

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

**Series 11 and Prior Actuarial Memorandum**

**April 11, 2024**

<u>Product</u>	<u>Number</u>
Prior to Series 11	
Comprehensive Form	LTC-CD8-MD
Comprehensive Form	LTC-CD9-MA-MD
Series 11 Individual	
Facility Only Form	NTQ11-337-MA-MD-601
Comprehensive Form	LTQ11-336-MA-MD-601
Comprehensive Form	LTQ11-336-MA-MD-1100
Home Health Only Form	HTQ11-338-MA-MD-601

MedAmerica Insurance Company (MedAmerica) is requesting a rate increase on the above-listed long-term care policy form(s). The company issued this policy form(s) in Maryland from October 8, 1996 to September 1, 2005 and is no longer marketing it in any jurisdiction.

Nationwide, MedAmerica and its affinity partners are requesting a premium rate increase that varies by benefit period and inflation option, except where limited by regulatory restrictions or the limited amount of in-force business. This actuarial memorandum captures the pooled nationwide experience of the above-listed policy form(s) as well as similar individual and group policy forms of the same product series issued nationwide by MedAmerica and its affinity partners. Since the prior nationwide request, the business of certain affinity partners has been commuted back to the original companies. MedAmerica no longer has any risk for these policies and, therefore, their experience is not reflected in any of the experience exhibits in this filing.

As indicated in the enclosed cover letter, the company is aware of COMAR 31.14.01.04.A(5) and that the requested rate increase is greater than 15%. The company would like to advise policyholders about future rate increases and therefore the company requests an opportunity to work with the Department to obtain a current approval of the requested premium rate increase with the agreement that the approved increase will be implemented at no more than 15% per year. This actuarial memorandum reflects the nationwide requested increase, except the Maryland-specific increase is reflected in Section 19 and the supplement to the actuarial memorandum.

## **1. Purpose of Filing**

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

## **2. Requested Rate Increase**

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

The rate increases were developed by targeting the lifetime loss ratios that would have been achieved if all jurisdictions had implemented the originally requested rate increases. The average nationwide cumulative rate increase for policies with a lifetime benefit was then limited to the actuarial equivalent level determined at the time of the prior nationwide request. In Maryland, the requested rate increase reflects the average remaining increase split by benefit period (non-lifetime versus lifetime) and inflation option (non-auto versus auto) from the prior request in addition to the new nationwide request.

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The average nationwide requested rate increases are shown in Table 2.1 below, with the limitation of the cumulative increase for lifetime benefit period policies. The table below also provides the average prior and cumulative increases by policy form cohort, benefit period, and inflation option based on the nationwide distribution of business.

**Table 2.1**  
**Nationwide Average<sup>[1]</sup> Rate Increase Request**

Policy Form Cohort	Benefit Period	Inflation Option	Prior Increase	Requested Increase	Cumulative Increase
Prior to Series 11	Non-Lifetime	Non-Auto	117.2%	50.4%	227%
	Non-Lifetime	Auto	145.8	152.8	521
	Lifetime	Non-Auto	195.8	226.0	864
	Lifetime	Auto	203.1	270.8	1024
Series 11 Individual	Non-Lifetime	Non-Auto	121.2	47.7	227
	Non-Lifetime	Auto	126.9	173.9	521
	Lifetime	Non-Auto	211.1	210.0	864
	Lifetime	Auto	191.9	284.9	1024
Series 11 Group	Non-Lifetime	Non-Auto	140.4	35.9	227
	Non-Lifetime	Auto	229.1	88.8	521
	Lifetime	Non-Auto	119.2	339.9	864
	Lifetime	Auto	169.9	316.4	1024
<b>Average</b>			<b>172.7</b>	<b>139.2</b>	<b>552</b>

[1] As of December 31, 2022 and excludes policies assumed to be paid up prior to implementation of the requested rate increase.

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

In Maryland, a larger rate increase is needed to reach the actuarially equivalent level on this block of business, as stated above. If it is the Department's position to only allow future rate increases if experience deteriorates from the current expectations in this filing, the company respectfully requests that the Department notify them and allow the company to revise the current rate increase request.

Upon reaching an agreement with the Department on the increase, the company will provide the proposed rate tables.

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

### 3. Description of Benefits

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

At issue, the insured may have had the option to choose one of the following inflation options, the availability of which varied by policy form: simple inflation for life, simple inflation for 20 years, or compound inflation. The two simple inflation options provide for benefit levels that increase on each anniversary date by 5% of the daily benefit amount chosen at issue for either the life of the insured or 20 years depending on the option chosen. The compound inflation option provides for benefit levels that increase on each anniversary date by 5% compounded annually for the life of the insured. These

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automatic increasing benefits apply even when the insured is in claim status. For Series 11 Group forms, the insured may have also had the option of a guaranteed purchase option. Under this option, the insured can purchase additional coverage amounts of 5% per year without additional underwriting.

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

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

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

**4. Renewability**

These policies are guaranteed renewable for life.

**5. Applicability**

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

**6. Actuarial Assumptions**

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

a. Active Assumptions

- i. Claim Incidence Probabilities were developed using the 2020 Milliman *Long-Term Care Guidelines (Guidelines)* incidence curves, with adjustments for retrospective improvement to bring the *Guidelines* forward to 2022, adverse selection for historical rate increases, and contingent nonforfeiture / shortened non-forfeiture (collective, CNF) policies. The incidence curves were developed based on starting site of care—assisted living facility (ALF), skilled nursing facility (SNF), or home health care (HHC)—and further adjusted based on historical experience for various policy and policyholder characteristics.
- ii. Voluntary Lapse Probabilities for the above-listed policy form(s) vary by policy duration (ultimate for 10+), attained age (ultimate for 68+), benefit period, inflation option, marital status, gender, and premium payment option. Exhibit A-2a of Appendix A to this memorandum summarizes the ultimate lapse probabilities by key characteristics for lifetime-pay policies.

For policies with limited or reduced premium payment options, the durational voluntary lapse probabilities were adjusted based on the following criteria:

- For the ten-pay option, a reduction of 65% of the durational lapse probabilities is assumed for durations one through four, a reduction of 70% of the durational lapse probabilities is assumed for durations five through eight, and 0% lapse thereafter.
  - For the twenty-pay option, a reduction of 50% of the durational lapse probabilities is assumed for durations one through eight, a reduction of 75% of the durational lapse probabilities is assumed for durations nine through fifteen, and 0% lapse thereafter.
- iii. Active Mortality Probabilities reflect the 2012 Individual Annuitant Mortality (2012IAM) Basic table with adjustments to make it applicable to an active-life exposure base and retrospective active mortality improvement to bring the table forward to 2022. These mortality probabilities were then adjusted based on historical mortality experience for various policy and policyholder characteristics. The mortality adjustment factors can be found in Exhibit A-3a of Appendix A to this memorandum.

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b. Disabled Assumptions

- i. Disabled Mortality Probabilities reflect the 2020 *Guidelines* disabled mortality tables with adjustments based on historical experience for various policy and policyholder characteristics.
- ii. Recovery Probabilities were developed using the 2020 *Guidelines* with adjustments based on historical experience for various policy and policyholder characteristics.

c. Utilization Assumption

- i. Policy Duration Utilization was developed using the 2020 *Guidelines* with adjustments to reflect current utilization percentages and cost of care trends. The policy duration utilization assumption also captures how utilization by site of care changes over time due to (1) inflation of the daily benefit and (2) cost of care trends.
- ii. Claim Duration Utilization was developed based on the policy duration utilization assumption described above with adjustments for actual claim experience by starting site of care. The adjustment factors applied to the policy duration utilization assumption can be found in Exhibit A-7a of Appendix A to this memorandum.

d. Policyholder Behavior Due to the Rate Increase

At the time of a rate increase, insureds have the option to elect a CBUL or reduced benefit options (RBO).

Insureds who elect a CBUL are modeled as a lapse (i.e., the CBUL benefit is not modeled), which results in a slightly lower lifetime loss ratio than if the CBUL benefit had been modeled.

CBUL and RBO election rates are determined as a function of the rate increase magnitude. Appendix A to this memorandum outlines the assumed CBUL and RBO election rates applied in the year of rate increase implementation; Appendix A also provides the calculation for the reduction in premium and claims due to RBO elections.

Adverse selection associated with the requested rate increase is a function of CBUL and RBO election and applied to the claim incidence rates. Appendix A to this memorandum provides the calculation for the increase in morbidity due to adverse selection associated with the requested rate increase.

These assumptions are applied on a seriatim basis and based on the additional increase needed to achieve the cumulative increases shown in Section 2.

- e. Interest Rate consistent with the maximum valuation interest rate applicable to the year of issue (ranges from 3.5% to 5.5% and averages 4.5%) is used to demonstrate compliance with the minimum loss ratio requirements.
- f. Prospective Annual Improvement in the active mortality and claim incidence assumptions is assumed for 10 years starting in 2023. Annual improvement factors vary by attained age and gender based on the G2 improvement scale from the 2012IAM table.
- g. Expenses have not been explicitly projected for the purpose of demonstrating compliance with minimum loss ratio requirements. Originally filed expense assumptions are assumed to remain appropriate, except reductions are made to the renewal commission rates so that the total commissions paid before and after any increase in premium are similar (i.e., commissions are not paid on the increased premium).

The above assumptions are based on the experience of the above-listed policy form(s) and similar forms issued by MedAmerica and its affinity partners, other similar business issued by MedAmerica

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(including its affinity partners) and MedAmerica's acquired blocks of business (including certain policies that have since commuted), industry experience, and actuarial judgment. The above assumptions are deemed reasonable for the particular policy form(s) in this filing and are considered best-estimate (most-likely without explicit margin).

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

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

**7. Marketing Method**

Agents and brokers of the company marketed these products.

**8. Underwriting Description**

Policies on the individual forms were fully underwritten.

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

Groups of at least 500 employees may have been eligible for modified guaranteed issue underwriting for those actively at work and, for some forms, those not currently at work. For some forms, if the employer agreed to contribute 100% of premium for a base plan for a minimum of three years, no underwriting was required for those actively at work. For other forms, spouses of active employees and spouses of employees who were not currently at work were subject to short form underwriting.

For both individual and group business, the company used various underwriting tools in addition to the application, which may have included medical records, an attending physician's statement, telephone interview, and/or face-to-face assessment.

**9. Premiums**

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

**10. Issue Age Range**

Issue ages are from 18 to 85.

**11. Area Factors**

Area factors are not used for these products.

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**12. Premium Modalization Rules**

The following modal factors and percent distributions (based on the nationwide in-force count as of December 31, 2022) are applied to the annual premium (AP):

**Table 12.1**  
**Nationwide Modal Factors and Distribution**

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

**13. Reserves**

Active life reserves have not been used in the experience exhibits for this rate increase analysis for the purpose of demonstrating compliance with minimum loss ratio requirements. Claim reserves as of December 31, 2022 have been discounted to the incurral date of each respective claim and included in historical incurred claims. An incurred but not reported (IBNR) reserve balance as of December 31, 2022 has been allocated to the 2022 calendar year and included in historical incurred claims.

**14. Trend Assumptions**

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

**15. Demonstration of Satisfaction of Loss Ratio Requirements**

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

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

Exhibit I provides actual and projected experience using current assumptions. Actual experience is provided from inception through 2022 and then projected on a seriatim basis for 60 years using the current assumptions described above in Section 6. The actual and projected experience is based on nationwide premiums that reflect prior rate increases filed for use between January 2010 and June 2023, which average 173% across all jurisdictions. The after-increase projected experience reflects the additional increase needed to achieve the cumulative increases shown in Section 2 on a seriatim basis.

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

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

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

Policy Form Cohort	Benefit Period	Inflation Option	Before Increase	After Increase
Prior to Series 11	All	All	113%	107%
Series 11 Individual	All	All	115	91
Series 11 Group	All	All	103	85
All <sup>[1]</sup>	Non-Lifetime	Non-Auto	83	80
All	Non-Lifetime	Auto	125	99
All	Lifetime	Non-Auto	112	104
All	Lifetime	Auto	163	129
All	Non-Lifetime	All	99	84
All	Lifetime	All	153	124
All	All	All	111	93

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

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

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

1. Accumulated value of the initial earned premium times 64%,
2. 85% of the accumulated value of prior premium rate schedule increases,
3. Present value of projected initial earned premium times 64%, and
4. 85% of the present value of projected premium in excess of the projected initial earned premium.

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

The following table demonstrates that the alternative 58%/85% test is passed by policy form cohort, benefit period, and inflation option. The 'All' row corresponds to that shown in Exhibit II. Values in the table are shown in millions of dollars. The 'Alternative 58% Loss Ratio' represents the greater of 58% and the expected lifetime loss ratio.



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

Policy Form Cohort	Benefit Period	Inflation Option	Alternative 58% Loss Ratio	Item 5 <sup>[1]</sup>	Item 7 <sup>[2]</sup>	Result <sup>[3]</sup>
Prior to Series 11	All	All	64%	\$153.3	\$261.2	Pass
Series 11 Individual	All	All	60	226.1	338.4	Pass
Series 11 Group	All	All	69	209.6	266.2	Pass
All <sup>[4]</sup>	Non-Lifetime	Non-Auto	64	133.5	168.4	Pass
All	Non-Lifetime	Auto	65	286.0	435.4	Pass
All	Lifetime	Non-Auto	61	23.3	38.6	Pass
All	Lifetime	Auto	60	101.1	213.6	Pass
All	Non-Lifetime	All	65	465.5	613.5	Pass
All	Lifetime	All	60	124.4	252.2	Pass
All	All	All	64	590.1	865.7	Pass

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

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

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

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

**16. Actual-to-Expected Experience**

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

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

Policy Form Cohort	Benefit Period	Inflation Option	Lifetime Loss Ratio			Actual-to-Expected	
			Before Increase	After Increase	Expected	Before Increase	After Increase
Prior to Series 11	All	All	105%	100%	64%	1.65	1.57
Series 11 Individual	All	All	107	85	60	1.79	1.42
Series 11 Group	All	All	94	79	69	1.36	1.13
All <sup>[1]</sup>	Non-Lifetime	Non-Auto	78	75	64	1.21	1.17
All	Non-Lifetime	Auto	115	92	65	1.75	1.41
All	Lifetime	Non-Auto	107	100	61	1.74	1.62
All	Lifetime	Auto	151	121	60	2.54	2.04
All	Non-Lifetime	All	91	79	65	1.41	1.21
All	Lifetime	All	142	117	60	2.37	1.95
All	All	All	102	87	64	1.60	1.36

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

Actual and projected experience in the above table is identical to that described in Exhibit I, except historical experience is accumulated at MedAmerica's actual historical earned interest rates, which average 5.2% for this block, and projected experience is discounted at MedAmerica's current best-estimate interest rate assumption of 5.00%. This 5.00% rate represents MedAmerica's expectation of its long-term investment earnings rate based on the average net investment earnings rate projected for MedAmerica's 2022 cash flow testing.

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



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Exhibit III provides a summary of the original pricing assumptions that underlie the expected experience described above.

**17. History of Previous Rate Revisions**

Prior rate increases have been approved and implemented on the above-listed form(s). Exhibit IV provides a status of the rate increase filings, along with the current requested increases. The status is shown for each jurisdiction in which there is business in force as of December 31, 2022. Also included are the number of policies and annualized premium as of December 31, 2022. Exhibit IV is provided for (a) Prior to Series 11, (b) Series 11 Individual, and (c) Series 11 Group policy forms. Each status listing provides the status of (i) the first round and associated follow-ups, (ii) the second round and the first follow-up, (iii) the second and third follow-up filings for the second round of the rate increase requests, and (iv) the current round and associated follow-ups for the current round of requested increases.

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

**18. Analysis Performed to Consider a Rate Increase**

This rate increase is part of the third nationwide request. The experience table in Section 16 above demonstrates that experience has been more adverse from that expected using original pricing assumptions as the A:E loss ratios exceed 1.0. The adverse experience may be due to a combination of higher persistency, higher morbidity, and lower interest.

For policies with a non-lifetime benefit period, in 2017, the second nationwide requested increase was determined such that the company was able to certify that rates would remain stable under MAE. At the time of the third nationwide request, an analysis was performed demonstrating that the anticipated lifetime loss ratio compared to that assumed at the time of the second nationwide request revealed that experience had unfolded more than moderately adverse and crossed the threshold for which the company could consider a rate increase.

For policies with a lifetime benefit period, at the time of the first nationwide request, an analysis of the projected loss ratio compared to that assumed at the time of original pricing revealed that experience had unfolded more than moderately adverse and crossed the original pricing threshold for which the company could consider a rate increase.

**19. Average Annual Premium in Maryland (Based on December 31, 2022 In-Force)**

The number of insureds and the corresponding average annual premium that will be affected by this filing are shown in the table(s) below. The values provided in the table(s) below exclude policies assumed to be paid up prior to implementation of the requested rate increase.

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**Table 19.1**  
**Average Annual Premium**  
**Maryland – MedAmerica**

Policy Form Cohort	Benefit Period	Inflation Option	Number of Insureds	Before Increase Premium	After Requested Increase Premium
Prior to Series 11	Non-Lifetime	Non-Auto	2	\$4,216	\$5,955
	Non-Lifetime	Auto	20	2,510	6,155
	Lifetime	Non-Auto	2	1,769	7,358
	Lifetime	Auto	6	4,892	24,918
	All	All	30	3,051	9,975
Series 11 Individual	Non-Lifetime	Non-Auto	3	2,299	3,248
	Non-Lifetime	Auto	23	3,235	7,934
	Lifetime	Non-Auto	0	0	0
	Lifetime	Auto	8	3,784	19,272
	All	All	34	3,282	10,188
Total	Non-Lifetime	Non-Auto	5	3,066	4,331
	Non-Lifetime	Auto	43	2,898	7,106
	Lifetime	Non-Auto	2	1,769	7,358
	Lifetime	Auto	14	4,259	21,692
	All	All	64	3,174	10,088

**20. Proposed Effective Date**

This rate increase will apply to policies on their next premium payment date following at least a 60-day policyholder notification period after being filed for use by the department of insurance, but no sooner than 36 months after the first phase-in of the prior rate increase was effective. The company will notify policyholders of the approved cumulative rate increase level at the time of implementation of the first year's rate increase.

**21. Distribution of Business as of December 31, 2022 (Based on Nationwide In-Force Insured Count)**

**Table 21.1**  
**Nationwide Distributions of Business**

Issue Ages	Percent Distribution
<40	11%
40-44	8
45-49	14
50-54	20
55-59	22
60-64	16
65-69	7
70-74	2
75+	<1

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

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Benefit Period	Percent Distribution
1-Year	<1%
2-Year	18
3-Year	29
4-Year	6
5-Year	18
6-Year	<1
7-Year	<1
8-Year	<1
10-Year	<1
Lifetime	12
CNF	16

Inflation Option	Percent Distribution
None <sup>[1]</sup>	51%
Simple for Life	3
Compound for Life	36
Simple for 20 Years	11
GPO	<1

[1] Includes policies that previously elected a CNF benefit.

Premium Payment Option	Percent Distribution
Ten-Pay	15%
Twenty-Pay	13
Lifetime-Pay	55
CNF	16

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

**22. Number of Insureds and Annualized Premium (Based on December 31, 2022 In-Force)**

The number of insureds and annualized premium that will be affected by this filing are shown in the tables below. The values provided in the tables below exclude policies assumed to be paid up prior to implementation of the requested rate increase.

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**Table 22.1**  
**Insureds and Annualized Premium**  
**Maryland – MedAmerica**

Policy Form Cohort	Benefit Period	Inflation Option	Number of Insureds	Annualized Premium
Prior to Series 11	Non-Lifetime	Non-Auto	2	\$8,432
	Non-Lifetime	Auto	20	50,203
	Lifetime	Non-Auto	2	3,539
	Lifetime	Auto	6	29,353
	All	All	30	91,527
Series 11 Individual	Non-Lifetime	Non-Auto	3	6,898
	Non-Lifetime	Auto	23	74,413
	Lifetime	Non-Auto	0	0
	Lifetime	Auto	8	30,268
	All	All	34	111,579
Total	Non-Lifetime	Non-Auto	5	15,330
	Non-Lifetime	Auto	43	124,616
	Lifetime	Non-Auto	2	3,539
	Lifetime	Auto	14	59,621
	All	All	64	203,106

**Table 22.2**  
**Insureds and Annualized Premium**  
**Nationwide**

Policy Form Cohort	Benefit Period	Inflation Option	Number of Insureds	Annualized Premium
Prior to Series 11	Non-Lifetime	Non-Auto	114	\$265,091
	Non-Lifetime	Auto	280	971,985
	Lifetime	Non-Auto	62	208,633
	Lifetime	Auto	135	672,371
	All	All	591	2,118,080
Series 11 Individual	Non-Lifetime	Non-Auto	612	594,341
	Non-Lifetime	Auto	1,112	4,350,695
	Lifetime	Non-Auto	87	340,299
	Lifetime	Auto	412	2,318,724
	All	All	2,223	7,604,059
Series 11 Group	Non-Lifetime	Non-Auto	1,646	2,101,773
	Non-Lifetime	Auto	1,862	6,991,767
	Lifetime	Non-Auto	1	628
	Lifetime	Auto	19	82,648
	All	All	3,528	9,176,816
Total	Non-Lifetime	Non-Auto	2,372	2,961,206
	Non-Lifetime	Auto	3,254	12,314,446
	Lifetime	Non-Auto	150	549,560
	Lifetime	Auto	566	3,073,743
	All	All	6,342	18,898,956

**Series 11 and Prior Actuarial Memorandum**

**April 11, 2024**

**23. Actuarial Certification**

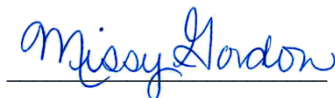
I am a Principal and Consulting Actuary for Milliman, Inc. and retained by MedAmerica to render an opinion with regard to long-term care insurance rates. I am a member of the American Academy of Actuaries. I meet the Academy's qualification standards to render this actuarial opinion and am familiar with the requirements for filing long-term care insurance premiums and rate increases. This filing has been prepared in conformity with Actuarial Standards of Practice No. 8, "Regulatory Filings for Health Benefits, Accident and Health Insurance, and Entities Providing Health Benefits" and 18, "Long-Term Care Insurance" and other applicable standards.

I hereby certify that, to the best of my knowledge and judgment, this rate submission is in compliance with the applicable laws and regulations of this jurisdiction and the rules of this department of insurance. In my opinion, the rates are not excessive or unfairly discriminatory, and bear reasonable relationship to the benefits based on the loss ratio standards of this jurisdiction. This filing will enhance premium adequacy but may not be sufficient to prevent future rate action. If an average premium rate schedule increase of 297% is implemented in Maryland and the underlying assumptions, with moderately adverse conditions reflected, are realized, no further premium rate schedule increases are anticipated.

In forming my opinion, I have used actuarial assumptions and actuarial methods (which gave consideration to policy design, underwriting, and claim adjudication) and such tests of the actuarial calculations as I considered necessary. Based on these assumptions, or statutory requirements where necessary, this premium rate filing is in compliance with the loss ratio standards of this jurisdiction. Certain models were developed to estimate the values included in this filing. The intent of the models was to estimate future experience. I have reviewed the models for consistency, reasonableness, and appropriateness to the intended purpose and in compliance with generally accepted actuarial practice and relevant actuarial standards of practice.

I have relied on data and other information provided by MedAmerica to develop this filing, including but not limited to management's view of when a rate change may be considered, policy design, underwriting and claim adjudication process, seriatim in-force data, claim data, and the company's long-term earnings rate. I have not audited or verified this data and other information. If the underlying data or information is inaccurate or incomplete, the results of this filing may likewise be inaccurate or incomplete.

The basis for contract reserves has been previously filed and is not impacted by this filing.



Missy Gordon, FSA, MAAA  
Principal and Consulting Actuary

Date: April 11, 2024

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

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

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

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

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

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

	Calendar Year	Without Interest			D End of Year Lives	With Max. Val. Interest		
		A Earned Premium	B Incurred Claims	C = B / A Incurred Loss Ratio		E Earned Premium	F Incurred Claims	G = F / E Incurred Loss Ratio
Historical Experience	1992	17,324	0	0%	111	88,682	0	0%
	1993	557,528	112,031	20%	634	2,445,426	474,489	19%
	1994	1,499,801	28,415	2%	1,371	6,084,211	114,140	2%
	1995	2,035,433	60,736	3%	1,372	7,703,136	232,356	3%
	1996	2,079,825	104,057	5%	1,558	7,345,271	336,623	5%
	1997	2,617,587	212,400	8%	1,924	8,585,309	732,876	9%
	1998	4,122,798	399,244	10%	3,429	12,584,208	1,275,497	10%
	1999	6,199,341	887,196	14%	4,078	17,837,600	2,615,488	15%
	2000	7,366,923	1,187,209	16%	4,286	20,170,940	3,341,898	17%
	2001	7,766,383	1,832,801	24%	4,635	20,291,743	4,890,578	24%
	2002	9,673,449	3,898,426	40%	6,106	24,084,478	9,831,054	41%
	2003	13,493,099	2,227,233	17%	11,181	32,032,456	5,336,699	17%
	2004	18,025,968	2,965,428	16%	12,235	40,845,792	6,794,782	17%
	2005	19,574,357	4,437,199	23%	13,501	42,408,860	9,694,347	23%
	2006	20,128,180	5,642,221	28%	13,532	41,628,739	11,752,990	28%
	2007	19,934,019	6,872,869	34%	13,738	39,361,914	13,713,070	35%
	2008	19,624,932	5,181,581	26%	13,761	37,012,427	9,878,704	27%
	2009	18,934,972	6,676,918	35%	13,489	34,145,064	12,158,858	36%
	2010	17,982,174	12,189,408	68%	13,209	31,016,016	21,225,062	68%
	2011	17,442,954	8,146,786	47%	12,964	28,782,643	13,561,074	47%
	2012	18,081,183	9,251,234	51%	13,179	28,528,323	14,704,947	52%
	2013	17,474,168	7,612,552	44%	13,006	26,363,780	11,607,144	44%
Projected Future Experience (60 Years)	2014	16,105,035	13,984,577	87%	12,771	23,235,655	20,346,698	88%
	2015	15,377,679	18,445,436	120%	12,515	21,227,256	25,650,084	121%
	2016	15,034,073	13,750,553	91%	12,473	19,848,886	18,304,472	92%
	2017	14,400,335	14,010,289	97%	11,974	18,206,430	17,839,130	98%
	2018	13,874,195	16,732,816	121%	11,692	16,816,141	20,392,319	121%
	2019	14,264,384	21,001,441	147%	11,424	16,567,027	24,490,820	148%
	2020	14,870,309	21,029,262	141%	11,098	16,544,895	23,462,980	142%
	2021	15,218,579	21,008,863	138%	10,799	16,222,745	22,432,802	138%
	2022	15,307,649	20,350,158	133%	10,555	15,636,810	20,799,794	133%
	2023	14,362,990	21,061,586	147%	9,932	14,061,677	20,606,690	147%
	2024	14,190,163	21,678,147	153%	9,573	13,318,002	20,304,813	152%
	2025	13,696,956	22,800,093	166%	9,228	12,325,969	20,445,962	166%
	2026	12,888,855	24,057,748	187%	8,881	11,122,222	20,656,275	186%
	2027	12,061,641	25,356,008	210%	8,536	9,981,628	20,846,800	209%
	2028	11,172,514	26,684,738	239%	8,195	8,866,873	21,009,648	237%
	2029	10,411,088	28,044,986	269%	7,852	7,925,996	21,146,771	267%
	2030	9,678,745	29,435,720	304%	7,509	7,069,511	21,258,817	301%
	2031	8,969,289	30,896,451	344%	7,167	6,286,603	21,373,499	340%
	2032	8,281,126	32,298,878	390%	6,825	5,570,740	21,403,953	384%
	2033	7,616,771	33,886,067	445%	6,482	4,918,647	21,514,262	437%
	2034	6,972,704	35,337,883	507%	6,140	4,323,319	21,497,713	497%
	2035	6,351,005	36,640,395	577%	5,799	3,781,774	21,360,098	565%
	2036	5,754,183	37,737,687	656%	5,459	3,291,343	21,083,716	641%
	2037	5,185,065	38,563,569	744%	5,123	2,849,592	20,650,666	725%
	2038	4,646,456	38,996,421	839%	4,791	2,454,115	20,018,301	816%
	2039	4,140,656	39,107,084	944%	4,466	2,102,294	19,247,877	916%
	2040	3,668,942	38,982,490	1,062%	4,148	1,791,122	18,397,687	1,027%
	2041	3,232,446	38,522,734	1,192%	3,841	1,517,691	17,433,961	1,149%
	2042	2,831,695	37,771,217	1,334%	3,544	1,279,011	16,394,596	1,282%
	2043	2,466,701	36,685,961	1,487%	3,260	1,072,075	15,272,577	1,425%
	2044	2,136,853	35,406,328	1,657%	2,990	893,863	14,139,440	1,582%
	2045	1,841,063	33,935,429	1,843%	2,734	741,415	12,999,927	1,753%
	2046	1,577,870	32,349,616	2,050%	2,493	611,886	11,886,024	1,943%
	2047	1,345,561	30,565,672	2,272%	2,268	502,605	10,773,837	2,144%
	2048	1,141,891	28,596,596	2,504%	2,058	410,958	9,669,769	2,353%
	2049	964,619	26,482,594	2,745%	1,863	334,587	8,592,631	2,568%
	2050	811,267	24,405,015	3,008%	1,684	271,299	7,598,493	2,801%
	2051	679,396	22,311,674	3,284%	1,519	219,127	6,666,925	3,042%
	2052	566,799	20,210,301	3,566%	1,368	176,391	5,797,837	3,287%
	2053-2057	1,667,975	72,661,072	4,356%	5,018	474,299	18,704,276	3,944%
	2058-2062	614,435	38,569,082	6,277%	2,866	148,022	8,221,248	5,554%
	2063-2067	206,294	18,934,557	9,178%	1,535	42,421	3,373,962	7,953%
	2068-2072	62,811	8,416,640	13,400%	728	11,000	1,252,344	11,385%
	2073-2077	17,445	3,224,018	18,481%	288	2,583	401,979	15,561%
	2078-2082	4,207	997,654	23,712%	93	530	108,266	20,430%
History		379,084,636	240,239,339	63%	278,600	673,652,866	347,991,775	52%
Future		182,218,477	1,071,612,111	588%	166,255	130,751,189	542,111,638	415%
Lifetime		561,303,113	1,311,851,450	234%	444,855	804,404,056	890,103,412	111%

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

	Calendar Year	Without Interest			D End of Year Lives	With Max. Val. Interest		
		A Earned Premium	B Incurred Claims	C = B / A Incurred Loss Ratio		E Earned Premium	F Incurred Claims	G = F / E Incurred Loss Ratio
Historical Experience	1992	17,324	0	0%	111	88,682	0	0%
	1993	557,528	112,031	20%	634	2,445,426	474,489	19%
	1994	1,499,801	28,415	2%	1,371	6,084,211	114,140	2%
	1995	2,035,433	60,736	3%	1,372	7,703,136	232,356	3%
	1996	2,079,825	104,057	5%	1,558	7,345,271	336,623	5%
	1997	2,617,587	212,400	8%	1,924	8,585,309	732,876	9%
	1998	4,122,798	399,244	10%	3,429	12,584,208	1,275,497	10%
	1999	6,199,341	887,196	14%	4,078	17,837,600	2,615,488	15%
	2000	7,366,923	1,187,209	16%	4,286	20,170,940	3,341,898	17%
	2001	7,766,383	1,832,801	24%	4,635	20,291,743	4,890,578	24%
	2002	9,673,449	3,898,426	40%	6,106	24,084,478	9,831,054	41%
	2003	13,493,099	2,227,233	17%	11,181	32,032,456	5,336,699	17%
	2004	18,025,968	2,965,428	16%	12,235	40,845,792	6,794,782	17%
	2005	19,574,357	4,437,199	23%	13,501	42,408,860	9,694,347	23%
	2006	20,128,180	5,642,221	28%	13,532	41,628,739	11,752,990	28%
	2007	19,934,019	6,872,869	34%	13,738	39,361,914	13,713,070	35%
	2008	19,624,932	5,181,581	26%	13,761	37,012,427	9,878,704	27%
	2009	18,934,972	6,676,918	35%	13,489	34,145,064	12,158,858	36%
	2010	17,982,174	12,189,408	68%	13,209	31,016,016	21,225,062	68%
	2011	17,442,954	8,146,786	47%	12,964	28,782,643	13,561,074	47%
	2012	18,081,183	9,251,234	51%	13,179	28,528,323	14,704,947	52%
	2013	17,474,168	7,612,552	44%	13,006	26,363,780	11,607,144	44%
Projected Future Experience (60 Years)	2014	16,105,035	13,984,577	87%	12,771	23,235,655	20,346,698	88%
	2015	15,377,679	18,445,436	120%	12,515	21,227,256	25,650,084	121%
	2016	15,034,073	13,750,553	91%	12,473	19,848,886	18,304,472	92%
	2017	14,400,335	14,010,289	97%	11,974	18,206,430	17,839,130	98%
	2018	13,874,195	16,732,816	121%	11,692	16,816,141	20,392,319	121%
	2019	14,264,384	21,001,441	147%	11,424	16,567,027	24,490,820	148%
	2020	14,870,309	21,029,262	141%	11,098	16,544,895	23,462,980	142%
	2021	15,218,579	21,008,863	138%	10,799	16,222,745	22,432,802	138%
	2022	15,307,649	20,350,158	133%	10,555	15,636,810	20,799,794	133%
	2023	14,362,990	21,061,586	147%	9,932	14,061,677	20,606,690	147%
	2024	14,031,326	21,549,506	154%	9,573	13,169,092	20,184,292	153%
	2025	17,559,581	19,068,811	109%	8,631	15,797,538	17,098,828	108%
	2026	19,984,531	19,779,651	99%	8,248	17,237,181	16,981,705	99%
	2027	18,932,246	20,678,313	109%	7,922	15,656,784	16,999,507	109%
	2028	17,474,740	21,745,708	124%	7,604	13,856,393	17,119,289	124%
	2029	16,222,828	22,857,810	141%	7,288	12,337,387	17,233,473	140%
	2030	15,028,396	24,001,854	160%	6,973	10,963,269	17,332,029	158%
	2031	13,878,156	25,203,453	182%	6,658	9,713,213	17,432,342	179%
	2032	12,766,425	26,358,544	206%	6,344	8,573,879	17,463,960	204%
	2033	11,700,768	27,668,916	236%	6,030	7,541,929	17,562,877	233%
	2034	10,673,067	28,869,779	270%	5,716	6,603,944	17,558,052	266%
	2035	9,686,264	29,950,042	309%	5,402	5,754,498	17,454,177	303%
	2036	8,743,694	30,849,558	353%	5,090	4,988,582	17,228,790	345%
	2037	7,849,513	31,512,751	401%	4,781	4,301,830	16,867,547	392%
	2038	7,007,592	31,854,299	455%	4,476	3,689,838	16,343,766	443%
	2039	6,220,988	31,928,468	513%	4,176	3,147,941	15,705,582	499%
	2040	5,490,831	31,810,805	579%	3,884	2,670,772	15,002,922	562%
	2041	4,818,300	31,429,490	652%	3,600	2,253,332	14,212,675	631%
	2042	4,203,507	30,800,785	733%	3,326	1,890,503	13,357,041	707%
	2043	3,646,105	29,917,311	821%	3,064	1,577,348	12,441,984	789%
	2044	3,144,714	28,869,226	918%	2,814	1,308,918	11,515,476	880%
	2045	2,697,177	27,679,385	1,026%	2,577	1,080,379	10,589,385	980%
	2046	2,300,858	26,404,757	1,148%	2,354	887,147	9,687,370	1,092%
	2047	1,952,774	24,950,438	1,278%	2,144	724,949	8,780,306	1,211%
	2048	1,649,043	23,349,300	1,416%	1,949	589,597	7,881,626	1,337%
	2049	1,385,905	21,612,059	1,559%	1,768	477,368	6,999,549	1,466%
	2050	1,159,343	19,920,370	1,718%	1,600	384,840	6,190,568	1,609%
	2051	965,513	18,202,481	1,885%	1,446	308,983	5,428,779	1,757%
	2052	800,837	16,472,966	2,057%	1,305	247,186	4,717,162	1,908%
	2053-2057	2,318,560	59,124,657	2,550%	4,812	653,707	15,201,987	2,326%
	2058-2062	826,076	31,556,453	3,820%	2,773	197,321	6,727,054	3,409%
	2063-2067	269,142	15,790,939	5,867%	1,495	54,969	2,812,192	5,116%
	2068-2072	80,602	7,127,554	8,843%	712	14,030	1,057,600	7,538%
	2073-2077	22,429	2,704,993	12,060%	281	3,296	336,048	10,196%
	2078-2082	5,382	809,294	15,037%	91	672	87,584	13,030%
History		379,084,636	240,239,339	63%	278,600	673,652,866	347,991,775	52%
Future		259,860,200	883,472,312	340%	156,841	182,720,291	450,200,216	246%
Lifetime		638,944,835	1,123,711,652	176%	435,441	856,373,158	798,191,991	93%



**Exhibit II**  
**Demonstration that the Requested Cumulative Rate Increase Passes the 64%/85% Loss Ratio Minimum**  
**MedAmerica and Affinity Partners' Nationwide Experience with Prior Approved Increases**  
**Series 11 and Prior Policy Forms**

1	Accumulated value of initial earned premium	614,225,312	x	64%	=	392,208,410
2a	Accumulated value of earned premium	673,652,866				
2b	Accumulated value of prior premium rate schedule increases (2a - 1)	59,427,555	x	85%	=	50,513,421
3	Present value of future projected initial earned premium	37,284,309	x	64%	=	23,807,582
4a	Present value of future projected premium	182,720,291				
4b	Present value of future projected premium in excess of the projected initial earned premiums (4a - 3)	145,435,982	x	85%	=	123,620,585
5	Lifetime Earned Premium Times Prescribed Factor: Sum of 1, 2b, 3, and 4b					590,149,999
6a	Accumulated value of incurred claims without the inclusion of active life reserves					347,991,775
6b	Present value of future projected incurred claims without the inclusion of active life reserves					517,730,249
7	Lifetime Incurred Claims with Rate Increase: Sum 6a and 6b					865,722,024
8	Test: 7 is not less than 5					Pass
<p>All values are accumulated or discounted at the maximum valuation interest rate for contract reserves applicable for the year of issue, which ranges from 3.5% to 5.5%.</p> <p>Item 3 reflects the assumed impact of CBUL and RBO to align persistency with that in item 4a.</p> <p>The future projected incurred claims (item 6b) were increased by 15% to reflect assumptions with MAE.</p>						

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

Morbidity	
Prior to Series 11	<p>For Series 5, the original pricing expected nursing home incidence probabilities and continuance tables were developed from a number of sources, but primarily using data published by the Connecticut Department of Health Services. The 1985 National Nursing Home Survey was also used. Selected frequencies were adjusted up for up to the first 12 years following issue to reflect the favorable morbidity expected as a result of the underwriting process. Frequency and length of treatment of the home care and adult day care benefit were based on the 1982 National Long-Term Care Survey. They were adjusted to reflect the effects of elimination periods, policy maximums, and eligibility standards.</p> <p>For Series 8 and 9, the Institutional Benefit probabilities were developed using source data from the 1977 and 1985 National Nursing Home Surveys. The Home and Community Benefits were developed using source data from the 1989 National Long-Term Care Survey. Adjustments were made to the source data to reflect the selection effect of underwriting and the non-duplication of benefits with other payment sources.</p>
Series 11	<p>The original pricing expected nursing home and home care incidence probabilities and continuance tables were taken from the 1997 Milliman <i>Long-Term Care Guidelines (Guidelines)</i> and adjusted for MedAmerica's experience available at the time this rate schedule was developed relative to the 1997 <i>Guidelines</i>. All values were adjusted to reflect the effects of product types, elimination periods, policy maximums, and the eligibility standards.</p>
Mortality	
Prior to Series 11	<p>Series 5 policy forms used the 1965-70 US Society of Actuaries Basic Mortality Table without selection.</p> <p>Series 8 and Series 9 policy forms used the 1980 Commissioners Standard Ordinary Basic Mortality Tables assuming a gender mix of 60% female and 40% male and without selection.</p>
Series 11 Individual	1980 Commissioners Standard Ordinary Basic Mortality Table.
Series 11 Group	Premier Group policy forms used the 1980 Commissioners Standard Ordinary Basic Mortality Table. TNSE policy forms used the 1983 GAM Static table.

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

Prior to Series 11

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

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

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

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

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

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

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

Series 11

Lapse Probabilities

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

Series 11 Individual						
Duration	Lapse Probabilities by Issue Age					
	<60	60-64	65-69	70-74	75-79	80+
1	10.00%	11.00%	12.00%	12.00%	12.00%	12.00%
2	7.00%	7.00%	7.00%	6.00%	4.00%	2.00%
3	5.00%	4.00%	3.00%	3.00%	3.00%	2.00%
4	3.00%	3.00%	2.00%	2.00%	2.00%	2.00%
5	3.00%	2.00%	2.00%	2.00%	2.00%	2.00%
6+	2.00%	2.00%	2.00%	2.00%	2.00%	2.00%

Premier Group						
Duration	Lapse Probabilities by Issue Age					
	<60	60-64	65-69	70-74	75-79	80+
1	10.00%	11.00%	12.00%	12.00%	12.00%	12.00%
2	7.00%	7.00%	7.00%	6.00%	4.00%	2.00%
3	5.00%	4.00%	3.00%	3.00%	3.00%	2.00%
4	3.00%	3.00%	2.00%	2.00%	2.00%	2.00%
5	3.00%	2.00%	2.00%	2.00%	2.00%	2.00%
6+	2.00%	2.00%	2.00%	2.00%	2.00%	2.00%

TNSE					
Duration	Lapse Probabilities by Issue Age				
	<60	60-64	65-69	70-79	80+
1	5.00%	5.00%	5.00%	4.00%	3.00%
2	5.00%	5.00%	5.00%	4.00%	3.00%
3	5.00%	4.00%	3.00%	3.00%	3.00%
4	4.00%	4.00%	3.00%	3.00%	3.00%
5	4.00%	3.00%	3.00%	3.00%	3.00%
6+	3.00%	3.00%	3.00%	3.00%	3.00%

For the 10-pay option, a reduction of 50% of these lapse probabilities was assumed for durations 1 to 6, and 0% lapse thereafter. For the 20-pay option, a reduction of 50% of these lapse probabilities was assumed for durations 1 to 13, and 0% lapse thereafter.

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

Series 11 and Prior	Benefit Expiry Probabilities
	Benefit expiry was not separated from the lapse assumption.
Prior to Series 11	Interest Rate
	Series 5 policy forms used an original pricing earnings rate assumption of 7.10% and Series 8 and 9 policy forms used an original pricing earnings rate assumption of 7.50%.
	An original pricing earnings rate assumption of 7.50% was assumed.
Series 11 Individual	Premier Group policy forms used an original pricing earnings rate assumption of 7.50% and TNSE policy forms used an original pricing earnings rate assumption of 6.00%.
Series 11 Group	
Series 11 and Prior	Improvement
	No mortality or morbidity improvement was assumed.

**Exhibit IV-a-i**  
**MedAmerica and Affinity Partners**  
**Status of Filings as of April 9, 2024**  
**All Jurisdictions in Which These Forms are In Force**  
**Prior to Series 11 Policy Forms**

Jurisdiction	Company	12/31/2022 Policies In Force <sup>[1]</sup>	12/31/2022 Annualized Premium <sup>[1]</sup>	First Round Nationwide Request			First Round Follow-Up			First Round 2nd Follow-Up		
				Requested Increase	Disposition Date	Average Filed Increase <sup>[2]</sup>	Requested Increase	Disposition Date	Average Filed Increase <sup>[2]</sup>	Requested Increase	Disposition Date	Average Filed Increase <sup>[2]</sup>
Arizona	MedAmerica	5	\$12,068	39%	4/15/2010	15%	Not Filed			Not Filed		
Arkansas	MedAmerica	1	\$1,685	Not Filed			Not Filed			Not Filed		
California	MedAmerica	1	\$1,476	Not Filed			Not Filed			Not Filed		
District of Columbia	MedAmerica	214	\$875,982	39%	6/30/2010	39%	No Follow-Up			No Follow-Up		
Idaho	MedAmerica	2	\$3,444	39%	11/8/2010	15%	Not Filed			Not Filed		
Illinois	MedAmerica	4	\$17,359	39%	4/19/2010	39%	No Follow-Up			No Follow-Up		
Iowa	MedAmerica	163	\$566,060	39%	9/8/2010	20%	13%	11/8/2011	7%	8%	3/27/2014	8%
Louisiana	MedAmerica	1	\$910	39%	Disapproved	0%	Not Filed			Not Filed		
Maine	Affinity	5	\$5,255	Not Filed			Not Filed			Not Filed		
Maryland	MedAmerica	30	\$91,527	15%	6/15/2010	15%	15%	5/8/2012	15%	5%	12/4/2014	5%
Massachusetts	MedAmerica	1	\$2,482	Not Filed			Not Filed			Not Filed		
Michigan	MedAmerica	2	\$3,060	39%	1/19/2010	39%	No Follow-Up			No Follow-Up		
Minnesota	MedAmerica	4	\$10,512	39%	Disapproved	0%	Not Filed			Not Filed		
Mississippi	MedAmerica	15	\$32,938	25%	4/8/2010	25%	11%	1/6/2012	11%	No Follow-Up		
New Jersey	MedAmerica	10	\$32,384	39%	6/30/2010	39%	No Follow-Up			No Follow-Up		
New York	MedAmerica	1	\$3,032	Not Filed			Not Filed			Not Filed		
North Carolina	MedAmerica	20	\$25,904	39%	1/3/2011	25%	Not Filed			Not Filed		
	Affinity	1	\$1,586	Not Filed			Not Filed			Not Filed		
Ohio	MedAmerica	19	\$47,674	39%	3/4/2010	39%	No Follow-Up			No Follow-Up		
Pennsylvania	MedAmerica	49	\$203,168	39%	5/13/2010	39%	No Follow-Up			No Follow-Up		
South Dakota	MedAmerica	31	\$153,065	39%	3/9/2010	39%	No Follow-Up			No Follow-Up		
Vermont	MedAmerica	3	\$8,736	39%	Disapproved	0%	Not Filed			Not Filed		
Virginia	MedAmerica	2	\$4,594	Not Filed			Not Filed			Not Filed		
Wisconsin	MedAmerica	1	\$2,028	10%	1/12/2011	10%	10%	2/18/2014	10%	Not Filed		
	Affinity	6	\$11,151	Not Filed			Not Filed			Not Filed		

[1] Excludes policies assumed to be paid up prior to implementation of the requested rate increase. Annualized premium reflects all rate increases filed for use between January 2010 and June 2023.

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

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

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

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

**Exhibit IV-a-ii**  
**MedAmerica and Affinity Partners**  
**Status of Filings as of April 9, 2024**  
**All Jurisdictions in Which These Forms are In Force**  
**Prior to Series 11 Policy Forms**

		12/31/2022 Policies In Force <sup>[1]</sup>	12/31/2022 Annualized Premium <sup>[1]</sup>	Second Round Nationwide Request					Second Round Follow-Up				
				Requested Increase <sup>[3]</sup>	Status <sup>[2][4][5]</sup>	Date Submitted	Disposition Date	Average Filed Increase <sup>[2][3]</sup>	Requested Increase <sup>[3]</sup>	Status <sup>[2][4][5]</sup>	Date Submitted	Disposition Date	Average Filed Increase <sup>[2][3]</sup>
Jurisdiction	Company												
Arizona	MedAmerica	5	\$12,068	148%	Filed	7/21/2017	9/12/2018	44%	86%	Filed	4/8/2021	6/6/2022	13%
Arkansas	MedAmerica	1	\$1,685		Not Filed					Not Filed			
California	MedAmerica	1	\$1,476		Not Filed					Not Filed			
District of Columbia	MedAmerica	214	\$875,982	96%	Filed	4/5/2017	5/8/2017	10%	10%	Filed	8/24/2018	12/19/2018	10%
Idaho	MedAmerica	2	\$3,444	247%	Withdrawn	7/27/2017	1/3/2019	0%	320%	Filed	6/24/2020	4/29/2021	0%
Illinois	MedAmerica	4	\$17,359	119%	Filed	6/7/2017	1/11/2018	119%		No Follow-Up			
Iowa	MedAmerica	163	\$566,060	141%	Filed	3/31/2017	6/5/2017	18%	107%	Filed	8/17/2018	10/10/2018	30%
Louisiana	MedAmerica	1	\$910	299%	Disapproved	6/29/2017	10/16/2017	0%		Not Filed			
Maine	Affinity	5	\$5,255		Not Filed					Not Filed			
Maryland	MedAmerica	30	\$91,527	102%	Filed	5/1/2017	12/14/2017	15%	15%	Filed	8/28/2018	12/11/2018	13%
Massachusetts	MedAmerica	1	\$2,482	158%	Filed	8/4/2017	10/17/2018	40%		Not Filed			
Michigan	MedAmerica	2	\$3,060	124%	Filed	6/16/2017	6/27/2017	124%		No Follow-Up			
Minnesota	MedAmerica	4	\$10,512	184%	Filed	5/10/2017	9/19/2017	75%	76%	Filed	10/12/2020	6/9/2021	44%
Mississippi	MedAmerica	15	\$32,938	141%	Filed	7/28/2017	3/16/2018	25%	25%	Filed	8/24/2018	6/5/2019	13%
New Jersey	MedAmerica	10	\$32,384	80%	Filed	6/7/2017	1/11/2018	80%		No Follow-Up			
New York	MedAmerica	1	\$3,032		Not Filed					Not Filed			
North Carolina	MedAmerica	20	\$25,904	162%	Filed	5/9/2017	2/14/2018	25%	211%	Filed	11/11/2020	1/10/2022	33%
	Affinity	1	\$1,586		Not Filed					Not Filed			
Ohio	MedAmerica	19	\$47,674	92%	Filed	4/5/2017	6/29/2017	15%	15%	Filed	8/29/2018	2/4/2019	15%
Pennsylvania	MedAmerica	49	\$203,168	87%	Filed	3/9/2017	9/22/2017	20%	61%	Filed	8/21/2018	12/4/2018	20%
South Dakota	MedAmerica	31	\$153,065	166%	Filed	5/17/2017	6/30/2017	166%		No Follow-Up			
Vermont	MedAmerica	3	\$8,736	209%	Filed	6/8/2017	8/21/2019	57%		Not Filed			
Virginia	MedAmerica	2	\$4,594	263%	Filed	1/9/2018	9/3/2020	121%		Not Filed			
Wisconsin	MedAmerica	1	\$2,028	138%	Filed	6/26/2017	10/10/2017	138%		No Follow-Up			
	Affinity	6	\$11,151	135%	Filed	6/26/2017	10/10/2017	135%		No Follow-Up			

[1] Excludes policies assumed to be paid up prior to implementation of the requested rate increase. Annualized premium reflects all rate increases filed for use between January 2010 and June 2023.

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

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

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

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



**Exhibit IV-a-iii**  
**MedAmerica and Affinity Partners**  
**Status of Filings as of April 9, 2024**  
**All Jurisdictions in Which These Forms are In Force**  
**Prior to Series 11 Policy Forms**

Jurisdiction	Company	12/31/2022 Policies In Force <sup>[1]</sup>	12/31/2022 Annualized Premium <sup>[1]</sup>	Second Round 2nd Follow-Up					Second Round 3rd Follow-Up				
				Requested Increase <sup>[3]</sup>	Status <sup>[2][4][5]</sup>	Date Submitted	Disposition Date	Average Filed Increase <sup>[2][3]</sup>	Requested Increase <sup>[3]</sup>	Status <sup>[2][4][5]</sup>	Date Submitted	Disposition Date	Average Filed Increase <sup>[2][3]</sup>
Arizona	MedAmerica	5	\$12,068		Not Filed					Not Filed			
Arkansas	MedAmerica	1	\$1,685		Not Filed					Not Filed			
California	MedAmerica	1	\$1,476		Not Filed					Not Filed			
District of Columbia	MedAmerica	214	\$875,982	10%	Filed	2/26/2020	9/29/2020	10%	10%	Filed	8/25/2021	12/26/2021	10%
Idaho	MedAmerica	2	\$3,444		Not Filed					Not Filed			
Illinois	MedAmerica	4	\$17,359		No Follow-Up					No Follow-Up			
Iowa	MedAmerica	163	\$566,060	91%	Filed	10/14/2020	1/27/2021	18%		Not Filed			
Louisiana	MedAmerica	1	\$910		Not Filed					Not Filed			
Maine	Affinity	5	\$5,255		Not Filed					Not Filed			
Maryland	MedAmerica	30	\$91,527	108%	Filed	4/29/2020	1/12/2021	18%		Not Filed			
Massachusetts	MedAmerica	1	\$2,482		Not Filed					Not Filed			
Michigan	MedAmerica	2	\$3,060		No Follow-Up					No Follow-Up			
Minnesota	MedAmerica	4	\$10,512		Not Filed					Not Filed			
Mississippi	MedAmerica	15	\$32,938		Not Filed					Not Filed			
New Jersey	MedAmerica	10	\$32,384		No Follow-Up					No Follow-Up			
New York	MedAmerica	1	\$3,032		Not Filed					Not Filed			
North Carolina	MedAmerica	20	\$25,904		Not Filed					Not Filed			
	Affinity	1	\$1,586		Not Filed					Not Filed			
Ohio	MedAmerica	19	\$47,674	15%	Filed	6/24/2020	3/2/2022	15%		Not Filed			
Pennsylvania	MedAmerica	49	\$203,168	47%	Filed	1/10/2020	4/25/2020	10%	38%	Filed	3/5/2021	9/14/2021	13%
South Dakota	MedAmerica	31	\$153,065		No Follow-Up					No Follow-Up			
Vermont	MedAmerica	3	\$8,736		Not Filed					Not Filed			
Virginia	MedAmerica	2	\$4,594		Not Filed					Not Filed			
Wisconsin	MedAmerica	1	\$2,028		No Follow-Up					No Follow-Up			
	Affinity	6	\$11,151		No Follow-Up					No Follow-Up			

[1] Excludes policies assumed to be paid up prior to implementation of the requested rate increase. Annualized premium reflects all rate increases filed for use between January 2010 and June 2023.

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

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

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

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

**Exhibit IV-a-iv**  
**MedAmerica and Affinity Partners**  
**Status of Filings as of April 9, 2024**  
**All Jurisdictions in Which These Forms are In Force**  
**Prior to Series 11 Policy Forms**

Jurisdiction	Company	12/31/2022 Policies In Force <sup>[1]</sup>	12/31/2022 Annualized Premium <sup>[1]</sup>	Current Round Nationwide Request					Current Round Follow-Up					Current Round 2nd Follow-Up					Average Cumulative Increase Filed <sup>[2]</sup>
				Requested Increase <sup>[3]</sup>	Status <sup>[2][4][5]</sup>	Date Submitted	Disposition Date	Average Filed Increase <sup>[2][3]</sup>	Requested Increase <sup>[3]</sup>	Status <sup>[2][4][5]</sup>	Date Submitted	Disposition Date	Average Filed Increase <sup>[2][3]</sup>	Requested Increase <sup>[3]</sup>	Status <sup>[2][4][5]</sup>	Date Submitted	Disposition Date	Average Filed Increase <sup>[2][3]</sup>	
Arizona	MedAmerica	5	\$12,068		TBD														87%
Arkansas	MedAmerica	1	\$1,685		Not Filing														0%
California	MedAmerica	1	\$1,476		Not Filing														0%
District of Columbia	MedAmerica	214	\$875,982	10%	Filed	10/28/2022	11/18/2022	10%	10%	Filed	1/2/2024	2/5/2024	10%						146%
Idaho	MedAmerica	2	\$3,444		Not Filing														15%
Illinois	MedAmerica	4	\$17,359	59%	Filed	3/29/2022	7/29/2022	53%	10%	Pending	2/9/2024								365%
Iowa	MedAmerica	163	\$566,060	212%	Filed	3/30/2022	7/21/2022	28%	144%	Pending	3/5/2024								223%
Louisiana	MedAmerica	1	\$910		Not Filing														0%
Maine	Affinity	5	\$5,255		Not Filing														0%
Maryland	MedAmerica	30	\$91,527	227%	Not Yet Filed														112%
Massachusetts	MedAmerica	1	\$2,482	91%	Filed	4/12/2022	6/20/2023	40%		TBD									96%
Michigan	MedAmerica	2	\$3,060	22%	Withdrawn	4/29/2022	6/13/2022	0%		TBD									211%
Minnesota	MedAmerica	4	\$10,512	165%	Pending	2/15/2024													152%
Mississippi	MedAmerica	15	\$32,938	25%	Filed	11/11/2022	10/19/2023	13%		TBD									121%
New Jersey	MedAmerica	10	\$32,384	62%	Filed	3/29/2022	7/29/2022	45%	15%	Pending	2/9/2024								261%
New York	MedAmerica	1	\$3,032		Not Filing														0%
North Carolina	MedAmerica	20	\$25,904	88%	Pending	6/21/2023													108%
	Affinity	1	\$1,586		Not Filing														0%
Ohio	MedAmerica	19	\$47,674	15%	Filed	5/30/2023	1/25/2024	15%											143%
Pennsylvania	MedAmerica	49	\$203,168	96%	Filed	4/29/2022	11/17/2022	64%		TBD									310%
South Dakota	MedAmerica	31	\$153,065	70%	Filed	3/30/2022	5/27/2022	70%		No Follow-Up				No Follow-Up					529%
Vermont	MedAmerica	3	\$8,736	505%	Pending	8/14/2023													57%
Virginia	MedAmerica	2	\$4,594		Not Filing														121%
Wisconsin	MedAmerica	1	\$2,028	90%	Filed	9/26/2022	2/9/2023	90%		No Follow-Up					No Follow-Up				448%
	Affinity	6	\$11,151		Not Filing														135%

[1] Excludes policies assumed to be paid up prior to implementation of the requested rate increase. Annualized premium reflects all rate increases filed for use between January 2010 and June 2023.

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

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

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

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

**Exhibit IV-b-i**  
**MedAmerica and Affinity Partners**  
**Status of Filings as of April 9, 2024**  
**All Jurisdictions in Which These Forms are In Force**  
**Series 11 Individual Policy Forms**

Jurisdiction	Company	12/31/2022 Policies In Force <sup>[1]</sup>	12/31/2022 Annualized Premium <sup>[1]</sup>	First Round Nationwide Request			First Round Follow-Up			First Round 2nd Follow-Up		
				Requested Increase	Disposition Date	Average Filed Increase <sup>[2]</sup>	Requested Increase	Disposition Date	Average Filed Increase <sup>[2]</sup>	Requested Increase	Disposition Date	Average Filed Increase <sup>[2]</sup>
Alabama	MedAmerica	10	\$44,333	39%	4/11/2011	10%	26%	9/4/2012	26%	No Follow-Up		
Arizona	MedAmerica	8	\$27,119	39%	Disapproved	0%	39%	5/14/2012	39%	No Follow-Up		
Colorado	MedAmerica	24	\$112,533	39%	11/5/2010	10%	26%	10/28/2013	26%	No Follow-Up		
Connecticut	MedAmerica	462	\$2,182,308	39%	Disapproved	0%	39%	Disapproved	0%	39%	Disapproved	0%
District of Columbia	MedAmerica	669	\$983,396	39%	6/30/2010	39%	No Follow-Up			No Follow-Up		
Georgia	MedAmerica	7	\$31,012	39%	4/20/2010	15%	21%	4/6/2011	10%	10%	12/23/2013	10%
Hawaii	MedAmerica	10	\$18,966	39%	7/5/2011	20%	16%	Disapproved	0%	Not Filed		
Idaho	MedAmerica	1	\$2,648	39%	Withdrawn	0%	Not Filed			Not Filed		
Illinois	MedAmerica	11	\$67,235	39%	4/28/2010	39%	No Follow-Up			No Follow-Up		
Indiana	MedAmerica	55	\$84,589	39%	Disapproved	0%	Not Filed			Not Filed		
Iowa	MedAmerica	76	\$287,619	39%	9/8/2010	20%	16%	3/27/2014	16%	No Follow-Up		
Kansas	MedAmerica	5	\$8,607	39%	5/26/2011	10%	25%	3/17/2015	25%	No Follow-Up		
Kentucky	MedAmerica	22	\$71,930	39%	5/28/2010	39%	No Follow-Up			No Follow-Up		
Louisiana	MedAmerica	5	\$5,614	39%	Disapproved	0%	Not Filed			Not Filed		
Maine	MedAmerica	5	\$19,275	Not Filed			Not Filed			Not Filed		
	Affinity	2	\$2,298	Not Filed			Not Filed			Not Filed		
Maryland	MedAmerica	34	\$111,579	15%	6/15/2010	15%	15%	5/8/2012	15%	5%	12/4/2014	5%
Massachusetts	MedAmerica	14	\$20,019	Not Filed			Not Filed			Not Filed		
Michigan	MedAmerica	8	\$17,262	39%	3/30/2010	39%	No Follow-Up			No Follow-Up		
Minnesota	MedAmerica	45	\$196,392	39%	Disapproved	0%	Not Filed			Not Filed		
Mississippi	MedAmerica	13	\$33,213	25%	4/13/2010	25%	11%	3/6/2012	11%	No Follow-Up		
Missouri	MedAmerica	3	\$20,653	39%	9/7/2010	39%	No Follow-Up			No Follow-Up		
Montana	MedAmerica	8	\$15,622	39%	8/3/2010	18%	18%	10/10/2012	18%	No Follow-Up		
Nebraska	MedAmerica	29	\$95,945	39%	1/28/2011	15%	21%	10/2/2012	21%	No Follow-Up		
Nevada	MedAmerica	2	\$3,088	Not Filed			Not Filed			Not Filed		
New Jersey	MedAmerica	80	\$308,048	39%	8/9/2010	18%	18%	8/21/2014	13%	Not Filed		
North Carolina	MedAmerica	6	\$29,128	39%	Disapproved	0%	39%	6/18/2014	15%	Not Filed		
North Dakota	MedAmerica	234	\$1,025,896	39%	5/28/2010	18%	18%	12/22/2011	12%	5%	5/2/2014	5%
Ohio	MedAmerica	16	\$36,334	39%	3/23/2010	39%	No Follow-Up			No Follow-Up		
Oklahoma	MedAmerica	2	\$4,967	39%	10/18/2010	10%	Not Filed			Not Filed		
Oregon	MedAmerica	4	\$11,001	39%	8/13/2010	20%	16%	12/11/2013	16%	No Follow-Up		
Pennsylvania	MedAmerica	72	\$582,598	39%	5/13/2010	39%	No Follow-Up			No Follow-Up		
South Carolina	MedAmerica	3	\$13,125	39%	11/12/2010	20%	Not Filed			Not Filed		
South Dakota	MedAmerica	50	\$253,103	39%	3/29/2010	39%	No Follow-Up			No Follow-Up		
Tennessee	MedAmerica	2	\$13,498	39%	3/4/2011	25%	11%	5/21/2014	11%	No Follow-Up		
Texas	MedAmerica	102	\$369,180	39%	Disapproved	0%	49%	6/10/2015	49%	Not Filed		
Vermont	MedAmerica	4	\$8,440	39%	Disapproved	0%	Not Filed			Not Filed		
Virginia	MedAmerica	10	\$35,045	Not Filed			Not Filed			Not Filed		
Washington	MedAmerica	84	\$314,054	39%	11/1/2010	30%	7%	1/31/2014	7%	No Follow-Up		
Wisconsin	MedAmerica	20	\$128,480	39%	9/6/2011	27%	9%	3/5/2014	9%	No Follow-Up		
	Affinity	4	\$6,083	Not Filed			Not Filed			Not Filed		
Wyoming	MedAmerica	2	\$1,823	Not Filed			Not Filed			Not Filed		

[1] Excludes policies assumed to be paid up prior to implementation of the requested rate increase. Annualized premium reflects all rate increases filed for use between January 2010 and June 2023.

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

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

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

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

**Exhibit IV-b-ii**  
**MedAmerica and Affinity Partners**  
**Status of Filings as of April 9, 2024**  
**All Jurisdictions in Which These Forms are In Force**  
**Series 11 Individual Policy Forms**

		12/31/2022 Policies In Force <sup>[1]</sup>	12/31/2022 Annualized Premium <sup>[1]</sup>	Second Round Nationwide Request					Second Round Follow-Up					
				Requested Increase <sup>[3]</sup>	Status <sup>[2][4][5]</sup>	Date Submitted	Disposition Date	Average Filed Increase <sup>[2][3]</sup>	Requested Increase <sup>[3]</sup>	Status <sup>[2][4][5]</sup>	Date Submitted	Disposition Date	Average Filed Increase <sup>[2][3]</sup>	
Jurisdiction	Company													
Alabama	MedAmerica	10	\$44,333	173%	Filed	7/5/2017	12/28/2017	24%	119%	Filed	8/20/2018	2/5/2021	15%	
Arizona	MedAmerica	8	\$27,119	140%	Filed	7/21/2017	9/12/2018	66%	89%	Filed	4/8/2021	6/6/2022	13%	
Colorado	MedAmerica	24	\$112,533	93%	Filed	8/23/2017	10/23/2017	20%	93%	Filed	3/18/2020	5/15/2023	64%	
Connecticut	MedAmerica	462	\$2,182,308	147%	Filed	4/5/2017	6/27/2017	33%	85%	Filed	9/4/2018	10/1/2018	14%	
District of Columbia	MedAmerica	669	\$983,396	88%	Filed	4/5/2017	5/8/2017	10%	10%	Filed	8/24/2018	12/19/2018	10%	
Georgia	MedAmerica	7	\$31,012	144%	Filed	6/20/2017	7/31/2017	20%	112%	Filed	8/20/2018	11/8/2018	18%	
Hawaii	MedAmerica	10	\$18,966	96%	Filed	11/10/2017	10/25/2019	96%		No Follow-Up				
Idaho	MedAmerica	1	\$2,648	299%	Withdrawn	7/27/2017	1/3/2019	0%	383%	Filed	6/24/2020	4/29/2021	40%	
Illinois	MedAmerica	11	\$67,235	144%	Filed	6/7/2017	1/11/2018	144%		No Follow-Up				
Indiana	MedAmerica	55	\$84,589	157%	Disapproved	12/4/2018	8/26/2019	0%		Not Filed				
Iowa	MedAmerica	76	\$287,619	126%	Filed	3/31/2017	6/5/2017	18%	93%	Filed	8/17/2018	10/10/2018	30%	
Kansas	MedAmerica	5	\$8,607	94%	Withdrawn	11/13/2019	12/30/2021			Not Filed				
Kentucky	MedAmerica	22	\$71,930	124%	Filed	7/11/2017	3/1/2018	30%	82%	Filed	4/29/2020	7/24/2020	17%	
Louisiana	MedAmerica	5	\$5,614	299%	Disapproved	6/29/2017	10/16/2017	0%		Not Filed				
Maine	MedAmerica	5	\$19,275	78%	Filed	12/19/2017	7/25/2018	44%	30%	Filed	8/23/2021	12/10/2021	30%	
	Affinity	2	\$2,298		Not Filed					Not Filed				
Maryland	MedAmerica	34	\$111,579	102%	Filed	5/1/2017	12/14/2017	15%	15%	Filed	8/28/2018	12/11/2018	13%	
Massachusetts	MedAmerica	14	\$20,019	158%	Filed	8/4/2017	10/17/2018	40%		Not Filed				
Michigan	MedAmerica	8	\$17,262	74%	Filed	6/16/2017	6/27/2017	74%		No Follow-Up				
Minnesota	MedAmerica	45	\$196,392	207%	Filed	5/10/2017	9/19/2017	75%	150%	Filed	10/12/2020	6/9/2021	64%	
Mississippi	MedAmerica	13	\$33,213	131%	Filed	7/28/2017	3/16/2018	25%	25%	Filed	8/24/2018	6/5/2019	13%	
Missouri	MedAmerica	3	\$20,653	105%	Filed	6/26/2017	9/12/2017	43%	51%	Filed	9/12/2018	9/20/2018	51%	
Montana	MedAmerica	8	\$15,622		Not Filed					Not Filed				
Nebraska	MedAmerica	29	\$95,945	144%	Filed	8/8/2017	6/29/2018	75%		Not Filed				
Nevada	MedAmerica	2	\$3,088		Not Filed					Not Filed				
New Jersey	MedAmerica	80	\$308,048	131%	Filed	4/24/2017	10/17/2017	31%	79%	Filed	12/17/2021	8/7/2023	24%	
North Carolina	MedAmerica	6	\$29,128	129%	Filed	5/9/2017	2/14/2018	95%	76%	Filed	11/11/2020	1/10/2022	22%	
North Dakota	MedAmerica	234	\$1,025,896	150%	Filed	3/17/2017	4/24/2017	30%	91%	Filed	8/14/2018	10/8/2018	45%	
Ohio	MedAmerica	16	\$36,334	76%	Filed	4/5/2017	6/29/2017	15%	15%	Filed	8/29/2018	2/4/2019	15%	
Oklahoma	MedAmerica	2	\$4,967		Not Filed					Not Filed				
Oregon	MedAmerica	4	\$11,001	69%	Disapproved	6/30/2017	10/18/2023	0%		Not Filed				
Pennsylvania	MedAmerica	72	\$582,598	107%	Filed	3/9/2017	9/22/2017	20%	75%	Filed	8/21/2018	12/4/2018	20%	
South Carolina	MedAmerica	3	\$13,125	116%	Filed	4/5/2017	5/16/2017	20%	84%	Filed	8/23/2018	7/18/2019	20%	
South Dakota	MedAmerica	50	\$253,103	150%	Filed	5/17/2017	6/30/2017	150%		No Follow-Up				
Tennessee	MedAmerica	2	\$13,498	69%	Filed	2/23/2017	10/30/2017	44%	26%	Filed	11/21/2019	5/6/2020	15%	
Texas	MedAmerica	102	\$369,180	90%	Filed	4/24/2018	12/21/2018	90%		No Follow-Up				
Vermont	MedAmerica	4	\$8,440	216%	Filed	6/8/2017	8/21/2019	60%		Not Filed				
Virginia	MedAmerica	10	\$35,045	202%	Filed	1/9/2018	9/3/2020	111%		Not Filed				
Washington	MedAmerica	84	\$314,054	101%	Filed	4/20/2017	1/29/2020	26%	26%	Filed	3/24/2021	3/11/2022	26%	
Wisconsin	MedAmerica	20	\$128,480	108%	Filed	6/26/2017	10/10/2017	108%		No Follow-Up				
	Affinity	4	\$6,083	179%	Filed	6/26/2017	10/10/2017	179%		No Follow-Up				
Wyoming	MedAmerica	2	\$1,823		Not Filed					Not Filed				

[1] Excludes policies assumed to be paid up prior to implementation of the requested rate increase. Annualized premium reflects all rate increases filed for use between January 2010 and June 2023.

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

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

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

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

**Exhibit IV-b-iii**  
**MedAmerica and Affinity Partners**  
**Status of Filings as of April 9, 2024**  
**All Jurisdictions in Which These Forms are In Force**  
**Series 11 Individual Policy Forms**

		12/31/2022 Policies In Force <sup>[1]</sup>	12/31/2022 Annualized Premium <sup>[1]</sup>	Second Round 2nd Follow-Up					Second Round 3rd Follow-Up				
				Requested Increase <sup>[3]</sup>	Status <sup>[2][4][5]</sup>	Date Submitted	Disposition Date	Average Filed Increase <sup>[2][3]</sup>	Requested Increase <sup>[3]</sup>	Status <sup>[2][4][5]</sup>	Date Submitted	Disposition Date	Average Filed Increase <sup>[2][3]</sup>
Jurisdiction	Company												
Alabama	MedAmerica	10	\$44,333		Not Filed					Not Filed			
Arizona	MedAmerica	8	\$27,119		Not Filed					Not Filed			
Colorado	MedAmerica	24	\$112,533		Not Filed					Not Filed			
Connecticut	MedAmerica	462	\$2,182,308	99%	Filed	2/10/2020	5/5/2020	34%		Not Filed			
District of Columbia	MedAmerica	669	\$983,396	10%	Filed	2/26/2020	9/29/2020	10%	10%	Filed	8/25/2021	12/26/2021	10%
Georgia	MedAmerica	7	\$31,012	111%	Filed	11/13/2019	2/19/2020	10%	103%	Filed	10/19/2020	11/24/2020	12%
Hawaii	MedAmerica	10	\$18,966		No Follow-Up					No Follow-Up			
Idaho	MedAmerica	1	\$2,648		Not Filed					Not Filed			
Illinois	MedAmerica	11	\$67,235		No Follow-Up					No Follow-Up			
Indiana	MedAmerica	55	\$84,589		Not Filed					Not Filed			
Iowa	MedAmerica	76	\$287,619	73%	Filed	10/14/2020	1/27/2021	18%		Not Filed			
Kansas	MedAmerica	5	\$8,607		Not Filed					Not Filed			
Kentucky	MedAmerica	22	\$71,930	61%	Filed	7/22/2021	10/12/2021	27%		Not Filed			
Louisiana	MedAmerica	5	\$5,614		Not Filed					Not Filed			
Maine	MedAmerica	5	\$19,275		Not Filed					Not Filed			
	Affinity	2	\$2,298		Not Filed					Not Filed			
Maryland	MedAmerica	34	\$111,579	105%	Filed	4/29/2020	1/12/2021	16%		Not Filed			
Massachusetts	MedAmerica	14	\$20,019		Not Filed					Not Filed			
Michigan	MedAmerica	8	\$17,262		No Follow-Up					No Follow-Up			
Minnesota	MedAmerica	45	\$196,392		Not Filed					Not Filed			
Mississippi	MedAmerica	13	\$33,213		Not Filed					Not Filed			
Missouri	MedAmerica	3	\$20,653		No Follow-Up					No Follow-Up			
Montana	MedAmerica	8	\$15,622		Not Filed					Not Filed			
Nebraska	MedAmerica	29	\$95,945		Not Filed					Not Filed			
Nevada	MedAmerica	2	\$3,088		Not Filed					Not Filed			
New Jersey	MedAmerica	80	\$308,048		Not Filed					Not Filed			
North Carolina	MedAmerica	6	\$29,128		Not Filed					Not Filed			
North Dakota	MedAmerica	234	\$1,025,896		Not Filed					Not Filed			
Ohio	MedAmerica	16	\$36,334	15%	Filed	6/24/2020	3/2/2022	15%		Not Filed			
Oklahoma	MedAmerica	2	\$4,967		Not Filed					Not Filed			
Oregon	MedAmerica	4	\$11,001		Not Filed					Not Filed			
Pennsylvania	MedAmerica	72	\$582,598	65%	Filed	1/10/2020	4/25/2020	14%	47%	Filed	3/5/2021	9/14/2021	11%
South Carolina	MedAmerica	3	\$13,125	91%	Filed	1/22/2021	4/13/2021	16%		Not Filed			
South Dakota	MedAmerica	50	\$253,103		No Follow-Up					No Follow-Up			
Tennessee	MedAmerica	2	\$13,498	11%	Filed	1/11/2021	3/8/2021	7%		Not Filed			
Texas	MedAmerica	102	\$369,180		No Follow-Up					No Follow-Up			
Vermont	MedAmerica	4	\$8,440		Not Filed					Not Filed			
Virginia	MedAmerica	10	\$35,045		Not Filed					Not Filed			
Washington	MedAmerica	84	\$314,054		Not Filed					Not Filed			
Wisconsin	MedAmerica	20	\$128,480		No Follow-Up					No Follow-Up			
	Affinity	4	\$6,083		No Follow-Up					No Follow-Up			
Wyoming	MedAmerica	2	\$1,823		Not Filed					Not Filed			

[1] Excludes policies assumed to be paid up prior to implementation of the requested rate increase. Annualized premium reflects all rate increases filed for use between January 2010 and June 2023.

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

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

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

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

**Exhibit IV-b-iv**  
**MedAmerica and Affinity Partners**  
**Status of Filings as of April 9, 2024**  
**All Jurisdictions in Which These Forms are In Force**  
**Series 11 Individual Policy Forms**

Jurisdiction	Company	12/31/2022 Policies In Force <sup>[1]</sup>	12/31/2022 Annualized Premium <sup>[1]</sup>	Current Round Nationwide Request					Current Round Follow-Up					Current Round 2nd Follow-Up					Average Cumulative Increase Filed <sup>[2]</sup>
				Requested Increase <sup>[3]</sup>	Status <sup>[2][4][5]</sup>	Date Submitted	Disposition Date	Average Filed Increase <sup>[2][3]</sup>	Requested Increase <sup>[3]</sup>	Status <sup>[2][4][5]</sup>	Date Submitted	Disposition Date	Average Filed Increase <sup>[2][3]</sup>	Requested Increase <sup>[3]</sup>	Status <sup>[2][4][5]</sup>	Date Submitted	Disposition Date	Average Filed Increase <sup>[2][3]</sup>	
Alabama	MedAmerica	10	\$44,333	15%	Filed	8/17/2022	9/1/2022	15%	15%	Filed	6/13/2023	7/28/2023	15%	309%	Not Yet Filed				163%
Arizona	MedAmerica	8	\$27,119		TBD														161%
Colorado	MedAmerica	24	\$112,533		TBD														174%
Connecticut	MedAmerica	462	\$2,182,308	226%	Pending	6/6/2023													103%
District of Columbia	MedAmerica	669	\$983,396	10%	Filed	10/28/2022	11/18/2022	10%	10%	Filed	1/2/2024	2/5/2024	10%						146%
Georgia	MedAmerica	7	\$31,012	254%	Filed	2/16/2022	8/3/2022	12%	236%	Filed	6/6/2023	7/11/2023	12%		Not Filing				204%
Hawaii	MedAmerica	10	\$18,966		Not Filing														135%
Idaho	MedAmerica	1	\$2,648		Not Filing														40%
Illinois	MedAmerica	11	\$67,235	71%	Filed	3/29/2022	7/29/2022	59%	10%	Pending	2/9/2024								440%
Indiana	MedAmerica	55	\$84,589	581%	Not Yet Filed														0%
Iowa	MedAmerica	76	\$287,619	179%	Filed	3/30/2022	7/21/2022	26%	132%	Pending	3/5/2024								218%
Kansas	MedAmerica	5	\$8,607		Not Filing														38%
Kentucky	MedAmerica	22	\$71,930	159%	Pending	3/8/2024													169%
Louisiana	MedAmerica	5	\$5,614		Not Filing														0%
Maine	MedAmerica	5	\$19,275		Not Filing														87%
	Affinity	2	\$2,298		Not Filing														0%
Maryland	MedAmerica	34	\$111,579	210%	Not Yet Filed														108%
Massachusetts	MedAmerica	14	\$20,019	97%	Filed	4/12/2022	6/20/2023	30%		TBD									82%
Michigan	MedAmerica	8	\$17,262	19%	Withdrawn	4/29/2022	6/13/2022	0%		TBD									142%
Minnesota	MedAmerica	45	\$196,392	222%	Pending	2/15/2024													186%
Mississippi	MedAmerica	13	\$33,213	25%	Filed	11/11/2022	10/19/2023	21%		TBD									138%
Missouri	MedAmerica	3	\$20,653	72%	Filed	6/21/2022	3/7/2023	95%		No Follow-Up					No Follow-Up				490%
Montana	MedAmerica	8	\$15,622		Not Filing														39%
Nebraska	MedAmerica	29	\$95,945	117%	Filed	10/12/2022	10/24/2023	117%		TBD									427%
Nevada	MedAmerica	2	\$3,088		Not Filing														0%
New Jersey	MedAmerica	80	\$308,048		TBD														117%
North Carolina	MedAmerica	6	\$29,128	119%	Pending	6/21/2023													173%
North Dakota	MedAmerica	234	\$1,025,896	180%	Filed	2/28/2022	4/27/2022	41%		TBD									270%
Ohio	MedAmerica	16	\$36,334	15%	Filed	5/30/2023	1/25/2024	15%											143%
Oklahoma	MedAmerica	2	\$4,967		Not Filing														10%
Oregon	MedAmerica	4	\$11,001		Not Filing														39%
Pennsylvania	MedAmerica	72	\$582,598	149%	Filed	4/29/2022	11/17/2022	94%		TBD									394%
South Carolina	MedAmerica	3	\$13,125	217%	Filed	5/13/2022	9/7/2022	11%		Not Filing									124%
South Dakota	MedAmerica	50	\$253,103	69%	Filed	3/30/2022	5/27/2022	69%		No Follow-Up					No Follow-Up				486%
Tennessee	MedAmerica	2	\$13,498	109%	Filed	3/10/2022	1/17/2023	60%		TBD									294%
Texas	MedAmerica	102	\$369,180	36%	Disapproved	10/10/2022	11/29/2022	0%	30%	Pending	1/3/2024								184%
Vermont	MedAmerica	4	\$8,440	451%	Pending	8/14/2023													60%
Virginia	MedAmerica	10	\$35,045		Not Filing														111%
Washington	MedAmerica	84	\$314,054	26%	Filed	5/5/2023	1/11/2024	26%											178%
Wisconsin	MedAmerica	20	\$128,480	72%	Filed	9/26/2022	2/9/2023	72%		No Follow-Up					No Follow-Up				398%
	Affinity	4	\$6,083		Not Filing														179%
Wyoming	MedAmerica	2	\$1,823		Not Filing														0%

[1] Excludes policies assumed to be paid up prior to implementation of the requested rate increase. Annualized premium reflects all rate increases filed for use between January 2010 and June 2023.

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

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

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

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

**Exhibit IV-c-1**  
**MedAmerica and Affinity Partners**  
**Status of Filings as of April 9, 2024**  
**All Jurisdictions in Which These Forms are In Force**  
**Series 11 Group Policy Forms**

Jurisdiction	Company	12/31/2022 Policies In Force <sup>[1]</sup>	12/31/2022 Annualized Premium <sup>[1]</sup>	First Round Nationwide Request			First Round Follow-Up			First Round 2nd Follow-Up		
				Requested Increase	Disposition Date	Average Filed Increase <sup>[2]</sup>	Requested Increase	Disposition Date	Average Filed Increase <sup>[2]</sup>	Requested Increase	Disposition Date	Average Filed Increase <sup>[2]</sup>
Arizona <sup>[6]</sup>	MedAmerica	56	\$157,105	39%	3/16/2010	39%	No Follow-Up			No Follow-Up		
California	MedAmerica	10	\$7,969	39%	Withdrawn	0%	Not Filed			Not Filed		
Colorado <sup>[7]</sup>	MedAmerica	257	\$432,303	39%	11/5/2010	10%	26%	10/28/2013	26%	No Follow-Up		
Connecticut	MedAmerica	126	\$219,624	39%	Disapproved	0%	39%	Disapproved	0%	39%	Disapproved	0%
District of Columbia	MedAmerica	3	\$5,376	39%	Disapproved	0%	Not Filed			Not Filed		
Hawaii	MedAmerica	60	\$94,313	39%	6/7/2011	20%	16%	Disapproved	0%	Not Filed		
Illinois	MedAmerica	60	\$158,863	39%	4/28/2010	39%	No Follow-Up			No Follow-Up		
Indiana	MedAmerica	57	\$45,275	39%	Disapproved	0%	Not Filed			Not Filed		
Iowa	MedAmerica	15	\$22,127	39%	9/8/2010	3%	35%	4/4/2014	17%	15%	9/10/2015	15%
Kansas	MedAmerica	76	\$137,748	39%	5/26/2011	10%	49%	3/19/2015	49%	No Follow-Up		
Minnesota	MedAmerica	337	\$569,901	39%	Disapproved	0%	Not Filed			Not Filed		
Missouri	MedAmerica	6	\$17,400	39%	9/7/2010	39%	No Follow-Up			No Follow-Up		
Nebraska	MedAmerica	46	\$55,924	39%	1/28/2011	15%	21%	12/18/2012	21%	No Follow-Up		
New Jersey <sup>[6]</sup>	MedAmerica	5	\$8,067	39%	6/30/2010	39%	No Follow-Up			No Follow-Up		
North Dakota	MedAmerica	102	\$214,222	39%	5/28/2010	18%	18%	12/22/2011	12%	5%	5/21/2014	5%
Ohio	MedAmerica	16	\$21,745	39%	3/23/2010	39%	No Follow-Up			No Follow-Up		
Oregon	MedAmerica	11	\$24,220	39%	8/13/2010	20%	16%	12/11/2013	16%	No Follow-Up		
Pennsylvania	MedAmerica	21	\$57,070	39%	5/13/2010	39%	No Follow-Up			No Follow-Up		
South Dakota	MedAmerica	6	\$8,525	39%	3/9/2010	39%	No Follow-Up			No Follow-Up		
Tennessee <sup>[8]</sup>	MedAmerica	105	\$368,284	39%	3/4/2011	25%	11%	5/21/2014	11%	No Follow-Up		
	MedAmerica	1,980	\$6,141,754	30%	4/6/2011	30%	Not Filed			Not Filed		
Texas	MedAmerica	43	\$93,691	39%	Withdrawn	0%	68%	5/1/2015	68%	Not Filed		
Washington	MedAmerica	102	\$270,292	39%	11/1/2010	38%	Not Filed			Not Filed		
Wisconsin	MedAmerica	28	\$45,017	39%	9/6/2011	29%	8%	3/5/2014	8%	No Follow-Up		

[1] Excludes policies assumed to be paid up prior to implementation of the requested rate increase. Annualized premium reflects all rate increases filed for use between January 2010 and June 2023.

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

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

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

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

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

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

[8] In Tennessee, the first cohort listed (i.e., 105 lives) is for certificates issued on the Series 11 Group policy form; the second cohort listed (i.e., 1,980 lives) is for certificates issued on the Tennessee State Employees Group (TNSE) policy form. The TNSE certificates were issued to Tennessee state employees and their family members.



**Exhibit IV-c-ii**  
**MedAmerica and Affinity Partners**  
**Status of Filings as of April 9, 2024**  
**All Jurisdictions in Which These Forms are In Force**  
**Series 11 Group Policy Forms**

		12/31/2022 Policies	12/31/2022 Annualized	Second Round Nationwide Request					Second Round Follow-Up				
				Requested	Status <sup>[2][4][5]</sup>	Date	Disposition	Average Filed	Requested	Status <sup>[2][4][5]</sup>	Date	Disposition	Average Filed
Jurisdiction	Company	In Force <sup>[1]</sup>	Premium <sup>[1]</sup>	Increase <sup>[3]</sup>		Submitted	Date	Increase <sup>[2][3]</sup>	Increase <sup>[3]</sup>		Submitted	Date	Increase <sup>[2][3]</sup>
Arizona <sup>[6]</sup>	MedAmerica	56	\$157,105	69%	Filed	7/21/2017	11/7/2017	69%		No Follow-Up			
California	MedAmerica	10	\$7,969		Not Filed					Not Filed			
Colorado <sup>[7]</sup>	MedAmerica	257	\$432,303	81%	Filed	8/23/2017	10/23/2017	20%	117%	Filed	3/18/2020	5/15/2023	49%
Connecticut	MedAmerica	126	\$219,624	135%	Filed	4/5/2017	6/21/2017	18%	99%	Filed	9/4/2018	10/1/2018	10%
District of Columbia	MedAmerica	3	\$5,376	135%	Filed	4/5/2017	5/8/2017	10%	10%	Filed	8/24/2018	12/19/2018	10%
Hawaii	MedAmerica	60	\$94,313	96%	Filed	11/10/2017	11/22/2019	96%		No Follow-Up			
Illinois	MedAmerica	60	\$158,863	78%	Filed	6/7/2017	1/11/2018	78%		No Follow-Up			
Indiana	MedAmerica	57	\$45,275	135%	Disapproved	12/4/2018	8/26/2019	0%		Not Filed			
Iowa	MedAmerica	15	\$22,127	94%	Filed	3/31/2017	6/5/2017	18%	66%	Filed	8/17/2018	10/10/2018	30%
Kansas	MedAmerica	76	\$137,748	65%	Withdrawn	11/13/2019	12/30/2021			Not Filed			
Minnesota	MedAmerica	337	\$569,901	135%	Filed	5/10/2017	12/15/2017	44%	114%	Filed	10/12/2020	3/18/2021	73%
Missouri	MedAmerica	6	\$17,400	69%	Filed	6/26/2017	9/12/2017	32%	32%	Filed	9/12/2018	9/20/2018	32%
Nebraska	MedAmerica	46	\$55,924	69%	Filed	8/8/2017	6/29/2018	30%		Not Filed			
New Jersey <sup>[6]</sup>	MedAmerica	5	\$8,067	69%	Filed	4/24/2017	10/17/2017	69%		No Follow-Up			
North Dakota	MedAmerica	102	\$214,222	69%	Filed	3/17/2017	4/24/2017	30%	30%	Filed	8/14/2018	10/8/2018	30%
Ohio	MedAmerica	16	\$21,745	69%	Filed	4/5/2017	6/29/2017	15%	15%	Filed	8/29/2018	2/4/2019	15%
Oregon	MedAmerica	11	\$24,220	85%	Disapproved	6/30/2017	10/18/2023	0%		Not Filed			
Pennsylvania	MedAmerica	21	\$57,070	69%	Filed	3/9/2017	9/22/2017	20%	41%	Filed	8/21/2018	12/4/2018	20%
South Dakota	MedAmerica	6	\$8,525	69%	Filed	5/17/2017	6/30/2017	69%		No Follow-Up			
Tennessee <sup>[8]</sup>	MedAmerica	105	\$368,284	78%	Filed	2/23/2017	10/30/2017	48%	26%	Filed	11/21/2019	5/6/2020	16%
	MedAmerica	1,980	\$6,141,754	81%	Filed	2/23/2017	10/30/2017	44%	34%	Filed	11/21/2019	5/6/2020	21%
Texas	MedAmerica	43	\$93,691	45%	Disapproved	4/24/2018	7/3/2018	0%		Not Filed			
Washington	MedAmerica	102	\$270,292	85%	Filed	4/20/2017	1/29/2020	26%	26%	Filed	3/24/2021	3/11/2022	26%
Wisconsin	MedAmerica	28	\$45,017	69%	Filed	6/26/2017	10/10/2017	69%		No Follow-Up			

[1] Excludes policies assumed to be paid up prior to implementation of the requested rate increase. Annualized premium reflects all rate increases filed for use between January 2010 and June 2023.

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

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

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

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

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

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

[8] In Tennessee, the first cohort listed (i.e., 105 lives) is for certificates issued on the Series 11 Group policy form; the second cohort listed (i.e., 1,980 lives) is for certificates issued on the Tennessee State Employees Group (TNSE) policy form.

The TNSE certificates were issued to Tennessee state employees and their family members.

**Exhibit IV-c-iii**  
**MedAmerica and Affinity Partners**  
**Status of Filings as of April 9, 2024**  
**All Jurisdictions in Which These Forms are In Force**  
**Series 11 Group Policy Forms**

Jurisdiction	Company	12/31/2022 Policies In Force <sup>(1)</sup>	12/31/2022 Annualized Premium <sup>(1)</sup>	Second Round 2nd Follow-Up					Second Round 3rd Follow-Up				
				Requested Increase <sup>(3)</sup>	Status <sup>(2)(4)(5)</sup>	Date Submitted	Disposition Date	Average Filed Increase <sup>(2)(3)</sup>	Requested Increase <sup>(3)</sup>	Status <sup>(2)(4)(5)</sup>	Date Submitted	Disposition Date	Average Filed Increase <sup>(2)(3)</sup>
Arizona <sup>(6)</sup>	MedAmerica	56	\$157,105		No Follow-Up					No Follow-Up			
California	MedAmerica	10	\$7,969		Not Filed					Not Filed			
Colorado <sup>(7)</sup>	MedAmerica	257	\$432,303		Not Filed					Not Filed			
Connecticut	MedAmerica	126	\$219,624	128%	Filed	2/10/2020	4/28/2020	10%	112%	Filed	6/10/2021	7/22/2021	23%
District of Columbia	MedAmerica	3	\$5,376	10%	Filed	2/26/2020	9/28/2020	10%	10%	Filed	8/25/2021	1/10/2022	10%
Hawaii	MedAmerica	60	\$94,313		No Follow-Up					No Follow-Up			
Illinois	MedAmerica	60	\$158,863		No Follow-Up					No Follow-Up			
Indiana	MedAmerica	57	\$45,275		Not Filed					Not Filed			
Iowa	MedAmerica	15	\$22,127	46%	Filed	10/14/2020	1/27/2021	18%		Not Filed			
Kansas	MedAmerica	76	\$137,748		Not Filed					Not Filed			
Minnesota	MedAmerica	337	\$569,901		Not Filed					Not Filed			
Missouri	MedAmerica	6	\$17,400		No Follow-Up					No Follow-Up			
Nebraska	MedAmerica	46	\$55,924		Not Filed					Not Filed			
New Jersey <sup>(6)</sup>	MedAmerica	5	\$8,067		No Follow-Up					No Follow-Up			
North Dakota	MedAmerica	102	\$214,222		No Follow-Up					No Follow-Up			
Ohio	MedAmerica	16	\$21,745	15%	Filed	6/24/2020	12/11/2020	15%		Not Filed			
Oregon	MedAmerica	11	\$24,220		Not Filed					Not Filed			
Pennsylvania	MedAmerica	21	\$57,070	22%	Filed	1/10/2020	4/25/2020	20%	2%	Filed	3/5/2021	5/14/2021	2%
South Dakota	MedAmerica	6	\$8,525		No Follow-Up					No Follow-Up			
Tennessee <sup>(8)</sup>	MedAmerica	105	\$368,284	11%	Filed	1/11/2021	3/8/2021	6%		Not Filed			
	MedAmerica	1,980	\$6,141,754	13%	Filed	1/11/2021	3/8/2021	8%		Not Filed			
Texas	MedAmerica	43	\$93,691		Not Filed					Not Filed			
Washington	MedAmerica	102	\$270,292		Not Filed					Not Filed			
Wisconsin	MedAmerica	28	\$45,017		No Follow-Up					No Follow-Up			

(1) Excludes policies assumed to be paid up prior to implementation of the requested rate increase. Annualized premium reflects all rate increases filed for use between January 2010 and June 2023.

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

(3) The rate increase level may vary by benefit period and/or inflation option; average rate increase percentages are based on the distribution of in-force business at the time of submission and disposition.

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

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

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

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

(8) In Tennessee, the first cohort listed (i.e., 105 lives) is for certificates issued on the Series 11 Group policy form; the second cohort listed (i.e., 1,980 lives) is for certificates issued on the Tennessee State Employees Group (TNSE) policy form. The TNSE certificates were issued to Tennessee state employees and their family members.

**Exhibit IV-c-iv**  
**MedAmerica and Affinity Partners**  
**Status of Filings as of April 9, 2024**  
**All Jurisdictions in Which These Forms are In Force**  
**Series 11 Group Policy Forms**

Jurisdiction	Company	12/31/2022 Policies In Force <sup>[1]</sup>	12/31/2022 Annualized Premium <sup>[1]</sup>	Current Round Nationwide Request					Current Round Follow-Up					Current Round 2nd Follow-Up					Average Cumulative Increase Filed <sup>[2]</sup>
				Requested Increase <sup>[3]</sup>	Status <sup>[2][4][5]</sup>	Date Submitted	Disposition Date	Average Filed Increase <sup>[2][3]</sup>	Requested Increase <sup>[3]</sup>	Status <sup>[2][4][5]</sup>	Date Submitted	Disposition Date	Average Filed Increase <sup>[2][3]</sup>	Requested Increase <sup>[3]</sup>	Status <sup>[2][4][5]</sup>	Date Submitted	Disposition Date	Average Filed Increase <sup>[2][3]</sup>	
Arizona <sup>[6]</sup>	MedAmerica	56	\$157,105	80%	Filed	7/27/2022	8/15/2022	80%		No Follow-Up					No Follow-Up				324%
California	MedAmerica	10	\$7,969		Not Filing														0%
Colorado <sup>[7]</sup>	MedAmerica	257	\$432,303		TBD														149%
Connecticut	MedAmerica	126	\$219,624	301%	Pending	3/13/2024													75%
District of Columbia	MedAmerica	3	\$5,376		Not Filing														46%
Hawaii	MedAmerica	60	\$94,313		Not Filing														135%
Illinois	MedAmerica	60	\$158,863	51%	Filed	3/29/2022	7/29/2022	38%	12%	Pending	2/9/2024								243%
Indiana	MedAmerica	57	\$45,275	391%	Not Yet Filed														0%
Iowa	MedAmerica	15	\$22,127	164%	Filed	3/30/2022	7/21/2022	29%	69%	Pending	3/5/2024								225%
Kansas	MedAmerica	76	\$137,748	156%	Filed	6/14/2023	11/17/2023	40%											129%
Minnesota	MedAmerica	337	\$569,901	150%	Pending	2/15/2024													149%
Missouri	MedAmerica	6	\$17,400	92%	Filed	6/21/2022	3/7/2023	92%		No Follow-Up					No Follow-Up				365%
Nebraska	MedAmerica	46	\$55,924	129%	Filed	10/12/2022	10/24/2023	129%		TBD									313%
New Jersey <sup>[6]</sup>	MedAmerica	5	\$8,067	85%	Filed	12/17/2021	8/7/2023	85%		No Follow-Up					No Follow-Up				335%
North Dakota	MedAmerica	102	\$214,222	106%	Filed	2/28/2022	4/27/2022	52%		TBD									257%
Ohio	MedAmerica	16	\$21,745	15%	Filed	5/30/2023	1/25/2024	15%											143%
Oregon	MedAmerica	11	\$24,220		Not Filing														39%
Pennsylvania	MedAmerica	21	\$57,070	87%	Filed	4/29/2022	10/28/2022	94%		No Follow-Up					No Follow-Up				375%
South Dakota	MedAmerica	6	\$8,525	9%	Filed	3/30/2022	5/27/2022	9%		No Follow-Up					No Follow-Up				155%
Tennessee <sup>[6]</sup>	MedAmerica	105	\$368,284	105%	Filed	3/10/2022	3/6/2023	57%		TBD									298%
	MedAmerica	1,980	\$6,141,754	79%	Filed	3/10/2022	3/6/2023	44%		TBD									253%
Texas	MedAmerica	43	\$93,691	50%	Filed	10/10/2022	3/24/2023	50%		TBD									152%
Washington	MedAmerica	102	\$270,292	26%	Filed	5/5/2023	1/11/2024	26%											176%
Wisconsin	MedAmerica	28	\$45,017	34%	Filed	9/26/2022	12/15/2022	34%		No Follow-Up					No Follow-Up				215%

[1] Excludes policies assumed to be paid up prior to implementation of the requested rate increase. Annualized premium reflects all rate increases filed for use between January 2010 and June 2023.

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

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

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

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

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

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

[8] In Tennessee, the first cohort listed (i.e., 105 lives) is for certificates issued on the Series 11 Group policy form; the second cohort listed (i.e., 1,980 lives) is for certificates issued on the Tennessee State Employees Group (TNSE) policy form.

The TNSE certificates were issued to Tennessee state employees and their family members.

## **Appendix A**

### **Development of and Justification for Current Assumptions**

This appendix describes the development of and justification for the current actuarial assumptions used in this filing. Note, this appendix reflects the assumptions across the product(s) subject to this filing as well as other products issued by MedAmerica Insurance Company (MAPA); MAPA's two sister companies, MedAmerica Insurance Company of Florida (MAFL) and MedAmerica Insurance Company of New York (MANY) (MAPA, MAFL, and MANY collectively referred to as MedAmerica), MedAmerica's affinity partners, and MedAmerica's other acquired blocks of business (including certain policies that have since commuted). Therefore, some of the information in this appendix may not be applicable to the product(s) subject to this filing.

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

The persistency and morbidity assumptions were developed on a first principles basis. In this context, "first principles" means developing key assumptions (namely, morbidity and mortality) at the component level and modeling active and disabled lives separately. Separate assumptions were developed for: (1) claim incidence, (2) voluntary lapse, (3) active mortality, (4) disabled mortality, (5) recovery, and (6) utilization. For each assumption except utilization, experience from 2010 through 2019, with runout through March 31, 2022, was used. The utilization assumption was developed based on historical experience from 2016 through 2019, with runout through March 31, 2022, to capture more recent information as cost of care and utilization trends can fluctuate over short periods of time. Experience adjustment factors were developed using predictive analytics as described in the Predictive Analytics section below.

As an additional consideration, the COVID-19 pandemic has created uncertainty regarding future long-term care (LTC) experience. The short-term impact on LTC assumptions may be favorable due to higher mortality (particularly at advanced ages) and potentially lower incidence and benefit utilization; however, the longer-term impact remains unclear. MedAmerica's historical experience from 2020 and 2021 was reviewed and considered in assumption development. Based on that review, we did not include 2020 or 2021 experience in the development of these assumptions (other than for purposes of runout) or make any adjustments to the assumptions described in this appendix to capture anticipated impacts of the pandemic. Due to the long duration nature of LTC insurance, minor deviations in experience over a relatively small number of calendar years are not expected to have a significant impact on lifetime projections. However, we will continue to monitor emerging experience and trends so that adjustments can be included in the future if believed to be representative of long-term trends.

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

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

#### ***Active Assumptions***

The assumptions for active (i.e., healthy) lives were developed based on detailed historical experience from 2010 through 2019, with runout through March 31, 2022, for MedAmerica's organic (including affinity partners) and acquired business. Experience adjustment factors were developed using predictive analytics as described in the Predictive Analytics section below, industry experience, and actuarial judgment. The active assumptions include (1) claim incidence (the probability that an active life becomes disabled), (2) voluntary lapse, and (3) active mortality. Composite policy terminations for active lives were also considered when adjusting late attained age voluntary lapse and mortality assumptions.

#### ***Claim Incidence Assumption***

Claim incidence probabilities (i.e., the probability of an insured becoming disabled) were developed using the 2020 Milliman *Long-Term Care Guidelines (Guidelines)* incidence curves, with adjustments for retrospective morbidity improvement, adverse selection due to past rate increases, and contingent nonforfeiture / shortened non-forfeiture (collective, CNF) policies. Initial experience adjustments were developed based on total claim incidence (i.e., all sites of care combined). The resulting assumption was further adjusted based on the following three starting sites of care—assisted living facility (ALF), skilled nursing facility (SNF), or home health care (HHC).

## Appendix A

### Development of and Justification for Current Assumptions

Exhibit A-1 provides a summary of actual-to-expected (A:E) experience by site of care for all products included in the study for claim incidence in policy durations 10 and later for various policy and policyholder characteristics. The following items are included:

- Exposure [A] reflects the length of time a covered life is exposed to the risk of becoming disabled (i.e., an exact exposure basis).
- Claim counts [B] are based on historical claim experience and are provided by situs.
- A:E ratios are calculated as actual claim incidence rates to the 2020 *Guidelines* with the adjustments listed above (i.e., retrospective morbidity improvement, adverse selection due to past rate increases, CNF policies) [C] and to the current assumption [D]. This fit will not be perfect (i.e., ratios deviate from 1.0) because the main goal is to develop an assumption that generalizes well to new data by balancing assumption complexity and fit on the historical experience.

#### *Lifetime-Pay Voluntary Lapse Assumption*

The active-lives voluntary lapse assumption was developed using the base lapse probabilities underlying the prior all-lives assumption, with experience adjustments.

The attained age adjustment factors developed from the predictive model produced a U-shaped pattern (i.e., decreasing and then increasing) by attained age. However, the attained age adjustment factors are held constant for ages 68 and older to produce an ultimate voluntary lapse assumption that is constant rather than increasing by attained age. The adjustments are held constant after this point because an increasing attained age lapse trend is not widely used in the industry, and this increasing lapse trend may be due to miscoding of deaths or underreporting of deaths in the Social Security Death Master File. An additional attained age adjustment to active mortality was developed (Exhibit A-3a) to capture these terminations (i.e., higher reported lapses at older attained ages) such that the combined active mortality and voluntary lapse assumption better aligns with actual experience as shown in Exhibit A-4.

Exhibit A-2 supports the voluntary lapse assumption and provides the following information for various policy and policyholder characteristics:

- Exhibit A-2a provides the ultimate voluntary lapse probabilities after all experience adjustments for the product(s) included in this filing as well as other products issued by MedAmerica, its affinity partners, and MedAmerica's other acquired blocks of business. These ultimate voluntary lapse probabilities are applicable for attained ages 68 and older in the ultimate policy duration and later. Only these ultimate voluntary lapse probabilities are material to the projections after the first few projection years given the age of the product(s) subject to this filing.
- Exhibit A-2b provides A:E results for the historical experience for all products of MedAmerica, its affinity partners, and any acquired business for durations 10 and later, and includes the following:
  - Exposure [A] reflects the length of time a covered life is exposed to the risk of voluntary lapse (i.e., exact exposure basis).
  - Actual lapses [B].
  - A:E ratios are calculated as actual lapse to the unadjusted prior all-lives voluntary lapse assumption [C], the assumption with experience adjustments directly from the predictive model (i.e., without the attained age caps) [D], and the current assumption (i.e., with the attained age caps) [E]. This fit will not be perfect (i.e., ratios deviate from 1.0) because the main goal is to develop an assumption that generalizes well to new data by balancing assumption complexity and fit on the historical experience. Additionally, the A:E in column [E] is greater than 1.0 due to the reallocation of lapses at higher attained ages as described above.

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

## Appendix A

### Development of and Justification for Current Assumptions

#### *Limited-Pay Voluntary Lapse*

For policies with a limited or reduced premium payment option, the voluntary lapse assumption is a function of the lifetime-pay voluntary lapse probabilities and is like that used in original pricing. Based on sensitivity testing performed as part of the experience study, the impact of the limited-pay voluntary lapse assumption on the projections is immaterial.

For the limited or reduced premium payment options, the scalars were previously developed from a comparison of the lifetime-pay derived lapse rates to the limited-pay and reduced-pay option's derived lapse rates based on MedAmerica and its affinity partners' experience on all products combined. The relationships derived from this analysis were used to develop the smoothed lapse assumption as shown in Section 6 of the actuarial memorandum. No voluntary lapse assumption is assumed for CNF policies.

#### *Active Mortality*

Active mortality was developed based on the 2012 Individual Annuity Mortality Basic (2012IAM) table with adjustments to make it applicable to an active-life exposure base and reflect retrospective active mortality improvement. Experience adjustment factors were developed using predictive analytics with additional adjustments to increase mortality for ages 68 and older commensurate with the capping applied for voluntary lapse mentioned above.

Exhibit A-3 supports the active mortality assumption and provides the following information for each characteristic by which the active mortality assumption varies by:

- Exhibit A-3a provides the attained age adjustment factors that are to be applied to the active-exposure-adjusted 2012IAM hazard rates; the adjusted hazard rates are converted back into mortality probabilities to create the mortality assumption produced by the predictive model.
- Exhibit A-3b provides A:E results for all products of MedAmerica, its affinity partners, and any acquired business for the historical experience in policy durations 10 and later, and includes the following:
  - Exposure [A] reflects the length of time a covered life is exposed to the risk of active death (i.e., exact exposure basis).
  - Actual deaths of active policyholders [B].
  - A:E ratios are calculated as actual mortality rates to the active-exposure-adjusted 2012IAM table rates [C], the assumption with experience adjustments directly from the predictive model (i.e., without the composite termination attained age adjustments) [D], and the current assumption (i.e., with the composite termination attained age adjustments) [E]. This fit will not be perfect (i.e., ratios deviate from 1.0) because the main goal is to develop an assumption that generalizes well to new data by balancing assumption complexity and fit on the historical experience. Additionally, the A:E in column [E] is less than 1.0 due to the reallocation of lapses at higher attained ages as described above.

#### *Composite Policy Terminations*

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

- Exposure [A] reflects the length of time a covered life is exposed to the risk of active termination (i.e., exact exposure basis).
- Actual composite terminations of active policyholders [B].
- A:E ratios are calculated as actual terminations to the expected composite terminations [C]. The A:E provides an indication of fit. This fit will not be perfect (i.e., ratios deviate from 1.0) because the main goal is to develop an assumption that generalizes well to new data by balancing assumption complexity and fit on the historical experience.

## **Appendix A**

### **Development of and Justification for Current Assumptions**

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

#### ***Disabled Assumptions***

The assumptions for disabled (i.e., unhealthy) lives were developed based on detailed historical experience from 2010 through 2019, with runout through March 31, 2022, for MedAmerica’s organic (including affinity partners) and acquired business. Experience adjustment factors were developed using predictive analytics as described in the Predictive Analytics section below, industry experience, and actuarial judgment. The disabled assumptions include (1) disabled mortality and (2) recovery.

#### ***Disabled Mortality***

Disabled mortality probabilities were developed using the 2020 *Guidelines* disabled mortality tables with adjustments to reflect experience from 2010 through 2019, with runout through March 31, 2022, on all products of MedAmerica, its affinity partners, and any acquired business. The experience adjustment factors were developed using predictive analytics as described in the Predictive Analytics section below.

Exhibit A-5 provides a summary of A:E results for the historical experience by starting site of care in claim months 4 and later for each characteristic by which the disabled mortality assumption varies by and includes the following:

- Exposure [A] reflects the length of time a disabled policyholder is exposed to the risk of disabled death (i.e., exact exposure basis).
- Actual deaths [B] of disabled policyholders.
- A:E ratios are calculated as actual deaths of disabled policyholders to the unadjusted 2020 *Guidelines* disabled mortality rates [C] and the current disabled mortality assumption [D]. The A:E provides an indication of fit. This fit will not be perfect (i.e., ratios deviate from 1.0) because the main goal is to develop an assumption that generalizes well to new data by balancing assumption complexity and fit on the historical experience.

#### ***Recovery***

Recovery probabilities were developed using the 2020 *Guidelines* assumption with adjustments to reflect experience from 2010 through 2019, with runout through March 31, 2022, on all products of MedAmerica, its affinity partners, and any acquired business. The experience adjustment factors were developed using predictive analytics as described in the Predictive Analytics section below.

Exhibit A-6 provides a summary of A:E results for historical experience in claim months 4 and later for each characteristic by which the recovery assumption varies by and includes the following:

- Exposure [A] reflects the length of time a disabled policyholder is exposed to the opportunity of recovery (i.e., exact exposure basis).
- Actual recoveries [B] of disabled policyholders.
- A:E ratios are calculated as actual recoveries of disabled policyholders to the unadjusted 2020 *Guidelines* [C] and the current recovery assumption [D]. The A:E provides an indication of fit. This fit will not be perfect (i.e., ratios deviate from 1.0) because the main goal is to develop an assumption that generalizes well to new data by balancing assumption complexity and fit on the historical experience.

#### ***Utilization Assumption***

Utilization recognizes that less than the full potential benefit may be paid for an LTC claim due to services received less frequently than daily (“day” utilization) or actual charges less than the daily maximum (“dollar” utilization). The utilization assumption is a “total” utilization assumption—that is, it captures the impact of both day and dollar utilization. In developing this assumption, we split total utilization into two components (1) policy duration utilization and (2) claim duration utilization. The utilization assumption was developed based on (1) historical experience from 2016 through 2019, with runout through March 31, 2022, of MedAmerica, its affinity partners, and any acquired



## **Appendix A**

### **Development of and Justification for Current Assumptions**

business; (2) cost of care trends based on the 2021 Genworth Cost of Care Survey<sup>1</sup>; (3) the 2020 *Guidelines* utilization projection model; (4) predictive analytics; and (5) actuarial judgment.

#### *Policy Duration Utilization*

Total policy duration utilization was developed using the 2020 *Guidelines* utilization projection model with inputs based on MedAmerica's actual experience and actuarial judgment.

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

The policy duration utilization assumption produced using these assumptions and the 2020 *Guidelines* utilization projection model were then used as the underlying expectation for the claim duration utilization analysis described below.

#### *Claim Duration Utilization*

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

Exhibit A-7 supports the claim duration total utilization assumption for experience in claim months 4 and later for each characteristic by which the utilization assumption varies.

- Exhibit A-7a provides the claim duration adjustment factors that are to be applied to the policy duration utilization assumption described above.
- Exhibit A-7b provides A:E results for all products of MedAmerica, its affinity partners, and any acquired business for experience in claim months 4 and later and includes the following:
  - Actual paid claims [A].
  - A:E ratios are shown separately for the policy duration utilization assumption described above [B] and the current utilization assumption [C]. This fit will not be perfect (i.e., ratios deviate from 1.0) because the main goal is to develop an assumption that generalizes well to new data by balancing assumption complexity and fit on the historical experience. Additionally, as seen in Exhibit A-7b, the trend adjustments applied move the overall fit for claim durations 6 and later further from 1.00 as this is the point at which the trend adjustments are applied to the assumption.

#### ***Prospective Improvement***

For projected active mortality and claim incidence improvement, the G2 improvement scale from the 2012IAM mortality table was used. The G2 improvement scale varies by attained age and gender. It is applied beginning in the first projection year and continues for 10 projection years.

#### ***Rate Increase Dependent Assumptions***

At the time of a rate increase, insureds have options to elect a contingent benefit upon lapse (CBUL) or reduced benefit options (RBO). Adverse selection is assumed relative to CBUL and RBO elections. These policyholder behavior assumptions are provided below. These assumptions are based on MedAmerica and its affinity partners, and MedAmerica's acquired business's combined actual CBUL and RBO election rate experience, industry data, and actuarial judgment—particularly at the higher rate increase magnitudes where limited experience exists.

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<sup>1</sup> Genworth. (2021, November). Genworth Cost of Care Survey. Retrieved from Genworth Cost of Care Survey: <https://www.genworth.com/aging-and-you/finances/cost-of-care.html>

## Appendix A

### Development of and Justification for Current Assumptions

#### *Contingent Benefit Upon Lapse Election*

A CBUL election rate is determined as a function of the magnitude of the rate increase. The assumption is applied on a seriatim basis based on the requested rate increase as shown in the following table.

Requested Rate Increase	CBUL Assumption
< 50%	Rate Increase x 25%
50% – 125%	(Rate Increase – 50%) x 10% + 12.5%
> 125%	20%

No CBUL elections are assumed for limited-pay policies.

#### *Reduced Benefit Options*

We assume that those electing RBO will reduce their benefits so that premiums after the increase are closer to those before the increase. The percent reduction in premium is assumed to correspond to an equivalent percent reduction in claims. The RBO election rate is based on the requested rate increase and is applied on a seriatim basis. The RBO election rate is assumed to be 20% of the requested rate increase. For example, a 10% rate increase would result in an RBO election rate of 2%. The RBO election rate is then capped at 35%. No RBO elections are assumed for limited-pay policies or policies that previously elected a landing spot (i.e., “tailored benefit options”).

Based on the RBO election function, the reduction to premium and claims can then be determined as follows:

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

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

#### *Adverse Selection*

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

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

PoolMorb = morbidity of the pool before the rate increase = 1.0

AdvSelMorb = adverse morbidity of the remaining pool after the rate increase due to selective lapses

CBUL = percentage of insureds that elect CBUL

RBO = percentage of insureds that elect RBO

Solving the above for the adverse selection component results in the following formula:

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

The adverse selection assumption is applied to the claim incidence rates.

#### *Predictive Analytics*

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

## **Appendix A**

### **Development of and Justification for Current Assumptions**

#### *Penalized Generalized Linear Model*

Penalized GLMs were used to develop adjustments for (1) situs-specific incidence, (2) lifetime-pay voluntary lapse, (3) active mortality, and (4) on-claim utilization.

A penalized GLM is similar to a traditional GLM. The key difference is that it adds an additional constraint that penalizes the size of the model's coefficients in order to control overfitting the model to the historical data. This penalty placed on the coefficients can be seen as a credibility lever, which controls how much weight is given to the company's historical experience. A high penalty would give no weight to the data, leaving the benchmark assumption (e.g., 2020 *Guidelines*) unadjusted. No penalty would give full weight to the company's historic data, potentially making large adjustments to the benchmark assumption, which could be overfitting the historical experience. Therefore, when using a penalized GLM it is important to choose a penalty that gives the right amount of weight to the historic data to avoid underfitting or overfitting the experience. We used a k-fold cross-validation (described below) to test a series of penalty values.

#### *Gradient Boosting Machine*

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

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

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

#### *K-Fold Cross-Validation*

A k-fold cross-validation is an automated process by which model hyperparameters can be selected and evaluated. This process splits the data into "k" subsets and iteratively trains and tests the model independently on each subset of the data. This process gives an estimation of how well a model will generalize to new data that was not used to develop assumptions. Through the k-fold cross-validation, we evaluated the impact that hyperparameters had on a model's ability to predict on the unseen data by testing a range of hyperparameters. We selected hyperparameters to balance minimizing the k-fold cross-validation prediction error with the generalizability of the model. This allows for a robust and automated approach to determine the amount of weight to give actual experience versus the benchmark assumptions.

#### **Hazard Rates and Probabilities**

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

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

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

**Exhibit A-1**  
**Actual-to-Expected Claim Incidence Experience 2010-2019**  
**Policy Durations 10+**  
**All Products**

Product or Insured Characteristic	Exposure [A]	ALF			HHC			SNF			Total		
		Claim Count [B]	Actual-to-Expected (A/E)		Claim Count [B]	A/E		Claim Count [B]	A/E		Claim Count [B]	A/E	
			2020 Guidelines [C]	Expected <sup>(1)</sup> [D]		2020 Guidelines [C]	Expected <sup>(1)</sup> [D]		2020 Guidelines [C]	Expected <sup>(1)</sup> [D]		2020 Guidelines [C]	Expected <sup>(1)</sup> [D]
Gender													
Female	289,699	1,610	0.88	0.95	2,428	1.01	1.00	2,619	1.72	1.08	6,656	1.13	0.99
Male	193,120	710	0.87	0.87	1,578	1.11	0.98	1,742	1.93	1.12	4,029	1.26	0.98
Group or Individual													
Group	139,408	343	0.95	1.04	653	0.87	0.92	559	1.60	1.17	1,555	1.04	1.00
Individual	343,411	1,976	0.87	0.90	3,353	1.09	1.01	3,801	1.83	1.08	9,130	1.20	0.98
Marital Status													
Married	235,882	727	0.83	0.86	1,665	1.14	1.03	1,549	1.88	1.07	3,941	1.23	0.98
Single	131,030	710	0.85	0.89	1,350	1.11	0.99	1,420	1.93	1.11	3,480	1.22	0.98
Unknown	115,907	883	0.95	1.00	990	0.86	0.94	1,392	1.62	1.10	3,265	1.08	0.99
Product Type and Tax Status													
Cash	82,417	85	1.15	1.02	485	1.34	1.09	101	1.44	0.88	671	1.32	1.03
Non-Tax Qualified Reimb.	159,054	1,509	0.88	0.96	1,735	0.96	0.98	2,650	1.66	1.06	5,894	1.12	0.98
Tax Qualified Reimb.	241,348	725	0.85	0.85	1,786	1.08	0.98	1,609	2.12	1.16	4,120	1.24	0.99
Coverage Type													
Comprehensive	435,672	1,713	0.90	0.93	3,654	1.01	0.95	3,360	1.92	1.14	8,728	1.17	0.98
Home Care Only	6,679	0	0.00	0.00	201	0.97	0.99	0	0.00	0.00	201	0.97	0.99
Facility Only	40,468	606	0.81	0.90	150	0.00	0.00	1,000	1.48	0.96	1,756	1.21	1.00
Payment Duration													
Lifetime	419,207	2,220	0.89	0.93	3,720	1.04	0.98	4,168	1.82	1.10	10,109	1.18	0.99
Non-Lifetime	63,612	99	0.71	0.77	285	1.20	1.17	192	1.44	0.92	577	1.11	0.98
Benefit Period													
CNF	52,752	96	0.73	0.89	170	0.76	0.82	203	1.67	1.15	469	0.96	0.94
Lifetime	111,282	583	0.92	0.99	856	0.95	1.03	894	1.52	1.03	2,333	1.07	1.00
Non-Lifetime	318,785	1,640	0.87	0.90	2,980	1.10	0.99	3,264	1.91	1.11	7,883	1.23	0.98
Company													
MANY	129,292	609	0.82	0.84	1,349	1.19	1.02	1,312	1.90	1.06	3,270	1.24	0.97
Non-MANY	353,526	1,710	0.90	0.95	2,656	0.99	0.98	3,049	1.76	1.11	7,415	1.15	0.99
Attained Age													
<65	137,613	24	1.28	1.01	176	1.14	0.93	68	2.46	1.81	269	1.33	1.07
65-69	76,828	44	1.23	1.03	203	1.02	0.89	101	2.21	1.48	347	1.23	1.02
70-74	81,230	79	0.68	0.66	362	0.96	0.91	252	2.14	1.31	693	1.13	0.98
75-79	79,037	301	0.89	0.91	642	0.93	0.96	581	1.86	1.11	1,523	1.13	0.99
80-84	62,977	601	0.85	0.92	1,017	1.02	1.01	1,153	1.84	1.08	2,771	1.17	1.00
85-89	34,059	769	0.85	0.93	1,015	1.09	1.02	1,329	1.74	1.05	3,114	1.17	0.98
90+	11,075	502	0.96	0.96	590	1.25	1.05	876	1.66	1.05	1,968	1.23	0.96
Total	482,819	2,319	0.88	0.92	4,005	1.05	0.99	4,361	1.80	1.09	10,685	1.18	0.99

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

**Exhibit A-2a**  
**Ultimate Voluntary Lapse Probabilities**  
**Lifetime-Pay Policies for Attained Age 68 and Older and Policy Durations 10+**

**Prior to Series 11**

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

**Series 11 Individual**

Inflation Option	Benefit Period	Married		Single		Unknown	
		Male	Female	Male	Female	Male	Female
Non-Automatic	Non-Lifetime	0.4%	0.4%	0.5%	0.5%	0.4%	0.4%
	Lifetime	0.3%	0.3%	0.4%	0.4%	0.3%	0.3%
Automatic	Non-Lifetime	0.3%	0.3%	0.4%	0.4%	0.3%	0.3%
	Lifetime	0.2%	0.2%	0.3%	0.3%	0.2%	0.2%

**Series 11 Group**

Inflation Option	Benefit Period	Married		Single		Unknown	
		Male	Female	Male	Female	Male	Female
Non-Automatic	Non-Lifetime	1.1%	1.1%	1.5%	1.5%	1.2%	1.2%
	Lifetime	0.9%	0.8%	1.2%	1.1%	0.9%	0.9%
Automatic	Non-Lifetime	0.9%	0.8%	1.2%	1.1%	0.9%	0.9%
	Lifetime	0.7%	0.6%	0.9%	0.9%	0.7%	0.7%

**Exhibit A-2b**  
**Actual-to-Expected Voluntary Lapse Experience 2010-2019**  
**Lifetime-Pay for Policy Durations 10+**  
**All Products**

Product or Insured Characteristic	Policy Year Exposure [A]	Actual Lapses [B]	Actual-to-Expected Lapse Probability		
			Unadjusted [C]	Modeled [D]	Expected <sup>[1]</sup> [E]
Marital Status					
Married	187,616	1,602	0.84	0.97	1.16
Single	100,027	1,261	1.14	0.97	1.27
Unknown	102,396	600	0.84	0.97	1.29
Benefit Period and Inflation Protection					
Lifetime and Automatic	75,391	377	0.64	1.01	1.13
Lifetime and Non-Automatic	23,293	208	0.96	1.06	1.37
Non-Lifetime and Automatic	162,606	1,359	0.90	1.08	1.27
Non-Lifetime and Non-Automatic	128,749	1,519	1.07	0.87	1.19
Gender					
Female	234,339	2,090	0.93	0.96	1.22
Male	155,700	1,373	0.93	0.98	1.21
Attained Age					
<65	96,637	967	1.17	1.16	1.16
65-69	60,094	351	0.65	0.92	0.93
70-74	67,812	448	0.68	0.87	1.00
75-79	69,535	512	0.70	0.89	1.04
80-84	56,193	527	0.92	0.91	1.34
85-89	30,348	424	1.41	0.91	1.92
90+	9,420	234	2.48	1.06	3.13
Total	390,039	3,463	0.93	0.97	1.22

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

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

Attained Age	Gender		Marital Status			Inflation Option		Payment Duration		Group or Individual		Cohort Adjustments			Composite Termination Adjustment	Underwriting Risk Class			
	Male	Female	Married	Single	Unknown	Automatic	Non-Automatic	Lifetime	Non-Lifetime	Individual	Group	Cash	Estate Planning	Other		Preferred	Standard	Substandard	Unknown
<50	1.00	1.01	0.99	1.01	1.01	1.01	1.00	1.00	0.99	1.00	1.02	1.00	1.00	1.00	1.00	1.00	1.01	1.00	1.01
50	1.00	1.01	0.99	1.01	1.01	1.01	1.00	1.00	0.99	1.00	1.02	1.00	1.00	1.00	1.00	1.00	1.01	1.00	1.01
51	1.00	1.01	0.99	1.01	1.01	1.01	1.00	1.00	0.99	1.00	1.02	1.00	1.00	1.00	1.00	1.00	1.01	1.00	1.01
52	1.00	1.01	0.99	1.01	1.01	1.01	1.00	1.00	0.99	1.00	1.02	1.00	1.00	1.00	1.00	1.00	1.01	1.00	1.01
53	1.00	1.01	0.99	1.01	1.01	1.01	1.00	1.00	0.99	1.00	1.02	1.00	1.00	1.00	1.00	1.00	1.01	1.00	1.01
54	1.00	1.01	0.99	1.01	1.01	1.01	1.00	1.00	0.99	1.00	1.02	1.00	1.00	1.00	1.00	1.00	1.01	1.00	1.01
55	1.00	1.01	0.98	1.01	1.01	1.01	0.99	1.00	0.99	1.00	1.03	0.99	1.00	1.00	1.00	1.00	1.01	1.00	1.01
56	0.99	1.01	0.98	1.01	1.01	1.01	0.99	1.00	0.99	1.00	1.03	0.99	1.00	1.00	1.00	1.00	1.01	1.00	1.01
57	0.98	1.01	0.97	1.01	1.01	1.01	0.99	1.00	0.99	1.00	1.04	0.98	1.00	1.00	1.00	1.00	1.01	1.00	1.01
58	0.97	1.00	0.96	1.01	1.01	1.00	0.99	1.00	0.99	1.00	1.05	0.97	1.00	1.00	1.00	1.00	1.01	1.00	1.01
59	0.95	0.99	0.96	1.01	1.01	0.99	0.99	1.00	1.00	1.00	1.05	0.95	1.00	1.00	1.00	1.00	1.00	1.00	1.00
60	0.94	0.98	0.95	1.01	1.02	0.99	0.99	1.00	1.00	1.00	1.05	0.94	1.00	1.00	1.00	1.00	1.00	1.00	1.00
61	0.94	0.97	0.94	1.01	1.02	0.98	0.99	1.00	1.00	1.00	1.05	0.93	1.00	1.00	1.00	1.00	1.01	1.00	1.00
62	0.93	0.97	0.94	1.01	1.02	0.98	0.99	1.00	0.99	1.00	1.05	0.92	1.01	1.00	1.00	1.00	1.01	1.00	1.00
63	0.93	0.97	0.93	1.01	1.02	0.98	0.99	1.00	0.99	1.00	1.04	0.92	1.01	1.00	1.00	1.00	1.02	1.00	1.00
64	0.93	0.98	0.93	1.02	1.03	0.98	0.99	1.00	0.99	1.00	1.05	0.91	1.02	1.00	1.00	1.00	1.02	1.00	1.00
65	0.92	0.98	0.91	1.04	1.02	0.98	0.99	1.00	0.98	1.00	1.04	0.90	1.03	1.00	1.00	1.00	1.01	1.02	1.01
66	0.92	0.98	0.91	1.05	1.02	0.98	0.99	1.00	0.97	1.00	1.05	0.90	1.04	1.00	1.00	1.00	1.02	1.02	1.02
67	0.92	0.98	0.90	1.06	1.01	0.98	0.98	1.00	0.96	1.00	1.05	0.90	1.05	1.00	1.00	1.00	1.03	1.02	1.03
68	0.94	0.97	0.90	1.07	1.00	0.99	0.98	1.00	0.94	1.00	1.05	0.90	1.06	1.00	1.02	1.04	1.02	1.04	1.04
69	0.94	0.95	0.90	1.08	1.00	0.99	0.98	1.00	0.93	1.00	1.05	0.91	1.08	1.00	1.03	1.04	1.02	1.04	1.04
70	0.96	0.95	0.90	1.09	1.00	0.99	0.98	1.00	0.91	1.00	1.05	0.92	1.09	1.00	1.05	1.04	1.02	1.04	1.04
71	0.97	0.95	0.90	1.09	1.00	0.99	0.98	1.00	0.90	1.00	1.04	0.92	1.11	1.00	1.06	1.04	1.03	1.04	1.04
72	0.97	0.95	0.90	1.09	1.00	0.99	0.98	1.00	0.90	1.00	1.04	0.92	1.12	1.00	1.08	1.03	1.04	1.03	1.03
73	0.98	0.96	0.91	1.09	1.00	0.99	0.99	1.00	0.90	1.00	1.03	0.92	1.13	1.00	1.08	1.03	1.05	1.03	1.03
74	0.99	0.98	0.92	1.08	1.00	0.99	1.00	1.00	0.91	1.00	1.02	0.92	1.13	1.00	1.08	1.03	1.06	1.03	1.03
75	1.00	1.00	0.94	1.06	1.00	0.99	1.01	1.00	0.92	1.00	1.01	0.91	1.13	1.00	1.08	1.03	1.07	1.03	1.03
76	1.00	1.02	0.95	1.05	1.01	0.99	1.02	1.00	0.93	1.00	1.00	0.91	1.14	1.00	1.08	1.03	1.08	1.03	1.03
77	1.01	1.04	0.97	1.04	1.02	0.99	1.03	1.00	0.94	1.00	0.99	0.91	1.14	1.00	1.08	1.03	1.09	1.03	1.03
78	1.01	1.06	0.97	1.02	1.03	0.99	1.04	1.00	0.94	1.00	0.98	0.91	1.16	1.00	1.09	1.03	1.09	1.03	1.03
79	1.01	1.07	0.97	1.02	1.04	0.99	1.04	1.00	0.94	1.00	0.98	0.91	1.17	1.00	1.10	1.03	1.09	1.03	1.03
80	1.01	1.05	0.96	1.02	1.04	0.97	1.05	1.00	0.94	1.00	0.97	0.92	1.17	1.00	1.11	1.03	1.08	1.03	1.03
81	1.01	1.04	0.96	1.02	1.05	0.97	1.06	1.00	0.93	1.00	0.97	0.92	1.17	1.00	1.12	1.03	1.07	1.03	1.03
82	1.00	1.01	0.96	1.01	1.04	0.95	1.05	1.00	0.93	1.00	0.97	0.92	1.16	1.00	1.13	1.02	1.06	1.02	1.02
83	0.99	0.99	0.97	1.01	1.03	0.95	1.05	1.00	0.92	1.00	0.97	0.92	1.15	1.00	1.13	1.02	1.05	1.02	1.02
84	0.97	0.97	0.96	1.01	1.02	0.94	1.04	1.00	0.93	1.00	0.98	0.92	1.15	1.00	1.14	1.01	1.05	1.01	1.01
85	0.96	0.96	0.99	1.00	1.01	0.95	1.03	1.00	0.93	1.00	0.98	0.93	1.15	1.00	1.14	1.02	1.05	1.01	1.01
86	0.95	0.95	1.00	1.00	1.00	0.95	1.02	1.00	0.94	1.00	0.99	0.93	1.16	1.00	1.15	1.00	1.05	1.00	1.00
87	0.95	0.96	1.00	1.00	1.00	0.96	1.02	1.00	0.95	1.00	0.99	0.94	1.16	1.00	1.15	1.01	1.05	1.01	1.01
88	0.96	0.96	1.00	1.00	1.00	0.96	1.01	1.00	0.96	1.00	1.00	0.94	1.16	1.00	1.15	1.01	1.05	1.01	1.01
89	0.97	0.97	1.00	1.00	1.00	0.97	1.01	1.00	0.96	1.00	1.00	0.95	1.14	1.00	1.15	1.01	1.05	1.01	1.01
90	0.98	0.98	1.00	1.00	1.00	0.97	1.01	1.00	0.97	1.00	1.01	0.96	1.12	1.00	1.15	1.02	1.05	1.02	1.02
91	0.99	0.98	1.00	1.00	1.00	0.98	1.01	1.00	0.97	1.00	1.01	0.97	1.09	1.00	1.15	1.03	1.04	1.03	1.03
92	1.00	0.99	1.00	1.00	1.00	0.98	1.01	1.00	0.97	1.00	1.01	0.97	1.06	1.00	1.15	1.03	1.03	1.03	1.03
93	1.00	1.01	1.00	1.00	1.00	0.99	1.01	1.00	0.98	1.00	1.00	0.98	1.04	1.00	1.15	1.03	1.03	1.03	1.03
94	1.00	1.02	1.00	1.00	1.00	0.99	1.02	1.00	0.98	1.00	1.00	0.99	1.02	1.00	1.15	1.03	1.02	1.03	1.03
95	1.00	1.03	1.00	1.00	1.00	0.99	1.01	1.00	0.98	1.00	1.00	0.99	1.01	1.00	1.15	1.02	1.01	1.02	1.02
96	0.99	1.03	1.00	1.00	1.00	0.99	1.01	1.00	0.99	1.00	1.00	1.01	1.01	1.00	1.15	1.02	1.01	1.01	1.01
97	1.00	1.03	1.00	1.00	1.00	1.00	1.01	1.00	0.99	1.00	1.00	1.00	1.00	1.00	1.15	1.01	1.01	1.01	1.01
98	0.99	1.02	1.00	1.00	1.00	1.00	1.01	1.00	0.99	1.00	1.00	1.00	1.00	1.00	1.15	1.01	1.00	1.01	1.01
99	0.99	1.02	1.00	1.00	1.00	1.00	1.01	1.00	1.00	1.00	1.00	1.00	1.00	1.00	1.15	1.01	1.00	1.01	1.01
100+	1.00	1.02	1.00	1.00	1.00	1.00	1.01	1.00	1.00	1.00	1.00	1.00	1.00	1.00	1.15	0.99	1.01	1.00	1.01

**Exhibit A-3b**  
**Actual-to-Expected Active Mortality Experience 2010-2019**  
**Policy Durations 10+**  
**All Products**

Product or Insured Characteristic	Policy Year Exposure	Actual Deaths	Actual-to-Expected Active Mortality Probability		
	[A]	[B]	Unadjusted [C]	Modeled [D]	Expected <sup>[1]</sup> [E]
Gender					
Female	289,699	3,464	1.02	1.01	0.91
Male	193,120	3,636	0.97	0.99	0.89
Group or Individual					
Group	139,408	1,240	1.04	1.04	0.96
Individual	343,411	5,860	0.98	0.99	0.89
Marital Status					
Married	235,882	2,930	0.93	0.97	0.88
Single	131,030	2,040	1.05	1.00	0.90
Unknown	115,907	2,130	1.04	1.03	0.93
Payment Duration					
Lifetime	419,207	6,750	1.01	1.01	0.91
Non-Lifetime	63,612	350	0.72	0.80	0.74
Inflation Option					
Automatic	281,978	3,144	0.95	0.99	0.91
Non-Automatic	200,840	3,956	1.03	1.00	0.90
Underwriting Risk Class					
Preferred	79,819	723	0.74	0.85	0.77
Standard	235,774	4,198	1.04	1.01	0.91
Substandard	8,146	221	1.46	1.43	1.29
Unknown	159,079	1,958	1.00	1.00	0.90
Cohort					
Cash	82,417	312	0.60	0.71	0.67
Estate Planning	46,064	1,118	1.32	1.15	1.03
Other	354,338	5,670	0.98	0.99	0.89
Attained Age					
<65	137,613	322	0.93	0.99	0.99
65-69	76,828	387	0.88	0.98	0.97
70-74	81,230	651	0.91	0.97	0.91
75-79	79,037	1,257	1.06	1.01	0.94
80-84	62,977	1,783	1.04	1.00	0.89
85-89	34,059	1,650	0.96	1.00	0.87
90+	11,075	1,050	1.02	1.00	0.87
Total	482,819	7,100	0.99	1.00	0.90

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



**Exhibit A-4**  
**Actual-to-Expected Composite<sup>[1]</sup> Termination Experience 2010-2019**  
**Lifetime-Pay for Policy Durations 10+**  
**All Products**

Product or Insured Characteristic	Policy Year Exposure [A]	Actual Terminations [B]	Actual-to-Expected <sup>[2]</sup> Termination Probability [C]
<b>Gender</b>			
Female	234,729	5,104	1.02
Male	155,943	4,601	0.98
<b>Marital Status</b>			
Married	187,985	4,137	0.98
Single	100,243	3,015	1.04
Unknown	102,443	2,553	1.00
<b>Benefit Period and Inflation Option</b>			
Lifetime and Automatic	75,391	1,212	0.99
Lifetime and Non-Automatic	23,293	727	1.10
Non-Lifetime and Automatic	162,606	3,452	1.03
Non-Lifetime and Non-Automatic	129,382	4,314	0.97
<b>Group or Individual</b>			
Group	114,276	1,806	0.97
Individual	276,396	7,899	1.01
<b>Underwriting Risk Class</b>			
Preferred	61,808	1,115	0.91
Standard	208,942	6,155	1.04
Substandard	7,345	282	1.40
Unknown	112,576	2,153	0.92
<b>Attained Age</b>			
<65	96,781	1,218	1.14
65-69	60,188	662	0.96
70-74	67,915	1,026	0.97
75-79	69,647	1,630	0.97
80-84	56,285	2,147	0.98
85-89	30,408	1,888	0.99
90+	9,447	1,134	1.04
<b>Total</b>	<b>390,671</b>	<b>9,705</b>	<b>1.00</b>

[1] Combination of active mortality and voluntary lapse.

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

**Exhibit A-5**  
**Actual-to-Expected Disabled Mortality Experience 2010-2019**  
**Claim Months 4+**  
**All Products**

Product or Insured Characteristic	ALF				HHC				SNF				Total			
	Exposure [A]	Actual Deaths [B]	Actual-to-Expected (A:E)		Exposure [A]	Actual Deaths [B]	A:E		Exposure [A]	Actual Deaths [B]	A:E		Exposure [A]	Actual Deaths [B]	A:E	
			2020 <i>Guidelines</i> [C]	Expected <sup>[1]</sup> [D]			2020 <i>Guidelines</i> [C]	Expected <sup>[1]</sup> [D]			2020 <i>Guidelines</i> [C]	Expected <sup>[1]</sup> [D]			2020 <i>Guidelines</i> [C]	Expected <sup>[1]</sup> [D]
Gender																
Female	45,656	794	1.10	1.01	60,873	1,084	1.14	1.01	48,681	1,183	1.11	1.02	155,210	3,061	1.12	1.02
Male	14,286	391	1.05	0.99	31,553	844	1.12	1.03	23,088	823	1.03	0.98	68,928	2,058	1.07	1.00
Benefit Period																
Lifetime	20,196	380	1.12	0.99	25,986	490	1.18	1.02	19,135	507	1.20	1.04	65,317	1,377	1.17	1.02
Non-Lifetime	39,746	805	1.06	1.00	66,440	1,438	1.11	1.02	52,634	1,499	1.04	0.99	158,821	3,742	1.07	1.01
Company																
MANY	14,573	281	1.01	0.98	31,398	638	1.08	1.01	20,625	544	0.98	0.97	66,596	1,463	1.03	0.99
Non-MANY	45,370	904	1.10	1.01	61,027	1,290	1.16	1.02	51,144	1,462	1.12	1.02	157,541	3,656	1.13	1.02
Group or Individual																
Group	6,663	112	0.90	0.93	15,159	252	0.96	1.02	8,626	194	0.87	0.90	30,448	558	0.92	0.96
Individual	53,279	1,073	1.10	1.01	77,267	1,676	1.16	1.02	63,143	1,812	1.11	1.02	193,690	4,561	1.12	1.02
Claim Duration (Annual)																
1	15,584	272	0.97	0.94	19,933	508	1.07	0.99	21,190	750	1.08	1.02	56,706	1,530	1.05	1.00
2	16,802	316	1.12	1.04	23,986	485	1.20	1.07	21,316	530	1.05	0.99	62,105	1,331	1.12	1.03
3	11,689	249	1.16	1.06	17,663	314	1.05	0.94	13,538	340	1.08	0.99	42,890	903	1.09	0.99
4	6,560	142	1.11	1.01	11,589	246	1.23	1.09	7,315	182	1.09	0.98	25,464	570	1.15	1.03
5	3,795	71	0.92	0.85	7,080	142	1.17	1.05	3,786	91	1.08	0.99	14,661	304	1.08	0.98
6+	5,513	135	1.18	1.03	12,174	233	1.12	1.00	4,625	113	1.17	1.00	22,312	481	1.15	1.01
Incurred Age																
<65	1,064	12	0.73	0.89	10,082	120	0.70	0.82	1,766	22	0.59	0.72	12,911	154	0.69	0.81
65-69	1,771	21	0.75	0.81	5,918	110	1.06	1.05	1,891	38	0.86	0.89	9,580	169	0.96	0.97
70-74	3,093	51	1.01	0.95	9,008	173	1.13	1.01	4,489	122	1.17	1.07	16,590	346	1.12	1.02
75-79	10,258	180	1.07	0.98	15,697	356	1.32	1.11	11,727	283	1.04	0.95	37,682	819	1.15	1.02
80-84	17,069	339	1.15	1.04	22,164	456	1.16	1.00	19,691	565	1.17	1.05	58,924	1,360	1.16	1.03
85-89	17,792	368	1.11	1.03	20,277	446	1.12	0.99	20,711	581	1.06	0.99	58,780	1,395	1.09	1.00
90+	8,896	214	1.03	0.97	9,281	267	1.21	1.09	11,494	395	1.06	1.02	29,671	876	1.09	1.03
Total	59,942	1,185	1.08	1.00	92,426	1,928	1.13	1.02	71,769	2,006	1.08	1.00	224,137	5,119	1.10	1.01

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

**Exhibit A-6**  
**Actual-to-Expected Disabled Recovery Experience 2010-2019**  
**Claim Months 4+**  
**All Products**

Product or Insured Characteristic	ALF				HHC				SNF				Total			
	Exposure [A]	Actual Recoveries [B]	Actual-to-Expected (A:E)		Exposure [A]	Actual Recoveries [B]	A:E		Exposure [A]	Actual Recoveries [B]	A:E		Exposure [A]	Actual Recoveries [B]	A:E	
			2020 <i>Guidelines</i> [C]	Expected <sup>[1]</sup> [D]			2020 <i>Guidelines</i> [C]	Expected <sup>[1]</sup> [D]			2020 <i>Guidelines</i> [C]	Expected <sup>[1]</sup> [D]			2020 <i>Guidelines</i> [C]	Expected <sup>[1]</sup> [D]
Gender																
Female	45,656	64	0.79	1.09	60,873	249	0.68	0.98	48,681	163	0.87	1.01	155,210	476	0.75	1.00
Male	14,286	26	0.71	0.95	31,553	124	0.73	0.98	23,088	92	0.91	1.05	68,928	242	0.79	1.00
Benefit Period																
Lifetime	20,196	17	0.57	0.91	25,986	70	0.67	0.99	19,135	40	0.68	0.92	65,317	127	0.66	0.96
Non-Lifetime	39,746	73	0.83	1.08	66,440	303	0.70	0.98	52,634	215	0.94	1.04	158,821	591	0.79	1.01
Company																
MANY	14,573	19	0.60	0.87	31,398	114	0.64	0.98	20,625	72	0.81	1.02	66,596	205	0.69	0.98
Non-MANY	45,370	71	0.83	1.10	61,027	259	0.72	0.98	51,144	183	0.92	1.02	157,541	513	0.80	1.01
Group or Individual																
Group	6,663	10	0.74	0.95	15,159	49	0.56	0.86	8,626	38	1.05	1.13	30,448	97	0.71	0.96
Individual	53,279	80	0.77	1.06	77,267	324	0.72	1.00	63,143	217	0.86	1.01	193,690	621	0.77	1.01
Claim Duration (Annual)																
1	15,584	56	1.56	1.26	19,933	238	0.91	0.97	21,190	174	1.35	1.05	56,706	468	1.10	1.03
2	16,802	20	0.65	1.00	23,986	65	0.50	0.93	21,316	56	0.72	1.12	62,105	141	0.59	1.01
3	11,689	3	0.13	0.35	17,663	25	0.38	0.95	13,538	10	0.24	0.61	42,890	38	0.29	0.74
4	6,560	4	0.29	0.75	11,589	15	0.38	0.96	7,315	8	0.36	0.93	25,464	27	0.36	0.91
5	3,795	4	0.58	1.22	7,080	10	0.51	0.98	3,786	2	0.22	0.45	14,661	16	0.45	0.90
6+	5,513	3	0.40	0.68	12,174	20	0.97	1.49	4,625	5	0.59	0.97	22,312	28	0.76	1.22
Incurred Age																
<65	1,064	3	1.39	1.27	10,082	76	1.09	0.98	1,766	14	1.88	1.47	12,911	93	1.17	1.04
65-69	1,771	3	0.72	0.78	5,918	52	1.15	1.15	1,891	16	1.69	1.27	9,580	71	1.21	1.15
70-74	3,093	11	1.67	1.84	9,008	40	0.66	0.84	4,489	30	1.44	1.12	16,590	81	0.92	1.01
75-79	10,258	9	0.42	0.61	15,697	63	0.68	1.06	11,727	52	1.00	1.10	37,682	124	0.75	1.02
80-84	17,069	28	0.81	1.16	22,164	64	0.52	0.93	19,691	65	0.74	0.96	58,924	157	0.64	0.98
85-89	17,792	23	0.66	0.96	20,277	51	0.51	0.94	20,711	50	0.62	0.84	58,780	124	0.58	0.90
90+	8,896	13	0.94	1.19	9,281	27	0.59	0.95	11,494	28	0.94	1.10	29,671	68	0.76	1.05
Total	59,942	90	0.77	1.05	92,426	373	0.70	0.98	71,769	255	0.88	1.02	224,137	718	0.76	1.00

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

**Exhibit A-7a**  
**Claim Duration Utilization Adjustment Factors**  
**All Products**

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

**Exhibit A-7a**  
**Claim Duration Utilization Adjustment Factors**  
**All Products**

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

**Exhibit A-7a**  
**Claim Duration Utilization Adjustment Factors**  
**All Products**

Claim Duration	ALF Reimbursement									HHC Reimbursement								
	Home Care Only			1% - 60%			61% +			Facility Only			1% - 50%			51% +		
	ALF	HHC	SNF	ALF	HHC	SNF	ALF	HHC	SNF	ALF	HHC	SNF	ALF	HHC	SNF	ALF	HHC	SNF
1	1.00	1.00	1.00	1.00	1.00	1.00	0.99	1.00	0.99	1.00	1.00	1.00	1.00	0.99	0.99	1.00	1.00	1.00
2	1.00	1.00	1.00	1.00	1.01	0.99	0.99	0.99	0.99	0.99	1.00	1.00	1.01	1.00	0.99	0.98	1.00	1.00
3	1.00	1.01	1.00	1.01	0.98	0.98	0.99	0.99	0.99	0.99	1.00	1.00	1.01	1.00	0.98	0.97	1.00	1.00
4	1.00	1.01	1.00	1.01	0.97	0.97	0.98	0.98	0.98	0.98	1.00	1.00	1.02	1.00	0.97	0.95	0.99	0.99
5	1.00	1.01	1.00	1.02	0.97	0.96	0.98	0.98	0.98	0.98	0.99	1.00	1.03	1.00	0.97	0.94	0.99	0.98
6	1.00	1.01	1.00	1.02	0.96	0.95	0.97	0.97	0.97	0.98	0.99	1.00	1.04	1.01	0.97	0.93	0.99	0.98
7	1.00	1.01	1.00	1.02	0.96	0.94	0.97	0.97	0.99	0.99	1.00	1.04	1.01	0.97	0.93	0.99	0.97	0.95
8	1.00	1.01	1.00	1.02	0.96	0.93	0.97	0.98	0.99	0.99	1.00	1.05	1.01	0.97	0.93	0.99	0.97	0.94
9	1.00	1.00	1.00	1.02	0.97	0.92	0.97	0.98	1.00	0.99	1.00	1.05	1.01	0.98	0.93	0.99	0.97	0.94
10	1.00	1.00	1.00	1.02	0.98	0.91	0.97	0.98	1.00	0.99	1.00	1.04	1.02	0.99	0.94	0.99	0.97	0.94
11	1.00	1.00	1.00	1.02	0.99	0.91	0.97	0.98	1.01	0.99	1.00	1.04	1.01	0.99	0.94	0.99	0.97	0.94
12	1.00	1.00	1.00	1.02	1.00	0.91	0.97	0.98	1.01	0.99	1.00	1.03	1.01	1.00	0.94	0.99	0.98	0.94
13	1.00	1.00	1.00	1.02	1.00	0.90	0.97	0.98	1.02	0.99	1.00	1.03	1.01	1.00	0.94	0.99	0.98	0.95
14	1.00	1.00	1.00	1.03	1.01	0.90	0.97	0.98	1.02	0.99	1.00	1.03	1.01	1.01	0.95	0.99	0.98	0.95
15	1.00	1.00	1.00	1.03	1.02	0.90	0.97	0.98	1.02	1.00	1.00	1.02	1.01	1.01	0.95	1.00	0.98	0.95
16	1.00	1.00	1.00	1.03	1.02	0.90	0.97	0.98	1.02	1.00	1.00	1.02	1.00	1.02	0.95	1.00	0.98	0.95
17	1.00	1.00	1.00	1.03	1.02	0.90	0.97	0.98	1.02	1.00	1.00	1.02	1.00	1.03	0.95	1.00	0.98	0.95
18	1.00	1.00	1.00	1.03	1.03	0.90	0.97	0.98	1.02	1.00	1.00	1.02	1.00	1.03	0.95	1.00	0.98	0.95
19	1.00	1.01	1.00	1.03	1.03	0.90	0.97	0.98	1.02	1.00	1.00	1.02	1.00	1.04	0.95	1.00	0.98	0.95
20	1.00	1.01	1.00	1.03	1.03	0.90	0.97	0.99	1.03	1.00	1.00	1.02	1.00	1.04	0.95	1.00	0.98	0.96
21	1.00	1.01	1.00	1.03	1.02	0.90	0.97	0.99	1.03	1.00	1.00	1.02	1.00	1.04	0.95	1.00	0.99	0.96
22	1.00	1.01	1.00	1.03	1.02	0.90	0.97	1.00	1.03	1.00	1.00	1.02	1.00	1.04	0.95	1.00	0.99	0.96
23	1.00	1.02	1.00	1.04	1.01	0.90	0.97	1.01	1.03	1.00	1.00	1.02	1.00	1.05	0.95	1.00	0.99	0.96
24	1.00	1.02	1.00	1.04	1.00	0.90	0.97	1.02	1.02	1.00	1.00	1.02	1.00	1.05	0.95	1.01	0.99	0.95
25	1.00	1.02	1.00	1.04	0.99	0.91	0.97	1.02	1.02	1.00	1.00	1.02	1.00	1.05	0.95	1.01	0.99	0.95
26	1.00	1.02	1.00	1.05	0.99	0.91	0.96	1.03	1.01	1.00	1.00	1.02	1.00	1.05	0.95	1.01	0.99	0.94
27	1.00	1.02	1.00	1.05	0.99	0.91	0.96	1.04	1.01	1.00	1.00	1.02	1.00	1.06	0.95	1.01	0.99	0.94
28	1.00	1.02	1.00	1.05	0.99	0.91	0.96	1.04	1.00	1.00	1.00	1.02	1.00	1.06	0.95	1.01	0.99	0.94
29	1.00	1.02	1.00	1.06	0.99	0.91	0.96	1.05	1.00	1.00	1.00	1.02	1.01	1.07	0.96	1.00	0.99	0.94
30	1.00	1.02	1.00	1.06	0.99	0.92	0.96	1.05	1.00	1.00	1.00	1.02	1.01	1.07	0.96	1.00	0.99	0.94
31	1.00	1.02	1.00	1.07	0.99	0.92	0.95	1.06	1.00	1.00	1.00	1.02	1.01	1.08	0.96	1.00	0.99	0.94
32	1.00	1.02	1.00	1.07	0.99	0.92	0.95	1.06	1.00	1.00	1.00	1.02	1.02	1.08	0.96	1.00	0.99	0.95
33	1.00	1.02	1.00	1.07	0.99	0.92	0.94	1.06	1.00	0.99	1.00	1.01	1.02	1.08	0.96	1.00	0.99	0.95
34	1.00	1.02	1.00	1.08	1.00	0.92	0.94	1.05	1.00	0.99	1.00	1.01	1.03	1.08	0.96	0.99	0.99	0.95
35	1.00	1.02	1.00	1.08	1.00	0.92	0.94	1.05	1.00	0.99	1.00	1.01	1.03	1.08	0.96	0.99	0.99	0.95
36	1.00	1.02	1.00	1.08	1.00	0.92	0.94	1.04	1.00	1.00	1.00	1.01	1.03	1.08	0.96	0.99	0.99	0.96
37	1.00	1.02	1.00	1.08	1.01	0.92	0.94	1.03	1.00	1.00	1.00	1.01	1.03	1.08	0.95	0.99	0.99	0.95
38	1.00	1.02	1.00	1.08	1.02	0.93	0.94	1.03	1.00	1.00	1.00	1.01	1.03	1.07	0.95	0.98	0.99	0.96
39	1.00	1.02	1.00	1.07	1.02	0.93	0.95	1.02	0.99	1.00	1.00	1.02	1.03	1.07	0.95	0.98	0.99	0.96
40	1.00	1.02	1.00	1.07	1.02	0.93	0.95	1.02	0.99	1.01	1.00	1.02	1.03	1.07	0.94	0.98	1.00	0.96
41	1.00	1.03	1.00	1.06	1.02	0.93	0.96	1.02	0.99	1.01	1.00	1.02	1.03	1.07	0.94	0.98	1.00	0.96
42	1.00	1.03	1.00	1.06	1.02	0.93	0.96	1.02	0.99	1.01	1.00	1.02	1.03	1.07	0.93	0.98	1.00	0.97
43	1.00	1.03	1.00	1.06	1.03	0.93	0.96	1.02	0.98	1.01	1.00	1.02	1.03	1.08	0.93	0.98	1.00	0.97
44	1.00	1.03	1.00	1.06	1.03	0.94	0.96	1.02	0.98	1.00	1.00	1.02	1.03	1.09	0.93	0.98	0.99	0.97
45	1.00	1.03	1.00	1.06	1.03	0.94	0.96	1.02	0.98	1.00	1.00	1.02	1.04	1.09	0.93	0.98	0.99	0.97
46	1.00	1.02	1.00	1.05	1.03	0.94	0.96	1.02	0.98	1.00	1.00	1.02	1.04	1.10	0.93	0.98	0.99	0.97
47	1.00	1.02	1.00	1.05	1.03	0.94	0.96	1.02	0.98	1.00	1.00	1.02	1.04	1.10	0.93	0.97	0.98	0.97
48	1.00	1.02	1.00	1.05	1.02	0.94	0.96	1.03	0.98	1.00	1.00	1.02	1.04	1.09	0.93	0.97	0.99	0.97
49	1.00	1.02	1.00	1.05	1.02	0.94	0.97	1.03	0.98	1.00	1.00	1.02	1.04	1.08	0.93	0.97	0.99	0.97
50	1.00	1.02	1.00	1.04	1.01	0.93	0.97	1.04	0.98	1.00	1.00	1.02	1.03	1.08	0.93	0.98	1.00	0.97
51	1.00	1.02	1.00	1.04	1.01	0.93	0.97	1.04	0.98	1.00	1.00	1.02	1.03	1.07	0.93	0.98	1.00	0.97
52	1.00	1.02	1.00	1.03	1.01	0.93	0.98	1.04	0.98	1.00	1.00	1.02	1.03	1.07	0.93	0.98	1.01	0.96
53	1.00	1.02	1.00	1.02	1.02	0.93	0.98	1.04	0.98	1.01	1.00	1.02	1.02	1.07	0.93	0.98	1.01	0.96
54	1.00	1.02	1.00	1.02	1.03	0.93	0.98	1.04	0.98	1.01	1.00	1.02	1.02	1.07	0.93	0.98	1.01	0.96
55	1.00	1.02	1.00	1.01	1.04	0.94	0.99	1.03	0.98	1.01	1.00	1.02	1.01	1.08	0.94	0.98	1.01	0.96
56	1.00	1.01	1.00	1.01	1.05	0.94	0.99	1.03	0.97	1.01	1.00	1.02	1.01	1.08	0.94	0.98	1.01	0.96
57	1.00	1.01	1.00	1.01	1.05	0.95	0.99	1.03	0.97	1.00	1.00	1.02	1.01	1.08	0.95	0.99	1.01	0.96
58	1.00	1.01	1.00	1.00	1.05	0.95	0.99											

**Exhibit A-7b**  
**Actual-to-Expected Claim Duration Utilization Experience 2016-2019**  
**Claim Months 4+**  
**All Products**

Product or Insured Characteristic	ALF			HHC			SNF			Total		
	Paid Claims [A]	Actual-to-Expected (A:E)		Paid Claims [A]	A:E		Paid Claims [A]	A:E		Paid Claims [A]	A:E	
		Policy Duration [B]	Expected <sup>[1]</sup> [C]		Policy Duration [B]	Expected <sup>[1]</sup> [C]		Policy Duration [B]	Expected <sup>[1]</sup> [C]		Policy Duration [B]	Expected <sup>[1]</sup> [C]
Inflation Option												
Automatic Inflation (For Life)	39,362,907	0.96	0.96	65,800,010	1.05	0.89	62,177,364	0.68	0.93	167,340,282	0.86	0.92
Limited Automatic Inflation <sup>[2]</sup>	23,612,554	0.99	0.99	18,869,668	1.23	0.97	23,579,356	0.93	1.02	66,061,578	1.03	0.99
Non-Automatic	27,158,053	1.01	0.98	34,278,407	1.20	0.98	41,847,256	0.88	0.97	103,283,716	1.00	0.98
Benefit Period												
Lifetime	30,134,928	1.00	0.98	38,148,514	1.22	0.94	35,592,075	0.89	0.97	103,875,516	1.03	0.96
Non-Lifetime	59,998,586	0.97	0.97	80,799,572	1.08	0.92	92,011,902	0.74	0.95	232,810,060	0.89	0.95
Group or Individual												
Group	12,808,144	0.91	0.94	24,236,098	0.95	0.78	16,048,892	0.68	0.88	53,093,133	0.84	0.84
Individual	77,325,370	1.00	0.98	94,711,987	1.17	0.98	111,555,085	0.80	0.97	283,592,443	0.95	0.97
ALF Reimbursement												
Home Care Only	N/A	N/A	N/A	5,695,464	1.25	1.06	N/A	N/A	N/A	5,695,464	1.25	1.06
<=60%	16,155,644	1.08	1.01	24,933,362	1.13	0.92	26,676,935	0.63	0.92	67,765,942	0.86	0.94
61%+	73,977,870	0.96	0.97	88,319,259	1.11	0.92	100,927,041	0.83	0.97	263,224,171	0.95	0.95
HHC Reimbursement												
Facility Only	17,312,922	0.99	0.98	N/A	N/A	N/A	20,763,384	0.95	0.99	38,076,307	0.97	0.98
<=50%	38,595,425	1.01	0.97	43,417,676	1.17	0.93	56,844,761	0.73	0.95	138,857,862	0.90	0.95
51%+	34,225,167	0.95	0.98	75,530,409	1.09	0.93	49,995,831	0.79	0.95	159,751,408	0.95	0.94
Incurral Age												
<75	9,065,695	0.91	0.91	27,621,865	1.01	0.79	15,420,332	0.69	0.88	52,107,893	0.87	0.83
75-84	38,476,122	0.98	0.98	48,847,962	1.13	0.97	56,606,647	0.76	0.95	143,930,731	0.92	0.96
85+	42,591,697	1.00	0.98	42,478,259	1.18	1.00	55,576,997	0.83	0.99	140,646,953	0.97	0.99
Claim Duration (Annual)												
1	22,299,300	0.95	1.00	17,708,022	0.91	0.99	35,117,465	0.79	0.98	75,124,788	0.86	0.99
2	25,152,049	0.98	1.00	28,006,419	1.05	0.98	37,719,002	0.79	0.98	90,877,470	0.91	0.99
3	18,196,970	1.02	0.99	24,528,975	1.17	0.99	24,508,103	0.79	0.98	67,234,048	0.96	0.98
4	9,871,896	1.03	0.98	17,708,807	1.23	0.99	13,630,033	0.77	0.97	41,210,736	0.99	0.98
5	5,516,047	1.00	0.98	11,378,874	1.29	1.00	7,248,071	0.74	0.94	24,142,991	1.00	0.98
6+	9,097,252	0.95	0.85	19,616,988	1.22	0.71	9,381,303	0.71	0.77	38,095,543	0.98	0.75
Total	90,133,514	0.98	0.98	118,948,085	1.12	0.93	127,603,977	0.78	0.96	336,685,576	0.93	0.95

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

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