421
54	90	110	122	132	386	106	131	160	169	248	184	227	271	295	432
55	93	112	127	137	398	111	135	164	174	259	189	237	276	305	444
56	100	122	137	149	426	116	145	174	184	277	198	247	290	324	461
57	108	130	147	159	461	121	155	184	193	282	203	261	305	348	478
58	112	139	159	171	490	131	164	189	203	300	218	266	309	363	495
59	120	147	169	181	524	135	174	198	213	305	222	280	324	387	513
60	127	156	178	193	553	140	184	208	222	323	232	290	338	406	530
61	137	169	193	208	593	145	189	218	237	340	237	300	348	411	547
62	147	181	205	222	640	155	198	232	247	357	247	305	363	416	565
63	154	191	220	240	680	164	208	237	256	374	256	319	367	416	582
64	164	203	232	254	726	174	218	251	266	392	266	324	382	421	599
65	174	215	247	269	766	179	222	261	280	409	271	334	392	425	616
66	196	242	279	303	864	193	237	280	300	438	285	353	411	450	651
67	218	269	308	335	956	203	256	300	324	472	300	372	435	479	691
68	237	293	340	369	1,054	222	276	319	348	507	314	396	459	498	726
69	259	320	369	401	1,147	232	295	338	372	542	329	416	483	527	766
70	281	347	401	435	1,244	247	309	358	392	570	343	435	503	551	801
71	315	389	447	487	1,400	256	324	377	411	599	353	450	522	570	830
72	347	430	494	538	1,550	271	338	396	430	634	367	464	541	590	864
73	381	469	543	589	1,705	280	358	416	454	668	377	479	556	604	893
74	413	511	589	641	1,855	295	372	435	474	703	392	493	575	624	928
75	447	553	636	692	2,011	305	387	454	493	732	401	508	595	643	956
76	504	623	719	782	2,270	329	416	488	527	772	425	537	628	677	991
77	562	692	804	875	2,529	348	450	517	556	818	445	570	653	706	1,026
78	619	763	888	966	2,783	367	479	546	595	864	464	599	687	745	1,072
79	677	831	973	1,059	3,042	387	512	575	624	910	483	633	711	774	1,106
80	734	902	1,056	1,149	3,301	411	541	609	657	951	508	662	745	807	1,141
81	800	985	1,152	1,254	3,641	421	556	628	677	985	517	672	754	817	1,170
82	868	1,071	1,249	1,359	3,981	430	566	648	696	1,020	522	677	764	832	1,193
83	934	1,154	1,345	1,462	4,321	440	585	667	720	1,054	527	691	774	846	1,221
84	1,002	1,240	1,443	1,567	4,661	450	595	687	740	1,089	532	696	783	861	1,244
85	1,068	1,323	1,538	1,672	5,001	459	609	706	759	1,123	541	706	793	870	1,273

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

Comprehensive Policy

Individual Rates for Lifetime Premium Payment Optior
0-Day Elimination Period
Annual Premium Rates for Policies Issued On or After 9/16/2002 - Year 3
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	**Benefit Period**					**Benefit Period**					**Benefit Period**				
Age	*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	49	56	64	68	196	53	68	87	92	144	102	126	145	155	271
40	51	61	68	76	219	58	77	92	92	144	116	140	164	174	288
41	54	64	73	81	236	63	82	97	97	156	121	150	174	184	300
42	56	68	76	83	248	68	87	102	106	161	131	155	189	193	311
43	61	71	81	88	259	73	92	106	111	173	131	164	193	203	323
44	64	76	86	93	277	77	92	111	116	173	135	169	198	213	328
45	66	78	88	100	288	82	102	121	121	184	140	179	208	213	340
46	68	83	93	103	300	87	102	121	131	190	150	184	218	227	351
47	71	86	100	108	311	92	106	126	135	202	155	193	218	242	369
48	76	90	103	112	323	87	111	135	135	213	155	198	227	247	386
49	78	93	108	117	334	92	116	140	140	225	164	208	237	256	398
50	81	100	112	120	346	97	111	140	150	230	174	208	247	271	409
51	83	103	115	125	357	102	126	150	155	242	179	218	256	276	421
52	86	108	120	130	380	106	126	155	160	236	184	218	261	285	421
53	90	110	125	134	392	106	131	160	164	248	184	232	266	295	438
54	93	115	127	137	403	111	135	164	179	254	193	237	280	309	449
55	98	117	132	142	415	111	140	169	184	271	193	247	285	319	461
56	105	127	142	154	444	121	150	184	193	288	203	256	305	338	478
57	112	134	152	166	478	126	160	193	198	294	208	271	319	358	501
58	117	144	166	178	507	135	174	193	208	311	227	276	319	377	519
59	125	152	176	188	547	140	184	203	222	317	232	295	334	401	530
60	132	164	186	200	576	145	189	218	232	334	242	300	353	425	553
61	142	176	200	215	616	150	193	227	247	351	247	309	363	430	570
62	152	188	213	232	663	164	208	242	256	374	256	314	377	430	588
63	161	198	230	249	709	169	218	247	266	386	266	334	382	430	605
64	171	210	242	264	755	179	227	261	276	409	276	338	396	440	622
65	181	225	257	279	795	184	227	271	295	426	280	343	406	445	645
66	203	252	291	315	899	203	247	290	309	455	300	367	425	469	680
67	227	279	320	347	997	208	271	314	338	490	309	387	454	498	714
68	247	306	355	384	1,095	232	285	329	363	530	324	411	474	517	755
69	269	333	384	418	1,193	242	309	353	387	565	343	435	503	546	795
70	293	362	418	452	1,296	256	319	372	406	593	353	450	522	575	830
71	328	403	465	506	1,458	266	338	392	425	622	367	469	546	595	858
72	362	447	513	560	1,613	280	353	411	445	657	382	483	566	614	899
73	396	489	565	614	1,775	295	372	430	469	691	392	498	575	628	928
74	430	531	614	665	1,930	305	387	450	493	732	406	512	595	653	962
75	465	575	660	719	2,091	319	401	474	512	761	421	527	619	672	997
76	523	648	748	814	2,362	343	435	508	546	801	445	561	653	701	1,031
77	584	719	836	910	2,633	363	469	537	580	847	464	595	682	735	1,066
78	643	792	924	1,005	2,892	382	498	566	619	899	483	624	711	774	1,118
79	704	866	1,012	1,100	3,163	401	532	599	648	945	503	657	740	807	1,152
80	763	939	1,098	1,196	3,434	425	561	633	682	991	527	687	774	836	1,187
81	831	1,024	1,198	1,306	3,785	440	580	653	701	1,026	537	701	783	846	1,216
82	902	1,115	1,298	1,413	4,142	450	585	677	725	1,060	546	701	798	865	1,239
83	971	1,201	1,399	1,521	4,494	459	609	696	749	1,095	551	720	803	880	1,268
84	1,042	1,289	1,501	1,631	4,845	469	619	711	769	1,135	556	725	812	894	1,296
85	1,110	1,377	1,599	1,738	5,203	479	633	735	793	1,170	566	730	827	909	1,325

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

Comprehensive Policy

Individual Rates for Lifetime Premium Payment Optior
0-Day Elimination Period
Annual Premium Rates for Policies Issued On or After 9/16/2002 - Year 3
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	**Benefit Period**					**Benefit Period**					**Benefit Period**				
Age	*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	83	254	63	82	97	102	167	116	145	174	184	294
40	61	73	83	90	271	77	92	111	116	190	135	169	198	208	334
41	66	78	88	95	288	77	97	116	126	202	140	174	208	218	346
42	68	83	93	103	305	87	102	126	126	207	145	179	213	222	363
43	73	88	100	108	323	87	106	126	135	219	150	189	218	232	374
44	76	93	105	112	340	92	106	131	140	225	160	193	227	242	386
45	81	98	110	120	363	97	111	135	145	230	160	198	237	247	392
46	83	100	115	125	380	102	121	145	150	242	169	208	242	256	409
47	88	105	120	130	398	102	126	150	160	248	174	213	251	266	421
48	90	110	127	137	415	106	131	150	160	259	179	222	256	271	432
49	95	115	132	142	432	111	135	155	169	265	184	227	261	280	444
50	100	120	137	149	449	111	140	164	174	277	189	232	271	290	461
51	103	125	142	154	467	116	140	169	179	288	193	237	280	300	472
52	108	130	147	159	484	121	145	174	189	294	198	242	285	309	484
53	110	134	154	166	501	126	150	174	189	305	203	251	290	314	495
54	115	139	159	171	519	126	155	184	198	311	208	256	300	324	513
55	117	144	164	176	542	135	160	189	203	317	218	261	309	334	519
56	122	147	169	183	559	135	169	193	208	328	218	271	314	338	530
57	125	152	174	188	576	140	169	198	213	334	227	276	324	348	542
58	130	156	181	193	593	140	174	203	222	346	232	285	329	358	559
59	132	161	186	200	611	150	179	208	222	351	237	290	334	363	570
60	137	166	191	205	628	150	184	213	232	363	242	295	343	372	582
61	149	181	208	225	686	155	193	222	242	380	247	305	353	382	599
62	161	196	225	242	743	164	203	232	256	398	256	314	363	396	622
63	171	210	242	262	795	174	213	247	266	426	266	324	377	411	645
64	183	225	259	279	853	184	222	256	280	444	276	334	387	425	668
65	196	240	276	298	910	189	232	266	290	461	280	343	396	435	686
66	218	267	306	330	1,014	198	247	285	314	490	290	358	416	459	720
67	237	291	335	364	1,112	213	266	305	329	524	309	377	440	479	755
68	259	318	367	396	1,216	227	276	319	353	553	319	396	454	498	789
69	279	342	396	430	1,314	242	295	338	367	588	338	416	479	517	824
70	301	369	425	462	1,417	251	309	358	392	616	348	430	498	541	858
71	335	413	474	516	1,584	266	324	382	416	651	363	445	522	566	893
72	372	455	526	570	1,751	276	343	396	435	686	372	464	537	585	928
73	406	499	575	623	1,919	295	363	421	459	720	392	483	561	609	962
74	443	540	626	677	2,086	305	382	435	479	755	401	503	575	628	997
75	477	584	675	731	2,253	319	396	459	503	789	416	517	599	653	1,031
76	535	658	758	822	2,541	338	421	493	537	835	435	541	628	687	1,077
77	594	729	841	914	2,823	358	450	527	566	887	454	566	657	716	1,129
78	650	802	927	1,005	3,111	377	469	551	595	939	474	590	687	745	1,181
79	709	873	1,010	1,098	3,393	396	498	585	624	991	493	614	716	774	1,233
80	768	946	1,093	1,188	3,682	416	522	619	657	1,037	512	638	745	807	1,279
81	836	1,032	1,191	1,296	4,021	425	537	638	677	1,072	517	648	754	817	1,296
82	905	1,117	1,291	1,403	4,361	435	551	657	696	1,100	527	657	759	827	1,319
83	976	1,205	1,389	1,511	4,707	440	556	677	720	1,129	527	662	774	832	1,331
84	1,044	1,291	1,489	1,619	5,047	450	570	696	740	1,158	537	672	778	841	1,354
85	1,112	1,377	1,587	1,726	5,387	459	585	716	759	1,193	541	682	788	851	1,371

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

Comprehensive Policy

Individual Rates for Lifetime Premium Payment Optior
0-Day Elimination Period
Annual Premium Rates for Policies Issued On or After 9/16/2002 - Year 3
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	**Benefit Period**					**Benefit Period**					**Benefit Period**				
Age	*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	71	81	86	265	63	87	102	106	173	121	150	184	193	305
40	64	76	86	93	282	82	97	116	121	196	140	179	208	218	346
41	68	81	90	100	300	82	102	121	131	207	145	184	218	222	357
42	71	86	98	108	317	92	106	131	131	219	150	189	218	232	380
43	76	90	105	112	334	92	111	131	140	230	155	198	222	242	392
44	78	98	110	117	351	97	106	135	145	236	169	198	237	251	403
45	83	103	115	125	380	102	116	140	150	236	169	203	247	256	403
46	86	105	120	130	398	106	126	150	155	248	179	213	251	266	421
47	90	110	125	134	415	106	131	155	164	254	184	218	261	276	438
48	93	115	132	142	432	111	135	155	169	271	189	232	266	280	449
49	100	120	137	147	449	111	140	160	179	277	189	237	271	295	461
50	105	125	142	154	467	116	145	174	184	288	193	242	280	305	478
51	108	130	147	161	484	121	145	179	184	300	198	247	295	309	495
52	112	134	152	166	501	126	150	184	193	305	203	251	300	319	507
53	115	139	161	174	519	131	155	179	193	323	208	261	300	324	519
54	120	144	166	178	542	131	164	189	203	323	218	266	309	334	530
55	122	149	171	183	565	140	169	193	213	328	227	276	319	348	536
56	127	152	176	191	582	140	179	198	218	340	227	285	324	353	553
57	130	156	181	196	599	145	179	203	222	346	237	290	338	363	565
58	134	164	188	200	616	145	179	213	232	363	242	295	343	372	582
59	137	169	193	208	634	155	184	218	232	369	247	300	348	377	593
60	142	174	198	213	651	155	189	222	242	380	251	305	358	387	605
61	154	188	215	235	714	164	203	232	251	392	256	314	367	396	622
62	169	203	235	252	772	169	213	242	266	415	266	329	377	411	645
63	178	218	252	271	830	179	222	256	276	438	276	338	392	430	668
64	191	235	269	291	887	193	232	266	290	461	285	343	401	440	697
65	203	249	289	311	945	198	242	276	300	484	295	358	411	450	714
66	227	276	318	342	1,054	203	256	295	329	507	300	372	430	479	749
67	247	303	347	379	1,158	222	276	319	343	542	319	392	459	498	784
68	269	330	381	411	1,262	237	285	334	367	576	334	411	474	522	824
69	291	357	411	447	1,365	251	305	353	382	611	348	430	498	537	858
70	313	384	443	482	1,475	261	324	372	406	640	363	450	517	561	893
71	347	430	494	535	1,648	280	334	396	435	680	377	459	541	590	928
72	386	472	548	592	1,821	285	358	411	454	714	387	483	556	609	968
73	423	518	597	648	1,993	305	377	440	479	749	406	503	585	633	1,002
74	460	562	650	704	2,166	319	396	454	498	789	421	522	599	653	1,037
75	496	609	702	760	2,345	329	411	479	522	818	430	537	624	677	1,072
76	557	685	787	853	2,644	353	435	512	561	864	450	561	657	716	1,118
77	619	758	875	951	2,938	372	469	546	590	922	469	590	682	745	1,170
78	677	834	963	1,044	3,238	392	488	575	619	974	493	614	716	778	1,227
79	738	907	1,051	1,142	3,532	411	517	604	648	1,026	512	638	740	803	1,279
80	800	983	1,137	1,235	3,831	430	546	643	687	1,077	532	667	774	841	1,325
81	870	1,073	1,237	1,347	4,183	440	556	667	706	1,112	537	672	788	851	1,348
82	941	1,161	1,342	1,460	4,534	450	575	687	725	1,147	546	687	788	861	1,371
83	1,015	1,254	1,445	1,572	4,897	459	575	701	749	1,175	546	687	803	865	1,383
84	1,086	1,342	1,548	1,682	5,249	469	595	725	774	1,204	561	701	812	875	1,406
85	1,156	1,433	1,650	1,795	5,600	479	604	745	793	1,244	566	706	817	885	1,429

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 for Policies Issued On or After 9/16/2002 - Year 3
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	**Benefit Period**					**Benefit Period**					**Benefit Period**				
Age	*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	83	100	115	122	374	126	155	179	198	311	242	305	353	387	605
41	88	108	122	130	398	135	164	189	213	328	256	319	372	411	634
42	93	112	130	139	421	140	174	203	222	340	271	343	396	430	663
43	98	120	137	147	438	150	184	213	237	363	290	358	416	459	697
44	105	125	144	154	461	155	198	227	251	380	300	382	440	483	732
45	110	132	152	161	484	164	208	237	266	398	314	396	459	508	761
46	115	139	159	171	507	169	213	251	276	409	329	411	483	527	789
47	120	144	166	178	530	179	227	261	290	426	343	435	503	551	818
48	125	152	174	186	547	189	237	276	300	449	363	450	527	580	853
49	130	156	181	193	570	198	251	285	314	467	377	474	546	604	881
50	134	164	188	203	593	203	256	300	324	478	392	488	570	624	910
51	139	171	196	210	616	213	266	309	338	495	406	503	590	648	939
52	147	176	203	218	640	218	280	324	353	513	416	527	614	672	974
53	152	183	210	225	657	227	290	334	367	536	435	541	633	701	1,008
54	156	188	218	235	680	232	300	348	377	547	450	566	657	720	1,037
55	161	196	225	242	703	242	309	358	392	565	464	580	677	745	1,066
56	171	208	240	257	743	251	319	367	406	588	474	595	691	764	1,100
57	181	220	254	271	784	261	334	382	421	611	483	609	706	783	1,129
58	188	232	267	289	830	276	343	396	435	622	503	624	725	793	1,158
59	198	245	281	303	870	285	358	411	450	645	512	638	740	812	1,187
60	208	257	296	318	910	295	367	421	464	668	522	653	754	832	1,221
61	218	269	311	335	956	300	377	430	474	686	522	657	759	836	1,227
62	230	284	325	352	1,008	300	382	440	483	691	517	657	764	841	1,227
63	240	296	342	369	1,054	309	392	450	493	709	517	667	769	841	1,233
64	252	311	357	386	1,106	309	396	459	503	714	512	667	774	846	1,233
65	262	323	372	403	1,152	314	406	469	512	732	512	672	778	851	1,239
66	289	350	403	440	1,256	314	421	483	527	755	508	677	783	851	1,239
67	315	379	435	474	1,354	319	430	498	541	784	508	677	788	856	1,244
68	342	406	469	511	1,458	319	440	512	556	807	503	682	788	856	1,250
69	369	435	501	545	1,556	324	450	527	570	835	503	682	793	861	1,256
70	396	462	533	582	1,659	324	464	541	585	858	498	687	798	861	1,256
71	423	501	577	628	1,815	338	469	551	595	864	503	682	793	861	1,244
72	450	538	621	677	1,970	353	479	561	604	870	512	682	793	856	1,239
73	474	577	665	724	2,120	367	488	566	614	876	522	682	788	856	1,233
74	501	614	709	773	2,276	382	498	575	624	881	532	682	788	851	1,227
75	528	653	753	819	2,431	396	503	585	633	887	537	677	783	851	1,216
76	582	721	834	907	2,668	411	522	604	653	922	546	691	798	865	1,239
77	636	792	914	993	2,898	425	537	624	682	968	556	696	807	885	1,268
78	692	861	993	1,081	3,134	440	551	648	701	1,002	566	711	827	894	1,296
79	746	932	1,073	1,166	3,365	454	566	667	730	1,049	575	716	836	914	1,325
80	800	1,000	1,154	1,254	3,601	469	585	687	749	1,083	585	730	851	928	1,348
81	861	1,076	1,242	1,352	3,918	474	595	696	759	1,100	585	735	856	933	1,325
82	922	1,152	1,330	1,447	4,229	479	599	706	774	1,123	585	735	861	948	1,302
83	983	1,230	1,418	1,545	4,546	488	604	720	778	1,147	580	735	870	952	1,279
84	1,044	1,306	1,506	1,641	4,857	493	609	730	793	1,170	580	735	875	967	1,256
85	1,105	1,381	1,594	1,738	5,174	498	619	740	803	1,187	580	740	880	972	1,233

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 for Policies Issued On or After 9/16/2002 - Year 3
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	**Benefit Period**					**Benefit Period**					**Benefit Period**				
Age	*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	86	105	120	127	392	131	160	184	208	323	251	314	367	401	628
41	90	112	127	134	415	145	169	198	222	340	271	329	387	430	657
42	98	117	134	144	438	145	179	213	232	351	280	358	411	450	691
43	103	125	142	152	455	155	189	222	247	380	300	372	435	479	726
44	110	130	149	161	478	160	208	237	261	398	309	396	459	503	761
45	115	137	156	169	501	169	218	247	276	415	324	411	479	527	795
46	120	144	166	178	530	174	222	261	285	421	343	430	503	546	818
47	125	149	174	186	553	184	237	271	300	444	358	454	522	570	847
48	130	156	181	193	570	198	247	285	314	467	377	469	546	604	887
49	134	164	188	200	593	208	261	295	329	484	392	488	566	628	916
50	139	171	196	210	616	213	266	314	338	495	406	508	595	648	945
51	144	178	203	218	640	222	276	324	353	519	425	522	614	677	979
52	152	183	210	227	663	227	290	338	363	536	435	546	638	696	1,014
53	156	191	218	235	686	237	300	348	382	553	454	561	662	725	1,049
54	164	196	227	245	709	237	314	358	392	570	464	590	682	749	1,077
55	169	203	235	252	732	251	324	372	406	588	479	604	701	774	1,106
56	178	215	249	267	772	261	334	382	425	611	493	619	720	798	1,147
57	188	230	264	281	812	271	343	396	440	640	503	633	735	817	1,175
58	196	242	276	301	864	285	358	416	450	645	522	648	754	822	1,204
59	205	254	293	315	905	300	372	425	469	674	532	662	769	846	1,233
60	215	267	308	330	945	309	382	435	483	697	546	682	783	865	1,273
61	227	279	323	347	997	309	396	450	493	709	541	687	788	870	1,273
62	240	296	337	367	1,049	309	396	459	503	720	537	682	798	875	1,279
63	249	308	357	384	1,095	319	406	464	512	737	537	691	798	875	1,285
64	262	323	372	401	1,152	324	411	479	522	743	532	696	803	880	1,279
65	271	335	386	421	1,198	329	425	488	532	761	537	701	812	885	1,291
66	301	364	421	457	1,308	324	435	503	551	784	527	701	812	885	1,285
67	328	394	452	494	1,406	334	450	517	561	818	527	706	822	890	1,296
68	357	423	489	531	1,515	329	454	532	580	841	522	706	817	890	1,302
69	384	452	521	567	1,619	338	469	551	595	870	522	711	827	894	1,308
70	411	482	555	606	1,728	338	479	561	604	887	522	711	827	894	1,302
71	440	521	599	653	1,890	353	488	575	619	899	522	711	827	894	1,291
72	467	560	645	704	2,051	367	498	585	628	905	537	706	827	890	1,285
73	494	599	692	753	2,207	382	508	590	638	910	541	711	817	890	1,279
74	521	638	738	804	2,368	396	517	595	648	916	556	711	817	885	1,273
75	550	680	782	851	2,529	411	522	609	662	922	556	701	817	885	1,262
76	606	751	868	944	2,777	425	541	628	677	956	566	720	827	899	1,285
77	660	824	951	1,032	3,013	445	556	648	711	1,008	580	725	841	923	1,319
78	719	895	1,032	1,125	3,261	459	575	677	725	1,043	590	740	861	928	1,348
79	775	968	1,117	1,213	3,497	474	590	691	759	1,095	599	745	865	952	1,383
80	831	1,039	1,201	1,306	3,745	488	609	716	778	1,129	609	759	885	962	1,400
81	895	1,120	1,291	1,406	4,073	493	619	725	788	1,147	609	764	890	972	1,377
82	958	1,198	1,384	1,506	4,396	498	624	735	803	1,170	609	764	894	986	1,354
83	1,022	1,279	1,474	1,606	4,730	508	628	749	812	1,193	604	764	904	991	1,325
84	1,086	1,357	1,567	1,707	5,053	512	633	759	822	1,216	604	764	909	1,006	1,302
85	1,149	1,438	1,658	1,807	5,381	517	643	769	836	1,233	604	769	914	1,010	1,279

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 for Policies Issued On or After 9/16/2002 - Year 3
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	**Benefit Period**					**Benefit Period**					**Benefit Period**				
Age	*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	105	127	144	154	472	155	193	222	251	392	305	372	430	479	743
41	110	134	152	164	501	164	203	237	261	409	319	387	450	493	772
42	117	142	161	174	530	169	213	242	271	426	329	401	464	512	795
43	122	149	169	181	559	179	218	256	285	444	338	416	483	532	824
44	130	156	178	191	582	184	227	261	295	461	348	430	493	551	858
45	134	164	186	200	611	193	237	276	305	478	363	445	512	566	881
46	142	171	196	210	640	198	247	285	314	495	372	454	527	580	910
47	147	178	203	218	668	208	256	295	329	513	387	469	546	604	939
48	154	186	213	227	697	213	261	305	338	530	392	483	561	619	962
49	159	193	220	237	726	222	271	314	348	547	406	498	580	638	991
50	166	200	230	247	755	227	280	324	363	565	416	512	595	653	1,020
51	171	205	237	254	778	232	295	338	377	582	430	532	609	672	1,049
52	176	213	245	264	807	242	305	348	387	599	445	546	628	691	1,077
53	183	220	254	274	835	247	309	358	396	616	450	561	643	706	1,100
54	188	227	262	284	864	256	319	367	406	634	464	575	662	725	1,129
55	196	235	271	291	893	261	329	377	421	651	474	590	677	745	1,158
56	200	242	279	301	922	271	338	392	430	668	488	599	696	759	1,181
57	208	249	289	311	945	276	348	396	440	686	498	614	706	778	1,216
58	213	257	296	320	974	285	353	411	450	703	508	628	725	793	1,244
59	220	264	306	328	1,002	290	363	416	464	720	517	643	740	817	1,268
60	225	271	313	337	1,031	300	372	430	474	737	532	657	759	832	1,296
61	237	289	333	357	1,095	305	377	435	483	749	532	653	754	832	1,291
62	249	303	350	377	1,158	309	382	445	488	761	532	653	754	827	1,285
63	264	320	369	399	1,216	314	387	450	493	772	522	648	749	822	1,291
64	276	335	386	418	1,279	319	392	459	498	784	522	648	749	817	1,285
65	289	352	406	438	1,342	324	396	464	508	795	522	643	745	817	1,279
66	320	379	438	472	1,446	314	406	474	522	818	503	648	749	822	1,291
67	352	406	467	506	1,556	300	421	493	537	841	488	653	754	822	1,291
68	381	433	499	540	1,659	295	430	503	546	864	474	653	759	827	1,302
69	413	460	528	575	1,769	280	445	522	561	887	459	657	764	827	1,302
70	445	487	560	609	1,872	271	454	532	575	910	440	662	769	832	1,314
71	469	528	606	660	2,028	295	464	541	585	933	459	667	774	836	1,325
72	491	567	653	712	2,189	324	479	556	599	945	483	672	783	841	1,331
73	516	609	702	760	2,345	353	483	561	614	968	508	677	783	856	1,342
74	538	648	748	812	2,506	382	498	575	628	979	532	682	793	861	1,348
75	562	689	795	863	2,662	406	508	585	638	1,002	551	687	798	865	1,360
76	616	758	875	949	2,933	421	527	604	662	1,037	561	696	803	875	1,377
77	672	826	954	1,037	3,203	435	541	633	682	1,077	561	701	817	885	1,394
78	726	897	1,034	1,122	3,474	450	556	653	706	1,112	570	706	822	894	1,412
79	782	966	1,112	1,210	3,745	464	570	682	725	1,152	570	711	836	904	1,429
80	836	1,034	1,193	1,296	4,016	479	590	701	749	1,187	580	720	841	914	1,446
81	897	1,112	1,284	1,394	4,327	483	595	711	759	1,204	580	720	841	914	1,406
82	958	1,191	1,374	1,494	4,638	493	604	720	769	1,216	585	720	841	909	1,360
83	1,022	1,267	1,462	1,592	4,943	493	614	730	778	1,239	580	725	851	914	1,325
84	1,083	1,345	1,553	1,692	5,254	503	624	740	788	1,250	585	725	851	909	1,279
85	1,144	1,423	1,643	1,790	5,566	508	628	749	798	1,268	585	725	851	909	1,239

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 for Policies Issued On or After 9/16/2002 - Year 3
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	**Benefit Period**					**Benefit Period**					**Benefit Period**				
Age	*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	110	132	149	161	490	160	203	232	261	409	314	387	450	493	772
41	115	139	156	171	519	169	213	247	271	426	329	401	469	512	807
42	122	147	169	181	553	174	222	251	280	444	343	421	479	532	824
43	127	154	176	188	582	184	227	266	295	461	353	435	503	551	858
44	134	164	186	198	605	193	232	271	309	478	363	445	512	575	893
45	139	171	193	208	634	203	247	285	319	501	377	459	532	590	916
46	147	178	203	218	663	208	256	300	329	519	387	474	551	604	951
47	152	186	210	227	697	218	266	309	338	530	406	488	570	628	974
48	161	193	220	237	726	218	271	319	353	553	406	503	585	643	1,002
49	166	200	230	247	755	227	280	324	363	570	421	517	599	662	1,031
50	174	208	240	257	784	237	295	334	377	588	430	537	619	677	1,060
51	178	213	247	264	807	242	309	353	392	605	445	556	633	701	1,095
52	183	220	254	274	841	251	319	363	406	622	464	570	653	720	1,118
53	191	230	264	284	870	256	319	372	416	640	469	580	667	735	1,141
54	196	237	271	296	899	266	329	382	421	657	483	595	691	754	1,175
55	203	245	281	303	928	271	343	396	435	680	493	614	706	774	1,204
56	208	252	291	313	956	285	353	406	445	697	508	624	720	788	1,233
57	215	259	301	323	985	290	363	411	459	709	522	638	735	812	1,262
58	220	267	308	333	1,014	300	367	425	469	732	532	653	754	827	1,291
59	230	274	318	340	1,043	300	377	430	483	749	537	672	769	851	1,319
60	235	281	325	352	1,072	309	392	450	488	766	551	687	788	861	1,348
61	247	301	345	372	1,141	314	392	454	503	778	551	677	788	865	1,342
62	259	315	364	391	1,204	324	396	459	508	789	551	677	783	861	1,337
63	274	333	384	416	1,262	329	401	469	512	807	546	677	778	851	1,342
64	289	347	401	435	1,331	329	411	479	517	812	541	677	783	851	1,337
65	301	367	423	455	1,394	334	411	479	527	830	541	667	774	851	1,331
66	333	394	455	491	1,504	329	425	493	541	853	522	677	778	856	1,342
67	367	423	487	526	1,619	309	435	512	561	876	508	677	783	856	1,342
68	396	450	518	562	1,728	309	450	522	566	899	493	677	788	861	1,354
69	430	479	550	597	1,838	290	459	541	585	922	479	682	793	861	1,354
70	462	506	582	633	1,947	285	474	556	599	945	459	687	803	865	1,365
71	489	550	631	687	2,109	305	479	561	609	974	474	691	803	870	1,377
72	511	589	680	741	2,276	338	498	575	624	985	503	701	812	875	1,383
73	535	633	729	790	2,437	367	503	585	643	1,008	532	706	817	894	1,400
74	560	675	778	844	2,604	396	517	599	653	1,020	551	706	827	894	1,406
75	584	716	826	897	2,765	425	527	609	662	1,043	575	716	832	899	1,417
76	641	787	910	988	3,048	440	551	628	687	1,083	585	725	836	909	1,435
77	699	861	993	1,078	3,330	454	561	657	711	1,123	585	725	846	919	1,452
78	756	934	1,076	1,166	3,612	469	575	677	735	1,158	595	735	856	933	1,469
79	814	1,005	1,156	1,259	3,895	483	595	711	754	1,198	595	740	870	938	1,486
80	870	1,076	1,242	1,347	4,177	498	614	725	778	1,233	599	749	870	952	1,504
81	934	1,156	1,335	1,450	4,500	503	619	740	788	1,250	599	749	875	948	1,463
82	998	1,237	1,428	1,553	4,822	512	628	749	803	1,268	609	749	875	948	1,417
83	1,064	1,318	1,521	1,655	5,139	512	638	759	807	1,291	604	754	885	952	1,383
84	1,127	1,399	1,614	1,760	5,462	522	648	774	817	1,302	609	754	885	943	1,331
85	1,191	1,479	1,709	1,861	5,790	527	653	778	832	1,314	609	754	885	948	1,285

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

Facility Only Policy

Individual Rates for Lifetime Premium Payment Option
90 Day Elimination Period
Current Annual Premium Rates for Policies Issued Prior to 9/16/2002
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		
Issue	**Benefit Period**			**Benefit Period**			**Benefit Period**		
Age	*1 Year*	*2 Years*	*3 Years*	*1 Year*	*2 Years*	*3 Years*	*1 Year*	*2 Years*	*3 Years*
<45	20	24	27	5	7	10	17	27	34
45	22	24	27	5	10	12	17	29	39
46	22	27	29	5	10	12	20	29	42
47	22	27	32	7	12	15	22	34	42
48	24	29	34	7	12	15	22	34	44
49	24	32	34	10	12	20	24	37	49
50	27	32	37	10	17	20	24	42	54
51	27	34	42	12	17	20	27	44	54
52	29	37	44	12	20	24	27	46	59
53	32	39	46	12	22	27	29	49	64
54	32	44	51	15	22	29	32	49	66
55	34	46	54	17	24	34	34	54	71
56	37	49	59	20	29	37	37	59	76
57	39	54	64	20	32	42	39	61	81
58	44	59	71	20	34	44	39	66	86
59	46	64	78	24	39	49	44	71	90
60	51	71	86	24	42	54	44	73	95
61	56	78	95	29	46	64	49	81	108
62	61	86	108	34	56	71	56	90	117
63	66	98	120	39	61	81	64	98	130
64	73	108	134	44	68	90	68	110	142
65	83	122	154	49	78	100	73	120	154
66	93	139	174	54	86	112	81	127	169
67	105	156	196	56	93	122	86	139	181
68	117	176	220	61	103	134	90	149	196
69	132	200	252	68	112	147	98	159	208
70	147	227	286	76	122	161	108	169	222
71	154	237	301	76	122	161	108	169	222
72	174	266	337	78	130	171	110	174	227
73	193	298	376	83	137	183	110	181	239
74	213	330	418	90	147	196	117	191	249
75	237	369	467	93	154	205	120	196	259
76	261	408	518	100	164	218	125	205	271
77	288	452	572	103	171	230	130	210	281
78	318	496	628	108	178	242	132	220	291
79	345	540	684	112	188	252	134	227	303
80	347	543	687	112	188	252	134	227	303
81	374	587	740	112	191	257	137	227	303
82	403	633	797	115	191	257	137	230	308
83	435	679	855	115	198	266	137	230	308
84	469	736	924	120	203	274	139	232	313
85	506	794	997	125	210	283	144	239	323

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
Current Annual Premium Rates for Policies Issued Prior to 9/16/2002
Rates per $20 NCF

Issue	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:	
Age	50%	100%	50%	100%	50%	100%	50%	100%
<40	64	95	78	120	100	154	119	180
40	68	100	83	127	105	164	127	190
41	71	105	88	134	112	174	135	201
42	76	112	93	142	117	183	143	214
43	78	117	98	149	125	196	153	227
44	83	125	105	159	132	208	161	240
45	88	132	110	169	142	220	172	256
46	93	139	117	178	149	232	182	272
47	98	149	125	188	159	247	196	291
48	105	156	132	200	169	261	209	309
49	110	166	139	213	178	276	222	328
50	117	176	149	225	191	293	238	349
51	125	188	159	239	203	313	254	373
52	134	200	169	254	218	332	272	396
53	142	213	181	271	232	354	293	425
54	152	227	193	291	249	376	314	454
55	164	242	205	310	266	403	338	486
56	174	257	222	330	286	430	365	520
57	186	276	237	352	308	459	394	557
58	200	293	257	376	330	489	425	597
59	215	315	274	403	354	523	460	642
60	232	337	296	433	384	562	497	692
61	254	367	325	469	418	609	547	753
62	279	398	354	508	457	657	602	819
63	305	433	389	552	501	714	663	893
64	337	472	428	599	550	772	729	972
65	379	525	479	665	616	853	822	1,078
66	418	569	528	721	679	926	906	1,176
67	459	621	582	784	748	1,007	1,001	1,287
68	503	674	638	853	821	1,092	1,104	1,400
69	560	740	709	936	912	1,200	1,229	1,543
70	621	814	787	1,026	1,009	1,312	1,363	1,694
71	643	831	811	1,048	1,041	1,339	1,403	1,728
72	709	909	894	1,144	1,146	1,457	1,543	1,884
73	777	987	982	1,244	1,256	1,581	1,694	2,048
74	850	1,068	1,073	1,344	1,373	1,708	1,852	2,219
75	931	1,161	1,175	1,459	1,505	1,852	2,026	2,407
76	1,014	1,254	1,283	1,574	1,640	1,999	2,203	2,594
77	1,097	1,344	1,388	1,686	1,774	2,136	2,370	2,769
78	1,183	1,435	1,498	1,796	1,909	2,270	2,539	2,938
79	1,266	1,520	1,606	1,904	2,041	2,400	2,692	3,088
80	1,266	1,520	1,606	1,904	2,041	2,400	2,692	3,088
81	1,339	1,576	1,694	1,967	2,131	2,454	2,771	3,125
82	1,427	1,667	1,806	2,080	2,261	2,581	2,917	3,268
83	1,527	1,767	1,926	2,202	2,395	2,715	3,062	3,413
84	1,637	1,879	2,063	2,344	2,556	2,879	3,239	3,593
85	1,762	2,009	2,214	2,505	2,737	3,067	3,437	3,802

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
Current Annual Premium Rates for Policies Issued Prior to 9/16/2002
Rates per $20 NCF

Issue	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:	
Age	*50%*	*100%*	*50%*	*100%*	*50%*	*100%*	*50%*	*100%*
<40	32	49	42	68	59	100	77	119
40	32	54	44	73	64	105	82	127
41	34	59	46	76	66	112	87	137
42	37	61	49	83	73	120	95	145
43	39	66	54	88	76	127	100	156
44	42	68	56	93	83	134	108	166
45	44	73	61	98	86	142	116	177
46	49	78	64	105	93	152	124	188
47	51	81	68	112	98	159	132	198
48	54	88	73	120	105	169	143	211
49	59	93	81	127	115	181	153	227
50	64	100	86	134	120	193	166	243
51	68	105	90	144	130	203	180	259
52	71	110	98	152	137	215	193	280
53	78	120	105	161	149	230	209	296
54	83	125	112	171	159	244	227	317
55	88	134	122	181	171	259	243	341
56	98	144	130	196	183	274	264	365
57	105	152	139	208	196	291	285	391
58	112	164	149	220	210	313	309	420
59	120	171	161	232	225	330	336	449
60	130	183	171	247	239	347	365	478
61	142	200	188	269	266	376	404	526
62	156	215	208	291	291	408	444	571
63	171	235	227	313	318	437	486	618
64	183	252	244	337	345	472	534	668
65	203	271	271	362	379	508	584	727
66	220	293	291	389	408	543	634	782
67	237	310	313	415	437	577	687	838
68	254	330	337	437	472	611	737	893
69	274	354	364	469	508	653	801	959
70	296	374	393	501	550	696	861	1,025
71	291	369	389	491	543	679	856	1,009
72	305	384	408	511	572	711	904	1,057
73	323	401	430	530	601	740	948	1,104
74	335	415	450	552	631	770	996	1,152
75	352	433	472	574	660	799	1,046	1,202
76	369	447	494	596	694	831	1,094	1,252
77	381	459	513	613	718	855	1,136	1,287
78	396	472	533	633	748	880	1,170	1,318
79	411	484	552	648	772	899	1,199	1,342
80	411	484	552	648	772	899	1,199	1,342
81	398	467	540	626	750	863	1,141	1,305
82	413	479	555	640	770	877	1,157	1,281
83	425	491	572	655	792	897	1,173	1,295
84	440	506	589	674	814	919	1,197	1,316
85	455	521	611	694	841	946	1,223	1,339

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
Current Annual Premium Rates for Policies Issued Prior to 9/16/2002
Rates per $20 NCF

Issue	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:	
Age	50%	100%	50%	100%	50%	100%	50%	100%
<40	81	122	108	166	152	237	211	304
40	83	130	112	174	159	247	222	317
41	88	134	117	181	164	257	232	333
42	90	139	122	188	174	269	246	349
43	98	147	130	198	181	279	256	362
44	100	152	134	205	191	288	269	378
45	105	159	142	213	198	301	283	394
46	110	166	147	220	208	313	296	412
47	115	171	152	230	215	325	309	428
48	120	178	159	239	225	337	325	446
49	127	186	169	249	237	352	343	468
50	132	193	176	259	247	367	359	489
51	137	200	183	269	257	379	378	507
52	142	208	191	281	269	393	394	531
53	152	218	200	291	281	408	412	552
54	156	225	210	301	291	425	433	576
55	164	232	220	313	305	437	454	600
56	171	244	227	325	318	455	478	626
57	181	252	239	340	332	472	502	655
58	188	264	249	352	349	491	528	684
59	198	274	261	364	364	511	555	713
60	208	283	274	379	379	528	584	742
61	225	305	296	403	413	562	634	798
62	242	325	320	433	442	601	682	853
63	259	347	342	459	474	635	734	911
64	276	367	367	486	508	674	790	970
65	301	391	396	518	547	716	851	1,038
66	318	415	420	547	582	755	909	1,102
67	337	435	445	574	616	792	967	1,160
68	359	455	472	601	650	828	1,022	1,218
69	381	481	501	633	692	870	1,091	1,289
70	403	503	530	665	733	916	1,157	1,361
71	391	486	516	643	714	890	1,131	1,326
72	403	499	533	657	738	907	1,173	1,361
73	415	511	550	674	765	931	1,215	1,403
74	428	523	569	692	789	956	1,260	1,445
75	442	538	589	709	816	980	1,308	1,493
76	457	550	606	728	846	1,007	1,350	1,535
77	469	560	626	740	868	1,026	1,387	1,564
78	479	569	640	755	894	1,046	1,416	1,588
79	491	579	657	767	912	1,061	1,437	1,604
80	491	579	657	767	912	1,061	1,437	1,604
81	472	550	633	731	875	1,007	1,358	1,567
82	484	557	643	740	890	1,012	1,358	1,498
83	491	567	657	753	907	1,026	1,366	1,503
84	506	579	672	767	926	1,046	1,384	1,519
85	518	591	692	787	951	1,070	1,403	1,538

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

Comprehensive Policy

Individual Rates for Lifetime Premium Payment Option
0-Day Elimination Period
Current Annual Premium Rates for Policies Issued Prior to 9/16/2002
Rates per $10 Daily Benefit

	Policy Form: LTC-CD8-MA-PA					**Rider: LTC8-PA-SIP**					**Rider: LTC8-PA-CIP**				
	Base Rates with No Inflation Protection					**Simple Inflation Protection Rider**					**Compound Inflation Protection Rider**				
Issue	**Benefit Period**					**Benefit Period**					**Benefit Period**				
Age	*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	90	105	117	145	42	59	61	64	95	76	100	117	132	169
40	78	100	115	130	159	46	64	66	68	106	83	110	130	147	188
41	83	103	120	134	164	49	66	68	71	111	86	115	134	154	193
42	86	108	125	139	169	51	68	71	73	114	90	120	139	159	201
43	88	110	127	144	177	54	71	73	76	119	93	122	144	164	209
44	90	115	132	149	182	54	73	76	78	122	95	127	149	169	214
45	95	117	137	154	188	56	76	78	81	127	100	132	154	176	222
46	98	122	142	159	193	59	76	81	83	129	103	134	159	181	230
47	100	125	147	164	201	59	78	83	86	135	105	139	164	186	235
48	103	130	149	169	206	61	81	86	88	137	108	144	169	191	243
49	105	132	154	174	211	64	83	88	90	143	112	149	174	198	251
50	110	137	159	178	217	66	86	90	95	145	115	152	178	203	256
51	112	139	164	181	225	66	88	93	98	151	117	156	183	208	264
52	115	144	166	186	230	68	90	95	100	153	122	161	188	215	272
53	117	147	171	191	235	71	93	98	103	159	125	164	193	220	277
54	120	152	176	196	240	73	95	100	105	161	127	169	198	225	285
55	125	154	181	200	248	73	98	103	108	166	130	174	203	230	293
56	134	169	196	220	269	78	103	108	112	174	134	178	210	237	301
57	144	183	213	237	293	81	108	112	117	182	137	183	215	244	309
58	156	196	230	257	317	86	112	117	122	190	142	186	220	249	317
59	166	210	244	274	341	88	117	122	127	198	144	191	227	257	325
60	176	225	261	293	365	93	122	127	132	206	149	196	232	264	333
61	193	244	286	320	399	95	130	139	147	219	152	205	242	274	346
62	208	266	310	349	433	105	137	152	164	232	164	213	252	283	359
63	225	286	335	379	468	108	144	164	178	246	166	220	261	293	373
64	239	308	359	406	505	117	154	176	196	256	176	230	269	305	388
65	254	327	386	435	539	122	161	188	210	269	178	237	279	315	402
66	281	359	423	477	592	127	171	200	225	285	183	247	291	330	415
67	303	391	459	518	645	137	178	210	237	304	193	254	303	345	439
68	327	423	496	560	700	142	188	222	249	317	198	266	313	354	452
69	352	455	533	601	753	147	198	232	264	336	205	276	325	369	470
70	374	486	572	643	808	156	208	244	276	349	218	288	340	386	486
71	413	535	628	706	888	161	215	254	288	367	220	293	347	393	502
72	450	584	687	772	970	171	225	266	301	383	230	305	357	403	515
73	489	635	743	836	1,049	176	235	276	313	402	232	310	367	415	534
74	525	684	802	899	1,131	183	244	288	325	417	242	320	379	430	547
75	562	733	858	965	1,218	191	254	301	340	428	247	330	389	440	560
76	613	799	938	1,058	1,329	198	266	310	347	449	254	340	396	445	576
77	665	868	1,017	1,144	1,443	203	271	323	364	468	257	342	408	464	592
78	714	934	1,097	1,234	1,559	213	283	335	379	483	264	354	418	474	605
79	765	1,002	1,175	1,322	1,672	220	293	347	393	502	271	362	430	489	621
80	814	1,073	1,263	1,425	1,799	225	301	349	391	507	276	369	437	496	629
81	887	1,168	1,371	1,542	1,958	230	310	367	415	531	279	374	445	506	642
82	960	1,266	1,488	1,676	2,127	237	318	376	423	542	283	379	447	508	650
83	1,034	1,364	1,603	1,808	2,293	242	325	384	433	557	286	384	455	513	660
84	1,107	1,461	1,720	1,943	2,462	247	335	391	440	571	288	389	459	521	668
85	1,180	1,562	1,835	2,070	2,631	252	340	401	455	584	291	393	464	525	676

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

Comprehensive Policy

Individual Rates for 10-Year Premium Payment Option
0-Day Elimination Period
Current Annual Premium Rates for Policies Issued Prior to 9/16/2002
Rates per $10 Daily Benefit

	Policy Form: LTC-CD8-MA-PA					**Rider: LTC8-PA-SIP**					**Rider: LTC8-PA-CIP**				
	Base Rates with No Inflation Protection					**Simple Inflation Protection Rider**					**Compound Inflation Protection Rider**				
	Benefit Period					**Benefit Period**					**Benefit Period**				
Issue Age	*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	139	178	208	232	291	83	112	120	125	193	147	198	235	266	343
41	144	183	215	242	301	86	117	122	130	201	152	205	244	276	354
42	149	191	222	252	312	90	120	127	134	209	156	213	252	286	367
43	154	198	232	259	322	93	125	132	137	217	164	220	261	296	380
44	159	205	239	269	333	95	130	137	142	222	169	227	271	308	394
45	166	210	247	276	343	98	134	142	147	230	174	235	279	318	407
46	171	218	254	286	354	103	137	144	152	238	178	242	288	327	420
47	176	225	261	293	365	105	142	149	156	246	186	249	296	337	433
48	181	232	269	303	375	108	147	154	161	251	191	257	305	347	444
49	186	237	279	313	386	110	152	159	166	259	196	264	315	357	457
50	191	244	286	320	399	115	154	164	171	267	200	271	323	367	470
51	196	252	293	330	410	117	159	169	176	275	208	279	332	376	483
52	200	257	301	337	420	120	164	171	181	280	213	286	340	386	497
53	208	264	308	347	431	125	166	176	183	288	218	293	349	396	510
54	213	271	318	354	441	127	171	181	188	296	222	301	359	406	523
55	218	279	325	364	452	130	176	186	193	304	230	308	367	418	534
56	232	298	349	393	489	134	183	191	200	314	232	313	374	423	542
57	249	320	374	420	523	139	188	198	208	325	237	320	379	430	550
58	266	342	398	450	560	147	196	205	213	336	242	325	386	437	557
59	281	362	425	477	594	152	203	213	220	349	247	330	393	445	568
60	298	384	450	506	631	156	210	220	227	359	249	335	401	455	576
61	315	408	479	538	671	161	215	232	247	370	254	340	403	459	584
62	335	433	508	569	713	166	222	247	269	383	257	345	411	464	592
63	354	457	535	604	753	171	230	261	288	394	261	352	415	472	602
64	371	481	565	635	795	178	237	276	308	407	266	357	423	479	613
65	391	506	594	667	838	183	244	291	327	420	271	364	430	486	624
66	415	538	631	711	890	188	252	298	337	431	274	369	435	494	629
67	440	569	670	753	946	193	259	308	347	444	279	374	442	499	639
68	464	604	709	797	1,001	200	266	315	357	457	283	379	447	506	647
69	489	635	745	838	1,057	205	276	325	369	470	288	386	457	516	658
70	511	667	784	882	1,112	213	283	335	379	483	293	393	464	525	671
71	547	714	838	943	1,186	215	288	340	384	491	293	393	464	525	671
72	582	760	890	1,002	1,263	218	293	347	391	499	293	393	467	528	674
73	616	804	943	1,063	1,339	222	298	352	398	510	296	396	469	530	679
74	653	850	997	1,122	1,416	227	303	359	406	520	298	401	472	535	684
75	687	897	1,051	1,183	1,490	232	310	367	415	531	301	403	477	540	692
76	731	956	1,122	1,263	1,593	235	315	371	420	539	301	403	479	540	692
77	775	1,017	1,193	1,342	1,696	239	320	379	428	547	303	406	479	543	695
78	821	1,075	1,263	1,422	1,799	242	327	386	435	557	303	408	481	547	697
79	865	1,136	1,334	1,503	1,900	247	332	393	445	568	305	411	486	550	703
80	909	1,195	1,405	1,581	2,003	252	340	401	452	581	308	413	491	555	711
81	975	1,285	1,510	1,701	2,158	254	342	403	457	584	308	413	489	552	708
82	1,044	1,376	1,618	1,821	2,314	257	345	408	462	592	305	413	489	552	708
83	1,109	1,466	1,723	1,943	2,468	259	349	413	467	600	305	413	489	552	711
84	1,175	1,557	1,830	2,063	2,623	261	354	418	472	608	308	413	489	552	711
85	1,244	1,645	1,936	2,182	2,777	264	357	423	479	616	308	415	491	555	608

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

Comprehensive Policy

Individual Rates for Lifetime Premium Payment Option
0-Day Elimination Period
Current Annual Premium Rates for Policies Issued Prior to 9/16/2002
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				
	Benefit Period					Benefit Period					Benefit Period				
Issue Age	*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	46	54	61	66	87	27	34	42	44	63	49	61	71	76	119
40	49	59	66	73	98	29	37	44	44	63	56	68	81	83	127
41	51	61	71	78	103	32	39	46	46	69	59	73	83	88	132
42	54	66	73	81	108	34	42	49	51	71	64	76	90	93	137
43	59	68	78	86	114	34	44	51	54	77	64	81	93	98	143
44	61	73	83	90	122	37	44	54	56	77	66	81	95	103	145
45	64	76	86	95	127	39	49	59	59	82	68	86	100	105	151
46	66	81	90	98	132	42	49	59	64	85	73	88	105	112	156
47	68	83	95	103	137	44	51	61	66	90	76	93	108	117	161
48	73	88	98	108	143	42	54	66	66	92	76	95	112	120	169
49	76	90	103	112	148	44	56	68	68	98	78	100	115	125	174
50	78	95	108	115	153	46	56	68	73	100	83	103	120	132	180
51	81	98	110	120	159	49	61	73	76	106	86	108	125	134	185
52	83	103	115	125	166	51	61	76	78	106	88	108	127	139	188
53	88	105	120	130	172	51	64	78	81	111	88	112	130	144	193
54	90	110	122	132	177	54	66	81	86	114	93	115	137	149	198
55	93	112	127	137	182	56	68	83	88	119	95	120	139	154	203
56	100	122	137	149	196	59	73	88	93	127	100	125	147	164	211
57	108	130	147	159	211	61	78	93	98	129	103	132	154	176	219
58	112	139	159	171	225	66	83	95	103	137	110	134	156	183	227
59	120	147	169	181	240	68	88	100	108	140	112	142	164	196	235
60	127	156	178	193	254	71	93	105	112	148	117	147	171	205	243
61	137	169	193	208	272	73	95	110	120	156	120	152	176	208	251
62	147	181	205	222	293	78	100	117	125	164	125	154	183	210	259
63	154	191	220	239	312	83	105	120	130	172	130	161	186	210	267
64	164	203	232	254	333	88	110	127	134	180	134	164	193	213	275
65	174	215	247	269	351	90	112	132	142	188	137	169	198	215	283
66	196	242	279	303	396	98	120	142	152	201	144	178	208	227	299
67	218	269	308	335	439	103	130	152	164	217	152	188	220	242	317
68	237	293	340	369	483	112	139	161	176	232	159	200	232	252	333
69	259	320	369	401	526	117	149	171	188	248	166	210	244	266	351
70	281	347	401	435	571	125	156	181	198	262	174	220	254	279	367
71	315	389	447	486	642	130	164	191	208	275	178	227	264	288	380
72	347	430	494	538	711	137	171	200	218	291	186	235	274	298	396
73	381	469	543	589	782	142	181	210	230	306	191	242	281	305	410
74	413	511	589	640	851	149	188	220	239	322	198	249	291	315	425
75	447	552	635	692	922	154	196	230	249	336	203	257	301	325	439
76	503	623	718	782	1,041	166	210	247	266	354	215	271	318	342	454
77	562	692	804	875	1,160	176	227	261	281	375	225	288	330	357	470
78	618	762	887	965	1,276	186	242	276	301	396	235	303	347	376	491
79	677	831	973	1,058	1,395	196	259	291	315	417	244	320	359	391	507
80	733	902	1,056	1,149	1,514	208	274	308	332	436	257	335	376	408	523
81	799	985	1,151	1,254	1,670	213	281	318	342	452	261	340	381	413	536
82	868	1,070	1,249	1,359	1,826	218	286	327	352	468	264	342	386	420	547
83	934	1,153	1,344	1,461	1,981	222	296	337	364	483	266	349	391	428	560
84	1,002	1,239	1,442	1,566	2,137	227	301	347	374	499	269	352	396	435	571
85	1,068	1,322	1,537	1,672	2,293	232	308	357	384	515	274	357	401	440	584

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

Comprehensive Policy

Individual Rates for Lifetime Premium Payment Option
0-Day Elimination Period
Current Annual Premium Rates for Policies Issued Prior to 9/16/2002
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	**Benefit Period**					**Benefit Period**					**Benefit Period**				
Age	*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	49	56	64	68	90	27	34	44	46	66	51	64	73	78	124
40	51	61	68	76	100	29	39	46	46	66	59	71	83	88	132
41	54	64	73	81	108	32	42	49	49	71	61	76	88	93	137
42	56	68	76	83	114	34	44	51	54	74	66	78	95	98	143
43	61	71	81	88	119	37	46	54	56	79	66	83	98	103	148
44	64	76	86	93	127	39	46	56	59	79	68	86	100	108	151
45	66	78	88	100	132	42	51	61	61	85	71	90	105	108	156
46	68	83	93	103	137	44	51	61	66	87	76	93	110	115	161
47	71	86	100	108	143	46	54	64	68	92	78	98	110	122	169
48	76	90	103	112	148	44	56	68	68	98	78	100	115	125	177
49	78	93	108	117	153	46	59	71	71	103	83	105	120	130	182
50	81	100	112	120	159	49	56	71	76	106	88	105	125	137	188
51	83	103	115	125	164	51	64	76	78	111	90	110	130	139	193
52	86	108	120	130	174	54	64	78	81	108	93	110	132	144	193
53	90	110	125	134	180	54	66	81	83	114	93	117	134	149	201
54	93	115	127	137	185	56	68	83	90	116	98	120	142	156	206
55	98	117	132	142	190	56	71	86	93	124	98	125	144	161	211
56	105	127	142	154	203	61	76	93	98	132	103	130	154	171	219
57	112	134	152	166	219	64	81	98	100	135	105	137	161	181	230
58	117	144	166	178	232	68	88	98	105	143	115	139	161	191	238
59	125	152	176	188	251	71	93	103	112	145	117	149	169	203	243
60	132	164	186	200	264	73	95	110	117	153	122	152	178	215	254
61	142	176	200	215	283	76	98	115	125	161	125	156	183	218	262
62	152	188	213	232	304	83	105	122	130	172	130	159	191	218	269
63	161	198	230	249	325	86	110	125	134	177	134	169	193	218	277
64	171	210	242	264	346	90	115	132	139	188	139	171	200	222	285
65	181	225	257	279	365	93	115	137	149	196	142	174	205	225	296
66	203	252	291	315	412	103	125	147	156	209	152	186	215	237	312
67	227	279	320	347	457	105	137	159	171	225	156	196	230	252	328
68	247	305	354	384	502	117	144	166	183	243	164	208	239	261	346
69	269	332	384	418	547	122	156	178	196	259	174	220	254	276	365
70	293	362	418	452	594	130	161	188	205	272	178	227	264	291	380
71	327	403	464	506	668	134	171	198	215	285	186	237	276	301	394
72	362	447	513	560	740	142	178	208	225	301	193	244	286	310	412
73	396	489	565	613	814	149	188	218	237	317	198	252	291	318	425
74	430	530	613	665	885	154	196	227	249	336	205	259	301	330	441
75	464	574	660	718	959	161	203	239	259	349	213	266	313	340	457
76	523	648	748	814	1,083	174	220	257	276	367	225	283	330	354	473
77	584	718	836	909	1,207	183	237	271	293	388	235	301	345	371	489
78	643	792	924	1,004	1,326	193	252	286	313	412	244	315	359	391	513
79	704	865	1,012	1,100	1,450	203	269	303	327	433	254	332	374	408	528
80	762	938	1,097	1,195	1,575	215	283	320	345	454	266	347	391	423	544
81	831	1,024	1,197	1,305	1,736	222	293	330	354	470	271	354	396	428	557
82	902	1,114	1,298	1,413	1,900	227	296	342	367	486	276	354	403	437	568
83	970	1,200	1,398	1,520	2,061	232	308	352	379	502	279	364	406	445	581
84	1,041	1,288	1,501	1,630	2,222	237	313	359	389	520	281	367	411	452	594
85	1,109	1,376	1,598	1,738	2,386	242	320	371	401	536	286	369	418	459	608

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

Comprehensive Policy

Individual Rates for Lifetime Premium Payment Option
0-Day Elimination Period
Current Annual Premium Rates for Policies Issued Prior to 9/16/2002
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	**Benefit Period**					**Benefit Period**					**Benefit Period**				
Age	*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	83	116	32	42	49	51	77	59	73	88	93	135
40	61	73	83	90	124	39	46	56	59	87	68	86	100	105	153
41	66	78	88	95	132	39	49	59	64	92	71	88	105	110	159
42	68	83	93	103	140	44	51	64	64	95	73	90	108	112	166
43	73	88	100	108	148	44	54	64	68	100	76	95	110	117	172
44	76	93	105	112	156	46	54	66	71	103	81	98	115	122	177
45	81	98	110	120	166	49	56	68	73	106	81	100	120	125	180
46	83	100	115	125	174	51	61	73	76	111	86	105	122	130	188
47	88	105	120	130	182	51	64	76	81	114	88	108	127	134	193
48	90	110	127	137	190	54	66	76	81	119	90	112	130	137	198
49	95	115	132	142	198	56	68	78	86	122	93	115	132	142	203
50	100	120	137	149	206	56	71	83	88	127	95	117	137	147	211
51	103	125	142	154	214	59	71	86	90	132	98	120	142	152	217
52	108	130	147	159	222	61	73	88	95	135	100	122	144	156	222
53	110	134	154	166	230	64	76	88	95	140	103	127	147	159	227
54	115	139	159	171	238	64	78	93	100	143	105	130	152	164	235
55	117	144	164	176	248	68	81	95	103	145	110	132	156	169	238
56	122	147	169	183	256	68	86	98	105	151	110	137	159	171	243
57	125	152	174	188	264	71	86	100	108	153	115	139	164	176	248
58	130	156	181	193	272	71	88	103	112	159	117	144	166	181	256
59	132	161	186	200	280	76	90	105	112	161	120	147	169	183	262
60	137	166	191	205	288	76	93	108	117	166	122	149	174	188	267
61	149	181	208	225	314	78	98	112	122	174	125	154	178	193	275
62	161	196	225	242	341	83	103	117	130	182	130	159	183	200	285
63	171	210	242	261	365	88	108	125	134	196	134	164	191	208	296
64	183	225	259	279	391	93	112	130	142	203	139	169	196	215	306
65	196	239	276	298	417	95	117	134	147	211	142	174	200	220	314
66	218	266	305	330	465	100	125	144	159	225	147	181	210	232	330
67	237	291	335	364	510	108	134	154	166	240	156	191	222	242	346
68	259	318	367	396	557	115	139	161	178	254	161	200	230	252	362
69	279	342	396	430	602	122	149	171	186	269	171	210	242	261	378
70	301	369	425	462	650	127	156	181	198	283	176	218	252	274	394
71	335	413	474	516	727	134	164	193	210	299	183	225	264	286	410
72	371	455	525	569	803	139	174	200	220	314	188	235	271	296	425
73	406	499	574	623	880	149	183	213	232	330	198	244	283	308	441
74	442	540	626	677	956	154	193	220	242	346	203	254	291	318	457
75	477	584	674	731	1,033	161	200	232	254	362	210	261	303	330	473
76	535	657	758	821	1,165	171	213	249	271	383	220	274	318	347	494
77	594	728	841	914	1,295	181	227	266	286	407	230	286	332	362	518
78	650	802	926	1,004	1,427	191	237	279	301	431	239	298	347	376	542
79	709	872	1,009	1,097	1,556	200	252	296	315	454	249	310	362	391	565
80	767	946	1,092	1,188	1,688	210	264	313	332	476	259	323	376	408	587
81	836	1,031	1,190	1,295	1,844	215	271	323	342	491	261	327	381	413	594
82	904	1,117	1,290	1,403	2,000	220	279	332	352	505	266	332	384	418	605
83	975	1,205	1,388	1,510	2,158	222	281	342	364	518	266	335	391	420	610
84	1,044	1,290	1,488	1,618	2,314	227	288	352	374	531	271	340	393	425	621
85	1,112	1,376	1,586	1,725	2,470	232	296	362	384	547	274	345	398	430	629

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

Comprehensive Policy

Individual Rates for Lifetime Premium Payment Option
0-Day Elimination Period
Current Annual Premium Rates for Policies Issued Prior to 9/16/2002
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				
	Benefit Period					Benefit Period					Benefit Period				
Issue Age	*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	71	81	86	122	32	44	51	54	79	61	76	93	98	140
40	64	76	86	93	129	42	49	59	61	90	71	90	105	110	159
41	68	81	90	100	137	42	51	61	66	95	73	93	110	112	164
42	71	86	98	108	145	46	54	66	66	100	76	95	110	117	174
43	76	90	105	112	153	46	56	66	71	106	78	100	112	122	180
44	78	98	110	117	161	49	54	68	73	108	86	100	120	127	185
45	83	103	115	125	174	51	59	71	76	108	86	103	125	130	185
46	86	105	120	130	182	54	64	76	78	114	90	108	127	134	193
47	90	110	125	134	190	54	66	78	83	116	93	110	132	139	201
48	93	115	132	142	198	56	68	78	86	124	95	117	134	142	206
49	100	120	137	147	206	56	71	81	90	127	95	120	137	149	211
50	105	125	142	154	214	59	73	88	93	132	98	122	142	154	219
51	108	130	147	161	222	61	73	90	93	137	100	125	149	156	227
52	112	134	152	166	230	64	76	93	98	140	103	127	152	161	232
53	115	139	161	174	238	66	78	90	98	148	105	132	152	164	238
54	120	144	166	178	248	66	83	95	103	148	110	134	156	169	243
55	122	149	171	183	259	71	86	98	108	151	115	139	161	176	246
56	127	152	176	191	267	71	90	100	110	156	115	144	164	178	254
57	130	156	181	196	275	73	90	103	112	159	120	147	171	183	259
58	134	164	188	200	283	73	90	108	117	166	122	149	174	188	267
59	137	169	193	208	291	78	93	110	117	169	125	152	176	191	272
60	142	174	198	213	299	78	95	112	122	174	127	154	181	196	277
61	154	188	215	235	328	83	103	117	127	180	130	159	186	200	285
62	169	203	235	252	354	86	108	122	134	190	134	166	191	208	296
63	178	218	252	271	380	90	112	130	139	201	139	171	198	218	306
64	191	235	269	291	407	98	117	134	147	211	144	174	203	222	320
65	203	249	288	310	433	100	122	139	152	222	149	181	208	227	328
66	227	276	318	342	483	103	130	149	166	232	152	188	218	242	343
67	247	303	347	379	531	112	139	161	174	248	161	198	232	252	359
68	269	330	381	411	579	120	144	169	186	264	169	208	239	264	378
69	291	357	411	447	626	127	154	178	193	280	176	218	252	271	394
70	313	384	442	481	676	132	164	188	205	293	183	227	261	283	410
71	347	430	494	535	756	142	169	200	220	312	191	232	274	298	425
72	386	472	547	591	835	144	181	208	230	328	196	244	281	308	444
73	423	518	596	648	914	154	191	222	242	343	205	254	296	320	460
74	459	562	650	704	993	161	200	230	252	362	213	264	303	330	476
75	496	609	701	760	1,075	166	208	242	264	375	218	271	315	342	491
76	557	684	787	853	1,213	178	220	259	283	396	227	283	332	362	513
77	618	758	875	951	1,347	188	237	276	298	423	237	298	345	376	536
78	677	833	963	1,044	1,485	198	247	291	313	446	249	310	362	393	563
79	738	907	1,051	1,141	1,620	208	261	305	327	470	259	323	374	406	587
80	799	982	1,136	1,234	1,757	218	276	325	347	494	269	337	391	425	608
81	870	1,073	1,237	1,347	1,918	222	281	337	357	510	271	340	398	430	618
82	941	1,161	1,342	1,459	2,079	227	291	347	367	526	276	347	398	435	629
83	1,014	1,254	1,444	1,571	2,246	232	291	354	379	539	276	347	406	437	634
84	1,085	1,342	1,547	1,681	2,407	237	301	367	391	552	283	354	411	442	645
85	1,156	1,432	1,650	1,794	2,568	242	305	376	401	571	286	357	413	447	655

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

Comprehensive Policy

Individual Rates for 10-Year Premium Payment Option
0-Day Elimination Period
Current Annual Premium Rates for Policies Issued Prior to 9/16/2002
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				
	Benefit Period					Benefit Period					Benefit Period				
Issue Age	*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	83	100	115	122	172	64	78	90	100	143	122	154	178	196	277
41	88	108	122	130	182	68	83	95	108	151	130	161	188	208	291
42	93	112	130	139	193	71	88	103	112	156	137	174	200	218	304
43	98	120	137	147	201	76	93	108	120	166	147	181	210	232	320
44	105	125	144	154	211	78	100	115	127	174	152	193	222	244	336
45	110	132	152	161	222	83	105	120	134	182	159	200	232	257	349
46	115	139	159	171	232	86	108	127	139	188	166	208	244	266	362
47	120	144	166	178	243	90	115	132	147	196	174	220	254	279	375
48	125	152	174	186	251	95	120	139	152	206	183	227	266	293	391
49	130	156	181	193	262	100	127	144	159	214	191	239	276	305	404
50	134	164	188	203	272	103	130	152	164	219	198	247	288	315	417
51	139	171	196	210	283	108	134	156	171	227	205	254	298	327	431
52	147	176	203	218	293	110	142	164	178	235	210	266	310	340	446
53	152	183	210	225	301	115	147	169	186	246	220	274	320	354	462
54	156	188	218	235	312	117	152	176	191	251	227	286	332	364	476
55	161	196	225	242	322	122	156	181	198	259	235	293	342	376	489
56	171	208	239	257	341	127	161	186	205	269	239	301	349	386	505
57	181	220	254	271	359	132	169	193	213	280	244	308	357	396	518
58	188	232	266	288	380	139	174	200	220	285	254	315	367	401	531
59	198	244	281	303	399	144	181	208	227	296	259	323	374	411	544
60	208	257	296	318	417	149	186	213	235	306	264	330	381	420	560
61	218	269	310	335	439	152	191	218	239	314	264	332	384	423	563
62	230	283	325	352	462	152	193	222	244	317	261	332	386	425	563
63	239	296	342	369	483	156	198	227	249	325	261	337	389	425	565
64	252	310	357	386	507	156	200	232	254	328	259	337	391	428	565
65	261	323	371	403	528	159	205	237	259	336	259	340	393	430	568
66	288	349	403	440	576	159	213	244	266	346	257	342	396	430	568
67	315	379	435	474	621	161	218	252	274	359	257	342	398	433	571
68	342	406	469	511	668	161	222	259	281	370	254	345	398	433	573
69	369	435	501	545	713	164	227	266	288	383	254	345	401	435	576
70	396	462	533	582	761	164	235	274	296	394	252	347	403	435	576
71	423	501	577	628	832	171	237	279	301	396	254	345	401	435	571
72	450	538	621	677	904	178	242	283	305	399	259	345	401	433	568
73	474	577	665	723	972	186	247	286	310	402	264	345	398	433	565
74	501	613	709	772	1,044	193	252	291	315	404	269	345	398	430	563
75	528	653	753	819	1,115	200	254	296	320	407	271	342	396	430	557
76	582	721	833	907	1,223	208	264	305	330	423	276	349	403	437	568
77	635	792	914	992	1,329	215	271	315	345	444	281	352	408	447	581
78	692	860	992	1,080	1,437	222	279	327	354	460	286	359	418	452	594
79	745	931	1,073	1,166	1,543	230	286	337	369	481	291	362	423	462	608
80	799	1,000	1,153	1,254	1,651	237	296	347	379	497	296	369	430	469	618
81	860	1,075	1,241	1,351	1,797	239	301	352	384	505	296	371	433	472	608
82	921	1,151	1,329	1,447	1,939	242	303	357	391	515	296	371	435	479	597
83	982	1,229	1,417	1,544	2,085	247	305	364	393	526	293	371	440	481	587
84	1,044	1,305	1,505	1,640	2,227	249	308	369	401	536	293	371	442	489	576
85	1,105	1,381	1,593	1,738	2,372	252	313	374	406	544	293	374	445	491	565

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

Comprehensive Policy

Individual Rates for 10-Year Premium Payment Option
0-Day Elimination Period
Current Annual Premium Rates for Policies Issued Prior to 9/16/2002
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	**Benefit Period**					**Benefit Period**					**Benefit Period**				
Age	*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	86	105	120	127	180	66	81	93	105	148	127	159	186	203	288
41	90	112	127	134	190	73	86	100	112	156	137	166	196	218	301
42	98	117	134	144	201	73	90	108	117	161	142	181	208	227	317
43	103	125	142	152	209	78	95	112	125	174	152	188	220	242	333
44	110	130	149	161	219	81	105	120	132	182	156	200	232	254	349
45	115	137	156	169	230	86	110	125	139	190	164	208	242	266	365
46	120	144	166	178	243	88	112	132	144	193	174	218	254	276	375
47	125	149	174	186	254	93	120	137	152	203	181	230	264	288	388
48	130	156	181	193	262	100	125	144	159	214	191	237	276	305	407
49	134	164	188	200	272	105	132	149	166	222	198	247	286	318	420
50	139	171	196	210	283	108	134	159	171	227	205	257	301	327	433
51	144	178	203	218	293	112	139	164	178	238	215	264	310	342	449
52	152	183	210	227	304	115	147	171	183	246	220	276	323	352	465
53	156	191	218	235	314	120	152	176	193	254	230	283	335	367	481
54	164	196	227	244	325	120	159	181	198	262	235	298	345	379	494
55	169	203	235	252	336	127	164	188	205	269	242	305	354	391	507
56	178	215	249	266	354	132	169	193	215	280	249	313	364	403	526
57	188	230	264	281	373	137	174	200	222	293	254	320	371	413	539
58	196	242	276	301	396	144	181	210	227	296	264	327	381	415	552
59	205	254	293	315	415	152	188	215	237	309	269	335	389	428	565
60	215	266	308	330	433	156	193	220	244	320	276	345	396	437	584
61	227	279	323	347	457	156	200	227	249	325	274	347	398	440	584
62	239	296	337	367	481	156	200	232	254	330	271	345	403	442	587
63	249	308	357	384	502	161	205	235	259	338	271	349	403	442	589
64	261	323	371	401	528	164	208	242	264	341	269	352	406	445	587
65	271	335	386	420	550	166	215	247	269	349	271	354	411	447	592
66	301	364	420	457	600	164	220	254	279	359	266	354	411	447	589
67	327	393	452	494	645	169	227	261	283	375	266	357	415	450	594
68	357	423	489	530	695	166	230	269	293	386	264	357	413	450	597
69	384	452	521	567	742	171	237	279	301	399	264	359	418	452	600
70	411	481	555	606	793	171	242	283	305	407	264	359	418	452	597
71	440	521	599	653	867	178	247	291	313	412	264	359	418	452	592
72	467	560	645	704	941	186	252	296	318	415	271	357	418	450	589
73	494	599	692	753	1,012	193	257	298	323	417	274	359	413	450	587
74	521	638	738	804	1,086	200	261	301	327	420	281	359	413	447	584
75	550	679	782	850	1,160	208	264	308	335	423	281	354	413	447	579
76	606	750	868	943	1,273	215	274	318	342	439	286	364	418	455	589
77	660	824	951	1,031	1,382	225	281	327	359	462	293	367	425	467	605
78	718	894	1,031	1,124	1,495	232	291	342	367	478	298	374	435	469	618
79	775	968	1,117	1,212	1,604	239	298	349	384	502	303	376	437	481	634
80	831	1,039	1,200	1,305	1,717	247	308	362	393	518	308	384	447	486	642
81	894	1,119	1,290	1,405	1,868	249	313	367	398	526	308	386	450	491	631
82	958	1,197	1,383	1,505	2,016	252	315	371	406	536	308	386	452	499	621
83	1,022	1,278	1,474	1,606	2,169	257	318	379	411	547	305	386	457	501	608
84	1,085	1,356	1,566	1,706	2,317	259	320	384	415	557	305	386	459	508	597
85	1,149	1,437	1,657	1,806	2,468	261	325	389	423	565	305	389	462	511	587

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

Comprehensive Policy

Individual Rates for 10-Year Premium Payment Option
0-Day Elimination Period
Current Annual Premium Rates for Policies Issued Prior to 9/16/2002
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	**Benefit Period**					**Benefit Period**					**Benefit Period**				
Age	*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	105	127	144	154	217	78	98	112	127	180	154	188	218	242	341
41	110	134	152	164	230	83	103	120	132	188	161	196	227	249	354
42	117	142	161	174	243	86	108	122	137	196	166	203	235	259	365
43	122	149	169	181	256	90	110	130	144	203	171	210	244	269	378
44	130	156	178	191	267	93	115	132	149	211	176	218	249	279	394
45	134	164	186	200	280	98	120	139	154	219	183	225	259	286	404
46	142	171	196	210	293	100	125	144	159	227	188	230	266	293	417
47	147	178	203	218	306	105	130	149	166	235	196	237	276	305	431
48	154	186	213	227	320	108	132	154	171	243	198	244	283	313	441
49	159	193	220	237	333	112	137	159	176	251	205	252	293	323	454
50	166	200	230	247	346	115	142	164	183	259	210	259	301	330	468
51	171	205	237	254	357	117	149	171	191	267	218	269	308	340	481
52	176	213	244	264	370	122	154	176	196	275	225	276	318	349	494
53	183	220	254	274	383	125	156	181	200	283	227	283	325	357	505
54	188	227	261	283	396	130	161	186	205	291	235	291	335	367	518
55	196	235	271	291	410	132	166	191	213	299	239	298	342	376	531
56	200	242	279	301	423	137	171	198	218	306	247	303	352	384	542
57	208	249	288	310	433	139	176	200	222	314	252	310	357	393	557
58	213	257	296	320	446	144	178	208	227	322	257	318	367	401	571
59	220	264	305	327	460	147	183	210	235	330	261	325	374	413	581
60	225	271	313	337	473	152	188	218	239	338	269	332	384	420	594
61	237	288	332	357	502	154	191	220	244	343	269	330	381	420	592
62	249	303	349	376	531	156	193	225	247	349	269	330	381	418	589
63	264	320	369	398	557	159	196	227	249	354	264	327	379	415	592
64	276	335	386	418	587	161	198	232	252	359	264	327	379	413	589
65	288	352	406	437	616	164	200	235	257	365	264	325	376	413	587
66	320	379	437	472	663	159	205	239	264	375	254	327	379	415	592
67	352	406	467	506	713	152	213	249	271	386	247	330	381	415	592
68	381	433	499	540	761	149	218	254	276	396	239	330	384	418	597
69	413	459	528	574	811	142	225	264	283	407	232	332	386	418	597
70	445	486	560	609	859	137	230	269	291	417	222	335	389	420	602
71	469	528	606	660	930	149	235	274	296	428	232	337	391	423	608
72	491	567	653	711	1,004	164	242	281	303	433	244	340	396	425	610
73	516	609	701	760	1,075	178	244	283	310	444	257	342	396	433	616
74	538	648	748	811	1,149	193	252	291	318	449	269	345	401	435	618
75	562	689	794	863	1,221	205	257	296	323	460	279	347	403	437	624
76	616	758	875	948	1,345	213	266	305	335	476	283	352	406	442	631
77	672	826	953	1,036	1,469	220	274	320	345	494	283	354	413	447	639
78	726	897	1,034	1,122	1,593	227	281	330	357	510	288	357	415	452	647
79	782	965	1,112	1,210	1,717	235	288	345	367	528	288	359	423	457	655
80	836	1,034	1,193	1,295	1,841	242	298	354	379	544	293	364	425	462	663
81	897	1,112	1,283	1,393	1,984	244	301	359	384	552	293	364	425	462	645
82	958	1,190	1,373	1,493	2,127	249	305	364	389	557	296	364	425	459	624
83	1,022	1,266	1,461	1,591	2,267	249	310	369	393	568	293	367	430	462	608
84	1,083	1,344	1,552	1,691	2,409	254	315	374	398	573	296	367	430	459	587
85	1,144	1,422	1,642	1,789	2,552	257	318	379	403	581	296	367	430	459	568

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

Comprehensive Policy

Individual Rates for 10-Year Premium Payment Option
0-Day Elimination Period
Current Annual Premium Rates for Policies Issued Prior to 9/16/2002
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				
	Benefit Period					Benefit Period					Benefit Period				
Issue Age	*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	110	132	149	161	225	81	103	117	132	188	159	196	227	249	354
41	115	139	156	171	238	86	108	125	137	196	166	203	237	259	370
42	122	147	169	181	254	88	112	127	142	203	174	213	242	269	378
43	127	154	176	188	267	93	115	134	149	211	178	220	254	279	394
44	134	164	186	198	277	98	117	137	156	219	183	225	259	291	410
45	139	171	193	208	291	103	125	144	161	230	191	232	269	298	420
46	147	178	203	218	304	105	130	152	166	238	196	239	279	305	436
47	152	186	210	227	320	110	134	156	171	243	205	247	288	318	446
48	161	193	220	237	333	110	137	161	178	254	205	254	296	325	460
49	166	200	230	247	346	115	142	164	183	262	213	261	303	335	473
50	174	208	239	257	359	120	149	169	191	269	218	271	313	342	486
51	178	213	247	264	370	122	156	178	198	277	225	281	320	354	502
52	183	220	254	274	386	127	161	183	205	285	235	288	330	364	513
53	191	230	264	283	399	130	161	188	210	293	237	293	337	371	523
54	196	237	271	296	412	134	166	193	213	301	244	301	349	381	539
55	203	244	281	303	425	137	174	200	220	312	249	310	357	391	552
56	208	252	291	313	439	144	178	205	225	320	257	315	364	398	565
57	215	259	301	323	452	147	183	208	232	325	264	323	371	411	579
58	220	266	308	332	465	152	186	215	237	336	269	330	381	418	592
59	230	274	318	340	478	152	191	218	244	343	271	340	389	430	605
60	235	281	325	352	491	156	198	227	247	351	279	347	398	435	618
61	247	301	345	371	523	159	198	230	254	357	279	342	398	437	616
62	259	315	364	391	552	164	200	232	257	362	279	342	396	435	613
63	274	332	384	415	579	166	203	237	259	370	276	342	393	430	616
64	288	347	401	435	610	166	208	242	261	373	274	342	396	430	613
65	301	367	423	455	639	169	208	242	266	380	274	337	391	430	610
66	332	393	455	491	690	166	215	249	274	391	264	342	393	433	616
67	367	423	486	525	742	156	220	259	283	402	257	342	396	433	616
68	396	450	518	562	793	156	227	264	286	412	249	342	398	435	621
69	430	479	550	596	843	147	232	274	296	423	242	345	401	435	621
70	462	506	582	633	893	144	239	281	303	433	232	347	406	437	626
71	489	550	631	687	967	154	242	283	308	446	239	349	406	440	631
72	511	589	679	740	1,044	171	252	291	315	452	254	354	411	442	634
73	535	633	728	789	1,118	186	254	296	325	462	269	357	413	452	642
74	560	674	777	843	1,194	200	261	303	330	468	279	357	418	452	645
75	584	716	826	897	1,268	215	266	308	335	478	291	362	420	455	650
76	640	787	909	987	1,398	222	279	318	347	497	296	367	423	459	658
77	699	860	992	1,078	1,527	230	283	332	359	515	296	367	428	464	666
78	755	934	1,075	1,166	1,657	237	291	342	371	531	301	371	433	472	674
79	814	1,004	1,156	1,259	1,786	244	301	359	381	550	301	374	440	474	682
80	870	1,075	1,241	1,347	1,915	252	310	367	393	565	303	379	440	481	690
81	934	1,156	1,334	1,449	2,063	254	313	374	398	573	303	379	442	479	671
82	997	1,237	1,427	1,552	2,211	259	318	379	406	581	308	379	442	479	650
83	1,063	1,317	1,520	1,654	2,357	259	323	384	408	592	305	381	447	481	634
84	1,127	1,398	1,613	1,760	2,505	264	327	391	413	597	308	381	447	477	610
85	1,190	1,479	1,708	1,860	2,655	266	330	393	420	602	308	381	447	479	589

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

Facility Only Policy

Individual Rates for Lifetime Premium Payment Option
90 Day Elimination Period
Current Annual Premium Rates for Policies Issued On or After 9/16/2002
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		
Issue	**Benefit Period**			**Benefit Period**			**Benefit Period**		
Age	*1 Year*	*2 Years*	*3 Years*	*1 Year*	*2 Years*	*3 Years*	*1 Year*	*2 Years*	*3 Years*
<45	20	24	27	5	7	10	17	27	34
45	22	24	27	5	10	12	17	29	39
46	22	27	29	5	10	12	20	29	42
47	22	27	32	7	12	15	22	34	42
48	24	29	34	7	12	15	22	34	44
49	24	32	34	10	12	20	24	37	49
50	27	32	37	10	17	20	24	42	54
51	27	34	42	12	17	20	27	44	54
52	29	37	44	12	20	24	27	46	59
53	32	39	46	12	22	27	29	49	64
54	32	44	51	15	22	29	32	49	66
55	34	46	54	17	24	34	34	54	71
56	37	49	59	20	29	37	37	59	76
57	39	54	64	20	32	42	39	61	81
58	44	59	71	20	34	44	39	66	86
59	46	64	78	24	39	49	44	71	90
60	51	71	86	24	42	54	44	73	95
61	56	78	95	29	46	64	49	81	108
62	61	86	108	34	56	71	56	90	117
63	66	98	120	39	61	81	64	98	130
64	73	108	134	44	68	90	68	110	142
65	83	122	154	49	78	100	73	120	154
66	93	139	174	54	86	112	81	127	169
67	105	156	196	56	93	122	86	139	181
68	117	176	220	61	103	134	90	149	196
69	132	200	252	68	112	147	98	159	208
70	147	227	286	76	122	161	108	169	222
71	154	237	301	76	122	161	108	169	222
72	174	267	337	78	130	171	110	174	227
73	193	298	377	83	137	183	110	181	240
74	213	330	418	90	147	196	117	191	249
75	237	369	467	93	154	205	120	196	259
76	262	408	518	100	164	218	125	205	271
77	289	452	572	103	171	230	130	210	281
78	318	496	628	108	178	242	132	220	291
79	345	540	685	112	188	252	134	227	303
80	347	543	687	112	188	252	134	227	303
81	374	587	741	112	191	257	137	227	303
82	403	633	797	115	191	257	137	230	308
83	435	680	856	115	198	267	137	230	308
84	469	736	924	120	203	274	139	232	313
85	506	795	998	125	210	284	144	240	323

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
Current Annual Premium Rates for Policies Issued On or After 9/16/2002
Rates per $20 NCF

Issue	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:	
Age	50%	100%	50%	100%	50%	100%	50%	100%
<40	64	95	78	120	100	154	130	196
40	68	100	83	127	105	164	138	208
41	71	105	88	134	112	174	147	219
42	76	112	93	142	117	183	156	233
43	78	117	98	149	125	196	167	248
44	83	125	105	159	132	208	176	262
45	88	132	110	169	142	220	187	280
46	93	139	117	178	149	232	199	297
47	98	149	125	188	159	247	213	317
48	105	156	132	200	169	262	228	337
49	110	166	139	213	178	276	242	357
50	117	176	149	225	191	293	259	380
51	125	188	159	240	203	313	277	406
52	134	200	169	254	218	333	297	432
53	142	213	181	271	232	355	320	464
54	152	227	193	291	249	377	343	496
55	164	242	205	311	267	403	369	530
56	174	257	222	330	286	430	398	568
57	186	276	237	352	308	460	429	608
58	200	293	257	377	330	489	464	651
59	215	315	274	403	355	523	501	700
60	232	337	296	433	384	562	542	755
61	254	367	325	469	418	609	597	821
62	279	399	355	509	457	658	657	893
63	306	433	389	553	501	714	723	974
64	337	472	428	599	550	773	795	1,061
65	379	526	479	665	616	853	896	1,176
66	418	570	528	721	680	927	989	1,283
67	460	621	582	785	748	1,007	1,092	1,404
68	504	675	638	853	822	1,093	1,205	1,528
69	560	741	709	936	912	1,201	1,340	1,683
70	621	814	787	1,027	1,010	1,313	1,487	1,847
71	643	831	812	1,049	1,042	1,340	1,530	1,885
72	709	910	895	1,144	1,147	1,457	1,683	2,055
73	778	988	983	1,245	1,257	1,582	1,847	2,234
74	851	1,068	1,073	1,345	1,374	1,709	2,020	2,421
75	932	1,161	1,176	1,460	1,506	1,853	2,211	2,626
76	1,015	1,254	1,284	1,575	1,641	2,000	2,404	2,830
77	1,098	1,345	1,389	1,687	1,775	2,137	2,585	3,021
78	1,183	1,435	1,499	1,797	1,910	2,271	2,770	3,205
79	1,267	1,521	1,606	1,905	2,042	2,401	2,937	3,369
80	1,267	1,521	1,606	1,905	2,042	2,401	2,937	3,369
81	1,340	1,577	1,694	1,968	2,132	2,455	3,023	3,410
82	1,428	1,668	1,807	2,081	2,262	2,582	3,182	3,565
83	1,528	1,768	1,927	2,203	2,396	2,716	3,340	3,724
84	1,638	1,880	2,064	2,345	2,558	2,880	3,534	3,920
85	1,763	2,010	2,215	2,506	2,738	3,069	3,750	4,147

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
Current Annual Premium Rates for Policies Issued On or After 9/16/2002
Rates per $20 NCF

Issue	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:	
Age	50%	100%	50%	100%	50%	100%	50%	100%
<40	32	49	42	68	59	100	84	130
40	32	54	44	73	64	105	89	138
41	34	59	46	76	66	112	95	150
42	37	61	49	83	73	120	104	159
43	39	66	54	88	76	127	110	170
44	42	68	56	93	83	134	118	182
45	44	73	61	98	86	142	127	193
46	49	78	64	105	93	152	135	205
47	51	81	68	112	98	159	144	216
48	54	88	73	120	105	169	156	231
49	59	93	81	127	115	181	167	248
50	64	100	86	134	120	193	182	265
51	68	105	90	144	130	203	196	282
52	71	110	98	152	137	215	210	306
53	78	120	105	161	149	230	228	323
54	83	125	112	171	159	245	248	346
55	88	134	122	181	171	259	265	372
56	98	144	130	196	183	274	288	398
57	105	152	139	208	196	291	311	427
58	112	164	149	220	210	313	337	458
59	120	171	161	232	225	330	366	490
60	130	183	171	247	240	347	398	522
61	142	200	188	269	267	377	441	574
62	156	215	208	291	291	408	484	623
63	171	235	227	313	318	438	530	674
64	183	252	245	337	345	472	582	729
65	203	271	271	362	379	509	637	793
66	220	293	291	389	408	543	692	853
67	237	311	313	416	438	577	749	914
68	254	330	337	438	472	611	804	974
69	274	355	364	469	509	653	873	1,046
70	296	374	394	501	550	697	940	1,118
71	291	369	389	491	543	680	934	1,101
72	306	384	408	511	572	712	986	1,153
73	323	401	430	531	601	741	1,035	1,205
74	335	416	450	553	631	770	1,087	1,257
75	352	433	472	575	660	800	1,141	1,311
76	369	447	494	597	694	831	1,193	1,366
77	381	460	513	614	719	856	1,239	1,404
78	396	472	533	633	748	880	1,277	1,438
79	411	484	553	648	773	900	1,308	1,464
80	411	484	553	648	773	900	1,308	1,464
81	399	467	540	626	751	863	1,245	1,424
82	413	479	555	641	770	878	1,262	1,398
83	425	491	572	655	792	897	1,280	1,412
84	440	506	589	675	814	919	1,306	1,435
85	455	521	611	694	841	946	1,334	1,461

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
Current Annual Premium Rates for Policies Issued On or After 9/16/2002
Rates per $20 NCF

Issue	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:	
Age	50%	100%	50%	100%	50%	100%	50%	100%
<40	81	122	108	166	152	237	231	331
40	83	130	112	174	159	247	242	346
41	88	134	117	181	164	257	254	363
42	90	139	122	188	174	269	268	380
43	98	147	130	198	181	279	280	395
44	100	152	134	205	191	289	294	412
45	105	159	142	213	198	301	308	429
46	110	166	147	220	208	313	323	450
47	115	171	152	230	215	325	337	467
48	120	178	159	240	225	337	355	487
49	127	186	169	249	237	352	375	510
50	132	193	176	259	247	367	392	533
51	137	200	183	269	257	379	412	553
52	142	208	191	281	269	394	429	579
53	152	218	200	291	281	408	450	602
54	156	225	210	301	291	425	473	628
55	164	232	220	313	306	438	496	654
56	171	245	227	325	318	455	522	683
57	181	252	240	340	333	472	548	715
58	188	264	249	352	350	491	576	746
59	198	274	262	364	364	511	605	778
60	208	284	274	379	379	528	637	810
61	225	306	296	403	413	562	692	870
62	242	325	320	433	443	601	744	931
63	259	347	342	460	474	636	801	994
64	276	367	367	487	509	675	862	1,058
65	301	391	396	518	548	716	928	1,133
66	318	416	421	548	582	756	991	1,202
67	337	435	445	575	616	792	1,055	1,265
68	359	455	472	601	650	829	1,115	1,329
69	381	482	501	633	692	870	1,190	1,406
70	403	504	531	665	734	917	1,262	1,484
71	391	487	516	643	714	890	1,234	1,447
72	403	499	533	658	738	907	1,280	1,484
73	416	511	550	675	765	932	1,326	1,530
74	428	523	570	692	790	956	1,375	1,577
75	443	538	589	709	817	980	1,427	1,628
76	457	550	606	729	846	1,007	1,473	1,675
77	469	560	626	741	868	1,027	1,513	1,706
78	479	570	641	756	895	1,046	1,545	1,732
79	491	579	658	768	912	1,061	1,568	1,749
80	491	579	658	768	912	1,061	1,568	1,749
81	472	550	633	731	875	1,007	1,481	1,709
82	484	557	643	741	890	1,012	1,481	1,634
83	491	567	658	753	907	1,027	1,490	1,640
84	506	579	672	768	927	1,046	1,510	1,657
85	518	592	692	787	951	1,071	1,530	1,677

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

Comprehensive Policy

Individual Rates for Lifetime Premium Payment Option
0-Day Elimination Period
Current Annual Premium Rates for Policies Issued On or After 9/16/2002
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	**Benefit Period**					**Benefit Period**					**Benefit Period**				
Age	*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	90	105	117	159	42	59	61	64	104	76	100	117	132	184
40	78	100	115	130	173	46	64	66	68	115	83	110	130	147	205
41	83	103	120	134	179	49	66	68	71	121	86	115	134	154	210
42	86	108	125	139	184	51	68	71	73	124	90	120	139	159	219
43	88	110	127	144	193	54	71	73	76	130	93	122	144	164	228
44	90	115	132	149	199	54	73	76	78	133	95	127	149	169	233
45	95	117	137	154	205	56	76	78	81	138	100	132	154	176	242
46	98	122	142	159	210	59	76	81	83	141	103	134	159	181	251
47	100	125	147	164	219	59	78	83	86	147	105	139	164	186	257
48	103	130	149	169	225	61	81	86	88	150	108	144	169	191	265
49	105	132	154	174	231	64	83	88	90	156	112	149	174	198	274
50	110	137	159	178	236	66	86	90	95	159	115	152	178	203	280
51	112	139	164	181	245	66	88	93	98	164	117	156	183	208	288
52	115	144	166	186	251	68	90	95	100	167	122	161	188	215	297
53	117	147	171	191	257	71	93	98	103	173	125	164	193	220	303
54	120	152	176	196	262	73	95	100	105	176	127	169	198	225	311
55	125	154	181	200	271	73	98	103	108	182	130	174	203	230	320
56	134	169	196	220	294	78	103	108	112	190	134	178	210	237	329
57	144	183	213	237	320	81	108	112	117	199	137	183	215	245	337
58	156	196	230	257	346	86	112	117	122	208	142	186	220	249	346
59	166	210	245	274	372	88	117	122	127	216	144	191	227	257	355
60	176	225	262	293	398	93	122	127	132	225	149	196	232	264	363
61	193	245	286	320	435	95	130	139	147	239	152	205	242	274	378
62	208	267	311	350	473	105	137	152	164	254	164	213	252	284	392
63	225	286	335	379	510	108	144	164	178	268	166	220	262	293	406
64	240	308	359	406	550	117	154	176	196	280	176	230	269	306	424
65	254	328	386	435	588	122	161	188	210	294	178	237	279	315	438
66	281	359	423	477	646	127	171	200	225	311	183	247	291	330	452
67	303	391	460	518	703	137	178	210	237	331	193	254	303	345	478
68	328	423	496	560	764	142	188	222	249	346	198	267	313	355	493
69	352	455	533	601	821	147	198	232	264	366	205	276	325	369	513
70	374	487	572	643	882	156	208	245	276	380	218	289	340	386	530
71	413	535	628	707	968	161	215	254	289	401	220	293	347	394	548
72	450	584	687	773	1,058	171	225	267	301	418	230	306	357	403	562
73	489	636	743	836	1,144	176	235	276	313	438	232	311	367	416	582
74	526	685	802	900	1,234	183	245	289	325	455	242	320	379	430	597
75	562	734	858	966	1,329	191	254	301	340	467	247	330	389	440	611
76	614	800	939	1,059	1,450	198	267	311	347	490	254	340	396	445	628
77	665	868	1,017	1,144	1,574	203	271	323	364	510	257	342	408	465	646
78	714	934	1,098	1,235	1,700	213	284	335	379	527	264	355	418	474	660
79	765	1,002	1,176	1,323	1,824	220	293	347	394	548	271	362	430	489	677
80	814	1,073	1,264	1,425	1,963	225	301	350	391	553	276	369	438	496	686
81	888	1,169	1,372	1,543	2,136	230	311	367	416	579	279	374	445	506	700
82	961	1,267	1,489	1,677	2,320	237	318	377	423	591	284	379	447	509	709
83	1,034	1,364	1,604	1,809	2,502	242	325	384	433	608	286	384	455	513	721
84	1,108	1,462	1,721	1,944	2,686	247	335	391	440	623	289	389	460	521	729
85	1,181	1,562	1,836	2,071	2,871	252	340	401	455	637	291	394	465	526	738

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

Comprehensive Policy

Individual Rates for 10-Year Premium Payment Option
0-Day Elimination Period
Current Annual Premium Rates for Policies Issued On or After 9/16/2002
Rates per $10 Daily Benefit

	Policy Form: LTC-CD8-MA-PA					**Rider: LTC8-PA-SIP**					**Rider: LTC8-PA-CIP**				
	Base Rates with No Inflation Protection					**Simple Inflation Protection Rider**					**Compound Inflation Protection Rider**				
Issue	**Benefit Period**					**Benefit Period**					**Benefit Period**				
Age	*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	139	178	208	232	317	83	112	120	125	210	147	198	235	267	375
41	144	183	215	242	329	86	117	122	130	219	152	205	245	276	386
42	149	191	222	252	340	90	120	127	134	228	156	213	252	286	401
43	154	198	232	259	352	93	125	132	137	236	164	220	262	296	415
44	159	205	240	269	363	95	130	137	142	242	169	227	271	308	429
45	166	210	247	276	375	98	134	142	147	251	174	235	279	318	444
46	171	218	254	286	386	103	137	144	152	259	178	242	289	328	458
47	176	225	262	293	398	105	142	149	156	268	186	249	296	337	473
48	181	232	269	303	409	108	147	154	161	274	191	257	306	347	484
49	186	237	279	313	421	110	152	159	166	282	196	264	315	357	499
50	191	245	286	320	435	115	154	164	171	291	200	271	323	367	513
51	196	252	293	330	447	117	159	169	176	300	208	279	333	377	527
52	200	257	301	337	458	120	164	171	181	306	213	286	340	386	542
53	208	264	308	347	470	125	166	176	183	314	218	293	350	396	556
54	213	271	318	355	481	127	171	181	188	323	222	301	359	406	571
55	218	279	325	364	493	130	176	186	193	331	230	308	367	418	582
56	232	298	350	394	533	134	183	191	200	343	232	313	374	423	591
57	249	320	374	421	571	139	188	198	208	355	237	320	379	430	599
58	267	342	399	450	611	147	196	205	213	366	242	325	386	438	608
59	281	362	425	477	648	152	203	213	220	380	247	330	394	445	620
60	298	384	450	506	689	156	210	220	227	392	249	335	401	455	628
61	315	408	479	538	732	161	215	232	247	404	254	340	403	460	637
62	335	433	509	570	778	166	222	247	269	418	257	345	411	465	646
63	355	457	535	604	821	171	230	262	289	429	262	352	416	472	657
64	372	482	565	636	868	178	237	276	308	444	267	357	423	479	669
65	391	506	594	667	914	183	245	291	328	458	271	364	430	487	680
66	416	538	631	712	971	188	252	298	337	470	274	369	435	494	686
67	440	570	670	753	1,032	193	259	308	347	484	279	374	443	499	697
68	465	604	709	797	1,092	200	267	315	357	499	284	379	447	506	706
69	489	636	746	839	1,153	205	276	325	369	513	289	386	457	516	718
70	511	667	785	883	1,213	213	284	335	379	527	293	394	465	526	732
71	548	714	839	944	1,294	215	289	340	384	536	293	394	465	526	732
72	582	760	890	1,002	1,378	218	293	347	391	545	293	394	467	528	735
73	616	804	944	1,064	1,461	222	298	352	399	556	296	396	469	531	741
74	653	851	998	1,122	1,545	227	303	359	406	568	298	401	472	535	746
75	687	897	1,051	1,183	1,626	232	311	367	416	579	301	403	477	540	755
76	731	956	1,122	1,264	1,738	235	315	372	421	588	301	403	479	540	755
77	775	1,017	1,193	1,342	1,850	240	320	379	428	597	303	406	479	543	758
78	822	1,076	1,264	1,423	1,963	242	328	386	435	608	303	408	482	548	761
79	866	1,137	1,335	1,504	2,072	247	333	394	445	620	306	411	487	550	767
80	910	1,196	1,406	1,582	2,185	252	340	401	452	634	308	413	491	555	775
81	976	1,286	1,511	1,702	2,355	254	342	403	457	637	308	413	489	553	772
82	1,044	1,377	1,619	1,822	2,525	257	345	408	462	646	306	413	489	553	772
83	1,110	1,467	1,724	1,944	2,692	259	350	413	467	654	306	413	489	553	775
84	1,176	1,557	1,831	2,064	2,862	262	355	418	472	663	308	413	489	553	775
85	1,245	1,646	1,936	2,183	3,029	264	357	423	479	672	308	416	491	555	663

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

Comprehensive Policy

Individual Rates for Lifetime Premium Payment Option
0-Day Elimination Period
Current Annual Premium Rates for Policies Issued On or After 9/16/2002
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	**Benefit Period**					**Benefit Period**					**Benefit Period**				
Age	*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	46	54	61	66	95	27	34	42	44	69	49	61	71	76	130
40	49	59	66	73	107	29	37	44	44	69	56	68	81	83	138
41	51	61	71	78	112	32	39	46	46	75	59	73	83	88	144
42	54	66	73	81	118	34	42	49	51	78	64	76	90	93	150
43	59	68	78	86	124	34	44	51	54	84	64	81	93	98	156
44	61	73	83	90	133	37	44	54	56	84	66	81	95	103	159
45	64	76	86	95	138	39	49	59	59	89	68	86	100	105	164
46	66	81	90	98	144	42	49	59	64	92	73	88	105	112	170
47	68	83	95	103	150	44	51	61	66	98	76	93	108	117	176
48	73	88	98	108	156	42	54	66	66	101	76	95	112	120	184
49	76	90	103	112	161	44	56	68	68	107	78	100	115	125	190
50	78	95	108	115	167	46	56	68	73	110	83	103	120	132	196
51	81	98	110	120	173	49	61	73	76	115	86	108	125	134	202
52	83	103	115	125	182	51	61	76	78	115	88	108	127	139	205
53	88	105	120	130	187	51	64	78	81	121	88	112	130	144	210
54	90	110	122	132	193	54	66	81	86	124	93	115	137	149	216
55	93	112	127	137	199	56	68	83	88	130	95	120	139	154	222
56	100	122	137	149	213	59	73	88	93	138	100	125	147	164	231
57	108	130	147	159	231	61	78	93	98	141	103	132	154	176	239
58	112	139	159	171	245	66	83	95	103	150	110	134	156	183	248
59	120	147	169	181	262	68	88	100	108	153	112	142	164	196	257
60	127	156	178	193	277	71	93	105	112	161	117	147	171	205	265
61	137	169	193	208	297	73	95	110	120	170	120	152	176	208	274
62	147	181	205	222	320	78	100	117	125	179	125	154	183	210	282
63	154	191	220	240	340	83	105	120	130	187	130	161	186	210	291
64	164	203	232	254	363	88	110	127	134	196	134	164	193	213	300
65	174	215	247	269	383	90	112	132	142	205	137	169	198	215	308
66	196	242	279	303	432	98	120	142	152	219	144	178	208	227	326
67	218	269	308	335	478	103	130	152	164	236	152	188	220	242	346
68	237	293	340	369	527	112	139	161	176	254	159	200	232	252	363
69	259	320	369	401	574	117	149	171	188	271	166	210	245	267	383
70	281	347	401	435	623	125	156	181	198	285	174	220	254	279	401
71	315	389	447	487	700	130	164	191	208	300	178	227	264	289	415
72	347	430	494	538	775	137	171	200	218	317	186	235	274	298	432
73	381	469	543	589	853	142	181	210	230	334	191	242	281	306	447
74	413	511	589	641	928	149	188	220	240	352	198	249	291	315	464
75	447	553	636	692	1,006	154	196	230	249	366	203	257	301	325	478
76	504	623	719	782	1,136	166	210	247	267	386	215	271	318	342	496
77	562	692	804	875	1,265	176	227	262	281	409	225	289	330	357	513
78	619	763	888	966	1,392	186	242	276	301	432	235	303	347	377	536
79	677	831	973	1,059	1,522	196	259	291	315	455	245	320	359	391	553
80	734	902	1,056	1,149	1,651	208	274	308	333	476	257	335	377	408	571
81	800	985	1,152	1,254	1,822	213	281	318	342	493	262	340	381	413	585
82	868	1,071	1,249	1,359	1,992	218	286	328	352	510	264	342	386	421	597
83	934	1,154	1,345	1,462	2,162	222	296	337	364	527	267	350	391	428	611
84	1,002	1,240	1,443	1,567	2,332	227	301	347	374	545	269	352	396	435	623
85	1,068	1,323	1,538	1,672	2,502	232	308	357	384	562	274	357	401	440	637

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

Comprehensive Policy

Individual Rates for Lifetime Premium Payment Option
0-Day Elimination Period
Current Annual Premium Rates for Policies Issued On or After 9/16/2002
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	**Benefit Period**					**Benefit Period**					**Benefit Period**				
Age	*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	49	56	64	68	98	27	34	44	46	72	51	64	73	78	135
40	51	61	68	76	110	29	39	46	46	72	59	71	83	88	144
41	54	64	73	81	118	32	42	49	49	78	61	76	88	93	150
42	56	68	76	83	124	34	44	51	54	81	66	78	95	98	156
43	61	71	81	88	130	37	46	54	56	86	66	83	98	103	161
44	64	76	86	93	138	39	46	56	59	86	68	86	100	108	164
45	66	78	88	100	144	42	51	61	61	92	71	90	105	108	170
46	68	83	93	103	150	44	51	61	66	95	76	93	110	115	176
47	71	86	100	108	156	46	54	64	68	101	78	98	110	122	184
48	76	90	103	112	161	44	56	68	68	107	78	100	115	125	193
49	78	93	108	117	167	46	59	71	71	112	83	105	120	130	199
50	81	100	112	120	173	49	56	71	76	115	88	105	125	137	205
51	83	103	115	125	179	51	64	76	78	121	90	110	130	139	210
52	86	108	120	130	190	54	64	78	81	118	93	110	132	144	210
53	90	110	125	134	196	54	66	81	83	124	93	117	134	149	219
54	93	115	127	137	202	56	68	83	90	127	98	120	142	156	225
55	98	117	132	142	208	56	71	86	93	135	98	125	144	161	231
56	105	127	142	154	222	61	76	93	98	144	103	130	154	171	239
57	112	134	152	166	239	64	81	98	100	147	105	137	161	181	251
58	117	144	166	178	254	68	88	98	105	156	115	139	161	191	259
59	125	152	176	188	274	71	93	103	112	159	117	149	169	203	265
60	132	164	186	200	288	73	95	110	117	167	122	152	178	215	277
61	142	176	200	215	308	76	98	115	125	176	125	156	183	218	285
62	152	188	213	232	331	83	105	122	130	187	130	159	191	218	294
63	161	198	230	249	355	86	110	125	134	193	134	169	193	218	303
64	171	210	242	264	378	90	115	132	139	205	139	171	200	222	311
65	181	225	257	279	398	93	115	137	149	213	142	174	205	225	323
66	203	252	291	315	450	103	125	147	156	228	152	186	215	237	340
67	227	279	320	347	499	105	137	159	171	245	156	196	230	252	357
68	247	306	355	384	548	117	144	166	183	265	164	208	240	262	378
69	269	333	384	418	597	122	156	178	196	282	174	220	254	276	398
70	293	362	418	452	648	130	161	188	205	297	178	227	264	291	415
71	328	403	465	506	729	134	171	198	215	311	186	237	276	301	429
72	362	447	513	560	807	142	178	208	225	329	193	245	286	311	450
73	396	489	565	614	888	149	188	218	237	346	198	252	291	318	464
74	430	531	614	665	966	154	196	227	249	366	205	259	301	330	481
75	465	575	660	719	1,046	161	203	240	259	380	213	267	313	340	499
76	523	648	748	814	1,182	174	220	257	276	401	225	284	330	355	516
77	584	719	836	910	1,317	183	237	271	293	424	235	301	345	372	533
78	643	792	924	1,005	1,447	193	252	286	313	450	245	315	359	391	559
79	704	866	1,012	1,100	1,582	203	269	303	328	473	254	333	374	408	576
80	763	939	1,098	1,196	1,718	215	284	320	345	496	267	347	391	423	594
81	831	1,024	1,198	1,306	1,894	222	293	330	355	513	271	355	396	428	608
82	902	1,115	1,298	1,413	2,072	227	296	342	367	530	276	355	403	438	620
83	971	1,201	1,399	1,521	2,248	232	308	352	379	548	279	364	406	445	634
84	1,042	1,289	1,501	1,631	2,424	237	313	359	389	568	281	367	411	452	648
85	1,110	1,377	1,599	1,738	2,603	242	320	372	401	585	286	369	418	460	663

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

Comprehensive Policy

Individual Rates for Lifetime Premium Payment Option
0-Day Elimination Period
Current Annual Premium Rates for Policies Issued On or After 9/16/2002
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	**Benefit Period**					**Benefit Period**					**Benefit Period**				
Age	*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	83	127	32	42	49	51	84	59	73	88	93	147
40	61	73	83	90	135	39	46	56	59	95	68	86	100	105	167
41	66	78	88	95	144	39	49	59	64	101	71	88	105	110	173
42	68	83	93	103	153	44	51	64	64	104	73	90	108	112	182
43	73	88	100	108	161	44	54	64	68	110	76	95	110	117	187
44	76	93	105	112	170	46	54	66	71	112	81	98	115	122	193
45	81	98	110	120	182	49	56	68	73	115	81	100	120	125	196
46	83	100	115	125	190	51	61	73	76	121	86	105	122	130	205
47	88	105	120	130	199	51	64	76	81	124	88	108	127	134	210
48	90	110	127	137	208	54	66	76	81	130	90	112	130	137	216
49	95	115	132	142	216	56	68	78	86	133	93	115	132	142	222
50	100	120	137	149	225	56	71	83	88	138	95	117	137	147	231
51	103	125	142	154	233	59	71	86	90	144	98	120	142	152	236
52	108	130	147	159	242	61	73	88	95	147	100	122	144	156	242
53	110	134	154	166	251	64	76	88	95	153	103	127	147	159	248
54	115	139	159	171	259	64	78	93	100	156	105	130	152	164	257
55	117	144	164	176	271	68	81	95	103	159	110	132	156	169	259
56	122	147	169	183	280	68	86	98	105	164	110	137	159	171	265
57	125	152	174	188	288	71	86	100	108	167	115	139	164	176	271
58	130	156	181	193	297	71	88	103	112	173	117	144	166	181	280
59	132	161	186	200	306	76	90	105	112	176	120	147	169	183	285
60	137	166	191	205	314	76	93	108	117	182	122	149	174	188	291
61	149	181	208	225	343	78	98	112	122	190	125	154	178	193	300
62	161	196	225	242	372	83	103	117	130	199	130	159	183	200	311
63	171	210	242	262	398	88	108	125	134	213	134	164	191	208	323
64	183	225	259	279	427	93	112	130	142	222	139	169	196	215	334
65	196	240	276	298	455	95	117	134	147	231	142	174	200	220	343
66	218	267	306	330	507	100	125	144	159	245	147	181	210	232	360
67	237	291	335	364	556	108	134	154	166	262	156	191	222	242	378
68	259	318	367	396	608	115	139	161	178	277	161	200	230	252	395
69	279	342	396	430	657	122	149	171	186	294	171	210	242	262	412
70	301	369	425	462	709	127	156	181	198	308	176	218	252	274	429
71	335	413	474	516	793	134	164	193	210	326	183	225	264	286	447
72	372	455	526	570	876	139	174	200	220	343	188	235	271	296	464
73	406	499	575	623	960	149	183	213	232	360	198	245	284	308	481
74	443	540	626	677	1,043	154	193	220	242	378	203	254	291	318	499
75	477	584	675	731	1,127	161	200	232	254	395	210	262	303	330	516
76	535	658	758	822	1,271	171	213	249	271	418	220	274	318	347	539
77	594	729	841	914	1,412	181	227	267	286	444	230	286	333	362	565
78	650	802	927	1,005	1,556	191	237	279	301	470	240	298	347	377	591
79	709	873	1,010	1,098	1,698	200	252	296	315	496	249	311	362	391	617
80	768	946	1,093	1,188	1,842	210	264	313	333	519	259	323	377	408	640
81	836	1,032	1,191	1,296	2,012	215	271	323	342	536	262	328	381	413	648
82	905	1,117	1,291	1,403	2,182	220	279	333	352	550	267	333	384	418	660
83	976	1,205	1,389	1,511	2,355	222	281	342	364	565	267	335	391	421	666
84	1,044	1,291	1,489	1,619	2,525	227	289	352	374	579	271	340	394	425	677
85	1,112	1,377	1,587	1,726	2,695	232	296	362	384	597	274	345	399	430	686

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

Comprehensive Policy

Individual Rates for Lifetime Premium Payment Option
0-Day Elimination Period
Current Annual Premium Rates for Policies Issued On or After 9/16/2002
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				
	Benefit Period					Benefit Period					Benefit Period				
Issue Age	*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	71	81	86	133	32	44	51	54	86	61	76	93	98	153
40	64	76	86	93	141	42	49	59	61	98	71	90	105	110	173
41	68	81	90	100	150	42	51	61	66	104	73	93	110	112	179
42	71	86	98	108	159	46	54	66	66	110	76	95	110	117	190
43	76	90	105	112	167	46	56	66	71	115	78	100	112	122	196
44	78	98	110	117	176	49	54	68	73	118	86	100	120	127	202
45	83	103	115	125	190	51	59	71	76	118	86	103	125	130	202
46	86	105	120	130	199	54	64	76	78	124	90	108	127	134	210
47	90	110	125	134	208	54	66	78	83	127	93	110	132	139	219
48	93	115	132	142	216	56	68	78	86	135	95	117	134	142	225
49	100	120	137	147	225	56	71	81	90	138	95	120	137	149	231
50	105	125	142	154	233	59	73	88	93	144	98	122	142	154	239
51	108	130	147	161	242	61	73	90	93	150	100	125	149	156	248
52	112	134	152	166	251	64	76	93	98	153	103	127	152	161	254
53	115	139	161	174	259	66	78	90	98	161	105	132	152	164	259
54	120	144	166	178	271	66	83	95	103	161	110	134	156	169	265
55	122	149	171	183	282	71	86	98	108	164	115	139	161	176	268
56	127	152	176	191	291	71	90	100	110	170	115	144	164	178	277
57	130	156	181	196	300	73	90	103	112	173	120	147	171	183	282
58	134	164	188	200	308	73	90	108	117	182	122	149	174	188	291
59	137	169	193	208	317	78	93	110	117	184	125	152	176	191	297
60	142	174	198	213	326	78	95	112	122	190	127	154	181	196	303
61	154	188	215	235	357	83	103	117	127	196	130	159	186	200	311
62	169	203	235	252	386	86	108	122	134	208	134	166	191	208	323
63	178	218	252	271	415	90	112	130	139	219	139	171	198	218	334
64	191	235	269	291	444	98	117	134	147	231	144	174	203	222	349
65	203	249	289	311	473	100	122	139	152	242	149	181	208	227	357
66	227	276	318	342	527	103	130	149	166	254	152	188	218	242	375
67	247	303	347	379	579	112	139	161	174	271	161	198	232	252	392
68	269	330	381	411	631	120	144	169	186	288	169	208	240	264	412
69	291	357	411	447	683	127	154	178	193	306	176	218	252	271	429
70	313	384	443	482	738	132	164	188	205	320	183	227	262	284	447
71	347	430	494	535	824	142	169	200	220	340	191	232	274	298	464
72	386	472	548	592	911	144	181	208	230	357	196	245	281	308	484
73	423	518	597	648	997	154	191	222	242	375	205	254	296	320	501
74	460	562	650	704	1,084	161	200	230	252	395	213	264	303	330	519
75	496	609	702	760	1,173	166	208	242	264	409	218	271	315	342	536
76	557	685	787	853	1,323	178	220	259	284	432	227	284	333	362	559
77	619	758	875	951	1,470	188	237	276	298	461	237	298	345	377	585
78	677	834	963	1,044	1,620	198	247	291	313	487	249	311	362	394	614
79	738	907	1,051	1,142	1,767	208	262	306	328	513	259	323	374	406	640
80	800	983	1,137	1,235	1,917	218	276	325	347	539	269	337	391	425	663
81	870	1,073	1,237	1,347	2,092	222	281	337	357	556	271	340	399	430	674
82	941	1,161	1,342	1,460	2,268	227	291	347	367	574	276	347	399	435	686
83	1,015	1,254	1,445	1,572	2,450	232	291	355	379	588	276	347	406	438	692
84	1,086	1,342	1,548	1,682	2,626	237	301	367	391	602	284	355	411	443	703
85	1,156	1,433	1,650	1,795	2,801	242	306	377	401	623	286	357	413	447	715

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

Comprehensive Policy

Individual Rates for 10-Year Premium Payment Option
0-Day Elimination Period
Current Annual Premium Rates for Policies Issued On or After 9/16/2002
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				
	Benefit Period					Benefit Period					Benefit Period				
Issue Age	*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	83	100	115	122	187	64	78	90	100	156	122	154	178	196	303
41	88	108	122	130	199	68	83	95	108	164	130	161	188	208	317
42	93	112	130	139	210	71	88	103	112	170	137	174	200	218	331
43	98	120	137	147	219	76	93	108	120	182	147	181	210	232	349
44	105	125	144	154	231	78	100	115	127	190	152	193	222	245	366
45	110	132	152	161	242	83	105	120	134	199	159	200	232	257	380
46	115	139	159	171	254	86	108	127	139	205	166	208	245	267	395
47	120	144	166	178	265	90	115	132	147	213	174	220	254	279	409
48	125	152	174	186	274	95	120	139	152	225	183	227	267	293	427
49	130	156	181	193	285	100	127	144	159	233	191	240	276	306	441
50	134	164	188	203	297	103	130	152	164	239	198	247	289	315	455
51	139	171	196	210	308	108	134	156	171	248	205	254	298	328	470
52	147	176	203	218	320	110	142	164	178	257	210	267	311	340	487
53	152	183	210	225	329	115	147	169	186	268	220	274	320	355	504
54	156	188	218	235	340	117	152	176	191	274	227	286	333	364	519
55	161	196	225	242	352	122	156	181	198	282	235	293	342	377	533
56	171	208	240	257	372	127	161	186	205	294	240	301	350	386	550
57	181	220	254	271	392	132	169	193	213	306	245	308	357	396	565
58	188	232	267	289	415	139	174	200	220	311	254	315	367	401	579
59	198	245	281	303	435	144	181	208	227	323	259	323	374	411	594
60	208	257	296	318	455	149	186	213	235	334	264	330	381	421	611
61	218	269	311	335	478	152	191	218	240	343	264	333	384	423	614
62	230	284	325	352	504	152	193	222	245	346	262	333	386	425	614
63	240	296	342	369	527	156	198	227	249	355	262	337	389	425	617
64	252	311	357	386	553	156	200	232	254	357	259	337	391	428	617
65	262	323	372	403	576	159	205	237	259	366	259	340	394	430	620
66	289	350	403	440	628	159	213	245	267	378	257	342	396	430	620
67	315	379	435	474	677	161	218	252	274	392	257	342	399	433	623
68	342	406	469	511	729	161	222	259	281	404	254	345	399	433	625
69	369	435	501	545	778	164	227	267	289	418	254	345	401	435	628
70	396	462	533	582	830	164	235	274	296	429	252	347	403	435	628
71	423	501	577	628	908	171	237	279	301	432	254	345	401	435	623
72	450	538	621	677	986	178	242	284	306	435	259	345	401	433	620
73	474	577	665	724	1,061	186	247	286	311	438	264	345	399	433	617
74	501	614	709	773	1,138	193	252	291	315	441	269	345	399	430	614
75	528	653	753	819	1,216	200	254	296	320	444	271	342	396	430	608
76	582	721	834	907	1,334	208	264	306	330	461	276	350	403	438	620
77	636	792	914	993	1,450	215	271	315	345	484	281	352	408	447	634
78	692	861	993	1,081	1,568	222	279	328	355	501	286	359	418	452	648
79	746	932	1,073	1,166	1,683	230	286	337	369	525	291	362	423	462	663
80	800	1,000	1,154	1,254	1,801	237	296	347	379	542	296	369	430	469	674
81	861	1,076	1,242	1,352	1,960	240	301	352	384	550	296	372	433	472	663
82	922	1,152	1,330	1,447	2,116	242	303	357	391	562	296	372	435	479	651
83	983	1,230	1,418	1,545	2,274	247	306	364	394	574	293	372	440	482	640
84	1,044	1,306	1,506	1,641	2,430	249	308	369	401	585	293	372	443	489	628
85	1,105	1,381	1,594	1,738	2,588	252	313	374	406	594	293	374	445	491	617

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

Comprehensive Policy

Individual Rates for 10-Year Premium Payment Option
0-Day Elimination Period
Current Annual Premium Rates for Policies Issued On or After 9/16/2002
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	**Benefit Period**					**Benefit Period**					**Benefit Period**				
Age	*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	86	105	120	127	196	66	81	93	105	161	127	159	186	203	314
41	90	112	127	134	208	73	86	100	112	170	137	166	196	218	329
42	98	117	134	144	219	73	90	108	117	176	142	181	208	227	346
43	103	125	142	152	228	78	95	112	125	190	152	188	220	242	363
44	110	130	149	161	239	81	105	120	132	199	156	200	232	254	380
45	115	137	156	169	251	86	110	125	139	208	164	208	242	267	398
46	120	144	166	178	265	88	112	132	144	210	174	218	254	276	409
47	125	149	174	186	277	93	120	137	152	222	181	230	264	289	424
48	130	156	181	193	285	100	125	144	159	233	191	237	276	306	444
49	134	164	188	200	297	105	132	149	166	242	198	247	286	318	458
50	139	171	196	210	308	108	134	159	171	248	205	257	301	328	473
51	144	178	203	218	320	112	139	164	178	259	215	264	311	342	490
52	152	183	210	227	331	115	147	171	183	268	220	276	323	352	507
53	156	191	218	235	343	120	152	176	193	277	230	284	335	367	525
54	164	196	227	245	355	120	159	181	198	285	235	298	345	379	539
55	169	203	235	252	366	127	164	188	205	294	242	306	355	391	553
56	178	215	249	267	386	132	169	193	215	306	249	313	364	403	574
57	188	230	264	281	406	137	174	200	222	320	254	320	372	413	588
58	196	242	276	301	432	144	181	210	227	323	264	328	381	416	602
59	205	254	293	315	452	152	188	215	237	337	269	335	389	428	617
60	215	267	308	330	473	156	193	220	245	349	276	345	396	438	637
61	227	279	323	347	499	156	200	227	249	355	274	347	399	440	637
62	240	296	337	367	525	156	200	232	254	360	271	345	403	443	640
63	249	308	357	384	548	161	205	235	259	369	271	350	403	443	643
64	262	323	372	401	576	164	208	242	264	372	269	352	406	445	640
65	271	335	386	421	599	166	215	247	269	380	271	355	411	447	646
66	301	364	421	457	654	164	220	254	279	392	267	355	411	447	643
67	328	394	452	494	703	169	227	262	284	409	267	357	416	450	648
68	357	423	489	531	758	166	230	269	293	421	264	357	413	450	651
69	384	452	521	567	810	171	237	279	301	435	264	359	418	452	654
70	411	482	555	606	865	171	242	284	306	444	264	359	418	452	651
71	440	521	599	653	945	178	247	291	313	450	264	359	418	452	646
72	467	560	645	704	1,026	186	252	296	318	452	271	357	418	450	643
73	494	599	692	753	1,104	193	257	298	323	455	274	359	413	450	640
74	521	638	738	804	1,185	200	262	301	328	458	281	359	413	447	637
75	550	680	782	851	1,265	208	264	308	335	461	281	355	413	447	631
76	606	751	868	944	1,389	215	274	318	342	478	286	364	418	455	643
77	660	824	951	1,032	1,507	225	281	328	359	504	293	367	425	467	660
78	719	895	1,032	1,125	1,631	232	291	342	367	522	298	374	435	469	674
79	775	968	1,117	1,213	1,749	240	298	350	384	548	303	377	438	482	692
80	831	1,039	1,201	1,306	1,873	247	308	362	394	565	308	384	447	487	700
81	895	1,120	1,291	1,406	2,038	249	313	367	399	574	308	386	450	491	689
82	958	1,198	1,384	1,506	2,199	252	315	372	406	585	308	386	452	499	677
83	1,022	1,279	1,474	1,606	2,366	257	318	379	411	597	306	386	457	501	663
84	1,086	1,357	1,567	1,707	2,528	259	320	384	416	608	306	386	460	509	651
85	1,149	1,438	1,658	1,807	2,692	262	325	389	423	617	306	389	462	511	640

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

Comprehensive Policy

Individual Rates for 10-Year Premium Payment Option
0-Day Elimination Period
Current Annual Premium Rates for Policies Issued On or After 9/16/2002
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	**Benefit Period**					**Benefit Period**					**Benefit Period**				
Age	*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	105	127	144	154	236	78	98	112	127	196	154	188	218	242	372
41	110	134	152	164	251	83	103	120	132	205	161	196	227	249	386
42	117	142	161	174	265	86	108	122	137	213	166	203	235	259	398
43	122	149	169	181	280	90	110	130	144	222	171	210	245	269	412
44	130	156	178	191	291	93	115	132	149	231	176	218	249	279	429
45	134	164	186	200	306	98	120	139	154	239	183	225	259	286	441
46	142	171	196	210	320	100	125	144	159	248	188	230	267	293	455
47	147	178	203	218	334	105	130	149	166	257	196	237	276	306	470
48	154	186	213	227	349	108	132	154	171	265	198	245	284	313	481
49	159	193	220	237	363	112	137	159	176	274	205	252	293	323	496
50	166	200	230	247	378	115	142	164	183	282	210	259	301	330	510
51	171	205	237	254	389	117	149	171	191	291	218	269	308	340	525
52	176	213	245	264	404	122	154	176	196	300	225	276	318	350	539
53	183	220	254	274	418	125	156	181	200	308	227	284	325	357	550
54	188	227	262	284	432	130	161	186	205	317	235	291	335	367	565
55	196	235	271	291	447	132	166	191	213	326	240	298	342	377	579
56	200	242	279	301	461	137	171	198	218	334	247	303	352	384	591
57	208	249	289	311	473	139	176	200	222	343	252	311	357	394	608
58	213	257	296	320	487	144	178	208	227	352	257	318	367	401	623
59	220	264	306	328	501	147	183	210	235	360	262	325	374	413	634
60	225	271	313	337	516	152	188	218	240	369	269	333	384	421	648
61	237	289	333	357	548	154	191	220	245	375	269	330	381	421	646
62	249	303	350	377	579	156	193	225	247	380	269	330	381	418	643
63	264	320	369	399	608	159	196	227	249	386	264	328	379	416	646
64	276	335	386	418	640	161	198	232	252	392	264	328	379	413	643
65	289	352	406	438	672	164	200	235	257	398	264	325	377	413	640
66	320	379	438	472	723	159	205	240	264	409	254	328	379	416	646
67	352	406	467	506	778	152	213	249	271	421	247	330	381	416	646
68	381	433	499	540	830	149	218	254	276	432	240	330	384	418	651
69	413	460	528	575	885	142	225	264	284	444	232	333	386	418	651
70	445	487	560	609	937	137	230	269	291	455	222	335	389	421	657
71	469	528	606	660	1,015	149	235	274	296	467	232	337	391	423	663
72	491	567	653	712	1,095	164	242	281	303	473	245	340	396	425	666
73	516	609	702	760	1,173	178	245	284	311	484	257	342	396	433	672
74	538	648	748	812	1,254	193	252	291	318	490	269	345	401	435	674
75	562	689	795	863	1,332	205	257	296	323	501	279	347	403	438	680
76	616	758	875	949	1,467	213	267	306	335	519	284	352	406	443	689
77	672	826	954	1,037	1,602	220	274	320	345	539	284	355	413	447	697
78	726	897	1,034	1,122	1,738	227	281	330	357	556	289	357	416	452	706
79	782	966	1,112	1,210	1,873	235	289	345	367	576	289	359	423	457	715
80	836	1,034	1,193	1,296	2,009	242	298	355	379	594	293	364	425	462	723
81	897	1,112	1,284	1,394	2,164	245	301	359	384	602	293	364	425	462	703
82	958	1,191	1,374	1,494	2,320	249	306	364	389	608	296	364	425	460	680
83	1,022	1,267	1,462	1,592	2,473	249	311	369	394	620	293	367	430	462	663
84	1,083	1,345	1,553	1,692	2,629	254	315	374	399	625	296	367	430	460	640
85	1,144	1,423	1,643	1,790	2,784	257	318	379	403	634	296	367	430	460	620

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

Comprehensive Policy

Individual Rates for 10-Year Premium Payment Option
0-Day Elimination Period
Current Annual Premium Rates for Policies Issued On or After 9/16/2002
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	**Benefit Period**					**Benefit Period**					**Benefit Period**				
Age	*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	110	132	149	161	245	81	103	117	132	205	159	196	227	249	386
41	115	139	156	171	259	86	108	125	137	213	166	203	237	259	404
42	122	147	169	181	277	88	112	127	142	222	174	213	242	269	412
43	127	154	176	188	291	93	115	134	149	231	178	220	254	279	429
44	134	164	186	198	303	98	117	137	156	239	183	225	259	291	447
45	139	171	193	208	317	103	125	144	161	251	191	232	269	298	458
46	147	178	203	218	331	105	130	152	166	259	196	240	279	306	476
47	152	186	210	227	349	110	134	156	171	265	205	247	289	318	487
48	161	193	220	237	363	110	137	161	178	277	205	254	296	325	501
49	166	200	230	247	378	115	142	164	183	285	213	262	303	335	516
50	174	208	240	257	392	120	149	169	191	294	218	271	313	342	530
51	178	213	247	264	404	122	156	178	198	303	225	281	320	355	548
52	183	220	254	274	421	127	161	183	205	311	235	289	330	364	559
53	191	230	264	284	435	130	161	188	210	320	237	293	337	372	571
54	196	237	271	296	450	134	166	193	213	329	245	301	350	381	588
55	203	245	281	303	464	137	174	200	220	340	249	311	357	391	602
56	208	252	291	313	478	144	178	205	225	349	257	315	364	399	617
57	215	259	301	323	493	147	183	208	232	355	264	323	372	411	631
58	220	267	308	333	507	152	186	215	237	366	269	330	381	418	646
59	230	274	318	340	522	152	191	218	245	375	271	340	389	430	660
60	235	281	325	352	536	156	198	227	247	383	279	347	399	435	674
61	247	301	345	372	571	159	198	230	254	389	279	342	399	438	672
62	259	315	364	391	602	164	200	232	257	395	279	342	396	435	669
63	274	333	384	416	631	166	203	237	259	404	276	342	394	430	672
64	289	347	401	435	666	166	208	242	262	406	274	342	396	430	669
65	301	367	423	455	697	169	208	242	267	415	274	337	391	430	666
66	333	394	455	491	752	166	215	249	274	427	264	342	394	433	672
67	367	423	487	526	810	156	220	259	284	438	257	342	396	433	672
68	396	450	518	562	865	156	227	264	286	450	249	342	399	435	677
69	430	479	550	597	919	147	232	274	296	461	242	345	401	435	677
70	462	506	582	633	974	144	240	281	303	473	232	347	406	438	683
71	489	550	631	687	1,055	154	242	284	308	487	240	350	406	440	689
72	511	589	680	741	1,138	171	252	291	315	493	254	355	411	443	692
73	535	633	729	790	1,219	186	254	296	325	504	269	357	413	452	700
74	560	675	778	844	1,303	200	262	303	330	510	279	357	418	452	703
75	584	716	826	897	1,383	215	267	308	335	522	291	362	421	455	709
76	641	787	910	988	1,525	222	279	318	347	542	296	367	423	460	718
77	699	861	993	1,078	1,666	230	284	333	359	562	296	367	428	465	726
78	756	934	1,076	1,166	1,807	237	291	342	372	579	301	372	433	472	735
79	814	1,005	1,156	1,259	1,948	245	301	359	381	599	301	374	440	474	744
80	870	1,076	1,242	1,347	2,090	252	311	367	394	617	303	379	440	482	752
81	934	1,156	1,335	1,450	2,251	254	313	374	399	625	303	379	443	479	732
82	998	1,237	1,428	1,553	2,412	259	318	379	406	634	308	379	443	479	709
83	1,064	1,318	1,521	1,655	2,571	259	323	384	408	646	306	381	447	482	692
84	1,127	1,399	1,614	1,760	2,732	264	328	391	413	651	308	381	447	477	666
85	1,191	1,479	1,709	1,861	2,897	267	330	394	421	657	308	381	447	479	643

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 for Policies Issued Prior to 9/16/2002 - Year 1
Rates per $10 Daily Benefit

	Policy Form: NTQ11-337-MA-PA-601					**Rider: 11-SIP-PA-998**					**Rider: 11-CIP-PA-998**				
	Base Rates with No Inflation Protection					**Simple Inflation Protection Rider**					**Compound Inflation Protection Rider**				
Issue	**Benefit Period**					**Benefit Period**					**Benefit Period**				
Age	*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	29	32	37	62	16	19	25	29	41	79	102	127	143	189
40	24	29	34	39	65	19	25	29	32	45	86	108	130	149	196
41	27	32	37	42	69	19	25	32	35	48	86	111	137	156	203
42	29	34	39	44	76	19	25	32	38	52	89	114	140	162	210
43	29	37	42	46	79	22	29	35	41	58	95	121	146	168	220
44	32	39	44	49	86	25	32	38	44	62	98	124	152	175	227
45	34	42	46	54	93	25	32	44	48	65	102	130	159	181	234
46	37	44	51	56	100	29	38	44	54	69	105	133	162	191	240
47	39	46	54	61	106	32	41	51	57	76	108	140	172	197	251
48	42	49	59	66	113	32	44	54	60	82	111	146	175	203	261
49	44	54	64	71	124	38	48	57	67	89	118	152	181	210	268
50	46	56	68	76	131	41	54	64	73	100	121	156	184	216	275
51	46	59	68	78	134	41	51	64	73	96	124	156	191	216	278
52	51	64	73	83	144	44	57	70	83	106	124	159	194	222	282
53	54	68	81	90	158	51	60	76	89	113	130	165	200	232	292
54	59	73	88	100	168	54	67	79	92	124	133	172	207	238	306
55	64	81	95	108	185	57	73	89	102	134	140	178	216	248	316
56	68	86	103	117	199	64	79	98	111	144	146	187	226	257	330
57	76	95	112	130	220	67	86	105	118	155	149	191	232	267	337
58	83	103	122	139	237	70	92	114	130	168	152	200	241	280	354
59	90	112	134	154	261	76	102	121	140	179	159	207	251	289	364
60	95	120	144	164	275	83	105	127	146	192	162	210	254	292	371
61	103	132	156	178	302	89	111	140	159	203	168	216	264	305	381
62	112	144	171	196	330	95	121	149	172	220	175	226	273	315	395
63	125	156	188	215	361	102	133	159	184	234	181	235	283	327	409
64	134	171	205	237	395	111	143	172	197	247	191	245	295	337	422
65	149	191	227	261	433	118	149	184	210	268	197	251	308	349	443
66	171	218	264	301	501	133	172	207	238	299	213	276	334	384	477
67	188	239	288	330	546	140	181	219	254	319	219	286	346	397	498
68	205	264	318	364	601	149	191	232	267	337	229	295	356	410	512
69	225	288	347	398	656	159	203	248	286	357	238	305	372	426	529
70	247	318	384	440	721	168	216	261	299	374	245	315	381	438	546
71	286	369	445	511	835	187	238	292	334	419	267	343	416	477	594
72	313	403	489	560	917	194	251	305	353	436	273	353	426	492	608
73	342	442	533	613	1,003	203	261	321	369	457	280	359	438	505	625
74	374	481	584	670	1,092	210	273	334	384	477	286	369	448	518	639
75	403	516	623	716	1,161	210	276	337	384	477	280	365	445	508	632
76	467	601	728	836	1,357	235	305	369	426	525	305	397	480	553	683
77	511	660	799	919	1,487	241	311	381	438	546	311	400	489	562	697
78	560	723	877	1,009	1,631	248	321	391	451	560	311	407	496	572	704
79	611	792	960	1,107	1,786	213	276	337	388	481	318	410	502	578	714
80	670	868	1,056	1,217	1,965	219	283	343	400	491	324	423	511	591	728
81	731	951	1,156	1,334	2,150	219	283	349	400	495	327	423	515	597	735
82	797	1,036	1,263	1,459	2,349	222	289	349	407	495	327	426	518	600	738
83	868	1,129	1,378	1,593	2,562	219	289	349	407	498	327	429	521	604	742
84	946	1,232	1,503	1,740	2,796	219	286	353	407	498	327	429	524	607	745
85	1,029	1,342	1,640	1,901	3,050	219	283	346	400	495	327	429	524	607	749

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 for Policies Issued Prior to 9/16/2002 - Year 1
Rates per $10 Daily Benefit

	Policy Form: NTQ11-337-MA-PA-601					**Rider: 11-SIP-PA-998**					**Rider: 11-CIP-PA-998**				
	Base Rates with No Inflation Protection					**Simple Inflation Protection Rider**					**Compound Inflation Protection Rider**				
Issue	**Benefit Period**					**Benefit Period**					**Benefit Period**				
Age	*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	73	86	95	165	54	67	83	95	127	299	381	461	531	680
40	61	76	88	100	172	57	73	89	102	137	302	388	470	540	694
41	66	81	95	108	182	60	76	92	108	148	305	394	477	546	704
42	68	86	100	112	192	64	83	98	118	155	311	400	483	559	714
43	73	90	105	120	206	67	86	108	124	165	315	407	492	566	721
44	76	95	112	127	216	73	92	111	130	175	321	413	499	572	735
45	81	100	117	134	230	76	98	121	140	185	324	419	508	581	742
46	86	105	125	142	244	79	105	127	149	196	327	426	515	591	752
47	90	110	132	152	258	86	114	137	156	210	334	432	521	597	762
48	95	117	139	159	275	92	121	146	168	220	337	438	531	607	773
49	100	125	149	169	289	98	127	152	181	237	330	429	518	597	759
50	103	130	156	178	302	105	133	162	187	247	340	435	524	604	769
51	105	132	156	181	309	105	137	165	187	247	337	435	527	604	766
52	110	139	166	188	323	111	140	172	200	258	340	438	531	613	776
53	117	147	176	200	343	114	152	181	213	275	334	432	521	600	759
54	125	156	188	215	364	121	159	194	222	292	337	435	527	607	769
55	132	166	200	230	388	130	168	203	235	306	340	442	531	610	776
56	139	178	213	244	412	140	178	216	248	323	343	442	537	616	783
57	149	188	227	259	440	146	191	229	264	340	346	448	543	626	790
58	159	200	242	276	471	152	200	241	280	354	349	451	546	629	793
59	169	215	257	296	498	162	207	254	292	374	346	448	546	626	787
60	174	220	264	303	512	162	213	257	295	378	346	448	543	623	787
61	183	235	283	325	546	172	222	267	308	395	343	445	537	616	776
62	196	249	301	347	580	178	232	283	321	412	346	448	540	620	780
63	208	266	323	369	618	187	241	292	337	426	346	448	540	623	783
64	222	283	342	393	656	194	251	305	349	446	346	448	543	626	783
65	237	303	367	420	701	200	261	318	365	460	349	451	546	629	787
66	266	342	413	474	787	219	283	346	400	505	369	477	578	664	831
67	283	364	440	506	838	226	292	356	410	515	365	477	578	664	828
68	301	386	469	538	890	232	302	365	423	529	369	477	575	664	828
69	320	413	499	574	945	238	308	378	432	543	365	473	575	661	828
70	340	440	533	611	1,006	245	315	384	445	553	365	473	572	661	821
71	384	496	601	692	1,133	264	343	416	480	601	384	499	607	699	872
72	408	528	640	738	1,206	267	349	423	489	611	381	496	604	693	866
73	435	562	682	784	1,285	270	353	429	496	618	378	492	600	693	859
74	459	596	723	836	1,364	276	359	435	502	625	378	489	597	683	848
75	481	621	753	865	1,405	267	349	423	489	608	359	467	569	658	814
76	547	706	858	987	1,607	286	375	457	527	653	378	496	604	696	859
77	584	758	921	1,061	1,721	289	378	457	531	659	378	489	594	689	852
78	626	811	987	1,139	1,844	292	381	464	537	663	375	486	591	683	845
79	672	872	1,061	1,224	1,982	245	321	394	454	560	369	480	588	680	838
80	723	941	1,146	1,325	2,136	245	321	391	451	560	369	477	585	674	835
81	780	1,012	1,234	1,427	2,301	245	321	391	451	556	362	473	578	670	824
82	838	1,092	1,332	1,542	2,483	241	315	388	448	550	359	467	575	661	817
83	902	1,175	1,437	1,664	2,676	238	315	381	442	546	359	467	569	658	811
84	973	1,268	1,552	1,799	2,888	235	308	378	438	539	356	464	566	651	807
85	1,051	1,371	1,679	1,945	3,125	232	305	372	432	532	349	457	559	648	797

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 for Policies Issued Prior to 9/16/2002 - Year 1
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				
	Benefit Period					Benefit Period					Benefit Period				
Issue Age	*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	37	44	51	56	100	32	41	48	57	76	175	226	273	315	402
40	37	46	54	61	103	35	41	54	60	82	181	229	280	321	409
41	39	49	56	64	110	38	44	57	67	86	184	235	286	327	416
42	42	51	61	68	117	38	48	57	70	93	184	238	286	330	422
43	44	54	64	73	124	41	54	64	73	100	187	245	292	337	429
44	46	56	68	76	131	44	57	67	79	106	191	248	299	343	440
45	49	61	71	81	141	48	60	73	86	110	194	251	305	349	443
46	51	64	76	86	148	51	64	76	89	117	200	257	308	356	450
47	54	68	81	90	158	54	67	83	95	124	203	261	315	362	457
48	59	73	86	98	168	54	70	89	102	131	203	264	321	365	464
49	61	76	90	103	179	60	79	95	111	141	207	267	321	372	467
50	66	81	98	110	189	64	83	98	118	151	203	264	315	365	464
51	66	81	98	110	189	64	83	98	118	151	210	273	327	378	477
52	68	88	103	117	203	70	86	108	124	158	207	264	324	372	467
53	73	93	110	127	216	73	92	114	130	168	210	267	324	372	471
54	78	100	117	134	230	79	98	124	140	182	213	270	330	381	477
55	83	105	127	144	247	83	108	130	149	192	216	280	334	384	484
56	90	115	137	156	264	86	111	137	159	203	219	280	340	391	495
57	98	122	147	169	285	92	121	146	168	216	219	286	346	397	501
58	103	132	156	181	306	102	127	156	178	227	226	289	353	403	508
59	112	142	169	193	326	105	137	165	191	244	229	295	359	413	519
60	117	149	178	203	343	108	140	168	197	251	226	292	353	407	512
61	125	159	193	220	371	118	149	178	207	261	232	299	359	413	519
62	134	174	208	237	398	124	156	191	219	278	235	302	365	419	525
63	147	186	225	257	429	127	165	200	232	292	238	308	372	426	536
64	156	200	242	279	464	137	178	213	245	309	245	315	378	432	543
65	171	218	261	301	501	143	187	226	257	323	248	321	388	445	553
66	193	249	301	345	570	159	203	248	283	357	264	340	410	473	591
67	210	269	325	374	615	165	216	261	299	378	270	346	419	480	604
68	227	293	352	406	666	175	222	273	311	395	273	353	429	489	611
69	247	318	384	440	725	181	235	286	327	409	280	359	435	499	622
70	269	345	418	479	787	191	248	299	343	426	283	365	442	508	632
71	308	396	479	552	903	210	270	330	375	471	302	394	477	546	680
72	335	430	523	599	982	216	283	340	394	488	308	400	483	559	690
73	364	469	567	653	1,065	222	289	356	407	505	311	403	492	566	701
74	393	508	616	709	1,154	232	302	365	419	522	315	410	499	572	711
75	420	543	655	753	1,223	232	299	365	419	519	311	400	489	562	694
76	486	628	760	875	1,418	251	327	400	461	570	334	432	524	604	749
77	530	684	831	956	1,549	257	337	410	473	584	334	435	531	610	752
78	577	745	907	1,044	1,686	264	346	419	486	601	337	442	534	616	762
79	628	814	990	1,139	1,841	226	295	359	416	512	340	442	537	623	766
80	684	887	1,080	1,246	2,013	229	302	369	423	519	343	448	543	629	773
81	745	968	1,178	1,361	2,195	229	302	369	426	522	343	445	546	629	776
82	809	1,053	1,283	1,483	2,387	232	299	369	426	529	343	448	546	632	780
83	877	1,144	1,395	1,615	2,597	232	302	369	426	525	343	448	546	632	780
84	953	1,241	1,518	1,760	2,823	229	302	365	423	522	343	448	546	632	780
85	1,034	1,349	1,650	1,914	3,071	226	299	365	423	519	343	448	546	632	780

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 for Policies Issued Prior to 9/16/2002 - Year 1
Rates per $10 Daily Benefit

	Policy Form: LTQ11-336-MA-PA-601					**Rider: 11-SIP-PA-998**					**Rider: 11-CIP-PA-998**				
	Base Rates with No Inflation Protection					**Simple Inflation Protection Rider**					**Compound Inflation Protection Rider**				
Issue	**Benefit Period**					**Benefit Period**					**Benefit Period**				
Age	*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	39	46	51	96	25	32	38	48	65	102	130	159	187	251
40	34	42	49	56	103	25	35	41	48	69	105	137	165	191	258
41	37	44	51	59	106	29	38	48	54	76	108	140	175	200	268
42	39	46	56	64	113	29	35	48	57	82	111	146	178	207	278
43	42	49	59	68	124	32	44	54	60	86	114	152	184	213	285
44	44	54	64	71	131	35	44	57	67	93	118	156	191	222	295
45	46	56	66	76	141	38	51	64	73	100	124	162	200	232	306
46	49	61	71	83	148	41	51	67	76	106	127	165	207	235	316
47	51	64	76	88	158	44	60	73	83	117	133	175	213	248	330
48	56	68	83	95	172	48	64	76	89	124	137	181	219	254	337
49	59	73	88	103	182	51	67	83	95	134	143	187	229	264	350
50	64	78	95	110	196	57	73	89	102	144	143	191	232	267	354
51	64	81	95	110	199	57	73	92	105	144	149	191	235	273	361
52	68	86	105	120	213	60	79	95	114	155	149	194	235	273	364
53	73	93	112	130	230	67	86	105	121	165	156	200	245	283	374
54	81	100	122	139	251	70	92	111	133	175	159	210	254	295	385
55	86	110	132	152	268	76	98	121	143	192	165	213	264	305	402
56	93	117	144	164	292	83	108	130	156	206	172	222	270	318	412
57	100	130	156	178	316	89	114	140	165	220	178	229	280	327	426
58	110	139	169	196	343	95	124	152	175	234	181	238	292	337	440
59	120	152	183	213	371	102	133	165	191	254	187	245	302	346	453
60	125	161	196	225	395	108	140	172	200	261	191	248	302	353	457
61	137	176	213	247	429	114	149	184	213	282	197	254	315	362	471
62	149	191	232	269	467	121	162	197	229	299	200	264	324	372	484
63	161	208	254	293	508	130	172	210	245	319	210	273	330	384	498
64	176	227	276	320	553	140	181	226	261	340	216	280	343	397	512
65	193	249	303	349	604	149	194	241	280	364	222	289	356	413	532
66	220	286	347	403	694	168	219	270	311	405	241	315	388	445	574
67	242	313	381	440	756	175	232	286	334	429	245	321	397	461	591
68	264	340	415	481	824	184	248	305	353	457	251	334	410	473	608
69	286	371	455	528	900	197	261	321	372	481	261	343	419	486	622
70	313	408	499	579	986	207	273	337	391	505	267	349	429	499	639
71	359	469	577	670	1,137	232	305	375	435	563	289	378	464	537	690
72	393	513	631	733	1,243	238	318	391	454	587	292	384	473	550	704
73	428	560	689	799	1,357	248	330	407	477	611	295	391	480	562	714
74	464	609	750	872	1,477	261	343	426	496	635	302	397	489	569	725
75	496	648	797	929	1,563	261	346	429	496	639	295	391	480	556	708
76	574	753	929	1,083	1,824	286	381	470	550	708	315	416	515	597	762
77	628	826	1,019	1,190	2,002	292	391	486	569	728	315	419	518	600	762
78	684	904	1,119	1,307	2,195	305	403	499	585	752	318	419	518	600	766
79	748	990	1,227	1,435	2,408	261	346	429	505	646	318	416	518	604	762
80	821	1,088	1,351	1,584	2,655	267	353	438	515	663	318	419	518	604	766
81	894	1,188	1,481	1,738	2,913	267	359	445	524	670	318	416	515	597	756
82	975	1,300	1,620	1,906	3,191	270	359	448	527	677	311	410	508	588	742
83	1,063	1,417	1,772	2,087	3,493	270	362	451	527	677	305	403	499	578	725
84	1,158	1,547	1,938	2,285	3,823	270	362	451	531	677	299	394	483	562	704
85	1,261	1,689	2,116	2,500	4,183	267	359	448	531	677	292	381	470	546	680

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 for Policies Issued Prior to 9/16/2002 - Year 1
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				
	Benefit Period					Benefit Period					Benefit Period				
Issue Age	*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	81	100	120	137	251	76	98	121	140	196	362	470	578	670	886
40	83	105	127	144	264	83	105	127	149	206	369	480	585	680	896
41	88	110	132	154	278	86	111	137	156	220	372	486	594	686	910
42	93	117	139	161	292	89	118	146	168	234	378	492	604	699	924
43	98	122	149	171	309	95	124	152	178	244	381	499	610	705	934
44	103	130	156	181	326	102	130	162	187	258	388	505	620	715	945
45	108	137	166	191	343	108	140	168	200	275	394	511	626	724	958
46	115	144	174	200	364	111	149	181	213	289	397	518	635	737	969
47	120	154	186	213	385	121	156	191	222	306	403	521	639	743	979
48	127	161	196	225	405	127	165	203	238	323	407	531	648	753	989
49	134	171	208	239	429	133	175	213	251	340	397	518	635	737	965
50	139	178	218	249	446	140	181	222	261	354	403	524	642	747	982
51	142	181	220	254	453	143	184	226	264	361	400	524	642	743	975
52	149	188	230	266	474	146	194	235	273	371	407	531	648	753	989
53	156	200	244	281	501	156	203	248	292	392	397	518	635	737	962
54	166	213	259	301	532	165	216	264	305	409	400	521	639	740	969
55	176	227	276	318	563	172	226	276	324	433	403	524	642	747	975
56	186	239	293	340	598	184	238	292	337	453	407	531	648	750	982
57	198	254	310	359	632	191	251	308	359	477	407	534	651	756	986
58	210	271	330	384	673	200	261	321	372	498	407	534	654	759	989
59	222	288	352	406	711	210	273	337	394	522	403	524	645	753	975
60	227	293	359	418	728	213	276	340	394	522	403	527	645	747	975
61	242	313	381	442	773	219	289	356	413	543	394	518	639	740	958
62	257	332	406	472	817	229	299	369	429	567	394	518	639	737	958
63	271	352	430	501	869	238	311	384	445	587	397	518	639	737	955
64	288	374	457	530	920	245	324	400	464	608	394	518	635	740	955
65	305	398	489	567	979	254	334	413	480	629	394	518	635	737	951
66	342	445	545	635	1,092	276	365	451	524	687	413	543	670	775	1,003
67	362	472	579	674	1,157	286	375	464	540	704	410	540	667	772	996
68	384	501	616	716	1,226	292	384	473	553	721	407	537	661	766	989
69	406	530	653	760	1,302	299	394	486	566	735	403	534	658	762	979
70	430	565	694	809	1,381	305	400	496	578	752	400	527	651	753	969
71	481	633	782	912	1,552	327	432	534	626	814	419	553	680	791	1,020
72	511	672	828	968	1,649	330	438	546	635	824	413	543	674	782	1,003
73	540	711	880	1,029	1,748	337	445	553	645	835	407	537	664	772	989
74	572	755	934	1,092	1,851	340	448	559	651	841	400	527	654	759	972
75	594	782	965	1,127	1,903	330	438	543	635	817	381	502	620	721	920
76	672	887	1,100	1,285	2,174	353	470	585	683	879	397	524	648	756	962
77	718	951	1,178	1,381	2,329	356	473	591	689	890	388	515	635	740	945
78	770	1,019	1,266	1,483	2,500	356	477	594	696	893	381	502	623	724	920
79	824	1,095	1,361	1,596	2,686	305	400	502	591	759	375	489	607	712	900
80	887	1,180	1,471	1,728	2,902	302	403	502	591	759	365	483	594	696	883
81	953	1,271	1,586	1,867	3,132	302	400	499	585	756	359	470	581	677	855
82	1,026	1,371	1,713	2,019	3,386	302	397	499	585	749	346	457	566	658	828
83	1,107	1,479	1,852	2,185	3,661	292	397	492	578	742	337	445	546	635	800
84	1,195	1,598	2,004	2,368	3,963	292	391	486	572	735	324	429	527	613	769
85	1,290	1,730	2,170	2,568	4,297	286	381	483	566	725	315	410	508	588	735

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 for Policies Issued Prior to 9/16/2002 - Year 1
Rates per $10 Daily Benefit

	Policy Form: LTQ11-336-MA-PA-601					**Rider: 11-SIP-PA-998**					**Rider: 11-CIP-PA-998**				
	Base Rates with No Inflation Protection					**Simple Inflation Protection Rider**					**Compound Inflation Protection Rider**				
Issue	**Benefit Period**					**Benefit Period**					**Benefit Period**				
Age	*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	49	61	71	83	151	44	57	73	83	117	216	280	343	397	522
40	51	64	76	88	158	48	64	76	89	124	219	286	349	400	532
41	54	66	81	93	168	51	67	79	92	131	222	289	353	410	539
42	56	71	86	98	175	54	70	86	98	141	226	292	359	416	550
43	59	76	90	103	185	57	73	89	108	148	232	295	353	423	556
44	64	78	95	110	196	60	79	95	111	158	232	305	369	429	567
45	66	83	100	115	210	64	86	102	121	161	235	308	375	435	570
46	71	88	108	122	220	67	89	108	127	175	238	311	381	442	580
47	73	93	112	130	234	73	95	118	137	185	245	318	388	448	587
48	78	100	120	139	247	76	98	124	143	196	248	321	394	454	598
49	83	105	127	147	261	83	108	130	152	210	248	324	394	457	598
50	88	112	134	156	278	86	111	140	159	216	245	318	391	448	591
51	88	112	134	156	278	86	111	140	162	220	251	327	403	464	608
52	93	120	144	166	295	92	118	146	172	230	248	321	394	454	598
53	100	127	154	178	316	95	127	156	178	240	248	321	394	454	594
54	105	134	164	191	337	105	137	165	191	254	251	327	400	461	601
55	112	144	176	203	357	111	143	175	203	271	254	330	403	470	611
56	120	154	188	218	381	118	152	184	213	285	257	337	410	473	618
57	130	166	200	232	409	121	159	197	229	302	261	340	416	483	625
58	137	176	215	249	436	130	172	207	241	319	264	346	423	486	632
59	147	191	230	266	467	137	178	222	254	337	267	346	429	496	639
60	154	198	242	279	488	140	184	226	264	343	264	343	419	489	632
61	166	213	259	301	522	146	194	238	276	364	264	349	426	492	639
62	178	230	279	323	560	156	203	251	292	381	267	353	432	499	646
63	191	247	301	347	601	165	213	264	308	402	273	356	435	505	653
64	205	264	323	374	646	172	229	280	324	422	276	362	442	511	659
65	220	286	349	406	697	181	238	292	337	440	280	365	448	518	666
66	249	325	396	459	787	200	261	324	375	488	299	388	477	553	714
67	269	349	428	496	848	210	273	337	391	512	302	394	483	559	721
68	291	379	464	538	917	219	286	353	410	532	305	397	489	566	728
69	313	408	501	582	993	229	299	369	429	553	308	403	496	575	735
70	340	442	545	631	1,075	235	311	381	448	577	311	410	499	581	742
71	386	506	623	723	1,230	261	343	419	492	635	330	435	534	620	793
72	418	547	674	787	1,333	270	356	438	508	656	334	438	540	623	800
73	452	594	733	853	1,443	276	365	451	527	680	334	442	540	629	807
74	489	643	792	924	1,563	286	378	467	543	701	337	442	546	632	807
75	518	682	838	978	1,645	286	375	467	543	701	327	429	534	616	787
76	599	787	973	1,134	1,913	308	410	508	597	762	346	457	562	658	835
77	650	858	1,061	1,241	2,088	318	423	524	610	787	346	457	566	654	835
78	706	934	1,158	1,356	2,281	327	435	537	629	804	346	457	562	651	828
79	770	1,019	1,266	1,483	2,490	276	372	461	540	690	343	451	556	648	821
80	838	1,114	1,386	1,625	2,727	283	375	467	550	701	340	448	553	645	814
81	912	1,212	1,513	1,777	2,978	286	378	470	553	708	337	445	546	635	804
82	992	1,322	1,650	1,940	3,253	283	378	477	559	711	330	435	537	626	787
83	1,078	1,437	1,799	2,119	3,548	283	381	473	559	711	321	426	524	610	766
84	1,171	1,564	1,960	2,312	3,867	280	375	470	556	711	315	416	511	594	745
85	1,271	1,701	2,133	2,522	4,218	280	375	467	556	708	305	400	496	575	718

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 for Policies Issued Prior to 9/16/2002 - Year 1
Rates per $10 Daily Benefit

	Policy Form: FLQ11-336-MA-PA-601					**Rider: 11-SIP-PA-998**					**Rider: 11-CIP-PA-998**				
	Base Rates with No Inflation Protection					**Simple Inflation Protection Rider**					**Compound Inflation Protection Rider**				
Issue	**Benefit Period**					**Benefit Period**					**Benefit Period**				
Age	*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	29	34	42	46	86	22	29	35	41	58	92	118	143	168	227
40	32	37	44	51	93	22	32	38	41	62	92	124	149	172	234
41	34	39	46	54	96	25	35	41	48	69	95	127	156	178	240
42	34	42	51	56	103	29	32	41	54	72	102	133	159	187	251
43	37	44	54	61	110	29	41	48	54	79	105	137	165	194	258
44	39	49	56	64	117	32	38	54	60	86	108	140	172	200	268
45	42	51	59	68	127	35	44	57	67	89	111	146	181	210	275
46	44	56	64	76	134	38	44	60	67	96	114	146	187	210	285
47	46	56	68	78	141	41	57	67	76	106	121	159	191	226	299
48	51	61	76	86	155	41	57	67	79	110	121	165	197	229	302
49	54	66	78	93	165	44	60	76	86	120	127	168	207	238	316
50	56	71	86	100	175	54	67	79	89	131	130	172	210	238	319
51	56	73	86	100	179	54	64	83	92	131	137	172	213	245	326
52	61	78	95	108	192	54	70	86	105	137	137	172	210	248	326
53	66	83	100	117	206	60	79	95	108	151	140	181	222	254	337
54	73	90	110	125	227	64	83	102	121	158	143	187	229	267	347
55	78	100	120	137	240	67	86	108	127	175	146	191	235	273	364
56	83	105	130	147	264	76	98	118	140	185	156	200	245	286	371
57	90	117	142	161	285	79	102	124	149	196	159	207	251	292	381
58	100	125	152	176	309	86	111	137	159	210	162	216	264	302	395
59	108	137	166	191	333	92	121	146	172	230	168	219	270	311	409
60	112	144	176	203	357	98	127	156	181	234	172	226	273	318	409
61	122	159	191	222	388	105	133	168	191	251	178	229	283	327	422
62	134	171	210	242	419	108	146	175	207	271	181	238	289	334	436
63	144	188	230	264	457	118	152	187	219	289	191	245	295	346	450
64	159	205	249	288	498	124	162	203	235	306	194	251	308	356	460
65	174	225	274	315	543	133	175	216	251	330	200	261	318	372	481
66	198	257	313	364	625	152	197	241	280	364	216	283	349	400	515
67	218	281	342	396	680	159	210	257	302	388	219	289	359	416	532
68	237	305	374	433	742	165	222	273	318	412	226	302	369	426	546
69	257	335	408	474	811	178	235	289	337	433	235	308	378	438	560
70	281	367	450	521	886	187	248	302	353	457	241	315	384	451	577
71	323	423	518	604	1,024	210	273	340	391	508	261	340	419	483	622
72	354	462	567	660	1,120	213	286	353	410	529	264	346	426	496	632
73	386	503	621	718	1,223	222	299	365	429	550	264	353	432	508	642
74	418	547	674	784	1,329	235	308	384	448	574	273	359	442	511	653
75	447	584	716	836	1,408	235	311	388	445	574	264	349	432	502	635
76	518	677	836	975	1,642	257	343	423	492	635	283	375	464	537	687
77	565	743	916	1,070	1,803	264	353	438	511	656	283	378	467	540	687
78	616	814	1,007	1,178	1,975	273	362	451	524	677	286	378	467	540	690
79	672	892	1,105	1,290	2,167	235	311	384	454	580	286	372	467	543	687
80	738	980	1,217	1,425	2,390	241	315	394	464	594	286	375	464	543	687
81	804	1,068	1,332	1,564	2,621	241	324	400	470	604	286	375	464	537	680
82	877	1,171	1,459	1,716	2,871	245	324	403	473	608	280	369	457	531	670
83	958	1,276	1,596	1,879	3,143	241	327	403	473	611	273	362	448	518	653
84	1,044	1,393	1,745	2,058	3,441	241	324	407	477	608	267	353	435	505	632
85	1,134	1,520	1,904	2,251	3,764	241	324	403	477	611	264	343	426	492	611

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 for Policies Issued Prior to 9/16/2002 - Year 1
Rates per $10 Daily Benefit

	Policy Form: FLQ11-336-MA-PA-601					**Rider: 11-SIP-PA-998**					**Rider: 11-CIP-PA-998**				
	Base Rates with No Inflation Protection					**Simple Inflation Protection Rider**					**Compound Inflation Protection Rider**				
Issue	**Benefit Period**					**Benefit Period**					**Benefit Period**				
Age	*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	44	56	64	76	137	41	51	67	73	103	194	251	308	356	467
40	46	56	68	78	141	41	57	70	83	113	197	257	315	362	481
41	49	59	73	83	151	44	60	70	83	117	200	261	318	369	484
42	51	64	78	88	158	48	64	76	89	127	203	264	321	375	495
43	54	68	81	93	168	51	67	83	95	131	207	267	318	381	498
44	56	71	86	100	175	57	70	86	98	144	210	273	334	384	512
45	59	76	90	103	189	57	76	92	111	144	213	276	337	394	512
46	64	78	98	110	199	60	83	95	114	158	216	283	343	397	522
47	66	83	100	117	210	67	86	108	121	168	219	286	349	403	529
48	71	90	108	125	223	67	89	111	130	175	222	289	356	410	536
49	76	95	115	132	234	73	95	118	137	189	222	292	353	413	539
50	78	100	122	142	251	79	102	124	143	196	222	286	349	403	532
51	78	100	122	142	251	79	102	124	146	199	229	295	362	416	546
52	83	108	130	149	264	83	105	133	156	210	222	289	356	410	539
53	90	115	139	161	285	86	114	140	159	216	222	289	353	407	536
54	95	122	147	171	302	92	121	149	172	230	226	292	362	416	543
55	100	130	159	183	323	102	130	156	181	244	229	299	362	423	550
56	108	139	169	196	343	105	137	168	191	258	232	302	369	426	556
57	117	149	181	210	367	108	143	178	203	271	235	308	375	432	563
58	122	159	193	225	392	118	152	187	216	289	238	311	381	438	570
59	132	171	208	239	419	124	162	200	229	306	241	311	384	448	577
60	139	178	218	252	440	124	165	203	235	309	235	308	378	438	567
61	149	191	232	271	471	133	175	216	248	326	238	315	384	442	574
62	161	208	252	291	505	140	181	226	264	343	238	318	388	448	580
63	171	222	271	313	543	149	191	235	276	361	248	321	391	454	587
64	186	237	291	337	580	152	207	251	292	381	248	327	397	461	594
65	198	257	315	364	629	162	216	264	305	395	251	330	403	467	598
66	225	293	357	413	708	181	235	292	337	440	267	349	429	499	642
67	242	315	386	447	762	187	245	302	349	460	273	353	432	502	649
68	261	342	418	484	824	197	257	318	369	481	276	356	442	508	656
69	281	367	452	523	893	207	270	330	388	498	280	365	445	518	663
70	305	398	491	567	969	213	280	343	403	519	280	369	448	524	666
71	347	455	562	650	1,106	235	311	375	445	574	299	394	480	559	714
72	376	494	606	709	1,199	241	318	397	457	591	299	394	486	559	721
73	408	535	660	767	1,298	248	327	407	477	611	299	397	486	566	728
74	440	579	714	831	1,408	257	340	419	489	629	302	397	489	569	725
75	467	613	755	880	1,480	257	337	419	489	632	295	388	480	556	708
76	540	709	875	1,022	1,721	276	369	457	537	687	311	410	508	591	752
77	584	772	956	1,117	1,879	286	381	470	550	708	315	413	508	591	752
78	635	841	1,044	1,222	2,054	295	391	483	566	721	311	410	505	585	745
79	694	916	1,139	1,334	2,243	248	337	416	486	618	308	407	502	585	738
80	755	1,002	1,246	1,464	2,456	254	340	423	492	629	305	403	499	578	732
81	821	1,090	1,361	1,598	2,679	257	343	423	499	639	302	400	492	572	725
82	892	1,190	1,486	1,747	2,926	257	340	429	502	642	299	391	483	562	708
83	970	1,293	1,618	1,906	3,194	254	343	429	505	639	289	384	473	550	687
84	1,053	1,408	1,764	2,080	3,479	251	337	423	502	642	283	375	461	537	673
85	1,144	1,530	1,921	2,270	3,795	251	340	419	499	639	273	362	445	518	646

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 for Policies Issued Prior to 9/16/2002 - Year 1
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				
	Benefit Period					Benefit Period					Benefit Period				
Issue Age	*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	34	39	42	46	82	19	25	29	35	48	76	92	105	121	155
40	34	39	44	49	89	22	29	32	35	48	83	98	108	124	155
41	37	42	46	51	93	22	29	32	38	52	83	102	111	127	158
42	37	44	49	54	96	25	32	35	41	55	89	102	114	130	165
43	39	46	51	56	100	29	32	35	41	58	89	105	118	133	168
44	42	49	54	59	103	29	35	38	44	62	92	108	121	140	175
45	44	51	56	64	110	29	35	41	44	62	92	111	124	140	175
46	44	54	59	66	113	35	38	44	51	69	98	114	130	146	182
47	46	56	61	68	120	35	41	48	54	69	102	118	133	149	185
48	49	59	64	73	124	38	44	51	54	76	105	124	140	152	192
49	54	61	68	76	131	38	48	54	60	79	105	127	143	159	196
50	56	64	71	81	137	41	51	57	64	79	105	127	143	156	192
51	56	66	73	81	137	41	51	54	64	82	108	130	143	162	199
52	59	68	76	86	144	44	54	60	67	86	108	130	146	162	196
53	61	73	81	90	151	48	57	64	73	89	114	133	149	165	203
54	66	78	86	95	158	51	60	70	76	96	118	137	156	172	210
55	71	83	90	103	168	54	64	73	79	103	121	143	159	175	213
56	76	88	98	110	179	57	70	76	86	106	124	146	162	181	220
57	81	95	105	117	189	60	73	83	92	113	127	149	165	184	223
58	86	100	112	125	203	67	79	86	98	120	133	156	172	191	230
59	93	108	120	132	216	70	86	92	105	124	133	162	178	200	234
60	95	112	125	139	223	73	86	95	105	131	137	162	178	197	234
61	103	122	134	149	237	76	89	102	111	137	140	165	181	203	240
62	110	130	144	159	254	83	98	105	121	144	146	172	187	210	244
63	120	139	154	171	271	86	102	114	127	151	146	175	191	213	251
64	127	149	166	183	289	92	108	118	133	158	152	181	197	219	258
65	139	161	178	198	309	95	114	127	140	168	156	187	203	226	264
66	156	183	203	225	350	108	127	140	152	182	172	200	219	241	282
67	169	198	218	242	374	114	133	146	162	192	175	203	226	248	289
68	183	213	235	259	402	118	140	152	172	199	178	210	229	254	295
69	198	230	252	279	433	124	146	162	178	206	181	216	235	261	299
70	213	249	271	301	464	130	149	168	184	213	187	216	241	264	302
71	242	281	308	342	522	143	168	184	200	234	200	235	257	283	326
72	259	303	332	367	556	149	172	187	210	240	207	238	261	289	330
73	279	325	357	393	594	152	178	194	213	247	207	241	264	292	333
74	298	347	381	420	632	159	184	200	219	251	210	245	267	292	333
75	320	371	403	445	663	156	181	200	216	247	207	238	261	286	326
76	364	423	459	506	752	168	197	216	235	268	222	254	280	305	347
77	393	455	494	543	804	172	200	219	241	271	222	257	283	308	347
78	423	489	530	582	862	178	203	222	245	271	222	257	283	308	343
79	455	525	569	626	920	149	175	191	207	230	226	261	283	308	343
80	491	567	616	672	986	152	175	187	210	230	229	264	283	311	347
81	530	611	660	723	1,054	152	175	191	203	230	229	264	286	308	343
82	574	657	711	775	1,130	149	175	187	207	230	226	264	283	308	343
83	621	711	765	833	1,212	149	175	187	203	227	226	261	283	305	337
84	670	767	824	894	1,298	152	172	187	200	223	226	257	280	302	337
85	723	826	885	960	1,391	149	172	184	197	216	226	257	276	299	330

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 for Policies Issued Prior to 9/16/2002 - Year 1
Rates per $10 Daily Benefit

	Policy Form: HTQ11-338-MA-PA-601					**Rider: 11-SIP-PA-998**					**Rider: 11-CIP-PA-998**				
	Base Rates with No Inflation Protection					**Simple Inflation Protection Rider**					**Compound Inflation Protection Rider**				
Issue	**Benefit Period**					**Benefit Period**					**Benefit Period**				
Age	*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	76	88	98	110	192	57	73	83	92	127	267	321	356	397	495
40	78	90	100	112	199	64	76	89	102	134	270	324	362	407	501
41	81	95	105	117	206	67	79	92	105	141	276	327	365	410	505
42	83	98	110	122	216	70	86	95	108	141	280	334	369	413	505
43	88	103	115	127	223	73	89	98	114	148	280	334	372	416	512
44	90	108	120	134	230	76	92	105	118	158	283	337	375	416	515
45	95	110	125	139	240	79	98	108	124	161	286	343	378	423	515
46	98	115	130	144	247	86	102	114	130	168	289	343	381	426	519
47	103	120	134	149	258	89	108	121	137	175	289	346	384	429	522
48	108	125	139	156	268	92	114	127	143	179	286	343	378	419	501
49	110	132	147	164	275	98	118	130	146	189	289	340	378	423	515
50	112	134	149	166	278	102	118	133	149	189	289	340	375	419	501
51	117	137	152	171	289	102	124	137	152	192	289	343	381	426	515
52	117	139	154	174	289	105	124	140	156	196	292	343	381	423	505
53	125	147	161	181	299	108	130	146	165	206	286	343	381	423	515
54	130	154	169	191	313	114	137	152	168	210	283	334	372	413	495
55	137	161	178	198	326	118	140	159	178	216	283	337	372	416	491
56	142	169	186	208	340	127	149	165	184	223	286	337	375	416	491
57	149	176	196	218	354	130	156	172	191	230	286	340	372	416	491
58	156	186	205	227	367	137	159	178	200	240	289	337	372	416	491
59	164	193	215	239	381	140	168	184	203	251	280	330	362	400	471
60	166	196	218	242	385	140	165	181	203	244	286	337	369	410	488
61	174	205	227	252	402	146	172	187	213	251	276	327	356	397	464
62	183	215	237	264	419	149	178	197	216	258	276	324	356	397	460
63	193	225	249	276	436	152	181	200	222	264	273	324	356	394	460
64	203	237	261	288	453	156	184	203	229	271	273	321	353	391	457
65	213	249	274	303	474	162	191	210	235	278	273	321	353	391	453
66	235	276	303	335	522	175	203	226	251	295	286	334	369	407	471
67	247	288	318	352	546	178	210	229	254	299	283	334	362	400	464
68	259	303	332	367	567	181	213	235	261	302	280	327	359	400	460
69	271	318	347	386	591	184	216	238	261	306	276	324	356	391	453
70	283	332	364	403	618	187	219	241	264	306	276	321	353	388	443
71	315	369	403	445	680	197	232	254	283	323	286	334	365	407	460
72	330	386	423	467	708	200	232	254	283	323	283	330	359	397	453
73	345	403	440	486	735	200	235	257	283	323	280	324	356	391	443
74	362	420	459	508	762	200	235	257	280	319	273	321	349	381	433
75	376	435	474	523	780	194	226	248	270	309	261	305	330	362	409
76	418	486	528	582	866	207	238	264	286	323	273	315	346	378	422
77	442	511	557	611	907	207	241	261	286	323	267	311	337	372	416
78	467	540	587	645	951	207	238	261	283	319	264	305	334	362	405
79	494	572	621	679	999	172	200	216	235	264	261	299	324	356	398
80	525	606	657	718	1,054	172	197	213	235	261	257	299	321	353	392
81	560	645	699	762	1,113	168	194	207	229	254	254	292	315	343	385
82	599	687	743	809	1,178	165	194	207	226	254	248	289	308	337	374
83	640	733	792	860	1,254	165	191	203	222	244	245	286	302	330	364
84	687	784	843	916	1,329	159	187	200	219	240	241	280	302	327	361
85	736	841	902	978	1,415	159	181	194	213	230	241	273	292	318	350

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 for Policies Issued Prior to 9/16/2002 - Year 1
Rates per $10 Daily Benefit

	Policy Form: HTQ11-338-MA-PA-601					**Rider: 11-SIP-PA-998**					**Rider: 11-CIP-PA-998**				
	Base Rates with No Inflation Protection					**Simple Inflation Protection Rider**					**Compound Inflation Protection Rider**				
Issue	**Benefit Period**					**Benefit Period**					**Benefit Period**				
Age	*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	46	54	59	66	117	35	44	51	57	76	159	191	213	238	295
40	46	56	61	68	120	38	44	54	60	82	162	194	216	241	299
41	49	59	64	73	127	41	48	57	60	82	165	194	219	241	299
42	51	61	66	76	131	41	51	57	64	86	165	197	222	245	306
43	54	64	71	78	137	44	54	60	70	89	168	200	222	251	306
44	56	66	73	81	141	44	54	64	73	96	168	203	226	254	309
45	59	68	76	86	148	48	57	67	73	96	172	207	229	254	313
46	61	71	78	88	155	51	64	70	79	100	175	210	232	257	313
47	64	76	83	93	158	54	64	73	83	106	175	210	232	261	316
48	66	78	86	98	165	57	67	79	86	110	178	213	238	261	316
49	68	81	90	103	172	60	73	79	89	117	178	210	232	257	313
50	71	83	93	105	175	64	76	83	92	117	178	213	235	261	316
51	73	86	95	108	179	64	76	86	95	120	178	213	235	261	316
52	76	88	98	110	182	64	79	89	98	124	178	213	238	264	319
53	78	93	103	115	192	70	83	92	105	127	178	210	232	261	313
54	83	98	110	122	203	73	86	95	108	131	178	213	232	261	309
55	88	103	115	130	210	76	92	102	111	141	181	216	235	261	316
56	93	110	122	134	220	79	95	105	121	148	184	216	238	267	316
57	98	115	127	144	230	86	102	111	124	151	184	219	241	267	319
58	105	122	134	152	244	86	105	118	130	158	184	222	245	270	319
59	110	130	144	159	258	92	111	121	137	161	187	222	245	273	319
60	115	134	147	164	261	92	111	124	140	168	184	219	241	267	316
61	120	142	156	174	278	98	118	130	143	172	187	222	241	270	316
62	127	152	166	186	292	105	121	133	149	179	191	222	245	270	319
63	137	159	176	196	309	105	127	140	156	185	191	226	248	273	319
64	144	171	188	208	326	111	130	143	162	192	194	226	248	276	323
65	154	181	200	222	347	118	140	149	168	199	197	232	251	276	323
66	174	203	222	247	385	127	149	165	184	216	207	245	267	295	343
67	186	218	239	264	409	130	156	168	191	223	210	245	267	299	347
68	198	232	254	281	436	137	162	178	197	227	213	248	273	302	347
69	213	247	271	301	464	140	168	184	203	234	213	251	273	302	347
70	227	264	291	323	495	146	172	187	207	240	216	254	276	302	347
71	257	298	327	362	553	159	187	203	226	258	229	267	292	321	367
72	274	320	349	386	587	162	191	210	232	264	229	267	292	324	367
73	291	340	371	411	622	168	197	216	238	268	232	270	295	324	367
74	310	362	396	437	656	172	200	219	241	275	232	270	295	324	367
75	330	384	418	459	687	172	197	216	238	268	229	264	286	315	357
76	376	435	474	521	776	181	213	232	254	285	238	280	302	334	374
77	403	467	508	557	828	184	216	235	257	289	238	280	302	334	371
78	433	501	543	596	879	187	216	238	261	292	241	276	302	330	371
79	464	535	582	638	938	159	184	200	219	247	238	280	302	327	367
80	499	577	626	684	1,003	159	184	200	216	244	241	276	299	327	364
81	538	618	670	733	1,068	162	184	200	216	244	238	276	299	324	364
82	579	665	718	784	1,144	159	184	197	216	237	238	276	295	321	357
83	623	716	772	841	1,223	159	181	194	213	234	238	273	292	318	354
84	672	770	828	899	1,305	156	181	191	213	230	238	273	289	318	350
85	726	828	890	963	1,394	156	178	187	207	227	235	270	286	311	343

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 for Policies Issued Prior to 9/16/2002 - Year 2
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				
	Benefit Period					Benefit Period					Benefit Period				
Issue Age	*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	29	32	37	80	21	25	33	37	54	103	132	165	186	246
40	24	29	34	39	85	25	33	37	41	58	112	140	169	194	255
41	27	32	37	42	89	25	33	41	45	63	112	145	178	202	263
42	29	34	39	44	98	25	33	41	50	67	116	149	182	211	272
43	29	37	42	46	103	29	37	45	54	76	124	157	190	219	286
44	32	39	44	49	112	33	41	50	58	80	128	161	198	227	295
45	34	42	46	54	121	33	41	58	62	85	132	169	207	235	304
46	37	44	51	56	129	37	50	58	70	89	136	173	211	248	313
47	39	46	54	61	138	41	54	66	74	98	140	182	223	256	326
48	42	49	59	66	147	41	58	70	78	107	145	190	227	264	339
49	44	54	64	71	161	50	62	74	87	116	153	198	235	273	348
50	46	56	68	76	170	54	70	83	95	129	157	202	240	281	357
51	46	59	68	78	174	54	66	83	95	125	161	202	248	281	362
52	51	64	73	83	188	58	74	91	107	138	161	207	252	289	366
53	54	68	81	90	205	66	78	99	116	147	169	215	260	301	380
54	59	73	88	100	219	70	87	103	120	161	173	223	268	310	397
55	64	81	95	108	241	74	95	116	132	174	182	231	281	322	411
56	68	86	103	117	259	83	103	128	145	188	190	244	293	335	429
57	76	95	112	130	286	87	112	136	153	201	194	248	301	347	438
58	83	103	122	139	308	91	120	149	169	219	198	260	314	363	460
59	90	112	134	154	339	99	132	157	182	232	207	268	326	376	473
60	95	120	144	164	357	107	136	165	190	250	211	273	330	380	482
61	103	132	156	178	393	116	145	182	207	263	219	281	343	396	496
62	112	144	171	196	429	124	157	194	223	286	227	293	355	409	513
63	125	156	188	215	469	132	173	207	240	304	235	306	368	425	531
64	134	171	205	237	513	145	186	223	256	321	248	318	384	438	549
65	149	191	227	261	563	153	194	240	273	348	256	326	401	454	576
66	171	218	264	301	652	173	223	268	310	388	277	359	434	500	621
67	188	239	288	330	710	182	235	285	330	415	285	372	450	516	647
68	205	264	318	364	781	194	248	301	347	438	297	384	463	533	665
69	225	288	347	398	853	207	264	322	372	464	310	396	483	553	688
70	247	318	384	440	938	219	281	339	388	487	318	409	496	570	710
71	286	369	445	511	1,085	244	310	380	434	545	347	446	541	620	772
72	313	403	489	560	1,192	252	326	396	458	567	355	458	553	640	790
73	342	442	533	613	1,304	264	339	417	479	594	363	467	570	657	813
74	374	481	584	670	1,420	273	355	434	500	621	372	479	582	673	830
75	403	516	623	716	1,509	273	359	438	500	621	363	475	578	661	822
76	467	601	728	836	1,764	306	396	479	553	683	396	516	624	719	889
77	511	660	799	919	1,933	314	405	496	570	710	405	520	636	731	906
78	560	723	877	1,009	2,121	322	417	508	586	728	405	529	644	743	915
79	611	792	960	1,107	2,322	277	359	438	504	625	413	533	653	752	929
80	670	868	1,056	1,217	2,554	285	368	446	520	638	421	549	665	768	947
81	731	951	1,156	1,334	2,795	285	368	454	520	643	425	549	669	776	955
82	797	1,036	1,263	1,459	3,054	289	376	454	529	643	425	553	673	781	960
83	868	1,129	1,378	1,593	3,331	285	376	454	529	647	425	558	677	785	964
84	946	1,232	1,503	1,740	3,634	285	372	458	529	647	425	558	681	789	969
85	1,029	1,342	1,640	1,901	3,965	285	368	450	520	643	425	558	681	789	973

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 for Policies Issued Prior to 9/16/2002 - Year 2
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				
	Benefit Period					Benefit Period					Benefit Period				
Issue Age	*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	73	86	95	214	70	87	107	124	165	388	496	599	690	884
40	61	76	88	100	223	74	95	116	132	179	392	504	611	702	902
41	66	81	95	108	237	78	99	120	140	192	396	512	620	710	915
42	68	86	100	112	250	83	107	128	153	201	405	520	628	727	929
43	73	90	105	120	268	87	112	140	161	214	409	529	640	735	938
44	76	95	112	127	281	95	120	145	169	228	417	537	648	743	955
45	81	100	117	134	299	99	128	157	182	241	421	545	661	756	964
46	86	105	125	142	317	103	136	165	194	255	425	553	669	768	978
47	90	110	132	152	335	112	149	178	202	272	434	562	677	776	991
48	95	117	139	159	357	120	157	190	219	286	438	570	690	789	1,005
49	100	125	149	169	375	128	165	198	235	308	430	558	673	776	987
50	103	130	156	178	393	136	173	211	244	321	442	566	681	785	1,000
51	105	132	156	181	402	136	178	215	244	321	438	566	686	785	996
52	110	139	166	188	420	145	182	223	260	335	442	570	690	797	1,009
53	117	147	176	200	446	149	198	235	277	357	434	562	677	781	987
54	125	156	188	215	473	157	207	252	289	380	438	566	686	789	1,000
55	132	166	200	230	505	169	219	264	306	397	442	574	690	793	1,009
56	139	178	213	244	536	182	231	281	322	420	446	574	698	801	1,018
57	149	188	227	259	572	190	248	297	343	442	450	582	706	814	1,027
58	159	200	242	276	612	198	260	314	363	460	454	586	710	818	1,031
59	169	215	257	296	647	211	268	330	380	487	450	582	710	814	1,022
60	174	220	264	303	665	211	277	335	384	491	450	582	706	809	1,022
61	183	235	283	325	710	223	289	347	401	513	446	578	698	801	1,009
62	196	249	301	347	755	231	301	368	417	536	450	582	702	805	1,014
63	208	266	323	369	804	244	314	380	438	554	450	582	702	809	1,018
64	222	283	342	393	853	252	326	396	454	580	450	582	706	814	1,018
65	237	303	367	420	911	260	339	413	475	598	454	586	710	818	1,022
66	266	342	413	474	1,022	285	368	450	520	656	479	620	752	863	1,081
67	283	364	440	506	1,089	293	380	463	533	670	475	620	752	863	1,076
68	301	386	469	538	1,156	301	392	475	549	688	479	620	748	863	1,076
69	320	413	499	574	1,228	310	401	491	562	705	475	615	748	859	1,076
70	340	440	533	611	1,308	318	409	500	578	719	475	615	743	859	1,067
71	384	496	601	692	1,473	343	446	541	624	781	500	648	789	909	1,134
72	408	528	640	738	1,567	347	454	549	636	795	496	644	785	900	1,125
73	435	562	682	784	1,670	351	458	558	644	804	491	640	781	900	1,116
74	459	596	723	836	1,773	359	467	566	653	813	491	636	776	888	1,103
75	481	621	753	865	1,826	347	454	549	636	790	467	607	739	855	1,058
76	547	706	858	987	2,090	372	487	595	686	848	491	644	785	904	1,116
77	584	758	921	1,061	2,237	376	491	595	690	857	491	636	772	896	1,107
78	626	811	987	1,139	2,398	380	496	603	698	862	487	632	768	888	1,098
79	672	872	1,061	1,224	2,576	318	417	512	591	728	479	624	764	884	1,089
80	723	941	1,146	1,325	2,777	318	417	508	586	728	479	620	760	876	1,085
81	780	1,012	1,234	1,427	2,992	318	417	508	586	723	471	615	752	871	1,072
82	838	1,092	1,332	1,542	3,228	314	409	504	582	714	467	607	748	859	1,063
83	902	1,175	1,437	1,664	3,478	310	409	496	574	710	467	607	739	855	1,054
84	973	1,268	1,552	1,799	3,755	306	401	491	570	701	463	603	735	847	1,049
85	1,051	1,371	1,679	1,945	4,063	301	396	483	562	692	454	595	727	843	1,036

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 for Policies Issued Prior to 9/16/2002 - Year 2
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				
	Benefit Period					Benefit Period					Benefit Period				
Issue Age	*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	37	44	51	56	129	41	54	62	74	98	227	293	355	409	522
40	37	46	54	61	134	45	54	70	78	107	235	297	363	417	531
41	39	49	56	64	143	50	58	74	87	112	240	306	372	425	540
42	42	51	61	68	152	50	62	74	91	121	240	310	372	430	549
43	44	54	64	73	161	54	70	83	95	129	244	318	380	438	558
44	46	56	68	76	170	58	74	87	103	138	248	322	388	446	572
45	49	61	71	81	183	62	78	95	112	143	252	326	396	454	576
46	51	64	76	86	192	66	83	99	116	152	260	335	401	463	585
47	54	68	81	90	205	70	87	107	124	161	264	339	409	471	594
48	59	73	86	98	219	70	91	116	132	170	264	343	417	475	603
49	61	76	90	103	232	78	103	124	145	183	268	347	417	483	607
50	66	81	98	110	246	83	107	128	153	196	264	343	409	475	603
51	66	81	98	110	246	83	107	128	153	196	273	355	425	491	621
52	68	88	103	117	263	91	112	140	161	205	268	343	421	483	607
53	73	93	110	127	281	95	120	149	169	219	273	347	421	483	612
54	78	100	117	134	299	103	128	161	182	237	277	351	430	496	621
55	83	105	127	144	321	107	140	169	194	250	281	363	434	500	630
56	90	115	137	156	344	112	145	178	207	263	285	363	442	508	643
57	98	122	147	169	371	120	157	190	219	281	285	372	450	516	652
58	103	132	156	181	397	132	165	202	231	295	293	376	458	525	661
59	112	142	169	193	424	136	178	215	248	317	297	384	467	537	674
60	117	149	178	203	446	140	182	219	256	326	293	380	458	529	665
61	125	159	193	220	482	153	194	231	268	339	301	388	467	537	674
62	134	174	208	237	518	161	202	248	285	362	306	392	475	545	683
63	147	186	225	257	558	165	215	260	301	380	310	401	483	553	697
64	156	200	242	279	603	178	231	277	318	402	318	409	491	562	705
65	171	218	261	301	652	186	244	293	335	420	322	417	504	578	719
66	193	249	301	345	741	207	264	322	368	464	343	442	533	615	768
67	210	269	325	374	799	215	281	339	388	491	351	450	545	624	786
68	227	293	352	406	866	227	289	355	405	513	355	458	558	636	795
69	247	318	384	440	942	235	306	372	425	531	363	467	566	648	808
70	269	345	418	479	1,022	248	322	388	446	554	368	475	574	661	822
71	308	396	479	552	1,174	273	351	430	487	612	392	512	620	710	884
72	335	430	523	599	1,277	281	368	442	512	634	401	520	628	727	897
73	364	469	567	653	1,384	289	376	463	529	656	405	525	640	735	911
74	393	508	616	709	1,500	301	392	475	545	679	409	533	648	743	924
75	420	543	655	753	1,590	301	388	475	545	674	405	520	636	731	902
76	486	628	760	875	1,844	326	425	520	599	741	434	562	681	785	973
77	530	684	831	956	2,014	335	438	533	615	759	434	566	690	793	978
78	577	745	907	1,044	2,192	343	450	545	632	781	438	574	694	801	991
79	628	814	990	1,139	2,393	293	384	467	541	665	442	574	698	809	996
80	684	887	1,080	1,246	2,616	297	392	479	549	674	446	582	706	818	1,005
81	745	968	1,178	1,361	2,853	297	392	479	553	679	446	578	710	818	1,009
82	809	1,053	1,283	1,483	3,103	301	388	479	553	688	446	582	710	822	1,014
83	877	1,144	1,395	1,615	3,375	301	392	479	553	683	446	582	710	822	1,014
84	953	1,241	1,518	1,760	3,670	297	392	475	549	679	446	582	710	822	1,014
85	1,034	1,349	1,650	1,914	3,992	293	388	475	549	674	446	582	710	822	1,014

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 for Policies Issued Prior to 9/16/2002 - Year 2
Rates per $10 Daily Benefit

	Policy Form: LTQ11-336-MA-PA-601					**Rider: 11-SIP-PA-998**					**Rider: 11-CIP-PA-998**				
	Base Rates with No Inflation Protection					**Simple Inflation Protection Rider**					**Compound Inflation Protection Rider**				
Issue	**Benefit Period**					**Benefit Period**					**Benefit Period**				
Age	*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	39	46	51	125	33	41	50	62	85	132	169	207	244	326
40	34	42	49	56	134	33	45	54	62	89	136	178	215	248	335
41	37	44	51	59	138	37	50	62	70	98	140	182	227	260	348
42	39	46	56	64	147	37	45	62	74	107	145	190	231	268	362
43	42	49	59	68	161	41	58	70	78	112	149	198	240	277	371
44	44	54	64	71	170	45	58	74	87	121	153	202	248	289	384
45	46	56	66	76	183	50	66	83	95	129	161	211	260	301	397
46	49	61	71	83	192	54	66	87	99	138	165	215	268	306	411
47	51	64	76	88	205	58	78	95	107	152	173	227	277	322	429
48	56	68	83	95	223	62	83	99	116	161	178	235	285	330	438
49	59	73	88	103	237	66	87	107	124	174	186	244	297	343	455
50	64	78	95	110	255	74	95	116	132	188	186	248	301	347	460
51	64	81	95	110	259	74	95	120	136	188	194	248	306	355	469
52	68	86	105	120	277	78	103	124	149	201	194	252	306	355	473
53	73	93	112	130	299	87	112	136	157	214	202	260	318	368	487
54	81	100	122	139	326	91	120	145	173	228	207	273	330	384	500
55	86	110	132	152	348	99	128	157	186	250	215	277	343	396	522
56	93	117	144	164	380	107	140	169	202	268	223	289	351	413	536
57	100	130	156	178	411	116	149	182	215	286	231	297	363	425	554
58	110	139	169	196	446	124	161	198	227	304	235	310	380	438	572
59	120	152	183	213	482	132	173	215	248	330	244	318	392	450	589
60	125	161	196	225	513	140	182	223	260	339	248	322	392	458	594
61	137	176	213	247	558	149	194	240	277	366	256	330	409	471	612
62	149	191	232	269	607	157	211	256	297	388	260	343	421	483	630
63	161	208	254	293	661	169	223	273	318	415	273	355	430	500	647
64	176	227	276	320	719	182	235	293	339	442	281	363	446	516	665
65	193	249	303	349	786	194	252	314	363	473	289	376	463	537	692
66	220	286	347	403	902	219	285	351	405	527	314	409	504	578	746
67	242	313	381	440	982	227	301	372	434	558	318	417	516	599	768
68	264	340	415	481	1,072	240	322	396	458	594	326	434	533	615	790
69	286	371	455	528	1,170	256	339	417	483	625	339	446	545	632	808
70	313	408	499	579	1,281	268	355	438	508	656	347	454	558	648	830
71	359	469	577	670	1,478	301	396	487	566	732	376	491	603	698	897
72	393	513	631	733	1,616	310	413	508	591	764	380	500	615	715	915
73	428	560	689	799	1,764	322	430	529	620	795	384	508	624	731	929
74	464	609	750	872	1,920	339	446	553	644	826	392	516	636	739	942
75	496	648	797	929	2,032	339	450	558	644	830	384	508	624	723	920
76	574	753	929	1,083	2,371	372	496	611	715	920	409	541	669	776	991
77	628	826	1,019	1,190	2,603	380	508	632	739	947	409	545	673	781	991
78	684	904	1,119	1,307	2,853	396	525	648	760	978	413	545	673	781	996
79	748	990	1,227	1,435	3,130	339	450	558	657	839	413	541	673	785	991
80	821	1,088	1,351	1,584	3,451	347	458	570	669	862	413	545	673	785	996
81	894	1,188	1,481	1,738	3,786	347	467	578	681	871	413	541	669	776	982
82	975	1,300	1,620	1,906	4,148	351	467	582	686	880	405	533	661	764	964
83	1,063	1,417	1,772	2,087	4,541	351	471	586	686	880	396	525	648	752	942
84	1,158	1,547	1,938	2,285	4,969	351	471	586	690	880	388	512	628	731	915
85	1,261	1,689	2,116	2,500	5,438	347	467	582	690	880	380	496	611	710	884

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 for Policies Issued Prior to 9/16/2002 - Year 2
Rates per $10 Daily Benefit

	Policy Form: LTQ11-336-MA-PA-601					**Rider: 11-SIP-PA-998**					**Rider: 11-CIP-PA-998**				
	Base Rates with No Inflation Protection					**Simple Inflation Protection Rider**					**Compound Inflation Protection Rider**				
Issue	**Benefit Period**					**Benefit Period**					**Benefit Period**				
Age	*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	81	100	120	137	326	99	128	157	182	255	471	611	752	871	1,152
40	83	105	127	144	344	107	136	165	194	268	479	624	760	884	1,165
41	88	110	132	154	362	112	145	178	202	286	483	632	772	892	1,183
42	93	117	139	161	380	116	153	190	219	304	491	640	785	909	1,201
43	98	122	149	171	402	124	161	198	231	317	496	648	793	917	1,214
44	103	130	156	181	424	132	169	211	244	335	504	657	805	929	1,228
45	108	137	166	191	446	140	182	219	260	357	512	665	814	942	1,246
46	115	144	174	200	473	145	194	235	277	375	516	673	826	958	1,259
47	120	154	186	213	500	157	202	248	289	397	525	677	830	966	1,273
48	127	161	196	225	527	165	215	264	310	420	529	690	843	979	1,286
49	134	171	208	239	558	173	227	277	326	442	516	673	826	958	1,255
50	139	178	218	249	580	182	235	289	339	460	525	681	834	971	1,277
51	142	181	220	254	589	186	240	293	343	469	520	681	834	966	1,268
52	149	188	230	266	616	190	252	306	355	482	529	690	843	979	1,286
53	156	200	244	281	652	202	264	322	380	509	516	673	826	958	1,250
54	166	213	259	301	692	215	281	343	396	531	520	677	830	962	1,259
55	176	227	276	318	732	223	293	359	421	563	525	681	834	971	1,268
56	186	239	293	340	777	240	310	380	438	589	529	690	843	975	1,277
57	198	254	310	359	822	248	326	401	467	621	529	694	847	983	1,281
58	210	271	330	384	875	260	339	417	483	647	529	694	851	987	1,286
59	222	288	352	406	924	273	355	438	512	679	525	681	838	979	1,268
60	227	293	359	418	947	277	359	442	512	679	525	686	838	971	1,268
61	242	313	381	442	1,005	285	376	463	537	705	512	673	830	962	1,246
62	257	332	406	472	1,063	297	388	479	558	737	512	673	830	958	1,246
63	271	352	430	501	1,130	310	405	500	578	764	516	673	830	958	1,241
64	288	374	457	530	1,197	318	421	520	603	790	512	673	826	962	1,241
65	305	398	489	567	1,273	330	434	537	624	817	512	673	826	958	1,237
66	342	445	545	635	1,420	359	475	586	681	893	537	706	871	1,008	1,304
67	362	472	579	674	1,505	372	487	603	702	915	533	702	867	1,004	1,295
68	384	501	616	716	1,594	380	500	615	719	938	529	698	859	995	1,286
69	406	530	653	760	1,692	388	512	632	735	955	525	694	855	991	1,273
70	430	565	694	809	1,795	396	520	644	752	978	520	686	847	979	1,259
71	481	633	782	912	2,018	425	562	694	814	1,058	545	719	884	1,028	1,326
72	511	672	828	968	2,143	430	570	710	826	1,072	537	706	876	1,016	1,304
73	540	711	880	1,029	2,273	438	578	719	838	1,085	529	698	863	1,004	1,286
74	572	755	934	1,092	2,407	442	582	727	847	1,094	520	686	851	987	1,264
75	594	782	965	1,127	2,474	430	570	706	826	1,063	496	653	805	938	1,197
76	672	887	1,100	1,285	2,826	458	611	760	888	1,143	516	681	843	983	1,250
77	718	951	1,178	1,381	3,027	463	615	768	896	1,156	504	669	826	962	1,228
78	770	1,019	1,266	1,483	3,250	463	620	772	904	1,161	496	653	809	942	1,197
79	824	1,095	1,361	1,596	3,492	396	520	653	768	987	487	636	789	925	1,170
80	887	1,180	1,471	1,728	3,773	392	525	653	768	987	475	628	772	904	1,147
81	953	1,271	1,586	1,867	4,072	392	520	648	760	982	467	611	756	880	1,112
82	1,026	1,371	1,713	2,019	4,402	392	516	648	760	973	450	595	735	855	1,076
83	1,107	1,479	1,852	2,185	4,760	380	516	640	752	964	438	578	710	826	1,040
84	1,195	1,598	2,004	2,368	5,153	380	508	632	743	955	421	558	686	797	1,000
85	1,290	1,730	2,170	2,568	5,586	372	496	628	735	942	409	533	661	764	955

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 for Policies Issued Prior to 9/16/2002 - Year 2
Rates per $10 Daily Benefit

	Policy Form: LTQ11-336-MA-PA-601					**Rider: 11-SIP-PA-998**					**Rider: 11-CIP-PA-998**				
	Base Rates with No Inflation Protection					**Simple Inflation Protection Rider**					**Compound Inflation Protection Rider**				
Issue	**Benefit Period**					**Benefit Period**					**Benefit Period**				
Age	*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	49	61	71	83	196	58	74	95	107	152	281	363	446	516	679
40	51	64	76	88	205	62	83	99	116	161	285	372	454	520	692
41	54	66	81	93	219	66	87	103	120	170	289	376	458	533	701
42	56	71	86	98	228	70	91	112	128	183	293	380	467	541	714
43	59	76	90	103	241	74	95	116	140	192	301	384	458	549	723
44	64	78	95	110	255	78	103	124	145	205	301	396	479	558	737
45	66	83	100	115	272	83	112	132	157	210	306	401	487	566	741
46	71	88	108	122	286	87	116	140	165	228	310	405	496	574	755
47	73	93	112	130	304	95	124	153	178	241	318	413	504	582	764
48	78	100	120	139	321	99	128	161	186	255	322	417	512	591	777
49	83	105	127	147	339	107	140	169	198	272	322	421	512	595	777
50	88	112	134	156	362	112	145	182	207	281	318	413	508	582	768
51	88	112	134	156	362	112	145	182	211	286	326	425	525	603	790
52	93	120	144	166	384	120	153	190	223	299	322	417	512	591	777
53	100	127	154	178	411	124	165	202	231	313	322	417	512	591	772
54	105	134	164	191	438	136	178	215	248	330	326	425	520	599	781
55	112	144	176	203	464	145	186	227	264	353	330	430	525	611	795
56	120	154	188	218	496	153	198	240	277	371	335	438	533	615	804
57	130	166	200	232	531	157	207	256	297	393	339	442	541	628	813
58	137	176	215	249	567	169	223	268	314	415	343	450	549	632	822
59	147	191	230	266	607	178	231	289	330	438	347	450	558	644	830
60	154	198	242	279	634	182	240	293	343	446	343	446	545	636	822
61	166	213	259	301	679	190	252	310	359	473	343	454	553	640	830
62	178	230	279	323	728	202	264	326	380	496	347	458	562	648	839
63	191	247	301	347	781	215	277	343	401	522	355	463	566	657	848
64	205	264	323	374	839	223	297	363	421	549	359	471	574	665	857
65	220	286	349	406	906	235	310	380	438	572	363	475	582	673	866
66	249	325	396	459	1,022	260	339	421	487	634	388	504	620	719	929
67	269	349	428	496	1,103	273	355	438	508	665	392	512	628	727	938
68	291	379	464	538	1,192	285	372	458	533	692	396	516	636	735	947
69	313	408	501	582	1,290	297	388	479	558	719	401	525	644	748	955
70	340	442	545	631	1,398	306	405	496	582	750	405	533	648	756	964
71	386	506	623	723	1,598	339	446	545	640	826	430	566	694	805	1,031
72	418	547	674	787	1,732	351	463	570	661	853	434	570	702	809	1,040
73	452	594	733	853	1,875	359	475	586	686	884	434	574	702	818	1,049
74	489	643	792	924	2,032	372	491	607	706	911	438	574	710	822	1,049
75	518	682	838	978	2,139	372	487	607	706	911	425	558	694	801	1,022
76	599	787	973	1,134	2,487	401	533	661	776	991	450	595	731	855	1,085
77	650	858	1,061	1,241	2,715	413	549	681	793	1,022	450	595	735	851	1,085
78	706	934	1,158	1,356	2,965	425	566	698	818	1,045	450	595	731	847	1,076
79	770	1,019	1,266	1,483	3,237	359	483	599	702	897	446	586	723	843	1,067
80	838	1,114	1,386	1,625	3,545	368	487	607	715	911	442	582	719	838	1,058
81	912	1,212	1,513	1,777	3,871	372	491	611	719	920	438	578	710	826	1,045
82	992	1,322	1,650	1,940	4,228	368	491	620	727	924	430	566	698	814	1,022
83	1,078	1,437	1,799	2,119	4,612	368	496	615	727	924	417	553	681	793	996
84	1,171	1,564	1,960	2,312	5,028	363	487	611	723	924	409	541	665	772	969
85	1,271	1,701	2,133	2,522	5,483	363	487	607	723	920	396	520	644	748	933

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 for Policies Issued Prior to 9/16/2002 - Year 2
Rates per $10 Daily Benefit

	Policy Form: FLQ11-336-MA-PA-601					**Rider: 11-SIP-PA-998**					**Rider: 11-CIP-PA-998**				
	Base Rates with No Inflation Protection					**Simple Inflation Protection Rider**					**Compound Inflation Protection Rider**				
Issue	**Benefit Period**					**Benefit Period**					**Benefit Period**				
Age	*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	29	34	42	46	112	29	37	45	54	76	120	153	186	219	295
40	32	37	44	51	121	29	41	50	54	80	120	161	194	223	304
41	34	39	46	54	125	33	45	54	62	89	124	165	202	231	313
42	34	42	51	56	134	37	41	54	70	94	132	173	207	244	326
43	37	44	54	61	143	37	54	62	70	103	136	178	215	252	335
44	39	49	56	64	152	41	50	70	78	112	140	182	223	260	348
45	42	51	59	68	165	45	58	74	87	116	145	190	235	273	357
46	44	56	64	76	174	50	58	78	87	125	149	190	244	273	371
47	46	56	68	78	183	54	74	87	99	138	157	207	248	293	388
48	51	61	76	86	201	54	74	87	103	143	157	215	256	297	393
49	54	66	78	93	214	58	78	99	112	156	165	219	268	310	411
50	56	71	86	100	228	70	87	103	116	170	169	223	273	310	415
51	56	73	86	100	232	70	83	107	120	170	178	223	277	318	424
52	61	78	95	108	250	70	91	112	136	179	178	223	273	322	424
53	66	83	100	117	268	78	103	124	140	196	182	235	289	330	438
54	73	90	110	125	295	83	107	132	157	205	186	244	297	347	451
55	78	100	120	137	313	87	112	140	165	228	190	248	306	355	473
56	83	105	130	147	344	99	128	153	182	241	202	260	318	372	482
57	90	117	142	161	371	103	132	161	194	255	207	268	326	380	496
58	100	125	152	176	402	112	145	178	207	272	211	281	343	392	513
59	108	137	166	191	433	120	157	190	223	299	219	285	351	405	531
60	112	144	176	203	464	128	165	202	235	304	223	293	355	413	531
61	122	159	191	222	505	136	173	219	248	326	231	297	368	425	549
62	134	171	210	242	545	140	190	227	268	353	235	310	376	434	567
63	144	188	230	264	594	153	198	244	285	375	248	318	384	450	585
64	159	205	249	288	647	161	211	264	306	397	252	326	401	463	598
65	174	225	274	315	705	173	227	281	326	429	260	339	413	483	625
66	198	257	313	364	813	198	256	314	363	473	281	368	454	520	670
67	218	281	342	396	884	207	273	335	392	505	285	376	467	541	692
68	237	305	374	433	964	215	289	355	413	536	293	392	479	553	710
69	257	335	408	474	1,054	231	306	376	438	563	306	401	491	570	728
70	281	367	450	521	1,152	244	322	392	458	594	314	409	500	586	750
71	323	423	518	604	1,331	273	355	442	508	661	339	442	545	628	808
72	354	462	567	660	1,456	277	372	458	533	688	343	450	553	644	822
73	386	503	621	718	1,590	289	388	475	558	714	343	458	562	661	835
74	418	547	674	784	1,728	306	401	500	582	746	355	467	574	665	848
75	447	584	716	836	1,831	306	405	504	578	746	343	454	562	653	826
76	518	677	836	975	2,134	335	446	549	640	826	368	487	603	698	893
77	565	743	916	1,070	2,344	343	458	570	665	853	368	491	607	702	893
78	616	814	1,007	1,178	2,567	355	471	586	681	880	372	491	607	702	897
79	672	892	1,105	1,290	2,817	306	405	500	591	755	372	483	607	706	893
80	738	980	1,217	1,425	3,108	314	409	512	603	772	372	487	603	706	893
81	804	1,068	1,332	1,564	3,407	314	421	520	611	786	372	487	603	698	884
82	877	1,171	1,459	1,716	3,733	318	421	525	615	790	363	479	595	690	871
83	958	1,276	1,596	1,879	4,085	314	425	525	615	795	355	471	582	673	848
84	1,044	1,393	1,745	2,058	4,474	314	421	529	620	790	347	458	566	657	822
85	1,134	1,520	1,904	2,251	4,894	314	421	525	620	795	343	446	553	640	795

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 for Policies Issued Prior to 9/16/2002 - Year 2
Rates per $10 Daily Benefit

	Policy Form: FLQ11-336-MA-PA-601					**Rider: 11-SIP-PA-998**					**Rider: 11-CIP-PA-998**				
	Base Rates with No Inflation Protection					**Simple Inflation Protection Rider**					**Compound Inflation Protection Rider**				
Issue	**Benefit Period**					**Benefit Period**					**Benefit Period**				
Age	*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	44	56	64	76	179	54	66	87	95	134	252	326	401	463	607
40	46	56	68	78	183	54	74	91	107	147	256	335	409	471	625
41	49	59	73	83	196	58	78	91	107	152	260	339	413	479	630
42	51	64	78	88	205	62	83	99	116	165	264	343	417	487	643
43	54	68	81	93	219	66	87	107	124	170	268	347	413	496	647
44	56	71	86	100	228	74	91	112	128	188	273	355	434	500	665
45	59	76	90	103	246	74	99	120	145	188	277	359	438	512	665
46	64	78	98	110	259	78	107	124	149	205	281	368	446	516	679
47	66	83	100	117	272	87	112	140	157	219	285	372	454	525	688
48	71	90	108	125	290	87	116	145	169	228	289	376	463	533	697
49	76	95	115	132	304	95	124	153	178	246	289	380	458	537	701
50	78	100	122	142	326	103	132	161	186	255	289	372	454	525	692
51	78	100	122	142	326	103	132	161	190	259	297	384	471	541	710
52	83	108	130	149	344	107	136	173	202	272	289	376	463	533	701
53	90	115	139	161	371	112	149	182	207	281	289	376	458	529	697
54	95	122	147	171	393	120	157	194	223	299	293	380	471	541	705
55	100	130	159	183	420	132	169	202	235	317	297	388	471	549	714
56	108	139	169	196	446	136	178	219	248	335	301	392	479	553	723
57	117	149	181	210	478	140	186	231	264	353	306	401	487	562	732
58	122	159	193	225	509	153	198	244	281	375	310	405	496	570	741
59	132	171	208	239	545	161	211	260	297	397	314	405	500	582	750
60	139	178	218	252	572	161	215	264	306	402	306	401	491	570	737
61	149	191	232	271	612	173	227	281	322	424	310	409	500	574	746
62	161	208	252	291	656	182	235	293	343	446	310	413	504	582	755
63	171	222	271	313	705	194	248	306	359	469	322	417	508	591	764
64	186	237	291	337	755	198	268	326	380	496	322	425	516	599	772
65	198	257	315	364	817	211	281	343	396	513	326	430	525	607	777
66	225	293	357	413	920	235	306	380	438	572	347	454	558	648	835
67	242	315	386	447	991	244	318	392	454	598	355	458	562	653	844
68	261	342	418	484	1,072	256	335	413	479	625	359	463	574	661	853
69	281	367	452	523	1,161	268	351	430	504	647	363	475	578	673	862
70	305	398	491	567	1,259	277	363	446	525	674	363	479	582	681	866
71	347	455	562	650	1,438	306	405	487	578	746	388	512	624	727	929
72	376	494	606	709	1,558	314	413	516	595	768	388	512	632	727	938
73	408	535	660	767	1,688	322	425	529	620	795	388	516	632	735	947
74	440	579	714	831	1,831	335	442	545	636	817	392	516	636	739	942
75	467	613	755	880	1,924	335	438	545	636	822	384	504	624	723	920
76	540	709	875	1,022	2,237	359	479	595	698	893	405	533	661	768	978
77	584	772	956	1,117	2,442	372	496	611	715	920	409	537	661	768	978
78	635	841	1,044	1,222	2,670	384	508	628	735	938	405	533	657	760	969
79	694	916	1,139	1,334	2,916	322	438	541	632	804	401	529	653	760	960
80	755	1,002	1,246	1,464	3,192	330	442	549	640	817	396	525	648	752	951
81	821	1,090	1,361	1,598	3,483	335	446	549	648	830	392	520	640	743	942
82	892	1,190	1,486	1,747	3,804	335	442	558	653	835	388	508	628	731	920
83	970	1,293	1,618	1,906	4,152	330	446	558	657	830	376	500	615	715	893
84	1,053	1,408	1,764	2,080	4,523	326	438	549	653	835	368	487	599	698	875
85	1,144	1,530	1,921	2,270	4,934	326	442	545	648	830	355	471	578	673	839

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 for Policies Issued Prior to 9/16/2002 - Year 2
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				
	Benefit Period					Benefit Period					Benefit Period				
Issue Age	*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	34	39	42	46	107	25	33	37	45	63	99	120	136	157	201
40	34	39	44	49	116	29	37	41	45	63	107	128	140	161	201
41	37	42	46	51	121	29	37	41	50	67	107	132	145	165	205
42	37	44	49	54	125	33	41	45	54	71	116	132	149	169	214
43	39	46	51	56	129	37	41	45	54	76	116	136	153	173	219
44	42	49	54	59	134	37	45	50	58	80	120	140	157	182	228
45	44	51	56	64	143	37	45	54	58	80	120	145	161	182	228
46	44	54	59	66	147	45	50	58	66	89	128	149	169	190	237
47	46	56	61	68	156	45	54	62	70	89	132	153	173	194	241
48	49	59	64	73	161	50	58	66	70	98	136	161	182	198	250
49	54	61	68	76	170	50	62	70	78	103	136	165	186	207	255
50	56	64	71	81	179	54	66	74	83	103	136	165	186	202	250
51	56	66	73	81	179	54	66	70	83	107	140	169	186	211	259
52	59	68	76	86	188	58	70	78	87	112	140	169	190	211	255
53	61	73	81	90	196	62	74	83	95	116	149	173	194	215	263
54	66	78	86	95	205	66	78	91	99	125	153	178	202	223	272
55	71	83	90	103	219	70	83	95	103	134	157	186	207	227	277
56	76	88	98	110	232	74	91	99	112	138	161	190	211	235	286
57	81	95	105	117	246	78	95	107	120	147	165	194	215	240	290
58	86	100	112	125	263	87	103	112	128	156	173	202	223	248	299
59	93	108	120	132	281	91	112	120	136	161	173	211	231	260	304
60	95	112	125	139	290	95	112	124	136	170	178	211	231	256	304
61	103	122	134	149	308	99	116	132	145	179	182	215	235	264	313
62	110	130	144	159	330	107	128	136	157	188	190	223	244	273	317
63	120	139	154	171	353	112	132	149	165	196	190	227	248	277	326
64	127	149	166	183	375	120	140	153	173	205	198	235	256	285	335
65	139	161	178	198	402	124	149	165	182	219	202	244	264	293	344
66	156	183	203	225	455	140	165	182	198	237	223	260	285	314	366
67	169	198	218	242	487	149	173	190	211	250	227	264	293	322	375
68	183	213	235	259	522	153	182	198	223	259	231	273	297	330	384
69	198	230	252	279	563	161	190	211	231	268	235	281	306	339	388
70	213	249	271	301	603	169	194	219	240	277	244	281	314	343	393
71	242	281	308	342	679	186	219	240	260	304	260	306	335	368	424
72	259	303	332	367	723	194	223	244	273	313	268	310	339	376	429
73	279	325	357	393	772	198	231	252	277	321	268	314	343	380	433
74	298	347	381	420	822	207	240	260	285	326	273	318	347	380	433
75	320	371	403	445	862	202	235	260	281	321	268	310	339	372	424
76	364	423	459	506	978	219	256	281	306	348	289	330	363	396	451
77	393	455	494	543	1,045	223	260	285	314	353	289	335	368	401	451
78	423	489	530	582	1,121	231	264	289	318	353	289	335	368	401	446
79	455	525	569	626	1,197	194	227	248	268	299	293	339	368	401	446
80	491	567	616	672	1,281	198	227	244	273	299	297	343	368	405	451
81	530	611	660	723	1,371	198	227	248	264	299	297	343	372	401	446
82	574	657	711	775	1,469	194	227	244	268	299	293	343	368	401	446
83	621	711	765	833	1,576	194	227	244	264	295	293	339	368	396	438
84	670	767	824	894	1,688	198	223	244	260	290	293	335	363	392	438
85	723	826	885	960	1,808	194	223	240	256	281	293	335	359	388	429

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 for Policies Issued Prior to 9/16/2002 - Year 2
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				
	Benefit Period					Benefit Period					Benefit Period				
Issue Age	*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	76	88	98	110	250	74	95	107	120	165	347	417	463	516	643
40	78	90	100	112	259	83	99	116	132	174	351	421	471	529	652
41	81	95	105	117	268	87	103	120	136	183	359	425	475	533	656
42	83	98	110	122	281	91	112	124	140	183	363	434	479	537	656
43	88	103	115	127	290	95	116	128	149	192	363	434	483	541	665
44	90	108	120	134	299	99	120	136	153	205	368	438	487	541	670
45	95	110	125	139	313	103	128	140	161	210	372	446	491	549	670
46	98	115	130	144	321	112	132	149	169	219	376	446	496	553	674
47	103	120	134	149	335	116	140	157	178	228	376	450	500	558	679
48	108	125	139	156	348	120	149	165	186	232	372	446	491	545	652
49	110	132	147	164	357	128	153	169	190	246	376	442	491	549	670
50	112	134	149	166	362	132	153	173	194	246	376	442	487	545	652
51	117	137	152	171	375	132	161	178	198	250	376	446	496	553	670
52	117	139	154	174	375	136	161	182	202	255	380	446	496	549	656
53	125	147	161	181	388	140	169	190	215	268	372	446	496	549	670
54	130	154	169	191	406	149	178	198	219	272	368	434	483	537	643
55	137	161	178	198	424	153	182	207	231	281	368	438	483	541	638
56	142	169	186	208	442	165	194	215	240	290	372	438	487	541	638
57	149	176	196	218	460	169	202	223	248	299	372	442	483	541	638
58	156	186	205	227	478	178	207	231	260	313	376	438	483	541	638
59	164	193	215	239	496	182	219	240	264	326	363	430	471	520	612
60	166	196	218	242	500	182	215	235	264	317	372	438	479	533	634
61	174	205	227	252	522	190	223	244	277	326	359	425	463	516	603
62	183	215	237	264	545	194	231	256	281	335	359	421	463	516	598
63	193	225	249	276	567	198	235	260	289	344	355	421	463	512	598
64	203	237	261	288	589	202	240	264	297	353	355	417	458	508	594
65	213	249	274	303	616	211	248	273	306	362	355	417	458	508	589
66	235	276	303	335	679	227	264	293	326	384	372	434	479	529	612
67	247	288	318	352	710	231	273	297	330	388	368	434	471	520	603
68	259	303	332	367	737	235	277	306	339	393	363	425	467	520	598
69	271	318	347	386	768	240	281	310	339	397	359	421	463	508	589
70	283	332	364	403	804	244	285	314	343	397	359	417	458	504	576
71	315	369	403	445	884	256	301	330	368	420	372	434	475	529	598
72	330	386	423	467	920	260	301	330	368	420	368	430	467	516	589
73	345	403	440	486	955	260	306	335	368	420	363	421	463	508	576
74	362	420	459	508	991	260	306	335	363	415	355	417	454	496	563
75	376	435	474	523	1,014	252	293	322	351	402	339	396	430	471	531
76	418	486	528	582	1,125	268	310	343	372	420	355	409	450	491	549
77	442	511	557	611	1,179	268	314	339	372	420	347	405	438	483	540
78	467	540	587	645	1,237	268	310	339	368	415	343	396	434	471	527
79	494	572	621	679	1,299	223	260	281	306	344	339	388	421	463	518
80	525	606	657	718	1,371	223	256	277	306	339	335	388	417	458	509
81	560	645	699	762	1,447	219	252	268	297	330	330	380	409	446	500
82	599	687	743	809	1,531	215	252	268	293	330	322	376	401	438	487
83	640	733	792	860	1,630	215	248	264	289	317	318	372	392	430	473
84	687	784	843	916	1,728	207	244	260	285	313	314	363	392	425	469
85	736	841	902	978	1,840	207	235	252	277	299	314	355	380	413	455

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 for Policies Issued Prior to 9/16/2002 - Year 2
Rates per $10 Daily Benefit

	Policy Form: HTQ11-338-MA-PA-601					**Rider: 11-SIP-PA-998**					**Rider: 11-CIP-PA-998**				
	Base Rates with No Inflation Protection					**Simple Inflation Protection Rider**					**Compound Inflation Protection Rider**				
Issue	**Benefit Period**					**Benefit Period**					**Benefit Period**				
Age	*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	46	54	59	66	152	45	58	66	74	98	207	248	277	310	384
40	46	56	61	68	156	50	58	70	78	107	211	252	281	314	388
41	49	59	64	73	165	54	62	74	78	107	215	252	285	314	388
42	51	61	66	76	170	54	66	74	83	112	215	256	289	318	397
43	54	64	71	78	179	58	70	78	91	116	219	260	289	326	397
44	56	66	73	81	183	58	70	83	95	125	219	264	293	330	402
45	59	68	76	86	192	62	74	87	95	125	223	268	297	330	406
46	61	71	78	88	201	66	83	91	103	129	227	273	301	335	406
47	64	76	83	93	205	70	83	95	107	138	227	273	301	339	411
48	66	78	86	98	214	74	87	103	112	143	231	277	310	339	411
49	68	81	90	103	223	78	95	103	116	152	231	273	301	335	406
50	71	83	93	105	228	83	99	107	120	152	231	277	306	339	411
51	73	86	95	108	232	83	99	112	124	156	231	277	306	339	411
52	76	88	98	110	237	83	103	116	128	161	231	277	310	343	415
53	78	93	103	115	250	91	107	120	136	165	231	273	301	339	406
54	83	98	110	122	263	95	112	124	140	170	231	277	301	339	402
55	88	103	115	130	272	99	120	132	145	183	235	281	306	339	411
56	93	110	122	134	286	103	124	136	157	192	240	281	310	347	411
57	98	115	127	144	299	112	132	145	161	196	240	285	314	347	415
58	105	122	134	152	317	112	136	153	169	205	240	289	318	351	415
59	110	130	144	159	335	120	145	157	178	210	244	289	318	355	415
60	115	134	147	164	339	120	145	161	182	219	240	285	314	347	411
61	120	142	156	174	362	128	153	169	186	223	244	289	314	351	411
62	127	152	166	186	380	136	157	173	194	232	248	289	318	351	415
63	137	159	176	196	402	136	165	182	202	241	248	293	322	355	415
64	144	171	188	208	424	145	169	186	211	250	252	293	322	359	420
65	154	181	200	222	451	153	182	194	219	259	256	301	326	359	420
66	174	203	222	247	500	165	194	215	240	281	268	318	347	384	446
67	186	218	239	264	531	169	202	219	248	290	273	318	347	388	451
68	198	232	254	281	567	178	211	231	256	295	277	322	355	392	451
69	213	247	271	301	603	182	219	240	264	304	277	326	355	392	451
70	227	264	291	323	643	190	223	244	268	313	281	330	359	392	451
71	257	298	327	362	719	207	244	264	293	335	297	347	380	417	478
72	274	320	349	386	764	211	248	273	301	344	297	347	380	421	478
73	291	340	371	411	808	219	256	281	310	348	301	351	384	421	478
74	310	362	396	437	853	223	260	285	314	357	301	351	384	421	478
75	330	384	418	459	893	223	256	281	310	348	297	343	372	409	464
76	376	435	474	521	1,009	235	277	301	330	371	310	363	392	434	487
77	403	467	508	557	1,076	240	281	306	335	375	310	363	392	434	482
78	433	501	543	596	1,143	244	281	310	339	380	314	359	392	430	482
79	464	535	582	638	1,219	207	240	260	285	321	310	363	392	425	478
80	499	577	626	684	1,304	207	240	260	281	317	314	359	388	425	473
81	538	618	670	733	1,389	211	240	260	281	317	310	359	388	421	473
82	579	665	718	784	1,487	207	240	256	281	308	310	359	384	417	464
83	623	716	772	841	1,590	207	235	252	277	304	310	355	380	413	460
84	672	770	828	899	1,697	202	235	248	277	299	310	355	376	413	455
85	726	828	890	963	1,813	202	231	244	268	295	306	351	372	405	446

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 for Policies Issued Prior to 9/16/2002 - Year 3
Rates per $10 Daily Benefit

	Policy Form: NTQ11-337-MA-PA-601					**Rider: 11-SIP-PA-998**					**Rider: 11-CIP-PA-998**				
	Base Rates with No Inflation Protection					**Simple Inflation Protection Rider**					**Compound Inflation Protection Rider**				
Issue	**Benefit Period**					**Benefit Period**					**Benefit Period**				
Age	*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	29	32	37	95	24	29	39	43	63	121	155	193	217	290
40	24	29	34	39	100	29	39	43	48	69	130	164	198	227	301
41	27	32	37	42	106	29	39	48	53	74	130	169	208	237	312
42	29	34	39	44	116	29	39	48	58	79	135	174	213	246	322
43	29	37	42	46	121	34	43	53	63	90	145	184	222	256	338
44	32	39	44	49	132	39	48	58	68	95	150	188	232	266	349
45	34	42	46	54	143	39	48	68	72	100	155	198	242	275	359
46	37	44	51	56	153	43	58	68	82	106	159	203	246	290	370
47	39	46	54	61	164	48	63	77	87	116	164	213	261	300	386
48	42	49	59	66	174	48	68	82	92	127	169	222	266	309	401
49	44	54	64	71	190	58	72	87	101	137	179	232	275	319	412
50	46	56	68	76	201	63	82	97	111	153	184	237	280	329	423
51	46	59	68	78	206	63	77	97	111	148	188	237	290	329	428
52	51	64	73	83	222	68	87	106	126	164	188	242	295	338	433
53	54	68	81	90	243	77	92	116	135	174	198	251	304	353	449
54	59	73	88	100	259	82	101	121	140	190	203	261	314	362	470
55	64	81	95	108	285	87	111	135	155	206	213	271	329	377	486
56	68	86	103	117	306	97	121	150	169	222	222	285	343	391	507
57	76	95	112	130	338	101	130	159	179	238	227	290	353	406	518
58	83	103	122	139	364	106	140	174	198	259	232	304	367	425	544
59	90	112	134	154	401	116	155	184	213	275	242	314	382	440	560
60	95	120	144	164	423	126	159	193	222	296	246	319	387	445	570
61	103	132	156	178	465	135	169	213	242	312	256	329	401	464	586
62	112	144	171	196	507	145	184	227	261	338	266	343	416	478	607
63	125	156	188	215	555	155	203	242	280	359	275	358	430	498	628
64	134	171	205	237	607	169	217	261	300	380	290	372	449	512	650
65	149	191	227	261	665	179	227	280	319	412	300	382	469	532	681
66	171	218	264	301	771	203	261	314	362	459	324	420	507	585	734
67	188	239	288	330	840	213	275	333	387	491	333	435	527	604	766
68	205	264	318	364	924	227	290	353	406	518	348	449	541	623	787
69	225	288	347	398	1,009	242	309	377	435	549	362	464	565	648	813
70	247	318	384	440	1,109	256	329	396	454	576	372	478	580	667	840
71	286	369	445	511	1,283	285	362	445	507	644	406	522	633	725	914
72	313	403	489	560	1,410	295	382	464	536	671	416	536	648	749	935
73	342	442	533	613	1,542	309	396	488	561	702	425	546	667	768	961
74	374	481	584	670	1,679	319	416	507	585	734	435	561	681	788	982
75	403	516	623	716	1,785	319	420	512	585	734	425	556	677	773	972
76	467	601	728	836	2,086	358	464	561	648	808	464	604	730	841	1,051
77	511	660	799	919	2,287	367	474	580	667	840	474	609	744	855	1,072
78	560	723	877	1,009	2,509	377	488	594	686	861	474	619	754	870	1,083
79	611	792	960	1,107	2,746	324	420	512	590	739	483	623	763	879	1,099
80	670	868	1,056	1,217	3,021	333	430	522	609	755	493	643	778	899	1,120
81	731	951	1,156	1,334	3,306	333	430	532	609	761	498	643	783	908	1,130
82	797	1,036	1,263	1,459	3,612	338	440	532	619	761	498	648	788	913	1,135
83	868	1,129	1,378	1,593	3,940	333	440	532	619	766	498	652	792	918	1,141
84	946	1,232	1,503	1,740	4,299	333	435	536	619	766	498	652	797	923	1,146
85	1,029	1,342	1,640	1,901	4,690	333	430	527	609	761	498	652	797	923	1,151

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 for Policies Issued Prior to 9/16/2002 - Year 3
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				
	Benefit Period					Benefit Period					Benefit Period				
Issue Age	*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	73	86	95	254	82	101	126	145	195	454	580	701	807	1,046
40	61	76	88	100	264	87	111	135	155	211	459	590	715	821	1,067
41	66	81	95	108	280	92	116	140	164	227	464	599	725	831	1,083
42	68	86	100	112	296	97	126	150	179	238	474	609	734	850	1,099
43	73	90	105	120	317	101	130	164	188	254	478	619	749	860	1,109
44	76	95	112	127	333	111	140	169	198	269	488	628	759	870	1,130
45	81	100	117	134	354	116	150	184	213	285	493	638	773	884	1,141
46	86	105	125	142	375	121	159	193	227	301	498	648	783	899	1,157
47	90	110	132	152	396	130	174	208	237	322	507	657	792	908	1,172
48	95	117	139	159	423	140	184	222	256	338	512	667	807	923	1,188
49	100	125	149	169	444	150	193	232	275	364	503	652	788	908	1,167
50	103	130	156	178	465	159	203	246	285	380	517	662	797	918	1,183
51	105	132	156	181	475	159	208	251	285	380	512	662	802	918	1,178
52	110	139	166	188	496	169	213	261	304	396	517	667	807	933	1,194
53	117	147	176	200	528	174	232	275	324	423	507	657	792	913	1,167
54	125	156	188	215	560	184	242	295	338	449	512	662	802	923	1,183
55	132	166	200	230	597	198	256	309	358	470	517	672	807	928	1,194
56	139	178	213	244	634	213	271	329	377	496	522	672	817	937	1,204
57	149	188	227	259	676	222	290	348	401	523	527	681	826	952	1,215
58	159	200	242	276	724	232	304	367	425	544	532	686	831	957	1,220
59	169	215	257	296	766	246	314	387	445	576	527	681	831	952	1,209
60	174	220	264	303	787	246	324	391	449	581	527	681	826	947	1,209
61	183	235	283	325	840	261	338	406	469	607	522	677	817	937	1,194
62	196	249	301	347	893	271	353	430	488	634	527	681	821	942	1,199
63	208	266	323	369	951	285	367	445	512	655	527	681	821	947	1,204
64	222	283	342	393	1,009	295	382	464	532	687	527	681	826	952	1,204
65	237	303	367	420	1,077	304	396	483	556	708	532	686	831	957	1,209
66	266	342	413	474	1,209	333	430	527	609	776	561	725	879	1,010	1,278
67	283	364	440	506	1,289	343	445	541	623	792	556	725	879	1,010	1,273
68	301	386	469	538	1,368	353	459	556	643	813	561	725	875	1,010	1,273
69	320	413	499	574	1,452	362	469	575	657	834	556	720	875	1,005	1,273
70	340	440	533	611	1,547	372	478	585	677	850	556	720	870	1,005	1,262
71	384	496	601	692	1,743	401	522	633	730	924	585	759	923	1,063	1,341
72	408	528	640	738	1,854	406	532	643	744	940	580	754	918	1,053	1,331
73	435	562	682	784	1,975	411	536	652	754	951	575	749	913	1,053	1,320
74	459	596	723	836	2,097	420	546	662	763	961	575	744	908	1,039	1,304
75	481	621	753	865	2,160	406	532	643	744	935	546	710	865	1,000	1,252
76	547	706	858	987	2,472	435	570	696	802	1,003	575	754	918	1,058	1,320
77	584	758	921	1,061	2,646	440	575	696	807	1,014	575	744	904	1,049	1,310
78	626	811	987	1,139	2,836	445	580	705	817	1,019	570	739	899	1,039	1,299
79	672	872	1,061	1,224	3,047	372	488	599	691	861	561	730	894	1,034	1,289
80	723	941	1,146	1,325	3,285	372	488	594	686	861	561	725	889	1,024	1,283
81	780	1,012	1,234	1,427	3,538	372	488	594	686	856	551	720	879	1,020	1,268
82	838	1,092	1,332	1,542	3,818	367	478	590	681	845	546	710	875	1,005	1,257
83	902	1,175	1,437	1,664	4,114	362	478	580	672	840	546	710	865	1,000	1,246
84	973	1,268	1,552	1,799	4,442	358	469	575	667	829	541	705	860	991	1,241
85	1,051	1,371	1,679	1,945	4,806	353	464	565	657	819	532	696	850	986	1,225

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 for Policies Issued Prior to 9/16/2002 - Year 3
Rates per $10 Daily Benefit

	Policy Form: NTQ11-337-MA-PA-601					**Rider: 11-SIP-PA-998**					**Rider: 11-CIP-PA-998**				
	Base Rates with No Inflation Protection					**Simple Inflation Protection Rider**					**Compound Inflation Protection Rider**				
Issue	**Benefit Period**					**Benefit Period**					**Benefit Period**				
Age	*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	37	44	51	56	153	48	63	72	87	116	266	343	416	478	618
40	37	46	54	61	158	53	63	82	92	127	275	348	425	488	628
41	39	49	56	64	169	58	68	87	101	132	280	358	435	498	639
42	42	51	61	68	180	58	72	87	106	143	280	362	435	503	650
43	44	54	64	73	190	63	82	97	111	153	285	372	445	512	660
44	46	56	68	76	201	68	87	101	121	164	290	377	454	522	676
45	49	61	71	81	217	72	92	111	130	169	295	382	464	532	681
46	51	64	76	86	227	77	97	116	135	180	304	391	469	541	692
47	54	68	81	90	243	82	101	126	145	190	309	396	478	551	702
48	59	73	86	98	259	82	106	135	155	201	309	401	488	556	713
49	61	76	90	103	275	92	121	145	169	217	314	406	488	565	718
50	66	81	98	110	290	97	126	150	179	232	309	401	478	556	713
51	66	81	98	110	290	97	126	150	179	232	319	416	498	575	734
52	68	88	103	117	312	106	130	164	188	243	314	401	493	565	718
53	73	93	110	127	333	111	140	174	198	259	319	406	493	565	724
54	78	100	117	134	354	121	150	188	213	280	324	411	503	580	734
55	83	105	127	144	380	126	164	198	227	296	329	425	507	585	745
56	90	115	137	156	407	130	169	208	242	312	333	425	517	594	761
57	98	122	147	169	438	140	184	222	256	333	333	435	527	604	771
58	103	132	156	181	470	155	193	237	271	349	343	440	536	614	782
59	112	142	169	193	502	159	208	251	290	375	348	449	546	628	797
60	117	149	178	203	528	164	213	256	300	386	343	445	536	619	787
61	125	159	193	220	570	179	227	271	314	401	353	454	546	628	797
62	134	174	208	237	613	188	237	290	333	428	358	459	556	638	808
63	147	186	225	257	660	193	251	304	353	449	362	469	565	648	824
64	156	200	242	279	713	208	271	324	372	475	372	478	575	657	834
65	171	218	261	301	771	217	285	343	391	496	377	488	590	677	850
66	193	249	301	345	877	242	309	377	430	549	401	517	623	720	908
67	210	269	325	374	945	251	329	396	454	581	411	527	638	730	930
68	227	293	352	406	1,025	266	338	416	474	607	416	536	652	744	940
69	247	318	384	440	1,114	275	358	435	498	628	425	546	662	759	956
70	269	345	418	479	1,209	290	377	454	522	655	430	556	672	773	972
71	308	396	479	552	1,389	319	411	503	570	724	459	599	725	831	1,046
72	335	430	523	599	1,510	329	430	517	599	750	469	609	734	850	1,062
73	364	469	567	653	1,637	338	440	541	619	776	474	614	749	860	1,077
74	393	508	616	709	1,775	353	459	556	638	803	478	623	759	870	1,093
75	420	543	655	753	1,880	353	454	556	638	797	474	609	744	855	1,067
76	486	628	760	875	2,181	382	498	609	701	877	507	657	797	918	1,151
77	530	684	831	956	2,382	391	512	623	720	898	507	662	807	928	1,157
78	577	745	907	1,044	2,593	401	527	638	739	924	512	672	812	937	1,172
79	628	814	990	1,139	2,831	343	449	546	633	787	517	672	817	947	1,178
80	684	887	1,080	1,246	3,095	348	459	561	643	797	522	681	826	957	1,188
81	745	968	1,178	1,361	3,375	348	459	561	648	803	522	677	831	957	1,194
82	809	1,053	1,283	1,483	3,671	353	454	561	648	813	522	681	831	962	1,199
83	877	1,144	1,395	1,615	3,993	353	459	561	648	808	522	681	831	962	1,199
84	953	1,241	1,518	1,760	4,341	348	459	556	643	803	522	681	831	962	1,199
85	1,034	1,349	1,650	1,914	4,721	343	454	556	643	797	522	681	831	962	1,199

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 for Policies Issued Prior to 9/16/2002 - Year 3
Rates per $10 Daily Benefit

	Policy Form: LTQ11-336-MA-PA-601					**Rider: 11-SIP-PA-998**					**Rider: 11-CIP-PA-998**				
	Base Rates with No Inflation Protection					**Simple Inflation Protection Rider**					**Compound Inflation Protection Rider**				
Issue	**Benefit Period**					**Benefit Period**					**Benefit Period**				
Age	*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	39	46	51	148	39	48	58	72	100	155	198	242	285	386
40	34	42	49	56	158	39	53	63	72	106	159	208	251	290	396
41	37	44	51	59	164	43	58	72	82	116	164	213	266	304	412
42	39	46	56	64	174	43	53	72	87	127	169	222	271	314	428
43	42	49	59	68	190	48	68	82	92	132	174	232	280	324	438
44	44	54	64	71	201	53	68	87	101	143	179	237	290	338	454
45	46	56	66	76	217	58	77	97	111	153	188	246	304	353	470
46	49	61	71	83	227	63	77	101	116	164	193	251	314	358	486
47	51	64	76	88	243	68	92	111	126	180	203	266	324	377	507
48	56	68	83	95	264	72	97	116	135	190	208	275	333	387	518
49	59	73	88	103	280	77	101	126	145	206	217	285	348	401	539
50	64	78	95	110	301	87	111	135	155	222	217	290	353	406	544
51	64	81	95	110	306	87	111	140	159	222	227	290	358	416	555
52	68	86	105	120	327	92	121	145	174	238	227	295	358	416	560
53	73	93	112	130	354	101	130	159	184	254	237	304	372	430	576
54	81	100	122	139	386	106	140	169	203	269	242	319	387	449	592
55	86	110	132	152	412	116	150	184	217	296	251	324	401	464	618
56	93	117	144	164	449	126	164	198	237	317	261	338	411	483	634
57	100	130	156	178	486	135	174	213	251	338	271	348	425	498	655
58	110	139	169	196	528	145	188	232	266	359	275	362	445	512	676
59	120	152	183	213	570	155	203	251	290	391	285	372	459	527	697
60	125	161	196	225	607	164	213	261	304	401	290	377	459	536	702
61	137	176	213	247	660	174	227	280	324	433	300	387	478	551	724
62	149	191	232	269	718	184	246	300	348	459	304	401	493	565	745
63	161	208	254	293	782	198	261	319	372	491	319	416	503	585	766
64	176	227	276	320	850	213	275	343	396	523	329	425	522	604	787
65	193	249	303	349	930	227	295	367	425	560	338	440	541	628	819
66	220	286	347	403	1,067	256	333	411	474	623	367	478	590	677	882
67	242	313	381	440	1,162	266	353	435	507	660	372	488	604	701	908
68	264	340	415	481	1,268	280	377	464	536	702	382	507	623	720	935
69	286	371	455	528	1,384	300	396	488	565	739	396	522	638	739	956
70	313	408	499	579	1,516	314	416	512	594	776	406	532	652	759	982
71	359	469	577	670	1,748	353	464	570	662	866	440	575	705	817	1,062
72	393	513	631	733	1,912	362	483	594	691	903	445	585	720	836	1,083
73	428	560	689	799	2,086	377	503	619	725	940	449	594	730	855	1,099
74	464	609	750	872	2,271	396	522	648	754	977	459	604	744	865	1,114
75	496	648	797	929	2,403	396	527	652	754	982	449	594	730	846	1,088
76	574	753	929	1,083	2,804	435	580	715	836	1,088	478	633	783	908	1,172
77	628	826	1,019	1,190	3,079	445	594	739	865	1,120	478	638	788	913	1,172
78	684	904	1,119	1,307	3,375	464	614	759	889	1,157	483	638	788	913	1,178
79	748	990	1,227	1,435	3,702	396	527	652	768	993	483	633	788	918	1,172
80	821	1,088	1,351	1,584	4,082	406	536	667	783	1,019	483	638	788	918	1,178
81	894	1,188	1,481	1,738	4,479	406	546	677	797	1,030	483	633	783	908	1,162
82	975	1,300	1,620	1,906	4,906	411	546	681	802	1,040	474	623	773	894	1,141
83	1,063	1,417	1,772	2,087	5,371	411	551	686	802	1,040	464	614	759	879	1,114
84	1,158	1,547	1,938	2,285	5,878	411	551	686	807	1,040	454	599	734	855	1,083
85	1,261	1,689	2,116	2,500	6,433	406	546	681	807	1,040	445	580	715	831	1,046

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 for Policies Issued Prior to 9/16/2002 - Year 3
Rates per $10 Daily Benefit

	Policy Form: LTQ11-336-MA-PA-601					**Rider: 11-SIP-PA-998**					**Rider: 11-CIP-PA-998**				
	Base Rates with No Inflation Protection					**Simple Inflation Protection Rider**					**Compound Inflation Protection Rider**				
Issue	**Benefit Period**					**Benefit Period**					**Benefit Period**				
Age	*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	81	100	120	137	386	116	150	184	213	301	551	715	879	1,020	1,363
40	83	105	127	144	407	126	159	193	227	317	561	730	889	1,034	1,378
41	88	110	132	154	428	130	169	208	237	338	565	739	904	1,044	1,400
42	93	117	139	161	449	135	179	222	256	359	575	749	918	1,063	1,421
43	98	122	149	171	475	145	188	232	271	375	580	759	928	1,073	1,437
44	103	130	156	181	502	155	198	246	285	396	590	768	942	1,087	1,452
45	108	137	166	191	528	164	213	256	304	423	599	778	952	1,102	1,473
46	115	144	174	200	560	169	227	275	324	444	604	788	966	1,121	1,489
47	120	154	186	213	592	184	237	290	338	470	614	792	971	1,131	1,505
48	127	161	196	225	623	193	251	309	362	496	619	807	986	1,145	1,521
49	134	171	208	239	660	203	266	324	382	523	604	788	966	1,121	1,484
50	139	178	218	249	687	213	275	338	396	544	614	797	976	1,136	1,510
51	142	181	220	254	697	217	280	343	401	555	609	797	976	1,131	1,500
52	149	188	230	266	729	222	295	358	416	570	619	807	986	1,145	1,521
53	156	200	244	281	771	237	309	377	445	602	604	788	966	1,121	1,479
54	166	213	259	301	819	251	329	401	464	628	609	792	971	1,126	1,489
55	176	227	276	318	866	261	343	420	493	665	614	797	976	1,136	1,500
56	186	239	293	340	919	280	362	445	512	697	619	807	986	1,140	1,510
57	198	254	310	359	972	290	382	469	546	734	619	812	991	1,150	1,516
58	210	271	330	384	1,035	304	396	488	565	766	619	812	995	1,155	1,521
59	222	288	352	406	1,093	319	416	512	599	803	614	797	981	1,145	1,500
60	227	293	359	418	1,120	324	420	517	599	803	614	802	981	1,136	1,500
61	242	313	381	442	1,188	333	440	541	628	834	599	788	971	1,126	1,473
62	257	332	406	472	1,257	348	454	561	652	871	599	788	971	1,121	1,473
63	271	352	430	501	1,336	362	474	585	677	903	604	788	971	1,121	1,468
64	288	374	457	530	1,415	372	493	609	705	935	599	788	966	1,126	1,468
65	305	398	489	567	1,505	387	507	628	730	966	599	788	966	1,121	1,463
66	342	445	545	635	1,679	420	556	686	797	1,056	628	826	1,020	1,179	1,542
67	362	472	579	674	1,780	435	570	705	821	1,083	623	821	1,015	1,174	1,532
68	384	501	616	716	1,885	445	585	720	841	1,109	619	817	1,005	1,165	1,521
69	406	530	653	760	2,002	454	599	739	860	1,130	614	812	1,000	1,160	1,505
70	430	565	694	809	2,123	464	609	754	879	1,157	609	802	991	1,145	1,489
71	481	633	782	912	2,387	498	657	812	952	1,252	638	841	1,034	1,203	1,569
72	511	672	828	968	2,535	503	667	831	966	1,268	628	826	1,024	1,189	1,542
73	540	711	880	1,029	2,688	512	677	841	981	1,283	619	817	1,010	1,174	1,521
74	572	755	934	1,092	2,847	517	681	850	991	1,294	609	802	995	1,155	1,495
75	594	782	965	1,127	2,926	503	667	826	966	1,257	580	763	942	1,097	1,415
76	672	887	1,100	1,285	3,343	536	715	889	1,039	1,352	604	797	986	1,150	1,479
77	718	951	1,178	1,381	3,581	541	720	899	1,049	1,368	590	783	966	1,126	1,452
78	770	1,019	1,266	1,483	3,845	541	725	904	1,058	1,373	580	763	947	1,102	1,415
79	824	1,095	1,361	1,596	4,130	464	609	763	899	1,167	570	744	923	1,082	1,384
80	887	1,180	1,471	1,728	4,463	459	614	763	899	1,167	556	734	904	1,058	1,357
81	953	1,271	1,586	1,867	4,817	459	609	759	889	1,162	546	715	884	1,029	1,315
82	1,026	1,371	1,713	2,019	5,207	459	604	759	889	1,151	527	696	860	1,000	1,273
83	1,107	1,479	1,852	2,185	5,630	445	604	749	879	1,141	512	677	831	966	1,231
84	1,195	1,598	2,004	2,368	6,095	445	594	739	870	1,130	493	652	802	933	1,183
85	1,290	1,730	2,170	2,568	6,607	435	580	734	860	1,114	478	623	773	894	1,130

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 for Policies Issued Prior to 9/16/2002 - Year 3
Rates per $10 Daily Benefit

	Policy Form: LTQ11-336-MA-PA-601					**Rider: 11-SIP-PA-998**					**Rider: 11-CIP-PA-998**				
	Base Rates with No Inflation Protection					**Simple Inflation Protection Rider**					**Compound Inflation Protection Rider**				
Issue	**Benefit Period**					**Benefit Period**					**Benefit Period**				
Age	*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	49	61	71	83	232	68	87	111	126	180	329	425	522	604	803
40	51	64	76	88	243	72	97	116	135	190	333	435	532	609	819
41	54	66	81	93	259	77	101	121	140	201	338	440	536	623	829
42	56	71	86	98	269	82	106	130	150	217	343	445	546	633	845
43	59	76	90	103	285	87	111	135	164	227	353	449	536	643	856
44	64	78	95	110	301	92	121	145	169	243	353	464	561	652	871
45	66	83	100	115	322	97	130	155	184	248	358	469	570	662	877
46	71	88	108	122	338	101	135	164	193	269	362	474	580	672	893
47	73	93	112	130	359	111	145	179	208	285	372	483	590	681	903
48	78	100	120	139	380	116	150	188	217	301	377	488	599	691	919
49	83	105	127	147	401	126	164	198	232	322	377	493	599	696	919
50	88	112	134	156	428	130	169	213	242	333	372	483	594	681	908
51	88	112	134	156	428	130	169	213	246	338	382	498	614	705	935
52	93	120	144	166	454	140	179	222	261	354	377	488	599	691	919
53	100	127	154	178	486	145	193	237	271	370	377	488	599	691	914
54	105	134	164	191	518	159	208	251	290	391	382	498	609	701	924
55	112	144	176	203	549	169	217	266	309	417	387	503	614	715	940
56	120	154	188	218	586	179	232	280	324	438	391	512	623	720	951
57	130	166	200	232	628	184	242	300	348	465	396	517	633	734	961
58	137	176	215	249	671	198	261	314	367	491	401	527	643	739	972
59	147	191	230	266	718	208	271	338	387	518	406	527	652	754	982
60	154	198	242	279	750	213	280	343	401	528	401	522	638	744	972
61	166	213	259	301	803	222	295	362	420	560	401	532	648	749	982
62	178	230	279	323	861	237	309	382	445	586	406	536	657	759	993
63	191	247	301	347	924	251	324	401	469	618	416	541	662	768	1,003
64	205	264	323	374	993	261	348	425	493	650	420	551	672	778	1,014
65	220	286	349	406	1,072	275	362	445	512	676	425	556	681	788	1,025
66	249	325	396	459	1,209	304	396	493	570	750	454	590	725	841	1,099
67	269	349	428	496	1,304	319	416	512	594	787	459	599	734	850	1,109
68	291	379	464	538	1,410	333	435	536	623	819	464	604	744	860	1,120
69	313	408	501	582	1,526	348	454	561	652	850	469	614	754	875	1,130
70	340	442	545	631	1,653	358	474	580	681	887	474	623	759	884	1,141
71	386	506	623	723	1,891	396	522	638	749	977	503	662	812	942	1,220
72	418	547	674	787	2,049	411	541	667	773	1,009	507	667	821	947	1,231
73	452	594	733	853	2,218	420	556	686	802	1,046	507	672	821	957	1,241
74	489	643	792	924	2,403	435	575	710	826	1,077	512	672	831	962	1,241
75	518	682	838	978	2,530	435	570	710	826	1,077	498	652	812	937	1,209
76	599	787	973	1,134	2,942	469	623	773	908	1,172	527	696	855	1,000	1,283
77	650	858	1,061	1,241	3,211	483	643	797	928	1,209	527	696	860	995	1,283
78	706	934	1,158	1,356	3,507	498	662	817	957	1,236	527	696	855	991	1,273
79	770	1,019	1,266	1,483	3,829	420	565	701	821	1,062	522	686	846	986	1,262
80	838	1,114	1,386	1,625	4,193	430	570	710	836	1,077	517	681	841	981	1,252
81	912	1,212	1,513	1,777	4,579	435	575	715	841	1,088	512	677	831	966	1,236
82	992	1,322	1,650	1,940	5,001	430	575	725	850	1,093	503	662	817	952	1,209
83	1,078	1,437	1,799	2,119	5,456	430	580	720	850	1,093	488	648	797	928	1,178
84	1,171	1,564	1,960	2,312	5,947	425	570	715	846	1,093	478	633	778	904	1,146
85	1,271	1,701	2,133	2,522	6,485	425	570	710	846	1,088	464	609	754	875	1,104

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 for Policies Issued Prior to 9/16/2002 - Year 3
Rates per $10 Daily Benefit

	Policy Form: FLQ11-336-MA-PA-601					**Rider: 11-SIP-PA-998**					**Rider: 11-CIP-PA-998**				
	Base Rates with No Inflation Protection					**Simple Inflation Protection Rider**					**Compound Inflation Protection Rider**				
Issue	**Benefit Period**					**Benefit Period**					**Benefit Period**				
Age	*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	29	34	42	46	132	34	43	53	63	90	140	179	217	256	349
40	32	37	44	51	143	34	48	58	63	95	140	188	227	261	359
41	34	39	46	54	148	39	53	63	72	106	145	193	237	271	370
42	34	42	51	56	158	43	48	63	82	111	155	203	242	285	386
43	37	44	54	61	169	43	63	72	82	121	159	208	251	295	396
44	39	49	56	64	180	48	58	82	92	132	164	213	261	304	412
45	42	51	59	68	195	53	68	87	101	137	169	222	275	319	423
46	44	56	64	76	206	58	68	92	101	148	174	222	285	319	438
47	46	56	68	78	217	63	87	101	116	164	184	242	290	343	459
48	51	61	76	86	238	63	87	101	121	169	184	251	300	348	465
49	54	66	78	93	254	68	92	116	130	185	193	256	314	362	486
50	56	71	86	100	269	82	101	121	135	201	198	261	319	362	491
51	56	73	86	100	275	82	97	126	140	201	208	261	324	372	502
52	61	78	95	108	296	82	106	130	159	211	208	261	319	377	502
53	66	83	100	117	317	92	121	145	164	232	213	275	338	387	518
54	73	90	110	125	349	97	126	155	184	243	217	285	348	406	533
55	78	100	120	137	370	101	130	164	193	269	222	290	358	416	560
56	83	105	130	147	407	116	150	179	213	285	237	304	372	435	570
57	90	117	142	161	438	121	155	188	227	301	242	314	382	445	586
58	100	125	152	176	475	130	169	208	242	322	246	329	401	459	607
59	108	137	166	191	512	140	184	222	261	354	256	333	411	474	628
60	112	144	176	203	549	150	193	237	275	359	261	343	416	483	628
61	122	159	191	222	597	159	203	256	290	386	271	348	430	498	650
62	134	171	210	242	644	164	222	266	314	417	275	362	440	507	671
63	144	188	230	264	702	179	232	285	333	444	290	372	449	527	692
64	159	205	249	288	766	188	246	309	358	470	295	382	469	541	708
65	174	225	274	315	834	203	266	329	382	507	304	396	483	565	739
66	198	257	313	364	961	232	300	367	425	560	329	430	532	609	792
67	218	281	342	396	1,046	242	319	391	459	597	333	440	546	633	819
68	237	305	374	433	1,141	251	338	416	483	634	343	459	561	648	840
69	257	335	408	474	1,246	271	358	440	512	665	358	469	575	667	861
70	281	367	450	521	1,363	285	377	459	536	702	367	478	585	686	887
71	323	423	518	604	1,574	319	416	517	594	782	396	517	638	734	956
72	354	462	567	660	1,722	324	435	536	623	813	401	527	648	754	972
73	386	503	621	718	1,880	338	454	556	652	845	401	536	657	773	988
74	418	547	674	784	2,044	358	469	585	681	882	416	546	672	778	1,003
75	447	584	716	836	2,165	358	474	590	677	882	401	532	657	763	977
76	518	677	836	975	2,524	391	522	643	749	977	430	570	705	817	1,056
77	565	743	916	1,070	2,773	401	536	667	778	1,009	430	575	710	821	1,056
78	616	814	1,007	1,178	3,037	416	551	686	797	1,040	435	575	710	821	1,062
79	672	892	1,105	1,290	3,333	358	474	585	691	893	435	565	710	826	1,056
80	738	980	1,217	1,425	3,676	367	478	599	705	914	435	570	705	826	1,056
81	804	1,068	1,332	1,564	4,030	367	493	609	715	930	435	570	705	817	1,046
82	877	1,171	1,459	1,716	4,415	372	493	614	720	935	425	561	696	807	1,030
83	958	1,276	1,596	1,879	4,832	367	498	614	720	940	416	551	681	788	1,003
84	1,044	1,393	1,745	2,058	5,292	367	493	619	725	935	406	536	662	768	972
85	1,134	1,520	1,904	2,251	5,788	367	493	614	725	940	401	522	648	749	940

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 for Policies Issued Prior to 9/16/2002 - Year 3
Rates per $10 Daily Benefit

	Policy Form: FLQ11-336-MA-PA-601					**Rider: 11-SIP-PA-998**					**Rider: 11-CIP-PA-998**				
	Base Rates with No Inflation Protection					**Simple Inflation Protection Rider**					**Compound Inflation Protection Rider**				
Issue	**Benefit Period**					**Benefit Period**					**Benefit Period**				
Age	*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	44	56	64	76	211	63	77	101	111	158	295	382	469	541	718
40	46	56	68	78	217	63	87	106	126	174	300	391	478	551	739
41	49	59	73	83	232	68	92	106	126	180	304	396	483	561	745
42	51	64	78	88	243	72	97	116	135	195	309	401	488	570	761
43	54	68	81	93	259	77	101	126	145	201	314	406	483	580	766
44	56	71	86	100	269	87	106	130	150	222	319	416	507	585	787
45	59	76	90	103	290	87	116	140	169	222	324	420	512	599	787
46	64	78	98	110	306	92	126	145	174	243	329	430	522	604	803
47	66	83	100	117	322	101	130	164	184	259	333	435	532	614	813
48	71	90	108	125	343	101	135	169	198	269	338	440	541	623	824
49	76	95	115	132	359	111	145	179	208	290	338	445	536	628	829
50	78	100	122	142	386	121	155	188	217	301	338	435	532	614	819
51	78	100	122	142	386	121	155	188	222	306	348	449	551	633	840
52	83	108	130	149	407	126	159	203	237	322	338	440	541	623	829
53	90	115	139	161	438	130	174	213	242	333	338	440	536	619	824
54	95	122	147	171	465	140	184	227	261	354	343	445	551	633	834
55	100	130	159	183	496	155	198	237	275	375	348	454	551	643	845
56	108	139	169	196	528	159	208	256	290	396	353	459	561	648	856
57	117	149	181	210	565	164	217	271	309	417	358	469	570	657	866
58	122	159	193	225	602	179	232	285	329	444	362	474	580	667	877
59	132	171	208	239	644	188	246	304	348	470	367	474	585	681	887
60	139	178	218	252	676	188	251	309	358	475	358	469	575	667	871
61	149	191	232	271	724	203	266	329	377	502	362	478	585	672	882
62	161	208	252	291	776	213	275	343	401	528	362	483	590	681	893
63	171	222	271	313	834	227	290	358	420	555	377	488	594	691	903
64	186	237	291	337	893	232	314	382	445	586	377	498	604	701	914
65	198	257	315	364	966	246	329	401	464	607	382	503	614	710	919
66	225	293	357	413	1,088	275	358	445	512	676	406	532	652	759	988
67	242	315	386	447	1,172	285	372	459	532	708	416	536	657	763	998
68	261	342	418	484	1,268	300	391	483	561	739	420	541	672	773	1,009
69	281	367	452	523	1,373	314	411	503	590	766	425	556	677	788	1,019
70	305	398	491	567	1,489	324	425	522	614	797	425	561	681	797	1,025
71	347	455	562	650	1,701	358	474	570	677	882	454	599	730	850	1,099
72	376	494	606	709	1,843	367	483	604	696	908	454	599	739	850	1,109
73	408	535	660	767	1,996	377	498	619	725	940	454	604	739	860	1,120
74	440	579	714	831	2,165	391	517	638	744	966	459	604	744	865	1,114
75	467	613	755	880	2,276	391	512	638	744	972	449	590	730	846	1,088
76	540	709	875	1,022	2,646	420	561	696	817	1,056	474	623	773	899	1,157
77	584	772	956	1,117	2,889	435	580	715	836	1,088	478	628	773	899	1,157
78	635	841	1,044	1,222	3,158	449	594	734	860	1,109	474	623	768	889	1,146
79	694	916	1,139	1,334	3,449	377	512	633	739	951	469	619	763	889	1,135
80	755	1,002	1,246	1,464	3,776	387	517	643	749	966	464	614	759	879	1,125
81	821	1,090	1,361	1,598	4,119	391	522	643	759	982	459	609	749	870	1,114
82	892	1,190	1,486	1,747	4,500	391	517	652	763	988	454	594	734	855	1,088
83	970	1,293	1,618	1,906	4,912	387	522	652	768	982	440	585	720	836	1,056
84	1,053	1,408	1,764	2,080	5,350	382	512	643	763	988	430	570	701	817	1,035
85	1,144	1,530	1,921	2,270	5,836	382	517	638	759	982	416	551	677	788	993

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 for Policies Issued Prior to 9/16/2002 - Year 3
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				
	Benefit Period					Benefit Period					Benefit Period				
Issue Age	*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	34	39	42	46	127	29	39	43	53	74	116	140	159	184	238
40	34	39	44	49	137	34	43	48	53	74	126	150	164	188	238
41	37	42	46	51	143	34	43	48	58	79	126	155	169	193	243
42	37	44	49	54	148	39	48	53	63	85	135	155	174	198	254
43	39	46	51	56	153	43	48	53	63	90	135	159	179	203	259
44	42	49	54	59	158	43	53	58	68	95	140	164	184	213	269
45	44	51	56	64	169	43	53	63	68	95	140	169	188	213	269
46	44	54	59	66	174	53	58	68	77	106	150	174	198	222	280
47	46	56	61	68	185	53	63	72	82	106	155	179	203	227	285
48	49	59	64	73	190	58	68	77	82	116	159	188	213	232	296
49	54	61	68	76	201	58	72	82	92	121	159	193	217	242	301
50	56	64	71	81	211	63	77	87	97	121	159	193	217	237	296
51	56	66	73	81	211	63	77	82	97	127	164	198	217	246	306
52	59	68	76	86	222	68	82	92	101	132	164	198	222	246	301
53	61	73	81	90	232	72	87	97	111	137	174	203	227	251	312
54	66	78	86	95	243	77	92	106	116	148	179	208	237	261	322
55	71	83	90	103	259	82	97	111	121	158	184	217	242	266	327
56	76	88	98	110	275	87	106	116	130	164	188	222	246	275	338
57	81	95	105	117	290	92	111	126	140	174	193	227	251	280	343
58	86	100	112	125	312	101	121	130	150	185	203	237	261	290	354
59	93	108	120	132	333	106	130	140	159	190	203	246	271	304	359
60	95	112	125	139	343	111	130	145	159	201	208	246	271	300	359
61	103	122	134	149	364	116	135	155	169	211	213	251	275	309	370
62	110	130	144	159	391	126	150	159	184	222	222	261	285	319	375
63	120	139	154	171	417	130	155	174	193	232	222	266	290	324	386
64	127	149	166	183	444	140	164	179	203	243	232	275	300	333	396
65	139	161	178	198	475	145	174	193	213	259	237	285	309	343	407
66	156	183	203	225	539	164	193	213	232	280	261	304	333	367	433
67	169	198	218	242	576	174	203	222	246	296	266	309	343	377	444
68	183	213	235	259	618	179	213	232	261	306	271	319	348	387	454
69	198	230	252	279	665	188	222	246	271	317	275	329	358	396	459
70	213	249	271	301	713	198	227	256	280	327	285	329	367	401	465
71	242	281	308	342	803	217	256	280	304	359	304	358	391	430	502
72	259	303	332	367	856	227	261	285	319	370	314	362	396	440	507
73	279	325	357	393	914	232	271	295	324	380	314	367	401	445	512
74	298	347	381	420	972	242	280	304	333	386	319	372	406	445	512
75	320	371	403	445	1,019	237	275	304	329	380	314	362	396	435	502
76	364	423	459	506	1,157	256	300	329	358	412	338	387	425	464	533
77	393	455	494	543	1,236	261	304	333	367	417	338	391	430	469	533
78	423	489	530	582	1,326	271	309	338	372	417	338	391	430	469	528
79	455	525	569	626	1,415	227	266	290	314	354	343	396	430	469	528
80	491	567	616	672	1,516	232	266	285	319	354	348	401	430	474	533
81	530	611	660	723	1,621	232	266	290	309	354	348	401	435	469	528
82	574	657	711	775	1,738	227	266	285	314	354	343	401	430	469	528
83	621	711	765	833	1,864	227	266	285	309	349	343	396	430	464	518
84	670	767	824	894	1,996	232	261	285	304	343	343	391	425	459	518
85	723	826	885	960	2,139	227	261	280	300	333	343	391	420	454	507

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 for Policies Issued Prior to 9/16/2002 - Year 3
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				
	Benefit Period					Benefit Period					Benefit Period				
Issue Age	*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	76	88	98	110	296	87	111	126	140	195	406	488	541	604	761
40	78	90	100	112	306	97	116	135	155	206	411	493	551	619	771
41	81	95	105	117	317	101	121	140	159	217	420	498	556	623	776
42	83	98	110	122	333	106	130	145	164	217	425	507	561	628	776
43	88	103	115	127	343	111	135	150	174	227	425	507	565	633	787
44	90	108	120	134	354	116	140	159	179	243	430	512	570	633	792
45	95	110	125	139	370	121	150	164	188	248	435	522	575	643	792
46	98	115	130	144	380	130	155	174	198	259	440	522	580	648	797
47	103	120	134	149	396	135	164	184	208	269	440	527	585	652	803
48	108	125	139	156	412	140	174	193	217	275	435	522	575	638	771
49	110	132	147	164	423	150	179	198	222	290	440	517	575	643	792
50	112	134	149	166	428	155	179	203	227	290	440	517	570	638	771
51	117	137	152	171	444	155	188	208	232	296	440	522	580	648	792
52	117	139	154	174	444	159	188	213	237	301	445	522	580	643	776
53	125	147	161	181	459	164	198	222	251	317	435	522	580	643	792
54	130	154	169	191	481	174	208	232	256	322	430	507	565	628	761
55	137	161	178	198	502	179	213	242	271	333	430	512	565	633	755
56	142	169	186	208	523	193	227	251	280	343	435	512	570	633	755
57	149	176	196	218	544	198	237	261	290	354	435	517	565	633	755
58	156	186	205	227	565	208	242	271	304	370	440	512	565	633	755
59	164	193	215	239	586	213	256	280	309	386	425	503	551	609	724
60	166	196	218	242	592	213	251	275	309	375	435	512	561	623	750
61	174	205	227	252	618	222	261	285	324	386	420	498	541	604	713
62	183	215	237	264	644	227	271	300	329	396	420	493	541	604	708
63	193	225	249	276	671	232	275	304	338	407	416	493	541	599	708
64	203	237	261	288	697	237	280	309	348	417	416	488	536	594	702
65	213	249	274	303	729	246	290	319	358	428	416	488	536	594	697
66	235	276	303	335	803	266	309	343	382	454	435	507	561	619	724
67	247	288	318	352	840	271	319	348	387	459	430	507	551	609	713
68	259	303	332	367	871	275	324	358	396	465	425	498	546	609	708
69	271	318	347	386	908	280	329	362	396	470	420	493	541	594	697
70	283	332	364	403	951	285	333	367	401	470	420	488	536	590	681
71	315	369	403	445	1,046	300	353	387	430	496	435	507	556	619	708
72	330	386	423	467	1,088	304	353	387	430	496	430	503	546	604	697
73	345	403	440	486	1,130	304	358	391	430	496	425	493	541	594	681
74	362	420	459	508	1,172	304	358	391	425	491	416	488	532	580	665
75	376	435	474	523	1,199	295	343	377	411	475	396	464	503	551	628
76	418	486	528	582	1,331	314	362	401	435	496	416	478	527	575	650
77	442	511	557	611	1,394	314	367	396	435	496	406	474	512	565	639
78	467	540	587	645	1,463	314	362	396	430	491	401	464	507	551	623
79	494	572	621	679	1,537	261	304	329	358	407	396	454	493	541	613
80	525	606	657	718	1,621	261	300	324	358	401	391	454	488	536	602
81	560	645	699	762	1,711	256	295	314	348	391	387	445	478	522	592
82	599	687	743	809	1,811	251	295	314	343	391	377	440	469	512	576
83	640	733	792	860	1,928	251	290	309	338	375	372	435	459	503	560
84	687	784	843	916	2,044	242	285	304	333	370	367	425	459	498	555
85	736	841	902	978	2,176	242	275	295	324	354	367	416	445	483	539

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 for Policies Issued Prior to 9/16/2002 - Year 3
Rates per $10 Daily Benefit

	Policy Form: HTQ11-338-MA-PA-601					**Rider: 11-SIP-PA-998**					**Rider: 11-CIP-PA-998**				
	Base Rates with No Inflation Protection					**Simple Inflation Protection Rider**					**Compound Inflation Protection Rider**				
Issue	**Benefit Period**					**Benefit Period**					**Benefit Period**				
Age	*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	46	54	59	66	180	53	68	77	87	116	242	290	324	362	454
40	46	56	61	68	185	58	68	82	92	127	246	295	329	367	459
41	49	59	64	73	195	63	72	87	92	127	251	295	333	367	459
42	51	61	66	76	201	63	77	87	97	132	251	300	338	372	470
43	54	64	71	78	211	68	82	92	106	137	256	304	338	382	470
44	56	66	73	81	217	68	82	97	111	148	256	309	343	387	475
45	59	68	76	86	227	72	87	101	111	148	261	314	348	387	481
46	61	71	78	88	238	77	97	106	121	153	266	319	353	391	481
47	64	76	83	93	243	82	97	111	126	164	266	319	353	396	486
48	66	78	86	98	254	87	101	121	130	169	271	324	362	396	486
49	68	81	90	103	264	92	111	121	135	180	271	319	353	391	481
50	71	83	93	105	269	97	116	126	140	180	271	324	358	396	486
51	73	86	95	108	275	97	116	130	145	185	271	324	358	396	486
52	76	88	98	110	280	97	121	135	150	190	271	324	362	401	491
53	78	93	103	115	296	106	126	140	159	195	271	319	353	396	481
54	83	98	110	122	312	111	130	145	164	201	271	324	353	396	475
55	88	103	115	130	322	116	140	155	169	217	275	329	358	396	486
56	93	110	122	134	338	121	145	159	184	227	280	329	362	406	486
57	98	115	127	144	354	130	155	169	188	232	280	333	367	406	491
58	105	122	134	152	375	130	159	179	198	243	280	338	372	411	491
59	110	130	144	159	396	140	169	184	208	248	285	338	372	416	491
60	115	134	147	164	401	140	169	188	213	259	280	333	367	406	486
61	120	142	156	174	428	150	179	198	217	264	285	338	367	411	486
62	127	152	166	186	449	159	184	203	227	275	290	338	372	411	491
63	137	159	176	196	475	159	193	213	237	285	290	343	377	416	491
64	144	171	188	208	502	169	198	217	246	296	295	343	377	420	496
65	154	181	200	222	533	179	213	227	256	306	300	353	382	420	496
66	174	203	222	247	592	193	227	251	280	333	314	372	406	449	528
67	186	218	239	264	628	198	237	256	290	343	319	372	406	454	533
68	198	232	254	281	671	208	246	271	300	349	324	377	416	459	533
69	213	247	271	301	713	213	256	280	309	359	324	382	416	459	533
70	227	264	291	323	761	222	261	285	314	370	329	387	420	459	533
71	257	298	327	362	850	242	285	309	343	396	348	406	445	488	565
72	274	320	349	386	903	246	290	319	353	407	348	406	445	493	565
73	291	340	371	411	956	256	300	329	362	412	353	411	449	493	565
74	310	362	396	437	1,009	261	304	333	367	423	353	411	449	493	565
75	330	384	418	459	1,056	261	300	329	362	412	348	401	435	478	549
76	376	435	474	521	1,194	275	324	353	387	438	362	425	459	507	576
77	403	467	508	557	1,273	280	329	358	391	444	362	425	459	507	570
78	433	501	543	596	1,352	285	329	362	396	449	367	420	459	503	570
79	464	535	582	638	1,442	242	280	304	333	380	362	425	459	498	565
80	499	577	626	684	1,542	242	280	304	329	375	367	420	454	498	560
81	538	618	670	733	1,642	246	280	304	329	375	362	420	454	493	560
82	579	665	718	784	1,759	242	280	300	329	364	362	420	449	488	549
83	623	716	772	841	1,880	242	275	295	324	359	362	416	445	483	544
84	672	770	828	899	2,007	237	275	290	324	354	362	416	440	483	539
85	726	828	890	963	2,144	237	271	285	314	349	358	411	435	474	528

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 for Policies Issued On or After 9/16/2002 - Year 1
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				
	Benefit Period					Benefit Period					Benefit Period				
Issue Age	*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	29	32	37	67	16	19	25	29	45	79	102	127	143	206
40	24	29	34	39	71	19	25	29	32	49	86	108	130	149	214
41	27	32	37	42	75	19	25	32	35	52	86	111	137	156	221
42	29	34	39	44	82	19	25	32	38	56	89	114	140	162	229
43	29	37	42	46	86	22	29	35	41	64	95	121	146	168	240
44	32	39	44	49	94	25	32	38	44	67	99	124	153	175	247
45	34	42	46	54	101	25	32	44	48	71	102	130	159	181	255
46	37	44	51	56	109	29	38	44	54	75	105	133	162	191	262
47	39	46	54	61	116	32	41	51	57	82	108	140	172	197	274
48	42	49	59	66	124	32	44	54	60	90	111	146	175	203	285
49	44	54	64	71	135	38	48	57	67	97	118	153	181	210	292
50	46	56	68	76	142	41	54	64	73	109	121	156	184	216	300
51	46	59	68	78	146	41	51	64	73	105	124	156	191	216	303
52	51	64	73	83	157	44	57	70	83	116	124	159	194	222	307
53	54	68	81	90	172	51	60	76	89	124	130	165	200	232	318
54	59	73	88	100	184	54	67	79	92	135	133	172	207	238	333
55	64	81	95	108	202	57	73	89	102	146	140	178	216	248	345
56	68	86	103	117	217	64	79	99	111	157	146	188	226	257	360
57	76	95	112	130	240	67	86	105	118	169	149	191	232	267	367
58	83	103	122	139	259	70	92	114	130	184	153	200	242	280	386
59	90	112	134	154	285	76	102	121	140	195	159	207	251	289	397
60	95	120	144	164	300	83	105	127	146	210	162	210	254	292	405
61	103	132	156	178	330	89	111	140	159	221	168	216	264	305	416
62	112	144	171	196	360	95	121	149	172	240	175	226	273	315	431
63	125	156	188	215	393	102	133	159	184	255	181	235	283	327	446
64	134	171	205	237	431	111	143	172	197	270	191	245	296	337	461
65	149	191	227	262	472	118	149	184	210	292	197	251	308	350	483
66	171	218	264	301	547	133	172	207	238	326	213	277	334	385	521
67	188	240	289	330	596	140	181	219	254	348	219	286	346	397	543
68	205	264	318	364	656	149	191	232	267	367	229	296	356	410	558
69	225	289	347	399	716	159	203	248	286	390	238	305	372	426	577
70	247	318	384	440	787	168	216	261	299	408	245	315	381	439	596
71	286	369	445	511	910	188	238	292	334	457	267	343	416	477	648
72	313	403	489	560	1,000	194	251	305	353	476	273	353	426	493	663
73	342	443	533	614	1,094	203	261	321	369	498	280	359	439	505	682
74	374	482	584	670	1,191	210	273	334	385	521	286	369	448	518	697
75	403	516	623	716	1,266	210	277	337	385	521	280	366	445	509	689
76	467	601	729	836	1,480	235	305	369	426	573	305	397	480	553	746
77	511	660	800	919	1,622	242	311	381	439	596	311	400	489	563	761
78	560	724	878	1,010	1,780	248	321	391	451	611	311	407	496	572	768
79	611	792	961	1,108	1,948	213	277	337	388	525	318	410	502	578	779
80	670	868	1,056	1,218	2,143	219	283	343	400	536	324	423	512	591	794
81	731	951	1,156	1,335	2,345	219	283	350	400	540	327	423	515	598	802
82	797	1,037	1,264	1,460	2,563	222	289	350	407	540	327	426	518	601	806
83	868	1,130	1,379	1,594	2,795	219	289	350	407	543	327	429	521	604	809
84	946	1,232	1,504	1,741	3,050	219	286	353	407	543	327	429	524	607	813
85	1,029	1,342	1,641	1,902	3,327	219	283	346	400	540	327	429	524	607	817

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 for Policies Issued On or After 9/16/2002 - Year 1
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				
	Benefit Period					Benefit Period					Benefit Period				
Issue Age	*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	73	86	95	180	54	67	83	95	139	299	381	461	531	742
40	61	76	88	100	187	57	73	89	102	150	302	388	470	540	757
41	66	81	95	108	199	60	76	92	108	161	305	394	477	547	768
42	68	86	100	112	210	64	83	99	118	169	311	400	483	559	779
43	73	90	105	120	225	67	86	108	124	180	315	407	493	566	787
44	76	95	112	127	236	73	92	111	130	191	321	413	499	572	802
45	81	100	117	134	251	76	99	121	140	202	324	420	509	582	809
46	86	105	125	142	266	79	105	127	149	214	327	426	515	591	821
47	90	110	132	152	281	86	114	137	156	229	334	432	521	598	832
48	95	117	139	159	300	92	121	146	168	240	337	439	531	607	843
49	100	125	149	169	315	99	127	153	181	259	331	429	518	598	828
50	103	130	156	178	330	105	133	162	188	270	340	435	524	604	839
51	105	132	156	181	337	105	137	165	188	270	337	435	528	604	836
52	110	139	166	188	352	111	140	172	200	281	340	439	531	613	847
53	117	147	176	200	375	114	153	181	213	300	334	432	521	601	828
54	125	156	188	215	397	121	159	194	222	318	337	435	528	607	839
55	132	166	200	230	423	130	168	203	235	333	340	442	531	610	847
56	139	178	213	245	450	140	178	216	248	352	343	442	537	617	854
57	149	188	227	259	480	146	191	229	264	371	346	448	544	626	862
58	159	200	242	276	513	153	200	242	280	386	350	451	547	629	866
59	169	215	257	296	543	162	207	254	292	408	346	448	547	626	858
60	174	220	264	303	558	162	213	257	296	412	346	448	544	623	858
61	183	235	284	325	596	172	222	267	308	431	343	445	537	617	847
62	196	249	301	347	633	178	232	283	321	450	346	448	540	620	851
63	208	267	323	369	674	188	242	292	337	465	346	448	540	623	854
64	222	284	342	394	716	194	251	305	350	487	346	448	544	626	854
65	237	303	367	421	764	200	261	318	366	502	350	451	547	629	858
66	267	342	413	474	858	219	283	346	400	551	369	477	578	664	907
67	284	364	440	506	914	226	292	356	410	562	366	477	578	664	903
68	301	386	469	538	970	232	302	366	423	577	369	477	575	664	903
69	320	413	499	575	1,030	238	308	378	432	592	366	474	575	661	903
70	340	440	533	611	1,098	245	315	385	445	603	366	474	572	661	895
71	384	496	601	692	1,236	264	343	416	480	656	385	499	607	699	952
72	408	528	641	738	1,315	267	350	423	489	667	381	496	604	693	944
73	435	562	682	785	1,401	270	353	429	496	674	378	493	601	693	937
74	460	597	724	836	1,487	277	359	435	502	682	378	489	598	683	925
75	482	621	753	866	1,532	267	350	423	489	663	359	467	569	658	888
76	548	707	858	988	1,754	286	375	458	528	712	378	496	604	696	937
77	584	758	922	1,061	1,877	289	378	458	531	719	378	489	594	690	929
78	626	812	988	1,139	2,012	292	381	464	537	723	375	486	591	683	922
79	672	873	1,061	1,225	2,162	245	321	394	455	611	369	480	588	680	914
80	724	941	1,147	1,325	2,331	245	321	391	451	611	369	477	585	674	910
81	780	1,012	1,235	1,428	2,510	245	321	391	451	607	362	474	578	671	899
82	839	1,093	1,333	1,543	2,709	242	315	388	448	599	359	467	575	661	892
83	902	1,176	1,438	1,665	2,919	238	315	381	442	596	359	467	569	658	884
84	973	1,269	1,553	1,800	3,151	235	308	378	439	588	356	464	566	652	880
85	1,051	1,372	1,680	1,946	3,410	232	305	372	432	581	350	458	559	648	869

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 for Policies Issued On or After 9/16/2002 - Year 1
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				
	Benefit Period					Benefit Period					Benefit Period				
Issue Age	*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	37	44	51	56	109	32	41	48	57	82	175	226	273	315	438
40	37	46	54	61	112	35	41	54	60	90	181	229	280	321	446
41	39	49	56	64	120	38	44	57	67	94	184	235	286	327	453
42	42	51	61	68	127	38	48	57	70	101	184	238	286	331	461
43	44	54	64	73	135	41	54	64	73	109	188	245	292	337	468
44	46	56	68	76	142	44	57	67	79	116	191	248	299	343	480
45	49	61	71	81	154	48	60	73	86	120	194	251	305	350	483
46	51	64	76	86	161	51	64	76	89	127	200	257	308	356	491
47	54	68	81	90	172	54	67	83	95	135	203	261	315	362	498
48	59	73	86	98	184	54	70	89	102	142	203	264	321	366	506
49	61	76	90	103	195	60	79	95	111	154	207	267	321	372	510
50	66	81	98	110	206	64	83	99	118	165	203	264	315	366	506
51	66	81	98	110	206	64	83	99	118	165	210	273	327	378	521
52	68	88	103	117	221	70	86	108	124	172	207	264	324	372	510
53	73	93	110	127	236	73	92	114	130	184	210	267	324	372	513
54	78	100	117	134	251	79	99	124	140	199	213	270	331	381	521
55	83	105	127	144	270	83	108	130	149	210	216	280	334	385	528
56	90	115	137	156	289	86	111	137	159	221	219	280	340	391	540
57	98	122	147	169	311	92	121	146	168	236	219	286	346	397	547
58	103	132	156	181	333	102	127	156	178	247	226	289	353	404	555
59	112	142	169	193	356	105	137	165	191	266	229	296	359	413	566
60	117	149	178	203	375	108	140	168	197	274	226	292	353	407	558
61	125	159	193	220	405	118	149	178	207	285	232	299	359	413	566
62	134	174	208	237	435	124	156	191	219	303	235	302	366	420	573
63	147	186	225	257	468	127	165	200	232	318	238	308	372	426	585
64	156	200	242	279	506	137	178	213	245	337	245	315	378	432	592
65	171	218	262	301	547	143	188	226	257	352	248	321	388	445	603
66	193	249	301	345	622	159	203	248	283	390	264	340	410	474	644
67	210	269	325	374	671	165	216	261	299	412	270	346	420	480	659
68	227	293	352	406	727	175	222	273	311	431	273	353	429	489	667
69	247	318	384	440	791	181	235	286	327	446	280	359	435	499	678
70	269	345	418	479	858	191	248	299	343	465	283	366	442	509	689
71	308	396	479	553	985	210	270	331	375	513	302	394	477	547	742
72	335	430	523	599	1,072	216	283	340	394	532	308	400	483	559	753
73	364	469	567	653	1,162	222	289	356	407	551	311	404	493	566	764
74	394	509	616	709	1,259	232	302	366	420	570	315	410	499	572	776
75	421	543	655	753	1,334	232	299	366	420	566	311	400	489	563	757
76	487	628	760	875	1,547	251	327	400	461	622	334	432	524	604	817
77	531	685	831	956	1,690	257	337	410	474	637	334	435	531	610	821
78	577	746	907	1,044	1,840	264	346	420	486	656	337	442	534	617	832
79	628	814	990	1,139	2,008	226	296	359	416	558	340	442	537	623	836
80	685	888	1,081	1,247	2,196	229	302	369	423	566	343	448	544	629	843
81	746	968	1,179	1,362	2,394	229	302	369	426	570	343	445	547	629	847
82	809	1,054	1,284	1,484	2,604	232	299	369	426	577	343	448	547	633	851
83	878	1,144	1,396	1,616	2,833	232	302	369	426	573	343	448	547	633	851
84	954	1,242	1,518	1,760	3,080	229	302	366	423	570	343	448	547	633	851
85	1,034	1,350	1,650	1,914	3,350	226	299	366	423	566	343	448	547	633	851

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 for Policies Issued On or After 9/16/2002 - Year 1
Rates per $10 Daily Benefit

	Policy Form: LTQ11-336-MA-PA-601					**Rider: 11-SIP-PA-998**					**Rider: 11-CIP-PA-998**				
	Base Rates with No Inflation Protection					**Simple Inflation Protection Rider**					**Compound Inflation Protection Rider**				
Issue	**Benefit Period**					**Benefit Period**					**Benefit Period**				
Age	*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	39	46	51	105	25	32	38	48	71	102	130	159	188	274
40	34	42	49	56	112	25	35	41	48	75	105	137	165	191	281
41	37	44	51	59	116	29	38	48	54	82	108	140	175	200	292
42	39	46	56	64	124	29	35	48	57	90	111	146	178	207	303
43	42	49	59	68	135	32	44	54	60	94	114	153	184	213	311
44	44	54	64	71	142	35	44	57	67	101	118	156	191	222	322
45	46	56	66	76	154	38	51	64	73	109	124	162	200	232	333
46	49	61	71	83	161	41	51	67	76	116	127	165	207	235	345
47	51	64	76	88	172	44	60	73	83	127	133	175	213	248	360
48	56	68	83	95	187	48	64	76	89	135	137	181	219	254	367
49	59	73	88	103	199	51	67	83	95	146	143	188	229	264	382
50	64	78	95	110	214	57	73	89	102	157	143	191	232	267	386
51	64	81	95	110	217	57	73	92	105	157	149	191	235	273	393
52	68	86	105	120	232	60	79	95	114	169	149	194	235	273	397
53	73	93	112	130	251	67	86	105	121	180	156	200	245	283	408
54	81	100	122	139	274	70	92	111	133	191	159	210	254	296	420
55	86	110	132	152	292	76	99	121	143	210	165	213	264	305	438
56	93	117	144	164	318	83	108	130	156	225	172	222	270	318	450
57	100	130	156	178	345	89	114	140	165	240	178	229	280	327	465
58	110	139	169	196	375	95	124	153	175	255	181	238	292	337	480
59	120	152	183	213	405	102	133	165	191	277	188	245	302	346	495
60	125	161	196	225	431	108	140	172	200	285	191	248	302	353	498
61	137	176	213	247	468	114	149	184	213	307	197	254	315	362	513
62	149	191	232	269	510	121	162	197	229	326	200	264	324	372	528
63	161	208	254	293	555	130	172	210	245	348	210	273	331	385	543
64	176	227	276	320	603	140	181	226	261	371	216	280	343	397	558
65	193	249	303	350	659	149	194	242	280	397	222	289	356	413	581
66	220	286	347	403	757	168	219	270	311	442	242	315	388	445	626
67	242	313	381	440	824	175	232	286	334	468	245	321	397	461	644
68	264	340	416	482	899	184	248	305	353	498	251	334	410	474	663
69	286	372	455	528	982	197	261	321	372	525	261	343	420	486	678
70	313	408	499	579	1,075	207	273	337	391	551	267	350	429	499	697
71	359	469	577	670	1,240	232	305	375	435	614	289	378	464	537	753
72	394	513	631	734	1,356	238	318	391	455	641	292	385	474	550	768
73	428	560	689	800	1,480	248	331	407	477	667	296	391	480	563	779
74	465	609	751	873	1,611	261	343	426	496	693	302	397	489	569	791
75	496	648	797	929	1,705	261	346	429	496	697	296	391	480	556	772
76	575	753	929	1,083	1,990	286	381	470	550	772	315	416	515	598	832
77	628	826	1,020	1,191	2,184	292	391	486	569	794	315	420	518	601	832
78	685	905	1,120	1,308	2,394	305	404	499	585	821	318	420	518	601	836
79	748	990	1,227	1,435	2,627	261	346	429	505	704	318	416	518	604	832
80	822	1,088	1,352	1,584	2,896	267	353	439	515	723	318	420	518	604	836
81	895	1,188	1,482	1,738	3,177	267	359	445	524	731	318	416	515	598	824
82	976	1,301	1,621	1,907	3,481	270	359	448	528	738	311	410	509	588	809
83	1,064	1,418	1,773	2,088	3,810	270	362	451	528	738	305	404	499	578	791
84	1,159	1,548	1,939	2,286	4,170	270	362	451	531	738	299	394	483	563	768
85	1,262	1,690	2,117	2,501	4,564	267	359	448	531	738	292	381	470	547	742

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 for Policies Issued On or After 9/16/2002 - Year 1
Rates per $10 Daily Benefit

	Policy Form: LTQ11-336-MA-PA-601					**Rider: 11-SIP-PA-998**					**Rider: 11-CIP-PA-998**				
	Base Rates with No Inflation Protection					**Simple Inflation Protection Rider**					**Compound Inflation Protection Rider**				
Issue	**Benefit Period**					**Benefit Period**					**Benefit Period**				
Age	*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	81	100	120	137	274	76	99	121	140	214	362	470	578	671	967
40	83	105	127	144	289	83	105	127	149	225	369	480	585	680	978
41	88	110	132	154	303	86	111	137	156	240	372	486	594	687	993
42	93	117	139	161	318	89	118	146	168	255	378	493	604	699	1,008
43	98	122	149	171	337	95	124	153	178	266	381	499	610	706	1,019
44	103	130	156	181	356	102	130	162	188	281	388	505	620	715	1,030
45	108	137	166	191	375	108	140	168	200	300	394	512	626	725	1,045
46	115	144	174	200	397	111	149	181	213	315	397	518	636	737	1,057
47	120	154	186	213	420	121	156	191	222	333	404	521	639	744	1,068
48	127	161	196	225	442	127	165	203	238	352	407	531	648	753	1,079
49	134	171	208	240	468	133	175	213	251	371	397	518	636	737	1,053
50	139	178	218	249	487	140	181	222	261	386	404	524	642	747	1,072
51	142	181	220	254	495	143	184	226	264	393	400	524	642	744	1,064
52	149	188	230	267	517	146	194	235	273	405	407	531	648	753	1,079
53	156	200	245	281	547	156	203	248	292	427	397	518	636	737	1,049
54	166	213	259	301	581	165	216	264	305	446	400	521	639	741	1,057
55	176	227	276	318	614	172	226	277	324	472	404	524	642	747	1,064
56	186	240	293	340	652	184	238	292	337	495	407	531	648	750	1,072
57	198	254	311	359	689	191	251	308	359	521	407	534	652	756	1,075
58	210	271	330	384	734	200	261	321	372	543	407	534	655	760	1,079
59	222	289	352	406	776	210	273	337	394	570	404	524	645	753	1,064
60	227	293	359	418	794	213	277	340	394	570	404	528	645	747	1,064
61	242	313	381	443	843	219	289	356	413	592	394	518	639	741	1,045
62	257	333	406	472	892	229	299	369	429	618	394	518	639	737	1,045
63	271	352	430	501	948	238	311	385	445	641	397	518	639	737	1,042
64	289	374	457	531	1,004	245	324	400	464	663	394	518	636	741	1,042
65	306	399	489	567	1,068	254	334	413	480	686	394	518	636	737	1,038
66	342	445	545	636	1,191	277	366	451	524	749	413	544	671	776	1,094
67	362	472	579	675	1,263	286	375	464	540	768	410	540	667	772	1,087
68	384	501	616	716	1,338	292	385	474	553	787	407	537	661	766	1,079
69	406	531	653	760	1,420	299	394	486	566	802	404	534	658	763	1,068
70	430	565	694	809	1,506	305	400	496	578	821	400	528	652	753	1,057
71	482	633	782	912	1,694	327	432	534	626	888	420	553	680	791	1,113
72	511	672	829	968	1,798	331	439	547	636	899	413	544	674	782	1,094
73	540	712	880	1,029	1,907	337	445	553	645	910	407	537	664	772	1,079
74	572	756	934	1,093	2,020	340	448	559	652	918	400	528	655	760	1,060
75	594	782	966	1,127	2,076	331	439	544	636	892	381	502	620	722	1,004
76	672	888	1,100	1,286	2,372	353	470	585	683	959	397	524	648	756	1,049
77	719	951	1,179	1,381	2,540	356	474	591	690	970	388	515	636	741	1,030
78	770	1,020	1,267	1,484	2,728	356	477	594	696	974	381	502	623	725	1,004
79	824	1,095	1,362	1,597	2,930	305	400	502	591	828	375	489	607	712	982
80	888	1,181	1,472	1,729	3,166	302	404	502	591	828	366	483	594	696	963
81	954	1,271	1,587	1,868	3,417	302	400	499	585	824	359	470	582	677	933
82	1,027	1,372	1,714	2,020	3,694	302	397	499	585	817	346	458	566	658	903
83	1,108	1,479	1,853	2,186	3,994	292	397	493	578	809	337	445	547	636	873
84	1,196	1,599	2,005	2,369	4,324	292	391	486	572	802	324	429	528	613	839
85	1,291	1,731	2,171	2,570	4,687	286	381	483	566	791	315	410	509	588	802

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 for Policies Issued On or After 9/16/2002 - Year 1
Rates per $10 Daily Benefit

	Policy Form: LTQ11-336-MA-PA-601					**Rider: 11-SIP-PA-998**					**Rider: 11-CIP-PA-998**				
	Base Rates with No Inflation Protection					**Simple Inflation Protection Rider**					**Compound Inflation Protection Rider**				
Issue	**Benefit Period**					**Benefit Period**					**Benefit Period**				
Age	*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	49	61	71	83	165	44	57	73	83	127	216	280	343	397	570
40	51	64	76	88	172	48	64	76	89	135	219	286	350	400	581
41	54	66	81	93	184	51	67	79	92	142	222	289	353	410	588
42	56	71	86	98	191	54	70	86	99	154	226	292	359	416	599
43	59	76	90	103	202	57	73	89	108	161	232	296	353	423	607
44	64	78	95	110	214	60	79	95	111	172	232	305	369	429	618
45	66	83	100	115	229	64	86	102	121	176	235	308	375	435	622
46	71	88	108	122	240	67	89	108	127	191	238	311	381	442	633
47	73	93	112	130	255	73	95	118	137	202	245	318	388	448	641
48	78	100	120	139	270	76	99	124	143	214	248	321	394	455	652
49	83	105	127	147	285	83	108	130	153	229	248	324	394	458	652
50	88	112	134	156	303	86	111	140	159	236	245	318	391	448	644
51	88	112	134	156	303	86	111	140	162	240	251	327	404	464	663
52	93	120	144	166	322	92	118	146	172	251	248	321	394	455	652
53	100	127	154	178	345	95	127	156	178	262	248	321	394	455	648
54	105	134	164	191	367	105	137	165	191	277	251	327	400	461	656
55	112	144	176	203	390	111	143	175	203	296	254	331	404	470	667
56	120	154	188	218	416	118	153	184	213	311	257	337	410	474	674
57	130	166	200	232	446	121	159	197	229	330	261	340	416	483	682
58	137	176	215	249	476	130	172	207	242	348	264	346	423	486	689
59	147	191	230	267	510	137	178	222	254	367	267	346	429	496	697
60	154	198	242	279	532	140	184	226	264	375	264	343	420	489	689
61	166	213	259	301	570	146	194	238	277	397	264	350	426	493	697
62	178	230	279	323	611	156	203	251	292	416	267	353	432	499	704
63	191	247	301	347	656	165	213	264	308	438	273	356	435	505	712
64	205	264	323	374	704	172	229	280	324	461	277	362	442	512	719
65	220	286	350	406	761	181	238	292	337	480	280	366	448	518	727
66	249	325	396	460	858	200	261	324	375	532	299	388	477	553	779
67	269	350	428	496	925	210	273	337	391	558	302	394	483	559	787
68	291	379	465	538	1,000	219	286	353	410	581	305	397	489	566	794
69	313	408	501	582	1,083	229	299	369	429	603	308	404	496	575	802
70	340	443	545	631	1,173	235	311	381	448	629	311	410	499	582	809
71	386	506	623	724	1,341	261	343	420	493	693	331	435	534	620	866
72	418	548	675	787	1,454	270	356	439	509	716	334	439	540	623	873
73	452	594	734	853	1,574	277	366	451	528	742	334	442	540	629	880
74	489	643	792	924	1,705	286	378	467	544	764	337	442	547	633	880
75	518	682	839	978	1,795	286	375	467	544	764	327	429	534	617	858
76	599	787	973	1,134	2,087	308	410	509	598	832	346	458	563	658	910
77	650	858	1,061	1,242	2,278	318	423	524	610	858	346	458	566	655	910
78	707	934	1,159	1,357	2,488	327	435	537	629	877	346	458	563	652	903
79	770	1,020	1,267	1,484	2,716	277	372	461	540	753	343	451	556	648	895
80	839	1,115	1,386	1,626	2,975	283	375	467	550	764	340	448	553	645	888
81	912	1,213	1,513	1,778	3,248	286	378	470	553	772	337	445	547	636	877
82	993	1,323	1,650	1,941	3,548	283	378	477	559	776	331	435	537	626	858
83	1,078	1,438	1,800	2,120	3,870	283	381	474	559	776	321	426	524	610	836
84	1,171	1,565	1,961	2,313	4,219	280	375	470	556	776	315	416	512	594	813
85	1,271	1,702	2,135	2,523	4,601	280	375	467	556	772	305	400	496	575	783

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 for Policies Issued On or After 9/16/2002 - Year 1
Rates per $10 Daily Benefit

	Policy Form: FLQ11-336-MA-PA-601					**Rider: 11-SIP-PA-998**					**Rider: 11-CIP-PA-998**				
	Base Rates with No Inflation Protection					**Simple Inflation Protection Rider**					**Compound Inflation Protection Rider**				
Issue	**Benefit Period**					**Benefit Period**					**Benefit Period**				
Age	*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	29	34	42	46	94	22	29	35	41	64	92	118	143	168	247
40	32	37	44	51	101	22	32	38	41	67	92	124	149	172	255
41	34	39	46	54	105	25	35	41	48	75	95	127	156	178	262
42	34	42	51	56	112	29	32	41	54	79	102	133	159	188	274
43	37	44	54	61	120	29	41	48	54	86	105	137	165	194	281
44	39	49	56	64	127	32	38	54	60	94	108	140	172	200	292
45	42	51	59	68	139	35	44	57	67	97	111	146	181	210	300
46	44	56	64	76	146	38	44	60	67	105	114	146	188	210	311
47	46	56	68	78	154	41	57	67	76	116	121	159	191	226	326
48	51	61	76	86	169	41	57	67	79	120	121	165	197	229	330
49	54	66	78	93	180	44	60	76	86	131	127	168	207	238	345
50	56	71	86	100	191	54	67	79	89	142	130	172	210	238	348
51	56	73	86	100	195	54	64	83	92	142	137	172	213	245	356
52	61	78	95	108	210	54	70	86	105	150	137	172	210	248	356
53	66	83	100	117	225	60	79	95	108	165	140	181	222	254	367
54	73	90	110	125	247	64	83	102	121	172	143	188	229	267	378
55	78	100	120	137	262	67	86	108	127	191	146	191	235	273	397
56	83	105	130	147	289	76	99	118	140	202	156	200	245	286	405
57	90	117	142	161	311	79	102	124	149	214	159	207	251	292	416
58	100	125	152	176	337	86	111	137	159	229	162	216	264	302	431
59	108	137	166	191	363	92	121	146	172	251	168	219	270	311	446
60	112	144	176	203	390	99	127	156	181	255	172	226	273	318	446
61	122	159	191	222	423	105	133	168	191	274	178	229	283	327	461
62	134	171	210	242	457	108	146	175	207	296	181	238	289	334	476
63	144	188	230	264	498	118	153	188	219	315	191	245	296	346	491
64	159	205	249	289	543	124	162	203	235	333	194	251	308	356	502
65	174	225	274	315	592	133	175	216	251	360	200	261	318	372	525
66	198	257	313	364	682	153	197	242	280	397	216	283	350	400	562
67	218	281	342	396	742	159	210	257	302	423	219	289	359	416	581
68	237	306	374	433	809	165	222	273	318	450	226	302	369	426	596
69	257	335	408	474	884	178	235	289	337	472	235	308	378	439	611
70	281	367	450	521	967	188	248	302	353	498	242	315	385	451	629
71	323	423	518	604	1,117	210	273	340	391	555	261	340	420	483	678
72	355	462	567	660	1,221	213	286	353	410	577	264	346	426	496	689
73	386	504	621	719	1,334	222	299	366	429	599	264	353	432	509	701
74	418	548	675	785	1,450	235	308	385	448	626	273	359	442	512	712
75	447	584	716	836	1,536	235	311	388	445	626	264	350	432	502	693
76	518	677	836	976	1,791	257	343	423	493	693	283	375	464	537	749
77	565	743	917	1,071	1,967	264	353	439	512	716	283	378	467	540	749
78	616	814	1,007	1,179	2,154	273	362	451	524	738	286	378	467	540	753
79	672	892	1,105	1,291	2,364	235	311	385	455	633	286	372	467	544	749
80	738	980	1,218	1,425	2,608	242	315	394	464	648	286	375	464	544	749
81	804	1,068	1,333	1,565	2,859	242	324	400	470	659	286	375	464	537	742
82	878	1,171	1,460	1,716	3,132	245	324	404	474	663	280	369	458	531	731
83	958	1,276	1,597	1,880	3,428	242	327	404	474	667	273	362	448	518	712
84	1,044	1,394	1,746	2,059	3,754	242	324	407	477	663	267	353	435	505	689
85	1,134	1,521	1,905	2,252	4,106	242	324	404	477	667	264	343	426	493	667

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 for Policies Issued On or After 9/16/2002 - Year 1
Rates per $10 Daily Benefit

	Policy Form: FLQ11-336-MA-PA-601					**Rider: 11-SIP-PA-998**					**Rider: 11-CIP-PA-998**				
	Base Rates with No Inflation Protection					**Simple Inflation Protection Rider**					**Compound Inflation Protection Rider**				
Issue	**Benefit Period**					**Benefit Period**					**Benefit Period**				
Age	*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	44	56	64	76	150	41	51	67	73	112	194	251	308	356	510
40	46	56	68	78	154	41	57	70	83	124	197	257	315	362	525
41	49	59	73	83	165	44	60	70	83	127	200	261	318	369	528
42	51	64	78	88	172	48	64	76	89	139	203	264	321	375	540
43	54	68	81	93	184	51	67	83	95	142	207	267	318	381	543
44	56	71	86	100	191	57	70	86	99	157	210	273	334	385	558
45	59	76	90	103	206	57	76	92	111	157	213	277	337	394	558
46	64	78	98	110	217	60	83	95	114	172	216	283	343	397	570
47	66	83	100	117	229	67	86	108	121	184	219	286	350	404	577
48	71	90	108	125	244	67	89	111	130	191	222	289	356	410	585
49	76	95	115	132	255	73	95	118	137	206	222	292	353	413	588
50	78	100	122	142	274	79	102	124	143	214	222	286	350	404	581
51	78	100	122	142	274	79	102	124	146	217	229	296	362	416	596
52	83	108	130	149	289	83	105	133	156	229	222	289	356	410	588
53	90	115	139	161	311	86	114	140	159	236	222	289	353	407	585
54	95	122	147	171	330	92	121	149	172	251	226	292	362	416	592
55	100	130	159	183	352	102	130	156	181	266	229	299	362	423	599
56	108	139	169	196	375	105	137	168	191	281	232	302	369	426	607
57	117	149	181	210	401	108	143	178	203	296	235	308	375	432	614
58	122	159	193	225	427	118	153	188	216	315	238	311	381	439	622
59	132	171	208	240	457	124	162	200	229	333	242	311	385	448	629
60	139	178	218	252	480	124	165	203	235	337	235	308	378	439	618
61	149	191	232	271	513	133	175	216	248	356	238	315	385	442	626
62	161	208	252	291	551	140	181	226	264	375	238	318	388	448	633
63	171	222	271	313	592	149	191	235	277	393	248	321	391	455	641
64	186	237	291	337	633	153	207	251	292	416	248	327	397	461	648
65	198	257	315	364	686	162	216	264	305	431	251	331	404	467	652
66	225	293	357	413	772	181	235	292	337	480	267	350	429	499	701
67	242	315	386	447	832	188	245	302	350	502	273	353	432	502	708
68	262	342	418	484	899	197	257	318	369	525	277	356	442	509	716
69	281	367	452	523	974	207	270	331	388	543	280	366	445	518	723
70	306	399	491	567	1,057	213	280	343	404	566	280	369	448	524	727
71	347	455	562	650	1,206	235	311	375	445	626	299	394	480	559	779
72	377	494	606	709	1,308	242	318	397	458	644	299	394	486	559	787
73	408	535	660	768	1,416	248	327	407	477	667	299	397	486	566	794
74	440	579	714	831	1,536	257	340	420	489	686	302	397	489	569	791
75	467	614	756	880	1,615	257	337	420	489	689	296	388	480	556	772
76	540	709	875	1,022	1,877	277	369	458	537	749	311	410	509	591	821
77	584	773	956	1,117	2,050	286	381	470	550	772	315	413	509	591	821
78	636	841	1,044	1,223	2,241	296	391	483	566	787	311	410	505	585	813
79	694	917	1,139	1,335	2,447	248	337	416	486	674	308	407	502	585	806
80	756	1,002	1,247	1,465	2,679	254	340	423	493	686	305	404	499	578	798
81	822	1,090	1,362	1,599	2,923	257	343	423	499	697	302	400	493	572	791
82	892	1,191	1,487	1,748	3,192	257	340	429	502	701	299	391	483	563	772
83	971	1,293	1,619	1,907	3,485	254	343	429	505	697	289	385	474	550	749
84	1,054	1,408	1,765	2,081	3,796	251	337	423	502	701	283	375	461	537	734
85	1,144	1,531	1,922	2,271	4,140	251	340	420	499	697	273	362	445	518	704

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 for Policies Issued On or After 9/16/2002 - Year 1
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				
	Benefit Period					Benefit Period					Benefit Period				
Issue Age	*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	34	39	42	46	90	19	25	29	35	52	76	92	105	121	169
40	34	39	44	49	97	22	29	32	35	52	83	99	108	124	169
41	37	42	46	51	101	22	29	32	38	56	83	102	111	127	172
42	37	44	49	54	105	25	32	35	41	60	89	102	114	130	180
43	39	46	51	56	109	29	32	35	41	64	89	105	118	133	184
44	42	49	54	59	112	29	35	38	44	67	92	108	121	140	191
45	44	51	56	64	120	29	35	41	44	67	92	111	124	140	191
46	44	54	59	66	124	35	38	44	51	75	99	114	130	146	199
47	46	56	61	68	131	35	41	48	54	75	102	118	133	149	202
48	49	59	64	73	135	38	44	51	54	82	105	124	140	153	210
49	54	61	68	76	142	38	48	54	60	86	105	127	143	159	214
50	56	64	71	81	150	41	51	57	64	86	105	127	143	156	210
51	56	66	73	81	150	41	51	54	64	90	108	130	143	162	217
52	59	68	76	86	157	44	54	60	67	94	108	130	146	162	214
53	61	73	81	90	165	48	57	64	73	97	114	133	149	165	221
54	66	78	86	95	172	51	60	70	76	105	118	137	156	172	229
55	71	83	90	103	184	54	64	73	79	112	121	143	159	175	232
56	76	88	98	110	195	57	70	76	86	116	124	146	162	181	240
57	81	95	105	117	206	60	73	83	92	124	127	149	165	184	244
58	86	100	112	125	221	67	79	86	99	131	133	156	172	191	251
59	93	108	120	132	236	70	86	92	105	135	133	162	178	200	255
60	95	112	125	139	244	73	86	95	105	142	137	162	178	197	255
61	103	122	134	149	259	76	89	102	111	150	140	165	181	203	262
62	110	130	144	159	277	83	99	105	121	157	146	172	188	210	266
63	120	139	154	171	296	86	102	114	127	165	146	175	191	213	274
64	127	149	166	183	315	92	108	118	133	172	153	181	197	219	281
65	139	161	178	198	337	95	114	127	140	184	156	188	203	226	289
66	156	183	203	225	382	108	127	140	153	199	172	200	219	242	307
67	169	198	218	242	408	114	133	146	162	210	175	203	226	248	315
68	183	213	235	259	438	118	140	153	172	217	178	210	229	254	322
69	198	230	252	279	472	124	146	162	178	225	181	216	235	261	326
70	213	249	271	301	506	130	149	168	184	232	188	216	242	264	330
71	242	281	308	342	570	143	168	184	200	255	200	235	257	283	356
72	259	303	333	367	607	149	172	188	210	262	207	238	261	289	360
73	279	325	357	394	648	153	178	194	213	270	207	242	264	292	363
74	298	347	381	421	689	159	184	200	219	274	210	245	267	292	363
75	320	372	403	445	723	156	181	200	216	270	207	238	261	286	356
76	364	423	460	506	821	168	197	216	235	292	222	254	280	305	378
77	394	455	494	543	877	172	200	219	242	296	222	257	283	308	378
78	423	489	531	582	940	178	203	222	245	296	222	257	283	308	375
79	455	526	570	626	1,004	149	175	191	207	251	226	261	283	308	375
80	491	567	616	672	1,075	153	175	188	210	251	229	264	283	311	378
81	531	611	660	724	1,150	153	175	191	203	251	229	264	286	308	375
82	575	658	712	775	1,233	149	175	188	207	251	226	264	283	308	375
83	621	712	765	834	1,323	149	175	188	203	247	226	261	283	305	367
84	670	768	824	895	1,416	153	172	188	200	244	226	257	280	302	367
85	724	826	885	961	1,517	149	172	184	197	236	226	257	277	299	360

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 for Policies Issued On or After 9/16/2002 - Year 1
Rates per $10 Daily Benefit

	Policy Form: HTQ11-338-MA-PA-601					**Rider: 11-SIP-PA-998**					**Rider: 11-CIP-PA-998**				
	Base Rates with No Inflation Protection					**Simple Inflation Protection Rider**					**Compound Inflation Protection Rider**				
Issue	**Benefit Period**					**Benefit Period**					**Benefit Period**				
Age	*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	76	88	98	110	210	57	73	83	92	139	267	321	356	397	540
40	78	90	100	112	217	64	76	89	102	146	270	324	362	407	547
41	81	95	105	117	225	67	79	92	105	154	277	327	366	410	551
42	83	98	110	122	236	70	86	95	108	154	280	334	369	413	551
43	88	103	115	127	244	73	89	99	114	161	280	334	372	416	558
44	90	108	120	134	251	76	92	105	118	172	283	337	375	416	562
45	95	110	125	139	262	79	99	108	124	176	286	343	378	423	562
46	98	115	130	144	270	86	102	114	130	184	289	343	381	426	566
47	103	120	134	149	281	89	108	121	137	191	289	346	385	429	570
48	108	125	139	156	292	92	114	127	143	195	286	343	378	420	547
49	110	132	147	164	300	99	118	130	146	206	289	340	378	423	562
50	112	134	149	166	303	102	118	133	149	206	289	340	375	420	547
51	117	137	152	171	315	102	124	137	153	210	289	343	381	426	562
52	117	139	154	174	315	105	124	140	156	214	292	343	381	423	551
53	125	147	161	181	326	108	130	146	165	225	286	343	381	423	562
54	130	154	169	191	341	114	137	153	168	229	283	334	372	413	540
55	137	161	178	198	356	118	140	159	178	236	283	337	372	416	536
56	142	169	186	208	371	127	149	165	184	244	286	337	375	416	536
57	149	176	196	218	386	130	156	172	191	251	286	340	372	416	536
58	156	186	205	227	401	137	159	178	200	262	289	337	372	416	536
59	164	193	215	240	416	140	168	184	203	274	280	331	362	400	513
60	166	196	218	242	420	140	165	181	203	266	286	337	369	410	532
61	174	205	227	252	438	146	172	188	213	274	277	327	356	397	506
62	183	215	237	264	457	149	178	197	216	281	277	324	356	397	502
63	193	225	249	276	476	153	181	200	222	289	273	324	356	394	502
64	203	237	262	289	495	156	184	203	229	296	273	321	353	391	498
65	213	249	274	303	517	162	191	210	235	303	273	321	353	391	495
66	235	276	303	335	570	175	203	226	251	322	286	334	369	407	513
67	247	289	318	352	596	178	210	229	254	326	283	334	362	400	506
68	259	303	333	367	618	181	213	235	261	330	280	327	359	400	502
69	271	318	347	386	644	184	216	238	261	333	277	324	356	391	495
70	284	333	364	403	674	188	219	242	264	333	277	321	353	388	483
71	315	369	403	445	742	197	232	254	283	352	286	334	366	407	502
72	330	386	423	467	772	200	232	254	283	352	283	331	359	397	495
73	345	403	440	487	802	200	235	257	283	352	280	324	356	391	483
74	362	421	460	509	832	200	235	257	280	348	273	321	350	381	472
75	377	435	474	523	851	194	226	248	270	337	261	305	331	362	446
76	418	487	528	582	944	207	238	264	286	352	273	315	346	378	461
77	443	511	557	611	989	207	242	261	286	352	267	311	337	372	453
78	467	540	587	645	1,038	207	238	261	283	348	264	305	334	362	442
79	494	572	621	680	1,090	172	200	216	235	289	261	299	324	356	435
80	526	606	658	719	1,150	172	197	213	235	285	257	299	321	353	427
81	560	645	699	763	1,214	168	194	207	229	277	254	292	315	343	420
82	599	687	743	809	1,285	165	194	207	226	277	248	289	308	337	408
83	641	734	792	861	1,368	165	191	203	222	266	245	286	302	331	397
84	687	785	844	917	1,450	159	188	200	219	262	242	280	302	327	393
85	736	841	902	978	1,544	159	181	194	213	251	242	273	292	318	382

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 for Policies Issued On or After 9/16/2002 - Year 1
Rates per $10 Daily Benefit

	Policy Form: HTQ11-338-MA-PA-601					**Rider: 11-SIP-PA-998**					**Rider: 11-CIP-PA-998**				
	Base Rates with No Inflation Protection					**Simple Inflation Protection Rider**					**Compound Inflation Protection Rider**				
Issue	**Benefit Period**					**Benefit Period**					**Benefit Period**				
Age	*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	46	54	59	66	127	35	44	51	57	82	159	191	213	238	322
40	46	56	61	68	131	38	44	54	60	90	162	194	216	242	326
41	49	59	64	73	139	41	48	57	60	90	165	194	219	242	326
42	51	61	66	76	142	41	51	57	64	94	165	197	222	245	333
43	54	64	71	78	150	44	54	60	70	97	168	200	222	251	333
44	56	66	73	81	154	44	54	64	73	105	168	203	226	254	337
45	59	68	76	86	161	48	57	67	73	105	172	207	229	254	341
46	61	71	78	88	169	51	64	70	79	109	175	210	232	257	341
47	64	76	83	93	172	54	64	73	83	116	175	210	232	261	345
48	66	78	86	98	180	57	67	79	86	120	178	213	238	261	345
49	68	81	90	103	187	60	73	79	89	127	178	210	232	257	341
50	71	83	93	105	191	64	76	83	92	127	178	213	235	261	345
51	73	86	95	108	195	64	76	86	95	131	178	213	235	261	345
52	76	88	98	110	199	64	79	89	99	135	178	213	238	264	348
53	78	93	103	115	210	70	83	92	105	139	178	210	232	261	341
54	83	98	110	122	221	73	86	95	108	142	178	213	232	261	337
55	88	103	115	130	229	76	92	102	111	154	181	216	235	261	345
56	93	110	122	134	240	79	95	105	121	161	184	216	238	267	345
57	98	115	127	144	251	86	102	111	124	165	184	219	242	267	348
58	105	122	134	152	266	86	105	118	130	172	184	222	245	270	348
59	110	130	144	159	281	92	111	121	137	176	188	222	245	273	348
60	115	134	147	164	285	92	111	124	140	184	184	219	242	267	345
61	120	142	156	174	303	99	118	130	143	187	188	222	242	270	345
62	127	152	166	186	318	105	121	133	149	195	191	222	245	270	348
63	137	159	176	196	337	105	127	140	156	202	191	226	248	273	348
64	144	171	188	208	356	111	130	143	162	210	194	226	248	277	352
65	154	181	200	222	378	118	140	149	168	217	197	232	251	277	352
66	174	203	222	247	420	127	149	165	184	236	207	245	267	296	375
67	186	218	240	264	446	130	156	168	191	244	210	245	267	299	378
68	198	232	254	281	476	137	162	178	197	247	213	248	273	302	378
69	213	247	271	301	506	140	168	184	203	255	213	251	273	302	378
70	227	264	291	323	540	146	172	188	207	262	216	254	277	302	378
71	257	298	328	362	603	159	188	203	226	281	229	267	292	321	401
72	274	320	350	386	641	162	191	210	232	289	229	267	292	324	401
73	291	340	372	411	678	168	197	216	238	292	232	270	296	324	401
74	311	362	396	438	716	172	200	219	242	300	232	270	296	324	401
75	330	384	418	460	749	172	197	216	238	292	229	264	286	315	390
76	377	435	474	521	847	181	213	232	254	311	238	280	302	334	408
77	403	467	509	557	903	184	216	235	257	315	238	280	302	334	405
78	433	501	543	597	959	188	216	238	261	318	242	277	302	331	405
79	465	535	582	638	1,023	159	184	200	219	270	238	280	302	327	401
80	499	577	626	685	1,094	159	184	200	216	266	242	277	299	327	397
81	538	619	670	734	1,165	162	184	200	216	266	238	277	299	324	397
82	579	665	719	785	1,248	159	184	197	216	259	238	277	296	321	390
83	623	716	773	841	1,334	159	181	194	213	255	238	273	292	318	386
84	672	770	829	900	1,424	156	181	191	213	251	238	273	289	318	382
85	726	829	890	963	1,521	156	178	188	207	247	235	270	286	311	375

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 for Policies Issued On or After 9/16/2002 - Year 2
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				
	Benefit Period					Benefit Period					Benefit Period				
Issue Age	*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	29	32	37	88	21	25	33	37	58	103	132	165	186	268
40	24	29	34	39	93	25	33	37	41	63	112	140	169	194	278
41	27	32	37	42	97	25	33	41	45	68	112	145	178	202	287
42	29	34	39	44	107	25	33	41	50	73	116	149	182	211	297
43	29	37	42	46	112	29	37	45	54	83	124	157	190	219	312
44	32	39	44	49	122	33	41	50	58	88	128	161	198	227	321
45	34	42	46	54	132	33	41	58	62	93	132	169	207	236	331
46	37	44	51	56	141	37	50	58	70	97	136	174	211	248	341
47	39	46	54	61	151	41	54	66	74	107	140	182	223	256	356
48	42	49	59	66	161	41	58	70	79	117	145	190	227	264	370
49	44	54	64	71	175	50	62	74	87	127	153	198	236	273	380
50	46	56	68	76	185	54	70	83	95	141	157	202	240	281	390
51	46	59	68	78	190	54	66	83	95	136	161	202	248	281	395
52	51	64	73	83	205	58	74	91	107	151	161	207	252	289	399
53	54	68	81	90	224	66	79	99	116	161	169	215	260	302	414
54	59	73	88	100	239	70	87	103	120	175	174	223	269	310	434
55	64	81	95	108	263	74	95	116	132	190	182	231	281	322	448
56	68	86	103	117	283	83	103	128	145	205	190	244	293	335	468
57	76	95	112	130	312	87	112	136	153	219	194	248	302	347	477
58	83	103	122	139	336	91	120	149	169	239	198	260	314	364	502
59	90	112	134	154	370	99	132	157	182	253	207	269	326	376	516
60	95	120	144	164	390	107	136	165	190	273	211	273	331	380	526
61	103	132	156	178	429	116	145	182	207	287	219	281	343	397	541
62	112	144	171	196	468	124	157	194	223	312	227	293	355	409	560
63	125	156	188	215	511	132	174	207	240	331	236	306	368	426	580
64	134	171	205	237	560	145	186	223	256	351	248	318	384	438	599
65	149	191	227	262	614	153	194	240	273	380	256	326	401	455	628
66	171	218	264	301	711	174	223	269	310	424	277	359	434	500	677
67	188	240	289	330	774	182	236	285	331	453	285	372	450	517	706
68	205	264	318	364	852	194	248	302	347	477	298	384	463	533	726
69	225	289	347	399	930	207	264	322	372	507	310	397	483	554	750
70	247	318	384	440	1,023	219	281	339	388	531	318	409	496	570	774
71	286	369	445	511	1,184	244	310	380	434	594	347	446	541	620	843
72	313	403	489	560	1,301	252	326	397	459	619	355	459	554	640	862
73	342	443	533	614	1,422	264	339	417	479	648	364	467	570	657	886
74	374	482	584	670	1,549	273	355	434	500	677	372	479	583	674	906
75	403	516	623	716	1,646	273	359	438	500	677	364	475	578	661	896
76	467	601	729	836	1,924	306	397	479	554	745	397	517	624	719	969
77	511	660	800	919	2,109	314	405	496	570	774	405	521	636	731	989
78	560	724	878	1,010	2,314	322	417	508	587	794	405	529	645	744	999
79	611	792	961	1,108	2,533	277	359	438	504	682	413	533	653	752	1,013
80	670	868	1,056	1,218	2,786	285	368	446	521	697	421	550	665	769	1,033
81	731	951	1,156	1,335	3,049	285	368	455	521	701	426	550	669	777	1,042
82	797	1,037	1,264	1,460	3,332	289	376	455	529	701	426	554	674	781	1,047
83	868	1,130	1,379	1,594	3,634	285	376	455	529	706	426	558	678	785	1,052
84	946	1,232	1,504	1,741	3,965	285	372	459	529	706	426	558	682	789	1,057
85	1,029	1,342	1,641	1,902	4,325	285	368	450	521	701	426	558	682	789	1,062

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 for Policies Issued On or After 9/16/2002 - Year 2
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				
	Benefit Period					Benefit Period					Benefit Period				
Issue Age	*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	73	86	95	234	70	87	107	124	180	388	496	599	690	964
40	61	76	88	100	244	74	95	116	132	195	393	504	612	702	984
41	66	81	95	108	258	79	99	120	140	209	397	512	620	711	999
42	68	86	100	112	273	83	107	128	153	219	405	521	628	727	1,013
43	73	90	105	120	292	87	112	140	161	234	409	529	640	736	1,023
44	76	95	112	127	307	95	120	145	169	248	417	537	649	744	1,042
45	81	100	117	134	326	99	128	157	182	263	421	545	661	756	1,052
46	86	105	125	142	346	103	136	165	194	278	426	554	669	769	1,067
47	90	110	132	152	365	112	149	178	202	297	434	562	678	777	1,081
48	95	117	139	159	390	120	157	190	219	312	438	570	690	789	1,096
49	100	125	149	169	409	128	165	198	236	336	430	558	674	777	1,076
50	103	130	156	178	429	136	174	211	244	351	442	566	682	785	1,091
51	105	132	156	181	438	136	178	215	244	351	438	566	686	785	1,086
52	110	139	166	188	458	145	182	223	260	365	442	570	690	797	1,101
53	117	147	176	200	487	149	198	236	277	390	434	562	678	781	1,076
54	125	156	188	215	516	157	207	252	289	414	438	566	686	789	1,091
55	132	166	200	230	550	169	219	264	306	434	442	574	690	793	1,101
56	139	178	213	245	585	182	231	281	322	458	446	574	698	802	1,111
57	149	188	227	259	623	190	248	298	343	482	450	583	707	814	1,120
58	159	200	242	276	667	198	260	314	364	502	455	587	711	818	1,125
59	169	215	257	296	706	211	269	331	380	531	450	583	711	814	1,115
60	174	220	264	303	726	211	277	335	384	536	450	583	707	810	1,115
61	183	235	284	325	774	223	289	347	401	560	446	578	698	802	1,101
62	196	249	301	347	823	231	302	368	417	585	450	583	702	806	1,106
63	208	267	323	369	877	244	314	380	438	604	450	583	702	810	1,111
64	222	284	342	394	930	252	326	397	455	633	450	583	707	814	1,111
65	237	303	367	421	994	260	339	413	475	653	455	587	711	818	1,115
66	267	342	413	474	1,115	285	368	450	521	716	479	620	752	864	1,179
67	284	364	440	506	1,188	293	380	463	533	731	475	620	752	864	1,174
68	301	386	469	538	1,262	302	393	475	550	750	479	620	748	864	1,174
69	320	413	499	575	1,339	310	401	492	562	770	475	616	748	859	1,174
70	340	440	533	611	1,427	318	409	500	578	784	475	616	744	859	1,164
71	384	496	601	692	1,607	343	446	541	624	852	500	649	789	909	1,237
72	408	528	641	738	1,710	347	455	550	636	867	496	645	785	901	1,227
73	435	562	682	785	1,822	351	459	558	645	877	492	640	781	901	1,218
74	460	597	724	836	1,934	359	467	566	653	886	492	636	777	888	1,203
75	482	621	753	866	1,992	347	455	550	636	862	467	607	740	855	1,154
76	548	707	858	988	2,280	372	488	595	686	925	492	645	785	905	1,218
77	584	758	922	1,061	2,440	376	492	595	690	935	492	636	773	897	1,208
78	626	812	988	1,139	2,616	380	496	603	698	940	488	632	769	888	1,198
79	672	873	1,061	1,225	2,810	318	417	512	591	794	479	624	764	884	1,188
80	724	941	1,147	1,325	3,030	318	417	508	587	794	479	620	760	876	1,184
81	780	1,012	1,235	1,428	3,263	318	417	508	587	789	471	616	752	872	1,169
82	839	1,093	1,333	1,543	3,522	314	409	504	583	779	467	607	748	859	1,159
83	902	1,176	1,438	1,665	3,794	310	409	496	574	774	467	607	740	855	1,150
84	973	1,269	1,553	1,800	4,096	306	401	492	570	765	463	603	736	847	1,145
85	1,051	1,372	1,680	1,946	4,432	302	397	483	562	755	455	595	727	843	1,130

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 for Policies Issued On or After 9/16/2002 - Year 2
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				
	Benefit Period					Benefit Period					Benefit Period				
Issue Age	*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	37	44	51	56	141	41	54	62	74	107	227	293	355	409	570
40	37	46	54	61	146	45	54	70	79	117	236	298	364	417	580
41	39	49	56	64	156	50	58	74	87	122	240	306	372	426	589
42	42	51	61	68	166	50	62	74	91	132	240	310	372	430	599
43	44	54	64	73	175	54	70	83	95	141	244	318	380	438	609
44	46	56	68	76	185	58	74	87	103	151	248	322	388	446	623
45	49	61	71	81	200	62	79	95	112	156	252	326	397	455	628
46	51	64	76	86	209	66	83	99	116	166	260	335	401	463	638
47	54	68	81	90	224	70	87	107	124	175	264	339	409	471	648
48	59	73	86	98	239	70	91	116	132	185	264	343	417	475	658
49	61	76	90	103	253	79	103	124	145	200	269	347	417	483	662
50	66	81	98	110	268	83	107	128	153	214	264	343	409	475	658
51	66	81	98	110	268	83	107	128	153	214	273	355	426	492	677
52	68	88	103	117	287	91	112	140	161	224	269	343	421	483	662
53	73	93	110	127	307	95	120	149	169	239	273	347	421	483	667
54	78	100	117	134	326	103	128	161	182	258	277	351	430	496	677
55	83	105	127	144	351	107	140	169	194	273	281	364	434	500	687
56	90	115	137	156	375	112	145	178	207	287	285	364	442	508	701
57	98	122	147	169	404	120	157	190	219	307	285	372	450	517	711
58	103	132	156	181	434	132	165	202	231	321	293	376	459	525	721
59	112	142	169	193	463	136	178	215	248	346	298	384	467	537	735
60	117	149	178	203	487	140	182	219	256	356	293	380	459	529	726
61	125	159	193	220	526	153	194	231	269	370	302	388	467	537	735
62	134	174	208	237	565	161	202	248	285	395	306	393	475	545	745
63	147	186	225	257	609	165	215	260	302	414	310	401	483	554	760
64	156	200	242	279	658	178	231	277	318	438	318	409	492	562	770
65	171	218	262	301	711	186	244	293	335	458	322	417	504	578	784
66	193	249	301	345	809	207	264	322	368	507	343	442	533	616	838
67	210	269	325	374	872	215	281	339	388	536	351	450	545	624	857
68	227	293	352	406	945	227	289	355	405	560	355	459	558	636	867
69	247	318	384	440	1,028	236	306	372	426	580	364	467	566	649	882
70	269	345	418	479	1,115	248	322	388	446	604	368	475	574	661	896
71	308	396	479	553	1,281	273	351	430	488	667	393	512	620	711	964
72	335	430	523	599	1,393	281	368	442	512	692	401	521	628	727	979
73	364	469	567	653	1,510	289	376	463	529	716	405	525	640	736	994
74	394	509	616	709	1,637	302	393	475	545	740	409	533	649	744	1,008
75	421	543	655	753	1,734	302	388	475	545	735	405	521	636	731	984
76	487	628	760	875	2,012	326	426	521	599	809	434	562	682	785	1,062
77	531	685	831	956	2,197	335	438	533	616	828	434	566	690	793	1,067
78	577	746	907	1,044	2,392	343	450	545	632	852	438	574	694	802	1,081
79	628	814	990	1,139	2,611	293	384	467	541	726	442	574	698	810	1,086
80	685	888	1,081	1,247	2,854	298	393	479	550	735	446	583	707	818	1,096
81	746	968	1,179	1,362	3,112	298	393	479	554	740	446	578	711	818	1,101
82	809	1,054	1,284	1,484	3,385	302	388	479	554	750	446	583	711	822	1,106
83	878	1,144	1,396	1,616	3,682	302	393	479	554	745	446	583	711	822	1,106
84	954	1,242	1,518	1,760	4,004	298	393	475	550	740	446	583	711	822	1,106
85	1,034	1,350	1,650	1,914	4,355	293	388	475	550	735	446	583	711	822	1,106

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 for Policies Issued On or After 9/16/2002 - Year 2
Rates per $10 Daily Benefit

	Policy Form: LTQ11-336-MA-PA-601					**Rider: 11-SIP-PA-998**					**Rider: 11-CIP-PA-998**				
	Base Rates with No Inflation Protection					**Simple Inflation Protection Rider**					**Compound Inflation Protection Rider**				
Issue	**Benefit Period**					**Benefit Period**					**Benefit Period**				
Age	*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	39	46	51	136	33	41	50	62	93	132	169	207	244	356
40	34	42	49	56	146	33	45	54	62	97	136	178	215	248	365
41	37	44	51	59	151	37	50	62	70	107	140	182	227	260	380
42	39	46	56	64	161	37	45	62	74	117	145	190	231	269	395
43	42	49	59	68	175	41	58	70	79	122	149	198	240	277	404
44	44	54	64	71	185	45	58	74	87	132	153	202	248	289	419
45	46	56	66	76	200	50	66	83	95	141	161	211	260	302	434
46	49	61	71	83	209	54	66	87	99	151	165	215	269	306	448
47	51	64	76	88	224	58	79	95	107	166	174	227	277	322	468
48	56	68	83	95	244	62	83	99	116	175	178	236	285	331	477
49	59	73	88	103	258	66	87	107	124	190	186	244	298	343	497
50	64	78	95	110	278	74	95	116	132	205	186	248	302	347	502
51	64	81	95	110	283	74	95	120	136	205	194	248	306	355	511
52	68	86	105	120	302	79	103	124	149	219	194	252	306	355	516
53	73	93	112	130	326	87	112	136	157	234	202	260	318	368	531
54	81	100	122	139	356	91	120	145	174	248	207	273	331	384	546
55	86	110	132	152	380	99	128	157	186	273	215	277	343	397	570
56	93	117	144	164	414	107	140	169	202	292	223	289	351	413	585
57	100	130	156	178	448	116	149	182	215	312	231	298	364	426	604
58	110	139	169	196	487	124	161	198	227	331	236	310	380	438	623
59	120	152	183	213	526	132	174	215	248	360	244	318	393	450	643
60	125	161	196	225	560	140	182	223	260	370	248	322	393	459	648
61	137	176	213	247	609	149	194	240	277	399	256	331	409	471	667
62	149	191	232	269	662	157	211	256	298	424	260	343	421	483	687
63	161	208	254	293	721	169	223	273	318	453	273	355	430	500	706
64	176	227	276	320	784	182	236	293	339	482	281	364	446	517	726
65	193	249	303	350	857	194	252	314	364	516	289	376	463	537	755
66	220	286	347	403	984	219	285	351	405	575	314	409	504	578	813
67	242	313	381	440	1,072	227	302	372	434	609	318	417	517	599	838
68	264	340	416	482	1,169	240	322	397	459	648	326	434	533	616	862
69	286	372	455	528	1,276	256	339	417	483	682	339	446	545	632	882
70	313	408	499	579	1,398	269	355	438	508	716	347	455	558	649	906
71	359	469	577	670	1,612	302	397	488	566	799	376	492	603	698	979
72	394	513	631	734	1,763	310	413	508	591	833	380	500	616	715	999
73	428	560	689	800	1,924	322	430	529	620	867	384	508	624	731	1,013
74	465	609	751	873	2,094	339	446	554	645	901	393	517	636	740	1,028
75	496	648	797	929	2,216	339	450	558	645	906	384	508	624	723	1,003
76	575	753	929	1,083	2,586	372	496	612	715	1,003	409	541	669	777	1,081
77	628	826	1,020	1,191	2,840	380	508	632	740	1,033	409	545	674	781	1,081
78	685	905	1,120	1,308	3,112	397	525	649	760	1,067	413	545	674	781	1,086
79	748	990	1,227	1,435	3,414	339	450	558	657	916	413	541	674	785	1,081
80	822	1,088	1,352	1,584	3,765	347	459	570	669	940	413	545	674	785	1,086
81	895	1,188	1,482	1,738	4,130	347	467	578	682	950	413	541	669	777	1,072
82	976	1,301	1,621	1,907	4,525	351	467	583	686	960	405	533	661	764	1,052
83	1,064	1,418	1,773	2,088	4,954	351	471	587	686	960	397	525	649	752	1,028
84	1,159	1,548	1,939	2,286	5,421	351	471	587	690	960	388	512	628	731	999
85	1,262	1,690	2,117	2,501	5,933	347	467	583	690	960	380	496	612	711	964

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 for Policies Issued On or After 9/16/2002 - Year 2
Rates per $10 Daily Benefit

	Policy Form: LTQ11-336-MA-PA-601					**Rider: 11-SIP-PA-998**					**Rider: 11-CIP-PA-998**				
	Base Rates with No Inflation Protection					**Simple Inflation Protection Rider**					**Compound Inflation Protection Rider**				
Issue	**Benefit Period**					**Benefit Period**					**Benefit Period**				
Age	*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	81	100	120	137	356	99	128	157	182	278	471	612	752	872	1,257
40	83	105	127	144	375	107	136	165	194	292	479	624	760	884	1,271
41	88	110	132	154	395	112	145	178	202	312	483	632	773	893	1,291
42	93	117	139	161	414	116	153	190	219	331	492	640	785	909	1,310
43	98	122	149	171	438	124	161	198	231	346	496	649	793	917	1,325
44	103	130	156	181	463	132	169	211	244	365	504	657	806	930	1,339
45	108	137	166	191	487	140	182	219	260	390	512	665	814	942	1,359
46	115	144	174	200	516	145	194	236	277	409	517	674	826	959	1,374
47	120	154	186	213	546	157	202	248	289	434	525	678	831	967	1,388
48	127	161	196	225	575	165	215	264	310	458	529	690	843	979	1,403
49	134	171	208	240	609	174	227	277	326	482	517	674	826	959	1,369
50	139	178	218	249	633	182	236	289	339	502	525	682	835	971	1,393
51	142	181	220	254	643	186	240	293	343	511	521	682	835	967	1,383
52	149	188	230	267	672	190	252	306	355	526	529	690	843	979	1,403
53	156	200	245	281	711	202	264	322	380	555	517	674	826	959	1,364
54	166	213	259	301	755	215	281	343	397	580	521	678	831	963	1,374
55	176	227	276	318	799	223	293	359	421	614	525	682	835	971	1,383
56	186	240	293	340	848	240	310	380	438	643	529	690	843	975	1,393
57	198	254	311	359	896	248	326	401	467	677	529	694	847	983	1,398
58	210	271	330	384	955	260	339	417	483	706	529	694	851	988	1,403
59	222	289	352	406	1,008	273	355	438	512	740	525	682	839	979	1,383
60	227	293	359	418	1,033	277	359	442	512	740	525	686	839	971	1,383
61	242	313	381	443	1,096	285	376	463	537	770	512	674	831	963	1,359
62	257	333	406	472	1,159	298	388	479	558	804	512	674	831	959	1,359
63	271	352	430	501	1,232	310	405	500	578	833	517	674	831	959	1,354
64	289	374	457	531	1,305	318	421	521	603	862	512	674	826	963	1,354
65	306	399	489	567	1,388	331	434	537	624	891	512	674	826	959	1,349
66	342	445	545	636	1,549	359	475	587	682	974	537	707	872	1,008	1,422
67	362	472	579	675	1,641	372	488	603	702	999	533	702	868	1,004	1,413
68	384	501	616	716	1,739	380	500	616	719	1,023	529	698	859	996	1,403
69	406	531	653	760	1,846	388	512	632	736	1,042	525	694	855	992	1,388
70	430	565	694	809	1,958	397	521	645	752	1,067	521	686	847	979	1,374
71	482	633	782	912	2,202	426	562	694	814	1,154	545	719	884	1,029	1,447
72	511	672	829	968	2,338	430	570	711	826	1,169	537	707	876	1,016	1,422
73	540	712	880	1,029	2,479	438	578	719	839	1,184	529	698	864	1,004	1,403
74	572	756	934	1,093	2,625	442	583	727	847	1,193	521	686	851	988	1,378
75	594	782	966	1,127	2,698	430	570	707	826	1,159	496	653	806	938	1,305
76	672	888	1,100	1,286	3,083	459	612	760	888	1,247	517	682	843	983	1,364
77	719	951	1,179	1,381	3,302	463	616	769	897	1,262	504	669	826	963	1,339
78	770	1,020	1,267	1,484	3,546	463	620	773	905	1,266	496	653	810	942	1,305
79	824	1,095	1,362	1,597	3,809	397	521	653	769	1,076	488	636	789	926	1,276
80	888	1,181	1,472	1,729	4,116	393	525	653	769	1,076	475	628	773	905	1,252
81	954	1,271	1,587	1,868	4,442	393	521	649	760	1,072	467	612	756	880	1,213
82	1,027	1,372	1,714	2,020	4,803	393	517	649	760	1,062	450	595	736	855	1,174
83	1,108	1,479	1,853	2,186	5,192	380	517	640	752	1,052	438	578	711	826	1,135
84	1,196	1,599	2,005	2,369	5,621	380	508	632	744	1,042	421	558	686	797	1,091
85	1,291	1,731	2,171	2,570	6,093	372	496	628	736	1,028	409	533	661	764	1,042

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 for Policies Issued On or After 9/16/2002 - Year 2
Rates per $10 Daily Benefit

	Policy Form: LTQ11-336-MA-PA-601					**Rider: 11-SIP-PA-998**					**Rider: 11-CIP-PA-998**				
	Base Rates with No Inflation Protection					**Simple Inflation Protection Rider**					**Compound Inflation Protection Rider**				
Issue	**Benefit Period**					**Benefit Period**					**Benefit Period**				
Age	*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	49	61	71	83	214	58	74	95	107	166	281	364	446	517	740
40	51	64	76	88	224	62	83	99	116	175	285	372	455	521	755
41	54	66	81	93	239	66	87	103	120	185	289	376	459	533	765
42	56	71	86	98	248	70	91	112	128	200	293	380	467	541	779
43	59	76	90	103	263	74	95	116	140	209	302	384	459	550	789
44	64	78	95	110	278	79	103	124	145	224	302	397	479	558	804
45	66	83	100	115	297	83	112	132	157	229	306	401	488	566	809
46	71	88	108	122	312	87	116	140	165	248	310	405	496	574	823
47	73	93	112	130	331	95	124	153	178	263	318	413	504	583	833
48	78	100	120	139	351	99	128	161	186	278	322	417	512	591	848
49	83	105	127	147	370	107	140	169	198	297	322	421	512	595	848
50	88	112	134	156	395	112	145	182	207	307	318	413	508	583	838
51	88	112	134	156	395	112	145	182	211	312	326	426	525	603	862
52	93	120	144	166	419	120	153	190	223	326	322	417	512	591	848
53	100	127	154	178	448	124	165	202	231	341	322	417	512	591	843
54	105	134	164	191	477	136	178	215	248	360	326	426	521	599	852
55	112	144	176	203	507	145	186	227	264	385	331	430	525	612	867
56	120	154	188	218	541	153	198	240	277	404	335	438	533	616	877
57	130	166	200	232	580	157	207	256	298	429	339	442	541	628	886
58	137	176	215	249	619	169	223	269	314	453	343	450	550	632	896
59	147	191	230	267	662	178	231	289	331	477	347	450	558	645	906
60	154	198	242	279	692	182	240	293	343	487	343	446	545	636	896
61	166	213	259	301	740	190	252	310	359	516	343	455	554	640	906
62	178	230	279	323	794	202	264	326	380	541	347	459	562	649	916
63	191	247	301	347	852	215	277	343	401	570	355	463	566	657	925
64	205	264	323	374	916	223	298	364	421	599	359	471	574	665	935
65	220	286	350	406	989	236	310	380	438	623	364	475	583	674	945
66	249	325	396	460	1,115	260	339	421	488	692	388	504	620	719	1,013
67	269	350	428	496	1,203	273	355	438	508	726	393	512	628	727	1,023
68	291	379	465	538	1,301	285	372	459	533	755	397	517	636	736	1,033
69	313	408	501	582	1,408	298	388	479	558	784	401	525	645	748	1,042
70	340	443	545	631	1,525	306	405	496	583	818	405	533	649	756	1,052
71	386	506	623	724	1,744	339	446	545	640	901	430	566	694	806	1,125
72	418	548	675	787	1,890	351	463	570	661	930	434	570	702	810	1,135
73	452	594	734	853	2,046	359	475	587	686	964	434	574	702	818	1,145
74	489	643	792	924	2,216	372	492	607	707	994	438	574	711	822	1,145
75	518	682	839	978	2,333	372	488	607	707	994	426	558	694	802	1,115
76	599	787	973	1,134	2,713	401	533	661	777	1,081	450	595	731	855	1,184
77	650	858	1,061	1,242	2,961	413	550	682	793	1,115	450	595	736	851	1,184
78	707	934	1,159	1,357	3,234	426	566	698	818	1,140	450	595	731	847	1,174
79	770	1,020	1,267	1,484	3,531	359	483	599	702	979	446	587	723	843	1,164
80	839	1,115	1,386	1,626	3,867	368	488	607	715	994	442	583	719	839	1,154
81	912	1,213	1,513	1,778	4,223	372	492	612	719	1,003	438	578	711	826	1,140
82	993	1,323	1,650	1,941	4,613	368	492	620	727	1,008	430	566	698	814	1,115
83	1,078	1,438	1,800	2,120	5,032	368	496	616	727	1,008	417	554	682	793	1,086
84	1,171	1,565	1,961	2,313	5,485	364	488	612	723	1,008	409	541	665	773	1,057
85	1,271	1,702	2,135	2,523	5,981	364	488	607	723	1,003	397	521	645	748	1,018

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 for Policies Issued On or After 9/16/2002 - Year 2
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				
	Benefit Period					Benefit Period					Benefit Period				
Issue Age	*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	29	34	42	46	122	29	37	45	54	83	120	153	186	219	321
40	32	37	44	51	132	29	41	50	54	88	120	161	194	223	331
41	34	39	46	54	136	33	45	54	62	97	124	165	202	231	341
42	34	42	51	56	146	37	41	54	70	102	132	174	207	244	356
43	37	44	54	61	156	37	54	62	70	112	136	178	215	252	365
44	39	49	56	64	166	41	50	70	79	122	140	182	223	260	380
45	42	51	59	68	180	45	58	74	87	127	145	190	236	273	390
46	44	56	64	76	190	50	58	79	87	136	149	190	244	273	404
47	46	56	68	78	200	54	74	87	99	151	157	207	248	293	424
48	51	61	76	86	219	54	74	87	103	156	157	215	256	298	429
49	54	66	78	93	234	58	79	99	112	170	165	219	269	310	448
50	56	71	86	100	248	70	87	103	116	185	169	223	273	310	453
51	56	73	86	100	253	70	83	107	120	185	178	223	277	318	463
52	61	78	95	108	273	70	91	112	136	195	178	223	273	322	463
53	66	83	100	117	292	79	103	124	140	214	182	236	289	331	477
54	73	90	110	125	321	83	107	132	157	224	186	244	298	347	492
55	78	100	120	137	341	87	112	140	165	248	190	248	306	355	516
56	83	105	130	147	375	99	128	153	182	263	202	260	318	372	526
57	90	117	142	161	404	103	132	161	194	278	207	269	326	380	541
58	100	125	152	176	438	112	145	178	207	297	211	281	343	393	560
59	108	137	166	191	472	120	157	190	223	326	219	285	351	405	580
60	112	144	176	203	507	128	165	202	236	331	223	293	355	413	580
61	122	159	191	222	550	136	174	219	248	356	231	298	368	426	599
62	134	171	210	242	594	140	190	227	269	385	236	310	376	434	619
63	144	188	230	264	648	153	198	244	285	409	248	318	384	450	638
64	159	205	249	289	706	161	211	264	306	434	252	326	401	463	653
65	174	225	274	315	770	174	227	281	326	468	260	339	413	483	682
66	198	257	313	364	886	198	256	314	364	516	281	368	455	521	731
67	218	281	342	396	964	207	273	335	393	550	285	376	467	541	755
68	237	306	374	433	1,052	215	289	355	413	585	293	393	479	554	774
69	257	335	408	474	1,150	231	306	376	438	614	306	401	492	570	794
70	281	367	450	521	1,257	244	322	393	459	648	314	409	500	587	818
71	323	423	518	604	1,452	273	355	442	508	721	339	442	545	628	882
72	355	462	567	660	1,588	277	372	459	533	750	343	450	554	645	896
73	386	504	621	719	1,734	289	388	475	558	779	343	459	562	661	911
74	418	548	675	785	1,885	306	401	500	583	813	355	467	574	665	925
75	447	584	716	836	1,997	306	405	504	578	813	343	455	562	653	901
76	518	677	836	976	2,328	335	446	550	640	901	368	488	603	698	974
77	565	743	917	1,071	2,557	343	459	570	665	930	368	492	607	702	974
78	616	814	1,007	1,179	2,801	355	471	587	682	960	372	492	607	702	979
79	672	892	1,105	1,291	3,074	306	405	500	591	823	372	483	607	707	974
80	738	980	1,218	1,425	3,390	314	409	512	603	843	372	488	603	707	974
81	804	1,068	1,333	1,565	3,716	314	421	521	612	857	372	488	603	698	964
82	878	1,171	1,460	1,716	4,072	318	421	525	616	862	364	479	595	690	950
83	958	1,276	1,597	1,880	4,457	314	426	525	616	867	355	471	583	674	925
84	1,044	1,394	1,746	2,059	4,881	314	421	529	620	862	347	459	566	657	896
85	1,134	1,521	1,905	2,252	5,338	314	421	525	620	867	343	446	554	640	867

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 for Policies Issued On or After 9/16/2002 - Year 2
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				
	Benefit Period					Benefit Period					Benefit Period				
Issue Age	*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	44	56	64	76	195	54	66	87	95	146	252	326	401	463	662
40	46	56	68	78	200	54	74	91	107	161	256	335	409	471	682
41	49	59	73	83	214	58	79	91	107	166	260	339	413	479	687
42	51	64	78	88	224	62	83	99	116	180	264	343	417	488	701
43	54	68	81	93	239	66	87	107	124	185	269	347	413	496	706
44	56	71	86	100	248	74	91	112	128	205	273	355	434	500	726
45	59	76	90	103	268	74	99	120	145	205	277	359	438	512	726
46	64	78	98	110	283	79	107	124	149	224	281	368	446	517	740
47	66	83	100	117	297	87	112	140	157	239	285	372	455	525	750
48	71	90	108	125	317	87	116	145	169	248	289	376	463	533	760
49	76	95	115	132	331	95	124	153	178	268	289	380	459	537	765
50	78	100	122	142	356	103	132	161	186	278	289	372	455	525	755
51	78	100	122	142	356	103	132	161	190	283	298	384	471	541	774
52	83	108	130	149	375	107	136	174	202	297	289	376	463	533	765
53	90	115	139	161	404	112	149	182	207	307	289	376	459	529	760
54	95	122	147	171	429	120	157	194	223	326	293	380	471	541	770
55	100	130	159	183	458	132	169	202	236	346	298	388	471	550	779
56	108	139	169	196	487	136	178	219	248	365	302	393	479	554	789
57	117	149	181	210	521	140	186	231	264	385	306	401	488	562	799
58	122	159	193	225	555	153	198	244	281	409	310	405	496	570	809
59	132	171	208	240	594	161	211	260	298	434	314	405	500	583	818
60	139	178	218	252	623	161	215	264	306	438	306	401	492	570	804
61	149	191	232	271	667	174	227	281	322	463	310	409	500	574	813
62	161	208	252	291	716	182	236	293	343	487	310	413	504	583	823
63	171	222	271	313	770	194	248	306	359	511	322	417	508	591	833
64	186	237	291	337	823	198	269	326	380	541	322	426	517	599	843
65	198	257	315	364	891	211	281	343	397	560	326	430	525	607	848
66	225	293	357	413	1,003	236	306	380	438	623	347	455	558	649	911
67	242	315	386	447	1,081	244	318	393	455	653	355	459	562	653	921
68	262	342	418	484	1,169	256	335	413	479	682	359	463	574	661	930
69	281	367	452	523	1,266	269	351	430	504	706	364	475	578	674	940
70	306	399	491	567	1,374	277	364	446	525	735	364	479	583	682	945
71	347	455	562	650	1,568	306	405	488	578	813	388	512	624	727	1,013
72	377	494	606	709	1,700	314	413	517	595	838	388	512	632	727	1,023
73	408	535	660	768	1,841	322	426	529	620	867	388	517	632	736	1,033
74	440	579	714	831	1,997	335	442	545	636	891	393	517	636	740	1,028
75	467	614	756	880	2,099	335	438	545	636	896	384	504	624	723	1,003
76	540	709	875	1,022	2,440	359	479	595	698	974	405	533	661	769	1,067
77	584	773	956	1,117	2,664	372	496	612	715	1,003	409	537	661	769	1,067
78	636	841	1,044	1,223	2,913	384	508	628	736	1,023	405	533	657	760	1,057
79	694	917	1,139	1,335	3,181	322	438	541	632	877	401	529	653	760	1,047
80	756	1,002	1,247	1,465	3,483	331	442	550	640	891	397	525	649	752	1,037
81	822	1,090	1,362	1,599	3,799	335	446	550	649	906	393	521	640	744	1,028
82	892	1,191	1,487	1,748	4,150	335	442	558	653	911	388	508	628	731	1,003
83	971	1,293	1,619	1,907	4,530	331	446	558	657	906	376	500	616	715	974
84	1,054	1,408	1,765	2,081	4,934	326	438	550	653	911	368	488	599	698	955
85	1,144	1,531	1,922	2,271	5,382	326	442	545	649	906	355	471	578	674	916

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 for Policies Issued On or After 9/16/2002 - Year 2
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				
	Benefit Period					Benefit Period					Benefit Period				
Issue Age	*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	34	39	42	46	117	25	33	37	45	68	99	120	136	157	219
40	34	39	44	49	127	29	37	41	45	68	107	128	140	161	219
41	37	42	46	51	132	29	37	41	50	73	107	132	145	165	224
42	37	44	49	54	136	33	41	45	54	78	116	132	149	169	234
43	39	46	51	56	141	37	41	45	54	83	116	136	153	174	239
44	42	49	54	59	146	37	45	50	58	88	120	140	157	182	248
45	44	51	56	64	156	37	45	54	58	88	120	145	161	182	248
46	44	54	59	66	161	45	50	58	66	97	128	149	169	190	258
47	46	56	61	68	170	45	54	62	70	97	132	153	174	194	263
48	49	59	64	73	175	50	58	66	70	107	136	161	182	198	273
49	54	61	68	76	185	50	62	70	79	112	136	165	186	207	278
50	56	64	71	81	195	54	66	74	83	112	136	165	186	202	273
51	56	66	73	81	195	54	66	70	83	117	140	169	186	211	283
52	59	68	76	86	205	58	70	79	87	122	140	169	190	211	278
53	61	73	81	90	214	62	74	83	95	127	149	174	194	215	287
54	66	78	86	95	224	66	79	91	99	136	153	178	202	223	297
55	71	83	90	103	239	70	83	95	103	146	157	186	207	227	302
56	76	88	98	110	253	74	91	99	112	151	161	190	211	236	312
57	81	95	105	117	268	79	95	107	120	161	165	194	215	240	317
58	86	100	112	125	287	87	103	112	128	170	174	202	223	248	326
59	93	108	120	132	307	91	112	120	136	175	174	211	231	260	331
60	95	112	125	139	317	95	112	124	136	185	178	211	231	256	331
61	103	122	134	149	336	99	116	132	145	195	182	215	236	264	341
62	110	130	144	159	360	107	128	136	157	205	190	223	244	273	346
63	120	139	154	171	385	112	132	149	165	214	190	227	248	277	356
64	127	149	166	183	409	120	140	153	174	224	198	236	256	285	365
65	139	161	178	198	438	124	149	165	182	239	202	244	264	293	375
66	156	183	203	225	497	140	165	182	198	258	223	260	285	314	399
67	169	198	218	242	531	149	174	190	211	273	227	264	293	322	409
68	183	213	235	259	570	153	182	198	223	283	231	273	298	331	419
69	198	230	252	279	614	161	190	211	231	292	236	281	306	339	424
70	213	249	271	301	658	169	194	219	240	302	244	281	314	343	429
71	242	281	308	342	740	186	219	240	260	331	260	306	335	368	463
72	259	303	333	367	789	194	223	244	273	341	269	310	339	376	468
73	279	325	357	394	843	198	231	252	277	351	269	314	343	380	472
74	298	347	381	421	896	207	240	260	285	356	273	318	347	380	472
75	320	372	403	445	940	202	236	260	281	351	269	310	339	372	463
76	364	423	460	506	1,067	219	256	281	306	380	289	331	364	397	492
77	394	455	494	543	1,140	223	260	285	314	385	289	335	368	401	492
78	423	489	531	582	1,223	231	264	289	318	385	289	335	368	401	487
79	455	526	570	626	1,305	194	227	248	269	326	293	339	368	401	487
80	491	567	616	672	1,398	198	227	244	273	326	298	343	368	405	492
81	531	611	660	724	1,495	198	227	248	264	326	298	343	372	401	487
82	575	658	712	775	1,603	194	227	244	269	326	293	343	368	401	487
83	621	712	765	834	1,719	194	227	244	264	321	293	339	368	397	477
84	670	768	824	895	1,841	198	223	244	260	317	293	335	364	393	477
85	724	826	885	961	1,973	194	223	240	256	307	293	335	359	388	468

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 for Policies Issued On or After 9/16/2002 - Year 2
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				
	Benefit Period					Benefit Period					Benefit Period				
Issue Age	*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	76	88	98	110	273	74	95	107	120	180	347	417	463	517	701
40	78	90	100	112	283	83	99	116	132	190	351	421	471	529	711
41	81	95	105	117	292	87	103	120	136	200	359	426	475	533	716
42	83	98	110	122	307	91	112	124	140	200	364	434	479	537	716
43	88	103	115	127	317	95	116	128	149	209	364	434	483	541	726
44	90	108	120	134	326	99	120	136	153	224	368	438	488	541	731
45	95	110	125	139	341	103	128	140	161	229	372	446	492	550	731
46	98	115	130	144	351	112	132	149	169	239	376	446	496	554	735
47	103	120	134	149	365	116	140	157	178	248	376	450	500	558	740
48	108	125	139	156	380	120	149	165	186	253	372	446	492	545	711
49	110	132	147	164	390	128	153	169	190	268	376	442	492	550	731
50	112	134	149	166	395	132	153	174	194	268	376	442	488	545	711
51	117	137	152	171	409	132	161	178	198	273	376	446	496	554	731
52	117	139	154	174	409	136	161	182	202	278	380	446	496	550	716
53	125	147	161	181	424	140	169	190	215	292	372	446	496	550	731
54	130	154	169	191	443	149	178	198	219	297	368	434	483	537	701
55	137	161	178	198	463	153	182	207	231	307	368	438	483	541	697
56	142	169	186	208	482	165	194	215	240	317	372	438	488	541	697
57	149	176	196	218	502	169	202	223	248	326	372	442	483	541	697
58	156	186	205	227	521	178	207	231	260	341	376	438	483	541	697
59	164	193	215	240	541	182	219	240	264	356	364	430	471	521	667
60	166	196	218	242	546	182	215	236	264	346	372	438	479	533	692
61	174	205	227	252	570	190	223	244	277	356	359	426	463	517	658
62	183	215	237	264	594	194	231	256	281	365	359	421	463	517	653
63	193	225	249	276	619	198	236	260	289	375	355	421	463	512	653
64	203	237	262	289	643	202	240	264	298	385	355	417	459	508	648
65	213	249	274	303	672	211	248	273	306	395	355	417	459	508	643
66	235	276	303	335	740	227	264	293	326	419	372	434	479	529	667
67	247	289	318	352	774	231	273	298	331	424	368	434	471	521	658
68	259	303	333	367	804	236	277	306	339	429	364	426	467	521	653
69	271	318	347	386	838	240	281	310	339	434	359	421	463	508	643
70	284	333	364	403	877	244	285	314	343	434	359	417	459	504	628
71	315	369	403	445	964	256	302	331	368	458	372	434	475	529	653
72	330	386	423	467	1,003	260	302	331	368	458	368	430	467	517	643
73	345	403	440	487	1,042	260	306	335	368	458	364	421	463	508	628
74	362	421	460	509	1,081	260	306	335	364	453	355	417	455	496	614
75	377	435	474	523	1,106	252	293	322	351	438	339	397	430	471	580
76	418	487	528	582	1,227	269	310	343	372	458	355	409	450	492	599
77	443	511	557	611	1,286	269	314	339	372	458	347	405	438	483	589
78	467	540	587	645	1,349	269	310	339	368	453	343	397	434	471	575
79	494	572	621	680	1,417	223	260	281	306	375	339	388	421	463	565
80	526	606	658	719	1,495	223	256	277	306	370	335	388	417	459	555
81	560	645	699	763	1,578	219	252	269	298	360	331	380	409	446	546
82	599	687	743	809	1,671	215	252	269	293	360	322	376	401	438	531
83	641	734	792	861	1,778	215	248	264	289	346	318	372	393	430	516
84	687	785	844	917	1,885	207	244	260	285	341	314	364	393	426	511
85	736	841	902	978	2,007	207	236	252	277	326	314	355	380	413	497

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 for Policies Issued On or After 9/16/2002 - Year 2
Rates per $10 Daily Benefit

	Policy Form: HTQ11-338-MA-PA-601					**Rider: 11-SIP-PA-998**					**Rider: 11-CIP-PA-998**				
	Base Rates with No Inflation Protection					**Simple Inflation Protection Rider**					**Compound Inflation Protection Rider**				
Issue	**Benefit Period**					**Benefit Period**					**Benefit Period**				
Age	*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	46	54	59	66	166	45	58	66	74	107	207	248	277	310	419
40	46	56	61	68	170	50	58	70	79	117	211	252	281	314	424
41	49	59	64	73	180	54	62	74	79	117	215	252	285	314	424
42	51	61	66	76	185	54	66	74	83	122	215	256	289	318	434
43	54	64	71	78	195	58	70	79	91	127	219	260	289	326	434
44	56	66	73	81	200	58	70	83	95	136	219	264	293	331	438
45	59	68	76	86	209	62	74	87	95	136	223	269	298	331	443
46	61	71	78	88	219	66	83	91	103	141	227	273	302	335	443
47	64	76	83	93	224	70	83	95	107	151	227	273	302	339	448
48	66	78	86	98	234	74	87	103	112	156	231	277	310	339	448
49	68	81	90	103	244	79	95	103	116	166	231	273	302	335	443
50	71	83	93	105	248	83	99	107	120	166	231	277	306	339	448
51	73	86	95	108	253	83	99	112	124	170	231	277	306	339	448
52	76	88	98	110	258	83	103	116	128	175	231	277	310	343	453
53	78	93	103	115	273	91	107	120	136	180	231	273	302	339	443
54	83	98	110	122	287	95	112	124	140	185	231	277	302	339	438
55	88	103	115	130	297	99	120	132	145	200	236	281	306	339	448
56	93	110	122	134	312	103	124	136	157	209	240	281	310	347	448
57	98	115	127	144	326	112	132	145	161	214	240	285	314	347	453
58	105	122	134	152	346	112	136	153	169	224	240	289	318	351	453
59	110	130	144	159	365	120	145	157	178	229	244	289	318	355	453
60	115	134	147	164	370	120	145	161	182	239	240	285	314	347	448
61	120	142	156	174	395	128	153	169	186	244	244	289	314	351	448
62	127	152	166	186	414	136	157	174	194	253	248	289	318	351	453
63	137	159	176	196	438	136	165	182	202	263	248	293	322	355	453
64	144	171	188	208	463	145	169	186	211	273	252	293	322	359	458
65	154	181	200	222	492	153	182	194	219	283	256	302	326	359	458
66	174	203	222	247	546	165	194	215	240	307	269	318	347	384	487
67	186	218	240	264	580	169	202	219	248	317	273	318	347	388	492
68	198	232	254	281	619	178	211	231	256	321	277	322	355	393	492
69	213	247	271	301	658	182	219	240	264	331	277	326	355	393	492
70	227	264	291	323	701	190	223	244	269	341	281	331	359	393	492
71	257	298	328	362	784	207	244	264	293	365	298	347	380	417	521
72	274	320	350	386	833	211	248	273	302	375	298	347	380	421	521
73	291	340	372	411	882	219	256	281	310	380	302	351	384	421	521
74	311	362	396	438	930	223	260	285	314	390	302	351	384	421	521
75	330	384	418	460	974	223	256	281	310	380	298	343	372	409	507
76	377	435	474	521	1,101	236	277	302	331	404	310	364	393	434	531
77	403	467	509	557	1,174	240	281	306	335	409	310	364	393	434	526
78	433	501	543	597	1,247	244	281	310	339	414	314	359	393	430	526
79	465	535	582	638	1,330	207	240	260	285	351	310	364	393	426	521
80	499	577	626	685	1,422	207	240	260	281	346	314	359	388	426	516
81	538	619	670	734	1,515	211	240	260	281	346	310	359	388	421	516
82	579	665	719	785	1,622	207	240	256	281	336	310	359	384	417	507
83	623	716	773	841	1,734	207	236	252	277	331	310	355	380	413	502
84	672	770	829	900	1,851	202	236	248	277	326	310	355	376	413	497
85	726	829	890	963	1,978	202	231	244	269	321	306	351	372	405	487

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 for Policies Issued On or After 9/16/2002 - Year 3
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				
	Benefit Period					Benefit Period					Benefit Period				
Issue Age	*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	29	32	37	104	24	29	39	44	69	121	155	193	218	317
40	24	29	34	39	109	29	39	44	48	75	131	164	198	227	328
41	27	32	37	42	115	29	39	48	53	81	131	169	208	237	340
42	29	34	39	44	127	29	39	48	58	86	135	174	213	247	351
43	29	37	42	46	133	34	44	53	63	98	145	184	222	256	369
44	32	39	44	49	144	39	48	58	68	104	150	189	232	266	380
45	34	42	46	54	156	39	48	68	73	109	155	198	242	276	392
46	37	44	51	56	167	44	58	68	82	115	160	203	247	290	403
47	39	46	54	61	179	48	63	77	87	127	164	213	261	300	421
48	42	49	59	66	190	48	68	82	92	138	169	222	266	309	438
49	44	54	64	71	207	58	73	87	102	150	179	232	276	319	449
50	46	56	68	76	219	63	82	97	111	167	184	237	280	329	461
51	46	59	68	78	225	63	77	97	111	161	189	237	290	329	467
52	51	64	73	83	242	68	87	106	126	179	189	242	295	338	472
53	54	68	81	90	265	77	92	116	135	190	198	251	305	353	490
54	59	73	88	100	282	82	102	121	140	207	203	261	314	363	513
55	64	81	95	108	311	87	111	135	155	225	213	271	329	377	530
56	68	86	103	117	334	97	121	150	169	242	222	285	343	392	553
57	76	95	112	130	369	102	131	160	179	259	227	290	353	406	565
58	83	103	122	139	398	106	140	174	198	282	232	305	367	425	593
59	90	112	134	154	438	116	155	184	213	300	242	314	382	440	611
60	95	120	144	164	461	126	160	193	222	323	247	319	387	445	622
61	103	132	156	178	507	135	169	213	242	340	256	329	401	464	640
62	112	144	171	196	553	145	184	227	261	369	266	343	416	479	663
63	125	156	188	215	605	155	203	242	280	392	276	358	430	498	686
64	134	171	205	237	663	169	218	261	300	415	290	372	450	512	709
65	149	191	227	262	726	179	227	280	319	449	300	382	469	532	743
66	171	218	264	301	841	203	261	314	363	501	324	421	508	585	801
67	188	240	289	330	916	213	276	334	387	536	334	435	527	604	835
68	205	264	318	364	1,008	227	290	353	406	565	348	450	541	624	858
69	225	289	347	399	1,100	242	309	377	435	599	363	464	566	648	887
70	247	318	384	440	1,210	256	329	396	454	628	372	479	580	667	916
71	286	369	445	511	1,400	285	363	445	508	703	406	522	633	725	997
72	313	403	489	560	1,538	295	382	464	537	732	416	537	648	749	1,020
73	342	443	533	614	1,682	309	396	488	561	766	425	546	667	769	1,049
74	374	482	584	670	1,832	319	416	508	585	801	435	561	682	788	1,072
75	403	516	623	716	1,947	319	421	512	585	801	425	556	677	774	1,060
76	467	601	729	836	2,276	358	464	561	648	881	464	604	730	841	1,147
77	511	660	800	919	2,495	367	474	580	667	916	474	609	745	856	1,170
78	560	724	878	1,010	2,737	377	488	595	687	939	474	619	754	870	1,181
79	611	792	961	1,108	2,996	324	421	512	590	807	483	624	764	880	1,198
80	670	868	1,056	1,218	3,296	334	430	522	609	824	493	643	778	899	1,221
81	731	951	1,156	1,335	3,607	334	430	532	609	830	498	643	783	909	1,233
82	797	1,037	1,264	1,460	3,941	338	440	532	619	830	498	648	788	914	1,239
83	868	1,130	1,379	1,594	4,298	334	440	532	619	835	498	653	793	919	1,244
84	946	1,232	1,504	1,741	4,690	334	435	537	619	835	498	653	798	923	1,250
85	1,029	1,342	1,641	1,902	5,116	334	430	527	609	830	498	653	798	923	1,256

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 for Policies Issued On or After 9/16/2002 - Year 3
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				
	Benefit Period					Benefit Period					Benefit Period				
Issue Age	*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	73	86	95	277	82	102	126	145	213	454	580	701	807	1,141
40	61	76	88	100	288	87	111	135	155	230	459	590	716	822	1,164
41	66	81	95	108	305	92	116	140	164	248	464	599	725	832	1,181
42	68	86	100	112	323	97	126	150	179	259	474	609	735	851	1,198
43	73	90	105	120	346	102	131	164	189	277	479	619	749	861	1,210
44	76	95	112	127	363	111	140	169	198	294	488	628	759	870	1,233
45	81	100	117	134	386	116	150	184	213	311	493	638	774	885	1,244
46	86	105	125	142	409	121	160	193	227	328	498	648	783	899	1,262
47	90	110	132	152	432	131	174	208	237	351	508	657	793	909	1,279
48	95	117	139	159	461	140	184	222	256	369	512	667	807	923	1,296
49	100	125	149	169	484	150	193	232	276	398	503	653	788	909	1,273
50	103	130	156	178	507	160	203	247	285	415	517	662	798	919	1,291
51	105	132	156	181	519	160	208	251	285	415	512	662	803	919	1,285
52	110	139	166	188	542	169	213	261	305	432	517	667	807	933	1,302
53	117	147	176	200	576	174	232	276	324	461	508	657	793	914	1,273
54	125	156	188	215	611	184	242	295	338	490	512	662	803	923	1,291
55	132	166	200	230	651	198	256	309	358	513	517	672	807	928	1,302
56	139	178	213	245	691	213	271	329	377	542	522	672	817	938	1,314
57	149	188	227	259	737	222	290	348	401	570	527	682	827	952	1,325
58	159	200	242	276	789	232	305	367	425	593	532	687	832	957	1,331
59	169	215	257	296	835	247	314	387	445	628	527	682	832	952	1,319
60	174	220	264	303	858	247	324	392	450	634	527	682	827	948	1,319
61	183	235	284	325	916	261	338	406	469	663	522	677	817	938	1,302
62	196	249	301	347	974	271	353	430	488	691	527	682	822	943	1,308
63	208	267	323	369	1,037	285	367	445	512	714	527	682	822	948	1,314
64	222	284	342	394	1,100	295	382	464	532	749	527	682	827	952	1,314
65	237	303	367	421	1,175	305	396	483	556	772	532	687	832	957	1,319
66	267	342	413	474	1,319	334	430	527	609	847	561	725	880	1,010	1,394
67	284	364	440	506	1,406	343	445	541	624	864	556	725	880	1,010	1,389
68	301	386	469	538	1,492	353	459	556	643	887	561	725	875	1,010	1,389
69	320	413	499	575	1,584	363	469	575	657	910	556	720	875	1,006	1,389
70	340	440	533	611	1,688	372	479	585	677	928	556	720	870	1,006	1,377
71	384	496	601	692	1,901	401	522	633	730	1,008	585	759	923	1,064	1,463
72	408	528	641	738	2,022	406	532	643	745	1,026	580	754	919	1,054	1,452
73	435	562	682	785	2,155	411	537	653	754	1,037	575	749	914	1,054	1,440
74	460	597	724	836	2,287	421	546	662	764	1,049	575	745	909	1,039	1,423
75	482	621	753	866	2,356	406	532	643	745	1,020	546	711	865	1,001	1,365
76	548	707	858	988	2,696	435	570	696	803	1,095	575	754	919	1,059	1,440
77	584	758	922	1,061	2,886	440	575	696	807	1,106	575	745	904	1,049	1,429
78	626	812	988	1,139	3,094	445	580	706	817	1,112	570	740	899	1,039	1,417
79	672	873	1,061	1,225	3,324	372	488	599	691	939	561	730	894	1,035	1,406
80	724	941	1,147	1,325	3,584	372	488	595	687	939	561	725	890	1,025	1,400
81	780	1,012	1,235	1,428	3,860	372	488	595	687	933	551	720	880	1,020	1,383
82	839	1,093	1,333	1,543	4,166	367	479	590	682	922	546	711	875	1,006	1,371
83	902	1,176	1,438	1,665	4,488	363	479	580	672	916	546	711	865	1,001	1,360
84	973	1,269	1,553	1,800	4,845	358	469	575	667	905	541	706	861	991	1,354
85	1,051	1,372	1,680	1,946	5,243	353	464	566	657	893	532	696	851	986	1,337

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 for Policies Issued On or After 9/16/2002 - Year 3
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				
	Benefit Period					Benefit Period					Benefit Period				
Issue Age	*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	37	44	51	56	167	48	63	73	87	127	266	343	416	479	674
40	37	46	54	61	173	53	63	82	92	138	276	348	425	488	686
41	39	49	56	64	184	58	68	87	102	144	280	358	435	498	697
42	42	51	61	68	196	58	73	87	106	156	280	363	435	503	709
43	44	54	64	73	207	63	82	97	111	167	285	372	445	512	720
44	46	56	68	76	219	68	87	102	121	179	290	377	454	522	737
45	49	61	71	81	236	73	92	111	131	184	295	382	464	532	743
46	51	64	76	86	248	77	97	116	135	196	305	392	469	541	755
47	54	68	81	90	265	82	102	126	145	207	309	396	479	551	766
48	59	73	86	98	282	82	106	135	155	219	309	401	488	556	778
49	61	76	90	103	300	92	121	145	169	236	314	406	488	566	784
50	66	81	98	110	317	97	126	150	179	254	309	401	479	556	778
51	66	81	98	110	317	97	126	150	179	254	319	416	498	575	801
52	68	88	103	117	340	106	131	164	189	265	314	401	493	566	784
53	73	93	110	127	363	111	140	174	198	282	319	406	493	566	789
54	78	100	117	134	386	121	150	189	213	305	324	411	503	580	801
55	83	105	127	144	415	126	164	198	227	323	329	425	508	585	812
56	90	115	137	156	444	131	169	208	242	340	334	425	517	595	830
57	98	122	147	169	478	140	184	222	256	363	334	435	527	604	841
58	103	132	156	181	513	155	193	237	271	380	343	440	537	614	853
59	112	142	169	193	547	160	208	251	290	409	348	450	546	628	870
60	117	149	178	203	576	164	213	256	300	421	343	445	537	619	858
61	125	159	193	220	622	179	227	271	314	438	353	454	546	628	870
62	134	174	208	237	668	189	237	290	334	467	358	459	556	638	881
63	147	186	225	257	720	193	251	305	353	490	363	469	566	648	899
64	156	200	242	279	778	208	271	324	372	519	372	479	575	657	910
65	171	218	262	301	841	218	285	343	392	542	377	488	590	677	928
66	193	249	301	345	956	242	309	377	430	599	401	517	624	720	991
67	210	269	325	374	1,031	251	329	396	454	634	411	527	638	730	1,014
68	227	293	352	406	1,118	266	338	416	474	663	416	537	653	745	1,026
69	247	318	384	440	1,216	276	358	435	498	686	425	546	662	759	1,043
70	269	345	418	479	1,319	290	377	454	522	714	430	556	672	774	1,060
71	308	396	479	553	1,515	319	411	503	570	789	459	599	725	832	1,141
72	335	430	523	599	1,648	329	430	517	599	818	469	609	735	851	1,158
73	364	469	567	653	1,786	338	440	541	619	847	474	614	749	861	1,175
74	394	509	616	709	1,936	353	459	556	638	876	479	624	759	870	1,193
75	421	543	655	753	2,051	353	454	556	638	870	474	609	745	856	1,164
76	487	628	760	875	2,379	382	498	609	701	956	508	657	798	919	1,256
77	531	685	831	956	2,598	392	512	624	720	979	508	662	807	928	1,262
78	577	746	907	1,044	2,829	401	527	638	740	1,008	512	672	812	938	1,279
79	628	814	990	1,139	3,088	343	450	546	633	858	517	672	817	948	1,285
80	685	888	1,081	1,247	3,376	348	459	561	643	870	522	682	827	957	1,296
81	746	968	1,179	1,362	3,682	348	459	561	648	876	522	677	832	957	1,302
82	809	1,054	1,284	1,484	4,004	353	454	561	648	887	522	682	832	962	1,308
83	878	1,144	1,396	1,616	4,356	353	459	561	648	881	522	682	832	962	1,308
84	954	1,242	1,518	1,760	4,736	348	459	556	643	876	522	682	832	962	1,308
85	1,034	1,350	1,650	1,914	5,151	343	454	556	643	870	522	682	832	962	1,308

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 for Policies Issued On or After 9/16/2002 - Year 3
Rates per $10 Daily Benefit

	Policy Form: LTQ11-336-MA-PA-601					**Rider: 11-SIP-PA-998**					**Rider: 11-CIP-PA-998**				
	Base Rates with No Inflation Protection					**Simple Inflation Protection Rider**					**Compound Inflation Protection Rider**				
Issue	**Benefit Period**					**Benefit Period**					**Benefit Period**				
Age	*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	39	46	51	161	39	48	58	73	109	155	198	242	285	421
40	34	42	49	56	173	39	53	63	73	115	160	208	251	290	432
41	37	44	51	59	179	44	58	73	82	127	164	213	266	305	449
42	39	46	56	64	190	44	53	73	87	138	169	222	271	314	467
43	42	49	59	68	207	48	68	82	92	144	174	232	280	324	478
44	44	54	64	71	219	53	68	87	102	156	179	237	290	338	495
45	46	56	66	76	236	58	77	97	111	167	189	247	305	353	513
46	49	61	71	83	248	63	77	102	116	179	193	251	314	358	530
47	51	64	76	88	265	68	92	111	126	196	203	266	324	377	553
48	56	68	83	95	288	73	97	116	135	207	208	276	334	387	565
49	59	73	88	103	305	77	102	126	145	225	218	285	348	401	588
50	64	78	95	110	328	87	111	135	155	242	218	290	353	406	593
51	64	81	95	110	334	87	111	140	160	242	227	290	358	416	605
52	68	86	105	120	357	92	121	145	174	259	227	295	358	416	611
53	73	93	112	130	386	102	131	160	184	277	237	305	372	430	628
54	81	100	122	139	421	106	140	169	203	294	242	319	387	450	645
55	86	110	132	152	449	116	150	184	218	323	251	324	401	464	674
56	93	117	144	164	490	126	164	198	237	346	261	338	411	483	691
57	100	130	156	178	530	135	174	213	251	369	271	348	425	498	714
58	110	139	169	196	576	145	189	232	266	392	276	363	445	512	737
59	120	152	183	213	622	155	203	251	290	426	285	372	459	527	761
60	125	161	196	225	663	164	213	261	305	438	290	377	459	537	766
61	137	176	213	247	720	174	227	280	324	472	300	387	479	551	789
62	149	191	232	269	784	184	247	300	348	501	305	401	493	566	812
63	161	208	254	293	853	198	261	319	372	536	319	416	503	585	835
64	176	227	276	320	928	213	276	343	396	570	329	425	522	604	858
65	193	249	303	350	1,014	227	295	367	425	611	338	440	541	628	893
66	220	286	347	403	1,164	256	334	411	474	680	367	479	590	677	962
67	242	313	381	440	1,268	266	353	435	508	720	372	488	604	701	991
68	264	340	416	482	1,383	280	377	464	537	766	382	508	624	720	1,020
69	286	372	455	528	1,509	300	396	488	566	807	396	522	638	740	1,043
70	313	408	499	579	1,654	314	416	512	595	847	406	532	653	759	1,072
71	359	469	577	670	1,907	353	464	570	662	945	440	575	706	817	1,158
72	394	513	631	734	2,086	363	483	595	691	985	445	585	720	836	1,181
73	428	560	689	800	2,276	377	503	619	725	1,026	450	595	730	856	1,198
74	465	609	751	873	2,477	396	522	648	754	1,066	459	604	745	865	1,216
75	496	648	797	929	2,621	396	527	653	754	1,072	450	595	730	846	1,187
76	575	753	929	1,083	3,059	435	580	716	836	1,187	479	633	783	909	1,279
77	628	826	1,020	1,191	3,359	445	595	740	865	1,221	479	638	788	914	1,279
78	685	905	1,120	1,308	3,682	464	614	759	890	1,262	483	638	788	914	1,285
79	748	990	1,227	1,435	4,039	396	527	653	769	1,083	483	633	788	919	1,279
80	822	1,088	1,352	1,584	4,454	406	537	667	783	1,112	483	638	788	919	1,285
81	895	1,188	1,482	1,738	4,886	406	546	677	798	1,123	483	633	783	909	1,268
82	976	1,301	1,621	1,907	5,352	411	546	682	803	1,135	474	624	774	894	1,244
83	1,064	1,418	1,773	2,088	5,859	411	551	687	803	1,135	464	614	759	880	1,216
84	1,159	1,548	1,939	2,286	6,412	411	551	687	807	1,135	454	599	735	856	1,181
85	1,262	1,690	2,117	2,501	7,017	406	546	682	807	1,135	445	580	716	832	1,141

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 for Policies Issued On or After 9/16/2002 - Year 3
Rates per $10 Daily Benefit

	Policy Form: LTQ11-336-MA-PA-601					**Rider: 11-SIP-PA-998**					**Rider: 11-CIP-PA-998**				
	Base Rates with No Inflation Protection					**Simple Inflation Protection Rider**					**Compound Inflation Protection Rider**				
Issue	**Benefit Period**					**Benefit Period**					**Benefit Period**				
Age	*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	81	100	120	137	421	116	150	184	213	328	551	716	880	1,020	1,486
40	83	105	127	144	444	126	160	193	227	346	561	730	890	1,035	1,504
41	88	110	132	154	467	131	169	208	237	369	566	740	904	1,044	1,527
42	93	117	139	161	490	135	179	222	256	392	575	749	919	1,064	1,550
43	98	122	149	171	519	145	189	232	271	409	580	759	928	1,073	1,567
44	103	130	156	181	547	155	198	247	285	432	590	769	943	1,088	1,584
45	108	137	166	191	576	164	213	256	305	461	599	778	952	1,102	1,607
46	115	144	174	200	611	169	227	276	324	484	604	788	967	1,122	1,625
47	120	154	186	213	645	184	237	290	338	513	614	793	972	1,131	1,642
48	127	161	196	225	680	193	251	309	363	542	619	807	986	1,146	1,659
49	134	171	208	240	720	203	266	324	382	570	604	788	967	1,122	1,619
50	139	178	218	249	749	213	276	338	396	593	614	798	977	1,136	1,648
51	142	181	220	254	761	218	280	343	401	605	609	798	977	1,131	1,636
52	149	188	230	267	795	222	295	358	416	622	619	807	986	1,146	1,659
53	156	200	245	281	841	237	309	377	445	657	604	788	967	1,122	1,613
54	166	213	259	301	893	251	329	401	464	686	609	793	972	1,126	1,625
55	176	227	276	318	945	261	343	421	493	726	614	798	977	1,136	1,636
56	186	240	293	340	1,002	280	363	445	512	761	619	807	986	1,141	1,648
57	198	254	311	359	1,060	290	382	469	546	801	619	812	991	1,151	1,654
58	210	271	330	384	1,129	305	396	488	566	835	619	812	996	1,155	1,659
59	222	289	352	406	1,193	319	416	512	599	876	614	798	981	1,146	1,636
60	227	293	359	418	1,221	324	421	517	599	876	614	803	981	1,136	1,636
61	242	313	381	443	1,296	334	440	541	628	910	599	788	972	1,126	1,607
62	257	333	406	472	1,371	348	454	561	653	951	599	788	972	1,122	1,607
63	271	352	430	501	1,458	363	474	585	677	985	604	788	972	1,122	1,602
64	289	374	457	531	1,544	372	493	609	706	1,020	599	788	967	1,126	1,602
65	306	399	489	567	1,642	387	508	628	730	1,054	599	788	967	1,122	1,596
66	342	445	545	636	1,832	421	556	687	798	1,152	628	827	1,020	1,180	1,682
67	362	472	579	675	1,942	435	570	706	822	1,181	624	822	1,015	1,175	1,671
68	384	501	616	716	2,057	445	585	720	841	1,210	619	817	1,006	1,165	1,659
69	406	531	653	760	2,184	454	599	740	861	1,233	614	812	1,001	1,160	1,642
70	430	565	694	809	2,316	464	609	754	880	1,262	609	803	991	1,146	1,625
71	482	633	782	912	2,604	498	657	812	952	1,365	638	841	1,035	1,204	1,711
72	511	672	829	968	2,765	503	667	832	967	1,383	628	827	1,025	1,189	1,682
73	540	712	880	1,029	2,933	512	677	841	981	1,400	619	817	1,010	1,175	1,659
74	572	756	934	1,093	3,105	517	682	851	991	1,412	609	803	996	1,155	1,630
75	594	782	966	1,127	3,192	503	667	827	967	1,371	580	764	943	1,097	1,544
76	672	888	1,100	1,286	3,647	537	716	890	1,039	1,475	604	798	986	1,151	1,613
77	719	951	1,179	1,381	3,906	541	720	899	1,049	1,492	590	783	967	1,126	1,584
78	770	1,020	1,267	1,484	4,194	541	725	904	1,059	1,498	580	764	948	1,102	1,544
79	824	1,095	1,362	1,597	4,505	464	609	764	899	1,273	570	745	923	1,083	1,509
80	888	1,181	1,472	1,729	4,868	459	614	764	899	1,273	556	735	904	1,059	1,481
81	954	1,271	1,587	1,868	5,254	459	609	759	890	1,268	546	716	885	1,030	1,435
82	1,027	1,372	1,714	2,020	5,681	459	604	759	890	1,256	527	696	861	1,001	1,389
83	1,108	1,479	1,853	2,186	6,142	445	604	749	880	1,244	512	677	832	967	1,342
84	1,196	1,599	2,005	2,369	6,649	445	595	740	870	1,233	493	653	803	933	1,291
85	1,291	1,731	2,171	2,570	7,208	435	580	735	861	1,216	479	624	774	894	1,233

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 for Policies Issued On or After 9/16/2002 - Year 3
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				
	Benefit Period					Benefit Period					Benefit Period				
Issue Age	*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	49	61	71	83	254	68	87	111	126	196	329	425	522	604	876
40	51	64	76	88	265	73	97	116	135	207	334	435	532	609	893
41	54	66	81	93	282	77	102	121	140	219	338	440	537	624	905
42	56	71	86	98	294	82	106	131	150	236	343	445	546	633	922
43	59	76	90	103	311	87	111	135	164	248	353	450	537	643	933
44	64	78	95	110	328	92	121	145	169	265	353	464	561	653	951
45	66	83	100	115	351	97	131	155	184	271	358	469	570	662	956
46	71	88	108	122	369	102	135	164	193	294	363	474	580	672	974
47	73	93	112	130	392	111	145	179	208	311	372	483	590	682	985
48	78	100	120	139	415	116	150	189	218	328	377	488	599	691	1,002
49	83	105	127	147	438	126	164	198	232	351	377	493	599	696	1,002
50	88	112	134	156	467	131	169	213	242	363	372	483	595	682	991
51	88	112	134	156	467	131	169	213	247	369	382	498	614	706	1,020
52	93	120	144	166	495	140	179	222	261	386	377	488	599	691	1,002
53	100	127	154	178	530	145	193	237	271	403	377	488	599	691	997
54	105	134	164	191	565	160	208	251	290	426	382	498	609	701	1,008
55	112	144	176	203	599	169	218	266	309	455	387	503	614	716	1,026
56	120	154	188	218	640	179	232	280	324	478	392	512	624	720	1,037
57	130	166	200	232	686	184	242	300	348	507	396	517	633	735	1,049
58	137	176	215	249	732	198	261	314	367	536	401	527	643	740	1,060
59	147	191	230	267	784	208	271	338	387	565	406	527	653	754	1,072
60	154	198	242	279	818	213	280	343	401	576	401	522	638	745	1,060
61	166	213	259	301	876	222	295	363	421	611	401	532	648	749	1,072
62	178	230	279	323	939	237	309	382	445	640	406	537	657	759	1,083
63	191	247	301	347	1,008	251	324	401	469	674	416	541	662	769	1,095
64	205	264	323	374	1,083	261	348	425	493	709	421	551	672	778	1,106
65	220	286	350	406	1,170	276	363	445	512	737	425	556	682	788	1,118
66	249	325	396	460	1,319	305	396	493	570	818	454	590	725	841	1,198
67	269	350	428	496	1,423	319	416	512	595	858	459	599	735	851	1,210
68	291	379	465	538	1,538	334	435	537	624	893	464	604	745	861	1,221
69	313	408	501	582	1,665	348	454	561	653	928	469	614	754	875	1,233
70	340	443	545	631	1,803	358	474	580	682	968	474	624	759	885	1,244
71	386	506	623	724	2,063	396	522	638	749	1,066	503	662	812	943	1,331
72	418	548	675	787	2,235	411	541	667	774	1,100	508	667	822	948	1,342
73	452	594	734	853	2,420	421	556	687	803	1,141	508	672	822	957	1,354
74	489	643	792	924	2,621	435	575	711	827	1,175	512	672	832	962	1,354
75	518	682	839	978	2,760	435	570	711	827	1,175	498	653	812	938	1,319
76	599	787	973	1,134	3,209	469	624	774	909	1,279	527	696	856	1,001	1,400
77	650	858	1,061	1,242	3,503	483	643	798	928	1,319	527	696	861	996	1,400
78	707	934	1,159	1,357	3,826	498	662	817	957	1,348	527	696	856	991	1,389
79	770	1,020	1,267	1,484	4,177	421	566	701	822	1,158	522	687	846	986	1,377
80	839	1,115	1,386	1,626	4,575	430	570	711	836	1,175	517	682	841	981	1,365
81	912	1,213	1,513	1,778	4,995	435	575	716	841	1,187	512	677	832	967	1,348
82	993	1,323	1,650	1,941	5,456	430	575	725	851	1,193	503	662	817	952	1,319
83	1,078	1,438	1,800	2,120	5,952	430	580	720	851	1,193	488	648	798	928	1,285
84	1,171	1,565	1,961	2,313	6,487	425	570	716	846	1,193	479	633	778	904	1,250
85	1,271	1,702	2,135	2,523	7,075	425	570	711	846	1,187	464	609	754	875	1,204

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 for Policies Issued On or After 9/16/2002 - Year 3
Rates per $10 Daily Benefit

	Policy Form: FLQ11-336-MA-PA-601					**Rider: 11-SIP-PA-998**					**Rider: 11-CIP-PA-998**				
	Base Rates with No Inflation Protection					**Simple Inflation Protection Rider**					**Compound Inflation Protection Rider**				
Issue	**Benefit Period**					**Benefit Period**					**Benefit Period**				
Age	*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	29	34	42	46	144	34	44	53	63	98	140	179	218	256	380
40	32	37	44	51	156	34	48	58	63	104	140	189	227	261	392
41	34	39	46	54	161	39	53	63	73	115	145	193	237	271	403
42	34	42	51	56	173	44	48	63	82	121	155	203	242	285	421
43	37	44	54	61	184	44	63	73	82	133	160	208	251	295	432
44	39	49	56	64	196	48	58	82	92	144	164	213	261	305	449
45	42	51	59	68	213	53	68	87	102	150	169	222	276	319	461
46	44	56	64	76	225	58	68	92	102	161	174	222	285	319	478
47	46	56	68	78	236	63	87	102	116	179	184	242	290	343	501
48	51	61	76	86	259	63	87	102	121	184	184	251	300	348	507
49	54	66	78	93	277	68	92	116	131	202	193	256	314	363	530
50	56	71	86	100	294	82	102	121	135	219	198	261	319	363	536
51	56	73	86	100	300	82	97	126	140	219	208	261	324	372	547
52	61	78	95	108	323	82	106	131	160	230	208	261	319	377	547
53	66	83	100	117	346	92	121	145	164	254	213	276	338	387	565
54	73	90	110	125	380	97	126	155	184	265	218	285	348	406	582
55	78	100	120	137	403	102	131	164	193	294	222	290	358	416	611
56	83	105	130	147	444	116	150	179	213	311	237	305	372	435	622
57	90	117	142	161	478	121	155	189	227	328	242	314	382	445	640
58	100	125	152	176	519	131	169	208	242	351	247	329	401	459	663
59	108	137	166	191	559	140	184	222	261	386	256	334	411	474	686
60	112	144	176	203	599	150	193	237	276	392	261	343	416	483	686
61	122	159	191	222	651	160	203	256	290	421	271	348	430	498	709
62	134	171	210	242	703	164	222	266	314	455	276	363	440	508	732
63	144	188	230	264	766	179	232	285	334	484	290	372	450	527	755
64	159	205	249	289	835	189	247	309	358	513	295	382	469	541	772
65	174	225	274	315	910	203	266	329	382	553	305	396	483	566	807
66	198	257	313	364	1,049	232	300	367	425	611	329	430	532	609	864
67	218	281	342	396	1,141	242	319	392	459	651	334	440	546	633	893
68	237	306	374	433	1,244	251	338	416	483	691	343	459	561	648	916
69	257	335	408	474	1,360	271	358	440	512	726	358	469	575	667	939
70	281	367	450	521	1,486	285	377	459	537	766	367	479	585	687	968
71	323	423	518	604	1,717	319	416	517	595	853	396	517	638	735	1,043
72	355	462	567	660	1,878	324	435	537	624	887	401	527	648	754	1,060
73	386	504	621	719	2,051	338	454	556	653	922	401	537	657	774	1,077
74	418	548	675	785	2,230	358	469	585	682	962	416	546	672	778	1,095
75	447	584	716	836	2,362	358	474	590	677	962	401	532	657	764	1,066
76	518	677	836	976	2,754	392	522	643	749	1,066	430	570	706	817	1,152
77	565	743	917	1,071	3,025	401	537	667	778	1,100	430	575	711	822	1,152
78	616	814	1,007	1,179	3,313	416	551	687	798	1,135	435	575	711	822	1,158
79	672	892	1,105	1,291	3,635	358	474	585	691	974	435	566	711	827	1,152
80	738	980	1,218	1,425	4,010	367	479	599	706	997	435	570	706	827	1,152
81	804	1,068	1,333	1,565	4,396	367	493	609	716	1,014	435	570	706	817	1,141
82	878	1,171	1,460	1,716	4,817	372	493	614	720	1,020	425	561	696	807	1,123
83	958	1,276	1,597	1,880	5,272	367	498	614	720	1,026	416	551	682	788	1,095
84	1,044	1,394	1,746	2,059	5,773	367	493	619	725	1,020	406	537	662	769	1,060
85	1,134	1,521	1,905	2,252	6,315	367	493	614	725	1,026	401	522	648	749	1,026

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 for Policies Issued On or After 9/16/2002 - Year 3
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				
	Benefit Period					Benefit Period					Benefit Period				
Issue Age	*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	44	56	64	76	230	63	77	102	111	173	295	382	469	541	784
40	46	56	68	78	236	63	87	106	126	190	300	392	479	551	807
41	49	59	73	83	254	68	92	106	126	196	305	396	483	561	812
42	51	64	78	88	265	73	97	116	135	213	309	401	488	570	830
43	54	68	81	93	282	77	102	126	145	219	314	406	483	580	835
44	56	71	86	100	294	87	106	131	150	242	319	416	508	585	858
45	59	76	90	103	317	87	116	140	169	242	324	421	512	599	858
46	64	78	98	110	334	92	126	145	174	265	329	430	522	604	876
47	66	83	100	117	351	102	131	164	184	282	334	435	532	614	887
48	71	90	108	125	374	102	135	169	198	294	338	440	541	624	899
49	76	95	115	132	392	111	145	179	208	317	338	445	537	628	905
50	78	100	122	142	421	121	155	189	218	328	338	435	532	614	893
51	78	100	122	142	421	121	155	189	222	334	348	450	551	633	916
52	83	108	130	149	444	126	160	203	237	351	338	440	541	624	905
53	90	115	139	161	478	131	174	213	242	363	338	440	537	619	899
54	95	122	147	171	507	140	184	227	261	386	343	445	551	633	910
55	100	130	159	183	542	155	198	237	276	409	348	454	551	643	922
56	108	139	169	196	576	160	208	256	290	432	353	459	561	648	933
57	117	149	181	210	616	164	218	271	309	455	358	469	570	657	945
58	122	159	193	225	657	179	232	285	329	484	363	474	580	667	956
59	132	171	208	240	703	189	247	305	348	513	367	474	585	682	968
60	139	178	218	252	737	189	251	309	358	519	358	469	575	667	951
61	149	191	232	271	789	203	266	329	377	547	363	479	585	672	962
62	161	208	252	291	847	213	276	343	401	576	363	483	590	682	974
63	171	222	271	313	910	227	290	358	421	605	377	488	595	691	985
64	186	237	291	337	974	232	314	382	445	640	377	498	604	701	997
65	198	257	315	364	1,054	247	329	401	464	663	382	503	614	711	1,002
66	225	293	357	413	1,187	276	358	445	512	737	406	532	653	759	1,077
67	242	315	386	447	1,279	285	372	459	532	772	416	537	657	764	1,089
68	262	342	418	484	1,383	300	392	483	561	807	421	541	672	774	1,100
69	281	367	452	523	1,498	314	411	503	590	835	425	556	677	788	1,112
70	306	399	491	567	1,625	324	425	522	614	870	425	561	682	798	1,118
71	347	455	562	650	1,855	358	474	570	677	962	454	599	730	851	1,198
72	377	494	606	709	2,011	367	483	604	696	991	454	599	740	851	1,210
73	408	535	660	768	2,178	377	498	619	725	1,026	454	604	740	861	1,221
74	440	579	714	831	2,362	392	517	638	745	1,054	459	604	745	865	1,216
75	467	614	756	880	2,483	392	512	638	745	1,060	450	590	730	846	1,187
76	540	709	875	1,022	2,886	421	561	696	817	1,152	474	624	774	899	1,262
77	584	773	956	1,117	3,152	435	580	716	836	1,187	479	628	774	899	1,262
78	636	841	1,044	1,223	3,445	450	595	735	861	1,210	474	624	769	890	1,250
79	694	917	1,139	1,335	3,762	377	512	633	740	1,037	469	619	764	890	1,239
80	756	1,002	1,247	1,465	4,119	387	517	643	749	1,054	464	614	759	880	1,227
81	822	1,090	1,362	1,599	4,494	392	522	643	759	1,072	459	609	749	870	1,216
82	892	1,191	1,487	1,748	4,909	392	517	653	764	1,077	454	595	735	856	1,187
83	971	1,293	1,619	1,907	5,358	387	522	653	769	1,072	440	585	720	836	1,152
84	1,054	1,408	1,765	2,081	5,836	382	512	643	764	1,077	430	570	701	817	1,129
85	1,144	1,531	1,922	2,271	6,366	382	517	638	759	1,072	416	551	677	788	1,083

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 for Policies Issued On or After 9/16/2002 - Year 3
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				
	Benefit Period					Benefit Period					Benefit Period				
Issue Age	*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	34	39	42	46	138	29	39	44	53	81	116	140	160	184	259
40	34	39	44	49	150	34	44	48	53	81	126	150	164	189	259
41	37	42	46	51	156	34	44	48	58	86	126	155	169	193	265
42	37	44	49	54	161	39	48	53	63	92	135	155	174	198	277
43	39	46	51	56	167	44	48	53	63	98	135	160	179	203	282
44	42	49	54	59	173	44	53	58	68	104	140	164	184	213	294
45	44	51	56	64	184	44	53	63	68	104	140	169	189	213	294
46	44	54	59	66	190	53	58	68	77	115	150	174	198	222	305
47	46	56	61	68	202	53	63	73	82	115	155	179	203	227	311
48	49	59	64	73	207	58	68	77	82	127	160	189	213	232	323
49	54	61	68	76	219	58	73	82	92	133	160	193	218	242	328
50	56	64	71	81	230	63	77	87	97	133	160	193	218	237	323
51	56	66	73	81	230	63	77	82	97	138	164	198	218	247	334
52	59	68	76	86	242	68	82	92	102	144	164	198	222	247	328
53	61	73	81	90	254	73	87	97	111	150	174	203	227	251	340
54	66	78	86	95	265	77	92	106	116	161	179	208	237	261	351
55	71	83	90	103	282	82	97	111	121	173	184	218	242	266	357
56	76	88	98	110	300	87	106	116	131	179	189	222	247	276	369
57	81	95	105	117	317	92	111	126	140	190	193	227	251	280	374
58	86	100	112	125	340	102	121	131	150	202	203	237	261	290	386
59	93	108	120	132	363	106	131	140	160	207	203	247	271	305	392
60	95	112	125	139	374	111	131	145	160	219	208	247	271	300	392
61	103	122	134	149	398	116	135	155	169	230	213	251	276	309	403
62	110	130	144	159	426	126	150	160	184	242	222	261	285	319	409
63	120	139	154	171	455	131	155	174	193	254	222	266	290	324	421
64	127	149	166	183	484	140	164	179	203	265	232	276	300	334	432
65	139	161	178	198	519	145	174	193	213	282	237	285	309	343	444
66	156	183	203	225	588	164	193	213	232	305	261	305	334	367	472
67	169	198	218	242	628	174	203	222	247	323	266	309	343	377	484
68	183	213	235	259	674	179	213	232	261	334	271	319	348	387	495
69	198	230	252	279	726	189	222	247	271	346	276	329	358	396	501
70	213	249	271	301	778	198	227	256	280	357	285	329	367	401	507
71	242	281	308	342	876	218	256	280	305	392	305	358	392	430	547
72	259	303	333	367	933	227	261	285	319	403	314	363	396	440	553
73	279	325	357	394	997	232	271	295	324	415	314	367	401	445	559
74	298	347	381	421	1,060	242	280	305	334	421	319	372	406	445	559
75	320	372	403	445	1,112	237	276	305	329	415	314	363	396	435	547
76	364	423	460	506	1,262	256	300	329	358	449	338	387	425	464	582
77	394	455	494	543	1,348	261	305	334	367	455	338	392	430	469	582
78	423	489	531	582	1,446	271	309	338	372	455	338	392	430	469	576
79	455	526	570	626	1,544	227	266	290	314	386	343	396	430	469	576
80	491	567	616	672	1,654	232	266	285	319	386	348	401	430	474	582
81	531	611	660	724	1,769	232	266	290	309	386	348	401	435	469	576
82	575	658	712	775	1,896	227	266	285	314	386	343	401	430	469	576
83	621	712	765	834	2,034	227	266	285	309	380	343	396	430	464	565
84	670	768	824	895	2,178	232	261	285	305	374	343	392	425	459	565
85	724	826	885	961	2,333	227	261	280	300	363	343	392	421	454	553

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 for Policies Issued On or After 9/16/2002 - Year 3
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				
	Benefit Period					Benefit Period					Benefit Period				
Issue Age	*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	76	88	98	110	323	87	111	126	140	213	406	488	541	604	830
40	78	90	100	112	334	97	116	135	155	225	411	493	551	619	841
41	81	95	105	117	346	102	121	140	160	236	421	498	556	624	847
42	83	98	110	122	363	106	131	145	164	236	425	508	561	628	847
43	88	103	115	127	374	111	135	150	174	248	425	508	566	633	858
44	90	108	120	134	386	116	140	160	179	265	430	512	570	633	864
45	95	110	125	139	403	121	150	164	189	271	435	522	575	643	864
46	98	115	130	144	415	131	155	174	198	282	440	522	580	648	870
47	103	120	134	149	432	135	164	184	208	294	440	527	585	653	876
48	108	125	139	156	449	140	174	193	218	300	435	522	575	638	841
49	110	132	147	164	461	150	179	198	222	317	440	517	575	643	864
50	112	134	149	166	467	155	179	203	227	317	440	517	570	638	841
51	117	137	152	171	484	155	189	208	232	323	440	522	580	648	864
52	117	139	154	174	484	160	189	213	237	328	445	522	580	643	847
53	125	147	161	181	501	164	198	222	251	346	435	522	580	643	864
54	130	154	169	191	524	174	208	232	256	351	430	508	566	628	830
55	137	161	178	198	547	179	213	242	271	363	430	512	566	633	824
56	142	169	186	208	570	193	227	251	280	374	435	512	570	633	824
57	149	176	196	218	593	198	237	261	290	386	435	517	566	633	824
58	156	186	205	227	616	208	242	271	305	403	440	512	566	633	824
59	164	193	215	240	640	213	256	280	309	421	425	503	551	609	789
60	166	196	218	242	645	213	251	276	309	409	435	512	561	624	818
61	174	205	227	252	674	222	261	285	324	421	421	498	541	604	778
62	183	215	237	264	703	227	271	300	329	432	421	493	541	604	772
63	193	225	249	276	732	232	276	305	338	444	416	493	541	599	772
64	203	237	262	289	761	237	280	309	348	455	416	488	537	595	766
65	213	249	274	303	795	247	290	319	358	467	416	488	537	595	761
66	235	276	303	335	876	266	309	343	382	495	435	508	561	619	789
67	247	289	318	352	916	271	319	348	387	501	430	508	551	609	778
68	259	303	333	367	951	276	324	358	396	507	425	498	546	609	772
69	271	318	347	386	991	280	329	363	396	513	421	493	541	595	761
70	284	333	364	403	1,037	285	334	367	401	513	421	488	537	590	743
71	315	369	403	445	1,141	300	353	387	430	542	435	508	556	619	772
72	330	386	423	467	1,187	305	353	387	430	542	430	503	546	604	761
73	345	403	440	487	1,233	305	358	392	430	542	425	493	541	595	743
74	362	421	460	509	1,279	305	358	392	425	536	416	488	532	580	726
75	377	435	474	523	1,308	295	343	377	411	519	396	464	503	551	686
76	418	487	528	582	1,452	314	363	401	435	542	416	479	527	575	709
77	443	511	557	611	1,521	314	367	396	435	542	406	474	512	566	697
78	467	540	587	645	1,596	314	363	396	430	536	401	464	508	551	680
79	494	572	621	680	1,677	261	305	329	358	444	396	454	493	541	668
80	526	606	658	719	1,769	261	300	324	358	438	392	454	488	537	657
81	560	645	699	763	1,867	256	295	314	348	426	387	445	479	522	645
82	599	687	743	809	1,976	251	295	314	343	426	377	440	469	512	628
83	641	734	792	861	2,103	251	290	309	338	409	372	435	459	503	611
84	687	785	844	917	2,230	242	285	305	334	403	367	425	459	498	605
85	736	841	902	978	2,374	242	276	295	324	386	367	416	445	483	588

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 for Policies Issued On or After 9/16/2002 - Year 3
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				
	Benefit Period					Benefit Period					Benefit Period				
Issue Age	*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	46	54	59	66	196	53	68	77	87	127	242	290	324	363	495
40	46	56	61	68	202	58	68	82	92	138	247	295	329	367	501
41	49	59	64	73	213	63	73	87	92	138	251	295	334	367	501
42	51	61	66	76	219	63	77	87	97	144	251	300	338	372	513
43	54	64	71	78	230	68	82	92	106	150	256	305	338	382	513
44	56	66	73	81	236	68	82	97	111	161	256	309	343	387	519
45	59	68	76	86	248	73	87	102	111	161	261	314	348	387	524
46	61	71	78	88	259	77	97	106	121	167	266	319	353	392	524
47	64	76	83	93	265	82	97	111	126	179	266	319	353	396	530
48	66	78	86	98	277	87	102	121	131	184	271	324	363	396	530
49	68	81	90	103	288	92	111	121	135	196	271	319	353	392	524
50	71	83	93	105	294	97	116	126	140	196	271	324	358	396	530
51	73	86	95	108	300	97	116	131	145	202	271	324	358	396	530
52	76	88	98	110	305	97	121	135	150	207	271	324	363	401	536
53	78	93	103	115	323	106	126	140	160	213	271	319	353	396	524
54	83	98	110	122	340	111	131	145	164	219	271	324	353	396	519
55	88	103	115	130	351	116	140	155	169	236	276	329	358	396	530
56	93	110	122	134	369	121	145	160	184	248	280	329	363	406	530
57	98	115	127	144	386	131	155	169	189	254	280	334	367	406	536
58	105	122	134	152	409	131	160	179	198	265	280	338	372	411	536
59	110	130	144	159	432	140	169	184	208	271	285	338	372	416	536
60	115	134	147	164	438	140	169	189	213	282	280	334	367	406	530
61	120	142	156	174	467	150	179	198	218	288	285	338	367	411	530
62	127	152	166	186	490	160	184	203	227	300	290	338	372	411	536
63	137	159	176	196	519	160	193	213	237	311	290	343	377	416	536
64	144	171	188	208	547	169	198	218	247	323	295	343	377	421	542
65	154	181	200	222	582	179	213	227	256	334	300	353	382	421	542
66	174	203	222	247	645	193	227	251	280	363	314	372	406	450	576
67	186	218	240	264	686	198	237	256	290	374	319	372	406	454	582
68	198	232	254	281	732	208	247	271	300	380	324	377	416	459	582
69	213	247	271	301	778	213	256	280	309	392	324	382	416	459	582
70	227	264	291	323	830	222	261	285	314	403	329	387	421	459	582
71	257	298	328	362	928	242	285	309	343	432	348	406	445	488	616
72	274	320	350	386	985	247	290	319	353	444	348	406	445	493	616
73	291	340	372	411	1,043	256	300	329	363	449	353	411	450	493	616
74	311	362	396	438	1,100	261	305	334	367	461	353	411	450	493	616
75	330	384	418	460	1,152	261	300	329	363	449	348	401	435	479	599
76	377	435	474	521	1,302	276	324	353	387	478	363	425	459	508	628
77	403	467	509	557	1,389	280	329	358	392	484	363	425	459	508	622
78	433	501	543	597	1,475	285	329	363	396	490	367	421	459	503	622
79	465	535	582	638	1,573	242	280	305	334	415	363	425	459	498	616
80	499	577	626	685	1,682	242	280	305	329	409	367	421	454	498	611
81	538	619	670	734	1,792	247	280	305	329	409	363	421	454	493	611
82	579	665	719	785	1,919	242	280	300	329	398	363	421	450	488	599
83	623	716	773	841	2,051	242	276	295	324	392	363	416	445	483	593
84	672	770	829	900	2,189	237	276	290	324	386	363	416	440	483	588
85	726	829	890	963	2,339	237	271	285	314	380	358	411	435	474	576

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
Current Annual Premium Rates for Policies Issued Prior to 9/16/2002
Rates per $10 Daily Benefit

	Policy Form: NTQ11-337-MA-PA-601					**Rider: 11-SIP-PA-998**					**Rider: 11-CIP-PA-998**				
	Base Rates with No Inflation Protection					**Simple Inflation Protection Rider**					**Compound Inflation Protection Rider**				
Issue	**Benefit Period**					**Benefit Period**					**Benefit Period**				
Age	*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	29	32	37	48	12	15	20	22	32	61	78	98	110	145
40	24	29	34	39	50	15	20	22	24	34	66	83	100	115	151
41	27	32	37	42	53	15	20	24	27	37	66	86	105	120	156
42	29	34	39	44	58	15	20	24	29	40	68	88	108	125	161
43	29	37	42	46	61	17	22	27	32	45	73	93	112	130	169
44	32	39	44	49	66	20	24	29	34	48	76	95	117	134	174
45	34	42	46	54	71	20	24	34	37	50	78	100	122	139	180
46	37	44	51	56	77	22	29	34	42	53	81	103	125	147	185
47	39	46	54	61	82	24	32	39	44	58	83	108	132	152	193
48	42	49	59	66	87	24	34	42	46	63	86	112	134	156	201
49	44	54	64	71	95	29	37	44	51	69	90	117	139	161	206
50	46	56	68	76	100	32	42	49	56	77	93	120	142	166	211
51	46	59	68	78	103	32	39	49	56	74	95	120	147	166	214
52	51	64	73	83	111	34	44	54	64	82	95	122	149	171	217
53	54	68	81	90	122	39	46	59	68	87	100	127	154	178	225
54	59	73	88	100	129	42	51	61	71	95	103	132	159	183	235
55	64	81	95	108	143	44	56	68	78	103	108	137	166	191	243
56	68	86	103	117	153	49	61	76	86	111	112	144	174	198	254
57	76	95	112	130	169	51	66	81	90	119	115	147	178	205	259
58	83	103	122	139	182	54	71	88	100	129	117	154	186	215	272
59	90	112	134	154	201	59	78	93	108	137	122	159	193	222	280
60	95	120	144	164	211	64	81	98	112	148	125	161	196	225	285
61	103	132	156	178	232	68	86	108	122	156	130	166	203	235	293
62	112	144	171	196	254	73	93	115	132	169	134	174	210	242	304
63	125	156	188	215	277	78	103	122	142	180	139	181	218	252	314
64	134	171	205	237	304	86	110	132	152	190	147	188	227	259	325
65	149	191	227	261	333	90	115	142	161	206	152	193	237	269	341
66	171	218	264	301	386	103	132	159	183	230	164	213	257	296	367
67	188	239	288	330	420	108	139	169	196	246	169	220	266	305	383
68	205	264	318	364	462	115	147	178	205	259	176	227	274	315	394
69	225	288	347	398	505	122	156	191	220	275	183	235	286	327	407
70	247	318	384	440	555	130	166	200	230	288	188	242	293	337	420
71	286	369	445	511	642	144	183	225	257	322	205	264	320	367	457
72	313	403	489	560	705	149	193	235	271	336	210	271	327	379	468
73	342	442	533	613	771	156	200	247	283	351	215	276	337	389	481
74	374	481	584	670	840	161	210	257	296	367	220	283	345	398	491
75	403	516	623	716	893	161	213	259	296	367	215	281	342	391	486
76	467	601	728	836	1,044	181	235	283	327	404	235	305	369	425	526
77	511	660	799	919	1,144	186	239	293	337	420	239	308	376	433	536
78	560	723	877	1,009	1,255	191	247	301	347	431	239	313	381	440	542
79	611	792	960	1,107	1,374	164	213	259	298	370	244	315	386	445	550
80	670	868	1,056	1,217	1,511	169	218	264	308	378	249	325	393	455	560
81	731	951	1,156	1,334	1,654	169	218	269	308	380	252	325	396	459	565
82	797	1,036	1,263	1,459	1,807	171	222	269	313	380	252	327	398	462	568
83	868	1,129	1,378	1,593	1,971	169	222	269	313	383	252	330	401	464	571
84	946	1,232	1,503	1,740	2,151	169	220	271	313	383	252	330	403	467	573
85	1,029	1,342	1,640	1,901	2,346	169	218	266	308	380	252	330	403	467	576

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
Current Annual Premium Rates for Policies Issued Prior to 9/16/2002
Rates per $10 Daily Benefit

	Policy Form: NTQ11-337-MA-PA-601					**Rider: 11-SIP-PA-998**					**Rider: 11-CIP-PA-998**				
	Base Rates with No Inflation Protection					**Simple Inflation Protection Rider**					**Compound Inflation Protection Rider**				
Issue	**Benefit Period**					**Benefit Period**					**Benefit Period**				
Age	*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	73	86	95	127	42	51	64	73	98	230	293	354	408	523
40	61	76	88	100	132	44	56	68	78	106	232	298	362	415	534
41	66	81	95	108	140	46	59	71	83	114	235	303	367	420	542
42	68	86	100	112	148	49	64	76	90	119	239	308	371	430	550
43	73	90	105	120	159	51	66	83	95	127	242	313	379	435	555
44	76	95	112	127	166	56	71	86	100	135	247	318	384	440	565
45	81	100	117	134	177	59	76	93	108	143	249	323	391	447	571
46	86	105	125	142	188	61	81	98	115	151	252	327	396	455	579
47	90	110	132	152	198	66	88	105	120	161	257	332	401	459	587
48	95	117	139	159	211	71	93	112	130	169	259	337	408	467	594
49	100	125	149	169	222	76	98	117	139	182	254	330	398	459	584
50	103	130	156	178	232	81	103	125	144	190	261	335	403	464	592
51	105	132	156	181	238	81	105	127	144	190	259	335	406	464	589
52	110	139	166	188	248	86	108	132	154	198	261	337	408	472	597
53	117	147	176	200	264	88	117	139	164	211	257	332	401	462	584
54	125	156	188	215	280	93	122	149	171	225	259	335	406	467	592
55	132	166	200	230	299	100	130	156	181	235	261	340	408	469	597
56	139	178	213	244	317	108	137	166	191	248	264	340	413	474	602
57	149	188	227	259	338	112	147	176	203	262	266	345	418	481	608
58	159	200	242	276	362	117	154	186	215	272	269	347	420	484	610
59	169	215	257	296	383	125	159	196	225	288	266	345	420	481	605
60	174	220	264	303	394	125	164	198	227	291	266	345	418	479	605
61	183	235	283	325	420	132	171	205	237	304	264	342	413	474	597
62	196	249	301	347	446	137	178	218	247	317	266	345	415	477	600
63	208	266	323	369	476	144	186	225	259	328	266	345	415	479	602
64	222	283	342	393	505	149	193	235	269	343	266	345	418	481	602
65	237	303	367	420	539	154	200	244	281	354	269	347	420	484	605
66	266	342	413	474	605	169	218	266	308	388	283	367	445	511	639
67	283	364	440	506	645	174	225	274	315	396	281	367	445	511	637
68	301	386	469	538	684	178	232	281	325	407	283	367	442	511	637
69	320	413	499	574	727	183	237	291	332	417	281	364	442	508	637
70	340	440	533	611	774	188	242	296	342	425	281	364	440	508	631
71	384	496	601	692	872	203	264	320	369	462	296	384	467	538	671
72	408	528	640	738	927	205	269	325	376	470	293	381	464	533	666
73	435	562	682	784	988	208	271	330	381	476	291	379	462	533	660
74	459	596	723	836	1,049	213	276	335	386	481	291	376	459	525	653
75	481	621	753	865	1,081	205	269	325	376	468	276	359	437	506	626
76	547	706	858	987	1,236	220	288	352	406	502	291	381	464	535	660
77	584	758	921	1,061	1,324	222	291	352	408	507	291	376	457	530	655
78	626	811	987	1,139	1,419	225	293	357	413	510	288	374	455	525	650
79	672	872	1,061	1,224	1,524	188	247	303	349	431	283	369	452	523	645
80	723	941	1,146	1,325	1,643	188	247	301	347	431	283	367	450	518	642
81	780	1,012	1,234	1,427	1,770	188	247	301	347	428	279	364	445	516	634
82	838	1,092	1,332	1,542	1,910	186	242	298	345	423	276	359	442	508	629
83	902	1,175	1,437	1,664	2,058	183	242	293	340	420	276	359	437	506	624
84	973	1,268	1,552	1,799	2,222	181	237	291	337	415	274	357	435	501	621
85	1,051	1,371	1,679	1,945	2,404	178	235	286	332	410	269	352	430	499	613

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
Current Annual Premium Rates for Policies Issued Prior to 9/16/2002
Rates per $10 Daily Benefit

	Policy Form: NTQ11-337-MA-PA-601					**Rider: 11-SIP-PA-998**					**Rider: 11-CIP-PA-998**				
	Base Rates with No Inflation Protection					**Simple Inflation Protection Rider**					**Compound Inflation Protection Rider**				
Issue	**Benefit Period**					**Benefit Period**					**Benefit Period**				
Age	*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	37	44	51	56	77	24	32	37	44	58	134	174	210	242	309
40	37	46	54	61	79	27	32	42	46	63	139	176	215	247	314
41	39	49	56	64	85	29	34	44	51	66	142	181	220	252	320
42	42	51	61	68	90	29	37	44	54	71	142	183	220	254	325
43	44	54	64	73	95	32	42	49	56	77	144	188	225	259	330
44	46	56	68	76	100	34	44	51	61	82	147	191	230	264	338
45	49	61	71	81	108	37	46	56	66	85	149	193	235	269	341
46	51	64	76	86	114	39	49	59	68	90	154	198	237	274	346
47	54	68	81	90	122	42	51	64	73	95	156	200	242	279	351
48	59	73	86	98	129	42	54	68	78	100	156	203	247	281	357
49	61	76	90	103	137	46	61	73	86	108	159	205	247	286	359
50	66	81	98	110	145	49	64	76	90	116	156	203	242	281	357
51	66	81	98	110	145	49	64	76	90	116	161	210	252	291	367
52	68	88	103	117	156	54	66	83	95	122	159	203	249	286	359
53	73	93	110	127	166	56	71	88	100	129	161	205	249	286	362
54	78	100	117	134	177	61	76	95	108	140	164	208	254	293	367
55	83	105	127	144	190	64	83	100	115	148	166	215	257	296	373
56	90	115	137	156	203	66	86	105	122	156	169	215	261	301	380
57	98	122	147	169	219	71	93	112	130	166	169	220	266	305	386
58	103	132	156	181	235	78	98	120	137	174	174	222	271	310	391
59	112	142	169	193	251	81	105	127	147	188	176	227	276	318	399
60	117	149	178	203	264	83	108	130	152	193	174	225	271	313	394
61	125	159	193	220	285	90	115	137	159	201	178	230	276	318	399
62	134	174	208	237	306	95	120	147	169	214	181	232	281	323	404
63	147	186	225	257	330	98	127	154	178	225	183	237	286	327	412
64	156	200	242	279	357	105	137	164	188	238	188	242	291	332	417
65	171	218	261	301	386	110	144	174	198	248	191	247	298	342	425
66	193	249	301	345	439	122	156	191	218	275	203	261	315	364	454
67	210	269	325	374	473	127	166	200	230	291	208	266	323	369	465
68	227	293	352	406	513	134	171	210	239	304	210	271	330	376	470
69	247	318	384	440	557	139	181	220	252	314	215	276	335	384	478
70	269	345	418	479	605	147	191	230	264	328	218	281	340	391	486
71	308	396	479	552	695	161	208	254	288	362	232	303	367	420	523
72	335	430	523	599	756	166	218	261	303	375	237	308	371	430	531
73	364	469	567	653	819	171	222	274	313	388	239	310	379	435	539
74	393	508	616	709	888	178	232	281	323	402	242	315	384	440	547
75	420	543	655	753	941	178	230	281	323	399	239	308	376	433	534
76	486	628	760	875	1,091	193	252	308	354	439	257	332	403	464	576
77	530	684	831	956	1,192	198	259	315	364	449	257	335	408	469	579
78	577	745	907	1,044	1,297	203	266	323	374	462	259	340	411	474	587
79	628	814	990	1,139	1,416	174	227	276	320	394	261	340	413	479	589
80	684	887	1,080	1,246	1,548	176	232	283	325	399	264	345	418	484	594
81	745	968	1,178	1,361	1,688	176	232	283	327	402	264	342	420	484	597
82	809	1,053	1,283	1,483	1,836	178	230	283	327	407	264	345	420	486	600
83	877	1,144	1,395	1,615	1,997	178	232	283	327	404	264	345	420	486	600
84	953	1,241	1,518	1,760	2,172	176	232	281	325	402	264	345	420	486	600
85	1,034	1,349	1,650	1,914	2,362	174	230	281	325	399	264	345	420	486	600

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
Current Annual Premium Rates for Policies Issued Prior to 9/16/2002
Rates per $10 Daily Benefit

	Policy Form: LTQ11-336-MA-PA-601					**Rider: 11-SIP-PA-998**					**Rider: 11-CIP-PA-998**				
	Base Rates with No Inflation Protection					**Simple Inflation Protection Rider**					**Compound Inflation Protection Rider**				
Issue	**Benefit Period**					**Benefit Period**					**Benefit Period**				
Age	*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	39	46	51	74	20	24	29	37	50	78	100	122	144	193
40	34	42	49	56	79	20	27	32	37	53	81	105	127	147	198
41	37	44	51	59	82	22	29	37	42	58	83	108	134	154	206
42	39	46	56	64	87	22	27	37	44	63	86	112	137	159	214
43	42	49	59	68	95	24	34	42	46	66	88	117	142	164	219
44	44	54	64	71	100	27	34	44	51	71	90	120	147	171	227
45	46	56	66	76	108	29	39	49	56	77	95	125	154	178	235
46	49	61	71	83	114	32	39	51	59	82	98	127	159	181	243
47	51	64	76	88	122	34	46	56	64	90	103	134	164	191	254
48	56	68	83	95	132	37	49	59	68	95	105	139	169	196	259
49	59	73	88	103	140	39	51	64	73	103	110	144	176	203	269
50	64	78	95	110	151	44	56	68	78	111	110	147	178	205	272
51	64	81	95	110	153	44	56	71	81	111	115	147	181	210	277
52	68	86	105	120	164	46	61	73	88	119	115	149	181	210	280
53	73	93	112	130	177	51	66	81	93	127	120	154	188	218	288
54	81	100	122	139	193	54	71	86	103	135	122	161	196	227	296
55	86	110	132	152	206	59	76	93	110	148	127	164	203	235	309
56	93	117	144	164	225	64	83	100	120	159	132	171	208	244	317
57	100	130	156	178	243	68	88	108	127	169	137	176	215	252	328
58	110	139	169	196	264	73	95	117	134	180	139	183	225	259	338
59	120	152	183	213	285	78	103	127	147	196	144	188	232	266	349
60	125	161	196	225	304	83	108	132	154	201	147	191	232	271	351
61	137	176	213	247	330	88	115	142	164	217	152	196	242	279	362
62	149	191	232	269	359	93	125	152	176	230	154	203	249	286	373
63	161	208	254	293	391	100	132	161	188	246	161	210	254	296	383
64	176	227	276	320	425	108	139	174	200	262	166	215	264	305	394
65	193	249	303	349	465	115	149	186	215	280	171	222	274	318	410
66	220	286	347	403	534	130	169	208	239	312	186	242	298	342	441
67	242	313	381	440	581	134	178	220	257	330	188	247	305	354	454
68	264	340	415	481	634	142	191	235	271	351	193	257	315	364	468
69	286	371	455	528	692	152	200	247	286	370	200	264	323	374	478
70	313	408	499	579	758	159	210	259	301	388	205	269	330	384	491
71	359	469	577	670	874	178	235	288	335	433	222	291	357	413	531
72	393	513	631	733	956	183	244	301	349	452	225	296	364	423	542
73	428	560	689	799	1,044	191	254	313	367	470	227	301	369	433	550
74	464	609	750	872	1,136	200	264	327	381	489	232	305	376	437	557
75	496	648	797	929	1,202	200	266	330	381	491	227	301	369	428	544
76	574	753	929	1,083	1,403	220	293	362	423	544	242	320	396	459	587
77	628	826	1,019	1,190	1,540	225	301	374	437	560	242	323	398	462	587
78	684	904	1,119	1,307	1,688	235	310	384	450	579	244	323	398	462	589
79	748	990	1,227	1,435	1,852	200	266	330	389	497	244	320	398	464	587
80	821	1,088	1,351	1,584	2,042	205	271	337	396	510	244	323	398	464	589
81	894	1,188	1,481	1,738	2,240	205	276	342	403	515	244	320	396	459	581
82	975	1,300	1,620	1,906	2,454	208	276	345	406	520	239	315	391	452	571
83	1,063	1,417	1,772	2,087	2,687	208	279	347	406	520	235	310	384	445	557
84	1,158	1,547	1,938	2,285	2,941	208	279	347	408	520	230	303	371	433	542
85	1,261	1,689	2,116	2,500	3,218	205	276	345	408	520	225	293	362	420	523

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
Current Annual Premium Rates for Policies Issued Prior to 9/16/2002
Rates per $10 Daily Benefit

	Policy Form: LTQ11-336-MA-PA-601					**Rider: 11-SIP-PA-998**					**Rider: 11-CIP-PA-998**				
	Base Rates with No Inflation Protection					**Simple Inflation Protection Rider**					**Compound Inflation Protection Rider**				
Issue	**Benefit Period**					**Benefit Period**					**Benefit Period**				
Age	*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	81	100	120	137	193	59	76	93	108	151	279	362	445	516	682
40	83	105	127	144	203	64	81	98	115	159	283	369	450	523	690
41	88	110	132	154	214	66	86	105	120	169	286	374	457	528	700
42	93	117	139	161	225	68	90	112	130	180	291	379	464	538	711
43	98	122	149	171	238	73	95	117	137	188	293	384	469	543	719
44	103	130	156	181	251	78	100	125	144	198	298	389	477	550	727
45	108	137	166	191	264	83	108	130	154	211	303	393	481	557	737
46	115	144	174	200	280	86	115	139	164	222	305	398	489	567	745
47	120	154	186	213	296	93	120	147	171	235	310	401	491	572	753
48	127	161	196	225	312	98	127	156	183	248	313	408	499	579	761
49	134	171	208	239	330	103	134	164	193	262	305	398	489	567	742
50	139	178	218	249	343	108	139	171	200	272	310	403	494	574	756
51	142	181	220	254	349	110	142	174	203	277	308	403	494	572	750
52	149	188	230	266	365	112	149	181	210	285	313	408	499	579	761
53	156	200	244	281	386	120	156	191	225	301	305	398	489	567	740
54	166	213	259	301	410	127	166	203	235	314	308	401	491	569	745
55	176	227	276	318	433	132	174	213	249	333	310	403	494	574	750
56	186	239	293	340	460	142	183	225	259	349	313	408	499	577	756
57	198	254	310	359	486	147	193	237	276	367	313	411	501	582	758
58	210	271	330	384	518	154	200	247	286	383	313	411	503	584	761
59	222	288	352	406	547	161	210	259	303	402	310	403	496	579	750
60	227	293	359	418	560	164	213	261	303	402	310	406	496	574	750
61	242	313	381	442	594	169	222	274	318	417	303	398	491	569	737
62	257	332	406	472	629	176	230	283	330	436	303	398	491	567	737
63	271	352	430	501	668	183	239	296	342	452	305	398	491	567	734
64	288	374	457	530	708	188	249	308	357	468	303	398	489	569	734
65	305	398	489	567	753	196	257	318	369	483	303	398	489	567	732
66	342	445	545	635	840	213	281	347	403	528	318	418	516	596	771
67	362	472	579	674	890	220	288	357	415	542	315	415	513	594	766
68	384	501	616	716	943	225	296	364	425	555	313	413	508	589	761
69	406	530	653	760	1,001	230	303	374	435	565	310	411	506	587	753
70	430	565	694	809	1,062	235	308	381	445	579	308	406	501	579	745
71	481	633	782	912	1,194	252	332	411	481	626	323	425	523	609	785
72	511	672	828	968	1,268	254	337	420	489	634	318	418	518	601	771
73	540	711	880	1,029	1,345	259	342	425	496	642	313	413	511	594	761
74	572	755	934	1,092	1,424	261	345	430	501	647	308	406	503	584	748
75	594	782	965	1,127	1,464	254	337	418	489	629	293	386	477	555	708
76	672	887	1,100	1,285	1,672	271	362	450	525	676	305	403	499	582	740
77	718	951	1,178	1,381	1,791	274	364	455	530	684	298	396	489	569	727
78	770	1,019	1,266	1,483	1,923	274	367	457	535	687	293	386	479	557	708
79	824	1,095	1,361	1,596	2,066	235	308	386	455	584	288	376	467	547	692
80	887	1,180	1,471	1,728	2,232	232	310	386	455	584	281	371	457	535	679
81	953	1,271	1,586	1,867	2,409	232	308	384	450	581	276	362	447	521	658
82	1,026	1,371	1,713	2,019	2,605	232	305	384	450	576	266	352	435	506	637
83	1,107	1,479	1,852	2,185	2,816	225	305	379	445	571	259	342	420	489	616
84	1,195	1,598	2,004	2,368	3,049	225	301	374	440	565	249	330	406	472	592
85	1,290	1,730	2,170	2,568	3,305	220	293	371	435	557	242	315	391	452	565

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
Current Annual Premium Rates for Policies Issued Prior to 9/16/2002
Rates per $10 Daily Benefit

	Policy Form: LTQ11-336-MA-PA-601					**Rider: 11-SIP-PA-998**					**Rider: 11-CIP-PA-998**				
	Base Rates with No Inflation Protection					**Simple Inflation Protection Rider**					**Compound Inflation Protection Rider**				
Issue	**Benefit Period**					**Benefit Period**					**Benefit Period**				
Age	*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	49	61	71	83	116	34	44	56	64	90	166	215	264	305	402
40	51	64	76	88	122	37	49	59	68	95	169	220	269	308	410
41	54	66	81	93	129	39	51	61	71	100	171	222	271	315	415
42	56	71	86	98	135	42	54	66	76	108	174	225	276	320	423
43	59	76	90	103	143	44	56	68	83	114	178	227	271	325	428
44	64	78	95	110	151	46	61	73	86	122	178	235	283	330	436
45	66	83	100	115	161	49	66	78	93	124	181	237	288	335	439
46	71	88	108	122	169	51	68	83	98	135	183	239	293	340	446
47	73	93	112	130	180	56	73	90	105	143	188	244	298	345	452
48	78	100	120	139	190	59	76	95	110	151	191	247	303	349	460
49	83	105	127	147	201	64	83	100	117	161	191	249	303	352	460
50	88	112	134	156	214	66	86	108	122	166	188	244	301	345	454
51	88	112	134	156	214	66	86	108	125	169	193	252	310	357	468
52	93	120	144	166	227	71	90	112	132	177	191	247	303	349	460
53	100	127	154	178	243	73	98	120	137	185	191	247	303	349	457
54	105	134	164	191	259	81	105	127	147	196	193	252	308	354	462
55	112	144	176	203	275	86	110	134	156	209	196	254	310	362	470
56	120	154	188	218	293	90	117	142	164	219	198	259	315	364	476
57	130	166	200	232	314	93	122	152	176	232	200	261	320	371	481
58	137	176	215	249	336	100	132	159	186	246	203	266	325	374	486
59	147	191	230	266	359	105	137	171	196	259	205	266	330	381	491
60	154	198	242	279	375	108	142	174	203	264	203	264	323	376	486
61	166	213	259	301	402	112	149	183	213	280	203	269	327	379	491
62	178	230	279	323	431	120	156	193	225	293	205	271	332	384	497
63	191	247	301	347	462	127	164	203	237	309	210	274	335	389	502
64	205	264	323	374	497	132	176	215	249	325	213	279	340	393	507
65	220	286	349	406	536	139	183	225	259	338	215	281	345	398	513
66	249	325	396	459	605	154	200	249	288	375	230	298	367	425	550
67	269	349	428	496	653	161	210	259	301	394	232	303	371	430	555
68	291	379	464	538	705	169	220	271	315	410	235	305	376	435	560
69	313	408	501	582	764	176	230	283	330	425	237	310	381	442	565
70	340	442	545	631	827	181	239	293	345	444	239	315	384	447	571
71	386	506	623	723	946	200	264	323	379	489	254	335	411	477	610
72	418	547	674	787	1,025	208	274	337	391	505	257	337	415	479	616
73	452	594	733	853	1,110	213	281	347	406	523	257	340	415	484	621
74	489	643	792	924	1,202	220	291	359	418	539	259	340	420	486	621
75	518	682	838	978	1,266	220	288	359	418	539	252	330	411	474	605
76	599	787	973	1,134	1,472	237	315	391	459	587	266	352	433	506	642
77	650	858	1,061	1,241	1,606	244	325	403	469	605	266	352	435	503	642
78	706	934	1,158	1,356	1,754	252	335	413	484	618	266	352	433	501	637
79	770	1,019	1,266	1,483	1,915	213	286	354	415	531	264	347	428	499	631
80	838	1,114	1,386	1,625	2,098	218	288	359	423	539	261	345	425	496	626
81	912	1,212	1,513	1,777	2,291	220	291	362	425	544	259	342	420	489	618
82	992	1,322	1,650	1,940	2,502	218	291	367	430	547	254	335	413	481	605
83	1,078	1,437	1,799	2,119	2,729	218	293	364	430	547	247	327	403	469	589
84	1,171	1,564	1,960	2,312	2,975	215	288	362	428	547	242	320	393	457	573
85	1,271	1,701	2,133	2,522	3,244	215	288	359	428	544	235	308	381	442	552

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
Current Annual Premium Rates for Policies Issued Prior to 9/16/2002
Rates per $10 Daily Benefit

	Policy Form: FLQ11-336-MA-PA-601					**Rider: 11-SIP-PA-998**					**Rider: 11-CIP-PA-998**				
	Base Rates with No Inflation Protection					**Simple Inflation Protection Rider**					**Compound Inflation Protection Rider**				
Issue	**Benefit Period**					**Benefit Period**					**Benefit Period**				
Age	*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	29	34	42	46	66	17	22	27	32	45	71	90	110	130	174
40	32	37	44	51	71	17	24	29	32	48	71	95	115	132	180
41	34	39	46	54	74	20	27	32	37	53	73	98	120	137	185
42	34	42	51	56	79	22	24	32	42	55	78	103	122	144	193
43	37	44	54	61	85	22	32	37	42	61	81	105	127	149	198
44	39	49	56	64	90	24	29	42	46	66	83	108	132	154	206
45	42	51	59	68	98	27	34	44	51	69	86	112	139	161	211
46	44	56	64	76	103	29	34	46	51	74	88	112	144	161	219
47	46	56	68	78	108	32	44	51	59	82	93	122	147	174	230
48	51	61	76	86	119	32	44	51	61	85	93	127	152	176	232
49	54	66	78	93	127	34	46	59	66	92	98	130	159	183	243
50	56	71	86	100	135	42	51	61	68	100	100	132	161	183	246
51	56	73	86	100	137	42	49	64	71	100	105	132	164	188	251
52	61	78	95	108	148	42	54	66	81	106	105	132	161	191	251
53	66	83	100	117	159	46	61	73	83	116	108	139	171	196	259
54	73	90	110	125	174	49	64	78	93	122	110	144	176	205	267
55	78	100	120	137	185	51	66	83	98	135	112	147	181	210	280
56	83	105	130	147	203	59	76	90	108	143	120	154	188	220	285
57	90	117	142	161	219	61	78	95	115	151	122	159	193	225	293
58	100	125	152	176	238	66	86	105	122	161	125	166	203	232	304
59	108	137	166	191	256	71	93	112	132	177	130	169	208	239	314
60	112	144	176	203	275	76	98	120	139	180	132	174	210	244	314
61	122	159	191	222	299	81	103	130	147	193	137	176	218	252	325
62	134	171	210	242	322	83	112	134	159	209	139	183	222	257	336
63	144	188	230	264	351	90	117	144	169	222	147	188	227	266	346
64	159	205	249	288	383	95	125	156	181	235	149	193	237	274	354
65	174	225	274	315	417	103	134	166	193	254	154	200	244	286	370
66	198	257	313	364	481	117	152	186	215	280	166	218	269	308	396
67	218	281	342	396	523	122	161	198	232	299	169	222	276	320	410
68	237	305	374	433	571	127	171	210	244	317	174	232	283	327	420
69	257	335	408	474	624	137	181	222	259	333	181	237	291	337	431
70	281	367	450	521	682	144	191	232	271	351	186	242	296	347	444
71	323	423	518	604	787	161	210	261	301	391	200	261	323	371	478
72	354	462	567	660	861	164	220	271	315	407	203	266	327	381	486
73	386	503	621	718	941	171	230	281	330	423	203	271	332	391	494
74	418	547	674	784	1,022	181	237	296	345	441	210	276	340	393	502
75	447	584	716	836	1,083	181	239	298	342	441	203	269	332	386	489
76	518	677	836	975	1,263	198	264	325	379	489	218	288	357	413	528
77	565	743	916	1,070	1,387	203	271	337	393	505	218	291	359	415	528
78	616	814	1,007	1,178	1,519	210	279	347	403	520	220	291	359	415	531
79	672	892	1,105	1,290	1,667	181	239	296	349	446	220	286	359	418	528
80	738	980	1,217	1,425	1,839	186	242	303	357	457	220	288	357	418	528
81	804	1,068	1,332	1,564	2,016	186	249	308	362	465	220	288	357	413	523
82	877	1,171	1,459	1,716	2,209	188	249	310	364	468	215	283	352	408	515
83	958	1,276	1,596	1,879	2,417	186	252	310	364	470	210	279	345	398	502
84	1,044	1,393	1,745	2,058	2,647	186	249	313	367	468	205	271	335	389	486
85	1,134	1,520	1,904	2,251	2,896	186	249	310	367	470	203	264	327	379	470

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
Current Annual Premium Rates for Policies Issued Prior to 9/16/2002
Rates per $10 Daily Benefit

	Policy Form: FLQ11-336-MA-PA-601					**Rider: 11-SIP-PA-998**					**Rider: 11-CIP-PA-998**				
	Base Rates with No Inflation Protection					**Simple Inflation Protection Rider**					**Compound Inflation Protection Rider**				
Issue	**Benefit Period**					**Benefit Period**					**Benefit Period**				
Age	*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	44	56	64	76	106	32	39	51	56	79	149	193	237	274	359
40	46	56	68	78	108	32	44	54	64	87	152	198	242	279	370
41	49	59	73	83	116	34	46	54	64	90	154	200	244	283	373
42	51	64	78	88	122	37	49	59	68	98	156	203	247	288	380
43	54	68	81	93	129	39	51	64	73	100	159	205	244	293	383
44	56	71	86	100	135	44	54	66	76	111	161	210	257	296	394
45	59	76	90	103	145	44	59	71	86	111	164	213	259	303	394
46	64	78	98	110	153	46	64	73	88	122	166	218	264	305	402
47	66	83	100	117	161	51	66	83	93	129	169	220	269	310	407
48	71	90	108	125	172	51	68	86	100	135	171	222	274	315	412
49	76	95	115	132	180	56	73	90	105	145	171	225	271	318	415
50	78	100	122	142	193	61	78	95	110	151	171	220	269	310	410
51	78	100	122	142	193	61	78	95	112	153	176	227	279	320	420
52	83	108	130	149	203	64	81	103	120	161	171	222	274	315	415
53	90	115	139	161	219	66	88	108	122	166	171	222	271	313	412
54	95	122	147	171	232	71	93	115	132	177	174	225	279	320	417
55	100	130	159	183	248	78	100	120	139	188	176	230	279	325	423
56	108	139	169	196	264	81	105	130	147	198	178	232	283	327	428
57	117	149	181	210	283	83	110	137	156	209	181	237	288	332	433
58	122	159	193	225	301	90	117	144	166	222	183	239	293	337	439
59	132	171	208	239	322	95	125	154	176	235	186	239	296	345	444
60	139	178	218	252	338	95	127	156	181	238	181	237	291	337	436
61	149	191	232	271	362	103	134	166	191	251	183	242	296	340	441
62	161	208	252	291	388	108	139	174	203	264	183	244	298	345	446
63	171	222	271	313	417	115	147	181	213	277	191	247	301	349	452
64	186	237	291	337	446	117	159	193	225	293	191	252	305	354	457
65	198	257	315	364	483	125	166	203	235	304	193	254	310	359	460
66	225	293	357	413	544	139	181	225	259	338	205	269	330	384	494
67	242	315	386	447	587	144	188	232	269	354	210	271	332	386	499
68	261	342	418	484	634	152	198	244	283	370	213	274	340	391	505
69	281	367	452	523	687	159	208	254	298	383	215	281	342	398	510
70	305	398	491	567	745	164	215	264	310	399	215	283	345	403	513
71	347	455	562	650	851	181	239	288	342	441	230	303	369	430	550
72	376	494	606	709	922	186	244	305	352	454	230	303	374	430	555
73	408	535	660	767	999	191	252	313	367	470	230	305	374	435	560
74	440	579	714	831	1,083	198	261	323	376	483	232	305	376	437	557
75	467	613	755	880	1,139	198	259	323	376	486	227	298	369	428	544
76	540	709	875	1,022	1,324	213	283	352	413	528	239	315	391	455	579
77	584	772	956	1,117	1,445	220	293	362	423	544	242	318	391	455	579
78	635	841	1,044	1,222	1,580	227	301	371	435	555	239	315	389	450	573
79	694	916	1,139	1,334	1,725	191	259	320	374	476	237	313	386	450	568
80	755	1,002	1,246	1,464	1,889	196	261	325	379	483	235	310	384	445	563
81	821	1,090	1,361	1,598	2,061	198	264	325	384	491	232	308	379	440	557
82	892	1,190	1,486	1,747	2,251	198	261	330	386	494	230	301	371	433	544
83	970	1,293	1,618	1,906	2,457	196	264	330	389	491	222	296	364	423	528
84	1,053	1,408	1,764	2,080	2,676	193	259	325	386	494	218	288	354	413	518
85	1,144	1,530	1,921	2,270	2,919	193	261	323	384	491	210	279	342	398	497

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
Current Annual Premium Rates for Policies Issued Prior to 9/16/2002
Rates per $10 Daily Benefit

	Policy Form: HTQ11-338-MA-PA-601					**Rider: 11-SIP-PA-998**					**Rider: 11-CIP-PA-998**				
	Base Rates with No Inflation Protection					**Simple Inflation Protection Rider**					**Compound Inflation Protection Rider**				
Issue	**Benefit Period**					**Benefit Period**					**Benefit Period**				
Age	*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	34	39	42	46	63	15	20	22	27	37	59	71	81	93	119
40	34	39	44	49	69	17	22	24	27	37	64	76	83	95	119
41	37	42	46	51	71	17	22	24	29	40	64	78	86	98	122
42	37	44	49	54	74	20	24	27	32	42	68	78	88	100	127
43	39	46	51	56	77	22	24	27	32	45	68	81	90	103	129
44	42	49	54	59	79	22	27	29	34	48	71	83	93	108	135
45	44	51	56	64	85	22	27	32	34	48	71	86	95	108	135
46	44	54	59	66	87	27	29	34	39	53	76	88	100	112	140
47	46	56	61	68	92	27	32	37	42	53	78	90	103	115	143
48	49	59	64	73	95	29	34	39	42	58	81	95	108	117	148
49	54	61	68	76	100	29	37	42	46	61	81	98	110	122	151
50	56	64	71	81	106	32	39	44	49	61	81	98	110	120	148
51	56	66	73	81	106	32	39	42	49	63	83	100	110	125	153
52	59	68	76	86	111	34	42	46	51	66	83	100	112	125	151
53	61	73	81	90	116	37	44	49	56	69	88	103	115	127	156
54	66	78	86	95	122	39	46	54	59	74	90	105	120	132	161
55	71	83	90	103	129	42	49	56	61	79	93	110	122	134	164
56	76	88	98	110	137	44	54	59	66	82	95	112	125	139	169
57	81	95	105	117	145	46	56	64	71	87	98	115	127	142	172
58	86	100	112	125	156	51	61	66	76	92	103	120	132	147	177
59	93	108	120	132	166	54	66	71	81	95	103	125	137	154	180
60	95	112	125	139	172	56	66	73	81	100	105	125	137	152	180
61	103	122	134	149	182	59	68	78	86	106	108	127	139	156	185
62	110	130	144	159	196	64	76	81	93	111	112	132	144	161	188
63	120	139	154	171	209	66	78	88	98	116	112	134	147	164	193
64	127	149	166	183	222	71	83	90	103	122	117	139	152	169	198
65	139	161	178	198	238	73	88	98	108	129	120	144	156	174	203
66	156	183	203	225	269	83	98	108	117	140	132	154	169	186	217
67	169	198	218	242	288	88	103	112	125	148	134	156	174	191	222
68	183	213	235	259	309	90	108	117	132	153	137	161	176	196	227
69	198	230	252	279	333	95	112	125	137	159	139	166	181	200	230
70	213	249	271	301	357	100	115	130	142	164	144	166	186	203	232
71	242	281	308	342	402	110	130	142	154	180	154	181	198	218	251
72	259	303	332	367	428	115	132	144	161	185	159	183	200	222	254
73	279	325	357	393	457	117	137	149	164	190	159	186	203	225	256
74	298	347	381	420	486	122	142	154	169	193	161	188	205	225	256
75	320	371	403	445	510	120	139	154	166	190	159	183	200	220	251
76	364	423	459	506	579	130	152	166	181	206	171	196	215	235	267
77	393	455	494	543	618	132	154	169	186	209	171	198	218	237	267
78	423	489	530	582	663	137	156	171	188	209	171	198	218	237	264
79	455	525	569	626	708	115	134	147	159	177	174	200	218	237	264
80	491	567	616	672	758	117	134	144	161	177	176	203	218	239	267
81	530	611	660	723	811	117	134	147	156	177	176	203	220	237	264
82	574	657	711	775	869	115	134	144	159	177	174	203	218	237	264
83	621	711	765	833	933	115	134	144	156	174	174	200	218	235	259
84	670	767	824	894	999	117	132	144	154	172	174	198	215	232	259
85	723	826	885	960	1,070	115	132	142	152	166	174	198	213	230	254

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
Current Annual Premium Rates for Policies Issued Prior to 9/16/2002
Rates per $10 Daily Benefit

	Policy Form: HTQ11-338-MA-PA-601					**Rider: 11-SIP-PA-998**					**Rider: 11-CIP-PA-998**				
	Base Rates with No Inflation Protection					**Simple Inflation Protection Rider**					**Compound Inflation Protection Rider**				
Issue	**Benefit Period**					**Benefit Period**					**Benefit Period**				
Age	*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	76	88	98	110	148	44	56	64	71	98	205	247	274	305	380
40	78	90	100	112	153	49	59	68	78	103	208	249	279	313	386
41	81	95	105	117	159	51	61	71	81	108	213	252	281	315	388
42	83	98	110	122	166	54	66	73	83	108	215	257	283	318	388
43	88	103	115	127	172	56	68	76	88	114	215	257	286	320	394
44	90	108	120	134	177	59	71	81	90	122	218	259	288	320	396
45	95	110	125	139	185	61	76	83	95	124	220	264	291	325	396
46	98	115	130	144	190	66	78	88	100	129	222	264	293	327	399
47	103	120	134	149	198	68	83	93	105	135	222	266	296	330	402
48	108	125	139	156	206	71	88	98	110	137	220	264	291	323	386
49	110	132	147	164	211	76	90	100	112	145	222	261	291	325	396
50	112	134	149	166	214	78	90	103	115	145	222	261	288	323	386
51	117	137	152	171	222	78	95	105	117	148	222	264	293	327	396
52	117	139	154	174	222	81	95	108	120	151	225	264	293	325	388
53	125	147	161	181	230	83	100	112	127	159	220	264	293	325	396
54	130	154	169	191	240	88	105	117	130	161	218	257	286	318	380
55	137	161	178	198	251	90	108	122	137	166	218	259	286	320	378
56	142	169	186	208	262	98	115	127	142	172	220	259	288	320	378
57	149	176	196	218	272	100	120	132	147	177	220	261	286	320	378
58	156	186	205	227	283	105	122	137	154	185	222	259	286	320	378
59	164	193	215	239	293	108	130	142	156	193	215	254	279	308	362
60	166	196	218	242	296	108	127	139	156	188	220	259	283	315	375
61	174	205	227	252	309	112	132	144	164	193	213	252	274	305	357
62	183	215	237	264	322	115	137	152	166	198	213	249	274	305	354
63	193	225	249	276	336	117	139	154	171	203	210	249	274	303	354
64	203	237	261	288	349	120	142	156	176	209	210	247	271	301	351
65	213	249	274	303	365	125	147	161	181	214	210	247	271	301	349
66	235	276	303	335	402	134	156	174	193	227	220	257	283	313	362
67	247	288	318	352	420	137	161	176	196	230	218	257	279	308	357
68	259	303	332	367	436	139	164	181	200	232	215	252	276	308	354
69	271	318	347	386	454	142	166	183	200	235	213	249	274	301	349
70	283	332	364	403	476	144	169	186	203	235	213	247	271	298	341
71	315	369	403	445	523	152	178	196	218	248	220	257	281	313	354
72	330	386	423	467	544	154	178	196	218	248	218	254	276	305	349
73	345	403	440	486	565	154	181	198	218	248	215	249	274	301	341
74	362	420	459	508	587	154	181	198	215	246	210	247	269	293	333
75	376	435	474	523	600	149	174	191	208	238	200	235	254	279	314
76	418	486	528	582	666	159	183	203	220	248	210	242	266	291	325
77	442	511	557	611	697	159	186	200	220	248	205	239	259	286	320
78	467	540	587	645	732	159	183	200	218	246	203	235	257	279	312
79	494	572	621	679	769	132	154	166	181	203	200	230	249	274	306
80	525	606	657	718	811	132	152	164	181	201	198	230	247	271	301
81	560	645	699	762	856	130	149	159	176	196	196	225	242	264	296
82	599	687	743	809	906	127	149	159	174	196	191	222	237	259	288
83	640	733	792	860	964	127	147	156	171	188	188	220	232	254	280
84	687	784	843	916	1,022	122	144	154	169	185	186	215	232	252	277
85	736	841	902	978	1,088	122	139	149	164	177	186	210	225	244	269

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
Current Annual Premium Rates for Policies Issued Prior to 9/16/2002
Rates per $10 Daily Benefit

	Policy Form: HTQ11-338-MA-PA-601					**Rider: 11-SIP-PA-998**					**Rider: 11-CIP-PA-998**				
	Base Rates with No Inflation Protection					**Simple Inflation Protection Rider**					**Compound Inflation Protection Rider**				
Issue	**Benefit Period**					**Benefit Period**					**Benefit Period**				
Age	*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	46	54	59	66	90	27	34	39	44	58	122	147	164	183	227
40	46	56	61	68	92	29	34	42	46	63	125	149	166	186	230
41	49	59	64	73	98	32	37	44	46	63	127	149	169	186	230
42	51	61	66	76	100	32	39	44	49	66	127	152	171	188	235
43	54	64	71	78	106	34	42	46	54	69	130	154	171	193	235
44	56	66	73	81	108	34	42	49	56	74	130	156	174	196	238
45	59	68	76	86	114	37	44	51	56	74	132	159	176	196	240
46	61	71	78	88	119	39	49	54	61	77	134	161	178	198	240
47	64	76	83	93	122	42	49	56	64	82	134	161	178	200	243
48	66	78	86	98	127	44	51	61	66	85	137	164	183	200	243
49	68	81	90	103	132	46	56	61	68	90	137	161	178	198	240
50	71	83	93	105	135	49	59	64	71	90	137	164	181	200	243
51	73	86	95	108	137	49	59	66	73	92	137	164	181	200	243
52	76	88	98	110	140	49	61	68	76	95	137	164	183	203	246
53	78	93	103	115	148	54	64	71	81	98	137	161	178	200	240
54	83	98	110	122	156	56	66	73	83	100	137	164	178	200	238
55	88	103	115	130	161	59	71	78	86	108	139	166	181	200	243
56	93	110	122	134	169	61	73	81	93	114	142	166	183	205	243
57	98	115	127	144	177	66	78	86	95	116	142	169	186	205	246
58	105	122	134	152	188	66	81	90	100	122	142	171	188	208	246
59	110	130	144	159	198	71	86	93	105	124	144	171	188	210	246
60	115	134	147	164	201	71	86	95	108	129	142	169	186	205	243
61	120	142	156	174	214	76	90	100	110	132	144	171	186	208	243
62	127	152	166	186	225	81	93	103	115	137	147	171	188	208	246
63	137	159	176	196	238	81	98	108	120	143	147	174	191	210	246
64	144	171	188	208	251	86	100	110	125	148	149	174	191	213	248
65	154	181	200	222	267	90	108	115	130	153	152	178	193	213	248
66	174	203	222	247	296	98	115	127	142	166	159	188	205	227	264
67	186	218	239	264	314	100	120	130	147	172	161	188	205	230	267
68	198	232	254	281	336	105	125	137	152	174	164	191	210	232	267
69	213	247	271	301	357	108	130	142	156	180	164	193	210	232	267
70	227	264	291	323	380	112	132	144	159	185	166	196	213	232	267
71	257	298	327	362	425	122	144	156	174	198	176	205	225	247	283
72	274	320	349	386	452	125	147	161	178	203	176	205	225	249	283
73	291	340	371	411	478	130	152	166	183	206	178	208	227	249	283
74	310	362	396	437	505	132	154	169	186	211	178	208	227	249	283
75	330	384	418	459	528	132	152	166	183	206	176	203	220	242	275
76	376	435	474	521	597	139	164	178	196	219	183	215	232	257	288
77	403	467	508	557	637	142	166	181	198	222	183	215	232	257	285
78	433	501	543	596	676	144	166	183	200	225	186	213	232	254	285
79	464	535	582	638	721	122	142	154	169	190	183	215	232	252	283
80	499	577	626	684	771	122	142	154	166	188	186	213	230	252	280
81	538	618	670	733	822	125	142	154	166	188	183	213	230	249	280
82	579	665	718	784	880	122	142	152	166	182	183	213	227	247	275
83	623	716	772	841	941	122	139	149	164	180	183	210	225	244	272
84	672	770	828	899	1,004	120	139	147	164	177	183	210	222	244	269
85	726	828	890	963	1,073	120	137	144	159	174	181	208	220	239	264

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
Current Annual Premium Rates for Policies Issued On or After 9/16/2002
Rates per $10 Daily Benefit

	Policy Form: NTQ11-337-MA-PA-601					**Rider: 11-SIP-PA-998**					**Rider: 11-CIP-PA-998**				
	Base Rates with No Inflation Protection					**Simple Inflation Protection Rider**					**Compound Inflation Protection Rider**				
Issue	**Benefit Period**					**Benefit Period**					**Benefit Period**				
Age	*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	29	32	37	52	12	15	20	22	35	61	78	98	110	159
40	24	29	34	39	55	15	20	22	24	37	66	83	100	115	164
41	27	32	37	42	58	15	20	24	27	40	66	86	105	120	170
42	29	34	39	44	63	15	20	24	29	43	68	88	108	125	176
43	29	37	42	46	66	17	22	27	32	49	73	93	112	130	184
44	32	39	44	49	72	20	24	29	34	52	76	95	117	134	190
45	34	42	46	54	78	20	24	34	37	55	78	100	122	139	196
46	37	44	51	56	84	22	29	34	42	58	81	103	125	147	202
47	39	46	54	61	89	24	32	39	44	63	83	108	132	152	210
48	42	49	59	66	95	24	34	42	46	69	86	112	134	156	219
49	44	54	64	71	104	29	37	44	51	75	90	117	139	161	225
50	46	56	68	76	110	32	42	49	56	84	93	120	142	166	231
51	46	59	68	78	112	32	39	49	56	81	95	120	147	166	233
52	51	64	73	83	121	34	44	54	64	89	95	122	149	171	236
53	54	68	81	90	133	39	46	59	68	95	100	127	154	178	245
54	59	73	88	100	141	42	51	61	71	104	103	132	159	183	257
55	64	81	95	108	156	44	56	68	78	112	108	137	166	191	265
56	68	86	103	117	167	49	61	76	86	121	112	144	174	198	277
57	76	95	112	130	184	51	66	81	90	130	115	147	178	205	282
58	83	103	122	139	199	54	71	88	100	141	117	154	186	215	297
59	90	112	134	154	219	59	78	93	108	150	122	159	193	222	306
60	95	120	144	164	231	64	81	98	112	161	125	161	196	225	311
61	103	132	156	178	254	68	86	108	122	170	130	166	203	235	320
62	112	144	171	196	277	73	93	115	132	184	134	174	210	242	331
63	125	156	188	215	303	78	103	122	142	196	139	181	218	252	343
64	134	171	205	237	331	86	110	132	152	208	147	188	227	259	355
65	149	191	227	262	363	90	115	142	161	225	152	193	237	269	372
66	171	218	264	301	421	103	132	159	183	251	164	213	257	296	401
67	188	240	289	330	458	108	139	169	196	268	169	220	267	306	418
68	205	264	318	364	504	115	147	178	205	282	176	227	274	315	429
69	225	289	347	399	550	122	156	191	220	300	183	235	286	328	444
70	247	318	384	440	605	130	166	200	230	314	188	242	293	337	458
71	286	369	445	511	700	144	183	225	257	352	205	264	320	367	499
72	313	403	489	560	770	149	193	235	271	366	210	271	328	379	510
73	342	443	533	614	842	156	200	247	284	383	215	276	337	389	525
74	374	482	584	670	917	161	210	257	296	401	220	284	345	399	536
75	403	516	623	716	974	161	213	259	296	401	215	281	342	391	530
76	467	601	729	836	1,138	181	235	284	328	441	235	306	369	425	574
77	511	660	800	919	1,248	186	240	293	337	458	240	308	377	433	585
78	560	724	878	1,010	1,369	191	247	301	347	470	240	313	381	440	591
79	611	792	961	1,108	1,499	164	213	259	298	404	245	315	386	445	599
80	670	868	1,056	1,218	1,649	169	218	264	308	412	249	325	394	455	611
81	731	951	1,156	1,335	1,804	169	218	269	308	415	252	325	396	460	617
82	797	1,037	1,264	1,460	1,971	171	222	269	313	415	252	328	399	462	620
83	868	1,130	1,379	1,594	2,150	169	222	269	313	418	252	330	401	465	623
84	946	1,232	1,504	1,741	2,346	169	220	271	313	418	252	330	403	467	625
85	1,029	1,342	1,641	1,902	2,559	169	218	267	308	415	252	330	403	467	628

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
Current Annual Premium Rates for Policies Issued On or After 9/16/2002
Rates per $10 Daily Benefit

	Policy Form: NTQ11-337-MA-PA-601					**Rider: 11-SIP-PA-998**					**Rider: 11-CIP-PA-998**				
	Base Rates with No Inflation Protection					**Simple Inflation Protection Rider**					**Compound Inflation Protection Rider**				
Issue	**Benefit Period**					**Benefit Period**					**Benefit Period**				
Age	*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	73	86	95	138	42	51	64	73	107	230	293	355	408	571
40	61	76	88	100	144	44	56	68	78	115	232	298	362	416	582
41	66	81	95	108	153	46	59	71	83	124	235	303	367	421	591
42	68	86	100	112	161	49	64	76	90	130	240	308	372	430	599
43	73	90	105	120	173	51	66	83	95	138	242	313	379	435	605
44	76	95	112	127	182	56	71	86	100	147	247	318	384	440	617
45	81	100	117	134	193	59	76	93	108	156	249	323	391	447	623
46	86	105	125	142	205	61	81	98	115	164	252	328	396	455	631
47	90	110	132	152	216	66	88	105	120	176	257	333	401	460	640
48	95	117	139	159	231	71	93	112	130	184	259	337	408	467	648
49	100	125	149	169	242	76	98	117	139	199	254	330	399	460	637
50	103	130	156	178	254	81	103	125	144	208	262	335	403	465	646
51	105	132	156	181	259	81	105	127	144	208	259	335	406	465	643
52	110	139	166	188	271	86	108	132	154	216	262	337	408	472	651
53	117	147	176	200	288	88	117	139	164	231	257	333	401	462	637
54	125	156	188	215	306	93	122	149	171	245	259	335	406	467	646
55	132	166	200	230	326	100	130	156	181	257	262	340	408	469	651
56	139	178	213	245	346	108	137	166	191	271	264	340	413	474	657
57	149	188	227	259	369	112	147	176	203	285	267	345	418	482	663
58	159	200	242	276	395	117	154	186	215	297	269	347	421	484	666
59	169	215	257	296	418	125	159	196	225	314	267	345	421	482	660
60	174	220	264	303	429	125	164	198	227	317	267	345	418	479	660
61	183	235	284	325	458	132	171	205	237	331	264	342	413	474	651
62	196	249	301	347	487	137	178	218	247	346	267	345	416	477	654
63	208	267	323	369	519	144	186	225	259	357	267	345	416	479	657
64	222	284	342	394	550	149	193	235	269	375	267	345	418	482	657
65	237	303	367	421	588	154	200	245	281	386	269	347	421	484	660
66	267	342	413	474	660	169	218	267	308	424	284	367	445	511	697
67	284	364	440	506	703	174	225	274	315	432	281	367	445	511	695
68	301	386	469	538	746	178	232	281	325	444	284	367	443	511	695
69	320	413	499	575	793	183	237	291	333	455	281	364	443	509	695
70	340	440	533	611	844	188	242	296	342	464	281	364	440	509	689
71	384	496	601	692	951	203	264	320	369	504	296	384	467	538	732
72	408	528	641	738	1,012	205	269	325	377	513	293	381	465	533	726
73	435	562	682	785	1,078	208	271	330	381	519	291	379	462	533	721
74	460	597	724	836	1,144	213	276	335	386	525	291	377	460	526	712
75	482	621	753	866	1,179	205	269	325	377	510	276	359	438	506	683
76	548	707	858	988	1,349	220	289	352	406	548	291	381	465	535	721
77	584	758	922	1,061	1,444	222	291	352	408	553	291	377	457	531	715
78	626	812	988	1,139	1,548	225	293	357	413	556	289	374	455	526	709
79	672	873	1,061	1,225	1,663	188	247	303	350	470	284	369	452	523	703
80	724	941	1,147	1,325	1,793	188	247	301	347	470	284	367	450	518	700
81	780	1,012	1,235	1,428	1,931	188	247	301	347	467	279	364	445	516	692
82	839	1,093	1,333	1,543	2,084	186	242	298	345	461	276	359	443	509	686
83	902	1,176	1,438	1,665	2,245	183	242	293	340	458	276	359	438	506	680
84	973	1,269	1,553	1,800	2,424	181	237	291	337	452	274	357	435	501	677
85	1,051	1,372	1,680	1,946	2,623	178	235	286	333	447	269	352	430	499	669

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
Current Annual Premium Rates for Policies Issued On or After 9/16/2002
Rates per $10 Daily Benefit

	Policy Form: NTQ11-337-MA-PA-601					**Rider: 11-SIP-PA-998**					**Rider: 11-CIP-PA-998**				
	Base Rates with No Inflation Protection					**Simple Inflation Protection Rider**					**Compound Inflation Protection Rider**				
Issue	**Benefit Period**					**Benefit Period**					**Benefit Period**				
Age	*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	37	44	51	56	84	24	32	37	44	63	134	174	210	242	337
40	37	46	54	61	86	27	32	42	46	69	139	176	215	247	343
41	39	49	56	64	92	29	34	44	51	72	142	181	220	252	349
42	42	51	61	68	98	29	37	44	54	78	142	183	220	254	355
43	44	54	64	73	104	32	42	49	56	84	144	188	225	259	360
44	46	56	68	76	110	34	44	51	61	89	147	191	230	264	369
45	49	61	71	81	118	37	46	56	66	92	149	193	235	269	372
46	51	64	76	86	124	39	49	59	68	98	154	198	237	274	378
47	54	68	81	90	133	42	51	64	73	104	156	200	242	279	383
48	59	73	86	98	141	42	54	68	78	110	156	203	247	281	389
49	61	76	90	103	150	46	61	73	86	118	159	205	247	286	392
50	66	81	98	110	159	49	64	76	90	127	156	203	242	281	389
51	66	81	98	110	159	49	64	76	90	127	161	210	252	291	401
52	68	88	103	117	170	54	66	83	95	133	159	203	249	286	392
53	73	93	110	127	182	56	71	88	100	141	161	205	249	286	395
54	78	100	117	134	193	61	76	95	108	153	164	208	254	293	401
55	83	105	127	144	208	64	83	100	115	161	166	215	257	296	406
56	90	115	137	156	222	66	86	105	122	170	169	215	262	301	415
57	98	122	147	169	239	71	93	112	130	182	169	220	267	306	421
58	103	132	156	181	257	78	98	120	137	190	174	222	271	311	427
59	112	142	169	193	274	81	105	127	147	205	176	227	276	318	435
60	117	149	178	203	288	83	108	130	152	210	174	225	271	313	429
61	125	159	193	220	311	90	115	137	159	219	178	230	276	318	435
62	134	174	208	237	334	95	120	147	169	233	181	232	281	323	441
63	147	186	225	257	360	98	127	154	178	245	183	237	286	328	450
64	156	200	242	279	389	105	137	164	188	259	188	242	291	333	455
65	171	218	262	301	421	110	144	174	198	271	191	247	298	342	464
66	193	249	301	345	478	122	156	191	218	300	203	262	315	364	496
67	210	269	325	374	516	127	166	200	230	317	208	267	323	369	507
68	227	293	352	406	559	134	171	210	240	331	210	271	330	377	513
69	247	318	384	440	608	139	181	220	252	343	215	276	335	384	522
70	269	345	418	479	660	147	191	230	264	357	218	281	340	391	530
71	308	396	479	553	758	161	208	254	289	395	232	303	367	421	571
72	335	430	523	599	824	166	218	262	303	409	237	308	372	430	579
73	364	469	567	653	893	171	222	274	313	424	240	311	379	435	588
74	394	509	616	709	968	178	232	281	323	438	242	315	384	440	597
75	421	543	655	753	1,026	178	230	281	323	435	240	308	377	433	582
76	487	628	760	875	1,190	193	252	308	355	478	257	333	403	465	628
77	531	685	831	956	1,300	198	259	315	364	490	257	335	408	469	631
78	577	746	907	1,044	1,415	203	267	323	374	504	259	340	411	474	640
79	628	814	990	1,139	1,545	174	227	276	320	429	262	340	413	479	643
80	685	888	1,081	1,247	1,689	176	232	284	325	435	264	345	418	484	648
81	746	968	1,179	1,362	1,842	176	232	284	328	438	264	342	421	484	651
82	809	1,054	1,284	1,484	2,003	178	230	284	328	444	264	345	421	487	654
83	878	1,144	1,396	1,616	2,179	178	232	284	328	441	264	345	421	487	654
84	954	1,242	1,518	1,760	2,369	176	232	281	325	438	264	345	421	487	654
85	1,034	1,350	1,650	1,914	2,577	174	230	281	325	435	264	345	421	487	654

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
Current Annual Premium Rates for Policies Issued On or After 9/16/2002
Rates per $10 Daily Benefit

	Policy Form: LTQ11-336-MA-PA-601					**Rider: 11-SIP-PA-998**					**Rider: 11-CIP-PA-998**				
	Base Rates with No Inflation Protection					**Simple Inflation Protection Rider**					**Compound Inflation Protection Rider**				
Issue	**Benefit Period**					**Benefit Period**					**Benefit Period**				
Age	*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	39	46	51	81	20	24	29	37	55	78	100	122	144	210
40	34	42	49	56	86	20	27	32	37	58	81	105	127	147	216
41	37	44	51	59	89	22	29	37	42	63	83	108	134	154	225
42	39	46	56	64	95	22	27	37	44	69	86	112	137	159	233
43	42	49	59	68	104	24	34	42	46	72	88	117	142	164	239
44	44	54	64	71	110	27	34	44	51	78	90	120	147	171	248
45	46	56	66	76	118	29	39	49	56	84	95	125	154	178	257
46	49	61	71	83	124	32	39	51	59	89	98	127	159	181	265
47	51	64	76	88	133	34	46	56	64	98	103	134	164	191	277
48	56	68	83	95	144	37	49	59	68	104	105	139	169	196	282
49	59	73	88	103	153	39	51	64	73	112	110	144	176	203	294
50	64	78	95	110	164	44	56	68	78	121	110	147	178	205	297
51	64	81	95	110	167	44	56	71	81	121	115	147	181	210	303
52	68	86	105	120	179	46	61	73	88	130	115	149	181	210	306
53	73	93	112	130	193	51	66	81	93	138	120	154	188	218	314
54	81	100	122	139	210	54	71	86	103	147	122	161	196	227	323
55	86	110	132	152	225	59	76	93	110	161	127	164	203	235	337
56	93	117	144	164	245	64	83	100	120	173	132	171	208	245	346
57	100	130	156	178	265	68	88	108	127	184	137	176	215	252	357
58	110	139	169	196	288	73	95	117	134	196	139	183	225	259	369
59	120	152	183	213	311	78	103	127	147	213	144	188	232	267	380
60	125	161	196	225	331	83	108	132	154	219	147	191	232	271	383
61	137	176	213	247	360	88	115	142	164	236	152	196	242	279	395
62	149	191	232	269	392	93	125	152	176	251	154	203	249	286	406
63	161	208	254	293	427	100	132	161	188	268	161	210	254	296	418
64	176	227	276	320	464	108	139	174	200	285	166	215	264	306	429
65	193	249	303	350	507	115	149	186	215	306	171	222	274	318	447
66	220	286	347	403	582	130	169	208	240	340	186	242	298	342	481
67	242	313	381	440	634	134	178	220	257	360	188	247	306	355	496
68	264	340	416	482	692	142	191	235	271	383	193	257	315	364	510
69	286	372	455	528	755	152	200	247	286	404	200	264	323	374	522
70	313	408	499	579	827	159	210	259	301	424	205	269	330	384	536
71	359	469	577	670	954	178	235	289	335	473	222	291	357	413	579
72	394	513	631	734	1,043	183	245	301	350	493	225	296	364	423	591
73	428	560	689	800	1,138	191	254	313	367	513	227	301	369	433	599
74	465	609	751	873	1,239	200	264	328	381	533	232	306	377	438	608
75	496	648	797	929	1,311	200	267	330	381	536	227	301	369	428	594
76	575	753	929	1,083	1,530	220	293	362	423	594	242	320	396	460	640
77	628	826	1,020	1,191	1,680	225	301	374	438	611	242	323	399	462	640
78	685	905	1,120	1,308	1,842	235	311	384	450	631	245	323	399	462	643
79	748	990	1,227	1,435	2,020	200	267	330	389	542	245	320	399	465	640
80	822	1,088	1,352	1,584	2,228	205	271	337	396	556	245	323	399	465	643
81	895	1,188	1,482	1,738	2,444	205	276	342	403	562	245	320	396	460	634
82	976	1,301	1,621	1,907	2,678	208	276	345	406	568	240	315	391	452	623
83	1,064	1,418	1,773	2,088	2,931	208	279	347	406	568	235	311	384	445	608
84	1,159	1,548	1,939	2,286	3,208	208	279	347	408	568	230	303	372	433	591
85	1,262	1,690	2,117	2,501	3,510	205	276	345	408	568	225	293	362	421	571

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
Current Annual Premium Rates for Policies Issued On or After 9/16/2002
Rates per $10 Daily Benefit

	Policy Form: LTQ11-336-MA-PA-601					**Rider: 11-SIP-PA-998**					**Rider: 11-CIP-PA-998**				
	Base Rates with No Inflation Protection					**Simple Inflation Protection Rider**					**Compound Inflation Protection Rider**				
Issue	**Benefit Period**					**Benefit Period**					**Benefit Period**				
Age	*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	81	100	120	137	210	59	76	93	108	164	279	362	445	516	744
40	83	105	127	144	222	64	81	98	115	173	284	369	450	523	752
41	88	110	132	154	233	66	86	105	120	184	286	374	457	528	764
42	93	117	139	161	245	68	90	112	130	196	291	379	465	538	775
43	98	122	149	171	259	73	95	117	137	205	293	384	469	543	784
44	103	130	156	181	274	78	100	125	144	216	298	389	477	550	793
45	108	137	166	191	288	83	108	130	154	231	303	394	482	557	804
46	115	144	174	200	306	86	115	139	164	242	306	399	489	567	813
47	120	154	186	213	323	93	120	147	171	257	311	401	491	572	821
48	127	161	196	225	340	98	127	156	183	271	313	408	499	579	830
49	134	171	208	240	360	103	134	164	193	285	306	399	489	567	810
50	139	178	218	249	375	108	139	171	200	297	311	403	494	575	824
51	142	181	220	254	380	110	142	174	203	303	308	403	494	572	819
52	149	188	230	267	398	112	149	181	210	311	313	408	499	579	830
53	156	200	245	281	421	120	156	191	225	329	306	399	489	567	807
54	166	213	259	301	447	127	166	203	235	343	308	401	491	570	813
55	176	227	276	318	473	132	174	213	249	363	311	403	494	575	819
56	186	240	293	340	501	142	183	225	259	380	313	408	499	577	824
57	198	254	311	359	530	147	193	237	276	401	313	411	501	582	827
58	210	271	330	384	565	154	200	247	286	418	313	411	504	584	830
59	222	289	352	406	597	161	210	259	303	438	311	403	496	579	819
60	227	293	359	418	611	164	213	262	303	438	311	406	496	575	819
61	242	313	381	443	648	169	222	274	318	455	303	399	491	570	804
62	257	333	406	472	686	176	230	284	330	476	303	399	491	567	804
63	271	352	430	501	729	183	240	296	342	493	306	399	491	567	801
64	289	374	457	531	772	188	249	308	357	510	303	399	489	570	801
65	306	399	489	567	821	196	257	318	369	527	303	399	489	567	798
66	342	445	545	636	917	213	281	347	403	576	318	418	516	597	842
67	362	472	579	675	971	220	289	357	416	591	315	416	513	594	836
68	384	501	616	716	1,029	225	296	364	425	605	313	413	509	589	830
69	406	531	653	760	1,092	230	303	374	435	617	311	411	506	587	821
70	430	565	694	809	1,159	235	308	381	445	631	308	406	501	579	813
71	482	633	782	912	1,303	252	333	411	482	683	323	425	523	609	856
72	511	672	829	968	1,383	254	337	421	489	692	318	418	518	601	842
73	540	712	880	1,029	1,467	259	342	425	496	700	313	413	511	594	830
74	572	756	934	1,093	1,553	262	345	430	501	706	308	406	504	584	816
75	594	782	966	1,127	1,597	254	337	418	489	686	293	386	477	555	772
76	672	888	1,100	1,286	1,824	271	362	450	526	738	306	403	499	582	807
77	719	951	1,179	1,381	1,954	274	364	455	531	746	298	396	489	570	793
78	770	1,020	1,267	1,484	2,098	274	367	457	535	749	293	386	479	557	772
79	824	1,095	1,362	1,597	2,254	235	308	386	455	637	289	377	467	548	755
80	888	1,181	1,472	1,729	2,435	232	311	386	455	637	281	372	457	535	741
81	954	1,271	1,587	1,868	2,629	232	308	384	450	634	276	362	447	521	718
82	1,027	1,372	1,714	2,020	2,842	232	306	384	450	628	267	352	435	506	695
83	1,108	1,479	1,853	2,186	3,072	225	306	379	445	623	259	342	421	489	672
84	1,196	1,599	2,005	2,369	3,326	225	301	374	440	617	249	330	406	472	646
85	1,291	1,731	2,171	2,570	3,606	220	293	372	435	608	242	315	391	452	617

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
Current Annual Premium Rates for Policies Issued On or After 9/16/2002
Rates per $10 Daily Benefit

	Policy Form: LTQ11-336-MA-PA-601					**Rider: 11-SIP-PA-998**					**Rider: 11-CIP-PA-998**				
	Base Rates with No Inflation Protection					**Simple Inflation Protection Rider**					**Compound Inflation Protection Rider**				
Issue	**Benefit Period**					**Benefit Period**					**Benefit Period**				
Age	*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	49	61	71	83	127	34	44	56	64	98	166	215	264	306	438
40	51	64	76	88	133	37	49	59	68	104	169	220	269	308	447
41	54	66	81	93	141	39	51	61	71	110	171	222	271	315	452
42	56	71	86	98	147	42	54	66	76	118	174	225	276	320	461
43	59	76	90	103	156	44	56	68	83	124	178	227	271	325	467
44	64	78	95	110	164	46	61	73	86	133	178	235	284	330	476
45	66	83	100	115	176	49	66	78	93	135	181	237	289	335	478
46	71	88	108	122	184	51	68	83	98	147	183	240	293	340	487
47	73	93	112	130	196	56	73	90	105	156	188	245	298	345	493
48	78	100	120	139	208	59	76	95	110	164	191	247	303	350	501
49	83	105	127	147	219	64	83	100	117	176	191	249	303	352	501
50	88	112	134	156	233	66	86	108	122	182	188	245	301	345	496
51	88	112	134	156	233	66	86	108	125	184	193	252	311	357	510
52	93	120	144	166	248	71	90	112	132	193	191	247	303	350	501
53	100	127	154	178	265	73	98	120	137	202	191	247	303	350	499
54	105	134	164	191	282	81	105	127	147	213	193	252	308	355	504
55	112	144	176	203	300	86	110	134	156	228	196	254	311	362	513
56	120	154	188	218	320	90	117	142	164	239	198	259	315	364	519
57	130	166	200	232	343	93	122	152	176	254	200	262	320	372	525
58	137	176	215	249	366	100	132	159	186	268	203	267	325	374	530
59	147	191	230	267	392	105	137	171	196	282	205	267	330	381	536
60	154	198	242	279	409	108	142	174	203	288	203	264	323	377	530
61	166	213	259	301	438	112	149	183	213	306	203	269	328	379	536
62	178	230	279	323	470	120	156	193	225	320	205	271	333	384	542
63	191	247	301	347	504	127	164	203	237	337	210	274	335	389	548
64	205	264	323	374	542	132	176	215	249	355	213	279	340	394	553
65	220	286	350	406	585	139	183	225	259	369	215	281	345	399	559
66	249	325	396	460	660	154	200	249	289	409	230	298	367	425	599
67	269	350	428	496	712	161	210	259	301	429	232	303	372	430	605
68	291	379	465	538	770	169	220	271	315	447	235	306	377	435	611
69	313	408	501	582	833	176	230	284	330	464	237	311	381	443	617
70	340	443	545	631	902	181	240	293	345	484	240	315	384	447	623
71	386	506	623	724	1,032	200	264	323	379	533	254	335	411	477	666
72	418	548	675	787	1,118	208	274	337	391	550	257	337	416	479	672
73	452	594	734	853	1,211	213	281	347	406	571	257	340	416	484	677
74	489	643	792	924	1,311	220	291	359	418	588	259	340	421	487	677
75	518	682	839	978	1,381	220	289	359	418	588	252	330	411	474	660
76	599	787	973	1,134	1,605	237	315	391	460	640	267	352	433	506	700
77	650	858	1,061	1,242	1,752	245	325	403	469	660	267	352	435	504	700
78	707	934	1,159	1,357	1,914	252	335	413	484	674	267	352	433	501	695
79	770	1,020	1,267	1,484	2,090	213	286	355	416	579	264	347	428	499	689
80	839	1,115	1,386	1,626	2,288	218	289	359	423	588	262	345	425	496	683
81	912	1,213	1,513	1,778	2,499	220	291	362	425	594	259	342	421	489	674
82	993	1,323	1,650	1,941	2,729	218	291	367	430	597	254	335	413	482	660
83	1,078	1,438	1,800	2,120	2,977	218	293	364	430	597	247	328	403	469	643
84	1,171	1,565	1,961	2,313	3,245	215	289	362	428	597	242	320	394	457	625
85	1,271	1,702	2,135	2,523	3,539	215	289	359	428	594	235	308	381	443	602

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
Current Annual Premium Rates for Policies Issued On or After 9/16/2002
Rates per $10 Daily Benefit

	Policy Form: FLQ11-336-MA-PA-601					**Rider: 11-SIP-PA-998**					**Rider: 11-CIP-PA-998**				
	Base Rates with No Inflation Protection					**Simple Inflation Protection Rider**					**Compound Inflation Protection Rider**				
Issue	**Benefit Period**					**Benefit Period**					**Benefit Period**				
Age	*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	29	34	42	46	72	17	22	27	32	49	71	90	110	130	190
40	32	37	44	51	78	17	24	29	32	52	71	95	115	132	196
41	34	39	46	54	81	20	27	32	37	58	73	98	120	137	202
42	34	42	51	56	86	22	24	32	42	61	78	103	122	144	210
43	37	44	54	61	92	22	32	37	42	66	81	105	127	149	216
44	39	49	56	64	98	24	29	42	46	72	83	108	132	154	225
45	42	51	59	68	107	27	34	44	51	75	86	112	139	161	231
46	44	56	64	76	112	29	34	46	51	81	88	112	144	161	239
47	46	56	68	78	118	32	44	51	59	89	93	122	147	174	251
48	51	61	76	86	130	32	44	51	61	92	93	127	152	176	254
49	54	66	78	93	138	34	46	59	66	101	98	130	159	183	265
50	56	71	86	100	147	42	51	61	68	110	100	132	161	183	268
51	56	73	86	100	150	42	49	64	71	110	105	132	164	188	274
52	61	78	95	108	161	42	54	66	81	115	105	132	161	191	274
53	66	83	100	117	173	46	61	73	83	127	108	139	171	196	282
54	73	90	110	125	190	49	64	78	93	133	110	144	176	205	291
55	78	100	120	137	202	51	66	83	98	147	112	147	181	210	306
56	83	105	130	147	222	59	76	90	108	156	120	154	188	220	311
57	90	117	142	161	239	61	78	95	115	164	122	159	193	225	320
58	100	125	152	176	259	66	86	105	122	176	125	166	203	232	331
59	108	137	166	191	280	71	93	112	132	193	130	169	208	240	343
60	112	144	176	203	300	76	98	120	139	196	132	174	210	245	343
61	122	159	191	222	326	81	103	130	147	210	137	176	218	252	355
62	134	171	210	242	352	83	112	134	159	228	139	183	222	257	366
63	144	188	230	264	383	90	117	144	169	242	147	188	227	267	378
64	159	205	249	289	418	95	125	156	181	257	149	193	237	274	386
65	174	225	274	315	455	103	134	166	193	277	154	200	245	286	404
66	198	257	313	364	525	117	152	186	215	306	166	218	269	308	432
67	218	281	342	396	571	122	161	198	232	326	169	222	276	320	447
68	237	306	374	433	623	127	171	210	245	346	174	232	284	328	458
69	257	335	408	474	680	137	181	222	259	363	181	237	291	337	470
70	281	367	450	521	744	144	191	232	271	383	186	242	296	347	484
71	323	423	518	604	859	161	210	262	301	427	200	262	323	372	522
72	355	462	567	660	940	164	220	271	315	444	203	267	328	381	530
73	386	504	621	719	1,026	171	230	281	330	461	203	271	333	391	539
74	418	548	675	785	1,115	181	237	296	345	481	210	276	340	394	548
75	447	584	716	836	1,182	181	240	298	342	481	203	269	333	386	533
76	518	677	836	976	1,378	198	264	325	379	533	218	289	357	413	576
77	565	743	917	1,071	1,513	203	271	337	394	550	218	291	359	416	576
78	616	814	1,007	1,179	1,657	210	279	347	403	568	220	291	359	416	579
79	672	892	1,105	1,291	1,819	181	240	296	350	487	220	286	359	418	576
80	738	980	1,218	1,425	2,006	186	242	303	357	499	220	289	357	418	576
81	804	1,068	1,333	1,565	2,199	186	249	308	362	507	220	289	357	413	571
82	878	1,171	1,460	1,716	2,409	188	249	311	364	510	215	284	352	408	562
83	958	1,276	1,597	1,880	2,637	186	252	311	364	513	210	279	345	399	548
84	1,044	1,394	1,746	2,059	2,888	186	249	313	367	510	205	271	335	389	530
85	1,134	1,521	1,905	2,252	3,159	186	249	311	367	513	203	264	328	379	513

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
Current Annual Premium Rates for Policies Issued On or After 9/16/2002
Rates per $10 Daily Benefit

	Policy Form: FLQ11-336-MA-PA-601					**Rider: 11-SIP-PA-998**					**Rider: 11-CIP-PA-998**				
	Base Rates with No Inflation Protection					**Simple Inflation Protection Rider**					**Compound Inflation Protection Rider**				
Issue	**Benefit Period**					**Benefit Period**					**Benefit Period**				
Age	*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	44	56	64	76	115	32	39	51	56	86	149	193	237	274	392
40	46	56	68	78	118	32	44	54	64	95	152	198	242	279	404
41	49	59	73	83	127	34	46	54	64	98	154	200	245	284	406
42	51	64	78	88	133	37	49	59	68	107	156	203	247	289	415
43	54	68	81	93	141	39	51	64	73	110	159	205	245	293	418
44	56	71	86	100	147	44	54	66	76	121	161	210	257	296	429
45	59	76	90	103	159	44	59	71	86	121	164	213	259	303	429
46	64	78	98	110	167	46	64	73	88	133	166	218	264	306	438
47	66	83	100	117	176	51	66	83	93	141	169	220	269	311	444
48	71	90	108	125	187	51	68	86	100	147	171	222	274	315	450
49	76	95	115	132	196	56	73	90	105	159	171	225	271	318	452
50	78	100	122	142	210	61	78	95	110	164	171	220	269	311	447
51	78	100	122	142	210	61	78	95	112	167	176	227	279	320	458
52	83	108	130	149	222	64	81	103	120	176	171	222	274	315	452
53	90	115	139	161	239	66	88	108	122	182	171	222	271	313	450
54	95	122	147	171	254	71	93	115	132	193	174	225	279	320	455
55	100	130	159	183	271	78	100	120	139	205	176	230	279	325	461
56	108	139	169	196	288	81	105	130	147	216	178	232	284	328	467
57	117	149	181	210	308	83	110	137	156	228	181	237	289	333	473
58	122	159	193	225	329	90	117	144	166	242	183	240	293	337	478
59	132	171	208	240	352	95	125	154	176	257	186	240	296	345	484
60	139	178	218	252	369	95	127	156	181	259	181	237	291	337	476
61	149	191	232	271	395	103	134	166	191	274	183	242	296	340	481
62	161	208	252	291	424	108	139	174	203	288	183	245	298	345	487
63	171	222	271	313	455	115	147	181	213	303	191	247	301	350	493
64	186	237	291	337	487	117	159	193	225	320	191	252	306	355	499
65	198	257	315	364	527	125	166	203	235	331	193	254	311	359	501
66	225	293	357	413	594	139	181	225	259	369	205	269	330	384	539
67	242	315	386	447	640	144	188	232	269	386	210	271	333	386	545
68	262	342	418	484	692	152	198	245	284	404	213	274	340	391	550
69	281	367	452	523	749	159	208	254	298	418	215	281	342	399	556
70	306	399	491	567	813	164	215	264	311	435	215	284	345	403	559
71	347	455	562	650	928	181	240	289	342	481	230	303	369	430	599
72	377	494	606	709	1,006	186	245	306	352	496	230	303	374	430	605
73	408	535	660	768	1,089	191	252	313	367	513	230	306	374	435	611
74	440	579	714	831	1,182	198	262	323	377	527	232	306	377	438	608
75	467	614	756	880	1,242	198	259	323	377	530	227	298	369	428	594
76	540	709	875	1,022	1,444	213	284	352	413	576	240	315	391	455	631
77	584	773	956	1,117	1,577	220	293	362	423	594	242	318	391	455	631
78	636	841	1,044	1,223	1,724	227	301	372	435	605	240	315	389	450	625
79	694	917	1,139	1,335	1,882	191	259	320	374	519	237	313	386	450	620
80	756	1,002	1,247	1,465	2,061	196	262	325	379	527	235	311	384	445	614
81	822	1,090	1,362	1,599	2,248	198	264	325	384	536	232	308	379	440	608
82	892	1,191	1,487	1,748	2,456	198	262	330	386	539	230	301	372	433	594
83	971	1,293	1,619	1,907	2,680	196	264	330	389	536	222	296	364	423	576
84	1,054	1,408	1,765	2,081	2,920	193	259	325	386	539	218	289	355	413	565
85	1,144	1,531	1,922	2,271	3,185	193	262	323	384	536	210	279	342	399	542

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
Current Annual Premium Rates for Policies Issued On or After 9/16/2002
Rates per $10 Daily Benefit

	Policy Form: HTQ11-338-MA-PA-601					**Rider: 11-SIP-PA-998**					**Rider: 11-CIP-PA-998**				
	Base Rates with No Inflation Protection					**Simple Inflation Protection Rider**					**Compound Inflation Protection Rider**				
Issue	**Benefit Period**					**Benefit Period**					**Benefit Period**				
Age	*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	34	39	42	46	69	15	20	22	27	40	59	71	81	93	130
40	34	39	44	49	75	17	22	24	27	40	64	76	83	95	130
41	37	42	46	51	78	17	22	24	29	43	64	78	86	98	133
42	37	44	49	54	81	20	24	27	32	46	68	78	88	100	138
43	39	46	51	56	84	22	24	27	32	49	68	81	90	103	141
44	42	49	54	59	86	22	27	29	34	52	71	83	93	108	147
45	44	51	56	64	92	22	27	32	34	52	71	86	95	108	147
46	44	54	59	66	95	27	29	34	39	58	76	88	100	112	153
47	46	56	61	68	101	27	32	37	42	58	78	90	103	115	156
48	49	59	64	73	104	29	34	39	42	63	81	95	108	117	161
49	54	61	68	76	110	29	37	42	46	66	81	98	110	122	164
50	56	64	71	81	115	32	39	44	49	66	81	98	110	120	161
51	56	66	73	81	115	32	39	42	49	69	83	100	110	125	167
52	59	68	76	86	121	34	42	46	51	72	83	100	112	125	164
53	61	73	81	90	127	37	44	49	56	75	88	103	115	127	170
54	66	78	86	95	133	39	46	54	59	81	90	105	120	132	176
55	71	83	90	103	141	42	49	56	61	86	93	110	122	134	179
56	76	88	98	110	150	44	54	59	66	89	95	112	125	139	184
57	81	95	105	117	159	46	56	64	71	95	98	115	127	142	187
58	86	100	112	125	170	51	61	66	76	101	103	120	132	147	193
59	93	108	120	132	182	54	66	71	81	104	103	125	137	154	196
60	95	112	125	139	187	56	66	73	81	110	105	125	137	152	196
61	103	122	134	149	199	59	68	78	86	115	108	127	139	156	202
62	110	130	144	159	213	64	76	81	93	121	112	132	144	161	205
63	120	139	154	171	228	66	78	88	98	127	112	134	147	164	210
64	127	149	166	183	242	71	83	90	103	133	117	139	152	169	216
65	139	161	178	198	259	73	88	98	108	141	120	144	156	174	222
66	156	183	203	225	294	83	98	108	117	153	132	154	169	186	236
67	169	198	218	242	314	88	103	112	125	161	134	156	174	191	242
68	183	213	235	259	337	90	108	117	132	167	137	161	176	196	248
69	198	230	252	279	363	95	112	125	137	173	139	166	181	200	251
70	213	249	271	301	389	100	115	130	142	179	144	166	186	203	254
71	242	281	308	342	438	110	130	142	154	196	154	181	198	218	274
72	259	303	333	367	467	115	132	144	161	202	159	183	200	222	277
73	279	325	357	394	499	117	137	149	164	208	159	186	203	225	280
74	298	347	381	421	530	122	142	154	169	210	161	188	205	225	280
75	320	372	403	445	556	120	139	154	166	208	159	183	200	220	274
76	364	423	460	506	631	130	152	166	181	225	171	196	215	235	291
77	394	455	494	543	674	132	154	169	186	228	171	198	218	237	291
78	423	489	531	582	723	137	156	171	188	228	171	198	218	237	288
79	455	526	570	626	772	115	134	147	159	193	174	200	218	237	288
80	491	567	616	672	827	117	134	144	161	193	176	203	218	240	291
81	531	611	660	724	885	117	134	147	156	193	176	203	220	237	288
82	575	658	712	775	948	115	134	144	159	193	174	203	218	237	288
83	621	712	765	834	1,017	115	134	144	156	190	174	200	218	235	282
84	670	768	824	895	1,089	117	132	144	154	187	174	198	215	232	282
85	724	826	885	961	1,167	115	132	142	152	182	174	198	213	230	277

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
Current Annual Premium Rates for Policies Issued On or After 9/16/2002
Rates per $10 Daily Benefit

	Policy Form: HTQ11-338-MA-PA-601					**Rider: 11-SIP-PA-998**					**Rider: 11-CIP-PA-998**				
	Base Rates with No Inflation Protection					**Simple Inflation Protection Rider**					**Compound Inflation Protection Rider**				
Issue	**Benefit Period**					**Benefit Period**					**Benefit Period**				
Age	*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	76	88	98	110	161	44	56	64	71	107	205	247	274	306	415
40	78	90	100	112	167	49	59	68	78	112	208	249	279	313	421
41	81	95	105	117	173	51	61	71	81	118	213	252	281	315	424
42	83	98	110	122	182	54	66	73	83	118	215	257	284	318	424
43	88	103	115	127	187	56	68	76	88	124	215	257	286	320	429
44	90	108	120	134	193	59	71	81	90	133	218	259	289	320	432
45	95	110	125	139	202	61	76	83	95	135	220	264	291	325	432
46	98	115	130	144	208	66	78	88	100	141	222	264	293	328	435
47	103	120	134	149	216	68	83	93	105	147	222	267	296	330	438
48	108	125	139	156	225	71	88	98	110	150	220	264	291	323	421
49	110	132	147	164	231	76	90	100	112	159	222	262	291	325	432
50	112	134	149	166	233	78	90	103	115	159	222	262	289	323	421
51	117	137	152	171	242	78	95	105	117	161	222	264	293	328	432
52	117	139	154	174	242	81	95	108	120	164	225	264	293	325	424
53	125	147	161	181	251	83	100	112	127	173	220	264	293	325	432
54	130	154	169	191	262	88	105	117	130	176	218	257	286	318	415
55	137	161	178	198	274	90	108	122	137	182	218	259	286	320	412
56	142	169	186	208	285	98	115	127	142	187	220	259	289	320	412
57	149	176	196	218	297	100	120	132	147	193	220	262	286	320	412
58	156	186	205	227	308	105	122	137	154	202	222	259	286	320	412
59	164	193	215	240	320	108	130	142	156	210	215	254	279	308	395
60	166	196	218	242	323	108	127	139	156	205	220	259	284	315	409
61	174	205	227	252	337	112	132	144	164	210	213	252	274	306	389
62	183	215	237	264	352	115	137	152	166	216	213	249	274	306	386
63	193	225	249	276	366	117	139	154	171	222	210	249	274	303	386
64	203	237	262	289	380	120	142	156	176	228	210	247	271	301	383
65	213	249	274	303	398	125	147	161	181	233	210	247	271	301	380
66	235	276	303	335	438	134	156	174	193	248	220	257	284	313	395
67	247	289	318	352	458	137	161	176	196	251	218	257	279	308	389
68	259	303	333	367	476	139	164	181	200	254	215	252	276	308	386
69	271	318	347	386	496	142	166	183	200	257	213	249	274	301	380
70	284	333	364	403	519	144	169	186	203	257	213	247	271	298	372
71	315	369	403	445	571	152	178	196	218	271	220	257	281	313	386
72	330	386	423	467	594	154	178	196	218	271	218	254	276	306	380
73	345	403	440	487	617	154	181	198	218	271	215	249	274	301	372
74	362	421	460	509	640	154	181	198	215	268	210	247	269	293	363
75	377	435	474	523	654	149	174	191	208	259	200	235	254	279	343
76	418	487	528	582	726	159	183	203	220	271	210	242	267	291	355
77	443	511	557	611	761	159	186	200	220	271	205	240	259	286	349
78	467	540	587	645	798	159	183	200	218	268	203	235	257	279	340
79	494	572	621	680	839	132	154	166	181	222	200	230	249	274	334
80	526	606	658	719	885	132	152	164	181	219	198	230	247	271	329
81	560	645	699	763	934	130	149	159	176	213	196	225	242	264	323
82	599	687	743	809	989	127	149	159	174	213	191	222	237	259	314
83	641	734	792	861	1,052	127	147	156	171	205	188	220	232	254	306
84	687	785	844	917	1,115	122	144	154	169	202	186	215	232	252	303
85	736	841	902	978	1,187	122	139	149	164	193	186	210	225	245	294

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
Current Annual Premium Rates for Policies Issued On or After 9/16/2002
Rates per $10 Daily Benefit

	Policy Form: HTQ11-338-MA-PA-601					**Rider: 11-SIP-PA-998**					**Rider: 11-CIP-PA-998**				
	Base Rates with No Inflation Protection					**Simple Inflation Protection Rider**					**Compound Inflation Protection Rider**				
Issue	**Benefit Period**					**Benefit Period**					**Benefit Period**				
Age	*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	46	54	59	66	98	27	34	39	44	63	122	147	164	183	248
40	46	56	61	68	101	29	34	42	46	69	125	149	166	186	251
41	49	59	64	73	107	32	37	44	46	69	127	149	169	186	251
42	51	61	66	76	110	32	39	44	49	72	127	152	171	188	257
43	54	64	71	78	115	34	42	46	54	75	130	154	171	193	257
44	56	66	73	81	118	34	42	49	56	81	130	156	174	196	259
45	59	68	76	86	124	37	44	51	56	81	132	159	176	196	262
46	61	71	78	88	130	39	49	54	61	84	134	161	178	198	262
47	64	76	83	93	133	42	49	56	64	89	134	161	178	200	265
48	66	78	86	98	138	44	51	61	66	92	137	164	183	200	265
49	68	81	90	103	144	46	56	61	68	98	137	161	178	198	262
50	71	83	93	105	147	49	59	64	71	98	137	164	181	200	265
51	73	86	95	108	150	49	59	66	73	101	137	164	181	200	265
52	76	88	98	110	153	49	61	68	76	104	137	164	183	203	268
53	78	93	103	115	161	54	64	71	81	107	137	161	178	200	262
54	83	98	110	122	170	56	66	73	83	110	137	164	178	200	259
55	88	103	115	130	176	59	71	78	86	118	139	166	181	200	265
56	93	110	122	134	184	61	73	81	93	124	142	166	183	205	265
57	98	115	127	144	193	66	78	86	95	127	142	169	186	205	268
58	105	122	134	152	205	66	81	90	100	133	142	171	188	208	268
59	110	130	144	159	216	71	86	93	105	135	144	171	188	210	268
60	115	134	147	164	219	71	86	95	108	141	142	169	186	205	265
61	120	142	156	174	233	76	90	100	110	144	144	171	186	208	265
62	127	152	166	186	245	81	93	103	115	150	147	171	188	208	268
63	137	159	176	196	259	81	98	108	120	156	147	174	191	210	268
64	144	171	188	208	274	86	100	110	125	161	149	174	191	213	271
65	154	181	200	222	291	90	108	115	130	167	152	178	193	213	271
66	174	203	222	247	323	98	115	127	142	182	159	188	205	227	288
67	186	218	240	264	343	100	120	130	147	187	161	188	205	230	291
68	198	232	254	281	366	105	125	137	152	190	164	191	210	232	291
69	213	247	271	301	389	108	130	142	156	196	164	193	210	232	291
70	227	264	291	323	415	112	132	144	159	202	166	196	213	232	291
71	257	298	328	362	464	122	144	156	174	216	176	205	225	247	308
72	274	320	350	386	493	125	147	161	178	222	176	205	225	249	308
73	291	340	372	411	522	130	152	166	183	225	178	208	227	249	308
74	311	362	396	438	550	132	154	169	186	231	178	208	227	249	308
75	330	384	418	460	576	132	152	166	183	225	176	203	220	242	300
76	377	435	474	521	651	139	164	178	196	239	183	215	232	257	314
77	403	467	509	557	695	142	166	181	198	242	183	215	232	257	311
78	433	501	543	597	738	144	166	183	200	245	186	213	232	254	311
79	465	535	582	638	787	122	142	154	169	208	183	215	232	252	308
80	499	577	626	685	842	122	142	154	166	205	186	213	230	252	306
81	538	619	670	734	896	125	142	154	166	205	183	213	230	249	306
82	579	665	719	785	960	122	142	152	166	199	183	213	227	247	300
83	623	716	773	841	1,026	122	139	149	164	196	183	210	225	245	297
84	672	770	829	900	1,095	120	139	147	164	193	183	210	222	245	294
85	726	829	890	963	1,170	120	137	144	159	190	181	208	220	240	288

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 2022 Rate Increase/145MAI01-30.09

Supporting Document Schedules

Satisfied - Item:	Transmittal Letter (A&H)
Comments:	
Attachment(s):	PA_Cover Letter_MedAmerica_Series 11 and Prior Individual_LRRS_20220425.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_Series 11 and Prior Individual_LRRS_20220425.pdf PA_Supplement_MedAmerica_Series 11 and Prior Individual_LRRS_20220425.pdf PA_Exhibits and Attachments_MedAmerica_Series 11 and Prior_20220425.xlsb
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):	MAPA Letter of Authorization 20210908 Milliman.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):	

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 2022 Rate Increase/145MAI01-30.09

Item Status:	
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:	Advertisement Compliance Certification
Bypass Reason:	Not applicable as this is not an advertisement 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:	Claims and Administration Processing Plan
Comments:	
Attachment(s):	MedAmerica Claims Procedures_20160128.pdf
Item Status:	
Status Date:	

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 2022 Rate Increase/145MAI01-30.09

Satisfied - Item:	Sample Policyholder Notification Letter
Comments:	
Attachment(s):	TEMPLATE MAPA Legacy-Assumed PH Letter 9.30.19.pdf TEMPLATE MAPA Legacy-Assumed CNF 9.30.19.pdf
Item Status:	
Status Date:	

Satisfied - Item:	Response to June 3, 2022 Objection
Comments:	
Attachment(s):	PA_Response to 20220603 Objection_MedAmerica_Series 11 and Prior Individual_LRRS_20220808.pdf PA_Premier_Response Attachments_MedAmerica_Series 11 and Prior Individual_20220808.xlsb
Item Status:	
Status Date:	

Satisfied - Item:	Response to September 15, 2022 Objection
Comments:	
Attachment(s):	PA_Response to 20220915 Objection_MedAmerica_Series 11 and Prior_Individual_LRRS_20221018.pdf
Item Status:	
Status Date:	

Satisfied - Item:	Response to October 26, 2022 Objection
Comments:	
Attachment(s):	PA_Response to 20221026 Objection_MedAmerica_Series 11 and Prior_LRRS_20221116.pdf PA_Premier_Response Attachments_MedAmerica_Series 11 and Prior_20221116.xlsb
Item Status:	
Status Date:	

Attachment PA_Exhibits and Attachments_MedAmerica_Series 11 and Prior_20220425.xlsb is not a PDF document and cannot be reproduced here.

Attachment PA_Premier_Response Attachments_MedAmerica_Series 11 and Prior Individual_20220808.xlsb is not a PDF document and cannot be reproduced here.

Attachment PA_Premier_Response Attachments_MedAmerica_Series 11 and Prior_20221116.xlsb is not a PDF document and cannot be reproduced here.

8500 Normandale Lake Blvd.
Suite 1850
Minneapolis, MN 55437-3830
USA

Tel +1 952 897 5300

milliman.com

April 25, 2022

Honorable Michael Humphreys
Acting Insurance Commissioner
Pennsylvania Insurance Department (Department)

Via SERFF

Re: MedAmerica Insurance Company (MedAmerica)
Company NAIC # 69515
SERFF Tracking # MILL-133176375

Prior to Series 11	
Facility Only Form	**LTC-LBP-2PA**
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**

Dear Acting Commissioner Humphreys:

On behalf of the company, we are submitting the referenced rate filing for your review. This is an existing product(s) that provides long-term care coverage on an individual basis. The company issued this product(s) in Pennsylvania from October 12, 1992 to August 1, 2004 and is no longer marketing it in any jurisdiction. The company is making a similar request on the group product(s) in a concurrent filing (SERFF Tracking # MILL-133176421).

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 originally expected.

The cumulative requested rate increase varies by benefit period and inflation option. The rate increase request was determined as described in Section 2 of the enclosed actuarial memorandum. The following table provides the requested rate increases for the above-listed form(s) by benefit period, inflation option, and issue date.

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.

Pennsylvania – MedAmerica
Rate Increase Request

Policy Form Cohort	Benefit Period	Inflation Option	Requested Increase
Issued Prior to 9/16/2002			
Prior to Series 11	Non-Lifetime	Non-Auto	0.0%
	Non-Lifetime	Auto	90.2
	Lifetime	Non-Auto	208.3
	Lifetime	Auto	259.3
Series 11 Individual	Non-Lifetime	Non-Auto	0.0
	Non-Lifetime	Auto	90.2
	Lifetime	Non-Auto	208.3
	Lifetime	Auto	259.3
Issued On or After 9/16/2002			
Prior to Series 11	Non-Lifetime	Non-Auto	0.0
	Non-Lifetime	Auto	90.1
	Lifetime	Non-Auto	182.6
	Lifetime	Auto	229.4
Series 11 Individual	Non-Lifetime	Non-Auto	0.0
	Non-Lifetime	Auto	90.1
	Lifetime	Non-Auto	182.6
	Lifetime	Auto	229.4
Average[1]			129.0

[1] As of December 31, 2020 and excludes policies assumed to be paid up prior to implementation of the requested rate increase.

Prior rate increases have been approved and implemented on the above-listed form(s). Exhibit IV of the enclosed actuarial memorandum provides a nationwide status listing of the current and all prior rate increase filings for each jurisdiction in which there is business in force. The company is seeking this current rate increase request to help alleviate the adverse performance on this block of business.

While a prior rate increase in Pennsylvania varied by issue date, the company is currently requesting a cumulative rate increase that varies by benefit period and inflation option only (rather than also by issue date), as described in Section 2 of the enclosed actuarial memorandum. However, the company reserves the right to vary future cumulative rate increases by issue date due to differences in the rate history.

If the Department approves the increase requested in full, then the company does not anticipate additional rate increases beyond the current request. However, the company will continue to monitor experience and reserves the right to request additional rate increases if experience deteriorates from the current expectations in this filing.

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. If the cumulative requested rate increase is filed for use, a majority of policyholders will be eligible for a contingent benefit upon lapse.

To comply with rate stability regulation in this jurisdiction, enclosed with this filing is a plan, subject to the Department's review, which demonstrates that appropriate administration and claims processing procedures are in effect.

The following electronic items are included with this submission:

- cover letter
- letter from the company authorizing submission of this filing on its behalf
- claims and administration processing plan, as provided by MedAmerica

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.

- actuarial memorandum
- supplement to the actuarial memorandum
- current and proposed premium rate schedules
- numerical data in Excel
- sample policyholder notification letter[1]

[1] 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.

The contact person for this filing is:

Courtney Williamson, ASA, MAAA
Associate Actuary
Milliman, Inc.
8500 Normandale Lake Blvd., Suite 1850
Minneapolis, MN 55437
(952) 820-2413
courtney.williamson@milliman.com

Thank you for your assistance in reviewing this filing.

Respectfully,

Missy Gordon, FSA, MAAA
Principal and Consulting Actuary

MAG/ljh

Enclosures

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.

MEDAMERICA INSURANCE COMPANY
Address: 165 Court Street, Rochester, New York 14647

Series 11 and Prior Actuarial Memorandum

April 25, 2022

Product	Number
Prior to Series 11	
Facility Only Form	LTC-LBP-2PA
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 and inflation option, except where limited by regulatory restrictions or the limited amount of in-force business. This actuarial memorandum captures the pooled nationwide experience of the above-listed policy form(s) as well as similar individual and group policy forms of the same product series issued nationwide by MedAmerica and its affinity partners. Since the prior nationwide request, the business of certain affinity partners has been commuted back to the original companies. MedAmerica no longer has any risk for these policies and, therefore, their experience is not reflected in any experience exhibits in this filing.

1. Purpose of Filing

This actuarial memorandum has been prepared for the purpose of demonstrating that the requested 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

Nationwide, the company is requesting a rate increase that varies by benefit period and inflation option. The rate increase levels were determined to vary by benefit period and inflation option to better align the rate increase with the adverse experience. Appendix A to this memorandum provides a description of the development of and justification for the assumptions used in this filing, which were used to analyze the adverse experience.

The rate increases were developed by targeting the lifetime loss ratios shown in Table 2.1 below. These lifetime loss ratios are consistent with those expected in the prior nationwide request. As the prior nationwide request varied by benefit period, the target lifetime loss ratios vary only by benefit period.

Table 2.1
Target Lifetime Loss Ratios

Benefit Period	Lifetime Loss Ratio
Non-Lifetime	78%
Lifetime	119
All	88

The average nationwide requested rate increases, shown in Table 2.2 below, were developed to produce the target lifetime loss ratios shown in Table 2.1 above. The table below also provides the average prior and cumulative increases by policy form cohort, benefit period, and inflation option based on the nationwide distribution of business.

Table 2.2
Nationwide Average[1] Rate Increase Request

Policy Form Cohort	Benefit Period	Inflation Option	Prior Increase	Requested Increase	Cumulative Increase
Prior to Series 11	Non-Lifetime	Non-Auto	93.8%	52.8%	196%
	Non-Lifetime	Auto	95.2	188.6	463
	Lifetime	Non-Auto	122.9	332.6	864
	Lifetime	Auto	126.3	396.6	1024
Series 11 Individual	Non-Lifetime	Non-Auto	94.9	51.9	196
	Non-Lifetime	Auto	95.2	188.5	463
	Lifetime	Non-Auto	141.4	299.5	864
	Lifetime	Auto	128.1	392.8	1024
Series 11 Group	Non-Lifetime	Non-Auto	112.9	39.1	196
	Non-Lifetime	Auto	122.3	153.3	463
	Lifetime	Non-Auto	74.0	454.2	864
	Lifetime	Auto	71.3	555.9	1024
Average			111.0	187.9	507

[1] As of December 31, 2020 and excludes policies assumed to be paid up prior to implementation of the requested rate increase.

As part of this nationwide rate increase filing, the company is pursuing actuarially equivalent rate increases in all jurisdictions except where limited due to regulatory requirements or the limited amount of in-force business. Therefore, the rate increases requested in each jurisdiction were developed to produce an actuarially equivalent lifetime loss ratio equal to those in Table 2.1 above, with premiums restated to reflect the actual rate increases implemented in each jurisdiction. The enclosed cover letter provides the requested rate increases in this jurisdiction.

If the Department approves the increase requested in full, then the company does not anticipate additional rate increases beyond the current request. However, the company will continue to monitor experience and reserves the right to request additional rate increases if experience deteriorates from the current expectations in this filing.

Current rate tables and corresponding rate tables reflecting the proposed rate increases are enclosed with this filing. Please note that the actual rates implemented may vary slightly from those in the enclosed rate tables 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 or group 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.

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. Active Assumptions

i. Claim Incidence Probabilities were developed using the 2017 Milliman *Long-Term Care Guidelines* (*Guidelines*) incidence curves, with adjustments for retrospective improvement to bring the *Guidelines* forward to 2020, adverse selection for historical rate increases, and contingent nonforfeiture (CNF) policies. The incidence curves were developed based on starting site of care—assisted living facility (ALF), skilled nursing facility (SNF), or home health care (HHC)—and further adjusted based on historical experience for gender, marital status, product type, cohort, coverage type, benefit period, and attained age.

ii. Voluntary Lapse Probabilities vary by policy duration (ultimate for 10+), attained age (ultimate for 65+), benefit period, inflation option, marital status, gender, cohort, and premium payment option. Exhibit A-2a of Appendix A to this memorandum summarizes the ultimate lapse probabilities by key characteristics for lifetime-pay policies.

The durational voluntary lapse probabilities were adjusted based on the following criteria for the limited-pay options:

- For the ten-pay option, a reduction of 65% of the durational lapse probabilities is assumed for durations one through four, a reduction of 70% of the durational lapse probabilities is assumed for durations five through eight, and 0% lapse thereafter.
- For the twenty-pay option, a reduction of 50% of the durational lapse probabilities is assumed for durations one through eight, a reduction of 75% of the durational lapse probabilities is assumed for durations nine through fifteen, and 0% lapse thereafter.

iii. Active Mortality Probabilities reflect the 2012 Individual Annuitant Mortality (IAM) Basic table with adjustments to make it applicable to an active life exposure base and retrospective active mortality improvement to bring the table forward to 2020. These mortality probabilities were then adjusted based on historical mortality experience by gender, marital status, inflation

option, group versus individual, cohort, attained age, issue era, and duration. The mortality adjustment factors can be found in Exhibit A-3a of Appendix A to this memorandum.

b. Disabled Assumptions

i. Disabled Mortality Probabilities reflect disabled mortality tables developed in conjunction with the 2017 *Guidelines* with adjustments to reflect retrospective disabled mortality improvement to bring the probabilities forward to 2020. These mortality probabilities were then adjusted based on historical experience by starting site of care, gender, benefit period, group versus individual, claim year, and attained age at claim incurral.

ii. Implied Recovery Probabilities were developed from the composite claim terminations and the disabled mortality assumption with adjustments to ensure the resulting recovery probabilities were reasonable by claim month and across key claimant characteristics. Appendix A to this memorandum provides the formula used to develop the implied recovery probabilities.

c. Utilization Assumption

i. Policy Duration Utilization was developed using the 2017 *Guidelines* with adjustments to reflect current utilization percentages and cost of care trends. The policy duration utilization assumption also captures how utilization by site of care changes over time due to (1) inflation of the daily benefit and (2) cost of care trends.

ii. Claim Duration Utilization was developed based on the policy duration utilization assumption described above with adjustments for actual claim experience by starting site of care. The adjustment factors applied to the policy duration utilization assumption can be found in Exhibit A-8a of Appendix A to this memorandum.

d. 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).

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 and the approximate reduction to premiums and benefits due to the impact of RBO elections by rate increase band. The assumptions shown in the table below are applied to lifetime-pay policies only; limited-pay policies are assumed to not elect CBUL or RBO.

Table 6.1
Policyholder Behavior Assumptions

Requested Rate Increase Band	CBUL Election Rate	RBO Election Rate	Approximate Reduction for RBO[1]
1.0 – 9.9%	1%	1%	0.0%
10.0 – 19.9	3	2	0.3
20.0 – 49.9	6	6	1.7
50.0 – 79.9	9	14	6.1
80.0 – 99.9	12	18	9.7
100.0 – 199.9	14	25	17.4
200.0+	16	35	29.8

[1] For display purposes, the approximate reduction for RBO values reflect the midpoint of the requested increase within each range. A detailed description of the calculation can be found in Appendix A. For example, the 20.0% – 49.9% range was calculated using the formula in Appendix A and a rate increase of 35%. The 200.0%+ range reflects a rate increase of 250%.

As a result of the rate increase, we assume an increase to claim incidence rates due to adverse selection. The adverse selection assumption varies by cumulative rate increase band and attained

age. The following table provides the assumed increase in claim incidence rates by cumulative rate increase band.

Table 6.2
Adverse Selection Assumption

Cumulative Rate Increase Band	Adverse Selection Assumption Range
1.0 – 15.0%	1.00 – 1.00
15.1 – 25.0%	1.01 – 1.01
25.1 – 50.0%	1.02 – 1.10
50.1 – 75.0%	1.03 – 1.11
75.1 – 100.0%	1.04 – 1.12
100.1%+	1.05 – 1.13

e. Interest Rate consistent with the maximum valuation interest rate applicable to the year of issue (ranges from 3.5% to 5.5% and averages 4.5%) is used to demonstrate compliance with the minimum loss ratio requirements.

f. Prospective Annual Improvement in the active mortality and claim incidence assumptions is assumed for 10 years starting in 2021. Annual improvement factors vary by attained age and gender based on the G2 improvement scale from the 2012IAM table.

g. Expenses have not been explicitly projected for the purpose of demonstrating compliance with minimum loss ratio requirements. Originally filed expense assumptions are assumed to remain appropriate, except 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 (including commuted business), other similar business issued by MedAmerica (including its affinity partners and acquired blocks of 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 product(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 may have been eligible for modified guaranteed issue underwriting for those actively at work and, for some forms, those not currently at work. For some forms, 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 other forms, spouses of active employees and spouses of employees who were not currently at work were subject to short form underwriting.

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.

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, 2020) are applied to the annual premium (AP):

Table 12.1
Nationwide Modal Factors and Distribution

Premium Mode	Modal Factors	Percent Distribution
Annual	1.00*AP	46%
Semi-Annual	0.52*AP	4
Quarterly	0.26*AP	27
Monthly	0.09*AP	22

13. Reserves

Active life reserves have not been used in the experience exhibits for this rate increase analysis for the purpose of demonstrating compliance with minimum loss ratio requirements, except as described in the supplement to the actuarial memorandum. Claim reserves as of December 31, 2020 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, 2020 has been allocated to the 2020 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 product(s) and similar individual and group products 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 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 2020 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 January 2010 and April 2021, which average 111% 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, and annual 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 nationwide lifetime loss ratios by policy form cohort, benefit period, and inflation option also exceed the minimum loss ratio required by pre-rate stability regulation. The 'All' row corresponds to that shown in Exhibit I.

Table 15.1
Nationwide Lifetime Loss Ratios at the Maximum Valuation Interest Rate by Policy Form Cohort, Benefit Period, and Inflation Option

Policy Form Cohort	Benefit Period	Inflation Option	Before Increase	After Increase
Prior to Series 11	All	All	110%	101%
Series 11 Individual	All	All	122	89
Series 11 Group	All	All	111	83
All[1]	Non-Lifetime	Non-Auto	81	77
All	Non-Lifetime	Auto	126	92
All	Lifetime	Non-Auto	112	98
All	Lifetime	Auto	181	127
All	Non-Lifetime	All	101	80
All	Lifetime	All	167	122
All	All	All	115	90

[1] Policies that previously elected a CBUL currently have a non-lifetime benefit period and non-auto inflation. These policies were excluded from this row because the premiums paid prior to CBUL election are not commensurate with their current benefits.

The majority of policies subject to this rate increase are eligible for a CBUL, so an alternative version of the 58%/85% test, which uses the greater of 58% and the original anticipated lifetime loss ratio, is provided per post-rate stability regulation. The expected loss ratio using original pricing assumptions and actual policies sold (64%) is used as a substitute for the original pricing loss ratio that was determined at pricing based on an assumed mix of business sold.

Exhibit II provides a demonstration that the nationwide requested rate increase meets the alternative 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 64%,
2. 85% of the accumulated value of prior premium rate schedule increases,
3. Present value of projected initial earned premium times 64%, 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 alternative 58%/85% test is passed by policy form cohort, benefit period, and inflation option. The 'All' row corresponds to that shown in Exhibit II. Values in the table are shown in millions of dollars. The 'Alternative 58% Loss Ratio' represents the greater of 58% and the expected lifetime loss ratio.

Table 15.2
Nationwide Alternative 58%/85% Test by Policy Form Cohort, Benefit Period, and Inflation Option

Policy Form Cohort	Benefit Period	Inflation Option	Alternative 58% Loss Ratio	Item 5[1]	Item 7[2]	Result[3]
Prior to Series 11	All	All	64%	$142.9	$229.6	Pass
Series 11 Individual	All	All	60	220.7	321.7	Pass
Series 11 Group	All	All	69	198.5	245.7	Pass
All[4]	Non-Lifetime	Non-Auto	64	124.5	151.9	Pass
All	Non-Lifetime	Auto	65	277.8	393.3	Pass
All	Lifetime	Non-Auto	61	22.4	34.9	Pass
All	Lifetime	Auto	60	102.8	211.4	Pass
All	Non-Lifetime	All	65	437.8	550.7	Pass
All	Lifetime	All	60	125.2	246.3	Pass
All	All	All	64	563.2	797.0	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.
[4] Policies that previously elected a CBUL currently have a non-lifetime benefit period and non-auto inflation. These policies were excluded from this row because the premiums paid prior to CBUL election are not commensurate with their current benefits.

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.

Table 16.1
Nationwide Actual and Expected Loss Ratios
by Policy Form Cohort, Benefit Period, and Inflation Option

			Lifetime Loss Ratio			Actual-to-Expected	
Policy Form Cohort	Benefit Period	Inflation Option	Before Increase	After Increase	Expected	Before Increase	After Increase
Prior to Series 11	All	All	105%	96%	64%	1.65	1.51
Series 11 Individual	All	All	119	88	60	2.00	1.47
Series 11 Group	All	All	109	81	69	1.57	1.17
All[1]	Non-Lifetime	Non-Auto	78	75	64	1.21	1.16
All	Non-Lifetime	Auto	123	90	65	1.89	1.38
All	Lifetime	Non-Auto	109	95	61	1.77	1.55
All	Lifetime	Auto	176	125	60	2.96	2.10
All	Non-Lifetime	All	97	78	65	1.50	1.21
All	Lifetime	All	162	119	60	2.71	1.99
All	All	All	112	88	64	1.75	1.38

[1] Policies that previously elected a CBUL currently have a non-lifetime benefit period and non-auto inflation. These policies were excluded from this row because the premiums paid prior to CBUL election are not commensurate with their current benefits.

Actual and projected experience in the above table is identical to that described in Exhibit I, except historical experience is accumulated at MedAmerica's actual historical earned interest rates, which average 5.3% for this block, and projected experience is discounted at MedAmerica's current most-

likely interest rate assumption of 4.25%. This 4.25% rate represents MedAmerica's expectation of its long-term investment earnings rate based on the average net investment earnings rate projected for MedAmerica's 2020 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 summary of the original pricing assumptions that underlie the expected experience described above.

17. History of Previous Rate Revisions

Prior rate increases have been approved and implemented on the above-listed form(s). Exhibit IV provides a status of the rate increase filings, along with the current requested increases. The status is shown for each jurisdiction in which there is business in force as of December 31, 2020. Also included are the number of policies and annualized premium as of December 31, 2020. Exhibit IV is provided for (a) Prior to Series 11, (b) Series 11 Individual, and (c) Series 11 Group policy forms. Each status listing provides the status of (i) the first round and associated follow-ups, (ii) the second round and the first follow-up, (iii) the second and third follow-up filings for the second round of the rate increase requests, and (iv) the current round of requested increases.

As part of this rate increase process, an increase has been or is expected to be requested in most jurisdictions. The company anticipates requesting an actuarially equivalent cumulative rate increase level in all jurisdictions except where limited due to regulatory requirements or the limited amount of in-force business. In jurisdictions where the company has not yet reached a decision regarding the current rate increase or the prior reduced rate increase was phased-in over multiple years, Exhibit IV indicates "TBD" (to be determined).

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 may be due to a combination of higher persistency, higher morbidity, and lower interest.

In 2017, a nationwide requested increase was determined such that the company was able to certify that rates would remain stable under moderately adverse experience (MAE) for policies with a non-lifetime benefit period. The company's threshold for these policies for MAE was defined as a lifetime loss ratio of 85%. To determine whether experience has deteriorated beyond this threshold, experience was restated to reflect the timing and rate level of the 2017 requested increase and projected using current most-likely assumptions. As the resulting lifetime loss ratio was 90%, the MAE threshold was crossed, and additional rate increases could be considered. Exhibit V provides a summary of the assumptions used in the 2017 nationwide request.

19. Average Annual Premium in Pennsylvania (Based on December 31, 2020 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.

Table 19.1
Average Annual Premium
Pennsylvania – MedAmerica

Policy Form Cohort	Benefit Period	Inflation Option	Number of Insureds	Before Increase Premium[1]	After Requested Increase Premium[1]
Prior to Series 11	Non-Lifetime	Non-Auto	38	$1,848	$1,848
	Non-Lifetime	Auto	27	2,962	5,635
	Lifetime	Non-Auto	7	3,322	10,242
	Lifetime	Auto	4	7,160	25,725
	All	All	76	2,659	5,223
Series 11 Individual	Non-Lifetime	Non-Auto	8	1,839	1,839
	Non-Lifetime	Auto	53	3,562	6,774
	Lifetime	Non-Auto	1	3,463	10,677
	Lifetime	Auto	21	6,116	21,391
	All	All	83	4,041	10,044
Series 11 Group	Non-Lifetime	Non-Auto	7	808	808
	Non-Lifetime	Auto	56	2,618	4,977
	Lifetime	Non-Auto	0	0	0
	Lifetime	Auto	0	0	0
	All	All	63	2,417	4,514
Total	Non-Lifetime	Non-Auto	53	1,709	1,709
	Non-Lifetime	Auto	136	3,054	5,808
	Lifetime	Non-Auto	8	3,339	10,296
	Lifetime	Auto	25	6,283	22,085
	All	All	222	3,107	6,824

[1] Premium reflects all prior rate increases filed for use, including the most recent increase filed on September 14, 2021.

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, 2020 (Based on Nationwide In-Force Insured Count)

Table 21.1
Nationwide Distributions of Business

Issue Ages	Percent Distribution
<40	10%
40-44	8
45-49	13
50-54	19
55-59	22
60-64	17
65-69	8
70-74	3
75+	1

Elimination Period	Percent Distribution
0-Day	3%
20-Day	15
30-Day	<1
60-Day	6
90-Day	57
100-Day	5
180-Day	14
365-Day	<1

Benefit Period	Percent Distribution
1-Year	<1%
2-Year	18
3-Year	30
4-Year	6
5-Year	19
6-Year	1
7-Year	<1
8-Year	<1
10-Year	<1
Lifetime	13
CNF	14

Inflation Option	Percent Distribution
None	50%
Simple for Life	3
Compound for Life	37
Simple for 20 Years	11
GPO	<1

Premium Payment Option	Percent Distribution
Ten-Pay	15%
Twenty-Pay	12
Lifetime-Pay	59
CNF	14

Coverage Type	Percent Distribution
Facility Only	4%
Comprehensive	95
Home Health Only	1

22. Number of Insureds and Annualized Premium (Based on December 31, 2020 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.

MEDAMERICA INSURANCE COMPANY
Address: 165 Court Street, Rochester, New York 14647

Series 11 and Prior Actuarial Memorandum

April 25, 2022

Table 22.1
Insureds and Annualized Premium
Pennsylvania – MedAmerica

Policy Form Cohort	Benefit Period	Inflation Option	Number of Insureds	Annualized Premium[1]
Prior to Series 11	Non-Lifetime	Non-Auto	38	$70,217
	Non-Lifetime	Auto	27	79,985
	Lifetime	Non-Auto	7	23,251
	Lifetime	Auto	4	28,639
	All	All	76	202,091
Series 11 Individual	Non-Lifetime	Non-Auto	8	14,716
	Non-Lifetime	Auto	53	188,793
	Lifetime	Non-Auto	1	3,463
	Lifetime	Auto	21	128,431
	All	All	83	335,403
Series 11 Group	Non-Lifetime	Non-Auto	7	5,658
	Non-Lifetime	Auto	56	146,603
	Lifetime	Non-Auto	0	0
	Lifetime	Auto	0	0
	All	All	63	152,261
Total	Non-Lifetime	Non-Auto	53	90,590
	Non-Lifetime	Auto	136	415,381
	Lifetime	Non-Auto	8	26,714
	Lifetime	Auto	25	157,070
	All	All	222	689,754

[1] Premium reflects all prior rate increases filed for use, including the most recent increase filed on September 14, 2021.

Table 22.2
Insureds and Annualized Premium
Nationwide

Policy Form Cohort	Benefit Period	Inflation Option	Number of Insureds	Annualized Premium
Prior to Series 11	Non-Lifetime	Non-Auto	173	$384,219
	Non-Lifetime	Auto	329	951,115
	Lifetime	Non-Auto	80	221,677
	Lifetime	Auto	171	645,151
	All	All	753	2,202,162
Series 11 Individual	Non-Lifetime	Non-Auto	1,320	905,958
	Non-Lifetime	Auto	1,277	4,328,027
	Lifetime	Non-Auto	115	352,767
	Lifetime	Auto	475	2,131,291
	All	All	3,187	7,718,044
Series 11 Group	Non-Lifetime	Non-Auto	1,788	2,097,011
	Non-Lifetime	Auto	2,070	5,352,681
	Lifetime	Non-Auto	1	499
	Lifetime	Auto	22	71,352
	All	All	3,881	7,521,543
Total	Non-Lifetime	Non-Auto	3,281	3,387,188
	Non-Lifetime	Auto	3,676	10,631,823
	Lifetime	Non-Auto	196	574,943
	Lifetime	Auto	668	2,847,794
	All	All	7,821	17,441,748

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 filing has been prepared in conformity with 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" and other applicable standards.

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. Certain models were developed to estimate the values included in this filing. The intent of the models was to estimate future experience. I have reviewed the models for consistency, reasonableness, and appropriateness to the intended purpose and in compliance with generally accepted actuarial practice and relevant actuarial standards of practice.

I have relied on data and other information provided by MedAmerica to develop this filing, 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 verified this data and other information. If the underlying data or information is inaccurate or incomplete, the results of this filing may likewise be inaccurate or incomplete.

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

Missy Gordon

Missy Gordon, FSA, MAAA
Principal and Consulting Actuary

Date: April 25, 2022

This filing has been prepared solely for the use and benefit of MedAmerica. Milliman's work may not be provided to third parties without Milliman's prior written consent. Milliman does not intend to benefit any third-party recipient of its work product, even if Milliman consents to the release of its work product to such third party.

Milliman's work is being delivered to the Department, in accordance with its statutory and regulatory requirements. Milliman recognizes that materials it delivers to the Department may be public records subject to disclosure to third parties, however, Milliman does not intend to benefit and assumes no duty or liability to any third parties, including the Department, who receive Milliman's work and may include disclaimer language on its work product so stating. The Department agrees not to remove any such disclaimer language from Milliman's work. To the extent that Milliman's work is not subject to disclosure under applicable public records laws, the Department agrees that it shall not disclose Milliman's work product to third parties without Milliman's prior written consent; provided, however, that the Department may distribute Milliman's work to (i) its professional service providers who are subject to a duty of confidentiality and who agree to not use Milliman's work product for any purpose other than to provide services to the Department, or (ii) any applicable regulatory or governmental agency, as required.

A limited review was performed of the data used directly in this filing for reasonableness and consistency and no material defects in the data were found. If there are material defects in the data, it is possible that they would be uncovered by a detailed, systematic review and comparison of the data to search for data values that are questionable or for relationships that are materially inconsistent. Such a review was beyond the scope of this assignment.

Differences between the projections in this filing and actual amounts depend on the extent to which future experience conforms to the assumptions made for this analysis. It is certain that actual experience will not conform exactly to the assumptions used in this analysis. Actual amounts will differ from projected amounts to the extent that actual experience deviates from expected experience.

Milliman recommends recipient be aided by its own actuary or other qualified professional when reviewing the Milliman work product.

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

		Without Interest				With Max. Val. Interest		
		A	B	C = B / A	D	E	F	G = F / E
	Calendar Year	Earned Premium	Incurred Claims	Incurred Loss Ratio	End of Year Lives	Earned Premium	Incurred Claims	Incurred Loss Ratio
Historical Experience	1992	17,324	0	0%	111	79,677	0	0%
	1993	557,528	112,031	20%	634	2,211,915	430,246	19%
	1994	1,499,801	28,415	2%	1,371	5,514,522	103,529	2%
	1995	2,035,433	60,736	3%	1,372	6,991,756	210,754	3%
	1996	2,079,825	104,057	5%	1,558	6,677,030	308,070	5%
	1997	2,617,587	212,400	8%	1,924	7,820,284	665,019	9%
	1998	4,122,790	399,244	10%	3,429	11,486,943	1,159,914	10%
	1999	6,199,341	887,196	14%	4,078	16,301,718	2,385,287	15%
	2000	7,365,357	1,187,209	16%	4,284	18,438,288	3,047,834	17%
	2001	7,758,900	1,832,801	24%	4,632	18,538,716	4,463,401	24%
	2002	9,662,912	3,843,469	40%	6,102	22,008,975	8,857,991	40%
	2003	13,482,266	2,227,233	17%	11,170	29,290,068	4,878,788	17%
	2004	18,015,295	2,965,428	16%	12,226	37,366,130	6,211,895	17%
	2005	19,564,714	4,391,387	22%	13,488	38,802,857	8,774,852	23%
	2006	20,118,446	5,623,259	28%	13,513	38,099,748	10,716,509	28%
	2007	19,923,913	6,899,518	35%	13,718	36,034,533	12,591,570	35%
	2008	19,614,754	5,229,358	27%	13,739	33,892,566	9,119,986	27%
	2009	18,925,127	6,673,343	35%	13,466	31,271,857	11,119,395	36%
	2010	17,972,559	11,830,937	66%	13,187	28,409,403	18,853,256	66%
	2011	17,433,407	8,089,437	46%	12,941	26,366,551	12,323,190	47%
	2012	18,071,325	9,631,138	53%	13,156	26,139,884	14,010,454	54%
	2013	17,464,290	7,623,082	44%	12,984	24,162,755	10,634,520	44%
	2014	16,095,932	13,848,920	86%	12,750	21,302,815	18,442,823	87%
	2015	15,368,545	18,435,850	120%	12,491	19,466,446	23,478,296	121%
	2016	15,024,941	13,368,869	89%	12,449	18,210,859	16,295,274	89%
	2017	14,391,602	14,883,947	103%	11,950	16,707,470	17,356,309	104%
	2018	13,865,780	16,151,812	116%	11,668	15,428,879	18,026,784	117%
	2019	14,255,598	21,968,338	154%	11,400	15,199,650	23,465,719	154%
	2020	14,872,292	20,527,721	138%	11,115	15,193,057	20,983,052	138%
Projected Future Experience (60 Years)	2021	14,421,260	17,436,455	121%	10,617	14,117,915	17,059,060	121%
	2022	14,301,311	18,482,011	129%	10,279	13,419,156	17,308,799	129%
	2023	13,662,272	19,747,618	145%	9,947	12,289,652	17,704,763	144%
	2024	12,756,362	21,061,079	165%	9,610	11,002,563	18,077,750	164%
	2025	11,951,096	22,390,375	187%	9,272	9,884,797	18,401,287	186%
	2026	11,221,723	23,858,065	213%	8,931	8,901,470	18,774,468	211%
	2027	10,534,696	25,392,800	241%	8,593	8,014,734	19,134,667	239%
	2028	9,793,388	26,929,584	275%	8,252	7,145,912	19,433,396	272%
	2029	9,152,311	28,507,552	311%	7,911	6,406,845	19,702,578	308%
	2030	8,532,627	30,066,008	352%	7,568	5,731,413	19,903,306	347%
	2031	7,929,402	31,952,592	403%	7,223	5,111,656	20,261,795	396%
	2032	7,338,773	33,818,314	461%	6,876	4,541,170	20,544,181	452%
	2033	6,764,480	35,517,887	525%	6,528	4,018,757	20,673,062	514%
	2034	6,207,640	37,071,456	597%	6,180	3,541,520	20,676,426	584%
	2035	5,670,142	38,468,348	678%	5,833	3,107,142	20,562,396	662%
	2036	5,153,705	39,639,790	769%	5,487	2,713,263	20,308,512	748%
	2037	4,660,069	40,575,768	871%	5,144	2,357,632	19,927,549	845%
	2038	4,191,638	41,110,426	981%	4,807	2,038,386	19,357,180	950%
	2039	3,750,191	41,296,886	1,101%	4,476	1,753,425	18,647,083	1,063%
	2040	3,336,834	41,258,156	1,236%	4,153	1,500,422	17,866,978	1,191%
	2041	2,952,392	40,843,329	1,383%	3,840	1,277,054	16,963,907	1,328%
	2042	2,597,664	40,128,105	1,545%	3,538	1,081,154	15,988,925	1,479%
	2043	2,272,963	39,044,055	1,718%	3,250	910,487	14,924,946	1,639%
	2044	1,977,987	37,685,984	1,905%	2,975	762,764	13,823,382	1,812%
	2045	1,711,956	36,156,144	2,112%	2,715	635,702	12,727,112	2,002%
	2046	1,473,762	34,442,503	2,337%	2,471	527,094	11,633,868	2,207%
	2047	1,262,360	32,605,927	2,583%	2,243	434,962	10,570,538	2,430%
	2048	1,076,084	30,542,918	2,838%	2,030	357,295	9,502,995	2,660%
	2049	913,069	28,328,735	3,103%	1,834	292,220	8,461,394	2,896%
	2050	771,268	26,153,452	3,391%	1,653	237,993	7,499,374	3,151%
	2051-2055	2,336,257	98,394,597	4,212%	6,057	656,713	25,268,826	3,848%
	2056-2060	907,410	54,980,828	6,059%	3,454	214,925	11,664,212	5,427%
	2061-2065	324,873	28,217,728	8,686%	1,870	65,493	5,009,459	7,649%
	2066-2070	108,850	13,300,118	12,219%	913	18,766	1,988,941	10,599%
	2071-2075	34,904	5,652,365	16,194%	376	5,119	718,450	14,034%
	2076-2080	10,383	2,137,495	20,586%	125	1,296	237,698	18,338%
History		348,377,583	199,037,135	57%	256,906	587,415,350	278,914,718	47%
Future		192,062,100	1,163,195,452	606%	187,030	135,076,867	551,309,265	408%
Lifetime		540,439,683	1,362,232,586	252%	443,936	722,492,217	830,223,983	115%

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

		Without Interest				With Max. Val. Interest		
		A	B	C = B / A	D	E	F	G = F / E
	Calendar Year	Earned Premium	Incurred Claims	Incurred Loss Ratio	End of Year Lives	Earned Premium	Incurred Claims	Incurred Loss Ratio
Historical Experience	1992	17,324	0	0%	111	79,677	0	0%
	1993	557,528	112,031	20%	634	2,211,915	430,246	19%
	1994	1,499,801	28,415	2%	1,371	5,514,522	103,529	2%
	1995	2,035,433	60,736	3%	1,372	6,991,756	210,754	3%
	1996	2,079,825	104,057	5%	1,558	6,677,030	308,070	5%
	1997	2,617,587	212,400	8%	1,924	7,820,284	665,019	9%
	1998	4,122,790	399,244	10%	3,429	11,486,943	1,159,914	10%
	1999	6,199,341	887,196	14%	4,078	16,301,718	2,385,287	15%
	2000	7,365,357	1,187,209	16%	4,284	18,438,288	3,047,834	17%
	2001	7,758,900	1,832,801	24%	4,632	18,538,716	4,463,401	24%
	2002	9,662,912	3,843,469	40%	6,102	22,008,975	8,857,991	40%
	2003	13,482,266	2,227,233	17%	11,170	29,290,068	4,878,788	17%
	2004	18,015,295	2,965,428	16%	12,226	37,366,130	6,211,895	17%
	2005	19,564,714	4,391,387	22%	13,488	38,802,857	8,774,852	23%
	2006	20,118,446	5,623,259	28%	13,513	38,099,748	10,716,509	28%
	2007	19,923,913	6,899,518	35%	13,718	36,034,533	12,591,570	35%
	2008	19,614,754	5,229,358	27%	13,739	33,892,566	9,119,986	27%
	2009	18,925,127	6,673,343	35%	13,466	31,271,857	11,119,395	36%
	2010	17,972,559	11,830,937	66%	13,187	28,409,403	18,853,256	66%
	2011	17,433,407	8,089,437	46%	12,941	26,366,551	12,323,190	47%
	2012	18,071,325	9,631,138	53%	13,156	26,139,884	14,010,454	54%
	2013	17,464,290	7,623,082	44%	12,984	24,162,755	10,634,520	44%
	2014	16,095,932	13,848,920	86%	12,750	21,302,815	18,442,823	87%
	2015	15,368,545	18,435,850	120%	12,491	19,466,446	23,478,296	121%
	2016	15,024,941	13,368,869	89%	12,449	18,210,859	16,295,274	89%
	2017	14,391,602	14,883,947	103%	11,950	16,707,470	17,356,309	104%
	2018	13,865,780	16,151,812	116%	11,668	15,428,879	18,026,784	117%
	2019	14,255,598	21,968,338	154%	11,400	15,199,650	23,465,719	154%
	2020	14,872,292	20,527,721	138%	11,115	15,193,057	20,983,052	138%
Projected Future Experience (60 Years)	2021	14,421,260	17,436,455	121%	10,617	14,117,915	17,059,060	121%
	2022	14,226,736	18,401,431	129%	10,279	13,349,328	17,233,362	129%
	2023	19,000,456	16,701,184	88%	9,344	17,081,311	14,974,933	88%
	2024	23,653,079	16,667,564	70%	8,973	20,385,627	14,307,121	70%
	2025	22,743,813	17,622,759	77%	8,654	18,796,472	14,482,989	77%
	2026	21,334,571	18,797,537	88%	8,337	16,906,337	14,792,172	87%
	2027	20,014,832	20,038,283	100%	8,026	15,208,585	15,099,780	99%
	2028	18,585,539	21,291,859	115%	7,712	13,541,434	15,365,044	113%
	2029	17,344,622	22,587,337	130%	7,399	12,120,959	15,610,971	129%
	2030	16,148,304	23,875,896	148%	7,085	10,825,714	15,805,548	146%
	2031	14,985,922	25,434,803	170%	6,769	9,639,272	16,128,570	167%
	2032	13,847,714	26,989,039	195%	6,450	8,547,629	16,395,018	192%
	2033	12,743,566	28,415,474	223%	6,129	7,550,097	16,538,284	219%
	2034	11,674,942	29,727,004	255%	5,808	6,640,475	16,578,795	250%
	2035	10,645,536	30,914,179	290%	5,487	5,814,189	16,522,471	284%
	2036	9,658,714	31,920,383	330%	5,167	5,066,583	16,350,649	323%
	2037	8,717,676	32,738,374	376%	4,850	4,393,117	16,074,272	366%
	2038	7,827,063	33,224,457	424%	4,537	3,790,097	15,638,643	413%
	2039	6,989,937	33,418,988	478%	4,229	3,253,209	15,083,336	464%
	2040	6,208,088	33,429,873	538%	3,929	2,777,748	14,468,851	521%
	2041	5,482,636	33,142,199	604%	3,638	2,358,996	13,755,667	583%
	2042	4,814,708	32,599,207	677%	3,357	1,992,593	12,978,013	651%
	2043	4,204,553	31,760,817	755%	3,087	1,674,106	12,128,615	724%
	2044	3,651,401	30,673,635	840%	2,830	1,399,072	11,238,164	803%
	2045	3,153,544	29,449,696	934%	2,587	1,163,055	10,352,564	890%
	2046	2,708,574	28,083,753	1,037%	2,357	961,754	9,471,557	985%
	2047	2,314,516	26,616,903	1,150%	2,143	791,419	8,614,255	1,088%
	2048	1,968,062	24,957,790	1,268%	1,943	648,197	7,750,747	1,196%
	2049	1,665,467	23,157,379	1,390%	1,758	528,488	6,902,941	1,306%
	2050	1,402,832	21,391,903	1,525%	1,587	429,001	6,120,994	1,427%
	2051-2055	4,211,488	80,439,372	1,910%	5,840	1,172,212	20,612,253	1,758%
	2056-2060	1,599,904	44,966,741	2,811%	3,356	374,771	9,516,790	2,539%
	2061-2065	556,886	23,307,247	4,185%	1,830	111,167	4,120,951	3,707%
	2066-2070	181,772	11,169,441	6,145%	897	31,148	1,656,274	5,317%
	2071-2075	57,428	4,767,007	8,301%	370	8,398	598,471	7,126%
	2076-2080	17,064	1,765,376	10,345%	123	2,125	193,761	9,119%
History		348,377,583	199,037,135	57%	256,906	587,415,350	278,914,718	47%
Future		328,763,206	947,881,346	288%	177,481	223,452,601	450,521,885	202%
Lifetime		677,140,788	1,146,918,481	169%	434,387	810,867,951	729,436,603	90%

Exhibit II
Demonstration that the Requested Cumulative Rate Increase Passes the 64%/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	547,218,444	x	64%	=	349,568,697
2a	Accumulated value of earned premium	587,415,350				
2b	Accumulated value of prior premium rate schedule increases (2a - 1)	40,196,906	x	85%	=	34,167,370
3	Present value of future projected initial earned premium	49,545,889	x	64%	=	31,650,417
4a	Present value of future projected premium	223,452,601				
4b	Present value of future projected premium in excess of the projected initial earned premiums (4a - 3)	173,906,712	x	85%	=	147,820,705
5	Lifetime Earned Premium Times Prescribed Factor: Sum of 1, 2b, 3, and 4b					563,207,190
6a	Accumulated value of incurred claims without the inclusion of active life reserves					278,914,718
6b	Present value of future projected incurred claims without the inclusion of active life reserves					518,100,168
7	Lifetime Incurred Claims with Rate Increase: Sum 6a and 6b					797,014,886
8	Test: 7 is not less than 5					Pass

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%.
Future projected initial earned premium schedule (i.e., without the requested rate increase) reflects the assumed impact of CBUL and RBO.
The future projected incurred claims (item 6b) were increased by 15% to reflect assumptions with moderately adverse experience.

Exhibit III
MedAmerica and Affinity Partners
Original Pricing Assumptions
Series 11 and Prior Policy Forms

	Morbidity
Prior to Series 11	For Series 5, the original pricing expected nursing home incidence probabilities 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 probabilities 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 probabilities and continuance tables were taken from the 1997 Milliman *Long-Term Care Guidelines* (*Guidelines*) and adjusted for MedAmerica's experience available at the time this rate schedule was developed relative to the 1997 *Guidelines* . All values were adjusted to reflect the effects of product types, elimination periods, policy maximums, and the eligibility standards.

	Mortality
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
Original Pricing Assumptions
Series 11 and Prior Policy Forms

Prior to Series 11

Lapse Probabilities

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

Series 5 Lapse Probabilities											
	Issue Age										
Duration	<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 Probabilities		
	Issue Age	
Duration	<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 Probabilities											
	Issue Age										
Duration	<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 probabilities did. The Series 8 and 9 group trust original pricing voluntary termination probabilities are shown in the following table:

Series 8 and 9 Group Trust										
	Issue Age									
Duration	<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 probabilities 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
Original Pricing Assumptions
Series 11 and Prior Policy Forms

Series 11

Lapse Probabilities

Lapse probabilities vary by duration, premium payment option, and issue age. Lapse probabilities for the lifetime payment option are provided in the tables below for Series 11 Individual, Premier Group, and TNSE policy forms.

Series 11 Individual

	Lapse Probabilities 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 Probabilities 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 Probabilities 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 probabilities is assumed for durations 1 to 6, and 0% lapse thereafter. For the 20-pay option, a reduction of 50% of these lapse probabilities is assumed for durations 1 to 13, and 0% lapse thereafter.

Exhibit III
MedAmerica and Affinity Partners
Original Pricing Assumptions
Series 11 and Prior Policy Forms

	Benefit Expiry Probabilities
Series 11 and Prior	Benefit expiry was not separated from the lapse assumption.

	Interest Rate
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
Series 11 and Prior	No mortality or morbidity improvement was assumed.

Exhibit IV-a-i
MedAmerica and Affinity Partners
Status of Filings as of April 19, 2022
All Jurisdictions in Which These Forms are In Force
Prior to Series 11 Policy Forms

				First Round Nationwide Request			First Round Follow-Up			First Round 2nd Follow-Up		
Jurisdiction	Company	12/31/2020 Policies In Force[1]	12/31/2020 Annualized Premium[1]	Requested Increase	Disposition Date	Average Filed Increase[2]	Requested Increase	Disposition Date	Average Filed Increase[2]	Requested Increase	Disposition Date	Average Filed Increase[2]
Arizona	MedAmerica	5	$10,651	39%	4/15/2010	15%	Not Filed			Not Filed		
Arkansas	MedAmerica	1	$1,685	Not Filed			Not Filed			Not Filed		
California	MedAmerica	1	$1,476	Not Filed			Not Filed			Not Filed		
District of Columbia	MedAmerica	259	$903,207	39%	6/30/2010	39%	No Follow-Up			No Follow-Up		
Idaho	MedAmerica	2	$3,444	39%	11/8/2010	15%	Not Filed			Not Filed		
Illinois	MedAmerica	6	$22,555	39%	4/19/2010	39%	No Follow-Up			No Follow-Up		
Indiana	MedAmerica	1	$4,320	39%	Disapproved	0%	Not Filed			Not Filed		
Iowa	MedAmerica	215	$610,945	39%	9/8/2010	20%	13%	11/8/2011	7%	8%	3/27/2014	8%
Louisiana	MedAmerica	1	$910	39%	Disapproved	0%	Not Filed			Not Filed		
Maine	Affinity	6	$8,327	Not Filed			Not Filed			Not Filed		
Maryland	MedAmerica	33	$96,907	15%	6/15/2010	15%	15%	5/8/2012	15%	5%	12/4/2014	5%
Massachusetts	MedAmerica	1	$2,482	Not Filed			Not Filed			Not Filed		
Michigan	MedAmerica	3	$6,139	39%	1/19/2010	39%	No Follow-Up			No Follow-Up		
Minnesota	MedAmerica	6	$16,960	39%	Disapproved	0%	Not Filed			Not Filed		
Mississippi	MedAmerica	26	$63,425	25%	4/8/2010	25%	11%	1/6/2012	11%	No Follow-Up		
New Jersey	MedAmerica	10	$32,384	39%	6/30/2010	39%	No Follow-Up			No Follow-Up		
New York	MedAmerica	1	$3,032	Not Filed			Not Filed			Not Filed		
North Carolina	MedAmerica	23	$28,310	39%	1/3/2011	25%	Not Filed			Not Filed		
	Affinity	1	$1,586	Not Filed			Not Filed			Not Filed		
Ohio	MedAmerica	23	$50,868	39%	3/4/2010	39%	No Follow-Up			No Follow-Up		
Pennsylvania	MedAmerica	76	$178,558	39%	5/13/2010	39%	No Follow-Up			No Follow-Up		
South Dakota	MedAmerica	36	$106,432	39%	3/9/2010	39%	No Follow-Up			No Follow-Up		
Vermont	MedAmerica	3	$8,736	39%	Disapproved	0%	Not Filed			Not Filed		
Virginia	MedAmerica	4	$16,291	Not Filed			Not Filed			Not Filed		
West Virginia	MedAmerica	1	$1,784	39%	5/14/2010	25%	Not Filed			Not Filed		
Wisconsin	MedAmerica	3	$10,609	10%	1/12/2011	10%	10%	2/18/2014	10%	Not Filed		
	Affinity	6	$10,137	Not Filed			Not Filed			Not Filed		

[1] Excludes policies assumed to be paid up prior to implementation of the requested rate increase. Annualized premium reflects all rate increases filed for use between January 2010 and April 2021.

[2] "Filed" is used in a generic sense to indicate that a rate increase has been approved, accepted, filed for use, etc., by a jurisdiction. Certain jurisdictions may have filed a multi-year increase, which results in a slightly higher rate level than requested.

[3] The rate increase level varies by benefit period and/or inflation option; average rate increase percentages are based on the distribution of in-force business at the time of the filing.

[4] The company is "Not Filing" in jurisdictions where limited by regulatory requirements or due to limited amount of in-force business. "No Follow-Up" is indicated for jurisdictions that approximately filed the full requested increase.

[5] "TBD" (to be determined) is used in jurisdictions where the company has not yet reached a decision regarding the rate increase request or the prior reduced rate increase was phased-in over multiple years.

Exhibit IV-a-ii
MedAmerica and Affinity Partners
Status of Filings as of April 19, 2022
All Jurisdictions in Which These Forms are In Force
Prior to Series 11 Policy Forms

				Second Round Nationwide Request					Second Round Follow-Up				
Jurisdiction	Company	12/31/2020 Policies In Force[1]	12/31/2020 Annualized Premium[1]	Requested Increase[3]	Status[2][4][5]	Date Submitted	Disposition Date	Average Filed Increase[2]	Requested Increase[3]	Status[2][4][5]	Date Submitted	Disposition Date	Average Filed Increase[2]
Arizona	MedAmerica	5	$10,651	148%	Filed	7/21/2017	9/12/2018	44%	86%	Pending	4/8/2021		
Arkansas	MedAmerica	1	$1,685		Not Filed					Not Filed			
California	MedAmerica	1	$1,476		Not Filed					Not Filed			
District of Columbia	MedAmerica	259	$903,207	96%	Filed	4/5/2017	5/8/2017	10%	10%	Filed	8/24/2018	12/19/2018	10%
Idaho	MedAmerica	2	$3,444	247%	Withdrawn	7/27/2017	1/3/2019	0%	320%	Filed	6/24/2020	4/29/2021	0%
Illinois	MedAmerica	6	$22,555	119%	Filed	6/7/2017	1/11/2018	119%		No Follow-Up			
Indiana	MedAmerica	1	$4,320	135%	Disapproved	12/4/2018	8/26/2019	0%		Not Filed			
Iowa	MedAmerica	215	$610,945	141%	Filed	3/31/2017	6/5/2017	18%	107%	Filed	8/17/2018	10/10/2018	30%
Louisiana	MedAmerica	1	$910	299%	Disapproved	6/29/2017	10/16/2017	0%		Not Filed			
Maine	Affinity	6	$8,327		Not Filed					Not Filed			
Maryland	MedAmerica	33	$96,907	102%	Filed	5/1/2017	12/14/2017	15%	15%	Filed	8/28/2018	12/11/2018	13%
Massachusetts	MedAmerica	1	$2,482	158%	Filed	8/4/2017	10/17/2018	40%		Not Filed			
Michigan	MedAmerica	3	$6,139	124%	Filed	6/16/2017	6/27/2017	124%		No Follow-Up			
Minnesota	MedAmerica	6	$16,960	184%	Filed	5/10/2017	9/19/2017	75%	76%	Filed	10/12/2020	6/9/2021	44%
Mississippi	MedAmerica	26	$63,425	141%	Filed	7/28/2017	3/16/2018	25%	25%	Filed	8/24/2018	6/5/2019	13%
New Jersey	MedAmerica	10	$32,384	80%	Filed	6/7/2017	1/11/2018	80%		No Follow-Up			
New York	MedAmerica	1	$3,032		Not Filed					Not Filed			
North Carolina	MedAmerica	23	$28,310	162%	Filed	5/9/2017	2/14/2018	25%	211%	Filed	11/11/2020	1/10/2022	33%
	Affinity	1	$1,586		Not Filed					Not Filed			
Ohio	MedAmerica	23	$50,868	92%	Filed	4/5/2017	6/29/2017	15%	15%	Filed	8/29/2018	2/4/2019	15%
Pennsylvania	MedAmerica	76	$178,558	87%	Filed	3/9/2017	9/22/2017	20%	61%	Filed	8/21/2018	12/4/2018	20%
South Dakota	MedAmerica	36	$106,432	166%	Filed	5/17/2017	6/30/2017	166%		No Follow-Up			
Vermont	MedAmerica	3	$8,736	209%	Filed	6/8/2017	8/21/2019	57%		Not Filed			
Virginia	MedAmerica	4	$16,291	263%	Filed	1/9/2018	9/3/2020	121%		Not Filed			
West Virginia	MedAmerica	1	$1,784		Not Filed					Not Filed			
Wisconsin	MedAmerica	3	$10,609	138%	Filed	6/26/2017	10/10/2017	138%		No Follow-Up			
	Affinity	6	$10,137	135%	Filed	6/26/2017	10/10/2017	135%		No Follow-Up			

[1] Excludes policies assumed to be paid up prior to implementation of the requested rate increase. Annualized premium reflects all rate increases filed for use between January 2010 and April 2021.

[2] "Filed" is used in a generic sense to indicate that a rate increase has been approved, accepted, filed for use, etc., by a jurisdiction. Certain jurisdictions may have filed a multi-year increase, which results in a slightly higher rate level than requested.

[3] The rate increase level varies by benefit period and/or inflation option; average rate increase percentages are based on the distribution of in-force business at the time of the filing.

[4] The company is "Not Filing" in jurisdictions where limited by regulatory requirements or due to limited amount of in-force business. "No Follow-Up" is indicated for jurisdictions that approximately filed the full requested increase.

[5] "TBD" (to be determined) is used in jurisdictions where the company has not yet reached a decision regarding the rate increase request or the prior reduced rate increase was phased-in over multiple years.

Exhibit IV-a-iii
MedAmerica and Affinity Partners
Status of Filings as of April 19, 2022
All Jurisdictions in Which These Forms are In Force
Prior to Series 11 Policy Forms

				Second Round 2nd Follow-Up					Second Round 3rd Follow-Up				
Jurisdiction	Company	12/31/2020 Policies In Force[1]	12/31/2020 Annualized Premium[1]	Requested Increase[3]	Status[2][4][5]	Date Submitted	Disposition Date	Average Filed Increase[2]	Requested Increase[3]	Status[2][4][5]	Date Submitted	Disposition Date	Average Filed Increase[2]
Arizona	MedAmerica	5	$10,651										
Arkansas	MedAmerica	1	$1,685		Not Filed					Not Filed			
California	MedAmerica	1	$1,476		Not Filed					Not Filed			
District of Columbia	MedAmerica	259	$903,207	10%	Filed	2/26/2020	9/29/2020	10%	10%	Filed	8/25/2021	12/26/2021	10%
Idaho	MedAmerica	2	$3,444		Not Filed					Not Filed			
Illinois	MedAmerica	6	$22,555		No Follow-Up					No Follow-Up			
Indiana	MedAmerica	1	$4,320		Not Filed					Not Filed			
Iowa	MedAmerica	215	$610,945	91%	Filed	10/14/2020	1/27/2021	18%		Not Filed			
Louisiana	MedAmerica	1	$910		Not Filed					Not Filed			
Maine	Affinity	6	$8,327		Not Filed					Not Filed			
Maryland	MedAmerica	33	$96,907	108%	Filed	4/29/2020	1/12/2021	18%		Not Filed			
Massachusetts	MedAmerica	1	$2,482		Not Filed					Not Filed			
Michigan	MedAmerica	3	$6,139		No Follow-Up					No Follow-Up			
Minnesota	MedAmerica	6	$16,960		Not Filed					Not Filed			
Mississippi	MedAmerica	26	$63,425		Not Filed					Not Filed			
New Jersey	MedAmerica	10	$32,384		No Follow-Up					No Follow-Up			
New York	MedAmerica	1	$3,032		Not Filed					Not Filed			
North Carolina	MedAmerica	23	$28,310		Not Filed					Not Filed			
	Affinity	1	$1,586		Not Filed					Not Filed			
Ohio	MedAmerica	23	$50,868	15%	Filed	6/24/2020	3/2/2022	15%					
Pennsylvania	MedAmerica	76	$178,558	47%	Filed	1/10/2020	4/25/2020	10%	38%	Filed	3/5/2021	9/14/2021	13%
South Dakota	MedAmerica	36	$106,432		No Follow-Up					No Follow-Up			
Vermont	MedAmerica	3	$8,736		Not Filed					Not Filed			
Virginia	MedAmerica	4	$16,291		Not Filed					Not Filed			
West Virginia	MedAmerica	1	$1,784		Not Filed					Not Filed			
Wisconsin	MedAmerica	3	$10,609		No Follow-Up					No Follow-Up			
	Affinity	6	$10,137		No Follow-Up					No Follow-Up			

[1] Excludes policies assumed to be paid up prior to implementation of the requested rate increase. Annualized premium reflects all rate increases filed for use between January 2010 and April 2021.

[2] "Filed" is used in a generic sense to indicate that a rate increase has been approved, accepted, filed for use, etc., by a jurisdiction. Certain jurisdictions may have filed a multi-year increase, which results in a slightly higher rate level than requested.

[3] The rate increase level varies by benefit period and/or inflation option; average rate increase percentages are based on the distribution of in-force business at the time of the filing.

[4] The company is "Not Filing" in jurisdictions where limited by regulatory requirements or due to limited amount of in-force business. "No Follow-Up" is indicated for jurisdictions that approximately filed the full requested increase.

[5] "TBD" (to be determined) is used in jurisdictions where the company has not yet reached a decision regarding the rate increase request or the prior reduced rate increase was phased-in over multiple years.

Exhibit IV-a-iv
MedAmerica and Affinity Partners
Status of Filings as of April 19, 2022
All Jurisdictions in Which These Forms are In Force
Prior to Series 11 Policy Forms

Jurisdiction	Company	12/31/2020 Policies In Force[1]	12/31/2020 Annualized Premium[1]	Current Round Nationwide Request					Average Cumulative Increase Filed[2]
				Requested Increase[3]	Status[2][4][5]	Date Submitted	Disposition Date	Average Filed Increase[2]	
Arizona	MedAmerica	5	$10,651						65%
Arkansas	MedAmerica	1	$1,685		Not Filing				0%
California	MedAmerica	1	$1,476		Not Filing				0%
District of Columbia	MedAmerica	259	$903,207	216%	Not Yet Filed				104%
Idaho	MedAmerica	2	$3,444		Not Filing				15%
Illinois	MedAmerica	6	$22,555	59%	Pending	3/29/2022			204%
Indiana	MedAmerica	1	$4,320		TBD				0%
Iowa	MedAmerica	215	$610,945	212%	Pending	3/30/2022			151%
Louisiana	MedAmerica	1	$910		Not Filing				0%
Maine	Affinity	6	$8,327		Not Filing				0%
Maryland	MedAmerica	33	$96,907		TBD				112%
Massachusetts	MedAmerica	1	$2,482		TBD				40%
Michigan	MedAmerica	3	$6,139	54%	Not Yet Filed				211%
Minnesota	MedAmerica	6	$16,960		TBD				152%
Mississippi	MedAmerica	26	$63,425	243%	Not Yet Filed				96%
New Jersey	MedAmerica	10	$32,384	104%	Not Yet Filed				150%
New York	MedAmerica	1	$3,032		Not Filing				0%
North Carolina	MedAmerica	23	$28,310		TBD				108%
	Affinity	1	$1,586		Not Filing				0%
Ohio	MedAmerica	23	$50,868						111%
Pennsylvania	MedAmerica	76	$178,558	96%	Not Yet Filed				149%
South Dakota	MedAmerica	36	$106,432	70%	Pending	3/30/2022			269%
Vermont	MedAmerica	3	$8,736		TBD				57%
Virginia	MedAmerica	4	$16,291		Not Filing				121%
West Virginia	MedAmerica	1	$1,784		Not Filing				25%
Wisconsin	MedAmerica	3	$10,609	160%	Not Yet Filed				188%
	Affinity	6	$10,137	81%	Not Yet Filed				135%

[1] Excludes policies assumed to be paid up prior to implementation of the requested rate increase. Annualized premium reflects all rate increases filed for use between January 2010 and April 2021.

[2] "Filed" is used in a generic sense to indicate that a rate increase has been approved, accepted, filed for use, etc., by a jurisdiction. Certain jurisdictions may have filed a multi-year increase, which results in a slightly higher rate level than requested.

[3] The rate increase level varies by benefit period and/or inflation option; average rate increase percentages are based on the distribution of in-force business at the time of the filing.

[4] The company is "Not Filing" in jurisdictions where limited by regulatory requirements or due to limited amount of in-force business. "No Follow-Up" is indicated for jurisdictions that approximately filed the full requested increase.

[5] "TBD" (to be determined) is used in jurisdictions where the company has not yet reached a decision regarding the rate increase request or the prior reduced rate increase was phased-in over multiple years.

Exhibit IV-b-i
MedAmerica and Affinity Partners
Status of Filings as of April 19, 2022
All Jurisdictions in Which These Forms are In Force
Series 11 Individual Policy Forms

				First Round Nationwide Request			First Round Follow-Up			First Round 2nd Follow-Up		
Jurisdiction	Company	12/31/2020 Policies In Force[1]	12/31/2020 Annualized Premium[1]	Requested Increase	Disposition Date	Average Filed Increase[2]	Requested Increase	Disposition Date	Average Filed Increase[2]	Requested Increase	Disposition Date	Average Filed Increase[2]
Alabama	MedAmerica	10	$38,551	39%	4/11/2011	10%	26%	9/4/2012	26%	No Follow-Up		
Arizona	MedAmerica	8	$25,548	39%	Disapproved	0%	39%	5/14/2012	39%	No Follow-Up		
Colorado	MedAmerica	27	$74,322	39%	11/5/2010	10%	26%	10/28/2013	26%	No Follow-Up		
Connecticut	MedAmerica	501	$2,414,168	39%	Disapproved	0%	39%	Disapproved	0%	39%	Disapproved	0%
District of Columbia	MedAmerica	1,402	$1,203,545	39%	6/30/2010	39%	No Follow-Up			No Follow-Up		
Georgia	MedAmerica	11	$55,056	39%	4/20/2010	15%	21%	4/6/2011	10%	10%	12/23/2013	10%
Hawaii	MedAmerica	11	$21,864	39%	7/5/2011	20%	16%	Disapproved	0%	Not Filed		
Idaho	MedAmerica	1	$1,890	39%	Withdrawn	0%	Not Filed			Not Filed		
Illinois	MedAmerica	14	$47,304	39%	4/28/2010	39%	No Follow-Up			No Follow-Up		
Indiana	MedAmerica	63	$103,625	39%	Disapproved	0%	Not Filed			Not Filed		
Iowa	MedAmerica	98	$310,286	39%	9/8/2010	20%	16%	3/27/2014	16%	No Follow-Up		
Kansas	MedAmerica	8	$14,699	39%	5/26/2011	10%	25%	3/17/2015	25%	No Follow-Up		
Kentucky	MedAmerica	25	$74,565	39%	5/28/2010	39%	No Follow-Up			No Follow-Up		
Louisiana	MedAmerica	7	$11,255	39%	Disapproved	0%	Not Filed			Not Filed		
Maine	MedAmerica	6	$21,477	Not Filed			Not Filed			Not Filed		
	Affinity	2	$2,298	Not Filed			Not Filed			Not Filed		
Maryland	MedAmerica	40	$124,406	15%	6/15/2010	15%	15%	5/8/2012	15%	5%	12/4/2014	5%
Massachusetts	MedAmerica	15	$26,818	Not Filed			Not Filed			Not Filed		
Michigan	MedAmerica	10	$22,268	39%	3/30/2010	39%	No Follow-Up			No Follow-Up		
Minnesota	MedAmerica	59	$167,057	39%	Disapproved	0%	Not Filed			Not Filed		
Mississippi	MedAmerica	13	$33,213	25%	4/13/2010	25%	11%	3/6/2012	11%	No Follow-Up		
Missouri	MedAmerica	4	$14,023	39%	9/7/2010	39%	No Follow-Up			No Follow-Up		
Montana	MedAmerica	8	$15,622	39%	8/3/2010	18%	18%	10/10/2012	18%	No Follow-Up		
Nebraska	MedAmerica	29	$96,923	39%	1/28/2011	15%	21%	10/2/2012	21%	No Follow-Up		
Nevada	MedAmerica	2	$3,088	Not Filed			Not Filed			Not Filed		
New Jersey	MedAmerica	90	$366,666	39%	8/9/2010	18%	18%	8/21/2014	13%	Not Filed		
North Carolina	MedAmerica	8	$31,012	39%	Disapproved	0%	39%	6/18/2014	15%	Not Filed		
North Dakota	MedAmerica	284	$930,093	39%	5/28/2010	18%	18%	12/22/2011	12%	5%	5/2/2014	5%
Ohio	MedAmerica	17	$36,578	39%	3/23/2010	39%	No Follow-Up			No Follow-Up		
Oklahoma	MedAmerica	2	$4,967	39%	10/18/2010	10%	Not Filed			Not Filed		
Oregon	MedAmerica	5	$17,513	39%	8/13/2010	20%	16%	12/11/2013	16%	No Follow-Up		
Pennsylvania	MedAmerica	83	$301,771	39%	5/13/2010	39%	No Follow-Up			No Follow-Up		
South Carolina	MedAmerica	5	$19,964	39%	11/12/2010	20%	Not Filed			Not Filed		
South Dakota	MedAmerica	58	$192,505	39%	3/29/2010	39%	No Follow-Up			No Follow-Up		
Tennessee	MedAmerica	2	$8,435	39%	3/4/2011	25%	11%	5/21/2014	11%	No Follow-Up		
Texas	MedAmerica	119	$451,552	39%	Disapproved	0%	49%	6/10/2015	49%	Not Filed		
Vermont	MedAmerica	6	$12,923	39%	Disapproved	0%	Not Filed			Not Filed		
Virginia	MedAmerica	10	$35,045	Not Filed			Not Filed			Not Filed		
Washington	MedAmerica	95	$290,174	39%	11/1/2010	30%	7%	1/31/2014	7%	No Follow-Up		
Wisconsin	MedAmerica	23	$87,621	39%	9/6/2011	27%	9%	3/5/2014	9%	No Follow-Up		
	Affinity	4	$5,530	Not Filed			Not Filed			Not Filed		
Wyoming	MedAmerica	2	$1,823	Not Filed			Not Filed			Not Filed		

[1] Excludes policies assumed to be paid up prior to implementation of the requested rate increase. Annualized premium reflects all rate increases filed for use between January 2010 and April 2021.

[2] "Filed" is used in a generic sense to indicate that a rate increase has been approved, accepted, filed for use, etc., by a jurisdiction. Certain jurisdictions may have filed a multi-year increase, which results in a slightly higher rate level than requested.

[3] The rate increase level varies by benefit period and/or inflation option; average rate increase percentages are based on the distribution of in-force business at the time of the filing.

[4] The company is "Not Filing" in jurisdictions where limited by regulatory requirements or due to limited amount of in-force business. "No Follow-Up" is indicated for jurisdictions that approximately filed the full requested increase.

[5] "TBD" (to be determined) is used in jurisdictions where the company has not yet reached a decision regarding the rate increase request or the prior reduced rate increase was phased-in over multiple years.

Exhibit IV-b-ii
MedAmerica and Affinity Partners
Status of Filings as of April 19, 2022
All Jurisdictions in Which These Forms are In Force
Series 11 Individual Policy Forms

				Second Round Nationwide Request					Second Round Follow-Up				
Jurisdiction	Company	12/31/2020 Policies In Force[1]	12/31/2020 Annualized Premium[1]	Requested Increase[3]	Status[2][4][5]	Date Submitted	Disposition Date	Average Filed Increase[2]	Requested Increase[3]	Status[2][4][5]	Date Submitted	Disposition Date	Average Filed Increase[2]
Alabama	MedAmerica	10	$38,551	173%	Filed	7/5/2017	12/28/2017	24%	119%	Filed	8/20/2018	2/5/2021	15%
Arizona	MedAmerica	8	$25,548	140%	Filed	7/21/2017	9/12/2018	66%	89%	Pending	4/8/2021		
Colorado	MedAmerica	27	$74,322	93%	Filed	8/23/2017	10/23/2017	20%	93%	Pending	3/18/2020		
Connecticut	MedAmerica	501	$2,414,168	147%	Filed	4/5/2017	6/27/2017	33%	85%	Filed	9/4/2018	10/1/2018	14%
District of Columbia	MedAmerica	1,402	$1,203,545	88%	Filed	4/5/2017	5/8/2017	10%	10%	Filed	8/24/2018	12/19/2018	10%
Georgia	MedAmerica	11	$55,056	144%	Filed	6/20/2017	7/31/2017	20%	112%	Filed	8/20/2018	11/8/2018	18%
Hawaii	MedAmerica	11	$21,864	96%	Filed	11/10/2017	10/25/2019	96%		No Follow-Up			
Idaho	MedAmerica	1	$1,890	299%	Withdrawn	7/27/2017	1/3/2019	0%	383%	Filed	6/24/2020	4/29/2021	40%
Illinois	MedAmerica	14	$47,304	144%	Filed	6/7/2017	1/11/2018	144%		No Follow-Up			
Indiana	MedAmerica	63	$103,625	157%	Disapproved	12/4/2018	8/26/2019	0%		Not Filed			
Iowa	MedAmerica	98	$310,286	126%	Filed	3/31/2017	6/5/2017	18%	93%	Filed	8/17/2018	10/10/2018	30%
Kansas	MedAmerica	8	$14,699	94%	Withdrawn	11/13/2019	12/30/2021			Not Filed			
Kentucky	MedAmerica	25	$74,565	124%	Filed	7/11/2017	3/1/2018	30%	82%	Filed	4/29/2020	7/24/2020	17%
Louisiana	MedAmerica	7	$11,255	299%	Disapproved	6/29/2017	10/16/2017	0%		Not Filed			
Maine	MedAmerica	6	$21,477	78%	Filed	12/19/2017	7/25/2018	44%	30%	Filed	8/23/2021	12/10/2021	30%
	Affinity	2	$2,298		Not Filed					Not Filed			
Maryland	MedAmerica	40	$124,406	102%	Filed	5/1/2017	12/14/2017	15%	15%	Filed	8/28/2018	12/11/2018	13%
Massachusetts	MedAmerica	15	$26,818	158%	Filed	8/4/2017	10/17/2018	40%		Not Filed			
Michigan	MedAmerica	10	$22,268	74%	Filed	6/16/2017	6/27/2017	74%		No Follow-Up			
Minnesota	MedAmerica	59	$167,057	207%	Filed	5/10/2017	9/19/2017	75%	150%	Filed	10/12/2020	6/9/2021	64%
Mississippi	MedAmerica	13	$33,213	131%	Filed	7/28/2017	3/16/2018	25%	25%	Filed	8/24/2018	6/5/2019	13%
Missouri	MedAmerica	4	$14,023	105%	Filed	6/26/2017	9/12/2017	43%	51%	Filed	9/12/2018	9/20/2018	51%
Montana	MedAmerica	8	$15,622		Not Filed					Not Filed			
Nebraska	MedAmerica	29	$96,923	144%	Filed	8/8/2017	6/29/2018	75%		Not Filed			
Nevada	MedAmerica	2	$3,088		Not Filed					Not Filed			
New Jersey	MedAmerica	90	$366,666	131%	Filed	4/24/2017	10/17/2017	31%	79%	Pending	12/17/2021		
North Carolina	MedAmerica	8	$31,012	129%	Filed	5/9/2017	2/14/2018	95%	76%	Filed	11/11/2020	1/10/2022	22%
North Dakota	MedAmerica	284	$930,093	150%	Filed	3/17/2017	4/24/2017	30%	91%	Filed	8/14/2018	10/8/2018	45%
Ohio	MedAmerica	17	$36,578	76%	Filed	4/5/2017	6/29/2017	15%	15%	Filed	8/29/2018	2/4/2019	15%
Oklahoma	MedAmerica	2	$4,967		Not Filed					Not Filed			
Oregon	MedAmerica	5	$17,513	69%	Pending	6/30/2017							
Pennsylvania	MedAmerica	83	$301,771	107%	Filed	3/9/2017	9/22/2017	20%	75%	Filed	8/21/2018	12/4/2018	20%
South Carolina	MedAmerica	5	$19,964	116%	Filed	4/5/2017	5/16/2017	20%	84%	Filed	8/23/2018	7/18/2019	20%
South Dakota	MedAmerica	58	$192,505	150%	Filed	5/17/2017	6/30/2017	150%		No Follow-Up			
Tennessee	MedAmerica	2	$8,435	69%	Filed	2/23/2017	10/30/2017	44%	26%	Filed	11/21/2019	5/6/2020	15%
Texas	MedAmerica	119	$451,552	90%	Filed	4/24/2018	12/21/2018	90%		No Follow-Up			
Vermont	MedAmerica	6	$12,923	216%	Filed	6/8/2017	8/21/2019	60%		Not Filed			
Virginia	MedAmerica	10	$35,045	202%	Filed	1/9/2018	9/3/2020	111%		Not Filed			
Washington	MedAmerica	95	$290,174	101%	Filed	4/20/2017	1/29/2020	26%	26%	Filed	3/24/2021	3/11/2022	26%
Wisconsin	MedAmerica	23	$87,621	108%	Filed	6/26/2017	10/10/2017	108%		No Follow-Up			
	Affinity	4	$5,530	179%	Filed	6/26/2017	10/10/2017	179%		No Follow-Up			
Wyoming	MedAmerica	2	$1,823		Not Filed					Not Filed			

[1] Excludes policies assumed to be paid up prior to implementation of the requested rate increase. Annualized premium reflects all rate increases filed for use between January 2010 and April 2021.

[2] "Filed" is used in a generic sense to indicate that a rate increase has been approved, accepted, filed for use, etc., by a jurisdiction. Certain jurisdictions may have filed a multi-year increase, which results in a slightly higher rate level than requested.

[3] The rate increase level varies by benefit period and/or inflation option; average rate increase percentages are based on the distribution of in-force business at the time of the filing.

[4] The company is "Not Filing" in jurisdictions where limited by regulatory requirements or due to limited amount of in-force business. "No Follow-Up" is indicated for jurisdictions that approximately filed the full requested increase.

[5] "TBD" (to be determined) is used in jurisdictions where the company has not yet reached a decision regarding the rate increase request or the prior reduced rate increase was phased-in over multiple years.

Exhibit IV-b-iii
MedAmerica and Affinity Partners
Status of Filings as of April 19, 2022
All Jurisdictions in Which These Forms are In Force
Series 11 Individual Policy Forms

				Second Round 2nd Follow-Up					Second Round 3rd Follow-Up				
Jurisdiction	Company	12/31/2020 Policies In Force[1]	12/31/2020 Annualized Premium[1]	Requested Increase[3]	Status[2][4][5]	Date Submitted	Disposition Date	Average Filed Increase[2]	Requested Increase[3]	Status[2][4][5]	Date Submitted	Disposition Date	Average Filed Increase[2]
Alabama	MedAmerica	10	$38,551		Not Filed					Not Filed			
Arizona	MedAmerica	8	$25,548										
Colorado	MedAmerica	27	$74,322										
Connecticut	MedAmerica	501	$2,414,168	99%	Filed	2/10/2020	5/5/2020	34%		Not Filed			
District of Columbia	MedAmerica	1,402	$1,203,545	10%	Filed	2/26/2020	9/29/2020	10%	10%	Filed	8/25/2021	12/26/2021	10%
Georgia	MedAmerica	11	$55,056	111%	Filed	11/13/2019	2/19/2020	10%	103%	Filed	10/19/2020	11/24/2020	12%
Hawaii	MedAmerica	11	$21,864		No Follow-Up					No Follow-Up			
Idaho	MedAmerica	1	$1,890		Not Filed					Not Filed			
Illinois	MedAmerica	14	$47,304		No Follow-Up					No Follow-Up			
Indiana	MedAmerica	63	$103,625		Not Filed					Not Filed			
Iowa	MedAmerica	98	$310,286	73%	Filed	10/14/2020	1/27/2021	18%		Not Filed			
Kansas	MedAmerica	8	$14,699		Not Filed					Not Filed			
Kentucky	MedAmerica	25	$74,565	61%	Filed	7/22/2021	10/12/2021	27%		Not Filed			
Louisiana	MedAmerica	7	$11,255		Not Filed					Not Filed			
Maine	MedAmerica	6	$21,477		Not Filed					Not Filed			
	Affinity	2	$2,298		Not Filed					Not Filed			
Maryland	MedAmerica	40	$124,406	105%	Filed	4/29/2020	1/12/2021	16%		Not Filed			
Massachusetts	MedAmerica	15	$26,818		Not Filed					Not Filed			
Michigan	MedAmerica	10	$22,268		No Follow-Up					No Follow-Up			
Minnesota	MedAmerica	59	$167,057		Not Filed					Not Filed			
Mississippi	MedAmerica	13	$33,213		Not Filed					Not Filed			
Missouri	MedAmerica	4	$14,023		No Follow-Up					No Follow-Up			
Montana	MedAmerica	8	$15,622		Not Filed					Not Filed			
Nebraska	MedAmerica	29	$96,923		Not Filed					Not Filed			
Nevada	MedAmerica	2	$3,088		Not Filed					Not Filed			
New Jersey	MedAmerica	90	$366,666										
North Carolina	MedAmerica	8	$31,012		Not Filed					Not Filed			
North Dakota	MedAmerica	284	$930,093		Not Filed					Not Filed			
Ohio	MedAmerica	17	$36,578	15%	Filed	6/24/2020	3/2/2022	15%					
Oklahoma	MedAmerica	2	$4,967		Not Filed					Not Filed			
Oregon	MedAmerica	5	$17,513										
Pennsylvania	MedAmerica	83	$301,771	65%	Filed	1/10/2020	4/25/2020	14%	47%	Filed	3/5/2021	9/14/2021	11%
South Carolina	MedAmerica	5	$19,964	91%	Filed	1/22/2021	4/13/2021	16%		Not Filed			
South Dakota	MedAmerica	58	$192,505		No Follow-Up					No Follow-Up			
Tennessee	MedAmerica	2	$8,435	11%	Filed	1/11/2021	3/8/2021	7%		Not Filed			
Texas	MedAmerica	119	$451,552		No Follow-Up					No Follow-Up			
Vermont	MedAmerica	6	$12,923		Not Filed					Not Filed			
Virginia	MedAmerica	10	$35,045		Not Filed					Not Filed			
Washington	MedAmerica	95	$290,174										
Wisconsin	MedAmerica	23	$87,621		No Follow-Up					No Follow-Up			
	Affinity	4	$5,530		No Follow-Up					No Follow-Up			
Wyoming	MedAmerica	2	$1,823		Not Filed					Not Filed			

[1] Excludes policies assumed to be paid up prior to implementation of the requested rate increase. Annualized premium reflects all rate increases filed for use between January 2010 and April 2021.

[2] "Filed" is used in a generic sense to indicate that a rate increase has been approved, accepted, filed for use, etc., by a jurisdiction. Certain jurisdictions may have filed a multi-year increase, which results in a slightly higher rate level than requested.

[3] The rate increase level varies by benefit period and/or inflation option; average rate increase percentages are based on the distribution of in-force business at the time of the filing.

[4] The company is "Not Filing" in jurisdictions where limited by regulatory requirements or due to limited amount of in-force business. "No Follow-Up" is indicated for jurisdictions that approximately filed the full requested increase.

[5] "TBD" (to be determined) is used in jurisdictions where the company has not yet reached a decision regarding the rate increase request or the prior reduced rate increase was phased-in over multiple years.

Exhibit IV-b-iv
MedAmerica and Affinity Partners
Status of Filings as of April 19, 2022
All Jurisdictions in Which These Forms are In Force
Series 11 Individual Policy Forms

Jurisdiction	Company	12/31/2020 Policies In Force[1]	12/31/2020 Annualized Premium[1]	Current Round Nationwide Request					Average Cumulative Increase Filed[2]
				Requested Increase[3]	Status[2][4][5]	Date Submitted	Disposition Date	Average Filed Increase[2]	
Alabama	MedAmerica	10	$38,551	438%	Not Yet Filed				99%
Arizona	MedAmerica	8	$25,548						131%
Colorado	MedAmerica	27	$74,322						66%
Connecticut	MedAmerica	501	$2,414,168		TBD				103%
District of Columbia	MedAmerica	1,402	$1,203,545	173%	Not Yet Filed				104%
Georgia	MedAmerica	11	$55,056	254%	Pending	2/16/2022			143%
Hawaii	MedAmerica	11	$21,864		Not Filing				135%
Idaho	MedAmerica	1	$1,890		Not Filing				40%
Illinois	MedAmerica	14	$47,304	71%	Pending	3/29/2022			239%
Indiana	MedAmerica	63	$103,625		TBD				0%
Iowa	MedAmerica	98	$310,286	179%	Pending	3/30/2022			151%
Kansas	MedAmerica	8	$14,699		Not Filing				38%
Kentucky	MedAmerica	25	$74,565		TBD				169%
Louisiana	MedAmerica	7	$11,255		Not Filing				0%
Maine	MedAmerica	6	$21,477		TBD				87%
	Affinity	2	$2,298		Not Filing				0%
Maryland	MedAmerica	40	$124,406		TBD				108%
Massachusetts	MedAmerica	15	$26,818		TBD				40%
Michigan	MedAmerica	10	$22,268	50%	Not Yet Filed				142%
Minnesota	MedAmerica	59	$167,057		TBD				186%
Mississippi	MedAmerica	13	$33,213	365%	Not Yet Filed				96%
Missouri	MedAmerica	4	$14,023	105%	Not Yet Filed				202%
Montana	MedAmerica	8	$15,622		Not Filing				39%
Nebraska	MedAmerica	29	$96,923	254%	Not Yet Filed				143%
Nevada	MedAmerica	2	$3,088		Not Filing				0%
New Jersey	MedAmerica	90	$366,666						74%
North Carolina	MedAmerica	8	$31,012		TBD				173%
North Dakota	MedAmerica	284	$930,093	180%	Pending	2/28/2022			162%
Ohio	MedAmerica	17	$36,578						111%
Oklahoma	MedAmerica	2	$4,967		Not Filing				10%
Oregon	MedAmerica	5	$17,513						39%
Pennsylvania	MedAmerica	83	$301,771	149%	Not Yet Filed				154%
South Carolina	MedAmerica	5	$19,964	217%	Not Yet Filed				101%
South Dakota	MedAmerica	58	$192,505	69%	Pending	3/30/2022			247%
Tennessee	MedAmerica	2	$8,435	109%	Pending	3/10/2022			146%
Texas	MedAmerica	119	$451,552	165%	Not Yet Filed				184%
Vermont	MedAmerica	6	$12,923		TBD				60%
Virginia	MedAmerica	10	$35,045		Not Filing				111%
Washington	MedAmerica	95	$290,174						121%
Wisconsin	MedAmerica	23	$87,621	132%	Not Yet Filed				190%
	Affinity	4	$5,530	113%	Not Yet Filed				179%
Wyoming	MedAmerica	2	$1,823		Not Filing				0%

[1] Excludes policies assumed to be paid up prior to implementation of the requested rate increase. Annualized premium reflects all rate increases filed for use between January 2010 and April 2021.

[2] "Filed" is used in a generic sense to indicate that a rate increase has been approved, accepted, filed for use, etc., by a jurisdiction. Certain jurisdictions may have filed a multi-year increase, which results in a slightly higher rate level than requested.

[3] The rate increase level varies by benefit period and/or inflation option; average rate increase percentages are based on the distribution of in-force business at the time of the filing.

[4] The company is "Not Filing" in jurisdictions where limited by regulatory requirements or due to limited amount of in-force business. "No Follow-Up" is indicated for jurisdictions that approximately filed the full requested increase.

[5] "TBD" (to be determined) is used in jurisdictions where the company has not yet reached a decision regarding the rate increase request or the prior reduced rate increase was phased-in over multiple years.

Exhibit IV-c-i
MedAmerica and Affinity Partners
Status of Filings as of April 19, 2022
All Jurisdictions in Which These Forms are In Force
Series 11 Group Policy Forms

				First Round Nationwide Request			First Round Follow-Up			First Round 2nd Follow-Up		
Jurisdiction	Company	12/31/2020 Policies In Force[1]	12/31/2020 Annualized Premium[1]	Requested Increase	Disposition Date	Average Filed Increase[2]	Requested Increase	Disposition Date	Average Filed Increase[2]	Requested Increase	Disposition Date	Average Filed Increase[2]
Arizona[6]	MedAmerica	74	$125,964	39%	3/16/2010	39%	No Follow-Up			No Follow-Up		
California	MedAmerica	12	$15,342	39%	Withdrawn	0%	Not Filed			Not Filed		
Colorado[7]	MedAmerica	290	$345,320	39%	11/5/2010	10%	26%	10/28/2013	26%	No Follow-Up		
Connecticut	MedAmerica	136	$197,858	39%	Disapproved	0%	39%	Disapproved	0%	39%	Disapproved	0%
District of Columbia	MedAmerica	3	$4,887	39%	Disapproved	0%	Not Filed			Not Filed		
Hawaii	MedAmerica	68	$108,160	39%	6/7/2011	20%	16%	Disapproved	0%	Not Filed		
Illinois	MedAmerica	66	$131,250	39%	4/28/2010	39%	No Follow-Up			No Follow-Up		
Indiana	MedAmerica	61	$48,950	39%	Disapproved	0%	Not Filed			Not Filed		
Iowa	MedAmerica	19	$31,554	39%	9/8/2010	3%	35%	4/4/2014	17%	15%	9/10/2015	15%
Kansas	MedAmerica	76	$137,859	39%	5/26/2011	10%	49%	3/19/2015	49%	No Follow-Up		
Maryland	MedAmerica	2	$2,759	15%	6/15/2010	15%	Not Filed			Not Filed		
Minnesota	MedAmerica	364	$619,731	39%	Disapproved	0%	Not Filed			Not Filed		
Missouri	MedAmerica	6	$9,070	39%	9/7/2010	39%	No Follow-Up			No Follow-Up		
Nebraska	MedAmerica	48	$59,339	39%	1/28/2011	15%	21%	12/18/2012	21%	No Follow-Up		
New Jersey[6]	MedAmerica	9	$23,974	39%	6/30/2010	39%	No Follow-Up			No Follow-Up		
North Dakota	MedAmerica	106	$149,595	39%	5/28/2010	18%	18%	12/22/2011	12%	5%	5/21/2014	5%
Ohio	MedAmerica	16	$21,711	39%	3/23/2010	39%	No Follow-Up			No Follow-Up		
Oregon	MedAmerica	11	$24,220	39%	8/13/2010	20%	16%	12/11/2013	16%	No Follow-Up		
Pennsylvania	MedAmerica	63	$149,569	39%	5/13/2010	39%	No Follow-Up			No Follow-Up		
South Dakota	MedAmerica	6	$7,845	39%	3/9/2010	39%	No Follow-Up			No Follow-Up		
Tennessee[8]	MedAmerica	113	$252,870	39%	3/4/2011	25%	11%	5/21/2014	11%	No Follow-Up		
	MedAmerica	2,148	$4,706,751	30%	4/6/2011	30%	Not Filed			Not Filed		
Texas	MedAmerica	44	$64,456	39%	Withdrawn	0%	68%	5/1/2015	68%	Not Filed		
Washington	MedAmerica	109	$241,589	39%	11/1/2010	38%	Not Filed			Not Filed		
Wisconsin	MedAmerica	31	$40,923	39%	9/6/2011	29%	8%	3/5/2014	8%	No Follow-Up		

[1] Excludes policies assumed to be paid up prior to implementation of the requested rate increase. Annualized premium reflects all rate increases filed for use between January 2010 and April 2021.

[2] "Filed" is used in a generic sense to indicate that a rate increase has been approved, accepted, filed for use, etc., by a jurisdiction. Certain jurisdictions may have filed a multi-year increase, which results in a slightly higher rate level than requested.

[3] The rate increase level varies by benefit period and/or inflation option; average rate increase percentages are based on the distribution of in-force business at the time of the filing.

[4] The company is "Not Filing" in jurisdictions where limited by regulatory requirements or due to limited amount of in-force business. "No Follow-Up" is indicated for jurisdictions that approximately filed the full requested increase.

[5] "TBD" (to be determined) is used in jurisdictions where the company has not yet reached a decision regarding the rate increase request or the prior reduced rate increase was phased-in over multiple years.

[6] Jurisdiction does not require Group Long-Term Care rates to be filed before use.

[7] In Colorado, rate increases prior to 2020 exclude PERA business, which was excluded from data.

[8] In Tennessee, the first cohort listed (i.e., 113 lives) is for certificates issued on the Series 11 Group policy form; the second cohort listed (i.e., 2,148 lives) is for certificates issued on the Tennessee State Employees Group (TNSE) policy form. The TNSE certificates were issued to Tennessee state employees and their family members.

Exhibit IV-c-ii
MedAmerica and Affinity Partners
Status of Filings as of April 19, 2022
All Jurisdictions in Which These Forms are In Force
Series 11 Group Policy Forms

				Second Round Nationwide Request					Second Round Follow-Up				
Jurisdiction	Company	12/31/2020 Policies In Force[1]	12/31/2020 Annualized Premium[1]	Requested Increase[3]	Status[2][4][5]	Date Submitted	Disposition Date	Average Filed Increase[2]	Requested Increase[3]	Status[2][4][5]	Date Submitted	Disposition Date	Average Filed Increase[2]
Arizona[6]	MedAmerica	74	$125,964	69%	Filed	7/21/2017	11/7/2017	69%		No Follow-Up			
California	MedAmerica	12	$15,342		Not Filed					Not Filed			
Colorado[7]	MedAmerica	290	$345,320	81%	Filed	8/23/2017	10/23/2017	20%	117%	Pending	3/18/2020		
Connecticut	MedAmerica	136	$197,858	135%	Filed	4/5/2017	6/21/2017	18%	99%	Filed	9/4/2018	10/1/2018	10%
District of Columbia	MedAmerica	3	$4,887	135%	Filed	4/5/2017	5/8/2017	10%	10%	Filed	8/24/2018	12/19/2018	10%
Hawaii	MedAmerica	68	$108,160	96%	Filed	11/10/2017	11/22/2019	96%		No Follow-Up			
Illinois	MedAmerica	66	$131,250	78%	Filed	6/7/2017	1/11/2018	78%		No Follow-Up			
Indiana	MedAmerica	61	$48,950	135%	Disapproved	12/4/2018	8/26/2019	0%		Not Filed			
Iowa	MedAmerica	19	$31,554	94%	Filed	3/31/2017	6/5/2017	18%	66%	Filed	8/17/2018	10/10/2018	30%
Kansas	MedAmerica	76	$137,859	65%	Withdrawn	11/13/2019	12/30/2021			Not Filed			
Maryland	MedAmerica	2	$2,759	104%	Withdrawn	5/1/2017	1/2/2018	0%		Not Filed			
Minnesota	MedAmerica	364	$619,731	135%	Filed	5/10/2017	12/15/2017	44%	114%	Filed	10/12/2020	3/18/2021	73%
Missouri	MedAmerica	6	$9,070	69%	Filed	6/26/2017	9/12/2017	32%	32%	Filed	9/12/2018	9/20/2018	32%
Nebraska	MedAmerica	48	$59,339	69%	Filed	8/8/2017	6/29/2018	30%		Not Filed			
New Jersey[6]	MedAmerica	9	$23,974	69%	Filed	4/24/2017	10/17/2017	69%		No Follow-Up			
North Dakota	MedAmerica	106	$149,595	69%	Filed	3/17/2017	4/24/2017	30%	30%	Filed	8/14/2018	10/8/2018	30%
Ohio	MedAmerica	16	$21,711	69%	Filed	4/5/2017	6/29/2017	15%	15%	Filed	8/29/2018	2/4/2019	15%
Oregon	MedAmerica	11	$24,220	85%	Pending	6/30/2017							
Pennsylvania	MedAmerica	63	$149,569	69%	Filed	3/9/2017	9/22/2017	20%	41%	Filed	8/21/2018	12/4/2018	20%
South Dakota	MedAmerica	6	$7,845	69%	Filed	5/17/2017	6/30/2017	69%		No Follow-Up			
Tennessee[8]	MedAmerica	113	$252,870	78%	Filed	2/23/2017	10/30/2017	48%	26%	Filed	11/21/2019	5/6/2020	16%
	MedAmerica	2,148	$4,706,751	81%	Filed	2/23/2017	10/30/2017	44%	34%	Filed	11/21/2019	5/6/2020	21%
Texas	MedAmerica	44	$64,456	45%	Disapproved	4/24/2018	7/3/2018	0%		Not Filed			
Washington	MedAmerica	109	$241,589	85%	Filed	4/20/2017	1/29/2020	26%	26%	Filed	3/24/2021	3/11/2022	26%
Wisconsin	MedAmerica	31	$40,923	69%	Filed	6/26/2017	10/10/2017	69%		No Follow-Up			

[1] Excludes policies assumed to be paid up prior to implementation of the requested rate increase. Annualized premium reflects all rate increases filed for use between January 2010 and April 2021.

[2] "Filed" is used in a generic sense to indicate that a rate increase has been approved, accepted, filed for use, etc., by a jurisdiction. Certain jurisdictions may have filed a multi-year increase, which results in a slightly higher rate level than requested.

[3] The rate increase level varies by benefit period and/or inflation option; average rate increase percentages are based on the distribution of in-force business at the time of the filing.

[4] The company is "Not Filing" in jurisdictions where limited by regulatory requirements or due to limited amount of in-force business. "No Follow-Up" is indicated for jurisdictions that approximately filed the full requested increase.

[5] "TBD" (to be determined) is used in jurisdictions where the company has not yet reached a decision regarding the rate increase request or the prior reduced rate increase was phased-in over multiple years.

[6] Jurisdiction does not require Group Long-Term Care rates to be filed before use.

[7] In Colorado, rate increases prior to 2020 exclude PERA business, which was excluded from data.

[8] In Tennessee, the first cohort listed (i.e., 113 lives) is for certificates issued on the Series 11 Group policy form; the second cohort listed (i.e., 2,148 lives) is for certificates issued on the Tennessee State Employees Group (TNSE) policy form. The TNSE certificates were issued to Tennessee state employees and their family members.

Exhibit IV-c-iii
MedAmerica and Affinity Partners
Status of Filings as of April 19, 2022
All Jurisdictions in Which These Forms are In Force
Series 11 Group Policy Forms

				Second Round 2nd Follow-Up					Second Round 3rd Follow-Up				
Jurisdiction	Company	12/31/2020 Policies In Force[1]	12/31/2020 Annualized Premium[1]	Requested Increase[3]	Status[2][4][5]	Date Submitted	Disposition Date	Average Filed Increase[2]	Requested Increase[3]	Status[2][4][5]	Date Submitted	Disposition Date	Average Filed Increase[2]
Arizona[6]	MedAmerica	74	$125,964		No Follow-Up					No Follow-Up			
California	MedAmerica	12	$15,342		Not Filed					Not Filed			
Colorado[7]	MedAmerica	290	$345,320										
Connecticut	MedAmerica	136	$197,858	128%	Filed	2/10/2020	4/28/2020	10%	112%	Filed	6/10/2021	7/22/2021	23%
District of Columbia	MedAmerica	3	$4,887	10%	Filed	2/26/2020	9/28/2020	10%	10%	Filed	8/25/2021	1/10/2022	10%
Hawaii	MedAmerica	68	$108,160		No Follow-Up					No Follow-Up			
Illinois	MedAmerica	66	$131,250		No Follow-Up					No Follow-Up			
Indiana	MedAmerica	61	$48,950		Not Filed					Not Filed			
Iowa	MedAmerica	19	$31,554	46%	Filed	10/14/2020	1/27/2021	18%		Not Filed			
Kansas	MedAmerica	76	$137,859		Not Filed					Not Filed			
Maryland	MedAmerica	2	$2,759		Not Filed					Not Filed			
Minnesota	MedAmerica	364	$619,731		Not Filed					Not Filed			
Missouri	MedAmerica	6	$9,070		No Follow-Up					No Follow-Up			
Nebraska	MedAmerica	48	$59,339		Not Filed					Not Filed			
New Jersey[6]	MedAmerica	9	$23,974		No Follow-Up					No Follow-Up			
North Dakota	MedAmerica	106	$149,595		No Follow-Up					No Follow-Up			
Ohio	MedAmerica	16	$21,711	15%	Filed	6/24/2020	12/11/2020	15%		Not Filed			
Oregon	MedAmerica	11	$24,220										
Pennsylvania	MedAmerica	63	$149,569	22%	Filed	1/10/2020	4/25/2020	20%	2%	Filed	3/5/2021	5/14/2021	2%
South Dakota	MedAmerica	6	$7,845		No Follow-Up					No Follow-Up			
Tennessee[8]	MedAmerica	113	$252,870	11%	Filed	1/11/2021	3/8/2021	6%		Not Filed			
	MedAmerica	2,148	$4,706,751	13%	Filed	1/11/2021	3/8/2021	8%		Not Filed			
Texas	MedAmerica	44	$64,456		Not Filed					Not Filed			
Washington	MedAmerica	109	$241,589										
Wisconsin	MedAmerica	31	$40,923		No Follow-Up					No Follow-Up			

[1] Excludes policies assumed to be paid up prior to implementation of the requested rate increase. Annualized premium reflects all rate increases filed for use between January 2010 and April 2021.

[2] "Filed" is used in a generic sense to indicate that a rate increase has been approved, accepted, filed for use, etc., by a jurisdiction. Certain jurisdictions may have filed a multi-year increase, which results in a slightly higher rate level than requested.

[3] The rate increase level varies by benefit period and/or inflation option; average rate increase percentages are based on the distribution of in-force business at the time of the filing.

[4] The company is "Not Filing" in jurisdictions where limited by regulatory requirements or due to limited amount of in-force business. "No Follow-Up" is indicated for jurisdictions that approximately filed the full requested increase.

[5] "TBD" (to be determined) is used in jurisdictions where the company has not yet reached a decision regarding the rate increase request or the prior reduced rate increase was phased-in over multiple years.

[6] Jurisdiction does not require Group Long-Term Care rates to be filed before use.

[7] In Colorado, rate increases prior to 2020 exclude PERA business, which was excluded from data.

[8] In Tennessee, the first cohort listed (i.e., 113 lives) is for certificates issued on the Series 11 Group policy form; the second cohort listed (i.e., 2,148 lives) is for certificates issued on the Tennessee State Employees Group (TNSE) policy form. The TNSE certificates were issued to Tennessee state employees and their family members.

Exhibit IV-c-iv
MedAmerica and Affinity Partners
Status of Filings as of April 19, 2022
All Jurisdictions in Which These Forms are In Force
Series 11 Group Policy Forms

Jurisdiction	Company	12/31/2020 Policies In Force[1]	12/31/2020 Annualized Premium[1]	Current Round Nationwide Request					Average Cumulative Increase Filed[2]
				Requested Increase[3]	Status[2][4][5]	Date Submitted	Disposition Date	Average Filed Increase[2]	
Arizona[6]	MedAmerica	74	$125,964	127%	Not Yet Filed				135%
California	MedAmerica	12	$15,342		Not Filing				0%
Colorado[7]	MedAmerica	290	$345,320						67%
Connecticut	MedAmerica	136	$197,858		TBD				75%
District of Columbia	MedAmerica	3	$4,887	285%	Not Yet Filed				46%
Hawaii	MedAmerica	68	$108,160		Not Filing				135%
Illinois	MedAmerica	66	$131,250	51%	Pending	3/29/2022			148%
Indiana	MedAmerica	61	$48,950		TBD				0%
Iowa	MedAmerica	19	$31,554	164%	Pending	3/30/2022			151%
Kansas	MedAmerica	76	$137,859	237%	Not Yet Filed				64%
Maryland	MedAmerica	2	$2,759		Not Filing				15%
Minnesota	MedAmerica	364	$619,731		TBD				149%
Missouri	MedAmerica	6	$9,070	129%	Not Yet Filed				142%
Nebraska	MedAmerica	48	$59,339	186%	Not Yet Filed				81%
New Jersey[6]	MedAmerica	9	$23,974	133%	Not Yet Filed				135%
North Dakota	MedAmerica	106	$149,595	106%	Pending	2/28/2022			135%
Ohio	MedAmerica	16	$21,711	148%	Not Yet Filed				111%
Oregon	MedAmerica	11	$24,220						39%
Pennsylvania	MedAmerica	63	$149,569	87%	Not Yet Filed				145%
South Dakota	MedAmerica	6	$7,845	9%	Pending	3/30/2022			135%
Tennessee[8]	MedAmerica	113	$252,870	105%	Pending	3/10/2022			153%
	MedAmerica	2,148	$4,706,751	79%	Pending	3/10/2022			145%
Texas	MedAmerica	44	$64,456	194%	Not Yet Filed				68%
Washington	MedAmerica	109	$241,589						119%
Wisconsin	MedAmerica	31	$40,923	69%	Not Yet Filed				135%

[1] Excludes policies assumed to be paid up prior to implementation of the requested rate increase. Annualized premium reflects all rate increases filed for use between January 2010 and April 2021.

[2] "Filed" is used in a generic sense to indicate that a rate increase has been approved, accepted, filed for use, etc., by a jurisdiction. Certain jurisdictions may have filed a multi-year increase, which results in a slightly higher rate level than requested.

[3] The rate increase level varies by benefit period and/or inflation option; average rate increase percentages are based on the distribution of in-force business at the time of the filing.

[4] The company is "Not Filing" in jurisdictions where limited by regulatory requirements or due to limited amount of in-force business. "No Follow-Up" is indicated for jurisdictions that approximately filed the full requested increase.

[5] "TBD" (to be determined) is used in jurisdictions where the company has not yet reached a decision regarding the rate increase request or the prior reduced rate increase was phased-in over multiple years.

[6] Jurisdiction does not require Group Long-Term Care rates to be filed before use.

[7] In Colorado, rate increases prior to 2020 exclude PERA business, which was excluded from data.

[8] In Tennessee, the first cohort listed (i.e., 113 lives) is for certificates issued on the Series 11 Group policy form; the second cohort listed (i.e., 2,148 lives) is for certificates issued on the Tennessee State Employees Group (TNSE) policy form. The TNSE certificates were issued to Tennessee state employees and their family members.

Exhibit V
MedAmerica and Affinity Partners
2017 Nationwide Filing Assumptions
Series 11 and Prior Policy Forms

	Morbidity
Series 11 and Prior	Expected claim costs are developed using the 2014 Milliman *Long-Term Care Guidelines* (*Guidelines*) with adjustments for individual vs. group underwriting selection and an all-lives exposure basis. The claim costs are further adjusted based on historical claim experience by policy form group, attained age, duration, and coverage type, to the extent credible. One year of retrospective improvement was applied to bring these assumptions forward to 2015 using scalars of 0.990 for females and 0.985 for males.

	Mortality
Series 11 and Prior	1994 Group Annuitant Mortality (GAM) Static gender-distinct table with 21 years of retrospective improvement applied to bring this table forward to 2015 using scalars of 0.900 for females and 0.810 for males. These mortality probabilities are further adjusted based on historical mortality experience by individual/group, issue age band, and duration. Tables providing these adjustment factors are provided in Exhibit V-i.

	Lapse Probabilities
Series 11 and Prior	Voluntary lapse probabilities (excludes benefit expiry) vary by policy duration and policy form group.

Lifetime-Pay Lapse Probabilities

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%

For the 10-pay option, a reduction of 65% of these lapse probabilities is assumed for durations 1 to 4, a reduction of 70% of these lapse probabilities is assumed for durations 5 to 8, and 0% lapse thereafter. For the 20-pay option, a reduction of 50% of these lapse probabilities is assumed for durations 1 to 8, a reduction of 75% of these lapse probabilities is assumed for durations 9 to 15, and 0% lapse thereafter.

	Benefit Expiry Probabilities
Series 11 and Prior	Benefit expiry probabilities reflect assumed policy termination due to exhaustion of benefits on limited benefit period policies. The probabilities are based on the 2014 *Guidelines* with adjustments for historical benefit expiry experience and vary by gender, benefit period, and attained age. A table containing the benefit expiry probabilities is provided in Exhibit V-ii.

	Interest Rate
Series 11 and Prior	5.00%

	Improvement
Series 11 and Prior	Annual improvement in the mortality and morbidity assumptions is assumed for 15 years starting in 2016. Annual mortality improvement is assumed to be 0.5% and 1.0% for females and males, respectively. Annual morbidity improvement is assumed to be 1.0% and 1.5% for females and males, respectively.

Exhibit V-i
Mortality Durational Adjustment Factors
MedAmerica and Affinity Partners
2017 Nationwide Filing Assumptions
Series 11 and Prior Policy Forms

Individual Business												
Duration[1]	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%

Group Business												
Duration[1]	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%

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

Exhibit V-ii
Benefit Expiry Probabilities
MedAmerica and Affinity Partners
2017 Nationwide Filing Assumptions
Series 11 and Prior Policy Forms

Gender	Benefit Period in Years	Attained Age[1]										
		<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%

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

Appendix A
Development of and Justification for Current Assumptions

This appendix describes the development of and justification for the current actuarial assumptions used in this filing.

The persistency and morbidity assumptions were developed using historical experience and predictive analytics. Where actual experience was limited or did not exist, industry experience and actuarial judgment 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 (including commuted business) that issued the same products. Additionally, experience on other blocks of business originally issued by MedAmerica and its affinity partners (including commuted business), and MedAmerica's other acquired blocks of business is also used.

The persistency and morbidity assumptions were developed on a first principles basis. In this context, "first principles" means developing key assumptions (namely, morbidity and mortality) at the component level and modeling active and disabled lives separately. Separate assumptions were developed for: (1) claim incidence, (2) voluntary lapse, (3) active mortality, (4) claim termination (including separate assumptions for disabled mortality and recovery), and (5) utilization. For each assumption except utilization, experience from 2008 through 2017 with runout through 2018 was used. The utilization assumption was developed based on historical experience from 2016 through 2019 with runout through March 31, 2020 to capture more recent information as cost of care and utilization trends can fluctuate over short periods of time. Experience adjustment factors were developed using predictive analytics as described in the Predictive Analytics section below.

As an additional consideration, the ongoing COVID-19 pandemic has created uncertainty regarding future long-term care (LTC) experience. The short-term impact on LTC assumptions may be favorable due to higher mortality (particularly at advanced ages) and potentially lower incidence and benefit utilization. However, due to the long duration nature of LTC insurance, minor deviations in experience over a relatively small number of calendar years are not expected to have a significant impact on lifetime projections. Therefore, we did not make any adjustments to these assumptions to capture anticipated impacts of the pandemic. However, we will continue to monitor emerging experience and trends so that adjustments can be included in the future if believed to be representative of long-term trends.

Improvement assumptions for active mortality and claim incidence were developed based on individual annuitant or industry experience, along with actuarial judgment. The rate increase dependent assumptions were developed using historical experience, and actuarial judgment where experience was limited or did not exist.

The sections that follow provide more detail on the development of and justification for the current assumptions that are material to the projections in this filing.

Active Assumptions

The assumptions for active (i.e., healthy) lives were developed based on detailed historical experience from 2008 through 2017 with runout through 2018 for MedAmerica's organic (including affinity partners) and acquired business. Experience adjustment factors were developed using predictive analytics as described in the Predictive Analytics section below. The active assumptions include (1) claim incidence (the probability that an active life becomes disabled), (2) voluntary lapse, and (3) active mortality.

Claim Incidence Assumption

Claim incidence probabilities (i.e., the probability of an insured becoming disabled) were developed using the 2017 Milliman *Long-Term Care Guidelines* (*Guidelines*) incidence curves, with adjustments for retrospective morbidity improvement using the G2 improvement scale, adverse selection due to past rate increases, and contingent nonforfeiture (CNF) policies. These assumptions were developed based on the following three starting sites of care—assisted living facility (ALF), skilled nursing facility (SNF), or home health care (HHC).

Exhibit A-1 provides a summary of actual-to-expected (A:E) experience by site of care for all products included in the study for claim incidence in policy durations seven and later for each characteristic by which the claim incidence assumption varies. The following items are included:

- Exposure [A] reflects the length of time a covered life is exposed to the risk of becoming disabled (i.e., an exact exposure basis).
- Claim counts [B] are based on historical claim experience and are provided by situs.

- A:E ratios are calculated as actual claim incidence probabilities to the 2017 *Guidelines* with the adjustments listed above (i.e., retrospective morbidity improvement, adverse selection due to past rate increases, CNF policies) [C] and to the current assumption [D]. This fit will not be perfect (i.e., ratios deviate 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.

Lifetime-Pay Voluntary Lapse Assumption

The voluntary lapse assumption reflects the nationwide 2017 data rate increase filings' voluntary lapse assumption with experience adjustments.

The attained age adjustment factors developed from the predictive model produced a U-shaped pattern (i.e., decreased and then increased) by attained age. However, the attained age adjustment factors are held constant for ages 65 and older to produce an ultimate voluntary lapse assumption that is constant rather than increasing by attained age. The adjustments are held constant after this point because an increasing attained age lapse trend is not widely used in the industry, and this increasing lapse trend may be due to miscoding of deaths or underreporting of deaths in the Social Security Death Master File. An additional attained age adjustment to mortality was developed (Exhibit A-3a) in order to capture these terminations (i.e., higher lapses at older attained ages) such that the combined mortality and voluntary lapse assumption better aligns with actual experience as shown in Exhibit A-4.

Exhibit A-2 supports the voluntary lapse assumption and provides the following information by gender (male or female), marital status (single, married, or unknown), benefit period (non-lifetime or lifetime), inflation protection option (automatic or non-automatic), and attained age.

- Exhibit A-2a provides the ultimate voluntary lapse probabilities after all experience adjustments for the policy form(s) included in this filing. These ultimate voluntary lapse probabilities are applicable for attained ages 65 and older in policy durations 10 and later. Only these ultimate voluntary lapse probabilities are material to the projections given the age of this cohort.

- Exhibit A-2b provides A:E results for experience for all products of MedAmerica, its affinity partners, and any acquired business, and includes the following:

  - Exposure [A] reflects the length of time a covered life is exposed to the risk of voluntary lapse (i.e., exact exposure basis).

  - Actual lapses [B].

  - A:E ratios are calculated as actual lapse probabilities to the unadjusted nationwide 2017 data rate increase filings' voluntary lapse assumption [C], the assumption with experience adjustments directly from the predictive model (i.e., without the attained age caps) [D], and the current assumption (i.e., with the attained age caps) [E]. This fit will not be perfect (i.e., ratios deviate 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. Additionally, the A:E in column [E] is greater than 1.0 due to the reallocation of lapses at higher attained ages as described above.

The experience underlying Exhibit A-2b captures lifetime-pay policies for policy durations 10 and later to focus on the fit of the ultimate voluntary lapse assumption and excludes "shock" lapses. For certain cohorts there have been prior rate increases and thus the option to lapse with a CNF benefit (i.e., shock lapse). Additionally, some policy forms offered an optional shortened non-forfeiture benefit. Policies that elected one of these options were not counted as a voluntary lapse; however, their annual policy exposure was valued up to the date of election.

Limited-Pay Voluntary Lapse

For policies with a limited premium payment option, the voluntary lapse assumption is a function of the lifetime-pay voluntary lapse probabilities and is similar to that used in original pricing. Less than 4% of the in-force policies have a limited-pay option that will be subject to the voluntary lapse assumption after the first five years of the projection because they will not yet be paid-up due to the length of the payment option for these policies. Based on sensitivity testing performed as part of the experience study, the impact of the limited-pay voluntary lapse assumptions on the projections is 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. No voluntary lapse assumption is assumed for CNF policies.

Active Mortality

Active mortality was developed based on the 2012 Individual Annuity Mortality Basic (2012IAM) table with adjustments to make it applicable to an active life exposure base and reflect retrospective active mortality improvement. Experience adjustment factors were developed using predictive analytics with additional adjustments to increase mortality for ages 65 and older commensurate with the capping applied for voluntary lapse mentioned above.

Exhibit A-3 supports the active mortality assumption and provides the following information by policy duration, gender, marital status (married, single, or unknown), inflation option (automatic and non-automatic), product type (individual and group), cohort, issue era (old and new), and attained age. Policies issued prior to January 1, 1998 are treated as “old” and policies issued on or after January 1, 1998 are treated as “new”. Prior to Series 11 policies are considered part of the “old” era bucket as the majority of policies were issued prior to January 1, 1998. Series 11 Individual and Group policies are considered part of the “new” era bucket as the majority of policies were issued on or after January 1, 1998.

- Exhibit A-3a provides the durational and attained age adjustment factors that are to be applied to the active-exposure-adjusted 2012IAM hazard rates; the adjusted hazard rates are converted back into mortality probabilities to create the mortality assumption produced by the predictive model. The attained age adjustment factors are applicable to policy durations 7 and later.

- Exhibit A-3b provides A:E results for all products of MedAmerica, its affinity partners, and any acquired business for experience in policy durations 7 and later, and includes the following:

  - Exposure [A] reflects the length of time a covered life is exposed to the risk of death (i.e., exact exposure basis).

  - Actual deaths of active policyholders [B].

  - A:E ratios are calculated as actual mortality probabilities to the unadjusted active 2012IAM table [C], the assumption with experience adjustments directly from the predictive model (i.e., without the composite termination attained age adjustments) [D], and the current assumption (i.e., with the composite termination attained age adjustments) [E]. This fit will not be perfect (i.e., ratios deviate 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. Additionally, the A:E in column [E] is less than 1.0 due to the reallocation of lapses at higher attained ages as described above.

Composite Policy Terminations

Exhibit A-4 supports the active composite termination (i.e., active mortality and voluntary lapse combined) assumption. It provides a comparison of the A:E composite termination experience for all products of MedAmerica, its affinity partners, and any acquired business, and includes the following:

- Exposure [A] reflects the length of time a covered life is exposed to the risk of termination (i.e., exact exposure basis).

- Actual composite terminations of active policyholders [B].

- A:E ratios are calculated as actual termination probabilities to the expected composite termination probabilities [C]. The A:E provides an indication of fit. This fit will not be perfect (i.e., ratios deviate 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.

The experience underlying Exhibit A-4 reflects lifetime-pay policies for policy durations 10 and later to focus on the fit of the ultimate composite termination assumption. It also excludes “shock” lapses as described above for Exhibit A-2b.

Appendix A
Development of and Justification for Current Assumptions

Disabled Assumptions

The assumptions for disabled (i.e., on claim) lives were developed based on detailed historical experience from 2008 through 2017 with runout through 2018 for MedAmerica's organic (including affinity partners) and acquired business. Experience adjustment factors were developed using predictive analytics as described in the Predictive Analytics section below. The disabled assumptions include (1) disabled mortality and (2) recovery. A composite claim termination assumption was also developed and used to derive an implied recovery assumption, as described below.

Disabled Mortality

Disabled mortality probabilities were developed based on the disabled mortality tables developed in conjunction with the 2017 *Guidelines* with adjustments to reflect retrospective disabled mortality improvement and experience on all products of MedAmerica, its affinity partners, and any acquired business from 2008 through 2017 with runout through 2018. The experience adjustment factors were developed using predictive analytics as described in the Predictive Analytics section below.

Exhibit A-5 provides a summary of A:E results for experience in claim months 4 and later for each characteristic by which the disabled mortality assumption varies (starting site of care, gender, benefit period, group or individual, claim year, and incurred age) and includes the following:

- Exposure [A] reflects the length of time a disabled policyholder is exposed to the risk of death (i.e., exact exposure basis).
- Actual deaths [B] of disabled policyholders.
- A:E ratios are calculated as actual deaths of disabled policyholders to the unadjusted disabled mortality tables developed in conjunction with the 2017 *Guidelines* [C] and the current disabled mortality assumption [D]. The A:E provides an indication of fit. This fit will not be perfect (i.e., ratios deviate 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.

Implied Recovery

Implied recovery probabilities were developed from the composite claim termination (described below) and disabled mortality assumptions using the following formula:

Implied Recovery Probability = 1 – [(1 – Claim Termination Probability) / (1 – Disabled Mortality Probability)]

Actuarial judgment was used to make minor adjustments to ensure that the resulting recovery probabilities were reasonable by claim month and across key claimant characteristics.

Exhibit A-6 provides a summary of A:E results for experience in claim months 4 and later for each characteristic by which the implied recovery assumption varies (starting site of care, gender, benefit period, group or individual, claim year, and incurred age) and includes the following:

- Exposure [A] reflects the length of time a disabled policyholder is exposed to the opportunity of recovery (i.e., exact exposure basis).
- Actual recoveries [B] of disabled policyholders.
- A:E ratios are calculated as actual recoveries of disabled policyholders to the recovery tables developed in conjunction with the 2017 *Guidelines* [C] and the current implied recovery assumption [D]. The 2017 *Guidelines* A:E result is included for illustrative purposes only as this expected basis was not directly used in developing the implied recovery assumption.

Composite Claim Terminations

Composite claim termination probabilities were developed using the 2017 *Guidelines* with adjustments to reflect retrospective disabled mortality improvement and experience on all products of MedAmerica, its affinity partners, and any acquired business from 2008 through 2017 with runout through 2018. The experience adjustment factors were developed using predictive analytics as described in the Predictive Analytics section below.

Exhibit A-7 provides a summary of A:E results for experience in claim months 4 and later for each characteristic by which the composite claim termination assumption varies (starting site of care, gender, benefit period, group or individual, claim year, and incurred age) and includes the following:

- Exposure [A] reflects the length of time a disabled policyholder is exposed to the risk of claim termination (i.e., exact exposure basis).
- Actual terminations [B] of disabled policyholders.
- A:E ratios are calculated as actual claim terminations to the unadjusted 2017 *Guidelines* claim termination tables [C] and the current claim termination assumption [D]. The A:E provides an indication of fit. This fit will not be perfect (i.e., ratios deviate 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.

Utilization Assumption

Utilization recognizes that less than the full potential benefit may be paid for an LTC claim due to services received less frequently than daily ("day" utilization) or actual charges less than the daily maximum ("dollar" utilization). The utilization assumption is a "total" utilization assumption—that is, it captures the impact of both day and dollar utilization. In developing this assumption, we split total utilization into two components (1) policy duration utilization and (2) claim duration utilization. The utilization assumption was developed based on historical experience from 2016 through 2019 with runout through March 31, 2020 for MedAmerica, its affinity partners, and any acquired business.

Policy Duration Utilization

Total policy duration utilization was developed using the 2017 *Guidelines* utilization projection model with inputs based on MedAmerica's actual utilization percentages and cost of care trends.

The policy duration utilization assumption also captures how utilization by site of care changes over time due to (1) inflation of the daily benefit and (2) cost of care trends.

The policy duration utilization assumption produced using these assumptions and the *Guidelines* utilization projection model were then used as the underlying expectation for the claim duration utilization analysis described below.

Claim Duration Utilization

Total utilization by claim duration was developed based on the policy duration utilization assumption described above with adjustments for MedAmerica's actual claim experience by starting site of care. Experience adjustment factors were developed using predictive analytics as described in the Predictive Analytics section below, with additional adjustments to trend the utilization assumption towards an ultimate level in late claim durations where experience was limited.

Exhibit A-8 supports the claim duration total utilization assumption and provides the following information by starting site of care, claim duration, benefit period (non-lifetime and lifetime), inflation option (automatic for life, limited automatic inflation, and non-automatic), group or individual, ALF reimbursement percentage, HHC reimbursement percentage, and incurred age.

- Exhibit A-8a provides the adjustment factors that are to be applied to the policy duration utilization assumption described above.
- Exhibit A-8b provides A:E results for all products of MedAmerica, its affinity partners, and any acquired business for experience in claim months 4 and later and includes the following:
    - Actual paid claims [A].
    - A:E ratios are shown separately for the policy duration utilization assumption described above [B] and the current utilization assumption [C]. This fit will not be perfect (i.e., ratios deviate 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. Additionally, as seen in Exhibit A-8b, the trend adjustments applied move the overall fit for claim years 6 and later further from 1.00 as this is the point at which the trend adjustments are applied to the assumption.

Prospective Improvement

For projected active mortality and claim incidence improvement, the G2 improvement scale from the 2012IAM mortality table was used. The G2 improvement scale varies by attained age and gender. It is applied beginning in the first projection year and continues for 10 projection 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 the magnitude of the cumulative rate increase level and attained age. Section 6 of the actuarial memorandum provides these policyholder behavior assumptions. These assumptions are based on MedAmerica and its affinity partners, and MedAmerica's acquired business's combined actual CBUL and RBO election rate experience, industry data, and actuarial judgment—particularly at the higher rate increase magnitudes where limited experience exists.

Contingent Benefit Upon Lapse Election

The assumed CBUL election rate is based on the requested rate increase and is applied on a seriatim basis. 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. The percent reduction in premium is assumed to correspond to an equivalent percent reduction in claims. We assume an RBO election rate based on the requested rate increase and is applied on a seriatim basis. No RBO elections are assumed for limited-pay policies.

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

Reduction to premium and claims due to the election of RBO
= 1 – (Average premium level after the rate increase with RBO election / 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 relative increase to morbidity due to adverse selection varies by cumulative rate increase level and attained age and was developed using industry and company experience and actuarial judgment. The adverse selection assumption is applied to the claim incidence rates.

Predictive Analytics

In developing the experience adjustment factors described above, predictive analytics was employed in the form of a penalized generalized linear model (GLM) as well as a gradient boosting machine (GBM) model.

Penalized Generalized Linear Model

A penalized GLM was used to develop adjustments for (1) situs-specific incidence, (2) lifetime-pay voluntary lapse, (3) active mortality, and (4) on-claim utilization.

A penalized GLM is similar to a traditional GLM. The key 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 historical experience. A high penalty would give no weight to the data, leaving the benchmark assumption (e.g., 2017 *Guidelines*) unadjusted. No penalty would give full weight to the company's historic data, potentially making large adjustments to the benchmark assumption, which could be overfitting the historical experience. Therefore, when using a penalized GLM it is important to choose a penalty that gives the right amount of weight to

the historic data to avoid underfitting or overfitting the experience. A standard approach for choosing such penalty is to use a k-fold cross-validation (described below) to test a series of penalty values.

Gradient Boosting Machine

GBM models were used to develop adjustments for (1) total incidence, (2) composite claim termination, and (3) disabled mortality. As part of our experience analyses, GBM models were also used to explore key drivers for certain assumptions, which informed our decisions regarding assumption complexity, the predictive modeling technique(s) to use in developing adjustments, and the variables to capture in the experience analyses.

A GBM model is a nonparametric algorithm that uses an ensemble of decision trees to develop predictions, which automatically create key interactions of the independent variables in the model in order to minimize the prediction error of the model (i.e., the difference between the actual versus predicted counts). At each decision point in the trees, the model cycles through each variable and chooses the optimal data split that minimizes the prediction error. This process determines variable importance and how to partition variables such that the model has the ability to navigate complex interactions in an automated fashion.

A GBM model includes several inputs that control the model complexity and learning process, which are referred to as hyperparameters. These inputs are used to produce a model that determines the amount of weight to place on the historical data (i.e., not overfitting or underfitting) such that it will generalize well to future experience. A standard approach for tuning such hyperparameters is to use a k-fold cross-validation (described below).

K-Fold Cross-Validation

A k-fold cross-validation is an automated process by which model hyperparameters can be selected and evaluated. This process 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 assumptions. Through the k-fold cross-validation, we evaluated the impact that hyperparameters had on a model’s ability to predict on the unseen data by testing a range of hyperparameters. We selected hyperparameters to balance minimizing the k-fold cross-validation prediction error with the generalizability of the model. This allows for a robust and automated approach to determine the amount of weight to give actual experience versus the benchmark assumptions.

Hazard Rates and Probabilities

Each assumption, except utilization, consists of a base assumption and experience adjustment factors. The base assumption was converted to a hazard rate for use in predictive modeling. The experience adjustment factors are applied to the base hazard rate. The assumption is then converted back to a probability for use in projection.

Adjustment factors were developed to be applied to hazard rates as part of the predictive modeling process described above. Hazard rates are converted from the base probability assumption and equal –LN[1-probability]. After applying all applicable adjustments, adjusted hazard rates are converted back to probabilities to create the assumption, where probability = 1 – EXP[–hazard rate].

A hazard rate represents the instantaneous likelihood (rate per unit of time) of an event (i.e., incidence, death, lapse, or recovery) at different times, whereas the probability is the likelihood that an event will occur within a specific time interval (e.g., one policy year). Because exact exposure is used in the predictive model, we use hazard rates in the development. They are then converted to probabilities for use in the projection models.

Please note that this conversion of probabilities to hazard rates is only applicable for assumptions that follow a Poisson distribution (i.e., whether an event occurs) and as such are not applicable to the claim duration utilization assumption, which is non-binary (i.e., based on dollars versus events).

Exhibit A-1
Actual-to-Expected Claim Incidence Experience 2008-2017
Policy Durations 7+
All Products

Product or Insured Characteristic	Exposure [A]	ALF Claim Count [B]	ALF Actual-to-Expected (A:E) 2017 *Guidelines* [C]	ALF Actual-to-Expected (A:E) Expected[1] [D]	HHC Claim Count [B]	HHC A:E 2017 *Guidelines* [C]	HHC A:E Expected[1] [D]	SNF Claim Count [B]	SNF A:E 2017 *Guidelines* [C]	SNF A:E Expected[1] [D]	Total Claim Count [B]	Total A:E 2017 *Guidelines* [C]	Total A:E Expected[1] [D]
Gender													
Female	411,099	1,928	1.01	0.97	2,904	1.01	0.98	3,028	1.42	1.11	7,861	1.11	1.00
Male	276,961	807	1.01	0.89	1,833	1.11	0.98	1,911	1.57	1.16	4,550	1.22	1.01
Marital Status													
Married	353,202	847	0.96	0.87	1,934	1.15	1.03	1,703	1.52	1.11	4,484	1.20	1.00
Single	199,058	923	0.98	0.93	1,602	1.04	0.97	1,674	1.49	1.14	4,200	1.14	1.00
Unknown	135,800	965	1.09	1.03	1,201	0.91	0.92	1,562	1.42	1.13	3,727	1.10	1.00
Product Type													
Cash	124,293	89	1.32	1.02	532	1.40	1.10	119	1.30	0.90	740	1.36	1.05
Non-Tax Qualified Reimb.	195,898	1,721	1.00	0.97	1,986	0.91	0.93	3,005	1.41	1.12	6,712	1.09	0.99
Tax Qualified Reimb.	367,868	925	1.01	0.89	2,218	1.12	1.00	1,815	1.61	1.16	4,959	1.22	1.01
Cohort[2]													
Prior to Series 11	77,873	680	0.97	0.91	940	1.13	1.00	1,314	1.52	1.11	2,933	1.20	0.99
Series 11 Group	49,276	36	1.06	1.07	108	0.91	0.91	68	1.42	1.29	212	1.05	1.02
Series 11 Individual	133,805	480	1.13	0.93	993	1.17	0.99	895	1.73	1.14	2,368	1.30	1.01
Coverage Type													
Comprehensive	610,864	1,989	1.03	0.97	4,237	1.00	0.94	3,615	1.50	1.18	9,840	1.12	1.00
Home Care Only	11,238	0	N/A	N/A	350	1.16	1.01	2	N/A	N/A	352	1.16	1.02
Facility Only	65,958	747	0.96	0.87	150	N/A	N/A	1,322	1.40	1.00	2,219	1.27	1.00
Benefit Period													
CNF	42,737	77	1.00	0.95	128	0.97	0.90	138	1.45	1.11	343	1.11	0.98
Lifetime	150,557	615	1.06	1.01	1,001	1.01	1.01	936	1.30	1.04	2,551	1.10	1.00
Non-Lifetime	494,766	2,044	1.00	0.93	3,608	1.06	0.98	3,865	1.53	1.15	9,517	1.17	1.00
Attained Age													
<65	243,457	26	0.81	0.73	285	1.14	1.01	76	1.30	1.18	387	1.13	1.01
65-69	110,357	60	1.18	1.09	272	0.96	0.91	116	1.33	1.20	448	1.06	0.99
70-74	109,425	137	0.95	0.89	434	0.90	0.88	327	1.57	1.32	897	1.07	1.00
75-79	100,692	391	0.98	0.93	795	0.94	0.95	731	1.44	1.14	1,917	1.09	1.00
80-84	75,504	791	1.01	0.94	1,228	1.03	0.99	1,379	1.54	1.13	3,398	1.17	1.01
85-89	37,391	848	1.00	0.95	1,093	1.05	0.98	1,419	1.49	1.11	3,360	1.15	0.99
90+	11,233	482	1.09	0.98	631	1.39	1.11	891	1.40	1.07	2,004	1.24	0.99
Total	688,060	2,735	1.01	0.94	4,737	1.04	0.98	4,939	1.48	1.13	12,411	1.15	1.00

[1] Expected = current assumption reflecting all experience adjustments.

[2] Series characteristic captures the experience of Prior to Series 11, Series 11 Group, and Series 11 Individual policies only, while other characteristics capture the pooled experience of products of MedAmerica, its affinity partners, and MedAmerica's acquired blocks of business.

Exhibit A-2a
Ultimate Voluntary Lapse Probabilities
Lifetime-Pay Policies for Attained Age 65 and Older and Policy Durations 10+

Prior to Series 11

Inflation Option	Benefit Period	Married		Single		Unknown	
		Male	Female	Male	Female	Male	Female
Non-Automatic	Non-Lifetime	0.7%	0.7%	1.0%	0.9%	0.8%	0.7%
	Lifetime	0.5%	0.5%	0.7%	0.7%	0.6%	0.5%
Automatic	Non-Lifetime	0.5%	0.5%	0.7%	0.7%	0.6%	0.5%
	Lifetime	0.5%	0.4%	0.6%	0.6%	0.5%	0.5%

Series 11 Individual

Inflation Option	Benefit Period	Married		Single		Unknown	
		Male	Female	Male	Female	Male	Female
Non-Automatic	Non-Lifetime	0.6%	0.5%	0.8%	0.7%	0.6%	0.6%
	Lifetime	0.4%	0.4%	0.5%	0.5%	0.4%	0.4%
Automatic	Non-Lifetime	0.4%	0.4%	0.6%	0.5%	0.4%	0.4%
	Lifetime	0.4%	0.3%	0.5%	0.5%	0.4%	0.4%

Series 11 Group

Inflation Option	Benefit Period	Married		Single		Unknown	
		Male	Female	Male	Female	Male	Female
Non-Automatic	Non-Lifetime	1.0%	0.9%	1.3%	1.2%	1.1%	1.0%
	Lifetime	0.7%	0.6%	0.9%	0.9%	0.8%	0.7%
Automatic	Non-Lifetime	0.7%	0.6%	1.0%	0.9%	0.8%	0.7%
	Lifetime	0.6%	0.6%	0.9%	0.8%	0.7%	0.6%

Exhibit A-2b
Actual-to-Expected Voluntary Lapse Experience 2008-2017
Lifetime-Pay for Policy Durations 10+
All Products

Product or Insured Characteristic	Policy Year Exposure [A]	Actual Lapses [B]	Actual-to-Expected Lapse Probability		
			Unadjusted [C]	Modeled [D]	Expected[1] [E]
Marital Status					
Married	196,481	1,608	0.79	0.99	1.16
Single	115,368	1,467	1.17	1.04	1.28
Unknown	114,911	783	0.94	0.99	1.28
Benefit Period and Inflation Protection					
Lifetime and Automatic	87,655	458	0.66	0.94	1.02
Lifetime and Non-Automatic	29,858	216	0.83	0.95	1.19
Non-Lifetime and Automatic	186,434	1,446	0.78	1.00	1.14
Non-Lifetime and Non-Automatic	122,813	1,738	1.32	1.05	1.41
Gender					
Female	258,053	2,331	0.93	1.01	1.23
Male	168,707	1,527	0.94	1.01	1.22
Cohort[2]					
Prior to Series 11	60,642	533	0.87	0.95	1.36
Series 11 Group	25,158	270	0.82	0.93	0.96
Series 11 Individual	70,898	461	1.08	1.05	1.28
Attained Age					
<65	104,520	971	1.01	1.16	1.16
65-69	62,429	357	0.61	0.94	0.91
70-74	72,502	492	0.70	0.89	1.01
75-79	79,799	622	0.77	0.93	1.08
80-84	64,626	659	1.03	0.98	1.36
85-89	33,073	496	1.52	1.00	1.85
90+	9,810	261	2.64	1.24	3.01
Total	426,759	3,858	0.94	1.01	1.23

[1] Expected = current assumption reflecting all experience adjustments.

[2] Series characteristic captures the experience of Prior to Series 11, Series 11 Group, and Series 11 Individual policies only, while other characteristics capture the pooled experience of products of MedAmerica, its affinity partners, and MedAmerica's acquired blocks of business.

Exhibit A-3a
Active Mortality Hazard Rate Adjustment Factors
All Products

Attained	Gender		Marital Status			Inflation Option		Individual or Group		Cohort-Specific	Composite Termination
Age[1]	Male	Female	Married	Single	Unknown	Automatic	Non-Automatic	Individual	Group	Adjustment	Adjustment
<50	1.02	1.04	0.99	1.02	1.01	1.02	1.00	1.00	1.03	1.00	1.00
50	1.02	1.04	0.99	1.02	1.01	1.02	1.00	1.00	1.03	1.00	1.00
51	1.02	1.04	0.99	1.02	1.01	1.02	1.00	1.00	1.03	1.00	1.00
52	1.02	1.04	0.99	1.02	1.01	1.02	1.00	1.00	1.03	1.00	1.00
53	1.02	1.04	0.99	1.02	1.01	1.02	1.00	1.00	1.03	1.00	1.00
54	1.02	1.04	0.99	1.02	1.01	1.02	1.00	1.00	1.03	1.00	1.00
55	1.02	1.04	0.99	1.02	1.01	1.02	1.00	1.00	1.03	1.00	1.00
56	1.02	1.04	0.99	1.02	1.01	1.02	1.00	1.00	1.03	1.00	1.00
57	1.02	1.05	0.98	1.03	1.02	1.03	1.00	1.00	1.05	1.00	1.00
58	1.02	1.07	0.97	1.03	1.03	1.03	1.00	1.00	1.07	1.00	1.00
59	1.02	1.08	0.96	1.04	1.03	1.03	1.00	1.00	1.08	1.00	1.00
60	0.98	1.03	0.96	1.03	1.02	1.00	1.01	1.00	1.05	1.00	1.00
61	0.97	1.02	0.94	1.04	1.02	0.98	1.02	1.00	1.05	1.00	1.00
62	0.98	1.02	0.94	1.04	1.01	0.97	1.03	1.00	1.05	1.00	1.00
63	0.97	1.00	0.94	1.05	1.01	0.96	1.03	1.00	1.05	1.00	1.00
64	0.95	0.99	0.93	1.05	1.01	0.95	1.03	1.00	1.06	1.00	1.00
65	0.95	0.99	0.92	1.06	1.00	0.95	1.03	1.00	1.07	1.00	1.00
66	0.96	1.01	0.91	1.07	1.01	0.97	1.02	1.00	1.08	1.00	1.00
67	0.95	0.99	0.91	1.07	1.02	0.97	1.01	1.00	1.07	1.00	1.00
68	0.97	1.00	0.91	1.07	1.02	0.98	1.01	1.00	1.05	1.00	1.00
69	1.00	1.01	0.92	1.07	1.02	0.99	1.02	1.00	1.03	1.00	1.00
70	1.01	1.02	0.93	1.08	1.01	0.99	1.02	1.00	1.02	1.00	1.00
71	1.02	1.01	0.93	1.08	1.00	0.97	1.03	1.00	1.01	1.00	1.00
72	1.04	1.01	0.94	1.09	0.99	0.97	1.05	1.00	1.03	1.00	1.00
73	1.05	1.02	0.95	1.09	0.99	0.98	1.05	1.00	1.03	1.00	1.00
74	1.04	1.03	0.95	1.09	0.99	0.97	1.05	1.00	1.03	1.00	1.00
75	1.05	1.05	0.96	1.08	0.99	0.96	1.07	1.00	1.04	1.00	1.00
76	1.06	1.06	0.97	1.07	1.00	0.97	1.07	1.00	1.03	1.00	1.02
77	1.07	1.10	0.99	1.06	1.00	0.98	1.07	1.00	1.01	1.00	1.03
78	1.05	1.11	1.00	1.05	1.01	0.97	1.08	1.00	1.00	1.00	1.05
79	1.04	1.09	0.98	1.05	1.01	0.97	1.08	1.00	0.98	1.00	1.06
80	1.04	1.07	0.98	1.04	1.02	0.98	1.06	1.00	0.98	1.00	1.08
81	1.04	1.06	0.98	1.03	1.02	0.97	1.07	1.00	0.98	1.00	1.09
82	1.02	1.00	0.97	1.02	1.02	0.94	1.07	1.00	0.99	1.00	1.11
83	1.00	0.96	0.97	1.01	1.02	0.93	1.05	1.00	1.00	1.00	1.12
84	0.96	0.93	0.99	1.00	1.01	0.92	1.04	1.00	1.00	1.00	1.14
85	0.96	0.94	1.00	1.00	1.00	0.92	1.05	1.00	1.00	1.00	1.15
86	0.92	0.92	1.00	1.00	1.00	0.93	1.02	1.00	1.00	1.00	1.16
87	0.89	0.93	1.00	1.00	1.00	0.94	1.00	1.00	0.99	1.00	1.17
88	0.89	0.96	1.00	1.00	1.00	0.95	1.00	1.00	0.99	1.00	1.18
89	0.93	0.98	1.00	1.00	1.00	0.97	1.00	1.00	0.99	1.00	1.19
90	0.93	0.98	1.00	1.00	1.00	0.98	0.99	1.00	1.00	1.00	1.20
91	0.96	0.99	1.00	1.00	1.00	0.98	1.01	1.00	1.01	1.00	1.20
92	1.00	1.01	1.00	1.00	1.00	0.98	1.02	1.00	1.01	1.00	1.20
93	1.01	1.03	1.00	1.00	1.00	1.00	1.02	1.00	1.01	1.00	1.20
94	1.00	1.02	1.00	1.00	1.00	1.00	1.01	1.00	1.01	1.00	1.20
95	1.01	1.02	1.00	1.00	1.00	1.00	1.01	1.00	1.00	1.00	1.20
96	1.01	1.03	1.00	1.00	1.00	1.00	1.01	1.00	1.00	1.00	1.20
97	1.00	1.02	1.00	1.00	1.00	1.00	1.00	1.00	1.00	1.00	1.20
98+	0.99	1.01	1.00	1.00	1.00	1.00	1.00	1.00	1.00	1.00	1.20

[1] Attained age adjustments are applicable to policy durations 7+.

	Issue Era Factors	
Duration	New	Old
1	0.88	1.00
2	0.80	1.00
3	0.74	1.00
4	0.71	1.00
5	0.68	1.00
6	0.74	1.00
7	0.79	1.00
8	0.83	1.00
9	0.86	1.00
10	0.87	1.00
11	0.91	1.00
12	0.94	1.00
13	0.96	1.00
14	0.98	1.00
15	1.00	1.02
16	1.00	1.02
17	1.00	1.05
18	1.00	1.05
19	1.00	1.05
20+	1.00	1.04

Exhibit A-3b
Actual-to-Expected Active Mortality Experience 2008-2017
Policy Durations 7+
All Products

Product or Insured Characteristic	Policy Year Exposure [A]	Actual Deaths [B]	Actual-to-Expected Active Mortality Probability		
			Unadjusted [C]	Modeled [D]	Expected[1] [E]
Gender					
Female	411,099	4,242	1.02	1.01	0.93
Male	276,961	4,505	0.96	0.99	0.91
Group or Individual					
Group	190,276	1,405	1.05	1.07	1.02
Individual	497,783	7,342	0.98	0.99	0.90
Marital Status					
Married	353,202	3,635	0.92	0.97	0.90
Single	199,058	2,673	1.04	1.03	0.94
Unknown	135,800	2,439	1.05	1.02	0.92
Inflation Option					
Automatic	423,615	3,879	0.94	0.99	0.93
Non-Automatic	264,444	4,868	1.03	1.02	0.91
Issue Era					
New	492,162	4,261	0.94	0.99	0.93
Old	195,898	4,486	1.04	1.02	0.91
Cohort[2]					
Cash	124,287	380	0.59	0.73	0.72
Estate Planning	47,846	1,002	1.31	1.21	1.12
Other	515,927	7,365	0.99	1.00	0.91
Policy Duration					
<10	187,472	933	0.80	0.95	0.92
10-14	279,087	2,845	0.96	0.99	0.93
15-19	145,378	2,869	1.06	1.02	0.92
20-24	61,852	1,645	1.05	1.03	0.91
25+	14,271	455	1.02	1.00	0.87
Attained Age					
<65	243,457	575	0.94	1.04	1.04
65-69	110,357	553	0.85	0.99	0.99
70-74	109,425	953	0.96	1.00	1.00
75-79	100,692	1,680	1.08	1.01	0.97
80-84	75,504	2,142	1.02	1.00	0.90
85-89	37,391	1,780	0.94	1.00	0.86
90+	11,233	1,064	1.02	1.00	0.84
Total	688,060	8,747	0.99	1.00	0.92

[1] Expected = current assumption reflecting all experience adjustments.

[2] The Prior to Series 11, Series 11 Group, and Series 11 Individual policy experience is included in the Other cohort.

Exhibit A-4
Actual-to-Expected Composite[1] Termination Experience 2008-2017
Lifetime-Pay for Policy Durations 10+
All Products

Product or Insured Characteristic	Policy Year Exposure [A]	Actual Terminations [B]	Actual-to-Expected Termination Probability[1] [C]
Gender			
Female	258,053	5,764	1.03
Male	168,707	5,117	0.99
Marital Status			
Married	196,481	4,386	0.98
Single	115,368	3,468	1.06
Unknown	114,911	3,027	1.00
Benefit Period and Inflation Option			
Lifetime and Automatic	87,655	1,353	0.97
Lifetime and Non-Automatic	29,858	800	0.96
Non-Lifetime and Automatic	186,434	3,743	0.98
Non-Lifetime and Non-Automatic	122,813	4,985	1.05
Group or Individual			
Group	122,665	1,886	0.96
Individual	304,094	8,995	1.02
Issue Era			
New	255,267	5,346	1.02
Old	171,492	5,535	0.99
Cohort[2]			
Prior to Series 11	60,642	2,236	0.98
Series 11 Group	25,158	457	1.03
Series 11 Individual	70,898	1,424	0.94
Policy Duration			
10-14	229,534	4,872	1.07
15-19	127,164	3,460	0.95
20-24	56,598	1,971	0.98
25+	13,463	578	0.97
Attained Age			
<65	104,520	1,261	1.14
65-69	62,429	707	0.97
70-74	72,502	1,142	1.00
75-79	79,799	1,983	1.01
80-84	64,626	2,530	1.00
85-59	33,073	2,075	0.98
90+	9,810	1,183	0.98
Total	426,759	10,881	1.01

[1] Combination of active mortality and voluntary lapse.

[2] Cohort characteristic captures the experience of Prior to Series 11, Series 11 Group, and Series 11 Individual policies only, while other characteristics capture the pooled experience of products of MedAmerica, its affinity partners, and MedAmerica's acquired blocks of business.

Exhibit A-5
Actual-to-Expected Disabled Mortality Experience 2008-2017
Claim Months 4+
All Products

Product or Insured Characteristic	ALF				HHC				SNF				Total			
		Actual	Actual-to-Expected (A:E)			Actual	A:E			Actual	A:E			Actual	A:E	
	Exposure [A]	Deaths [B]	2017 *Guidelines* [C]	Expected[1] [D]	Exposure [A]	Deaths [B]	2017 *Guidelines* [C]	Expected[1] [D]	Exposure [A]	Deaths [B]	2017 *Guidelines* [C]	Expected[1] [D]	Exposure [A]	Deaths [B]	2017 *Guidelines* [C]	Expected[1] [D]
Gender																
Female	50,620	876	1.04	1.01	63,901	1,146	1.08	1.01	50,843	1,232	1.04	1.01	165,364	3,254	1.05	1.01
Male	16,217	420	0.92	0.95	32,322	892	1.06	1.02	24,143	901	1.01	1.00	72,683	2,213	1.01	1.00
Benefit Period																
Lifetime	20,053	343	1.06	0.99	26,472	461	1.05	0.99	18,424	478	1.14	1.04	64,949	1,282	1.09	1.01
Non-Lifetime	46,784	953	0.98	0.99	69,751	1,577	1.08	1.02	56,562	1,655	1.00	0.99	173,098	4,185	1.02	1.00
Group or Individual																
Group	8,437	137	0.81	0.89	17,129	286	0.91	0.97	9,711	249	0.95	1.04	35,277	672	0.90	0.98
Individual	58,400	1,159	1.03	1.00	79,095	1,752	1.11	1.02	65,276	1,884	1.04	1.00	202,771	4,795	1.06	1.01
Claim Year																
1	17,927	323	0.89	0.92	22,160	586	1.06	1.00	23,080	844	1.05	1.02	63,167	1,753	1.02	0.99
2	18,806	337	1.02	1.00	25,803	516	1.13	1.05	22,254	577	1.04	1.02	66,863	1,430	1.06	1.03
3	12,888	262	1.06	1.03	18,367	347	1.04	0.98	13,789	336	0.98	0.97	45,044	945	1.02	0.99
4	7,486	164	1.07	1.04	11,615	242	1.12	1.06	7,446	176	0.97	0.96	26,548	582	1.06	1.02
5	4,353	85	0.91	0.91	6,857	131	1.00	0.97	3,883	87	0.93	0.94	15,093	303	0.95	0.94
6+	5,377	125	1.13	1.05	11,421	216	1.03	0.98	4,534	113	1.14	1.04	21,332	454	1.08	1.01
Incurred Age																
<65	1,017	12	0.71	0.88	9,617	116	0.68	0.81	1,625	30	0.76	0.93	12,260	158	0.70	0.84
65-69	1,893	30	0.94	1.02	5,627	116	1.10	1.06	1,815	36	0.78	0.83	9,335	182	0.99	1.00
70-74	4,072	54	0.76	0.77	8,289	174	1.18	1.09	4,931	124	1.03	1.02	17,292	352	1.04	1.00
75-79	10,609	185	0.99	0.98	16,711	367	1.19	1.08	12,250	275	0.91	0.90	39,570	827	1.04	0.99
80-84	19,375	369	1.05	1.02	23,311	493	1.11	1.02	20,328	566	1.08	1.02	63,014	1,428	1.08	1.02
85-89	19,794	402	1.04	1.02	20,999	443	1.02	0.95	20,269	635	1.12	1.07	61,062	1,480	1.07	1.02
90+	10,078	244	0.95	0.97	11,670	329	1.13	1.06	13,768	467	0.98	0.98	35,516	1,040	1.02	1.00
Total	66,838	1,296	1.00	0.99	96,223	2,038	1.07	1.01	74,986	2,133	1.03	1.00	238,047	5,467	1.04	1.00

[1] Expected = current assumption reflecting all experience adjustments.

Exhibit A-6
Actual-to-Expected Disabled Recovery Experience 2008-2017
Claim Months 4+
All Products

Product or Insured Characteristic	ALF				HHC				SNF				Total			
		Actual	Actual-to-Expected (A:E)			Actual	A:E			Actual	A:E			Actual	A:E	
	Exposure [A]	Recoveries [B]	2017 *Guidelines*[1] [C]	Expected[2] [D]	Exposure [A]	Recoveries [B]	2017 *Guidelines*[1] [C]	Expected[2] [D]	Exposure [A]	Recoveries [B]	2017 *Guidelines*[1] [C]	Expected[2] [D]	Exposure [A]	Recoveries [B]	2017 *Guidelines*[1] [C]	Expected[2] [D]
Gender																
Female	50,620	84	0.83	1.36	63,901	303	0.67	0.89	50,843	176	0.78	1.01	165,364	563	0.72	0.98
Male	16,217	30	0.60	0.65	32,322	120	0.64	1.01	24,143	96	0.79	1.03	72,683	246	0.68	0.95
Benefit Period																
Lifetime	20,053	21	0.59	1.06	26,472	99	0.77	1.01	18,424	44	0.66	1.02	64,949	164	0.71	1.02
Non-Lifetime	46,784	93	0.81	1.06	69,751	324	0.64	0.90	56,562	228	0.81	1.01	173,098	645	0.71	0.96
Group or Individual																
Group	8,437	13	0.70	1.09	17,129	38	0.36	0.63	9,711	37	0.83	1.18	35,277	88	0.52	0.85
Individual	58,400	101	0.76	1.05	79,095	385	0.73	0.97	65,276	235	0.77	0.99	202,771	721	0.75	0.99
Claim Year																
1	17,927	79	1.77	1.49	22,160	255	0.83	0.92	23,080	194	1.28	1.11	63,167	528	1.05	1.04
2	18,806	24	0.58	0.83	25,803	89	0.53	0.80	22,254	56	0.56	0.93	66,863	169	0.55	0.84
3	12,888	5	0.17	0.37	18,367	49	0.64	1.27	13,789	13	0.26	0.66	45,044	67	0.43	0.93
4	7,486	3	0.16	0.44	11,615	16	0.36	0.99	7,446	3	0.11	0.37	26,548	22	0.24	0.71
5	4,353	3	0.35	0.94	6,857	7	0.35	1.07	3,883	1	0.10	0.38	15,093	11	0.29	0.89
6+	5,377	0	0.00	0.00	11,421	7	0.32	0.94	4,534	5	0.51	2.55	21,332	12	0.29	1.04
Incurred Age																
<65	1,017	2	0.95	1.11	9,617	63	0.95	0.96	1,625	14	1.77	1.77	12,260	79	1.04	1.05
65-69	1,893	5	1.11	1.61	5,627	37	0.76	1.00	1,815	11	1.19	1.40	9,335	53	0.85	1.11
70-74	4,072	10	1.07	1.32	8,289	41	0.63	0.87	4,931	30	1.26	1.53	17,292	81	0.83	1.09
75-79	10,609	12	0.51	0.76	16,711	66	0.57	0.82	12,250	45	0.73	0.91	39,570	123	0.61	0.85
80-84	19,375	31	0.71	1.09	23,311	97	0.66	0.98	20,328	77	0.70	0.92	63,014	205	0.68	0.97
85-89	19,794	39	0.89	1.25	20,999	77	0.67	1.01	20,269	62	0.65	0.85	61,062	178	0.70	0.98
90+	10,078	15	0.63	0.75	11,670	42	0.53	0.79	13,768	33	0.82	1.22	35,516	90	0.62	0.90
Total	66,838	114	0.76	1.06	96,223	423	0.66	0.92	74,986	272	0.78	1.01	238,047	809	0.71	0.97

[1] The 2017 *Guidelines* is included for illustrative purposes only as this expected basis was not directly used in developing the implied recovery assumption.

[2] Expected = current assumption reflecting all experience adjustments.

Exhibit A-7
Actual-to-Expected Composite Claim Termination Experience 2008-2017
Claim Months 4+
All Products

Product or Insured Characteristic	ALF				HHC				SNF				Total			
		Claim	Actual-to-Expected (A:E)			Claim	A:E			Claim	A:E			Claim	A:E	
	Exposure [A]	Terminations [B]	2017 *Guidelines* [C]	Expected[1] [D]	Exposure [A]	Terminations [B]	2017 *Guidelines* [C]	Expected[1] [D]	Exposure [A]	Terminations [B]	2017 *Guidelines* [C]	Expected[1] [D]	Exposure [A]	Terminations [B]	2017 *Guidelines* [C]	Expected[1] [D]
Gender																
Female	50,620	960	1.02	1.03	63,901	1,449	0.95	0.98	50,843	1,408	1.00	1.01	165,364	3,817	0.98	1.00
Male	16,217	450	0.88	0.92	32,322	1,012	0.98	1.02	24,143	997	0.98	1.00	72,683	2,459	0.96	0.99
Benefit Period																
Lifetime	20,053	364	1.01	0.99	26,472	560	0.99	0.99	18,424	522	1.07	1.04	64,949	1,446	1.02	1.01
Non-Lifetime	46,784	1,046	0.96	0.99	69,751	1,901	0.96	1.00	56,562	1,883	0.97	0.99	173,098	4,830	0.96	1.00
Group or Individual																
Group	8,437	150	0.80	0.90	17,129	324	0.76	0.92	9,711	286	0.93	1.05	35,277	760	0.82	0.96
Individual	58,400	1,260	1.00	1.00	79,095	2,137	1.00	1.01	65,276	2,119	1.00	1.00	202,771	5,516	1.00	1.00
Claim Year																
1	17,927	402	0.99	0.99	22,160	841	0.97	0.98	23,080	1,038	1.08	1.03	63,167	2,281	1.02	1.00
2	18,806	361	0.97	0.99	25,803	605	0.96	1.01	22,254	633	0.96	1.01	66,863	1,599	0.96	1.01
3	12,888	267	0.96	1.00	18,367	396	0.96	1.02	13,789	349	0.89	0.96	45,044	1,012	0.94	0.99
4	7,486	167	0.97	1.02	11,615	258	0.99	1.05	7,446	179	0.86	0.93	26,548	604	0.94	1.01
5	4,353	88	0.86	0.91	6,857	138	0.91	0.98	3,883	88	0.85	0.93	15,093	314	0.88	0.95
6+	5,377	125	1.04	1.02	11,421	223	0.96	0.97	4,534	118	1.08	1.06	21,332	466	1.01	1.00
Incurred Age																
<65	1,017	14	0.74	0.91	9,617	179	0.75	0.86	1,625	44	0.92	1.09	12,260	237	0.78	0.90
65-69	1,893	35	0.96	1.08	5,627	153	0.99	1.05	1,815	47	0.84	0.92	9,335	235	0.95	1.03
70-74	4,072	64	0.79	0.82	8,289	215	1.01	1.05	4,931	154	1.06	1.09	17,292	433	0.98	1.02
75-79	10,609	197	0.93	0.96	16,711	433	1.02	1.04	12,250	320	0.87	0.90	39,570	950	0.95	0.97
80-84	19,375	400	1.01	1.02	23,311	590	0.99	1.01	20,328	643	1.01	1.01	63,014	1,633	1.00	1.01
85-89	19,794	441	1.03	1.03	20,999	520	0.94	0.96	20,269	697	1.05	1.04	61,062	1,658	1.01	1.01
90+	10,078	259	0.92	0.95	11,670	371	0.99	1.02	13,768	500	0.97	0.99	35,516	1,130	0.97	0.99
Total	66,838	1,410	0.97	0.99	96,223	2,461	0.96	1.00	74,986	2,405	0.99	1.00	238,047	6,276	0.97	1.00

[1] Expected = current assumption reflecting all experience adjustments.

Exhibit A-8a
Claim Duration Utilization Adjustment Factors
All Products

Claim	Incurred Age									Group or Individual					
	<75			75-84			85+			Group			Individual		
Duration	ALF	HHC	SNF	ALF	HHC	SNF	ALF	HHC	SNF	ALF	HHC	SNF	ALF	HHC	SNF
1	1.00	1.00	1.00	1.00	1.00	0.99	1.00	1.00	1.00	1.00	0.99	0.99	1.00	1.00	1.00
2	0.99	0.99	0.99	0.99	0.99	0.99	1.01	1.01	1.00	1.00	0.98	0.99	1.00	1.00	0.99
3	0.99	0.98	0.98	0.99	0.98	0.99	1.01	1.01	1.00	0.99	0.97	0.98	0.99	1.00	0.99
4	0.98	0.96	0.97	0.99	0.98	0.98	1.02	1.02	1.00	0.99	0.96	0.96	0.99	1.00	0.99
5	0.97	0.95	0.96	0.99	0.97	0.98	1.02	1.03	1.00	0.99	0.95	0.95	0.99	1.00	0.98
6	0.97	0.93	0.95	0.98	0.97	0.97	1.03	1.04	1.00	0.99	0.94	0.94	0.99	1.00	0.98
7	0.96	0.92	0.95	0.99	0.97	0.98	1.03	1.06	1.00	0.98	0.94	0.94	0.99	1.00	0.98
8	0.96	0.91	0.95	0.99	0.97	0.98	1.03	1.07	1.00	0.98	0.94	0.94	1.00	1.01	0.98
9	0.96	0.90	0.95	0.99	0.97	0.98	1.03	1.08	0.99	0.98	0.94	0.94	1.00	1.01	0.98
10	0.96	0.90	0.95	0.99	0.98	0.98	1.03	1.08	0.99	0.98	0.94	0.94	1.00	1.02	0.97
11	0.97	0.91	0.95	0.99	0.99	0.97	1.03	1.08	0.99	0.98	0.94	0.95	1.00	1.03	0.97
12	0.97	0.91	0.95	0.99	0.99	0.97	1.03	1.08	0.99	0.98	0.94	0.95	1.00	1.04	0.97
13	0.97	0.92	0.95	0.99	1.00	0.98	1.03	1.07	0.99	0.99	0.94	0.95	1.00	1.05	0.97
14	0.97	0.92	0.95	0.99	1.00	0.98	1.03	1.07	0.99	0.99	0.93	0.95	1.00	1.06	0.97
15	0.97	0.93	0.95	0.99	1.00	0.98	1.03	1.07	0.99	0.99	0.93	0.95	1.01	1.07	0.97
16	0.97	0.93	0.95	1.00	1.01	0.98	1.03	1.07	0.99	0.99	0.94	0.95	1.01	1.07	0.98
17	0.97	0.93	0.95	1.00	1.01	0.97	1.03	1.07	0.99	0.99	0.94	0.94	1.01	1.07	0.98
18	0.97	0.94	0.96	1.00	1.01	0.97	1.03	1.07	0.99	0.98	0.94	0.94	1.01	1.07	0.98
19	0.97	0.94	0.96	1.00	1.01	0.97	1.03	1.07	0.99	0.98	0.95	0.94	1.02	1.07	0.98
20	0.97	0.95	0.96	1.01	1.01	0.97	1.03	1.07	0.99	0.98	0.96	0.94	1.02	1.07	0.98
21	0.97	0.96	0.96	1.01	1.01	0.96	1.03	1.07	1.00	0.98	0.96	0.94	1.02	1.07	0.99
22	0.97	0.96	0.96	1.00	1.01	0.96	1.03	1.06	1.00	0.98	0.97	0.93	1.02	1.07	0.99
23	0.97	0.97	0.96	1.00	1.01	0.96	1.03	1.06	1.00	0.98	0.98	0.93	1.02	1.07	0.99
24	0.97	0.98	0.95	1.00	1.01	0.97	1.03	1.06	1.00	0.98	0.98	0.92	1.02	1.06	1.00
25	0.97	0.99	0.95	1.00	1.01	0.97	1.03	1.05	1.00	0.98	0.98	0.92	1.03	1.06	1.00
26	0.98	0.99	0.94	1.00	1.00	0.97	1.03	1.05	1.01	0.98	0.98	0.92	1.03	1.06	1.00
27	0.98	0.99	0.94	1.00	1.00	0.97	1.03	1.05	1.01	0.98	0.98	0.92	1.03	1.07	1.00
28	0.98	0.99	0.94	1.00	1.01	0.97	1.03	1.05	1.01	0.99	0.99	0.92	1.03	1.07	1.00
29	0.98	0.99	0.94	1.00	1.01	0.96	1.03	1.05	1.02	0.99	0.98	0.92	1.03	1.08	1.00
30	0.99	1.00	0.94	1.00	1.02	0.96	1.03	1.05	1.02	0.99	0.98	0.92	1.03	1.08	0.99
31	0.99	1.00	0.94	1.00	1.02	0.96	1.03	1.05	1.03	0.99	0.98	0.92	1.03	1.08	1.00
32	0.98	1.00	0.94	1.00	1.02	0.96	1.03	1.05	1.03	0.99	0.99	0.92	1.03	1.09	1.00
33	0.98	1.00	0.94	1.01	1.03	0.95	1.03	1.04	1.04	0.99	0.99	0.92	1.03	1.09	1.00
34	0.98	1.00	0.93	1.01	1.03	0.95	1.03	1.04	1.04	0.99	0.99	0.92	1.03	1.09	1.00
35	0.98	1.00	0.93	1.01	1.04	0.95	1.04	1.04	1.04	0.99	0.98	0.92	1.03	1.09	1.00
36	0.98	0.99	0.93	1.00	1.04	0.95	1.04	1.04	1.04	0.99	0.98	0.92	1.03	1.10	1.00
37	0.99	0.99	0.93	1.00	1.05	0.95	1.04	1.04	1.04	0.99	0.98	0.92	1.03	1.10	1.00
38	0.99	0.99	0.93	1.00	1.05	0.95	1.04	1.04	1.04	1.00	0.97	0.92	1.03	1.10	1.00
39	0.99	0.99	0.93	0.99	1.05	0.95	1.04	1.04	1.03	1.00	0.97	0.92	1.03	1.11	1.00
40	1.00	0.98	0.93	0.99	1.05	0.95	1.04	1.04	1.03	1.00	0.97	0.91	1.03	1.11	1.00
41	1.00	0.98	0.94	0.99	1.05	0.95	1.04	1.04	1.02	1.00	0.97	0.92	1.03	1.11	1.00
42	1.00	0.98	0.95	0.99	1.05	0.95	1.03	1.04	1.02	0.99	0.97	0.92	1.03	1.12	1.00
43	1.00	0.98	0.95	0.99	1.05	0.95	1.03	1.04	1.02	0.99	0.96	0.92	1.03	1.12	1.00
44	1.00	0.98	0.96	0.99	1.06	0.95	1.03	1.05	1.02	0.99	0.96	0.92	1.04	1.13	1.00
45	1.00	0.98	0.96	0.99	1.06	0.94	1.03	1.05	1.02	0.99	0.96	0.92	1.04	1.13	1.00
46	1.01	0.98	0.96	0.99	1.06	0.94	1.03	1.05	1.02	0.98	0.96	0.93	1.04	1.14	1.00
47	1.01	0.98	0.96	0.99	1.05	0.95	1.03	1.06	1.02	0.98	0.96	0.93	1.04	1.14	1.00
48	1.01	0.97	0.96	0.98	1.05	0.95	1.03	1.07	1.01	0.98	0.96	0.93	1.04	1.13	0.99
49	1.01	0.97	0.96	0.98	1.04	0.95	1.03	1.07	1.01	0.98	0.96	0.93	1.04	1.13	0.98
50	1.01	0.98	0.95	0.98	1.04	0.96	1.03	1.07	1.01	0.99	0.97	0.94	1.03	1.12	0.98
51	1.02	0.98	0.95	0.98	1.04	0.96	1.03	1.07	1.00	0.99	0.97	0.94	1.03	1.12	0.97
52	1.02	0.98	0.95	0.98	1.04	0.96	1.02	1.06	1.00	0.99	0.98	0.95	1.03	1.11	0.97
53	1.02	0.99	0.95	0.98	1.05	0.97	1.02	1.06	1.00	0.99	0.98	0.95	1.03	1.12	0.97
54	1.02	0.99	0.95	0.98	1.05	0.97	1.02	1.05	1.00	0.99	0.98	0.95	1.03	1.12	0.97
55	1.02	0.99	0.95	0.98	1.06	0.97	1.02	1.05	1.00	0.99	0.98	0.95	1.02	1.13	0.97
56	1.01	0.99	0.96	0.98	1.06	0.97	1.02	1.05	1.00	0.99	0.97	0.95	1.02	1.14	0.97
57	1.01	0.99	0.96	0.98	1.06	0.97	1.02	1.05	1.00	0.99	0.97	0.95	1.02	1.14	0.97
58	1.01	0.99	0.97	0.98	1.06	0.97	1.02	1.05	0.99	0.99	0.96	0.95	1.02	1.14	0.98
59	1.01	0.99	0.97	0.98	1.05	0.96	1.02	1.05	0.99	0.99	0.96	0.95	1.02	1.14	0.98
60	1.01	0.99	0.97	0.98	1.05	0.96	1.02	1.05	0.99	0.99	0.96	0.96	1.02	1.13	0.97
61	1.01	1.00	0.98	0.98	1.05	0.96	1.02	1.04	0.99	0.99	0.97	0.96	1.02	1.13	0.97
62	1.00	1.00	0.98	0.99	1.05	0.96	1.02	1.04	0.99	0.98	0.97	0.96	1.02	1.12	0.97
63	1.00	1.00	0.98	0.99	1.05	0.95	1.02	1.04	0.99	0.98	0.97	0.96	1.02	1.12	0.96
64	1.00	1.00	0.99	0.99	1.05	0.95	1.02	1.03	0.99	0.98	0.97	0.96	1.03	1.11	0.96
65	1.00	1.00	0.99	0.99	1.05	0.95	1.02	1.03	0.99	0.98	0.98	0.97	1.03	1.11	0.96
66	0.99	1.00	0.99	0.99	1.05	0.95	1.01	1.04	0.99	0.97	0.98	0.97	1.03	1.11	0.95
67	0.99	1.00	0.99	0.99	1.04	0.94	1.01	1.04	0.99	0.97	0.98	0.97	1.02	1.11	0.95
68	0.99	1.00	0.98	1.00	1.04	0.95	1.01	1.04	0.99	0.97	0.98	0.97	1.02	1.10	0.95
69	0.99	0.99	0.98	1.00	1.04	0.95	1.01	1.04	0.99	0.98	0.98	0.97	1.02	1.10	0.94
70	0.99	0.99	0.98	1.00	1.04	0.95	1.00	1.04	0.99	0.98	0.98	0.97	1.02	1.10	0.94
71	0.99	0.99	0.98	1.01	1.05	0.95	1.00	1.04	0.99	0.97	0.98	0.98	1.02	1.10	0.94
72	0.99	0.99	0.97	1.01	1.05	0.95	1.00	1.04	0.99	0.97	0.98	0.97	1.02	1.10	0.94
73	0.98	0.99	0.97	1.01	1.05	0.95	1.00	1.03	0.99	0.97	0.98	0.97	1.02	1.09	0.94
74	0.98	1.00	0.97	1.01	1.05	0.95	1.00	1.03	0.99	0.97	0.98	0.97	1.02	1.09	0.94
75	0.98	1.00	0.97	1.01	1.05	0.95	1.00	1.03	0.99	0.97	0.99	0.97	1.02	1.09	0.95
76	0.98	1.01	0.97	1.01	1.05	0.95	1.00	1.02	1.00	0.97	0.99	0.96	1.02	1.09	0.95
77	0.98	1.01	0.97	1.00	1.05	0.95	1.00	1.02	1.00	0.97	1.00	0.96	1.01	1.08	0.96
78	0.98	1.01	0.97	1.00	1.04	0.96	1.01	1.02	1.00	0.97	1.00	0.95	1.01	1.08	0.97
79	0.98	1.01	0.96	1.00	1.04	0.96	1.01	1.02	1.00	0.97	1.00	0.95	1.01	1.07	0.97
80	0.98	1.01	0.96	1.00	1.03	0.96	1.01	1.02	1.00	0.97	1.00	0.95	1.01	1.07	0.98
81	0.98	1.01	0.96	1.00	1.03	0.96	1.00	1.02	1.00	0.97	1.00	0.94	1.01	1.06	0.98
82	0.98	1.01	0.96	1.00	1.03	0.96	1.00	1.02	1.00	0.97	0.99	0.94	1.01	1.07	0.98
83	0.98	1.02	0.95	1.00	1.02	0.97	1.00	1.02	1.00	0.97	1.00	0.94	1.01	1.06	0.98
84	0.98	1.02	0.95	1.00	1.02	0.97	1.00	1.02	1.00	0.97	1.00	0.94	1.01	1.07	0.98
85	0.98	1.02	0.95	1.00	1.02	0.97	1.00	1.02	1.00	0.98	1.00	0.94	1.00	1.06	0.98
86	0.98	1.02	0.95	1.00	1.02	0.97	1.00	1.02	1.00	0.98	1.00	0.94	1.00	1.06	0.98
87	0.98	1.02	0.95	1.00	1.02	0.98	1.00	1.02	1.00	0.98	1.00	0.94	1.01	1.06	0.98
88	0.98	1.02	0.95	1.00	1.02	0.98	1.00	1.02	1.00	0.98	1.00	0.95	1.01	1.06	0.99
89	0.98	1.02	0.95	1.00	1.02	0.99	1.00	1.01	1.00	0.98	1.00	0.95	1.01	1.05	0.99
90	0.98	1.01	0.95	1.01	1.02	0.99	1.00	1.01	1.00	0.98	1.00	0.95	1.01	1.05	0.99
91	0.98	1.01	0.95	1.01	1.03	0.99	1.01	1.01	1.00	0.98	1.00	0.95	1.01	1.04	1.00
92	0.98	1.01	0.96	1.01	1.02	0.99	1.00	1.01	1.00	0.98	1.00	0.96	1.01	1.04	1.00
93	0.98	1.00	0.97	1.01	1.02	1.00	1.00	1.00	1.00	0.99	1.00	0.97	1.01	1.03	1.00
94	0.99	1.00	0.98	1.00	1.02	1.00	1.00	1.00	1.00	0.99	1.00	0.97	1.01	1.02	1.00
95	0.99	1.00	0.98	1.00	1.01	1.00	1.00	1.00	1.00	0.99	1.00	0.98	1.00	1.01	1.00
96+	1.00	1.00	0.99	1.00	1.01	1.00	1.00	1.00	1.00	1.00	1.00	0.99	1.00	1.01	1.00

Exhibit A-8a
Claim Duration Utilization Adjustment Factors
All Products

Claim	Inflation Option									Benefit Period					
	Non-Automatic			Limited Automatic Inflation[1]			Automatic Inflation (For Life)			Non-Lifetime			Lifetime		
Duration	ALF	HHC	SNF	ALF	HHC	SNF	ALF	HHC	SNF	ALF	HHC	SNF	ALF	HHC	SNF
1	1.01	1.01	1.00	1.00	0.99	1.00	0.99	0.99	0.99	0.99	0.99	0.99	1.00	1.00	1.00
2	1.01	1.02	1.01	1.00	0.98	0.99	0.98	0.98	0.97	0.99	0.98	0.98	1.00	1.00	1.00
3	1.02	1.04	1.02	0.99	0.96	0.99	0.97	0.97	0.96	0.98	0.97	0.97	1.00	1.00	1.00
4	1.03	1.05	1.03	0.99	0.95	0.99	0.96	0.96	0.93	0.98	0.96	0.95	1.01	1.00	1.00
5	1.04	1.06	1.03	0.99	0.94	0.99	0.95	0.95	0.92	0.97	0.96	0.94	1.01	0.99	1.00
6	1.05	1.08	1.04	0.99	0.93	1.00	0.94	0.94	0.90	0.97	0.95	0.93	1.01	0.99	1.00
7	1.05	1.07	1.04	0.99	0.93	1.00	0.94	0.94	0.89	0.97	0.95	0.93	1.01	0.98	1.00
8	1.05	1.07	1.04	0.99	0.94	1.01	0.94	0.94	0.88	0.97	0.96	0.92	1.01	0.98	1.00
9	1.05	1.06	1.03	0.99	0.95	1.01	0.94	0.94	0.88	0.97	0.97	0.92	1.01	0.98	0.99
10	1.05	1.05	1.03	0.99	0.96	1.01	0.94	0.95	0.88	0.98	0.98	0.93	1.01	0.98	0.99
11	1.05	1.05	1.03	0.99	0.98	1.01	0.94	0.95	0.88	0.98	0.98	0.93	1.01	0.99	0.99
12	1.05	1.04	1.03	0.99	0.99	1.01	0.94	0.95	0.89	0.98	0.98	0.92	1.00	0.99	1.00
13	1.05	1.05	1.03	0.99	0.99	1.00	0.94	0.94	0.89	0.98	0.98	0.92	1.00	1.00	1.00
14	1.05	1.05	1.03	0.99	1.00	1.00	0.95	0.94	0.89	0.99	0.98	0.92	1.00	1.00	1.00
15	1.05	1.05	1.03	1.00	1.00	1.00	0.95	0.95	0.89	0.99	0.99	0.92	1.00	1.01	1.00
16	1.05	1.05	1.04	0.99	1.00	1.00	0.95	0.95	0.89	0.99	0.99	0.92	1.00	1.01	1.01
17	1.05	1.06	1.04	0.99	1.00	1.00	0.96	0.95	0.89	0.99	0.99	0.92	1.01	1.02	1.01
18	1.05	1.05	1.04	0.99	1.00	1.01	0.96	0.96	0.89	0.99	1.00	0.92	1.00	1.02	1.01
19	1.04	1.05	1.03	0.99	1.01	1.01	0.96	0.96	0.88	0.99	1.00	0.92	1.00	1.02	1.01
20	1.04	1.04	1.03	0.99	1.02	1.01	0.97	0.97	0.88	0.99	1.01	0.92	1.00	1.02	1.01
21	1.04	1.04	1.03	0.98	1.02	1.01	0.98	0.97	0.88	0.99	1.01	0.92	1.01	1.02	1.01
22	1.03	1.03	1.03	0.98	1.03	1.01	0.98	0.98	0.88	0.99	1.01	0.91	1.01	1.02	1.01
23	1.03	1.03	1.03	0.98	1.03	1.02	0.99	0.98	0.88	0.99	1.02	0.91	1.01	1.02	1.01
24	1.03	1.02	1.03	0.99	1.04	1.02	0.99	0.99	0.88	1.00	1.02	0.91	1.01	1.02	1.01
25	1.02	1.02	1.03	0.99	1.04	1.02	1.00	0.99	0.88	1.00	1.02	0.91	1.01	1.02	1.01
26	1.02	1.03	1.02	0.99	1.04	1.02	1.00	0.99	0.87	1.00	1.03	0.91	1.02	1.02	1.01
27	1.02	1.03	1.02	1.00	1.04	1.03	1.00	0.98	0.87	1.00	1.03	0.90	1.02	1.02	1.01
28	1.02	1.03	1.02	1.00	1.04	1.03	1.01	0.98	0.87	1.00	1.03	0.90	1.02	1.02	1.01
29	1.02	1.03	1.03	1.00	1.05	1.03	1.01	0.98	0.87	0.99	1.03	0.91	1.02	1.03	1.01
30	1.02	1.03	1.03	1.00	1.06	1.03	1.01	0.97	0.87	0.99	1.03	0.91	1.03	1.03	1.01
31	1.02	1.03	1.03	0.99	1.07	1.03	1.01	0.97	0.87	0.99	1.02	0.91	1.03	1.04	1.01
32	1.02	1.03	1.03	0.99	1.08	1.02	1.01	0.96	0.88	0.99	1.02	0.92	1.03	1.05	1.01
33	1.02	1.03	1.03	0.99	1.09	1.02	1.01	0.96	0.88	1.00	1.01	0.92	1.03	1.06	1.00
34	1.02	1.02	1.03	1.00	1.09	1.02	1.01	0.96	0.89	1.00	1.01	0.92	1.02	1.06	1.00
35	1.01	1.03	1.02	1.00	1.09	1.02	1.01	0.96	0.89	1.00	1.01	0.92	1.02	1.06	1.00
36	1.01	1.03	1.02	1.00	1.08	1.02	1.01	0.97	0.89	1.00	1.01	0.92	1.02	1.06	1.01
37	1.01	1.03	1.01	1.00	1.08	1.02	1.02	0.97	0.89	1.00	1.02	0.91	1.02	1.06	1.01
38	1.01	1.03	1.01	1.00	1.07	1.02	1.02	0.97	0.89	1.00	1.02	0.91	1.02	1.05	1.01
39	1.01	1.03	1.01	1.00	1.07	1.02	1.02	0.98	0.89	1.00	1.02	0.90	1.02	1.05	1.01
40	1.01	1.03	1.00	1.00	1.06	1.02	1.02	0.98	0.89	1.00	1.02	0.90	1.02	1.05	1.01
41	1.01	1.03	1.00	1.00	1.06	1.02	1.01	0.99	0.89	1.00	1.02	0.90	1.02	1.05	1.01
42	1.01	1.03	1.00	1.00	1.05	1.02	1.02	1.00	0.89	1.00	1.02	0.90	1.02	1.06	1.01
43	1.01	1.02	1.00	1.00	1.05	1.02	1.02	1.01	0.90	1.00	1.02	0.91	1.02	1.06	1.01
44	1.01	1.02	1.00	1.00	1.05	1.02	1.02	1.01	0.90	1.01	1.02	0.91	1.02	1.06	1.01
45	1.01	1.02	1.00	1.00	1.05	1.02	1.02	1.02	0.90	1.01	1.03	0.91	1.02	1.06	1.01
46	1.01	1.02	1.00	1.00	1.04	1.02	1.02	1.02	0.91	1.01	1.03	0.92	1.02	1.06	1.01
47	1.00	1.02	1.00	1.00	1.04	1.02	1.02	1.02	0.91	1.01	1.03	0.92	1.02	1.06	1.01
48	1.00	1.03	1.00	1.00	1.04	1.02	1.02	1.02	0.91	1.01	1.02	0.92	1.02	1.06	1.00
49	1.00	1.03	1.00	1.00	1.03	1.02	1.01	1.02	0.91	1.00	1.02	0.92	1.02	1.06	1.00
50	1.00	1.03	1.00	1.01	1.03	1.02	1.01	1.02	0.91	1.00	1.02	0.92	1.02	1.07	1.00
51	1.00	1.03	1.00	1.01	1.03	1.02	1.01	1.03	0.90	1.00	1.01	0.92	1.02	1.07	1.00
52	1.00	1.03	0.99	1.01	1.02	1.03	1.01	1.03	0.90	0.99	1.01	0.92	1.02	1.08	0.99
53	1.00	1.03	1.00	1.01	1.02	1.03	1.01	1.04	0.89	0.99	1.01	0.92	1.03	1.09	0.99
54	1.01	1.03	1.00	1.00	1.03	1.03	1.00	1.04	0.89	0.99	1.01	0.93	1.03	1.09	0.99
55	1.01	1.03	1.00	1.00	1.03	1.03	1.00	1.04	0.89	0.98	1.00	0.93	1.03	1.10	0.99
56	1.01	1.03	1.00	1.00	1.03	1.04	1.00	1.04	0.89	0.98	1.00	0.93	1.03	1.10	0.99
57	1.01	1.03	1.00	1.00	1.03	1.04	1.00	1.04	0.89	0.98	1.00	0.93	1.03	1.10	0.99
58	1.01	1.03	1.00	1.00	1.04	1.04	1.00	1.03	0.90	0.98	1.00	0.93	1.03	1.10	1.00
59	1.01	1.03	1.00	1.00	1.04	1.04	1.00	1.03	0.90	0.98	1.00	0.93	1.03	1.10	1.00
60	1.01	1.03	1.00	1.00	1.04	1.04	1.00	1.02	0.90	0.98	0.99	0.92	1.03	1.10	1.01
61	1.01	1.02	0.99	1.00	1.05	1.04	1.00	1.02	0.90	0.98	0.99	0.92	1.03	1.10	1.01
62	1.01	1.02	0.99	1.00	1.05	1.04	1.00	1.02	0.90	0.98	0.99	0.92	1.03	1.10	1.01
63	1.01	1.02	0.99	1.00	1.05	1.04	1.00	1.01	0.91	0.97	0.98	0.91	1.03	1.10	1.02
64	1.01	1.02	0.99	1.00	1.05	1.03	1.00	1.01	0.91	0.97	0.98	0.91	1.03	1.10	1.02
65	1.00	1.03	0.99	1.00	1.05	1.03	1.00	1.01	0.91	0.97	0.98	0.91	1.03	1.10	1.02
66	1.00	1.03	0.99	1.00	1.05	1.03	1.00	1.00	0.91	0.97	0.98	0.91	1.03	1.10	1.02
67	1.00	1.03	0.99	1.00	1.05	1.03	1.00	1.00	0.91	0.97	0.98	0.90	1.03	1.10	1.02
68	1.00	1.03	0.98	1.01	1.05	1.02	1.00	0.99	0.91	0.97	0.98	0.90	1.03	1.10	1.02
69	1.00	1.03	0.98	1.01	1.05	1.02	1.00	0.99	0.91	0.97	0.98	0.90	1.03	1.10	1.02
70	0.99	1.03	0.98	1.01	1.05	1.02	1.00	0.99	0.91	0.96	0.97	0.90	1.03	1.10	1.02
71	0.99	1.03	0.99	1.01	1.05	1.02	1.00	0.99	0.91	0.96	0.97	0.90	1.04	1.10	1.02
72	0.99	1.03	0.99	1.01	1.04	1.02	1.00	1.00	0.91	0.96	0.97	0.90	1.04	1.10	1.02
73	0.99	1.03	0.99	1.01	1.04	1.02	1.00	1.00	0.91	0.96	0.98	0.89	1.04	1.10	1.03
74	0.99	1.03	0.99	1.01	1.04	1.02	0.99	1.01	0.91	0.95	0.98	0.89	1.04	1.10	1.03
75	0.99	1.03	0.99	1.01	1.04	1.02	0.99	1.01	0.91	0.95	0.98	0.89	1.04	1.10	1.03
76	0.99	1.04	0.99	1.01	1.03	1.02	0.99	1.01	0.91	0.95	0.98	0.89	1.04	1.10	1.03
77	0.99	1.04	0.99	1.01	1.03	1.02	0.99	1.00	0.91	0.95	0.97	0.89	1.04	1.10	1.03
78	0.99	1.04	0.99	1.01	1.04	1.02	0.98	1.00	0.91	0.95	0.97	0.89	1.04	1.10	1.03
79	0.99	1.04	0.99	1.01	1.04	1.02	0.98	0.99	0.91	0.95	0.97	0.89	1.04	1.11	1.03
80	0.99	1.04	0.99	1.01	1.04	1.02	0.98	0.99	0.91	0.95	0.96	0.89	1.03	1.11	1.03
81	0.99	1.03	0.99	1.01	1.04	1.02	0.98	0.99	0.92	0.95	0.96	0.90	1.03	1.11	1.03
82	0.99	1.03	0.99	1.01	1.04	1.02	0.98	0.99	0.92	0.95	0.95	0.90	1.03	1.11	1.03
83	0.99	1.03	0.99	1.01	1.04	1.01	0.97	0.99	0.92	0.95	0.96	0.90	1.03	1.11	1.03
84	0.99	1.04	0.99	1.01	1.04	1.01	0.97	0.99	0.92	0.95	0.96	0.90	1.03	1.11	1.03
85	0.99	1.04	0.99	1.01	1.04	1.01	0.98	0.99	0.92	0.95	0.96	0.90	1.03	1.11	1.02
86	0.99	1.04	1.00	1.01	1.04	1.01	0.98	0.99	0.92	0.95	0.96	0.91	1.03	1.11	1.02
87	0.99	1.04	1.00	1.01	1.03	1.01	0.98	0.99	0.93	0.96	0.95	0.91	1.03	1.11	1.02
88	0.99	1.04	1.00	1.01	1.03	1.01	0.98	0.99	0.93	0.96	0.95	0.92	1.03	1.11	1.01
89	0.99	1.04	1.00	1.01	1.03	1.01	0.99	0.99	0.93	0.96	0.95	0.93	1.03	1.11	1.01
90	0.99	1.04	1.00	1.01	1.02	1.01	0.99	0.98	0.94	0.96	0.95	0.93	1.02	1.11	1.01
91	0.99	1.04	1.00	1.00	1.02	1.01	0.99	0.98	0.94	0.97	0.94	0.94	1.02	1.11	1.01
92	0.99	1.03	1.00	1.00	1.02	1.00	0.99	0.99	0.95	0.97	0.95	0.95	1.02	1.09	1.01
93	1.00	1.03	1.00	1.00	1.01	1.00	0.99	0.99	0.96	0.98	0.96	0.96	1.01	1.07	1.00
94	1.00	1.02	1.00	1.00	1.01	1.00	1.00	0.99	0.97	0.98	0.97	0.97	1.01	1.05	1.00
95	1.00	1.01	1.00	1.00	1.01	1.00	1.00	0.99	0.98	0.99	0.98	0.98	1.01	1.04	1.00
96+	1.00	1.01	1.00	1.00	1.00	1.00	1.00	1.00	0.99	1.00	0.99	0.99	1.00	1.02	1.00

[1] Captures inflation options that are capped based on a set number of years or percentage of the original daily benefit (e.g., 20 years of 5% simple inflation).

Exhibit A-8a
Claim Duration Utilization Adjustment Factors
All Products

Claim	ALF Reimbursement									HHC Reimbursement								
	Home Care Only			1% - 60%			61% +			Facility Only			1% - 50%			51% +		
Duration	ALF	HHC	SNF	ALF	HHC	SNF	ALF	HHC	SNF	ALF	HHC	SNF	ALF	HHC	SNF	ALF	HHC	SNF
1	1.00	1.00	1.00	1.00	0.99	0.99	1.00	1.00	1.00	1.00	1.00	1.00	1.00	1.00	0.99	1.00	0.99	1.00
2	1.00	1.00	1.00	1.00	0.99	0.98	0.99	0.99	0.99	1.00	1.00	1.01	1.00	1.00	0.98	0.99	0.99	0.99
3	1.00	1.01	1.00	1.00	0.97	0.97	0.99	0.99	0.99	1.00	1.00	1.02	1.00	1.00	0.96	0.99	0.98	0.99
4	1.00	1.01	1.00	0.99	0.96	0.96	0.99	0.99	0.99	1.00	1.00	1.03	1.00	1.00	0.95	0.98	0.96	0.98
5	1.00	1.01	1.00	1.00	0.95	0.95	0.98	0.99	0.99	0.99	1.00	1.04	1.01	1.00	0.93	0.98	0.95	0.97
6	1.00	1.01	1.00	1.00	0.94	0.93	0.98	1.00	0.99	0.99	1.00	1.05	1.01	1.00	0.92	0.97	0.94	0.96
7	1.00	1.01	1.00	1.00	0.93	0.93	0.98	1.00	1.00	0.99	1.00	1.05	1.02	1.01	0.92	0.97	0.93	0.95
8	1.00	1.00	1.00	1.00	0.94	0.92	0.98	1.01	1.00	0.99	1.00	1.05	1.02	1.01	0.92	0.97	0.93	0.95
9	1.00	1.00	1.00	1.01	0.94	0.91	0.97	1.01	1.01	0.99	1.00	1.05	1.02	1.02	0.92	0.97	0.93	0.94
10	1.00	0.99	1.00	1.01	0.95	0.91	0.97	1.01	1.01	0.99	1.00	1.05	1.03	1.02	0.93	0.97	0.94	0.94
11	1.00	0.99	1.00	1.01	0.96	0.91	0.97	1.01	1.02	0.99	1.00	1.04	1.03	1.03	0.93	0.97	0.94	0.94
12	1.00	0.99	1.00	1.02	0.97	0.90	0.97	1.01	1.02	0.99	1.00	1.04	1.03	1.03	0.94	0.97	0.94	0.95
13	1.00	0.99	1.00	1.02	0.98	0.90	0.97	1.01	1.02	0.99	1.00	1.04	1.03	1.04	0.94	0.97	0.95	0.95
14	1.00	0.99	1.00	1.03	0.99	0.90	0.97	1.01	1.02	0.99	1.00	1.04	1.03	1.04	0.94	0.97	0.95	0.95
15	1.00	0.99	1.00	1.03	1.00	0.90	0.97	1.01	1.02	0.99	1.00	1.03	1.03	1.05	0.94	0.97	0.95	0.95
16	1.00	0.99	1.00	1.03	1.00	0.90	0.97	1.01	1.03	1.00	1.00	1.03	1.03	1.06	0.94	0.97	0.95	0.95
17	1.00	0.99	1.00	1.03	1.01	0.90	0.97	1.01	1.03	1.00	1.00	1.03	1.03	1.06	0.94	0.97	0.95	0.96
18	1.00	0.99	1.00	1.03	1.01	0.90	0.96	1.01	1.03	1.00	1.00	1.03	1.03	1.06	0.94	0.97	0.95	0.96
19	1.00	0.99	1.00	1.03	1.01	0.90	0.97	1.01	1.03	1.00	1.00	1.03	1.02	1.07	0.94	0.97	0.96	0.96
20	1.00	0.99	1.00	1.03	1.02	0.90	0.97	1.02	1.03	1.00	1.00	1.03	1.02	1.07	0.94	0.97	0.96	0.96
21	1.00	1.00	1.00	1.03	1.01	0.90	0.97	1.02	1.03	1.00	1.00	1.03	1.02	1.07	0.94	0.98	0.96	0.96
22	1.00	1.00	1.00	1.03	1.01	0.90	0.97	1.03	1.03	1.00	1.00	1.03	1.02	1.07	0.94	0.98	0.96	0.96
23	1.00	1.00	1.00	1.03	1.00	0.90	0.97	1.04	1.03	1.00	1.00	1.03	1.01	1.08	0.94	0.98	0.97	0.96
24	1.00	1.00	1.00	1.04	0.99	0.90	0.97	1.05	1.02	1.00	1.00	1.02	1.02	1.08	0.94	0.99	0.97	0.96
25	1.00	1.01	1.00	1.04	0.99	0.90	0.97	1.05	1.02	1.00	1.00	1.02	1.02	1.08	0.94	0.99	0.97	0.95
26	1.00	1.01	1.00	1.05	0.98	0.90	0.97	1.05	1.02	1.00	1.00	1.02	1.02	1.08	0.94	0.99	0.97	0.95
27	1.00	1.01	1.00	1.05	0.98	0.90	0.96	1.06	1.01	1.00	1.00	1.02	1.02	1.09	0.94	0.99	0.96	0.95
28	1.00	1.01	1.00	1.06	0.98	0.91	0.96	1.06	1.01	1.01	1.00	1.02	1.02	1.09	0.95	0.99	0.97	0.95
29	1.00	1.01	1.00	1.06	0.98	0.91	0.96	1.07	1.01	1.00	1.00	1.02	1.03	1.10	0.95	0.99	0.97	0.95
30	1.00	1.01	1.00	1.07	0.98	0.91	0.96	1.07	1.01	1.00	1.00	1.02	1.03	1.10	0.95	0.99	0.96	0.96
31	1.00	1.01	1.00	1.07	0.98	0.92	0.95	1.08	1.01	1.00	1.00	1.01	1.03	1.11	0.95	0.99	0.96	0.96
32	1.00	1.01	1.00	1.07	0.98	0.92	0.95	1.08	1.00	1.00	1.00	1.01	1.03	1.11	0.95	0.99	0.96	0.96
33	1.00	1.01	1.00	1.08	0.98	0.92	0.95	1.08	1.00	1.00	1.00	1.01	1.04	1.11	0.95	0.99	0.97	0.96
34	1.00	1.01	1.00	1.08	0.99	0.92	0.95	1.08	1.00	1.00	1.00	1.02	1.04	1.11	0.95	0.99	0.97	0.96
35	1.00	1.01	1.00	1.09	0.99	0.92	0.94	1.07	1.00	1.00	1.00	1.02	1.04	1.11	0.95	0.98	0.96	0.96
36	1.00	1.01	1.00	1.09	1.00	0.92	0.94	1.07	1.00	1.00	1.00	1.02	1.04	1.11	0.95	0.98	0.97	0.96
37	1.00	1.01	1.00	1.09	1.00	0.92	0.94	1.06	1.00	1.00	1.00	1.02	1.04	1.11	0.94	0.98	0.97	0.96
38	1.00	1.01	1.00	1.09	1.00	0.92	0.94	1.05	0.99	1.00	1.00	1.02	1.04	1.11	0.94	0.98	0.97	0.96
39	1.00	1.02	1.00	1.08	1.00	0.92	0.95	1.05	0.99	1.01	1.00	1.02	1.04	1.11	0.93	0.98	0.97	0.96
40	1.00	1.02	1.00	1.08	1.00	0.92	0.95	1.05	0.99	1.01	1.00	1.02	1.04	1.11	0.93	0.97	0.97	0.96
41	1.00	1.02	1.00	1.08	1.00	0.92	0.95	1.05	0.99	1.01	1.00	1.02	1.04	1.11	0.93	0.97	0.97	0.97
42	1.00	1.02	1.00	1.08	1.01	0.93	0.95	1.05	0.99	1.01	1.00	1.03	1.04	1.11	0.92	0.97	0.97	0.97
43	1.00	1.02	1.00	1.07	1.01	0.93	0.96	1.05	0.99	1.02	1.00	1.03	1.04	1.12	0.92	0.97	0.97	0.97
44	1.00	1.02	1.00	1.07	1.01	0.93	0.96	1.05	0.99	1.02	1.00	1.03	1.04	1.13	0.92	0.97	0.96	0.97
45	1.00	1.02	1.00	1.07	1.02	0.94	0.96	1.05	0.99	1.02	1.00	1.03	1.04	1.13	0.92	0.97	0.96	0.97
46	1.00	1.02	1.00	1.07	1.02	0.94	0.96	1.05	0.99	1.02	1.00	1.03	1.04	1.13	0.93	0.97	0.96	0.97
47	1.00	1.02	1.00	1.06	1.02	0.94	0.96	1.05	0.98	1.02	1.00	1.03	1.04	1.14	0.93	0.97	0.96	0.97
48	1.00	1.02	1.00	1.06	1.01	0.94	0.97	1.05	0.98	1.01	1.00	1.03	1.04	1.13	0.92	0.97	0.96	0.97
49	1.00	1.02	1.00	1.05	1.00	0.94	0.97	1.06	0.98	1.01	1.00	1.03	1.04	1.13	0.92	0.97	0.96	0.97
50	1.00	1.02	1.00	1.05	1.00	0.93	0.97	1.06	0.98	1.01	1.00	1.03	1.04	1.12	0.92	0.97	0.97	0.97
51	1.00	1.02	1.00	1.04	1.00	0.93	0.98	1.06	0.98	1.01	1.00	1.03	1.03	1.12	0.92	0.97	0.97	0.97
52	1.00	1.03	1.00	1.04	1.01	0.93	0.98	1.06	0.98	1.01	1.00	1.03	1.03	1.11	0.92	0.98	0.98	0.97
53	1.00	1.03	1.00	1.03	1.01	0.93	0.98	1.06	0.98	1.01	1.00	1.03	1.03	1.11	0.92	0.98	0.98	0.97
54	1.00	1.03	1.00	1.03	1.02	0.94	0.99	1.05	0.98	1.01	1.00	1.03	1.02	1.12	0.92	0.98	0.98	0.96
55	1.00	1.02	1.00	1.03	1.03	0.94	0.99	1.04	0.98	1.01	1.00	1.03	1.02	1.12	0.93	0.98	0.98	0.96
56	1.00	1.02	1.00	1.02	1.04	0.94	0.99	1.04	0.98	1.01	1.00	1.03	1.02	1.12	0.93	0.98	0.98	0.96
57	1.00	1.02	1.00	1.02	1.04	0.95	0.99	1.04	0.98	1.01	1.00	1.03	1.02	1.12	0.93	0.98	0.98	0.96
58	1.00	1.02	1.00	1.02	1.04	0.95	0.99	1.04	0.98	1.01	1.00	1.03	1.01	1.12	0.94	0.98	0.98	0.96
59	1.00	1.02	1.00	1.01	1.03	0.95	1.00	1.04	0.98	1.01	1.00	1.03	1.01	1.12	0.94	0.99	0.98	0.96
60	1.00	1.02	1.00	1.01	1.03	0.95	1.00	1.04	0.98	1.01	1.00	1.02	1.01	1.11	0.94	0.99	0.98	0.96
61	1.00	1.02	1.00	1.01	1.02	0.95	1.00	1.04	0.98	1.01	1.00	1.02	1.00	1.11	0.94	0.99	0.98	0.96
62	1.00	1.02	1.00	1.01	1.02	0.95	1.00	1.05	0.98	1.01	1.00	1.02	1.00	1.11	0.94	1.00	0.98	0.96
63	1.00	1.02	1.00	1.00	1.02	0.95	1.00	1.05	0.98	1.01	1.00	1.02	1.00	1.10	0.94	1.00	0.98	0.96
64	1.00	1.02	1.00	1.00	1.02	0.95	1.00	1.05	0.98	1.01	1.00	1.02	0.99	1.10	0.94	1.00	0.99	0.96
65	1.00	1.01	1.00	1.00	1.01	0.95	1.00	1.05	0.98	1.01	1.00	1.02	0.99	1.10	0.94	1.00	0.99	0.96
66	1.00	1.01	1.00	1.00	1.01	0.95	1.00	1.06	0.98	1.01	1.00	1.02	0.99	1.09	0.94	1.00	0.99	0.96
67	1.00	1.01	1.00	1.00	1.01	0.94	1.00	1.06	0.98	1.01	1.00	1.02	0.99	1.09	0.94	1.00	0.99	0.96
68	1.00	1.01	1.00	1.00	1.01	0.94	1.00	1.06	0.98	1.01	1.00	1.02	0.99	1.09	0.94	1.00	0.99	0.96
69	1.00	1.01	1.00	1.00	1.01	0.94	1.00	1.06	0.98	1.01	1.00	1.02	0.99	1.08	0.93	1.00	0.99	0.96
70	1.00	1.01	1.00	1.00	1.01	0.94	1.00	1.05	0.98	1.01	1.00	1.02	0.99	1.08	0.93	1.00	0.99	0.96
71	1.00	1.01	1.00	0.99	1.01	0.93	1.00	1.05	0.98	1.01	1.00	1.02	0.99	1.08	0.93	1.00	1.00	0.96
72	1.00	1.01	1.00	0.99	1.02	0.93	1.00	1.05	0.98	1.01	1.00	1.02	0.99	1.08	0.93	0.99	1.00	0.97
73	1.00	1.01	1.00	0.99	1.02	0.93	1.00	1.05	0.99	1.02	1.00	1.02	0.98	1.07	0.93	0.99	1.00	0.97
74	1.00	1.01	1.00	0.99	1.02	0.93	1.00	1.05	0.99	1.02	1.00	1.02	0.98	1.07	0.93	0.99	1.00	0.97
75	1.00	1.01	1.00	0.99	1.02	0.93	0.99	1.05	0.98	1.02	1.00	1.02	0.98	1.07	0.93	0.99	1.01	0.97
76	1.00	1.01	1.00	0.99	1.01	0.93	0.99	1.06	0.98	1.02	1.00	1.01	0.98	1.07	0.93	0.99	1.01	0.97
77	1.00	1.01	1.00	0.99	1.01	0.94	0.99	1.06	0.98	1.02	1.00	1.01	0.98	1.06	0.93	0.99	1.01	0.97
78	1.00	1.01	1.00	0.99	1.01	0.94	0.99	1.06	0.98	1.02	1.00	1.01	0.98	1.06	0.93	0.99	1.01	0.97
79	1.00	1.01	1.00	0.99	1.00	0.94	0.99	1.05	0.98	1.02	1.00	1.01	0.98	1.06	0.93	0.99	1.00	0.98
80	1.00	1.01	1.00	1.00	1.00	0.95	0.99	1.05	0.98	1.02	1.00	1.01	0.98	1.06	0.93	0.99	1.00	0.98
81	1.00	1.01	1.00	1.00	1.00	0.95	0.99	1.05	0.97	1.01	1.00	1.01	0.98	1.06	0.93	0.99	1.00	0.98
82	1.00	1.01	1.00	1.00	1.00	0.95	0.99	1.05	0.97	1.01	1.00	1.01	0.98	1.06	0.93	0.99	1.00	0.98
83	1.00	1.01	1.00	1.00	1.00	0.95	0.98	1.05	0.97	1.01	1.00	1.01	0.98	1.06	0.93	0.99	1.00	0.98
84	1.00	1.01	1.00	1.00	1.00	0.95	0.98	1.05	0.97	1.01	1.00	1.01	0.98	1.06	0.93	0.99	1.00	0.99
85	1.00	1.01	1.00	0.99	1.00	0.95	0.98	1.05	0.97	1.01	1.00	1.01	0.98	1.06	0.92	0.99	1.00	0.99
86	1.00	1.01	1.00	0.99	1.00	0.96	0.99	1.05	0.97	1.01	1.00	1.01	0.98	1.06	0.92	0.99	1.01	0.99
87	1.00	1.01	1.00	0.99	1.00	0.96	0.99	1.05	0.97	1.01	1.00	1.01	0.98	1.06	0.93	0.99	1.01	0.99
88	1.00	1.01	1.00	0.99	1.00	0.96	0.99	1.05	0.97	1.01	1.00	1.01	0.98	1.05	0.93	0.99	1.01	1.00
89	1.00	1.01	1.00	0.99	1.00	0.97	0.99	1.04	0.97	1.01	1.00	1.01	0.98	1.05	0.93	0.99	1.01	1.00
90	1.00	1.01	1.00	0.99	1.00	0.97	0.99	1.04	0.97	1.01	1.00	1.01	0.98	1.04	0.93	0.99	1.01	1.00
91	1.00	1.01	1.00	0.99	1.00	0.98	0.99	1.04	0.97	1.01	1.00	1.01	0.98	1.04	0.94	0.99	1.01	1.00
92	1.00	1.01	1.00	0.99	1.00	0.98	1.00	1.03	0.97	1.01	1.00	1.00	0.99	1.03	0.95	0.99	1.01	1.00
93	1.00	1.01	1.00	1.00	1.00	0.99	1.00	1.02	0.98	1.01	1.00	1.00	0.99	1.02	0.96	1.00	1.01	1.00
94	1.00	1.01	1.00	1.00	1.00	0.99	1.00	1.02	0.98	1.01	1.00	1.00	0.99	1.01	0.97	1.00	1.01	1.00
95	1.00	1.00	1.00	1.00	1.00	0.99	1.00	1.01	0.99	1.00	1.00	1.00	0.99	1.01	0.98	1.00	1.01	1.00
96+	1.00	1.00	1.00	1.00	1.00	1.00	1.00	1.01	0.99	1.00	1.00	1.00	1.00	1.00	0.99	1.00	1.00	1.00

Exhibit A-8b
Actual-to-Expected Claim Duration Utilization Experience 2016-2019
Claim Months 4+
All Products

	ALF			HHC			SNF			Total		
	Paid	Actual-to-Expected (A:E)		Paid	A:E		Paid	A:E		Paid	A:E	
	Claims	Policy Duration	Expected[1]	Claims	Policy Duration	Expected[1]	Claims	Policy Duration	Expected[1]	Claims	Policy Duration	Expected[1]
Product or Insured Characteristic	[A]	[B]	[C]	[A]	[B]	[C]	[A]	[B]	[C]	[A]	[B]	[C]
Inflation Option												
Automatic Inflation (For Life)	51,560,947	0.96	0.98	76,546,416	1.07	0.94	68,330,116	0.69	0.93	196,437,479	0.87	0.95
Limited Automatic Inflation[2]	32,109,770	0.99	0.98	25,443,494	1.23	0.99	31,437,409	0.91	1.01	88,990,673	1.02	0.99
Non-Automatic	41,155,131	1.02	1.00	46,355,968	1.18	0.99	49,317,876	0.90	0.99	136,828,975	1.02	0.99
Benefit Period												
Lifetime	38,731,821	1.02	1.00	45,787,753	1.22	0.98	38,680,494	0.92	0.99	123,200,068	1.05	0.99
Non-Lifetime	86,094,027	0.97	0.98	102,558,126	1.09	0.96	110,404,907	0.75	0.96	299,057,060	0.91	0.96
Group or Individual												
Group	18,350,088	0.92	0.95	30,776,568	0.99	0.87	20,008,950	0.67	0.88	69,135,606	0.85	0.89
Individual	106,475,760	1.00	0.99	117,569,311	1.17	0.99	129,076,451	0.81	0.98	353,121,521	0.97	0.99
ALF Reimbursement												
Home Care Only	NA	NA	NA	9,772,587	1.20	1.02	NA	NA	NA	9,772,587	1.20	1.02
<=60%	18,774,162	1.11	1.03	24,698,697	1.16	0.97	26,565,341	0.62	0.90	70,038,200	0.86	0.96
61%+	106,051,686	0.97	0.98	113,874,595	1.12	0.96	122,520,060	0.84	0.98	342,446,341	0.96	0.97
HHC Reimbursement												
Facility Only	25,649,602	1.01	0.99	NA	NA	NA	27,129,422	0.97	1.02	52,779,024	0.99	1.01
<=50%	49,636,490	1.03	1.00	52,677,365	1.23	1.00	64,885,359	0.72	0.94	167,199,213	0.92	0.98
51%+	49,539,756	0.94	0.97	95,668,514	1.08	0.94	57,070,620	0.81	0.97	202,278,890	0.95	0.96
Incurral Age												
<75	11,965,555	0.88	0.92	29,583,541	1.01	0.87	15,920,155	0.67	0.86	57,469,251	0.86	0.88
75-84	51,772,599	0.97	0.98	59,660,708	1.14	0.98	62,616,427	0.77	0.96	174,049,734	0.93	0.97
85+	61,087,694	1.03	1.00	59,101,630	1.19	1.00	70,548,818	0.84	1.00	190,738,142	0.99	1.00
Claim Year												
1	31,314,209	0.94	0.99	23,591,379	0.92	0.99	41,926,268	0.81	0.99	96,831,855	0.87	0.99
2	34,547,383	0.98	0.99	36,475,182	1.07	1.00	44,046,921	0.81	0.99	115,069,486	0.93	0.99
3	25,364,093	1.03	1.00	30,936,116	1.19	1.00	28,225,032	0.80	0.98	84,525,240	0.98	0.99
4	14,503,338	1.05	1.00	22,106,969	1.25	1.01	15,677,689	0.78	0.97	52,287,997	1.01	1.00
5	8,200,167	1.03	1.00	14,466,919	1.31	1.02	8,333,062	0.74	0.95	31,000,148	1.03	1.00
6+	10,896,658	0.98	0.89	20,769,313	1.23	0.78	10,876,429	0.71	0.80	42,542,400	0.98	0.81
Total	124,825,848	0.99	0.98	148,345,878	1.13	0.96	149,085,401	0.79	0.97	422,257,127	0.95	0.97

[1] Expected = current assumption reflecting all experience adjustments.

[2] Captures inflation options that are capped based on a set number of years or percentage of the original daily benefit (e.g., 20 years of 5% simple inflation).

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Product	Number
Prior to Series 11	
Facility Only Form	LTC-LBP-2PA
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

The experience provided in 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. Section 15 of the actuarial memorandum (memorandum) provides a description as to the appropriateness of pooling the experience of these policy forms. Pennsylvania-specific experience is not considered fully credible, but is being provided as required.

A. Purpose of Supplement

This supplement has been prepared for the purpose of demonstrating that the requested rate increase is in compliance with Chapter 18 Sections 3803(c) and (e) and Reg. 89.83 of the Insurance Regulations for the state of Pennsylvania, as well as providing items generally requested by the Department. It may not be appropriate for other purposes.

B. 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.

C. Demonstration of Compliance with Reg. 89.83

(a): This subsection requires no action.

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

(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 memorandum.

As of December 31, 2020, 100 of the 222 policies that are in force and subject to the requested rate increase in Pennsylvania were issued on or after September 16, 2002 (approximately 45%). 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 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.

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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 and inflation option to better align the rate increase with the adverse experience, as described in Section 2 of the memorandum. Table 2.2 in Section 2 of the memorandum provides the average prior, requested, and cumulative increase by benefit period and inflation option based on the nationwide distribution. Table 1 below provides similar information on a Pennsylvania-specific distribution split by issue date.

Table 1
Pennsylvania-Specific Average[1] Rate Increase Request

Policy Form Cohort	Benefit Period	Inflation Option	Prior Increase	Requested Increase	Cumulative Increase
Issued Prior to 9/16/2002					
Prior to Series 11	Non-Lifetime	Non-Auto	144.4%	0.0%	144%
	Non-Lifetime	Auto	144.4	90.2	365
	Lifetime	Non-Auto	164.2	208.3	715
	Lifetime	Auto	164.2	259.3	849
Series 11 Individual	Non-Lifetime	Non-Auto	144.4	0.0	144
	Non-Lifetime	Auto	144.4	90.2	365
	Lifetime	Non-Auto	164.2	208.3	715
	Lifetime	Auto	164.2	259.3	849
Issued On or After 9/16/2002					
Prior to Series 11	Non-Lifetime	Non-Auto	144.5	0.0	145
	Non-Lifetime	Auto	144.5	90.1	365
	Lifetime	Non-Auto	188.2	182.6	715
	Lifetime	Auto	188.2	229.4	849
Series 11 Individual	Non-Lifetime	Non-Auto	144.5	0.0	145
	Non-Lifetime	Auto	144.5	90.1	365
	Lifetime	Non-Auto	188.2	182.6	715
	Lifetime	Auto	188.2	229.4	849
Average			152.4	129.0	478

[1] As of December 31, 2020 and excludes policies assumed to be paid up prior to implementation of the requested rate increase.

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 implementation rounding algorithms.

Exhibit I of the memorandum provides nationwide earned premium and incurred claim actual and projected experience using current assumptions, as described in Section 6 of the 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 to the year of issue (which ranges from 3.5% to 5.5% and averages 4.5%).

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

(2)(ii)(A): There have been five rate increases approved and implemented on these policy forms in Pennsylvania. The average cumulative prior approved increase is 151% 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 14, 2021. Exhibit IV of the memorandum provides a nationwide status listing of the current and all prior rate increase filings for each jurisdiction in which there is business in force.

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

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Table 2a
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-CD5-2PA	71-79	40-68	8-18	0-5
LTC-CD8-MA-PA	80+	35-58	5-15	0-5
LTC-CD9-MA-PA	All Ages	30-50	5-10	5-10
LTQ11-336-MA-PA-998 NTQ11-337-MA-PA-998 HTQ11-338-MA-PA-998 LTQ11-336-MA-PA-601 HTQ11-338-MA-PA-601 NTQ11-337-MA-PA-601	<75 75+	30-50 20-40	5-10 5-10	0-10 0-10
FLQ11-336-MA-PA-601	<75 75+	25-45 15-35	0-5 0-5	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 2b provides similar information for the lifetime-pay group policy form by duration and whether the group was sold by a commissioned agent. The commission scale, without other sales and marketing expenses, was not readily available.

Table 2b
Commission Percentages by Duration and Agent Type
Group Policy Form: GRP11-341-MA-PA-601

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, on a present value basis, based on original pricing assumptions.

The actual commission scales will differ slightly from those that appear in Table 2 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 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 to this supplement, 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 nationwide 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, except using

Pennsylvania-specific experience.

Please note that totals in Attachments 5 and 6 may not tie exactly to Exhibit I and Attachment 2, respectively, because the experience periods captured differ slightly between calendar year and duration.

(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.

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

D. Demonstration of Compliance with Generally Requested Information

Table 3 below provides the number of policyholders both issued and in-force that are subject to the requested rate increase. Table 3 is split by issue date, policy form cohort, benefit period, and inflation option and is provided for both nationwide and Pennsylvania-specific experience.

Table 3
Nationwide and Pennsylvania-Specific Life Counts Issued and In-Force[1]

Policy Form Cohort	Benefit Period	Inflation Option	Nationwide		Pennsylvania	
			Issued	In-Force	Issued	In-Force
Issued Prior to 9/16/2002						
Prior to Series 11	Non-Lifetime	Non-Auto	2,681	171	1,621	38
		Auto	1,172	325	145	27
	Lifetime	Non-Auto	412	80	35	7
		Auto	621	171	17	4
Series 11 Individual	Non-Lifetime	Non-Auto	522	79	55	4
		Auto	442	187	55	27
	Lifetime	Non-Auto	122	42	2	1
		Auto	302	136	26	14
Series 11 Group	Non-Lifetime	Non-Auto	1,077	209	0	0
		Auto	524	95	0	0
	Lifetime	Non-Auto	9	0	0	0
		Auto	18	2	0	0
Issued On or After 9/16/2002						
Prior to Series 11	Non-Lifetime	Non-Auto	6	2	0	0
		Auto	7	4	0	0
	Lifetime	Non-Auto	0	0	0	0
		Auto	1	0	0	0
Series 11 Individual	Non-Lifetime	Non-Auto	2,549	1,241	40	4
		Auto	1,925	1,090	49	26
	Lifetime	Non-Auto	185	73	3	0
		Auto	782	339	16	7
Series 11 Group	Non-Lifetime	Non-Auto	3,668	1,579	24	7
		Auto	3,859	1,975	88	56
	Lifetime	Non-Auto	11	1	0	0
		Auto	57	20	0	0
All Issue Dates						
All	All	All	20,952	7,821	2,176	222

[1] As of December 31, 2020 and excludes policies assumed to be paid up prior to implementation of the requested rate increase.

An Excel workbook containing the values shown in Exhibits I, II, and IV of the memorandum and

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Attachments 1 through 6 to this supplement is enclosed with this filing, as required.

E. Description of Attachments and Enclosures

Attachment 1: Nationwide Actual and Projected Written Premium and Paid Claims
Attachment 2: Pennsylvania-Specific Actual and Projected Experience
Attachment 3: Pennsylvania-Specific Actual and Projected Written Premium and Paid Claims
Attachment 4: Nationwide and Pennsylvania-Specific Claim Breakdown and Reserve Balances
Attachment 5: Nationwide Actual and Projected Experience by Policy Year
Attachment 6: Pennsylvania-Specific Actual and Projected Experience by Policy Year

Enclosures: Exhibits and Attachments in Excel
Current and Proposed Premium Rate Schedules

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

		Without Interest				With Max. Val. Interest		
		A	B	C = B / A	D	E	F	G = F / E
	Calendar Year	Written Premium	Paid Claims	Loss Ratio	End of Year Lives	Written Premium	Paid Claims	Loss Ratio
	1992	127,778	0	0%	111	587,693	0	0%
	1993	820,223	435	0%	634	3,192,836	1,897	0%
	1994	1,851,617	45,498	2%	1,371	6,793,742	167,145	2%
	1995	1,970,785	63,694	3%	1,372	6,721,907	221,015	3%
	1996	2,234,705	63,028	3%	1,558	7,102,705	208,291	3%
	1997	2,815,255	58,344	2%	1,924	8,361,206	175,579	2%
	1998	4,491,564	43,234	1%	3,429	12,473,007	116,947	1%
	1999	6,537,962	306,312	5%	4,078	17,167,165	847,615	5%
	2000	7,642,014	574,377	8%	4,284	19,114,966	1,528,286	8%
	2001	8,093,163	833,901	10%	4,632	19,316,516	2,087,897	11%
	2002	10,389,490	1,115,445	11%	6,102	23,644,019	2,643,423	11%
Historical	2003	14,989,029	1,854,682	12%	11,170	32,537,671	4,159,644	13%
Experience	2004	18,469,392	2,200,861	12%	12,226	38,297,650	4,649,572	12%
	2005	19,768,392	2,694,281	14%	13,488	39,202,342	5,414,801	14%
	2006	20,065,657	3,291,681	16%	13,513	37,976,276	6,302,694	17%
	2007	19,900,109	4,271,003	21%	13,718	35,968,443	7,812,597	22%
	2008	19,469,426	5,251,014	27%	13,739	33,631,098	9,179,542	27%
	2009	18,771,154	5,602,113	30%	13,466	31,010,306	9,351,064	30%
	2010	17,740,404	6,110,869	34%	13,187	28,035,150	9,751,522	35%
	2011	17,507,860	7,456,163	43%	12,941	26,474,980	11,375,073	43%
	2012	18,135,673	8,673,520	48%	13,156	26,225,498	12,649,595	48%
	2013	16,893,886	9,803,400	58%	12,984	23,366,420	13,673,726	59%
	2014	15,831,343	10,583,649	67%	12,750	20,948,648	14,104,552	67%
	2015	15,215,232	12,099,206	80%	12,491	19,268,879	15,424,966	80%
	2016	14,851,002	12,557,754	85%	12,449	17,997,134	15,314,430	85%
	2017	14,240,667	13,436,230	94%	11,950	16,532,811	15,676,162	95%
	2018	13,865,583	13,897,899	100%	11,668	15,429,146	15,509,286	101%
	2019	14,429,262	16,156,334	112%	11,400	15,384,696	17,255,306	112%
	2020	14,937,642	17,717,995	119%	11,115	15,259,721	18,111,132	119%
	2021	14,459,806	19,258,067	133%	10,617	14,155,730	18,840,618	133%
	2022	14,214,952	19,733,623	139%	10,279	13,338,551	18,478,581	139%
	2023	13,364,729	20,772,095	155%	9,947	12,023,164	18,618,508	155%
	2024	12,560,380	21,528,177	171%	9,610	10,834,256	18,471,792	170%
	2025	11,757,747	22,224,366	189%	9,272	9,725,768	18,255,389	188%
	2026	11,061,504	22,969,636	208%	8,931	8,775,157	18,064,193	206%
	2027	10,320,130	24,292,318	235%	8,593	7,851,506	18,293,922	233%
	2028	9,640,024	25,768,493	267%	8,252	7,034,857	18,583,164	264%
	2029	9,005,617	27,281,601	303%	7,911	6,305,079	18,841,200	299%
	2030	8,392,246	28,924,595	345%	7,568	5,638,095	19,131,330	339%
	2031	7,793,502	30,599,301	393%	7,223	5,025,049	19,384,808	386%
Projected	2032	7,207,925	32,360,085	449%	6,876	4,461,223	19,636,851	440%
Future	2033	6,639,047	34,177,013	515%	6,528	3,945,258	19,867,926	504%
Experience	2034	6,088,002	36,024,567	592%	6,180	3,474,269	20,063,922	578%
(60 Years)	2035	5,556,475	37,839,633	681%	5,833	3,045,825	20,193,299	663%
	2036	5,046,335	39,564,270	784%	5,487	2,657,665	20,232,778	761%
	2037	4,559,276	41,146,666	902%	5,144	2,307,521	20,166,507	874%
	2038	4,097,790	42,525,363	1,038%	4,807	1,993,578	19,977,558	1,002%
	2039	3,663,270	43,662,789	1,192%	4,476	1,713,556	19,663,404	1,148%
	2040	3,256,824	44,512,866	1,367%	4,153	1,465,157	19,219,438	1,312%
	2041	2,879,194	45,039,675	1,564%	3,840	1,246,043	18,647,389	1,497%
	2042	2,531,273	45,215,033	1,786%	3,538	1,054,110	17,952,973	1,703%
	2043	2,213,181	45,029,084	2,035%	3,250	887,068	17,149,006	1,933%
	2044	1,924,525	44,501,139	2,312%	2,975	742,619	16,257,839	2,189%
	2045	1,664,456	43,647,382	2,622%	2,715	618,483	15,298,268	2,474%
	2046	1,431,899	42,486,133	2,967%	2,471	512,493	14,288,223	2,788%
	2047	1,225,750	41,056,798	3,350%	2,243	422,678	13,249,674	3,135%
	2048	1,044,195	39,373,758	3,771%	2,030	347,000	12,194,193	3,514%
	2049	885,463	37,471,307	4,232%	1,834	283,646	11,137,762	3,927%
	2050	747,480	35,399,610	4,736%	1,653	230,885	10,099,012	4,374%
	2051-2055	2,261,394	142,559,164	6,304%	6,057	636,478	36,287,404	5,701%
	2056-2060	877,154	87,529,844	9,979%	3,454	208,110	18,293,290	8,790%
	2061-2065	313,881	47,429,136	15,111%	1,870	63,396	8,224,135	12,973%
	2066-2070	105,056	23,050,716	21,941%	913	18,140	3,356,075	18,500%
	2071-2075	33,624	10,022,919	29,809%	376	4,935	1,240,114	25,131%
	2076-2080	9,969	3,815,419	38,274%	125	1,245	410,307	32,968%
History		352,056,267	156,762,920	45%	256,906	598,022,629	213,713,762	36%
Future		188,834,076	1,348,792,639	714%	187,030	133,048,595	598,070,852	450%
Lifetime		540,890,342	1,505,555,560	278%	443,936	731,071,224	811,784,614	111%

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

		Without Interest				With Max. Val. Interest		
		A	B	C = B / A	D	E	F	G = F / E
	Calendar Year	Written Premium	Paid Claims	Loss Ratio	End of Year Lives	Written Premium	Paid Claims	Loss Ratio
	1992	127,778	0	0%	111	587,693	0	0%
	1993	820,223	435	0%	634	3,192,836	1,897	0%
	1994	1,851,617	45,498	2%	1,371	6,793,742	167,145	2%
	1995	1,970,785	63,694	3%	1,372	6,721,907	221,015	3%
	1996	2,234,705	63,028	3%	1,558	7,102,705	208,291	3%
	1997	2,815,255	58,344	2%	1,924	8,361,206	175,579	2%
	1998	4,491,564	43,234	1%	3,429	12,473,007	116,947	1%
	1999	6,537,962	306,312	5%	4,078	17,167,165	847,615	5%
	2000	7,642,014	574,377	8%	4,284	19,114,966	1,528,286	8%
	2001	8,093,163	833,901	10%	4,632	19,316,516	2,087,897	11%
	2002	10,389,490	1,115,445	11%	6,102	23,644,019	2,643,423	11%
Historical	2003	14,989,029	1,854,682	12%	11,170	32,537,671	4,159,644	13%
Experience	2004	18,469,392	2,200,861	12%	12,226	38,297,650	4,649,572	12%
	2005	19,768,392	2,694,281	14%	13,488	39,202,342	5,414,801	14%
	2006	20,065,657	3,291,681	16%	13,513	37,976,276	6,302,694	17%
	2007	19,900,109	4,271,003	21%	13,718	35,968,443	7,812,597	22%
	2008	19,469,426	5,251,014	27%	13,739	33,631,098	9,179,542	27%
	2009	18,771,154	5,602,113	30%	13,466	31,010,306	9,351,064	30%
	2010	17,740,404	6,110,869	34%	13,187	28,035,150	9,751,522	35%
	2011	17,507,860	7,456,163	43%	12,941	26,474,980	11,375,073	43%
	2012	18,135,673	8,673,520	48%	13,156	26,225,498	12,649,595	48%
	2013	16,893,886	9,803,400	58%	12,984	23,366,420	13,673,726	59%
	2014	15,831,343	10,583,649	67%	12,750	20,948,648	14,104,552	67%
	2015	15,215,232	12,099,206	80%	12,491	19,268,879	15,424,966	80%
	2016	14,851,002	12,557,754	85%	12,449	17,997,134	15,314,430	85%
	2017	14,240,667	13,436,230	94%	11,950	16,532,811	15,676,162	95%
	2018	13,865,583	13,897,899	100%	11,668	15,429,146	15,509,286	101%
	2019	14,429,262	16,156,334	112%	11,400	15,384,696	17,255,306	112%
	2020	14,937,642	17,717,995	119%	11,115	15,259,721	18,111,132	119%
	2021	14,459,806	19,258,067	133%	10,617	14,155,730	18,840,618	133%
	2022	14,140,377	19,733,093	140%	10,279	13,268,723	18,478,085	139%
	2023	22,471,824	20,416,192	91%	9,344	20,197,815	18,299,683	91%
	2024	23,750,130	20,133,945	85%	8,973	20,473,625	17,275,892	84%
	2025	22,281,029	19,706,091	88%	8,654	18,415,948	16,186,661	88%
	2026	20,929,281	19,458,130	93%	8,337	16,586,975	15,301,561	92%
	2027	19,517,911	19,968,000	102%	8,026	14,831,458	15,035,868	101%
	2028	18,196,049	20,810,692	114%	7,712	13,259,687	15,006,084	113%
	2029	16,969,969	21,852,306	129%	7,399	11,861,361	15,089,930	127%
	2030	15,788,916	23,076,814	146%	7,085	10,587,153	15,261,936	144%
	2031	14,638,117	24,402,441	167%	6,769	9,418,006	15,457,707	164%
Projected	2032	13,512,823	25,832,018	191%	6,450	8,343,425	15,674,005	188%
Future	2033	12,422,930	27,320,365	220%	6,129	7,362,658	15,880,359	216%
Experience	2034	11,369,649	28,835,945	254%	5,808	6,469,331	16,058,311	248%
(60 Years)	2035	10,356,100	30,326,816	293%	5,487	5,658,546	16,181,786	286%
	2036	9,385,920	31,761,799	338%	5,167	4,925,836	16,239,907	330%
	2037	8,462,261	33,096,089	391%	4,850	4,266,650	16,217,323	380%
	2038	7,589,653	34,274,937	452%	4,537	3,677,261	16,097,286	438%
	2039	6,770,324	35,263,783	521%	4,229	3,152,991	15,875,565	504%
	2040	6,006,013	36,030,397	600%	3,929	2,689,185	15,550,524	578%
	2041	5,297,807	36,540,156	690%	3,638	2,281,183	15,120,749	663%
	2042	4,646,992	36,765,767	791%	3,357	1,924,752	14,589,049	758%
	2043	4,053,461	36,695,194	905%	3,087	1,615,372	13,964,680	864%
	2044	3,516,202	36,342,244	1,034%	2,830	1,348,559	13,265,401	984%
	2045	3,033,328	35,719,598	1,178%	2,587	1,119,881	12,506,844	1,117%
	2046	2,602,617	34,833,499	1,338%	2,357	925,173	11,700,743	1,265%
	2047	2,221,744	33,726,978	1,518%	2,143	760,634	10,869,451	1,429%
	2048	1,887,143	32,411,028	1,717%	1,943	622,386	10,022,453	1,610%
	2049	1,595,302	30,905,996	1,937%	1,758	506,976	9,170,728	1,809%
	2050	1,342,284	29,245,512	2,179%	1,587	411,157	8,327,715	2,025%
	2051-2055	4,020,280	118,185,623	2,940%	5,840	1,121,397	30,013,829	2,676%
	2056-2060	1,523,738	72,828,946	4,780%	3,356	357,984	15,180,965	4,241%
	2061-2065	530,749	39,755,473	7,490%	1,830	106,300	6,871,123	6,464%
	2066-2070	173,496	19,646,268	11,324%	897	29,808	2,844,283	9,542%
	2071-2075	54,837	8,657,895	15,789%	370	8,027	1,061,731	13,227%
	2076-2080	16,240	3,272,071	20,148%	123	2,023	348,118	17,210%
History		352,056,267	156,762,920	45%	256,906	598,022,629	213,713,762	36%
Future		325,535,303	1,117,090,167	343%	177,481	222,743,977	499,866,956	224%
Lifetime		677,591,570	1,273,853,087	188%	434,387	820,766,606	713,580,718	87%

Attachment 2-a
MedAmerica
Actual and Projected Experience using Current Assumptions by Calendar Year
Pennsylvania-Specific Experience Before Requested Rate Increase
Series 11 and Prior Policy Forms

		Without Interest				With Max. Val. Interest		
		A	B	C = B / A	D	E	F	G = F / E
	Calendar Year	Earned Premium	Incurred Claims	Incurred Loss Ratio	End of Year Lives	Earned Premium	Incurred Claims	Incurred Loss Ratio
Historical Experience	1992	17,324	0	0%	111	79,677	0	0%
	1993	547,119	112,031	20%	580	2,172,092	430,246	20%
	1994	1,333,833	28,415	2%	1,191	4,909,819	103,529	2%
	1995	1,802,649	55,039	3%	1,165	6,198,426	190,984	3%
	1996	1,608,703	5,871	0%	1,055	5,228,677	19,403	0%
	1997	1,439,865	114,890	8%	953	4,454,412	361,602	8%
	1998	1,347,126	235,553	17%	912	3,970,510	714,247	18%
	1999	1,286,732	377,829	29%	872	3,607,227	1,060,591	29%
	2000	1,267,260	481,212	38%	859	3,371,486	1,296,580	38%
	2001	1,228,866	713,556	58%	859	3,105,891	1,785,539	57%
	2002	1,323,148	745,816	56%	892	3,157,960	1,819,937	58%
	2003	1,345,479	464,534	35%	895	3,050,108	1,070,644	35%
	2004	1,410,319	958,964	68%	953	3,032,300	2,030,635	67%
	2005	1,361,886	656,165	48%	911	2,788,632	1,385,093	50%
	2006	1,272,052	751,072	59%	849	2,484,790	1,487,862	60%
	2007	1,178,994	940,403	80%	812	2,197,154	1,788,963	81%
	2008	1,111,890	585,491	53%	745	1,977,661	1,064,201	54%
	2009	1,037,003	691,309	67%	700	1,760,812	1,202,839	68%
	2010	934,315	817,263	87%	659	1,512,929	1,362,874	90%
	2011	843,440	1,412,703	167%	619	1,301,843	2,208,465	170%
	2012	865,091	1,281,526	148%	574	1,275,121	1,898,378	149%
	2013	863,792	974,481	113%	530	1,215,841	1,395,639	115%
	2014	800,022	1,444,148	181%	487	1,075,258	1,948,475	181%
	2015	718,243	2,422,746	337%	436	921,933	3,088,348	335%
	2016	646,695	280,660	43%	397	792,711	346,897	44%
	2017	593,302	1,481,784	250%	371	694,631	1,740,332	251%
	2018	565,516	313,327	55%	348	632,783	352,978	56%
	2019	586,229	847,187	145%	328	627,112	906,322	145%
	2020	598,936	818,319	137%	313	612,546	837,267	137%
Projected Future Experience (60 Years)	2021	552,135	655,757	119%	289	539,903	640,830	119%
	2022	548,518	639,471	117%	267	512,975	597,101	116%
	2023	514,105	642,139	125%	249	459,929	573,239	125%
	2024	421,993	653,698	155%	232	361,134	558,113	155%
	2025	325,020	660,532	203%	216	266,062	539,470	203%
	2026	296,977	682,656	230%	201	232,649	533,470	229%
	2027	267,808	710,570	265%	187	200,681	531,378	265%
	2028	243,543	734,401	302%	175	174,609	525,602	301%
	2029	222,543	768,885	345%	164	152,691	526,625	345%
	2030	202,816	802,894	396%	153	133,173	526,305	395%
	2031	184,246	842,823	457%	143	115,780	528,783	457%
	2032	166,589	886,171	532%	134	100,186	532,165	531%
	2033	149,783	918,332	613%	125	86,210	527,838	612%
	2034	133,797	946,111	707%	116	73,702	520,568	706%
	2035	118,624	971,903	819%	108	62,540	511,906	819%
	2036	104,326	977,628	937%	100	52,641	492,928	936%
	2037	90,963	970,985	1,067%	92	43,929	468,705	1,067%
	2038	78,609	951,866	1,211%	85	36,334	439,913	1,211%
	2039	67,345	916,734	1,361%	78	29,792	405,693	1,362%
	2040	57,225	893,365	1,561%	72	24,229	378,537	1,562%
	2041	48,249	850,337	1,762%	65	19,552	344,998	1,764%
	2042	40,414	800,231	1,980%	60	15,674	310,886	1,983%
	2043	33,646	753,710	2,240%	54	12,489	280,418	2,245%
	2044	27,814	714,204	2,568%	49	9,881	254,456	2,575%
	2045	22,832	681,943	2,987%	44	7,763	232,616	2,997%
	2046	18,577	642,915	3,461%	40	6,044	210,007	3,474%
	2047	14,956	603,270	4,034%	35	4,657	188,670	4,051%
	2048	11,915	558,629	4,688%	32	3,551	167,268	4,711%
	2049	9,382	504,225	5,374%	28	2,676	144,557	5,403%
	2050	7,302	449,674	6,158%	25	1,993	123,400	6,192%
	2051-2055	17,058	1,445,732	8,475%	84	4,190	353,952	8,447%
	2056-2060	3,516	492,600	14,011%	41	696	97,084	13,956%
	2061-2065	556	131,680	23,683%	18	89	20,920	23,591%
	2066-2070	63	20,631	32,926%	8	8	2,643	32,784%
	2071-2075	5	2,703	58,629%	3	0	277	57,753%
	2076-2080	0	441	469,815%	1	0	36	451,286%
History		29,935,829	20,012,295	67%	20,376	68,210,341	33,898,870	50%
Future		5,003,247	24,879,845	497%	3,771	3,748,412	13,091,358	349%
Lifetime		34,939,077	44,892,139	128%	24,147	71,958,753	46,990,228	65%

Attachment 2-b
MedAmerica
Actual and Projected Experience using Current Assumptions by Calendar Year
Pennsylvania-Specific Experience After Requested Rate Increase
Series 11 and Prior Policy Forms

		Without Interest				With Max. Val. Interest		
		A	B	C = B / A	D	E	F	G = F / E
	Calendar Year	Earned Premium	Incurred Claims	Incurred Loss Ratio	End of Year Lives	Earned Premium	Incurred Claims	Incurred Loss Ratio
	1992	17,324	0	0%	111	79,677	0	0%
	1993	547,119	112,031	20%	580	2,172,092	430,246	20%
	1994	1,333,833	28,415	2%	1,191	4,909,819	103,529	2%
	1995	1,802,649	55,039	3%	1,165	6,198,426	190,984	3%
	1996	1,608,703	5,871	0%	1,055	5,228,677	19,403	0%
	1997	1,439,865	114,890	8%	953	4,454,412	361,602	8%
	1998	1,347,126	235,553	17%	912	3,970,510	714,247	18%
	1999	1,286,732	377,829	29%	872	3,607,227	1,060,591	29%
	2000	1,267,260	481,212	38%	859	3,371,486	1,296,580	38%
	2001	1,228,866	713,556	58%	859	3,105,891	1,785,539	57%
	2002	1,323,148	745,816	56%	892	3,157,960	1,819,937	58%
Historical	2003	1,345,479	464,534	35%	895	3,050,108	1,070,644	35%
Experience	2004	1,410,319	958,964	68%	953	3,032,300	2,030,635	67%
	2005	1,361,886	656,165	48%	911	2,788,632	1,385,093	50%
	2006	1,272,052	751,072	59%	849	2,484,790	1,487,862	60%
	2007	1,178,994	940,403	80%	812	2,197,154	1,788,963	81%
	2008	1,111,890	585,491	53%	745	1,977,661	1,064,201	54%
	2009	1,037,003	691,309	67%	700	1,760,812	1,202,839	68%
	2010	934,315	817,263	87%	659	1,512,929	1,362,874	90%
	2011	843,440	1,412,703	167%	619	1,301,843	2,208,465	170%
	2012	865,091	1,281,526	148%	574	1,275,121	1,898,378	149%
	2013	863,792	974,481	113%	530	1,215,841	1,395,639	115%
	2014	800,022	1,444,148	181%	487	1,075,258	1,948,475	181%
	2015	718,243	2,422,746	337%	436	921,933	3,088,348	335%
	2016	646,695	280,660	43%	397	792,711	346,897	44%
	2017	593,302	1,481,784	250%	371	694,631	1,740,332	251%
	2018	565,516	313,327	55%	348	632,783	352,978	56%
	2019	586,229	847,187	145%	328	627,112	906,322	145%
	2020	598,936	818,319	137%	313	612,546	837,267	137%
	2021	552,135	655,757	119%	289	539,903	640,830	119%
	2022	548,518	639,471	117%	267	512,975	597,101	116%
	2023	682,624	534,960	78%	237	610,872	477,531	78%
	2024	703,147	520,324	74%	220	601,971	444,205	74%
	2025	536,812	521,026	97%	205	439,645	425,497	97%
	2026	494,871	534,496	108%	190	387,872	417,661	108%
	2027	449,400	552,851	123%	178	336,913	413,414	123%
	2028	411,650	567,959	138%	166	295,265	406,472	138%
	2029	378,860	590,598	156%	155	260,057	404,514	156%
	2030	347,500	613,102	176%	145	228,273	401,906	176%
	2031	317,528	641,162	202%	136	199,617	402,285	202%
Projected	2032	288,621	672,050	233%	127	173,646	403,612	232%
Future	2033	260,710	694,751	266%	118	150,113	399,370	266%
Experience	2034	233,828	714,705	306%	110	128,851	393,295	305%
(60 Years)	2035	208,019	734,297	353%	103	109,706	386,819	353%
	2036	183,460	741,277	404%	95	92,599	373,832	404%
	2037	160,296	739,870	462%	88	77,434	357,230	461%
	2038	138,760	729,055	525%	82	64,153	337,036	525%
	2039	118,994	708,735	596%	75	52,653	313,754	596%
	2040	101,142	696,363	689%	69	42,832	295,184	689%
	2041	85,212	670,899	787%	63	34,537	272,328	789%
	2042	71,270	640,116	898%	58	27,646	248,819	900%
	2043	59,203	612,643	1,035%	52	21,978	228,079	1,038%
	2044	48,813	588,674	1,206%	47	17,343	209,878	1,210%
	2045	39,943	568,398	1,423%	43	13,582	194,022	1,429%
	2046	32,386	541,933	1,673%	39	10,538	177,156	1,681%
	2047	26,005	514,058	1,977%	35	8,098	160,894	1,987%
	2048	20,664	480,751	2,326%	31	6,158	144,063	2,339%
	2049	16,226	437,086	2,694%	27	4,628	125,411	2,710%
	2050	12,596	392,543	3,116%	24	3,438	107,809	3,136%
	2051-2055	29,113	1,286,196	4,418%	83	7,155	314,963	4,402%
	2056-2060	5,780	453,646	7,848%	40	1,145	89,389	7,810%
	2061-2065	873	125,215	14,344%	18	139	19,887	14,276%
	2066-2070	95	20,067	21,176%	8	12	2,570	21,073%
	2071-2075	7	2,673	38,387%	3	1	274	37,806%
	2076-2080	0	440	284,819%	1	0	36	275,370%
History		29,935,829	20,012,295	67%	20,376	68,210,341	33,898,870	50%
Future		7,565,061	20,138,147	266%	3,629	5,461,749	10,587,125	194%
Lifetime		37,500,890	40,150,442	107%	24,005	73,672,090	44,485,995	60%

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

		Without Interest				With Max. Val. Interest		
		A	B	C = B / A	D	E	F	G = F / E
	Calendar Year	Written Premium	Paid Claims	Loss Ratio	End of Year Lives	Written Premium	Paid Claims	Loss Ratio
Historical Experience	1992	127,778	0	0%	111	587,693	0	0%
	1993	771,602	435	0%	580	3,006,827	1,897	0%
	1994	1,646,903	45,498	3%	1,191	6,047,868	167,145	3%
	1995	1,722,133	63,694	4%	1,165	5,884,203	221,015	4%
	1996	1,554,699	57,268	4%	1,055	5,044,606	189,257	4%
	1997	1,395,175	34,233	2%	953	4,315,545	107,743	2%
	1998	1,334,369	1,801	0%	912	3,931,386	5,398	0%
	1999	1,284,526	169,733	13%	872	3,595,324	488,467	14%
	2000	1,267,362	413,900	33%	859	3,367,529	1,116,354	33%
	2001	1,217,868	488,498	40%	859	3,069,836	1,248,045	41%
	2002	1,334,593	609,346	46%	892	3,178,947	1,483,470	47%
	2003	1,362,060	748,375	55%	895	3,080,946	1,747,040	57%
	2004	1,383,597	647,095	47%	953	2,971,425	1,416,461	48%
	2005	1,332,002	660,435	50%	911	2,726,163	1,368,594	50%
	2006	1,235,602	842,743	68%	849	2,411,672	1,653,141	69%
	2007	1,159,981	909,721	78%	812	2,161,010	1,710,961	79%
	2008	1,097,178	953,070	87%	745	1,951,200	1,726,419	88%
	2009	1,021,152	766,169	75%	700	1,733,582	1,323,736	76%
	2010	889,973	718,109	81%	659	1,439,156	1,188,454	83%
	2011	843,903	851,546	101%	619	1,302,127	1,341,994	103%
	2012	860,741	978,780	114%	574	1,268,901	1,470,705	116%
	2013	853,704	1,291,742	151%	530	1,201,116	1,841,732	153%
	2014	774,405	1,275,108	165%	487	1,040,803	1,727,936	166%
	2015	689,739	1,230,324	178%	436	884,992	1,588,261	179%
	2016	630,028	1,067,165	169%	397	772,025	1,310,944	170%
	2017	579,403	955,380	165%	371	678,227	1,120,743	165%
	2018	558,693	958,089	171%	348	625,104	1,073,164	172%
	2019	590,005	902,690	153%	328	631,186	967,106	153%
	2020	597,206	850,603	142%	313	610,770	870,218	142%
Projected Future Experience (60 Years)	2021	544,619	773,869	142%	289	532,578	756,510	142%
	2022	534,574	771,441	144%	267	499,990	720,524	144%
	2023	499,853	812,221	162%	249	447,246	725,028	162%
	2024	396,066	823,879	208%	232	338,992	703,225	207%
	2025	314,178	824,362	262%	216	257,242	673,048	262%
	2026	288,459	801,436	278%	201	226,026	625,909	277%
	2027	258,437	800,742	310%	187	193,649	598,375	309%
	2028	236,546	805,963	341%	175	169,615	576,339	340%
	2029	216,036	814,216	377%	164	148,242	557,191	376%
	2030	196,727	829,238	422%	153	129,186	543,075	420%
	2031	178,461	850,992	477%	143	112,152	533,387	476%
	2032	161,052	879,334	546%	134	96,861	527,507	545%
	2033	144,508	911,447	631%	125	83,177	523,342	629%
	2034	128,772	946,424	735%	116	70,937	520,175	733%
	2035	113,902	981,439	862%	108	60,051	516,369	860%
	2036	99,929	1,013,831	1,015%	100	50,424	510,647	1,013%
	2037	86,929	1,040,177	1,197%	92	41,982	501,585	1,195%
	2038	74,956	1,058,143	1,412%	85	34,647	488,538	1,410%
	2039	64,073	1,066,920	1,665%	78	28,346	471,652	1,664%
	2040	54,333	1,063,804	1,958%	72	23,006	450,292	1,957%
	2041	45,750	1,049,543	2,294%	65	18,540	425,376	2,294%
	2042	38,261	1,023,896	2,676%	60	14,840	397,349	2,678%
	2043	31,805	989,465	3,111%	54	11,806	367,683	3,114%
	2044	26,241	949,874	3,620%	49	9,322	337,985	3,626%
	2045	21,495	906,467	4,217%	44	7,308	308,840	4,226%
	2046	17,451	864,098	4,951%	40	5,678	281,890	4,964%
	2047	13,998	820,557	5,862%	35	4,359	256,315	5,880%
	2048	11,109	773,746	6,965%	32	3,310	231,417	6,990%
	2049	8,704	721,901	8,294%	28	2,482	206,718	8,328%
	2050	6,733	667,045	9,907%	25	1,838	182,861	9,951%
	2051-2055	15,497	2,451,624	15,820%	84	3,808	596,834	15,671%
	2056-2060	3,100	1,081,595	34,886%	41	614	212,744	34,661%
	2061-2065	468	325,755	69,638%	18	75	51,644	69,163%
	2066-2070	49	58,505	119,263%	8	6	7,506	118,809%
	2071-2075	3	6,459	203,265%	3	0	667	200,917%
	2076-2080	0	613	1,175,792%	1	0	51	1,145,512%
History		30,116,377	18,491,552	61%	20,376	69,520,168	30,476,400	44%
Future		4,833,078	30,561,019	632%	3,771	3,628,336	15,388,598	424%
Lifetime		34,949,455	49,052,571	140%	24,147	73,148,504	45,864,997	63%

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

		Without Interest				With Max. Val. Interest		
		A	B	C = B / A	D	E	F	G = F / E
	Calendar Year	Written Premium	Paid Claims	Loss Ratio	End of Year Lives	Written Premium	Paid Claims	Loss Ratio
	1992	127,778	0	0%	111	587,693	0	0%
	1993	771,602	435	0%	580	3,006,827	1,897	0%
	1994	1,646,903	45,498	3%	1,191	6,047,868	167,145	3%
	1995	1,722,133	63,694	4%	1,165	5,884,203	221,015	4%
	1996	1,554,699	57,268	4%	1,055	5,044,606	189,257	4%
	1997	1,395,175	34,233	2%	953	4,315,545	107,743	2%
	1998	1,334,369	1,801	0%	912	3,931,386	5,398	0%
	1999	1,284,526	169,733	13%	872	3,595,324	488,467	14%
	2000	1,267,362	413,900	33%	859	3,367,529	1,116,354	33%
	2001	1,217,868	488,498	40%	859	3,069,836	1,248,045	41%
	2002	1,334,593	609,346	46%	892	3,178,947	1,483,470	47%
Historical	2003	1,362,060	748,375	55%	895	3,080,946	1,747,040	57%
Experience	2004	1,383,597	647,095	47%	953	2,971,425	1,416,461	48%
	2005	1,332,002	660,435	50%	911	2,726,163	1,368,594	50%
	2006	1,235,602	842,743	68%	849	2,411,672	1,653,141	69%
	2007	1,159,981	909,721	78%	812	2,161,010	1,710,961	79%
	2008	1,097,178	953,070	87%	745	1,951,200	1,726,419	88%
	2009	1,021,152	766,169	75%	700	1,733,582	1,323,736	76%
	2010	889,973	718,109	81%	659	1,439,156	1,188,454	83%
	2011	843,903	851,546	101%	619	1,302,127	1,341,994	103%
	2012	860,741	978,780	114%	574	1,268,901	1,470,705	116%
	2013	853,704	1,291,742	151%	530	1,201,116	1,841,732	153%
	2014	774,405	1,275,108	165%	487	1,040,803	1,727,936	166%
	2015	689,739	1,230,324	178%	436	884,992	1,588,261	179%
	2016	630,028	1,067,165	169%	397	772,025	1,310,944	170%
	2017	579,403	955,380	165%	371	678,227	1,120,743	165%
	2018	558,693	958,089	171%	348	625,104	1,073,164	172%
	2019	590,005	902,690	153%	328	631,186	967,106	153%
	2020	597,206	850,603	142%	313	610,770	870,218	142%
	2021	544,619	773,869	142%	289	532,578	756,510	142%
	2022	534,574	771,441	144%	267	499,990	720,524	144%
	2023	832,882	676,653	81%	237	745,225	604,014	81%
	2024	659,947	655,783	99%	220	564,847	559,746	99%
	2025	518,905	650,254	125%	205	424,868	530,898	125%
	2026	480,678	627,497	131%	190	376,642	490,066	130%
	2027	433,675	623,008	144%	178	324,957	465,559	143%
	2028	399,824	623,303	156%	166	286,693	445,720	155%
	2029	367,782	625,418	170%	155	252,369	427,991	170%
	2030	337,068	633,218	188%	145	221,344	414,700	187%
	2031	307,559	647,377	210%	136	193,282	405,764	210%
Projected	2032	279,029	666,865	239%	127	167,815	400,048	238%
Future	2033	251,529	689,542	274%	118	144,777	395,927	273%
Experience	2034	225,047	714,942	318%	110	123,971	392,948	317%
(60 Years)	2035	199,738	741,502	371%	103	105,306	390,130	370%
	2036	175,729	768,728	437%	95	88,672	387,193	437%
	2037	153,187	792,592	517%	88	73,981	382,197	517%
	2038	132,312	810,455	613%	82	61,158	374,182	612%
	2039	113,213	824,845	729%	75	50,085	364,638	728%
	2040	96,031	829,218	863%	69	40,661	350,995	863%
	2041	80,799	828,067	1,025%	63	32,744	335,613	1,025%
	2042	67,474	819,028	1,214%	58	26,170	317,845	1,215%
	2043	55,964	804,273	1,437%	52	20,774	298,866	1,439%
	2044	46,053	782,922	1,700%	47	16,361	278,581	1,703%
	2045	37,605	755,538	2,009%	43	12,786	257,417	2,013%
	2046	30,424	728,376	2,394%	39	9,899	237,614	2,400%
	2047	24,340	699,212	2,873%	35	7,579	218,411	2,882%
	2048	19,265	665,879	3,456%	31	5,741	199,155	3,469%
	2049	15,054	625,777	4,157%	27	4,293	179,193	4,174%
	2050	11,615	582,296	5,013%	24	3,170	159,628	5,036%
	2051-2055	26,450	2,182,607	8,252%	83	6,503	531,069	8,167%
	2056-2060	5,098	996,411	19,545%	40	1,010	195,870	19,394%
	2061-2065	735	309,864	42,183%	18	117	49,104	41,855%
	2066-2070	74	56,902	76,691%	8	10	7,298	76,353%
	2071-2075	5	6,386	133,041%	3	1	659	131,480%
	2076-2080	0	612	791,893%	1	0	51	769,285%
History		30,116,377	18,491,552	61%	20,376	69,520,168	30,476,400	44%
Future		7,464,280	24,990,661	335%	3,629	5,426,378	12,526,124	231%
Lifetime		37,580,657	43,482,212	116%	24,005	74,946,546	43,002,524	57%

Attachment 4
Breakdown of Historical Incurred Claims and Reserve Balances at December 31, 2020
Series 11 and Prior Policy Forms

MedAmerica and Affinity Partners
Nationwide Experience

Incurred Year	Discounted to the Year of Incurral: Incurred Claims[1]	Paid Claims	Disabled Life Reserve	IBNR Reserve	Total Claim Reserve[2]	Year-End Active Life Reserve[3]
1992	0	0	0		0	
1993	112,031	112,031	0		0	
1994	28,415	28,415	0		0	
1995	60,736	60,736	0		0	
1996	104,057	104,057	0		0	
1997	212,400	212,400	0		0	
1998	399,244	399,244	0		0	
1999	887,196	887,196	0		0	
2000	1,187,209	1,187,209	0		0	
2001	1,832,801	1,832,801	0		0	
2002	3,843,469	3,730,620	112,850		112,850	
2003	2,227,233	2,227,233	0		0	
2004	2,965,428	2,965,428	0		0	
2005	4,391,387	4,311,378	80,009		80,009	
2006	5,623,259	5,583,607	39,652		39,652	
2007	6,899,518	6,829,228	70,290		70,290	
2008	5,229,358	5,178,112	51,247		51,247	
2009	6,673,343	6,664,790	8,553		8,553	
2010	11,830,937	11,156,838	674,099		674,099	
2011	8,089,437	7,866,515	222,922		222,922	
2012	9,631,138	9,062,623	568,515		568,515	
2013	7,623,082	7,177,751	445,331		445,331	
2014	13,848,920	12,911,555	937,365		937,365	
2015	18,435,850	14,259,605	4,176,246		4,176,246	
2016	13,368,869	11,085,044	2,283,825		2,283,825	
2017	14,883,947	10,793,972	4,089,975		4,089,975	
2018	16,151,812	8,662,613	7,489,199		7,489,199	
2019	21,968,338	6,281,022	15,687,316		15,687,316	
2020	20,527,721	1,184,841	15,892,725	3,450,156	19,342,881	304,771,077

MedAmerica
Pennsylvania-Specific Experience

Incurred Year	Discounted to the Year of Incurral: Incurred Claims[1]	Paid Claims	Disabled Life Reserve	IBNR Reserve	Total Claim Reserve[2]	Year-End Active Life Reserve[3]
1992	0	0	0		0	
1993	112,031	112,031	0		0	
1994	28,415	28,415	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	751,072	751,072	0		0	
2007	940,403	940,403	0		0	
2008	585,491	585,491	0		0	
2009	691,309	691,309	0		0	
2010	817,263	817,263	0		0	
2011	1,412,703	1,344,772	67,931		67,931	
2012	1,281,526	1,281,526	0		0	
2013	974,481	974,481	0		0	
2014	1,444,148	1,385,123	59,024		59,024	
2015	2,422,746	1,661,254	761,492		761,492	
2016	280,660	280,660	0		0	
2017	1,481,784	898,445	583,339		583,339	
2018	313,327	313,327			0	
2019	847,187	350,954	496,233		496,233	
2020	818,319	76,168	629,331	112,820	742,151	5,882,742

[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
Actual and Projected Experience using Current Assumptions by Policy Year
Nationwide Experience Before Requested Rate Increase
Series 11 and Prior Policy Forms

Policy Year	A Earned Premium	B Incurred Claims	C Incurred Loss Ratio	D End of Year Lives	E Cumulative Loss Ratio w/ Max. Val. Interest
1	29,862,781	1,653,736	6%	19,186	6%
2	27,482,980	1,321,012	5%	17,948	5%
3	25,672,937	2,235,172	9%	16,772	6%
4	24,451,381	5,457,903	22%	16,037	10%
5	23,749,834	4,135,184	17%	15,607	11%
6	23,181,612	6,435,446	28%	15,211	13%
7	22,710,327	7,038,949	31%	14,903	15%
8	22,439,388	9,718,385	43%	14,557	18%
9	22,228,909	10,291,930	46%	14,269	20%
10	22,618,086	8,193,858	36%	13,950	21%
11	16,847,562	10,741,478	64%	13,616	24%
12	16,522,891	11,543,620	70%	13,307	26%
13	16,125,477	12,264,479	76%	12,980	28%
14	15,794,698	12,580,228	80%	12,663	30%
15	15,543,432	16,984,684	109%	12,235	32%
16	15,415,832	15,408,701	100%	11,904	34%
17	15,538,278	21,346,884	137%	11,568	37%
18	15,379,316	21,137,791	137%	11,227	40%
19	15,072,712	20,138,294	134%	10,861	42%
20	14,344,749	23,464,366	164%	10,495	45%
21	13,115,870	24,268,458	185%	10,130	47%
22	12,195,542	25,707,021	211%	9,735	50%
23	11,378,587	26,478,452	233%	9,342	53%
24	10,586,405	27,782,192	262%	8,941	55%
25	9,818,477	29,458,469	300%	8,562	58%
26	9,115,458	30,895,561	339%	8,173	61%
27	8,404,424	32,754,103	390%	7,779	64%
28	7,708,293	34,833,400	452%	7,384	66%
29	7,026,415	36,767,909	523%	6,987	69%
30	6,371,882	38,482,020	604%	6,592	72%
31	5,745,174	39,987,509	696%	6,198	75%
32	5,151,181	41,309,514	802%	5,807	78%
33	4,592,135	42,418,828	924%	5,422	81%
34	4,069,658	43,274,196	1,063%	5,044	84%
35	3,585,199	43,627,660	1,217%	4,675	87%
36	3,139,801	43,623,509	1,389%	4,317	90%
37	2,733,491	43,284,871	1,584%	3,973	92%
38	2,365,651	42,611,070	1,801%	3,642	95%
39	2,035,258	41,631,287	2,046%	3,328	97%
40	1,740,984	40,288,087	2,314%	3,030	99%
41	1,480,739	38,639,552	2,609%	2,750	101%
42	1,252,316	36,791,516	2,938%	2,488	103%
43	1,053,217	34,760,691	3,300%	2,245	104%
44	881,010	32,650,530	3,706%	2,021	106%
45	733,200	30,447,490	4,153%	1,814	107%
46-50	2,125,047	118,444,408	5,574%	6,549	112%
51-55	744,125	66,825,088	8,980%	3,616	114%
56-60	230,295	32,066,350	13,924%	1,907	115%
61-65	61,002	13,502,573	22,135%	911	115%
66-70	13,285	4,988,608	37,552%	349	115%
71-75	2,228	1,366,836	61,337%	95	115%
Total	540,439,532	1,362,059,861	252%	433,103	115%

Attachment 5-b
MedAmerica and Affinity Partners
Actual and Projected Experience using Current Assumptions by Policy Year
Nationwide Experience After Requested Rate Increase
Series 11 and Prior Policy Forms

Policy Year	A Earned Premium	B Incurred Claims	C Incurred Loss Ratio	D End of Year Lives	E Cumulative Loss Ratio w/ Max. Val. Interest
1	29,862,781	1,653,736	6%	19,186	6%
2	27,482,980	1,321,012	5%	17,948	5%
3	25,672,937	2,235,172	9%	16,772	6%
4	24,451,381	5,457,903	22%	16,037	10%
5	23,752,023	4,135,137	17%	15,607	11%
6	23,211,710	6,434,691	28%	15,204	13%
7	22,814,823	7,036,122	31%	14,891	15%
8	22,665,380	9,711,233	43%	14,533	18%
9	22,585,783	10,277,322	46%	14,238	20%
10	23,078,802	8,170,314	35%	13,913	21%
11	17,411,216	10,704,864	61%	13,565	23%
12	17,284,497	11,485,995	66%	13,241	25%
13	17,072,762	12,181,436	71%	12,911	27%
14	16,852,439	12,469,881	74%	12,590	29%
15	16,726,302	16,837,802	101%	12,155	32%
16	16,863,219	15,203,147	90%	11,810	34%
17	17,331,367	21,051,370	121%	11,460	36%
18	17,716,537	20,649,565	117%	11,083	39%
19	18,516,113	19,237,279	104%	10,646	41%
20	19,629,497	21,694,431	111%	10,127	43%
21	20,194,646	21,541,666	107%	9,649	44%
22	20,470,923	22,169,522	108%	9,226	46%
23	19,778,672	22,373,185	113%	8,837	48%
24	18,867,873	23,056,542	122%	8,438	49%
25	18,079,731	23,979,374	133%	8,052	51%
26	17,206,421	24,656,649	143%	7,666	52%
27	16,085,357	25,932,160	161%	7,293	54%
28	14,839,072	27,570,649	186%	6,927	56%
29	13,554,493	29,134,408	215%	6,559	57%
30	12,321,470	30,533,635	248%	6,193	59%
31	11,127,732	31,788,385	286%	5,828	61%
32	9,985,658	32,915,756	330%	5,468	63%
33	8,906,546	33,888,172	380%	5,111	65%
34	7,896,217	34,656,186	439%	4,761	67%
35	6,958,322	35,015,532	503%	4,419	69%
36	6,095,259	35,101,873	576%	4,086	70%
37	5,307,395	34,913,531	658%	3,765	72%
38	4,593,385	34,462,350	750%	3,457	74%
39	3,951,394	33,748,775	854%	3,163	75%
40	3,379,040	32,729,267	969%	2,884	77%
41	2,872,515	31,469,539	1,096%	2,622	78%
42	2,427,753	30,027,127	1,237%	2,376	80%
43	2,039,974	28,442,690	1,394%	2,147	81%
44	1,704,697	26,783,129	1,571%	1,935	82%
45	1,417,112	25,034,617	1,767%	1,740	83%
46-50	4,095,369	97,938,617	2,391%	6,313	86%
51-55	1,424,187	55,367,888	3,888%	3,515	87%
56-60	435,224	26,625,873	6,118%	1,869	88%
61-65	113,012	11,438,053	10,121%	899	88%
66-70	24,303	4,332,891	17,829%	346	88%
71-75	4,230	1,191,476	28,167%	94	88%
Total	677,140,531	1,146,767,927	169%	423,553	88%

Attachment 6-a
MedAmerica
Actual and Projected Experience using Current Assumptions by Policy Year
Pennsylvania-Specific Experience Before Requested Rate Increase
Series 11 and Prior Policy Forms

Policy Year	A Earned Premium	B Incurred Claims	C Incurred Loss Ratio	D End of Year Lives	E Cumulative Loss Ratio w/ Max. Val. Interest
1	3,169,904	140,446	4%	1,671	4%
2	2,446,129	35,491	1%	1,451	3%
3	2,150,913	71,375	3%	1,333	3%
4	1,992,054	148,292	7%	1,250	4%
5	1,876,435	295,943	16%	1,179	6%
6	1,788,841	711,577	40%	1,132	10%
7	1,691,063	765,740	45%	1,081	13%
8	1,587,820	883,638	56%	1,023	16%
9	1,496,087	806,921	54%	966	19%
10	1,404,389	905,217	64%	911	21%
11	1,298,072	898,354	69%	851	23%
12	1,212,165	2,244,013	185%	787	30%
13	1,126,481	979,153	87%	741	31%
14	1,064,373	854,494	80%	698	33%
15	1,006,780	1,525,616	152%	658	36%
16	958,551	948,837	99%	618	37%
17	923,416	1,243,744	135%	581	39%
18	878,739	1,449,019	165%	548	41%
19	832,214	1,225,806	147%	506	43%
20	757,857	1,775,079	234%	467	46%
21	636,783	1,144,537	180%	423	47%
22	537,448	817,196	152%	371	48%
23	464,428	602,298	130%	336	48%
24	414,180	921,246	222%	305	49%
25	375,322	1,108,691	295%	285	51%
26	361,112	1,018,717	282%	263	52%
27	330,405	939,073	284%	242	52%
28	299,402	953,261	318%	222	53%
29	263,870	1,000,342	379%	201	54%
30	235,833	1,015,914	431%	183	55%
31	205,541	1,024,557	498%	166	56%
32	178,868	1,039,308	581%	150	57%
33	155,299	1,056,916	681%	136	58%
34	134,402	1,068,583	795%	123	58%
35	115,821	1,060,784	916%	111	59%
36	99,276	1,050,570	1,058%	100	60%
37	84,512	1,038,237	1,229%	90	61%
38	71,371	1,013,929	1,421%	80	61%
39	59,731	981,664	1,643%	72	62%
40	49,553	933,457	1,884%	64	62%
41	40,711	881,337	2,165%	57	63%
42	33,104	835,303	2,523%	50	63%
43	26,588	778,396	2,928%	44	64%
44	21,081	714,962	3,391%	39	64%
45	16,494	651,907	3,952%	34	64%
46-50	38,816	2,226,477	5,736%	112	65%
51-55	7,646	838,320	10,964%	52	65%
56-60	1,083	230,598	21,298%	24	65%
61-65	106	42,808	40,258%	11	65%
66-70	7	4,924	73,842%	5	65%
71-75	0	829	560,371%	2	65%
Total	34,921,076	44,903,894	129%	22,803	65%

Attachment 6-b
MedAmerica
Actual and Projected Experience using Current Assumptions by Policy Year
Pennsylvania-Specific Experience After Requested Rate Increase
Series 11 and Prior Policy Forms

Policy Year	A Earned Premium	B Incurred Claims	C Incurred Loss Ratio	D End of Year Lives	E Cumulative Loss Ratio w/ Max. Val. Interest
1	3,169,904	140,446	4%	1,671	4%
2	2,446,129	35,491	1%	1,451	3%
3	2,150,913	71,375	3%	1,333	3%
4	1,992,054	148,292	7%	1,250	4%
5	1,876,435	295,943	16%	1,179	6%
6	1,788,841	711,577	40%	1,132	10%
7	1,691,063	765,740	45%	1,081	13%
8	1,587,820	883,638	56%	1,023	16%
9	1,496,087	806,921	54%	966	19%
10	1,404,389	905,217	64%	911	21%
11	1,298,072	898,354	69%	851	23%
12	1,212,165	2,244,013	185%	787	30%
13	1,126,481	979,153	87%	741	31%
14	1,064,373	854,494	80%	698	33%
15	1,006,780	1,525,616	152%	658	36%
16	958,551	948,837	99%	618	37%
17	923,416	1,243,744	135%	581	39%
18	886,480	1,448,730	163%	548	41%
19	893,208	1,224,880	137%	506	43%
20	862,591	1,766,076	205%	465	45%
21	714,861	1,118,381	156%	418	47%
22	650,309	745,656	115%	362	47%
23	604,211	512,383	85%	327	48%
24	567,817	813,795	143%	296	48%
25	533,864	986,364	185%	277	49%
26	515,011	884,070	172%	255	50%
27	477,530	795,546	167%	234	51%
28	439,788	795,448	181%	214	51%
29	400,787	819,255	204%	193	52%
30	374,590	814,833	218%	175	53%
31	337,085	807,814	240%	158	53%
32	298,682	813,595	272%	143	54%
33	262,535	823,509	314%	129	54%
34	229,391	830,885	362%	117	55%
35	199,333	825,261	414%	105	55%
36	172,099	818,262	475%	95	56%
37	147,417	809,840	549%	85	56%
38	125,147	793,408	634%	77	57%
39	105,195	771,912	734%	69	57%
40	87,579	739,417	844%	61	58%
41	72,144	703,953	976%	55	58%
42	58,784	672,456	1,144%	48	58%
43	47,281	633,291	1,339%	43	59%
44	37,537	586,728	1,563%	38	59%
45	29,389	540,122	1,838%	33	59%
46-50	69,131	1,895,371	2,742%	110	60%
51-55	13,418	748,240	5,576%	52	60%
56-60	1,828	215,753	11,803%	24	60%
61-65	171	41,434	24,299%	11	60%
66-70	10	4,872	47,884%	5	60%
71-75	0	828	345,211%	2	60%
Total	37,408,674	40,261,217	108%	22,657	60%

MedAmerica

MedAmerica Insurance Company
Home Office: Pittsburgh, PA

MedAmerica Insurance Company of New York
Home Office: Rochester, NY

MedAmerica Insurance Company of Florida
Home Office: Orlando, FL

Letter of Authorization

To: Department of Insurance

MedAmerica Insurance Company ("MedAmerica") has entered into service agreements with Milliman, Inc. ("Milliman") that include long-term care rate filing services on our behalf. The agreements provide, 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

William L. Naylon

Bill Naylon, President
MedAmerica Insurance Company

9/8/2021
Date

MedAmerica Claim Administration and Processing Documentation

As the majority of policies to which this rate increase is applicable are eligible for a contingent benefit upon lapse, the following provides a demonstration that MedAmerica Insurance Company (MedAmerica) has consistently applied appropriate policy administration and claim processing procedures. These procedures are in place to assure that policyholders' long-term care claims are paid according to the provisions of our contracts.

Personal Care Advisors (PCAs) in our Claims Intake area determine whether a claimant qualifies for initial benefit eligibility, and create a plan of care for each eligible claimant. Our Rehabilitation/Case Management team then assigns a PCA to handle all aspects of the insured's contact with the Company, including care planning, ongoing care management, and supervision of claim payment.

While the PCAs are knowledgeable about all of the long term care products administered by the Company, each one specializes in a handful of products to increase claim payment accuracy. For chronically stable patients for whom rehabilitation is unlikely and site of care changes occur infrequently, specialized PCAs are assigned whose primary task is timely adjudication of claims and annual reassessment of benefit eligibility.

All claimants are reassessed at least once per year; claimants in Assisted Living or Home Care status are reassessed more frequently. All claims are reviewed prior to payment. Monthly claims audit procedures are in place. Anti-fraud activities are carried out by the staff of the Special Investigations Unit within our parent company.

MedAmerica management believes that these claims management practices are designed to pay claims correctly and help eliminate the potential for further deterioration of the policy form requiring further premium rate schedule increases.

MEDAmerica
INSURANCE COMPANY

Home Office: Pittsburgh, PA

***Time-Sensitive!* Action Needed - 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** between the hours of 8:30 a.m. and 5 p.m. EST, Monday through Friday.

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

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

Enclosure

MEDAmerica
INSURANCE COMPANY

Home Office: Pittsburgh, PA

Contingent Non-Forfeiture Benefit Election Form

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

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

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. This option is not a cash refund. 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.

8500 Normandale Lake Blvd.
Suite 1850
Minneapolis, MN 55437-3830
USA

Tel +1 952 897 5300

milliman.com

August 8, 2022

Valerie Romig
Pennsylvania Insurance Department (Department)

Via SERFF

Re: MedAmerica Insurance Company (MedAmerica)
Company NAIC # 69515
SERFF Tracking # MILL-133176375

Prior to Series 11	
Facility Only Form	**LTC-LBP-2PA**
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**

Dear Valerie:

Thank you for reviewing this filing. This letter is in response to your letter dated June 3 regarding the above-referenced filing. The remainder of this letter provides the additional information requested in your June 3 letter. Each request is restated in italics for reference.

1. *Please provide a table in an Excel spreadsheet (perhaps similar to Exhibit I-a, Series 11 and Prior Policy Forms) for this nationwide block of policies which shows the historical and projected nationwide earned premium and incurred claims on a calendar year basis assuming no rate increase is granted. Please restate the nationwide historical and projected earned premium so that the business from inception appears to have all been earned at the current Pennsylvania rate level.*

2. *Please provide a table in an Excel spreadsheet (perhaps similar to Exhibit I-a, Series 11 and Prior Policy Forms) for this nationwide block of policies which shows the historical and projected nationwide earned premium and incurred claims on a calendar year basis assuming no rate increase is granted. Please restate the nationwide historical and projected earned premium so that the business from inception appears to have all been earned at the original rate level.*

   Attachments 1 and 2 provide information like Exhibit I-a of the April 25 actuarial memorandum, except the premium has been restated to reflect (1) the current Pennsylvania rate level from inception and (2) the original rate level (i.e., assumes no rate increases were ever granted on any policy), respectively. Attachments 1 and 2 are provided in the enclosed Excel workbook, as requested.

This work product was prepared to solely 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.

We believe the Department's intent of restating premium to the current Pennsylvania rate level from inception and to reflect the original rate level in Attachments 1 and 2, respectively, is to evaluate the "if knew" premium and determine if the proposed rate increase recoups past losses. This approach is one of the most restrictive as it assumes the company could have had all of the knowledge that it has today at the time of issue. If the Department has concerns of recouping past losses, we respectfully request an opportunity to respond to such concerns prior to the Department making a decision regarding this filing.

3. *Please provide the percent of active policyholders remaining on a nationwide basis. How many policies were issued nationwide? How many policies remain in force nationwide? Please provide this information considering the entire block (i.e. pre Series 11, individual Series 11, and group Series 11).*

   The following table provides the (a) number of policies that were issued, (b) number of policies remaining in force, and (c) percent of in-force policyholders remaining on the above-listed policy form(s) and similar policy forms issued nationwide by MedAmerica and its affinity partners.

Nationwide Policy Data
Series 11 and Prior
As of December 31, 2020

Number of Policies Issued (a)	Number of Policies Remaining In Force[1] (b)	Percentage of Policies Remaining In Force (c) = (b) / (a)
20,952	7,821	37.3%

[1] Excludes policies assumed to be paid up prior to implementation of the requested rate increase.

4. *Please provide the cumulative weighted average increase granted on policies in force on this block in PA. Please provide this information considering pre Series 11 and Individual Series 11.*

   The average cumulative rate increase granted on the above-listed policy form(s) in Pennsylvania is 151% for policies issued prior to September 16, 2002 and 155% for policies on or after September 16, 2002 (the effective date of rate stability in Pennsylvania). The average cumulative rate increase across all issue dates is 152%.

5. *The cover letter describes the nonforfeiture options but no other downgrade choices. Please describe the other options policyholders have to mitigate the rate increase.*

   In addition to the contingent nonforfeiture option, policyholders may have the option to reduce or eliminate inflation protection, increase the elimination period, reduce the benefit period and/or the daily benefit amount, eliminate any optional riders, or any combination thereof.

6. *Please provide a table in Excel for the 159 Pennsylvania policies in force. Each row should contain the following information:*
   a. *Policy number,*
   b. *Policy form,*
   c. *Issue age,*
   d. *Inflation status indicator,*
   e. *Benefit period,*
   f. *Issue date,*
   g. *Requested rate increase.*

   Attachment 3 provides a seriatim listing showing the policy number (counting value, not the actual policyholder's policy number), policy form, issue date, issue age, inflation option (non-auto or auto), benefit period (non-lifetime or lifetime), and requested rate increase for each insured in force on the above-listed policy form(s) issued in Pennsylvania by MedAmerica as of December 31, 2020. Policies assumed to be paid-up prior to implementation of the requested rate increase are excluded from Attachment 3. Please note that actual requested rate increases may vary slightly from those provided in Attachment 3 due to

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implementation rounding algorithms. Attachment 3 is also provided in the enclosed Excel workbook, as requested.

7. *How many "Pre-Series 11" policies issued prior to 9/16/2002 have (a) Non-Lifetime Benefit Periods and Non-Auto Inflation, (b) Non-Lifetime Benefit Periods and Auto Inflation, (c) Lifetime Benefit Periods and Non-Auto Inflation, and (d) Lifetime Benefit Periods and Non-Auto Inflation?*

8. *How many "Pre-Series 11" policies issued after 9/15/2002 have (a) Non-Lifetime Benefit Periods and Non-Auto Inflation, (b) Non-Lifetime Benefit Periods and Auto Inflation, (c) Lifetime Benefit Periods and Non-Auto Inflation, and (d) Lifetime Benefit Periods and Non-Auto Inflation?*

9. *How many "Individual Series 11" policies issued prior to 9/16/2002 have (a) Non-Lifetime Benefit Periods and Non-Auto Inflation, (b) Non-Lifetime Benefit Periods and Auto Inflation, (c) Lifetime Benefit Periods and Non-Auto Inflation, and (d) Lifetime Benefit Periods and Non-Auto Inflation?*

10. *How many "Individual Series 11" policies issued after 9/15/2002 have (a) Non-Lifetime Benefit Periods and Non-Auto Inflation, (b) Non-Lifetime Benefit Periods and Auto Inflation, (c) Lifetime Benefit Periods and Non-Auto Inflation, and (d) Lifetime Benefit Periods and Non-Auto Inflation?*

    Table 3 of the April 25 supplement to the actuarial memorandum provides the number of in-force policyholders subject to the requested rate increase split by issue date, policy form cohort, benefit period, and inflation option.

Limitations and Qualifications

Milliman's work has been prepared solely for the use and benefit of MedAmerica. Milliman's work may not be provided to third parties without Milliman's prior written consent. Milliman does not intend to benefit any third-party recipient of its work product, even if Milliman consents to the release of its work product to such third party.

Milliman's work is being delivered to the Department, in accordance with its statutory and regulatory requirements. Milliman recognizes that materials it delivers to the Department may be public records subject to disclosure to third parties, however, Milliman does not intend to benefit and assumes no duty or liability to any third parties who receive Milliman's work and may include disclaimer language on its work product so stating. The Department agrees not to remove any such disclaimer language from Milliman's work. To the extent that Milliman's work is not subject to disclosure under applicable public records laws, the Department agrees that it shall not disclose Milliman's work product to third parties without Milliman's prior written consent; provided, however, that the Department may distribute Milliman's work to (i) its professional service providers who are subject to a duty of confidentiality and who agree to not use Milliman's work product for any purpose other than to provide services to the Department, or (ii) any applicable regulatory or governmental agency, as required.

We have developed certain models to estimate the values included in this analysis. The intent of the models was to estimate future experience. We have reviewed the models, including their inputs, calculations, and outputs for consistency, reasonableness, and appropriateness to the intended purpose and in compliance with generally accepted actuarial practice and relevant actuarial standards of practice.

In performing this analysis, we relied on data and other information provided by MedAmerica. We have not audited or verified this data and other information. If the underlying data or information is inaccurate or incomplete, the results of our analysis may likewise be inaccurate or incomplete. In that event, the results of our analysis may not be suitable for the intended purpose.

We performed a limited review of the data used directly in our analysis for reasonableness and consistency and have not found material defects in the data. If there are material defects in the data, it is possible that they would be uncovered by a detailed, systematic review and comparison of the data to search for data values that are questionable or for relationships that are materially inconsistent. Such a review was beyond the scope of our assignment.

This work product was prepared to solely 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.

Differences between our projections and actual amounts depend on the extent to which future experience conforms to the assumptions made for this analysis. It is certain that actual experience will not conform exactly to the assumptions used in this analysis. Actual amounts will differ from projected amounts to the extent that actual experience deviates from expected experience.

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

❖❖❖

Valerie, thank you for working with us to complete this filing in Pennsylvania. Please let me know if you have any additional questions. You can reach me directly at (952) 820-2478 or by e-mail at missy.gordon@milliman.com. Alternatively, you may contact Courtney Williamson, the contact of record for this filing, at (952) 820-2413 or by e-mail at courtney.williamson@milliman.com.

Respectfully,

Missy Gordon

Missy Gordon, FSA, MAAA
Principal and Consulting Actuary

MAG/ljh

Attachment 1: Nationwide Experience Restated to Current Pennsylvania Rate Level from Inception
Attachment 2: Nationwide Experience Restated to Original Rate Level
Attachment 3: Seriatim Listing of Pennsylvania Policyholders In-Force

Enclosure: Numerical exhibits in Excel

This work product was prepared to solely 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.

Attachment 1
MedAmerica and Affinity Partners
Actual and Projected Experience using Current Assumptions by Calendar Year
Nationwide Experience Restated to Reflect the Current Pennsylvania Rate Level from Inception
Series 11 and Prior Policy Forms

		Without Interest				With Max. Val. Interest		
		A	B	C = B / A	D	E	F	G = F / E
	Calendar Year	Earned Premium	Incurred Claims	Incurred Loss Ratio	End of Year Lives	Earned Premium	Incurred Claims	Incurred Loss Ratio
	1992	42,379	0	0%	111	194,914	0	0%
	1993	1,364,253	112,031	8%	634	5,412,427	430,246	8%
	1994	3,680,119	28,415	1%	1,371	13,530,758	103,529	1%
	1995	4,996,095	60,736	1%	1,372	17,160,898	210,754	1%
	1996	5,112,354	104,057	2%	1,558	16,409,244	308,070	2%
	1997	6,484,950	212,400	3%	1,924	19,362,637	665,019	3%
	1998	10,251,662	399,244	4%	3,429	28,549,836	1,159,914	4%
	1999	15,425,317	887,196	6%	4,078	40,550,464	2,385,287	6%
	2000	18,388,665	1,187,209	6%	4,284	46,021,779	3,047,834	7%
	2001	19,432,184	1,832,801	9%	4,632	46,418,541	4,463,401	10%
	2002	24,226,304	3,843,469	16%	6,102	55,169,619	8,857,991	16%
Historical	2003	33,979,543	2,227,233	7%	11,170	73,810,046	4,878,788	7%
Experience	2004	45,572,340	2,965,428	7%	12,226	94,514,303	6,211,895	7%
	2005	49,547,954	4,391,387	9%	13,488	98,261,617	8,774,852	9%
	2006	51,044,856	5,623,259	11%	13,513	96,664,288	10,716,509	11%
	2007	50,592,856	6,899,518	14%	13,718	91,502,910	12,591,570	14%
	2008	49,767,555	5,229,358	11%	13,739	85,998,954	9,119,986	11%
	2009	47,982,949	6,673,343	14%	13,466	79,293,345	11,119,395	14%
	2010	45,486,787	11,830,937	26%	13,187	71,907,291	18,853,256	26%
	2011	42,058,195	8,089,437	19%	12,941	63,604,447	12,323,190	19%
	2012	39,290,304	9,631,138	25%	13,156	56,820,408	14,010,454	25%
	2013	36,117,231	7,623,082	21%	12,984	49,953,197	10,634,520	21%
	2014	33,099,299	13,848,920	42%	12,750	43,794,273	18,442,823	42%
	2015	31,128,288	18,435,850	59%	12,491	39,418,523	23,478,296	60%
	2016	29,855,942	13,368,869	45%	12,449	36,178,930	16,295,274	45%
	2017	28,372,854	14,883,947	52%	11,950	32,933,218	17,356,309	53%
	2018	25,572,237	16,151,812	63%	11,668	28,447,989	18,026,784	63%
	2019	23,486,119	21,968,338	94%	11,400	25,038,484	23,465,719	94%
	2020	21,810,410	20,527,721	94%	11,115	22,280,667	20,983,052	94%
	2021	19,075,977	17,623,749	92%	10,766	18,674,122	17,242,360	92%
	2022	18,146,781	18,833,984	104%	10,427	17,024,997	17,638,723	104%
	2023	16,950,898	20,114,077	119%	10,092	15,243,394	18,033,756	118%
	2024	15,711,233	21,453,200	137%	9,750	13,545,128	18,414,968	136%
	2025	14,714,076	22,812,638	155%	9,407	12,162,749	18,749,198	154%
	2026	13,804,161	24,311,840	176%	9,061	10,941,622	19,132,703	175%
	2027	12,940,776	25,879,784	200%	8,718	9,836,159	19,503,095	198%
	2028	12,005,383	27,450,392	229%	8,372	8,750,138	19,811,031	226%
	2029	11,200,795	29,062,600	259%	8,025	7,830,624	20,088,369	257%
	2030	10,424,613	30,654,747	294%	7,677	6,991,822	20,295,629	290%
	2031	9,670,223	32,579,933	337%	7,327	6,223,340	20,662,668	332%
Projected	2032	8,932,660	34,485,405	386%	6,975	5,516,983	20,952,996	380%
Future	2033	8,216,986	36,222,522	441%	6,621	4,871,401	21,087,287	433%
Experience	2034	7,524,593	37,810,977	502%	6,268	4,282,858	21,093,533	493%
(60 Years)	2035	6,857,857	39,240,370	572%	5,915	3,748,373	20,980,262	560%
	2036	6,218,908	40,442,262	650%	5,563	3,264,897	20,725,368	635%
	2037	5,609,872	41,405,707	738%	5,215	2,829,510	20,341,372	719%
	2038	5,033,590	41,959,841	834%	4,873	2,439,738	19,763,781	810%
	2039	4,492,088	42,160,850	939%	4,536	2,092,807	19,044,203	910%
	2040	3,986,571	42,130,882	1,057%	4,208	1,785,690	18,252,233	1,022%
	2041	3,517,894	41,716,382	1,186%	3,891	1,515,383	17,334,046	1,144%
	2042	3,086,804	40,994,150	1,328%	3,584	1,279,059	16,341,667	1,278%
	2043	2,693,473	39,893,715	1,481%	3,291	1,073,841	15,257,482	1,421%
	2044	2,337,280	38,516,633	1,648%	3,013	896,783	14,135,781	1,576%
	2045	2,017,081	36,959,444	1,832%	2,749	744,995	13,017,473	1,747%
	2046	1,731,324	35,214,606	2,034%	2,501	615,691	11,902,021	1,933%
	2047	1,478,556	33,343,168	2,255%	2,269	506,383	10,816,543	2,136%
	2048	1,256,576	31,237,869	2,486%	2,054	414,557	9,725,795	2,346%
	2049	1,062,933	28,980,847	2,726%	1,855	337,879	8,662,175	2,564%
	2050	895,014	26,759,751	2,990%	1,671	274,199	7,678,618	2,800%
	2051-2055	2,686,701	100,728,337	3,749%	6,118	749,210	25,885,100	3,455%
	2056-2060	1,024,041	56,314,430	5,499%	3,483	240,219	11,952,938	4,976%
	2061-2065	359,678	28,897,438	8,034%	1,883	71,765	5,132,082	7,151%
	2066-2070	118,585	13,600,741	11,469%	918	20,254	2,035,310	10,049%
	2071-2075	37,722	5,778,520	15,319%	378	5,491	735,345	13,393%
	2076-2080	11,230	2,197,698	19,569%	126	1,392	244,823	17,582%
History		794,170,004	199,037,135	25%	256,906	1,379,204,007	278,914,718	20%
Future		235,832,932	1,187,769,490	504%	189,582	166,803,452	562,670,734	337%
Lifetime		1,030,002,936	1,386,806,625	135%	446,488	1,546,007,459	841,585,452	54%

Attachment 2
MedAmerica and Affinity Partners
Actual and Projected Experience using Current Assumptions by Calendar Year
Nationwide Experience Restated to Reflect the Original Rate Level
Series 11 and Prior Policy Forms

		Without Interest				With Max. Val. Interest		
		A	B	C = B / A	D	E	F	G = F / E
	Calendar Year	Earned Premium	Incurred Claims	Incurred Loss Ratio	End of Year Lives	Earned Premium	Incurred Claims	Incurred Loss Ratio
Historical Experience	1992	17,324	0	0%	111	79,677	0	0%
	1993	557,528	112,031	20%	634	2,211,915	430,246	19%
	1994	1,499,801	28,415	2%	1,371	5,514,522	103,529	2%
	1995	2,035,433	60,736	3%	1,372	6,991,756	210,754	3%
	1996	2,079,825	104,057	5%	1,558	6,677,030	308,070	5%
	1997	2,617,587	212,400	8%	1,924	7,820,284	665,019	9%
	1998	4,122,790	399,244	10%	3,429	11,486,943	1,159,914	10%
	1999	6,199,341	887,196	14%	4,078	16,301,718	2,385,287	15%
	2000	7,365,357	1,187,209	16%	4,284	18,438,288	3,047,834	17%
	2001	7,758,900	1,832,801	24%	4,632	18,538,716	4,463,401	24%
	2002	9,662,912	3,843,469	40%	6,102	22,008,975	8,857,991	40%
	2003	13,482,266	2,227,233	17%	11,170	29,290,068	4,878,788	17%
	2004	18,015,295	2,965,428	16%	12,226	37,366,130	6,211,895	17%
	2005	19,564,714	4,391,387	22%	13,488	38,802,857	8,774,852	23%
	2006	20,118,446	5,623,259	28%	13,513	38,099,748	10,716,509	28%
	2007	19,923,913	6,899,518	35%	13,718	36,034,533	12,591,570	35%
	2008	19,614,754	5,229,358	27%	13,739	33,892,566	9,119,986	27%
	2009	18,925,127	6,673,343	35%	13,466	31,271,857	11,119,395	36%
	2010	17,947,138	11,830,937	66%	13,187	28,368,914	18,853,256	66%
	2011	16,576,477	8,089,437	49%	12,941	25,065,830	12,323,190	49%
	2012	15,482,757	9,631,138	62%	13,156	22,387,674	14,010,454	63%
	2013	14,282,317	7,623,082	53%	12,984	19,750,931	10,634,520	54%
	2014	13,134,601	13,848,920	105%	12,750	17,376,382	18,442,823	106%
	2015	12,381,236	18,435,850	149%	12,491	15,676,808	23,478,296	150%
	2016	11,903,448	13,368,869	112%	12,449	14,422,689	16,295,274	113%
	2017	11,329,893	14,883,947	131%	11,950	13,149,594	17,356,309	132%
	2018	10,201,654	16,151,812	158%	11,668	11,348,052	18,026,784	159%
	2019	9,357,547	21,968,338	235%	11,400	9,975,610	23,465,719	235%
	2020	8,681,334	20,527,721	236%	11,115	8,868,378	20,983,052	237%
Projected Future Experience (60 Years)	2021	7,601,398	17,623,749	232%	10,766	7,441,378	17,242,360	232%
	2022	7,232,078	18,833,984	260%	10,427	6,785,321	17,638,723	260%
	2023	6,754,929	20,114,077	298%	10,092	6,074,976	18,033,756	297%
	2024	6,260,191	21,453,200	343%	9,750	5,397,742	18,414,968	341%
	2025	5,863,096	22,812,638	389%	9,407	4,847,242	18,749,198	387%
	2026	5,501,239	24,311,840	442%	9,061	4,361,330	19,132,703	439%
	2027	5,158,222	25,879,784	502%	8,718	3,921,655	19,503,095	497%
	2028	4,785,535	27,450,392	574%	8,372	3,488,914	19,811,031	568%
	2029	4,466,094	29,062,600	651%	8,025	3,123,307	20,088,369	643%
	2030	4,157,941	30,654,747	737%	7,677	2,789,760	20,295,629	728%
	2031	3,858,342	32,579,933	844%	7,327	2,484,078	20,662,668	832%
	2032	3,565,286	34,485,405	967%	6,975	2,202,990	20,952,996	951%
	2033	3,280,795	36,222,522	1,104%	6,621	1,945,978	21,087,287	1,084%
	2034	3,005,395	37,810,977	1,258%	6,268	1,711,553	21,093,533	1,232%
	2035	2,740,044	39,240,370	1,432%	5,915	1,498,550	20,980,262	1,400%
	2036	2,485,593	40,442,262	1,627%	5,563	1,305,769	20,725,368	1,587%
	2037	2,242,911	41,405,707	1,846%	5,215	1,132,071	20,341,372	1,797%
	2038	2,013,141	41,959,841	2,084%	4,873	976,485	19,763,781	2,024%
	2039	1,797,130	42,160,850	2,346%	4,536	837,934	19,044,203	2,273%
	2040	1,595,380	42,130,882	2,641%	4,208	715,227	18,252,233	2,552%
	2041	1,408,255	41,716,382	2,962%	3,891	607,182	17,334,046	2,855%
	2042	1,236,069	40,994,150	3,316%	3,584	512,681	16,341,667	3,187%
	2043	1,078,907	39,893,715	3,698%	3,291	430,586	15,257,482	3,543%
	2044	936,531	38,516,633	4,113%	3,013	359,727	14,135,781	3,930%
	2045	808,497	36,959,444	4,571%	2,749	298,958	13,017,473	4,354%
	2046	694,195	35,214,606	5,073%	2,501	247,170	11,902,021	4,815%
	2047	593,051	33,343,168	5,622%	2,269	203,372	10,816,543	5,319%
	2048	504,199	31,237,869	6,196%	2,054	166,566	9,725,795	5,839%
	2049	426,668	28,980,847	6,792%	1,855	135,820	8,662,175	6,378%
	2050	359,415	26,759,751	7,445%	1,671	110,277	7,678,618	6,963%
	2051-2055	1,080,367	100,728,337	9,324%	6,118	301,767	25,885,100	8,578%
	2056-2060	413,225	56,314,430	13,628%	3,483	97,114	11,952,938	12,308%
	2061-2065	145,804	28,897,438	19,819%	1,883	29,139	5,132,082	17,612%
	2066-2070	48,260	13,600,741	28,182%	918	8,251	2,035,310	24,668%
	2071-2075	15,368	5,778,520	37,601%	378	2,238	735,345	32,854%
	2076-2080	4,570	2,197,698	48,088%	126	567	244,823	43,173%
History		314,839,714	199,037,135	63%	256,906	547,218,444	278,914,718	51%
Future		94,118,124	1,187,769,490	1,262%	189,582	66,553,673	562,670,734	845%
Lifetime		408,957,837	1,386,806,625	339%	446,488	613,772,117	841,585,452	137%

Attachment 3
MedAmerica Insurance Company
Seriatim Listing of Pennsylvania Policyholders In Force as of December 31, 2020[1]
Series 11 and Prior Individual Policy Forms

Pennsylvania Policy Number	Policy Form Group	Issue Date	Issue Age	Inflation Option	Benefit Period	Requested Rate Increase
1	Prior to Series 11	10/15/1992	69	None	Non-Lifetime	0.0%
2	Prior to Series 11	11/17/1992	65	None	Non-Lifetime	0.0%
3	Prior to Series 11	12/3/1992	66	None	Non-Lifetime	0.0%
4	Prior to Series 11	2/5/1993	68	None	Non-Lifetime	0.0%
5	Prior to Series 11	3/5/1993	64	None	Non-Lifetime	0.0%
6	Prior to Series 11	4/10/1993	64	None	Non-Lifetime	0.0%
7	Prior to Series 11	5/10/1993	46	None	Non-Lifetime	0.0%
8	Prior to Series 11	6/29/1993	58	None	Non-Lifetime	0.0%
9	Prior to Series 11	11/5/1993	60	None	Non-Lifetime	0.0%
10	Prior to Series 11	12/7/1993	72	None	Non-Lifetime	0.0%
11	Prior to Series 11	1/27/1994	73	None	Non-Lifetime	0.0%
12	Prior to Series 11	2/10/1994	68	None	Non-Lifetime	0.0%
13	Prior to Series 11	3/2/1994	67	None	Non-Lifetime	0.0%
14	Prior to Series 11	3/3/1994	64	None	Non-Lifetime	0.0%
15	Prior to Series 11	4/9/1994	60	None	Non-Lifetime	0.0%
16	Prior to Series 11	4/9/1994	61	None	Non-Lifetime	0.0%
17	Prior to Series 11	5/20/1994	64	None	Non-Lifetime	0.0%
18	Prior to Series 11	6/14/1994	66	None	Non-Lifetime	0.0%
19	Prior to Series 11	6/21/1994	59	None	Non-Lifetime	0.0%
20	Prior to Series 11	6/30/1994	66	None	Non-Lifetime	0.0%
21	Prior to Series 11	8/4/1994	54	None	Non-Lifetime	0.0%
22	Prior to Series 11	9/8/1994	61	None	Non-Lifetime	0.0%
23	Prior to Series 11	9/14/1994	63	None	Non-Lifetime	0.0%
24	Prior to Series 11	9/28/1994	65	None	Non-Lifetime	0.0%
25	Prior to Series 11	10/24/1994	59	None	Non-Lifetime	0.0%
26	Prior to Series 11	12/20/1994	64	None	Non-Lifetime	0.0%
27	Prior to Series 11	1/18/1995	63	None	Non-Lifetime	0.0%
28	Prior to Series 11	1/24/1995	63	None	Non-Lifetime	0.0%
29	Prior to Series 11	3/16/1995	64	None	Non-Lifetime	0.0%
30	Prior to Series 11	3/20/1995	69	None	Non-Lifetime	0.0%
31	Prior to Series 11	3/27/1995	66	None	Non-Lifetime	0.0%
32	Prior to Series 11	6/20/1995	64	None	Non-Lifetime	0.0%
33	Prior to Series 11	8/28/1995	72	None	Non-Lifetime	0.0%
34	Prior to Series 11	4/1/1996	61	None	Non-Lifetime	0.0%
35	Prior to Series 11	8/19/1996	64	None	Non-Lifetime	0.0%
36	Prior to Series 11	10/16/1996	64	None	Non-Lifetime	0.0%
37	Prior to Series 11	2/22/2000	72	None	Non-Lifetime	0.0%
38	Prior to Series 11	3/1/2000	70	None	Non-Lifetime	0.0%
39	Prior to Series 11	1/13/1993	64	None	Lifetime	208.3%
40	Prior to Series 11	6/24/1994	57	None	Lifetime	208.3%
41	Prior to Series 11	6/24/1994	64	None	Lifetime	208.3%
42	Prior to Series 11	9/23/1994	57	None	Lifetime	208.3%
43	Prior to Series 11	9/23/1994	62	None	Lifetime	208.3%
44	Prior to Series 11	3/7/1995	64	None	Lifetime	208.3%
45	Prior to Series 11	7/2/1996	53	None	Lifetime	208.3%
46	Prior to Series 11	10/30/1992	70	Auto	Non-Lifetime	90.2%
47	Prior to Series 11	1/14/1993	66	Auto	Non-Lifetime	90.2%
48	Prior to Series 11	3/10/1993	59	Auto	Non-Lifetime	90.2%
49	Prior to Series 11	5/18/1993	67	Auto	Non-Lifetime	90.2%
50	Prior to Series 11	8/30/1993	64	Auto	Non-Lifetime	90.2%

Attachment 3
MedAmerica Insurance Company
Seriatim Listing of Pennsylvania Policyholders In Force as of December 31, 2020[1]
Series 11 and Prior Individual Policy Forms

Pennsylvania Policy Number	Policy Form Group	Issue Date	Issue Age	Inflation Option	Benefit Period	Requested Rate Increase
51	Prior to Series 11	2/3/1994	50	Auto	Non-Lifetime	90.2%
52	Prior to Series 11	3/11/1994	51	Auto	Non-Lifetime	90.2%
53	Prior to Series 11	3/17/1994	67	Auto	Non-Lifetime	90.2%
54	Prior to Series 11	3/24/1994	50	Auto	Non-Lifetime	90.2%
55	Prior to Series 11	4/4/1994	55	Auto	Non-Lifetime	90.2%
56	Prior to Series 11	4/4/1994	61	Auto	Non-Lifetime	90.2%
57	Prior to Series 11	6/4/1994	59	Auto	Non-Lifetime	90.2%
58	Prior to Series 11	6/27/1994	54	Auto	Non-Lifetime	90.2%
59	Prior to Series 11	8/17/1994	66	Auto	Non-Lifetime	90.2%
60	Prior to Series 11	8/31/1994	53	Auto	Non-Lifetime	90.2%
61	Prior to Series 11	9/14/1994	56	Auto	Non-Lifetime	90.2%
62	Prior to Series 11	10/27/1994	51	Auto	Non-Lifetime	90.2%
63	Prior to Series 11	10/27/1994	51	Auto	Non-Lifetime	90.2%
64	Prior to Series 11	12/13/1994	62	Auto	Non-Lifetime	90.2%
65	Prior to Series 11	4/8/1996	59	Auto	Non-Lifetime	90.2%
66	Prior to Series 11	4/26/1996	62	Auto	Non-Lifetime	90.2%
67	Prior to Series 11	5/14/1998	60	Auto	Non-Lifetime	90.2%
68	Prior to Series 11	10/1/1999	69	Auto	Non-Lifetime	90.2%
69	Prior to Series 11	12/1/1999	51	Auto	Non-Lifetime	90.2%
70	Prior to Series 11	12/8/1999	66	Auto	Non-Lifetime	90.2%
71	Prior to Series 11	12/14/1999	65	Auto	Non-Lifetime	90.2%
72	Prior to Series 11	6/9/2000	73	Auto	Non-Lifetime	90.2%
73	Prior to Series 11	9/18/1995	47	Auto	Lifetime	259.3%
74	Prior to Series 11	8/1/1998	69	Auto	Lifetime	259.3%
75	Prior to Series 11	3/11/1999	51	Auto	Lifetime	259.3%
76	Prior to Series 11	9/1/2000	52	Auto	Lifetime	259.3%
77	Series 11 Individual	4/1/2001	54	None	Non-Lifetime	0.0%
78	Series 11 Individual	5/21/2001	65	None	Non-Lifetime	0.0%
79	Series 11 Individual	1/16/2002	59	None	Non-Lifetime	0.0%
80	Series 11 Individual	4/3/2002	73	None	Non-Lifetime	0.0%
81	Series 11 Individual	3/24/2003	46	None	Non-Lifetime	0.0%
82	Series 11 Individual	4/1/2003	54	None	Non-Lifetime	0.0%
83	Series 11 Individual	6/1/2003	50	None	Non-Lifetime	0.0%
84	Series 11 Individual	7/7/2003	65	None	Non-Lifetime	0.0%
85	Series 11 Individual	11/1/2001	63	None	Lifetime	208.3%
86	Series 11 Individual	4/13/2001	56	Auto	Non-Lifetime	90.2%
87	Series 11 Individual	6/13/2001	56	Auto	Non-Lifetime	90.2%
88	Series 11 Individual	6/13/2001	58	Auto	Non-Lifetime	90.2%
89	Series 11 Individual	9/1/2001	55	Auto	Non-Lifetime	90.2%
90	Series 11 Individual	11/16/2001	62	Auto	Non-Lifetime	90.2%
91	Series 11 Individual	11/26/2001	53	Auto	Non-Lifetime	90.2%
92	Series 11 Individual	12/17/2001	54	Auto	Non-Lifetime	90.2%
93	Series 11 Individual	12/27/2001	67	Auto	Non-Lifetime	90.2%
94	Series 11 Individual	12/27/2001	67	Auto	Non-Lifetime	90.2%
95	Series 11 Individual	1/2/2002	53	Auto	Non-Lifetime	90.2%
96	Series 11 Individual	1/2/2002	56	Auto	Non-Lifetime	90.2%
97	Series 11 Individual	1/7/2002	52	Auto	Non-Lifetime	90.2%
98	Series 11 Individual	1/7/2002	54	Auto	Non-Lifetime	90.2%
99	Series 11 Individual	1/10/2002	59	Auto	Non-Lifetime	90.2%
100	Series 11 Individual	1/10/2002	68	Auto	Non-Lifetime	90.2%

Attachment 3
MedAmerica Insurance Company
Seriatim Listing of Pennsylvania Policyholders In Force as of December 31, 2020[1]
Series 11 and Prior Individual Policy Forms

Pennsylvania Policy Number	Policy Form Group	Issue Date	Issue Age	Inflation Option	Benefit Period	Requested Rate Increase
101	Series 11 Individual	1/15/2002	50	Auto	Non-Lifetime	90.2%
102	Series 11 Individual	1/28/2002	55	Auto	Non-Lifetime	90.2%
103	Series 11 Individual	2/1/2002	54	Auto	Non-Lifetime	90.2%
104	Series 11 Individual	3/1/2002	55	Auto	Non-Lifetime	90.2%
105	Series 11 Individual	3/6/2002	62	Auto	Non-Lifetime	90.2%
106	Series 11 Individual	4/1/2002	61	Auto	Non-Lifetime	90.2%
107	Series 11 Individual	4/11/2002	45	Auto	Non-Lifetime	90.2%
108	Series 11 Individual	4/24/2002	66	Auto	Non-Lifetime	90.2%
109	Series 11 Individual	5/15/2002	47	Auto	Non-Lifetime	90.2%
110	Series 11 Individual	5/15/2002	60	Auto	Non-Lifetime	90.2%
111	Series 11 Individual	6/14/2002	68	Auto	Non-Lifetime	90.2%
112	Series 11 Individual	9/1/2002	67	Auto	Non-Lifetime	90.2%
113	Series 11 Individual	11/25/2002	55	Auto	Non-Lifetime	90.1%
114	Series 11 Individual	11/25/2002	60	Auto	Non-Lifetime	90.1%
115	Series 11 Individual	11/25/2002	61	Auto	Non-Lifetime	90.1%
116	Series 11 Individual	1/1/2003	47	Auto	Non-Lifetime	90.1%
117	Series 11 Individual	1/1/2003	65	Auto	Non-Lifetime	90.1%
118	Series 11 Individual	3/5/2003	62	Auto	Non-Lifetime	90.1%
119	Series 11 Individual	7/16/2003	69	Auto	Non-Lifetime	90.1%
120	Series 11 Individual	7/21/2003	47	Auto	Non-Lifetime	90.1%
121	Series 11 Individual	7/21/2003	48	Auto	Non-Lifetime	90.1%
122	Series 11 Individual	8/14/2003	64	Auto	Non-Lifetime	90.1%
123	Series 11 Individual	9/1/2003	52	Auto	Non-Lifetime	90.1%
124	Series 11 Individual	9/29/2003	55	Auto	Non-Lifetime	90.1%
125	Series 11 Individual	9/29/2003	57	Auto	Non-Lifetime	90.1%
126	Series 11 Individual	11/13/2003	59	Auto	Non-Lifetime	90.1%
127	Series 11 Individual	11/24/2003	56	Auto	Non-Lifetime	90.1%
128	Series 11 Individual	12/1/2003	46	Auto	Non-Lifetime	90.1%
129	Series 11 Individual	12/8/2003	60	Auto	Non-Lifetime	90.1%
130	Series 11 Individual	12/8/2003	63	Auto	Non-Lifetime	90.1%
131	Series 11 Individual	12/8/2003	63	Auto	Non-Lifetime	90.1%
132	Series 11 Individual	12/23/2003	58	Auto	Non-Lifetime	90.1%
133	Series 11 Individual	1/1/2004	42	Auto	Non-Lifetime	90.1%
134	Series 11 Individual	1/1/2004	47	Auto	Non-Lifetime	90.1%
135	Series 11 Individual	1/1/2004	58	Auto	Non-Lifetime	90.1%
136	Series 11 Individual	1/6/2004	65	Auto	Non-Lifetime	90.1%
137	Series 11 Individual	2/1/2004	48	Auto	Non-Lifetime	90.1%
138	Series 11 Individual	2/19/2004	66	Auto	Non-Lifetime	90.1%
139	Series 11 Individual	11/28/2000	48	Auto	Lifetime	259.3%
140	Series 11 Individual	7/6/2001	54	Auto	Lifetime	259.3%
141	Series 11 Individual	7/6/2001	54	Auto	Lifetime	259.3%
142	Series 11 Individual	7/9/2001	59	Auto	Lifetime	259.3%
143	Series 11 Individual	9/22/2001	52	Auto	Lifetime	259.3%
144	Series 11 Individual	11/13/2001	50	Auto	Lifetime	259.3%
145	Series 11 Individual	12/10/2001	55	Auto	Lifetime	259.3%
146	Series 11 Individual	12/20/2001	55	Auto	Lifetime	259.3%
147	Series 11 Individual	1/21/2002	56	Auto	Lifetime	259.3%
148	Series 11 Individual	1/25/2002	51	Auto	Lifetime	259.3%
149	Series 11 Individual	1/28/2002	56	Auto	Lifetime	259.3%
150	Series 11 Individual	8/15/2002	54	Auto	Lifetime	259.3%

Attachment 3
MedAmerica Insurance Company
Seriatim Listing of Pennsylvania Policyholders In Force as of December 31, 2020[1]
Series 11 and Prior Individual Policy Forms

Pennsylvania Policy Number	Policy Form Group	Issue Date	Issue Age	Inflation Option	Benefit Period	Requested Rate Increase
151	Series 11 Individual	9/1/2002	54	Auto	Lifetime	259.3%
152	Series 11 Individual	9/1/2002	59	Auto	Lifetime	259.3%
153	Series 11 Individual	8/12/2003	63	Auto	Lifetime	229.4%
154	Series 11 Individual	9/14/2003	43	Auto	Lifetime	229.4%
155	Series 11 Individual	9/29/2003	58	Auto	Lifetime	229.4%
156	Series 11 Individual	10/24/2003	54	Auto	Lifetime	229.4%
157	Series 11 Individual	11/13/2003	45	Auto	Lifetime	229.4%
158	Series 11 Individual	1/1/2004	51	Auto	Lifetime	229.4%
159	Series 11 Individual	1/1/2004	51	Auto	Lifetime	229.4%

[1] Excludes policies assumed to be paid up prior to implementation of the requested rate increase.

8500 Normandale Lake Blvd.
Suite 1850
Minneapolis, MN 55437-3830
USA

Tel +1 952 897 5300

milliman.com

October 18, 2022

Valerie Romig
Pennsylvania Insurance Department (Department)

Via SERFF

Re: MedAmerica Insurance Company (MedAmerica)
Company NAIC # 69515
SERFF Tracking # MILL-133176375

Prior to Series 11	
Facility Only Form	**LTC-LBP-2PA**
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**

Dear Valerie:

Thank you for reviewing this filing. This letter is in response to your letter dated September 15 regarding the above-referenced filing. The remainder of this letter provides the additional information requested in your September 15 letter. Each request is restated in italics for reference.

1. *Please provide a detailed narrative on what is driving the large future loss ratios. For example, if morbidity changes are negatively impacting the future loss ratios, please explain what the original assumption was, what the revised assumption was, and what is driving the revised assumption to differ from the original assumption.*

   The adverse experience on this block is driven by higher persistency, higher morbidity, and lower interest. The higher persistency is driven by both lower mortality and voluntary lapse compared to original pricing expectations (see Attachments 3 and 4 described below). While morbidity has been favorable historically compared to original pricing expectations (see Attachment 2 described below), it is developing adversely at later attained ages. This adverse development at later attained ages contributes to higher future loss ratios. Interest has also been adverse compared to original pricing expectations. The original pricing expectation varied by policy form and averaged 7.1% whereas the current future expectation is 4.25%.

   Additional information on the original pricing assumptions and current assumptions is provided in the responses to the next two objections.

This work product was prepared to solely 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.

2. *On page 9 of the actuarial memorandum, it states, "The adverse experience may be due to a combination of higher persistency, higher morbidity, and lower interest." Please provide a detailed narrative on each of these factors and explain what the original assumption was, what the revised assumption was, and what is driving the revised assumption to differ from the original assumption.*

   Section 6 of the April 25 actuarial memorandum provides a summary of the current (first principles basis) assumptions. Exhibit III of the April 25 actuarial memorandum provides a summary of the original pricing (all lives basis) assumptions. All assumptions have been revised from those assumed at the time of original pricing.

   Attachment 1 provides a comparison of actual and projected nationwide experience to that expected in pricing with respect to morbidity, mortality, lapse, interest, and improvement. Because the current and original pricing assumptions are on different bases, the change from original pricing to current lapse, mortality, and morbidity is not available. As such, Attachment 1 reflects the combined impact of the change in the lapse, mortality, and morbidity assumptions. If these increments are material to the Department's review, estimations of the impact can be developed upon request.

   The revised assumptions are based on recent experience as outlined in Appendix A to the April 25 actuarial memorandum.

3. *Exhibit III provides a summary of the original pricing assumptions. Please provide a similar exhibit that explains what the experience has actually been.*

   Attachment 2 provides morbidity actual-to-expected (A:E) ratios where "E" reflects the original pricing assumption. Attachment 2 provides the actual incurred claims, expected incurred claims under the original pricing assumption, and A:E ratios by attained age band.

   Attachment 3 provides voluntary lapse A:E ratios where "E" reflects the original pricing assumption for policies with a lifetime premium payment option. Attachment 3 provides the actual voluntary lapse probabilities, expected voluntary lapse probabilities under the original pricing assumption, and A:E ratios by duration.

   Attachment 4 provides mortality A:E ratios where "E" reflects the original pricing assumption. Attachment 4 provides the actual mortality probabilities, expected mortality probabilities under the original pricing assumption, and A:E ratios by duration.

   The experience underlying Attachments 2 through 4 is consistent with that underlying Exhibit I of the April 25 actuarial memorandum for experience from 2008 through 2017 with runout through 2018.

4. *On page 1 of Appendix A, it states, "The persistency and morbidity assumptions were developed using historical experience and predictive analytics. Where actual experience was limited or did not exist, industry experience and actuarial judgment was also used." Please provide a detailed narrative that explains how actuarial judgment was used in any of the current actuarial assumptions that were used in this filing.*

   As described in Appendix A to the April 25 actuarial memorandum, actuarial judgment was used in developing the assumptions. The experience adjustment factors developed from the model were reviewed to ensure reasonable and smooth results. For example, the lifetime-pay voluntary lapse attained age adjustment factors developed from the model produced a U-shaped pattern. The model's adjustment factors were then refined to produce an ultimate voluntary lapse assumption that is monotonically non-increasing by attained age. An additional attained age adjustment was then developed for active mortality to capture the older-age terminations such that the combined active mortality and voluntarily lapse assumption better aligns with actual experience.

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Limitations and Qualifications

Milliman's work has been prepared solely for the use and benefit of MedAmerica. Milliman's work may not be provided to third parties without Milliman's prior written consent. Milliman does not intend to benefit any third-party recipient of its work product, even if Milliman consents to the release of its work product to such third party.

Milliman's work is being delivered to the Department, in accordance with its statutory and regulatory requirements. Milliman recognizes that materials it delivers to the Department may be public records subject to disclosure to third parties, however, Milliman does not intend to benefit and assumes no duty or liability to any third parties who receive Milliman's work and may include disclaimer language on its work product so stating. The Department agrees not to remove any such disclaimer language from Milliman's work. To the extent that Milliman's work is not subject to disclosure under applicable public records laws, the Department agrees that it shall not disclose Milliman's work product to third parties without Milliman's prior written consent; provided, however, that the Department may distribute Milliman's work to (i) its professional service providers who are subject to a duty of confidentiality and who agree to not use Milliman's work product for any purpose other than to provide services to the Department, or (ii) any applicable regulatory or governmental agency, as required.

We have developed certain models to estimate the values included in this analysis. The intent of the models was to estimate future experience. We have reviewed the models, including their inputs, calculations, and outputs for consistency, reasonableness, and appropriateness to the intended purpose and in compliance with generally accepted actuarial practice and relevant actuarial standards of practice.

In performing this analysis, we relied on data and other information provided by MedAmerica. We have not audited or verified this data and other information. If the underlying data or information is inaccurate or incomplete, the results of our analysis may likewise be inaccurate or incomplete. In that event, the results of our analysis may not be suitable for the intended purpose.

We performed a limited review of the data used directly in our analysis for reasonableness and consistency and have not found material defects in the data. If there are material defects in the data, it is possible that they would be uncovered by a detailed, systematic review and comparison of the data to search for data values that are questionable or for relationships that are materially inconsistent. Such a review was beyond the scope of our assignment.

Differences between our projections and actual amounts depend on the extent to which future experience conforms to the assumptions made for this analysis. It is certain that actual experience will not conform exactly to the assumptions used in this analysis. Actual amounts will differ from projected amounts to the extent that actual experience deviates from expected experience.

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

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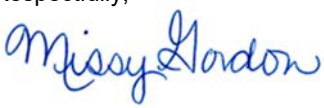
❖❖❖

Valerie, thank you for working with us to complete this filing in Pennsylvania. Please let me know if you have any additional questions. You can reach me directly at (952) 820-2478 or by e-mail at missy.gordon@milliman.com. Alternatively, you may contact Courtney Williamson, the contact of record for this filing, at (952) 820-2413 or by e-mail at courtney.williamson@milliman.com.

Respectfully,



Missy Gordon, FSA, MAAA
Principal and Consulting Actuary

MAG/caw

Attachment 1: Impact of Assumption Changes from Pricing
Attachment 2: Actual-to-Expected Morbidity Experience Under Pricing Assumptions
Attachment 3: Actual-to-Expected Lapse Experience Under Pricing Assumptions
Attachment 4: Actual-to-Expected Mortality Experience Under Pricing Assumptions

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Attachment 1
MedAmerica and Affinity Partners
Nationwide Experience with Prior Approved Increases
Impact of Changing from Pricing to Current Assumptions
Series 11 and Prior Policy Forms

Scenario	Lifetime Loss Ratio	Incremental Impact on the Lifetime Loss Ratio[1]	Increase Needed[2]
Original Pricing Assumptions	64%	N/A	N/A
Historical Experience through 2020 & Projections with Pricing Assumptions[3]	75%	17%	180%
Historical Experience through 2020 & Projections with Pricing Assumptions Except for Current:			
Interest	86%	14%	122%
Interest & Lapse & Mortality & Morbidity[4]	113%	32%	229%
Interest & Lapse & Mortality & Morbidity & Improvement	112%	-1%	-7%
Historical Experience through 2020 & Projections with All Current Most-Likely Assumptions[5]	112%	75%	528%

[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, and adverse selection due to the needed rate increase.

[3] This row reflects actual historical experience and pricing assumptions projected from the valuation date, reflecting prior rate increases filed for use between January 2010 and April 2021.

[4] This row reflects the combined impact of the change in the lapse, mortality, and morbidity assumptions due to the change in assumption bases.

[5] This row is calculated in regards to the pricing lifetime loss ratio of 64%.

Attachment 2
MedAmerica and Affinity Partners
Actual-to-Expected Incurred Claims by Attained Age
with Expected as the Original Pricing Assumptions
Experience from January 2008 through December 2020
Series 11 and Prior Policy Forms

Attained Age	(A) Actual Incurred Claims	(B) Expected Incurred Claims	(C) = (A) / (B) Actual-to-Expected
<40	636	101,845	0.01
40-44	1,328	182,359	0.01
45-49	1,059,351	562,359	1.88
50-54	844,665	1,407,446	0.60
55-59	2,679,985	3,468,591	0.77
60-64	6,141,632	8,159,049	0.75
65-69	11,168,620	16,201,310	0.69
70-74	21,080,761	25,110,284	0.84
75-79	29,371,166	35,457,125	0.83
80-84	44,059,766	41,033,383	1.07
85-89	37,069,851	35,039,272	1.06
90-94	13,101,630	13,100,838	1.00
95-99	1,683,362	2,455,109	0.69
100+	0	100,143	0.00
All	168,262,752	182,379,114	0.92
80+	95,914,608	91,728,745	1.05

Attachment 3
MedAmerica and Affinity Partners
Actual-to-Expected Lifetime-Pay Voluntary Lapse by Duration
with Expected as the Original Pricing Assumptions
Experience from 2008 through 2017 with Runout through 2018
Series 11 and Prior Policy Forms

Policy Duration	(A) Actual All-Life Voluntary Lapse Probabilities	(B) Expected All-Life Voluntary Lapse Probabilities[1]	(C) = (A) / (B) Actual-to-Expected
10	1.40%	2.59%	0.54
11	1.13%	2.71%	0.42
12	0.76%	2.80%	0.27
13	0.55%	2.88%	0.19
14	0.42%	2.97%	0.14
15	0.52%	3.16%	0.16
16	0.96%	3.55%	0.27
17	0.78%	3.84%	0.20
18	0.20%	3.90%	0.05
19	0.35%	3.87%	0.09
20	0.72%	4.02%	0.18
10+	0.81%	2.98%	0.27

[1] Pricing used a lapse probability assumption only (i.e., implicitly captures both voluntary lapse and benefit expiry).

Attachment 4
MedAmerica and Affinity Partners
Actual-to-Expected Mortality by Duration
with Expected as the Original Pricing Assumptions
Experience from 2008 through 2017 with Runout through 2018
Series 11 and Prior Policy Forms

Policy Duration	(A) Actual All-Life Mortality Probabilities	(B) Expected All-Life Mortality Probabilities	(C) = (A) / (B) Actual-to-Expected
7	0.61%	1.62%	0.38
8	0.65%	1.83%	0.35
9	0.78%	2.09%	0.37
10	0.78%	2.38%	0.33
11	1.20%	2.77%	0.43
12	1.17%	3.11%	0.38
13	1.54%	3.51%	0.44
14	1.85%	4.03%	0.46
15	2.39%	5.10%	0.47
16	3.08%	6.99%	0.44
17	3.93%	7.98%	0.49
18	4.62%	8.71%	0.53
19	4.64%	9.63%	0.48
20	5.23%	11.35%	0.46
7+	1.55%	3.56%	0.44

8500 Normandale Lake Blvd.
Suite 1850
Minneapolis, MN 55437-3830
USA

Tel +1 952 897 5300

milliman.com

November 16, 2022

Valerie Romig
Pennsylvania Insurance Department (Department)

Via SERFF

Re: MedAmerica Insurance Company (MedAmerica)
Company NAIC # 69515
SERFF Tracking # MILL-133176375

Prior to Series 11	
Facility Only Form	**LTC-LBP-2PA**
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**

Dear Valerie:

Thank you for reviewing this filing. This letter is in response to your October 26 letter regarding the above-referenced filing. The remainder of this letter provides the additional information requested in your October 26 letter. The request is restated in italics for reference.

The Department cannot approve this filing as submitted. Please propose a series of increases staged over no more than four years such that the cumulative aggregate value of the proposed increases is no greater than that scheduled in this filing, no greater than 99.9% over the implementation period, and no greater than 30% in any year.

Lastly, please provide a seriatim listing of the 159 MedAmerica policies in this block in Excel. Each row within the worksheet must contain the policy's unique identification number, form number, series, issue age, issue date, inflation status indicator, benefit period, current premium, and MedAmerica's suggested premium increase in each year of the proposed implementation period.

If MedAmerica would like to accept our offer, then please respond with an acceptance letter and the seriatim listing in Excel.

We have spoken with the company, and it is willing to accept the Department's offer. Table 1 below outlines the proposed rate increase schedule.

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Table 1
Pennsylvania – MedAmerica
Revised Rate Increase by Cohort
All Issue Dates

Policy Form Cohort	Benefit Period	Inflation Option	Year 1 Increase	Year 2 Increase	Year 3 Increase	Composite Increase
Prior to Series 11	Non-Lifetime	Non-Auto	0.0%	0.0%	0.0%	0.0%
	Non-Lifetime	Auto	30.0	30.0	17.0	97.7
	Lifetime	Non-Auto	30.0	30.0	18.3	99.9
	Lifetime	Auto	30.0	30.0	18.3	99.9
Series 11 Individual	Non-Lifetime	Non-Auto	0.0	0.0	0.0	0.0
	Non-Lifetime	Auto	30.0	30.0	17.0	97.7
	Lifetime	Non-Auto	30.0	30.0	18.3	99.9
	Lifetime	Auto	30.0	30.0	18.3	99.9

For policies with a non-lifetime benefit period and auto inflation, the proposed rate increase schedule was determined to be actuarially equivalent to the original request. This series of rate increases produces the same lifetime loss ratio for this cohort as that produced by the one-time rate increases shown in the April 25 cover letter. Attachment A provides information like Exhibit I-b of the April 25 actuarial memorandum (Actuarial Memorandum) except reflects nationwide experience restated to the actual Pennsylvania rate level for policies with a non-lifetime benefit period and auto inflation after the one-time rate increase request using an interest rate consistent with that shown in Section 16 of the Actuarial Memorandum. Attachment B provides information like Attachment A except reflects the proposed phased-in rate increase schedule. As can be seen, the phased-in rate increase (Attachment B) produces the same lifetime loss ratio as the one-time increase (Attachment A). Attachments A and B are provided in Excel, as generally requested.

Although the company is willing to accept a reduced rate increase for policies with a lifetime benefit period, it still believes the original requested increase is justified and reasonable. Therefore, its willingness to accept a reduced rate increase does not constitute a rate guarantee as the company anticipates requesting additional rate increases in Pennsylvania until the cumulative rate increase approved is actuarially equivalent to the original request. The company reserves the right to request additional rate increases in Pennsylvania during the three-year phase-in period such that the Department has adequate time to review the filing and that any future approved increase can be implemented immediately following the phase-in period, if actuarially justified by continuing experience.

Rate tables reflecting the revised rate increases for each of the next three years are enclosed with this letter. Please note that the actual rates implemented may vary slightly from those in the enclosed rate tables due to implementation rounding algorithms.

Through a SERFF post-submission update, we revised the Rate/Rule Schedule tab to reflect the proposed rate increase schedule outlined in Table 1. We respectfully request that the Department acknowledge the post-submission update prior to issuing the disposition in order for the disposition to capture this change.

Attachment C provides a seriatim listing including the policy number (counting value, not the actual policyholder's policy number), form number, series, issue age, issue date, inflation status indicator, benefit period, current annual premium, and the premium rate increase for each year of the proposed implementation schedule. Attachment C is provided in the enclosed Excel file, as requested.

Limitations and Qualifications

Milliman's work has been prepared solely for the use and benefit of MedAmerica. Milliman's work may not be provided to third parties without Milliman's prior written consent. Milliman does not intend to benefit any third-party recipient of its work product, even if Milliman consents to the release of its work product to such third party.

Milliman's work is being delivered to the Department, in accordance with its statutory and regulatory requirements. Milliman recognizes that materials it delivers to the Department may be public records subject to disclosure to third parties, however, Milliman does not intend to benefit and assumes no duty or liability to any third parties who receive

This work product was prepared to solely 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.

Milliman's work and may include disclaimer language on its work product so stating. The Department agrees not to remove any such disclaimer language from Milliman's work. To the extent that Milliman's work is not subject to disclosure under applicable public records laws, the Department agrees that it shall not disclose Milliman's work product to third parties without Milliman's prior written consent; provided, however, that the Department may distribute Milliman's work to (i) its professional service providers who are subject to a duty of confidentiality and who agree to not use Milliman's work product for any purpose other than to provide services to the Department, or (ii) any applicable regulatory or governmental agency, as required.

We have developed certain models to estimate the values included in this analysis. The intent of the models was to estimate future experience. We have reviewed the models, including their inputs, calculations, and outputs for consistency, reasonableness, and appropriateness to the intended purpose and in compliance with generally accepted actuarial practice and relevant actuarial standards of practice.

In performing this analysis, we relied on data and other information provided by MedAmerica. We have not audited or verified this data and other information. If the underlying data or information is inaccurate or incomplete, the results of our analysis may likewise be inaccurate or incomplete. In that event, the results of our analysis may not be suitable for the intended purpose.

We performed a limited review of the data used directly in our analysis for reasonableness and consistency and have not found material defects in the data. If there are material defects in the data, it is possible that they would be uncovered by a detailed, systematic review and comparison of the data to search for data values that are questionable or for relationships that are materially inconsistent. Such a review was beyond the scope of our assignment.

Differences between our projections and actual amounts depend on the extent to which future experience conforms to the assumptions made for this analysis. It is certain that actual experience will not conform exactly to the assumptions used in this analysis. Actual amounts will differ from projected amounts to the extent that actual experience deviates from expected experience.

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

❖❖❖

Valerie, thank you for working with us to complete this filing in Pennsylvania. Please let me know if you have any additional questions. You can reach me directly at (952) 820-2478 or by e-mail at missy.gordon@milliman.com. Alternatively, you may contact Courtney Williamson, the contact of record for this filing, at (952) 820-2413 or by e-mail at courtney.williamson@milliman.com.

Respectfully,

Missy Gordon

Missy Gordon, FSA, MAAA
Principal and Consulting Actuary

MAG/btp

Attachment A: Nationwide Experience Restated to Pennsylvania Rate Level After One-Time Increase
Attachment B: Nationwide Experience Restated to Pennsylvania Rate Level After Phased-in Increase
Attachment C: Seriatim Listing

Enclosures: Rate Tables with proposed increases
Attachments in Excel

SERFF Post-Submission Update

This work product was prepared to solely 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.

Attachment A
MedAmerica and Affinity Partners
Actual and Projected Experience using Current Assumptions by Calendar Year
Nationwide Experience Restated to Reflect the Pennsylvania Rate Level After One-Time Increase
Series 11 and Prior Policy Forms
Policies with a Non-Lifetime Benefit Period and Auto Inflation

		Without Interest				With Actual Interest		
		A	B	C = B / A	D	E	F	G = F / E
	Calendar Year	Earned Premium	Incurred Claims	Incurred Loss Ratio	End of Year Lives	Earned Premium	Incurred Claims	Incurred Loss Ratio
	1992	1,132	0	0%	4	5,285	0	0%
	1993	40,050	217	1%	54	175,978	953	1%
	1994	149,018	0	0%	144	626,936	0	0%
	1995	182,722	17,023	9%	140	741,080	69,040	9%
	1996	215,138	0	0%	203	825,584	0	0%
	1997	364,484	5,430	1%	336	1,291,982	19,248	1%
	1998	886,303	6,082	1%	785	2,878,533	19,754	1%
	1999	1,681,342	0	0%	1,013	5,031,827	0	0%
	2000	2,068,808	4,098	0%	1,092	5,774,333	11,437	0%
	2001	2,301,337	24,934	1%	1,310	6,033,889	65,374	1%
	2002	3,095,769	871,089	28%	2,018	7,647,891	2,151,968	28%
Historical	2003	4,707,475	67,477	1%	3,685	11,033,400	158,152	1%
Experience	2004	6,748,566	1,077,788	16%	4,458	15,046,006	2,402,940	16%
	2005	7,807,711	535,790	7%	5,152	16,618,339	1,140,403	7%
	2006	8,368,213	1,651,235	20%	5,306	16,949,737	3,344,561	20%
	2007	8,477,970	1,004,961	12%	5,298	16,298,314	1,931,969	12%
	2008	8,470,652	931,632	11%	5,353	15,604,571	1,716,246	11%
	2009	8,244,888	3,055,806	37%	5,273	14,601,421	5,411,731	37%
	2010	8,031,365	3,364,958	42%	5,149	13,483,708	5,649,366	42%
	2011	8,335,359	3,992,666	48%	5,066	13,168,568	6,307,790	48%
	2012	8,954,662	2,423,729	27%	5,174	13,371,263	3,619,156	27%
	2013	9,542,722	1,965,017	21%	5,138	13,494,720	2,778,804	21%
	2014	9,279,830	5,760,622	62%	5,044	12,461,778	7,735,874	62%
	2015	8,930,603	6,857,902	77%	4,977	11,442,633	8,786,916	77%
	2016	8,762,257	5,762,348	66%	5,024	10,733,547	7,058,733	66%
	2017	8,485,742	7,657,081	90%	4,787	9,927,120	8,957,703	90%
	2018	8,735,558	7,930,954	91%	4,685	9,772,085	8,872,010	91%
	2019	9,668,677	7,594,456	79%	4,588	10,337,476	8,119,778	79%
	2020	10,693,865	9,368,192	88%	4,476	10,927,635	9,572,982	88%
	2021	10,679,007	8,108,466	76%	4,145	10,459,065	7,941,466	76%
	2022	10,496,075	8,830,062	84%	4,020	9,860,816	8,295,636	84%
	2023	12,492,511	8,744,555	70%	3,713	11,257,957	7,880,387	70%
	2024	14,106,131	8,560,425	61%	3,409	12,193,874	7,399,956	61%
	2025	13,264,440	9,275,683	70%	3,289	10,998,833	7,691,368	70%
	2026	12,534,870	10,065,004	80%	3,165	9,970,145	8,005,632	80%
	2027	11,853,588	10,884,138	92%	3,044	9,043,893	8,304,235	92%
	2028	11,143,189	11,723,901	105%	2,919	8,155,283	8,580,284	105%
	2029	10,471,440	12,596,088	120%	2,794	7,351,228	8,842,787	120%
	2030	9,812,853	13,441,183	137%	2,666	6,608,040	9,051,382	137%
	2031	9,163,838	14,419,900	157%	2,536	5,919,414	9,314,587	157%
Projected	2032	8,519,448	15,392,804	181%	2,404	5,278,818	9,537,686	181%
Future	2033	7,886,190	16,320,739	207%	2,272	4,687,232	9,700,386	207%
Experience	2034	7,265,363	17,176,463	236%	2,139	4,142,194	9,792,800	236%
(60 Years)	2035	6,660,168	17,965,189	270%	2,005	3,642,355	9,824,917	270%
	2036	6,073,404	18,632,905	307%	1,873	3,186,055	9,774,658	307%
	2037	5,508,156	19,204,236	349%	1,741	2,771,732	9,663,667	349%
	2038	4,968,047	19,587,243	394%	1,612	2,398,030	9,454,579	394%
	2039	4,456,524	19,810,319	445%	1,486	2,063,427	9,172,427	445%
	2040	3,975,390	19,914,756	501%	1,363	1,765,617	8,844,876	501%
	2041	3,526,101	19,842,721	563%	1,245	1,502,226	8,453,605	563%
	2042	3,109,870	19,634,355	631%	1,132	1,270,887	8,023,822	631%
	2043	2,727,453	19,219,195	705%	1,024	1,069,168	7,533,968	705%
	2044	2,378,682	18,684,028	785%	922	894,435	7,025,593	785%
	2045	2,062,949	18,005,549	873%	827	744,089	6,494,457	873%
	2046	1,779,241	17,235,715	969%	738	615,595	5,963,341	969%
	2047	1,526,562	16,385,549	1,073%	655	506,639	5,438,076	1,073%
	2048	1,303,300	15,377,546	1,180%	580	414,909	4,895,480	1,180%
	2049	1,107,554	14,336,576	1,294%	511	338,218	4,378,019	1,294%
	2050	936,945	13,268,564	1,416%	448	274,455	3,886,691	1,416%
	2051-2055	2,850,728	50,822,794	1,783%	1,508	749,226	13,270,404	1,771%
	2056-2060	1,120,045	29,871,062	2,667%	725	239,358	6,341,810	2,650%
	2061-2065	406,167	16,014,323	3,943%	329	70,581	2,766,373	3,919%
	2066-2070	136,330	7,731,389	5,671%	138	19,261	1,086,384	5,640%
	2071-2075	42,621	3,281,056	7,698%	51	4,895	375,167	7,664%
	2076-2080	12,344	1,299,522	10,527%	16	1,153	120,806	10,474%
History		163,232,216	71,931,487	44%	95,732	266,305,637	95,902,887	36%
Future		206,357,526	561,664,009	272%	63,445	140,469,104	263,127,712	187%
Lifetime		369,589,742	633,595,496	171%	159,177	406,774,741	359,030,599	88%

Attachment B
MedAmerica and Affinity Partners
Actual and Projected Experience using Current Assumptions by Calendar Year
Nationwide Experience Restated to Reflect the Pennsylvania Rate Level After Phased-in Increase
Series 11 and Prior Policy Forms
Policies with a Non-Lifetime Benefit Period and Auto Inflation

		Without Interest				With Actual Interest		
		A	B	C = B / A	D	E	F	G = F / E
	Calendar Year	Earned Premium	Incurred Claims	Incurred Loss Ratio	End of Year Lives	Earned Premium	Incurred Claims	Incurred Loss Ratio
	1992	1,132	0	0%	4	5,285	0	0%
	1993	40,050	217	1%	54	175,978	953	1%
	1994	149,018	0	0%	144	626,936	0	0%
	1995	182,722	17,023	9%	140	741,080	69,040	9%
	1996	215,138	0	0%	203	825,584	0	0%
	1997	364,484	5,430	1%	336	1,291,982	19,248	1%
	1998	886,303	6,082	1%	785	2,878,533	19,754	1%
	1999	1,681,342	0	0%	1,013	5,031,827	0	0%
	2000	2,068,808	4,098	0%	1,092	5,774,333	11,437	0%
	2001	2,301,337	24,934	1%	1,310	6,033,889	65,374	1%
	2002	3,095,769	871,089	28%	2,018	7,647,891	2,151,968	28%
Historical	2003	4,707,475	67,477	1%	3,685	11,033,400	158,152	1%
Experience	2004	6,748,566	1,077,788	16%	4,458	15,046,006	2,402,940	16%
	2005	7,807,711	535,790	7%	5,152	16,618,339	1,140,403	7%
	2006	8,368,213	1,651,235	20%	5,306	16,949,737	3,344,561	20%
	2007	8,477,970	1,004,961	12%	5,298	16,298,314	1,931,969	12%
	2008	8,470,652	931,632	11%	5,353	15,604,571	1,716,246	11%
	2009	8,244,888	3,055,806	37%	5,273	14,601,421	5,411,731	37%
	2010	8,031,365	3,364,958	42%	5,149	13,483,708	5,649,366	42%
	2011	8,335,359	3,992,666	48%	5,066	13,168,568	6,307,790	48%
	2012	8,954,662	2,423,729	27%	5,174	13,371,263	3,619,156	27%
	2013	9,542,722	1,965,017	21%	5,138	13,494,720	2,778,804	21%
	2014	9,279,830	5,760,622	62%	5,044	12,461,778	7,735,874	62%
	2015	8,930,603	6,857,902	77%	4,977	11,442,633	8,786,916	77%
	2016	8,762,257	5,762,348	66%	5,024	10,733,547	7,058,733	66%
	2017	8,485,742	7,657,081	90%	4,787	9,927,120	8,957,703	90%
	2018	8,735,558	7,930,954	91%	4,685	9,772,085	8,872,010	91%
	2019	9,668,677	7,594,456	79%	4,588	10,337,476	8,119,778	79%
	2020	10,693,865	9,368,192	88%	4,476	10,927,635	9,572,982	88%
	2021	10,679,007	8,108,466	76%	4,145	10,459,065	7,941,466	76%
	2022	10,496,075	8,830,062	84%	4,020	9,860,816	8,295,636	84%
	2023	10,092,522	8,726,518	86%	3,713	9,095,143	7,864,133	86%
	2024	11,042,621	8,521,196	77%	3,409	9,545,660	7,366,044	77%
	2025	12,734,961	9,233,175	73%	3,289	10,559,791	7,656,121	73%
	2026	12,976,524	10,018,880	77%	3,165	10,321,433	7,968,945	77%
	2027	12,271,238	10,834,260	88%	3,044	9,362,546	8,266,179	88%
	2028	11,535,809	11,670,174	101%	2,919	8,442,626	8,540,963	101%
	2029	10,840,391	12,538,364	116%	2,794	7,610,241	8,802,263	116%
	2030	10,158,599	13,379,586	132%	2,666	6,840,868	9,009,902	132%
	2031	9,486,716	14,353,818	151%	2,536	6,127,979	9,271,901	151%
Projected	2032	8,819,622	15,322,264	174%	2,404	5,464,812	9,493,977	174%
Future	2033	8,164,052	16,245,946	199%	2,272	4,852,382	9,655,932	199%
Experience	2034	7,521,351	17,097,749	227%	2,139	4,288,140	9,747,923	227%
(60 Years)	2035	6,894,832	17,882,861	259%	2,005	3,770,690	9,779,892	259%
	2036	6,287,395	18,547,516	295%	1,873	3,298,312	9,729,864	295%
	2037	5,702,231	19,116,228	335%	1,741	2,869,391	9,619,382	335%
	2038	5,143,091	19,497,481	379%	1,612	2,482,522	9,411,252	379%
	2039	4,613,545	19,719,534	427%	1,486	2,136,130	9,130,393	427%
	2040	4,115,458	19,823,493	482%	1,363	1,827,827	8,804,343	482%
	2041	3,650,339	19,751,788	541%	1,245	1,555,156	8,414,864	541%
	2042	3,219,443	19,544,377	607%	1,132	1,315,665	7,987,051	607%
	2043	2,823,552	19,131,119	678%	1,024	1,106,839	7,499,442	678%
	2044	2,462,493	18,598,405	755%	922	925,950	6,993,397	755%
	2045	2,135,635	17,923,036	839%	827	770,306	6,464,694	839%
	2046	1,841,931	17,156,729	931%	738	637,285	5,936,013	931%
	2047	1,580,349	16,310,459	1,032%	655	524,490	5,413,155	1,032%
	2048	1,349,221	15,307,076	1,135%	580	429,528	4,873,046	1,135%
	2049	1,146,578	14,270,876	1,245%	511	350,135	4,357,956	1,245%
	2050	969,958	13,207,759	1,362%	448	284,125	3,868,880	1,362%
	2051-2055	2,951,170	50,589,889	1,714%	1,508	775,625	13,209,590	1,703%
	2056-2060	1,159,509	29,734,173	2,564%	725	247,791	6,312,748	2,548%
	2061-2065	420,478	15,940,934	3,791%	329	73,068	2,753,695	3,769%
	2066-2070	141,133	7,695,959	5,453%	138	19,940	1,081,405	5,423%
	2071-2075	44,122	3,266,020	7,402%	51	5,068	373,448	7,369%
	2076-2080	12,779	1,293,567	10,123%	16	1,194	120,252	10,071%
History		163,232,216	71,931,487	44%	95,732	266,305,637	95,902,887	36%
Future		205,484,731	559,189,735	272%	63,445	138,238,537	262,016,147	190%
Lifetime		368,716,947	631,121,222	171%	159,177	404,544,174	357,919,034	88%

Attachment C
MedAmerica Insurance Company
Seriatim Listing of Pennsylvania Policyholders In Force as of December 31, 2020[1]
Series 11 and Prior Individual Policy Forms

Pennsylvania Policy Number	Policy Form Number	Policy Form Group	Issue Date	Issue Age	Inflation Option	Benefit Period	Current Annualized Premium	Rate Increase Year 1	Rate Increase Year 2	Rate Increase Year 3
1	LTC-CD5-2PA	Prior to Series 11	10/15/1992	69	None	Non-Lifetime	$2,395	0.0%	0.0%	0.0%
2	LTC-CD5-2PA	Prior to Series 11	11/17/1992	65	None	Non-Lifetime	$2,164	0.0%	0.0%	0.0%
3	LTC-CD5-2PA	Prior to Series 11	12/3/1992	66	None	Non-Lifetime	$2,683	0.0%	0.0%	0.0%
4	LTC-CD5-2PA	Prior to Series 11	2/5/1993	68	None	Non-Lifetime	$2,014	0.0%	0.0%	0.0%
5	LTC-CD5-2PA	Prior to Series 11	3/5/1993	64	None	Non-Lifetime	$1,563	0.0%	0.0%	0.0%
6	LTC-CD5-2PA	Prior to Series 11	4/10/1993	64	None	Non-Lifetime	$2,694	0.0%	0.0%	0.0%
7	LTC-CD5-2PA	Prior to Series 11	5/10/1993	46	None	Non-Lifetime	$264	0.0%	0.0%	0.0%
8	LTC-CD5-2PA	Prior to Series 11	6/29/1993	58	None	Non-Lifetime	$995	0.0%	0.0%	0.0%
9	LTC-CD5-2PA	Prior to Series 11	11/5/1993	60	None	Non-Lifetime	$889	0.0%	0.0%	0.0%
10	LTC-CD5-2PA	Prior to Series 11	12/7/1993	72	None	Non-Lifetime	$3,060	0.0%	0.0%	0.0%
11	LTC-CD5-2PA	Prior to Series 11	1/27/1994	73	None	Non-Lifetime	$3,923	0.0%	0.0%	0.0%
12	LTC-CD5-2PA	Prior to Series 11	2/10/1994	68	None	Non-Lifetime	$2,516	0.0%	0.0%	0.0%
13	LTC-CD5-2PA	Prior to Series 11	3/2/1994	67	None	Non-Lifetime	$2,299	0.0%	0.0%	0.0%
14	LTC-CD5-2PA	Prior to Series 11	3/3/1994	64	None	Non-Lifetime	$1,364	0.0%	0.0%	0.0%
15	LTC-CD5-2PA	Prior to Series 11	4/9/1994	60	None	Non-Lifetime	$1,111	0.0%	0.0%	0.0%
16	LTC-CD5-2PA	Prior to Series 11	4/9/1994	61	None	Non-Lifetime	$1,344	0.0%	0.0%	0.0%
17	LTC-CD5-2PA	Prior to Series 11	5/20/1994	64	None	Non-Lifetime	$2,273	0.0%	0.0%	0.0%
18	LTC-CD5-2PA	Prior to Series 11	6/14/1994	66	None	Non-Lifetime	$2,415	0.0%	0.0%	0.0%
19	LTC-CD5-2PA	Prior to Series 11	6/21/1994	59	None	Non-Lifetime	$1,309	0.0%	0.0%	0.0%
20	LTC-LBP-2PA	Prior to Series 11	6/30/1994	66	None	Non-Lifetime	$1,624	0.0%	0.0%	0.0%
21	LTC-CD5-2PA	Prior to Series 11	8/4/1994	54	None	Non-Lifetime	$743	0.0%	0.0%	0.0%
22	LTC-CD5-2PA	Prior to Series 11	9/8/1994	61	None	Non-Lifetime	$1,551	0.0%	0.0%	0.0%
23	LTC-CD5-2PA	Prior to Series 11	9/14/1994	63	None	Non-Lifetime	$1,760	0.0%	0.0%	0.0%
24	LTC-CD5-2PA	Prior to Series 11	9/28/1994	65	None	Non-Lifetime	$1,894	0.0%	0.0%	0.0%
25	LTC-CD5-2PA	Prior to Series 11	10/24/1994	59	None	Non-Lifetime	$1,469	0.0%	0.0%	0.0%
26	LTC-CD5-2PA	Prior to Series 11	12/20/1994	64	None	Non-Lifetime	$2,409	0.0%	0.0%	0.0%
27	LTC-CD5-2PA	Prior to Series 11	1/18/1995	63	None	Non-Lifetime	$1,911	0.0%	0.0%	0.0%
28	LTC-CD5-2PA	Prior to Series 11	1/24/1995	63	None	Non-Lifetime	$1,625	0.0%	0.0%	0.0%
29	LTC-CD5-2PA	Prior to Series 11	3/16/1995	64	None	Non-Lifetime	$2,364	0.0%	0.0%	0.0%
30	LTC-LBP-2PA	Prior to Series 11	3/20/1995	69	None	Non-Lifetime	$1,958	0.0%	0.0%	0.0%
31	LTC-LBP-2PA	Prior to Series 11	3/27/1995	66	None	Non-Lifetime	$1,135	0.0%	0.0%	0.0%
32	LTC-CD5-2PA	Prior to Series 11	6/20/1995	64	None	Non-Lifetime	$1,427	0.0%	0.0%	0.0%
33	LTC-CD5-2PA	Prior to Series 11	8/28/1995	72	None	Non-Lifetime	$3,060	0.0%	0.0%	0.0%
34	LTC-CD8-MA-PA	Prior to Series 11	4/1/1996	61	None	Non-Lifetime	$1,446	0.0%	0.0%	0.0%
35	LTC-LBP-2PA	Prior to Series 11	8/19/1996	64	None	Non-Lifetime	$760	0.0%	0.0%	0.0%
36	LTC-LBP-2PA	Prior to Series 11	10/16/1996	64	None	Non-Lifetime	$760	0.0%	0.0%	0.0%
37	LTC-CD9-MA-PA	Prior to Series 11	2/22/2000	72	None	Non-Lifetime	$1,595	0.0%	0.0%	0.0%
38	LTC-CD9-MA-PA	Prior to Series 11	3/1/2000	70	None	Non-Lifetime	$3,453	0.0%	0.0%	0.0%
39	LTC-CD5-2PA	Prior to Series 11	1/13/1993	64	None	Lifetime	$2,893	30.0%	30.0%	18.3%
40	LTC-CD5-2PA	Prior to Series 11	6/24/1994	57	None	Lifetime	$1,878	30.0%	30.0%	18.3%
41	LTC-CD5-2PA	Prior to Series 11	6/24/1994	64	None	Lifetime	$3,870	30.0%	30.0%	18.3%
42	LTC-CD5-2PA	Prior to Series 11	9/23/1994	57	None	Lifetime	$2,630	30.0%	30.0%	18.3%
43	LTC-CD5-2PA	Prior to Series 11	9/23/1994	62	None	Lifetime	$4,476	30.0%	30.0%	18.3%
44	LTC-CD5-2PA	Prior to Series 11	3/7/1995	64	None	Lifetime	$5,152	30.0%	30.0%	18.3%
45	LTC-CD8-MA-PA	Prior to Series 11	7/2/1996	53	None	Lifetime	$2,351	30.0%	30.0%	18.3%
46	LTC-CD5-2PA	Prior to Series 11	10/30/1992	70	Auto	Non-Lifetime	$7,581	30.0%	30.0%	17.0%
47	LTC-CD5-2PA	Prior to Series 11	1/14/1993	66	Auto	Non-Lifetime	$2,455	30.0%	30.0%	17.0%
48	LTC-CD5-2PA	Prior to Series 11	3/10/1993	59	Auto	Non-Lifetime	$1,772	30.0%	30.0%	17.0%
49	LTC-CD5-2PA	Prior to Series 11	5/18/1993	67	Auto	Non-Lifetime	$3,354	30.0%	30.0%	17.0%
50	LTC-CD5-2PA	Prior to Series 11	8/30/1993	64	Auto	Non-Lifetime	$4,604	30.0%	30.0%	17.0%
51	LTC-CD5-2PA	Prior to Series 11	2/3/1994	50	Auto	Non-Lifetime	$2,067	30.0%	30.0%	17.0%
52	LTC-CD5-2PA	Prior to Series 11	3/11/1994	51	Auto	Non-Lifetime	$1,569	30.0%	30.0%	17.0%
53	LTC-CD5-2PA	Prior to Series 11	3/17/1994	67	Auto	Non-Lifetime	$4,790	30.0%	30.0%	17.0%
54	LTC-CD5-2PA	Prior to Series 11	3/24/1994	50	Auto	Non-Lifetime	$1,177	30.0%	30.0%	17.0%
55	LTC-CD5-2PA	Prior to Series 11	4/4/1994	55	Auto	Non-Lifetime	$950	30.0%	30.0%	17.0%
56	LTC-CD5-2PA	Prior to Series 11	4/4/1994	61	Auto	Non-Lifetime	$1,681	30.0%	30.0%	17.0%
57	LTC-CD5-2PA	Prior to Series 11	6/4/1994	59	Auto	Non-Lifetime	$2,457	30.0%	30.0%	17.0%
58	LTC-CD5-2PA	Prior to Series 11	6/27/1994	54	Auto	Non-Lifetime	$2,948	30.0%	30.0%	17.0%
59	LTC-CD5-2PA	Prior to Series 11	8/17/1994	66	Auto	Non-Lifetime	$4,091	30.0%	30.0%	17.0%
60	LTC-CD5-2PA	Prior to Series 11	8/31/1994	53	Auto	Non-Lifetime	$1,503	30.0%	30.0%	17.0%

Attachment C
MedAmerica Insurance Company
Seriatim Listing of Pennsylvania Policyholders In Force as of December 31, 2020[1]
Series 11 and Prior Individual Policy Forms

Pennsylvania Policy Number	Policy Form Number	Policy Form Group	Issue Date	Issue Age	Inflation Option	Benefit Period	Current Annualized Premium	Rate Increase Year 1	Rate Increase Year 2	Rate Increase Year 3
61	LTC-LBP-2PA	Prior to Series 11	9/14/1994	56	Auto	Non-Lifetime	$1,108	30.0%	30.0%	17.0%
62	LTC-CD5-2PA	Prior to Series 11	10/27/1994	51	Auto	Non-Lifetime	$1,307	30.0%	30.0%	17.0%
63	LTC-CD5-2PA	Prior to Series 11	10/27/1994	51	Auto	Non-Lifetime	$1,177	30.0%	30.0%	17.0%
64	LTC-CD5-2PA	Prior to Series 11	12/13/1994	62	Auto	Non-Lifetime	$3,563	30.0%	30.0%	17.0%
65	LTC-CD8-MA-PA	Prior to Series 11	4/8/1996	59	Auto	Non-Lifetime	$1,433	30.0%	30.0%	17.0%
66	LTC-CD8-MA-PA	Prior to Series 11	4/26/1996	62	Auto	Non-Lifetime	$2,793	30.0%	30.0%	17.0%
67	LTC-CD9-MA-PA	Prior to Series 11	5/14/1998	60	Auto	Non-Lifetime	$3,637	30.0%	30.0%	17.0%
68	LTC-CD9-MA-PA	Prior to Series 11	10/1/1999	69	Auto	Non-Lifetime	$7,371	30.0%	30.0%	17.0%
69	LTC-CD9-MA-PA	Prior to Series 11	12/1/1999	51	Auto	Non-Lifetime	$1,679	30.0%	30.0%	17.0%
70	LTC-CD9-MA-PA	Prior to Series 11	12/8/1999	66	Auto	Non-Lifetime	$3,914	30.0%	30.0%	17.0%
71	LTC-CD9-MA-PA	Prior to Series 11	12/14/1999	65	Auto	Non-Lifetime	$5,376	30.0%	30.0%	17.0%
72	LTC-CD9-MA-PA	Prior to Series 11	6/9/2000	73	Auto	Non-Lifetime	$3,625	30.0%	30.0%	17.0%
73	LTC-CD5-2PA	Prior to Series 11	9/18/1995	47	Auto	Lifetime	$2,390	30.0%	30.0%	18.3%
74	LTC-CD9-MA-PA	Prior to Series 11	8/1/1998	69	Auto	Lifetime	$14,318	30.0%	30.0%	18.3%
75	LTC-CD9-MA-PA	Prior to Series 11	3/11/1999	51	Auto	Lifetime	$5,921	30.0%	30.0%	18.3%
76	LTC-CD9-MA-PA	Prior to Series 11	9/1/2000	52	Auto	Lifetime	$6,010	30.0%	30.0%	18.3%
77	LTQ11-336-MA-PA-998	Series 11 Individual	4/1/2001	54	None	Non-Lifetime	$1,677	0.0%	0.0%	0.0%
78	HTQ11-338-MA-PA-998	Series 11 Individual	5/21/2001	65	None	Non-Lifetime	$1,304	0.0%	0.0%	0.0%
79	HTQ11-338-MA-PA-998	Series 11 Individual	1/16/2002	59	None	Non-Lifetime	$840	0.0%	0.0%	0.0%
80	LTQ11-336-MA-PA-998	Series 11 Individual	4/3/2002	73	None	Non-Lifetime	$3,663	0.0%	0.0%	0.0%
81	LTQ11-336-MA-PA-601	Series 11 Individual	3/24/2003	46	None	Non-Lifetime	$660	0.0%	0.0%	0.0%
82	LTQ11-336-MA-PA-601	Series 11 Individual	4/1/2003	54	None	Non-Lifetime	$1,957	0.0%	0.0%	0.0%
83	LTQ11-336-MA-PA-601	Series 11 Individual	6/1/2003	50	None	Non-Lifetime	$2,008	0.0%	0.0%	0.0%
84	NTQ11-337-MA-PA-601	Series 11 Individual	7/7/2003	65	None	Non-Lifetime	$2,606	0.0%	0.0%	0.0%
85	LTQ11-336-MA-PA-998	Series 11 Individual	11/1/2001	63	None	Lifetime	$3,463	30.0%	30.0%	18.3%
86	LTQ11-336-MA-PA-998	Series 11 Individual	4/13/2001	56	Auto	Non-Lifetime	$2,090	30.0%	30.0%	17.0%
87	LTQ11-336-MA-PA-998	Series 11 Individual	6/13/2001	56	Auto	Non-Lifetime	$2,804	30.0%	30.0%	17.0%
88	LTQ11-336-MA-PA-998	Series 11 Individual	6/13/2001	58	Auto	Non-Lifetime	$2,774	30.0%	30.0%	17.0%
89	LTQ11-336-MA-PA-998	Series 11 Individual	9/1/2001	55	Auto	Non-Lifetime	$1,365	30.0%	30.0%	17.0%
90	LTQ11-336-MA-PA-998	Series 11 Individual	11/16/2001	62	Auto	Non-Lifetime	$4,131	30.0%	30.0%	17.0%
91	NTQ11-337-MA-PA-998	Series 11 Individual	11/26/2001	53	Auto	Non-Lifetime	$1,470	30.0%	30.0%	17.0%
92	LTQ11-336-MA-PA-998	Series 11 Individual	12/17/2001	54	Auto	Non-Lifetime	$1,466	30.0%	30.0%	17.0%
93	LTQ11-336-MA-PA-998	Series 11 Individual	12/27/2001	67	Auto	Non-Lifetime	$10,369	30.0%	30.0%	17.0%
94	LTQ11-336-MA-PA-998	Series 11 Individual	12/27/2001	67	Auto	Non-Lifetime	$10,369	30.0%	30.0%	17.0%
95	LTQ11-336-MA-PA-998	Series 11 Individual	1/2/2002	53	Auto	Non-Lifetime	$4,092	30.0%	30.0%	17.0%
96	LTQ11-336-MA-PA-998	Series 11 Individual	1/2/2002	56	Auto	Non-Lifetime	$3,678	30.0%	30.0%	17.0%
97	NTQ11-337-MA-PA-998	Series 11 Individual	1/7/2002	52	Auto	Non-Lifetime	$1,471	30.0%	30.0%	17.0%
98	NTQ11-337-MA-PA-998	Series 11 Individual	1/7/2002	54	Auto	Non-Lifetime	$1,912	30.0%	30.0%	17.0%
99	NTQ11-337-MA-PA-998	Series 11 Individual	1/10/2002	59	Auto	Non-Lifetime	$1,571	30.0%	30.0%	17.0%
100	NTQ11-337-MA-PA-998	Series 11 Individual	1/10/2002	68	Auto	Non-Lifetime	$2,926	30.0%	30.0%	17.0%
101	LTQ11-336-MA-PA-998	Series 11 Individual	1/15/2002	50	Auto	Non-Lifetime	$2,234	30.0%	30.0%	17.0%
102	LTQ11-336-MA-PA-998	Series 11 Individual	1/28/2002	55	Auto	Non-Lifetime	$1,873	30.0%	30.0%	17.0%
103	LTQ11-336-MA-PA-998	Series 11 Individual	2/1/2002	54	Auto	Non-Lifetime	$3,563	30.0%	30.0%	17.0%
104	LTQ11-336-MA-PA-998	Series 11 Individual	3/1/2002	55	Auto	Non-Lifetime	$1,818	30.0%	30.0%	17.0%
105	LTQ11-336-MA-PA-998	Series 11 Individual	3/6/2002	62	Auto	Non-Lifetime	$4,544	30.0%	30.0%	17.0%
106	HTQ11-338-MA-PA-998	Series 11 Individual	4/1/2002	61	Auto	Non-Lifetime	$2,811	30.0%	30.0%	17.0%
107	LTQ11-336-MA-PA-998	Series 11 Individual	4/11/2002	45	Auto	Non-Lifetime	$2,302	30.0%	30.0%	17.0%
108	LTQ11-336-MA-PA-998	Series 11 Individual	4/24/2002	66	Auto	Non-Lifetime	$4,744	30.0%	30.0%	17.0%
109	LTQ11-336-MA-PA-998	Series 11 Individual	5/15/2002	47	Auto	Non-Lifetime	$1,561	30.0%	30.0%	17.0%
110	LTQ11-336-MA-PA-998	Series 11 Individual	5/15/2002	60	Auto	Non-Lifetime	$3,236	30.0%	30.0%	17.0%
111	LTQ11-336-MA-PA-998	Series 11 Individual	6/14/2002	68	Auto	Non-Lifetime	$7,628	30.0%	30.0%	17.0%
112	LTQ11-336-MA-PA-601	Series 11 Individual	9/1/2002	67	Auto	Non-Lifetime	$2,600	30.0%	30.0%	17.0%
113	LTQ11-336-MA-PA-601	Series 11 Individual	11/25/2002	55	Auto	Non-Lifetime	$3,519	30.0%	30.0%	17.0%
114	LTQ11-336-MA-PA-601	Series 11 Individual	11/25/2002	60	Auto	Non-Lifetime	$5,289	30.0%	30.0%	17.0%
115	LTQ11-336-MA-PA-601	Series 11 Individual	11/25/2002	61	Auto	Non-Lifetime	$3,196	30.0%	30.0%	17.0%
116	LTQ11-336-MA-PA-601	Series 11 Individual	1/1/2003	47	Auto	Non-Lifetime	$2,061	30.0%	30.0%	17.0%
117	LTQ11-336-MA-PA-601	Series 11 Individual	1/1/2003	65	Auto	Non-Lifetime	$2,767	30.0%	30.0%	17.0%
118	LTQ11-336-MA-PA-601	Series 11 Individual	3/5/2003	62	Auto	Non-Lifetime	$5,117	30.0%	30.0%	17.0%
119	LTQ11-336-MA-PA-601	Series 11 Individual	7/16/2003	69	Auto	Non-Lifetime	$1,955	30.0%	30.0%	17.0%
120	LTQ11-336-MA-PA-601	Series 11 Individual	7/21/2003	47	Auto	Non-Lifetime	$1,534	30.0%	30.0%	17.0%

Attachment C
MedAmerica Insurance Company
Seriatim Listing of Pennsylvania Policyholders In Force as of December 31, 2020[1]
Series 11 and Prior Individual Policy Forms

Pennsylvania Policy Number	Policy Form Number	Policy Form Group	Issue Date	Issue Age	Inflation Option	Benefit Period	Current Annualized Premium	Rate Increase Year 1	Rate Increase Year 2	Rate Increase Year 3
121	LTQ11-336-MA-PA-601	Series 11 Individual	7/21/2003	48	Auto	Non-Lifetime	$1,380	30.0%	30.0%	17.0%
122	LTQ11-336-MA-PA-601	Series 11 Individual	8/14/2003	64	Auto	Non-Lifetime	$4,833	30.0%	30.0%	17.0%
123	LTQ11-336-MA-PA-998	Series 11 Individual	9/1/2003	52	Auto	Non-Lifetime	$2,163	30.0%	30.0%	17.0%
124	LTQ11-336-MA-PA-601	Series 11 Individual	9/29/2003	55	Auto	Non-Lifetime	$5,725	30.0%	30.0%	17.0%
125	LTQ11-336-MA-PA-601	Series 11 Individual	9/29/2003	57	Auto	Non-Lifetime	$6,088	30.0%	30.0%	17.0%
126	LTQ11-336-MA-PA-601	Series 11 Individual	11/13/2003	59	Auto	Non-Lifetime	$3,545	30.0%	30.0%	17.0%
127	NTQ11-337-MA-PA-601	Series 11 Individual	11/24/2003	56	Auto	Non-Lifetime	$3,233	30.0%	30.0%	17.0%
128	LTQ11-336-MA-PA-601	Series 11 Individual	12/1/2003	46	Auto	Non-Lifetime	$2,426	30.0%	30.0%	17.0%
129	LTQ11-336-MA-PA-601	Series 11 Individual	12/8/2003	60	Auto	Non-Lifetime	$5,976	30.0%	30.0%	17.0%
130	NTQ11-337-MA-PA-601	Series 11 Individual	12/8/2003	63	Auto	Non-Lifetime	$2,157	30.0%	30.0%	17.0%
131	LTQ11-336-MA-PA-601	Series 11 Individual	12/8/2003	63	Auto	Non-Lifetime	$7,096	30.0%	30.0%	17.0%
132	LTQ11-336-MA-PA-601	Series 11 Individual	12/23/2003	58	Auto	Non-Lifetime	$2,020	30.0%	30.0%	17.0%
133	FLQ11-336-MA-PA-601	Series 11 Individual	1/1/2004	42	Auto	Non-Lifetime	$2,174	30.0%	30.0%	17.0%
134	FLQ11-336-MA-PA-601	Series 11 Individual	1/1/2004	47	Auto	Non-Lifetime	$2,704	30.0%	30.0%	17.0%
135	LTQ11-336-MA-PA-601	Series 11 Individual	1/1/2004	58	Auto	Non-Lifetime	$3,190	30.0%	30.0%	17.0%
136	LTQ11-336-MA-PA-601	Series 11 Individual	1/6/2004	65	Auto	Non-Lifetime	$7,074	30.0%	30.0%	17.0%
137	FLQ11-336-MA-PA-601	Series 11 Individual	2/1/2004	48	Auto	Non-Lifetime	$3,017	30.0%	30.0%	17.0%
138	LTQ11-336-MA-PA-601	Series 11 Individual	2/19/2004	66	Auto	Non-Lifetime	$7,156	30.0%	30.0%	17.0%
139	LTQ11-336-MA-PA-998	Series 11 Individual	11/28/2000	48	Auto	Lifetime	$7,820	30.0%	30.0%	18.3%
140	LTQ11-336-MA-PA-998	Series 11 Individual	7/6/2001	54	Auto	Lifetime	$2,137	30.0%	30.0%	18.3%
141	LTQ11-336-MA-PA-998	Series 11 Individual	7/6/2001	54	Auto	Lifetime	$2,514	30.0%	30.0%	18.3%
142	LTQ11-336-MA-PA-998	Series 11 Individual	7/9/2001	59	Auto	Lifetime	$6,145	30.0%	30.0%	18.3%
143	LTQ11-336-MA-PA-998	Series 11 Individual	9/22/2001	52	Auto	Lifetime	$4,176	30.0%	30.0%	18.3%
144	LTQ11-336-MA-PA-998	Series 11 Individual	11/13/2001	50	Auto	Lifetime	$4,679	30.0%	30.0%	18.3%
145	LTQ11-336-MA-PA-998	Series 11 Individual	12/10/2001	55	Auto	Lifetime	$3,583	30.0%	30.0%	18.3%
146	LTQ11-336-MA-PA-998	Series 11 Individual	12/20/2001	55	Auto	Lifetime	$11,423	30.0%	30.0%	18.3%
147	LTQ11-336-MA-PA-998	Series 11 Individual	1/21/2002	56	Auto	Lifetime	$6,844	30.0%	30.0%	18.3%
148	LTQ11-336-MA-PA-998	Series 11 Individual	1/25/2002	51	Auto	Lifetime	$3,664	30.0%	30.0%	18.3%
149	LTQ11-336-MA-PA-998	Series 11 Individual	1/28/2002	56	Auto	Lifetime	$5,931	30.0%	30.0%	18.3%
150	LTQ11-336-MA-PA-601	Series 11 Individual	8/15/2002	54	Auto	Lifetime	$8,921	30.0%	30.0%	18.3%
151	LTQ11-336-MA-PA-601	Series 11 Individual	9/1/2002	54	Auto	Lifetime	$10,657	30.0%	30.0%	18.3%
152	LTQ11-336-MA-PA-601	Series 11 Individual	9/1/2002	59	Auto	Lifetime	$9,040	30.0%	30.0%	18.3%
153	HTQ11-338-MA-PA-601	Series 11 Individual	8/12/2003	63	Auto	Lifetime	$5,748	30.0%	30.0%	18.3%
154	LTQ11-336-MA-PA-601	Series 11 Individual	9/14/2003	43	Auto	Lifetime	$3,227	30.0%	30.0%	18.3%
155	LTQ11-336-MA-PA-601	Series 11 Individual	9/29/2003	58	Auto	Lifetime	$16,792	30.0%	30.0%	18.3%
156	LTQ11-336-MA-PA-601	Series 11 Individual	10/24/2003	54	Auto	Lifetime	$3,048	30.0%	30.0%	18.3%
157	LTQ11-336-MA-PA-601	Series 11 Individual	11/13/2003	45	Auto	Lifetime	$5,392	30.0%	30.0%	18.3%
158	LTQ11-336-MA-PA-601	Series 11 Individual	1/1/2004	51	Auto	Lifetime	$3,074	30.0%	30.0%	18.3%
159	LTQ11-336-MA-PA-601	Series 11 Individual	1/1/2004	51	Auto	Lifetime	$3,616	30.0%	30.0%	18.3%

[1] Excludes policies assumed to be paid up prior to implementation of the requested rate increase.

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 2022 Rate Increase/145MAI01-30.09*

Superseded Schedule Items

Please note that all items on the following pages are items, which have been replaced by a newer version. The newest version is located with the appropriate schedule on previous pages. These items are in date order with most recent first.

Creation Date	Schedule Item Status	Schedule	Schedule Item Name	Replacement Creation Date	Attached Document(s)
04/28/2022		Rate	Prior to Series 11 Rate Tables	11/17/2022	PA_MedAmerica_Current Premium Rates_Prior to Series 11_LR_20220425.pdf (Superceded) PA_MedAmerica_Current Premium Rates_Prior to Series 11_RS_20220425.pdf (Superceded) PA_MedAmerica_Proposed Premium Rates_Prior to Series 11_20220425.pdf (Superceded)
04/28/2022		Rate	Series 11 Individual Rate Tables	11/17/2022	PA_MedAmerica_Current Premium Rates_Series 11 Individual_LR_20220425.pdf (Superceded) PA_MedAmerica_Current Premium Rates_Series 11 Individual_RS_20220425.pdf (Superceded) PA_MedAmerica_Proposed Premium Rates_Series 11 Individual_20220425.pdf (Superceded)

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

Facility Only Policy

Individual Rates for Lifetime Premium Payment Option
90 Day Elimination Period
Current Annual Premium Rates for Policies Issued Prior to 9/16/2002
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		
Issue	**Benefit Period**			**Benefit Period**			**Benefit Period**		
Age	*1 Year*	*2 Years*	*3 Years*	*1 Year*	*2 Years*	*3 Years*	*1 Year*	*2 Years*	*3 Years*
<45	20	24	27	5	7	10	17	27	34
45	22	24	27	5	10	12	17	29	39
46	22	27	29	5	10	12	20	29	42
47	22	27	32	7	12	15	22	34	42
48	24	29	34	7	12	15	22	34	44
49	24	32	34	10	12	20	24	37	49
50	27	32	37	10	17	20	24	42	54
51	27	34	42	12	17	20	27	44	54
52	29	37	44	12	20	24	27	46	59
53	32	39	46	12	22	27	29	49	64
54	32	44	51	15	22	29	32	49	66
55	34	46	54	17	24	34	34	54	71
56	37	49	59	20	29	37	37	59	76
57	39	54	64	20	32	42	39	61	81
58	44	59	71	20	34	44	39	66	86
59	46	64	78	24	39	49	44	71	90
60	51	71	86	24	42	54	44	73	95
61	56	78	95	29	46	64	49	81	108
62	61	86	108	34	56	71	56	90	117
63	66	98	120	39	61	81	64	98	130
64	73	108	134	44	68	90	68	110	142
65	83	122	154	49	78	100	73	120	154
66	93	139	174	54	86	112	81	127	169
67	105	156	196	56	93	122	86	139	181
68	117	176	220	61	103	134	90	149	196
69	132	200	252	68	112	147	98	159	208
70	147	227	286	76	122	161	108	169	222
71	154	237	301	76	122	161	108	169	222
72	174	266	337	78	130	171	110	174	227
73	193	298	376	83	137	183	110	181	239
74	213	330	418	90	147	196	117	191	249
75	237	369	467	93	154	205	120	196	259
76	261	408	518	100	164	218	125	205	271
77	288	452	572	103	171	230	130	210	281
78	318	496	628	108	178	242	132	220	291
79	345	540	684	112	188	252	134	227	303
80	347	543	687	112	188	252	134	227	303
81	374	587	740	112	191	257	137	227	303
82	403	633	797	115	191	257	137	230	308
83	435	679	855	115	198	266	137	230	308
84	469	736	924	120	203	274	139	232	313
85	506	794	997	125	210	283	144	239	323

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
Current Annual Premium Rates for Policies Issued Prior to 9/16/2002
Rates per $20 NCF

Issue	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:	
Age	50%	100%	50%	100%	50%	100%	50%	100%
<40	64	95	78	120	100	154	119	180
40	68	100	83	127	105	164	127	190
41	71	105	88	134	112	174	135	201
42	76	112	93	142	117	183	143	214
43	78	117	98	149	125	196	153	227
44	83	125	105	159	132	208	161	240
45	88	132	110	169	142	220	172	256
46	93	139	117	178	149	232	182	272
47	98	149	125	188	159	247	196	291
48	105	156	132	200	169	261	209	309
49	110	166	139	213	178	276	222	328
50	117	176	149	225	191	293	238	349
51	125	188	159	239	203	313	254	373
52	134	200	169	254	218	332	272	396
53	142	213	181	271	232	354	293	425
54	152	227	193	291	249	376	314	454
55	164	242	205	310	266	403	338	486
56	174	257	222	330	286	430	365	520
57	186	276	237	352	308	459	394	557
58	200	293	257	376	330	489	425	597
59	215	315	274	403	354	523	460	642
60	232	337	296	433	384	562	497	692
61	254	367	325	469	418	609	547	753
62	279	398	354	508	457	657	602	819
63	305	433	389	552	501	714	663	893
64	337	472	428	599	550	772	729	972
65	379	525	479	665	616	853	822	1,078
66	418	569	528	721	679	926	906	1,176
67	459	621	582	784	748	1,007	1,001	1,287
68	503	674	638	853	821	1,092	1,104	1,400
69	560	740	709	936	912	1,200	1,229	1,543
70	621	814	787	1,026	1,009	1,312	1,363	1,694
71	643	831	811	1,048	1,041	1,339	1,403	1,728
72	709	909	894	1,144	1,146	1,457	1,543	1,884
73	777	987	982	1,244	1,256	1,581	1,694	2,048
74	850	1,068	1,073	1,344	1,373	1,708	1,852	2,219
75	931	1,161	1,175	1,459	1,505	1,852	2,026	2,407
76	1,014	1,254	1,283	1,574	1,640	1,999	2,203	2,594
77	1,097	1,344	1,388	1,686	1,774	2,136	2,370	2,769
78	1,183	1,435	1,498	1,796	1,909	2,270	2,539	2,938
79	1,266	1,520	1,606	1,904	2,041	2,400	2,692	3,088
80	1,266	1,520	1,606	1,904	2,041	2,400	2,692	3,088
81	1,339	1,576	1,694	1,967	2,131	2,454	2,771	3,125
82	1,427	1,667	1,806	2,080	2,261	2,581	2,917	3,268
83	1,527	1,767	1,926	2,202	2,395	2,715	3,062	3,413
84	1,637	1,879	2,063	2,344	2,556	2,879	3,239	3,593
85	1,762	2,009	2,214	2,505	2,737	3,067	3,437	3,802

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
Current Annual Premium Rates for Policies Issued Prior to 9/16/2002
Rates per $20 NCF

Issue	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:	
Age	*50%*	*100%*	*50%*	*100%*	*50%*	*100%*	*50%*	*100%*
<40	32	49	42	68	59	100	77	119
40	32	54	44	73	64	105	82	127
41	34	59	46	76	66	112	87	137
42	37	61	49	83	73	120	95	145
43	39	66	54	88	76	127	100	156
44	42	68	56	93	83	134	108	166
45	44	73	61	98	86	142	116	177
46	49	78	64	105	93	152	124	188
47	51	81	68	112	98	159	132	198
48	54	88	73	120	105	169	143	211
49	59	93	81	127	115	181	153	227
50	64	100	86	134	120	193	166	243
51	68	105	90	144	130	203	180	259
52	71	110	98	152	137	215	193	280
53	78	120	105	161	149	230	209	296
54	83	125	112	171	159	244	227	317
55	88	134	122	181	171	259	243	341
56	98	144	130	196	183	274	264	365
57	105	152	139	208	196	291	285	391
58	112	164	149	220	210	313	309	420
59	120	171	161	232	225	330	336	449
60	130	183	171	247	239	347	365	478
61	142	200	188	269	266	376	404	526
62	156	215	208	291	291	408	444	571
63	171	235	227	313	318	437	486	618
64	183	252	244	337	345	472	534	668
65	203	271	271	362	379	508	584	727
66	220	293	291	389	408	543	634	782
67	237	310	313	415	437	577	687	838
68	254	330	337	437	472	611	737	893
69	274	354	364	469	508	653	801	959
70	296	374	393	501	550	696	861	1,025
71	291	369	389	491	543	679	856	1,009
72	305	384	408	511	572	711	904	1,057
73	323	401	430	530	601	740	948	1,104
74	335	415	450	552	631	770	996	1,152
75	352	433	472	574	660	799	1,046	1,202
76	369	447	494	596	694	831	1,094	1,252
77	381	459	513	613	718	855	1,136	1,287
78	396	472	533	633	748	880	1,170	1,318
79	411	484	552	648	772	899	1,199	1,342
80	411	484	552	648	772	899	1,199	1,342
81	398	467	540	626	750	863	1,141	1,305
82	413	479	555	640	770	877	1,157	1,281
83	425	491	572	655	792	897	1,173	1,295
84	440	506	589	674	814	919	1,197	1,316
85	455	521	611	694	841	946	1,223	1,339

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
Current Annual Premium Rates for Policies Issued Prior to 9/16/2002
Rates per $20 NCF

Issue	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:	
Age	50%	100%	50%	100%	50%	100%	50%	100%
<40	81	122	108	166	152	237	211	304
40	83	130	112	174	159	247	222	317
41	88	134	117	181	164	257	232	333
42	90	139	122	188	174	269	246	349
43	98	147	130	198	181	279	256	362
44	100	152	134	205	191	288	269	378
45	105	159	142	213	198	301	283	394
46	110	166	147	220	208	313	296	412
47	115	171	152	230	215	325	309	428
48	120	178	159	239	225	337	325	446
49	127	186	169	249	237	352	343	468
50	132	193	176	259	247	367	359	489
51	137	200	183	269	257	379	378	507
52	142	208	191	281	269	393	394	531
53	152	218	200	291	281	408	412	552
54	156	225	210	301	291	425	433	576
55	164	232	220	313	305	437	454	600
56	171	244	227	325	318	455	478	626
57	181	252	239	340	332	472	502	655
58	188	264	249	352	349	491	528	684
59	198	274	261	364	364	511	555	713
60	208	283	274	379	379	528	584	742
61	225	305	296	403	413	562	634	798
62	242	325	320	433	442	601	682	853
63	259	347	342	459	474	635	734	911
64	276	367	367	486	508	674	790	970
65	301	391	396	518	547	716	851	1,038
66	318	415	420	547	582	755	909	1,102
67	337	435	445	574	616	792	967	1,160
68	359	455	472	601	650	828	1,022	1,218
69	381	481	501	633	692	870	1,091	1,289
70	403	503	530	665	733	916	1,157	1,361
71	391	486	516	643	714	890	1,131	1,326
72	403	499	533	657	738	907	1,173	1,361
73	415	511	550	674	765	931	1,215	1,403
74	428	523	569	692	789	956	1,260	1,445
75	442	538	589	709	816	980	1,308	1,493
76	457	550	606	728	846	1,007	1,350	1,535
77	469	560	626	740	868	1,026	1,387	1,564
78	479	569	640	755	894	1,046	1,416	1,588
79	491	579	657	767	912	1,061	1,437	1,604
80	491	579	657	767	912	1,061	1,437	1,604
81	472	550	633	731	875	1,007	1,358	1,567
82	484	557	643	740	890	1,012	1,358	1,498
83	491	567	657	753	907	1,026	1,366	1,503
84	506	579	672	767	926	1,046	1,384	1,519
85	518	591	692	787	951	1,070	1,403	1,538

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

Comprehensive Policy

Individual Rates for Lifetime Premium Payment Option
0-Day Elimination Period
Current Annual Premium Rates for Policies Issued Prior to 9/16/2002
Rates per $10 Daily Benefit

	Policy Form: LTC-CD8-MA-PA					**Rider: LTC8-PA-SIP**					**Rider: LTC8-PA-CIP**				
	Base Rates with No Inflation Protection					**Simple Inflation Protection Rider**					**Compound Inflation Protection Rider**				
Issue	**Benefit Period**					**Benefit Period**					**Benefit Period**				
Age	*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	90	105	117	145	42	59	61	64	95	76	100	117	132	169
40	78	100	115	130	159	46	64	66	68	106	83	110	130	147	188
41	83	103	120	134	164	49	66	68	71	111	86	115	134	154	193
42	86	108	125	139	169	51	68	71	73	114	90	120	139	159	201
43	88	110	127	144	177	54	71	73	76	119	93	122	144	164	209
44	90	115	132	149	182	54	73	76	78	122	95	127	149	169	214
45	95	117	137	154	188	56	76	78	81	127	100	132	154	176	222
46	98	122	142	159	193	59	76	81	83	129	103	134	159	181	230
47	100	125	147	164	201	59	78	83	86	135	105	139	164	186	235
48	103	130	149	169	206	61	81	86	88	137	108	144	169	191	243
49	105	132	154	174	211	64	83	88	90	143	112	149	174	198	251
50	110	137	159	178	217	66	86	90	95	145	115	152	178	203	256
51	112	139	164	181	225	66	88	93	98	151	117	156	183	208	264
52	115	144	166	186	230	68	90	95	100	153	122	161	188	215	272
53	117	147	171	191	235	71	93	98	103	159	125	164	193	220	277
54	120	152	176	196	240	73	95	100	105	161	127	169	198	225	285
55	125	154	181	200	248	73	98	103	108	166	130	174	203	230	293
56	134	169	196	220	269	78	103	108	112	174	134	178	210	237	301
57	144	183	213	237	293	81	108	112	117	182	137	183	215	244	309
58	156	196	230	257	317	86	112	117	122	190	142	186	220	249	317
59	166	210	244	274	341	88	117	122	127	198	144	191	227	257	325
60	176	225	261	293	365	93	122	127	132	206	149	196	232	264	333
61	193	244	286	320	399	95	130	139	147	219	152	205	242	274	346
62	208	266	310	349	433	105	137	152	164	232	164	213	252	283	359
63	225	286	335	379	468	108	144	164	178	246	166	220	261	293	373
64	239	308	359	406	505	117	154	176	196	256	176	230	269	305	388
65	254	327	386	435	539	122	161	188	210	269	178	237	279	315	402
66	281	359	423	477	592	127	171	200	225	285	183	247	291	330	415
67	303	391	459	518	645	137	178	210	237	304	193	254	303	345	439
68	327	423	496	560	700	142	188	222	249	317	198	266	313	354	452
69	352	455	533	601	753	147	198	232	264	336	205	276	325	369	470
70	374	486	572	643	808	156	208	244	276	349	218	288	340	386	486
71	413	535	628	706	888	161	215	254	288	367	220	293	347	393	502
72	450	584	687	772	970	171	225	266	301	383	230	305	357	403	515
73	489	635	743	836	1,049	176	235	276	313	402	232	310	367	415	534
74	525	684	802	899	1,131	183	244	288	325	417	242	320	379	430	547
75	562	733	858	965	1,218	191	254	301	340	428	247	330	389	440	560
76	613	799	938	1,058	1,329	198	266	310	347	449	254	340	396	445	576
77	665	868	1,017	1,144	1,443	203	271	323	364	468	257	342	408	464	592
78	714	934	1,097	1,234	1,559	213	283	335	379	483	264	354	418	474	605
79	765	1,002	1,175	1,322	1,672	220	293	347	393	502	271	362	430	489	621
80	814	1,073	1,263	1,425	1,799	225	301	349	391	507	276	369	437	496	629
81	887	1,168	1,371	1,542	1,958	230	310	367	415	531	279	374	445	506	642
82	960	1,266	1,488	1,676	2,127	237	318	376	423	542	283	379	447	508	650
83	1,034	1,364	1,603	1,808	2,293	242	325	384	433	557	286	384	455	513	660
84	1,107	1,461	1,720	1,943	2,462	247	335	391	440	571	288	389	459	521	668
85	1,180	1,562	1,835	2,070	2,631	252	340	401	455	584	291	393	464	525	676

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

Comprehensive Policy

Individual Rates for 10-Year Premium Payment Option
0-Day Elimination Period
Current Annual Premium Rates for Policies Issued Prior to 9/16/2002
Rates per $10 Daily Benefit

	Policy Form: LTC-CD8-MA-PA					**Rider: LTC8-PA-SIP**					**Rider: LTC8-PA-CIP**				
	Base Rates with No Inflation Protection					**Simple Inflation Protection Rider**					**Compound Inflation Protection Rider**				
	Benefit Period					**Benefit Period**					**Benefit Period**				
Issue Age	*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	139	178	208	232	291	83	112	120	125	193	147	198	235	266	343
41	144	183	215	242	301	86	117	122	130	201	152	205	244	276	354
42	149	191	222	252	312	90	120	127	134	209	156	213	252	286	367
43	154	198	232	259	322	93	125	132	137	217	164	220	261	296	380
44	159	205	239	269	333	95	130	137	142	222	169	227	271	308	394
45	166	210	247	276	343	98	134	142	147	230	174	235	279	318	407
46	171	218	254	286	354	103	137	144	152	238	178	242	288	327	420
47	176	225	261	293	365	105	142	149	156	246	186	249	296	337	433
48	181	232	269	303	375	108	147	154	161	251	191	257	305	347	444
49	186	237	279	313	386	110	152	159	166	259	196	264	315	357	457
50	191	244	286	320	399	115	154	164	171	267	200	271	323	367	470
51	196	252	293	330	410	117	159	169	176	275	208	279	332	376	483
52	200	257	301	337	420	120	164	171	181	280	213	286	340	386	497
53	208	264	308	347	431	125	166	176	183	288	218	293	349	396	510
54	213	271	318	354	441	127	171	181	188	296	222	301	359	406	523
55	218	279	325	364	452	130	176	186	193	304	230	308	367	418	534
56	232	298	349	393	489	134	183	191	200	314	232	313	374	423	542
57	249	320	374	420	523	139	188	198	208	325	237	320	379	430	550
58	266	342	398	450	560	147	196	205	213	336	242	325	386	437	557
59	281	362	425	477	594	152	203	213	220	349	247	330	393	445	568
60	298	384	450	506	631	156	210	220	227	359	249	335	401	455	576
61	315	408	479	538	671	161	215	232	247	370	254	340	403	459	584
62	335	433	508	569	713	166	222	247	269	383	257	345	411	464	592
63	354	457	535	604	753	171	230	261	288	394	261	352	415	472	602
64	371	481	565	635	795	178	237	276	308	407	266	357	423	479	613
65	391	506	594	667	838	183	244	291	327	420	271	364	430	486	624
66	415	538	631	711	890	188	252	298	337	431	274	369	435	494	629
67	440	569	670	753	946	193	259	308	347	444	279	374	442	499	639
68	464	604	709	797	1,001	200	266	315	357	457	283	379	447	506	647
69	489	635	745	838	1,057	205	276	325	369	470	288	386	457	516	658
70	511	667	784	882	1,112	213	283	335	379	483	293	393	464	525	671
71	547	714	838	943	1,186	215	288	340	384	491	293	393	464	525	671
72	582	760	890	1,002	1,263	218	293	347	391	499	293	393	467	528	674
73	616	804	943	1,063	1,339	222	298	352	398	510	296	396	469	530	679
74	653	850	997	1,122	1,416	227	303	359	406	520	298	401	472	535	684
75	687	897	1,051	1,183	1,490	232	310	367	415	531	301	403	477	540	692
76	731	956	1,122	1,263	1,593	235	315	371	420	539	301	403	479	540	692
77	775	1,017	1,193	1,342	1,696	239	320	379	428	547	303	406	479	543	695
78	821	1,075	1,263	1,422	1,799	242	327	386	435	557	303	408	481	547	697
79	865	1,136	1,334	1,503	1,900	247	332	393	445	568	305	411	486	550	703
80	909	1,195	1,405	1,581	2,003	252	340	401	452	581	308	413	491	555	711
81	975	1,285	1,510	1,701	2,158	254	342	403	457	584	308	413	489	552	708
82	1,044	1,376	1,618	1,821	2,314	257	345	408	462	592	305	413	489	552	708
83	1,109	1,466	1,723	1,943	2,468	259	349	413	467	600	305	413	489	552	711
84	1,175	1,557	1,830	2,063	2,623	261	354	418	472	608	308	413	489	552	711
85	1,244	1,645	1,936	2,182	2,777	264	357	423	479	616	308	415	491	555	608

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

Comprehensive Policy

Individual Rates for Lifetime Premium Payment Option
0-Day Elimination Period
Current Annual Premium Rates for Policies Issued Prior to 9/16/2002
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				
	Benefit Period					Benefit Period					Benefit Period				
Issue Age	*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	46	54	61	66	87	27	34	42	44	63	49	61	71	76	119
40	49	59	66	73	98	29	37	44	44	63	56	68	81	83	127
41	51	61	71	78	103	32	39	46	46	69	59	73	83	88	132
42	54	66	73	81	108	34	42	49	51	71	64	76	90	93	137
43	59	68	78	86	114	34	44	51	54	77	64	81	93	98	143
44	61	73	83	90	122	37	44	54	56	77	66	81	95	103	145
45	64	76	86	95	127	39	49	59	59	82	68	86	100	105	151
46	66	81	90	98	132	42	49	59	64	85	73	88	105	112	156
47	68	83	95	103	137	44	51	61	66	90	76	93	108	117	161
48	73	88	98	108	143	42	54	66	66	92	76	95	112	120	169
49	76	90	103	112	148	44	56	68	68	98	78	100	115	125	174
50	78	95	108	115	153	46	56	68	73	100	83	103	120	132	180
51	81	98	110	120	159	49	61	73	76	106	86	108	125	134	185
52	83	103	115	125	166	51	61	76	78	106	88	108	127	139	188
53	88	105	120	130	172	51	64	78	81	111	88	112	130	144	193
54	90	110	122	132	177	54	66	81	86	114	93	115	137	149	198
55	93	112	127	137	182	56	68	83	88	119	95	120	139	154	203
56	100	122	137	149	196	59	73	88	93	127	100	125	147	164	211
57	108	130	147	159	211	61	78	93	98	129	103	132	154	176	219
58	112	139	159	171	225	66	83	95	103	137	110	134	156	183	227
59	120	147	169	181	240	68	88	100	108	140	112	142	164	196	235
60	127	156	178	193	254	71	93	105	112	148	117	147	171	205	243
61	137	169	193	208	272	73	95	110	120	156	120	152	176	208	251
62	147	181	205	222	293	78	100	117	125	164	125	154	183	210	259
63	154	191	220	239	312	83	105	120	130	172	130	161	186	210	267
64	164	203	232	254	333	88	110	127	134	180	134	164	193	213	275
65	174	215	247	269	351	90	112	132	142	188	137	169	198	215	283
66	196	242	279	303	396	98	120	142	152	201	144	178	208	227	299
67	218	269	308	335	439	103	130	152	164	217	152	188	220	242	317
68	237	293	340	369	483	112	139	161	176	232	159	200	232	252	333
69	259	320	369	401	526	117	149	171	188	248	166	210	244	266	351
70	281	347	401	435	571	125	156	181	198	262	174	220	254	279	367
71	315	389	447	486	642	130	164	191	208	275	178	227	264	288	380
72	347	430	494	538	711	137	171	200	218	291	186	235	274	298	396
73	381	469	543	589	782	142	181	210	230	306	191	242	281	305	410
74	413	511	589	640	851	149	188	220	239	322	198	249	291	315	425
75	447	552	635	692	922	154	196	230	249	336	203	257	301	325	439
76	503	623	718	782	1,041	166	210	247	266	354	215	271	318	342	454
77	562	692	804	875	1,160	176	227	261	281	375	225	288	330	357	470
78	618	762	887	965	1,276	186	242	276	301	396	235	303	347	376	491
79	677	831	973	1,058	1,395	196	259	291	315	417	244	320	359	391	507
80	733	902	1,056	1,149	1,514	208	274	308	332	436	257	335	376	408	523
81	799	985	1,151	1,254	1,670	213	281	318	342	452	261	340	381	413	536
82	868	1,070	1,249	1,359	1,826	218	286	327	352	468	264	342	386	420	547
83	934	1,153	1,344	1,461	1,981	222	296	337	364	483	266	349	391	428	560
84	1,002	1,239	1,442	1,566	2,137	227	301	347	374	499	269	352	396	435	571
85	1,068	1,322	1,537	1,672	2,293	232	308	357	384	515	274	357	401	440	584

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

Comprehensive Policy

Individual Rates for Lifetime Premium Payment Option
0-Day Elimination Period
Current Annual Premium Rates for Policies Issued Prior to 9/16/2002
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	**Benefit Period**					**Benefit Period**					**Benefit Period**				
Age	*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	49	56	64	68	90	27	34	44	46	66	51	64	73	78	124
40	51	61	68	76	100	29	39	46	46	66	59	71	83	88	132
41	54	64	73	81	108	32	42	49	49	71	61	76	88	93	137
42	56	68	76	83	114	34	44	51	54	74	66	78	95	98	143
43	61	71	81	88	119	37	46	54	56	79	66	83	98	103	148
44	64	76	86	93	127	39	46	56	59	79	68	86	100	108	151
45	66	78	88	100	132	42	51	61	61	85	71	90	105	108	156
46	68	83	93	103	137	44	51	61	66	87	76	93	110	115	161
47	71	86	100	108	143	46	54	64	68	92	78	98	110	122	169
48	76	90	103	112	148	44	56	68	68	98	78	100	115	125	177
49	78	93	108	117	153	46	59	71	71	103	83	105	120	130	182
50	81	100	112	120	159	49	56	71	76	106	88	105	125	137	188
51	83	103	115	125	164	51	64	76	78	111	90	110	130	139	193
52	86	108	120	130	174	54	64	78	81	108	93	110	132	144	193
53	90	110	125	134	180	54	66	81	83	114	93	117	134	149	201
54	93	115	127	137	185	56	68	83	90	116	98	120	142	156	206
55	98	117	132	142	190	56	71	86	93	124	98	125	144	161	211
56	105	127	142	154	203	61	76	93	98	132	103	130	154	171	219
57	112	134	152	166	219	64	81	98	100	135	105	137	161	181	230
58	117	144	166	178	232	68	88	98	105	143	115	139	161	191	238
59	125	152	176	188	251	71	93	103	112	145	117	149	169	203	243
60	132	164	186	200	264	73	95	110	117	153	122	152	178	215	254
61	142	176	200	215	283	76	98	115	125	161	125	156	183	218	262
62	152	188	213	232	304	83	105	122	130	172	130	159	191	218	269
63	161	198	230	249	325	86	110	125	134	177	134	169	193	218	277
64	171	210	242	264	346	90	115	132	139	188	139	171	200	222	285
65	181	225	257	279	365	93	115	137	149	196	142	174	205	225	296
66	203	252	291	315	412	103	125	147	156	209	152	186	215	237	312
67	227	279	320	347	457	105	137	159	171	225	156	196	230	252	328
68	247	305	354	384	502	117	144	166	183	243	164	208	239	261	346
69	269	332	384	418	547	122	156	178	196	259	174	220	254	276	365
70	293	362	418	452	594	130	161	188	205	272	178	227	264	291	380
71	327	403	464	506	668	134	171	198	215	285	186	237	276	301	394
72	362	447	513	560	740	142	178	208	225	301	193	244	286	310	412
73	396	489	565	613	814	149	188	218	237	317	198	252	291	318	425
74	430	530	613	665	885	154	196	227	249	336	205	259	301	330	441
75	464	574	660	718	959	161	203	239	259	349	213	266	313	340	457
76	523	648	748	814	1,083	174	220	257	276	367	225	283	330	354	473
77	584	718	836	909	1,207	183	237	271	293	388	235	301	345	371	489
78	643	792	924	1,004	1,326	193	252	286	313	412	244	315	359	391	513
79	704	865	1,012	1,100	1,450	203	269	303	327	433	254	332	374	408	528
80	762	938	1,097	1,195	1,575	215	283	320	345	454	266	347	391	423	544
81	831	1,024	1,197	1,305	1,736	222	293	330	354	470	271	354	396	428	557
82	902	1,114	1,298	1,413	1,900	227	296	342	367	486	276	354	403	437	568
83	970	1,200	1,398	1,520	2,061	232	308	352	379	502	279	364	406	445	581
84	1,041	1,288	1,501	1,630	2,222	237	313	359	389	520	281	367	411	452	594
85	1,109	1,376	1,598	1,738	2,386	242	320	371	401	536	286	369	418	459	608

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

Comprehensive Policy

Individual Rates for Lifetime Premium Payment Option
0-Day Elimination Period
Current Annual Premium Rates for Policies Issued Prior to 9/16/2002
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	**Benefit Period**					**Benefit Period**					**Benefit Period**				
Age	*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	83	116	32	42	49	51	77	59	73	88	93	135
40	61	73	83	90	124	39	46	56	59	87	68	86	100	105	153
41	66	78	88	95	132	39	49	59	64	92	71	88	105	110	159
42	68	83	93	103	140	44	51	64	64	95	73	90	108	112	166
43	73	88	100	108	148	44	54	64	68	100	76	95	110	117	172
44	76	93	105	112	156	46	54	66	71	103	81	98	115	122	177
45	81	98	110	120	166	49	56	68	73	106	81	100	120	125	180
46	83	100	115	125	174	51	61	73	76	111	86	105	122	130	188
47	88	105	120	130	182	51	64	76	81	114	88	108	127	134	193
48	90	110	127	137	190	54	66	76	81	119	90	112	130	137	198
49	95	115	132	142	198	56	68	78	86	122	93	115	132	142	203
50	100	120	137	149	206	56	71	83	88	127	95	117	137	147	211
51	103	125	142	154	214	59	71	86	90	132	98	120	142	152	217
52	108	130	147	159	222	61	73	88	95	135	100	122	144	156	222
53	110	134	154	166	230	64	76	88	95	140	103	127	147	159	227
54	115	139	159	171	238	64	78	93	100	143	105	130	152	164	235
55	117	144	164	176	248	68	81	95	103	145	110	132	156	169	238
56	122	147	169	183	256	68	86	98	105	151	110	137	159	171	243
57	125	152	174	188	264	71	86	100	108	153	115	139	164	176	248
58	130	156	181	193	272	71	88	103	112	159	117	144	166	181	256
59	132	161	186	200	280	76	90	105	112	161	120	147	169	183	262
60	137	166	191	205	288	76	93	108	117	166	122	149	174	188	267
61	149	181	208	225	314	78	98	112	122	174	125	154	178	193	275
62	161	196	225	242	341	83	103	117	130	182	130	159	183	200	285
63	171	210	242	261	365	88	108	125	134	196	134	164	191	208	296
64	183	225	259	279	391	93	112	130	142	203	139	169	196	215	306
65	196	239	276	298	417	95	117	134	147	211	142	174	200	220	314
66	218	266	305	330	465	100	125	144	159	225	147	181	210	232	330
67	237	291	335	364	510	108	134	154	166	240	156	191	222	242	346
68	259	318	367	396	557	115	139	161	178	254	161	200	230	252	362
69	279	342	396	430	602	122	149	171	186	269	171	210	242	261	378
70	301	369	425	462	650	127	156	181	198	283	176	218	252	274	394
71	335	413	474	516	727	134	164	193	210	299	183	225	264	286	410
72	371	455	525	569	803	139	174	200	220	314	188	235	271	296	425
73	406	499	574	623	880	149	183	213	232	330	198	244	283	308	441
74	442	540	626	677	956	154	193	220	242	346	203	254	291	318	457
75	477	584	674	731	1,033	161	200	232	254	362	210	261	303	330	473
76	535	657	758	821	1,165	171	213	249	271	383	220	274	318	347	494
77	594	728	841	914	1,295	181	227	266	286	407	230	286	332	362	518
78	650	802	926	1,004	1,427	191	237	279	301	431	239	298	347	376	542
79	709	872	1,009	1,097	1,556	200	252	296	315	454	249	310	362	391	565
80	767	946	1,092	1,188	1,688	210	264	313	332	476	259	323	376	408	587
81	836	1,031	1,190	1,295	1,844	215	271	323	342	491	261	327	381	413	594
82	904	1,117	1,290	1,403	2,000	220	279	332	352	505	266	332	384	418	605
83	975	1,205	1,388	1,510	2,158	222	281	342	364	518	266	335	391	420	610
84	1,044	1,290	1,488	1,618	2,314	227	288	352	374	531	271	340	393	425	621
85	1,112	1,376	1,586	1,725	2,470	232	296	362	384	547	274	345	398	430	629

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

Comprehensive Policy

Individual Rates for Lifetime Premium Payment Option
0-Day Elimination Period
Current Annual Premium Rates for Policies Issued Prior to 9/16/2002
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				
	Benefit Period					Benefit Period					Benefit Period				
Issue Age	*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	71	81	86	122	32	44	51	54	79	61	76	93	98	140
40	64	76	86	93	129	42	49	59	61	90	71	90	105	110	159
41	68	81	90	100	137	42	51	61	66	95	73	93	110	112	164
42	71	86	98	108	145	46	54	66	66	100	76	95	110	117	174
43	76	90	105	112	153	46	56	66	71	106	78	100	112	122	180
44	78	98	110	117	161	49	54	68	73	108	86	100	120	127	185
45	83	103	115	125	174	51	59	71	76	108	86	103	125	130	185
46	86	105	120	130	182	54	64	76	78	114	90	108	127	134	193
47	90	110	125	134	190	54	66	78	83	116	93	110	132	139	201
48	93	115	132	142	198	56	68	78	86	124	95	117	134	142	206
49	100	120	137	147	206	56	71	81	90	127	95	120	137	149	211
50	105	125	142	154	214	59	73	88	93	132	98	122	142	154	219
51	108	130	147	161	222	61	73	90	93	137	100	125	149	156	227
52	112	134	152	166	230	64	76	93	98	140	103	127	152	161	232
53	115	139	161	174	238	66	78	90	98	148	105	132	152	164	238
54	120	144	166	178	248	66	83	95	103	148	110	134	156	169	243
55	122	149	171	183	259	71	86	98	108	151	115	139	161	176	246
56	127	152	176	191	267	71	90	100	110	156	115	144	164	178	254
57	130	156	181	196	275	73	90	103	112	159	120	147	171	183	259
58	134	164	188	200	283	73	90	108	117	166	122	149	174	188	267
59	137	169	193	208	291	78	93	110	117	169	125	152	176	191	272
60	142	174	198	213	299	78	95	112	122	174	127	154	181	196	277
61	154	188	215	235	328	83	103	117	127	180	130	159	186	200	285
62	169	203	235	252	354	86	108	122	134	190	134	166	191	208	296
63	178	218	252	271	380	90	112	130	139	201	139	171	198	218	306
64	191	235	269	291	407	98	117	134	147	211	144	174	203	222	320
65	203	249	288	310	433	100	122	139	152	222	149	181	208	227	328
66	227	276	318	342	483	103	130	149	166	232	152	188	218	242	343
67	247	303	347	379	531	112	139	161	174	248	161	198	232	252	359
68	269	330	381	411	579	120	144	169	186	264	169	208	239	264	378
69	291	357	411	447	626	127	154	178	193	280	176	218	252	271	394
70	313	384	442	481	676	132	164	188	205	293	183	227	261	283	410
71	347	430	494	535	756	142	169	200	220	312	191	232	274	298	425
72	386	472	547	591	835	144	181	208	230	328	196	244	281	308	444
73	423	518	596	648	914	154	191	222	242	343	205	254	296	320	460
74	459	562	650	704	993	161	200	230	252	362	213	264	303	330	476
75	496	609	701	760	1,075	166	208	242	264	375	218	271	315	342	491
76	557	684	787	853	1,213	178	220	259	283	396	227	283	332	362	513
77	618	758	875	951	1,347	188	237	276	298	423	237	298	345	376	536
78	677	833	963	1,044	1,485	198	247	291	313	446	249	310	362	393	563
79	738	907	1,051	1,141	1,620	208	261	305	327	470	259	323	374	406	587
80	799	982	1,136	1,234	1,757	218	276	325	347	494	269	337	391	425	608
81	870	1,073	1,237	1,347	1,918	222	281	337	357	510	271	340	398	430	618
82	941	1,161	1,342	1,459	2,079	227	291	347	367	526	276	347	398	435	629
83	1,014	1,254	1,444	1,571	2,246	232	291	354	379	539	276	347	406	437	634
84	1,085	1,342	1,547	1,681	2,407	237	301	367	391	552	283	354	411	442	645
85	1,156	1,432	1,650	1,794	2,568	242	305	376	401	571	286	357	413	447	655

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

Comprehensive Policy

Individual Rates for 10-Year Premium Payment Option
0-Day Elimination Period
Current Annual Premium Rates for Policies Issued Prior to 9/16/2002
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				
	Benefit Period					Benefit Period					Benefit Period				
Issue Age	*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	83	100	115	122	172	64	78	90	100	143	122	154	178	196	277
41	88	108	122	130	182	68	83	95	108	151	130	161	188	208	291
42	93	112	130	139	193	71	88	103	112	156	137	174	200	218	304
43	98	120	137	147	201	76	93	108	120	166	147	181	210	232	320
44	105	125	144	154	211	78	100	115	127	174	152	193	222	244	336
45	110	132	152	161	222	83	105	120	134	182	159	200	232	257	349
46	115	139	159	171	232	86	108	127	139	188	166	208	244	266	362
47	120	144	166	178	243	90	115	132	147	196	174	220	254	279	375
48	125	152	174	186	251	95	120	139	152	206	183	227	266	293	391
49	130	156	181	193	262	100	127	144	159	214	191	239	276	305	404
50	134	164	188	203	272	103	130	152	164	219	198	247	288	315	417
51	139	171	196	210	283	108	134	156	171	227	205	254	298	327	431
52	147	176	203	218	293	110	142	164	178	235	210	266	310	340	446
53	152	183	210	225	301	115	147	169	186	246	220	274	320	354	462
54	156	188	218	235	312	117	152	176	191	251	227	286	332	364	476
55	161	196	225	242	322	122	156	181	198	259	235	293	342	376	489
56	171	208	239	257	341	127	161	186	205	269	239	301	349	386	505
57	181	220	254	271	359	132	169	193	213	280	244	308	357	396	518
58	188	232	266	288	380	139	174	200	220	285	254	315	367	401	531
59	198	244	281	303	399	144	181	208	227	296	259	323	374	411	544
60	208	257	296	318	417	149	186	213	235	306	264	330	381	420	560
61	218	269	310	335	439	152	191	218	239	314	264	332	384	423	563
62	230	283	325	352	462	152	193	222	244	317	261	332	386	425	563
63	239	296	342	369	483	156	198	227	249	325	261	337	389	425	565
64	252	310	357	386	507	156	200	232	254	328	259	337	391	428	565
65	261	323	371	403	528	159	205	237	259	336	259	340	393	430	568
66	288	349	403	440	576	159	213	244	266	346	257	342	396	430	568
67	315	379	435	474	621	161	218	252	274	359	257	342	398	433	571
68	342	406	469	511	668	161	222	259	281	370	254	345	398	433	573
69	369	435	501	545	713	164	227	266	288	383	254	345	401	435	576
70	396	462	533	582	761	164	235	274	296	394	252	347	403	435	576
71	423	501	577	628	832	171	237	279	301	396	254	345	401	435	571
72	450	538	621	677	904	178	242	283	305	399	259	345	401	433	568
73	474	577	665	723	972	186	247	286	310	402	264	345	398	433	565
74	501	613	709	772	1,044	193	252	291	315	404	269	345	398	430	563
75	528	653	753	819	1,115	200	254	296	320	407	271	342	396	430	557
76	582	721	833	907	1,223	208	264	305	330	423	276	349	403	437	568
77	635	792	914	992	1,329	215	271	315	345	444	281	352	408	447	581
78	692	860	992	1,080	1,437	222	279	327	354	460	286	359	418	452	594
79	745	931	1,073	1,166	1,543	230	286	337	369	481	291	362	423	462	608
80	799	1,000	1,153	1,254	1,651	237	296	347	379	497	296	369	430	469	618
81	860	1,075	1,241	1,351	1,797	239	301	352	384	505	296	371	433	472	608
82	921	1,151	1,329	1,447	1,939	242	303	357	391	515	296	371	435	479	597
83	982	1,229	1,417	1,544	2,085	247	305	364	393	526	293	371	440	481	587
84	1,044	1,305	1,505	1,640	2,227	249	308	369	401	536	293	371	442	489	576
85	1,105	1,381	1,593	1,738	2,372	252	313	374	406	544	293	374	445	491	565

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

Comprehensive Policy

Individual Rates for 10-Year Premium Payment Option
0-Day Elimination Period
Current Annual Premium Rates for Policies Issued Prior to 9/16/2002
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	**Benefit Period**					**Benefit Period**					**Benefit Period**				
Age	*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	86	105	120	127	180	66	81	93	105	148	127	159	186	203	288
41	90	112	127	134	190	73	86	100	112	156	137	166	196	218	301
42	98	117	134	144	201	73	90	108	117	161	142	181	208	227	317
43	103	125	142	152	209	78	95	112	125	174	152	188	220	242	333
44	110	130	149	161	219	81	105	120	132	182	156	200	232	254	349
45	115	137	156	169	230	86	110	125	139	190	164	208	242	266	365
46	120	144	166	178	243	88	112	132	144	193	174	218	254	276	375
47	125	149	174	186	254	93	120	137	152	203	181	230	264	288	388
48	130	156	181	193	262	100	125	144	159	214	191	237	276	305	407
49	134	164	188	200	272	105	132	149	166	222	198	247	286	318	420
50	139	171	196	210	283	108	134	159	171	227	205	257	301	327	433
51	144	178	203	218	293	112	139	164	178	238	215	264	310	342	449
52	152	183	210	227	304	115	147	171	183	246	220	276	323	352	465
53	156	191	218	235	314	120	152	176	193	254	230	283	335	367	481
54	164	196	227	244	325	120	159	181	198	262	235	298	345	379	494
55	169	203	235	252	336	127	164	188	205	269	242	305	354	391	507
56	178	215	249	266	354	132	169	193	215	280	249	313	364	403	526
57	188	230	264	281	373	137	174	200	222	293	254	320	371	413	539
58	196	242	276	301	396	144	181	210	227	296	264	327	381	415	552
59	205	254	293	315	415	152	188	215	237	309	269	335	389	428	565
60	215	266	308	330	433	156	193	220	244	320	276	345	396	437	584
61	227	279	323	347	457	156	200	227	249	325	274	347	398	440	584
62	239	296	337	367	481	156	200	232	254	330	271	345	403	442	587
63	249	308	357	384	502	161	205	235	259	338	271	349	403	442	589
64	261	323	371	401	528	164	208	242	264	341	269	352	406	445	587
65	271	335	386	420	550	166	215	247	269	349	271	354	411	447	592
66	301	364	420	457	600	164	220	254	279	359	266	354	411	447	589
67	327	393	452	494	645	169	227	261	283	375	266	357	415	450	594
68	357	423	489	530	695	166	230	269	293	386	264	357	413	450	597
69	384	452	521	567	742	171	237	279	301	399	264	359	418	452	600
70	411	481	555	606	793	171	242	283	305	407	264	359	418	452	597
71	440	521	599	653	867	178	247	291	313	412	264	359	418	452	592
72	467	560	645	704	941	186	252	296	318	415	271	357	418	450	589
73	494	599	692	753	1,012	193	257	298	323	417	274	359	413	450	587
74	521	638	738	804	1,086	200	261	301	327	420	281	359	413	447	584
75	550	679	782	850	1,160	208	264	308	335	423	281	354	413	447	579
76	606	750	868	943	1,273	215	274	318	342	439	286	364	418	455	589
77	660	824	951	1,031	1,382	225	281	327	359	462	293	367	425	467	605
78	718	894	1,031	1,124	1,495	232	291	342	367	478	298	374	435	469	618
79	775	968	1,117	1,212	1,604	239	298	349	384	502	303	376	437	481	634
80	831	1,039	1,200	1,305	1,717	247	308	362	393	518	308	384	447	486	642
81	894	1,119	1,290	1,405	1,868	249	313	367	398	526	308	386	450	491	631
82	958	1,197	1,383	1,505	2,016	252	315	371	406	536	308	386	452	499	621
83	1,022	1,278	1,474	1,606	2,169	257	318	379	411	547	305	386	457	501	608
84	1,085	1,356	1,566	1,706	2,317	259	320	384	415	557	305	386	459	508	597
85	1,149	1,437	1,657	1,806	2,468	261	325	389	423	565	305	389	462	511	587

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

Comprehensive Policy

Individual Rates for 10-Year Premium Payment Option
0-Day Elimination Period
Current Annual Premium Rates for Policies Issued Prior to 9/16/2002
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	**Benefit Period**					**Benefit Period**					**Benefit Period**				
Age	*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	105	127	144	154	217	78	98	112	127	180	154	188	218	242	341
41	110	134	152	164	230	83	103	120	132	188	161	196	227	249	354
42	117	142	161	174	243	86	108	122	137	196	166	203	235	259	365
43	122	149	169	181	256	90	110	130	144	203	171	210	244	269	378
44	130	156	178	191	267	93	115	132	149	211	176	218	249	279	394
45	134	164	186	200	280	98	120	139	154	219	183	225	259	286	404
46	142	171	196	210	293	100	125	144	159	227	188	230	266	293	417
47	147	178	203	218	306	105	130	149	166	235	196	237	276	305	431
48	154	186	213	227	320	108	132	154	171	243	198	244	283	313	441
49	159	193	220	237	333	112	137	159	176	251	205	252	293	323	454
50	166	200	230	247	346	115	142	164	183	259	210	259	301	330	468
51	171	205	237	254	357	117	149	171	191	267	218	269	308	340	481
52	176	213	244	264	370	122	154	176	196	275	225	276	318	349	494
53	183	220	254	274	383	125	156	181	200	283	227	283	325	357	505
54	188	227	261	283	396	130	161	186	205	291	235	291	335	367	518
55	196	235	271	291	410	132	166	191	213	299	239	298	342	376	531
56	200	242	279	301	423	137	171	198	218	306	247	303	352	384	542
57	208	249	288	310	433	139	176	200	222	314	252	310	357	393	557
58	213	257	296	320	446	144	178	208	227	322	257	318	367	401	571
59	220	264	305	327	460	147	183	210	235	330	261	325	374	413	581
60	225	271	313	337	473	152	188	218	239	338	269	332	384	420	594
61	237	288	332	357	502	154	191	220	244	343	269	330	381	420	592
62	249	303	349	376	531	156	193	225	247	349	269	330	381	418	589
63	264	320	369	398	557	159	196	227	249	354	264	327	379	415	592
64	276	335	386	418	587	161	198	232	252	359	264	327	379	413	589
65	288	352	406	437	616	164	200	235	257	365	264	325	376	413	587
66	320	379	437	472	663	159	205	239	264	375	254	327	379	415	592
67	352	406	467	506	713	152	213	249	271	386	247	330	381	415	592
68	381	433	499	540	761	149	218	254	276	396	239	330	384	418	597
69	413	459	528	574	811	142	225	264	283	407	232	332	386	418	597
70	445	486	560	609	859	137	230	269	291	417	222	335	389	420	602
71	469	528	606	660	930	149	235	274	296	428	232	337	391	423	608
72	491	567	653	711	1,004	164	242	281	303	433	244	340	396	425	610
73	516	609	701	760	1,075	178	244	283	310	444	257	342	396	433	616
74	538	648	748	811	1,149	193	252	291	318	449	269	345	401	435	618
75	562	689	794	863	1,221	205	257	296	323	460	279	347	403	437	624
76	616	758	875	948	1,345	213	266	305	335	476	283	352	406	442	631
77	672	826	953	1,036	1,469	220	274	320	345	494	283	354	413	447	639
78	726	897	1,034	1,122	1,593	227	281	330	357	510	288	357	415	452	647
79	782	965	1,112	1,210	1,717	235	288	345	367	528	288	359	423	457	655
80	836	1,034	1,193	1,295	1,841	242	298	354	379	544	293	364	425	462	663
81	897	1,112	1,283	1,393	1,984	244	301	359	384	552	293	364	425	462	645
82	958	1,190	1,373	1,493	2,127	249	305	364	389	557	296	364	425	459	624
83	1,022	1,266	1,461	1,591	2,267	249	310	369	393	568	293	367	430	462	608
84	1,083	1,344	1,552	1,691	2,409	254	315	374	398	573	296	367	430	459	587
85	1,144	1,422	1,642	1,789	2,552	257	318	379	403	581	296	367	430	459	568

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

Comprehensive Policy

Individual Rates for 10-Year Premium Payment Option
0-Day Elimination Period
Current Annual Premium Rates for Policies Issued Prior to 9/16/2002
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				
	Benefit Period					Benefit Period					Benefit Period				
Issue Age	*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	110	132	149	161	225	81	103	117	132	188	159	196	227	249	354
41	115	139	156	171	238	86	108	125	137	196	166	203	237	259	370
42	122	147	169	181	254	88	112	127	142	203	174	213	242	269	378
43	127	154	176	188	267	93	115	134	149	211	178	220	254	279	394
44	134	164	186	198	277	98	117	137	156	219	183	225	259	291	410
45	139	171	193	208	291	103	125	144	161	230	191	232	269	298	420
46	147	178	203	218	304	105	130	152	166	238	196	239	279	305	436
47	152	186	210	227	320	110	134	156	171	243	205	247	288	318	446
48	161	193	220	237	333	110	137	161	178	254	205	254	296	325	460
49	166	200	230	247	346	115	142	164	183	262	213	261	303	335	473
50	174	208	239	257	359	120	149	169	191	269	218	271	313	342	486
51	178	213	247	264	370	122	156	178	198	277	225	281	320	354	502
52	183	220	254	274	386	127	161	183	205	285	235	288	330	364	513
53	191	230	264	283	399	130	161	188	210	293	237	293	337	371	523
54	196	237	271	296	412	134	166	193	213	301	244	301	349	381	539
55	203	244	281	303	425	137	174	200	220	312	249	310	357	391	552
56	208	252	291	313	439	144	178	205	225	320	257	315	364	398	565
57	215	259	301	323	452	147	183	208	232	325	264	323	371	411	579
58	220	266	308	332	465	152	186	215	237	336	269	330	381	418	592
59	230	274	318	340	478	152	191	218	244	343	271	340	389	430	605
60	235	281	325	352	491	156	198	227	247	351	279	347	398	435	618
61	247	301	345	371	523	159	198	230	254	357	279	342	398	437	616
62	259	315	364	391	552	164	200	232	257	362	279	342	396	435	613
63	274	332	384	415	579	166	203	237	259	370	276	342	393	430	616
64	288	347	401	435	610	166	208	242	261	373	274	342	396	430	613
65	301	367	423	455	639	169	208	242	266	380	274	337	391	430	610
66	332	393	455	491	690	166	215	249	274	391	264	342	393	433	616
67	367	423	486	525	742	156	220	259	283	402	257	342	396	433	616
68	396	450	518	562	793	156	227	264	286	412	249	342	398	435	621
69	430	479	550	596	843	147	232	274	296	423	242	345	401	435	621
70	462	506	582	633	893	144	239	281	303	433	232	347	406	437	626
71	489	550	631	687	967	154	242	283	308	446	239	349	406	440	631
72	511	589	679	740	1,044	171	252	291	315	452	254	354	411	442	634
73	535	633	728	789	1,118	186	254	296	325	462	269	357	413	452	642
74	560	674	777	843	1,194	200	261	303	330	468	279	357	418	452	645
75	584	716	826	897	1,268	215	266	308	335	478	291	362	420	455	650
76	640	787	909	987	1,398	222	279	318	347	497	296	367	423	459	658
77	699	860	992	1,078	1,527	230	283	332	359	515	296	367	428	464	666
78	755	934	1,075	1,166	1,657	237	291	342	371	531	301	371	433	472	674
79	814	1,004	1,156	1,259	1,786	244	301	359	381	550	301	374	440	474	682
80	870	1,075	1,241	1,347	1,915	252	310	367	393	565	303	379	440	481	690
81	934	1,156	1,334	1,449	2,063	254	313	374	398	573	303	379	442	479	671
82	997	1,237	1,427	1,552	2,211	259	318	379	406	581	308	379	442	479	650
83	1,063	1,317	1,520	1,654	2,357	259	323	384	408	592	305	381	447	481	634
84	1,127	1,398	1,613	1,760	2,505	264	327	391	413	597	308	381	447	477	610
85	1,190	1,479	1,708	1,860	2,655	266	330	393	420	602	308	381	447	479	589

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

Facility Only Policy

Individual Rates for Lifetime Premium Payment Option
90 Day Elimination Period
Current Annual Premium Rates for Policies Issued On or After 9/16/2002
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		
Issue	**Benefit Period**			**Benefit Period**			**Benefit Period**		
Age	*1 Year*	*2 Years*	*3 Years*	*1 Year*	*2 Years*	*3 Years*	*1 Year*	*2 Years*	*3 Years*
<45	20	24	27	5	7	10	17	27	34
45	22	24	27	5	10	12	17	29	39
46	22	27	29	5	10	12	20	29	42
47	22	27	32	7	12	15	22	34	42
48	24	29	34	7	12	15	22	34	44
49	24	32	34	10	12	20	24	37	49
50	27	32	37	10	17	20	24	42	54
51	27	34	42	12	17	20	27	44	54
52	29	37	44	12	20	24	27	46	59
53	32	39	46	12	22	27	29	49	64
54	32	44	51	15	22	29	32	49	66
55	34	46	54	17	24	34	34	54	71
56	37	49	59	20	29	37	37	59	76
57	39	54	64	20	32	42	39	61	81
58	44	59	71	20	34	44	39	66	86
59	46	64	78	24	39	49	44	71	90
60	51	71	86	24	42	54	44	73	95
61	56	78	95	29	46	64	49	81	108
62	61	86	108	34	56	71	56	90	117
63	66	98	120	39	61	81	64	98	130
64	73	108	134	44	68	90	68	110	142
65	83	122	154	49	78	100	73	120	154
66	93	139	174	54	86	112	81	127	169
67	105	156	196	56	93	122	86	139	181
68	117	176	220	61	103	134	90	149	196
69	132	200	252	68	112	147	98	159	208
70	147	227	286	76	122	161	108	169	222
71	154	237	301	76	122	161	108	169	222
72	174	267	337	78	130	171	110	174	227
73	193	298	377	83	137	183	110	181	240
74	213	330	418	90	147	196	117	191	249
75	237	369	467	93	154	205	120	196	259
76	262	408	518	100	164	218	125	205	271
77	289	452	572	103	171	230	130	210	281
78	318	496	628	108	178	242	132	220	291
79	345	540	685	112	188	252	134	227	303
80	347	543	687	112	188	252	134	227	303
81	374	587	741	112	191	257	137	227	303
82	403	633	797	115	191	257	137	230	308
83	435	680	856	115	198	267	137	230	308
84	469	736	924	120	203	274	139	232	313
85	506	795	998	125	210	284	144	240	323

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
Current Annual Premium Rates for Policies Issued On or After 9/16/2002
Rates per $20 NCF

Issue	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:	
Age	50%	100%	50%	100%	50%	100%	50%	100%
<40	64	95	78	120	100	154	130	196
40	68	100	83	127	105	164	138	208
41	71	105	88	134	112	174	147	219
42	76	112	93	142	117	183	156	233
43	78	117	98	149	125	196	167	248
44	83	125	105	159	132	208	176	262
45	88	132	110	169	142	220	187	280
46	93	139	117	178	149	232	199	297
47	98	149	125	188	159	247	213	317
48	105	156	132	200	169	262	228	337
49	110	166	139	213	178	276	242	357
50	117	176	149	225	191	293	259	380
51	125	188	159	240	203	313	277	406
52	134	200	169	254	218	333	297	432
53	142	213	181	271	232	355	320	464
54	152	227	193	291	249	377	343	496
55	164	242	205	311	267	403	369	530
56	174	257	222	330	286	430	398	568
57	186	276	237	352	308	460	429	608
58	200	293	257	377	330	489	464	651
59	215	315	274	403	355	523	501	700
60	232	337	296	433	384	562	542	755
61	254	367	325	469	418	609	597	821
62	279	399	355	509	457	658	657	893
63	306	433	389	553	501	714	723	974
64	337	472	428	599	550	773	795	1,061
65	379	526	479	665	616	853	896	1,176
66	418	570	528	721	680	927	989	1,283
67	460	621	582	785	748	1,007	1,092	1,404
68	504	675	638	853	822	1,093	1,205	1,528
69	560	741	709	936	912	1,201	1,340	1,683
70	621	814	787	1,027	1,010	1,313	1,487	1,847
71	643	831	812	1,049	1,042	1,340	1,530	1,885
72	709	910	895	1,144	1,147	1,457	1,683	2,055
73	778	988	983	1,245	1,257	1,582	1,847	2,234
74	851	1,068	1,073	1,345	1,374	1,709	2,020	2,421
75	932	1,161	1,176	1,460	1,506	1,853	2,211	2,626
76	1,015	1,254	1,284	1,575	1,641	2,000	2,404	2,830
77	1,098	1,345	1,389	1,687	1,775	2,137	2,585	3,021
78	1,183	1,435	1,499	1,797	1,910	2,271	2,770	3,205
79	1,267	1,521	1,606	1,905	2,042	2,401	2,937	3,369
80	1,267	1,521	1,606	1,905	2,042	2,401	2,937	3,369
81	1,340	1,577	1,694	1,968	2,132	2,455	3,023	3,410
82	1,428	1,668	1,807	2,081	2,262	2,582	3,182	3,565
83	1,528	1,768	1,927	2,203	2,396	2,716	3,340	3,724
84	1,638	1,880	2,064	2,345	2,558	2,880	3,534	3,920
85	1,763	2,010	2,215	2,506	2,738	3,069	3,750	4,147

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
Current Annual Premium Rates for Policies Issued On or After 9/16/2002
Rates per $20 NCF

Issue	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:	
Age	50%	100%	50%	100%	50%	100%	50%	100%
<40	32	49	42	68	59	100	84	130
40	32	54	44	73	64	105	89	138
41	34	59	46	76	66	112	95	150
42	37	61	49	83	73	120	104	159
43	39	66	54	88	76	127	110	170
44	42	68	56	93	83	134	118	182
45	44	73	61	98	86	142	127	193
46	49	78	64	105	93	152	135	205
47	51	81	68	112	98	159	144	216
48	54	88	73	120	105	169	156	231
49	59	93	81	127	115	181	167	248
50	64	100	86	134	120	193	182	265
51	68	105	90	144	130	203	196	282
52	71	110	98	152	137	215	210	306
53	78	120	105	161	149	230	228	323
54	83	125	112	171	159	245	248	346
55	88	134	122	181	171	259	265	372
56	98	144	130	196	183	274	288	398
57	105	152	139	208	196	291	311	427
58	112	164	149	220	210	313	337	458
59	120	171	161	232	225	330	366	490
60	130	183	171	247	240	347	398	522
61	142	200	188	269	267	377	441	574
62	156	215	208	291	291	408	484	623
63	171	235	227	313	318	438	530	674
64	183	252	245	337	345	472	582	729
65	203	271	271	362	379	509	637	793
66	220	293	291	389	408	543	692	853
67	237	311	313	416	438	577	749	914
68	254	330	337	438	472	611	804	974
69	274	355	364	469	509	653	873	1,046
70	296	374	394	501	550	697	940	1,118
71	291	369	389	491	543	680	934	1,101
72	306	384	408	511	572	712	986	1,153
73	323	401	430	531	601	741	1,035	1,205
74	335	416	450	553	631	770	1,087	1,257
75	352	433	472	575	660	800	1,141	1,311
76	369	447	494	597	694	831	1,193	1,366
77	381	460	513	614	719	856	1,239	1,404
78	396	472	533	633	748	880	1,277	1,438
79	411	484	553	648	773	900	1,308	1,464
80	411	484	553	648	773	900	1,308	1,464
81	399	467	540	626	751	863	1,245	1,424
82	413	479	555	641	770	878	1,262	1,398
83	425	491	572	655	792	897	1,280	1,412
84	440	506	589	675	814	919	1,306	1,435
85	455	521	611	694	841	946	1,334	1,461

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
Current Annual Premium Rates for Policies Issued On or After 9/16/2002
Rates per $20 NCF

Issue	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:	
Age	50%	100%	50%	100%	50%	100%	50%	100%
<40	81	122	108	166	152	237	231	331
40	83	130	112	174	159	247	242	346
41	88	134	117	181	164	257	254	363
42	90	139	122	188	174	269	268	380
43	98	147	130	198	181	279	280	395
44	100	152	134	205	191	289	294	412
45	105	159	142	213	198	301	308	429
46	110	166	147	220	208	313	323	450
47	115	171	152	230	215	325	337	467
48	120	178	159	240	225	337	355	487
49	127	186	169	249	237	352	375	510
50	132	193	176	259	247	367	392	533
51	137	200	183	269	257	379	412	553
52	142	208	191	281	269	394	429	579
53	152	218	200	291	281	408	450	602
54	156	225	210	301	291	425	473	628
55	164	232	220	313	306	438	496	654
56	171	245	227	325	318	455	522	683
57	181	252	240	340	333	472	548	715
58	188	264	249	352	350	491	576	746
59	198	274	262	364	364	511	605	778
60	208	284	274	379	379	528	637	810
61	225	306	296	403	413	562	692	870
62	242	325	320	433	443	601	744	931
63	259	347	342	460	474	636	801	994
64	276	367	367	487	509	675	862	1,058
65	301	391	396	518	548	716	928	1,133
66	318	416	421	548	582	756	991	1,202
67	337	435	445	575	616	792	1,055	1,265
68	359	455	472	601	650	829	1,115	1,329
69	381	482	501	633	692	870	1,190	1,406
70	403	504	531	665	734	917	1,262	1,484
71	391	487	516	643	714	890	1,234	1,447
72	403	499	533	658	738	907	1,280	1,484
73	416	511	550	675	765	932	1,326	1,530
74	428	523	570	692	790	956	1,375	1,577
75	443	538	589	709	817	980	1,427	1,628
76	457	550	606	729	846	1,007	1,473	1,675
77	469	560	626	741	868	1,027	1,513	1,706
78	479	570	641	756	895	1,046	1,545	1,732
79	491	579	658	768	912	1,061	1,568	1,749
80	491	579	658	768	912	1,061	1,568	1,749
81	472	550	633	731	875	1,007	1,481	1,709
82	484	557	643	741	890	1,012	1,481	1,634
83	491	567	658	753	907	1,027	1,490	1,640
84	506	579	672	768	927	1,046	1,510	1,657
85	518	592	692	787	951	1,071	1,530	1,677

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

Comprehensive Policy

Individual Rates for Lifetime Premium Payment Option
0-Day Elimination Period
Current Annual Premium Rates for Policies Issued On or After 9/16/2002
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	**Benefit Period**					**Benefit Period**					**Benefit Period**				
Age	*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	90	105	117	159	42	59	61	64	104	76	100	117	132	184
40	78	100	115	130	173	46	64	66	68	115	83	110	130	147	205
41	83	103	120	134	179	49	66	68	71	121	86	115	134	154	210
42	86	108	125	139	184	51	68	71	73	124	90	120	139	159	219
43	88	110	127	144	193	54	71	73	76	130	93	122	144	164	228
44	90	115	132	149	199	54	73	76	78	133	95	127	149	169	233
45	95	117	137	154	205	56	76	78	81	138	100	132	154	176	242
46	98	122	142	159	210	59	76	81	83	141	103	134	159	181	251
47	100	125	147	164	219	59	78	83	86	147	105	139	164	186	257
48	103	130	149	169	225	61	81	86	88	150	108	144	169	191	265
49	105	132	154	174	231	64	83	88	90	156	112	149	174	198	274
50	110	137	159	178	236	66	86	90	95	159	115	152	178	203	280
51	112	139	164	181	245	66	88	93	98	164	117	156	183	208	288
52	115	144	166	186	251	68	90	95	100	167	122	161	188	215	297
53	117	147	171	191	257	71	93	98	103	173	125	164	193	220	303
54	120	152	176	196	262	73	95	100	105	176	127	169	198	225	311
55	125	154	181	200	271	73	98	103	108	182	130	174	203	230	320
56	134	169	196	220	294	78	103	108	112	190	134	178	210	237	329
57	144	183	213	237	320	81	108	112	117	199	137	183	215	245	337
58	156	196	230	257	346	86	112	117	122	208	142	186	220	249	346
59	166	210	245	274	372	88	117	122	127	216	144	191	227	257	355
60	176	225	262	293	398	93	122	127	132	225	149	196	232	264	363
61	193	245	286	320	435	95	130	139	147	239	152	205	242	274	378
62	208	267	311	350	473	105	137	152	164	254	164	213	252	284	392
63	225	286	335	379	510	108	144	164	178	268	166	220	262	293	406
64	240	308	359	406	550	117	154	176	196	280	176	230	269	306	424
65	254	328	386	435	588	122	161	188	210	294	178	237	279	315	438
66	281	359	423	477	646	127	171	200	225	311	183	247	291	330	452
67	303	391	460	518	703	137	178	210	237	331	193	254	303	345	478
68	328	423	496	560	764	142	188	222	249	346	198	267	313	355	493
69	352	455	533	601	821	147	198	232	264	366	205	276	325	369	513
70	374	487	572	643	882	156	208	245	276	380	218	289	340	386	530
71	413	535	628	707	968	161	215	254	289	401	220	293	347	394	548
72	450	584	687	773	1,058	171	225	267	301	418	230	306	357	403	562
73	489	636	743	836	1,144	176	235	276	313	438	232	311	367	416	582
74	526	685	802	900	1,234	183	245	289	325	455	242	320	379	430	597
75	562	734	858	966	1,329	191	254	301	340	467	247	330	389	440	611
76	614	800	939	1,059	1,450	198	267	311	347	490	254	340	396	445	628
77	665	868	1,017	1,144	1,574	203	271	323	364	510	257	342	408	465	646
78	714	934	1,098	1,235	1,700	213	284	335	379	527	264	355	418	474	660
79	765	1,002	1,176	1,323	1,824	220	293	347	394	548	271	362	430	489	677
80	814	1,073	1,264	1,425	1,963	225	301	350	391	553	276	369	438	496	686
81	888	1,169	1,372	1,543	2,136	230	311	367	416	579	279	374	445	506	700
82	961	1,267	1,489	1,677	2,320	237	318	377	423	591	284	379	447	509	709
83	1,034	1,364	1,604	1,809	2,502	242	325	384	433	608	286	384	455	513	721
84	1,108	1,462	1,721	1,944	2,686	247	335	391	440	623	289	389	460	521	729
85	1,181	1,562	1,836	2,071	2,871	252	340	401	455	637	291	394	465	526	738

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

Comprehensive Policy

Individual Rates for 10-Year Premium Payment Option
0-Day Elimination Period
Current Annual Premium Rates for Policies Issued On or After 9/16/2002
Rates per $10 Daily Benefit

	Policy Form: LTC-CD8-MA-PA					**Rider: LTC8-PA-SIP**					**Rider: LTC8-PA-CIP**				
	Base Rates with No Inflation Protection					**Simple Inflation Protection Rider**					**Compound Inflation Protection Rider**				
Issue	**Benefit Period**					**Benefit Period**					**Benefit Period**				
Age	*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	139	178	208	232	317	83	112	120	125	210	147	198	235	267	375
41	144	183	215	242	329	86	117	122	130	219	152	205	245	276	386
42	149	191	222	252	340	90	120	127	134	228	156	213	252	286	401
43	154	198	232	259	352	93	125	132	137	236	164	220	262	296	415
44	159	205	240	269	363	95	130	137	142	242	169	227	271	308	429
45	166	210	247	276	375	98	134	142	147	251	174	235	279	318	444
46	171	218	254	286	386	103	137	144	152	259	178	242	289	328	458
47	176	225	262	293	398	105	142	149	156	268	186	249	296	337	473
48	181	232	269	303	409	108	147	154	161	274	191	257	306	347	484
49	186	237	279	313	421	110	152	159	166	282	196	264	315	357	499
50	191	245	286	320	435	115	154	164	171	291	200	271	323	367	513
51	196	252	293	330	447	117	159	169	176	300	208	279	333	377	527
52	200	257	301	337	458	120	164	171	181	306	213	286	340	386	542
53	208	264	308	347	470	125	166	176	183	314	218	293	350	396	556
54	213	271	318	355	481	127	171	181	188	323	222	301	359	406	571
55	218	279	325	364	493	130	176	186	193	331	230	308	367	418	582
56	232	298	350	394	533	134	183	191	200	343	232	313	374	423	591
57	249	320	374	421	571	139	188	198	208	355	237	320	379	430	599
58	267	342	399	450	611	147	196	205	213	366	242	325	386	438	608
59	281	362	425	477	648	152	203	213	220	380	247	330	394	445	620
60	298	384	450	506	689	156	210	220	227	392	249	335	401	455	628
61	315	408	479	538	732	161	215	232	247	404	254	340	403	460	637
62	335	433	509	570	778	166	222	247	269	418	257	345	411	465	646
63	355	457	535	604	821	171	230	262	289	429	262	352	416	472	657
64	372	482	565	636	868	178	237	276	308	444	267	357	423	479	669
65	391	506	594	667	914	183	245	291	328	458	271	364	430	487	680
66	416	538	631	712	971	188	252	298	337	470	274	369	435	494	686
67	440	570	670	753	1,032	193	259	308	347	484	279	374	443	499	697
68	465	604	709	797	1,092	200	267	315	357	499	284	379	447	506	706
69	489	636	746	839	1,153	205	276	325	369	513	289	386	457	516	718
70	511	667	785	883	1,213	213	284	335	379	527	293	394	465	526	732
71	548	714	839	944	1,294	215	289	340	384	536	293	394	465	526	732
72	582	760	890	1,002	1,378	218	293	347	391	545	293	394	467	528	735
73	616	804	944	1,064	1,461	222	298	352	399	556	296	396	469	531	741
74	653	851	998	1,122	1,545	227	303	359	406	568	298	401	472	535	746
75	687	897	1,051	1,183	1,626	232	311	367	416	579	301	403	477	540	755
76	731	956	1,122	1,264	1,738	235	315	372	421	588	301	403	479	540	755
77	775	1,017	1,193	1,342	1,850	240	320	379	428	597	303	406	479	543	758
78	822	1,076	1,264	1,423	1,963	242	328	386	435	608	303	408	482	548	761
79	866	1,137	1,335	1,504	2,072	247	333	394	445	620	306	411	487	550	767
80	910	1,196	1,406	1,582	2,185	252	340	401	452	634	308	413	491	555	775
81	976	1,286	1,511	1,702	2,355	254	342	403	457	637	308	413	489	553	772
82	1,044	1,377	1,619	1,822	2,525	257	345	408	462	646	306	413	489	553	772
83	1,110	1,467	1,724	1,944	2,692	259	350	413	467	654	306	413	489	553	775
84	1,176	1,557	1,831	2,064	2,862	262	355	418	472	663	308	413	489	553	775
85	1,245	1,646	1,936	2,183	3,029	264	357	423	479	672	308	416	491	555	663

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

Comprehensive Policy

Individual Rates for Lifetime Premium Payment Option
0-Day Elimination Period
Current Annual Premium Rates for Policies Issued On or After 9/16/2002
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	**Benefit Period**					**Benefit Period**					**Benefit Period**				
Age	*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	46	54	61	66	95	27	34	42	44	69	49	61	71	76	130
40	49	59	66	73	107	29	37	44	44	69	56	68	81	83	138
41	51	61	71	78	112	32	39	46	46	75	59	73	83	88	144
42	54	66	73	81	118	34	42	49	51	78	64	76	90	93	150
43	59	68	78	86	124	34	44	51	54	84	64	81	93	98	156
44	61	73	83	90	133	37	44	54	56	84	66	81	95	103	159
45	64	76	86	95	138	39	49	59	59	89	68	86	100	105	164
46	66	81	90	98	144	42	49	59	64	92	73	88	105	112	170
47	68	83	95	103	150	44	51	61	66	98	76	93	108	117	176
48	73	88	98	108	156	42	54	66	66	101	76	95	112	120	184
49	76	90	103	112	161	44	56	68	68	107	78	100	115	125	190
50	78	95	108	115	167	46	56	68	73	110	83	103	120	132	196
51	81	98	110	120	173	49	61	73	76	115	86	108	125	134	202
52	83	103	115	125	182	51	61	76	78	115	88	108	127	139	205
53	88	105	120	130	187	51	64	78	81	121	88	112	130	144	210
54	90	110	122	132	193	54	66	81	86	124	93	115	137	149	216
55	93	112	127	137	199	56	68	83	88	130	95	120	139	154	222
56	100	122	137	149	213	59	73	88	93	138	100	125	147	164	231
57	108	130	147	159	231	61	78	93	98	141	103	132	154	176	239
58	112	139	159	171	245	66	83	95	103	150	110	134	156	183	248
59	120	147	169	181	262	68	88	100	108	153	112	142	164	196	257
60	127	156	178	193	277	71	93	105	112	161	117	147	171	205	265
61	137	169	193	208	297	73	95	110	120	170	120	152	176	208	274
62	147	181	205	222	320	78	100	117	125	179	125	154	183	210	282
63	154	191	220	240	340	83	105	120	130	187	130	161	186	210	291
64	164	203	232	254	363	88	110	127	134	196	134	164	193	213	300
65	174	215	247	269	383	90	112	132	142	205	137	169	198	215	308
66	196	242	279	303	432	98	120	142	152	219	144	178	208	227	326
67	218	269	308	335	478	103	130	152	164	236	152	188	220	242	346
68	237	293	340	369	527	112	139	161	176	254	159	200	232	252	363
69	259	320	369	401	574	117	149	171	188	271	166	210	245	267	383
70	281	347	401	435	623	125	156	181	198	285	174	220	254	279	401
71	315	389	447	487	700	130	164	191	208	300	178	227	264	289	415
72	347	430	494	538	775	137	171	200	218	317	186	235	274	298	432
73	381	469	543	589	853	142	181	210	230	334	191	242	281	306	447
74	413	511	589	641	928	149	188	220	240	352	198	249	291	315	464
75	447	553	636	692	1,006	154	196	230	249	366	203	257	301	325	478
76	504	623	719	782	1,136	166	210	247	267	386	215	271	318	342	496
77	562	692	804	875	1,265	176	227	262	281	409	225	289	330	357	513
78	619	763	888	966	1,392	186	242	276	301	432	235	303	347	377	536
79	677	831	973	1,059	1,522	196	259	291	315	455	245	320	359	391	553
80	734	902	1,056	1,149	1,651	208	274	308	333	476	257	335	377	408	571
81	800	985	1,152	1,254	1,822	213	281	318	342	493	262	340	381	413	585
82	868	1,071	1,249	1,359	1,992	218	286	328	352	510	264	342	386	421	597
83	934	1,154	1,345	1,462	2,162	222	296	337	364	527	267	350	391	428	611
84	1,002	1,240	1,443	1,567	2,332	227	301	347	374	545	269	352	396	435	623
85	1,068	1,323	1,538	1,672	2,502	232	308	357	384	562	274	357	401	440	637

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

Comprehensive Policy

Individual Rates for Lifetime Premium Payment Option
0-Day Elimination Period
Current Annual Premium Rates for Policies Issued On or After 9/16/2002
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	**Benefit Period**					**Benefit Period**					**Benefit Period**				
Age	*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	49	56	64	68	98	27	34	44	46	72	51	64	73	78	135
40	51	61	68	76	110	29	39	46	46	72	59	71	83	88	144
41	54	64	73	81	118	32	42	49	49	78	61	76	88	93	150
42	56	68	76	83	124	34	44	51	54	81	66	78	95	98	156
43	61	71	81	88	130	37	46	54	56	86	66	83	98	103	161
44	64	76	86	93	138	39	46	56	59	86	68	86	100	108	164
45	66	78	88	100	144	42	51	61	61	92	71	90	105	108	170
46	68	83	93	103	150	44	51	61	66	95	76	93	110	115	176
47	71	86	100	108	156	46	54	64	68	101	78	98	110	122	184
48	76	90	103	112	161	44	56	68	68	107	78	100	115	125	193
49	78	93	108	117	167	46	59	71	71	112	83	105	120	130	199
50	81	100	112	120	173	49	56	71	76	115	88	105	125	137	205
51	83	103	115	125	179	51	64	76	78	121	90	110	130	139	210
52	86	108	120	130	190	54	64	78	81	118	93	110	132	144	210
53	90	110	125	134	196	54	66	81	83	124	93	117	134	149	219
54	93	115	127	137	202	56	68	83	90	127	98	120	142	156	225
55	98	117	132	142	208	56	71	86	93	135	98	125	144	161	231
56	105	127	142	154	222	61	76	93	98	144	103	130	154	171	239
57	112	134	152	166	239	64	81	98	100	147	105	137	161	181	251
58	117	144	166	178	254	68	88	98	105	156	115	139	161	191	259
59	125	152	176	188	274	71	93	103	112	159	117	149	169	203	265
60	132	164	186	200	288	73	95	110	117	167	122	152	178	215	277
61	142	176	200	215	308	76	98	115	125	176	125	156	183	218	285
62	152	188	213	232	331	83	105	122	130	187	130	159	191	218	294
63	161	198	230	249	355	86	110	125	134	193	134	169	193	218	303
64	171	210	242	264	378	90	115	132	139	205	139	171	200	222	311
65	181	225	257	279	398	93	115	137	149	213	142	174	205	225	323
66	203	252	291	315	450	103	125	147	156	228	152	186	215	237	340
67	227	279	320	347	499	105	137	159	171	245	156	196	230	252	357
68	247	306	355	384	548	117	144	166	183	265	164	208	240	262	378
69	269	333	384	418	597	122	156	178	196	282	174	220	254	276	398
70	293	362	418	452	648	130	161	188	205	297	178	227	264	291	415
71	328	403	465	506	729	134	171	198	215	311	186	237	276	301	429
72	362	447	513	560	807	142	178	208	225	329	193	245	286	311	450
73	396	489	565	614	888	149	188	218	237	346	198	252	291	318	464
74	430	531	614	665	966	154	196	227	249	366	205	259	301	330	481
75	465	575	660	719	1,046	161	203	240	259	380	213	267	313	340	499
76	523	648	748	814	1,182	174	220	257	276	401	225	284	330	355	516
77	584	719	836	910	1,317	183	237	271	293	424	235	301	345	372	533
78	643	792	924	1,005	1,447	193	252	286	313	450	245	315	359	391	559
79	704	866	1,012	1,100	1,582	203	269	303	328	473	254	333	374	408	576
80	763	939	1,098	1,196	1,718	215	284	320	345	496	267	347	391	423	594
81	831	1,024	1,198	1,306	1,894	222	293	330	355	513	271	355	396	428	608
82	902	1,115	1,298	1,413	2,072	227	296	342	367	530	276	355	403	438	620
83	971	1,201	1,399	1,521	2,248	232	308	352	379	548	279	364	406	445	634
84	1,042	1,289	1,501	1,631	2,424	237	313	359	389	568	281	367	411	452	648
85	1,110	1,377	1,599	1,738	2,603	242	320	372	401	585	286	369	418	460	663

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

Comprehensive Policy

Individual Rates for Lifetime Premium Payment Option
0-Day Elimination Period
Current Annual Premium Rates for Policies Issued On or After 9/16/2002
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	**Benefit Period**					**Benefit Period**					**Benefit Period**				
Age	*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	83	127	32	42	49	51	84	59	73	88	93	147
40	61	73	83	90	135	39	46	56	59	95	68	86	100	105	167
41	66	78	88	95	144	39	49	59	64	101	71	88	105	110	173
42	68	83	93	103	153	44	51	64	64	104	73	90	108	112	182
43	73	88	100	108	161	44	54	64	68	110	76	95	110	117	187
44	76	93	105	112	170	46	54	66	71	112	81	98	115	122	193
45	81	98	110	120	182	49	56	68	73	115	81	100	120	125	196
46	83	100	115	125	190	51	61	73	76	121	86	105	122	130	205
47	88	105	120	130	199	51	64	76	81	124	88	108	127	134	210
48	90	110	127	137	208	54	66	76	81	130	90	112	130	137	216
49	95	115	132	142	216	56	68	78	86	133	93	115	132	142	222
50	100	120	137	149	225	56	71	83	88	138	95	117	137	147	231
51	103	125	142	154	233	59	71	86	90	144	98	120	142	152	236
52	108	130	147	159	242	61	73	88	95	147	100	122	144	156	242
53	110	134	154	166	251	64	76	88	95	153	103	127	147	159	248
54	115	139	159	171	259	64	78	93	100	156	105	130	152	164	257
55	117	144	164	176	271	68	81	95	103	159	110	132	156	169	259
56	122	147	169	183	280	68	86	98	105	164	110	137	159	171	265
57	125	152	174	188	288	71	86	100	108	167	115	139	164	176	271
58	130	156	181	193	297	71	88	103	112	173	117	144	166	181	280
59	132	161	186	200	306	76	90	105	112	176	120	147	169	183	285
60	137	166	191	205	314	76	93	108	117	182	122	149	174	188	291
61	149	181	208	225	343	78	98	112	122	190	125	154	178	193	300
62	161	196	225	242	372	83	103	117	130	199	130	159	183	200	311
63	171	210	242	262	398	88	108	125	134	213	134	164	191	208	323
64	183	225	259	279	427	93	112	130	142	222	139	169	196	215	334
65	196	240	276	298	455	95	117	134	147	231	142	174	200	220	343
66	218	267	306	330	507	100	125	144	159	245	147	181	210	232	360
67	237	291	335	364	556	108	134	154	166	262	156	191	222	242	378
68	259	318	367	396	608	115	139	161	178	277	161	200	230	252	395
69	279	342	396	430	657	122	149	171	186	294	171	210	242	262	412
70	301	369	425	462	709	127	156	181	198	308	176	218	252	274	429
71	335	413	474	516	793	134	164	193	210	326	183	225	264	286	447
72	372	455	526	570	876	139	174	200	220	343	188	235	271	296	464
73	406	499	575	623	960	149	183	213	232	360	198	245	284	308	481
74	443	540	626	677	1,043	154	193	220	242	378	203	254	291	318	499
75	477	584	675	731	1,127	161	200	232	254	395	210	262	303	330	516
76	535	658	758	822	1,271	171	213	249	271	418	220	274	318	347	539
77	594	729	841	914	1,412	181	227	267	286	444	230	286	333	362	565
78	650	802	927	1,005	1,556	191	237	279	301	470	240	298	347	377	591
79	709	873	1,010	1,098	1,698	200	252	296	315	496	249	311	362	391	617
80	768	946	1,093	1,188	1,842	210	264	313	333	519	259	323	377	408	640
81	836	1,032	1,191	1,296	2,012	215	271	323	342	536	262	328	381	413	648
82	905	1,117	1,291	1,403	2,182	220	279	333	352	550	267	333	384	418	660
83	976	1,205	1,389	1,511	2,355	222	281	342	364	565	267	335	391	421	666
84	1,044	1,291	1,489	1,619	2,525	227	289	352	374	579	271	340	394	425	677
85	1,112	1,377	1,587	1,726	2,695	232	296	362	384	597	274	345	399	430	686

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

Comprehensive Policy

Individual Rates for Lifetime Premium Payment Option
0-Day Elimination Period
Current Annual Premium Rates for Policies Issued On or After 9/16/2002
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				
	Benefit Period					Benefit Period					Benefit Period				
Issue Age	*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	71	81	86	133	32	44	51	54	86	61	76	93	98	153
40	64	76	86	93	141	42	49	59	61	98	71	90	105	110	173
41	68	81	90	100	150	42	51	61	66	104	73	93	110	112	179
42	71	86	98	108	159	46	54	66	66	110	76	95	110	117	190
43	76	90	105	112	167	46	56	66	71	115	78	100	112	122	196
44	78	98	110	117	176	49	54	68	73	118	86	100	120	127	202
45	83	103	115	125	190	51	59	71	76	118	86	103	125	130	202
46	86	105	120	130	199	54	64	76	78	124	90	108	127	134	210
47	90	110	125	134	208	54	66	78	83	127	93	110	132	139	219
48	93	115	132	142	216	56	68	78	86	135	95	117	134	142	225
49	100	120	137	147	225	56	71	81	90	138	95	120	137	149	231
50	105	125	142	154	233	59	73	88	93	144	98	122	142	154	239
51	108	130	147	161	242	61	73	90	93	150	100	125	149	156	248
52	112	134	152	166	251	64	76	93	98	153	103	127	152	161	254
53	115	139	161	174	259	66	78	90	98	161	105	132	152	164	259
54	120	144	166	178	271	66	83	95	103	161	110	134	156	169	265
55	122	149	171	183	282	71	86	98	108	164	115	139	161	176	268
56	127	152	176	191	291	71	90	100	110	170	115	144	164	178	277
57	130	156	181	196	300	73	90	103	112	173	120	147	171	183	282
58	134	164	188	200	308	73	90	108	117	182	122	149	174	188	291
59	137	169	193	208	317	78	93	110	117	184	125	152	176	191	297
60	142	174	198	213	326	78	95	112	122	190	127	154	181	196	303
61	154	188	215	235	357	83	103	117	127	196	130	159	186	200	311
62	169	203	235	252	386	86	108	122	134	208	134	166	191	208	323
63	178	218	252	271	415	90	112	130	139	219	139	171	198	218	334
64	191	235	269	291	444	98	117	134	147	231	144	174	203	222	349
65	203	249	289	311	473	100	122	139	152	242	149	181	208	227	357
66	227	276	318	342	527	103	130	149	166	254	152	188	218	242	375
67	247	303	347	379	579	112	139	161	174	271	161	198	232	252	392
68	269	330	381	411	631	120	144	169	186	288	169	208	240	264	412
69	291	357	411	447	683	127	154	178	193	306	176	218	252	271	429
70	313	384	443	482	738	132	164	188	205	320	183	227	262	284	447
71	347	430	494	535	824	142	169	200	220	340	191	232	274	298	464
72	386	472	548	592	911	144	181	208	230	357	196	245	281	308	484
73	423	518	597	648	997	154	191	222	242	375	205	254	296	320	501
74	460	562	650	704	1,084	161	200	230	252	395	213	264	303	330	519
75	496	609	702	760	1,173	166	208	242	264	409	218	271	315	342	536
76	557	685	787	853	1,323	178	220	259	284	432	227	284	333	362	559
77	619	758	875	951	1,470	188	237	276	298	461	237	298	345	377	585
78	677	834	963	1,044	1,620	198	247	291	313	487	249	311	362	394	614
79	738	907	1,051	1,142	1,767	208	262	306	328	513	259	323	374	406	640
80	800	983	1,137	1,235	1,917	218	276	325	347	539	269	337	391	425	663
81	870	1,073	1,237	1,347	2,092	222	281	337	357	556	271	340	399	430	674
82	941	1,161	1,342	1,460	2,268	227	291	347	367	574	276	347	399	435	686
83	1,015	1,254	1,445	1,572	2,450	232	291	355	379	588	276	347	406	438	692
84	1,086	1,342	1,548	1,682	2,626	237	301	367	391	602	284	355	411	443	703
85	1,156	1,433	1,650	1,795	2,801	242	306	377	401	623	286	357	413	447	715

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

Comprehensive Policy

Individual Rates for 10-Year Premium Payment Option
0-Day Elimination Period
Current Annual Premium Rates for Policies Issued On or After 9/16/2002
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				
	Benefit Period					Benefit Period					Benefit Period				
Issue Age	*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	83	100	115	122	187	64	78	90	100	156	122	154	178	196	303
41	88	108	122	130	199	68	83	95	108	164	130	161	188	208	317
42	93	112	130	139	210	71	88	103	112	170	137	174	200	218	331
43	98	120	137	147	219	76	93	108	120	182	147	181	210	232	349
44	105	125	144	154	231	78	100	115	127	190	152	193	222	245	366
45	110	132	152	161	242	83	105	120	134	199	159	200	232	257	380
46	115	139	159	171	254	86	108	127	139	205	166	208	245	267	395
47	120	144	166	178	265	90	115	132	147	213	174	220	254	279	409
48	125	152	174	186	274	95	120	139	152	225	183	227	267	293	427
49	130	156	181	193	285	100	127	144	159	233	191	240	276	306	441
50	134	164	188	203	297	103	130	152	164	239	198	247	289	315	455
51	139	171	196	210	308	108	134	156	171	248	205	254	298	328	470
52	147	176	203	218	320	110	142	164	178	257	210	267	311	340	487
53	152	183	210	225	329	115	147	169	186	268	220	274	320	355	504
54	156	188	218	235	340	117	152	176	191	274	227	286	333	364	519
55	161	196	225	242	352	122	156	181	198	282	235	293	342	377	533
56	171	208	240	257	372	127	161	186	205	294	240	301	350	386	550
57	181	220	254	271	392	132	169	193	213	306	245	308	357	396	565
58	188	232	267	289	415	139	174	200	220	311	254	315	367	401	579
59	198	245	281	303	435	144	181	208	227	323	259	323	374	411	594
60	208	257	296	318	455	149	186	213	235	334	264	330	381	421	611
61	218	269	311	335	478	152	191	218	240	343	264	333	384	423	614
62	230	284	325	352	504	152	193	222	245	346	262	333	386	425	614
63	240	296	342	369	527	156	198	227	249	355	262	337	389	425	617
64	252	311	357	386	553	156	200	232	254	357	259	337	391	428	617
65	262	323	372	403	576	159	205	237	259	366	259	340	394	430	620
66	289	350	403	440	628	159	213	245	267	378	257	342	396	430	620
67	315	379	435	474	677	161	218	252	274	392	257	342	399	433	623
68	342	406	469	511	729	161	222	259	281	404	254	345	399	433	625
69	369	435	501	545	778	164	227	267	289	418	254	345	401	435	628
70	396	462	533	582	830	164	235	274	296	429	252	347	403	435	628
71	423	501	577	628	908	171	237	279	301	432	254	345	401	435	623
72	450	538	621	677	986	178	242	284	306	435	259	345	401	433	620
73	474	577	665	724	1,061	186	247	286	311	438	264	345	399	433	617
74	501	614	709	773	1,138	193	252	291	315	441	269	345	399	430	614
75	528	653	753	819	1,216	200	254	296	320	444	271	342	396	430	608
76	582	721	834	907	1,334	208	264	306	330	461	276	350	403	438	620
77	636	792	914	993	1,450	215	271	315	345	484	281	352	408	447	634
78	692	861	993	1,081	1,568	222	279	328	355	501	286	359	418	452	648
79	746	932	1,073	1,166	1,683	230	286	337	369	525	291	362	423	462	663
80	800	1,000	1,154	1,254	1,801	237	296	347	379	542	296	369	430	469	674
81	861	1,076	1,242	1,352	1,960	240	301	352	384	550	296	372	433	472	663
82	922	1,152	1,330	1,447	2,116	242	303	357	391	562	296	372	435	479	651
83	983	1,230	1,418	1,545	2,274	247	306	364	394	574	293	372	440	482	640
84	1,044	1,306	1,506	1,641	2,430	249	308	369	401	585	293	372	443	489	628
85	1,105	1,381	1,594	1,738	2,588	252	313	374	406	594	293	374	445	491	617

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

Comprehensive Policy

Individual Rates for 10-Year Premium Payment Option
0-Day Elimination Period
Current Annual Premium Rates for Policies Issued On or After 9/16/2002
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	**Benefit Period**					**Benefit Period**					**Benefit Period**				
Age	*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	86	105	120	127	196	66	81	93	105	161	127	159	186	203	314
41	90	112	127	134	208	73	86	100	112	170	137	166	196	218	329
42	98	117	134	144	219	73	90	108	117	176	142	181	208	227	346
43	103	125	142	152	228	78	95	112	125	190	152	188	220	242	363
44	110	130	149	161	239	81	105	120	132	199	156	200	232	254	380
45	115	137	156	169	251	86	110	125	139	208	164	208	242	267	398
46	120	144	166	178	265	88	112	132	144	210	174	218	254	276	409
47	125	149	174	186	277	93	120	137	152	222	181	230	264	289	424
48	130	156	181	193	285	100	125	144	159	233	191	237	276	306	444
49	134	164	188	200	297	105	132	149	166	242	198	247	286	318	458
50	139	171	196	210	308	108	134	159	171	248	205	257	301	328	473
51	144	178	203	218	320	112	139	164	178	259	215	264	311	342	490
52	152	183	210	227	331	115	147	171	183	268	220	276	323	352	507
53	156	191	218	235	343	120	152	176	193	277	230	284	335	367	525
54	164	196	227	245	355	120	159	181	198	285	235	298	345	379	539
55	169	203	235	252	366	127	164	188	205	294	242	306	355	391	553
56	178	215	249	267	386	132	169	193	215	306	249	313	364	403	574
57	188	230	264	281	406	137	174	200	222	320	254	320	372	413	588
58	196	242	276	301	432	144	181	210	227	323	264	328	381	416	602
59	205	254	293	315	452	152	188	215	237	337	269	335	389	428	617
60	215	267	308	330	473	156	193	220	245	349	276	345	396	438	637
61	227	279	323	347	499	156	200	227	249	355	274	347	399	440	637
62	240	296	337	367	525	156	200	232	254	360	271	345	403	443	640
63	249	308	357	384	548	161	205	235	259	369	271	350	403	443	643
64	262	323	372	401	576	164	208	242	264	372	269	352	406	445	640
65	271	335	386	421	599	166	215	247	269	380	271	355	411	447	646
66	301	364	421	457	654	164	220	254	279	392	267	355	411	447	643
67	328	394	452	494	703	169	227	262	284	409	267	357	416	450	648
68	357	423	489	531	758	166	230	269	293	421	264	357	413	450	651
69	384	452	521	567	810	171	237	279	301	435	264	359	418	452	654
70	411	482	555	606	865	171	242	284	306	444	264	359	418	452	651
71	440	521	599	653	945	178	247	291	313	450	264	359	418	452	646
72	467	560	645	704	1,026	186	252	296	318	452	271	357	418	450	643
73	494	599	692	753	1,104	193	257	298	323	455	274	359	413	450	640
74	521	638	738	804	1,185	200	262	301	328	458	281	359	413	447	637
75	550	680	782	851	1,265	208	264	308	335	461	281	355	413	447	631
76	606	751	868	944	1,389	215	274	318	342	478	286	364	418	455	643
77	660	824	951	1,032	1,507	225	281	328	359	504	293	367	425	467	660
78	719	895	1,032	1,125	1,631	232	291	342	367	522	298	374	435	469	674
79	775	968	1,117	1,213	1,749	240	298	350	384	548	303	377	438	482	692
80	831	1,039	1,201	1,306	1,873	247	308	362	394	565	308	384	447	487	700
81	895	1,120	1,291	1,406	2,038	249	313	367	399	574	308	386	450	491	689
82	958	1,198	1,384	1,506	2,199	252	315	372	406	585	308	386	452	499	677
83	1,022	1,279	1,474	1,606	2,366	257	318	379	411	597	306	386	457	501	663
84	1,086	1,357	1,567	1,707	2,528	259	320	384	416	608	306	386	460	509	651
85	1,149	1,438	1,658	1,807	2,692	262	325	389	423	617	306	389	462	511	640

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

Comprehensive Policy

Individual Rates for 10-Year Premium Payment Option
0-Day Elimination Period
Current Annual Premium Rates for Policies Issued On or After 9/16/2002
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	**Benefit Period**					**Benefit Period**					**Benefit Period**				
Age	*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	105	127	144	154	236	78	98	112	127	196	154	188	218	242	372
41	110	134	152	164	251	83	103	120	132	205	161	196	227	249	386
42	117	142	161	174	265	86	108	122	137	213	166	203	235	259	398
43	122	149	169	181	280	90	110	130	144	222	171	210	245	269	412
44	130	156	178	191	291	93	115	132	149	231	176	218	249	279	429
45	134	164	186	200	306	98	120	139	154	239	183	225	259	286	441
46	142	171	196	210	320	100	125	144	159	248	188	230	267	293	455
47	147	178	203	218	334	105	130	149	166	257	196	237	276	306	470
48	154	186	213	227	349	108	132	154	171	265	198	245	284	313	481
49	159	193	220	237	363	112	137	159	176	274	205	252	293	323	496
50	166	200	230	247	378	115	142	164	183	282	210	259	301	330	510
51	171	205	237	254	389	117	149	171	191	291	218	269	308	340	525
52	176	213	245	264	404	122	154	176	196	300	225	276	318	350	539
53	183	220	254	274	418	125	156	181	200	308	227	284	325	357	550
54	188	227	262	284	432	130	161	186	205	317	235	291	335	367	565
55	196	235	271	291	447	132	166	191	213	326	240	298	342	377	579
56	200	242	279	301	461	137	171	198	218	334	247	303	352	384	591
57	208	249	289	311	473	139	176	200	222	343	252	311	357	394	608
58	213	257	296	320	487	144	178	208	227	352	257	318	367	401	623
59	220	264	306	328	501	147	183	210	235	360	262	325	374	413	634
60	225	271	313	337	516	152	188	218	240	369	269	333	384	421	648
61	237	289	333	357	548	154	191	220	245	375	269	330	381	421	646
62	249	303	350	377	579	156	193	225	247	380	269	330	381	418	643
63	264	320	369	399	608	159	196	227	249	386	264	328	379	416	646
64	276	335	386	418	640	161	198	232	252	392	264	328	379	413	643
65	289	352	406	438	672	164	200	235	257	398	264	325	377	413	640
66	320	379	438	472	723	159	205	240	264	409	254	328	379	416	646
67	352	406	467	506	778	152	213	249	271	421	247	330	381	416	646
68	381	433	499	540	830	149	218	254	276	432	240	330	384	418	651
69	413	460	528	575	885	142	225	264	284	444	232	333	386	418	651
70	445	487	560	609	937	137	230	269	291	455	222	335	389	421	657
71	469	528	606	660	1,015	149	235	274	296	467	232	337	391	423	663
72	491	567	653	712	1,095	164	242	281	303	473	245	340	396	425	666
73	516	609	702	760	1,173	178	245	284	311	484	257	342	396	433	672
74	538	648	748	812	1,254	193	252	291	318	490	269	345	401	435	674
75	562	689	795	863	1,332	205	257	296	323	501	279	347	403	438	680
76	616	758	875	949	1,467	213	267	306	335	519	284	352	406	443	689
77	672	826	954	1,037	1,602	220	274	320	345	539	284	355	413	447	697
78	726	897	1,034	1,122	1,738	227	281	330	357	556	289	357	416	452	706
79	782	966	1,112	1,210	1,873	235	289	345	367	576	289	359	423	457	715
80	836	1,034	1,193	1,296	2,009	242	298	355	379	594	293	364	425	462	723
81	897	1,112	1,284	1,394	2,164	245	301	359	384	602	293	364	425	462	703
82	958	1,191	1,374	1,494	2,320	249	306	364	389	608	296	364	425	460	680
83	1,022	1,267	1,462	1,592	2,473	249	311	369	394	620	293	367	430	462	663
84	1,083	1,345	1,553	1,692	2,629	254	315	374	399	625	296	367	430	460	640
85	1,144	1,423	1,643	1,790	2,784	257	318	379	403	634	296	367	430	460	620

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

Comprehensive Policy

Individual Rates for 10-Year Premium Payment Option
0-Day Elimination Period
Current Annual Premium Rates for Policies Issued On or After 9/16/2002
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	**Benefit Period**					**Benefit Period**					**Benefit Period**				
Age	*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	110	132	149	161	245	81	103	117	132	205	159	196	227	249	386
41	115	139	156	171	259	86	108	125	137	213	166	203	237	259	404
42	122	147	169	181	277	88	112	127	142	222	174	213	242	269	412
43	127	154	176	188	291	93	115	134	149	231	178	220	254	279	429
44	134	164	186	198	303	98	117	137	156	239	183	225	259	291	447
45	139	171	193	208	317	103	125	144	161	251	191	232	269	298	458
46	147	178	203	218	331	105	130	152	166	259	196	240	279	306	476
47	152	186	210	227	349	110	134	156	171	265	205	247	289	318	487
48	161	193	220	237	363	110	137	161	178	277	205	254	296	325	501
49	166	200	230	247	378	115	142	164	183	285	213	262	303	335	516
50	174	208	240	257	392	120	149	169	191	294	218	271	313	342	530
51	178	213	247	264	404	122	156	178	198	303	225	281	320	355	548
52	183	220	254	274	421	127	161	183	205	311	235	289	330	364	559
53	191	230	264	284	435	130	161	188	210	320	237	293	337	372	571
54	196	237	271	296	450	134	166	193	213	329	245	301	350	381	588
55	203	245	281	303	464	137	174	200	220	340	249	311	357	391	602
56	208	252	291	313	478	144	178	205	225	349	257	315	364	399	617
57	215	259	301	323	493	147	183	208	232	355	264	323	372	411	631
58	220	267	308	333	507	152	186	215	237	366	269	330	381	418	646
59	230	274	318	340	522	152	191	218	245	375	271	340	389	430	660
60	235	281	325	352	536	156	198	227	247	383	279	347	399	435	674
61	247	301	345	372	571	159	198	230	254	389	279	342	399	438	672
62	259	315	364	391	602	164	200	232	257	395	279	342	396	435	669
63	274	333	384	416	631	166	203	237	259	404	276	342	394	430	672
64	289	347	401	435	666	166	208	242	262	406	274	342	396	430	669
65	301	367	423	455	697	169	208	242	267	415	274	337	391	430	666
66	333	394	455	491	752	166	215	249	274	427	264	342	394	433	672
67	367	423	487	526	810	156	220	259	284	438	257	342	396	433	672
68	396	450	518	562	865	156	227	264	286	450	249	342	399	435	677
69	430	479	550	597	919	147	232	274	296	461	242	345	401	435	677
70	462	506	582	633	974	144	240	281	303	473	232	347	406	438	683
71	489	550	631	687	1,055	154	242	284	308	487	240	350	406	440	689
72	511	589	680	741	1,138	171	252	291	315	493	254	355	411	443	692
73	535	633	729	790	1,219	186	254	296	325	504	269	357	413	452	700
74	560	675	778	844	1,303	200	262	303	330	510	279	357	418	452	703
75	584	716	826	897	1,383	215	267	308	335	522	291	362	421	455	709
76	641	787	910	988	1,525	222	279	318	347	542	296	367	423	460	718
77	699	861	993	1,078	1,666	230	284	333	359	562	296	367	428	465	726
78	756	934	1,076	1,166	1,807	237	291	342	372	579	301	372	433	472	735
79	814	1,005	1,156	1,259	1,948	245	301	359	381	599	301	374	440	474	744
80	870	1,076	1,242	1,347	2,090	252	311	367	394	617	303	379	440	482	752
81	934	1,156	1,335	1,450	2,251	254	313	374	399	625	303	379	443	479	732
82	998	1,237	1,428	1,553	2,412	259	318	379	406	634	308	379	443	479	709
83	1,064	1,318	1,521	1,655	2,571	259	323	384	408	646	306	381	447	482	692
84	1,127	1,399	1,614	1,760	2,732	264	328	391	413	651	308	381	447	477	666
85	1,191	1,479	1,709	1,861	2,897	267	330	394	421	657	308	381	447	479	643

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

	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		
Issue	**Benefit Period**			**Benefit Period**			**Benefit Period**		
Age	*1 Year*	*2 Years*	*3 Years*	*1 Year*	*2 Years*	*3 Years*	*1 Year*	*2 Years*	*3 Years*
<45	20	24	27	9	14	19	33	51	65
45	22	24	27	9	19	23	33	56	74
46	22	27	29	9	19	23	37	56	79
47	22	27	32	14	23	28	42	65	79
48	24	29	34	14	23	28	42	65	84
49	24	32	34	19	23	37	46	70	93
50	27	32	37	19	33	37	46	79	102
51	27	34	42	23	33	37	51	84	102
52	29	37	44	23	37	46	51	88	112
53	32	39	46	23	42	51	56	93	121
54	32	44	51	28	42	56	60	93	126
55	34	46	54	33	46	65	65	102	135
56	37	49	59	37	56	70	70	112	144
57	39	54	64	37	60	79	74	116	153
58	44	59	71	37	65	84	74	126	163
59	46	64	78	46	74	93	84	135	172
60	51	71	86	46	79	102	84	139	181
61	56	78	95	56	88	121	93	153	205
62	61	86	108	65	107	135	107	172	223
63	66	98	120	74	116	153	121	186	246
64	73	108	134	84	130	172	130	209	270
65	83	122	154	93	149	191	139	228	293
66	93	139	174	102	163	214	153	242	321
67	105	156	196	107	177	232	163	265	344
68	117	176	220	116	195	256	172	284	372
69	132	200	252	130	214	279	186	302	395
70	147	227	286	144	232	307	205	321	423
71	154	237	301	144	232	307	205	321	423
72	174	266	337	149	246	325	209	330	432
73	193	298	376	158	260	349	209	344	456
74	213	330	418	172	279	372	223	363	474
75	237	369	467	177	293	390	228	372	493
76	262	408	518	191	311	414	237	390	516
77	288	452	572	195	325	437	246	400	535
78	318	496	628	205	339	460	251	418	553
79	345	540	684	214	358	479	256	432	576
80	347	543	687	214	358	479	256	432	576
81	374	587	741	214	363	488	260	432	576
82	403	633	797	218	363	488	260	437	586
83	435	679	855	218	377	507	260	437	586
84	469	736	924	228	386	521	265	442	595
85	506	794	997	237	400	539	274	456	614

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	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:	
Age	50%	100%	50%	100%	50%	100%	50%	100%
<40	64	95	78	120	100	154	367	554
40	68	100	83	127	105	164	391	587
41	71	105	88	134	112	174	415	619
42	76	112	93	142	117	183	440	660
43	78	117	98	149	125	196	472	701
44	83	125	105	159	132	208	497	741
45	88	132	110	169	142	220	530	790
46	93	139	117	178	149	232	562	839
47	98	149	125	188	159	247	603	896
48	105	156	132	200	169	262	644	953
49	110	166	139	213	178	276	684	1,010
50	117	176	149	225	191	293	733	1,075
51	125	188	159	240	203	313	782	1,149
52	134	200	169	254	218	332	839	1,222
53	142	213	181	271	232	354	904	1,312
54	152	227	193	291	249	376	969	1,401
55	164	242	205	310	266	403	1,043	1,499
56	174	257	222	330	286	430	1,124	1,605
57	186	276	237	352	308	459	1,214	1,719
58	200	293	257	376	330	489	1,312	1,841
59	215	315	274	403	354	523	1,417	1,980
60	232	337	296	433	384	562	1,532	2,134
61	254	367	325	469	418	609	1,686	2,322
62	279	398	354	508	457	657	1,857	2,525
63	306	433	389	552	501	714	2,045	2,753
64	337	472	428	599	550	772	2,248	2,998
65	379	525	479	665	616	853	2,534	3,324
66	418	569	528	721	679	926	2,794	3,625
67	459	621	582	785	748	1,007	3,087	3,967
68	503	675	638	853	821	1,092	3,405	4,318
69	560	741	709	936	912	1,200	3,788	4,757
70	621	814	787	1,026	1,009	1,312	4,204	5,222
71	643	831	811	1,048	1,041	1,339	4,326	5,328
72	709	909	895	1,144	1,146	1,457	4,757	5,808
73	777	987	982	1,244	1,256	1,581	5,222	6,313
74	851	1,068	1,073	1,344	1,374	1,708	5,711	6,843
75	931	1,161	1,176	1,459	1,506	1,853	6,248	7,421
76	1,014	1,254	1,283	1,574	1,640	1,999	6,794	8,000
77	1,097	1,344	1,388	1,686	1,774	2,136	7,307	8,537
78	1,183	1,435	1,498	1,796	1,909	2,270	7,829	9,059
79	1,266	1,520	1,606	1,904	2,041	2,400	8,301	9,523
80	1,266	1,520	1,606	1,904	2,041	2,400	8,301	9,523
81	1,339	1,576	1,694	1,967	2,131	2,454	8,546	9,637
82	1,427	1,667	1,806	2,080	2,261	2,581	8,994	10,077
83	1,528	1,767	1,926	2,202	2,395	2,715	9,442	10,525
84	1,637	1,879	2,063	2,344	2,556	2,879	9,987	11,079
85	1,762	2,009	2,214	2,505	2,737	3,067	10,598	11,723

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	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:	
Age	50%	100%	50%	100%	50%	100%	50%	100%
<40	60	93	79	130	112	191	275	427
40	60	102	84	139	121	200	294	456
41	65	112	88	144	126	214	313	494
42	70	116	93	158	139	228	342	522
43	74	126	102	167	144	242	361	560
44	79	130	107	177	158	256	389	598
45	84	139	116	186	163	270	418	636
46	93	149	121	200	177	288	446	674
47	98	153	130	214	186	302	475	712
48	102	167	139	228	200	321	513	759
49	112	177	153	242	218	344	551	816
50	121	191	163	256	228	367	598	873
51	130	200	172	274	246	386	646	930
52	135	209	186	288	260	409	693	1,006
53	149	228	200	307	284	437	750	1,063
54	158	237	214	325	302	465	816	1,139
55	167	256	232	344	325	493	873	1,225
56	186	274	246	372	349	521	949	1,310
57	200	288	265	395	372	553	1,025	1,405
58	214	311	284	418	400	595	1,111	1,509
59	228	325	307	442	428	628	1,206	1,614
60	246	349	325	470	456	660	1,310	1,718
61	270	381	358	511	507	716	1,452	1,889
62	298	409	395	553	553	776	1,595	2,050
63	325	446	432	595	604	832	1,747	2,221
64	349	479	465	642	655	897	1,918	2,402
65	386	516	516	688	721	967	2,098	2,611
66	418	558	553	739	776	1,032	2,278	2,810
67	451	590	595	790	832	1,097	2,468	3,009
68	483	628	642	832	897	1,162	2,648	3,209
69	521	674	693	893	967	1,241	2,876	3,446
70	563	711	748	953	1,046	1,325	3,095	3,683
71	553	702	739	934	1,032	1,292	3,076	3,626
72	581	730	776	972	1,088	1,353	3,247	3,797
73	614	762	818	1,009	1,144	1,409	3,408	3,968
74	637	790	855	1,051	1,199	1,464	3,579	4,139
75	669	823	897	1,092	1,255	1,520	3,759	4,319
76	702	851	939	1,134	1,320	1,581	3,930	4,500
77	725	874	976	1,167	1,367	1,627	4,082	4,623
78	753	897	1,013	1,204	1,423	1,674	4,205	4,737
79	781	920	1,051	1,232	1,469	1,711	4,310	4,822
80	781	920	1,051	1,232	1,469	1,711	4,310	4,822
81	758	888	1,027	1,190	1,427	1,641	4,101	4,689
82	786	911	1,055	1,218	1,464	1,669	4,158	4,604
83	809	934	1,088	1,246	1,506	1,706	4,215	4,651
84	837	962	1,120	1,283	1,548	1,748	4,300	4,727
85	865	990	1,162	1,320	1,599	1,799	4,395	4,813

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	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:	
Age	50%	100%	50%	100%	50%	100%	50%	100%
<40	153	232	205	316	288	451	759	1,092
40	158	246	214	330	302	470	797	1,139
41	167	256	223	344	311	488	835	1,196
42	172	265	232	358	330	511	883	1,253
43	186	279	246	377	344	530	921	1,301
44	191	288	256	390	363	549	968	1,357
45	200	302	270	404	377	572	1,016	1,414
46	209	316	279	418	395	595	1,063	1,481
47	218	325	288	437	409	618	1,111	1,538
48	228	339	302	456	428	642	1,168	1,604
49	242	353	321	474	451	669	1,234	1,680
50	251	367	335	493	470	697	1,291	1,756
51	260	381	349	511	488	721	1,357	1,823
52	270	395	363	535	511	748	1,414	1,908
53	288	414	381	553	535	776	1,481	1,984
54	298	428	400	572	553	809	1,557	2,069
55	311	442	418	595	581	832	1,633	2,155
56	325	465	432	618	604	865	1,718	2,250
57	344	479	456	646	632	897	1,804	2,354
58	358	502	474	669	665	934	1,899	2,459
59	377	521	497	693	693	972	1,993	2,563
60	395	539	521	721	721	1,004	2,098	2,667
61	428	581	563	767	786	1,069	2,278	2,867
62	460	618	609	823	841	1,144	2,449	3,066
63	493	660	651	874	902	1,209	2,639	3,275
64	525	697	697	925	967	1,283	2,838	3,484
65	572	744	753	986	1,041	1,362	3,057	3,731
66	604	790	800	1,041	1,106	1,436	3,266	3,958
67	642	827	846	1,092	1,171	1,506	3,474	4,167
68	683	865	897	1,144	1,237	1,576	3,674	4,376
69	725	916	953	1,204	1,316	1,655	3,921	4,632
70	767	958	1,009	1,264	1,395	1,743	4,158	4,889
71	744	925	981	1,223	1,357	1,692	4,063	4,765
72	767	948	1,013	1,251	1,404	1,725	4,215	4,889
73	790	972	1,046	1,283	1,455	1,771	4,367	5,041
74	814	995	1,083	1,316	1,502	1,818	4,528	5,193
75	841	1,023	1,120	1,348	1,553	1,864	4,699	5,363
76	869	1,046	1,153	1,385	1,608	1,915	4,851	5,515
77	893	1,065	1,190	1,409	1,650	1,952	4,984	5,620
78	911	1,083	1,218	1,436	1,701	1,990	5,088	5,705
79	934	1,102	1,251	1,460	1,734	2,018	5,164	5,762
80	934	1,102	1,251	1,460	1,734	2,018	5,164	5,762
81	897	1,046	1,204	1,390	1,664	1,915	4,879	5,629
82	920	1,060	1,223	1,409	1,692	1,925	4,879	5,382
83	934	1,079	1,251	1,432	1,725	1,952	4,908	5,401
84	962	1,102	1,278	1,460	1,762	1,990	4,974	5,458
85	986	1,125	1,316	1,497	1,808	2,036	5,041	5,525

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				
	Benefit Period					Benefit Period					Benefit Period				
Issue Age	*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	90	105	117	448	79	112	116	121	342	144	191	223	251	608
40	78	100	115	130	489	88	121	126	130	380	158	209	246	279	674
41	83	103	120	134	505	93	126	130	135	399	163	218	256	293	693
42	86	108	125	139	521	98	130	135	139	408	172	228	265	302	721
43	88	110	127	144	546	102	135	139	144	427	177	232	274	311	750
44	90	115	132	149	562	102	139	144	149	437	181	242	284	321	769
45	95	117	137	154	578	107	144	149	153	456	191	251	293	335	797
46	98	122	142	159	595	112	144	153	158	465	195	256	302	344	826
47	100	125	147	164	619	112	149	158	163	484	200	265	311	353	845
48	103	130	149	169	635	116	153	163	167	494	205	274	321	363	873
49	105	132	154	174	652	121	158	167	172	513	214	284	330	377	902
50	110	137	159	178	668	126	163	172	181	522	218	288	339	386	921
51	112	139	164	181	692	126	167	177	186	541	223	298	349	395	949
52	115	144	166	186	709	130	172	181	191	551	232	307	358	409	978
53	117	147	171	191	725	135	177	186	195	570	237	311	367	418	997
54	120	152	176	196	741	139	181	191	200	579	242	321	377	428	1,025
55	125	154	181	200	766	139	186	195	205	598	246	330	386	437	1,054
56	134	169	196	220	831	149	195	205	214	627	256	339	400	451	1,082
57	144	183	213	237	904	153	205	214	223	655	260	349	409	465	1,111
58	156	196	230	257	978	163	214	223	232	683	270	353	418	474	1,139
59	166	210	244	274	1,051	167	223	232	242	712	274	363	432	488	1,168
60	176	225	262	293	1,124	177	232	242	251	740	284	372	442	502	1,196
61	193	244	286	320	1,230	181	246	265	279	788	288	390	460	521	1,244
62	208	266	310	349	1,336	200	260	288	311	835	311	404	479	539	1,291
63	225	286	335	379	1,442	205	274	311	339	883	316	418	497	558	1,338
64	240	308	359	406	1,556	223	293	335	372	921	335	437	511	581	1,395
65	254	327	386	435	1,662	232	307	358	400	968	339	451	530	600	1,443
66	281	359	423	477	1,825	242	325	381	428	1,025	349	470	553	628	1,490
67	303	391	459	518	1,988	260	339	400	451	1,092	367	483	576	655	1,576
68	327	423	496	560	2,159	270	358	423	474	1,139	377	507	595	674	1,623
69	352	455	533	601	2,322	279	377	442	502	1,206	390	525	618	702	1,690
70	374	486	572	643	2,493	298	395	465	525	1,253	414	549	646	735	1,747
71	413	535	628	706	2,737	307	409	483	549	1,319	418	558	660	748	1,804
72	450	584	687	772	2,990	325	428	507	572	1,376	437	581	679	767	1,851
73	489	635	743	836	3,234	335	446	525	595	1,443	442	590	697	790	1,918
74	525	684	802	899	3,487	349	465	549	618	1,500	460	609	721	818	1,965
75	562	733	858	965	3,755	363	483	572	646	1,538	470	628	739	837	2,012
76	613	799	938	1,058	4,098	377	507	590	660	1,614	483	646	753	846	2,069
77	665	868	1,017	1,144	4,448	386	516	614	693	1,680	488	651	776	883	2,126
78	714	934	1,097	1,234	4,806	404	539	637	721	1,737	502	674	795	902	2,174
79	765	1,002	1,176	1,322	5,157	418	558	660	748	1,804	516	688	818	930	2,231
80	814	1,073	1,264	1,425	5,548	428	572	665	744	1,823	525	702	832	944	2,259
81	887	1,168	1,371	1,542	6,036	437	590	697	790	1,908	530	711	846	962	2,307
82	960	1,266	1,488	1,677	6,558	451	604	716	804	1,946	539	721	851	967	2,335
83	1,034	1,364	1,603	1,809	7,071	460	618	730	823	2,003	544	730	865	976	2,373
84	1,107	1,462	1,721	1,943	7,592	470	637	744	837	2,050	549	739	874	990	2,402
85	1,180	1,562	1,835	2,070	8,114	479	646	762	865	2,098	553	748	883	999	2,430

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					**Rider: LTC8-PA-SIP**					**Rider: LTC8-PA-CIP**				
	Base Rates with No Inflation Protection					**Simple Inflation Protection Rider**					**Compound Inflation Protection Rider**				
	Benefit Period					**Benefit Period**					**Benefit Period**				
Issue Age	*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	139	178	208	232	896	158	214	228	237	693	279	377	446	507	1,234
41	144	183	215	242	929	163	223	232	246	721	288	390	465	525	1,272
42	149	191	222	252	961	172	228	242	256	750	298	404	479	544	1,319
43	154	198	232	259	994	177	237	251	260	778	311	418	497	563	1,367
44	159	205	240	269	1,026	181	246	260	270	797	321	432	516	586	1,414
45	166	210	247	276	1,059	186	256	270	279	826	330	446	530	604	1,462
46	171	218	254	286	1,092	195	260	274	288	854	339	460	549	623	1,509
47	176	225	262	293	1,124	200	270	284	298	883	353	474	563	642	1,557
48	181	232	269	303	1,157	205	279	293	307	902	363	488	581	660	1,595
49	186	237	279	313	1,189	209	288	302	316	930	372	502	600	679	1,642
50	191	244	286	320	1,230	218	293	311	325	959	381	516	614	697	1,690
51	196	252	293	330	1,263	223	302	321	335	987	395	530	632	716	1,737
52	200	257	301	337	1,295	228	311	325	344	1,006	404	544	646	735	1,785
53	208	264	308	347	1,328	237	316	335	349	1,035	414	558	665	753	1,832
54	213	271	318	354	1,360	242	325	344	358	1,063	423	572	683	772	1,880
55	218	279	325	364	1,393	246	335	353	367	1,092	437	586	697	795	1,918
56	232	298	349	393	1,507	256	349	363	381	1,130	442	595	711	804	1,946
57	249	320	374	420	1,613	265	358	377	395	1,168	451	609	721	818	1,975
58	266	342	398	450	1,727	279	372	390	404	1,206	460	618	735	832	2,003
59	281	362	425	477	1,833	288	386	404	418	1,253	470	628	748	846	2,041
60	298	384	450	506	1,947	298	400	418	432	1,291	474	637	762	865	2,069
61	315	408	479	538	2,069	307	409	442	470	1,329	483	646	767	874	2,098
62	335	433	508	569	2,200	316	423	470	511	1,376	488	655	781	883	2,126
63	354	457	535	604	2,322	325	437	497	549	1,414	497	669	790	897	2,164
64	371	481	565	635	2,452	339	451	525	586	1,462	507	679	804	911	2,202
65	391	506	594	667	2,582	349	465	553	623	1,509	516	693	818	925	2,240
66	415	538	631	711	2,745	358	479	567	642	1,547	521	702	827	939	2,259
67	440	569	670	753	2,916	367	493	586	660	1,595	530	711	841	948	2,297
68	464	604	709	797	3,087	381	507	600	679	1,642	539	721	851	962	2,326
69	489	635	745	838	3,259	390	525	618	702	1,690	549	735	869	981	2,364
70	511	667	785	882	3,430	404	539	637	721	1,737	558	748	883	999	2,411
71	547	714	838	943	3,658	409	549	646	730	1,766	558	748	883	999	2,411
72	582	760	890	1,002	3,894	414	558	660	744	1,794	558	748	888	1,004	2,421
73	616	804	943	1,063	4,130	423	567	669	758	1,832	563	753	893	1,009	2,440
74	653	851	997	1,122	4,366	432	576	683	772	1,870	567	762	897	1,018	2,459
75	687	897	1,051	1,183	4,595	442	590	697	790	1,908	572	767	907	1,027	2,487
76	731	956	1,122	1,264	4,912	446	600	707	800	1,937	572	767	911	1,027	2,487
77	775	1,017	1,193	1,342	5,230	456	609	721	814	1,965	576	772	911	1,032	2,497
78	821	1,075	1,264	1,422	5,548	460	623	735	827	2,003	576	776	916	1,041	2,506
79	865	1,136	1,334	1,503	5,857	470	632	748	846	2,041	581	781	925	1,046	2,525
80	909	1,195	1,405	1,581	6,175	479	646	762	860	2,088	586	786	934	1,055	2,554
81	975	1,286	1,510	1,701	6,656	483	651	767	869	2,098	586	786	930	1,051	2,544
82	1,044	1,376	1,618	1,821	7,136	488	655	776	879	2,126	581	786	930	1,051	2,544
83	1,110	1,466	1,723	1,943	7,609	493	665	786	888	2,155	581	786	930	1,051	2,554
84	1,176	1,557	1,831	2,063	8,089	497	674	795	897	2,183	586	786	930	1,051	2,554
85	1,244	1,645	1,936	2,182	8,562	502	679	804	911	2,212	586	790	934	1,055	2,183

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				
	Benefit Period					Benefit Period					Benefit Period				
Issue Age	*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	46	54	61	66	269	51	65	79	84	228	93	116	135	144	427
40	49	59	66	73	301	56	70	84	84	228	107	130	153	158	456
41	51	61	71	78	318	60	74	88	88	247	112	139	158	167	475
42	54	66	73	81	334	65	79	93	98	256	121	144	172	177	494
43	59	68	78	86	350	65	84	98	102	275	121	153	177	186	513
44	61	73	83	90	375	70	84	102	107	275	126	153	181	195	522
45	64	76	86	95	391	74	93	112	112	294	130	163	191	200	541
46	66	81	90	98	407	79	93	112	121	304	139	167	200	214	560
47	68	83	95	103	424	84	98	116	126	323	144	177	205	223	579
48	73	88	98	108	440	79	102	126	126	332	144	181	214	228	608
49	76	90	103	112	456	84	107	130	130	351	149	191	218	237	627
50	78	95	108	115	472	88	107	130	139	361	158	195	228	251	646
51	81	98	110	120	489	93	116	139	144	380	163	205	237	256	664
52	83	103	115	125	513	98	116	144	149	380	167	205	242	265	674
53	88	105	120	130	530	98	121	149	153	399	167	214	246	274	693
54	90	110	122	132	546	102	126	153	163	408	177	218	260	284	712
55	93	112	127	137	562	107	130	158	167	427	181	228	265	293	731
56	100	122	137	149	603	112	139	167	177	456	191	237	279	311	759
57	108	130	147	159	652	116	149	177	186	465	195	251	293	335	788
58	112	139	159	171	692	126	158	181	195	494	209	256	298	349	816
59	120	147	169	181	741	130	167	191	205	503	214	270	311	372	845
60	127	156	178	193	782	135	177	200	214	532	223	279	325	390	873
61	137	169	193	208	839	139	181	209	228	560	228	288	335	395	902
62	147	181	205	222	904	149	191	223	237	589	237	293	349	400	930
63	154	191	220	240	961	158	200	228	246	617	246	307	353	400	959
64	164	203	232	254	1,026	167	209	242	256	646	256	311	367	404	987
65	174	215	247	269	1,083	172	214	251	270	674	260	321	377	409	1,016
66	196	242	279	303	1,222	186	228	270	288	721	274	339	395	432	1,073
67	218	269	308	335	1,352	195	246	288	311	778	288	358	418	460	1,139
68	237	293	340	369	1,491	214	265	307	335	835	302	381	442	479	1,196
69	259	320	369	401	1,621	223	284	325	358	892	316	400	465	507	1,263
70	281	347	401	435	1,760	237	298	344	377	940	330	418	483	530	1,319
71	315	389	447	486	1,980	246	311	363	395	987	339	432	502	549	1,367
72	347	430	494	538	2,191	260	325	381	414	1,044	353	446	521	567	1,424
73	381	469	543	589	2,411	270	344	400	437	1,101	363	460	535	581	1,471
74	413	511	589	640	2,623	284	358	418	456	1,158	377	474	553	600	1,528
75	447	552	635	692	2,843	293	372	437	474	1,206	386	488	572	618	1,576
76	503	623	719	782	3,210	316	400	470	507	1,272	409	516	604	651	1,633
77	562	692	804	875	3,576	335	432	497	535	1,348	428	549	628	679	1,690
78	618	763	887	965	3,935	353	460	525	572	1,424	446	576	660	716	1,766
79	677	831	973	1,058	4,301	372	493	553	600	1,500	465	609	683	744	1,823
80	733	902	1,056	1,149	4,668	395	521	586	632	1,566	488	637	716	776	1,880
81	799	985	1,151	1,254	5,149	404	535	604	651	1,623	497	646	725	786	1,927
82	868	1,070	1,249	1,359	5,629	414	544	623	669	1,680	502	651	735	800	1,965
83	934	1,154	1,344	1,462	6,110	423	563	642	693	1,737	507	665	744	814	2,012
84	1,002	1,239	1,442	1,567	6,590	432	572	660	711	1,794	511	669	753	827	2,050
85	1,068	1,322	1,537	1,672	7,071	442	586	679	730	1,851	521	679	762	837	2,098

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				
	Benefit Period					Benefit Period					Benefit Period				
Issue Age	*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	49	56	64	68	277	51	65	84	88	237	98	121	139	149	446
40	51	61	68	76	310	56	74	88	88	237	112	135	158	167	475
41	54	64	73	81	334	60	79	93	93	256	116	144	167	177	494
42	56	68	76	83	350	65	84	98	102	266	126	149	181	186	513
43	61	71	81	88	367	70	88	102	107	285	126	158	186	195	532
44	64	76	86	93	391	74	88	107	112	285	130	163	191	205	541
45	66	78	88	100	407	79	98	116	116	304	135	172	200	205	560
46	68	83	93	103	424	84	98	116	126	313	144	177	209	218	579
47	71	86	100	108	440	88	102	121	130	332	149	186	209	232	608
48	76	90	103	112	456	84	107	130	130	351	149	191	218	237	636
49	78	93	108	117	472	88	112	135	135	370	158	200	228	246	655
50	81	100	112	120	489	93	107	135	144	380	167	200	237	260	674
51	83	103	115	125	505	98	121	144	149	399	172	209	246	265	693
52	86	108	120	130	538	102	121	149	153	389	177	209	251	274	693
53	90	110	125	134	554	102	126	153	158	408	177	223	256	284	721
54	93	115	127	137	570	107	130	158	172	418	186	228	270	298	740
55	98	117	132	142	587	107	135	163	177	446	186	237	274	307	759
56	105	127	142	154	627	116	144	177	186	475	195	246	293	325	788
57	112	134	152	166	676	121	153	186	191	484	200	260	307	344	826
58	117	144	166	178	717	130	167	186	200	513	218	265	307	363	854
59	125	152	176	188	774	135	177	195	214	522	223	284	321	386	873
60	132	164	186	200	815	139	181	209	223	551	232	288	339	409	911
61	142	176	200	215	872	144	186	218	237	579	237	298	349	414	940
62	152	188	213	232	937	158	200	232	246	617	246	302	363	414	968
63	161	198	230	249	1,002	163	209	237	256	636	256	321	367	414	997
64	171	210	242	264	1,067	172	218	251	265	674	265	325	381	423	1,025
65	181	225	257	279	1,124	177	218	260	284	702	270	330	390	428	1,063
66	203	252	291	315	1,271	195	237	279	298	750	288	353	409	451	1,120
67	227	279	320	347	1,409	200	260	302	325	807	298	372	437	479	1,177
68	247	306	354	384	1,548	223	274	316	349	873	311	395	456	497	1,244
69	269	332	384	418	1,686	232	298	339	372	930	330	418	483	525	1,310
70	293	362	418	452	1,833	246	307	358	390	978	339	432	502	553	1,367
71	327	403	464	506	2,061	256	325	377	409	1,025	353	451	525	572	1,414
72	362	447	513	560	2,281	270	339	395	428	1,082	367	465	544	590	1,481
73	396	489	565	613	2,509	284	358	414	451	1,139	377	479	553	604	1,528
74	430	530	613	665	2,729	293	372	432	474	1,206	390	493	572	628	1,585
75	464	574	660	719	2,957	307	386	456	493	1,253	404	507	595	646	1,642
76	523	648	748	814	3,340	330	418	488	525	1,319	428	539	628	674	1,699
77	584	719	836	909	3,723	349	451	516	558	1,395	446	572	655	707	1,756
78	643	792	924	1,004	4,089	367	479	544	595	1,481	465	600	683	744	1,842
79	704	865	1,012	1,100	4,472	386	511	576	623	1,557	483	632	711	776	1,899
80	763	938	1,097	1,195	4,855	409	539	609	655	1,633	507	660	744	804	1,956
81	831	1,024	1,198	1,305	5,352	423	558	628	674	1,690	516	674	753	814	2,003
82	902	1,114	1,298	1,413	5,857	432	563	651	697	1,747	525	674	767	832	2,041
83	970	1,200	1,398	1,520	6,354	442	586	669	721	1,804	530	693	772	846	2,088
84	1,041	1,288	1,501	1,630	6,851	451	595	683	739	1,870	535	697	781	860	2,136
85	1,110	1,376	1,598	1,738	7,356	460	609	707	762	1,927	544	702	795	874	2,183

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

	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				
	Benefit Period					Benefit Period					Benefit Period				
Issue Age	*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	83	358	60	79	93	98	275	112	139	167	177	484
40	61	73	83	90	383	74	88	107	112	313	130	163	191	200	551
41	66	78	88	95	407	74	93	112	121	332	135	167	200	209	570
42	68	83	93	103	432	84	98	121	121	342	139	172	205	214	598
43	73	88	100	108	456	84	102	121	130	361	144	181	209	223	617
44	76	93	105	112	481	88	102	126	135	370	153	186	218	232	636
45	81	98	110	120	513	93	107	130	139	380	153	191	228	237	646
46	83	100	115	125	538	98	116	139	144	399	163	200	232	246	674
47	88	105	120	130	562	98	121	144	153	408	167	205	242	256	693
48	90	110	127	137	587	102	126	144	153	427	172	214	246	260	712
49	95	115	132	142	611	107	130	149	163	437	177	218	251	270	731
50	100	120	137	149	635	107	135	158	167	456	181	223	260	279	759
51	103	125	142	154	660	112	135	163	172	475	186	228	270	288	778
52	108	130	147	159	684	116	139	167	181	484	191	232	274	298	797
53	110	134	154	166	709	121	144	167	181	503	195	242	279	302	816
54	115	139	159	171	733	121	149	177	191	513	200	246	288	311	845
55	117	144	164	176	766	130	153	181	195	522	209	251	298	321	854
56	122	147	169	183	790	130	163	186	200	541	209	260	302	325	873
57	125	152	174	188	815	135	163	191	205	551	218	265	311	335	892
58	130	156	181	193	839	135	167	195	214	570	223	274	316	344	921
59	132	161	186	200	864	144	172	200	214	579	228	279	321	349	940
60	137	166	191	205	888	144	177	205	223	598	232	284	330	358	959
61	149	181	208	225	969	149	186	214	232	627	237	293	339	367	987
62	161	196	225	242	1,051	158	195	223	246	655	246	302	349	381	1,025
63	171	210	242	262	1,124	167	205	237	256	702	256	311	363	395	1,063
64	183	225	259	279	1,206	177	214	246	270	731	265	321	372	409	1,101
65	196	240	276	298	1,287	181	223	256	279	759	270	330	381	418	1,130
66	218	266	306	330	1,434	191	237	274	302	807	279	344	400	442	1,187
67	237	291	335	364	1,572	205	256	293	316	864	298	363	423	460	1,244
68	259	318	367	396	1,719	218	265	307	339	911	307	381	437	479	1,301
69	279	342	396	430	1,857	232	284	325	353	968	325	400	460	497	1,357
70	301	369	425	462	2,004	242	298	344	377	1,016	335	414	479	521	1,414
71	335	413	474	516	2,240	256	311	367	400	1,073	349	428	502	544	1,471
72	371	455	525	569	2,477	265	330	381	418	1,130	358	446	516	563	1,528
73	406	499	574	623	2,713	284	349	404	442	1,187	377	465	539	586	1,585
74	442	540	626	677	2,949	293	367	418	460	1,244	386	483	553	604	1,642
75	477	584	675	731	3,185	307	381	442	483	1,301	400	497	576	628	1,699
76	535	657	758	821	3,593	325	404	474	516	1,376	418	521	604	660	1,775
77	594	728	841	914	3,992	344	432	507	544	1,462	437	544	632	688	1,861
78	650	802	926	1,004	4,399	363	451	530	572	1,547	456	567	660	716	1,946
79	709	873	1,009	1,097	4,798	381	479	563	600	1,633	474	590	688	744	2,031
80	767	946	1,092	1,188	5,206	400	502	595	632	1,709	493	614	716	776	2,107
81	836	1,031	1,190	1,295	5,686	409	516	614	651	1,766	497	623	725	786	2,136
82	904	1,117	1,290	1,403	6,167	418	530	632	669	1,813	507	632	730	795	2,174
83	975	1,205	1,388	1,510	6,656	423	535	651	693	1,861	507	637	744	800	2,193
84	1,044	1,290	1,488	1,618	7,136	432	549	669	711	1,908	516	646	748	809	2,231
85	1,112	1,376	1,586	1,725	7,617	442	563	688	730	1,965	521	655	758	818	2,259

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				
	Benefit Period					Benefit Period					Benefit Period				
Issue Age	*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	71	81	86	375	60	84	98	102	285	116	144	177	186	503
40	64	76	86	93	399	79	93	112	116	323	135	172	200	209	570
41	68	81	90	100	424	79	98	116	126	342	139	177	209	214	589
42	71	86	98	108	448	88	102	126	126	361	144	181	209	223	627
43	76	90	105	112	472	88	107	126	135	380	149	191	214	232	646
44	78	98	110	117	497	93	102	130	139	389	163	191	228	242	664
45	83	103	115	125	538	98	112	135	144	389	163	195	237	246	664
46	86	105	120	130	562	102	121	144	149	408	172	205	242	256	693
47	90	110	125	134	587	102	126	149	158	418	177	209	251	265	721
48	93	115	132	142	611	107	130	149	163	446	181	223	256	270	740
49	100	120	137	147	635	107	135	153	172	456	181	228	260	284	759
50	105	125	142	154	660	112	139	167	177	475	186	232	270	293	788
51	108	130	147	161	684	116	139	172	177	494	191	237	284	298	816
52	112	134	152	166	709	121	144	177	186	503	195	242	288	307	835
53	115	139	161	174	733	126	149	172	186	532	200	251	288	311	854
54	120	144	166	178	766	126	158	181	195	532	209	256	298	321	873
55	122	149	171	183	798	135	163	186	205	541	218	265	307	335	883
56	127	152	176	191	823	135	172	191	209	560	218	274	311	339	911
57	130	156	181	196	847	139	172	195	214	570	228	279	325	349	930
58	134	164	188	200	872	139	172	205	223	598	232	284	330	358	959
59	137	169	193	208	896	149	177	209	223	608	237	288	335	363	978
60	142	174	198	213	921	149	181	214	232	627	242	293	344	372	997
61	154	188	215	235	1,010	158	195	223	242	646	246	302	353	381	1,025
62	169	203	235	252	1,092	163	205	232	256	683	256	316	363	395	1,063
63	178	218	252	271	1,173	172	214	246	265	721	265	325	377	414	1,101
64	191	235	269	291	1,255	186	223	256	279	759	274	330	386	423	1,149
65	203	249	288	310	1,336	191	232	265	288	797	284	344	395	432	1,177
66	227	276	318	342	1,491	195	246	284	316	835	288	358	414	460	1,234
67	247	303	347	379	1,637	214	265	307	330	892	307	377	442	479	1,291
68	269	330	381	411	1,784	228	274	321	353	949	321	395	456	502	1,357
69	291	357	411	447	1,931	242	293	339	367	1,006	335	414	479	516	1,414
70	313	384	442	481	2,085	251	311	358	390	1,054	349	432	497	539	1,471
71	347	430	494	535	2,330	270	321	381	418	1,120	363	442	521	567	1,528
72	386	472	547	591	2,574	274	344	395	437	1,177	372	465	535	586	1,595
73	423	518	596	648	2,819	293	363	423	460	1,234	390	483	563	609	1,652
74	459	562	650	704	3,063	307	381	437	479	1,301	404	502	576	628	1,709
75	496	609	701	760	3,316	316	395	460	502	1,348	414	516	600	651	1,766
76	557	684	787	853	3,739	339	418	493	539	1,424	432	539	632	688	1,842
77	618	758	875	951	4,155	358	451	525	567	1,519	451	567	655	716	1,927
78	677	833	963	1,044	4,578	377	470	553	595	1,604	474	590	688	748	2,022
79	738	907	1,051	1,141	4,994	395	497	581	623	1,690	493	614	711	772	2,107
80	799	982	1,136	1,234	5,417	414	525	618	660	1,775	511	642	744	809	2,183
81	870	1,073	1,237	1,347	5,914	423	535	642	679	1,832	516	646	758	818	2,221
82	941	1,161	1,342	1,459	6,411	432	553	660	697	1,889	525	660	758	827	2,259
83	1,014	1,254	1,444	1,571	6,924	442	553	674	721	1,937	525	660	772	832	2,278
84	1,085	1,342	1,547	1,681	7,421	451	572	697	744	1,984	539	674	781	841	2,316
85	1,156	1,432	1,650	1,794	7,918	460	581	716	762	2,050	544	679	786	851	2,354

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				
	Benefit Period					Benefit Period					Benefit Period				
Issue Age	*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	83	100	115	122	530	121	149	172	191	513	232	293	339	372	997
41	88	108	122	130	562	130	158	181	205	541	246	307	358	395	1,044
42	93	112	130	139	595	135	167	195	214	560	260	330	381	414	1,092
43	98	120	137	147	619	144	177	205	228	598	279	344	400	442	1,149
44	105	125	144	154	652	149	191	218	242	627	288	367	423	465	1,206
45	110	132	152	161	684	158	200	228	256	655	302	381	442	488	1,253
46	115	139	159	171	717	163	205	242	265	674	316	395	465	507	1,301
47	120	144	166	178	749	172	218	251	279	702	330	418	483	530	1,348
48	125	152	174	186	774	181	228	265	288	740	349	432	507	558	1,405
49	130	156	181	193	806	191	242	274	302	769	363	456	525	581	1,452
50	134	164	188	203	839	195	246	288	311	788	377	470	549	600	1,500
51	139	171	196	210	872	205	256	298	325	816	390	483	567	623	1,547
52	147	176	203	218	904	209	270	311	339	845	400	507	590	646	1,604
53	152	183	210	225	929	218	279	321	353	883	418	521	609	674	1,661
54	156	188	218	235	961	223	288	335	363	902	432	544	632	693	1,709
55	161	196	225	242	994	232	298	344	377	930	446	558	651	716	1,756
56	171	208	240	257	1,051	242	307	353	390	968	456	572	665	735	1,813
57	181	220	254	271	1,108	251	321	367	404	1,006	465	586	679	753	1,861
58	188	232	266	288	1,173	265	330	381	418	1,025	483	600	697	762	1,908
59	198	244	281	303	1,230	274	344	395	432	1,063	493	614	711	781	1,956
60	208	257	296	318	1,287	284	353	404	446	1,101	502	628	725	800	2,012
61	218	269	310	335	1,352	288	363	414	456	1,130	502	632	730	804	2,022
62	230	284	325	352	1,426	288	367	423	465	1,139	497	632	735	809	2,022
63	240	296	342	369	1,491	298	377	432	474	1,168	497	642	739	809	2,031
64	252	310	357	386	1,564	298	381	442	483	1,177	493	642	744	814	2,031
65	262	323	371	403	1,629	302	390	451	493	1,206	493	646	748	818	2,041
66	288	349	403	440	1,776	302	404	465	507	1,244	488	651	753	818	2,041
67	315	379	435	474	1,914	307	414	479	521	1,291	488	651	758	823	2,050
68	342	406	469	511	2,061	307	423	493	535	1,329	483	655	758	823	2,060
69	369	435	501	545	2,200	311	432	507	549	1,376	483	655	762	827	2,069
70	396	462	533	582	2,346	311	446	521	563	1,414	479	660	767	827	2,069
71	423	501	577	628	2,566	325	451	530	572	1,424	483	655	762	827	2,050
72	450	538	621	677	2,786	339	460	539	581	1,433	493	655	762	823	2,041
73	474	577	665	723	2,998	353	470	544	590	1,443	502	655	758	823	2,031
74	501	613	709	772	3,218	367	479	553	600	1,452	511	655	758	818	2,022
75	528	653	753	819	3,438	381	483	563	609	1,462	516	651	753	818	2,003
76	582	721	833	907	3,772	395	502	581	628	1,519	525	665	767	832	2,041
77	635	792	914	992	4,098	409	516	600	655	1,595	535	669	776	851	2,088
78	692	860	992	1,080	4,432	423	530	623	674	1,652	544	683	795	860	2,136
79	745	931	1,073	1,166	4,757	437	544	642	702	1,728	553	688	804	879	2,183
80	799	1,000	1,154	1,254	5,092	451	563	660	721	1,785	563	702	818	893	2,221
81	860	1,075	1,242	1,352	5,540	456	572	669	730	1,813	563	707	823	897	2,183
82	921	1,151	1,330	1,447	5,979	460	576	679	744	1,851	563	707	827	911	2,145
83	982	1,229	1,418	1,545	6,428	470	581	693	748	1,889	558	707	837	916	2,107
84	1,044	1,305	1,506	1,640	6,867	474	586	702	762	1,927	558	707	841	930	2,069
85	1,105	1,381	1,593	1,738	7,315	479	595	711	772	1,956	558	711	846	934	2,031

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				
	Benefit Period					Benefit Period					Benefit Period				
Issue Age	*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	86	105	120	127	554	126	153	177	200	532	242	302	353	386	1,035
41	90	112	127	134	587	139	163	191	214	560	260	316	372	414	1,082
42	98	117	134	144	619	139	172	205	223	579	270	344	395	432	1,139
43	103	125	142	152	644	149	181	214	237	627	288	358	418	460	1,196
44	110	130	149	161	676	153	200	228	251	655	298	381	442	483	1,253
45	115	137	156	169	709	163	209	237	265	683	311	395	460	507	1,310
46	120	144	166	178	749	167	214	251	274	693	330	414	483	525	1,348
47	125	149	174	186	782	177	228	260	288	731	344	437	502	549	1,395
48	130	156	181	193	806	191	237	274	302	769	363	451	525	581	1,462
49	134	164	188	200	839	200	251	284	316	797	377	470	544	604	1,509
50	139	171	196	210	872	205	256	302	325	816	390	488	572	623	1,557
51	144	178	203	218	904	214	265	311	339	854	409	502	590	651	1,614
52	152	183	210	227	937	218	279	325	349	883	418	525	614	669	1,671
53	156	191	218	235	969	228	288	335	367	911	437	539	637	697	1,728
54	164	196	227	244	1,002	228	302	344	377	940	446	567	655	721	1,775
55	169	203	235	252	1,035	242	311	358	390	968	460	581	674	744	1,823
56	178	215	249	266	1,092	251	321	367	409	1,006	474	595	693	767	1,889
57	188	230	264	281	1,149	260	330	381	423	1,054	483	609	707	786	1,937
58	196	242	276	301	1,222	274	344	400	432	1,063	502	623	725	790	1,984
59	205	254	293	315	1,279	288	358	409	451	1,111	511	637	739	814	2,031
60	215	266	308	330	1,336	298	367	418	465	1,149	525	655	753	832	2,098
61	227	279	323	347	1,409	298	381	432	474	1,168	521	660	758	837	2,098
62	240	296	337	367	1,483	298	381	442	483	1,187	516	655	767	841	2,107
63	249	308	357	384	1,548	307	390	446	493	1,215	516	665	767	841	2,117
64	262	323	371	401	1,629	311	395	460	502	1,225	511	669	772	846	2,107
65	271	335	386	420	1,694	316	409	470	511	1,253	516	674	781	851	2,126
66	301	364	420	457	1,849	311	418	483	530	1,291	507	674	781	851	2,117
67	327	393	452	494	1,988	321	432	497	539	1,348	507	679	790	855	2,136
68	357	423	489	530	2,143	316	437	511	558	1,386	502	679	786	855	2,145
69	384	452	521	567	2,289	325	451	530	572	1,433	502	683	795	860	2,155
70	411	481	555	606	2,444	325	460	539	581	1,462	502	683	795	860	2,145
71	440	521	599	653	2,672	339	470	553	595	1,481	502	683	795	860	2,126
72	467	560	645	704	2,900	353	479	563	604	1,490	516	679	795	855	2,117
73	494	599	692	753	3,120	367	488	567	614	1,500	521	683	786	855	2,107
74	521	638	738	804	3,348	381	497	572	623	1,509	535	683	786	851	2,098
75	550	679	782	851	3,576	395	502	586	637	1,519	535	674	786	851	2,079
76	606	750	868	943	3,927	409	521	604	651	1,576	544	693	795	865	2,117
77	660	824	951	1,031	4,261	428	535	623	683	1,661	558	697	809	888	2,174
78	719	895	1,031	1,124	4,611	442	553	651	697	1,718	567	711	827	893	2,221
79	775	968	1,117	1,212	4,945	456	567	665	730	1,804	576	716	832	916	2,278
80	831	1,039	1,200	1,305	5,295	470	586	688	748	1,861	586	730	851	925	2,307
81	895	1,119	1,290	1,405	5,760	474	595	697	758	1,889	586	735	855	934	2,269
82	958	1,198	1,383	1,506	6,216	479	600	707	772	1,927	586	735	860	948	2,231
83	1,022	1,278	1,474	1,606	6,688	488	604	721	781	1,965	581	735	869	953	2,183
84	1,085	1,356	1,567	1,706	7,144	493	609	730	790	2,003	581	735	874	967	2,145
85	1,149	1,437	1,657	1,806	7,609	497	618	739	804	2,031	581	739	879	972	2,107

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					**Rider: LTC9-PA-SIP**					**Rider: LTC9-PA-CIP**				
	Base Rates with No Inflation Protection					**Simple Inflation Protection Rider**					**Compound Inflation Protection Rider**				
Issue	**Benefit Period**					**Benefit Period**					**Benefit Period**				
Age	*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	105	127	144	154	668	149	186	214	242	646	293	358	414	460	1,225
41	110	134	152	164	709	158	195	228	251	674	307	372	432	474	1,272
42	117	142	161	174	749	163	205	232	260	702	316	386	446	493	1,310
43	122	149	169	181	790	172	209	246	274	731	325	400	465	511	1,357
44	130	156	178	191	823	177	218	251	284	759	335	414	474	530	1,414
45	134	164	186	200	864	186	228	265	293	788	349	428	493	544	1,452
46	142	171	196	210	904	191	237	274	302	816	358	437	507	558	1,500
47	147	178	203	218	945	200	246	284	316	845	372	451	525	581	1,547
48	154	186	213	227	986	205	251	293	325	873	377	465	539	595	1,585
49	159	193	220	237	1,026	214	260	302	335	902	390	479	558	614	1,633
50	166	200	230	247	1,067	218	270	311	349	930	400	493	572	628	1,680
51	171	205	237	254	1,100	223	284	325	363	959	414	511	586	646	1,728
52	176	213	244	264	1,140	232	293	335	372	987	428	525	604	665	1,775
53	183	220	254	274	1,181	237	298	344	381	1,016	432	539	618	679	1,813
54	188	227	262	284	1,222	246	307	353	390	1,044	446	553	637	697	1,861
55	196	235	271	291	1,263	251	316	363	404	1,073	456	567	651	716	1,908
56	200	242	279	301	1,303	260	325	377	414	1,101	470	576	669	730	1,946
57	208	249	288	310	1,336	265	335	381	423	1,130	479	590	679	748	2,003
58	213	257	296	320	1,377	274	339	395	432	1,158	488	604	697	762	2,050
59	220	264	306	327	1,417	279	349	400	446	1,187	497	618	711	786	2,088
60	225	271	313	337	1,458	288	358	414	456	1,215	511	632	730	800	2,136
61	237	288	332	357	1,548	293	363	418	465	1,234	511	628	725	800	2,126
62	249	303	349	376	1,637	298	367	428	470	1,253	511	628	725	795	2,117
63	264	320	369	398	1,719	302	372	432	474	1,272	502	623	721	790	2,126
64	276	335	386	418	1,809	307	377	442	479	1,291	502	623	721	786	2,117
65	288	352	406	437	1,898	311	381	446	488	1,310	502	618	716	786	2,107
66	320	379	437	472	2,045	302	390	456	502	1,348	483	623	721	790	2,126
67	352	406	467	506	2,200	288	404	474	516	1,386	470	628	725	790	2,126
68	381	433	499	540	2,346	284	414	483	525	1,424	456	628	730	795	2,145
69	413	459	528	574	2,501	270	428	502	539	1,462	442	632	735	795	2,145
70	445	486	560	609	2,648	260	437	511	553	1,500	423	637	739	800	2,164
71	469	528	606	660	2,868	284	446	521	563	1,538	442	642	744	804	2,183
72	491	567	653	711	3,096	311	460	535	576	1,557	465	646	753	809	2,193
73	516	609	701	760	3,316	339	465	539	590	1,595	488	651	753	823	2,212
74	538	648	748	811	3,544	367	479	553	604	1,614	511	655	762	827	2,221
75	562	689	794	863	3,764	390	488	563	614	1,652	530	660	767	832	2,240
76	616	758	875	948	4,147	404	507	581	637	1,709	539	669	772	841	2,269
77	672	826	953	1,036	4,529	418	521	609	655	1,775	539	674	786	851	2,297
78	726	897	1,034	1,122	4,912	432	535	628	679	1,832	549	679	790	860	2,326
79	782	965	1,112	1,210	5,295	446	549	655	697	1,899	549	683	804	869	2,354
80	836	1,034	1,193	1,295	5,678	460	567	674	721	1,956	558	693	809	879	2,383
81	897	1,112	1,283	1,393	6,118	465	572	683	730	1,984	558	693	809	879	2,316
82	958	1,190	1,374	1,493	6,558	474	581	693	739	2,003	563	693	809	874	2,240
83	1,022	1,266	1,462	1,591	6,990	474	590	702	748	2,041	558	697	818	879	2,183
84	1,083	1,344	1,552	1,691	7,430	483	600	711	758	2,060	563	697	818	874	2,107
85	1,144	1,422	1,642	1,789	7,869	488	604	721	767	2,088	563	697	818	874	2,041

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				
	Benefit Period					Benefit Period					Benefit Period				
Issue Age	*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	110	132	149	161	692	153	195	223	251	674	302	372	432	474	1,272
41	115	139	156	171	733	163	205	237	260	702	316	386	451	493	1,329
42	122	147	169	181	782	167	214	242	270	731	330	404	460	511	1,357
43	127	154	176	188	823	177	218	256	284	759	339	418	483	530	1,414
44	134	164	186	198	855	186	223	260	298	788	349	428	493	553	1,471
45	139	171	193	208	896	195	237	274	307	826	363	442	511	567	1,509
46	147	178	203	218	937	200	246	288	316	854	372	456	530	581	1,566
47	152	186	210	227	986	209	256	298	325	873	390	470	549	604	1,604
48	161	193	220	237	1,026	209	260	307	339	911	390	483	563	618	1,652
49	166	200	230	247	1,067	218	270	311	349	940	404	497	576	637	1,699
50	174	208	240	257	1,108	228	284	321	363	968	414	516	595	651	1,747
51	178	213	247	264	1,140	232	298	339	377	997	428	535	609	674	1,804
52	183	220	254	274	1,189	242	307	349	390	1,025	446	549	628	693	1,842
53	191	230	264	284	1,230	246	307	358	400	1,054	451	558	642	707	1,880
54	196	237	271	296	1,271	256	316	367	404	1,082	465	572	665	725	1,937
55	203	244	281	303	1,312	260	330	381	418	1,120	474	590	679	744	1,984
56	208	252	291	313	1,352	274	339	390	428	1,149	488	600	693	758	2,031
57	215	259	301	323	1,393	279	349	395	442	1,168	502	614	707	781	2,079
58	220	266	308	332	1,434	288	353	409	451	1,206	511	628	725	795	2,126
59	230	274	318	340	1,474	288	363	414	465	1,234	516	646	739	818	2,174
60	235	281	325	352	1,515	298	377	432	470	1,263	530	660	758	827	2,221
61	247	301	345	371	1,613	302	377	437	483	1,282	530	651	758	832	2,212
62	259	315	364	391	1,703	311	381	442	488	1,301	530	651	753	827	2,202
63	274	332	384	415	1,784	316	386	451	493	1,329	525	651	748	818	2,212
64	288	347	401	435	1,882	316	395	460	497	1,338	521	651	753	818	2,202
65	301	367	423	455	1,971	321	395	460	507	1,367	521	642	744	818	2,193
66	332	393	455	491	2,126	316	409	474	521	1,405	502	651	748	823	2,212
67	367	423	486	525	2,289	298	418	493	539	1,443	488	651	753	823	2,212
68	396	450	518	562	2,444	298	432	502	544	1,481	474	651	758	827	2,231
69	430	479	550	596	2,599	279	442	521	563	1,519	460	655	762	827	2,231
70	462	506	582	633	2,753	274	456	535	576	1,557	442	660	772	832	2,250
71	489	550	631	687	2,982	293	460	539	586	1,604	456	665	772	837	2,269
72	511	589	679	741	3,218	325	479	553	600	1,623	483	674	781	841	2,278
73	535	633	728	789	3,446	353	483	563	618	1,661	511	679	786	860	2,307
74	560	675	777	843	3,682	381	497	576	628	1,680	530	679	795	860	2,316
75	584	716	826	897	3,910	409	507	586	637	1,718	553	688	800	865	2,335
76	640	787	909	987	4,309	423	530	604	660	1,785	563	697	804	874	2,364
77	699	860	992	1,078	4,709	437	539	632	683	1,851	563	697	814	883	2,392
78	755	934	1,075	1,166	5,108	451	553	651	707	1,908	572	707	823	897	2,421
79	814	1,004	1,156	1,259	5,507	465	572	683	725	1,975	572	711	837	902	2,449
80	870	1,075	1,242	1,347	5,906	479	590	697	748	2,031	576	721	837	916	2,478
81	934	1,156	1,334	1,449	6,362	483	595	711	758	2,060	576	721	841	911	2,411
82	997	1,237	1,427	1,552	6,819	493	604	721	772	2,088	586	721	841	911	2,335
83	1,063	1,317	1,520	1,655	7,267	493	614	730	776	2,126	581	725	851	916	2,278
84	1,127	1,398	1,613	1,760	7,723	502	623	744	786	2,145	586	725	851	907	2,193
85	1,190	1,479	1,708	1,860	8,187	507	628	748	800	2,164	586	725	851	911	2,117

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
Current Annual Premium Rates for Policies Issued Prior to 9/16/2002
Rates per $10 Daily Benefit

	Policy Form: NTQ11-337-MA-PA-601					**Rider: 11-SIP-PA-998**					**Rider: 11-CIP-PA-998**				
	Base Rates with No Inflation Protection					**Simple Inflation Protection Rider**					**Compound Inflation Protection Rider**				
Issue	**Benefit Period**					**Benefit Period**					**Benefit Period**				
Age	*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	29	32	37	48	12	15	20	22	32	61	78	98	110	145
40	24	29	34	39	50	15	20	22	24	34	66	83	100	115	151
41	27	32	37	42	53	15	20	24	27	37	66	86	105	120	156
42	29	34	39	44	58	15	20	24	29	40	68	88	108	125	161
43	29	37	42	46	61	17	22	27	32	45	73	93	112	130	169
44	32	39	44	49	66	20	24	29	34	48	76	95	117	134	174
45	34	42	46	54	71	20	24	34	37	50	78	100	122	139	180
46	37	44	51	56	77	22	29	34	42	53	81	103	125	147	185
47	39	46	54	61	82	24	32	39	44	58	83	108	132	152	193
48	42	49	59	66	87	24	34	42	46	63	86	112	134	156	201
49	44	54	64	71	95	29	37	44	51	69	90	117	139	161	206
50	46	56	68	76	100	32	42	49	56	77	93	120	142	166	211
51	46	59	68	78	103	32	39	49	56	74	95	120	147	166	214
52	51	64	73	83	111	34	44	54	64	82	95	122	149	171	217
53	54	68	81	90	122	39	46	59	68	87	100	127	154	178	225
54	59	73	88	100	129	42	51	61	71	95	103	132	159	183	235
55	64	81	95	108	143	44	56	68	78	103	108	137	166	191	243
56	68	86	103	117	153	49	61	76	86	111	112	144	174	198	254
57	76	95	112	130	169	51	66	81	90	119	115	147	178	205	259
58	83	103	122	139	182	54	71	88	100	129	117	154	186	215	272
59	90	112	134	154	201	59	78	93	108	137	122	159	193	222	280
60	95	120	144	164	211	64	81	98	112	148	125	161	196	225	285
61	103	132	156	178	232	68	86	108	122	156	130	166	203	235	293
62	112	144	171	196	254	73	93	115	132	169	134	174	210	242	304
63	125	156	188	215	277	78	103	122	142	180	139	181	218	252	314
64	134	171	205	237	304	86	110	132	152	190	147	188	227	259	325
65	149	191	227	261	333	90	115	142	161	206	152	193	237	269	341
66	171	218	264	301	386	103	132	159	183	230	164	213	257	296	367
67	188	239	288	330	420	108	139	169	196	246	169	220	266	305	383
68	205	264	318	364	462	115	147	178	205	259	176	227	274	315	394
69	225	288	347	398	505	122	156	191	220	275	183	235	286	327	407
70	247	318	384	440	555	130	166	200	230	288	188	242	293	337	420
71	286	369	445	511	642	144	183	225	257	322	205	264	320	367	457
72	313	403	489	560	705	149	193	235	271	336	210	271	327	379	468
73	342	442	533	613	771	156	200	247	283	351	215	276	337	389	481
74	374	481	584	670	840	161	210	257	296	367	220	283	345	398	491
75	403	516	623	716	893	161	213	259	296	367	215	281	342	391	486
76	467	601	728	836	1,044	181	235	283	327	404	235	305	369	425	526
77	511	660	799	919	1,144	186	239	293	337	420	239	308	376	433	536
78	560	723	877	1,009	1,255	191	247	301	347	431	239	313	381	440	542
79	611	792	960	1,107	1,374	164	213	259	298	370	244	315	386	445	550
80	670	868	1,056	1,217	1,511	169	218	264	308	378	249	325	393	455	560
81	731	951	1,156	1,334	1,654	169	218	269	308	380	252	325	396	459	565
82	797	1,036	1,263	1,459	1,807	171	222	269	313	380	252	327	398	462	568
83	868	1,129	1,378	1,593	1,971	169	222	269	313	383	252	330	401	464	571
84	946	1,232	1,503	1,740	2,151	169	220	271	313	383	252	330	403	467	573
85	1,029	1,342	1,640	1,901	2,346	169	218	266	308	380	252	330	403	467	576

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
Current Annual Premium Rates for Policies Issued Prior to 9/16/2002
Rates per $10 Daily Benefit

	Policy Form: NTQ11-337-MA-PA-601					**Rider: 11-SIP-PA-998**					**Rider: 11-CIP-PA-998**				
	Base Rates with No Inflation Protection					**Simple Inflation Protection Rider**					**Compound Inflation Protection Rider**				
Issue	**Benefit Period**					**Benefit Period**					**Benefit Period**				
Age	*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	73	86	95	127	42	51	64	73	98	230	293	354	408	523
40	61	76	88	100	132	44	56	68	78	106	232	298	362	415	534
41	66	81	95	108	140	46	59	71	83	114	235	303	367	420	542
42	68	86	100	112	148	49	64	76	90	119	239	308	371	430	550
43	73	90	105	120	159	51	66	83	95	127	242	313	379	435	555
44	76	95	112	127	166	56	71	86	100	135	247	318	384	440	565
45	81	100	117	134	177	59	76	93	108	143	249	323	391	447	571
46	86	105	125	142	188	61	81	98	115	151	252	327	396	455	579
47	90	110	132	152	198	66	88	105	120	161	257	332	401	459	587
48	95	117	139	159	211	71	93	112	130	169	259	337	408	467	594
49	100	125	149	169	222	76	98	117	139	182	254	330	398	459	584
50	103	130	156	178	232	81	103	125	144	190	261	335	403	464	592
51	105	132	156	181	238	81	105	127	144	190	259	335	406	464	589
52	110	139	166	188	248	86	108	132	154	198	261	337	408	472	597
53	117	147	176	200	264	88	117	139	164	211	257	332	401	462	584
54	125	156	188	215	280	93	122	149	171	225	259	335	406	467	592
55	132	166	200	230	299	100	130	156	181	235	261	340	408	469	597
56	139	178	213	244	317	108	137	166	191	248	264	340	413	474	602
57	149	188	227	259	338	112	147	176	203	262	266	345	418	481	608
58	159	200	242	276	362	117	154	186	215	272	269	347	420	484	610
59	169	215	257	296	383	125	159	196	225	288	266	345	420	481	605
60	174	220	264	303	394	125	164	198	227	291	266	345	418	479	605
61	183	235	283	325	420	132	171	205	237	304	264	342	413	474	597
62	196	249	301	347	446	137	178	218	247	317	266	345	415	477	600
63	208	266	323	369	476	144	186	225	259	328	266	345	415	479	602
64	222	283	342	393	505	149	193	235	269	343	266	345	418	481	602
65	237	303	367	420	539	154	200	244	281	354	269	347	420	484	605
66	266	342	413	474	605	169	218	266	308	388	283	367	445	511	639
67	283	364	440	506	645	174	225	274	315	396	281	367	445	511	637
68	301	386	469	538	684	178	232	281	325	407	283	367	442	511	637
69	320	413	499	574	727	183	237	291	332	417	281	364	442	508	637
70	340	440	533	611	774	188	242	296	342	425	281	364	440	508	631
71	384	496	601	692	872	203	264	320	369	462	296	384	467	538	671
72	408	528	640	738	927	205	269	325	376	470	293	381	464	533	666
73	435	562	682	784	988	208	271	330	381	476	291	379	462	533	660
74	459	596	723	836	1,049	213	276	335	386	481	291	376	459	525	653
75	481	621	753	865	1,081	205	269	325	376	468	276	359	437	506	626
76	547	706	858	987	1,236	220	288	352	406	502	291	381	464	535	660
77	584	758	921	1,061	1,324	222	291	352	408	507	291	376	457	530	655
78	626	811	987	1,139	1,419	225	293	357	413	510	288	374	455	525	650
79	672	872	1,061	1,224	1,524	188	247	303	349	431	283	369	452	523	645
80	723	941	1,146	1,325	1,643	188	247	301	347	431	283	367	450	518	642
81	780	1,012	1,234	1,427	1,770	188	247	301	347	428	279	364	445	516	634
82	838	1,092	1,332	1,542	1,910	186	242	298	345	423	276	359	442	508	629
83	902	1,175	1,437	1,664	2,058	183	242	293	340	420	276	359	437	506	624
84	973	1,268	1,552	1,799	2,222	181	237	291	337	415	274	357	435	501	621
85	1,051	1,371	1,679	1,945	2,404	178	235	286	332	410	269	352	430	499	613

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
Current Annual Premium Rates for Policies Issued Prior to 9/16/2002
Rates per $10 Daily Benefit

	Policy Form: NTQ11-337-MA-PA-601					**Rider: 11-SIP-PA-998**					**Rider: 11-CIP-PA-998**				
	Base Rates with No Inflation Protection					**Simple Inflation Protection Rider**					**Compound Inflation Protection Rider**				
Issue	**Benefit Period**					**Benefit Period**					**Benefit Period**				
Age	*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	37	44	51	56	77	24	32	37	44	58	134	174	210	242	309
40	37	46	54	61	79	27	32	42	46	63	139	176	215	247	314
41	39	49	56	64	85	29	34	44	51	66	142	181	220	252	320
42	42	51	61	68	90	29	37	44	54	71	142	183	220	254	325
43	44	54	64	73	95	32	42	49	56	77	144	188	225	259	330
44	46	56	68	76	100	34	44	51	61	82	147	191	230	264	338
45	49	61	71	81	108	37	46	56	66	85	149	193	235	269	341
46	51	64	76	86	114	39	49	59	68	90	154	198	237	274	346
47	54	68	81	90	122	42	51	64	73	95	156	200	242	279	351
48	59	73	86	98	129	42	54	68	78	100	156	203	247	281	357
49	61	76	90	103	137	46	61	73	86	108	159	205	247	286	359
50	66	81	98	110	145	49	64	76	90	116	156	203	242	281	357
51	66	81	98	110	145	49	64	76	90	116	161	210	252	291	367
52	68	88	103	117	156	54	66	83	95	122	159	203	249	286	359
53	73	93	110	127	166	56	71	88	100	129	161	205	249	286	362
54	78	100	117	134	177	61	76	95	108	140	164	208	254	293	367
55	83	105	127	144	190	64	83	100	115	148	166	215	257	296	373
56	90	115	137	156	203	66	86	105	122	156	169	215	261	301	380
57	98	122	147	169	219	71	93	112	130	166	169	220	266	305	386
58	103	132	156	181	235	78	98	120	137	174	174	222	271	310	391
59	112	142	169	193	251	81	105	127	147	188	176	227	276	318	399
60	117	149	178	203	264	83	108	130	152	193	174	225	271	313	394
61	125	159	193	220	285	90	115	137	159	201	178	230	276	318	399
62	134	174	208	237	306	95	120	147	169	214	181	232	281	323	404
63	147	186	225	257	330	98	127	154	178	225	183	237	286	327	412
64	156	200	242	279	357	105	137	164	188	238	188	242	291	332	417
65	171	218	261	301	386	110	144	174	198	248	191	247	298	342	425
66	193	249	301	345	439	122	156	191	218	275	203	261	315	364	454
67	210	269	325	374	473	127	166	200	230	291	208	266	323	369	465
68	227	293	352	406	513	134	171	210	239	304	210	271	330	376	470
69	247	318	384	440	557	139	181	220	252	314	215	276	335	384	478
70	269	345	418	479	605	147	191	230	264	328	218	281	340	391	486
71	308	396	479	552	695	161	208	254	288	362	232	303	367	420	523
72	335	430	523	599	756	166	218	261	303	375	237	308	371	430	531
73	364	469	567	653	819	171	222	274	313	388	239	310	379	435	539
74	393	508	616	709	888	178	232	281	323	402	242	315	384	440	547
75	420	543	655	753	941	178	230	281	323	399	239	308	376	433	534
76	486	628	760	875	1,091	193	252	308	354	439	257	332	403	464	576
77	530	684	831	956	1,192	198	259	315	364	449	257	335	408	469	579
78	577	745	907	1,044	1,297	203	266	323	374	462	259	340	411	474	587
79	628	814	990	1,139	1,416	174	227	276	320	394	261	340	413	479	589
80	684	887	1,080	1,246	1,548	176	232	283	325	399	264	345	418	484	594
81	745	968	1,178	1,361	1,688	176	232	283	327	402	264	342	420	484	597
82	809	1,053	1,283	1,483	1,836	178	230	283	327	407	264	345	420	486	600
83	877	1,144	1,395	1,615	1,997	178	232	283	327	404	264	345	420	486	600
84	953	1,241	1,518	1,760	2,172	176	232	281	325	402	264	345	420	486	600
85	1,034	1,349	1,650	1,914	2,362	174	230	281	325	399	264	345	420	486	600

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
Current Annual Premium Rates for Policies Issued Prior to 9/16/2002
Rates per $10 Daily Benefit

	Policy Form: LTQ11-336-MA-PA-601					**Rider: 11-SIP-PA-998**					**Rider: 11-CIP-PA-998**				
	Base Rates with No Inflation Protection					**Simple Inflation Protection Rider**					**Compound Inflation Protection Rider**				
Issue	**Benefit Period**					**Benefit Period**					**Benefit Period**				
Age	*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	39	46	51	74	20	24	29	37	50	78	100	122	144	193
40	34	42	49	56	79	20	27	32	37	53	81	105	127	147	198
41	37	44	51	59	82	22	29	37	42	58	83	108	134	154	206
42	39	46	56	64	87	22	27	37	44	63	86	112	137	159	214
43	42	49	59	68	95	24	34	42	46	66	88	117	142	164	219
44	44	54	64	71	100	27	34	44	51	71	90	120	147	171	227
45	46	56	66	76	108	29	39	49	56	77	95	125	154	178	235
46	49	61	71	83	114	32	39	51	59	82	98	127	159	181	243
47	51	64	76	88	122	34	46	56	64	90	103	134	164	191	254
48	56	68	83	95	132	37	49	59	68	95	105	139	169	196	259
49	59	73	88	103	140	39	51	64	73	103	110	144	176	203	269
50	64	78	95	110	151	44	56	68	78	111	110	147	178	205	272
51	64	81	95	110	153	44	56	71	81	111	115	147	181	210	277
52	68	86	105	120	164	46	61	73	88	119	115	149	181	210	280
53	73	93	112	130	177	51	66	81	93	127	120	154	188	218	288
54	81	100	122	139	193	54	71	86	103	135	122	161	196	227	296
55	86	110	132	152	206	59	76	93	110	148	127	164	203	235	309
56	93	117	144	164	225	64	83	100	120	159	132	171	208	244	317
57	100	130	156	178	243	68	88	108	127	169	137	176	215	252	328
58	110	139	169	196	264	73	95	117	134	180	139	183	225	259	338
59	120	152	183	213	285	78	103	127	147	196	144	188	232	266	349
60	125	161	196	225	304	83	108	132	154	201	147	191	232	271	351
61	137	176	213	247	330	88	115	142	164	217	152	196	242	279	362
62	149	191	232	269	359	93	125	152	176	230	154	203	249	286	373
63	161	208	254	293	391	100	132	161	188	246	161	210	254	296	383
64	176	227	276	320	425	108	139	174	200	262	166	215	264	305	394
65	193	249	303	349	465	115	149	186	215	280	171	222	274	318	410
66	220	286	347	403	534	130	169	208	239	312	186	242	298	342	441
67	242	313	381	440	581	134	178	220	257	330	188	247	305	354	454
68	264	340	415	481	634	142	191	235	271	351	193	257	315	364	468
69	286	371	455	528	692	152	200	247	286	370	200	264	323	374	478
70	313	408	499	579	758	159	210	259	301	388	205	269	330	384	491
71	359	469	577	670	874	178	235	288	335	433	222	291	357	413	531
72	393	513	631	733	956	183	244	301	349	452	225	296	364	423	542
73	428	560	689	799	1,044	191	254	313	367	470	227	301	369	433	550
74	464	609	750	872	1,136	200	264	327	381	489	232	305	376	437	557
75	496	648	797	929	1,202	200	266	330	381	491	227	301	369	428	544
76	574	753	929	1,083	1,403	220	293	362	423	544	242	320	396	459	587
77	628	826	1,019	1,190	1,540	225	301	374	437	560	242	323	398	462	587
78	684	904	1,119	1,307	1,688	235	310	384	450	579	244	323	398	462	589
79	748	990	1,227	1,435	1,852	200	266	330	389	497	244	320	398	464	587
80	821	1,088	1,351	1,584	2,042	205	271	337	396	510	244	323	398	464	589
81	894	1,188	1,481	1,738	2,240	205	276	342	403	515	244	320	396	459	581
82	975	1,300	1,620	1,906	2,454	208	276	345	406	520	239	315	391	452	571
83	1,063	1,417	1,772	2,087	2,687	208	279	347	406	520	235	310	384	445	557
84	1,158	1,547	1,938	2,285	2,941	208	279	347	408	520	230	303	371	433	542
85	1,261	1,689	2,116	2,500	3,218	205	276	345	408	520	225	293	362	420	523

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
Current Annual Premium Rates for Policies Issued Prior to 9/16/2002
Rates per $10 Daily Benefit

	Policy Form: LTQ11-336-MA-PA-601					**Rider: 11-SIP-PA-998**					**Rider: 11-CIP-PA-998**				
	Base Rates with No Inflation Protection					**Simple Inflation Protection Rider**					**Compound Inflation Protection Rider**				
Issue	**Benefit Period**					**Benefit Period**					**Benefit Period**				
Age	*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	81	100	120	137	193	59	76	93	108	151	279	362	445	516	682
40	83	105	127	144	203	64	81	98	115	159	283	369	450	523	690
41	88	110	132	154	214	66	86	105	120	169	286	374	457	528	700
42	93	117	139	161	225	68	90	112	130	180	291	379	464	538	711
43	98	122	149	171	238	73	95	117	137	188	293	384	469	543	719
44	103	130	156	181	251	78	100	125	144	198	298	389	477	550	727
45	108	137	166	191	264	83	108	130	154	211	303	393	481	557	737
46	115	144	174	200	280	86	115	139	164	222	305	398	489	567	745
47	120	154	186	213	296	93	120	147	171	235	310	401	491	572	753
48	127	161	196	225	312	98	127	156	183	248	313	408	499	579	761
49	134	171	208	239	330	103	134	164	193	262	305	398	489	567	742
50	139	178	218	249	343	108	139	171	200	272	310	403	494	574	756
51	142	181	220	254	349	110	142	174	203	277	308	403	494	572	750
52	149	188	230	266	365	112	149	181	210	285	313	408	499	579	761
53	156	200	244	281	386	120	156	191	225	301	305	398	489	567	740
54	166	213	259	301	410	127	166	203	235	314	308	401	491	569	745
55	176	227	276	318	433	132	174	213	249	333	310	403	494	574	750
56	186	239	293	340	460	142	183	225	259	349	313	408	499	577	756
57	198	254	310	359	486	147	193	237	276	367	313	411	501	582	758
58	210	271	330	384	518	154	200	247	286	383	313	411	503	584	761
59	222	288	352	406	547	161	210	259	303	402	310	403	496	579	750
60	227	293	359	418	560	164	213	261	303	402	310	406	496	574	750
61	242	313	381	442	594	169	222	274	318	417	303	398	491	569	737
62	257	332	406	472	629	176	230	283	330	436	303	398	491	567	737
63	271	352	430	501	668	183	239	296	342	452	305	398	491	567	734
64	288	374	457	530	708	188	249	308	357	468	303	398	489	569	734
65	305	398	489	567	753	196	257	318	369	483	303	398	489	567	732
66	342	445	545	635	840	213	281	347	403	528	318	418	516	596	771
67	362	472	579	674	890	220	288	357	415	542	315	415	513	594	766
68	384	501	616	716	943	225	296	364	425	555	313	413	508	589	761
69	406	530	653	760	1,001	230	303	374	435	565	310	411	506	587	753
70	430	565	694	809	1,062	235	308	381	445	579	308	406	501	579	745
71	481	633	782	912	1,194	252	332	411	481	626	323	425	523	609	785
72	511	672	828	968	1,268	254	337	420	489	634	318	418	518	601	771
73	540	711	880	1,029	1,345	259	342	425	496	642	313	413	511	594	761
74	572	755	934	1,092	1,424	261	345	430	501	647	308	406	503	584	748
75	594	782	965	1,127	1,464	254	337	418	489	629	293	386	477	555	708
76	672	887	1,100	1,285	1,672	271	362	450	525	676	305	403	499	582	740
77	718	951	1,178	1,381	1,791	274	364	455	530	684	298	396	489	569	727
78	770	1,019	1,266	1,483	1,923	274	367	457	535	687	293	386	479	557	708
79	824	1,095	1,361	1,596	2,066	235	308	386	455	584	288	376	467	547	692
80	887	1,180	1,471	1,728	2,232	232	310	386	455	584	281	371	457	535	679
81	953	1,271	1,586	1,867	2,409	232	308	384	450	581	276	362	447	521	658
82	1,026	1,371	1,713	2,019	2,605	232	305	384	450	576	266	352	435	506	637
83	1,107	1,479	1,852	2,185	2,816	225	305	379	445	571	259	342	420	489	616
84	1,195	1,598	2,004	2,368	3,049	225	301	374	440	565	249	330	406	472	592
85	1,290	1,730	2,170	2,568	3,305	220	293	371	435	557	242	315	391	452	565

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
Current Annual Premium Rates for Policies Issued Prior to 9/16/2002
Rates per $10 Daily Benefit

	Policy Form: LTQ11-336-MA-PA-601					**Rider: 11-SIP-PA-998**					**Rider: 11-CIP-PA-998**				
	Base Rates with No Inflation Protection					**Simple Inflation Protection Rider**					**Compound Inflation Protection Rider**				
Issue	**Benefit Period**					**Benefit Period**					**Benefit Period**				
Age	*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	49	61	71	83	116	34	44	56	64	90	166	215	264	305	402
40	51	64	76	88	122	37	49	59	68	95	169	220	269	308	410
41	54	66	81	93	129	39	51	61	71	100	171	222	271	315	415
42	56	71	86	98	135	42	54	66	76	108	174	225	276	320	423
43	59	76	90	103	143	44	56	68	83	114	178	227	271	325	428
44	64	78	95	110	151	46	61	73	86	122	178	235	283	330	436
45	66	83	100	115	161	49	66	78	93	124	181	237	288	335	439
46	71	88	108	122	169	51	68	83	98	135	183	239	293	340	446
47	73	93	112	130	180	56	73	90	105	143	188	244	298	345	452
48	78	100	120	139	190	59	76	95	110	151	191	247	303	349	460
49	83	105	127	147	201	64	83	100	117	161	191	249	303	352	460
50	88	112	134	156	214	66	86	108	122	166	188	244	301	345	454
51	88	112	134	156	214	66	86	108	125	169	193	252	310	357	468
52	93	120	144	166	227	71	90	112	132	177	191	247	303	349	460
53	100	127	154	178	243	73	98	120	137	185	191	247	303	349	457
54	105	134	164	191	259	81	105	127	147	196	193	252	308	354	462
55	112	144	176	203	275	86	110	134	156	209	196	254	310	362	470
56	120	154	188	218	293	90	117	142	164	219	198	259	315	364	476
57	130	166	200	232	314	93	122	152	176	232	200	261	320	371	481
58	137	176	215	249	336	100	132	159	186	246	203	266	325	374	486
59	147	191	230	266	359	105	137	171	196	259	205	266	330	381	491
60	154	198	242	279	375	108	142	174	203	264	203	264	323	376	486
61	166	213	259	301	402	112	149	183	213	280	203	269	327	379	491
62	178	230	279	323	431	120	156	193	225	293	205	271	332	384	497
63	191	247	301	347	462	127	164	203	237	309	210	274	335	389	502
64	205	264	323	374	497	132	176	215	249	325	213	279	340	393	507
65	220	286	349	406	536	139	183	225	259	338	215	281	345	398	513
66	249	325	396	459	605	154	200	249	288	375	230	298	367	425	550
67	269	349	428	496	653	161	210	259	301	394	232	303	371	430	555
68	291	379	464	538	705	169	220	271	315	410	235	305	376	435	560
69	313	408	501	582	764	176	230	283	330	425	237	310	381	442	565
70	340	442	545	631	827	181	239	293	345	444	239	315	384	447	571
71	386	506	623	723	946	200	264	323	379	489	254	335	411	477	610
72	418	547	674	787	1,025	208	274	337	391	505	257	337	415	479	616
73	452	594	733	853	1,110	213	281	347	406	523	257	340	415	484	621
74	489	643	792	924	1,202	220	291	359	418	539	259	340	420	486	621
75	518	682	838	978	1,266	220	288	359	418	539	252	330	411	474	605
76	599	787	973	1,134	1,472	237	315	391	459	587	266	352	433	506	642
77	650	858	1,061	1,241	1,606	244	325	403	469	605	266	352	435	503	642
78	706	934	1,158	1,356	1,754	252	335	413	484	618	266	352	433	501	637
79	770	1,019	1,266	1,483	1,915	213	286	354	415	531	264	347	428	499	631
80	838	1,114	1,386	1,625	2,098	218	288	359	423	539	261	345	425	496	626
81	912	1,212	1,513	1,777	2,291	220	291	362	425	544	259	342	420	489	618
82	992	1,322	1,650	1,940	2,502	218	291	367	430	547	254	335	413	481	605
83	1,078	1,437	1,799	2,119	2,729	218	293	364	430	547	247	327	403	469	589
84	1,171	1,564	1,960	2,312	2,975	215	288	362	428	547	242	320	393	457	573
85	1,271	1,701	2,133	2,522	3,244	215	288	359	428	544	235	308	381	442	552

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
Current Annual Premium Rates for Policies Issued Prior to 9/16/2002
Rates per $10 Daily Benefit

	Policy Form: FLQ11-336-MA-PA-601					**Rider: 11-SIP-PA-998**					**Rider: 11-CIP-PA-998**				
	Base Rates with No Inflation Protection					**Simple Inflation Protection Rider**					**Compound Inflation Protection Rider**				
Issue	**Benefit Period**					**Benefit Period**					**Benefit Period**				
Age	*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	29	34	42	46	66	17	22	27	32	45	71	90	110	130	174
40	32	37	44	51	71	17	24	29	32	48	71	95	115	132	180
41	34	39	46	54	74	20	27	32	37	53	73	98	120	137	185
42	34	42	51	56	79	22	24	32	42	55	78	103	122	144	193
43	37	44	54	61	85	22	32	37	42	61	81	105	127	149	198
44	39	49	56	64	90	24	29	42	46	66	83	108	132	154	206
45	42	51	59	68	98	27	34	44	51	69	86	112	139	161	211
46	44	56	64	76	103	29	34	46	51	74	88	112	144	161	219
47	46	56	68	78	108	32	44	51	59	82	93	122	147	174	230
48	51	61	76	86	119	32	44	51	61	85	93	127	152	176	232
49	54	66	78	93	127	34	46	59	66	92	98	130	159	183	243
50	56	71	86	100	135	42	51	61	68	100	100	132	161	183	246
51	56	73	86	100	137	42	49	64	71	100	105	132	164	188	251
52	61	78	95	108	148	42	54	66	81	106	105	132	161	191	251
53	66	83	100	117	159	46	61	73	83	116	108	139	171	196	259
54	73	90	110	125	174	49	64	78	93	122	110	144	176	205	267
55	78	100	120	137	185	51	66	83	98	135	112	147	181	210	280
56	83	105	130	147	203	59	76	90	108	143	120	154	188	220	285
57	90	117	142	161	219	61	78	95	115	151	122	159	193	225	293
58	100	125	152	176	238	66	86	105	122	161	125	166	203	232	304
59	108	137	166	191	256	71	93	112	132	177	130	169	208	239	314
60	112	144	176	203	275	76	98	120	139	180	132	174	210	244	314
61	122	159	191	222	299	81	103	130	147	193	137	176	218	252	325
62	134	171	210	242	322	83	112	134	159	209	139	183	222	257	336
63	144	188	230	264	351	90	117	144	169	222	147	188	227	266	346
64	159	205	249	288	383	95	125	156	181	235	149	193	237	274	354
65	174	225	274	315	417	103	134	166	193	254	154	200	244	286	370
66	198	257	313	364	481	117	152	186	215	280	166	218	269	308	396
67	218	281	342	396	523	122	161	198	232	299	169	222	276	320	410
68	237	305	374	433	571	127	171	210	244	317	174	232	283	327	420
69	257	335	408	474	624	137	181	222	259	333	181	237	291	337	431
70	281	367	450	521	682	144	191	232	271	351	186	242	296	347	444
71	323	423	518	604	787	161	210	261	301	391	200	261	323	371	478
72	354	462	567	660	861	164	220	271	315	407	203	266	327	381	486
73	386	503	621	718	941	171	230	281	330	423	203	271	332	391	494
74	418	547	674	784	1,022	181	237	296	345	441	210	276	340	393	502
75	447	584	716	836	1,083	181	239	298	342	441	203	269	332	386	489
76	518	677	836	975	1,263	198	264	325	379	489	218	288	357	413	528
77	565	743	916	1,070	1,387	203	271	337	393	505	218	291	359	415	528
78	616	814	1,007	1,178	1,519	210	279	347	403	520	220	291	359	415	531
79	672	892	1,105	1,290	1,667	181	239	296	349	446	220	286	359	418	528
80	738	980	1,217	1,425	1,839	186	242	303	357	457	220	288	357	418	528
81	804	1,068	1,332	1,564	2,016	186	249	308	362	465	220	288	357	413	523
82	877	1,171	1,459	1,716	2,209	188	249	310	364	468	215	283	352	408	515
83	958	1,276	1,596	1,879	2,417	186	252	310	364	470	210	279	345	398	502
84	1,044	1,393	1,745	2,058	2,647	186	249	313	367	468	205	271	335	389	486
85	1,134	1,520	1,904	2,251	2,896	186	249	310	367	470	203	264	327	379	470

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
Current Annual Premium Rates for Policies Issued Prior to 9/16/2002
Rates per $10 Daily Benefit

	Policy Form: FLQ11-336-MA-PA-601					**Rider: 11-SIP-PA-998**					**Rider: 11-CIP-PA-998**				
	Base Rates with No Inflation Protection					**Simple Inflation Protection Rider**					**Compound Inflation Protection Rider**				
Issue	**Benefit Period**					**Benefit Period**					**Benefit Period**				
Age	*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	44	56	64	76	106	32	39	51	56	79	149	193	237	274	359
40	46	56	68	78	108	32	44	54	64	87	152	198	242	279	370
41	49	59	73	83	116	34	46	54	64	90	154	200	244	283	373
42	51	64	78	88	122	37	49	59	68	98	156	203	247	288	380
43	54	68	81	93	129	39	51	64	73	100	159	205	244	293	383
44	56	71	86	100	135	44	54	66	76	111	161	210	257	296	394
45	59	76	90	103	145	44	59	71	86	111	164	213	259	303	394
46	64	78	98	110	153	46	64	73	88	122	166	218	264	305	402
47	66	83	100	117	161	51	66	83	93	129	169	220	269	310	407
48	71	90	108	125	172	51	68	86	100	135	171	222	274	315	412
49	76	95	115	132	180	56	73	90	105	145	171	225	271	318	415
50	78	100	122	142	193	61	78	95	110	151	171	220	269	310	410
51	78	100	122	142	193	61	78	95	112	153	176	227	279	320	420
52	83	108	130	149	203	64	81	103	120	161	171	222	274	315	415
53	90	115	139	161	219	66	88	108	122	166	171	222	271	313	412
54	95	122	147	171	232	71	93	115	132	177	174	225	279	320	417
55	100	130	159	183	248	78	100	120	139	188	176	230	279	325	423
56	108	139	169	196	264	81	105	130	147	198	178	232	283	327	428
57	117	149	181	210	283	83	110	137	156	209	181	237	288	332	433
58	122	159	193	225	301	90	117	144	166	222	183	239	293	337	439
59	132	171	208	239	322	95	125	154	176	235	186	239	296	345	444
60	139	178	218	252	338	95	127	156	181	238	181	237	291	337	436
61	149	191	232	271	362	103	134	166	191	251	183	242	296	340	441
62	161	208	252	291	388	108	139	174	203	264	183	244	298	345	446
63	171	222	271	313	417	115	147	181	213	277	191	247	301	349	452
64	186	237	291	337	446	117	159	193	225	293	191	252	305	354	457
65	198	257	315	364	483	125	166	203	235	304	193	254	310	359	460
66	225	293	357	413	544	139	181	225	259	338	205	269	330	384	494
67	242	315	386	447	587	144	188	232	269	354	210	271	332	386	499
68	261	342	418	484	634	152	198	244	283	370	213	274	340	391	505
69	281	367	452	523	687	159	208	254	298	383	215	281	342	398	510
70	305	398	491	567	745	164	215	264	310	399	215	283	345	403	513
71	347	455	562	650	851	181	239	288	342	441	230	303	369	430	550
72	376	494	606	709	922	186	244	305	352	454	230	303	374	430	555
73	408	535	660	767	999	191	252	313	367	470	230	305	374	435	560
74	440	579	714	831	1,083	198	261	323	376	483	232	305	376	437	557
75	467	613	755	880	1,139	198	259	323	376	486	227	298	369	428	544
76	540	709	875	1,022	1,324	213	283	352	413	528	239	315	391	455	579
77	584	772	956	1,117	1,445	220	293	362	423	544	242	318	391	455	579
78	635	841	1,044	1,222	1,580	227	301	371	435	555	239	315	389	450	573
79	694	916	1,139	1,334	1,725	191	259	320	374	476	237	313	386	450	568
80	755	1,002	1,246	1,464	1,889	196	261	325	379	483	235	310	384	445	563
81	821	1,090	1,361	1,598	2,061	198	264	325	384	491	232	308	379	440	557
82	892	1,190	1,486	1,747	2,251	198	261	330	386	494	230	301	371	433	544
83	970	1,293	1,618	1,906	2,457	196	264	330	389	491	222	296	364	423	528
84	1,053	1,408	1,764	2,080	2,676	193	259	325	386	494	218	288	354	413	518
85	1,144	1,530	1,921	2,270	2,919	193	261	323	384	491	210	279	342	398	497

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
Current Annual Premium Rates for Policies Issued Prior to 9/16/2002
Rates per $10 Daily Benefit

	Policy Form: HTQ11-338-MA-PA-601					**Rider: 11-SIP-PA-998**					**Rider: 11-CIP-PA-998**				
	Base Rates with No Inflation Protection					**Simple Inflation Protection Rider**					**Compound Inflation Protection Rider**				
Issue	**Benefit Period**					**Benefit Period**					**Benefit Period**				
Age	*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	34	39	42	46	63	15	20	22	27	37	59	71	81	93	119
40	34	39	44	49	69	17	22	24	27	37	64	76	83	95	119
41	37	42	46	51	71	17	22	24	29	40	64	78	86	98	122
42	37	44	49	54	74	20	24	27	32	42	68	78	88	100	127
43	39	46	51	56	77	22	24	27	32	45	68	81	90	103	129
44	42	49	54	59	79	22	27	29	34	48	71	83	93	108	135
45	44	51	56	64	85	22	27	32	34	48	71	86	95	108	135
46	44	54	59	66	87	27	29	34	39	53	76	88	100	112	140
47	46	56	61	68	92	27	32	37	42	53	78	90	103	115	143
48	49	59	64	73	95	29	34	39	42	58	81	95	108	117	148
49	54	61	68	76	100	29	37	42	46	61	81	98	110	122	151
50	56	64	71	81	106	32	39	44	49	61	81	98	110	120	148
51	56	66	73	81	106	32	39	42	49	63	83	100	110	125	153
52	59	68	76	86	111	34	42	46	51	66	83	100	112	125	151
53	61	73	81	90	116	37	44	49	56	69	88	103	115	127	156
54	66	78	86	95	122	39	46	54	59	74	90	105	120	132	161
55	71	83	90	103	129	42	49	56	61	79	93	110	122	134	164
56	76	88	98	110	137	44	54	59	66	82	95	112	125	139	169
57	81	95	105	117	145	46	56	64	71	87	98	115	127	142	172
58	86	100	112	125	156	51	61	66	76	92	103	120	132	147	177
59	93	108	120	132	166	54	66	71	81	95	103	125	137	154	180
60	95	112	125	139	172	56	66	73	81	100	105	125	137	152	180
61	103	122	134	149	182	59	68	78	86	106	108	127	139	156	185
62	110	130	144	159	196	64	76	81	93	111	112	132	144	161	188
63	120	139	154	171	209	66	78	88	98	116	112	134	147	164	193
64	127	149	166	183	222	71	83	90	103	122	117	139	152	169	198
65	139	161	178	198	238	73	88	98	108	129	120	144	156	174	203
66	156	183	203	225	269	83	98	108	117	140	132	154	169	186	217
67	169	198	218	242	288	88	103	112	125	148	134	156	174	191	222
68	183	213	235	259	309	90	108	117	132	153	137	161	176	196	227
69	198	230	252	279	333	95	112	125	137	159	139	166	181	200	230
70	213	249	271	301	357	100	115	130	142	164	144	166	186	203	232
71	242	281	308	342	402	110	130	142	154	180	154	181	198	218	251
72	259	303	332	367	428	115	132	144	161	185	159	183	200	222	254
73	279	325	357	393	457	117	137	149	164	190	159	186	203	225	256
74	298	347	381	420	486	122	142	154	169	193	161	188	205	225	256
75	320	371	403	445	510	120	139	154	166	190	159	183	200	220	251
76	364	423	459	506	579	130	152	166	181	206	171	196	215	235	267
77	393	455	494	543	618	132	154	169	186	209	171	198	218	237	267
78	423	489	530	582	663	137	156	171	188	209	171	198	218	237	264
79	455	525	569	626	708	115	134	147	159	177	174	200	218	237	264
80	491	567	616	672	758	117	134	144	161	177	176	203	218	239	267
81	530	611	660	723	811	117	134	147	156	177	176	203	220	237	264
82	574	657	711	775	869	115	134	144	159	177	174	203	218	237	264
83	621	711	765	833	933	115	134	144	156	174	174	200	218	235	259
84	670	767	824	894	999	117	132	144	154	172	174	198	215	232	259
85	723	826	885	960	1,070	115	132	142	152	166	174	198	213	230	254

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
Current Annual Premium Rates for Policies Issued Prior to 9/16/2002
Rates per $10 Daily Benefit

	Policy Form: HTQ11-338-MA-PA-601					**Rider: 11-SIP-PA-998**					**Rider: 11-CIP-PA-998**				
	Base Rates with No Inflation Protection					**Simple Inflation Protection Rider**					**Compound Inflation Protection Rider**				
Issue	**Benefit Period**					**Benefit Period**					**Benefit Period**				
Age	*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	76	88	98	110	148	44	56	64	71	98	205	247	274	305	380
40	78	90	100	112	153	49	59	68	78	103	208	249	279	313	386
41	81	95	105	117	159	51	61	71	81	108	213	252	281	315	388
42	83	98	110	122	166	54	66	73	83	108	215	257	283	318	388
43	88	103	115	127	172	56	68	76	88	114	215	257	286	320	394
44	90	108	120	134	177	59	71	81	90	122	218	259	288	320	396
45	95	110	125	139	185	61	76	83	95	124	220	264	291	325	396
46	98	115	130	144	190	66	78	88	100	129	222	264	293	327	399
47	103	120	134	149	198	68	83	93	105	135	222	266	296	330	402
48	108	125	139	156	206	71	88	98	110	137	220	264	291	323	386
49	110	132	147	164	211	76	90	100	112	145	222	261	291	325	396
50	112	134	149	166	214	78	90	103	115	145	222	261	288	323	386
51	117	137	152	171	222	78	95	105	117	148	222	264	293	327	396
52	117	139	154	174	222	81	95	108	120	151	225	264	293	325	388
53	125	147	161	181	230	83	100	112	127	159	220	264	293	325	396
54	130	154	169	191	240	88	105	117	130	161	218	257	286	318	380
55	137	161	178	198	251	90	108	122	137	166	218	259	286	320	378
56	142	169	186	208	262	98	115	127	142	172	220	259	288	320	378
57	149	176	196	218	272	100	120	132	147	177	220	261	286	320	378
58	156	186	205	227	283	105	122	137	154	185	222	259	286	320	378
59	164	193	215	239	293	108	130	142	156	193	215	254	279	308	362
60	166	196	218	242	296	108	127	139	156	188	220	259	283	315	375
61	174	205	227	252	309	112	132	144	164	193	213	252	274	305	357
62	183	215	237	264	322	115	137	152	166	198	213	249	274	305	354
63	193	225	249	276	336	117	139	154	171	203	210	249	274	303	354
64	203	237	261	288	349	120	142	156	176	209	210	247	271	301	351
65	213	249	274	303	365	125	147	161	181	214	210	247	271	301	349
66	235	276	303	335	402	134	156	174	193	227	220	257	283	313	362
67	247	288	318	352	420	137	161	176	196	230	218	257	279	308	357
68	259	303	332	367	436	139	164	181	200	232	215	252	276	308	354
69	271	318	347	386	454	142	166	183	200	235	213	249	274	301	349
70	283	332	364	403	476	144	169	186	203	235	213	247	271	298	341
71	315	369	403	445	523	152	178	196	218	248	220	257	281	313	354
72	330	386	423	467	544	154	178	196	218	248	218	254	276	305	349
73	345	403	440	486	565	154	181	198	218	248	215	249	274	301	341
74	362	420	459	508	587	154	181	198	215	246	210	247	269	293	333
75	376	435	474	523	600	149	174	191	208	238	200	235	254	279	314
76	418	486	528	582	666	159	183	203	220	248	210	242	266	291	325
77	442	511	557	611	697	159	186	200	220	248	205	239	259	286	320
78	467	540	587	645	732	159	183	200	218	246	203	235	257	279	312
79	494	572	621	679	769	132	154	166	181	203	200	230	249	274	306
80	525	606	657	718	811	132	152	164	181	201	198	230	247	271	301
81	560	645	699	762	856	130	149	159	176	196	196	225	242	264	296
82	599	687	743	809	906	127	149	159	174	196	191	222	237	259	288
83	640	733	792	860	964	127	147	156	171	188	188	220	232	254	280
84	687	784	843	916	1,022	122	144	154	169	185	186	215	232	252	277
85	736	841	902	978	1,088	122	139	149	164	177	186	210	225	244	269

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
Current Annual Premium Rates for Policies Issued Prior to 9/16/2002
Rates per $10 Daily Benefit

	Policy Form: HTQ11-338-MA-PA-601					**Rider: 11-SIP-PA-998**					**Rider: 11-CIP-PA-998**				
	Base Rates with No Inflation Protection					**Simple Inflation Protection Rider**					**Compound Inflation Protection Rider**				
Issue	**Benefit Period**					**Benefit Period**					**Benefit Period**				
Age	*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	46	54	59	66	90	27	34	39	44	58	122	147	164	183	227
40	46	56	61	68	92	29	34	42	46	63	125	149	166	186	230
41	49	59	64	73	98	32	37	44	46	63	127	149	169	186	230
42	51	61	66	76	100	32	39	44	49	66	127	152	171	188	235
43	54	64	71	78	106	34	42	46	54	69	130	154	171	193	235
44	56	66	73	81	108	34	42	49	56	74	130	156	174	196	238
45	59	68	76	86	114	37	44	51	56	74	132	159	176	196	240
46	61	71	78	88	119	39	49	54	61	77	134	161	178	198	240
47	64	76	83	93	122	42	49	56	64	82	134	161	178	200	243
48	66	78	86	98	127	44	51	61	66	85	137	164	183	200	243
49	68	81	90	103	132	46	56	61	68	90	137	161	178	198	240
50	71	83	93	105	135	49	59	64	71	90	137	164	181	200	243
51	73	86	95	108	137	49	59	66	73	92	137	164	181	200	243
52	76	88	98	110	140	49	61	68	76	95	137	164	183	203	246
53	78	93	103	115	148	54	64	71	81	98	137	161	178	200	240
54	83	98	110	122	156	56	66	73	83	100	137	164	178	200	238
55	88	103	115	130	161	59	71	78	86	108	139	166	181	200	243
56	93	110	122	134	169	61	73	81	93	114	142	166	183	205	243
57	98	115	127	144	177	66	78	86	95	116	142	169	186	205	246
58	105	122	134	152	188	66	81	90	100	122	142	171	188	208	246
59	110	130	144	159	198	71	86	93	105	124	144	171	188	210	246
60	115	134	147	164	201	71	86	95	108	129	142	169	186	205	243
61	120	142	156	174	214	76	90	100	110	132	144	171	186	208	243
62	127	152	166	186	225	81	93	103	115	137	147	171	188	208	246
63	137	159	176	196	238	81	98	108	120	143	147	174	191	210	246
64	144	171	188	208	251	86	100	110	125	148	149	174	191	213	248
65	154	181	200	222	267	90	108	115	130	153	152	178	193	213	248
66	174	203	222	247	296	98	115	127	142	166	159	188	205	227	264
67	186	218	239	264	314	100	120	130	147	172	161	188	205	230	267
68	198	232	254	281	336	105	125	137	152	174	164	191	210	232	267
69	213	247	271	301	357	108	130	142	156	180	164	193	210	232	267
70	227	264	291	323	380	112	132	144	159	185	166	196	213	232	267
71	257	298	327	362	425	122	144	156	174	198	176	205	225	247	283
72	274	320	349	386	452	125	147	161	178	203	176	205	225	249	283
73	291	340	371	411	478	130	152	166	183	206	178	208	227	249	283
74	310	362	396	437	505	132	154	169	186	211	178	208	227	249	283
75	330	384	418	459	528	132	152	166	183	206	176	203	220	242	275
76	376	435	474	521	597	139	164	178	196	219	183	215	232	257	288
77	403	467	508	557	637	142	166	181	198	222	183	215	232	257	285
78	433	501	543	596	676	144	166	183	200	225	186	213	232	254	285
79	464	535	582	638	721	122	142	154	169	190	183	215	232	252	283
80	499	577	626	684	771	122	142	154	166	188	186	213	230	252	280
81	538	618	670	733	822	125	142	154	166	188	183	213	230	249	280
82	579	665	718	784	880	122	142	152	166	182	183	213	227	247	275
83	623	716	772	841	941	122	139	149	164	180	183	210	225	244	272
84	672	770	828	899	1,004	120	139	147	164	177	183	210	222	244	269
85	726	828	890	963	1,073	120	137	144	159	174	181	208	220	239	264

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
Current Annual Premium Rates for Policies Issued On or After 9/16/2002
Rates per $10 Daily Benefit

	Policy Form: NTQ11-337-MA-PA-601					**Rider: 11-SIP-PA-998**					**Rider: 11-CIP-PA-998**				
	Base Rates with No Inflation Protection					**Simple Inflation Protection Rider**					**Compound Inflation Protection Rider**				
Issue	**Benefit Period**					**Benefit Period**					**Benefit Period**				
Age	*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	29	32	37	52	12	15	20	22	35	61	78	98	110	159
40	24	29	34	39	55	15	20	22	24	37	66	83	100	115	164
41	27	32	37	42	58	15	20	24	27	40	66	86	105	120	170
42	29	34	39	44	63	15	20	24	29	43	68	88	108	125	176
43	29	37	42	46	66	17	22	27	32	49	73	93	112	130	184
44	32	39	44	49	72	20	24	29	34	52	76	95	117	134	190
45	34	42	46	54	78	20	24	34	37	55	78	100	122	139	196
46	37	44	51	56	84	22	29	34	42	58	81	103	125	147	202
47	39	46	54	61	89	24	32	39	44	63	83	108	132	152	210
48	42	49	59	66	95	24	34	42	46	69	86	112	134	156	219
49	44	54	64	71	104	29	37	44	51	75	90	117	139	161	225
50	46	56	68	76	110	32	42	49	56	84	93	120	142	166	231
51	46	59	68	78	112	32	39	49	56	81	95	120	147	166	233
52	51	64	73	83	121	34	44	54	64	89	95	122	149	171	236
53	54	68	81	90	133	39	46	59	68	95	100	127	154	178	245
54	59	73	88	100	141	42	51	61	71	104	103	132	159	183	257
55	64	81	95	108	156	44	56	68	78	112	108	137	166	191	265
56	68	86	103	117	167	49	61	76	86	121	112	144	174	198	277
57	76	95	112	130	184	51	66	81	90	130	115	147	178	205	282
58	83	103	122	139	199	54	71	88	100	141	117	154	186	215	297
59	90	112	134	154	219	59	78	93	108	150	122	159	193	222	306
60	95	120	144	164	231	64	81	98	112	161	125	161	196	225	311
61	103	132	156	178	254	68	86	108	122	170	130	166	203	235	320
62	112	144	171	196	277	73	93	115	132	184	134	174	210	242	331
63	125	156	188	215	303	78	103	122	142	196	139	181	218	252	343
64	134	171	205	237	331	86	110	132	152	208	147	188	227	259	355
65	149	191	227	262	363	90	115	142	161	225	152	193	237	269	372
66	171	218	264	301	421	103	132	159	183	251	164	213	257	296	401
67	188	240	289	330	458	108	139	169	196	268	169	220	267	306	418
68	205	264	318	364	504	115	147	178	205	282	176	227	274	315	429
69	225	289	347	399	550	122	156	191	220	300	183	235	286	328	444
70	247	318	384	440	605	130	166	200	230	314	188	242	293	337	458
71	286	369	445	511	700	144	183	225	257	352	205	264	320	367	499
72	313	403	489	560	770	149	193	235	271	366	210	271	328	379	510
73	342	443	533	614	842	156	200	247	284	383	215	276	337	389	525
74	374	482	584	670	917	161	210	257	296	401	220	284	345	399	536
75	403	516	623	716	974	161	213	259	296	401	215	281	342	391	530
76	467	601	729	836	1,138	181	235	284	328	441	235	306	369	425	574
77	511	660	800	919	1,248	186	240	293	337	458	240	308	377	433	585
78	560	724	878	1,010	1,369	191	247	301	347	470	240	313	381	440	591
79	611	792	961	1,108	1,499	164	213	259	298	404	245	315	386	445	599
80	670	868	1,056	1,218	1,649	169	218	264	308	412	249	325	394	455	611
81	731	951	1,156	1,335	1,804	169	218	269	308	415	252	325	396	460	617
82	797	1,037	1,264	1,460	1,971	171	222	269	313	415	252	328	399	462	620
83	868	1,130	1,379	1,594	2,150	169	222	269	313	418	252	330	401	465	623
84	946	1,232	1,504	1,741	2,346	169	220	271	313	418	252	330	403	467	625
85	1,029	1,342	1,641	1,902	2,559	169	218	267	308	415	252	330	403	467	628

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
Current Annual Premium Rates for Policies Issued On or After 9/16/2002
Rates per $10 Daily Benefit

	Policy Form: NTQ11-337-MA-PA-601					**Rider: 11-SIP-PA-998**					**Rider: 11-CIP-PA-998**				
	Base Rates with No Inflation Protection					**Simple Inflation Protection Rider**					**Compound Inflation Protection Rider**				
Issue	**Benefit Period**					**Benefit Period**					**Benefit Period**				
Age	*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	73	86	95	138	42	51	64	73	107	230	293	355	408	571
40	61	76	88	100	144	44	56	68	78	115	232	298	362	416	582
41	66	81	95	108	153	46	59	71	83	124	235	303	367	421	591
42	68	86	100	112	161	49	64	76	90	130	240	308	372	430	599
43	73	90	105	120	173	51	66	83	95	138	242	313	379	435	605
44	76	95	112	127	182	56	71	86	100	147	247	318	384	440	617
45	81	100	117	134	193	59	76	93	108	156	249	323	391	447	623
46	86	105	125	142	205	61	81	98	115	164	252	328	396	455	631
47	90	110	132	152	216	66	88	105	120	176	257	333	401	460	640
48	95	117	139	159	231	71	93	112	130	184	259	337	408	467	648
49	100	125	149	169	242	76	98	117	139	199	254	330	399	460	637
50	103	130	156	178	254	81	103	125	144	208	262	335	403	465	646
51	105	132	156	181	259	81	105	127	144	208	259	335	406	465	643
52	110	139	166	188	271	86	108	132	154	216	262	337	408	472	651
53	117	147	176	200	288	88	117	139	164	231	257	333	401	462	637
54	125	156	188	215	306	93	122	149	171	245	259	335	406	467	646
55	132	166	200	230	326	100	130	156	181	257	262	340	408	469	651
56	139	178	213	245	346	108	137	166	191	271	264	340	413	474	657
57	149	188	227	259	369	112	147	176	203	285	267	345	418	482	663
58	159	200	242	276	395	117	154	186	215	297	269	347	421	484	666
59	169	215	257	296	418	125	159	196	225	314	267	345	421	482	660
60	174	220	264	303	429	125	164	198	227	317	267	345	418	479	660
61	183	235	284	325	458	132	171	205	237	331	264	342	413	474	651
62	196	249	301	347	487	137	178	218	247	346	267	345	416	477	654
63	208	267	323	369	519	144	186	225	259	357	267	345	416	479	657
64	222	284	342	394	550	149	193	235	269	375	267	345	418	482	657
65	237	303	367	421	588	154	200	245	281	386	269	347	421	484	660
66	267	342	413	474	660	169	218	267	308	424	284	367	445	511	697
67	284	364	440	506	703	174	225	274	315	432	281	367	445	511	695
68	301	386	469	538	746	178	232	281	325	444	284	367	443	511	695
69	320	413	499	575	793	183	237	291	333	455	281	364	443	509	695
70	340	440	533	611	844	188	242	296	342	464	281	364	440	509	689
71	384	496	601	692	951	203	264	320	369	504	296	384	467	538	732
72	408	528	641	738	1,012	205	269	325	377	513	293	381	465	533	726
73	435	562	682	785	1,078	208	271	330	381	519	291	379	462	533	721
74	460	597	724	836	1,144	213	276	335	386	525	291	377	460	526	712
75	482	621	753	866	1,179	205	269	325	377	510	276	359	438	506	683
76	548	707	858	988	1,349	220	289	352	406	548	291	381	465	535	721
77	584	758	922	1,061	1,444	222	291	352	408	553	291	377	457	531	715
78	626	812	988	1,139	1,548	225	293	357	413	556	289	374	455	526	709
79	672	873	1,061	1,225	1,663	188	247	303	350	470	284	369	452	523	703
80	724	941	1,147	1,325	1,793	188	247	301	347	470	284	367	450	518	700
81	780	1,012	1,235	1,428	1,931	188	247	301	347	467	279	364	445	516	692
82	839	1,093	1,333	1,543	2,084	186	242	298	345	461	276	359	443	509	686
83	902	1,176	1,438	1,665	2,245	183	242	293	340	458	276	359	438	506	680
84	973	1,269	1,553	1,800	2,424	181	237	291	337	452	274	357	435	501	677
85	1,051	1,372	1,680	1,946	2,623	178	235	286	333	447	269	352	430	499	669

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
Current Annual Premium Rates for Policies Issued On or After 9/16/2002
Rates per $10 Daily Benefit

	Policy Form: NTQ11-337-MA-PA-601					**Rider: 11-SIP-PA-998**					**Rider: 11-CIP-PA-998**				
	Base Rates with No Inflation Protection					**Simple Inflation Protection Rider**					**Compound Inflation Protection Rider**				
Issue	**Benefit Period**					**Benefit Period**					**Benefit Period**				
Age	*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	37	44	51	56	84	24	32	37	44	63	134	174	210	242	337
40	37	46	54	61	86	27	32	42	46	69	139	176	215	247	343
41	39	49	56	64	92	29	34	44	51	72	142	181	220	252	349
42	42	51	61	68	98	29	37	44	54	78	142	183	220	254	355
43	44	54	64	73	104	32	42	49	56	84	144	188	225	259	360
44	46	56	68	76	110	34	44	51	61	89	147	191	230	264	369
45	49	61	71	81	118	37	46	56	66	92	149	193	235	269	372
46	51	64	76	86	124	39	49	59	68	98	154	198	237	274	378
47	54	68	81	90	133	42	51	64	73	104	156	200	242	279	383
48	59	73	86	98	141	42	54	68	78	110	156	203	247	281	389
49	61	76	90	103	150	46	61	73	86	118	159	205	247	286	392
50	66	81	98	110	159	49	64	76	90	127	156	203	242	281	389
51	66	81	98	110	159	49	64	76	90	127	161	210	252	291	401
52	68	88	103	117	170	54	66	83	95	133	159	203	249	286	392
53	73	93	110	127	182	56	71	88	100	141	161	205	249	286	395
54	78	100	117	134	193	61	76	95	108	153	164	208	254	293	401
55	83	105	127	144	208	64	83	100	115	161	166	215	257	296	406
56	90	115	137	156	222	66	86	105	122	170	169	215	262	301	415
57	98	122	147	169	239	71	93	112	130	182	169	220	267	306	421
58	103	132	156	181	257	78	98	120	137	190	174	222	271	311	427
59	112	142	169	193	274	81	105	127	147	205	176	227	276	318	435
60	117	149	178	203	288	83	108	130	152	210	174	225	271	313	429
61	125	159	193	220	311	90	115	137	159	219	178	230	276	318	435
62	134	174	208	237	334	95	120	147	169	233	181	232	281	323	441
63	147	186	225	257	360	98	127	154	178	245	183	237	286	328	450
64	156	200	242	279	389	105	137	164	188	259	188	242	291	333	455
65	171	218	262	301	421	110	144	174	198	271	191	247	298	342	464
66	193	249	301	345	478	122	156	191	218	300	203	262	315	364	496
67	210	269	325	374	516	127	166	200	230	317	208	267	323	369	507
68	227	293	352	406	559	134	171	210	240	331	210	271	330	377	513
69	247	318	384	440	608	139	181	220	252	343	215	276	335	384	522
70	269	345	418	479	660	147	191	230	264	357	218	281	340	391	530
71	308	396	479	553	758	161	208	254	289	395	232	303	367	421	571
72	335	430	523	599	824	166	218	262	303	409	237	308	372	430	579
73	364	469	567	653	893	171	222	274	313	424	240	311	379	435	588
74	394	509	616	709	968	178	232	281	323	438	242	315	384	440	597
75	421	543	655	753	1,026	178	230	281	323	435	240	308	377	433	582
76	487	628	760	875	1,190	193	252	308	355	478	257	333	403	465	628
77	531	685	831	956	1,300	198	259	315	364	490	257	335	408	469	631
78	577	746	907	1,044	1,415	203	267	323	374	504	259	340	411	474	640
79	628	814	990	1,139	1,545	174	227	276	320	429	262	340	413	479	643
80	685	888	1,081	1,247	1,689	176	232	284	325	435	264	345	418	484	648
81	746	968	1,179	1,362	1,842	176	232	284	328	438	264	342	421	484	651
82	809	1,054	1,284	1,484	2,003	178	230	284	328	444	264	345	421	487	654
83	878	1,144	1,396	1,616	2,179	178	232	284	328	441	264	345	421	487	654
84	954	1,242	1,518	1,760	2,369	176	232	281	325	438	264	345	421	487	654
85	1,034	1,350	1,650	1,914	2,577	174	230	281	325	435	264	345	421	487	654

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
Current Annual Premium Rates for Policies Issued On or After 9/16/2002
Rates per $10 Daily Benefit

	Policy Form: LTQ11-336-MA-PA-601					**Rider: 11-SIP-PA-998**					**Rider: 11-CIP-PA-998**				
	Base Rates with No Inflation Protection					**Simple Inflation Protection Rider**					**Compound Inflation Protection Rider**				
Issue	**Benefit Period**					**Benefit Period**					**Benefit Period**				
Age	*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	39	46	51	81	20	24	29	37	55	78	100	122	144	210
40	34	42	49	56	86	20	27	32	37	58	81	105	127	147	216
41	37	44	51	59	89	22	29	37	42	63	83	108	134	154	225
42	39	46	56	64	95	22	27	37	44	69	86	112	137	159	233
43	42	49	59	68	104	24	34	42	46	72	88	117	142	164	239
44	44	54	64	71	110	27	34	44	51	78	90	120	147	171	248
45	46	56	66	76	118	29	39	49	56	84	95	125	154	178	257
46	49	61	71	83	124	32	39	51	59	89	98	127	159	181	265
47	51	64	76	88	133	34	46	56	64	98	103	134	164	191	277
48	56	68	83	95	144	37	49	59	68	104	105	139	169	196	282
49	59	73	88	103	153	39	51	64	73	112	110	144	176	203	294
50	64	78	95	110	164	44	56	68	78	121	110	147	178	205	297
51	64	81	95	110	167	44	56	71	81	121	115	147	181	210	303
52	68	86	105	120	179	46	61	73	88	130	115	149	181	210	306
53	73	93	112	130	193	51	66	81	93	138	120	154	188	218	314
54	81	100	122	139	210	54	71	86	103	147	122	161	196	227	323
55	86	110	132	152	225	59	76	93	110	161	127	164	203	235	337
56	93	117	144	164	245	64	83	100	120	173	132	171	208	245	346
57	100	130	156	178	265	68	88	108	127	184	137	176	215	252	357
58	110	139	169	196	288	73	95	117	134	196	139	183	225	259	369
59	120	152	183	213	311	78	103	127	147	213	144	188	232	267	380
60	125	161	196	225	331	83	108	132	154	219	147	191	232	271	383
61	137	176	213	247	360	88	115	142	164	236	152	196	242	279	395
62	149	191	232	269	392	93	125	152	176	251	154	203	249	286	406
63	161	208	254	293	427	100	132	161	188	268	161	210	254	296	418
64	176	227	276	320	464	108	139	174	200	285	166	215	264	306	429
65	193	249	303	350	507	115	149	186	215	306	171	222	274	318	447
66	220	286	347	403	582	130	169	208	240	340	186	242	298	342	481
67	242	313	381	440	634	134	178	220	257	360	188	247	306	355	496
68	264	340	416	482	692	142	191	235	271	383	193	257	315	364	510
69	286	372	455	528	755	152	200	247	286	404	200	264	323	374	522
70	313	408	499	579	827	159	210	259	301	424	205	269	330	384	536
71	359	469	577	670	954	178	235	289	335	473	222	291	357	413	579
72	394	513	631	734	1,043	183	245	301	350	493	225	296	364	423	591
73	428	560	689	800	1,138	191	254	313	367	513	227	301	369	433	599
74	465	609	751	873	1,239	200	264	328	381	533	232	306	377	438	608
75	496	648	797	929	1,311	200	267	330	381	536	227	301	369	428	594
76	575	753	929	1,083	1,530	220	293	362	423	594	242	320	396	460	640
77	628	826	1,020	1,191	1,680	225	301	374	438	611	242	323	399	462	640
78	685	905	1,120	1,308	1,842	235	311	384	450	631	245	323	399	462	643
79	748	990	1,227	1,435	2,020	200	267	330	389	542	245	320	399	465	640
80	822	1,088	1,352	1,584	2,228	205	271	337	396	556	245	323	399	465	643
81	895	1,188	1,482	1,738	2,444	205	276	342	403	562	245	320	396	460	634
82	976	1,301	1,621	1,907	2,678	208	276	345	406	568	240	315	391	452	623
83	1,064	1,418	1,773	2,088	2,931	208	279	347	406	568	235	311	384	445	608
84	1,159	1,548	1,939	2,286	3,208	208	279	347	408	568	230	303	372	433	591
85	1,262	1,690	2,117	2,501	3,510	205	276	345	408	568	225	293	362	421	571

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
Current Annual Premium Rates for Policies Issued On or After 9/16/2002
Rates per $10 Daily Benefit

	Policy Form: LTQ11-336-MA-PA-601					**Rider: 11-SIP-PA-998**					**Rider: 11-CIP-PA-998**				
	Base Rates with No Inflation Protection					**Simple Inflation Protection Rider**					**Compound Inflation Protection Rider**				
Issue	**Benefit Period**					**Benefit Period**					**Benefit Period**				
Age	*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	81	100	120	137	210	59	76	93	108	164	279	362	445	516	744
40	83	105	127	144	222	64	81	98	115	173	284	369	450	523	752
41	88	110	132	154	233	66	86	105	120	184	286	374	457	528	764
42	93	117	139	161	245	68	90	112	130	196	291	379	465	538	775
43	98	122	149	171	259	73	95	117	137	205	293	384	469	543	784
44	103	130	156	181	274	78	100	125	144	216	298	389	477	550	793
45	108	137	166	191	288	83	108	130	154	231	303	394	482	557	804
46	115	144	174	200	306	86	115	139	164	242	306	399	489	567	813
47	120	154	186	213	323	93	120	147	171	257	311	401	491	572	821
48	127	161	196	225	340	98	127	156	183	271	313	408	499	579	830
49	134	171	208	240	360	103	134	164	193	285	306	399	489	567	810
50	139	178	218	249	375	108	139	171	200	297	311	403	494	575	824
51	142	181	220	254	380	110	142	174	203	303	308	403	494	572	819
52	149	188	230	267	398	112	149	181	210	311	313	408	499	579	830
53	156	200	245	281	421	120	156	191	225	329	306	399	489	567	807
54	166	213	259	301	447	127	166	203	235	343	308	401	491	570	813
55	176	227	276	318	473	132	174	213	249	363	311	403	494	575	819
56	186	240	293	340	501	142	183	225	259	380	313	408	499	577	824
57	198	254	311	359	530	147	193	237	276	401	313	411	501	582	827
58	210	271	330	384	565	154	200	247	286	418	313	411	504	584	830
59	222	289	352	406	597	161	210	259	303	438	311	403	496	579	819
60	227	293	359	418	611	164	213	262	303	438	311	406	496	575	819
61	242	313	381	443	648	169	222	274	318	455	303	399	491	570	804
62	257	333	406	472	686	176	230	284	330	476	303	399	491	567	804
63	271	352	430	501	729	183	240	296	342	493	306	399	491	567	801
64	289	374	457	531	772	188	249	308	357	510	303	399	489	570	801
65	306	399	489	567	821	196	257	318	369	527	303	399	489	567	798
66	342	445	545	636	917	213	281	347	403	576	318	418	516	597	842
67	362	472	579	675	971	220	289	357	416	591	315	416	513	594	836
68	384	501	616	716	1,029	225	296	364	425	605	313	413	509	589	830
69	406	531	653	760	1,092	230	303	374	435	617	311	411	506	587	821
70	430	565	694	809	1,159	235	308	381	445	631	308	406	501	579	813
71	482	633	782	912	1,303	252	333	411	482	683	323	425	523	609	856
72	511	672	829	968	1,383	254	337	421	489	692	318	418	518	601	842
73	540	712	880	1,029	1,467	259	342	425	496	700	313	413	511	594	830
74	572	756	934	1,093	1,553	262	345	430	501	706	308	406	504	584	816
75	594	782	966	1,127	1,597	254	337	418	489	686	293	386	477	555	772
76	672	888	1,100	1,286	1,824	271	362	450	526	738	306	403	499	582	807
77	719	951	1,179	1,381	1,954	274	364	455	531	746	298	396	489	570	793
78	770	1,020	1,267	1,484	2,098	274	367	457	535	749	293	386	479	557	772
79	824	1,095	1,362	1,597	2,254	235	308	386	455	637	289	377	467	548	755
80	888	1,181	1,472	1,729	2,435	232	311	386	455	637	281	372	457	535	741
81	954	1,271	1,587	1,868	2,629	232	308	384	450	634	276	362	447	521	718
82	1,027	1,372	1,714	2,020	2,842	232	306	384	450	628	267	352	435	506	695
83	1,108	1,479	1,853	2,186	3,072	225	306	379	445	623	259	342	421	489	672
84	1,196	1,599	2,005	2,369	3,326	225	301	374	440	617	249	330	406	472	646
85	1,291	1,731	2,171	2,570	3,606	220	293	372	435	608	242	315	391	452	617

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
Current Annual Premium Rates for Policies Issued On or After 9/16/2002
Rates per $10 Daily Benefit

	Policy Form: LTQ11-336-MA-PA-601					**Rider: 11-SIP-PA-998**					**Rider: 11-CIP-PA-998**				
	Base Rates with No Inflation Protection					**Simple Inflation Protection Rider**					**Compound Inflation Protection Rider**				
Issue	**Benefit Period**					**Benefit Period**					**Benefit Period**				
Age	*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	49	61	71	83	127	34	44	56	64	98	166	215	264	306	438
40	51	64	76	88	133	37	49	59	68	104	169	220	269	308	447
41	54	66	81	93	141	39	51	61	71	110	171	222	271	315	452
42	56	71	86	98	147	42	54	66	76	118	174	225	276	320	461
43	59	76	90	103	156	44	56	68	83	124	178	227	271	325	467
44	64	78	95	110	164	46	61	73	86	133	178	235	284	330	476
45	66	83	100	115	176	49	66	78	93	135	181	237	289	335	478
46	71	88	108	122	184	51	68	83	98	147	183	240	293	340	487
47	73	93	112	130	196	56	73	90	105	156	188	245	298	345	493
48	78	100	120	139	208	59	76	95	110	164	191	247	303	350	501
49	83	105	127	147	219	64	83	100	117	176	191	249	303	352	501
50	88	112	134	156	233	66	86	108	122	182	188	245	301	345	496
51	88	112	134	156	233	66	86	108	125	184	193	252	311	357	510
52	93	120	144	166	248	71	90	112	132	193	191	247	303	350	501
53	100	127	154	178	265	73	98	120	137	202	191	247	303	350	499
54	105	134	164	191	282	81	105	127	147	213	193	252	308	355	504
55	112	144	176	203	300	86	110	134	156	228	196	254	311	362	513
56	120	154	188	218	320	90	117	142	164	239	198	259	315	364	519
57	130	166	200	232	343	93	122	152	176	254	200	262	320	372	525
58	137	176	215	249	366	100	132	159	186	268	203	267	325	374	530
59	147	191	230	267	392	105	137	171	196	282	205	267	330	381	536
60	154	198	242	279	409	108	142	174	203	288	203	264	323	377	530
61	166	213	259	301	438	112	149	183	213	306	203	269	328	379	536
62	178	230	279	323	470	120	156	193	225	320	205	271	333	384	542
63	191	247	301	347	504	127	164	203	237	337	210	274	335	389	548
64	205	264	323	374	542	132	176	215	249	355	213	279	340	394	553
65	220	286	350	406	585	139	183	225	259	369	215	281	345	399	559
66	249	325	396	460	660	154	200	249	289	409	230	298	367	425	599
67	269	350	428	496	712	161	210	259	301	429	232	303	372	430	605
68	291	379	465	538	770	169	220	271	315	447	235	306	377	435	611
69	313	408	501	582	833	176	230	284	330	464	237	311	381	443	617
70	340	443	545	631	902	181	240	293	345	484	240	315	384	447	623
71	386	506	623	724	1,032	200	264	323	379	533	254	335	411	477	666
72	418	548	675	787	1,118	208	274	337	391	550	257	337	416	479	672
73	452	594	734	853	1,211	213	281	347	406	571	257	340	416	484	677
74	489	643	792	924	1,311	220	291	359	418	588	259	340	421	487	677
75	518	682	839	978	1,381	220	289	359	418	588	252	330	411	474	660
76	599	787	973	1,134	1,605	237	315	391	460	640	267	352	433	506	700
77	650	858	1,061	1,242	1,752	245	325	403	469	660	267	352	435	504	700
78	707	934	1,159	1,357	1,914	252	335	413	484	674	267	352	433	501	695
79	770	1,020	1,267	1,484	2,090	213	286	355	416	579	264	347	428	499	689
80	839	1,115	1,386	1,626	2,288	218	289	359	423	588	262	345	425	496	683
81	912	1,213	1,513	1,778	2,499	220	291	362	425	594	259	342	421	489	674
82	993	1,323	1,650	1,941	2,729	218	291	367	430	597	254	335	413	482	660
83	1,078	1,438	1,800	2,120	2,977	218	293	364	430	597	247	328	403	469	643
84	1,171	1,565	1,961	2,313	3,245	215	289	362	428	597	242	320	394	457	625
85	1,271	1,702	2,135	2,523	3,539	215	289	359	428	594	235	308	381	443	602

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
Current Annual Premium Rates for Policies Issued On or After 9/16/2002
Rates per $10 Daily Benefit

	Policy Form: FLQ11-336-MA-PA-601					**Rider: 11-SIP-PA-998**					**Rider: 11-CIP-PA-998**				
	Base Rates with No Inflation Protection					**Simple Inflation Protection Rider**					**Compound Inflation Protection Rider**				
Issue	**Benefit Period**					**Benefit Period**					**Benefit Period**				
Age	*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	29	34	42	46	72	17	22	27	32	49	71	90	110	130	190
40	32	37	44	51	78	17	24	29	32	52	71	95	115	132	196
41	34	39	46	54	81	20	27	32	37	58	73	98	120	137	202
42	34	42	51	56	86	22	24	32	42	61	78	103	122	144	210
43	37	44	54	61	92	22	32	37	42	66	81	105	127	149	216
44	39	49	56	64	98	24	29	42	46	72	83	108	132	154	225
45	42	51	59	68	107	27	34	44	51	75	86	112	139	161	231
46	44	56	64	76	112	29	34	46	51	81	88	112	144	161	239
47	46	56	68	78	118	32	44	51	59	89	93	122	147	174	251
48	51	61	76	86	130	32	44	51	61	92	93	127	152	176	254
49	54	66	78	93	138	34	46	59	66	101	98	130	159	183	265
50	56	71	86	100	147	42	51	61	68	110	100	132	161	183	268
51	56	73	86	100	150	42	49	64	71	110	105	132	164	188	274
52	61	78	95	108	161	42	54	66	81	115	105	132	161	191	274
53	66	83	100	117	173	46	61	73	83	127	108	139	171	196	282
54	73	90	110	125	190	49	64	78	93	133	110	144	176	205	291
55	78	100	120	137	202	51	66	83	98	147	112	147	181	210	306
56	83	105	130	147	222	59	76	90	108	156	120	154	188	220	311
57	90	117	142	161	239	61	78	95	115	164	122	159	193	225	320
58	100	125	152	176	259	66	86	105	122	176	125	166	203	232	331
59	108	137	166	191	280	71	93	112	132	193	130	169	208	240	343
60	112	144	176	203	300	76	98	120	139	196	132	174	210	245	343
61	122	159	191	222	326	81	103	130	147	210	137	176	218	252	355
62	134	171	210	242	352	83	112	134	159	228	139	183	222	257	366
63	144	188	230	264	383	90	117	144	169	242	147	188	227	267	378
64	159	205	249	289	418	95	125	156	181	257	149	193	237	274	386
65	174	225	274	315	455	103	134	166	193	277	154	200	245	286	404
66	198	257	313	364	525	117	152	186	215	306	166	218	269	308	432
67	218	281	342	396	571	122	161	198	232	326	169	222	276	320	447
68	237	306	374	433	623	127	171	210	245	346	174	232	284	328	458
69	257	335	408	474	680	137	181	222	259	363	181	237	291	337	470
70	281	367	450	521	744	144	191	232	271	383	186	242	296	347	484
71	323	423	518	604	859	161	210	262	301	427	200	262	323	372	522
72	355	462	567	660	940	164	220	271	315	444	203	267	328	381	530
73	386	504	621	719	1,026	171	230	281	330	461	203	271	333	391	539
74	418	548	675	785	1,115	181	237	296	345	481	210	276	340	394	548
75	447	584	716	836	1,182	181	240	298	342	481	203	269	333	386	533
76	518	677	836	976	1,378	198	264	325	379	533	218	289	357	413	576
77	565	743	917	1,071	1,513	203	271	337	394	550	218	291	359	416	576
78	616	814	1,007	1,179	1,657	210	279	347	403	568	220	291	359	416	579
79	672	892	1,105	1,291	1,819	181	240	296	350	487	220	286	359	418	576
80	738	980	1,218	1,425	2,006	186	242	303	357	499	220	289	357	418	576
81	804	1,068	1,333	1,565	2,199	186	249	308	362	507	220	289	357	413	571
82	878	1,171	1,460	1,716	2,409	188	249	311	364	510	215	284	352	408	562
83	958	1,276	1,597	1,880	2,637	186	252	311	364	513	210	279	345	399	548
84	1,044	1,394	1,746	2,059	2,888	186	249	313	367	510	205	271	335	389	530
85	1,134	1,521	1,905	2,252	3,159	186	249	311	367	513	203	264	328	379	513

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
Current Annual Premium Rates for Policies Issued On or After 9/16/2002
Rates per $10 Daily Benefit

	Policy Form: FLQ11-336-MA-PA-601					**Rider: 11-SIP-PA-998**					**Rider: 11-CIP-PA-998**				
	Base Rates with No Inflation Protection					**Simple Inflation Protection Rider**					**Compound Inflation Protection Rider**				
Issue	**Benefit Period**					**Benefit Period**					**Benefit Period**				
Age	*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	44	56	64	76	115	32	39	51	56	86	149	193	237	274	392
40	46	56	68	78	118	32	44	54	64	95	152	198	242	279	404
41	49	59	73	83	127	34	46	54	64	98	154	200	245	284	406
42	51	64	78	88	133	37	49	59	68	107	156	203	247	289	415
43	54	68	81	93	141	39	51	64	73	110	159	205	245	293	418
44	56	71	86	100	147	44	54	66	76	121	161	210	257	296	429
45	59	76	90	103	159	44	59	71	86	121	164	213	259	303	429
46	64	78	98	110	167	46	64	73	88	133	166	218	264	306	438
47	66	83	100	117	176	51	66	83	93	141	169	220	269	311	444
48	71	90	108	125	187	51	68	86	100	147	171	222	274	315	450
49	76	95	115	132	196	56	73	90	105	159	171	225	271	318	452
50	78	100	122	142	210	61	78	95	110	164	171	220	269	311	447
51	78	100	122	142	210	61	78	95	112	167	176	227	279	320	458
52	83	108	130	149	222	64	81	103	120	176	171	222	274	315	452
53	90	115	139	161	239	66	88	108	122	182	171	222	271	313	450
54	95	122	147	171	254	71	93	115	132	193	174	225	279	320	455
55	100	130	159	183	271	78	100	120	139	205	176	230	279	325	461
56	108	139	169	196	288	81	105	130	147	216	178	232	284	328	467
57	117	149	181	210	308	83	110	137	156	228	181	237	289	333	473
58	122	159	193	225	329	90	117	144	166	242	183	240	293	337	478
59	132	171	208	240	352	95	125	154	176	257	186	240	296	345	484
60	139	178	218	252	369	95	127	156	181	259	181	237	291	337	476
61	149	191	232	271	395	103	134	166	191	274	183	242	296	340	481
62	161	208	252	291	424	108	139	174	203	288	183	245	298	345	487
63	171	222	271	313	455	115	147	181	213	303	191	247	301	350	493
64	186	237	291	337	487	117	159	193	225	320	191	252	306	355	499
65	198	257	315	364	527	125	166	203	235	331	193	254	311	359	501
66	225	293	357	413	594	139	181	225	259	369	205	269	330	384	539
67	242	315	386	447	640	144	188	232	269	386	210	271	333	386	545
68	262	342	418	484	692	152	198	245	284	404	213	274	340	391	550
69	281	367	452	523	749	159	208	254	298	418	215	281	342	399	556
70	306	399	491	567	813	164	215	264	311	435	215	284	345	403	559
71	347	455	562	650	928	181	240	289	342	481	230	303	369	430	599
72	377	494	606	709	1,006	186	245	306	352	496	230	303	374	430	605
73	408	535	660	768	1,089	191	252	313	367	513	230	306	374	435	611
74	440	579	714	831	1,182	198	262	323	377	527	232	306	377	438	608
75	467	614	756	880	1,242	198	259	323	377	530	227	298	369	428	594
76	540	709	875	1,022	1,444	213	284	352	413	576	240	315	391	455	631
77	584	773	956	1,117	1,577	220	293	362	423	594	242	318	391	455	631
78	636	841	1,044	1,223	1,724	227	301	372	435	605	240	315	389	450	625
79	694	917	1,139	1,335	1,882	191	259	320	374	519	237	313	386	450	620
80	756	1,002	1,247	1,465	2,061	196	262	325	379	527	235	311	384	445	614
81	822	1,090	1,362	1,599	2,248	198	264	325	384	536	232	308	379	440	608
82	892	1,191	1,487	1,748	2,456	198	262	330	386	539	230	301	372	433	594
83	971	1,293	1,619	1,907	2,680	196	264	330	389	536	222	296	364	423	576
84	1,054	1,408	1,765	2,081	2,920	193	259	325	386	539	218	289	355	413	565
85	1,144	1,531	1,922	2,271	3,185	193	262	323	384	536	210	279	342	399	542

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
Current Annual Premium Rates for Policies Issued On or After 9/16/2002
Rates per $10 Daily Benefit

	Policy Form: HTQ11-338-MA-PA-601					**Rider: 11-SIP-PA-998**					**Rider: 11-CIP-PA-998**				
	Base Rates with No Inflation Protection					**Simple Inflation Protection Rider**					**Compound Inflation Protection Rider**				
Issue	**Benefit Period**					**Benefit Period**					**Benefit Period**				
Age	*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	34	39	42	46	69	15	20	22	27	40	59	71	81	93	130
40	34	39	44	49	75	17	22	24	27	40	64	76	83	95	130
41	37	42	46	51	78	17	22	24	29	43	64	78	86	98	133
42	37	44	49	54	81	20	24	27	32	46	68	78	88	100	138
43	39	46	51	56	84	22	24	27	32	49	68	81	90	103	141
44	42	49	54	59	86	22	27	29	34	52	71	83	93	108	147
45	44	51	56	64	92	22	27	32	34	52	71	86	95	108	147
46	44	54	59	66	95	27	29	34	39	58	76	88	100	112	153
47	46	56	61	68	101	27	32	37	42	58	78	90	103	115	156
48	49	59	64	73	104	29	34	39	42	63	81	95	108	117	161
49	54	61	68	76	110	29	37	42	46	66	81	98	110	122	164
50	56	64	71	81	115	32	39	44	49	66	81	98	110	120	161
51	56	66	73	81	115	32	39	42	49	69	83	100	110	125	167
52	59	68	76	86	121	34	42	46	51	72	83	100	112	125	164
53	61	73	81	90	127	37	44	49	56	75	88	103	115	127	170
54	66	78	86	95	133	39	46	54	59	81	90	105	120	132	176
55	71	83	90	103	141	42	49	56	61	86	93	110	122	134	179
56	76	88	98	110	150	44	54	59	66	89	95	112	125	139	184
57	81	95	105	117	159	46	56	64	71	95	98	115	127	142	187
58	86	100	112	125	170	51	61	66	76	101	103	120	132	147	193
59	93	108	120	132	182	54	66	71	81	104	103	125	137	154	196
60	95	112	125	139	187	56	66	73	81	110	105	125	137	152	196
61	103	122	134	149	199	59	68	78	86	115	108	127	139	156	202
62	110	130	144	159	213	64	76	81	93	121	112	132	144	161	205
63	120	139	154	171	228	66	78	88	98	127	112	134	147	164	210
64	127	149	166	183	242	71	83	90	103	133	117	139	152	169	216
65	139	161	178	198	259	73	88	98	108	141	120	144	156	174	222
66	156	183	203	225	294	83	98	108	117	153	132	154	169	186	236
67	169	198	218	242	314	88	103	112	125	161	134	156	174	191	242
68	183	213	235	259	337	90	108	117	132	167	137	161	176	196	248
69	198	230	252	279	363	95	112	125	137	173	139	166	181	200	251
70	213	249	271	301	389	100	115	130	142	179	144	166	186	203	254
71	242	281	308	342	438	110	130	142	154	196	154	181	198	218	274
72	259	303	333	367	467	115	132	144	161	202	159	183	200	222	277
73	279	325	357	394	499	117	137	149	164	208	159	186	203	225	280
74	298	347	381	421	530	122	142	154	169	210	161	188	205	225	280
75	320	372	403	445	556	120	139	154	166	208	159	183	200	220	274
76	364	423	460	506	631	130	152	166	181	225	171	196	215	235	291
77	394	455	494	543	674	132	154	169	186	228	171	198	218	237	291
78	423	489	531	582	723	137	156	171	188	228	171	198	218	237	288
79	455	526	570	626	772	115	134	147	159	193	174	200	218	237	288
80	491	567	616	672	827	117	134	144	161	193	176	203	218	240	291
81	531	611	660	724	885	117	134	147	156	193	176	203	220	237	288
82	575	658	712	775	948	115	134	144	159	193	174	203	218	237	288
83	621	712	765	834	1,017	115	134	144	156	190	174	200	218	235	282
84	670	768	824	895	1,089	117	132	144	154	187	174	198	215	232	282
85	724	826	885	961	1,167	115	132	142	152	182	174	198	213	230	277

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
Current Annual Premium Rates for Policies Issued On or After 9/16/2002
Rates per $10 Daily Benefit

	Policy Form: HTQ11-338-MA-PA-601					**Rider: 11-SIP-PA-998**					**Rider: 11-CIP-PA-998**				
	Base Rates with No Inflation Protection					**Simple Inflation Protection Rider**					**Compound Inflation Protection Rider**				
Issue	**Benefit Period**					**Benefit Period**					**Benefit Period**				
Age	*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	76	88	98	110	161	44	56	64	71	107	205	247	274	306	415
40	78	90	100	112	167	49	59	68	78	112	208	249	279	313	421
41	81	95	105	117	173	51	61	71	81	118	213	252	281	315	424
42	83	98	110	122	182	54	66	73	83	118	215	257	284	318	424
43	88	103	115	127	187	56	68	76	88	124	215	257	286	320	429
44	90	108	120	134	193	59	71	81	90	133	218	259	289	320	432
45	95	110	125	139	202	61	76	83	95	135	220	264	291	325	432
46	98	115	130	144	208	66	78	88	100	141	222	264	293	328	435
47	103	120	134	149	216	68	83	93	105	147	222	267	296	330	438
48	108	125	139	156	225	71	88	98	110	150	220	264	291	323	421
49	110	132	147	164	231	76	90	100	112	159	222	262	291	325	432
50	112	134	149	166	233	78	90	103	115	159	222	262	289	323	421
51	117	137	152	171	242	78	95	105	117	161	222	264	293	328	432
52	117	139	154	174	242	81	95	108	120	164	225	264	293	325	424
53	125	147	161	181	251	83	100	112	127	173	220	264	293	325	432
54	130	154	169	191	262	88	105	117	130	176	218	257	286	318	415
55	137	161	178	198	274	90	108	122	137	182	218	259	286	320	412
56	142	169	186	208	285	98	115	127	142	187	220	259	289	320	412
57	149	176	196	218	297	100	120	132	147	193	220	262	286	320	412
58	156	186	205	227	308	105	122	137	154	202	222	259	286	320	412
59	164	193	215	240	320	108	130	142	156	210	215	254	279	308	395
60	166	196	218	242	323	108	127	139	156	205	220	259	284	315	409
61	174	205	227	252	337	112	132	144	164	210	213	252	274	306	389
62	183	215	237	264	352	115	137	152	166	216	213	249	274	306	386
63	193	225	249	276	366	117	139	154	171	222	210	249	274	303	386
64	203	237	262	289	380	120	142	156	176	228	210	247	271	301	383
65	213	249	274	303	398	125	147	161	181	233	210	247	271	301	380
66	235	276	303	335	438	134	156	174	193	248	220	257	284	313	395
67	247	289	318	352	458	137	161	176	196	251	218	257	279	308	389
68	259	303	333	367	476	139	164	181	200	254	215	252	276	308	386
69	271	318	347	386	496	142	166	183	200	257	213	249	274	301	380
70	284	333	364	403	519	144	169	186	203	257	213	247	271	298	372
71	315	369	403	445	571	152	178	196	218	271	220	257	281	313	386
72	330	386	423	467	594	154	178	196	218	271	218	254	276	306	380
73	345	403	440	487	617	154	181	198	218	271	215	249	274	301	372
74	362	421	460	509	640	154	181	198	215	268	210	247	269	293	363
75	377	435	474	523	654	149	174	191	208	259	200	235	254	279	343
76	418	487	528	582	726	159	183	203	220	271	210	242	267	291	355
77	443	511	557	611	761	159	186	200	220	271	205	240	259	286	349
78	467	540	587	645	798	159	183	200	218	268	203	235	257	279	340
79	494	572	621	680	839	132	154	166	181	222	200	230	249	274	334
80	526	606	658	719	885	132	152	164	181	219	198	230	247	271	329
81	560	645	699	763	934	130	149	159	176	213	196	225	242	264	323
82	599	687	743	809	989	127	149	159	174	213	191	222	237	259	314
83	641	734	792	861	1,052	127	147	156	171	205	188	220	232	254	306
84	687	785	844	917	1,115	122	144	154	169	202	186	215	232	252	303
85	736	841	902	978	1,187	122	139	149	164	193	186	210	225	245	294

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
Current Annual Premium Rates for Policies Issued On or After 9/16/2002
Rates per $10 Daily Benefit

	Policy Form: HTQ11-338-MA-PA-601					**Rider: 11-SIP-PA-998**					**Rider: 11-CIP-PA-998**				
	Base Rates with No Inflation Protection					**Simple Inflation Protection Rider**					**Compound Inflation Protection Rider**				
Issue	**Benefit Period**					**Benefit Period**					**Benefit Period**				
Age	*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	46	54	59	66	98	27	34	39	44	63	122	147	164	183	248
40	46	56	61	68	101	29	34	42	46	69	125	149	166	186	251
41	49	59	64	73	107	32	37	44	46	69	127	149	169	186	251
42	51	61	66	76	110	32	39	44	49	72	127	152	171	188	257
43	54	64	71	78	115	34	42	46	54	75	130	154	171	193	257
44	56	66	73	81	118	34	42	49	56	81	130	156	174	196	259
45	59	68	76	86	124	37	44	51	56	81	132	159	176	196	262
46	61	71	78	88	130	39	49	54	61	84	134	161	178	198	262
47	64	76	83	93	133	42	49	56	64	89	134	161	178	200	265
48	66	78	86	98	138	44	51	61	66	92	137	164	183	200	265
49	68	81	90	103	144	46	56	61	68	98	137	161	178	198	262
50	71	83	93	105	147	49	59	64	71	98	137	164	181	200	265
51	73	86	95	108	150	49	59	66	73	101	137	164	181	200	265
52	76	88	98	110	153	49	61	68	76	104	137	164	183	203	268
53	78	93	103	115	161	54	64	71	81	107	137	161	178	200	262
54	83	98	110	122	170	56	66	73	83	110	137	164	178	200	259
55	88	103	115	130	176	59	71	78	86	118	139	166	181	200	265
56	93	110	122	134	184	61	73	81	93	124	142	166	183	205	265
57	98	115	127	144	193	66	78	86	95	127	142	169	186	205	268
58	105	122	134	152	205	66	81	90	100	133	142	171	188	208	268
59	110	130	144	159	216	71	86	93	105	135	144	171	188	210	268
60	115	134	147	164	219	71	86	95	108	141	142	169	186	205	265
61	120	142	156	174	233	76	90	100	110	144	144	171	186	208	265
62	127	152	166	186	245	81	93	103	115	150	147	171	188	208	268
63	137	159	176	196	259	81	98	108	120	156	147	174	191	210	268
64	144	171	188	208	274	86	100	110	125	161	149	174	191	213	271
65	154	181	200	222	291	90	108	115	130	167	152	178	193	213	271
66	174	203	222	247	323	98	115	127	142	182	159	188	205	227	288
67	186	218	240	264	343	100	120	130	147	187	161	188	205	230	291
68	198	232	254	281	366	105	125	137	152	190	164	191	210	232	291
69	213	247	271	301	389	108	130	142	156	196	164	193	210	232	291
70	227	264	291	323	415	112	132	144	159	202	166	196	213	232	291
71	257	298	328	362	464	122	144	156	174	216	176	205	225	247	308
72	274	320	350	386	493	125	147	161	178	222	176	205	225	249	308
73	291	340	372	411	522	130	152	166	183	225	178	208	227	249	308
74	311	362	396	438	550	132	154	169	186	231	178	208	227	249	308
75	330	384	418	460	576	132	152	166	183	225	176	203	220	242	300
76	377	435	474	521	651	139	164	178	196	239	183	215	232	257	314
77	403	467	509	557	695	142	166	181	198	242	183	215	232	257	311
78	433	501	543	597	738	144	166	183	200	245	186	213	232	254	311
79	465	535	582	638	787	122	142	154	169	208	183	215	232	252	308
80	499	577	626	685	842	122	142	154	166	205	186	213	230	252	306
81	538	619	670	734	896	125	142	154	166	205	183	213	230	249	306
82	579	665	719	785	960	122	142	152	166	199	183	213	227	247	300
83	623	716	773	841	1,026	122	139	149	164	196	183	210	225	245	297
84	672	770	829	900	1,095	120	139	147	164	193	183	210	222	245	294
85	726	829	890	963	1,170	120	137	144	159	190	181	208	220	240	288

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					**Rider: 11-SIP-PA-998**					**Rider: 11-CIP-PA-998**				
	Base Rates with No Inflation Protection					**Simple Inflation Protection Rider**					**Compound Inflation Protection Rider**				
Issue	**Benefit Period**					**Benefit Period**					**Benefit Period**				
Age	*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	29	32	37	147	23	28	37	42	114	116	149	186	209	522
40	24	29	34	39	155	28	37	42	46	123	126	158	191	218	541
41	27	32	37	42	163	28	37	46	51	133	126	163	200	228	560
42	29	34	39	44	179	28	37	46	56	142	130	167	205	237	579
43	29	37	42	46	187	33	42	51	60	161	139	177	214	246	608
44	32	39	44	49	204	37	46	56	65	171	144	181	223	256	627
45	34	42	46	54	220	37	46	65	70	180	149	191	232	265	646
46	37	44	51	56	236	42	56	65	79	190	153	195	237	279	664
47	39	46	54	61	253	46	60	74	84	209	158	205	251	288	693
48	42	49	59	66	269	46	65	79	88	228	163	214	256	298	721
49	44	54	64	71	293	56	70	84	98	247	172	223	265	307	740
50	46	56	68	76	310	60	79	93	107	275	177	228	270	316	759
51	46	59	68	78	318	60	74	93	107	266	181	228	279	316	769
52	51	64	73	83	342	65	84	102	121	294	181	232	284	325	778
53	54	68	81	90	375	74	88	112	130	313	191	242	293	339	807
54	59	73	88	100	399	79	98	116	135	342	195	251	302	349	845
55	64	81	95	108	440	84	107	130	149	370	205	260	316	363	873
56	68	86	103	117	472	93	116	144	163	399	214	274	330	377	911
57	76	95	112	130	521	98	126	153	172	427	218	279	339	390	930
58	83	103	122	139	562	102	135	167	191	465	223	293	353	409	978
59	90	112	134	154	619	112	149	177	205	494	232	302	367	423	1,006
60	95	120	144	164	652	121	153	186	214	532	237	307	372	428	1,025
61	103	132	156	178	717	130	163	205	232	560	246	316	386	446	1,054
62	112	144	171	196	782	139	177	218	251	608	256	330	400	460	1,092
63	125	156	188	215	855	149	195	232	270	646	265	344	414	479	1,130
64	134	171	205	237	937	163	209	251	288	683	279	358	432	493	1,168
65	149	191	227	262	1,026	172	218	270	307	740	288	367	451	511	1,225
66	171	218	264	301	1,189	195	251	302	349	826	311	404	488	563	1,319
67	188	240	288	330	1,295	205	265	321	372	883	321	418	507	581	1,376
68	205	264	318	364	1,426	218	279	339	390	930	335	432	521	600	1,414
69	225	288	347	398	1,556	232	298	363	418	987	349	446	544	623	1,462
70	247	318	384	440	1,711	246	316	381	437	1,035	358	460	558	642	1,509
71	286	369	445	511	1,980	274	349	428	488	1,158	390	502	609	697	1,642
72	313	403	489	560	2,175	284	367	446	516	1,206	400	516	623	721	1,680
73	342	442	533	613	2,379	298	381	470	539	1,263	409	525	642	739	1,728
74	374	481	584	670	2,591	307	400	488	563	1,319	418	539	655	758	1,766
75	403	516	623	716	2,753	307	404	493	563	1,319	409	535	651	744	1,747
76	467	601	728	836	3,218	344	446	539	623	1,452	446	581	702	809	1,889
77	511	660	799	919	3,527	353	456	558	642	1,509	456	586	716	823	1,927
78	560	723	877	1,009	3,870	363	470	572	660	1,547	456	595	725	837	1,946
79	611	792	960	1,107	4,236	311	404	493	567	1,329	465	600	735	846	1,975
80	670	868	1,056	1,217	4,660	321	414	502	586	1,357	474	618	748	865	2,012
81	731	951	1,156	1,334	5,100	321	414	511	586	1,367	479	618	753	874	2,031
82	797	1,036	1,264	1,459	5,572	325	423	511	595	1,367	479	623	758	879	2,041
83	868	1,129	1,378	1,593	6,077	321	423	511	595	1,376	479	628	762	883	2,050
84	946	1,232	1,503	1,740	6,631	321	418	516	595	1,376	479	628	767	888	2,060
85	1,029	1,342	1,640	1,901	7,234	321	414	507	586	1,367	479	628	767	888	2,069

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					**Rider: 11-SIP-PA-998**					**Rider: 11-CIP-PA-998**				
	Base Rates with No Inflation Protection					**Simple Inflation Protection Rider**					**Compound Inflation Protection Rider**				
Issue	**Benefit Period**					**Benefit Period**					**Benefit Period**				
Age	*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	73	86	95	391	79	98	121	139	351	437	558	674	776	1,880
40	61	76	88	100	407	84	107	130	149	380	442	567	688	790	1,918
41	66	81	95	108	432	88	112	135	158	408	446	576	697	800	1,946
42	68	86	100	112	456	93	121	144	172	427	456	586	707	818	1,975
43	73	90	105	120	489	98	126	158	181	456	460	595	721	827	1,993
44	76	95	112	127	513	107	135	163	191	484	470	604	730	837	2,031
45	81	100	117	134	546	112	144	177	205	513	474	614	744	851	2,050
46	86	105	125	142	578	116	153	186	218	541	479	623	753	865	2,079
47	90	110	132	152	611	126	167	200	228	579	488	632	762	874	2,107
48	95	117	139	159	652	135	177	214	246	608	493	642	776	888	2,136
49	100	125	149	169	684	144	186	223	265	655	483	628	758	874	2,098
50	103	130	156	178	717	153	195	237	274	683	497	637	767	883	2,126
51	105	132	156	181	733	153	200	242	274	683	493	637	772	883	2,117
52	110	139	166	188	766	163	205	251	293	712	497	642	776	897	2,145
53	117	147	176	200	815	167	223	265	311	759	488	632	762	879	2,098
54	125	156	188	215	864	177	232	284	325	807	493	637	772	888	2,126
55	132	166	200	230	921	191	246	298	344	845	497	646	776	893	2,145
56	139	178	213	244	978	205	260	316	363	892	502	646	786	902	2,164
57	149	188	227	259	1,043	214	279	335	386	940	507	655	795	916	2,183
58	159	200	242	276	1,116	223	293	353	409	978	511	660	800	920	2,193
59	169	215	257	296	1,181	237	302	372	428	1,035	507	655	800	916	2,174
60	174	220	264	303	1,214	237	311	377	432	1,044	507	655	795	911	2,174
61	183	235	284	325	1,295	251	325	390	451	1,092	502	651	786	902	2,145
62	196	249	301	347	1,377	260	339	414	470	1,139	507	655	790	907	2,155
63	208	266	323	369	1,466	274	353	428	493	1,177	507	655	790	911	2,164
64	222	284	342	393	1,556	284	367	446	511	1,234	507	655	795	916	2,164
65	237	303	367	420	1,662	293	381	465	535	1,272	511	660	800	920	2,174
66	266	342	413	474	1,866	321	414	507	586	1,395	539	697	846	972	2,297
67	284	364	440	506	1,988	330	428	521	600	1,424	535	697	846	972	2,288
68	301	386	469	538	2,110	339	442	535	618	1,462	539	697	841	972	2,288
69	320	413	499	574	2,240	349	451	553	632	1,500	535	693	841	967	2,288
70	340	440	533	611	2,387	358	460	563	651	1,528	535	693	837	967	2,269
71	384	496	601	692	2,688	386	502	609	702	1,661	563	730	888	1,023	2,411
72	408	528	640	738	2,859	390	511	618	716	1,690	558	725	883	1,013	2,392
73	435	562	682	785	3,047	395	516	628	725	1,709	553	721	879	1,013	2,373
74	459	596	723	836	3,234	404	525	637	735	1,728	553	716	874	999	2,345
75	481	621	753	865	3,332	390	511	618	716	1,680	525	683	832	962	2,250
76	547	706	858	987	3,813	418	549	669	772	1,804	553	725	883	1,018	2,373
77	584	758	921	1,061	4,081	423	553	669	776	1,823	553	716	869	1,009	2,354
78	626	811	987	1,139	4,375	428	558	679	786	1,832	549	711	865	999	2,335
79	672	873	1,061	1,224	4,700	358	470	576	665	1,547	539	702	860	995	2,316
80	723	941	1,146	1,325	5,067	358	470	572	660	1,547	539	697	855	986	2,307
81	780	1,012	1,234	1,427	5,458	358	470	572	660	1,538	530	693	846	981	2,278
82	838	1,092	1,332	1,542	5,890	353	460	567	655	1,519	525	683	841	967	2,259
83	902	1,176	1,437	1,664	6,346	349	460	558	646	1,509	525	683	832	962	2,240
84	973	1,268	1,552	1,799	6,851	344	451	553	642	1,490	521	679	827	953	2,231
85	1,051	1,371	1,679	1,945	7,413	339	446	544	632	1,471	511	669	818	948	2,202

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					**Rider: 11-SIP-PA-998**					**Rider: 11-CIP-PA-998**				
	Base Rates with No Inflation Protection					**Simple Inflation Protection Rider**					**Compound Inflation Protection Rider**				
Issue	**Benefit Period**					**Benefit Period**					**Benefit Period**				
Age	*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	37	44	51	56	236	46	60	70	84	209	256	330	400	460	1,111
40	37	46	54	61	244	51	60	79	88	228	265	335	409	470	1,130
41	39	49	56	64	261	56	65	84	98	237	270	344	418	479	1,149
42	42	51	61	68	277	56	70	84	102	256	270	349	418	483	1,168
43	44	54	64	73	293	60	79	93	107	275	274	358	428	493	1,187
44	46	56	68	76	310	65	84	98	116	294	279	363	437	502	1,215
45	49	61	71	81	334	70	88	107	126	304	284	367	446	511	1,225
46	51	64	76	86	350	74	93	112	130	323	293	377	451	521	1,244
47	54	68	81	90	375	79	98	121	139	342	298	381	460	530	1,263
48	59	73	86	98	399	79	102	130	149	361	298	386	470	535	1,282
49	61	76	90	103	424	88	116	139	163	389	302	390	470	544	1,291
50	66	81	98	110	448	93	121	144	172	418	298	386	460	535	1,282
51	66	81	98	110	448	93	121	144	172	418	307	400	479	553	1,319
52	68	88	103	117	481	102	126	158	181	437	302	386	474	544	1,291
53	73	93	110	127	513	107	135	167	191	465	307	390	474	544	1,301
54	78	100	117	134	546	116	144	181	205	503	311	395	483	558	1,319
55	83	105	127	144	587	121	158	191	218	532	316	409	488	563	1,338
56	90	115	137	156	627	126	163	200	232	560	321	409	497	572	1,367
57	98	122	147	169	676	135	177	214	246	598	321	418	507	581	1,386
58	103	132	156	181	725	149	186	228	260	627	330	423	516	590	1,405
59	112	142	169	193	774	153	200	242	279	674	335	432	525	604	1,433
60	117	149	178	203	815	158	205	246	288	693	330	428	516	595	1,414
61	125	159	193	220	880	172	218	260	302	721	339	437	525	604	1,433
62	134	174	208	237	945	181	228	279	321	769	344	442	535	614	1,452
63	147	186	225	257	1,018	186	242	293	339	807	349	451	544	623	1,481
64	156	200	242	279	1,100	200	260	311	358	854	358	460	553	632	1,500
65	171	218	262	301	1,189	209	274	330	377	892	363	470	567	651	1,528
66	193	249	301	345	1,352	232	298	363	414	987	386	497	600	693	1,633
67	210	269	325	374	1,458	242	316	381	437	1,044	395	507	614	702	1,671
68	227	293	352	406	1,580	256	325	400	456	1,092	400	516	628	716	1,690
69	247	318	384	440	1,719	265	344	418	479	1,130	409	525	637	730	1,718
70	269	345	418	479	1,866	279	363	437	502	1,177	414	535	646	744	1,747
71	308	396	479	552	2,143	307	395	483	549	1,301	442	576	697	800	1,880
72	335	430	523	599	2,330	316	414	497	576	1,348	451	586	707	818	1,908
73	364	469	567	653	2,525	325	423	521	595	1,395	456	590	721	827	1,937
74	393	508	616	709	2,737	339	442	535	614	1,443	460	600	730	837	1,965
75	420	543	655	753	2,900	339	437	535	614	1,433	456	586	716	823	1,918
76	486	628	760	875	3,364	367	479	586	674	1,576	488	632	767	883	2,069
77	530	684	831	956	3,674	377	493	600	693	1,614	488	637	776	893	2,079
78	577	745	907	1,044	4,000	386	507	614	711	1,661	493	646	781	902	2,107
79	628	814	990	1,139	4,366	330	432	525	609	1,414	497	646	786	911	2,117
80	684	887	1,080	1,246	4,774	335	442	539	618	1,433	502	655	795	920	2,136
81	745	968	1,178	1,361	5,206	335	442	539	623	1,443	502	651	800	920	2,145
82	809	1,053	1,283	1,484	5,662	339	437	539	623	1,462	502	655	800	925	2,155
83	877	1,144	1,396	1,615	6,159	339	442	539	623	1,452	502	655	800	925	2,155
84	953	1,242	1,518	1,760	6,696	335	442	535	618	1,443	502	655	800	925	2,155
85	1,034	1,349	1,650	1,914	7,283	330	437	535	618	1,433	502	655	800	925	2,155

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					**Rider: 11-SIP-PA-998**					**Rider: 11-CIP-PA-998**				
	Base Rates with No Inflation Protection					**Simple Inflation Protection Rider**					**Compound Inflation Protection Rider**				
Issue	**Benefit Period**					**Benefit Period**					**Benefit Period**				
Age	*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	39	46	51	228	37	46	56	70	180	149	191	232	274	693
40	34	42	49	56	244	37	51	60	70	190	153	200	242	279	712
41	37	44	51	59	253	42	56	70	79	209	158	205	256	293	740
42	39	46	56	64	269	42	51	70	84	228	163	214	260	302	769
43	42	49	59	68	293	46	65	79	88	237	167	223	270	311	788
44	44	54	64	71	310	51	65	84	98	256	172	228	279	325	816
45	46	56	66	76	334	56	74	93	107	275	181	237	293	339	845
46	49	61	71	83	350	60	74	98	112	294	186	242	302	344	873
47	51	64	76	88	375	65	88	107	121	323	195	256	311	363	911
48	56	68	83	95	407	70	93	112	130	342	200	265	321	372	930
49	59	73	88	103	432	74	98	121	139	370	209	274	335	386	968
50	64	78	95	110	464	84	107	130	149	399	209	279	339	390	978
51	64	81	95	110	472	84	107	135	153	399	218	279	344	400	997
52	68	86	105	120	505	88	116	139	167	427	218	284	344	400	1,006
53	73	93	112	130	546	98	126	153	177	456	228	293	358	414	1,035
54	81	100	122	139	595	102	135	163	195	484	232	307	372	432	1,063
55	86	110	132	152	635	112	144	177	209	532	242	311	386	446	1,111
56	93	117	144	164	692	121	158	191	228	570	251	325	395	465	1,139
57	100	130	156	178	749	130	167	205	242	608	260	335	409	479	1,177
58	110	139	169	196	815	139	181	223	256	646	265	349	428	493	1,215
59	120	152	183	213	880	149	195	242	279	702	274	358	442	507	1,253
60	125	161	196	225	937	158	205	251	293	721	279	363	442	516	1,263
61	137	176	213	247	1,018	167	218	270	311	778	288	372	460	530	1,301
62	149	191	232	269	1,108	177	237	288	335	826	293	386	474	544	1,338
63	161	208	254	293	1,206	191	251	307	358	883	307	400	483	563	1,376
64	176	227	276	320	1,312	205	265	330	381	940	316	409	502	581	1,414
65	193	249	303	349	1,434	218	284	353	409	1,006	325	423	521	604	1,471
66	220	286	347	403	1,646	246	321	395	456	1,120	353	460	567	651	1,585
67	242	313	381	440	1,792	256	339	418	488	1,187	358	470	581	674	1,633
68	264	340	415	481	1,955	270	363	446	516	1,263	367	488	600	693	1,680
69	286	371	455	528	2,134	288	381	470	544	1,329	381	502	614	711	1,718
70	313	408	499	579	2,338	302	400	493	572	1,395	390	511	628	730	1,766
71	359	469	577	670	2,696	339	446	549	637	1,557	423	553	679	786	1,908
72	393	513	631	733	2,949	349	465	572	665	1,623	428	563	693	804	1,946
73	428	560	689	799	3,218	363	483	595	697	1,690	432	572	702	823	1,975
74	464	609	750	873	3,503	381	502	623	725	1,756	442	581	716	832	2,003
75	496	648	797	929	3,707	381	507	628	725	1,766	432	572	702	814	1,956
76	574	753	929	1,083	4,326	418	558	688	804	1,956	460	609	753	874	2,107
77	628	826	1,019	1,190	4,749	428	572	711	832	2,012	460	614	758	879	2,107
78	684	904	1,119	1,308	5,206	446	590	730	855	2,079	465	614	758	879	2,117
79	748	990	1,227	1,435	5,711	381	507	628	739	1,785	465	609	758	883	2,107
80	821	1,088	1,352	1,584	6,297	390	516	642	753	1,832	465	614	758	883	2,117
81	895	1,188	1,481	1,738	6,908	390	525	651	767	1,851	465	609	753	874	2,088
82	975	1,300	1,620	1,906	7,568	395	525	655	772	1,870	456	600	744	860	2,050
83	1,063	1,418	1,772	2,087	8,285	395	530	660	772	1,870	446	590	730	846	2,003
84	1,158	1,547	1,938	2,285	9,067	395	530	660	776	1,870	437	576	707	823	1,946
85	1,261	1,689	2,117	2,500	9,922	390	525	655	776	1,870	428	558	688	800	1,880

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					**Rider: 11-SIP-PA-998**					**Rider: 11-CIP-PA-998**				
	Base Rates with No Inflation Protection					**Simple Inflation Protection Rider**					**Compound Inflation Protection Rider**				
Issue	**Benefit Period**					**Benefit Period**					**Benefit Period**				
Age	*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	81	100	120	137	595	112	144	177	205	541	530	688	846	981	2,449
40	83	105	127	144	627	121	153	186	218	570	539	702	855	995	2,478
41	88	110	132	154	660	126	163	200	228	608	544	711	869	1,004	2,516
42	93	117	139	161	692	130	172	214	246	646	553	721	883	1,023	2,554
43	98	122	149	171	733	139	181	223	260	674	558	730	893	1,032	2,582
44	103	130	156	181	774	149	191	237	274	712	567	739	907	1,046	2,611
45	108	137	166	191	815	158	205	246	293	759	576	748	916	1,060	2,648
46	115	144	174	200	864	163	218	265	311	797	581	758	930	1,079	2,677
47	120	154	186	213	912	177	228	279	325	845	590	762	934	1,088	2,705
48	127	161	196	225	961	186	242	298	349	892	595	776	948	1,102	2,734
49	134	171	208	240	1,018	195	256	311	367	940	581	758	930	1,079	2,667
50	139	178	218	249	1,059	205	265	325	381	978	590	767	939	1,092	2,715
51	142	181	220	254	1,075	209	270	330	386	997	586	767	939	1,088	2,696
52	149	188	230	266	1,124	214	284	344	400	1,025	595	776	948	1,102	2,734
53	156	200	244	281	1,189	228	298	363	428	1,082	581	758	930	1,079	2,658
54	166	213	259	301	1,263	242	316	386	446	1,130	586	762	934	1,083	2,677
55	176	227	276	318	1,336	251	330	404	474	1,196	590	767	939	1,092	2,696
56	186	240	293	340	1,417	270	349	428	493	1,253	595	776	948	1,097	2,715
57	198	254	310	359	1,499	279	367	451	525	1,319	595	781	953	1,106	2,724
58	210	271	330	384	1,597	293	381	470	544	1,376	595	781	958	1,111	2,734
59	222	288	352	406	1,686	307	400	493	576	1,443	590	767	944	1,102	2,696
60	227	293	359	418	1,727	311	404	497	576	1,443	590	772	944	1,092	2,696
61	242	313	381	442	1,833	321	423	521	604	1,500	576	758	934	1,083	2,648
62	257	332	406	472	1,939	335	437	539	628	1,566	576	758	934	1,079	2,648
63	271	352	430	501	2,061	349	456	563	651	1,623	581	758	934	1,079	2,639
64	288	374	457	530	2,183	358	474	586	679	1,680	576	758	930	1,083	2,639
65	306	398	489	567	2,322	372	488	604	702	1,737	576	758	930	1,079	2,630
66	342	445	545	635	2,591	404	535	660	767	1,899	604	795	981	1,134	2,772
67	362	472	579	675	2,745	418	549	679	790	1,946	600	790	976	1,130	2,753
68	384	501	616	716	2,908	428	563	693	809	1,993	595	786	967	1,120	2,734
69	406	530	653	760	3,087	437	576	711	827	2,031	590	781	962	1,116	2,705
70	430	565	694	809	3,275	446	586	725	846	2,079	586	772	953	1,102	2,677
71	481	633	782	912	3,682	479	632	781	916	2,250	614	809	995	1,158	2,819
72	511	672	829	968	3,910	483	642	800	930	2,278	604	795	986	1,144	2,772
73	540	711	880	1,029	4,147	493	651	809	944	2,307	595	786	972	1,130	2,734
74	572	755	934	1,092	4,391	497	655	818	953	2,326	586	772	958	1,111	2,686
75	594	782	965	1,127	4,513	483	642	795	930	2,259	558	735	907	1,055	2,544
76	672	887	1,100	1,286	5,157	516	688	855	999	2,430	581	767	948	1,106	2,658
77	719	951	1,178	1,381	5,523	521	693	865	1,009	2,459	567	753	930	1,083	2,611
78	770	1,019	1,266	1,484	5,931	521	697	869	1,018	2,468	558	735	911	1,060	2,544
79	824	1,095	1,361	1,596	6,370	446	586	735	865	2,098	549	716	888	1,041	2,487
80	887	1,180	1,471	1,728	6,884	442	590	735	865	2,098	535	707	869	1,018	2,440
81	953	1,271	1,586	1,867	7,430	442	586	730	855	2,088	525	688	851	990	2,364
82	1,026	1,371	1,713	2,019	8,032	442	581	730	855	2,069	507	669	827	962	2,288
83	1,107	1,479	1,853	2,185	8,684	428	581	721	846	2,050	493	651	800	930	2,212
84	1,195	1,598	2,004	2,368	9,401	428	572	711	837	2,031	474	628	772	897	2,126
85	1,290	1,730	2,170	2,569	10,191	418	558	707	827	2,003	460	600	744	860	2,031

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					**Rider: 11-SIP-PA-998**					**Rider: 11-CIP-PA-998**				
	Base Rates with No Inflation Protection					**Simple Inflation Protection Rider**					**Compound Inflation Protection Rider**				
Issue	**Benefit Period**					**Benefit Period**					**Benefit Period**				
Age	*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	49	61	71	83	358	65	84	107	121	323	316	409	502	581	1,443
40	51	64	76	88	375	70	93	112	130	342	321	418	511	586	1,471
41	54	66	81	93	399	74	98	116	135	361	325	423	516	600	1,490
42	56	71	86	98	415	79	102	126	144	389	330	428	525	609	1,519
43	59	76	90	103	440	84	107	130	158	408	339	432	516	618	1,538
44	64	78	95	110	464	88	116	139	163	437	339	446	539	628	1,566
45	66	83	100	115	497	93	126	149	177	446	344	451	549	637	1,576
46	71	88	108	122	521	98	130	158	186	484	349	456	558	646	1,604
47	73	93	112	130	554	107	139	172	200	513	358	465	567	655	1,623
48	78	100	120	139	587	112	144	181	209	541	363	470	576	665	1,652
49	83	105	127	147	619	121	158	191	223	579	363	474	576	669	1,652
50	88	112	134	156	660	126	163	205	232	598	358	465	572	655	1,633
51	88	112	134	156	660	126	163	205	237	608	367	479	590	679	1,680
52	93	120	144	166	701	135	172	214	251	636	363	470	576	665	1,652
53	100	127	154	178	749	139	186	228	260	664	363	470	576	665	1,642
54	105	134	164	191	798	153	200	242	279	702	367	479	586	674	1,661
55	112	144	176	203	847	163	209	256	298	750	372	483	590	688	1,690
56	120	154	188	218	904	172	223	270	311	788	377	493	600	693	1,709
57	130	166	200	232	969	177	232	288	335	835	381	497	609	707	1,728
58	137	176	215	249	1,035	191	251	302	353	883	386	507	618	711	1,747
59	147	191	230	266	1,108	200	260	325	372	930	390	507	628	725	1,766
60	154	198	242	279	1,157	205	270	330	386	949	386	502	614	716	1,747
61	166	213	259	301	1,238	214	284	349	404	1,006	386	511	623	721	1,766
62	178	230	279	323	1,328	228	298	367	428	1,054	390	516	632	730	1,785
63	191	247	301	347	1,426	242	311	386	451	1,111	400	521	637	739	1,804
64	205	264	323	374	1,532	251	335	409	474	1,168	404	530	646	748	1,823
65	220	286	349	406	1,654	265	349	428	493	1,215	409	535	655	758	1,842
66	249	325	396	459	1,866	293	381	474	549	1,348	437	567	697	809	1,975
67	269	349	428	496	2,012	307	400	493	572	1,414	442	576	707	818	1,993
68	291	379	464	538	2,175	321	418	516	600	1,471	446	581	716	827	2,012
69	313	408	501	582	2,354	335	437	539	628	1,528	451	590	725	841	2,031
70	340	442	545	631	2,550	344	456	558	655	1,595	456	600	730	851	2,050
71	386	506	623	723	2,916	381	502	614	721	1,756	483	637	781	907	2,193
72	418	547	675	787	3,161	395	521	642	744	1,813	488	642	790	911	2,212
73	452	594	733	853	3,421	404	535	660	772	1,880	488	646	790	920	2,231
74	489	643	792	924	3,707	418	553	683	795	1,937	493	646	800	925	2,231
75	518	682	838	978	3,902	418	549	683	795	1,937	479	628	781	902	2,174
76	599	787	973	1,134	4,538	451	600	744	874	2,107	507	669	823	962	2,307
77	650	858	1,061	1,242	4,953	465	618	767	893	2,174	507	669	827	958	2,307
78	706	934	1,158	1,356	5,409	479	637	786	920	2,221	507	669	823	953	2,288
79	770	1,019	1,266	1,484	5,906	404	544	674	790	1,908	502	660	814	948	2,269
80	838	1,114	1,386	1,625	6,468	414	549	683	804	1,937	497	655	809	944	2,250
81	912	1,212	1,513	1,777	7,063	418	553	688	809	1,956	493	651	800	930	2,221
82	992	1,322	1,650	1,941	7,715	414	553	697	818	1,965	483	637	786	916	2,174
83	1,078	1,437	1,799	2,119	8,415	414	558	693	818	1,965	470	623	767	893	2,117
84	1,171	1,564	1,960	2,312	9,173	409	549	688	814	1,965	460	609	748	869	2,060
85	1,271	1,701	2,134	2,522	10,004	409	549	683	814	1,956	446	586	725	841	1,984

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				
	Benefit Period					Benefit Period					Benefit Period				
Issue Age	*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	29	34	42	46	204	33	42	51	60	161	135	172	209	246	627
40	32	37	44	51	220	33	46	56	60	171	135	181	218	251	646
41	34	39	46	54	228	37	51	60	70	190	139	186	228	260	664
42	34	42	51	56	244	42	46	60	79	199	149	195	232	274	693
43	37	44	54	61	261	42	60	70	79	218	153	200	242	284	712
44	39	49	56	64	277	46	56	79	88	237	158	205	251	293	740
45	42	51	59	68	301	51	65	84	98	247	163	214	265	307	759
46	44	56	64	76	318	56	65	88	98	266	167	214	274	307	788
47	46	56	68	78	334	60	84	98	112	294	177	232	279	330	826
48	51	61	76	86	367	60	84	98	116	304	177	242	288	335	835
49	54	66	78	93	391	65	88	112	126	332	186	246	302	349	873
50	56	71	86	100	415	79	98	116	130	361	191	251	307	349	883
51	56	73	86	100	424	79	93	121	135	361	200	251	311	358	902
52	61	78	95	108	456	79	102	126	153	380	200	251	307	363	902
53	66	83	100	117	489	88	116	139	158	418	205	265	325	372	930
54	73	90	110	125	538	93	121	149	177	437	209	274	335	390	959
55	78	100	120	137	570	98	126	158	186	484	214	279	344	400	1,006
56	83	105	130	147	627	112	144	172	205	513	228	293	358	418	1,025
57	90	117	142	161	676	116	149	181	218	541	232	302	367	428	1,054
58	100	125	152	176	733	126	163	200	232	579	237	316	386	442	1,092
59	108	137	166	191	790	135	177	214	251	636	246	321	395	456	1,130
60	112	144	176	203	847	144	186	228	265	646	251	330	400	465	1,130
61	122	159	191	222	921	153	195	246	279	693	260	335	414	479	1,168
62	134	171	210	242	994	158	214	256	302	750	265	349	423	488	1,206
63	144	188	230	264	1,083	172	223	274	321	797	279	358	432	507	1,244
64	159	205	249	288	1,181	181	237	298	344	845	284	367	451	521	1,272
65	174	225	274	315	1,287	195	256	316	367	911	293	381	465	544	1,329
66	198	257	313	364	1,483	223	288	353	409	1,006	316	414	511	586	1,424
67	218	281	342	396	1,613	232	307	377	442	1,073	321	423	525	609	1,471
68	237	306	374	433	1,760	242	325	400	465	1,139	330	442	539	623	1,509
69	257	335	408	474	1,923	260	344	423	493	1,196	344	451	553	642	1,547
70	281	367	450	521	2,102	274	363	442	516	1,263	353	460	563	660	1,595
71	323	423	518	604	2,428	307	400	497	572	1,405	381	497	614	707	1,718
72	354	462	567	660	2,656	311	418	516	600	1,462	386	507	623	725	1,747
73	386	503	621	719	2,900	325	437	535	628	1,519	386	516	632	744	1,775
74	418	547	675	785	3,153	344	451	563	655	1,585	400	525	646	748	1,804
75	447	584	716	836	3,340	344	456	567	651	1,585	386	511	632	735	1,756
76	518	677	836	975	3,894	377	502	618	721	1,756	414	549	679	786	1,899
77	565	743	917	1,070	4,277	386	516	642	748	1,813	414	553	683	790	1,899
78	616	814	1,007	1,178	4,684	400	530	660	767	1,870	418	553	683	790	1,908
79	672	892	1,105	1,290	5,140	344	456	563	665	1,604	418	544	683	795	1,899
80	738	980	1,217	1,425	5,670	353	460	576	679	1,642	418	549	679	795	1,899
81	804	1,068	1,332	1,564	6,216	353	474	586	688	1,671	418	549	679	786	1,880
82	877	1,171	1,459	1,716	6,810	358	474	590	693	1,680	409	539	669	776	1,851
83	958	1,276	1,596	1,879	7,454	353	479	590	693	1,690	400	530	655	758	1,804
84	1,044	1,393	1,745	2,058	8,163	353	474	595	697	1,680	390	516	637	739	1,747
85	1,134	1,520	1,904	2,251	8,928	353	474	590	697	1,690	386	502	623	721	1,690

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					**Rider: 11-SIP-PA-998**					**Rider: 11-CIP-PA-998**				
	Base Rates with No Inflation Protection					**Simple Inflation Protection Rider**					**Compound Inflation Protection Rider**				
Issue	**Benefit Period**					**Benefit Period**					**Benefit Period**				
Age	*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	44	56	64	76	326	60	74	98	107	285	284	367	451	521	1,291
40	46	56	68	78	334	60	84	102	121	313	288	377	460	530	1,329
41	49	59	73	83	358	65	88	102	121	323	293	381	465	539	1,338
42	51	64	78	88	375	70	93	112	130	351	298	386	470	549	1,367
43	54	68	81	93	399	74	98	121	139	361	302	390	465	558	1,376
44	56	71	86	100	415	84	102	126	144	399	307	400	488	563	1,414
45	59	76	90	103	448	84	112	135	163	399	311	404	493	576	1,414
46	64	78	98	110	472	88	121	139	167	437	316	414	502	581	1,443
47	66	83	100	117	497	98	126	158	177	465	321	418	511	590	1,462
48	71	90	108	125	530	98	130	163	191	484	325	423	521	600	1,481
49	76	95	115	132	554	107	139	172	200	522	325	428	516	604	1,490
50	78	100	122	142	595	116	149	181	209	541	325	418	511	590	1,471
51	78	100	122	142	595	116	149	181	214	551	335	432	530	609	1,509
52	83	108	130	149	627	121	153	195	228	579	325	423	521	600	1,490
53	90	115	139	161	676	126	167	205	232	598	325	423	516	595	1,481
54	95	122	147	171	717	135	177	218	251	636	330	428	530	609	1,500
55	100	130	159	183	766	149	191	228	265	674	335	437	530	618	1,519
56	108	139	169	196	815	153	200	246	279	712	339	442	539	623	1,538
57	117	149	181	210	872	158	209	260	298	750	344	451	549	632	1,557
58	122	159	193	225	929	172	223	274	316	797	349	456	558	642	1,576
59	132	171	208	240	994	181	237	293	335	845	353	456	563	655	1,595
60	139	178	218	252	1,043	181	242	298	344	854	344	451	553	642	1,566
61	149	191	232	271	1,116	195	256	316	363	902	349	460	563	646	1,585
62	161	208	252	291	1,198	205	265	330	386	949	349	465	567	655	1,604
63	171	222	271	313	1,287	218	279	344	404	997	363	470	572	665	1,623
64	186	237	291	337	1,377	223	302	367	428	1,054	363	479	581	674	1,642
65	198	257	315	364	1,491	237	316	386	446	1,092	367	483	590	683	1,652
66	225	293	357	413	1,678	265	344	428	493	1,215	390	511	628	730	1,775
67	242	315	386	447	1,809	274	358	442	511	1,272	400	516	632	735	1,794
68	262	342	418	484	1,955	288	377	465	539	1,329	404	521	646	744	1,813
69	281	367	452	523	2,118	302	395	483	567	1,376	409	535	651	758	1,832
70	306	398	491	567	2,297	311	409	502	590	1,433	409	539	655	767	1,842
71	347	455	562	650	2,623	344	456	549	651	1,585	437	576	702	818	1,975
72	376	494	606	709	2,843	353	465	581	669	1,633	437	576	711	818	1,993
73	408	535	660	767	3,079	363	479	595	697	1,690	437	581	711	827	2,012
74	440	579	714	831	3,340	377	497	614	716	1,737	442	581	716	832	2,003
75	467	613	755	880	3,511	377	493	614	716	1,747	432	567	702	814	1,956
76	540	709	875	1,022	4,081	404	539	669	786	1,899	456	600	744	865	2,079
77	584	772	956	1,117	4,456	418	558	688	804	1,956	460	604	744	865	2,079
78	635	841	1,044	1,222	4,872	432	572	707	827	1,993	456	600	739	855	2,060
79	694	917	1,139	1,334	5,320	363	493	609	711	1,709	451	595	735	855	2,041
80	755	1,002	1,246	1,464	5,825	372	497	618	721	1,737	446	590	730	846	2,022
81	821	1,090	1,361	1,598	6,354	377	502	618	730	1,766	442	586	721	837	2,003
82	892	1,190	1,486	1,747	6,941	377	497	628	735	1,775	437	572	707	823	1,956
83	970	1,293	1,618	1,906	7,576	372	502	628	739	1,766	423	563	693	804	1,899
84	1,053	1,408	1,765	2,080	8,252	367	493	618	735	1,775	414	549	674	786	1,861
85	1,144	1,530	1,921	2,270	9,002	367	497	614	730	1,766	400	530	651	758	1,785

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					**Rider: 11-SIP-PA-998**					**Rider: 11-CIP-PA-998**				
	Base Rates with No Inflation Protection					**Simple Inflation Protection Rider**					**Compound Inflation Protection Rider**				
Issue	**Benefit Period**					**Benefit Period**					**Benefit Period**				
Age	*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	34	39	42	46	196	28	37	42	51	133	112	135	153	177	427
40	34	39	44	49	212	33	42	46	51	133	121	144	158	181	427
41	37	42	46	51	220	33	42	46	56	142	121	149	163	186	437
42	37	44	49	54	228	37	46	51	60	152	130	149	167	191	456
43	39	46	51	56	236	42	46	51	60	161	130	153	172	195	465
44	42	49	54	59	244	42	51	56	65	171	135	158	177	205	484
45	44	51	56	64	261	42	51	60	65	171	135	163	181	205	484
46	44	54	59	66	269	51	56	65	74	190	144	167	191	214	503
47	46	56	61	68	285	51	60	70	79	190	149	172	195	218	513
48	49	59	64	73	293	56	65	74	79	209	153	181	205	223	532
49	54	61	68	76	310	56	70	79	88	218	153	186	209	232	541
50	56	64	71	81	326	60	74	84	93	218	153	186	209	228	532
51	56	66	73	81	326	60	74	79	93	228	158	191	209	237	551
52	59	68	76	86	342	65	79	88	98	237	158	191	214	237	541
53	61	73	81	90	358	70	84	93	107	247	167	195	218	242	560
54	66	78	86	95	375	74	88	102	112	266	172	200	228	251	579
55	71	83	90	103	399	79	93	107	116	285	177	209	232	256	589
56	76	88	98	110	424	84	102	112	126	294	181	214	237	265	608
57	81	95	105	117	448	88	107	121	135	313	186	218	242	270	617
58	86	100	112	125	481	98	116	126	144	332	195	228	251	279	636
59	93	108	120	132	513	102	126	135	153	342	195	237	260	293	646
60	95	112	125	139	530	107	126	139	153	361	200	237	260	288	646
61	103	122	134	149	562	112	130	149	163	380	205	242	265	298	664
62	110	130	144	159	603	121	144	153	177	399	214	251	274	307	674
63	120	139	154	171	644	126	149	167	186	418	214	256	279	311	693
64	127	149	166	183	684	135	158	172	195	437	223	265	288	321	712
65	139	161	178	198	733	139	167	186	205	465	228	274	298	330	731
66	156	183	203	225	831	158	186	205	223	503	251	293	321	353	778
67	169	198	218	242	888	167	195	214	237	532	256	298	330	363	797
68	183	213	235	259	953	172	205	223	251	551	260	307	335	372	816
69	198	230	252	279	1,026	181	214	237	260	570	265	316	344	381	826
70	213	249	271	301	1,100	191	218	246	270	589	274	316	353	386	835
71	242	281	308	342	1,238	209	246	270	293	646	293	344	377	414	902
72	259	303	332	367	1,320	218	251	274	307	664	302	349	381	423	911
73	279	325	357	393	1,409	223	260	284	311	683	302	353	386	428	921
74	298	347	381	420	1,499	232	270	293	321	693	307	358	390	428	921
75	320	371	403	445	1,572	228	265	293	316	683	302	349	381	418	902
76	364	423	459	506	1,784	246	288	316	344	740	325	372	409	446	959
77	393	455	494	543	1,906	251	293	321	353	750	325	377	414	451	959
78	423	489	530	582	2,045	260	298	325	358	750	325	377	414	451	949
79	455	525	569	626	2,183	218	256	279	302	636	330	381	414	451	949
80	491	567	616	672	2,338	223	256	274	307	636	335	386	414	456	959
81	530	611	660	723	2,501	223	256	279	298	636	335	386	418	451	949
82	574	657	711	775	2,680	218	256	274	302	636	330	386	414	451	949
83	621	711	765	833	2,876	218	256	274	298	627	330	381	414	446	930
84	670	767	824	895	3,079	223	251	274	293	617	330	377	409	442	930
85	723	826	885	960	3,299	218	251	270	288	598	330	377	404	437	911

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					**Rider: 11-SIP-PA-998**					**Rider: 11-CIP-PA-998**				
	Base Rates with No Inflation Protection					**Simple Inflation Protection Rider**					**Compound Inflation Protection Rider**				
Issue	**Benefit Period**					**Benefit Period**					**Benefit Period**				
Age	*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	76	88	98	110	456	84	107	121	135	351	390	470	521	581	1,367
40	78	90	100	112	472	93	112	130	149	370	395	474	530	595	1,386
41	81	95	105	117	489	98	116	135	153	389	404	479	535	600	1,395
42	83	98	110	122	513	102	126	139	158	389	409	488	539	604	1,395
43	88	103	115	127	530	107	130	144	167	408	409	488	544	609	1,414
44	90	108	120	134	546	112	135	153	172	437	414	493	549	609	1,424
45	95	110	125	139	570	116	144	158	181	446	418	502	553	618	1,424
46	98	115	130	144	587	126	149	167	191	465	423	502	558	623	1,433
47	103	120	134	149	611	130	158	177	200	484	423	507	563	628	1,443
48	108	125	139	156	635	135	167	186	209	494	418	502	553	614	1,386
49	110	132	147	164	652	144	172	191	214	522	423	497	553	618	1,424
50	112	134	149	166	660	149	172	195	218	522	423	497	549	614	1,386
51	117	137	152	171	684	149	181	200	223	532	423	502	558	623	1,424
52	117	139	154	174	684	153	181	205	228	541	428	502	558	618	1,395
53	125	147	161	181	709	158	191	214	242	570	418	502	558	618	1,424
54	130	154	169	191	741	167	200	223	246	579	414	488	544	604	1,367
55	137	161	178	198	774	172	205	232	260	598	414	493	544	609	1,357
56	142	169	186	208	806	186	218	242	270	617	418	493	549	609	1,357
57	149	176	196	218	839	191	228	251	279	636	418	497	544	609	1,357
58	156	186	205	227	872	200	232	260	293	664	423	493	544	609	1,357
59	164	193	215	240	904	205	246	270	298	693	409	483	530	586	1,301
60	166	196	218	242	912	205	242	265	298	674	418	493	539	600	1,348
61	174	205	227	252	953	214	251	274	311	693	404	479	521	581	1,282
62	183	215	237	264	994	218	260	288	316	712	404	474	521	581	1,272
63	193	225	249	276	1,035	223	265	293	325	731	400	474	521	576	1,272
64	203	237	262	288	1,075	228	270	298	335	750	400	470	516	572	1,263
65	213	249	274	303	1,124	237	279	307	344	769	400	470	516	572	1,253
66	235	276	303	335	1,238	256	298	330	367	816	418	488	539	595	1,301
67	247	288	318	352	1,295	260	307	335	372	826	414	488	530	586	1,282
68	259	303	332	367	1,344	265	311	344	381	835	409	479	525	586	1,272
69	271	318	347	386	1,401	270	316	349	381	845	404	474	521	572	1,253
70	284	332	364	403	1,466	274	321	353	386	845	404	470	516	567	1,225
71	315	369	403	445	1,613	288	339	372	414	892	418	488	535	595	1,272
72	330	386	423	467	1,678	293	339	372	414	892	414	483	525	581	1,253
73	345	403	440	486	1,743	293	344	377	414	892	409	474	521	572	1,225
74	362	420	459	508	1,809	293	344	377	409	883	400	470	511	558	1,196
75	376	435	474	523	1,849	284	330	363	395	854	381	446	483	530	1,130
76	418	486	528	582	2,053	302	349	386	418	892	400	460	507	553	1,168
77	442	511	557	611	2,151	302	353	381	418	892	390	456	493	544	1,149
78	467	540	587	645	2,257	302	349	381	414	883	386	446	488	530	1,120
79	494	572	621	679	2,371	251	293	316	344	731	381	437	474	521	1,101
80	525	606	657	719	2,501	251	288	311	344	721	377	437	470	516	1,082
81	560	645	699	763	2,639	246	284	302	335	702	372	428	460	502	1,063
82	599	687	743	809	2,794	242	284	302	330	702	363	423	451	493	1,035
83	640	733	792	860	2,973	242	279	298	325	674	358	418	442	483	1,006
84	687	785	843	917	3,153	232	274	293	321	664	353	409	442	479	997
85	736	841	902	978	3,356	232	265	284	311	636	353	400	428	465	968

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					**Rider: 11-SIP-PA-998**					**Rider: 11-CIP-PA-998**				
	Base Rates with No Inflation Protection					**Simple Inflation Protection Rider**					**Compound Inflation Protection Rider**				
Issue	**Benefit Period**					**Benefit Period**					**Benefit Period**				
Age	*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	46	54	59	66	277	51	65	74	84	209	232	279	311	349	816
40	46	56	61	68	285	56	65	79	88	228	237	284	316	353	826
41	49	59	64	73	301	60	70	84	88	228	242	284	321	353	826
42	51	61	66	76	310	60	74	84	93	237	242	288	325	358	845
43	54	64	71	78	326	65	79	88	102	247	246	293	325	367	845
44	56	66	73	81	334	65	79	93	107	266	246	298	330	372	854
45	59	68	76	86	350	70	84	98	107	266	251	302	335	372	864
46	61	71	78	88	367	74	93	102	116	275	256	307	339	377	864
47	64	76	83	93	375	79	93	107	121	294	256	307	339	381	873
48	66	78	86	98	391	84	98	116	126	304	260	311	349	381	873
49	68	81	90	103	407	88	107	116	130	323	260	307	339	377	864
50	71	83	93	105	415	93	112	121	135	323	260	311	344	381	873
51	73	86	95	108	424	93	112	126	139	332	260	311	344	381	873
52	76	88	98	110	432	93	116	130	144	342	260	311	349	386	883
53	78	93	103	115	456	102	121	135	153	351	260	307	339	381	864
54	83	98	110	122	481	107	126	139	158	361	260	311	339	381	854
55	88	103	115	130	497	112	135	149	163	389	265	316	344	381	873
56	93	110	122	134	521	116	139	153	177	408	270	316	349	390	873
57	98	115	127	144	546	126	149	163	181	418	270	321	353	390	883
58	105	122	134	152	578	126	153	172	191	437	270	325	358	395	883
59	110	130	144	159	611	135	163	177	200	446	274	325	358	400	883
60	115	134	147	164	619	135	163	181	205	465	270	321	353	390	873
61	120	142	156	174	660	144	172	191	209	475	274	325	353	395	873
62	127	152	166	186	692	153	177	195	218	494	279	325	358	395	883
63	137	159	176	196	733	153	186	205	228	513	279	330	363	400	883
64	144	171	188	208	774	163	191	209	237	532	284	330	363	404	892
65	154	181	200	222	823	172	205	218	246	551	288	339	367	404	892
66	174	203	222	247	912	186	218	242	270	598	302	358	390	432	949
67	186	218	240	264	969	191	228	246	279	617	307	358	390	437	959
68	198	232	254	281	1,035	200	237	260	288	627	311	363	400	442	959
69	213	247	271	301	1,100	205	246	270	298	646	311	367	400	442	959
70	227	264	291	323	1,173	214	251	274	302	664	316	372	404	442	959
71	257	298	327	362	1,312	232	274	298	330	712	335	390	428	470	1,016
72	274	320	349	386	1,393	237	279	307	339	731	335	390	428	474	1,016
73	291	340	371	411	1,474	246	288	316	349	740	339	395	432	474	1,016
74	310	362	396	437	1,556	251	293	321	353	759	339	395	432	474	1,016
75	330	384	418	459	1,629	251	288	316	349	740	335	386	418	460	987
76	376	435	474	521	1,841	265	311	339	372	788	349	409	442	488	1,035
77	403	467	508	557	1,963	270	316	344	377	797	349	409	442	488	1,025
78	433	501	543	596	2,085	274	316	349	381	807	353	404	442	483	1,025
79	464	535	582	638	2,224	232	270	293	321	683	349	409	442	479	1,016
80	499	577	626	684	2,379	232	270	293	316	674	353	404	437	479	1,006
81	538	618	670	733	2,534	237	270	293	316	674	349	404	437	474	1,006
82	579	665	719	785	2,713	232	270	288	316	655	349	404	432	470	987
83	623	716	772	841	2,900	232	265	284	311	646	349	400	428	465	978
84	672	770	829	899	3,096	228	265	279	311	636	349	400	423	465	968
85	726	829	890	963	3,307	228	260	274	302	627	344	395	418	456	949