
State: Pennsylvania **Filing Company:** Catholic Order of Foresters
TOI/Sub-TOI: LTC03I Individual Long Term Care/LTC03I.001 Qualified
Product Name: FCNH, FCLTC, FCLTC 2000
Project Name/Number: COF LTC Rate Inc 2019 - Gens 1 and 2/

Filing at a Glance

Company: Catholic Order of Foresters
Product Name: FCNH, FCLTC, FCLTC 2000
State: Pennsylvania
TOI: LTC03I Individual Long Term Care
Sub-TOI: LTC03I.001 Qualified
Filing Type: Rate - M.U. (Medically underwritten)
Date Submitted: 04/26/2019
SERFF Tr Num: UHAS-131777391
SERFF Status: Assigned
State Tr Num: UHAS-131777391
State Status: Received Review in Progress
Co Tr Num:

Implementation: On Approval
Date Requested:
Author(s): Eva Gaber, Michael Blaser, Carolyn Bittner
Reviewer(s): Jim Lavery (primary), David D'Agostino
Disposition Date:
Disposition Status:
Implementation Date:

State Filing Description:

Proposed 40% increase on 10 PA policyholders of the Catholic Order of Foresters' LTC forms FCNH, FCLTC, and FCLTC 2000.

State: Pennsylvania **Filing Company:** Catholic Order of Foresters
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General Information

Project Name: COF LTC Rate Inc 2019 - Gens 1 and 2	Status of Filing in Domicile: Pending
Project Number:	Date Approved in Domicile:
Requested Filing Mode: Review & Approval	Domicile Status Comments: Illinois is the state of domicile.
Explanation for Combination/Other:	Market Type: Individual
Submission Type: New Submission	Individual Market Type:
Overall Rate Impact: 40%	Filing Status Changed: 04/29/2019
	State Status Changed: 04/30/2019
Deemer Date:	Created By: Michael Blaser
Submitted By: Michael Blaser	Corresponding Filing Tracking Number:
	State TOI: LTC03I Individual Long Term Care

Filing Description:
COF LTC Rate Increase 2019 - Gens 1 and 2

Company and Contact

Filing Contact Information

Gaber Eva, Consulting Actuary	EGaber@uhasinc.com
1089 W. Morse Blvd.	407-622-4533 [Phone]
Winter Park, FL 32792	

Filing Company Information

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

Catholic Order of Foresters	CoCode: 57487	State of Domicile: Illinois
355 Shuman Blvd.	Group Code:	Company Type:
Naperville, IL 60566-7012	Group Name:	State ID Number:
(800) 552-0145 ext. [Phone]	FEIN Number: 36-0879870	

Filing Fees

Fee Required?	Yes
Fee Amount:	\$0.00
Retaliatory?	Yes
Fee Explanation:	The state of domicile (Illinois) does not charge a filing fee for rate filings.

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Rate Information

Rate data applies to filing.

Filing Method: SERFF
Rate Change Type: Increase
Overall Percentage of Last Rate Revision: 16.670%
Effective Date of Last Rate Revision: 03/06/2018
Filing Method of Last Filing: SERFF
SERFF Tracking Number of Last Filing: UHAS-131210905

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):
Catholic Order of Foresters	40.000%	40.000%	\$6,234	10	\$15,586	40.000%	40.000%

SERFF Tracking #:

UHAS-131777391

State Tracking #:

UHAS-131777391

Company Tracking #:**State:**

Pennsylvania

Filing Company:

Catholic Order of Foresters

TOI/Sub-TOI:

LTC03I Individual Long Term Care/LTC03I.001 Qualified

Product Name:

FCNH, FCLTC, FCLTC 2000

Project Name/Number:

COF LTC Rate Inc 2019 - Gens 1 and 2/

Rate/Rule Schedule

Item No.	Schedule Item Status	Document Name	Affected Form Numbers (Separated with commas)	Rate Action	Rate Action Information	Attachments
1		Premium Rate Sheets	FCNH, FCLTC, FCLTC 2000	Revised	Previous State Filing Number: UHAS-131210905 Percent Rate Change Request: 40	Rates FCNH PA-2019.pdf, Rates FCLTC PA-2019.pdf, Rates FCLTC 2000 PA-2019.pdf,

Catholic Order of Foresters
Nursing Home Only Policy - Form FCNH, \$10/Day Annual Premiums
Standard Rates - Before Spouse & Preferred Risk Discount

Issue Age	<u>730-Day Benefit Period</u> Elimination Period			<u>1095-Day Benefit Period</u> Elimination Period			<u>1825-Day Benefit Period</u> Elimination Period			<u>Lifetime Benefit Period</u> Elimination Period		
	<u>20-Day</u>	<u>60-Day</u>	<u>90-Day</u>	<u>20-Day</u>	<u>60-Day</u>	<u>90-Day</u>	<u>20-Day</u>	<u>60-Day</u>	<u>90-Day</u>	<u>20-Day</u>	<u>60-Day</u>	<u>90-Day</u>
18-44	22.54	21.56	21.00	24.22	23.24	22.54	26.32	25.20	24.50	33.32	31.78	30.66
45-49	27.16	25.90	25.06	29.82	28.28	27.30	33.04	31.36	30.24	42.84	40.46	38.92
50	31.36	29.82	28.70	34.86	33.04	31.78	39.20	37.10	35.70	51.38	48.44	46.48
51	32.90	31.08	29.96	36.54	34.58	33.32	41.30	38.92	37.52	54.32	51.10	49.00
52	34.30	32.34	31.08	38.22	36.12	34.72	43.26	40.88	39.20	57.12	53.76	51.52
53	36.26	34.16	32.90	40.74	38.36	36.82	46.20	43.54	41.86	61.18	57.54	55.02
54	38.22	35.98	34.58	43.12	40.60	38.92	49.28	46.34	44.38	65.38	61.32	58.66
55	40.32	37.94	36.26	45.64	42.84	41.02	52.22	49.14	47.04	69.44	65.10	62.16
56	42.28	39.76	38.08	48.02	45.08	43.12	55.16	51.80	49.56	73.50	68.88	65.80
57	44.24	41.58	39.76	50.54	47.32	45.36	58.10	54.60	52.22	77.56	72.66	69.30
58	48.30	45.22	43.26	55.30	51.80	49.56	63.98	59.92	57.26	86.38	80.78	77.00
59	52.22	48.86	46.62	60.20	56.28	53.76	69.72	65.38	62.30	95.20	89.04	84.84
60	56.28	52.50	50.12	64.96	60.76	57.96	75.60	70.70	67.48	104.02	97.16	92.54
61	60.20	56.14	53.62	69.86	65.24	62.16	81.34	76.02	72.52	112.98	105.42	100.24
62	64.26	59.92	56.98	74.62	69.58	66.36	87.22	81.48	77.56	121.80	113.54	107.94
63	72.38	67.34	63.98	84.56	78.82	74.90	99.12	92.54	88.06	134.12	124.88	118.72
64	80.50	74.76	71.12	94.50	87.92	83.58	111.02	103.46	98.42	146.44	136.36	129.36
65	88.62	82.32	78.12	104.30	97.02	92.12	122.92	114.52	108.78	158.76	147.70	140.14
66	96.74	89.74	85.12	114.24	106.12	100.80	134.82	125.44	119.14	171.08	159.04	150.92
67	104.86	97.16	92.12	124.18	115.22	109.34	146.72	136.50	129.64	183.40	170.52	161.56
68	115.92	107.38	101.78	137.62	127.68	121.10	162.96	151.48	143.78	205.52	190.96	181.02
69	126.84	117.46	111.30	151.06	140.14	132.86	179.06	166.46	157.92	227.78	211.40	200.34
70	137.90	127.68	120.96	164.36	152.46	144.48	195.16	181.30	172.06	249.90	231.98	219.66
71	148.96	137.90	130.48	177.80	164.92	156.24	211.26	196.28	186.06	272.02	252.42	239.12
72	159.88	147.98	140.14	191.24	177.38	168.00	227.50	211.26	200.20	294.14	273.00	258.44
73	179.90	166.46	157.64	215.74	200.06	189.42	256.90	238.56	226.10	327.04	303.38	287.14
74	199.92	184.94	175.00	240.24	222.60	210.84	286.30	265.86	251.86	359.80	333.76	315.84
75	219.94	203.42	192.50	264.74	245.28	232.26	315.84	293.16	277.76	392.56	364.14	344.54
76	239.96	222.04	210.00	289.10	267.96	253.68	345.24	320.46	303.52	425.46	394.52	373.24
77	259.98	240.52	227.50	313.60	290.64	275.10	374.64	347.76	329.42	458.22	424.90	401.94
78	292.04	269.92	255.22	352.94	327.04	309.40	422.10	391.58	370.86	508.34	471.10	445.62
79	323.96	299.32	283.08	392.28	363.30	343.70	469.70	435.54	412.44	558.60	517.44	489.30
80	355.88	328.72	310.80	431.62	399.56	378.00	517.16	479.50	453.88	608.72	563.78	532.98
81	387.94	358.26	338.52	470.96	435.96	412.30	564.62	523.46	495.46	658.84	610.12	576.66
82	419.86	387.66	366.38	510.30	472.22	446.74	612.08	567.28	536.90	709.10	656.32	620.34
83	449.40	414.68	391.58	546.14	505.12	477.54	654.92	606.62	573.86	757.26	700.56	661.78
84	478.94	441.70	416.92	582.12	538.02	508.48	697.62	645.82	610.82	805.56	744.94	703.36
85+	626.08	574.56	540.40	756.00	695.66	655.20	901.18	831.18	784.00	1,037.54	955.92	900.34

Catholic Order of Foresters
Nursing Home Only Policy - Form FCNH, \$10/Day Annual Premiums
Standard Rates - Before Spouse & Preferred Risk Discount

Issue Age	<u>730-Day Benefit Period</u> Elimination Period			<u>1095-Day Benefit Period</u> Elimination Period			<u>1825-Day Benefit Period</u> Elimination Period			<u>Lifetime Benefit Period</u> Elimination Period		
	<u>20-Day</u>	<u>60-Day</u>	<u>90-Day</u>	<u>20-Day</u>	<u>60-Day</u>	<u>90-Day</u>	<u>20-Day</u>	<u>60-Day</u>	<u>90-Day</u>	<u>20-Day</u>	<u>60-Day</u>	<u>90-Day</u>
18-44	31.56	30.18	29.40	33.91	32.54	31.56	36.85	35.28	34.30	46.65	44.49	42.92
45-49	38.02	36.26	35.08	41.75	39.59	38.22	46.26	43.90	42.34	59.98	56.64	54.49
50	43.90	41.75	40.18	48.80	46.26	44.49	54.88	51.94	49.98	71.93	67.82	65.07
51	46.06	43.51	41.94	51.16	48.41	46.65	57.82	54.49	52.53	76.05	71.54	68.60
52	48.02	45.28	43.51	53.51	50.57	48.61	60.56	57.23	54.88	79.97	75.26	72.13
53	50.76	47.82	46.06	57.04	53.70	51.55	64.68	60.96	58.60	85.65	80.56	77.03
54	53.51	50.37	48.41	60.37	56.84	54.49	68.99	64.88	62.13	91.53	85.85	82.12
55	56.45	53.12	50.76	63.90	59.98	57.43	73.11	68.80	65.86	97.22	91.14	87.02
56	59.19	55.66	53.31	67.23	63.11	60.37	77.22	72.52	69.38	102.90	96.43	92.12
57	61.94	58.21	55.66	70.76	66.25	63.50	81.34	76.44	73.11	108.58	101.72	97.02
58	67.62	63.31	60.56	77.42	72.52	69.38	89.57	83.89	80.16	120.93	113.09	107.80
59	73.11	68.40	65.27	84.28	78.79	75.26	97.61	91.53	87.22	133.28	124.66	118.78
60	78.79	73.50	70.17	90.94	85.06	81.14	105.84	98.98	94.47	145.63	136.02	129.56
61	84.28	78.60	75.07	97.80	91.34	87.02	113.88	106.43	101.53	158.17	147.59	140.34
62	89.96	83.89	79.77	104.47	97.41	92.90	122.11	114.07	108.58	170.52	158.96	151.12
63	101.33	94.28	89.57	118.38	110.35	104.86	138.77	129.56	123.28	187.77	174.83	166.21
64	112.70	104.66	99.57	132.30	123.09	117.01	155.43	144.84	137.79	205.02	190.90	181.10
65	124.07	115.25	109.37	146.02	135.83	128.97	172.09	160.33	152.29	222.26	206.78	196.20
66	135.44	125.64	119.17	159.94	148.57	141.12	188.75	175.62	166.80	239.51	222.66	211.29
67	146.80	136.02	128.97	173.85	161.31	153.08	205.41	191.10	181.50	256.76	238.73	226.18
68	162.29	150.33	142.49	192.67	178.75	169.54	228.14	212.07	201.29	287.73	267.34	253.43
69	177.58	164.44	155.82	211.48	196.20	186.00	250.68	233.04	221.09	318.89	295.96	280.48
70	193.06	178.75	169.34	230.10	213.44	202.27	273.22	253.82	240.88	349.86	324.77	307.52
71	208.54	193.06	182.67	248.92	230.89	218.74	295.76	274.79	260.48	380.83	353.39	334.77
72	223.83	207.17	196.20	267.74	248.33	235.20	318.50	295.76	280.28	411.80	382.20	361.82
73	251.86	233.04	220.70	302.04	280.08	265.19	359.66	333.98	316.54	457.86	424.73	402.00
74	279.89	258.92	245.00	336.34	311.64	295.18	400.82	372.20	352.60	503.72	467.26	442.18
75	307.92	284.79	269.50	370.64	343.39	325.16	442.18	410.42	388.86	549.58	509.80	482.36
76	335.94	310.86	294.00	404.74	375.14	355.15	483.34	448.64	424.93	595.64	552.33	522.54
77	363.97	336.73	318.50	439.04	406.90	385.14	524.50	486.86	461.19	641.51	594.86	562.72
78	408.86	377.89	357.31	494.12	457.86	433.16	590.94	548.21	519.20	711.68	659.54	623.87
79	453.54	419.05	396.31	549.19	508.62	481.18	657.58	609.76	577.42	782.04	724.42	685.02
80	498.23	460.21	435.12	604.27	559.38	529.20	724.02	671.30	635.43	852.21	789.29	746.17
81	543.12	501.56	473.93	659.34	610.34	577.22	790.47	732.84	693.64	922.38	854.17	807.32
82	587.80	542.72	512.93	714.42	661.11	625.44	856.91	794.19	751.66	992.74	918.85	868.48
83	629.16	580.55	548.21	764.60	707.17	668.56	916.89	849.27	803.40	1,060.16	980.78	926.49
84	670.52	618.38	583.69	814.97	753.23	711.87	976.67	904.15	855.15	1,127.78	1,042.92	984.70
85+	876.51	804.38	756.56	1,058.40	973.92	917.28	1,261.65	1,163.65	1,097.60	1,452.56	1,338.29	1,260.48

Catholic Order of Foresters
Optional Rider Factors

Issue Age	Rider FCIPR Inflation Protection	Rider FCNFBR Non-Forfeiture Benefit
18-44	2.49	1.25
45-49	2.44	1.20
50	2.38	1.15
51	2.35	1.14
52	2.33	1.14
53	2.30	1.14
54	2.28	1.14
55	2.25	1.14
56	2.23	1.14
57	2.20	1.14
58	2.17	1.14
59	2.13	1.14
60	2.10	1.14
61	2.06	1.14
62	2.03	1.13
63	2.00	1.13
64	1.97	1.13
65	1.94	1.13
66	1.91	1.12
67	1.88	1.12
68	1.85	1.12
69	1.81	1.12
70	1.77	1.11
71	1.73	1.11
72	1.69	1.11
73	1.66	1.10
74	1.63	1.10
75	1.60	1.09
76	1.58	1.09
77	1.55	1.08
78	1.52	1.08
79	1.50	1.07
80	1.47	1.07
81	1.45	1.07
82	1.42	1.06
83	1.41	1.06
84	1.39	1.06
85+	1.33	1.06

<u>Premium Calculation Example:</u>
Annual Base Premium
x
Inflation Protection Factor (if chosen by Insured)
x
Non-Forfeiture Benefit Factor (if chosen by Insured)
=
Total Gross Premium

<u>Spouse Discount</u>
10%

<u>Preferred Risk Discount</u>
10%

<u>Modal Factors</u>
Semi-Annual: 0.52
Quarterly: 0.265
Monthly PAC: 0.0875

Catholic Order of Foresters
 Base Plan (Form FCLTC-PA)
 Rates per \$10 Daily Benefit Amount
 90 Day Elimination Period
 No Benefit Increase Option
 Lifetime Payment Mode

Age	2 year	3 year	5 year	Lifetime
18-44	15.40	17.43	20.16	25.55
45-49	33.38	38.76	45.94	59.77
50	38.15	44.65	53.32	69.86
51	39.43	46.27	55.36	72.72
52	40.73	47.88	57.40	75.55
53	42.02	49.50	59.45	78.41
54	43.32	51.11	61.51	81.26
55	44.60	52.73	63.55	84.12
56	47.81	56.70	68.48	90.92
57	51.03	60.68	73.43	97.72
58	54.24	64.63	78.39	104.51
59	57.46	68.61	83.32	111.31
60	60.67	72.58	88.27	118.11
61	66.35	79.67	97.18	130.48
62	72.03	86.78	106.10	142.82
63	77.71	93.86	115.01	155.19
64	83.39	100.95	123.91	167.53
65	89.09	108.06	132.84	179.90
66	98.65	119.93	147.70	197.74
67	108.23	131.83	162.55	215.58
68	117.81	143.72	177.43	233.43
69	127.39	155.62	192.28	251.25
70	136.97	167.51	207.14	269.09
71	155.83	190.97	236.51	301.68
72	174.71	214.43	265.85	334.26
73	193.57	237.91	295.20	366.85
74	212.45	261.37	324.54	399.43
75	231.33	284.83	353.91	432.02
76	249.57	307.35	381.84	466.18
77	267.83	329.85	409.77	500.34
78	286.10	352.37	437.69	534.50
79	304.36	374.87	465.62	568.66
80	322.62	397.39	493.55	602.82
81	347.96	428.83	532.79	650.94
82	373.30	460.27	572.05	699.09
83	398.63	491.73	611.32	747.23
84	423.97	523.17	650.58	795.36
85+	516.69	637.79	793.31	970.04

Catholic Order of Foresters
Home Health Care Increase Rider (Form FCHHIR-PA)
Rates per \$10 Daily Benefit Amount
90 Day Elimination Period
No Benefit Increase Option
Lifetime Payment Mode

Age	2 year	3 year	5 year	Lifetime
18-44	2.44	2.87	3.57	4.33
45-49	6.29	7.37	9.22	11.47
50	7.44	8.75	10.92	13.67
51	7.68	9.01	11.25	14.08
52	7.89	9.25	11.56	14.49
53	8.11	9.52	11.88	14.91
54	8.32	9.78	12.19	15.32
55	8.54	10.02	12.52	15.73
56	9.03	10.59	13.23	16.64
57	9.53	11.18	13.95	17.55
58	10.02	11.76	14.68	18.47
59	10.52	12.33	15.40	19.38
60	11.01	12.90	16.11	20.29
61	11.71	13.72	17.13	21.56
62	12.41	14.54	18.13	22.83
63	13.14	15.33	19.13	24.10
64	13.84	16.15	20.15	25.39
65	14.54	16.95	21.15	26.66
66	15.53	18.08	22.56	29.33
67	16.52	19.23	23.99	32.01
68	17.50	20.37	25.40	34.70
69	18.49	21.50	26.81	37.38
70	19.48	22.63	28.22	40.05
71	23.71	27.67	34.52	46.00
72	27.92	32.71	40.82	51.96
73	32.12	37.74	47.12	57.91
74	36.33	42.78	53.42	63.89
75	40.54	47.82	59.72	69.84
76	42.72	50.39	62.93	73.57
77	44.92	52.97	66.14	77.30
78	47.09	55.52	69.36	81.05
79	49.27	58.10	72.57	84.78
80	51.45	60.67	75.76	88.53
81	55.02	64.87	81.01	94.64
82	58.59	69.07	86.26	100.78
83	62.17	73.28	91.50	106.89
84	65.74	77.48	96.75	113.03
85+	79.72	93.93	117.31	137.01

Catholic Order of Foresters
 5% Automatic Compound Index Benefit Rider (Form FCIPR-PA)
 Rates per \$10 Daily Benefit Amount
 90 Day Elimination Period
 Lifetime Payment Mode

Age	2 year	3 year	5 year	Lifetime
18-44	15.69	18.56	22.14	29.21
45-49	30.78	37.40	45.83	62.16
50	34.09	41.78	51.58	70.55
51	34.43	42.30	52.37	71.83
52	34.71	42.78	53.07	72.99
53	34.93	43.18	53.69	74.01
54	35.12	43.52	54.20	74.91
55	35.23	43.77	54.66	75.69
56	36.91	45.93	57.40	79.65
57	38.48	47.94	59.92	83.25
58	39.91	49.77	62.23	86.53
59	41.24	51.45	64.33	89.51
60	42.47	52.98	66.21	92.13
61	45.37	56.72	71.13	99.95
62	48.11	60.21	75.75	107.40
63	50.67	63.44	80.06	114.53
64	53.05	66.43	84.01	121.30
65	55.23	69.16	87.66	127.74
66	58.60	73.41	93.04	132.87
67	61.47	76.99	97.53	136.69
68	63.85	79.92	101.13	139.11
69	65.73	82.17	103.83	140.20
70	67.12	83.77	105.64	139.93
71	73.24	91.28	115.42	149.64
72	78.62	97.79	123.89	157.77
73	83.24	103.25	131.06	164.35
74	87.10	107.68	136.97	169.35
75	90.22	111.09	141.56	172.81
76	91.78	113.03	144.19	176.03
77	92.54	113.97	145.54	177.72
78	92.48	113.91	145.66	177.88
79	91.63	112.85	144.53	176.52
80	89.95	110.80	142.15	173.61
81	88.55	109.14	140.41	171.55
82	85.94	105.96	136.76	167.11
83	82.09	101.24	131.18	160.35
84	77.00	95.01	123.68	151.21
85+	63.35	78.19	103.66	126.76

Catholic Order of Foresters
 5% Automatic Compound Index Benefit Rider (Form FCIPR-PA)
 Home Health Care Increase Rider (Form FCHHIR-PA)
 Rates per \$10 Daily Benefit Amount
 90 Day Elimination Period
 Lifetime Payment Mode

Age	2 year	3 year	5 year	Lifetime
18-44	20.63	24.02	29.12	37.80
45-49	42.85	50.91	63.02	84.01
50	48.18	57.59	71.70	96.26
51	48.78	58.39	72.85	98.01
52	49.30	59.14	73.90	99.61
53	49.77	59.78	74.83	101.08
54	50.18	60.36	75.67	102.40
55	50.53	60.85	76.42	103.58
56	52.92	63.91	80.24	108.70
57	55.18	66.79	83.87	113.45
58	57.33	69.51	87.27	117.82
59	59.34	72.05	90.43	121.82
60	61.19	74.46	93.36	125.46
61	65.11	79.46	99.66	132.85
62	68.83	84.21	105.58	139.46
63	72.36	88.71	111.16	145.31
64	75.67	92.96	116.39	150.41
65	78.77	96.96	121.24	154.71
66	83.35	102.56	128.47	167.39
67	87.37	107.45	134.80	179.57
68	90.85	111.59	140.20	191.26
69	93.78	115.02	144.68	202.46
70	96.16	117.72	148.26	213.17
71	108.08	132.18	166.79	229.59
72	119.08	145.41	183.74	243.53
73	129.17	157.38	199.13	255.01
74	138.33	168.09	212.93	264.03
75	146.57	177.57	225.18	270.56
76	150.22	181.95	230.87	277.39
77	152.96	185.23	235.19	282.50
78	154.79	187.39	238.09	285.89
79	155.73	188.44	239.61	287.62
80	155.74	188.37	239.74	287.63
81	157.58	190.52	242.77	291.13
82	158.01	190.94	243.65	291.98
83	157.06	189.61	242.33	290.17
84	154.68	186.55	238.84	285.72
85+	152.82	183.63	236.30	281.67

Catholic Order of Foresters
 Base Plan (Form FCLTC-PA)
 Rates per \$10 Daily Benefit Amount
 90 Day Elimination Period
 No Benefit Increase Option
 Lifetime Payment Mode

Age	2 year	3 year	5 year	Lifetime
18-44	21.56	24.40	28.22	35.77
45-49	46.73	54.26	64.32	83.68
50	53.41	62.51	74.65	97.80
51	55.20	64.78	77.50	101.81
52	57.02	67.03	80.36	105.77
53	58.83	69.30	83.23	109.77
54	60.65	71.55	86.11	113.76
55	62.44	73.82	88.97	117.77
56	66.93	79.38	95.87	127.29
57	71.44	84.95	102.80	136.81
58	75.94	90.48	109.75	146.31
59	80.44	96.05	116.65	155.83
60	84.94	101.61	123.58	165.35
61	92.89	111.54	136.05	182.67
62	100.84	121.49	148.54	199.95
63	108.79	131.40	161.01	217.27
64	116.75	141.33	173.47	234.54
65	124.73	151.28	185.98	251.86
66	138.11	167.90	206.78	276.84
67	151.52	184.56	227.57	301.81
68	164.93	201.21	248.40	326.80
69	178.35	217.87	269.19	351.75
70	191.76	234.51	290.00	376.73
71	218.16	267.36	331.11	422.35
72	244.59	300.20	372.19	467.96
73	271.00	333.07	413.28	513.59
74	297.43	365.92	454.36	559.20
75	323.86	398.76	495.47	604.83
76	349.40	430.29	534.58	652.65
77	374.96	461.79	573.68	700.48
78	400.54	493.32	612.77	748.30
79	426.10	524.82	651.87	796.12
80	451.67	556.35	690.97	843.95
81	487.14	600.36	745.91	911.32
82	522.62	644.38	800.87	978.73
83	558.08	688.42	855.85	1046.12
84	593.56	732.44	910.81	1113.50
85+	723.37	892.91	1110.63	1358.06

Catholic Order of Foresters
Home Health Care Increase Rider (Form FCHHIR-PA)
Rates per \$10 Daily Benefit Amount
90 Day Elimination Period
No Benefit Increase Option
Lifetime Payment Mode

Age	2 year	3 year	5 year	Lifetime
18-44	3.42	4.02	5.00	6.06
45-49	8.81	10.32	12.91	16.06
50	10.42	12.25	15.29	19.14
51	10.75	12.61	15.75	19.71
52	11.05	12.95	16.18	20.29
53	11.35	13.33	16.63	20.87
54	11.65	13.69	17.07	21.45
55	11.96	14.03	17.53	22.02
56	12.64	14.83	18.52	23.30
57	13.34	15.65	19.53	24.57
58	14.03	16.46	20.55	25.86
59	14.73	17.26	21.56	27.13
60	15.41	18.06	22.55	28.41
61	16.39	19.21	23.98	30.18
62	17.37	20.36	25.38	31.96
63	18.40	21.46	26.78	33.74
64	19.38	22.61	28.21	35.55
65	20.36	23.73	29.61	37.32
66	21.74	25.31	31.58	41.06
67	23.13	26.92	33.59	44.81
68	24.50	28.52	35.56	48.58
69	25.89	30.10	37.53	52.33
70	27.27	31.68	39.51	56.07
71	33.19	38.74	48.33	64.40
72	39.09	45.79	57.15	72.74
73	44.97	52.84	65.97	81.07
74	50.86	59.89	74.79	89.45
75	56.76	66.95	83.61	97.78
76	59.81	70.55	88.10	103.00
77	62.89	74.16	92.60	108.22
78	65.93	77.73	97.10	113.47
79	68.98	81.34	101.60	118.69
80	72.03	84.94	106.06	123.94
81	77.03	90.82	113.41	132.50
82	82.03	96.70	120.76	141.09
83	87.04	102.59	128.10	149.65
84	92.04	108.47	135.45	158.24
85+	111.61	131.50	164.23	191.81

Catholic Order of Foresters
 5% Automatic Compound Index Benefit Rider (Form FCIPR-PA)
 Rates per \$10 Daily Benefit Amount
 90 Day Elimination Period
 Lifetime Payment Mode

Age	2 year	3 year	5 year	Lifetime
18-44	21.97	25.98	31.00	40.89
45-49	43.09	52.36	64.16	87.02
50	47.73	58.49	72.21	98.77
51	48.20	59.22	73.32	100.56
52	48.59	59.89	74.30	102.19
53	48.90	60.45	75.17	103.61
54	49.17	60.93	75.88	104.87
55	49.32	61.28	76.52	105.97
56	51.67	64.30	80.36	111.51
57	53.87	67.12	83.89	116.55
58	55.87	69.68	87.12	121.14
59	57.74	72.03	90.06	125.31
60	59.46	74.17	92.69	128.98
61	63.52	79.41	99.58	139.93
62	67.35	84.29	106.05	150.36
63	70.94	88.82	112.08	160.34
64	74.27	93.00	117.61	169.82
65	77.32	96.82	122.72	178.84
66	82.04	102.77	130.26	186.02
67	86.06	107.79	136.54	191.37
68	89.39	111.89	141.58	194.75
69	92.02	115.04	145.36	196.28
70	93.97	117.28	147.90	195.90
71	102.54	127.79	161.59	209.50
72	110.07	136.91	173.45	220.88
73	116.54	144.55	183.48	230.09
74	121.94	150.75	191.76	237.09
75	126.31	155.53	198.18	241.93
76	128.49	158.24	201.87	246.44
77	129.56	159.56	203.76	248.81
78	129.47	159.47	203.92	249.03
79	128.28	157.99	202.34	247.13
80	125.93	155.12	199.01	243.05
81	123.97	152.80	196.57	240.17
82	120.32	148.34	191.46	233.95
83	114.93	141.74	183.65	224.49
84	107.80	133.01	173.15	211.69
85+	88.69	109.47	145.12	177.46

Catholic Order of Foresters
 5% Automatic Compound Index Benefit Rider (Form FCIPR-PA)
 Home Health Care Increase Rider (Form FCHHIR-PA)
 Rates per \$10 Daily Benefit Amount
 90 Day Elimination Period
 Lifetime Payment Mode

Age	2 year	3 year	5 year	Lifetime
18-44	28.88	33.63	40.77	52.92
45-49	59.99	71.27	88.23	117.61
50	67.45	80.63	100.38	134.76
51	68.29	81.75	101.99	137.21
52	69.02	82.80	103.46	139.45
53	69.68	83.69	104.76	141.51
54	70.25	84.50	105.94	143.36
55	70.74	85.19	106.99	145.01
56	74.09	89.47	112.34	152.18
57	77.25	93.51	117.42	158.83
58	80.26	97.31	122.18	164.95
59	83.08	100.87	126.60	170.55
60	85.67	104.24	130.70	175.64
61	91.15	111.24	139.52	185.99
62	96.36	117.89	147.81	195.24
63	101.30	124.19	155.62	203.43
64	105.94	130.14	162.95	210.57
65	110.28	135.74	169.74	216.59
66	116.69	143.58	179.86	234.35
67	122.32	150.43	188.72	251.40
68	127.19	156.23	196.28	267.76
69	131.29	161.03	202.55	283.44
70	134.62	164.81	207.56	298.44
71	151.31	185.05	233.51	321.43
72	166.71	203.57	257.24	340.94
73	180.84	220.33	278.78	357.01
74	193.66	235.33	298.10	369.64
75	205.20	248.60	315.25	378.78
76	210.31	254.73	323.22	388.35
77	214.14	259.32	329.27	395.50
78	216.71	262.35	333.33	400.25
79	218.02	263.82	335.45	402.67
80	218.04	263.72	335.64	402.68
81	220.61	266.73	339.88	407.58
82	221.21	267.32	341.11	408.77
83	219.88	265.45	339.26	406.24
84	216.55	261.17	334.38	400.01
85+	213.95	257.08	330.82	394.34

Catholic Order of Foresters
Premium Adjustment Factors
Attributable to Increasing Elimination Periods

Days in Elimination Period		
20	60	90
1.15	1.07	1.00

Catholic Order of Foresters
Nonforfeiture Benefit Rider (FCNFBR-PA)
Factors to Apply to Total Premium
(Premium for Base Policy and Any Other Riders)

Issue Age	Factor
18-44	25%
45-49	19%
50-55	17%
56-60	16%
61-65	15%
66-70	14%
71-75	13%
76-80	12%
>=81	11%

Catholic Order of Foresters
 Rates per \$10 Daily Benefit
 90 Day Elimination Period
 Base Plan: 50% Home Care
 No Benefit Increase Option

Age	2 year	3 year	5 year	Lifetime
18-44	21.29	24.65	29.17	38.69
45-49	30.43	35.22	41.65	55.25
50	38.57	45.27	54.20	73.20
51	40.17	47.25	56.70	76.78
52	41.77	49.23	59.20	80.36
53	43.38	51.24	61.69	83.95
54	44.96	53.22	64.19	87.55
55	46.56	55.22	66.69	91.13
56	49.55	58.92	71.32	97.78
57	52.52	62.63	75.95	104.43
58	55.51	66.31	80.58	111.08
59	58.50	70.02	85.21	117.73
60	61.47	73.72	89.86	124.38
61	67.26	80.93	98.91	137.46
62	73.03	88.14	107.99	150.52
63	78.81	95.36	117.04	163.61
64	84.58	102.57	126.12	176.69
65	90.37	109.78	135.17	189.77
66	101.17	123.27	152.09	209.07
67	111.99	136.73	168.99	228.35
68	122.78	150.22	185.90	247.64
69	133.58	163.68	202.80	266.92
70	144.40	177.17	219.72	286.22
71	164.15	201.75	250.51	318.13
72	183.89	226.36	281.31	350.01
73	203.64	250.94	312.08	381.92
74	223.38	275.53	342.88	413.82
75	243.13	300.11	373.67	445.71
76	261.47	322.79	401.87	479.42
77	279.81	345.46	430.07	513.11
78	298.14	368.14	458.27	546.83
79	316.48	390.81	486.45	580.52
80	334.82	413.49	514.65	614.23
81	359.66	444.37	553.27	660.50
82	384.50	475.24	591.87	706.77
83	409.34	506.12	630.48	753.05
84	434.16	536.99	669.08	799.32
85+	459.00	567.89	707.70	845.59

Catholic Order of Foresters
 Rates per \$10 Daily Benefit
 90 Day Elimination Period
 Base Plan Plus Home Health Care Rider (FCHHIR 2000)
 No Benefit Increase Option

Age	2 year	3 year	5 year	Lifetime
18-44	25.28	29.34	35.00	48.58
45-49	36.12	41.92	50.00	69.39
50	46.26	54.31	65.50	92.38
51	48.14	56.62	68.39	96.72
52	50.00	58.93	71.28	101.03
53	51.89	61.25	74.19	105.37
54	53.77	63.56	77.08	109.70
55	55.65	65.87	79.99	114.04
56	59.08	70.09	85.27	121.93
57	62.51	74.32	90.56	129.80
58	65.95	78.54	95.84	137.70
59	69.38	82.75	101.13	145.59
60	72.81	86.99	106.41	153.46
61	79.30	95.01	116.49	168.62
62	85.80	103.05	126.57	183.75
63	92.27	111.08	136.66	198.89
64	98.77	119.12	146.74	214.04
65	105.26	127.14	156.82	229.18
66	117.26	142.02	175.47	251.08
67	129.28	156.88	194.10	272.99
68	141.28	171.73	212.74	294.89
69	153.30	186.61	231.37	316.80
70	165.32	201.47	250.02	338.68
71	189.51	231.40	287.47	374.63
72	213.71	261.31	324.92	410.56
73	237.92	291.21	362.38	446.52
74	262.10	321.14	399.83	482.45
75	286.31	351.05	437.28	518.40
76	306.83	376.31	468.70	555.75
77	327.38	401.54	500.10	593.13
78	347.90	426.80	531.53	630.50
79	368.43	452.05	562.95	667.88
80	388.97	477.31	594.37	705.25
81	417.29	512.32	638.13	757.40
82	445.64	547.32	681.89	809.54
83	473.98	582.33	725.64	861.69
84	502.33	617.33	769.42	913.83
85+	530.67	652.34	813.18	965.98

Catholic Order of Foresters
 Rates per \$10 Daily Benefit
 90 Day Elimination Period
 Base Plan: 50% Home Care
 5% Compound Inflation Protection Rider (FCCIP 2000)

Age	2 year	3 year	5 year	Lifetime
18-44	37.73	45.28	55.09	74.70
45-49	53.90	64.68	78.70	106.73
50	65.33	78.98	96.62	131.74
51	67.84	82.12	100.58	137.28
52	70.34	85.26	104.52	142.82
53	72.85	88.41	108.45	148.35
54	75.33	91.55	112.41	153.91
55	77.84	94.69	116.35	159.45
56	81.85	99.70	122.66	168.28
57	85.88	104.74	128.96	177.11
58	89.88	109.77	135.29	185.97
59	93.89	114.81	141.59	194.80
60	97.92	119.84	147.90	203.63
61	105.97	129.94	160.63	221.50
62	114.02	140.07	173.34	239.39
63	122.07	150.17	186.06	257.26
64	130.12	160.30	198.79	275.15
65	138.17	170.40	211.52	293.02
66	151.20	186.77	232.06	314.58
67	164.23	203.15	252.63	336.13
68	177.25	219.52	273.19	357.69
69	190.28	235.90	293.74	379.24
70	203.33	252.27	314.30	400.80
71	224.33	278.65	347.36	435.84
72	245.34	305.01	380.44	470.90
73	266.34	331.38	413.49	505.97
74	287.35	357.76	446.55	541.03
75	308.35	384.14	479.63	576.09
76	322.83	402.10	501.92	602.84
77	337.32	420.07	524.23	629.59
78	351.80	438.05	546.51	656.37
79	366.29	456.00	568.82	683.12
80	380.75	473.98	591.13	709.87
81	400.54	498.70	622.02	747.10
82	420.33	523.45	652.91	784.30
83	440.11	548.17	683.82	821.53
84	459.90	572.90	714.71	858.75
85+	479.69	597.64	745.62	895.98

Catholic Order of Foresters
 Rates per \$10 Daily Benefit
 90 Day Elimination Period
 Base Plan Plus Home Health Care Rider (FCHHIR 2000)
 5% Compound Inflation Protection Rider (FCCIP 2000)

Age	2 year	3 year	5 year	Lifetime
18-44	49.27	58.81	71.98	103.79
45-49	70.37	84.01	102.84	148.26
50	86.04	103.26	126.93	184.18
51	89.17	107.12	131.80	191.46
52	92.31	111.01	136.64	198.74
53	95.42	114.87	141.49	206.02
54	98.56	118.74	146.35	213.30
55	101.69	122.62	151.20	220.58
56	106.61	128.71	158.83	232.00
57	111.53	134.80	166.46	243.41
58	116.48	140.86	174.08	254.85
59	121.40	146.95	181.71	266.26
60	126.34	153.04	189.34	277.68
61	135.94	164.94	204.28	300.15
62	145.54	176.84	219.24	322.63
63	155.13	188.77	234.17	345.10
64	164.73	200.67	249.13	367.58
65	174.35	212.57	264.09	390.05
66	189.84	231.76	288.17	416.73
67	205.32	250.95	312.22	443.40
68	220.83	270.14	336.30	470.10
69	236.31	289.33	360.37	496.77
70	251.80	308.54	384.45	523.45
71	282.44	346.44	431.95	566.49
72	313.06	384.35	479.44	609.54
73	343.69	422.25	526.94	652.56
74	374.31	460.16	574.43	695.61
75	404.95	498.06	621.93	738.65
76	422.51	519.63	648.74	770.54
77	440.04	541.22	675.52	802.42
78	457.60	562.80	702.33	834.31
79	475.15	584.37	729.13	866.19
80	492.71	605.94	755.94	898.08
81	517.86	637.00	794.76	944.30
82	543.01	668.07	833.55	990.52
83	568.19	699.11	872.35	1036.75
84	593.34	730.18	911.14	1082.97
85+	618.51	761.24	949.96	1129.19

Catholic Order of Foresters
 Rates per \$10 Daily Benefit
 90 Day Elimination Period
 Base Plan: 50% Home Care
 5% Simple Inflation Protection Rider (FCSIP 2000)

Age	2 year	3 year	5 year	Lifetime
18-44	27.79	32.90	39.55	52.31
45-49	39.69	46.99	56.50	74.75
50	49.78	59.59	72.26	96.66
51	52.06	62.44	75.83	101.65
52	54.32	65.29	79.40	106.66
53	56.57	68.13	83.00	111.66
54	58.85	70.98	86.57	116.67
55	61.11	73.83	90.14	121.66
56	64.97	78.66	96.19	130.13
57	68.83	83.50	102.26	138.61
58	72.68	88.33	108.34	147.08
59	76.56	93.17	114.39	155.56
60	80.42	98.00	120.46	164.03
61	87.91	107.40	132.29	180.62
62	95.40	116.82	144.13	197.21
63	102.88	126.23	155.96	213.83
64	110.37	135.65	167.80	230.42
65	117.86	145.05	179.63	247.01
66	130.63	161.12	199.80	268.82
67	143.43	177.17	219.99	290.64
68	156.22	193.25	240.15	312.47
69	169.00	209.30	260.32	334.27
70	181.79	225.35	280.49	356.10
71	202.42	251.24	312.95	391.23
72	223.02	277.13	345.39	426.36
73	243.65	303.01	377.84	461.50
74	264.25	328.88	410.28	496.63
75	284.88	354.77	442.74	531.74
76	301.00	374.79	467.61	561.61
77	317.11	394.82	492.50	591.48
78	333.25	414.84	517.37	621.32
79	349.36	434.89	542.24	651.19
80	365.48	454.91	567.13	681.04
81	386.42	481.06	599.83	720.44
82	407.35	507.23	632.54	759.84
83	428.31	533.41	665.26	799.25
84	449.24	559.58	697.97	838.65
85+	470.18	585.75	730.67	878.03

Catholic Order of Foresters
 Rates per \$10 Daily Benefit
 90 Day Elimination Period
 Base Plan Plus Home Health Care Rider (FCHHIR 2000)
 5% Simple Inflation Protection Rider (FCSIP 2000)

Age	2 year	3 year	5 year	Lifetime
18-44	37.46	44.29	53.76	76.50
45-49	53.53	63.26	76.79	109.28
50	67.78	80.77	98.68	141.89
51	70.69	84.35	103.17	148.61
52	73.58	87.92	107.66	155.34
53	76.50	91.50	112.14	162.06
54	79.39	95.07	116.63	168.79
55	82.30	98.65	121.12	175.51
56	87.09	104.58	128.54	186.61
57	91.90	110.48	135.95	197.69
58	96.68	116.41	143.37	208.80
59	101.49	122.31	150.78	219.88
60	106.28	128.24	158.20	230.98
61	115.30	139.42	172.22	252.06
62	124.32	150.58	186.26	273.14
63	133.33	161.76	200.28	294.21
64	142.33	172.92	214.32	315.29
65	151.35	184.10	228.34	336.37
66	166.61	203.00	252.05	363.44
67	181.86	221.90	275.74	390.52
68	197.12	240.79	299.44	417.57
69	212.37	259.69	323.13	444.65
70	227.63	278.59	346.84	471.72
71	257.60	315.68	393.31	514.90
72	287.57	352.75	439.76	558.09
73	317.53	389.84	486.22	601.25
74	347.50	426.93	532.69	644.44
75	377.49	464.02	579.16	687.62
76	396.96	487.98	608.95	723.09
77	416.44	511.96	638.76	758.54
78	435.91	535.91	668.58	794.02
79	455.41	559.87	698.39	829.49
80	474.88	583.85	728.20	864.94
81	501.39	616.56	769.08	913.65
82	527.87	649.27	809.96	962.36
83	554.38	682.00	850.85	1011.08
84	580.86	714.71	891.73	1059.79
85+	607.37	747.44	932.61	1108.50

Catholic Order of Foresters
 Rates per \$10 Daily Benefit
 90 Day Elimination Period
 Base Plan: 50% Home Care
 No Benefit Increase Option

Age	2 year	3 year	5 year	Lifetime
18-44	29.81	34.51	40.84	54.17
45-49	42.60	49.31	58.31	77.35
50	54.00	63.38	75.88	102.48
51	56.24	66.15	79.38	107.49
52	58.48	68.92	82.88	112.50
53	60.73	71.74	86.37	117.53
54	62.94	74.51	89.87	122.57
55	65.18	77.31	93.37	127.58
56	69.37	82.49	99.85	136.89
57	73.53	87.68	106.33	146.20
58	77.71	92.83	112.81	155.51
59	81.90	98.03	119.29	164.82
60	86.06	103.21	125.80	174.13
61	94.16	113.30	138.47	192.44
62	102.24	123.40	151.19	210.73
63	110.33	133.50	163.86	229.05
64	118.41	143.60	176.57	247.37
65	126.52	153.69	189.24	265.68
66	141.64	172.58	212.93	292.70
67	156.79	191.42	236.59	319.69
68	171.89	210.31	260.26	346.70
69	187.01	229.15	283.92	373.69
70	202.16	248.04	307.61	400.71
71	229.81	282.45	350.71	445.38
72	257.45	316.90	393.83	490.01
73	285.10	351.32	436.91	534.69
74	312.73	385.74	480.03	579.35
75	340.38	420.15	523.14	623.99
76	366.06	451.91	562.62	671.19
77	391.73	483.64	602.10	718.35
78	417.40	515.40	641.58	765.56
79	443.07	547.13	681.03	812.73
80	468.75	578.89	720.51	859.92
81	503.52	622.12	774.58	924.70
82	538.30	665.34	828.62	989.48
83	573.08	708.57	882.67	1054.27
84	607.82	751.79	936.71	1119.05
85+	642.60	795.05	990.78	1183.83

Catholic Order of Foresters
 Rates per \$10 Daily Benefit
 90 Day Elimination Period
 Base Plan Plus Home Health Care Rider (FCHHIR 2000)
 No Benefit Increase Option

Age	2 year	3 year	5 year	Lifetime
18-44	35.39	41.08	49.00	68.01
45-49	50.57	58.69	70.00	97.15
50	64.76	76.03	91.70	129.33
51	67.40	79.27	95.75	135.41
52	70.00	82.50	99.79	141.44
53	72.65	85.75	103.87	147.52
54	75.28	88.98	107.91	153.58
55	77.91	92.22	111.99	159.66
56	82.71	98.13	119.38	170.70
57	87.51	104.05	126.78	181.72
58	92.33	109.96	134.18	192.78
59	97.13	115.85	141.58	203.83
60	101.93	121.79	148.97	214.84
61	111.02	133.01	163.09	236.07
62	120.12	144.27	177.20	257.25
63	129.18	155.51	191.32	278.45
64	138.28	166.77	205.44	299.66
65	147.36	178.00	219.55	320.85
66	164.16	198.83	245.66	351.51
67	180.99	219.63	271.74	382.19
68	197.79	240.42	297.84	412.85
69	214.62	261.25	323.92	443.52
70	231.45	282.06	350.03	474.15
71	265.31	323.96	402.46	524.48
72	299.19	365.83	454.89	574.78
73	333.09	407.69	507.33	625.13
74	366.94	449.60	559.76	675.43
75	400.83	491.47	612.19	725.76
76	429.56	526.83	656.18	778.05
77	458.33	562.16	700.14	830.38
78	487.06	597.52	744.14	882.70
79	515.80	632.87	788.13	935.03
80	544.56	668.23	832.12	987.35
81	584.21	717.25	893.38	1060.36
82	623.90	766.25	954.65	1133.36
83	663.57	815.26	1015.90	1206.37
84	703.26	864.26	1077.19	1279.36
85+	742.94	913.28	1138.45	1352.37

Catholic Order of Foresters
 Rates per \$10 Daily Benefit
 90 Day Elimination Period
 Base Plan: 50% Home Care
 5% Compound Inflation Protection Rider (FCCIP 2000)

Age	2 year	3 year	5 year	Lifetime
18-44	52.82	63.39	77.13	104.58
45-49	75.46	90.55	110.18	149.42
50	91.46	110.57	135.27	184.44
51	94.98	114.97	140.81	192.19
52	98.48	119.36	146.33	199.95
53	101.99	123.77	151.83	207.69
54	105.46	128.17	157.37	215.47
55	108.98	132.57	162.89	223.23
56	114.59	139.58	171.72	235.59
57	120.23	146.64	180.54	247.95
58	125.83	153.68	189.41	260.36
59	131.45	160.73	198.23	272.72
60	137.09	167.78	207.06	285.08
61	148.36	181.92	224.88	310.10
62	159.63	196.10	242.68	335.15
63	170.90	210.24	260.48	360.16
64	182.17	224.42	278.31	385.21
65	193.44	238.56	296.13	410.23
66	211.68	261.48	324.88	440.41
67	229.92	284.41	353.68	470.58
68	248.15	307.33	382.47	500.77
69	266.39	330.26	411.24	530.94
70	284.66	353.18	440.02	561.12
71	314.06	390.11	486.30	610.18
72	343.48	427.01	532.62	659.26
73	372.88	463.93	578.89	708.36
74	402.29	500.86	625.17	757.44
75	431.69	537.80	671.48	806.53
76	451.96	562.94	702.69	843.98
77	472.25	588.10	733.92	881.43
78	492.52	613.27	765.11	918.92
79	512.81	638.40	796.35	956.37
80	533.05	663.57	827.58	993.82
81	560.76	698.18	870.83	1045.94
82	588.46	732.83	914.07	1098.02
83	616.15	767.44	957.35	1150.14
84	643.86	802.06	1000.59	1202.25
85+	671.57	836.70	1043.87	1254.37

Catholic Order of Foresters
 Rates per \$10 Daily Benefit
 90 Day Elimination Period
 Base Plan Plus Home Health Care Rider (FCHHIR 2000)
 5% Compound Inflation Protection Rider (FCCIP 2000)

Age	2 year	3 year	5 year	Lifetime
18-44	68.98	82.33	100.77	145.31
45-49	98.52	117.61	143.98	207.56
50	120.46	144.56	177.70	257.85
51	124.84	149.97	184.52	268.04
52	129.23	155.41	191.30	278.24
53	133.59	160.82	198.09	288.43
54	137.98	166.24	204.89	298.62
55	142.37	171.67	211.68	308.81
56	149.25	180.19	222.36	324.80
57	156.14	188.72	233.04	340.77
58	163.07	197.20	243.71	356.79
59	169.96	205.73	254.39	372.76
60	176.88	214.26	265.08	388.75
61	190.32	230.92	285.99	420.21
62	203.76	247.58	306.94	451.68
63	217.18	264.28	327.84	483.14
64	230.62	280.94	348.78	514.61
65	244.09	297.60	369.73	546.07
66	265.78	324.46	403.44	583.42
67	287.45	351.33	437.11	620.76
68	309.16	378.20	470.82	658.14
69	330.83	405.06	504.52	695.48
70	352.52	431.96	538.23	732.83
71	395.42	485.02	604.73	793.09
72	438.28	538.09	671.22	853.36
73	481.17	591.15	737.72	913.58
74	524.03	644.22	804.20	973.85
75	566.93	697.28	870.70	1034.11
76	591.51	727.48	908.24	1078.76
77	616.06	757.71	945.73	1123.39
78	640.64	787.92	983.26	1168.03
79	665.21	818.12	1020.78	1212.67
80	689.79	848.32	1058.32	1257.31
81	725.00	891.80	1112.66	1322.02
82	760.21	935.30	1166.97	1386.73
83	795.47	978.75	1221.29	1451.45
84	830.68	1022.25	1275.60	1516.16
85+	865.91	1065.74	1329.94	1580.87

Catholic Order of Foresters
 Rates per \$10 Daily Benefit
 90 Day Elimination Period
 Base Plan: 50% Home Care
 5% Simple Inflation Protection Rider (FCSIP 2000)

Age	2 year	3 year	5 year	Lifetime
18-44	38.91	46.06	55.37	73.23
45-49	55.57	65.79	79.10	104.65
50	69.69	83.43	101.16	135.32
51	72.88	87.42	106.16	142.31
52	76.05	91.41	111.16	149.32
53	79.20	95.38	116.20	156.32
54	82.39	99.37	121.20	163.34
55	85.55	103.36	126.20	170.32
56	90.96	110.12	134.67	182.18
57	96.36	116.90	143.16	194.05
58	101.75	123.66	151.68	205.91
59	107.18	130.44	160.15	217.78
60	112.59	137.20	168.64	229.64
61	123.07	150.36	185.21	252.87
62	133.56	163.55	201.78	276.09
63	144.03	176.72	218.34	299.36
64	154.52	189.91	234.92	322.59
65	165.00	203.07	251.48	345.81
66	182.88	225.57	279.72	376.35
67	200.80	248.04	307.99	406.90
68	218.71	270.55	336.21	437.46
69	236.60	293.02	364.45	467.98
70	254.51	315.49	392.69	498.54
71	283.39	351.74	438.13	547.72
72	312.23	387.98	483.55	596.90
73	341.11	424.21	528.98	646.10
74	369.95	460.43	574.39	695.28
75	398.83	496.68	619.84	744.44
76	421.40	524.71	654.65	786.25
77	443.95	552.75	689.50	828.07
78	466.55	580.78	724.32	869.85
79	489.10	608.85	759.14	911.67
80	511.67	636.87	793.98	953.46
81	540.99	673.48	839.76	1008.62
82	570.29	710.12	885.56	1063.78
83	599.63	746.77	931.36	1118.95
84	628.94	783.41	977.16	1174.11
85+	658.25	820.05	1022.94	1229.24

Catholic Order of Foresters
 Rates per \$10 Daily Benefit
 90 Day Elimination Period
 Base Plan Plus Home Health Care Rider (FCHHIR 2000)
 5% Simple Inflation Protection Rider (FCSIP 2000)

Age	2 year	3 year	5 year	Lifetime
18-44	52.44	62.01	75.26	107.10
45-49	74.94	88.56	107.51	152.99
50	94.89	113.08	138.15	198.65
51	98.97	118.09	144.44	208.05
52	103.01	123.09	150.72	217.48
53	107.10	128.10	157.00	226.88
54	111.15	133.10	163.28	236.31
55	115.22	138.11	169.57	245.71
56	121.93	146.41	179.96	261.25
57	128.66	154.67	190.33	276.77
58	135.35	162.97	200.72	292.32
59	142.09	171.23	211.09	307.83
60	148.79	179.54	221.48	323.37
61	161.42	195.19	241.11	352.88
62	174.05	210.81	260.76	382.40
63	186.66	226.46	280.39	411.89
64	199.26	242.09	300.05	441.41
65	211.89	257.74	319.68	470.92
66	233.25	284.20	352.87	508.82
67	254.60	310.66	386.04	546.73
68	275.97	337.11	419.22	584.60
69	297.32	363.57	452.38	622.51
70	318.68	390.03	485.58	660.41
71	360.64	441.95	550.63	720.86
72	402.60	493.85	615.66	781.33
73	444.54	545.78	680.71	841.75
74	486.50	597.70	745.77	902.22
75	528.49	649.63	810.82	962.67
76	555.74	683.17	852.53	1012.33
77	583.02	716.74	894.26	1061.96
78	610.27	750.27	936.01	1111.63
79	637.57	783.82	977.75	1161.29
80	664.83	817.39	1019.48	1210.92
81	701.95	863.18	1076.71	1279.11
82	739.02	908.98	1133.94	1347.30
83	776.13	954.80	1191.19	1415.51
84	813.20	1000.59	1248.42	1483.71
85+	850.32	1046.42	1305.65	1551.90

Policy Form Number FCLTC-PA 2000

Premium Adjustment Factors Attributable
to Increasing Elimination Periods

<u>Days in Elimination Period</u>			
<u>20</u>	<u>60</u>	<u>90</u>	<u>180</u>
1.15	1.07	1.00	0.90

Policy Form Number FCLTC-PA 2000

Premium Adjustment Factors Attributable to Optional Riders

Issue Age	FCSWP 2000 Spousal Waiver of Premium	FCSSP 2000 Survivor Spouse Paid-Up	FCROP 2000 Return of Premium	FCNFBR 2000 Nonforfeiture Benefit
18-39	0.01	0.12	1.08	1.20
40-49	0.01	0.12	1.08	1.19
50-54	0.01	0.12	1.08	1.17
55	0.02	0.12	1.12	1.17
56-59	0.02	0.11	1.12	1.17
60-64	0.02	0.11	1.12	1.15
65	0.03	0.11	1.14	1.15
66-69	0.03	0.09	1.14	1.15
70	0.04	0.07	1.15	1.13
71	0.04	0.07	1.18	1.13
72	0.04	0.07	1.21	1.13
73	0.04	0.07	1.23	1.13
74	0.04	0.07	1.26	1.13
75	0.06	0.06	1.29	1.13
76	0.06	0.06	1.31	1.13
77	0.06	0.06	1.34	1.13
78	0.06	0.06	1.36	1.13
79	0.06	0.06	1.39	1.13
>=80	0.11	0.04	1.41	1.11

Discounts

Spousal Discount	15%
Preferred Discount	10%

Benefit Period	FCROB 2000 Restoration of Benefit	FCSSB 2000 Spousal Shared Benefit
2 Years	1.08	N/A
3 Years	1.05	0.12
5 Years	1.04	0.08
Lifetime	N/A	N/A

Premium Calculation Example

A =

Annual Base Premium
Base Premium based upon possible choice of:
Home Health Care Increase Rider and/or
Simple Inflation Protection Rider and/or
Compound Inflation Protection Rider
*
Elimination Period Factor

B =

A * Survivor Spouse Paid-Up Factor (if chosen by Insured)
+
A * Spousal Shared Benefit Factor (if chosen by Insured)
+
A * Spousal Waiver of Premium Factor (if chosen by Insured)

C =

(A + B) * Restoration of Benefit Factor (if chosen by Insured)
*
Nonforfeiture Benefit Factor <u>or</u> Return of Premium Factor (if chosen by Insured)

C = Total Gross Premium

SERFF Tracking #:

UHAS-131777391

State Tracking #:

UHAS-131777391

Company Tracking #:

State:

Pennsylvania

Filing Company:

Catholic Order of Foresters

TOI/Sub-TOI:

LTC03I Individual Long Term Care/LTC03I.001 Qualified

Product Name:

FCNH, FCLTC, FCLTC 2000

Project Name/Number:

COF LTC Rate Inc 2019 - Gens 1 and 2/

Supporting Document Schedules

Satisfied - Item:	Transmittal Letter (A&H)
Comments:	
Attachment(s):	Cover Letter - Gen 12 PA - 2019.pdf
Item Status:	
Status Date:	

Bypassed - Item:	Actuarial Certification (A&H)
Bypass Reason:	This is not a new form filing; it is a rate increase filing on a closed block of business. These policies are no longer being sold in any jurisdiction.
Attachment(s):	
Item Status:	
Status Date:	

Satisfied - Item:	Actuarial Memorandum and Explanatory Information (A&H)
Comments:	Please see the attached actuarial memorandum. Exhibits A through D are attached to the end of the memorandum document.
Attachment(s):	Actuarial Memorandum - Gen 12 - PA.pdf
Item Status:	
Status Date:	

Bypassed - Item:	Advertisements (A&H)
Bypass Reason:	This is a rate increase filing on a closed block of business. These policies are no longer being sold in any jurisdiction.
Attachment(s):	
Item Status:	
Status Date:	

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

Bypassed - Item:	Insert Page Explanation (A&H)
Bypass Reason:	This filing contains no insert pages.
Attachment(s):	
Item Status:	

SERFF Tracking #:

UHAS-131777391

State Tracking #:

UHAS-131777391

Company Tracking #:**State:**

Pennsylvania

Filing Company:

Catholic Order of Foresters

TOI/Sub-TOI:

LTC03I Individual Long Term Care/LTC03I.001 Qualified

Product Name:

FCNH, FCLTC, FCLTC 2000

Project Name/Number:

COF LTC Rate Inc 2019 - Gens 1 and 2/

Status Date:	
Bypassed - Item:	Rate Table (A&H)
Bypass Reason:	This is not a new form filing. Revised rates are included in the Rate/Rule Schedule tab.
Attachment(s):	
Item Status:	
Status Date:	
Bypassed - Item:	Replacement Form with Highlighted Changes (A&H)
Bypass Reason:	This filing contains no changes to approved forms.
Attachment(s):	
Item Status:	
Status Date:	
Bypassed - Item:	Reserve Calculation (A&H)
Bypass Reason:	We do not believe this rate increase is substantial.
Attachment(s):	
Item Status:	
Status Date:	
Bypassed - Item:	Variability Explanation (A&H)
Bypass Reason:	This is not a form filing.
Attachment(s):	
Item Status:	
Status Date:	
Satisfied - Item:	Sample Policyholder Notification Letter
Comments:	
Attachment(s):	Sample COF rate increase letter - current as of 6-19-2018.pdf
Item Status:	
Status Date:	

April 25, 2019

Jessica Altman
Acting Commissioner
Insurance Department
Commonwealth of Pennsylvania
1326 Strawberry Square, 13th Floor
Harrisburg, Pennsylvania 17120

RE: Catholic Order of Foresters
NAIC # 57487
SERFF Tracking # UHAS-131777391
Policy Forms: FCNH, FCLTC, FCLTC 2000
Requested 40% Rate Increase and Rate Stability Reporting for Prior Rate Increase

Dear Commissioner Altman:

This referenced filing is being submitted on behalf of Catholic Order of Foresters for your review. This filing includes a rate increase request, as well as the information to satisfy the requirement to present actual and projected experience for year one of the required three years following implementation of the latest rate increase (and year two following implementation of the prior rate increase).

These policies are existing individual policy forms providing long-term care coverage. They were issued from 1998 through 2004 and are no longer being marketed in any jurisdiction.

Rate Increase Filing

Please find the attached actuarial documents to support the requested 40% rate increase on the referenced policy forms and attendant riders. The rate increase is needed to offset a higher-than-expected lifetime loss ratio caused by higher-than-expected persistency. Some of these policies are subject to Rate Stabilization requirements. Compliance with the 58/85 loss ratio after the rate increase is demonstrated in Section 24 of the actuarial memorandum. The deviation in both voluntary lapses and mortality exceeds the previously established moderately adverse conditions for these policy forms.

The proposed effective date of the requested increase is as soon as possible following approval and fulfillment of all statutory and contractual requirements and will be more than one year from the implementation of the previous rate increase.

As a fraternal organization, Catholic Order of Foresters is very concerned for their policyholders and, as a result, the company will offer policyholders several options to reduce their benefits in order to allow them the flexibility to reduce the effect of the premium increase or maintain their current premium level.

In addition, the company will provide the contingent benefit upon lapse benefit to policyholders who did not purchase the optional nonforfeiture benefit.

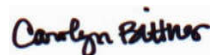
Rate Stability Experience Filing

The projection presented in the actuarial memorandum represents year one of the required three years of reporting following implementation of the most recent rate increase and year two following the implementation of the prior rate increase. Filing UHAS-130647687 was approved on 11/9/2016 and was based on data through 12/31/2015, and filing UHAS-131210905 was approved on 3/6/2018 and was based on data through 12/31/2016. The attached Rate Stability Exhibit shows the projected values for 2017 from the prior filing and compares them to the actual results through 12/31/2017. Please note the most recent rate increase of 16.67% became effective 6/1/2018.

The analyses and projections included in this filing continue to demonstrate that the rate increase was justified. The justification for the rate increase was based on higher-than-expected persistency. The actual lapse and mortality rates deviate from the original pricing assumptions and exceed moderately adverse conditions.

If you have any questions or would like to discuss any of the materials included in this filing, please feel free to contact me by telephone (262) 510-5776 or email at cbittner@uhasinc.com.

Sincerely,



Carolyn Bittner, FSA, MAAA
Consulting Actuary



Rate Stability Exhibit for PA

Nationwide Experience
FCNH, FCLTC, FCLTC 2000

Calendar Year	Filed Projections Approved 3/6/2018 (Claims by Inc Yr)									Actual Experience (Claims by Inc Yr)					
	With No Rate Increase					With Proposed 16.67% Rate Increase Effective 2/1/2018					With Actual 16.67% Rate Increase Effective 6/1/2018				
	Earned Premium		Incurred	Loss Ratio		Earned Premium		Incurred	Loss Ratio		Collected Premium		Incurred	Loss Ratio	
	Actual	PA RateLvl	Claims	Actual	PA RateLvl	Actual	PA RateLvl	Claims	Actual	PA RateLvl	Actual	PA RateLvl	Claims	Actual	PA RateLvl
2017	899,317	899,317	897,499	99.8%	99.8%	899,317	899,317	897,499	99.8%	99.8%	934,225	946,184	912,248	97.6%	96.4%



HEALTH ACTUARIES

A DIVISION OF RISK STRATEGIES

Catholic Order of Foresters

Actuarial Memorandum

Rate Increase for Individual Long Term Care Policy Forms FCNH, FCLTC, FCLTC 2000

1. Scope and Purpose of Filing

The purpose of this rate filing is to request a revision on the above-referenced policy forms and any associated riders (please see Exhibit A for a list of riders) and to demonstrate that, after the requested rate increase, applicable loss ratio requirements are met. It is not intended to be used for any other purpose.

The filing applies to existing policyholders only, as this is a closed block of business. The rate increase is needed in order to offset the higher-than-expected lifetime loss ratios caused by higher-than-expected policyholder persistency.

2. Requested Rate Action

The company is requesting a level rate increase of 40% on the forms and all riders.

3. Status

The policy forms affected represent a closed block of business.

4. Description of Benefits

All plans are intended to be tax-qualified, and benefits become payable when the insured either requires substantial assistance with at least 2 of 6 ADLs (bathing, dressing, continence, eating, toileting and transferring) for 90 days or requires substantial supervision due to severe cognitive impairment.

FCNH

The base plan is administered on a "pool of money" basis, where the pool of money is calculated as the nursing home daily maximum times the benefit period in days. The insured is provided with the services of a quality care coordinator, who evaluates the insured's functional abilities, prepares a Plan of Care, and coordinates the care to be received. An insured who qualifies for benefits is eligible to receive any nursing home or assisted living facility services that are included in the Plan of Care developed by the quality care coordinator. A 21-day per year nursing home bed reservation benefit could be included in the Plan of Care, or hospice care could be provided. Premiums are waived after the policyholder has been receiving covered care for 90 days and as long as the person continues to receive covered benefits. This policy also includes a rate stabilization benefit.

Optional rider FCIPR increases the daily maximum and the maximum policy benefit by 5%, compounded annually, on each policy anniversary.

Optional rider FCNFBR provides, after 3 years inforce, the cumulative premiums paid to be available upon lapse to continue coverage for a shortened benefit period (SBP). The SBP (in days) is calculated as the cumulative premiums paid divided by the nursing home daily maximum, subject to a minimum of 30 days

FCLTC

The base plan covers nursing home, assisted living, and hospice care up to the daily benefit and home health care and adult day care up to half of the daily benefit. It is administered on a "pool of money" basis, where the pool of money is calculated as the nursing home daily maximum times the benefit period in days. The insured is provided with the services of a quality care coordinator, who evaluates the insured's functional abilities, prepares a Plan of Care, and coordinates the care to be received. An insured who qualifies for benefits is eligible to receive all long term care services that are included in the Plan of Care developed by the quality care coordinator. This could include nursing home care, assisted living facility care, home health care or adult day care. A 21-day per year nursing home bed reservation benefit could be included in the Plan of Care, or hospice care could be provided. Respite care could be provided, up to 21 days per year. Other alternate services could be included, if agreed to by all parties. There is also a "caregiver training benefit" to pay for the costs of an informal caregiver in receiving training, thus making formal long term care services unnecessary. This benefit is subject to a \$500 lifetime maximum. Premiums are waived after the policyholder has been receiving covered care for 90 days and as long as the person continues to receive covered benefits.

Optional rider FCHHIR doubles the maximum daily benefit payable for home health care and adult day care.

Optional rider FCIPR increases the daily maximum and the maximum policy benefit by 5%, compounded annually, on each policy anniversary.

Optional rider FCNFBR provides, after 3 years inforce, the cumulative premiums paid to be available upon lapse to continue coverage for a shortened benefit period (SBP). The SBP (in days) is calculated as the cumulative premiums paid divided by the nursing home daily maximum, subject to a minimum of 30 days

FCLTC 2000

The base plan covers long-term facility care, assisted living facility care, and care in a hospital long term care unit up to the daily benefit amount and home health care and adult day care up to half of the daily benefit. There is an alternative care benefit that covers expenses incurred as agreed upon by the insured and the Order, a caregiver training benefit that covers expenses incurred up to \$500 over the life of the policy, and a respite care benefit equal to the expenses incurred up to 21 times the daily benefit amount per calendar year. Premiums are waived after the policyholder has been receiving covered care for 90 days and as long as the person continues to receive covered benefits.

Optional rider FCHHIR 2000 doubles the maximum daily benefit payable for home health care and adult day care.

Optional rider FCCIP 2000 increases the daily benefit amount and unused policy maximum by 5%, compounded annually, on each policy anniversary.

Optional rider FCSIP 2000 increases the daily benefit amount and unused policy maximum by 5% of the original amount on each policy anniversary.

Optional rider FCGPIP 2000 gives the insured the option to purchase additional coverage in order to increase the daily benefit and policy maximum amounts by an amount based on the CPI for medical expenses every 2 years (as long as the insured is not receiving benefits and has not declined two consecutive offers).

Optional rider FCNFBR 2000 provides continued coverage with a shortened benefit period and no further inflation increases for policies that lapse after 3 years.

Optional rider FCROP 2000 returns a percentage of the total premiums paid, less any benefits paid, with the percentage based upon the number of years the policy has been in force.

Optional rider FCROB 2000 restores the policy maximum to the Initial Policy Maximum if the policyholder has not received Qualified Long-Term Care services for at least 180 consecutive days; is not eligible for benefits, and is not receiving benefits. The policy maximum may be restored an unlimited number of times.

Optional rider FCSSB 2000 allows spouses who are both covered under FCLTC 2000 policies with the same benefits to combine their maximum lifetime benefits so that the first spouse to exhaust benefits under one policy may then start using benefits under the second spouse's policy

Optional rider FCSWP 2000 provides for the policyholder's spouse (who is also covered under an FCLTC 2000 policy) to have their premium waived while the policyholder is confined to a Long-Term Care Facility or Assisted Living Facility, beginning after at least 90 days of confinement.

Optional rider FCSSP 2000 provides for the insured's policy to become paid-up upon the death of their spouse (who was also covered under an FCLTC 2000 policy), provided both policies were in force for at least 10 years.

5. Renewability Clause

The policy forms are guaranteed renewable for the life of the policyholder.

6. Applicability

The premium increase contained in this memorandum will be applicable to all insureds of the policy forms and riders described in Section 4 and, since this is a closed block, the rate increase will apply only to existing policyholders.

7. Morbidity

The morbidity assumptions used in the actuarial analysis and the attached projection exhibits are based on a review of the historical claim experience combined with industry data, and the experience of the entire company's long-term care block was combined for credibility purposes. This morbidity study shows results consistent with the original pricing assumptions, and therefore original morbidity assumptions are used for projected claims. The projected claims were produced by a first principles model, using industry-based incidence, continuance, and salvage assumptions with adjustments made to replicate the original morbidity assumptions. These original morbidity assumptions continue to reflect the company's current best estimate of future morbidity and are consistent with the gross premium valuation testing.

8. Mortality

Future projections are based on the assumed mortality per the Annuity 2000 table, adjusted by 90% for active lives and 200% for disabled lives.

9. Persistency

The assumed persistency is the sum of the following:

- Non-death (voluntary lapse and benefit exhaustion) termination; and,
- Death rates, as described in Section 8.

A total termination study was completed by comparing the difference between the actual total termination rates observed on the policy forms and the assumed mortality described in the previous section. The resulting difference was then attributed to the voluntary lapses and, based on this analysis, future projections are based on an assumed voluntary lapse rate of 0.5% for all future years. Please see section 23 for the results of this experience study. The result of this assumption development process is that the assumed total terminations reflect the actual experienced total termination rates. No additional shock lapses or anti-selection factors were assumed as a result of the proposed rate increase.

10. Expenses

This filing does not include projected expenses, nor is any part of the requested rate increase intended to cover greater-than-expected expenses.

11. Marketing Method

The referenced policy forms were marketed to individuals by licensed agents.

12. Underwriting

All policies subject to the requested rate increase were subject to full medical underwriting in accordance with company standards in place at the time of issue. Since Catholic Order of Foresters has not sold long-term care since 2005, all inforce policies are now past the initial select period, so no further underwriting wear-off is reflected in the projections.

13. Premium Classes

Premiums vary by benefit period, elimination period, optional rider selection, state of issue, premium mode, risk class, and the issue age of the policyholder. Discounts were available for certain members of the clergy, members of associations that negotiated a discount with the company, and individuals whose spouse also purchased a policy.

14. Issue Age Range

These forms were available to individuals at ages 18-84. Premiums are based on the policyholder's age at issue.

15. Area Factors

Premiums do not vary within a state by geographic region.

16. Average Annual Premium

Please see Exhibit B for statewide and nationwide average annualized premium as of 12/31/2017.

17. Premium Modalization Rules

The filed premiums are multiplied by the modal factors shown below in order to create modal billed premiums.

<u>Billing Mode</u>	<u>Factor</u>
Annual	1.0000
Semi-Annual	0.5200
Quarterly	0.2650
Monthly PAC on FCLTC 2000	0.0865
Monthly PAC on all other forms	0.0875

18. Trend Assumptions – Medical and Insurance

Benefits are capped by the daily benefit limit, and daily benefit limits are generally below the daily charge amounts. Consequently, we have assumed no medical trend in the attached projections.

19. Minimum Required Loss Ratio for the Forms

Where applicable, the minimum loss ratio for the referenced policy forms is 60%.

20. Anticipated Loss Ratio

The anticipated loss ratio after the proposed premium rate increase shown in Section 24 meets the applicable requirement.

21. Distribution of Business

Please see Exhibit C for the distribution of in force business by premium class.

22. Contingency and Risk Margins

The revised premium rates do not contain an explicit margin for contingency.

23. Experience on the Forms (Past and Future Anticipated)

Please see Exhibit D for the historical and projected future experience.

For credibility purposes, the historical Catholic Order of Foresters nationwide experience was combined. Incurred claims reflect claims incurred through 12/31/2017 and paid through 6/30/2018, and the claim reserve as of 6/30/2018. Both payments and reserves have been discounted back to the year of incurral using the valuation interest rate. Please note that collected premiums were used as estimates for the historical earned premiums.

The valuation interest rate of 4.50% was used to accumulate the historical experience and discount the future experience to 12/31/2017. The use of the valuation interest rate is consistent with the rate stability model regulation.

The following table shows the results of the total termination study for policy durations five and later. As described in Section 9, a total termination study was completed by comparing the difference between the actual total termination rates observed on the policy forms through 12/31/2017 and the assumed mortality. The resulting difference was then attributed to the voluntary lapses, which was 0.32%. Because of the low level of total terminations, a slightly higher lapse rate of 0.50% was assumed, and the 0.50% lapse rate is used for this premium rate increase filing and the projections accompanying this filing.

Lapse Experience Analysis for Policy Durations 5+				
Original Lapse Assumption	Actual Lapse	Actual-to-Original Lapse	Revised Lapse Assumption	Actual-to-Revised Lapse
1% - 4%	0.32%	8% - 32%	0.50%	64%

This deviation from the original pricing assumptions exceeds the moderately adverse condition for lapses, as well as the moderately adverse condition for mortality (more than a 10% decrease in each).

24. Lifetime Loss Ratio

Exhibit D details the historical and projected future experience. The following summarizes the lifetime loss ratio calculation detailed in the exhibit and also demonstrates how the experience with the proposed rate increase meets the 58/85 test using present values at the valuation interest rate (4.5%):

Assuming 40% Rate Increase

	<u>Present Values at 4.5%</u>		<u>Loss Ratio</u>
	<u>Earned Premium</u>	<u>Incurred Claims</u>	
Historical	24,372,675	8,141,787	33.4%
Projected	12,376,898	31,937,879	258.0%
Total	36,749,572	40,079,666	109.1%

Without Proposed 40% Rate Increase

	<u>Present Values at 4.5%</u>		<u>Loss Ratio</u>
	<u>Earned Premium</u>	<u>Incurred Claims</u>	
Historical	24,372,675	8,141,787	33.4%
Projected	9,318,463	31,269,194	335.6%
Total	33,691,137	39,410,981	117.0%

58/85 Test

$$58\% \times 30,961,019 = 17,957,391$$

$$36,749,572 - 30,961,019 = 5,788,554$$

$$85\% \times 5,788,554 = 4,920,270$$

$$17,957,391 + 4,920,270 = 22,877,661$$

$$40,079,666 > 22,877,661$$

25. History of Rate Adjustments

<u>Approval Date</u>	<u>Rate Adjustment</u>
1/18/2000	Complete repricing of FCLTC
11/9/2016	20.00% Increase
3/6/2018	16.67% Increase

26. Number of Policyholders

Please see Exhibit B for the statewide and nationwide policy counts as of 12/31/2017.

27. Proposed Effective Date

Following department approval, the requested rate increase will be implemented as soon as possible after the required notice period. The projections assume an implementation date of 06/01/2019.

28. Data Reliance and Data Quality

All referenced analyses and projections were performed under the direction of a colleague. I have reviewed the results of the analyses and projections for reasonableness. In performing the analysis, preparing this filing, and rendering the actuarial opinion below, I relied on data provided to me by Catholic Order of Foresters. I reviewed the data for reasonableness and consistency, but I did not perform a detailed audit of the data.

Based on my review of the data, the data are appropriate for the purpose used, and to the best of my knowledge the data contain no material data quality issues.

29. Actuarial Certification

I am a Fellow of the Society of Actuaries and a Member of the American Academy of Actuaries, and I meet the Qualification Standards of the American Academy of Actuaries to render this actuarial opinion.

This memorandum complies with all applicable Actuarial Standards of Practice, including Actuarial Standards of Practice No. 8 “Regulatory Filings for Health Benefits, Accident and Health Insurance, and Entities Providing Health Benefits,” No. 18 “Long-Term Care Insurance,” and No. 23 “Data Quality.”

I hereby certify that, to the best of my knowledge and judgment, this rate submission is in compliance with the applicable laws and regulations of the State of Pennsylvania, including 89a.118.

In forming my opinion, policy design, underwriting and claims adjudication practices have been taken into consideration.

In my opinion, the rates are not excessive or unfairly discriminatory. This filing will enhance premium adequacy but may not be sufficient to prevent future rate action. Given this, I cannot certify the proposed rates to be sustainable over the life of the form with no future premium increases or that they would be sufficient to cover anticipate costs under moderately adverse conditions.



Carolyn Bittner, FSA, MAAA
Consulting Actuary
United Health Actuarial Services, Inc.

April 25, 2019
Date

Attachments:Exhibits

Exhibit A:	List of Associated Riders
Exhibit B:	In Force Counts and Annualized Premium
Exhibit C:	Distribution of In Force Policies
Exhibit D:	Historical and Projected Experience

Premium Rate Sheets

FCNH	Current Rates
	Proposed Rates
	Premium Adjustment Factors (applicable to both current and proposed rates)
FCLTC	Current Rates
	Proposed Rates
	Premium Adjustment Factors (applicable to both current and proposed rates)
FCLTC 2000	Current Rates
	Proposed Rates
	Premium Adjustment Factors (applicable to both current and proposed rates)

Exhibit A

List of Associated Riders

FCNH Riders

FCIPR	Optional Inflation Rider
FCNFBR	Optional Non-Forfeiture Rider

FCLTC Riders

FCHHIR	Optional Home Health Care Rider
FCIPR	Optional Inflation Rider
FCNFBR	Optional Non-Forfeiture Rider

FCLTC 2000 Riders

FCHHIR 2000	Home Health Care Increase Rider
FCCIP 2000	5% Compound Inflation Protection Rider
FCSIP 2000	5% Simple Inflation Protection Rider
FCGPIP 2000	Guaranteed Purchase Inflation Rider
FCNFBR 2000	Nonforfeiture Benefit Rider
FCROP 2000	Return of Premium Rider
FCROB 2000	Restoration of Benefits Rider
FCSSB 2000	Spousal Shared Benefit Rider
FCSWP 2000	Spousal Waiver of Premium Rider
FCSSP 2000	Survivor Spouse Paid-Up Rider

Catholic Order of Foresters
Exhibit B
 In Force Counts and Annualized Premium

In Force Data as of 12/31/2017

		Annualized Premium	Policies in Force	Average Annualized Premium	
				Current	After Proposed 40% Increase
PA	FCNH	909	1	909	1,273
	FCLTC	2,184	2	1,092	1,529
	<u>FCLTC 2000</u>	<u>12,493</u>	<u>7</u>	<u>1,785</u>	<u>2,499</u>
	Total	15,586	10	1,559	2,182
Nationwide	FCNH	27,622	24	1,151	1,611
	FCLTC	112,812	93	1,213	1,698
	<u>FCLTC 2000</u>	<u>834,466</u>	<u>599</u>	<u>1,393</u>	<u>1,950</u>
	Total	974,900	716	1,362	1,906

Catholic Order of Foresters
Exhibit C
Distribution of In Force Policies

Distribution of Policies In Force Nationwide as of 12/31/2017
FCNH, FCLTC, FCLTC 2000

Issue Age	Dist	Issue Age	Dist	Benefit Period	Dist	Discount	Pols With
29	0.1%	58	4.9%	2 Years	6.3%	Association	20.4%
30	0.0%	59	4.1%	3 Years	28.6%	Clergy	4.5%
31	0.0%	60	4.7%	5 Years	42.3%	Spousal	80.0%
32	0.0%	61	4.5%	<u>Lifetime</u>	<u>22.8%</u>		
33	0.0%	62	4.2%	Total	100.0%		
34	0.1%	63	3.1%				
35	0.1%	64	5.7%	<u>Elimination Period</u>	<u>Dist</u>		
36	0.0%	65	4.6%	20 Day	16.1%		
37	0.0%	66	3.4%	60 Day	11.7%		
38	0.1%	67	3.1%	90 Day	70.1%		
39	0.3%	68	2.7%	<u>180 Day</u>	<u>2.1%</u>		
40	0.4%	69	2.5%	Total	100.0%		
41	0.6%	70	1.5%				
42	0.3%	71	1.3%	<u>Premium Mode</u>	<u>Dist</u>		
43	0.3%	72	1.0%	Annual	54.7%		
44	1.3%	73	0.8%	Semi-Annual	5.9%		
45	0.4%	74	0.4%	Quarterly	7.8%		
46	1.4%	75	0.1%	<u>Monthly</u>	<u>31.6%</u>		
47	1.0%	76	0.3%	Total	100.0%		
48	2.5%	77	0.1%				
49	4.3%	78	0.1%	<u>Risk Class</u>	<u>Dist</u>		
50	2.4%	79	0.0%	Preferred	69.3%		
51	3.5%	80	0.3%	Standard	30.4%		
52	2.9%	81	0.0%	Substandard I	0.1%		
53	4.2%	82	0.1%	<u>Substandard II</u>	<u>0.1%</u>		
54	5.2%	83	0.0%	Total	100.0%		
55	5.6%	84	0.0%				
56	5.0%	85	0.0%	<u>Optional Rider</u>	<u>Pols With</u>		
57	4.5%			HHC Increase	48.3%		
		Total	100.0%	5% Compound Inflation	51.4%		
				5% Simple Inflation	16.3%		
				Guaranteed Purchase Inflation	32.3%		
				Nonforfeiture Benefit	0.7%		
				Return of Premium	39.5%		
				Restoration of Benefits	9.5%		
				Spousal Shared Benefit	20.7%		
				Spousal Waiver of Premium	18.2%		
				Survivor Spouse Paid-Up	7.1%		

Catholic Order of Foresters
Exhibit D
Historical and Projected Experience

Nationwide Experience
 FCNH, FCLTC, FCLTC 2000
 (Reflects Claims Paid and Reserves Held As Of 6/30/2018)

Calendar Year	Life Years	Without Proposed Rate Increase							With Proposed 40% Rate Increase Effective 6/1/2019						
		Premium*		By Incurral Year			Incurred Loss Ratio		Premium*		By Incurral Year			Incurred Loss Ratio	
		Actual	PA RateLvl	Pd Clms	Clm Res	Inc Clms	Actual	PA RateLvl	Actual	PA RateLvl	Pd Clms	Clm Res	Inc Clms	Actual	PA RateLvl
1998	7	26,884	26,884	0	0	0	0.0%	0.0%	26,884	26,884	0	0	0	0.0%	0.0%
1999	65	116,684	116,684	0	0	0	0.0%	0.0%	116,684	116,684	0	0	0	0.0%	0.0%
2000	169	280,636	280,636	0	0	0	0.0%	0.0%	280,636	280,636	0	0	0	0.0%	0.0%
2001	368	520,048	520,048	0	0	0	0.0%	0.0%	520,048	520,048	0	0	0	0.0%	0.0%
2002	595	829,398	829,398	0	0	0	0.0%	0.0%	829,398	829,398	0	0	0	0.0%	0.0%
2003	831	1,043,188	1,043,188	80,503	0	80,503	7.7%	7.7%	1,043,188	1,043,188	80,503	0	80,503	7.7%	7.7%
2004	915	1,074,557	1,074,557	0	0	0	0.0%	0.0%	1,074,557	1,074,557	0	0	0	0.0%	0.0%
2005	902	1,065,845	1,065,845	160,105	0	160,105	15.0%	15.0%	1,065,845	1,065,845	160,105	0	160,105	15.0%	15.0%
2006	886	1,025,325	1,025,325	116,866	0	116,866	11.4%	11.4%	1,025,325	1,025,325	116,866	0	116,866	11.4%	11.4%
2007	870	1,010,652	1,010,652	85,999	0	85,999	8.5%	8.5%	1,010,652	1,010,652	85,999	0	85,999	8.5%	8.5%
2008	857	993,656	993,656	144,352	0	144,352	14.5%	14.5%	993,656	993,656	144,352	0	144,352	14.5%	14.5%
2009	845	955,914	955,914	180,597	0	180,597	18.9%	18.9%	955,914	955,914	180,597	0	180,597	18.9%	18.9%
2010	832	955,064	955,064	391,451	0	391,451	41.0%	41.0%	955,064	955,064	391,451	0	391,451	41.0%	41.0%
2011	819	953,319	953,319	427,385	128,063	555,449	58.3%	58.3%	953,319	953,319	427,385	128,063	555,449	58.3%	58.3%
2012	810	922,435	922,435	352,939	0	352,939	38.3%	38.3%	922,435	922,435	352,939	0	352,939	38.3%	38.3%
2013	799	903,082	903,082	638,950	64,381	703,331	77.9%	77.9%	903,082	903,082	638,950	64,381	703,331	77.9%	77.9%
2014	788	892,958	892,958	468,074	175,384	643,458	72.1%	72.1%	892,958	892,958	468,074	175,384	643,458	72.1%	72.1%
2015	775	874,661	874,661	962,619	484,789	1,447,409	165.5%	165.5%	874,661	874,661	962,619	484,789	1,447,409	165.5%	165.5%
2016	757	833,611	833,611	501,964	443,141	945,106	113.4%	113.4%	833,611	833,611	501,964	443,141	945,106	113.4%	113.4%
2017	731	934,225	946,184	141,914	770,334	912,248	97.6%	96.4%	934,225	946,184	141,914	770,334	912,248	97.6%	96.4%
2018	704		988,260			949,288		96.1%		988,260			949,314		96.1%
2019	680		1,037,063			1,062,635		102.5%		1,167,760			1,063,683		91.1%
2020	654		990,795			1,194,232		120.5%		1,368,943			1,200,177		87.7%
2021	628		936,218			1,309,146		139.8%		1,310,705			1,320,724		100.8%
2022	601		882,028			1,418,252		160.8%		1,234,840			1,435,754		116.3%
2023	574		827,610			1,539,700		186.0%		1,158,654			1,563,211		134.9%
2024	546		772,376			1,657,547		214.6%		1,081,327			1,687,048		156.0%
2025	517		717,862			1,790,802		249.5%		1,005,007			1,826,218		181.7%
2026	489		664,607			1,897,788		285.6%		930,450			1,938,820		208.4%
2027	460		612,436			1,998,462		326.3%		857,410			2,044,750		238.5%
2028	431		561,724			2,115,993		376.7%		786,413			2,167,107		275.6%
2029	403		512,686			2,215,684		432.2%		717,760			2,271,002		316.4%
2030	374		465,670			2,290,894		492.0%		651,938			2,349,709		360.4%
2031	347		420,758			2,357,306		560.3%		589,061			2,418,899		410.6%
2032	319		378,125			2,421,318		640.3%		529,375			2,485,007		469.4%
2033	293		337,938			2,485,420		735.5%		473,113			2,550,506		539.1%
2034	267		300,327			2,489,856		829.0%		420,458			2,555,603		607.8%
2035	243		265,435			2,480,768		934.6%		371,609			2,546,461		685.3%
2036	219		233,315			2,425,719		1039.7%		326,641			2,490,679		762.5%
2037	197		203,895			2,387,125		1170.8%		285,452			2,450,780		858.6%
2038	176		177,068			2,340,928		1322.0%		247,896			2,402,726		969.2%
2039	156		152,712			2,234,043		1462.9%		213,797			2,293,431		1072.7%
2040	137		130,843			2,127,267		1625.8%		183,180			2,183,795		1192.2%
2041	120		111,381			1,994,479		1790.7%		155,933			2,047,729		1313.2%
2042	105		94,243			1,859,859		1973.5%		131,941			1,909,580		1447.3%
2043	91		79,194			1,728,727		2182.9%		110,871			1,774,712		1600.7%
2044	78		66,122			1,562,494		2363.1%		92,570			1,604,564		1733.3%
2045	67		54,897			1,422,714		2591.6%		76,855			1,460,830		1900.8%
2046	57		45,305			1,277,581		2819.9%		63,427			1,311,766		2068.1%
2047	48		37,191			1,144,264		3076.7%		52,068			1,174,607		2255.9%
2048	40		30,346			1,010,182		3328.8%		42,485			1,036,841		2440.5%
2049	33		24,638			875,847		3554.8%		34,493			899,042		2606.4%
2050	28		19,902			765,166		3844.6%		27,863			785,159		2817.9%
2051	23		15,983			651,267		4074.8%		22,376			668,337		2986.9%
2052	18		12,761			557,191		4366.2%		17,866			571,627		3199.5%
2053	15		10,110			470,906		4658.0%		14,153			482,993		3412.6%
2054	12		7,955			391,894		4926.5%		11,137			401,918		3609.0%
2055	10		6,222			326,732		5251.1%		8,711			334,966		3845.3%
2056	8		4,840			266,814		5512.2%		6,777			273,513		4036.2%
2057	6		3,749			220,427		5879.9%		5,248			225,824		4302.8%
Past Future Lifetime	without interest	16,212,142	16,224,101			6,719,811	41.4%	41.4%	16,212,142	16,224,101			6,719,811	41.4%	41.4%
			13,194,589			61,716,717		467.7%		17,774,823			63,159,410		355.3%
			29,418,691			68,436,529		232.6%		33,998,924			69,879,222		205.5%
Past Future Lifetime	with interest at 4.5%	24,360,450	24,372,675			8,141,787	33.4%	33.4%	24,360,450	24,372,675			8,141,787	33.4%	33.4%
			9,318,463			31,269,194		335.6%		12,376,898			31,937,879		258.0%
			33,691,137			39,410,981		117.0%		36,749,572			40,079,666		109.1%
58/85 Test			original prem	30,961,019		58%	17,957,391		add'l prem	5,788,554		85%	4,920,270	sum	22,877,661

*Historical premium shown is collected premium, and projected premium shown is earned premium

As of 6/30/2018, the active life reserve held was \$23,982,442.

Catholic Order of Foresters
Exhibit D
Historical and Projected Experience

Pennsylvania Experience
FCNH, FCLTC, FCLTC 2000
(Reflects Claims Paid and Reserves Held As Of 6/30/2018)

Calendar Year	Life Years	Historical Experience				
		Premium*	By Incurral Year			Incurred Loss Ratio
			Pd Clms	Clm Res	Inc Clms	
1998	0	0	0	0	0	
1999	1	1,670	0	0	0	0.0%
2000	4	8,086	0	0	0	0.0%
2001	5	8,015	0	0	0	0.0%
2002	5	9,676	0	0	0	0.0%
2003	11	20,065	0	0	0	0.0%
2004	12	18,123	0	0	0	0.0%
2005	12	19,252	0	0	0	0.0%
2006	11	18,876	0	0	0	0.0%
2007	11	15,480	0	0	0	0.0%
2008	11	15,480	0	0	0	0.0%
2009	11	15,480	0	0	0	0.0%
2010	11	15,480	0	0	0	0.0%
2011	11	15,480	0	0	0	0.0%
2012	11	15,480	0	0	0	0.0%
2013	11	15,480	0	0	0	0.0%
2014	11	15,480	0	0	0	0.0%
2015	11	15,480	0	0	0	0.0%
2016	10	12,051	0	0	0	0.0%
2017	10	16,475	0	0	0	0.0%

Projected Experience
We have not provided a Pennsylvania-specific projection due to the lack of credible experience.

*Historical premium shown is collected premium.

As of 6/30/2018, the active life reserve held was \$455,083.

Please note that 0 claims have been incurred to-date in Pennsylvania, so Pennsylvania-specific morbidity experience is non-credible.

AUTHORIZATION FOR FILING

The Catholic Order of Foresters hereby authorizes United Health Actuarial Services, Inc. (UHAS, Inc.), to submit for approval, on behalf of Catholic Order of Foresters and under applicable insurance statutes, regulations, and rules, the Long Term Care rate and loss ratio filing described in the cover letter.

Terrence D. Resche
Signature
Appointed Actuary for the
Catholic Order of Foresters

June 16, 2016
Date



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CATHOLIC ORDER OF FORESTERS
A CATHOLIC FRATERNAL BENEFIT LIFE INSURANCE SOCIETY SINCE 1883
TRIPLUS SERVICES, INC. • THIRD-PARTY ADMINISTRATOR
PO BOX 3735
OMAHA, NE 68103-0735

PHONE: (877) 702-7770
FAX: (855) 447-4719
EMAIL: CustomerSupport@TriPlusServices.com

3/28/2018

Name
Street Address
City, State, Zip

Policy No: #####
Insured: Name

Dear Name:

We value your business and want to thank you for choosing Catholic Order of Foresters to provide your long term care coverage. We are committed to ensuring that your long term care insurance benefits are there when you need them.

The purpose of this letter is to notify you that we have determined that it is necessary to increase premiums for your coverage. This is not a premium notice; if you are on a direct, paper bill mode you will receive a notice of premium due approximately 30 days before the premium is due. Your future premium rate(s) will be as follows:

* The Annual renewal premium rate of \$#####.## will become effective on 06/01/2018. This represents a percentage increase of ##.##%. Please note that this premium rate does not reflect any future rate increases that may occur.

Reasons for the Premium Increase

It is necessary to increase premiums due to greater-than-anticipated claims payments expected over the lifetime of all policies like yours. Premium rates must be adjusted to ensure current and future claims are adequately funded, so that long term care benefits will be available to you when you need them. Please be assured that you have not been singled out, and this premium increase is not a reflection of any previous claims history you may have had.

Options Available To You:

We do understand that this premium increase may make it more difficult to continue your current level of coverage. Please know that we do not take this action lightly and we recognize that raising premiums may have a significant impact on you. As such, below are options that you may consider at this time:

- 1. Continue current level of coverage:** Keep your exact coverage without any changes and the new premium will take effect on 06/01/2018. If we do not hear from you, then we will assume that you have accepted the higher premium amount.

(Continued on reverse)

- 2. Adjust your coverage:** You may consider adjusting the level of coverage in order to make premiums more affordable. We have provided you with the attached Benefit Adjustment Option Return Form, which illustrates some of the policy adjustment offer(s) that are available as an alternative to the current plan, while still maintaining essential coverage. If you would like to investigate additional benefit adjustment options, not mentioned in the attached, please contact us at 877-702-7770.

Please discuss potential policy changes with your family or advisors as well as our Customer Support Department to make sure any changes to your policy will best suit your needs.

- 3. Elect the Contingent Benefit Upon Lapse:** If you determine that you would like to discontinue this coverage we will provide a Contingent Benefit Upon Lapse. The Contingent Benefit Upon Lapse is a pool of money that you can use to fund future long-term care expenses. If you elect this option, your policy will be paid-up with a maximum benefit equal to the sum of the premiums you have paid thus far. If you currently have an open claim, or if a new claim is filed, any benefits paid for dates of service after the effective date of the paid-up policy status will be applied to and will not exceed the policy's new maximum benefit amount. To determine the minimum number of days payable under the policy, the sum of all premiums paid is divided by the maximum Daily Benefit at the time of lapse. Benefit Eligibility is determined by the policy terms and all benefits paid by us will not exceed the maximum benefits which would have been payable if the policy had remained in premium paying status.

This Contingent Benefit Upon Lapse acts as a form of reduced paid up coverage and will be available should you choose to lapse the coverage at any point between now and 120 days following the date the new premium rates take effect. If you would like to elect this benefit please complete and return the enclosed Request to Exercise Contingent Benefit Upon Lapse form. If you do not complete this form, and you lapse your policy within 120 days after the effective date of the rate increase, this benefit will be automatically applied.

When you purchased your long-term care coverage, you made a conscious decision to protect yourself and your family from the increasing costs associated with long-term care, which can be significant; therefore we would like to stress the importance of retaining this valuable coverage. Before considering the options above, please carefully evaluate your situation and your reasons for initially purchasing this coverage.

In addition, you may also wish to contact the State Health Insurance Assistance Program (SHIP) located in your state if you need additional counseling on determining your response. Please go to www.shiptalk.org to find the nearest SHIP to you.

This policy is guaranteed renewable. You have the right to renew your policy for life as long as you continue to pay your premium on time. The company has the right to change your premium if it does so for all policies of your class in your state.

We have enclosed additional information about this increase in the attached Frequently Asked Questions document. For any additional questions, please call our Policyholder Services Department at 877-702-7770, election option 3, then 1, at the prompt, and a customer support representative will be happy to assist you.

Sincerely,

TriPlus Services, Inc.

Third Party Administrator for Catholic Order of Foresters



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CATHOLIC ORDER OF FORESTERS

A CATHOLIC FRATERNAL BENEFIT LIFE INSURANCE SOCIETY SINCE 1883

TRIPLUS SERVICES, INC. • THIRD-PARTY ADMINISTRATOR

PO BOX 3735

OMAHA, NE 68103-0735

PHONE: (877) 702-7770

FAX: (855) 447-4719

EMAIL: CustomerSupport@TriPlusServices.com

FREQUENTLY ASKED QUESTIONS FOR INSURED

Q. Why is my premium increasing?

A: It is necessary to increase premiums due to greater than anticipated claims payments expected over the lifetime of all policies like this one. Many of the pricing assumptions that were common in the industry when your product was originally marketed have not developed as expected. The factors that contribute to the higher anticipated claims payments include morbidity, persistency and mortality. The claims experience trends have emerged higher than originally priced and more policyholders have kept their coverage in force, resulting in more claims in the later policy durations. This premium increase will help ensure that the Company is able to live up to its obligations to you as a policyholder.

Q. When will my premium increase?

A: Premium for your in force coverage will increase on the date specified in your letter. If your premium is paid through automatic bank draft, your new premium will be deducted automatically from your account on the stated date. If you pay your premium by check, you will receive a premium notice for the increased amount approximately 30 days before that premium due date.

Q. I thought my premium could never go up. Am I being singled out for this rate increase because of my age or health?

A: No. Your premium rates for long term care insurance will never change based on changes in your age or health. As stated in your policy, we can only change premium rates on a class basis, not an individual basis. This means that the rates have been changed on all policies like yours on a statewide class basis. Even though you may not have used your policy, we need to ensure that we can deliver on the promises of the policy should you need to make a claim in the future.

Q. Will my premium continue to increase?

A: The Company will continue to monitor emerging claims experience to ensure that it is able to deliver on the promises of your policy, primarily to pay any future claims you might incur.

Q. Have other insurance companies raised their long term care rates?

A: Yes. The deviations from expected claim and persistency assumptions that the Company has experienced have also been experienced by other long term care insurance carriers. Numerous other carriers have also implemented rate increases for long term care policies.

(continued on reverse)

Q. What are the options to reduce my coverage?

A: Please refer to the Benefit Adjustment Option Return Form for a description of some of the options available to you. If there are no specific options listed in your letter, or you would like to investigate additional options, please contact our Policyholder Services Department at 877-702-7770, pressing option 3, then 1, at the prompt.

Q. To keep my policy without paying the higher premium, how do I change my coverage?

A: To change your coverage we require your request in writing. You may submit the Benefit Adjustment Option Return Form included with your notification letter, or you may contact our Policyholder Services Department at 877-702-7770, election option 3, then 1, at the prompt, to obtain a proposed benefit adjustment form for those options not identified in your letter.

Q. How long do I have to make any coverage changes before the effective date of the increase?

A: You can change your coverage at any time, however in order for us to process any changes before the rate increase effective date you should submit your election to us 15 business days in advance of the effective date of the increase.

Q. I am currently receiving Long Term Care benefits. Do I have to remit the new premium?

A: The premium increase will not impact your current claim benefits. Your policy will continue to provide you with the benefits in accordance with the terms of the coverage you purchased. If your policy contains a provision that waives premium and you are currently receiving that benefit, the new premium will also be waived until such time as you are no longer eligible for waiver of premium, as stated in your policy. You will have to pay the increased premium only after you return to a premium paying status. If your policy does not have a waiver of premium provision or if you do not qualify under this provision, then the premium increase will impact you, even if you are on claim. Please refer to the "Options Available To You" section of the rate increase notification letter.

Q. What safety measures are in place should COF become financially distressed?

A: The premium increases are designed to prevent this from happening. Also, COF, like all other fraternal insurers, may assess its members (in this case, all COF policyholders), a Maintenance of Reserve fee, should the need ever arise.

Q. Whom should I contact if I have additional questions about this rate increase?

A: If you have additional questions, please contact our Policyholder Services Department at 877-702-7770, election option 3, then 1, at the prompt. The office hours are Monday through Friday 7:30 a.m. to 4:45 p.m. Central time.



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BENEFIT ADJUSTMENT OPTION RETURN FORM

Date: 3/28/2018

Policyholder: Name
 Policy Number: #####

If you would like to implement one of the benefit adjustment options listed in this letter please circle the option you would like to exercise and then sign, date, and return this page using the enclosed envelope. While you are able to adjust your benefits at any time, to ensure that your option is effective before the rate increase effective date, please return your option to us within 45 days from the date of this letter.

If you would like to investigate additional benefit adjustment offers, not mentioned below, please call our dedicated Customer Support Department, toll free at 877-702-7770.

If you do not wish to implement any of these options you do not need to return this form to us.

- * Reduce your policy maximum Benefit Period from Lifetime to 5 Years and reduce your base Daily Benefit Amount from \$####.## to \$####.## for a new Annual premium of \$####.##. Since you have an active Simple Inflation rider, your new inflated Daily Benefit Amount would be \$####.## as of 06/01/2018 and is subject to further increases per rider terms.
- * Reduce your policy maximum Benefit Period from Lifetime to 5 Years for a new Annual premium of \$####.##
- * Increase your Elimination Period from 20 Days to 90 Days for a new Annual premium of \$####.##
- * Remove your Return of Premium Rider for a new Annual premium of \$#####.##

Please be aware when considering these options, that if you choose to reduce the maximum available under your policy, then any prior claims made on your policy will affect the benefits available after the reduction.

By signing and returning this page, Catholic Order of Foresters will change the policy's available benefits, effective 06/01/2018, to the choice you selected above. You will receive an updated benefit rider once this change to the policy has been made. Please note that the above premium rates are for the current rate increase period and do not reflect any additional rate increases that may be scheduled to occur, or may occur in the future, whether mentioned in this letter or not.

Signature _____ Date _____

If anyone other than the policyholder signs above, we must have copies of Durable Financial Power of Attorney papers or other legal representative papers on file.



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EMAIL: CustomerSupport@TriPlusServices.com

REQUEST TO EXERCISE CONTINGENT BENEFIT UPON LAPSE

Date: 3/28/2018

Policyholder: Name

Policy Number: #####

NOTE: This benefit can be elected by either lapsing your coverage by means of not paying your premium, or by completing and returning this form to us. Either way your election for this coverage must be made within 120 days following the effective date of this rate increase. ***If you do not want to exercise the Contingent Benefit Upon Lapse, then you do not need to complete this form.***

By completing and returning this form, I am electing to stop paying premiums for my long term care coverage and I am exercising the Contingent Benefit Upon Lapse option available with this rate increase.

By exercising this option, I understand that:

- My new maximum benefit amount under this policy will be equal to the sum of the premiums paid into the policy from the issue date through the current paid to date or the remaining amount of benefits available under the policy; whichever is less; and,
- Once I exercise this option, I will only be able to reinstate my original maximum benefit amount if I submit a premium payment within 65 days from my premium due date; and,
- I must meet the eligibility requirements required under the Policy in order to receive benefit payments.

By signing below I agree to elect the Contingent Benefit Upon Lapse and I agree to all of the above.

Signature _____ Date _____

If anyone other than the policyholder signs above, we must have copies of Durable Financial Power of Attorney papers or other legal representative papers on file.