
State:	Virginia	Filing Company:	Mutual of Omaha Insurance Company
TOI/Sub-TOI:	LTC03I Individual Long Term Care/LTC03I.003 Other		
Product Name:	Mutual of Omaha - 2016/2017 LTCi Rate Increase		
Project Name/Number:	2016/2017 LTCi/		

Filing at a Glance

Company:	Mutual of Omaha Insurance Company
Product Name:	Mutual of Omaha - 2016/2017 LTCi Rate Increase
State:	Virginia
TOI:	LTC03I Individual Long Term Care
Sub-TOI:	LTC03I.003 Other
Filing Type:	Rate
Date Submitted:	08/26/2016
SERFF Tr Num:	MUTA-130706482
SERFF Status:	Closed-Approved and Filed
State Tr Num:	MUTA-130706482
State Status:	Approved & Filed
Co Tr Num:	LAFOND
Implementation	On Approval
Date Requested:	
Author(s):	Jeff LaFond
Reviewer(s):	Janet Houser (primary)
Disposition Date:	11/30/2017
Disposition Status:	Approved and Filed
Implementation Date:	

State: Virginia **Filing Company:** Mutual of Omaha Insurance Company
TOI/Sub-TOI: LTC03I Individual Long Term Care/LTC03I.003 Other
Product Name: Mutual of Omaha - 2016/2017 LTCi Rate Increase
Project Name/Number: 2016/2017 LTCi/

General Information

Project Name: 2016/2017 LTCi	Status of Filing in Domicile: Authorized
Project Number:	Date Approved in Domicile: 05/04/2016
Requested Filing Mode: Review & Approval	Domicile Status Comments:
Explanation for Combination/Other:	Market Type: Individual
Submission Type: New Submission	Individual Market Type:
Overall Rate Impact: 27.6%	Filing Status Changed: 11/30/2017
	State Status Changed: 11/30/2017
Deemer Date:	Created By: Jeff LaFond
Submitted By: Jeff LaFond	Corresponding Filing Tracking Number:
	State TOI: LTC03I Individual Long Term Care

Filing Description:

This is a follow-up to the LTC Annual Report that was submitted on July 29, 2016, which includes our plan of action for the forms which a rate increase will be requested.

We are requesting a rate increase for LTCi policy forms LT50, NH50, HCA, NHA and LTA and associated riders. The rate increase, which we are requesting to be implemented over a 2-year period, is summarized below:

2016 Proposed Increase

Non-Lifetime Benefit Periods – 0.0%
Lifetime Benefit Period – 30.0%

Total – 16.7%

2017 Proposed Increase

Non-Lifetime Benefit Periods – 0.0%
Lifetime Benefit Period – 15.0%

Total – 9.3%

Total Proposed Increase

Non-Lifetime Benefit Periods – 0.0%
Lifetime Benefit Period – 49.5%

Total – 27.6%

The proposed effective date of the 2016 rate increase December 1, 2016, and the proposed effective date of the 2017 rate increase is December 1, 2017, subject to your State's approval.

In addition, this filing provides the updated projections pursuant to 14 VAC5-200-153 D which includes updated experience comparing the actual results to the experience that was projected in justifying the rate increases that were implemented in Virginia on May 1, 2013, and May 1, 2014. This is the 2nd of the three required filings.

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Company and Contact

Filing Contact Information

Jeff LaFond, Lead Actuarial Analyst Jeff.LaFond@mutualofomaha.com
6-Rerating 402-351-3799 [Phone]
Mutual of Omaha
Mutual of Omaha Plaza
Omaha, NE 68175

Filing Company Information

Mutual of Omaha Insurance Company	CoCode: 71412	State of Domicile: Nebraska
3300 Mutual of Omaha Plaza	Group Code: 261	Company Type: Health Insurance
Omaha, NE 68175	Group Name:	State ID Number:
(402) 351-2304 ext. [Phone]	FEIN Number: 47-0246511	

Filing Fees

Fee Required? No
Retaliatory? No
Fee Explanation:

State:	Virginia	Filing Company:	Mutual of Omaha Insurance Company
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Product Name:	Mutual of Omaha - 2016/2017 LTCi Rate Increase		
Project Name/Number:	2016/2017 LTCi/		

Correspondence Summary

Dispositions

Status	Created By	Created On	Date Submitted
Approved and Filed	Janet Houser	11/30/2017	11/30/2017

Objection Letters and Response Letters

Objection Letters

Status	Created By	Created On	Date Submitted
Info has been requested from company	Janet Houser	09/20/2017	09/20/2017
Info has been requested from company	Janet Houser	08/29/2017	08/29/2017
Info has been requested from company	Janet Houser	06/29/2017	06/29/2017
Disapproved	Janet Houser	08/31/2016	08/31/2016

Response Letters

Responded By	Created On	Date Submitted
Jeff LaFond	09/20/2017	09/20/2017
Jeff LaFond	09/08/2017	09/08/2017
Jeff LaFond	08/04/2017	08/04/2017
Jeff LaFond	04/26/2017	04/27/2017

Amendments

Schedule	Schedule Item Name	Created By	Created On	Date Submitted
Rate	Rate Schedules	Jeff LaFond	11/30/2017	11/30/2017
Form	Policy Adjustment Rider	Jeff LaFond	11/02/2017	11/02/2017
Supporting Document	Sample Policyholder Notification Letter	Jeff LaFond	08/29/2016	08/29/2016

Filing Notes

Subject	Note Type	Created By	Created On	Date Submitted
OHA3M	Note To Reviewer	Jeff LaFond	11/30/2017	11/30/2017
OHA3M form	Note To Filer	Janet Houser	11/30/2017	11/30/2017
Rates	Note To Filer	Janet Houser	11/30/2017	11/30/2017
Forms	Note To Filer	Janet Houser	11/02/2017	11/02/2017
Confirmation - Form LTC-BP-VA	Note To Reviewer	Jeff LaFond	08/07/2017	08/07/2017
Confirmation	Note To Filer	Janet Houser	08/07/2017	08/07/2017

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Project Name/Number:	2016/2017 LTCi/		

Filing Notes

Subject	Note Type	Created By	Created On	Date Submitted
Policy Adjustment Offer Form LTC-EP-VA	Note To Reviewer	Jeff LaFond	07/14/2017	07/14/2017
RRS	Reviewer Note	Janet Houser	11/30/2017	
Actuarial Certification	Reviewer Note	Janet Houser	11/30/2017	
email	Reviewer Note	Janet Houser	10/25/2017	
Act Review	Reviewer Note	Janet Houser	04/28/2017	

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Disposition

Disposition Date: 11/30/2017

Implementation Date:

Status: Approved and Filed

Comment: In approving this filing, the Company is reminded that pursuant to 14VAC5-200-153 D, it is required to provide updated experience for the next three years comparing the actual results to the results that the Company projected in justifying the rate increase. We would expect this filing to be made no later than July 1, 2019 and to include updated data through March 31, 2019.

Company Name:	Overall % Indicated Change:	Overall % Rate Impact:	Written Premium Change for this Program:	Number of Policy Holders Affected for this Program:	Written Premium for this Program:	Maximum % Change (where req'd):	Minimum % Change (where req'd):
Mutual of Omaha Insurance Company	71.500%	27.400%	\$930,803	1,551	\$3,394,766	49.500%	0.000%

Schedule	Schedule Item	Schedule Item Status	Public Access
Supporting Document (revised)	Certification of Compliance	Received & Acknowledged	Yes
Supporting Document	Product Checklist	Received & Acknowledged	Yes
Supporting Document	L&H Actuarial Memorandum	Withdrawn	Yes
Supporting Document (revised)	Long Term Care Insurance Rate Request Summary	Received & Acknowledged	Yes
Supporting Document (revised)	Sample Policyholder Notification Letter	Received & Acknowledged	Yes
Supporting Document	Current Rate Schedules	Received & Acknowledged	Yes
Supporting Document	04/27/2017 Response - Objection 2	Received & Acknowledged	Yes
Supporting Document	04/27/2017 Response - Objection 4	Received & Acknowledged	Yes
Supporting Document	04/27/2017 Response - Objection 7	Received & Acknowledged	Yes
Supporting Document	04/27/2017 Response - Objection 9	Received & Acknowledged	Yes
Supporting Document	04/27/2017 Response - Objection 9 (Item 10)	Received & Acknowledged	Yes
Supporting Document	08/04/2017 Response - Objection 1	Received & Acknowledged	Yes
Supporting Document	08/04/2017 Response - Objection 2	Received & Acknowledged	Yes
Supporting Document	08/04/2017 Response - Objection 3	Received & Acknowledged	Yes
Supporting Document	08/04/2017 Response - Objection 4	Received & Acknowledged	Yes
Supporting Document	08/04/2017 Response - Objection 5	Received & Acknowledged	Yes
Supporting Document	09/08/2017 Response - Objection 1	Received & Acknowledged	Yes

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Project Name/Number:	2016/2017 LTCi/		

Schedule	Schedule Item	Schedule Item Status	Public Access
Supporting Document	09/08/2017 Response - Objection 3	Received & Acknowledged	Yes
Supporting Document	09/08/2017 Response - Objection 3 (Excel spreadsheets)	Received & Acknowledged	Yes
Supporting Document	09/08/2017 Response - Objection 2	Received & Acknowledged	Yes
Supporting Document	Certification of Compliance	Withdrawn	Yes
Supporting Document	Long Term Care Insurance Rate Request Summary	Withdrawn	Yes
Supporting Document	Sample Policyholder Notification Letter	Withdrawn	Yes
Supporting Document	Sample Policyholder Notification Letter	Withdrawn	Yes
Form (revised)	Policy Adjustment Rider	Approved	Yes
Form (revised)	Premium Notification Letter (1st increase)	Filed	Yes
Form (revised)	Premium Notification Letter (2nd increase)	Filed	Yes
Form	Policy Adjustment Rider	Withdrawn	Yes
Form	Premium Notification Letter (1st increase)	Withdrawn	Yes
Form	Premium Notification Letter (2nd increase)	Withdrawn	Yes
Rate (revised)	Rate Schedules	Approved	Yes
Rate	Rate Schedules	Withdrawn	Yes
Rate	Rate Schedules	Withdrawn	Yes

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Objection Letter

Objection Letter Status	Info has been requested from company
Objection Letter Date	09/20/2017
Submitted Date	09/20/2017
Respond By Date	

Dear Jeff LaFond,

Introduction:

The submission is DISAPPROVED and may not be used in the Commonwealth of Virginia.

Thank you for your response dated 9/8/2017. In reviewing this additional information, the following concerns should be addressed:

1) In our previous objection 3, the Company was asked to calculate the loss ratios and to include the requested rate increase and statutory active life reserves (ALR, the contract reserves). It does not appear this information was provided.

2) Through an oversight on my part, I should have requested a Statement of Variability for the OPE4M form.

Conclusion:

We shall be glad to reconsider this submission upon receipt of the information noted above. Should you need clarification of any of the information contained in this letter, please contact the undersigned.

Thank you for your courtesy and consideration in this matter.

Sincerely,

Janet Houser

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Project Name/Number: 2016/2017 LTCi/

Objection Letter

Objection Letter Status Info has been requested from company
Objection Letter Date 08/29/2017
Submitted Date 08/29/2017
Respond By Date

Dear Jeff LaFond,

Introduction:

The submission is DISAPPROVED and may not be used in the Commonwealth of Virginia.

Thank you for your recent reply to our request for additional information. Before further consideration may be given, this new information presents the following concerns and /or questions:

Objection 1

- 08/04/2017 Response - Objection 1 (Supporting Document)
- Policy Adjustment Rider, OPE4M (Form)

Comments: Please confirm Form M1769 (LTC-VA) is not attached to the policy. If it is attached to the policy, it would need to be treated as a form and reviewed accordingly.

The two letters M1770 and M1771 should indicate form OPE4M has been included and that it should be attached to the policy which is used to endorse the policy, correct? The Statement of Variability explains as to what benefit changes this form will be used but it should also indicate the specific language that will appear. For example, [Benefit Change] section in the form will read as follows based on the insured's selection:

- Elimination Period has been changed from XXXXX to XXXXX
- Daily Benefit has been decreased from \$XXXXX to \$XXXXX
- Contingent Benefit Upon Lapse Option has been exercised in the amount of \$XXXXX
- Non-Forfeiture Benefit has been exercised in the amount of \$XXXXX
- The following rider has been removed and is no longer in form - [Specific Name of Rider]

If the insured has the option to reduce rather than drop the inflation rider, this should be included in the above by stating the Inflation Rider has been reduced from XXX% to XXX%.

We are assuming the stipulation noted in item (a) means the increase would not take effect on anyone on claim at the time of the increased premium. If this not the case, please advise.

Please explain the purpose of stipulation noted in item "(b) any periods which limit the exercise of any of our defenses."

In regards to the Statement of Variability for M1770 (LTC-VA), please expand the explanation for the revised benefit period to indicate the minimum benefit period that may be selected.

Objection 2

- Premium Notification Letter (1st increase), 0555A-VA-1 (Form)
- Premium Notification Letter (2nd increase), 0555A-VA-2 (Form)

Comments: Please remove the color highlights and attach final versions of each form to the Form Schedule.

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Please clarify in the last paragraph of the Contingent Benefit Upon Lapse section that this benefit will be implemented automatically if the rate increase is not paid and the policy lapses. In other words, the insured does not have to "exercise" this option for it to become effective.

Objection 3

- L&H Actuarial Memorandum (Supporting Document)

Comments: For calculating the Loss Ratio, policies need to be separated into blocks: Pre-Rate Stability (Pre-RS) and Post-Rate Stability (Post-RS). For the Post-RS block, please use the statutory maximum valuation interest rate for the any Loss Ratio calculations.

Please calculate the average expected Loss Ratio for each block (for the Post-RS block, please include the MAE). Please use historical data and projected values for what is expected using the old assumptions. Please use historical data and projected values for what is now expected using the new assumptions. For the last Loss Ratio calculation, please add four columns: 1) the rate increase percentage, 2) the additional premium from the rate increase, 3) the total premium, and 4) the Active Life Reserves (the ALR will not be a component of the Loss Ratio). For the Post-RS block, if the rate increase will trigger the contingent benefit upon lapse, in accordance with 14VAC5-200-153.B.b, please disclose how reserves have been incorporated in this rate increase.

To validate the rate increase, please use the 60%/80% Loss Ratio test for the Pre-RS block and the 58%/85% Loss Ratio Test for the Post RS block.

In the 60%/80% test, rather than 60% please use the greater of 60% or the Expected Loss Ratio. For the 80%, please use the greater of 80% or the Expected Loss Ratio. In the 58%/85% test, rather than 58% please use the greater of 58% or the Expected Loss Ratio (with the MAE). For the 85%, please use the greater of 85% or the Expected Loss Ratio (with the MAE). To use a Loss Ratio percentage that is lower the pricing Loss Ratio implies that the Company intends to lower the Loss Ratio for all past and future initial premiums.

Please include all Loss Ratio calculations in an Excel workbook, illustrating all formulas. There is no need to include a pdf file of each Loss Ratio.

Conclusion:

We shall be glad to reconsider this submission upon receipt of the information noted above. Should you need clarification of any of the information contained in this letter, please contact the undersigned.

Thank you for your courtesy and consideration in this matter.

Sincerely,
Janet Houser

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Product Name:	Mutual of Omaha - 2016/2017 LTCi Rate Increase		
Project Name/Number:	2016/2017 LTCi/		

Objection Letter

Objection Letter Status	Info has been requested from company
Objection Letter Date	06/29/2017
Submitted Date	06/29/2017
Respond By Date	

Dear Jeff LaFond,

Introduction:

The submission is DISAPPROVED and may not be used in the Commonwealth of Virginia.

Thank you for your recent reply to our request for additional information. Before further consideration may be given, this new information presents the following concerns and /or questions:

Objection 1

- 04/27/2017 Response - Objection 4 (Supporting Document)

Comments: According to your reply, forms LTC-BP-VA and LTC-EP-VA are used to update the policies at the insured's request which is not an issue. In reviewing Form LTC-EP-VA, the top section and bottom section both state to "keep this with your policy." The lower section should be corrected to state "return this portion to us". Please attach a revised form with a new form number to the Form Schedule for review and approval including a statement of variability.

In addition, the full and proper name of the company should be prominently displayed on the form pursuant to 14VAC5-100-50 2. Please confirm the form will be printed using at least 10 point for compliance with 14VAC5-100-50-50 5.

How is the policy updated for any other changes such as decreasing the daily benefit amount, removing riders or electing the contingent benefit upon lapse benefit or a contractual non-forfeiture benefit?

Objection 2

- 04/27/2017 Response - Objection 4 (Supporting Document)

Comments: Please provide a copy of Form HA3M-44 approved under state tracking number 7/14899 to Supporting Documentation. Please verify if the form is being administered in accordance with the revised regulation 14VAC5-200-185 D.

It would appear the Company is attempting to use the sample letter to update the policy when exercising the contingent benefit upon lapse benefit. As previously indicated, the policy must be amended or endorsed by an approved form such as a rider, endorsement, application or schedule of benefits that has been reviewed and approved by the Virginia Bureau of Insurance. The document must be dated or have an indication of the effective date of change in the policy benefits, state a change has been made to the policy and this new document will be part of the contract. If the company does not have any such form, please attach a new form for review and approval to the Form Schedule. Please include a statement of variability, if applicable. A certification of compliance pursuant with 14VAC5-100-40 3 and a readability certification of readability pursuant with 14VAC5-110-60 would be required.

Objection 3

- 04/27/2017 Response - Objection 4 (Supporting Document)

Comments: Please move Form 0555A-VA, the policyholder notification letter, from Supporting Documentation to the Form Schedule.

Since it is the Company's intent to implement the rate increase over two years, the letter should contain sufficient variability to use

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this letter for both periods. Please revise the letter accordingly. Please attach a Statement of Variability to Supporting Documentation.

Please advise how the company will address those individuals currently on waiver. That information may also be added to this letter with the appropriate variability.

Following the chart on page 1, the letter states your policy currently has a lifetime benefit period which then leads into the information regarding the second rate increase. The wording is somewhat confusing as this letter would only be sent to those with lifetime benefits. For clarification, we suggest the first sentence be removed and the paragraph restated to indicate premiums will again increase to \$x,xxx.xx on xx/xx/2018, reflecting an additional implementation of a 15% increase.

For compliance with 14VAC5-200-75 A 4 b, the letter must indicate the insured has a right a revised premium rate or rate schedule upon request. Stating the insured has the right to revise the benefit structure on page two does not satisfy this requirement.

Please revise the reference to "Contingent Non-Forfeiture Benefit" as the "Contingent Benefit Upon Lapse Benefit" for consistency with the regulation. The letter states the individual has 120 days form the effective date of the rate increase to exercise this option. Please be aware that pursuant to 14VAC5-200-185 D 5 c that a premium default during this time will be deemed to be the election of an offer to convert the coverage to a paid up status.

On page 2 of the letter the required language as set forth under 14VA5-200-75 D 4 is correct; however, please replace the word "commission" with "Virginia's State Corporation Commission" for clarity.

Objection 4

- L&H Actuarial Memorandum (Supporting Document)

Comments: Please respond to the following:

1)A)Please present a table for the five policy forms. This table should be separated for pre-RS and post-RS, and be separated for policies with a lifetime (LT) Benefit Period (BP) and a Non-LT BP (since Mutual desires to separate the rate increase for those with and without a LT BP). For each class, please indicate the number of policies and annualized premium in-force, in addition to the loss ratio and any modification for adverse experience (MAE). For post-RS policies, please indicate the loss ratio includes the MAE. Please do not combine the classes. We will refer to this as Table 1.

B)From Table 1, please weight the loss ratios by the inception-to-date earned premium. There should be at least 4 average loss ratios (more if there are various premium-payment-periods or survivorship options). Please measure any rate increase using these average loss ratios. If any experience loss ratio is below the minimum for that class, the margin will be used to offset any rate increase.

Objection 5

- L&H Actuarial Memorandum (Supporting Document)

Comments: The following refers to the Actuarial Memorandum:

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1)Section 3:

This section states, more than once, that current claim expectations are worse than was originally projected. Please compare the current claim expectations to the expected claims as of the most recent rate increase.

2) Section 5:

A)Lapse: The lapse rates on page 2 appear to have an average 1.5% or less (the total lapse rate is not indicated). In the answer provided to Objection 1, an average lapse rate provided is 3.5% (1- 1551/1608). Please recalculate the lapse rates for this table, using best-estimates. Also, please indicate the overall lapse rate.

B)Morbidity: This section states that Millimans claim costs were used for projecting Mutuals claim costs. Please recalculate claim costs using Mutual experience data. Where Mutual data is not credible, please use Millimans claim costs to enhance the shape of Mutuals claim cost curve.

C)Please adjust the loss ratio exhibits to reflect a rate increase that begins no sooner than 2018.

3) Section 7:

This Section states that the minimum loss ratio is 60%. For pre-RS, this is the minimum regulatory requirement. For post-RS there is no minimum Loss ratio. For each policy form, the minimum is the filed loss ratio, modified by the actual sales distribution if greater. For the post-RS block, the MAE is added to this minimum. Please re-state. If a policy form has had a rate increase, the loss ratio may have changed. You may wish to refer to Table 1.

4) Section 9:

A)This section refers to loss ratio calculations. Please file these in an unprotected Excel workbook.

B)For historical data, when separate years are filed, for example: Exhibit 6, for a given historical year, the incurred claims do not match. For historical incurred claims, please use the current best-estimate.

C)For the pre-RS blocks, when illustrating the loss ratio calculation, please provide a column with the contract reserve (that is, the active life reserve) for each year.

D)When using the 58%/85% loss ratio test, use of the 58% indicates that you wish to lower the initial loss ratio to 58%, including historic premiums. For each class, rather than 58%, please use the average loss ratio in item 1.B.

Objection 6

- Sample Policyholder Notification Letter (Supporting Document)

Comments: In regards to your response to Objection 4, Item 3b:

This response states that policyholders may elect to drop their inflation protection. Please confirm that, if they do elect to drop their inflation protection, they may continue their benefits at the current level.

Conclusion:

We shall be glad to reconsider this submission upon receipt of the information noted above. Should you need clarification of

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any of the information contained in this letter, please contact the undersigned.

Thank you for your courtesy and consideration in this matter.

Sincerely,
Janet Houser

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Objection Letter

Objection Letter Status Disapproved
Objection Letter Date 08/31/2016
Submitted Date 08/31/2016
Respond By Date

Dear Jeff LaFond,

Introduction:

The submission is DISAPPROVED and may not be used in the Commonwealth of Virginia.

A preliminary review of the submitted filing indicates the following concerns and questions. We'll continue our review of the submitted filing upon receipt of the following information.

Objection 1

- Rate Schedules, [LT50-Series 19241, LT50-Series 19409, ODX5M, NH50-Series 19242, NH50-Series 19410, ODX6M, HCA-Series 19629, HCA-Series20249, 0GH1M-44, NHA-Series 19630, NHA-Series 20250, 0GH3M-44, 0GH4M-44, 0GH5M-44, 0GH6M-REV, 0GH7M-44, 0GH8M-44, LTA-Series 19631, LTA-Series 20251, 0GH7M-44 REV, 0GH8M-44 REV, 0GH9M-44 REV] (Rate)

Comments: Of the 1,608 policyholders, how many are pre-stability policies and how many are post-stability policies. In addition, please identify how many of those policies have a lifetime benefit period and how many have a non-lifetime benefit period for each block.

Objection 2

- Rate Schedules, [LT50-Series 19241, LT50-Series 19409, ODX5M, NH50-Series 19242, NH50-Series 19410, ODX6M, HCA-Series 19629, HCA-Series20249, 0GH1M-44, NHA-Series 19630, NHA-Series 20250, 0GH3M-44, 0GH4M-44, 0GH5M-44, 0GH6M-REV, 0GH7M-44, 0GH8M-44, LTA-Series 19631, LTA-Series 20251, 0GH7M-44 REV, 0GH8M-44 REV, 0GH9M-44 REV] (Rate)

Comments: Our review has uncovered ongoing inconsistencies between the policy form numbers as approved by the state and the affected form numbers listed in the Rate/Rule Schedule in SERFF as follows:

1)Our records indicate HCA-Series 20249 was withdrawn 10/1/2001; however, rate increases have been approved for this policy in the past. Please provide evidence this policy was approved. Please verify the form number as well. Our records have this form listed with two hyphens (HCA- - Series 20249) which could be a typographical error on our part.

2)Rate revisions for the riders were approved in the past using the SERFF form numbers rather than the exact form number as approved by the BOI. Going forward, however, we need to determine the correct policy form numbers. Please provide evidence the SERFF form numbers were approved or revise the Rate/Rule Schedule to match the form numbers as approved. Inconsistencies in the rider numbers are listed below:

SERFF:

0GH3M-44
0GH4M-44
0GH6M-REV
0GH9M-44 REV

BOI records (approved 2/26/1999):

0GH3M

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0GH4M
 0GH6M-44 REV
 0GH9M

3)The Rate/Rule Schedule lists two LT50-Series policies: 19241 and 19409. The attached rate schedule does not specify the form numbers. Please add the form numbers to the rate schedules so that it is clear those rates apply to both form numbers. This would also apply to the NH50-Series 19242 and 19410.

4)The Affected Form Numbers in SERFF list both 0GH7M-44 and 0GH7M-44 REV as well as 0GM8M-44 and 0GHM-44 REV. Based on our telephone conversation of 8/31/16, the rates for such riders are the same and the form number appears without the "-44" or "Rev" ending in the rate schedules. Are there not any differences in the riders; otherwise, why have two riders with the same benefits and rates? As stated in item 2 above, we need to determine the correct form numbers for the riders to resolve this issue so that the rate attachments and affected form numbers will agree with our records.

5)When the form numbers in this filing are compared to the Long Term Care Annual Reports, it doesnt appear all the form numbers are included. For example, LT50-Series 19241 was included in the annual report but not LT50-Series 19409. Please explain.

Objection 3

- Rate Schedules, [LT50-Series 19241, LT50-Series 19409, ODX5M, NH50-Series 19242, NH50-Series 19410, ODX6M, HCA-Series 19629, HCA-Series20249, 0GH1M-44, NHA-Series 19630, NHA-Series 20250, 0GH3M-44, 0GH4M-44, 0GH5M-44, 0GH6M-REV, 0GH7M-44, 0GH8M-44, LTA-Series 19631, LTA-Series 20251, 0GH7M-44 REV, 0GH8M-44 REV, 0GH9M-44 REV] (Rate)

Comments: Please amend the Overall % Indicated Change on the "Rate/Rule Schedule" to reflect 61.9% which is the rate increase that would be needed to bring the future loss ratio in line with expectations according to Section 11 of the Actuarial Memorandum. The Overall % Rate Impact percentage would remain at 27.6% which reflects the overall proposed rate increase.

Objection 4

- Sample Policyholder Notification Letter (Supporting Document)

Comments: The following concerns need to be addressed in regards to the policyholder letter:

1. Because the letter must be "filed" in accordance with 14VAC5-200-75 D, please attach the letter to the Form Schedule in SERFF in compliance with the requirements of Chapter 100 of Title 14 of the Virginia Administrative Code including a Certification of Compliance. The letter will require a form number in the lower left hand corner. Please ensure the full and proper corporate name of the insurer prominently appears in the letter.

2. If the company intends to use this letter with future long term care rate filings, the company should bracket variable information such as the percentage of the rate increase and provide a Statement of Variability.

3. Please amend the letter to include the following information for compliance with the regulation:

a) For compliance with 14VAC5-200-75 D 1, please include the following statements:

1. a statement indicating the policy may be subject to future rate increases
2. a statement indicating that should there be future increases, options similar to those being offered now will be available in the future and benefits may be changed at any time (not just at the time of a rate increase)
3. a statement indicating the premium and schedule that will be in effect
4. a statement indicating the effective date of the increase
5. a statement the insured has a right to a revised premium or rate schedule upon request

State: Virginia **Filing Company:** Mutual of Omaha Insurance Company
TOI/Sub-TOI: LTC03I Individual Long Term Care/LTC03I.003 Other
Product Name: Mutual of Omaha - 2016/2017 LTCi Rate Increase
Project Name/Number: 2016/2017 LTCi/

b) For compliance with 14VAC5-200-75 D 2:

1. Provide a clear explanation of the options available as alternatives to paying the increased premium amount consistent with 14VAC5-200-183. The current letter references a Policy Adjustment Offer. The available options must be contained in the letter itself for compliance purposes. The company may include a form as an enclosure to be signed by the insured and returned; however, it should be separate and apart from the letter. If the form will not be attached and become a part of the policy, the form may be attached to Supporting Documentation for review. The letter should clearly offer the Contingent Benefit Upon Lapse (CBUL) for anyone who is eligible and does not have a non-forfeiture benefit. In line with these benefits, please confirm such benefits will be administered according to the revised regulations that were effective September 1, 2015. Also, advise if the company will provide the CBUL regardless if the triggers or met or not.

2. Include a disclosure stating that all options available to the policyholder may not be of equal value. As a disclosure this information should be emphasized by **bolding**, **highlighting**, using larger text or some other method that will bring attention to it;

3. In the case of a partnership policy, a disclosure that some benefit reduction options may result in a loss in partnership status that may reduce policyholder protections. As stated above, as a disclosure, the information should be emphasized to bring attention to it.

4. Include contact information that will allow the policyholder to contact the insurer for additional options. In regards to this, will the proposed policyholder letter include the potential removal of riders as an option to reduce the impact of the rate increase? In regards to an inflation rider, will the policyholder only be able to reduce the inflation protection to a lower percentage based on those percentages currently offered or has the company determined actuarially a percentage reduction that would allow the rate increase to be zeroed out if accepted which would result in no rate increase, commonly referred to as a landing spot?

c) For compliance with 14VAC5-200-75 D 3, please provide clear identification of the driving factors of the rate increase. The current letter states the rate increase is due to ever increasing cost of services and that premiums received from this long-term care policy form no longer support expected claims. The letter should be more specific as to why premiums aren't sufficient. What assumptions have changed and why that require the rate increase. A sample of such wording is below:

"Rates are being raised on all policies like yours to pay for anticipated claims that are higher than expected. This is due in part to individuals living longer and keeping their policies longer, which has resulted in more claims being filed than we anticipated when this policy was originally priced. As a result, premiums need to be adjusted to ensure there is adequate funding to pay current and anticipated future claims. This premium increase is designed to offset some of these anticipated costs and in no way reflects on the integrity of your policy, nor is it based on your individual claims history, age, health status, or any other personal factor."

4. For compliance with 14VAC5-200-75 D 34, a statement substantially similar to the following must be included:

"The rate increase request was reviewed by Virginias State Corporation Commission and was found to be compliant with applicable Virginia laws and regulations addressing long-term care insurance. All premium rate filings are available for public inspection and may be accessed online through the Virginia Bureau of Insurance's webpage at www.scc.virginia.gov/BOI."

Objection 5

- Sample Policyholder Notification Letter (Supporting Document)

Comments: Please explain how a policy is updated to reflect any benefit changes the insured may choose to reduce the effects of the rate increase. If the policy is revised or changed in any way, the policyowner must first agree to the changes and the policy

State:	Virginia	Filing Company:	Mutual of Omaha Insurance Company
TOI/Sub-TOI:	LTC03I Individual Long Term Care/LTC03I.003 Other		
Product Name:	Mutual of Omaha - 2016/2017 LTCi Rate Increase		
Project Name/Number:	2016/2017 LTCi/		

must be amended or endorsed by an approved form such as a rider, endorsement, application or schedule of benefits that has been reviewed and approved by the Virginia Bureau of Insurance. The document must be dated or have an indication of the effective date of change in the policy benefits, state that a change is being made to the policy and this new document will be made a part of the contract. If the company has such forms available for this purpose, please provide a copy of the form, the SERFF tracking number and date of approval. If the company does not have any available documents to effectuate such changes, a form will need to be submitted for review and approval. It can be attached to this filing if desired. Please keep in mind, there should be several options provided in the policyholder letter to reduce the effect of the rate increase. Please be sure all options are covered in the new form or forms including the contingent benefit upon lapse and/or optional nonforfeiture benefit. If the company chooses to include variability in the form, please provide a statement of variability. A Certification of Compliance would be required in accordance with 14VAC5-100-40 3 as well as a readability certification in accordance with 14VAC5-110-60.

Objection 6

- Long Term Care Insurance Rate Request Summary (Supporting Document)

Comments: The Rate Request Summary has been slightly revised and an updated form has been attached to our letter. Because this rate increase will affect the riders as well, please add those form numbers to the Rate Request Summary.

Objection 7

- L&H Actuarial Memorandum (Supporting Document)

Comments: Please provide the following information on the pre-stability block:

1) Based on the revised 14VAC5-200-150 B, benefits will be deemed reasonable for pre-stability policies only provided the expected loss ratio is greater of 60% or the lifetime loss ratio used in the original pricing applied to the current rate schedule plus 80% applied to any premium rate increase for individual policy forms. Please demonstrate compliance with this regulation.

2) Please provide an Actuarial Certification in compliance with 14VAC5-130-70 B 14.

3) Please identify the amount of Active Life reserves related to these policies and include the Active Life reserves in the determination of the Future Loss ratio.

4) Please provide the anticipated loss ratio where the numerator is equal to the anticipated incurred claims less policy reserves, and the denominator is equal to the anticipated earned premium.

Objection 8

- L&H Actuarial Memorandum (Supporting Document)

Comments: Please provide the following information on the post-stability block:

1) Please provide a description of the margin for moderately adverse experience that is included in the premium rates, a description of the testing of pricing assumptions that was done to support the conclusion that the filed premium rates are sustainable over the life of the form, and how it differs from how it was originally defined.

2) How does the company plan to comply with 14VAC5-200-153.G.1.

Objection 9

- L&H Actuarial Memorandum (Supporting Document)

Comments: Please provide the following information on both blocks of business:

1) Provide a separate calculation of the Lifetime Loss Ratio so that the historical premium component is restated to what it would be if

State:	Virginia	Filing Company:	Mutual of Omaha Insurance Company
TOI/Sub-TOI:	LTC03I Individual Long Term Care/LTC03I.003 Other		
Product Name:	Mutual of Omaha - 2016/2017 LTCi Rate Increase		
Project Name/Number:	2016/2017 LTCi/		

the proposed premium had been charged (collected) since the forms introduction.

2) Please provide sufficient detail or documentation provided so that any projections can be recreated. Please provide excel spreadsheets, if possible.

3) Advise in what states the company has requested rate increases on this block, how the rate changes requested in Virginia compare with those requested in other states, and the current status of the reviews in other states.

4) Please provide a loss ratio projection reflecting the actual historical experience during the historical experience period and then, utilizing the actual inforce as of the projection date, projecting forward the expected earned premiums and incurred claims using the original pricing assumptions for interest, mortality, morbidity and persistency into the future and assuming the future premiums are paid based on the original premium scale with no increases.

5) Please provide a loss ratio projection (both past and future) which reflects all of the original pricing assumptions for interest, mortality, morbidity, persistency and premium scale, but uses the actual distribution of policies as issued rather than the originally assumed mix of business.

6) Please provide the original targeted pricing loss ratio when the policy(ies) was originally approved; and if applicable, when the current projected loss ratio is less than originally anticipated.

7) Please provide actual-to-expected analysis for each of the current assumptions (morbidity, mortality, and lapse). Please ensure there is sufficient justification for the assumptions used in the projections.

8) Please provide the justification for the reserve levels provided.

9) Please provide a brief description of the policy forms and riders.

10) Please include the rider form numbers in the memorandum since the forms are affected by this rate increase.

11) Please provide the original target loss ratio for each of the policy forms included in this filing.

Conclusion:

We shall be glad to reconsider this submission upon receipt of the information noted above. Should you need clarification of any of the information contained in this letter, please contact the undersigned.

Thank you for your courtesy and consideration in this matter.

*Sincerely,
Janet Houser*

Long Term Care Insurance Rate Request Summary
Part 1 – To Be Completed By Company

Reset Form

Company Name and NAIC Number:

SERFF Tracking Number:

Effective Date:

Revised Rates

Average Annual Premium Per Member:

Average Requested Percentage Rate Change Per Member:

Minimum Requested Percentage Rate Change Per Member:

Maximum Requested Percentage Rate Change Per Member:

Number of Policy Holders Affected :

Plans Affected

(The Form Number and "Product Name")

Form#

"Product Name"(if applicable)

Attach a brief narrative to summarize the key information used to develop the rates including the main drivers for new or revised rates.

This document is intended to help explain the rate filing and it is only a summary of the company's request. It is not intended to describe or include all factors or information considered in the review process. For more detailed information, please refer to the complete filing.

State:	Virginia	Filing Company:	Mutual of Omaha Insurance Company
TOI/Sub-TOI:	LTC03I Individual Long Term Care/LTC03I.003 Other		
Product Name:	Mutual of Omaha - 2016/2017 LTCi Rate Increase		
Project Name/Number:	2016/2017 LTCi/		

Response Letter

Response Letter Status	Submitted to State
Response Letter Date	09/20/2017
Submitted Date	09/20/2017

Dear Janet Houser,

Introduction:

This is in response to your objection letter dated September 20, 2017, regarding the above captioned filing.

Response 1

Comments:

Item 1

The loss ratios, both with and without the requested rate increase, and statutory active life reserves are included in Attachment 3 Current Assumptions (Pre) and Attachment 6 Current Assumptions (Post). These exhibits are located in the sections labeled 09/08/2017 Response Objection 3 (both pdf files and excel spreadsheets) under the Supporting Documentation tab.

Item 2

The Statement of Variability for the OPE4M was included in our August 4, 2017, response. Please refer to OPE4M Policy Adjustment Rider SOV (Annotated) Version 1 and OPE4M Policy Adjustment Rider SOV (Non-Annotated) Version 1 located in the section labeled 08/04/2017 Response Objection 1 under the Supporting Documentation tab.

Changed Items:

State:	Virginia	Filing Company:	Mutual of Omaha Insurance Company
TOI/Sub-TOI:	LTC03I Individual Long Term Care/LTC03I.003 Other		
Product Name:	Mutual of Omaha - 2016/2017 LTCi Rate Increase		
Project Name/Number:	2016/2017 LTCi/		

Supporting Document Schedule Item Changes	
Satisfied - Item:	Sample Policyholder Notification Letter
Comments:	The sample notifications letters have been moved to the Form Schedule tab. Please refer to 08/04/2017 Response - Objection 3.
Attachment(s):	
<i>Previous Version</i>	
Satisfied - Item:	<i>Sample Policyholder Notification Letter</i>
Comments:	<i>Attached is a copy of the Policyholder Notification Letter that was approved by your Department on 02/04/2013.</i>
Attachment(s):	<i>LTC VA LIFETIME LETTER SAMPLE.pdf</i>
<i>Previous Version</i>	
Satisfied - Item:	<i>Sample Policyholder Notification Letter</i>
Comments:	<i>Attached is a copy of the Policyholder Notification Letter that was approved by your Department on 02/04/2013.</i>
Attachment(s):	

Supporting Document Schedule Item Changes	
Satisfied - Item:	Sample Policyholder Notification Letter
Comments:	The sample notifications letters have been moved to the Form Schedule tab. Please refer to 08/04/2017 Response - Objection 3.
Attachment(s):	
<i>Previous Version</i>	
Satisfied - Item:	<i>Sample Policyholder Notification Letter</i>
Comments:	<i>Attached is a copy of the Policyholder Notification Letter that was approved by your Department on 02/04/2013.</i>
Attachment(s):	<i>LTC VA LIFETIME LETTER SAMPLE.pdf</i>
<i>Previous Version</i>	
Satisfied - Item:	<i>Sample Policyholder Notification Letter</i>
Comments:	<i>Attached is a copy of the Policyholder Notification Letter that was approved by your Department on 02/04/2013.</i>
Attachment(s):	

Satisfied - Item:	09/08/2017 Response - Objection 2
Comments:	The revised notification letters have replaced the previous versions in the Form Schedule tab.
Attachment(s):	

State:	Virginia	Filing Company:	Mutual of Omaha Insurance Company
TOI/Sub-TOI:	LTC03I Individual Long Term Care/LTC03I.003 Other		
Product Name:	Mutual of Omaha - 2016/2017 LTCi Rate Increase		
Project Name/Number:	2016/2017 LTCi/		

No Form Schedule items changed.

No Rate/Rule Schedule items changed.

Conclusion:

We hope that this additional information will allow you to continue your review of our submission and we look forward to a favorable response.

Sincerely,

Jeff LaFond

Sincerely,

Jeff LaFond

SERFF Tracking #:	MUTA-130706482	State Tracking #:	MUTA-130706482	Company Tracking #:	LAFOND
<hr/>					
State:	Virginia	Filing Company:	Mutual of Omaha Insurance Company		
TOI/Sub-TOI:	LTC03I Individual Long Term Care/LTC03I.003 Other				
Product Name:	Mutual of Omaha - 2016/2017 LTCi Rate Increase				
Project Name/Number:	2016/2017 LTCi/				

Response Letter

Response Letter Status	Submitted to State
Response Letter Date	09/08/2017
Submitted Date	09/08/2017

Dear Janet Houser,

Introduction:

This is in response to your objection letter dated August 29, 2017, regarding the above captioned filing.

Response 1

Comments:

We are confirming that Form M1769 (LTC-VA) is not attached to the policy.

Letters M1770 and M1771 have been revised to include the following:

"Enclosed is Rider OPE4M which reflects the benefit changes you requested below. Rider OPE4M should be attached to your policy."

Also, the [Benefit Change] section of the Statement of Variability for these forms has been revised as shown below:

- Benefit Period has been changed from XXXX to XXXX (minimum Benefit Period of 1 year)*
- Elimination Period has been changed from XXXX to XXXX (maximum Elimination Period of 365 days)*
- Daily Benefit has been changed from \$XXX to \$XX (minimum Daily Benefit of \$40)*
- Contingent Benefit Upon Lapse option has been exercised in the amount of \$XXXXXX*
- Non-Forfeiture Benefit has been exercised in the amount of \$XXXXXX*
- The following rider has been removed and is no longer in force (specific name of rider)*

The only inflation option available is the 5% compound inflation benefit. The insured does not have the option to reduce the inflation amount.

Regarding the policy adjustment rider (Rider OPE4M), you are correct in assuming that the benefit changes would not take effect to anyone on claim at the time of the increased premium. The stipulation any periods which limit the exercise of any of our defenses refers to the Time Limits on Certain Defenses section of the policy contract.

Related Objection 1

Applies To:

- Policy Adjustment Rider, OPE4M (Form)*
- 08/04/2017 Response - Objection 1 (Supporting Document)*

SERFF Tracking #:	MUTA-130706482	State Tracking #:	MUTA-130706482	Company Tracking #:	LAFOND
State:	Virginia	Filing Company:	Mutual of Omaha Insurance Company		
TOI/Sub-TOI:	LTC03I Individual Long Term Care/LTC03I.003 Other				
Product Name:	Mutual of Omaha - 2016/2017 LTCi Rate Increase				
Project Name/Number:	2016/2017 LTCi/				

Comments: Please confirm Form M1769 (LTC-VA) is not attached to the policy. If it is attached to the policy, it would need to be treated as a form and reviewed accordingly.

The two letters M1770 and M1771 should indicate form OPE4M has been included and that it should be attached to the policy which is used to endorse the policy, correct? The Statement of Variability explains as to what benefit changes this form will be used but it should also indicate the specific language that will appear. For example, [Benefit Change] section in the form will read as follows based on the insured's selection:

- Elimination Period has been changed from XXXXX to XXXXX
- Daily Benefit has been decreased from \$XXXXX to \$XXXXX
- Contingent Benefit Upon Lapse Option has been exercised in the amount of \$XXXXX
- Non-Forfeiture Benefit has been exercised in the amount of \$XXXXX
- The following rider has been removed and is no longer in form - [Specific Name of Rider]

If the insured has the option to reduce rather than drop the inflation rider, this should be included in the above by stating the Inflation Rider has been reduced from XXX% to XXX%.

We are assuming the stipulation noted in item (a) means the increase would not take effect on anyone on claim at the time of the increased premium. If this not the case, please advise.

Please explain the purpose of stipulation noted in item "(b) any periods which limit the exercise of any of our defenses."

In regards to the Statement of Variability for M1770 (LTC-VA), please expand the explanation for the revised benefit period to indicate the minimum benefit period that may be selected.

Changed Items:

Supporting Document Schedule Item Changes	
Satisfied - Item:	09/08/2017 Response - Objection 1
Comments:	
Attachment(s):	M1770 (LTC - VA).pdf M1771 (LTC - VA).pdf Statement of Variability - M1769 (LTC - VA), M1770 (LTC - VA) and M1771 (LTC - VA).pdf

State:	Virginia	Filing Company:	Mutual of Omaha Insurance Company
TOI/Sub-TOI:	LTC03I Individual Long Term Care/LTC03I.003 Other		
Product Name:	Mutual of Omaha - 2016/2017 LTCi Rate Increase		
Project Name/Number:	2016/2017 LTCi/		

No Form Schedule items changed.

No Rate/Rule Schedule items changed.

Response 2

Comments:

The color highlights have been removed from Forms 0555A-VA-1 and 0555A-VA-2 and the final versions have been placed in the Form Schedule tab in SERFF.

In addition, the following sentence has been added to both forms in the last paragraph of the Contingent Benefit Upon Lapse section:

Please note that if the increased premium is not paid within 120 days of the effective date of the increase and the policy lapses, the contingent benefit upon lapse will be implemented automatically.

Related Objection 2

Applies To:

- Premium Notification Letter (1st increase), 0555A-VA-1 (Form)
- Premium Notification Letter (2nd increase), 0555A-VA-2 (Form)

Comments: Please remove the color highlights and attach final versions of each form to the Form Schedule.

Please clarify in the last paragraph of the Contingent Benefit Upon Lapse section that this benefit will be implemented automatically if the rate increase is not paid and the policy lapses. In other words, the insured does not have to "exercise" this option for it to become effective.

Changed Items:

No Supporting Documents changed.

State:	Virginia	Filing Company:	Mutual of Omaha Insurance Company
TOI/Sub-TOI:	LTC03I Individual Long Term Care/LTC03I.003 Other		
Product Name:	Mutual of Omaha - 2016/2017 LTCi Rate Increase		
Project Name/Number:	2016/2017 LTCi/		

Form Schedule Item Changes								
Item No.	Form Name	Form Number	Form Type	Form Action	Action Specific Data	Readability Score	Attachments	Submitted
1	Premium Notification Letter (1st increase)	0555A-VA-1	OTH	Initial			Form 0555A-VA-1.pdf	Date Submitted: 09/08/2017 By: Jeff LaFond
<i>Previous Version</i>								
1	Premium Notification Letter (1st increase)	0555A-VA-1	OTH	Initial			Form 0555A-VA-1.pdf	Date Submitted: 08/04/2017 By: Jeff LaFond
2	Premium Notification Letter (2nd increase)	0555A-VA-2	OTH	Initial			Form 0555A-VA-2.pdf	Date Submitted: 09/08/2017 By: Jeff LaFond
<i>Previous Version</i>								
2	Premium Notification Letter (2nd increase)	0555A-VA-2	OTH	Initial			Form 0555A-VA-2.pdf	Date Submitted: 08/04/2017 By: Jeff LaFond

No Rate/Rule Schedule items changed.

Response 3

Comments:

SERFF Tracking #:	MUTA-130706482	State Tracking #:	MUTA-130706482	Company Tracking #:	LAFOND
State:	Virginia	Filing Company:	Mutual of Omaha Insurance Company		
TOI/Sub-TOI:	LTC03I Individual Long Term Care/LTC03I.003 Other				
Product Name:	Mutual of Omaha - 2016/2017 LTCi Rate Increase				
Project Name/Number:	2016/2017 LTCi/				

The statutory maximum valuation interest rate of 4.5% was used for all Loss Ratio calculations. Please note that this is the same interest rate used in the initial pricing in these products.

When developing the requested average expected loss ratio for each block of business, a few errors were found which impact Attachment 1 Table 1 that was provided on August 8, 2017. Corrections were made to the NPV calculations and the non-lifetime and lifetime original projected premiums were interchanged. Enclosed for your review is Attachment 1 Table 1 (corrected) that incorporates the corrections mentioned above. I apologize for this oversight.

As requested, the following exhibits have been prepared and are enclosed for your review:

- Attachment 1 Original Loss Ratios (Pre)
- Attachment 2 Previous Assumptions (Pre)
- Attachment 3 Current Assumptions (Pre)
- Attachment 4 Original Loss Ratios (Post)
- Attachment 5 Previous Assumptions (Post)
- Attachment 6 Current Assumptions (Post)

Please note that the post-stabilization exhibits include the MAE. Also, Attachments 3 and 6 include the four additional columns that were requested, which include:

- 1.The rate increase percentage;
- 2.The additional premium from the rate increase;
- 3.The total premium; and
- 4.The Active Life Reserves.

Regarding 14 VAC 5-200-153.B.3(b), we do not model any reserve changes in our projected incurred claims. We only incorporate current claim reserves for policies on claim and IBNP reserves, and we do not model Contingent Benefit Upon Lapse elections.

Also included for your review are exhibits that use the 60%/80% Loss Ratio test for the pre-rate stabilization block of business and the 58%/85% Loss Ratio test for the post-rate stabilization block of business. As you can see, the filed expected loss ratios have been used as they exceed 60% for the pre-rate stabilization block and 58% for the post-stabilization block (MAE is included in the originally filed loss ratio for the post-rate stabilization block). Please refer to the following exhibits:

- Attachment 7 Dual Loss Ratio Test (Pre)
- Attachment 8 Dual Loss Ratio Test (Post)

All exhibits have been provided in Excel spreadsheets with active calculations. PDF files have been included for documentation purposes as Excel files are not saved when the PDF Pipeline function is used in SERFF.

State:	Virginia	Filing Company:	Mutual of Omaha Insurance Company
TOI/Sub-TOI:	LTC03I Individual Long Term Care/LTC03I.003 Other		
Product Name:	Mutual of Omaha - 2016/2017 LTCi Rate Increase		
Project Name/Number:	2016/2017 LTCi/		

Related Objection 3

Applies To:

- L&H Actuarial Memorandum (Supporting Document)

Comments: For calculating the Loss Ratio, policies need to be separated into blocks: Pre-Rate Stability (Pre-RS) and Post-Rate Stability (Post-RS). For the Post-RS block, please use the statutory maximum valuation interest rate for the any Loss Ratio calculations.

Please calculate the average expected Loss Ratio for each block (for the Post-RS block, please include the MAE). Please use historical data and projected values for what is expected using the old assumptions. Please use historical data and projected values for what is now expected using the new assumptions. For the last Loss Ratio calculation, please add four columns: 1) the rate increase percentage, 2) the additional premium from the rate increase, 3) the total premium, and 4) the Active Life Reserves (the ALR will not be a component of the Loss Ratio). For the Post-RS block, if the rate increase will trigger the contingent benefit upon lapse, in accordance with 14VAC5-200-153.B.b, please disclose how reserves have been incorporated in this rate increase.

To validate the rate increase, please use the 60%/80% Loss Ratio test for the Pre-RS block and the 58%/85% Loss Ratio Test for the Post RS block.

In the 60%/80% test, rather than 60% please use the greater of 60% or the Expected Loss Ratio. For the 80%, please use the greater of 80% or the Expected Loss Ratio. In the 58%/85% test, rather than 58% please use the greater of 58% or the Expected Loss Ratio (with the MAE). For the 85%, please use the greater of 85% or the Expected Loss Ratio (with the MAE). To use a Loss Ratio percentage that is lower the pricing Loss Ratio implies that the Company intends to lower the Loss Ratio for all past and future initial premiums.

Please include all Loss Ratio calculations in an Excel workbook, illustrating all formulas. There is no need to include a pdf file of each Loss Ratio.

Changed Items:

State:	Virginia	Filing Company:	Mutual of Omaha Insurance Company
TOI/Sub-TOI:	LTC03I Individual Long Term Care/LTC03I.003 Other		
Product Name:	Mutual of Omaha - 2016/2017 LTCi Rate Increase		
Project Name/Number:	2016/2017 LTCi/		

Supporting Document Schedule Item Changes	
Satisfied - Item:	09/08/2017 Response - Objection 3
Comments:	
Attachment(s):	Attachment 1 - Table 1 (corrected).pdf Attachment 1 - Original Loss Ratios (Pre).pdf Attachment 2 - Previous Assumptions (Pre).pdf Attachment 3 - Current Assumptions (Pre).pdf Attachment 4 - Original Loss Ratios (Post).pdf Attachment 5 - Previous Assumptions (Post).pdf Attachment 6 - Current Assumptions (Post).pdf Attachment 7 - Dual Loss Ratio Test (Pre).pdf Attachment 8 - Dual Loss Ratio Test (Post).pdf

Supporting Document Schedule Item Changes	
Satisfied - Item:	09/08/2017 Response - Objection 3
Comments:	
Attachment(s):	Attachment 1 - Table 1 (corrected).pdf Attachment 1 - Original Loss Ratios (Pre).pdf Attachment 2 - Previous Assumptions (Pre).pdf Attachment 3 - Current Assumptions (Pre).pdf Attachment 4 - Original Loss Ratios (Post).pdf Attachment 5 - Previous Assumptions (Post).pdf Attachment 6 - Current Assumptions (Post).pdf Attachment 7 - Dual Loss Ratio Test (Pre).pdf Attachment 8 - Dual Loss Ratio Test (Post).pdf

Satisfied - Item:	09/08/2017 Response - Objection 3 (Excel spreadsheets)
Comments:	
Attachment(s):	Attachment 1 - Table 1 (corrected) - Excel.xlsx Attachment 1 - Original Loss Ratios (Pre) - Excel.xlsx Attachment 2 - Previous Assumptions (Pre) - Excel.xlsx Attachment 3 - Current Assumptions (Pre) - Excel.xlsx Attachment 4 - Original Loss Ratios (Post) - Excel.xlsx Attachment 5 - Previous Assumptions (Post) - Excel.xlsx Attachment 6 - Current Assumptions (Post) - Excel.xlsx Attachment 7 - Dual Loss Ratio Test (Pre) - Excel.xlsx Attachment 8 - Dual Loss Ratio Test (Post) - Excel.xlsx

No Form Schedule items changed.

No Rate/Rule Schedule items changed.

State:	Virginia	Filing Company:	Mutual of Omaha Insurance Company
TOI/Sub-TOI:	LTC03I Individual Long Term Care/LTC03I.003 Other		
Product Name:	Mutual of Omaha - 2016/2017 LTCi Rate Increase		
Project Name/Number:	2016/2017 LTCi/		

Conclusion:

We hope that this additional information will allow you to continue your review of our submission and we look forward to a favorable response.

Sincerely,

Jeff LaFond

Sincerely,

Jeff LaFond

SERFF Tracking #:	MUTA-130706482	State Tracking #:	MUTA-130706482	Company Tracking #:	LAFOND
State:	Virginia	Filing Company:	Mutual of Omaha Insurance Company		
TOI/Sub-TOI:	LTC03I Individual Long Term Care/LTC03I.003 Other				
Product Name:	Mutual of Omaha - 2016/2017 LTCi Rate Increase				
Project Name/Number:	2016/2017 LTCi/				

Response Letter

Response Letter Status	Submitted to State
Response Letter Date	08/04/2017
Submitted Date	08/04/2017

Dear Janet Houser,

Introduction:

This is in response to your objection letter dated June 29, 2017, regarding the above captioned filing. I apologize for the delay in responding to your letter.

Response 1

Comments:

As mentioned in previous correspondence, we are no longer using Form LTC-EP-VA, which is the policy adjustment offer for increasing the elimination period. As requested, we added brackets to Form LTC-BP-VA and updated the Statement of Variability for this form. This was completed in SERFF Tracking Number MUTA-127148717. This filing was reopened so these changes could be made. The proper name of the company is prominently displayed on this form. Also, this form will be printed using a 12-point font.

Form LTC-EP-VA, the policy adjustment offer for the benefit period reduction, is included with the premium notification letter. When a policyholder requests any other changes to their benefits, we will send them Form M1769 (LTC-VA). After they return the signed form, we will send a confirmation letter in addition to the policy adjustment rider (0PE4M). The last paragraph in this rider is variable and details which benefit has been changed. This rider is enclosed for review and approval under the Form Schedule tab. A Statement of Variability, Readability Certificate and Certificate of Compliance are also enclosed. Copies of sample letters are also attached for your review. Form M1770 (LTC VA) will be sent to policyholders reducing their benefit period and Form M1771 (LTC VA) will be sent for all other benefit changes. A Statement of Variability has been included for Forms M1769 (LTC VA), M1770 (LTC VA) and M1771 (LTC VA).

Related Objection 1

Applies To:

- 04/27/2017 Response - Objection 4 (Supporting Document)

Comments: According to your reply, forms LTC-BP-VA and LTC-EP-VA are used to update the policies at the insured's request which is not an issue. In reviewing Form LTC-EP-VA, the top section and bottom section both state to "keep this with your policy." The lower section should be corrected to state "return this portion to us". Please attach a revised form with a new form number to the Form Schedule for review and approval including a statement of variability.

In addition, the full and proper name of the company should be prominently displayed on the form pursuant to 14VAC5-100-50 2. Please confirm the form will be printed using at least 10 point for compliance with 14VAC5-100-50-50 5.

How is the policy updated for any other changes such as decreasing the daily benefit amount, removing riders or electing the contingent benefit upon lapse benefit or a contractual non-forfeiture benefit?

State:	Virginia	Filing Company:	Mutual of Omaha Insurance Company
TOI/Sub-TOI:	LTC03I Individual Long Term Care/LTC03I.003 Other		
Product Name:	Mutual of Omaha - 2016/2017 LTCi Rate Increase		
Project Name/Number:	2016/2017 LTCi/		

Changed Items:

Supporting Document Schedule Item Changes	
Satisfied - Item:	08/04/2017 Response - Objection 1
Comments:	
Attachment(s):	OPE4M Policy Adjustment Rider SOV (Annotated) Version 1.pdf OPE4M Policy Adjustment Rider SOV (Non-Annotated) Version 1.pdf VA Readability Compliance Certification (Rider OPE4M).pdf VA Certificate of Compliance (Rider OPE4M).pdf M1769 (LTC - VA).pdf M1770 (LTC - VA).pdf M1771 (LTC - VA).pdf Statement of Variability - M1769 (LTC - VA), M1770 (LTC - VA) and M1771 (LTC - VA).pdf

Form Schedule Item Changes								
Item No.	Form Name	Form Number	Form Type	Form Action	Action Specific Data	Readability Score	Attachments	Submitted
1	Policy Adjustment Rider	OPE4M	CERA	Initial		57.600	OPE4M Policy Adjustment Rider (Non-Annotated) Version 1.pdf	Date Submitted: 08/04/2017 By: Jeff LaFond
2	Premium Notification Letter (1st increase)	0555A-VA-1	OTH	Initial			Form 0555A-VA-1.pdf	Date Submitted: 08/04/2017 By: Jeff LaFond
3	Premium Notification Letter (2nd increase)	0555A-VA-2	OTH	Initial			Form 0555A-VA-2.pdf	Date Submitted: 08/04/2017 By: Jeff LaFond

No Rate/Rule Schedule items changed.

Response 2

Comments:

Enclosed for your review is a copy of Form 0HA3M. This form is being administered in accordance with the revised regulation 14 VAC 5-200-185 D (the revised rate increase triggers). Please note that we are offering the contingent benefit upon lapse to all policyholders, regardless if their increase amount triggers this benefit. In addition, we are providing the required 75-day notification of the premium increase.

As mentioned in Objection 1, the policy is amended using Rider OPE4M (policy adjustment rider) when changes are made to any of the policy benefits.

State:	Virginia	Filing Company:	Mutual of Omaha Insurance Company
TOI/Sub-TOI:	LTC03I Individual Long Term Care/LTC03I.003 Other		
Product Name:	Mutual of Omaha - 2016/2017 LTCi Rate Increase		
Project Name/Number:	2016/2017 LTCi/		

Related Objection 2

Applies To:

- 04/27/2017 Response - Objection 4 (Supporting Document)

Comments: Please provide a copy of Form HA3M-44 approved under state tracking number 7/14899 to Supporting Documentation. Please verify if the form is being administered in accordance with the revised regulation 14VAC5-200-185 D.

It would appear the Company is attempting to use the sample letter to update the policy when exercising the contingent benefit upon lapse benefit. As previously indicated, the policy must be amended or endorsed by an approved form such as a rider, endorsement, application or schedule of benefits that has been reviewed and approved by the Virginia Bureau of Insurance. The document must be dated or have an indication of the effective date of change in the policy benefits, state a change has been made to the policy and this new document will be part of the contract. If the company does not have any such form, please attach a new form for review and approval to the Form Schedule. Please include a statement of variability, if applicable. A certification of compliance pursuant with 14VAC5-100-40 3 and a readability certification of readability pursuant with 14VAC5-110-60 would be required.

Changed Items:

Supporting Document Schedule Item Changes	
Satisfied - Item:	08/04/2017 Response - Objection 2
Comments:	
Attachment(s):	0HA3M-44.pdf

No Form Schedule items changed.

No Rate/Rule Schedule items changed.

Response 3

Comments:

SERFF Tracking #:	MUTA-130706482	State Tracking #:	MUTA-130706482	Company Tracking #:	LAFOND
<hr/>					
State:	Virginia	Filing Company:	Mutual of Omaha Insurance Company		
TOI/Sub-TOI:	LTC03I Individual Long Term Care/LTC03I.003 Other				
Product Name:	Mutual of Omaha - 2016/2017 LTCi Rate Increase				
Project Name/Number:	2016/2017 LTCi/				

As it is our intention to implement the increase over a 2-year period, we have revised the policy notification letter to be two separate letters. Form 0555A-VA-1 will be used for the first increase and Form 0555A-VA-2 will be used for the second increase. A Statement of Variability has been added to the Supporting documentation tab that applies to both of these forms.

The policyholder notification letters mentioned above have been added to the Form Schedule tab.

Policyholders currently on waiver will receive a notification letter. The following wording for those on waiver has been added to the letter in brackets and is included in the Statement of Variability:

[Since your premiums are now being waived, no payments are due. However, when you are no longer on claim and the premiums are no longer being waived, your new premium will be the amount shown above.]

We have also made the following changes to the notification letter. These changes have been highlighted to make it easier for you to review.

Following the chart on page 1, we have removed the first sentence and the paragraph has been restated to: Your premiums will again increase to [Inc Prem-2] on [Eff Date-2], which reflects an additional increase in premium of [Inc Amt-2]. Please note that these bracketed items are included in the Statement of Variability.

On Page 2, we have added the sentence The insured has the right to a revised premium rate or rate schedule upon request to comply with 14 VAC 5-200-75 A 4 b.

The reference to Contingent Non-Forfeiture Benefit has been changed to Contingent Benefit Upon Lapse. We realize that if a policyholder lapses during the specified time frame, they will receive the contingent non-forfeiture benefit and be considered paid up.

On Page 2 of the letter, the word commission has been replaced with Virginias State Corporation Commission.

Related Objection 3

Applies To:

- 04/27/2017 Response - Objection 4 (Supporting Document)

SERFF Tracking #:	MUTA-130706482	State Tracking #:	MUTA-130706482	Company Tracking #:	LAFOND
<hr/>					
State:	Virginia	Filing Company:	Mutual of Omaha Insurance Company		
TOI/Sub-TOI:	LTC03I Individual Long Term Care/LTC03I.003 Other				
Product Name:	Mutual of Omaha - 2016/2017 LTCi Rate Increase				
Project Name/Number:	2016/2017 LTCi/				

Comments: Please move Form 0555A-VA, the policyholder notification letter, from Supporting Documentation to the Form Schedule.

Since it is the Company's intent to implement the rate increase over two years, the letter should contain sufficient variability to use this letter for both periods. Please revise the letter accordingly. Please attach a Statement of Variability to Supporting Documentation.

Please advise how the company will address those individuals currently on waiver. That information may also be added to this letter with the appropriate variability.

Following the chart on page 1, the letter states your policy currently has a lifetime benefit period which then leads into the information regarding the second rate increase. The wording is somewhat confusing as this letter would only be sent to those with lifetime benefits. For clarification, we suggest the first sentence be removed and the paragraph restated to indicate premiums will again increase to \$x,xxx.xx on xx/xx/2018, reflecting an additional implementation of a 15% increase.

For compliance with 14VAC5-200-75 A 4 b, the letter must indicate the insured has a right a revised premium rate or rate schedule upon request. Stating the insured has the right to revise the benefit structure on page two does not satisfy this requirement.

Please revise the reference to "Contingent Non-Forfeiture Benefit" as the "Contingent Benefit Upon Lapse Benefit" for consistency with the regulation. The letter states the individual has 120 days form the effective date of the rate increase to exercise this option. Please be aware that pursuant to 14VAC5-200-185 D 5 c that a premium default during this time will be deemed to be the election of an offer to convert the coverage to a paid up status.

On page 2 of the letter the required language as set forth under 14VA5-200-75 D 4 is correct; however, please replace the word "commission" with "Virginia's State Corporation Commission" for clarity.

Changed Items:

Supporting Document Schedule Item Changes	
Satisfied - Item:	08/04/2017 Response - Objection 3
Comments:	The premium notification letters, Forms 0555A-VA-1 and 0555A-VA-2, are located in the Form Schedule tab.
Attachment(s):	Statement of Variability (Forms 0555A-VA-1 and 0555A-VA-2).pdf

No Form Schedule items changed.

State:	Virginia	Filing Company:	Mutual of Omaha Insurance Company
TOI/Sub-TOI:	LTC03I Individual Long Term Care/LTC03I.003 Other		
Product Name:	Mutual of Omaha - 2016/2017 LTCi Rate Increase		
Project Name/Number:	2016/2017 LTCi/		

No Rate/Rule Schedule items changed.

Response 4

Comments:

1A) Attachment 1 Table 1 has been completed and provides the following information by policy form, benefit period (lifetime and non-lifetime), and has been separated by pre-rate stabilization and post-rate stabilization business:

Number of policies;

Annualized premium in-force; and

Actual historical loss ratio (MAE has been added to the post-rate stabilization policies; MAE was not included in any of the previous experience exhibits for the post-rate stabilization business).

1B) Attachment 1 Table 1 also includes loss ratios weighted by using the lifetime expected earned premium by form. The loss ratios used for the pre-rate stabilization business are the filed loss ratios by form. The loss ratios used for the post-rate stabilization business have been revised to reflect past rate increases. Please keep in mind that the majority of the lifetime benefit period policyholders in Virginia are pre-rate stabilization business (87.9%).

Related Objection 4

Applies To:

- L&H Actuarial Memorandum (Supporting Document)

Comments: Please respond to the following:

1)A)Please present a table for the five policy forms. This table should be separated for pre-RS and post-RS, and be separated for policies with a lifetime (LT) Benefit Period (BP) and a Non-LT BP (since Mutual desires to separate the rate increase for those with and without a LT BP). For each class, please indicate the number of policies and annualized premium in-force, in addition to the loss ratio and any modification for adverse experience (MAE). For post-RS policies, please indicate the loss ratio includes the MAE. Please do not combine the classes. We will refer to this as Table 1.

B)From Table 1, please weight the loss ratios by the inception-to-date earned premium. There should be at least 4 average loss ratios (more if there are various premium-payment-periods or survivorship options). Please measure any rate increase using these average loss ratios. If any experience loss ratio is below the minimum for that class, the margin will be used to offset any rate increase.

Changed Items:

SERFF Tracking #:	MUTA-130706482	State Tracking #:	MUTA-130706482	Company Tracking #:	LAFOND
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State:	Virginia	Filing Company:	Mutual of Omaha Insurance Company
TOI/Sub-TOI:	LTC03I Individual Long Term Care/LTC03I.003 Other		
Product Name:	Mutual of Omaha - 2016/2017 LTCi Rate Increase		
Project Name/Number:	2016/2017 LTCi/		

Supporting Document Schedule Item Changes	
Satisfied - Item:	08/04/2017 Response - Objection 4
Comments:	
Attachment(s):	Attachment 1 - Table 1.pdf

No Form Schedule items changed.

No Rate/Rule Schedule items changed.

Response 5

Comments:

SERFF Tracking #:	MUTA-130706482	State Tracking #:	MUTA-130706482	Company Tracking #:	LAFOND
<hr/>					
State:	Virginia	Filing Company:	Mutual of Omaha Insurance Company		
TOI/Sub-TOI:	LTC03I Individual Long Term Care/LTC03I.003 Other				
Product Name:	Mutual of Omaha - 2016/2017 LTCi Rate Increase				
Project Name/Number:	2016/2017 LTCi/				

1) Attachment 2 Incurred Claim Comparison compares the current claim expectations to the expected claims as of the most recent rate increase, which was approved by the Virginia Bureau of Insurance on February 4, 2013 (SERFF Tracking Number MUTA-127148717).

2A) The lapse rate of 3.5% mentioned in your objection refers to the Virginia only lapse rate, calculated using the 12/31/2015 and 12/31/2016 Virginia policy counts. The lapse analysis for this business is displayed in Attachment 3 Lapse Rate. This also includes an overall lapse rate.

2B) We completed a comprehensive claim cost study in the development of our actual to expected factors. This study was based on our company experience and utilized Millimans claim costs to enhance the shape our claim cost curve where our experience was not credible. This methodology was reflected in the exhibits provided.

2C) The loss ratio exhibits have been revised to reflect a January 1, 2018, implementation date. The following exhibits have been revised and are enclosed for your review:

Exhibits 3A-C Nationwide Lifetime Experience (2016)-rev

Exhibits 4A-C Nationwide Lifetime Experience (Pre-Rate Stabilization 2016)-rev

Exhibits 5A-C Nationwide Lifetime Experience (Post-rate stabilization 2016)-rev

Exhibits 6A-C Updated Projections (Pre-Rate Stabilization 2016)-rev

Exhibits 7A-C Updated Projections (Post-rate stabilization 2016)-rev

Please note that the following changes have been made:

All Post-rate stabilization exhibits include MAE (10%)

The updated projection exhibits (6A-C and 7A-C) have been revised to include the requested rate increase

The dual loss ratio test in the updated projections uses the weighted average filed lifetime loss ratio calculated in Attachment 1 Table 1

3) Attachment 1 Table 1 displays the filed loss ratios by form and benefit period for the pre- and post-rate stabilization business.

4A) All loss ratio exhibits have been included in unprotected Excel spreadsheets.

4B) The historical incurred claims displayed in Exhibit 6 were calculated at different valuation dates, which explains the differences in the historical incurred claims. Please note that the historical incurred claims were our best estimate at each valuation date. The valuation dates included in Exhibit 6 are 03/30/2012, 12/31/2014 and 12/31/2016.

4C) Exhibits 4A-C have been revised to include the active life reserves for each year.

4D) We assume that this request refers to 14 VAC 5-200-150, requirements for premium rate increases for policies issued before October 1, 2003. This regulation applies to any rate increases filed on or after September 1, 2015. Exhibits 8A-C have been prepared to display a dual loss ratio test for the pre-rate stabilization block of business. The 58% loss ratio in these exhibits has been replaced with the revised loss ratios displayed in Attachment 1 Table 1.

State:	Virginia	Filing Company:	Mutual of Omaha Insurance Company
TOI/Sub-TOI:	LTC03I Individual Long Term Care/LTC03I.003 Other		
Product Name:	Mutual of Omaha - 2016/2017 LTCi Rate Increase		
Project Name/Number:	2016/2017 LTCi/		

Related Objection 5

Applies To:

- L&H Actuarial Memorandum (Supporting Document)

SERFF Tracking #:	MUTA-130706482	State Tracking #:	MUTA-130706482	Company Tracking #:	LAFOND
<hr/>					
State:	Virginia	Filing Company:	Mutual of Omaha Insurance Company		
TOI/Sub-TOI:	LTC03I Individual Long Term Care/LTC03I.003 Other				
Product Name:	Mutual of Omaha - 2016/2017 LTCi Rate Increase				
Project Name/Number:	2016/2017 LTCi/				

Comments: The following refers to the Actuarial Memorandum:

1)Section 3:

This section states, more than once, that current claim expectations are worse than was originally projected. Please compare the current claim expectations to the expected claims as of the most recent rate increase.

2) Section 5:

A)Lapse: The lapse rates on page 2 appear to have an average 1.5% or less (the total lapse rate is not indicated). In the answer provided to Objection 1, an average lapse rate provided is 3.5% (1- 1551/1608). Please recalculate the lapse rates for this table, using best-estimates. Also, please indicate the overall lapse rate.

B)Morbidity: This section states that Millimans claim costs were used for projecting Mutuals claim costs. Please recalculate claim costs using Mutual experience data. Where Mutual data is not credible, please use Millimans claim costs to enhance the shape of Mutuals claim cost curve.

C)Please adjust the loss ratio exhibits to reflect a rate increase that begins no sooner than 2018.

3) Section 7:

This Section states that the minimum loss ratio is 60%. For pre-RS, this is the minimum regulatory requirement. For post-RS there is no minimum Loss ratio. For each policy form, the minimum is the filed loss ratio, modified by the actual sales distribution if greater. For the post-RS block, the MAE is added to this minimum. Please re-state. If a policy form has had a rate increase, the loss ratio may have changed. You may wish to refer to Table 1.

4) Section 9:

A)This section refers to loss ratio calculations. Please file these in an unprotected Excel workbook.

B)For historical data, when separate years are filed, for example: Exhibit 6, for a given historical year, the incurred claims do not match. For historical incurred claims, please use the current best-estimate.

C)For the pre-RS blocks, when illustrating the loss ratio calculation, please provide a column with the contract reserve (that is, the active life reserve) for each year.

D)When using the 58%/85% loss ratio test, use of the 58% indicates that you wish to lower the initial loss ratio to 58%, including historic premiums. For each class, rather than 58%, please use the average loss ratio in item 1.B.

State:	Virginia	Filing Company:	Mutual of Omaha Insurance Company
TOI/Sub-TOI:	LTC03I Individual Long Term Care/LTC03I.003 Other		
Product Name:	Mutual of Omaha - 2016/2017 LTCi Rate Increase		
Project Name/Number:	2016/2017 LTCi/		

Changed Items:

Supporting Document Schedule Item Changes	
Satisfied - Item:	08/04/2017 Response - Objection 5
Comments:	
Attachment(s):	Attachment 1 - Table 1-excel.xlsx Exhibits 3A-C - Nationwide Lifetime Experience (2016)-rev-excel.xlsx Exhibits 4A-C - Nationwide Lifetime Exp (Pre-Rate Stab. - 2016)-rev-excel.xlsx Exhibits 5A-C - Nationwide Lifetime Exp (Post-Rate Stab. - 2016)-rev-excel.xlsx Exhibits 6A-C - Updated Projections (Pre-Rate Stabilization - 2016)-rev-excel.xlsx Attachment 2 - Incurred Claim Comparison.pdf Attachment 3 - Actual to Revised (Lapse Rates).pdf Exhibits 3A-C - Nationwide Lifetime Experience (2016)-rev.pdf Exhibits 4A-C - Nationwide Lifetime Exp (Pre-Rate Stabilization - 2016)-rev.pdf Exhibits 5A-C - Nationwide Lifetime Exp (Post-Rate Stabilization - 2016)-rev.pdf Exhibits 6A-C - Updated Projections (Pre-Rate Stabilization - 2016)-rev.pdf Exhibits 7A-C - Updated Projections (Post-Rate Stabilization - 2016)-rev.pdf Exhibits 8A-C - Nationwide Lifetime Exp (Pre-Rate Stabilization - 2016).pdf Exhibits 7A-C - Updated Projections (Post-Rate Stabilization - 2016)-rev-excel.xlsx Exhibits 8A-C - Nationwide Lifetime Exp (Pre-Rate Stabilization - 2016)-excel.xlsx

No Form Schedule items changed.

No Rate/Rule Schedule items changed.

Response 6

Comments:

We are confirming that if policyholders drop their inflation coverage, they have the option to continue their benefits at their current level.

Related Objection 6

Applies To:

- Sample Policyholder Notification Letter (Supporting Document)

Comments: In regards to your response to Objection 4, Item 3b:

This response states that policyholders may elect to drop their inflation protection. Please confirm that, if they do elect to drop their inflation protection, they may continue their benefits at the current level.

Changed Items:

State:	Virginia	Filing Company:	Mutual of Omaha Insurance Company
TOI/Sub-TOI:	LTC03I Individual Long Term Care/LTC03I.003 Other		
Product Name:	Mutual of Omaha - 2016/2017 LTCi Rate Increase		
Project Name/Number:	2016/2017 LTCi/		

No Supporting Documents changed.

No Form Schedule items changed.

No Rate/Rule Schedule items changed.

Conclusion:

We hope that this additional information will allow you to continue your review of our submission and we look forward to a favorable response.

Sincerely,

Jeff LaFond

Sincerely,

Jeff LaFond

SERFF Tracking #:	MUTA-130706482	State Tracking #:	MUTA-130706482	Company Tracking #:	LAFOND
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State:	Virginia	Filing Company:	Mutual of Omaha Insurance Company		
TOI/Sub-TOI:	LTC03I Individual Long Term Care/LTC03I.003 Other				
Product Name:	Mutual of Omaha - 2016/2017 LTCi Rate Increase				
Project Name/Number:	2016/2017 LTCi/				

Response Letter

Response Letter Status	Submitted to State
Response Letter Date	04/26/2017
Submitted Date	04/27/2017

Dear Janet Houser,

Introduction:

This is in response to your objection letter dated August 31, 2016, regarding the above captioned filing. I apologize for the lengthy delay in responding to your letter. Due to this delay, we have updated the Actuarial Memorandum and the exhibits that attach to the Actuarial Memorandum with data as of 12/31/2016. The revised Actuarial Memorandum and exhibits have been added to the Supporting Documentation tab.

Response 1

Comments:

Below is a summary of the 1,551 Virginia policyholders as of 12/31/2016, by benefit period for the pre-and post-rate stability blocks of business:

Non-LifetimeLifetimeTotal
Pre-Stability7046271,331
Post-Stability13486220

Total8387131,551

Related Objection 1

Applies To:

- Rate Schedules, [LT50-Series 19241, LT50-Series 19409, ODX5M, NH50-Series 19242, NH50-Series 19410, ODX6M, HCA-Series 19629, HCA-Series20249, OGH1M-44, NHA-Series 19630, NHA-Series 20250, OGH3M-44, OGH4M-44, OGH5M-44, OGH6M-REV, OGH7M-44, OGH8M-44, LTA-Series 19631, LTA-Series 20251, OGH7M-44 REV, OGH8M-44 REV, OGH9M-44 REV] (Rate)

Comments: Of the 1,608 policyholders, how many are pre-stability policies and how many are post-stability policies. In addition, please identify how many of those policies have a lifetime benefit period and how many have a non-lifetime benefit period for each block.

Changed Items:

No Supporting Documents changed.

No Form Schedule items changed.

No Rate/Rule Schedule items changed.

SERFF Tracking #:	MUTA-130706482	State Tracking #:	MUTA-130706482	Company Tracking #:	LAFOND
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State:	Virginia	Filing Company:	Mutual of Omaha Insurance Company
TOI/Sub-TOI:	LTC03I Individual Long Term Care/LTC03I.003 Other		
Product Name:	Mutual of Omaha - 2016/2017 LTCi Rate Increase		
Project Name/Number:	2016/2017 LTCi/		

Response 2

Comments:

SERFF Tracking #:	MUTA-130706482	State Tracking #:	MUTA-130706482	Company Tracking #:	LAFOND
<hr/>					
State:	Virginia	Filing Company:	Mutual of Omaha Insurance Company		
TOI/Sub-TOI:	LTC03I Individual Long Term Care/LTC03I.003 Other				
Product Name:	Mutual of Omaha - 2016/2017 LTCi Rate Increase				
Project Name/Number:	2016/2017 LTCi/				

Item 1

Enclosed for your review is a copy of the cover page that shows HCA-20249 was approved by the Bureau on 10/01/2001. Please refer to the pdf file labeled VA Approval HCA-20249 et al (10-01-2001).

Item 2

I have reviewed the Virginia approval correspondence from the initial and subsequent amendment filings for all of the forms included in this filing. From this correspondence, I have prepared an exhibit that shows the forms and riders that were approved by the Virginia Bureau of Insurance. Please refer to the pdf file Form and Rider List. Please note that the word Series was not included in the form names for the HCA, NHA and LTA. I have revised the Rate/Rule Schedule tab to include the forms and riders listed in Form and Rider list exhibit. The pdf files listed below show the actual form and riders that were approved by the Bureau:

*VA Approval LT50-Series 19241
 VA Approval NH50 Series 19242
 VA Approval LT50-Series 19409 & NH50-Series 19410
 VA Approval HCA-19629 et al (02-26-1999)
 VA Approval HCA-20249 et al (10-01-2001)*

Unfortunately, the Virginia Stamp of Approval does not show up well on all of the pdf files listed above.

Item 3

The rate schedules for Forms LT50 and NH50 have been revised to make it clear that the rate schedules apply to both forms, as shown below:

*LT50-Series 19241 and LT50- Series19409
 NH50-Series 19242 and NH50- Series19410*

The revised rate schedules have replaced the old rate schedules located in the Rate/Rule Schedule tab.

Item 4

Riders 0GH7M-44 and 0GH8M-44 were approved by the Bureau on 02/26/1999. A subsequent filing was made, and approved by the Bureau on 10/01/2001, which included riders 0GH7M-44 Rev and 0GH8M-44 Rev. The only changes to these riders were the definition of Home Health Care and the Eligibility for the Payment of Benefits. At the time of the filing, it was determined that these changes did not necessitate any changes to the rates that were approved by the Bureau on 02/26/1999.

Item 5

Forms LT50-Series 19409 and NH50-Series 19410 were erroneously omitted from the Long-Term Care Annual Report that was submitted on July 29, 2016. I apologize for this oversight. An amendment will be made to include these forms in the Affected Form Numbers section of the Rate/Rule Schedule tab in SERFF Filing Number MUTA-130659280. In addition, these forms will be added to the Long-Term Care Annual Rate Report that is also located in the Rate/Rule Schedule tab.

SERFF Tracking #:	MUTA-130706482	State Tracking #:	MUTA-130706482	Company Tracking #:	LAFOND
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State:	Virginia	Filing Company:	Mutual of Omaha Insurance Company
TOI/Sub-TOI:	LTC03I Individual Long Term Care/LTC03I.003 Other		
Product Name:	Mutual of Omaha - 2016/2017 LTCi Rate Increase		
Project Name/Number:	2016/2017 LTCi/		

Related Objection 2

Applies To:

- Rate Schedules, [LT50-Series 19241, LT50-Series 19409, ODX5M, NH50-Series 19242, NH50-Series 19410, ODX6M, HCA-Series 19629, HCA-Series20249, OGH1M-44, NHA-Series 19630, NHA-Series 20250, OGH3M-44, OGH4M-44, OGH5M-44, OGH6M-REV, OGH7M-44, OGH8M-44, LTA-Series 19631, LTA-Series 20251, OGH7M-44 REV, OGH8M-44 REV, OGH9M-44 REV] (Rate)

SERFF Tracking #:	MUTA-130706482	State Tracking #:	MUTA-130706482	Company Tracking #:	LAFOND
State:	Virginia	Filing Company:	Mutual of Omaha Insurance Company		
TOI/Sub-TOI:	LTC03I Individual Long Term Care/LTC03I.003 Other				
Product Name:	Mutual of Omaha - 2016/2017 LTCi Rate Increase				
Project Name/Number:	2016/2017 LTCi/				

Comments: Our review has uncovered ongoing inconsistencies between the policy form numbers as approved by the state and the affected form numbers listed in the Rate/Rule Schedule in SERFF as follows:

1)Our records indicate HCA-Series 20249 was withdrawn 10/1/2001; however, rate increases have been approved for this policy in the past. Please provide evidence this policy was approved. Please verify the form number as well. Our records have this form listed with two hyphens (HCA- - Series 20249) which could be a typographical error on our part.

2)Rate revisions for the riders were approved in the past using the SERFF form numbers rather than the exact form number as approved by the BOI. Going forward, however, we need to determine the correct policy form numbers. Please provide evidence the SERFF form numbers were approved or revise the Rate/Rule Schedule to match the form numbers as approved. Inconsistencies in the rider numbers are listed below:

SERFF:

0GH3M-44
0GH4M-44
0GH6M-REV
0GH9M-44 REV

BOI records (approved 2/26/1999):

0GH3M
0GH4M
0GH6M-44 REV
0GH9M

3)The Rate/Rule Schedule lists two LT50-Series policies: 19241 and 19409. The attached rate schedule does not specify the form numbers. Please add the form numbers to the rate schedules so that it is clear those rates apply to both form numbers. This would also apply to the NH50-Series 19242 and 19410.

4)The Affected Form Numbers in SERFF list both 0GH7M-44 and 0GH7M-44 REV as well as 0GM8M-44 and 0GHM-44 REV. Based on our telephone conversation of 8/31/16, the rates for such riders are the same and the form number appears without the "-44" or "Rev" ending in the rate schedules. Are there not any differences in the riders; otherwise, why have two riders with the same benefits and rates? As stated in item 2 above, we need to determine the correct form numbers for the riders to resolve this issue so that the rate attachments and affected form numbers will agree with our records.

5)When the form numbers in this filing are compared to the Long Term Care Annual Reports, it doesnt appear all the form numbers are included. For example, LT50-Series 19241 was included in the annual report but not LT50-Series 19409. Please explain.

State:	Virginia	Filing Company:	Mutual of Omaha Insurance Company
TOI/Sub-TOI:	LTC03I Individual Long Term Care/LTC03I.003 Other		
Product Name:	Mutual of Omaha - 2016/2017 LTCi Rate Increase		
Project Name/Number:	2016/2017 LTCi/		

Changed Items:

Supporting Document Schedule Item Changes	
Satisfied - Item:	04/27/2017 Response - Objection 2
Comments:	
Attachment(s):	Form and Rider List.pdf VA Approval - HCA-20249 et al (10-01-2001).pdf VA Approval - LT50-Series 19241.pdf VA Approval - NH50-Series 19242.pdf VA Approval - LT50-Series 19409 & NH50-Series 19410.pdf VA Approval - HCA-19629 et al (02-26-1999).pdf

No Form Schedule items changed.

SERFF Tracking #:

MUTA-130706482

State Tracking #:

MUTA-130706482

Company Tracking #:

LAFOND

State:

Virginia

Filing Company:

Mutual of Omaha Insurance Company

TOI/Sub-TOI:

LTC03I Individual Long Term Care/LTC03I.003 Other

Product Name:

Mutual of Omaha - 2016/2017 LTCi Rate Increase

Project Name/Number:

2016/2017 LTCi/

Rate/Rule Schedule Item Changes

Item No.	Document Name	Affected Form Numbers (Separated with commas)	Rate Action	Rate Action Information	Attachments	Date Submitted
1	Rate Schedules	LT50-Series 19241, LT50-Series 19409, ODX5M, NH50-Series 19242, NH50-Series 19410, ODX6M, HCA-Series 19629, HCA-Series20249, OGH1M-44, NHA-Series 19630, NHA-Series 20250, OGH3M-44, OGH4M-44, OGH5M-44, OGH6M-REV, OGH7M-44, OGH8M-44, LTA-Series 19631, LTA-Series 20251, OGH7M-44 REV, OGH8M-44 REV, OGH9M-44 REV	Revised	Previous State Filing Number: MUTA-127148717 Percent Rate Change Request: 27.4	Rates - LT50 (VA - 2017).pdf, Rates - LT50 (VA - 2018).pdf, Rates - ODX5M (VA - 2017).pdf, Rates - ODX5M (VA - 2018).pdf, Rates - NH50 (VA - 2017).pdf, Rates - NH50 (VA - 2018).pdf, Rates - ODX6M (VA - 2017).pdf, Rates - ODX6M (VA - 2018).pdf, Rates - HCA-NHA-LTA (VA-2017).pdf, Rates - HCA-NHA-LTA (VA-2018).pdf,	04/27/2017 By: Jeff LaFond

Previous Version

1	Rate Schedules	LT50-Series 19241, LT50-Series 19409, ODX5M, NH50-Series 19242, NH50-Series 19410, ODX6M, HCA-Series 19629, HCA-Series20249, OGH1M-44, NHA-Series 19630, NHA-Series 20250, OGH3M-44, OGH4M-44, OGH5M-44, OGH6M-REV, OGH7M-44, OGH8M-44, LTA-Series 19631, LTA-Series 20251, OGH7M-44 REV, OGH8M-44 REV, OGH9M-44 REV	Revised	Previous State Filing Number: MUTA-127148717 Percent Rate Change Request: 27.6	Rates - HCA-NHA-LTA (VA-2016).pdf, Rates - HCA-NHA-LTA (VA-2017).pdf, Rates - NH50 (VA - 2016).pdf, Rates - NH50 (VA - 2017).pdf, Rates - ODX6M (VA - 2016).pdf, Rates - ODX6M (VA - 2017).pdf, Rates - LT50 (VA - 2016).pdf, Rates - LT50 (VA - 2017).pdf, Rates - ODX5M (VA - 2016).pdf, Rates - ODX5M (VA - 2017).pdf,	08/26/2016 By: Jeff LaFond
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Response 3

State:	Virginia	Filing Company:	Mutual of Omaha Insurance Company
TOI/Sub-TOI:	LTC03I Individual Long Term Care/LTC03I.003 Other		
Product Name:	Mutual of Omaha - 2016/2017 LTCi Rate Increase		
Project Name/Number:	2016/2017 LTCi/		

Comments:

A Post-Submission Update will be completed to change the Overall % Indicated Change to 71.5% on the Rate/Rule Schedule tab. In addition, the requested implementation date has been changed to On Approval.

Related Objection 3

Applies To:

- Rate Schedules, [LT50-Series 19241, LT50-Series 19409, ODX5M, NH50-Series 19242, NH50-Series 19410, ODX6M, HCA-Series 19629, HCA-Series20249, OGH1M-44, NHA-Series 19630, NHA-Series 20250, OGH3M-44, OGH4M-44, OGH5M-44, OGH6M-REV, OGH7M-44, OGH8M-44, LTA-Series 19631, LTA-Series 20251, OGH7M-44 REV, OGH8M-44 REV, OGH9M-44 REV] (Rate)

Comments: Please amend the Overall % Indicated Change on the "Rate/Rule Schedule" to reflect 61.9% which is the rate increase that would be needed to bring the future loss ratio in line with expectations according to Section 11 of the Actuarial Memorandum. The Overall % Rate Impact percentage would remain at 27.6% which reflects the overall proposed rate increase.

Changed Items:

No Supporting Documents changed.

No Form Schedule items changed.

No Rate/Rule Schedule items changed.

Response 4

Comments:

SERFF Tracking #:	MUTA-130706482	State Tracking #:	MUTA-130706482	Company Tracking #:	LAFOND
<hr/>					
State:	Virginia	Filing Company:	Mutual of Omaha Insurance Company		
TOI/Sub-TOI:	LTC03I Individual Long Term Care/LTC03I.003 Other				
Product Name:	Mutual of Omaha - 2016/2017 LTCi Rate Increase				
Project Name/Number:	2016/2017 LTCi/				

Item 1

The revised Sample Premium Notification Letter (Form 0555A VA) has been added to the Form Schedule tab for your review and approval. A Certificate of Compliance has also been added. The full and proper corporate name prominently appears in the letter.

Item 2

We do not intend to use the letter with future long term care rate filings. Therefore, we are not providing a Statement of Variability.

Item 3a

For compliance with 14 VAC 5-200-75 D 1, the following statements/information has been added to the letter:

- 1.The policy may be subject to future rate increases;*
- 2.Should there be future increases, options similar to those being offered now will be available in the future and benefits may be changed at any time (not just at the time of a rate increase);*
- 3.The premium and schedule that will be in effect;*
- 4.The effective date of the increase; and*
- 5.The insured has a right to a revised premium or rate schedule upon request.*

Item 3b

For compliance with 14 VAC 5-200-75 D 2, the following information has been added to the letter:

- 1.The options available as alternatives to paying the increased premium amount have been added to the letter. We will provide separate offer forms for the benefit period change and the elimination period change. These forms were approved by the Bureau on 02/04/2013 in SERFF Filing Number MUTA-127148717. The form numbers were LTC-BP-VA (benefit period change offer form) and LTC-EP-VA (elimination period change offer form). These forms will be attached and become part of the policy. The letter also mentions the Contingent Benefit Upon Lapse (CBUL). If a policyholder lapses, they will receive the attached letter (VA CNF Letter) and the policyholder will be given Contingent Non-Forfeiture Rider 0HA3M-44. This rider was approved by the Bureau on 06/14/2000. The Contingent Benefit Upon Lapse will be provided to all policyholders regardless if the triggers have been met or not;*
- 2.A disclosure stating that all options available to reduce their premium may not be of equal value. This statement has been emphasized by bolding the text;*
- 3.This is not applicable as there are not any partnership policies in Virginia; and*
- 4.Contact information has been included in the letter to allow the policyholder to contact us for additional options. The proposed policyholder letter will not include the potential removal of riders as an option to reduce the impact of the rate increase. Regarding the inflation rider, the only option available is to drop the rider. No other inflation options were available when these products were sold. Finally, we are not providing actuarially equivalent lower inflation percent that would allow the increase to be zeroed out if accepted, also known as a landing spot.*

Item 3c

For compliance with 14 VAC 5-200-75 D 3, we have revised the driving factors of the rate increase to those suggested in your objection letter.

Item 3d

SERFF Tracking #:	MUTA-130706482	State Tracking #:	MUTA-130706482	Company Tracking #:	LAFOND
State:	Virginia	Filing Company:	Mutual of Omaha Insurance Company		
TOI/Sub-TOI:	LTC03I Individual Long Term Care/LTC03I.003 Other				
Product Name:	Mutual of Omaha - 2016/2017 LTCi Rate Increase				
Project Name/Number:	2016/2017 LTCi/				

For compliance with 14 VAC 5-200-75 D 4, we have revised the letter to include the verbiage required by this regulation.

Related Objection 4

Applies To:

- Sample Policyholder Notification Letter (Supporting Document)

SERFF Tracking #:	MUTA-130706482	State Tracking #:	MUTA-130706482	Company Tracking #:	LAFOND
<hr/>					
State:	Virginia	Filing Company:	Mutual of Omaha Insurance Company		
TOI/Sub-TOI:	LTC03I Individual Long Term Care/LTC03I.003 Other				
Product Name:	Mutual of Omaha - 2016/2017 LTCi Rate Increase				
Project Name/Number:	2016/2017 LTCi/				

Comments: The following concerns need to be addressed in regards to the policyholder letter:

1. Because the letter must be "filed" in accordance with 14VAC5-200-75 D, please attach the letter to the Form Schedule in SERFF in compliance with the requirements of Chapter 100 of Title 14 of the Virginia Administrative Code including a Certification of Compliance. The letter will require a form number in the lower left hand corner. Please ensure the full and proper corporate name of the insurer prominently appears in the letter.
2. If the company intends to use this letter with future long term care rate filings, the company should bracket variable information such as the percentage of the rate increase and provide a Statement of Variability.
3. Please amend the letter to include the following information for compliance with the regulation:
 - a) For compliance with 14VAC5-200-75 D 1, please include the following statements:
 1. a statement indicating the policy may be subject to future rate increases
 2. a statement indicating that should there be future increases, options similar to those being offered now will be available in the future and benefits may be changed at any time (not just at the time of a rate increase)
 3. a statement indicating the premium and schedule that will be in effect
 4. a statement indicating the effective date of the increase
 5. a statement the insured has a right to a revised premium or rate schedule upon request
 - b) For compliance with 14VAC5-200-75 D 2:
 1. Provide a clear explanation of the options available as alternatives to paying the increased premium amount consistent with 14VAC5-200-183. The current letter references a Policy Adjustment Offer. The available options must be contained in the letter itself for compliance purposes. The company may include a form as an enclosure to be signed by the insured and returned; however, it should be separate and apart from the letter. If the form will not be attached and become a part of the policy, the form may be attached to Supporting Documentation for review. The letter should clearly offer the Contingent Benefit Upon Lapse (CBUL) for anyone who is eligible and does not have a non-forfeiture benefit. In line with these benefits, please confirm such benefits will be administered according to the revised regulations that were effective September 1, 2015. Also, advise if the company will provide the CBUL regardless if the triggers or met or not.
 2. Include a disclosure stating that all options available to the policyholder may not be of equal value. As a disclosure this information should be emphasized by bolding, highlighting, using larger text or some other method that will bring attention to it;
 3. In the case of a partnership policy, a disclosure that some benefit reduction options may result in a loss in partnership status that may reduce policyholder protections. As stated above, as a disclosure, the information should be emphasized to bring attention to it.
 4. Include contact information that will allow the policyholder to contact the insurer for additional options. In regards to this, will the proposed policyholder letter include the

State:	Virginia	Filing Company:	Mutual of Omaha Insurance Company
TOI/Sub-TOI:	LTC03I Individual Long Term Care/LTC03I.003 Other		
Product Name:	Mutual of Omaha - 2016/2017 LTCi Rate Increase		
Project Name/Number:	2016/2017 LTCi/		

potential removal of riders as an option to reduce the impact of the rate increase? In regards to an inflation rider, will the policyholder only be able to reduce the inflation protection to a lower percentage based on those percentages currently offered or has the company determined actuarially a percentage reduction that would allow the rate increase to be zeroed out if accepted which would result in no rate increase, commonly referred to as a landing spot?

c) For compliance with 14VAC5-200-75 D 3, please provide clear identification of the driving factors of the rate increase. The current letter states the rate increase is due to ever increasing cost of services and that premiums received from this long-term care policy form no longer support expected claims. The letter should be more specific as to why premiums aren't sufficient. What assumptions have changed and why that require the rate increase. A sample of such wording is below:

"Rates are being raised on all policies like yours to pay for anticipated claims that are higher than expected. This is due in part to individuals living longer and keeping their policies longer, which has resulted in more claims being filed than we anticipated when this policy was originally priced. As a result, premiums need to be adjusted to ensure there is adequate funding to pay current and anticipated future claims. This premium increase is designed to offset some of these anticipated costs and in no way reflects on the integrity of your policy, nor is it based on your individual claims history, age, health status, or any other personal factor."

4. For compliance with 14VAC5-200-75 D 34, a statement substantially similar to the following must be included:

"The rate increase request was reviewed by Virginias State Corporation Commission and was found to be compliant with applicable Virginia laws and regulations addressing long-term care insurance. All premium rate filings are available for public inspection and may be accessed online through the Virginia Bureau of Insurance's webpage at www.scc.virginia.gov/BOI."

Changed Items:

Supporting Document Schedule Item Changes	
Satisfied - Item:	Certification of Compliance
Comments:	
Attachment(s):	VA Certification of Compliance - Mutual.pdf
<i>Previous Version</i>	
Bypassed - Item:	<i>Certification of Compliance</i>
Bypass Reason:	<i>not a form filing</i>
Attachment(s):	

State:	Virginia	Filing Company:	Mutual of Omaha Insurance Company
TOI/Sub-TOI:	LTC03I Individual Long Term Care/LTC03I.003 Other		
Product Name:	Mutual of Omaha - 2016/2017 LTCi Rate Increase		
Project Name/Number:	2016/2017 LTCi/		

Supporting Document Schedule Item Changes	
Satisfied - Item:	Certification of Compliance
Comments:	
Attachment(s):	VA Certification of Compliance - Mutual.pdf
<i>Previous Version</i>	
Bypassed - Item:	<i>Certification of Compliance</i>
Bypass Reason:	<i>not a form filing</i>
Attachment(s):	

Satisfied - Item:	04/27/2017 Response - Objection 4
Comments:	<p>The Certificate of Compliance mentioned in the response to Objection 4 - Item 1 is located in the Certification of Compliance Section.</p> <p>Also, previously approved forms LTC-BP-VA and LTC-EP-VA, approved in SERFF Tracking # MUTA-127148717, have been included for reference purposes.</p>
Attachment(s):	<p>Sample Notification Letter (VA).pdf</p> <p>VA CNF Letter.pdf</p> <p>Form LTC-BP-VA (rev).pdf</p> <p>Form LTC-EP-VA (rev).pdf</p>

No Form Schedule items changed.

No Rate/Rule Schedule items changed.

Response 5

Comments:

As mentioned in Item 3b above, form LTC-BP-VA (benefit period change offer form) and LTC-EP-VA (elimination period change offer form) were approved by the Bureau on 02/04/2013 in SERFF Filing Number MUTA-127148717. When these forms are signed and returned to us by the policyholder, they become part of the policy.

Related Objection 5

Applies To:

- Sample Policyholder Notification Letter (Supporting Document)

SERFF Tracking #:	MUTA-130706482	State Tracking #:	MUTA-130706482	Company Tracking #:	LAFOND
<hr/>					
State:	Virginia	Filing Company:	Mutual of Omaha Insurance Company		
TOI/Sub-TOI:	LTC03I Individual Long Term Care/LTC03I.003 Other				
Product Name:	Mutual of Omaha - 2016/2017 LTCi Rate Increase				
Project Name/Number:	2016/2017 LTCi/				

Comments: Please explain how a policy is updated to reflect any benefit changes the insured may choose to reduce the effects of the rate increase. If the policy is revised or changed in any way, the policyowner must first agree to the changes and the policy must be amended or endorsed by an approved form such as a rider, endorsement, application or schedule of benefits that has been reviewed and approved by the Virginia Bureau of Insurance. The document must be dated or have an indication of the effective date of change in the policy benefits, state that a change is being made to the policy and this new document will be made a part of the contract. If the company has such forms available for this purpose, please provide a copy of the form, the SERFF tracking number and date of approval. If the company does not have any available documents to effectuate such changes, a form will need to be submitted for review and approval. It can be attached to this filing if desired. Please keep in mind, there should be several options provided in the policyholder letter to reduce the effect of the rate increase. Please be sure all options are covered in the new form or forms including the contingent benefit upon lapse and/or optional nonforfeiture benefit. If the company chooses to include variability in the form, please provide a statement of variability. A Certification of Compliance would be required in accordance with 14VAC5-100-40 3 as well as a readability certification in accordance with 14VAC5-110-60.

Changed Items:

No Supporting Documents changed.

No Form Schedule items changed.

No Rate/Rule Schedule items changed.

Response 6

Comments:

The Rate Request Summary has been revised and replaces the Summary that was included in the initial filing. The riders affected by the rate increase have been added to the Rate Request Summary.

Related Objection 6

Applies To:

- Long Term Care Insurance Rate Request Summary (Supporting Document)

Comments: The Rate Request Summary has been slightly revised and an updated form has been attached to our letter. Because this rate increase will affect the riders as well, please add those form numbers to the Rate Request Summary.

Changed Items:

SERFF Tracking #:	MUTA-130706482	State Tracking #:	MUTA-130706482	Company Tracking #:	LAFOND
State:	Virginia	Filing Company:	Mutual of Omaha Insurance Company		
TOI/Sub-TOI:	LTC03I Individual Long Term Care/LTC03I.003 Other				
Product Name:	Mutual of Omaha - 2016/2017 LTCi Rate Increase				
Project Name/Number:	2016/2017 LTCi/				
Supporting Document Schedule Item Changes					
Satisfied - Item:	Long Term Care Insurance Rate Request Summary				
Comments:	The LTC Insurance Rate Request Summary (revised) reflects the revised document, which is mentioned in the 04/27/2017 Response - Objection 6.				
Attachment(s):	VA Increase Summary.pdf LTC Insurance Rate Request Summary (revised).pdf				
<i>Previous Version</i>					
Satisfied - Item:	<i>Long Term Care Insurance Rate Request Summary</i>				
Comments:					
Attachment(s):	<i>Health Insurance Rate Request Summary.pdf VA Increase Summary.pdf</i>				

No Form Schedule items changed.

No Rate/Rule Schedule items changed.

Response 7

Comments:

SERFF Tracking #:	MUTA-130706482	State Tracking #:	MUTA-130706482	Company Tracking #:	LAFOND
<hr/>					
State:	Virginia	Filing Company:	Mutual of Omaha Insurance Company		
TOI/Sub-TOI:	LTC03I Individual Long Term Care/LTC03I.003 Other				
Product Name:	Mutual of Omaha - 2016/2017 LTCi Rate Increase				
Project Name/Number:	2016/2017 LTCi/				

Item 1

Attachment 1 Dual Loss Ratio Test (pre) has been prepared to demonstrate compliance with 14 VAC 5-200-150 B.

Item 2

Attachment 2 Actuarial Certification (pre), which is applicable to policies issued prior to 10/01/2003, has been prepared and complies with 14 VAC 5-130-70 B 14.

Item 3

Attachment 3 ALR (pre) displays the Active Life Reserves for the pre-rate stability block of business by benefit period.

Item 4

The anticipated lifetime loss ratios for the pre-rate stability block of business, where the numerator is equal to the anticipated incurred claims less policy reserves, and the denominator is equal to the anticipated earned premium, by benefit period and in total are displayed below:

Non-Lifetime Benefit Periods: 104.7%

Lifetime Benefit Period: 133.1%

All Benefit Periods Combined: 122.5%

Please note that these loss ratios are included in Exhibits 4A-C Nationwide Lifetime Experience (Pre-Rate Stabilization - 2016) which includes data through 12/31/2016.

Related Objection 7

Applies To:

- L&H Actuarial Memorandum (Supporting Document)

Comments: Please provide the following information on the pre-stability block:

1) Based on the revised 14VAC5-200-150 B, benefits will be deemed reasonable for pre-stability policies only provided the expected loss ratio is greater of 60% or the lifetime loss ratio used in the original pricing applied to the current rate schedule plus 80% applied to any premium rate increase for individual policy forms. Please demonstrate compliance with this regulation.

2) Please provide an Actuarial Certification in compliance with 14VAC5-130-70 B 14.

3) Please identify the amount of Active Life reserves related to these policies and include the Active Life reserves in the determination of the Future Loss ratio.

4) Please provide the anticipated loss ratio where the numerator is equal to the anticipated incurred claims less policy reserves, and the denominator is equal to the anticipated earned premium.

State:	Virginia	Filing Company:	Mutual of Omaha Insurance Company
TOI/Sub-TOI:	LTC03I Individual Long Term Care/LTC03I.003 Other		
Product Name:	Mutual of Omaha - 2016/2017 LTCi Rate Increase		
Project Name/Number:	2016/2017 LTCi/		

Changed Items:

Supporting Document Schedule Item Changes	
Satisfied - Item:	04/27/2017 Response - Objection 7
Comments:	
Attachment(s):	Attachment 1 - Dual Loss Ratio Tests (pre - 2016).pdf Attachment 2 - Actuarial Certification (pre).pdf Attachment 3 - ALR (pre).pdf

No Form Schedule items changed.

No Rate/Rule Schedule items changed.

Response 8

Comments:

Item 1

Moderately adverse experience was defined in an objection letter response submitted on 10/17/2012 in the last rate increase filing that was approved by the Bureau on 02/04/2013 (SERFF Tracking # MUTA-127148717). Below is the definition of moderately adverse experience included in that filing:

Any combination of changes in the moderately adverse experience conditions that is at least as much as the impact of a 10% increase in morbidity would trigger a moderately adverse consideration. The morbidity moderately adverse condition was tested as a sensitivity in our projection model. The projected experience and resulting loss ratio include assumptions that reflect moderately adverse conditions.

Note that the moderately adverse scenarios were developed as the level of change in profits due to deviation from expected results that executive management would be comfortable with for each scenario. If the requested premium rate schedule increase is implemented and the underlying assumptions, which reflect moderately adverse conditions, are realized, no further premium rate schedule increases are anticipated.

Item 2

In an effort to preserve this block of business, we are providing policyholders options to reduce benefits in an effort to mitigate the impact of the proposed rate increases.

Related Objection 8

Applies To:

- L&H Actuarial Memorandum (Supporting Document)

State:	Virginia	Filing Company:	Mutual of Omaha Insurance Company
TOI/Sub-TOI:	LTC03I Individual Long Term Care/LTC03I.003 Other		
Product Name:	Mutual of Omaha - 2016/2017 LTCi Rate Increase		
Project Name/Number:	2016/2017 LTCi/		

Comments: Please provide the following information on the post-stability block:

1) *Please provide a description of the margin for moderately adverse experience that is included in the premium rates, a description of the testing of pricing assumptions that was done to support the conclusion that the filed premium rates are sustainable over the life of the form, and how it differs from how it was originally defined.*

2) *How does the company plan to comply with 14VAC5-200-153.G.1.*

Changed Items:

No Supporting Documents changed.

No Form Schedule items changed.

No Rate/Rule Schedule items changed.

Response 9

Comments:

SERFF Tracking #:	MUTA-130706482	State Tracking #:	MUTA-130706482	Company Tracking #:	LAFOND
<hr/>					
State:	Virginia	Filing Company:	Mutual of Omaha Insurance Company		
TOI/Sub-TOI:	LTC03I Individual Long Term Care/LTC03I.003 Other				
Product Name:	Mutual of Omaha - 2016/2017 LTCi Rate Increase				
Project Name/Number:	2016/2017 LTCi/				

Item 1

Attachments 4A-C Nationwide Lifetime Experience (Pre-Rate Stabilization) and Attachments 5A-C Nationwide Lifetime Experience (Post-Rate Stabilization) have been prepared to show the lifetime loss ratio with the historical premium component restated to reflect the proposed premiums had been charged since the forms introduction.

Item 2

Exhibits 4A-C and Exhibits 5A-C have been provided in Excel spreadsheets. The detail in these exhibits should be sufficient so the projections can be recreated. If you need any additional projections in Excel, please let us know.

Item 3

Attachment 6 Rate Increase History has been prepared to show the rate increase history by state since inception.

Item 4

Please refer to Attachments 7A-C National Lifetime Experience Projection (original assumptions in the future) which provide a loss ratio projection reflecting the actual historical experience, which utilizes the actual inforce as of the projection date, projecting forward the expected earned premiums and incurred claims using the original pricing assumptions for interest, mortality, morbidity and persistency into the future and assumes the future premiums are paid based on the original premium scale with no increases.

Item 5

Please refer to Attachments 8A-C National Lifetime Experience Projection (actual distribution) which reflects all of the original pricing assumptions for interest, mortality, morbidity, persistency and premium scale, but uses the actual distribution of policies as issued rather than the originally assumed mix of business.

Item 6

The original targeted pricing lifetime loss ratio was 60% for all forms included in this filing when they were approved by the Bureau. As you can see from the lifetime experience projections, the current projected lifetime loss ratios are never less than the originally anticipated lifetime loss ratios.

Item 7

The actual to expected analysis for each of the current assumptions are displayed in Attachment 9A Actual to Revised (Morbidity), Attachment 9B Actual to Revised (Mortality) and Attachment 9C Actual to Revised (Lapse).

Item 8

Due to our A/Es and the fact that our Gross Premium Valuation testing has not identified a deficiency for our entire long-term care block, we believe our reserve levels are justified.

Item 9

A brief description of the policy forms and riders is displayed in Attachment 10 Benefit Description.

Item 10

The Actuarial Memorandum has been revised to include the rider form numbers and also to include data as of 12/31/2016, as previously mentioned.

SERFF Tracking #:	MUTA-130706482	State Tracking #:	MUTA-130706482	Company Tracking #:	LAFOND
State:	Virginia	Filing Company:	Mutual of Omaha Insurance Company		
TOI/Sub-TOI:	LTC03I Individual Long Term Care/LTC03I.003 Other				
Product Name:	Mutual of Omaha - 2016/2017 LTCi Rate Increase				
Project Name/Number:	2016/2017 LTCi/				

Item 11

The original targeted pricing lifetime loss ratio was 60% for all forms included in this filing.

Related Objection 9

Applies To:

- L&H Actuarial Memorandum (Supporting Document)

SERFF Tracking #:	MUTA-130706482	State Tracking #:	MUTA-130706482	Company Tracking #:	LAFOND
State:	Virginia	Filing Company:	Mutual of Omaha Insurance Company		
TOI/Sub-TOI:	LTC03I Individual Long Term Care/LTC03I.003 Other				
Product Name:	Mutual of Omaha - 2016/2017 LTCi Rate Increase				
Project Name/Number:	2016/2017 LTCi/				

Comments: Please provide the following information on both blocks of business:

- 1) Provide a separate calculation of the Lifetime Loss Ratio so that the historical premium component is restated to what it would be if the proposed premium had been charged (collected) since the forms introduction.*
- 2) Please provide sufficient detail or documentation provided so that any projections can be recreated. Please provide excel spreadsheets, if possible.*
- 3) Advise in what states the company has requested rate increases on this block, how the rate changes requested in Virginia compare with those requested in other states, and the current status of the reviews in other states.*
- 4) Please provide a loss ratio projection reflecting the actual historical experience during the historical experience period and then, utilizing the actual inforce as of the projection date, projecting forward the expected earned premiums and incurred claims using the original pricing assumptions for interest, mortality, morbidity and persistency into the future and assuming the future premiums are paid based on the original premium scale with no increases.*
- 5) Please provide a loss ratio projection (both past and future) which reflects all of the original pricing assumptions for interest, mortality, morbidity, persistency and premium scale, but uses the actual distribution of policies as issued rather than the originally assumed mix of business.*
- 6) Please provide the original targeted pricing loss ratio when the policy(ies) was originally approved; and if applicable, when the current projected loss ratio is less than originally anticipated.*
- 7) Please provide actual-to-expected analysis for each of the current assumptions (morbidity, mortality, and lapse). Please ensure there is sufficient justification for the assumptions used in the projections.*
- 8) Please provide the justification for the reserve levels provided.*
- 9) Please provide a brief description of the policy forms and riders.*
- 10) Please include the rider form numbers in the memorandum since the forms are affected by this rate increase.*
- 11) Please provide the original target loss ratio for each of the policy forms included in this filing.*

Changed Items:

State:	Virginia	Filing Company:	Mutual of Omaha Insurance Company
TOI/Sub-TOI:	LTC03I Individual Long Term Care/LTC03I.003 Other		
Product Name:	Mutual of Omaha - 2016/2017 LTCi Rate Increase		
Project Name/Number:	2016/2017 LTCi/		

Supporting Document Schedule Item Changes	
Satisfied - Item:	04/27/2017 Response - Objection 9
Comments:	
Attachment(s):	Attachments 4A-C - Nationwide Lifetime Experience (Pre-Rate Stabilization - 2016).pdf Attachments 5A-C - Nationwide Lifetime Experience (Post-Rate Stabilization - 2016).pdf Att 4A-C - Nat'l Lifetime Exp. (Pre-Rate Stab).xlsx Att 5A-C - Nat'l Lifetime Exp. (Post-Rate Stab).xlsx Attachment 10 - Benefit Description (2016).pdf Attachment 6 - Rate Increase History.pdf Attachment 7A-C - National Lifetime Experience (original assumptions in future).pdf Attachment 9A - Actual to Revised (Morbidity).pdf Attachment 9B - Actual to Revised (Mortality).pdf Attachment 9C - Actual to Revised (Lapse).pdf Attachment 8A-C - National Lifetime Experience (actual distribution & orig assumptions).pdf

State:	Virginia	Filing Company:	Mutual of Omaha Insurance Company
TOI/Sub-TOI:	LTC03I Individual Long Term Care/LTC03I.003 Other		
Product Name:	Mutual of Omaha - 2016/2017 LTCi Rate Increase		
Project Name/Number:	2016/2017 LTCi/		

Supporting Document Schedule Item Changes	
Satisfied - Item:	04/27/2017 Response - Objection 9
Comments:	
Attachment(s):	Attachments 4A-C - Nationwide Lifetime Experience (Pre-Rate Stabilization - 2016).pdf Attachments 5A-C - Nationwide Lifetime Experience (Post-Rate Stabilization - 2016).pdf Att 4A-C - Nat'l Lifetime Exp. (Pre-Rate Stab).xlsx Att 5A-C - Nat'l Lifetime Exp. (Post-Rate Stab).xlsx Attachment 10 - Benefit Description (2016).pdf Attachment 6 - Rate Increase History.pdf Attachment 7A-C - National Lifetime Experience (original assumptions in future).pdf Attachment 9A - Actual to Revised (Morbidity).pdf Attachment 9B - Actual to Revised (Mortality).pdf Attachment 9C - Actual to Revised (Lapse).pdf Attachment 8A-C - National Lifetime Experience (actual distribution & orig assumptions).pdf
Satisfied - Item:	04/27/2017 Response - Objection 9 (Item 10)
Comments:	The Actuarial Memorandum has been revised to include the form numbers. In addition, the Actuarial Memorandum and Exhibits have been updated to include data through 12/31/2016.
Attachment(s):	Exhibits 4A-C - Nationwide Lifetime Experience (Pre-Rate Stabilization - 2016).pdf Exhibits 5A-C - Nationwide Lifetime Experience (Post-Rate Stabilization - 2016).pdf Actuarial Memorandum (VA - rev).pdf Actuarial Certification (VA).pdf Exhibit 1 - Average Annual Premium (2016).pdf Exhibit 2 - Rate Increase History (2016).pdf Exhibits 3A-C - Nationwide Lifetime Experience (2016).pdf Exhibits 6A-C - Updated Projections (Pre-Rate Stabilization - 2016).pdf Exhibits 7A-C - Updated Projections (Post-Rate Stabilization - 2016).pdf Exhibit 8 - Moderately Adverse Experience Trigger (2016).pdf Exhibits 9A-C - Virginia Lifetime Experience (Pre-Rate Stabilization - 2016).pdf Exhibits 10A-C - Virginia Lifetime Experience (Post- Rate Stabilization - 2016).pdf

No Form Schedule items changed.

No Rate/Rule Schedule items changed.

Conclusion:

We hope that this additional information will allow you to continue your review of our submission and we look forward to a favorable response.

Sincerely,

Jeff LaFond

Sincerely,

SERFF Tracking #:	MUTA-130706482	State Tracking #:	MUTA-130706482	Company Tracking #:	LAFOND
State:	Virginia	Filing Company:	Mutual of Omaha Insurance Company		
TOI/Sub-TOI:	LTC03I Individual Long Term Care/LTC03I.003 Other				
Product Name:	Mutual of Omaha - 2016/2017 LTCi Rate Increase				
Project Name/Number:	2016/2017 LTCi/				

Jeff LaFond

SERFF Tracking #:	MUTA-130706482	State Tracking #:	MUTA-130706482	Company Tracking #:	LAFOND
State:	Virginia	Filing Company:	Mutual of Omaha Insurance Company		
TOI/Sub-TOI:	LTC03I Individual Long Term Care/LTC03I.003 Other				
Product Name:	Mutual of Omaha - 2016/2017 LTCi Rate Increase				
Project Name/Number:	2016/2017 LTCi/				

Amendment Letter

Submitted Date: 11/30/2017

Comments:

RE: Rates

Janet,

The rate schedules have been revised to reflect the rate increase amounts for each period.

Please do not hesitate to contact me if you need any additional information.

Sincerely,

Jeff LaFond

Changed Items:

No Form Schedule Items Changed.

State: Virginia Filing Company: Mutual of Omaha Insurance Company
 TOI/Sub-TOI: LTC03I Individual Long Term Care/LTC03I.003 Other
 Product Name: Mutual of Omaha - 2016/2017 LTCi Rate Increase
 Project Name/Number: 2016/2017 LTCi/

Rate/Rule Schedule Item Changes						
Item No.	Document Name	Affected Form Numbers (Separated with commas)	Rate Action	Rate Action Information	Attachments	Date Submitted
1	Rate Schedules	LT50-Series 19241, LT50-Series 19409, ODX5M, NH50-Series 19242, NH50-Series 19410, ODX6M, HCA-Series 19629, HCA-Series20249, OGH1M-44, NHA-Series 19630, NHA-Series 20250, OGH3M-44, OGH4M-44, OGH5M-44, OGH6M-REV, OGH7M-44, OGH8M-44, LTA-Series 19631, LTA-Series 20251, OGH7M-44 REV, OGH8M-44 REV, OGH9M-44 REV	Revised	Previous State Filing Number: MUTA-127148717 Percent Rate Change Request: 27.4	Rates - LT50 (VA-2018).pdf, Rates - LT50 (VA-2019).pdf, Rates - ODX5M (VA-2018).pdf, Rates - ODX5M (VA-2019).pdf, Rates - NH50 (VA-2018).pdf, Rates - NH50 (VA-2019).pdf, Rates - ODX6M (VA-2018).pdf, Rates - ODX6M (VA-2019).pdf, Rates - HCA-NHA-LTA (VA-2018).pdf, Rates - HCA-NHA-LTA (VA-2019).pdf,	11/30/2017 By:
Previous Version						
1	Rate Schedules	LT50-Series 19241, LT50-Series 19409, ODX5M, NH50-Series 19242, NH50-Series 19410, ODX6M, HCA-Series 19629, HCA-Series20249, OGH1M-44, NHA-Series 19630, NHA-Series 20250, OGH3M-44, OGH4M-44, OGH5M-44, OGH6M-REV, OGH7M-44, OGH8M-44, LTA-Series 19631, LTA-Series 20251, OGH7M-44 REV, OGH8M-44 REV, OGH9M-44 REV	Revised	Previous State Filing Number: MUTA-127148717 Percent Rate Change Request: 27.4	Rates - LT50 (VA - 2017).pdf, Rates - LT50 (VA - 2018).pdf, Rates - ODX5M (VA - 2017).pdf, Rates - ODX5M (VA - 2018).pdf, Rates - NH50 (VA - 2017).pdf, Rates - NH50 (VA - 2018).pdf, Rates - ODX6M (VA - 2017).pdf, Rates - ODX6M (VA - 2018).pdf, Rates - HCA-NHA-LTA (VA-2017).pdf, Rates - HCA-NHA-LTA (VA-2018).pdf,	04/27/2017 By: Jeff LaFond
Previous Version						
1	Rate Schedules	LT50-Series 19241,	Revised	Previous State Filing	Rates - HCA-NHA-LTA	08/26/2016

State:	Virginia	Filing Company:	Mutual of Omaha Insurance Company
TOI/Sub-TOI:	LTC03I Individual Long Term Care/LTC03I.003 Other		
Product Name:	Mutual of Omaha - 2016/2017 LTCi Rate Increase		
Project Name/Number:	2016/2017 LTCi/		

Rate/Rule Schedule Item Changes					
		LT50-Series 19409, ODX5M, NH50-Series 19242, NH50-Series 19410, ODX6M, HCA-Series 19629, HCA-Series20249, OGH1M-44, NHA-Series 19630, NHA-Series 20250, OGH3M-44, OGH4M-44, OGH5M-44, OGH6M-REV, OGH7M-44, OGH8M-44, LTA-Series 19631, LTA-Series 20251, OGH7M-44 REV, OGH8M-44 REV, OGH9M-44 REV		Number: MUTA-127148717 Percent Rate Change Request: 27.6	(VA-2016).pdf, Rates - HCA-NHA-LTA (VA-2017).pdf, Rates - NH50 (VA - 2016).pdf, Rates - NH50 (VA - 2017).pdf, Rates - ODX6M (VA - 2016).pdf, Rates - ODX6M (VA - 2017).pdf, Rates - LT50 (VA - 2016).pdf, Rates - LT50 (VA - 2017).pdf, Rates - ODX5M (VA - 2016).pdf, Rates - ODX5M (VA - 2017).pdf, By: Jeff LaFond

No Supporting Documents Changed.

State:	Virginia	Filing Company:	Mutual of Omaha Insurance Company
TOI/Sub-TOI:	LTC03I Individual Long Term Care/LTC03I.003 Other		
Product Name:	Mutual of Omaha - 2016/2017 LTCi Rate Increase		
Project Name/Number:	2016/2017 LTCi/		

Amendment Letter

Submitted Date: 11/02/2017

Comments:

RE: Forms

Dear Ms. Houser:

Brackets have been added around [\$Amount] and [Mode of Payment] of Form OPE4M.

Please let me know if you have any additional questions or concerns.

Sincerely,

Jeff LaFond

Changed Items:

Form Schedule Item Changes								
Item No.	Form Name	Form Number	Form Type	Form Action	Action Specific Data	Readability Score	Attachments	Submitted
1	Policy Adjustment Rider	OPE4M	CERA	Initial		57.600	OPE4M Policy Adjustment Rider.pdf	Date Submitted: 11/02/2017 By:
<i>Previous Version</i>								
1	Policy Adjustment Rider	OPE4M	CERA	Initial		57.600	OPE4M Policy Adjustment Rider (Non-Annotated) Version 1.pdf	Date Submitted: 08/04/2017 By: Jeff LaFond

No Rate Schedule Items Changed.

No Supporting Documents Changed.

SERFF Tracking #:	MUTA-130706482	State Tracking #:	MUTA-130706482	Company Tracking #:	LAFOND
State:	Virginia	Filing Company:	Mutual of Omaha Insurance Company		
TOI/Sub-TOI:	LTC03I Individual Long Term Care/LTC03I.003 Other				
Product Name:	Mutual of Omaha - 2016/2017 LTCi Rate Increase				
Project Name/Number:	2016/2017 LTCi/				

Amendment Letter

Submitted Date: 08/29/2016

Comments:

RE: Sample Notification Letter

Dear Ms. Houser:

This is a follow-up to our conversation this morning regarding the above captioned filing.

A copy of the Sample Notification Letter that was previously approved by your Department has been added to the Supporting Documentation tab.

Sincerely,

Jeff LaFond

Changed Items:

No Form Schedule Items Changed.

No Rate Schedule Items Changed.

Supporting Document Schedule Item Changes	
Satisfied - Item:	Sample Policyholder Notification Letter
Comments:	Attached is a copy of the Policyholder Notification Letter that was approved by your Department on 02/04/2013.
Attachment(s):	LTC VA LIFETIME LETTER SAMPLE.pdf
<i>Previous Version</i>	
Satisfied - Item:	<i>Sample Policyholder Notification Letter</i>
Comments:	<i>Attached is a copy of the Policyholder Notification Letter that was approved by your Department on 02/04/2013.</i>
Attachment(s):	

State: Virginia **Filing Company:** Mutual of Omaha Insurance Company
TOI/Sub-TOI: LTC03I Individual Long Term Care/LTC03I.003 Other
Product Name: Mutual of Omaha - 2016/2017 LTCi Rate Increase
Project Name/Number: 2016/2017 LTCi/

Note To Reviewer

Created By:

Jeff LaFond on 11/30/2017 10:10 AM

Last Edited By:

Jeff LaFond

Submitted On:

11/30/2017 10:10 AM

Subject:

0HA3M

Comments:

Dear Ms. Houser,

We confirm that we will administer the Contingent Benefit Upon Lapse according to all changes made in the revised Virginia regulation 14 VAC 5-200-185 D.

Sincerely,

Jeff LaFond

State:	Virginia	Filing Company:	Mutual of Omaha Insurance Company
TOI/Sub-TOI:	LTC03I Individual Long Term Care/LTC03I.003 Other		
Product Name:	Mutual of Omaha - 2016/2017 LTCi Rate Increase		
Project Name/Number:	2016/2017 LTCi/		

Note To Filer

Created By:

Janet Houser on 11/30/2017 09:58 AM

Last Edited By:

Janet Houser

Submitted On:

11/30/2017 09:58 AM

Subject:

OHA3M form

Comments:

The Company confirmed in its response letter dated 8/4/2017 to objection 2 that it would administer this form in accordance with the revised regulation 14VAC5-200-185 D in which the triggers were updated. We also wanted to point out that there is no requirement that the policy must have been in force for at least 3 years for the Contingent Benefit Upon Lapse option to be effective. The three years only applies to a non-forfeiture benefit that would have been available when the policy was purchased.

Again, we ask the company to confirm it will administer the Contingent Benefit Upon Lapse according to all changes made in the revised regulations.

Thanks!

State: Virginia **Filing Company:** Mutual of Omaha Insurance Company
TOI/Sub-TOI: LTC03I Individual Long Term Care/LTC03I.003 Other
Product Name: Mutual of Omaha - 2016/2017 LTCi Rate Increase
Project Name/Number: 2016/2017 LTCi/

Note To Filer

Created By:

Janet Houser on 11/30/2017 05:42 AM

Last Edited By:

Janet Houser

Submitted On:

11/30/2017 05:42 AM

Subject:

Rates

Comments:

Jeff, according to General Information, the rate increase will be implemented over 2 years with the first increase being 30% and the second year 15% for the lifetime benefits. Please revise the rate schedules to reflect the rates for each period. Sorry for not catching this sooner!

Thanks.

State: Virginia **Filing Company:** Mutual of Omaha Insurance Company
TOI/Sub-TOI: LTC03I Individual Long Term Care/LTC03I.003 Other
Product Name: Mutual of Omaha - 2016/2017 LTCi Rate Increase
Project Name/Number: 2016/2017 LTCi/

Note To Filer

Created By:

Janet Houser on 11/02/2017 07:46 AM

Last Edited By:

Janet Houser

Submitted On:

11/02/2017 09:35 AM

Subject:

Forms

Comments:

I've reviewed the forms and need you to add brackets around [\$ Amount] and [Mode of Payment] on form OPE4M. Sorry for not noticing earlier. The SOV is fine.

The review of the letters are completed and there are no issues.

As soon as I get some feedback on the filing status, I will let you know!

Thanks!

Janet

State:	Virginia	Filing Company:	Mutual of Omaha Insurance Company
TOI/Sub-TOI:	LTC03I Individual Long Term Care/LTC03I.003 Other		
Product Name:	Mutual of Omaha - 2016/2017 LTCi Rate Increase		
Project Name/Number:	2016/2017 LTCi/		

Note To Reviewer

Created By:

Jeff LaFond on 08/07/2017 06:52 AM

Last Edited By:

Jeff LaFond

Submitted On:

08/07/2017 06:53 AM

Subject:

Confirmation - Form LTC-BP-VA

Comments:

Janet,

You are correct. The form in the first sentence of the second paragraph should be Form LTC-BP-VA.

Jeff

State:	Virginia	Filing Company:	Mutual of Omaha Insurance Company
TOI/Sub-TOI:	LTC03I Individual Long Term Care/LTC03I.003 Other		
Product Name:	Mutual of Omaha - 2016/2017 LTCi Rate Increase		
Project Name/Number:	2016/2017 LTCi/		

Note To Filer

Created By:

Janet Houser on 08/07/2017 06:11 AM

Last Edited By:

Janet Houser

Submitted On:

08/07/2017 06:41 AM

Subject:

Confirmation

Comments:

I've just started this review and wanted to confirm that under response 1, the second paragraph begins with form LTC-EP-VA. According to the first paragraph you indicate that form is no longer being used. I am assuming the correct form is LTC-BP-VA.

State: Virginia **Filing Company:** Mutual of Omaha Insurance Company
TOI/Sub-TOI: LTC03I Individual Long Term Care/LTC03I.003 Other
Product Name: Mutual of Omaha - 2016/2017 LTCi Rate Increase
Project Name/Number: 2016/2017 LTCi/

Note To Reviewer

Created By:

Jeff LaFond on 07/14/2017 07:07 AM

Last Edited By:

Jeff LaFond

Submitted On:

07/14/2017 07:07 AM

Subject:

Policy Adjustment Offer Form LTC-EP-VA

Comments:

This is a follow-up to a conversation with Ms. Janet Houser regarding the above captioned rider.

A minor change needs to be made to this form. On the bottom section of this form, it states "Keep this with your policy". This needs to be changed to "Return this portion to us". No other revisions need to be made to this form.

In light of this, we are requesting that SERFF Filing MUTA-127148717 be re-opened so this correction can be made to this form.

If you have any questions, please do not hesitate to contact me.

Sincerely,

Jeff LaFond

State: Virginia **Filing Company:** Mutual of Omaha Insurance Company
TOI/Sub-TOI: LTC03I Individual Long Term Care/LTC03I.003 Other
Product Name: Mutual of Omaha - 2016/2017 LTCi Rate Increase
Project Name/Number: 2016/2017 LTCi/

Reviewer Note

Created By:

Janet Houser on 11/30/2017 10:34 AM

Last Edited By:

Janet Houser

Submitted On:

11/30/2017 10:44 AM

Subject:

RRS

Comments:

attached summaries

Long Term Care Insurance Rate Request Summary Part 2 –To Be Completed By Bureau of Insurance

Company Name and NAIC Number: Mutual of Omaha Insurance Company 71412

SERFF Tracking Number: MUTA-130706482

Disposition: Approved

Approval Date: November 30, 2017

Revised Rates

Average Annual Premium Per Member: \$ 2,189

Average Requested Percentage Rate Change Per Member: 27.4%

Minimum Requested Percentage Rate Change Per Member: 0%

Maximum Requested Percentage Rate Change Per Member: 49.5%

Number of Policy Holders Affected: 1551

Summary of the Bureau of Insurance's review of the rate request:

Mutual of Omaha Insurance Company (the Company) requested a percentage increase ranging from 0% to 49.5% for policies with lifetime benefit resulting in an average overall increase of 27.4%. Policies with non-lifetime benefits will have no rate increase. The increase will be implemented in two stages with lifetime benefit policies receiving an initial increase of 30% and an additional 15% one year later, which results in a cumulative rate increase of 49.5%. This is an individual closed block of business issued from 1997 through 2004. Policies issued prior to October 1, 2003 are subject to the requirements of 14VAC5-200-150 and policies on or after October 1, 2003 are subject to the requirements of 14VAC5-200-153. As of the date of submission, there were 1331 policyholders in the pre-stability block of which 627 have lifetime benefits. There were 220 policyholders in the post stability block of which 86 have lifetime benefits.

There have been two prior increases approved. In 2007 a 29% increase was approved for all policy forms except LT50 and NH50. In 2013 a second increase for all policies averaging 43.5% was approved and implemented in two stages as follows: For limited benefit policies the increase was 20% in 2013 and 4.1% in 2014. For unlimited benefit policies the increase was 30% in 2013 and 20% in 2014.

The primary reason for the rate increase is to account for anticipated claims being significantly higher than expected when the policies were originally priced as a result of the combination of policyholders keeping their policies in force longer (lower lapse rates) and insureds staying on claim longer (longer claim continuance).

The Bureau reviewed the rate increase in accordance with the requirements of 14VAC5-200-150 B and 14VAC5-200-153. The company demonstrated to the Bureau's satisfaction, using actuarially justified assumptions, that the proposed rate increase was actuarially justified and that it met the requirements of Virginia's regulatory requirements after implementation of the rate increase. As a result, the Bureau of Insurance recommended approval of the rate increase.

The Company is offering all policyholders options to reduce the premium increase by reducing their coverage. These reductions could be in the form of lower daily benefits, a shorter benefit period, a longer elimination period, the termination of riders or any combination of these reductions. Specific options are included in the letter sent to all policyholders notifying them of the rate increase or can be discussed with the company by calling its customer service department.

The filing can be reviewed on the Bureau's webpage under the [Rate/Policy Form Search](http://www.scc.virginia.gov/boi/SERFFInquiry/default.aspx) at:
<http://www.scc.virginia.gov/boi/SERFFInquiry/default.aspx>

This document is intended to help explain the rate filing and it is only a summary of the company's request. It is not intended to describe or include all factors or information considered in the review process. For more detailed information, please refer to the complete filing.

Long Term Care Insurance Rate Request Summary
Part 1 – To Be Completed By Company

Reset Form

Company Name and NAIC Number:	Mutual of Omaha Insurance Company (71412)
SERFF Tracking Number:	MUTA-130706482
Effective Date:	On approval subject to 75 day notification

Revised Rates

Average Annual Premium Per Member:	\$2,189
Average Requested Percentage Rate Change Per Member:	27.4%
Minimum Requested Percentage Rate Change Per Member:	0.0%
Maximum Requested Percentage Rate Change Per Member:	49.5%
Number of Policy Holders Affected :	1,551

Plans Affected

(The Form Number and “Product Name”)

Form#

“Product Name”(if applicable)

LT50-Series 19241 0DX5M NH50-Series 19242 0DX6M LT50- Series 19409 NH50- Series 19410 HCA-19629 LTA-19631 NHA-19630 0GH1M-44 0GH3M 0GH4M 0GH5M-44 0GH6M-44 Rev 0GH7M-44 0GH8M-44 0GH9M HCA-20249 LTA-20251 NHA-20250 0GH1M-44 Rev 0GH7M-44 Rev 0GH8M-44 Rev	
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Attach a brief narrative to summarize the key information used to develop the rates including the main drivers for new or revised rates.

This document is intended to help explain the rate filing and it is only a summary of the company’s request. It is not intended to describe or include all factors or information considered in the review process. For more detailed information, please refer to the complete filing.

There is a need to increase premiums on certain policy series. The premium rate increase is necessary to account for anticipated claims significantly higher than originally expected. Higher loss ratios are the result of the combination of policyholders keeping their policies in force longer (lower lapse rates) and insureds staying on claim longer (longer claim continuance).

Mutual of Omaha has been evaluating this LTCi block and updating assumptions based on internal experience as well as the LTCi industry experience. For the forms specified above, projected experience is now worse than what prior assumptions were projecting. Updated claim costs have had the most significant deviation from prior assumptions. The effect of changing the underlying claim costs to better reflect data trends emerging in actual company experience, as well as industry data, resulted in the need for a rate increase.

State: Virginia **Filing Company:** Mutual of Omaha Insurance Company
TOI/Sub-TOI: LTC03I Individual Long Term Care/LTC03I.003 Other
Product Name: Mutual of Omaha - 2016/2017 LTCi Rate Increase
Project Name/Number: 2016/2017 LTCi/

Reviewer Note

Created By:

Janet Houser on 11/30/2017 10:31 AM

Last Edited By:

Janet Houser

Submitted On:

11/30/2017 10:32 AM

Subject:

Actuarial Certification

Comments:

Certification is located in Supporting documentation in 2 separate places: pre stability in 4/27/2017 response - obj 7 and post in 4/27/2017 objection 9 (item 10)

State: Virginia **Filing Company:** Mutual of Omaha Insurance Company
TOI/Sub-TOI: LTC03I Individual Long Term Care/LTC03I.003 Other
Product Name: Mutual of Omaha - 2016/2017 LTCi Rate Increase
Project Name/Number: 2016/2017 LTCi/

Reviewer Note

Created By:

Janet Houser on 10/25/2017 08:53 AM

Last Edited By:

Janet Houser

Submitted On:

11/30/2017 10:32 AM

Subject:

email

Comments:

see attached

From: [Robert Darnell](#)
To: [Bob Grissom](#)
Cc: [Janet Houser](#)
Subject: RE: MUTA - 130706482 Mutual of Omaha
Date: Tuesday, October 24, 2017 8:05:47 PM
Attachments: [MoO_PreRS_RILR_wALR.xlsx](#)

Hi, Bob. Thanks for your email.

Thanks also for the letter from Oliver Wyman.

As we know, the NAIC model has neglected the ALR in the rate increase calculations. I have been wanting to find the time to figure out how to correct this situation – I feel that in the next 10 years, carriers may file large rate increases and, with the current regulations, state that the rate increase is justified. I get the same result as Oliver Wyman (for when a rate increase is not warranted due to the ALR). However, the O-W solution appears to work only when the ALR is decreasing. It seems like the solution should work whether the ALR is increasing or decreasing.

The Mutual filing addresses Pre-Rate Stability and Post-Rate Stability I have attached a spreadsheet for the Post-RS block.

The attached has basic loss ratio information, plus it allows for a few additional items:

1. Any prior rate increase
2. L/R with and without the ALR
3. Any additional reserve contributions: positive or negative (so the carrier can add additional reserve and later reduce the contribution)
4. The requested rate increase may be adjusted
5. At the same time, you may compare: 1) the current loss ratio, b) the loss ratio for the requested rate increase, and c) the loss ratio for the adjusted rate increase (all three may be compared with and without the ALR)

Mutual has requested: a) a rate increase for the policies with a Lifetime Benefit Period, and b) no rate increase for the policies with a Benefit Period that is less than lifetime. The attached illustrates both of the Lifetime and NonLifetime blocks and the total of the two. The total of the two would come into play if the NonLifetime block had better experience than expected and these better results could offset the poor results of the Lifetime block.

From the regulatory point-of-view, this spreadsheet gives a lot of information about the health of the block and how well the carrier is responding to its needs.

If you like, I thought we could discuss the attached.

From: Bob Grissom [mailto:Bob.Grissom@scc.virginia.gov]
Sent: Thursday, October 19, 2017 4:38 PM
To: darnells4@verizon.net
Cc: Janet Houser <Janet.Houser@scc.virginia.gov>
Subject: RE: MUTA - 130706482 Mutual of Omaha

Bob, Janet summarized the conversation you had with her this morning. Hopefully the following, and the attached, will be helpful.

Regarding the first issue, please see pages 5-8 in the attached report that Kurt Giesa from Oliver Wyman prepared for the Bureau in 2005. This discusses the reasoning behind taking the policy reserves into account in the pre-rate stability review. Note that the Bureau has been using this test since 2005. Although typically most rate increases still pass the future loss ratio test even after taking the policy reserves into account, there have been some filings where this test has not been passed and, to date, no company has really pushed back on it.

Regarding the request for the nationwide cumulative rate increases, the Bureau uses this information to determine if the cumulative total rate increase in Virginia should be limited to the nationwide average cumulative total rate increase. The Bureau first became requesting this information to address the issue of "subsidization", which I think you know has been a concern with a number of state departments.

While I'll be out tomorrow, I will be back in the office next week. Let me know if you have any questions.

Bob Grissom
804-371-9152

From: Janet Houser
Sent: Thursday, October 19, 2017 10:07 AM
To: Bob Grissom
Subject: FW: MUTA - 130706482 Mutual of Omaha

I had a long discussion with Bob Darnell regarding your questions this morning. Rather than write a response, he wanted to discuss everything first. When you have time, I will fill you in. Then you can decide if you need a written response.

From: Robert Darnell [mailto:darnells4@verizon.net]
Sent: Thursday, October 19, 2017 8:48 AM
To: Janet Houser
Subject: RE: MUTA - 130706482 Mutual of Omaha

From: Bob Grissom [<mailto:Bob.Grissom@scc.virginia.gov>]
Sent: Wednesday, October 18, 2017 7:35 AM
To: Robert Darnell (darnells4@verizon.net) <darnells4@verizon.net>
Cc: Janet Houser <Janet.Houser@scc.virginia.gov>
Subject: FW: MUTA - 130706482 Mutual of Omaha

Bob, Janet and I were discussing this filing and I have a couple of remaining questions. Hopefully you can answer them for me.

- As you are aware Virginia requests that companies provide the following on pre-rate stability blocks and that the filing is not approvable if future loss ratios will be less than the minimum required of 60% (or the original target loss ratio if higher) using the active life reserves.

Provide the anticipated loss ratio where the numerator is equal to the anticipated incurred claims less the policy reserves, and the denominator is equal to the anticipated earned premium.

Please state where in your response you advise if the company passes this test for the pre-rate stability block, or provides the future loss ratio based on the formula above.

- The question was asked that if approved, how will the VA cumulative rate increase compare to what's been approved (or reasonable expected to be approved) nationwide to date; and to what we can reasonably assume. Regarding the reasonably assumed, we assume that you'd take into account those rate increases still pending in other states. You responded that with a majority of states having made a decision, I am not sure we need to make an assumption. However, it's still unclear to me the cumulative percentage approved in Virginia, if the full requested rate increase is approved, or the average nationwide cumulative percentage if all remaining pending increases are approved.
- The question was asked how do the experience projections compare to those used to support the previously approved rate increase? If not, how and why have they changed? To answer this you stated that you added language after Table 2, including the new Table 3 and re-formatted Table 2. In looking at Table 2, do I understand correctly that the experience is worse than projected in the previously approved rate filing? Regarding Table 3, it appears that the projected loss ratios will be better than originally assumed if the rate increase is approved. Is that correct? If so, can you explain

the differences between Table 2 and 3?

- In your report you state that this filing does not include a comparison of the proposed premium rates to the current new business premium rates. Is this because they are no longer selling any new LTCI business? If that's the case, should the rates be compared to the last product sold?

We'll look forward to your response.

Thanks.

Bob Grissom
804-371-9152

From: Janet Houser
Sent: Wednesday, October 04, 2017 9:53 AM
To: Bob Grissom
Subject: FW: MUTA - 130706482 Mutual of Omaha

Bob, attached is a revised report for Mutual of Omaha. I will add this to the list for our meeting.

From: Robert Darnell [<mailto:darnells4@verizon.net>]
Sent: Wednesday, October 04, 2017 9:39 AM
To: Janet Houser
Subject: RE: MUTA - 130706482 Mutual of Omaha

Hello, Janet.

I have addressed Bob's question regarding what has been approved nationwide. A majority of states have reached a decision regarding the rate increases. To the report, I have added two paragraphs to the end of the Rate Increase History section. See page 5.

Bob also asked , "... and to what we can reasonably assume?" With a majority of states having made a decision, I am not sure we need to make an assumption.

Bob also asked how the projections from the prior rate increase filing compares with actual experience. To answer this I have added language after Table 2, including the new Table 3. I also re-formatted Table 2. I think Table 2 now reads easier – especially for comparing results of the current and prior filings. See page 3.

Thank you for the questions. Please let me know if I can provide further assistance.

Bob.

From: Janet Houser [<mailto:Janet.Houser@scc.virginia.gov>]
Sent: Monday, October 2, 2017 6:25 AM
To: Robert Darnell (darnells4@verizon.net) <darnells4@verizon.net>
Subject: FW: MUTA - 130706482 Mutual of Omaha

Bob, please provide a response to the questions below no later than 10/16/17.

Thanks.

From: Bob Grissom
Sent: Friday, September 29, 2017 2:58 PM
To: Janet Houser
Subject: RE: MUTA - 130706482 Mutual of Omaha

If approved, how will the VA cumulative rate increase compare to what's been approved nationwide to date; and to what we can reasonably assume?

How do the experience projections compare to those used to support the previously approved rate increase? If not, how and why have they changed?

From: Janet Houser
Sent: Monday, September 25, 2017 3:42 PM
To: Bob Grissom
Subject: FW: MUTA - 130706482 Mutual of Omaha

Please see attached. Bob Darnell is recommending approving half of the rate increase.

From: Robert Darnell [<mailto:darnells4@verizon.net>]
Sent: Monday, September 25, 2017 12:31 PM
To: Janet Houser
Subject: RE: MUTA - 130706482 Mutual of Omaha

Hi, Janet!

I have attached the report.

Bob.

From: Janet Houser [<mailto:Janet.Houser@scc.virginia.gov>]
Sent: Wednesday, September 20, 2017 11:50 AM
To: Robert Darnell <darnells4@verizon.net>
Subject: RE: MUTA - 130706482 Mutual of Omaha

Ok. That will work!

From: Robert Darnell [<mailto:darnells4@verizon.net>]
Sent: Wednesday, September 20, 2017 12:13 PM
To: Janet Houser
Subject: RE: MUTA - 130706482 Mutual of Omaha

By next Monday for sure!

From: Janet Houser [<mailto:Janet.Houser@scc.virginia.gov>]
Sent: Wednesday, September 20, 2017 10:25 AM
To: Robert Darnell <darnells4@verizon.net>
Subject: RE: MUTA - 130706482 Mutual of Omaha

So that means I'll be getting a report soon, right!!!!

From: Robert Darnell [<mailto:darnells4@verizon.net>]
Sent: Wednesday, September 20, 2017 11:22 AM
To: Janet Houser
Subject: RE: MUTA - 130706482 Mutual of Omaha

I apologize. I went through documenting the Loss ratios. Then went back looking for the ALR. I checked Attachments 7 and 8, then went back and checked Attachment 1.

It is all there.

Thanks for your help!

From: Janet Houser [<mailto:Janet.Houser@scc.virginia.gov>]
Sent: Wednesday, September 20, 2017 9:51 AM
To: Bob Darnell <darnells4@verizon.net>
Subject: RE: MUTA - 130706482 Mutual of Omaha

Bob, the company responded as follows:

The loss ratios, both with and without the requested rate increase, and statutory active life reserves are included in Attachment 3 – Current Assumptions (Pre) and Attachment 6 – Current Assumptions (Post). These exhibits are located in the sections labeled 09/08/2017 Response – Objection 3 (both pdf files and excel spreadsheets) under the Supporting Documentation tab.

If this isn't what you need, then please write up a suggested question to explain in detail what you want and I'll send it on.

Thanks!

From: Janet Houser
Sent: Wednesday, September 20, 2017 7:54 AM
To: Bob Darnell
Subject: RE: MUTA - 130706482 Mutual of Omaha

Too late!!! I already sent out an objection that state the following. If you think I should

expand upon that, let me know; otherwise, I'll wait to hear from the company.

In our previous objection 3, the Company was asked to calculate the loss ratios and to include the requested rate increase and statutory active life reserves (ALR, the contract reserves). It does not appear this information was provided.

From: Bob Darnell [<mailto:darnells4@verizon.net>]
Sent: Wednesday, September 20, 2017 7:42 AM
To: Janet Houser
Subject: Re: MUTA - 130706482 Mutual of Omaha

Thanks, Janet. Do you me to write a suggested question?

On Sep 20, 2017, at 5:57 AM, Janet Houser <Janet.Houser@scc.virginia.gov> wrote:

It sounds as if I need to go back again and ask for that info which I will do. So hold off on your write up for now.

Thanks.

From: Robert Darnell [<mailto:darnells4@verizon.net>]
Sent: Tuesday, September 19, 2017 10:43 PM
To: Janet Houser
Subject: RE: MUTA - 130706482 Mutual of Omaha

Hi, Janet! I hope you had a nice week off!

In the last question set you sent Mutual of Omaha, we asked them to calculate the Loss Ratios, and to include the requested rate increase and the statutory active life reserve (ALR, the contract reserve). They didn't provide either of these.

The statutory ALR will be used to check when the $ALR + PVFP > PVFC$.
Where:

PVFP = {Present Value of Future Premiums

PVFC = Present Value of Future Claims

When the $ALR + PVFP$ is greater than the PVFC, they have enough assets to fund the claims. Using this, we may be able to lower the RI.

To make this check, we need the ALR, which only they can provide. We ask they include the requested rate increase so that we can change the percentage to work with the ALR and see what they really need.

Your note, below, apparently asks for the final write-up. Do you want to skip the part about the ALR?

Thanks, Janet!

Bob.

From: Janet Houser [<mailto:Janet.Houser@scc.virginia.gov>]

Sent: Thursday, September 14, 2017 9:55 AM

To: Robert Darnell (darnells4@verizon.net) <darnells4@verizon.net>

Subject: MUTA - 130706482 Mutual of Omaha

The company has responded to your request for additional information. Please provide your analysis and recommendations no later than 9/28/2017.

Thanks.

Janet

October 29, 2017

Mr. Robert F. Grissom
Chief Insurance Market Examiner for Market Regulation, Life and Health Division
Bureau of Insurance
Virginia State Corporation Commission
P.O. Box 1157
Richmond, VA 23218

Re: Long-Term Care Rate Increase Filing – Mutual of Omaha – MUTA-130706482

Dear Mr. Grissom:

Thank you for your email on October 27, 2017. This email referred to your email of October 18th and its direct questions. You also sent an email on October 19th, which I would like to address as well.

Your email of October 18th asked two questions:

- 1) How will the cumulative rate increase in VA compare with rate filings in other states.

My October 4th letter, attached, on page 5, refers to the rate increases filed in Virginia and the rate increases filed Nationwide, as submitted by Mutual of Omaha. Mutual of Omaha states that the rate increase in this filing (30% upon approval and 15% in one year later) is equal to the rate increase filed nationwide on 5/1/2015 (30%) and on 5/1/2016 (15%) (Mutual of Omaha calls these two rate increases the 2015 rate increases). Mutual's intent is that this rate increase will bring all states to a level rate. Mutual of Omaha's 2015 rate increases have been filed in 42 states (including Virginia). This rate increase is still pending in 4 states: Virginia, Florida, Hawaii, and Rhode Island. The 2015 rate increases have been approved or modified in 38 states. For the 30% rate increase, the 38 states have approved an average increase of 23.9%. For the 15% rate increase, the 38 states have approved an average rate increase of 12%. The cumulative amount of the requested rate increase was 49.5%. The cumulative amount approved by the 38 states is 38.8% (78% of the amount requested).

- 2) How do the experienced projections compare to those used to support the previously approved rate increase? If not, how and why have they changed?

For the Pre-Rate Stability block:

- A) Limited Benefit Period: the prior rate increase filing projected a loss ratio of 104.8%. This is now projected to have a loss ratio of 104.7%. No rate increase was requested for this block
- B) Unlimited Benefit Period: the prior rate increase filing projected a loss ratio of 107.1%. This is now projected to have a loss ratio of 133.6%. The requested rate increase for this block is 30% now and 15% in one year.

For the Post-Rate Stability block:

- C) Limited Benefit Period: the prior rate increase filing projected a loss ratio of 102.6%. This is not projected to have loss ratio of 109.2%. No rate increase was requested for this block
- D) Unlimited Benefit Period: the prior rate increase filing projected a loss ratio of 108.0%. This is now projected to have a loss ratio of 149.5%. The requested rate increase for this block is 30% now and 15% in one year.

The following compares the expected loss ratio on 12/31/2016 with the actual loss ratio on 12/31/2016:

For the Pre-Rate Stability block:

- a) Limited Benefit Period: the originally-expected loss ratio was 56.2%. The actual loss ratio is 52.7%; for the current filing, incurred claims have decreased for years prior to 2009 and have increased for all future years, the prior filing did not project claims past 2043 – they are now projected through 2071; as an example, in 2020, incurred claims are projected to increase 34% above the prior filing
- b) Unlimited Benefit Period: the originally-expected loss ratio was 56.3%. The actual loss ratio is 65.1%; for the current filing, incurred claims have decreased for years prior to 2009 and have increased for all future years, the prior filing did not project claims past 2043 – they are now projected through 2071; as an example, in 2020, incurred claims are projected to increase 10% above the prior filing.

For the Post-Rate Stability block (note that the originally expected loss ratios include a Margin for Adverse Experience):

- c) Limited Benefit Period: the originally-expected loss ratio was 59.6%. The actual loss ratio is 35.4%; for the current filing, incurred claims have decreased for years prior to 2010 and are projected to increase for all future years, the prior filing did not project claim past 2043 – they are now projected through 2071; as an example, in 2020, incurred claims are projected to increase 46% above the prior filing
- d) Unlimited Benefit Period: the originally-expected loss ratio was 60.3%. The actual loss ratio is 45.2%; for the current filing, incurred claims have decreased for years prior to 2011 and have increased in all years after 2010, the prior filing did not project claims past 2043 – they are now projected through 2071; as an example, in 2020, incurred claims are projected to increase 51% above the prior filing.

Items A – D indicate a need for a rate increase. Items a – d indicate that three of the blocks have experience that is better than originally anticipated. Together, A – D and a – d indicate Mutual of Omaha is expecting incurred claims to increase more than originally expected and more than expected in their last rate increase filing. Only the Pre-Rate Stability policies with an Unlimited Benefit Period have illustrated a historical need for a rate increase.

In addition to the above, the current projection has decreased expected lapse rates. The new lapse rates have an actual-to-expected rate of 109%, indicating that the new lapse rate assumptions are 9% lower than actual lapse rates. Mutual of Omaha does not mention how the lapse rate margin effected the premium increase.

Mutual of Omaha did not comment regarding changes to the expected mortality rates.

Regarding the October 18 email, I agree that contract reserves should be included. The Pre-Rate Stability regulations make sense – although it appears that some detail may be missing. For Post-Rate Stability, the regulations are silent regarding contract reserves. In the coming years, requested rate increases may be expected to increase in amount because the rate increase is based on the ratio of: 1) the present value of future claims, to 2) the expected value of future premiums. As the block reaches expiry, the ratio of 1) to 2) can be expected to become very large.

The spreadsheet I sent you includes additional reserves. For their long-term care lines of business, many companies have added additional reserves, and/or adjusted their contract reserves, to address insufficiencies due to: mortality and lapse rates that were initially estimated too high and morbidity estimates that were initially too low – and especially the slope of the claim cost curve (the actual claim cost curve increased much more than originally anticipated).

In contrast to some statements that reserves are simply an accounting entry, I would like to point out that the reserve increase is included as a policy cost when pricing insurance. When an insured pays their premium, the expenses include anticipated claims, and the cost of the increase in the contract reserve. Thus, the reserve is not just an accounting entry, it is an item paid for by the consumer. The consumer has a “right” to the contract reserve – they paid for it.

An additional consideration is that contract reserves are intended to be conservative. If all assumptions work out as expected, the future premium (A) plus the accumulated reserves (B) will become greater than the future claims (C). However, because $A+B>C$ does not necessarily mean that the company will not expect a rate increase if claims increase. That being said, long-term care was significantly undervalued initially. Reserves are usually understated. (In the case of this filing, the Pre-Rate Stability and Post-Rate Stability blocks do not reach $A+B>C$ until 2067 – only a few years prior to the end of the product life cycle, indicating a need for a rate increase.)

To adjust for these understated reserves, many companies have added reserves (additional reserves). The additional reserves should be considered when comparing future premiums and claims to the reserves. Because these “additional reserves” are not “contract” reserves, the company may or may not include them with the reserve totals.

I apologize for my confusion regarding a response to your 10/29 email. Please let me how I can provide further help.

Sincerely,

Robert W. Darnell, ASA, MAAA

State:	Virginia	Filing Company:	Mutual of Omaha Insurance Company
TOI/Sub-TOI:	LTC03I Individual Long Term Care/LTC03I.003 Other		
Product Name:	Mutual of Omaha - 2016/2017 LTCi Rate Increase		
Project Name/Number:	2016/2017 LTCi/		

Reviewer Note

Created By:

Janet Houser on 04/28/2017 10:08 AM

Last Edited By:

Janet Houser

Submitted On:

11/30/2017 10:32 AM

Subject:

Act Review

Comments:

4.28.17 -sent to KornFerry; due date 5.12.17

6.28.17 - add'l info needed

8.7.17 - add'l info rec'd; due date 8.21.17

8.27.17 - add'l info needed

9.14.17 - add'l info rec'd; due date 9.28.17

9.20.17 - missing info needed

9.24.17 - recommend approval for reduced amount

10.2.17 - question on report/ due date 10.16.17

10.4.17 - response rec'd

State:	Virginia	Filing Company:	Mutual of Omaha Insurance Company
TOI/Sub-TOI:	LTC03I Individual Long Term Care/LTC03I.003 Other		
Product Name:	Mutual of Omaha - 2016/2017 LTCi Rate Increase		
Project Name/Number:	2016/2017 LTCi/		

Attachment Copy of LossRatioCalcForRI (2).xlsx is not a PDF document and cannot be reproduced here.

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June 28, 2017

MEMORANDUM

Subject: Mutual of Omaha Insurance Company
LTC Rate Filing: MUTA-130706482

Dear Ms. Houser:

Thank you for the above filing on May, 17, 2017. This filing concerns pre-Rate Stability ("**pre-RS**") policies and post-Rate Stability ("**post-RS**") policies.

It appears that all five policy forms have policies that were issued pre-RS and that at least three policy forms may have policies that were issued post-RS. Thus, if the prior statement is correct, all five policy forms have regulatory requirements on a pre-RS basis, and at least three policy forms have regulatory requirements on a post-RS basis.

In addition, if policies have various premium-payment-periods, these "classes" should not be combined but must be separated. Further, if these policy forms provide for a survivorship benefit (where an individual's policy may become paid-up based on the prior death of their spouse), these policies should also be separated based on these classes. For example, if there are lifetime-paying policies, some with survivorship and some without survivorship, please separate these two classes.

Please respond to the following:

- 1) A) Please present a table for the five policy forms. This table should be separated for pre-RS and post-RS, and be separated for policies with a lifetime ("**LT**") Benefit Period ("**BP**") and a Non-LT BP (since Mutual desires to separate the rate increase for those with and without a LT BP). For each class, please indicate the number of policies and annualized premium in-force, in addition to the Loss Ratio ("**L/R**") and any modification for adverse experience ("**MAE**"). For post-RS policies, please make sure the L/R includes the MAE. Please do not combine the classes. We will refer to this as Table1.

- B) From Table 1, please weight the L/R's by the inception-to-date earned premium. There should be at least 4 average L/R's (more if there are various premium-payment-periods or survivorship options). Please measure any rate increase using these average L/R's. If any experience L/R is below the minimum for that class, the "margin" will be used to offset any rate increase.

The following refers to the Actuarial Memorandum:

- 2) Section 3: This section states, more than once, that current claim expectations are worse than was originally projected. Please compare the current claim expectations to the expected claims as of the most recent rate increase.
- 3) Section 5
- A) Lapse: The lapse rates on page 2 appear to have an average 1.5% or less (the total lapse rate is not indicated). In the answer provided to Objection 1, an average lapse rate provided is 3.5% (1-1551/1608). Please recalculate the lapse rates for this table, using best-estimates. Also, please indicate the overall lapse rate.
- B) Morbidity: This section states that Milliman's claim costs were used for projecting Mutual's claim costs. Please recalculate claim costs using Mutual experience data. Where Mutual data is not credible, please use Milliman's claim costs to enhance the shape of Mutual's claim cost curve.
- C) Please adjust the L/R exhibits to reflect a rate increase that begins no sooner than 2018.
- 4) Section 7: This Section states that the minimum L/R is 60%. For pre-RS, this is the minimum regulatory requirement. For post-RS there is no minimum L/R. For each policy form, the minimum is the filed L/R, modified by the actual sales distribution if greater. For the post-RS block, the MAE is added to this minimum. Please re-state. If a policy form has had a rate increase, the L/R may have changed. You may wish to refer to Table 1.
- 5) Section 9:
- A) This section refers to L/R calculations. Please file these in an unprotected Excel workbook.
- B) For historical data, when separate years are filed, for example: Exhibit 6, for a given historical year, the incurred claims do not match. For historical incurred claims, please use the current best-estimate.
- C) For the pre-RS blocks, when illustrating the L/R calculation, please provide a column with the contract reserve (that is, the active life reserve) for each year.
- D) When using the 58%/85% L/R test, use of the 58% indicates that you wish to lower the initial L/R to 58%, including historic premiums. For each class, rather than 58%, please use the average L/R in item 1.B).

The following refers to Objection 4, Item 3b:

- 6) This response states that policyholders may elect to drop their inflation protection. Please confirm that, if they do elect to drop their inflation protection, they may continue their benefits at the current level.

Thank you for your time. I look forward to your response.

Sincerely,

Robert W. Darnell, ASA, MAAA
robert.darnell@kornferryassociates.com
817.404.9060

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August 27, 2017

MEMORANDUM

Subject: Mutual of Omaha Insurance Company
LTC Rate Filing: MUTA-130706482

Dear Ms. Houser:

The Virginia Bureau of Insurance (“**VA BOI**”) sent an Objection Letter to Mutual of Omaha (“**MoO**”) on June 29, 2017. Your Objection letter contains 6 specific objections. Items 4 and 5 are specifically actuarial in nature. MoO responded to your Objection letter on August 2, 2017.

You have reported that the Bureau does not generally ask companies to segregate the business based on the expected premium-payment-period. I think that if MoO provides the following, it will take care of most of the material issues.

The following are suggested questions for MoO as a response to their August 4, 2017 response:

Thank you for your response of August 4, 2017.

I think we have a simpler way of calculating the rate increase. For each L/R calculation, please do not include any policies that are paid-up. Please respond to the following:

For calculating the Loss Ratio (“**L/R**”), policies need to be separated into blocks: Pre-Rate Stability (“**Pre-RS**”) and Post-Rate Stability (“**Post-RS**”). For the Post-RS block, please use the statutory maximum valuation interest rate for the any L/R calculations.

Please calculate the average expected L/R for each block (for the Post-RS block, please include the MAE). Please use historical data and projected values for what is expected using the old assumptions. Please use historical data and projected values for what is now expected using the new assumptions. For the last L/R calculation, it would help if you could add four columns: 1) the rate increase percentage, 2) the additional premium from the rate increase, 3) the total premium, and 4) the ALR (the ALR will not be a component of the L/R. For the Post-RS block, if the rate increase will trigger the contingent benefit upon lapse, in accordance with 14VAC5-200-153.B.b, please disclose how reserves have been incorporated in this rate increase.

To validate the rate increase, please use the 60%/80% L/R test for the Pre-RS block and the 58%/85% L/R Test for the Post RS block.

In the 60%/80% test, rather than 60% please use the greater of 60% or the Expected L/R. For the 80%, please use the greater of 80% or the Expected L/R. In the 58%/85% test, rather than 58% please use the greater of 58% or the Expected L/R (with the MAE). For the 85%, please use the greater of 85% or the Expected L/R (with the MAE). To use a L/R percentage that is lower the pricing L/R implies that MoO intends to lower the L/R for all past and future initial premiums. This is not fair to the policyholder.

Please include all L/R calculations in an Excel workbook, illustrating all formulas. There is no need to include a pdf of each L/R.

Thank you for your time. I look forward to your response.

Thank you for your help, Janet.

Sincerely,

Robert W. Darnell, ASA, MAAA
robert.darnell@kornferryassociates.com
817.404.9060

October 4, 2017

Mr. Robert F. Grissom
Chief Insurance Market Examiner for Market Regulation, Life and Health Division
Bureau of Insurance
Virginia State Corporation Commission
P.O. Box 1157
Richmond, VA 23218

Re: Long-Term Care Rate Increase Filing – Mutual of Omaha – MUTA-130706482

Dear Mr. Grissom:

MUTA-0139706482 covers five policy forms (LT50, NH50, HCA, NHA and LTA). Policies were issued under all five forms prior to enactment of Rate Stability. Three of the policy forms (NHA, LTA and HCA – the HCA policy was not sold in Virginia) continued sales after the enactment of Rate Stability. Varying by the particular form, Pre-Rate Stability sales began in either 1997 or 1998. All Post-Rate Stability forms discontinued sales in 2004.

The rate increase request is based on nationwide data. The Virginia data has little credibility (in-force annualized premium in Virginia is less than 5% of the nationwide total).

Recommendation

For all policy forms, Mutual of Omaha requested a rate increase only for policies with an unlimited benefit period. The requested rate increase is for 30% now, and an additional 15% one year later. A total increase of 49.5%. For all policies, the first rate increase averages 16.7% and the second rate increase averages 9.3%. This is average of 27.6% for both rate increases.

There are two caveats regarding this requested rate increase:

- 1) While the historical morbidity actual-to-expected ratio is 99%, the rate increase is based on expected future claim cost increases without historical evidence
- 2) For the Unlimited Benefit Period policies, the lapse rate actual-to-expected ratio is over 100% for all individuals with an attained age of 70 or older. Please see the **Note:** on page 5 regarding the understatement of lapse rates for the projection.

Since there is no historical evidence that the claim costs are incorrect, and since older age lapse rates are understated for attained ages 70 and older, where they are most important, I am somewhat skeptical about the need for a rate increase. However, I realize that postponing a necessary rate increase can be very disadvantageous. I recommend approving at least 50% of this requested rate increase.

In an effort to mitigate the rate increase, policyholders may:

- Decrease the Benefit Period
- Increase the Elimination Period
- Remove the Inflation Protection benefit.

Policyholders may also accept the Contingent Benefit Upon Lapse offer and discontinue paying premiums.

Mutual of Omaha will not offer a “Landing Spot.”

Loss Ratios

For the requested rate Increase (“RI”), Loss Ratios are as follows:

Table 1A. Nationwide Loss Ratios

Description	Limited Benefit Period	Unlimited Benefit Period		All Benefit Periods	
		Before RI	After RI	Before RI	After RI
Pre-Rate Stability					
Historical	52.7%	65.1%	65.1%	60.2%	60.2%
Future	299.0%	440.8%	313.4%	385.3%	308.9%
Total	104.7%	145.2%	133.6%	129.2%	122.8%
Post-Rate Stability					
Historical	35.4%	45.2%	45.2%	41.1%	41.1%
Future	321.2%	482.2%	342.8%	418.1%	335.9%
Total	109.2%	166.3%	149.5%	142.6%	133.8%

Nationwide Loss Ratios use experience through 12/31/2016.

Table 1B. Virginia Loss Ratios

Description	Limited Benefit Period	Unlimited Benefit Period		All Benefit Periods	
		Before RI	After RI	Before RI	After RI
Pre-Rate Stability					
Historical	38.9%	46.9%	46.9%	43.5%	43.5%
Future	248.6%	382.0%	270.0%	328.1%	263.0%
Total	89.0%	130.4%	118.2%	113.3%	106.8%
Post-Rate Stability					
Historical	Loss Ratios Not Provided				
Future					
Total					

Virginia Loss Ratios use experience through 12/31/2015.

Previous rate increases have been requested and approved. Table 2 illustrates the expected Lifetime Loss Ratios for the original rate filing, the most recent rate increase filing, and the current rate increase filing.

Table 2. Lifetime Loss Ratio

Era	Benefit Period	Rate Filing		
		Original	Prior	Current
Pre-Rate Stability				
Pre	Limited	63.0%	104.8%	104.7%
	Unlimited	62.8%	108.5%	133.6%
	Total	62.9%	107.1%	122.8%
Post-Rate Stability				
Post	Limited	68.7%	102.6%	109.2%
	Unlimited	69.0%	108.0%	149.5%
	Total	68.9%	105.8%	133.8%

Post-Rate Stability Loss Ratios all include the Margin for Adverse Experience.

Table 2 illustrates that, for the Unlimited Benefit Period, the expected Lifetime Loss Ratio has increased with each successive filing. For the Limited Benefit Period, the Loss Ratio has been fairly stable since the prior rate filing.

Mutual of Omaha has also calculated Loss Ratios as of 12/31/2016. Table 3 illustrates the expected loss ratio on 12/31/2016 using assumptions from the initial rate filing and the previous rate increase filing. Table 3 also illustrates the historical Loss Ratio for the current rate increase filing.

Table 3. Loss Ratio at 12/31/2016

Era	Benefit Period	Rate Filing	
		Original	Current
Pre-Rate Stability			
Pre	Limited	56.2%	52.7%
	Unlimited	56.3%	65.1%
	Total	56.3%	60.2%
Post-Rate Stability			
Post	Limited	59.6%	35.4%
	Unlimited	60.3%	45.2%
	Total	60.0%	41.1%

Original Post-Rate Stability Loss Ratios include the Margin for Adverse Experience.

Table 3 illustrates that the historical loss ratios, through 12/31/2016, have generally been more favorable than was anticipated by the original rate filing.

Policyholder Data

The following values were on 12/31/2016:

<u>Policyholders</u>	<u>Virginia</u>	<u>Nationwide</u>
Limited Benefit Periods	838	16,798
Unlimited Benefit Periods	713	16,675
Total	1,551	33,473
<u>Annualized Premium</u>	<u>Virginia</u>	<u>Nationwide</u>
Limited Benefit Periods	1,514,356	31,134,352
Unlimited Benefit Periods	1,880,410	47,487,573
Total	3,394,766	78,521,925

Minimum Lifetime Loss Ratio

For Pre-Rate Stability policies, 14VAC5-200-150.B specifically states, "... the expected loss ratio is the greater of 60% or the lifetime loss ratio used in the original pricing applied to the current rate schedule plus: (i) 80% applied to any premium rate increase for individual policy forms or" Policies with an unlimited benefit period passed this test. The total of all Pre-Rate Stability policies (policies with unlimited benefit periods plus policies with limited benefit periods) passed this test as well, meaning that the experience of the policies with a limited benefit period did not limit the rate increase for the policies with an unlimited benefit period.

For Post-Rate Stability policies, 14VAC5-200-153.C is a bit lengthier but essentially states that initial premiums should meet a 58% loss ratio and that increased premiums should meet an 85% loss ratio." Policies with an unlimited benefit period passed this test. The total of all Pre-Rate Stability policies (policies with unlimited benefit periods plus policies with limited benefit periods) passed this test as well, meaning that the experience of the policies with a limited benefit period did not limit the rate increase for the policies with an unlimited benefit period.

From Table 2, above, and as submitted by Mutual of Omaha, the initial loss ratios were increased by prior rate increase filings. Although the regulations are silent regarding this situation, it may make sense that a lower loss ratio (lower than in the prior rate increase) is not allowed because it is unfair to the policyholder to lower a loss ratio. If the loss ratio cannot decrease, then the higher loss ratio from the prior rate increase is used in the Loss Ratio Test. The Pre-Rate Stability filings and the Post-Rate Stability filings both passed this test as well. In addition to the unlimited benefit periods passing the tests, the total of all benefit periods also passed the test.

In a final test, the sum of 1) plus 2) is compared to 3), where:

- 1) Is the Contract Reserve
- 2) Is the Present Value of Future Premiums
- 3) Is the Present Value of Future Claims

The situation where 1) + 2) is greater than 3) is desired. For Mutual of Omaha, for the Pre-Rate Stability and the Post-Rate Stability filings, for each of the Benefit Periods (Limited, Unlimited and All), this does

not occur until after the year 2065. After the year 2073, there are no projected values for any of this block of business.

Thus, the rate increase appears justified with:

- 1) A strict interpretation of the regulations
- 2) When the regulations are viewed that prior loss ratios cannot be decreased
- 3) When the Contract Reserve is considered to pay the future claims.

Average Premium Per In-force Policy

Average Annual Premium	Rate Increase		
	<u>Before</u>	<u>30% RI</u>	<u>15% RI</u>
Virginia			
Limited Benefit Period	1,807	1,807	1,807
Unlimited Benefit Period	2,637	3,428	3,942
Nationwide			
Limited Benefit Period	1,853		1,853
Unlimited Benefit Period	2,848		3,275

Reason for the Rate Increase

Mutual of Omaha states they are requesting an increase due to an expected increase in future morbidity. The expected increase is from Milliman's 2011 Claim Guidelines.

Rate Increase History

Virginia	Date	Increase
All forms except LT50 and NH50	8/1/2007	29%
Limited Benefit Period	5/1/2013	20%
	5/1/2014	4.1%
Unlimited Benefit Period	5/1/2013	30%
	5/1/2014	20%
Nationwide		
All forms except LT50 and NH50	10/1/2003	29%
Limited Benefit Period	10/1/2011	15%
Unlimited Benefit Period	10/1/2011	30%
	10/1/2012	11.5%
	5/1/2015	30%
	5/1/2016	15%

This requested rate increase is intended to be equivalent to the 5/1/2015 and 5/1/2016 Nationwide rate increases (the 2015 Rate Increases).

For the 2015 Rate Increases, 39 states have made a decision, with Virginia, Florida, Hawaii and Rhode Island still pending. For the 30% rate increase, 38 states have approved an average rate

increase of 23.9%. For the 15% rate increase, 7 states have approved an average rate increase of 12%.

Assumptions

Mortality

Prior Assumption – Not indicated.

New Assumption – Annuity 200 Basic table. Selection factors grade from 40% to 100% over a 12 year period.

Actual-to-Expected Analysis – Actual deaths compared to new assumption death rates produces an actual-to-expected rate of 93%.

Lapse

Prior Assumptions – Not indicated.

New Assumptions – Mutual of Omaha reports lapses for Limited and Unlimited Benefit Periods, Married and Single Individuals, and policies with and without Inflation Protection, by issue age band, for ultimate durations. Mutual of Omaha includes 20 years of mortality improvements. Mutual of Omaha reports actual-to-expected ratios for durations 8+, rather strange when all policies are over 10 years old.

Note: Lapse rates for the policies receiving a rate increase are separated by Marital Status and Inflation Protection option. Attained ages 70 and older are divided in age bands: 70-74, 75-79 and 80+. For all combinations, the projected lapse rates are understated. The actual-to-expected ratio ranges from 105% to 149%. Mutual of Omaha does not provide an attained age distribution. Because claim costs increase rapidly for ages above 75, lapse rates at these ages are a significant input item to the overall claim expense. It is difficult to estimate how material these understated lapse rates may be.

Morbidity

Prior Assumptions – Milliman assumptions prior to the 2014 Claim Guidelines.

New Assumptions – Milliman 2014 Claim Cost Guidelines. Mutual of Omaha explains the original claim costs were higher than expected and that the 2014 Guidelines have steeper claim cost curves than did the original claim costs. Mutual of Omaha states that they rely on Milliman for assumption updates and that the Mutual of Omaha claim costs align well with Milliman's 2011 claim costs. Mutual of Omaha includes 20 years of morbidity improvement.

Mutual of Omaha reports that the Milliman claim costs are the industry standard. Milliman has collected claim costs from various companies who are willing to share their data. Some companies choose not to share all of their data but share only older data that the company does not regard as material to their current claim costs. The industry table is produced by the Society of Actuaries: the 2000-2011 Long-Term Care Intercompany Experience Study. Mutual of Omaha did not

compare their results with the SOA study and they did not compare their new projected claim costs with the SOA Study.

Mutual of Omaha reports that historical claims have an actual-to-expected ratio of 99% through 12/31/2015.

Mutual of Omaha states that the assumptions used in the development of the lifetime loss ratio projections are their current best estimate and do not include any conservatism.

Mutual of Omaha does not state whether the new assumptions are used for their Gross Premium Valuation or the asset adequacy analysis.

Post-Rate Stability filings include a 10% claim Margin for Adverse Experience.

This filing does not address any assumption changes due to this rate increase.

Comparison to Current New Business Premium Rates

This filing does not include a comparison of the proposed premium rates to the current new business premium rates.

Reliances and Limitations

I relied upon information provided by the Mutual of Omaha Insurance Company. The information was not verified, but it was reviewed for consistency and reasonableness. If any information was incorrect, it may require the information in this report to be revised, including any conclusions and opinions.

The purpose of this document is to communicate the review of this filing to the Virginia Bureau of Insurance. This document was prepared for, and is only to be relied upon by, the Virginia Bureau of Insurance. This report has been prepared in conformity with its intended utilization by persons technically competent in the areas addressed and for the stated purposes only. Judgments as to the data and conclusions contained in this document should be made only after studying this document in its entirety, because conclusions reached by a review of isolated sections may be incorrect.

The review of this filing was performed according to 14VAC5-200. Applicable Actuarial Standards of Practice were considered, including Actuarial Standard of Practice No. 18, "Long-Term Care Insurance" and Actuarial Standard of Practice No. 8, "Regulatory Filings for Rates and Financial Projections for Health Plans."

Qualifications

I, Robert W. Darnell, am a member of the American Academy of Actuaries. I meet the Academy's Qualification Standards for issuing this report.

From: [Robert Darnell](#)
To: [Janet Houser](#)
Subject: RE: MUTA - 130706482 Mutual of Omaha
Date: Wednesday, October 04, 2017 6:29:09 PM

Janet – Thank you for your question.

For this filing, there are two blocks of business: Pre-Rate Stability and Post-Rate Stability. Mutual of Omaha used 4.5% for accumulating/discounting both blocks. I used 4.5% to present-value the following. The present values are as of the valuation date, 12/31/2016, and assume the entire requested rate increase is approved:

For the Pre-Rate Stability, 31% of premium is to be collected after the valuation date.

For the Post-Rate Stability block, 25% of premium is to be collected after the valuation date.

In the values below, please remember that the increased premium includes premium for the requested rate increase and any prior rate increase.

Pre-Rate Stability

	Premium			
	Original	Increased	Total	
Past	1,342,824,692	221,984,433	1,564,809,125	75%
Future	237,236,707	288,686,262	525,922,969	25%
Total	1,580,061,399	510,670,695	2,090,732,095	100%

Post-Rate Stability

	Premium			
	Original	Increased	Total	
Past	77,068,814	18,897,639	95,966,453	69%
Future	19,737,974	24,371,896	44,109,870	31%
Total	96,806,788	43,269,535	140,076,323	100%

Please let me know if you have further questions.

Bob.

From: Janet Houser [mailto:Janet.Houser@scc.virginia.gov]

Sent: Wednesday, October 4, 2017 9:50 AM
To: Robert Darnell <darnells4@verizon.net>
Subject: RE: MUTA - 130706482 Mutual of Omaha

One more quick question, I hope. Can you tell me as a percentage how much premium remains to be earned on this policy?

From: Robert Darnell [<mailto:darnells4@verizon.net>]
Sent: Wednesday, October 04, 2017 9:39 AM
To: Janet Houser
Subject: RE: MUTA - 130706482 Mutual of Omaha

Hello, Janet.

I have addressed Bob's question regarding what has been approved nationwide. A majority of states have reached a decision regarding the rate increases. To the report, I have added two paragraphs to the end of the Rate Increase History section. See page 5.

Bob also asked , "... and to what we can reasonably assume?" With a majority of states having made a decision, I am not sure we need to make an assumption.

Bob also asked how the projections from the prior rate increase filing compares with actual experience. To answer this I have added language after Table 2, including the new Table 3. I also re-formatted Table 2. I think Table 2 now reads easier – especially for comparing results of the current and prior filings. See page 3.

Thank you for the questions. Please let me know if I can provide further assistance.

Bob.

From: Janet Houser [<mailto:Janet.Houser@scc.virginia.gov>]
Sent: Monday, October 2, 2017 6:25 AM
To: Robert Darnell (darnells4@verizon.net) <darnells4@verizon.net>
Subject: FW: MUTA - 130706482 Mutual of Omaha

Bob, please provide a response to the questions below no later than 10/16/17.

Thanks.

From: Bob Grissom
Sent: Friday, September 29, 2017 2:58 PM
To: Janet Houser
Subject: RE: MUTA - 130706482 Mutual of Omaha

If approved, how will the VA cumulative rate increase compare to what's been approved nationwide

to date; and to what we can reasonably assume?

How do the experience projections compare to those used to support the previously approved rate increase? If not, how and why have they changed?

From: Janet Houser
Sent: Monday, September 25, 2017 3:42 PM
To: Bob Grissom
Subject: FW: MUTA - 130706482 Mutual of Omaha

Please see attached. Bob Darnell is recommending approving half of the rate increase.

From: Robert Darnell [<mailto:darnells4@verizon.net>]
Sent: Monday, September 25, 2017 12:31 PM
To: Janet Houser
Subject: RE: MUTA - 130706482 Mutual of Omaha

Hi, Janet!

I have attached the report.

Bob.

From: Janet Houser [<mailto:Janet.Houser@scc.virginia.gov>]
Sent: Wednesday, September 20, 2017 11:50 AM
To: Robert Darnell <darnells4@verizon.net>
Subject: RE: MUTA - 130706482 Mutual of Omaha

Ok. That will work!

From: Robert Darnell [<mailto:darnells4@verizon.net>]
Sent: Wednesday, September 20, 2017 12:13 PM
To: Janet Houser
Subject: RE: MUTA - 130706482 Mutual of Omaha

By next Monday for sure!

From: Janet Houser [<mailto:Janet.Houser@scc.virginia.gov>]
Sent: Wednesday, September 20, 2017 10:25 AM
To: Robert Darnell <darnells4@verizon.net>
Subject: RE: MUTA - 130706482 Mutual of Omaha

So that means I'll be getting a report soon, right!!!!

From: Robert Darnell [<mailto:darnells4@verizon.net>]
Sent: Wednesday, September 20, 2017 11:22 AM

To: Janet Houser
Subject: RE: MUTA - 130706482 Mutual of Omaha

I apologize. I went through documenting the Loss ratios. Then went back looking for the ALR. I checked Attachments 7 and 8, then went back and checked Attachment 1.

It is all there.

Thanks for your help!

From: Janet Houser [<mailto:Janet.Houser@scc.virginia.gov>]
Sent: Wednesday, September 20, 2017 9:51 AM
To: Bob Darnell <darnells4@verizon.net>
Subject: RE: MUTA - 130706482 Mutual of Omaha

Bob, the company responded as follows:

The loss ratios, both with and without the requested rate increase, and statutory active life reserves are included in Attachment 3 – Current Assumptions (Pre) and Attachment 6 – Current Assumptions (Post). These exhibits are located in the sections labeled 09/08/2017 Response – Objection 3 (both pdf files and excel spreadsheets) under the Supporting Documentation tab.

If this isn't what you need, then please write up a suggested question to explain in detail what you want and I'll send it on.

Thanks!

From: Janet Houser
Sent: Wednesday, September 20, 2017 7:54 AM
To: Bob Darnell
Subject: RE: MUTA - 130706482 Mutual of Omaha

Too late!!! I already sent out an objection that state the following. If you think I should expand upon that, let me know; otherwise, I'll wait to hear from the company.

In our previous objection 3, the Company was asked to calculate the loss ratios and to include the requested rate increase and statutory active life reserves (ALR, the contract reserves). It does not appear this information was provided.

From: Bob Darnell [<mailto:darnells4@verizon.net>]
Sent: Wednesday, September 20, 2017 7:42 AM
To: Janet Houser
Subject: Re: MUTA - 130706482 Mutual of Omaha

Thanks, Janet. Do you me to write a suggested question?

On Sep 20, 2017, at 5:57 AM, Janet Houser <Janet.Houser@scc.virginia.gov> wrote:

It sounds as if I need to go back again and ask for that info which I will do. So

hold off on your write up for now.

Thanks.

From: Robert Darnell [<mailto:darnells4@verizon.net>]

Sent: Tuesday, September 19, 2017 10:43 PM

To: Janet Houser

Subject: RE: MUTA - 130706482 Mutual of Omaha

Hi, Janet! I hope you had a nice week off!

In the last question set you sent Mutual of Omaha, we asked them to calculate the Loss Ratios, and to include the requested rate increase and the statutory active life reserve (ALR, the contract reserve). They didn't provide either of these.

The statutory ALR will be used to check when the $ALR + PVFP > PVFC$.

Where:

PVFP = {Present Value of Future Premiums

PVFC = Present Value of Future Claims

When the $ALR + PVFP$ is greater than the PVFC, they have enough assets to fund the claims. Using this, we may be able to lower the RL.

To make this check, we need the ALR, which only they can provide. We ask they include the requested rate increase so that we can change the percentage to work with the ALR and see what they really need.

Your note, below, apparently asks for the final write-up. Do you want to skip the part about the ALR?

Thanks, Janet!

Bob.

From: Janet Houser [<mailto:Janet.Houser@scc.virginia.gov>]

Sent: Thursday, September 14, 2017 9:55 AM

To: Robert Darnell (darnells4@verizon.net) <darnells4@verizon.net>

Subject: MUTA - 130706482 Mutual of Omaha

The company has responded to your request for additional information. Please provide your analysis and recommendations no later than 9/28/2017.

Thanks.

Janet

From: [Robert Darnell](#)
To: [Janet Houser](#)
Subject: RE: MUTA - 130706482 Mutual of Omaha
Date: Tuesday, September 19, 2017 10:43:29 PM

Hi, Janet! I hope you had a nice week off!

In the last question set you sent Mutual of Omaha, we asked them to calculate the Loss Ratios, and to include the requested rate increase and the statutory active life reserve (ALR, the contract reserve). They didn't provide either of these.

The statutory ALR will be used to check when the $ALR + PVFP > PVFC$.

Where:

PVFP = {Present Value of Future Premiums

PVFC = Present Value of Future Claims

When the $ALR + PVFP$ is greater than the PVFC, they have enough assets to fund the claims. Using this, we may be able to lower the RI.

To make this check, we need the ALR, which only they can provide. We ask they include the requested rate increase so that we can change the percentage to work with the ALR and see what they really need.

Your note, below, apparently asks for the final write-up. Do you want to skip the part about the ALR?

Thanks, Janet!

Bob.

From: Janet Houser [mailto:Janet.Houser@scc.virginia.gov]
Sent: Thursday, September 14, 2017 9:55 AM
To: Robert Darnell (darnells4@verizon.net) <darnells4@verizon.net>
Subject: MUTA - 130706482 Mutual of Omaha

The company has responded to your request for additional information. Please provide your analysis and recommendations no later than 9/28/2017.

Thanks.

Janet

September 24, 2017

Mr. Robert F. Grissom
Chief Insurance Market Examiner for Market Regulation, Life and Health Division
Bureau of Insurance
Virginia State Corporation Commission
P.O. Box 1157
Richmond, VA 23218

Re: Long-Term Care Rate Increase Filing – Mutual of Omaha – MUTA-130706482

Dear Mr. Grissom:

MUTA-0139706482 covers five policy forms (LT50, NH50, HCA, NHA and LTA). Policies were issued under all five forms prior to enactment of Rate Stability. Three of the policy forms (NHA, LTA and HCA – the HCA policy was not sold in Virginia) continued sales after the enactment of Rate Stability. Varying by the particular form, Pre-Rate Stability sales began in either 1997 or 1998. All Post-Rate Stability forms discontinued sales in 2004.

The rate increase request is based on nationwide data. The Virginia data has little credibility (in-force annualized premium in Virginia is less than 5% of the nationwide total).

Recommendation

For all policy forms, Mutual of Omaha requested a rate increase only for policies with an unlimited benefit period. The requested rate increase is for 30% now, and an additional 15% one year later. A total increase of 49.5%. For all policies, the first rate increase averages 16.7% and the second rate increase averages 9.3%. This is average of 27.6% for both rate increases.

There are two caveats regarding this requested rate increase:

- 1) While the historical morbidity actual-to-expected ratio is 99%, the rate increase is based on expected future claim cost increases without historical evidence
- 2) For the Unlimited Benefit Period policies, the lapse rate actual-to-expected ratio is over 100% for all individuals with an attained age of 70 or older. Please see the **Note:** on page 5 regarding the understatement of lapse rates for the projection.

Since there is no historical evidence that the claim costs are incorrect, and since older age lapse rates are understated for attained ages 70 and older, where they are most important, I am somewhat skeptical about the need for a rate increase. However, I realize that postponing a necessary rate increase can be very disadvantageous. I recommend approving at least 50% of this requested rate increase.

In an effort to mitigate the rate increase, policyholders may:

- Decrease the Benefit Period
- Increase the Elimination Period
- Remove the Inflation Protection benefit.

Policyholders may also accept the Contingent Benefit Upon Lapse offer and discontinue paying premiums.

Mutual of Omaha will not offer a “Landing Spot.”

Loss Ratios

For the requested rate Increase (“RI”), Loss Ratios are as follows:

Table 1A. Nationwide Loss Ratios

Description	Limited Benefit Period	Unlimited Benefit Period		All Benefit Periods	
		Before RI	After RI	Before RI	After RI
Pre-Rate Stability					
Historical	52.7%	65.1%	65.1%	60.2%	60.2%
Future	299.0%	440.8%	313.4%	385.3%	308.9%
Total	104.7%	145.2%	133.6%	129.2%	122.8%
Post-Rate Stability					
Historical	35.4%	45.2%	45.2%	41.1%	41.1%
Future	321.2%	482.2%	342.8%	418.1%	335.9%
Total	109.2%	166.3%	149.5%	142.6%	133.8%

Nationwide Loss Ratios use experience through 12/31/2016.

Table 1B. Virginia Loss Ratios

Description	Limited	Unlimited Benefit Period		All Benefit Periods	
	Benefit Period	Before RI	After RI	Before RI	After RI
Pre-Rate Stability					
Historical	38.9%	46.9%	46.9%	43.5%	43.5%
Future	248.6%	382.0%	270.0%	328.1%	263.0%
Total	89.0%	130.4%	118.2%	113.3%	106.8%
Post-Rate Stability					
Historical	Loss Ratios Not Stated				
Future					
Total					

Virginia Loss Ratios use experience through 12/31/2015.

Previous rate increases have been requested and approved. Loss Ratios for the original rate filing, the most recent rate increase filing, and the current filing re as follows:

Table 2. Loss Ratio Increases

Filing	Benefit Period		
	Limited	Unlimited	All
Pre-Rate Stability			
Initial Rate	63.0%	62.8%	62.9%
Prior RI	104.8%	108.5%	107.1%
Current RI	104.7%	133.6%	122.8%
Post-Rate Stability			
Initial Rate	68.7%	69.0%	68.9%
Prior RI	102.6%	108.0%	105.8%
Current RI	109.2%	149.5%	133.8%

Post-Rate Stability Loss Ratios all include the Margin for Adverse Experience.

Policyholder Data

The following values were on 12/31/2016:

<u>Policyholders</u>	<u>Virginia</u>	<u>Nationwide</u>
Limited Benefit Periods	838	16,798
Unlimited Benefit Periods	713	16,675
Total	1,551	33,473

<u>Annualized Premium</u>	<u>Virginia</u>	<u>Nationwide</u>
Limited Benefit Periods	1,514,356	31,134,352
Unlimited Benefit Periods	1,880,410	47,487,573
Total	3,394,766	78,521,925

Minimum Lifetime Loss Ratio

For Pre-Rate Stability policies, 14VAC5-200-150.B specifically states, "... the expected loss ratio is the greater of 60% or the lifetime loss ratio used in the original pricing applied to the current rate schedule plus: (i) 80% applied to any premium rate increase for individual policy forms or" Policies with an unlimited benefit period passed this test. The total of all Pre-Rate Stability policies (policies with unlimited benefit periods plus policies with limited benefit periods) passed this test as well, meaning that the experience of the policies with a limited benefit period did not limit the rate increase for the policies with an unlimited benefit period.

For Post-Rate Stability policies, 14VAC5-200-153.C is a bit lengthier but essentially states that initial premiums should meet a 58% loss ratio and that increased premiums should meet an 85% loss ratio." Policies with an unlimited benefit period passed this test. The total of all Pre-Rate Stability policies (policies with unlimited benefit periods plus policies with limited benefit periods) passed this test as

well, meaning that the experience of the policies with a limited benefit period did not limit the rate increase for the policies with an unlimited benefit period.

From Table 2, above, and as submitted by Mutual of Omaha, the initial loss ratios were increased by prior rate increase filings. Although the regulations are silent regarding this situation, it may make sense that a lower loss ratio (lower than in the prior rate increase) is not allowed because it is unfair to the policyholder to lower a loss ratio. If the loss ratio cannot decrease, then the higher loss ratio from the prior rate increase is used in the Loss Ratio Test. The Pre-Rate Stability filings and the Post-Rate Stability filings both passed this test as well. In addition to the unlimited benefit periods passing the tests, the total of all benefit periods also passed the test.

In a final test, the sum of 1) plus 2) is compared to 3), where:

- 1) Is the Contract Reserve
- 2) Is the Present Value of Future Premiums
- 3) Is the Present Value of Future Claims

The situation where 1) + 2) is greater than 3) is desired. For Mutual of Omaha, for the Pre-Rate Stability and the Post-Rate Stability filings, for each of the Benefit Periods (Limited, Unlimited and All), this does not occur until after the year 2065. After the year 2073, there are no projected values for any of this block of business.

Thus, the rate increase appears justified with:

- 1) A strict interpretation of the regulations
- 2) When the regulations are viewed that prior loss ratios cannot be decreased
- 3) When the Contract Reserve is considered to pay the future claims.

Average Premium Per In-force Policy

Average Annual Premium	Rate Increase		
	<u>Before</u>	<u>30% RI</u>	<u>15% RI</u>
Virginia			
Limited Benefit Period	1,807	1,807	1,807
Unlimited Benefit Period	2,637	3,428	3,942
Nationwide			
Limited Benefit Period	1,853		1,853
Unlimited Benefit Period	2,848		3,275

Reason for the Rate Increase

Mutual of Omaha states they are requesting an increase due to an expected increase in future morbidity. The expected increase is from Milliman's 2011 Claim Guidelines.

Rate Increase History

Virginia	Date	Increase
All forms except LT50 and NH50	8/1/2007	29%
Limited Benefit Period	5/1/2013	20%

	5/1/2014	4.1%
Unlimited Benefit Period	5/1/2013	30%
	5/1/2014	20%
Nationwide		
All forms except LT50 and NH50	10/1/2003	29%
Limited Benefit Period	10/1/2011	15%
Unlimited Benefit Period	10/1/2011	30%
	10/1/2012	11.5%
	5/1/2015	30%
	5/1/2016	15%

This requested rate increase is intended to be equivalent to the 5/1/2015 and 5/1/2016 Nationwide rate increases.

Assumptions

Mortality

Prior Assumption – Not indicated.

New Assumption – Annuity 200 Basic table. Selection factors grade from 40% to 100% over a 12 year period.

Actual-to-Expected Analysis – Actual deaths compared to new assumption death rates produces an actual-to-expected rate of 93%.

Lapse

Prior Assumptions – Not indicated.

New Assumptions – Mutual of Omaha reports lapses for Limited and Unlimited Benefit Periods, Married and Single Individuals, and policies with and without Inflation Protection, by issue age band, for ultimate durations. Mutual of Omaha includes 20 years of mortality improvements. Mutual of Omaha reports actual-to-expected ratios for durations 8+, rather strange when all policies are over 10 years old.

Note: Lapse rates for the policies receiving a rate increase are separated by Marital Status and Inflation Protection option. Attained ages 70 and older are divided in age bands: 70-74, 75-79 and 80+. For all combinations, the projected lapse rates are understated. The actual-to-expected ratio ranges from 105% to 149%. Mutual of Omaha does not provide an attained age distribution. Because claim costs increase rapidly for ages above 75, lapse rates at these ages are a significant input item to the overall claim expense. It is difficult to estimate how material these understated lapse rates may be.

Morbidity

Prior Assumptions – Milliman assumptions prior to the 2014 Claim Guidelines.

New Assumptions – Milliman 2014 Claim Cost Guidelines. Mutual of Omaha explains the original claim costs were higher than expected and that the 2014 Guidelines have steeper claim cost curves than did the original claim costs. Mutual of Omaha states that they rely on Milliman for assumption updates and that the Mutual of Omaha claim costs align well with Milliman's 2011 claim costs. Mutual of Omaha includes 20 years of morbidity improvement.

Mutual of Omaha reports that the Milliman claim costs are the industry standard. Milliman has collected claim costs from various companies who are willing to share their data. Some companies choose not to share all of their data but share only older data that the company does not regard as material to their current claim costs. The industry table is produced by the Society of Actuaries: the 2000-2011 Long-Term Care Intercompany Experience Study. Mutual of Omaha did not compare their results with the SOA study and they did not compare their new projected claim costs with the SOA Study.

Mutual of Omaha reports that historical claims have an actual-to-expected ratio of 99% through 21/31/2015.

Mutual of Omaha states that the assumptions used in the development of the lifetime loss ratio projections are their current best estimate and do not include any conservatism.

Mutual of Omaha does not state whether the new assumptions are used for their Gross Premium Valuation or the asset adequacy analysis.

Post-Rate Stability filings include a 10% claim Margin for Adverse Experience.

This filing does not address any assumption changes due to this rate increase.

Comparison to Current New Business Premium Rates

This filing does not include a comparison of the proposed premium rates to the current new business premium rates.

Reliances and Limitations

I relied upon information provided by the Mutual of Omaha Insurance Company. The information was not verified, but it was reviewed for consistency and reasonableness. If any information was incorrect, it may require the information in this report to be revised, including any conclusions and opinions.

The purpose of this document is to communicate the review of this filing to the Virginia Bureau of Insurance. This document was prepared for, and is only to be relied upon by, the Virginia Bureau of Insurance. This report has been prepared in conformity with its intended utilization by persons technically competent in the areas addressed and for the stated purposes only. Judgments as to the data and conclusions contained in this document should be made only after studying this document in its entirety, because conclusions reached by a review of isolated sections may be incorrect.

The review of this filing was performed according to 14VAC5-200. Applicable Actuarial Standards of Practice were considered, including Actuarial Standard of Practice No. 18, "Long-Term Care Insurance"

and Actuarial Standard of Practice No. 8, “Regulatory Filings for Rates and Financial Projections for Health Plans.”

Qualifications

I, Robert W. Darnell, am a member of the American Academy of Actuaries. I meet the Academy’s Qualification Standards for issuing this report.

State: Virginia **Filing Company:** Mutual of Omaha Insurance Company
TOI/Sub-TOI: LTC03I Individual Long Term Care/LTC03I.003 Other
Product Name: Mutual of Omaha - 2016/2017 LTCi Rate Increase
Project Name/Number: 2016/2017 LTCi/

Post Submission Update Request Processed On 04/27/2017

Status: Allowed
Created By: Jeff LaFond
Processed By: Janet Houser
Comments:

General Information:

Field Name	Requested Change	Prior Value
Implementation Date Requested	On Approval	12/01/2016

Company Rate Information:

Company Name: Mutual of Omaha Insurance Company

Field Name	Requested Change	Prior Value
Overall % Indicated Change	71.500%	27.600%
Overall % Rate Impact	27.400%	27.600%
Written Premium Change for this Program	\$930803	\$970656
Number of Policy Holders Affected for this Program	1551	1608
Written Premium for this Program	\$3394766	\$3518967

State:	Virginia	Filing Company:	Mutual of Omaha Insurance Company
TOI/Sub-TOI:	LTC03I Individual Long Term Care/LTC03I.003 Other		
Product Name:	Mutual of Omaha - 2016/2017 LTCi Rate Increase		
Project Name/Number:	2016/2017 LTCi/		

Form Schedule

Lead Form Number: LT50								
Item No.	Schedule Item Status	Form Name	Form Number	Form Type	Form Action	Action Specific Data	Readability Score	Attachments
1	Approved 11/30/2017	Policy Adjustment Rider	0PE4M	CERA	Initial		57.600	0PE4M Policy Adjustment Rider.pdf
2	Filed 11/30/2017	Premium Notification Letter (1st increase)	0555A-VA-1	OTH	Initial			Form 0555A-VA-1.pdf
3	Filed 11/30/2017	Premium Notification Letter (2nd increase)	0555A-VA-2	OTH	Initial			Form 0555A-VA-2.pdf

Form Type Legend:

ADV	Advertising	AEF	Application/Enrollment Form
CER	Certificate	CERA	Certificate Amendment, Insert Page, Endorsement or Rider
DDP	Data/Declaration Pages	FND	Funding Agreement (Annuity, Individual and Group)
MTX	Matrix	NOC	Notice of Coverage
OTH	Other	OUT	Outline of Coverage
PJK	Policy Jacket	POL	Policy/Contract/Fraternal Certificate
POLA	Policy/Contract/Fraternal Certificate: Amendment, Insert Page, Endorsement or Rider	SCH	Schedule Pages

MUTUAL OF OMAHA INSURANCE COMPANY

3300 MUTUAL OF OMAHA PLAZA, OMAHA, NE 68175

POLICY ADJUSTMENT RIDER

You have elected to make a change to our long-term care policy's benefits. This change is documented below. Please attach this rider to your policy. The change you requested does not alter any other existing terms, conditions, or limitations of your policy.

All provisions of the policy which are not in conflict with the provisions of this rider apply to this rider.

INSURED: [NAME]
[ADDRESS]
[CITY, STATE ZIP]

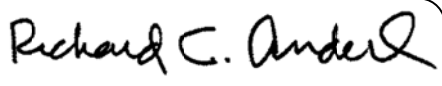
POLICY NUMBER: [POLNUM] EFFECTIVE DATE OF CHANGE: [DATE]

NEW POLICY PREMIUM: [\$AMOUNT] MODE: [MODE OF PAYMENT]

The changes shown below are made in the coverage of the policy specified above. These changes are made at your request. They take effect on the Effective Date of Change. With respect to any coverage that is provided under this rider, the following will be deemed to start on the Effective Date of Change: (a) any waiting periods specified for benefit payments; and (b) any periods which limit the exercise of any of our defenses.

[Benefit Change]

Mutual of Omaha Insurance Company


Corporate Secretary

0PE4M



[Month, Year]

[Name]

[Address]

[City, State, ZIP]

Dear [Name]:

Thank you for choosing Mutual of Omaha Insurance Company as your long-term care insurance provider. Your long-term care insurance policy from Mutual of Omaha Insurance Company continues to provide valuable coverage that may help you pay for long-term care services. Please keep in mind that your policy is guaranteed renewable for life. Your policy will be kept in force as long as you pay the required premiums. There is a need to increase premiums on certain policy forms. Rates are being raised on all policy forms like yours to pay for anticipated claims that are higher than expected. This is due in part to individuals living longer and keeping their policies longer, which has resulted in more claims being filed than we anticipated when this policy form was originally priced. As a result, premiums need to be adjusted to ensure there is adequate funding to pay current and anticipated future claims. This premium increase is designed to offset some of these anticipated costs and in no way reflects on the integrity of your policy, nor is it based on your individual claims history, age, health status, or any other personal factor. Please note that premium rates may increase again in the future. The following represents the premium change for your coverage.

The Virginia Bureau of Insurance has approved an increase of [Total Inc] for policyholders with the lifetime benefit period, which will be implemented over a two-year period. The following represents the [Year-1] premium change of [Inc Amt-1] for your coverage.

COVERAGE IDENTIFICATION	CURRENT [Mode] PREMIUM	NEW [Mode] PREMIUM	INCREASE AMOUNT	EFFECTIVE DATE
[CovID]	[\$CurPrem]	[\$New Prem]	[\$Difference]	[EffDate-1]

Your premiums will again increase to [Inc Prem-2] on [Eff Date-2], which reflects an additional increase in premium of [Inc Amt-2].

[WAIVER - Since your premiums are now being waived, no payments are due. However, when you are no longer on claim and the premiums are no longer being waived, your new premium will be the amount shown above.]

Please keep this notification of the change in premium for your Policy with your other important insurance documents. Send no money now as a new premium notice will be sent to you prior to the effective date shown above. If you pay premium through electronic funds transfer or payroll deduction, the organization that processes your payment will be notified of the new premium amount.

If you have paid premium beyond the effective date listed above you will be billed for any additional premium due.

We know an increase in premium is never welcomed news. You have the right to a revised premium rate or rate schedule upon request. You can revise your current benefit structure in an effort to lessen the impact of the requested rate increase. Adjusting the current benefits of your policy, by reducing the benefit period, increasing the elimination period, removing any optional riders, accept the contractual non-forfeiture benefit (if applicable), accepting the contingent benefit upon lapse (as summarized below), or decreasing the maximum daily benefit amount, can help keep your premium similar to what you currently pay. The enclosed benefit period Policy Adjustment Offer provides the details if you wish to reduce your benefit period. To accept this offer, simply sign the form and return it to us in the enclosed envelope. If you would like to change any other benefits, please sign and return the attached Coverage Adjustment Form. If you would like to explore these options in greater detail, please contact:

Customer Contact Center
1-877-845-0872

[Agent Name]
[Agent Phone#]

Please note that not all options available to reduce your premium are of equal value.

As a reminder, your policy is guaranteed renewable for life. This means you can continue your policy for as long as you live or until you have exhausted your policy benefits. Subject to the terms of your policy, we cannot cancel your policy as long as you pay the required premium when it is due. However, the premium for your policy can change again in the future. We will not increase premium due to a change in your age or health or your use of the long-term coverage. However, we can change premiums if we make the same change for all persons of the same class, but never more than once per year. Should there be future rate increases, options similar to those being offered now will be available in the future. These changes in benefits may be done at any time upon your request, not just at the time of a rate increase.

This rate increase request was reviewed by Virginia's State Corporation Commission and was found to be compliant with applicable Virginia laws and regulations addressing long-term care insurance. All premium rate filings are available for public inspection and may be accessed online through the Virginia Bureau of Insurance's webpage at www.scc.virginia.gov/BOI.

We hope you'll take a moment to consider the reason you purchased a long-term care insurance policy from Mutual of Omaha Insurance Company and why it's more important than ever to have this valuable protection. With our history of financial strength and our commitment to serving our customers, you can be confident we'll be there when you need us, just as we have for over a century.

Sincerely,

Signature Block

IMPORTANT INFORMATION ABOUT CONTINGENT BENEFIT UPON LAPSE

If you choose to cancel your long-term care policy, the non-forfeiture benefit provides you with a paid-up policy in lieu of your current policy. Your policy will include a **reduced Maximum Benefit Period** equal to the greater of:

- The sum of all premiums you have paid divided by the daily benefit amount of the policy in effect on the current paid-to-date of the policy, or
- For a period 30 days

In no event will the Maximum Benefit Period be less than 30 days or exceed the amount that would have been paid had premiums continued to be paid.

The current daily benefit amount of the policy, as it exists today, will be the daily benefit amount payable while you are on non-forfeiture status. No additional inflation increases will be applied once the non-forfeiture benefit is elected. Please note this benefit is available to you at no cost.

You have 120 days from the effective date of the rate increase to exercise this option and your policy must be paid through the rate increase effective date. If you are interested in exercising this option, please contact your agent or the Customer Care Center at the number previously provided. Please note that if the increased premium is not paid within 120 days of the effective date of the increase and the policy lapses, the contingent benefit upon lapse will be implemented automatically.



[Month, Year]

[Name]

[Address]

[City, State, ZIP]

Dear [Name]:

Thank you for choosing Mutual of Omaha Insurance Company as your long-term care insurance provider. Your long-term care insurance policy from Mutual of Omaha Insurance Company continues to provide valuable coverage that may help you pay for long-term care services. Please keep in mind that your policy is guaranteed renewable for life. Your policy will be kept in force as long as you pay the required premiums. There is a need to increase premiums on certain policy forms. Rates are being raised on all policy forms like yours to pay for anticipated claims that are higher than expected. This is due in part to individuals living longer and keeping their policies longer, which has resulted in more claims being filed than we anticipated when this policy form was originally priced. As a result, premiums need to be adjusted to ensure there is adequate funding to pay current and anticipated future claims. This premium increase is designed to offset some of these anticipated costs and in no way reflects on the integrity of your policy, nor is it based on your individual claims history, age, health status, or any other personal factor. Please note that premium rates may increase again in the future. The following represents the premium change for your coverage.

The Virginia Bureau of Insurance approved an increase of [Total Inc] for policyholders with the lifetime benefit period to be implemented over a two-year period. This is the second increase of the two-year increase. The following represents the [Year-2] premium change of [Inc Amt-2] for your coverage.

COVERAGE IDENTIFICATION	CURRENT [Mode] PREMIUM	NEW [Mode] PREMIUM	INCREASE AMOUNT	EFFECTIVE DATE
[CovID]	[\$CurPrem]	[\$New Prem]	[\$Difference]	[EffDate-2]

[WAIVER - Since your premiums are now being waived, no payments are due. However, when you are no longer on claim and the premiums are no longer being waived, your new premium will be the amount shown above.]

Please keep this notification of the change in premium for your Policy with your other important insurance documents. Send no money now as a new premium notice will be sent to you prior to the effective date shown above. If you pay premium through electronic funds transfer or payroll deduction, the organization that processes your payment will be notified of the new premium amount. If you have paid premium beyond the effective date listed above you will be billed for any additional premium due.

We know an increase in premium is never welcomed news. You have the right to a revised premium rate or rate schedule upon request. You can revise your current benefit structure in an effort to lessen the impact of the requested rate increase. Adjusting the current benefits of your policy, by reducing the benefit period, increasing the elimination period, removing any optional riders, accept the contractual non-forfeiture benefit (if applicable), accepting the contingent benefit upon lapse (as summarized below), or decreasing the maximum daily benefit amount, can help keep your premium similar to what you currently pay. The enclosed benefit period Policy Adjustment Offer provides the details if you wish to reduce your benefit period. To accept this offer, simply sign the form and return it to us in the enclosed envelope. If you would like to change any other benefits, please sign and return the attached Coverage Adjustment Form. If you would like to explore these options in greater detail, please contact:

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Signature Block

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- For a period 30 days

In no event will the Maximum Benefit Period be less than 30 days or exceed the amount that would have been paid had premiums continued to be paid.

The current daily benefit amount of the policy, as it exists today, will be the daily benefit amount payable while you are on non-forfeiture status. No additional inflation increases will be applied once the non-forfeiture benefit is elected. Please note this benefit is available to you at no cost.

You have 120 days from the effective date of the rate increase to exercise this option and your policy must be paid through the rate increase effective date. If you are interested in exercising this option, please contact your agent or the Customer Care Center at the number previously provided. Please note that if the increased premium is not paid within 120 days of the effective date of the increase and the policy lapses, the contingent benefit upon lapse will be implemented automatically.

State:	Virginia	Filing Company:	Mutual of Omaha Insurance Company
TOI/Sub-TOI:	LTC03I Individual Long Term Care/LTC03I.003 Other		
Product Name:	Mutual of Omaha - 2016/2017 LTCi Rate Increase		
Project Name/Number:	2016/2017 LTCi/		

Rate Information

Rate data applies to filing.

Filing Method:	SERFF
Rate Change Type:	Increase
Overall Percentage of Last Rate Revision:	43.500%
Effective Date of Last Rate Revision:	05/01/2014
Filing Method of Last Filing:	SERFF
SERFF Tracking Number of Last Filing:	

Company Rate Information

Company Name:	Overall % Indicated Change:	Overall % Rate Impact:	Written Premium Change for this Program:	Number of Policy Holders Affected for this Program:	Written Premium for this Program:	Maximum % Change (where req'd):	Minimum % Change (where req'd):
Mutual of Omaha Insurance Company	71.500%	27.400%	\$930,803	1,551	\$3,394,766	49.500%	0.000%

SERFF Tracking #:

MUTA-130706482

State Tracking #:

MUTA-130706482

Company Tracking #:

LAFOND

State: Virginia

Filing Company:

Mutual of Omaha Insurance Company

TOI/Sub-TOI: LTC03I Individual Long Term Care/LTC03I.003 Other

Product Name: Mutual of Omaha - 2016/2017 LTCi Rate Increase

Project Name/Number: 2016/2017 LTCi/

Rate/Rule Schedule

Item No.	Schedule Item Status	Document Name	Affected Form Numbers (Separated with commas)	Rate Action	Rate Action Information	Attachments
1		Rate Schedules	LT50-Series 19241, LT50-Series 19409, ODX5M, NH50-Series 19242, NH50-Series 19410, ODX6M, HCA-Series 19629, HCA-Series20249, OGH1M-44, NHA-Series 19630, NHA-Series 20250, OGH3M-44, OGH4M-44, OGH5M-44, OGH6M-REV, OGH7M-44, OGH8M-44, LTA-Series 19631, LTA-Series 20251, OGH7M-44 REV, OGH8M-44 REV, OGH9M-44 REV	Revised	Previous State Filing Number: MUTA-127148717 Percent Rate Change Request: 27.4	Rates - LT50 (VA-2018).pdf, Rates - LT50 (VA-2019).pdf, Rates - ODX5M (VA-2018).pdf, Rates - ODX5M (VA-2019).pdf, Rates - NH50 (VA-2018).pdf, Rates - NH50 (VA-2019).pdf, Rates - ODX6M (VA-2018).pdf, Rates - ODX6M (VA-2019).pdf, Rates - HCA-NHA-LTA (VA-2018).pdf, Rates - HCA-NHA-LTA (VA-2019).pdf,

Date: 04/26/2017

MUTUAL OF OMAHA INSURANCE COMPANY
SCHEDULE OF MONTHLY RATES FOR POLICY FORMS

LT50-Series 19241 and LT50-Series 19409

PER \$10 DAILY CONFINED CARE/PER \$10 DAILY COMMUNITY BASED BENEFIT

100% HOME HEALTH CARE BENEFIT

BENEFIT -- 1 YEAR

Issue Age	ELIMINATION PERIODS			
	0 Day	20 Day	100 Day	365 Day
18-39	1.66	1.54	1.33	1.15
40	1.84	1.68	1.45	1.25
41	1.90	1.74	1.50	1.30
42	1.98	1.82	1.56	1.34
43	2.06	1.90	1.62	1.39
44	2.14	1.97	1.68	1.43
45	2.23	2.05	1.75	1.49
46	2.34	2.15	1.84	1.56
47	2.45	2.26	1.92	1.63
48	2.57	2.39	2.02	1.72
49	2.71	2.53	2.12	1.78
50	2.87	2.68	2.24	1.87
51	3.04	2.86	2.38	1.98
52	3.22	3.04	2.52	2.09
53	3.44	3.24	2.68	2.22
54	3.66	3.46	2.86	2.36
55	3.92	3.70	3.05	2.51
56	4.19	3.96	3.26	2.68
57	4.50	4.24	3.49	2.87
58	4.82	4.55	3.72	3.04
59	5.16	4.87	3.98	3.25
60	5.53	5.20	4.24	3.46
61	5.95	5.60	4.55	3.70
62	6.46	6.05	4.92	4.00
63	7.01	6.55	5.33	4.34
64	7.62	7.10	5.78	4.72
65	8.29	7.70	6.29	5.14
66	9.05	8.38	6.84	5.59
67	9.89	9.14	7.46	6.10
68	10.82	9.98	8.10	6.58
69	11.81	10.87	8.78	7.09
70	12.90	11.86	9.53	7.66
71	14.11	12.96	10.36	8.28
72	15.47	14.21	11.34	9.05
73	16.98	15.60	12.46	9.94
74	18.64	17.11	13.69	10.96
75	20.40	18.76	15.02	12.04
76	22.32	20.52	16.45	13.19
77	24.40	22.44	17.98	14.41
78	26.63	24.52	19.60	15.67
79	29.02	26.71	21.31	17.00
80	31.55	29.06	23.12	18.40
81	34.24	31.55	25.03	19.86
82	37.06	34.18	27.04	21.38
83	40.04	36.94	29.14	22.98
84	43.18	39.84	31.32	24.62

TO OBTAIN QUARTERLY, SEMIANNUAL, AND ANNUAL PREMIUMS, MULTIPLY THE ABC QUOTED PREMIUMS BY 3, 6, AND 12, RESPECTIVELY. THE MONTHLY PREMIUMS FOR BANK SERVICE PLAN AND PAYROLL DEDUCTION ISSUES ARE THE PREMIUMS LISTED / R25387-44-3

Date: 04/26/2017

MUTUAL OF OMAHA INSURANCE COMPANY
SCHEDULE OF MONTHLY RATES FOR POLICY FORMS

LT50-Series 19241 and LT50-Series 19409

PER \$10 DAILY CONFINED CARE/PER \$10 DAILY COMMUNITY BASED BENEFIT

100% HOME HEALTH CARE BENEFIT

BENEFIT -- TWO YEARS

Issue Age	ELIMINATION PERIODS			
	0 Day	20 Day	100 Day	365 Day
18-39	2.20	2.09	1.79	1.54
40	2.44	2.32	1.97	1.68
41	2.52	2.40	2.04	1.73
42	2.62	2.50	2.12	1.80
43	2.74	2.59	2.20	1.87
44	2.86	2.69	2.28	1.93
45	2.98	2.81	2.38	2.02
46	3.11	2.94	2.48	2.09
47	3.28	3.10	2.60	2.20
48	3.46	3.26	2.74	2.29
49	3.65	3.46	2.89	2.42
50	3.88	3.65	3.05	2.56
51	4.12	3.88	3.23	2.69
52	4.39	4.13	3.44	2.87
53	4.67	4.40	3.66	3.04
54	4.98	4.68	3.90	3.25
55	5.32	4.99	4.15	3.46
56	5.70	5.32	4.44	3.71
57	6.14	5.72	4.75	3.94
58	6.64	6.16	5.10	4.24
59	7.16	6.61	5.47	4.54
60	7.74	7.12	5.88	4.86
61	8.40	7.69	6.32	5.20
62	9.14	8.35	6.83	5.59
63	9.95	9.10	7.38	5.99
64	10.80	9.88	7.98	6.46
65	11.75	10.76	8.63	6.92
66	12.80	11.74	9.35	7.45
67	13.99	12.80	10.20	8.14
68	15.30	13.96	11.14	8.88
69	16.72	15.16	12.13	9.71
70	18.24	16.48	13.24	10.62
71	19.94	17.98	14.47	11.65
72	21.85	19.69	15.88	12.82
73	23.96	21.61	17.46	14.11
74	26.23	23.72	19.21	15.56
75	28.70	26.02	21.10	17.10
76	31.36	28.48	23.10	18.74
77	34.21	31.12	25.24	20.46
78	37.26	33.94	27.48	22.26
79	40.51	36.90	29.86	24.16
80	43.96	40.07	32.36	26.14
81	47.58	43.42	34.99	28.20
82	51.41	46.92	37.74	30.36
83	55.43	50.62	40.62	32.60
84	59.64	54.47	43.63	34.96

TO OBTAIN QUARTERLY, SEMIANNUAL, AND ANNUAL PREMIUMS, MULTIPLY THE ABC QUOTED PREMIUMS BY 3, 6, AND 12, RESPECTIVELY. THE MONTHLY PREMIUMS FOR B, SERVICE PLAN AND PAYROLL DEDUCTION ISSUES ARE THE PREMIUMS LISTED ABO VI R25387-44-3

Date: 04/26/2017

MUTUAL OF OMAHA INSURANCE COMPANY
SCHEDULE OF MONTHLY RATES FOR POLICY FORMS

LT50-Series 19241 and LT50-Series 19409

PER \$10 DAILY CONFINED CARE/PER \$10 DAILY COMMUNITY BASED BENEFIT

100% HOME HEALTH CARE BENEFIT

BENEFIT -- 3 YEARS

Issue Age	ELIMINATION PERIOD			
	0 Day	20 Day	100 Day	365 Day
18-39	2.68	2.46	2.08	1.74
40	2.96	2.71	2.30	1.96
41	3.07	2.83	2.39	2.02
42	3.20	2.94	2.48	2.09
43	3.34	3.06	2.58	2.18
44	3.48	3.19	2.68	2.26
45	3.64	3.34	2.80	2.34
46	3.80	3.49	2.93	2.46
47	4.01	3.67	3.07	2.57
48	4.24	3.88	3.23	2.69
49	4.48	4.12	3.41	2.83
50	4.75	4.36	3.59	2.96
51	5.05	4.63	3.80	3.12
52	5.39	4.94	4.06	3.32
53	5.75	5.26	4.31	3.53
54	6.14	5.62	4.60	3.77
55	6.58	6.00	4.92	4.03
56	7.03	6.42	5.26	4.30
57	7.55	6.89	5.64	4.62
58	8.10	7.40	6.05	4.96
59	8.68	7.94	6.49	5.30
60	9.30	8.53	6.97	5.70
61	10.01	9.18	7.50	6.13
62	10.81	9.91	8.09	6.60
63	11.69	10.70	8.74	7.12
64	12.64	11.52	9.41	7.69
65	13.67	12.42	10.16	8.32
66	14.83	13.46	11.02	9.01
67	16.18	14.69	11.99	9.79
68	17.65	16.09	13.08	10.63
69	19.26	17.64	14.26	11.53
70	21.02	19.33	15.56	12.53
71	22.96	21.19	16.98	13.61
72	25.09	23.21	18.56	14.84
73	27.40	25.38	20.28	16.20
74	29.86	27.71	22.12	17.64
75	32.51	30.20	24.10	19.22
76	35.39	32.88	26.23	20.92
77	38.56	35.77	28.56	22.80
78	41.98	38.86	31.07	24.84
79	45.66	42.14	33.76	27.05
80	49.57	45.60	36.62	29.41
81	53.74	49.27	39.64	31.90
82	58.14	53.12	42.84	34.55
83	62.80	57.16	46.21	37.36
84	67.69	61.40	49.76	40.33

TO OBTAIN QUARTERLY, SEMIANNUAL, AND ANNUAL PREMIUMS, MULTIPLY THE ABC QUOTED PREMIUMS BY 3, 6, AND 12, RESPECTIVELY. THE MONTHLY PREMIUMS FOR B, SERVICE PLAN AND PAYROLL DEDUCTION ISSUES ARE THE PREMIUMS LISTED ABOVE
R25387-44-3

Date: 04/26/2017

MUTUAL OF OMAHA INSURANCE COMPANY
SCHEDULE OF MONTHLY RATES FOR POLICY FORMS

LT50-Series 19241 and LT50-Series 19409

PER \$10 DAILY CONFINED CARE/PER \$10 DAILY COMMUNITY BASED BENEFIT

100% HOME HEALTH CARE BENEFIT

Issue Age	BENEFIT -- 5 YEARS			
	ELIMINATION PERIODS			
	0 Day	20 Day	100 Day	365 Day
18-39	3.54	3.30	2.78	2.35
40	3.91	3.65	3.04	2.52
41	4.07	3.78	3.16	2.63
42	4.24	3.94	3.28	2.73
43	4.41	4.10	3.41	2.82
44	4.60	4.28	3.54	2.95
45	4.81	4.47	3.70	3.08
46	5.03	4.66	3.87	3.21
47	5.29	4.93	4.07	3.36
48	5.60	5.19	4.29	3.55
49	5.93	5.49	4.53	3.74
50	6.28	5.81	4.82	4.00
51	6.69	6.18	5.10	4.22
52	7.12	6.58	5.46	4.51
53	7.58	7.02	5.80	4.80
54	8.05	7.50	6.19	5.13
55	8.58	8.00	6.61	5.47
56	9.15	8.56	7.06	5.83
57	9.79	9.16	7.54	6.19
58	10.47	9.81	8.03	6.58
59	11.20	10.47	8.56	6.97
60	11.96	11.20	9.11	7.41
61	12.85	11.99	9.72	7.90
62	13.84	12.88	10.44	8.46
63	14.92	13.86	11.21	9.06
64	16.08	14.89	12.02	9.71
65	17.35	16.02	12.94	10.45
66	18.79	17.30	13.97	11.28
67	20.42	18.79	15.16	12.22
68	22.25	20.45	16.46	13.24
69	24.23	22.29	17.90	14.38
70	26.41	24.27	19.47	15.62
71	28.79	26.47	21.20	16.97
72	31.42	28.89	23.11	18.50
73	34.23	31.47	25.19	20.17
74	37.20	34.23	27.40	21.93
75	40.44	37.21	29.79	23.85
76	43.98	40.50	32.43	25.98
77	47.91	44.11	35.35	28.31
78	52.23	48.07	38.54	30.91
79	56.89	52.34	42.00	33.70
80	61.90	56.91	45.69	36.69
81	67.24	61.80	49.65	39.91
82	72.93	66.98	53.86	43.31
83	78.96	72.48	58.32	46.92
84	85.33	78.29	63.02	50.73

TO OBTAIN QUARTERLY, SEMIANNUAL, AND ANNUAL PREMIUMS, MULTIPLY THE ABC QUOTED PREMIUMS BY 3, 6, AND 12, RESPECTIVELY. THE MONTHLY PREMIUMS FOR B. SERVICE PLAN AND PAYROLL DEDUCTION ISSUES ARE THE PREMIUMS LISTED ABOVE
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MUTUAL OF OMAHA INSURANCE COMPANY
SCHEDULE OF MONTHLY RATES FOR POLICY FORMS

LT50-Series 19241 and LT50-Series 19409

PER \$10 DAILY CONFINED CARE/PER \$10 DAILY COMMUNITY BASED BENEFIT

100% HOME HEALTH CARE BENEFIT

Issue Age	BENEFIT -- LIFETIME			
	ELIMINATION PERIODS			
	0 Day	20 Day	100 Day	365 Day
18-39	6.92	6.55	5.33	4.37
40	7.58	7.16	5.88	4.82
41	7.87	7.44	6.10	5.01
42	8.22	7.75	6.34	5.23
43	8.57	8.06	6.64	5.47
44	8.92	8.44	6.96	5.75
45	9.35	8.83	7.25	5.99
46	9.80	9.26	7.64	6.31
47	10.30	9.69	8.02	6.62
48	10.83	10.21	8.44	6.96
49	11.41	10.74	8.88	7.35
50	12.03	11.31	9.35	7.72
51	12.70	11.92	9.84	8.11
52	13.44	12.57	10.39	8.58
53	14.20	13.25	10.93	9.05
54	15.03	13.95	11.49	9.46
55	15.90	14.68	12.10	9.98
56	16.90	15.52	12.78	10.53
57	17.97	16.45	13.52	11.10
58	19.12	17.45	14.34	11.78
59	20.36	18.50	15.16	12.45
60	21.68	19.66	16.08	13.17
61	23.18	20.96	17.15	14.01
62	24.90	22.49	18.33	14.95
63	26.75	24.19	19.67	15.98
64	28.76	26.04	21.09	17.10
65	30.95	28.11	22.67	18.32
66	33.41	30.37	24.48	19.73
67	36.21	32.97	26.55	21.40
68	39.30	35.80	28.86	23.26
69	42.60	38.82	31.36	25.30
70	46.24	42.13	34.11	27.60
71	50.25	45.81	37.13	30.08
72	54.74	49.95	40.51	32.85
73	59.58	54.37	44.14	35.82
74	64.75	59.07	47.98	38.95
75	70.38	64.22	52.18	42.38
76	76.58	69.97	56.84	46.15
77	83.43	76.53	62.06	50.31
78	90.97	83.90	67.89	54.94
79	99.09	91.95	74.18	59.88
80	107.81	100.67	81.03	65.21
81	117.14	110.07	88.37	70.93
82	127.04	120.13	96.19	77.01
83	137.57	130.91	104.52	83.47
84	148.66	142.35	113.36	90.30

TO OBTAIN QUARTERLY, SEMIANNUAL, AND ANNUAL PREMIUMS, MULTIPLY THE ABC QUOTED PREMIUMS BY 3, 6, AND 12, RESPECTIVELY. THE MONTHLY PREMIUMS FOR B, SERVICE PLAN AND PAYROLL DEDUCT I ON ISSUES ARE THE PREMIUMS LISTED ABOVE
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Date: 04/26/2017

MUTUAL OF OMAHA INSURANCE COMPANY
SCHEDULE OF MONTHLY RATES FOR POLICY FORMS

LT50-Series 19241 and LT50-Series 19409

PER \$10 DAILY CONFINED CARE/PER \$10 DAILY COMMUNITY BASED BENEFIT

80% HOME HEALTH CARE BENEFIT

BENEFIT -- 1 YEAR

Issue Age	ELIMINATION PERIODS			
	0 Day	20 Day	100 Day	365 Day
18-39	1.49	1.40	1.21	1.06
40	1.66	1.54	1.34	1.18
41	1.72	1.60	1.38	1.20
42	1.79	1.66	1.44	1.26
43	1.86	1.72	1.49	1.30
44	1.93	1.80	1.55	1.33
45	2.02	1.87	1.61	1.39
46	2.10	1.96	1.68	1.44
47	2.20	2.06	1.76	1.50
48	2.32	2.17	1.86	1.60
49	2.45	2.32	1.96	1.66
50	2.58	2.44	2.06	1.74
51	2.74	2.60	2.18	1.84
52	2.92	2.76	2.32	1.96
53	3.10	2.95	2.47	2.08
54	3.29	3.14	2.62	2.20
55	3.53	3.37	2.81	2.34
56	3.77	3.60	3.00	2.50
57	4.06	3.88	3.20	2.65
58	4.36	4.14	3.42	2.83
59	4.66	4.43	3.65	3.01
60	4.98	4.73	3.90	3.22
61	5.36	5.10	4.18	3.43
62	5.80	5.51	4.52	3.71
63	6.31	5.96	4.91	4.04
64	6.86	6.46	5.32	4.36
65	7.48	7.01	5.78	4.78
66	8.15	7.62	6.29	5.20
67	8.92	8.32	6.85	5.65
68	9.76	9.08	7.45	6.11
69	10.64	9.89	8.08	6.58
70	11.63	10.79	8.75	7.10
71	12.71	11.80	9.53	7.70
72	13.94	12.94	10.42	8.40
73	15.30	14.20	11.44	9.22
74	16.78	15.58	12.58	10.16
75	18.38	17.06	13.81	11.18
76	20.10	18.68	15.13	12.25
77	21.98	20.42	16.52	13.36
78	23.99	22.31	18.02	14.56
79	26.14	24.31	19.58	15.77
80	28.42	26.45	21.26	17.09
81	30.83	28.72	23.00	18.43
82	33.38	31.10	24.85	19.86
83	36.07	33.61	26.78	21.34
84	38.89	36.25	28.79	22.87

TO OBTAIN QUARTERLY, SEMIANNUAL, AND ANNUAL PREMIUMS, MULTIPLY THE ABC QUOTED PREMIUMS BY 3, 6, AND 12. RESPECTIVELY . THE MONTHLY PREMIUMS FOR B SERVICE PLAN AND PAYROLL DEDUCTION ISSUES ARE THE PREMIUMS LISTED ABOVE
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MUTUAL OF OMAHA INSURANCE COMPANY
SCHEDULE OF MONTHLY RATES FOR POLICY FORMS

LT50-Series 19241 and LT50-Series 19409

PER \$10 DAILY CONFINED CARE/PER \$10 DAILY COMMUNITY BASED BENEFIT

80% HOME HEALTH CARE BENEFIT

BENEFIT -- 2 YEARS

Issue Age	ELIMINATION PERIODS			
	0 Day	20 Day	100 Day	365 Day
18-39	2.00	1.93	1.66	1.43
40	2.21	2.12	1.84	1.58
41	2.30	2.20	1.90	1.64
42	2.39	2.28	1.97	1.70
43	2.50	2.39	2.05	1.76
44	2.59	2.48	2.12	1.81
45	2.70	2.58	2.21	1.90
46	2.84	2.70	2.32	1.98
47	2.98	2.86	2.42	2.05
48	3.16	3.00	2.54	2.15
49	3.34	3.17	2.68	2.27
50	3.53	3.36	2.84	2.40
51	3.74	3.58	3.01	2.54
52	4.00	3.80	3.19	2.68
53	4.25	4.06	3.41	2.87
54	4.54	4.30	3.62	3.05
55	4.85	4.60	3.86	3.25
56	5.20	4.90	4.12	3.46
57	5.59	5.26	4.42	3.71
58	6.04	5.66	4.74	3.97
59	6.52	6.08	5.08	4.24
60	7.06	6.55	5.46	4.55
61	7.66	7.08	5.88	4.88
62	8.32	7.68	6.35	5.26
63	9.06	8.36	6.86	5.63
64	9.84	9.10	7.42	6.06
65	10.70	9.90	8.02	6.50
66	11.66	10.79	8.69	7.00
67	12.76	11.78	9.48	7.63
68	13.93	12.84	10.34	8.33
69	15.22	13.94	11.27	9.11
70	16.62	15.17	12.29	9.96
71	18.17	16.54	13.45	10.94
72	19.90	18.12	14.76	12.02
73	21.82	19.88	16.24	13.25
74	23.90	21.82	17.86	14.60
75	26.14	23.93	19.60	16.06
76	28.56	26.20	21.47	17.60
77	31.16	28.62	23.45	19.21
78	33.94	31.21	25.54	20.88
79	36.90	33.96	27.74	22.66
80	40.04	36.86	30.07	24.53
81	43.34	39.94	32.51	26.46
82	46.82	43.18	35.08	28.49
83	50.48	46.56	37.74	30.59
84	54.32	50.11	40.54	32.78

TO OBTAIN QUARTERLY, SEMIANNUAL, AND ANNUAL PREMIUMS, MULTIPLY THE ABC QUOTED PREMIUMS BY 3, 6, AND 12, RESPECTIVELY. THE MONTHLY PREMIUMS FOR B, SERVICE PLAN AND PAYROLL DEDUCTION ISSUES ARE THE PREMIUMS LISTED ABOVE
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MUTUAL OF OMAHA INSURANCE COMPANY
SCHEDULE OF MONTHLY RATES FOR POLICY FORMS

LT50-Series 19241 and LT50-Series 19409

PER \$10 DAILY CONFINED CARE/PER \$10 DAILY COMMUNITY BASED BENEFIT

80% HOME HEALTH CARE BENEFIT

BENEFIT -- 3 YEARS

Issue Age	ELIMINATION PERIODS			
	0 Day	20 Day	100 Day	365 Day
18-39	2.46	2.28	1.96	1.67
40	2.72	2.52	2.15	1.84
41	2.83	2.63	2.24	1.91
42	2.95	2.74	2.33	1.99
43	3.07	2.86	2.44	2.08
44	3.20	2.98	2.52	2.14
45	3.35	3.10	2.62	2.22
46	3.50	3.24	2.75	2.33
47	3.70	3.42	2.89	2.44
48	3.90	3.60	3.04	2.57
49	4.12	3.83	3.20	2.68
50	4.38	4.06	3.38	2.82
51	4.66	4.30	3.58	2.96
52	4.96	4.60	3.80	3.16
53	5.29	4.90	4.06	3.35
54	5.65	5.22	4.32	3.58
55	6.05	5.58	4.62	3.83
56	6.47	5.98	4.94	4.09
57	6.95	6.41	5.29	4.37
58	7.46	6.88	5.68	4.70
59	7.99	7.38	6.10	5.03
60	8.57	7.93	6.55	5.41
61	9.22	8.54	7.04	5.80
62	9.96	9.22	7.60	6.26
63	10.76	9.96	8.20	6.76
64	11.63	10.72	8.84	7.30
65	12.59	11.56	9.55	7.90
66	13.66	12.53	10.34	8.53
67	14.88	13.66	11.26	9.28
68	16.25	14.96	12.28	10.08
69	17.74	16.40	13.39	10.93
70	19.36	17.98	14.62	11.88
71	21.13	19.72	15.95	12.91
72	23.10	21.58	17.44	14.09
73	25.22	23.60	19.04	15.36
74	27.49	25.78	20.77	16.73
75	29.93	28.09	22.63	18.23
76	32.59	30.58	24.64	19.85
77	35.50	33.28	26.83	21.64
78	38.66	36.14	29.18	23.56
79	42.04	39.19	31.72	25.66
80	45.65	42.41	34.39	27.89
81	49.48	45.82	37.24	30.25
82	53.53	49.40	40.24	32.78
83	57.82	53.16	43.40	35.44
84	62.32	57.11	46.74	38.26

TO OBTAIN QUARTERLY, SEMIANNUAL, AND ANNUAL PREMIUMS, MULTIPLY THE ABC PREMIUMS BY 3, 6 AND 12 RESPECTIVELY. THE MONTHLY PREMIUMS FOR BANK SERV PAYROLL DEDUCTION ISSUES ARE THE PREMIUMS LISTED ABOVE.

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MUTUAL OF OMAHA INSURANCE COMPANY
SCHEDULE OF MONTHLY RATES FOR POLICY FORMS

LT50-Series 19241 and LT50-Series 19409

PER \$10 DAILY CONFINED CARE/PER \$10 DAILY COMMUNITY BASED BENEFIT

80% HOME HEALTH CARE BENEFIT

BENEFIT -- 5 YEARS

Issue Age	ELIMINATION PERIODS			
	0 Day	20 Day	100 Day	365 Day
18-39	3.29	3.10	2.64	2.24
40	3.63	3.43	2.88	2.42
41	3.78	3.55	2.99	2.52
42	3.94	3.71	3.11	2.62
43	4.10	3.87	3.23	2.71
44	4.28	4.02	3.37	2.83
45	4.47	4.18	3.50	2.93
46	4.68	4.40	3.67	3.08
47	4.93	4.62	3.87	3.22
48	5.20	4.87	4.07	3.41
49	5.52	5.16	4.31	3.61
50	5.85	5.47	4.57	3.82
51	6.23	5.80	4.86	4.07
52	6.62	6.18	5.16	4.30
53	7.05	6.60	5.52	4.60
54	7.50	7.05	5.87	4.90
55	7.99	7.51	6.27	5.24
56	8.51	8.04	6.71	5.59
57	9.11	8.62	7.17	5.95
58	9.75	9.22	7.63	6.33
59	10.42	9.85	8.11	6.68
60	11.13	10.52	8.65	7.11
61	11.95	11.26	9.23	7.57
62	12.86	12.12	9.91	8.11
63	13.88	13.02	10.64	8.69
64	14.96	13.98	11.42	9.33
65	16.15	15.05	12.29	10.03
66	17.48	16.26	13.27	10.82
67	19.01	17.67	14.39	11.73
68	20.70	19.23	15.63	12.72
69	22.55	20.93	16.98	13.78
70	24.60	22.81	18.48	14.97
71	26.80	24.87	20.12	16.28
72	29.24	27.15	21.96	17.74
73	31.86	29.59	23.91	19.33
74	34.63	32.19	26.00	21.03
75	37.63	34.98	28.29	22.88
76	40.93	38.06	30.80	24.90
77	44.59	41.46	33.57	27.17
78	48.62	45.19	36.59	29.62
79	52.94	49.21	39.88	32.32
80	57.61	53.50	43.38	35.18
81	62.58	58.10	47.14	38.24
82	67.87	62.96	51.13	41.51
83	73.48	68.12	55.36	44.99
84	79.41	73.58	59.84	48.66

TO OBTAIN QUARTERLY, SEMIANNUAL, AND ANNUAL PREMIUMS,
MULTIPLY THE ABOVE QUOTED PREMIUMS BY 3, 6, AND 12,
RESPECTIVELY. THE MONTHLY PREMIUMS FOR BANK SERVICE PLAN
AND PAYROLL DEDUCTION ISSUES ARE THE PREMIUMS LISTED ABOVE.
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MUTUAL OF OMAHA INSURANCE COMPANY
SCHEDULE OF MONTHLY RATES FOR POLICY FORMS

LT50-Series 19241 and LT50-Series 19409

PER \$10 DAILY CONFINED CARE/PER \$10 DAILY COMMUNITY BASED BENEFIT

80% HOME HEALTH CARE BENEFIT

BENEFIT -- LIFETIME

Issue Age	ELIMINATION PERIODS			
	0 Day	20 Day	100 Day	365 Day
18-39	6.50	6.21	5.14	4.21
40	7.15	6.81	5.63	4.68
41	7.42	7.05	5.86	4.89
42	7.72	7.36	6.10	5.06
43	8.03	7.66	6.34	5.25
44	8.40	8.02	6.68	5.55
45	8.79	8.37	6.97	5.82
46	9.20	8.79	7.35	6.15
47	9.67	9.23	7.70	6.41
48	10.21	9.69	8.06	6.76
49	10.74	10.21	8.52	7.11
50	11.31	10.74	8.97	7.46
51	11.92	11.31	9.45	7.89
52	12.64	11.95	9.98	8.32
53	13.36	12.58	10.48	8.72
54	14.13	13.25	11.02	9.19
55	14.96	13.95	11.62	9.67
56	15.89	14.74	12.25	10.21
57	16.90	15.61	12.96	10.76
58	17.99	16.56	13.74	11.40
59	19.14	17.56	14.56	12.04
60	20.41	18.67	15.43	12.73
61	21.81	19.92	16.45	13.59
62	23.40	21.37	17.60	14.48
63	25.17	23.00	18.88	15.50
64	27.04	24.74	20.23	16.55
65	29.11	26.70	21.76	17.76
66	31.42	28.86	23.48	19.11
67	34.06	31.29	25.49	20.75
68	36.96	34.00	27.69	22.56
69	40.09	36.87	30.08	24.54
70	43.46	40.03	32.71	26.73
71	47.27	43.54	35.63	29.16
72	51.47	47.44	38.87	31.85
73	56.03	51.65	42.34	34.70
74	60.91	56.13	46.02	37.74
75	66.20	61.00	50.05	41.04
76	72.05	66.47	54.51	44.72
77	78.47	72.71	59.54	48.75
78	85.54	79.70	65.16	53.26
79	93.20	87.35	71.20	58.05
80	101.40	95.64	77.74	63.19
81	110.19	104.57	84.77	68.73
82	119.50	114.13	92.29	74.63
83	129.38	124.36	100.30	80.87
84	139.80	135.23	108.76	87.46

TO OBTAIN QUARTERLY, SEMIANNUAL, AND ANNUAL PREMIUMS,
MULTIPLY THE ABOVE QUOTED PREMIUMS BY 3, 6, AND 12,
RESPECTIVELY. THE MONTHLY PREMIUMS FOR BANK SERVICE PLAN
AND PAYROLL DEDUCTION ISSUES ARE THE PREMIUMS LISTED ABOVE.
R25387-44-3

Date: 04/26/2017

MUTUAL OF OMAHA INSURANCE COMPANY
SCHEDULE OF MONTHLY RATES FOR POLICY FORMS

LT50-Series 19241 and LT50-Series 19409

PER \$10 DAILY CONFINED CARE/PER \$10 DAILY COMMUNITY BASED BENEFIT

50% HOME HEALTH CARE BENEFIT

BENEFIT -- 1 YEAR

Issue Age	Elimination Periods			
	0 Day	20 Day	100 Day	365 Day
18-39	1.24	1.18	1.02	0.89
40	1.38	1.28	1.12	0.96
41	1.43	1.33	1.15	1.00
42	1.49	1.38	1.19	1.03
43	1.55	1.44	1.24	1.07
44	1.61	1.50	1.30	1.13
45	1.68	1.56	1.36	1.18
46	1.75	1.63	1.40	1.20
47	1.85	1.72	1.48	1.26
48	1.94	1.82	1.55	1.32
49	2.04	1.92	1.63	1.38
50	2.15	2.04	1.72	1.45
51	2.27	2.17	1.84	1.54
52	2.44	2.32	1.94	1.63
53	2.59	2.47	2.06	1.72
54	2.75	2.63	2.20	1.82
55	2.95	2.82	2.35	1.96
56	3.16	3.01	2.51	2.09
57	3.40	3.22	2.68	2.23
58	3.64	3.46	2.86	2.36
59	3.89	3.70	3.05	2.51
60	4.16	3.96	3.25	2.68
61	4.48	4.25	3.49	2.87
62	4.86	4.60	3.77	3.10
63	5.27	4.98	4.09	3.36
64	5.74	5.40	4.44	3.65
65	6.24	5.86	4.84	4.00
66	6.80	6.36	5.26	4.33
67	7.45	6.95	5.72	4.72
68	8.14	7.58	6.22	5.09
69	8.88	8.26	6.74	5.50
70	9.71	9.02	7.31	5.92
71	10.62	9.85	7.96	6.43
72	11.64	10.80	8.71	7.02
73	12.78	11.86	9.56	7.72
74	14.02	13.01	10.51	8.50
75	15.35	14.26	11.54	9.35
76	16.79	15.60	12.64	10.24
77	18.36	17.05	13.80	11.17
78	20.04	18.64	15.05	12.16
79	21.83	20.30	16.36	13.18
80	23.74	22.08	17.75	14.27
81	25.76	23.98	19.22	15.40
82	27.88	25.97	20.75	16.58
83	30.12	28.07	22.36	17.81
84	32.48	30.28	24.04	19.09

TO OBTAIN QUARTERLY, SEMIANNUAL, AND ANNUAL PREMIUMS,
MULTIPLY THE ABOVE QUOTED PREMIUMS BY 3, 6, AND 12,
RESPECTIVELY. THE MONTHLY PREMIUMS FOR BANK SERVICE PLAN
AND PAYROLL DEDUCTION ISSUES ARE THE PREMIUMS LISTED ABOVE.
R25387-44-3

Date: 04/26/2017

MUTUAL OF OMAHA INSURANCE COMPANY
SCHEDULE OF MONTHLY RATES FOR POLICY FORMS

LT50-Series 19241 and LT50-Series 19409

PER \$10 DAILY CONFINED CARE/PER \$10 DAILY COMMUNITY BASED BENEFIT

50% HOME HEALTH CARE BENEFIT

BENEFIT -- 2 YEARS

Issue Age	Elimination Periods			
	0 Day	20 Day	100 Day	365 Day
18-39	1.69	1.63	1.42	1.22
40	1.88	1.80	1.55	1.33
41	1.96	1.87	1.61	1.39
42	2.02	1.94	1.67	1.44
43	2.11	2.02	1.73	1.48
44	2.20	2.10	1.80	1.54
45	2.30	2.20	1.88	1.61
46	2.41	2.30	1.96	1.66
47	2.53	2.41	2.05	1.74
48	2.68	2.56	2.15	1.81
49	2.82	2.69	2.27	1.92
50	2.99	2.86	2.41	2.04
51	3.17	3.02	2.56	2.15
52	3.40	3.22	2.70	2.26
53	3.61	3.43	2.89	2.44
54	3.85	3.65	3.07	2.58
55	4.10	3.89	3.28	2.75
56	4.42	4.15	3.50	2.95
57	4.74	4.48	3.74	3.13
58	5.12	4.79	4.02	3.37
59	5.53	5.15	4.30	3.59
60	5.98	5.56	4.63	3.86
61	6.49	6.00	4.98	4.13
62	7.06	6.52	5.39	4.46
63	7.68	7.09	5.81	4.76
64	8.34	7.72	6.28	5.12
65	9.08	8.39	6.79	5.50
66	9.88	9.16	7.36	5.92
67	10.80	10.00	8.04	6.47
68	11.81	10.88	8.76	7.06
69	12.90	11.82	9.56	7.73
70	14.09	12.85	10.42	8.45
71	15.40	14.03	11.40	9.26
72	16.87	15.35	12.52	10.21
73	18.50	16.86	13.76	11.23
74	20.26	18.50	15.13	12.37
75	22.16	20.29	16.62	13.61
76	24.22	22.21	18.20	14.92
77	26.42	24.28	19.88	16.28
78	28.78	26.46	21.64	17.70
79	31.28	28.78	23.52	19.22
80	33.94	31.25	25.50	20.81
81	36.74	33.86	27.56	22.43
82	39.70	36.60	29.74	24.16
83	42.80	39.47	32.00	25.94
84	46.06	42.48	34.36	27.79

TO OBTAIN QUARTERLY, SEMIANNUAL, AND ANNUAL PREMIUMS,
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AND PAYROLL DEDUCTION ISSUES ARE THE PREMIUMS LISTED ABOVE.
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Date: 04/26/2017

MUTUAL OF OMAHA INSURANCE COMPANY
SCHEDULE OF MONTHLY RATES FOR POLICY FORMS

LT50-Series 19241 and LT50-Series 19409

PER \$10 DAILY CONFINED CARE/PER \$10 DAILY COMMUNITY BASED BENEFIT

50% HOME HEALTH CARE BENEFIT

BENEFIT -- 3 YEARS

Issue Age	Elimination Periods			
	0 Day	20 Day	100 Day	365 Day
18-39	2.12	1.97	1.67	1.42
40	2.35	2.17	1.86	1.60
41	2.44	2.26	1.93	1.66
42	2.54	2.35	2.00	1.70
43	2.64	2.45	2.08	1.78
44	2.75	2.56	2.17	1.85
45	2.88	2.66	2.26	1.90
46	3.01	2.80	2.38	2.02
47	3.17	2.94	2.48	2.09
48	3.36	3.10	2.62	2.20
49	3.55	3.28	2.75	2.32
50	3.76	3.49	2.90	2.41
51	4.00	3.70	3.07	2.56
52	4.26	3.95	3.28	2.71
53	4.56	4.21	3.49	2.89
54	4.87	4.49	3.71	3.07
55	5.20	4.79	3.97	3.29
56	5.57	5.14	4.24	3.50
57	5.98	5.51	4.56	3.77
58	6.42	5.92	4.90	4.04
59	6.86	6.34	5.24	4.33
60	7.36	6.82	5.63	4.66
61	7.93	7.34	6.06	5.00
62	8.57	7.94	6.54	5.39
63	9.26	8.56	7.06	5.82
64	10.00	9.22	7.61	6.29
65	10.82	9.94	8.21	6.79
66	11.75	10.78	8.89	7.34
67	12.80	11.75	9.68	7.97
68	13.97	12.88	10.57	8.68
69	15.25	14.11	11.53	9.42
70	16.66	15.46	12.58	10.22
71	18.19	16.96	13.72	11.11
72	19.87	18.56	15.00	12.12
73	21.70	20.30	16.38	13.22
74	23.64	22.18	17.87	14.40
75	25.74	24.16	19.46	15.67
76	28.03	26.32	21.20	17.08
77	30.54	28.62	23.08	18.60
78	33.25	31.09	25.10	20.26
79	36.16	33.71	27.28	22.06
80	39.26	36.49	29.59	23.99
81	42.55	39.41	32.03	26.03
82	46.04	42.49	34.62	28.21
83	49.74	45.73	37.33	30.47
84	53.62	49.12	40.20	32.90

TO OBTAIN QUARTERLY, SEMIANNUAL, AND ANNUAL PREMIUMS,
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AND PAYROLL DEDUCTION ISSUES ARE THE PREMIUMS LISTED ABOVE.
R25387-44-3

Date: 04/26/2017

MUTUAL OF OMAHA INSURANCE COMPANY
SCHEDULE OF MONTHLY RATES FOR POLICY FORMS

LT50-Series 19241 and LT50-Series 19409

PER \$10 DAILY CONFINED CARE/PER \$10 DAILY COMMUNITY BASED BENEFIT

50% HOME HEALTH CARE BENEFIT

BENEFIT -- 5 YEARS

Issue Age	Elimination Periods			
	0 Day	20 Day	100 Day	365 Day
18-39	2.90	2.75	2.33	1.98
40	3.21	3.03	2.55	2.16
41	3.34	3.15	2.65	2.23
42	3.48	3.28	2.75	2.31
43	3.62	3.41	2.85	2.38
44	3.77	3.54	2.97	2.49
45	3.95	3.71	3.10	2.60
46	4.14	3.87	3.23	2.71
47	4.36	4.08	3.41	2.83
48	4.60	4.30	3.59	2.99
49	4.87	4.55	3.81	3.18
50	5.16	4.83	4.04	3.38
51	5.50	5.13	4.28	3.58
52	5.85	5.46	4.57	3.82
53	6.23	5.82	4.86	4.07
54	6.62	6.22	5.19	4.33
55	7.06	6.64	5.54	4.63
56	7.52	7.11	5.92	4.93
57	8.04	7.61	6.31	5.24
58	8.60	8.14	6.73	5.57
59	9.19	8.69	7.17	5.93
60	9.83	9.30	7.65	6.29
61	10.55	9.94	8.16	6.71
62	11.35	10.69	8.76	7.17
63	12.25	11.51	9.39	7.67
64	13.21	12.35	10.09	8.24
65	14.25	13.29	10.85	8.86
66	15.44	14.37	11.73	9.55
67	16.78	15.59	12.72	10.35
68	18.28	16.97	13.81	11.23
69	19.92	18.49	15.00	12.19
70	21.70	20.14	16.31	13.21
71	23.65	21.97	17.78	14.39
72	25.82	23.97	19.38	15.69
73	28.12	26.13	21.12	17.07
74	30.58	28.42	22.97	18.57
75	33.22	30.89	24.99	20.21
76	36.15	33.61	27.18	21.99
77	39.38	36.61	29.63	24.00
78	42.92	39.91	32.32	26.18
79	46.75	43.44	35.22	28.56
80	50.86	47.25	38.30	31.06
81	55.24	51.29	41.62	33.77
82	59.93	55.59	45.14	36.67
83	64.88	60.17	48.88	39.72
84	70.11	64.99	52.84	42.96

TO OBTAIN QUARTERLY, SEMIANNUAL, AND ANNUAL PREMIUMS,
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RESPECTIVELY. THE MONTHLY PREMIUMS FOR BANK SERVICE PLAN
AND PAYROLL DEDUCTION ISSUES ARE THE PREMIUMS LISTED ABOVE.
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Date: 04/26/2017

MUTUAL OF OMAHA INSURANCE COMPANY
SCHEDULE OF MONTHLY RATES FOR POLICY FORMS

LT50-Series 19241 and LT50-Series 19409

PER \$10 DAILY CONFINED CARE/PER \$10 DAILY COMMUNITY BASED BENEFIT

50% HOME HEALTH CARE BENEFIT

BENEFIT -- LIFETIME

Issue Age	Elimination Periods			
	0 Day	20 Day	100 Day	365 Day
18-39	5.88	5.63	4.62	3.81
40	6.47	6.16	5.12	4.21
41	6.71	6.40	5.29	4.38
42	6.97	6.64	5.54	4.59
43	7.25	6.94	5.76	4.81
44	7.62	7.25	6.03	5.02
45	7.96	7.58	6.33	5.28
46	8.36	7.96	6.64	5.55
47	8.76	8.36	6.96	5.82
48	9.23	8.79	7.35	6.15
49	9.72	9.26	7.71	6.42
50	10.22	9.72	8.11	6.77
51	10.82	10.24	8.57	7.16
52	11.41	10.82	9.00	7.50
53	12.10	11.38	9.49	7.93
54	12.79	12.01	10.00	8.32
55	13.55	12.64	10.50	8.74
56	14.38	13.34	11.10	9.26
57	15.29	14.13	11.75	9.78
58	16.29	14.99	12.43	10.32
59	17.34	15.90	13.17	10.91
60	18.46	16.90	13.95	11.52
61	19.73	18.03	14.87	12.27
62	21.20	19.33	15.93	13.12
63	22.78	20.81	17.10	14.04
64	24.48	22.39	18.32	14.99
65	26.35	24.18	19.72	16.08
66	28.46	26.12	21.24	17.30
67	30.82	28.34	23.08	18.79
68	33.45	30.78	25.06	20.42
69	36.28	33.40	27.24	22.23
70	39.36	36.26	29.61	24.19
71	42.81	39.40	32.24	26.38
72	46.59	42.95	35.19	28.85
73	50.71	46.75	38.32	31.43
74	55.15	50.80	41.65	34.15
75	59.93	55.22	45.31	37.18
76	65.21	60.19	49.35	40.47
77	71.05	65.82	53.90	44.16
78	77.45	72.15	58.97	48.19
79	84.37	79.08	64.44	52.51
80	91.81	86.55	70.37	57.20
81	99.74	94.67	76.74	62.22
82	108.17	103.34	83.55	67.57
83	117.13	112.61	90.79	73.22
84	126.57	122.43	98.46	79.20

TO OBTAIN QUARTERLY, SEMIANNUAL, AND ANNUAL PREMIUMS,
MULTIPLY THE ABOVE QUOTED PREMIUMS BY 3, 6, AND 12,
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AND PAYROLL DEDUCTION ISSUES ARE THE PREMIUMS LISTED ABOVE.
R25387-44-3

Date: 04/26/2017

MUTUAL OF OMAHA INSURANCE COMPANY
SCHEDULE OF MONTHLY RATES FOR POLICY FORMS

LT50-Series 19241 and LT50-Series 19409

PER \$10 DAILY CONFINED CARE/PER \$10 DAILY COMMUNITY BASED BENEFIT

100% HOME HEALTH CARE BENEFIT

BENEFIT -- 1 YEAR

Issue Age	ELIMINATION PERIODS			
	0 Day	20 Day	100 Day	365 Day
18-39	1.66	1.54	1.33	1.15
40	1.84	1.68	1.45	1.25
41	1.90	1.74	1.50	1.30
42	1.98	1.82	1.56	1.34
43	2.06	1.90	1.62	1.39
44	2.14	1.97	1.68	1.43
45	2.23	2.05	1.75	1.49
46	2.34	2.15	1.84	1.56
47	2.45	2.26	1.92	1.63
48	2.57	2.39	2.02	1.72
49	2.71	2.53	2.12	1.78
50	2.87	2.68	2.24	1.87
51	3.04	2.86	2.38	1.98
52	3.22	3.04	2.52	2.09
53	3.44	3.24	2.68	2.22
54	3.66	3.46	2.86	2.36
55	3.92	3.70	3.05	2.51
56	4.19	3.96	3.26	2.68
57	4.50	4.24	3.49	2.87
58	4.82	4.55	3.72	3.04
59	5.16	4.87	3.98	3.25
60	5.53	5.20	4.24	3.46
61	5.95	5.60	4.55	3.70
62	6.46	6.05	4.92	4.00
63	7.01	6.55	5.33	4.34
64	7.62	7.10	5.78	4.72
65	8.29	7.70	6.29	5.14
66	9.05	8.38	6.84	5.59
67	9.89	9.14	7.46	6.10
68	10.82	9.98	8.10	6.58
69	11.81	10.87	8.78	7.09
70	12.90	11.86	9.53	7.66
71	14.11	12.96	10.36	8.28
72	15.47	14.21	11.34	9.05
73	16.98	15.60	12.46	9.94
74	18.64	17.11	13.69	10.96
75	20.40	18.76	15.02	12.04
76	22.32	20.52	16.45	13.19
77	24.40	22.44	17.98	14.41
78	26.63	24.52	19.60	15.67
79	29.02	26.71	21.31	17.00
80	31.55	29.06	23.12	18.40
81	34.24	31.55	25.03	19.86
82	37.06	34.18	27.04	21.38
83	40.04	36.94	29.14	22.98
84	43.18	39.84	31.32	24.62

TO OBTAIN QUARTERLY, SEMIANNUAL, AND ANNUAL PREMIUMS, MULTIPLY THE ABC QUOTED PREMIUMS BY 3, 6, AND 12, RESPECTIVELY. THE MONTHLY PREMIUMS FOR BANK SERVICE PLAN AND PAYROLL DEDUCTION ISSUES ARE THE PREMIUMS LISTED / R25387-44-4

Date: 04/26/2017

MUTUAL OF OMAHA INSURANCE COMPANY
SCHEDULE OF MONTHLY RATES FOR POLICY FORMS

LT50-Series 19241 and LT50-Series 19409

PER \$10 DAILY CONFINED CARE/PER \$10 DAILY COMMUNITY BASED BENEFIT

100% HOME HEALTH CARE BENEFIT

BENEFIT -- TWO YEARS

Issue Age	ELIMINATION PERIODS			
	0 Day	20 Day	100 Day	365 Day
18-39	2.20	2.09	1.79	1.54
40	2.44	2.32	1.97	1.68
41	2.52	2.40	2.04	1.73
42	2.62	2.50	2.12	1.80
43	2.74	2.59	2.20	1.87
44	2.86	2.69	2.28	1.93
45	2.98	2.81	2.38	2.02
46	3.11	2.94	2.48	2.09
47	3.28	3.10	2.60	2.20
48	3.46	3.26	2.74	2.29
49	3.65	3.46	2.89	2.42
50	3.88	3.65	3.05	2.56
51	4.12	3.88	3.23	2.69
52	4.39	4.13	3.44	2.87
53	4.67	4.40	3.66	3.04
54	4.98	4.68	3.90	3.25
55	5.32	4.99	4.15	3.46
56	5.70	5.32	4.44	3.71
57	6.14	5.72	4.75	3.94
58	6.64	6.16	5.10	4.24
59	7.16	6.61	5.47	4.54
60	7.74	7.12	5.88	4.86
61	8.40	7.69	6.32	5.20
62	9.14	8.35	6.83	5.59
63	9.95	9.10	7.38	5.99
64	10.80	9.88	7.98	6.46
65	11.75	10.76	8.63	6.92
66	12.80	11.74	9.35	7.45
67	13.99	12.80	10.20	8.14
68	15.30	13.96	11.14	8.88
69	16.72	15.16	12.13	9.71
70	18.24	16.48	13.24	10.62
71	19.94	17.98	14.47	11.65
72	21.85	19.69	15.88	12.82
73	23.96	21.61	17.46	14.11
74	26.23	23.72	19.21	15.56
75	28.70	26.02	21.10	17.10
76	31.36	28.48	23.10	18.74
77	34.21	31.12	25.24	20.46
78	37.26	33.94	27.48	22.26
79	40.51	36.90	29.86	24.16
80	43.96	40.07	32.36	26.14
81	47.58	43.42	34.99	28.20
82	51.41	46.92	37.74	30.36
83	55.43	50.62	40.62	32.60
84	59.64	54.47	43.63	34.96

TO OBTAIN QUARTERLY, SEMIANNUAL, AND ANNUAL PREMIUMS, MULTIPLY THE ABC QUOTED PREMIUMS BY 3, 6, AND 12, RESPECTIVELY. THE MONTHLY PREMIUMS FOR B/ SERVICE PLAN AND PAYROLL DEDUCTION ISSUES ARE THE PREMIUMS LISTED ABOVE. R25387-44-4

Date: 04/26/2017

MUTUAL OF OMAHA INSURANCE COMPANY
SCHEDULE OF MONTHLY RATES FOR POLICY FORMS

LT50-Series 19241 and LT50-Series 19409

PER \$10 DAILY CONFINED CARE/PER \$10 DAILY COMMUNITY BASED BENEFIT

100% HOME HEALTH CARE BENEFIT

BENEFIT -- 3 YEARS

Issue Age	ELIMINATION PERIOD			
	0 Day	20 Day	100 Day	365 Day
18-39	2.68	2.46	2.08	1.74
40	2.96	2.71	2.30	1.96
41	3.07	2.83	2.39	2.02
42	3.20	2.94	2.48	2.09
43	3.34	3.06	2.58	2.18
44	3.48	3.19	2.68	2.26
45	3.64	3.34	2.80	2.34
46	3.80	3.49	2.93	2.46
47	4.01	3.67	3.07	2.57
48	4.24	3.88	3.23	2.69
49	4.48	4.12	3.41	2.83
50	4.75	4.36	3.59	2.96
51	5.05	4.63	3.80	3.12
52	5.39	4.94	4.06	3.32
53	5.75	5.26	4.31	3.53
54	6.14	5.62	4.60	3.77
55	6.58	6.00	4.92	4.03
56	7.03	6.42	5.26	4.30
57	7.55	6.89	5.64	4.62
58	8.10	7.40	6.05	4.96
59	8.68	7.94	6.49	5.30
60	9.30	8.53	6.97	5.70
61	10.01	9.18	7.50	6.13
62	10.81	9.91	8.09	6.60
63	11.69	10.70	8.74	7.12
64	12.64	11.52	9.41	7.69
65	13.67	12.42	10.16	8.32
66	14.83	13.46	11.02	9.01
67	16.18	14.69	11.99	9.79
68	17.65	16.09	13.08	10.63
69	19.26	17.64	14.26	11.53
70	21.02	19.33	15.56	12.53
71	22.96	21.19	16.98	13.61
72	25.09	23.21	18.56	14.84
73	27.40	25.38	20.28	16.20
74	29.86	27.71	22.12	17.64
75	32.51	30.20	24.10	19.22
76	35.39	32.88	26.23	20.92
77	38.56	35.77	28.56	22.80
78	41.98	38.86	31.07	24.84
79	45.66	42.14	33.76	27.05
80	49.57	45.60	36.62	29.41
81	53.74	49.27	39.64	31.90
82	58.14	53.12	42.84	34.55
83	62.80	57.16	46.21	37.36
84	67.69	61.40	49.76	40.33

TO OBTAIN QUARTERLY, SEMIANNUAL, AND ANNUAL PREMIUMS, MULTIPLY THE ABC QUOTED PREMIUMS BY 3, 6, AND 12, RESPECTIVELY. THE MONTHLY PREMIUMS FOR B/ SERVICE PLAN AND PAYROLL DEDUCTION ISSUES ARE THE PREMIUMS LISTED ABOVE
R25387-44-4

Date: 04/26/2017

MUTUAL OF OMAHA INSURANCE COMPANY
SCHEDULE OF MONTHLY RATES FOR POLICY FORMS

LT50-Series 19241 and LT50-Series 19409

PER \$10 DAILY CONFINED CARE/PER \$10 DAILY COMMUNITY BASED BENEFIT

100% HOME HEALTH CARE BENEFIT

Issue Age	BENEFIT -- 5 YEARS			
	ELIMINATION PERIODS			
	0 Day	20 Day	100 Day	365 Day
18-39	3.54	3.30	2.78	2.35
40	3.91	3.65	3.04	2.52
41	4.07	3.78	3.16	2.63
42	4.24	3.94	3.28	2.73
43	4.41	4.10	3.41	2.82
44	4.60	4.28	3.54	2.95
45	4.81	4.47	3.70	3.08
46	5.03	4.66	3.87	3.21
47	5.29	4.93	4.07	3.36
48	5.60	5.19	4.29	3.55
49	5.93	5.49	4.53	3.74
50	6.28	5.81	4.82	4.00
51	6.69	6.18	5.10	4.22
52	7.12	6.58	5.46	4.51
53	7.58	7.02	5.80	4.80
54	8.05	7.50	6.19	5.13
55	8.58	8.00	6.61	5.47
56	9.15	8.56	7.06	5.83
57	9.79	9.16	7.54	6.19
58	10.47	9.81	8.03	6.58
59	11.20	10.47	8.56	6.97
60	11.96	11.20	9.11	7.41
61	12.85	11.99	9.72	7.90
62	13.84	12.88	10.44	8.46
63	14.92	13.86	11.21	9.06
64	16.08	14.89	12.02	9.71
65	17.35	16.02	12.94	10.45
66	18.79	17.30	13.97	11.28
67	20.42	18.79	15.16	12.22
68	22.25	20.45	16.46	13.24
69	24.23	22.29	17.90	14.38
70	26.41	24.27	19.47	15.62
71	28.79	26.47	21.20	16.97
72	31.42	28.89	23.11	18.50
73	34.23	31.47	25.19	20.17
74	37.20	34.23	27.40	21.93
75	40.44	37.21	29.79	23.85
76	43.98	40.50	32.43	25.98
77	47.91	44.11	35.35	28.31
78	52.23	48.07	38.54	30.91
79	56.89	52.34	42.00	33.70
80	61.90	56.91	45.69	36.69
81	67.24	61.80	49.65	39.91
82	72.93	66.98	53.86	43.31
83	78.96	72.48	58.32	46.92
84	85.33	78.29	63.02	50.73

TO OBTAIN QUARTERLY, SEMIANNUAL, AND ANNUAL PREMIUMS, MULTIPLY THE ABC QUOTED PREMIUMS BY 3, 6, AND 12, RESPECTIVELY. THE MONTHLY PREMIUMS FOR B, SERVICE PLAN AND PAYROLL DEDUCTION ISSUES ARE THE PREMIUMS LISTED ABOVE
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Date: 04/26/2017

MUTUAL OF OMAHA INSURANCE COMPANY
SCHEDULE OF MONTHLY RATES FOR POLICY FORMS

LT50-Series 19241 and LT50-Series 19409

PER \$10 DAILY CONFINED CARE/PER \$10 DAILY COMMUNITY BASED BENEFIT

100% HOME HEALTH CARE BENEFIT

Issue Age	BENEFIT -- LIFETIME			
	ELIMINATION PERIODS			
	0 Day	20 Day	100 Day	365 Day
18-39	7.96	7.53	6.13	5.03
40	8.72	8.23	6.76	5.54
41	9.05	8.56	7.02	5.76
42	9.45	8.91	7.29	6.01
43	9.86	9.27	7.64	6.29
44	10.26	9.71	8.00	6.61
45	10.75	10.15	8.34	6.89
46	11.27	10.65	8.79	7.26
47	11.85	11.14	9.22	7.61
48	12.45	11.74	9.71	8.00
49	13.12	12.35	10.21	8.45
50	13.83	13.01	10.75	8.88
51	14.61	13.71	11.32	9.33
52	15.46	14.46	11.95	9.87
53	16.33	15.24	12.57	10.41
54	17.28	16.04	13.21	10.88
55	18.29	16.88	13.92	11.48
56	19.44	17.85	14.70	12.11
57	20.67	18.92	15.55	12.77
58	21.99	20.07	16.49	13.55
59	23.41	21.28	17.43	14.32
60	24.93	22.61	18.49	15.15
61	26.66	24.10	19.72	16.11
62	28.64	25.86	21.08	17.19
63	30.76	27.82	22.62	18.38
64	33.07	29.95	24.25	19.67
65	35.59	32.33	26.07	21.07
66	38.42	34.93	28.15	22.69
67	41.64	37.92	30.53	24.61
68	45.20	41.17	33.19	26.75
69	48.99	44.64	36.06	29.10
70	53.18	48.45	39.23	31.74
71	57.79	52.68	42.70	34.59
72	62.95	57.44	46.59	37.78
73	68.52	62.53	50.76	41.19
74	74.46	67.93	55.18	44.79
75	80.94	73.85	60.01	48.74
76	88.07	80.47	65.37	53.07
77	95.94	88.01	71.37	57.86
78	104.62	96.49	78.07	63.18
79	113.95	105.74	85.31	68.86
80	123.98	115.77	93.18	74.99
81	134.71	126.58	101.63	81.57
82	146.10	138.15	110.62	88.56
83	158.21	150.55	120.20	95.99
84	170.96	163.70	130.36	103.85

TO OBTAIN QUARTERLY, SEMIANNUAL, AND ANNUAL PREMIUMS, MULTIPLY THE ABC QUOTED PREMIUMS BY 3, 6, AND 12, RESPECTIVELY. THE MONTHLY PREMIUMS FOR B₁ SERVICE PLAN AND PAYROLL DEDUCT I ON ISSUES ARE THE PREMIUMS LISTED ABOVE
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Date: 04/26/2017

MUTUAL OF OMAHA INSURANCE COMPANY
SCHEDULE OF MONTHLY RATES FOR POLICY FORMS

LT50-Series 19241 and LT50-Series 19409

PER \$10 DAILY CONFINED CARE/PER \$10 DAILY COMMUNITY BASED BENEFIT

80% HOME HEALTH CARE BENEFIT

BENEFIT -- 1 YEAR

Issue Age	ELIMINATION PERIODS			
	0 Day	20 Day	100 Day	365 Day
18-39	1.49	1.40	1.21	1.06
40	1.66	1.54	1.34	1.18
41	1.72	1.60	1.38	1.20
42	1.79	1.66	1.44	1.26
43	1.86	1.72	1.49	1.30
44	1.93	1.80	1.55	1.33
45	2.02	1.87	1.61	1.39
46	2.10	1.96	1.68	1.44
47	2.20	2.06	1.76	1.50
48	2.32	2.17	1.86	1.60
49	2.45	2.32	1.96	1.66
50	2.58	2.44	2.06	1.74
51	2.74	2.60	2.18	1.84
52	2.92	2.76	2.32	1.96
53	3.10	2.95	2.47	2.08
54	3.29	3.14	2.62	2.20
55	3.53	3.37	2.81	2.34
56	3.77	3.60	3.00	2.50
57	4.06	3.88	3.20	2.65
58	4.36	4.14	3.42	2.83
59	4.66	4.43	3.65	3.01
60	4.98	4.73	3.90	3.22
61	5.36	5.10	4.18	3.43
62	5.80	5.51	4.52	3.71
63	6.31	5.96	4.91	4.04
64	6.86	6.46	5.32	4.36
65	7.48	7.01	5.78	4.78
66	8.15	7.62	6.29	5.20
67	8.92	8.32	6.85	5.65
68	9.76	9.08	7.45	6.11
69	10.64	9.89	8.08	6.58
70	11.63	10.79	8.75	7.10
71	12.71	11.80	9.53	7.70
72	13.94	12.94	10.42	8.40
73	15.30	14.20	11.44	9.22
74	16.78	15.58	12.58	10.16
75	18.38	17.06	13.81	11.18
76	20.10	18.68	15.13	12.25
77	21.98	20.42	16.52	13.36
78	23.99	22.31	18.02	14.56
79	26.14	24.31	19.58	15.77
80	28.42	26.45	21.26	17.09
81	30.83	28.72	23.00	18.43
82	33.38	31.10	24.85	19.86
83	36.07	33.61	26.78	21.34
84	38.89	36.25	28.79	22.87

TO OBTAIN QUARTERLY, SEMIANNUAL, AND ANNUAL PREMIUMS, MULTIPLY THE ABC QUOTED PREMIUMS BY 3, 6, AND 12. RESPECTIVELY . THE MONTHLY PREMIUMS FOR B SERVICE PLAN AND PAYROLL DEDUCTION ISSUES ARE THE PREMIUMS LISTED ABOVE
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MUTUAL OF OMAHA INSURANCE COMPANY
SCHEDULE OF MONTHLY RATES FOR POLICY FORMS

LT50-Series 19241 and LT50-Series 19409

PER \$10 DAILY CONFINED CARE/PER \$10 DAILY COMMUNITY BASED BENEFIT

80% HOME HEALTH CARE BENEFIT

BENEFIT -- 2 YEARS

Issue Age	ELIMINATION PERIODS			
	0 Day	20 Day	100 Day	365 Day
18-39	2.00	1.93	1.66	1.43
40	2.21	2.12	1.84	1.58
41	2.30	2.20	1.90	1.64
42	2.39	2.28	1.97	1.70
43	2.50	2.39	2.05	1.76
44	2.59	2.48	2.12	1.81
45	2.70	2.58	2.21	1.90
46	2.84	2.70	2.32	1.98
47	2.98	2.86	2.42	2.05
48	3.16	3.00	2.54	2.15
49	3.34	3.17	2.68	2.27
50	3.53	3.36	2.84	2.40
51	3.74	3.58	3.01	2.54
52	4.00	3.80	3.19	2.68
53	4.25	4.06	3.41	2.87
54	4.54	4.30	3.62	3.05
55	4.85	4.60	3.86	3.25
56	5.20	4.90	4.12	3.46
57	5.59	5.26	4.42	3.71
58	6.04	5.66	4.74	3.97
59	6.52	6.08	5.08	4.24
60	7.06	6.55	5.46	4.55
61	7.66	7.08	5.88	4.88
62	8.32	7.68	6.35	5.26
63	9.06	8.36	6.86	5.63
64	9.84	9.10	7.42	6.06
65	10.70	9.90	8.02	6.50
66	11.66	10.79	8.69	7.00
67	12.76	11.78	9.48	7.63
68	13.93	12.84	10.34	8.33
69	15.22	13.94	11.27	9.11
70	16.62	15.17	12.29	9.96
71	18.17	16.54	13.45	10.94
72	19.90	18.12	14.76	12.02
73	21.82	19.88	16.24	13.25
74	23.90	21.82	17.86	14.60
75	26.14	23.93	19.60	16.06
76	28.56	26.20	21.47	17.60
77	31.16	28.62	23.45	19.21
78	33.94	31.21	25.54	20.88
79	36.90	33.96	27.74	22.66
80	40.04	36.86	30.07	24.53
81	43.34	39.94	32.51	26.46
82	46.82	43.18	35.08	28.49
83	50.48	46.56	37.74	30.59
84	54.32	50.11	40.54	32.78

TO OBTAIN QUARTERLY, SEMIANNUAL, AND ANNUAL PREMIUMS, MULTIPLY THE ABC QUOTED PREMIUMS BY 3, 6, AND 12, RESPECTIVELY. THE MONTHLY PREMIUMS FOR B/ SERVICE PLAN AND PAYROLL DEDUCTION ISSUES ARE THE PREMIUMS LISTED ABOVE
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MUTUAL OF OMAHA INSURANCE COMPANY
SCHEDULE OF MONTHLY RATES FOR POLICY FORMS

LT50-Series 19241 and LT50-Series 19409

PER \$10 DAILY CONFINED CARE/PER \$10 DAILY COMMUNITY BASED BENEFIT

80% HOME HEALTH CARE BENEFIT

BENEFIT -- 3 YEARS

Issue Age	ELIMINATION PERIODS			
	0 Day	20 Day	100 Day	365 Day
18-39	2.46	2.28	1.96	1.67
40	2.72	2.52	2.15	1.84
41	2.83	2.63	2.24	1.91
42	2.95	2.74	2.33	1.99
43	3.07	2.86	2.44	2.08
44	3.20	2.98	2.52	2.14
45	3.35	3.10	2.62	2.22
46	3.50	3.24	2.75	2.33
47	3.70	3.42	2.89	2.44
48	3.90	3.60	3.04	2.57
49	4.12	3.83	3.20	2.68
50	4.38	4.06	3.38	2.82
51	4.66	4.30	3.58	2.96
52	4.96	4.60	3.80	3.16
53	5.29	4.90	4.06	3.35
54	5.65	5.22	4.32	3.58
55	6.05	5.58	4.62	3.83
56	6.47	5.98	4.94	4.09
57	6.95	6.41	5.29	4.37
58	7.46	6.88	5.68	4.70
59	7.99	7.38	6.10	5.03
60	8.57	7.93	6.55	5.41
61	9.22	8.54	7.04	5.80
62	9.96	9.22	7.60	6.26
63	10.76	9.96	8.20	6.76
64	11.63	10.72	8.84	7.30
65	12.59	11.56	9.55	7.90
66	13.66	12.53	10.34	8.53
67	14.88	13.66	11.26	9.28
68	16.25	14.96	12.28	10.08
69	17.74	16.40	13.39	10.93
70	19.36	17.98	14.62	11.88
71	21.13	19.72	15.95	12.91
72	23.10	21.58	17.44	14.09
73	25.22	23.60	19.04	15.36
74	27.49	25.78	20.77	16.73
75	29.93	28.09	22.63	18.23
76	32.59	30.58	24.64	19.85
77	35.50	33.28	26.83	21.64
78	38.66	36.14	29.18	23.56
79	42.04	39.19	31.72	25.66
80	45.65	42.41	34.39	27.89
81	49.48	45.82	37.24	30.25
82	53.53	49.40	40.24	32.78
83	57.82	53.16	43.40	35.44
84	62.32	57.11	46.74	38.26

TO OBTAIN QUARTERLY, SEMIANNUAL, AND ANNUAL PREMIUMS, MULTIPLY THE ABC PREMIUMS BY 3, 6 AND 12 RESPECTIVELY. THE MONTHLY PREMIUMS FOR BANK SERV PAYROLL DEDUCTION ISSUES ARE THE PREMIUMS LISTED ABOVE.

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MUTUAL OF OMAHA INSURANCE COMPANY
SCHEDULE OF MONTHLY RATES FOR POLICY FORMS

LT50-Series 19241 and LT50-Series 19409

PER \$10 DAILY CONFINED CARE/PER \$10 DAILY COMMUNITY BASED BENEFIT

80% HOME HEALTH CARE BENEFIT

BENEFIT -- 5 YEARS

Issue Age	ELIMINATION PERIODS			
	0 Day	20 Day	100 Day	365 Day
18-39	3.29	3.10	2.64	2.24
40	3.63	3.43	2.88	2.42
41	3.78	3.55	2.99	2.52
42	3.94	3.71	3.11	2.62
43	4.10	3.87	3.23	2.71
44	4.28	4.02	3.37	2.83
45	4.47	4.18	3.50	2.93
46	4.68	4.40	3.67	3.08
47	4.93	4.62	3.87	3.22
48	5.20	4.87	4.07	3.41
49	5.52	5.16	4.31	3.61
50	5.85	5.47	4.57	3.82
51	6.23	5.80	4.86	4.07
52	6.62	6.18	5.16	4.30
53	7.05	6.60	5.52	4.60
54	7.50	7.05	5.87	4.90
55	7.99	7.51	6.27	5.24
56	8.51	8.04	6.71	5.59
57	9.11	8.62	7.17	5.95
58	9.75	9.22	7.63	6.33
59	10.42	9.85	8.11	6.68
60	11.13	10.52	8.65	7.11
61	11.95	11.26	9.23	7.57
62	12.86	12.12	9.91	8.11
63	13.88	13.02	10.64	8.69
64	14.96	13.98	11.42	9.33
65	16.15	15.05	12.29	10.03
66	17.48	16.26	13.27	10.82
67	19.01	17.67	14.39	11.73
68	20.70	19.23	15.63	12.72
69	22.55	20.93	16.98	13.78
70	24.60	22.81	18.48	14.97
71	26.80	24.87	20.12	16.28
72	29.24	27.15	21.96	17.74
73	31.86	29.59	23.91	19.33
74	34.63	32.19	26.00	21.03
75	37.63	34.98	28.29	22.88
76	40.93	38.06	30.80	24.90
77	44.59	41.46	33.57	27.17
78	48.62	45.19	36.59	29.62
79	52.94	49.21	39.88	32.32
80	57.61	53.50	43.38	35.18
81	62.58	58.10	47.14	38.24
82	67.87	62.96	51.13	41.51
83	73.48	68.12	55.36	44.99
84	79.41	73.58	59.84	48.66

TO OBTAIN QUARTERLY, SEMIANNUAL, AND ANNUAL PREMIUMS,
MULTIPLY THE ABOVE QUOTED PREMIUMS BY 3, 6, AND 12,
RESPECTIVELY. THE MONTHLY PREMIUMS FOR BANK SERVICE PLAN
AND PAYROLL DEDUCTION ISSUES ARE THE PREMIUMS LISTED ABOVE.
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SCHEDULE OF MONTHLY RATES FOR POLICY FORMS

LT50-Series 19241 and LT50-Series 19409

PER \$10 DAILY CONFINED CARE/PER \$10 DAILY COMMUNITY BASED BENEFIT

80% HOME HEALTH CARE BENEFIT

BENEFIT -- LIFETIME

Issue Age	ELIMINATION PERIODS			
	0 Day	20 Day	100 Day	365 Day
18-39	7.48	7.14	5.91	4.84
40	8.22	7.83	6.47	5.38
41	8.53	8.11	6.74	5.62
42	8.88	8.46	7.02	5.82
43	9.23	8.81	7.29	6.04
44	9.66	9.22	7.68	6.38
45	10.11	9.63	8.02	6.69
46	10.58	10.11	8.45	7.07
47	11.12	10.61	8.86	7.37
48	11.74	11.14	9.27	7.77
49	12.35	11.74	9.80	8.18
50	13.01	12.35	10.32	8.58
51	13.71	13.01	10.87	9.07
52	14.54	13.74	11.48	9.57
53	15.36	14.47	12.05	10.03
54	16.25	15.24	12.67	10.57
55	17.20	16.04	13.36	11.12
56	18.27	16.95	14.09	11.74
57	19.44	17.95	14.90	12.37
58	20.69	19.04	15.80	13.11
59	22.01	20.19	16.74	13.85
60	23.47	21.47	17.74	14.64
61	25.08	22.91	18.92	15.63
62	26.91	24.58	20.24	16.65
63	28.95	26.45	21.71	17.83
64	31.10	28.45	23.26	19.03
65	33.48	30.71	25.02	20.42
66	36.13	33.19	27.00	21.98
67	39.17	35.98	29.31	23.86
68	42.50	39.10	31.84	25.94
69	46.10	42.40	34.59	28.22
70	49.98	46.03	37.62	30.74
71	54.36	50.07	40.97	33.53
72	59.19	54.56	44.70	36.63
73	64.43	59.40	48.69	39.91
74	70.05	64.55	52.92	43.40
75	76.13	70.15	57.56	47.20
76	82.86	76.44	62.69	51.43
77	90.24	83.62	68.47	56.06
78	98.37	91.66	74.93	61.25
79	107.18	100.45	81.88	66.76
80	116.61	109.99	89.40	72.67
81	126.72	120.26	97.49	79.04
82	137.43	131.25	106.13	85.82
83	148.79	143.01	115.35	93.00
84	160.77	155.51	125.07	100.58

TO OBTAIN QUARTERLY, SEMIANNUAL, AND ANNUAL PREMIUMS,
MULTIPLY THE ABOVE QUOTED PREMIUMS BY 3, 6, AND 12,
RESPECTIVELY. THE MONTHLY PREMIUMS FOR BANK SERVICE PLAN
AND PAYROLL DEDUCTION ISSUES ARE THE PREMIUMS LISTED ABOVE.
R25387-44-4

Date: 04/26/2017

MUTUAL OF OMAHA INSURANCE COMPANY
SCHEDULE OF MONTHLY RATES FOR POLICY FORMS

LT50-Series 19241 and LT50-Series 19409

PER \$10 DAILY CONFINED CARE/PER \$10 DAILY COMMUNITY BASED BENEFIT

50% HOME HEALTH CARE BENEFIT

BENEFIT -- 1 YEAR

Issue Age	Elimination Periods			
	0 Day	20 Day	100 Day	365 Day
18-39	1.24	1.18	1.02	0.89
40	1.38	1.28	1.12	0.96
41	1.43	1.33	1.15	1.00
42	1.49	1.38	1.19	1.03
43	1.55	1.44	1.24	1.07
44	1.61	1.50	1.30	1.13
45	1.68	1.56	1.36	1.18
46	1.75	1.63	1.40	1.20
47	1.85	1.72	1.48	1.26
48	1.94	1.82	1.55	1.32
49	2.04	1.92	1.63	1.38
50	2.15	2.04	1.72	1.45
51	2.27	2.17	1.84	1.54
52	2.44	2.32	1.94	1.63
53	2.59	2.47	2.06	1.72
54	2.75	2.63	2.20	1.82
55	2.95	2.82	2.35	1.96
56	3.16	3.01	2.51	2.09
57	3.40	3.22	2.68	2.23
58	3.64	3.46	2.86	2.36
59	3.89	3.70	3.05	2.51
60	4.16	3.96	3.25	2.68
61	4.48	4.25	3.49	2.87
62	4.86	4.60	3.77	3.10
63	5.27	4.98	4.09	3.36
64	5.74	5.40	4.44	3.65
65	6.24	5.86	4.84	4.00
66	6.80	6.36	5.26	4.33
67	7.45	6.95	5.72	4.72
68	8.14	7.58	6.22	5.09
69	8.88	8.26	6.74	5.50
70	9.71	9.02	7.31	5.92
71	10.62	9.85	7.96	6.43
72	11.64	10.80	8.71	7.02
73	12.78	11.86	9.56	7.72
74	14.02	13.01	10.51	8.50
75	15.35	14.26	11.54	9.35
76	16.79	15.60	12.64	10.24
77	18.36	17.05	13.80	11.17
78	20.04	18.64	15.05	12.16
79	21.83	20.30	16.36	13.18
80	23.74	22.08	17.75	14.27
81	25.76	23.98	19.22	15.40
82	27.88	25.97	20.75	16.58
83	30.12	28.07	22.36	17.81
84	32.48	30.28	24.04	19.09

TO OBTAIN QUARTERLY, SEMIANNUAL, AND ANNUAL PREMIUMS,
MULTIPLY THE ABOVE QUOTED PREMIUMS BY 3, 6, AND 12,
RESPECTIVELY. THE MONTHLY PREMIUMS FOR BANK SERVICE PLAN
AND PAYROLL DEDUCTION ISSUES ARE THE PREMIUMS LISTED ABOVE.
R25387-44-4

Date: 04/26/2017

MUTUAL OF OMAHA INSURANCE COMPANY
SCHEDULE OF MONTHLY RATES FOR POLICY FORMS

LT50-Series 19241 and LT50-Series 19409

PER \$10 DAILY CONFINED CARE/PER \$10 DAILY COMMUNITY BASED BENEFIT

50% HOME HEALTH CARE BENEFIT

BENEFIT -- 2 YEARS

Issue Age	Elimination Periods			
	0 Day	20 Day	100 Day	365 Day
18-39	1.69	1.63	1.42	1.22
40	1.88	1.80	1.55	1.33
41	1.96	1.87	1.61	1.39
42	2.02	1.94	1.67	1.44
43	2.11	2.02	1.73	1.48
44	2.20	2.10	1.80	1.54
45	2.30	2.20	1.88	1.61
46	2.41	2.30	1.96	1.66
47	2.53	2.41	2.05	1.74
48	2.68	2.56	2.15	1.81
49	2.82	2.69	2.27	1.92
50	2.99	2.86	2.41	2.04
51	3.17	3.02	2.56	2.15
52	3.40	3.22	2.70	2.26
53	3.61	3.43	2.89	2.44
54	3.85	3.65	3.07	2.58
55	4.10	3.89	3.28	2.75
56	4.42	4.15	3.50	2.95
57	4.74	4.48	3.74	3.13
58	5.12	4.79	4.02	3.37
59	5.53	5.15	4.30	3.59
60	5.98	5.56	4.63	3.86
61	6.49	6.00	4.98	4.13
62	7.06	6.52	5.39	4.46
63	7.68	7.09	5.81	4.76
64	8.34	7.72	6.28	5.12
65	9.08	8.39	6.79	5.50
66	9.88	9.16	7.36	5.92
67	10.80	10.00	8.04	6.47
68	11.81	10.88	8.76	7.06
69	12.90	11.82	9.56	7.73
70	14.09	12.85	10.42	8.45
71	15.40	14.03	11.40	9.26
72	16.87	15.35	12.52	10.21
73	18.50	16.86	13.76	11.23
74	20.26	18.50	15.13	12.37
75	22.16	20.29	16.62	13.61
76	24.22	22.21	18.20	14.92
77	26.42	24.28	19.88	16.28
78	28.78	26.46	21.64	17.70
79	31.28	28.78	23.52	19.22
80	33.94	31.25	25.50	20.81
81	36.74	33.86	27.56	22.43
82	39.70	36.60	29.74	24.16
83	42.80	39.47	32.00	25.94
84	46.06	42.48	34.36	27.79

TO OBTAIN QUARTERLY, SEMIANNUAL, AND ANNUAL PREMIUMS,
MULTIPLY THE ABOVE QUOTED PREMIUMS BY 3, 6, AND 12,
RESPECTIVELY. THE MONTHLY PREMIUMS FOR BANK SERVICE PLAN
AND PAYROLL DEDUCTION ISSUES ARE THE PREMIUMS LISTED ABOVE.
R25387-44-4

Date: 04/26/2017

MUTUAL OF OMAHA INSURANCE COMPANY
SCHEDULE OF MONTHLY RATES FOR POLICY FORMS

LT50-Series 19241 and LT50-Series 19409

PER \$10 DAILY CONFINED CARE/PER \$10 DAILY COMMUNITY BASED BENEFIT

50% HOME HEALTH CARE BENEFIT

BENEFIT -- 3 YEARS

Issue Age	Elimination Periods			
	0 Day	20 Day	100 Day	365 Day
18-39	2.12	1.97	1.67	1.42
40	2.35	2.17	1.86	1.60
41	2.44	2.26	1.93	1.66
42	2.54	2.35	2.00	1.70
43	2.64	2.45	2.08	1.78
44	2.75	2.56	2.17	1.85
45	2.88	2.66	2.26	1.90
46	3.01	2.80	2.38	2.02
47	3.17	2.94	2.48	2.09
48	3.36	3.10	2.62	2.20
49	3.55	3.28	2.75	2.32
50	3.76	3.49	2.90	2.41
51	4.00	3.70	3.07	2.56
52	4.26	3.95	3.28	2.71
53	4.56	4.21	3.49	2.89
54	4.87	4.49	3.71	3.07
55	5.20	4.79	3.97	3.29
56	5.57	5.14	4.24	3.50
57	5.98	5.51	4.56	3.77
58	6.42	5.92	4.90	4.04
59	6.86	6.34	5.24	4.33
60	7.36	6.82	5.63	4.66
61	7.93	7.34	6.06	5.00
62	8.57	7.94	6.54	5.39
63	9.26	8.56	7.06	5.82
64	10.00	9.22	7.61	6.29
65	10.82	9.94	8.21	6.79
66	11.75	10.78	8.89	7.34
67	12.80	11.75	9.68	7.97
68	13.97	12.88	10.57	8.68
69	15.25	14.11	11.53	9.42
70	16.66	15.46	12.58	10.22
71	18.19	16.96	13.72	11.11
72	19.87	18.56	15.00	12.12
73	21.70	20.30	16.38	13.22
74	23.64	22.18	17.87	14.40
75	25.74	24.16	19.46	15.67
76	28.03	26.32	21.20	17.08
77	30.54	28.62	23.08	18.60
78	33.25	31.09	25.10	20.26
79	36.16	33.71	27.28	22.06
80	39.26	36.49	29.59	23.99
81	42.55	39.41	32.03	26.03
82	46.04	42.49	34.62	28.21
83	49.74	45.73	37.33	30.47
84	53.62	49.12	40.20	32.90

TO OBTAIN QUARTERLY, SEMIANNUAL, AND ANNUAL PREMIUMS,
MULTIPLY THE ABOVE QUOTED PREMIUMS BY 3, 6, AND 12,
RESPECTIVELY. THE MONTHLY PREMIUMS FOR BANK SERVICE PLAN
AND PAYROLL DEDUCTION ISSUES ARE THE PREMIUMS LISTED ABOVE.
R25387-44-4

Date: 04/26/2017

MUTUAL OF OMAHA INSURANCE COMPANY
SCHEDULE OF MONTHLY RATES FOR POLICY FORMS

LT50-Series 19241 and LT50-Series 19409

PER \$10 DAILY CONFINED CARE/PER \$10 DAILY COMMUNITY BASED BENEFIT

50% HOME HEALTH CARE BENEFIT

BENEFIT -- 5 YEARS

Issue Age	Elimination Periods			
	0 Day	20 Day	100 Day	365 Day
18-39	2.90	2.75	2.33	1.98
40	3.21	3.03	2.55	2.16
41	3.34	3.15	2.65	2.23
42	3.48	3.28	2.75	2.31
43	3.62	3.41	2.85	2.38
44	3.77	3.54	2.97	2.49
45	3.95	3.71	3.10	2.60
46	4.14	3.87	3.23	2.71
47	4.36	4.08	3.41	2.83
48	4.60	4.30	3.59	2.99
49	4.87	4.55	3.81	3.18
50	5.16	4.83	4.04	3.38
51	5.50	5.13	4.28	3.58
52	5.85	5.46	4.57	3.82
53	6.23	5.82	4.86	4.07
54	6.62	6.22	5.19	4.33
55	7.06	6.64	5.54	4.63
56	7.52	7.11	5.92	4.93
57	8.04	7.61	6.31	5.24
58	8.60	8.14	6.73	5.57
59	9.19	8.69	7.17	5.93
60	9.83	9.30	7.65	6.29
61	10.55	9.94	8.16	6.71
62	11.35	10.69	8.76	7.17
63	12.25	11.51	9.39	7.67
64	13.21	12.35	10.09	8.24
65	14.25	13.29	10.85	8.86
66	15.44	14.37	11.73	9.55
67	16.78	15.59	12.72	10.35
68	18.28	16.97	13.81	11.23
69	19.92	18.49	15.00	12.19
70	21.70	20.14	16.31	13.21
71	23.65	21.97	17.78	14.39
72	25.82	23.97	19.38	15.69
73	28.12	26.13	21.12	17.07
74	30.58	28.42	22.97	18.57
75	33.22	30.89	24.99	20.21
76	36.15	33.61	27.18	21.99
77	39.38	36.61	29.63	24.00
78	42.92	39.91	32.32	26.18
79	46.75	43.44	35.22	28.56
80	50.86	47.25	38.30	31.06
81	55.24	51.29	41.62	33.77
82	59.93	55.59	45.14	36.67
83	64.88	60.17	48.88	39.72
84	70.11	64.99	52.84	42.96

TO OBTAIN QUARTERLY, SEMIANNUAL, AND ANNUAL PREMIUMS,
MULTIPLY THE ABOVE QUOTED PREMIUMS BY 3, 6, AND 12,
RESPECTIVELY. THE MONTHLY PREMIUMS FOR BANK SERVICE PLAN
AND PAYROLL DEDUCTION ISSUES ARE THE PREMIUMS LISTED ABOVE.
R25387-44-4

Date: 04/26/2017

MUTUAL OF OMAHA INSURANCE COMPANY
SCHEDULE OF MONTHLY RATES FOR POLICY FORMS

LT50-Series 19241 and LT50-Series 19409

PER \$10 DAILY CONFINED CARE/PER \$10 DAILY COMMUNITY BASED BENEFIT

50% HOME HEALTH CARE BENEFIT

BENEFIT -- LIFETIME

Issue Age	Elimination Periods			
	0 Day	20 Day	100 Day	365 Day
18-39	6.76	6.47	5.31	4.38
40	7.44	7.08	5.89	4.84
41	7.72	7.36	6.08	5.04
42	8.02	7.64	6.37	5.28
43	8.34	7.98	6.62	5.53
44	8.76	8.34	6.93	5.77
45	9.15	8.72	7.28	6.07
46	9.61	9.15	7.64	6.38
47	10.07	9.61	8.00	6.69
48	10.61	10.11	8.45	7.07
49	11.18	10.65	8.87	7.38
50	11.75	11.18	9.33	7.79
51	12.44	11.78	9.86	8.23
52	13.12	12.44	10.35	8.63
53	13.92	13.09	10.91	9.12
54	14.71	13.81	11.50	9.57
55	15.58	14.54	12.08	10.05
56	16.54	15.34	12.77	10.65
57	17.58	16.25	13.51	11.25
58	18.73	17.24	14.29	11.87
59	19.94	18.29	15.15	12.55
60	21.23	19.44	16.04	13.25
61	22.69	20.73	17.10	14.11
62	24.38	22.23	18.32	15.09
63	26.20	23.93	19.67	16.15
64	28.15	25.75	21.07	17.24
65	30.30	27.81	22.68	18.49
66	32.73	30.04	24.43	19.90
67	35.44	32.59	26.54	21.61
68	38.47	35.40	28.82	23.48
69	41.72	38.41	31.33	25.56
70	45.26	41.70	34.05	27.82
71	49.23	45.31	37.08	30.34
72	53.58	49.39	40.47	33.18
73	58.32	53.76	44.07	36.14
74	63.42	58.42	47.90	39.27
75	68.92	63.50	52.11	42.76
76	74.99	69.22	56.75	46.54
77	81.71	75.69	61.99	50.78
78	89.07	82.97	67.82	55.42
79	97.03	90.94	74.11	60.39
80	105.58	99.53	80.93	65.78
81	114.70	108.87	88.25	71.55
82	124.40	118.84	96.08	77.71
83	134.70	129.50	104.41	84.20
84	145.56	140.79	113.23	91.08

TO OBTAIN QUARTERLY, SEMIANNUAL, AND ANNUAL PREMIUMS,
MULTIPLY THE ABOVE QUOTED PREMIUMS BY 3, 6, AND 12,
RESPECTIVELY. THE MONTHLY PREMIUMS FOR BANK SERVICE PLAN
AND PAYROLL DEDUCTION ISSUES ARE THE PREMIUMS LISTED ABOVE.
R25387-44-4

Date: 04/26/2017

MUTUAL OF OMAHA INSURANCE COMPANY
SCHEDULE OF MONTHLY RATES FOR RIDER FORM 0DX5M

PER \$10 DAILY CONFINED CARE/PER \$10 DAILY COMMUNITY BASED BENEFIT
100% HOME HEALTH CARE BENEFIT

Issue Age	BENEFIT -- 1 YEAR			
	ELIMINATION PERIODS			
	0 Day	20 Day	100 Day	365 Day
18-39	2.80	2.60	2.24	1.93
40	3.06	2.81	2.42	2.09
41	3.13	2.88	2.47	2.12
42	3.22	2.95	2.54	2.18
43	3.34	3.05	2.62	2.26
44	3.41	3.13	2.68	2.30
45	3.52	3.22	2.76	2.38
46	3.61	3.34	2.82	2.39
47	3.72	3.46	2.92	2.46
48	3.88	3.59	3.04	2.57
49	4.01	3.73	3.13	2.62
50	4.16	3.90	3.28	2.74
51	4.30	4.06	3.37	2.80
52	4.48	4.22	3.50	2.90
53	4.64	4.38	3.62	2.99
54	4.81	4.54	3.76	3.10
55	4.96	4.68	3.86	3.19
56	5.14	4.85	4.01	3.32
57	5.33	5.03	4.13	3.40
58	5.53	5.21	4.27	3.50
59	5.74	5.40	4.42	3.60
60	5.98	5.62	4.58	3.74
61	6.17	5.81	4.72	3.83
62	6.44	6.05	4.91	4.00
63	6.73	6.29	5.14	4.20
64	7.01	6.53	5.32	4.33
65	7.32	6.79	5.56	4.54
66	7.66	7.08	5.80	4.73
67	8.00	7.38	6.02	4.91
68	8.39	7.73	6.28	5.09
69	8.81	8.11	6.55	5.29
70	9.25	8.51	6.83	5.48
71	9.68	8.90	7.12	5.68
72	10.08	9.25	7.39	5.90
73	10.42	9.55	7.63	6.10
74	10.70	9.82	7.86	6.29
75	10.98	10.09	8.09	6.49
76	11.28	10.38	8.32	6.67
77	11.65	10.72	8.58	6.88
78	12.05	11.09	8.87	7.10
79	12.50	11.52	9.19	7.33
80	12.98	11.96	9.52	7.58
81	13.50	12.43	9.86	7.82
82	14.04	12.95	10.25	8.11
83	14.62	13.50	10.64	8.38
84	15.25	14.08	11.08	8.71

TO OBTAIN QUARTERLY, SEMIANNUAL, AND ANNUAL PREMIUMS, MULTIPLY THE ABC QUOTED PREMIUMS BY 3, 6, AND 12, RESPECTIVELY. THE MONTHLY PREMIUMS FOR BANK SERVICE PLAN AND PAYROLL DEDUCTION ISSUES ARE THE PREMIUMS LISTED , R25387-44-3

Date: 04/26/2017

MUTUAL OF OMAHA INSURANCE COMPANY
SCHEDULE OF MONTHLY RATES FOR RIDER FORM 0DX5M

PER \$10 DAILY CONFINED CARE/PER \$10 DAILY COMMUNITY BASED BENEFIT
100% HOME HEALTH CARE BENEFIT

BENEFIT -- TWO YEARS

Issue Age	ELIMINATION PERIODS			
	0 Day	20 Day	100 Day	365 Day
18-39	3.96	3.78	3.22	2.75
40	4.28	4.07	3.48	2.98
41	4.39	4.18	3.55	3.04
42	4.52	4.30	3.66	3.13
43	4.66	4.42	3.76	3.19
44	4.78	4.54	3.85	3.28
45	4.94	4.66	3.94	3.34
46	5.08	4.79	4.06	3.43
47	5.24	4.94	4.15	3.48
48	5.39	5.09	4.27	3.58
49	5.56	5.26	4.39	3.67
50	5.76	5.44	4.54	3.78
51	5.95	5.62	4.69	3.92
52	6.16	5.80	4.82	4.01
53	6.38	5.99	5.00	4.18
54	6.58	6.19	5.15	4.28
55	6.84	6.41	5.35	4.48
56	7.12	6.65	5.54	4.61
57	7.42	6.91	5.74	4.78
58	7.75	7.19	5.98	4.96
59	8.12	7.50	6.20	5.12
60	8.50	7.81	6.44	5.32
61	8.90	8.14	6.70	5.52
62	9.28	8.48	6.94	5.68
63	9.62	8.80	7.16	5.83
64	9.98	9.13	7.36	5.93
65	10.33	9.47	7.60	6.08
66	10.74	9.84	7.85	6.28
67	11.26	10.30	8.20	6.53
68	11.89	10.85	8.65	6.90
69	12.67	11.50	9.20	7.36
70	13.46	12.17	9.77	7.84
71	14.20	12.80	10.31	8.30
72	14.83	13.36	10.78	8.70
73	15.30	13.80	11.15	9.01
74	15.68	14.16	11.47	9.29
75	16.00	14.48	11.75	9.54
76	16.32	14.82	12.04	9.77
77	16.72	15.20	12.34	10.02
78	17.17	15.62	12.66	10.26
79	17.65	16.08	13.00	10.51
80	18.16	16.54	13.37	10.81
81	18.67	17.04	13.73	11.08
82	19.24	17.54	14.11	11.35
83	19.80	18.08	14.50	11.63
84	20.39	18.62	14.92	11.95

TO OBTAIN QUARTERLY, SEMIANNUAL, AND ANNUAL PREMIUMS, MULTIPLY THE ABC QUOTED PREMIUMS BY 3, 6, AND 12, RESPECTIVELY. THE MONTHLY PREMIUMS FOR B, SERVICE PLAN AND PAYROLL DEDUCTION ISSUES ARE THE PREMIUMS LISTED ABO VI R25387-44-3

Date: 04/26/2017

MUTUAL OF OMAHA INSURANCE COMPANY
SCHEDULE OF MONTHLY RATES FOR RIDER FORM 0DX5M

PER \$10 DAILY CONFINED CARE/PER \$10 DAILY COMMUNITY BASED BENEFIT
100% HOME HEALTH CARE BENEFIT

Issue Age	BENEFIT -- 3 YEARS			
	ELIMINATION PERIOD			
	0 Day	20 Day	100 Day	365 Day
18-39	4.94	4.54	3.83	3.23
40	5.40	4.96	4.19	3.54
41	5.53	5.09	4.30	3.64
42	5.69	5.22	4.42	3.73
43	5.82	5.34	4.51	3.80
44	5.93	5.45	4.58	3.85
45	6.10	5.57	4.70	3.96
46	6.23	5.70	4.78	4.01
47	6.40	5.87	4.91	4.12
48	6.64	6.07	5.06	4.22
49	6.84	6.28	5.21	4.32
50	7.14	6.53	5.39	4.44
51	7.39	6.78	5.57	4.57
52	7.68	7.03	5.77	4.74
53	7.98	7.30	5.98	4.90
54	8.26	7.55	6.19	5.08
55	8.54	7.79	6.38	5.23
56	8.83	8.06	6.61	5.42
57	9.16	8.35	6.84	5.60
58	9.48	8.65	7.08	5.80
59	9.82	8.98	7.34	6.00
60	10.18	9.32	7.62	6.23
61	10.52	9.66	7.88	6.43
62	10.90	9.98	8.14	6.64
63	11.21	10.26	8.38	6.85
64	11.53	10.51	8.60	7.03
65	11.86	10.79	8.81	7.19
66	12.19	11.08	9.04	7.38
67	12.58	11.42	9.32	7.60
68	13.03	11.88	9.66	7.86
69	13.57	12.43	10.06	8.14
70	14.15	13.00	10.46	8.41
71	14.65	13.51	10.84	8.69
72	15.06	13.92	11.14	8.92
73	15.28	14.15	11.30	9.04
74	15.31	14.21	11.35	9.07
75	15.34	14.26	11.38	9.07
76	15.46	14.36	11.45	9.13
77	15.76	14.62	11.68	9.32
78	16.25	15.05	12.04	9.62
79	16.90	15.58	12.49	10.01
80	17.63	16.22	13.02	10.45
81	18.49	16.94	13.62	10.96
82	19.45	17.77	14.33	11.56
83	20.54	18.70	15.11	12.22
84	21.73	19.72	15.97	12.94

TO OBTAIN QUARTERLY, SEMIANNUAL, AND ANNUAL PREMIUMS, MULTIPLY THE ABC QUOTED PREMIUMS BY 3, 6, AND 12, RESPECTIVELY. THE MONTHLY PREMIUMS FOR B, SERVICE PLAN AND PAYROLL DEDUCTION ISSUES ARE THE PREMIUMS LISTED ABOVE
R25387-44-3

Date: 04/26/2017

MUTUAL OF OMAHA INSURANCE COMPANY
SCHEDULE OF MONTHLY RATES FOR RIDER FORM 0DX5M

PER \$10 DAILY CONFINED CARE/PER \$10 DAILY COMMUNITY BASED BENEFIT
100% HOME HEALTH CARE BENEFIT

Issue Age	BENEFIT -- 5 YEARS			
	ELIMINATION PERIODS			
	0 Day	20 Day	100 Day	365 Day
18-39	7.04	6.56	5.53	4.68
40	7.63	7.11	5.94	4.97
41	7.84	7.30	6.08	5.07
42	8.04	7.50	6.25	5.19
43	8.24	7.68	6.35	5.26
44	8.43	7.85	6.52	5.41
45	8.67	8.04	6.66	5.50
46	8.89	8.25	6.82	5.63
47	9.15	8.49	7.02	5.81
48	9.48	8.78	7.26	6.01
49	9.81	9.09	7.50	6.19
50	10.19	9.43	7.81	6.48
51	10.60	9.78	8.10	6.71
52	10.96	10.14	8.38	6.93
53	11.33	10.47	8.69	7.19
54	11.64	10.84	8.95	7.38
55	12.01	11.20	9.24	7.63
56	12.36	11.56	9.53	7.84
57	12.75	11.94	9.81	8.07
58	13.13	12.32	10.09	8.27
59	13.57	12.69	10.38	8.49
60	14.00	13.09	10.67	8.69
61	14.48	13.51	10.97	8.90
62	14.96	13.94	11.29	9.15
63	15.44	14.37	11.62	9.42
64	15.97	14.80	11.97	9.68
65	16.50	15.24	12.32	9.94
66	17.07	15.71	12.68	10.24
67	17.64	16.23	13.08	10.54
68	18.27	16.81	13.52	10.87
69	18.99	17.45	14.01	11.26
70	19.71	18.13	14.53	11.66
71	20.42	18.77	15.03	12.03
72	21.08	19.38	15.50	12.40
73	21.65	19.91	15.93	12.74
74	22.17	20.38	16.31	13.06
75	22.68	20.88	16.71	13.38
76	23.22	21.37	17.11	13.68
77	23.88	21.98	17.61	14.11
78	24.63	22.66	18.17	14.56
79	25.43	23.41	18.77	15.05
80	26.31	24.20	19.42	15.59
81	27.21	25.03	20.11	16.15
82	28.23	25.93	20.83	16.74
83	29.26	26.86	21.60	17.37
84	30.36	27.85	22.43	18.06

TO OBTAIN QUARTERLY, SEMIANNUAL, AND ANNUAL PREMIUMS, MULTIPLY THE ABOVE QUOTED PREMIUMS BY 3, 6, AND 12, RESPECTIVELY. THE MONTHLY PREMIUMS FOR B. SERVICE PLAN AND PAYROLL DEDUCTION ISSUES ARE THE PREMIUMS LISTED ABOVE
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Date: 04/26/2017

MUTUAL OF OMAHA INSURANCE COMPANY
SCHEDULE OF MONTHLY RATES FOR RIDER FORM 0DX5M

PER \$10 DAILY CONFINED CARE/PER \$10 DAILY COMMUNITY BASED BENEFIT
100% HOME HEALTH CARE BENEFIT

Issue Age	BENEFIT -- LIFETIME			
	ELIMINATION PERIODS			
	0 Day	20 Day	100 Day	365 Day
18-39	15.28	14.40	11.80	9.67
40	16.16	15.28	12.51	10.22
41	16.59	15.63	12.84	10.56
42	16.95	16.00	13.17	10.82
43	17.39	16.41	13.49	11.09
44	17.85	16.84	13.87	11.41
45	18.32	17.30	14.27	11.80
46	18.88	17.80	14.73	12.18
47	19.41	18.32	15.13	12.49
48	19.98	18.85	15.57	12.86
49	20.64	19.42	16.08	13.29
50	21.28	20.02	16.54	13.65
51	21.91	20.57	16.99	14.05
52	22.49	21.05	17.38	14.35
53	23.00	21.44	17.69	14.56
54	23.39	21.68	17.89	14.76
55	23.79	21.97	18.11	14.91
56	24.19	22.26	18.32	15.07
57	24.79	22.67	18.62	15.29
58	25.48	23.24	19.08	15.68
59	26.27	23.88	19.58	16.04
60	27.13	24.56	20.10	16.45
61	28.00	25.34	20.70	16.91
62	28.87	26.12	21.29	17.38
63	29.81	26.96	21.91	17.80
64	30.78	27.90	22.59	18.32
65	31.75	28.81	23.27	18.80
66	32.81	29.82	24.04	19.34
67	33.85	30.82	24.82	19.99
68	34.96	31.84	25.69	20.74
69	36.17	32.93	26.62	21.52
70	37.34	34.02	27.53	22.30
71	38.58	35.15	28.47	23.08
72	39.73	36.26	29.41	23.87
73	40.89	37.30	30.28	24.58
74	41.99	38.29	31.10	25.27
75	43.13	39.34	31.98	25.97
76	44.29	40.48	32.86	26.70
77	45.49	41.72	33.83	27.44
78	46.75	43.12	34.88	28.24
79	48.05	44.56	35.97	29.07
80	49.44	46.16	37.15	29.89
81	50.95	47.87	38.40	30.82
82	52.48	49.63	39.75	31.82
83	54.15	51.56	41.17	32.86
84	55.90	53.50	42.60	33.93

TO OBTAIN QUARTERLY, SEMIANNUAL, AND ANNUAL PREMIUMS, MULTIPLY THE ABOVE QUOTED PREMIUMS BY 3, 6, AND 12, RESPECTIVELY. THE MONTHLY PREMIUMS FOR B. SERVICE PLAN AND PAYROLL DEDUCTION ISSUES ARE THE PREMIUMS LISTED ABOVE.
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Date: 04/26/2017

MUTUAL OF OMAHA INSURANCE COMPANY
SCHEDULE OF MONTHLY RATES FOR RIDER FORM 0DX5M

PER \$10 DAILY CONFINED CARE/PER \$8 DAILY COMMUNITY BASED BENEFIT
80% HOME HEALTH CARE BENEFIT

Issue Age	BENEFIT -- 1 YEAR			
	ELIMINATION PERIODS			
	0 Day	20 Day	100 Day	365 Day
18-39	2.52	2.36	2.08	1.81
40	2.76	2.56	2.21	1.92
41	2.82	2.62	2.27	1.97
42	2.89	2.70	2.32	1.99
43	3.00	2.78	2.41	2.09
44	3.07	2.84	2.45	2.12
45	3.16	2.92	2.53	2.20
46	3.26	3.04	2.59	2.21
47	3.36	3.14	2.69	2.32
48	3.47	3.28	2.80	2.38
49	3.61	3.40	2.87	2.44
50	3.76	3.55	3.00	2.53
51	3.88	3.70	3.10	2.60
52	4.03	3.85	3.22	2.68
53	4.18	4.00	3.32	2.76
54	4.34	4.13	3.46	2.89
55	4.48	4.26	3.53	2.93
56	4.63	4.42	3.68	3.06
57	4.80	4.57	3.82	3.17
58	4.97	4.74	3.92	3.24
59	5.16	4.91	4.06	3.35
60	5.38	5.11	4.21	3.46
61	5.56	5.28	4.34	3.56
62	5.82	5.50	4.52	3.71
63	6.07	5.74	4.72	3.88
64	6.32	5.94	4.90	4.03
65	6.59	6.18	5.10	4.20
66	6.90	6.46	5.32	4.39
67	7.21	6.72	5.54	4.56
68	7.55	7.04	5.76	4.72
69	7.94	7.39	6.02	4.91
70	8.33	7.74	6.28	5.09
71	8.72	8.09	6.52	5.26
72	9.08	8.42	6.79	5.47
73	9.37	8.70	7.02	5.68
74	9.64	8.93	7.24	5.86
75	9.88	9.18	7.44	6.04
76	10.18	9.43	7.64	6.19
77	10.50	9.76	7.90	6.40
78	10.85	10.09	8.14	6.58
79	11.27	10.48	8.45	6.82
80	11.70	10.88	8.74	7.02
81	12.16	11.32	9.07	7.27
82	12.66	11.78	9.41	7.51
83	13.18	12.28	9.78	7.79
84	13.73	12.82	10.18	8.08

TO OBTAIN QUARTERLY, SEMIANNUAL, AND ANNUAL PREMIUMS, MULTIPLY THE ABOVE QUOTED PREMIUMS BY 3, 6, AND 12, RESPECTIVELY. THE MONTHLY PREMIUMS FOR B SERVICE PLAN AND PAYROLL DEDUCTION ISSUES ARE THE PREMIUMS LISTED ABOVE
R25387-44-3

Date: 04/26/2017

MUTUAL OF OMAHA INSURANCE COMPANY
SCHEDULE OF MONTHLY RATES FOR RIDER FORM 0DX5M

PER \$10 DAILY CONFINED CARE/PER \$8 DAILY COMMUNITY BASED BENEFIT
80% HOME HEALTH CARE BENEFIT

Issue Age	BENEFIT -- 2 YEARS			
	ELIMINATION PERIODS			
	0 Day	20 Day	100 Day	365 Day
18-39	3.60	3.47	2.99	2.57
40	3.90	3.76	3.23	2.78
41	4.00	3.84	3.29	2.82
42	4.12	3.96	3.41	2.94
43	4.24	4.06	3.48	2.99
44	4.36	4.16	3.58	3.07
45	4.50	4.28	3.67	3.16
46	4.62	4.42	3.76	3.20
47	4.78	4.54	3.85	3.28
48	4.92	4.68	3.96	3.35
49	5.05	4.84	4.08	3.44
50	5.26	4.99	4.20	3.54
51	5.42	5.16	4.34	3.65
52	5.60	5.33	4.49	3.78
53	5.81	5.51	4.64	3.91
54	6.00	5.71	4.78	4.00
55	6.22	5.92	4.96	4.16
56	6.49	6.12	5.15	4.34
57	6.76	6.36	5.32	4.45
58	7.06	6.61	5.54	4.64
59	7.39	6.89	5.76	4.82
60	7.74	7.19	5.98	4.98
61	8.11	7.49	6.22	5.17
62	8.45	7.80	6.44	5.32
63	8.77	8.10	6.64	5.44
64	9.08	8.40	6.84	5.57
65	9.41	8.70	7.06	5.71
66	9.78	9.06	7.30	5.86
67	10.24	9.47	7.62	6.13
68	10.84	9.98	8.04	6.47
69	11.53	10.58	8.56	6.91
70	12.26	11.20	9.08	7.36
71	12.92	11.80	9.58	7.78
72	13.51	12.29	10.02	8.17
73	13.94	12.70	10.36	8.44
74	14.27	13.03	10.66	8.72
75	14.56	13.32	10.92	8.96
76	14.86	13.63	11.17	9.16
77	15.23	13.99	11.45	9.38
78	15.64	14.38	11.76	9.64
79	16.07	14.78	12.08	9.88
80	16.52	15.22	12.42	10.14
81	17.00	15.67	12.76	10.39
82	17.51	16.13	13.10	10.64
83	18.04	16.63	13.48	10.91
84	18.58	17.14	13.88	11.24

TO OBTAIN QUARTERLY, SEMIANNUAL, AND ANNUAL PREMIUMS, MULTIPLY THE ABC QUOTED PREMIUMS BY 3, 6, AND 12, RESPECTIVELY. THE MONTHLY PREMIUMS FOR B, SERVICE PLAN AND PAYROLL DEDUCTION ISSUES ARE THE PREMIUMS LISTED ABOVE
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MUTUAL OF OMAHA INSURANCE COMPANY
SCHEDULE OF MONTHLY RATES FOR RIDER FORM 0DX5M

PER \$10 DAILY CONFINED CARE/PER \$8 DAILY COMMUNITY BASED BENEFIT
80% HOME HEALTH CARE BENEFIT

Issue Age	BENEFIT -- 3 YEARS			
	ELIMINATION PERIODS			
	0 Day	20 Day	100 Day	365 Day
18-39	4.55	4.24	3.59	3.04
40	4.98	4.61	3.94	3.37
41	5.09	4.73	4.04	3.46
42	5.24	4.86	4.14	3.53
43	5.38	4.96	4.24	3.61
44	5.47	5.08	4.30	3.65
45	5.60	5.20	4.42	3.76
46	5.74	5.32	4.49	3.80
47	5.90	5.45	4.61	3.90
48	6.11	5.65	4.75	4.00
49	6.30	5.84	4.90	4.12
50	6.58	6.08	5.06	4.21
51	6.80	6.32	5.23	4.33
52	7.07	6.55	5.44	4.50
53	7.36	6.78	5.62	4.66
54	7.61	7.02	5.82	4.82
55	7.86	7.24	6.00	4.97
56	8.14	7.50	6.20	5.12
57	8.44	7.76	6.44	5.34
58	8.74	8.06	6.65	5.48
59	9.04	8.36	6.90	5.69
60	9.36	8.68	7.15	5.89
61	9.70	8.98	7.40	6.10
62	10.01	9.28	7.64	6.29
63	10.32	9.53	7.87	6.50
64	10.62	9.78	8.08	6.67
65	10.92	10.02	8.27	6.83
66	11.22	10.30	8.50	7.02
67	11.59	10.63	8.75	7.20
68	11.99	11.05	9.08	7.46
69	12.50	11.57	9.46	7.72
70	13.03	12.10	9.83	7.98
71	13.50	12.56	10.18	8.23
72	13.86	12.95	10.46	8.45
73	14.06	13.16	10.62	8.57
74	14.10	13.20	10.66	8.62
75	14.12	13.25	10.67	8.59
76	14.22	13.36	10.75	8.66
77	14.51	13.60	10.96	8.84
78	14.95	13.99	11.30	9.13
79	15.56	14.50	11.74	9.49
80	16.22	15.10	12.24	9.92
81	17.02	15.76	12.80	10.40
82	17.92	16.54	13.46	10.96
83	18.91	17.38	14.20	11.60
84	20.02	18.34	15.00	12.28

TO OBTAIN QUARTERLY, SEMIANNUAL, AND ANNUAL PREMIUMS, MULTIPLY THE ABC PREMIUMS BY 3, 6 AND 12 RESPECTIVELY. THE MONTHLY PREMIUMS FOR BANK SERV PAYROLL DEDUCTION ISSUES ARE THE PREMIUMS LISTED ABOVE.

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MUTUAL OF OMAHA INSURANCE COMPANY
SCHEDULE OF MONTHLY RATES FOR RIDER FORM 0DX5M

PER \$10 DAILY CONFINED CARE/PER \$8 DAILY COMMUNITY BASED BENEFIT
80% HOME HEALTH CARE BENEFIT

Issue Age	BENEFIT -- 5 YEARS			
	ELIMINATION PERIODS			
	0 Day	20 Day	100 Day	365 Day
18-39	6.55	6.16	5.26	4.49
40	7.11	6.68	5.65	4.77
41	7.30	6.88	5.79	4.87
42	7.48	7.04	5.92	4.97
43	7.67	7.22	6.03	5.04
44	7.83	7.38	6.19	5.19
45	8.07	7.57	6.34	5.30
46	8.27	7.77	6.47	5.39
47	8.51	7.96	6.66	5.57
48	8.83	8.24	6.91	5.79
49	9.15	8.54	7.12	5.93
50	9.48	8.87	7.41	6.19
51	9.88	9.22	7.67	6.38
52	10.21	9.53	7.96	6.67
53	10.54	9.83	8.24	6.91
54	10.84	10.18	8.50	7.11
55	11.18	10.52	8.79	7.34
56	11.53	10.87	9.04	7.52
57	11.87	11.21	9.31	7.73
58	12.23	11.57	9.57	7.91
59	12.63	11.94	9.88	8.16
60	13.02	12.32	10.12	8.33
61	13.46	12.72	10.42	8.56
62	13.93	13.11	10.71	8.77
63	14.37	13.51	11.03	9.02
64	14.86	13.92	11.36	9.28
65	15.36	14.32	11.68	9.53
66	15.86	14.76	12.03	9.81
67	16.41	15.26	12.42	10.11
68	17.01	15.80	12.85	10.44
69	17.68	16.41	13.31	10.80
70	18.35	17.02	13.81	11.20
71	19.00	17.64	14.27	11.53
72	19.60	18.21	14.71	11.88
73	20.14	18.70	15.14	12.25
74	20.61	19.18	15.50	12.53
75	21.11	19.61	15.86	12.83
76	21.59	20.11	16.25	13.13
77	22.22	20.67	16.72	13.52
78	22.92	21.31	17.27	13.98
79	23.67	21.99	17.82	14.44
80	24.46	22.73	18.43	14.94
81	25.33	23.51	19.09	15.50
82	26.26	24.37	19.78	16.06
83	27.24	25.26	20.52	16.68
84	28.25	26.19	21.30	17.31

TO OBTAIN QUARTERLY, SEMIANNUAL, AND ANNUAL PREMIUMS,
MULTIPLY THE ABOVE QUOTED PREMIUMS BY 3, 6, AND 12,
RESPECTIVELY. THE MONTHLY PREMIUMS FOR BANK SERVICE PLAN
AND PAYROLL DEDUCTION ISSUES ARE THE PREMIUMS LISTED ABOVE.
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MUTUAL OF OMAHA INSURANCE COMPANY
SCHEDULE OF MONTHLY RATES FOR RIDER FORM 0DX5M

PER \$10 DAILY CONFINED CARE/PER \$8 DAILY COMMUNITY BASED BENEFIT
80% HOME HEALTH CARE BENEFIT

Issue Age	BENEFIT -- LIFETIME			
	ELIMINATION PERIODS			
	0 Day	20 Day	100 Day	365 Day
18-39	14.34	13.70	11.31	9.37
40	15.20	14.52	12.01	9.92
41	15.60	14.87	12.31	10.21
42	15.94	15.16	12.64	10.50
43	16.37	15.57	12.96	10.79
44	16.78	16.00	13.31	11.06
45	17.24	16.45	13.70	11.40
46	17.76	16.94	14.12	11.77
47	18.25	17.39	14.52	12.12
48	18.80	17.91	14.96	12.49
49	19.42	18.46	15.42	12.86
50	19.99	19.02	15.89	13.25
51	20.62	19.55	16.30	13.60
52	21.15	19.99	16.68	13.90
53	21.63	20.35	16.99	14.20
54	21.98	20.61	17.16	14.27
55	22.37	20.88	17.38	14.46
56	22.78	21.15	17.60	14.65
57	23.27	21.55	17.89	14.82
58	23.95	22.09	18.32	15.21
59	24.70	22.70	18.80	15.57
60	25.51	23.34	19.28	15.94
61	26.35	24.08	19.86	16.38
62	27.17	24.80	20.44	16.82
63	28.05	25.61	21.01	17.24
64	28.95	26.49	21.68	17.76
65	29.86	27.38	22.32	18.20
66	30.84	28.33	23.08	18.80
67	31.82	29.28	23.79	19.33
68	32.92	30.28	24.66	20.07
69	34.01	31.29	25.56	20.84
70	35.15	32.36	26.43	21.61
71	36.26	33.38	27.33	22.37
72	37.38	34.42	28.24	23.11
73	38.45	35.44	29.07	23.80
74	39.49	36.37	29.86	24.48
75	40.56	37.38	30.68	25.21
76	41.65	38.47	31.54	25.87
77	42.77	39.62	32.46	26.61
78	43.97	40.96	33.46	27.33
79	45.18	42.34	34.53	28.13
80	46.50	43.86	35.65	28.95
81	47.91	45.49	36.87	29.89
82	49.36	47.18	38.14	30.84
83	50.95	48.98	39.49	31.89
84	52.57	50.84	40.90	32.92

TO OBTAIN QUARTERLY, SEMIANNUAL, AND ANNUAL PREMIUMS,
MULTIPLY THE ABOVE QUOTED PREMIUMS BY 3, 6, AND 12,
RESPECTIVELY. THE MONTHLY PREMIUMS FOR BANK SERVICE PLAN
AND PAYROLL DEDUCTION ISSUES ARE THE PREMIUMS LISTED ABOVE.
R25387-44-3

Date: 04/26/2017

MUTUAL OF OMAHA INSURANCE COMPANY
SCHEDULE OF MONTHLY RATES FOR RIDER FORM 0DX5M

PER \$10 DAILY CONFINED CARE/PER \$5 DAILY COMMUNITY BASED BENEFIT
50% HOME HEALTH CARE BENEFIT

BENEFIT -- 1 YEAR

Issue Age	Elimination Periods			
	0 Day	20 Day	100 Day	365 Day
18-39	2.11	1.98	1.72	1.49
40	2.30	2.14	1.86	1.63
41	2.35	2.18	1.90	1.66
42	2.44	2.26	1.96	1.70
43	2.50	2.32	2.02	1.75
44	2.56	2.38	2.05	1.76
45	2.64	2.45	2.11	1.82
46	2.74	2.53	2.17	1.86
47	2.80	2.63	2.24	1.90
48	2.92	2.72	2.34	2.02
49	3.02	2.84	2.40	2.03
50	3.13	2.96	2.51	2.14
51	3.25	3.08	2.59	2.18
52	3.36	3.22	2.68	2.24
53	3.49	3.32	2.77	2.32
54	3.61	3.46	2.88	2.41
55	3.73	3.56	2.95	2.44
56	3.88	3.70	3.07	2.56
57	4.01	3.83	3.16	2.62
58	4.16	3.96	3.28	2.70
59	4.31	4.10	3.40	2.82
60	4.49	4.26	3.52	2.92
61	4.64	4.42	3.64	2.98
62	4.84	4.60	3.78	3.11
63	5.06	4.78	3.95	3.26
64	5.28	4.96	4.08	3.36
65	5.50	5.17	4.26	3.52
66	5.77	5.38	4.44	3.67
67	6.01	5.62	4.63	3.82
68	6.31	5.87	4.84	3.97
69	6.64	6.16	5.03	4.12
70	6.96	6.46	5.26	4.27
71	7.28	6.77	5.45	4.39
72	7.60	7.03	5.66	4.56
73	7.82	7.26	5.86	4.72
74	8.05	7.45	6.04	4.88
75	8.26	7.67	6.20	5.02
76	8.50	7.88	6.38	5.16
77	8.76	8.14	6.59	5.33
78	9.06	8.42	6.80	5.50
79	9.40	8.75	7.06	5.68
80	9.77	9.10	7.30	5.86
81	10.14	9.46	7.57	6.07
82	10.57	9.84	7.87	6.29
83	11.02	10.25	8.17	6.52
84	11.47	10.69	8.50	6.76

TO OBTAIN QUARTERLY, SEMIANNUAL, AND ANNUAL PREMIUMS,
MULTIPLY THE ABOVE QUOTED PREMIUMS BY 3, 6, AND 12,
RESPECTIVELY. THE MONTHLY PREMIUMS FOR BANK SERVICE PLAN
AND PAYROLL DEDUCTION ISSUES ARE THE PREMIUMS LISTED ABOVE.
R25387-44-3

Date: 04/26/2017

MUTUAL OF OMAHA INSURANCE COMPANY
SCHEDULE OF MONTHLY RATES FOR RIDER FORM 0DX5M

PER \$10 DAILY CONFINED CARE/PER \$5 DAILY COMMUNITY BASED BENEFIT
50% HOME HEALTH CARE BENEFIT

BENEFIT -- 2 YEARS

Issue Age	Elimination Periods			
	0 Day	20 Day	100 Day	365 Day
18-39	3.06	2.95	2.54	2.20
40	3.30	3.18	2.74	2.38
41	3.38	3.25	2.80	2.41
42	3.50	3.35	2.89	2.50
43	3.59	3.44	2.95	2.53
44	3.71	3.53	3.02	2.59
45	3.80	3.64	3.10	2.65
46	3.91	3.73	3.19	2.74
47	4.04	3.85	3.28	2.78
48	4.16	3.97	3.36	2.86
49	4.30	4.09	3.46	2.92
50	4.46	4.24	3.56	2.99
51	4.60	4.38	3.68	3.10
52	4.75	4.52	3.82	3.22
53	4.92	4.68	3.94	3.30
54	5.08	4.84	4.06	3.41
55	5.28	5.00	4.21	3.54
56	5.50	5.20	4.36	3.65
57	5.72	5.38	4.52	3.80
58	5.99	5.62	4.70	3.94
59	6.28	5.86	4.90	4.08
60	6.56	6.10	5.08	4.24
61	6.88	6.35	5.27	4.38
62	7.16	6.61	5.46	4.51
63	7.44	6.86	5.64	4.64
64	7.70	7.12	5.81	4.74
65	7.97	7.39	5.99	4.85
66	8.30	7.68	6.19	4.99
67	8.69	8.02	6.46	5.20
68	9.19	8.46	6.83	5.52
69	9.78	8.98	7.24	5.86
70	10.39	9.50	7.70	6.24
71	10.97	9.98	8.12	6.61
72	11.46	10.43	8.48	6.90
73	11.81	10.76	8.78	7.16
74	12.10	11.05	9.04	7.40
75	12.35	11.30	9.26	7.60
76	12.60	11.56	9.47	7.78
77	12.91	11.86	9.71	7.96
78	13.25	12.19	9.98	8.17
79	13.63	12.54	10.24	8.36
80	14.02	12.91	10.54	8.59
81	14.41	13.28	10.82	8.82
82	14.84	13.69	11.11	9.02
83	15.29	14.11	11.42	9.25
84	15.76	14.53	11.76	9.52

TO OBTAIN QUARTERLY, SEMIANNUAL, AND ANNUAL PREMIUMS,
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AND PAYROLL DEDUCTION ISSUES ARE THE PREMIUMS LISTED ABOVE.
R25387-44-3

Date: 04/26/2017

MUTUAL OF OMAHA INSURANCE COMPANY
SCHEDULE OF MONTHLY RATES FOR RIDER FORM 0DX5M

PER \$10 DAILY CONFINED CARE/PER \$5 DAILY COMMUNITY BASED BENEFIT
50% HOME HEALTH CARE BENEFIT

BENEFIT -- 3 YEARS

Issue Age	Elimination Periods			
	0 Day	20 Day	100 Day	365 Day
18-39	3.91	3.64	3.10	2.63
40	4.27	3.97	3.38	2.88
41	4.38	4.07	3.48	2.98
42	4.51	4.18	3.56	3.04
43	4.61	4.27	3.65	3.12
44	4.72	4.37	3.70	3.13
45	4.82	4.46	3.80	3.24
46	4.94	4.56	3.86	3.28
47	5.08	4.69	3.97	3.36
48	5.24	4.86	4.09	3.44
49	5.42	5.03	4.22	3.54
50	5.65	5.22	4.36	3.62
51	5.86	5.44	4.51	3.74
52	6.10	5.63	4.67	3.88
53	6.31	5.84	4.82	3.98
54	6.53	6.04	5.02	4.15
55	6.76	6.25	5.16	4.26
56	7.00	6.46	5.35	4.44
57	7.25	6.68	5.53	4.58
58	7.50	6.92	5.72	4.73
59	7.79	7.20	5.94	4.90
60	8.06	7.46	6.16	5.08
61	8.33	7.74	6.36	5.23
62	8.62	7.97	6.58	5.44
63	8.88	8.21	6.76	5.57
64	9.14	8.42	6.95	5.74
65	9.40	8.63	7.12	5.87
66	9.65	8.86	7.32	6.05
67	9.97	9.14	7.54	6.22
68	10.33	9.52	7.80	6.40
69	10.75	9.94	8.12	6.64
70	11.21	10.42	8.45	6.86
71	11.59	10.81	8.75	7.08
72	11.92	11.14	9.00	7.27
73	12.10	11.32	9.14	7.38
74	12.13	11.38	9.16	7.38
75	12.16	11.40	9.19	7.42
76	12.23	11.48	9.25	7.46
77	12.47	11.69	9.44	7.62
78	12.88	12.04	9.72	7.85
79	13.38	12.47	10.09	8.16
80	13.96	12.97	10.54	8.56
81	14.64	13.56	11.00	8.93
82	15.42	14.22	11.58	9.43
83	16.26	14.96	12.22	9.98
84	17.21	15.77	12.91	10.57

TO OBTAIN QUARTERLY, SEMIANNUAL, AND ANNUAL PREMIUMS,
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AND PAYROLL DEDUCTION ISSUES ARE THE PREMIUMS LISTED ABOVE.
R25387-44-3

Date: 04/26/2017

MUTUAL OF OMAHA INSURANCE COMPANY
SCHEDULE OF MONTHLY RATES FOR RIDER FORM 0DX5M

PER \$10 DAILY CONFINED CARE/PER \$5 DAILY COMMUNITY BASED BENEFIT
50% HOME HEALTH CARE BENEFIT

Issue Age	BENEFIT -- 5 YEARS			
	Elimination Periods			
	0 Day	20 Day	100 Day	365 Day
18-39	5.76	5.46	4.63	3.95
40	6.26	5.92	4.97	4.18
41	6.45	6.05	5.10	4.31
42	6.61	6.23	5.23	4.40
43	6.78	6.38	5.32	4.47
44	6.92	6.52	5.47	4.60
45	7.13	6.68	5.59	4.66
46	7.30	6.84	5.72	4.77
47	7.51	7.04	5.89	4.93
48	7.79	7.30	6.09	5.09
49	8.06	7.55	6.28	5.23
50	8.37	7.83	6.55	5.48
51	8.70	8.12	6.79	5.68
52	9.02	8.43	7.04	5.87
53	9.31	8.70	7.27	6.08
54	9.56	8.99	7.50	6.27
55	9.86	9.28	7.77	6.48
56	10.16	9.59	7.99	6.66
57	10.48	9.89	8.23	6.84
58	10.80	10.22	8.46	7.01
59	11.15	10.55	8.69	7.17
60	11.50	10.87	8.93	7.35
61	11.89	11.22	9.19	7.52
62	12.30	11.57	9.45	7.71
63	12.69	11.92	9.75	7.96
64	13.12	12.28	10.02	8.17
65	13.57	12.65	10.32	8.43
66	14.01	13.05	10.63	8.67
67	14.50	13.48	10.96	8.91
68	15.03	13.95	11.33	9.20
69	15.59	14.48	11.75	9.55
70	16.21	15.04	12.19	9.88
71	16.78	15.58	12.58	10.16
72	17.31	16.08	12.99	10.49
73	17.80	16.52	13.34	10.78
74	18.21	16.92	13.67	11.04
75	18.63	17.34	13.99	11.30
76	19.07	17.75	14.34	11.59
77	19.61	18.26	14.76	11.94
78	20.24	18.81	15.24	12.34
79	20.90	19.43	15.73	12.74
80	21.60	20.06	16.28	13.21
81	22.37	20.77	16.87	13.71
82	23.19	21.51	17.48	14.20
83	24.05	22.30	18.11	14.71
84	24.95	23.12	18.80	15.29

TO OBTAIN QUARTERLY, SEMIANNUAL, AND ANNUAL PREMIUMS,
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AND PAYROLL DEDUCTION ISSUES ARE THE PREMIUMS LISTED ABOVE.
R25387-44-3

Date: 04/26/2017

MUTUAL OF OMAHA INSURANCE COMPANY
SCHEDULE OF MONTHLY RATES FOR RIDER FORM 0DX5M

PER \$10 DAILY CONFINED CARE/PER \$5 DAILY COMMUNITY BASED BENEFIT
50% HOME HEALTH CARE BENEFIT

Issue Age	BENEFIT -- LIFETIME			
	Elimination Periods			
	0 Day	20 Day	100 Day	365 Day
18-39	13.00	12.39	10.24	8.48
40	13.73	13.13	10.89	9.04
41	14.12	13.44	11.17	9.28
42	14.46	13.74	11.41	9.49
43	14.82	14.12	11.71	9.74
44	15.16	14.48	12.04	10.01
45	15.60	14.89	12.42	10.32
46	16.07	15.31	12.79	10.69
47	16.54	15.76	13.13	10.93
48	16.99	16.21	13.51	11.26
49	17.60	16.69	13.95	11.69
50	18.11	17.23	14.35	11.99
51	18.64	17.69	14.76	12.31
52	19.14	18.11	15.08	12.57
53	19.58	18.43	15.37	12.82
54	19.92	18.66	15.54	12.94
55	20.23	18.88	15.73	13.10
56	20.61	19.14	15.90	13.23
57	21.09	19.53	16.17	13.40
58	21.68	20.02	16.59	13.74
59	22.37	20.54	17.02	14.11
60	23.08	21.14	17.46	14.44
61	23.87	21.76	18.01	14.87
62	24.60	22.46	18.51	15.22
63	25.40	23.18	19.02	15.61
64	26.22	24.00	19.63	16.07
65	27.04	24.80	20.22	16.48
66	27.92	25.66	20.88	16.99
67	28.81	26.52	21.55	17.50
68	29.77	27.43	22.31	18.16
69	30.78	28.33	23.10	18.85
70	31.80	29.26	23.93	19.58
71	32.81	30.21	24.74	20.27
72	33.83	31.19	25.53	20.90
73	34.80	32.08	26.30	21.55
74	35.75	32.93	27.04	22.17
75	36.71	33.83	27.78	22.83
76	37.70	34.80	28.55	23.43
77	38.71	35.89	29.35	24.04
78	39.81	37.06	30.33	24.80
79	40.90	38.32	31.25	25.49
80	42.06	39.70	32.27	26.22
81	43.36	41.17	33.40	27.08
82	44.68	42.69	34.54	27.92
83	46.10	44.32	35.75	28.86
84	47.59	45.99	37.02	29.77

TO OBTAIN QUARTERLY, SEMIANNUAL, AND ANNUAL PREMIUMS,
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AND PAYROLL DEDUCTION ISSUES ARE THE PREMIUMS LISTED ABOVE.
R25387-44-3

Date: 04/26/2017

MUTUAL OF OMAHA INSURANCE COMPANY
SCHEDULE OF MONTHLY RATES FOR RIDER FORM 0DX5M

PER \$10 DAILY CONFINED CARE/PER \$10 DAILY COMMUNITY BASED BENEFIT
100% HOME HEALTH CARE BENEFIT

Issue Age	BENEFIT -- 1 YEAR			
	ELIMINATION PERIODS			
	0 Day	20 Day	100 Day	365 Day
18-39	2.80	2.60	2.24	1.93
40	3.06	2.81	2.42	2.09
41	3.13	2.88	2.47	2.12
42	3.22	2.95	2.54	2.18
43	3.34	3.05	2.62	2.26
44	3.41	3.13	2.68	2.30
45	3.52	3.22	2.76	2.38
46	3.61	3.34	2.82	2.39
47	3.72	3.46	2.92	2.46
48	3.88	3.59	3.04	2.57
49	4.01	3.73	3.13	2.62
50	4.16	3.90	3.28	2.74
51	4.30	4.06	3.37	2.80
52	4.48	4.22	3.50	2.90
53	4.64	4.38	3.62	2.99
54	4.81	4.54	3.76	3.10
55	4.96	4.68	3.86	3.19
56	5.14	4.85	4.01	3.32
57	5.33	5.03	4.13	3.40
58	5.53	5.21	4.27	3.50
59	5.74	5.40	4.42	3.60
60	5.98	5.62	4.58	3.74
61	6.17	5.81	4.72	3.83
62	6.44	6.05	4.91	4.00
63	6.73	6.29	5.14	4.20
64	7.01	6.53	5.32	4.33
65	7.32	6.79	5.56	4.54
66	7.66	7.08	5.80	4.73
67	8.00	7.38	6.02	4.91
68	8.39	7.73	6.28	5.09
69	8.81	8.11	6.55	5.29
70	9.25	8.51	6.83	5.48
71	9.68	8.90	7.12	5.68
72	10.08	9.25	7.39	5.90
73	10.42	9.55	7.63	6.10
74	10.70	9.82	7.86	6.29
75	10.98	10.09	8.09	6.49
76	11.28	10.38	8.32	6.67
77	11.65	10.72	8.58	6.88
78	12.05	11.09	8.87	7.10
79	12.50	11.52	9.19	7.33
80	12.98	11.96	9.52	7.58
81	13.50	12.43	9.86	7.82
82	14.04	12.95	10.25	8.11
83	14.62	13.50	10.64	8.38
84	15.25	14.08	11.08	8.71

TO OBTAIN QUARTERLY, SEMIANNUAL, AND ANNUAL PREMIUMS, MULTIPLY THE ABC QUOTED PREMIUMS BY 3, 6, AND 12, RESPECTIVELY. THE MONTHLY PREMIUMS FOR BANK SERVICE PLAN AND PAYROLL DEDUCTION ISSUES ARE THE PREMIUMS LISTED / R25387-44-4

Date: 04/26/2017

MUTUAL OF OMAHA INSURANCE COMPANY
SCHEDULE OF MONTHLY RATES FOR RIDER FORM 0DX5M

PER \$10 DAILY CONFINED CARE/PER \$10 DAILY COMMUNITY BASED BENEFIT
100% HOME HEALTH CARE BENEFIT

BENEFIT -- TWO YEARS

Issue Age	ELIMINATION PERIODS			
	0 Day	20 Day	100 Day	365 Day
18-39	3.96	3.78	3.22	2.75
40	4.28	4.07	3.48	2.98
41	4.39	4.18	3.55	3.04
42	4.52	4.30	3.66	3.13
43	4.66	4.42	3.76	3.19
44	4.78	4.54	3.85	3.28
45	4.94	4.66	3.94	3.34
46	5.08	4.79	4.06	3.43
47	5.24	4.94	4.15	3.48
48	5.39	5.09	4.27	3.58
49	5.56	5.26	4.39	3.67
50	5.76	5.44	4.54	3.78
51	5.95	5.62	4.69	3.92
52	6.16	5.80	4.82	4.01
53	6.38	5.99	5.00	4.18
54	6.58	6.19	5.15	4.28
55	6.84	6.41	5.35	4.48
56	7.12	6.65	5.54	4.61
57	7.42	6.91	5.74	4.78
58	7.75	7.19	5.98	4.96
59	8.12	7.50	6.20	5.12
60	8.50	7.81	6.44	5.32
61	8.90	8.14	6.70	5.52
62	9.28	8.48	6.94	5.68
63	9.62	8.80	7.16	5.83
64	9.98	9.13	7.36	5.93
65	10.33	9.47	7.60	6.08
66	10.74	9.84	7.85	6.28
67	11.26	10.30	8.20	6.53
68	11.89	10.85	8.65	6.90
69	12.67	11.50	9.20	7.36
70	13.46	12.17	9.77	7.84
71	14.20	12.80	10.31	8.30
72	14.83	13.36	10.78	8.70
73	15.30	13.80	11.15	9.01
74	15.68	14.16	11.47	9.29
75	16.00	14.48	11.75	9.54
76	16.32	14.82	12.04	9.77
77	16.72	15.20	12.34	10.02
78	17.17	15.62	12.66	10.26
79	17.65	16.08	13.00	10.51
80	18.16	16.54	13.37	10.81
81	18.67	17.04	13.73	11.08
82	19.24	17.54	14.11	11.35
83	19.80	18.08	14.50	11.63
84	20.39	18.62	14.92	11.95

TO OBTAIN QUARTERLY, SEMIANNUAL, AND ANNUAL PREMIUMS, MULTIPLY THE ABC QUOTED PREMIUMS BY 3, 6, AND 12, RESPECTIVELY. THE MONTHLY PREMIUMS FOR B/ SERVICE PLAN AND PAYROLL DEDUCTION ISSUES ARE THE PREMIUMS LISTED ABO VI R25387-44-4

Date: 04/26/2017

MUTUAL OF OMAHA INSURANCE COMPANY
SCHEDULE OF MONTHLY RATES FOR RIDER FORM 0DX5M

PER \$10 DAILY CONFINED CARE/PER \$10 DAILY COMMUNITY BASED BENEFIT
100% HOME HEALTH CARE BENEFIT

Issue Age	BENEFIT -- 3 YEARS			
	ELIMINATION PERIOD			
	0 Day	20 Day	100 Day	365 Day
18-39	4.94	4.54	3.83	3.23
40	5.40	4.96	4.19	3.54
41	5.53	5.09	4.30	3.64
42	5.69	5.22	4.42	3.73
43	5.82	5.34	4.51	3.80
44	5.93	5.45	4.58	3.85
45	6.10	5.57	4.70	3.96
46	6.23	5.70	4.78	4.01
47	6.40	5.87	4.91	4.12
48	6.64	6.07	5.06	4.22
49	6.84	6.28	5.21	4.32
50	7.14	6.53	5.39	4.44
51	7.39	6.78	5.57	4.57
52	7.68	7.03	5.77	4.74
53	7.98	7.30	5.98	4.90
54	8.26	7.55	6.19	5.08
55	8.54	7.79	6.38	5.23
56	8.83	8.06	6.61	5.42
57	9.16	8.35	6.84	5.60
58	9.48	8.65	7.08	5.80
59	9.82	8.98	7.34	6.00
60	10.18	9.32	7.62	6.23
61	10.52	9.66	7.88	6.43
62	10.90	9.98	8.14	6.64
63	11.21	10.26	8.38	6.85
64	11.53	10.51	8.60	7.03
65	11.86	10.79	8.81	7.19
66	12.19	11.08	9.04	7.38
67	12.58	11.42	9.32	7.60
68	13.03	11.88	9.66	7.86
69	13.57	12.43	10.06	8.14
70	14.15	13.00	10.46	8.41
71	14.65	13.51	10.84	8.69
72	15.06	13.92	11.14	8.92
73	15.28	14.15	11.30	9.04
74	15.31	14.21	11.35	9.07
75	15.34	14.26	11.38	9.07
76	15.46	14.36	11.45	9.13
77	15.76	14.62	11.68	9.32
78	16.25	15.05	12.04	9.62
79	16.90	15.58	12.49	10.01
80	17.63	16.22	13.02	10.45
81	18.49	16.94	13.62	10.96
82	19.45	17.77	14.33	11.56
83	20.54	18.70	15.11	12.22
84	21.73	19.72	15.97	12.94

TO OBTAIN QUARTERLY, SEMIANNUAL, AND ANNUAL PREMIUMS, MULTIPLY THE ABC QUOTED PREMIUMS BY 3, 6, AND 12, RESPECTIVELY. THE MONTHLY PREMIUMS FOR B/ SERVICE PLAN AND PAYROLL DEDUCTION ISSUES ARE THE PREMIUMS LISTED ABOVE
R25387-44-4

Date: 04/26/2017

MUTUAL OF OMAHA INSURANCE COMPANY
SCHEDULE OF MONTHLY RATES FOR RIDER FORM 0DX5M

PER \$10 DAILY CONFINED CARE/PER \$10 DAILY COMMUNITY BASED BENEFIT
100% HOME HEALTH CARE BENEFIT

Issue Age	BENEFIT -- 5 YEARS			
	ELIMINATION PERIODS			
	0 Day	20 Day	100 Day	365 Day
18-39	7.04	6.56	5.53	4.68
40	7.63	7.11	5.94	4.97
41	7.84	7.30	6.08	5.07
42	8.04	7.50	6.25	5.19
43	8.24	7.68	6.35	5.26
44	8.43	7.85	6.52	5.41
45	8.67	8.04	6.66	5.50
46	8.89	8.25	6.82	5.63
47	9.15	8.49	7.02	5.81
48	9.48	8.78	7.26	6.01
49	9.81	9.09	7.50	6.19
50	10.19	9.43	7.81	6.48
51	10.60	9.78	8.10	6.71
52	10.96	10.14	8.38	6.93
53	11.33	10.47	8.69	7.19
54	11.64	10.84	8.95	7.38
55	12.01	11.20	9.24	7.63
56	12.36	11.56	9.53	7.84
57	12.75	11.94	9.81	8.07
58	13.13	12.32	10.09	8.27
59	13.57	12.69	10.38	8.49
60	14.00	13.09	10.67	8.69
61	14.48	13.51	10.97	8.90
62	14.96	13.94	11.29	9.15
63	15.44	14.37	11.62	9.42
64	15.97	14.80	11.97	9.68
65	16.50	15.24	12.32	9.94
66	17.07	15.71	12.68	10.24
67	17.64	16.23	13.08	10.54
68	18.27	16.81	13.52	10.87
69	18.99	17.45	14.01	11.26
70	19.71	18.13	14.53	11.66
71	20.42	18.77	15.03	12.03
72	21.08	19.38	15.50	12.40
73	21.65	19.91	15.93	12.74
74	22.17	20.38	16.31	13.06
75	22.68	20.88	16.71	13.38
76	23.22	21.37	17.11	13.68
77	23.88	21.98	17.61	14.11
78	24.63	22.66	18.17	14.56
79	25.43	23.41	18.77	15.05
80	26.31	24.20	19.42	15.59
81	27.21	25.03	20.11	16.15
82	28.23	25.93	20.83	16.74
83	29.26	26.86	21.60	17.37
84	30.36	27.85	22.43	18.06

TO OBTAIN QUARTERLY, SEMIANNUAL, AND ANNUAL PREMIUMS, MULTIPLY THE ABOVE QUOTED PREMIUMS BY 3, 6, AND 12, RESPECTIVELY. THE MONTHLY PREMIUMS FOR B, SERVICE PLAN AND PAYROLL DEDUCTION ISSUES ARE THE PREMIUMS LISTED ABOVE
R25387-44-4

Date: 04/26/2017

MUTUAL OF OMAHA INSURANCE COMPANY
SCHEDULE OF MONTHLY RATES FOR RIDER FORM 0DX5M

PER \$10 DAILY CONFINED CARE/PER \$10 DAILY COMMUNITY BASED BENEFIT
100% HOME HEALTH CARE BENEFIT

Issue Age	BENEFIT -- LIFETIME			
	ELIMINATION PERIODS			
	0 Day	20 Day	100 Day	365 Day
18-39	17.57	16.56	13.57	11.12
40	18.58	17.57	14.39	11.75
41	19.08	17.97	14.77	12.14
42	19.49	18.40	15.15	12.44
43	20.00	18.87	15.51	12.75
44	20.53	19.37	15.95	13.12
45	21.07	19.90	16.41	13.57
46	21.71	20.47	16.94	14.01
47	22.32	21.07	17.40	14.36
48	22.98	21.68	17.91	14.79
49	23.74	22.33	18.49	15.28
50	24.47	23.02	19.02	15.70
51	25.20	23.66	19.54	16.16
52	25.86	24.21	19.99	16.50
53	26.45	24.66	20.34	16.74
54	26.90	24.93	20.57	16.97
55	27.36	25.27	20.83	17.15
56	27.82	25.60	21.07	17.33
57	28.51	26.07	21.41	17.58
58	29.30	26.73	21.94	18.03
59	30.21	27.46	22.52	18.45
60	31.20	28.24	23.12	18.92
61	32.20	29.14	23.81	19.45
62	33.20	30.04	24.48	19.99
63	34.28	31.00	25.20	20.47
64	35.40	32.09	25.98	21.07
65	36.51	33.13	26.76	21.62
66	37.73	34.29	27.65	22.24
67	38.93	35.44	28.54	22.99
68	40.20	36.62	29.54	23.85
69	41.60	37.87	30.61	24.75
70	42.94	39.12	31.66	25.65
71	44.37	40.42	32.74	26.54
72	45.69	41.70	33.82	27.45
73	47.02	42.90	34.82	28.27
74	48.29	44.03	35.77	29.06
75	49.60	45.24	36.78	29.87
76	50.93	46.55	37.79	30.71
77	52.31	47.98	38.90	31.56
78	53.76	49.59	40.11	32.48
79	55.26	51.24	41.37	33.43
80	56.86	53.08	42.72	34.37
81	58.59	55.05	44.16	35.44
82	60.35	57.07	45.71	36.59
83	62.27	59.29	47.35	37.79
84	64.29	61.53	48.99	39.02

TO OBTAIN QUARTERLY, SEMIANNUAL, AND ANNUAL PREMIUMS, MULTIPLY THE ABC QUOTED PREMIUMS BY 3, 6, AND 12, RESPECTIVELY. THE MONTHLY PREMIUMS FOR B/ SERVICE PLAN AND PAYROLL DEDUCT I ON ISSUES ARE THE PREMIUMS LISTED ABOVE
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Date: 04/26/2017

MUTUAL OF OMAHA INSURANCE COMPANY
SCHEDULE OF MONTHLY RATES FOR RIDER FORM 0DX5M

PER \$10 DAILY CONFINED CARE/PER \$8 DAILY COMMUNITY BASED BENEFIT
80% HOME HEALTH CARE BENEFIT

Issue Age	BENEFIT -- 1 YEAR			
	ELIMINATION PERIODS			
	0 Day	20 Day	100 Day	365 Day
18-39	2.52	2.36	2.08	1.81
40	2.76	2.56	2.21	1.92
41	2.82	2.62	2.27	1.97
42	2.89	2.70	2.32	1.99
43	3.00	2.78	2.41	2.09
44	3.07	2.84	2.45	2.12
45	3.16	2.92	2.53	2.20
46	3.26	3.04	2.59	2.21
47	3.36	3.14	2.69	2.32
48	3.47	3.28	2.80	2.38
49	3.61	3.40	2.87	2.44
50	3.76	3.55	3.00	2.53
51	3.88	3.70	3.10	2.60
52	4.03	3.85	3.22	2.68
53	4.18	4.00	3.32	2.76
54	4.34	4.13	3.46	2.89
55	4.48	4.26	3.53	2.93
56	4.63	4.42	3.68	3.06
57	4.80	4.57	3.82	3.17
58	4.97	4.74	3.92	3.24
59	5.16	4.91	4.06	3.35
60	5.38	5.11	4.21	3.46
61	5.56	5.28	4.34	3.56
62	5.82	5.50	4.52	3.71
63	6.07	5.74	4.72	3.88
64	6.32	5.94	4.90	4.03
65	6.59	6.18	5.10	4.20
66	6.90	6.46	5.32	4.39
67	7.21	6.72	5.54	4.56
68	7.55	7.04	5.76	4.72
69	7.94	7.39	6.02	4.91
70	8.33	7.74	6.28	5.09
71	8.72	8.09	6.52	5.26
72	9.08	8.42	6.79	5.47
73	9.37	8.70	7.02	5.68
74	9.64	8.93	7.24	5.86
75	9.88	9.18	7.44	6.04
76	10.18	9.43	7.64	6.19
77	10.50	9.76	7.90	6.40
78	10.85	10.09	8.14	6.58
79	11.27	10.48	8.45	6.82
80	11.70	10.88	8.74	7.02
81	12.16	11.32	9.07	7.27
82	12.66	11.78	9.41	7.51
83	13.18	12.28	9.78	7.79
84	13.73	12.82	10.18	8.08

TO OBTAIN QUARTERLY, SEMIANNUAL, AND ANNUAL PREMIUMS, MULTIPLY THE ABC QUOTED PREMIUMS BY 3, 6, AND 12. RESPECTIVELY . THE MONTHLY PREMIUMS FOR B SERVICE PLAN AND PAYROLL DEDUCTION ISSUES ARE THE PREMIUMS LISTED ABOVE
R25387-44-4

Date: 04/26/2017

MUTUAL OF OMAHA INSURANCE COMPANY
SCHEDULE OF MONTHLY RATES FOR RIDER FORM 0DX5M

PER \$10 DAILY CONFINED CARE/PER \$8 DAILY COMMUNITY BASED BENEFIT
80% HOME HEALTH CARE BENEFIT

Issue Age	BENEFIT -- 2 YEARS			
	ELIMINATION PERIODS			
	0 Day	20 Day	100 Day	365 Day
18-39	3.60	3.47	2.99	2.57
40	3.90	3.76	3.23	2.78
41	4.00	3.84	3.29	2.82
42	4.12	3.96	3.41	2.94
43	4.24	4.06	3.48	2.99
44	4.36	4.16	3.58	3.07
45	4.50	4.28	3.67	3.16
46	4.62	4.42	3.76	3.20
47	4.78	4.54	3.85	3.28
48	4.92	4.68	3.96	3.35
49	5.05	4.84	4.08	3.44
50	5.26	4.99	4.20	3.54
51	5.42	5.16	4.34	3.65
52	5.60	5.33	4.49	3.78
53	5.81	5.51	4.64	3.91
54	6.00	5.71	4.78	4.00
55	6.22	5.92	4.96	4.16
56	6.49	6.12	5.15	4.34
57	6.76	6.36	5.32	4.45
58	7.06	6.61	5.54	4.64
59	7.39	6.89	5.76	4.82
60	7.74	7.19	5.98	4.98
61	8.11	7.49	6.22	5.17
62	8.45	7.80	6.44	5.32
63	8.77	8.10	6.64	5.44
64	9.08	8.40	6.84	5.57
65	9.41	8.70	7.06	5.71
66	9.78	9.06	7.30	5.86
67	10.24	9.47	7.62	6.13
68	10.84	9.98	8.04	6.47
69	11.53	10.58	8.56	6.91
70	12.26	11.20	9.08	7.36
71	12.92	11.80	9.58	7.78
72	13.51	12.29	10.02	8.17
73	13.94	12.70	10.36	8.44
74	14.27	13.03	10.66	8.72
75	14.56	13.32	10.92	8.96
76	14.86	13.63	11.17	9.16
77	15.23	13.99	11.45	9.38
78	15.64	14.38	11.76	9.64
79	16.07	14.78	12.08	9.88
80	16.52	15.22	12.42	10.14
81	17.00	15.67	12.76	10.39
82	17.51	16.13	13.10	10.64
83	18.04	16.63	13.48	10.91
84	18.58	17.14	13.88	11.24

TO OBTAIN QUARTERLY, SEMIANNUAL, AND ANNUAL PREMIUMS, MULTIPLY THE ABC QUOTED PREMIUMS BY 3, 6, AND 12, RESPECTIVELY. THE MONTHLY PREMIUMS FOR B/ SERVICE PLAN AND PAYROLL DEDUCTION ISSUES ARE THE PREMIUMS LISTED ABOVE
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Date: 04/26/2017

MUTUAL OF OMAHA INSURANCE COMPANY
SCHEDULE OF MONTHLY RATES FOR RIDER FORM 0DX5M

PER \$10 DAILY CONFINED CARE/PER \$8 DAILY COMMUNITY BASED BENEFIT
80% HOME HEALTH CARE BENEFIT

Issue Age	BENEFIT -- 3 YEARS			
	ELIMINATION PERIODS			
	0 Day	20 Day	100 Day	365 Day
18-39	4.55	4.24	3.59	3.04
40	4.98	4.61	3.94	3.37
41	5.09	4.73	4.04	3.46
42	5.24	4.86	4.14	3.53
43	5.38	4.96	4.24	3.61
44	5.47	5.08	4.30	3.65
45	5.60	5.20	4.42	3.76
46	5.74	5.32	4.49	3.80
47	5.90	5.45	4.61	3.90
48	6.11	5.65	4.75	4.00
49	6.30	5.84	4.90	4.12
50	6.58	6.08	5.06	4.21
51	6.80	6.32	5.23	4.33
52	7.07	6.55	5.44	4.50
53	7.36	6.78	5.62	4.66
54	7.61	7.02	5.82	4.82
55	7.86	7.24	6.00	4.97
56	8.14	7.50	6.20	5.12
57	8.44	7.76	6.44	5.34
58	8.74	8.06	6.65	5.48
59	9.04	8.36	6.90	5.69
60	9.36	8.68	7.15	5.89
61	9.70	8.98	7.40	6.10
62	10.01	9.28	7.64	6.29
63	10.32	9.53	7.87	6.50
64	10.62	9.78	8.08	6.67
65	10.92	10.02	8.27	6.83
66	11.22	10.30	8.50	7.02
67	11.59	10.63	8.75	7.20
68	11.99	11.05	9.08	7.46
69	12.50	11.57	9.46	7.72
70	13.03	12.10	9.83	7.98
71	13.50	12.56	10.18	8.23
72	13.86	12.95	10.46	8.45
73	14.06	13.16	10.62	8.57
74	14.10	13.20	10.66	8.62
75	14.12	13.25	10.67	8.59
76	14.22	13.36	10.75	8.66
77	14.51	13.60	10.96	8.84
78	14.95	13.99	11.30	9.13
79	15.56	14.50	11.74	9.49
80	16.22	15.10	12.24	9.92
81	17.02	15.76	12.80	10.40
82	17.92	16.54	13.46	10.96
83	18.91	17.38	14.20	11.60
84	20.02	18.34	15.00	12.28

TO OBTAIN QUARTERLY, SEMIANNUAL, AND ANNUAL PREMIUMS, MULTIPLY THE ABC PREMIUMS BY 3, 6 AND 12 RESPECTIVELY. THE MONTHLY PREMIUMS FOR BANK SERV PAYROLL DEDUCTION ISSUES ARE THE PREMIUMS LISTED ABOVE.

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Date: 04/26/2017

MUTUAL OF OMAHA INSURANCE COMPANY
SCHEDULE OF MONTHLY RATES FOR RIDER FORM 0DX5M

PER \$10 DAILY CONFINED CARE/PER \$8 DAILY COMMUNITY BASED BENEFIT
80% HOME HEALTH CARE BENEFIT

Issue Age	BENEFIT -- 5 YEARS			
	ELIMINATION PERIODS			
	0 Day	20 Day	100 Day	365 Day
18-39	6.55	6.16	5.26	4.49
40	7.11	6.68	5.65	4.77
41	7.30	6.88	5.79	4.87
42	7.48	7.04	5.92	4.97
43	7.67	7.22	6.03	5.04
44	7.83	7.38	6.19	5.19
45	8.07	7.57	6.34	5.30
46	8.27	7.77	6.47	5.39
47	8.51	7.96	6.66	5.57
48	8.83	8.24	6.91	5.79
49	9.15	8.54	7.12	5.93
50	9.48	8.87	7.41	6.19
51	9.88	9.22	7.67	6.38
52	10.21	9.53	7.96	6.67
53	10.54	9.83	8.24	6.91
54	10.84	10.18	8.50	7.11
55	11.18	10.52	8.79	7.34
56	11.53	10.87	9.04	7.52
57	11.87	11.21	9.31	7.73
58	12.23	11.57	9.57	7.91
59	12.63	11.94	9.88	8.16
60	13.02	12.32	10.12	8.33
61	13.46	12.72	10.42	8.56
62	13.93	13.11	10.71	8.77
63	14.37	13.51	11.03	9.02
64	14.86	13.92	11.36	9.28
65	15.36	14.32	11.68	9.53
66	15.86	14.76	12.03	9.81
67	16.41	15.26	12.42	10.11
68	17.01	15.80	12.85	10.44
69	17.68	16.41	13.31	10.80
70	18.35	17.02	13.81	11.20
71	19.00	17.64	14.27	11.53
72	19.60	18.21	14.71	11.88
73	20.14	18.70	15.14	12.25
74	20.61	19.18	15.50	12.53
75	21.11	19.61	15.86	12.83
76	21.59	20.11	16.25	13.13
77	22.22	20.67	16.72	13.52
78	22.92	21.31	17.27	13.98
79	23.67	21.99	17.82	14.44
80	24.46	22.73	18.43	14.94
81	25.33	23.51	19.09	15.50
82	26.26	24.37	19.78	16.06
83	27.24	25.26	20.52	16.68
84	28.25	26.19	21.30	17.31

TO OBTAIN QUARTERLY, SEMIANNUAL, AND ANNUAL PREMIUMS,
MULTIPLY THE ABOVE QUOTED PREMIUMS BY 3, 6, AND 12,
RESPECTIVELY. THE MONTHLY PREMIUMS FOR BANK SERVICE PLAN
AND PAYROLL DEDUCTION ISSUES ARE THE PREMIUMS LISTED ABOVE.
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Date: 04/26/2017

MUTUAL OF OMAHA INSURANCE COMPANY
SCHEDULE OF MONTHLY RATES FOR RIDER FORM 0DX5M

PER \$10 DAILY CONFINED CARE/PER \$8 DAILY COMMUNITY BASED BENEFIT
80% HOME HEALTH CARE BENEFIT

Issue Age	BENEFIT -- LIFETIME			
	ELIMINATION PERIODS			
	0 Day	20 Day	100 Day	365 Day
18-39	16.49	15.76	13.01	10.78
40	17.48	16.70	13.81	11.41
41	17.94	17.10	14.16	11.74
42	18.33	17.43	14.54	12.08
43	18.83	17.91	14.90	12.41
44	19.30	18.40	15.31	12.72
45	19.83	18.92	15.76	13.11
46	20.42	19.48	16.24	13.54
47	20.99	20.00	16.70	13.94
48	21.62	20.60	17.20	14.36
49	22.33	21.23	17.73	14.79
50	22.99	21.87	18.27	15.24
51	23.71	22.48	18.75	15.64
52	24.32	22.99	19.18	15.99
53	24.87	23.40	19.54	16.33
54	25.28	23.70	19.73	16.41
55	25.73	24.01	19.99	16.63
56	26.20	24.32	20.24	16.85
57	26.76	24.78	20.57	17.04
58	27.54	25.40	21.07	17.49
59	28.41	26.11	21.62	17.91
60	29.34	26.84	22.17	18.33
61	30.30	27.69	22.84	18.84
62	31.25	28.52	23.51	19.34
63	32.26	29.45	24.16	19.83
64	33.29	30.46	24.93	20.42
65	34.34	31.49	25.67	20.93
66	35.47	32.58	26.54	21.62
67	36.59	33.67	27.36	22.23
68	37.86	34.82	28.36	23.08
69	39.11	35.98	29.39	23.97
70	40.42	37.21	30.39	24.85
71	41.70	38.39	31.43	25.73
72	42.99	39.58	32.48	26.58
73	44.22	40.76	33.43	27.37
74	45.41	41.83	34.34	28.15
75	46.64	42.99	35.28	28.99
76	47.90	44.24	36.27	29.75
77	49.19	45.56	37.33	30.60
78	50.57	47.10	38.48	31.43
79	51.96	48.69	39.71	32.35
80	53.48	50.44	41.00	33.29
81	55.10	52.31	42.40	34.37
82	56.76	54.26	43.86	35.47
83	58.59	56.33	45.41	36.67
84	60.46	58.47	47.04	37.86

TO OBTAIN QUARTERLY, SEMIANNUAL, AND ANNUAL PREMIUMS,
MULTIPLY THE ABOVE QUOTED PREMIUMS BY 3, 6, AND 12,
RESPECTIVELY. THE MONTHLY PREMIUMS FOR BANK SERVICE PLAN
AND PAYROLL DEDUCTION ISSUES ARE THE PREMIUMS LISTED ABOVE.
R25387-44-4

Date: 04/26/2017

MUTUAL OF OMAHA INSURANCE COMPANY
SCHEDULE OF MONTHLY RATES FOR RIDER FORM 0DX5M

PER \$10 DAILY CONFINED CARE/PER \$5 DAILY COMMUNITY BASED BENEFIT
50% HOME HEALTH CARE BENEFIT

BENEFIT -- 1 YEAR

Issue Age	Elimination Periods			
	0 Day	20 Day	100 Day	365 Day
18-39	2.11	1.98	1.72	1.49
40	2.30	2.14	1.86	1.63
41	2.35	2.18	1.90	1.66
42	2.44	2.26	1.96	1.70
43	2.50	2.32	2.02	1.75
44	2.56	2.38	2.05	1.76
45	2.64	2.45	2.11	1.82
46	2.74	2.53	2.17	1.86
47	2.80	2.63	2.24	1.90
48	2.92	2.72	2.34	2.02
49	3.02	2.84	2.40	2.03
50	3.13	2.96	2.51	2.14
51	3.25	3.08	2.59	2.18
52	3.36	3.22	2.68	2.24
53	3.49	3.32	2.77	2.32
54	3.61	3.46	2.88	2.41
55	3.73	3.56	2.95	2.44
56	3.88	3.70	3.07	2.56
57	4.01	3.83	3.16	2.62
58	4.16	3.96	3.28	2.70
59	4.31	4.10	3.40	2.82
60	4.49	4.26	3.52	2.92
61	4.64	4.42	3.64	2.98
62	4.84	4.60	3.78	3.11
63	5.06	4.78	3.95	3.26
64	5.28	4.96	4.08	3.36
65	5.50	5.17	4.26	3.52
66	5.77	5.38	4.44	3.67
67	6.01	5.62	4.63	3.82
68	6.31	5.87	4.84	3.97
69	6.64	6.16	5.03	4.12
70	6.96	6.46	5.26	4.27
71	7.28	6.77	5.45	4.39
72	7.60	7.03	5.66	4.56
73	7.82	7.26	5.86	4.72
74	8.05	7.45	6.04	4.88
75	8.26	7.67	6.20	5.02
76	8.50	7.88	6.38	5.16
77	8.76	8.14	6.59	5.33
78	9.06	8.42	6.80	5.50
79	9.40	8.75	7.06	5.68
80	9.77	9.10	7.30	5.86
81	10.14	9.46	7.57	6.07
82	10.57	9.84	7.87	6.29
83	11.02	10.25	8.17	6.52
84	11.47	10.69	8.50	6.76

TO OBTAIN QUARTERLY, SEMIANNUAL, AND ANNUAL PREMIUMS,
MULTIPLY THE ABOVE QUOTED PREMIUMS BY 3, 6, AND 12,
RESPECTIVELY. THE MONTHLY PREMIUMS FOR BANK SERVICE PLAN
AND PAYROLL DEDUCTION ISSUES ARE THE PREMIUMS LISTED ABOVE.
R25387-44-4

Date: 04/26/2017

MUTUAL OF OMAHA INSURANCE COMPANY
SCHEDULE OF MONTHLY RATES FOR RIDER FORM 0DX5M

PER \$10 DAILY CONFINED CARE/PER \$5 DAILY COMMUNITY BASED BENEFIT
50% HOME HEALTH CARE BENEFIT

BENEFIT -- 2 YEARS

Issue Age	Elimination Periods			
	0 Day	20 Day	100 Day	365 Day
18-39	3.06	2.95	2.54	2.20
40	3.30	3.18	2.74	2.38
41	3.38	3.25	2.80	2.41
42	3.50	3.35	2.89	2.50
43	3.59	3.44	2.95	2.53
44	3.71	3.53	3.02	2.59
45	3.80	3.64	3.10	2.65
46	3.91	3.73	3.19	2.74
47	4.04	3.85	3.28	2.78
48	4.16	3.97	3.36	2.86
49	4.30	4.09	3.46	2.92
50	4.46	4.24	3.56	2.99
51	4.60	4.38	3.68	3.10
52	4.75	4.52	3.82	3.22
53	4.92	4.68	3.94	3.30
54	5.08	4.84	4.06	3.41
55	5.28	5.00	4.21	3.54
56	5.50	5.20	4.36	3.65
57	5.72	5.38	4.52	3.80
58	5.99	5.62	4.70	3.94
59	6.28	5.86	4.90	4.08
60	6.56	6.10	5.08	4.24
61	6.88	6.35	5.27	4.38
62	7.16	6.61	5.46	4.51
63	7.44	6.86	5.64	4.64
64	7.70	7.12	5.81	4.74
65	7.97	7.39	5.99	4.85
66	8.30	7.68	6.19	4.99
67	8.69	8.02	6.46	5.20
68	9.19	8.46	6.83	5.52
69	9.78	8.98	7.24	5.86
70	10.39	9.50	7.70	6.24
71	10.97	9.98	8.12	6.61
72	11.46	10.43	8.48	6.90
73	11.81	10.76	8.78	7.16
74	12.10	11.05	9.04	7.40
75	12.35	11.30	9.26	7.60
76	12.60	11.56	9.47	7.78
77	12.91	11.86	9.71	7.96
78	13.25	12.19	9.98	8.17
79	13.63	12.54	10.24	8.36
80	14.02	12.91	10.54	8.59
81	14.41	13.28	10.82	8.82
82	14.84	13.69	11.11	9.02
83	15.29	14.11	11.42	9.25
84	15.76	14.53	11.76	9.52

TO OBTAIN QUARTERLY, SEMIANNUAL, AND ANNUAL PREMIUMS,
MULTIPLY THE ABOVE QUOTED PREMIUMS BY 3, 6, AND 12,
RESPECTIVELY. THE MONTHLY PREMIUMS FOR BANK SERVICE PLAN
AND PAYROLL DEDUCTION ISSUES ARE THE PREMIUMS LISTED ABOVE.
R25387-44-4

Date: 04/26/2017

MUTUAL OF OMAHA INSURANCE COMPANY
SCHEDULE OF MONTHLY RATES FOR RIDER FORM 0DX5M

PER \$10 DAILY CONFINED CARE/PER \$5 DAILY COMMUNITY BASED BENEFIT
50% HOME HEALTH CARE BENEFIT

BENEFIT -- 3 YEARS

Issue Age	Elimination Periods			
	0 Day	20 Day	100 Day	365 Day
18-39	3.91	3.64	3.10	2.63
40	4.27	3.97	3.38	2.88
41	4.38	4.07	3.48	2.98
42	4.51	4.18	3.56	3.04
43	4.61	4.27	3.65	3.12
44	4.72	4.37	3.70	3.13
45	4.82	4.46	3.80	3.24
46	4.94	4.56	3.86	3.28
47	5.08	4.69	3.97	3.36
48	5.24	4.86	4.09	3.44
49	5.42	5.03	4.22	3.54
50	5.65	5.22	4.36	3.62
51	5.86	5.44	4.51	3.74
52	6.10	5.63	4.67	3.88
53	6.31	5.84	4.82	3.98
54	6.53	6.04	5.02	4.15
55	6.76	6.25	5.16	4.26
56	7.00	6.46	5.35	4.44
57	7.25	6.68	5.53	4.58
58	7.50	6.92	5.72	4.73
59	7.79	7.20	5.94	4.90
60	8.06	7.46	6.16	5.08
61	8.33	7.74	6.36	5.23
62	8.62	7.97	6.58	5.44
63	8.88	8.21	6.76	5.57
64	9.14	8.42	6.95	5.74
65	9.40	8.63	7.12	5.87
66	9.65	8.86	7.32	6.05
67	9.97	9.14	7.54	6.22
68	10.33	9.52	7.80	6.40
69	10.75	9.94	8.12	6.64
70	11.21	10.42	8.45	6.86
71	11.59	10.81	8.75	7.08
72	11.92	11.14	9.00	7.27
73	12.10	11.32	9.14	7.38
74	12.13	11.38	9.16	7.38
75	12.16	11.40	9.19	7.42
76	12.23	11.48	9.25	7.46
77	12.47	11.69	9.44	7.62
78	12.88	12.04	9.72	7.85
79	13.38	12.47	10.09	8.16
80	13.96	12.97	10.54	8.56
81	14.64	13.56	11.00	8.93
82	15.42	14.22	11.58	9.43
83	16.26	14.96	12.22	9.98
84	17.21	15.77	12.91	10.57

TO OBTAIN QUARTERLY, SEMIANNUAL, AND ANNUAL PREMIUMS,
MULTIPLY THE ABOVE QUOTED PREMIUMS BY 3, 6, AND 12,
RESPECTIVELY. THE MONTHLY PREMIUMS FOR BANK SERVICE PLAN
AND PAYROLL DEDUCTION ISSUES ARE THE PREMIUMS LISTED ABOVE.
R25387-44-4

Date: 04/26/2017

MUTUAL OF OMAHA INSURANCE COMPANY
SCHEDULE OF MONTHLY RATES FOR RIDER FORM 0DX5M

PER \$10 DAILY CONFINED CARE/PER \$5 DAILY COMMUNITY BASED BENEFIT
50% HOME HEALTH CARE BENEFIT

BENEFIT -- 5 YEARS

Issue Age	Elimination Periods			
	0 Day	20 Day	100 Day	365 Day
18-39	5.76	5.46	4.63	3.95
40	6.26	5.92	4.97	4.18
41	6.45	6.05	5.10	4.31
42	6.61	6.23	5.23	4.40
43	6.78	6.38	5.32	4.47
44	6.92	6.52	5.47	4.60
45	7.13	6.68	5.59	4.66
46	7.30	6.84	5.72	4.77
47	7.51	7.04	5.89	4.93
48	7.79	7.30	6.09	5.09
49	8.06	7.55	6.28	5.23
50	8.37	7.83	6.55	5.48
51	8.70	8.12	6.79	5.68
52	9.02	8.43	7.04	5.87
53	9.31	8.70	7.27	6.08
54	9.56	8.99	7.50	6.27
55	9.86	9.28	7.77	6.48
56	10.16	9.59	7.99	6.66
57	10.48	9.89	8.23	6.84
58	10.80	10.22	8.46	7.01
59	11.15	10.55	8.69	7.17
60	11.50	10.87	8.93	7.35
61	11.89	11.22	9.19	7.52
62	12.30	11.57	9.45	7.71
63	12.69	11.92	9.75	7.96
64	13.12	12.28	10.02	8.17
65	13.57	12.65	10.32	8.43
66	14.01	13.05	10.63	8.67
67	14.50	13.48	10.96	8.91
68	15.03	13.95	11.33	9.20
69	15.59	14.48	11.75	9.55
70	16.21	15.04	12.19	9.88
71	16.78	15.58	12.58	10.16
72	17.31	16.08	12.99	10.49
73	17.80	16.52	13.34	10.78
74	18.21	16.92	13.67	11.04
75	18.63	17.34	13.99	11.30
76	19.07	17.75	14.34	11.59
77	19.61	18.26	14.76	11.94
78	20.24	18.81	15.24	12.34
79	20.90	19.43	15.73	12.74
80	21.60	20.06	16.28	13.21
81	22.37	20.77	16.87	13.71
82	23.19	21.51	17.48	14.20
83	24.05	22.30	18.11	14.71
84	24.95	23.12	18.80	15.29

TO OBTAIN QUARTERLY, SEMIANNUAL, AND ANNUAL PREMIUMS,
MULTIPLY THE ABOVE QUOTED PREMIUMS BY 3, 6, AND 12,
RESPECTIVELY. THE MONTHLY PREMIUMS FOR BANK SERVICE PLAN
AND PAYROLL DEDUCTION ISSUES ARE THE PREMIUMS LISTED ABOVE.
R25387-44-4

Date: 04/26/2017

MUTUAL OF OMAHA INSURANCE COMPANY
SCHEDULE OF MONTHLY RATES FOR RIDER FORM 0DX5M

PER \$10 DAILY CONFINED CARE/PER \$5 DAILY COMMUNITY BASED BENEFIT
50% HOME HEALTH CARE BENEFIT

Issue Age	BENEFIT -- LIFETIME			
	Elimination Periods			
	0 Day	20 Day	100 Day	365 Day
18-39	14.95	14.25	11.78	9.75
40	15.79	15.10	12.52	10.40
41	16.24	15.46	12.85	10.67
42	16.63	15.80	13.12	10.91
43	17.04	16.24	13.47	11.20
44	17.43	16.65	13.85	11.51
45	17.94	17.12	14.28	11.87
46	18.48	17.61	14.71	12.29
47	19.02	18.12	15.10	12.57
48	19.54	18.64	15.54	12.95
49	20.24	19.19	16.04	13.44
50	20.83	19.81	16.50	13.79
51	21.44	20.34	16.97	14.16
52	22.01	20.83	17.34	14.46
53	22.52	21.19	17.68	14.74
54	22.91	21.46	17.87	14.88
55	23.26	21.71	18.09	15.07
56	23.70	22.01	18.29	15.21
57	24.25	22.46	18.60	15.41
58	24.93	23.02	19.08	15.80
59	25.73	23.62	19.57	16.23
60	26.54	24.31	20.08	16.61
61	27.45	25.02	20.71	17.10
62	28.29	25.83	21.29	17.50
63	29.21	26.66	21.87	17.95
64	30.15	27.60	22.57	18.48
65	31.10	28.52	23.25	18.95
66	32.11	29.51	24.01	19.54
67	33.13	30.50	24.78	20.13
68	34.24	31.54	25.66	20.88
69	35.40	32.58	26.57	21.68
70	36.57	33.65	27.52	22.52
71	37.73	34.74	28.45	23.31
72	38.90	35.87	29.36	24.04
73	40.02	36.89	30.25	24.78
74	41.11	37.87	31.10	25.50
75	42.22	38.90	31.95	26.25
76	43.36	40.02	32.83	26.94
77	44.52	41.27	33.75	27.65
78	45.78	42.62	34.88	28.52
79	47.04	44.07	35.94	29.31
80	48.37	45.66	37.11	30.15
81	49.86	47.35	38.41	31.14
82	51.38	49.09	39.72	32.11
83	53.02	50.97	41.11	33.19
84	54.73	52.89	42.57	34.24

TO OBTAIN QUARTERLY, SEMIANNUAL, AND ANNUAL PREMIUMS,
MULTIPLY THE ABOVE QUOTED PREMIUMS BY 3, 6, AND 12,
RESPECTIVELY. THE MONTHLY PREMIUMS FOR BANK SERVICE PLAN
AND PAYROLL DEDUCTION ISSUES ARE THE PREMIUMS LISTED ABOVE.
R25387-44-4

Date: 04/26/2017

MUTUAL OF OMAHA INSURANCE COMPANY
SCHEDULE OF MONTHLY RATES FOR POLICY FORMS
NH50-Series 19242 and NH50-Series 19410
PER \$10 DAILY CONFINED CARE BENEFIT

BENEFIT -- 1 YEAR

IssueAge	ELIMINATION PERIODS			
	0 Day	20 Day	100 Day	365 Day
18-39	0.70	0.67	0.62	0.58
40	0.72	0.68	0.64	0.58
41	0.74	0.71	0.65	0.60
42	0.78	0.73	0.67	0.61
43	0.82	0.77	0.70	0.62
44	0.84	0.80	0.71	0.64
45	0.88	0.83	0.73	0.64
46	0.92	0.88	0.77	0.68
47	0.97	0.91	0.80	0.70
48	1.02	0.96	0.83	0.72
49	1.07	1.01	0.88	0.76
50	1.13	1.07	0.91	0.77
51	1.20	1.13	0.96	0.82
52	1.28	1.20	1.01	0.85
53	1.36	1.28	1.07	0.89
54	1.44	1.36	1.13	0.95
55	1.54	1.43	1.20	1.01
56	1.64	1.52	1.30	1.09
57	1.76	1.63	1.38	1.18
58	1.90	1.75	1.48	1.25
59	2.04	1.88	1.60	1.34
60	2.20	2.03	1.72	1.44
61	2.41	2.20	1.86	1.57
62	2.64	2.42	2.02	1.69
63	2.92	2.68	2.21	1.84
64	3.23	2.98	2.42	1.97
65	3.59	3.28	2.64	2.12
66	3.98	3.64	2.92	2.33
67	4.42	4.04	3.22	2.56
68	4.90	4.46	3.55	2.83
69	5.40	4.90	3.91	3.12
70	5.95	5.38	4.30	3.44
71	6.58	5.92	4.75	3.82
72	7.26	6.54	5.27	4.25
73	8.04	7.25	5.86	4.72
74	8.89	8.04	6.50	5.26
75	9.82	8.89	7.19	5.82
76	10.79	9.82	7.94	6.43
77	11.84	10.78	8.74	7.07
78	12.95	11.81	9.58	7.75
79	14.14	12.90	10.48	8.50
80	15.38	14.05	11.40	9.25
81	16.70	15.26	12.40	10.06
82	18.07	16.52	13.43	10.92
83	19.52	17.86	14.52	11.81
84	21.04	19.24	15.67	12.76

TO OBTAIN QUARTERLY, SEMIANNUAL, AND ANNUAL PREMIUMS, MULTIPLY THE ABOVE QUOTED PREMIUMS BY 3, 6, AND 12, RESPECTIVELY. THE MONTHLY PREMIUMS FOR BANK SERVICE PLAN AND PAYROLL DEDUCTION ISSUES ARE THE PREMIUMS LISTED ABOVE .

R25388-44-3

Date: 04/26/2017

MUTUAL OF OMAHA INSURANCE COMPANY
SCHEDULE OF MONTHLY RATES FOR POLICY FORMS
NH50-Series 19242 and NH50-Series 19410
PER \$10 DAILY CONFINED CARE BENEFIT

BENEFIT -- 2 YEARS

Issue Age	ELIMINATION PERIODS			
	0 Day	20 day	100 Day	365 Day
18-39	0.88	0.84	0.73	0.64
40	0.91	0.88	0.76	0.65
41	0.95	0.90	0.79	0.70
42	1.00	0.94	0.82	0.72
43	1.04	0.98	0.85	0.74
44	1.09	1.03	0.88	0.76
45	1.15	1.08	0.91	0.77
46	1.21	1.14	0.95	0.79
47	1.30	1.20	1.00	0.83
48	1.36	1.28	1.06	0.86
49	1.44	1.36	1.12	0.91
50	1.52	1.43	1.18	0.97
51	1.62	1.52	1.26	1.04
52	1.73	1.63	1.36	1.13
53	1.87	1.75	1.46	1.22
54	2.02	1.88	1.57	1.31
55	2.17	2.02	1.70	1.43
56	2.36	2.18	1.85	1.57
57	2.57	2.38	2.02	1.70
58	2.81	2.58	2.18	1.84
59	3.05	2.81	2.38	2.02
60	3.34	3.06	2.58	2.18
61	3.66	3.36	2.83	2.38
62	4.06	3.71	3.10	2.59
63	4.51	4.13	3.41	2.82
64	5.02	4.60	3.73	3.04
65	5.56	5.10	4.10	3.30
66	6.20	5.68	4.54	3.61
67	6.94	6.34	5.04	4.01
68	7.75	7.06	5.62	4.48
69	8.66	7.85	6.28	5.02
70	9.65	8.71	7.00	5.63
71	10.72	9.66	7.78	6.28
72	11.87	10.69	8.63	6.97
73	13.09	11.80	9.54	7.72
74	14.36	12.98	10.50	8.50
75	15.72	14.26	11.53	9.34
76	17.20	15.64	12.65	10.24
77	18.80	17.12	13.86	11.22
78	20.54	18.73	15.18	12.30
79	22.40	20.44	16.58	13.45
80	24.38	22.26	18.06	14.65
81	26.48	24.18	19.66	15.97
82	28.69	26.22	21.32	17.34
83	31.03	28.37	23.08	18.76
84	33.48	30.62	24.92	20.28

TO OBTAIN QUARTERLY, SEMIANNUAL, AND ANNUAL PREMIUMS, MULTIPLY THE ABOVE QUOTED PREMIUMS BY 3, 6, AND 12 , RESPECTIVELY. THE MONTHLY PREMIUMS FOR BANK SERVICE PLAN AND PAYROLL DEDUCTION ISSUES ARE THE PREMIUMS LISTED ABOVE.

Date: 04/26/2017

MUTUAL OF OMAHA INSURANCE COMPANY
SCHEDULE OF MONTHLY RATES FOR POLICY FORMS
NH50-Series 19242 and NH50-Series 19410
PER \$10 DAILY CONFINED CARE BENEFIT

BENEFIT -- 3 YEARS

Issue Age	ELIMINATION PERIODS			
	0 Day	20 Day	100 Day	365 Day
18-39	1.08	1.00	0.83	0.70
40	1.12	1.03	0.86	0.72
41	1.18	1.07	0.89	0.74
42	1.22	1.12	0.94	0.77
43	1.30	1.18	0.97	0.80
44	1.36	1.24	1.02	0.85
45	1.42	1.31	1.06	0.86
46	1.50	1.38	1.12	0.91
47	1.60	1.46	1.18	0.95
48	1.68	1.55	1.25	1.01
49	1.79	1.64	1.33	1.08
50	1.90	1.74	1.40	1.13
51	2.03	1.86	1.49	1.19
52	2.17	1.99	1.60	1.30
53	2.34	2.14	1.72	1.39
54	2.51	2.30	1.86	1.50
55	2.70	2.47	2.00	1.62
56	2.92	2.68	2.16	1.75
57	3.18	2.92	2.36	1.91
58	3.47	3.17	2.56	2.08
59	3.77	3.46	2.78	2.23
60	4.12	3.78	3.04	2.44
61	4.52	4.15	3.34	2.68
62	5.00	4.60	3.67	2.93
63	5.56	5.08	4.07	3.28
64	6.14	5.59	4.52	3.65
65	6.82	6.18	5.02	4.06
66	7.58	6.85	5.56	4.51
67	8.47	7.66	6.18	4.99
68	9.46	8.57	6.84	5.46
69	10.55	9.59	7.56	5.96
70	11.74	10.72	8.34	6.49
71	13.06	11.93	9.22	7.12
72	14.48	13.26	10.20	7.85
73	16.04	14.70	11.32	8.72
74	17.74	16.24	12.55	9.70
75	19.54	17.89	13.87	10.75
76	21.44	19.61	15.28	11.89
77	23.46	21.42	16.73	13.07
78	25.58	23.30	18.24	14.28
79	27.83	25.26	19.84	15.58
80	30.17	27.30	21.48	16.90
81	32.62	29.42	23.20	18.28
82	35.20	31.62	25.00	19.75
83	37.86	33.90	26.86	21.28
84	40.66	36.28	28.78	22.84

TO OBTAIN QUARTERLY, SEMIANNUAL, AND ANNUAL PREMIUMS, MULTIPLY THE ABOVE QUOTED PREMIUMS BY 3, 6, AND 12 , RESPECTIVELY. THE MONTHLY PREMIUMS FOR BANK SERVICE PLAN AND PAYROLL DEDUCTION ISSUES ARE THE PREMIUMS LISTED ABOVE.

Date: 04/26/2017

MUTUAL OF OMAHA INSURANCE COMPANY
SCHEDULE OF MONTHLY RATES FOR POLICY FORMS
NH50-Series 19242 and NH50-Series 19410
PER \$10 DAILY CONFINED CARE BENEFIT

BENEFIT -- 5 YEARS

Issue Age	ELIMINATION PERIODS			
	0 Day	20 Day	100 Day	365 Day
18-39	1.43	1.32	1.06	0.85
40	1.47	1.36	1.10	0.90
41	1.54	1.44	1.13	0.90
42	1.63	1.51	1.19	0.94
43	1.69	1.58	1.24	0.98
44	1.78	1.66	1.31	1.03
45	1.89	1.76	1.39	1.10
46	2.00	1.85	1.47	1.18
47	2.12	1.97	1.56	1.24
48	2.26	2.09	1.66	1.32
49	2.39	2.22	1.76	1.40
50	2.55	2.35	1.87	1.50
51	2.73	2.51	2.00	1.60
52	2.93	2.71	2.16	1.72
53	3.16	2.92	2.33	1.87
54	3.41	3.16	2.53	2.02
55	3.69	3.41	2.75	2.22
56	4.00	3.71	2.98	2.40
57	4.36	4.04	3.26	2.63
58	4.73	4.40	3.54	2.84
59	5.15	4.80	3.83	3.06
60	5.61	5.20	4.14	3.29
61	6.14	5.70	4.53	3.59
62	6.79	6.28	4.99	3.97
63	7.52	6.94	5.53	4.41
64	8.34	7.67	6.14	4.93
65	9.24	8.47	6.81	5.48
66	10.27	9.39	7.57	6.08
67	11.44	10.44	8.43	6.79
68	12.75	11.61	9.36	7.55
69	14.17	12.87	10.36	8.34
70	15.72	14.27	11.47	9.23
71	17.42	15.82	12.69	10.21
72	19.29	17.50	14.04	11.24
73	21.34	19.38	15.49	12.39
74	23.55	21.38	17.05	13.60
75	25.92	23.55	18.73	14.91
76	28.42	25.85	20.54	16.31
77	31.08	28.27	22.44	17.81
78	33.88	30.83	24.46	19.42
79	36.83	33.53	26.59	21.10
80	39.92	36.36	28.83	22.88
81	43.18	39.31	31.20	24.75
82	46.57	42.42	33.66	26.71
83	50.11	45.65	36.25	28.79
84	53.79	49.02	38.93	30.93

TO OBTAIN QUARTERLY, SEMIANNUAL, AND ANNUAL PREMIUMS, MULTIPLY THE ABOVE QUOTED PREMIUMS BY 3, 6, AND 12, RESPECTIVELY. THE MONTHLY PREMIUMS FOR BANK SERVICE PLAN AND PAYROLL DEDUCTION ISSUES ARE THE PREMIUMS LISTED ABOVE.

R25388-44-3

Date: 04/26/2017

MUTUAL OF OMAHA INSURANCE COMPANY
SCHEDULE OF MONTHLY RATES FOR POLICY FORMS
NH50-Series 19242 and NH50-Series 19410
PER \$10 DAILY CONFINED CARE BENEFIT

BENEFITS -- LIFETIME				
Issue Age	ELIMINATION PERIODS			
	0 Day	20 Day	100 Day	365 Day
18-39	2.83	2.70	2.11	1.66
40	2.95	2.80	2.21	1.74
41	3.11	2.95	2.31	1.82
42	3.26	3.11	2.44	1.94
43	3.46	3.30	2.59	2.04
44	3.69	3.52	2.80	2.18
45	3.97	3.80	2.99	2.37
46	4.24	4.07	3.22	2.56
47	4.52	4.34	3.45	2.74
48	4.86	4.62	3.67	2.90
49	5.21	4.93	3.91	3.12
50	5.55	5.23	4.16	3.30
51	5.94	5.54	4.42	3.52
52	6.34	5.88	4.71	3.76
53	6.73	6.21	4.99	4.00
54	7.05	6.54	5.25	4.24
55	7.46	6.85	5.55	4.52
56	7.93	7.25	5.93	4.82
57	8.52	7.79	6.34	5.15
58	9.20	8.40	6.81	5.54
59	9.96	9.06	7.31	5.88
60	10.82	9.80	7.87	6.34
61	11.83	10.69	8.58	6.88
62	13.04	11.78	9.41	7.51
63	14.44	13.04	10.40	8.32
64	15.98	14.46	11.54	9.20
65	17.71	16.04	12.84	10.27
66	19.60	17.80	14.25	11.38
67	21.71	19.73	15.76	12.57
68	24.04	21.84	17.39	13.86
69	26.51	24.12	19.12	15.15
70	29.19	26.59	21.00	16.59
71	32.11	29.26	23.08	18.19
72	35.31	32.20	25.34	19.94
73	38.79	35.43	27.85	21.85
74	42.51	38.84	30.50	23.97
75	46.50	42.51	33.41	26.27
76	50.75	46.46	36.49	28.65
77	55.22	50.69	39.81	31.29
78	59.97	55.21	43.36	34.07
79	64.96	59.98	47.13	37.04
80	70.19	65.05	51.10	40.16
81	75.71	70.42	55.32	43.46
82	81.46	76.00	59.74	46.93
83	87.45	81.91	64.36	50.57
84	93.74	88.08	69.21	54.37

TO OBTAIN QUARTERLY, SEMIANNUAL, AND ANNUAL PREMIUMS, MULTIPLY THE ABOVE QUOTED PREMIUMS BY 3, 6, AND 12, RESPECTIVELY. THE MONTHLY PREMIUMS FOR BANK SERVICE PLAN AND PAYROLL DEDUCTION ISSUES ARE THE PREMIUMS LISTED ABOVE.

R25388-44-3

Date: 04/26/2017

MUTUAL OF OMAHA INSURANCE COMPANY
SCHEDULE OF MONTHLY RATES FOR POLICY FORMS
NH50-Series 19242 and NH50-Series 19410
PER \$10 DAILY CONFINED CARE BENEFIT

BENEFIT -- 1 YEAR

IssueAge	ELIMINATION PERIODS			
	0 Day	20 Day	100 Day	365 Day
18-39	0.70	0.67	0.62	0.58
40	0.72	0.68	0.64	0.58
41	0.74	0.71	0.65	0.60
42	0.78	0.73	0.67	0.61
43	0.82	0.77	0.70	0.62
44	0.84	0.80	0.71	0.64
45	0.88	0.83	0.73	0.64
46	0.92	0.88	0.77	0.68
47	0.97	0.91	0.80	0.70
48	1.02	0.96	0.83	0.72
49	1.07	1.01	0.88	0.76
50	1.13	1.07	0.91	0.77
51	1.20	1.13	0.96	0.82
52	1.28	1.20	1.01	0.85
53	1.36	1.28	1.07	0.89
54	1.44	1.36	1.13	0.95
55	1.54	1.43	1.20	1.01
56	1.64	1.52	1.30	1.09
57	1.76	1.63	1.38	1.18
58	1.90	1.75	1.48	1.25
59	2.04	1.88	1.60	1.34
60	2.20	2.03	1.72	1.44
61	2.41	2.20	1.86	1.57
62	2.64	2.42	2.02	1.69
63	2.92	2.68	2.21	1.84
64	3.23	2.98	2.42	1.97
65	3.59	3.28	2.64	2.12
66	3.98	3.64	2.92	2.33
67	4.42	4.04	3.22	2.56
68	4.90	4.46	3.55	2.83
69	5.40	4.90	3.91	3.12
70	5.95	5.38	4.30	3.44
71	6.58	5.92	4.75	3.82
72	7.26	6.54	5.27	4.25
73	8.04	7.25	5.86	4.72
74	8.89	8.04	6.50	5.26
75	9.82	8.89	7.19	5.82
76	10.79	9.82	7.94	6.43
77	11.84	10.78	8.74	7.07
78	12.95	11.81	9.58	7.75
79	14.14	12.90	10.48	8.50
80	15.38	14.05	11.40	9.25
81	16.70	15.26	12.40	10.06
82	18.07	16.52	13.43	10.92
83	19.52	17.86	14.52	11.81
84	21.04	19.24	15.67	12.76

TO OBTAIN QUARTERLY, SEMIANNUAL, AND ANNUAL PREMIUMS, MULTIPLY THE ABOVE QUOTED PREMIUMS BY 3, 6, AND 12, RESPECTIVELY. THE MONTHLY PREMIUMS FOR BANK SERVICE PLAN AND PAYROLL DEDUCTION ISSUES ARE THE PREMIUMS LISTED ABOVE .

R25388-44-4

Date: 04/26/2017

MUTUAL OF OMAHA INSURANCE COMPANY
SCHEDULE OF MONTHLY RATES FOR POLICY FORMS
NH50-Series 19242 and NH50-Series 19410
PER \$10 DAILY CONFINED CARE BENEFIT

BENEFIT -- 2 YEARS

Issue Age	ELIMINATION PERIODS			
	0 Day	20 day	100 Day	365 Day
18-39	0.88	0.84	0.73	0.64
40	0.91	0.88	0.76	0.65
41	0.95	0.90	0.79	0.70
42	1.00	0.94	0.82	0.72
43	1.04	0.98	0.85	0.74
44	1.09	1.03	0.88	0.76
45	1.15	1.08	0.91	0.77
46	1.21	1.14	0.95	0.79
47	1.30	1.20	1.00	0.83
48	1.36	1.28	1.06	0.86
49	1.44	1.36	1.12	0.91
50	1.52	1.43	1.18	0.97
51	1.62	1.52	1.26	1.04
52	1.73	1.63	1.36	1.13
53	1.87	1.75	1.46	1.22
54	2.02	1.88	1.57	1.31
55	2.17	2.02	1.70	1.43
56	2.36	2.18	1.85	1.57
57	2.57	2.38	2.02	1.70
58	2.81	2.58	2.18	1.84
59	3.05	2.81	2.38	2.02
60	3.34	3.06	2.58	2.18
61	3.66	3.36	2.83	2.38
62	4.06	3.71	3.10	2.59
63	4.51	4.13	3.41	2.82
64	5.02	4.60	3.73	3.04
65	5.56	5.10	4.10	3.30
66	6.20	5.68	4.54	3.61
67	6.94	6.34	5.04	4.01
68	7.75	7.06	5.62	4.48
69	8.66	7.85	6.28	5.02
70	9.65	8.71	7.00	5.63
71	10.72	9.66	7.78	6.28
72	11.87	10.69	8.63	6.97
73	13.09	11.80	9.54	7.72
74	14.36	12.98	10.50	8.50
75	15.72	14.26	11.53	9.34
76	17.20	15.64	12.65	10.24
77	18.80	17.12	13.86	11.22
78	20.54	18.73	15.18	12.30
79	22.40	20.44	16.58	13.45
80	24.38	22.26	18.06	14.65
81	26.48	24.18	19.66	15.97
82	28.69	26.22	21.32	17.34
83	31.03	28.37	23.08	18.76
84	33.48	30.62	24.92	20.28

TO OBTAIN QUARTERLY, SEMIANNUAL, AND ANNUAL PREMIUMS, MULTIPLY THE ABOVE QUOTED PREMIUMS BY 3, 6, AND 12 , RESPECTIVELY. THE MONTHLY PREMIUMS FOR BANK SERVICE PLAN AND PAYROLL DEDUCTION ISSUES ARE THE PREMIUMS LISTED ABOVE.

Date: 04/26/2017

MUTUAL OF OMAHA INSURANCE COMPANY
SCHEDULE OF MONTHLY RATES FOR POLICY FORMS
NH50-Series 19242 and NH50-Series 19410
PER \$10 DAILY CONFINED CARE BENEFIT

BENEFIT -- 3 YEARS

Issue Age	ELIMINATION PERIODS			
	0 Day	20 Day	100 Day	365 Day
18-39	1.08	1.00	0.83	0.70
40	1.12	1.03	0.86	0.72
41	1.18	1.07	0.89	0.74
42	1.22	1.12	0.94	0.77
43	1.30	1.18	0.97	0.80
44	1.36	1.24	1.02	0.85
45	1.42	1.31	1.06	0.86
46	1.50	1.38	1.12	0.91
47	1.60	1.46	1.18	0.95
48	1.68	1.55	1.25	1.01
49	1.79	1.64	1.33	1.08
50	1.90	1.74	1.40	1.13
51	2.03	1.86	1.49	1.19
52	2.17	1.99	1.60	1.30
53	2.34	2.14	1.72	1.39
54	2.51	2.30	1.86	1.50
55	2.70	2.47	2.00	1.62
56	2.92	2.68	2.16	1.75
57	3.18	2.92	2.36	1.91
58	3.47	3.17	2.56	2.08
59	3.77	3.46	2.78	2.23
60	4.12	3.78	3.04	2.44
61	4.52	4.15	3.34	2.68
62	5.00	4.60	3.67	2.93
63	5.56	5.08	4.07	3.28
64	6.14	5.59	4.52	3.65
65	6.82	6.18	5.02	4.06
66	7.58	6.85	5.56	4.51
67	8.47	7.66	6.18	4.99
68	9.46	8.57	6.84	5.46
69	10.55	9.59	7.56	5.96
70	11.74	10.72	8.34	6.49
71	13.06	11.93	9.22	7.12
72	14.48	13.26	10.20	7.85
73	16.04	14.70	11.32	8.72
74	17.74	16.24	12.55	9.70
75	19.54	17.89	13.87	10.75
76	21.44	19.61	15.28	11.89
77	23.46	21.42	16.73	13.07
78	25.58	23.30	18.24	14.28
79	27.83	25.26	19.84	15.58
80	30.17	27.30	21.48	16.90
81	32.62	29.42	23.20	18.28
82	35.20	31.62	25.00	19.75
83	37.86	33.90	26.86	21.28
84	40.66	36.28	28.78	22.84

TO OBTAIN QUARTERLY, SEMIANNUAL, AND ANNUAL PREMIUMS, MULTIPLY THE ABOVE QUOTED PREMIUMS BY 3, 6, AND 12 , RESPECTIVELY. THE MONTHLY PREMIUMS FOR BANK SERVICE PLAN AND PAYROLL DEDUCTION ISSUES ARE THE PREMIUMS LISTED ABOVE.

Date: 04/26/2017

MUTUAL OF OMAHA INSURANCE COMPANY
SCHEDULE OF MONTHLY RATES FOR POLICY FORMS
NH50-Series 19242 and NH50-Series 19410
PER \$10 DAILY CONFINED CARE BENEFIT

BENEFIT -- 5 YEARS

Issue Age	ELIMINATION PERIODS			
	0 Day	20 Day	100 Day	365 Day
18-39	1.43	1.32	1.06	0.85
40	1.47	1.36	1.10	0.90
41	1.54	1.44	1.13	0.90
42	1.63	1.51	1.19	0.94
43	1.69	1.58	1.24	0.98
44	1.78	1.66	1.31	1.03
45	1.89	1.76	1.39	1.10
46	2.00	1.85	1.47	1.18
47	2.12	1.97	1.56	1.24
48	2.26	2.09	1.66	1.32
49	2.39	2.22	1.76	1.40
50	2.55	2.35	1.87	1.50
51	2.73	2.51	2.00	1.60
52	2.93	2.71	2.16	1.72
53	3.16	2.92	2.33	1.87
54	3.41	3.16	2.53	2.02
55	3.69	3.41	2.75	2.22
56	4.00	3.71	2.98	2.40
57	4.36	4.04	3.26	2.63
58	4.73	4.40	3.54	2.84
59	5.15	4.80	3.83	3.06
60	5.61	5.20	4.14	3.29
61	6.14	5.70	4.53	3.59
62	6.79	6.28	4.99	3.97
63	7.52	6.94	5.53	4.41
64	8.34	7.67	6.14	4.93
65	9.24	8.47	6.81	5.48
66	10.27	9.39	7.57	6.08
67	11.44	10.44	8.43	6.79
68	12.75	11.61	9.36	7.55
69	14.17	12.87	10.36	8.34
70	15.72	14.27	11.47	9.23
71	17.42	15.82	12.69	10.21
72	19.29	17.50	14.04	11.24
73	21.34	19.38	15.49	12.39
74	23.55	21.38	17.05	13.60
75	25.92	23.55	18.73	14.91
76	28.42	25.85	20.54	16.31
77	31.08	28.27	22.44	17.81
78	33.88	30.83	24.46	19.42
79	36.83	33.53	26.59	21.10
80	39.92	36.36	28.83	22.88
81	43.18	39.31	31.20	24.75
82	46.57	42.42	33.66	26.71
83	50.11	45.65	36.25	28.79
84	53.79	49.02	38.93	30.93

TO OBTAIN QUARTERLY, SEMIANNUAL, AND ANNUAL PREMIUMS, MULTIPLY THE ABOVE QUOTED PREMIUMS BY 3, 6, AND 12, RESPECTIVELY. THE MONTHLY PREMIUMS FOR BANK SERVICE PLAN AND PAYROLL DEDUCTION ISSUES ARE THE PREMIUMS LISTED ABOVE.

R25388-44-4

Date: 04/26/2017

MUTUAL OF OMAHA INSURANCE COMPANY
SCHEDULE OF MONTHLY RATES FOR POLICY FORMS
NH50-Series 19242 and NH50-Series 19410
PER \$10 DAILY CONFINED CARE BENEFIT

Issue Age	BENEFITS -- LIFETIME			
	ELIMINATION PERIODS			
	0 Day	20 Day	100 Day	365 Day
18-39	3.25	3.11	2.43	1.91
40	3.39	3.22	2.54	2.00
41	3.58	3.39	2.66	2.09
42	3.75	3.58	2.81	2.23
43	3.98	3.80	2.98	2.35
44	4.24	4.05	3.22	2.51
45	4.57	4.37	3.44	2.73
46	4.88	4.68	3.70	2.94
47	5.20	4.99	3.97	3.15
48	5.59	5.31	4.22	3.34
49	5.99	5.67	4.50	3.59
50	6.38	6.01	4.78	3.80
51	6.83	6.37	5.08	4.05
52	7.29	6.76	5.42	4.32
53	7.74	7.14	5.74	4.60
54	8.11	7.52	6.04	4.88
55	8.58	7.88	6.38	5.20
56	9.12	8.34	6.82	5.54
57	9.80	8.96	7.29	5.92
58	10.58	9.66	7.83	6.37
59	11.45	10.42	8.41	6.76
60	12.44	11.27	9.05	7.29
61	13.60	12.29	9.87	7.91
62	15.00	13.55	10.82	8.64
63	16.61	15.00	11.96	9.57
64	18.38	16.63	13.27	10.58
65	20.37	18.45	14.77	11.81
66	22.54	20.47	16.39	13.09
67	24.97	22.69	18.12	14.46
68	27.65	25.12	20.00	15.94
69	30.49	27.74	21.99	17.42
70	33.57	30.58	24.15	19.08
71	36.93	33.65	26.54	20.92
72	40.61	37.03	29.14	22.93
73	44.61	40.74	32.03	25.13
74	48.89	44.67	35.08	27.57
75	53.48	48.89	38.42	30.21
76	58.36	53.43	41.96	32.95
77	63.50	58.29	45.78	35.98
78	68.97	63.49	49.86	39.18
79	74.70	68.98	54.20	42.60
80	80.72	74.81	58.77	46.18
81	87.07	80.98	63.62	49.98
82	93.68	87.40	68.70	53.97
83	100.57	94.20	74.01	58.16
84	107.80	101.29	79.59	62.53

TO OBTAIN QUARTERLY, SEMIANNUAL, AND ANNUAL PREMIUMS, MULTIPLY THE ABOVE QUOTED PREMIUMS BY 3, 6, AND 12, RESPECTIVELY. THE MONTHLY PREMIUMS FOR BANK SERVICE PLAN AND PAYROLL DEDUCTION ISSUES ARE THE PREMIUMS LISTED ABOVE.

R25388-44-4

Date: 04/26/2017

MUTUAL OF OMAHA INSURANCE COMPANY
SCHEDULE OF MONTHLY RATES FOR RIDER FORM 0DX6M

PER \$10 DAILY CONFINED CARE BENEFIT

BENEFIT -- 1 YEAR

IssueAge	ELIMINATION PERIODS			
	0 Day	20 Day	100 Day	365 Day
18-39	1.04	1.00	0.92	0.86
40	1.08	1.02	0.95	0.89
41	1.12	1.04	0.97	0.90
42	1.14	1.09	1.00	0.90
43	1.18	1.12	1.01	0.92
44	1.22	1.14	1.03	0.94
45	1.26	1.18	1.07	0.97
46	1.31	1.22	1.08	0.96
47	1.37	1.28	1.12	0.98
48	1.44	1.36	1.18	1.01
49	1.52	1.43	1.22	1.04
50	1.60	1.51	1.28	1.09
51	1.69	1.60	1.36	1.14
52	1.78	1.68	1.42	1.18
53	1.85	1.74	1.48	1.25
54	1.94	1.81	1.54	1.30
55	2.02	1.90	1.60	1.33
56	2.10	1.96	1.66	1.39
57	2.21	2.04	1.72	1.45
58	2.30	2.14	1.79	1.50
59	2.42	2.22	1.88	1.60
60	2.53	2.32	1.96	1.64
61	2.64	2.44	2.03	1.70
62	2.78	2.54	2.12	1.78
63	2.90	2.66	2.20	1.82
64	3.04	2.76	2.26	1.85
65	3.16	2.92	2.35	1.90
66	3.31	3.05	2.44	1.93
67	3.50	3.20	2.56	2.03
68	3.72	3.40	2.70	2.15
69	3.97	3.61	2.88	2.30
70	4.25	3.84	3.10	2.50
71	4.51	4.07	3.29	2.66
72	4.75	4.27	3.46	2.78
73	4.92	4.44	3.60	2.92
74	5.08	4.60	3.70	2.99
75	5.21	4.73	3.82	3.08
76	5.38	4.87	3.94	3.17
77	5.53	5.03	4.07	3.29
78	5.74	5.20	4.22	3.43
79	5.92	5.40	4.37	3.53
80	6.13	5.60	4.54	3.68
81	6.34	5.80	4.72	3.85
82	6.58	6.02	4.90	4.00
83	6.82	6.24	5.08	4.14
84	7.07	6.48	5.28	4.30

TO OBTAIN QUARTERLY, SEMIANNUAL, AND ANNUAL PREMIUMS, MULTIPLY THE ABOVE QUOTED PREMIUMS BY 3, 6, AND 12, RESPECTIVELY. THE MONTHLY PREMIUMS FOR BANK SERVICE PLAN AND PAYROLL DEDUCTION ISSUES ARE THE PREMIUMS LISTED ABOVE .

R25388-44-3

Date: 04/26/2017

MUTUAL OF OMAHA INSURANCE COMPANY
SCHEDULE OF MONTHLY RATES FOR RIDER FORM 0DX6M

PER \$10 DAILY CONFINED CARE BENEFIT

BENEFIT -- 2 YEARS

Issue Age	ELIMINATION PERIODS			
	0 Day	20 day	100 Day	365 Day
18-39	1.69	1.61	1.40	1.22
40	1.74	1.66	1.45	1.26
41	1.80	1.72	1.49	1.30
42	1.87	1.78	1.54	1.34
43	1.94	1.84	1.58	1.36
44	2.02	1.90	1.62	1.38
45	2.09	1.98	1.67	1.42
46	2.20	2.05	1.72	1.43
47	2.28	2.15	1.78	1.46
48	2.38	2.23	1.86	1.55
49	2.48	2.33	1.94	1.62
50	2.59	2.45	2.03	1.69
51	2.72	2.56	2.14	1.78
52	2.86	2.68	2.23	1.86
53	2.99	2.82	2.35	1.96
54	3.16	2.95	2.48	2.09
55	3.34	3.10	2.62	2.20
56	3.49	3.26	2.74	2.30
57	3.70	3.41	2.89	2.45
58	3.88	3.59	3.04	2.56
59	4.10	3.76	3.17	2.68
60	4.30	3.95	3.34	2.82
61	4.54	4.15	3.47	2.90
62	4.78	4.37	3.64	3.04
63	5.02	4.58	3.78	3.12
64	5.26	4.80	3.94	3.22
65	5.51	5.05	4.07	3.28
66	5.80	5.32	4.24	3.38
67	6.14	5.62	4.48	3.56
68	6.58	6.00	4.78	3.80
69	7.07	6.42	5.14	4.10
70	7.60	6.88	5.51	4.42
71	8.10	7.30	5.88	4.73
72	8.52	7.67	6.19	4.99
73	8.82	7.96	6.42	5.18
74	9.05	8.17	6.61	5.35
75	9.25	8.38	6.78	5.48
76	9.47	8.62	6.96	5.62
77	9.77	8.89	7.20	5.83
78	10.14	9.24	7.48	6.06
79	10.56	9.64	7.81	6.34
80	11.02	10.06	8.16	6.64
81	11.50	10.52	8.53	6.92
82	12.05	11.02	8.94	7.25
83	12.64	11.53	9.40	7.66
84	13.25	12.10	9.85	8.02

TO OBTAIN QUARTERLY, SEMIANNUAL, AND ANNUAL PREMIUMS, MULTIPLY THE ABOVE QUOTED PREMIUMS BY 3, 6, AND 12 , RESPECTIVELY. THE MONTHLY PREMIUMS FOR BANK SERVICE PLAN AND PAYROLL DEDUCTION ISSUES ARE THE PREMIUMS LISTED ABOVE.

R25388-44-3

Date: 04/26/2017

MUTUAL OF OMAHA INSURANCE COMPANY
SCHEDULE OF MONTHLY RATES FOR RIDER FORM 0DX6M

PER \$10 DAILY CONFINED CARE BENEFIT

BENEFIT -- 3 YEARS

Issue Age	ELIMINATION PERIODS			
	0 Day	20 Day	100 Day	365 Day
18-39	2.44	2.21	1.84	1.54
40	2.51	2.29	1.90	1.57
41	2.58	2.38	1.97	1.64
42	2.68	2.45	2.03	1.68
43	2.75	2.53	2.09	1.73
44	2.84	2.62	2.14	1.73
45	2.94	2.68	2.20	1.80
46	3.04	2.77	2.27	1.86
47	3.14	2.88	2.34	1.90
48	3.28	2.99	2.42	1.96
49	3.40	3.11	2.51	2.02
50	3.55	3.25	2.62	2.11
51	3.70	3.38	2.74	2.21
52	3.88	3.54	2.86	2.29
53	4.02	3.70	2.98	2.39
54	4.20	3.83	3.10	2.51
55	4.39	4.00	3.24	2.62
56	4.60	4.18	3.40	2.77
57	4.80	4.37	3.55	2.89
58	5.03	4.60	3.72	3.01
59	5.27	4.82	3.90	3.16
60	5.54	5.08	4.08	3.28
61	5.80	5.34	4.27	3.42
62	6.11	5.62	4.49	3.60
63	6.41	5.88	4.72	3.79
64	6.76	6.16	4.96	4.01
65	7.10	6.43	5.21	4.22
66	7.48	6.76	5.50	4.46
67	7.90	7.14	5.77	4.67
68	8.41	7.61	6.10	4.90
69	8.98	8.15	6.44	5.09
70	9.58	8.74	6.82	5.32
71	10.18	9.30	7.18	5.54
72	10.70	9.79	7.54	5.80
73	11.16	10.21	7.86	6.05
74	11.56	10.60	8.17	6.30
75	11.96	10.96	8.48	6.58
76	12.37	11.32	8.80	6.84
77	12.85	11.74	9.16	7.15
78	13.39	12.19	9.54	7.46
79	13.96	12.67	9.94	7.80
80	14.57	13.18	10.37	8.16
81	15.22	13.72	10.84	8.56
82	15.89	14.28	11.28	8.92
83	16.61	14.87	11.77	9.31
84	17.35	15.47	12.26	9.71

TO OBTAIN QUARTERLY, SEMIANNUAL, AND ANNUAL PREMIUMS, MULTIPLY THE ABOVE QUOTED PREMIUMS BY 3, 6, AND 12, RESPECTIVELY. THE MONTHLY PREMIUMS FOR BANK SERVICE PLAN AND PAYROLL DEDUCTION ISSUES ARE THE PREMIUMS LISTED ABOVE.

R25388-44-3

Date: 04/26/2017

MUTUAL OF OMAHA INSURANCE COMPANY
SCHEDULE OF MONTHLY RATES FOR RIDER FORM 0DX6M

PER \$10 DAILY CONFINED CARE BENEFIT

BENEFIT -- 5 YEARS

Issue Age	ELIMINATION PERIODS			
	0 Day	20 Day	100 Day	365 Day
18-39	3.48	3.23	2.62	2.10
40	3.58	3.34	2.65	2.10
41	3.69	3.43	2.73	2.17
42	3.82	3.54	2.82	2.22
43	3.95	3.67	2.90	2.30
44	4.09	3.81	3.01	2.39
45	4.27	3.94	3.12	2.49
46	4.40	4.10	3.23	2.55
47	4.60	4.25	3.38	2.68
48	4.77	4.41	3.50	2.77
49	4.96	4.60	3.64	2.89
50	5.15	4.76	3.78	3.01
51	5.36	4.96	3.95	3.15
52	5.60	5.17	4.11	3.28
53	5.85	5.41	4.31	3.43
54	6.12	5.65	4.53	3.64
55	6.39	5.93	4.75	3.81
56	6.69	6.20	4.99	4.02
57	6.99	6.49	5.23	4.20
58	7.30	6.78	5.46	4.40
59	7.63	7.06	5.67	4.55
60	7.96	7.38	5.90	4.71
61	8.33	7.72	6.14	4.88
62	8.73	8.10	6.41	5.08
63	9.17	8.46	6.74	5.39
64	9.64	8.87	7.11	5.68
65	10.15	9.31	7.46	5.98
66	10.68	9.76	7.88	6.36
67	11.29	10.27	8.29	6.69
68	11.94	10.87	8.76	7.05
69	12.67	11.53	9.28	7.50
70	13.44	12.20	9.81	7.90
71	14.17	12.86	10.32	8.27
72	14.85	13.46	10.80	8.65
73	15.43	13.98	11.20	8.97
74	15.93	14.47	11.55	9.22
75	16.42	14.92	11.89	9.48
76	16.94	15.39	12.22	9.71
77	17.53	15.95	12.65	10.04
78	18.17	16.54	13.11	10.41
79	18.87	17.16	13.62	10.80
80	19.60	17.84	14.17	11.23
81	20.37	18.56	14.72	11.68
82	21.19	19.29	15.31	12.16
83	22.04	20.09	15.95	12.65
84	22.95	20.90	16.62	13.22

TO OBTAIN QUARTERLY, SEMIANNUAL, AND ANNUAL PREMIUMS, MULTIPLY THE ABOVE QUOTED PREMIUMS BY 3, 6, AND 12, RESPECTIVELY. THE MONTHLY PREMIUMS FOR BANK SERVICE PLAN AND PAYROLL DEDUCTION ISSUES ARE THE PREMIUMS LISTED ABOVE.

R25388-44-3

Date: 04/26/2017

MUTUAL OF OMAHA INSURANCE COMPANY
SCHEDULE DF MONTHLY RATES FOR RIDER FORM 0DX6M

PER \$10 DAILY CONFINED CARE BENEFIT

Issue Age	BENEFITS -- LIFETIME			
	ELIMINATION PERIODS			
	0 Day	20 Day	100 Day	365 Day
18-39	7.32	6.94	5.41	4.21
40	7.49	7.11	5.54	4.32
41	7.71	7.32	5.75	4.52
42	7.97	7.57	5.95	4.71
43	8.27	7.89	6.24	4.93
44	8.66	8.29	6.55	5.20
45	9.06	8.72	6.88	5.43
46	9.49	9.11	7.23	5.75
47	9.92	9.49	7.55	5.99
48	10.32	9.88	7.85	6.24
49	10.79	10.21	8.11	6.45
50	11.22	10.54	8.42	6.71
51	11.64	10.86	8.67	6.94
52	12.03	11.14	8.94	7.18
53	12.30	11.34	9.13	7.36
54	12.51	11.52	9.31	7.51
55	12.65	11.64	9.46	7.70
56	12.92	11.84	9.66	7.87
57	13.25	12.12	9.89	8.06
58	13.66	12.45	10.15	8.27
59	14.14	12.86	10.45	8.48
60	14.72	13.34	10.75	8.66
61	15.34	13.90	11.10	8.88
62	16.02	14.46	11.56	9.26
63	16.77	15.20	12.12	9.67
64	17.60	15.94	12.73	10.21
65	18.51	16.78	13.43	10.74
66	19.49	17.69	14.14	11.31
67	20.53	18.64	14.89	11.88
68	21.62	19.67	15.67	12.43
69	22.85	20.81	16.48	13.09
70	24.09	21.97	17.38	13.74
71	25.30	23.08	18.17	14.30
72	26.38	24.09	18.93	14.87
73	27.25	24.90	19.58	15.37
74	28.03	25.61	20.14	15.81
75	28.72	26.30	20.64	16.17
76	29.47	26.99	21.23	16.69
77	30.36	27.86	21.92	17.24
78	31.38	28.91	22.71	17.85
79	32.51	30.00	23.58	18.51
80	33.71	31.21	24.52	19.27
81	34.94	32.50	25.51	20.06
82	36.26	33.85	26.59	20.88
83	37.67	35.33	27.72	21.76
84	39.16	36.87	28.94	22.71

TO OBTAIN QUARTERLY, SEMIANNUAL, AND ANNUAL PREMIUMS, MULTIPLY THE ABOVE QUOTED PREMIUMS BY 3, 6, AND 12, RESPECTIVELY. THE MONTHLY PREMIUMS FOR BANK SERVICE PLAN AND PAYROLL DEDUCTION ISSUES ARE THE PREMIUMS LISTED ABOVE.

R25388-44-3

Date: 04/26/2017

MUTUAL OF OMAHA INSURANCE COMPANY
SCHEDULE OF MONTHLY RATES FOR RIDER FORM 0DX6M

PER \$10 DAILY CONFINED CARE BENEFIT

BENEFIT -- 1 YEAR

IssueAge	ELIMINATION PERIODS			
	0 Day	20 Day	100 Day	365 Day
18-39	1.04	1.00	0.92	0.86
40	1.08	1.02	0.95	0.89
41	1.12	1.04	0.97	0.90
42	1.14	1.09	1.00	0.90
43	1.18	1.12	1.01	0.92
44	1.22	1.14	1.03	0.94
45	1.26	1.18	1.07	0.97
46	1.31	1.22	1.08	0.96
47	1.37	1.28	1.12	0.98
48	1.44	1.36	1.18	1.01
49	1.52	1.43	1.22	1.04
50	1.60	1.51	1.28	1.09
51	1.69	1.60	1.36	1.14
52	1.78	1.68	1.42	1.18
53	1.85	1.74	1.48	1.25
54	1.94	1.81	1.54	1.30
55	2.02	1.90	1.60	1.33
56	2.10	1.96	1.66	1.39
57	2.21	2.04	1.72	1.45
58	2.30	2.14	1.79	1.50
59	2.42	2.22	1.88	1.60
60	2.53	2.32	1.96	1.64
61	2.64	2.44	2.03	1.70
62	2.78	2.54	2.12	1.78
63	2.90	2.66	2.20	1.82
64	3.04	2.76	2.26	1.85
65	3.16	2.92	2.35	1.90
66	3.31	3.05	2.44	1.93
67	3.50	3.20	2.56	2.03
68	3.72	3.40	2.70	2.15
69	3.97	3.61	2.88	2.30
70	4.25	3.84	3.10	2.50
71	4.51	4.07	3.29	2.66
72	4.75	4.27	3.46	2.78
73	4.92	4.44	3.60	2.92
74	5.08	4.60	3.70	2.99
75	5.21	4.73	3.82	3.08
76	5.38	4.87	3.94	3.17
77	5.53	5.03	4.07	3.29
78	5.74	5.20	4.22	3.43
79	5.92	5.40	4.37	3.53
80	6.13	5.60	4.54	3.68
81	6.34	5.80	4.72	3.85
82	6.58	6.02	4.90	4.00
83	6.82	6.24	5.08	4.14
84	7.07	6.48	5.28	4.30

TO OBTAIN QUARTERLY, SEMIANNUAL, AND ANNUAL PREMIUMS, MULTIPLY THE ABOVE QUOTED PREMIUMS BY 3, 6, AND 12, RESPECTIVELY. THE MONTHLY PREMIUMS FOR BANK SERVICE PLAN AND PAYROLL DEDUCTION ISSUES ARE THE PREMIUMS LISTED ABOVE .

R25388-44-4

Date: 04/26/2017

MUTUAL OF OMAHA INSURANCE COMPANY
SCHEDULE OF MONTHLY RATES FOR RIDER FORM 0DX6M

PER \$10 DAILY CONFINED CARE BENEFIT

BENEFIT -- 2 YEARS

Issue Age	ELIMINATION PERIODS			
	0 Day	20 day	100 Day	365 Day
18-39	1.69	1.61	1.40	1.22
40	1.74	1.66	1.45	1.26
41	1.80	1.72	1.49	1.30
42	1.87	1.78	1.54	1.34
43	1.94	1.84	1.58	1.36
44	2.02	1.90	1.62	1.38
45	2.09	1.98	1.67	1.42
46	2.20	2.05	1.72	1.43
47	2.28	2.15	1.78	1.46
48	2.38	2.23	1.86	1.55
49	2.48	2.33	1.94	1.62
50	2.59	2.45	2.03	1.69
51	2.72	2.56	2.14	1.78
52	2.86	2.68	2.23	1.86
53	2.99	2.82	2.35	1.96
54	3.16	2.95	2.48	2.09
55	3.34	3.10	2.62	2.20
56	3.49	3.26	2.74	2.30
57	3.70	3.41	2.89	2.45
58	3.88	3.59	3.04	2.56
59	4.10	3.76	3.17	2.68
60	4.30	3.95	3.34	2.82
61	4.54	4.15	3.47	2.90
62	4.78	4.37	3.64	3.04
63	5.02	4.58	3.78	3.12
64	5.26	4.80	3.94	3.22
65	5.51	5.05	4.07	3.28
66	5.80	5.32	4.24	3.38
67	6.14	5.62	4.48	3.56
68	6.58	6.00	4.78	3.80
69	7.07	6.42	5.14	4.10
70	7.60	6.88	5.51	4.42
71	8.10	7.30	5.88	4.73
72	8.52	7.67	6.19	4.99
73	8.82	7.96	6.42	5.18
74	9.05	8.17	6.61	5.35
75	9.25	8.38	6.78	5.48
76	9.47	8.62	6.96	5.62
77	9.77	8.89	7.20	5.83
78	10.14	9.24	7.48	6.06
79	10.56	9.64	7.81	6.34
80	11.02	10.06	8.16	6.64
81	11.50	10.52	8.53	6.92
82	12.05	11.02	8.94	7.25
83	12.64	11.53	9.40	7.66
84	13.25	12.10	9.85	8.02

TO OBTAIN QUARTERLY, SEMIANNUAL, AND ANNUAL PREMIUMS, MULTIPLY THE ABOVE QUOTED PREMIUMS BY 3, 6, AND 12 , RESPECTIVELY. THE MONTHLY PREMIUMS FOR BANK SERVICE PLAN AND PAYROLL DEDUCTION ISSUES ARE THE PREMIUMS LISTED ABOVE.

R25388-44-4

Date: 04/26/2017

MUTUAL OF OMAHA INSURANCE COMPANY
SCHEDULE OF MONTHLY RATES FOR RIDER FORM 0DX6M

PER \$10 DAILY CONFINED CARE BENEFIT

BENEFIT -- 3 YEARS

Issue Age	ELIMINATION PERIODS			
	0 Day	20 Day	100 Day	365 Day
18-39	2.44	2.21	1.84	1.54
40	2.51	2.29	1.90	1.57
41	2.58	2.38	1.97	1.64
42	2.68	2.45	2.03	1.68
43	2.75	2.53	2.09	1.73
44	2.84	2.62	2.14	1.73
45	2.94	2.68	2.20	1.80
46	3.04	2.77	2.27	1.86
47	3.14	2.88	2.34	1.90
48	3.28	2.99	2.42	1.96
49	3.40	3.11	2.51	2.02
50	3.55	3.25	2.62	2.11
51	3.70	3.38	2.74	2.21
52	3.88	3.54	2.86	2.29
53	4.02	3.70	2.98	2.39
54	4.20	3.83	3.10	2.51
55	4.39	4.00	3.24	2.62
56	4.60	4.18	3.40	2.77
57	4.80	4.37	3.55	2.89
58	5.03	4.60	3.72	3.01
59	5.27	4.82	3.90	3.16
60	5.54	5.08	4.08	3.28
61	5.80	5.34	4.27	3.42
62	6.11	5.62	4.49	3.60
63	6.41	5.88	4.72	3.79
64	6.76	6.16	4.96	4.01
65	7.10	6.43	5.21	4.22
66	7.48	6.76	5.50	4.46
67	7.90	7.14	5.77	4.67
68	8.41	7.61	6.10	4.90
69	8.98	8.15	6.44	5.09
70	9.58	8.74	6.82	5.32
71	10.18	9.30	7.18	5.54
72	10.70	9.79	7.54	5.80
73	11.16	10.21	7.86	6.05
74	11.56	10.60	8.17	6.30
75	11.96	10.96	8.48	6.58
76	12.37	11.32	8.80	6.84
77	12.85	11.74	9.16	7.15
78	13.39	12.19	9.54	7.46
79	13.96	12.67	9.94	7.80
80	14.57	13.18	10.37	8.16
81	15.22	13.72	10.84	8.56
82	15.89	14.28	11.28	8.92
83	16.61	14.87	11.77	9.31
84	17.35	15.47	12.26	9.71

TO OBTAIN QUARTERLY, SEMIANNUAL, AND ANNUAL PREMIUMS, MULTIPLY THE ABOVE QUOTED PREMIUMS BY 3, 6, AND 12, RESPECTIVELY. THE MONTHLY PREMIUMS FOR BANK SERVICE PLAN AND PAYROLL DEDUCTION ISSUES ARE THE PREMIUMS LISTED ABOVE.

R25388-44-4

Date: 04/26/2017

MUTUAL OF OMAHA INSURANCE COMPANY
SCHEDULE OF MONTHLY RATES FOR RIDER FORM 0DX6M

PER \$10 DAILY CONFINED CARE BENEFIT

BENEFIT -- 5 YEARS

Issue Age	ELIMINATION PERIODS			
	0 Day	20 Day	100 Day	365 Day
18-39	3.48	3.23	2.62	2.10
40	3.58	3.34	2.65	2.10
41	3.69	3.43	2.73	2.17
42	3.82	3.54	2.82	2.22
43	3.95	3.67	2.90	2.30
44	4.09	3.81	3.01	2.39
45	4.27	3.94	3.12	2.49
46	4.40	4.10	3.23	2.55
47	4.60	4.25	3.38	2.68
48	4.77	4.41	3.50	2.77
49	4.96	4.60	3.64	2.89
50	5.15	4.76	3.78	3.01
51	5.36	4.96	3.95	3.15
52	5.60	5.17	4.11	3.28
53	5.85	5.41	4.31	3.43
54	6.12	5.65	4.53	3.64
55	6.39	5.93	4.75	3.81
56	6.69	6.20	4.99	4.02
57	6.99	6.49	5.23	4.20
58	7.30	6.78	5.46	4.40
59	7.63	7.06	5.67	4.55
60	7.96	7.38	5.90	4.71
61	8.33	7.72	6.14	4.88
62	8.73	8.10	6.41	5.08
63	9.17	8.46	6.74	5.39
64	9.64	8.87	7.11	5.68
65	10.15	9.31	7.46	5.98
66	10.68	9.76	7.88	6.36
67	11.29	10.27	8.29	6.69
68	11.94	10.87	8.76	7.05
69	12.67	11.53	9.28	7.50
70	13.44	12.20	9.81	7.90
71	14.17	12.86	10.32	8.27
72	14.85	13.46	10.80	8.65
73	15.43	13.98	11.20	8.97
74	15.93	14.47	11.55	9.22
75	16.42	14.92	11.89	9.48
76	16.94	15.39	12.22	9.71
77	17.53	15.95	12.65	10.04
78	18.17	16.54	13.11	10.41
79	18.87	17.16	13.62	10.80
80	19.60	17.84	14.17	11.23
81	20.37	18.56	14.72	11.68
82	21.19	19.29	15.31	12.16
83	22.04	20.09	15.95	12.65
84	22.95	20.90	16.62	13.22

TO OBTAIN QUARTERLY, SEMIANNUAL, AND ANNUAL PREMIUMS, MULTIPLY THE ABOVE QUOTED PREMIUMS BY 3, 6, AND 12, RESPECTIVELY. THE MONTHLY PREMIUMS FOR BANK SERVICE PLAN AND PAYROLL DEDUCTION ISSUES ARE THE PREMIUMS LISTED ABOVE.

R25388-44-4

Date: 04/26/2017

MUTUAL OF OMAHA INSURANCE COMPANY
SCHEDULE DF MONTHLY RATES FOR RIDER FORM 0DX6M

PER \$10 DAILY CONFINED CARE BENEFIT

Issue Age	BENEFITS -- LIFETIME			
	ELIMINATION PERIODS			
	0 Day	20 Day	100 Day	365 Day
18-39	8.42	7.98	6.22	4.84
40	8.61	8.18	6.37	4.97
41	8.87	8.42	6.61	5.20
42	9.17	8.71	6.84	5.42
43	9.51	9.07	7.18	5.67
44	9.96	9.53	7.53	5.98
45	10.42	10.03	7.91	6.24
46	10.91	10.48	8.31	6.61
47	11.41	10.91	8.68	6.89
48	11.87	11.36	9.03	7.18
49	12.41	11.74	9.33	7.42
50	12.90	12.12	9.68	7.72
51	13.39	12.49	9.97	7.98
52	13.83	12.81	10.28	8.26
53	14.15	13.04	10.50	8.46
54	14.39	13.25	10.71	8.64
55	14.55	13.39	10.88	8.86
56	14.86	13.62	11.11	9.05
57	15.24	13.94	11.37	9.27
58	15.71	14.32	11.67	9.51
59	16.26	14.79	12.02	9.75
60	16.93	15.34	12.36	9.96
61	17.64	15.99	12.77	10.21
62	18.42	16.63	13.29	10.65
63	19.29	17.48	13.94	11.12
64	20.24	18.33	14.64	11.74
65	21.29	19.30	15.44	12.35
66	22.41	20.34	16.26	13.01
67	23.61	21.44	17.12	13.66
68	24.86	22.62	18.02	14.29
69	26.28	23.93	18.95	15.05
70	27.70	25.27	19.99	15.80
71	29.10	26.54	20.90	16.45
72	30.34	27.70	21.77	17.10
73	31.34	28.64	22.52	17.68
74	32.23	29.45	23.16	18.18
75	33.03	30.25	23.74	18.60
76	33.89	31.04	24.41	19.19
77	34.91	32.04	25.21	19.83
78	36.09	33.25	26.12	20.53
79	37.39	34.50	27.12	21.29
80	38.77	35.89	28.20	22.16
81	40.18	37.38	29.34	23.07
82	41.70	38.93	30.58	24.01
83	43.32	40.63	31.88	25.02
84	45.03	42.40	33.28	26.12

TO OBTAIN QUARTERLY, SEMIANNUAL, AND ANNUAL PREMIUMS, MULTIPLY THE ABOVE QUOTED PREMIUMS BY 3, 6, AND 12, RESPECTIVELY. THE MONTHLY PREMIUMS FOR BANK SERVICE PLAN AND PAYROLL DEDUCTION ISSUES ARE THE PREMIUMS LISTED ABOVE.

R25388-44-4

MUTUAL OF OMAHA INSURANCE COMPANY

INDIVIDUAL HOME HEALTH CARE POLICY FORMS HCA-19629 & HCA-20249
ANNUAL PREMIUM RATES - Effective 2018

Per \$10 Daily Benefit

Per \$1 Gross Premium

Home Health Care Policy Forms HCA-19629 and HCA-20249			Confined Care Rider Forms 0GH1M-44 & 0GH1M-44 Rev				5% Compound Inflation Rider	Shortened Benefit Period Rider
Age	20 Day Elim	0 Day Elim	20 Day Elim	90 Day Elim	180 Day Elim	365 Day Elim	Form 0GH3M	Form 0GH5M-44
18-50	29.52	14.64	13.92	10.92	9.72	7.68	1.37	0.19
51	31.56	15.60	14.76	11.64	10.32	8.28	1.32	0.18
52	33.72	16.56	15.72	12.48	11.04	8.88	1.27	0.17
53	36.24	17.76	16.92	13.44	11.76	9.36	1.23	0.16
54	39.00	19.08	18.12	14.52	12.72	10.20	1.17	0.16
55	42.00	20.64	19.56	15.72	13.80	11.04	1.12	0.16
56	45.00	22.44	21.24	17.04	15.00	12.00	1.08	0.16
57	48.36	24.36	23.16	18.60	16.44	13.08	1.03	0.15
58	51.36	26.64	25.44	20.28	17.88	14.28	0.99	0.15
59	54.72	29.16	27.84	22.08	19.56	15.60	0.96	0.15
60	58.44	32.04	30.60	24.24	21.48	17.16	0.92	0.14
61	62.88	35.40	33.72	26.76	23.64	18.96	0.90	0.14
62	67.56	39.00	37.08	29.40	25.92	20.88	0.86	0.14
63	73.80	43.20	40.92	32.76	28.92	23.28	0.82	0.14
64	80.64	48.12	45.24	36.36	32.16	25.92	0.78	0.13
65	88.32	53.52	50.16	40.44	35.76	28.80	0.74	0.13
66	96.96	59.64	55.80	45.00	39.84	32.04	0.69	0.12
67	106.56	66.60	62.16	50.04	44.40	35.76	0.65	0.12
68	116.28	74.40	69.60	55.20	48.84	39.36	0.62	0.12
69	127.20	83.04	77.88	61.08	54.00	43.56	0.59	0.11
70	139.44	92.64	87.24	67.68	59.88	48.24	0.55	0.11
71	152.88	103.32	97.56	75.12	66.36	53.52	0.52	0.10
72	167.64	114.96	108.96	83.28	73.80	59.52	0.49	0.10
73	184.44	127.44	120.84	92.52	81.96	66.12	0.46	0.10
74	202.56	140.88	133.68	102.72	91.08	73.44	0.43	0.10
75	222.48	155.16	147.12	113.52	100.56	81.24	0.40	0.09
76	243.60	170.40	161.40	125.04	110.76	89.40	0.37	0.09
77	266.16	186.48	176.28	137.16	121.56	98.16	0.34	0.09
78	290.16	203.52	191.76	149.76	132.72	107.16	0.32	0.09
79	315.48	221.28	207.96	162.96	144.36	116.52	0.30	0.08
80	342.24	240.00	224.64	176.52	156.48	126.36	0.28	0.08
81	370.32	259.44	241.92	190.44	168.72	136.20	0.26	0.07
82	399.84	279.84	259.68	204.72	181.44	146.40	0.25	0.07
83	430.56	300.96	277.92	219.24	194.28	156.72	0.23	0.06
84	462.72	322.80	296.52	234.00	207.36	167.28	0.22	0.06
85	483.96	339.60	312.00	245.88	217.92	175.92	0.20	0.05
86	504.84	357.24	328.20	258.36	229.32	185.16	0.20	0.05
87	525.12	376.56	345.72	271.92	241.92	195.36	0.18	0.04
88	544.80	397.32	364.80	286.56	255.48	206.52	0.17	0.04
89	564.00	419.28	384.96	302.04	270.00	218.28	0.16	0.04
90	594.84	442.20	405.96	318.24	284.40	229.92	0.15	0.03
91	627.36	466.32	427.92	335.16	299.52	242.16	0.14	0.03
92	661.20	491.52	450.96	352.80	315.24	254.88	0.13	0.03
93	696.48	517.80	474.96	371.28	331.56	267.96	0.13	0.02
94	733.20	545.04	499.92	390.36	348.60	281.88	0.12	0.02
95	771.24	573.36	525.96	410.28	366.48	296.28	0.11	0.02
96	811.08	602.88	552.84	430.92	384.84	311.04	0.11	0.02
97	852.12	633.36	580.80	452.40	403.92	326.40	0.10	0.02
98	894.60	665.04	609.72	474.48	423.60	342.24	0.09	0.02
99+	938.64	697.68	639.60	497.40	443.88	358.80	0.09	0.01

Rates for ages 84+ are available only for the Guarantee Purchase Benefit Option.

\$20 Policy Fee payable first year only.

If Tax Qualified Amendment Rider Form 0GH6M-44 Rev elected, premium will be reduced 15%.

If the policy is issued to an individual and spouse that: (a) reside together and (b) are both covered under Forms HCA-19629, HCA-20249, NHA-19630 or NHA-20250, then Spouse Premium

Reduction Rider 0GH9M will be attached and the premium will be reduced 10%.

To calculate premiums for a specific benefit period, apply the appropriate factors to the above premiums.

Benefit Period	Factor	2013 Increase Factor	2014 Increase Factor	2018 Increase Factor
1 year	0.55	1.200	1.000	1.000
2 year	0.80	1.200	1.000	1.000
3 year	1.00	1.200	1.000	1.000
5 year	1.25	1.200	1.100	1.000
Lifetime	1.45	1.300	1.200	1.300

To calculate premiums for a specific mode, apply the appropriate factor to the above premiums.

Modal Loads	Factor
Annual	1.000
Semi-Annual	0.520
Quarterly	0.260
Monthly/BSP	0.087

MUTUAL OF OMAHA INSURANCE COMPANY

INDIVIDUAL CONFINED CARE POLICY FORMS NHA-19630 & NHA-20250
ANNUAL PREMIUM RATES - Effective 2018

Per \$10 Daily Benefit

Per \$1 Gross Premium

Home Health Care Rider Forms OGH7M-44 & OGH7M-44 Rev		Confined Care Policy Forms NHA-19630 & NHA-20250						5% Compound Inflation Rider Form OGH3M	Shortened Benefit Period Rider Form OGH5M-44
Age	20 Day Elim	0 Day Elim	20 Day Elim	90 Day Elim	180 Day Elim	365 Day Elim			
18-50	17.16	26.04	24.84	20.28	18.36	15.24		1.37	0.19
51	18.24	27.72	26.52	21.72	19.44	16.32		1.32	0.18
52	19.68	29.52	28.20	23.16	20.88	17.52		1.27	0.17
53	21.12	31.80	30.24	24.84	22.32	18.60		1.23	0.16
54	22.68	34.08	32.64	26.88	24.24	20.16		1.17	0.16
55	24.36	36.84	35.16	29.04	26.16	21.84		1.12	0.16
56	26.16	39.84	37.92	31.56	28.44	23.64		1.08	0.16
57	27.96	43.32	41.28	34.32	30.96	25.68		1.03	0.15
58	29.64	47.16	45.24	37.08	33.48	27.84		0.99	0.15
59	31.44	51.60	49.44	40.44	36.48	30.36		0.96	0.15
60	33.60	56.40	54.12	44.16	39.84	33.12		0.92	0.14
61	36.00	62.04	59.28	48.60	43.68	36.48		0.90	0.14
62	38.52	68.16	65.16	53.28	47.88	39.96		0.86	0.14
63	42.00	75.48	71.76	59.16	53.28	44.40		0.82	0.14
64	45.84	83.64	79.32	65.52	58.92	49.20		0.78	0.13
65	50.16	93.12	87.84	72.72	65.52	54.60		0.74	0.13
66	54.96	103.68	97.56	80.76	72.72	60.60		0.69	0.12
67	60.12	115.44	108.48	89.76	80.76	67.32		0.65	0.12
68	65.52	128.52	121.08	98.76	88.92	74.04		0.62	0.12
69	71.52	143.28	135.24	109.08	98.16	81.84		0.59	0.11
70	78.24	159.60	151.20	120.84	108.72	90.60		0.55	0.11
71	85.68	177.72	168.72	133.68	120.24	100.32		0.52	0.10
72	93.72	197.40	188.04	148.20	133.44	111.24		0.49	0.10
73	102.96	218.76	208.44	164.52	147.96	123.36		0.46	0.10
74	113.04	241.56	230.28	182.28	164.16	136.80		0.43	0.10
75	123.96	266.16	253.56	201.24	181.08	151.08		0.40	0.09
76	135.72	292.20	278.04	221.64	199.44	166.20		0.37	0.09
77	148.20	319.68	303.72	242.88	218.52	182.28		0.34	0.09
78	161.52	348.72	330.60	265.32	238.68	198.96		0.32	0.09
79	175.68	379.32	358.56	288.48	259.56	216.36		0.30	0.08
80	190.56	411.48	387.60	312.60	281.40	234.48		0.28	0.08
81	206.28	444.84	417.48	337.32	303.60	252.96		0.26	0.07
82	222.72	479.64	448.44	362.88	326.64	272.16		0.25	0.07
83	240.00	515.88	480.12	388.92	350.16	291.60		0.23	0.06
84	257.88	553.56	512.76	415.44	373.92	311.64		0.22	0.06
85	269.76	582.48	539.40	436.44	392.76	327.48		0.20	0.05
86	281.40	612.72	567.48	458.64	412.80	344.04		0.20	0.05
87	292.68	645.60	597.96	482.88	434.64	362.16		0.18	0.04
88	303.72	681.36	630.84	508.92	457.92	381.72		0.17	0.04
89	314.40	719.04	665.64	536.28	482.64	402.24		0.16	0.04
90	331.56	758.40	701.88	564.96	508.56	423.72		0.15	0.03
91	349.68	799.80	740.04	595.08	535.56	446.40		0.14	0.03
92	368.52	842.88	779.88	626.52	563.76	469.92		0.13	0.03
93	388.20	887.88	821.40	659.04	593.16	494.28		0.13	0.02
94	408.72	934.80	864.48	693.12	623.76	519.96		0.12	0.02
95	429.96	983.28	909.60	728.64	655.68	546.48		0.11	0.02
96	452.04	1033.92	955.92	765.24	688.80	573.84		0.11	0.02
97	474.96	1086.24	1004.28	803.16	722.88	602.40		0.10	0.02
98	498.60	1140.36	1054.32	842.52	758.40	631.80		0.09	0.02
99+	523.08	1196.52	1106.16	883.20	794.76	662.40		0.09	0.01

For October 2003 and later, rates for ages 80+ are available only for the Guarantee Purchase Benefit Option. For previously sold Inforce policies, this applies to ages 85+.

\$20 Policy Fee payable first year only.

If Tax Qualified Amendment Rider Form OGH6M-44 Rev elected, premium will be reduced 15%.

If the policy is issued to an individual and spouse that: (a) reside together and (b) are both covered under Forms HCA-19629, HCA-20249, NHA-19630 or NHA-20250, then Spouse Premium Reduction Rider OGH9M will be attached and the premium will be reduced 10%.

To calculate premiums for a specific benefit period, apply the appropriate factors to the above premiums.

Benefit Period	Factor	2013 Increase Factor	2014 Increase Factor	2018 Increase Factor
1 year	0.55	1.200	1.000	1.000
2 year	0.80	1.200	1.000	1.000
3 year	1.00	1.200	1.000	1.000
5 year	1.25	1.200	1.100	1.000
Lifetime	1.45	1.300	1.200	1.300

To calculate premiums for a specific mode, apply the appropriate factor to the above premiums.

Modal Loads	Factor
Annual	1.000
Semi-Annual	0.520
Quarterly	0.260
Monthly/BSP	0.087

MUTUAL OF OMAHA INSURANCE COMPANY

COUPLES CONFINED CARE POLICY FORMS LTA-19631 & LTA-20251
ANNUAL PREMIUM RATES - Effective 2018

Per \$10 Daily Benefit

Per \$1 Gross Premium

Home Health Care Rider Forms OGH8M-44 & OGH8M-44 Rev		Confined Care Policy Forms LTA-19631 & LTA-20251						5% Compound Inflation Rider Form OGH4M	Shortened Benefit Period Rider Form OGH5M-44
Age	20 Day Elim	0 Day Elim	20 Day Elim	90 Day Elim	180 Day Elim	365 Day Elim			
18-50	18.00	27.72	26.40	21.48	19.32	16.08		1.14	0.19
51	19.20	29.40	28.08	23.04	20.64	17.28		1.11	0.18
52	20.52	31.20	29.88	24.48	21.96	18.48		1.08	0.17
53	21.96	33.48	31.92	26.40	23.64	19.80		1.04	0.16
54	23.64	36.00	34.32	28.44	25.56	21.36		0.99	0.16
55	25.20	38.76	36.96	30.60	27.60	23.04		0.95	0.16
56	27.12	41.88	39.96	33.12	29.76	24.84		0.91	0.16
57	28.92	45.36	43.32	36.00	32.40	27.00		0.87	0.15
58	30.60	49.20	47.16	38.76	34.92	29.04		0.83	0.15
59	32.52	53.64	51.36	42.12	37.92	31.56		0.81	0.15
60	34.56	58.68	56.28	46.08	41.52	34.56		0.77	0.14
61	36.96	64.20	61.44	50.28	45.24	37.68		0.74	0.14
62	39.36	70.44	67.32	55.08	49.56	41.28		0.71	0.14
63	42.72	77.76	73.92	60.84	54.72	45.72		0.68	0.14
64	46.44	86.04	81.48	67.32	60.60	50.52		0.64	0.13
65	50.52	95.28	89.88	74.64	67.20	55.92		0.62	0.13
66	55.08	105.84	99.60	82.44	74.28	61.80		0.58	0.12
67	60.12	117.48	110.40	91.20	82.20	68.40		0.55	0.12
68	65.04	130.20	122.64	99.96	90.00	74.88		0.51	0.12
69	70.68	144.60	136.56	110.04	99.12	82.44		0.48	0.11
70	76.80	160.44	151.92	121.44	109.32	91.08		0.45	0.11
71	83.64	177.72	168.84	133.92	120.48	100.44		0.43	0.10
72	91.20	196.68	187.32	147.48	132.72	110.76		0.40	0.10
73	99.84	216.84	206.76	163.08	146.88	122.28		0.38	0.10
74	109.08	238.44	227.28	179.76	161.76	134.88		0.36	0.10
75	118.92	261.24	249.00	197.52	177.72	148.20		0.34	0.09
76	129.36	285.48	271.68	216.36	194.76	162.24		0.32	0.09
77	140.52	310.80	295.20	236.04	212.52	177.12		0.30	0.09
78	151.92	337.20	319.56	256.32	230.64	192.36		0.28	0.09
79	164.04	364.68	344.76	277.32	249.60	207.96		0.27	0.08
80	176.40	393.48	370.56	299.04	269.16	224.28		0.25	0.08
81	189.24	423.24	397.20	321.00	288.96	240.72		0.23	0.07
82	202.32	453.72	424.20	343.44	309.12	257.52		0.21	0.07
83	215.64	485.40	451.80	365.88	329.28	274.56		0.19	0.06
84	229.32	517.80	479.52	388.56	349.80	291.48		0.18	0.06
85	239.88	542.52	502.20	406.56	365.88	304.92		0.15	0.05
86	250.20	567.96	525.96	425.16	382.68	318.84		0.14	0.05
87	260.28	595.68	551.76	445.32	400.80	333.96		0.13	0.04
88	270.00	625.68	579.60	467.16	420.48	350.40		0.11	0.04
89	279.60	657.00	608.64	490.20	441.12	367.80		0.11	0.04
90	294.84	689.64	639.36	513.96	462.48	385.44		0.09	0.03
91	310.92	723.72	671.16	538.80	484.80	404.04		0.08	0.03
92	327.72	759.24	704.28	564.60	508.20	423.48		0.08	0.03
93	345.24	796.20	738.84	591.48	532.44	443.64		0.07	0.02
94	363.36	834.24	774.60	619.44	557.40	464.52		0.06	0.02
95	382.32	874.08	811.92	648.36	583.44	486.24		0.06	0.02
96	402.00	914.88	850.44	678.00	610.20	508.56		0.05	0.02
97	422.28	957.48	890.28	708.84	637.92	531.60		0.04	0.02
98	443.40	1001.28	931.44	740.76	666.60	555.60		0.04	0.02
99+	465.24	1046.52	973.92	773.52	696.24	580.08		0.04	0.01

For October 2003 and later, rates for ages 80+ are available only for the Guarantee Purchase Benefit Option. For previously sold Inforce policies, this applies to ages 85+.

\$15 Policy Fee per insured (\$30 per couple) payable first year only.

If Tax Qualified Amendment Rider Form OGH6M-44 Rev elected, premium will be reduced 15%.

To calculate premiums for a specific benefit period, apply the appropriate factors to the above premiums.

Benefit Period	Factor	2013 Increase Factor	2014 Increase Factor	2018 Increase Factor
1 year	0.55	1.200	1.000	1.000
2 year	0.80	1.200	1.000	1.000
3 year	1.00	1.200	1.000	1.000
5 year	1.25	1.200	1.100	1.000
Lifetime	1.45	1.300	1.200	1.300

To calculate premiums for a specific mode, apply the appropriate factor to the above premiums.

Modal Loads	Factor
Annual	1.000
Semi-Annual	0.520
Quarterly	0.260
Monthly/BSP	0.087

MUTUAL OF OMAHA INSURANCE COMPANY

INDIVIDUAL HOME HEALTH CARE POLICY FORMS HCA-19629 & HCA-20249
ANNUAL PREMIUM RATES - Effective 2019

Per \$10 Daily Benefit

Per \$1 Gross Premium

Age	Home Health Care Policy Forms HCA-19629 and HCA-20249		Confined Care Rider Forms 0GH1M-44 & 0GH1M-44 Rev					5% Compound Inflation Rider Form 0GH3M	Shortened Benefit Period Rider Form 0GH5M-44
	20 Day Elim	0 Day Elim	20 Day Elim	90 Day Elim	180 Day Elim	365 Day Elim			
18-50	29.52	14.64	13.92	10.92	9.72	7.68		1.37	0.19
51	31.56	15.60	14.76	11.64	10.32	8.28		1.32	0.18
52	33.72	16.56	15.72	12.48	11.04	8.88		1.27	0.17
53	36.24	17.76	16.92	13.44	11.76	9.36		1.23	0.16
54	39.00	19.08	18.12	14.52	12.72	10.20		1.17	0.16
55	42.00	20.64	19.56	15.72	13.80	11.04		1.12	0.16
56	45.00	22.44	21.24	17.04	15.00	12.00		1.08	0.16
57	48.36	24.36	23.16	18.60	16.44	13.08		1.03	0.15
58	51.36	26.64	25.44	20.28	17.88	14.28		0.99	0.15
59	54.72	29.16	27.84	22.08	19.56	15.60		0.96	0.15
60	58.44	32.04	30.60	24.24	21.48	17.16		0.92	0.14
61	62.88	35.40	33.72	26.76	23.64	18.96		0.90	0.14
62	67.56	39.00	37.08	29.40	25.92	20.88		0.86	0.14
63	73.80	43.20	40.92	32.76	28.92	23.28		0.82	0.14
64	80.64	48.12	45.24	36.36	32.16	25.92		0.78	0.13
65	88.32	53.52	50.16	40.44	35.76	28.80		0.74	0.13
66	96.96	59.64	55.80	45.00	39.84	32.04		0.69	0.12
67	106.56	66.60	62.16	50.04	44.40	35.76		0.65	0.12
68	116.28	74.40	69.60	55.20	48.84	39.36		0.62	0.12
69	127.20	83.04	77.88	61.08	54.00	43.56		0.59	0.11
70	139.44	92.64	87.24	67.68	59.88	48.24		0.55	0.11
71	152.88	103.32	97.56	75.12	66.36	53.52		0.52	0.10
72	167.64	114.96	108.96	83.28	73.80	59.52		0.49	0.10
73	184.44	127.44	120.84	92.52	81.96	66.12		0.46	0.10
74	202.56	140.88	133.68	102.72	91.08	73.44		0.43	0.10
75	222.48	155.16	147.12	113.52	100.56	81.24		0.40	0.09
76	243.60	170.40	161.40	125.04	110.76	89.40		0.37	0.09
77	266.16	186.48	176.28	137.16	121.56	98.16		0.34	0.09
78	290.16	203.52	191.76	149.76	132.72	107.16		0.32	0.09
79	315.48	221.28	207.96	162.96	144.36	116.52		0.30	0.08
80	342.24	240.00	224.64	176.52	156.48	126.36		0.28	0.08
81	370.32	259.44	241.92	190.44	168.72	136.20		0.26	0.07
82	399.84	279.84	259.68	204.72	181.44	146.40		0.25	0.07
83	430.56	300.96	277.92	219.24	194.28	156.72		0.23	0.06
84	462.72	322.80	296.52	234.00	207.36	167.28		0.22	0.06
85	483.96	339.60	312.00	245.88	217.92	175.92		0.20	0.05
86	504.84	357.24	328.20	258.36	229.32	185.16		0.20	0.05
87	525.12	376.56	345.72	271.92	241.92	195.36		0.18	0.04
88	544.80	397.32	364.80	286.56	255.48	206.52		0.17	0.04
89	564.00	419.28	384.96	302.04	270.00	218.28		0.16	0.04
90	594.84	442.20	405.96	318.24	284.40	229.92		0.15	0.03
91	627.36	466.32	427.92	335.16	299.52	242.16		0.14	0.03
92	661.20	491.52	450.96	352.80	315.24	254.88		0.13	0.03
93	696.48	517.80	474.96	371.28	331.56	267.96		0.13	0.02
94	733.20	545.04	499.92	390.36	348.60	281.88		0.12	0.02
95	771.24	573.36	525.96	410.28	366.48	296.28		0.11	0.02
96	811.08	602.88	552.84	430.92	384.84	311.04		0.11	0.02
97	852.12	633.36	580.80	452.40	403.92	326.40		0.10	0.02
98	894.60	665.04	609.72	474.48	423.60	342.24		0.09	0.02
99+	938.64	697.68	639.60	497.40	443.88	358.80		0.09	0.01

Rates for ages 84+ are available only for the Guarantee Purchase Benefit Option.

\$20 Policy Fee payable first year only.

If Tax Qualified Amendment Rider Form 0GH6M-44 Rev elected, premium will be reduced 15%.

If the policy is issued to an individual and spouse that: (a) reside together and (b) are both covered under Forms HCA-19629, HCA-20249, NHA-19630 or NHA-20250, then Spouse Premium

Reduction Rider 0GH9M will be attached and the premium will be reduced 10%.

To calculate premiums for a specific benefit period, apply the appropriate factors to the above premiums.

Benefit Period	Factor	2013 Increase Factor	2014 Increase Factor	2018 Increase Factor	2019 Increase Factor
1 year	0.55	1.200	1.000	1.000	1.000
2 year	0.80	1.200	1.000	1.000	1.000
3 year	1.00	1.200	1.000	1.000	1.000
5 year	1.25	1.200	1.100	1.000	1.000
Lifetime	1.45	1.300	1.200	1.300	1.150

To calculate premiums for a specific mode, apply the appropriate factor to the above premiums.

Modal Loads	Factor
Annual	1.000
Semi-Annual	0.520
Quarterly	0.260
Monthly/BSP	0.087

MUTUAL OF OMAHA INSURANCE COMPANY

INDIVIDUAL CONFINED CARE POLICY FORMS NHA-19630 & NHA-20250
ANNUAL PREMIUM RATES - Effective 2019

Per \$10 Daily Benefit

Per \$1 Gross Premium

Home Health Care Rider Forms OGH7M-44 & OGH7M-44 Rev				Confined Care Policy Forms NHA-19630 & NHA-20250				5% Compound Inflation Rider Form OGH3M	Shortened Benefit Period Rider Form OGH5M-44
Age	20 Day Elim	0 Day Elim	20 Day Elim	90 Day Elim	180 Day Elim	365 Day Elim			
18-50	17.16	26.04	24.84	20.28	18.36	15.24		1.37	0.19
51	18.24	27.72	26.52	21.72	19.44	16.32		1.32	0.18
52	19.68	29.52	28.20	23.16	20.88	17.52		1.27	0.17
53	21.12	31.80	30.24	24.84	22.32	18.60		1.23	0.16
54	22.68	34.08	32.64	26.88	24.24	20.16		1.17	0.16
55	24.36	36.84	35.16	29.04	26.16	21.84		1.12	0.16
56	26.16	39.84	37.92	31.56	28.44	23.64		1.08	0.16
57	27.96	43.32	41.28	34.32	30.96	25.68		1.03	0.15
58	29.64	47.16	45.24	37.08	33.48	27.84		0.99	0.15
59	31.44	51.60	49.44	40.44	36.48	30.36		0.96	0.15
60	33.60	56.40	54.12	44.16	39.84	33.12		0.92	0.14
61	36.00	62.04	59.28	48.60	43.68	36.48		0.90	0.14
62	38.52	68.16	65.16	53.28	47.88	39.96		0.86	0.14
63	42.00	75.48	71.76	59.16	53.28	44.40		0.82	0.14
64	45.84	83.64	79.32	65.52	58.92	49.20		0.78	0.13
65	50.16	93.12	87.84	72.72	65.52	54.60		0.74	0.13
66	54.96	103.68	97.56	80.76	72.72	60.60		0.69	0.12
67	60.12	115.44	108.48	89.76	80.76	67.32		0.65	0.12
68	65.52	128.52	121.08	98.76	88.92	74.04		0.62	0.12
69	71.52	143.28	135.24	109.08	98.16	81.84		0.59	0.11
70	78.24	159.60	151.20	120.84	108.72	90.60		0.55	0.11
71	85.68	177.72	168.72	133.68	120.24	100.32		0.52	0.10
72	93.72	197.40	188.04	148.20	133.44	111.24		0.49	0.10
73	102.96	218.76	208.44	164.52	147.96	123.36		0.46	0.10
74	113.04	241.56	230.28	182.28	164.16	136.80		0.43	0.10
75	123.96	266.16	253.56	201.24	181.08	151.08		0.40	0.09
76	135.72	292.20	278.04	221.64	199.44	166.20		0.37	0.09
77	148.20	319.68	303.72	242.88	218.52	182.28		0.34	0.09
78	161.52	348.72	330.60	265.32	238.68	198.96		0.32	0.09
79	175.68	379.32	358.56	288.48	259.56	216.36		0.30	0.08
80	190.56	411.48	387.60	312.60	281.40	234.48		0.28	0.08
81	206.28	444.84	417.48	337.32	303.60	252.96		0.26	0.07
82	222.72	479.64	448.44	362.88	326.64	272.16		0.25	0.07
83	240.00	515.88	480.12	388.92	350.16	291.60		0.23	0.06
84	257.88	553.56	512.76	415.44	373.92	311.64		0.22	0.06
85	269.76	582.48	539.40	436.44	392.76	327.48		0.20	0.05
86	281.40	612.72	567.48	458.64	412.80	344.04		0.20	0.05
87	292.68	645.60	597.96	482.88	434.64	362.16		0.18	0.04
88	303.72	681.36	630.84	508.92	457.92	381.72		0.17	0.04
89	314.40	719.04	665.64	536.28	482.64	402.24		0.16	0.04
90	331.56	758.40	701.88	564.96	508.56	423.72		0.15	0.03
91	349.68	799.80	740.04	595.08	535.56	446.40		0.14	0.03
92	368.52	842.88	779.88	626.52	563.76	469.92		0.13	0.03
93	388.20	887.88	821.40	659.04	593.16	494.28		0.13	0.02
94	408.72	934.80	864.48	693.12	623.76	519.96		0.12	0.02
95	429.96	983.28	909.60	728.64	655.68	546.48		0.11	0.02
96	452.04	1033.92	955.92	765.24	688.80	573.84		0.11	0.02
97	474.96	1086.24	1004.28	803.16	722.88	602.40		0.10	0.02
98	498.60	1140.36	1054.32	842.52	758.40	631.80		0.09	0.02
99+	523.08	1196.52	1106.16	883.20	794.76	662.40		0.09	0.01

For October 2003 and later, rates for ages 80+ are available only for the Guarantee Purchase Benefit Option. For previously sold Inforce policies, this applies to ages 85+.

\$20 Policy Fee payable first year only.

If Tax Qualified Amendment Rider Form OGH6M-44 Rev elected, premium will be reduced 15%.

If the policy is issued to an individual and spouse that: (a) reside together and (b) are both covered under Forms HCA-19629, HCA-20249, NHA-19630 or NHA-20250, then Spouse Premium Reduction Rider OGH9M will be attached and the premium will be reduced 10%.

To calculate premiums for a specific benefit period, apply the appropriate factors to the above premiums.

Benefit Period	Factor	2013 Increase Factor	2014 Increase Factor	2018 Increase Factor	2019 Increase Factor
1 year	0.55	1.200	1.000	1.000	1.000
2 year	0.80	1.200	1.000	1.000	1.000
3 year	1.00	1.200	1.000	1.000	1.000
5 year	1.25	1.200	1.100	1.000	1.000
Lifetime	1.45	1.300	1.200	1.300	1.150

To calculate premiums for a specific mode, apply the appropriate factor to the above premiums.

Modal Loads	Factor
Annual	1.000
Semi-Annual	0.520
Quarterly	0.260
Monthly/BSP	0.087

MUTUAL OF OMAHA INSURANCE COMPANY

COUPLES CONFINED CARE POLICY FORMS LTA-19631 & LTA-20251
ANNUAL PREMIUM RATES - Effective 2019

Per \$10 Daily Benefit

Per \$1 Gross Premium

Home Health Care Rider Forms OGH8M-44 & OGH8M-44 Rev		Confined Care Policy Forms LTA-19631 & LTA-20251						5% Compound Inflation Rider Form OGH4M	Shortened Benefit Period Rider Form OGH5M-44
Age	20 Day Elim	0 Day Elim	20 Day Elim	90 Day Elim	180 Day Elim	365 Day Elim			
18-50	18.00	27.72	26.40	21.48	19.32	16.08		1.14	0.19
51	19.20	29.40	28.08	23.04	20.64	17.28		1.11	0.18
52	20.52	31.20	29.88	24.48	21.96	18.48		1.08	0.17
53	21.96	33.48	31.92	26.40	23.64	19.80		1.04	0.16
54	23.64	36.00	34.32	28.44	25.56	21.36		0.99	0.16
55	25.20	38.76	36.96	30.60	27.60	23.04		0.95	0.16
56	27.12	41.88	39.96	33.12	29.76	24.84		0.91	0.16
57	28.92	45.36	43.32	36.00	32.40	27.00		0.87	0.15
58	30.60	49.20	47.16	38.76	34.92	29.04		0.83	0.15
59	32.52	53.64	51.36	42.12	37.92	31.56		0.81	0.15
60	34.56	58.68	56.28	46.08	41.52	34.56		0.77	0.14
61	36.96	64.20	61.44	50.28	45.24	37.68		0.74	0.14
62	39.36	70.44	67.32	55.08	49.56	41.28		0.71	0.14
63	42.72	77.76	73.92	60.84	54.72	45.72		0.68	0.14
64	46.44	86.04	81.48	67.32	60.60	50.52		0.64	0.13
65	50.52	95.28	89.88	74.64	67.20	55.92		0.62	0.13
66	55.08	105.84	99.60	82.44	74.28	61.80		0.58	0.12
67	60.12	117.48	110.40	91.20	82.20	68.40		0.55	0.12
68	65.04	130.20	122.64	99.96	90.00	74.88		0.51	0.12
69	70.68	144.60	136.56	110.04	99.12	82.44		0.48	0.11
70	76.80	160.44	151.92	121.44	109.32	91.08		0.45	0.11
71	83.64	177.72	168.84	133.92	120.48	100.44		0.43	0.10
72	91.20	196.68	187.32	147.48	132.72	110.76		0.40	0.10
73	99.84	216.84	206.76	163.08	146.88	122.28		0.38	0.10
74	109.08	238.44	227.28	179.76	161.76	134.88		0.36	0.10
75	118.92	261.24	249.00	197.52	177.72	148.20		0.34	0.09
76	129.36	285.48	271.68	216.36	194.76	162.24		0.32	0.09
77	140.52	310.80	295.20	236.04	212.52	177.12		0.30	0.09
78	151.92	337.20	319.56	256.32	230.64	192.36		0.28	0.09
79	164.04	364.68	344.76	277.32	249.60	207.96		0.27	0.08
80	176.40	393.48	370.56	299.04	269.16	224.28		0.25	0.08
81	189.24	423.24	397.20	321.00	288.96	240.72		0.23	0.07
82	202.32	453.72	424.20	343.44	309.12	257.52		0.21	0.07
83	215.64	485.40	451.80	365.88	329.28	274.56		0.19	0.06
84	229.32	517.80	479.52	388.56	349.80	291.48		0.18	0.06
85	239.88	542.52	502.20	406.56	365.88	304.92		0.15	0.05
86	250.20	567.96	525.96	425.16	382.68	318.84		0.14	0.05
87	260.28	595.68	551.76	445.32	400.80	333.96		0.13	0.04
88	270.00	625.68	579.60	467.16	420.48	350.40		0.11	0.04
89	279.60	657.00	608.64	490.20	441.12	367.80		0.11	0.04
90	294.84	689.64	639.36	513.96	462.48	385.44		0.09	0.03
91	310.92	723.72	671.16	538.80	484.80	404.04		0.08	0.03
92	327.72	759.24	704.28	564.60	508.20	423.48		0.08	0.03
93	345.24	796.20	738.84	591.48	532.44	443.64		0.07	0.02
94	363.36	834.24	774.60	619.44	557.40	464.52		0.06	0.02
95	382.32	874.08	811.92	648.36	583.44	486.24		0.06	0.02
96	402.00	914.88	850.44	678.00	610.20	508.56		0.05	0.02
97	422.28	957.48	890.28	708.84	637.92	531.60		0.04	0.02
98	443.40	1001.28	931.44	740.76	666.60	555.60		0.04	0.02
99+	465.24	1046.52	973.92	773.52	696.24	580.08		0.04	0.01

For October 2003 and later, rates for ages 80+ are available only for the Guarantee Purchase Benefit Option. For previously sold Inforce policies, this applies to ages 85+.

\$15 Policy Fee per insured (\$30 per couple) payable first year only.

If Tax Qualified Amendment Rider Form OGH6M-44 Rev elected, premium will be reduced 15%.

To calculate premiums for a specific benefit period, apply the appropriate factors to the above premiums.

Benefit Period	Factor	2013 Increase Factor	2014 Increase Factor	2018 Increase Factor	2019 Increase Factor
1 year	0.55	1.200	1.000	1.000	1.000
2 year	0.80	1.200	1.000	1.000	1.000
3 year	1.00	1.200	1.000	1.000	1.000
5 year	1.25	1.200	1.100	1.000	1.000
Lifetime	1.45	1.300	1.200	1.300	1.150

To calculate premiums for a specific mode, apply the appropriate factor to the above premiums.

Modal Loads	Factor
Annual	1.000
Semi-Annual	0.520
Quarterly	0.260
Monthly/BSP	0.087

State:	Virginia	Filing Company:	Mutual of Omaha Insurance Company
TOI/Sub-TOI:	LTC03I Individual Long Term Care/LTC03I.003 Other		
Product Name:	Mutual of Omaha - 2016/2017 LTCi Rate Increase		
Project Name/Number:	2016/2017 LTCi/		

Supporting Document Schedules

Satisfied - Item:	Certification of Compliance
Comments:	
Attachment(s):	VA Certification of Compliance - Mutual.pdf
Item Status:	Received & Acknowledged
Status Date:	06/29/2017

Satisfied - Item:	Product Checklist
Comments:	
Attachment(s):	Individual LTC Checklist.pdf
Item Status:	Received & Acknowledged
Status Date:	06/29/2017

Satisfied - Item:	L&H Actuarial Memorandum
Comments:	
Attachment(s):	Actuarial Memorandum (VA).pdf Actuarial Certification - Virginia.pdf Exhibit 1 - Average Annual Premium (2015).pdf Exhibit 2 - Rate Increase History.pdf Exhibit 3A-C - Nationwide Lifetime Experience.pdf Exhibit 9A-C - Virginia Lifetime Experience (Pre-Rate Stabilization).pdf Exhibit 10A-C - Virginia Lifetime Experience (Post- Rate Stabilization).pdf Exhibit 4A-C - Nationwide Lifetime Experience (Pre-Rate Stabilization).pdf Exhibit 5A-C - Nationwide Lifetime Experience (Post- Rate Stabilization).pdf Exhibit 6A-C - Updated Projections (Pre-Rate Stabilization).pdf Exhibit 7A-C - Updated Projections (Post-Rate Stabilization).pdf Exhibit 8 - Moderately Adverse Experience Trigger.pdf
Item Status:	Withdrawn
Status Date:	11/30/2017

Satisfied - Item:	Long Term Care Insurance Rate Request Summary
Comments:	The LTC Insurance Rate Request Summary (revised) reflects the revised document, which is mentioned in the 04/27/2017 Response - Objection 6.
Attachment(s):	VA Increase Summary.pdf LTC Insurance Rate Request Summary (revised).pdf
Item Status:	Received & Acknowledged
Status Date:	06/29/2017

Satisfied - Item:	Sample Policyholder Notification Letter
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State:	Virginia	Filing Company:	Mutual of Omaha Insurance Company
TOI/Sub-TOI:	LTC03I Individual Long Term Care/LTC03I.003 Other		
Product Name:	Mutual of Omaha - 2016/2017 LTCi Rate Increase		
Project Name/Number:	2016/2017 LTCi/		

Comments:	The sample notifications letters have been moved to the Form Schedule tab. Please refer to 08/04/2017 Response - Objection 3.
Attachment(s):	
Item Status:	Received & Acknowledged
Status Date:	11/30/2017

Satisfied - Item:	Current Rate Schedules
Comments:	
Attachment(s):	Rates - LTA Series 19631 and LTA Series 20251 (VA-2014).pdf Rates - NHA Series 19630 and NHA Series 20250 (VA-2014).pdf Rates - LT50 (VA-2014).pdf Rates - ODX5M (VA-2014).pdf Rates - NH50 (VA-2014).pdf Rates - ODX6M (VA-2014).pdf Rates - HCA Series 19629 and HCA Series 20249 (VA-2014).pdf
Item Status:	Received & Acknowledged
Status Date:	06/29/2017

Satisfied - Item:	04/27/2017 Response - Objection 2
Comments:	
Attachment(s):	Form and Rider List.pdf VA Approval - HCA-20249 et al (10-01-2001).pdf VA Approval - LT50-Series 19241.pdf VA Approval - NH50-Series 19242.pdf VA Approval - LT50-Series 19409 & NH50-Series 19410.pdf VA Approval - HCA-19629 et al (02-26-1999).pdf
Item Status:	Received & Acknowledged
Status Date:	06/29/2017

Satisfied - Item:	04/27/2017 Response - Objection 4
Comments:	The Certificate of Compliance mentioned in the response to Objection 4 - Item 1 is located in the Certification of Compliance Section. Also, previously approved forms LTC-BP-VA and LTC-EP-VA, approved in SERFF Tracking # MUTA-127148717, have been included for reference purposes.
Attachment(s):	Sample Notification Letter (VA).pdf VA CNF Letter.pdf Form LTC-BP-VA (rev).pdf Form LTC-EP-VA (rev).pdf
Item Status:	Received & Acknowledged
Status Date:	08/29/2017

State:	Virginia	Filing Company:	Mutual of Omaha Insurance Company
TOI/Sub-TOI:	LTC03I Individual Long Term Care/LTC03I.003 Other		
Product Name:	Mutual of Omaha - 2016/2017 LTCi Rate Increase		
Project Name/Number:	2016/2017 LTCi/		

Satisfied - Item:	04/27/2017 Response - Objection 7
Comments:	
Attachment(s):	Attachment 1 - Dual Loss Ratio Tests (pre - 2016).pdf Attachment 2 - Actuarial Certification (pre).pdf Attachment 3 - ALR (pre).pdf
Item Status:	Received & Acknowledged
Status Date:	06/29/2017

Satisfied - Item:	04/27/2017 Response - Objection 9
Comments:	
Attachment(s):	Attachments 4A-C - Nationwide Lifetime Experience (Pre-Rate Stabilization - 2016).pdf Attachments 5A-C - Nationwide Lifetime Experience (Post-Rate Stabilization - 2016).pdf Att 4A-C - Nat'l Lifetime Exp. (Pre-Rate Stab).xlsx Att 5A-C - Nat'l Lifetime Exp. (Post-Rate Stab).xlsx Attachment 10 - Benefit Description (2016).pdf Attachment 6 - Rate Increase History.pdf Attachment 7A-C - National Lifetime Experience (original assumptions in future).pdf Attachment 9A - Actual to Revised (Morbidity).pdf Attachment 9B - Actual to Revised (Mortality).pdf Attachment 9C - Actual to Revised (Lapse).pdf Attachment 8A-C - National Lifetime Experience (actual distribution & orig assumptions).pdf
Item Status:	Received & Acknowledged
Status Date:	06/29/2017

Satisfied - Item:	04/27/2017 Response - Objection 9 (Item 10)
Comments:	The Actuarial Memorandum has been revised to include the form numbers. In addition, the Actuarial Memorandum and Exhibits have been updated to include data through 12/31/2016.
Attachment(s):	Exhibits 4A-C - Nationwide Lifetime Experience (Pre-Rate Stabilization - 2016).pdf Exhibits 5A-C - Nationwide Lifetime Experience (Post-Rate Stabilization - 2016).pdf Actuarial Memorandum (VA - rev).pdf Actuarial Certification (VA).pdf Exhibit 1 - Average Annual Premium (2016).pdf Exhibit 2 - Rate Increase History (2016).pdf Exhibits 3A-C - Nationwide Lifetime Experience (2016).pdf Exhibits 6A-C - Updated Projections (Pre-Rate Stabilization - 2016).pdf Exhibits 7A-C - Updated Projections (Post-Rate Stabilization - 2016).pdf Exhibit 8 - Moderately Adverse Experience Trigger (2016).pdf Exhibits 9A-C - Virginia Lifetime Experience (Pre-Rate Stabilization - 2016).pdf Exhibits 10A-C - Virginia Lifetime Experience (Post- Rate Stabilization - 2016).pdf
Item Status:	Received & Acknowledged
Status Date:	06/29/2017

State:	Virginia	Filing Company:	Mutual of Omaha Insurance Company
TOI/Sub-TOI:	LTC03I Individual Long Term Care/LTC03I.003 Other		
Product Name:	Mutual of Omaha - 2016/2017 LTCi Rate Increase		
Project Name/Number:	2016/2017 LTCi/		

Satisfied - Item:	08/04/2017 Response - Objection 1
Comments:	
Attachment(s):	0PE4M Policy Adjustment Rider SOV (Annotated) Version 1.pdf 0PE4M Policy Adjustment Rider SOV (Non-Annotated) Version 1.pdf VA Readability Compliance Certification (Rider 0PE4M).pdf VA Certificate of Compliance (Rider 0PE4M).pdf M1769 (LTC - VA).pdf M1770 (LTC - VA).pdf M1771 (LTC - VA).pdf Statement of Variability - M1769 (LTC - VA), M1770 (LTC - VA) and M1771 (LTC - VA).pdf
Item Status:	Received & Acknowledged
Status Date:	08/29/2017
Satisfied - Item:	08/04/2017 Response - Objection 2
Comments:	
Attachment(s):	0HA3M-44.pdf
Item Status:	Received & Acknowledged
Status Date:	08/29/2017
Satisfied - Item:	08/04/2017 Response - Objection 3
Comments:	The premium notification letters, Forms 0555A-VA-1 and 0555A-VA-2, are located in the Form Schedule tab.
Attachment(s):	Statement of Variability (Forms 0555A-VA-1 and 0555A-VA-2).pdf
Item Status:	Received & Acknowledged
Status Date:	08/29/2017
Satisfied - Item:	08/04/2017 Response - Objection 4
Comments:	
Attachment(s):	Attachment 1 - Table 1.pdf
Item Status:	Received & Acknowledged
Status Date:	08/29/2017
Satisfied - Item:	08/04/2017 Response - Objection 5
Comments:	

State:	Virginia	Filing Company:	Mutual of Omaha Insurance Company
TOI/Sub-TOI:	LTC03I Individual Long Term Care/LTC03I.003 Other		
Product Name:	Mutual of Omaha - 2016/2017 LTCi Rate Increase		
Project Name/Number:	2016/2017 LTCi/		

Attachment(s):	Attachment 1 - Table 1-excel.xlsx Exhibits 3A-C - Nationwide Lifetime Experience (2016)-rev-excel.xlsx Exhibits 4A-C - Nationwide Lifetime Exp (Pre-Rate Stab. - 2016)-rev-excel.xlsx Exhibits 5A-C - Nationwide Lifetime Exp (Post-Rate Stab. - 2016)-rev-excel.xlsx Exhibits 6A-C - Updated Projections (Pre-Rate Stabilization - 2016)-rev-excel.xlsx Attachment 2 - Incurred Claim Comparison.pdf Attachment 3 - Actual to Revised (Lapse Rates).pdf Exhibits 3A-C - Nationwide Lifetime Experience (2016)-rev.pdf Exhibits 4A-C - Nationwide Lifetime Exp (Pre-Rate Stabilization - 2016)-rev.pdf Exhibits 5A-C - Nationwide Lifetime Exp (Post-Rate Stabilization - 2016)-rev.pdf Exhibits 6A-C - Updated Projections (Pre-Rate Stabilization - 2016)-rev.pdf Exhibits 7A-C - Updated Projections (Post-Rate Stabilization - 2016)-rev.pdf Exhibits 8A-C - Nationwide Lifetime Exp (Pre-Rate Stabilization - 2016).pdf Exhibits 7A-C - Updated Projections (Post-Rate Stabilization - 2016)-rev-excel.xlsx Exhibits 8A-C - Nationwide Lifetime Exp (Pre-Rate Stabilization - 2016)-excel.xlsx
Item Status:	Received & Acknowledged
Status Date:	08/29/2017
Satisfied - Item:	09/08/2017 Response - Objection 1
Comments:	
Attachment(s):	M1770 (LTC - VA).pdf M1771 (LTC - VA).pdf Statement of Variability - M1769 (LTC - VA), M1770 (LTC - VA) and M1771 (LTC - VA).pdf
Item Status:	Received & Acknowledged
Status Date:	11/30/2017
Satisfied - Item:	09/08/2017 Response - Objection 3
Comments:	
Attachment(s):	Attachment 1 - Table 1 (corrected).pdf Attachment 1 - Original Loss Ratios (Pre).pdf Attachment 2 - Previous Assumptions (Pre).pdf Attachment 3 - Current Assumptions (Pre).pdf Attachment 4 - Original Loss Ratios (Post).pdf Attachment 5 - Previous Assumptions (Post).pdf Attachment 6 - Current Assumptions (Post).pdf Attachment 7 - Dual Loss Ratio Test (Pre).pdf Attachment 8 - Dual Loss Ratio Test (Post).pdf
Item Status:	Received & Acknowledged
Status Date:	11/30/2017
Satisfied - Item:	09/08/2017 Response - Objection 3 (Excel spreadsheets)
Comments:	

State:	Virginia	Filing Company:	Mutual of Omaha Insurance Company
TOI/Sub-TOI:	LTC03I Individual Long Term Care/LTC03I.003 Other		
Product Name:	Mutual of Omaha - 2016/2017 LTCi Rate Increase		
Project Name/Number:	2016/2017 LTCi/		

Attachment(s):	Attachment 1 - Table 1 (corrected) - Excel.xlsx Attachment 1 - Original Loss Ratios (Pre) - Excel.xlsx Attachment 2 - Previous Assumptions (Pre) - Excel.xlsx Attachment 3 - Current Assumptions (Pre) - Excel.xlsx Attachment 4 - Original Loss Ratios (Post) - Excel.xlsx Attachment 5 - Previous Assumptions (Post) - Excel.xlsx Attachment 6 - Current Assumptions (Post) - Excel.xlsx Attachment 7 - Dual Loss Ratio Test (Pre) - Excel.xlsx Attachment 8 - Dual Loss Ratio Test (Post) - Excel.xlsx
Item Status:	Received & Acknowledged
Status Date:	11/30/2017
Satisfied - Item:	09/08/2017 Response - Objection 2
Comments:	The revised notification letters have replaced the previous versions in the Form Schedule tab.
Attachment(s):	
Item Status:	Received & Acknowledged
Status Date:	11/30/2017

State:

Virginia

Filing Company:

Mutual of Omaha Insurance Company

TOI/Sub-TOI:

LTC03I Individual Long Term Care/LTC03I.003 Other

Product Name:

Mutual of Omaha - 2016/2017 LTCi Rate Increase

Project Name/Number:

2016/2017 LTCi/

Attachment Att 4A-C - Nat'l Lifetime Exp. (Pre-Rate Stab).xlsx is not a PDF document and cannot be reproduced here.

Attachment Att 5A-C - Nat'l Lifetime Exp. (Post-Rate Stab).xlsx is not a PDF document and cannot be reproduced here.

Attachment Attachment 1 - Table 1-excel.xlsx is not a PDF document and cannot be reproduced here.

Attachment Exhibits 3A-C - Nationwide Lifetime Experience (2016)-rev-excel.xlsx is not a PDF document and cannot be reproduced here.

Attachment Exhibits 4A-C - Nationwide Lifetime Exp (Pre-Rate Stab. - 2016)-rev-excel.xlsx is not a PDF document and cannot be reproduced here.

Attachment Exhibits 5A-C - Nationwide Lifetime Exp (Post-Rate Stab. - 2016)-rev-excel.xlsx is not a PDF document and cannot be reproduced here.

Attachment Exhibits 6A-C - Updated Projections (Pre-Rate Stabilization - 2016)-rev-excel.xlsx is not a PDF document and cannot be reproduced here.

Attachment Exhibits 7A-C - Updated Projections (Post-Rate Stabilization - 2016)-rev-excel.xlsx is not a PDF document and cannot be reproduced here.

Attachment Exhibits 8A-C - Nationwide Lifetime Exp (Pre-Rate Stabilization - 2016)-excel.xlsx is not a PDF document and cannot be reproduced here.

Attachment Attachment 1 - Table 1 (corrected) - Excel.xlsx is not a PDF document and cannot be reproduced here.

Attachment Attachment 1 - Original Loss Ratios (Pre) - Excel.xlsx is not a PDF document and cannot be reproduced here.

State:	Virginia	Filing Company:	Mutual of Omaha Insurance Company
TOI/Sub-TOI:	LTC03I Individual Long Term Care/LTC03I.003 Other		
Product Name:	Mutual of Omaha - 2016/2017 LTCi Rate Increase		
Project Name/Number:	2016/2017 LTCi/		

Attachment Attachment 2 - Previous Assumptions (Pre) - Excel.xlsx is not a PDF document and cannot be reproduced here.

Attachment Attachment 3 - Current Assumptions (Pre) - Excel.xlsx is not a PDF document and cannot be reproduced here.

Attachment Attachment 4 - Original Loss Ratios (Post) - Excel.xlsx is not a PDF document and cannot be reproduced here.

Attachment Attachment 5 - Previous Assumptions (Post) - Excel.xlsx is not a PDF document and cannot be reproduced here.

Attachment Attachment 6 - Current Assumptions (Post) - Excel.xlsx is not a PDF document and cannot be reproduced here.

Attachment Attachment 7 - Dual Loss Ratio Test (Pre) - Excel.xlsx is not a PDF document and cannot be reproduced here.

Attachment Attachment 8 - Dual Loss Ratio Test (Post) - Excel.xlsx is not a PDF document and cannot be reproduced here.

VIRGINIA

The Company has reviewed the enclosed forms and certifies that, to the best of its knowledge and belief, each form submitted is consistent and complies with the requirements of Title 38.2 of the Code of Virginia and the regulations promulgated pursuant thereto.

Mutual of Omaha Insurance Company

Name of Company

A handwritten signature in black ink, reading "Daniel J. Kennelly". The signature is written in a cursive style with a large, stylized "D" and "K".

Daniel J. Kennelly

Vice President and Chief Compliance Officer

Mutual of Omaha Insurance Company

Date: April 26, 2017

Form No: Premium Notification Letter 0555A - VA

Review Requirements Checklist
INDIVIDUAL LONG-TERM CARE INSURANCE

REVIEW REQUIREMENTS	REFERENCE	COMMENTS
General Filing Requirements		
Transmittal Letter	14 VAC 5-100-40	For Paper Filings: Must be submitted in duplicate for each filing, describing each form, its intended use and kind of insurance provided.
	14 VAC 5-100-40 1	Forms submitted and described in transmittal letter must have a number that consists of digits, letters, or a combination of both.
	14 VAC 5-100-40 2	Must clearly indicate if forms are replacements, revisions, or modifications of previously approved forms and describe the exact changes that are intended.
	14 VAC 5-100-40 3	Certification of Compliance signed by General Counsel or officer of company or attorney or actuary representing company is required.
	14 VAC 5-100-40 5	Description of market for which the form is intended.
	14 VAC 5-100-40 6	For Paper Filings: At least one copy of each form must be included in the filing. A duplicate copy of forms must be submitted if the company wants a "stamped" copy of forms for its records. A stamped self-addressed return envelope is required. The letter of transmittal must be addressed to: State Corporation Commission, Bureau of Insurance, P. O. Box 1157, Richmond, VA 23218.
	Administrative Letter 1983-7	Must include the name and NAIC number of the company for which the filing is made.
Additional SERFF Filing Requirements	Administrative Letter 2012-03	Additional SERFF filing requirements must be met as specified below for life and health forms and rate filings. Failure to provide the applicable information will result in a "rejected" filing.
General Information – Filing Description	<i>not applicable</i>	(i) Description of each form by name, title, edition date, other; and intended use.
	<i>not applicable</i>	(ii) Identification of changes in benefits and premiums (previously approved or filed forms). [Place changed contract provisions (red-lined or highlighted) in Supporting Documentation].
	<i>not applicable</i>	(iii) Identification of SERFF or state tracking number for the previously approved or filed form for which the new form revises, replaces, or is intended to be used.
	<i>not applicable</i>	(iv) A statement as to whether any other regulatory body has withdrawn approval of the form because the form contains one or more provisions that were deemed to be misleading, deceptive or contrary to public policy.
HELP TIP:	<i>not applicable</i>	If a form or rate filing is submitted as new in Virginia, but was previously disapproved or withdrawn in Virginia, please provide details such as the tracking information, form number, and the date that the form or rate filing was disapproved or withdrawn, if available.

Review Requirements Checklist
INDIVIDUAL LONG-TERM CARE INSURANCE

REVIEW REQUIREMENTS	REFERENCE	COMMENTS
Rate Changes	<i>Exhibit 1 - Aug Ann. Prem.</i>	(i) Specify the number of affected policyholders.
	<i>Section 3 - Act. Memo.</i>	(ii) Provide the reason(s) for the proposed change(s).
	<i>Section 11 - Act. Memo.</i>	(iii) Include a statement regarding an increase, decrease, revision of former rates.
	<i>Section 11 - Act. Memo.</i>	(iv) Specify the percentage amount(s) of the change(s).
Forms		
Form number	14 VAC 5-100-50 1	Form number must appear in lower left-hand corner of first page of each form.
Company name & address	14 VAC 5-100-50 2	Full and proper corporate name (including "Inc.") must prominently appear on cover sheet of all policies and other forms. Home office address of insurer must prominently appear on each policy.
Final form	14 VAC 5-100-50 3	Form must be submitted in the final form in which it will be issued and completed in "John Doe" fashion to indicate its intended use.
Application	14 VAC 5-100-50 4	Any form, which is to be issued with an attached application, must be filed with a copy of the application completed in "John Doe" fashion to indicate its intended use. (If application was previously approved, advise date of approval.)
Type Size	14 VAC 5-100-50 5	Individual Accident and Sickness forms must be printed with type size of at least ten-point type. All other forms must be printed with type size of at least eight-point.
Arbitration	§ 38.2-312	Contract may not deprive courts of Virginia jurisdiction in actions against insurer. Arbitration may not be binding.
Fraud Notice	§ 38.2-316 D 1	Title 38.2 of the Insurance Code does not define "Insurance Fraud." Any notice regarding insurance fraud is in non-compliance with this section of the Code. Variations in a notice warning of consequences of making fraudulent statements are acceptable. The notice may disclose that it does not apply in Virginia or may disclose states where applicable.
Readability Certification	14 VAC 5-110-60	Readability certification is required as described in the regulation.
Entire Consideration	§ 38.2-3500 A 1	The entire consideration is expressed in the policy.
Effective-Termination Time	§ 38.2-3500 A 2	The time (clock time) the policy becomes effective and terminates is expressed in the policy.
DMAS Payor of Last Resort	§ 38.2-3500 A 7	Every accident and health policy must contain a statement indicating the Department of Medical Assistance Services as the payor of last resort.
Definition of Eligible Family members	§ 38.2-3500 C	The definition establishes that eligible dependent children may not be required to live in the household as the policyowner.
Handicapped Child Coverage	§ 38.2-3409	Upon termination due to age, coverage will be continued for: (1) persons incapable of self-sustaining employment by reason of intellectual disability or physical handicap; and (2) chiefly dependent on the insured for support and maintenance. Additional premium may be charged based upon class of risks.
Renewal Provision	14 VAC 200-70 A & 14 VAC 5-200-60 A	The regulation specifies the content of the renewability provision. The renewal provision must be either guaranteed renewable or noncancellable.
LTC Caution Notice	14 VAC 5-200-80 C 2	Required language in bold print .

Review Requirements Checklist
INDIVIDUAL LONG-TERM CARE INSURANCE

REVIEW REQUIREMENTS	REFERENCE	COMMENTS
30-Day Free Look	§ 38.2-5208 A	
Notice to Buyer	14 VAC 5-200-170 A 3	Required language.
General Provisions		
Contents of Policy	38.2-305 A	Parties to policy named; subject of insurance; risks insured against; time insurance takes effect; statement of the premium.
Entire Contract	§ 38.2-3503 1	The provision defines the contents of the entire contract.
Grace Period	§ 38.2-3503 3	The provision defines the grace period and length of the various acceptable grace periods.
	14 VAC 5-200-65 A 3	The policy must specify an additional 30 days for an unintentional lapse of coverage.
Reinstatement	§ 38.2-3503 4	
	14 VAC 5-200-65 B	The regulation provides for an extended reinstatement period in the event of policy lapse due to cognitive impairment.
Notice of Claim	§ 38.2-3503 5	
Claim Forms	§ 38.2-3503 6	
Proof of Loss	§ 38.2-3503 7	
Time Payment of Claims	§ 38.2-3503 8	The provision specifies when benefits will be paid.
Payment of Claims	§ 38.2-3503 9	The provision specifies to whom benefits will be paid
Physical Examinations and Autopsy	§ 38.2-3503 10	
Legal Actions	§ 38.2-3503 11	
Change of Beneficiary	§ 38.2-3503 12	(For payment to beneficiaries, see Payment of Claims provision-§ 38.2-3503 9.)
Incontestability	§ 38.2-5209	The provision contains specific incontestability language for long-term care insurance.
Age Limit	§ 38.2-3513 A	If the policy establishes an age-limit after which coverage will no longer be effective, and if the date falls within a period for which a premium is accepted by the insurer or the insurer accepts a premium after the date, the coverage provided by the policy will continue in force until the end of the period for which the premium has been accepted.
	§ 38.2-3513 B	If the age of the insured has been misstated and the policy would not have been issued according to the correct age of the insured, the policy would not have become effective or would have ceased prior to the acceptance of the premium, then the liability of the insurer shall be limited to the refund of the premium paid for the period not covered by the policy.
Optional Provisions		
Change of Occupation	§ 38.2-3504 1	
Misstatement of Age	§ 38.2-3504 2	
Other Insurance in this Company	§ 38.2-3504 3	
Insurance with Other Company	§ 38.2-3504 4	
Insurance with Other Company	§ 38.2-3504 5	
Unpaid Premiums	§ 38.2-3504 7	
Conformity with State Statutes	§ 38.2-3504 9	Must use "resides" language

Review Requirements Checklist
INDIVIDUAL LONG-TERM CARE INSURANCE

REVIEW REQUIREMENTS	REFERENCE	COMMENTS
Illegal Occupation	§ 38.2-3504 10	
Intoxicants and Narcotics	§ 38.2-3504 11	
Prohibited Provisions		
	§ 38.2-5203	Specified provisions prohibited in a long-term care policy.
	§ 38.2-5205 A	Prior institutionalization may not be a requirement to receive benefits.
	14 VAC 5-200-190	Preexisting conditions and waiting periods may not be used in replacement policies.
Subrogation	§ 38.2-3405 A	No policy shall contain a provision regarding subrogation of any person's right to recovery for personal injuries from a third person.
Liability Insurance	§ 38.2-3405 B	Benefits may not be reduced due to benefits payable due to benefits provided by a liability insurance contract.
Workers' Compensation	§ 38.2-3405 D	The statute discusses exceptions to exclusions due to benefits payable under workers' compensation.
Minimum Standards for Home Health Care	14 VAC 5-200-90	The minimum standards include prohibited exclusions and restrictions regarding home health care benefits.
LTC Policy Requirements		
Duration of Benefits	§ 38.2-5200	Coverage must be provided for a minimum of 12 months.
Refund of Premium for Cancellation or Termination of Policy	§ 38.2-5202.1	Provides for the termination of the policy by the insured and for cancellation of the policy by the insurer , except when coverage is for the duration of life and premium is a single installment payment.
Preexisting Condition	§ 38.2-5204	Defines look-back period and limitation period for preexisting conditions.
	14 VAC 5-200-70 D	If policy includes limitations due to a preexisting condition, such limitations must be included labeled as "Preexisting Condition Limitations."
Limitations or Conditions on Eligibility for Benefits	§ 38.2-5205 B 14 VAC 5-200-187	Permissible benefit triggers and requirements.
Definitions	14 VAC 5-200-50	Certain terms defined.
UCR defined	14 VAC 5-200-70 C	The term must be defined If benefits are based on usual, reasonable and customary charges.
Limitations and Exclusions	14 VAC 5-200-60 B	
	§ 38.2-3504 11	Intoxicants and narcotics
Extension of benefits	14 VAC 5-200-60 C	
Right to Reduce Coverage and Lower Premiums	14 VAC 5-200-183	The policy shall include a provision that allows the policyholder to reduce coverage and lower the premium.
Nonforfeiture Benefit Requirement	14 VAC 5-200-185 B	Offer made to the policyholder. Refer to the regulation for specifics.
Contingent Benefit Upon Lapse	14 VAC 5-200-185 C	If the offer of the nonforfeiture benefit is declined, the contingent benefit upon lapse shall be provided.
Required to Offer Inflation Protection	14 VAC 5-200-100 A	

Review Requirements Checklist
INDIVIDUAL LONG-TERM CARE INSURANCE

REVIEW REQUIREMENTS	REFERENCE	COMMENTS
Signed Acceptance for Riders and Amendments	14 VAC 5-200-70 B	All riders and/or endorsements that added to a policy after the date of issue that reduces, restricts, or eliminates benefits in the policy will require signed acceptance. Also, where a separate premium is charged for a rider or endorsement, the premium will be set forth in the policy, rider, or endorsement.
LTC Personal Suitability Worksheet	14 VAC 5-200-175-C 2	The LTC personal suitability worksheet must be submitted with the policy.
Disclosures		
	§ 38.2-5207 1; 14 VAC 5-200-200	The statute requires that an outline of coverage be provided to the insured. The statute also specifies the information that should be included in the outline.
	§ 38.2-5207 4; 14 VAC 5-200-70 H	A tax-qualified plan must be definitively identified as such.
	14 VAC 5-200-70 I	A non-tax-qualified plan must be identified as such.
	14 VAC 5-200-75 D	Any reference to a premium increase shall disclose that notice of premium increase shall be at least 60 days prior to the increase.
Policies that include issue ages of 65 or higher	14 VAC 5-170-150 E 1	Any policy marketed to persons age 65 or older must contain a notice that discloses that the policy is not a Medicare supplement policy or certificate.
Rates		
	§ 38.2-5206	
	14 VAC 5-200-150	The regulation specifies the expected loss ratio.
	14 VAC 5-130-60 A and 130-60 B; 14 VAC 5-200-77	The regulation specifies rate filing and actuarial memorandum requirements.

Access to Administrative Letters, Administrative Orders, Regulations and Laws is available at:
<http://www.scc.virginia.gov/boi/laws.aspx>

The Life and Health Division, Forms and Rates Section reviews individual long-term care insurance. Please contact this section at (804) 371-9110 if you have questions or need additional information about this line of insurance.

Review Requirements Checklist
INDIVIDUAL LONG-TERM CARE INSURANCE

I hereby certify that I have reviewed the attached individual long-term care filing and determined that it is in compliance with the individual long-term care checklist.

Signed: Jeffrey O. LaFond

Name (please print): Jeffrey O. LaFond

Company Name: Mutual of Omaha Insurance Company

Date: 08/26/2016 Phone No: (402) 351-3799 FAX No: (402) 351-2465

E-Mail Address: jeff.lafond@mutualofomaha.com

Mutual of Omaha Insurance Company

ACTUARIAL JUSTIFICATION OF PREMIUM RATES

Long-Term Care and Home Health Care Policies

Virginia

1. PURPOSE OF FILING

This is a rate increase filing for existing Long-Term Care and Home Health Care policy forms. The purpose of this filing is to demonstrate that the anticipated loss ratio of these forms meets the minimum requirements of this state and to provide updated projections following the rate increase that was implemented in 2014. This is the second of the three required filings. The updated projections for the pre-rate stabilization business are displayed in Exhibits 6A through 6C and the updated projections (dual loss ratio tests) are displayed in Exhibits 7A through 7C. This rate filing is not intended to be used for any other purposes.

2. SCOPE OF FILING

This filing applies to the Company's Long-Term Care and Home Health Care policy forms as summarized below. These forms provide daily benefits for long term treatment in various settings when the insured meets policy benefit qualification requirements. All forms included in this filing are Individual policies that are guaranteed renewable. These policies were fully underwritten and were issue age rated. These policies were sold by agents and brokers.

The policy forms included in this filing, along with their respective issue dates (for the majority of the states) and issue age limits, are displayed below:

Issue Dates

<u>Policy Form</u>	<u>From</u>	<u>To</u>	<u>Issue Age Limits</u>
NH50	1997	2000	18 to 84
LT50	1997	2004	18 to 84
HCA	1998	2002	18 to 84
HCAQ	1998	2002	18 to 84
LTA	1998	2004	18 to 84 (changed to 18 to 79 in 2003)
LTAQ	1998	2004	18 to 84 (changed to 18 to 79 in 2003)
NHA	1998	2004	18 to 84 (changed to 18 to 79 in 2003)
NHAQ	1998	2004	18 to 84 (changed to 18 to 79 in 2003)

The proposed rate increase applies to in-force policies only as these forms are no longer being marketed.

The number of policyholders and the annualized inforce premium, as of December 31, 2015, are displayed in Exhibit 1. Exhibit 1 also shows the average annual premium before and after the proposed rate increase.

3. REASON FOR RATE INCREASE REQUEST

A rate increase is necessary at this time due to significantly higher anticipated future and lifetime loss ratios. The higher loss ratios are mainly a result of higher lifetime benefit claim costs. In addition, for those policies that were issued in Virginia on and after October 1, 2003, the moderately adverse condition that triggered was morbidity. As defined in the previous rate increase filing, SERFF Tracking # MUTA-127148717, any combination of changes in the moderately adverse experience conditions that is at least as much as the impact of a 10% increase in morbidity would trigger a moderately adverse condition. Justification for the morbidity trigger is included in Exhibit 8. Corrections were made to the projections as of June 30, 2012, that generated the lifetime loss ratio (120.6%) to which the certification required by 14 VAC 5-200-153 (B) (2) was made. The June 30, 2012, projections did not adjust the premiums to the Virginia rate level. These premiums should have been adjusted to reflect the increase that was implemented in Virginia in 2007 on the

Virginia post-rate stabilization block of business. The revised projection correctly adjusted premium to reflect the Virginia rate increase in 2007. The adjusted premium assumes that all policyholders on a nationwide basis received the increase amounts that were implemented in Virginia. The “Original Premium” also changed for the prior years 2003 through 2011 as a correction was made to the original rate level adjustment factors by benefit period. The resulting lifetime loss ratio based on the corrected premium is 109.5%. The lifetime loss ratio based on the updated experience has triggered the moderately adverse experience, even on the incorrect lifetime loss ratio of 120.6%.

Mutual of Omaha has been evaluating this LTCi block and updating assumptions based on our experience as well as the LTCi industry experience. For the forms specified above, experience has been significantly worse than original pricing. Lifetime benefit updated claim costs, ultimate lapse rates and mortality rates have had the most significant deviation from pricing. The combined effect of changing the underlying claim costs to better reflect actual experience, as well as nationwide data, and updating the mortality rates and persistency assumptions resulted in the need for a rate increase. The current premium levels are inadequate and, therefore, Mutual of Omaha is requesting a rate increase in order to maintain the viability and financial stability of the policy forms.

Some of the forms in this filing received a rate revision in 2003. A follow-up rate increase was filed in 2007 in those states that did not approve the entire rate increase that was requested in 2003 to bring those states to the national rate level. Also, an additional rate increase was filed in 2011 with a follow up increase in 2012 for policies with lifetime benefits, as summarized in Exhibit 2. We have closely monitored the experience of this block of business. During our analysis, we noticed that the experience of our lifetime benefit periods was deviating from the then current industry experience. We received an updated industry experience table from Milliman in early 2013 and fully incorporated the data into our projections and models during 2013. At this time, we recognized that the experience of this block was still deviating from industry experience, and that the industry was having the same issue with lifetime benefit periods that we are experiencing. We are requesting the increase at this time due to the updated morbidity assumptions from the current industry table.

4. RATE INCREASE HISTORY

The National and Virginia rate increase history by form is displayed in Exhibit 2.

5. PROJECTION ASSUMPTIONS

Interest

A 4.5% effective annual rate of interest has been assumed for accumulating historical experience and for discounting projected future experience.

Lapse Rates

Mutual of Omaha reviews its persistency assumptions on a yearly basis to monitor for any changes in lapse rates. As experience develops, we continue to see ultimate lapse assumptions decrease, especially as we gain experience in later durations. As such, the persistency assumptions were also revised based on the actual experience of the affected blocks. The ultimate lapse rates by attained age group, since all policies are at least in policy duration 10, as displayed below:

			Attained Age						
			0 - 49	50 - 59	60 - 64	65 - 69	70 - 74	75 - 79	80 - 84
Non-Lifetime BP	Married	Inflation	1.1%	1.1%	1.0%	0.8%	0.8%	0.8%	0.8%
		No Inflation	1.9%	1.9%	1.6%	1.3%	1.3%	1.4%	1.8%
	Single	Inflation	1.8%	1.9%	1.6%	1.3%	1.3%	1.4%	1.6%
		No Inflation	3.3%	3.3%	2.9%	2.4%	2.4%	2.5%	3.3%
Lifetime BP	Married	Inflation	0.6%	0.6%	0.6%	0.4%	0.4%	0.4%	0.5%
		No Inflation	1.1%	1.1%	1.0%	0.8%	0.8%	0.8%	0.9%
	Single	Inflation	1.1%	1.1%	1.0%	0.8%	0.8%	0.8%	0.9%
		No Inflation	1.9%	2.0%	1.8%	1.4%	1.3%	1.4%	1.6%

Mortality

Mortality rates are derived using the Annuity 2000 Basic table. Selection factors grade from 40% to 100% over 12

years. Generational mortality improvement of 1% per year and future mortality improvement of 1% per year for 20 years are assumed but is something that we will continue to monitor closely as we gain more experience to ensure that it remains an appropriate assumption.

Morbidity Assumption Updates

The Milliman 2011 Guidelines now serves as the morbidity basis. Milliman claim costs are created from data contributed by LTC insurance companies that agreed to provide claim datasets. The datasets consisted of more than 15 million life years of exposure and over \$10.5 billion of incurred claims. In 2013, Milliman reviewed our actual experience and compared it against their expected industry experience. In 2014, Mutual of Omaha performed a comprehensive claim study on the policy forms mentioned in this filing. Below are our key findings.

1. Overall, Mutual of Omaha's claim costs align with Milliman claim costs. We continue to see worse experience overall on the lifetime benefit period policies compared to the Milliman Guidelines while those with non-lifetime benefit periods are somewhat better. Some adjustments were made to the Milliman Guidelines based off of the actual to expected analysis. Generational morbidity improvement of 1% per year and future morbidity improvement of 1% per year for 20 years are assumed but is something that we will continue to monitor closely as we gain more experience to ensure that it remains an appropriate assumption.
2. The Milliman 2011 Guidelines also reflect a significant increase over the Milliman 2009 Guidelines in expected claim costs for lifetime benefits, especially with regards to length of stay or continuance. Mutual of Omaha's experience follows this nationwide trend. Other benefit period claim costs did not experience much of an increase and reflect that the increase in continuance was mainly offset with the decrease in incidence and utilization.

Rate increase

Projected future earned premiums that include the proposed rate increase amounts, as noted in Section 11, assume 12/01/2016 and 12/01/2017 effective dates.

6. POLICY RESERVES

The valuation basis for contract reserves which generates the net valuation premium for renewal years is: one-year preliminary term using pricing claim costs @ 4.5% and 1994 GAM with gender weighted by expected distribution by issue age with selection factors grading from 0.40 to 1.00 over 10 years. Terminations, other than mortality, do not exceed:

- a) For policy year one through four, the lesser of 80% of the voluntary lapse rate used in the calculation of gross premiums and 8%;
- b) For policy years five and later, the lesser of 100% of the voluntary lapse rate used in the calculation of gross premiums and 4%.

7. MINIMUM REQUIRED LIFETIME LOSS RATIO

The minimum required lifetime loss ratio is 60%.

8. HISTORICAL EXPERIENCE

The nationwide experience exhibits for the Non-Lifetime Benefit Periods, Lifetime Benefit Period, and all Benefit Periods combined, since inception through December 31, 2015, are shown in Exhibits 3A through 3C. The premiums in Exhibits 3A through 3C assume that all policyholders, on a nationwide basis, are paying the premium levels approved by your state. The Florida experience for Form HCA has been excluded from the historical experience as Form HCA in Florida was sold as a Home Health Care only contract, and Florida has a different premium structure than the rest of the country. The addition of the Florida Home Health Care experience would increase the loss ratio further.

9. PROJECTED FUTURE EXPERIENCE

Future experience, which has been projected both with and without the requested rate increase using the assumptions described in Section 5, is shown in Exhibits 3A through 3C. Separate exhibits have been completed for the Non-Lifetime Benefit Periods (Exhibit 3A), the Lifetime Benefit Period (Exhibit 3B), and all Benefit Periods combined (Exhibit 3C).

Exhibits 4A through 4C have been prepared to demonstrate compliance with 14 VAC 5-200-150. The experience displayed in these exhibits represents the nationwide pre-rate stabilization business by benefit period, and the future experience has been projected both with and without the requested rate increase. These exhibits show that the resulting lifetime loss ratio, with the requested rate increase, exceeds the minimum required loss ratio of 60%.

Exhibits 5A through 5C have been prepared to demonstrate compliance with 14 VAC 5-200-153. The experience displayed in these exhibits represents the nationwide post-rate stabilization business by benefit period, and the future experience includes the requested rate increase. These exhibits show that the dual loss ratio test has been satisfied.

10. LIFETIME ANTICIPATED LOSS RATIO

The lifetime anticipated loss ratio is defined as the present value of the historical and projected future incurred claims divided by the present value of the historical and projected future earned premiums. Please note that the majority of the National business was issued prior to rate stabilization. See below for a summary of the maximum allowable rate increases that would still meet the minimum loss ratio requirements. The proposed rate increase is shown in section 11.

Non-Lifetime Benefit Periods

A rate increase of 14.5% is needed on a going forward basis, for the Non-Lifetime Benefit periods, to bring the future loss ratio in line with expectations.

Experience Period	Earned Premium	Incurred Claims	Actual Loss Ratios	Pricing Loss Ratios
Past	593,825,118	291,912,332	49.2%	55.0%
Future	207,087,578	432,605,951	208.9%	208.9%
Lifetime	800,912,697	724,518,284	90.5%	63.2%

The above demonstrates that both the anticipated future loss ratio and the lifetime anticipated loss ratio are in compliance with the minimum loss ratio requirements after the implementation of any rate increase less than 14.5%.

Lifetime Benefit Periods

A rate increase of 88.5% is needed on a going forward basis, for the Lifetime Benefit period, to bring the future loss ratio in line with expectations.

Experience Period	Earned Premium	Incurred Claims	Actual Loss Ratios	Pricing Loss Ratios
Past	911,011,570	559,489,310	61.4%	55.1%
Future	611,645,203	1,270,387,087	207.7%	207.7%
Lifetime	1,522,656,773	1,829,876,396	120.2%	63.0%

The above demonstrates that both the anticipated future loss ratio and the lifetime anticipated loss ratio are in compliance with the minimum loss ratio requirements after the implementation of any rate increase less than 88.5%.

All Benefit Periods Combined

An overall rate increase of 61.9% is needed on a going forward basis, for all benefit periods combined, to bring the future loss ratio in line with expectations.

Experience Period	Earned Premium	Incurred Claims	Actual Loss Ratios	Pricing Loss Ratios
Past	1,504,836,688	851,401,642	56.6%	55.1%
Future	817,960,153	1,702,993,038	208.2%	208.2%
Lifetime	2,322,796,841	2,554,394,680	110.0%	63.1%

The above demonstrates that both the anticipated future loss ratio and the lifetime anticipated loss ratio are in compliance with the minimum loss ratio requirements after the implementation of any rate increase less than 61.9%.

11. SUMMARY OF PROPOSED RATE INCREASE

Although a rate increase of 61.9% is needed to bring the future loss ratio in line with expectations, we are requesting a rate increase to be implemented as summarized below. We will continue to monitor emerging experience and consider further corrective action in the future.

Benefit Period	2016	2017	Total
Non-Lifetime	0.0%	0.0%	0.0%
Lifetime	30.0%	15.0%	49.5%
Total	16.7%	9.3%	27.6%

We propose the same increase amount for all Virginia lifetime benefit period policyholders, regardless of issue date. The proposed rate increase amounts displayed above will bring Virginia policyholders to the national rate level, as summarized in Exhibit 2.

Policyholders will be given the following options in an effort to reduce the impact of the proposed rate increase:

- Decrease their benefit period.
- Increase their elimination period.
- Reduce their maximum daily benefit.
- Accept the nonforfeiture option.

If the proposed rate increase is approved, renewal premium rate schedules will not be greater than new business premium rate schedules, where applicable, except for differences attributable to benefits.

The proposed effective dates of the increases for policies with a lifetime benefit period are December 1, 2016, and December 1, 2017, subject to your State's approval.



Adam Walling, FSA, MAAA
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August 26, 2016

Attachments:

Attachment A – Actuarial Certification

Exhibit 1 – Policies In-Force, Annualized Premium and Average Annual Premium

Exhibit 2 – Rate Increase History

Exhibit 3A – Nationwide Lifetime Experience (Non-Lifetime Benefit Periods)

Exhibit 3B – Nationwide Lifetime Experience (Lifetime Benefit Period)

Exhibit 3C – Nationwide Lifetime Experience (All Benefit Periods Combined)

Exhibit 4A – Nationwide Lifetime Experience – Pre-Rate Stabilization (Non-Lifetime Benefit Periods)

Exhibit 4B – Nationwide Lifetime Experience – Pre-Rate Stabilization (Lifetime Benefit Period)

Exhibit 4C – Nationwide Lifetime Experience – Pre-Rate Stabilization (All Benefit Periods Combined)

Exhibit 5A – Nationwide Lifetime Experience – Post-Rate Stabilization (Non-Lifetime Benefit Periods)

Exhibit 5B – Nationwide Lifetime Experience – Post-Rate Stabilization (Lifetime Benefit Period)

Exhibit 5C – Nationwide Lifetime Experience – Post-Rate Stabilization (All Benefit Periods Combined)

Exhibit 6A – Updated Projection – Pre-Rate Stabilization (Non-Lifetime Benefit Periods)

Exhibit 6B – Updated Projection – Pre-Rate Stabilization (Lifetime Benefit Period)

Exhibit 6C – Updated Projection – Pre-Rate Stabilization (All Benefit Periods Combined)

Exhibit 7A – Updated Projection – Post-Rate Stabilization (Non-Lifetime Benefit Periods)

Exhibit 7B – Updated Projection – Post-Rate Stabilization (Lifetime Benefit Period)

Exhibit 7C – Updated Projection – Post-Rate Stabilization (All Benefit Periods Combined)

Exhibit 8 – Moderately Adverse Experience Trigger (Lifetime Benefit Period only)

Exhibit 9A – Virginia Lifetime Experience – Pre-Rate Stabilization (Non-Lifetime Benefit Periods)

Exhibit 9B – Virginia Lifetime Experience – Pre-Rate Stabilization (Lifetime Benefit Period)

Exhibit 9C – Virginia Lifetime Experience – Pre-Rate Stabilization (All Benefit Periods Combined)

Exhibit 10A – Virginia Lifetime Experience – Post-Rate Stabilization (Non-Lifetime Benefit Periods)

Exhibit 10B – Virginia Lifetime Experience – Post-Rate Stabilization (Lifetime Benefit Period)

Exhibit 10C – Virginia Lifetime Experience – Post-Rate Stabilization (All Benefit Periods Combined)

Proposed Rates

Actuarial Certification
for
Long-Term Care Policies HCA, NHA, LTA and Riders
for
Policies Issued On and After October 1, 2003

I, Adam Walling, am the LTC Product Performance Director of Mutual of Omaha Insurance Company and a member of the American Academy of Actuaries. I meet the Academy's qualification standards for rendering this opinion and am familiar with the requirements for filing long-term care insurance premiums.

If the requested premium rate schedule increase is implemented and the underlying assumptions, which reflect moderately adverse conditions, are realized, no further premium rate schedule increases are anticipated.

I have reviewed and taken into consideration the policy design and coverage provided.

I have reviewed and taken into consideration the current underwriting and claims adjudication processes.

In forming my opinion, I have used actuarial assumptions and actuarial methods and such tests of the actuarial calculations as I considered necessary. Based on these assumptions, this premium rate filing is in compliance with the filing requirements and the loss ratio standards of this state.

Renewal premium rate schedules are not greater than the new business premium rates of those forms currently being marketed, except for differences attributable to benefits.



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August 26, 2016

Policies In-Force as of 12/31/2015, Annualized Premium and Average Annual Premium**National****Non-Lifetime Benefit Periods**

		Average Annual Premium			
Policy Form	In-Force	Annualized Premium	Before Increase	After Increase	Increase Amount
LT50	1,792	2,760,618	1,541	1,541	0.0%
NH50	645	547,722	849	849	0.0%
HCA	463	819,278	1,769	1,769	0.0%
HCAQ	209	254,533	1,218	1,218	0.0%
LTA	5,338	9,528,711	1,785	1,785	0.0%
LTAQ	1,144	1,792,240	1,567	1,567	0.0%
NHA	5,504	11,950,275	2,171	2,171	0.0%
NHAQ	1,209	2,323,565	1,922	1,922	0.0%
Total	16,304	29,976,942	1,839	1,839	0.0%

Lifetime Benefit Period

		Average Annual Premium			
Policy Form	In-Force	Annualized Premium	Before Increase	After Increase	Increase Amount
LT50	1,360	3,039,698	2,235	2,570	15.0%
NH50	645	794,585	1,232	1,417	15.0%
HCA	277	842,793	3,043	3,499	15.0%
HCAQ	71	189,910	2,675	3,076	15.0%
LTA	7,681	19,927,954	2,594	2,983	15.0%
LTAQ	2,056	4,098,520	1,993	2,292	15.0%
NHA	5,073	15,133,820	2,983	3,430	15.0%
NHAQ	1,543	3,823,440	2,478	2,850	15.0%
Total	18,706	47,850,720	2,558	2,942	15.0%

Virginia**Non-Lifetime Benefit Periods**

		Proposed 2016 Average Annual Premium				Proposed 2017 Average Annual Premium		
Policy Form	In-Force	Annualized Premium	Before Increase	After Increase	Increase Amount	Before Increase	After Increase	Increase Amount
HCA	50	68,195	1,364	1,364	0.0%	1,364	1,364	0.0%
LT50	85	111,149	1,308	1,308	0.0%	1,308	1,308	0.0%
LTA	368	681,504	1,852	1,852	0.0%	1,852	1,852	0.0%
NH50	51	41,791	819	819	0.0%	819	819	0.0%
NHA	310	655,406	2,114	2,114	0.0%	2,114	2,114	0.0%
Total	864	1,558,045	1,803	1,803	0.0%	1,803	1,803	0.0%

Lifetime Benefit Period

		Proposed 2016 Average Annual Premium				Proposed 2017 Average Annual Premium		
Policy Form	In-Force	Annualized Premium	Before Increase	After Increase	Increase Amount	Before Increase	After Increase	Increase Amount
HCA	42	121,595	2,895	3,764	30.0%	3,764	4,329	15.0%
LT50	49	110,486	2,255	2,932	30.0%	2,932	3,372	15.0%
LTA	374	943,791	2,524	3,281	30.0%	3,281	3,773	15.0%
NH50	22	29,786	1,354	1,760	30.0%	1,760	2,024	15.0%
NHA	257	755,264	2,939	3,821	30.0%	3,821	4,394	15.0%
Total	744	1,960,922	2,636	3,427	30.0%	3,427	3,941	15.0%

Rate Increase History

National

Form	Effective Date	Overall Increase Amount
LT50	n/a	0.0%
NH50	n/a	0.0%
HCA	10/01/2003	29.0%
HCAQ	10/01/2003	29.0%
LTA	10/01/2003	29.0%
LTAQ	10/01/2003	29.0%
NHA	10/01/2003	29.0%
NHAQ	10/01/2003	29.0%

Non-Lifetime	
Effective Date	Overall Increase Amount
10/01/2011	15.0%
10/01/2011	15.0%
10/01/2011	15.0%
10/01/2011	15.0%
10/01/2011	15.0%
10/01/2011	15.0%
10/01/2011	15.0%
10/01/2011	15.0%

Lifetime							
Effective Date	Overall Increase Amount	Effective Date	Overall Increase Amount	Effective Date	Overall Increase Amount	Effective Date	Overall Increase Amount
10/01/2011	30.0%	10/01/2012	11.5%	05/01/2015	30.0%	05/01/2016	15.0%
10/01/2011	30.0%	10/01/2012	11.5%	05/01/2015	30.0%	05/01/2016	15.0%
10/01/2011	30.0%	10/01/2012	11.5%	05/01/2015	30.0%	05/01/2016	15.0%
10/01/2011	30.0%	10/01/2012	11.5%	05/01/2015	30.0%	05/01/2016	15.0%
10/01/2011	30.0%	10/01/2012	11.5%	05/01/2015	30.0%	05/01/2016	15.0%
10/01/2011	30.0%	10/01/2012	11.5%	05/01/2015	30.0%	05/01/2016	15.0%
10/01/2011	30.0%	10/01/2012	11.5%	05/01/2015	30.0%	05/01/2016	15.0%

Note:

The overall increase in 2003 is the result of a 40% rate increase to the base policy only, combined with the Tax Qualified Discount increasing from 5% to 15%.

Virginia

Form	Effective Date	Overall Increase Amount
LT50	n/a	0.0%
NH50	n/a	0.0%
HCA	08/01/2007	29.0%
HCAQ	08/01/2007	29.0%
LTA	08/01/2007	29.0%
LTAQ	08/01/2007	29.0%
NHA	08/01/2007	29.0%
NHAQ	08/01/2007	29.0%

Non-Lifetime			
Effective Date	Overall Increase Amount	Effective Date	Overall Increase Amount
05/01/2013	20.0%	05/01/2014	4.1%
05/01/2013	20.0%	05/01/2014	4.1%
05/01/2013	20.0%	05/01/2014	4.1%
05/01/2013	20.0%	05/01/2014	4.1%
05/01/2013	20.0%	05/01/2014	4.1%
05/01/2013	20.0%	05/01/2014	4.1%
05/01/2013	20.0%	05/01/2014	4.1%

Lifetime			
Effective Date	Overall Increase Amount	Effective Date	Overall Increase Amount
05/01/2013	30.0%	05/01/2014	20.0%
05/01/2013	30.0%	05/01/2014	20.0%
05/01/2013	30.0%	05/01/2014	20.0%
05/01/2013	30.0%	05/01/2014	20.0%
05/01/2013	30.0%	05/01/2014	20.0%
05/01/2013	30.0%	05/01/2014	20.0%
05/01/2013	30.0%	05/01/2014	20.0%

Notes:

1. The overall increase in 2007 is the result of a 40% rate increase to the base policy only, combined with the Tax Qualified Discount increasing from 5% to 15%.
2. The overall increase in 2014 (non-lifetime benefit periods) is the result of a 10% increase to the 5-year benefit period and no increase to the remaining non-lifetime benefit periods (1-year, 2-year and 3-year benefit periods).

Lifetime Experience (Nationwide) as of 12/31/2015
Premiums at the Virginia Rate Level
Non-Lifetime Benefit Periods

	Virginia	Incurred Claims			
Year	Rate Level Earned Premium	Discounted to Incurred Year	Loss Ratio		
1997	493,144	0	0.0%		
1998	2,879,303	107,337	3.7%		
1999	5,164,376	620,403	12.0%		
2000	8,538,676	1,278,903	15.0%		
2001	13,296,598	2,426,016	18.2%		
2002	19,842,983	4,609,517	23.2%		
2003	27,120,845	3,660,231	13.5%		
2004	28,222,177	5,980,397	21.2%		
2005	28,236,306	8,695,837	30.8%		
2006	27,254,820	9,388,532	34.4%		
2007	28,749,932	12,025,776	41.8%		
2008	30,977,013	13,703,681	44.2%		
2009	29,532,625	16,488,665	55.8%		
2010	28,088,937	18,644,745	66.4%		
2011	26,659,985	21,301,910	79.9%		
2012	26,462,143	26,716,730	101.0%		
2013	28,959,105	25,544,165	88.2%		
2014	29,852,766	26,690,007	89.4%		
2015	29,503,501	33,435,321	113.3%		
Total	419,835,237	231,318,173	55.1%		
Interest Adjusted	593,825,118	291,912,332	49.2%		
	Earned Premium w/o Increase	Earned Premium w/Increase	Incurred Claims	Loss Ratio w/o Increase	Loss Ratio w/Increase
2016	26,939,186	26,939,186	24,772,931	92.0%	92.0%
2017	24,560,194	24,560,194	25,632,127	104.4%	104.4%
2018	22,362,304	22,362,304	26,410,284	118.1%	118.1%
2019	20,311,006	20,311,006	27,576,739	135.8%	135.8%
2020	18,405,241	18,405,241	28,696,606	155.9%	155.9%
2021	16,608,216	16,608,216	29,327,296	176.6%	176.6%
2022	14,924,892	14,924,892	30,467,996	204.1%	204.1%
2023	13,342,875	13,342,875	29,913,799	224.2%	224.2%
2024	11,891,288	11,891,288	29,199,717	245.6%	245.6%
2025	10,564,043	10,564,043	29,345,610	277.8%	277.8%
2026	9,345,722	9,345,722	29,514,641	315.8%	315.8%
2027	8,232,759	8,232,759	29,597,129	359.5%	359.5%
2028	7,221,732	7,221,732	29,478,496	408.2%	408.2%
2029	6,308,746	6,308,746	29,207,360	463.0%	463.0%
2030	5,488,505	5,488,505	28,771,580	524.2%	524.2%
2031	4,753,689	4,753,689	28,251,812	594.3%	594.3%
2032	4,099,218	4,099,218	27,697,138	675.7%	675.7%
2033	3,517,147	3,517,147	26,557,874	755.1%	755.1%
2034	3,005,439	3,005,439	25,216,937	839.0%	839.0%
2035	2,555,825	2,555,825	24,140,602	944.5%	944.5%
2036	2,162,007	2,162,007	23,018,515	1064.7%	1064.7%
2037	1,819,573	1,819,573	21,855,933	1201.2%	1201.2%
2038	1,523,303	1,523,303	20,605,549	1352.7%	1352.7%
2039	1,268,467	1,268,467	19,199,836	1513.6%	1513.6%
2040	1,050,557	1,050,557	17,666,277	1681.6%	1681.6%
2041	864,910	864,910	16,172,326	1869.8%	1869.8%
2042	708,022	708,022	14,695,058	2075.5%	2075.5%
2043	575,879	575,879	13,235,754	2298.4%	2298.4%
2044	465,548	465,548	11,729,610	2519.5%	2519.5%
2045	374,166	374,166	10,301,469	2753.2%	2753.2%
2046	298,694	298,694	8,968,393	3002.5%	3002.5%
2047	237,158	237,158	7,767,599	3275.3%	3275.3%
2048	187,238	187,238	6,683,129	3569.3%	3569.3%
2049	146,863	146,863	5,690,704	3874.8%	3874.8%
2050	114,342	114,342	4,789,042	4188.3%	4188.3%
2051	88,314	88,314	4,007,823	4538.2%	4538.2%
2052	67,755	67,755	3,327,273	4910.8%	4910.8%
2053	51,738	51,738	2,751,108	5317.4%	5317.4%
2054	39,214	39,214	2,247,768	5732.0%	5732.0%
2055	29,460	29,460	1,816,476	6165.9%	6165.9%
2056	21,878	21,878	1,454,057	6646.2%	6646.2%
2057	16,123	16,123	1,159,831	7193.7%	7193.7%
2058	11,857	11,857	924,201	7794.4%	7794.4%
2059	8,684	8,684	731,301	8421.5%	8421.5%
2060	6,291	6,291	572,226	9095.3%	9095.3%
2061	4,490	4,490	441,737	9839.3%	9839.3%
2062	3,165	3,165	336,942	10644.9%	10644.9%
2063	2,251	2,251	259,665	11537.9%	11537.9%
2064	1,608	1,608	199,641	12411.9%	12411.9%
2065	1,141	1,141	151,629	13290.1%	13290.1%
2066	799	799	112,951	14136.2%	14136.2%
2067	548	548	83,005	15138.3%	15138.3%
2068	381	381	61,180	16051.5%	16051.5%
2069	247	247	44,425	17966.6%	17966.6%
2070	71	71	31,293	44380.5%	44380.5%
2071	0	0	0	815.3%	815.3%
2072	0	0	0	0.0%	0.0%
	Earned Premium w/o Increase	Earned Premium With Increase	Incurred Claims	Loss Ratio w/o Increase	Loss Ratio With Increase
Past Experience @ 4.5%	593,825,118	593,825,118	291,912,332	49.2%	49.2%
Anticipated Experience @ 4.5%	180,832,255	180,832,255	432,605,951	239.2%	239.2%
Lifetime Experience @ 4.5%	774,657,373	774,657,373	724,518,284	93.5%	93.5%

Lifetime Experience (Nationwide) as of 12/31/2015
Premiums at the Virginia Rate Level
Lifetime Benefit Period

	Virginia Rate Level	Incurred Claims Discounted to			
Year	Earned Premium	Incurred Year	Loss Ratio		
1997	379,977	0	0.0%		
1998	2,595,131	229,543	8.8%		
1999	5,659,399	581,891	10.3%		
2000	11,774,776	1,523,173	12.9%		
2001	20,610,805	4,551,607	22.1%		
2002	30,785,341	5,617,745	18.2%		
2003	41,521,354	9,635,360	23.2%		
2004	42,601,415	12,941,883	30.4%		
2005	42,549,495	16,303,181	38.3%		
2006	41,569,288	15,783,105	38.0%		
2007	44,976,068	24,241,187	53.9%		
2008	49,857,760	31,577,857	63.3%		
2009	48,399,533	30,796,165	63.6%		
2010	46,866,733	44,773,405	95.5%		
2011	43,538,030	48,712,575	111.9%		
2012	38,101,336	48,591,805	127.5%		
2013	41,306,990	53,115,932	128.6%		
2014	48,246,068	44,580,315	92.4%		
2015	46,322,678	46,719,580	100.9%		
Total	647,662,177	440,276,310	68.0%		
Interest Adjusted	911,011,570	559,489,310	61.4%		
	Earned Premium w/o Increase	Earned Premium w/Increase	Incurred Claims	Loss Ratio w/o Increase	Loss Ratio w/Increase
2016	43,206,637	44,282,482	46,542,027	107.7%	105.1%
2017	40,188,072	52,894,937	49,814,683	124.0%	94.2%
2018	37,299,521	55,762,784	53,135,001	142.5%	95.3%
2019	34,526,607	51,617,277	57,750,170	167.3%	111.9%
2020	31,866,070	47,639,775	62,985,307	197.7%	132.2%
2021	29,293,471	43,793,740	66,874,812	228.3%	152.7%
2022	26,825,185	40,103,652	71,471,875	266.4%	178.2%
2023	24,446,749	36,547,890	72,896,509	298.2%	199.5%
2024	22,223,997	33,224,875	73,233,904	329.5%	220.4%
2025	20,105,581	30,057,843	76,578,412	380.9%	254.8%
2026	18,032,010	26,957,854	79,938,206	443.3%	296.5%
2027	16,233,255	24,268,716	83,047,539	511.6%	342.2%
2028	14,586,490	21,806,803	85,694,506	587.5%	393.0%
2029	13,063,668	19,530,183	88,166,915	674.9%	451.4%
2030	11,655,190	17,424,509	90,658,831	777.8%	520.3%
2031	10,351,663	15,475,736	92,311,495	891.8%	596.5%
2032	9,155,261	13,687,115	93,838,196	1025.0%	685.6%
2033	8,054,603	12,041,632	93,478,256	1160.6%	776.3%
2034	7,058,608	10,552,619	91,921,902	1302.3%	871.1%
2035	6,163,435	9,214,335	91,547,916	1485.3%	993.5%
2036	5,352,681	8,002,258	90,725,223	1694.9%	1133.7%
2037	4,623,678	6,912,399	89,317,653	1931.7%	1292.1%
2038	3,973,517	5,940,408	87,103,866	2192.1%	1466.3%
2039	3,398,539	5,080,815	83,847,665	2467.2%	1650.3%
2040	2,892,921	4,324,916	79,987,551	2764.9%	1849.5%
2041	2,448,154	3,659,990	75,703,518	3092.3%	2068.4%
2042	2,059,284	3,078,629	71,399,133	3467.2%	2319.2%
2043	1,719,927	2,571,291	66,492,647	3866.0%	2586.0%
2044	1,427,455	2,134,046	60,717,225	4253.5%	2845.2%
2045	1,181,789	1,766,775	55,196,115	4670.6%	3124.1%
2046	972,462	1,453,830	49,853,033	5126.5%	3429.1%
2047	795,190	1,188,809	44,865,624	5642.1%	3774.0%
2048	646,844	967,031	40,106,961	6200.4%	4147.4%
2049	523,164	782,130	35,461,618	6778.3%	4534.0%
2050	421,271	629,800	31,043,249	7368.9%	4929.1%
2051	337,090	503,950	26,954,983	7996.4%	5348.7%
2052	267,497	399,907	23,414,729	8753.3%	5855.0%
2053	210,809	315,159	20,208,921	9586.4%	6412.3%
2054	164,479	245,895	17,098,831	10395.8%	6953.7%
2055	127,992	191,349	14,326,715	11193.4%	7487.2%
2056	99,043	148,069	11,845,027	11959.5%	7999.7%
2057	75,883	113,445	9,802,489	12917.9%	8640.8%
2058	57,766	86,360	8,101,285	14024.3%	9380.8%
2059	43,930	65,675	6,602,954	15030.7%	10054.0%
2060	33,084	49,461	5,270,351	15930.1%	10655.6%
2061	24,830	37,120	4,103,170	16525.4%	11053.8%
2062	18,377	27,473	3,214,362	17491.5%	11700.0%
2063	13,598	20,329	2,548,136	18738.7%	12534.3%
2064	10,004	14,956	2,002,407	20016.1%	13388.7%
2065	7,300	10,913	1,540,552	21104.7%	14116.9%
2066	5,276	7,888	1,134,976	21510.2%	14388.1%
2067	3,734	5,582	840,998	22522.0%	15064.9%
2068	2,585	3,864	633,417	24506.3%	16392.2%
2069	1,533	2,292	476,854	31101.2%	20803.5%
2070	762	1,139	344,177	45191.5%	30228.4%
2071	13	20	606	4631.5%	3098.0%
2072	0	0	0	0.0%	0.0%
	Earned Premium w/o Increase	Earned Premium With Increase	Incurred Claims	Loss Ratio w/o Increase	Loss Ratio With Increase
Past Experience @ 4.5%	911,011,570	911,011,570	559,489,310	61.4%	61.4%
Anticipated Experience @ 4.5%	324,519,735	459,139,573	1,270,387,087	391.5%	276.7%
Lifetime Experience @ 4.5%	1,235,531,305	1,370,151,143	1,829,876,396	148.1%	133.6%

Lifetime Experience (Nationwide) as of 12/31/2015
Premiums at the Virginia Rate Level
All Benefit Periods

	Virginia Rate Level	Incurred Claims			
Year	Earned Premium	Discounted to Incurred Year	Loss Ratio		
1997	873,120	0	0.0%		
1998	5,474,434	336,880	6.2%		
1999	10,823,775	1,202,294	11.1%		
2000	20,313,452	2,802,076	13.8%		
2001	33,907,403	6,977,623	20.6%		
2002	50,628,324	10,227,262	20.2%		
2003	68,642,198	13,295,591	19.4%		
2004	70,823,592	18,922,280	26.7%		
2005	70,785,801	24,999,018	35.3%		
2006	68,824,108	25,171,637	36.6%		
2007	73,726,000	36,266,963	49.2%		
2008	80,834,773	45,281,538	56.0%		
2009	77,932,158	47,284,830	60.7%		
2010	74,955,670	63,418,150	84.6%		
2011	70,198,015	70,014,485	99.7%		
2012	64,563,479	75,308,534	116.6%		
2013	70,266,095	78,660,097	111.9%		
2014	78,098,835	71,270,322	91.3%		
2015	75,826,179	80,154,902	105.7%		
Total	1,067,497,414	671,594,482	62.9%		
Interest Adjusted	1,504,836,688	851,401,642	56.6%		
	Earned Premium w/o Increase	Earned Premium w/Increase	Incurred Claims	Loss Ratio w/o Increase	Loss Ratio w/Increase
2016	70,145,823	71,221,668	71,314,959	101.7%	100.1%
2017	64,748,266	77,455,131	75,446,809	116.5%	97.4%
2018	59,661,825	78,125,088	79,545,285	133.3%	101.8%
2019	54,837,612	71,928,283	85,326,909	155.6%	118.6%
2020	50,271,311	66,045,016	91,681,912	182.4%	138.8%
2021	45,901,687	60,401,956	96,202,108	209.6%	159.3%
2022	41,750,077	55,028,544	101,939,871	244.2%	185.2%
2023	37,789,624	49,890,765	102,810,308	272.1%	206.1%
2024	34,115,285	45,116,163	102,433,622	300.3%	227.0%
2025	30,669,623	40,621,886	105,924,022	345.4%	260.8%
2026	27,377,732	36,303,577	109,452,847	399.8%	301.5%
2027	24,466,014	32,501,475	112,644,668	460.4%	346.6%
2028	21,808,223	29,028,536	115,173,002	528.1%	396.8%
2029	19,372,413	25,838,929	117,374,275	605.9%	454.3%
2030	17,143,695	22,913,014	119,430,411	696.6%	521.2%
2031	15,105,352	20,229,425	120,563,307	798.1%	596.0%
2032	13,254,479	17,786,333	121,535,333	916.9%	683.3%
2033	11,571,750	15,558,779	120,036,131	1037.3%	771.5%
2034	10,064,047	13,558,058	117,138,839	1163.9%	864.0%
2035	8,719,260	11,770,160	115,688,517	1326.8%	982.9%
2036	7,514,688	10,164,265	113,743,738	1513.6%	1119.1%
2037	6,443,251	8,731,972	111,173,586	1725.4%	1273.2%
2038	5,496,820	7,463,710	107,709,415	1959.5%	1443.1%
2039	4,667,006	6,349,282	103,047,501	2208.0%	1623.0%
2040	3,943,478	5,375,474	97,653,829	2476.3%	1816.7%
2041	3,313,064	4,524,900	91,875,844	2773.1%	2030.5%
2042	2,767,306	3,786,651	86,094,192	3111.1%	2273.6%
2043	2,295,806	3,147,170	79,728,401	3472.8%	2533.3%
2044	1,893,003	2,599,594	72,446,835	3827.1%	2786.9%
2045	1,555,955	2,140,941	65,497,585	4209.5%	3059.3%
2046	1,271,156	1,752,525	58,821,426	4627.4%	3356.4%
2047	1,032,348	1,425,968	52,633,223	5098.4%	3691.1%
2048	834,082	1,154,270	46,790,089	5609.8%	4053.7%
2049	670,027	928,993	41,152,322	6141.9%	4429.8%
2050	535,613	744,143	35,832,291	6690.0%	4815.2%
2051	425,404	592,264	30,962,807	7278.4%	5227.9%
2052	335,251	467,662	26,742,002	7976.7%	5718.2%
2053	262,547	366,897	22,960,029	8745.1%	6257.9%
2054	203,693	285,110	19,346,599	9497.9%	6785.7%
2055	157,452	220,808	16,143,191	10252.8%	7310.9%
2056	120,921	169,947	13,299,084	10998.2%	7825.4%
2057	92,006	129,568	10,962,320	11914.8%	8460.7%
2058	69,623	98,218	9,025,487	12963.3%	9189.3%
2059	52,613	74,359	7,334,255	13939.9%	9863.3%
2060	39,376	55,752	5,842,577	14838.0%	10479.5%
2061	29,319	41,610	4,544,907	15501.5%	10922.7%
2062	21,542	30,638	3,551,304	16485.5%	11591.0%
2063	15,849	22,580	2,807,802	17716.2%	12435.0%
2064	11,612	16,564	2,202,048	18962.8%	13293.8%
2065	8,440	12,054	1,692,181	20048.4%	14038.6%
2066	6,075	8,687	1,247,926	20540.4%	14364.9%
2067	4,282	6,131	924,003	21576.6%	15071.5%
2068	2,966	4,245	694,597	23419.8%	16361.6%
2069	1,780	2,539	521,279	29277.1%	20527.2%
2070	832	1,209	375,470	45122.8%	31053.7%
2071	13	20	606	4627.6%	3096.4%
2072	0	0	0	0.0%	0.0%
	Earned Premium w/o Increase	Earned Premium With Increase	Incurred Claims	Loss Ratio w/o Increase	Loss Ratio With Increase
Past Experience @ 4.5%	1,504,836,688	1,504,836,688	851,401,642	56.6%	56.6%
Anticipated Experience @ 4.5%	505,351,990	639,971,828	1,702,993,038	337.0%	266.1%
Lifetime Experience @ 4.5%	2,010,188,678	2,144,808,516	2,554,394,680	127.1%	119.1%

Lifetime Experience (Virginia) as of 12/31/2015

Non-Lifetime Benefit Periods - Pre-Rate Stabilization

	Incurred Claims					
Year	Earned Premium	Discounted to Incurred Year		Loss Ratio		
1997	37,587	0		0.0%		
1998	180,339	0		0.0%		
1999	279,228	41		0.0%		
2000	406,624	936		0.2%		
2001	580,511	194,548		33.5%		
2002	760,855	4,281		0.6%		
2003	1,038,497	49,059		4.7%		
2004	1,087,665	192,779		17.7%		
2005	1,068,791	142,119		13.3%		
2006	1,046,577	351,099		33.5%		
2007	1,049,204	146,112		13.9%		
2008	1,103,774	780,709		70.7%		
2009	1,050,118	270,454		25.8%		
2010	1,010,921	192,753		19.1%		
2011	963,038	779,372		80.9%		
2012	918,183	1,015,538		110.6%		
2013	1,118,769	526,055		47.0%		
2014	1,242,304	923,082		74.3%		
2015	1,166,483	1,749,194		150.0%		
Total	16,109,468	7,318,130		45.4%		
Interest Adjusted	22,985,099	8,942,172		38.9%		
	Earned Premium w/o Increase	Earned Premium w/Increase	Incurred Claims	Loss Ratio w/o Increase	Loss Ratio w/Increase	
	2016	1,064,111	1,064,111	987,077	92.8%	92.8%
	2017	969,068	969,068	1,024,138	105.7%	105.7%
	2018	881,161	881,161	1,058,453	120.1%	120.1%
	2019	799,071	799,071	1,108,815	138.8%	138.8%
	2020	722,743	722,743	1,158,974	160.4%	160.4%
	2021	650,761	650,761	1,183,968	181.9%	181.9%
	2022	583,420	583,420	1,232,817	211.3%	211.3%
	2023	520,201	520,201	1,212,079	233.0%	233.0%
	2024	462,329	462,329	1,185,924	256.5%	256.5%
	2025	409,574	409,574	1,193,677	291.4%	291.4%
	2026	361,258	361,258	1,202,021	332.7%	332.7%
	2027	317,236	317,236	1,206,575	380.3%	380.3%
	2028	277,362	277,362	1,202,772	433.6%	433.6%
	2029	241,467	241,467	1,192,454	493.8%	493.8%
	2030	209,326	209,326	1,176,091	561.8%	561.8%
	2031	180,628	180,628	1,154,728	639.3%	639.3%
	2032	155,169	155,169	1,132,536	729.9%	729.9%
	2033	132,615	132,615	1,086,495	819.3%	819.3%
	2034	112,873	112,873	1,032,660	914.9%	914.9%
	2035	95,601	95,601	989,135	1034.6%	1034.6%
	2036	80,541	80,541	943,613	1171.6%	1171.6%
	2037	67,506	67,506	896,177	1327.5%	1327.5%
	2038	56,282	56,282	844,798	1501.0%	1501.0%
	2039	46,672	46,672	786,885	1686.0%	1686.0%
	2040	38,494	38,494	724,065	1881.0%	1881.0%
	2041	31,559	31,559	662,663	2099.8%	2099.8%
	2042	25,727	25,727	601,877	2339.5%	2339.5%
	2043	20,839	20,839	541,970	2600.7%	2600.7%
	2044	16,779	16,779	480,305	2862.5%	2862.5%
	2045	13,432	13,432	421,749	3139.9%	3139.9%
	2046	10,681	10,681	367,224	3438.0%	3438.0%
	2047	8,449	8,449	318,126	3765.1%	3765.1%
	2048	6,647	6,647	273,794	4119.1%	4119.1%
	2049	5,195	5,195	233,165	4488.0%	4488.0%
	2050	4,031	4,031	196,320	4870.4%	4870.4%
	2051	3,103	3,103	164,392	5298.3%	5298.3%
	2052	2,373	2,373	136,573	5756.2%	5756.2%
	2053	1,806	1,806	113,019	6258.5%	6258.5%
	2054	1,364	1,364	92,440	6775.9%	6775.9%
	2055	1,021	1,021	74,734	7317.4%	7317.4%
	2056	756	756	59,899	7922.7%	7922.7%
	2057	555	555	47,854	8618.3%	8618.3%
	2058	407	407	38,180	9386.6%	9386.6%
	2059	297	297	30,230	10191.5%	10191.5%
	2060	214	214	23,666	11063.4%	11063.4%
	2061	152	152	18,273	12029.8%	12029.8%
	2062	107	107	13,955	13088.0%	13088.0%
	2063	75	75	10,762	14260.2%	14260.2%
	2064	54	54	8,270	15404.2%	15404.2%
	2065	38	38	6,272	16541.9%	16541.9%
	2066	26	26	4,661	17617.9%	17617.9%
	2067	18	18	3,421	18904.7%	18904.7%
	2068	13	13	2,517	20075.1%	20075.1%
	2069	8	8	1,821	22427.2%	22427.2%
	2070	2	2	1,278	54315.3%	54315.3%
	2071	0	0	0	800.5%	800.5%
2072	0	0	0	0.0%	0.0%	
	Earned Premium w/o Increase	Earned Premium With Increase	Incurred Claims	Loss Ratio w/o Increase	Loss Ratio With Increase	
	Past Experience @ 4.5%	22,985,099	22,985,099	8,942,172	38.9%	38.9%
	Anticipated Experience @ 4.5%	7,220,132	7,220,132	17,948,950	248.6%	248.6%
	Lifetime Experience @ 4.5%	30,205,231	30,205,231	26,891,122	89.0%	89.0%

Lifetime Experience (Virginia) as of 12/31/2015

Lifetime Benefit Period - Pre-Rate Stabilization

	Incurred Claims Discounted to					
Year	Earned Premium	Incurred Year		Loss Ratio		
1997	21,765		0	0.0%		
1998	118,168		5	0.0%		
1999	224,159		0	0.0%		
2000	414,433		0	0.0%		
2001	697,254	117,081		16.8%		
2002	1,053,602	1,314		0.1%		
2003	1,493,360	19,378		1.3%		
2004	1,571,671	1,207,158		76.8%		
2005	1,536,344	305,812		19.9%		
2006	1,520,199	41,737		2.7%		
2007	1,564,102	2,174,457		139.0%		
2008	1,673,166	939,418		56.1%		
2009	1,634,113	38,019		2.3%		
2010	1,616,030	1,783,192		110.3%		
2011	1,600,723	705,090		44.0%		
2012	1,561,742	218,406		14.0%		
2013	1,447,773	1,587,711		109.7%		
2014	1,478,052	804,249		54.4%		
2015	1,485,533	1,653,304		111.3%		
Total	22,712,188	11,596,331		51.1%		
Interest Adjusted	32,083,614	15,035,343		46.9%		
	Earned Premium	Earned Premium		Loss Ratio	Loss Ratio	
	w/o Increase	w/Increase	Incurred Claims	w/o Increase	w/Increase	
	2016	1,385,845	1,420,353	1,487,356	107.3%	104.7%
	2017	1,289,264	1,696,910	1,589,499	123.3%	93.7%
	2018	1,196,795	1,789,208	1,692,601	141.4%	94.6%
	2019	1,107,971	1,656,416	1,836,246	165.7%	110.9%
	2020	1,022,730	1,528,981	1,999,011	195.5%	130.7%
	2021	940,313	1,405,768	2,116,550	225.1%	150.6%
	2022	861,264	1,287,589	2,257,505	262.1%	175.3%
	2023	785,133	1,173,774	2,297,224	292.6%	195.7%
	2024	713,910	1,067,296	2,307,650	323.2%	216.2%
	2025	645,961	965,712	2,409,027	372.9%	249.5%
	2026	579,482	866,325	2,510,607	433.3%	289.8%
	2027	521,738	779,999	2,604,122	499.1%	333.9%
	2028	468,808	700,867	2,682,923	572.3%	382.8%
	2029	419,833	627,651	2,756,670	656.6%	439.2%
	2030	374,540	559,937	2,831,613	756.0%	505.7%
	2031	332,602	497,240	2,878,718	865.5%	578.9%
	2032	294,120	439,709	2,923,123	993.9%	664.8%
	2033	258,736	386,810	2,906,968	1123.5%	751.5%
	2034	226,718	338,944	2,856,912	1260.1%	842.9%
	2035	197,920	295,890	2,842,748	1436.3%	960.7%
	2036	171,843	256,906	2,814,812	1638.0%	1095.7%
	2037	148,402	221,862	2,768,683	1865.7%	1247.9%
	2038	127,498	190,609	2,697,657	2115.9%	1415.3%
	2039	109,010	162,970	2,595,047	2380.6%	1592.3%
	2040	92,759	138,674	2,474,448	2667.6%	1784.4%
	2041	78,468	117,310	2,340,472	2982.7%	1995.1%
	2042	65,980	98,641	2,206,864	3344.7%	2237.3%
	2043	55,087	82,356	2,053,103	3727.0%	2493.0%
	2044	45,710	68,337	1,874,347	4100.5%	2742.8%
	2045	37,828	56,552	1,703,437	4503.2%	3012.1%
	2046	31,118	46,522	1,538,165	4943.0%	3306.3%
	2047	25,443	38,037	1,383,852	5439.1%	3638.2%
	2048	20,691	30,933	1,236,532	5976.2%	3997.4%
	2049	16,730	25,012	1,092,850	6532.2%	4369.4%
	2050	13,466	20,131	956,431	7102.8%	4751.0%
	2051	10,773	16,106	830,235	7706.5%	5154.8%
	2052	8,551	12,784	721,382	8436.3%	5643.0%
	2053	6,740	10,076	622,015	9228.8%	6173.1%
	2054	5,261	7,865	526,036	9999.3%	6688.5%
	2055	4,095	6,121	440,633	10761.6%	7198.4%
2056	3,171	4,741	364,272	11486.1%	7683.0%	
2057	2,434	3,638	301,435	12385.7%	8284.8%	
2058	1,855	2,773	249,053	13425.5%	8980.3%	
2059	1,412	2,111	202,844	14365.5%	9609.0%	
2060	1,063	1,590	161,808	15214.9%	10177.2%	
2061	799	1,194	125,921	15765.2%	10545.3%	
2062	591	884	98,685	16690.9%	11164.5%	
2063	437	653	78,081	17866.8%	11951.0%	
2064	322	481	61,289	19055.6%	12746.2%	
2065	234	350	47,066	20083.7%	13433.9%	
2066	169	253	34,621	20495.5%	13709.4%	
2067	120	180	25,654	21361.2%	14288.5%	
2068	84	125	19,324	23096.9%	15449.4%	
2069	51	76	14,547	28701.3%	19198.2%	
2070	26	39	10,501	39853.5%	26657.8%	
2071	1	2	65	4712.2%	3152.0%	
2072	0	0	0	0.0%	0.0%	
	Earned Premium	Earned Premium		Loss Ratio	Loss Ratio	
	w/o Increase	With Increase	Incurred Claims	w/o Increase	With Increase	
	Past Experience @ 4.5%	32,083,614	32,083,614	15,035,343	46.9%	46.9%
	Anticipated Experience @ 4.5%	10,649,052	15,067,218	40,677,580	382.0%	270.0%
Lifetime Experience @ 4.5%	42,732,666	47,150,832	55,712,923	130.4%	118.2%	

Lifetime Experience (Virginia) as of 12/31/2015

All Benefit Periods - Pre-Rate Stabilization

	Incurred Claims				
Year	Earned Premium	Discounted to Incurred Year		Loss Ratio	
1997	59,351	0		0.0%	
1998	298,507	5		0.0%	
1999	503,387	41		0.0%	
2000	821,057	936		0.1%	
2001	1,277,765	311,629		24.4%	
2002	1,814,457	5,595		0.3%	
2003	2,531,857	68,437		2.7%	
2004	2,659,336	1,399,937		52.6%	
2005	2,605,134	447,931		17.2%	
2006	2,566,776	392,836		15.3%	
2007	2,613,306	2,320,569		88.8%	
2008	2,776,940	1,720,127		61.9%	
2009	2,684,231	308,473		11.5%	
2010	2,626,950	1,975,945		75.2%	
2011	2,563,762	1,484,462		57.9%	
2012	2,479,926	1,233,943		49.8%	
2013	2,566,542	2,113,766		82.4%	
2014	2,720,356	1,727,331		63.5%	
2015	2,652,016	3,402,497		128.3%	
Total	38,821,656	18,914,461		48.7%	
Interest Adjusted	55,068,713	23,977,515		43.5%	
	Earned Premium w/o Increase	Earned Premium w/Increase	Incurred Claims	Loss Ratio w/o Increase	Loss Ratio w/Increase
2016	2,449,956	2,484,464	2,474,433	101.0%	99.6%
2017	2,258,332	2,665,978	2,613,637	115.7%	98.0%
2018	2,077,956	2,670,370	2,751,054	132.4%	103.0%
2019	1,907,042	2,455,487	2,945,061	154.4%	119.9%
2020	1,745,473	2,251,724	3,157,985	180.9%	140.2%
2021	1,591,074	2,056,529	3,300,518	207.4%	160.5%
2022	1,444,683	1,871,009	3,490,322	241.6%	186.5%
2023	1,305,334	1,693,976	3,509,303	268.8%	207.2%
2024	1,176,239	1,529,625	3,493,574	297.0%	228.4%
2025	1,055,535	1,375,286	3,602,704	341.3%	262.0%
2026	940,740	1,227,583	3,712,628	394.6%	302.4%
2027	838,974	1,097,234	3,810,697	454.2%	347.3%
2028	746,169	978,229	3,885,695	520.8%	397.2%
2029	661,300	869,117	3,949,124	597.2%	454.4%
2030	583,866	769,263	4,007,704	686.4%	521.0%
2031	513,230	677,867	4,033,446	785.9%	595.0%
2032	449,289	594,878	4,055,659	902.7%	681.8%
2033	391,351	519,426	3,993,463	1020.4%	768.8%
2034	339,592	451,817	3,889,572	1145.4%	860.9%
2035	293,521	391,491	3,831,883	1305.5%	978.8%
2036	252,385	337,447	3,758,425	1489.2%	1113.8%
2037	215,909	289,368	3,664,859	1697.4%	1266.5%
2038	183,779	246,890	3,542,455	1927.6%	1434.8%
2039	155,682	209,642	3,381,933	2172.3%	1613.2%
2040	131,253	177,168	3,198,513	2436.9%	1805.4%
2041	110,027	148,869	3,003,135	2729.5%	2017.3%
2042	91,707	124,368	2,808,741	3062.7%	2258.4%
2043	75,927	103,195	2,595,073	3417.9%	2514.7%
2044	62,490	85,116	2,354,652	3768.1%	2766.4%
2045	51,260	69,984	2,125,186	4145.9%	3036.7%
2046	41,800	57,203	1,905,388	4558.4%	3330.9%
2047	33,892	46,486	1,701,977	5021.8%	3661.3%
2048	27,338	37,580	1,510,326	5524.6%	4019.0%
2049	21,925	30,207	1,326,014	6047.8%	4389.8%
2050	17,497	24,162	1,152,751	6588.5%	4770.9%
2051	13,876	19,209	994,626	7168.0%	5178.0%
2052	10,924	15,156	857,954	7854.2%	5660.7%
2053	8,546	11,882	735,034	8601.1%	6186.1%
2054	6,625	9,229	618,476	9335.5%	6701.4%
2055	5,116	7,143	515,367	10074.0%	7215.4%
2056	3,927	5,497	424,171	10800.1%	7716.0%
2057	2,989	4,194	349,289	11685.8%	8328.9%
2058	2,262	3,180	287,233	12699.1%	9032.2%
2059	1,709	2,408	233,074	13640.9%	9680.8%
2060	1,277	1,804	185,474	14519.7%	10282.3%
2061	951	1,346	144,194	15168.3%	10712.8%
2062	698	991	112,640	16140.5%	11371.6%
2063	512	729	88,843	17335.7%	12190.1%
2064	375	535	69,559	18533.3%	13013.2%
2065	272	388	53,338	19590.5%	13737.4%
2066	195	279	39,282	20105.8%	14080.0%
2067	138	198	29,076	21039.5%	14711.2%
2068	96	138	21,841	22703.0%	15870.9%
2069	59	84	16,368	27835.1%	19510.7%
2070	29	42	11,779	41038.8%	28216.5%
2071	1	2	65	4710.9%	3151.4%
2072	0	0	0	0.0%	0.0%
	Earned Premium w/o Increase	Earned Premium With Increase	Incurred Claims	Loss Ratio w/o Increase	Loss Ratio With Increase
Past Experience @ 4.5%	55,068,713	55,068,713	23,977,515	43.5%	43.5%
Anticipated Experience @ 4.5%	17,869,184	22,287,350	58,626,530	328.1%	263.0%
Lifetime Experience @ 4.5%	72,937,896	77,356,063	82,604,044	113.3%	106.8%

Lifetime Experience (Virginia) as of 12/31/2015

Non-Lifetime Benefit Periods - Post Stabilization Experience

Year	Non-Interest Adjusted			Interest Adjusted		
	Original Premium	Increased Premium	Incurred Claims	Original Premium	Increased Premium	Incurred Claims
1998	0	0	0	0	0	0
1999	0	0	0	0	0	0
2000	0	0	0	0	0	0
2001	0	0	0	0	0	0
2002	0	0	0	0	0	0
2003	6,600	0	0	11,443	0	0
2004	150,611	0	0	249,858	0	0
2005	210,753	0	0	334,577	0	0
2006	209,524	0	0	318,301	0	0
2007	187,849	21,236	0	273,085	30,872	0
2008	168,069	48,740	0	233,809	67,805	0
2009	160,636	46,584	1,449	213,845	62,015	1,929
2010	156,124	45,276	146,708	198,888	57,678	186,893
2011	152,969	44,361	60,879	186,478	54,079	74,215
2012	150,090	43,526	8,029	175,089	50,776	9,366
2013	152,959	72,934	51,166	170,752	81,418	57,118
2014	152,921	90,557	151,944	163,359	96,737	162,314
2015	153,402	93,801	60,936	156,816	95,888	62,292
Total	2,012,510	507,016	481,110	2,686,300	597,267	554,127
2016	140,356	85,823	192,936	137,301	83,955	188,737
2017	128,198	78,389	200,424	120,007	73,380	187,618
2018	116,935	71,502	207,346	104,750	64,051	185,740
2019	106,401	65,061	218,398	91,210	55,772	187,216
2020	96,588	59,061	229,906	79,232	48,448	188,594
2021	87,311	53,388	237,095	68,537	41,908	186,115
2022	78,599	48,061	249,058	59,042	36,102	187,088
2023	70,384	43,037	244,734	50,594	30,937	175,923
2024	62,841	38,425	239,378	43,227	26,432	164,663
2025	55,936	34,203	242,935	36,820	22,514	159,914
2026	49,582	30,318	246,726	31,232	19,097	155,415
2027	43,760	26,758	249,579	26,378	16,129	150,442
2028	38,459	23,516	250,482	22,184	13,565	144,485
2029	33,659	20,582	250,080	18,580	11,361	138,041
2030	29,337	17,938	248,329	15,496	9,475	131,172
2031	25,454	15,564	245,640	12,866	7,867	124,164
2032	21,985	13,443	242,443	10,634	6,502	117,271
2033	18,889	11,550	233,397	8,743	5,346	108,034
2034	16,163	9,883	222,239	7,159	4,378	98,440
2035	13,765	8,417	213,583	5,835	3,568	90,531
2036	11,661	7,130	204,418	4,730	2,892	82,915
2037	9,828	6,010	194,773	3,815	2,333	75,601
2038	8,239	5,038	184,272	3,060	1,871	68,445
2039	6,870	4,201	172,256	2,442	1,493	61,227
2040	5,699	3,485	158,972	1,938	1,185	54,072
2041	4,700	2,874	146,040	1,530	935	47,534
2042	3,853	2,356	133,206	1,200	734	41,490
2043	3,139	1,919	120,405	936	572	35,888
2044	2,542	1,554	107,020	725	443	30,525
2045	2,047	1,252	94,292	559	342	25,736
2046	1,638	1,002	82,383	428	262	21,517
2047	1,304	797	71,623	326	199	17,902
2048	1,032	631	61,866	247	151	14,797
2049	812	497	52,886	186	114	12,104
2050	635	388	44,674	139	85	9,785
2051	492	301	37,531	103	63	7,866
2052	380	232	31,274	76	47	6,272
2053	291	178	25,946	56	34	4,980
2054	222	136	21,265	41	25	3,906
2055	168	103	17,243	30	18	3,031
2056	126	77	13,843	21	13	2,328
2057	93	57	11,069	15	9	1,782
2058	69	42	8,841	11	7	1,362
2059	51	31	7,010	8	5	1,033
2060	37	23	5,495	5	3	775
2061	27	17	4,248	4	2	573
2062	19	12	3,243	2	2	419
2063	14	8	2,501	2	1	309
2064	10	6	1,924	1	1	228
2065	7	4	1,462	1	0	165
2066	5	3	1,090	1	0	118
2067	3	2	801	0	0	83
2068	2	1	591	0	0	59
2069	2	1	430	0	0	41
2070	0	0	303	0	0	28
2071	0	0	0	0	0	0
2072	0	0	0	0	0	0
Total	1,300,621	795,288	6,689,907	972,464	594,631	3,704,497
Grand Total	3,313,131	1,302,304	7,171,017	3,658,764	1,191,898	4,258,624

Minimum Required Loss Ratios	58%	85%	
Minimum PV Incurred Claims	2,122,083	1,013,113	3,135,196
Dual Loss Ratio Test Met	4,258,624	>	3,135,196

Lifetime Experience (Virginia) as of 12/31/2015

Lifetime Benefit Period - Post Stabilization Experience

Non-Interest Adjusted				Interest Adjusted		
Year	Original Premium	Increased Premium	Incurred Claims	Original Premium	Increased Premium	Incurred Claims
1998	0	0	0	0	0	0
1999	0	0	0	0	0	0
2000	0	0	0	0	0	0
2001	0	0	0	0	0	0
2002	0	0	0	0	0	0
2003	7,900	0	0	13,696	0	0
2004	146,350	0	0	242,789	0	0
2005	185,588	0	0	294,626	0	0
2006	184,680	0	0	280,560	0	0
2007	173,037	21,890	0	251,552	31,822	0
2008	165,980	47,698	0	230,902	66,355	0
2009	162,659	47,171	0	216,538	62,796	0
2010	160,214	46,462	0	204,098	59,189	0
2011	160,530	46,554	0	195,695	56,751	0
2012	161,168	46,739	167	188,012	54,523	194
2013	129,333	70,177	57,062	144,378	78,341	63,699
2014	102,721	94,412	50,858	109,732	100,856	54,329
2015	100,085	101,326	162,435	102,312	103,581	166,049
Total	1,840,245	522,429	270,521	2,474,889	614,214	284,273
2016	93,416	99,255	196,064	91,382	97,094	191,796
2017	86,953	143,359	210,481	81,397	134,199	197,033
2018	80,769	162,228	225,194	72,353	145,323	201,728
2019	74,833	150,306	246,407	64,149	128,845	211,225
2020	69,134	138,858	270,669	56,711	113,906	222,032
2021	63,614	127,772	288,649	49,936	100,299	226,585
2022	58,312	117,122	310,126	43,803	87,979	232,960
2023	53,192	106,838	316,640	38,236	76,799	227,611
2024	48,407	97,228	317,925	33,298	66,881	218,694
2025	43,849	88,072	334,142	28,864	57,974	219,951
2026	39,383	79,103	350,443	24,808	49,828	220,748
2027	35,503	71,310	365,532	21,401	42,984	220,338
2028	31,950	64,173	378,496	18,430	37,017	218,327
2029	28,663	57,570	390,951	15,822	31,778	215,801
2030	25,615	51,448	403,621	13,530	27,176	213,200
2031	22,789	45,772	412,310	11,519	23,136	208,411
2032	20,190	40,553	420,449	9,766	19,616	203,374
2033	17,796	35,745	419,704	8,238	16,545	194,271
2034	15,628	31,389	413,118	6,922	13,903	182,988
2035	13,678	27,472	412,464	5,798	11,645	174,831
2036	11,906	23,914	409,794	4,829	9,700	166,219
2037	10,311	20,711	404,432	4,002	8,039	156,980
2038	8,888	17,852	395,355	3,301	6,631	146,849
2039	7,628	15,322	381,571	2,711	5,446	135,626
2040	6,517	13,089	365,000	2,217	4,452	124,149
2041	5,534	11,115	346,384	1,801	3,618	112,744
2042	4,673	9,385	327,596	1,455	2,923	102,037
2043	3,919	7,872	305,962	1,168	2,346	91,195
2044	3,268	6,564	279,897	932	1,872	79,833
2045	2,720	5,462	254,992	742	1,491	69,598
2046	2,248	4,515	230,813	587	1,179	60,286
2047	1,848	3,711	208,159	462	928	52,027
2048	1,512	3,036	186,459	362	726	44,597
2049	1,231	2,472	165,195	282	566	37,809
2050	998	2,005	144,888	219	439	31,734
2051	804	1,615	126,076	169	338	26,424
2052	642	1,290	109,741	129	259	22,010
2053	510	1,024	94,958	98	197	18,225
2054	401	806	80,605	74	148	14,804
2055	315	632	67,659	55	111	11,891
2056	245	492	56,081	41	83	9,432
2057	189	379	46,505	30	61	7,485
2058	144	290	38,501	22	45	5,930
2059	110	222	31,445	16	33	4,634
2060	84	168	25,151	12	24	3,547
2061	63	126	19,608	8	17	2,646
2062	47	94	15,372	6	12	1,985
2063	35	70	12,205	4	9	1,508
2064	26	51	9,604	3	6	1,136
2065	19	38	7,398	2	4	837
2066	14	27	5,460	1	3	591
2067	10	19	4,048	1	2	419
2068	7	13	3,050	1	1	302
2069	4	8	2,297	0	1	218
2070	2	4	1,658	0	0	151
2071	0	0	0	0	0	0
2072	0	0	0	0	0	0
Total	1,000,542	1,889,963	11,847,302	722,106	1,334,637	5,747,764
Grand Total	2,840,787	2,412,392	12,117,823	3,196,996	1,948,852	6,032,037

Minimum Required Loss Ratios	58%	85%
Minimum PV Incurred Claims	1,854,258	1,656,524
Dual Loss Ratio Test Met	6,032,037	>
		3,510,781

Lifetime Experience (Virginia) as of 12/31/2015

All Benefit Periods Combined - Post Stabilization Experience

Year	Non-Interest Adjusted			Interest Adjusted		
	Original Premium	Increased Premium	Incurred Claims	Original Premium	Increased Premium	Incurred Claims
1998	0	0	0	0	0	0
1999	0	0	0	0	0	0
2000	0	0	0	0	0	0
2001	0	0	0	0	0	0
2002	0	0	0	0	0	0
2003	14,501	0	0	25,139	0	0
2004	296,960	0	0	492,647	0	0
2005	396,342	0	0	629,203	0	0
2006	394,204	0	0	598,861	0	0
2007	360,886	43,126	0	524,637	62,694	0
2008	334,049	96,438	0	464,711	134,160	0
2009	323,295	93,755	1,449	430,382	124,811	1,929
2010	316,338	91,738	146,708	402,987	116,866	186,893
2011	313,499	90,915	60,879	382,173	110,830	74,215
2012	311,258	90,265	8,195	363,101	105,299	9,560
2013	282,292	143,112	108,228	315,130	159,759	120,818
2014	255,642	184,969	202,802	273,091	197,593	216,644
2015	253,487	195,127	223,371	259,128	199,469	228,341
Total	3,852,754	1,029,444	751,632	5,161,189	1,211,482	838,400
2016	233,772	185,078	389,000	228,683	181,049	380,532
2017	215,151	221,747	410,905	201,404	207,579	384,651
2018	197,704	233,730	432,540	177,103	209,375	387,468
2019	181,235	215,367	464,805	155,358	184,617	398,441
2020	165,722	197,919	500,575	135,943	162,354	410,625
2021	150,925	181,159	525,744	118,474	142,207	412,700
2022	136,910	165,182	559,184	102,844	124,081	420,048
2023	123,576	149,875	561,374	88,830	107,735	403,534
2024	111,249	135,654	557,303	76,526	93,313	383,357
2025	99,785	122,275	577,077	65,684	80,488	379,865
2026	88,965	109,420	597,169	56,040	68,925	376,163
2027	79,264	98,068	615,111	47,779	59,114	370,780
2028	70,409	87,689	628,978	40,614	50,582	362,812
2029	62,322	78,152	641,031	34,401	43,139	353,842
2030	54,951	69,387	651,950	29,026	36,651	344,372
2031	48,242	61,336	657,951	24,385	31,003	332,576
2032	42,175	53,995	662,892	20,400	26,118	320,645
2033	36,685	47,295	653,101	16,981	21,892	302,305
2034	31,791	41,272	635,357	14,082	18,281	281,427
2035	27,443	35,889	626,047	11,632	15,212	265,362
2036	23,567	31,044	614,212	9,559	12,592	249,135
2037	20,139	26,720	599,205	7,817	10,371	232,582
2038	17,127	22,890	579,626	6,362	8,502	215,294
2039	14,499	19,523	553,828	5,154	6,939	196,853
2040	12,215	16,574	523,972	4,155	5,637	178,221
2041	10,234	13,989	492,424	3,331	4,553	160,278
2042	8,526	11,741	460,802	2,656	3,657	143,527
2043	7,058	9,791	426,368	2,104	2,918	127,083
2044	5,810	8,118	386,917	1,657	2,316	110,358
2045	4,766	6,714	349,284	1,301	1,832	95,334
2046	3,886	5,517	313,196	1,015	1,441	81,803
2047	3,151	4,508	279,782	788	1,127	69,929
2048	2,544	3,668	248,324	608	877	59,394
2049	2,043	2,969	218,080	468	680	49,914
2050	1,633	2,393	189,562	358	524	41,518
2051	1,296	1,916	163,607	272	402	34,290
2052	1,022	1,522	141,015	205	305	28,283
2053	801	1,203	120,904	154	231	23,205
2054	623	941	101,870	114	173	18,710
2055	483	735	84,901	85	129	14,922
2056	371	569	69,924	62	96	11,760
2057	282	436	57,575	45	70	9,266
2058	214	332	47,342	33	51	7,291
2059	162	253	38,456	24	37	5,668
2060	121	191	30,646	17	27	4,322
2061	90	143	23,856	12	19	3,220
2062	66	106	18,615	9	14	2,404
2063	49	78	14,706	6	10	1,818
2064	36	57	11,528	4	7	1,363
2065	26	42	8,860	3	5	1,003
2066	19	30	6,550	2	3	709
2067	13	21	4,849	1	2	503
2068	9	15	3,641	1	1	361
2069	5	9	2,727	1	1	259
2070	2	4	1,961	0	0	178
2071	0	0	0	0	0	0
2072	0	0	0	0	0	0
Total	2,301,163	2,685,251	18,537,209	1,694,570	1,929,268	9,452,261
Grand Total	6,153,917	3,714,696	19,288,841	6,855,759	3,140,749	10,290,661

Minimum Required Loss Ratios	58%	85%
Minimum PV Incurred Claims	3,976,340	2,669,637
Dual Loss Ratio Test Met	10,290,661	>

Lifetime Experience (Nationwide) as of 12/31/2015
Premiums at the Virginia Rate Level
Non-Lifetime Benefit Periods - Pre-Rate Stabilization

	Virginia Rate Level	Incurred Claims		
Year	Earned Premium	Discounted to Incurred Year	Loss Ratio	
1997	493,144	0	0.0%	
1998	2,879,303	107,337	3.7%	
1999	5,164,376	620,403	12.0%	
2000	8,538,676	1,278,903	15.0%	
2001	13,291,034	2,426,016	18.3%	
2002	19,718,256	4,609,517	23.4%	
2003	26,161,646	3,660,231	14.0%	
2004	26,346,243	5,771,160	21.9%	
2005	26,128,236	8,629,972	33.0%	
2006	25,202,065	8,852,762	35.1%	
2007	26,556,561	11,678,078	44.0%	
2008	28,547,868	13,273,642	46.5%	
2009	27,170,713	15,834,428	58.3%	
2010	25,819,457	17,309,240	67.0%	
2011	24,490,069	20,679,566	84.4%	
2012	24,453,662	25,437,476	104.0%	
2013	26,798,097	24,172,745	90.2%	
2014	27,611,723	25,362,502	91.9%	
2015	27,318,093	31,732,076	116.2%	
Total	392,689,221	221,436,053	56.4%	
Interest Adjusted	557,716,564	280,029,550	50.2%	
	Earned Premium w/o Increase	Earned Premium w/Increase	Incurred Claims w/o Increase	Loss Ratio w/Increase
2016	24,939,845	24,939,845	23,042,797	92.4%
2017	22,733,868	22,733,868	23,842,093	104.9%
2018	20,695,953	20,695,953	24,566,298	118.7%
2019	18,794,093	18,794,093	25,642,982	136.4%
2020	17,027,360	17,027,360	26,675,538	156.7%
2021	15,361,635	15,361,635	27,247,056	177.4%
2022	13,801,607	13,801,607	28,293,466	205.0%
2023	12,335,805	12,335,805	27,781,552	225.2%
2024	10,991,055	10,991,055	27,120,206	246.7%
2025	9,761,784	9,761,784	27,242,666	279.1%
2026	8,633,695	8,633,695	27,385,713	317.2%
2027	7,603,462	7,603,462	27,449,679	361.0%
2028	6,667,873	6,667,873	27,328,904	409.9%
2029	5,823,265	5,823,265	27,065,806	464.8%
2030	5,064,703	5,064,703	26,651,478	526.2%
2031	4,385,370	4,385,370	26,157,927	596.5%
2032	3,780,549	3,780,549	25,634,893	678.1%
2033	3,242,850	3,242,850	24,576,050	757.9%
2034	2,770,299	2,770,299	23,333,483	842.3%
2035	2,355,212	2,355,212	22,333,529	948.3%
2036	1,991,752	1,991,752	21,291,624	1069.0%
2037	1,675,823	1,675,823	20,212,555	1206.1%
2038	1,402,574	1,402,574	19,052,200	1358.4%
2039	1,167,616	1,167,616	17,748,615	1520.1%
2040	966,759	966,759	16,328,232	1689.0%
2041	795,684	795,684	14,943,853	1878.1%
2042	651,165	651,165	13,575,144	2084.7%
2043	529,486	529,486	12,224,038	2308.7%
2044	427,921	427,921	10,831,020	2531.1%
2045	343,818	343,818	9,510,146	2766.0%
2046	274,375	274,375	8,277,514	3016.9%
2047	217,773	217,773	7,167,373	3291.2%
2048	171,872	171,872	6,165,037	3587.0%
2049	134,758	134,758	5,248,022	3894.4%
2050	104,872	104,872	4,415,371	4210.2%
2051	80,961	80,961	3,694,121	4562.8%
2052	62,082	62,082	3,066,071	4938.7%
2053	47,380	47,380	2,534,544	5349.4%
2054	35,889	35,889	2,070,410	5769.0%
2055	26,942	26,942	1,672,691	6208.4%
2056	19,994	19,994	1,338,703	6695.5%
2057	14,723	14,723	1,067,674	7251.7%
2058	10,818	10,818	850,635	7863.3%
2059	7,915	7,915	672,971	8503.0%
2060	5,728	5,728	526,504	9191.8%
2061	4,083	4,083	406,385	9953.9%
2062	2,875	2,875	309,967	10780.5%
2063	2,042	2,042	238,863	11697.6%
2064	1,458	1,458	183,627	12595.3%
2065	1,033	1,033	139,441	13495.8%
2066	723	723	103,847	14358.3%
2067	496	496	76,306	15380.2%
2068	345	345	56,232	16311.2%
2069	224	224	40,816	18255.0%
2070	64	64	28,740	44989.6%
2071	0	0	0	821.3%
2072	0	0	0	0.0%
	Earned Premium w/o Increase	Earned Premium With Increase	Incurred Claims w/o Increase	Loss Ratio With Increase
Past Experience @ 4.5%	557,716,564	557,716,564	280,029,550	50.2%
Anticipated Experience @ 4.5%	170,945,715	170,945,715	410,190,873	240.0%
Lifetime Experience @ 4.5%	728,662,279	728,662,279	690,220,423	94.7%

Lifetime Experience (Nationwide) as of 12/31/2015
Premiums at the Virginia Rate Level
Lifetime Benefit Period - Pre-Rate Stabilization

	Virginia Rate Level	Incurred Claims Discounted to			
Year	Earned Premium	Incurred Year	Loss Ratio		
1997	379,977	0	0.0%		
1998	2,595,131	229,543	8.8%		
1999	5,659,399	581,891	10.3%		
2000	11,774,776	1,523,173	12.9%		
2001	20,596,912	4,551,607	22.1%		
2002	30,490,543	5,617,258	18.4%		
2003	39,924,279	9,635,360	24.1%		
2004	40,127,736	12,920,670	32.2%		
2005	39,955,932	16,098,603	40.3%		
2006	39,035,372	15,477,471	39.6%		
2007	42,174,929	22,231,209	52.7%		
2008	46,681,645	29,954,511	64.2%		
2009	45,285,665	30,450,991	67.2%		
2010	43,803,230	43,868,860	100.1%		
2011	40,526,545	46,170,034	113.9%		
2012	35,360,950	47,132,966	133.3%		
2013	38,293,528	51,401,267	134.2%		
2014	44,695,854	41,230,896	92.2%		
2015	42,725,487	43,933,424	102.8%		
Total	610,087,891	423,009,733	69.3%		
Interest Adjusted	861,371,678	538,730,399	62.5%		
	Earned Premium w/o Increase	Earned Premium w/Increase	Incurred Claims	Loss Ratio w/o Increase	Loss Ratio w/Increase
2016	39,848,650	40,840,881	42,978,001	107.9%	105.2%
2017	37,061,734	48,780,098	45,998,164	124.1%	94.3%
2018	34,394,764	51,420,172	49,062,570	142.6%	95.4%
2019	31,834,472	47,592,535	53,309,334	167.5%	112.0%
2020	29,377,987	43,920,091	58,126,399	197.9%	132.3%
2021	27,002,784	40,369,162	61,709,992	228.5%	152.9%
2022	24,724,111	36,962,546	65,934,280	266.7%	178.4%
2023	22,528,630	33,680,301	67,248,726	298.5%	199.7%
2024	20,477,134	30,613,316	67,574,974	330.0%	220.7%
2025	18,522,331	27,690,885	70,646,105	381.4%	255.1%
2026	16,609,467	24,831,153	73,731,782	443.9%	296.9%
2027	14,949,848	22,350,022	76,588,568	512.3%	342.7%
2028	13,430,500	20,078,598	79,020,935	588.4%	393.6%
2029	12,025,666	17,978,370	81,288,376	676.0%	452.1%
2030	10,726,651	16,036,343	83,572,109	779.1%	521.1%
2031	9,524,708	14,239,439	85,087,751	893.3%	597.5%
2032	8,421,788	12,590,573	86,482,194	1026.9%	686.9%
2033	7,407,319	11,073,941	86,145,832	1163.0%	777.9%
2034	6,489,541	9,701,863	84,718,932	1305.5%	873.2%
2035	5,664,806	8,468,885	84,367,589	1489.3%	996.2%
2036	4,918,144	7,352,625	83,601,373	1699.9%	1137.0%
2037	4,246,933	6,349,164	82,295,116	1937.8%	1296.2%
2038	3,648,445	5,454,425	80,245,498	2199.4%	1471.2%
2039	3,119,281	4,663,325	77,233,420	2476.0%	1656.2%
2040	2,654,149	3,967,953	73,665,390	2775.5%	1856.5%
2041	2,245,203	3,356,579	69,709,080	3104.8%	2076.8%
2042	1,887,782	2,822,234	65,732,523	3482.0%	2329.1%
2043	1,575,971	2,356,077	61,202,589	3883.5%	2597.6%
2044	1,307,337	1,954,468	55,882,068	4274.5%	2859.2%
2045	1,081,787	1,617,272	50,793,528	4695.3%	3140.7%
2046	889,751	1,330,177	45,869,834	5155.4%	3448.4%
2047	727,187	1,087,145	41,274,540	5675.9%	3796.6%
2048	591,194	883,835	36,890,868	6240.1%	4174.0%
2049	477,856	714,395	32,612,326	6824.7%	4565.0%
2050	384,539	574,886	28,544,536	7423.1%	4965.3%
2051	307,505	459,720	24,781,001	8058.7%	5390.5%
2052	243,864	364,577	21,521,926	8825.4%	5903.3%
2053	192,053	287,119	18,570,333	9669.4%	6467.8%
2054	149,736	223,856	15,707,853	10490.3%	7017.0%
2055	116,434	174,069	13,158,782	11301.5%	7559.5%
2056	90,048	134,621	10,876,699	12078.8%	8079.5%
2057	68,954	103,086	8,999,451	13051.4%	8730.0%
2058	52,461	78,430	7,436,276	14174.8%	9481.4%
2059	39,877	59,616	6,059,439	15195.3%	10164.1%
2060	30,014	44,871	4,835,446	16110.7%	10776.4%
2061	22,518	33,664	3,764,030	16715.7%	11181.1%
2062	16,659	24,906	2,948,529	17699.0%	11838.8%
2063	12,322	18,422	2,336,885	18964.5%	12685.3%
2064	9,063	13,549	1,836,095	20258.9%	13551.1%
2065	6,612	9,884	1,412,327	21361.4%	14288.5%
2066	4,778	7,143	1,040,181	21770.3%	14562.0%
2067	3,381	5,055	770,654	22790.9%	15244.7%
2068	2,341	3,500	580,377	24793.9%	16584.6%
2069	1,389	2,077	436,875	31445.2%	21033.6%
2070	691	1,033	315,307	45627.3%	30519.9%
2071	13	19	602	4734.1%	3166.6%
2072	0	0	0	0.0%	0.0%
	Earned Premium w/o Increase	Earned Premium With Increase	Incurred Claims	Loss Ratio w/o Increase	Loss Ratio With Increase
Past Experience @ 4.5%	861,371,678	861,371,678	538,730,399	62.5%	62.5%
Anticipated Experience @ 4.5%	305,701,232	432,494,505	1,197,294,461	391.7%	276.8%
Lifetime Experience @ 4.5%	1,167,072,910	1,293,866,183	1,736,024,860	148.8%	134.2%

Lifetime Experience (Nationwide) as of 12/31/2015
Premiums at the Virginia Rate Level
All Benefit Periods - Pre-Rate Stabilization

	Virginia Rate Level	Incurred Claims			
Year	Earned Premium	Discounted to Incurred Year		Loss Ratio	
1997	873,120	0		0.0%	
1998	5,474,434	336,880		6.2%	
1999	10,823,775	1,202,294		11.1%	
2000	20,313,452	2,802,076		13.8%	
2001	33,887,945	6,977,623		20.6%	
2002	50,208,799	10,226,775		20.4%	
2003	66,085,925	13,295,591		20.1%	
2004	66,473,979	18,691,830		28.1%	
2005	66,084,168	24,728,575		37.4%	
2006	64,237,437	24,330,233		37.9%	
2007	68,731,490	33,909,287		49.3%	
2008	75,229,514	43,228,153		57.5%	
2009	72,456,378	46,285,419		63.9%	
2010	69,622,687	61,178,100		87.9%	
2011	65,016,614	66,849,599		102.8%	
2012	59,814,612	72,570,442		121.3%	
2013	65,091,625	75,574,013		116.1%	
2014	72,307,577	66,593,398		92.1%	
2015	70,043,579	75,665,499		108.0%	
Total	1,002,777,112	644,445,786		64.3%	
Interest Adjusted	1,419,088,242	818,759,949		57.7%	
	Earned Premium w/o Increase	Earned Premium w/Increase	Incurred Claims	Loss Ratio w/o Increase	Loss Ratio w/Increase
2016	64,788,494	65,780,726	66,020,798	101.9%	100.4%
2017	59,795,601	71,513,966	69,840,257	116.8%	97.7%
2018	55,090,717	72,116,125	73,628,868	133.7%	102.1%
2019	50,628,565	66,386,629	78,952,316	155.9%	118.9%
2020	46,405,347	60,947,450	84,801,937	182.7%	139.1%
2021	42,364,419	55,730,797	88,957,049	210.0%	159.6%
2022	38,525,718	50,764,153	94,227,747	244.6%	185.6%
2023	34,864,435	46,016,106	95,030,278	272.6%	206.5%
2024	31,468,189	41,604,371	94,695,180	300.9%	227.6%
2025	28,284,115	37,452,669	97,888,772	346.1%	261.4%
2026	25,243,162	33,464,848	101,117,495	400.6%	302.2%
2027	22,553,309	29,953,484	104,038,247	461.3%	347.3%
2028	20,098,373	26,746,470	106,349,839	529.1%	397.6%
2029	17,848,930	23,801,635	108,354,182	607.1%	455.2%
2030	15,791,354	21,101,046	110,223,587	698.0%	522.4%
2031	13,910,078	18,624,809	111,245,678	799.7%	597.3%
2032	12,202,337	16,371,122	112,117,088	918.8%	684.8%
2033	10,650,169	14,316,791	110,721,882	1039.6%	773.4%
2034	9,259,839	12,472,162	108,052,415	1166.9%	866.3%
2035	8,020,018	10,824,097	106,701,117	1330.4%	985.8%
2036	6,909,896	9,344,377	104,892,997	1518.0%	1122.5%
2037	5,922,756	8,024,987	102,507,671	1730.7%	1277.4%
2038	5,051,019	6,856,999	99,297,698	1965.9%	1448.1%
2039	4,286,897	5,830,941	94,982,035	2215.6%	1628.9%
2040	3,620,908	4,934,712	89,993,622	2485.4%	1823.7%
2041	3,040,888	4,152,263	84,652,933	2783.8%	2038.7%
2042	2,538,947	3,473,399	79,307,667	3123.6%	2283.3%
2043	2,105,457	2,885,563	73,426,627	3487.4%	2544.6%
2044	1,735,258	2,382,389	66,713,088	3844.6%	2800.3%
2045	1,425,606	1,961,090	60,303,674	4230.0%	3075.0%
2046	1,164,126	1,604,552	54,147,348	4651.3%	3374.6%
2047	944,961	1,304,918	48,441,914	5126.3%	3712.3%
2048	763,066	1,055,707	43,055,906	5642.5%	4078.4%
2049	612,614	849,153	37,860,348	6180.1%	4458.6%
2050	489,412	679,758	32,959,907	6734.6%	4848.8%
2051	388,466	540,681	28,475,122	7330.1%	5266.5%
2052	305,946	426,659	24,587,997	8036.7%	5762.9%
2053	239,433	334,499	21,104,877	8814.5%	6309.4%
2054	185,625	259,744	17,778,263	9577.5%	6844.5%
2055	143,376	201,011	14,831,473	10344.4%	7378.4%
2056	110,042	154,615	12,215,402	11100.7%	7900.5%
2057	83,677	117,809	10,067,125	12030.9%	8545.3%
2058	63,279	89,248	8,286,911	13095.8%	9285.3%
2059	47,792	67,531	6,732,409	14087.0%	9969.4%
2060	35,742	50,599	5,361,950	15001.9%	10597.0%
2061	26,601	37,747	4,170,415	15677.9%	11048.3%
2062	19,535	27,781	3,258,496	16680.7%	11729.3%
2063	14,364	20,464	2,575,748	17931.4%	12586.7%
2064	10,521	15,007	2,019,722	19197.0%	13458.2%
2065	7,645	10,918	1,551,767	20298.3%	14213.5%
2066	5,501	7,866	1,144,029	20795.8%	14543.3%
2067	3,878	5,551	846,961	21842.7%	15256.8%
2068	2,686	3,844	636,610	23705.0%	16560.1%
2069	1,613	2,301	477,692	29616.7%	20763.5%
2070	755	1,097	344,047	45573.3%	31362.5%
2071	13	19	602	4730.0%	3165.0%
2072	0	0	0	0.0%	0.0%
	Earned Premium w/o Increase	Earned Premium With Increase	Incurred Claims	Loss Ratio w/o Increase	Loss Ratio With Increase
Past Experience @ 4.5%	1,419,088,242	1,419,088,242	818,759,949	57.7%	57.7%
Anticipated Experience @ 4.5%	476,646,947	603,440,220	1,607,485,334	337.2%	266.4%
Lifetime Experience @ 4.5%	1,895,735,190	2,022,528,463	2,426,245,283	128.0%	120.0%

Lifetime Experience (Nationwide) as of 12/31/2015

Non-Lifetime Benefit Periods - Post Stabilization Experience

Year	Non-Interest Adjusted			Interest Adjusted		
	Original Premium	VA Rate Level Increased Premium	Incurred Claims	Original Premium	Increased Premium	Incurred Claims
1998	0	0	0	0	0	0
1999	0	0	0	0	0	0
2000	0	0	0	0	0	0
2001	5,564	0	0	10,534	0	0
2002	124,727	0	0	225,960	0	0
2003	959,199	0	0	1,662,886	0	0
2004	1,875,935	0	209,237	3,112,111	0	347,117
2005	2,108,071	0	65,865	3,346,619	0	104,562
2006	2,052,755	0	535,770	3,118,472	0	813,923
2007	1,956,742	236,629	347,698	2,844,606	343,998	505,465
2008	1,883,058	546,087	430,039	2,619,605	759,686	598,246
2009	1,830,940	530,972	654,237	2,437,417	706,851	870,946
2010	1,759,287	510,193	1,335,505	2,241,178	649,942	1,701,317
2011	1,682,106	487,811	622,344	2,050,579	594,668	758,672
2012	1,556,962	451,519	1,279,254	1,816,289	526,724	1,492,326
2013	1,478,031	682,977	1,371,419	1,649,963	762,425	1,530,950
2014	1,409,166	831,877	1,327,505	1,505,347	888,656	1,418,113
2015	1,356,160	829,248	1,703,246	1,386,338	847,701	1,741,147
Total	22,038,702	5,107,314	9,882,120	30,027,904	6,080,650	11,882,783
2016	1,240,986	758,774	1,730,134	1,213,972	742,257	1,692,473
2017	1,133,895	693,197	1,790,034	1,061,447	648,906	1,675,664
2018	1,034,891	632,530	1,843,986	927,052	566,618	1,651,836
2019	942,416	575,837	1,933,757	807,859	493,620	1,657,657
2020	856,383	523,070	2,021,068	702,497	429,078	1,657,897
2021	775,130	473,217	2,080,240	608,464	371,468	1,632,954
2022	698,806	426,395	2,174,530	524,929	320,300	1,633,464
2023	626,842	382,249	2,132,246	450,595	274,773	1,532,728
2024	560,657	341,672	2,079,511	385,664	235,029	1,430,450
2025	499,922	304,469	2,102,943	329,077	200,419	1,384,276
2026	443,958	270,203	2,128,928	279,654	170,204	1,341,035
2027	392,615	238,785	2,147,450	236,662	143,936	1,294,451
2028	345,767	210,136	2,149,592	199,448	121,212	1,239,945
2029	303,274	184,169	2,141,554	167,404	101,659	1,182,113
2030	264,916	160,748	2,120,102	139,934	84,910	1,119,878
2031	230,387	139,681	2,093,884	116,455	70,605	1,058,401
2032	199,462	120,830	2,062,244	96,481	58,446	997,519
2033	171,801	103,982	1,981,824	79,523	48,131	917,339
2034	147,372	89,120	1,883,454	65,278	39,475	834,264
2035	125,815	76,018	1,807,073	53,329	32,222	765,964
2036	106,846	64,501	1,726,891	43,338	26,163	700,456
2037	90,271	54,448	1,643,378	35,039	21,134	637,877
2038	75,862	45,718	1,553,349	28,178	16,981	576,969
2039	63,412	38,183	1,451,220	22,539	13,572	515,823
2040	52,723	31,721	1,338,045	17,933	10,789	455,116
2041	43,583	26,200	1,228,473	14,186	8,528	399,853
2042	35,819	21,515	1,119,914	11,157	6,701	348,821
2043	29,244	17,551	1,011,716	8,717	5,231	301,551
2044	23,733	14,233	898,590	6,769	4,060	256,299
2045	19,154	11,478	791,323	5,228	3,133	215,985
2046	15,359	9,197	690,879	4,012	2,402	180,449
2047	12,250	7,331	600,225	3,062	1,832	150,021
2048	9,717	5,811	518,091	2,324	1,390	123,916
2049	7,659	4,578	442,682	1,753	1,048	101,320
2050	5,996	3,582	373,672	1,313	784	81,842
2051	4,659	2,781	313,702	976	583	65,749
2052	3,597	2,146	261,202	721	430	52,388
2053	2,766	1,649	216,564	531	317	41,565
2054	2,112	1,259	177,358	388	231	32,574
2055	1,600	953	143,785	281	168	25,271
2056	1,199	714	115,354	202	120	19,401
2057	891	530	92,157	143	85	14,832
2058	663	394	73,566	102	61	11,330
2059	491	292	58,330	72	43	8,597
2060	360	214	45,722	51	30	6,448
2061	260	155	35,351	35	21	4,771
2062	186	110	26,974	24	14	3,484
2063	134	79	20,802	17	10	2,571
2064	97	57	16,014	11	7	1,894
2065	69	41	12,188	8	5	1,379
2066	49	29	9,103	5	3	986
2067	34	20	6,699	3	2	694
2068	23	14	4,947	2	1	491
2069	15	9	3,609	1	1	342
2070	4	3	2,553	0	0	232
2071	0	0	0	0	0	0
2072	0	0	0	0	0	0
Total	11,606,135	7,072,579	57,428,985	8,654,846	5,279,149	32,041,605
Grand Total	33,644,837	12,179,893	67,311,105	38,682,750	11,359,799	43,924,388

Minimum Required Loss Ratios	58%	85%
Minimum PV Incurred Claims	22,435,995	9,655,829
Dual Loss Ratio Test Met	43,924,388	>
		32,091,824

Lifetime Experience (Nationwide) as of 12/31/2015

Lifetime Benefit Period - Post Stabilization Experience

Year	Non-Interest Adjusted			Interest Adjusted		
	VA Rate Level					
	Original Premium	Increased Premium	Incurred Claims	Original Premium	Increased Premium	Incurred Claims
1998	0	0	0	0	0	0
1999	0	0	0	0	0	0
2000	0	0	0	0	0	0
2001	13,893	0	0	26,303	0	0
2002	294,797	0	487	534,064	0	882
2003	1,597,074	0	0	2,768,718	0	0
2004	2,473,678	0	21,213	4,103,747	0	35,192
2005	2,593,563	0	204,578	4,117,350	0	324,773
2006	2,533,916	0	305,634	3,849,435	0	464,308
2007	2,498,942	302,197	2,009,978	3,632,827	439,318	2,921,997
2008	2,462,104	714,010	1,623,346	3,425,142	993,291	2,258,309
2009	2,413,851	700,017	345,174	3,213,412	931,889	459,509
2010	2,374,809	688,694	904,545	3,025,298	877,337	1,152,311
2011	2,334,484	677,000	2,542,542	2,845,865	825,301	3,099,498
2012	2,124,330	616,056	1,458,838	2,478,158	718,666	1,701,822
2013	1,946,519	1,066,943	1,714,665	2,172,948	1,191,056	1,914,124
2014	1,867,834	1,682,380	3,349,419	1,995,321	1,797,209	3,578,030
2015	1,787,513	1,809,678	2,786,157	1,827,289	1,849,948	2,848,155
Total	29,317,309	8,256,977	17,266,576	40,015,877	9,624,014	20,758,911
2016	1,669,249	1,773,542	3,564,026	1,632,913	1,734,935	3,486,444
2017	1,554,738	2,563,149	3,816,519	1,455,401	2,399,382	3,572,670
2018	1,445,226	2,902,557	4,072,431	1,294,628	2,600,100	3,648,069
2019	1,340,162	2,691,445	4,440,837	1,148,815	2,307,164	3,806,780
2020	1,239,324	2,488,822	4,858,908	1,016,627	2,041,599	3,985,799
2021	1,141,761	2,292,768	5,164,819	896,264	1,799,785	4,054,297
2022	1,047,997	2,104,352	5,537,594	787,234	1,580,747	4,159,731
2023	957,473	1,922,449	5,647,783	688,263	1,381,919	4,059,811
2024	872,673	1,752,064	5,658,931	600,293	1,205,207	3,892,655
2025	791,567	1,589,129	5,932,307	521,054	1,046,055	3,904,980
2026	711,773	1,428,864	6,206,424	448,353	900,057	3,909,493
2027	642,757	1,290,215	6,458,971	387,444	777,723	3,893,373
2028	579,546	1,163,227	6,673,571	334,299	670,982	3,849,503
2029	520,977	1,045,570	6,878,539	287,573	577,143	3,796,875
2030	466,567	936,279	7,086,722	246,449	494,560	3,743,339
2031	416,012	834,740	7,223,744	210,282	421,938	3,651,404
2032	369,435	741,202	7,356,002	178,698	358,523	3,558,140
2033	326,451	654,886	7,332,424	151,107	303,131	3,394,005
2034	287,392	576,464	7,202,970	127,299	255,341	3,190,511
2035	252,186	505,785	7,180,327	106,894	214,387	3,043,523
2036	220,089	441,357	7,123,850	89,272	179,022	2,889,554
2037	191,111	383,198	7,022,537	74,180	148,738	2,725,799
2038	165,171	331,144	6,858,368	61,350	122,999	2,547,442
2039	142,146	284,947	6,614,246	50,524	101,282	2,350,972
2040	121,757	244,045	6,322,161	41,414	83,008	2,150,386
2041	103,674	207,773	5,994,438	33,745	67,628	1,951,116
2042	87,769	175,878	5,666,610	27,338	54,781	1,764,987
2043	73,818	147,902	5,290,058	22,002	44,084	1,576,749
2044	61,724	123,656	4,835,157	17,605	35,270	1,379,102
2045	51,497	103,156	4,402,588	14,056	28,156	1,201,649
2046	42,677	85,478	3,983,199	11,147	22,326	1,040,363
2047	35,161	70,416	3,591,084	8,788	17,600	897,558
2048	28,839	57,749	3,216,092	6,898	13,812	769,217
2049	23,537	47,128	2,849,292	5,387	10,787	652,141
2050	19,130	38,299	2,498,713	4,190	8,388	547,273
2051	15,445	30,918	2,173,983	3,237	6,480	455,646
2052	12,367	24,754	1,892,803	2,480	4,965	379,630
2053	9,839	19,694	1,638,588	1,888	3,780	314,491
2054	7,754	15,519	1,390,978	1,424	2,850	255,472
2055	6,095	12,198	1,167,933	1,071	2,144	205,269
2056	4,753	9,511	968,328	799	1,600	162,859
2057	3,668	7,339	803,038	590	1,181	129,244
2058	2,814	5,629	665,009	433	867	102,420
2059	2,153	4,307	543,515	317	635	80,104
2060	1,634	3,270	434,905	230	461	61,337
2061	1,232	2,464	339,140	166	333	45,771
2062	916	1,833	265,833	118	237	34,332
2063	682	1,363	211,252	84	168	26,108
2064	503	1,006	166,312	59	119	19,669
2065	368	736	128,225	42	83	14,512
2066	267	534	94,794	29	58	10,266
2067	189	378	70,344	20	39	7,290
2068	131	261	53,040	13	26	5,260
2069	77	154	39,978	7	15	3,794
2070	38	75	28,870	3	7	2,622
2071	0	0	4	0	0	0
2072	0	0	0	0	0	0
Total	18,072,288	34,141,579	207,639,114	13,000,799	24,034,604	101,361,807
Grand Total	47,389,597	42,398,555	224,905,691	53,016,676	33,658,618	122,120,718

Minimum Required Loss Ratios	58%	85%
Minimum PV Incurred Claims	30,749,672	28,609,826
Dual Loss Ratio Test Met	122,120,718	>

Lifetime Experience (Nationwide) as of 12/31/2015

All Benefit Periods Combined - Post Stabilization Experience

Year	Non-Interest Adjusted			Interest Adjusted		
	Original Premium	VA Rate Level Increased Premium	Incurred Claims	Original Premium	Increased Premium	Incurred Claims
1998	0	0	0	0	0	0
1999	0	0	0	0	0	0
2000	0	0	0	0	0	0
2001	19,458	0	0	36,836	0	0
2002	419,525	0	487	760,024	0	882
2003	2,556,274	0	0	4,431,604	0	0
2004	4,349,613	0	230,450	7,215,858	0	382,309
2005	4,701,633	0	270,443	7,463,969	0	429,335
2006	4,586,671	0	841,404	6,967,907	0	1,278,231
2007	4,455,685	538,826	2,357,676	6,477,433	783,316	3,427,462
2008	4,345,162	1,260,097	2,053,385	6,044,748	1,752,977	2,856,555
2009	4,244,791	1,230,989	999,411	5,650,829	1,638,741	1,330,454
2010	4,134,096	1,198,888	2,240,050	5,266,476	1,527,278	2,853,628
2011	4,016,590	1,164,811	3,164,886	4,896,444	1,419,969	3,858,170
2012	3,681,292	1,067,575	2,738,092	4,294,448	1,245,390	3,194,148
2013	3,424,550	1,749,921	3,086,084	3,822,911	1,953,481	3,445,074
2014	3,277,000	2,514,257	4,676,924	3,500,667	2,685,865	4,996,142
2015	3,143,673	2,638,927	4,489,402	3,213,627	2,697,649	4,589,302
Total	51,356,011	13,364,291	27,148,696	70,043,781	15,704,665	32,641,693
2016	2,910,235	2,532,316	5,294,160	2,846,885	2,477,193	5,178,917
2017	2,688,633	3,256,345	5,606,553	2,516,848	3,048,288	5,248,334
2018	2,480,117	3,535,086	5,916,417	2,221,680	3,166,717	5,299,905
2019	2,282,577	3,267,282	6,374,593	1,956,674	2,800,784	5,464,437
2020	2,095,707	3,011,892	6,879,975	1,719,124	2,470,677	5,643,696
2021	1,916,892	2,765,986	7,245,059	1,504,728	2,171,252	5,687,251
2022	1,746,803	2,530,747	7,712,124	1,312,164	1,901,047	5,793,195
2023	1,584,316	2,304,698	7,780,029	1,138,858	1,656,692	5,592,540
2024	1,433,330	2,093,737	7,738,442	985,956	1,440,236	5,323,105
2025	1,291,489	1,893,598	8,035,250	850,131	1,246,473	5,289,257
2026	1,155,731	1,699,067	8,335,353	728,007	1,070,261	5,250,528
2027	1,035,372	1,529,000	8,606,421	624,107	921,659	5,187,824
2028	925,313	1,373,363	8,823,163	533,747	792,194	5,089,448
2029	824,251	1,229,740	9,020,093	454,977	678,802	4,978,988
2030	731,483	1,097,027	9,206,824	386,383	579,470	4,863,217
2031	646,399	974,421	9,317,629	326,737	492,543	4,709,805
2032	568,897	862,032	9,418,246	275,179	416,970	4,555,659
2033	498,252	758,869	9,314,249	230,629	351,262	4,311,345
2034	434,765	665,584	9,086,423	192,576	294,816	4,024,775
2035	378,001	581,803	8,987,400	160,223	246,609	3,809,486
2036	326,935	505,858	8,850,741	132,610	205,184	3,590,010
2037	281,381	437,646	8,665,914	109,218	169,872	3,363,676
2038	241,033	376,862	8,411,717	89,528	139,980	3,124,411
2039	205,558	323,131	8,065,466	73,064	114,854	2,866,795
2040	174,480	275,765	7,660,206	59,347	93,797	2,605,502
2041	147,256	233,973	7,222,911	47,930	76,155	2,350,969
2042	123,588	197,393	6,786,524	38,494	61,482	2,113,809
2043	103,062	165,454	6,301,774	30,719	49,315	1,878,300
2044	85,457	137,888	5,733,747	24,374	39,329	1,635,401
2045	70,651	114,634	5,193,911	19,284	31,288	1,417,633
2046	58,036	94,676	4,674,078	15,158	24,728	1,220,813
2047	47,411	77,747	4,191,309	11,850	19,432	1,047,578
2048	38,556	63,560	3,734,184	9,222	15,202	893,133
2049	31,197	51,706	3,291,974	7,140	11,834	753,461
2050	25,126	41,881	2,872,384	5,503	9,173	629,116
2051	20,104	33,700	2,487,684	4,214	7,063	521,395
2052	15,963	26,900	2,154,005	3,202	5,395	432,018
2053	12,605	21,343	1,855,152	2,419	4,096	356,056
2054	9,866	16,777	1,568,336	1,812	3,081	288,046
2055	7,696	13,151	1,311,718	1,353	2,311	230,540
2056	5,952	10,225	1,083,682	1,001	1,720	182,260
2057	4,559	7,870	895,195	734	1,267	144,076
2058	3,476	6,024	738,576	535	928	113,750
2059	2,644	4,599	601,845	390	678	88,701
2060	1,994	3,483	480,627	281	491	67,785
2061	1,492	2,619	374,491	201	353	50,542
2062	1,102	1,943	292,807	142	251	37,816
2063	815	1,443	232,054	101	178	28,679
2064	600	1,063	182,326	71	126	21,563
2065	437	777	140,413	49	88	15,891
2066	316	563	103,898	34	61	11,252
2067	222	398	77,042	23	41	7,984
2068	154	275	57,988	15	27	5,751
2069	92	163	43,587	9	15	4,137
2070	42	78	31,423	4	7	2,854
2071	0	0	4	0	0	0
2072	0	0	0	0	0	0
Total	29,678,423	41,214,158	265,068,100	21,655,645	29,313,753	133,403,412
Grand Total	81,034,434	54,578,448	292,216,795	91,699,426	45,018,417	166,045,105

Minimum Required Loss Ratios	58%	85%
Minimum PV Incurred Claims	53,185,667	38,265,655
Dual Loss Ratio Test Met	166,045,105	>
		91,451,322

Lifetime Experience (Nationwide) as of 06/30/2012
Pre-Rate Stabilization (Forms LT50, NH50, HCA, LTA and NHA)

Non-Lifetime Benefit Periods

	Actual				
Year	Earned Premium		Incurred Claims	Loss Ratio	
1997	493,144		0	0.0%	
1998	2,879,303		112,177	3.9%	
1999	5,164,376		687,964	13.3%	
2000	8,538,676		1,407,135	16.5%	
2001	13,290,762		2,738,699	20.6%	
2002	19,718,256		5,076,172	25.7%	
2003	26,906,912		4,000,864	14.9%	
2004	29,821,612		6,331,213	21.2%	
2005	30,077,474		9,428,248	31.3%	
2006	29,211,252		9,729,882	33.3%	
2007	28,499,600		12,971,656	45.5%	
2008	27,996,984		14,397,151	51.4%	
2009	26,715,081		16,859,273	63.1%	
2010	25,410,395		21,103,140	83.0%	
2011	24,576,577		22,979,818	93.5%	
Total	299,300,404		127,823,391	42.7%	
		Revised			
	Earned Premium w/o Increase	Earned Premium w/Increase	Incurred Claims	Loss Ratio w/o Increase	Loss Ratio w/Increase
2012	22,771,901	22,771,901	20,740,789	91.1%	91.1%
2013	20,887,943	25,065,531	19,199,849	91.9%	76.6%
2014	19,257,465	23,940,880	17,379,050	90.2%	72.0%
2015	17,782,909	22,107,713	18,300,779	102.9%	82.8%
2016	16,366,871	20,347,294	19,308,395	118.0%	94.9%
2017	15,009,214	18,659,454	20,366,561	135.7%	109.1%
2018	13,714,363	17,049,695	21,417,533	156.2%	125.6%
2019	12,483,765	15,519,817	22,942,257	183.8%	147.8%
2020	11,313,441	14,064,870	24,394,879	215.6%	173.4%
2021	10,204,306	12,685,993	25,562,988	250.5%	201.5%
2022	9,153,944	11,380,183	27,559,779	301.1%	242.2%
2023	8,170,034	10,156,986	27,385,876	335.2%	269.6%
2024	7,266,256	9,033,410	26,537,952	365.2%	293.8%
2025	6,426,693	7,989,664	26,960,298	419.5%	337.4%
2026	5,640,875	7,012,736	27,319,596	484.3%	389.6%
2027	4,934,468	6,134,530	27,647,149	560.3%	450.7%
2028	4,303,157	5,349,685	27,860,129	647.4%	520.8%
2029	3,735,855	4,644,415	27,914,854	747.2%	601.0%
2030	3,227,503	4,012,432	27,693,815	858.1%	690.2%
2031	2,771,723	3,445,806	27,371,449	987.5%	794.3%
2032	2,364,513	2,939,562	27,081,946	1145.3%	921.3%
2033	2,005,483	2,493,217	26,078,834	1300.4%	1046.0%
2034	1,695,445	2,107,777	24,552,393	1448.1%	1164.8%
2035	1,427,333	1,774,461	23,357,715	1636.5%	1316.6%
2036	1,193,961	1,484,332	22,122,429	1852.9%	1490.3%
2037	991,966	1,233,212	20,874,842	2104.4%	1692.7%
2038	819,531	1,018,841	19,591,283	2390.5%	1922.9%
2039	674,521	838,564	18,219,119	2701.0%	2172.7%
2040	552,896	687,361	16,755,734	3030.5%	2437.7%
2041	449,702	559,070	15,345,804	3412.4%	2744.9%
2042	361,471	449,380	13,913,206	3849.1%	3096.1%
2043	288,254	358,358	12,481,694	4330.1%	3483.0%
Total	228,247,761	277,317,131	724,238,797	317.3%	261.2%
	Earned Premium w/o Increase	Earned Premium With Increase	Incurred Claims	Loss Ratio w/o Increase	Loss Ratio With Increase
Past Experience	299,300,404	299,300,404	127,823,391	42.7%	42.7%
Anticipated Experience	228,247,761	277,317,131	724,238,797	317.3%	261.2%
Lifetime Experience	527,548,165	576,617,535	852,062,188	161.5%	147.8%
Past Experience @ 4.5%	387,671,493	387,671,493	152,823,125	39.4%	39.4%
Anticipated Experience @ 4.5%	168,132,648	202,760,231	390,363,572	232.2%	192.5%
Lifetime Experience @ 4.5%	555,804,141	590,431,724	543,186,696	97.7%	92.0%

Note: The Earned Premium with Increase includes the 20% rate increase to the 1-Year, 2-Year, 3-Year and 3-Year Benefit Periods to be effective in 2013, and the 20% increase to the 5-Year Benefit Period to be effective in 2013 and the additional 10% increase to the 5-Year Benefit Period to be effective in 2014.

Lifetime Experience (Nationwide) as of 12/31/2014
Pre-Rate Stabilization (Forms LT50, NH50, HCA, LTA and NHA)

Premiums at the Virginia Rate Level
Non-Lifetime Benefit Periods

	Virginia Rate Level	Incurred Claims Discounted to	
Year	Earned Premium	Incurred Year	Loss Ratio
1997	493,144	0	0.0%
1998	2,879,303	107,337	3.7%
1999	5,164,376	620,403	12.0%
2000	8,538,676	1,279,039	15.0%
2001	13,291,034	2,429,334	18.3%
2002	19,718,256	4,609,517	23.4%
2003	26,161,646	3,660,231	14.0%
2004	26,346,243	5,771,160	21.9%
2005	26,128,236	8,629,972	33.0%
2006	25,202,065	8,904,639	35.3%
2007	26,556,561	11,650,538	43.9%
2008	28,547,868	13,345,114	46.7%
2009	27,170,713	15,787,971	58.1%
2010	25,819,457	17,585,716	68.1%
2011	24,490,069	20,554,205	83.9%
2012	24,453,662	26,390,188	107.9%
2013	26,798,097	24,813,474	92.6%
2014	27,611,723	18,165,434	65.8%
Total	365,371,128	184,304,271	50.4%
	Earned Premium	Incurred Claims	Loss Ratio
2015	25,574,482	20,057,519	78.4%
2016	23,347,338	20,796,633	89.1%
2017	21,281,849	21,510,348	101.1%
2018	19,373,982	22,155,288	114.4%
2019	17,593,646	23,106,564	131.3%
2020	15,940,014	24,012,761	150.6%
2021	14,381,055	24,514,860	170.5%
2022	12,921,045	25,434,750	196.8%
2023	11,549,287	24,973,161	216.2%
2024	10,290,727	24,371,697	236.8%
2025	9,140,163	24,461,948	267.6%
2026	8,084,295	24,570,954	303.9%
2027	7,120,005	24,611,158	345.7%
2028	6,244,276	24,487,995	392.2%
2029	5,453,674	24,236,445	444.4%
2030	4,743,589	23,848,971	502.8%
2031	4,107,648	23,394,326	569.5%
2032	3,541,431	22,914,637	647.0%
2033	3,038,032	21,961,226	722.9%
2034	2,595,577	20,844,962	803.1%
2035	2,206,883	19,944,756	903.8%
2036	1,866,494	19,008,400	1018.4%
2037	1,570,589	18,039,438	1148.6%
2038	1,314,630	16,999,368	1293.1%
2039	1,094,513	15,832,409	1446.5%
2040	906,318	14,561,723	1606.7%
2041	746,006	13,323,364	1786.0%
2042	610,565	12,099,779	1981.7%
2043	496,520	10,892,540	2193.8%
2044	401,312	9,648,852	2404.3%
Total	237,134,634	606,967,619	256.0%
	Earned Premium	Incurred Claims	Loss Ratio
Past Experience	365,371,128	184,304,271	50.4%
Anticipated Experience	237,535,946	616,616,471	259.6%
Lifetime Experience	602,907,074	800,920,741	132.8%
	Earned Premium	Incurred Claims	Loss Ratio
Past Experience @ 4.5%	506,976,629	231,590,441	45.7%
Anticipated Experience @ 4.5%	177,837,403	360,181,883	202.5%
Lifetime Experience @ 4.5%	684,814,033	591,772,324	86.4%

Lifetime Experience (Nationwide) as of 12/31/2015
Pre-Rate Stabilization (Forms LT50, NH50, HCA, LTA and NHA)

Premiums at the Virginia Rate Level
Non-Lifetime Benefit Periods

	Virginia	Incurred Claims	
	Rate Level	Discounted to	
Year	Earned Premium	Incurred Year	Loss Ratio
1997	493,144	0	0.0%
1998	2,879,303	107,337	3.7%
1999	5,164,376	620,403	12.0%
2000	8,538,676	1,278,903	15.0%
2001	13,291,034	2,426,016	18.3%
2002	19,718,256	4,609,517	23.4%
2003	26,161,646	3,660,231	14.0%
2004	26,346,243	5,771,160	21.9%
2005	26,128,236	8,629,972	33.0%
2006	25,202,065	8,852,762	35.1%
2007	26,556,561	11,678,078	44.0%
2008	28,547,868	13,273,642	46.5%
2009	27,170,713	15,834,428	58.3%
2010	25,819,457	17,309,240	67.0%
2011	24,490,069	20,679,566	84.4%
2012	24,453,662	25,437,476	104.0%
2013	26,798,097	24,172,745	90.2%
2014	27,611,723	25,362,502	91.9%
2015	27,318,093	23,732,076	116.2%
Total	392,689,221	221,436,053	56.4%
	Earned Premium	Incurred Claims	Loss Ratio
2016	24,939,845	23,042,797	92.4%
2017	22,733,868	23,842,093	104.9%
2018	20,695,953	24,566,298	118.7%
2019	18,794,093	25,642,982	136.4%
2020	17,027,360	26,675,538	156.7%
2021	15,361,635	27,247,056	177.4%
2022	13,801,607	28,293,466	205.0%
2023	12,335,805	27,781,552	225.2%
2024	10,991,055	27,120,206	246.7%
2025	9,761,784	27,242,666	279.1%
2026	8,633,695	27,385,713	317.2%
2027	7,603,462	27,449,679	361.0%
2028	6,667,873	27,328,904	409.9%
2029	5,823,265	27,065,806	464.8%
2030	5,064,703	26,651,478	526.2%
2031	4,385,370	26,157,927	596.5%
2032	3,780,549	25,634,893	678.1%
2033	3,242,850	24,556,050	757.9%
2034	2,770,299	23,573,483	842.3%
2035	2,355,212	22,333,529	948.3%
2036	1,991,752	21,291,624	1069.0%
2037	1,675,823	20,212,555	1206.1%
2038	1,402,574	19,052,200	1358.4%
2039	1,167,616	17,748,615	1520.1%
2040	966,759	16,328,232	1689.0%
2041	795,684	14,943,853	1878.1%
2042	651,165	13,575,144	2084.7%
2043	529,486	12,224,038	2308.7%
2044	427,921	10,831,020	2531.1%
2045	343,818	9,510,146	2766.0%
2046	274,375	8,277,514	3016.9%
2047	217,773	7,167,373	3291.2%
2048	171,872	6,165,037	3587.0%
2049	134,758	5,248,022	3894.4%
2050	104,872	4,415,371	4210.2%
2051	80,961	3,694,121	4562.8%
2052	62,082	3,066,071	4938.7%
2053	47,380	2,534,544	5349.4%
2054	35,889	2,070,410	5769.0%
2055	26,942	1,672,691	6208.4%
2056	19,994	1,338,703	6695.5%
2057	14,723	1,067,674	7251.7%
2058	10,818	850,635	7863.3%
2059	7,915	672,971	8503.0%
2060	5,728	526,504	9191.8%
2061	4,083	406,385	9953.9%
2062	2,875	309,967	10780.5%
2063	2,042	238,863	11697.6%
2064	1,458	183,627	12595.3%
2065	1,033	139,441	13495.8%
2066	723	103,847	14358.3%
2067	496	76,306	15380.2%
2068	345	56,232	16311.2%
2069	224	40,816	18255.0%
2070	64	28,740	44989.6%
2071	0	0	821.3%
2072	0	0	0.0%
Total	227,952,307	725,441,414	318.2%
	Earned Premium	Incurred Claims	Loss Ratio
Past Experience	392,689,221	221,436,053	56.4%
Anticipated Experience	227,952,307	725,441,414	318.2%
Lifetime Experience	620,641,528	946,877,467	152.6%
Past Experience @ 4.5%	557,716,564	280,029,550	50.2%
Anticipated Experience @ 4.5%	170,945,715	410,190,873	240.0%
Lifetime Experience @ 4.5%	728,662,279	690,220,423	94.7%

Lifetime Experience (Nationwide) as of 06/30/2012
Pre-Rate Stabilization (Forms LT50, NH50, HCA, LTA and NHA)

Year	Actual				
	Earned Premium	Incurred Claims	Loss Ratio		
1997	379,977	0	0.0%		
1998	2,595,131	264,595	10.2%		
1999	5,659,399	733,059	13.0%		
2000	11,774,776	1,870,693	15.9%		
2001	20,596,711	7,204,732	35.0%		
2002	30,490,504	7,048,038	23.1%		
2003	41,347,298	12,320,422	29.8%		
2004	46,704,535	16,024,233	34.3%		
2005	47,207,072	19,365,825	41.0%		
2006	46,402,671	18,562,860	40.0%		
2007	45,952,833	26,635,259	58.0%		
2008	45,842,454	34,681,570	75.7%		
2009	44,559,942	31,923,661	71.6%		
2010	43,124,644	44,906,780	104.1%		
2011	41,181,809	39,957,474	97.0%		
Total	473,819,756	261,499,201	55.2%		
Year	Revised				
	Earned Premium w/o Increase	Earned Premium With Increase	Incurred Claims	Loss Ratio w/o Increase	Loss Ratio With Increase
2012	38,101,857	38,101,857	42,860,981	112.5%	112.5%
2013	34,792,885	45,230,750	37,211,543	107.0%	82.3%
2014	32,036,596	49,977,090	31,899,998	99.6%	63.8%
2015	29,604,782	46,183,459	34,116,181	115.2%	73.9%
2016	27,262,069	42,528,828	36,519,306	134.0%	85.9%
2017	25,009,986	39,015,579	39,059,538	156.2%	100.1%
2018	22,856,499	35,656,138	41,651,537	182.2%	116.8%
2019	20,804,076	32,454,358	45,667,827	219.5%	140.7%
2020	18,845,917	29,399,631	51,257,601	272.0%	174.3%
2021	16,986,040	26,498,222	54,479,329	320.7%	205.6%
2022	15,221,271	23,745,182	59,122,751	388.4%	249.0%
2023	13,567,143	21,164,744	58,685,547	432.6%	277.3%
2024	12,048,639	18,795,878	57,308,377	475.6%	304.9%
2025	10,640,771	16,599,603	59,302,962	557.3%	357.3%
2026	9,325,354	14,547,552	62,549,324	670.7%	430.0%
2027	8,140,767	12,699,596	65,170,850	800.5%	513.2%
2028	7,081,684	11,047,427	66,627,484	940.8%	603.1%
2029	6,130,952	9,564,285	67,739,982	1104.9%	708.3%
2030	5,280,069	8,236,908	68,727,563	1301.6%	834.4%
2031	4,519,498	7,050,418	68,844,558	1523.3%	976.5%
2032	3,841,802	5,993,211	69,031,101	1796.8%	1151.8%
2033	3,246,394	5,064,374	67,211,289	2070.3%	1327.1%
2034	2,734,379	4,265,631	64,094,791	2344.0%	1502.6%
2035	2,292,957	3,577,014	61,783,473	2694.5%	1727.2%
2036	1,910,784	2,980,823	59,476,863	3112.7%	1995.3%
2037	1,581,676	2,467,414	57,093,009	3609.7%	2313.9%
2038	1,302,035	2,031,174	54,357,927	4174.8%	2676.2%
2039	1,067,475	1,665,262	51,161,372	4792.7%	3072.3%
2040	871,322	1,359,262	47,744,372	5479.5%	3512.5%
2041	705,923	1,101,240	44,351,687	6282.8%	4027.4%
2042	565,443	882,091	41,315,862	7306.8%	4683.9%
2043	449,431	701,113	37,977,967	8450.2%	5416.8%
Total	378,826,475	560,586,111	1,704,402,952	449.9%	304.0%
Year	Revised				
	Earned Premium w/o Increase	Earned Premium With Increase	Incurred Claims	Loss Ratio w/o Increase	Loss Ratio With Increase
Past Experience	473,819,756	473,819,756	261,499,201	55.2%	55.2%
Anticipated Experience	378,826,475	560,586,111	1,704,402,952	449.9%	304.0%
Lifetime Experience	852,646,231	1,034,405,867	1,965,902,154	230.6%	190.1%
Past Experience @ 4.5%	608,228,555	608,228,555	314,012,837	51.6%	51.6%
Anticipated Experience @ 4.5%	279,569,950	406,788,382	874,889,639	312.9%	215.1%
Lifetime Experience @ 4.5%	887,798,505	1,015,016,937	1,188,902,476	133.9%	117.1%

Note: The Earned Premium with the Increase includes the 30% rate increase to be effective in 2013 and the additional 20% increase to be effective in 2014.

Lifetime Experience (Nationwide) as of 12/31/2014
Pre-Rate Stabilization (Forms LT50, NH50, HCA, LTA and NHA)

Year	Virginia Rate Level		Incurred Claims Discounted to		Loss Ratio
	Earned Premium	Incurred Year	Incurred Year	Loss Ratio	
1997	379,977	0	0	0.0%	
1998	2,595,131	229,543	229,543	8.8%	
1999	5,659,399	581,891	581,891	10.3%	
2000	11,774,776	1,523,173	1,523,173	12.9%	
2001	20,596,912	4,549,955	4,549,955	22.1%	
2002	30,490,543	5,577,230	5,577,230	18.3%	
2003	39,924,279	9,426,115	9,426,115	23.6%	
2004	40,127,736	13,193,942	13,193,942	32.9%	
2005	39,955,932	16,389,634	16,389,634	41.0%	
2006	39,035,372	15,744,688	15,744,688	40.3%	
2007	42,174,929	22,069,907	22,069,907	52.3%	
2008	46,681,645	29,532,300	29,532,300	63.3%	
2009	45,285,665	31,364,841	31,364,841	69.3%	
2010	43,803,220	43,711,183	43,711,183	99.8%	
2011	40,526,545	46,462,820	46,462,820	114.6%	
2012	35,360,950	48,000,576	48,000,576	135.7%	
2013	38,293,528	49,964,356	49,964,356	130.5%	
2014	44,695,854	48,511,760	48,511,760	108.5%	
Total	567,362,405	386,833,914	386,833,914	68.2%	
Year	Virginia Rate Level		Incurred Claims Discounted to		Loss Ratio
	Earned Premium	Incurred Year	Incurred Year	Loss Ratio	
2015	44,226,116	39,920,614	39,920,614	90.3%	
2016	41,251,752	42,840,202	42,840,202	103.9%	
2017	38,370,716	45,839,730	45,839,730	119.5%	
2018	35,613,593	48,881,129	48,881,129	137.3%	
2019	32,967,553	53,095,205	53,095,205	161.1%	
2020	30,428,677	57,870,814	57,870,814	190.2%	
2021	27,974,162	61,420,171	61,420,171	219.6%	
2022	25,619,240	65,612,884	65,612,884	256.1%	
2023	23,350,332	66,915,841	66,915,841	286.6%	
2024	21,229,406	67,224,430	67,224,430	316.7%	
2025	19,207,219	70,262,320	70,262,320	365.8%	
2026	17,227,049	73,313,835	73,313,835	425.6%	
2027	15,510,246	76,137,629	76,137,629	490.9%	
2028	13,938,511	78,539,065	78,539,065	563.5%	
2029	12,440,309	80,775,594	80,775,594	647.0%	
2030	11,140,309	83,027,279	83,027,279	745.3%	
2031	9,895,798	84,514,981	84,514,981	854.0%	
2032	8,753,425	85,888,251	85,888,251	981.2%	
2033	7,702,359	85,542,950	85,542,950	1110.6%	
2034	6,751,021	84,107,567	84,107,567	1245.8%	
2035	5,895,758	83,745,148	83,745,148	1420.4%	
2036	5,121,023	82,972,536	82,972,536	1620.2%	
2037	4,424,223	81,666,626	81,666,626	1845.9%	
2038	3,802,608	79,625,206	79,625,206	2094.0%	
2039	3,252,722	76,630,648	76,630,648	2355.9%	
2040	2,769,109	73,084,573	73,084,573	2639.3%	
2041	2,343,650	69,153,102	69,153,102	2950.7%	
2042	1,971,572	65,204,898	65,204,898	3307.3%	
2043	1,646,810	60,709,287	60,709,287	3686.5%	
2044	1,366,846	55,426,089	55,426,089	4055.0%	
Total	474,870,134	2,024,522,521	2,024,522,521	426.3%	
Year	Virginia Rate Level		Incurred Claims Discounted to		Loss Ratio
	Earned Premium	Incurred Year	Incurred Year	Loss Ratio	
Past Experience	567,362,405	386,833,914	386,833,914	68.2%	
Anticipated Experience	476,236,981	2,079,948,609	2,079,948,609	436.7%	
Lifetime Experience	1,043,599,385	2,466,782,523	2,466,782,523	236.4%	
Past Experience @ 4.5%	782,483,681	480,802,775	480,802,775	61.4%	
Anticipated Experience @ 4.5%	345,179,856	1,097,300,850	1,097,300,850	317.9%	
Lifetime Experience @ 4.5%	1,127,663,537	1,578,103,625	1,578,103,625	139.9%	

Lifetime Experience (Nationwide) as of 12/31/2015
Pre-Rate Stabilization (Forms LT50, NH50, HCA, LTA and NHA)

Premiums at the Virginia Rate Level				
Lifetime Benefit Period				
Year	Virginia	Incurred Claims		Loss Ratio
	Rate Level	Discounted to	Incurred Year	
	Earned Premium	Incurred Year	Loss Ratio	
1997	379,977	0	0.0%	
1998	2,595,131	229,543	8.8%	
1999	5,659,399	581,891	10.3%	
2000	11,774,776	1,523,173	12.9%	
2001	20,596,912	4,551,607	22.1%	
2002	30,490,543	5,617,258	18.4%	
2003	39,924,279	9,635,360	24.1%	
2004	40,127,736	12,920,670	32.2%	
2005	39,955,932	16,098,603	40.3%	
2006	39,035,372	15,477,471	39.6%	
2007	42,174,929	22,231,209	52.7%	
2008	46,681,645	29,954,511	64.2%	
2009	45,285,665	30,450,991	67.2%	
2010	43,803,220	43,868,860	100.1%	
2011	40,526,545	46,170,034	113.9%	
2012	35,360,950	47,132,966	133.3%	
2013	38,293,528	51,401,267	134.2%	
2014	44,695,854	41,230,896	92.2%	
2015	42,725,487	43,933,424	102.8%	
Total	610,087,891	423,009,733	69.3%	
	Earned Premium	Incurred Claims	Loss Ratio	
2016	39,848,650	42,978,001	107.9%	
2017	37,061,734	45,998,164	124.1%	
2018	34,394,756	49,062,570	142.6%	
2019	31,834,472	53,309,334	167.5%	
2020	29,377,987	58,126,399	197.9%	
2021	27,002,784	61,709,992	228.5%	
2022	24,724,111	65,934,280	266.7%	
2023	22,528,630	67,248,726	298.5%	
2024	20,477,134	67,574,974	330.0%	
2025	18,522,331	70,646,105	381.4%	
2026	16,609,467	73,731,782	443.9%	
2027	14,949,848	76,588,568	512.3%	
2028	13,430,500	79,020,935	588.4%	
2029	12,025,666	81,288,376	676.0%	
2030	10,726,651	83,572,109	779.1%	
2031	9,524,708	85,087,751	893.3%	
2032	8,421,788	86,482,194	1026.9%	
2033	7,407,319	86,145,832	1163.0%	
2034	6,489,541	84,718,932	1305.5%	
2035	5,664,806	84,367,589	1489.3%	
2036	4,918,144	83,601,373	1699.9%	
2037	4,246,933	82,295,116	1937.8%	
2038	3,648,445	80,245,498	2199.4%	
2039	3,119,281	77,233,420	2476.0%	
2040	2,654,149	73,665,390	2775.5%	
2041	2,245,203	69,709,080	3104.8%	
2042	1,887,782	65,732,523	3482.0%	
2043	1,575,971	61,202,589	3883.5%	
2044	1,307,337	55,882,068	4274.5%	
2045	1,081,787	50,793,528	4695.3%	
2046	889,751	45,869,834	5155.4%	
2047	727,187	41,274,540	5675.9%	
2048	591,194	36,890,868	6240.1%	
2049	477,856	32,612,326	6823.1%	
2050	384,539	28,544,536	7424.1%	
2051	307,505	24,781,001	8058.7%	
2052	243,864	21,521,926	8825.4%	
2053	192,053	18,570,333	9669.4%	
2054	149,736	15,707,853	10490.3%	
2055	116,434	13,158,782	11301.5%	
2056	90,048	10,876,699	12078.8%	
2057	68,954	8,999,451	13051.4%	
2058	52,461	7,436,276	14174.8%	
2059	39,877	6,059,439	15195.3%	
2060	30,014	4,835,446	16110.7%	
2061	22,518	3,764,030	16715.7%	
2062	16,659	2,948,529	17699.0%	
2063	12,322	2,336,885	18964.5%	
2064	9,063	1,836,095	20258.9%	
2065	6,612	1,412,327	21361.4%	
2066	4,778	1,040,181	21770.3%	
2067	3,381	770,654	22799.5%	
2068	2,341	580,377	24793.9%	
2069	1,389	436,875	31445.2%	
2070	691	315,307	45627.3%	
2071	13	602	4734.1%	
2072	0	0	0.0%	
Total	422,149,162	2,436,534,369	577.2%	
	Earned Premium	Incurred Claims	Loss Ratio	
Past Experience	610,087,891	423,009,733	69.3%	
Anticipated Experience	422,149,162	2,436,534,369	577.2%	
Lifetime Experience	1,032,237,053	2,859,544,103	277.0%	
Past Experience @ 4.5%	861,371,678	538,730,399	62.5%	
Anticipated Experience @ 4.5%	305,701,232	1,971,294,461	391.7%	
Lifetime Experience @ 4.5%	1,167,072,910	1,736,024,860	148.8%	

Lifetime Experience (Nationwide) as of 06/30/2012
Pre-Rate Stabilization (Forms LT50, NH50, HCA, LTA and NHA)

All Benefit Periods

	Actual				
Year	Earned Premium		Incurred Claims	Loss Ratio	
1997	873,120		0	0.0%	
1998	5,474,434		376,772	6.9%	
1999	10,823,775		1,421,022	13.1%	
2000	20,313,452		3,277,828	16.1%	
2001	33,887,473		9,943,431	29.3%	
2002	50,208,760		12,124,210	24.1%	
2003	68,254,210		16,321,287	23.9%	
2004	76,526,146		22,355,445	29.2%	
2005	77,284,546		28,794,073	37.3%	
2006	75,613,922		28,292,742	37.4%	
2007	74,452,433		39,606,916	53.2%	
2008	73,839,439		49,078,721	66.5%	
2009	71,275,024		48,782,934	68.4%	
2010	68,535,038		66,009,920	96.3%	
2011	65,758,386		62,937,292	95.7%	
Total	773,120,160		389,322,592	50.4%	
Revised					
	Earned Premium w/o Increase	Earned Premium With Increase	Incurred Claims	Loss Ratio w/o Increase	Loss Ratio With Increase
2012	60,873,758	60,873,758	63,601,771	104.5%	104.5%
2013	55,680,827	70,296,281	56,411,393	101.3%	80.2%
2014	51,294,061	73,917,970	49,279,048	96.1%	66.7%
2015	47,387,691	68,291,172	52,416,960	110.6%	76.8%
2016	43,628,940	62,876,122	55,827,701	128.0%	88.8%
2017	40,019,200	57,675,033	59,426,099	148.5%	103.0%
2018	36,570,861	52,705,833	63,068,889	172.5%	119.7%
2019	33,287,841	47,974,175	68,610,084	206.1%	143.0%
2020	30,159,358	43,464,501	75,652,480	250.8%	174.1%
2021	27,190,346	39,184,215	80,042,317	294.4%	204.3%
2022	24,375,214	35,125,365	86,682,530	355.6%	246.8%
2023	21,737,177	31,321,730	86,071,423	396.0%	274.8%
2024	19,314,896	27,829,287	83,846,328	434.1%	301.3%
2025	17,067,463	24,589,267	86,263,259	505.4%	350.8%
2026	14,966,229	21,560,288	89,868,919	600.5%	416.8%
2027	13,075,235	18,834,126	92,817,999	709.9%	492.8%
2028	11,384,841	16,397,111	94,487,613	829.9%	576.2%
2029	9,866,807	14,208,700	95,654,836	969.5%	673.2%
2030	8,507,572	12,249,340	96,421,378	1133.4%	787.2%
2031	7,291,221	10,496,224	96,216,007	1319.6%	916.7%
2032	6,206,315	8,932,773	96,113,407	1548.6%	1076.0%
2033	5,251,877	7,557,591	93,290,123	1776.3%	1234.4%
2034	4,429,824	6,373,408	88,647,184	2001.1%	1390.9%
2035	3,720,291	5,351,474	85,141,188	2288.6%	1591.0%
2036	3,104,745	4,465,155	81,599,293	2628.2%	1827.5%
2037	2,573,642	3,700,627	77,967,850	3029.5%	2106.9%
2038	2,121,566	3,050,015	73,949,209	3485.6%	2424.6%
2039	1,741,996	2,503,826	69,380,492	3982.8%	2771.0%
2040	1,424,218	2,046,623	64,500,107	4528.8%	3151.5%
2041	1,155,625	1,660,310	59,697,491	5165.8%	3595.6%
2042	926,914	1,331,471	55,229,069	5958.4%	4148.0%
2043	737,686	1,059,471	50,459,661	6840.3%	4762.7%
Total	607,074,236	837,903,242	2,428,641,750	400.1%	289.8%
Revised					
	Earned Premium w/o Increase	Earned Premium With Increase	Incurred Claims	Loss Ratio w/o Increase	Loss Ratio With Increase
Past Experience	773,120,160	773,120,160	389,322,592	50.4%	50.4%
Anticipated Experience	607,074,236	837,903,242	2,428,641,750	400.1%	289.8%
Lifetime Experience	1,380,194,396	1,611,023,402	2,817,964,342	204.2%	174.9%
Revised					
	Earned Premium w/o Increase	Earned Premium With Increase	Incurred Claims	Loss Ratio w/o Increase	Loss Ratio With Increase
Past Experience @ 4.5%	995,900,047	995,900,047	466,835,962	46.9%	46.9%
Anticipated Experience @ 4.5%	447,702,599	609,548,614	1,265,253,210	282.6%	207.6%
Lifetime Experience @ 4.5%	1,443,602,646	1,605,448,661	1,732,089,172	120.0%	107.9%

Note: The Earned Premium with Increase includes the rate adjustments described in Exhibits 1A and 1B.

Lifetime Experience (Nationwide) as of 12/31/2014
Pre-Rate Stabilization (Forms LT50, NH50, HCA, LTA and NHA)
Premiums at the Virginia Rate Level
All Benefit Periods Combined

Year	Virginia Rate Level Earned Premium	Incurred Claims Discounted to Incurred Year	Loss Ratio
1997	873,120	0	0.0%
1998	5,474,434	336,880	6.2%
1999	10,823,775	1,202,294	11.1%
2000	20,313,452	2,802,212	13.8%
2001	33,887,945	6,979,289	20.6%
2002	50,208,760	10,186,747	20.3%
2003	66,085,925	13,086,346	19.8%
2004	66,473,979	18,965,102	28.5%
2005	66,084,168	25,019,606	37.9%
2006	64,237,437	24,649,327	38.4%
2007	68,731,490	33,720,445	49.1%
2008	75,229,514	42,877,414	57.0%
2009	72,456,378	47,152,812	65.1%
2010	69,622,687	61,296,899	88.0%
2011	65,016,614	67,017,024	103.1%
2012	59,814,612	74,390,763	124.4%
2013	65,091,625	74,777,830	114.9%
2014	72,307,577	66,677,194	92.2%
Total	932,733,533	571,138,185	61.2%
Year	Earned Premium	Incurred Claims	Loss Ratio
2015	69,800,596	59,978,132	85.9%
2016	64,599,091	63,636,835	98.5%
2017	59,652,564	67,350,079	112.9%
2018	54,987,875	71,036,427	129.2%
2019	50,561,199	76,201,769	150.7%
2020	46,368,691	81,883,575	176.6%
2021	42,355,216	85,935,032	202.9%
2022	38,540,285	91,047,634	236.2%
2023	34,899,619	91,889,002	263.3%
2024	31,520,133	91,596,126	290.6%
2025	28,347,381	94,724,269	334.2%
2026	25,311,345	97,884,788	386.7%
2027	22,630,251	100,748,787	445.2%
2028	20,182,787	103,027,060	510.5%
2029	17,938,548	105,012,039	585.4%
2030	15,883,899	106,876,250	672.9%
2031	14,003,447	107,909,306	770.6%
2032	12,294,857	108,802,888	884.9%
2033	10,740,391	107,504,175	1000.9%
2034	9,346,598	104,952,529	1122.9%
2035	8,102,641	103,689,903	1279.7%
2036	6,987,517	101,980,575	1459.5%
2037	5,994,811	99,706,064	1663.2%
2038	5,117,238	96,624,574	1888.2%
2039	4,347,235	92,463,056	2126.9%
2040	3,675,427	87,646,296	2384.7%
2041	3,089,656	82,476,466	2669.4%
2042	2,582,137	77,304,677	2993.8%
2043	2,143,330	71,601,827	3340.7%
2044	1,768,159	65,074,940	3680.4%
Total	713,772,927	2,696,565,080	377.8%
Year	Earned Premium	Incurred Claims	Loss Ratio
Past Experience	932,733,533	571,138,185	61.2%
Anticipated Experience	713,772,927	2,696,565,080	377.8%
Lifetime Experience	1,646,506,460	3,267,703,265	198.5%
Year	Earned Premium	Incurred Claims	Loss Ratio
Past Experience @ 4.5%	1,289,460,310	712,393,217	55.2%
Anticipated Experience @ 4.5%	523,017,259	1,457,482,732	278.7%
Lifetime Experience @ 4.5%	1,812,477,569	2,169,875,949	119.7%

Lifetime Experience (Nationwide) as of 12/31/2015
Pre-Rate Stabilization (Forms LT50, NH50, HCA, LTA and NHA)
Premiums at the Virginia Rate Level
All Benefit Periods Combined

	Virginia Rate Level	Incurred Claims Discounted to	
Year	Earned Premium	Incurred Year	Loss Ratio
1997	873,120	0	0.0%
1998	5,474,434	336,880	6.2%
1999	10,823,775	1,202,294	11.1%
2000	20,313,452	2,802,076	13.8%
2001	33,887,945	6,977,623	20.6%
2002	50,208,799	10,226,775	20.4%
2003	66,085,925	13,295,591	20.1%
2004	66,473,979	18,691,830	28.1%
2005	66,084,168	24,728,575	37.4%
2006	64,237,437	24,330,233	37.9%
2007	68,731,490	33,909,287	49.3%
2008	75,229,514	43,228,153	57.5%
2009	72,456,378	46,285,419	63.9%
2010	69,622,687	61,178,100	87.9%
2011	65,016,614	66,849,599	102.8%
2012	59,814,612	72,570,442	121.3%
2013	65,091,625	75,574,013	116.1%
2014	72,307,577	66,593,398	92.1%
2015	70,043,579	75,665,499	108.0%
Total	1,002,777,112	644,445,786	64.3%
	Earned Premium	Incurred Claims	Loss Ratio
2016	64,788,494	66,020,798	101.9%
2017	59,795,601	69,840,257	116.8%
2018	55,090,717	73,628,868	133.7%
2019	50,628,565	78,952,316	155.9%
2020	46,405,347	84,801,937	182.7%
2021	42,364,419	88,957,049	210.0%
2022	38,525,718	94,227,747	244.6%
2023	34,864,435	95,030,278	272.6%
2024	31,468,189	94,695,180	300.9%
2025	28,284,115	97,888,772	346.1%
2026	25,243,162	101,117,495	400.6%
2027	22,553,309	104,038,247	461.3%
2028	20,098,373	106,349,839	529.1%
2029	17,848,930	108,354,182	607.1%
2030	15,791,354	110,223,587	698.0%
2031	13,910,078	111,245,678	799.7%
2032	12,202,337	112,117,088	918.8%
2033	10,650,169	110,721,882	1039.6%
2034	9,259,839	108,052,415	1166.9%
2035	8,020,018	106,701,117	1330.4%
2036	6,909,896	104,892,997	1518.0%
2037	5,922,756	102,507,671	1730.7%
2038	5,051,019	99,297,698	1965.9%
2039	4,286,897	94,982,035	2215.6%
2040	3,620,908	89,993,622	2485.4%
2041	3,040,888	84,652,933	2783.8%
2042	2,538,947	79,307,667	3123.6%
2043	2,105,457	73,426,627	3487.4%
2044	1,735,258	66,713,088	3844.6%
2045	1,425,606	60,303,674	4230.0%
2046	1,164,126	54,147,348	4651.3%
2047	944,961	48,441,914	5126.3%
2048	763,066	43,055,906	5642.5%
2049	612,614	37,860,348	6180.1%
2050	489,412	32,959,907	6734.6%
2051	388,466	28,475,122	7330.1%
2052	305,946	24,587,997	8006.7%
2053	239,433	21,104,877	8814.5%
2054	185,625	17,778,263	9577.5%
2055	143,376	14,831,473	10344.4%
2056	110,042	12,215,402	11100.7%
2057	83,677	10,067,125	12030.9%
2058	63,279	8,286,911	13095.8%
2059	47,792	6,732,409	14087.0%
2060	35,742	5,361,950	15001.9%
2061	26,601	4,170,415	15677.9%
2062	19,535	3,258,496	16680.7%
2063	14,364	2,575,748	17931.4%
2064	10,521	2,019,722	19197.0%
2065	7,645	1,551,767	20298.3%
2066	5,501	1,144,029	20795.8%
2067	3,878	846,961	21842.7%
2068	2,686	636,610	23705.0%
2069	1,613	477,692	29616.7%
2070	755	344,047	45573.3%
2071	13	602	4730.0%
2072	0	0	0.0%
Total	650,101,469	3,161,975,783	486.4%
	Earned Premium	Incurred Claims	Loss Ratio
Past Experience	1,002,777,112	644,445,786	64.3%
Anticipated Experience	650,101,469	3,161,975,783	486.4%
Lifetime Experience	1,652,878,581	3,806,421,570	230.3%
Past Experience @ 4.5%	1,419,088,242	818,759,949	57.7%
Anticipated Experience @ 4.5%	674,666,947	1,607,485,334	337.2%
Lifetime Experience @ 4.5%	1,895,735,190	2,426,245,283	128.0%

Lifetime Experience (Nationwide) as of 06/30/2012

Non-Lifetime Benefit Periods - Post Stabilization Experience

Non-Interest Adjusted				Interest Adjusted		
	VA Rate Level					
Year	Original Premium	Increased Premium	Incurred Claims	Original Premium	Increased Premium	Incurred Claims
1998	0	0	0	0	0	0
1999	0	0	0	0	0	0
2000	0	0	0	0	0	0
2001	5,564	0	0	8,833	0	0
2002	124,727	0	0	189,481	0	0
2003	959,199	0	0	1,394,432	0	0
2004	1,875,935	0	224,567	2,609,696	0	312,405
2005	2,108,071	0	69,500	2,806,345	0	92,522
2006	2,052,755	0	592,846	2,615,030	0	755,234
2007	1,956,742	236,629	373,844	2,385,377	288,464	455,736
2008	1,883,058	546,087	462,179	2,196,700	637,043	539,159
2009	1,830,940	530,972	785,738	2,043,924	592,738	877,190
2010	1,759,287	510,193	1,184,088	1,879,365	545,016	1,264,906
2011	1,682,106	487,811	1,123,747	1,719,537	498,666	1,148,753
Total	16,238,384	2,311,692	4,816,554	19,848,719	2,561,926	5,445,904
2012	1,557,309	451,620	688,591	1,523,410	441,789	673,601
2013	1,441,771	666,222	791,108	1,349,652	623,655	740,562
2014	1,334,299	787,681	925,643	1,195,260	705,602	829,188
2015	1,232,101	753,390	976,484	1,056,183	645,822	837,063
2016	1,133,371	693,020	1,050,225	929,713	568,490	861,507
2017	1,038,745	635,159	1,131,226	815,397	498,589	887,993
2018	948,328	579,872	1,217,853	712,365	435,589	914,827
2019	862,572	527,435	1,307,910	620,045	379,138	940,168
2020	781,416	477,811	1,366,874	537,519	328,676	940,243
2021	704,362	430,695	1,462,373	463,651	283,508	962,617
2022	631,887	386,379	1,569,658	398,032	243,384	988,745
2023	564,882	345,407	1,682,562	340,503	208,206	1,014,223
2024	502,650	307,354	1,819,257	289,943	177,291	1,049,399
2025	443,788	271,362	1,901,466	244,966	149,789	1,049,588
2026	390,475	238,763	1,966,834	206,256	126,119	1,038,918
2027	342,628	209,506	2,051,080	173,189	108,899	1,036,764
2028	299,287	183,004	2,152,741	144,767	88,520	1,041,293
2029	260,204	159,106	2,261,564	120,442	73,647	1,046,824
2030	225,032	137,600	2,331,949	99,676	60,949	1,032,922
2031	193,456	118,292	2,388,139	82,000	50,140	1,012,260
2032	165,404	101,139	2,435,427	67,090	41,024	987,850
2033	140,893	86,152	2,491,566	54,688	33,440	967,102
2034	119,486	73,062	2,554,709	44,381	27,138	948,910
2035	100,795	61,633	2,551,605	35,827	21,907	906,944
2036	84,490	51,663	2,501,107	28,738	17,572	850,713
2037	70,434	43,068	2,444,887	22,925	14,018	795,781
2038	58,415	35,719	2,405,803	18,195	11,126	749,339
2039	48,228	29,490	2,371,017	14,375	8,790	706,703
2040	39,579	24,201	2,275,086	11,289	6,903	648,909
2041	32,174	19,674	2,140,551	8,782	5,370	584,245
2042	25,948	15,866	1,976,377	6,777	4,144	516,206
2043	20,830	12,737	1,841,824	5,206	3,183	460,347
Total	15,795,239	8,914,083	59,033,493	11,621,243	6,389,415	28,021,752
Grand Total	32,033,622	11,225,775	63,850,046	31,469,962	8,951,341	33,467,657
Minimum Required Loss Ratios			58%	85%		
Minimum PV Incurred Claims			18,252,578	7,608,640	25,861,218	
Dual Loss Ratio Test Met			33,467,657	>	25,861,218	

Lifetime Experience (Nationwide) as of 12/31/2014

Non-Lifetime Benefit Periods - Post Stabilization Experience

Non-Interest Adjusted				Interest Adjusted		
VA Rate Level						
Year	Original Premium	Increased Premium	Incurred Claims	Original Premium	Increased Premium	Incurred Claims
1998	0	0	0	0	0	0
1999	0	0	0	0	0	0
2000	0	0	0	0	0	0
2001	5,564	0	0	10,080	0	0
2002	124,727	0	0	216,230	0	0
2003	959,199	0	0	1,591,278	0	0
2004	1,875,935	0	209,237	2,978,096	0	332,169
2005	2,108,071	0	65,865	3,202,506	0	100,060
2006	2,052,755	0	535,770	2,984,184	0	778,873
2007	1,956,742	236,629	347,698	2,722,111	329,185	483,698
2008	1,883,058	546,087	430,039	2,506,799	726,972	572,484
2009	1,830,940	530,972	652,788	2,332,457	676,412	831,595
2010	1,759,287	510,193	1,093,010	2,144,668	621,954	1,332,439
2011	1,682,106	487,811	582,273	1,962,277	569,060	679,256
2012	1,556,962	451,519	1,230,166	1,738,076	504,042	1,373,265
2013	1,478,031	682,977	1,655,406	1,578,912	729,593	1,768,394
2014	1,409,166	831,877	1,487,038	1,440,523	850,389	1,520,128
Total	20,682,542	4,278,066	8,289,290	27,408,197	5,007,607	9,772,362
2015	1,291,227	772,384	1,534,859	1,263,120	755,571	1,501,448
2016	1,181,549	706,777	1,593,171	1,106,057	661,619	1,491,379
2017	1,079,572	645,777	1,648,625	967,077	578,484	1,476,832
2018	985,297	589,383	1,698,646	844,617	505,232	1,456,116
2019	897,239	536,709	1,781,795	736,012	440,266	1,461,620
2020	815,316	487,704	1,862,883	640,009	382,840	1,462,332
2021	737,946	441,424	1,917,461	554,331	331,589	1,440,359
2022	665,272	397,951	2,004,781	478,219	286,060	1,441,102
2023	596,751	356,964	1,965,953	410,492	245,548	1,352,336
2024	533,734	319,268	1,917,643	351,334	210,160	1,262,301
2025	475,907	284,677	1,939,583	299,779	179,321	1,221,764
2026	422,623	252,804	1,963,842	254,751	152,386	1,183,775
2027	373,740	223,563	1,981,177	215,584	128,958	1,142,799
2028	329,138	196,883	1,983,378	181,681	108,677	1,094,802
2029	288,683	172,684	1,976,178	152,488	91,215	1,043,854
2030	252,166	150,840	1,956,670	127,463	76,245	989,043
2031	219,295	131,177	1,932,582	106,074	63,451	934,801
2032	189,855	113,567	1,903,536	87,879	52,567	881,101
2033	163,523	97,816	1,829,436	72,431	43,327	810,337
2034	140,268	83,906	1,738,803	59,456	35,565	737,026
2035	119,748	71,631	1,668,425	48,572	29,055	676,741
2036	101,691	60,830	1,594,512	39,472	23,611	618,910
2037	85,914	51,392	1,517,485	31,912	19,089	563,648
2038	72,200	43,188	1,434,399	25,663	15,351	509,844
2039	60,350	36,100	1,340,116	20,527	12,279	455,820
2040	50,176	30,014	1,235,659	16,332	9,769	402,192
2041	41,476	24,810	1,134,498	12,919	7,728	353,364
2042	34,087	20,390	1,034,253	10,160	6,077	308,268
2043	27,830	16,647	934,347	7,938	4,748	266,498
Total	12,232,572	7,317,260	49,024,697	9,122,344	5,456,790	28,540,412
Grand Total	32,915,114	11,595,326	57,313,986	36,530,541	10,464,396	38,312,775
Minimum Required Loss Ratios			58%	85%		
Minimum PV Incurred Claims			21,187,714	8,894,737	30,082,451	
Dual Loss Ratio Test Met			38,312,775	>	30,082,451	

Lifetime Experience (Nationwide) as of 12/31/2015

Non-Lifetime Benefit Periods - Post Stabilization Experience

Non-Interest Adjusted				Interest Adjusted		
VA Rate Level						
Year	Original Premium	Increased Premium	Incurred Claims	Original Premium	Increased Premium	Incurred Claims
1998	0	0	0	0	0	0
1999	0	0	0	0	0	0
2000	0	0	0	0	0	0
2001	5,564	0	0	10,534	0	0
2002	124,727	0	0	225,960	0	0
2003	959,199	0	0	1,662,886	0	0
2004	1,875,935	0	209,237	3,112,111	0	347,117
2005	2,108,071	0	65,865	3,346,619	0	104,562
2006	2,052,755	0	535,770	3,118,472	0	813,923
2007	1,956,742	236,629	347,698	2,844,606	343,998	505,465
2008	1,883,058	546,087	430,039	2,619,605	759,686	598,246
2009	1,830,940	530,972	654,237	2,437,417	706,851	870,946
2010	1,759,287	510,193	1,335,505	2,241,178	649,942	1,701,317
2011	1,682,106	487,811	622,344	2,050,579	594,668	758,672
2012	1,556,962	451,519	1,279,254	1,816,289	526,724	1,492,326
2013	1,478,031	682,977	1,371,419	1,649,963	762,425	1,530,590
2014	1,409,166	831,877	1,327,505	1,505,347	888,656	1,418,113
2015	1,356,160	829,248	1,703,246	1,386,338	847,701	1,741,147
Total	22,038,702	5,107,314	9,882,120	30,027,904	6,080,650	11,882,783
2016	1,240,986	758,774	1,730,134	1,213,972	742,257	1,692,473
2017	1,133,895	693,197	1,790,034	1,061,447	648,906	1,675,664
2018	1,034,891	632,530	1,843,986	927,052	566,618	1,651,836
2019	942,416	575,837	1,933,757	807,859	493,620	1,657,657
2020	856,383	523,070	2,021,068	702,497	429,078	1,657,897
2021	775,130	473,217	2,080,240	608,464	371,468	1,632,954
2022	698,806	426,395	2,174,530	524,929	320,300	1,633,464
2023	626,842	382,249	2,132,246	450,595	275,723	1,532,728
2024	560,657	341,672	2,079,511	385,664	235,029	1,430,450
2025	499,922	304,469	2,102,943	329,077	200,419	1,384,276
2026	443,958	270,203	2,128,928	279,654	170,204	1,341,035
2027	392,615	238,765	2,147,450	236,662	143,936	1,294,451
2028	345,767	210,136	2,149,592	199,448	121,212	1,239,945
2029	303,274	184,169	2,141,554	167,404	101,659	1,182,113
2030	264,916	160,748	2,120,102	139,934	84,910	1,119,878
2031	230,387	139,681	2,093,884	116,455	70,605	1,058,401
2032	199,462	120,830	2,062,244	96,481	58,446	997,519
2033	171,801	103,982	1,981,824	79,523	48,131	917,339
2034	147,572	89,120	1,883,454	65,278	39,475	834,264
2035	125,815	76,018	1,807,073	53,329	32,222	765,964
2036	106,846	64,501	1,726,891	43,338	26,163	700,456
2037	90,271	54,448	1,643,378	35,039	21,134	637,877
2038	75,862	45,718	1,553,349	28,178	16,981	576,969
2039	63,412	38,183	1,451,220	22,539	13,572	515,823
2040	52,723	31,721	1,338,045	17,933	10,789	455,116
2041	43,583	26,200	1,228,473	14,186	8,528	399,853
2042	35,819	21,515	1,119,914	11,157	6,701	348,821
2043	29,244	17,551	1,011,716	8,717	5,231	301,551
2044	23,733	14,233	898,590	6,769	4,060	256,299
2045	19,154	11,478	791,323	5,228	3,133	215,985
2046	15,359	9,197	690,879	4,012	2,402	180,449
2047	12,250	7,331	600,225	3,062	1,832	150,021
2048	9,717	5,811	518,991	2,324	1,390	123,916
2049	7,659	4,478	442,682	1,753	1,048	101,320
2050	5,996	3,582	373,672	1,313	784	81,842
2051	4,659	2,781	313,702	976	583	65,749
2052	3,597	2,146	261,202	721	430	52,388
2053	2,766	1,649	216,564	531	317	41,565
2054	2,112	1,259	177,358	388	231	32,574
2055	1,600	953	143,785	281	168	25,271
2056	1,199	714	115,354	202	120	19,401
2057	891	530	92,157	143	85	14,832
2058	663	394	73,566	102	61	11,330
2059	491	292	58,330	72	43	8,597
2060	360	214	45,722	51	30	6,448
2061	260	155	35,351	35	21	4,771
2062	186	110	26,974	24	14	3,484
2063	134	79	20,802	17	10	2,571
2064	97	57	16,014	11	7	1,894
2065	69	41	12,188	8	5	1,379
2066	49	29	9,103	5	3	986
2067	34	20	6,699	3	2	694
2068	23	14	4,947	2	1	491
2069	15	9	3,609	1	1	342
2070	4	3	2,553	0	0	232
2071	0	0	0	0	0	0
2072	0	0	0	0	0	0
Total	11,606,135	7,072,579	57,428,985	8,654,846	5,279,149	32,041,605
Grand Total	33,644,837	12,179,893	67,311,105	38,682,750	11,359,799	43,924,388
Minimum Required Loss Ratios				58%	85%	
Minimum PV Incurred Claims				22,435,995	9,655,829	32,091,824
Dual Loss Test Met				43,924,388	>	32,091,824

Lifetime Experience (Nationwide) as of 06/30/2012

Lifetime Benefit Period - Post Stabilization Experience

Non-Interest Adjusted				Interest Adjusted		
Year	Original Premium	Increased Premium	Incurred Claims	Original Premium	Increased Premium	Incurred Claims
1998	0	0	0	0	0	0
1999	0	0	0	0	0	0
2000	0	0	0	0	0	0
2001	13,893	0	0	22,056	0	0
2002	294,797	0	509	447,846	0	773
2003	1,597,074	0	0	2,321,740	0	0
2004	2,473,678	0	22,166	3,441,243	0	30,836
2005	2,593,563	0	332,525	3,452,650	0	442,670
2006	2,533,916	0	335,293	3,227,987	0	427,135
2007	2,498,942	302,197	1,793,509	3,046,348	368,395	2,186,386
2008	2,462,104	714,010	1,369,439	2,872,192	832,936	1,597,533
2009	2,413,851	700,017	167,150	2,694,643	781,446	186,594
2010	2,374,809	688,694	637,323	2,536,898	735,700	680,823
2011	2,334,484	677,000	2,302,528	2,386,432	692,065	2,353,765
Total	21,591,113	3,081,919	6,960,442	26,450,037	3,410,543	7,906,513
2012	2,158,870	626,072	1,233,848	2,111,876	612,444	1,206,990
2013	1,996,467	1,094,322	1,382,759	1,868,907	1,024,402	1,294,411
2014	1,847,574	1,664,131	1,589,329	1,655,050	1,490,723	1,423,715
2015	1,706,384	1,727,543	1,694,082	1,462,748	1,480,887	1,452,204
2016	1,569,429	1,588,890	1,842,675	1,287,414	1,303,378	1,511,560
2017	1,437,848	1,455,678	2,006,334	1,128,687	1,142,683	1,574,939
2018	1,311,760	1,328,026	2,183,830	985,368	997,586	1,640,450
2019	1,192,145	1,206,928	2,380,053	856,953	867,579	1,710,860
2020	1,078,937	1,092,316	2,594,629	742,177	751,380	1,784,789
2021	971,277	983,321	2,785,008	639,350	647,278	1,833,250
2022	869,992	880,780	2,992,239	548,017	554,813	1,884,843
2023	776,416	786,044	3,217,170	468,012	473,816	1,939,263
2024	689,540	698,090	3,512,939	397,746	402,678	2,026,362
2025	607,756	615,292	3,713,997	335,474	339,634	2,050,084
2026	533,595	540,212	3,977,139	281,855	285,530	2,100,799
2027	466,967	472,757	4,248,995	236,039	238,966	2,147,750
2028	406,720	411,763	4,496,190	196,733	199,172	2,174,833
2029	352,473	356,843	4,762,789	163,151	165,174	2,204,582
2030	303,779	307,546	4,996,983	134,557	136,226	2,213,383
2031	260,186	263,412	5,149,679	110,285	111,652	2,182,793
2032	221,605	224,353	5,303,287	89,887	91,001	2,151,103
2033	188,043	190,375	5,470,998	72,989	73,894	2,123,569
2034	158,829	160,798	5,658,215	58,995	59,726	2,101,662
2035	133,425	135,079	5,704,705	47,425	48,013	2,027,685
2036	111,384	112,765	5,667,422	37,886	38,355	1,927,687
2037	92,472	93,619	5,618,402	30,099	30,472	1,828,721
2038	76,378	77,325	5,588,865	23,790	24,085	1,740,772
2039	62,780	63,558	5,550,300	18,712	18,944	1,654,316
2040	51,285	51,921	5,385,552	14,628	14,809	1,536,087
2041	41,507	42,022	5,128,436	11,329	11,466	1,399,763
2042	33,335	33,748	4,851,497	8,707	8,815	1,267,153
2043	26,658	26,988	4,614,288	6,663	6,745	1,153,298
Total	21,735,815	19,312,517	125,302,635	16,031,507	13,652,149	57,269,672
Grand Total	43,326,928	22,394,436	132,263,077	42,481,544	17,062,692	65,176,185
Minimum Required Loss Ratios			58%	85%		
Minimum PV Incurred Claims			24,639,295	14,503,288	39,142,583	
Dual Loss Ratio Test Met			65,176,185	>	39,142,583	

Lifetime Experience (Nationwide) as of 12/31/2014

Lifetime Benefit Period - Post Stabilization Experience

Non-Interest Adjusted				Interest Adjusted		
	VA Rate Level					
Year	Original Premium	Increased Premium	Incurred Claims	Original Premium	Increased Premium	Incurred Claims
1998	0	0	0	0	0	0
1999	0	0	0	0	0	0
2000	0	0	0	0	0	0
2001	13,893	0	0	25,170	0	0
2002	294,797	0	487	511,066	0	844
2003	1,597,074	0	0	2,649,491	0	0
2004	2,473,678	0	21,213	3,927,030	0	33,676
2005	2,593,563	0	204,578	3,940,048	0	310,788
2006	2,533,916	0	305,634	3,683,670	0	444,314
2007	2,498,942	302,197	1,844,329	3,476,389	420,400	2,565,728
2008	2,462,104	714,010	1,679,534	3,277,648	950,518	2,235,860
2009	2,413,851	700,017	302,627	3,075,035	891,760	385,520
2010	2,374,809	688,694	825,888	2,895,022	839,556	1,006,803
2011	2,334,484	677,000	2,574,587	2,723,316	789,762	3,003,410
2012	2,124,330	616,056	1,437,974	2,371,443	687,719	1,605,247
2013	1,946,519	1,066,943	2,436,980	2,079,376	1,139,766	2,603,313
2014	1,867,834	1,682,380	2,763,214	1,909,398	1,719,817	2,824,702
Total	27,529,796	6,447,298	14,397,044	36,544,103	7,439,298	17,020,204
2015	1,747,713	1,666,687	3,189,095	1,709,669	1,630,407	3,119,675
2016	1,632,147	1,556,478	3,426,848	1,527,864	1,457,030	3,207,897
2017	1,520,254	1,449,773	3,669,717	1,361,838	1,298,701	3,287,319
2018	1,413,250	1,347,730	3,915,895	1,211,468	1,155,303	3,356,788
2019	1,310,595	1,249,834	4,270,290	1,075,091	1,025,248	3,502,951
2020	1,212,074	1,155,880	4,672,496	951,457	907,347	3,667,831
2021	1,116,758	1,064,984	4,966,842	838,886	799,995	3,730,993
2022	1,025,150	977,623	5,325,446	736,911	702,747	3,828,104
2023	936,711	893,284	5,431,479	644,343	614,470	3,736,196
2024	853,847	814,261	5,442,316	562,050	535,993	3,582,400
2025	774,569	738,659	5,705,382	487,909	465,289	3,593,881
2026	696,549	664,256	5,969,168	419,869	400,404	3,598,127
2027	629,089	599,924	6,212,211	362,876	346,053	3,583,377
2028	567,304	541,003	6,418,760	313,145	298,627	3,543,082
2029	510,047	486,401	6,616,051	269,417	256,926	3,494,722
2030	456,850	435,670	6,816,438	230,925	220,219	3,445,522
2031	407,413	388,525	6,948,395	197,068	187,932	3,360,978
2032	361,860	345,084	7,075,717	167,497	159,731	3,275,182
2033	319,816	304,989	7,053,149	141,660	135,093	3,124,149
2034	281,603	268,547	6,928,771	119,363	113,829	2,936,896
2035	247,152	235,694	6,907,105	100,249	95,601	2,801,639
2036	215,735	205,734	6,852,880	83,738	79,856	2,659,946
2037	187,365	178,679	6,755,505	69,594	66,368	2,509,235
2038	161,964	154,455	6,597,647	57,569	54,900	2,345,072
2039	139,413	132,950	6,362,857	47,419	45,221	2,164,228
2040	119,439	113,902	6,081,924	38,876	37,074	1,979,591
2041	101,719	97,004	5,766,708	31,683	30,214	1,796,165
2042	86,131	82,138	5,451,362	25,672	24,482	1,624,827
2043	72,454	69,095	5,089,140	20,666	19,707	1,451,544
Total	19,104,970	18,219,240	165,919,594	13,804,772	13,164,766	88,308,558
Grand Total	46,634,766	24,666,538	180,316,638	50,348,876	20,604,064	105,328,563
Minimum Required Loss Ratios			58%	85%		
Minimum PV Incurred Claims			29,202,348	17,513,454	46,715,802	
Dual Loss Ratio Test Met			105,328,563	>	46,715,802	

Lifetime Experience (Nationwide) as of 12/31/2015

Lifetime Benefit Period - Post Stabilization Experience

Non-Interest Adjusted				Interest Adjusted		
Year	Original Premium	VA Rate Level Increased Premium	Incurred Claims	Original Premium	Increased Premium	Incurred Claims
1998	0	0	0	0	0	0
1999	0	0	0	0	0	0
2000	0	0	0	0	0	0
2001	13,893	0	0	26,303	0	0
2002	294,797	0	487	534,064	0	882
2003	1,597,074	0	0	2,768,718	0	0
2004	2,473,678	0	21,213	4,103,747	0	35,192
2005	2,593,563	0	204,578	4,117,350	0	324,773
2006	2,533,916	0	305,634	3,849,435	0	464,308
2007	2,498,942	302,197	2,009,978	3,632,827	439,318	2,921,997
2008	2,462,104	714,010	1,623,346	3,425,142	993,291	2,258,309
2009	2,413,851	700,017	345,174	3,213,412	931,889	459,509
2010	2,374,809	688,694	904,545	3,025,298	877,337	1,152,311
2011	2,334,484	677,000	2,542,542	2,845,865	825,301	3,099,498
2012	2,124,330	616,056	1,458,838	2,478,158	718,666	1,701,822
2013	1,946,519	1,066,943	1,714,665	2,172,948	1,191,056	1,914,124
2014	1,867,834	1,682,380	3,349,419	1,995,321	1,797,209	3,578,030
2015	1,787,513	1,809,678	2,786,157	1,827,289	1,849,948	2,848,155
Total	29,317,309	8,256,977	17,266,576	40,015,877	9,624,014	20,758,911
2016	1,669,249	1,773,542	3,564,026	1,632,913	1,734,935	3,486,444
2017	1,554,738	2,563,149	3,816,619	1,455,401	2,399,382	3,572,670
2018	1,445,226	2,902,557	4,072,431	1,294,628	2,600,100	3,648,069
2019	1,340,162	2,691,445	4,440,837	1,148,815	2,307,164	3,806,780
2020	1,239,324	2,488,822	4,858,908	1,016,627	2,041,599	3,985,799
2021	1,141,761	2,292,768	5,164,819	896,264	1,799,785	4,054,297
2022	1,047,997	2,104,352	5,537,594	787,234	1,580,747	4,159,731
2023	957,473	1,922,449	5,647,783	688,263	1,381,919	4,059,811
2024	872,673	1,752,064	5,658,931	600,293	1,205,207	3,892,655
2025	791,567	1,589,129	5,932,307	521,054	1,046,055	3,904,980
2026	711,773	1,428,864	6,206,424	448,353	900,057	3,909,493
2027	642,757	1,290,215	6,458,971	387,444	777,723	3,893,373
2028	579,546	1,163,227	6,673,571	334,299	670,982	3,849,503
2029	520,977	1,045,570	6,878,539	287,573	577,143	3,796,875
2030	466,567	936,279	7,086,722	246,449	494,560	3,734,339
2031	416,012	834,740	7,223,744	210,282	421,938	3,651,044
2032	369,435	741,202	7,356,002	178,698	358,523	3,558,140
2033	326,451	654,886	7,332,424	151,107	303,131	3,394,005
2034	287,392	576,464	7,202,970	127,299	255,341	3,190,511
2035	252,186	505,785	7,180,327	106,894	214,387	3,043,523
2036	220,089	441,357	7,123,850	89,272	179,022	2,889,554
2037	191,111	383,198	7,022,537	74,180	148,738	2,725,799
2038	165,171	331,144	6,858,368	61,350	122,999	2,547,442
2039	142,146	284,947	6,614,246	50,524	101,282	2,350,972
2040	121,757	244,045	6,322,161	41,414	83,008	2,150,386
2041	103,674	207,773	5,994,438	33,745	67,628	1,951,116
2042	87,769	175,878	5,666,610	27,338	54,781	1,764,987
2043	73,818	147,902	5,290,058	22,002	44,084	1,576,749
2044	61,724	123,656	4,835,157	17,605	35,270	1,379,102
2045	51,497	103,156	4,402,588	14,056	28,156	1,201,649
2046	42,677	85,478	3,983,199	11,147	22,326	1,040,363
2047	35,161	70,416	3,591,884	8,788	17,600	897,558
2048	28,839	57,749	3,216,092	6,898	13,812	769,217
2049	23,537	47,128	2,849,292	5,387	10,787	652,141
2050	19,130	38,299	2,498,713	4,190	8,388	547,273
2051	15,445	30,918	2,173,983	3,237	6,480	455,646
2052	12,367	24,754	1,892,803	2,480	4,965	379,630
2053	9,839	19,694	1,638,588	1,888	3,780	314,491
2054	7,754	15,519	1,390,978	1,424	2,850	255,472
2055	6,095	12,198	1,167,933	1,071	2,144	205,269
2056	4,753	9,511	968,328	799	1,600	162,859
2057	3,668	7,339	803,038	590	1,181	129,244
2058	2,814	5,629	665,009	433	867	102,420
2059	2,153	4,307	543,515	317	635	80,104
2060	1,634	3,270	434,905	230	461	61,337
2061	1,232	2,464	339,140	166	335	45,716
2062	916	1,833	265,833	118	237	34,332
2063	682	1,363	211,252	84	168	26,108
2064	503	1,006	166,312	59	119	19,669
2065	368	736	128,225	42	83	14,512
2066	267	534	94,794	29	58	10,266
2067	189	378	70,344	20	39	7,290
2068	131	261	53,040	13	26	5,260
2069	77	154	39,978	7	15	3,794
2070	38	75	28,870	3	7	2,682
2071	0	0	4	0	0	0
2072	0	0	0	0	0	0
Total	18,072,288	34,141,579	207,639,114	13,000,799	24,034,604	101,361,807
Grand Total	47,389,597	42,398,555	224,905,691	53,016,676	33,658,618	122,120,718
	Minimum Required Loss Ratios		58%	85%		
	Minimum PV Incurred Claims		30,749,672	28,609,826		59,359,498
	Dual Loss Ratio Test Met		122,120,718	>		59,359,498

Lifetime Experience (Nationwide) as of 06/30/2012

All Benefit Periods Combined - Post Stabilization Experience

Non-Interest Adjusted				Interest Adjusted		
Year	Original Premium	Increased Premium	Incurred Claims	Original Premium	Increased Premium	Incurred Claims
1998	0	0	0	0	0	0
1999	0	0	0	0	0	0
2000	0	0	0	0	0	0
2001	19,458	0	0	30,889	0	0
2002	419,525	0	509	637,327	0	773
2003	2,556,274	0	0	3,716,172	0	0
2004	4,349,613	0	246,733	6,050,939	0	343,241
2005	4,701,633	0	402,025	6,258,995	0	535,191
2006	4,586,671	0	928,139	5,843,018	0	1,182,368
2007	4,455,685	538,826	2,167,352	5,431,725	656,858	2,642,122
2008	4,345,162	1,260,097	1,831,618	5,068,892	1,469,979	2,136,692
2009	4,244,791	1,230,989	952,934	4,738,567	1,374,184	1,063,784
2010	4,134,096	1,198,888	1,821,411	4,416,263	1,280,716	1,945,729
2011	4,016,590	1,164,811	3,426,275	4,105,969	1,190,731	3,502,518
Total	37,829,496	5,393,611	11,776,995	46,298,756	5,972,469	13,352,417
2012	3,716,180	1,077,692	1,922,439	3,635,286	1,054,233	1,880,591
2013	3,438,239	1,760,544	2,173,867	3,218,560	1,648,058	2,034,973
2014	3,181,873	2,451,812	2,514,972	2,850,310	2,196,324	2,252,902
2015	2,938,484	2,480,933	2,670,566	2,518,932	2,126,709	2,289,267
2016	2,702,800	2,281,910	2,892,900	2,217,127	1,871,868	2,373,068
2017	2,476,593	2,090,837	3,137,560	1,944,084	1,641,272	2,462,932
2018	2,260,088	1,907,898	3,401,683	1,697,733	1,433,175	2,555,277
2019	2,054,717	1,734,363	3,687,963	1,476,998	1,246,717	2,651,029
2020	1,860,353	1,570,127	3,961,503	1,279,696	1,080,056	2,725,032
2021	1,675,639	1,414,016	4,247,381	1,103,001	930,785	2,795,867
2022	1,501,879	1,267,159	4,561,897	946,050	798,197	2,873,588
2023	1,341,298	1,131,451	4,899,732	808,515	682,022	2,953,486
2024	1,192,190	1,005,445	5,332,196	687,689	579,969	3,075,760
2025	1,051,543	886,654	5,615,463	580,440	489,423	3,099,671
2026	924,070	778,975	5,943,972	488,111	411,469	3,139,717
2027	809,594	682,263	6,300,075	409,228	344,865	3,184,514
2028	706,007	594,768	6,648,931	341,500	287,692	3,216,126
2029	612,677	515,950	7,024,353	283,593	238,821	3,251,406
2030	528,811	445,145	7,328,932	234,233	197,174	3,246,305
2031	453,642	381,704	7,537,818	192,285	161,793	3,195,052
2032	387,009	325,492	7,738,714	156,977	132,025	3,138,953
2033	328,936	276,526	7,962,564	127,677	107,334	3,090,670
2034	278,315	233,860	8,212,924	103,376	86,864	3,050,572
2035	234,220	196,713	8,256,310	83,251	69,920	2,934,629
2036	195,874	164,428	8,168,529	66,624	55,928	2,778,400
2037	162,906	136,687	8,063,289	53,024	44,490	2,624,502
2038	134,793	113,044	7,994,668	41,984	35,210	2,490,111
2039	111,008	93,048	7,921,317	33,087	27,734	2,361,019
2040	90,864	76,122	7,660,638	25,917	21,712	2,184,996
2041	73,681	61,695	7,268,987	20,111	16,839	1,984,007
2042	59,283	49,615	6,827,874	15,484	12,959	1,783,359
2043	47,487	39,725	6,456,112	11,869	9,929	1,613,645
Total	37,531,054	28,226,600	184,336,128	27,652,749	20,041,564	85,291,424
Grand Total	75,360,550	33,620,211	196,113,123	73,951,506	26,014,033	98,643,841
Minimum Required Loss Ratios			58%	85%		
Minimum PV Incurred Claims			42,891,873	22,111,928	65,003,801	
Dual Loss Ratio Test Met			98,643,841	>	65,003,801	

Lifetime Experience (Nationwide) as of 12/31/2014

All Benefit Periods Combined - Post Stabilization Experience

Non-Interest Adjusted				Interest Adjusted		
	VA Rate Level					
Year	Original Premium	Increased Premium	Incurred Claims	Original Premium	Increased Premium	Incurred Claims
1998	0	0	0	0	0	0
1999	0	0	0	0	0	0
2000	0	0	0	0	0	0
2001	19,458	0	0	35,250	0	0
2002	419,525	0	487	727,296	0	844
2003	2,556,274	0	0	4,240,770	0	0
2004	4,349,613	0	230,450	6,905,127	0	365,846
2005	4,701,633	0	270,443	7,142,554	0	410,847
2006	4,586,671	0	841,404	6,667,854	0	1,223,188
2007	4,455,685	538,826	2,192,027	6,198,500	749,585	3,049,426
2008	4,345,162	1,260,097	2,109,573	5,784,447	1,677,490	2,808,345
2009	4,244,791	1,230,989	955,415	5,407,492	1,568,173	1,127,115
2010	4,134,096	1,198,888	1,918,898	5,039,690	1,461,510	2,339,242
2011	4,016,590	1,164,811	3,156,860	4,685,593	1,388,822	3,682,666
2012	3,681,292	1,067,575	2,668,140	4,109,519	1,191,761	2,978,512
2013	3,424,550	1,749,921	4,092,386	3,658,288	1,869,359	4,371,706
2014	3,277,000	2,514,257	4,250,252	3,349,921	2,570,206	4,344,830
Total	48,212,338	10,725,364	22,686,334	63,952,300	12,446,905	26,792,567
2015	3,038,941	2,439,072	4,723,954	2,972,789	2,385,978	4,621,123
2016	2,813,696	2,263,256	5,020,019	2,633,921	2,118,650	4,699,276
2017	2,599,826	2,095,550	5,318,343	2,328,914	1,877,186	4,764,152
2018	2,398,546	1,937,113	5,614,541	2,056,085	1,660,534	4,812,904
2019	2,207,834	1,786,543	6,052,085	1,811,102	1,465,515	4,964,571
2020	2,027,389	1,643,585	6,535,379	1,591,467	1,290,186	5,130,163
2021	1,854,704	1,506,407	6,884,303	1,393,217	1,131,583	5,171,352
2022	1,690,422	1,375,574	7,330,226	1,215,311	988,808	5,269,206
2023	1,533,462	1,250,247	7,397,432	1,054,835	860,018	5,088,532
2024	1,387,580	1,133,529	7,359,959	913,384	746,153	4,844,742
2025	1,250,475	1,023,336	7,644,965	787,688	644,610	4,815,645
2026	1,119,171	917,060	7,933,010	674,620	552,790	4,781,902
2027	1,002,829	823,487	8,193,388	578,460	475,010	4,726,176
2028	896,442	737,886	8,402,138	494,826	407,305	4,637,884
2029	798,731	659,085	8,592,229	421,904	348,141	4,538,576
2030	709,015	586,510	8,773,108	358,388	296,464	4,434,565
2031	626,708	519,702	8,880,977	303,142	251,383	4,295,779
2032	551,715	458,651	8,979,253	255,376	212,299	4,156,283
2033	483,338	402,805	8,882,586	214,092	178,420	3,934,486
2034	421,871	352,453	8,667,574	178,818	149,394	3,673,922
2035	366,900	307,324	8,575,530	148,821	124,656	3,478,380
2036	317,427	266,563	8,447,392	123,209	103,467	3,278,857
2037	273,280	230,071	8,272,989	101,506	85,456	3,072,882
2038	234,164	197,644	8,032,046	83,231	70,251	2,854,916
2039	199,763	169,050	7,702,974	67,946	57,500	2,620,048
2040	169,615	143,916	7,317,583	55,208	46,843	2,381,783
2041	143,196	121,814	6,901,207	44,601	37,942	2,149,529
2042	120,218	102,528	6,485,615	35,832	30,559	1,933,095
2043	100,284	85,742	6,023,486	28,403	24,456	1,718,042
Total	31,337,542	25,536,500	214,944,290	22,927,117	18,621,555	116,848,770
Grand Total	79,549,880	36,261,864	237,630,624	86,879,417	31,068,460	143,641,337
Minimum Required Loss Ratios			58%	85%		
Minimum PV Incurred Claims			50,390,062	26,408,191	76,798,253	
Dual Loss Ratio Test Met			143,641,337	>	76,798,253	

Lifetime Experience (Nationwide) as of 12/31/2015

All Benefit Periods Combined - Post Stabilization Experience

Non-Interest Adjusted				Interest Adjusted			
	Original Premium	VA Rate Level Increased Premium	Incurred Claims	Original Premium	Increased Premium	Incurred Claims	
Year	Premium	Premium	Claims	Premium	Premium	Claims	
1998	0	0	0	0	0	0	
1999	0	0	0	0	0	0	
2000	0	0	0	0	0	0	
2001	19,458	0	0	36,836	0	0	
2002	419,525	0	487	760,024	0	882	
2003	2,556,274	0	0	4,431,604	0	0	
2004	4,349,613	0	230,450	7,215,858	0	382,309	
2005	4,701,633	0	270,443	7,463,969	0	429,335	
2006	4,586,671	0	841,404	6,967,907	0	1,278,231	
2007	4,455,685	538,826	2,357,676	6,477,433	783,316	3,427,462	
2008	4,345,162	1,260,097	2,053,385	6,044,748	1,752,977	2,856,555	
2009	4,244,791	1,230,989	999,411	5,650,829	1,638,741	1,330,454	
2010	4,134,096	1,198,888	2,240,050	5,266,476	1,527,278	2,853,628	
2011	4,016,590	1,164,811	3,164,886	4,896,444	1,419,969	3,858,170	
2012	3,681,292	1,067,575	2,738,092	4,294,448	1,245,390	3,194,148	
2013	3,424,550	1,749,921	3,086,084	3,822,911	1,953,481	3,445,074	
2014	3,277,000	2,514,257	4,676,924	3,500,667	2,685,865	4,996,142	
2015	3,143,673	2,638,927	4,489,402	3,213,627	2,697,649	4,589,302	
Total	51,356,011	13,364,291	27,148,696	70,043,781	15,704,665	32,641,693	
2016	2,910,235	2,532,316	5,294,160	2,846,885	2,477,193	5,178,917	
2017	2,688,633	3,256,345	5,606,553	2,516,648	3,048,288	5,248,334	
2018	2,480,117	3,535,086	5,916,417	2,221,680	3,166,717	5,299,005	
2019	2,282,577	3,267,282	6,374,593	1,956,674	2,800,784	5,464,437	
2020	2,095,707	3,011,892	6,879,975	1,719,124	2,470,677	5,643,696	
2021	1,916,892	2,765,986	7,245,059	1,504,728	2,171,252	5,687,251	
2022	1,746,803	2,530,747	7,172,124	1,312,164	1,901,047	5,793,195	
2023	1,584,316	2,304,698	7,780,029	1,138,585	1,656,692	5,592,540	
2024	1,433,330	2,093,737	7,738,442	985,956	1,440,236	5,323,105	
2025	1,291,489	1,893,598	8,035,250	850,131	1,246,473	5,289,257	
2026	1,155,731	1,699,067	8,335,333	728,007	1,070,261	5,250,528	
2027	1,035,372	1,525,000	8,606,421	624,107	921,659	5,187,824	
2028	925,313	1,373,363	8,823,163	533,747	792,194	5,089,448	
2029	824,251	1,229,740	9,020,093	454,977	678,802	4,978,988	
2030	731,483	1,097,027	9,206,824	386,383	579,470	4,863,217	
2031	646,399	974,421	9,317,629	326,737	492,543	4,709,805	
2032	568,897	862,032	9,418,246	275,179	416,970	4,555,659	
2033	498,252	758,869	9,314,249	230,629	351,262	4,411,345	
2034	434,765	665,584	9,086,423	192,576	294,816	4,024,775	
2035	378,001	581,803	8,987,400	160,225	246,609	3,809,487	
2036	326,935	505,858	8,858,411	132,610	205,184	3,590,010	
2037	281,381	437,646	8,665,914	109,218	169,872	3,363,676	
2038	241,033	376,862	8,411,717	89,528	139,980	3,124,411	
2039	205,558	323,131	8,065,466	73,064	114,854	2,866,795	
2040	174,480	275,765	7,660,206	59,347	93,797	2,605,502	
2041	147,256	233,973	7,222,911	47,930	76,155	2,350,969	
2042	123,588	197,393	6,786,524	38,494	61,482	2,113,809	
2043	103,062	165,454	6,301,774	30,719	49,315	1,878,300	
2044	85,457	137,888	5,733,747	24,374	39,329	1,635,401	
2045	70,651	114,634	5,193,911	19,284	31,288	1,417,633	
2046	58,036	94,676	4,674,078	15,158	24,728	1,220,813	
2047	47,411	77,747	4,191,309	11,850	19,432	1,047,578	
2048	38,556	63,560	3,734,184	9,222	15,202	893,133	
2049	31,197	51,706	3,291,974	7,140	11,834	753,461	
2050	25,126	41,881	2,872,384	5,503	9,173	629,116	
2051	20,104	33,700	2,487,684	4,214	7,063	521,395	
2052	15,963	26,900	2,154,005	3,202	5,395	432,018	
2053	12,605	21,343	1,855,152	2,419	4,096	356,056	
2054	9,866	16,777	1,568,336	1,812	3,081	288,046	
2055	7,696	13,151	1,311,718	1,353	2,311	230,540	
2056	5,952	10,225	1,083,682	1,001	1,720	182,260	
2057	4,559	7,870	895,195	734	1,267	144,076	
2058	3,476	6,024	738,576	535	928	113,750	
2059	2,644	4,599	601,845	390	678	88,701	
2060	1,994	3,483	480,627	281	491	67,785	
2061	1,492	2,619	374,405	201	353	50,542	
2062	1,102	1,943	292,807	142	251	37,816	
2063	815	1,443	232,054	101	178	28,679	
2064	600	1,063	182,326	71	126	21,563	
2065	437	777	140,413	49	88	15,891	
2066	316	563	103,898	34	61	11,252	
2067	222	398	77,042	23	41	7,984	
2068	154	275	57,988	15	27	5,751	
2069	92	163	43,587	9	15	4,137	
2070	42	78	31,423	4	7	2,854	
2071	0	0	4	0	0	0	
2072	0	0	0	0	0	0	
Total	29,678,423	41,214,158	265,068,100	21,655,645	29,313,753	133,403,412	
Grand Total	81,034,434	54,578,448	292,216,795	91,699,426	45,018,417	166,045,105	
		Minimum Required Loss Ratios	58%	85%			
		Minimum PV Incurred Claims	53,185,667	38,265,655		91,451,322	
		Dual Loss Ratio Test Met	166,045,105	>		91,451,322	

Lifetime Experience (Nationwide) as of 06/30/2012

Lifetime Benefit Period - Post-Stabilization Experience

Year	Actual		
	Virginia Rate Level Premium	Incurred Claims	Loss Ratio
2001	13,893	0	0.0%
2002	294,797	509	0.2%
2003	1,597,074	0	0.0%
2004	2,473,678	22,166	0.9%
2005	2,593,563	332,525	12.8%
2006	2,533,916	335,293	13.2%
2007	2,801,139	1,793,509	64.0%
2008	3,176,115	1,369,439	43.1%
2009	3,113,868	167,150	5.4%
2010	3,063,503	637,323	20.8%
2011	3,011,485	2,302,528	76.5%
Total	24,673,032	6,960,442	28.2%
	Revised		
	Virginia Rate Level Premium	Incurred Claims	Loss Ratio
2012	2,784,943	1,233,848	44.3%
2013	3,090,789	1,382,759	44.7%
2014	3,511,705	1,589,329	45.3%
2015	3,433,926	1,694,082	49.3%
2016	3,158,319	1,842,675	58.3%
2017	2,893,526	2,006,334	69.3%
2018	2,639,785	2,183,830	82.7%
2019	2,399,073	2,380,053	99.2%
2020	2,171,252	2,594,629	119.5%
2021	1,954,598	2,785,008	142.5%
2022	1,750,772	2,992,239	170.9%
2023	1,562,460	3,217,170	205.9%
2024	1,387,630	3,512,939	253.2%
2025	1,223,048	3,713,997	303.7%
2026	1,073,807	3,977,139	370.4%
2027	939,724	4,248,995	452.2%
2028	818,483	4,496,190	549.3%
2029	709,316	4,762,789	671.5%
2030	611,325	4,996,983	817.4%
2031	523,598	5,149,679	983.5%
2032	445,959	5,303,287	1189.2%
2033	378,418	5,470,998	1445.8%
2034	319,627	5,658,215	1770.3%
2035	268,504	5,704,705	2124.6%
2036	224,149	5,667,422	2528.4%
2037	186,091	5,618,402	3019.2%
2038	153,703	5,588,865	3636.1%
2039	126,338	5,550,300	4393.2%
2040	103,206	5,385,552	5218.2%
2041	83,528	5,128,436	6139.7%
2042	67,083	4,851,497	7232.1%
2043	53,646	4,614,288	8601.4%
Total	41,048,332	125,302,635	305.3%
	VA Rate Level		
	Earned Premium	Incurred Claims	Loss Ratio
Past Experience	24,673,032	6,960,442	28.2%
Anticipated Experience	41,048,332	125,302,635	305.3%
Lifetime Experience	65,721,364	132,263,077	201.2%
Past Experience @ 4.5%	29,860,580	7,906,513	26.5%
Anticipated Experience @ 4.5%	29,683,656	57,269,672	192.9%
Lifetime Experience @ 4.5%	59,544,236	65,176,185	109.5%

Lifetime Experience (Nationwide) as of 12/31/2015

Lifetime Benefit Period - Post-Stabilization Experience

Year	Actual		
	Virginia Rate Level Premium	Incurred Claims	Loss Ratio
2001	13,893	0	0.0%
2002	294,797	487	0.2%
2003	1,597,074	0	0.0%
2004	2,473,678	21,213	0.9%
2005	2,593,563	204,578	7.9%
2006	2,533,916	305,634	12.1%
2007	2,801,139	2,009,978	71.8%
2008	3,176,115	1,623,346	51.1%
2009	3,113,868	345,174	11.1%
2010	3,063,503	904,545	29.5%
2011	3,011,485	2,542,542	84.4%
2012	2,740,386	1,458,838	53.2%
2013	3,013,462	1,714,665	56.9%
2014	3,550,214	3,349,419	94.3%
2015	3,597,191	2,786,157	77.5%
Total	37,574,285	17,266,576	46.0%
	Revised		
	Virginia Rate Level Premium	Incurred Claims	Loss Ratio
2016	3,359,148	3,564,026	106.1%
2017	3,128,653	3,816,519	122.0%
2018	2,908,216	4,072,431	140.0%
2019	2,696,727	4,440,837	164.7%
2020	2,493,743	4,858,908	194.8%
2021	2,297,344	5,164,819	224.8%
2022	2,108,594	5,537,594	262.6%
2023	1,926,370	5,647,783	293.2%
2024	1,755,677	5,658,931	322.3%
2025	1,592,439	5,932,307	372.5%
2026	1,431,864	6,206,424	433.5%
2027	1,292,958	6,458,971	499.6%
2028	1,165,734	6,673,571	572.5%
2029	1,047,858	6,878,539	656.4%
2030	938,358	7,086,722	755.2%
2031	836,623	7,223,744	863.4%
2032	742,901	7,356,002	990.2%
2033	656,413	7,332,424	1117.0%
2034	577,830	7,202,970	1246.6%
2035	507,004	7,180,327	1416.2%
2036	442,439	7,123,850	1610.1%
2037	384,153	7,022,537	1828.1%
2038	331,983	6,858,368	2065.9%
2039	285,681	6,614,246	2315.3%
2040	244,683	6,322,161	2583.8%
2041	208,326	5,994,438	2877.4%
2042	176,353	5,666,610	3213.2%
2043	148,308	5,290,058	3566.9%
2044	123,999	4,835,157	3899.3%
2045	103,447	4,402,588	4255.9%
2046	85,723	3,983,199	4646.6%
2047	70,620	3,591,084	5085.1%
2048	57,918	3,216,092	5552.8%
2049	47,268	2,849,292	6027.9%
2050	38,414	2,498,713	6504.7%
2051	31,012	2,173,983	7010.1%
2052	24,830	1,892,803	7623.0%
2053	19,755	1,638,588	8294.7%
2054	15,567	1,390,978	8935.4%
2055	12,236	1,167,933	9545.0%
2056	9,541	968,328	10149.0%
2057	7,363	803,038	10907.0%
2058	5,647	665,009	11775.4%
2059	4,321	543,515	12578.3%
2060	3,280	434,905	13258.7%
2061	2,472	339,140	13718.7%
2062	1,839	265,833	14455.5%
2063	1,368	211,252	15444.2%
2064	1,009	166,312	16474.8%
2065	739	128,225	17358.9%
2066	536	94,794	17698.5%
2067	379	70,344	18562.5%
2068	262	53,040	20245.3%
2069	154	39,978	25907.6%
2070	75	28,870	38328.7%
2071	0	4	4040.6%
2072	0	0	0.0%
Total	36,356,156	207,639,114	571.1%
	VA Rate Level		
	Earned Premium	Incurred Claims	Loss Ratio
Past Experience	37,574,285	17,266,576	46.0%
Anticipated Experience	36,356,156	207,639,114	571.1%
Lifetime Experience	73,930,441	224,905,691	304.2%
Past Experience @ 4.5%	49,639,892	20,758,911	41.8%
Anticipated Experience @ 4.5%	26,156,434	101,361,807	387.5%
Lifetime Experience @ 4.5%	75,796,326	122,120,718	161.1%

There is a need to increase premiums on certain policy series. The premium rate increase is necessary to account for anticipated claims significantly higher than originally expected. Higher loss ratios are the result of the combination of policyholders keeping their policies in force longer (lower lapse rates) and insureds staying on claim longer (longer claim continuance).

Mutual of Omaha has been evaluating this LTCi block and updating assumptions based on internal experience as well as the LTCi industry experience. For the forms specified above, projected experience is now worse than what prior assumptions were projecting. Updated claim costs have had the most significant deviation from prior assumptions. The effect of changing the underlying claim costs to better reflect data trends emerging in actual company experience, as well as industry data, resulted in the need for a rate increase.

Long Term Care Insurance Rate Request Summary
Part 1 – To Be Completed By Company

Reset Form

Company Name and NAIC Number:	Mutual of Omaha Insurance Company (71412)
SERFF Tracking Number:	MUTA-130706482
Effective Date:	September 1, 2017 and September 1, 2018

Revised Rates

Average Annual Premium Per Member:	\$2,189
Average Requested Percentage Rate Change Per Member:	27.4%
Minimum Requested Percentage Rate Change Per Member:	0.0%
Maximum Requested Percentage Rate Change Per Member:	49.5%
Number of Policy Holders Affected :	1,551

Plans Affected

(The Form Number and “Product Name”)

Form#	“Product Name”(if applicable)
LT50-Series 19241 0DX5M NH50-Series 19242 0DX6M LT50- Series 19409 NH50- Series 19410 HCA-19629 LTA-19631 NHA-19630 0GH1M-44 0GH3M 0GH4M 0GH5M-44 0GH6M-44 Rev 0GH7M-44 0GH8M-44 0GH9M HCA-20249 LTA-20251 NHA-20250 0GH1M-44 Rev 0GH7M-44 Rev 0GH8M-44 Rev	

Attach a brief narrative to summarize the key information used to develop the rates including the main drivers for new or revised rates.

This document is intended to help explain the rate filing and it is only a summary of the company’s request. It is not intended to describe or include all factors or information considered in the review process. For more detailed information, please refer to the complete filing.

MUTUAL OF OMAHA INSURANCE COMPANY

COUPLES CONFINED CARE POLICY FORM LTA - Series 19631 and 20251
ANNUAL PREMIUM RATES - Effective May 1, 2014

Per \$10 Daily Benefit

Per \$1 Gross Premium

Age	Home Health Care Rider Form 0GH8M		Confined Care Policy Form LTA - Series 19631 and 20251				5% Compound Inflation Rider Form 0GH4M	Shortened Benefit Period Rider Form 0GH5M
	20 Day Elim	0 Day Elim	20 Day Elim	90 Day Elim	180 Day Elim	365 Day Elim		
18-50	18.00	27.72	26.40	21.48	19.32	16.08	1.14	0.19
51	19.20	29.40	28.08	23.04	20.64	17.28	1.11	0.18
52	20.52	31.20	29.88	24.48	21.96	18.48	1.08	0.17
53	21.96	33.48	31.92	26.40	23.64	19.80	1.04	0.16
54	23.64	36.00	34.32	28.44	25.56	21.36	0.99	0.16
55	25.20	38.76	36.96	30.60	27.60	23.04	0.95	0.16
56	27.12	41.88	39.96	33.12	29.76	24.84	0.91	0.16
57	28.92	45.36	43.32	36.00	32.40	27.00	0.87	0.15
58	30.60	49.20	47.16	38.76	34.92	29.04	0.83	0.15
59	32.52	53.64	51.36	42.12	37.92	31.56	0.81	0.15
60	34.56	58.68	56.28	46.08	41.52	34.56	0.77	0.14
61	36.96	64.20	61.44	50.28	45.24	37.68	0.74	0.14
62	39.36	70.44	67.32	55.08	49.56	41.28	0.71	0.14
63	42.72	77.76	73.92	60.84	54.72	45.72	0.68	0.14
64	46.44	86.04	81.48	67.32	60.60	50.52	0.64	0.13
65	50.52	95.28	89.88	74.64	67.20	55.92	0.62	0.13
66	55.08	105.84	99.60	82.44	74.28	61.80	0.58	0.12
67	60.12	117.48	110.40	91.20	82.20	68.40	0.55	0.12
68	65.04	130.20	122.64	99.96	90.00	74.88	0.51	0.12
69	70.68	144.60	136.56	110.04	99.12	82.44	0.48	0.11
70	76.80	160.44	151.92	121.44	109.32	91.08	0.45	0.11
71	83.64	177.72	168.84	133.92	120.48	100.44	0.43	0.10
72	91.20	196.68	187.32	147.48	132.72	110.76	0.40	0.10
73	99.84	216.84	206.76	163.08	146.88	122.28	0.38	0.10
74	109.08	238.44	227.28	179.76	161.76	134.88	0.36	0.10
75	118.92	261.24	249.00	197.52	177.72	148.20	0.34	0.09
76	129.36	285.48	271.68	216.36	194.76	162.24	0.32	0.09
77	140.52	310.80	295.20	236.04	212.52	177.12	0.30	0.09
78	151.92	337.20	319.56	256.32	230.64	192.36	0.28	0.09
79	164.04	364.68	344.76	277.32	249.60	207.96	0.27	0.08
80	176.40	393.48	370.56	299.04	269.16	224.28	0.25	0.08
81	189.24	423.24	397.20	321.00	288.96	240.72	0.23	0.07
82	202.32	453.72	424.20	343.44	309.12	257.52	0.21	0.07
83	215.64	485.40	451.80	365.88	329.28	274.56	0.19	0.06
84	229.32	517.80	479.52	388.56	349.80	291.48	0.18	0.06
85	239.88	542.52	502.20	406.56	365.88	304.92	0.15	0.05
86	250.20	567.96	525.96	425.16	382.68	318.84	0.14	0.05
87	260.28	595.68	551.76	445.32	400.80	333.96	0.13	0.04
88	270.00	625.68	579.60	467.16	420.48	350.40	0.11	0.04
89	279.60	657.00	608.64	490.20	441.12	367.80	0.11	0.04
90	294.84	689.64	639.36	513.96	462.48	385.44	0.09	0.03
91	310.92	723.72	671.16	538.80	484.80	404.04	0.08	0.03
92	327.72	759.24	704.28	564.60	508.20	423.48	0.08	0.03
93	345.24	796.20	738.84	591.48	532.44	443.64	0.07	0.02
94	363.36	834.24	774.60	619.44	557.40	464.52	0.06	0.02
95	382.32	874.08	811.92	648.36	583.44	486.24	0.06	0.02
96	402.00	914.88	850.44	678.00	610.20	508.56	0.05	0.02
97	422.28	957.48	890.28	708.84	637.92	531.60	0.04	0.02
98	443.40	1001.28	931.44	740.76	666.60	555.60	0.04	0.02
99+	465.24	1046.52	973.92	773.52	696.24	580.08	0.04	0.01

For October 2003 and later, rates for ages 80+ are available only for the Guarantee Purchase Benefit Option. For previously sold Inforce policies, this applies to ages 85+.

\$15 Policy Fee per insured (\$30 per couple) payable first year only.

If Tax Qualified Amendment Rider Form 0GH6M elected, premium will be reduced 15%.

To calculate premiums for a specific benefit period, apply the appropriate factors to the above premiums.

Benefit Period	Factor	2013 Increase Factor	2014 Increase Factor
1 year	0.55	1.200	1.000
2 year	0.80	1.200	1.000
3 year	1.00	1.200	1.000
5 year	1.25	1.200	1.100
Lifetime	1.45	1.300	1.200

To calculate premiums for a specific mode, apply the appropriate factor to the above premiums.

Modal Loads	Factor
Annual	1.000
Semi-Annual	0.520
Quarterly	0.260
Monthly/BSP	0.087

MUTUAL OF OMAHA INSURANCE COMPANY

INDIVIDUAL CONFINED CARE POLICY FORM NHA - Series 19630 and 20250
ANNUAL PREMIUM RATES - Effective May 1, 2014

Per \$10 Daily Benefit

Per \$1 Gross Premium

Age	Home Health Care Rider Form OGH7M	Confined Care Policy Form NHA - Series 19630 and 20250					5% Compound Inflation Rider Form OGH3M	Shortened Benefit Period Rider Form OGH5M
	20 Day Elim	0 Day Elim	20 Day Elim	90 Day Elim	180 Day Elim	365 Day Elim		
18-50	17.16	26.04	24.84	20.28	18.36	15.24	1.37	0.19
51	18.24	27.72	26.52	21.72	19.44	16.32	1.32	0.18
52	19.68	29.52	28.20	23.16	20.88	17.52	1.27	0.17
53	21.12	31.80	30.24	24.84	22.32	18.60	1.23	0.16
54	22.68	34.08	32.64	26.88	24.24	20.16	1.17	0.16
55	24.36	36.84	35.16	29.04	26.16	21.84	1.12	0.16
56	26.16	39.84	37.92	31.56	28.44	23.64	1.08	0.16
57	27.96	43.32	41.28	34.32	30.96	25.68	1.03	0.15
58	29.64	47.16	45.24	37.08	33.48	27.84	0.99	0.15
59	31.44	51.60	49.44	40.44	36.48	30.36	0.96	0.15
60	33.60	56.40	54.12	44.16	39.84	33.12	0.92	0.14
61	36.00	62.04	59.28	48.60	43.68	36.48	0.90	0.14
62	38.52	68.16	65.16	53.28	47.88	39.96	0.86	0.14
63	42.00	75.48	71.76	59.16	53.28	44.40	0.82	0.14
64	45.84	83.64	79.32	65.52	58.92	49.20	0.78	0.13
65	50.16	93.12	87.84	72.72	65.52	54.60	0.74	0.13
66	54.96	103.68	97.56	80.76	72.72	60.60	0.69	0.12
67	60.12	115.44	108.48	89.76	80.76	67.32	0.65	0.12
68	65.52	128.52	121.08	98.76	88.92	74.04	0.62	0.12
69	71.52	143.28	135.24	109.08	98.16	81.84	0.59	0.11
70	78.24	159.60	151.20	120.84	108.72	90.60	0.55	0.11
71	85.68	177.72	168.72	133.68	120.24	100.32	0.52	0.10
72	93.72	197.40	188.04	148.20	133.44	111.24	0.49	0.10
73	102.96	218.76	208.44	164.52	147.96	123.36	0.46	0.10
74	113.04	241.56	230.28	182.28	164.16	136.80	0.43	0.10
75	123.96	266.16	253.56	201.24	181.08	151.08	0.40	0.09
76	135.72	292.20	278.04	221.64	199.44	166.20	0.37	0.09
77	148.20	319.68	303.72	242.88	218.52	182.28	0.34	0.09
78	161.52	348.72	330.60	265.32	238.68	198.96	0.32	0.09
79	175.68	379.32	358.56	288.48	259.56	216.36	0.30	0.08
80	190.56	411.48	387.60	312.60	281.40	234.48	0.28	0.08
81	206.28	444.84	417.48	337.32	303.60	252.96	0.26	0.07
82	222.72	479.64	448.44	362.88	326.64	272.16	0.25	0.07
83	240.00	515.88	480.12	388.92	350.16	291.60	0.23	0.06
84	257.88	553.56	512.76	415.44	373.92	311.64	0.22	0.06
85	269.76	582.48	539.40	436.44	392.76	327.48	0.20	0.05
86	281.40	612.72	567.48	458.64	412.80	344.04	0.20	0.05
87	292.68	645.60	597.96	482.88	434.64	362.16	0.18	0.04
88	303.72	681.36	630.84	508.92	457.92	381.72	0.17	0.04
89	314.40	719.04	665.64	536.28	482.64	402.24	0.16	0.04
90	331.56	758.40	701.88	564.96	508.56	423.72	0.15	0.03
91	349.68	799.80	740.04	595.08	535.56	446.40	0.14	0.03
92	368.52	842.88	779.88	626.52	563.76	469.92	0.13	0.03
93	388.20	887.88	821.40	659.04	593.16	494.28	0.13	0.02
94	408.72	934.80	864.48	693.12	623.76	519.96	0.12	0.02
95	429.96	983.28	909.60	728.64	655.68	546.48	0.11	0.02
96	452.04	1033.92	955.92	765.24	688.80	573.84	0.11	0.02
97	474.96	1086.24	1004.28	803.16	722.88	602.40	0.10	0.02
98	498.60	1140.36	1054.32	842.52	758.40	631.80	0.09	0.02
99+	523.08	1196.52	1106.16	883.20	794.76	662.40	0.09	0.01

For October 2003 and later, rates for ages 80+ are available only for the Guarantee Purchase Benefit Option. For previously sold Inforce policies, this applies to ages 85+.

\$20 Policy Fee payable first year only.

If Tax Qualified Amendment Rider Form OGH6M elected, premium will be reduced 15%.

If the policy is issued to an individual and spouse that: (a) reside together and (b) are both covered under Form HCA or NHA, then Spouse Premium Reduction Rider OGH9M will be attached and the premium will be reduced 10%.

To calculate premiums for a specific benefit period, apply the appropriate factors to the above premiums.

Benefit Period	Factor	2013 Increase Factor	2014 Increase Factor
1 year	0.55	1.200	1.000
2 year	0.80	1.200	1.000
3 year	1.00	1.200	1.000
5 year	1.25	1.200	1.100
Lifetime	1.45	1.300	1.200

To calculate premiums for a specific mode, apply the appropriate factor to the above premiums.

Modal Loads	Factor
Annual	1.000
Semi-Annual	0.520
Quarterly	0.260
Monthly/BSP	0.087

Date: 01/25/2013

MUTUAL OF OMAHA INSURANCE COMPANY
SCHEDULE OF MONTHLY RATES FOR POLICY FORM LT50

PER \$10 DAILY CONFINED CARE/PER \$10 DAILY COMMUNITY BASED BENEFIT
100% HOME HEALTH CARE BENEFIT

Issue Age	BENEFIT -- 1 YEAR			
	ELIMINATION PERIODS			
	0 Day	20 Day	100 Day	365 Day
18-39	1.66	1.54	1.33	1.15
40	1.84	1.68	1.45	1.25
41	1.90	1.74	1.50	1.30
42	1.98	1.82	1.56	1.34
43	2.06	1.90	1.62	1.39
44	2.14	1.97	1.68	1.43
45	2.23	2.05	1.75	1.49
46	2.34	2.15	1.84	1.56
47	2.45	2.26	1.92	1.63
48	2.57	2.39	2.02	1.72
49	2.71	2.53	2.12	1.78
50	2.87	2.68	2.24	1.87
51	3.04	2.86	2.38	1.98
52	3.22	3.04	2.52	2.09
53	3.44	3.24	2.68	2.22
54	3.66	3.46	2.86	2.36
55	3.92	3.70	3.05	2.51
56	4.19	3.96	3.26	2.68
57	4.50	4.24	3.49	2.87
58	4.82	4.55	3.72	3.04
59	5.16	4.87	3.98	3.25
60	5.53	5.20	4.24	3.46
61	5.95	5.60	4.55	3.70
62	6.46	6.05	4.92	4.00
63	7.01	6.55	5.33	4.34
64	7.62	7.10	5.78	4.72
65	8.29	7.70	6.29	5.14
66	9.05	8.38	6.84	5.59
67	9.89	9.14	7.46	6.10
68	10.82	9.98	8.10	6.58
69	11.81	10.87	8.78	7.09
70	12.90	11.86	9.53	7.66
71	14.11	12.96	10.36	8.28
72	15.47	14.21	11.34	9.05
73	16.98	15.60	12.46	9.94
74	18.64	17.11	13.69	10.96
75	20.40	18.76	15.02	12.04
76	22.32	20.52	16.45	13.19
77	24.40	22.44	17.98	14.41
78	26.63	24.52	19.60	15.67
79	29.02	26.71	21.31	17.00
80	31.55	29.06	23.12	18.40
81	34.24	31.55	25.03	19.86
82	37.06	34.18	27.04	21.38
83	40.04	36.94	29.14	22.98
84	43.18	39.84	31.32	24.62

TO OBTAIN QUARTERLY, SEMIANNUAL, AND ANNUAL PREMIUMS, MULTIPLY THE ABC QUOTED PREMIUMS BY 3, 6, AND 12, RESPECTIVELY. THE MONTHLY PREMIUMS FOR BANK SERVICE PLAN AND PAYROLL DEDUCTION ISSUES ARE THE PREMIUMS LISTED / R25387-44-2

Date: 01/25/2013

MUTUAL OF OMAHA INSURANCE COMPANY
SCHEDULE OF MONTHLY RATES FOR POLICY FORM LT50

PER \$10 DAILY CONFINED CARE/PER \$10 DAILY COMMUNITY BASED BENEFIT
100% HOME HEALTH CARE BENEFIT

BENEFIT -- TWO YEARS

Issue Age	ELIMINATION PERIODS			
	0 Day	20 Day	100 Day	365 Day
18-39	2.20	2.09	1.79	1.54
40	2.44	2.32	1.97	1.68
41	2.52	2.40	2.04	1.73
42	2.62	2.50	2.12	1.80
43	2.74	2.59	2.20	1.87
44	2.86	2.69	2.28	1.93
45	2.98	2.81	2.38	2.02
46	3.11	2.94	2.48	2.09
47	3.28	3.10	2.60	2.20
48	3.46	3.26	2.74	2.29
49	3.65	3.46	2.89	2.42
50	3.88	3.65	3.05	2.56
51	4.12	3.88	3.23	2.69
52	4.39	4.13	3.44	2.87
53	4.67	4.40	3.66	3.04
54	4.98	4.68	3.90	3.25
55	5.32	4.99	4.15	3.46
56	5.70	5.32	4.44	3.71
57	6.14	5.72	4.75	3.94
58	6.64	6.16	5.10	4.24
59	7.16	6.61	5.47	4.54
60	7.74	7.12	5.88	4.86
61	8.40	7.69	6.32	5.20
62	9.14	8.35	6.83	5.59
63	9.95	9.10	7.38	5.99
64	10.80	9.88	7.98	6.46
65	11.75	10.76	8.63	6.92
66	12.80	11.74	9.35	7.45
67	13.99	12.80	10.20	8.14
68	15.30	13.96	11.14	8.88
69	16.72	15.16	12.13	9.71
70	18.24	16.48	13.24	10.62
71	19.94	17.98	14.47	11.65
72	21.85	19.69	15.88	12.82
73	23.96	21.61	17.46	14.11
74	26.23	23.72	19.21	15.56
75	28.70	26.02	21.10	17.10
76	31.36	28.48	23.10	18.74
77	34.21	31.12	25.24	20.46
78	37.26	33.94	27.48	22.26
79	40.51	36.90	29.86	24.16
80	43.96	40.07	32.36	26.14
81	47.58	43.42	34.99	28.20
82	51.41	46.92	37.74	30.36
83	55.43	50.62	40.62	32.60
84	59.64	54.47	43.63	34.96

TO OBTAIN QUARTERLY, SEMIANNUAL, AND ANNUAL PREMIUMS, MULTIPLY THE ABOVE QUOTED PREMIUMS BY 3, 6, AND 12, RESPECTIVELY. THE MONTHLY PREMIUMS FOR B/L SERVICE PLAN AND PAYROLL DEDUCTION ISSUES ARE THE PREMIUMS LISTED ABOVE.
R25387-44-2

Date: 01/25/2013

MUTUAL OF OMAHA INSURANCE COMPANY
SCHEDULE OF MONTHLY RATES FOR POLICY FORM LT50

PER \$10 DAILY CONFINED CARE/PER \$10 DAILY COMMUNITY BASED BENEFIT
100% HOME HEALTH CARE BENEFIT

Issue Age	BENEFIT -- 3 YEARS			
	ELIMINATION PERIOD			
	0 Day	20 Day	100 Day	365 Day
18-39	2.68	2.46	2.08	1.74
40	2.96	2.71	2.30	1.96
41	3.07	2.83	2.39	2.02
42	3.20	2.94	2.48	2.09
43	3.34	3.06	2.58	2.18
44	3.48	3.19	2.68	2.26
45	3.64	3.34	2.80	2.34
46	3.80	3.49	2.93	2.46
47	4.01	3.67	3.07	2.57
48	4.24	3.88	3.23	2.69
49	4.48	4.12	3.41	2.83
50	4.75	4.36	3.59	2.96
51	5.05	4.63	3.80	3.12
52	5.39	4.94	4.06	3.32
53	5.75	5.26	4.31	3.53
54	6.14	5.62	4.60	3.77
55	6.58	6.00	4.92	4.03
56	7.03	6.42	5.26	4.30
57	7.55	6.89	5.64	4.62
58	8.10	7.40	6.05	4.96
59	8.68	7.94	6.49	5.30
60	9.30	8.53	6.97	5.70
61	10.01	9.18	7.50	6.13
62	10.81	9.91	8.09	6.60
63	11.69	10.70	8.74	7.12
64	12.64	11.52	9.41	7.69
65	13.67	12.42	10.16	8.32
66	14.83	13.46	11.02	9.01
67	16.18	14.69	11.99	9.79
68	17.65	16.09	13.08	10.63
69	19.26	17.64	14.26	11.53
70	21.02	19.33	15.56	12.53
71	22.96	21.19	16.98	13.61
72	25.09	23.21	18.56	14.84
73	27.40	25.38	20.28	16.20
74	29.86	27.71	22.12	17.64
75	32.51	30.20	24.10	19.22
76	35.39	32.88	26.23	20.92
77	38.56	35.77	28.56	22.80
78	41.98	38.86	31.07	24.84
79	45.66	42.14	33.76	27.05
80	49.57	45.60	36.62	29.41
81	53.74	49.27	39.64	31.90
82	58.14	53.12	42.84	34.55
83	62.80	57.16	46.21	37.36
84	67.69	61.40	49.76	40.33

TO OBTAIN QUARTERLY, SEMIANNUAL, AND ANNUAL PREMIUMS, MULTIPLY THE ABC QUOTED PREMIUMS BY 3, 6, AND 12, RESPECTIVELY. THE MONTHLY PREMIUMS FOR B+ SERVICE PLAN AND PAYROLL DEDUCTION ISSUES ARE THE PREMIUMS LISTED ABOVE
R25387-44-2

Date: 01/25/2013

MUTUAL OF OMAHA INSURANCE COMPANY
SCHEDULE OF MONTHLY RATES FOR POLICY FORM LT50

PER \$10 DAILY CONFINED CARE/PER \$10 DAILY COMMUNITY BASED BENEFIT

100% HOME HEALTH CARE BENEFIT

Issue Age	BENEFIT -- 5 YEARS			
	ELIMINATION PERIODS			
	0 Day	20 Day	100 Day	365 Day
18-39	3.54	3.30	2.78	2.35
40	3.91	3.65	3.04	2.52
41	4.07	3.78	3.16	2.63
42	4.24	3.94	3.28	2.73
43	4.41	4.10	3.41	2.82
44	4.60	4.28	3.54	2.95
45	4.81	4.47	3.70	3.08
46	5.03	4.66	3.87	3.21
47	5.29	4.93	4.07	3.36
48	5.60	5.19	4.29	3.55
49	5.93	5.49	4.53	3.74
50	6.28	5.81	4.82	4.00
51	6.69	6.18	5.10	4.22
52	7.12	6.58	5.46	4.51
53	7.58	7.02	5.80	4.80
54	8.05	7.50	6.19	5.13
55	8.58	8.00	6.61	5.47
56	9.15	8.56	7.06	5.83
57	9.79	9.16	7.54	6.19
58	10.47	9.81	8.03	6.58
59	11.20	10.47	8.56	6.97
60	11.96	11.20	9.11	7.41
61	12.85	11.99	9.72	7.90
62	13.84	12.88	10.44	8.46
63	14.92	13.86	11.21	9.06
64	16.08	14.89	12.02	9.71
65	17.35	16.02	12.94	10.45
66	18.79	17.30	13.97	11.28
67	20.42	18.79	15.16	12.22
68	22.25	20.45	16.46	13.24
69	24.23	22.29	17.90	14.38
70	26.41	24.27	19.47	15.62
71	28.79	26.47	21.20	16.97
72	31.42	28.89	23.11	18.50
73	34.23	31.47	25.19	20.17
74	37.20	34.23	27.40	21.93
75	40.44	37.21	29.79	23.85
76	43.98	40.50	32.43	25.98
77	47.91	44.11	35.35	28.31
78	52.23	48.07	38.54	30.91
79	56.89	52.34	42.00	33.70
80	61.90	56.91	45.69	36.69
81	67.24	61.80	49.65	39.91
82	72.93	66.98	53.86	43.31
83	78.96	72.48	58.32	46.92
84	85.33	78.29	63.02	50.73

TO OBTAIN QUARTERLY, SEMIANNUAL, AND ANNUAL PREMIUMS, MULTIPLY THE ABOVE QUOTED PREMIUMS BY 3, 6, AND 12, RESPECTIVELY. THE MONTHLY PREMIUMS FOR B, SERVICE PLAN AND PAYROLL DEDUCTION ISSUES ARE THE PREMIUMS LISTED ABOVE

R25387-44-2

Date: 01/25/2013

MUTUAL OF OMAHA INSURANCE COMPANY
SCHEDULE OF MONTHLY RATES FOR POLICY FORM LT50

PER \$10 DAILY CONFINED CARE/PER \$10 DAILY COMMUNITY BASED BENEFIT
100% HOME HEALTH CARE BENEFIT

Issue Age	BENEFIT -- LIFETIME			
	ELIMINATION PERIODS			
	0 Day	20 Day	100 Day	365 Day
18-39	5.32	5.04	4.10	3.36
40	5.83	5.51	4.52	3.71
41	6.05	5.72	4.69	3.85
42	6.32	5.96	4.88	4.02
43	6.59	6.20	5.11	4.21
44	6.86	6.49	5.35	4.42
45	7.19	6.79	5.58	4.61
46	7.54	7.12	5.88	4.85
47	7.92	7.45	6.17	5.09
48	8.33	7.85	6.49	5.35
49	8.78	8.26	6.83	5.65
50	9.25	8.70	7.19	5.94
51	9.77	9.17	7.57	6.24
52	10.34	9.67	7.99	6.60
53	10.92	10.19	8.41	6.96
54	11.56	10.73	8.84	7.28
55	12.23	11.29	9.31	7.68
56	13.00	11.94	9.83	8.10
57	13.82	12.65	10.40	8.54
58	14.71	13.42	11.03	9.06
59	15.66	14.23	11.66	9.58
60	16.68	15.12	12.37	10.13
61	17.83	16.12	13.19	10.78
62	19.15	17.30	14.10	11.50
63	20.58	18.61	15.13	12.29
64	22.12	20.03	16.22	13.15
65	23.81	21.62	17.44	14.09
66	25.70	23.36	18.83	15.18
67	27.85	25.36	20.42	16.46
68	30.23	27.54	22.20	17.89
69	32.77	29.86	24.12	19.46
70	35.57	32.41	26.24	21.23
71	38.65	35.24	28.56	23.14
72	42.11	38.42	31.16	25.27
73	45.83	41.82	33.95	27.55
74	49.81	45.44	36.91	29.96
75	54.14	49.40	40.14	32.60
76	58.91	53.82	43.72	35.50
77	64.18	58.87	47.74	38.70
78	69.98	64.54	52.22	42.26
79	76.22	70.73	57.06	46.06
80	82.93	77.44	62.33	50.16
81	90.11	84.67	67.98	54.56
82	97.72	92.41	73.99	59.24
83	105.82	100.70	80.40	64.21
84	114.35	109.50	87.20	69.46

TO OBTAIN QUARTERLY, SEMIANNUAL, AND ANNUAL PREMIUMS, MULTIPLY THE ABC QUOTED PREMIUMS BY 3, 6, AND 12, RESPECTIVELY. THE MONTHLY PREMIUMS FOR B₁ SERVICE PLAN AND PAYROLL DEDUCT I ON ISSUES ARE THE PREMIUMS LISTED ABOVE
R25387-44-2

Date: 01/25/2013

MUTUAL OF OMAHA INSURANCE COMPANY
SCHEDULE OF MONTHLY RATES FOR POLICY FORM LT50

PER \$10 DAILY CONFINED CARE/PER \$8 DAILY COMMUNITY BASED BENEFIT

80% HOME HEALTH CARE BENEFIT

Issue Age	BENEFIT -- 1 YEAR			
	ELIMINATION PERIODS			
	0 Day	20 Day	100 Day	365 Day
18-39	1.49	1.40	1.21	1.06
40	1.66	1.54	1.34	1.18
41	1.72	1.60	1.38	1.20
42	1.79	1.66	1.44	1.26
43	1.86	1.72	1.49	1.30
44	1.93	1.80	1.55	1.33
45	2.02	1.87	1.61	1.39
46	2.10	1.96	1.68	1.44
47	2.20	2.06	1.76	1.50
48	2.32	2.17	1.86	1.60
49	2.45	2.32	1.96	1.66
50	2.58	2.44	2.06	1.74
51	2.74	2.60	2.18	1.84
52	2.92	2.76	2.32	1.96
53	3.10	2.95	2.47	2.08
54	3.29	3.14	2.62	2.20
55	3.53	3.37	2.81	2.34
56	3.77	3.60	3.00	2.50
57	4.06	3.88	3.20	2.65
58	4.36	4.14	3.42	2.83
59	4.66	4.43	3.65	3.01
60	4.98	4.73	3.90	3.22
61	5.36	5.10	4.18	3.43
62	5.80	5.51	4.52	3.71
63	6.31	5.96	4.91	4.04
64	6.86	6.46	5.32	4.36
65	7.48	7.01	5.78	4.78
66	8.15	7.62	6.29	5.20
67	8.92	8.32	6.85	5.65
68	9.76	9.08	7.45	6.11
69	10.64	9.89	8.08	6.58
70	11.63	10.79	8.75	7.10
71	12.71	11.80	9.53	7.70
72	13.94	12.94	10.42	8.40
73	15.30	14.20	11.44	9.22
74	16.78	15.58	12.58	10.16
75	18.38	17.06	13.81	11.18
76	20.10	18.68	15.13	12.25
77	21.98	20.42	16.52	13.36
78	23.99	22.31	18.02	14.56
79	26.14	24.31	19.58	15.77
80	28.42	26.45	21.26	17.09
81	30.83	28.72	23.00	18.43
82	33.38	31.10	24.85	19.86
83	36.07	33.61	26.78	21.34
84	38.89	36.25	28.79	22.87

TO OBTAIN QUARTERLY, SEMIANNUAL, AND ANNUAL PREMIUMS, MULTIPLY THE ABC QUOTED PREMIUMS BY 3, 6, AND 12. RESPECTIVELY . THE MONTHLY PREMIUMS FOR B SERVICE PLAN AND PAYROLL DEDUCTION ISSUES ARE THE PREMIUMS LISTED ABOVE

R25387-44-2

Date: 01/25/2013

MUTUAL OF OMAHA INSURANCE COMPANY
SCHEDULE OF MONTHLY RATES POLICY FORM L T50

PER \$10 DAILY CONFINED CARE/PER \$8 DAILY COMMUNITY BASED BENEFIT

80% HOME HEALTH CARE BENEFIT**BENEFIT -- 2 YEARS**

Issue Age	ELIMINATION PERIODS			
	0 Day	20 Day	100 Day	365 Day
18-39	2.00	1.93	1.66	1.43
40	2.21	2.12	1.84	1.58
41	2.30	2.20	1.90	1.64
42	2.39	2.28	1.97	1.70
43	2.50	2.39	2.05	1.76
44	2.59	2.48	2.12	1.81
45	2.70	2.58	2.21	1.90
46	2.84	2.70	2.32	1.98
47	2.98	2.86	2.42	2.05
48	3.16	3.00	2.54	2.15
49	3.34	3.17	2.68	2.27
50	3.53	3.36	2.84	2.40
51	3.74	3.58	3.01	2.54
52	4.00	3.80	3.19	2.68
53	4.25	4.06	3.41	2.87
54	4.54	4.30	3.62	3.05
55	4.85	4.60	3.86	3.25
56	5.20	4.90	4.12	3.46
57	5.59	5.26	4.42	3.71
58	6.04	5.66	4.74	3.97
59	6.52	6.08	5.08	4.24
60	7.06	6.55	5.46	4.55
61	7.66	7.08	5.88	4.88
62	8.32	7.68	6.35	5.26
63	9.06	8.36	6.86	5.63
64	9.84	9.10	7.42	6.06
65	10.70	9.90	8.02	6.50
66	11.66	10.79	8.69	7.00
67	12.76	11.78	9.48	7.63
68	13.93	12.84	10.34	8.33
69	15.22	13.94	11.27	9.11
70	16.62	15.17	12.29	9.96
71	18.17	16.54	13.45	10.94
72	19.90	18.12	14.76	12.02
73	21.82	19.88	16.24	13.25
74	23.90	21.82	17.86	14.60
75	26.14	23.93	19.60	16.06
76	28.56	26.20	21.47	17.60
77	31.16	28.62	23.45	19.21
78	33.94	31.21	25.54	20.88
79	36.90	33.96	27.74	22.66
80	40.04	36.86	30.07	24.53
81	43.34	39.94	32.51	26.46
82	46.82	43.18	35.08	28.49
83	50.48	46.56	37.74	30.59
84	54.32	50.11	40.54	32.78

TO OBTAIN QUARTERLY, SEMI-ANNUAL, AND ANNUAL PREMIUMS, MULTIPLY THE ABC QUOTED PREMIUMS BY 3, 6, AND 12, RESPECTIVELY. THE MONTHLY PREMIUMS FOR B+ SERVICE PLAN AND PAYROLL DEDUCTION ISSUES ARE THE PREMIUMS LISTED ABOVE

R25387-44-2

Date: 01/25/2013

MUTUAL OF OMAHA INSURANCE COMPANY
SCHEDULE OF MONTHLY RATES FOR POLICY FORM LT50

PER \$10 DAILY CONFINED CARE/PER \$8 DAILY COMMUNITY BASED BENEFIT

80% HOME HEALTH CARE BENEFIT**BENEFIT -- 3 YEARS**

Issue Age	ELIMINATION PERIODS			
	0 Day	20 Day	100 Day	365 Day
18-39	2.46	2.28	1.96	1.67
40	2.72	2.52	2.15	1.84
41	2.83	2.63	2.24	1.91
42	2.95	2.74	2.33	1.99
43	3.07	2.86	2.44	2.08
44	3.20	2.98	2.52	2.14
45	3.35	3.10	2.62	2.22
46	3.50	3.24	2.75	2.33
47	3.70	3.42	2.89	2.44
48	3.90	3.60	3.04	2.57
49	4.12	3.83	3.20	2.68
50	4.38	4.06	3.38	2.82
51	4.66	4.30	3.58	2.96
52	4.96	4.60	3.80	3.16
53	5.29	4.90	4.06	3.35
54	5.65	5.22	4.32	3.58
55	6.05	5.58	4.62	3.83
56	6.47	5.98	4.94	4.09
57	6.95	6.41	5.29	4.37
58	7.46	6.88	5.68	4.70
59	7.99	7.38	6.10	5.03
60	8.57	7.93	6.55	5.41
61	9.22	8.54	7.04	5.80
62	9.96	9.22	7.60	6.26
63	10.76	9.96	8.20	6.76
64	11.63	10.72	8.84	7.30
65	12.59	11.56	9.55	7.90
66	13.66	12.53	10.34	8.53
67	14.88	13.66	11.26	9.28
68	16.25	14.96	12.28	10.08
69	17.74	16.40	13.39	10.93
70	19.36	17.98	14.62	11.88
71	21.13	19.72	15.95	12.91
72	23.10	21.58	17.44	14.09
73	25.22	23.60	19.04	15.36
74	27.49	25.78	20.77	16.73
75	29.93	28.09	22.63	18.23
76	32.59	30.58	24.64	19.85
77	35.50	33.28	26.83	21.64
78	38.66	36.14	29.18	23.56
79	42.04	39.19	31.72	25.66
80	45.65	42.41	34.39	27.89
81	49.48	45.82	37.24	30.25
82	53.53	49.40	40.24	32.78
83	57.82	53.16	43.40	35.44
84	62.32	57.11	46.74	38.26

TO OBTAIN QUARTERLY, SEMIANNUAL, AND ANNUAL PREMIUMS, MULTIPLY THE ABC PREMIUMS BY 3, 6 AND 12 RESPECTIVELY. THE MONTHLY PREMIUMS FOR BANK SERV PAYROLL DEDUCTION ISSUES ARE THE PREMIUMS LISTED ABOVE.

R25387-44-2

Date: 01/25/2013

MUTUAL OF OMAHA INSURANCE COMPANY
SCHEDULE OF MONTHLY RATES FOR POLICY FORM LT50

PER \$10 DAILY CONFINED CARE/PER \$8 DAILY COMMUNITY BASED BENEFIT

80% HOME HEALTH CARE BENEFIT**BENEFIT -- 5 YEARS**

Issue Age	ELIMINATION PERIODS			
	0 Day	20 Day	100 Day	365 Day
18-39	3.29	3.10	2.64	2.24
40	3.63	3.43	2.88	2.42
41	3.78	3.55	2.99	2.52
42	3.94	3.71	3.11	2.62
43	4.10	3.87	3.23	2.71
44	4.28	4.02	3.37	2.83
45	4.47	4.18	3.50	2.93
46	4.68	4.40	3.67	3.08
47	4.93	4.62	3.87	3.22
48	5.20	4.87	4.07	3.41
49	5.52	5.16	4.31	3.61
50	5.85	5.47	4.57	3.82
51	6.23	5.80	4.86	4.07
52	6.62	6.18	5.16	4.30
53	7.05	6.60	5.52	4.60
54	7.50	7.05	5.87	4.90
55	7.99	7.51	6.27	5.24
56	8.51	8.04	6.71	5.59
57	9.11	8.62	7.17	5.95
58	9.75	9.22	7.63	6.33
59	10.42	9.85	8.11	6.68
60	11.13	10.52	8.65	7.11
61	11.95	11.26	9.23	7.57
62	12.86	12.12	9.91	8.11
63	13.88	13.02	10.64	8.69
64	14.96	13.98	11.42	9.33
65	16.15	15.05	12.29	10.03
66	17.48	16.26	13.27	10.82
67	19.01	17.67	14.39	11.73
68	20.70	19.23	15.63	12.72
69	22.55	20.93	16.98	13.78
70	24.60	22.81	18.48	14.97
71	26.80	24.87	20.12	16.28
72	29.24	27.15	21.96	17.74
73	31.86	29.59	23.91	19.33
74	34.63	32.19	26.00	21.03
75	37.63	34.98	28.29	22.88
76	40.93	38.06	30.80	24.90
77	44.59	41.46	33.57	27.17
78	48.62	45.19	36.59	29.62
79	52.94	49.21	39.88	32.32
80	57.61	53.50	43.38	35.18
81	62.58	58.10	47.14	38.24
82	67.87	62.96	51.13	41.51
83	73.48	68.12	55.36	44.99
84	79.41	73.58	59.84	48.66

TO OBTAIN QUARTERLY, SEMIANNUAL, AND ANNUAL PREMIUMS,
MULTIPLY THE ABOVE QUOTED PREMIUMS BY 3, 6, AND 12,
RESPECTIVELY. THE MONTHLY PREMIUMS FOR BANK SERVICE PLAN
AND PAYROLL DEDUCTION ISSUES ARE THE PREMIUMS LISTED ABOVE.
R25387-44-2

Date: 01/25/2013

MUTUAL OF OMAHA INSURANCE COMPANY
SCHEDULE OF MONTHLY RATES FOR POLICY FORM LT50

PER \$10 DAILY CONFINED CARE/PER \$8 DAILY COMMUNITY BASED BENEFIT

80% HOME HEALTH CARE BENEFIT**BENEFIT -- LIFETIME**

Issue Age	ELIMINATION PERIODS			
	0 Day	20 Day	100 Day	365 Day
18-39	5.00	4.78	3.95	3.24
40	5.50	5.24	4.33	3.60
41	5.71	5.42	4.51	3.76
42	5.94	5.66	4.69	3.89
43	6.18	5.89	4.88	4.04
44	6.46	6.17	5.14	4.27
45	6.76	6.44	5.36	4.48
46	7.08	6.76	5.65	4.73
47	7.44	7.10	5.92	4.93
48	7.85	7.45	6.20	5.20
49	8.26	7.85	6.55	5.47
50	8.70	8.26	6.90	5.74
51	9.17	8.70	7.27	6.07
52	9.72	9.19	7.68	6.40
53	10.28	9.68	8.06	6.71
54	10.87	10.19	8.48	7.07
55	11.51	10.73	8.94	7.44
56	12.22	11.34	9.42	7.85
57	13.00	12.01	9.97	8.28
58	13.84	12.74	10.57	8.77
59	14.72	13.51	11.20	9.26
60	15.70	14.36	11.87	9.79
61	16.78	15.32	12.65	10.45
62	18.00	16.44	13.54	11.14
63	19.36	17.69	14.52	11.92
64	20.80	19.03	15.56	12.73
65	22.39	20.54	16.74	13.66
66	24.17	22.20	18.06	14.70
67	26.20	24.07	19.61	15.96
68	28.43	26.15	21.30	17.35
69	30.84	28.36	23.14	18.88
70	33.43	30.79	25.16	20.56
71	36.36	33.49	27.41	22.43
72	39.59	36.49	29.90	24.50
73	43.10	39.73	32.57	26.69
74	46.85	43.18	35.40	29.03
75	50.92	46.92	38.50	31.57
76	55.42	51.13	41.93	34.40
77	60.36	55.93	45.80	37.50
78	65.80	61.31	50.12	40.97
79	71.69	67.19	54.77	44.65
80	78.00	73.57	59.80	48.61
81	84.76	80.44	65.21	52.87
82	91.92	87.79	70.99	57.41
83	99.52	95.66	77.15	62.21
84	107.54	104.02	83.66	67.28

TO OBTAIN QUARTERLY, SEMIANNUAL, AND ANNUAL PREMIUMS,
MULTIPLY THE ABOVE QUOTED PREMIUMS BY 3, 6, AND 12,
RESPECTIVELY. THE MONTHLY PREMIUMS FOR BANK
SERVICE PLAN AND PAYROLL DEDUCTION ISSUES ARE THE
PREMIUMS LISTED ABOVE.

Date: 01/25/2013

MUTUAL OF OMAHA INSURANCE COMPANY
SCHEDULE OF MONTHLY RATES FOR POLICY FORM LT50

PER \$10 DAILY CONFINED CARE/PER \$5 DAILY COMMUNITY BASED BENEFIT

50% HOME HEALTH CARE BENEFIT**BENEFIT -- 1 YEAR**

Issue Age	Elimination Periods			
	0 Day	20 Day	100 Day	365 Day
18-39	1.24	1.18	1.02	0.89
40	1.38	1.28	1.12	0.96
41	1.43	1.33	1.15	1.00
42	1.49	1.38	1.19	1.03
43	1.55	1.44	1.24	1.07
44	1.61	1.50	1.30	1.13
45	1.68	1.56	1.36	1.18
46	1.75	1.63	1.40	1.20
47	1.85	1.72	1.48	1.26
48	1.94	1.82	1.55	1.32
49	2.04	1.92	1.63	1.38
50	2.15	2.04	1.72	1.45
51	2.27	2.17	1.84	1.54
52	2.44	2.32	1.94	1.63
53	2.59	2.47	2.06	1.72
54	2.75	2.63	2.20	1.82
55	2.95	2.82	2.35	1.96
56	3.16	3.01	2.51	2.09
57	3.40	3.22	2.68	2.23
58	3.64	3.46	2.86	2.36
59	3.89	3.70	3.05	2.51
60	4.16	3.96	3.25	2.68
61	4.48	4.25	3.49	2.87
62	4.86	4.60	3.77	3.10
63	5.27	4.98	4.09	3.36
64	5.74	5.40	4.44	3.65
65	6.24	5.86	4.84	4.00
66	6.80	6.36	5.26	4.33
67	7.45	6.95	5.72	4.72
68	8.14	7.58	6.22	5.09
69	8.88	8.26	6.74	5.50
70	9.71	9.02	7.31	5.92
71	10.62	9.85	7.96	6.43
72	11.64	10.80	8.71	7.02
73	12.78	11.86	9.56	7.72
74	14.02	13.01	10.51	8.50
75	15.35	14.26	11.54	9.35
76	16.79	15.60	12.64	10.24
77	18.36	17.05	13.80	11.17
78	20.04	18.64	15.05	12.16
79	21.83	20.30	16.36	13.18
80	23.74	22.08	17.75	14.27
81	25.76	23.98	19.22	15.40
82	27.88	25.97	20.75	16.58
83	30.12	28.07	22.36	17.81
84	32.48	30.28	24.04	19.09

TO OBTAIN QUARTERLY, SEMIANNUAL, AND ANNUAL PREMIUMS,
MULTIPLY THE ABOVE QUOTED PREMIUMS BY 3, 6, AND 12,
RESPECTIVELY. THE MONTHLY PREMIUMS FOR BANK SERVICE PLAN
AND PAYROLL DEDUCTION ISSUES ARE THE PREMIUMS LISTED ABOVE.
R25387-44-2

Date: 01/25/2013

MUTUAL OF OMAHA INSURANCE COMPANY
SCHEDULE OF MONTHLY RATES POLICY FORM L T50

PER \$10 DAILY CONFINED CARE/PER \$5 DAILY COMMUNITY BASED BENEFIT

50% HOME HEALTH CARE BENEFIT**BENEFIT -- 2 YEARS**

Issue Age	Elimination Periods			
	0 Day	20 Day	100 Day	365 Day
18-39	1.69	1.63	1.42	1.22
40	1.88	1.80	1.55	1.33
41	1.96	1.87	1.61	1.39
42	2.02	1.94	1.67	1.44
43	2.11	2.02	1.73	1.48
44	2.20	2.10	1.80	1.54
45	2.30	2.20	1.88	1.61
46	2.41	2.30	1.96	1.66
47	2.53	2.41	2.05	1.74
48	2.68	2.56	2.15	1.81
49	2.82	2.69	2.27	1.92
50	2.99	2.86	2.41	2.04
51	3.17	3.02	2.56	2.15
52	3.40	3.22	2.70	2.26
53	3.61	3.43	2.89	2.44
54	3.85	3.65	3.07	2.58
55	4.10	3.89	3.28	2.75
56	4.42	4.15	3.50	2.95
57	4.74	4.48	3.74	3.13
58	5.12	4.79	4.02	3.37
59	5.53	5.15	4.30	3.59
60	5.98	5.56	4.63	3.86
61	6.49	6.00	4.98	4.13
62	7.06	6.52	5.39	4.46
63	7.68	7.09	5.81	4.76
64	8.34	7.72	6.28	5.12
65	9.08	8.39	6.79	5.50
66	9.88	9.16	7.36	5.92
67	10.80	10.00	8.04	6.47
68	11.81	10.88	8.76	7.06
69	12.90	11.82	9.56	7.73
70	14.09	12.85	10.42	8.45
71	15.40	14.03	11.40	9.26
72	16.87	15.35	12.52	10.21
73	18.50	16.86	13.76	11.23
74	20.26	18.50	15.13	12.37
75	22.16	20.29	16.62	13.61
76	24.22	22.21	18.20	14.92
77	26.42	24.28	19.88	16.28
78	28.78	26.46	21.64	17.70
79	31.28	28.78	23.52	19.22
80	33.94	31.25	25.50	20.81
81	36.74	33.86	27.56	22.43
82	39.70	36.60	29.74	24.16
83	42.80	39.47	32.00	25.94
84	46.06	42.48	34.36	27.79

TO OBTAIN QUARTERLY, SEMIANNUAL, AND ANNUAL PREMIUMS,
MULTIPLY THE ABOVE QUOTED PREMIUMS BY 3, 6, AND 12,
RESPECTIVELY. THE MONTHLY PREMIUMS FOR BANK SERVICE PLAN
AND PAYROLL DEDUCTION ISSUES ARE THE PREMIUMS LISTED ABOVE.
R25387-44-2

Date: 01/25/2013

MUTUAL OF OMAHA INSURANCE COMPANY
SCHEDULE OF MONTHLY RATES FOR POLICY FORM LT50

PER \$10 DAILY CONFINED CARE/PER \$5 DAILY COMMUNITY BASED BENEFIT

50% HOME HEALTH CARE BENEFIT**BENEFIT -- 3 YEARS**

Issue Age	Elimination Periods			
	0 Day	20 Day	100 Day	365 Day
18-39	2.12	1.97	1.67	1.42
40	2.35	2.17	1.86	1.60
41	2.44	2.26	1.93	1.66
42	2.54	2.35	2.00	1.70
43	2.64	2.45	2.08	1.78
44	2.75	2.56	2.17	1.85
45	2.88	2.66	2.26	1.90
46	3.01	2.80	2.38	2.02
47	3.17	2.94	2.48	2.09
48	3.36	3.10	2.62	2.20
49	3.55	3.28	2.75	2.32
50	3.76	3.49	2.90	2.41
51	4.00	3.70	3.07	2.56
52	4.26	3.95	3.28	2.71
53	4.56	4.21	3.49	2.89
54	4.87	4.49	3.71	3.07
55	5.20	4.79	3.97	3.29
56	5.57	5.14	4.24	3.50
57	5.98	5.51	4.56	3.77
58	6.42	5.92	4.90	4.04
59	6.86	6.34	5.24	4.33
60	7.36	6.82	5.63	4.66
61	7.93	7.34	6.06	5.00
62	8.57	7.94	6.54	5.39
63	9.26	8.56	7.06	5.82
64	10.00	9.22	7.61	6.29
65	10.82	9.94	8.21	6.79
66	11.75	10.78	8.89	7.34
67	12.80	11.75	9.68	7.97
68	13.97	12.88	10.57	8.68
69	15.25	14.11	11.53	9.42
70	16.66	15.46	12.58	10.22
71	18.19	16.96	13.72	11.11
72	19.87	18.56	15.00	12.12
73	21.70	20.30	16.38	13.22
74	23.64	22.18	17.87	14.40
75	25.74	24.16	19.46	15.67
76	28.03	26.32	21.20	17.08
77	30.54	28.62	23.08	18.60
78	33.25	31.09	25.10	20.26
79	36.16	33.71	27.28	22.06
80	39.26	36.49	29.59	23.99
81	42.55	39.41	32.03	26.03
82	46.04	42.49	34.62	28.21
83	49.74	45.73	37.33	30.47
84	53.62	49.12	40.20	32.90

TO OBTAIN QUARTERLY, SEMI-ANNUAL, AND ANNUAL PREMIUMS,
MULTIPLY THE ABOVE QUOTED PREMIUMS BY 3, 6, AND 12,
RESPECTIVELY. THE MONTHLY PREMIUMS FOR BANK SERVICE PLAN
AND PAYROLL DEDUCTION ISSUES ARE THE PREMIUMS LISTED ABOVE.
R25387-44-2

Date: 01/25/2013

MUTUAL OF OMAHA INSURANCE COMPANY
SCHEDULE OF MONTHLY RATES FOR POLICY FORM LT50

PER \$10 DAILY CONFINED CARE/PER \$5 DAILY COMMUNITY BASED BENEFIT

50% HOME HEALTH CARE BENEFIT**BENEFIT -- 5 YEARS**

Issue Age	Elimination Periods			
	0 Day	20 Day	100 Day	365 Day
18-39	2.90	2.75	2.33	1.98
40	3.21	3.03	2.55	2.16
41	3.34	3.15	2.65	2.23
42	3.48	3.28	2.75	2.31
43	3.62	3.41	2.85	2.38
44	3.77	3.54	2.97	2.49
45	3.95	3.71	3.10	2.60
46	4.14	3.87	3.23	2.71
47	4.36	4.08	3.41	2.83
48	4.60	4.30	3.59	2.99
49	4.87	4.55	3.81	3.18
50	5.16	4.83	4.04	3.38
51	5.50	5.13	4.28	3.58
52	5.85	5.46	4.57	3.82
53	6.23	5.82	4.86	4.07
54	6.62	6.22	5.19	4.33
55	7.06	6.64	5.54	4.63
56	7.52	7.11	5.92	4.93
57	8.04	7.61	6.31	5.24
58	8.60	8.14	6.73	5.57
59	9.19	8.69	7.17	5.93
60	9.83	9.30	7.65	6.29
61	10.55	9.94	8.16	6.71
62	11.35	10.69	8.76	7.17
63	12.25	11.51	9.39	7.67
64	13.21	12.35	10.09	8.24
65	14.25	13.29	10.85	8.86
66	15.44	14.37	11.73	9.55
67	16.78	15.59	12.72	10.35
68	18.28	16.97	13.81	11.23
69	19.92	18.49	15.00	12.19
70	21.70	20.14	16.31	13.21
71	23.65	21.97	17.78	14.39
72	25.82	23.97	19.38	15.69
73	28.12	26.13	21.12	17.07
74	30.58	28.42	22.97	18.57
75	33.22	30.89	24.99	20.21
76	36.15	33.61	27.18	21.99
77	39.38	36.61	29.63	24.00
78	42.92	39.91	32.32	26.18
79	46.75	43.44	35.22	28.56
80	50.86	47.25	38.30	31.06
81	55.24	51.29	41.62	33.77
82	59.93	55.59	45.14	36.67
83	64.88	60.17	48.88	39.72
84	70.11	64.99	52.84	42.96

TO OBTAIN QUARTERLY, SEMI-ANNUAL, AND ANNUAL PREMIUMS,
MULTIPLY THE ABOVE QUOTED PREMIUMS BY 3, 6, AND 12,
RESPECTIVELY. THE MONTHLY PREMIUMS FOR BANK SERVICE PLAN
AND PAYROLL DEDUCTION ISSUES ARE THE PREMIUMS LISTED ABOVE.
R25387-44-2

Date: 01/25/2013

MUTUAL OF OMAHA INSURANCE COMPANY
SCHEDULE OF MONTHLY RATES FOR POLICY FORM LT50

PER \$10 DAILY CONFINED CARE/PER \$5 DAILY COMMUNITY BASED BENEFIT

50% HOME HEALTH CARE BENEFIT**BENEFIT -- LIFETIME**

Issue Age	Elimination Periods			
	0 Day	20 Day	100 Day	365 Day
18-39	4.52	4.33	3.55	2.93
40	4.98	4.74	3.94	3.24
41	5.16	4.92	4.07	3.37
42	5.36	5.11	4.26	3.53
43	5.58	5.34	4.43	3.70
44	5.86	5.58	4.64	3.86
45	6.12	5.83	4.87	4.06
46	6.43	6.12	5.11	4.27
47	6.74	6.43	5.35	4.48
48	7.10	6.76	5.65	4.73
49	7.48	7.12	5.93	4.94
50	7.86	7.48	6.24	5.21
51	8.32	7.88	6.59	5.51
52	8.78	8.32	6.92	5.77
53	9.31	8.75	7.30	6.10
54	9.84	9.24	7.69	6.40
55	10.42	9.72	8.08	6.72
56	11.06	10.26	8.54	7.12
57	11.76	10.87	9.04	7.52
58	12.53	11.53	9.56	7.94
59	13.34	12.23	10.13	8.39
60	14.20	13.00	10.73	8.86
61	15.18	13.87	11.44	9.44
62	16.31	14.87	12.25	10.09
63	17.52	16.01	13.15	10.80
64	18.83	17.22	14.09	11.53
65	20.27	18.60	15.17	12.37
66	21.89	20.09	16.34	13.31
67	23.71	21.80	17.75	14.45
68	25.73	23.68	19.28	15.71
69	27.91	25.69	20.95	17.10
70	30.28	27.89	22.78	18.61
71	32.93	30.31	24.80	20.29
72	35.84	33.04	27.07	22.19
73	39.01	35.96	29.48	24.18
74	42.42	39.08	32.04	26.27
75	46.10	42.48	34.85	28.60
76	50.16	46.30	37.96	31.13
77	54.65	50.63	41.46	33.97
78	59.58	55.50	45.36	37.07
79	64.90	60.83	49.57	40.39
80	70.62	66.58	54.13	44.00
81	76.72	72.82	59.03	47.86
82	83.21	79.49	64.27	51.98
83	90.10	86.62	69.84	56.32
84	97.36	94.18	75.74	60.92

TO OBTAIN QUARTERLY, SEMIANNUAL, AND ANNUAL PREMIUMS,
MULTIPLY THE ABOVE QUOTED PREMIUMS BY 3, 6, AND 12,
RESPECTIVELY. THE MONTHLY PREMIUMS FOR BANK SERVICE PLAN
AND PAYROLL DEDUCTION ISSUES ARE THE PREMIUMS LISTED ABOVE.
R25387-44-2

Date: 01/25/2013

MUTUAL OF OMAHA INSURANCE COMPANY
SCHEDULE OF MONTHLY RATES FOR RIDER FORM 0DX5M

PER \$10 DAILY CONFINED CARE/PER \$10 DAILY COMMUNITY BASED BENEFIT
100% HOME HEALTH CARE BENEFIT

Issue Age	BENEFIT -- 1 YEAR			
	ELIMINATION PERIODS			
	0 Day	20 Day	100 Day	365 Day
18-39	2.80	2.60	2.24	1.93
40	3.06	2.81	2.42	2.09
41	3.13	2.88	2.47	2.12
42	3.22	2.95	2.54	2.18
43	3.34	3.05	2.62	2.26
44	3.41	3.13	2.68	2.30
45	3.52	3.22	2.76	2.38
46	3.61	3.34	2.82	2.39
47	3.72	3.46	2.92	2.46
48	3.88	3.59	3.04	2.57
49	4.01	3.73	3.13	2.62
50	4.16	3.90	3.28	2.74
51	4.30	4.06	3.37	2.80
52	4.48	4.22	3.50	2.90
53	4.64	4.38	3.62	2.99
54	4.81	4.54	3.76	3.10
55	4.96	4.68	3.86	3.19
56	5.14	4.85	4.01	3.32
57	5.33	5.03	4.13	3.40
58	5.53	5.21	4.27	3.50
59	5.74	5.40	4.42	3.60
60	5.98	5.62	4.58	3.74
61	6.17	5.81	4.72	3.83
62	6.44	6.05	4.91	4.00
63	6.73	6.29	5.14	4.20
64	7.01	6.53	5.32	4.33
65	7.32	6.79	5.56	4.54
66	7.66	7.08	5.80	4.73
67	8.00	7.38	6.02	4.91
68	8.39	7.73	6.28	5.09
69	8.81	8.11	6.55	5.29
70	9.25	8.51	6.83	5.48
71	9.68	8.90	7.12	5.68
72	10.08	9.25	7.39	5.90
73	10.42	9.55	7.63	6.10
74	10.70	9.82	7.86	6.29
75	10.98	10.09	8.09	6.49
76	11.28	10.38	8.32	6.67
77	11.65	10.72	8.58	6.88
78	12.05	11.09	8.87	7.10
79	12.50	11.52	9.19	7.33
80	12.98	11.96	9.52	7.58
81	13.50	12.43	9.86	7.82
82	14.04	12.95	10.25	8.11
83	14.62	13.50	10.64	8.38
84	15.25	14.08	11.08	8.71

TO OBTAIN QUARTERLY, SEMIANNUAL, AND ANNUAL PREMIUMS, MULTIPLY THE ABC QUOTED PREMIUMS BY 3, 6, AND 12, RESPECTIVELY. THE MONTHLY PREMIUMS FOR BANK SERVICE PLAN AND PAYROLL DEDUCTION ISSUES ARE THE PREMIUMS LISTED / R25387-44-2

Date: 01/25/2013

MUTUAL OF OMAHA INSURANCE COMPANY
SCHEDULE OF MONTHLY RATES FOR RIDER FORM 0DX5M

PER \$10 DAILY CONFINED CARE/PER \$10 DAILY COMMUNITY BASED BENEFIT
100% HOME HEALTH CARE BENEFIT

BENEFIT -- TWO YEARS

Issue Age	ELIMINATION PERIODS			
	0 Day	20 Day	100 Day	365 Day
18-39	3.96	3.78	3.22	2.75
40	4.28	4.07	3.48	2.98
41	4.39	4.18	3.55	3.04
42	4.52	4.30	3.66	3.13
43	4.66	4.42	3.76	3.19
44	4.78	4.54	3.85	3.28
45	4.94	4.66	3.94	3.34
46	5.08	4.79	4.06	3.43
47	5.24	4.94	4.15	3.48
48	5.39	5.09	4.27	3.58
49	5.56	5.26	4.39	3.67
50	5.76	5.44	4.54	3.78
51	5.95	5.62	4.69	3.92
52	6.16	5.80	4.82	4.01
53	6.38	5.99	5.00	4.18
54	6.58	6.19	5.15	4.28
55	6.84	6.41	5.35	4.48
56	7.12	6.65	5.54	4.61
57	7.42	6.91	5.74	4.78
58	7.75	7.19	5.98	4.96
59	8.12	7.50	6.20	5.12
60	8.50	7.81	6.44	5.32
61	8.90	8.14	6.70	5.52
62	9.28	8.48	6.94	5.68
63	9.62	8.80	7.16	5.83
64	9.98	9.13	7.36	5.93
65	10.33	9.47	7.60	6.08
66	10.74	9.84	7.85	6.28
67	11.26	10.30	8.20	6.53
68	11.89	10.85	8.65	6.90
69	12.67	11.50	9.20	7.36
70	13.46	12.17	9.77	7.84
71	14.20	12.80	10.31	8.30
72	14.83	13.36	10.78	8.70
73	15.30	13.80	11.15	9.01
74	15.68	14.16	11.47	9.29
75	16.00	14.48	11.75	9.54
76	16.32	14.82	12.04	9.77
77	16.72	15.20	12.34	10.02
78	17.17	15.62	12.66	10.26
79	17.65	16.08	13.00	10.51
80	18.16	16.54	13.37	10.81
81	18.67	17.04	13.73	11.08
82	19.24	17.54	14.11	11.35
83	19.80	18.08	14.50	11.63
84	20.39	18.62	14.92	11.95

TO OBTAIN QUARTERLY, SEMIANNUAL, AND ANNUAL PREMIUMS, MULTIPLY THE ABC QUOTED PREMIUMS BY 3, 6, AND 12, RESPECTIVELY. THE MONTHLY PREMIUMS FOR B/ SERVICE PLAN AND PAYROLL DEDUCTION ISSUES ARE THE PREMIUMS LISTED ABOVE. R25387-44-2

Date: 01/25/2013

MUTUAL OF OMAHA INSURANCE COMPANY
SCHEDULE OF MONTHLY RATES FOR RIDER FORM 0DX5M

PER \$10 DAILY CONFINED CARE/PER \$10 DAILY COMMUNITY BASED BENEFIT
100% HOME HEALTH CARE BENEFIT

Issue Age	BENEFIT -- 3 YEARS			
	ELIMINATION PERIOD			
	0 Day	20 Day	100 Day	365 Day
18-39	4.94	4.54	3.83	3.23
40	5.40	4.96	4.19	3.54
41	5.53	5.09	4.30	3.64
42	5.69	5.22	4.42	3.73
43	5.82	5.34	4.51	3.80
44	5.93	5.45	4.58	3.85
45	6.10	5.57	4.70	3.96
46	6.23	5.70	4.78	4.01
47	6.40	5.87	4.91	4.12
48	6.64	6.07	5.06	4.22
49	6.84	6.28	5.21	4.32
50	7.14	6.53	5.39	4.44
51	7.39	6.78	5.57	4.57
52	7.68	7.03	5.77	4.74
53	7.98	7.30	5.98	4.90
54	8.26	7.55	6.19	5.08
55	8.54	7.79	6.38	5.23
56	8.83	8.06	6.61	5.42
57	9.16	8.35	6.84	5.60
58	9.48	8.65	7.08	5.80
59	9.82	8.98	7.34	6.00
60	10.18	9.32	7.62	6.23
61	10.52	9.66	7.88	6.43
62	10.90	9.98	8.14	6.64
63	11.21	10.26	8.38	6.85
64	11.53	10.51	8.60	7.03
65	11.86	10.79	8.81	7.19
66	12.19	11.08	9.04	7.38
67	12.58	11.42	9.32	7.60
68	13.03	11.88	9.66	7.86
69	13.57	12.43	10.06	8.14
70	14.15	13.00	10.46	8.41
71	14.65	13.51	10.84	8.69
72	15.06	13.92	11.14	8.92
73	15.28	14.15	11.30	9.04
74	15.31	14.21	11.35	9.07
75	15.34	14.26	11.38	9.07
76	15.46	14.36	11.45	9.13
77	15.76	14.62	11.68	9.32
78	16.25	15.05	12.04	9.62
79	16.90	15.58	12.49	10.01
80	17.63	16.22	13.02	10.45
81	18.49	16.94	13.62	10.96
82	19.45	17.77	14.33	11.56
83	20.54	18.70	15.11	12.22
84	21.73	19.72	15.97	12.94

TO OBTAIN QUARTERLY, SEMIANNUAL, AND ANNUAL PREMIUMS, MULTIPLY THE ABC QUOTED PREMIUMS BY 3, 6, AND 12, RESPECTIVELY. THE MONTHLY PREMIUMS FOR B/ SERVICE PLAN AND PAYROLL DEDUCTION ISSUES ARE THE PREMIUMS LISTED ABOVE
R25387-44-2

Date: 01/25/2013

MUTUAL OF OMAHA INSURANCE COMPANY
SCHEDULE OF MONTHLY RATES FOR RIDER FORM 0DX5M

PER \$10 DAILY CONFINED CARE/PER \$10 DAILY COMMUNITY BASED BENEFIT
100% HOME HEALTH CARE BENEFIT

Issue Age	BENEFIT -- 5 YEARS			
	ELIMINATION PERIODS			
	0 Day	20 Day	100 Day	365 Day
18-39	7.04	6.56	5.53	4.68
40	7.63	7.11	5.94	4.97
41	7.84	7.30	6.08	5.07
42	8.04	7.50	6.25	5.19
43	8.24	7.68	6.35	5.26
44	8.43	7.85	6.52	5.41
45	8.67	8.04	6.66	5.50
46	8.89	8.25	6.82	5.63
47	9.15	8.49	7.02	5.81
48	9.48	8.78	7.26	6.01
49	9.81	9.09	7.50	6.19
50	10.19	9.43	7.81	6.48
51	10.60	9.78	8.10	6.71
52	10.96	10.14	8.38	6.93
53	11.33	10.47	8.69	7.19
54	11.64	10.84	8.95	7.38
55	12.01	11.20	9.24	7.63
56	12.36	11.56	9.53	7.84
57	12.75	11.94	9.81	8.07
58	13.13	12.32	10.09	8.27
59	13.57	12.69	10.38	8.49
60	14.00	13.09	10.67	8.69
61	14.48	13.51	10.97	8.90
62	14.96	13.94	11.29	9.15
63	15.44	14.37	11.62	9.42
64	15.97	14.80	11.97	9.68
65	16.50	15.24	12.32	9.94
66	17.07	15.71	12.68	10.24
67	17.64	16.23	13.08	10.54
68	18.27	16.81	13.52	10.87
69	18.99	17.45	14.01	11.26
70	19.71	18.13	14.53	11.66
71	20.42	18.77	15.03	12.03
72	21.08	19.38	15.50	12.40
73	21.65	19.91	15.93	12.74
74	22.17	20.38	16.31	13.06
75	22.68	20.88	16.71	13.38
76	23.22	21.37	17.11	13.68
77	23.88	21.98	17.61	14.11
78	24.63	22.66	18.17	14.56
79	25.43	23.41	18.77	15.05
80	26.31	24.20	19.42	15.59
81	27.21	25.03	20.11	16.15
82	28.23	25.93	20.83	16.74
83	29.26	26.86	21.60	17.37
84	30.36	27.85	22.43	18.06

TO OBTAIN QUARTERLY, SEMIANNUAL, AND ANNUAL PREMIUMS, MULTIPLY THE ABOVE QUOTED PREMIUMS BY 3, 6, AND 12, RESPECTIVELY. THE MONTHLY PREMIUMS FOR B, SERVICE PLAN AND PAYROLL DEDUCTION ISSUES ARE THE PREMIUMS LISTED ABOVE

R25387-44-2

Date: 01/25/2013

MUTUAL OF OMAHA INSURANCE COMPANY
SCHEDULE OF MONTHLY RATES FOR RIDER FORM 0DX5M

PER \$10 DAILY CONFINED CARE/PER \$10 DAILY COMMUNITY BASED BENEFIT
100% HOME HEALTH CARE BENEFIT

Issue Age	BENEFIT -- LIFETIME			
	ELIMINATION PERIODS			
	0 Day	20 Day	100 Day	365 Day
18-39	11.75	11.08	9.08	7.44
40	12.43	11.75	9.62	7.86
41	12.76	12.02	9.88	8.12
42	13.04	12.31	10.13	8.32
43	13.38	12.62	10.38	8.53
44	13.73	12.95	10.67	8.78
45	14.09	13.31	10.98	9.08
46	14.52	13.69	11.33	9.37
47	14.93	14.09	11.64	9.61
48	15.37	14.50	11.98	9.89
49	15.88	14.94	12.37	10.22
50	16.37	15.40	12.72	10.50
51	16.85	15.82	13.07	10.81
52	17.30	16.19	13.37	11.04
53	17.69	16.49	13.61	11.20
54	17.99	16.68	13.76	11.35
55	18.30	16.90	13.93	11.47
56	18.61	17.12	14.09	11.59
57	19.07	17.44	14.32	11.76
58	19.60	17.88	14.68	12.06
59	20.21	18.37	15.06	12.34
60	20.87	18.89	15.46	12.65
61	21.54	19.49	15.92	13.01
62	22.21	20.09	16.38	13.37
63	22.93	20.74	16.85	13.69
64	23.68	21.46	17.38	14.09
65	24.42	22.16	17.90	14.46
66	25.24	22.94	18.49	14.88
67	26.04	23.71	19.09	15.38
68	26.89	24.49	19.76	15.95
69	27.82	25.33	20.48	16.55
70	28.72	26.17	21.18	17.15
71	29.68	27.04	21.90	17.75
72	30.56	27.89	22.62	18.36
73	31.45	28.69	23.29	18.91
74	32.30	29.45	23.92	19.44
75	33.18	30.26	24.60	19.98
76	34.07	31.14	25.28	20.54
77	34.99	32.09	26.02	21.11
78	35.96	33.17	26.83	21.72
79	36.96	34.28	27.67	22.36
80	38.03	35.51	28.58	22.99
81	39.19	36.82	29.54	23.71
82	40.37	38.18	30.58	24.48
83	41.65	39.66	31.67	25.28
84	43.00	41.15	32.77	26.10

TO OBTAIN QUARTERLY, SEMIANNUAL, AND ANNUAL PREMIUMS, MULTIPLY THE ABC QUOTED PREMIUMS BY 3, 6, AND 12, RESPECTIVELY. THE MONTHLY PREMIUMS FOR B/ SERVICE PLAN AND PAYROLL DEDUCTION ISSUES ARE THE PREMIUMS LISTED ABOVE.
R25387-44-2

Date: 01/25/2013

MUTUAL OF OMAHA INSURANCE COMPANY
SCHEDULE OF MONTHLY RATES FOR RIDER FORM 0DX5M

PER \$10 DAILY CONFINED CARE/PER \$8 DAILY COMMUNITY BASED BENEFIT
80% HOME HEALTH CARE BENEFIT

Issue Age	BENEFIT -- 1 YEAR			
	ELIMINATION PERIODS			
	0 Day	20 Day	100 Day	365 Day
18-39	2.52	2.36	2.08	1.81
40	2.76	2.56	2.21	1.92
41	2.82	2.62	2.27	1.97
42	2.89	2.70	2.32	1.99
43	3.00	2.78	2.41	2.09
44	3.07	2.84	2.45	2.12
45	3.16	2.92	2.53	2.20
46	3.26	3.04	2.59	2.21
47	3.36	3.14	2.69	2.32
48	3.47	3.28	2.80	2.38
49	3.61	3.40	2.87	2.44
50	3.76	3.55	3.00	2.53
51	3.88	3.70	3.10	2.60
52	4.03	3.85	3.22	2.68
53	4.18	4.00	3.32	2.76
54	4.34	4.13	3.46	2.89
55	4.48	4.26	3.53	2.93
56	4.63	4.42	3.68	3.06
57	4.80	4.57	3.82	3.17
58	4.97	4.74	3.92	3.24
59	5.16	4.91	4.06	3.35
60	5.38	5.11	4.21	3.46
61	5.56	5.28	4.34	3.56
62	5.82	5.50	4.52	3.71
63	6.07	5.74	4.72	3.88
64	6.32	5.94	4.90	4.03
65	6.59	6.18	5.10	4.20
66	6.90	6.46	5.32	4.39
67	7.21	6.72	5.54	4.56
68	7.55	7.04	5.76	4.72
69	7.94	7.39	6.02	4.91
70	8.33	7.74	6.28	5.09
71	8.72	8.09	6.52	5.26
72	9.08	8.42	6.79	5.47
73	9.37	8.70	7.02	5.68
74	9.64	8.93	7.24	5.86
75	9.88	9.18	7.44	6.04
76	10.18	9.43	7.64	6.19
77	10.50	9.76	7.90	6.40
78	10.85	10.09	8.14	6.58
79	11.27	10.48	8.45	6.82
80	11.70	10.88	8.74	7.02
81	12.16	11.32	9.07	7.27
82	12.66	11.78	9.41	7.51
83	13.18	12.28	9.78	7.79
84	13.73	12.82	10.18	8.08

TO OBTAIN QUARTERLY, SEMIANNUAL, AND ANNUAL PREMIUMS, MULTIPLY THE ABC QUOTED PREMIUMS BY 3, 6, AND 12. RESPECTIVELY . THE MONTHLY PREMIUMS FOR B SERVICE PLAN AND PAYROLL DEDUCTION ISSUES ARE THE PREMIUMS LISTED ABOVE
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Date: 01/25/2013

MUTUAL OF OMAHA INSURANCE COMPANY
SCHEDULE OF MONTHLY RATES FOR RIDER FORM 0DX5M

PER \$10 DAILY CONFINED CARE/PER \$8 DAILY COMMUNITY BASED BENEFIT
80% HOME HEALTH CARE BENEFIT

BENEFIT -- 2 YEARS

Issue Age	ELIMINATION PERIODS			
	0 Day	20 Day	100 Day	365 Day
18-39	3.60	3.47	2.99	2.57
40	3.90	3.76	3.23	2.78
41	4.00	3.84	3.29	2.82
42	4.12	3.96	3.41	2.94
43	4.24	4.06	3.48	2.99
44	4.36	4.16	3.58	3.07
45	4.50	4.28	3.67	3.16
46	4.62	4.42	3.76	3.20
47	4.78	4.54	3.85	3.28
48	4.92	4.68	3.96	3.35
49	5.05	4.84	4.08	3.44
50	5.26	4.99	4.20	3.54
51	5.42	5.16	4.34	3.65
52	5.60	5.33	4.49	3.78
53	5.81	5.51	4.64	3.91
54	6.00	5.71	4.78	4.00
55	6.22	5.92	4.96	4.16
56	6.49	6.12	5.15	4.34
57	6.76	6.36	5.32	4.45
58	7.06	6.61	5.54	4.64
59	7.39	6.89	5.76	4.82
60	7.74	7.19	5.98	4.98
61	8.11	7.49	6.22	5.17
62	8.45	7.80	6.44	5.32
63	8.77	8.10	6.64	5.44
64	9.08	8.40	6.84	5.57
65	9.41	8.70	7.06	5.71
66	9.78	9.06	7.30	5.86
67	10.24	9.47	7.62	6.13
68	10.84	9.98	8.04	6.47
69	11.53	10.58	8.56	6.91
70	12.26	11.20	9.08	7.36
71	12.92	11.80	9.58	7.78
72	13.51	12.29	10.02	8.17
73	13.94	12.70	10.36	8.44
74	14.27	13.03	10.66	8.72
75	14.56	13.32	10.92	8.96
76	14.86	13.63	11.17	9.16
77	15.23	13.99	11.45	9.38
78	15.64	14.38	11.76	9.64
79	16.07	14.78	12.08	9.88
80	16.52	15.22	12.42	10.14
81	17.00	15.67	12.76	10.39
82	17.51	16.13	13.10	10.64
83	18.04	16.63	13.48	10.91
84	18.58	17.14	13.88	11.24

TO OBTAIN QUARTERLY, SEMIANNUAL, AND ANNUAL PREMIUMS, MULTIPLY THE ABC QUOTED PREMIUMS BY 3, 6, AND 12, RESPECTIVELY. THE MONTHLY PREMIUMS FOR B/ SERVICE PLAN AND PAYROLL DEDUCTION ISSUES ARE THE PREMIUMS LISTED ABOVE
R25387-44-2

Date: 01/25/2013

MUTUAL OF OMAHA INSURANCE COMPANY
SCHEDULE OF MONTHLY RATES FOR RIDER FORM 0DX5M

PER \$10 DAILY CONFINED CARE/PER \$8 DAILY COMMUNITY BASED BENEFIT
80% HOME HEALTH CARE BENEFIT

Issue Age	BENEFIT -- 3 YEARS			
	ELIMINATION PERIODS			
	0 Day	20 Day	100 Day	365 Day
18-39	4.55	4.24	3.59	3.04
40	4.98	4.61	3.94	3.37
41	5.09	4.73	4.04	3.46
42	5.24	4.86	4.14	3.53
43	5.38	4.96	4.24	3.61
44	5.47	5.08	4.30	3.65
45	5.60	5.20	4.42	3.76
46	5.74	5.32	4.49	3.80
47	5.90	5.45	4.61	3.90
48	6.11	5.65	4.75	4.00
49	6.30	5.84	4.90	4.12
50	6.58	6.08	5.06	4.21
51	6.80	6.32	5.23	4.33
52	7.07	6.55	5.44	4.50
53	7.36	6.78	5.62	4.66
54	7.61	7.02	5.82	4.82
55	7.86	7.24	6.00	4.97
56	8.14	7.50	6.20	5.12
57	8.44	7.76	6.44	5.34
58	8.74	8.06	6.65	5.48
59	9.04	8.36	6.90	5.69
60	9.36	8.68	7.15	5.89
61	9.70	8.98	7.40	6.10
62	10.01	9.28	7.64	6.29
63	10.32	9.53	7.87	6.50
64	10.62	9.78	8.08	6.67
65	10.92	10.02	8.27	6.83
66	11.22	10.30	8.50	7.02
67	11.59	10.63	8.75	7.20
68	11.99	11.05	9.08	7.46
69	12.50	11.57	9.46	7.72
70	13.03	12.10	9.83	7.98
71	13.50	12.56	10.18	8.23
72	13.86	12.95	10.46	8.45
73	14.06	13.16	10.62	8.57
74	14.10	13.20	10.66	8.62
75	14.12	13.25	10.67	8.59
76	14.22	13.36	10.75	8.66
77	14.51	13.60	10.96	8.84
78	14.95	13.99	11.30	9.13
79	15.56	14.50	11.74	9.49
80	16.22	15.10	12.24	9.92
81	17.02	15.76	12.80	10.40
82	17.92	16.54	13.46	10.96
83	18.91	17.38	14.20	11.60
84	20.02	18.34	15.00	12.28

TO OBTAIN QUARTERLY, SEMIANNUAL, AND ANNUAL PREMIUMS, MULTIPLY THE ABC PREMIUMS BY 3, 6 AND 12 RESPECTIVELY. THE MONTHLY PREMIUMS FOR BANK SERV PAYROLL DEDUCTION ISSUES ARE THE PREMIUMS LISTED ABOVE.

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Date: 01/25/2013

MUTUAL OF OMAHA INSURANCE COMPANY
SCHEDULE OF MONTHLY RATES FOR RIDER FORM 0DX5M

PER \$10 DAILY CONFINED CARE/PER \$8 DAILY COMMUNITY BASED BENEFIT
80% HOME HEALTH CARE BENEFIT

Issue Age	BENEFIT -- 5 YEARS			
	ELIMINATION PERIODS			
	0 Day	20 Day	100 Day	365 Day
18-39	6.55	6.16	5.26	4.49
40	7.11	6.68	5.65	4.77
41	7.30	6.88	5.79	4.87
42	7.48	7.04	5.92	4.97
43	7.67	7.22	6.03	5.04
44	7.83	7.38	6.19	5.19
45	8.07	7.57	6.34	5.30
46	8.27	7.77	6.47	5.39
47	8.51	7.96	6.66	5.57
48	8.83	8.24	6.91	5.79
49	9.15	8.54	7.12	5.93
50	9.48	8.87	7.41	6.19
51	9.88	9.22	7.67	6.38
52	10.21	9.53	7.96	6.67
53	10.54	9.83	8.24	6.91
54	10.84	10.18	8.50	7.11
55	11.18	10.52	8.79	7.34
56	11.53	10.87	9.04	7.52
57	11.87	11.21	9.31	7.73
58	12.23	11.57	9.57	7.91
59	12.63	11.94	9.88	8.16
60	13.02	12.32	10.12	8.33
61	13.46	12.72	10.42	8.56
62	13.93	13.11	10.71	8.77
63	14.37	13.51	11.03	9.02
64	14.86	13.92	11.36	9.28
65	15.36	14.32	11.68	9.53
66	15.86	14.76	12.03	9.81
67	16.41	15.26	12.42	10.11
68	17.01	15.80	12.85	10.44
69	17.68	16.41	13.31	10.80
70	18.35	17.02	13.81	11.20
71	19.00	17.64	14.27	11.53
72	19.60	18.21	14.71	11.88
73	20.14	18.70	15.14	12.25
74	20.61	19.18	15.50	12.53
75	21.11	19.61	15.86	12.83
76	21.59	20.11	16.25	13.13
77	22.22	20.67	16.72	13.52
78	22.92	21.31	17.27	13.98
79	23.67	21.99	17.82	14.44
80	24.46	22.73	18.43	14.94
81	25.33	23.51	19.09	15.50
82	26.26	24.37	19.78	16.06
83	27.24	25.26	20.52	16.68
84	28.25	26.19	21.30	17.31

TO OBTAIN QUARTERLY, SEMIANNUAL, AND ANNUAL PREMIUMS,
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AND PAYROLL DEDUCTION ISSUES ARE THE PREMIUMS LISTED ABOVE.
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Date: 01/25/2013

MUTUAL OF OMAHA INSURANCE COMPANY
SCHEDULE OF MONTHLY RATES FOR RIDER FORM 0DX5M

PER \$10 DAILY CONFINED CARE/PER \$8 DAILY COMMUNITY BASED BENEFIT
80% HOME HEALTH CARE BENEFIT

BENEFIT -- LIFETIME

Issue Age	ELIMINATION PERIODS			
	0 Day	20 Day	100 Day	365 Day
18-39	11.03	10.54	8.70	7.21
40	11.69	11.17	9.24	7.63
41	12.00	11.44	9.47	7.85
42	12.26	11.66	9.72	8.08
43	12.59	11.98	9.97	8.30
44	12.91	12.31	10.24	8.51
45	13.26	12.65	10.54	8.77
46	13.66	13.03	10.86	9.05
47	14.04	13.38	11.17	9.32
48	14.46	13.78	11.51	9.61
49	14.94	14.20	11.86	9.89
50	15.38	14.63	12.22	10.19
51	15.86	15.04	12.54	10.46
52	16.27	15.38	12.83	10.69
53	16.64	15.65	13.07	10.92
54	16.91	15.85	13.20	10.98
55	17.21	16.06	13.37	11.12
56	17.52	16.27	13.54	11.27
57	17.90	16.58	13.76	11.40
58	18.42	16.99	14.09	11.70
59	19.00	17.46	14.46	11.98
60	19.62	17.95	14.83	12.26
61	20.27	18.52	15.28	12.60
62	20.90	19.08	15.72	12.94
63	21.58	19.70	16.16	13.26
64	22.27	20.38	16.68	13.66
65	22.97	21.06	17.17	14.00
66	23.72	21.79	17.75	14.46
67	24.48	22.52	18.30	14.87
68	25.32	23.29	18.97	15.44
69	26.16	24.07	19.66	16.03
70	27.04	24.89	20.33	16.62
71	27.89	25.68	21.02	17.21
72	28.75	26.48	21.72	17.78
73	29.58	27.26	22.36	18.31
74	30.38	27.98	22.97	18.83
75	31.20	28.75	23.60	19.39
76	32.04	29.59	24.26	19.90
77	32.90	30.48	24.97	20.47
78	33.82	31.51	25.74	21.02
79	34.75	32.57	26.56	21.64
80	35.77	33.74	27.42	22.27
81	36.85	34.99	28.36	22.99
82	37.97	36.29	29.34	23.72
83	39.19	37.68	30.38	24.53
84	40.44	39.11	31.46	25.32

TO OBTAIN QUARTERLY, SEMIANNUAL, AND ANNUAL PREMIUMS,
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SERVICE PLAN AND PAYROLL DEDUCTION ISSUES ARE THE
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Date: 01/25/2013

MUTUAL OF OMAHA INSURANCE COMPANY
SCHEDULE OF MONTHLY RATES FOR RIDER FORM 0DX5M

PER \$10 DAILY CONFINED CARE/PER \$5 DAILY COMMUNITY BASED BENEFIT
50% HOME HEALTH CARE BENEFIT

BENEFIT -- 1 YEAR

Issue Age	Elimination Periods			
	0 Day	20 Day	100 Day	365 Day
18-39	2.11	1.98	1.72	1.49
40	2.30	2.14	1.86	1.63
41	2.35	2.18	1.90	1.66
42	2.44	2.26	1.96	1.70
43	2.50	2.32	2.02	1.75
44	2.56	2.38	2.05	1.76
45	2.64	2.45	2.11	1.82
46	2.74	2.53	2.17	1.86
47	2.80	2.63	2.24	1.90
48	2.92	2.72	2.34	2.02
49	3.02	2.84	2.40	2.03
50	3.13	2.96	2.51	2.14
51	3.25	3.08	2.59	2.18
52	3.36	3.22	2.68	2.24
53	3.49	3.32	2.77	2.32
54	3.61	3.46	2.88	2.41
55	3.73	3.56	2.95	2.44
56	3.88	3.70	3.07	2.56
57	4.01	3.83	3.16	2.62
58	4.16	3.96	3.28	2.70
59	4.31	4.10	3.40	2.82
60	4.49	4.26	3.52	2.92
61	4.64	4.42	3.64	2.98
62	4.84	4.60	3.78	3.11
63	5.06	4.78	3.95	3.26
64	5.28	4.96	4.08	3.36
65	5.50	5.17	4.26	3.52
66	5.77	5.38	4.44	3.67
67	6.01	5.62	4.63	3.82
68	6.31	5.87	4.84	3.97
69	6.64	6.16	5.03	4.12
70	6.96	6.46	5.26	4.27
71	7.28	6.77	5.45	4.39
72	7.60	7.03	5.66	4.56
73	7.82	7.26	5.86	4.72
74	8.05	7.45	6.04	4.88
75	8.26	7.67	6.20	5.02
76	8.50	7.88	6.38	5.16
77	8.76	8.14	6.59	5.33
78	9.06	8.42	6.80	5.50
79	9.40	8.75	7.06	5.68
80	9.77	9.10	7.30	5.86
81	10.14	9.46	7.57	6.07
82	10.57	9.84	7.87	6.29
83	11.02	10.25	8.17	6.52
84	11.47	10.69	8.50	6.76

TO OBTAIN QUARTERLY, SEMIANNUAL, AND ANNUAL PREMIUMS,
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AND PAYROLL DEDUCTION ISSUES ARE THE PREMIUMS LISTED ABOVE.
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MUTUAL OF OMAHA INSURANCE COMPANY
SCHEDULE OF MONTHLY RATES FOR RIDER FORM 0DX5M

PER \$10 DAILY CONFINED CARE/PER \$5 DAILY COMMUNITY BASED BENEFIT
50% HOME HEALTH CARE BENEFIT

BENEFIT -- 2 YEARS

Issue Age	Elimination Periods			
	0 Day	20 Day	100 Day	365 Day
18-39	3.06	2.95	2.54	2.20
40	3.30	3.18	2.74	2.38
41	3.38	3.25	2.80	2.41
42	3.50	3.35	2.89	2.50
43	3.59	3.44	2.95	2.53
44	3.71	3.53	3.02	2.59
45	3.80	3.64	3.10	2.65
46	3.91	3.73	3.19	2.74
47	4.04	3.85	3.28	2.78
48	4.16	3.97	3.36	2.86
49	4.30	4.09	3.46	2.92
50	4.46	4.24	3.56	2.99
51	4.60	4.38	3.68	3.10
52	4.75	4.52	3.82	3.22
53	4.92	4.68	3.94	3.30
54	5.08	4.84	4.06	3.41
55	5.28	5.00	4.21	3.54
56	5.50	5.20	4.36	3.65
57	5.72	5.38	4.52	3.80
58	5.99	5.62	4.70	3.94
59	6.28	5.86	4.90	4.08
60	6.56	6.10	5.08	4.24
61	6.88	6.35	5.27	4.38
62	7.16	6.61	5.46	4.51
63	7.44	6.86	5.64	4.64
64	7.70	7.12	5.81	4.74
65	7.97	7.39	5.99	4.85
66	8.30	7.68	6.19	4.99
67	8.69	8.02	6.46	5.20
68	9.19	8.46	6.83	5.52
69	9.78	8.98	7.24	5.86
70	10.39	9.50	7.70	6.24
71	10.97	9.98	8.12	6.61
72	11.46	10.43	8.48	6.90
73	11.81	10.76	8.78	7.16
74	12.10	11.05	9.04	7.40
75	12.35	11.30	9.26	7.60
76	12.60	11.56	9.47	7.78
77	12.91	11.86	9.71	7.96
78	13.25	12.19	9.98	8.17
79	13.63	12.54	10.24	8.36
80	14.02	12.91	10.54	8.59
81	14.41	13.28	10.82	8.82
82	14.84	13.69	11.11	9.02
83	15.29	14.11	11.42	9.25
84	15.76	14.53	11.76	9.52

TO OBTAIN QUARTERLY, SEMIANNUAL, AND ANNUAL PREMIUMS,
MULTIPLY THE ABOVE QUOTED PREMIUMS BY 3, 6, AND 12,
RESPECTIVELY. THE MONTHLY PREMIUMS FOR BANK SERVICE PLAN
AND PAYROLL DEDUCTION ISSUES ARE THE PREMIUMS LISTED ABOVE.
R25387-44-2

Date: 01/25/2013

MUTUAL OF OMAHA INSURANCE COMPANY
SCHEDULE OF MONTHLY RATES FOR RIDER FORM 0DX5M

PER \$10 DAILY CONFINED CARE/PER \$5 DAILY COMMUNITY BASED BENEFIT
50% HOME HEALTH CARE BENEFIT

BENEFIT -- 3 YEARS

Issue Age	Elimination Periods			
	0 Day	20 Day	100 Day	365 Day
18-39	3.91	3.64	3.10	2.63
40	4.27	3.97	3.38	2.88
41	4.38	4.07	3.48	2.98
42	4.51	4.18	3.56	3.04
43	4.61	4.27	3.65	3.12
44	4.72	4.37	3.70	3.13
45	4.82	4.46	3.80	3.24
46	4.94	4.56	3.86	3.28
47	5.08	4.69	3.97	3.36
48	5.24	4.86	4.09	3.44
49	5.42	5.03	4.22	3.54
50	5.65	5.22	4.36	3.62
51	5.86	5.44	4.51	3.74
52	6.10	5.63	4.67	3.88
53	6.31	5.84	4.82	3.98
54	6.53	6.04	5.02	4.15
55	6.76	6.25	5.16	4.26
56	7.00	6.46	5.35	4.44
57	7.25	6.68	5.53	4.58
58	7.50	6.92	5.72	4.73
59	7.79	7.20	5.94	4.90
60	8.06	7.46	6.16	5.08
61	8.33	7.74	6.36	5.23
62	8.62	7.97	6.58	5.44
63	8.88	8.21	6.76	5.57
64	9.14	8.42	6.95	5.74
65	9.40	8.63	7.12	5.87
66	9.65	8.86	7.32	6.05
67	9.97	9.14	7.54	6.22
68	10.33	9.52	7.80	6.40
69	10.75	9.94	8.12	6.64
70	11.21	10.42	8.45	6.86
71	11.59	10.81	8.75	7.08
72	11.92	11.14	9.00	7.27
73	12.10	11.32	9.14	7.38
74	12.13	11.38	9.16	7.38
75	12.16	11.40	9.19	7.42
76	12.23	11.48	9.25	7.46
77	12.47	11.69	9.44	7.62
78	12.88	12.04	9.72	7.85
79	13.38	12.47	10.09	8.16
80	13.96	12.97	10.54	8.56
81	14.64	13.56	11.00	8.93
82	15.42	14.22	11.58	9.43
83	16.26	14.96	12.22	9.98
84	17.21	15.77	12.91	10.57

TO OBTAIN QUARTERLY, SEMIANNUAL, AND ANNUAL PREMIUMS,
MULTIPLY THE ABOVE QUOTED PREMIUMS BY 3, 6, AND 12,
RESPECTIVELY. THE MONTHLY PREMIUMS FOR BANK SERVICE PLAN
AND PAYROLL DEDUCTION ISSUES ARE THE PREMIUMS LISTED ABOVE.
R25387-44-2

Date: 01/25/2013

MUTUAL OF OMAHA INSURANCE COMPANY
SCHEDULE OF MONTHLY RATES FOR RIDER FORM 0DX5M

PER \$10 DAILY CONFINED CARE/PER \$5 DAILY COMMUNITY BASED BENEFIT
50% HOME HEALTH CARE BENEFIT

BENEFIT -- 5 YEARS

Issue Age	Elimination Periods			
	0 Day	20 Day	100 Day	365 Day
18-39	5.76	5.46	4.63	3.95
40	6.26	5.92	4.97	4.18
41	6.45	6.05	5.10	4.31
42	6.61	6.23	5.23	4.40
43	6.78	6.38	5.32	4.47
44	6.92	6.52	5.47	4.60
45	7.13	6.68	5.59	4.66
46	7.30	6.84	5.72	4.77
47	7.51	7.04	5.89	4.93
48	7.79	7.30	6.09	5.09
49	8.06	7.55	6.28	5.23
50	8.37	7.83	6.55	5.48
51	8.70	8.12	6.79	5.68
52	9.02	8.43	7.04	5.87
53	9.31	8.70	7.27	6.08
54	9.56	8.99	7.50	6.27
55	9.86	9.28	7.77	6.48
56	10.16	9.59	7.99	6.66
57	10.48	9.89	8.23	6.84
58	10.80	10.22	8.46	7.01
59	11.15	10.55	8.69	7.17
60	11.50	10.87	8.93	7.35
61	11.89	11.22	9.19	7.52
62	12.30	11.57	9.45	7.71
63	12.69	11.92	9.75	7.96
64	13.12	12.28	10.02	8.17
65	13.57	12.65	10.32	8.43
66	14.01	13.05	10.63	8.67
67	14.50	13.48	10.96	8.91
68	15.03	13.95	11.33	9.20
69	15.59	14.48	11.75	9.55
70	16.21	15.04	12.19	9.88
71	16.78	15.58	12.58	10.16
72	17.31	16.08	12.99	10.49
73	17.80	16.52	13.34	10.78
74	18.21	16.92	13.67	11.04
75	18.63	17.34	13.99	11.30
76	19.07	17.75	14.34	11.59
77	19.61	18.26	14.76	11.94
78	20.24	18.81	15.24	12.34
79	20.90	19.43	15.73	12.74
80	21.60	20.06	16.28	13.21
81	22.37	20.77	16.87	13.71
82	23.19	21.51	17.48	14.20
83	24.05	22.30	18.11	14.71
84	24.95	23.12	18.80	15.29

TO OBTAIN QUARTERLY, SEMIANNUAL, AND ANNUAL PREMIUMS,
MULTIPLY THE ABOVE QUOTED PREMIUMS BY 3, 6, AND 12,
RESPECTIVELY. THE MONTHLY PREMIUMS FOR BANK SERVICE PLAN
AND PAYROLL DEDUCTION ISSUES ARE THE PREMIUMS LISTED ABOVE.
R25387-44-2

Date: 01/25/2013

MUTUAL OF OMAHA INSURANCE COMPANY
SCHEDULE OF MONTHLY RATES FOR RIDER FORM 0DX5M

PER \$10 DAILY CONFINED CARE/PER \$5 DAILY COMMUNITY BASED BENEFIT
50% HOME HEALTH CARE BENEFIT

BENEFIT -- LIFETIME

Issue Age	Elimination Periods			
	0 Day	20 Day	100 Day	365 Day
18-39	10.00	9.53	7.88	6.52
40	10.56	10.10	8.38	6.95
41	10.86	10.34	8.59	7.14
42	11.12	10.57	8.78	7.30
43	11.40	10.86	9.01	7.49
44	11.66	11.14	9.26	7.70
45	12.00	11.45	9.55	7.94
46	12.36	11.78	9.84	8.22
47	12.72	12.12	10.10	8.41
48	13.07	12.47	10.39	8.66
49	13.54	12.84	10.73	8.99
50	13.93	13.25	11.04	9.22
51	14.34	13.61	11.35	9.47
52	14.72	13.93	11.60	9.67
53	15.06	14.18	11.82	9.86
54	15.32	14.35	11.95	9.95
55	15.56	14.52	12.10	10.08
56	15.85	14.72	12.23	10.18
57	16.22	15.02	12.44	10.31
58	16.68	15.40	12.76	10.57
59	17.21	15.80	13.09	10.85
60	17.75	16.26	13.43	11.11
61	18.36	16.74	13.85	11.44
62	18.92	17.28	14.24	11.71
63	19.54	17.83	14.63	12.01
64	20.17	18.46	15.10	12.36
65	20.80	19.08	15.55	12.68
66	21.48	19.74	16.06	13.07
67	22.16	20.40	16.58	13.46
68	22.90	21.10	17.16	13.97
69	23.68	21.79	17.77	14.50
70	24.46	22.51	18.41	15.06
71	25.24	23.24	19.03	15.59
72	26.02	23.99	19.64	16.08
73	26.77	24.68	20.23	16.58
74	27.50	25.33	20.80	17.05
75	28.24	26.02	21.37	17.56
76	29.00	26.77	21.96	18.02
77	29.78	27.61	22.58	18.49
78	30.62	28.51	23.33	19.08
79	31.46	29.48	24.04	19.61
80	32.35	30.54	24.82	20.17
81	33.35	31.67	25.69	20.83
82	34.37	32.84	26.57	21.48
83	35.46	34.09	27.50	22.20
84	36.61	35.38	28.48	22.90

TO OBTAIN QUARTERLY, SEMIANNUAL, AND ANNUAL PREMIUMS,
MULTIPLY THE ABOVE QUOTED PREMIUMS BY 3, 6, AND 12,
RESPECTIVELY. THE MONTHLY PREMIUMS FOR BANK SERVICE PLAN
AND PAYROLL DEDUCTION ISSUES ARE THE PREMIUMS LISTED ABOVE.
R25387-44-2

Date: 01/25/2013

MUTUAL OF OMAHA INSURANCE COMPANY
SCHEDULE OF MONTHLY RATES FOR POLICY FORM NH50

PER \$10 DAILY CONFINED CARE BENEFIT

BENEFIT -- 1 YEAR

IssueAge	ELIMINATION PERIODS			
	0 Day	20 Day	100 Day	365 Day
18-39	0.70	0.67	0.62	0.58
40	0.72	0.68	0.64	0.58
41	0.74	0.71	0.65	0.60
42	0.78	0.73	0.67	0.61
43	0.82	0.77	0.70	0.62
44	0.84	0.80	0.71	0.64
45	0.88	0.83	0.73	0.64
46	0.92	0.88	0.77	0.68
47	0.97	0.91	0.80	0.70
48	1.02	0.96	0.83	0.72
49	1.07	1.01	0.88	0.76
50	1.13	1.07	0.91	0.77
51	1.20	1.13	0.96	0.82
52	1.28	1.20	1.01	0.85
53	1.36	1.28	1.07	0.89
54	1.44	1.36	1.13	0.95
55	1.54	1.43	1.20	1.01
56	1.64	1.52	1.30	1.09
57	1.76	1.63	1.38	1.18
58	1.90	1.75	1.48	1.25
59	2.04	1.88	1.60	1.34
60	2.20	2.03	1.72	1.44
61	2.41	2.20	1.86	1.57
62	2.64	2.42	2.02	1.69
63	2.92	2.68	2.21	1.84
64	3.23	2.98	2.42	1.97
65	3.59	3.28	2.64	2.12
66	3.98	3.64	2.92	2.33
67	4.42	4.04	3.22	2.56
68	4.90	4.46	3.55	2.83
69	5.40	4.90	3.91	3.12
70	5.95	5.38	4.30	3.44
71	6.58	5.92	4.75	3.82
72	7.26	6.54	5.27	4.25
73	8.04	7.25	5.86	4.72
74	8.89	8.04	6.50	5.26
75	9.82	8.89	7.19	5.82
76	10.79	9.82	7.94	6.43
77	11.84	10.78	8.74	7.07
78	12.95	11.81	9.58	7.75
79	14.14	12.90	10.48	8.50
80	15.38	14.05	11.40	9.25
81	16.70	15.26	12.40	10.06
82	18.07	16.52	13.43	10.92
83	19.52	17.86	14.52	11.81
84	21.04	19.24	15.67	12.76

TO OBTAIN QUARTERLY, SEMIANNUAL, AND ANNUAL PREMIUMS, MULTIPLY THE ABOVE QUOTED PREMIUMS BY 3, 6, AND 12, RESPECTIVELY. THE MONTHLY PREMIUMS FOR BANK SERVICE PLAN AND PAYROLL DEDUCTION ISSUES ARE THE PREMIUMS LISTED ABOVE .

R25388-44-2

Date: 01/25/2013

MUTUAL OF OMAHA INSURANCE COMPANY
SCHEDULE OF MONTHLY RATES FOR POLICY FORM NH50

PER \$10 DAILY CONFINED CARE BENEFIT

BENEFIT -- 2 YEARS

Issue Age	ELIMINATION PERIODS			
	0 Day	20 day	100 Day	365 Day
18-39	0.88	0.84	0.73	0.64
40	0.91	0.88	0.76	0.65
41	0.95	0.90	0.79	0.70
42	1.00	0.94	0.82	0.72
43	1.04	0.98	0.85	0.74
44	1.09	1.03	0.88	0.76
45	1.15	1.08	0.91	0.77
46	1.21	1.14	0.95	0.79
47	1.30	1.20	1.00	0.83
48	1.36	1.28	1.06	0.86
49	1.44	1.36	1.12	0.91
50	1.52	1.43	1.18	0.97
51	1.62	1.52	1.26	1.04
52	1.73	1.63	1.36	1.13
53	1.87	1.75	1.46	1.22
54	2.02	1.88	1.57	1.31
55	2.17	2.02	1.70	1.43
56	2.36	2.18	1.85	1.57
57	2.57	2.38	2.02	1.70
58	2.81	2.58	2.18	1.84
59	3.05	2.81	2.38	2.02
60	3.34	3.06	2.58	2.18
61	3.66	3.36	2.83	2.38
62	4.06	3.71	3.10	2.59
63	4.51	4.13	3.41	2.82
64	5.02	4.60	3.73	3.04
65	5.56	5.10	4.10	3.30
66	6.20	5.68	4.54	3.61
67	6.94	6.34	5.04	4.01
68	7.75	7.06	5.62	4.48
69	8.66	7.85	6.28	5.02
70	9.65	8.71	7.00	5.63
71	10.72	9.66	7.78	6.28
72	11.87	10.69	8.63	6.97
73	13.09	11.80	9.54	7.72
74	14.36	12.98	10.50	8.50
75	15.72	14.26	11.53	9.34
76	17.20	15.64	12.65	10.24
77	18.80	17.12	13.86	11.22
78	20.54	18.73	15.18	12.30
79	22.40	20.44	16.58	13.45
80	24.38	22.26	18.06	14.65
81	26.48	24.18	19.66	15.97
82	28.69	26.22	21.32	17.34
83	31.03	28.37	23.08	18.76
84	33.48	30.62	24.92	20.28

TO OBTAIN QUARTERLY, SEMIANNUAL, AND ANNUAL PREMIUMS, MULTIPLY THE ABOVE QUOTED PREMIUMS BY 3, 6, AND 12, RESPECTIVELY. THE MONTHLY PREMIUMS FOR BANK SERVICE PLAN AND PAYROLL DEDUCTION ISSUES ARE THE PREMIUMS LISTED ABOVE.

Date: 01/25/2013

MUTUAL OF OMAHA INSURANCE COMPANY
SCHEDULE OF MONTHLY RATES FOR POLICY FORM NH50

PER \$10 DAILY CONFINED CARE BENEFIT

BENEFIT -- 3 YEARS

Issue Age	ELIMINATION PERIODS			
	0 Day	20 Day	100 Day	365 Day
18-39	1.08	1.00	0.83	0.70
40	1.12	1.03	0.86	0.72
41	1.18	1.07	0.89	0.74
42	1.22	1.12	0.94	0.77
43	1.30	1.18	0.97	0.80
44	1.36	1.24	1.02	0.85
45	1.42	1.31	1.06	0.86
46	1.50	1.38	1.12	0.91
47	1.60	1.46	1.18	0.95
48	1.68	1.55	1.25	1.01
49	1.79	1.64	1.33	1.08
50	1.90	1.74	1.40	1.13
51	2.03	1.86	1.49	1.19
52	2.17	1.99	1.60	1.30
53	2.34	2.14	1.72	1.39
54	2.51	2.30	1.86	1.50
55	2.70	2.47	2.00	1.62
56	2.92	2.68	2.16	1.75
57	3.18	2.92	2.36	1.91
58	3.47	3.17	2.56	2.08
59	3.77	3.46	2.78	2.23
60	4.12	3.78	3.04	2.44
61	4.52	4.15	3.34	2.68
62	5.00	4.60	3.67	2.93
63	5.56	5.08	4.07	3.28
64	6.14	5.59	4.52	3.65
65	6.82	6.18	5.02	4.06
66	7.58	6.85	5.56	4.51
67	8.47	7.66	6.18	4.99
68	9.46	8.57	6.84	5.46
69	10.55	9.59	7.56	5.96
70	11.74	10.72	8.34	6.49
71	13.06	11.93	9.22	7.12
72	14.48	13.26	10.20	7.85
73	16.04	14.70	11.32	8.72
74	17.74	16.24	12.55	9.70
75	19.54	17.89	13.87	10.75
76	21.44	19.61	15.28	11.89
77	23.46	21.42	16.73	13.07
78	25.58	23.30	18.24	14.28
79	27.83	25.26	19.84	15.58
80	30.17	27.30	21.48	16.90
81	32.62	29.42	23.20	18.28
82	35.20	31.62	25.00	19.75
83	37.86	33.90	26.86	21.28
84	40.66	36.28	28.78	22.84

TO OBTAIN QUARTERLY, SEMIANNUAL, AND ANNUAL PREMIUMS, MULTIPLY THE ABOVE QUOTED PREMIUMS BY 3, 6, AND 12, RESPECTIVELY. THE MONTHLY PREMIUMS FOR BANK SERVICE PLAN AND PAYROLL DEDUCTION ISSUES ARE THE PREMIUMS LISTED ABOVE.

R25388-44-2

Date: 01/25/2013

MUTUAL OF OMAHA INSURANCE COMPANY
SCHEDULE OF MONTHLY RATES FOR POLICY FORM NH50

PER \$10 DAILY CONFINED CARE BENEFIT

BENEFIT -- 5 YEARS

Issue Age	ELIMINATION PERIODS			
	0 Day	20 Day	100 Day	365 Day
18-39	1.43	1.32	1.06	0.85
40	1.47	1.36	1.10	0.90
41	1.54	1.44	1.13	0.90
42	1.63	1.51	1.19	0.94
43	1.69	1.58	1.24	0.98
44	1.78	1.66	1.31	1.03
45	1.89	1.76	1.39	1.10
46	2.00	1.85	1.47	1.18
47	2.12	1.97	1.56	1.24
48	2.26	2.09	1.66	1.32
49	2.39	2.22	1.76	1.40
50	2.55	2.35	1.87	1.50
51	2.73	2.51	2.00	1.60
52	2.93	2.71	2.16	1.72
53	3.16	2.92	2.33	1.87
54	3.41	3.16	2.53	2.02
55	3.69	3.41	2.75	2.22
56	4.00	3.71	2.98	2.40
57	4.36	4.04	3.26	2.63
58	4.73	4.40	3.54	2.84
59	5.15	4.80	3.83	3.06
60	5.61	5.20	4.14	3.29
61	6.14	5.70	4.53	3.59
62	6.79	6.28	4.99	3.97
63	7.52	6.94	5.53	4.41
64	8.34	7.67	6.14	4.93
65	9.24	8.47	6.81	5.48
66	10.27	9.39	7.57	6.08
67	11.44	10.44	8.43	6.79
68	12.75	11.61	9.36	7.55
69	14.17	12.87	10.36	8.34
70	15.72	14.27	11.47	9.23
71	17.42	15.82	12.69	10.21
72	19.29	17.50	14.04	11.24
73	21.34	19.38	15.49	12.39
74	23.55	21.38	17.05	13.60
75	25.92	23.55	18.73	14.91
76	28.42	25.85	20.54	16.31
77	31.08	28.27	22.44	17.81
78	33.88	30.83	24.46	19.42
79	36.83	33.53	26.59	21.10
80	39.92	36.36	28.83	22.88
81	43.18	39.31	31.20	24.75
82	46.57	42.42	33.66	26.71
83	50.11	45.65	36.25	28.79
84	53.79	49.02	38.93	30.93

TO OBTAIN QUARTERLY, SEMIANNUAL, AND ANNUAL PREMIUMS, MULTIPLY THE ABOVE QUOTED PREMIUMS BY 3, 6, AND 12, RESPECTIVELY. THE MONTHLY PREMIUMS FOR BANK SERVICE PLAN AND PAYROLL DEDUCTION ISSUES ARE THE PREMIUMS LISTED ABOVE.

R25388-44-2

Date: 01/25/2013

MUTUAL OF OMAHA INSURANCE COMPANY
SCHEDULE DF MONTHLY RATES FOR POLICY FORM NH50

PER \$10 DAILY CONFINED CARE BENEFIT

Issue Age	BENEFITS -- LIFETIME			
	ELIMINATION PERIODS			
	0 Day	20 Day	100 Day	365 Day
18-39	2.18	2.08	1.62	1.28
40	2.27	2.15	1.70	1.34
41	2.39	2.27	1.78	1.40
42	2.51	2.39	1.88	1.49
43	2.66	2.54	1.99	1.57
44	2.84	2.71	2.15	1.68
45	3.05	2.92	2.30	1.82
46	3.26	3.13	2.48	1.97
47	3.48	3.34	2.65	2.11
48	3.74	3.55	2.82	2.23
49	4.01	3.79	3.01	2.40
50	4.27	4.02	3.20	2.54
51	4.57	4.26	3.40	2.71
52	4.88	4.52	3.62	2.89
53	5.18	4.78	3.84	3.08
54	5.42	5.03	4.04	3.26
55	5.74	5.27	4.27	3.48
56	6.10	5.58	4.56	3.71
57	6.55	5.99	4.88	3.96
58	7.08	6.46	5.24	4.26
59	7.66	6.97	5.62	4.52
60	8.32	7.54	6.05	4.88
61	9.10	8.22	6.60	5.29
62	10.03	9.06	7.24	5.78
63	11.11	10.03	8.00	6.40
64	12.29	11.12	8.88	7.08
65	13.62	12.34	9.88	7.90
66	15.08	13.69	10.96	8.75
67	16.70	15.18	12.12	9.67
68	18.49	16.80	13.38	10.66
69	20.39	18.55	14.71	11.65
70	22.45	20.45	16.15	12.76
71	24.70	22.51	17.75	13.99
72	27.16	24.77	19.49	15.34
73	29.84	27.25	21.42	16.81
74	32.70	29.88	23.46	18.44
75	35.77	32.70	25.70	20.21
76	39.04	35.74	28.07	22.04
77	42.48	38.99	30.62	24.07
78	46.13	42.47	33.35	26.21
79	49.97	46.14	36.25	28.49
80	53.99	50.04	39.31	30.89
81	58.24	54.17	42.55	33.43
82	62.66	58.46	45.95	36.10
83	67.27	63.01	49.51	38.90
84	72.11	67.75	53.24	41.82

TO OBTAIN QUARTERLY, SEMIANNUAL, AND ANNUAL PREMIUMS, MULTIPLY THE ABOVE QUOTED PREMIUMS BY 3, 6, AND 12, RESPECTIVELY. THE MONTHLY PREMIUMS FOR BANK SERVICE PLAN AND PAYROLL DEDUCTION ISSUES ARE THE PREMIUMS LISTED ABOVE.

R25388-44-2

Date: 01/25/2013

MUTUAL OF OMAHA INSURANCE COMPANY
SCHEDULE OF MONTHLY RATES FOR RIDER FORM 0DX6M

PER \$10 DAILY CONFINED CARE BENEFIT

BENEFIT -- 1 YEAR

IssueAge	ELIMINATION PERIODS			
	0 Day	20 Day	100 Day	365 Day
18-39	1.04	1.00	0.92	0.86
40	1.08	1.02	0.95	0.89
41	1.12	1.04	0.97	0.90
42	1.14	1.09	1.00	0.90
43	1.18	1.12	1.01	0.92
44	1.22	1.14	1.03	0.94
45	1.26	1.18	1.07	0.97
46	1.31	1.22	1.08	0.96
47	1.37	1.28	1.12	0.98
48	1.44	1.36	1.18	1.01
49	1.52	1.43	1.22	1.04
50	1.60	1.51	1.28	1.09
51	1.69	1.60	1.36	1.14
52	1.78	1.68	1.42	1.18
53	1.85	1.74	1.48	1.25
54	1.94	1.81	1.54	1.30
55	2.02	1.90	1.60	1.33
56	2.10	1.96	1.66	1.39
57	2.21	2.04	1.72	1.45
58	2.30	2.14	1.79	1.50
59	2.42	2.22	1.88	1.60
60	2.53	2.32	1.96	1.64
61	2.64	2.44	2.03	1.70
62	2.78	2.54	2.12	1.78
63	2.90	2.66	2.20	1.82
64	3.04	2.76	2.26	1.85
65	3.16	2.92	2.35	1.90
66	3.31	3.05	2.44	1.93
67	3.50	3.20	2.56	2.03
68	3.72	3.40	2.70	2.15
69	3.97	3.61	2.88	2.30
70	4.25	3.84	3.10	2.50
71	4.51	4.07	3.29	2.66
72	4.75	4.27	3.46	2.78
73	4.92	4.44	3.60	2.92
74	5.08	4.60	3.70	2.99
75	5.21	4.73	3.82	3.08
76	5.38	4.87	3.94	3.17
77	5.53	5.03	4.07	3.29
78	5.74	5.20	4.22	3.43
79	5.92	5.40	4.37	3.53
80	6.13	5.60	4.54	3.68
81	6.34	5.80	4.72	3.85
82	6.58	6.02	4.90	4.00
83	6.82	6.24	5.08	4.14
84	7.07	6.48	5.28	4.30

TO OBTAIN QUARTERLY, SEMIANNUAL, AND ANNUAL PREMIUMS, MULTIPLY THE ABOVE QUOTED PREMIUMS BY 3, 6, AND 12, RESPECTIVELY. THE MONTHLY PREMIUMS FOR BANK SERVICE PLAN AND PAYROLL DEDUCTION ISSUES ARE THE PREMIUMS LISTED ABOVE .

R25388-44-2

Date: 01/25/2013

MUTUAL OF OMAHA INSURANCE COMPANY
SCHEDULE OF MONTHLY RATES FOR RIDER FORM 0DX6M

PER \$10 DAILY CONFINED CARE BENEFIT

BENEFIT -- 2 YEARS

Issue Age	ELIMINATION PERIODS			
	0 Day	20 day	100 Day	365 Day
18-39	1.69	1.61	1.40	1.22
40	1.74	1.66	1.45	1.26
41	1.80	1.72	1.49	1.30
42	1.87	1.78	1.54	1.34
43	1.94	1.84	1.58	1.36
44	2.02	1.90	1.62	1.38
45	2.09	1.98	1.67	1.42
46	2.20	2.05	1.72	1.43
47	2.28	2.15	1.78	1.46
48	2.38	2.23	1.86	1.55
49	2.48	2.33	1.94	1.62
50	2.59	2.45	2.03	1.69
51	2.72	2.56	2.14	1.78
52	2.86	2.68	2.23	1.86
53	2.99	2.82	2.35	1.96
54	3.16	2.95	2.48	2.09
55	3.34	3.10	2.62	2.20
56	3.49	3.26	2.74	2.30
57	3.70	3.41	2.89	2.45
58	3.88	3.59	3.04	2.56
59	4.10	3.76	3.17	2.68
60	4.30	3.95	3.34	2.82
61	4.54	4.15	3.47	2.90
62	4.78	4.37	3.64	3.04
63	5.02	4.58	3.78	3.12
64	5.26	4.80	3.94	3.22
65	5.51	5.05	4.07	3.28
66	5.80	5.32	4.24	3.38
67	6.14	5.62	4.48	3.56
68	6.58	6.00	4.78	3.80
69	7.07	6.42	5.14	4.10
70	7.60	6.88	5.51	4.42
71	8.10	7.30	5.88	4.73
72	8.52	7.67	6.19	4.99
73	8.82	7.96	6.42	5.18
74	9.05	8.17	6.61	5.35
75	9.25	8.38	6.78	5.48
76	9.47	8.62	6.96	5.62
77	9.77	8.89	7.20	5.83
78	10.14	9.24	7.48	6.06
79	10.56	9.64	7.81	6.34
80	11.02	10.06	8.16	6.64
81	11.50	10.52	8.53	6.92
82	12.05	11.02	8.94	7.25
83	12.64	11.53	9.40	7.66
84	13.25	12.10	9.85	8.02

TO OBTAIN QUARTERLY, SEMIANNUAL, AND ANNUAL PREMIUMS, MULTIPLY THE ABOVE QUOTED PREMIUMS BY 3, 6, AND 12, RESPECTIVELY. THE MONTHLY PREMIUMS FOR BANK SERVICE PLAN AND PAYROLL DEDUCTION ISSUES ARE THE PREMIUMS LISTED ABOVE.

Date: 01/25/2013

MUTUAL OF OMAHA INSURANCE COMPANY
SCHEDULE OF MONTHLY RATES FOR RIDER FORM 0DX6M

PER \$10 DAILY CONFINED CARE BENEFIT

BENEFIT -- 3 YEARS

Issue Age	ELIMINATION PERIODS			
	0 Day	20 Day	100 Day	365 Day
18-39	2.44	2.21	1.84	1.54
40	2.51	2.29	1.90	1.57
41	2.58	2.38	1.97	1.64
42	2.68	2.45	2.03	1.68
43	2.75	2.53	2.09	1.73
44	2.84	2.62	2.14	1.73
45	2.94	2.68	2.20	1.80
46	3.04	2.77	2.27	1.86
47	3.14	2.88	2.34	1.90
48	3.28	2.99	2.42	1.96
49	3.40	3.11	2.51	2.02
50	3.55	3.25	2.62	2.11
51	3.70	3.38	2.74	2.21
52	3.88	3.54	2.86	2.29
53	4.02	3.70	2.98	2.39
54	4.20	3.83	3.10	2.51
55	4.39	4.00	3.24	2.62
56	4.60	4.18	3.40	2.77
57	4.80	4.37	3.55	2.89
58	5.03	4.60	3.72	3.01
59	5.27	4.82	3.90	3.16
60	5.54	5.08	4.08	3.28
61	5.80	5.34	4.27	3.42
62	6.11	5.62	4.49	3.60
63	6.41	5.88	4.72	3.79
64	6.76	6.16	4.96	4.01
65	7.10	6.43	5.21	4.22
66	7.48	6.76	5.50	4.46
67	7.90	7.14	5.77	4.67
68	8.41	7.61	6.10	4.90
69	8.98	8.15	6.44	5.09
70	9.58	8.74	6.82	5.32
71	10.18	9.30	7.18	5.54
72	10.70	9.79	7.54	5.80
73	11.16	10.21	7.86	6.05
74	11.56	10.60	8.17	6.30
75	11.96	10.96	8.48	6.58
76	12.37	11.32	8.80	6.84
77	12.85	11.74	9.16	7.15
78	13.39	12.19	9.54	7.46
79	13.96	12.67	9.94	7.80
80	14.57	13.18	10.37	8.16
81	15.22	13.72	10.84	8.56
82	15.89	14.28	11.28	8.92
83	16.61	14.87	11.77	9.31
84	17.35	15.47	12.26	9.71

TO OBTAIN QUARTERLY, SEMIANNUAL, AND ANNUAL PREMIUMS, MULTIPLY THE ABOVE QUOTED PREMIUMS BY 3, 6, AND 12, RESPECTIVELY. THE MONTHLY PREMIUMS FOR BANK SERVICE PLAN AND PAYROLL DEDUCTION ISSUES ARE THE PREMIUMS LISTED ABOVE.

R25388-44-2

Date: 01/25/2013

MUTUAL OF OMAHA INSURANCE COMPANY
SCHEDULE OF MONTHLY RATES FOR RIDER FORM 0DX6M

PER \$10 DAILY CONFINED CARE BENEFIT

BENEFIT -- 5 YEARS

Issue Age	ELIMINATION PERIODS			
	0 Day	20 Day	100 Day	365 Day
18-39	3.48	3.23	2.62	2.10
40	3.58	3.34	2.65	2.10
41	3.69	3.43	2.73	2.17
42	3.82	3.54	2.82	2.22
43	3.95	3.67	2.90	2.30
44	4.09	3.81	3.01	2.39
45	4.27	3.94	3.12	2.49
46	4.40	4.10	3.23	2.55
47	4.60	4.25	3.38	2.68
48	4.77	4.41	3.50	2.77
49	4.96	4.60	3.64	2.89
50	5.15	4.76	3.78	3.01
51	5.36	4.96	3.95	3.15
52	5.60	5.17	4.11	3.28
53	5.85	5.41	4.31	3.43
54	6.12	5.65	4.53	3.64
55	6.39	5.93	4.75	3.81
56	6.69	6.20	4.99	4.02
57	6.99	6.49	5.23	4.20
58	7.30	6.78	5.46	4.40
59	7.63	7.06	5.67	4.55
60	7.96	7.38	5.90	4.71
61	8.33	7.72	6.14	4.88
62	8.73	8.10	6.41	5.08
63	9.17	8.46	6.74	5.39
64	9.64	8.87	7.11	5.68
65	10.15	9.31	7.46	5.98
66	10.68	9.76	7.88	6.36
67	11.29	10.27	8.29	6.69
68	11.94	10.87	8.76	7.05
69	12.67	11.53	9.28	7.50
70	13.44	12.20	9.81	7.90
71	14.17	12.86	10.32	8.27
72	14.85	13.46	10.80	8.65
73	15.43	13.98	11.20	8.97
74	15.93	14.47	11.55	9.22
75	16.42	14.92	11.89	9.48
76	16.94	15.39	12.22	9.71
77	17.53	15.95	12.65	10.04
78	18.17	16.54	13.11	10.41
79	18.87	17.16	13.62	10.80
80	19.60	17.84	14.17	11.23
81	20.37	18.56	14.72	11.68
82	21.19	19.29	15.31	12.16
83	22.04	20.09	15.95	12.65
84	22.95	20.90	16.62	13.22

TO OBTAIN QUARTERLY, SEMIANNUAL, AND ANNUAL PREMIUMS, MULTIPLY THE ABOVE QUOTED PREMIUMS BY 3, 6, AND 12, RESPECTIVELY. THE MONTHLY PREMIUMS FOR BANK SERVICE PLAN AND PAYROLL DEDUCTION ISSUES ARE THE PREMIUMS LISTED ABOVE.

R25388-44-2

Date: 01/25/2013

MUTUAL OF OMAHA INSURANCE COMPANY
SCHEDULE DF MONTHLY RATES FOR RIDER FORM 0DX6M

PER \$10 DAILY CONFINED CARE BENEFIT

Issue Age	BENEFITS -- LIFETIME			
	ELIMINATION PERIODS			
	0 Day	20 Day	100 Day	365 Day
18-39	5.63	5.34	4.16	3.24
40	5.76	5.47	4.26	3.32
41	5.93	5.63	4.42	3.48
42	6.13	5.82	4.58	3.62
43	6.36	6.07	4.80	3.79
44	6.66	6.38	5.04	4.00
45	6.97	6.71	5.29	4.18
46	7.30	7.01	5.56	4.42
47	7.63	7.30	5.81	4.61
48	7.94	7.60	6.04	4.80
49	8.30	7.85	6.24	4.96
50	8.63	8.11	6.48	5.16
51	8.95	8.35	6.67	5.34
52	9.25	8.57	6.88	5.52
53	9.46	8.72	7.02	5.66
54	9.62	8.86	7.16	5.78
55	9.73	8.95	7.28	5.92
56	9.94	9.11	7.43	6.05
57	10.19	9.32	7.61	6.20
58	10.51	9.58	7.81	6.36
59	10.88	9.89	8.04	6.52
60	11.32	10.26	8.27	6.66
61	11.80	10.69	8.54	6.83
62	12.32	11.12	8.89	7.12
63	12.90	11.69	9.32	7.44
64	13.54	12.26	9.79	7.85
65	14.24	12.91	10.33	8.26
66	14.99	13.61	10.88	8.70
67	15.79	14.34	11.45	9.14
68	16.63	15.13	12.05	9.56
69	17.58	16.01	12.68	10.07
70	18.53	16.90	13.37	10.57
71	19.46	17.75	13.98	11.00
72	20.29	18.53	14.56	11.44
73	20.96	19.15	15.06	11.82
74	21.56	19.70	15.49	12.16
75	22.09	20.23	15.88	12.44
76	22.67	20.76	16.33	12.84
77	23.35	21.43	16.86	13.26
78	24.14	22.24	17.47	13.73
79	25.01	23.08	18.14	14.24
80	25.93	24.01	18.86	14.82
81	26.88	25.00	19.62	15.43
82	27.89	26.04	20.45	16.06
83	28.98	27.18	21.32	16.74
84	30.12	28.36	22.26	17.47

TO OBTAIN QUARTERLY, SEMIANNUAL, AND ANNUAL PREMIUMS, MULTIPLY THE ABOVE QUOTED PREMIUMS BY 3, 6, AND 12, RESPECTIVELY. THE MONTHLY PREMIUMS FOR BANK SERVICE PLAN AND PAYROLL DEDUCTION ISSUES ARE THE PREMIUMS LISTED ABOVE.

R25388-44-2

MUTUAL OF OMAHA INSURANCE COMPANY**INDIVIDUAL HOME HEALTH CARE POLICY FORM HCA - Series 19629 and 20249
ANNUAL PREMIUM RATES - Effective May 1, 2014**

Per \$10 Daily Benefit

Per \$1 Gross Premium

Age	Home Health Care Policy Form HCA - Series 19629 and 20249		Confined Care Rider Form 0GH1M				5% Compound Inflation Rider Form 0GH3M	Shortened Benefit Period Rider Form 0GH5M
	20 Day Elim	0 Day Elim	20 Day Elim	90 Day Elim	180 Day Elim	365 Day Elim		
18-50	29.52	14.64	13.92	10.92	9.72	7.68	1.37	0.19
51	31.56	15.60	14.76	11.64	10.32	8.28	1.32	0.18
52	33.72	16.56	15.72	12.48	11.04	8.88	1.27	0.17
53	36.24	17.76	16.92	13.44	11.76	9.36	1.23	0.16
54	39.00	19.08	18.12	14.52	12.72	10.20	1.17	0.16
55	42.00	20.64	19.56	15.72	13.80	11.04	1.12	0.16
56	45.00	22.44	21.24	17.04	15.00	12.00	1.08	0.16
57	48.36	24.36	23.16	18.60	16.44	13.08	1.03	0.15
58	51.36	26.64	25.44	20.28	17.88	14.28	0.99	0.15
59	54.72	29.16	27.84	22.08	19.56	15.60	0.96	0.15
60	58.44	32.04	30.60	24.24	21.48	17.16	0.92	0.14
61	62.88	35.40	33.72	26.76	23.64	18.96	0.90	0.14
62	67.56	39.00	37.08	29.40	25.92	20.88	0.86	0.14
63	73.80	43.20	40.92	32.76	28.92	23.28	0.82	0.14
64	80.64	48.12	45.24	36.36	32.16	25.92	0.78	0.13
65	88.32	53.52	50.16	40.44	35.76	28.80	0.74	0.13
66	96.96	59.64	55.80	45.00	39.84	32.04	0.69	0.12
67	106.56	66.60	62.16	50.04	44.40	35.76	0.65	0.12
68	116.28	74.40	69.60	55.20	48.84	39.36	0.62	0.12
69	127.20	83.04	77.88	61.08	54.00	43.56	0.59	0.11
70	139.44	92.64	87.24	67.68	59.88	48.24	0.55	0.11
71	152.88	103.32	97.56	75.12	66.36	53.52	0.52	0.10
72	167.64	114.96	108.96	83.28	73.80	59.52	0.49	0.10
73	184.44	127.44	120.84	92.52	81.96	66.12	0.46	0.10
74	202.56	140.88	133.68	102.72	91.08	73.44	0.43	0.10
75	222.48	155.16	147.12	113.52	100.56	81.24	0.40	0.09
76	243.60	170.40	161.40	125.04	110.76	89.40	0.37	0.09
77	266.16	186.48	176.28	137.16	121.56	98.16	0.34	0.09
78	290.16	203.52	191.76	149.76	132.72	107.16	0.32	0.09
79	315.48	221.28	207.96	162.96	144.36	116.52	0.30	0.08
80	342.24	240.00	224.64	176.52	156.48	126.36	0.28	0.08
81	370.32	259.44	241.92	190.44	168.72	136.20	0.26	0.07
82	399.84	279.84	259.68	204.72	181.44	146.40	0.25	0.07
83	430.56	300.96	277.92	219.24	194.28	156.72	0.23	0.06
84	462.72	322.80	296.52	234.00	207.36	167.28	0.22	0.06
85	483.96	339.60	312.00	245.88	217.92	175.92	0.20	0.05
86	504.84	357.24	328.20	258.36	229.32	185.16	0.20	0.05
87	525.12	376.56	345.72	271.92	241.92	195.36	0.18	0.04
88	544.80	397.32	364.80	286.56	255.48	206.52	0.17	0.04
89	564.00	419.28	384.96	302.04	270.00	218.28	0.16	0.04
90	594.84	442.20	405.96	318.24	284.40	229.92	0.15	0.03
91	627.36	466.32	427.92	335.16	299.52	242.16	0.14	0.03
92	661.20	491.52	450.96	352.80	315.24	254.88	0.13	0.03
93	696.48	517.80	474.96	371.28	331.56	267.96	0.13	0.02
94	733.20	545.04	499.92	390.36	348.60	281.88	0.12	0.02
95	771.24	573.36	525.96	410.28	366.48	296.28	0.11	0.02
96	811.08	602.88	552.84	430.92	384.84	311.04	0.11	0.02
97	852.12	633.36	580.80	452.40	403.92	326.40	0.10	0.02
98	894.60	665.04	609.72	474.48	423.60	342.24	0.09	0.02
99+	938.64	697.68	639.60	497.40	443.88	358.80	0.09	0.01

Rates for ages 84+ are available only for the Guarantee Purchase Benefit Option.

\$20 Policy Fee payable first year only.

If Tax Qualified Amendment Rider Form 0GH6M elected, premium will be reduced 15%.

If the policy is issued to an individual and spouse that: (a) reside together and (b) are both covered under Form HCA or NHA, then Spouse Premium Reduction Rider 0GH9M will be attached and the premium will be reduced 10%.

To calculate premiums for a specific benefit period, apply the appropriate factors to the above premiums.

Benefit Period	Factor	2013 Increase Factor	2014 Increase Factor
1 year	0.55	1.200	1.000
2 year	0.80	1.200	1.000
3 year	1.00	1.200	1.000
5 year	1.25	1.200	1.100
Lifetime	1.45	1.300	1.200

To calculate premiums for a specific mode, apply the appropriate factor to the above premiums.

Modal Loads	Factor
Annual	1.000
Semi-Annual	0.520
Quarterly	0.260
Monthly/BSP	0.087

Virginia Forms and Riders**Approved on 06/13/1997:**

Form	Virginia Approval Date
LT50-Series 19241	06/13/1997
ODX5M	06/13/1997
NH50-Series 19242	06/13/1997
ODX6M	06/13/1997

Approved on 02/05/1998:

Form	Virginia Approval Date
LT50- Series 19409	02/05/1998
NH50- Series 19410	02/05/1998

Approved on 02/26/1999:

Form	Virginia Approval Date
HCA-19629	02/26/1999
LTA-19631	02/26/1999
NHA-19630	02/26/1999
0GH1M-44	02/26/1999
0GH3M	02/26/1999
0GH4M	02/26/1999
0GH5M-44	02/26/1999
0GH6M-44 Rev	02/26/1999
0GH7M-44	02/26/1999
0GH8M-44	02/26/1999
0GH9M	02/26/1999

Approved on 10/01/2001:

Form	Virginia Approval Date
HCA-20249	10/01/2001
LTA-20251	10/01/2001
NHA-20250	10/01/2001
0GH1M-44 Rev	10/01/2001
0GH7M-44 Rev	10/01/2001
0GH8M-44 Rev	10/01/2001



MUTUAL OF OMAHA INSURANCE COMPANY
NAIC #: 71412

INS DEPT SERV 05 OCT '01

September 6, 2001

Virginia Bureau of Insurance
State Corporation Commission
Policy and Other Form Filings
P.O. Box 1157
Richmond, VA 23218

ATTN: Mary Ann Mason
Life & Health Division

APPROVED
Commonwealth of Virginia
State Corporation Commission
Bureau of Insurance
DATE 10/1/01
BY *ma*



SHOW AS APPROVED 10-1-01
Rm 5
10 8 01

RE: Long term Care Forms: HCA-20249, et al

VA Submission No. 007 0000017167

Dear Ms. Mason,

Thank you for your August 24, 2000 letter regarding the captioned filing of long term care forms.

Per your letter, in each policy there is now a section entitled "Refund of Premiums Upon Termination or Cancellation" that now complies with the requirements of Section 38.2-5202.1.

Also in policy HCA-20249 and in rider forms 0GH7M-44 Rev and 0GH8M-44 Rev, the definition of "Home Health Care" has been amended, as suggested in your letter, to show that items (a), (b) & (c) are "included" in the definition of Home Health Care.

Copies of the aforementioned amended forms are enclosed.

Thank you again for your assistance. If you have any further questions please let me know.

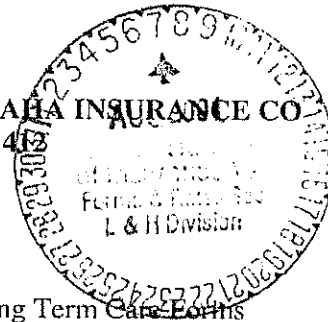
Sincerely,

Richard M. Owens
Insurance Department Services

Voice: (402) 351-5964
Fax: (402) 351-5298
E-Mail: mike.owens@mutualofomaha.com



MUTUAL OF OMAHA INSURANCE CO.
NAIC#: 71413



July 30, 2001

Virginia Bureau of Insurance
State Corporation Commission
Policy and Other Form Filings
P.O. Box 1157
Richmond, VA 23218

Individual Long Term Care Forms
HCA-20249, et al.

Submission No.: 007 0000017167

ATTN: Mary Ann Mason
Life & Health Division

This letter is regarding your July 9, 2001 response to my June 21, 2001 filing of the individual long term care forms pursuant to the submission number captioned above. Thank you for your prompt reply.

For compliance with the requirements of Section 38.2-5202.1, I have added a new section in all 3 policy forms entitled "Cancellation By The Insured" (directly following the paragraph, "Refund of Premiums Paid Beyond Your Death").

In all 3 policy forms, the definition of "eating" has been changed to conform with 14 VAC 5-200-50.

We believe the definition of home health care conforms with 14 VAC 5-200-90 A. We do not require the insured would need coverage in a skilled nursing facility if home health care were not provided. We do not require the insured receive nursing home services before home health care benefits are provided. Services are not limited to RNs or LPNs. Note that the limitation includes coverage by the listed licensed, registered caregivers AND other trained persons not living in the household. No benefits for personal care services by a home health aide are excluded. We do not require any higher levels of certification or licensure for home health caregivers. We do not require the insured have an acute condition before coverage is provided nor benefits be provided by a Medicare-certified entity. We do not exclude coverage for adult day care.

In all 3 policy forms, the "Claim Forms" section has been amended to indicate that claim forms will be "provided".

In all 3 policy forms, the Section previously entitled "Time Limit On Certain Defenses" has been changed to "Incontestability".

Those terms in the riders that are capitalized, but not specifically defined in that rider, are defined in the policy to which the rider would be added.

Personal Care Worksheet form M20902-44, for compliance with 14 VAC 5-200-175 C 2, was submitted as a separate filing and was approved by your Department on January 25, 2001.

As an informational submission, I am enclosing copies of Application form MA5785-44 Rev 6-99 and the rates and Actuarial Memorandum, all of which were approved by your Department on February 26, 1999.

Finally, my initial submission included Confined Care rider 0JX2M and Home Health Care riders 0JX3M and 0JX4M. For internal administrative purposes, I have been asked to change those form numbers to 0GH1M-44 Rev., 0GH7M-44 Rev., and 0GH8M-44 Rev., respectively. The forms are identical to those in the initial submission. Only the form numbers have changed.

<u>Initial Submission</u>	<u>Changed To</u>	<u>As A Replacement to Previous Approved Rider</u>
0JX2M	0GH1M-44 Rev	0GH1M-44
0JX3M	0GH7M-44 Rev	0GH7M-44
0JX4M	0GH8M-44 Rev	0GH8M-44

Copies of all the amended or renumbered forms are enclosed. If you have any additional questions, please let me know. Thank you for your continued review.

Sincerely,



Richard M. Owens
Insurance Department Services

Voice: (402) 351-5964
Fax: (402) 351-5298
E-Mail: mike.owens@mutualofomaha.com

**Mutual of Omaha
Companies**

*MA '01
Forms + product memo
Need to be in CIMS
(20000774R)
Does this
need the
OHA3M
rider?*

**MUTUAL OF OMAHA
INSURANCE COMPANY
NAIC #: 71412**

June 21, 2001

Virginia Bureau of Insurance
State Corporation Commission
Policy and Other Form Filings
P.O. Box 1157
Richmond, VA 23218

Individual Long Term Care Forms

Policies: HCA-20249, NHA-20250, LTA-20251

Riders: OJX2M, OJX3M, OJX4M

Outlines: M21016 12-01, M21017 12-01,
M21018 12-01

YBN

Enclosed for filing with your Department is a copy of the above captioned forms that are both new and replacement forms as indicated below. All the forms being replaced were approved by your Department on February 26, 1999.

<u>New Form</u>	<u>Description</u>	<u>Replaces Form</u>
HCA-20249	Home Health Care policy	HCA-19629
NHA-20250	Confined Care policy	NHA-19630
LTA-20251 47.7	Confined/Non-Confined policy	LTA-19631 - 47.7
OJX2M 48.1	Confined Care rider	OGH1M-44
OJX3M 49.1	Home Health Care rider	OGH7M-44
OJX4M 49.3	Home Health Care rider	OGH8M-44 ✓
M21016 12-01	Outline of Coverage	M21016
M21017 12-01	Outline of Coverage	M20117
M21018 12-01	Outline of Coverage	M21018

These forms are submitted for compliance with the new long-term care regulations under Chapter 200 of Title 14 of the Virginia Code, "Rules Governing Long Term Care", for those sections that become effective December 1, 2001.

The new policies are identical to the replaced policies except the title of the "benefits" paragraph has been changed to "Eligibility for the Payment of Benefits". In policy forms NHA-20250 and LTA-20251, we have added "Dressing" as a sixth ADL and changed the benefit trigger from 1 of 5 ADLs to 2 of 6 ADLs. The same changes have been made to the captioned riders and the Outlines of Coverage. To assist your reviewing efforts, the only changes made to the previously approved policies and riders are shown in red.

These form changes did not necessitate any changes to the rates approved by your Department on January 7, 1999.

WAKELY AND ASSOCIATES, INC.

ACTUARIES • CONSULTANTS • ADMINISTRATORS

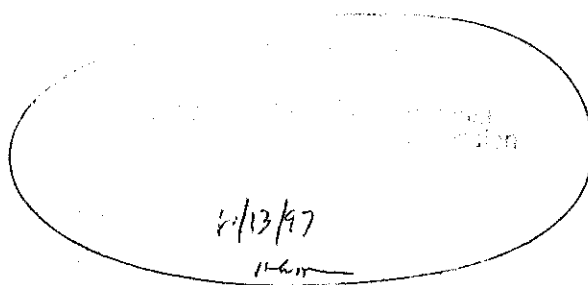
VIA OVERNIGHT MAIL

J8 AUG 15 2003

June 2, 1997

Commonwealth of Virginia
Bureau of Insurance
1300 East Main Street
Richmond, Virginia 23209

VA



ATTN: Mary Ann Mason, FLMI, AIE
Insurance Market Examiner
Forms and Rates Section
Life and Health Division

RE: **SUBMISSION No. 007 0000007382**

NAIC NUMBER: 261-71412 / Mutual of Omaha Insurance Company

RESUBMISSION - NEW POLICY FORM AND RIDERS

Long-Term Care Insurance Policy - Form Number LT50 - Series 19241

Outline of Coverage - Form Number M20191

Application - Form Number MA5759 (REV)-44

Automatic Inflation Protection Rider - Form Number ODX5M

Shortened Benefit Period Non-Forfeiture Rider - Form Number ODX7M

Premium Adjustment Rider - Form Number ODX2M

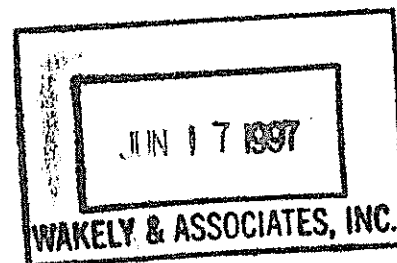
Spouse Premium Reduction Rider - Form Number ODX8M

Waiver Form - Form Number NOT-WVR-44

Replacement Form - Form Number M18301-44

Rate Schedule R25387-00-0-F

Dear Ms. Mason:



*NOTED Informationally filed
in Virginia on February 3, 1998.*

This is to follow up the request for the final prints of the above-captioned forms.

RC 03-10-98

Mutual of Omaha has advised Wakely and Associates that all forms are printed on white paper, therefore, we are submitting two (2) final prints of all documents. Also included you will find two (2) copies of the actuarial memorandum.

I trust this will enable the Bureau to approve this filing however, should you have any additional questions or concerns, please do not hesitate to contact me. It will be my pleasure to be of service.

Wakely and Associates appreciates the Department's time and consideration in the review of this filing for Mutual of Omaha Insurance Company. Included for your convenience you will find a postage paid return envelope.

Sincerely,

Courtney P. Crocker (Mr.) CLA, HIA
Compliance Analyst

*Noted Approved
in VA 6-13-97*

Enclosures

KV 6-23-97

WAKELY AND ASSOCIATES, INC.

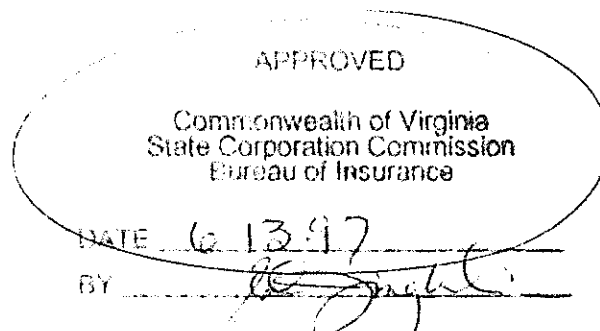
ACTUARIES • CONSULTANTS • ADMINISTRATORS

VIA OVERNIGHT MAIL

June 2, 1997

Commonwealth of Virginia
Bureau of Insurance
1300 East Main Street
Richmond, Virginia 23209

ATTN: Ed Jingluski, Insurance Market Examiner
Forms and Rates Section
Life and Health Division

RE: **SUBMISSION No. 007 0000007383**

NAIC NUMBER: 261-71412 / Mutual of Omaha Insurance Company

RESUBMISSION - NEW POLICY FORM AND RIDERS

Confined Care Facility Insurance Policy - Form Number NH50 - Series 19242

Outline of Coverage - Form Number M20192

Application - Form Number MA5759 (REV)-44

Automatic Inflation Protection Rider - Form Number ODX6M

Shortened Benefit Period Non-Forfeiture Rider - Form Number ODY4M

Premium Adjustment Rider - Form Number ODY2M

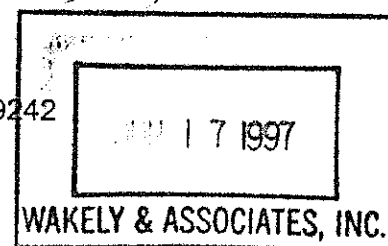
Spouse Premium Reduction Rider - Form Number ODX8M

Waiver Form - Form Number NOT-WVR-44

Replacement Form - Form Number M18301-44

Rate Schedule R25388-00-0-F

Dear Mr. Jingluski:



*NOTED Informationally filed
in Virginia on February 3, 1998
DC03-10-98*

This is to follow up the request for final prints of the above-captioned forms.

Mutual of Omaha has advised Wakely and Associates that all forms are printed on white paper therefore, we are submitting two (2) final prints of all documents. Also included you will find two (2) copies of the actuarial memorandum.

I trust this will enable the Bureau to approve this filing however, should you have any additional questions or concerns, please do not hesitate to contact me. It will be my pleasure to be of service.

Wakely and Associates appreciates the Department's time and consideration in the review of this filing for Mutual of Omaha Insurance Company. Included for your convenience you will find a postage paid return envelope.

Sincerely,

Courtney P. Crocker

Courtney P. Crocker (Mr.) CLA, HIA
Compliance Analyst

Enclosures

*Noted approved
in VA 6-13-97*

KV 6-23-97



**Mutual of Omaha
Companies**

JAN 16 1998

Mary Ann Mason
Bureau of Insurance
State Corporation Commission
P.O. Box 1157
Richmond, Virginia 23218

FEB 11 1998

APPROVED

Commonwealth of Virginia
State Corporation Commission
Bureau of Insurance

DATE

2/5/98

BY

U/P

NAIC # 261-71412

Individual Health and Accident Filing
Long Term Care Insurance
Policy Form LT50, Series 19409
Policy Form NH50, Series 19410
Outline of Coverage M20631
Outline of Coverage M20632
Rider 0FE7M
Rider 0GF5M

The above captioned forms are being submitted for your review and approval. They are new and submitted in final print format.

The LT50 and NH50 policies have been prepared to provide long-term care insurance coverage. Policy LT50, Series 19409 will replace LT50, Series 19241 which was approved by your Department on June 13, 1997. Policy NH50, Series 19410 will replace NH50, Series 19242 which was approved by your Department on June 13, 1997. The new policies are identical to the forms which they replace, except they contain a revised definition of the term "Elimination Period". The modified definition replaces the last sentence which read, "Services covered by Medicare cannot be used to satisfy the Elimination Period" with "Days which Medicare reimburses you for services that would have also been covered by this Policy will count toward satisfying the Elimination Period". No other changes have been made to these policies.

This same revision has been made to the corresponding Outlines of Coverage. The LT50 Outline of Coverage Form M20631 replaces Form M20191 approved by your Department on June 13, 1997. The NH50 Outline of Coverage Form M20632 replaces Form M20192 approved by your Department on June 13, 1997.

Rider 0GF5M has been created to amend the definition of "Elimination Period" for in force LT50 policies already issued in your state. Rider 0FE7M has been created to amend the definition of "Elimination Period" for in force NH50 policies already issued in your state.

This change does not affect the premium rates. All other forms approved in conjunction with the original policies and Outlines of Coverage remain unchanged, and their usage will be extended to the new revised forms.

Your review and approval will be appreciated.

Sincerely,

Keith R. Adams

Keith R. Adams, FLMI, ACS
Compliance Specialist
Insurance Department Services
(402)351-2654
Fax: (402) 351-5298
E-Mail: keith.adams@mutualofomaha.com



**Mutual of Omaha
Companies**

MAR 04 1999

January 12, 1999

2/26/99

Alfred W. Gross
Commissioner of Insurance
Virginia Department of Insurance
State Corporation Commission
P. O. Box 1157
Richmond, VA 23218

Attention: Mary Ann Mason, FLMI, AIE
Life & Health Division

Mutual of Omaha Insurance Company
NAIC # 261-71412
Individual Health & Accident
Non-Tax Qualified Long-Term Care Insurance
Policy Forms HCA-19629, NHA-19630,
and LTA-19631
Rider Forms 0GH1M-44, 0GH3M, 0GH4M,
0GH5M-44, 0GH6M-44 Rev. (Replaces
0GH6M-44), 0GH7M-44, 0GH8M-44 & 0GH9M
Application Form MA5785-44
Actuarial Memorandums
Rate Schedules
Your Submission No. 007 00000 11242

Dear Ms. Mason:

Thank you for your continued review of the above-captioned long-term care insurance forms, and for the clarification you provided in our January 11 telephone discussion. At this time, please allow me to address the remaining concerns noted in your December 18 written correspondence.

1. For compliance with Section 38.2-606 8 of the Code of Virginia, the Part F - Authorization to Release Information section of Application MA5785-44 has been revised to show the individual or a person authorized on his or her behalf is entitled to receive a copy of the authorization. Also, the version of Application MA5785-44 previously sent included an authorization reference to release of information about "my children" which has now been deleted.
2. As required by 14 VAC 5-100-50 3, the attached revised version of Application MA5785-44 is completed in "John Doe" fashion and submitted in final print format. Rather than having a mid-page perforation, the application is formatted so that the entire page 6 will be detached and left with the applicant at the time the application is completed. As explained in our telephone call, the policies and riders previously enclosed with our December 2 letter were all provided in final print format at that time.
3. A summary of the benefits for Policy Forms HCA, NHA and LTA is shown in the attached Exhibit 1. An explanation of the pricing for a single versus married person is shown in Exhibit 2.
4. Lastly, it has come to our attention that an addition to the Tax Qualified Amendment Rider is necessary for compliance with the Internal Revenue Code. We have added item # 5 - Refund of Premium, which states that all refunds of premiums are to be applied as a reduction in future premiums, except in the event of death or surrender or cancellation of the contract. No other changes have been made to this rider, except for a change in form number from 0GH6M-44 to 0GH6M-44 Rev. Please replace the previously sent Form 0GH6M-44 with the attached Rider 0GH6M-44 Rev., which is provided in final print format.

*Noted Approved in #2 V.
on 2-26-99*

Mutual of Omaha Insurance Company • MUTUAL OF OMAHA PLAZA • OMAHA, NE 68175 • 402-342-7600

KV 3-5-99

APPROVAL FILE

We hope the above handling meets with your acceptance. Your further review and approval of this submission will be most appreciated. If I may be of additional assistance, please feel free to contact me.

Sincerely,

A handwritten signature in cursive script that reads "Kurt Vangreen". The signature is written in black ink and is positioned above the printed name.

Kurt Vangreen

Senior Policy Drafting & Compliance Specialist

Policy Approval

Phone: (402) 351-8473 & Fax: (402) 351-5298



<Month, Year>

Policyholder Name

Address

City, State, ZIP

Dear (Name of Insured):

Thank you for choosing Mutual of Omaha Insurance Company as your long-term care insurance provider. Your long-term care insurance policy from Mutual of Omaha Insurance Company continues to provide valuable coverage that may help you pay for long-term care services. Please keep in mind that your policy is guaranteed renewable for life. Your policy will be kept in force as long as you pay the required premiums. There is a need to increase premiums on certain policy forms. Rates are being raised on all policy forms like yours to pay for anticipated claims that are higher than expected. This is due in part to individuals living longer and keeping their policies longer, which has resulted in more claims being filed than we anticipated when this policy form was originally priced. As a result, premiums need to be adjusted to ensure there is adequate funding to pay current and anticipated future claims. This premium increase is designed to offset some of these anticipated costs and in no way reflects on the integrity of your policy, nor is it based on your individual claims history, age, health status, or any other personal factor. Please note that premium rates may increase again in the future. The following represents the premium change for your coverage.

The Virginia Bureau of Insurance has approved an increase of 49.5% for policyholders with the lifetime benefit period, which will be implemented over a two-year period. The following represents the 2017 premium change of 30% for your coverage.

COVERAGE IDENTIFICATION	CURRENT «Mode» PREMIUM	NEW «Mode» PREMIUM	(INCREASE or DECREASE) AMOUNT	EFFECTIVE DATE
«CovID»	\$«CurrPrem»	\$«NewPrem»	\$«Difference»	«EffDate»

Your policy currently has a lifetime benefit period. Be aware that if you elect to keep the lifetime benefit, your premiums will increase to \$x,xxx.xx on xx/xx/2018, which reflects an additional increase in premium of 15%.

Please keep this notification of the change in premium for your Policy with your other important insurance documents. Send no money now as a new premium notice will be sent to you prior to the effective date shown above. If you pay premium through electronic funds transfer or payroll deduction, the organization that processes your payment will be notified of the new premium amount. If you have paid premium beyond the effective date listed above you will be billed for any additional premium due.

We know an increase in premium is never welcomed news. You have the right to revise your current benefit structure in an effort to lessen the impact of the requested rate increase. Adjusting the current benefits of your policy, by reducing the benefit period, increasing the elimination period, or decreasing the maximum daily benefit amount, can help keep your premium similar to what you currently pay. The enclosed Policy Adjustment Offer provides the details. To accept this offer, simply sign the form and return it to us in the enclosed envelope. If you would like to explore these options in greater detail, please contact:

Customer Contact Center
1-877-845-0872

(Agent Name)
(Agent Phone#)

Please note that not all options available to reduce your premium are of equal value.

As a reminder, your policy is guaranteed renewable for life. This means you can continue your policy for as long as you live or until you have exhausted your policy benefits. Subject to the terms of your policy, we cannot cancel your policy as long as you pay the required premium when it is due. However, the premium for your policy can change again in the future. We will not increase premium due to a change in your age or health or your use of the long-term coverage. However, we can change premiums if we make the same change for all persons of the same class, but never more than once per year. Should there be future rate increases, options similar to those being offered now will be available in the future. These changes in benefits may be done at any time upon your request, not just at the time of a rate increase.

This rate increase request was reviewed by the commission and was found to be compliant with applicable Virginia laws and regulations addressing long-term care insurance. All premium rate filings are available for public inspection and may be accessed online through the Virginia Bureau of Insurance's webpage at www.scc.virginia.gov/BOI.

We hope you'll take a moment to consider the reason you purchased a long-term care insurance policy from Mutual of Omaha Insurance Company and why it's more important than ever to have this valuable protection. With our history of financial strength and our commitment to serving our customers, you can be confident we'll be there when you need us, just as we have for over a century.

Sincerely,

Signature Block

IMPORTANT INFORMATION ABOUT CONTINGENT NON-FORFEITURE BENEFIT

If you choose to cancel your long-term care policy, the non-forfeiture benefit provides you with a paid-up policy in lieu of your current policy. Your policy will include a **reduced Maximum Benefit Period** equal to the greater of:

- The sum of all premiums you have paid divided by the daily benefit amount of the policy in effect on the current paid-to-date of the policy, or
- For a period 30 days

In no event will the Maximum Benefit Period be less than 30 days or exceed the amount that would have been paid had premiums continued to be paid.

The current daily benefit amount of the policy, as it exists today, will be the daily benefit amount payable while you are on non-forfeiture status. No additional inflation increases will be applied once the non-forfeiture benefit is elected. Please note this benefit is available to you at no cost.

You have 120 days from the effective date of the rate increase to exercise this option and your policy must be paid through the rate increase effective date. If you are interested in exercising this option, please contact your agent or the Customer Care Center at the number previously provided.



MUTUAL of OMAHA INSURANCE COMPANY
3300 Mutual of Omaha Plaza
Omaha, NE 68175
mutualofomaha.com

September 6, 2016

NAME
ADDRESS
CITY STATE ZIP

Coverage ID: 123456-78

Dear Name:

Thank you for purchasing your Long Term Care coverage with Mutual of Omaha.

This plan was designed to provide you and your family with peace of mind and financial protection by easing the burden of long term care expenses. Even though your coverage went out of force on DATE, it continues to provide you with protection through the Contingent Non-Forfeiture Rider, 0HA3M-44.

This provides you with financial protection after your coverage has gone out of force, unless the maximum benefits have been paid. Based on the total premium paid while your coverage was in force, the maximum benefit remaining is XX days for Confined Care and XX days for Home Care. This represents the total benefit available to you should you ever become eligible for the benefits described in this contract. Please place this letter with your Mutual of Omaha papers for future reference.

Should you have need for the benefits provided by this coverage, please call our Claims Department at 1-800-775-1000.

Sincerely,

Customer Service Operation

MUTUAL OF OMAHA INSURANCE COMPANY

POLICY ADJUSTMENT OFFER

Benefit Period Change Option

In an effort to help keep your premium similar to what you currently pay, you have the option to adjust your policy's benefit period. The benefit period is the length of time the policy is intended to pay benefits. Listed below are the details of your policy reflecting the current rate adjustment (CURRENT COVERAGE) and the option to decrease your benefit period (ALTERNATE OPTION).

INSTRUCTIONS:

- If you wish to exercise the Adjustment Option, which **DECREASES** the **Benefit Period** of your policy, please return this form in the enclosed envelope within 60 days or call us at 1-877-845-0872
- If you wish to keep your policy exactly as it is now at the **NEW <<MODE>>** premium listed below, You **DO NOT** need to send this form back to us.

REQUEST FOR CHANGE IN BENEFIT PERIOD
(Keep this with your policy)

Coverage ID: XXXXXX-XX

Effective Date: XX/XX/XXXX

	NEW PREMIUM	ADJUSTMENT OPTION
Benefit Period	XXXXX	XXXXX
NewPremium <<MODE>>	\$250.39	\$200.39
Coverage Form	XXXXX	XXXXX

I request that my **Benefit Period** be decreased and my premium adjusted as reflected in the Adjustment Option above. I acknowledge that I will not be able to increase my Benefit Period on this coverage at any time in the future. I understand my rider benefit period must be less than or equal to my policy

Signature
<<NAME>>

Date

Form LTC-BP-VA



REQUEST FOR CHANGE IN BENEFIT PERIOD
(Return this portion to us)

Coverage ID: XXXXXX-XX

Effective Date: XX/XX/XXXX

	NEW PREMIUM	ADJUSTMENT OPTION
Benefit Period	XXXXX	XXXXX
NewPremium <<MODE>>	\$250.39	\$200.39
Coverage Form	XXXXX	XXXXX

I request that my **Benefit Period** be decreased and my premium adjusted as reflected in the Adjustment Option above. I acknowledge that I will not be able to increase my Benefit Period on this coverage at any time in the future. I understand my rider benefit period must be less than or equal to my policy

Signature
<<NAME>>

Date

Form LTC-BP-VA

MUTUAL OF OMAHA INSURANCE COMPANY

POLICY ADJUSTMENT OFFER

Elimination Period Change Option

In an effort to help keep your premium similar to what you currently pay, you have the option to adjust your policy's elimination period. The elimination period is the waiting period before your policy begins paying benefits. Listed below are the details of your policy reflecting the current rate adjustment (CURRENT COVERAGE) and the option to increase your elimination period (ALTERNATE OPTION).

INSTRUCTIONS:

- If you wish to exercise the Adjustment Option, which **INCREASES** the **Elimination Period** of your policy, please return this form in the enclosed envelope within 60 days or call us at 1-877-845-0872
- If you wish to keep your policy exactly as it is now at the **NEW** <<MODE>> premium listed below, You **DO NOT** need to send this form back to us.

REQUEST FOR CHANGE IN ELIMINATION PERIOD

(Keep this with your policy)

Coverage ID: XXXXXX-XX

Effective Date: XX/XX/XXXX

	NEW PREMIUM	ADJUSTMENT OPTION
Elimination Period	XXXXX	XXXXX
NewPremium <<MODE>>	\$250.39	\$200.39
Coverage Form	XXXXX	XXXXX

I request that my **Elimination Period** be increased and my premium adjusted as reflected in the Adjustment Option above. I acknowledge that I will not be able to decrease my Elimination Period on this coverage at any time in the future.

Signature
<<NAME>>

Date

Form LTC-EP-VA



REQUEST FOR CHANGE IN ELIMINATION PERIOD

(Keep this with your policy)

Coverage ID: XXXXXX-XX

Effective Date: XX/XX/XXXX

	NEW PREMIUM	ADJUSTMENT OPTION
Elimination Period	XXXXX	XXXXX
NewPremium <<MODE>>	\$250.39	\$200.39
Coverage Form	XXXXX	XXXXX

I request that my **Elimination Period** be increased and my premium adjusted as reflected in the Adjustment Option above. I acknowledge that I will not be able to decrease my Elimination Period on this coverage at any time in the future.

Signature
<<NAME>>

Date

Form LTC-EP-VA

Lifetime Experience (Nationwide) as of 12/31/2016

Non-Lifetime Benefit Periods - Post-Stabilization Experience

Year	Non-Interest Adjusted			Interest Adjusted		
	Original Premium	VA Rate Level Increased Premium	Incurred Claims	Original Premium	VA Rate Level Increased Premium	Incurred Claims
1997	493,144	0	0	1,163,432	0	0
1998	2,879,303	0	107,337	6,500,380	0	242,326
1999	5,164,376	0	620,403	11,157,140	0	1,340,321
2000	8,538,676	0	1,279,039	17,652,627	0	2,644,250
2001	13,291,034	0	2,429,334	26,294,279	0	4,806,066
2002	19,718,256	0	4,609,517	37,329,718	0	8,726,531
2003	26,161,646	0	3,660,231	47,395,268	0	6,630,991
2004	26,346,243	0	5,771,160	45,674,344	0	10,004,992
2005	26,128,236	0	8,629,972	43,345,840	0	14,316,825
2006	25,202,065	0	8,814,082	40,008,952	0	13,992,591
2007	24,180,820	2,375,740	11,678,078	36,734,640	3,609,140	17,740,920
2008	23,092,348	5,455,520	13,342,930	33,570,404	7,930,939	19,397,229
2009	21,968,158	5,202,555	15,858,480	30,560,877	7,237,505	22,061,434
2010	20,871,914	4,947,543	17,408,466	27,785,497	6,586,360	23,174,821
2011	19,787,216	4,702,852	20,794,851	25,207,182	5,991,023	26,490,820
2012	19,741,981	4,711,682	25,050,446	24,066,560	5,743,799	30,537,872
2013	19,064,116	7,733,981	24,236,077	22,239,432	9,022,151	28,272,834
2014	18,047,452	9,564,271	24,831,729	20,146,826	10,676,837	27,720,285
2015	17,591,371	9,726,721	27,001,863	18,792,049	10,390,607	28,844,842
2016	17,436,256	9,712,107	34,148,099	17,824,255	9,928,225	34,907,977
Total	355,704,611	64,132,973	250,272,094	533,449,703	77,116,586	321,853,927
2017	15,805,260	8,803,632	27,636,882	15,461,210	8,611,994	27,035,282
2018	14,325,310	7,979,290	28,416,518	13,410,025	7,469,470	26,600,906
2019	12,968,744	7,223,674	29,611,006	11,617,353	6,470,941	26,525,430
2020	11,702,092	6,518,141	30,735,018	10,031,283	5,587,489	26,346,714
2021	10,531,170	5,865,930	31,622,766	8,638,798	4,811,866	25,940,393
2022	9,430,165	5,252,663	32,784,022	7,402,522	4,123,252	25,734,909
2023	8,411,290	4,685,143	32,382,296	6,318,394	3,519,386	24,324,938
2024	7,471,404	4,161,620	31,821,503	5,370,689	2,991,509	22,874,337
2025	6,613,726	3,683,888	32,100,913	4,549,438	2,534,066	22,081,518
2026	5,833,520	3,249,309	32,393,466	3,839,954	2,138,879	21,323,214
2027	5,124,353	2,854,297	32,599,205	3,227,884	1,797,952	20,534,586
2028	4,483,728	2,497,465	32,613,782	2,702,725	1,505,435	19,659,109
2029	3,907,611	2,176,564	32,495,597	2,254,019	1,255,503	18,744,372
2030	3,391,211	1,888,926	32,191,361	1,871,910	1,042,666	17,769,263
2031	2,930,771	1,632,459	31,791,974	1,548,088	862,295	16,793,116
2032	2,520,826	1,404,116	31,314,292	1,274,208	709,742	15,828,512
2033	2,160,963	1,203,670	30,248,034	1,045,270	582,222	14,631,147
2034	1,846,142	1,028,313	28,846,686	854,535	475,982	13,352,447
2035	1,570,480	874,767	27,601,218	695,634	387,473	12,225,789
2036	1,329,580	740,585	26,458,888	563,569	313,911	11,215,120
2037	1,119,908	623,796	25,380,908	454,253	253,022	10,294,925
2038	938,449	522,722	24,177,026	364,259	202,895	9,384,316
2039	782,185	435,682	22,768,954	290,531	161,828	8,457,199
2040	648,105	360,998	21,186,398	230,363	128,314	7,530,508
2041	534,258	297,585	19,606,995	181,720	101,219	6,669,019
2042	437,740	243,824	18,018,887	142,479	79,362	5,864,926
2043	356,651	198,657	16,419,637	111,087	61,876	5,114,249
2044	288,816	160,872	14,741,503	86,084	47,949	4,393,835
2045	232,228	129,352	13,110,603	66,237	36,894	3,739,456
2046	185,880	103,536	11,561,286	50,734	28,259	3,155,554
2047	148,063	82,472	10,149,439	38,672	21,541	2,650,911
2048	117,209	65,286	8,853,963	29,295	16,318	2,212,965
2049	92,025	51,258	7,641,022	22,010	12,260	1,827,562
2050	71,604	39,884	6,515,510	16,389	9,129	1,491,258
2051	55,414	30,866	5,514,288	12,137	6,760	1,207,751
2052	42,748	23,811	4,640,354	8,960	4,991	972,574
2053	32,770	18,253	3,883,863	6,572	3,661	778,967
2054	24,854	13,844	3,209,977	4,770	2,657	616,086
2055	18,556	10,336	2,619,423	3,408	1,898	481,092
2056	13,729	7,647	2,113,521	2,413	1,344	371,461
2057	10,163	5,661	1,699,948	1,709	952	285,908
2058	7,504	4,180	1,365,341	1,208	673	219,743
2059	5,474	3,049	1,085,897	843	470	167,242
2060	3,896	2,170	852,813	574	320	125,688
2061	2,719	1,514	655,912	383	214	92,506
2062	1,920	1,070	499,460	259	144	67,408
2063	1,380	769	386,898	178	99	49,968
2064	984	548	299,650	122	68	37,033
2065	688	383	228,822	81	45	27,062
2066	468	261	169,082	53	29	19,136
2067	325	181	123,691	35	20	13,396
2068	218	121	91,921	23	13	9,526
2069	88	49	67,772	9	5	6,721
2070	6	4	48,386	1	0	4,592
2071	0	0	33,070	0	0	3,003
2072	0	0	4	0	0	0
2073	0	0	0	0	0	0
Total	138,535,365	77,165,094	865,387,654	104,805,360	58,377,263	487,884,646
Grand Total	494,239,976	141,298,067	1,115,659,748	638,255,064	135,493,849	809,738,573

Minimum Required Loss Ratios	60%	80%
Minimum PV Incurred Claims	382,953,038	108,395,079
Dual Loss Ratio Test Met	809,738,573	>

Lifetime Experience (Nationwide) as of 12/31/2016

Lifetime Benefit Period - Post-Stabilization Experience

Year	Non-Interest Adjusted			Interest Adjusted		
	Original Premium	VA Rate Level Increased Premium	Incurred Claims	Original Premium	VA Rate Level Increased Premium	Incurred Claims
1997	379,977	0	0	896,447	0	0
1998	2,595,131	0	229,543	5,858,826	0	518,221
1999	5,659,399	0	581,891	12,226,592	0	1,257,120
2000	11,774,776	0	1,523,173	24,342,851	0	3,148,966
2001	20,596,912	0	4,549,954	40,747,841	0	9,001,389
2002	30,490,543	0	5,455,216	57,723,330	0	10,327,570
2003	39,924,279	0	9,776,788	72,328,091	0	17,711,939
2004	40,127,736	0	13,187,176	69,566,202	0	22,861,538
2005	39,955,932	0	16,226,697	66,285,511	0	26,919,529
2006	39,035,372	0	15,302,440	61,969,697	0	24,293,033
2007	38,080,489	4,037,414	21,894,757	57,850,522	6,133,495	33,261,735
2008	37,083,250	9,448,086	31,010,819	53,909,619	13,735,116	45,081,847
2009	35,962,664	9,175,958	29,943,118	50,029,255	12,765,081	41,655,198
2010	34,772,654	8,889,439	43,806,976	46,290,698	11,833,964	58,317,535
2011	32,165,428	8,226,381	46,122,333	40,975,940	10,479,689	58,755,816
2012	28,087,687	7,163,021	46,658,968	34,240,435	8,732,117	56,879,849
2013	25,432,785	12,850,857	48,844,490	29,668,865	14,991,294	56,980,019
2014	24,182,135	20,513,719	40,198,060	26,995,126	22,899,982	44,874,107
2015	21,826,988	20,862,928	45,730,248	23,316,762	22,286,901	48,851,510
2016	19,033,110	18,176,366	48,433,867	19,456,643	18,580,834	49,511,638
Total	527,167,248	119,344,168	469,476,515	794,679,255	142,438,472	610,208,562
2017	17,616,448	16,898,326	42,193,074	17,232,973	16,530,483	41,274,614
2018	16,275,618	15,686,581	44,812,166	15,235,723	14,684,321	41,948,989
2019	15,000,806	14,531,083	48,419,978	13,437,667	13,016,890	43,374,438
2020	13,773,997	13,416,594	52,866,944	11,807,364	11,500,991	45,318,673
2021	12,606,793	12,352,202	56,232,539	10,341,447	10,132,604	46,127,975
2022	11,483,532	11,322,179	60,253,140	9,014,380	8,887,721	47,297,707
2023	10,433,249	10,355,505	61,370,608	7,837,250	7,778,850	46,100,383
2024	9,452,096	9,450,441	61,808,534	6,794,476	6,793,286	44,429,995
2025	8,542,793	8,604,899	64,696,069	5,876,401	5,919,122	44,503,014
2026	7,699,091	7,814,926	67,610,519	5,067,978	5,144,227	44,505,072
2027	6,915,639	7,076,918	70,353,930	4,356,235	4,457,826	44,316,690
2028	6,192,076	6,391,035	72,742,987	3,732,493	3,852,422	43,848,404
2029	5,524,279	5,752,163	74,978,474	3,186,559	3,318,009	43,249,687
2030	4,907,081	5,156,832	77,268,721	2,708,653	2,846,512	42,651,450
2031	4,340,991	4,605,521	78,840,270	2,292,993	2,432,722	41,644,907
2032	3,819,335	4,092,532	80,346,493	1,930,569	2,068,662	40,612,940
2033	3,349,048	3,625,412	80,215,409	1,619,954	1,753,632	38,800,651
2034	2,928,963	3,205,614	78,807,595	1,355,747	1,483,803	36,478,166
2035	2,550,310	2,822,494	78,067,955	1,129,644	1,250,206	34,579,716
2036	2,209,221	2,473,924	77,388,940	936,422	1,048,621	32,802,824
2037	1,903,941	2,158,558	76,560,536	772,271	875,548	31,054,247
2038	1,632,930	1,875,708	75,029,404	633,822	728,056	29,122,674
2039	1,393,619	1,622,146	72,577,912	517,640	602,523	26,958,017
2040	1,182,234	1,394,776	69,572,431	420,214	495,760	24,728,875
2041	997,487	1,193,133	66,153,320	339,280	405,826	22,501,037
2042	835,714	1,013,923	62,671,060	272,015	330,019	20,398,660
2043	696,095	856,924	58,591,257	216,814	266,908	18,249,506
2044	578,036	722,314	53,748,501	172,289	215,292	16,020,216
2045	477,047	604,768	49,051,209	136,065	172,494	13,990,571
2046	391,674	504,076	44,458,757	106,904	137,583	12,134,636
2047	320,070	418,380	40,130,452	83,598	109,276	10,481,591
2048	260,080	345,541	35,943,278	65,005	86,365	8,983,685
2049	210,224	283,998	31,818,773	50,281	67,926	7,610,339
2050	168,660	231,650	27,874,097	38,603	53,020	6,379,771
2051	134,505	187,851	24,202,988	29,460	41,144	5,300,990
2052	106,691	151,637	20,991,863	22,361	31,782	4,399,696
2053	83,823	121,287	18,033,685	16,812	24,326	3,616,928
2054	65,581	96,631	15,203,525	12,587	18,546	2,917,987
2055	50,871	76,159	12,685,072	9,343	13,988	2,329,784
2056	39,154	59,501	10,457,274	6,881	10,458	1,837,913
2057	30,063	46,376	8,628,492	5,056	7,800	1,451,193
2058	23,077	36,050	7,107,878	3,714	5,802	1,143,968
2059	17,513	27,787	5,783,164	2,697	4,280	890,683
2060	13,150	21,061	4,598,691	1,938	3,104	677,759
2061	9,780	15,804	3,572,283	1,379	2,229	503,815
2062	7,308	11,935	2,797,678	986	1,611	377,578
2063	5,471	8,960	2,215,977	707	1,157	286,192
2064	4,039	6,671	1,739,406	499	825	214,970
2065	2,934	4,873	1,337,719	347	576	158,207
2066	2,103	3,498	990,079	238	396	112,050
2067	1,492	2,484	735,316	162	269	79,635
2068	983	1,632	552,194	102	169	57,227
2069	589	969	415,108	58	96	41,168
2070	3	-3	298,193	0	0	28,299
2071	0	0	761	0	0	69
2072	0	0	6	0	0	1
2073	0	0	1	0	0	0
Total	177,268,308	179,742,237	2,235,802,685	129,835,053	129,616,062	1,118,906,233
Grand Total	704,435,555	299,086,405	2,705,279,200	924,514,307	272,054,534	1,729,114,794

Minimum Required Loss Ratios	60%	80%
Minimum PV Incurred Claims	554,708,584	217,643,627
Dual Loss Ratio Test Met	1,729,114,794	>
		772,352,212

Lifetime Experience (Nationwide) as of 12/31/2016

All Benefit Periods Combined - Post-Stabilization Experience

Year	Non-Interest Adjusted			Interest Adjusted		
	Original Premium	VA Rate Level Increased Premium	Incurred Claims	Original Premium	VA Rate Level Increased Premium	Incurred Claims
1997	873,120	0	0	2,059,879	0	0
1998	5,474,434	0	336,880	12,359,207	0	760,548
1999	10,823,775	0	1,202,294	23,383,733	0	2,597,441
2000	20,313,452	0	2,802,212	41,995,479	0	5,793,217
2001	33,887,945	0	6,979,288	67,042,120	0	13,807,455
2002	50,208,799	0	10,064,733	95,053,048	0	19,054,101
2003	66,085,925	0	13,437,019	119,723,359	0	24,342,930
2004	66,473,979	0	18,958,336	115,240,546	0	32,866,530
2005	66,084,168	0	24,856,669	109,631,351	0	41,236,354
2006	64,237,437	0	24,116,522	101,978,649	0	38,285,624
2007	62,261,310	6,413,154	33,572,835	94,585,162	9,742,635	51,002,655
2008	60,175,598	14,903,606	44,353,749	87,480,023	21,666,055	64,479,076
2009	57,930,822	14,378,513	45,801,598	80,590,133	20,002,587	63,716,632
2010	55,644,568	13,836,982	61,215,442	74,076,195	18,420,323	81,492,357
2011	51,952,644	12,929,233	66,917,183	66,183,122	16,470,712	85,246,636
2012	47,829,667	11,874,703	71,709,414	58,306,996	14,475,916	87,417,721
2013	44,496,901	20,584,838	73,080,567	51,908,297	24,013,445	85,252,853
2014	42,229,587	30,077,990	65,029,789	47,141,952	33,576,819	72,594,392
2015	39,418,359	30,589,649	72,732,111	42,108,811	32,677,508	77,696,352
2016	36,469,366	27,888,473	82,581,966	37,280,898	28,509,059	84,419,614
Total	882,871,859	183,477,142	719,748,608	1,328,128,958	219,555,058	932,062,488
2017	33,421,708	25,701,958	69,829,956	32,694,183	25,142,477	68,309,896
2018	30,600,928	23,665,871	73,228,684	28,645,747	22,153,791	68,549,895
2019	27,969,550	21,754,757	78,030,984	25,055,020	19,487,831	69,899,868
2020	25,476,088	19,934,734	83,601,961	21,838,647	17,088,480	71,665,387
2021	23,137,963	18,218,131	87,855,305	18,980,245	14,944,470	72,068,368
2022	20,913,697	16,574,842	93,037,162	16,416,902	13,010,974	73,032,616
2023	18,844,539	15,040,648	93,752,904	14,155,644	11,298,237	70,425,322
2024	16,923,500	13,612,061	93,630,038	12,165,165	9,784,794	67,304,332
2025	15,156,519	12,288,787	96,796,982	10,425,839	8,453,189	66,584,532
2026	13,532,612	11,064,235	100,003,985	8,907,931	7,283,106	65,828,286
2027	12,039,991	9,931,216	102,953,135	7,584,119	6,255,778	64,851,276
2028	10,675,804	8,888,500	105,356,769	6,435,218	5,357,858	63,507,512
2029	9,431,890	7,928,727	107,474,071	5,440,578	4,573,512	61,994,059
2030	8,298,292	7,045,758	109,460,081	4,580,562	3,889,178	60,420,713
2031	7,271,762	6,237,979	110,632,245	3,841,081	3,295,017	58,438,023
2032	6,340,160	5,496,648	111,660,785	3,204,776	2,778,404	56,441,452
2033	5,510,010	4,829,082	110,463,443	2,665,223	2,335,854	53,431,797
2034	4,775,105	4,233,928	107,654,281	2,210,283	1,959,785	49,830,612
2035	4,120,790	3,697,261	105,669,173	1,825,278	1,637,679	46,805,505
2036	3,538,802	3,214,509	103,847,828	1,499,991	1,362,533	44,017,944
2037	3,023,849	2,782,354	101,941,444	1,226,524	1,128,570	41,349,173
2038	2,571,378	2,398,430	99,206,430	998,081	930,951	38,506,990
2039	2,175,804	2,057,828	95,346,866	808,171	764,351	35,415,215
2040	1,830,339	1,755,774	90,758,829	650,577	624,074	32,259,383
2041	1,531,745	1,490,718	85,760,315	521,000	507,045	29,170,055
2042	1,273,454	1,257,747	80,689,947	414,494	409,381	26,263,586
2043	1,052,746	1,055,582	75,010,894	327,900	328,784	23,363,755
2044	866,851	883,186	68,490,005	258,373	263,241	20,414,052
2045	709,275	734,121	62,161,813	202,302	209,389	17,730,027
2046	577,554	607,612	56,020,043	157,638	165,843	15,290,190
2047	468,133	500,852	50,279,891	122,271	130,816	13,132,502
2048	377,289	410,827	44,797,242	94,300	102,682	11,196,651
2049	302,248	335,257	39,459,796	72,291	80,186	9,437,900
2050	240,265	271,534	34,389,607	54,991	62,148	7,871,028
2051	189,919	218,717	29,717,276	41,596	47,904	6,508,741
2052	149,439	175,448	25,632,216	31,321	36,772	5,372,270
2053	116,592	139,539	21,917,548	23,384	27,987	4,395,896
2054	90,435	110,474	18,413,502	17,357	21,203	3,534,073
2055	69,427	86,495	15,304,495	12,751	15,886	2,810,877
2056	52,883	67,149	12,570,794	9,294	11,802	2,209,374
2057	40,226	52,036	10,328,440	6,765	8,752	1,737,101
2058	30,582	40,229	8,473,219	4,922	6,475	1,363,711
2059	22,987	30,836	6,869,061	3,540	4,749	1,057,925
2060	17,046	23,231	5,451,504	2,512	3,424	803,448
2061	12,499	17,318	4,228,194	1,763	2,442	596,321
2062	9,228	13,004	3,297,138	1,245	1,755	444,986
2063	6,851	9,729	2,602,875	885	1,256	336,160
2064	5,023	7,219	2,039,056	621	892	252,003
2065	3,622	5,256	1,566,540	428	622	185,268
2066	2,570	3,758	1,159,161	291	425	131,186
2067	1,817	2,665	859,007	197	289	93,030
2068	1,201	1,753	644,115	124	182	66,754
2069	676	1,018	482,879	67	101	47,889
2070	9	1	346,579	1	0	32,891
2071	0	0	33,832	0	0	3,072
2072	0	0	10	0	0	1
2073	0	0	1	0	0	0
Total	315,803,673	256,907,331	3,101,190,339	234,640,413	187,993,325	1,606,790,879
Grand Total	1,198,675,532	440,384,473	3,820,938,948	1,562,769,371	407,548,383	2,538,853,367

Minimum Required Loss Ratios	60%	80%
Minimum PV Incurred Claims	937,661,623	326,038,707
Dual Loss Ratio Test Met	2,538,853,367	>
		1,263,700,329

Actuarial Certification
for
Long-Term Care Policies HCA, NHA, LTA and Riders
for
Policies Issued Prior to October 1, 2003

I, Adam Walling, am the LTC Product Performance Director of Mutual of Omaha Insurance Company and a member of the American Academy of Actuaries. I meet the Academy's qualification standards for rendering this opinion and am familiar with the requirements for filing long-term care insurance premiums.

I certify to the best of my knowledge and judgment, the rate filing is in compliance with the applicable laws and regulations of this Commonwealth and the premiums are reasonable in relation to the benefits provided.

A handwritten signature in black ink, appearing to read 'Adam Walling', with a stylized flourish at the end.

Adam Walling, FSA, MAAA
LTC Product Performance Director
Mutual of Omaha Insurance Company
Mutual of Omaha Plaza
Omaha, NE 68175
(402) 351-3861
Adam.walling@mutualofomaha.com

April 27, 2017

Active Life Reserves

Year	Benefit Period	
	Lifetime	Non-Lifetime
1997	0	0
1998	0	0
1999	1,865,441	1,831,222
2000	4,319,192	3,843,486
2001	10,324,449	7,598,575
2002	21,593,484	13,700,815
2003	42,950,845	25,195,653
2004	69,222,450	39,483,354
2005	100,094,678	55,637,284
2006	132,428,137	71,903,925
2007	164,791,834	87,603,254
2008	197,161,849	102,666,313
2009	229,309,136	116,675,375
2010	261,101,278	130,095,319
2011	280,919,947	150,005,868
2012	294,255,732	173,955,110
2013	312,212,971	191,906,162
2014	338,055,745	205,507,391
2015	346,146,460	232,449,244
2016	355,332,664	255,371,182

Lifetime Experience (Nationwide) as of 12/31/2016
Premiums at the Proposed Virginia Rate Level Since Day 1
Non-Lifetime Benefit Periods - Pre-Rate Stabilization

Year	Proposed VA Rate Level Earned Premium	Incurred Claims Discounted to Incurred Year	Loss Ratio
1997	616,035	0	0.0%
1998	3,600,169	107,337	3.0%
1999	6,860,652	620,403	9.0%
2000	12,224,019	1,279,039	10.5%
2001	19,812,146	2,429,334	12.3%
2002	30,132,436	4,609,517	15.3%
2003	40,425,643	3,660,231	9.1%
2004	40,699,152	5,771,160	14.2%
2005	40,369,966	8,629,972	21.4%
2006	38,911,332	8,814,082	22.7%
2007	37,323,647	11,678,078	31.3%
2008	35,661,997	13,342,930	37.4%
2009	33,941,655	15,858,480	46.7%
2010	32,253,666	17,408,466	54.0%
2011	30,592,994	20,794,851	68.0%
2012	30,547,515	25,050,446	82.0%
2013	29,536,071	24,236,077	82.1%
2014	27,978,671	24,831,729	88.8%
2015	27,318,093	27,001,863	98.8%
2016	27,148,364	34,148,099	125.8%
Total	545,954,223	250,272,094	45.8%
Interest Adjusted	815,988,827	321,853,927	39.4%
	<u>Earned Premium</u>	<u>Incurred Claims</u>	<u>Loss Ratio</u>
2017	24,608,891	27,636,882	112.3%
2018	22,304,600	28,416,518	127.4%
2019	20,192,418	29,611,006	146.6%
2020	18,220,232	30,735,018	168.7%
2021	16,397,100	31,622,766	192.9%
2022	14,682,828	32,784,022	223.3%
2023	13,096,433	32,382,296	247.3%
2024	11,633,024	31,821,503	273.5%
2025	10,297,614	32,100,913	311.7%
2026	9,082,829	32,393,466	356.6%
2027	7,978,650	32,599,205	408.6%
2028	6,981,193	32,613,782	467.2%
2029	6,084,175	32,495,597	534.1%
2030	5,280,137	32,191,361	609.7%
2031	4,563,230	31,791,974	696.7%
2032	3,924,942	31,314,292	797.8%
2033	3,364,633	30,248,034	899.0%
2034	2,874,456	28,846,686	1003.6%
2035	2,445,247	27,601,218	1128.8%
2036	2,070,165	26,458,888	1278.1%
2037	1,743,703	25,380,908	1455.6%
2038	1,461,171	24,177,026	1654.6%
2039	1,217,867	22,768,954	1869.6%
2040	1,009,103	21,186,398	2099.5%
2041	831,844	19,606,995	2357.1%
2042	681,564	18,018,887	2643.8%
2043	555,308	16,419,637	2956.9%
2044	449,688	14,741,503	3278.2%
2045	361,580	13,110,603	3625.9%
2046	289,416	11,561,286	3994.7%
2047	230,535	10,149,439	4402.6%
2048	182,496	8,853,963	4851.6%
2049	143,283	7,641,022	5332.8%
2050	111,489	6,515,510	5844.1%
2051	86,279	5,514,288	6391.2%
2052	66,559	4,640,354	6971.8%
2053	51,023	3,883,863	7612.0%
2054	38,698	3,209,977	8295.0%
2055	28,892	2,619,423	9066.3%
2056	21,376	2,113,521	9887.2%
2057	15,823	1,699,948	10743.4%
2058	11,684	1,365,341	11685.6%
2059	8,522	1,085,897	12741.6%
2060	6,066	852,813	14059.9%
2061	4,233	655,912	15495.6%
2062	2,990	499,460	16705.3%
2063	2,148	386,898	18010.2%
2064	1,532	299,650	19561.4%
2065	1,071	228,822	21356.9%
2066	728	169,082	23211.7%
2067	505	123,691	24479.6%
2068	339	91,921	27097.8%
2069	137	67,772	49644.0%
2070	10	48,386	491238.8%
2071	0	33,070	7810123.4%
2072	0	4	6232.7%
2073	0	0	0.0%
	<u>Earned Premium</u>	<u>Incurred Claims</u>	<u>Loss Ratio</u>
Past Experience @ 4.5%	815,988,827	321,853,927	39.4%
Anticipated Experience @ 4.5%	163,182,624	487,884,646	299.0%
Lifetime Experience @ 4.5%	979,171,450	809,738,573	82.7%

Lifetime Experience (Nationwide) as of 12/31/2016
Premiums at the Proposed Virginia Rate Level Since Day 1
Lifetime Benefit Period - Pre-Rate Stabilization

Year	Proposed VA Rate Level Earned Premium	Incurred Claims Discounted to Incurred Year	Loss Ratio
1997	886,182	0	0.0%
1998	6,061,765	229,543	3.8%
1999	14,486,241	581,891	4.0%
2000	32,662,325	1,523,173	4.7%
2001	58,929,247	4,549,954	7.7%
2002	88,597,472	5,455,216	6.2%
2003	116,762,008	9,776,788	8.4%
2004	117,355,149	13,187,176	11.2%
2005	116,915,133	16,226,697	13.9%
2006	114,192,122	15,302,440	13.4%
2007	111,391,789	21,894,757	19.7%
2008	108,520,383	31,010,819	28.6%
2009	105,272,295	29,943,118	28.4%
2010	101,828,733	43,806,976	43.0%
2011	94,201,775	46,122,333	49.0%
2012	82,211,700	46,658,968	56.8%
2013	74,398,059	48,844,490	65.7%
2014	70,746,746	40,198,060	56.8%
2015	63,821,424	45,730,248	71.7%
2016	55,628,167	48,433,867	87.1%
Total	1,534,868,713	469,476,515	30.6%
Interest Adjusted	2,309,154,400	610,208,562	26.4%
	<u>Earned Premium</u>	<u>Incurred Claims</u>	<u>Loss Ratio</u>
2017	51,487,682	42,193,074	81.9%
2018	47,568,832	44,812,166	94.2%
2019	43,842,932	48,419,978	110.4%
2020	40,257,330	52,866,944	131.3%
2021	36,845,937	56,232,539	152.6%
2022	33,562,977	60,253,140	179.5%
2023	30,493,309	61,370,608	201.3%
2024	27,625,689	61,808,534	223.7%
2025	24,968,065	64,696,069	259.1%
2026	22,502,173	67,610,519	300.5%
2027	20,212,372	70,353,930	348.1%
2028	18,097,612	72,742,987	401.9%
2029	16,145,838	74,978,474	464.4%
2030	14,341,951	77,268,721	538.8%
2031	12,687,436	78,840,270	621.4%
2032	11,162,789	80,346,493	719.8%
2033	9,788,279	80,215,409	819.5%
2034	8,560,494	78,807,595	920.6%
2035	7,453,804	78,067,955	1047.4%
2036	6,456,903	77,388,940	1198.5%
2037	5,564,659	76,560,536	1375.8%
2038	4,772,572	75,029,404	1572.1%
2039	4,073,138	72,577,912	1781.9%
2040	3,455,321	69,572,431	2013.5%
2041	2,915,360	66,153,320	2269.1%
2042	2,442,545	62,671,060	2565.8%
2043	2,034,479	58,591,257	2879.9%
2044	1,689,428	53,748,501	3181.5%
2045	1,394,267	49,051,209	3518.1%
2046	1,144,748	44,458,757	3883.7%
2047	935,471	40,130,452	4289.9%
2048	760,137	35,943,278	4728.5%
2049	614,421	31,818,773	5178.7%
2050	492,945	27,874,097	5654.6%
2051	393,118	24,202,988	6156.7%
2052	311,825	20,991,863	6731.9%
2053	244,989	18,033,685	7361.0%
2054	191,673	15,203,525	7932.0%
2055	148,681	12,685,072	8531.7%
2056	114,436	10,457,274	9138.1%
2057	87,865	8,628,492	9820.1%
2058	67,448	7,107,878	10538.3%
2059	51,186	5,783,164	11298.3%
2060	38,434	4,598,691	11965.2%
2061	28,585	3,572,283	12497.0%
2062	21,360	2,797,678	13098.0%
2063	15,991	2,215,977	13857.4%
2064	11,805	1,739,406	14734.2%
2065	8,575	1,337,719	15600.7%
2066	6,145	990,079	16110.9%
2067	4,361	735,316	16860.0%
2068	2,874	552,194	19215.5%
2069	1,720	415,108	24132.7%
2070	9	298,193	3265350.1%
2071	0	761	484605.5%
2072	0	6	10256.1%
2073	0	1	0.0%
	<u>Earned Premium</u>	<u>Incurred Claims</u>	<u>Loss Ratio</u>
Past Experience @ 4.5%	2,309,154,400	610,208,562	26.4%
Anticipated Experience @ 4.5%	379,469,563	1,118,906,233	294.9%
Lifetime Experience @ 4.5%	2,688,623,963	1,729,114,794	64.3%

Lifetime Experience (Nationwide) as of 12/31/2016
Premiums at the Proposed Virginia Rate Level Since Day 1
All Benefit Periods - Pre-Rate Stabilization

Year	Proposed VA Rate Level Earned Premium	Incurred Claims Discounted to Incurred Year	Loss Ratio
1997	1,502,217	0	0.0%
1998	9,661,934	336,880	3.5%
1999	21,346,893	1,202,294	5.6%
2000	44,886,344	2,802,212	6.2%
2001	78,741,393	6,979,288	8.9%
2002	118,729,909	10,064,733	8.5%
2003	157,187,651	13,437,019	8.5%
2004	158,054,302	18,958,336	12.0%
2005	157,285,099	24,856,669	15.8%
2006	153,103,454	24,116,522	15.8%
2007	148,715,436	33,572,835	22.6%
2008	144,182,380	44,353,749	30.8%
2009	139,213,949	45,801,598	32.9%
2010	134,082,399	61,215,442	45.7%
2011	124,794,769	66,917,183	53.6%
2012	112,759,215	71,709,414	63.6%
2013	103,934,129	73,080,567	70.3%
2014	98,725,417	65,029,789	65.9%
2015	91,139,516	72,732,111	79.8%
2016	82,776,531	82,581,966	99.8%
Total	2,080,822,936	719,748,608	34.6%
Interest Adjusted	3,125,143,226	932,062,488	29.8%
	<u>Earned Premium</u>	<u>Incurred Claims</u>	<u>Loss Ratio</u>
2017	76,096,573	69,829,956	91.8%
2018	69,873,431	73,228,684	104.8%
2019	64,035,350	78,030,984	121.9%
2020	58,477,562	83,601,961	143.0%
2021	53,243,036	87,855,305	165.0%
2022	48,245,804	93,037,162	192.8%
2023	43,589,742	93,752,904	215.1%
2024	39,258,713	93,630,038	238.5%
2025	35,265,679	96,796,982	274.5%
2026	31,585,002	100,003,985	316.6%
2027	28,191,022	102,953,135	365.2%
2028	25,078,806	105,356,769	420.1%
2029	22,230,013	107,474,071	483.5%
2030	19,622,088	109,460,081	557.8%
2031	17,250,665	110,632,245	641.3%
2032	15,087,731	111,660,785	740.1%
2033	13,152,912	110,463,443	839.8%
2034	11,434,949	107,654,281	941.4%
2035	9,899,051	105,669,173	1067.5%
2036	8,527,068	103,847,828	1217.9%
2037	7,308,362	101,941,444	1394.9%
2038	6,233,742	99,206,430	1591.4%
2039	5,291,005	95,346,866	1802.1%
2040	4,464,424	90,758,829	2032.9%
2041	3,747,204	85,760,315	2288.6%
2042	3,124,109	80,689,947	2582.8%
2043	2,589,788	75,010,894	2896.4%
2044	2,139,116	68,490,005	3201.8%
2045	1,755,848	62,161,813	3540.3%
2046	1,434,164	56,020,043	3906.1%
2047	1,166,006	50,279,891	4312.1%
2048	942,633	44,797,242	4752.4%
2049	757,704	39,459,796	5207.8%
2050	604,434	34,389,607	5689.6%
2051	479,398	29,717,276	6198.9%
2052	378,384	25,632,216	6774.1%
2053	296,012	21,917,548	7404.3%
2054	230,371	18,413,502	7993.0%
2055	177,573	15,304,495	8618.7%
2056	135,812	12,570,794	9256.0%
2057	103,688	10,328,440	9961.0%
2058	79,132	8,473,219	10707.7%
2059	59,709	6,869,061	11504.3%
2060	44,499	5,451,504	12250.7%
2061	32,818	4,228,194	12883.7%
2062	24,349	3,297,138	13540.9%
2063	18,139	2,602,875	14349.2%
2064	13,337	2,039,056	15288.6%
2065	9,646	1,566,540	16240.0%
2066	6,874	1,159,161	16863.4%
2067	4,867	859,007	17651.1%
2068	3,213	644,115	20047.7%
2069	1,857	482,879	26008.5%
2070	19	346,579	1825842.7%
2071	1	33,832	5827402.9%
2072	0	10	8287.4%
2073	0	1	0.0%
	<u>Earned Premium</u>	<u>Incurred Claims</u>	<u>Loss Ratio</u>
Past Experience @ 4.5%	3,125,143,226	932,062,488	29.8%
Anticipated Experience @ 4.5%	542,652,186	1,606,790,879	296.1%
Lifetime Experience @ 4.5%	3,667,795,413	2,538,853,367	69.2%

Lifetime Experience (Nationwide) as of 12/31/2016
Premiums at the Proposed Virginia Rate Level Since Day 1
Non-Lifetime Benefit Periods - Post-Rate Stabilization

Year	Proposed VA Rate Level Earned Premium	Incurred Claims Discounted to Incurred Year	Loss Ratio
1997	0	0	0.0%
1998	0	0	0.0%
1999	0	0	0.0%
2000	0	0	0.0%
2001	8,966	0	0.0%
2002	200,994	0	0.0%
2003	1,545,719	0	0.0%
2004	3,023,009	209,237	6.9%
2005	3,397,088	65,865	1.9%
2006	3,307,949	535,770	16.2%
2007	3,153,228	347,698	11.0%
2008	3,034,487	430,039	14.2%
2009	2,950,501	654,237	22.2%
2010	2,835,035	1,284,179	45.3%
2011	2,710,660	622,344	23.0%
2012	2,508,995	1,205,371	48.0%
2013	2,381,799	1,454,616	61.1%
2014	2,270,826	1,282,810	56.5%
2015	2,185,408	1,305,648	59.7%
2016	2,314,764	2,274,370	98.3%
Total	37,829,428	11,672,183	30.9%
Interest Adjusted	52,932,785	14,206,516	26.8%
	<u>Earned Premium</u>	<u>Incurred Claims</u>	<u>Loss Ratio</u>
2017	2,103,675	2,219,636	105.5%
2018	1,911,837	2,282,935	119.4%
2019	1,735,649	2,390,252	137.7%
2020	1,570,844	2,492,130	158.6%
2021	1,418,201	2,579,730	181.9%
2022	1,274,001	2,692,202	211.3%
2023	1,140,288	2,654,967	232.8%
2024	1,016,568	2,607,342	256.5%
2025	903,198	2,645,127	292.9%
2026	799,597	2,685,121	335.8%
2027	705,031	2,716,671	385.3%
2028	619,247	2,730,416	440.9%
2029	541,757	2,734,855	504.8%
2030	471,984	2,722,243	576.8%
2031	409,449	2,702,500	660.0%
2032	353,454	2,674,332	756.6%
2033	304,095	2,588,568	851.2%
2034	260,742	2,470,726	947.6%
2035	222,631	2,369,166	1064.2%
2036	189,176	2,276,008	1203.1%
2037	159,923	2,187,776	1368.0%
2038	134,494	2,088,657	1553.0%
2039	112,517	1,971,397	1752.1%
2040	93,600	1,837,709	1963.4%
2041	77,454	1,705,028	2201.3%
2042	63,682	1,571,296	2467.4%
2043	52,065	1,435,343	2756.8%
2044	42,315	1,290,763	3050.4%
2045	34,163	1,150,249	3367.0%
2046	27,455	1,016,554	3702.7%
2047	21,954	894,491	4074.4%
2048	17,449	782,185	4482.8%
2049	13,758	676,771	4919.2%
2050	10,754	578,385	5378.4%
2051	8,364	490,761	5867.7%
2052	6,489	413,987	6379.8%
2053	5,008	347,356	6935.9%
2054	3,827	287,726	7518.5%
2055	2,877	235,498	8186.0%
2056	2,145	190,449	8879.8%
2057	1,604	153,427	9566.2%
2058	1,198	123,429	10304.7%
2059	884	98,334	11121.6%
2060	637	77,319	12134.4%
2061	451	59,499	13207.1%
2062	323	45,273	13998.6%
2063	236	35,061	14863.1%
2064	170	27,138	15920.8%
2065	120	20,718	17277.2%
2066	82	15,320	18714.1%
2067	57	11,179	19575.9%
2068	39	8,302	21560.8%
2069	15	6,136	40168.3%
2070	1	4,384	433259.1%
2071	0	3,009	0.0%
2072	0	0	0.0%
2073	0	0	0.0%
	<u>Earned Premium</u>	<u>Incurred Claims</u>	<u>Loss Ratio</u>
Past Experience @ 4.5%	52,932,785	14,206,516	26.8%
Anticipated Experience @ 4.5%	14,187,054	40,731,162	287.1%
Lifetime Experience @ 4.5%	67,119,839	54,937,678	81.9%

Lifetime Experience (Nationwide) as of 12/31/2016
Premiums at the Proposed Virginia Rate Level Since Day 1
Lifetime Benefit Period - Post-Rate Stabilization

Year	Proposed VA Rate Level Earned Premium	Incurred Claims Discounted to Incurred Year	Loss Ratio
1997	0	0	0.0%
1998	0	0	0.0%
1999	0	0	0.0%
2000	0	0	0.0%
2001	41,799	0	0.0%
2002	886,909	487	0.1%
2003	4,804,859	0	0.0%
2004	7,442,155	21,213	0.3%
2005	7,802,832	204,578	2.6%
2006	7,623,383	305,634	4.0%
2007	7,516,296	1,613,672	21.5%
2008	7,400,955	1,541,097	20.8%
2009	7,256,952	360,417	5.0%
2010	7,141,167	1,228,367	17.2%
2011	7,019,850	2,158,778	30.8%
2012	6,388,477	1,596,723	25.0%
2013	5,856,176	1,799,433	30.7%
2014	5,619,450	3,246,046	57.8%
2015	5,379,043	2,858,807	53.1%
2016	4,624,594	3,611,461	78.1%
Total	92,804,896	20,546,713	22.1%
Interest Adjusted	130,503,835	24,855,858	19.0%
	<u>Earned Premium</u>	<u>Incurred Claims</u>	<u>Loss Ratio</u>
2017	4,289,682	3,390,406	79.0%
2018	3,972,434	3,604,191	90.7%
2019	3,670,382	3,910,252	106.5%
2020	3,379,393	4,290,543	127.0%
2021	3,102,038	4,573,057	147.4%
2022	2,834,417	4,922,441	173.7%
2023	2,583,738	5,013,880	194.1%
2024	2,349,309	5,033,516	214.3%
2025	2,131,207	5,286,196	248.0%
2026	1,928,166	5,541,093	287.4%
2027	1,739,070	5,780,172	332.4%
2028	1,563,897	5,988,134	382.9%
2029	1,401,497	6,187,674	441.5%
2030	1,250,797	6,395,019	511.3%
2031	1,111,921	6,536,773	587.9%
2032	983,329	6,678,359	679.2%
2033	866,823	6,673,346	769.9%
2034	762,438	6,550,385	859.1%
2035	667,761	6,498,209	973.1%
2036	582,047	6,452,520	1108.6%
2037	504,909	6,394,981	1266.6%
2038	436,072	6,278,849	1439.9%
2039	374,816	6,087,886	1624.2%
2040	320,285	5,849,838	1826.4%
2041	272,262	5,574,885	2047.6%
2042	229,883	5,296,424	2304.0%
2043	193,018	4,964,868	2572.2%
2044	161,614	4,559,682	2821.3%
2045	134,454	4,169,301	3100.9%
2046	111,329	3,786,939	3401.6%
2047	91,779	3,425,879	3732.8%
2048	75,270	3,075,505	4086.0%
2049	61,425	2,729,300	4443.3%
2050	49,753	2,396,518	4816.9%
2051	40,064	2,086,384	5207.6%
2052	32,106	1,814,955	5653.0%
2053	25,492	1,564,952	6139.0%
2054	20,160	1,322,531	6560.0%
2055	15,788	1,106,769	7010.2%
2056	12,261	916,077	7471.2%
2057	9,500	758,026	7979.0%
2058	7,349	626,084	8519.8%
2059	5,630	511,157	9078.9%
2060	4,252	407,847	9592.1%
2061	3,180	317,614	9988.5%
2062	2,392	249,024	10412.5%
2063	1,794	197,866	11031.5%
2064	1,331	155,584	11687.8%
2065	970	119,981	12366.3%
2066	696	89,102	12801.1%
2067	494	66,266	13409.2%
2068	325	49,872	15343.9%
2069	194	37,587	19413.4%
2070	0	27,051	43197845.6%
2071	0	4	0.0%
2072	0	0	0.0%
2073	0	0	0.0%
	<u>Earned Premium</u>	<u>Incurred Claims</u>	<u>Loss Ratio</u>
Past Experience @ 4.5%	130,503,835	24,855,858	19.0%
Anticipated Experience @ 4.5%	32,245,981	92,493,839	286.8%
Lifetime Experience @ 4.5%	162,749,816	117,349,698	72.1%

Lifetime Experience (Nationwide) as of 12/31/2016
Premiums at the Proposed Virginia Rate Level Since Day 1
All Benefit Periods - Post-Rate Stabilization

Year	Proposed VA Rate Level Earned Premium	Incurred Claims Discounted to Incurred Year	Loss Ratio
1997	0	0	0.0%
1998	0	0	0.0%
1999	0	0	0.0%
2000	0	0	0.0%
2001	50,765	0	0.0%
2002	1,087,903	487	0.0%
2003	6,350,578	0	0.0%
2004	10,465,164	230,450	2.2%
2005	11,199,920	270,443	2.4%
2006	10,931,332	841,404	7.7%
2007	10,669,524	1,961,370	18.4%
2008	10,435,442	1,971,136	18.9%
2009	10,207,452	1,014,654	9.9%
2010	9,976,202	2,512,545	25.2%
2011	9,730,509	2,781,122	28.6%
2012	8,897,471	2,802,095	31.5%
2013	8,237,975	3,254,050	39.5%
2014	7,890,275	4,528,856	57.4%
2015	7,564,451	4,164,454	55.1%
2016	6,939,358	5,885,831	84.8%
Total	130,634,324	32,218,896	24.7%
Interest Adjusted	183,436,620	39,062,374	21.3%
	<u>Earned Premium</u>	<u>Incurred Claims</u>	<u>Loss Ratio</u>
2017	6,393,357	5,610,042	87.7%
2018	5,884,271	5,887,126	100.0%
2019	5,406,031	6,300,504	116.5%
2020	4,950,237	6,782,673	137.0%
2021	4,520,239	7,152,787	158.2%
2022	4,108,417	7,614,643	185.3%
2023	3,724,026	7,668,847	205.9%
2024	3,365,877	7,640,858	227.0%
2025	3,034,406	7,931,323	261.4%
2026	2,727,763	8,226,214	301.6%
2027	2,444,101	8,496,843	347.6%
2028	2,183,144	8,718,550	399.4%
2029	1,943,254	8,922,529	459.2%
2030	1,722,781	9,117,262	529.2%
2031	1,521,369	9,239,273	607.3%
2032	1,336,784	9,352,692	699.6%
2033	1,170,918	9,261,913	791.0%
2034	1,023,180	9,021,111	881.7%
2035	890,392	8,867,375	995.9%
2036	771,223	8,728,528	1131.8%
2037	664,832	8,582,757	1291.0%
2038	570,566	8,367,506	1466.5%
2039	487,333	8,059,283	1653.8%
2040	413,884	7,687,547	1857.4%
2041	349,716	7,279,913	2081.7%
2042	293,565	6,867,720	2339.4%
2043	245,082	6,400,211	2611.5%
2044	203,929	5,850,445	2868.9%
2045	168,617	5,319,551	3154.8%
2046	138,783	4,803,492	3461.1%
2047	113,732	4,320,370	3798.7%
2048	92,718	3,857,690	4160.6%
2049	75,182	3,406,072	4530.4%
2050	60,507	2,974,903	4916.7%
2051	48,428	2,577,145	5321.6%
2052	38,595	2,228,942	5775.2%
2053	30,500	1,912,308	6269.8%
2054	23,987	1,610,257	6712.9%
2055	18,665	1,342,267	7191.4%
2056	14,406	1,106,526	7680.9%
2057	11,104	911,453	8208.3%
2058	8,546	749,513	8769.9%
2059	6,514	609,491	9356.2%
2060	4,889	485,166	9923.4%
2061	3,630	377,113	10387.9%
2062	2,715	294,297	10839.7%
2063	2,030	232,928	11476.8%
2064	1,502	182,722	12168.3%
2065	1,090	140,699	12906.5%
2066	778	104,422	13423.4%
2067	551	77,445	14048.0%
2068	364	58,174	16002.4%
2069	209	43,722	20931.1%
2070	1	31,435	2925657.7%
2071	0	3,013	0.0%
2072	0	0	0.0%
2073	0	0	0.0%
	<u>Earned Premium</u>	<u>Incurred Claims</u>	<u>Loss Ratio</u>
Past Experience @ 4.5%	183,436,620	39,062,374	21.3%
Anticipated Experience @ 4.5%	46,433,035	133,225,002	286.9%
Lifetime Experience @ 4.5%	229,869,654	172,287,376	75.0%

Benefit Summary

Form/Rider

LT50-Series 19241 & LT50-Series 19409

1. Confined Care Daily Benefit Amount: \$30 - \$250 per day
2. Home Health Care Daily Benefit Amount: 50%, 80% or 100% of the Confined Care Daily Benefit Amount
3. Benefit Period Options: 1, 2, 3, 5 years or lifetime
4. Elimination Period Options: 0, 20, 100 and 365 days
5. Maximum Benefit: The Maximum Benefit establishes the maximum amount of benefits payable under the policy. The Maximum Benefit equals the Benefit Period in days multiplied times the Confined Care Daily Benefit Amount elected.

Policy benefits include nursing care facility, hospice care facility, assisted living facility, bed reservation, home health care, adult day care, homemaker services, outpatient hospice services, respite care, emergency medical alert systems, restoration of benefits, and waiver of premium.

0DX5M -5% Compound Inflation Rider

NH50-Series 19242 & LT50-Series 19410

1. Confined Care Daily Benefit Amount: \$30 - \$250 per day
2. Benefit Period Options: 1, 2, 3, 5 years or lifetime
3. Elimination Period Options: 0, 20, 100 and 365 days

Policy benefits include nursing care facility, hospice care facility, assisted living facility, bed reservation, alternative care, respite care, restoration of benefits, and waiver of premium.

0DX6M -5% Compound Inflation Rider

HCA-19629 & HCA-20249

1. Home Health Care Daily Benefit Amount: \$40 - \$250 per day
2. Benefit Period Options: 1, 2, 3, 5 years or lifetime
3. Elimination Period Options: 20 days

Home Health Care Policy. Policy benefits include home health care, homemaker/companion services, adult day care, outpatient hospice services, respite care and caregiver training, alternate plan of care, restoration of benefits, waiver of premium and guaranteed purchase option (if optional compound inflation rider not purchased).

Benefit Summary

Form/Rider

LTA-19631 & LTA-20251

1. Confined Care Daily Benefit Amount: \$40 - \$250 per day
2. Benefit Period Options: 1, 2, 3, 5 years or lifetime
3. Elimination Period Options: 0, 20, 90, 180 and 365 days

Confined Care and Non-Confined Care Policy designed for couples (each has their own policy). Policy benefits include nursing care facility, hospice care facility, assisted living facility, bed reservation, adult day care, adjustment period benefit, survivorship benefits, alternate plan of care, restoration of benefits, joint waiver of premium, and guaranteed purchase option (if optional compound inflation rider not purchased).

NHA-19630 & NHA-20250

1. Confined Care Daily Benefit Amount: \$40 - \$250 per day
2. Benefit Period Options: 1, 2, 3, 5 years or lifetime
3. Elimination Period Options: 0, 20, 90, 180 and 365 days

Confined Care Policy. Policy benefits include nursing care facility, hospice care facility, assisted living facility, bed reservation, alternate plan of care, restoration of benefits, waiver of premium, and guaranteed purchase option (if optional compound inflation rider not purchased).

Optional Riders available on HCA-19629, HCA-20249, LTA-19631, LTA-20251, NHA-19630 and NHA-20250 (unless otherwise noted)

0GH1M-44 & 0GH1M-44 Rev - Confined Care Rider (available only HCA-19629 & HCA-20249)

1. Confined Care Daily Benefit Amount: \$40 - \$250 per day
2. Benefit Period Options: 1, 2, 3, 5 years or lifetime
3. Elimination Period Options: 0, 20, 90, 180 and 365 days

Confined Care Rider. Rider benefits include nursing care facility, hospice care facility, assisted living facility, bed reservation, alternate plan of care, restoration of benefits, waiver of premium, and care coordinator.

0GH3M - 5% Compound Inflation Rider (available only on HCA-19629, HCA-20249, NHA-19630 and NHA-20250)

0GH4M - 5% Compound Inflation Rider (available only on LTA-19631 and LTA-20251)

Benefit SummaryForm/Rider

0GH5M-44 - Shortened Benefit Period Non-Forfeiture Rider

If a policy lapses due to non-payment of premium after the 3rd policy anniversary date, a non-forfeiture benefit is provided with no additional premium required.

0GH6M-44 Rev - Tax Qualified Amendment Rider

Amends the policy to make it a tax qualified long-term care insurance contract.

0GH7M-44 and 0GH7M-44 Rev - Home Health Care Rider (available on NHA-19630 & NHA-20250 only)

1. Home Health Care Daily Benefit Amount: \$40 - \$250 per day
2. Benefit Period Options: 1, 2, 3, 5 years or lifetime
3. Elimination Period Options: 20 days

Home Health Care Rider. Rider benefits include home health care, respite care, caregiver training, restoration of benefits, care coordinator and waiver of premium.

0GH8M-44 and 0GH8M-44 Rev - Home Health Care Rider (available on LTA-19631 & LTA-20251 only)

1. Home Health Care Daily Benefit Amount: \$40 - \$250 per day
2. Benefit Period Options: 1, 2, 3, 5 years or lifetime
3. Elimination Period Options: 20 days

Home Health Care Rider. Rider benefits include home health care, respite care, caregiver training, restoration of benefits, care coordinator and waiver of premium.

0GH9M - Spouse Premium Reduction Rider (available only on HCA-19629, HCA-20249, NHA-19630 and NHA-20250)

If both spouses reside together and are both covered under forms HCA-19629, HCA-20249, NHA-19630 or NHA-20250, provides a 10% premium reduction.

Forms HCA, LTA, NHA, LT50 and NH50 (LT50 and NH50 - 2011, 2012, 2015 and 2016 rate increases only)

State	2003 Rate Increase			2005 Rate Increase			2007 Rate Increase (Catch-up)		
	Non-Lifetime BP	Lifetime BP	Implementation Date	Non-Lifetime BP	Lifetime BP	Implementation Date	Non-Lifetime BP	Lifetime BP	Implementation Date
Alabama	29.0%	29.0%	10/01/2003						
Alaska	29.0%	29.0%	10/01/2003						
Arizona	29.0%	29.0%	10/01/2003						
Arkansas	29.0%	29.0%	09/01/2005						
California (Post-Stabilization)									
California (Pre-Stabilization)									
Colorado	29.0%	29.0%	01/01/2004						
Connecticut									
Delaware	18.0%	18.0%	09/01/2004				9.3%	9.3%	09/01/2007
District of Columbia									
Florida (LTC Forms Only)							13.3%	13.3%	08/01/2007
Florida (HHC Forms Only)	5.0%	5.0%	11/01/2003	30.0%	30.0%	05/01/2005	16.9%	16.9%	12/01/2008
Georgia	29.0%	29.0%	11/01/2003						
Hawaii	29.0%	29.0%	10/01/2003						
Idaho							29.0%	29.0%	09/01/2007
Illinois	29.0%	29.0%	12/01/2003						
Indiana							29.0%	29.0%	11/01/2007
Iowa	18.0%	18.0%	02/01/2004				9.0%	9.0%	09/01/2007
Kansas	29.0%	29.0%	11/01/2003						
Kentucky	29.0%	29.0%	03/01/2006						
Louisiana	29.0%	29.0%	10/01/2003						
Maine	29.0%	29.0%	10/01/2003						
Massachusetts									
Michigan	29.0%	29.0%	10/01/2003						
Minnesota	29.0%	29.0%	02/01/2004						
Mississippi	16.0%	16.0%	10/01/2003				11.2%	11.2%	03/01/2008
Missouri	29.0%	29.0%	10/01/2003						
Montana	29.0%	29.0%	10/01/2003						
Nebraska	29.0%	29.0%	10/01/2003						
Nevada	29.0%	29.0%	12/01/2004						
New Hampshire	29.0%	29.0%	10/01/2003						
New Jersey	16.0%	16.0%	07/01/2005				11.2%	11.2%	01/01/2008
New Mexico	29.0%	29.0%	10/01/2003						
New York									
North Carolina	16.0%	16.0%	03/01/2004				11.2%	11.2%	09/01/2007
North Dakota	29.0%	29.0%	10/01/2003						
Ohio	16.0%	16.0%	10/01/2003				11.2%	11.2%	08/01/2007
Oklahoma	13.0%	13.0%	05/01/2004				8.5%	8.5%	01/01/2009
Oregon									
Pennsylvania	29.0%	29.0%	02/01/2004						
Puerto Rico	29.0%	29.0%	10/01/2003						
Rhode Island	29.0%	29.0%	11/01/2003						
South Carolina	29.0%	29.0%	11/01/2003						
South Dakota	29.0%	29.0%	10/01/2003						
Tennessee	29.0%	29.0%	10/01/2003						
Texas (Post-Stabilization)									
Texas (Pre-Stabilization)	21.0%	21.0%	05/01/2004				6.6%	6.6%	09/01/2007
Utah							29.0%	29.0%	09/01/2007
Vermont	16.0%	16.0%	05/01/2004						
Virginia							29.0%	29.0%	08/01/2007
Washington	29.0%	29.0%	10/01/2003						
West Virginia	15.0%	15.0%	02/01/2004				12.2%	12.2%	08/01/2007
Wisconsin	29.0%	29.0%	10/01/2003						
Wyoming	29.0%	29.0%	10/01/2003						

Notes:

1. The 2015/2016 rate increases is pending in those states listed as "pending" for both 2015/2016 and the 2016 rate increase is pending in those states listed as "pending" in 2016 only.
2. Minnesota, Nevada and New Jersey approved a series of three rate increases during the 2015/2016 rate increase filing.

Forms HCA, LTA, NHA, LT50 a)

State	2011 Rate Increase			2012 Rate Increase			2015 Rate Increase		
	Non-Lifetime BP	Lifetime BP	Implementation Date	Non-Lifetime BP	Lifetime BP	Implementation Date	Non-Lifetime BP	Lifetime BP	Implementation Date
Alabama	15.0%	30.0%	01/01/2012	0.0%	11.5%	01/01/2013	0.0%	30.0%	08/01/2015
Alaska	15.0%	30.0%	11/01/2011	0.0%	11.5%	11/01/2012			
Arizona	15.0%	30.0%	10/01/2011	0.0%	11.5%	01/01/2013	0.0%	30.0%	06/01/2015
Arkansas	7.5%	15.0%	07/01/2012				7.0%	20.0%	07/01/2015
California (Post-Stabilization)							0.0%	0.0%	
California (Pre-Stabilization)									
Colorado	15.0%	30.0%	12/01/2011	0.0%	11.5%	07/01/2013	0.0%	25.0%	10/01/2015
Connecticut									
Delaware	15.0%	15.0%	01/01/2012				0.0%	25.0%	08/01/2016
District of Columbia									
Florida (LTC Forms Only)	7.4%	14.8%	01/01/2013						pending
Florida (HHC Forms Only)									
Georgia	15.0%	15.0%	12/01/2011	0.0%	15.0%	03/01/2013	0.0%	13.0%	11/01/2015
Hawaii	15.0%	30.0%	11/01/2013						pending
Idaho	15.0%	25.0%	04/01/2012	0.0%	16.0%	08/01/2013	0.0%	30.0%	08/01/2015
Illinois	15.0%	30.0%	12/01/2011	0.0%	11.5%	12/01/2012	0.0%	30.0%	01/01/2017
Indiana	9.0%	9.0%	05/01/2014						
Iowa	15.0%	20.0%	11/01/2011	0.0%	8.3%	11/01/2012	0.0%	18.9%	09/01/2015
Kansas	15.0%	15.0%	01/01/2012	0.0%	12.0%	08/01/2013	0.0%	30.0%	09/01/2016
Kentucky	15.0%	30.0%	01/01/2012	0.0%	11.5%	02/01/2013	0.0%	30.0%	03/01/2016
Louisiana							15.0%	25.0%	02/01/2016
Maine							15.0%	30.0%	08/01/2016
Massachusetts	10.0%	10.0%	03/01/2013						
Michigan	15.0%	30.0%	10/01/2011	0.0%	11.5%	01/01/2013	0.0%	20.0%	07/01/2015
Minnesota							13.9%	15.0%	07/01/2016
Mississippi	15.0%	25.0%	11/01/2011	0.0%	16.0%	02/01/2013	0.0%	25.0%	12/01/2015
Missouri	7.2%	20.4%	11/01/2012				7.3%	30.0%	06/01/2015
Montana	15.0%	30.0%	10/01/2011	0.0%	11.5%	05/01/2013	0.0%	30.0%	01/01/2016
Nebraska	15.0%	30.0%	10/01/2011	0.0%	11.5%	12/01/2012	0.0%	30.0%	06/01/2015
Nevada	15.0%	30.0%	08/01/2012	0.0%	11.5%	08/01/2013	0.0%	14.34%	09/01/2015
New Hampshire	11.5%	11.5%	05/01/2012	3.1%	30.0%	06/01/2013	0.0%	30.0%	08/01/2015
New Jersey	15.0%	30.0%	01/01/2012	0.0%	11.5%	01/01/2013	0.0%	14.3%	09/01/2015
New Mexico							12.0%	15.0%	11/01/2015
New York	5.7%	5.7%	07/01/2013						
North Carolina	15.0%	30.0%	01/01/2012	0.0%	11.5%	10/01/2013	0.0%	22.3%	07/01/2015
North Dakota	15.0%	25.0%	12/01/2011	0.0%	16.0%	02/01/2013	0.0%	15.0%	05/01/2015
Ohio	15.0%	30.0%	10/01/2011	0.0%	11.5%	10/01/2012	0.0%	15.0%	08/01/2015
Oklahoma	15.0%	30.0%	02/01/2012				0.0%	10.0%	05/01/2016
Oregon	7.2%	14.0%	03/01/2012	7.2%	14.0%	03/01/2013	0.0%	30.0%	03/01/2016
Pennsylvania	15.0%	15.0%	01/01/2012	0.0%	15.0%	03/01/2013	0.0%	20.0%	08/01/2015
Puerto Rico	15.0%	30.0%	11/01/2011	0.0%	11.5%	11/01/2012	0.0%	30.0%	05/01/2015
Rhode Island									pending
South Carolina	15.0%	20.0%	12/01/2011	0.0%	20.8%	03/01/2013	0.0%	20.0%	07/01/2015
South Dakota	15.0%	30.0%	10/01/2011	0.0%	11.5%	10/01/2012	0.0%	30.0%	06/01/2015
Tennessee	15.0%	30.0%	04/01/2012	0.0%	11.5%	04/01/2013	0.0%	30.0%	07/01/2015
Texas (Post-Stabilization)							15.0%	30.0%	07/01/2016
Texas (Pre-Stabilization)	15.0%	30.0%	01/01/2012				0.0%	30.0%	01/01/2016
Utah	15.0%	30.0%	02/01/2012				0.0%	30.0%	10/01/2015
Vermont									
Virginia	20.0%	30.0%	05/01/2013	4.1%	20.0%	05/01/2014			
Washington	7.2%	20.4%	05/01/2012	7.2%	20.4%	08/01/2013	0.0%	30.0%	10/01/2015
West Virginia	15.0%	30.0%	01/01/2012	0.0%	11.5%	01/01/2013	0.0%	30.0%	01/01/2016
Wisconsin	15.0%	30.0%	04/01/2012	0.0%	11.5%	04/01/2013	0.0%	30.0%	07/01/2015
Wyoming	15.0%	30.0%	11/01/2011	0.0%	11.5%	11/01/2012	0.0%	30.0%	07/01/2015

Forms HCA, LTA, NHA, LT50 a)

State	2016 Rate Increase			2017 Rate Increase		
	Non-Lifetime BP	Lifetime BP	Implementation Date	Non-Lifetime BP	Lifetime BP	Implementation Date
Alabama	0.0%	15.0%	09/01/2016			
Alaska						
Arizona			pending			
Arkansas	0.0%	20.0%	07/01/2016	0.0%	25.0%	07/01/2017
California (Post-Stabilization)						
California (Pre-Stabilization)	15.0%	20.0%	12/01/2016			
Colorado	0.0%	20.0%	10/01/2016			
Connecticut						
Delaware						
District of Columbia						
Florida (LTC Forms Only)						
Florida (HHC Forms Only)						
Georgia	0.0%	12.0%	11/01/2016			
Hawaii			pending			
Idaho	0.0%	15.0%	08/01/2016			
Illinois	0.0%	15.0%	01/01/2018			
Indiana	5.5%	11.3%	09/01/2016			
Iowa	0.0%	9.3%	09/01/2016			
Kansas	0.0%	29.4%	09/01/2017			
Kentucky			pending			
Louisiana			pending			
Maine	0.0%	28.2%	08/01/2017			
Massachusetts						
Michigan	0.0%	20.0%	07/01/2016	0.0%	5.9%	07/01/2017
Minnesota	0.0%	15.0%	07/01/2017	0.0%	10.4%	07/01/2018
Mississippi			pending			
Missouri	0.0%	25.0%	06/01/2016	0.0%	13.0%	06/01/2017
Montana	0.0%	15.0%	01/01/2017			
Nebraska	0.0%	15.0%	08/01/2016			
Nevada	0.0%	14.34%	09/01/2016	0.0%	14.34%	09/01/2017
New Hampshire	0.0%	15.0%	08/01/2016			
New Jersey	0.0%	14.3%	09/01/2016	0.0%	14.3%	09/01/2017
New Mexico	2.7%	15.0%	12/01/2016			
New York						
North Carolina	0.0%	22.3%	07/01/2016			
North Dakota	0.0%	15.0%	05/01/2016	0.0%	13.0%	05/01/2017
Ohio	0.0%	15.0%	08/01/2016	0.0%	14.1%	08/01/2017
Oklahoma				5.3%	10.0%	05/01/2017
Oregon	0.0%	28.2%	03/01/2017			
Pennsylvania	0.0%	20.0%	08/01/2016			
Puerto Rico	0.0%	15.0%	05/01/2016			
Rhode Island			pending			
South Carolina	0.0%	20.0%	08/01/2016			
South Dakota	0.0%	15.0%	06/01/2016			
Tennessee	0.0%	15.0%	07/01/2016			
Texas (Post-Stabilization)	0.0%	28.2%	07/01/2017			
Texas (Pre-Stabilization)	0.0%	28.2%	01/01/2017			
Utah	0.0%	28.2%	10/01/2016			
Vermont						
Virginia						
Washington	0.0%	15.0%	10/01/2016			
West Virginia	0.0%	15.0%	01/01/2017			
Wisconsin	0.0%	15.0%	09/01/2016			
Wyoming	0.0%	15.0%	07/01/2016			

Lifetime Experience (Nationwide) as of 12/31/2016

Non-Lifetime Benefit Periods

Year	Actual Earned Premium	Incurred Claims Discounted to Incurred Year	Loss Ratio
1997	493,144	0	0.0%
1998	2,879,303	107,337	3.7%
1999	5,164,376	620,403	12.0%
2000	8,538,676	1,279,039	15.0%
2001	13,296,598	2,429,334	18.3%
2002	19,842,983	4,609,517	23.2%
2003	27,859,784	3,660,231	13.1%
2004	31,623,780	5,980,397	18.9%
2005	32,139,063	8,695,837	27.1%
2006	31,220,872	9,349,852	29.9%
2007	30,428,835	12,025,776	39.5%
2008	29,878,522	13,772,969	46.1%
2009	28,550,824	16,512,717	57.8%
2010	27,174,004	18,692,645	68.8%
2011	26,266,426	21,417,195	81.5%
2012	28,063,220	26,255,817	93.6%
2013	27,808,821	25,690,693	92.4%
2014	26,604,501	26,114,538	98.2%
2015	26,057,537	28,307,511	108.6%
2016	26,253,585	36,422,468	138.7%
Total	450,144,855	261,944,277	58.2%
Interest Adjusted	658,562,623	336,060,443	51.0%
	<u>Earned Premium</u>	<u>Incurred Claims</u>	<u>Loss Ratio</u>
2017	21,703,789	34,812,878	160.4%
2018	17,824,063	31,138,638	174.7%
2019	14,542,309	27,746,726	190.8%
2020	11,789,682	24,616,856	208.8%
2021	9,500,877	21,709,505	228.5%
2022	7,614,367	19,035,917	250.0%
2023	6,072,710	16,596,717	273.3%
2024	4,821,639	14,411,880	298.9%
2025	3,812,271	12,458,502	326.8%
2026	3,002,148	10,717,670	357.0%
2027	2,354,969	9,182,025	389.9%
2028	1,840,519	7,831,410	425.5%
2029	1,433,415	6,651,047	464.0%
2030	1,112,749	5,623,832	505.4%
2031	861,414	4,732,609	549.4%
2032	665,331	3,968,700	596.5%
2033	513,043	3,317,849	646.7%
2034	395,240	2,767,865	700.3%
2035	304,441	2,306,445	757.6%
2036	234,207	1,912,773	816.7%
2037	178,213	1,552,414	871.1%
2038	133,201	1,223,319	918.4%
2039	99,053	957,047	966.2%
2040	74,155	754,304	1017.2%
2041	55,757	594,597	1066.4%
2042	41,793	460,015	1100.7%
2043	31,026	346,339	1116.3%
2044	22,911	256,736	1120.6%
2045	16,482	184,993	1122.4%
2046	11,255	126,430	1123.3%
2047	168	2,098	1250.7%
	<u>Earned Premium</u>	<u>Incurred Claims</u>	<u>Loss Ratio</u>
Past Experience @ 4.5%	658,562,623	336,060,443	51.0%
Anticipated Experience @ 4.5%	93,181,379	209,386,760	224.7%
Lifetime Experience @ 4.5%	751,744,002	545,447,202	72.6%

Note: Original pricing loss ratios by duration were only projected for 40 years.

Lifetime Experience (Nationwide) as of 12/31/2016

Lifetime Benefit Period

Year	Actual Earned Premium	Incurred Claims Discounted to Incurred Year	Loss Ratio
1997	379,977	0	0.0%
1998	2,595,131	229,543	8.8%
1999	5,659,399	581,891	10.3%
2000	11,774,776	1,523,173	12.9%
2001	20,610,805	4,549,954	22.1%
2002	30,785,341	5,455,703	17.7%
2003	42,936,703	9,776,788	22.8%
2004	49,106,054	13,208,389	26.9%
2005	49,751,750	16,431,275	33.0%
2006	48,883,761	15,608,074	31.9%
2007	48,409,707	23,508,430	48.6%
2008	48,270,407	32,551,916	67.4%
2009	46,938,351	30,303,535	64.6%
2010	45,464,624	45,035,342	99.1%
2011	43,493,590	48,281,111	111.0%
2012	43,386,845	48,255,691	111.2%
2013	42,794,306	50,643,923	118.3%
2014	41,687,418	43,444,106	104.2%
2015	40,085,198	48,589,055	121.2%
2016	39,615,844	52,045,328	131.4%
Total	702,629,986	490,023,228	69.7%
Interest Adjusted	1,023,051,709	635,064,420	62.1%
	<u>Earned Premium</u>	<u>Incurred Claims</u>	<u>Loss Ratio</u>
2017	32,664,454	52,655,101	161.2%
2018	26,750,417	46,893,480	175.3%
2019	21,760,999	41,628,791	191.3%
2020	17,588,327	36,742,015	208.9%
2021	14,129,778	32,244,153	228.2%
2022	11,288,739	28,154,116	249.4%
2023	8,974,663	24,446,983	272.4%
2024	7,102,812	21,152,174	297.8%
2025	5,597,529	18,219,957	325.5%
2026	4,393,501	15,610,108	355.3%
2027	3,434,988	13,320,884	387.8%
2028	2,675,699	11,315,530	422.9%
2029	2,076,936	9,572,600	460.9%
2030	1,606,986	8,060,642	501.6%
2031	1,239,962	6,757,792	545.0%
2032	954,686	5,643,149	591.1%
2033	733,901	4,698,433	640.2%
2034	563,755	3,903,438	692.4%
2035	433,078	3,238,993	747.9%
2036	332,581	2,678,609	805.4%
2037	253,804	2,182,716	860.0%
2038	191,476	1,743,390	910.5%
2039	143,957	1,383,566	961.1%
2040	108,642	1,099,999	1012.5%
2041	82,110	869,875	1059.4%
2042	61,887	675,068	1090.8%
2043	46,334	510,834	1102.5%
2044	34,734	383,254	1103.4%
2045	25,344	280,030	1104.9%
2046	17,289	191,317	1106.6%
2047	10,639	117,521	1104.6%
	<u>Earned Premium</u>	<u>Incurred Claims</u>	<u>Loss Ratio</u>
Past Experience @ 4.5%	1,023,051,709	635,064,420	62.1%
Anticipated Experience @ 4.5%	138,912,107	310,794,525	223.7%
Lifetime Experience @ 4.5%	1,161,963,816	945,858,944	81.4%

Note: Original pricing loss ratios by duration were only projected for 40 years.

Lifetime Experience (Nationwide) as of 12/31/2016

All Benefit Periods

Year	Actual Earned Premium	Incurred Claims Discounted to Incurred Year	Loss Ratio
1997	873,120	0	0.0%
1998	5,474,434	336,880	6.2%
1999	10,823,775	1,202,294	11.1%
2000	20,313,452	2,802,212	13.8%
2001	33,907,403	6,979,288	20.6%
2002	50,628,324	10,065,220	19.9%
2003	70,796,487	13,437,019	19.0%
2004	80,729,833	19,188,786	23.8%
2005	81,890,813	25,127,112	30.7%
2006	80,104,632	24,957,926	31.2%
2007	78,838,542	35,534,206	45.1%
2008	78,148,930	46,324,886	59.3%
2009	75,489,176	46,816,251	62.0%
2010	72,638,627	63,727,987	87.7%
2011	69,760,016	69,698,305	99.9%
2012	71,450,065	74,511,509	104.3%
2013	70,603,127	76,334,616	108.1%
2014	68,291,920	69,558,645	101.9%
2015	66,142,736	76,896,565	116.3%
2016	65,869,429	88,467,797	134.3%
Total	1,152,774,842	751,967,505	65.2%
Interest Adjusted	1,681,614,332	971,124,863	57.7%
	<u>Earned Premium</u>	<u>Incurred Claims</u>	<u>Loss Ratio</u>
2017	54,368,243	87,467,978	160.9%
2018	44,574,480	78,032,119	175.1%
2019	36,303,308	69,375,516	191.1%
2020	29,378,009	61,358,871	208.9%
2021	23,630,655	53,953,658	228.3%
2022	18,903,106	47,190,033	249.6%
2023	15,047,373	41,043,700	272.8%
2024	11,924,451	35,564,054	298.2%
2025	9,409,800	30,678,459	326.0%
2026	7,395,649	26,327,778	356.0%
2027	5,789,957	22,502,909	388.7%
2028	4,516,218	19,146,940	424.0%
2029	3,510,352	16,223,646	462.2%
2030	2,719,735	13,684,474	503.2%
2031	2,101,376	11,490,401	546.8%
2032	1,620,017	9,611,849	593.3%
2033	1,246,944	8,016,282	642.9%
2034	958,995	6,671,303	695.7%
2035	737,519	5,545,439	751.9%
2036	566,789	4,591,382	810.1%
2037	432,017	3,735,130	864.6%
2038	324,677	2,966,709	913.7%
2039	243,009	2,340,613	963.2%
2040	182,797	1,854,303	1014.4%
2041	137,868	1,464,471	1062.2%
2042	103,680	1,135,082	1094.8%
2043	77,360	857,173	1108.0%
2044	57,645	639,990	1110.2%
2045	41,826	465,023	1111.8%
2046	28,544	317,748	1113.2%
2047	10,807	119,619	1106.9%
	<u>Earned Premium</u>	<u>Incurred Claims</u>	<u>Loss Ratio</u>
Past Experience @ 4.5%	1,681,614,332	971,124,863	57.7%
Anticipated Experience @ 4.5%	227,041,269	508,857,966	224.1%
Lifetime Experience @ 4.5%	1,908,655,602	1,479,982,828	77.5%

Note: Original pricing loss ratios by duration were only projected for 40 years.

Morbidity - Actual to Expected Analysis*Expected assumption utilizes Milliman 2014 Guidelines with adjustments*

Duration	Active	Actual	Revised Expected	A/E: Updated
	Exposures	Incurred Claims	Incurred Claims	
1	68,026	5,854,901	12,315,803	48%
2	60,710	10,444,858	19,120,926	55%
3	56,329	20,137,819	23,604,981	85%
4	53,231	27,405,130	27,678,734	99%
5	50,780	30,707,955	33,003,648	93%
6	48,843	33,781,549	34,755,447	97%
7	47,074	37,040,260	40,432,176	92%
8	45,492	44,161,269	45,359,851	97%
9	43,806	56,030,078	50,722,123	110%
10	41,988	55,972,514	55,053,699	102%
11	38,839	63,460,790	58,552,482	108%
12	32,829	60,820,621	57,926,684	105%
13	22,786	50,902,283	47,766,088	107%
14	14,819	36,332,026	34,699,842	105%
15	8,561	24,189,452	21,860,906	111%
16	4,221	8,184,722	10,893,678	75%
17	1,844	5,660,382	4,831,179	117%
18	307	627,490	926,440	68%
Grand Total	640,486	571,714,101	579,504,688	99%

Actual to Revised Analysis - Mortality Rates

Duration	Total Lives	Actual Deaths	Revised Expected	Actual to Expected
1	66,120	227	311	73%
2	60,280	359	349	103%
3	56,098	410	394	104%
4	53,205	508	446	114%
5	50,911	515	504	102%
6	49,148	566	571	99%
7	47,584	619	690	90%
8	46,216	753	819	92%
9	44,762	763	953	80%
10	43,358	885	1,042	85%
11	41,829	940	1,075	87%
12	40,192	1036	1,104	94%
13	36,935	1024	1,096	93%
14	30,576	985	999	99%
15	20,673	707	740	96%
16	13,407	500	518	97%
17	7,555	333	316	105%
18	3,622	161	162	99%
19	1,511	81	74	109%
20	160	6	9	70%
Grand Total	714,142	11,378	12,173	93%

Lapse Rates - Actual to Expected Analysis*Duration 8+***Updated Expected**

			Attained Age						
			0 - 49	50 - 59	60 - 64	65 - 69	70 - 74	75 - 79	80 - 84
Lifetime BP	Married	Inflation	0.6%	0.6%	0.6%	0.5%	0.4%	0.4%	0.5%
		No Inflation	1.1%	1.1%	1.0%	0.8%	0.8%	0.8%	0.8%
	Single	Inflation	1.1%	1.1%	1.0%	0.8%	0.8%	0.8%	0.8%
		No Inflation	1.9%	2.0%	1.8%	1.5%	1.3%	1.4%	1.5%
Non-lifetime BP	Married	Inflation	1.1%	1.1%	1.0%	0.8%	0.8%	0.8%	0.8%
		No Inflation	1.8%	1.8%	1.7%	1.4%	1.3%	1.3%	1.5%
	Single	Inflation	1.8%	1.9%	1.7%	1.4%	1.3%	1.3%	1.4%
		No Inflation	3.1%	3.3%	2.9%	2.4%	2.3%	2.4%	2.9%

Actual

			Attained Age						
			0 - 49	50 - 59	60 - 64	65 - 69	70 - 74	75 - 79	80 - 84
Lifetime BP	Married	Inflation	2.1%	0.9%	0.4%	0.4%	0.5%	0.7%	0.6%
		No Inflation	3.9%	1.1%	0.9%	0.8%	0.9%	0.9%	1.0%
	Single	Inflation	0.5%	1.6%	1.0%	1.1%	0.9%	0.9%	0.9%
		No Inflation	4.0%	2.4%	2.4%	1.7%	1.7%	1.8%	1.7%
Non-lifetime BP	Married	Inflation	0.0%	0.9%	0.6%	0.3%	0.4%	0.7%	1.2%
		No Inflation	2.7%	1.3%	0.7%	0.7%	0.8%	1.2%	1.6%
	Single	Inflation	0.0%	1.1%	1.0%	0.5%	0.6%	1.1%	1.8%
		No Inflation	4.7%	2.2%	1.0%	1.2%	1.3%	1.6%	2.6%

A/E: Updated

			Attained Age						
			0 - 49	50 - 59	60 - 64	65 - 69	70 - 74	75 - 79	80 - 84
Lifetime BP	Married	Inflation	335%	143%	71%	85%	105%	149%	134%
		No Inflation	350%	97%	87%	96%	115%	115%	127%
	Single	Inflation	44%	142%	99%	130%	111%	115%	112%
		No Inflation	206%	123%	135%	115%	124%	130%	112%
Non-lifetime BP	Married	Inflation	0%	83%	60%	43%	53%	86%	156%
		No Inflation	147%	69%	45%	51%	57%	91%	104%
	Single	Inflation	0%	58%	60%	36%	49%	85%	123%
		No Inflation	149%	67%	34%	52%	55%	67%	89%

Lifetime Experience (Nationwide) as of 12/31/2016

Non-Lifetime Benefit Periods

Year	Earned Premium	Incurred Claims Discounted to Incurred Year	Loss Ratio
1997	493,144	82,217	16.7%
1998	2,750,622	549,297	20.0%
1999	5,437,853	1,223,821	22.5%
2000	9,430,445	2,080,101	22.1%
2001	14,587,272	3,215,188	22.0%
2002	21,533,521	4,691,356	21.8%
2003	29,645,440	6,464,925	21.8%
2004	31,379,779	7,921,784	25.2%
2005	29,783,548	9,092,779	30.5%
2006	27,246,800	10,150,818	37.3%
2007	24,881,209	11,016,715	44.3%
2008	22,695,282	11,684,054	51.5%
2009	20,591,687	12,297,827	59.7%
2010	18,499,918	12,768,176	69.0%
2011	16,449,985	13,035,917	79.2%
2012	14,460,237	13,189,139	91.2%
2013	12,565,832	12,994,135	103.4%
2014	10,942,091	12,566,861	114.8%
2015	9,528,969	12,234,777	128.4%
2016	8,272,491	11,951,841	144.5%
Total	331,176,120	169,211,728	51.1%
Interest Adjusted	517,173,535	235,252,381	45.5%
	<u>Earned Premium</u>	<u>Incurred Claims</u>	<u>Loss Ratio</u>
2017	7,148,136	11,652,322	163.0%
2018	6,146,544	11,307,720	184.0%
2019	5,259,818	10,889,214	207.0%
2020	4,479,248	10,437,592	233.0%
2021	3,795,534	9,960,384	262.4%
2022	3,199,865	9,452,476	295.4%
2023	2,683,926	8,907,061	331.9%
2024	2,239,610	8,342,438	372.5%
2025	1,859,022	7,786,329	418.8%
2026	1,534,722	7,233,231	471.3%
2027	1,259,992	6,677,412	530.0%
2028	1,028,753	6,113,871	594.3%
2029	835,441	5,533,481	662.3%
2030	674,844	4,973,293	737.0%
2031	542,190	4,443,020	819.5%
2032	433,283	3,948,285	911.2%
2033	344,350	3,480,667	1010.8%
2034	272,255	3,034,202	1114.5%
2035	214,161	2,625,063	1225.7%
2036	167,621	2,261,463	1349.2%
2037	130,536	1,941,073	1487.0%
2038	101,149	1,657,469	1638.6%
2039	77,995	1,401,353	1796.7%
2040	59,857	1,171,883	1957.8%
2041	45,726	972,479	2126.8%
2042	34,788	800,521	2301.1%
2043	26,354	652,067	2474.3%
2044	19,883	524,124	2636.0%
2045	14,942	416,527	2787.7%
2046	11,189	328,906	2939.7%
2047	0	0	0.0%
	<u>Earned Premium</u>	<u>Incurred Claims</u>	<u>Loss Ratio</u>
Past Experience @ 4.5%	517,173,535	235,252,381	45.5%
Anticipated Experience @ 4.5%	36,261,072	105,988,946	292.3%
Lifetime Experience @ 4.5%	553,434,607	341,241,327	61.7%

Lifetime Experience (Nationwide) as of 12/31/2016

Lifetime Benefit Period

Year	Earned Premium	Incurred Claims Discounted to Incurred Year	Loss Ratio
1997	379,977	55,530	14.6%
1998	2,387,229	396,938	16.6%
1999	5,657,335	994,751	17.6%
2000	11,886,222	2,058,796	17.3%
2001	20,215,445	3,588,687	17.8%
2002	29,456,396	5,412,537	18.4%
2003	40,248,915	7,604,397	18.9%
2004	42,402,928	9,400,986	22.2%
2005	39,896,637	10,868,478	27.2%
2006	36,525,854	12,234,098	33.5%
2007	33,574,030	13,427,888	40.0%
2008	30,909,679	14,444,765	46.7%
2009	28,376,498	15,520,236	54.7%
2010	25,852,603	16,437,201	63.6%
2011	23,367,428	17,102,763	73.2%
2012	20,955,210	17,706,186	84.5%
2013	18,619,734	17,889,919	96.1%
2014	16,588,770	17,834,411	107.5%
2015	14,781,352	17,908,721	121.2%
2016	13,137,332	18,037,846	137.3%
Total	427,300,890	182,978,567	42.8%
Interest Adjusted	660,874,683	268,381,146	40.6%
	<u>Earned Premium</u>	<u>Incurred Claims</u>	<u>Loss Ratio</u>
2017	11,630,443	18,103,872	155.7%
2018	10,254,427	18,095,318	176.5%
2019	9,003,826	17,978,657	199.7%
2020	7,872,550	17,795,912	226.1%
2021	6,853,748	17,548,000	256.0%
2022	5,940,309	17,236,753	290.2%
2023	5,125,433	16,843,839	328.6%
2024	4,402,160	16,402,368	372.6%
2025	3,763,100	15,935,270	423.5%
2026	3,201,134	15,420,222	481.7%
2027	2,709,706	14,830,261	547.3%
2028	2,282,352	14,152,219	620.1%
2029	1,912,960	13,370,193	698.9%
2030	1,595,390	12,555,907	787.0%
2031	1,323,755	11,716,451	885.1%
2032	1,092,662	10,855,691	993.5%
2033	897,272	9,966,957	1110.8%
2034	733,145	9,045,844	1233.8%
2035	596,018	8,149,230	1367.3%
2036	482,006	7,296,198	1513.7%
2037	387,677	6,484,706	1672.7%
2038	310,217	5,717,170	1843.0%
2039	247,035	4,981,420	2016.5%
2040	195,797	4,308,038	2200.3%
2041	154,456	3,700,050	2395.5%
2042	121,163	3,145,265	2595.9%
2043	94,585	2,643,967	2795.3%
2044	73,505	2,196,303	2988.0%
2045	56,907	1,811,106	3182.6%
2046	43,865	1,486,351	3388.5%
2047	33,599	1,210,613	3603.1%
	<u>Earned Premium</u>	<u>Incurred Claims</u>	<u>Loss Ratio</u>
Past Experience @ 4.5%	660,874,683	268,381,146	40.6%
Anticipated Experience @ 4.5%	65,965,396	212,621,714	322.3%
Lifetime Experience @ 4.5%	726,840,079	481,002,860	66.2%

Lifetime Experience (Nationwide) as of 12/31/2016

All Benefit Periods

Year	Earned Premium	Incurred Claims Discounted to Incurred Year	Loss Ratio
1997	873,120	137,747	15.8%
1998	5,137,851	946,235	18.4%
1999	11,095,188	2,218,572	20.0%
2000	21,316,666	4,138,897	19.4%
2001	34,802,717	6,803,875	19.5%
2002	50,989,916	10,103,893	19.8%
2003	69,894,355	14,069,323	20.1%
2004	73,782,707	17,322,771	23.5%
2005	69,680,184	19,961,257	28.6%
2006	63,772,654	22,384,916	35.1%
2007	58,455,239	24,444,603	41.8%
2008	53,604,961	26,128,819	48.7%
2009	48,968,185	27,818,062	56.8%
2010	44,352,520	29,205,377	65.8%
2011	39,817,413	30,138,680	75.7%
2012	35,415,447	30,895,325	87.2%
2013	31,185,566	30,884,054	99.0%
2014	27,530,861	30,401,272	110.4%
2015	24,310,320	30,143,498	124.0%
2016	21,409,823	29,989,688	140.1%
Total	764,985,871	358,147,175	46.8%
Interest Adjusted	1,178,048,218	503,633,527	42.8%
	<u>Earned Premium</u>	<u>Incurred Claims</u>	<u>Loss Ratio</u>
2017	18,778,579	29,756,194	158.5%
2018	16,400,972	29,403,038	179.3%
2019	14,263,645	28,867,871	202.4%
2020	12,351,798	28,233,504	228.6%
2021	10,649,282	27,508,384	258.3%
2022	9,140,174	26,689,229	292.0%
2023	7,809,359	25,750,900	329.7%
2024	6,641,771	24,744,805	372.6%
2025	5,622,122	23,721,599	421.9%
2026	4,735,855	22,653,453	478.3%
2027	3,969,698	21,507,673	541.8%
2028	3,311,106	20,266,090	612.1%
2029	2,748,400	18,903,674	687.8%
2030	2,270,235	17,529,199	772.1%
2031	1,865,945	16,159,471	866.0%
2032	1,525,944	14,803,975	970.2%
2033	1,241,622	13,447,624	1083.1%
2034	1,005,400	12,080,046	1201.5%
2035	810,180	10,774,293	1329.9%
2036	649,627	9,557,661	1471.3%
2037	518,213	8,425,779	1625.9%
2038	411,366	7,374,639	1792.7%
2039	325,030	6,382,773	1963.7%
2040	255,654	5,479,921	2143.5%
2041	200,182	4,672,530	2334.1%
2042	155,951	3,945,786	2530.1%
2043	120,939	3,296,035	2725.4%
2044	93,388	2,720,427	2913.0%
2045	71,848	2,227,633	3100.5%
2046	55,054	1,815,257	3297.3%
2047	33,599	1,210,613	3603.1%
	<u>Earned Premium</u>	<u>Incurred Claims</u>	<u>Loss Ratio</u>
Past Experience @ 4.5%	1,178,048,218	503,633,527	42.8%
Anticipated Experience @ 4.5%	102,226,468	318,610,660	311.7%
Lifetime Experience @ 4.5%	1,280,274,686	822,244,186	64.2%

Lifetime Experience (Nationwide) as of 12/31/2016
Premiums at the Virginia Rate Level
Non-Lifetime Benefit Periods - Pre-Rate Stabilization

	Virginia Rate Level	Incurred Claims				
Year	Earned Premium	Discounted to Incurred Year	Loss Ratio			
1997	493,144	0	0.0%			
1998	2,879,303	107,337	3.7%			
1999	5,164,376	620,403	12.0%			
2000	8,538,676	1,279,039	15.0%			
2001	13,291,034	2,429,334	18.3%			
2002	19,718,256	4,609,517	23.4%			
2003	26,161,646	3,660,231	14.0%			
2004	26,346,243	5,771,160	21.9%			
2005	26,128,236	8,629,972	33.0%			
2006	25,202,065	8,814,082	35.0%			
2007	26,556,561	11,678,078	44.0%			
2008	28,547,868	13,342,930	46.7%			
2009	27,170,713	15,858,480	58.4%			
2010	25,819,457	17,408,466	67.4%			
2011	24,490,069	20,794,851	84.9%			
2012	24,453,662	25,050,446	102.4%			
2013	26,798,097	24,236,077	90.4%			
2014	27,611,723	24,831,729	89.9%			
2015	27,318,093	27,001,863	98.8%			
2016	27,148,364	34,148,099	125.8%			
Total	419,837,584	250,272,094	59.6%			
Interest Adjusted	610,566,290	321,853,927	52.7%			
	Earned Premium w/o Increase	Earned Premium w/Increase	Incurred Claims	Loss Ratio w/o Increase	Loss Ratio w/Increase	
	2017	24,608,891	24,608,891	27,636,882	112.3%	112.3%
	2018	22,304,600	22,304,600	28,416,518	127.4%	127.4%
	2019	20,192,418	20,192,418	29,611,006	146.6%	146.6%
	2020	18,220,232	18,220,232	30,735,018	168.7%	168.7%
	2021	16,397,100	16,397,100	31,622,766	192.9%	192.9%
	2022	14,682,828	14,682,828	32,784,022	223.3%	223.3%
	2023	13,096,433	13,096,433	32,382,296	247.3%	247.3%
	2024	11,633,024	11,633,024	31,821,503	273.5%	273.5%
	2025	10,297,614	10,297,614	32,100,913	311.7%	311.7%
	2026	9,082,829	9,082,829	32,393,466	356.6%	356.6%
	2027	7,978,650	7,978,650	32,599,205	408.6%	408.6%
	2028	6,981,193	6,981,193	32,613,782	467.2%	467.2%
	2029	6,084,175	6,084,175	32,495,597	534.1%	534.1%
	2030	5,280,137	5,280,137	32,191,361	609.7%	609.7%
	2031	4,563,230	4,563,230	31,791,974	696.7%	696.7%
	2032	3,924,942	3,924,942	31,314,292	797.8%	797.8%
	2033	3,364,633	3,364,633	30,248,034	899.0%	899.0%
	2034	2,874,456	2,874,456	28,846,686	1003.6%	1003.6%
	2035	2,445,247	2,445,247	27,601,218	1128.8%	1128.8%
	2036	2,070,165	2,070,165	26,458,888	1278.1%	1278.1%
	2037	1,743,703	1,743,703	25,380,908	1455.6%	1455.6%
	2038	1,461,171	1,461,171	24,177,026	1654.6%	1654.6%
	2039	1,217,867	1,217,867	22,768,954	1869.6%	1869.6%
	2040	1,009,103	1,009,103	21,186,398	2099.5%	2099.5%
	2041	831,844	831,844	19,606,995	2357.1%	2357.1%
	2042	681,564	681,564	18,018,887	2643.8%	2643.8%
	2043	555,308	555,308	16,419,637	2956.9%	2956.9%
	2044	449,688	449,688	14,741,503	3278.2%	3278.2%
	2045	361,580	361,580	13,110,603	3625.9%	3625.9%
	2046	289,416	289,416	11,561,286	3994.7%	3994.7%
	2047	230,535	230,535	10,149,439	4402.6%	4402.6%
	2048	182,496	182,496	8,853,963	4851.6%	4851.6%
	2049	143,283	143,283	7,641,022	5332.8%	5332.8%
	2050	111,489	111,489	6,515,510	5844.1%	5844.1%
	2051	86,279	86,279	5,514,288	6391.2%	6391.2%
	2052	66,559	66,559	4,640,354	6971.8%	6971.8%
	2053	51,023	51,023	3,883,863	7612.0%	7612.0%
	2054	38,698	38,698	3,209,977	8295.0%	8295.0%
	2055	28,892	28,892	2,619,423	9066.3%	9066.3%
2056	21,376	21,376	2,113,521	9887.2%	9887.2%	
2057	15,823	15,823	1,699,948	10743.4%	10743.4%	
2058	11,684	11,684	1,365,341	11685.6%	11685.6%	
2059	8,522	8,522	1,085,897	12741.6%	12741.6%	
2060	6,066	6,066	852,813	14059.9%	14059.9%	
2061	4,233	4,233	655,912	15495.6%	15495.6%	
2062	2,990	2,990	499,460	16705.3%	16705.3%	
2063	2,148	2,148	386,898	18010.2%	18010.2%	
2064	1,532	1,532	299,650	19561.4%	19561.4%	
2065	1,071	1,071	228,822	21356.9%	21356.9%	
2066	728	728	169,082	23211.7%	23211.7%	
2067	505	505	123,691	24479.6%	24479.6%	
2068	339	339	91,921	27097.8%	27097.8%	
2069	137	137	67,772	49644.0%	49644.0%	
2070	10	10	48,386	491238.8%	491238.8%	
2071	0	0	33,070	7810123.4%	7810123.4%	
2072	0	0	4	6232.7%	6232.7%	
2073	0	0	0	0.0%	0.0%	
	Earned Premium w/o Increase	Earned Premium With Increase	Incurred Claims	Loss Ratio w/o Increase	Loss Ratio With Increase	
	Past Experience @ 4.5%	610,566,290	610,566,290	321,853,927	52.7%	52.7%
	Anticipated Experience @ 4.5%	163,182,624	163,182,624	487,884,646	299.0%	299.0%
	Lifetime Experience @ 4.5%	773,748,913	773,748,913	809,738,573	104.7%	104.7%

Lifetime Experience (Nationwide) as of 12/31/2016
Premiums at the Virginia Rate Level
Lifetime Benefit Period - Pre-Rate Stabilization

	Virginia Rate Level	Incurred Claims			
Year	Earned Premium	Discounted to Incurred Year		Loss Ratio	
1997	379,977	0		0.0%	
1998	2,595,131	229,543		8.8%	
1999	5,659,399	581,891		10.3%	
2000	11,774,776	1,523,173		12.9%	
2001	20,596,912	4,549,954		22.1%	
2002	30,490,543	5,455,216		17.9%	
2003	39,924,279	9,776,788		24.5%	
2004	40,127,736	13,187,176		32.9%	
2005	39,955,932	16,226,697		40.6%	
2006	39,035,372	15,302,440		39.2%	
2007	42,117,903	21,894,757		52.0%	
2008	46,531,336	31,010,819		66.6%	
2009	45,138,622	29,943,118		66.3%	
2010	43,662,093	43,806,976		100.3%	
2011	40,391,808	46,122,333		114.2%	
2012	35,250,708	46,658,968		132.4%	
2013	38,283,642	48,844,490		127.6%	
2014	44,695,854	40,198,060		89.9%	
2015	42,689,915	45,730,248		107.1%	
2016	37,209,476	48,433,867		130.2%	
Total	646,511,416	469,476,515		72.6%	
Interest Adjusted	937,117,727	610,208,562		65.1%	
	Earned Premium	Earned Premium		Loss Ratio	Loss Ratio
	w/o Increase	w/Increase	Incurred Claims	w/o Increase	w/Increase
2017	34,439,921	37,883,913	42,193,074	122.5%	111.4%
2018	31,818,616	43,432,411	44,812,166	140.8%	103.2%
2019	29,326,376	43,842,932	48,419,978	165.1%	110.4%
2020	26,927,980	40,257,330	52,866,944	196.3%	131.3%
2021	24,646,112	36,845,937	56,232,539	228.2%	152.6%
2022	22,450,152	33,562,977	60,253,140	268.4%	179.5%
2023	20,396,862	30,493,309	61,370,608	300.9%	201.3%
2024	18,478,722	27,625,689	61,808,534	334.5%	223.7%
2025	16,701,047	24,968,065	64,696,069	387.4%	259.1%
2026	15,051,620	22,502,173	67,610,519	449.2%	300.5%
2027	13,519,982	20,212,372	70,353,930	520.4%	348.1%
2028	12,105,426	18,097,612	72,742,987	600.9%	401.9%
2029	10,799,892	16,145,838	74,978,474	694.3%	464.4%
2030	9,593,278	14,341,951	77,268,721	805.4%	538.8%
2031	8,486,579	12,687,436	78,840,270	929.0%	621.4%
2032	7,466,748	11,162,789	80,346,493	1076.1%	719.8%
2033	6,547,344	9,788,279	80,215,409	1225.2%	819.5%
2034	5,726,083	8,560,494	78,807,595	1376.3%	920.6%
2035	4,985,822	7,453,804	78,067,955	1565.8%	1047.4%
2036	4,318,998	6,456,903	77,388,940	1791.8%	1198.5%
2037	3,722,180	5,564,659	76,560,536	2056.9%	1375.8%
2038	3,192,356	4,772,572	75,029,404	2350.3%	1572.1%
2039	2,724,507	4,073,138	72,577,912	2663.9%	1781.9%
2040	2,311,252	3,455,321	69,572,431	3010.2%	2013.5%
2041	1,950,074	2,915,360	66,153,320	3392.3%	2269.1%
2042	1,633,809	2,442,545	62,671,060	3835.9%	2565.8%
2043	1,360,856	2,034,479	58,591,257	4305.5%	2879.9%
2044	1,130,052	1,689,428	53,748,501	4756.3%	3181.5%
2045	932,620	1,394,267	49,051,209	5259.5%	3518.1%
2046	765,718	1,144,748	44,458,757	5806.2%	3883.7%
2047	625,733	935,471	40,130,452	6413.3%	4289.9%
2048	508,453	760,137	35,943,278	7069.1%	4728.5%
2049	410,984	614,421	31,818,773	7742.1%	5178.7%
2050	329,729	492,945	27,874,097	8453.6%	5654.6%
2051	262,955	393,118	24,202,988	9204.2%	6156.7%
2052	208,579	311,825	20,991,863	10064.2%	6731.9%
2053	163,872	244,989	18,033,685	11004.7%	7361.0%
2054	128,209	191,673	15,203,525	11858.4%	7932.0%
2055	99,452	148,681	12,685,072	12754.9%	8531.7%
2056	76,546	114,436	10,457,274	13661.5%	9138.1%
2057	58,773	87,865	8,628,492	14681.1%	9820.1%
2058	45,116	67,448	7,107,878	15754.7%	10538.3%
2059	34,238	51,186	5,783,164	16891.0%	11298.3%
2060	25,708	38,434	4,598,691	17887.9%	11965.2%
2061	19,121	28,585	3,572,283	18682.9%	12497.0%
2062	14,287	21,360	2,797,678	19581.5%	13098.0%
2063	10,696	15,991	2,215,977	20716.8%	13857.4%
2064	7,896	11,805	1,739,406	22027.6%	14734.2%
2065	5,736	8,575	1,337,719	23323.0%	15600.7%
2066	4,111	6,145	990,079	24085.8%	16110.9%
2067	2,917	4,361	735,316	25205.7%	16860.0%
2068	1,922	2,874	552,194	28727.1%	19215.5%
2069	1,151	1,720	415,108	36078.4%	24132.7%
2070	6	9	298,193	4881698.3%	3265350.1%
2071	0	0	761	724485.2%	484605.5%
2072	0	0	6	15332.9%	10256.1%
2073	0	0	1	0.0%	0.0%
	Earned Premium	Earned Premium		Loss Ratio	Loss Ratio
	w/o Increase	With Increase	Incurred Claims	w/o Increase	With Increase
Past Experience @ 4.5%	937,117,727	937,117,727	610,208,562	65.1%	65.1%
Anticipated Experience @ 4.5%	253,825,795	362,289,789	1,118,906,233	440.8%	308.8%
Lifetime Experience @ 4.5%	1,190,943,521	1,299,407,516	1,729,114,794	145.2%	133.1%

Lifetime Experience (Nationwide) as of 12/31/2016
Premiums at the Virginia Rate Level
All Benefit Periods - Pre-Rate Stabilization

Year	Virginia Rate Level Earned Premium	Incurring Claims Discounted to Incurred Year	Loss Ratio
1997	873,120	0	0.0%
1998	5,474,434	336,880	6.2%
1999	10,823,775	1,202,294	11.1%
2000	20,313,452	2,802,212	13.8%
2001	33,887,945	6,979,288	20.6%
2002	50,208,799	10,064,733	20.0%
2003	66,085,925	13,437,019	20.3%
2004	66,473,979	18,958,336	28.5%
2005	66,084,168	24,856,669	37.6%
2006	64,237,437	24,116,522	37.5%
2007	68,674,464	33,572,835	48.9%
2008	75,079,205	44,353,749	59.1%
2009	72,309,335	45,801,598	63.3%
2010	69,481,550	61,215,442	88.1%
2011	64,881,877	66,917,183	103.1%
2012	59,704,370	71,709,414	120.1%
2013	65,081,739	73,080,567	112.3%
2014	72,307,577	65,029,789	89.9%
2015	70,008,008	72,732,111	103.9%
2016	64,357,840	82,581,966	128.3%
Total	1,066,349,000	719,748,608	67.5%
Interest Adjusted	1,547,684,016	932,062,488	60.2%

	Earned Premium w/o Increase	Earned Premium w/Increase	Incurring Claims	Loss Ratio w/o Increase	Loss Ratio w/Increase
2017	59,048,812	62,492,804	69,829,956	118.3%	111.7%
2018	54,123,216	65,737,011	73,228,684	135.3%	111.4%
2019	49,518,794	64,035,350	78,030,984	157.6%	121.9%
2020	45,148,212	58,477,562	83,601,961	185.2%	143.0%
2021	41,043,211	53,243,036	87,855,305	214.1%	165.0%
2022	37,132,979	48,245,804	93,037,162	250.6%	192.8%
2023	33,493,295	43,589,742	93,752,904	279.9%	215.1%
2024	30,111,746	39,258,713	93,630,038	310.9%	238.5%
2025	26,998,661	35,265,679	96,796,982	358.5%	274.5%
2026	24,134,450	31,585,002	100,003,985	414.4%	316.6%
2027	21,498,632	28,191,022	102,953,135	478.9%	365.2%
2028	19,086,620	25,078,806	105,356,769	552.0%	420.1%
2029	16,884,067	22,230,013	107,474,071	636.5%	483.5%
2030	14,873,416	19,622,088	109,460,081	735.9%	557.8%
2031	13,049,809	17,250,665	110,632,245	847.8%	641.3%
2032	11,391,690	15,087,731	111,660,785	980.2%	740.1%
2033	9,911,976	13,152,912	110,463,443	1114.4%	839.8%
2034	8,600,538	11,434,949	107,654,281	1251.7%	941.4%
2035	7,431,069	9,899,051	105,669,173	1422.0%	1067.5%
2036	6,389,164	8,527,068	103,847,828	1625.4%	1217.9%
2037	5,465,883	7,308,362	101,941,444	1865.0%	1394.9%
2038	4,653,526	6,233,742	99,206,430	2131.9%	1591.4%
2039	3,942,374	5,291,005	95,346,866	2418.5%	1802.1%
2040	3,320,355	4,464,424	90,758,829	2733.4%	2032.9%
2041	2,781,917	3,747,204	85,760,315	3082.8%	2288.6%
2042	2,315,373	3,124,109	80,689,947	3485.0%	2582.8%
2043	1,916,164	2,589,788	75,010,894	3914.6%	2896.4%
2044	1,579,740	2,139,116	68,490,005	4335.5%	3201.8%
2045	1,294,201	1,755,848	62,161,813	4803.1%	3540.3%
2046	1,055,134	1,434,164	56,020,043	5309.3%	3906.1%
2047	856,268	1,166,006	50,279,891	5872.0%	4312.1%
2048	690,949	942,633	44,797,242	6483.4%	4752.4%
2049	554,267	757,704	39,459,796	7119.3%	5207.8%
2050	441,218	604,434	34,389,607	7794.3%	5689.6%
2051	349,235	479,398	29,717,276	8509.3%	6198.9%
2052	275,138	378,384	25,632,216	9316.1%	6774.1%
2053	214,895	296,012	21,917,548	10199.2%	7404.3%
2054	166,907	230,371	18,413,502	11032.2%	7993.0%
2055	128,344	177,573	15,304,495	11924.5%	8618.7%
2056	97,922	135,812	12,570,794	12837.6%	9256.0%
2057	74,596	103,688	10,328,440	13845.8%	9961.0%
2058	56,800	79,132	8,473,219	14917.7%	10707.7%
2059	42,761	59,709	6,869,061	16064.0%	11504.3%
2060	31,774	44,499	5,451,504	17157.2%	12250.7%
2061	23,353	32,818	4,228,194	18105.2%	12883.7%
2062	17,277	24,349	3,297,138	19083.8%	13540.9%
2063	12,845	18,139	2,602,875	20264.2%	14349.2%
2064	9,428	13,337	2,039,056	21626.9%	15288.6%
2065	6,807	9,646	1,566,540	23013.6%	16240.0%
2066	4,839	6,874	1,159,161	23954.2%	16863.4%
2067	3,423	4,867	859,007	25098.5%	17651.1%
2068	2,261	3,213	644,115	28482.7%	20047.7%
2069	1,287	1,857	482,879	37517.2%	26008.5%
2070	16	19	346,579	2171790.5%	1825842.7%
2071	1	1	33,832	6401040.7%	5827402.9%
2072	0	0	10	9974.0%	8287.4%
2073	0	0	1	0.0%	0.0%

	Earned Premium w/o Increase	Earned Premium With Increase	Incurring Claims	Loss Ratio w/o Increase	Loss Ratio With Increase
Past Experience @ 4.5%	1,547,684,016	1,547,684,016	932,062,488	60.2%	60.2%
Anticipated Experience @ 4.5%	417,008,418	525,472,412	1,606,790,879	385.3%	305.8%
Lifetime Experience @ 4.5%	1,964,692,434	2,073,156,429	2,538,853,367	129.2%	122.5%

Lifetime Experience (Nationwide) as of 12/31/2016

Non-Lifetime Benefit Periods - Post-Stabilization Experience

Year	Non-Interest Adjusted			Interest Adjusted		
	Original Premium	VA Rate Level Increased Premium	Incurred Claims	Original Premium	VA Rate Level Increased Premium	Incurred Claims
1997	0	0	0	0	0	0
1998	0	0	0	0	0	0
1999	0	0	0	0	0	0
2000	0	0	0	0	0	0
2001	5,564	0	0	11,008	0	0
2002	124,727	0	0	236,128	0	0
2003	959,199	0	0	1,737,716	0	0
2004	1,875,935	0	209,237	3,252,156	0	362,737
2005	2,108,071	0	65,865	3,497,216	0	109,268
2006	2,052,755	0	535,770	3,258,804	0	850,549
2007	1,956,742	236,629	347,698	2,972,613	359,478	528,210
2008	1,883,058	546,087	430,039	2,737,487	793,871	625,167
2009	1,830,940	530,972	654,237	2,547,101	738,659	910,138
2010	1,759,287	510,193	1,284,179	2,342,031	679,189	1,709,548
2011	1,682,106	487,811	622,344	2,142,855	621,428	792,812
2012	1,556,962	451,519	1,205,371	1,898,022	550,427	1,469,414
2013	1,478,031	682,977	1,454,616	1,724,211	796,734	1,696,897
2014	1,409,166	831,877	1,282,810	1,573,087	928,646	1,432,033
2015	1,356,160	829,248	1,305,648	1,448,723	885,848	1,394,763
2016	1,436,432	878,332	2,274,370	1,468,396	897,877	2,324,980
Total	23,475,134	5,985,646	11,672,183	32,847,556	7,252,157	14,206,516
2017	1,305,440	798,235	2,219,636	1,277,023	780,859	2,171,319
2018	1,186,394	725,442	2,282,935	1,110,592	679,092	2,137,072
2019	1,077,061	658,588	2,390,252	964,827	589,961	2,141,179
2020	974,791	596,053	2,492,130	835,612	510,950	2,136,307
2021	880,068	538,133	2,579,730	721,926	441,435	2,116,172
2022	790,584	483,417	2,692,202	620,595	379,474	2,113,333
2023	707,608	432,680	2,654,967	531,541	325,020	1,994,359
2024	630,833	385,734	2,607,342	453,464	277,279	1,874,243
2025	560,482	342,717	2,645,127	385,543	235,747	1,819,525
2026	496,192	303,405	2,685,121	326,621	199,719	1,767,499
2027	437,508	267,522	2,716,671	275,591	168,515	1,711,260
2028	384,275	234,972	2,730,416	231,636	141,638	1,645,855
2029	336,189	205,569	2,734,855	193,923	118,578	1,577,541
2030	292,891	179,093	2,722,243	161,672	98,857	1,502,647
2031	254,084	155,364	2,702,500	134,212	82,066	1,427,511
2032	219,337	134,118	2,674,332	110,869	67,793	1,351,801
2033	188,707	115,388	2,588,568	91,279	55,814	1,252,105
2034	161,804	98,938	2,470,726	74,895	45,796	1,143,641
2035	138,154	84,477	2,369,166	61,194	37,418	1,049,408
2036	117,394	71,782	2,276,008	49,760	30,426	964,731
2037	99,240	60,682	2,187,776	40,254	24,614	887,399
2038	83,460	51,033	2,088,657	32,395	19,809	810,713
2039	69,823	42,694	1,971,397	25,935	15,858	732,247
2040	58,083	35,516	1,837,709	20,645	12,624	653,197
2041	48,064	29,390	1,705,028	16,348	9,996	579,939
2042	39,518	24,164	1,571,296	12,863	7,865	511,438
2043	32,309	19,756	1,435,343	10,063	6,153	447,068
2044	26,259	16,056	1,290,763	7,827	4,786	384,723
2045	21,200	12,963	1,150,249	6,047	3,697	328,078
2046	17,037	10,418	1,016,554	4,650	2,843	277,460
2047	13,623	8,330	894,491	3,558	2,176	233,630
2048	10,828	6,621	782,185	2,706	1,655	195,500
2049	8,537	5,220	676,771	2,042	1,249	161,869
2050	6,673	4,081	578,385	1,527	934	132,380
2051	5,190	3,174	490,761	1,137	695	107,488
2052	4,027	2,462	413,987	844	516	86,768
2053	3,108	1,900	347,356	623	381	69,668
2054	2,375	1,452	287,726	456	279	55,223
2055	1,785	1,092	235,498	328	200	43,252
2056	1,331	814	190,449	234	143	33,472
2057	995	609	153,427	167	102	25,804
2058	743	454	123,429	120	73	19,865
2059	549	335	98,334	85	52	15,145
2060	395	242	77,319	58	36	11,395
2061	280	171	59,499	39	24	8,391
2062	201	123	45,273	27	17	6,110
2063	146	90	35,061	19	12	4,528
2064	106	65	27,138	13	8	3,354
2065	74	46	20,718	9	5	2,450
2066	51	31	15,320	6	4	1,734
2067	35	22	11,179	4	2	1,211
2068	24	15	8,302	2	2	860
2069	9	6	6,136	1	1	608
2070	1	0	4,384	0	0	416
2071	0	0	3,009	0	0	273
2072	0	0	0	0	0	0
2073	0	0	0	0	0	0
Total	11,695,876	7,151,654	73,075,838	8,803,807	5,383,247	40,731,162
Grand Total	35,171,011	13,137,300	84,748,020	41,651,363	12,635,403	54,937,678

Minimum Required Loss Ratios	58%	85%
Minimum PV Incurred Claims	24,157,791	10,740,093
Dual Loss Ratio Test Met	54,937,678	>
		34,897,884

Lifetime Experience (Nationwide) as of 12/31/2016

Lifetime Benefit Period - Post-Stabilization Experience

Year	Non-Interest Adjusted			Interest Adjusted		
	Original Premium	VA Rate Level Increased Premium	Incurred Claims	Original Premium	VA Rate Level Increased Premium	Incurred Claims
1997	0	0	0	0	0	0
1998	0	0	0	0	0	0
1999	0	0	0	0	0	0
2000	0	0	0	0	0	0
2001	13,893	0	0	27,486	0	0
2002	294,797	0	487	558,097	0	922
2003	1,597,074	0	0	2,893,311	0	0
2004	2,473,678	0	21,213	4,288,415	0	36,775
2005	2,593,563	0	204,578	4,302,631	0	339,388
2006	2,533,916	0	305,634	4,022,659	0	485,202
2007	2,498,322	302,122	1,613,672	3,795,362	458,973	2,451,434
2008	2,459,984	713,395	1,541,097	3,576,191	1,037,095	2,240,364
2009	2,412,119	699,515	360,417	3,355,606	973,126	501,391
2010	2,373,634	688,354	1,228,367	3,159,873	916,363	1,635,249
2011	2,333,309	676,660	2,158,778	2,972,432	862,005	2,750,094
2012	2,123,449	615,800	1,596,723	2,588,601	750,694	1,946,494
2013	1,946,519	1,066,943	1,799,433	2,270,731	1,244,653	2,099,147
2014	1,867,834	1,682,380	3,246,046	2,085,110	1,878,083	3,623,643
2015	1,787,926	1,810,096	2,858,807	1,909,959	1,933,642	3,053,931
2016	1,537,157	1,556,217	3,611,461	1,571,362	1,590,847	3,691,825
Total	30,847,174	9,811,483	20,546,713	43,377,825	11,645,482	24,855,858
2017	1,425,836	1,443,516	3,390,406	1,394,798	1,412,094	3,316,603
2018	1,320,387	1,336,760	3,604,191	1,236,024	1,251,350	3,373,909
2019	1,219,989	1,235,116	3,910,252	1,092,861	1,106,413	3,502,789
2020	1,123,267	1,137,196	4,290,543	962,889	974,829	3,677,945
2021	1,031,078	1,043,864	4,573,057	845,801	856,289	3,751,313
2022	942,124	953,807	4,922,441	739,552	748,722	3,864,034
2023	858,802	869,451	5,013,880	645,115	653,114	3,766,327
2024	780,881	790,564	5,033,516	561,323	568,283	3,618,256
2025	708,386	717,170	5,286,196	487,284	493,326	3,636,259
2026	640,898	648,845	5,541,093	421,875	427,107	3,647,461
2027	578,045	585,213	5,780,172	364,117	368,632	3,640,992
2028	519,820	526,265	5,988,134	313,340	317,225	3,609,559
2029	465,840	471,616	6,187,674	268,709	272,041	3,569,224
2030	415,749	420,904	6,395,019	229,489	232,334	3,529,977
2031	369,588	374,171	6,536,773	195,223	197,644	3,452,846
2032	326,846	330,899	6,678,359	165,212	167,260	3,375,727
2033	288,121	291,694	6,673,346	139,366	141,094	3,227,935
2034	253,425	256,567	6,550,385	117,304	118,759	3,032,018
2035	221,955	224,708	6,498,209	98,314	99,533	2,878,341
2036	193,465	195,864	6,452,520	82,004	83,021	2,735,028
2037	167,825	169,906	6,394,981	68,073	68,917	2,593,912
2038	144,945	146,742	6,278,849	56,260	56,958	2,437,136
2039	124,584	126,129	6,087,886	46,275	46,849	2,261,257
2040	106,459	107,779	5,849,838	37,840	38,309	2,079,271
2041	90,496	91,619	5,574,885	30,781	31,163	1,896,212
2042	76,410	77,358	5,296,424	24,871	25,179	1,723,921
2043	64,157	64,952	4,964,868	19,983	20,231	1,546,415
2044	53,719	54,385	4,559,682	16,011	16,210	1,359,054
2045	44,691	45,245	4,169,301	12,747	12,905	1,189,184
2046	37,004	37,463	3,786,939	10,100	10,225	1,033,612
2047	30,506	30,884	3,425,879	7,968	8,067	894,798
2048	25,019	25,329	3,075,505	6,253	6,331	768,694
2049	20,417	20,670	2,729,300	4,883	4,944	652,788
2050	16,537	16,742	2,396,518	3,785	3,832	548,510
2051	13,317	13,482	2,086,384	2,917	2,953	456,964
2052	10,672	10,804	1,814,955	2,237	2,264	380,397
2053	8,473	8,578	1,564,952	1,699	1,721	313,875
2054	6,701	6,784	1,322,531	1,286	1,302	253,831
2055	5,248	5,313	1,106,769	964	976	203,273
2056	4,076	4,126	916,077	716	725	161,005
2057	3,158	3,197	758,026	531	538	127,489
2058	2,443	2,473	626,084	393	398	100,764
2059	1,871	1,895	511,157	288	292	78,725
2060	1,413	1,431	407,847	208	211	60,109
2061	1,057	1,070	317,614	149	151	44,794
2062	795	805	249,024	107	109	33,609
2063	596	604	197,866	77	78	25,554
2064	442	448	155,584	55	55	19,228
2065	322	326	119,981	38	39	14,190
2066	231	234	89,102	26	27	10,084
2067	164	166	66,266	18	18	7,177
2068	108	109	49,872	11	11	5,169
2069	64	65	37,587	6	6	3,728
2070	0	0	27,051	0	0	2,567
2071	0	0	4	0	0	0
2072	0	0	0	0	0	0
2073	0	0	0	0	0	0
Total	14,748,423	14,931,304	186,321,754	10,718,156	10,851,061	92,493,839
Grand Total	45,595,597	24,742,786	206,868,467	54,095,981	22,496,544	117,349,698

Minimum Required Loss Ratios	58%	85%
Minimum PV Incurred Claims	31,375,669	19,122,062
Dual Loss Ratio Test Met	117,349,698	>
		50,497,731

Lifetime Experience (Nationwide) as of 12/31/2016

All Benefit Periods Combined - Post-Stabilization Experience

Year	Non-Interest Adjusted			Interest Adjusted		
	Original Premium	VA Rate Level Increased Premium	Incurred Claims	Original Premium	VA Rate Level Increased Premium	Incurred Claims
1997	0	0	0	0	0	0
1998	0	0	0	0	0	0
1999	0	0	0	0	0	0
2000	0	0	0	0	0	0
2001	19,458	0	0	38,494	0	0
2002	419,525	0	487	794,225	0	922
2003	2,556,274	0	0	4,631,026	0	0
2004	4,349,613	0	230,450	7,540,571	0	399,512
2005	4,701,633	0	270,443	7,799,847	0	448,656
2006	4,586,671	0	841,404	7,281,463	0	1,335,751
2007	4,455,064	538,751	1,961,370	6,767,975	818,451	2,979,644
2008	4,343,042	1,259,482	1,971,136	6,313,679	1,830,967	2,865,531
2009	4,243,059	1,230,487	1,014,654	5,902,707	1,711,785	1,411,529
2010	4,132,921	1,198,547	2,512,545	5,501,903	1,595,552	3,344,797
2011	4,015,415	1,164,470	2,781,122	5,115,287	1,483,433	3,542,906
2012	3,680,411	1,067,319	2,802,095	4,486,624	1,301,121	3,415,908
2013	3,424,550	1,749,921	3,254,050	3,994,942	2,041,387	3,796,043
2014	3,277,000	2,514,257	4,528,856	3,658,197	2,806,729	5,055,676
2015	3,144,086	2,639,345	4,164,454	3,358,682	2,819,490	4,448,694
2016	2,973,589	2,434,550	5,885,831	3,039,758	2,488,724	6,016,805
Total	54,322,309	15,797,129	32,218,896	76,225,381	18,897,639	39,062,374
2017	2,731,276	2,241,751	5,610,042	2,671,821	2,192,953	5,487,922
2018	2,506,781	2,062,202	5,887,126	2,346,616	1,930,442	5,510,981
2019	2,297,049	1,893,705	6,300,504	2,057,688	1,696,374	5,643,968
2020	2,098,058	1,733,249	6,782,673	1,798,501	1,485,778	5,814,252
2021	1,911,146	1,581,997	7,152,787	1,567,727	1,297,724	5,867,485
2022	1,732,708	1,437,223	7,614,643	1,360,147	1,128,196	5,977,367
2023	1,566,410	1,302,131	7,668,847	1,176,656	978,135	5,760,686
2024	1,411,714	1,176,298	7,640,858	1,014,786	845,561	5,492,499
2025	1,268,868	1,059,887	7,931,323	872,827	729,073	5,455,784
2026	1,137,090	952,250	8,226,214	748,497	626,825	5,414,960
2027	1,015,553	852,735	8,496,843	639,708	537,147	5,352,252
2028	904,095	761,237	8,718,550	544,975	458,863	5,255,414
2029	802,029	677,185	8,922,529	462,633	390,619	5,146,765
2030	708,640	599,998	9,117,262	391,161	331,192	5,032,624
2031	623,673	529,536	9,239,273	329,436	279,711	4,880,357
2032	546,183	465,017	9,352,692	276,081	235,053	4,727,528
2033	476,828	407,082	9,261,913	230,644	196,908	4,480,040
2034	415,229	355,505	9,021,111	192,200	164,555	4,175,658
2035	360,109	309,184	8,867,375	159,508	136,951	3,927,749
2036	310,859	267,646	8,728,528	131,764	113,447	3,699,758
2037	267,066	230,589	8,582,757	108,326	93,531	3,481,311
2038	228,405	197,776	8,367,506	88,656	76,767	3,247,849
2039	194,407	168,823	8,059,283	72,210	62,707	2,993,504
2040	164,542	143,295	7,687,547	58,485	50,933	2,732,467
2041	138,561	121,008	7,279,913	47,129	41,159	2,476,151
2042	115,928	101,522	6,867,720	37,733	33,044	2,235,358
2043	96,465	84,708	6,400,211	30,046	26,384	1,993,483
2044	79,977	70,441	5,850,445	23,838	20,996	1,743,777
2045	65,891	58,208	5,319,551	18,794	16,602	1,517,262
2046	54,041	47,881	4,803,492	14,750	13,069	1,311,072
2047	44,129	39,215	4,320,370	11,526	10,242	1,128,429
2048	35,847	31,950	3,857,690	8,960	7,986	964,193
2049	28,954	25,890	3,406,072	6,925	6,192	814,656
2050	23,211	20,823	2,974,903	5,312	4,766	680,890
2051	18,507	16,656	2,577,145	4,053	3,648	564,452
2052	14,699	13,266	2,228,942	3,081	2,780	467,165
2053	11,581	10,479	1,912,308	2,323	2,102	383,542
2054	9,076	8,236	1,610,257	1,742	1,581	309,054
2055	7,033	6,404	1,342,267	1,292	1,176	246,525
2056	5,406	4,940	1,106,526	950	868	194,477
2057	4,153	3,805	911,453	698	640	153,294
2058	3,186	2,927	749,513	513	471	120,629
2059	2,420	2,230	609,491	373	343	93,870
2060	1,809	1,673	485,166	267	247	71,504
2061	1,336	1,241	377,113	188	175	53,186
2062	996	928	294,297	134	125	39,719
2063	743	693	232,928	96	90	30,083
2064	548	513	182,722	68	63	22,582
2065	397	372	140,699	47	44	16,640
2066	282	265	104,422	32	30	11,818
2067	200	188	77,445	22	20	8,387
2068	132	124	58,174	14	13	6,029
2069	74	71	43,722	7	7	4,336
2070	1	0	31,435	0	0	2,983
2071	0	0	3,013	0	0	274
2072	0	0	0	0	0	0
2073	0	0	0	0	0	0
Total	26,444,299	22,082,958	259,397,591	19,521,964	16,234,308	133,225,002
Grand Total	80,766,608	37,880,087	291,616,487	95,747,344	35,131,947	172,287,376

Minimum Required Loss Ratios	58%	85%
Minimum PV Incurred Claims	55,533,460	29,862,155
Dual Loss Ratio Test Met	172,287,376	>
		85,395,615

Mutual of Omaha Insurance Company

ACTUARIAL JUSTIFICATION OF PREMIUM RATES

Long-Term Care and Home Health Care Policies and Riders

Virginia

1. PURPOSE OF FILING

This is a rate increase filing for existing Long-Term Care and Home Health Care policy forms and associated riders. The purpose of this filing is to demonstrate that the anticipated loss ratio of these forms meets the minimum requirements of this state and to provide updated projections following the rate increase that was implemented in 2014. This is the second of the three required filings. The updated projections for the pre-rate stabilization business are displayed in Exhibits 6A through 6C and the updated projections (dual loss ratio tests) for the post-stabilization business are displayed in Exhibits 7A through 7C. This rate filing is not intended to be used for any other purposes.

2. SCOPE OF FILING

This filing applies to the Company's Long-Term Care and Home Health Care policy forms and riders as summarized below. These forms provide daily benefits for long term treatment in various settings when the insured meets policy benefit qualification requirements. All forms included in this filing are Individual policies that are guaranteed renewable. These policies were fully underwritten and were issue age rated. These policies were sold by agents and brokers.

The policy forms and riders included in this filing, along with their respective Virginia issue dates and issue age limits, are displayed below:

Virginia Issue Dates

<u>Policy/Rider Form</u>	<u>From</u>	<u>To</u>	<u>Issue Age Limits</u>
LT50-Series 19241	1997	1998	18 to 84
LT50-Series 19409	1998	1999	18 to 84
0DX5M	1997	1999	18 to 84
NH50-Series 19242	1997	1998	18 to 84
NH50-Series 19410	1998	1999	18 to 84
0DX6M	1997	1999	18 to 84
HCA-19629	1999	2001	18 to 84
HCA-20249	2001	2002	18 to 84
NHA-19630	1999	2001	18 to 84
NHA-20250	2001	2004	18 to 84 (changed to 18 to 79 in 2003)
LTA-19631	1999	2001	18 to 84
LTA-20251	2001	2004	18 to 84 (changed to 18 to 79 in 2003)
0GH1M-44	1999	2001	18 to 84
0GH1M-44 Rev	2001	2002	18 to 84
0GH3M	1999	2004	18 to 84 (changed to 18 to 79 in 2003)
0GH4M	1999	2004	18 to 84 (changed to 18 to 79 in 2003)
0GH5M-44	1999	2004	18 to 84 (changed to 18 to 79 in 2003)
0GH6M-44 Rev	1999	2004	18 to 84 (changed to 18 to 79 in 2003)
0GH7M-44	1999	2001	18 to 84
0GH7M-44 Rev	2001	2004	18 to 84 (changed to 18 to 79 in 2003)
0GH8M-44	1999	2001	18 to 84
0GH8M-44 Rev	2001	2004	18 to 84 (changed to 18 to 79 in 2003)
0GH9M	1999	2004	18 to 84 (changed to 18 to 79 in 2003)

The proposed rate increase applies to in-force policies and riders only as these forms and riders are no longer being marketed.

The number of policyholders and the annualized inforce premium, as of December 31, 2016, are displayed in Exhibit 1. Exhibit 1 also shows the average annual premium before and after the proposed rate increase.

3. REASON FOR RATE INCREASE REQUEST

A rate increase is necessary at this time due to significantly higher anticipated future and lifetime loss ratios. The higher loss ratios are mainly a result of higher lifetime benefit claim costs. In addition, for those policies that were issued in Virginia on and after October 1, 2003, the moderately adverse condition that triggered was morbidity. As defined in the previous rate increase filing, SERFF Tracking # MUTA-127148717, any combination of changes in the moderately adverse experience conditions that is at least as much as the impact of a 10% increase in morbidity would trigger a moderately adverse condition. Justification for the morbidity trigger is included in Exhibit 8. Corrections were made to the projections as of June 30, 2012, that generated the lifetime loss ratio (120.6%) to which the certification required by 14 VAC 5-200-153 (B) (2) was made. The June 30, 2012, projections did not adjust the premiums to the Virginia rate level. These premiums should have been adjusted to reflect the increase that was implemented in Virginia in 2007 on the Virginia post-rate stabilization block of business. The revised projection correctly adjusted premium to reflect the Virginia rate increase in 2007. The adjusted premium assumes that all policyholders on a nationwide basis received the increase amounts that were implemented in Virginia. The "Original Premium" also changed for the prior years 2003 through 2011 as a correction was made to the original rate level adjustment factors by benefit period. The resulting lifetime loss ratio based on the corrected premium is 109.5%. The lifetime loss ratio based on the updated experience has triggered the moderately adverse experience, even on the incorrect lifetime loss ratio of 120.6%.

Mutual of Omaha has been evaluating this LTCi block and updating assumptions based on our experience as well as the LTCi industry experience. For the forms specified above, experience has been significantly worse than original pricing. Lifetime benefit updated claim costs, ultimate lapse rates and mortality rates have had the most significant deviation from pricing. The combined effect of changing the underlying claim costs to better reflect actual experience, as well as nationwide data, and updating the mortality rates and persistency assumptions resulted in the need for a rate increase. The current premium levels are inadequate and, therefore, Mutual of Omaha is requesting a rate increase in order to maintain the viability and financial stability of the policy forms.

Some of the forms in this filing received a rate revision in 2003. A follow-up rate increase was filed in 2007 in those states that did not approve the entire rate increase that was requested in 2003 to bring those states to the national rate level. Also, an additional rate increase was filed in 2011 with a follow up increase in 2012 for policies with lifetime benefits, as summarized in Exhibit 2. We have closely monitored the experience of this block of business. During our analysis, we noticed that the experience of our lifetime benefit periods was deviating from the then current industry experience. We received an updated industry experience table from Milliman in early 2013 and fully incorporated the data into our projections and models during 2013. At this time, we recognized that the experience of this block was still deviating from industry experience, and that the industry was having the same issue with lifetime benefit periods that we are experiencing. We are requesting the increase at this time due to the updated morbidity assumptions from the current industry table.

4. RATE INCREASE HISTORY

The National and Virginia rate increase history by form is displayed in Exhibit 2.

5. PROJECTION ASSUMPTIONS

Interest

A 4.5% effective annual rate of interest has been assumed for accumulating historical experience and for discounting projected future experience.

Lapse Rates

Mutual of Omaha reviews its persistency assumptions on a yearly basis to monitor for any changes in lapse rates. As experience develops, we continue to see ultimate lapse assumptions decrease, especially as we gain experience in later

durations. As such, the persistency assumptions were also revised based on the actual experience of the affected blocks. The ultimate lapse rates by attained age group, since all policies are at least in policy duration 10, are displayed below:

			Attained Age						
			0 - 49	50 - 59	60 - 64	65 - 69	70 - 74	75 - 79	80 - 84
Lifetime BP	Married	Inflation	0.6%	0.6%	0.6%	0.5%	0.4%	0.4%	0.5%
		No Inflation	1.1%	1.1%	1.0%	0.8%	0.8%	0.8%	0.8%
	Single	Inflation	1.1%	1.1%	1.0%	0.8%	0.8%	0.8%	0.8%
		No Inflation	1.9%	2.0%	1.8%	1.5%	1.3%	1.4%	1.5%
Non-lifetime BP	Married	Inflation	1.1%	1.1%	1.0%	0.8%	0.8%	0.8%	0.8%
		No Inflation	1.8%	1.8%	1.7%	1.4%	1.3%	1.3%	1.5%
	Single	Inflation	1.8%	1.9%	1.7%	1.4%	1.3%	1.3%	1.4%
		No Inflation	3.1%	3.3%	2.9%	2.4%	2.3%	2.4%	2.9%

Mortality

Mortality rates are derived using the Annuity 2000 Basic table. Selection factors grade from 40% to 100% over 12 years. Generational mortality improvement of 1% per year and future mortality improvement of 1% per year for 20 years are assumed but is something that we will continue to monitor closely as we gain more experience to ensure that it remains an appropriate assumption.

Morbidity Assumption Updates

The Milliman 2014 Guidelines now serves as the morbidity basis. Milliman claim costs are created from data contributed by LTC insurance companies that agreed to provide claim datasets. The datasets consisted of more than 29 million life years of exposure and over \$25 billion of incurred claims. In 2016, Mutual of Omaha performed a comprehensive claim study on the policy forms mentioned in this filing. Below are our key findings.

Overall, Mutual of Omaha's claim costs align with Milliman claim costs. We continue to see worse experience overall on the lifetime benefit period policies compared to the Milliman Guidelines while those with non-lifetime benefit periods are somewhat better. Some adjustments were made to the Milliman Guidelines based off of the actual to expected analysis. We will continue to reflect our experience as we gain credibility. Generational morbidity improvement of 1% per year and future morbidity improvement of 1% per year for 20 years are assumed but is something that we will continue to monitor closely as we gain more experience to ensure that it remains an appropriate assumption.

Rate increase

Projected future earned premiums that include the proposed rate increase amounts, as noted in Section 11, assume 09/01/2017 and 09/01/2018 effective dates.

6. POLICY RESERVES

The valuation basis for contract reserves which generates the net valuation premium for renewal years is: one-year preliminary term using pricing claim costs @ 4.5% and 1994 GAM with gender weighted by expected distribution by issue age with selection factors grading from 0.40 to 1.00 over 10 years. Terminations, other than mortality, do not exceed:

- For policy year one through four, the lesser of 80% of the voluntary lapse rate used in the calculation of gross premiums and 8%;
- For policy years five and later, the lesser of 100% of the voluntary lapse rate used in the calculation of gross premiums and 4%.

7. MINIMUM REQUIRED LIFETIME LOSS RATIO

The minimum required lifetime loss ratio is 60%.

8. HISTORICAL EXPERIENCE

The nationwide experience exhibits for the Non-Lifetime Benefit Periods, Lifetime Benefit Period, and all Benefit Periods combined, since inception through December 31, 2016, are shown in Exhibits 3A through 3C. The premiums in Exhibits 3A through 3C assume that all policyholders, on a nationwide basis, are paying the premium levels approved by your state. The Florida experience for Form HCA has been excluded from the historical experience as Form HCA in Florida was sold as a Home Health Care only contract, and Florida has a different premium structure than the rest of the country. The addition of the Florida Home Health Care experience would increase the loss ratio further.

9. PROJECTED FUTURE EXPERIENCE

Future experience, which has been projected both with and without the requested rate increase using the assumptions described in Section 5, is shown in Exhibits 3A through 3C. Separate exhibits have been completed for the Non-Lifetime Benefit Periods (Exhibit 3A), the Lifetime Benefit Period (Exhibit 3B), and all Benefit Periods combined (Exhibit 3C).

Exhibits 4A through 4C have been prepared to demonstrate compliance with 14 VAC 5-200-150. The experience displayed in these exhibits represents the nationwide pre-rate stabilization business by benefit period, and the future experience has been projected both with and without the requested rate increase. These exhibits show that the resulting lifetime loss ratio, with the requested rate increase, exceeds the minimum required loss ratio of 60%.

Exhibits 5A through 5C have been prepared to demonstrate compliance with 14 VAC 5-200-153. The experience displayed in these exhibits represents the nationwide post-rate stabilization business by benefit period, and the future experience includes the requested rate increase. These exhibits show that the dual loss ratio test has been satisfied.

10. LIFETIME ANTICIPATED LOSS RATIO

The lifetime anticipated loss ratio is defined as the present value of the historical and projected future incurred claims divided by the present value of the historical and projected future earned premiums. Please note that the majority of the National business was issued prior to rate stabilization. See below for a summary of the maximum allowable rate increases that would still meet the minimum loss ratio requirements. The proposed rate increase is shown in section 11.

Non-Lifetime Benefit Periods

A rate increase of 32.7% is needed on a going forward basis, for the Non-Lifetime Benefit periods, to bring the future loss ratio in line with expectations.

Experience Period	Earned Premium	Incurred Claims	Actual Loss Ratios	Pricing Loss Ratios
Past	650,666,002	336,060,443	51.6%	55.0%
Future	235,254,032	528,615,809	224.7%	224.7%
Lifetime	885,920,034	864,676,252	97.6%	62.1%

The above demonstrates that both the anticipated future loss ratio and the lifetime anticipated loss ratio are in compliance with the minimum loss ratio requirements after the implementation of any rate increase less than 32.7%.

Lifetime Benefit Periods

A rate increase of 96.7% is needed on a going forward basis, for the Lifetime Benefit period, to bring the future loss ratio in line with expectations.

Experience Period	Earned Premium	Incurred Claims	Actual Loss Ratios	Pricing Loss Ratios
Past	992,141,034	635,064,420	64.0%	55.1%
Future	541,528,865	1,211,400,072	223.7%	223.7%
Lifetime	1,533,669,899	1,846,464,492	120.4%	62.0%

The above demonstrates that both the anticipated future loss ratio and the lifetime anticipated loss ratio are in compliance with the minimum loss ratio requirements after the implementation of any rate increase less than 96.7%.

All Benefit Periods Combined

An overall rate increase of 71.5% is needed on a going forward basis, for all benefit periods combined, to bring the future loss ratio in line with expectations.

Experience Period	Earned Premium	Incurred Claims	Actual Loss Ratios	Pricing Loss Ratios
Past	1,642,807,036	971,124,863	59.1%	55.1%
Future	776,099,858	1,740,015,881	224.2%	224.2%
Lifetime	2,418,906,894	2,711,140,743	112.1%	62.0%

The above demonstrates that both the anticipated future loss ratio and the lifetime anticipated loss ratio are in compliance with the minimum loss ratio requirements after the implementation of any rate increase less than 71.5%.

11. SUMMARY OF PROPOSED RATE INCREASE

Although a rate increase of 71.5% is needed to bring the future loss ratio in line with expectations, we are requesting a rate increase to be implemented as summarized below. We will continue to monitor emerging experience and consider further corrective action in the future.

Benefit Period	2017	2018	Total
Non-Lifetime	0.0%	0.0%	0.0%
Lifetime	30.0%	15.0%	49.5%
Total	16.6%	9.3%	27.4%

We propose the same increase amount for all Virginia lifetime benefit period policyholders, regardless of issue date.

Policyholders will be given the following options in an effort to reduce the impact of the proposed rate increase:

- Decrease their benefit period.
- Increase their elimination period.
- Reduce their maximum daily benefit.
- Accept the nonforfeiture option.

If the proposed rate increase is approved, renewal premium rate schedules will not be greater than new business premium rate schedules, where applicable, except for differences attributable to benefits.

The proposed effective dates of the increases for policies with a lifetime benefit period are September 1, 2017, and September 1, 2018, subject to your State's approval.



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April 27, 2017

Attachments:

Attachment A – Actuarial Certification

Exhibit 1 – Policies In-Force, Annualized Premium and Average Annual Premium

Exhibit 2 – Rate Increase History

Exhibit 3A – Nationwide Lifetime Experience (Non-Lifetime Benefit Periods)

Exhibit 3B – Nationwide Lifetime Experience (Lifetime Benefit Period)

Exhibit 3C – Nationwide Lifetime Experience (All Benefit Periods Combined)

Exhibit 4A – Nationwide Lifetime Experience – Pre-Rate Stabilization (Non-Lifetime Benefit Periods)

Exhibit 4B – Nationwide Lifetime Experience – Pre-Rate Stabilization (Lifetime Benefit Period)

Exhibit 4C – Nationwide Lifetime Experience – Pre-Rate Stabilization (All Benefit Periods Combined)

Exhibit 5A – Nationwide Lifetime Experience – Post-Rate Stabilization (Non-Lifetime Benefit Periods)

Exhibit 5B – Nationwide Lifetime Experience – Post-Rate Stabilization (Lifetime Benefit Period)

Exhibit 5C – Nationwide Lifetime Experience – Post-Rate Stabilization (All Benefit Periods Combined)

Exhibit 6A – Updated Projection – Pre-Rate Stabilization (Non-Lifetime Benefit Periods)

Exhibit 6B – Updated Projection – Pre-Rate Stabilization (Lifetime Benefit Period)

Exhibit 6C – Updated Projection – Pre-Rate Stabilization (All Benefit Periods Combined)

Exhibit 7A – Updated Projection – Post-Rate Stabilization (Non-Lifetime Benefit Periods)

Exhibit 7B – Updated Projection – Post-Rate Stabilization (Lifetime Benefit Period)

Exhibit 7C – Updated Projection – Post-Rate Stabilization (All Benefit Periods Combined)

Exhibit 8 – Moderately Adverse Experience Trigger (Lifetime Benefit Period only)

Exhibit 9A – Virginia Lifetime Experience – Pre-Rate Stabilization (Non-Lifetime Benefit Periods)

Exhibit 9B – Virginia Lifetime Experience – Pre-Rate Stabilization (Lifetime Benefit Period)

Exhibit 9C – Virginia Lifetime Experience – Pre-Rate Stabilization (All Benefit Periods Combined)

Exhibit 10A – Virginia Lifetime Experience – Post-Rate Stabilization (Non-Lifetime Benefit Periods)

Exhibit 10B – Virginia Lifetime Experience – Post-Rate Stabilization (Lifetime Benefit Period)

Exhibit 10C – Virginia Lifetime Experience – Post-Rate Stabilization (All Benefit Periods Combined)

Proposed Rates

Actuarial Certification
for
Long-Term Care Policies HCA, NHA, LTA and Riders
for
Policies Issued On and After October 1, 2003

I, Adam Walling, am the LTC Product Performance Director of Mutual of Omaha Insurance Company and a member of the American Academy of Actuaries. I meet the Academy's qualification standards for rendering this opinion and am familiar with the requirements for filing long-term care insurance premiums.

If the requested premium rate schedule increase is implemented and the underlying assumptions, which reflect moderately adverse conditions, are realized, no further premium rate schedule increases are anticipated.

I have reviewed and taken into consideration the policy design and coverage provided.

I have reviewed and taken into consideration the current underwriting and claims adjudication processes.

In forming my opinion, I have used actuarial assumptions and actuarial methods and such tests of the actuarial calculations as I considered necessary. Based on these assumptions, this premium rate filing is in compliance with the filing requirements and the loss ratio standards of this state.

Renewal premium rate schedules are not greater than the new business premium rates of those forms currently being marketed, except for differences attributable to benefits.



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April 27, 2017

Policies In-Force as of 12/31/2016, Annualized Premium and Average Annual Premium**National****Non-Lifetime Benefit Periods**

Average Annual Premium					
Policy Form	In-Force	Annualized Premium	Before Increase	After Increase	Increase Amount
LT50	1,731	2,647,769	1,530	1,530	0.0%
NH50	612	520,775	851	851	0.0%
HCA	460	844,010	1,835	1,835	0.0%
HCAQ	200	242,140	1,211	1,211	0.0%
LTA	5,659	10,184,898	1,800	1,800	0.0%
LTAQ	1,233	1,988,666	1,613	1,613	0.0%
NHA	5,640	12,249,957	2,172	2,172	0.0%
NHAQ	1,263	2,456,136	1,945	1,945	0.0%
Total	16,798	31,134,352	1,853	1,853	0.0%

Lifetime Benefit Period

Average Annual Premium					
Policy Form	In-Force	Annualized Premium	Before Increase	After Increase	Increase Amount
LT50	1,225	2,942,831	2,402	2,762	15.0%
NH50	568	772,408	1,360	1,564	15.0%
HCA	242	806,604	3,333	3,833	15.0%
HCAQ	62	163,305	2,634	3,029	15.0%
LTA	6,890	19,967,227	2,898	3,333	15.0%
LTAQ	1,910	4,302,955	2,253	2,591	15.0%
NHA	4,429	14,726,971	3,325	3,824	15.0%
NHAQ	1,349	3,805,273	2,821	3,244	15.0%
Total	16,675	47,487,573	2,848	3,275	15.0%

Virginia**Non-Lifetime Benefit Periods**

Proposed 2017 Average Annual Premium						Proposed 2018 Average Annual Premium		
Policy Form	In-Force	Annualized Premium	Before Increase	After Increase	Increase Amount	Before Increase	After Increase	Increase Amount
HCA	47	65,891	1,402	1,402	0.0%	1,402	1,402	0.0%
LT50	82	107,842	1,315	1,315	0.0%	1,315	1,315	0.0%
LTA	358	661,426	1,848	1,848	0.0%	1,848	1,848	0.0%
NH50	47	38,571	821	821	0.0%	821	821	0.0%
NHA	304	640,626	2,107	2,107	0.0%	2,107	2,107	0.0%
Total	838	1,514,356	1,807	1,807	0.0%	1,807	1,807	0.0%

Lifetime Benefit Period

Proposed 2017 Average Annual Premium						Proposed 2018 Average Annual Premium		
Policy Form	In-Force	Annualized Premium	Before Increase	After Increase	Increase Amount	Before Increase	After Increase	Increase Amount
HCA	41	124,253	3,031	3,940	30.0%	3,940	4,531	15.0%
LT50	48	103,990	2,166	2,816	30.0%	2,816	3,238	15.0%
LTA	361	914,860	2,534	3,294	30.0%	3,294	3,788	15.0%
NH50	20	27,557	1,378	1,791	30.0%	1,791	2,060	15.0%
NHA	243	709,749	2,921	3,797	30.0%	3,797	4,367	15.0%
Total	713	1,880,410	2,637	3,428	30.0%	3,428	3,942	15.0%

Rate Increase History

National

Form	Effective Date	Overall Increase Amount
LT50	n/a	0.0%
NH50	n/a	0.0%
HCA	10/01/2003	29.0%
HCAQ	10/01/2003	29.0%
LTA	10/01/2003	29.0%
LTAQ	10/01/2003	29.0%
NHA	10/01/2003	29.0%
NHAQ	10/01/2003	29.0%

Non-Lifetime	
Effective Date	Overall Increase Amount
10/01/2011	15.0%
10/01/2011	15.0%
10/01/2011	15.0%
10/01/2011	15.0%
10/01/2011	15.0%
10/01/2011	15.0%
10/01/2011	15.0%
10/01/2011	15.0%
10/01/2011	15.0%

Lifetime							
Effective Date	Overall Increase Amount	Effective Date	Overall Increase Amount	Effective Date	Overall Increase Amount	Effective Date	Overall Increase Amount
10/01/2011	30.0%	10/01/2012	11.5%	05/01/2015	30.0%	05/01/2016	15.0%
10/01/2011	30.0%	10/01/2012	11.5%	05/01/2015	30.0%	05/01/2016	15.0%
10/01/2011	30.0%	10/01/2012	11.5%	05/01/2015	30.0%	05/01/2016	15.0%
10/01/2011	30.0%	10/01/2012	11.5%	05/01/2015	30.0%	05/01/2016	15.0%
10/01/2011	30.0%	10/01/2012	11.5%	05/01/2015	30.0%	05/01/2016	15.0%
10/01/2011	30.0%	10/01/2012	11.5%	05/01/2015	30.0%	05/01/2016	15.0%
10/01/2011	30.0%	10/01/2012	11.5%	05/01/2015	30.0%	05/01/2016	15.0%
10/01/2011	30.0%	10/01/2012	11.5%	05/01/2015	30.0%	05/01/2016	15.0%

Note:

The overall increase in 2003 is the result of a 40% rate increase to the base policy only, combined with the Tax Qualified Discount increasing from 5% to 15%.

Virginia

Form	Effective Date	Overall Increase Amount
LT50	n/a	0.0%
NH50	n/a	0.0%
HCA	08/01/2007	29.0%
HCAQ	08/01/2007	29.0%
LTA	08/01/2007	29.0%
LTAQ	08/01/2007	29.0%
NHA	08/01/2007	29.0%
NHAQ	08/01/2007	29.0%

Non-Lifetime			
Effective Date	Overall Increase Amount	Effective Date	Overall Increase Amount
05/01/2013	20.0%	05/01/2014	4.1%
05/01/2013	20.0%	05/01/2014	4.1%
05/01/2013	20.0%	05/01/2014	4.1%
05/01/2013	20.0%	05/01/2014	4.1%
05/01/2013	20.0%	05/01/2014	4.1%
05/01/2013	20.0%	05/01/2014	4.1%
05/01/2013	20.0%	05/01/2014	4.1%
05/01/2013	20.0%	05/01/2014	4.1%

Lifetime			
Effective Date	Overall Increase Amount	Effective Date	Overall Increase Amount
05/01/2013	30.0%	05/01/2014	20.0%
05/01/2013	30.0%	05/01/2014	20.0%
05/01/2013	30.0%	05/01/2014	20.0%
05/01/2013	30.0%	05/01/2014	20.0%
05/01/2013	30.0%	05/01/2014	20.0%
05/01/2013	30.0%	05/01/2014	20.0%
05/01/2013	30.0%	05/01/2014	20.0%
05/01/2013	30.0%	05/01/2014	20.0%

Notes:

1. The overall increase in 2007 is the result of a 40% rate increase to the base policy only, combined with the Tax Qualified Discount increasing from 5% to 15%.
2. The overall increase in 2014 (non-lifetime benefit periods) is the result of a 10% increase to the 5-year benefit period and no increase to the remaining non-lifetime benefit periods (1-year, 2-year and 3-year benefit periods).

Lifetime Experience (Nationwide) as of 12/31/2016
Premiums at the Virginia Rate Level
Non-Lifetime Benefit Periods

	Virginia Rate Level	Incurred Claims			
Year	Earned Premium	Discounted to Incurred Year		Loss Ratio	
1997	493,144	0		0.0%	
1998	2,879,303	107,337		3.7%	
1999	5,164,376	620,403		12.0%	
2000	8,538,676	1,279,039		15.0%	
2001	13,296,598	2,429,334		18.3%	
2002	19,842,983	4,609,517		23.2%	
2003	27,120,845	3,660,231		13.5%	
2004	28,222,177	5,980,397		21.2%	
2005	28,236,306	8,695,837		30.8%	
2006	27,254,820	9,349,852		34.3%	
2007	28,749,932	12,025,776		41.8%	
2008	30,977,013	13,772,969		44.5%	
2009	29,532,625	16,512,717		55.9%	
2010	28,088,937	18,692,645		66.5%	
2011	26,659,985	21,417,195		80.3%	
2012	26,462,143	26,255,817		99.2%	
2013	28,959,105	25,690,693		88.7%	
2014	29,852,766	26,114,538		87.5%	
2015	29,503,501	28,307,511		95.9%	
2016	29,463,128	36,422,468		123.6%	
Total	449,298,365	261,944,277		58.3%	
Interest Adjusted	650,666,002	336,060,443		51.6%	
	Earned Premium w/o Increase	Earned Premium w/Increase	Incurred Claims	Loss Ratio w/o Increase	Loss Ratio w/Increase
2017	26,711,999	26,711,999	29,856,518	111.8%	111.8%
2018	24,215,387	24,215,387	30,699,453	126.8%	126.8%
2019	21,926,611	21,926,611	32,001,258	145.9%	145.9%
2020	19,789,271	19,789,271	33,227,148	167.9%	167.9%
2021	17,813,202	17,813,202	34,202,496	192.0%	192.0%
2022	15,954,526	15,954,526	35,476,223	222.4%	222.4%
2023	14,234,256	14,234,256	35,037,263	246.1%	246.1%
2024	12,647,018	12,647,018	34,428,845	272.2%	272.2%
2025	11,198,187	11,198,187	34,746,040	310.3%	310.3%
2026	9,879,803	9,879,803	35,078,587	355.1%	355.1%
2027	8,681,102	8,681,102	35,315,876	406.8%	406.8%
2028	7,597,938	7,597,938	35,344,198	465.2%	465.2%
2029	6,623,535	6,623,535	35,230,452	531.9%	531.9%
2030	5,749,851	5,749,851	34,913,604	607.2%	607.2%
2031	4,970,555	4,970,555	34,494,474	694.0%	694.0%
2032	4,276,437	4,276,437	33,988,624	794.8%	794.8%
2033	3,666,933	3,666,933	32,836,602	895.5%	895.5%
2034	3,133,566	3,133,566	31,317,413	999.4%	999.4%
2035	2,666,404	2,666,404	29,970,385	1124.0%	1124.0%
2036	2,258,021	2,258,021	28,734,897	1272.6%	1272.6%
2037	1,902,454	1,902,454	27,568,685	1449.1%	1449.1%
2038	1,594,632	1,594,632	26,265,683	1647.1%	1647.1%
2039	1,329,479	1,329,479	24,740,351	1860.9%	1860.9%
2040	1,101,914	1,101,914	23,024,107	2089.5%	2089.5%
2041	908,617	908,617	21,312,023	2345.5%	2345.5%
2042	744,666	744,666	19,590,183	2630.7%	2630.7%
2043	606,881	606,881	17,854,980	2942.1%	2942.1%
2044	491,589	491,589	16,032,266	3261.3%	3261.3%
2045	395,396	395,396	14,260,853	3606.7%	3606.7%
2046	316,581	316,581	12,577,839	3973.0%	3973.0%
2047	252,249	252,249	11,043,930	4378.2%	4378.2%
2048	199,747	199,747	9,636,148	4824.2%	4824.2%
2049	156,880	156,880	8,317,794	5302.0%	5302.0%
2050	122,112	122,112	7,093,895	5809.3%	5809.3%
2051	94,538	94,538	6,005,049	6352.0%	6352.0%
2052	72,963	72,963	5,054,341	6927.3%	6927.3%
2053	55,962	55,962	4,231,219	7560.9%	7560.9%
2054	42,470	42,470	3,497,703	8235.8%	8235.8%
2055	31,726	31,726	2,854,921	8998.8%	8998.8%
2056	23,488	23,488	2,303,969	9809.3%	9809.3%
2057	17,400	17,400	1,853,375	10651.3%	10651.3%
2058	12,861	12,861	1,488,770	11576.1%	11576.1%
2059	9,390	9,390	1,184,231	12611.3%	12611.3%
2060	6,690	6,690	930,132	13902.8%	13902.8%
2061	4,674	4,674	715,410	15306.0%	15306.0%
2062	3,306	3,306	544,733	16476.6%	16476.6%
2063	2,379	2,379	421,960	17739.8%	17739.8%
2064	1,698	1,698	326,788	19243.8%	19243.8%
2065	1,188	1,188	249,540	20998.7%	20998.7%
2066	808	808	184,403	22815.3%	22815.3%
2067	561	561	134,871	24044.2%	24044.2%
2068	377	377	100,223	26603.7%	26603.7%
2069	151	151	73,907	48812.3%	48812.3%
2070	11	11	52,770	486640.9%	486640.9%
2071	0	0	36,080	8445746.6%	8445746.6%
2072	0	0	4	6177.8%	6177.8%
2073	0	0	0	0.0%	0.0%
	Earned Premium w/o Increase	Earned Premium With Increase	Incurred Claims	Loss Ratio w/o Increase	Loss Ratio With Increase
Past Experience @ 4.5%	650,666,002	650,666,002	336,060,443	51.6%	51.6%
Anticipated Experience @ 4.5%	177,341,165	177,341,165	528,615,809	298.1%	298.1%
Lifetime Experience @ 4.5%	828,007,167	828,007,167	864,676,252	104.4%	104.4%

Lifetime Experience (Nationwide) as of 12/31/2016
Premiums at the Virginia Rate Level
Lifetime Benefit Period

	Virginia Rate Level	Incurred Claims			
Year	Earned Premium	Discounted to Incurred Year	Loss Ratio		
1997	379,977	0	0.0%		
1998	2,595,131	229,543	8.8%		
1999	5,659,399	581,891	10.3%		
2000	11,774,776	1,523,173	12.9%		
2001	20,610,805	4,549,954	22.1%		
2002	30,785,341	5,455,703	17.7%		
2003	41,521,354	9,776,788	23.5%		
2004	42,601,415	13,208,389	31.0%		
2005	42,549,495	16,431,275	38.6%		
2006	41,569,288	15,608,074	37.5%		
2007	44,918,347	23,508,430	52.3%		
2008	49,704,716	32,551,916	65.5%		
2009	48,250,256	30,303,535	62.8%		
2010	46,724,080	45,035,342	96.4%		
2011	43,401,777	48,281,111	111.2%		
2012	37,989,957	48,255,691	127.0%		
2013	41,297,104	50,643,923	122.6%		
2014	48,246,068	43,444,106	90.0%		
2015	46,287,938	48,589,055	105.0%		
2016	40,302,850	52,045,328	129.1%		
Total	687,170,073	490,023,228	71.3%		
Interest Adjusted	992,141,034	635,064,420	64.0%		
	Earned Premium	Earned Premium	Loss Ratio	Loss Ratio	
	w/o Increase	w/Increase	Incurred Claims	w/o Increase	w/Increase
2017	37,307,487	41,038,236	45,583,480	122.2%	111.1%
2018	34,472,336	47,054,739	48,416,357	140.4%	102.9%
2019	31,776,576	47,505,981	52,330,230	164.7%	110.2%
2020	29,182,176	43,627,353	57,157,486	195.9%	131.0%
2021	26,713,586	39,936,812	60,805,597	227.6%	152.3%
2022	24,337,597	36,384,707	65,175,582	267.8%	179.1%
2023	22,115,763	33,063,066	66,384,488	300.2%	200.8%
2024	20,040,052	29,959,877	66,842,050	333.5%	223.1%
2025	18,115,944	27,083,337	69,982,265	386.3%	258.4%
2026	16,330,328	24,413,841	73,151,612	447.9%	299.6%
2027	14,671,961	21,934,582	76,134,102	518.9%	347.1%
2028	13,140,111	19,644,466	78,731,120	599.2%	400.8%
2029	11,725,975	17,530,333	81,166,148	692.2%	463.0%
2030	10,418,700	15,575,957	83,663,740	803.0%	537.1%
2031	9,219,362	13,782,946	85,377,043	926.1%	619.4%
2032	8,113,871	12,130,237	87,024,853	1072.5%	717.4%
2033	7,116,966	10,639,864	86,888,754	1220.9%	816.6%
2034	6,226,326	9,308,358	85,357,980	1370.9%	917.0%
2035	5,423,250	8,107,758	84,566,164	1559.3%	1043.0%
2036	4,699,637	7,025,957	83,841,460	1784.0%	1193.3%
2037	4,051,790	6,057,426	82,955,516	2047.4%	1369.5%
2038	3,476,495	5,197,359	81,308,253	2338.8%	1564.4%
2039	2,968,269	4,437,562	78,665,798	2650.2%	1772.7%
2040	2,519,147	3,766,124	75,422,269	2994.0%	2002.6%
2041	2,126,448	3,179,040	71,728,205	3373.1%	2256.3%
2042	1,782,426	2,664,727	67,967,484	3813.2%	2550.6%
2043	1,485,379	2,220,641	63,556,126	4278.8%	2862.1%
2044	1,234,091	1,844,967	58,308,183	4724.8%	3160.4%
2045	1,018,995	1,523,398	53,220,511	5222.8%	3493.5%
2046	837,082	1,251,437	48,245,696	5763.6%	3855.2%
2047	684,433	1,023,228	43,556,331	6363.9%	4256.8%
2048	556,482	831,940	39,018,784	7011.7%	4690.1%
2049	450,084	672,876	34,548,073	7675.9%	5134.4%
2050	361,324	540,179	30,270,615	8377.7%	5603.8%
2051	288,336	431,063	26,289,372	9117.6%	6098.7%
2052	228,867	342,156	22,806,817	9965.1%	6665.6%
2053	179,940	269,010	19,598,637	10891.8%	7285.5%
2054	140,883	210,620	16,526,056	11730.3%	7846.4%
2055	109,355	163,486	13,791,840	12612.0%	8436.1%
2056	84,219	125,908	11,373,351	13504.4%	9033.1%
2057	64,706	96,735	9,386,518	14506.5%	9703.3%
2058	49,697	74,297	7,733,962	15562.2%	10409.5%
2059	37,740	56,422	6,294,321	16678.0%	11155.9%
2060	28,349	42,382	5,006,538	17660.1%	11812.7%
2061	21,093	31,534	3,889,897	18441.4%	12335.4%
2062	15,769	23,574	3,046,702	19321.0%	12923.8%
2063	11,807	17,652	2,413,843	20444.0%	13674.9%
2064	8,720	13,036	1,894,990	21732.1%	14536.6%
2065	6,335	9,471	1,457,699	23009.6%	15391.1%
2066	4,541	6,788	1,079,181	23767.0%	15897.7%
2067	3,223	4,818	801,582	24874.2%	16638.2%
2068	2,123	3,174	602,066	28358.2%	18968.7%
2069	1,270	1,899	452,694	35635.1%	23836.2%
2070	6	9	325,244	5175726.0%	3462024.1%
2071	0	0	766	711536.4%	475944.1%
2072	0	0	6	14975.5%	10017.1%
2073	0	0	1	0.0%	0.0%
	Earned Premium	Earned Premium	Loss Ratio	Loss Ratio	
	w/o Increase	With Increase	Incurred Claims	w/o Increase	With Increase
Past Experience @ 4.5%	992,141,034	992,141,034	635,064,420	64.0%	64.0%
Anticipated Experience @ 4.5%	275,260,763	392,904,093	1,211,400,072	440.1%	308.3%
Lifetime Experience @ 4.5%	1,267,401,797	1,385,045,127	1,846,464,492	145.7%	133.3%

Lifetime Experience (Nationwide) as of 12/31/2016
Premiums at the Virginia Rate Level
All Benefit Periods

Year	Virginia Rate Level Earned Premium	Incurring Claims Discounted to Incurred Year	Loss Ratio
1997	873,120	0	0.0%
1998	5,474,434	336,880	6.2%
1999	10,823,775	1,202,294	11.1%
2000	20,313,452	2,802,212	13.8%
2001	33,907,403	6,979,288	20.6%
2002	50,628,324	10,065,220	19.9%
2003	68,642,198	13,437,019	19.6%
2004	70,823,592	19,188,786	27.1%
2005	70,785,801	25,127,112	35.5%
2006	68,824,108	24,957,926	36.3%
2007	73,668,279	35,534,206	48.2%
2008	80,681,729	46,324,886	57.4%
2009	77,782,881	46,816,251	60.2%
2010	74,813,018	63,727,987	85.2%
2011	70,061,763	69,698,305	99.5%
2012	64,452,100	74,511,509	115.6%
2013	70,256,209	76,334,616	108.7%
2014	78,098,835	69,558,645	89.1%
2015	75,791,439	76,896,565	101.5%
2016	69,765,978	88,467,797	126.8%
Total	1,136,468,438	751,967,505	66.2%
Interest Adjusted	1,642,807,036	971,124,863	59.1%

	Earned Premium w/o Increase	Earned Premium w/Increase	Incurring Claims	Loss Ratio w/o Increase	Loss Ratio w/Increase
2017	64,019,486	67,750,235	75,439,998	117.8%	111.4%
2018	58,687,723	71,270,126	79,115,810	134.8%	111.0%
2019	53,703,187	69,432,592	84,331,488	157.0%	121.5%
2020	48,971,447	63,416,624	90,384,634	184.6%	142.5%
2021	44,526,789	57,750,014	95,008,093	213.4%	164.5%
2022	40,292,122	52,339,233	100,651,805	249.8%	192.3%
2023	36,350,019	47,297,322	101,421,751	279.0%	214.4%
2024	32,687,069	42,606,895	101,270,896	309.8%	237.7%
2025	29,314,131	38,281,524	104,728,305	357.3%	273.6%
2026	26,210,131	34,293,644	108,230,199	412.9%	315.6%
2027	23,353,063	30,615,684	111,449,978	477.2%	364.0%
2028	20,738,049	27,242,404	114,075,318	550.1%	418.7%
2029	18,349,510	24,153,867	116,396,600	634.3%	481.9%
2030	16,168,551	21,325,808	118,577,343	733.4%	556.0%
2031	14,189,917	18,753,501	119,871,518	844.8%	639.2%
2032	12,390,308	16,406,674	121,013,477	976.7%	737.6%
2033	10,783,899	14,306,797	119,725,356	1110.2%	836.8%
2034	9,359,892	12,441,923	116,675,392	1246.5%	937.8%
2035	8,089,653	10,774,162	114,536,548	1415.8%	1063.1%
2036	6,957,658	9,283,978	112,576,356	1618.0%	1212.6%
2037	5,954,244	7,959,880	110,524,201	1856.2%	1388.5%
2038	5,071,126	6,791,991	107,573,936	2121.3%	1583.8%
2039	4,297,748	5,767,042	103,406,149	2406.1%	1793.1%
2040	3,621,061	4,868,039	98,446,376	2718.7%	2022.3%
2041	3,035,065	4,087,657	93,040,228	3065.5%	2276.1%
2042	2,527,092	3,409,393	87,557,667	3464.8%	2568.1%
2043	2,092,260	2,827,522	81,411,105	3891.1%	2879.2%
2044	1,725,680	2,336,555	74,340,450	4307.9%	3181.6%
2045	1,414,391	1,918,794	67,481,363	4771.1%	3516.9%
2046	1,153,663	1,568,018	60,823,536	5272.2%	3879.0%
2047	936,682	1,275,477	54,600,261	5829.1%	4280.8%
2048	756,229	1,031,688	48,654,932	6433.9%	4716.1%
2049	606,964	829,756	42,865,867	7062.3%	5166.1%
2050	483,436	662,292	37,364,510	7728.9%	5641.7%
2051	382,875	525,601	32,294,421	8434.7%	6144.3%
2052	301,830	415,119	27,861,158	9230.7%	6711.6%
2053	235,902	324,972	23,829,857	10101.6%	7332.9%
2054	183,353	253,090	20,023,759	10920.9%	7911.7%
2055	141,081	195,211	16,646,762	11799.5%	8527.6%
2056	107,707	149,396	13,677,320	12698.6%	9155.1%
2057	82,106	114,136	11,239,893	13689.4%	9847.8%
2058	62,558	87,158	9,222,732	14742.7%	10581.6%
2059	47,130	65,812	7,478,552	15867.8%	11363.5%
2060	35,040	49,073	5,936,670	16942.7%	12097.7%
2061	25,767	36,208	4,605,307	17872.7%	12718.9%
2062	19,075	26,880	3,591,435	18828.0%	13360.7%
2063	14,186	20,030	2,835,803	19990.5%	14157.6%
2064	10,418	14,734	2,221,778	21326.5%	15079.1%
2065	7,524	10,659	1,707,239	22692.0%	16016.2%
2066	5,349	7,597	1,263,583	23623.2%	16633.7%
2067	3,783	5,379	936,453	24751.1%	17410.6%
2068	2,500	3,551	702,289	28093.8%	19778.8%
2069	1,422	2,051	526,602	37038.4%	25680.4%
2070	17	20	378,014	2207024.5%	1867809.6%
2071	1	1	36,845	6889447.2%	6265382.0%
2072	0	0	10	9826.1%	8152.6%
2073	0	0	1	0.0%	0.0%

	Earned Premium w/o Increase	Earned Premium With Increase	Incurring Claims	Loss Ratio w/o Increase	Loss Ratio With Increase
Past Experience @ 4.5%	1,642,807,036	1,642,807,036	971,124,863	59.1%	59.1%
Anticipated Experience @ 4.5%	452,601,928	570,245,258	1,740,015,881	384.4%	305.1%
Lifetime Experience @ 4.5%	2,095,408,964	2,213,052,294	2,711,140,743	129.4%	122.5%

Lifetime Experience (Nationwide) as of 06/30/2012
Pre-Rate Stabilization (Forms LT50, NH50, HCA, LTA and NHA)

Non-Lifetime Benefit Periods

Year	Actual				
	Earned Premium	Incurred Claims	Loss Ratio		
1997	493,144	0	0.0%		
1998	2,879,303	112,177	3.7%		
1999	5,164,376	687,964	13.3%		
2000	8,538,676	1,407,135	16.5%		
2001	13,290,762	2,738,699	20.6%		
2002	19,718,256	5,076,172	25.7%		
2003	26,906,912	4,000,864	14.9%		
2004	29,821,612	6,331,213	21.2%		
2005	30,077,474	9,428,248	31.3%		
2006	29,211,252	9,729,882	33.3%		
2007	28,499,600	12,971,656	45.5%		
2008	27,996,984	14,397,151	51.4%		
2009	26,715,081	16,859,273	63.1%		
2010	25,410,395	21,103,140	83.0%		
2011	24,576,577	22,979,818	93.5%		
Total	299,300,404	127,823,391	42.7%		
Year	Revised				
	Earned Premium w/o Increase	Earned Premium w/Increase	Incurred Claims	Loss Ratio w/o Increase	Loss Ratio w/Increase
2012	22,771,901	22,771,901	20,740,789	91.1%	91.1%
2013	20,887,943	25,065,531	19,199,849	91.9%	76.6%
2014	19,257,465	23,940,880	17,379,050	90.2%	72.6%
2015	17,782,909	22,107,713	18,300,779	102.9%	82.8%
2016	16,366,871	20,347,294	19,308,395	118.0%	94.9%
2017	15,009,214	18,659,454	20,366,561	135.7%	109.1%
2018	13,714,363	17,049,695	21,417,353	156.2%	125.6%
2019	12,483,765	15,519,817	22,942,257	183.8%	131.8%
2020	11,313,441	14,064,870	24,394,879	215.6%	173.4%
2021	10,204,306	12,685,993	25,562,988	250.5%	201.5%
2022	9,153,944	11,380,183	27,559,779	301.1%	242.2%
2023	8,170,034	10,156,986	27,385,876	335.2%	269.6%
2024	7,266,256	9,033,410	26,537,952	365.2%	293.8%
2025	6,426,693	7,989,664	26,960,298	419.5%	337.4%
2026	5,640,875	7,012,736	27,319,596	484.3%	389.6%
2027	4,934,468	6,134,530	27,647,149	560.3%	450.7%
2028	4,303,157	5,349,685	27,860,129	647.4%	520.8%
2029	3,735,855	4,644,415	27,914,854	747.2%	601.0%
2030	3,227,503	4,012,432	27,693,815	858.1%	690.2%
2031	2,771,723	3,445,806	27,371,449	987.5%	794.3%
2032	2,364,513	2,939,562	27,081,946	1145.3%	921.3%
2033	2,005,483	2,493,217	26,078,834	1300.4%	1046.0%
2034	1,695,445	2,107,777	24,552,393	1448.1%	1164.8%
2035	1,427,333	1,774,461	23,357,715	1636.5%	1316.3%
2036	1,193,961	1,484,332	22,122,429	1852.9%	1490.4%
2037	991,966	1,233,212	20,874,842	2104.4%	1692.7%
2038	819,531	1,018,841	19,591,283	2390.5%	1922.9%
2039	674,521	838,564	18,219,119	2701.0%	2172.7%
2040	552,896	687,361	16,755,734	3030.5%	2437.7%
2041	449,702	559,070	15,345,804	3412.4%	2744.9%
2042	361,471	449,380	13,913,206	3849.1%	3096.1%
2043	288,254	358,358	12,481,694	4330.1%	3483.0%
Total	228,247,761	277,317,131	724,238,797	317.3%	261.2%
Past Experience	Earned Premium w/o Increase	Earned Premium With Increase	Incurred Claims	Loss Ratio w/o Increase	Loss Ratio With Increase
	299,300,404	299,300,404	127,823,391	42.7%	42.7%
Anticipated Experience	228,247,761	277,317,131	724,238,797	317.3%	261.2%
	527,548,165	576,617,535	852,062,188	161.5%	147.8%
Lifetime Experience	387,671,493	387,671,493	152,823,125	39.4%	39.4%
	168,132,648	202,760,231	390,363,572	232.2%	192.5%
Lifetime Experience @ 4.5%	555,804,141	590,431,724	543,186,696	97.7%	92.0%

Note: The Earned Premium with Increase includes the 20% rate increase to the 1-Year, 2-Year and 3-Year Benefit Periods to be effective in 2013, and the 20% increase to the 5-Year Benefit Period to be effective in 2013 and the additional 10% increase to the 5-Year Benefit Period to be effective in 2014.

Lifetime Experience (Nationwide) as of 12/31/2014
Pre-Rate Stabilization (Forms LT50, NH50, HCA, LTA and NHA)

Premiums at the Virginia Rate Level
Non-Lifetime Benefit Periods

Year	Virginia Rate Level Earned Premium	Incurred Claims Discounted to Incurred Year	Loss Ratio
	493,144	0	0.0%
1997	493,144	0	0.0%
1998	2,879,303	107,337	3.7%
1999	5,164,376	620,403	12.0%
2000	8,538,676	1,279,039	15.0%
2001	13,291,034	2,429,334	18.3%
2002	19,718,256	4,609,517	23.4%
2003	26,161,646	3,660,231	14.0%
2004	26,346,243	5,771,160	21.9%
2005	26,128,236	8,629,972	33.0%
2006	25,202,065	8,904,639	35.3%
2007	26,556,561	11,650,538	43.9%
2008	28,547,868	13,345,114	46.7%
2009	27,170,713	15,787,971	58.1%
2010	25,819,457	17,585,716	68.1%
2011	24,490,069	20,554,205	83.9%
2012	24,453,662	26,390,188	107.9%
2013	26,798,097	24,813,474	92.6%
2014	27,611,723	18,165,434	65.8%
Total	365,371,128	184,304,271	50.4%
Year	Earned Premium	Incurred Claims	Loss Ratio
	25,574,482	20,057,519	78.4%
2015	23,347,338	20,796,633	89.1%
2016	21,281,849	21,510,348	101.1%
2017	19,373,982	22,155,288	114.4%
2018	17,593,646	23,106,564	131.6%
2019	15,940,014	24,012,761	150.6%
2020	14,381,055	24,514,860	170.5%
2021	12,921,045	25,434,750	196.8%
2022	11,549,287	24,973,161	216.2%
2023	10,290,727	24,371,697	236.8%
2024	9,140,163	24,461,948	267.6%
2025	8,084,295	24,570,954	303.9%
2026	7,120,005	24,611,158	345.7%
2027	6,244,276	24,487,995	392.2%
2028	5,453,674	24,236,445	444.4%
2029	4,743,589	23,848,971	502.8%
2030	4,107,648	23,394,326	569.5%
2031	3,541,431	22,914,637	647.0%
2032	3,038,032	21,961,226	722.9%
2033	2,595,577	20,844,962	803.1%
2034	2,206,883	19,944,756	903.8%
2035	1,866,494	19,008,040	1018.4%
2036	1,570,589	18,039,438	1148.6%
2037	1,314,630	16,999,368	1293.1%
2038	1,094,513	15,832,409	1446.5%
2039	906,318	14,561,723	1606.7%
2040	746,006	13,323,364	1786.9%
2041	610,565	12,099,779	1981.7%
2042	496,520	10,892,540	2193.8%
2043	401,312	9,648,852	2404.3%
2044			
Total	237,134,634	606,967,619	256.0%
Past Experience	Earned Premium	Incurred Claims	Loss Ratio
	365,371,128	184,304,271	50.4%
Anticipated Experience	237,535,946	616,616,471	259.6%
	602,907,074	800,920,741	132.8%
Lifetime Experience	506,976,629	231,590,441	45.7%
	177,837,403	360,181,883	202.5%
Lifetime Experience @ 4.5%	684,814,033	591,772,324	86.4%

Lifetime Experience (Nationwide) as of 12/31/2016
Pre-Rate Stabilization (Forms LT50, NH50, HCA, LTA and NHA)

Premiums at the Virginia Rate Level
Non-Lifetime Benefit Periods

Year	Virginia Rate Level Earned Premium	Incurred Claims Discounted to Incurred Year	Loss Ratio
	493,144	0	0.0%
1997	493,144	0	0.0%
1998	2,879,303	107,337	3.7%
1999	5,164,376	620,403	12.0%
2000	8,538,676	1,279,039	15.0%
2001	13,291,034	2,429,334	18.3%
2002	19,718,256	4,609,517	23.4%
2003	26,161,646	3,660,231	14.0%
2004	26,346,243	5,771,160	21.9%
2005	26,128,236	8,629,972	33.0%
2006	25,202,065	8,914,082	35.0%
2007	26,556,561	11,678,078	44.0%
2008	28,547,868	13,342,930	46.7%
2009	27,170,713	15,858,480	58.4%
2010	25,819,457	17,408,466	67.4%
2011	24,490,069	20,794,851	84.9%
2012	24,453,662	25,050,446	102.4%
2013	26,798,097	24,236,077	90.4%
2014	27,611,723	24,831,729	89.9%
2015	27,318,093	27,001,863	98.8%
2016	27,148,364	34,148,099	125.8%
Total	419,837,584	250,272,094	59.6%
Year	Earned Premium	Incurred Claims	Loss Ratio
	24,608,891	27,636,882	112.3%
2017	22,304,600	28,416,518	127.4%
2018	20,192,418	29,611,006	146.6%
2019	18,220,232	30,735,018	168.7%
2020	16,397,100	31,622,766	192.9%
2021	14,682,828	32,784,022	223.3%
2022	13,096,433	32,382,296	247.3%
2023	11,633,024	31,821,503	273.5%
2024	10,297,614	32,100,913	311.7%
2025	9,082,829	32,393,466	356.6%
2026	7,978,650	32,599,205	408.6%
2027	6,981,193	32,613,782	467.2%
2028	6,084,175	32,495,957	534.1%
2029	5,280,137	32,191,361	609.7%
2030	4,563,230	31,791,974	696.7%
2031	3,924,942	31,314,292	797.8%
2032	3,364,633	30,248,034	899.0%
2033	2,874,456	28,846,686	1003.6%
2034	2,445,247	27,601,218	1128.8%
2035	2,070,165	26,458,888	1278.1%
2036	1,743,703	25,380,908	1455.6%
2037	1,461,171	24,177,026	1654.6%
2038	1,217,867	22,768,954	1869.6%
2039	1,009,103	21,186,398	2099.5%
2040	831,844	19,406,995	2357.1%
2041	681,564	18,018,887	2643.8%
2042	555,308	16,419,637	2956.9%
2043	449,688	14,741,503	3278.2%
2044	361,580	13,110,603	3625.9%
2045	289,416	11,561,286	3994.7%
2046	230,535	10,149,439	4402.6%
2047	182,496	8,853,963	4851.6%
2048	143,283	7,641,022	5332.8%
2049	111,489	6,515,510	5844.1%
2050	86,279	5,514,288	6391.2%
2051	66,559	4,640,354	6971.8%
2052	51,023	3,883,863	7612.0%
2053	38,698	3,209,977	8295.0%
2054	28,892	2,619,423	9066.3%
2055	21,376	2,113,521	9887.2%
2056	15,823	1,699,948	10743.4%
2057	11,684	1,365,341	11685.6%
2058	8,522	1,085,897	12741.6%
2059	6,066	852,813	14059.9%
2060	4,233	655,912	15495.6%
2061	2,990	499,460	16705.3%
2062	2,148	386,898	18010.2%
2063	1,532	299,650	19561.4%
2064	1,071	228,822	21356.9%
2065	728	169,082	23211.7%
2066	505	123,691	24479.6%
2067	339	91,921	27097.8%
2068	137	67,772	49644.0%
2069	10	48,386	491238.8%
2070	0	33,070	7810123.4%
2071	0	4	6232.7%
2072	0	0	0.0%
2073	0	0	0.0%
Total	215,700,459	865,387,654	401.2%</

Lifetime Experience (Nationwide) as of 06/30/2012
Pre-Rate Stabilization (Forms LT50, NH50, HCA, LTA and NHA)

Lifetime Benefit Period					
Year	Actual				
	Earned Premium		Incurred Claims	Loss Ratio	
1997	279,977		0	0.0%	
1998	2,595,131		264,595	10.2%	
1999	5,659,399		733,059	13.0%	
2000	11,774,776		1,870,693	15.9%	
2001	20,596,711		7,204,732	35.0%	
2002	30,490,504		7,048,038	23.1%	
2003	41,347,298		12,320,422	29.8%	
2004	46,704,535		16,024,233	34.3%	
2005	47,207,072		19,365,825	41.0%	
2006	46,402,671		18,562,860	40.0%	
2007	45,952,833		26,635,259	58.0%	
2008	45,842,454		34,681,570	75.7%	
2009	44,559,942		31,923,661	71.6%	
2010	43,124,644		44,906,780	104.1%	
2011	41,181,809		39,957,474	97.0%	
Total	473,819,756		261,499,201	55.2%	
	Revised				
	Earned Premium w/o Increase	Earned Premium w/Increase	Incurred Claims	Loss Ratio w/o Increase	Loss Ratio w/Increase
2012	38,101,857	38,101,857	42,860,981	112.5%	112.5%
2013	34,792,885	45,230,750	37,211,543	107.0%	82.3%
2014	32,036,596	49,977,090	31,899,998	99.6%	63.8%
2015	29,604,782	46,183,459	34,116,181	115.2%	73.9%
2016	27,262,069	42,528,828	36,519,306	134.0%	85.9%
2017	25,009,986	39,015,579	39,059,538	156.2%	100.1%
2018	22,856,499	35,656,138	41,651,537	182.2%	116.8%
2019	20,804,076	32,454,358	45,667,827	219.5%	140.7%
2020	18,845,917	29,399,631	51,257,601	272.0%	174.3%
2021	16,986,040	26,498,222	54,479,329	320.7%	205.6%
2022	15,221,271	23,745,182	59,122,751	388.4%	249.0%
2023	13,567,143	21,164,744	58,685,547	432.6%	277.3%
2024	12,048,639	18,795,878	57,308,377	475.6%	304.9%
2025	10,640,771	16,599,603	59,302,962	557.3%	357.3%
2026	9,325,354	14,547,552	62,549,324	670.7%	430.0%
2027	8,140,767	12,699,596	65,170,850	800.5%	513.2%
2028	7,081,684	11,047,427	66,627,484	940.8%	603.1%
2029	6,130,952	9,564,285	67,739,982	1104.9%	708.3%
2030	5,280,069	8,236,908	68,727,563	1301.6%	834.4%
2031	4,519,498	7,050,418	68,844,558	1523.3%	976.5%
2032	3,841,802	5,993,211	69,031,101	1796.8%	1151.8%
2033	3,246,394	5,064,374	67,211,289	2070.3%	1327.1%
2034	2,734,379	4,265,631	64,094,791	2344.0%	1502.6%
2035	2,292,957	3,577,014	61,783,473	2694.5%	1727.2%
2036	1,910,784	2,980,823	59,476,863	3112.7%	1995.3%
2037	1,581,676	2,467,414	57,093,009	3609.7%	2313.9%
2038	1,302,035	2,031,174	54,357,927	4174.8%	2676.2%
2039	1,067,475	1,665,262	51,161,372	4792.7%	3072.3%
2040	871,322	1,359,262	47,744,372	5479.5%	3512.5%
2041	705,923	1,101,240	44,351,687	6282.8%	4027.4%
2042	565,443	882,091	41,315,862	7306.8%	4683.9%
2043	449,431	701,113	37,977,967	8450.2%	5416.8%
Total	378,826,475	560,586,111	1,704,402,952	449.9%	304.0%
Past Experience	Earned Premium	Earned Premium	Loss Ratio	Loss Ratio	
	w/o Increase	With Increase	w/o Increase	With Increase	
Past Experience	473,819,756	473,819,756	261,499,201	55.2%	55.2%
Anticipated Experience	378,826,475	560,586,111	1,704,402,952	449.9%	304.0%
Lifetime Experience	852,646,231	1,034,405,867	1,965,902,154	230.6%	190.1%
Past Experience @ 4.5%	608,228,555	608,228,555	314,012,837	51.6%	51.6%
Anticipated Experience @ 4.5%	279,569,950	406,788,382	874,889,639	312.9%	215.1%
Lifetime Experience @ 4.5%	887,798,505	1,015,016,937	1,188,902,476	133.9%	117.1%

Note: The Earned Premium with the Increase includes the 30% rate increase to be effective in 2013 and the additional 20% increase to be effective in 2014.

Lifetime Experience (Nationwide) as of 12/31/2014
Pre-Rate Stabilization (Forms LT50, NH50, HCA, LTA and NHA)

Premiums at the Virginia Rate Level					
Lifetime Benefit Period					
Year	Virginia Rate Level Earned Premium	Incurred Claims Discounted to Incurred Year	Loss Ratio		
1997	379,977	0	0.0%		
1998	2,595,131	229,543	8.8%		
1999	5,659,399	581,891	10.3%		
2000	11,774,776	1,523,173	12.9%		
2001	20,596,912	4,549,955	22.1%		
2002	30,490,543	5,577,230	18.3%		
2003	39,924,279	9,426,115	23.6%		
2004	40,127,736	13,193,942	32.9%		
2005	39,955,932	16,589,634	41.0%		
2006	39,035,372	15,744,688	40.3%		
2007	42,174,929	22,069,907	52.3%		
2008	46,681,645	29,532,300	63.3%		
2009	45,285,665	31,364,841	69.3%		
2010	43,803,230	43,711,183	99.8%		
2011	40,526,545	46,462,820	114.6%		
2012	35,360,950	48,000,576	135.7%		
2013	38,293,528	49,964,356	130.5%		
2014	44,695,854	48,511,760	108.5%		
Total	567,362,405	386,833,914	68.2%		
Year	Earned Premium	Incurred Claims	Loss Ratio		
2015	44,226,116	39,920,614	90.3%		
2016	41,251,752	42,840,202	103.9%		
2017	38,370,716	45,839,730	119.5%		
2018	35,613,893	48,881,139	137.3%		
2019	32,967,553	53,095,205	161.1%		
2020	30,428,677	57,870,814	190.2%		
2021	27,974,162	61,420,171	219.6%		
2022	25,619,240	65,612,884	256.1%		
2023	23,350,332	66,915,841	286.6%		
2024	21,229,406	67,224,430	316.7%		
2025	19,207,219	70,262,320	365.8%		
2026	17,227,049	73,313,835	425.6%		
2027	15,510,246	76,137,629	490.9%		
2028	13,938,511	78,539,065	563.5%		
2029	12,484,873	80,775,594	647.0%		
2030	11,140,309	83,027,279	745.3%		
2031	9,895,798	84,514,981	854.0%		
2032	8,753,425	85,888,251	981.2%		
2033	7,702,359	85,542,950	1110.6%		
2034	6,751,021	84,107,567	1245.8%		
2035	5,895,758	83,745,148	1420.4%		
2036	5,121,023	82,972,536	1620.2%		
2037	4,424,223	81,666,626	1845.9%		
2038	3,802,608	79,625,206	2094.0%		
2039	3,252,722	76,630,648	2355.9%		
2040	2,769,109	73,084,573	2639.3%		
2041	2,343,650	69,153,102	2950.7%		
2042	1,971,572	65,204,898	3307.3%		
2043	1,646,810	60,709,287	3686.5%		
2044	1,366,846	55,426,089	4055.0%		
Total	474,870,134	2,024,522,521	426.3%		
Past Experience	Earned Premium	Incurred Claims	Loss Ratio		
Past Experience	567,362,405	386,833,914	68.2%		
Anticipated Experience	476,236,981	2,079,948,609	436.7%		
Lifetime Experience	1,043,599,385	2,466,782,523	236.4%		
Past Experience @ 4.5%	782,483,681	480,802,775	61.4%		
Anticipated Experience @ 4.5%	345,179,856	1,097,300,850	317.9%		
Lifetime Experience @ 4.5%	1,127,663,537	1,578,103,625	139.9%		

Lifetime Experience (Nationwide) as of 12/31/2016
Pre-Rate Stabilization (Forms LT50, NH50, HCA, LTA and NHA)

Premiums at the Virginia Rate Level				
Lifetime Benefit Period				
Year	Virginia Rate Level Earned Premium	Incurred Claims Discounted to Incurred Year	Loss Ratio	
1997	379,977	0	0.0%	
1998	2,595,131	229,543	8.8%	
1999	5,659,399	581,891	10.3%	
2000	11,774,776	1,523,173	12.9%	
2001	20,596,912	4,549,954	22.1%	
2002	30,490,543	5,455,216	17.9%	
2003	39,924,279	9,776,788	24.5%	
2004	40,127,736	13,187,176	32.9%	
2005	39,955,932	16,226,697	40.6%	
2006	39,035,372	15,302,440	39.2%	
2007	42,117,903	21,894,757	52.0%	
2008	46,531,336	31,010,819	66.6%	
2009	45,138,622	29,943,118	66.3%	
2010	43,662,093	43,806,976	100.3%	
2011	40,391,808	46,122,333	114.2%	
2012	35,250,708	46,658,968	132.4%	
2013	38,283,642	48,844,490	127.6%	
2014	44,695,854	40,198,060	89.9%	
2015	42,689,915	45,730,248	107.1%	
2016	37,209,476	48,433,867	130.2%	
Total	646,511,416	469,476,515	72.6%	
Year	Earned Premium	Incurred Claims	Loss Ratio	
2017	34,439,921	42,193,074	122.5%	
2018	31,818,616	44,812,166	140.8%	
2019	29,326,376	48,419,978	165.1%	
2020	26,927,980	52,866,944	196.3%	
2021	24,646,112	56,232,539	228.2%	
2022	22,450,152	60,253,140	268.4%	
2023	20,396,862	61,370,608	300.9%	
2024	18,478,722	60,908,534	334.5%	
2025	16,701,047	64,696,069	387.4%	
2026	15,051,620	67,610,519	449.2%	
2027	13,519,982	70,353,930	520.4%	
2028	12,105,426	72,742,987	600.9%	
2029	10,799,892	74,978,474	694.3%	
2030	9,593,278	77,268,721	805.4%	
2031	8,486,579	78,840,270	929.0%	
2032	7,466,748	80,346,493	1076.1%	
2033	6,547,344	80,215,409	1225.2%	
2034	5,726,083	78,807,595	1376.8%	
2035	4,985,822	78,067,955	1558.8%	
2036	4,318,998	77,388,940	1791.8%	
2037	3,722,180	76,560,536	2056.9%	
2038	3,192,356	75,029,404	2350.3%	
2039	2,724,507	72,577,912	2663.9%	
2040	2,311,252	69,572,431	3010.2%	
2041	1,950,074	66,153,320	3392.3%	
2042	1,633,809	62,671,060	3835.9%	
2043	1,360,856	58,591,257	4305.5%	
2044	1,103,052	53,748,501	4756.3%	
2045	932,620	49,051,539	5259.5%	
2046	765,718	44,658,757	5806.2%	
2047	625,733	40,130,452	6413.3%	
2048	508,453	35,943,278	7069.1%	
2049	410,984	31,818,773	7742.1%	
2050	329,729	27,874,097	8453.6%	
2051	262,955	24,202,988	9204.2%	
2052	208,579	20,991,863	10064.2%	
2053	163,872	18,033,685	11004.7%	
2054	128,209	15,203,525	11858.4%	
2055	99,452	12,685,072	12754.9%	
2056	76,546	10,457,274	13661.5%	
2057	58,773	8,632,492	14681.1%	
2058	45,116	7,107,878	15754.7%	
2059	34,238	5,783,164	16891.0%	
2060	25,708	4,598,691	17887.9%	
2061	19,121	3,572,283	18682.9%	
2062	14,287	2,797,678	19581.5%	
2063	10,696	2,215,977	20716.8%	
2064	7,896	1,739,406	22027.6%	
2065	5,736	1,337,719	23232.0%	
2066	4,111	990,779	24085.8%	
2067	2,917	735,316	25205.7%	
2068	1,922	552,194	28727.1%	
2069	1,151	415,108	30778.4%	
2070	6	298,193	4881698.3%	
2071	0	761	724485.7%	
2072	0	6	15332.9%	
2073	0	1	0.0%	
Total	346,557,175	2,235,802,685	645.1%	
Experience	Earned Premium	Incurred Claims	Loss Ratio	
Past Experience	646,511,416	469,476,515	72.6%	
Anticipated Experience	346,557,175	2,235,802,685	645.1%	
Lifetime Experience	937,068,591	2,705,279,200	272.4%	
Past Experience @ 4.5%	937,117,727	2,108,562	65.1%	
Anticipated Experience @ 4.5%	253,825,795	1,118,906,233	440.8%	
Lifetime Experience @ 4.5%	1,190,943,521	1,729,114,794	145.2%	

Lifetime Experience (Nationwide) as of 06/30/2012
Pre-Rate Stabilization (Forms LT50, NH50, HCA, LTA and NHA)

All Benefit Periods

	Actual				
Year	Earned Premium		Incurred Claims	Loss Ratio	
1997	873,120		0	0.0%	
1998	5,474,434		376,772	6.9%	
1999	10,823,775		1,421,022	13.1%	
2000	20,313,452		3,277,828	16.1%	
2001	33,887,473		9,943,431	29.3%	
2002	50,208,760		12,124,210	24.1%	
2003	68,254,210		16,321,287	23.9%	
2004	76,526,146		22,355,445	29.2%	
2005	77,284,546		28,794,073	37.3%	
2006	75,613,922		28,292,742	37.4%	
2007	74,452,433		39,606,916	53.2%	
2008	73,839,439		49,078,721	66.5%	
2009	71,275,024		48,782,934	68.4%	
2010	68,535,038		66,009,920	96.3%	
2011	65,758,386		62,937,292	95.7%	
Total	773,120,160		389,322,592	50.4%	
	Revised				
	Earned Premium w/o Increase	Earned Premium w/Increase	Incurred Claims	Loss Ratio w/o Increase	Loss Ratio w/Increase
2012	60,873,758	60,873,758	63,601,771	104.5%	104.5%
2013	55,680,827	70,296,281	56,411,393	101.3%	80.2%
2014	51,294,061	73,917,970	49,279,048	96.1%	41.6%
2015	47,387,691	68,291,172	52,416,960	110.6%	76.8%
2016	43,628,940	62,876,122	55,827,701	128.0%	88.8%
2017	40,019,200	57,675,033	59,426,099	148.5%	103.0%
2018	36,570,861	52,705,833	63,068,889	172.5%	119.7%
2019	33,287,841	47,974,175	68,610,084	206.1%	143.0%
2020	30,159,358	43,464,501	75,652,480	250.8%	174.1%
2021	27,190,346	39,184,215	80,042,317	294.4%	204.3%
2022	24,375,214	35,125,365	86,682,530	355.6%	246.8%
2023	21,737,177	31,321,730	86,071,423	396.0%	274.8%
2024	19,314,896	27,829,287	83,846,328	434.1%	301.3%
2025	17,067,463	24,589,267	86,263,259	505.4%	330.8%
2026	14,966,229	21,560,288	89,868,919	600.5%	416.8%
2027	13,075,235	18,834,126	92,817,999	709.9%	492.8%
2028	11,384,841	16,397,111	94,487,613	829.9%	576.2%
2029	9,866,807	14,208,700	95,654,836	969.5%	673.2%
2030	8,507,572	12,249,340	96,421,378	1133.4%	787.2%
2031	7,291,221	10,496,224	96,216,007	1319.6%	916.7%
2032	6,206,315	8,932,773	96,113,047	1548.6%	1076.0%
2033	5,251,877	7,557,591	93,290,123	1776.3%	1234.4%
2034	4,429,824	6,373,408	88,647,184	2001.1%	1390.9%
2035	3,720,291	5,351,474	85,141,188	2288.6%	1591.0%
2036	3,104,745	4,465,155	81,599,293	2628.2%	1827.5%
2037	2,573,642	3,700,627	77,967,850	3029.5%	2106.9%
2038	2,121,566	3,050,015	73,949,209	3485.6%	2424.6%
2039	1,741,996	2,503,826	69,380,492	3982.8%	2771.0%
2040	1,424,218	2,046,623	64,500,107	4528.8%	3151.5%
2041	1,155,625	1,660,310	59,697,491	5165.8%	3595.6%
2042	926,914	1,331,471	55,229,069	5958.4%	4148.0%
2043	737,686	1,059,471	50,459,661	6840.3%	4762.7%
Total	607,074,236	837,903,242	2,428,641,750	400.1%	289.8%
	Earned Premium w/o Increase	Earned Premium With Increase	Incurred Claims	Loss Ratio w/o Increase	Loss Ratio With Increase
Past Experience	773,120,160	773,120,160	389,322,592	50.4%	50.4%
Anticipated Experience	607,074,236	837,903,242	2,428,641,750	400.1%	289.8%
Lifetime Experience	1,380,194,396	1,611,023,402	2,817,964,342	204.2%	174.9%
	Anticipated Experience @ 4.5%		Anticipated Experience @ 4.5%		
Past Experience	995,900,047	995,900,047	466,835,962	46.9%	46.9%
Anticipated Experience @ 4.5%	447,702,599	609,548,614	1,265,253,210	282.6%	207.6%
Lifetime Experience @ 4.5%	1,443,602,646	1,605,448,661	1,732,089,172	120.0%	107.9%

Note: The Earned Premium with Increase includes the rate adjustments described in Exhibits 1A and 1B.

Lifetime Experience (Nationwide) as of 12/31/2014
Pre-Rate Stabilization (Forms LT50, NH50, HCA, LTA and NHA)

Premiums at the Virginia Rate Level
All Benefit Periods Combined

	Virginia Rate Level	Incurred Claims Discounted to	
Year	Earned Premium	Incurred Year	Loss Ratio
1997	873,120	0	0.0%
1998	5,474,434	336,880	6.2%
1999	10,823,775	1,202,294	11.1%
2000	20,313,452	2,802,212	13.8%
2001	33,887,945	6,979,289	20.6%
2002	50,208,799	10,186,747	20.3%
2003	66,085,925	13,086,346	19.8%
2004	66,473,979	18,965,102	28.5%
2005	66,084,168	25,019,606	37.9%
2006	64,237,437	24,649,327	38.4%
2007	68,731,490	33,720,445	49.1%
2008	75,229,514	42,877,414	57.0%
2009	72,456,378	47,152,812	65.1%
2010	69,622,687	61,296,899	88.0%
2011	65,016,614	67,017,024	103.1%
2012	59,814,612	74,390,763	124.4%
2013	65,091,625	74,777,830	114.9%
2014	72,307,577	66,677,194	92.2%
Total	932,733,533	571,138,185	61.2%
	Earned Premium	Incurred Claims	Loss Ratio
2015	69,800,598	59,978,132	85.9%
2016	64,599,091	63,636,835	98.5%
2017	59,652,564	67,350,079	112.9%
2018	54,987,875	71,036,427	129.2%
2019	50,561,199	76,201,769	150.7%
2020	46,368,691	81,883,575	176.6%
2021	42,355,216	85,935,032	202.9%
2022	38,540,285	91,047,634	236.2%
2023	34,899,619	91,889,002	263.3%
2024	31,520,133	91,596,126	290.6%
2025	28,347,381	94,724,269	334.2%
2026	25,311,345	97,884,788	386.7%
2027	22,630,251	100,748,787	445.2%
2028	20,182,787	103,027,060	510.5%
2029	17,938,548	105,012,039	585.4%
2030	15,883,899	106,876,250	672.9%
2031	14,003,447	107,909,306	770.6%
2032	12,294,857	108,802,888	884.9%
2033	10,740,391	107,504,175	1000.9%
2034	9,346,598	104,952,529	1122.9%
2035	8,102,641	103,689,903	1279.7%
2036	6,987,517	101,980,575	1459.5%
2037	5,994,811	99,706,064	1663.2%
2038	5,117,238	96,624,574	1888.2%
2039	4,347,235	92,463,056	2126.9%
2040	3,675,427	87,646,296	2384.7%
2041	3,089,656	82,476,466	2669.4%
2042	2,582,137	77,304,677	2993.8%
2043	2,143,330	71,601,827	3340.7%
2044	1,768,159	65,074,940	3680.4%
Total	713,772,927	2,696,565,080	377.8%
	Earned Premium	Incurred Claims	Loss Ratio
Past Experience	932,733,533	571,138,185	61.2%
Anticipated Experience	713,772,927	2,696,565,080	377.8%
Lifetime Experience	1,646,506,460	3,267,703,265	198.5%
Past Experience @ 4.5%	1289,460,310	712,393,217	55.2%
Anticipated Experience @ 4.5%	523,017,259	1,457,482,732	278.7%
Lifetime Experience @ 4.5%	1,812,477,569	2,169,875,949	119.7%

Lifetime Experience (Nationwide) as of 12/31/2016
Pre-Rate Stabilization (Forms LT50, NH50, HCA, LTA and NHA)

Premiums at the Virginia Rate Level
All Benefit Periods Combined

	Virginia Rate Level	Incurred Claims Discounted to	
Year	Earned Premium	Incurred Year	Loss Ratio
1997	873,120	0	0.0%
1998	5,474,434	336,880	6.2%
1999	10,823,775	1,202,294	11.1%
2000	20,313,452	2,802,212	13.8%
2001	33,887,945	6,979,288	20.6%
2002	50,208,799	10,064,733	20.0%
2003	66,085,925	13,437,019	20.3%
2004	66,473,979	18,958,336	28.5%
2005	66,084,168	24,856,669	37.6%
2006	64,237,437	24,116,522	37.5%
2007	68,674,464	33,572,835	48.9%
2008	75,079,205	44,353,749	59.1%
2009	72,309,335	45,801,598	63.3%
2010	69,481,550	61,215,442	88.1%
2011	64,881,877	66,917,183	103.1%
2012	59,704,377	71,709,414	120.1%
2013	65,081,739	73,080,567	112.3%
2014	72,307,577	65,029,789	89.9%
2015	70,008,008	72,732,111	103.9%
2016	64,357,840	82,581,966	128.3%
Total	1,066,349,000	719,748,608	67.5%

	Earned Premium	Incurred Claims	Loss Ratio
2017	59,048,812	69,829,956	118.3%
2018	54,123,216	73,228,684	135.3%
2019	49,518,794	78,030,984	157.6%
2020	45,148,212	83,601,961	185.2%
2021	41,043,211	87,855,305	214.1%
2022	37,132,979	93,037,162	250.6%
2023	33,493,295	93,752,904	279.9%
2024	30,111,746	93,630,038	310.9%
2025	26,998,661	96,796,982	358.5%
2026	24,134,450	100,003,985	414.4%
2027	21,498,632	102,953,135	478.9%
2028	19,086,620	105,356,769	552.0%
2029	16,884,067	107,474,071	636.5%
2030	14,873,416	109,460,081	735.9%
2031	13,049,809	110,632,245	847.8%
2032	11,391,690	111,660,785	980.2%
2033	9,911,976	110,463,443	1114.4%
2034	8,600,538	107,654,281	1251.7%
2035	7,431,069	105,669,173	1422.0%
2036	6,389,164	103,847,828	1625.4%
2037	5,465,883	101,941,444	1865.0%
2038	4,653,526	99,206,430	2131.9%
2039	3,942,374	95,346,866	2418.5%
2040	3,320,355	90,758,829	2733.4%
2041	2,781,917	85,760,315	3082.8%
2042	2,315,373	80,689,947	3485.0%
2043	1,916,164	75,010,894	3914.6%
2044	1,579,740	68,490,005	4335.5%
2045	1,294,201	62,161,813	4803.1%
2046	1,055,134	56,020,043	5309.3%
2047	856,268	50,279,891	5872.0%
2048	690,949	44,797,242	6483.4%
2049	554,267	39,459,796	7119.3%
2050	441,218	34,389,607	7794.3%
2051	349,235	29,717,276	8509.3%
2052	275,138	25,632,216	9316.1%
2053	214,895	21,917,548	10199.2%
2054	166,907	18,413,502	11032.2%
2055	128,344	15,304,495	11924.5%
2056	97,922	12,570,794	12837.6%
2057	74,596	10,328,440	13845.8%
2058	56,800	8,473,219	14917.7%
2059	42,761	6,869,061	16064.0%
2060	31,774	5,451,504	17157.2%
2061	23,353	4,228,194	18105.2%
2062	17,277	3,297,138	19083.8%
2063	12,845	2,602,875	20264.2%
2064	9,428	2,039,056	21626.9%
2065	6,807	1,566,540	23013.6%
2066	4,839	1,159,161	23954.2%
2067	3,423	859,007	25098.5%
2068	2,261	644,115	28482.7%
2069	1,287	482,879	37517.2%
2070	16	346,579	2171790.5%
2071	1	33,832	6401040.7%
2072	0	1	9974.0%
2073	0	10	0.0%
Total	562,257,634	3,101,190,339	551.6%

	Earned Premium	Incurred Claims	Loss Ratio
Past Experience	1,066,349,000	719,748,608	67.5%
Anticipated Experience	562,257,634	3,101,190,339	551.6%
Lifetime Experience	1,628,606,616	3,820,938,948	234.6%

Past Experience @ 4.5%	1,547,684,016	937,062,488	60.2%
Anticipated Experience @ 4.5%	417,008,418	1,606,790,879	385.3%
Lifetime Experience @ 4.5%	1,964,692,434	2,538,853,367	129.2%

Lifetime Experience (Nationwide) as of 06/30/2012

Non-Lifetime Benefit Periods - Post Stabilization Experience

Year	Non-Interest Adjusted			Interest Adjusted		
	Original Premium	VA Rate Level Increased Premium	Incurred Claims	Original Premium	Increased Premium	Incurred Claims
1998	0	0	0	0	0	0
1999	0	0	0	0	0	0
2000	0	0	0	0	0	0
2001	5,564	0	0	8,833	0	0
2002	124,727	0	0	189,481	0	0
2003	959,199	0	0	1,394,432	0	0
2004	1,875,935	0	224,567	2,609,696	0	312,405
2005	2,108,071	0	69,500	2,806,345	0	92,522
2006	2,052,755	0	592,846	2,615,030	0	755,234
2007	1,956,742	236,629	373,844	2,385,377	288,464	455,736
2008	1,883,058	546,087	462,179	2,196,700	637,043	539,159
2009	1,830,940	530,972	785,783	2,043,924	592,738	877,190
2010	1,759,287	510,193	1,184,088	1,879,365	545,016	1,264,906
2011	1,682,106	487,811	1,123,747	1,719,537	498,666	1,148,753
Total	16,238,384	2,311,692	4,816,554	19,848,719	2,561,926	5,445,904
2012	1,557,309	451,620	688,591	1,523,410	441,789	673,601
2013	1,441,771	666,222	791,108	1,349,652	623,655	740,562
2014	1,334,299	787,681	925,643	1,195,260	705,602	829,188
2015	1,232,101	753,390	976,484	1,056,183	645,822	837,063
2016	1,133,371	693,020	1,050,225	929,713	568,490	861,507
2017	1,038,745	635,159	1,131,226	815,397	498,589	887,993
2018	948,328	579,872	1,217,853	712,365	435,589	914,827
2019	862,572	527,435	1,307,910	620,045	379,138	940,168
2020	781,416	477,811	1,366,874	537,519	328,676	940,243
2021	704,362	430,695	1,462,373	463,651	283,508	962,617
2022	631,887	386,379	1,569,658	398,032	243,384	988,745
2023	564,882	345,407	1,682,562	340,503	208,206	1,014,223
2024	502,650	307,354	1,819,257	289,943	177,291	1,049,399
2025	443,788	271,362	1,901,466	244,966	149,789	1,049,588
2026	390,475	238,763	1,966,834	206,256	126,119	1,038,918
2027	342,628	209,506	2,051,080	173,189	105,899	1,036,764
2028	299,287	183,004	2,152,741	144,767	88,520	1,041,293
2029	260,204	159,106	2,261,564	120,442	73,647	1,046,824
2030	225,032	137,600	2,331,949	99,676	60,949	1,032,922
2031	193,456	118,292	2,388,139	82,000	50,140	1,012,260
2032	165,404	101,139	2,435,427	67,090	41,024	987,850
2033	140,893	86,152	2,491,566	54,688	33,440	967,102
2034	119,486	73,062	2,554,709	44,381	27,138	948,910
2035	100,795	61,633	2,551,605	35,827	21,907	906,944
2036	84,490	51,663	2,501,107	28,738	17,572	850,713
2037	70,434	43,068	2,444,887	22,921	14,018	795,781
2038	58,415	35,719	2,405,803	18,195	11,126	749,339
2039	48,228	29,490	2,371,017	14,375	8,790	706,703
2040	39,579	24,201	2,275,086	11,289	6,903	648,909
2041	32,174	19,674	2,140,551	8,782	5,370	584,245
2042	25,948	15,866	1,976,377	6,777	4,144	516,206
2043	20,830	12,737	1,841,824	5,206	3,183	460,347
Total	15,795,239	8,914,083	59,033,493	11,621,243	6,389,415	28,021,752
Grand Total	32,033,622	11,225,775	63,850,046	31,469,962	8,951,341	33,467,657
Minimum Required Loss Ratios						
58% 85%						
Minimum PV Incurred Claims 18,252,578 7,608,640 25,861,218						
Dual Loss Ratio Test Met 33,467,657 > 25,861,218						

Lifetime Experience (Nationwide) as of 12/31/2014

Non-Lifetime Benefit Periods - Post Stabilization Experience

Year	Non-Interest Adjusted			Interest Adjusted		
	Original Premium	VA Rate Level Increased Premium	Incurred Claims	Original Premium	Increased Premium	Incurred Claims
1998	0	0	0	0	0	0
1999	0	0	0	0	0	0
2000	0	0	0	0	0	0
2001	5,564	0	0	10,080	0	0
2002	124,727	0	0	216,230	0	0
2003	959,199	0	0	1,591,278	0	0
2004	1,875,935	0	209,237	2,978,096	0	332,169
2005	2,108,071	0	65,865	3,202,506	0	100,060
2006	2,052,755	0	535,770	2,984,184	0	778,873
2007	1,956,742	236,629	347,698	2,722,111	329,185	483,698
2008	1,883,058	546,087	430,039	2,506,799	726,972	572,484
2009	1,830,940	530,972	652,788	2,332,457	676,412	831,595
2010	1,759,287	510,193	1,093,010	2,144,668	621,954	1,332,439
2011	1,682,106	487,811	582,273	1,962,277	569,060	679,256
2012	1,556,962	451,519	1,230,166	1,738,076	504,042	1,373,265
2013	1,478,031	682,977	1,655,406	1,578,912	729,593	1,768,394
2014	1,409,166	831,877	1,487,038	1,440,523	850,389	1,520,128
Total	20,682,542	4,278,066	8,289,290	27,408,197	5,007,607	9,772,362
2015	1,291,227	772,384	1,534,859	1,263,120	755,571	1,501,448
2016	1,181,549	706,777	1,593,171	1,106,057	661,619	1,491,379
2017	1,079,572	645,777	1,648,625	967,077	578,484	1,476,832
2018	985,297	589,383	1,698,646	844,617	505,232	1,456,116
2019	897,239	536,709	1,781,795	736,012	440,266	1,461,620
2020	815,316	487,704	1,862,883	640,009	382,840	1,462,332
2021	737,946	441,424	1,917,461	554,331	331,589	1,440,359
2022	665,272	397,951	2,004,781	478,219	286,060	1,441,102
2023	596,751	356,964	1,965,953	410,492	245,548	1,352,336
2024	533,734	319,268	1,917,643	351,334	210,160	1,262,301
2025	475,907	284,677	1,939,583	299,779	179,321	1,221,764
2026	422,623	252,804	1,963,842	254,571	152,386	1,183,775
2027	373,740	223,563	1,981,177	215,584	128,958	1,142,799
2028	329,138	196,883	1,983,378	181,681	108,677	1,094,802
2029	288,683	172,684	1,976,178	152,488	91,215	1,043,854
2030	252,166	150,840	1,956,670	127,463	76,245	989,043
2031	219,295	131,177	1,932,582	106,074	63,451	934,801
2032	189,855	113,567	1,903,536	87,879	52,567	881,101
2033	163,523	97,816	1,829,436	72,431	43,327	810,337
2034	140,268	83,906	1,738,803	59,456	35,565	737,026
2035	119,748	71,631	1,668,425	48,572	29,055	676,741
2036	101,691	60,830	1,594,512	39,472	23,611	618,910
2037	85,914	51,392	1,517,485	31,912	19,089	563,648
2038	72,200	43,188	1,434,399	25,663	15,351	509,844
2039	60,350	36,100	1,340,116	20,527	12,279	455,820
2040	50,176	30,014	1,235,659	16,332	9,769	402,192
2041	41,476	24,810	1,134,498	12,919	7,728	353,364
2042	34,087	20,390	1,034,253	10,160	6,077	308,268
2043	27,830	16,647	934,347	7,938	4,748	266,498
Total	12,232,572	7,317,260	49,024,697	9,122,344	5,456,790	28,540,412
Grand Total	32,915,114	11,595,326	57,313,986	36,530,541	10,464,396	38,312,775
Minimum Required Loss Ratios						
58% 85%						
Minimum PV Incurred Claims 21,187,714 8,894,737 30,082,451						
Dual Loss Ratio Test Met 38,312,775 > 30,082,451						

Lifetime Experience (Nationwide) as of 12/31/2016

Non-Lifetime Benefit Periods - Post Stabilization Experience

	Non-Interest Adjusted			Interest Adjusted		
	VA Rate Level					
Year	Original Premium	Increased Premium	Incurred Claims	Original Premium	Increased Premium	Incurred Claims
1998	0	0	0	0	0	0
1999	0	0	0	0	0	0
2000	0	0	0	0	0	0
2001	5,564	0	0	11,008	0	0
2002	124,727	0	0	236,128	0	0
2003	959,199	0	0	1,737,716	0	0
2004	1,875,935	0	209,237	3,252,156	0	362,737
2005	2,108,071	0	65,865	3,497,216	0	109,268
2006	2,052,755	0	535,770	3,258,804	0	850,549
2007	1,956,742	236,629	347,698	2,972,613	359,478	528,210
2008	1,883,058	546,087	430,039	2,737,487	793,871	625,167
2009	1,830,940	530,972	654,237	2,547,101	738,659	910,138
2010	1,759,287	510,193	1,284,179	2,342,031	679,189	1,709,548
2011	1,682,106	487,811	1,222,344	2,142,855	621,428	792,812
2012	1,556,962	451,519	1,205,371	1,898,022	550,427	1,469,414
2013	1,478,031	682,977	1,454,616	1,724,211	796,734	1,696,897
2014	1,409,166	831,877	1,282,810	1,573,087	928,646	1,432,033
2015	1,356,160	829,248	1,305,648	1,448,723	885,848	1,394,763
2016	1,436,432	878,332	2,274,370	1,468,396	897,877	2,324,980
Total	23,475,134	5,985,646	11,672,183	32,847,556	7,252,157	14,206,516
2017	1,305,440	798,235	2,219,636	1,277,023	780,859	2,171,319
2018	1,186,394	725,442	2,282,935	1,110,592	679,092	2,137,072
2019	1,077,061	658,588	2,390,252	964,827	589,961	2,141,179
2020	974,791	596,053	2,492,130	835,612	510,950	2,136,307
2021	880,068	538,133	2,579,730	721,926	441,435	2,116,172
2022	790,584	483,417	2,692,202	620,595	379,474	2,113,333
2023	707,608	432,680	2,654,967	531,541	325,020	1,994,359
2024	630,833	385,734	2,607,342	453,464	277,279	1,874,243
2025	560,482	342,717	2,645,127	385,543	235,747	1,819,525
2026	496,192	303,405	2,685,121	326,621	199,719	1,767,499
2027	437,508	267,522	2,716,671	275,591	168,515	1,711,260
2028	384,275	234,972	2,730,416	231,638	141,638	1,645,855
2029	336,189	205,469	2,734,569	193,938	118,578	1,577,138
2030	292,891	179,093	2,722,243	161,672	98,857	1,502,647
2031	254,084	155,364	2,702,500	134,212	82,066	1,427,511
2032	219,337	134,118	2,674,332	110,869	67,793	1,351,801
2033	188,707	115,388	2,588,568	91,279	55,814	1,252,105
2034	161,804	98,938	2,470,726	74,895	45,796	1,143,641
2035	138,154	84,477	2,369,166	61,194	37,418	1,049,408
2036	117,394	71,782	2,276,008	49,760	30,426	964,731
2037	99,240	60,682	2,187,776	40,254	24,614	887,399
2038	83,460	51,033	2,088,657	32,395	19,809	801,713
2039	69,623	42,694	1,971,497	25,925	15,883	732,277
2040	58,083	35,516	1,837,709	20,645	12,624	653,197
2041	48,064	29,390	1,705,028	16,348	9,996	579,939
2042	39,518	24,164	1,571,296	12,863	7,865	511,438
2043	32,309	19,756	1,435,343	10,063	6,153	447,068
2044	26,259	16,056	1,290,763	7,827	4,786	384,723
2045	21,200	12,963	1,150,249	6,047	3,697	328,078
2046	17,037	10,418	1,016,554	4,650	2,843	277,460
2047	13,623	8,330	894,491	3,558	2,176	233,630
2048	10,828	6,621	782,185	2,706	1,655	195,500
2049	8,537	5,220	676,771	2,042	1,249	161,869
2050	6,673	4,081	578,385	1,527	974	132,380
2051	5,190	3,174	490,761	1,137	695	107,488
2052	4,027	2,462	413,987	844	516	86,768
2053	3,108	1,900	347,356	623	381	69,668
2054	2,375	1,452	287,726	456	279	55,223
2055	1,785	1,092	235,498	328	200	43,252
2056	1,331	814	190,449	234	143	33,472
2057	995	609	153,427	167	102	25,804
2058	743	454	123,429	120	73	19,865
2059	549	335	98,334	88	52	15,145
2060	395	242	77,319	58	36	11,395
2061	280	171	59,499	39	24	8,391
2062	201	123	45,273	27	17	6,110
2063	146	90	35,061	19	12	4,528
2064	106	65	27,138	13	8	3,354
2065	74	46	20,718	9	5	2,450
2066	51	31	15,320	6	4	1,734
2067	35	22	11,179	4	2	1,211
2068	24	15	8,302	2	2	860
2069	9	6	6,136	1	1	608
2070	1	0	4,384	0	0	416
2071	0	0	3,009	0	0	273
2072	0	0	0	0	0	0
2073	0	0	0	0	0	0
Total	11,695,876	7,151,654	73,075,838	8,803,807	5,383,247	40,731,162
Grand Total	35,171,011	13,137,300	84,748,020	41,651,363	12,635,403	54,937,678

Lifetime Experience (Nationwide) as of 06/30/2012

Lifetime Benefit Period - Post Stabilization Experience

Year	Non-Interest Adjusted			Interest Adjusted		
	Original Premium	Increased Premium	Incurred Claims	Original Premium	Increased Premium	Incurred Claims
1998	0	0	0	0	0	0
1999	0	0	0	0	0	0
2000	0	0	0	0	0	0
2001	13,893	0	0	22,056	0	0
2002	294,797	0	509	447,846	0	773
2003	1,597,074	0	0	2,321,740	0	0
2004	2,473,678	0	22,166	3,441,243	0	30,836
2005	2,593,563	0	332,525	3,452,650	0	442,670
2006	2,533,916	0	335,293	3,227,987	0	427,135
2007	2,498,942	302,197	1,793,509	3,046,348	368,395	2,186,386
2008	2,462,104	714,010	1,369,439	2,872,192	832,936	1,597,533
2009	2,413,851	700,017	167,150	2,694,643	781,446	186,594
2010	2,374,809	688,694	637,323	2,536,898	735,700	680,823
2011	2,334,484	677,000	2,302,528	2,386,432	692,065	2,353,765
Total	21,591,113	3,081,919	6,960,442	26,450,037	3,410,544	7,906,513
2012	2,158,870	626,072	1,233,848	2,111,876	612,444	1,206,990
2013	1,996,467	1,094,322	1,382,759	1,868,907	1,024,402	1,294,411
2014	1,847,574	1,664,131	1,589,329	1,655,050	1,490,723	1,423,715
2015	1,706,384	1,727,543	1,694,082	1,462,748	1,480,887	1,452,204
2016	1,569,429	1,588,890	1,842,675	1,287,414	1,303,378	1,511,560
2017	1,437,848	1,455,678	2,006,334	1,128,687	1,142,683	1,574,939
2018	1,311,760	1,328,026	2,183,830	985,368	997,586	1,640,450
2019	1,192,145	1,206,928	2,380,053	856,953	867,579	1,710,860
2020	1,078,937	1,092,316	2,594,629	742,177	751,380	1,784,789
2021	971,277	983,321	2,785,008	639,350	647,278	1,833,250
2022	869,992	880,780	2,992,239	548,017	554,813	1,884,843
2023	776,416	786,044	3,217,170	468,012	473,816	1,939,263
2024	689,540	698,090	3,512,939	397,746	402,678	2,026,362
2025	607,756	615,292	3,713,997	335,474	339,634	2,050,084
2026	533,595	540,212	3,977,139	281,855	285,350	2,100,799
2027	466,967	472,757	4,248,995	236,039	238,966	2,147,750
2028	406,720	411,763	4,496,190	196,733	199,172	2,174,833
2029	352,473	356,843	4,762,789	163,151	165,174	2,204,582
2030	303,779	307,546	4,996,983	134,557	136,226	2,213,383
2031	260,186	263,412	5,149,679	110,285	111,652	2,182,793
2032	221,605	224,353	5,303,287	89,887	91,001	2,151,103
2033	188,043	190,375	5,470,998	72,989	73,894	2,123,569
2034	158,829	160,798	5,658,215	58,995	59,726	2,101,662
2035	133,425	135,079	5,704,705	47,425	48,013	2,027,685
2036	111,384	112,765	5,667,422	37,886	38,355	1,927,687
2037	92,472	93,619	5,618,402	30,099	30,472	1,828,721
2038	76,378	77,325	5,588,865	23,790	24,085	1,740,772
2039	62,780	63,558	5,550,300	18,712	18,944	1,654,316
2040	51,285	51,921	5,385,552	14,628	14,809	1,536,087
2041	41,507	42,022	5,128,436	11,329	11,469	1,399,763
2042	33,335	33,748	4,851,497	8,707	8,815	1,267,153
2043	26,658	26,988	4,614,288	6,663	6,745	1,153,298
Total	21,735,815	19,312,517	125,302,635	16,031,507	13,652,149	57,269,672
Grand Total	43,326,928	22,394,436	132,263,077	42,481,544	17,062,692	65,176,185
Minimum Required Loss Ratios						
Minimum PV Incurred Claims						
Dual Loss Ratio Test Met						

Lifetime Experience (Nationwide) as of 12/31/2014

Lifetime Benefit Period - Post Stabilization Experience

Year	Non-Interest Adjusted			Interest Adjusted		
	Original Premium	Increased Premium	Incurred Claims	Original Premium	Increased Premium	Incurred Claims
1998	0	0	0	0	0	0
1999	0	0	0	0	0	0
2000	0	0	0	0	0	0
2001	13,893	0	0	25,170	0	0
2002	294,797	0	487	511,066	0	844
2003	1,597,074	0	0	2,649,491	0	0
2004	2,473,678	0	21,213	3,927,030	0	33,676
2005	2,593,563	0	204,578	3,940,048	0	310,788
2006	2,533,916	0	305,634	3,683,670	0	444,314
2007	2,498,942	302,197	1,844,329	3,476,389	420,400	2,565,728
2008	2,462,104	714,010	1,679,534	3,277,648	950,518	2,235,860
2009	2,413,851	700,017	302,627	3,075,035	891,760	385,520
2010	2,374,809	688,694	825,888	2,895,022	839,556	1,006,803
2011	2,334,484	677,000	2,574,387	2,723,316	789,762	3,003,410
2012	2,124,330	616,056	1,437,974	2,371,443	687,719	1,605,247
2013	1,946,519	1,066,943	2,436,980	2,079,376	1,139,766	2,603,313
2014	1,867,834	1,682,380	2,763,214	1,909,398	1,719,817	2,824,702
Total	27,529,796	6,447,298	14,397,044	36,544,103	7,439,298	17,020,204
2015	1,747,713	1,666,687	3,189,095	1,709,669	1,630,407	3,119,675
2016	1,632,147	1,556,478	3,426,848	1,527,864	1,457,030	3,207,897
2017	1,520,254	1,449,773	3,669,717	1,361,338	1,298,701	3,287,319
2018	1,413,250	1,347,730	3,915,895	1,211,468	1,155,303	3,356,789
2019	1,310,595	1,249,834	4,270,290	1,075,091	1,025,248	3,502,951
2020	1,212,074	1,155,880	4,672,496	951,457	907,347	3,667,831
2021	1,116,758	1,064,984	4,966,842	838,886	799,995	3,730,993
2022	1,025,150	977,623	5,325,446	736,911	702,747	3,828,104
2023	936,711	893,284	5,431,470	644,343	614,470	3,736,196
2024	853,847	814,261	5,442,316	562,050	535,993	3,582,440
2025	774,569	738,659	5,705,382	487,909	465,289	3,593,881
2026	696,549	664,256	5,969,168	419,869	400,404	3,598,127
2027	629,089	599,924	6,212,211	362,876	346,053	3,583,377
2028	567,304	541,003	6,418,760	313,145	298,627	3,543,082
2029	510,047	486,401	6,610,051	269,417	256,926	3,494,722
2030	456,850	435,670	6,816,438	230,925	220,219	3,445,522
2031	407,413	388,525	6,948,395	197,068	187,932	3,360,978
2032	361,860	345,084	7,075,717	167,497	159,731	3,275,182
2033	319,816	304,989	7,053,149	141,660	135,093	3,124,149
2034	281,603	268,547	6,928,771	119,363	113,829	2,936,896
2035	247,152	235,694	6,907,105	100,249	95,601	2,801,639
2036	215,735	205,734	6,852,880	83,738	79,856	2,659,946
2037	187,365	178,679	6,755,805	69,594	66,368	2,509,235
2038	161,964	154,455	6,597,647	57,569	54,900	2,345,072
2039	139,413	132,950	6,362,857	47,419	45,221	2,164,228
2040	119,439	113,902	6,081,924	38,876	37,074	1,979,591
2041	101,719	97,004	5,766,708	31,683	30,214	1,796,165
2042	86,131	82,138	5,451,362	27,358	25,964	1,624,827
2043	72,454	69,095	5,089,140	20,666	19,707	1,451,544
Total	19,104,970	18,219,240	165,919,594	13,804,772	13,164,766	88,308,358
Grand Total	46,634,766	24,666,538	180,316,638	50,348,876	20,604,064	105,328,563
Minimum Required Loss Ratios						
Minimum PV Incurred Claims						
Dual Loss Ratio Test Met						

Lifetime Experience (Nationwide) as of 12/31/2016

Lifetime Benefit Period - Post Stabilization Experience

	Non-Interest Adjusted			Interest Adjusted		
	VA Rate Level					
Year	Original Premium	Increased Premium	Incurred Claims	Original Premium	Increased Premium	Incurred Claims
1998	0	0	0	0	0	0
1999	0	0	0	0	0	0
2000	0	0	0	0	0	0
2001	13,893	0	0	27,486	0	0
2002	294,797	0	487	558,097	0	922
2003	1,597,074	0	0	2,893,311	0	0
2004	2,473,678	0	21,213	4,288,415	0	36,775
2005	2,593,563	0	204,578	4,302,631	0	339,388
2006	2,533,916	0	305,634	4,022,659	0	485,202
2007	2,498,322	302,122	1,613,672	3,795,362	458,973	2,451,434
2008	2,459,984	713,395	1,541,097	3,576,191	1,037,095	2,240,364
2009	2,412,119	699,515	360,417	3,355,606	973,126	501,391
2010	2,373,634	688,354	1,228,367	3,159,873	916,363	1,635,249
2011	2,333,309	676,660	2,158,778	2,972,432	862,005	2,750,094
2012	2,123,449	615,800	1,596,723	2,588,601	750,694	1,946,494
2013	1,946,519	1,066,943	1,799,433	2,270,731	1,244,653	2,099,147
2014	1,867,834	1,682,380	3,246,046	2,085,110	1,878,083	3,623,643
2015	1,787,926	1,810,096	2,858,807	1,909,959	1,933,642	3,053,931
2016	1,537,157	1,556,217	3,611,461	1,571,362	1,590,847	3,691,825
Total	30,847,174	9,811,483	20,546,713	43,377,825	11,645,482	24,855,858
2017	1,425,836	1,443,516	3,390,406	1,394,798	1,412,094	3,316,603
2018	1,320,387	1,336,760	3,604,191	1,236,024	1,251,350	3,373,909
2019	1,219,989	1,235,116	3,910,252	1,092,861	1,106,413	3,502,789
2020	1,123,267	1,137,196	4,290,543	962,889	974,829	3,677,945
2021	1,031,078	1,043,864	4,573,057	845,801	856,289	3,751,313
2022	942,124	953,801	4,922,441	739,552	748,722	3,864,034
2023	858,802	869,451	5,013,880	645,115	653,114	3,766,327
2024	780,884	790,564	5,033,516	561,323	568,283	3,618,256
2025	708,386	717,170	5,286,196	487,284	493,326	3,636,259
2026	640,898	648,845	5,541,093	421,875	427,107	3,647,461
2027	578,045	585,213	5,780,172	364,117	368,632	3,640,992
2028	519,820	526,265	5,988,134	313,340	317,225	3,609,559
2029	465,840	471,616	6,187,674	268,709	272,041	3,569,224
2030	415,749	420,964	6,395,019	229,489	232,333	3,529,977
2031	369,888	374,171	6,536,773	195,233	197,644	3,483,846
2032	326,846	330,889	6,678,359	165,212	167,260	3,435,722
2033	288,121	291,694	6,673,346	139,366	141,094	3,227,935
2034	253,425	256,567	6,550,385	117,304	118,759	3,032,018
2035	221,955	224,708	6,498,209	98,314	99,533	2,878,341
2036	193,465	195,864	6,452,520	82,004	83,021	2,735,028
2037	167,825	169,906	6,394,981	68,073	68,917	2,593,912
2038	144,945	146,742	6,278,849	56,260	56,958	2,437,136
2039	124,584	126,129	6,087,886	46,275	46,849	2,261,257
2040	106,459	107,779	5,849,838	37,840	38,309	2,079,271
2041	90,496	91,619	5,574,885	30,781	31,163	1,896,212
2042	76,110	77,358	5,296,424	24,871	25,191	1,723,921
2043	64,157	64,952	4,964,868	19,983	20,231	1,546,415
2044	53,719	54,385	4,559,682	16,011	16,210	1,359,054
2045	44,691	45,245	4,169,301	12,747	12,905	1,189,184
2046	37,004	37,463	3,786,939	10,100	10,225	1,033,612
2047	30,506	30,884	3,425,879	7,968	8,067	894,798
2048	25,019	25,329	3,075,505	6,253	6,331	768,694
2049	20,417	20,670	2,729,300	4,883	4,944	652,788
2050	16,537	16,742	2,396,518	3,785	3,832	548,510
2051	13,317	13,482	2,086,384	2,917	2,953	456,964
2052	10,672	10,804	1,814,955	2,237	2,264	380,397
2053	8,703	8,778	1,564,122	1,699	1,721	313,875
2054	6,701	6,784	1,322,531	1,286	1,302	253,831
2055	5,248	5,313	1,106,769	964	976	203,273
2056	4,076	4,126	916,077	716	725	161,005
2057	3,158	3,197	758,026	531	538	127,489
2058	2,443	2,473	626,084	393	398	100,764
2059	1,871	1,895	511,157	288	292	78,725
2060	1,413	1,431	407,847	208	211	60,109
2061	1,057	1,070	317,614	149	151	44,794
2062	795	805	249,024	107	109	33,609
2063	596	607	197,866	77	78	25,554
2064	442	448	155,584	58	59	19,228
2065	322	326	119,981	38	39	14,190
2066	231	234	89,102	26	27	10,084
2067	164	166	66,266	18	18	7,177
2068	108	109	49,872	11	11	5,169
2069	64	65	37,587	6	6	3,728
2070	0	0	27,051	0	0	2,567
2071	0	0	4	0	0	0
2072	0	0	0	0	0	0
2073	0	0	0	0	0	0
Total	14,748,423	14,931,304	186,321,754	10,718,156	10,851,061	92,493,839
Grand Total	45,595,597	24,742,786	206,868,467	54,095,981	22,496,544	117,349,698
	Minimum Required Loss Ratios			58%	85%	
	Minimum PV Incurred Claims			31,375,669	19,122,062	50,497,731
	Dual Loss Ratio Test Met			117,349,698	>	50,497,731

Lifetime Experience (Nationwide) as of 06/30/2012

Lifetime Experience (Nationwide) as of 12/31/2014

Lifetime Experience (Nationwide) as of 12/31/2016

All Benefit Periods Combined - Post Stabilization Experience

All Benefit Periods Combined - Post Stabilization Experience

All Benefit Periods Combined - Post Stabilization Experience

Non-Interest Adjusted				Interest Adjusted			
Year	Original Premium	Increased Premium	Incurred Claims	Original Premium	Increased Premium	Incurred Claims	
1998	0	0	0	0	0	0	
1999	0	0	0	0	0	0	
2000	0	0	0	0	0	0	
2001	19,458	0	0	30,889	0	0	
2002	419,525	0	509	637,327	0	773	
2003	2,556,274	0	0	3,716,172	0	0	
2004	4,349,613	0	246,733	6,050,939	0	343,241	
2005	4,701,633	0	402,025	6,258,995	0	535,191	
2006	4,586,671	0	928,139	5,843,018	0	1,182,368	
2007	4,455,685	538,826	2,167,352	5,431,725	656,858	2,642,122	
2008	4,345,162	1,260,097	1,831,618	5,068,892	1,469,979	2,136,692	
2009	4,244,791	1,230,989	952,934	4,738,567	1,374,184	1,063,784	
2010	4,134,096	1,198,888	1,821,411	4,416,263	1,280,716	1,945,729	
2011	4,016,590	1,164,811	3,426,275	4,105,969	1,190,721	3,502,518	
Total	37,829,496	5,393,611	11,776,995	46,298,756	5,972,469	13,352,417	

2012	3,716,180	1,077,692	1,922,439	3,635,286	1,054,233	1,880,591	
2013	3,438,239	1,760,544	2,173,867	3,218,560	1,648,058	2,034,973	
2014	3,181,873	2,451,812	2,514,972	2,850,310	2,196,224	2,252,002	
2015	2,938,484	2,480,933	2,670,566	2,518,932	2,126,709	2,289,267	
2016	2,702,800	2,281,910	2,892,900	2,217,127	1,871,868	2,373,068	
2017	2,476,593	2,090,837	3,137,560	1,944,084	1,641,272	2,462,932	
2018	2,260,088	1,907,898	3,401,683	1,697,733	1,433,175	2,555,277	
2019	2,054,717	1,734,363	3,687,963	1,476,908	1,246,717	2,651,029	
2020	1,860,353	1,570,127	3,961,503	1,279,696	1,080,056	2,725,032	
2021	1,675,639	1,414,016	4,247,381	1,103,001	930,785	2,795,867	
2022	1,501,879	1,267,159	4,561,897	946,050	798,197	2,873,588	
2023	1,341,298	1,131,451	4,899,732	808,515	682,022	2,953,486	
2024	1,192,190	1,005,445	5,332,196	687,689	579,969	3,075,760	
2025	1,051,543	886,654	5,615,463	580,440	489,423	3,099,671	
2026	924,070	778,975	5,943,972	488,111	411,469	3,139,717	
2027	809,594	682,263	6,300,075	409,228	344,865	3,184,514	
2028	706,007	594,768	6,648,931	341,500	287,692	3,216,126	
2029	612,677	515,950	7,024,353	283,593	238,821	3,251,406	
2030	528,811	445,145	7,338,932	234,233	197,174	3,246,305	
2031	453,642	381,704	7,537,818	192,285	161,793	3,195,052	
2032	387,009	325,492	7,738,714	156,977	132,025	3,138,953	
2033	328,956	276,526	7,962,564	127,677	107,334	3,090,670	
2034	278,315	233,840	8,212,924	103,376	86,864	3,050,572	
2035	234,220	196,713	8,256,310	83,251	69,920	2,934,629	
2036	195,874	164,428	8,168,529	66,624	55,928	2,778,400	
2037	162,906	136,087	8,063,289	53,024	44,490	2,624,502	
2038	134,793	113,044	7,994,668	41,984	35,210	2,490,111	
2039	111,008	93,048	7,921,317	33,087	27,734	2,361,019	
2040	90,864	76,122	7,660,638	25,917	21,712	2,184,996	
2041	73,681	61,695	7,268,987	20,111	16,839	1,984,007	
2042	59,283	49,615	6,827,874	15,484	12,959	1,783,339	
2043	47,487	39,725	6,456,112	11,869	9,929	1,613,645	
Total	37,531,054	28,226,600	184,336,128	27,652,749	20,041,564	85,291,424	

Grand Total	75,360,550	33,620,211	196,113,123	73,951,506	26,014,033	98,643,841	
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Minimum Required Loss Ratios			
58%	85%		
Minimum PV Incurred Claims	42,891,673	22,111,928	65,003,801
Dual Loss Ratio Test Met	98.643,841	>	65,003,801

Non-Interest Adjusted				Interest Adjusted			
VA Rate Level							
Year	Original Premium	Increased Premium	Incurred Claims	Original Premium	Increased Premium	Incurred Claims	
1998	0	0	0	0	0	0	
1999	0	0	0	0	0	0	
2000	0	0	0	0	0	0	
2001	19,458	0	0	35,250	0	0	
2002	419,525	0	487	727,296	0	844	
2003	2,556,274	0	0	4,240,770	0	0	
2004	4,349,613	0	230,450	6,905,127	0	365,846	
2005	4,701,633	0	270,443	7,142,554	0	410,847	
2006	4,586,671	0	841,404	6,667,854	0	1,223,188	
2007	4,455,685	538,826	2,192,027	6,198,500	749,585	3,049,426	
2008	4,345,162	1,260,097	2,109,573	5,784,447	1,677,490	2,808,345	
2009	4,244,791	1,230,989	955,415	5,407,492	1,568,173	1,217,115	
2010	4,134,096	1,198,888	1,918,898	5,039,690	1,461,510	2,339,242	
2011	4,016,590	1,164,811	3,156,800	4,685,931	1,358,822	3,682,666	
2012	3,681,292	1,067,575	2,668,140	4,109,519	1,191,761	2,978,512	
2013	3,424,550	1,749,921	4,092,386	3,658,288	1,869,359	4,371,706	
2014	3,277,000	2,514,257	4,250,252	3,349,921	2,570,206	4,344,830	
Total	48,212,338	10,725,364	22,686,334	63,952,300	12,446,905	26,792,567	

2015	3,038,941	2,439,072	4,723,954	2,972,789	2,385,978	4,621,123	
2016	2,813,696	2,263,256	5,020,019	2,633,921	2,118,650	4,699,276	
2017	2,599,826	2,095,550	5,318,343	2,328,914	1,877,186	4,764,152	
2018	2,398,546	1,937,113	5,614,541	2,056,085	1,660,534	4,812,904	
2019	2,207,834	1,786,543	6,052,085	1,811,102	1,465,515	4,964,571	
2020	2,027,389	1,643,585	6,535,379	1,591,467	1,290,186	5,130,163	
2021	1,854,704	1,506,407	6,884,303	1,393,217	1,131,583	5,317,352	
2022	1,690,422	1,375,574	7,330,226	1,215,131	988,808	5,269,206	
2023	1,533,462	1,250,247	7,397,432	1,054,835	860,018	5,088,532	
2024	1,387,580	1,133,529	7,359,959	913,384	746,153	4,844,742	
2025	1,250,475	1,023,336	7,644,965	787,688	644,610	4,815,645	
2026	1,119,171	917,060	7,933,010	674,620	552,790	4,781,902	
2027	1,002,829	823,487	8,193,388	578,460	475,010	4,726,176	
2028	896,442	737,886	8,402,138	494,826	407,305	4,657,884	
2029	798,731	659,085	8,592,229	421,904	348,141	4,538,576	
2030	709,015	586,510	8,773,108	358,588	296,464	4,434,565	
2031	626,708	519,702	8,880,977	303,142	251,383	4,295,773	
2032	551,715	458,651	8,979,253	255,376	212,299	4,156,283	
2033	483,338	402,805	8,882,586	214,092	178,420	3,934,486	
2034	421,871	352,453	8,667,574	178,818	149,394	3,673,922	
2035	366,900	307,324	8,575,530	148,821	124,656	3,478,380	
2036	317,427	266,563	8,447,392	123,209	103,467	3,278,857	
2037	273,280	230,071	8,272,987	101,506	85,456	3,072,882	
2038	234,164	197,644	8,032,046	83,231	70,251	2,854,916	
2039	199,763	169,050	7,702,974	67,946	57,500	2,620,048	
2040	169,615	143,916	7,317,583	55,208	46,843	2,381,783	
2041	143,196	121,814	6,901,207	44,601	37,942	2,149,529	
2042	120,218	102,528	6,485,615	35,832	30,559	1,933,095	
2043	100,284	85,742	6,023,486	28,003	24,456	1,718,042	
Total	31,337,542	25,536,500	214,944,290	22,927,117	18,621,555	116,848,770	

Grand Total	79,549,880	36,261,864	237,630,624	86,879,417	31,068,460	143,641,337	
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Minimum Required Loss Ratios			
58%	85%		
Minimum PV Incurred Claims	50,390,062	26,408,191	76,798,253
Dual Loss Ratio Test Met	143,641,337	>	76,798,253

Non-Interest Adjusted				Interest Adjusted			
VA Rate Level							
Year	Original Premium	Increased Premium	Incurred Claims	Original Premium	Increased Premium	Incurred Claims	
1998	0	0	0	0	0	0	
1999	0	0	0	0	0	0	
2000	0	0	0	0	0	0	
2001	19,458	0	0	38,494	0	0	
2002	419,525	0	487	794,225	0	922	
2003	2,556,274	0	0	4,631,026	0	0	
2004	4,349,613	0	230,450	7,540,571	0	399,512	
2005	4,701,633	0	270,443	7,799,847	0	448,656	
2006	4,586,671	0	841,404	7,281,463	0	1,335,551	
2007	4,455,685	538,751	1,961,370	6,767,975	818,451	2,979,644	
2008	4,343,042	1,259,482	1,971,136	6,313,679	1,830,967	2,865,531	
2009	4,243,059	1,230,487	1,014,654	5,902,707	1,711,785	1,411,529	
2010	4,132,921	1,198,547	2,512,545	5,501,903	1,595,552	3,344,797	
2011	4,015,415	1,164,470	2,781,122	5,115,287	1,483,433	3,542,906	
2012	3,680,411	1,067,319	2,802,095	4,486,624	1,301,121	3,415,908	
2013	3,424,550	1,749,921	3,254,050	3,994,942	2,041,387	3,796,043	
2014	3,277,000	2,514,257	4,528,856	3,658,197	2,806,729	5,055,676	
2015	3,144,086	2,639,545	4,164,454	3,358,682	2,819,490	4,448,694	
2016	2,973,889	2,434,550	5,885,831	3,029,758	2,488,724	6,016,805	
Total	54,322,309	15,797,129	32,218,896	76,225,381	18,897,639	39,062,374	

2017	2,731,276	2,241,751	5,610,042	2,671,821	2,192,953	5,487,922
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Lifetime Experience (Nationwide) as of 06/30/2012**Lifetime Benefit Period - Post-Stabilization Experience**

Year	Actual		
	Virginia Rate Level Premium	Incurred Claims	Loss Ratio
2001	13,893	0	0.0%
2002	294,797	509	0.2%
2003	1,597,074	0	0.0%
2004	2,473,678	22,166	0.9%
2005	2,593,563	332,525	12.8%
2006	2,533,916	335,293	13.2%
2007	2,801,139	1,793,509	64.0%
2008	3,176,115	1,369,439	43.1%
2009	3,113,868	167,150	5.4%
2010	3,063,503	637,323	20.8%
2011	3,011,485	2,302,528	76.5%
Total	24,673,032	6,960,442	28.2%
	Revised		
	Virginia Rate Level Premium	Incurred Claims	Loss Ratio
2012	2,784,943	1,233,848	44.3%
2013	3,090,789	1,382,759	44.7%
2014	3,511,705	1,589,329	45.3%
2015	3,433,926	1,694,082	49.3%
2016	3,158,319	1,842,675	58.3%
2017	2,893,526	2,006,334	69.3%
2018	2,639,785	2,183,830	82.7%
2019	2,399,073	2,380,053	99.2%
2020	2,171,252	2,594,629	119.5%
2021	1,954,598	2,785,008	142.5%
2022	1,750,772	2,992,239	170.9%
2023	1,562,460	3,217,170	205.9%
2024	1,387,630	3,512,939	253.2%
2025	1,223,048	3,713,997	303.7%
2026	1,073,807	3,977,139	370.4%
2027	939,724	4,248,995	452.2%
2028	818,483	4,496,190	549.3%
2029	709,316	4,762,789	671.5%
2030	611,325	4,996,983	817.4%
2031	523,598	5,149,679	983.5%
2032	445,959	5,303,287	1189.2%
2033	378,418	5,470,998	1445.8%
2034	319,627	5,658,215	1770.3%
2035	268,504	5,704,705	2124.6%
2036	224,149	5,667,422	2528.4%
2037	186,091	5,618,402	3019.2%
2038	153,703	5,588,865	3636.1%
2039	126,338	5,550,300	4393.2%
2040	103,206	5,385,552	5218.2%
2041	83,528	5,128,436	6139.7%
2042	67,083	4,851,497	7232.1%
2043	53,646	4,614,288	8601.4%
Total	41,048,332	125,302,635	305.3%
	VA Rate Level		
	Earned Premium	Incurred Claims	Loss Ratio
Past Experience	24,673,032	6,960,442	28.2%
Anticipated Experience	41,048,332	125,302,635	305.3%
Lifetime Experience	65,721,364	132,263,077	201.2%
Past Experience @ 4.5%	29,860,580	7,906,513	26.5%
Anticipated Experience @ 4.5%	29,683,656	57,269,672	192.9%
Lifetime Experience @ 4.5%	59,544,236	65,176,185	109.5%

Lifetime Experience (Nationwide) as of 12/31/2016**Lifetime Benefit Period - Post-Stabilization Experience**

Year	Actual		
	Virginia Rate Level Premium	Incurred Claims	Loss Ratio
2001	13,893	0	0.0%
2002	294,797	487	0.2%
2003	1,597,074	0	0.0%
2004	2,473,678	21,213	0.9%
2005	2,593,563	204,578	7.9%
2006	2,533,916	305,634	12.1%
2007	2,800,444	1,613,672	57.6%
2008	3,173,379	1,541,097	48.6%
2009	3,111,634	360,417	11.6%
2010	3,061,987	1,228,367	40.1%
2011	3,009,969	2,158,778	71.7%
2012	2,739,249	1,596,723	58.3%
2013	3,013,462	1,799,433	59.7%
2014	3,550,214	3,246,046	91.4%
2015	3,598,022	2,858,807	79.5%
2016	3,093,374	3,611,461	116.7%
Total	40,658,657	20,546,713	50.5%
	Revised		
	Virginia Rate Level Premium	Incurred Claims	Loss Ratio
2017	2,869,352	3,390,406	118.2%
2018	2,657,147	3,604,191	135.6%
2019	2,455,105	3,910,252	159.3%
2020	2,260,463	4,290,543	189.8%
2021	2,074,942	4,573,057	220.4%
2022	1,895,931	4,922,441	259.6%
2023	1,728,253	5,013,880	290.1%
2024	1,571,444	5,033,516	320.3%
2025	1,425,557	5,286,196	370.8%
2026	1,289,743	5,541,093	429.6%
2027	1,163,258	5,780,172	496.9%
2028	1,046,085	5,988,134	572.4%
2029	937,456	6,187,674	660.0%
2030	836,654	6,395,019	764.4%
2031	743,760	6,536,773	878.9%
2032	657,745	6,678,359	1015.3%
2033	579,815	6,673,346	1150.9%
2034	509,992	6,550,385	1284.4%
2035	446,663	6,498,209	1454.8%
2036	389,329	6,452,520	1657.3%
2037	337,732	6,394,981	1893.5%
2038	291,687	6,278,849	2152.6%
2039	250,713	6,087,886	2428.2%
2040	214,237	5,849,838	2730.5%
2041	182,115	5,574,885	3061.2%
2042	153,768	5,296,424	3444.4%
2043	129,109	4,964,868	3845.5%
2044	108,103	4,559,682	4217.9%
2045	89,936	4,169,301	4635.9%
2046	74,467	3,786,939	5085.4%
2047	61,390	3,425,879	5580.5%
2048	50,348	3,075,505	6108.5%
2049	41,087	2,729,300	6642.8%
2050	33,279	2,396,518	7201.2%
2051	26,799	2,086,384	7785.4%
2052	21,476	1,814,955	8451.2%
2053	17,052	1,564,952	9177.8%
2054	13,485	1,322,531	9807.2%
2055	10,561	1,106,769	10480.2%
2056	8,202	916,077	11169.5%
2057	6,355	758,026	11928.7%
2058	4,915	626,084	12737.0%
2059	3,766	511,157	13573.0%
2060	2,844	407,847	14340.1%
2061	2,127	317,614	14932.9%
2062	1,600	249,024	15566.7%
2063	1,200	197,866	16492.0%
2064	890	155,584	17473.3%
2065	649	119,981	18487.6%
2066	466	89,102	19137.7%
2067	331	66,266	20046.8%
2068	217	49,872	22939.2%
2069	130	37,587	29023.1%
2070	0	27,051	#####
2071	0	4	0.0%
2072	0	0	0.0%
2073	0	0	0.0%
Total	29,679,727	186,321,754	627.8%
	VA Rate Level		
	Earned Premium	Incurred Claims	Loss Ratio
Past Experience	40,658,657	20,546,713	50.5%
Anticipated Experience	29,679,727	186,321,754	627.8%
Lifetime Experience	70,338,383	206,868,467	294.1%
Past Experience @ 4.5%	55,023,307	24,855,858	45.2%
Anticipated Experience @ 4.5%	21,569,218	92,493,839	428.8%
Lifetime Experience @ 4.5%	76,592,525	117,349,698	153.2%

Lifetime Experience (Virginia) as of 12/31/2016

Non-Lifetime Benefit Periods - Pre-Rate Stabilization

	Incurred Claims Discounted to Incurred Year				
Year	Earned Premium			Loss Ratio	
1997	37,587		0	0.0%	
1998	180,339		0	0.0%	
1999	279,228		41	0.0%	
2000	406,624		936	0.2%	
2001	580,511		194,548	33.5%	
2002	760,855		4,281	0.6%	
2003	1,038,497		49,059	4.7%	
2004	1,087,665		192,779	17.7%	
2005	1,068,791		142,119	13.3%	
2006	1,046,577		351,099	33.5%	
2007	1,049,204		146,112	13.9%	
2008	1,103,774		777,984	70.5%	
2009	1,050,118		270,454	25.8%	
2010	1,010,921		192,753	19.1%	
2011	963,038		780,136	81.0%	
2012	918,183		944,479	102.9%	
2013	1,118,769		524,173	46.9%	
2014	1,242,304		942,969	75.9%	
2015	1,166,483		1,588,635	136.2%	
2016	1,109,634		1,382,227	124.6%	
Total	17,219,102		8,484,785	49.3%	
Interest Adjusted	25,153,754		10,516,430	41.8%	
	Earned Premium w/o Increase	Earned Premium w/Increase	Incurred Claims	Loss Ratio w/o Increase	Loss Ratio w/Increase
2017	1,005,359	1,005,359	1,141,493	113.5%	113.5%
2018	910,448	910,448	1,176,870	129.3%	129.3%
2019	824,252	824,252	1,229,691	149.2%	149.2%
2020	745,135	745,135	1,280,463	171.8%	171.8%
2021	671,202	671,202	1,318,252	196.4%	196.4%
2022	602,851	602,851	1,368,012	226.9%	226.9%
2023	538,634	538,634	1,353,869	251.4%	251.4%
2024	479,260	479,260	1,333,419	278.2%	278.2%
2025	424,564	424,564	1,346,834	317.2%	317.2%
2026	374,796	374,796	1,360,474	363.0%	363.0%
2027	329,662	329,662	1,370,258	415.7%	415.7%
2028	288,739	288,739	1,371,858	475.1%	475.1%
2029	251,870	251,870	1,367,551	543.0%	543.0%
2030	218,809	218,809	1,355,889	619.7%	619.7%
2031	189,259	189,259	1,339,260	707.6%	707.6%
2032	163,001	163,001	1,319,289	809.4%	809.4%
2033	139,707	139,707	1,275,169	912.7%	912.7%
2034	119,334	119,334	1,217,327	1020.1%	1020.1%
2035	101,574	101,574	1,165,372	1147.3%	1147.3%
2036	86,083	86,083	1,117,670	1298.4%	1298.4%
2037	72,601	72,601	1,072,467	1477.2%	1477.2%
2038	60,918	60,918	1,021,626	1677.0%	1677.0%
2039	50,852	50,852	961,998	1891.7%	1891.7%
2040	42,221	42,221	895,155	2120.2%	2120.2%
2041	34,847	34,847	828,247	2376.8%	2376.8%
2042	28,614	28,614	760,885	2659.2%	2659.2%
2043	23,356	23,356	693,179	2967.9%	2967.9%
2044	18,959	18,959	622,343	3282.5%	3282.5%
2045	15,298	15,298	553,381	3617.4%	3617.4%
2046	12,256	12,256	487,984	3981.5%	3981.5%
2047	9,777	9,777	428,428	4382.2%	4382.2%
2048	7,762	7,762	373,790	4815.6%	4815.6%
2049	6,125	6,125	322,553	5266.4%	5266.4%
2050	4,794	4,794	275,076	5738.4%	5738.4%
2051	3,719	3,719	232,832	6261.4%	6261.4%
2052	2,869	2,869	195,994	6831.2%	6831.2%
2053	2,206	2,206	164,099	7437.2%	7437.2%
2054	1,686	1,686	135,695	8048.3%	8048.3%
2055	1,274	1,274	110,738	8689.9%	8689.9%
2056	949	949	89,410	9424.4%	9424.4%
2057	700	700	71,990	10288.8%	10288.8%
2058	516	516	57,891	11218.9%	11218.9%
2059	379	379	46,081	12143.3%	12143.3%
2060	276	276	36,224	13144.5%	13144.5%
2061	195	195	27,894	14283.6%	14283.6%
2062	136	136	21,292	15688.7%	15688.7%
2063	95	95	16,529	17315.0%	17315.0%
2064	68	68	12,821	18779.0%	18779.0%
2065	48	48	9,799	20218.7%	20218.7%
2066	34	34	7,238	21424.6%	21424.6%
2067	23	23	5,305	23149.0%	23149.0%
2068	16	16	3,945	24885.5%	24885.5%
2069	11	11	2,904	27346.7%	27346.7%
2070	4	4	2,073	48153.1%	48153.1%
2071	0	0	1,412	449409.0%	449409.0%
2072	0	0	0	904.6%	904.6%
2073	0	0	0	0.0%	0.0%
	Earned Premium w/o Increase	Earned Premium With Increase	Incurred Claims	Loss Ratio w/o Increase	Loss Ratio With Increase
Past Experience @ 4.5%	25,153,754	25,153,754	10,516,430	41.8%	41.8%
Anticipated Experience @ 4.5%	6,697,792	6,697,792	20,451,444	305.3%	305.3%
Lifetime Experience @ 4.5%	31,851,546	31,851,546	30,967,874	97.2%	97.2%

Lifetime Experience (Virginia) as of 12/31/2016

Lifetime Benefit Period - Pre-Rate Stabilization

	Incurred Claims				
Year	Earned Premium	Discounted to Incurred Year	Loss Ratio		
1997	21,765	0	0.0%		
1998	118,168	5	0.0%		
1999	224,159	0	0.0%		
2000	414,433	0	0.0%		
2001	697,254	117,081	16.8%		
2002	1,053,602	1,314	0.1%		
2003	1,493,360	19,378	1.3%		
2004	1,571,671	1,259,017	80.1%		
2005	1,536,344	305,812	19.9%		
2006	1,520,199	41,737	2.7%		
2007	1,564,102	1,945,784	124.4%		
2008	1,673,166	967,814	57.8%		
2009	1,634,113	38,019	2.3%		
2010	1,616,030	1,642,899	101.7%		
2011	1,600,723	536,935	33.5%		
2012	1,561,742	160,818	10.3%		
2013	1,447,773	1,804,360	124.6%		
2014	1,478,052	857,016	58.0%		
2015	1,485,533	1,805,511	121.5%		
2016	1,412,841	1,230,003	87.1%		
Total	24,125,028	12,733,505	52.8%		
Interest Adjusted	34,971,656	16,756,155	47.9%		
	Earned Premium w/o Increase	Earned Premium w/Increase	Incurred Claims	Loss Ratio w/o Increase	Loss Ratio w/Increase
2017	1,303,668	1,434,035	1,580,826	121.3%	110.2%
2018	1,207,128	1,647,730	1,677,020	138.9%	101.8%
2019	1,115,710	1,667,986	1,810,905	162.3%	108.6%
2020	1,028,776	1,538,020	1,974,495	191.9%	128.4%
2021	945,076	1,412,888	2,095,934	221.8%	148.3%
2022	865,434	1,293,824	2,241,796	259.0%	173.3%
2023	788,823	1,179,290	2,279,309	289.0%	193.3%
2024	717,120	1,072,094	2,294,895	320.0%	214.1%
2025	650,061	971,841	2,399,451	369.1%	246.9%
2026	587,818	878,788	2,504,578	426.1%	285.0%
2027	530,001	792,351	2,602,930	491.1%	328.5%
2028	476,275	712,031	2,687,471	564.3%	377.4%
2029	426,614	637,788	2,767,139	648.6%	433.9%
2030	380,760	569,237	2,849,363	748.3%	500.6%
2031	338,334	505,809	2,903,387	858.1%	574.0%
2032	299,416	447,628	2,955,454	987.1%	660.2%
2033	263,565	394,030	2,946,450	1117.9%	747.8%
2034	231,224	345,679	2,892,567	1251.0%	836.8%
2035	202,304	302,445	2,863,244	1415.3%	946.7%
2036	176,221	263,450	2,836,419	1609.6%	1076.6%
2037	152,715	228,308	2,804,122	1836.2%	1228.2%
2038	131,664	196,838	2,746,043	2085.6%	1395.1%
2039	112,966	168,885	2,655,175	2350.4%	1572.2%
2040	96,447	144,188	2,544,828	2638.6%	1764.9%
2041	81,845	122,358	2,418,988	2955.6%	1977.0%
2042	69,083	103,278	2,291,417	3316.9%	2218.7%
2043	57,905	86,568	2,141,216	3697.8%	2473.4%
2044	48,261	72,150	1,964,028	4069.6%	2722.1%
2045	40,093	59,939	1,792,286	4470.3%	2990.2%
2046	33,106	49,493	1,624,527	4907.1%	3282.3%
2047	27,201	40,665	1,466,339	5390.8%	3605.9%
2048	22,242	33,253	1,313,165	5903.9%	3949.1%
2049	18,086	27,039	1,162,371	6426.9%	4298.9%
2050	14,625	21,864	1,018,261	6962.6%	4657.2%
2051	11,741	17,553	884,140	7530.1%	5036.8%
2052	9,374	14,015	767,127	8183.2%	5473.7%
2053	7,444	11,129	658,750	8849.5%	5919.4%
2054	5,856	8,754	555,394	9485.0%	6344.5%
2055	4,587	6,857	463,444	10103.7%	6758.3%
2056	3,565	5,329	382,208	10722.2%	7172.1%
2057	2,750	4,112	315,455	11469.1%	7671.6%
2058	2,116	3,164	259,858	12279.6%	8213.8%
2059	1,627	2,432	211,370	12994.1%	8691.7%
2060	1,236	1,847	168,053	13600.9%	9097.6%
2061	930	1,390	130,552	14042.8%	9393.2%
2062	693	1,036	102,326	14767.5%	9877.9%
2063	517	773	80,938	15643.5%	10463.9%
2064	387	579	63,491	16392.8%	10965.1%
2065	286	428	48,772	17055.8%	11408.6%
2066	207	310	36,075	17397.7%	11637.3%
2067	149	223	26,805	17972.1%	12021.5%
2068	106	159	20,135	18946.4%	12673.2%
2069	71	106	15,136	21413.8%	14323.6%
2070	43	64	10,875	25269.6%	16902.7%
2071	1	1	96	13637.5%	9122.1%
2072	0	0	0	5248.4%	3510.6%
2073	0	0	0	0.0%	0.0%
	Earned Premium w/o Increase	Earned Premium With Increase	Incurred Claims	Loss Ratio w/o Increase	Loss Ratio With Increase
Past Experience @ 4.5%	34,971,656	34,971,656	16,756,155	47.9%	47.9%
Anticipated Experience @ 4.5%	9,812,586	14,019,176	41,319,272	421.1%	294.7%
Lifetime Experience @ 4.5%	44,784,242	48,990,832	58,075,427	129.7%	118.5%

Lifetime Experience (Virginia) as of 12/31/2016

All Benefit Periods - Pre-Rate Stabilization

	Incurred Claims				
Year	Earned Premium	Discounted to Incurred Year	Loss Ratio		
1997	59,351	0	0.0%		
1998	298,507	5	0.0%		
1999	503,387	41	0.0%		
2000	821,057	936	0.1%		
2001	1,277,765	311,629	24.4%		
2002	1,814,457	5,595	0.3%		
2003	2,531,857	68,437	2.7%		
2004	2,659,336	1,451,796	54.6%		
2005	2,605,134	447,931	17.2%		
2006	2,566,776	392,836	15.3%		
2007	2,613,306	2,091,896	80.0%		
2008	2,776,940	1,745,798	62.9%		
2009	2,684,231	308,473	11.5%		
2010	2,626,950	1,835,652	69.9%		
2011	2,563,762	1,317,071	51.4%		
2012	2,479,926	1,105,297	44.6%		
2013	2,566,542	2,328,534	90.7%		
2014	2,720,356	1,799,985	66.2%		
2015	2,652,016	3,394,147	128.0%		
2016	2,522,474	2,612,230	103.6%		
Total	41,344,130	21,218,289	51.3%		
Interest Adjusted	60,125,410	27,272,585	45.4%		
	Earned Premium	Earned Premium	Loss Ratio	Loss Ratio	
	w/o Increase	w/Increase	w/o Increase	w/Increase	
	Incurring Claims				
2017	2,309,027	2,439,394	2,722,320	117.9%	111.6%
2018	2,117,577	2,558,178	2,853,890	134.8%	111.6%
2019	1,939,961	2,492,237	3,040,595	156.7%	122.0%
2020	1,773,911	2,283,155	3,254,958	183.5%	142.6%
2021	1,616,277	2,084,090	3,414,187	211.2%	163.8%
2022	1,468,286	1,896,676	3,609,807	245.9%	190.3%
2023	1,327,457	1,717,924	3,633,178	273.7%	211.5%
2024	1,196,379	1,551,353	3,628,314	303.3%	233.9%
2025	1,074,624	1,396,404	3,746,285	348.6%	268.3%
2026	962,614	1,253,584	3,865,052	401.5%	308.3%
2027	859,662	1,122,013	3,973,188	462.2%	354.1%
2028	765,014	1,000,770	4,059,329	530.6%	405.6%
2029	678,485	889,659	4,134,689	609.4%	464.8%
2030	599,569	788,045	4,205,252	701.4%	533.6%
2031	527,592	695,067	4,242,647	804.2%	610.4%
2032	462,417	610,628	4,274,743	924.4%	700.1%
2033	403,272	533,736	4,221,619	1046.8%	791.0%
2034	350,557	465,013	4,109,894	1172.4%	883.8%
2035	303,878	404,018	4,028,616	1325.7%	997.1%
2036	262,304	349,533	3,954,089	1507.4%	1131.2%
2037	225,316	300,909	3,876,589	1720.5%	1288.3%
2038	192,582	257,756	3,767,669	1956.4%	1461.7%
2039	163,819	219,737	3,617,173	2208.0%	1646.1%
2040	138,668	186,409	3,439,983	2480.7%	1845.4%
2041	116,691	157,204	3,247,235	2782.8%	2065.6%
2042	97,696	131,892	3,052,302	3124.3%	2314.2%
2043	81,261	109,924	2,834,395	3488.0%	2578.5%
2044	67,220	91,109	2,586,371	3847.6%	2838.8%
2045	55,391	75,237	2,345,667	4234.8%	3117.7%
2046	45,362	61,749	2,112,511	4657.0%	3421.1%
2047	36,977	50,441	1,894,767	5124.2%	3756.4%
2048	30,005	41,015	1,686,955	5622.3%	4113.1%
2049	24,211	33,163	1,484,924	6133.3%	4477.6%
2050	19,418	26,658	1,293,337	6660.4%	4851.7%
2051	15,460	21,272	1,116,973	7224.9%	5250.9%
2052	12,244	16,884	963,121	7866.4%	5704.4%
2053	9,650	13,335	822,849	8526.6%	6170.5%
2054	7,542	10,440	691,089	9163.8%	6619.6%
2055	5,861	8,132	574,182	9796.3%	7061.0%
2056	4,513	6,278	471,619	10449.4%	7512.4%
2057	3,450	4,812	387,445	11229.7%	8052.2%
2058	2,632	3,680	317,749	12071.6%	8635.2%
2059	2,006	2,811	257,451	12833.2%	9157.6%
2060	1,511	2,123	204,276	13517.7%	9623.0%
2061	1,125	1,585	158,446	14084.6%	9995.7%
2062	829	1,172	123,618	14918.4%	10551.0%
2063	613	869	97,467	15903.9%	11216.5%
2064	456	647	76,311	16750.4%	11789.2%
2065	334	476	58,571	17514.2%	12305.7%
2066	241	344	43,313	17961.9%	12599.1%
2067	172	246	32,110	18661.6%	13058.6%
2068	122	175	24,080	19717.3%	13781.2%
2069	81	116	18,040	22188.7%	15512.9%
2070	47	69	12,947	27350.2%	18862.3%
2071	1	1	1,508	148588.0%	110745.5%
2072	0	0	0	1775.8%	1615.4%
2073	0	0	0	0.0%	0.0%
Past Experience @ 4.5%	Earned Premium	Earned Premium	Loss Ratio	Loss Ratio	
	w/o Increase	With Increase	w/o Increase	With Increase	
	Incurring Claims				
	2017	60,125,410	60,125,410	27,272,585	45.4%
Anticipated Experience @ 4.5%	16,510,378	20,716,968	61,770,716	374.1%	298.2%
Lifetime Experience @ 4.5%	76,635,788	80,842,378	89,043,301	116.2%	110.1%

Lifetime Experience (Virginia) as of 12/31/2016

Non-Lifetime Benefit Periods - Post Stabilization Experience

Year	Non-Interest Adjusted			Interest Adjusted		
	Original Premium	Increased Premium	Incurred Claims	Original Premium	Increased Premium	Incurred Claims
1998	0	0	0	0	0	0
1999	0	0	0	0	0	0
2000	0	0	0	0	0	0
2001	0	0	0	0	0	0
2002	0	0	0	0	0	0
2003	6,600	0	0	11,958	0	0
2004	150,611	0	0	261,102	0	0
2005	210,753	0	0	349,633	0	0
2006	209,524	0	0	332,625	0	0
2007	187,849	21,236	0	285,374	32,261	0
2008	168,069	48,740	0	244,330	70,856	0
2009	160,636	46,584	1,449	223,468	64,806	2,016
2010	156,124	45,276	146,708	207,838	60,273	195,303
2011	152,969	44,361	60,879	194,870	56,512	77,555
2012	150,090	43,526	7,749	182,968	53,061	9,446
2013	152,959	72,934	50,459	178,436	85,082	58,863
2014	152,921	90,557	156,390	170,710	101,091	174,583
2015	153,402	93,801	2,244	163,873	100,203	2,397
2016	152,660	93,347	308,852	156,057	95,424	315,725
Total	2,165,170	600,362	734,730	2,963,240	719,568	835,888
2017	138,762	84,849	234,075	135,742	83,002	228,979
2018	126,080	77,094	241,606	118,025	72,168	226,170
2019	114,535	70,035	253,895	102,600	62,737	227,439
2020	103,916	63,541	266,230	89,079	54,469	228,218
2021	93,969	57,459	276,210	77,084	47,134	226,578
2022	84,752	51,823	289,213	66,529	40,681	227,027
2023	76,045	46,499	285,853	57,123	34,929	214,727
2024	67,973	41,563	281,453	48,861	29,877	202,317
2025	60,508	36,999	286,378	41,622	25,451	196,993
2026	53,681	32,824	291,498	35,336	21,607	191,881
2027	47,453	29,016	295,650	29,891	18,278	186,233
2028	41,776	25,545	297,821	25,182	15,398	179,522
2029	36,634	22,400	298,877	21,131	12,921	172,401
2030	31,996	19,565	298,248	17,661	10,799	164,629
2031	27,826	17,015	296,563	14,698	8,988	156,650
2032	24,096	14,734	293,966	12,180	7,448	148,592
2033	20,762	12,695	285,023	10,043	6,141	137,867
2034	17,829	10,902	272,537	8,253	5,046	126,151
2035	15,259	9,330	261,733	6,759	4,133	115,933
2036	13,004	7,951	251,798	5,512	3,370	106,730
2037	11,028	6,744	242,326	4,473	2,735	98,292
2038	9,305	5,690	231,568	3,612	2,209	89,883
2039	7,811	4,776	218,717	2,901	1,774	81,239
2040	6,523	3,988	204,060	2,318	1,418	72,531
2041	5,416	3,312	189,448	1,842	1,126	64,438
2042	4,474	2,736	174,686	1,456	890	56,858
2043	3,672	2,245	159,661	1,144	699	49,730
2044	2,997	1,833	143,679	893	546	42,825
2045	2,432	1,487	128,104	694	424	36,538
2046	1,960	1,199	113,288	535	327	30,921
2047	1,573	962	99,748	411	251	26,053
2048	1,256	768	87,278	314	192	21,814
2049	997	610	75,549	238	146	18,070
2050	785	480	64,605	180	110	14,787
2051	613	375	54,848	134	82	12,013
2052	476	291	46,301	100	61	9,704
2053	369	226	38,872	74	45	7,796
2054	285	174	32,222	55	33	6,184
2055	217	133	26,384	40	24	4,846
2056	163	100	21,353	29	18	3,753
2057	121	74	17,220	20	12	2,896
2058	91	55	13,866	15	9	2,232
2059	68	41	11,053	10	6	1,702
2060	50	31	8,698	7	4	1,282
2061	36	22	6,699	5	3	945
2062	25	16	5,106	3	2	689
2063	18	11	3,960	2	1	511
2064	13	8	3,068	2	1	379
2065	10	6	2,344	1	1	277
2066	7	4	1,733	1	0	196
2067	5	3	1,266	0	0	137
2068	3	2	941	0	0	97
2069	2	1	694	0	0	69
2070	1	1	496	0	0	47
2071	0	0	340	0	0	31
2072	0	0	0	0	0	0
2073	0	0	0	0	0	0
Total	1,259,661	770,243	7,988,810	944,824	577,729	4,424,803
Grand Total	3,424,831	1,370,605	8,723,540	3,908,064	1,297,298	5,260,691

Minimum Required Loss Ratios	58%	85%
Minimum PV Incurred Claims	2,266,677	1,102,703
Dual Loss Ratio Test Met	5,260,691	>

Lifetime Experience (Virginia) as of 12/31/2016

Lifetime Benefit Period - Post Stabilization Experience

Year	Non-Interest Adjusted			Interest Adjusted		
	Original Premium	Increased Premium	Incurred Claims	Original Premium	Increased Premium	Incurred Claims
1998	0	0	0	0	0	0
1999	0	0	0	0	0	0
2000	0	0	0	0	0	0
2001	0	0	0	0	0	0
2002	0	0	0	0	0	0
2003	7,900	0	0	14,312	0	0
2004	146,350	0	0	253,715	0	0
2005	185,588	0	0	307,885	0	0
2006	184,680	0	0	293,185	0	0
2007	173,037	21,890	0	262,871	33,254	0
2008	165,980	47,698	0	241,292	69,341	0
2009	162,659	47,171	0	226,282	65,622	0
2010	160,214	46,462	0	213,283	61,852	0
2011	160,530	46,554	0	204,501	59,305	0
2012	161,168	46,739	0	196,472	56,977	0
2013	129,333	70,177	56,640	150,875	81,866	66,074
2014	102,721	94,412	11,550	114,670	105,394	12,894
2015	100,085	101,326	19,613	106,916	108,242	20,952
2016	98,627	99,850	42,747	100,822	102,072	43,698
Total	1,938,872	622,279	130,550	2,687,081	743,926	143,617
2017	91,006	110,449	215,048	89,025	108,045	210,367
2018	84,360	147,370	229,087	78,970	137,954	214,450
2019	78,061	156,788	249,231	69,926	140,450	223,260
2020	72,061	144,738	274,359	61,772	124,072	235,186
2021	66,278	133,121	293,119	54,368	109,200	240,447
2022	60,766	122,050	316,043	47,700	95,807	248,088
2023	55,447	111,368	322,084	41,651	83,657	241,943
2024	50,470	101,370	323,904	36,279	72,868	232,833
2025	45,818	92,026	340,839	31,517	63,303	234,456
2026	41,498	83,350	357,952	27,316	54,866	235,624
2027	37,483	75,286	374,054	23,611	47,424	235,621
2028	33,749	67,786	388,162	20,343	40,861	233,978
2029	30,295	60,848	401,769	17,475	35,099	231,752
2030	27,098	54,426	415,906	14,958	30,043	229,576
2031	24,136	48,477	425,823	12,749	25,607	224,928
2032	21,411	43,005	435,544	10,823	21,738	220,155
2033	18,893	37,947	435,701	9,139	18,355	210,751
2034	16,617	33,376	428,365	7,692	15,449	198,280
2035	14,582	29,289	425,488	6,459	12,974	188,467
2036	12,742	25,592	422,978	5,401	10,848	179,288
2037	11,080	22,254	419,613	4,494	9,027	170,202
2038	9,588	19,258	412,331	3,722	7,475	160,046
2039	8,261	16,592	400,056	3,068	6,163	148,595
2040	7,083	14,227	384,672	2,518	5,057	136,728
2041	6,038	12,128	366,865	2,054	4,125	124,784
2042	5,121	10,285	348,699	1,667	3,348	113,497
2043	4,313	8,663	327,007	1,343	2,698	101,853
2044	3,613	7,256	300,548	1,077	2,163	89,581
2045	3,018	6,061	274,948	861	1,729	78,422
2046	2,505	5,032	249,842	684	1,373	68,192
2047	2,070	4,157	226,093	541	1,086	59,053
2048	1,703	3,420	203,011	426	855	50,741
2049	1,393	2,799	180,170	333	669	43,093
2050	1,135	2,279	158,222	260	522	36,214
2051	917	1,843	137,760	201	404	30,173
2052	737	1,481	119,815	155	310	25,112
2053	590	1,185	103,266	118	238	20,712
2054	467	939	87,266	90	180	16,749
2055	369	741	73,009	68	136	13,409
2056	289	580	60,416	51	102	10,618
2057	224	449	49,991	38	76	8,408
2058	173	348	41,279	28	56	6,644
2059	134	269	33,682	21	41	5,187
2060	102	205	26,859	15	30	3,959
2061	77	155	20,908	11	22	2,949
2062	58	116	16,392	8	16	2,212
2063	43	87	13,012	6	11	1,681
2064	32	65	10,227	4	8	1,264
2065	24	48	7,880	3	6	932
2066	18	35	5,845	2	4	661
2067	13	25	4,344	1	3	470
2068	9	18	3,266	1	2	338
2069	6	12	2,459	1	1	244
2070	3	7	1,768	0	1	168
2071	0	0	0	0	0	0
2072	0	0	0	0	0	0
2073	0	0	0	0	0	0
Total	953,975	1,821,684	12,146,976	691,040	1,296,554	6,002,340
Grand Total	2,892,847	2,443,963	12,277,526	3,378,121	2,040,480	6,145,957

Minimum Required Loss Ratios	58%	85%
Minimum PV Incurred Claims	1,959,310	1,734,408
Dual Loss Ratio Test Met	6,145,957	> 3,693,718

Lifetime Experience (Virginia) as of 12/31/2016

All Benefit Periods Combined - Post Stabilization Experience

Year	Non-Interest Adjusted			Interest Adjusted		
	Original Premium	Increased Premium	Incurred Claims	Original Premium	Increased Premium	Incurred Claims
1998	0	0	0	0	0	0
1999	0	0	0	0	0	0
2000	0	0	0	0	0	0
2001	0	0	0	0	0	0
2002	0	0	0	0	0	0
2003	14,501	0	0	26,270	0	0
2004	296,960	0	0	514,816	0	0
2005	396,342	0	0	657,517	0	0
2006	394,204	0	0	625,810	0	0
2007	360,886	43,126	0	548,245	65,516	0
2008	334,049	96,438	0	485,623	140,197	0
2009	323,295	93,755	1,449	449,750	130,427	2,016
2010	316,338	91,738	146,708	421,121	122,125	195,303
2011	313,499	90,915	60,879	399,371	115,817	77,555
2012	311,258	90,265	7,749	379,440	110,038	9,446
2013	282,292	143,112	107,099	329,311	166,948	124,937
2014	255,642	184,969	167,940	285,380	206,485	187,476
2015	253,487	195,127	21,857	270,789	208,445	23,349
2016	251,287	193,197	351,599	256,879	197,496	359,423
Total	4,104,041	1,222,641	865,280	5,650,322	1,463,494	979,505
2017	229,769	195,298	449,123	224,767	191,047	439,346
2018	210,440	224,464	470,694	196,994	210,122	440,620
2019	192,596	226,822	503,126	172,527	203,187	450,699
2020	175,977	208,279	540,589	150,851	178,541	463,404
2021	160,247	190,580	569,329	131,452	156,335	467,025
2022	145,518	173,874	605,256	114,229	136,488	475,115
2023	131,492	157,866	607,937	98,774	118,586	456,671
2024	118,443	142,934	605,357	85,140	102,745	435,150
2025	106,326	129,025	627,217	73,139	88,754	431,449
2026	95,179	116,174	649,450	62,652	76,473	427,505
2027	84,936	104,302	669,705	53,502	65,701	421,854
2028	75,525	93,331	685,983	45,525	56,259	413,500
2029	66,929	83,249	700,647	38,606	48,020	404,153
2030	59,094	73,991	714,154	32,619	40,842	394,205
2031	51,962	65,492	722,386	27,447	34,594	381,578
2032	45,507	57,739	729,510	23,003	29,186	368,747
2033	39,655	50,643	720,723	19,181	24,496	348,618
2034	34,447	44,278	700,902	15,944	20,495	324,431
2035	29,841	38,619	687,221	13,218	17,106	304,400
2036	25,745	33,543	674,776	10,913	14,218	286,017
2037	22,108	28,997	661,939	8,967	11,762	268,494
2038	18,894	24,948	643,899	7,334	9,684	249,929
2039	16,072	21,369	618,773	5,970	7,937	229,834
2040	13,606	18,216	588,731	4,836	6,475	209,259
2041	11,454	15,440	556,313	3,896	5,252	189,221
2042	9,594	13,020	523,386	3,123	4,238	170,356
2043	7,985	10,908	486,668	2,487	3,397	151,583
2044	6,610	9,089	444,228	1,970	2,709	132,406
2045	5,450	7,548	403,052	1,554	2,153	114,960
2046	4,466	6,230	363,130	1,219	1,700	99,113
2047	3,643	5,119	325,841	951	1,337	85,106
2048	2,959	4,188	290,290	740	1,047	72,555
2049	2,391	3,408	255,719	572	815	61,162
2050	1,920	2,760	222,827	439	632	51,000
2051	1,531	2,218	192,609	335	486	42,186
2052	1,214	1,772	166,116	254	371	34,816
2053	959	1,410	142,139	192	283	28,508
2054	752	1,113	119,488	144	214	22,933
2055	586	874	99,392	108	161	18,255
2056	452	679	81,769	79	119	14,371
2057	345	524	67,211	58	88	11,304
2058	264	403	55,145	42	65	8,875
2059	201	310	44,735	31	48	6,890
2060	152	236	35,557	22	35	5,240
2061	113	177	27,607	16	25	3,894
2062	83	131	21,498	11	18	2,901
2063	61	98	16,972	8	13	2,192
2064	46	73	13,295	6	9	1,643
2065	34	54	10,224	4	6	1,209
2066	24	39	7,577	3	4	858
2067	17	28	5,610	2	3	608
2068	12	20	4,207	1	2	436
2069	8	13	3,153	1	1	313
2070	4	8	2,264	0	1	215
2071	0	0	340	0	0	31
2072	0	0	0	0	0	0
2073	0	0	0	0	0	0
Total	2,213,636	2,591,927	20,135,786	1,635,863	1,874,283	10,427,143
Grand Total	6,317,678	3,814,568	21,001,066	7,286,185	3,337,778	11,406,648

Minimum Required Loss Ratios	58%	85%
Minimum PV Incurred Claims	4,225,987	2,837,111
Dual Loss Ratio Test Met	11,406,648	>

MUTUAL OF OMAHA INSURANCE COMPANY

3300 Mutual of Omaha Plaza, Omaha, NE 68175



STATEMENT OF VARIABILITY POLICY ADJUSTMENT RIDER 0PE4M

Mutual of Omaha Insurance Company certifies that any change or modification to a variable item will be administered in accordance with the requirements of the state where this is filed.

Number	Variable	Explanation
1	NAME	Name of insured.
2	ADDRESS	Street address of insured.
3	CITY, STATE, ZIP	City, state, and zip code of interest.
4	POLNUM	Policy number of insured.
5	DATE	Effective date of benefit change.
6	AMOUNT MODE	Modal premium amount of insured.
7	MODE OF PAYMENT	Annual, semi-annual, quarterly, or monthly premium payment mode of insured.
8	Benefit Change	Applies to any of the following benefit changes elected by the insured: <ul style="list-style-type: none">• Reduction in benefit period – shows the new benefit period;• Increase in elimination period – shows the new elimination period;• Decrease in daily benefit – shows the new daily benefit amount;• Acceptance of the contingent benefit upon lapse, which will include the benefit amount;• Removal of any rider – shows the rider that was removed and is no longer in force.

MUTUAL OF OMAHA INSURANCE COMPANY

3300 Mutual of Omaha Plaza, Omaha, NE 68175



STATEMENT OF VARIABILITY POLICY ADJUSTMENT RIDER 0PE4M

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VIRGINIA READABILITY COMPLIANCE CERTIFICATION

Name and Address of Insurer **Mutual of Omaha Insurance Company**
3300 Mutual of Omaha Plaza, Omaha, NE 68175


I hereby certify that the Flesch reading ease score for each form listed is as shown below. The type size of each form is 10-point type, one-point leaded.

The entire text of the forms was tested.

<u>FORM NUMBER</u>	<u>TITLE OF FORM</u>	<u>SENTENCES</u>	<u>WORDS</u>	<u>SYLLABLES</u>	<u>FLESH SCORE</u>
OPE4M	Policy Adjustment Rider	9	164	254	57.6

I also certify that the forms listed are in compliance with Section 38.2-3404 of the Code of Virginia and with the Rules and Regulations for Simplified and Readable Accident and Sickness Insurance Policies adopted pursuant thereto.

July 24, 2017
Date



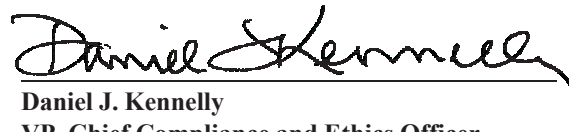
Daniel J. Kennelly
Vice President, Chief Compliance and Ethics Officer
Mutual of Omaha Insurance Company

VIRGINIA

The Company has reviewed the enclosed forms and certifies that, to the best of its knowledge and belief, each form submitted is consistent and complies with the requirements of Title 38.2 of the Code of Virginia and the regulations promulgated pursuant thereto.

Mutual of Omaha Insurance Company

Name of Company

A handwritten signature in black ink, reading "Daniel J. Kennelly". The signature is written in a cursive style with a large, stylized "D" and "K".

Daniel J. Kennelly

VP, Chief Compliance and Ethics Officer

Mutual of Omaha Insurance Company

Date: 07/24/2017

Form No: Policy Adjustment Rider OPE4M



REQUEST FOR COVERAGE ADJUSTMENT

Coverage ID: [CovID]

To Mutual of Omaha Insurance Company:

1. Please increase my elimination period to:
Effective:
2. Please reduce my daily benefit to:
Effective:
3. Please remove from my coverage, Rider:
Effective:
4. Other coverage changes (please be specific):
Effective:

Witness:

Name of Agent

Policyowner's Signature

Telephone _____

Date _____

MUTUAL of OMAHA INSURANCE COMPANY
Mutual of Omaha Plaza
Omaha, NE 68175
402 342 7600
mutualofomaha.com



[Date]

[Name]

[Address]

[City, State, ZIP]

Coverage ID: [CovID]

Dear [Name]:

Thank you for your continued confidence in Mutual of Omaha Insurance Company.

As you have requested, we have changed your benefit [EffDate], as listed below. Your new premium is [Amount], [Mode]. Please place this letter with your insurance contract for future reference.

Base Policy:

[Revised Benefit Period]

Rider:

[Revised Benefit Period]

If you have any questions, please call us at 1-800-775-6000.

Sincerely,

Customer Service Department

MUTUAL of OMAHA INSURANCE COMPANY
Mutual of Omaha Plaza
Omaha, NE 68175
402 342 7600
mutualofomaha.com



[Date]

[Name]

[Address]

[City, State, ZIP]

Coverage ID: [CovID]

Dear [Name]:

Thank you for your continued confidence in Mutual of Omaha Insurance Company.

As you have requested, we have changed your benefit [EffDate], as listed below. Your new premium is [Amount], [Mode]. Please place this letter with your insurance contract for future reference.

[Benefit Change]

If you have any questions, please call us at 1-800-775-6000.

Sincerely,

Customer Service Department

Statement of Variability (applicable to M1769 (LTC – VA), M1770 (LTC – VA) and M1771 LTC - VA)

Date – date the letter is sent out, month, day and year

Name – name of policyholder

Address – street address of policyholder

City, State, ZIP – city, state and zip code of policyholder

CovID – policy number of policyholder

EffDate – effective date of benefit change

Amount – new modal premium amount of policyholder based on the new benefit

Mode – annual, semi-annual, quarterly or monthly premium payment mode of policyholder

Revised Benefit Period – shows the new benefit period elected by the policyholder

Benefit Change – applies to any of the following benefit changes elected by the policyholder:

- Increase in elimination period – shows the new elimination period;
- Decrease in daily benefit – shows the new daily benefit amount;
- Acceptance of the contingent benefit upon lapse, which will include the benefit amount;
- Acceptance of the contractual non-forfeiture benefit, which will include the benefit amount; or
- Removal of any rider – shows the rider that was removed and is no longer in force.



CONTINGENT NON-FORFEITURE RIDER

This rider is made a part of your policy or certificate to which it is attached. It is subject to all parts of your policy or certificate not in conflict with this rider.

Rider Date (July 1, 2000, or the Policy Date or Certificate Date, whichever is later)

CONTINGENT NON-FORFEITURE BENEFIT

If Your premium rates increase:

- (a) to a level which results in a cumulative increase of the annual premium equal to or exceeding the percentage of Your initial annual premium, as shown in the table below, based on Your issue age, and
- (b) Your policy has been in force for at least 3 years,

You may elect one of the following:

1. You may continue to pay the required premium amount.
2. You may lower Your premium by decreasing Your coverage.
3. You may elect to convert Your coverage within 120 days of the premium increase date to a paid-up status with the Contingent Non-Forfeiture Benefit.
4. You may lapse Your policy within 120 days of the premium increase date and be automatically converted to the Contingent Non-Forfeiture Benefit.

If you elect to discontinue making premium payments under items 3 or 4 above, Your policy will continue with the same benefits except for a reduction in Your Maximum Benefit Period. Your Maximum Benefit Period under this Contingent Non-Forfeiture Benefit will be equal to the total premium paid up to the date the premium was no longer paid, divided by the Daily Benefit amount.

The percentage of premium increase does not include increases to the premiums as a result of changes to Your long-term care coverage.

In no event will the reduced Maximum Benefit Period:

- (a) be less than 30 days; or
- (b) exceed the amount that would have been paid had premiums continued to be paid.

You will not be eligible for any Daily Benefit amount increases under the Compound Inflation Protection Rider or the Guarantee Purchase Benefit Option nor will any restoration of benefits be made once the policy lapses and goes on non-forfeiture status.

NOTE: If any other Non-Forfeiture rider is attached to Your policy, this Contingent Non-Forfeiture Benefit will not apply.

MUTUAL OF OMAHA INSURANCE COMPANY


Corporate Secretary

Statement of Variability (applicable to Forms 0555A-VA-1 and 0555A-VA-2)

Any language that appears in brackets in the Premium Notification Letter is variable for the following items:

- Month, Year – date the letter is sent
- Name – name of policyholder
- Address – street address of policyholder
- City, State, ZIP – city, state and zip code of policyholder
- CovID – policy number of the policyholder
- Total Inc – reflects the total increase amount approved by the Virginia Bureau of Insurance
- Year-1 – the year the first rate increase is implemented
- Year-2 – the year the second rate increase is implemented
- EffDate-1 – the date the first rate increase is effective
- EffDate-2 – the date the second rate increase is effective
- Mode – annual, semi-annual, quarterly or monthly premium payment mode
- CurrPrem – current premium of policyholder prior to the rate increase
- NewPrem – new premium of policyholder after the rate increase
- Difference – increased premium amount
- EffDate-1 – effective date of the premium change for the first increase
- EffDate-2 – effective date of the premium changes for the second increase
- Inc Prem-2 – the premium amount after the second rate increase is implemented
- Inc Amt-1 – the increase amount of the first rate increase
- Inc Amt-2 – the increase amount of the second rate increase
- Agent Name – name of policyholder's agent
- Agent Phone# - phone number of policyholder's agent
- WAIVER – the policyholder is on waiver of premium.

Not all of the language in brackets will appear in every premium notification letter. The language in brackets will not appear in the Letter if is not applicable.

Form	Information	<u>Pre-Rate Stabilization</u>		<u>Post-Rate Stabilization</u>	
		Lifetime Benefit Period	Non-Lifetime Benefit Period	Lifetime Benefit Period	Non-Lifetime Benefit Period
LT50	Policy Count	1,225	1,731	0	0
	Annualized Premium	2,942,831	2,647,769	0	0
	Historical Loss Ratio @ 4.5%	66.7%	51.3%	0.0%	0.0%
NH50	Policy Count	568	612	0	0
	Annualized Premium	772,408	520,775	0	0
	Historical Loss Ratio @ 4.5%	90.8%	83.6%	0.0%	0.0%
HCA	Policy Count	299	650	4	10
	Annualized Premium	959,008	1,069,974	9,449	16,176
	Historical Loss Ratio @ 4.5%	58.6%	44.4%	223.7%	26.3%
NHA	Policy Count	5,211	6,192	567	711
	Annualized Premium	17,052,361	13,280,090	1,479,883	1,426,003
	Historical Loss Ratio @ 4.5%	81.4%	59.9%	63.8%	43.9%
LTA	Policy Count	8,181	6,397	619	495
	Annualized Premium	23,003,454	11,353,772	1,266,728	819,792
	Historical Loss Ratio @ 4.5%	40.1%	36.1%	32.3%	26.4%

Lifetime Loss Ratio**Pre-Rate Stabilization (original filed loss ratios)**

Form	Lifetime	Non-Lifetime	Total
LT50	63.2%	63.1%	63.2%
NH50	65.4%	65.3%	65.4%
HCA	61.0%	61.8%	61.8%
LTA	61.7%	61.6%	61.6%
NHA	61.4%	61.5%	61.5%

Post-Rate Stabilization w/MAE (original filed loss ratios)

Form	Lifetime	Non-Lifetime	Total
LT50	0.0%	0.0%	0.0%
NH50	0.0%	0.0%	0.0%
HCA	68.5%	69.1%	68.7%
LTA	67.7%	67.6%	67.7%
NHA	67.4%	67.9%	67.7%

Post-Rate Stabilization w/MAE (after rate increase)

Form	Lifetime	Non-Lifetime	Total
LT50	0.0%	0.0%	0.0%
NH50	0.0%	0.0%	0.0%
HCA	95.4%	39.5%	63.4%
LTA	100.2%	88.6%	96.5%
NHA	112.5%	85.9%	100.6%

Note: there is no HCA post-stabilization business in Virginia.

Original Lifetime Loss Ratio Weighted by Lifetime Projected Premium:

Pre	Lifetime	Non-Lifetime	Total
Survivorship	61.7%	61.6%	61.6%
Non-Survivorship	62.0%	62.0%	62.1%
Post w/ MAE	Lifetime	Non-Lifetime	Total
Survivorship	100.2%	88.6%	96.5%
Non-Survivorship	112.3%	85.6%	100.2%

Lifetime Original Projected Premium**Pre-Rate Stabilization**

Form	Lifetime	Non-Lifetime	Total
LT50	68,921,373	64,499,014	133,420,387
NH50	18,457,440	18,173,280	36,630,719
HCA	32,520,013	16,968,733	39,064,033
LTA	107,627,432	244,439,691	352,067,123
NHA	188,569,874	251,614,864	440,184,738

Post-Rate Stabilization

Form	Lifetime	Non-Lifetime	Total
LT50	0	0	0
NH50	0	0	0
HCA	214,126	152,271	366,396
LTA	7,838,737	13,545,256	21,383,993
NHA	17,715,879	18,045,266	35,761,146

Split	Lifetime	Non-Lifetime
Pre	61.9%	61.9%
Post	108.7%	86.8%

Note: The Post-Stabilization Loss Ratios with MAE reflect the increases that were implemented in Virginia in 2013 and 2014.

Non-Lifetime Benefit Periods**Pre-Rate Stabilization**

Incurred Year	Prior Rate Filing	Current Rate Filing
1997	0	0
1998	112,177	107,337
1999	689,789	620,403
2000	1,407,184	1,279,039
2001	2,739,855	2,429,334
2002	5,076,172	4,609,517
2003	3,994,615	3,660,231
2004	6,300,499	5,771,160
2005	9,499,669	8,629,972
2006	9,549,843	8,814,082
2007	12,664,056	11,678,078
2008	13,921,792	13,342,930
2009	14,748,642	15,858,480
2010	15,040,636	17,408,466
2011	16,537,480	20,794,851
2012	19,266,382	25,050,446
2013	17,949,355	24,236,077
2014	16,299,060	24,831,729
2015	17,188,867	27,001,863
2016	18,154,518	34,148,099
2017	19,166,180	27,636,882
2018	20,160,848	28,416,518
2019	21,578,507	29,611,006
2020	22,945,317	30,735,018
2021	24,023,178	31,622,766
2022	25,873,574	32,784,022
2023	25,738,999	32,382,296
2024	24,927,273	31,821,503
2025	25,255,879	32,100,913
2026	25,615,530	32,393,466
2027	25,959,781	32,599,205
2028	26,164,339	32,613,782
2029	26,208,689	32,495,597
2030	25,988,287	32,191,361
2031	25,671,754	31,791,974
2032	25,409,506	31,314,292
2033	24,537,127	30,248,034
2034	23,127,001	28,846,686
2035	22,005,490	27,601,218
2036	20,841,533	26,458,888
2037	19,682,765	25,380,908
2038	18,490,569	24,177,026
2039	17,197,032	22,768,954
2040	15,789,180	21,186,398
2041	14,407,270	19,606,995
2042	13,044,635	18,018,887
2043	11,726,460	16,419,637
2044		14,741,503
2045		13,110,603
2046		11,561,286
2047		10,149,439
2048		8,853,963
2049		7,641,022
2050		6,515,510
2051		5,514,288
2052		4,640,354
2053		3,883,863
2054		3,209,977
2055		2,619,423
2056		2,113,521
2057		1,699,948
2058		1,365,341
2059		1,085,897
2060		852,813
2061		655,912
2062		499,460
2063		386,898
2064		299,650
2065		228,822
2066		169,082
2067		123,691
2068		91,921
2069		67,772
2070		48,386
2071		33,070
2072		4
2073		0

Post-Rate Stabilization

Incurred Year	Prior Rate Filing	Current Rate Filing
1997	0	0
1998	0	0
1999	0	0
2000	0	0
2001	0	0
2002	0	0
2003	0	0
2004	224,567	209,237
2005	69,501	65,865
2006	619,771	535,770
2007	379,528	347,698
2008	421,896	430,039
2009	764,769	654,237
2010	1,057,132	1,284,179
2011	1,207,574	622,344
2012	1,456,918	1,205,371
2013	1,335,373	1,454,616
2014	1,179,085	1,282,810
2015	1,247,394	1,305,648
2016	1,321,956	2,274,370
2017	1,398,868	2,219,636
2018	1,474,047	2,282,935
2019	1,592,671	2,390,252
2020	1,708,086	2,492,130
2021	1,806,314	2,579,730
2022	1,965,211	2,692,202
2023	1,949,489	2,654,967
2024	1,878,460	2,607,342
2025	1,916,973	2,645,127
2026	1,959,247	2,685,121
2027	1,999,328	2,716,671
2028	2,027,516	2,730,416
2029	2,044,565	2,734,855
2030	2,040,267	2,722,243
2031	2,030,873	2,702,500
2032	2,022,207	2,674,332
2033	1,960,168	2,588,568
2034	1,849,895	2,470,726
2035	1,766,918	2,369,166
2036	1,680,264	2,276,008
2037	1,593,606	2,187,776
2038	1,504,832	2,088,657
2039	1,406,317	1,971,397
2040	1,296,355	1,837,709
2041	1,189,082	1,705,028
2042	1,081,884	1,571,296
2043	978,567	1,435,343
2044		1,290,763
2045		1,150,249
2046		1,016,554
2047		894,491
2048		782,185
2049		676,771
2050		578,385
2051		490,761
2052		413,987
2053		347,356
2054		287,726
2055		235,498
2056		190,449
2057		153,427
2058		123,429
2059		98,334
2060		77,319
2061		59,499
2062		45,273
2063		35,061
2064		27,138
2065		20,718
2066		15,320
2067		11,179
2068		8,302
2069		6,136
2070		4,384
2071		3,009
2072		0
2073		0

Lifetime Benefit Period**Pre-Rate Stabilization**

Incurred Year	Prior Rate Filing	Current Rate Filing
1997	0	0
1998	264,595	229,543
1999	825,844	581,891
2000	2,698,361	1,523,173
2001	7,299,240	4,549,954
2002	6,628,475	5,455,216
2003	11,035,583	9,776,788
2004	15,790,235	13,187,176
2005	18,229,335	16,226,697
2006	17,001,993	15,302,440
2007	25,274,835	21,894,757
2008	31,892,273	31,010,819
2009	25,742,621	29,943,118
2010	32,259,160	43,806,976
2011	34,981,280	46,122,333
2012	39,899,532	46,658,968
2013	35,013,313	48,844,490
2014	30,124,040	40,198,060
2015	32,235,905	45,730,248
2016	34,506,098	48,433,867
2017	36,896,740	42,193,074
2018	39,311,042	44,812,166
2019	43,045,116	48,419,978
2020	48,246,288	52,866,944
2021	51,197,459	56,232,539
2022	55,501,412	60,253,140
2023	55,145,387	61,370,608
2024	53,803,409	61,808,534
2025	55,516,603	64,696,069
2026	58,608,958	67,610,519
2027	61,146,587	70,353,930
2028	62,507,559	72,742,987
2029	63,525,017	74,978,474
2030	64,396,396	77,268,721
2031	64,436,309	78,840,270
2032	64,635,934	80,346,493
2033	63,106,993	80,215,409
2034	60,222,453	78,807,595
2035	58,038,239	78,067,955
2036	55,849,793	77,388,940
2037	53,629,869	76,560,536
2038	51,076,223	75,029,404
2039	48,038,968	72,577,912
2040	44,718,038	69,572,431
2041	41,348,137	66,153,320
2042	38,433,403	62,671,060
2043	35,379,508	58,591,257
2044		53,748,501
2045		49,051,209
2046		44,458,757
2047		40,130,452
2048		35,943,278
2049		31,818,773
2050		27,874,097
2051		24,202,988
2052		20,991,863
2053		18,033,685
2054		15,203,525
2055		12,685,072
2056		10,457,274
2057		8,628,492
2058		7,107,878
2059		5,783,164
2060		4,598,691
2061		3,572,283
2062		2,797,678
2063		2,215,977
2064		1,739,406
2065		1,337,719
2066		990,079
2067		735,316
2068		552,194
2069		415,108
2070		298,193
2071		761
2072		6
2073		1

Post-Rate Stabilization

Incurred Year	Prior Rate Filing	Current Rate Filing
1997	0	0
1998	0	0
1999	0	0
2000	0	0
2001	0	0
2002	509	487
2003	0	0
2004	22,166	21,213
2005	292,280	204,578
2006	337,725	305,634
2007	1,445,977	1,613,672
2008	1,133,815	1,541,097
2009	158,435	360,417
2010	1,868,895	1,228,367
2011	2,042,059	2,158,778
2012	2,360,930	1,596,723
2013	2,053,533	1,799,433
2014	1,738,114	3,246,046
2015	1,865,226	2,858,807
2016	2,001,994	3,611,461
2017	2,145,261	3,390,406
2018	2,289,461	3,604,191
2019	2,521,209	3,910,252
2020	2,842,626	4,290,543
2021	3,024,531	4,573,057
2022	3,297,173	4,922,441
2023	3,272,678	5,013,880
2024	3,182,536	5,033,516
2025	3,294,441	5,286,196
2026	3,487,618	5,541,093
2027	3,646,969	5,780,172
2028	3,734,160	5,988,134
2029	3,801,908	6,187,674
2030	3,863,015	6,395,019
2031	3,872,573	6,536,773
2032	3,891,936	6,678,359
2033	3,801,350	6,673,346
2034	3,621,357	6,550,385
2035	3,493,227	6,498,209
2036	3,366,782	6,452,520
2037	3,236,460	6,394,981
2038	3,086,024	6,278,849
2039	2,903,881	6,087,886
2040	2,707,650	5,849,838
2041	2,512,259	5,574,885
2042	2,338,984	5,296,424
2043	2,156,434	4,964,868
2044		4,559,682
2045		4,169,301
2046		3,786,939
2047		3,425,879
2048		3,075,505
2049		2,729,300
2050		2,396,518
2051		2,086,384
2052		1,814,955
2053		1,564,952
2054		1,322,531
2055		1,106,769
2056		916,077
2057		758,026
2058		626,084
2059		511,157
2060		407,847
2061		317,614
2062		249,024
2063		197,866
2064		155,584
2065		119,981
2066		89,102
2067		66,266
2068		49,872
2069		37,587
2070		27,051
2071		4
2072		0
2073		0

All Benefit Periods Combined**Pre-Rate Stabilization**

Incurred Year	Prior Rate Filing	Current Rate Filing
1997	0	0
1998	376,772	336,880
1999	1,515,633	1,202,294
2000	4,105,545	2,802,212
2001	10,039,095	6,979,288
2002	11,704,647	10,064,733
2003	15,030,198	13,437,019
2004	22,090,734	18,958,336
2005	27,729,004	24,856,669
2006	26,551,836	24,116,522
2007	37,938,891	33,572,835
2008	45,814,064	44,353,749
2009	40,491,263	45,801,598
2010	47,299,797	61,215,442
2011	51,518,760	66,917,183
2012	59,165,914	71,709,414
2013	52,962,668	73,080,567
2014	46,423,100	65,029,789
2015	49,424,772	72,732,111
2016	52,660,616	82,581,966
2017	56,062,920	69,829,956
2018	59,471,891	73,228,684
2019	64,623,623	78,030,984
2020	71,191,605	83,601,961
2021	75,220,637	87,855,305
2022	81,374,986	93,037,162
2023	80,884,386	93,752,904
2024	78,730,682	93,630,038
2025	80,772,482	96,796,982
2026	84,224,489	100,003,985
2027	87,106,368	102,953,135
2028	88,671,898	105,356,769
2029	89,733,706	107,474,071
2030	90,384,683	109,460,081
2031	90,108,063	110,632,245
2032	90,045,440	111,660,785
2033	87,644,120	110,463,443
2034	83,349,454	107,654,281
2035	80,043,728	105,669,173
2036	76,691,326	103,847,828
2037	73,312,634	101,941,444
2038	69,566,792	99,206,430
2039	65,236,001	95,346,866
2040	60,507,218	90,758,829
2041	55,755,407	85,760,315
2042	51,478,038	80,689,947
2043	47,105,968	75,010,894
2044	0	68,490,005
2045	0	62,161,813
2046	0	56,020,043
2047	0	50,279,891
2048	0	44,797,242
2049	0	39,459,796
2050	0	34,389,607
2051	0	29,717,276
2052	0	25,632,216
2053	0	21,917,548
2054	0	18,413,502
2055	0	15,304,495
2056	0	12,570,794
2057	0	10,328,440
2058	0	8,473,219
2059	0	6,869,061
2060	0	5,451,504
2061	0	4,228,194
2062	0	3,297,138
2063	0	2,602,875
2064	0	2,039,056
2065	0	1,566,540
2066	0	1,159,161
2067	0	859,007
2068	0	644,115
2069	0	482,879
2070	0	346,579
2071	0	33,832
2072	0	10
2073	0	1

Post-Rate Stabilization

Incurred Year	Prior Rate Filing	Current Rate Filing
1997	0	0
1998	0	0
1999	0	0
2000	0	0
2001	0	0
2002	509	487
2003	0	0
2004	246,733	230,450
2005	361,781	270,443
2006	957,496	841,404
2007	1,825,505	1,961,370
2008	1,555,711	1,971,136
2009	923,204	1,014,654
2010	2,926,027	2,512,545
2011	3,249,633	2,781,122
2012	3,817,849	2,802,095
2013	3,388,906	3,254,050
2014	2,917,199	4,528,856
2015	3,112,619	4,164,454
2016	3,323,950	5,885,831
2017	3,544,129	5,610,042
2018	3,763,508	5,887,126
2019	4,113,880	6,300,504
2020	4,550,712	6,782,673
2021	4,830,845	7,152,787
2022	5,262,384	7,614,643
2023	5,222,167	7,668,847
2024	5,060,996	7,640,858
2025	5,211,414	7,931,323
2026	5,446,866	8,226,214
2027	5,646,297	8,496,843
2028	5,761,676	8,718,550
2029	5,846,473	8,922,529
2030	5,903,283	9,117,262
2031	5,903,446	9,239,273
2032	5,914,143	9,352,692
2033	5,761,517	9,261,913
2034	5,471,252	9,021,111
2035	5,260,146	8,867,375
2036	5,047,046	8,728,528
2037	4,830,066	8,582,757
2038	4,590,856	8,367,506
2039	4,310,198	8,059,283
2040	4,004,005	7,687,547
2041	3,701,341	7,279,913
2042	3,420,868	6,867,720
2043	3,135,001	6,400,211
2044	0	5,850,445
2045	0	5,319,551
2046	0	4,803,492
2047	0	4,320,370
2048	0	3,857,690
2049	0	3,406,072
2050	0	2,974,903
2051	0	2,577,145
2052	0	2,228,942
2053	0	1,912,308
2054	0	1,610,257
2055	0	1,342,267
2056	0	1,106,526
2057	0	911,453
2058	0	749,513
2059	0	609,491
2060	0	485,166
2061	0	377,113
2062	0	294,297
2063	0	232,928
2064	0	182,722
2065	0	140,699
2066	0	104,422
2067	0	77,445
2068	0	58,174
2069	0	43,722
2070	0	31,435
2071	0	3,013
2072	0	0
2073	0	0

Lapse Rates - Actual to Expected Analysis

Duration 8+

Updated Expected

			Attained Age						
			0 - 49	50 - 59	60 - 64	65 - 69	70 - 74	75 - 79	80 - 84
Lifetime BP	Married	Inflation	1.4%	0.7%	0.5%	0.5%	0.5%	0.5%	0.5%
		No Inflation	2.8%	1.2%	0.9%	0.8%	0.8%	0.8%	0.9%
	Single	Inflation	2.9%	1.2%	0.9%	0.8%	0.8%	0.8%	0.9%
		No Inflation	4.6%	2.2%	1.7%	1.4%	1.3%	1.4%	1.5%
on-lifetime BP	Married	Inflation	2.6%	1.0%	0.8%	0.7%	0.7%	0.7%	0.7%
		No Inflation	3.6%	1.7%	1.3%	1.2%	1.1%	1.2%	1.4%
	Single	Inflation	3.6%	1.7%	1.3%	1.1%	1.1%	1.1%	1.2%
		No Inflation	6.4%	3.1%	2.2%	2.0%	1.9%	2.1%	2.4%

Actual

			Attained Age						
			0 - 49	50 - 59	60 - 64	65 - 69	70 - 74	75 - 79	80 - 84
Lifetime BP	Married	Inflation	2.1%	0.9%	0.4%	0.4%	0.5%	0.7%	0.6%
		No Inflation	3.9%	1.1%	0.9%	0.8%	0.9%	0.9%	1.0%
	Single	Inflation	0.5%	1.6%	1.0%	1.1%	0.9%	0.9%	0.9%
		No Inflation	4.0%	2.4%	2.4%	1.7%	1.7%	1.8%	1.7%
on-lifetime BP	Married	Inflation	0.0%	0.9%	0.6%	0.3%	0.4%	0.7%	1.2%
		No Inflation	2.7%	1.3%	0.7%	0.7%	0.8%	1.2%	1.6%
	Single	Inflation	0.0%	1.1%	1.0%	0.5%	0.6%	1.1%	1.8%
		No Inflation	4.7%	2.2%	1.0%	1.2%	1.3%	1.6%	2.6%

A/E: Updated

			Attained Age						
			0 - 49	50 - 59	60 - 64	65 - 69	70 - 74	75 - 79	80 - 84
Lifetime BP	Married	Inflation	147%	126%	75%	83%	101%	142%	122%
		No Inflation	140%	85%	93%	95%	112%	110%	118%
	Single	Inflation	17%	128%	108%	130%	110%	112%	109%
		No Inflation	86%	110%	147%	117%	124%	128%	111%
on-lifetime BP	Married	Inflation	0%	88%	76%	50%	61%	98%	169%
		No Inflation	75%	74%	56%	59%	67%	103%	119%
	Single	Inflation	0%	64%	78%	42%	58%	100%	144%
		No Inflation	73%	72%	43%	62%	66%	78%	109%

Expected 1.3%
 Actual 1.4%
 109%

Lifetime Experience (Nationwide) as of 12/31/2016
Premiums at the Virginia Rate Level
Non-Lifetime Benefit Periods

	Virginia Rate Level	Incurred Claims Discounted to				
Year	Earned Premium	Incurred Year	Loss Ratio			
1997	493,144	0	0.0%			
1998	2,879,303	107,337	3.7%			
1999	5,164,376	620,403	12.0%			
2000	8,538,676	1,279,039	15.0%			
2001	13,296,598	2,429,334	18.3%			
2002	19,842,983	4,609,517	23.2%			
2003	27,120,845	3,660,231	13.5%			
2004	28,222,177	5,980,397	21.2%			
2005	28,236,306	8,695,837	30.8%			
2006	27,254,820	9,349,852	34.3%			
2007	28,749,932	12,025,776	41.8%			
2008	30,977,013	13,772,969	44.5%			
2009	29,532,625	16,512,717	55.9%			
2010	28,088,937	18,692,645	66.5%			
2011	26,659,985	21,417,195	80.3%			
2012	26,462,143	26,255,817	99.2%			
2013	28,959,105	25,690,693	88.7%			
2014	29,852,766	26,114,538	87.5%			
2015	29,503,501	28,307,511	95.9%			
2016	29,463,128	36,422,468	123.6%			
Total	449,298,365	261,944,277	58.3%			
Interest Adjusted	650,666,002	336,060,443	51.6%			
	Earned Premium w/o Increase	Earned Premium w/Increase	Incurred Claims	Loss Ratio w/o Increase	Loss Ratio w/Increase	
	2017	26,711,999	26,711,999	29,856,518	111.8%	111.8%
	2018	24,215,387	24,215,387	30,699,453	126.8%	126.8%
	2019	21,926,611	21,926,611	32,001,258	145.9%	145.9%
	2020	19,789,271	19,789,271	33,227,148	167.9%	167.9%
	2021	17,813,202	17,813,202	34,202,496	192.0%	192.0%
	2022	15,954,526	15,954,526	35,476,223	222.4%	222.4%
	2023	14,234,256	14,234,256	35,037,263	246.1%	246.1%
	2024	12,647,018	12,647,018	34,428,845	272.2%	272.2%
	2025	11,198,187	11,198,187	34,746,040	310.3%	310.3%
	2026	9,879,803	9,879,803	35,078,587	355.1%	355.1%
	2027	8,681,102	8,681,102	35,315,876	406.8%	406.8%
	2028	7,597,938	7,597,938	35,344,198	465.2%	465.2%
	2029	6,623,535	6,623,535	35,230,452	531.9%	531.9%
	2030	5,749,851	5,749,851	34,913,604	607.2%	607.2%
	2031	4,970,555	4,970,555	34,494,474	694.0%	694.0%
	2032	4,276,437	4,276,437	33,988,624	794.8%	794.8%
	2033	3,666,933	3,666,933	32,836,602	895.5%	895.5%
	2034	3,133,566	3,133,566	31,317,413	999.4%	999.4%
	2035	2,666,404	2,666,404	29,970,385	1124.0%	1124.0%
	2036	2,258,021	2,258,021	28,734,897	1272.6%	1272.6%
	2037	1,902,454	1,902,454	27,568,685	1449.1%	1449.1%
	2038	1,594,632	1,594,632	26,265,683	1647.1%	1647.1%
	2039	1,329,479	1,329,479	24,740,351	1860.9%	1860.9%
	2040	1,101,914	1,101,914	23,024,107	2089.5%	2089.5%
	2041	908,617	908,617	21,312,023	2345.5%	2345.5%
	2042	744,666	744,666	19,590,183	2630.7%	2630.7%
	2043	606,881	606,881	17,854,980	2942.1%	2942.1%
	2044	491,589	491,589	16,032,266	3261.3%	3261.3%
	2045	395,396	395,396	14,260,853	3606.7%	3606.7%
	2046	316,581	316,581	12,577,839	3973.0%	3973.0%
	2047	252,249	252,249	11,043,930	4378.2%	4378.2%
	2048	199,747	199,747	9,636,148	4824.2%	4824.2%
	2049	156,880	156,880	8,317,794	5302.0%	5302.0%
	2050	122,112	122,112	7,093,895	5809.3%	5809.3%
	2051	94,538	94,538	6,005,049	6352.0%	6352.0%
	2052	72,963	72,963	5,054,341	6927.3%	6927.3%
	2053	55,962	55,962	4,231,219	7560.9%	7560.9%
	2054	42,470	42,470	3,497,703	8235.8%	8235.8%
	2055	31,726	31,726	2,854,921	8998.8%	8998.8%
	2056	23,488	23,488	2,303,969	9809.3%	9809.3%
	2057	17,400	17,400	1,853,375	10651.3%	10651.3%
	2058	12,861	12,861	1,488,770	11576.1%	11576.1%
	2059	9,390	9,390	1,184,231	12611.3%	12611.3%
	2060	6,690	6,690	930,132	13902.8%	13902.8%
	2061	4,674	4,674	715,410	15306.0%	15306.0%
	2062	3,306	3,306	544,733	16476.6%	16476.6%
2063	2,379	2,379	421,960	17739.8%	17739.8%	
2064	1,698	1,698	326,788	19243.8%	19243.8%	
2065	1,188	1,188	249,540	20998.7%	20998.7%	
2066	808	808	184,403	22815.3%	22815.3%	
2067	561	561	134,871	24044.2%	24044.2%	
2068	377	377	100,223	26603.7%	26603.7%	
2069	151	151	73,907	48812.3%	48812.3%	
2070	11	11	52,770	486640.9%	486640.9%	
2071	0	0	36,080	8445746.6%	8445746.6%	
2072	0	0	4	6177.8%	6177.8%	
2073	0	0	0	0.0%	0.0%	
	Earned Premium w/o Increase	Earned Premium With Increase	Incurred Claims	Loss Ratio w/o Increase	Loss Ratio With Increase	
	Past Experience @ 4.5%	650,666,002	650,666,002	336,060,443	51.6%	51.6%
	Anticipated Experience @ 4.5%	177,341,165	177,341,165	528,615,809	298.1%	298.1%
	Lifetime Experience @ 4.5%	828,007,167	828,007,167	864,676,252	104.4%	104.4%

Lifetime Experience (Nationwide) as of 12/31/2016
Premiums at the Virginia Rate Level
Lifetime Benefit Period

	Virginia Rate Level	Incurred Claims			
Year	Earned Premium	Discounted to Incurred Year	Loss Ratio		
1997	379,977	0	0.0%		
1998	2,595,131	229,543	8.8%		
1999	5,659,399	581,891	10.3%		
2000	11,774,776	1,523,173	12.9%		
2001	20,610,805	4,549,954	22.1%		
2002	30,785,341	5,455,703	17.7%		
2003	41,521,354	9,776,788	23.5%		
2004	42,601,415	13,208,389	31.0%		
2005	42,549,495	16,431,275	38.6%		
2006	41,569,288	15,608,074	37.5%		
2007	44,918,347	23,508,430	52.3%		
2008	49,704,716	32,551,916	65.5%		
2009	48,250,256	30,303,535	62.8%		
2010	46,724,080	45,035,342	96.4%		
2011	43,401,777	48,281,111	111.2%		
2012	37,989,957	48,255,691	127.0%		
2013	41,297,104	50,643,923	122.6%		
2014	48,246,068	43,444,106	90.0%		
2015	46,287,938	48,589,055	105.0%		
2016	40,302,850	52,045,328	129.1%		
Total	687,170,073	490,023,228	71.3%		
Interest Adjusted	992,141,034	635,064,420	64.0%		
	Earned Premium w/o Increase	Earned Premium w/Increase	Incurred Claims	Loss Ratio w/o Increase	Loss Ratio w/Increase
2017	37,307,487	37,307,487	45,583,480	122.2%	122.2%
2018	34,472,336	44,814,037	48,416,357	140.4%	108.0%
2019	31,776,576	47,505,981	52,330,230	164.7%	110.2%
2020	29,182,176	43,627,353	57,157,486	195.9%	131.0%
2021	26,713,586	39,936,812	60,805,597	227.6%	152.3%
2022	24,337,597	36,384,707	65,175,582	267.8%	179.1%
2023	22,115,763	33,063,066	66,384,488	300.2%	200.8%
2024	20,040,052	29,959,877	66,842,050	333.5%	223.1%
2025	18,115,944	27,083,337	69,982,265	386.3%	258.4%
2026	16,330,328	24,413,841	73,151,612	447.9%	299.6%
2027	14,671,961	21,934,582	76,134,102	518.9%	347.1%
2028	13,140,111	19,644,466	78,731,120	599.2%	400.8%
2029	11,725,975	17,530,333	81,166,148	692.2%	463.0%
2030	10,418,700	15,575,957	83,663,740	803.0%	537.1%
2031	9,219,362	13,782,946	85,377,043	926.1%	619.4%
2032	8,113,871	12,130,237	87,024,853	1072.5%	717.4%
2033	7,116,966	10,639,864	86,888,754	1220.9%	816.6%
2034	6,226,326	9,308,358	85,357,980	1370.9%	917.0%
2035	5,423,250	8,107,758	84,566,164	1559.3%	1043.0%
2036	4,699,637	7,025,957	83,841,460	1784.0%	1193.3%
2037	4,051,790	6,057,426	82,955,516	2047.4%	1369.5%
2038	3,476,495	5,197,359	81,308,253	2338.8%	1564.4%
2039	2,968,269	4,437,562	78,665,798	2650.2%	1772.7%
2040	2,519,147	3,766,124	75,422,269	2994.0%	2002.6%
2041	2,126,448	3,179,040	71,728,205	3373.1%	2256.3%
2042	1,782,426	2,664,727	67,967,484	3813.2%	2550.6%
2043	1,485,379	2,220,641	63,556,126	4278.8%	2862.1%
2044	1,234,091	1,844,967	58,308,183	4724.8%	3160.4%
2045	1,018,995	1,523,398	53,220,511	5222.8%	3493.5%
2046	837,082	1,251,437	48,245,696	5763.6%	3855.2%
2047	684,433	1,023,228	43,556,331	6363.9%	4256.8%
2048	556,482	831,940	39,018,784	7011.7%	4690.1%
2049	450,084	672,876	34,548,073	7675.9%	5134.4%
2050	361,324	540,179	30,270,615	8377.7%	5603.8%
2051	288,336	431,063	26,289,372	9117.6%	6098.7%
2052	228,867	342,156	22,806,817	9965.1%	6665.6%
2053	179,940	269,010	19,598,637	10891.8%	7285.5%
2054	140,883	210,620	16,526,056	11730.3%	7846.4%
2055	109,355	163,486	13,791,840	12612.0%	8436.1%
2056	84,219	125,908	11,373,351	13504.4%	9033.1%
2057	64,706	96,735	9,386,518	14506.5%	9703.3%
2058	49,697	74,297	7,733,962	15562.2%	10409.5%
2059	37,740	56,422	6,294,321	16678.0%	11155.9%
2060	28,349	42,382	5,006,538	17660.1%	11812.7%
2061	21,093	31,534	3,889,897	18441.4%	12335.4%
2062	15,769	23,574	3,046,702	19321.0%	12923.8%
2063	11,807	17,652	2,413,843	20444.0%	13674.9%
2064	8,720	13,036	1,894,990	21732.1%	14536.6%
2065	6,335	9,471	1,457,699	23009.6%	15391.1%
2066	4,541	6,788	1,079,181	23767.0%	15897.7%
2067	3,223	4,818	801,582	24874.2%	16638.2%
2068	2,123	3,174	602,066	28358.2%	18968.7%
2069	1,270	1,899	452,694	35635.1%	23836.2%
2070	6	9	325,244	5175726.0%	3462024.1%
2071	0	0	766	711536.4%	475944.1%
2072	0	0	6	14975.5%	10017.1%
2073	0	0	1	0.0%	0.0%
	Earned Premium w/o Increase	Earned Premium With Increase	Incurred Claims	Loss Ratio w/o Increase	Loss Ratio With Increase
Past Experience @ 4.5%	992,141,034	992,141,034	635,064,420	64.0%	64.0%
Anticipated Experience @ 4.5%	275,260,763	387,157,018	1,211,400,072	440.1%	312.9%
Lifetime Experience @ 4.5%	1,267,401,797	1,379,298,052	1,846,464,492	145.7%	133.9%

Lifetime Experience (Nationwide) as of 12/31/2016

Premiums at the Virginia Rate Level
All Benefit Periods

	Virginia Rate Level	Incurred Claims			
Year	Earned Premium	Discounted to Incurred Year	Loss Ratio		
1997	873,120	0	0.0%		
1998	5,474,434	336,880	6.2%		
1999	10,823,775	1,202,294	11.1%		
2000	20,313,452	2,802,212	13.8%		
2001	33,907,403	6,979,288	20.6%		
2002	50,628,324	10,065,220	19.9%		
2003	68,642,198	13,437,019	19.6%		
2004	70,823,592	19,188,786	27.1%		
2005	70,785,801	25,127,112	35.5%		
2006	68,824,108	24,957,926	36.3%		
2007	73,668,279	35,534,206	48.2%		
2008	80,681,729	46,324,886	57.4%		
2009	77,782,881	46,816,251	60.2%		
2010	74,813,018	63,727,987	85.2%		
2011	70,061,763	69,698,305	99.5%		
2012	64,452,100	74,511,509	115.6%		
2013	70,256,209	76,334,616	108.7%		
2014	78,098,835	69,558,645	89.1%		
2015	75,791,439	76,896,565	101.5%		
2016	69,765,978	88,467,797	126.8%		
Total	1,136,468,438	751,967,505	66.2%		
Interest Adjusted	1,642,807,036	971,124,863	59.1%		
	Earned Premium w/o Increase	Earned Premium w/Increase	Incurred Claims w/o Increase	Loss Ratio w/o Increase	Loss Ratio w/Increase
2017	64,019,486	64,019,486	75,439,998	117.8%	117.8%
2018	58,687,723	69,029,424	79,115,810	134.8%	114.6%
2019	53,703,187	69,432,592	84,331,488	157.0%	121.5%
2020	48,971,447	63,416,624	90,384,634	184.6%	142.5%
2021	44,526,789	57,750,014	95,008,093	213.4%	164.5%
2022	40,292,122	52,339,233	100,651,805	249.8%	192.3%
2023	36,350,019	47,297,322	101,421,751	279.0%	214.4%
2024	32,687,069	42,606,895	101,270,896	309.8%	237.7%
2025	29,314,131	38,281,524	104,728,305	357.3%	273.6%
2026	26,210,131	34,293,644	108,230,199	412.9%	315.6%
2027	23,353,063	30,615,684	111,449,978	477.2%	364.0%
2028	20,738,049	27,242,404	114,075,318	550.1%	418.7%
2029	18,349,510	24,153,867	116,396,600	634.3%	481.9%
2030	16,168,551	21,325,808	118,577,343	733.4%	556.0%
2031	14,189,917	18,753,501	119,871,518	844.8%	639.2%
2032	12,390,308	16,406,674	121,013,477	976.7%	737.6%
2033	10,783,899	14,306,797	119,725,356	1110.2%	836.8%
2034	9,359,892	12,441,923	116,675,392	1246.5%	937.8%
2035	8,089,653	10,774,162	114,536,548	1415.8%	1063.1%
2036	6,957,658	9,283,978	112,576,356	1618.0%	1212.6%
2037	5,954,244	7,959,880	110,524,201	1856.2%	1388.5%
2038	5,071,126	6,791,991	107,573,936	2121.3%	1583.8%
2039	4,297,748	5,767,042	103,406,149	2406.1%	1793.1%
2040	3,621,061	4,868,039	98,446,376	2718.7%	2022.3%
2041	3,035,065	4,087,657	93,040,228	3065.5%	2276.1%
2042	2,527,092	3,409,393	87,557,667	3464.8%	2568.1%
2043	2,092,260	2,827,522	81,411,105	3891.1%	2879.2%
2044	1,725,680	2,336,555	74,340,450	4307.9%	3181.6%
2045	1,414,391	1,918,794	67,481,363	4771.1%	3516.9%
2046	1,153,663	1,568,018	60,823,536	5272.2%	3879.0%
2047	936,682	1,275,477	54,600,261	5829.1%	4280.8%
2048	756,229	1,031,688	48,654,932	6433.9%	4716.1%
2049	606,964	829,756	42,865,867	7062.3%	5166.1%
2050	483,436	662,292	37,364,510	7728.9%	5641.7%
2051	382,875	525,601	32,294,421	8434.7%	6144.3%
2052	301,830	415,119	27,861,158	9230.7%	6711.6%
2053	235,902	324,972	23,829,857	10101.6%	7332.9%
2054	183,353	253,090	20,023,759	10920.9%	7911.7%
2055	141,081	195,211	16,646,762	11799.5%	8527.6%
2056	107,707	149,396	13,677,320	12698.6%	9155.1%
2057	82,106	114,136	11,239,893	13689.4%	9847.8%
2058	62,558	87,158	9,222,732	14742.7%	10581.6%
2059	47,130	65,812	7,478,552	15867.8%	11363.5%
2060	35,040	49,073	5,936,670	16942.7%	12097.7%
2061	25,767	36,208	4,605,307	17872.7%	12718.9%
2062	19,075	26,880	3,591,435	18828.0%	13360.7%
2063	14,186	20,030	2,835,803	19990.5%	14157.6%
2064	10,418	14,734	2,221,778	21326.5%	15079.1%
2065	7,524	10,659	1,707,239	22692.0%	16016.2%
2066	5,349	7,597	1,263,583	23623.2%	16633.7%
2067	3,783	5,379	936,453	24751.1%	17410.6%
2068	2,500	3,551	702,289	28093.8%	19778.8%
2069	1,422	2,051	526,602	37038.4%	25680.4%
2070	17	20	378,014	2207024.5%	1867809.6%
2071	1	1	36,845	6889447.2%	6265382.0%
2072	0	0	10	9826.1%	8152.6%
2073	0	0	1	0.0%	0.0%
	Earned Premium w/o Increase	Earned Premium With Increase	Incurred Claims	Loss Ratio w/o Increase	Loss Ratio With Increase
Past Experience @ 4.5%	1,642,807,036	1,642,807,036	971,124,863	59.1%	59.1%
Anticipated Experience @ 4.5%	452,601,928	564,498,183	1,740,015,881	384.4%	308.2%
Lifetime Experience @ 4.5%	2,095,408,964	2,207,305,219	2,711,140,743	129.4%	122.8%

Lifetime Experience (Nationwide) as of 12/31/2016
Premiums at the Virginia Rate Level
Non-Lifetime Benefit Periods - Pre-Rate Stabilization

	Virginia Rate Level	Incurred Claims Discounted to			Active Life	
Year	Earned Premium	Incurred Year	Loss Ratio	Reserve		
1997	493,144	0	0.0%	0		
1998	2,879,303	107,337	3.7%	0		
1999	5,164,376	620,403	12.0%	1,831,222		
2000	8,538,676	1,279,039	15.0%	3,843,486		
2001	13,291,034	2,429,334	18.3%	7,598,575		
2002	19,718,256	4,609,517	23.4%	13,700,815		
2003	26,161,646	3,660,231	14.0%	25,195,653		
2004	26,346,243	5,771,160	21.9%	39,483,354		
2005	26,128,236	8,629,972	33.0%	55,637,284		
2006	25,202,065	8,814,082	35.0%	71,903,925		
2007	26,556,561	11,678,078	44.0%	87,603,254		
2008	28,547,868	13,342,930	46.7%	102,666,313		
2009	27,170,713	15,858,480	58.4%	116,675,375		
2010	25,819,457	17,408,466	67.4%	130,095,319		
2011	24,490,069	20,794,851	84.9%	150,005,868		
2012	24,453,662	25,050,446	102.4%	173,955,110		
2013	26,798,097	24,236,077	90.4%	191,906,162		
2014	27,611,723	24,831,729	89.9%	205,507,391		
2015	27,318,093	27,001,863	98.8%	232,449,244		
2016	27,148,364	34,148,099	125.8%	255,371,182		
Total	419,837,584	250,272,094	59.6%			
Interest Adjusted	610,566,290	321,853,927	52.7%			
	Earned Premium	Earned Premium	Loss Ratio	Loss Ratio		
	w/o Increase	w/Increase	Incurred Claims	w/o Increase		
			w/Increase			
	2017	24,608,891	24,608,891	27,636,882	112.3%	112.3%
	2018	22,304,600	22,304,600	28,416,518	127.4%	127.4%
	2019	20,192,418	20,192,418	29,611,006	146.6%	146.6%
	2020	18,220,232	18,220,232	30,735,018	168.7%	168.7%
	2021	16,397,100	16,397,100	31,622,766	192.9%	192.9%
	2022	14,682,828	14,682,828	32,784,022	223.3%	223.3%
	2023	13,096,433	13,096,433	32,382,296	247.3%	247.3%
	2024	11,633,024	11,633,024	31,821,503	273.5%	273.5%
	2025	10,297,614	10,297,614	32,100,913	311.7%	311.7%
	2026	9,082,829	9,082,829	32,393,466	356.6%	356.6%
	2027	7,978,650	7,978,650	32,599,205	408.6%	408.6%
	2028	6,981,193	6,981,193	32,613,782	467.2%	467.2%
	2029	6,084,175	6,084,175	32,495,597	534.1%	534.1%
	2030	5,280,137	5,280,137	32,191,361	609.7%	609.7%
	2031	4,563,230	4,563,230	31,791,974	696.7%	696.7%
	2032	3,924,942	3,924,942	31,314,292	797.8%	797.8%
	2033	3,364,633	3,364,633	30,248,034	899.0%	899.0%
	2034	2,874,456	2,874,456	28,846,686	1003.6%	1003.6%
	2035	2,445,247	2,445,247	27,601,218	1128.8%	1128.8%
	2036	2,070,165	2,070,165	26,458,888	1278.1%	1278.1%
	2037	1,743,703	1,743,703	25,380,908	1455.6%	1455.6%
	2038	1,461,171	1,461,171	24,177,026	1654.6%	1654.6%
	2039	1,217,867	1,217,867	22,768,954	1869.6%	1869.6%
	2040	1,009,103	1,009,103	21,186,398	2099.5%	2099.5%
	2041	831,844	831,844	19,606,995	2357.1%	2357.1%
	2042	681,564	681,564	18,018,887	2643.8%	2643.8%
	2043	555,308	555,308	16,419,637	2956.9%	2956.9%
	2044	449,688	449,688	14,741,503	3278.2%	3278.2%
	2045	361,580	361,580	13,110,603	3625.9%	3625.9%
	2046	289,416	289,416	11,561,286	3994.7%	3994.7%
	2047	230,535	230,535	10,149,439	4402.6%	4402.6%
2048	182,496	182,496	8,853,963	4851.6%	4851.6%	
2049	143,283	143,283	7,641,022	5332.8%	5332.8%	
2050	111,489	111,489	6,515,510	5844.1%	5844.1%	
2051	86,279	86,279	5,514,288	6391.2%	6391.2%	
2052	66,559	66,559	4,640,354	6971.8%	6971.8%	
2053	51,023	51,023	3,883,863	7612.0%	7612.0%	
2054	38,698	38,698	3,209,977	8295.0%	8295.0%	
2055	28,892	28,892	2,619,423	9066.3%	9066.3%	
2056	21,376	21,376	2,113,521	9887.2%	9887.2%	
2057	15,823	15,823	1,699,948	10743.4%	10743.4%	
2058	11,684	11,684	1,365,341	11685.6%	11685.6%	
2059	8,522	8,522	1,085,897	12741.6%	12741.6%	
2060	6,066	6,066	852,813	14059.9%	14059.9%	
2061	4,233	4,233	655,912	15495.6%	15495.6%	
2062	2,990	2,990	499,460	16705.3%	16705.3%	
2063	2,148	2,148	386,898	18010.2%	18010.2%	
2064	1,532	1,532	299,650	19561.4%	19561.4%	
2065	1,071	1,071	228,822	21356.9%	21356.9%	
2066	728	728	169,082	23211.7%	23211.7%	
2067	505	505	123,691	24479.6%	24479.6%	
2068	339	339	91,921	27097.8%	27097.8%	
2069	137	137	67,772	49644.0%	49644.0%	
2070	10	10	48,386	491238.8%	491238.8%	
2071	0	0	33,070	7810123.4%	7810123.4%	
2072	0	0	4	6232.7%	6232.7%	
2073	0	0	0	0.0%	0.0%	
	Earned Premium	Earned Premium	Loss Ratio	Loss Ratio		
	w/o Increase	With Increase	Incurred Claims	w/o Increase		
				With Increase		
	Past Experience @ 4.5%	610,566,290	610,566,290	321,853,927	52.7%	52.7%
Anticipated Experience @ 4.5%	163,182,624	163,182,624	487,884,646	299.0%	299.0%	
Lifetime Experience @ 4.5%	773,748,913	773,748,913	809,738,573	104.7%	104.7%	

Lifetime Experience (Nationwide) as of 12/31/2016
Premiums at the Virginia Rate Level
Lifetime Benefit Period - Pre-Rate Stabilization

	Virginia Rate Level	Incurred Claims Discounted to			Active Life
Year	Earned Premium	Incurred Year	Loss Ratio	Reserve	
1997	379,977	0	0.0%	0	
1998	2,595,131	229,543	8.8%	0	
1999	5,659,399	581,891	10.3%	1,865,441	
2000	11,774,776	1,523,173	12.9%	4,319,192	
2001	20,596,912	4,549,954	22.1%	10,324,449	
2002	30,490,543	5,455,216	17.9%	21,593,484	
2003	39,924,279	9,776,788	24.5%	42,950,845	
2004	40,127,736	13,187,176	32.9%	69,222,450	
2005	39,955,932	16,226,697	40.6%	100,094,678	
2006	39,035,372	15,302,440	39.2%	132,428,137	
2007	42,117,903	21,894,757	52.0%	164,791,834	
2008	46,531,336	31,010,819	66.6%	197,161,849	
2009	45,138,622	29,943,118	66.3%	229,309,136	
2010	43,662,093	43,806,976	100.3%	261,101,278	
2011	40,391,808	46,122,333	114.2%	280,919,947	
2012	35,250,708	46,658,968	132.4%	294,255,732	
2013	38,283,642	48,844,490	127.6%	312,212,971	
2014	44,695,854	40,198,060	89.9%	338,055,745	
2015	42,689,915	45,730,248	107.1%	346,146,460	
2016	37,209,476	48,433,867	130.2%	355,332,664	
Total	646,511,416	469,476,515	72.6%		
Interest Adjusted	937,117,727	610,208,562	65.1%		
	Earned Premium w/o Increase	Earned Premium w/Increase	Incurred Claims	Loss Ratio w/o Increase	Loss Ratio w/Increase
2017	34,439,921	34,439,921	42,193,074	122.5%	122.5%
2018	31,818,616	41,364,201	44,812,166	140.8%	108.3%
2019	29,326,376	43,842,932	48,419,978	165.1%	110.4%
2020	26,927,980	40,257,330	52,866,944	196.3%	131.3%
2021	24,646,112	36,845,937	56,232,539	228.2%	152.6%
2022	22,450,152	33,562,977	60,253,140	268.4%	179.5%
2023	20,396,862	30,493,309	61,370,608	300.9%	201.3%
2024	18,478,722	27,625,689	61,808,534	334.5%	223.7%
2025	16,701,047	24,968,065	64,696,069	387.4%	259.1%
2026	15,051,620	22,502,173	67,610,519	449.2%	300.5%
2027	13,519,982	20,212,372	70,353,930	520.4%	348.1%
2028	12,105,426	18,097,612	72,742,987	600.9%	401.9%
2029	10,799,892	16,145,838	74,978,474	694.3%	464.4%
2030	9,593,278	14,341,951	77,268,721	805.4%	538.8%
2031	8,486,579	12,687,436	78,840,270	929.0%	621.4%
2032	7,466,748	11,162,789	80,346,493	1076.1%	719.8%
2033	6,547,344	9,788,279	80,215,409	1225.2%	819.5%
2034	5,726,083	8,560,494	78,807,595	1376.3%	920.6%
2035	4,985,822	7,453,804	78,067,955	1565.8%	1047.4%
2036	4,318,998	6,456,903	77,388,940	1791.8%	1198.5%
2037	3,722,180	5,564,659	76,560,536	2056.9%	1375.8%
2038	3,192,356	4,772,572	75,029,404	2350.3%	1572.1%
2039	2,724,507	4,073,138	72,577,912	2663.9%	1781.9%
2040	2,311,252	3,455,321	69,572,431	3010.2%	2013.5%
2041	1,950,074	2,915,360	66,153,320	3392.3%	2269.1%
2042	1,633,809	2,442,545	62,671,060	3835.9%	2565.8%
2043	1,360,856	2,034,479	58,591,257	4305.5%	2879.9%
2044	1,130,052	1,689,428	53,748,501	4756.3%	3181.5%
2045	932,620	1,394,267	49,051,209	5259.5%	3518.1%
2046	765,718	1,144,748	44,458,757	5806.2%	3883.7%
2047	625,733	935,471	40,130,452	6413.3%	4289.9%
2048	508,453	760,137	35,943,278	7069.1%	4728.5%
2049	410,984	614,421	31,818,773	7742.1%	5178.7%
2050	329,729	492,945	27,874,097	8453.6%	5654.6%
2051	262,955	393,118	24,202,988	9204.2%	6156.7%
2052	208,579	311,825	20,991,863	10064.2%	6731.9%
2053	163,872	244,989	18,033,685	11004.7%	7361.0%
2054	128,209	191,673	15,203,525	11858.4%	7932.0%
2055	99,452	148,681	12,685,072	12754.9%	8531.7%
2056	76,546	114,436	10,457,274	13661.5%	9138.1%
2057	58,773	87,865	8,628,492	14681.1%	9820.1%
2058	45,116	67,448	7,107,878	15754.7%	10538.3%
2059	34,238	51,186	5,783,164	16891.0%	11298.3%
2060	25,708	38,434	4,598,691	17887.9%	11965.2%
2061	19,121	28,585	3,572,283	18682.9%	12497.0%
2062	14,287	21,360	2,797,678	19581.5%	13098.0%
2063	10,696	15,991	2,215,977	20716.8%	13857.4%
2064	7,896	11,805	1,739,406	22027.6%	14734.2%
2065	5,736	8,575	1,337,719	23323.0%	15600.7%
2066	4,111	6,145	990,079	24085.8%	16110.9%
2067	2,917	4,361	735,316	25205.7%	16860.0%
2068	1,922	2,874	552,194	28727.1%	19215.5%
2069	1,151	1,720	415,108	36078.4%	24132.7%
2070	6	9	298,193	4881698.3%	3265350.1%
2071	0	0	761	724485.2%	484605.5%
2072	0	0	6	15332.9%	10256.1%
2073	0	0	1	0.0%	0.0%
	Earned Premium w/o Increase	Earned Premium With Increase	Incurred Claims	Loss Ratio w/o Increase	Loss Ratio With Increase
Past Experience @ 4.5%	937,117,727	937,117,727	610,208,562	65.1%	65.1%
Anticipated Experience @ 4.5%	253,825,795	356,984,699	1,118,906,233	440.8%	313.4%
Lifetime Experience @ 4.5%	1,190,943,521	1,294,102,426	1,729,114,794	145.2%	133.6%

Lifetime Experience (Nationwide) as of 12/31/2016

Premiums at the Virginia Rate Level
All Benefit Periods - Pre-Rate Stabilization

	Virginia Rate Level	Incurred Claims			Active Life
Year	Earned Premium	Discounted to Incurred Year	Loss Ratio		Reserve
1997	873,120	0	0.0%		0
1998	5,474,434	336,880	6.2%		0
1999	10,823,775	1,202,294	11.1%		3,696,663
2000	20,313,452	2,802,212	13.8%		8,162,678
2001	33,887,945	6,979,288	20.6%		17,923,024
2002	50,208,799	10,064,733	20.0%		35,294,299
2003	66,085,925	13,437,019	20.3%		68,146,498
2004	66,473,979	18,958,336	28.5%		108,705,805
2005	66,084,168	24,856,669	37.6%		155,731,962
2006	64,237,437	24,116,522	37.5%		204,332,062
2007	68,674,464	33,572,835	48.9%		252,395,088
2008	75,079,205	44,353,749	59.1%		299,828,162
2009	72,309,335	45,801,598	63.3%		345,984,511
2010	69,481,550	61,215,442	88.1%		391,196,597
2011	64,881,877	66,917,183	103.1%		430,925,815
2012	59,704,370	71,709,414	120.1%		468,210,842
2013	65,081,739	73,080,567	112.3%		504,119,133
2014	72,307,577	65,029,789	89.9%		543,563,136
2015	70,008,008	72,732,111	103.9%		578,595,704
2016	64,357,840	82,581,966	128.3%		610,703,846
Total	1,066,349,000	719,748,608	67.5%		
Interest Adjusted	1,547,684,016	932,062,488	60.2%		
	Earned Premium w/o Increase	Earned Premium w/Increase	Incurred Claims	Loss Ratio w/o Increase	Loss Ratio w/Increase
2017	59,048,812	59,048,812	69,829,956	118.3%	118.3%
2018	54,123,216	63,668,801	73,228,684	135.3%	115.0%
2019	49,518,794	64,035,350	78,030,984	157.6%	121.9%
2020	45,148,212	58,477,562	83,601,961	185.2%	143.0%
2021	41,043,211	53,243,036	87,855,305	214.1%	165.0%
2022	37,132,979	48,245,804	93,037,162	250.6%	192.8%
2023	33,493,295	43,589,742	93,752,904	279.9%	215.1%
2024	30,111,746	39,258,713	93,630,038	310.9%	238.5%
2025	26,998,661	35,265,679	96,796,982	358.5%	274.5%
2026	24,134,450	31,585,002	100,003,985	414.4%	316.6%
2027	21,498,632	28,191,022	102,953,135	478.9%	365.2%
2028	19,086,620	25,078,806	105,356,769	552.0%	420.1%
2029	16,884,067	22,230,013	107,474,071	636.5%	483.5%
2030	14,873,416	19,622,088	109,460,081	735.9%	557.8%
2031	13,049,809	17,250,665	110,632,245	847.8%	641.3%
2032	11,391,690	15,087,731	111,660,785	980.2%	740.1%
2033	9,911,976	13,152,912	110,463,443	1114.4%	839.8%
2034	8,600,538	11,434,949	107,654,281	1251.7%	941.4%
2035	7,431,069	9,899,051	105,669,173	1422.0%	1067.5%
2036	6,389,164	8,527,068	103,847,828	1625.4%	1217.9%
2037	5,465,883	7,308,362	101,941,444	1865.0%	1394.9%
2038	4,653,526	6,233,742	99,206,430	2131.9%	1591.4%
2039	3,942,374	5,291,005	95,346,866	2418.5%	1802.1%
2040	3,320,355	4,464,424	90,758,829	2733.4%	2032.9%
2041	2,781,917	3,747,204	85,760,315	3082.8%	2288.6%
2042	2,315,373	3,124,109	80,689,947	3485.0%	2582.8%
2043	1,916,164	2,589,788	75,010,894	3914.6%	2896.4%
2044	1,579,740	2,139,116	68,490,005	4335.5%	3201.8%
2045	1,294,201	1,755,848	62,161,813	4803.1%	3540.3%
2046	1,055,134	1,434,164	56,020,043	5309.3%	3906.1%
2047	856,268	1,166,006	50,279,891	5872.0%	4312.1%
2048	690,949	942,633	44,797,242	6483.4%	4752.4%
2049	554,267	757,704	39,459,796	7119.3%	5207.8%
2050	441,218	604,434	34,389,607	7794.3%	5689.6%
2051	349,235	479,398	29,717,276	8509.3%	6198.9%
2052	275,138	378,384	25,632,216	9316.1%	6774.1%
2053	214,895	296,012	21,917,548	10199.2%	7404.3%
2054	166,907	230,371	18,413,502	11032.2%	7993.0%
2055	128,344	177,573	15,304,495	11924.5%	8618.7%
2056	97,922	135,812	12,570,794	12837.6%	9256.0%
2057	74,596	103,688	10,328,440	13845.8%	9961.0%
2058	56,800	79,132	8,473,219	14917.7%	10707.7%
2059	42,761	59,709	6,869,061	16064.0%	11504.3%
2060	31,774	44,499	5,451,504	17157.2%	12250.7%
2061	23,353	32,818	4,228,194	18105.2%	12883.7%
2062	17,277	24,349	3,297,138	19083.8%	13540.9%
2063	12,845	18,139	2,602,875	20264.2%	14349.2%
2064	9,428	13,337	2,039,056	21626.9%	15288.6%
2065	6,807	9,646	1,566,540	23013.6%	16240.0%
2066	4,839	6,874	1,159,161	23954.2%	16863.4%
2067	3,423	4,867	859,007	25098.5%	17651.1%
2068	2,261	3,213	644,115	28482.7%	20047.7%
2069	1,287	1,857	482,879	37517.2%	26008.5%
2070	16	19	346,579	2171790.5%	1825842.7%
2071	1	1	33,832	6401040.7%	5827402.9%
2072	0	0	10	9974.0%	8287.4%
2073	0	0	1	0.0%	0.0%
	Earned Premium w/o Increase	Earned Premium With Increase	Incurred Claims	Loss Ratio w/o Increase	Loss Ratio With Increase
Past Experience @ 4.5%	1,547,684,016	1,547,684,016	932,062,488	60.2%	60.2%
Anticipated Experience @ 4.5%	417,008,418	520,167,323	1,606,790,879	385.3%	308.9%
Lifetime Experience @ 4.5%	1,964,692,434	2,067,851,339	2,538,853,367	129.2%	122.8%

Lifetime Experience (Nationwide) as of 12/31/2016

Non-Lifetime Benefit Periods - Post-Stabilization Experience

Year	Non-Interest Adjusted			Interest Adjusted		
	Original Premium	VA Rate Level Increased Premium	Incurred Claims	Original Premium	VA Rate Level Increased Premium	Incurred Claims
1997	0	0	0	0	0	0
1998	0	0	0	0	0	0
1999	0	0	0	0	0	0
2000	0	0	0	0	0	0
2001	5,564	0	0	11,008	0	0
2002	124,727	0	0	236,128	0	0
2003	959,199	0	0	1,737,716	0	0
2004	1,875,935	0	209,237	3,252,156	0	362,737
2005	2,108,071	0	65,865	3,497,216	0	109,268
2006	2,052,755	0	535,770	3,258,804	0	850,549
2007	1,956,742	236,629	347,698	2,972,613	359,478	528,210
2008	1,883,058	546,087	430,039	2,737,487	793,871	625,167
2009	1,830,940	530,972	654,237	2,547,101	738,659	910,138
2010	1,759,287	510,193	1,284,179	2,342,031	679,189	1,709,548
2011	1,682,106	487,811	622,344	2,142,855	621,428	792,812
2012	1,556,962	451,519	1,205,371	1,898,022	550,427	1,469,414
2013	1,478,031	682,977	1,454,616	1,724,211	796,734	1,696,897
2014	1,409,166	831,877	1,282,810	1,573,087	928,646	1,432,033
2015	1,356,160	829,248	1,305,648	1,448,723	885,848	1,394,763
2016	1,436,432	878,332	2,274,370	1,468,396	897,877	2,324,980
Total	23,475,134	5,985,646	11,672,183	32,847,556	7,252,157	14,206,516
2017	1,305,440	798,235	2,441,599	1,277,023	780,859	2,388,451
2018	1,186,394	725,442	2,511,229	1,110,592	679,092	2,350,779
2019	1,077,061	658,588	2,629,277	964,827	589,961	2,355,297
2020	974,791	596,053	2,741,343	835,612	510,950	2,349,938
2021	880,068	538,133	2,837,703	721,926	441,435	2,327,789
2022	790,584	483,417	2,961,422	620,595	379,474	2,324,667
2023	707,608	432,680	2,920,464	531,541	325,020	2,193,795
2024	630,833	385,734	2,868,076	453,464	277,279	2,061,667
2025	560,482	342,717	2,909,640	385,543	235,747	2,001,478
2026	496,192	303,405	2,953,633	326,621	199,719	1,944,249
2027	437,508	267,522	2,988,338	275,591	168,515	1,882,386
2028	384,275	234,972	3,003,458	231,636	141,638	1,810,440
2029	336,189	205,569	3,008,340	193,923	118,578	1,735,295
2030	292,891	179,093	2,994,467	161,672	98,857	1,652,912
2031	254,084	155,364	2,972,750	134,212	82,066	1,570,262
2032	219,337	134,118	2,941,765	110,869	67,793	1,486,981
2033	188,707	115,388	2,847,425	91,279	55,814	1,377,315
2034	161,804	98,938	2,717,799	74,895	45,796	1,258,005
2035	138,154	84,477	2,606,083	61,194	37,418	1,154,348
2036	117,394	71,782	2,503,609	49,760	30,426	1,061,204
2037	99,240	60,682	2,406,554	40,254	24,614	976,139
2038	83,460	51,033	2,297,523	32,395	19,809	891,784
2039	69,823	42,694	2,168,537	25,935	15,858	805,472
2040	58,083	35,516	2,021,480	20,645	12,624	718,516
2041	48,064	29,390	1,875,531	16,348	9,996	637,933
2042	39,518	24,164	1,728,426	12,863	7,865	562,581
2043	32,309	19,756	1,578,877	10,063	6,153	491,775
2044	26,259	16,056	1,419,839	7,827	4,786	423,196
2045	21,200	12,963	1,265,274	6,047	3,697	360,886
2046	17,037	10,418	1,118,209	4,650	2,843	305,206
2047	13,623	8,330	983,940	3,558	2,176	256,993
2048	10,828	6,621	860,403	2,706	1,655	215,050
2049	8,537	5,220	744,448	2,042	1,249	178,055
2050	6,673	4,081	636,224	1,527	934	145,618
2051	5,190	3,174	539,837	1,137	695	118,236
2052	4,027	2,462	455,386	844	516	95,445
2053	3,108	1,900	382,092	623	381	76,634
2054	2,375	1,452	316,499	456	279	60,745
2055	1,785	1,092	259,048	328	200	47,578
2056	1,331	814	209,494	234	143	36,819
2057	995	609	168,770	167	102	28,385
2058	743	454	135,772	120	73	21,852
2059	549	335	108,167	85	52	16,659
2060	395	242	85,051	58	36	12,535
2061	280	171	65,449	39	24	9,230
2062	201	123	49,800	27	17	6,721
2063	146	90	38,568	19	12	4,981
2064	106	65	29,851	13	8	3,689
2065	74	46	22,790	9	5	2,695
2066	51	31	16,852	6	4	1,907
2067	35	22	12,297	4	2	1,332
2068	24	15	9,132	2	2	946
2069	9	6	6,749	1	1	669
2070	1	0	4,822	0	0	458
2071	0	0	3,310	0	0	301
2072	0	0	0	0	0	0
2073	0	0	0	0	0	0
Total	11,695,876	7,151,654	80,383,421	8,803,807	5,383,247	44,804,279
Grand Total	35,171,011	13,137,300	92,055,604	41,651,363	12,635,403	59,010,795

Minimum Required Loss Ratios	67.8%	85%
Minimum PV Incurred Claims	28,239,624	10,740,093
Dual Loss Ratio Test Met	59,010,795	>
		38,979,717

Lifetime Experience (Nationwide) as of 12/31/2016

Lifetime Benefit Period - Post-Stabilization Experience

Year	Non-Interest Adjusted			Interest Adjusted		
	Original Premium	VA Rate Level Increased Premium	Incurred Claims	Original Premium	VA Rate Level Increased Premium	Incurred Claims
1997	0	0	0	0	0	0
1998	0	0	0	0	0	0
1999	0	0	0	0	0	0
2000	0	0	0	0	0	0
2001	13,893	0	0	27,486	0	0
2002	294,797	0	487	558,097	0	922
2003	1,597,074	0	0	2,893,311	0	0
2004	2,473,678	0	21,213	4,288,415	0	36,775
2005	2,593,563	0	204,578	4,302,631	0	339,388
2006	2,533,916	0	305,634	4,022,659	0	485,202
2007	2,498,322	302,122	1,613,672	3,795,362	458,973	2,451,434
2008	2,459,984	713,395	1,541,097	3,576,191	1,037,095	2,240,364
2009	2,412,119	699,515	360,417	3,355,606	973,126	501,391
2010	2,373,634	688,354	1,228,367	3,159,873	916,363	1,635,249
2011	2,333,309	676,660	2,158,778	2,972,432	862,005	2,750,094
2012	2,123,449	615,800	1,596,723	2,588,601	750,694	1,946,494
2013	1,946,519	1,066,943	1,799,433	2,270,731	1,244,653	2,099,147
2014	1,867,834	1,682,380	3,246,046	2,085,110	1,878,083	3,623,643
2015	1,787,926	1,810,096	2,858,807	1,909,959	1,933,642	3,053,931
2016	1,537,157	1,556,217	3,611,461	1,571,362	1,590,847	3,691,825
Total	30,847,174	9,811,483	20,546,713	43,377,825	11,645,482	24,855,858
2017	1,425,836	1,443,516	3,729,446	1,394,798	1,412,094	3,648,264
2018	1,320,387	2,133,904	3,964,610	1,236,024	1,997,562	3,711,299
2019	1,219,989	2,450,393	4,301,277	1,092,861	2,195,053	3,853,068
2020	1,123,267	2,256,125	4,719,597	962,889	1,933,999	4,045,739
2021	1,031,078	2,070,960	5,030,363	845,801	1,698,824	4,126,445
2022	942,124	1,892,292	5,414,685	739,552	1,485,418	4,250,438
2023	858,802	1,724,936	5,515,268	645,115	1,295,738	4,142,960
2024	780,881	1,568,428	5,536,868	561,323	1,127,438	3,980,082
2025	708,386	1,422,821	5,814,815	487,284	978,728	3,999,885
2026	640,898	1,287,268	6,095,202	421,875	847,353	4,012,207
2027	578,045	1,161,025	6,358,189	364,117	731,342	4,005,091
2028	519,820	1,044,077	6,586,947	313,340	629,354	3,970,515
2029	465,840	935,657	6,806,441	268,709	539,713	3,926,146
2030	415,749	835,048	7,034,521	229,489	460,937	3,882,975
2031	369,588	742,332	7,190,450	195,223	392,114	3,798,131
2032	326,846	656,483	7,346,195	165,212	331,834	3,713,299
2033	288,121	578,702	7,340,680	139,366	279,922	3,550,729
2034	253,425	509,013	7,205,423	117,304	235,610	3,335,219
2035	221,955	445,806	7,148,030	98,314	197,467	3,166,176
2036	193,465	388,582	7,097,772	82,004	164,708	3,008,530
2037	167,825	337,084	7,034,479	68,073	136,727	2,853,303
2038	144,945	291,127	6,906,734	56,260	113,001	2,680,850
2039	124,584	250,232	6,696,674	46,275	92,945	2,487,383
2040	106,459	213,826	6,434,822	37,840	76,002	2,287,198
2041	90,496	181,766	6,132,373	30,781	61,825	2,085,833
2042	76,410	153,473	5,826,066	24,871	49,953	1,896,313
2043	64,157	128,861	5,461,355	19,983	40,137	1,701,056
2044	53,719	107,896	5,015,651	16,011	32,159	1,494,959
2045	44,691	89,763	4,586,231	12,747	25,603	1,308,102
2046	37,004	74,324	4,165,633	10,100	20,286	1,136,974
2047	30,506	61,273	3,768,467	7,968	16,004	984,278
2048	25,019	50,251	3,383,056	6,253	12,560	845,563
2049	20,417	41,008	3,002,230	4,883	9,808	718,066
2050	16,537	33,216	2,636,170	3,785	7,602	603,362
2051	13,317	26,747	2,295,023	2,917	5,858	502,661
2052	10,672	21,435	1,996,450	2,237	4,492	418,437
2053	8,473	17,019	1,721,447	1,699	3,413	345,262
2054	6,701	13,459	1,454,784	1,286	2,583	279,214
2055	5,248	10,540	1,217,445	964	1,936	223,600
2056	4,076	8,186	1,007,685	716	1,439	177,105
2057	3,158	6,342	833,829	531	1,067	140,238
2058	2,443	4,906	688,692	393	790	110,841
2059	1,871	3,759	562,273	288	579	86,597
2060	1,413	2,839	448,632	208	418	66,120
2061	1,057	2,123	349,375	149	299	49,274
2062	795	1,597	273,927	107	215	36,969
2063	596	1,197	217,653	77	155	28,110
2064	442	889	171,143	55	110	21,151
2065	322	648	131,979	38	77	15,609
2066	231	465	98,012	26	53	11,092
2067	164	330	72,892	18	36	7,894
2068	108	217	54,860	11	22	5,685
2069	64	129	41,345	6	13	4,100
2070	0	0	29,756	0	0	2,824
2071	0	0	5	0	0	0
2072	0	0	0	0	0	0
2073	0	0	0	0	0	0
Total	14,748,423	27,684,295	204,953,929	10,718,156	19,653,375	101,743,223
Grand Total	45,595,597	37,495,778	225,500,642	54,095,981	31,298,857	126,599,081

Minimum Required Loss Ratios	67.5%	85%
Minimum PV Incurred Claims	36,514,787	26,604,028
Dual Loss Ratio Test Met	126,599,081	>
		63,118,816

Lifetime Experience (Nationwide) as of 12/31/2016

All Benefit Periods Combined - Post-Stabilization Experience

Year	Non-Interest Adjusted			Interest Adjusted		
	Original Premium	VA Rate Level Increased Premium	Incurred Claims	Original Premium	VA Rate Level Increased Premium	Incurred Claims
1997	0	0	0	0	0	0
1998	0	0	0	0	0	0
1999	0	0	0	0	0	0
2000	0	0	0	0	0	0
2001	19,458	0	0	38,494	0	0
2002	419,525	0	487	794,225	0	922
2003	2,556,274	0	0	4,631,026	0	0
2004	4,349,613	0	230,450	7,540,571	0	399,512
2005	4,701,633	0	270,443	7,799,847	0	448,656
2006	4,586,671	0	841,404	7,281,463	0	1,335,751
2007	4,455,064	538,751	1,961,370	6,767,975	818,451	2,979,644
2008	4,343,042	1,259,482	1,971,136	6,313,679	1,830,967	2,865,531
2009	4,243,059	1,230,487	1,014,654	5,902,707	1,711,785	1,411,529
2010	4,132,921	1,198,547	2,512,545	5,501,903	1,595,552	3,344,797
2011	4,015,415	1,164,470	2,781,122	5,115,287	1,483,433	3,542,906
2012	3,680,411	1,067,319	2,802,095	4,486,624	1,301,121	3,415,908
2013	3,424,550	1,749,921	3,254,050	3,994,942	2,041,387	3,796,043
2014	3,277,000	2,514,257	4,528,856	3,658,197	2,806,729	5,055,676
2015	3,144,086	2,639,345	4,164,454	3,358,682	2,819,490	4,448,694
2016	2,973,589	2,434,550	5,885,831	3,039,758	2,488,724	6,016,805
Total	54,322,309	15,797,129	32,218,896	76,225,381	18,897,639	39,062,374
2017	2,731,276	2,241,751	6,171,046	2,671,821	2,192,953	6,036,714
2018	2,506,781	2,859,346	6,475,838	2,346,616	2,676,654	6,062,079
2019	2,297,049	3,108,982	6,930,555	2,057,688	2,785,014	6,208,365
2020	2,098,058	2,852,179	7,460,940	1,798,501	2,444,949	6,395,677
2021	1,911,146	2,609,093	7,868,066	1,567,727	2,140,259	6,454,234
2022	1,732,708	2,375,709	8,376,107	1,360,147	1,864,892	6,575,104
2023	1,566,410	2,157,616	8,435,731	1,176,656	1,620,758	6,336,754
2024	1,411,714	1,954,163	8,404,944	1,014,786	1,404,716	6,041,748
2025	1,268,868	1,765,538	8,724,455	872,827	1,214,475	6,001,362
2026	1,137,090	1,590,673	9,048,836	748,497	1,047,071	5,956,456
2027	1,015,553	1,428,548	9,346,527	639,708	899,857	5,887,477
2028	904,095	1,279,049	9,590,405	544,975	770,992	5,780,955
2029	802,029	1,141,226	9,814,781	462,633	658,291	5,661,441
2030	708,640	1,014,141	10,028,988	391,161	559,794	5,535,887
2031	623,673	897,697	10,163,201	329,436	474,180	5,368,393
2032	546,183	790,601	10,287,961	276,081	399,627	5,200,281
2033	476,828	694,090	10,188,105	230,644	335,735	4,928,044
2034	415,229	607,951	9,923,222	192,200	281,406	4,593,224
2035	360,109	530,282	9,754,113	159,508	234,885	4,320,524
2036	310,859	460,364	9,601,381	131,764	195,134	4,069,734
2037	267,066	397,766	9,441,033	108,326	161,341	3,829,442
2038	228,405	342,161	9,204,257	88,656	132,810	3,572,634
2039	194,407	292,926	8,865,212	72,210	108,803	3,292,855
2040	164,542	249,342	8,456,301	58,485	88,626	3,005,714
2041	138,561	211,155	8,007,904	47,129	71,821	2,723,766
2042	115,928	177,637	7,554,492	37,733	57,819	2,458,894
2043	96,465	148,617	7,040,232	30,046	46,290	2,192,832
2044	79,977	123,952	6,435,490	23,838	36,945	1,918,155
2045	65,891	102,726	5,851,506	18,794	29,300	1,668,989
2046	54,041	84,742	5,283,842	14,750	23,130	1,442,179
2047	44,129	69,603	4,752,407	11,526	18,179	1,241,271
2048	35,847	56,872	4,243,459	8,960	14,215	1,060,613
2049	28,954	46,228	3,746,679	6,925	11,057	896,122
2050	23,211	37,296	3,272,393	5,312	8,536	748,979
2051	18,507	29,921	2,834,860	4,053	6,553	620,897
2052	14,699	23,897	2,451,836	3,081	5,009	513,882
2053	11,581	18,919	2,103,539	2,323	3,795	421,897
2054	9,076	14,912	1,771,282	1,742	2,862	339,959
2055	7,033	11,632	1,476,494	1,292	2,136	271,178
2056	5,406	9,000	1,217,179	950	1,582	213,925
2057	4,153	6,951	1,002,598	698	1,169	168,623
2058	3,186	5,361	824,464	513	863	132,692
2059	2,420	4,094	670,440	373	631	103,257
2060	1,809	3,080	533,683	267	454	78,655
2061	1,336	2,294	414,824	188	324	58,504
2062	996	1,719	323,727	134	232	43,691
2063	743	1,287	256,221	96	166	33,091
2064	548	953	200,994	68	118	24,840
2065	397	693	154,769	47	82	18,304
2066	282	496	114,864	32	56	13,000
2067	200	352	85,190	22	38	9,226
2068	132	232	63,992	14	24	6,632
2069	74	135	48,094	7	13	4,770
2070	1	0	34,578	0	0	3,282
2071	0	0	3,315	0	0	301
2072	0	0	0	0	0	0
2073	0	0	0	0	0	0
Total	26,444,299	34,835,949	285,337,350	19,521,964	25,036,621	146,547,502
Grand Total	80,766,608	50,633,078	317,556,247	95,747,344	43,934,260	185,609,876

Minimum Required Loss Ratios	67.7%	85%
Minimum PV Incurred Claims	64,820,952	37,344,121
Dual Loss Ratio Test Met	185,609,876	>
		102,165,074

Lifetime Experience (Nationwide) as of 06/30/2012
Pre-Rate Stabilization (Forms LT50, NH50, HCA, LTA and NHA)

Non-Lifetime Benefit Periods					
	Actual				
Year	Earned Premium		Incurred Claims		Loss Ratio
1997	493,144		0		0.0%
1998	2,879,303		112,177		3.9%
1999	5,164,376		687,964		13.3%
2000	8,538,676		1,407,135		16.5%
2001	13,290,762		2,738,699		20.6%
2002	19,718,256		5,076,172		25.7%
2003	26,906,912		4,000,864		14.9%
2004	29,821,612		6,331,213		21.2%
2005	30,077,474		9,428,248		31.3%
2006	29,211,252		9,729,882		33.3%
2007	28,499,600		12,971,656		45.5%
2008	27,996,984		14,397,151		51.4%
2009	26,715,081		16,859,273		63.1%
2010	25,410,395		21,103,140		83.0%
2011	24,576,577		22,979,818		93.5%
Total	299,300,404		127,823,391		42.7%
	Revised				
	Earned Premium w/o Increase	Earned Premium w/Increase	Incurred Claims	Loss Ratio w/o Increase	Loss Ratio w/Increase
2012	22,771,901	22,771,901	20,740,789	91.1%	91.1%
2013	20,887,943	25,065,531	19,199,849	91.9%	76.6%
2014	19,257,465	23,940,880	17,379,050	90.2%	72.6%
2015	17,782,909	22,107,713	18,300,779	102.9%	82.8%
2016	16,366,871	20,347,294	19,308,395	118.0%	94.9%
2017	15,009,214	18,659,454	20,366,561	135.7%	109.1%
2018	13,714,363	17,049,695	21,417,353	156.2%	125.6%
2019	12,483,765	15,519,817	22,942,257	183.8%	147.8%
2020	11,313,441	14,064,870	24,394,879	215.6%	173.4%
2021	10,204,306	12,685,993	25,562,988	250.5%	201.5%
2022	9,153,944	11,380,183	27,559,779	301.1%	242.2%
2023	8,170,034	10,156,986	27,385,876	335.2%	269.6%
2024	7,266,256	9,033,410	26,537,952	365.2%	293.8%
2025	6,426,693	7,989,664	26,960,298	419.5%	337.4%
2026	5,640,875	7,012,736	27,319,596	484.3%	389.6%
2027	4,934,468	6,134,530	27,647,149	560.3%	450.7%
2028	4,303,157	5,349,685	27,860,129	647.4%	520.8%
2029	3,735,855	4,644,415	27,914,854	747.2%	601.0%
2030	3,227,503	4,012,432	27,693,815	858.1%	690.2%
2031	2,771,723	3,445,806	27,371,449	987.5%	794.3%
2032	2,364,513	2,939,562	27,081,946	1145.3%	921.3%
2033	2,005,483	2,493,217	26,078,834	1300.4%	1046.0%
2034	1,695,445	2,107,777	24,552,393	1448.1%	1164.8%
2035	1,427,333	1,774,461	23,357,715	1636.5%	1316.3%
2036	1,193,961	1,484,332	22,122,429	1852.9%	1490.4%
2037	991,966	1,233,212	20,874,842	2104.4%	1692.7%
2038	819,531	1,018,841	19,591,283	2390.5%	1922.9%
2039	674,521	838,564	18,219,119	2701.0%	2172.7%
2040	552,896	687,361	16,755,734	3030.5%	2437.7%
2041	449,702	559,070	15,345,804	3412.4%	2744.9%
2042	361,471	449,380	13,913,206	3849.1%	3096.1%
2043	288,254	358,358	12,481,694	4330.1%	3483.0%
Total	228,247,761	277,317,131	724,238,797	317.3%	261.2%
	Earned Premium w/o Increase	Earned Premium With Increase	Incurred Claims	Loss Ratio w/o Increase	Loss Ratio With Increase
Past Experience	299,300,404	299,300,404	127,823,391	42.7%	42.7%
Anticipated Experience	228,247,761	277,317,131	724,238,797	317.3%	261.2%
Lifetime Experience	527,548,165	576,617,535	852,062,188	161.5%	147.8%
Past Experience @ 4.5%	387,671,493	387,671,493	152,823,125	39.4%	39.4%
Anticipated Experience @ 4.5%	168,132,648	202,760,231	390,363,572	232.2%	192.5%
Lifetime Experience @ 4.5%	555,804,141	590,431,724	543,186,696	97.7%	92.0%

Note: The Earned Premium with Increase includes the 20% rate increase to the 1-Year, 2-Year and 3-Year Benefit Periods to be effective in 2013, and the 20% increase to the 5-Year Benefit Period to be effective in 2013 and the additional 10% increase to the 5-Year Benefit Period to be effective in 2014.

Lifetime Experience (Nationwide) as of 12/31/2014
Pre-Rate Stabilization (Forms LT50, NH50, HCA, LTA and NHA)
Premiums at the Virginia Rate Level
Non-Lifetime Benefit Periods

Year	Virginia Rate Level Earned Premium	Incurred Claims Discounted to Incurred Year	Loss Ratio
1997	493,144	0	0.0%
1998	2,879,303	107,337	3.7%
1999	5,164,376	620,403	12.0%
2000	8,538,676	1,279,039	15.0%
2001	13,291,034	2,429,334	18.3%
2002	19,718,256	4,609,517	23.4%
2003	26,161,646	3,660,231	14.0%
2004	26,346,243	5,771,160	21.9%
2005	26,128,236	8,629,972	33.0%
2006	25,202,065	8,904,639	35.3%
2007	26,556,561	11,650,538	43.9%
2008	28,547,868	13,345,114	46.7%
2009	27,170,713	15,787,971	58.1%
2010	25,819,457	17,585,716	68.1%
2011	24,490,069	20,554,205	83.9%
2012	24,453,662	26,390,188	107.9%
2013	26,798,097	24,813,474	92.6%
2014	27,611,723	18,165,434	65.8%
Total	365,371,128	184,304,271	50.4%
Year	Earned Premium	Incurred Claims	Loss Ratio
2015	25,574,482	20,057,519	78.4%
2016	23,347,338	20,796,633	89.1%
2017	21,281,849	21,510,348	101.1%
2018	19,373,982	22,155,288	114.4%
2019	17,593,646	23,106,564	131.6%
2020	15,940,014	24,012,761	150.6%
2021	14,381,055	24,514,860	170.5%
2022	12,921,045	25,434,750	196.8%
2023	11,549,287	24,973,161	216.2%
2024	10,290,727	24,371,697	236.8%
2025	9,140,163	24,461,948	267.6%
2026	8,084,295	24,570,954	303.9%
2027	7,120,005	24,611,158	345.7%
2028	6,244,276	24,487,995	392.2%
2029	5,453,674	24,236,445	444.4%
2030	4,743,589	23,848,971	502.8%
2031	4,107,648	23,394,326	569.5%
2032	3,541,431	22,914,637	647.0%
2033	3,038,032	21,961,226	722.9%
2034	2,595,577	20,844,962	803.1%
2035	2,206,883	19,944,756	903.8%
2036	1,866,494	19,008,040	1018.4%
2037	1,570,589	18,039,438	1148.6%
2038	1,314,630	16,999,368	1293.1%
2039	1,094,513	15,832,409	1446.5%
2040	906,318	14,561,723	1606.7%
2041	746,006	13,323,364	1786.9%
2042	610,565	12,099,779	1981.7%
2043	496,520	10,892,540	2193.8%
2044	401,312	9,648,852	2404.3%
Total	237,134,634	606,967,619	256.0%
Past Experience	Earned Premium	Incurred Claims	Loss Ratio
	365,371,128	184,304,271	50.4%
Anticipated Experience	237,134,634	616,616,471	259.6%
Lifetime Experience	602,907,074	800,920,741	132.8%
Past Experience @ 4.5%	506,976,629	231,590,441	45.7%
Anticipated Experience @ 4.5%	177,837,403	360,181,883	202.5%
Lifetime Experience @ 4.5%	684,814,033	591,772,324	86.4%

Lifetime Experience (Nationwide) as of 12/31/2016
Pre-Rate Stabilization (Forms LT50, NH50, HCA, LTA and NHA)
Premiums at the Virginia Rate Level
Non-Lifetime Benefit Periods

	Virginia Rate Level	Incurred Claims Discounted to	
Year	Earned Premium	Incurred Year	Loss Ratio
1997	493,144	0	0.0%
1998	2,879,303	107,337	3.7%
1999	5,164,376	620,403	12.0%
2000	8,538,676	1,279,039	15.0%
2001	13,291,034	2,429,334	18.3%
2002	19,718,256	4,609,517	23.4%
2003	26,161,646	3,660,231	14.0%
2004	26,346,243	5,771,160	21.9%
2005	26,128,236	8,629,972	33.0%
2006	25,202,065	8,814,082	35.0%
2007	26,556,561	11,678,078	44.0%
2008	28,547,868	13,342,930	46.7%
2009	27,170,713	15,858,480	58.4%
2010	25,819,457	17,408,466	67.4%
2011	24,490,069	20,794,851	84.9%
2012	24,453,662	25,050,446	102.4%
2013	26,798,097	24,236,077	90.4%
2014	27,611,723	24,831,729	89.9%
2015	27,138,093	27,001,863	98.8%
2016	27,148,364	34,148,099	125.8%
Total	419,837,584	250,272,094	59.6%
	Earned Premium	Incurred Claims	Loss Ratio
2017	24,608,891	27,636,882	112.3%
2018	22,304,600	28,416,518	127.4%
2019	20,192,418	29,611,006	146.6%
2020	18,220,232	30,735,018	168.7%
2021	16,397,100	31,622,766	192.9%
2022	14,682,828	32,784,022	223.3%
2023	13,096,433	32,382,296	247.3%
2024	11,633,024	31,821,503	273.5%
2025	10,297,614	32,100,913	311.7%
2026	9,082,829	32,393,466	356.6%
2027	7,978,650	32,599,205	408.6%
2028	6,981,193	32,613,782	467.2%
2029	6,084,175	32,495,957	534.1%
2030	5,280,137	32,191,361	609.7%
2031	4,563,230	31,791,974	696.7%
2032	3,924,942	31,314,292	797.8%
2033	3,364,633	30,248,034	899.0%
2034	2,874,456	28,846,686	1003.6%
2035	2,445,247	27,601,218	1128.8%
2036	2,070,165	26,458,888	1278.1%
2037	1,743,703	25,380,908	1455.6%
2038	1,461,171	24,177,026	1654.6%
2039	1,217,867	22,768,954	1869.6%
2040	1,009,103	21,186,398	2099.5%
2041	831,844	19,406,995	2357.1%
2042	681,564	18,018,887	2643.8%
2043	555,308	16,419,637	2956.9%
2044	449,688	14,741,503	3278.2%
2045	361,580	13,110,603	3625.9%
2046	289,416	11,561,286	3994.7%
2047	230,535	10,149,439	4402.6%
2048	182,496	8,853,963	4851.6%
2049	143,283	7,641,022	5332.8%
2050	111,489	6,515,510	5844.1%
2051	86,279	5,514,288	6391.2%
2052	66,559	4,640,354	6971.8%
2053	51,023	3,883,863	7612.0%
2054	38,698	3,209,977	8295.0%
2055	28,892	2,619,423	9066.3%
2056	21,376	2,113,521	9887.2%
2057	15,823	1,699,948	10743.4%
2058	11,684	1,365,341	11685.6%
2059	8,522	1,085,897	12741.6%
2060	6,066	852,813	14059.9%
2061	4,233	655,912	15495.6%
2062	2,990	499,460	16705.3%
2063	2,148	386,898	18010.2%
2064	1,532	299,650	19561.4%
2065	1,071	228,822	21356.9%
2066	728	169,082	23211.7%
2067	505	123,691	24479.6%
2068	339	91,921	27097.8%
2069	137	67,772	49644.0%
2070	10	48,386	491238.8%
2071	0	33,070	7810123.4%
2072	0	4	6232.7%
2073	0	0	0.0%
Total	215,700,459	865,387,654	401.2%
	Earned Premium	Incurred Claims	Loss Ratio
Past Experience	419,837,584	250,272,094	59.6%
Anticipated Experience	215,700,459	865,387,654	401.2%
Lifetime Experience	635,538,044	1,115,659,748	175.5%
Past Experience @ 4.5%	103,566,290	321,853,927	52.7%
Anticipated Experience @ 4.5%	163,182,624	487,884,646	299.0%
Lifetime Experience @ 4.5%	773,748,913	809,738,573	104.7%

Lifetime Experience (Nationwide) as of 06/30/2012
Pre-Rate Stabilization (Forms LT50, NH50, HCA, LTA and NHA)

Lifetime Benefit Period					
Year	Actual				
	Earned Premium	Incurred Claims	Loss Ratio		
1997	279,977	0	0.0%		
1998	2,595,131	264,595	10.2%		
1999	5,659,399	733,059	13.0%		
2000	11,774,776	1,870,693	15.9%		
2001	20,596,711	7,204,732	35.0%		
2002	30,490,504	7,048,038	23.1%		
2003	41,347,298	12,320,422	29.8%		
2004	46,704,535	16,024,233	34.3%		
2005	47,207,072	19,365,825	41.0%		
2006	46,402,671	18,562,860	40.0%		
2007	45,952,833	26,635,259	58.0%		
2008	45,842,454	34,681,570	75.7%		
2009	44,559,942	31,923,661	71.6%		
2010	43,124,644	44,906,780	104.1%		
2011	41,181,809	39,957,474	97.0%		
Total	473,819,756	261,499,201	55.2%		
	Revised				
	Earned Premium w/o Increase	Earned Premium w/Increase	Incurred Claims	Loss Ratio w/o Increase	Loss Ratio w/Increase
2012	38,101,857	38,101,857	42,860,981	112.5%	112.5%
2013	34,792,885	45,230,750	37,211,543	107.0%	82.3%
2014	32,036,596	49,977,090	31,899,998	99.6%	63.8%
2015	29,604,782	46,183,459	34,116,181	115.2%	73.9%
2016	27,262,069	42,528,828	36,519,306	134.0%	85.9%
2017	25,009,986	39,015,579	39,059,538	156.2%	100.1%
2018	22,856,499	35,656,138	41,651,537	182.2%	116.8%
2019	20,804,076	32,454,358	45,667,827	219.5%	140.7%
2020	18,845,917	29,399,631	51,257,601	272.0%	174.3%
2021	16,986,040	26,498,222	54,479,329	320.7%	205.6%
2022	15,221,271	23,745,182	59,122,751	388.4%	249.0%
2023	13,567,143	21,164,744	58,685,547	432.6%	277.3%
2024	12,048,639	18,795,878	57,308,377	475.6%	304.9%
2025	10,640,771	16,599,603	59,302,962	557.3%	357.3%
2026	9,325,354	14,547,552	62,549,324	670.7%	430.0%
2027	8,140,767	12,699,596	65,170,850	800.5%	513.2%
2028	7,081,684	11,047,427	66,627,484	940.8%	603.1%
2029	6,130,952	9,564,285	67,739,982	1104.9%	708.3%
2030	5,280,069	8,236,908	68,727,563	1301.6%	834.4%
2031	4,519,498	7,050,418	68,844,558	1523.3%	976.5%
2032	3,841,802	5,993,211	69,031,101	1796.8%	1151.8%
2033	3,246,394	5,064,374	67,211,289	2070.3%	1327.1%
2034	2,734,379	4,265,631	64,094,791	2344.0%	1502.6%
2035	2,292,957	3,577,014	61,783,473	2694.5%	1727.2%
2036	1,910,784	2,980,823	59,476,863	3112.7%	1995.3%
2037	1,581,676	2,467,414	57,093,009	3609.7%	2313.9%
2038	1,302,035	2,031,174	54,357,927	4174.8%	2676.2%
2039	1,067,475	1,665,262	51,161,372	4792.7%	3072.3%
2040	871,322	1,359,262	47,744,372	5479.5%	3512.5%
2041	705,923	1,101,240	44,351,687	6282.8%	4027.4%
2042	565,443	882,091	41,315,862	7306.8%	4683.9%
2043	449,431	701,113	37,977,967	8450.2%	5416.8%
Total	378,826,475	560,586,111	1,704,402,952	449.9%	304.0%
Past Experience	Earned Premium w/o Increase	Earned Premium With Increase	Incurred Claims	Loss Ratio w/o Increase	Loss Ratio With Increase
	473,819,756	473,819,756	261,499,201	55.2%	55.2%
Anticipated Experience	378,826,475	560,586,111	1,704,402,952	449.9%	304.0%
Lifetime Experience	852,646,231	1,034,405,867	1,965,902,154	230.6%	190.1%
Past Experience @ 4.5%	608,228,555	608,228,555	314,012,837	51.6%	51.6%
Anticipated Experience @ 4.5%	279,569,950	406,788,382	874,889,639	312.9%	215.1%
Lifetime Experience @ 4.5%	887,798,505	1,015,016,937	1,188,902,476	133.9%	117.1%

Note: The Earned Premium with the Increase includes the 30% rate increase to be effective in 2013 and the additional 20% increase to be effective in 2014.

Lifetime Experience (Nationwide) as of 12/31/2014
Pre-Rate Stabilization (Forms LT50, NH50, HCA, LTA and NHA)

Premiums at the Virginia Rate Level					
Year	Virginia Rate Level		Incurred Claims Discounted to Incurred Year		Loss Ratio
	Earned Premium	Incurred Premium	Incurred Year	Incurred Year	
1997	279,977	0	0.0%		
1998	2,595,131	229,543	8.8%		
1999	5,659,399	581,891	10.3%		
2000	11,774,776	1,523,173	12.9%		
2001	20,596,912	4,549,955	22.1%		
2002	30,490,543	5,577,230	18.3%		
2003	39,924,279	9,426,115	23.6%		
2004	40,127,736	13,193,942	32.9%		
2005	39,955,932	16,589,634	41.0%		
2006	39,035,372	15,744,688	40.3%		
2007	42,174,929	22,069,907	52.3%		
2008	46,681,645	29,532,300	63.3%		
2009	45,285,665	31,364,841	69.3%		
2010	43,803,230	43,711,183	99.8%		
2011	40,526,545	46,462,820	114.6%		
2012	35,360,950	48,000,576	135.7%		
2013	38,293,528	49,964,356	130.5%		
2014	44,695,854	48,511,760	108.5%		
Total	567,362,405	386,833,914	68.2%		
Year	Earned Premium		Incurred Claims		Loss Ratio
2015	44,226,116		39,920,614		90.3%
2016	41,251,752		42,840,202		103.9%
2017	38,370,716		45,839,730		119.5%
2018	35,613,893		48,881,139		137.3%
2019	32,967,553		53,095,205		161.1%
2020	30,428,677		57,870,814		190.2%
2021	27,974,162		61,420,171		219.6%
2022	25,619,240		65,612,884		256.1%
2023	23,350,332		66,915,841		286.6%
2024	21,229,406		67,224,430		316.7%
2025	19,207,219		70,262,320		365.8%
2026	17,227,049		73,313,835		425.6%
2027	15,510,246		76,137,629		490.9%
2028	13,938,511		78,539,065		563.5%
2029	12,484,873		80,775,594		647.0%
2030	11,140,309		83,027,279		745.3%
2031	9,895,798		84,514,981		854.0%
2032	8,753,425		85,888,251		981.2%
2033	7,702,359		85,542,950		1110.6%
2034	6,751,021		84,107,567		1245.8%
2035	5,895,758		83,745,148		1420.4%
2036	5,121,023		82,972,536		1620.2%
2037	4,424,223		81,666,626		1845.9%
2038	3,802,608		79,625,206		2094.0%
2039	3,252,722		76,630,648		2355.9%
2040	2,769,109		73,084,573		2639.3%
2041	2,343,650		69,153,102		2950.7%
2042	1,971,572		65,204,898		3307.3%
2043	1,646,810		60,709,287		3686.5%
2044	1,366,846		55,426,089		4055.0%
Total	474,870,134		2,024,522,521		426.3%
Past Experience	Earned Premium		Incurred Claims		Loss Ratio
Past Experience	567,362,405		386,833,914		68.2%
Anticipated Experience	476,236,981		2,079,948,609		436.7%
Lifetime Experience	1,043,599,385		2,466,782,523		236.4%
Past Experience @ 4.5%	782,483,681		480,802,775		61.4%
Anticipated Experience @ 4.5%	345,179,856		1,097,300,850		317.9%
Lifetime Experience @ 4.5%	1,127,663,537		1,578,103,625		139.9%

Lifetime Experience (Nationwide) as of 12/31/2016
Pre-Rate Stabilization (Forms LT50, NH50, HCA, LTA and NHA)

Lifetime Benefit Period				
Year	Virginia Rate Level Earned Premium	Incurred Claims Discounted to Incurred Year	Loss Ratio	
1997	379,977	0	0.0%	
1998	2,595,131	229,543	8.8%	
1999	5,659,399	581,891	10.3%	
2000	11,774,776	1,523,173	12.9%	
2001	20,596,912	4,549,954	22.1%	
2002	30,490,543	5,455,216	17.9%	
2003	39,924,279	9,776,788	24.5%	
2004	40,127,736	13,187,176	32.9%	
2005	39,955,932	16,226,697	40.6%	
2006	39,035,372	15,302,440	39.2%	
2007	42,117,903	21,894,757	52.0%	
2008	46,531,336	31,010,819	66.6%	
2009	45,138,622	29,943,118	66.3%	
2010	43,662,093	43,806,976	100.3%	
2011	40,391,808	46,122,333	114.2%	
2012	35,250,708	46,658,968	132.4%	
2013	38,283,642	48,844,490	127.6%	
2014	44,695,854	40,198,060	89.9%	
2015	42,689,915	45,730,248	107.1%	
2016	37,209,476	48,433,867	130.2%	
Total	646,511,416	469,476,515	72.6%	
	Earned Premium	Incurred Claims	Loss Ratio	
2017	34,439,921	42,193,074	122.5%	
2018	41,364,201	44,812,166	108.3%	
2019	43,842,932	48,419,978	110.4%	
2020	40,257,330	52,866,944	131.3%	
2021	36,845,937	56,523,399	153.6%	
2022	33,562,977	65,233,140	179.5%	
2023	30,493,309	61,370,608	201.3%	
2024	27,625,689	61,808,534	223.7%	
2025	24,968,065	64,696,069	259.1%	
2026	22,502,173	67,610,519	300.5%	
2027	20,212,372	70,353,390	348.1%	
2028	18,097,612	72,742,987	401.9%	
2029	16,145,838	74,978,474	464.4%	
2030	14,341,951	78,268,721	538.8%	
2031	12,687,436	78,840,270	621.4%	
2032	11,162,789	80,346,493	719.8%	
2033	9,788,279	80,215,409	819.5%	
2034	8,560,494	78,807,955	920.6%	
2035	7,453,804	78,067,955	1047.4%	
2036	6,456,903	77,388,940	1198.5%	
2037	5,564,659	76,560,536	1375.8%	
2038	4,772,572	75,029,404	1572.1%	
2039	4,073,138	72,577,912	1781.9%	
2040	3,455,321	69,572,431	2013.5%	
2041	2,915,360	66,153,320	2269.1%	
2042	2,442,545	66,137,060	2565.8%	
2043	2,034,479	58,591,257	2879.9%	
2044	1,689,428	53,748,501	3181.5%	
2045	1,394,267	49,051,209	3518.1%	
2046	1,144,748	44,458,757	3883.7%	
2047	935,471	40,130,452	4289.9%	
2048	760,137	35,943,278	4728.5%	
2049	614,421	31,818,773	5178.7%	
2050	492,945	27,874,097	5654.6%	
2051	393,118	24,202,988	6156.7%	
2052	311,825	20,991,863	6731.9%	
2053	244,989	18,033,685	7361.0%	
2054	191,673	15,203,525	7932.0%	
2055	148,681	12,685,072	8531.7%	
2056	114,436	10,457,274	9138.1%	
2057	87,865	8,628,492	9820.1%	
2058	67,448	7,107,878	10538.3%	
2059	51,186	5,783,164	11298.3%	
2060	38,434	4,598,691	11965.2%	
2061	28,585	3,572,283	12497.0%	
2062	21,360	2,977,678	13908.0%	
2063	15,991	2,215,977	13857.4%	
2064	11,805	1,739,406	14734.2%	
2065	8,575	1,337,719	15600.7%	
2066	6,145	990,079	16110.9%	
2067	4,361	735,316	16860.0%	
2068	2,874	552,194	19215.5%	
2069	1,720	415,108	24132.7%	
2070	9	298,193	3263550.1%	
2071	0	761	848605.5%	
2072	0	6	10256.1%	
2073	0	1	0.0%	
Total	494,850,585	2,325,802,685	451.8%	
	Earned Premium	Incurred Claims	Loss Ratio	
Past Experience	646,511,416	469,476,515	72.6%	
Anticipated Experience	494,850,585	2,325,802,685	451.8%	
Lifetime Experience	1,141,362,001	2,705,279,200	237.0%	
Past Experience @ 4.5%	937,117,727	610,208,562	65.1%	
Anticipated Experience @ 4.5%	356,984,699	1,189,963,233	313.4%	
Lifetime Experience @ 4.5%	1,294,102,426	1,719,114,794	133.6%	

Lifetime Experience (Nationwide) as of 06/30/2012
Pre-Rate Stabilization (Forms LT50, NH50, HCA, LTA and NHA)

All Benefit Periods

	Actual			
Year	Earned Premium		Incurred Claims	Loss Ratio
1997	873,120		0	0.0%
1998	5,474,434		376,772	6.9%
1999	10,823,775		1,421,022	13.1%
2000	20,313,452		3,277,828	16.1%
2001	33,887,473		9,943,431	29.3%
2002	50,208,760		12,124,210	24.1%
2003	68,254,210		16,321,287	23.9%
2004	76,526,146		22,355,445	29.2%
2005	77,284,546		28,794,073	37.3%
2006	75,613,922		28,292,742	37.4%
2007	74,452,433		39,606,916	53.2%
2008	73,839,439		49,078,721	66.5%
2009	71,275,024		48,782,934	68.4%
2010	68,535,038		66,009,920	96.3%
2011	65,758,386		62,937,292	95.7%
Total	773,120,160		389,322,592	50.4%
Revised				
	Earned Premium	Earned Premium		Loss Ratio
	w/o Increase	w/Increase	Incurred Claims	w/o Increase
2012	60,873,758	60,873,758	63,601,771	104.5%
2013	55,680,827	70,296,281	56,411,393	101.3%
2014	51,294,061	73,917,970	49,279,048	96.1%
2015	47,387,691	68,291,172	52,416,960	110.6%
2016	43,628,940	62,876,122	55,827,701	128.0%
2017	40,019,200	57,675,033	59,426,099	148.5%
2018	36,570,861	52,705,833	63,068,889	172.5%
2019	33,287,841	47,974,175	68,610,084	206.1%
2020	30,159,358	43,464,501	75,652,480	250.8%
2021	27,190,346	39,184,215	80,042,317	294.4%
2022	24,375,214	35,125,365	86,682,530	355.6%
2023	21,737,177	31,321,730	86,071,423	396.0%
2024	19,314,896	27,829,287	83,846,328	434.1%
2025	17,067,463	24,589,267	86,263,259	505.4%
2026	14,966,229	21,560,288	89,868,919	600.5%
2027	13,075,235	18,834,126	92,817,999	709.9%
2028	11,384,841	16,397,111	94,487,613	829.9%
2029	9,866,807	14,208,700	95,654,836	969.5%
2030	8,507,572	12,249,340	96,421,378	1133.4%
2031	7,291,221	10,496,224	96,216,007	1319.6%
2032	6,206,315	8,932,773	96,113,047	1548.6%
2033	5,251,877	7,557,591	93,290,123	1776.3%
2034	4,429,824	6,373,408	88,647,184	2001.1%
2035	3,720,291	5,351,474	85,141,188	2288.6%
2036	3,104,745	4,465,155	81,599,293	2628.2%
2037	2,573,642	3,700,627	77,967,850	3029.5%
2038	2,121,566	3,050,015	73,949,209	3485.6%
2039	1,741,996	2,503,826	69,380,492	3982.8%
2040	1,424,218	2,046,623	64,500,107	4528.8%
2041	1,155,625	1,660,310	59,697,491	5165.8%
2042	926,914	1,331,471	55,229,069	5958.4%
2043	737,686	1,059,471	50,459,661	6840.3%
Total	607,074,236	837,903,242	2,428,641,750	400.1%
Revised				
	Earned Premium	Earned Premium		Loss Ratio
	w/o Increase	With Increase	Incurred Claims	w/o Increase
Past Experience	773,120,160	773,120,160	389,322,592	50.4%
Anticipated Experience	607,074,236	837,903,242	2,428,641,750	400.1%
Lifetime Experience	1,380,194,396	1,611,023,402	2,817,964,342	204.2%
Revised				
	Earned Premium	Earned Premium		Loss Ratio
	w/o Increase	With Increase	Incurred Claims	w/o Increase
Past Experience @ 4.5%	995,900,047	995,900,047	466,835,962	46.9%
Anticipated Experience @ 4.5%	447,702,599	609,548,614	1,265,253,210	282.6%
Lifetime Experience @ 4.5%	1,443,602,646	1,605,448,661	1,732,089,172	120.0%

Note: The Earned Premium with Increase includes the rate adjustments described in Exhibits 1A and 1B.

Lifetime Experience (Nationwide) as of 12/31/2014
Pre-Rate Stabilization (Forms LT50, NH50, HCA, LTA and NHA)
Premiums at the Virginia Rate Level
All Benefit Periods Combined

Year	Virginia Rate Level Earned Premium	Incurred Claims Discounted to Incurred Year	Loss Ratio
1997	873,120	0	0.0%
1998	5,474,434	336,880	6.2%
1999	10,823,775	1,202,294	11.1%
2000	20,313,452	2,802,212	13.8%
2001	33,887,945	6,979,289	20.6%
2002	50,208,799	10,186,747	20.3%
2003	66,085,925	13,086,346	19.8%
2004	66,473,979	18,965,102	28.5%
2005	66,084,168	25,019,606	37.9%
2006	64,237,437	24,649,327	38.4%
2007	68,731,490	33,720,445	49.1%
2008	75,229,514	42,877,414	57.0%
2009	72,456,378	47,152,812	65.1%
2010	69,622,687	61,296,899	88.0%
2011	65,016,614	67,017,024	103.1%
2012	59,814,612	74,390,763	124.4%
2013	65,091,625	74,777,830	114.9%
2014	72,307,577	66,677,194	92.2%
Total	932,733,533	571,138,185	61.2%
Year	Virginia Rate Level Earned Premium	Incurred Claims Discounted to Incurred Year	Loss Ratio
2015	59,800,598	59,978,132	85.9%
2016	64,599,091	63,636,835	98.5%
2017	59,652,564	67,350,079	112.9%
2018	54,987,875	71,036,427	129.2%
2019	50,561,199	76,201,769	150.7%
2020	46,368,691	81,883,575	176.6%
2021	42,355,216	85,935,032	202.9%
2022	38,540,285	91,047,634	236.2%
2023	34,899,619	91,889,002	263.3%
2024	31,520,133	91,596,126	290.6%
2025	28,347,381	94,724,269	334.2%
2026	25,311,345	97,884,788	386.7%
2027	22,630,251	100,748,787	445.2%
2028	20,182,787	103,027,080	510.5%
2029	17,938,548	105,012,039	585.4%
2030	15,883,899	106,876,520	672.9%
2031	14,003,447	107,909,306	770.6%
2032	12,294,857	108,802,888	884.9%
2033	10,740,391	107,504,175	1000.9%
2034	9,346,598	104,952,529	1122.9%
2035	8,102,641	103,689,903	1279.7%
2036	6,987,517	101,980,575	1459.5%
2037	5,994,811	99,706,064	1663.2%
2038	5,117,238	96,624,574	1888.2%
2039	4,347,235	92,463,056	2126.9%
2040	3,675,427	87,646,296	2384.7%
2041	3,089,656	82,476,466	2669.4%
2042	2,582,137	77,304,677	2993.8%
2043	2,143,330	71,601,827	3340.7%
2044	1,768,159	65,074,940	3680.4%
Total	713,772,927	2,696,565,080	377.8%
Year	Virginia Rate Level Earned Premium	Incurred Claims Discounted to Incurred Year	Loss Ratio
Past Experience	932,733,533	571,138,185	61.2%
Anticipated Experience	713,772,927	2,696,565,080	377.8%
Lifetime Experience	1,646,506,460	3,267,703,265	198.5%
Year	Virginia Rate Level Earned Premium	Incurred Claims Discounted to Incurred Year	Loss Ratio
Past Experience @ 4.5%	1,289,460,310	712,393,217	55.2%
Anticipated Experience @ 4.5%	523,017,259	1,457,482,732	278.7%
Lifetime Experience @ 4.5%	1,812,477,569	2,169,875,949	119.7%

Lifetime Experience (Nationwide) as of 12/31/2016
Pre-Rate Stabilization (Forms LT50, NH50, HCA, LTA and NHA)
Premiums at the Virginia Rate Level
All Benefit Periods Combined

	Virginia Rate Level	Incurred Claims Discounted to	
Year	Earned Premium	Incurred Year	Loss Ratio
1997	873,120	0	0.0%
1998	5,474,434	336,880	6.2%
1999	10,823,775	1,202,294	11.1%
2000	20,313,452	2,802,212	13.8%
2001	33,887,945	6,979,288	20.6%
2002	50,208,799	10,064,733	20.0%
2003	66,085,925	13,437,019	20.3%
2004	66,473,979	18,958,336	28.5%
2005	66,084,168	24,856,669	37.6%
2006	64,237,437	24,116,522	37.5%
2007	68,674,464	33,572,835	48.9%
2008	75,079,205	44,353,749	59.1%
2009	72,309,335	45,801,598	63.3%
2010	69,481,550	61,215,442	88.1%
2011	64,881,777	66,917,183	103.1%
2012	59,704,370	71,709,414	120.1%
2013	65,081,739	73,080,567	112.3%
2014	72,307,577	65,029,789	89.9%
2015	70,008,008	72,732,111	103.9%
2016	64,357,840	82,581,966	128.3%
Total	1,066,349,000	719,748,608	67.5%
	Earned Premium	Incurred Claims	Loss Ratio
2017	59,048,812	69,829,956	118.3%
2018	63,668,801	73,228,684	115.0%
2019	64,035,350	78,030,984	121.9%
2020	58,477,562	83,601,961	143.0%
2021	53,243,036	87,855,305	165.0%
2022	48,245,804	93,037,162	192.8%
2023	43,589,742	93,752,904	215.1%
2024	39,258,713	93,630,038	238.5%
2025	35,265,679	96,796,982	274.5%
2026	31,585,002	100,003,985	316.6%
2027	28,191,022	102,953,135	365.2%
2028	25,078,806	105,356,769	420.1%
2029	22,230,013	107,474,071	483.5%
2030	19,622,088	109,460,081	557.8%
2031	17,250,665	110,632,245	641.3%
2032	15,087,731	111,660,785	740.1%
2033	13,152,912	110,463,443	839.8%
2034	11,434,949	107,654,281	941.4%
2035	9,899,051	105,669,173	1067.5%
2036	8,527,068	103,847,828	1217.9%
2037	7,308,362	101,941,444	1394.9%
2038	6,233,742	99,206,430	1591.4%
2039	5,291,005	95,346,866	1802.1%
2040	4,464,424	90,788,829	2033.9%
2041	3,747,204	85,760,315	2288.6%
2042	3,124,109	80,689,947	2582.8%
2043	2,589,788	75,010,894	2896.4%
2044	2,139,116	68,490,005	3201.8%
2045	1,755,848	62,161,813	3540.3%
2046	1,434,164	56,020,043	3906.1%
2047	1,166,006	50,279,891	4312.1%
2048	942,633	44,797,242	4752.4%
2049	757,704	39,459,796	5207.8%
2050	604,434	34,389,607	5689.6%
2051	479,398	29,717,276	6198.9%
2052	378,384	25,632,216	6774.1%
2053	296,012	21,917,548	7404.3%
2054	230,371	18,413,502	7993.0%
2055	177,573	15,304,495	8618.7%
2056	135,812	12,570,794	9256.0%
2057	103,688	10,328,440	9961.0%
2058	79,132	8,473,219	10707.7%
2059	59,709	6,869,061	11504.3%
2060	44,499	5,451,504	12250.7%
2061	32,818	4,228,194	12883.7%
2062	24,349	3,297,138	13540.9%
2063	18,139	2,602,875	14349.2%
2064	13,337	2,039,056	15288.6%
2065	9,646	1,566,540	16240.0%
2066	6,874	1,159,161	16863.4%
2067	4,867	859,007	17651.1%
2068	3,213	644,115	20047.7%
2069	1,857	482,879	26008.5%
2070	19	346,579	1825842.7%
2071	1	33,832	5827402.9%
2072	0	10	8287.4%
2073	0	1	0.0%
Total	710,551,044	3,101,190,339	436.4%
	Earned Premium	Incurred Claims	Loss Ratio
Past Experience	1,066,349,000	719,748,608	67.5%
Anticipated Experience	710,551,044	3,101,190,339	436.4%
Lifetime Experience	1,776,900,045	3,820,938,948	215.0%
Past Experience @ 4.5%	1,547,684,016	932,062,488	60.2%
Anticipated Experience @ 4.5%	520,167,233	1,606,790,879	308.9%
Lifetime Experience @ 4.5%	2,067,851,339	2,538,853,367	122.8%

Lifetime Experience (Nationwide) as of 06/30/2012

Non-Lifetime Benefit Periods - Post Stabilization Experience

Year	Non-Interest Adjusted			Interest Adjusted		
	VA Rate Level			VA Rate Level		
	Original Premium	Increased Premium	Incurred Claims	Original Premium	Increased Premium	Incurred Claims
1998	0	0	0	0	0	0
1999	0	0	0	0	0	0
2000	0	0	0	0	0	0
2001	5,564	0	0	8,833	0	0
2002	124,727	0	0	189,481	0	0
2003	959,199	0	0	1,394,432	0	0
2004	1,875,935	0	224,567	2,609,696	0	312,405
2005	2,108,071	0	69,500	2,806,345	0	92,522
2006	2,052,755	0	592,846	2,615,030	0	755,234
2007	1,956,742	236,629	373,844	2,385,377	288,464	455,736
2008	1,883,058	546,087	462,179	2,196,700	637,043	539,159
2009	1,830,940	530,972	785,783	2,043,924	592,738	877,190
2010	1,759,287	510,193	1,184,088	1,879,365	545,016	1,264,906
2011	1,682,106	487,811	1,123,747	1,719,537	498,666	1,148,753
Total	16,238,384	2,311,692	4,816,554	19,848,719	2,561,926	5,445,904
2012	1,557,309	451,620	688,591	1,523,410	441,789	673,601
2013	1,441,771	666,222	791,108	1,349,652	623,655	740,562
2014	1,334,299	787,681	925,643	1,195,260	705,602	829,188
2015	1,232,101	753,390	976,484	1,056,183	645,822	837,063
2016	1,133,371	693,020	1,050,225	929,713	568,490	861,507
2017	1,038,745	635,159	1,131,226	815,397	498,589	887,993
2018	948,328	579,872	1,217,853	712,365	435,589	914,827
2019	862,572	527,435	1,307,910	620,045	379,138	940,168
2020	781,416	477,811	1,366,874	537,519	328,676	940,243
2021	704,362	430,695	1,462,373	463,651	283,508	962,617
2022	631,887	386,379	1,569,658	398,032	243,384	988,745
2023	564,882	345,407	1,682,562	340,503	208,206	1,014,223
2024	502,650	307,354	1,819,257	289,943	177,291	1,049,399
2025	443,788	271,362	1,901,466	244,966	149,789	1,049,588
2026	390,475	238,763	1,966,834	206,256	126,119	1,038,918
2027	342,628	209,506	2,051,080	173,189	105,899	1,036,764
2028	299,287	183,004	2,152,741	144,767	88,520	1,041,293
2029	260,204	159,106	2,261,564	120,442	73,647	1,046,824
2030	225,032	137,600	2,331,949	99,676	60,949	1,032,922
2031	193,456	118,292	2,388,139	82,000	50,140	1,012,260
2032	165,404	101,139	2,435,427	67,090	41,024	987,850
2033	140,893	86,152	2,491,566	54,688	33,440	967,102
2034	119,486	73,062	2,554,709	44,381	27,138	948,910
2035	100,795	61,633	2,551,605	35,827	21,907	906,944
2036	84,490	51,663	2,501,107	28,738	17,572	850,713
2037	70,434	43,068	2,444,887	22,925	14,018	795,781
2038	58,415	35,719	2,405,803	18,195	11,126	749,339
2039	48,228	29,490	2,371,017	14,375	8,790	706,703
2040	39,579	24,201	2,275,086	11,289	6,903	648,909
2041	32,174	19,674	2,140,551	8,782	5,370	584,245
2042	25,948	15,866	1,976,377	6,777	4,144	516,206
2043	20,830	12,737	1,841,824	5,206	3,183	460,347
Total	15,795,239	8,914,083	59,033,493	11,621,243	6,389,415	28,021,752
Grand Total	32,033,622	11,225,775	63,850,046	31,469,962	8,951,341	33,467,657
Minimum Required Loss Ratios 67.8% 85%						
Minimum PV Incurred Claims 21,336,634 7,608,640 28,945,274						
Dual Loss Ratio Test Met 33,467,657 > 28,945,274						

Lifetime Experience (Nationwide) as of 12/31/2014

Non-Lifetime Benefit Periods - Post Stabilization Experience

Year	Non-Interest Adjusted			Interest Adjusted		
	VA Rate Level			VA Rate Level		
	Original Premium	Increased Premium	Incurred Claims	Original Premium	Increased Premium	Incurred Claims
1998	0	0	0	0	0	0
1999	0	0	0	0	0	0
2000	0	0	0	0	0	0
2001	5,564	0	0	10,080	0	0
2002	124,727	0	0	216,230	0	0
2003	959,199	0	0	1,591,278	0	0
2004	1,875,935	0	209,237	2,978,096	0	332,169
2005	2,108,071	0	65,865	3,202,506	0	100,060
2006	2,052,755	0	535,770	2,984,184	0	778,873
2007	1,956,742	236,629	347,698	2,722,111	329,185	483,698
2008	1,883,058	546,087	430,039	2,506,799	726,972	572,484
2009	1,830,940	530,972	652,788	2,332,457	676,412	831,595
2010	1,759,287	510,193	1,093,010	2,144,668	621,954	1,332,439
2011	1,682,106	487,811	582,273	1,962,277	569,060	679,256
2012	1,556,962	451,519	1,230,166	1,738,076	504,042	1,373,265
2013	1,478,031	682,977	1,655,406	1,578,912	729,593	1,768,394
2014	1,409,166	831,877	1,487,038	1,440,523	850,389	1,520,128
Total	20,682,542	4,278,066	8,289,290	27,408,197	5,007,607	9,772,362
2015	1,291,227	772,384	1,534,859	1,263,120	755,571	1,501,448
2016	1,181,549	706,777	1,593,171	1,106,057	661,619	1,491,379
2017	1,079,572	645,777	1,648,625	967,077	578,484	1,476,832
2018	985,297	589,383	1,698,646	844,617	505,232	1,456,116
2019	897,239	536,709	1,781,795	736,012	440,266	1,461,620
2020	815,316	487,704	1,862,883	640,009	382,840	1,462,332
2021	737,946	441,424	1,917,461	554,331	331,589	1,440,359
2022	665,272	397,951	2,004,781	478,219	286,060	1,441,102
2023	596,751	356,964	1,965,953	410,492	245,548	1,352,336
2024	533,734	319,268	1,917,643	351,334	210,160	1,262,301
2025	475,907	284,677	1,939,583	299,779	179,321	1,221,764
2026	422,623	252,804	1,963,842	254,571	152,386	1,183,775
2027	373,740	223,563	1,981,177	215,584	128,958	1,142,799
2028	329,138	196,883	1,983,378	181,681	108,677	1,094,802
2029	288,683	172,684	1,976,178	152,488	91,215	1,043,854
2030	252,166	150,840	1,956,670	127,463	76,245	989,043
2031	219,295	131,177	1,932,582	106,074	63,451	934,801
2032	189,855	113,567	1,903,536	87,879	52,567	881,101
2033	163,523	97,816	1,829,436	72,431	43,327	810,337
2034	140,268	83,906	1,738,803	59,456	35,565	737,026
2035	119,748	71,631	1,668,425	48,572	29,055	676,741
2036	101,691	60,830	1,594,512	39,472	23,611	618,910
2037	85,914	51,392	1,517,485	31,912	19,089	563,648
2038	72,200	43,188	1,434,399	25,663	15,351	509,844
2039	60,350	36,100	1,340,116	20,527	12,279	455,820
2040	50,176	30,014	1,235,659	16,332	9,769	402,192
2041	41,476	24,810	1,134,498	12,919	7,728	353,364
2042	34,087	20,390	1,034,253	10,160	6,077	308,268
2043	27,830	16,647	934,347	7,938	4,748	266,498
Total	12,232,572	7,317,260	49,024,697	9,122,344	5,456,790	28,540,412
Grand Total	32,915,114	11,595,326	57,313,986	36,530,541	10,464,396	38,312,775
Minimum Required Loss Ratios 67.8% 85%						
Minimum PV Incurred Claims 24,767,707 8,894,737 33,662,444						
Dual Loss Ratio Test Met 38,312,775 > 33,662,444						

Lifetime Experience (Nationwide) as of 12/31/2016

Non-Lifetime Benefit Periods - Post Stabilization Experience

Year	Non-Interest Adjusted			Interest Adjusted		
	VA Rate Level			VA Rate Level		
	Original Premium	Increased Premium	Incurred Claims	Original Premium	Increased Premium	Incurred Claims
1998	0	0	0	0	0	0
1999	0	0	0	0	0	0
2000	0	0	0	0	0	0
2001	5,564	0	0	11,008	0	0
2002	124,727	0	0	236,128	0	0
2003	959,199	0	0	1,737,716	0	0
2004	1,875,935	0	209,237	3,252,156	0	362,737
2005	2,108,071	0	65,865	3,497,216	0	109,268
2006	2,052,755	0	535,770	3,258,804	0	850,549
2007	1,956,742	236,629	347,698	2,972,613	359,478	528,210
2008	1,883,058	546,087	430,039	2,737,487	793,871	625,167
2009	1,830,940	530,972	654,237	2,547,101	738,659	910,138
2010	1,759,287	510,193	1,284,179	2,342,031	679,189	1,709,548
2011	1,682,106	487,811	622,344	2,142,855	621,428	792,812
2012	1,556,962	451,519	1,205,371	1,898,022	550,427	1,469,414
2013	1,478,031	682,977	1,454,616	1,724,211	796,734	1,696,897
2014	1,409,166	831,877	1,282,810	1,573,087	928,646	1,432,033
2015	1,356,160	829,248	1,305,648	1,448,723	885,848	1,394,763
2016	1,436,432	878,332	2,274,370	1,468,396	897,877	2,324,980
Total	23,475,134	5,985,646	11,672,183	32,847,556	7,252,157	14,206,516
2017	1,305,440	798,235	2,441,599	1,277,023	780,859	2,388,451
2018	1,186,394	725,442	2,511,229	1,110,592	679,092	2,350,779
2019	1,077,061	658,588	2,629,277	964,827	589,961	2,355,297
2020	974,791	596,053	2,741,343	835,612	510,950	2,349,938
2021	880,068	538,133	2,837,703	721,926	441,435	2,327,789
2022	790,584	483,417	2,961,422	620,595	379,474	2,324,667
2023	707,608	432,680	2,920,464	531,541	325,020	2,193,795
2024	630,833	385,734	2,853,463	453,463	277,279	2,061,676
2025	560,482	342,717	2,909,640	385,543	235,747	2,001,478
2026	496,192	303,405	2,953,633	326,621	199,719	1,944,249
2027	437,508	267,522	2,988,338	275,591	168,515	1,882

Lifetime Experience (Nationwide) as of 06/30/2012					
Lifetime Benefit Period - Post Stabilization Experience			Lifetime Benefit Period - Post Stabilization Experience		
Non-Interest Adjusted			Interest Adjusted		
Year	Original Premium	Increased Premium	Incurred Claims	Original Premium	Increased Premium
1998	0	0	0	0	0
1999	0	0	0	0	0
2000	0	0	0	0	0
2001	13,893	0	0	22,056	0
2002	294,797	0	509	447,846	773
2003	1,597,074	0	0	2,321,740	0
2004	2,473,678	0	22,166	3,441,243	30,836
2005	2,593,563	0	332,525	3,452,650	442,670
2006	2,533,916	0	335,293	3,227,987	427,135
2007	2,498,942	302,197	1,793,509	3,046,348	368,395
2008	2,462,104	714,010	1,369,439	2,872,192	832,936
2009	2,413,851	700,017	167,150	2,694,643	781,446
2010	2,374,809	688,694	637,323	2,536,898	735,700
2011	2,334,484	677,000	2,302,528	2,386,432	692,065
Total	21,591,113	3,081,919	6,960,442	26,450,037	3,410,543
2012	2,158,870	626,072	1,233,848	2,111,876	612,444
2013	1,996,467	1,094,322	1,382,759	1,868,907	1,024,402
2014	1,847,574	1,664,131	1,589,329	1,655,050	1,490,723
2015	1,706,384	1,727,543	1,694,082	1,462,748	1,480,887
2016	1,569,429	1,588,890	1,589,329	1,287,414	1,303,378
2017	1,437,848	1,455,678	2,006,334	1,128,687	1,142,683
2018	1,311,760	1,328,026	2,183,830	985,368	997,586
2019	1,192,145	1,206,928	2,380,053	856,953	867,579
2020	1,078,937	1,092,316	2,594,629	742,177	751,380
2021	971,277	983,321	2,785,008	639,350	647,278
2022	869,992	880,780	2,992,239	548,017	554,813
2023	776,616	786,044	3,217,170	468,012	473,816
2024	689,540	698,090	3,512,930	397,746	402,678
2025	607,756	615,292	3,713,997	335,474	339,634
2026	533,595	540,212	3,977,139	281,855	285,350
2027	466,967	472,757	4,248,995	236,039	238,966
2028	406,720	411,763	4,496,190	196,733	199,172
2029	352,473	356,843	4,762,789	163,151	165,174
2030	303,779	307,546	4,996,983	134,557	136,226
2031	260,186	263,412	5,149,679	110,285	111,652
2032	221,605	224,353	5,303,287	89,887	91,001
2033	188,043	190,375	5,470,998	72,989	73,894
2034	158,829	160,798	5,658,251	58,995	59,726
2035	133,425	135,079	5,704,705	47,425	48,013
2036	111,384	112,765	5,667,422	37,886	38,355
2037	92,472	93,619	5,618,402	30,099	30,472
2038	76,378	77,325	5,588,865	23,790	24,085
2039	62,780	63,558	5,550,300	18,712	18,944
2040	51,285	51,921	5,385,552	14,628	14,809
2041	41,507	42,022	5,128,436	11,329	11,469
2042	33,335	33,748	4,851,497	8,707	8,815
2043	26,658	26,988	4,614,288	6,663	6,745
Total	21,735,815	19,312,517	125,302,635	16,031,507	13,652,149
Grand Total	43,326,928	22,394,436	132,263,077	42,481,544	17,062,692
Minimum Required Loss Ratios 67.5% 85%					
Minimum PV Incurred Claims 28,675,042 14,503,288 43,178,330					
Dual Loss Ratio Test Met 65,176,185 > 43,178,330					

Lifetime Experience (Nationwide) as of 12/31/2014					
Lifetime Benefit Period - Post Stabilization Experience			Lifetime Benefit Period - Post Stabilization Experience		
Non-Interest Adjusted			Interest Adjusted		
VA Rate Level			VA Rate Level		
Year	Original Premium	Increased Premium	Incurred Claims	Original Premium	Increased Premium
1998	0	0	0	0	0
1999	0	0	0	0	0
2000	0	0	0	0	0
2001	13,893	0	0	25,170	0
2002	294,797	0	487	511,066	844
2003	1,597,074	0	0	2,649,491	0
2004	2,473,678	0	21,213	3,927,030	33,676
2005	2,593,563	0	204,578	3,940,048	310,788
2006	2,533,916	0	305,634	3,683,670	444,314
2007	2,498,942	302,197	1,844,329	3,476,389	420,400
2008	2,462,104	714,010	1,679,534	3,277,648	950,518
2009	2,413,851	700,017	302,627	3,075,035	891,760
2010	2,374,809	688,694	825,888	2,895,022	839,556
2011	2,334,484	677,000	2,574,587	2,723,316	789,762
2012	2,124,330	616,056	1,437,974	2,371,443	687,719
2013	1,946,519	1,066,943	2,436,980	2,079,376	1,139,766
2014	1,867,834	1,682,380	2,763,214	1,909,398	2,824,702
Total	27,529,796	6,447,298	14,397,044	36,544,103	7,439,298
2015	1,747,713	1,666,687	3,189,095	1,709,669	1,630,407
2016	1,632,147	1,556,478	3,426,848	1,527,864	1,457,030
2017	1,520,254	1,449,773	3,669,717	1,361,838	1,298,701
2018	1,413,250	1,347,730	3,915,895	1,211,468	1,155,303
2019	1,310,595	1,249,834	4,270,290	1,075,091	1,025,248
2020	1,212,074	1,155,880	4,672,496	951,457	907,347
2021	1,116,758	1,064,984	4,966,842	838,886	799,995
2022	1,025,150	977,623	5,325,446	736,911	702,747
2023	936,711	893,284	5,431,479	644,343	614,470
2024	853,847	814,261	5,442,316	562,050	535,993
2025	774,569	738,659	5,705,382	487,909	465,289
2026	696,549	664,256	5,969,168	419,869	400,404
2027	629,089	599,924	6,212,211	362,876	346,053
2028	567,304	541,003	6,418,760	313,145	298,627
2029	510,047	486,401	6,610,451	269,417	256,926
2030	456,850	435,670	6,816,438	230,925	220,219
2031	407,413	388,525	6,948,395	197,068	187,932
2032	361,860	345,084	7,075,717	167,497	159,731
2033	319,816	304,989	7,053,149	141,660	131,249
2034	281,603	268,547	6,928,771	119,363	113,829
2035	247,152	235,694	6,907,105	100,249	95,601
2036	215,735	205,734	6,852,880	83,738	79,856
2037	187,365	178,679	6,755,805	69,594	66,368
2038	161,964	154,455	6,597,647	57,569	54,900
2039	139,413	132,950	6,362,857	47,419	45,221
2040	119,439	113,902	6,081,924	38,876	37,074
2041	101,719	97,004	5,766,708	31,683	30,214
2042	86,131	82,138	5,451,362	25,672	24,482
2043	72,454	69,095	5,089,140	20,666	19,707
Total	19,104,970	18,219,240	165,919,594	13,804,772	13,164,766
Grand Total	46,634,766	24,666,538	180,316,638	50,348,876	26,604,064
Minimum Required Loss Ratios 67.5% 85%					
Minimum PV Incurred Claims 33,985,491 17,513,454 51,498,945					
Dual Loss Ratio Test Met 105,328,563 > 51,498,945					

Lifetime Experience (Nationwide) as of 12/31/2016						
Lifetime Benefit Period - Post Stabilization Experience						
Non-Interest Adjusted				Interest Adjusted		
	VA Rate Level					
Year	Original Premium	Increased Premium	Incurred Claims	Original Premium	Increased Premium	Incurred Claims
1998	0	0	0	0	0	0
1999	0	0	0	0	0	0
2000	0	0	0	0	0	0
2001	13,893	0	0	27,486	0	0
2002	294,797	0	487	558,097	0	922
2003	1,597,074	0	0	2,893,311	0	0
2004	2,473,678	0	21,213	4,288,415	0	36,775
2005	2,593,563	0	204,578	4,302,631	0	339,388
2006	2,533,916	0	305,634	4,022,659	0	485,202
2007	2,498,922	302,122	1,613,672	3,795,362	458,973	2,451,434
2008	2,459,984	713,395	1,541,097	3,576,191	1,037,095	2,240,364
2009	2,412,119	699,515	360,417	3,355,606	973,126	501,391
2010	2,373,634	688,354	1,228,367	3,159,873	916,363	1,635,249
2011	2,333,309	676,660	2,158,778	2,972,432	862,005	2,750,094
2012	2,123,449	615,800	1,596,723	2,588,601	750,694	1,946,498
2013	1,946,519	1,066,943	1,799,433	2,270,731	1,244,653	2,099,147
2014	1,867,834	1,682,380	3,246,046	2,085,110	1,878,083	3,623,643
2015	1,787,926	1,810,096	2,858,807	1,909,959	1,933,642	3,053,931
2016	1,537,157	1,556,217	3,611,461	1,571,362	1,590,847	3,691,825
Total	30,847,174	9,811,483	20,546,713	43,377,825	11,645,482	24,855,858
2017	1,425,836	1,443,516	3,729,446	1,394,798	1,412,094	3,648,264
2018	1,320,387	2,133,904	3,964,610	1,236,024	1,997,562	3,711,299
2019	1,219,989	2,450,393	4,301,277	1,092,861	2,195,053	3,853,068
2020	1,123,267	2,256,125	4,719,597	962,889	1,933,999	4,045,739
2021	1,031,078	2,070,960	5,030,363	845,801	1,698,824	4,126,445
2022	942,124	1,892,292	5,414,685	739,552	1,485,418	4,250,438
2023	858,802	1,724,956	5,515,268	645,115	1,295,738	4,142,960
2024	780,881	1,568,428	5,536,868	561,323	1,127,438	3,980,082
2025	708,386	1,422,821	5,814,815	487,284	978,728	3,999,885
2026	640,898	1,287,268	6,095,202	421,875	847,353	4,012,207
2027	578,045	1,161,025	6,358,189	364,117	731,342	4,005,091
2028	519,820	1,044,077	6,586,947	313,340	629,354	3,970,515
2029	465,840	935,657	6,806,441	268,709	539,713	3,926,146
2030	415,749	835,048	7,034,521	229,489	460,937	3,882,975
2031	369,588	742,332	7,190,450	195,223	392,114	3,798,131
2032	326,846	656,483	7,346,195	165,212	331,834	3,713,299
2033	288,121	578,702	7,340,680	139,666	279,922	3,550,729
2034	253,425	509,013	7,205,423	117,304	235,610	3,335,219
2035	221,955	445,806	7,148,030	98,314	197,467	3,166,176
2036	193,465	388,582	7,097,772	82,004	164,708	3,008,530
2037	167,825	337,084	7,034,479	68,073	136,727	2,853,303
2038	144,945	291,127	6,906,734	56,260	113,001	2,680,850
2039	124,584	250,232	6,696,674	46,275	92,945	2,487,383
2040	106,459	213,826	6,434,822	37,840	76,002	2,287,198
2041	90,496	181,766	6,132,373	30,781	61,825	2,085,833
2042	76,410	153,473	5,826,066	24,871	49,953	1,896,313
2043	64,157	128,861	5,461,355	19,983	40,137	1,701,056
2044	53,719	107,896	5,015,651	16,011	32,159	1,494,959
2045	44,691	89,763	4,586,231	12,747	25,603	1,308,102
2046	37,494	74,454	4,165,633	10,498	20,280	1,136,974
2047	30,506	61,273	3,768,467	7,968	16,004	984,278
2048	25,019	50,251	3,383,056	6,253	12,560	845,563
2049	20,417	41,008	3,002,230	4,883	9,808	718,066
2050	16,537	33,216	2,636,170	3,785	7,602	603,362
2051	13,317	26,747	2,295,023	2,917	5,858	502,661
2052	10,672	21,435	1,996,450	2,237	4,492	418,437
2053	8,473	17,019	1,721,447	1,699	3,413	345,262
2054	6,701	13,459	1,454,784	1,286	2,583	279,214
2055	5,248	10,540	1,217,445	964	1,936	223,600
2056	4,076	8,186	1,007,685	716	1,439	177,105
2057	3,158	6,342	833,829	531	1,067	140,238
2058	2,443	4,906	688,691	393	797	110,841
2059	1,871	3,759	562,273	288	579	86,597
2060	1,413	2,839	448,632	208	418	66,120
2061	1,057	2,123	349,375	149	299	49,274
2062	795	1,597	273,927	107	215	36,969
2063	596	1,197	217,653	77	155	28,110
2064	442	889	171,143	55	110	21,151
2065	322	648	131,979	38	77	15,609
2066	231	465	98,012	26	53	11,092
2067	164	330	72,892	18	36	7,894
2068	108	217	54,860	11	22	5,685
2069	64	129	41,345	6	13	4,007
2070	0	0	29,756	0	0	2,824
2071	0	0	5	0	0	0
2072	0	0	0	0	0	0
2073	0	0	0	0	0	0
Total	14,748,423	27,684,295	204,953,929	10,718,156	19,653,375	101,743,223
Grand Total	45,595,597	37,495,778	225,500,642	54,095,981	31,298,857	126,599,081

Lifetime Experience (Nationwide) as of 06/30/2012

All Benefit Periods Combined - Post Stabilization Experience								
Non-Interest Adjusted			Interest Adjusted					
Year	Original Premium	Increased Premium	Incurred Claims	Original Premium	Increased Premium	Incurred Claims		
1998	0	0	0	0	0	0		
1999	0	0	0	0	0	0		
2000	0	0	0	0	0	0		
2001	19,458	0	0	30,889	0	0		
2002	419,525	0	509	637,327	0	773		
2003	2,556,274	0	0	3,716,172	0	0		
2004	4,349,613	0	246,733	6,050,939	0	343,241		
2005	4,701,633	0	402,025	6,258,995	0	535,191		
2006	4,586,671	0	928,139	5,843,018	0	1,182,368		
2007	4,455,685	538,826	2,167,352	5,431,725	656,858	2,642,122		
2008	4,345,162	1,260,097	1,831,618	5,068,892	1,469,979	2,136,692		
2009	4,244,791	1,230,989	952,934	4,738,567	1,374,184	1,063,784		
2010	4,134,096	1,198,888	1,821,411	4,416,263	1,280,716	1,945,729		
2011	4,016,590	1,164,811	3,426,275	4,105,969	1,190,721	3,502,518		
Total	37,829,496	5,393,611	11,776,995	46,298,756	5,972,469	13,352,417		
2012	3,716,180	1,077,692	1,922,439	3,635,286	1,054,233	1,880,591		
2013	3,438,239	1,760,544	2,173,867	3,218,560	1,648,058	2,034,973		
2014	3,181,873	2,451,812	2,514,972	2,850,310	2,196,224	2,252,002		
2015	2,938,484	2,480,933	2,670,566	2,518,932	2,126,709	2,289,267		
2016	2,702,800	2,281,910	2,892,900	2,217,127	1,871,868	2,373,068		
2017	2,476,593	2,090,837	3,137,560	1,944,084	1,641,272	2,462,932		
2018	2,260,088	1,907,898	3,401,683	1,697,733	1,433,175	2,555,277		
2019	2,054,717	1,734,363	3,687,963	1,476,908	1,246,717	2,651,029		
2020	1,860,353	1,570,127	3,961,503	1,279,696	1,080,056	2,725,032		
2021	1,675,639	1,414,016	4,247,381	1,103,091	930,785	2,795,867		
2022	1,501,879	1,267,159	4,561,897	946,050	798,197	2,873,588		
2023	1,341,298	1,131,451	4,899,732	808,515	682,022	2,953,486		
2024	1,192,090	1,005,445	5,332,196	687,689	579,969	3,075,760		
2025	1,051,543	886,654	5,615,463	580,440	489,423	3,099,671		
2026	924,070	778,975	5,943,972	488,111	411,469	3,139,717		
2027	809,594	682,263	6,300,075	409,228	344,865	3,184,514		
2028	706,007	594,768	6,648,931	341,500	287,692	3,216,126		
2029	612,677	515,950	7,024,553	283,593	238,821	3,251,406		
2030	528,811	445,145	7,328,932	234,233	197,174	3,246,305		
2031	453,642	381,704	7,537,818	192,285	161,793	3,195,052		
2032	387,009	325,492	7,738,714	156,977	132,025	3,138,953		
2033	328,936	276,526	7,962,564	127,677	107,334	3,090,670		
2034	278,315	233,840	8,212,924	103,376	86,864	3,050,572		
2035	234,220	196,713	8,256,310	83,251	69,920	2,934,629		
2036	195,874	164,428	8,168,529	66,624	55,928	2,778,400		
2037	162,906	136,687	8,063,289	53,024	44,490	2,624,502		
2038	134,793	113,044	7,994,668	41,984	35,210	2,490,111		
2039	111,008	93,048	7,921,317	33,087	27,734	2,361,019		
2040	90,864	76,122	7,660,638	25,917	21,712	2,184,996		
2041	73,681	61,695	7,268,987	20,111	16,839	1,984,007		
2042	59,283	49,615	6,827,874	15,484	12,959	1,783,359		
2043	47,487	39,725	6,456,112	11,869	9,929	1,613,645		
Total	37,531,054	28,226,600	184,336,128	27,652,749	20,041,564	85,291,424		

Grand Total	75,360,550	33,620,211	196,113,123	73,951,506	26,014,033	98,643,841		
Minimum Required Loss Ratios 67.8% 85%								
Minimum PV Incurred Claims 50,139,121 22,111,928 72,251,049								
Dual Loss Ratio Test Met 98.643,841 > 72,251,049								

Lifetime Experience (Nationwide) as of 12/31/2013

All Benefit Periods Combined - Post Stabilization Experience								
Non-Interest Adjusted				Interest Adjusted				
	VA Rate Level							
Year	Original Premium	Increased Premium	Incurred Claims	Original Premium	Increased Premium	Incurred Claims		
1998	0	0	0	0	0	0	0	0
1999	0	0	0	0	0	0	0	0
2000	0	0	0	0	0	0	0	0
2001	19,458	0	0	35,250	0	0	0	0
2002	419,525	0	487	727,296	0	844	0	844
2003	2,556,274	0	0	4,240,770	0	0	0	0
2004	4,349,613	0	230,450	6,905,127	0	365,846	0	365,846
2005	4,701,633	0	270,443	7,142,554	0	410,847	0	410,847
2006	4,586,671	0	841,404	6,667,854	0	1,223,188	0	1,223,188
2007	4,455,685	538,826	2,192,027	6,198,500	749,585	3,049,426	0	3,049,426
2008	4,345,162	1,260,097	2,109,573	5,784,447	1,677,490	2,808,345	0	2,808,345
2009	4,244,791	1,230,989	955,415	5,407,492	1,568,173	1,217,115	0	1,217,115
2010	4,134,096	1,198,888	1,918,898	5,039,690	1,461,510	2,339,242	0	2,339,242
2011	4,016,590	1,164,811	3,156,860	4,685,993	1,358,822	3,682,666	0	3,682,666
2012	3,681,292	1,067,575	2,668,140	4,109,519	1,191,761	2,978,512	0	2,978,512
2013	3,424,550	1,749,921	4,092,386	3,658,288	1,869,359	4,371,706	0	4,371,706
2014	3,277,000	2,514,257	4,250,252	3,349,921	2,570,206	4,344,830	0	4,344,830
Total	48,212,338	10,725,364	22,686,334	63,952,300	12,446,905	26,792,567	0	26,792,567
2015	3,038,941	2,439,072	4,723,954	2,972,789	2,385,978	4,621,123	0	4,621,123
2016	2,813,696	2,263,256	5,020,019	2,633,921	2,118,650	4,699,276	0	4,699,276
2017	2,599,826	2,095,550	5,318,343	2,328,914	1,877,186	4,764,152	0	4,764,152
2018	2,398,346	1,937,113	5,614,541	2,056,085	1,660,534	4,812,904	0	4,812,904
2019	2,207,834	1,786,543	6,052,085	1,811,102	1,465,515	4,964,571	0	4,964,571
2020	2,027,389	1,643,585	6,335,379	1,591,467	1,290,186	5,130,163	0	5,130,163
2021	1,854,704	1,506,407	6,884,303	1,393,217	1,131,583	5,171,352	0	5,171,352
2022	1,690,422	1,375,574	7,330,226	1,215,131	988,808	5,269,206	0	5,269,206
2023	1,533,462	1,250,247	7,397,432	1,084,835	860,018	5,088,532	0	5,088,532
2024	1,387,580	1,133,529	7,359,959	913,384	746,153	4,844,742	0	4,844,742
2025	1,250,475	1,023,336	7,644,965	787,688	644,610	4,815,645	0	4,815,645
2026	1,119,171	917,060	7,933,010	674,620	552,790	4,781,902	0	4,781,902
2027	1,002,829	823,487	8,193,388	578,460	475,010	4,726,176	0	4,726,176
2028	896,442	737,886	8,402,138	494,826	407,305	4,637,884	0	4,637,884
2029	798,731	659,085	8,592,229	421,904	348,141	4,538,576	0	4,538,576
2030	709,015	586,510	8,773,108	358,588	296,464	4,434,565	0	4,434,565
2031	626,708	519,702	8,880,977	303,142	251,383	4,295,779	0	4,295,779
2032	551,715	458,651	8,979,253	255,376	212,299	4,156,283	0	4,156,283
2033	483,338	402,805	8,882,586	214,092	178,420	3,934,486	0	3,934,486
2034	421,871	352,453	8,667,574	178,818	149,394	3,673,922	0	3,673,922
2035	366,900	307,324	8,575,530	148,821	124,656	3,478,380	0	3,478,380
2036	317,427	266,563	8,447,392	123,209	103,467	3,278,857	0	3,278,857
2037	273,280	230,071	8,272,989	101,506	85,456	3,072,882	0	3,072,882
2038	234,164	197,644	8,032,046	83,231	70,251	2,854,916	0	2,854,916
2039	199,763	169,050	7,702,974	67,946	57,500	2,620,048	0	2,620,048
2040	169,615	143,916	7,317,583	55,208	46,843	2,381,783	0	2,381,783
2041	143,196	121,814	6,901,207	44,601	37,942	2,149,529	0	2,149,529
2042	120,218	102,528	6,485,615	35,832	30,559	1,933,095	0	1,933,095
2043	100,284	85,742	6,023,486	28,603	24,456	1,718,042	0	1,718,042
Total	31,337,542	25,536,500	214,944,290	22,927,117	18,621,555	116,848,770	0	116,848,770
Grand Total	79,549,880	36,261,864	237,630,624	86,879,417	31,068,460	143,631,337	0	143,631,337

Grand Total	79,549,880	36,261,864	237,630,624	86,879,417	31,068,460	143,641,337		
Minimum Required Loss Ratios 67.8% 85%								
Minimum PV Incurred Claims 58,904,245 26,408,191 85,312,436								
Dual Loss Ratio Test Met 143,641,337 > 85,312,436								

Lifetime Experience (Nationwide) as of 12/31/2016

All Benefit Periods Combined - Post Stabilization Experience								
Non-Interest Adjusted				Interest Adjusted				
Year	Original Premium	Increased Premium	Incurred Claims	Original Premium	Increased Premium	Incurred Claims		
1998	0	0	0	0	0	0		
1999	0	0	0	0	0	0		
2000	0	0	0	0	0	0		
2001	19,458	0	0	38,494	0	0		
2002	419,525	0	485	794,225	0	922		
2003	2,556,274	0	0	4,631,026	0	0		
2004	4,349,613	0	230,450	7,540,571	0	399,512		
2005	4,701,633	0	270,443	7,799,847	0	448,656		
2006	4,586,671	0	841,404	7,281,463	0	1,335,751		
2007	4,455,064	538,751	1,961,370	6,767,975	818,451	2,979,644		
2008	4,343,042	1,259,482	1,971,136	6,313,679	1,830,967	2,865,531		
2009	4,243,059	1,230,487	1,014,654	5,902,707	1,711,785	1,411,529		
2010	4,132,921	1,198,547	2,512,545	5,501,903	1,595,552	3,344,797		
2011	4,015,415	1,164,470	2,781,122	5,113,287	1,483,433	3,542,906		
2012	3,880,411	1,067,311	2,291,905	4,488,204	1,301,121	3,415,908		
2013	3,424,550	1,749,921	3,254,050	3,994,942	2,041,387	3,796,043		
2014	3,277,000	2,514,257	4,528,856	3,565,677	2,806,729	5,055,676		
2015	3,144,086	2,639,345	4,164,454	3,358,682	2,819,490	4,448,694		
2016	2,973,589	2,434,550	5,885,851	3,039,738	2,488,724	6,016,805		
Total	54,322,399	15,797,129	32,218,896	76,225,381	18,897,639	59,062,574		
2017	2,731,276	2,241,751	6,171,046	2,671,821	2,192,953	6,036,714		
2018	2,506,781	2,859,346	4,745,838	2,346,616	2,666,654	6,062,079		
2019	2,297,649	3,108,982	6,061,555	2,276,038	2,726,354	6,286,365		
2020	2,098,058	2,852,179	7,460,940	1,708,501	2,474,640	6,395,677		
2021	1,911,146	2,609,093	7,868,066	1,567,727	2,140,259	6,454,234		
2022	1,732,708	2,375,709	8,376,107	1,376,147	1,864,892	6,575,104		
2023	1,566,410	2,157,616	8,435,731	1,176,656	1,620,758	6,336,754		
2024	1,411,714	1,954,161	8,404,766	1,011,786	1,404,716	6,043,748		
2025	1,268,868	1,765,538	7,824,455	872,827	1,214,475	6,001,362		
2026	1,137,090	1,590,673	9,048,836	748,497	1,047,071	5,956,456		
2027	1,053,553	1,428,548	9,346,527	639,708	899,857	5,887,477		
2028	904,085	1,279,089	9,590,405	544,975	770,992	5,780,955		
2029	802,029	1,124,226	9,814,787	462,633	658,291	5,661,441		
2030	708,640	1,014,141	10,028,988	391,161	559,794	5,535,887		
2031	623,673	897,697	10,163,201	329,436	474,180	5,368,393		
2032	546,183	790,601	10,287,961	276,081	399,627	5,200,281		
2033	476,828	694,096	10,188,104	230,645	335,735	4,928,043		
2034	415,229	607,951	9,923,122	192,200	281,406	4,593,224		
2035	360,109	530,282	9,754,113	159,038	234,885	4,320,524		
2036	307,869	460,364	9,601,381	131,764	195,134	4,009,734		
2037	261,056	397,766	9,441,033	108,326	161,341	3,829,442		
2038	228,405	342,196	9,204,167	88,656	132,810	3,572,634		
2039	194,407	292,926	8,865,212	72,210	108,803	3,292,855		
2040	164,542	249,342	8,456,301	58,485	88,626	3,005,714		
2041	138,561	211,155	8,007,904	47,129	71,821	2,723,766		
2042	115,928	177,637	7,554,492	37,733	57,819	2,458,894		
2043	96,465	148,611	7,040,212	30,466	46,290	2,192,832		
2044	79,977	123,952	6,435,490	23,838	36,945	1,918,155		
2045	65,891	102,726	5,851,506	18,794	29,300	1,668,989		
2046	54,041	84,742	5,283,842	14,750	23,130	1,407,593		
2047	44,129	69,603	4,752,407	11,526	18,179	1,241,271		
2048	35,847	56,871	4,243,459	8,900	14,215	1,090,613		
2049	28,954	46,228	3,746,679	6,925	11,057	896,122		
2050	23,211	37,296	3,327,393	5,312	8,536	748,979		
2051	18,807	29,921	2,834,860	4,053	6,553	620,897		
2052	14,699	24,518	2,381,081	3,081	5,138	513,882		
2053	11,581	18,919	2,103,539	2,323	3,795	421,897		
2054	9,076	14,912	1,771,282	1,742	2,862	339,959		
2055	7,033	11,632	1,476,494	1,292	2,136	271,178		
2056	5,406	9,000	1,217,179	950	1,582	213,925		
2057	4,153	6,951	1,002,598	698	1,169	168,623		
2058	3,186	5,361	824,464	513	863	132,692		
2059	2,420	4,094	670,440	373	631	103,257		
2060	1,809	3,080	533,683	267	454	78,655		
2061	1,336	2,264	414,824	188	328	58,504		
2062	996	1,719	323,727	132	232	43,691		
2063	743	1,287	256,221	96	166	33,091		
2064	548	953	200,994	68	118	24,840		
2065	397	693	154,769	47	82	18,304		
2066	282	496	114,862	32	56	13,000		
2067	200	352	85,190	22	38	9,226		
2068	132	232	63,992	14	24	6,632		
2069	74	135	48,094	7	13	4,770		
2070	1	0	34,578	0	0	3,282		
2071	0	0	3,315	0	0	301		
2072	0	0	0	0	0	0		
2073	0	0	0	0	0	0		
Total	26,444,299	50,833,499	285,337,350	19,521,964	25,036,621	146,547,502		
Grand Total	80,766,608	104,655,998	571,556,247	95,747,344	43,934,960	288,690,876		

Lifetime Experience (Nationwide) as of 12/31/2016

Non-Lifetime Benefit Periods - Pre-Stabilization Experience

Year	Non-Interest Adjusted			Interest Adjusted		
	Original Premium	VA Rate Level Increased Premium	Incurred Claims	Original Premium	VA Rate Level Increased Premium	Incurred Claims
1997	493,144	0	0	1,163,432	0	0
1998	2,879,303	0	107,337	6,500,380	0	242,326
1999	5,164,376	0	620,403	11,157,140	0	1,340,321
2000	8,538,676	0	1,279,039	17,652,627	0	2,644,250
2001	13,291,034	0	2,429,334	26,294,279	0	4,806,066
2002	19,718,256	0	4,609,517	37,329,718	0	8,726,531
2003	26,161,646	0	3,660,231	47,395,268	0	6,630,991
2004	26,346,243	0	5,771,160	45,674,344	0	10,004,992
2005	26,128,236	0	8,629,972	43,345,840	0	14,316,825
2006	25,202,065	0	8,814,082	40,008,952	0	13,992,591
2007	24,180,820	2,375,740	11,678,078	36,734,640	3,609,140	17,740,920
2008	23,092,348	5,455,520	13,342,930	33,570,404	7,930,939	19,397,229
2009	21,968,158	5,202,555	15,858,480	30,560,877	7,237,505	22,061,434
2010	20,871,914	4,947,543	17,408,466	27,785,497	6,586,360	23,174,821
2011	19,787,216	4,702,852	20,794,851	25,207,182	5,991,023	26,490,820
2012	19,741,981	4,711,682	25,050,446	24,066,560	5,743,799	30,537,872
2013	19,064,116	7,733,981	24,236,077	22,239,432	9,022,151	28,272,834
2014	18,047,452	9,564,271	24,831,729	20,146,826	10,676,837	27,720,285
2015	17,591,371	9,726,721	27,001,863	18,792,049	10,390,607	28,844,842
2016	17,436,256	9,712,107	34,148,099	17,824,255	9,928,225	34,907,977
Total	355,704,611	64,132,973	250,272,094	533,449,703	77,116,586	321,853,927
2017	15,805,260	8,803,632	27,636,882	15,461,210	8,611,994	27,035,282
2018	14,325,310	7,979,290	28,416,518	13,410,025	7,469,470	26,600,906
2019	12,968,744	7,223,674	29,611,006	11,617,353	6,470,941	26,525,430
2020	11,702,092	6,518,141	30,735,018	10,031,283	5,587,489	26,346,714
2021	10,531,170	5,865,930	31,622,766	8,638,798	4,811,866	25,940,393
2022	9,430,165	5,252,663	32,784,022	7,402,522	4,123,252	25,734,909
2023	8,411,290	4,685,143	32,382,296	6,318,394	3,519,386	24,324,938
2024	7,471,404	4,161,620	31,821,503	5,370,689	2,991,509	22,874,337
2025	6,613,726	3,683,888	32,100,913	4,549,438	2,534,066	22,081,518
2026	5,833,520	3,249,309	32,393,466	3,839,954	2,138,879	21,323,214
2027	5,124,353	2,854,297	32,599,205	3,227,884	1,797,952	20,534,586
2028	4,483,728	2,497,465	32,613,782	2,702,725	1,505,435	19,659,109
2029	3,907,611	2,176,564	32,495,597	2,254,019	1,255,503	18,744,372
2030	3,391,211	1,888,926	32,191,361	1,871,910	1,042,666	17,769,263
2031	2,930,771	1,632,459	31,791,974	1,548,088	862,295	16,793,116
2032	2,520,826	1,404,116	31,314,292	1,274,208	709,742	15,828,512
2033	2,160,963	1,203,670	30,248,034	1,045,270	582,222	14,631,147
2034	1,846,142	1,028,313	28,846,686	854,535	475,982	13,352,447
2035	1,570,480	874,767	27,601,218	695,634	387,473	12,225,789
2036	1,329,580	740,585	26,458,888	563,569	313,911	11,215,120
2037	1,119,908	623,796	25,380,908	454,253	253,022	10,294,925
2038	938,449	522,722	24,177,026	364,259	202,895	9,384,316
2039	782,185	435,682	22,768,954	290,531	161,828	8,457,199
2040	648,105	360,998	21,186,398	230,363	128,314	7,530,508
2041	534,258	297,585	19,606,995	181,720	101,219	6,669,019
2042	437,740	243,824	18,018,887	142,479	79,362	5,864,926
2043	356,651	198,657	16,419,637	111,087	61,876	5,114,249
2044	288,816	160,872	14,741,503	86,084	47,949	4,393,835
2045	232,228	129,352	13,110,603	66,237	36,894	3,739,456
2046	185,880	103,536	11,561,286	50,734	28,259	3,155,554
2047	148,063	82,472	10,149,439	38,672	21,541	2,650,911
2048	117,209	65,286	8,853,963	29,295	16,318	2,212,965
2049	92,025	51,258	7,641,022	22,010	12,260	1,827,562
2050	71,604	39,884	6,515,510	16,389	9,129	1,491,258
2051	55,414	30,866	5,514,288	12,137	6,760	1,207,751
2052	42,748	23,811	4,640,354	8,960	4,991	972,574
2053	32,770	18,253	3,883,863	6,572	3,661	778,967
2054	24,854	13,844	3,209,977	4,770	2,657	616,086
2055	18,556	10,336	2,619,423	3,408	1,898	481,092
2056	13,729	7,647	2,113,521	2,413	1,344	371,461
2057	10,163	5,661	1,699,948	1,709	952	285,908
2058	7,504	4,180	1,365,341	1,208	673	219,743
2059	5,474	3,049	1,085,897	843	470	167,242
2060	3,896	2,170	852,813	574	320	125,688
2061	2,719	1,514	655,912	383	214	92,506
2062	1,920	1,070	499,460	259	144	67,408
2063	1,380	769	386,898	178	99	49,968
2064	984	548	299,650	122	68	37,033
2065	688	383	228,822	81	45	27,062
2066	468	261	169,082	53	29	19,136
2067	325	181	123,691	35	20	13,396
2068	218	121	91,921	23	13	9,526
2069	88	49	67,772	9	5	6,721
2070	6	4	48,386	1	0	4,592
2071	0	0	33,070	0	0	3,003
2072	0	0	4	0	0	0
2073	0	0	0	0	0	0
Total	138,535,365	77,165,094	865,387,654	104,805,360	58,377,263	487,884,646
Grand Total	494,239,976	141,298,067	1,115,659,748	638,255,064	135,493,849	809,738,573

Minimum Required Loss Ratios	61.9%	80%
Minimum PV Incurred Claims	395,079,884	503,474,964
Dual Loss Ratio Test Met	809,738,573	>

Lifetime Experience (Nationwide) as of 12/31/2016

Lifetime Benefit Period - Pre-Stabilization Experience

Year	Non-Interest Adjusted			Interest Adjusted		
	Original Premium	VA Rate Level Increased Premium	Incurred Claims	Original Premium	VA Rate Level Increased Premium	Incurred Claims
1997	379,977	0	0	896,447	0	0
1998	2,595,131	0	229,543	5,858,826	0	518,221
1999	5,659,399	0	581,891	12,226,592	0	1,257,120
2000	11,774,776	0	1,523,173	24,342,851	0	3,148,966
2001	20,596,912	0	4,549,954	40,747,841	0	9,001,389
2002	30,490,543	0	5,455,216	57,723,330	0	10,327,570
2003	39,924,279	0	9,776,788	72,328,091	0	17,711,939
2004	40,127,736	0	13,187,176	69,566,202	0	22,861,538
2005	39,955,932	0	16,226,697	66,285,511	0	26,919,529
2006	39,035,372	0	15,302,440	61,969,697	0	24,293,033
2007	38,080,489	4,037,414	21,894,757	57,850,522	6,133,495	33,261,735
2008	37,083,250	9,448,086	31,010,819	53,909,619	13,735,116	45,081,847
2009	35,962,664	9,175,958	29,943,118	50,029,255	12,765,081	41,655,198
2010	34,772,654	8,889,439	43,806,976	46,290,698	11,833,964	58,317,535
2011	32,165,428	8,226,381	46,122,333	40,975,940	10,479,689	58,755,816
2012	28,087,687	7,163,021	46,658,968	34,240,435	8,732,117	56,879,849
2013	25,432,785	12,850,857	48,844,490	29,668,865	14,991,294	56,980,019
2014	24,182,135	20,513,719	40,198,060	26,995,126	22,899,982	44,874,107
2015	21,826,988	20,862,928	45,730,248	23,316,762	22,286,901	48,851,510
2016	19,033,110	18,176,366	48,433,867	19,456,643	18,580,834	49,511,638
Total	527,167,248	119,344,168	469,476,515	794,679,255	142,438,472	610,208,562
2017	17,616,448	16,823,473	42,193,074	17,232,973	16,457,259	41,274,614
2018	16,275,618	25,088,583	44,812,166	15,235,723	23,485,602	41,948,989
2019	15,000,806	28,842,125	48,419,978	13,437,667	25,836,670	43,374,438
2020	13,773,997	26,483,333	52,866,944	11,807,364	22,702,079	45,318,673
2021	12,606,793	24,239,144	56,232,539	10,341,447	19,883,552	46,127,975
2022	11,483,532	22,079,445	60,253,140	9,014,380	17,331,995	47,297,707
2023	10,433,249	20,060,060	61,370,608	7,837,250	15,068,719	46,100,383
2024	9,452,096	18,173,593	61,808,534	6,794,476	13,063,773	44,429,995
2025	8,542,793	16,425,272	64,696,069	5,876,401	11,298,586	44,503,014
2026	7,699,091	14,803,081	67,610,519	5,067,978	9,744,226	44,505,072
2027	6,915,639	13,296,734	70,353,930	4,356,235	8,375,754	44,316,690
2028	6,192,076	11,905,536	72,742,987	3,732,493	7,176,482	43,848,404
2029	5,524,279	10,621,559	74,978,474	3,186,559	6,126,813	43,249,687
2030	4,907,081	9,434,870	77,268,721	2,708,653	5,207,940	42,651,450
2031	4,340,991	8,346,445	78,840,270	2,292,993	4,408,748	41,644,907
2032	3,819,335	7,343,454	80,346,493	1,930,569	3,711,914	40,612,940
2033	3,349,048	6,439,231	80,215,409	1,619,954	3,114,693	38,800,651
2034	2,928,963	5,631,531	78,807,595	1,355,747	2,606,702	36,478,166
2035	2,550,310	4,903,494	78,067,955	1,129,644	2,171,972	34,579,716
2036	2,209,221	4,247,681	77,388,940	936,422	1,800,463	32,802,824
2037	1,903,941	3,660,717	76,560,536	772,271	1,484,849	31,054,247
2038	1,632,930	3,139,642	75,029,404	633,822	1,218,652	29,122,674
2039	1,393,619	2,679,519	72,577,912	517,640	995,269	26,958,017
2040	1,182,234	2,273,087	69,572,431	420,214	807,948	24,728,875
2041	997,487	1,917,873	66,153,320	339,280	652,335	22,501,037
2042	835,714	1,606,831	62,671,060	272,015	523,004	20,398,660
2043	696,095	1,338,385	58,591,257	216,814	416,869	18,249,506
2044	578,036	1,111,392	53,748,501	172,289	331,260	16,020,216
2045	477,047	917,220	49,051,209	136,065	261,613	13,990,571
2046	391,674	753,074	44,458,757	106,904	205,545	12,134,636
2047	320,070	615,401	40,130,452	83,598	160,735	10,481,591
2048	260,080	500,057	35,943,278	65,005	124,985	8,983,685
2049	210,224	404,198	31,818,773	50,281	96,675	7,610,339
2050	168,660	324,284	27,874,097	38,603	74,222	6,379,771
2051	134,505	258,613	24,202,988	29,460	56,642	5,300,990
2052	106,691	205,134	20,991,863	22,361	42,994	4,399,696
2053	83,823	161,166	18,033,685	16,812	32,324	3,616,928
2054	65,581	126,092	15,203,525	12,587	24,201	2,917,987
2055	50,871	97,810	12,685,072	9,343	17,964	2,329,784
2056	39,154	75,282	10,457,274	6,881	13,231	1,837,913
2057	30,063	57,802	8,628,492	5,056	9,722	1,451,193
2058	23,077	44,371	7,107,878	3,714	7,141	1,143,968
2059	17,513	33,673	5,783,164	2,697	5,186	890,683
2060	13,150	25,284	4,598,691	1,938	3,726	677,759
2061	9,780	18,805	3,572,283	1,379	2,652	503,815
2062	7,308	14,051	2,797,678	986	1,896	377,578
2063	5,471	10,520	2,215,977	707	1,359	286,192
2064	4,039	7,766	1,739,406	499	960	214,970
2065	2,934	5,641	1,337,719	347	667	158,207
2066	2,103	4,043	990,079	238	458	112,050
2067	1,492	2,869	735,316	162	311	79,635
2068	983	1,890	552,194	102	196	57,227
2069	589	1,132	415,108	58	112	41,168
2070	3	6	298,193	0	1	28,299
2071	0	0	761	0	0	69
2072	0	0	6	0	0	1
2073	0	0	1	0	0	0
Total	177,268,308	317,582,277	2,235,802,685	129,835,053	227,149,647	1,118,906,233
Grand Total	704,435,555	436,926,446	2,705,279,200	924,514,307	369,588,119	1,729,114,794

Minimum Required Loss Ratios	61.9%	80%
Minimum PV Incurred Claims	572,274,356	295,670,495
Dual Loss Ratio Test Met	1,729,114,794	>
		867,944,851

Lifetime Experience (Nationwide) as of 12/31/2016

All Benefit Periods Combined - Pre-Stabilization Experience

Year	Non-Interest Adjusted			Interest Adjusted		
	Original Premium	VA Rate Level Increased Premium	Incurred Claims	Original Premium	VA Rate Level Increased Premium	Incurred Claims
1997	873,120	0	0	2,059,879	0	0
1998	5,474,434	0	336,880	12,359,207	0	760,548
1999	10,823,775	0	1,202,294	23,383,733	0	2,597,441
2000	20,313,452	0	2,802,212	41,995,479	0	5,793,217
2001	33,887,945	0	6,979,288	67,042,120	0	13,807,455
2002	50,208,799	0	10,064,733	95,053,048	0	19,054,101
2003	66,085,925	0	13,437,019	119,723,359	0	24,342,930
2004	66,473,979	0	18,958,336	115,240,546	0	32,866,530
2005	66,084,168	0	24,856,669	109,631,351	0	41,236,354
2006	64,237,437	0	24,116,522	101,978,649	0	38,285,624
2007	62,261,310	6,413,154	33,572,835	94,585,162	9,742,635	51,002,655
2008	60,175,598	14,903,606	44,353,749	87,480,023	21,666,055	64,479,076
2009	57,930,822	14,378,513	45,801,598	80,590,133	20,002,587	63,716,632
2010	55,644,568	13,836,982	61,215,442	74,076,195	18,420,323	81,492,357
2011	51,952,644	12,929,233	66,917,183	66,183,122	16,470,712	85,246,636
2012	47,829,667	11,874,703	71,709,414	58,306,996	14,475,916	87,417,721
2013	44,496,901	20,584,838	73,080,567	51,908,297	24,013,445	85,252,853
2014	42,229,587	30,077,990	65,029,789	47,141,952	33,576,819	72,594,392
2015	39,418,359	30,589,649	72,732,111	42,108,811	32,677,508	77,696,352
2016	36,469,366	27,888,473	82,581,966	37,280,898	28,509,059	84,419,614
Total	882,871,859	183,477,142	719,748,608	1,328,128,958	219,555,058	932,062,488
2017	33,421,708	25,627,104	69,829,956	32,694,183	25,069,253	68,309,896
2018	30,600,928	33,067,873	73,228,684	28,645,747	30,955,073	68,549,895
2019	27,969,550	36,065,800	78,030,984	25,055,020	32,307,611	69,899,868
2020	25,476,088	33,001,473	83,601,961	21,838,647	28,289,568	71,665,387
2021	23,137,963	30,105,074	87,855,305	18,980,245	24,695,418	72,068,368
2022	20,913,697	27,332,107	93,037,162	16,416,902	21,455,247	73,032,616
2023	18,844,539	24,745,203	93,752,904	14,155,644	18,588,106	70,425,322
2024	16,923,500	22,335,213	93,630,038	12,165,165	16,055,282	67,304,332
2025	15,156,519	20,109,160	96,796,982	10,425,839	13,832,652	66,584,532
2026	13,532,612	18,052,390	100,003,985	8,907,931	11,883,105	65,828,286
2027	12,039,991	16,151,031	102,953,135	7,584,119	10,173,706	64,851,276
2028	10,675,804	14,403,001	105,356,769	6,435,218	8,681,918	63,507,512
2029	9,431,890	12,798,124	107,474,071	5,440,578	7,382,317	61,994,059
2030	8,298,292	11,323,796	109,460,081	4,580,562	6,250,606	60,420,713
2031	7,271,762	9,978,903	110,632,245	3,841,081	5,271,044	58,438,023
2032	6,340,160	8,747,570	111,660,785	3,204,776	4,421,656	56,441,452
2033	5,510,010	7,642,901	110,463,443	2,665,223	3,696,915	53,431,797
2034	4,775,105	6,659,844	107,654,281	2,210,283	3,082,684	49,830,612
2035	4,120,790	5,778,262	105,669,173	1,825,278	2,559,445	46,805,505
2036	3,538,802	4,988,266	103,847,828	1,499,991	2,114,375	44,017,944
2037	3,023,849	4,284,513	101,941,444	1,226,524	1,737,871	41,349,173
2038	2,571,378	3,662,364	99,206,430	998,081	1,421,547	38,506,990
2039	2,175,804	3,115,201	95,346,866	808,171	1,157,096	35,415,215
2040	1,830,339	2,634,086	90,758,829	650,577	936,261	32,259,383
2041	1,531,745	2,215,459	85,760,315	521,000	753,554	29,170,055
2042	1,273,454	1,850,655	80,689,947	414,494	602,365	26,263,586
2043	1,052,746	1,537,042	75,010,894	327,900	478,745	23,363,755
2044	866,851	1,272,265	68,490,005	258,373	379,210	20,414,052
2045	709,275	1,046,573	62,161,813	202,302	298,507	17,730,027
2046	577,554	856,610	56,020,043	157,638	233,804	15,290,190
2047	468,133	697,873	50,279,891	122,271	182,276	13,132,502
2048	377,289	565,344	44,797,242	94,300	141,302	11,196,651
2049	302,248	455,456	39,459,796	72,291	108,935	9,437,900
2050	240,265	364,169	34,389,607	54,991	83,350	7,871,028
2051	189,919	289,479	29,717,276	41,596	63,402	6,508,741
2052	149,439	228,945	25,632,216	31,321	47,985	5,372,270
2053	116,592	179,419	21,917,548	23,384	35,985	4,395,896
2054	90,435	139,936	18,413,502	17,357	26,858	3,534,073
2055	69,427	108,146	15,304,495	12,751	19,863	2,810,877
2056	52,883	82,929	12,570,794	9,294	14,575	2,209,374
2057	40,226	63,463	10,328,440	6,765	10,674	1,737,101
2058	30,582	48,551	8,473,219	4,922	7,814	1,363,711
2059	22,987	36,722	6,869,061	3,540	5,656	1,057,925
2060	17,046	27,454	5,451,504	2,512	4,046	803,448
2061	12,499	20,319	4,228,194	1,763	2,866	596,321
2062	9,228	15,121	3,297,138	1,245	2,041	444,986
2063	6,851	11,288	2,602,875	885	1,458	336,160
2064	5,023	8,314	2,039,056	621	1,028	252,003
2065	3,622	6,024	1,566,540	428	712	185,268
2066	2,570	4,303	1,159,161	291	487	131,186
2067	1,817	3,050	859,007	197	330	93,030
2068	1,201	2,012	644,115	124	208	66,754
2069	676	1,180	482,879	67	117	47,889
2070	9	10	346,579	1	1	32,891
2071	0	0	33,832	0	0	3,072
2072	0	0	10	0	0	1
2073	0	0	1	0	0	0
Total	315,803,673	394,747,371	3,101,190,339	234,640,413	285,526,910	1,606,790,879
Grand Total	1,198,675,532	578,224,513	3,820,938,948	1,562,769,371	505,081,968	2,538,853,367

Minimum Required Loss Ratios	61.9%	80%
Minimum PV Incurred Claims	967,354,241	404,065,574
Dual Loss Ratio Test Met	2,538,853,367	>
		1,371,419,815

MUTUAL of OMAHA INSURANCE COMPANY
Mutual of Omaha Plaza
Omaha, NE 68175
402 342 7600
mutualofomaha.com



[Date]

[Name]

[Address]

[City, State, ZIP]

Coverage ID: [CovID]

Dear [Name]:

Thank you for your continued confidence in Mutual of Omaha Insurance Company.

As you have requested, we have changed your benefit [EffDate], as listed below. Your new premium is [Amount], [Mode]. Please place this letter with your insurance contract for future reference.

Enclosed is Rider OPE4M which reflects the benefit changes you requested below. Rider OPE4M should be attached to your policy.

Base Policy:

[Revised Benefit Period]

Rider:

[Revised Benefit Period]

If you have any questions, please call us at 1-800-775-6000.

Sincerely,

Customer Service Department

MUTUAL of OMAHA INSURANCE COMPANY
Mutual of Omaha Plaza
Omaha, NE 68175
402 342 7600
mutualofomaha.com



[Date]

[Name]

[Address]

[City, State, ZIP]

Coverage ID: [CovID]

Dear [Name]:

Thank you for your continued confidence in Mutual of Omaha Insurance Company.

As you have requested, we have changed your benefit [EffDate], as listed below. Your new premium is [Amount], [Mode]. Please place this letter with your insurance contract for future reference.

Enclosed is Rider OPE4M which reflects the benefit changes you requested below. Rider OPE4M should be attached to your policy.

[Benefit Change]

If you have any questions, please call us at 1-800-775-6000.

Sincerely,

Customer Service Department

Statement of Variability (applicable to M1769 (LTC – VA), M1770 (LTC – VA) and M1771 LTC - VA)

Date – date the letter is sent out, month, day and year

Name – name of policyholder

Address – street address of policyholder

City, State, ZIP – city, state and zip code of policyholder

CovID – policy number of policyholder

EffDate – effective date of benefit change

Amount – new modal premium amount of policyholder based on the new benefit

Mode – annual, semi-annual, quarterly or monthly premium payment mode of policyholder

Revised Benefit Period – shows the new benefit period elected by the policyholder

Benefit Change – applies to any of the following benefit changes elected by the policyholder, which will read as follows:

- Benefit Period has been changed from XXXX to XXXX (minimum Benefit Period of 1 year)
- Elimination Period has been changed from XXXX to XXXX (maximum Elimination Period of 365 days)
- Daily Benefit has been changed from \$XXX to \$XX (minimum Daily Benefit of \$40)
- Contingent Benefit Upon Lapse option has been exercised in the amount of \$XXXXXX
- Non-Forfeiture Benefit has been exercised in the amount of \$XXXXXX
- The following rider has been removed and is no longer in force – (specific name of rider)

Form	Information	<u>Pre-Rate Stabilization</u>		<u>Post-Rate Stabilization</u>	
		Lifetime Benefit Period	Non-Lifetime Benefit Period	Lifetime Benefit Period	Non-Lifetime Benefit Period
LT50	Policy Count	1,225	1,731	0	0
	Annualized Premium	2,942,831	2,647,769	0	0
	Historical Loss Ratio @ 4.5%	66.7%	51.3%	0.0%	0.0%
NH50	Policy Count	568	612	0	0
	Annualized Premium	772,408	520,775	0	0
	Historical Loss Ratio @ 4.5%	90.8%	83.6%	0.0%	0.0%
HCA	Policy Count	299	650	4	10
	Annualized Premium	959,008	1,069,974	9,449	16,176
	Historical Loss Ratio @ 4.5%	58.6%	44.4%	223.7%	26.3%
NHA	Policy Count	5,211	6,192	567	711
	Annualized Premium	17,052,361	13,280,090	1,479,883	1,426,003
	Historical Loss Ratio @ 4.5%	81.4%	59.9%	63.8%	43.9%
LTA	Policy Count	8,181	6,397	619	495
	Annualized Premium	23,003,454	11,353,772	1,266,728	819,792
	Historical Loss Ratio @ 4.5%	40.1%	36.1%	32.3%	26.4%

Lifetime Loss Ratio**Pre-Rate Stabilization (original filed loss ratios)**

Form	Lifetime	Non-Lifetime	Total
LT50	64.1%	64.3%	64.2%
NH50	66.6%	66.7%	66.6%
HCA	62.6%	62.5%	62.6%
LTA	62.6%	62.7%	62.6%
NHA	62.5%	62.4%	62.4%

Post-Rate Stabilization w/MAE (original filed loss ratios)

Form	Lifetime	Non-Lifetime	Total
LT50	0.0%	0.0%	0.0%
NH50	0.0%	0.0%	0.0%
HCA	70.0%	69.4%	69.7%
LTA	69.0%	69.0%	69.0%
NHA	69.1%	68.6%	68.9%

Post-Rate Stabilization w/MAE (after rate increase)

Form	Lifetime	Non-Lifetime	Total
LT50	0.0%	0.0%	0.0%
NH50	0.0%	0.0%	0.0%
HCA	95.4%	39.5%	63.4%
LTA	100.2%	88.6%	96.5%
NHA	112.5%	85.9%	100.6%

Note: there is no HCA post-stabilization business in Virginia.

Original Lifetime Loss Ratio Weighted by Lifetime Projected Premium:

Pre	Lifetime	Non-Lifetime	Total
Survivorship	62.6%	62.7%	62.6%
Non-Survivorship	63.0%	63.1%	63.0%
Post w/ MAE	Lifetime	Non-Lifetime	Total
Survivorship	100.2%	88.6%	96.5%
Non-Survivorship	112.4%	85.4%	100.2%

Lifetime Original Projected Premium**Pre-Rate Stabilization**

Form	Lifetime	Non-Lifetime	Total
LT50	65,151,652	69,614,738	134,766,390
NH50	18,313,620	18,612,056	36,925,675
HCA	17,131,511	22,303,895	39,435,406
LTA	247,316,325	108,913,090	356,229,416
NHA	254,577,085	190,891,311	445,468,396

Post-Rate Stabilization

Form	Lifetime	Non-Lifetime	Total
LT50	0	0	0
NH50	0	0	0
HCA	154,103	216,770	370,873
LTA	13,766,247	7,977,292	21,743,539
NHA	18,340,274	18,023,225	36,363,499

Split	Lifetime	Non-Lifetime
Pre	62.8%	63.0%
Post	107.2%	86.4%

Note: The Post-Stabilization Loss Ratios with MAE reflect the increases that were implemented in Virginia in 2013 and 2014.

Lifetime Experience (Nationwide) as of 12/31/2016
Original Pricing Assumptions
Non-Lifetime Benefit Periods - Pre-Rate Stabilization

Year	Earned Premium	Incurred Claims	Loss Ratio
1997	493,144	76,315	15.5%
1998	2,850,981	567,251	19.9%
1999	4,940,761	1,195,620	24.2%
2000	8,090,305	2,319,624	28.7%
2001	12,386,480	3,908,967	31.6%
2002	18,277,514	6,039,824	33.0%
2003	24,468,885	8,732,797	35.7%
2004	25,150,225	10,211,476	40.6%
2005	23,451,315	10,943,906	46.7%
2006	20,994,532	11,282,924	53.7%
2007	18,599,893	11,328,442	60.9%
2008	16,332,409	11,159,186	68.3%
2009	14,259,211	11,030,704	77.4%
2010	12,370,692	10,799,827	87.3%
2011	10,661,038	10,449,947	98.0%
2012	9,124,738	10,149,328	111.2%
2013	7,755,222	9,308,409	120.0%
2014	6,544,480	8,352,352	127.6%
2015	5,483,460	7,525,557	137.2%
2016	4,562,154	6,813,229	149.3%
Total	246,797,438	152,195,685	61.7%
Interest Adjusted	394,153,646	221,624,315	56.2%
	<u>Earned Premium</u>	<u>Incurred Claims</u>	<u>Loss Ratio</u>
2017	3,769,989	6,128,115	162.5%
2018	3,095,056	5,478,811	177.0%
2019	2,524,535	4,883,544	193.4%
2020	2,046,318	4,330,991	211.6%
2021	1,648,943	3,819,472	231.6%
2022	1,321,600	3,349,667	253.5%
2023	1,054,215	2,920,457	277.0%
2024	837,248	2,536,323	302.9%
2025	662,175	2,193,169	331.2%
2026	521,642	1,887,053	361.8%
2027	409,349	1,617,012	395.0%
2028	320,059	1,379,725	431.1%
2029	249,376	1,172,059	470.0%
2030	193,685	991,076	511.7%
2031	150,026	834,407	556.2%
2032	115,950	699,967	603.7%
2033	89,475	585,524	654.4%
2034	68,983	488,792	708.6%
2035	53,181	407,613	766.5%
2036	40,944	338,257	826.1%
2037	31,147	274,277	880.6%
2038	23,229	215,425	927.4%
2039	17,221	167,801	974.4%
2040	12,856	131,698	1024.4%
2041	9,643	103,371	1071.9%
2042	7,209	79,500	1102.7%
2043	5,333	59,518	1116.1%
2044	3,921	43,919	1120.2%
2045	2,799	31,410	1122.3%
2046	1,882	21,141	1123.2%
2047	32	400	1250.7%
2048	0	0	0.0%
	<u>Earned Premium</u>	<u>Incurred Claims</u>	<u>Loss Ratio</u>
Past Experience @ 4.5%	394,153,646	221,624,315	56.2%
Anticipated Experience @ 4.5%	16,181,444	36,853,962	227.8%
Lifetime Experience @ 4.5%	410,335,091	258,478,277	63.0%

Lifetime Experience (Nationwide) as of 12/31/2016
Original Pricing Assumptions
Lifetime Benefit Period - Pre-Rate Stabilization

Year	Earned Premium	Incurred Claims	Loss Ratio
1997	379,977	57,729	15.2%
1998	2,572,294	492,136	19.1%
1999	5,423,663	1,232,923	22.7%
2000	11,221,729	3,035,347	27.0%
2001	19,297,278	5,750,611	29.8%
2002	28,054,997	9,045,213	32.2%
2003	36,977,173	12,990,712	35.1%
2004	37,911,177	15,282,244	40.3%
2005	34,962,650	16,305,380	46.6%
2006	31,128,653	16,729,799	53.7%
2007	27,529,227	16,777,159	60.9%
2008	24,149,679	16,500,206	68.3%
2009	21,057,711	16,361,588	77.7%
2010	18,242,238	16,100,039	88.3%
2011	15,695,644	15,591,171	99.3%
2012	13,409,902	15,046,166	112.2%
2013	11,375,070	13,830,510	121.6%
2014	9,579,057	12,338,319	128.8%
2015	8,008,053	11,032,428	137.8%
2016	6,646,706	9,943,350	149.6%
Total	363,622,876	224,443,029	61.7%
Interest Adjusted	579,204,216	326,054,113	56.3%
	<u>Earned Premium</u>	<u>Incurred Claims</u>	<u>Loss Ratio</u>
2017	5,478,415	8,909,326	162.6%
2018	4,485,082	7,934,584	176.9%
2019	3,647,508	7,041,211	193.0%
2020	2,947,438	6,213,590	210.8%
2021	2,367,504	5,452,823	230.3%
2022	1,891,355	4,759,516	251.6%
2023	1,503,667	4,133,051	274.9%
2024	1,190,107	3,576,076	300.5%
2025	937,962	3,080,341	328.4%
2026	736,288	2,639,387	358.5%
2027	575,733	2,252,237	391.2%
2028	448,539	1,913,620	426.6%
2029	348,228	1,618,899	464.9%
2030	269,495	1,363,289	505.9%
2031	208,003	1,142,912	549.5%
2032	160,201	954,712	595.9%
2033	123,200	795,090	645.4%
2034	94,679	660,775	697.9%
2035	72,770	548,523	753.8%
2036	55,910	453,787	811.6%
2037	42,664	369,627	866.4%
2038	32,149	294,667	916.6%
2039	24,128	233,233	966.6%
2040	18,178	184,906	1017.2%
2041	13,718	145,745	1062.4%
2042	10,323	112,673	1091.5%
2043	7,711	84,985	1102.1%
2044	5,768	63,615	1102.9%
2045	4,189	46,267	1104.4%
2046	2,824	31,243	1106.2%
2047	1,695	18,707	1103.9%
2048	9	107	1250.7%
	<u>Earned Premium</u>	<u>Incurred Claims</u>	<u>Loss Ratio</u>
Past Experience @ 4.5%	579,204,216	326,054,113	56.3%
Anticipated Experience @ 4.5%	23,285,977	52,563,187	225.7%
Lifetime Experience @ 4.5%	602,490,193	378,617,300	62.8%

Lifetime Experience (Nationwide) as of 12/31/2016
Original Pricing Assumptions
All Benefit Periods - Pre-Rate Stabilization

Year	Earned Premium	Incurred Claims	Loss Ratio
1997	873,120	134,043	15.4%
1998	5,423,275	1,059,387	19.5%
1999	10,364,424	2,428,543	23.4%
2000	19,312,034	5,354,972	27.7%
2001	31,683,758	9,659,578	30.5%
2002	46,332,511	15,085,037	32.6%
2003	61,446,058	21,723,508	35.4%
2004	63,061,402	25,493,720	40.4%
2005	58,413,965	27,249,286	46.6%
2006	52,123,185	28,012,723	53.7%
2007	46,129,120	28,105,601	60.9%
2008	40,482,088	27,659,392	68.3%
2009	35,316,922	27,392,292	77.6%
2010	30,612,931	26,899,866	87.9%
2011	26,356,682	26,041,118	98.8%
2012	22,534,640	25,195,494	111.8%
2013	19,130,291	23,138,919	121.0%
2014	16,123,537	20,690,672	128.3%
2015	13,491,513	18,557,985	137.6%
2016	11,208,860	16,756,579	149.5%
Total	610,420,315	376,638,714	61.7%
Interest Adjusted	973,357,862	547,678,429	56.3%
	<u>Earned Premium</u>	<u>Incurred Claims</u>	<u>Loss Ratio</u>
2017	9,248,404	15,037,441	162.6%
2018	7,580,138	13,413,394	177.0%
2019	6,172,044	11,924,755	193.2%
2020	4,993,756	10,544,581	211.2%
2021	4,016,447	9,272,295	230.9%
2022	3,212,955	8,109,183	252.4%
2023	2,557,883	7,053,509	275.8%
2024	2,027,355	6,112,399	301.5%
2025	1,600,137	5,273,511	329.6%
2026	1,257,930	4,526,440	359.8%
2027	985,082	3,869,249	392.8%
2028	768,598	3,293,345	428.5%
2029	597,604	2,790,958	467.0%
2030	463,181	2,354,365	508.3%
2031	358,029	1,977,319	552.3%
2032	276,151	1,654,679	599.2%
2033	212,675	1,380,613	649.2%
2034	163,662	1,149,568	702.4%
2035	125,951	956,135	759.1%
2036	96,854	792,044	817.8%
2037	73,811	643,904	872.4%
2038	55,378	510,093	921.1%
2039	41,349	401,034	969.9%
2040	31,034	316,604	1020.2%
2041	23,361	249,116	1066.4%
2042	17,532	192,173	1096.1%
2043	13,044	144,502	1107.8%
2044	9,689	107,534	1109.9%
2045	6,988	77,678	1111.6%
2046	4,706	52,384	1113.0%
2047	1,727	19,107	1106.6%
2048	9	107	1250.7%
	<u>Earned Premium</u>	<u>Incurred Claims</u>	<u>Loss Ratio</u>
Past Experience @ 4.5%	973,357,862	547,678,429	56.3%
Anticipated Experience @ 4.5%	39,467,421	89,417,149	226.6%
Lifetime Experience @ 4.5%	1,012,825,284	637,095,577	62.9%

Lifetime Experience (Nationwide) as of 12/31/2016
Previous Assumptions
Non-Lifetime Benefit Periods - Pre-Rate Stabilization

	Virginia Rate Level	Incurred Claims			
Year	Earned Premium	Discounted to Incurred Year	Loss Ratio		
1997	493,144	0	0.0%		
1998	2,879,303	107,337	3.7%		
1999	5,164,376	620,403	12.0%		
2000	8,538,676	1,279,039	15.0%		
2001	13,291,034	2,429,334	18.3%		
2002	19,718,256	4,609,517	23.4%		
2003	26,161,646	3,660,231	14.0%		
2004	26,346,243	5,771,160	21.9%		
2005	26,128,236	8,629,972	33.0%		
2006	25,202,065	8,814,082	35.0%		
2007	26,556,561	11,678,078	44.0%		
2008	28,547,868	13,342,930	46.7%		
2009	27,170,713	15,858,480	58.4%		
2010	25,819,457	17,408,466	67.4%		
2011	24,490,069	20,794,851	84.9%		
2012	24,453,662	25,050,446	102.4%		
2013	26,798,097	24,236,077	90.4%		
2014	27,611,723	24,831,729	89.9%		
2015	27,318,093	27,001,863	98.8%		
2016	27,148,364	34,148,099	125.8%		
Total	419,837,584	250,272,094	59.6%		
Interest Adjusted	610,566,290	321,853,927	52.7%		
	Earned Premium w/o Increase	Earned Premium w/Increase	Incurred Claims	Loss Ratio w/o Increase	Loss Ratio w/Increase
2017	24,881,729	24,881,729	25,519,482	102.6%	102.6%
2018	22,715,918	22,715,918	26,923,648	118.5%	118.5%
2019	20,661,740	20,661,740	28,969,349	140.2%	140.2%
2020	18,717,767	18,717,767	31,005,328	165.6%	165.6%
2021	16,872,032	16,872,032	32,558,230	193.0%	193.0%
2022	15,135,999	15,135,999	35,298,649	233.2%	233.2%
2023	13,530,986	13,530,986	35,145,311	259.7%	259.7%
2024	12,040,299	12,040,299	34,036,720	282.7%	282.7%
2025	10,630,331	10,630,331	34,631,372	325.8%	325.8%
2026	9,353,302	9,353,302	35,271,245	377.1%	377.1%
2027	8,207,179	8,207,179	35,874,039	437.1%	437.1%
2028	7,169,012	7,169,012	36,273,136	506.0%	506.0%
2029	6,232,836	6,232,836	36,446,502	584.7%	584.7%
2030	5,390,327	5,390,327	36,258,349	672.7%	672.7%
2031	4,633,969	4,633,969	35,904,370	774.8%	774.8%
2032	3,962,017	3,962,017	35,644,112	899.6%	899.6%
2033	3,374,905	3,374,905	34,485,063	1021.8%	1021.8%
2034	2,862,121	2,862,121	32,543,137	1137.0%	1137.0%
2035	2,414,416	2,414,416	31,016,062	1284.6%	1284.6%
2036	2,023,850	2,023,850	29,424,645	1453.9%	1453.9%
2037	1,687,143	1,687,143	27,832,029	1649.7%	1649.7%
2038	1,399,262	1,399,262	26,183,561	1871.2%	1871.2%
2039	1,155,242	1,155,242	24,378,215	2110.2%	2110.2%
2040	948,065	948,065	22,408,247	2363.6%	2363.6%
2041	770,695	770,695	20,474,731	2656.7%	2656.7%
2042	621,550	621,550	18,566,376	2987.1%	2987.1%
2043	498,948	498,948	16,721,488	3351.3%	3351.3%
	Earned Premium w/o Increase	Earned Premium With Increase	Incurred Claims	Loss Ratio w/o Increase	Loss Ratio With Increase
Past Experience @ 4.5%	610,566,290	610,566,290	321,853,927	52.7%	52.7%
Anticipated Experience @ 4.5%	166,179,030	166,179,030	492,144,567	296.2%	296.2%
Lifetime Experience @ 4.5%	776,745,319	776,745,319	813,998,494	104.8%	104.8%

Lifetime Experience (Nationwide) as of 12/31/2016
Previous Assumptions
Lifetime Benefit Period - Pre-Rate Stabilization

	Virginia Rate Level	Incurred Claims				
Year	Earned Premium	Discounted to Incurred Year	Loss Ratio			
1997	379,977	0	0.0%			
1998	2,595,131	229,543	8.8%			
1999	5,659,399	581,891	10.3%			
2000	11,774,776	1,523,173	12.9%			
2001	20,596,912	4,549,954	22.1%			
2002	30,490,543	5,455,216	17.9%			
2003	39,924,279	9,776,788	24.5%			
2004	40,127,736	13,187,176	32.9%			
2005	39,955,932	16,226,697	40.6%			
2006	39,035,372	15,302,440	39.2%			
2007	42,117,903	21,894,757	52.0%			
2008	46,531,336	31,010,819	66.6%			
2009	45,138,622	29,943,118	66.3%			
2010	43,662,093	43,806,976	100.3%			
2011	40,391,808	46,122,333	114.2%			
2012	35,250,708	46,658,968	132.4%			
2013	38,283,642	48,844,490	127.6%			
2014	44,695,854	40,198,060	89.9%			
2015	42,689,915	45,730,248	107.1%			
2016	37,209,476	48,433,867	130.2%			
Total	646,511,416	469,476,515	72.6%			
Interest Adjusted	937,117,727	610,208,562	65.1%			
	Earned Premium	Earned Premium	Loss Ratio	Loss Ratio		
	<u>w/o Increase</u>	<u>w/Increase</u>	<u>Incurred Claims</u>	<u>w/o Increase</u>	<u>w/Increase</u>	
	2017	34,089,839	34,089,839	32,770,076	96.1%	96.1%
	2018	31,100,412	40,430,536	34,967,352	112.4%	86.5%
	2019	28,264,479	42,255,395	38,369,523	135.8%	90.8%
	2020	25,580,430	38,242,743	43,147,111	168.7%	112.8%
	2021	23,027,939	34,426,769	45,862,726	199.2%	133.2%
	2022	20,626,572	30,836,726	49,777,910	241.3%	161.4%
	2023	18,407,988	27,519,942	49,473,152	268.8%	179.8%
	2024	16,348,254	24,440,640	48,323,178	295.6%	197.7%
	2025	14,409,236	21,541,808	49,941,021	346.6%	231.8%
	2026	12,650,969	18,913,198	52,762,219	417.1%	279.0%
	2027	11,071,276	16,551,557	55,088,850	497.6%	332.8%
	2028	9,642,892	14,416,123	56,381,070	584.7%	391.1%
	2029	8,356,744	12,493,333	57,360,343	686.4%	459.1%
	2030	7,202,273	10,767,398	58,211,358	808.2%	540.6%
	2031	6,168,727	9,222,247	58,303,051	945.1%	632.2%
	2032	5,254,025	7,854,768	58,519,599	1113.8%	745.0%
	2033	4,458,296	6,665,153	57,167,770	1282.3%	857.7%
	2034	3,765,659	5,629,660	54,609,105	1450.2%	970.0%
	2035	3,163,362	4,729,226	52,667,719	1664.9%	1113.7%
	2036	2,640,795	3,947,989	50,712,778	1920.4%	1284.5%
	2037	2,192,420	3,277,667	48,718,195	2222.1%	1486.4%
	2038	1,810,838	2,707,203	46,411,822	2563.0%	1714.4%
	2039	1,488,442	2,225,221	43,665,289	2933.6%	1962.3%
	2040	1,215,915	1,817,793	40,665,540	3344.4%	2237.1%
	2041	984,084	1,471,205	37,613,743	3822.2%	2556.7%
2042	790,335	1,181,551	34,967,318	4424.4%	2959.4%	
2043	632,023	944,874	32,188,838	5093.0%	3406.7%	
	Earned Premium	Earned Premium	Loss Ratio	Loss Ratio		
	<u>w/o Increase</u>	<u>With Increase</u>	<u>Incurred Claims</u>	<u>w/o Increase</u>	<u>With Increase</u>	
	Past Experience @ 4.5%	937,117,727	937,117,727	610,208,562	65.1%	65.1%
	Anticipated Experience @ 4.5%	225,891,457	315,523,485	748,514,610	331.4%	237.2%
Lifetime Experience @ 4.5%	1,163,009,184	1,252,641,212	1,358,723,171	116.8%	108.5%	

Lifetime Experience (Nationwide) as of 12/31/2016**Previous Assumptions****All Benefit Periods - Pre-Rate Stabilization**

	Virginia Rate Level	Incurred Claims			
Year	Earned Premium	Discounted to	Incurred Year	Loss Ratio	
1997	873,120	0		0.0%	
1998	5,474,434	336,880		6.2%	
1999	10,823,775	1,202,294		11.1%	
2000	20,313,452	2,802,212		13.8%	
2001	33,887,945	6,979,288		20.6%	
2002	50,208,799	10,064,733		20.0%	
2003	66,085,925	13,437,019		20.3%	
2004	66,473,979	18,958,336		28.5%	
2005	66,084,168	24,856,669		37.6%	
2006	64,237,437	24,116,522		37.5%	
2007	68,674,464	33,572,835		48.9%	
2008	75,079,205	44,353,749		59.1%	
2009	72,309,335	45,801,598		63.3%	
2010	69,481,550	61,215,442		88.1%	
2011	64,881,877	66,917,183		103.1%	
2012	59,704,370	71,709,414		120.1%	
2013	65,081,739	73,080,567		112.3%	
2014	72,307,577	65,029,789		89.9%	
2015	70,008,008	72,732,111		103.9%	
2016	64,357,840	82,581,966		128.3%	
Total	1,066,349,000	719,748,608		67.5%	
Interest Adjusted	1,547,684,016	932,062,488		60.2%	
	Earned Premium	Earned Premium	Loss Ratio	Loss Ratio	
	<u>w/o Increase</u>	<u>w/Increase</u>	<u>Incurred Claims</u>	<u>w/o Increase</u>	<u>w/Increase</u>
2017	58,971,568	58,971,568	58,289,558	98.8%	98.8%
2018	53,816,330	63,146,453	61,891,000	115.0%	98.0%
2019	48,926,219	62,917,135	67,338,872	137.6%	107.0%
2020	44,298,197	56,960,510	74,152,439	167.4%	130.2%
2021	39,899,971	51,298,801	78,420,956	196.5%	152.9%
2022	35,762,572	45,972,725	85,076,559	237.9%	185.1%
2023	31,938,974	41,050,928	84,618,463	264.9%	206.1%
2024	28,388,553	36,480,939	82,359,899	290.1%	225.8%
2025	25,039,567	32,172,139	84,572,392	337.8%	262.9%
2026	22,004,271	28,266,500	88,033,464	400.1%	311.4%
2027	19,278,455	24,758,736	90,962,890	471.8%	367.4%
2028	16,811,904	21,585,135	92,654,206	551.1%	429.3%
2029	14,589,580	18,726,168	93,806,846	643.0%	500.9%
2030	12,592,600	16,157,725	94,469,707	750.2%	584.7%
2031	10,802,697	13,856,217	94,207,420	872.1%	679.9%
2032	9,216,042	11,816,784	94,163,711	1021.7%	796.9%
2033	7,833,201	10,040,058	91,652,833	1170.1%	912.9%
2034	6,627,780	8,491,781	87,152,242	1315.0%	1026.3%
2035	5,577,778	7,143,642	83,683,781	1500.3%	1171.4%
2036	4,664,645	5,971,839	80,137,422	1718.0%	1341.9%
2037	3,879,563	4,964,810	76,550,224	1973.2%	1541.9%
2038	3,210,100	4,106,465	72,595,383	2261.5%	1767.8%
2039	2,643,684	3,380,463	68,043,504	2573.8%	2012.8%
2040	2,163,980	2,765,858	63,073,787	2914.7%	2280.4%
2041	1,754,779	2,241,900	58,088,474	3310.3%	2591.0%
2042	1,411,885	1,803,101	53,533,694	3791.6%	2969.0%
2043	1,130,971	1,443,823	48,910,326	4324.6%	3387.6%
	Earned Premium	Earned Premium	Loss Ratio	Loss Ratio	
	<u>w/o Increase</u>	<u>With Increase</u>	<u>Incurred Claims</u>	<u>w/o Increase</u>	<u>With Increase</u>
Past Experience @ 4.5%	1,547,684,016	1,547,684,016	932,062,488	60.2%	60.2%
Anticipated Experience @ 4.5%	392,070,487	481,702,515	1,240,659,177	316.4%	257.6%
Lifetime Experience @ 4.5%	1,939,754,503	2,029,386,531	2,172,721,665	112.0%	107.1%

Lifetime Experience (Nationwide) as of 12/31/2016
Current Assumptions
Non-Lifetime Benefit Periods - Pre-Rate Stabilization

						(1)	(2)	(3)	(4)
	Virginia Rate Level	Incurred Claims Discounted to				Rate Increase	Additional Premium	Total	Active Life
Year	Earned Premium		Incurred Year	Loss Ratio		Percentage	from Increase	Premium	Reserve
1997	493,144		0	0.0%					0
1998	2,879,303		107,337	3.7%					0
1999	5,164,376		620,403	12.0%					1,831,222
2000	8,538,676		1,279,039	15.0%					3,843,486
2001	13,291,034		2,429,334	18.3%					7,598,575
2002	19,718,256		4,609,517	23.4%					13,700,815
2003	26,161,646		3,660,231	14.0%					25,195,653
2004	26,346,243		5,771,160	21.9%					39,483,354
2005	26,128,236		8,629,972	33.0%					55,637,284
2006	25,202,065		8,814,082	35.0%					71,903,925
2007	26,556,561		11,678,078	44.0%					87,603,254
2008	28,547,868		13,342,930	46.7%					102,666,313
2009	27,170,713		15,858,480	58.4%					116,675,375
2010	25,819,457		17,408,466	67.4%					130,095,319
2011	24,490,069		20,794,851	84.9%					150,005,868
2012	24,453,662		25,050,446	102.4%					173,955,110
2013	26,798,097		24,236,077	90.4%					191,906,162
2014	27,611,723		24,831,729	89.9%					205,507,391
2015	27,318,093		27,001,863	98.8%					232,449,244
2016	27,148,364		34,148,099	125.8%					255,371,182
Total	419,837,584		250,272,094	59.6%					
Interest Adjusted	610,566,290		321,853,927	52.7%					
						(1)	(2)	(3)	(4)
	Earned Premium w/o Increase	Earned Premium w/Increase	Incurred Claims	Loss Ratio w/o Increase	Loss Ratio w/Increase	Rate Increase Percentage	Additional Premium from Increase	Total Premium	Active Life Reserve
2017	24,608,891	24,608,891	27,636,882	112.3%	112.3%		0	24,608,891	298,381,163
2018	22,304,600	22,304,600	28,416,518	127.4%	127.4%	0.0%	0	22,304,600	307,564,098
2019	20,192,418	20,192,418	29,611,006	146.6%	146.6%	0.0%	0	20,192,418	314,174,991
2020	18,220,232	18,220,232	30,735,018	168.7%	168.7%		0	18,220,232	318,354,304
2021	16,397,100	16,397,100	31,622,766	192.9%	192.9%		0	16,397,100	320,470,482
2022	14,682,828	14,682,828	32,784,022	223.3%	223.3%		0	14,682,828	320,229,114
2023	13,096,433	13,096,433	32,382,296	247.3%	247.3%		0	13,096,433	318,998,821
2024	11,633,024	11,633,024	31,821,503	273.5%	273.5%		0	11,633,024	316,753,594
2025	10,297,614	10,297,614	32,100,913	311.7%	311.7%		0	10,297,614	312,746,138
2026	9,082,829	9,082,829	32,393,466	356.6%	356.6%		0	9,082,829	307,177,404
2027	7,978,650	7,978,650	32,599,205	408.6%	408.6%		0	7,978,650	300,147,220
2028	6,981,193	6,981,193	32,613,782	467.2%	467.2%		0	6,981,193	291,715,920
2029	6,084,175	6,084,175	32,495,597	534.1%	534.1%		0	6,084,175	281,704,440
2030	5,280,137	5,280,137	32,191,361	609.7%	609.7%		0	5,280,137	270,268,194
2031	4,563,230	4,563,230	31,791,974	696.7%	696.7%		0	4,563,230	257,711,637
2032	3,924,942	3,924,942	31,314,292	797.8%	797.8%		0	3,924,942	244,075,706
2033	3,364,633	3,364,633	30,248,034	899.0%	899.0%		0	3,364,633	229,972,911
2034	2,874,456	2,874,456	28,846,686	1003.6%	1003.6%		0	2,874,456	215,649,720
2035	2,445,247	2,445,247	27,601,218	1128.8%	1128.8%		0	2,445,247	200,981,525
2036	2,070,165	2,070,165	26,458,888	1278.1%	1278.1%		0	2,070,165	186,110,989
2037	1,743,703	1,743,703	25,380,908	1455.6%	1455.6%		0	1,743,703	171,185,266
2038	1,461,171	1,461,171	24,177,026	1654.6%	1654.6%		0	1,461,171	156,330,018
2039	1,217,867	1,217,867	22,768,954	1869.6%	1869.6%		0	1,217,867	141,627,523
2040	1,009,103	1,009,103	21,186,398	2099.5%	2099.5%		0	1,009,103	127,266,738
2041	831,844	831,844	19,606,995	2357.1%	2357.1%		0	831,844	113,463,143
2042	681,564	681,564	18,018,887	2643.8%	2643.8%		0	681,564	100,325,752
2043	555,308	555,308	16,419,637	2956.9%	2956.9%		0	555,308	87,962,436
2044	449,688	449,688	14,741,503	3278.2%	3278.2%		0	449,688	76,514,849
2045	361,580	361,580	13,110,603	3625.9%	3625.9%		0	361,580	65,984,324
2046	289,416	289,416	11,561,286	3994.7%	3994.7%		0	289,416	56,488,959
2047	230,535	230,535	10,149,439	4402.6%	4402.6%		0	230,535	47,988,480
2048	182,496	182,496	8,853,963	4851.6%	4851.6%		0	182,496	40,426,360
2049	143,283	143,283	7,641,022	5332.8%	5332.8%		0	143,283	33,754,232
2050	111,489	111,489	6,515,510	5844.1%	5844.1%		0	111,489	27,945,208
2051	86,279	86,279	5,514,288	6391.2%	6391.2%		0	86,279	22,979,974
2052	66,559	66,559	4,640,354	6971.8%	6971.8%		0	66,559	18,764,536
2053	51,023	51,023	3,883,863	7612.0%	7612.0%		0	51,023	15,173,066
2054	38,698	38,698	3,209,977	8295.0%	8295.0%		0	38,698	12,152,195
2055	28,892	28,892	2,619,423	9066.3%	9066.3%		0	28,892	9,640,363
2056	21,376	21,376	2,113,521	9887.2%	9887.2%		0	21,376	7,616,334
2057	15,823	15,823	1,699,948	10743.4%	10743.4%		0	15,823	5,981,134
2058	11,684	11,684	1,365,341	11685.6%	11685.6%		0	11,684	4,649,121
2059	8,522	8,522	1,085,897	12741.6%	12741.6%		0	8,522	3,575,372
2060	6,066	6,066	852,813	14059.9%	14059.9%		0	6,066	2,711,614
2061	4,233	4,233	655,912	15495.6%	15495.6%		0	4,233	2,052,658
2062	2,990	2,990	499,460	16705.3%	16705.3%		0	2,990	1,560,980
2063	2,148	2,148	386,898	18010.2%	18010.2%		0	2,148	1,166,403
2064	1,532	1,532	299,650	19561.4%	19561.4%		0	1,532	854,649
2065	1,071	1,071	228,822	21356.9%	21356.9%		0	1,071	651,488
2066	728	728	169,082	23211.7%	23211.7%		0	728	504,897
2067	505	505	123,691	24479.6%	24479.6%		0	505	404,675
2068	339	339	91,921	27097.8%	27097.8%		0	339	337,735
2069	137	137	67,772	49644.0%	49644.0%		0	137	249,735
2070	10	10	48,386	491238.8%	491238.8%		0	10	170,961
2071	0	0	33,070	7810123.4%	7810123.4%		0	0	97,366
2072	0	0	4	6232.7%	6232.7%		0	0	46,033
2073	0	0	0	0.0%	0.0%		0	0	16,444
	Earned Premium w/o Increase	Earned Premium With Increase	Incurred Claims	Loss Ratio w/o Increase	Loss Ratio With Increase				
Past Experience @ 4.5%	610,566,290	610,566,290	321,853,927	52.7%	52.7%				
Anticipated Experience @ 4.5%	163,182,624	163,182,624	487,884,646	299.0%	299.0%				
Lifetime Experience @ 4.5%	773,748,913	773,748,913	809,738,573	104.7%	104.7%				

Lifetime Experience (Nationwide) as of 12/31/2016
Current Assumptions
Lifetime Benefit Period - Pre-Rate Stabilization

					(1)	(2)	(3)	(4)	
	Virginia Rate Level	Incurred Claims Discounted to			Rate Increase	Additional Premium	Total	Active	
Year	Earned Premium	Incurred Year	Loss Ratio	Percentage	from Increase	Premium	Life Reserve		
1997	379,977	0	0.0%				0		
1998	2,595,131	229,543	8.8%				0		
1999	5,659,399	581,891	10.3%				1,865,441		
2000	11,774,776	1,523,173	12.9%				4,319,192		
2001	20,596,912	4,549,954	22.1%				10,324,449		
2002	30,490,543	5,455,216	17.9%				21,593,484		
2003	39,924,279	9,776,788	24.5%				42,950,845		
2004	40,127,736	13,187,176	32.9%				69,222,450		
2005	39,955,932	16,226,697	40.6%				100,094,678		
2006	39,035,372	15,302,440	39.2%				132,428,137		
2007	42,117,903	21,894,757	52.0%				164,791,834		
2008	46,531,336	31,010,819	66.6%				197,161,849		
2009	45,138,622	29,943,118	66.3%				229,309,136		
2010	43,662,093	43,806,976	100.3%				261,101,278		
2011	40,391,808	46,122,333	114.2%				280,919,947		
2012	35,250,708	46,658,968	132.4%				294,255,732		
2013	38,283,642	48,844,490	127.6%				312,212,971		
2014	44,695,854	40,198,060	89.9%				338,055,745		
2015	42,689,915	45,730,248	107.1%				346,146,460		
2016	37,209,476	48,433,867	130.2%				355,332,664		
Total	646,511,416	469,476,515	72.6%						
Interest Adjusted	937,117,727	610,208,562	65.1%						
					(1)	(2)	(3)	(4)	
	Earned Premium w/o Increase	Earned Premium w/Increase	Incurred Claims	Loss Ratio w/o Increase	Loss Ratio w/Increase	Rate Increase Percentage	Additional Premium from Increase	Total Premium	Active Life Reserve
2017	34,439,921	34,439,921	42,193,074	122.5%	122.5%		0	34,439,921	368,733,710
2018	31,818,616	41,364,201	44,812,166	140.8%	108.3%	30.0%	9,545,585	41,364,201	389,644,866
2019	29,326,376	43,842,932	48,419,978	165.1%	110.4%	15.0%	14,516,556	43,842,932	407,927,373
2020	26,927,980	40,257,330	52,866,944	196.3%	131.3%		13,329,350	40,257,330	422,825,780
2021	24,646,112	36,845,937	56,232,539	228.2%	152.6%		12,199,825	36,845,937	435,370,081
2022	22,450,152	33,562,977	60,253,140	268.4%	179.5%		11,112,825	33,562,977	444,749,681
2023	20,396,862	30,493,309	61,370,608	300.9%	201.3%		10,096,447	30,493,309	453,392,118
2024	18,478,722	27,625,689	61,808,534	334.5%	223.7%		9,146,967	27,625,689	461,919,894
2025	16,701,047	24,968,065	64,696,069	387.4%	259.1%		8,267,018	24,968,065	468,115,332
2026	15,051,620	22,502,173	67,610,519	449.2%	300.5%		7,450,552	22,502,173	472,108,187
2027	13,519,982	20,212,372	70,353,930	520.4%	348.1%		6,692,391	20,212,372	473,855,603
2028	12,105,426	18,097,612	72,742,987	600.9%	401.9%		5,992,186	18,097,612	473,293,766
2029	10,799,892	16,145,838	74,978,474	694.3%	464.4%		5,345,946	16,145,838	469,826,895
2030	9,593,278	14,341,951	77,268,721	805.4%	538.8%		4,748,673	14,341,951	463,198,914
2031	8,486,579	12,687,436	78,840,270	929.0%	621.4%		4,200,857	12,687,436	453,968,991
2032	7,466,748	11,162,789	80,346,493	1076.1%	719.8%		3,696,040	11,162,789	441,772,337
2033	6,547,344	9,788,279	80,215,409	1225.2%	819.5%		3,240,935	9,788,279	427,779,692
2034	5,726,083	8,560,494	78,807,595	1376.3%	920.6%		2,834,411	8,560,494	412,843,860
2035	4,985,822	7,453,804	78,067,955	1565.8%	1047.4%		2,467,982	7,453,804	396,036,732
2036	4,318,998	6,456,903	77,388,940	1791.8%	1198.5%		2,137,904	6,456,903	377,548,998
2037	3,722,180	5,564,659	76,560,536	2056.9%	1375.8%		1,842,479	5,564,659	357,545,755
2038	3,192,356	4,772,572	75,029,404	2350.3%	1572.1%		1,580,216	4,772,572	336,269,392
2039	2,724,507	4,073,138	72,577,912	2663.9%	1781.9%		1,348,631	4,073,138	313,787,530
2040	2,311,252	3,455,321	69,572,431	3010.2%	2013.5%		1,144,070	3,455,321	290,509,410
2041	1,950,074	2,915,360	66,153,320	3392.3%	2269.1%		965,287	2,915,360	266,986,947
2042	1,633,809	2,442,545	62,671,060	3835.9%	2565.8%		808,736	2,442,545	243,245,153
2043	1,360,856	2,034,479	58,591,257	4305.5%	2879.9%		673,624	2,034,479	219,785,068
2044	1,130,052	1,689,428	53,748,501	4756.3%	3181.5%		559,376	1,689,428	197,344,828
2045	932,620	1,394,267	49,051,209	5259.5%	3518.1%		461,647	1,394,267	175,767,791
2046	765,718	1,144,748	44,458,757	5806.2%	3883.7%		379,030	1,144,748	155,526,943
2047	625,733	935,471	40,130,452	6413.3%	4289.9%		309,738	935,471	136,611,887
2048	508,453	760,137	35,943,278	7069.1%	4728.5%		251,684	760,137	119,007,796
2049	410,984	614,421	31,818,773	7742.1%	5178.7%		203,437	614,421	102,773,217
2050	329,729	492,945	27,874,097	8453.6%	5654.6%		163,216	492,945	87,982,650
2051	262,955	393,118	24,202,988	9204.2%	6156.7%		130,163	393,118	74,872,027
2052	208,579	311,825	20,991,863	10064.2%	6731.9%		103,246	311,825	63,166,453
2053	163,872	244,989	18,033,685	11004.7%	7361.0%		81,117	244,989	52,692,497
2054	128,209	191,673	15,203,525	11858.4%	7932.0%		63,464	191,673	43,611,268
2055	99,452	148,681	12,685,072	12754.9%	8531.7%		49,229	148,681	35,691,134
2056	76,546	114,436	10,457,274	13661.5%	9138.1%		37,890	114,436	29,094,066
2057	58,773	87,865	8,628,492	14681.1%	9820.1%		29,093	87,865	23,585,669
2058	45,116	67,448	7,107,878	15754.7%	10538.3%		22,332	67,448	18,928,674
2059	34,238	51,186	5,783,164	16891.0%	11298.3%		16,948	51,186	14,971,382
2060	25,708	38,434	4,598,691	17887.9%	11965.2%		12,726	38,434	11,647,093
2061	19,121	28,585	3,572,283	18682.9%	12497.0%		9,465	28,585	9,025,633
2062	14,287	21,360	2,797,678	19581.5%	13098.0%		7,072	21,360	7,022,152
2063	10,696	15,991	2,215,977	20716.8%	13857.4%		5,295	15,991	5,373,629
2064	7,896	11,805	1,739,406	22027.6%	14734.2%		3,909	11,805	4,089,542
2065	5,736	8,575	1,337,719	23323.0%	15600.7%		2,839	8,575	3,133,392
2066	4,111	6,145	990,079	24085.8%	16110.9%		2,035	6,145	2,442,464
2067	2,917	4,361	735,316	25205.7%	16860.0%		1,444	4,361	1,944,009
2068	1,922	2,874	552,194	28727.1%	19215.5%		951	2,874	1,553,419
2069	1,151	1,720	415,108	36078.4%	24132.7%		570	1,720	1,207,283
2070	6	9	298,193	4881698.3%	3265350.1%		3	9	874,168
2071	0	0	761	724485.2%	484605.5%		0	0	519,223
2072	0	0	6	15332.9%	10256.1%		0	0	302,573
2073	0	0	1	0.0%	0.0%		0	0	143,113
	Earned Premium w/o Increase	Earned Premium With Increase	Incurred Claims	Loss Ratio w/o Increase	Loss Ratio With Increase				
Past Experience @ 4.5%	937,117,727	937,117,727	610,208,562	65.1%	65.1%				
Anticipated Experience @ 4.5%	253,825,795	356,984,699	1,118,906,233	440.8%	313.4%				
Lifetime Experience @ 4.5%	1,190,943,521	1,294,102,426	1,729,114,794	145.2%	133.6%				

Lifetime Experience (Nationwide) as of 12/31/2016
Current Assumptions
All Benefit Periods - Pre-Rate Stabilization

				(1)	(2)	(3)	(4)		
Year	Virginia Rate Level Earned Premium	Incurred Claims Discounted to Incurred Year		Loss Ratio	Rate Increase Percentage	Additional Premium from Increase	Total Premium	Active Life Reserve	
1997	873,120	0		0.0%				0	
1998	5,474,434	336,880		6.2%				0	
1999	10,823,775	1,202,294		11.1%				3,696,663	
2000	20,313,452	2,802,212		13.8%				8,162,678	
2001	33,887,945	6,979,288		20.6%				17,923,024	
2002	50,208,799	10,064,733		20.0%				35,294,299	
2003	66,085,925	13,437,019		20.3%				68,146,498	
2004	66,473,979	18,958,336		28.5%				108,705,805	
2005	66,084,168	24,856,669		37.6%				155,731,962	
2006	64,237,437	24,116,522		37.5%				204,332,062	
2007	68,674,464	33,572,835		48.9%				252,395,088	
2008	75,079,205	44,353,749		59.1%				299,828,162	
2009	72,309,335	45,801,598		63.3%				345,984,511	
2010	69,481,550	61,215,442		88.1%				391,196,597	
2011	64,881,877	66,917,183		103.1%				430,925,815	
2012	59,704,370	71,709,414		120.1%				468,210,842	
2013	65,081,739	73,080,567		112.3%				504,119,133	
2014	72,307,577	65,029,789		89.9%				543,563,136	
2015	70,008,008	72,732,111		103.9%				578,595,704	
2016	64,357,840	82,581,966		128.3%				610,703,846	
Total	1,066,349,000	719,748,608		67.5%					
Interest Adjusted	1,547,684,016	932,062,488		60.2%	(1)	(2)	(3)	(4)	
	Earned Premium w/o Increase	Earned Premium w/Increase	Incurred Claims	Loss Ratio w/o Increase	Loss Ratio w/Increase	Rate Increase Percentage	Additional Premium from Increase	Total Premium	Active Life Reserve
2017	59,048,812	59,048,812	69,829,956	118.3%	118.3%		0	59,048,812	667,114,873
2018	54,123,216	63,668,801	73,228,684	135.3%	115.0%	17.6%	9,545,585	63,668,801	697,208,964
2019	49,518,794	64,035,350	78,030,984	157.6%	121.9%	9.9%	14,516,556	64,035,350	722,102,363
2020	45,148,212	58,477,562	83,601,961	185.2%	143.0%		13,329,350	58,477,562	741,180,084
2021	41,043,211	53,243,036	87,855,305	214.1%	165.0%		12,199,825	53,243,036	755,840,563
2022	37,132,979	48,245,804	93,037,162	250.6%	192.8%		11,112,825	48,245,804	764,978,795
2023	33,493,295	43,589,742	93,752,904	279.9%	215.1%		10,096,447	43,589,742	772,390,939
2024	30,111,746	39,258,713	93,630,038	310.9%	238.5%		9,146,967	39,258,713	778,673,488
2025	26,998,661	35,265,679	96,796,982	358.5%	274.5%		8,267,018	35,265,679	780,861,469
2026	24,134,450	31,585,002	100,003,985	414.4%	316.6%		7,450,552	31,585,002	779,285,590
2027	21,498,632	28,191,022	102,953,135	478.9%	365.2%		6,692,391	28,191,022	774,002,823
2028	19,086,620	25,078,806	105,356,769	552.0%	420.1%		5,992,186	25,078,806	765,009,686
2029	16,884,067	22,230,013	107,474,071	636.5%	483.5%		5,345,946	22,230,013	751,531,336
2030	14,873,416	19,622,088	109,460,081	735.9%	557.8%		4,748,673	19,622,088	733,467,108
2031	13,049,809	17,250,665	110,632,245	847.8%	641.3%		4,200,857	17,250,665	711,680,628
2032	11,391,690	15,087,731	111,660,785	980.2%	740.1%		3,696,040	15,087,731	685,848,043
2033	9,911,976	13,152,912	110,463,443	1114.4%	839.8%		3,240,935	13,152,912	657,752,603
2034	8,600,538	11,434,949	107,654,281	1251.7%	941.4%		2,834,411	11,434,949	628,493,581
2035	7,431,069	9,899,051	105,669,173	1422.0%	1067.5%		2,467,982	9,899,051	597,018,257
2036	6,389,164	8,527,068	103,847,828	1625.4%	1217.9%		2,137,904	8,527,068	563,659,987
2037	5,465,883	7,308,362	101,941,444	1865.0%	1394.9%		1,842,479	7,308,362	528,731,021
2038	4,653,526	6,233,742	99,206,430	2131.9%	1591.4%		1,580,216	6,233,742	492,599,410
2039	3,942,374	5,291,005	95,346,866	2418.5%	1802.1%		1,348,631	5,291,005	455,415,053
2040	3,320,355	4,464,424	90,758,829	2733.4%	2032.9%		1,144,070	4,464,424	417,776,148
2041	2,781,917	3,747,204	85,760,315	3082.8%	2288.6%		965,287	3,747,204	380,450,090
2042	2,315,373	3,124,109	80,689,947	3485.0%	2582.8%		808,736	3,124,109	343,570,905
2043	1,916,164	2,589,788	75,010,894	3914.6%	2896.4%		673,624	2,589,788	307,747,504
2044	1,579,740	2,139,116	68,490,005	4335.5%	3201.8%		559,376	2,139,116	273,859,677
2045	1,294,201	1,755,848	62,161,813	4803.1%	3540.3%		461,647	1,755,848	241,752,115
2046	1,055,134	1,434,164	56,020,043	5309.3%	3906.1%		379,030	1,434,164	212,015,902
2047	856,268	1,166,006	50,279,891	5872.0%	4312.1%		309,738	1,166,006	184,600,367
2048	690,949	942,633	44,797,242	6483.4%	4752.4%		251,684	942,633	159,434,156
2049	554,267	757,704	39,459,796	7119.3%	5207.8%		203,437	757,704	136,527,449
2050	441,218	604,434	34,389,607	7794.3%	5689.6%		163,216	604,434	115,927,859
2051	349,235	479,398	29,717,276	8509.3%	6198.9%		130,163	479,398	97,852,002
2052	275,138	378,384	25,632,216	9316.1%	6774.1%		103,246	378,384	81,930,989
2053	214,895	296,012	21,917,548	10199.2%	7404.3%		81,117	296,012	67,865,563
2054	166,907	230,371	18,413,502	11032.2%	7993.0%		63,464	230,371	55,763,462
2055	128,344	177,573	15,304,495	11924.5%	8618.7%		49,229	177,573	45,331,497
2056	97,922	135,812	12,570,794	12837.6%	9256.0%		37,890	135,812	36,710,400
2057	74,596	103,688	10,328,440	13845.8%	9961.0%		29,093	103,688	29,566,803
2058	56,800	79,132	8,473,219	14917.7%	10707.7%		22,332	79,132	23,577,795
2059	42,761	59,709	6,869,061	16064.0%	11504.3%		16,948	59,709	18,546,753
2060	31,774	44,499	5,451,504	17157.2%	12250.7%		12,726	44,499	14,358,707
2061	23,353	32,818	4,228,194	18105.2%	12883.7%		9,465	32,818	11,078,291
2062	17,277	24,349	3,297,138	19083.8%	13540.9%		7,072	24,349	8,583,132
2063	12,845	18,139	2,602,875	20264.2%	14349.2%		5,295	18,139	6,540,033
2064	9,428	13,337	2,039,056	21626.9%	15288.6%		3,909	13,337	4,944,191
2065	6,807	9,646	1,566,540	23013.6%	16240.0%		2,839	9,646	3,784,879
2066	4,839	6,874	1,159,161	23954.2%	16863.4%		2,035	6,874	2,947,361
2067	3,423	4,867	859,007	25098.5%	17651.1%		1,444	4,867	2,348,684
2068	2,261	3,213	644,115	28482.7%	20047.7%		951	3,213	1,891,155
2069	1,287	1,857	482,879	37517.2%	26008.5%		570	1,857	1,457,018
2070	16	19	346,579	2171790.5%	1825842.7%		3	19	1,045,129
2071	1	1	33,832	6401040.7%	5827402.9%		0	1	616,589
2072	0	0	10	9974.0%	8287.4%		0	0	348,606
2073	0	0	1	0.0%	0.0%		0	0	159,557
	Earned Premium w/o Increase	Earned Premium With Increase	Incurred Claims	Loss Ratio w/o Increase	Loss Ratio With Increase				
Past Experience @ 4.5%	1,547,684,016	1,547,684,016	932,062,488	60.2%	60.2%				
Anticipated Experience @ 4.5%	417,008,418	520,167,323	1,606,790,879	385.3%	308.9%				
Lifetime Experience @ 4.5%	1,964,692,434	2,067,851,339	2,538,853,367	129.2%	122.8%				

Lifetime Experience (Nationwide) as of 12/31/2016
Original Pricing Assumptions
Non-Lifetime Benefit Periods - Post-Rate Stabilization

Year	Earned Premium	Incurred Claims	Loss Ratio
1997	0	0	0.0%
1998	0	0	0.0%
1999	0	0	0.0%
2000	0	0	0.0%
2001	5,564	1,039	18.7%
2002	124,285	27,308	22.0%
2003	950,285	228,128	24.0%
2004	1,892,417	602,284	31.8%
2005	2,100,808	793,190	37.8%
2006	1,892,929	847,690	44.8%
2007	1,678,890	900,801	53.7%
2008	1,484,832	913,722	61.5%
2009	1,306,363	900,885	69.0%
2010	1,142,148	880,373	77.1%
2011	991,820	853,378	86.0%
2012	855,214	841,048	98.3%
2013	732,084	881,474	120.4%
2014	622,033	799,300	128.5%
2015	524,478	683,465	130.3%
2016	438,781	614,425	140.0%
Total	16,742,930	10,768,510	64.3%
Interest Adjusted	24,649,002	14,686,000	59.6%
	<u>Earned Premium</u>	<u>Incurred Claims</u>	<u>Loss Ratio</u>
2017	364,275	554,766	152.3%
2018	300,175	496,719	165.5%
2019	245,568	443,343	180.5%
2020	199,449	394,049	197.6%
2021	160,839	347,551	216.1%
2022	128,829	304,258	236.2%
2023	102,550	265,124	258.5%
2024	81,206	229,607	282.7%
2025	64,008	198,034	309.4%
2026	50,225	170,183	338.8%
2027	39,240	145,374	370.5%
2028	30,534	123,445	404.3%
2029	23,670	104,485	441.4%
2030	18,278	88,108	482.1%
2031	14,062	73,881	525.4%
2032	10,786	61,611	571.2%
2033	8,253	51,134	619.6%
2034	6,304	42,301	671.0%
2035	4,811	34,901	725.5%
2036	3,669	28,719	782.7%
2037	2,800	23,575	842.0%
2038	2,144	19,369	903.5%
2039	1,647	15,956	968.6%
2040	1,269	13,183	1038.5%
2041	978	10,883	1113.2%
2042	751	8,936	1189.1%
2043	577	7,101	1230.0%
2044	444	5,484	1236.2%
2045	341	4,212	1236.1%
2046	262	3,236	1235.9%
2047	0	0	0.0%
2048	0	0	0.0%
	<u>Earned Premium</u>	<u>Incurred Claims</u>	<u>Loss Ratio</u>
Past Experience @ 4.5%	24,649,002	14,686,000	59.6%
Anticipated Experience @ 4.5%	1,568,286	3,336,228	212.7%
Lifetime Experience @ 4.5%	26,217,287	18,022,228	68.7%

Lifetime Experience (Nationwide) as of 12/31/2016
Original Pricing Assumptions
Lifetime Benefit Period - Post-Rate Stabilization

Year	Earned Premium	Incurred Claims	Loss Ratio
1997	0	0	0.0%
1998	0	0	0.0%
1999	0	0	0.0%
2000	0	0	0.0%
2001	13,893	2,569	18.5%
2002	293,818	62,150	21.2%
2003	1,578,885	424,266	26.9%
2004	2,459,106	826,687	33.6%
2005	2,492,260	987,522	39.6%
2006	2,225,549	1,053,693	47.3%
2007	1,972,874	1,105,194	56.0%
2008	1,742,466	1,108,339	63.6%
2009	1,530,352	1,089,485	71.2%
2010	1,335,414	1,061,362	79.5%
2011	1,157,327	1,027,263	88.8%
2012	995,874	1,052,292	105.7%
2013	850,706	1,067,182	125.4%
2014	721,264	939,682	130.3%
2015	606,808	812,882	134.0%
2016	506,559	732,834	144.7%
Total	20,483,157	13,353,403	65.2%
Interest Adjusted	30,463,830	18,357,192	60.3%
	<u>Earned Premium</u>	<u>Incurred Claims</u>	<u>Loss Ratio</u>
2017	419,667	658,486	156.9%
2018	345,127	587,940	170.4%
2019	281,783	523,522	185.8%
2020	228,411	463,725	203.0%
2021	183,850	407,570	221.7%
2022	147,005	356,001	242.2%
2023	116,850	309,423	264.8%
2024	92,418	267,402	289.3%
2025	72,760	230,272	316.5%
2026	57,028	197,461	346.3%
2027	44,508	168,275	378.1%
2028	34,600	142,685	412.4%
2029	26,795	120,617	450.1%
2030	20,671	101,521	491.1%
2031	15,892	84,963	534.6%
2032	12,183	70,739	580.7%
2033	9,317	58,641	629.4%
2034	7,116	48,457	681.0%
2035	5,429	39,934	735.5%
2036	4,142	32,833	792.6%
2037	3,164	26,945	851.6%
2038	2,425	22,145	913.2%
2039	1,866	18,264	979.0%
2040	1,439	15,098	1049.3%
2041	1,108	12,460	1124.3%
2042	852	10,141	1190.2%
2043	655	7,979	1218.1%
2044	503	6,147	1220.9%
2045	387	4,725	1220.7%
2046	298	3,632	1220.6%
2047	226	2,764	1220.6%
2048	0	0	0.0%
	<u>Earned Premium</u>	<u>Incurred Claims</u>	<u>Loss Ratio</u>
Past Experience @ 4.5%	30,463,830	18,357,192	60.3%
Anticipated Experience @ 4.5%	1,796,793	3,915,075	217.9%
Lifetime Experience @ 4.5%	32,260,624	22,272,267	69.0%

Lifetime Experience (Nationwide) as of 12/31/2016
Original Pricing Assumptions
All Benefit Periods - Post-Rate Stabilization

Year	Earned Premium	Incurred Claims	Loss Ratio
1997	0	0	0.0%
1998	0	0	0.0%
1999	0	0	0.0%
2000	0	0	0.0%
2001	19,458	3,608	18.5%
2002	418,103	89,458	21.4%
2003	2,529,171	652,395	25.8%
2004	4,351,523	1,428,970	32.8%
2005	4,593,068	1,780,712	38.8%
2006	4,118,478	1,901,383	46.2%
2007	3,651,764	2,005,995	54.9%
2008	3,227,299	2,022,062	62.7%
2009	2,836,715	1,990,370	70.2%
2010	2,477,562	1,941,735	78.4%
2011	2,149,147	1,880,641	87.5%
2012	1,851,088	1,893,339	102.3%
2013	1,582,790	1,948,656	123.1%
2014	1,343,296	1,738,983	129.5%
2015	1,131,286	1,496,347	132.3%
2016	945,340	1,347,259	142.5%
Total	37,226,086	24,121,913	64.8%
Interest Adjusted	55,112,832	33,043,193	60.0%
	<u>Earned Premium</u>	<u>Incurred Claims</u>	<u>Loss Ratio</u>
2017	783,941	1,213,252	154.8%
2018	645,302	1,084,659	168.1%
2019	527,351	966,865	183.3%
2020	427,860	857,774	200.5%
2021	344,689	755,121	219.1%
2022	275,834	660,258	239.4%
2023	219,399	574,547	261.9%
2024	173,623	497,008	286.3%
2025	136,769	428,306	313.2%
2026	107,253	367,644	342.8%
2027	83,747	313,649	374.5%
2028	65,134	266,130	408.6%
2029	50,465	225,102	446.1%
2030	38,949	189,629	486.9%
2031	29,953	158,845	530.3%
2032	22,969	132,350	576.2%
2033	17,570	109,774	624.8%
2034	13,420	90,758	676.3%
2035	10,240	74,834	730.8%
2036	7,812	61,552	788.0%
2037	5,964	50,520	847.1%
2038	4,569	41,514	908.6%
2039	3,513	34,220	974.1%
2040	2,708	28,281	1044.3%
2041	2,086	23,343	1119.1%
2042	1,604	19,077	1189.7%
2043	1,232	15,080	1223.7%
2044	947	11,631	1228.1%
2045	728	8,937	1227.9%
2046	559	6,868	1227.8%
2047	226	2,764	1220.6%
2048	0	0	0.0%
	<u>Earned Premium</u>	<u>Incurred Claims</u>	<u>Loss Ratio</u>
Past Experience @ 4.5%	55,112,832	33,043,193	60.0%
Anticipated Experience @ 4.5%	3,365,079	7,251,303	215.5%
Lifetime Experience @ 4.5%	58,477,911	40,294,495	68.9%

Lifetime Experience (Nationwide) as of 12/31/2016
Previous Assumptions
Non-Lifetime Benefit Periods - Post-Rate Stabilization

	Virginia Rate Level	Incurred Claims			
Year	Earned Premium	Discounted to Incurred Year	Loss Ratio		
1997	0	0	0.0%		
1998	0	0	0.0%		
1999	0	0	0.0%		
2000	0	0	0.0%		
2001	5,564	0	0.0%		
2002	124,727	0	0.0%		
2003	959,199	0	0.0%		
2004	1,875,935	209,237	11.2%		
2005	2,108,071	65,865	3.1%		
2006	2,052,755	535,770	26.1%		
2007	2,193,371	347,698	15.9%		
2008	2,429,145	430,039	17.7%		
2009	2,361,912	654,237	27.7%		
2010	2,269,480	1,284,179	56.6%		
2011	2,169,916	622,344	28.7%		
2012	2,008,481	1,205,371	60.0%		
2013	2,161,008	1,454,616	67.3%		
2014	2,241,043	1,282,810	57.2%		
2015	2,185,408	1,305,648	59.7%		
2016	2,314,764	2,274,370	98.3%		
Total	29,460,781	11,672,183	39.6%		
Interest Adjusted	40,099,713	14,206,516	35.4%		
	Earned Premium w/o Increase	Earned Premium w/Increase	Incurred Claims	Loss Ratio w/o Increase	Loss Ratio w/Increase
2017	2,121,503	2,121,503	2,075,041	97.8%	97.8%
2018	1,936,839	1,936,839	2,190,641	113.1%	113.1%
2019	1,761,692	1,761,692	2,372,318	134.7%	134.7%
2020	1,595,942	1,595,942	2,552,380	159.9%	159.9%
2021	1,438,568	1,438,568	2,701,340	187.8%	187.8%
2022	1,290,548	1,290,548	2,947,644	228.4%	228.4%
2023	1,153,699	1,153,699	2,926,924	253.7%	253.7%
2024	1,026,598	1,026,598	2,822,021	274.9%	274.9%
2025	906,379	906,379	2,884,809	318.3%	318.3%
2026	797,495	797,495	2,953,133	370.3%	370.3%
2027	699,773	699,773	3,017,559	431.2%	431.2%
2028	611,255	611,255	3,063,696	501.2%	501.2%
2029	531,433	531,433	3,092,415	581.9%	581.9%
2030	459,598	459,598	3,089,463	672.2%	672.2%
2031	395,108	395,108	3,076,720	778.7%	778.7%
2032	337,815	337,815	3,066,640	907.8%	907.8%
2033	287,756	287,756	2,974,413	1033.7%	1033.7%
2034	244,034	244,034	2,808,574	1150.9%	1150.9%
2035	205,862	205,862	2,683,830	1303.7%	1303.7%
2036	172,561	172,561	2,553,317	1479.7%	1479.7%
2037	143,852	143,852	2,422,461	1684.0%	1684.0%
2038	119,306	119,306	2,287,851	1917.6%	1917.6%
2039	98,500	98,500	2,138,009	2170.6%	2170.6%
2040	80,835	80,835	1,971,143	2438.5%	2438.5%
2041	65,712	65,712	1,808,202	2751.7%	2751.7%
2042	52,996	52,996	1,645,561	3105.1%	3105.1%
2043	42,542	42,542	1,488,782	3499.6%	3499.6%
	Earned Premium w/o Increase	Earned Premium With Increase	Incurred Claims	Loss Ratio w/o Increase	Loss Ratio With Increase
Past Experience @ 4.5%	40,099,713	40,099,713	14,206,516	35.4%	35.4%
Anticipated Experience @ 4.5%	14,169,005	14,169,005	41,480,440	292.8%	292.8%
Lifetime Experience @ 4.5%	54,268,718	54,268,718	55,686,956	102.6%	102.6%

Lifetime Experience (Nationwide) as of 12/31/2016
Previous Assumptions
Lifetime Benefit Period - Post-Rate Stabilization

	Virginia Rate Level	Incurred Claims Discounted to			
Year	Earned Premium	Incurred Year	Loss Ratio		
1997	0	0	0.0%		
1998	0	0	0.0%		
1999	0	0	0.0%		
2000	0	0	0.0%		
2001	13,893	0	0.0%		
2002	294,797	487	0.2%		
2003	1,597,074	0	0.0%		
2004	2,473,678	21,213	0.9%		
2005	2,593,563	204,578	7.9%		
2006	2,533,916	305,634	12.1%		
2007	2,800,444	1,613,672	57.6%		
2008	3,173,379	1,541,097	48.6%		
2009	3,111,634	360,417	11.6%		
2010	3,061,987	1,228,367	40.1%		
2011	3,009,969	2,158,778	71.7%		
2012	2,739,249	1,596,723	58.3%		
2013	3,013,462	1,799,433	59.7%		
2014	3,550,214	3,246,046	91.4%		
2015	3,598,022	2,858,807	79.5%		
2016	3,093,374	3,611,461	116.7%		
Total	40,658,657	20,546,713	50.5%		
Interest Adjusted	55,023,307	24,855,858	45.2%		
	Earned Premium w/o Increase	Earned Premium w/Increase	Incurred Claims	Loss Ratio w/o Increase	Loss Ratio w/Increase
2017	2,834,026	2,834,026	2,695,932	95.1%	95.1%
2018	2,585,503	3,361,154	2,880,817	111.4%	85.7%
2019	2,349,740	3,512,861	3,177,884	135.2%	90.5%
2020	2,126,604	3,179,273	3,591,285	168.9%	113.0%
2021	1,914,405	2,862,036	3,826,248	199.9%	133.7%
2022	1,714,770	2,563,581	4,175,619	243.5%	162.9%
2023	1,530,330	2,287,844	4,145,915	270.9%	181.2%
2024	1,359,096	2,031,849	4,034,128	296.8%	198.5%
2025	1,197,898	1,790,857	4,180,604	349.0%	233.4%
2026	1,051,726	1,572,330	4,428,578	421.1%	281.7%
2027	920,400	1,375,998	4,633,772	503.5%	336.8%
2028	801,652	1,198,470	4,748,327	592.3%	396.2%
2029	694,730	1,038,621	4,837,950	696.4%	465.8%
2030	598,754	895,137	4,919,224	821.6%	549.5%
2031	512,831	766,683	4,934,526	962.2%	643.6%
2032	436,788	652,999	4,961,334	1135.9%	759.8%
2033	370,636	554,101	4,847,737	1308.0%	874.9%
2034	313,054	468,016	4,620,754	1476.0%	987.3%
2035	262,983	393,160	4,459,306	1695.7%	1134.2%
2036	219,540	328,212	4,299,556	1958.4%	1310.0%
2037	182,265	272,486	4,134,355	2268.3%	1517.3%
2038	150,542	225,061	3,943,035	2619.2%	1752.0%
2039	123,740	184,992	3,711,117	2999.1%	2006.1%
2040	101,084	151,120	3,461,407	3424.3%	2290.5%
2041	81,811	122,307	3,212,425	3926.6%	2626.5%
2042	65,704	98,227	2,991,242	4552.6%	3045.2%
2043	52,543	78,551	2,757,997	5249.1%	3511.1%
	Earned Premium w/o Increase	Earned Premium With Increase	Incurred Claims	Loss Ratio w/o Increase	Loss Ratio With Increase
Past Experience @ 4.5%	55,023,307	55,023,307	24,855,858	45.2%	45.2%
Anticipated Experience @ 4.5%	18,779,268	26,230,740	62,905,181	335.0%	239.8%
Lifetime Experience @ 4.5%	73,802,575	81,254,048	87,761,039	118.9%	108.0%

Lifetime Experience (Nationwide) as of 12/31/2016**Previous Assumptions****All Benefit Periods - Post-Rate Stabilization**

	Virginia Rate Level	Incurred Claims Discounted to			
Year	Earned Premium	Incurred Year	Loss Ratio		
1997	0	0	0.0%		
1998	0	0	0.0%		
1999	0	0	0.0%		
2000	0	0	0.0%		
2001	19,458	0	0.0%		
2002	419,525	487	0.1%		
2003	2,556,274	0	0.0%		
2004	4,349,613	230,450	5.3%		
2005	4,701,633	270,443	5.8%		
2006	4,586,671	841,404	18.3%		
2007	4,993,815	1,961,370	39.3%		
2008	5,602,524	1,971,136	35.2%		
2009	5,473,546	1,014,654	18.5%		
2010	5,331,468	2,512,545	47.1%		
2011	5,179,885	2,781,122	53.7%		
2012	4,747,730	2,802,095	59.0%		
2013	5,174,470	3,254,050	62.9%		
2014	5,791,257	4,528,856	78.2%		
2015	5,783,430	4,164,454	72.0%		
2016	5,408,138	5,885,831	108.8%		
Total	70,119,437	32,218,896	45.9%		
Interest Adjusted	95,123,020	39,062,374	41.1%		
	Earned Premium w/o Increase	Earned Premium w/Increase	Incurred Claims	Loss Ratio w/o Increase	Loss Ratio w/Increase
2017	4,955,529	4,955,529	4,770,973	96.3%	96.3%
2018	4,522,341	5,297,992	5,071,458	112.1%	95.7%
2019	4,111,432	5,274,554	5,550,203	135.0%	105.2%
2020	3,722,547	4,775,216	6,143,665	165.0%	128.7%
2021	3,352,974	4,300,605	6,527,587	194.7%	151.8%
2022	3,005,318	3,854,130	7,123,263	237.0%	184.8%
2023	2,684,029	3,441,543	7,072,839	263.5%	205.5%
2024	2,385,694	3,058,447	6,856,149	287.4%	224.2%
2025	2,104,277	2,697,237	7,065,412	335.8%	262.0%
2026	1,849,221	2,369,826	7,381,711	399.2%	311.5%
2027	1,620,173	2,075,771	7,651,331	472.3%	368.6%
2028	1,412,908	1,809,726	7,812,023	552.9%	431.7%
2029	1,226,163	1,570,055	7,930,365	646.8%	505.1%
2030	1,058,352	1,354,735	8,008,687	756.7%	591.2%
2031	907,940	1,161,791	8,011,246	882.4%	689.6%
2032	774,604	990,814	8,027,974	1036.4%	810.2%
2033	658,392	841,857	7,822,150	1188.1%	929.2%
2034	557,089	712,051	7,429,328	1333.6%	1043.4%
2035	468,845	599,021	7,143,135	1523.6%	1192.5%
2036	392,100	500,773	6,852,873	1747.7%	1368.5%
2037	326,116	416,337	6,556,816	2010.6%	1574.9%
2038	269,848	344,367	6,230,886	2309.0%	1809.4%
2039	222,240	283,492	5,849,126	2631.9%	2063.2%
2040	181,919	231,956	5,432,550	2986.2%	2342.1%
2041	147,523	188,019	5,020,627	3403.3%	2670.3%
2042	118,699	151,223	4,636,803	3906.3%	3066.2%
2043	95,085	121,093	4,246,779	4466.3%	3507.0%
	Earned Premium w/o Increase	Earned Premium With Increase	Incurred Claims	Loss Ratio w/o Increase	Loss Ratio With Increase
Past Experience @ 4.5%	95,123,020	95,123,020	39,062,374	41.1%	41.1%
Anticipated Experience @ 4.5%	32,948,273	40,399,745	104,385,621	316.8%	258.4%
Lifetime Experience @ 4.5%	128,071,293	135,522,765	143,447,995	112.0%	105.8%

Lifetime Experience (Nationwide) as of 12/31/2016
Current Assumptions
Non-Lifetime Benefit Periods - Post-Rate Stabilization

	Virginia		Incurred Claims		(1)	(2)	(3)	(4)
Year	Rate Level		Discounted to		Rate Increase	Additional Premium	Total	Active Life
	Earned Premium		Incurred Year	Loss Ratio	Percentage	from Increase	Premium	Reserve
1997	0		0	0.0%				0
1998	0		0	0.0%				0
1999	0		0	0.0%				0
2000	0		0	0.0%				0
2001	5,564		0	0.0%				0
2002	124,727		0	0.0%				3,043
2003	959,199		0	0.0%				89,700
2004	1,875,935		209,237	11.2%				728,955
2005	2,108,071		65,865	3.1%				1,967,158
2006	2,052,755		535,770	26.1%				3,370,700
2007	2,193,371		347,698	15.9%				4,638,423
2008	2,429,145		430,039	17.7%				5,838,959
2009	2,361,912		654,237	27.7%				7,111,894
2010	2,269,480		1,284,179	56.6%				8,249,629
2011	2,169,916		622,344	28.7%				9,433,803
2012	2,008,481		1,205,371	60.0%				10,886,244
2013	2,161,008		1,454,616	67.3%				12,159,656
2014	2,241,043		1,282,810	57.2%				13,403,621
2015	2,185,408		1,305,648	59.7%				14,450,111
2016	2,314,764		2,274,370	98.3%				17,417,406
Total	29,460,781		11,672,183	39.6%				
Interest Adjusted	40,099,713		14,206,516	35.4%				
	Virginia		Incurred Claims		(1)	(2)	(3)	(4)
	Rate Level		Discounted to		Rate Increase	Additional Premium	Total	Active Life
	Earned Premium		Incurred Year	Loss Ratio	Percentage	from Increase	Premium	Reserve
2017	2,103,675	2,103,675	2,441,599	116.1%	116.1%	0	2,103,675	20,350,870
2018	1,906,694	1,906,694	2,511,229	131.7%	131.7%	0.0%	0	1,906,694
2019	1,726,135	1,726,135	2,629,277	152.3%	152.3%	0.0%	0	1,726,135
2020	1,557,544	1,557,544	2,741,343	176.0%	176.0%	0	1,557,544	21,713,124
2021	1,401,695	1,401,695	2,837,703	202.4%	202.4%	0	1,401,695	21,857,456
2022	1,255,152	1,255,152	2,961,422	235.9%	235.9%	0	1,255,152	21,840,994
2023	1,119,540	1,119,540	2,920,464	260.9%	260.9%	0	1,119,540	21,757,082
2024	994,441	994,441	2,868,076	288.4%	288.4%	0	994,441	21,603,948
2025	880,285	880,285	2,909,640	330.5%	330.5%	0	880,285	21,330,623
2026	776,440	776,440	2,953,633	380.4%	380.4%	0	776,440	20,950,811
2027	682,050	682,050	2,988,338	438.1%	438.1%	0	682,050	20,471,323
2028	596,783	596,783	3,003,458	503.3%	503.3%	0	596,783	19,896,272
2029	520,102	520,102	3,008,340	578.4%	578.4%	0	520,102	19,213,446
2030	451,369	451,369	2,994,467	663.4%	663.4%	0	451,369	18,433,445
2031	390,085	390,085	2,972,750	762.1%	762.1%	0	390,085	17,577,035
2032	335,521	335,521	2,941,765	876.8%	876.8%	0	335,521	16,647,006
2033	287,623	287,623	2,847,425	990.0%	990.0%	0	287,623	15,685,135
2034	245,721	245,721	2,717,799	1106.1%	1106.1%	0	245,721	14,708,232
2035	209,030	209,030	2,606,083	1246.7%	1246.7%	0	209,030	13,707,799
2036	176,967	176,967	2,503,609	1414.7%	1414.7%	0	176,967	12,693,564
2037	149,059	149,059	2,406,554	1614.5%	1614.5%	0	149,059	11,675,566
2038	124,907	124,907	2,297,523	1839.4%	1839.4%	0	124,907	10,662,375
2039	104,109	104,109	2,168,537	2083.0%	2083.0%	0	104,109	9,659,602
2040	86,262	86,262	2,021,480	2343.4%	2343.4%	0	86,262	8,680,135
2041	71,110	71,110	1,875,531	2637.5%	2637.5%	0	71,110	7,738,671
2042	58,263	58,263	1,728,426	2966.6%	2966.6%	0	58,263	6,842,645
2043	47,470	47,470	1,578,877	3326.0%	3326.0%	0	47,470	5,999,414
2044	38,441	38,441	1,419,839	3693.5%	3693.5%	0	38,441	5,218,640
2045	30,909	30,909	1,265,274	4093.5%	4093.5%	0	30,909	4,500,413
2046	24,741	24,741	1,118,209	4519.7%	4519.7%	0	24,741	3,852,788
2047	19,707	19,707	983,940	4992.8%	4992.8%	0	19,707	3,273,019
2048	15,601	15,601	860,403	5515.2%	5515.2%	0	15,601	2,757,250
2049	12,248	12,248	744,448	6077.9%	6077.9%	0	12,248	2,302,183
2050	9,531	9,531	636,224	6675.6%	6675.6%	0	9,531	1,905,983
2051	7,376	7,376	539,837	7319.3%	7319.3%	0	7,376	1,567,332
2052	5,690	5,690	455,386	8003.6%	8003.6%	0	5,690	1,279,822
2053	4,362	4,362	382,092	8760.3%	8760.3%	0	4,362	1,034,868
2054	3,308	3,308	316,499	9567.5%	9567.5%	0	3,308	828,832
2055	2,470	2,470	259,048	10488.6%	10488.6%	0	2,470	657,514
2056	1,827	1,827	209,494	11464.3%	11464.3%	0	1,827	519,467
2057	1,353	1,353	168,770	12477.1%	12477.1%	0	1,353	407,939
2058	999	999	135,772	13593.5%	13593.5%	0	999	317,090
2059	729	729	108,167	14847.1%	14847.1%	0	729	243,856
2060	519	519	85,051	16403.0%	16403.0%	0	519	184,944
2061	362	362	65,449	18087.4%	18087.4%	0	362	140,000
2062	256	256	49,800	19484.8%	19484.8%	0	256	106,466
2063	184	184	38,568	21001.9%	21001.9%	0	184	79,554
2064	131	131	29,851	22796.1%	22796.1%	0	131	58,291
2065	92	92	22,790	24883.0%	24883.0%	0	92	44,434
2066	62	62	16,852	27063.2%	27063.2%	0	62	34,436
2067	43	43	12,297	28470.1%	28470.1%	0	43	27,601
2068	29	29	9,132	31492.2%	31492.2%	0	29	23,035
2069	12	12	6,749	57833.5%	57833.5%	0	12	17,033
2070	1	1	4,822	572708.6%	572708.6%	0	1	11,660
2071	0	0	3,310	9145018.7%	9145018.7%	0	0	6,641
2072	0	0	0	0.0%	0.0%	0	0	3,140
2073	0	0	0	0.0%	0.0%	0	0	1,122
	Earned Premium	Earned Premium	Incurred Claims	Loss Ratio	Loss Ratio			
	w/o Increase	With Increase		w/o Increase	With Increase			
Past Experience @ 4.5%	40,099,713	40,099,713	14,206,516	35.4%	35.4%			
Anticipated Experience @ 4.5%	13,949,558	13,949,558	44,804,279	321.2%	321.2%			
Lifetime Experience @ 4.5%	54,049,271	54,049,271	59,010,795	109.2%	109.2%			

Lifetime Experience (Nationwide) as of 12/31/2016
Current Assumptions
Lifetime Benefit Period - Post-Rate Stabilization

	Virginia		Incurred Claims		(1)	(2)	(3)	(4)
	Rate Level		Discounted to		Rate	Additional		Active
Year	Earned Premium		Incurred Year	Loss Ratio	Increase	Premium	Total	Life
					Percentage <th>from Increase</th> <th>Premium</th> <th>Reserve</th>	from Increase	Premium	Reserve
1997	0		0	0.0%				0
1998	0		0	0.0%				0
1999	0		0	0.0%				0
2000	0		0	0.0%				0
2001	13,893		0	0.0%				0
2002	294,797		487	0.2%				8,262
2003	1,597,074		0	0.0%				227,631
2004	2,473,678		21,213	0.9%				1,589,231
2005	2,593,563		204,578	7.9%				3,781,318
2006	2,533,916		305,634	12.1%				6,229,314
2007	2,800,444		1,613,672	57.6%				8,648,714
2008	3,173,379		1,541,097	48.6%				11,031,093
2009	3,111,634		360,417	11.6%				13,551,596
2010	3,061,987		1,228,367	40.1%				16,005,879
2011	3,009,969		2,158,778	71.7%				18,558,529
2012	2,739,249		1,596,723	58.3%				20,482,673
2013	3,013,462		1,799,433	59.7%				21,986,587
2014	3,550,214		3,246,046	91.4%				24,205,032
2015	3,598,022		2,858,807	79.5%				26,148,779
2016	3,093,374		3,611,461	116.7%				25,726,264
Total	40,658,657		20,546,713	50.5%				
Interest Adjusted	55,023,307		24,855,858	45.2%	(1)	(2)	(3)	(4)
	Earned Premium	Earned Premium		Loss Ratio	Rate	Additional		Active
	w/o Increase	w/Increase	Incurred Claims	w/o Increase	Increase	Premium	Total	Life
				w/Increase	Percentage	from Increase	Premium	Reserve
2017	2,863,130	2,863,130	3,729,446	130.3%		0	2,863,130	26,696,506
2018	2,645,210	3,438,773	3,964,610	149.9%	30.0%	793,563	3,438,773	28,210,485
2019	2,438,020	3,644,840	4,301,277	176.4%	15.0%	1,206,820	3,644,840	29,534,147
2020	2,238,632	3,346,754	4,719,597	210.8%		1,108,123	3,346,754	30,612,800
2021	2,048,931	3,063,151	5,030,363	245.5%		1,014,221	3,063,151	31,521,013
2022	1,866,372	2,790,226	5,414,685	290.1%		923,854	2,790,226	32,200,101
2023	1,695,673	2,535,032	5,515,268	325.3%		839,358	2,535,032	32,825,818
2024	1,536,211	2,296,635	5,536,868	360.4%		760,424	2,296,635	33,443,233
2025	1,388,425	2,075,696	5,814,815	418.8%		687,271	2,075,696	33,891,786
2026	1,251,302	1,870,696	6,095,202	487.1%		619,394	1,870,696	34,180,871
2027	1,123,971	1,680,336	6,358,189	565.7%		556,365	1,680,336	34,307,385
2028	1,006,373	1,504,528	6,586,947	654.5%		498,155	1,504,528	34,266,707
2029	897,839	1,342,269	6,806,441	758.1%		444,430	1,342,269	34,015,704
2030	797,528	1,192,304	7,034,521	882.0%		394,776	1,192,304	33,535,835
2031	705,524	1,054,758	7,190,450	1019.2%		349,234	1,054,758	32,867,584
2032	620,741	928,008	7,346,195	1183.5%		307,267	928,008	31,984,540
2033	544,307	813,739	7,340,680	1348.6%		269,432	813,739	30,971,465
2034	476,032	711,668	7,205,423	1513.6%		235,636	711,668	29,890,104
2035	414,492	619,665	7,148,030	1724.5%		205,173	619,665	28,673,259
2036	359,056	536,788	7,097,772	1976.8%		177,733	536,788	27,334,738
2037	309,440	462,613	7,034,479	2273.3%		153,173	462,613	25,886,493
2038	265,393	396,763	6,906,734	2602.5%		131,370	396,763	24,346,074
2039	226,499	338,616	6,696,674	2956.6%		112,117	338,616	22,718,375
2040	192,144	287,255	6,434,822	3349.0%		95,111	287,255	21,033,028
2041	162,117	242,366	6,132,373	3782.7%		80,248	242,366	19,329,990
2042	135,825	203,059	5,826,066	4289.4%		67,233	203,059	17,611,072
2043	113,133	169,134	5,461,355	4827.4%		56,001	169,134	15,912,550
2044	93,946	140,449	5,015,651	5338.9%		46,503	140,449	14,287,865
2045	77,532	115,911	4,586,231	5915.2%		38,379	115,911	12,725,677
2046	63,657	95,167	4,165,633	6543.9%		31,510	95,167	11,260,229
2047	52,020	77,769	3,768,467	7244.3%		25,750	77,769	9,890,769
2048	42,270	63,193	3,383,056	8003.5%		20,924	63,193	8,616,224
2049	34,167	51,079	3,002,230	8787.0%		16,913	51,079	7,440,833
2050	27,412	40,980	2,636,170	9616.9%		13,569	40,980	6,369,988
2051	21,861	32,682	2,295,023	10498.5%		10,821	32,682	5,420,773
2052	17,340	25,923	1,996,450	11513.6%		8,583	25,923	4,573,283
2053	13,623	20,367	1,721,447	12636.0%		6,744	20,367	3,814,963
2054	10,659	15,935	1,454,784	13649.0%		5,276	15,935	3,157,478
2055	8,268	12,360	1,217,445	14725.0%		4,093	12,360	2,584,056
2056	6,364	9,513	1,007,685	15835.3%		3,150	9,513	2,106,425
2057	4,886	7,305	833,829	17065.6%		2,419	7,305	1,707,614
2058	3,751	5,607	688,692	18361.9%		1,857	5,607	1,370,446
2059	2,846	4,255	562,273	19754.1%		1,409	4,255	1,083,936
2060	2,137	3,195	448,632	20991.2%		1,058	3,195	843,255
2061	1,590	2,376	349,375	21979.3%		787	2,376	653,460
2062	1,188	1,776	273,927	23062.4%		588	1,776	508,407
2063	889	1,329	217,653	24476.2%		440	1,329	389,053
2064	656	981	171,143	26070.2%		325	981	296,085
2065	477	713	131,979	27678.7%		236	713	226,859
2066	342	511	98,012	28680.8%		169	511	176,836
2067	243	363	72,892	30055.8%		120	363	140,747
2068	160	239	54,860	34330.1%		79	239	112,468
2069	96	143	41,345	43224.9%		47	143	87,408
2070	1	1	29,756	5859637.0%		0	1	63,290
2071	0	0	5	53352.6%		0	0	37,592
2072	0	0	0	0.0%		0	0	21,906
2073	0	0	0	0.0%		0	0	10,361
	Earned Premium	Earned Premium		Loss Ratio	Loss Ratio			
	w/o Increase	With Increase	Incurred Claims	w/o Increase	With Increase			
	Past Experience @ 4.5%	55,023,307	55,023,307	24,855,858	45.2%	45.2%		
	Anticipated Experience @ 4.5%	21,101,562	29,677,578	101,743,223	482.2%	342.8%		
Lifetime Experience @ 4.5%	76,124,870	84,700,885	126,599,081	166.3%	149.5%			

Lifetime Experience (Nationwide) as of 12/31/2016

Current Assumptions
All Benefit Periods - Post-Rate Stabilization

Year	Virginia		Incurred Claims		(1)	(2)	(3)	(4)
	Rate Level	Incurred Claims	Discounted to	Loss Ratio	Rate Increase	Additional Premium	Total Premium	Active Life Reserve
	Earned Premium	Incurred Year			Percentage	from Increase		
1997	0	0	0	0.0%				0
1998	0	0	0	0.0%				0
1999	0	0	0	0.0%				0
2000	0	0	0	0.0%				0
2001	19,458	0	0	0.0%				0
2002	419,525	487	0	0.1%				11,304
2003	2,556,274	0	0	0.0%				317,331
2004	4,349,613	230,450	0	5.3%				2,318,186
2005	4,701,633	270,443	0	5.8%				5,748,476
2006	4,586,671	841,404	0	18.3%				9,600,014
2007	4,993,815	1,961,370	0	39.3%				13,287,137
2008	5,602,524	1,971,136	0	35.2%				16,870,052
2009	5,473,546	1,014,654	0	18.5%				20,663,490
2010	5,331,468	2,512,545	0	47.1%				24,255,507
2011	5,179,885	2,781,122	0	53.7%				27,992,331
2012	4,747,730	2,802,095	0	59.0%				31,368,917
2013	5,174,470	3,254,050	0	62.9%				34,146,243
2014	5,791,257	4,528,856	0	78.2%				37,608,653
2015	5,783,430	4,164,454	0	72.0%				40,598,890
2016	5,408,138	5,885,831	0	108.8%				43,143,670
Total	70,119,437	32,218,896	0	45.9%				
Interest Adjusted	95,123,020	39,062,374	0	41.1%				
	Virginia		Incurred Claims		(1)	(2)	(3)	(4)
	Earned Premium	Earned Premium	Incurred Claims	Loss Ratio	Rate Increase	Additional Premium	Total Premium	Active Life Reserve
	w/o Increase	w/Increase		w/o Increase	Percentage	from Increase		
2017	4,966,804	4,966,804	6,171,046	124.2%		0	4,966,804	47,047,376
2018	4,551,904	5,345,467	6,475,838	142.3%	17.4%	793,563	5,345,467	49,187,670
2019	4,164,155	5,370,975	6,930,555	166.4%	9.8%	1,206,820	5,370,975	50,962,224
2020	3,796,176	4,904,299	7,460,940	196.5%		1,108,123	4,904,299	52,325,923
2021	3,450,626	4,464,846	7,868,066	228.0%		1,014,221	4,464,846	53,378,469
2022	3,121,523	4,045,377	8,376,107	268.3%		923,854	4,045,377	54,041,095
2023	2,815,213	3,654,572	8,435,731	299.6%		839,358	3,654,572	54,582,900
2024	2,530,652	3,291,076	8,404,944	332.1%		760,424	3,291,076	55,047,181
2025	2,268,710	2,955,981	8,724,455	384.6%		687,271	2,955,981	55,222,409
2026	2,027,742	2,647,136	9,048,836	446.3%		619,394	2,647,136	55,131,682
2027	1,806,020	2,362,386	9,346,527	517.5%		556,365	2,362,386	54,778,707
2028	1,603,156	2,101,310	9,590,405	598.2%		498,155	2,101,310	54,162,979
2029	1,417,940	1,862,370	9,814,781	692.2%		444,430	1,862,370	53,229,150
2030	1,248,897	1,643,673	10,028,988	803.0%		394,776	1,643,673	51,969,280
2031	1,095,608	1,444,842	10,163,201	927.6%		349,234	1,444,842	50,444,618
2032	956,262	1,263,529	10,287,961	1075.9%		307,267	1,263,529	48,631,546
2033	831,930	1,101,363	10,188,105	1224.6%		269,432	1,101,363	46,656,600
2034	721,753	957,389	9,923,222	1374.9%		235,636	957,389	44,598,336
2035	623,522	828,695	9,754,113	1564.4%		205,173	828,695	42,381,058
2036	536,022	713,755	9,601,381	1791.2%		177,733	713,755	40,028,302
2037	458,499	611,672	9,441,033	2059.1%		153,173	611,672	37,562,059
2038	390,301	521,670	9,204,257	2358.2%		131,370	521,670	35,008,449
2039	330,608	442,725	8,865,212	2681.5%		112,117	442,725	32,377,977
2040	278,406	373,517	8,456,301	3037.4%		95,111	373,517	29,713,163
2041	233,227	313,475	8,007,904	3433.5%		80,248	313,475	27,068,661
2042	194,088	261,322	7,554,492	3892.3%		67,233	261,322	24,453,717
2043	160,604	216,605	7,040,232	4383.6%		56,001	216,605	21,911,964
2044	132,387	178,890	6,435,490	4861.1%		46,503	178,890	19,506,505
2045	108,442	146,821	5,851,506	5396.0%		38,379	146,821	17,226,089
2046	88,398	119,908	5,283,842	5977.3%		31,510	119,908	15,113,017
2047	71,727	97,477	4,752,407	6625.7%		25,750	97,477	13,163,789
2048	57,870	78,794	4,243,459	7332.7%		20,924	78,794	11,373,475
2049	46,415	63,328	3,746,679	8072.1%		16,913	63,328	9,743,016
2050	36,942	50,511	3,272,393	8858.1%		13,569	50,511	8,275,971
2051	29,236	40,057	2,834,860	9696.4%		10,821	40,057	6,988,105
2052	23,030	31,613	2,451,836	10646.4%		8,583	31,613	5,853,105
2053	17,985	24,729	2,103,539	11696.1%		6,744	24,729	4,849,831
2054	13,967	19,243	1,771,282	12682.3%		5,276	19,243	3,986,309
2055	10,738	14,830	1,476,494	13750.6%		4,093	14,830	3,241,570
2056	8,191	11,341	1,217,179	14860.2%		3,150	11,341	2,625,892
2057	6,239	8,657	1,002,598	16070.8%		2,419	8,657	2,115,553
2058	4,749	6,606	824,464	17359.1%		1,857	6,606	1,687,535
2059	3,575	4,984	670,440	18754.1%		1,409	4,984	1,327,791
2060	2,656	3,714	533,683	20095.4%		1,058	3,714	1,028,199
2061	1,951	2,738	414,824	21257.6%		787	2,738	793,460
2062	1,443	2,031	323,727	22428.8%		588	2,031	614,873
2063	1,073	1,513	256,221	23881.5%		440	1,513	468,607
2064	787	1,112	200,994	25525.7%		325	1,112	354,376
2065	568	804	154,769	27228.2%		236	804	271,293
2066	404	573	114,864	28431.5%		169	573	211,272
2067	286	406	85,190	29816.1%		120	406	168,348
2068	189	268	63,992	33894.2%		79	268	135,503
2069	107	155	48,094	44813.4%		47	155	104,441
2070	1	2	34,578	2561697.5%		0	2	74,950
2071	0	0	3,315	7377050.8%		0	0	44,233
2072	0	0	0	0.0%		0	0	25,046
2073	0	0	0	0.0%		0	0	11,483
	Virginia		Incurred Claims		Loss Ratio		Loss Ratio	
	Earned Premium	Earned Premium	Incurred Claims	w/o Increase	With Increase			
	w/o Increase	With Increase						
Past Experience @ 4.5%	95,123,020	95,123,020	39,062,374	41.1%	41.1%			
Anticipated Experience @ 4.5%	35,051,120	43,627,136	146,547,502	418.1%	335.9%			
Lifetime Experience @ 4.5%	130,174,140	138,750,156	185,609,876	142.6%	133.8%			

Lifetime Experience (Nationwide) as of 12/31/2016

Non-Lifetime Benefit Periods - Pre-Stabilization Experience

Year	Non-Interest Adjusted			Interest Adjusted		
	Original Premium	VA Rate Level Increased Premium	Incurred Claims	Original Premium	VA Rate Level Increased Premium	Incurred Claims
1997	493,144	0	0	1,163,432	0	0
1998	2,879,303	0	107,337	6,500,380	0	242,326
1999	5,164,376	0	620,403	11,157,140	0	1,340,321
2000	8,538,676	0	1,279,039	17,652,627	0	2,644,250
2001	13,291,034	0	2,429,334	26,294,279	0	4,806,066
2002	19,718,256	0	4,609,517	37,329,718	0	8,726,531
2003	26,161,646	0	3,660,231	47,395,268	0	6,630,991
2004	26,346,243	0	5,771,160	45,674,344	0	10,004,992
2005	26,128,236	0	8,629,972	43,345,840	0	14,316,825
2006	25,202,065	0	8,814,082	40,008,952	0	13,992,591
2007	24,180,820	2,375,740	11,678,078	36,734,640	3,609,140	17,740,920
2008	23,092,348	5,455,520	13,342,930	33,570,404	7,930,939	19,397,229
2009	21,968,158	5,202,555	15,858,480	30,560,877	7,237,505	22,061,434
2010	20,871,914	4,947,543	17,408,466	27,785,497	6,586,360	23,174,821
2011	19,787,216	4,702,852	20,794,851	25,207,182	5,991,023	26,490,820
2012	19,741,981	4,711,682	25,050,446	24,066,560	5,743,799	30,537,872
2013	19,064,116	7,733,981	24,236,077	22,239,432	9,022,151	28,272,834
2014	18,047,452	9,564,271	24,831,729	20,146,826	10,676,837	27,720,285
2015	17,591,371	9,726,721	27,001,863	18,792,049	10,390,607	28,844,842
2016	17,436,256	9,712,107	34,148,099	17,824,255	9,928,225	34,907,977
Total	355,704,611	64,132,973	250,272,094	533,449,703	77,116,586	321,853,927
2017	15,805,260	8,803,632	27,636,882	15,461,210	8,611,994	27,035,282
2018	14,325,310	7,979,290	28,416,518	13,410,025	7,469,470	26,600,906
2019	12,968,744	7,223,674	29,611,006	11,617,353	6,470,941	26,525,430
2020	11,702,092	6,518,141	30,735,018	10,031,283	5,587,489	26,346,714
2021	10,531,170	5,865,930	31,622,766	8,638,798	4,811,866	25,940,393
2022	9,430,165	5,252,663	32,784,022	7,402,522	4,123,252	25,734,909
2023	8,411,290	4,685,143	32,382,296	6,318,394	3,519,386	24,324,938
2024	7,471,404	4,161,620	31,821,503	5,370,689	2,991,509	22,874,337
2025	6,613,726	3,683,888	32,100,913	4,549,438	2,534,066	22,081,518
2026	5,833,520	3,249,309	32,393,466	3,839,954	2,138,879	21,323,214
2027	5,124,353	2,854,297	32,599,205	3,227,884	1,797,952	20,534,586
2028	4,483,728	2,497,465	32,613,782	2,702,725	1,505,435	19,659,109
2029	3,907,611	2,176,564	32,495,597	2,254,019	1,255,503	18,744,372
2030	3,391,211	1,888,926	32,191,361	1,871,910	1,042,666	17,769,263
2031	2,930,771	1,632,459	31,791,974	1,548,088	862,295	16,793,116
2032	2,520,826	1,404,116	31,314,292	1,274,208	709,742	15,828,512
2033	2,160,963	1,203,670	30,248,034	1,045,270	582,222	14,631,147
2034	1,846,142	1,028,313	28,846,686	854,535	475,982	13,352,447
2035	1,570,480	874,767	27,601,218	695,634	387,473	12,225,789
2036	1,329,580	740,585	26,458,888	563,569	313,911	11,215,120
2037	1,119,908	623,796	25,380,908	454,253	253,022	10,294,925
2038	938,449	522,722	24,177,026	364,259	202,895	9,384,316
2039	782,185	435,682	22,768,954	290,531	161,828	8,457,199
2040	648,105	360,998	21,186,398	230,363	128,314	7,530,508
2041	534,258	297,585	19,606,995	181,720	101,219	6,669,019
2042	437,740	243,824	18,018,887	142,479	79,362	5,864,926
2043	356,651	198,657	16,419,637	111,087	61,876	5,114,249
2044	288,816	160,872	14,741,503	86,084	47,949	4,393,835
2045	232,228	129,352	13,110,603	66,237	36,894	3,739,456
2046	185,880	103,536	11,561,286	50,734	28,259	3,155,554
2047	148,063	82,472	10,149,439	38,672	21,541	2,650,911
2048	117,209	65,286	8,853,963	29,295	16,318	2,212,965
2049	92,025	51,258	7,641,022	22,010	12,260	1,827,562
2050	71,604	39,884	6,515,510	16,389	9,129	1,491,258
2051	55,414	30,866	5,514,288	12,137	6,760	1,207,751
2052	42,748	23,811	4,640,354	8,960	4,991	972,574
2053	32,770	18,253	3,883,863	6,572	3,661	778,967
2054	24,854	13,844	3,209,977	4,770	2,657	616,086
2055	18,556	10,336	2,619,423	3,408	1,898	481,092
2056	13,729	7,647	2,113,521	2,413	1,344	371,461
2057	10,163	5,661	1,699,948	1,709	952	285,908
2058	7,504	4,180	1,365,341	1,208	673	219,743
2059	5,474	3,049	1,085,897	843	470	167,242
2060	3,896	2,170	852,813	574	320	125,688
2061	2,719	1,514	655,912	383	214	92,506
2062	1,920	1,070	499,460	259	144	67,408
2063	1,380	769	386,898	178	99	49,968
2064	984	548	299,650	122	68	37,033
2065	688	383	228,822	81	45	27,062
2066	468	261	169,082	53	29	19,136
2067	325	181	123,691	35	20	13,396
2068	218	121	91,921	23	13	9,526
2069	88	49	67,772	9	5	6,721
2070	6	4	48,386	1	0	4,592
2071	0	0	33,070	0	0	3,003
2072	0	0	4	0	0	0
2073	0	0	0	0	0	0
Total	138,535,365	77,165,094	865,387,654	104,805,360	58,377,263	487,884,646
Grand Total	494,239,976	141,298,067	1,115,659,748	638,255,064	135,493,849	809,738,573

Minimum Required Loss Ratios	63.0%	80%
Minimum PV Incurred Claims	402,100,690	510,495,770
Dual Loss Ratio Test Met	809,738,573	>

Lifetime Experience (Nationwide) as of 12/31/2016

Lifetime Benefit Period - Pre-Stabilization Experience

Year	Non-Interest Adjusted			Interest Adjusted		
	Original Premium	VA Rate Level Increased Premium	Incurred Claims	Original Premium	VA Rate Level Increased Premium	Incurred Claims
1997	379,977	0	0	896,447	0	0
1998	2,595,131	0	229,543	5,858,826	0	518,221
1999	5,659,399	0	581,891	12,226,592	0	1,257,120
2000	11,774,776	0	1,523,173	24,342,851	0	3,148,966
2001	20,596,912	0	4,549,954	40,747,841	0	9,001,389
2002	30,490,543	0	5,455,216	57,723,330	0	10,327,570
2003	39,924,279	0	9,776,788	72,328,091	0	17,711,939
2004	40,127,736	0	13,187,176	69,566,202	0	22,861,538
2005	39,955,932	0	16,226,697	66,285,511	0	26,919,529
2006	39,035,372	0	15,302,440	61,969,697	0	24,293,033
2007	38,080,489	4,037,414	21,894,757	57,850,522	6,133,495	33,261,735
2008	37,083,250	9,448,086	31,010,819	53,909,619	13,735,116	45,081,847
2009	35,962,664	9,175,958	29,943,118	50,029,255	12,765,081	41,655,198
2010	34,772,654	8,889,439	43,806,976	46,290,698	11,833,964	58,317,535
2011	32,165,428	8,226,381	46,122,333	40,975,940	10,479,689	58,755,816
2012	28,087,687	7,163,021	46,658,968	34,240,435	8,732,117	56,879,849
2013	25,432,785	12,850,857	48,844,490	29,668,865	14,991,294	56,980,019
2014	24,182,135	20,513,719	40,198,060	26,995,126	22,899,982	44,874,107
2015	21,826,988	20,862,928	45,730,248	23,316,762	22,286,901	48,851,510
2016	19,033,110	18,176,366	48,433,867	19,456,643	18,580,834	49,511,638
Total	527,167,248	119,344,168	469,476,515	794,679,255	142,438,472	610,208,562
2017	17,616,448	16,823,473	42,193,074	17,232,973	16,457,259	41,274,614
2018	16,275,618	25,088,583	44,812,166	15,235,723	23,485,602	41,948,989
2019	15,000,806	28,842,125	48,419,978	13,437,667	25,836,670	43,374,438
2020	13,773,997	26,483,333	52,866,944	11,807,364	22,702,079	45,318,673
2021	12,606,793	24,239,144	56,232,539	10,341,447	19,883,552	46,127,975
2022	11,483,532	22,079,445	60,253,140	9,014,380	17,331,995	47,297,707
2023	10,433,249	20,060,060	61,370,608	7,837,250	15,068,719	46,100,383
2024	9,452,096	18,173,593	61,808,534	6,794,476	13,063,773	44,429,995
2025	8,542,793	16,425,272	64,696,069	5,876,401	11,298,586	44,503,014
2026	7,699,091	14,803,081	67,610,519	5,067,978	9,744,226	44,505,072
2027	6,915,639	13,296,734	70,353,930	4,356,235	8,375,754	44,316,690
2028	6,192,076	11,905,536	72,742,987	3,732,493	7,176,482	43,848,404
2029	5,524,279	10,621,559	74,978,474	3,186,559	6,126,813	43,249,687
2030	4,907,081	9,434,870	77,268,721	2,708,653	5,207,940	42,651,450
2031	4,340,991	8,346,445	78,840,270	2,292,993	4,408,748	41,644,907
2032	3,819,335	7,343,454	80,346,493	1,930,569	3,711,914	40,612,940
2033	3,349,048	6,439,231	80,215,409	1,619,954	3,114,693	38,800,651
2034	2,928,963	5,631,531	78,807,595	1,355,747	2,606,702	36,478,166
2035	2,550,310	4,903,494	78,067,955	1,129,644	2,171,972	34,579,716
2036	2,209,221	4,247,681	77,388,940	936,422	1,800,463	32,802,824
2037	1,903,941	3,660,717	76,560,536	772,271	1,484,849	31,054,247
2038	1,632,930	3,139,642	75,029,404	633,822	1,218,652	29,122,674
2039	1,393,619	2,679,519	72,577,912	517,640	995,269	26,958,017
2040	1,182,234	2,273,087	69,572,431	420,214	807,948	24,728,875
2041	997,487	1,917,873	66,153,320	339,280	652,335	22,501,037
2042	835,714	1,606,831	62,671,060	272,015	523,004	20,398,660
2043	696,095	1,338,385	58,591,257	216,814	416,869	18,249,506
2044	578,036	1,111,392	53,748,501	172,289	331,260	16,020,216
2045	477,047	917,220	49,051,209	136,065	261,613	13,990,571
2046	391,674	753,074	44,458,757	106,904	205,545	12,134,636
2047	320,070	615,401	40,130,452	83,598	160,735	10,481,591
2048	260,080	500,057	35,943,278	65,005	124,985	8,983,685
2049	210,224	404,198	31,818,773	50,281	96,675	7,610,339
2050	168,660	324,284	27,874,097	38,603	74,222	6,379,771
2051	134,505	258,613	24,202,988	29,460	56,642	5,300,990
2052	106,691	205,134	20,991,863	22,361	42,994	4,399,696
2053	83,823	161,166	18,033,685	16,812	32,324	3,616,928
2054	65,581	126,092	15,203,525	12,587	24,201	2,917,987
2055	50,871	97,810	12,685,072	9,343	17,964	2,329,784
2056	39,154	75,282	10,457,274	6,881	13,231	1,837,913
2057	30,063	57,802	8,628,492	5,056	9,722	1,451,193
2058	23,077	44,371	7,107,878	3,714	7,141	1,143,968
2059	17,513	33,673	5,783,164	2,697	5,186	890,683
2060	13,150	25,284	4,598,691	1,938	3,726	677,759
2061	9,780	18,805	3,572,283	1,379	2,652	503,815
2062	7,308	14,051	2,797,678	986	1,896	377,578
2063	5,471	10,520	2,215,977	707	1,359	286,192
2064	4,039	7,766	1,739,406	499	960	214,970
2065	2,934	5,641	1,337,719	347	667	158,207
2066	2,103	4,043	990,079	238	458	112,050
2067	1,492	2,869	735,316	162	311	79,635
2068	983	1,890	552,194	102	196	57,227
2069	589	1,132	415,108	58	112	41,168
2070	3	6	298,193	0	1	28,299
2071	0	0	761	0	0	69
2072	0	0	6	0	0	1
2073	0	0	1	0	0	0
Total	177,268,308	317,582,277	2,235,802,685	129,835,053	227,149,647	1,118,906,233
Grand Total	704,435,555	436,926,446	2,705,279,200	924,514,307	369,588,119	1,729,114,794

Minimum Required Loss Ratios	62.8%	80%
Minimum PV Incurred Claims	580,594,985	295,670,495
Dual Loss Ratio Test Met	1,729,114,794	>
		876,265,480

Lifetime Experience (Nationwide) as of 12/31/2016

All Benefit Periods Combined - Pre-Stabilization Experience

Year	Non-Interest Adjusted			Interest Adjusted		
	Original Premium	VA Rate Level Increased Premium	Incurred Claims	Original Premium	VA Rate Level Increased Premium	Incurred Claims
1997	873,120	0	0	2,059,879	0	0
1998	5,474,434	0	336,880	12,359,207	0	760,548
1999	10,823,775	0	1,202,294	23,383,733	0	2,597,441
2000	20,313,452	0	2,802,212	41,995,479	0	5,793,217
2001	33,887,945	0	6,979,288	67,042,120	0	13,807,455
2002	50,208,799	0	10,064,733	95,053,048	0	19,054,101
2003	66,085,925	0	13,437,019	119,723,359	0	24,342,930
2004	66,473,979	0	18,958,336	115,240,546	0	32,866,530
2005	66,084,168	0	24,856,669	109,631,351	0	41,236,354
2006	64,237,437	0	24,116,522	101,978,649	0	38,285,624
2007	62,261,310	6,413,154	33,572,835	94,585,162	9,742,635	51,002,655
2008	60,175,598	14,903,606	44,353,749	87,480,023	21,666,055	64,479,076
2009	57,930,822	14,378,513	45,801,598	80,590,133	20,002,587	63,716,632
2010	55,644,568	13,836,982	61,215,442	74,076,195	18,420,323	81,492,357
2011	51,952,644	12,929,233	66,917,183	66,183,122	16,470,712	85,246,636
2012	47,829,667	11,874,703	71,709,414	58,306,996	14,475,916	87,417,721
2013	44,496,901	20,584,838	73,080,567	51,908,297	24,013,445	85,252,853
2014	42,229,587	30,077,990	65,029,789	47,141,952	33,576,819	72,594,392
2015	39,418,359	30,589,649	72,732,111	42,108,811	32,677,508	77,696,352
2016	36,469,366	27,888,473	82,581,966	37,280,898	28,509,059	84,419,614
Total	882,871,859	183,477,142	719,748,608	1,328,128,958	219,555,058	932,062,488
2017	33,421,708	25,627,104	69,829,956	32,694,183	25,069,253	68,309,896
2018	30,600,928	33,067,873	73,228,684	28,645,747	30,955,073	68,549,895
2019	27,969,550	36,065,800	78,030,984	25,055,020	32,307,611	69,899,868
2020	25,476,088	33,001,473	83,601,961	21,838,647	28,289,568	71,665,387
2021	23,137,963	30,105,074	87,855,305	18,980,245	24,695,418	72,068,368
2022	20,913,697	27,332,107	93,037,162	16,416,902	21,455,247	73,032,616
2023	18,844,539	24,745,203	93,752,904	14,155,644	18,588,106	70,425,322
2024	16,923,500	22,335,213	93,630,038	12,165,165	16,055,282	67,304,332
2025	15,156,519	20,109,160	96,796,982	10,425,839	13,832,652	66,584,532
2026	13,532,612	18,052,390	100,003,985	8,907,931	11,883,105	65,828,286
2027	12,039,991	16,151,031	102,953,135	7,584,119	10,173,706	64,851,276
2028	10,675,804	14,403,001	105,356,769	6,435,218	8,681,918	63,507,512
2029	9,431,890	12,798,124	107,474,071	5,440,578	7,382,317	61,994,059
2030	8,298,292	11,323,796	109,460,081	4,580,562	6,250,606	60,420,713
2031	7,271,762	9,978,903	110,632,245	3,841,081	5,271,044	58,438,023
2032	6,340,160	8,747,570	111,660,785	3,204,776	4,421,656	56,441,452
2033	5,510,010	7,642,901	110,463,443	2,665,223	3,696,915	53,431,797
2034	4,775,105	6,659,844	107,654,281	2,210,283	3,082,684	49,830,612
2035	4,120,790	5,778,262	105,669,173	1,825,278	2,559,445	46,805,505
2036	3,538,802	4,988,266	103,847,828	1,499,991	2,114,375	44,017,944
2037	3,023,849	4,284,513	101,941,444	1,226,524	1,737,871	41,349,173
2038	2,571,378	3,662,364	99,206,430	998,081	1,421,547	38,506,990
2039	2,175,804	3,115,201	95,346,866	808,171	1,157,096	35,415,215
2040	1,830,339	2,634,086	90,758,829	650,577	936,261	32,259,383
2041	1,531,745	2,215,459	85,760,315	521,000	753,554	29,170,055
2042	1,273,454	1,850,655	80,689,947	414,494	602,365	26,263,586
2043	1,052,746	1,537,042	75,010,894	327,900	478,745	23,363,755
2044	866,851	1,272,265	68,490,005	258,373	379,210	20,414,052
2045	709,275	1,046,573	62,161,813	202,302	298,507	17,730,027
2046	577,554	856,610	56,020,043	157,638	233,804	15,290,190
2047	468,133	697,873	50,279,891	122,271	182,276	13,132,502
2048	377,289	565,344	44,797,242	94,300	141,302	11,196,651
2049	302,248	455,456	39,459,796	72,291	108,935	9,437,900
2050	240,265	364,169	34,389,607	54,991	83,350	7,871,028
2051	189,919	289,479	29,717,276	41,596	63,402	6,508,741
2052	149,439	228,945	25,632,216	31,321	47,985	5,372,270
2053	116,592	179,419	21,917,548	23,384	35,985	4,395,896
2054	90,435	139,936	18,413,502	17,357	26,858	3,534,073
2055	69,427	108,146	15,304,495	12,751	19,863	2,810,877
2056	52,883	82,929	12,570,794	9,294	14,575	2,209,374
2057	40,226	63,463	10,328,440	6,765	10,674	1,737,101
2058	30,582	48,551	8,473,219	4,922	7,814	1,363,711
2059	22,987	36,722	6,869,061	3,540	5,656	1,057,925
2060	17,046	27,454	5,451,504	2,512	4,046	803,448
2061	12,499	20,319	4,228,194	1,763	2,866	596,321
2062	9,228	15,121	3,297,138	1,245	2,041	444,986
2063	6,851	11,288	2,602,875	885	1,458	336,160
2064	5,023	8,314	2,039,056	621	1,028	252,003
2065	3,622	6,024	1,566,540	428	712	185,268
2066	2,570	4,303	1,159,161	291	487	131,186
2067	1,817	3,050	859,007	197	330	93,030
2068	1,201	2,012	644,115	124	208	66,754
2069	676	1,180	482,879	67	117	47,889
2070	9	10	346,579	1	1	32,891
2071	0	0	33,832	0	0	3,072
2072	0	0	10	0	0	1
2073	0	0	1	0	0	0
Total	315,803,673	394,747,371	3,101,190,339	234,640,413	285,526,910	1,606,790,879
Grand Total	1,198,675,532	578,224,513	3,820,938,948	1,562,769,371	505,081,968	2,538,853,367

Minimum Required Loss Ratios	62.9%	80%
Minimum PV Incurred Claims	982,981,934	404,065,574
Dual Loss Ratio Test Met	2,538,853,367	>
		1,387,047,509

Lifetime Experience (Nationwide) as of 12/31/2016

Non-Lifetime Benefit Periods - Post-Stabilization Experience

Year	Non-Interest Adjusted			Interest Adjusted		
	Original Premium	VA Rate Level Increased Premium	Incurred Claims	Original Premium	VA Rate Level Increased Premium	Incurred Claims
1997	0	0	0	0	0	0
1998	0	0	0	0	0	0
1999	0	0	0	0	0	0
2000	0	0	0	0	0	0
2001	5,564	0	0	11,008	0	0
2002	124,727	0	0	236,128	0	0
2003	959,199	0	0	1,737,716	0	0
2004	1,875,935	0	209,237	3,252,156	0	362,737
2005	2,108,071	0	65,865	3,497,216	0	109,268
2006	2,052,755	0	535,770	3,258,804	0	850,549
2007	1,956,742	236,629	347,698	2,972,613	359,478	528,210
2008	1,883,058	546,087	430,039	2,737,487	793,871	625,167
2009	1,830,940	530,972	654,237	2,547,101	738,659	910,138
2010	1,759,287	510,193	1,284,179	2,342,031	679,189	1,709,548
2011	1,682,106	487,811	622,344	2,142,855	621,428	792,812
2012	1,556,962	451,519	1,205,371	1,898,022	550,427	1,469,414
2013	1,478,031	682,977	1,454,616	1,724,211	796,734	1,696,897
2014	1,409,166	831,877	1,282,810	1,573,087	928,646	1,432,033
2015	1,356,160	829,248	1,305,648	1,448,723	885,848	1,394,763
2016	1,436,432	878,332	2,274,370	1,468,396	897,877	2,324,980
Total	23,475,134	5,985,646	11,672,183	32,847,556	7,252,157	14,206,516
2017	1,305,440	798,235	2,441,599	1,277,023	780,859	2,388,451
2018	1,186,394	720,299	2,511,229	1,110,592	674,277	2,350,779
2019	1,077,061	649,075	2,629,277	964,827	581,439	2,355,297
2020	974,791	582,753	2,741,343	835,612	499,549	2,349,938
2021	880,068	521,628	2,837,703	721,926	427,895	2,327,789
2022	790,584	464,568	2,961,422	620,595	364,678	2,324,667
2023	707,608	411,932	2,920,464	531,541	309,435	2,193,795
2024	630,833	363,608	2,868,076	453,464	261,373	2,061,667
2025	560,482	319,803	2,909,640	385,543	219,986	2,001,478
2026	496,192	280,248	2,953,633	326,621	184,475	1,944,249
2027	437,508	244,541	2,988,338	275,591	154,039	1,882,386
2028	384,275	212,507	3,003,458	231,636	128,096	1,810,440
2029	336,189	183,913	3,008,340	193,923	106,086	1,735,295
2030	292,891	158,478	2,994,467	161,672	87,478	1,652,912
2031	254,084	136,000	2,972,750	134,212	71,838	1,570,262
2032	219,337	116,184	2,941,765	110,869	58,728	1,486,981
2033	188,707	98,917	2,847,425	91,279	47,847	1,377,315
2034	161,804	83,917	2,717,799	74,895	38,843	1,258,005
2035	138,154	70,876	2,606,083	61,194	31,394	1,154,348
2036	117,394	59,573	2,503,609	49,760	25,251	1,061,204
2037	99,240	49,819	2,406,554	40,254	20,207	976,139
2038	83,460	41,447	2,297,523	32,395	16,088	891,784
2039	69,823	34,286	2,168,537	25,935	12,735	805,472
2040	58,083	28,179	2,021,480	20,645	10,016	718,516
2041	48,064	23,045	1,875,531	16,348	7,839	637,933
2042	39,518	18,745	1,728,426	12,863	6,101	562,581
2043	32,309	15,161	1,578,877	10,063	4,722	491,775
2044	26,259	12,183	1,419,839	7,827	3,631	423,196
2045	21,200	9,710	1,265,274	6,047	2,769	360,886
2046	17,037	7,704	1,118,209	4,650	2,103	305,206
2047	13,623	6,084	983,940	3,558	1,589	256,993
2048	10,828	4,773	860,403	2,706	1,193	215,050
2049	8,537	3,711	744,448	2,042	888	178,055
2050	6,673	2,857	636,224	1,527	654	145,618
2051	5,190	2,185	539,837	1,137	479	118,236
2052	4,027	1,663	455,386	844	349	95,445
2053	3,108	1,254	382,092	623	251	76,634
2054	2,375	933	316,499	456	179	60,745
2055	1,785	685	259,048	328	126	47,578
2056	1,331	496	209,494	234	87	36,819
2057	995	357	168,770	167	60	28,385
2058	743	256	135,772	120	41	21,852
2059	549	180	108,167	85	28	16,659
2060	395	123	85,051	58	18	12,535
2061	280	82	65,449	39	12	9,230
2062	201	55	49,800	27	7	6,721
2063	146	37	38,568	19	5	4,981
2064	106	25	29,851	13	3	3,689
2065	74	17	22,790	9	2	2,695
2066	51	11	16,852	6	1	1,907
2067	35	8	12,297	4	1	1,332
2068	24	5	9,132	2	1	946
2069	9	2	6,749	1	0	669
2070	1	0	4,822	0	0	458
2071	0	0	3,310	0	0	301
2072	0	0	0	0	0	0
2073	0	0	0	0	0	0
Total	11,695,876	6,743,134	80,383,421	8,803,807	5,145,750	44,804,279
Grand Total	35,171,011	12,728,780	92,055,604	41,651,363	12,397,907	59,010,795

Minimum Required Loss Ratios	68.7%	80%
Minimum PV Incurred Claims	28,614,486	9,918,326
Dual Loss Ratio Test Met	59,010,795	>
		38,532,812

Lifetime Experience (Nationwide) as of 12/31/2016

Lifetime Benefit Period - Post-Stabilization Experience

Year	Non-Interest Adjusted			Interest Adjusted		
	Original Premium	VA Rate Level Increased Premium	Incurred Claims	Original Premium	VA Rate Level Increased Premium	Incurred Claims
1997	0	0	0	0	0	0
1998	0	0	0	0	0	0
1999	0	0	0	0	0	0
2000	0	0	0	0	0	0
2001	13,893	0	0	27,486	0	0
2002	294,797	0	487	558,097	0	922
2003	1,597,074	0	0	2,893,311	0	0
2004	2,473,678	0	21,213	4,288,415	0	36,775
2005	2,593,563	0	204,578	4,302,631	0	339,388
2006	2,533,916	0	305,634	4,022,659	0	485,202
2007	2,498,322	302,122	1,613,672	3,795,362	458,973	2,451,434
2008	2,459,984	713,395	1,541,097	3,576,191	1,037,095	2,240,364
2009	2,412,119	699,515	360,417	3,355,606	973,126	501,391
2010	2,373,634	688,354	1,228,367	3,159,873	916,363	1,635,249
2011	2,333,309	676,660	2,158,778	2,972,432	862,005	2,750,094
2012	2,123,449	615,800	1,596,723	2,588,601	750,694	1,946,494
2013	1,946,519	1,066,943	1,799,433	2,270,731	1,244,653	2,099,147
2014	1,867,834	1,682,380	3,246,046	2,085,110	1,878,083	3,623,643
2015	1,787,926	1,810,096	2,858,807	1,909,959	1,933,642	3,053,931
2016	1,537,157	1,556,217	3,611,461	1,571,362	1,590,847	3,691,825
Total	30,847,174	9,811,483	20,546,713	43,377,825	11,645,482	24,855,858
2017	1,425,836	1,437,294	3,729,446	1,394,798	1,406,006	3,648,264
2018	1,320,387	2,118,386	3,964,610	1,236,024	1,983,036	3,711,299
2019	1,219,989	2,424,851	4,301,277	1,092,861	2,172,173	3,853,068
2020	1,123,267	2,223,487	4,719,597	962,889	1,906,020	4,045,739
2021	1,031,078	2,032,073	5,030,363	845,801	1,666,925	4,126,445
2022	942,124	1,848,101	5,414,685	739,552	1,450,729	4,250,438
2023	858,802	1,676,230	5,515,268	645,115	1,259,151	4,142,960
2024	780,881	1,515,754	5,536,868	561,323	1,089,574	3,980,082
2025	708,386	1,367,310	5,814,815	487,284	940,542	3,999,885
2026	640,898	1,229,799	6,095,202	421,875	809,523	4,012,207
2027	578,045	1,102,291	6,358,189	364,117	694,345	4,005,091
2028	519,820	984,708	6,586,947	313,340	593,568	3,970,515
2029	465,840	876,429	6,806,441	268,709	505,549	3,926,146
2030	415,749	776,555	7,034,521	229,489	428,650	3,882,975
2031	369,588	685,169	7,190,450	195,223	361,919	3,798,131
2032	326,846	601,161	7,346,195	165,212	303,871	3,713,299
2033	288,121	525,618	7,340,680	139,366	254,244	3,550,729
2034	253,425	458,244	7,205,423	117,304	212,110	3,335,219
2035	221,955	397,710	7,148,030	98,314	176,163	3,166,176
2036	193,465	343,323	7,097,772	82,004	145,524	3,008,530
2037	167,825	294,787	7,034,479	68,073	119,571	2,853,303
2038	144,945	251,818	6,906,734	56,260	97,743	2,680,850
2039	124,584	214,032	6,696,674	46,275	79,499	2,487,383
2040	106,459	180,796	6,434,822	37,840	64,262	2,287,198
2041	90,496	151,869	6,132,373	30,781	51,656	2,085,833
2042	76,410	126,648	5,826,066	24,871	41,223	1,896,313
2043	64,157	104,978	5,461,355	19,983	32,698	1,701,056
2044	53,719	86,730	5,015,651	16,011	25,851	1,494,959
2045	44,691	71,220	4,586,231	12,747	20,314	1,308,102
2046	37,004	58,163	4,165,633	10,100	15,875	1,136,974
2047	30,506	47,263	3,768,467	7,968	12,345	984,278
2048	25,019	38,175	3,383,056	6,253	9,541	845,563
2049	20,417	30,663	3,002,230	4,883	7,334	718,066
2050	16,537	24,443	2,636,170	3,785	5,595	603,362
2051	13,317	19,365	2,295,023	2,917	4,241	502,661
2052	10,672	15,252	1,996,450	2,237	3,197	418,437
2053	8,473	11,894	1,721,447	1,699	2,385	345,262
2054	6,701	9,233	1,454,784	1,286	1,772	279,214
2055	5,248	7,113	1,217,445	964	1,306	223,600
2056	4,076	5,438	1,007,685	716	956	177,105
2057	3,158	4,147	833,829	531	697	140,238
2058	2,443	3,165	688,692	393	509	110,841
2059	1,871	2,384	562,273	288	367	86,597
2060	1,413	1,782	448,632	208	263	66,120
2061	1,057	1,319	349,375	149	186	49,274
2062	795	981	273,927	107	132	36,969
2063	596	733	217,653	77	95	28,110
2064	442	539	171,143	55	67	21,151
2065	322	390	131,979	38	46	15,609
2066	231	280	98,012	26	32	11,092
2067	164	198	72,892	18	21	7,894
2068	108	131	54,860	11	14	5,685
2069	64	79	41,345	6	8	4,100
2070	0	1	29,756	0	0	2,824
2071	0	0	5	0	0	0
2072	0	0	0	0	0	0
2073	0	0	0	0	0	0
Total	14,748,423	26,390,502	204,953,929	10,718,156	18,959,422	101,743,223
Grand Total	45,595,597	36,201,985	225,500,642	54,095,981	30,604,904	126,599,081

Minimum Required Loss Ratios	69.0%	80%
Minimum PV Incurred Claims	37,326,227	24,483,923
Dual Loss Ratio Test Met	126,599,081	>
		61,810,150

Lifetime Experience (Nationwide) as of 12/31/2016

All Benefit Periods Combined - Post-Stabilization Experience

Year	Non-Interest Adjusted			Interest Adjusted		
	Original Premium	VA Rate Level Increased Premium	Incurred Claims	Original Premium	VA Rate Level Increased Premium	Incurred Claims
1997	0	0	0	0	0	0
1998	0	0	0	0	0	0
1999	0	0	0	0	0	0
2000	0	0	0	0	0	0
2001	19,458	0	0	38,494	0	0
2002	419,525	0	487	794,225	0	922
2003	2,556,274	0	0	4,631,026	0	0
2004	4,349,613	0	230,450	7,540,571	0	399,512
2005	4,701,633	0	270,443	7,799,847	0	448,656
2006	4,586,671	0	841,404	7,281,463	0	1,335,751
2007	4,455,064	538,751	1,961,370	6,767,975	818,451	2,979,644
2008	4,343,042	1,259,482	1,971,136	6,313,679	1,830,967	2,865,531
2009	4,243,059	1,230,487	1,014,654	5,902,707	1,711,785	1,411,529
2010	4,132,921	1,198,547	2,512,545	5,501,903	1,595,552	3,344,797
2011	4,015,415	1,164,470	2,781,122	5,115,287	1,483,433	3,542,906
2012	3,680,411	1,067,319	2,802,095	4,486,624	1,301,121	3,415,908
2013	3,424,550	1,749,921	3,254,050	3,994,942	2,041,387	3,796,043
2014	3,277,000	2,514,257	4,528,856	3,658,197	2,806,729	5,055,676
2015	3,144,086	2,639,345	4,164,454	3,358,682	2,819,490	4,448,694
2016	2,973,589	2,434,550	5,885,831	3,039,758	2,488,724	6,016,805
Total	54,322,309	15,797,129	32,218,896	76,225,381	18,897,639	39,062,374
2017	2,731,276	2,235,528	6,171,046	2,671,821	2,186,865	6,036,714
2018	2,506,781	2,838,685	6,475,838	2,346,616	2,657,314	6,062,079
2019	2,297,049	3,073,926	6,930,555	2,057,688	2,753,611	6,208,365
2020	2,098,058	2,806,240	7,460,940	1,798,501	2,405,569	6,395,677
2021	1,911,146	2,553,701	7,868,066	1,567,727	2,094,820	6,454,234
2022	1,732,708	2,312,669	8,376,107	1,360,147	1,815,407	6,575,104
2023	1,566,410	2,088,162	8,435,731	1,176,656	1,568,586	6,336,754
2024	1,411,714	1,879,362	8,404,944	1,014,786	1,350,947	6,041,748
2025	1,268,868	1,687,113	8,724,455	872,827	1,160,528	6,001,362
2026	1,137,090	1,510,046	9,048,836	748,497	993,998	5,956,456
2027	1,015,553	1,346,832	9,346,527	639,708	848,384	5,887,477
2028	904,095	1,197,215	9,590,405	544,975	721,664	5,780,955
2029	802,029	1,060,342	9,814,781	462,633	611,635	5,661,441
2030	708,640	935,033	10,028,988	391,161	516,128	5,535,887
2031	623,673	821,170	10,163,201	329,436	433,757	5,368,393
2032	546,183	717,346	10,287,961	276,081	362,598	5,200,281
2033	476,828	624,535	10,188,105	230,644	302,091	4,928,044
2034	415,229	542,160	9,923,222	192,200	250,953	4,593,224
2035	360,109	468,586	9,754,113	159,508	207,557	4,320,524
2036	310,859	402,896	9,601,381	131,764	170,776	4,069,734
2037	267,066	344,606	9,441,033	108,326	139,778	3,829,442
2038	228,405	293,265	9,204,257	88,656	113,831	3,572,634
2039	194,407	248,318	8,865,212	72,210	92,234	3,292,855
2040	164,542	208,975	8,456,301	58,485	74,278	3,005,714
2041	138,561	174,915	8,007,904	47,129	59,494	2,723,766
2042	115,928	145,393	7,554,492	37,733	47,324	2,458,894
2043	96,465	120,139	7,040,232	30,046	37,420	2,192,832
2044	79,977	98,913	6,435,490	23,838	29,482	1,918,155
2045	65,891	80,930	5,851,506	18,794	23,083	1,668,989
2046	54,041	65,867	5,283,842	14,750	17,978	1,442,179
2047	44,129	53,347	4,752,407	11,526	13,934	1,241,271
2048	35,847	42,947	4,243,459	8,960	10,734	1,060,613
2049	28,954	34,374	3,746,679	6,925	8,221	896,122
2050	23,211	27,301	3,272,393	5,312	6,248	748,979
2051	18,507	21,550	2,834,860	4,053	4,720	620,897
2052	14,699	16,915	2,451,836	3,081	3,545	513,882
2053	11,581	13,148	2,103,539	2,323	2,637	421,897
2054	9,076	10,167	1,771,282	1,742	1,951	339,959
2055	7,033	7,797	1,476,494	1,292	1,432	271,178
2056	5,406	5,934	1,217,179	950	1,043	213,925
2057	4,153	4,504	1,002,598	698	758	168,623
2058	3,186	3,420	824,464	513	550	132,692
2059	2,420	2,564	670,440	373	395	103,257
2060	1,809	1,905	533,683	267	281	78,655
2061	1,336	1,402	414,824	188	198	58,504
2062	996	1,036	323,727	134	140	43,691
2063	743	770	256,221	96	100	33,091
2064	548	564	200,994	68	70	24,840
2065	397	408	154,769	47	48	18,304
2066	282	291	114,864	32	33	13,000
2067	200	206	85,190	22	22	9,226
2068	132	136	63,992	14	14	6,632
2069	74	81	48,094	7	8	4,770
2070	1	1	34,578	0	0	3,282
2071	0	0	3,315	0	0	301
2072	0	0	0	0	0	0
2073	0	0	0	0	0	0
Total	26,444,299	33,133,636	285,337,350	19,521,964	24,105,172	146,547,502
Grand Total	80,766,608	48,930,765	317,556,247	95,747,344	43,002,812	185,609,876

Minimum Required Loss Ratios	68.9%	80%
Minimum PV Incurred Claims	65,969,920	34,402,249
Dual Loss Ratio Test Met	185,609,876	> 100,372,170

SERFF Tracking #:

MUTA-130706482

State Tracking #:

MUTA-130706482

Company Tracking #:

LAFOND

State:

Virginia

Filing Company:

Mutual of Omaha Insurance Company

TOI/Sub-TOI:

LTC03I Individual Long Term Care/LTC03I.003 Other

Product Name:

Mutual of Omaha - 2016/2017 LTCi Rate Increase

Project Name/Number:

2016/2017 LTCi/

Superseded Schedule Items

Please note that all items on the following pages are items, which have been replaced by a newer version. The newest version is located with the appropriate schedule on previous pages. These items are in date order with most recent first.

Creation Date	Schedule Item Status	Schedule	Schedule Item Name	Replacement Creation Date	Attached Document(s)
08/04/2017	Withdrawn 11/02/2017	Form	Policy Adjustment Rider	11/02/2017	OPE4M Policy Adjustment Rider (Non-Annotated) Version 1.pdf (Superseded)
08/04/2017	Withdrawn 11/30/2017	Form	Premium Notification Letter (1st increase)	09/08/2017	Form 0555A-VA-1.pdf (Superseded)
08/04/2017	Withdrawn 11/30/2017	Form	Premium Notification Letter (2nd increase)	09/08/2017	Form 0555A-VA-2.pdf (Superseded)
04/26/2017	Withdrawn 11/30/2017	Rate	Rate Schedules	11/30/2017	Rates - LT50 (VA - 2017).pdf (Superseded) Rates - LT50 (VA - 2018).pdf (Superseded) Rates - 0DX5M (VA - 2017).pdf (Superseded) Rates - 0DX5M (VA - 2018).pdf (Superseded) Rates - NH50 (VA - 2017).pdf (Superseded) Rates - NH50 (VA - 2018).pdf (Superseded) Rates - 0DX6M (VA - 2017).pdf (Superseded) Rates - 0DX6M (VA - 2018).pdf (Superseded) Rates - HCA-NHA-LTA (VA-2017).pdf (Superseded) Rates - HCA-NHA-LTA (VA-2018).pdf (Superseded)
08/29/2016	Withdrawn 11/30/2017	Supporting Document	Sample Policyholder Notification Letter	08/04/2017	LTC VA LIFETIME LETTER SAMPLE.pdf (Superseded)

SERFF Tracking #:

MUTA-130706482

State Tracking #:

MUTA-130706482

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LAFOND

State:

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TOI/Sub-TOI:

LTC03I Individual Long Term Care/LTC03I.003 Other

Product Name:

Mutual of Omaha - 2016/2017 LTCi Rate Increase

Project Name/Number:

2016/2017 LTCi/

Creation Date	Schedule Item Status	Schedule	Schedule Item Name	Replacement Creation Date	Attached Document(s)
08/26/2016	Withdrawn 06/29/2017	Rate	Rate Schedules	04/26/2017	Rates - HCA-NHA-LTA (VA-2016).pdf (Superceded) Rates - HCA-NHA-LTA (VA-2017).pdf (Superceded) Rates - NH50 (VA - 2016).pdf (Superceded) Rates - NH50 (VA - 2017).pdf (Superceded) Rates - 0DX6M (VA - 2016).pdf (Superceded) Rates - 0DX6M (VA - 2017).pdf (Superceded) Rates - LT50 (VA - 2016).pdf (Superceded) Rates - LT50 (VA - 2017).pdf (Superceded) Rates - 0DX5M (VA - 2016).pdf (Superceded) Rates - 0DX5M (VA - 2017).pdf (Superceded)
08/26/2016	Withdrawn 06/29/2017	Supporting Document	Sample Policyholder Notification Letter	08/29/2016	
08/26/2016	Withdrawn 06/29/2017	Supporting Document	Certification of Compliance	04/26/2017	
08/26/2016	Withdrawn 11/30/2017	Supporting Document	Long Term Care Insurance Rate Request Summary	04/26/2017	Health Insurance Rate Request Summary.pdf (Superceded) VA Increase Summary.pdf

MUTUAL OF OMAHA INSURANCE COMPANY

3300 MUTUAL OF OMAHA PLAZA, OMAHA, NE 68175

POLICY ADJUSTMENT RIDER

You have elected to make a change to our long-term care policy's benefits. This change is documented below. Please attach this rider to your policy. The change you requested does not alter any other existing terms, conditions, or limitations of your policy.

All provisions of the policy which are not in conflict with the provisions of this rider apply to this rider.

INSURED: [NAME]
[ADDRESS]
[CITY, STATE ZIP]

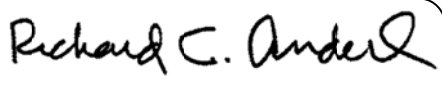
POLICY NUMBER: [POLNUM] EFFECTIVE DATE OF CHANGE: [DATE]

NEW POLICY PREMIUM: \$AMOUNT MODE: MODE OF PAYMENT

The changes shown below are made in the coverage of the policy specified above. These changes are made at your request. They take effect on the Effective Date of Change. With respect to any coverage that is provided under this rider, the following will be deemed to start on the Effective Date of Change: (a) any waiting periods specified for benefit payments; and (b) any periods which limit the exercise of any of our defenses.

[Benefit Change]

Mutual of Omaha Insurance Company


Corporate Secretary

0PE4M



[Month, Year]

[Name]

[Address]

[City, State, ZIP]

Dear [Name]:

Thank you for choosing Mutual of Omaha Insurance Company as your long-term care insurance provider. Your long-term care insurance policy from Mutual of Omaha Insurance Company continues to provide valuable coverage that may help you pay for long-term care services. Please keep in mind that your policy is guaranteed renewable for life. Your policy will be kept in force as long as you pay the required premiums. There is a need to increase premiums on certain policy forms. Rates are being raised on all policy forms like yours to pay for anticipated claims that are higher than expected. This is due in part to individuals living longer and keeping their policies longer, which has resulted in more claims being filed than we anticipated when this policy form was originally priced. As a result, premiums need to be adjusted to ensure there is adequate funding to pay current and anticipated future claims. This premium increase is designed to offset some of these anticipated costs and in no way reflects on the integrity of your policy, nor is it based on your individual claims history, age, health status, or any other personal factor. Please note that premium rates may increase again in the future. The following represents the premium change for your coverage.

The Virginia Bureau of Insurance has approved an increase of [Total Inc] for policyholders with the lifetime benefit period, which will be implemented over a two-year period. The following represents the [Year-1] premium change of [Inc Amt-1] for your coverage.

COVERAGE IDENTIFICATION	CURRENT [Mode] PREMIUM	NEW [Mode] PREMIUM	INCREASE AMOUNT	EFFECTIVE DATE
[CovID]	[\$CurPrem]	[\$New Prem]	[\$Difference]	[EffDate-1]

Your premiums will again increase to [Inc Prem-2] on [Eff Date-2], which reflects an additional increase in premium of [Inc Amt-2].

[WAIVER - Since your premiums are now being waived, no payments are due. However, when you are no longer on claim and the premiums are no longer being waived, your new premium will be the amount shown above.]

Please keep this notification of the change in premium for your Policy with your other important insurance documents. Send no money now as a new premium notice will be sent to you prior to the effective date shown above. If you pay premium through electronic funds transfer or payroll deduction, the organization that processes your payment will be notified of the new premium amount.

If you have paid premium beyond the effective date listed above you will be billed for any additional premium due.

We know an increase in premium is never welcomed news. You have the right to a revised premium rate or rate schedule upon request. You can revise your current benefit structure in an effort to lessen the impact of the requested rate increase. Adjusting the current benefits of your policy, by reducing the benefit period, increasing the elimination period, removing any optional riders, accept the contractual non-forfeiture benefit (if applicable), accepting the contingent benefit upon lapse (as summarized below), or decreasing the maximum daily benefit amount, can help keep your premium similar to what you currently pay. The enclosed benefit period Policy Adjustment Offer provides the details if you wish to reduce your benefit period. To accept this offer, simply sign the form and return it to us in the enclosed envelope. If you would like to change any other benefits, please sign and return the attached Coverage Adjustment Form. If you would like to explore these options in greater detail, please contact:

Customer Contact Center
1-877-845-0872

[Agent Name]
[Agent Phone#]

Please note that not all options available to reduce your premium are of equal value.

As a reminder, your policy is guaranteed renewable for life. This means you can continue your policy for as long as you live or until you have exhausted your policy benefits. Subject to the terms of your policy, we cannot cancel your policy as long as you pay the required premium when it is due. However, the premium for your policy can change again in the future. We will not increase premium due to a change in your age or health or your use of the long-term coverage. However, we can change premiums if we make the same change for all persons of the same class, but never more than once per year. Should there be future rate increases, options similar to those being offered now will be available in the future. These changes in benefits may be done at any time upon your request, not just at the time of a rate increase.

This rate increase request was reviewed by Virginia's State Corporation Commission and was found to be compliant with applicable Virginia laws and regulations addressing long-term care insurance. All premium rate filings are available for public inspection and may be accessed online through the Virginia Bureau of Insurance's webpage at www.scc.virginia.gov/BOI.

We hope you'll take a moment to consider the reason you purchased a long-term care insurance policy from Mutual of Omaha Insurance Company and why it's more important than ever to have this valuable protection. With our history of financial strength and our commitment to serving our customers, you can be confident we'll be there when you need us, just as we have for over a century.

Sincerely,

Signature Block

IMPORTANT INFORMATION ABOUT CONTINGENT BENEFIT UPON LAPSE

If you choose to cancel your long-term care policy, the non-forfeiture benefit provides you with a paid-up policy in lieu of your current policy. Your policy will include a **reduced Maximum Benefit Period** equal to the greater of:

- The sum of all premiums you have paid divided by the daily benefit amount of the policy in effect on the current paid-to-date of the policy, or
- For a period 30 days

In no event will the Maximum Benefit Period be less than 30 days or exceed the amount that would have been paid had premiums continued to be paid.

The current daily benefit amount of the policy, as it exists today, will be the daily benefit amount payable while you are on non-forfeiture status. No additional inflation increases will be applied once the non-forfeiture benefit is elected. Please note this benefit is available to you at no cost.

You have 120 days from the effective date of the rate increase to exercise this option and your policy must be paid through the rate increase effective date. If you are interested in exercising this option, please contact your agent or the Customer Care Center at the number previously provided.



[Month, Year]

[Name]

[Address]

[City, State, ZIP]

Dear [Name]:

Thank you for choosing Mutual of Omaha Insurance Company as your long-term care insurance provider. Your long-term care insurance policy from Mutual of Omaha Insurance Company continues to provide valuable coverage that may help you pay for long-term care services. Please keep in mind that your policy is guaranteed renewable for life. Your policy will be kept in force as long as you pay the required premiums. There is a need to increase premiums on certain policy forms. Rates are being raised on all policy forms like yours to pay for anticipated claims that are higher than expected. This is due in part to individuals living longer and keeping their policies longer, which has resulted in more claims being filed than we anticipated when this policy form was originally priced. As a result, premiums need to be adjusted to ensure there is adequate funding to pay current and anticipated future claims. This premium increase is designed to offset some of these anticipated costs and in no way reflects on the integrity of your policy, nor is it based on your individual claims history, age, health status, or any other personal factor. Please note that premium rates may increase again in the future. The following represents the premium change for your coverage.

The Virginia Bureau of Insurance approved an increase of [Total Inc] for policyholders with the lifetime benefit period to be implemented over a two-year period. This is the second increase of the two-year increase. The following represents the [Year-2] premium change of [Inc Amt-2] for your coverage.

COVERAGE IDENTIFICATION	CURRENT [Mode] PREMIUM	NEW [Mode] PREMIUM	INCREASE AMOUNT	EFFECTIVE DATE
[CovID]	[\$CurPrem]	[\$New Prem]	[\$Difference]	[EffDate-2]

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Please keep this notification of the change in premium for your Policy with your other important insurance documents. Send no money now as a new premium notice will be sent to you prior to the effective date shown above. If you pay premium through electronic funds transfer or payroll deduction, the organization that processes your payment will be notified of the new premium amount. If you have paid premium beyond the effective date listed above you will be billed for any additional premium due.

We know an increase in premium is never welcomed news. You have the right to a revised premium rate or rate schedule upon request. You can revise your current benefit structure in an effort to lessen the impact of the requested rate increase. Adjusting the current benefits of your policy, by reducing the benefit period, increasing the elimination period, removing any optional riders, accept the contractual non-forfeiture benefit (if applicable), accepting the contingent benefit upon lapse (as summarized below), or decreasing the maximum daily benefit amount, can help keep your premium similar to what you currently pay. The enclosed benefit period Policy Adjustment Offer provides the details if you wish to reduce your benefit period. To accept this offer, simply sign the form and return it to us in the enclosed envelope. If you would like to change any other benefits, please sign and return the attached Coverage Adjustment Form. If you would like to explore these options in greater detail, please contact:

Customer Contact Center
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[Agent Name]
[Agent Phone#]

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As a reminder, your policy is guaranteed renewable for life. This means you can continue your policy for as long as you live or until you have exhausted your policy benefits. Subject to the terms of your policy, we cannot cancel your policy as long as you pay the required premium when it is due. However, the premium for your policy can change again in the future. We will not increase premium due to a change in your age or health or your use of the long-term coverage. However, we can change premiums if we make the same change for all persons of the same class, but never more than once per year. Should there be future rate increases, options similar to those being offered now will be available in the future. These changes in benefits may be done at any time upon your request, not just at the time of a rate increase.

This rate increase request was reviewed by Virginia's State Corporation Commission and was found to be compliant with applicable Virginia laws and regulations addressing long-term care insurance. All premium rate filings are available for public inspection and may be accessed online through the Virginia Bureau of Insurance's webpage at www.scc.virginia.gov/BOI.

We hope you'll take a moment to consider the reason you purchased a long-term care insurance policy from Mutual of Omaha Insurance Company and why it's more important than ever to have this valuable protection. With our history of financial strength and our commitment to serving our customers, you can be confident we'll be there when you need us, just as we have for over a century.

Sincerely,

Signature Block

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- The sum of all premiums you have paid divided by the daily benefit amount of the policy in effect on the current paid-to-date of the policy, or
- For a period 30 days

In no event will the Maximum Benefit Period be less than 30 days or exceed the amount that would have been paid had premiums continued to be paid.

The current daily benefit amount of the policy, as it exists today, will be the daily benefit amount payable while you are on non-forfeiture status. No additional inflation increases will be applied once the non-forfeiture benefit is elected. Please note this benefit is available to you at no cost.

You have 120 days from the effective date of the rate increase to exercise this option and your policy must be paid through the rate increase effective date. If you are interested in exercising this option, please contact your agent or the Customer Care Center at the number previously provided.

Date: 04/26/2017

MUTUAL OF OMAHA INSURANCE COMPANY
SCHEDULE OF MONTHLY RATES FOR POLICY FORMS

LT50-Series 19241 and LT50-Series 19409

PER \$10 DAILY CONFINED CARE/PER \$10 DAILY COMMUNITY BASED BENEFIT

100% HOME HEALTH CARE BENEFIT

BENEFIT -- 1 YEAR

Issue Age	ELIMINATION PERIODS			
	0 Day	20 Day	100 Day	365 Day
18-39	1.66	1.54	1.33	1.15
40	1.84	1.68	1.45	1.25
41	1.90	1.74	1.50	1.30
42	1.98	1.82	1.56	1.34
43	2.06	1.90	1.62	1.39
44	2.14	1.97	1.68	1.43
45	2.23	2.05	1.75	1.49
46	2.34	2.15	1.84	1.56
47	2.45	2.26	1.92	1.63
48	2.57	2.39	2.02	1.72
49	2.71	2.53	2.12	1.78
50	2.87	2.68	2.24	1.87
51	3.04	2.86	2.38	1.98
52	3.22	3.04	2.52	2.09
53	3.44	3.24	2.68	2.22
54	3.66	3.46	2.86	2.36
55	3.92	3.70	3.05	2.51
56	4.19	3.96	3.26	2.68
57	4.50	4.24	3.49	2.87
58	4.82	4.55	3.72	3.04
59	5.16	4.87	3.98	3.25
60	5.53	5.20	4.24	3.46
61	5.95	5.60	4.55	3.70
62	6.46	6.05	4.92	4.00
63	7.01	6.55	5.33	4.34
64	7.62	7.10	5.78	4.72
65	8.29	7.70	6.29	5.14
66	9.05	8.38	6.84	5.59
67	9.89	9.14	7.46	6.10
68	10.82	9.98	8.10	6.58
69	11.81	10.87	8.78	7.09
70	12.90	11.86	9.53	7.66
71	14.11	12.96	10.36	8.28
72	15.47	14.21	11.34	9.05
73	16.98	15.60	12.46	9.94
74	18.64	17.11	13.69	10.96
75	20.40	18.76	15.02	12.04
76	22.32	20.52	16.45	13.19
77	24.40	22.44	17.98	14.41
78	26.63	24.52	19.60	15.67
79	29.02	26.71	21.31	17.00
80	31.55	29.06	23.12	18.40
81	34.24	31.55	25.03	19.86
82	37.06	34.18	27.04	21.38
83	40.04	36.94	29.14	22.98
84	43.18	39.84	31.32	24.62

TO OBTAIN QUARTERLY, SEMIANNUAL, AND ANNUAL PREMIUMS, MULTIPLY THE ABC QUOTED PREMIUMS BY 3, 6, AND 12, RESPECTIVELY. THE MONTHLY PREMIUMS FOR BANK SERVICE PLAN AND PAYROLL DEDUCTION ISSUES ARE THE PREMIUMS LISTED / R25387-44-4

Date: 04/26/2017

MUTUAL OF OMAHA INSURANCE COMPANY
SCHEDULE OF MONTHLY RATES FOR POLICY FORMS

LT50-Series 19241 and LT50-Series 19409

PER \$10 DAILY CONFINED CARE/PER \$10 DAILY COMMUNITY BASED BENEFIT

100% HOME HEALTH CARE BENEFIT

BENEFIT -- TWO YEARS

Issue Age	ELIMINATION PERIODS			
	0 Day	20 Day	100 Day	365 Day
18-39	2.20	2.09	1.79	1.54
40	2.44	2.32	1.97	1.68
41	2.52	2.40	2.04	1.73
42	2.62	2.50	2.12	1.80
43	2.74	2.59	2.20	1.87
44	2.86	2.69	2.28	1.93
45	2.98	2.81	2.38	2.02
46	3.11	2.94	2.48	2.09
47	3.28	3.10	2.60	2.20
48	3.46	3.26	2.74	2.29
49	3.65	3.46	2.89	2.42
50	3.88	3.65	3.05	2.56
51	4.12	3.88	3.23	2.69
52	4.39	4.13	3.44	2.87
53	4.67	4.40	3.66	3.04
54	4.98	4.68	3.90	3.25
55	5.32	4.99	4.15	3.46
56	5.70	5.32	4.44	3.71
57	6.14	5.72	4.75	3.94
58	6.64	6.16	5.10	4.24
59	7.16	6.61	5.47	4.54
60	7.74	7.12	5.88	4.86
61	8.40	7.69	6.32	5.20
62	9.14	8.35	6.83	5.59
63	9.95	9.10	7.38	5.99
64	10.80	9.88	7.98	6.46
65	11.75	10.76	8.63	6.92
66	12.80	11.74	9.35	7.45
67	13.99	12.80	10.20	8.14
68	15.30	13.96	11.14	8.88
69	16.72	15.16	12.13	9.71
70	18.24	16.48	13.24	10.62
71	19.94	17.98	14.47	11.65
72	21.85	19.69	15.88	12.82
73	23.96	21.61	17.46	14.11
74	26.23	23.72	19.21	15.56
75	28.70	26.02	21.10	17.10
76	31.36	28.48	23.10	18.74
77	34.21	31.12	25.24	20.46
78	37.26	33.94	27.48	22.26
79	40.51	36.90	29.86	24.16
80	43.96	40.07	32.36	26.14
81	47.58	43.42	34.99	28.20
82	51.41	46.92	37.74	30.36
83	55.43	50.62	40.62	32.60
84	59.64	54.47	43.63	34.96

TO OBTAIN QUARTERLY, SEMIANNUAL, AND ANNUAL PREMIUMS, MULTIPLY THE ABC QUOTED PREMIUMS BY 3, 6, AND 12, RESPECTIVELY. THE MONTHLY PREMIUMS FOR B/ SERVICE PLAN AND PAYROLL DEDUCTION ISSUES ARE THE PREMIUMS LISTED ABOVE. R25387-44-4

Date: 04/26/2017

MUTUAL OF OMAHA INSURANCE COMPANY
SCHEDULE OF MONTHLY RATES FOR POLICY FORMS

LT50-Series 19241 and LT50-Series 19409

PER \$10 DAILY CONFINED CARE/PER \$10 DAILY COMMUNITY BASED BENEFIT

100% HOME HEALTH CARE BENEFIT

BENEFIT -- 3 YEARS

Issue Age	ELIMINATION PERIOD			
	0 Day	20 Day	100 Day	365 Day
18-39	2.68	2.46	2.08	1.74
40	2.96	2.71	2.30	1.96
41	3.07	2.83	2.39	2.02
42	3.20	2.94	2.48	2.09
43	3.34	3.06	2.58	2.18
44	3.48	3.19	2.68	2.26
45	3.64	3.34	2.80	2.34
46	3.80	3.49	2.93	2.46
47	4.01	3.67	3.07	2.57
48	4.24	3.88	3.23	2.69
49	4.48	4.12	3.41	2.83
50	4.75	4.36	3.59	2.96
51	5.05	4.63	3.80	3.12
52	5.39	4.94	4.06	3.32
53	5.75	5.26	4.31	3.53
54	6.14	5.62	4.60	3.77
55	6.58	6.00	4.92	4.03
56	7.03	6.42	5.26	4.30
57	7.55	6.89	5.64	4.62
58	8.10	7.40	6.05	4.96
59	8.68	7.94	6.49	5.30
60	9.30	8.53	6.97	5.70
61	10.01	9.18	7.50	6.13
62	10.81	9.91	8.09	6.60
63	11.69	10.70	8.74	7.12
64	12.64	11.52	9.41	7.69
65	13.67	12.42	10.16	8.32
66	14.83	13.46	11.02	9.01
67	16.18	14.69	11.99	9.79
68	17.65	16.09	13.08	10.63
69	19.26	17.64	14.26	11.53
70	21.02	19.33	15.56	12.53
71	22.96	21.19	16.98	13.61
72	25.09	23.21	18.56	14.84
73	27.40	25.38	20.28	16.20
74	29.86	27.71	22.12	17.64
75	32.51	30.20	24.10	19.22
76	35.39	32.88	26.23	20.92
77	38.56	35.77	28.56	22.80
78	41.98	38.86	31.07	24.84
79	45.66	42.14	33.76	27.05
80	49.57	45.60	36.62	29.41
81	53.74	49.27	39.64	31.90
82	58.14	53.12	42.84	34.55
83	62.80	57.16	46.21	37.36
84	67.69	61.40	49.76	40.33

TO OBTAIN QUARTERLY, SEMIANNUAL, AND ANNUAL PREMIUMS, MULTIPLY THE ABC QUOTED PREMIUMS BY 3, 6, AND 12, RESPECTIVELY. THE MONTHLY PREMIUMS FOR B+ SERVICE PLAN AND PAYROLL DEDUCTION ISSUES ARE THE PREMIUMS LISTED ABOVE
R25387-44-4

Date: 04/26/2017

MUTUAL OF OMAHA INSURANCE COMPANY
SCHEDULE OF MONTHLY RATES FOR POLICY FORMS

LT50-Series 19241 and LT50-Series 19409

PER \$10 DAILY CONFINED CARE/PER \$10 DAILY COMMUNITY BASED BENEFIT

100% HOME HEALTH CARE BENEFIT

Issue Age	BENEFIT -- 5 YEARS			
	ELIMINATION PERIODS			
	0 Day	20 Day	100 Day	365 Day
18-39	3.54	3.30	2.78	2.35
40	3.91	3.65	3.04	2.52
41	4.07	3.78	3.16	2.63
42	4.24	3.94	3.28	2.73
43	4.41	4.10	3.41	2.82
44	4.60	4.28	3.54	2.95
45	4.81	4.47	3.70	3.08
46	5.03	4.66	3.87	3.21
47	5.29	4.93	4.07	3.36
48	5.60	5.19	4.29	3.55
49	5.93	5.49	4.53	3.74
50	6.28	5.81	4.82	4.00
51	6.69	6.18	5.10	4.22
52	7.12	6.58	5.46	4.51
53	7.58	7.02	5.80	4.80
54	8.05	7.50	6.19	5.13
55	8.58	8.00	6.61	5.47
56	9.15	8.56	7.06	5.83
57	9.79	9.16	7.54	6.19
58	10.47	9.81	8.03	6.58
59	11.20	10.47	8.56	6.97
60	11.96	11.20	9.11	7.41
61	12.85	11.99	9.72	7.90
62	13.84	12.88	10.44	8.46
63	14.92	13.86	11.21	9.06
64	16.08	14.89	12.02	9.71
65	17.35	16.02	12.94	10.45
66	18.79	17.30	13.97	11.28
67	20.42	18.79	15.16	12.22
68	22.25	20.45	16.46	13.24
69	24.23	22.29	17.90	14.38
70	26.41	24.27	19.47	15.62
71	28.79	26.47	21.20	16.97
72	31.42	28.89	23.11	18.50
73	34.23	31.47	25.19	20.17
74	37.20	34.23	27.40	21.93
75	40.44	37.21	29.79	23.85
76	43.98	40.50	32.43	25.98
77	47.91	44.11	35.35	28.31
78	52.23	48.07	38.54	30.91
79	56.89	52.34	42.00	33.70
80	61.90	56.91	45.69	36.69
81	67.24	61.80	49.65	39.91
82	72.93	66.98	53.86	43.31
83	78.96	72.48	58.32	46.92
84	85.33	78.29	63.02	50.73

TO OBTAIN QUARTERLY, SEMIANNUAL, AND ANNUAL PREMIUMS, MULTIPLY THE ABC QUOTED PREMIUMS BY 3, 6, AND 12, RESPECTIVELY. THE MONTHLY PREMIUMS FOR B, SERVICE PLAN AND PAYROLL DEDUCTION ISSUES ARE THE PREMIUMS LISTED ABOVE
R25387-44-4

Date: 04/26/2017

MUTUAL OF OMAHA INSURANCE COMPANY
SCHEDULE OF MONTHLY RATES FOR POLICY FORMS

LT50-Series 19241 and LT50-Series 19409

PER \$10 DAILY CONFINED CARE/PER \$10 DAILY COMMUNITY BASED BENEFIT

100% HOME HEALTH CARE BENEFIT

Issue Age	BENEFIT -- LIFETIME			
	ELIMINATION PERIODS			
	0 Day	20 Day	100 Day	365 Day
18-39	7.96	7.53	6.13	5.03
40	8.72	8.23	6.76	5.54
41	9.05	8.56	7.02	5.76
42	9.45	8.91	7.29	6.01
43	9.86	9.27	7.64	6.29
44	10.26	9.71	8.00	6.61
45	10.75	10.15	8.34	6.89
46	11.27	10.65	8.79	7.26
47	11.85	11.14	9.22	7.61
48	12.45	11.74	9.71	8.00
49	13.12	12.35	10.21	8.45
50	13.83	13.01	10.75	8.88
51	14.61	13.71	11.32	9.33
52	15.46	14.46	11.95	9.87
53	16.33	15.24	12.57	10.41
54	17.28	16.04	13.21	10.88
55	18.29	16.88	13.92	11.48
56	19.44	17.85	14.70	12.11
57	20.67	18.92	15.55	12.77
58	21.99	20.07	16.49	13.55
59	23.41	21.28	17.43	14.32
60	24.93	22.61	18.49	15.15
61	26.66	24.10	19.72	16.11
62	28.64	25.86	21.08	17.19
63	30.76	27.82	22.62	18.38
64	33.07	29.95	24.25	19.67
65	35.59	32.33	26.07	21.07
66	38.42	34.93	28.15	22.69
67	41.64	37.92	30.53	24.61
68	45.20	41.17	33.19	26.75
69	48.99	44.64	36.06	29.10
70	53.18	48.45	39.23	31.74
71	57.79	52.68	42.70	34.59
72	62.95	57.44	46.59	37.78
73	68.52	62.53	50.76	41.19
74	74.46	67.93	55.18	44.79
75	80.94	73.85	60.01	48.74
76	88.07	80.47	65.37	53.07
77	95.94	88.01	71.37	57.86
78	104.62	96.49	78.07	63.18
79	113.95	105.74	85.31	68.86
80	123.98	115.77	93.18	74.99
81	134.71	126.58	101.63	81.57
82	146.10	138.15	110.62	88.56
83	158.21	150.55	120.20	95.99
84	170.96	163.70	130.36	103.85

TO OBTAIN QUARTERLY, SEMIANNUAL, AND ANNUAL PREMIUMS, MULTIPLY THE ABC QUOTED PREMIUMS BY 3, 6, AND 12, RESPECTIVELY. THE MONTHLY PREMIUMS FOR B, SERVICE PLAN AND PAYROLL DEDUCT I ON ISSUES ARE THE PREMIUMS LISTED ABOVE.
R25387-44-4

Date: 04/26/2017

MUTUAL OF OMAHA INSURANCE COMPANY
SCHEDULE OF MONTHLY RATES FOR POLICY FORMS

LT50-Series 19241 and LT50-Series 19409

PER \$10 DAILY CONFINED CARE/PER \$10 DAILY COMMUNITY BASED BENEFIT

80% HOME HEALTH CARE BENEFIT

BENEFIT -- 1 YEAR

Issue Age	ELIMINATION PERIODS			
	0 Day	20 Day	100 Day	365 Day
18-39	1.49	1.40	1.21	1.06
40	1.66	1.54	1.34	1.18
41	1.72	1.60	1.38	1.20
42	1.79	1.66	1.44	1.26
43	1.86	1.72	1.49	1.30
44	1.93	1.80	1.55	1.33
45	2.02	1.87	1.61	1.39
46	2.10	1.96	1.68	1.44
47	2.20	2.06	1.76	1.50
48	2.32	2.17	1.86	1.60
49	2.45	2.32	1.96	1.66
50	2.58	2.44	2.06	1.74
51	2.74	2.60	2.18	1.84
52	2.92	2.76	2.32	1.96
53	3.10	2.95	2.47	2.08
54	3.29	3.14	2.62	2.20
55	3.53	3.37	2.81	2.34
56	3.77	3.60	3.00	2.50
57	4.06	3.88	3.20	2.65
58	4.36	4.14	3.42	2.83
59	4.66	4.43	3.65	3.01
60	4.98	4.73	3.90	3.22
61	5.36	5.10	4.18	3.43
62	5.80	5.51	4.52	3.71
63	6.31	5.96	4.91	4.04
64	6.86	6.46	5.32	4.36
65	7.48	7.01	5.78	4.78
66	8.15	7.62	6.29	5.20
67	8.92	8.32	6.85	5.65
68	9.76	9.08	7.45	6.11
69	10.64	9.89	8.08	6.58
70	11.63	10.79	8.75	7.10
71	12.71	11.80	9.53	7.70
72	13.94	12.94	10.42	8.40
73	15.30	14.20	11.44	9.22
74	16.78	15.58	12.58	10.16
75	18.38	17.06	13.81	11.18
76	20.10	18.68	15.13	12.25
77	21.98	20.42	16.52	13.36
78	23.99	22.31	18.02	14.56
79	26.14	24.31	19.58	15.77
80	28.42	26.45	21.26	17.09
81	30.83	28.72	23.00	18.43
82	33.38	31.10	24.85	19.86
83	36.07	33.61	26.78	21.34
84	38.89	36.25	28.79	22.87

TO OBTAIN QUARTERLY, SEMIANNUAL, AND ANNUAL PREMIUMS, MULTIPLY THE ABC QUOTED PREMIUMS BY 3, 6, AND 12. RESPECTIVELY . THE MONTHLY PREMIUMS FOR B SERVICE PLAN AND PAYROLL DEDUCTION ISSUES ARE THE PREMIUMS LISTED ABOVE
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Date: 04/26/2017

MUTUAL OF OMAHA INSURANCE COMPANY
SCHEDULE OF MONTHLY RATES FOR POLICY FORMS

LT50-Series 19241 and LT50-Series 19409

PER \$10 DAILY CONFINED CARE/PER \$10 DAILY COMMUNITY BASED BENEFIT

80% HOME HEALTH CARE BENEFIT

BENEFIT -- 2 YEARS

Issue Age	ELIMINATION PERIODS			
	0 Day	20 Day	100 Day	365 Day
18-39	2.00	1.93	1.66	1.43
40	2.21	2.12	1.84	1.58
41	2.30	2.20	1.90	1.64
42	2.39	2.28	1.97	1.70
43	2.50	2.39	2.05	1.76
44	2.59	2.48	2.12	1.81
45	2.70	2.58	2.21	1.90
46	2.84	2.70	2.32	1.98
47	2.98	2.86	2.42	2.05
48	3.16	3.00	2.54	2.15
49	3.34	3.17	2.68	2.27
50	3.53	3.36	2.84	2.40
51	3.74	3.58	3.01	2.54
52	4.00	3.80	3.19	2.68
53	4.25	4.06	3.41	2.87
54	4.54	4.30	3.62	3.05
55	4.85	4.60	3.86	3.25
56	5.20	4.90	4.12	3.46
57	5.59	5.26	4.42	3.71
58	6.04	5.66	4.74	3.97
59	6.52	6.08	5.08	4.24
60	7.06	6.55	5.46	4.55
61	7.66	7.08	5.88	4.88
62	8.32	7.68	6.35	5.26
63	9.06	8.36	6.86	5.63
64	9.84	9.10	7.42	6.06
65	10.70	9.90	8.02	6.50
66	11.66	10.79	8.69	7.00
67	12.76	11.78	9.48	7.63
68	13.93	12.84	10.34	8.33
69	15.22	13.94	11.27	9.11
70	16.62	15.17	12.29	9.96
71	18.17	16.54	13.45	10.94
72	19.90	18.12	14.76	12.02
73	21.82	19.88	16.24	13.25
74	23.90	21.82	17.86	14.60
75	26.14	23.93	19.60	16.06
76	28.56	26.20	21.47	17.60
77	31.16	28.62	23.45	19.21
78	33.94	31.21	25.54	20.88
79	36.90	33.96	27.74	22.66
80	40.04	36.86	30.07	24.53
81	43.34	39.94	32.51	26.46
82	46.82	43.18	35.08	28.49
83	50.48	46.56	37.74	30.59
84	54.32	50.11	40.54	32.78

TO OBTAIN QUARTERLY, SEMIANNUAL, AND ANNUAL PREMIUMS, MULTIPLY THE ABC QUOTED PREMIUMS BY 3, 6, AND 12, RESPECTIVELY. THE MONTHLY PREMIUMS FOR B/ SERVICE PLAN AND PAYROLL DEDUCTION ISSUES ARE THE PREMIUMS LISTED ABOVE
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MUTUAL OF OMAHA INSURANCE COMPANY
SCHEDULE OF MONTHLY RATES FOR POLICY FORMS

LT50-Series 19241 and LT50-Series 19409

PER \$10 DAILY CONFINED CARE/PER \$10 DAILY COMMUNITY BASED BENEFIT

80% HOME HEALTH CARE BENEFIT

BENEFIT -- 3 YEARS

Issue Age	ELIMINATION PERIODS			
	0 Day	20 Day	100 Day	365 Day
18-39	2.46	2.28	1.96	1.67
40	2.72	2.52	2.15	1.84
41	2.83	2.63	2.24	1.91
42	2.95	2.74	2.33	1.99
43	3.07	2.86	2.44	2.08
44	3.20	2.98	2.52	2.14
45	3.35	3.10	2.62	2.22
46	3.50	3.24	2.75	2.33
47	3.70	3.42	2.89	2.44
48	3.90	3.60	3.04	2.57
49	4.12	3.83	3.20	2.68
50	4.38	4.06	3.38	2.82
51	4.66	4.30	3.58	2.96
52	4.96	4.60	3.80	3.16
53	5.29	4.90	4.06	3.35
54	5.65	5.22	4.32	3.58
55	6.05	5.58	4.62	3.83
56	6.47	5.98	4.94	4.09
57	6.95	6.41	5.29	4.37
58	7.46	6.88	5.68	4.70
59	7.99	7.38	6.10	5.03
60	8.57	7.93	6.55	5.41
61	9.22	8.54	7.04	5.80
62	9.96	9.22	7.60	6.26
63	10.76	9.96	8.20	6.76
64	11.63	10.72	8.84	7.30
65	12.59	11.56	9.55	7.90
66	13.66	12.53	10.34	8.53
67	14.88	13.66	11.26	9.28
68	16.25	14.96	12.28	10.08
69	17.74	16.40	13.39	10.93
70	19.36	17.98	14.62	11.88
71	21.13	19.72	15.95	12.91
72	23.10	21.58	17.44	14.09
73	25.22	23.60	19.04	15.36
74	27.49	25.78	20.77	16.73
75	29.93	28.09	22.63	18.23
76	32.59	30.58	24.64	19.85
77	35.50	33.28	26.83	21.64
78	38.66	36.14	29.18	23.56
79	42.04	39.19	31.72	25.66
80	45.65	42.41	34.39	27.89
81	49.48	45.82	37.24	30.25
82	53.53	49.40	40.24	32.78
83	57.82	53.16	43.40	35.44
84	62.32	57.11	46.74	38.26

TO OBTAIN QUARTERLY, SEMIANNUAL, AND ANNUAL PREMIUMS, MULTIPLY THE ABC PREMIUMS BY 3, 6 AND 12 RESPECTIVELY. THE MONTHLY PREMIUMS FOR BANK SERV PAYROLL DEDUCTION ISSUES ARE THE PREMIUMS LISTED ABOVE.

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MUTUAL OF OMAHA INSURANCE COMPANY
SCHEDULE OF MONTHLY RATES FOR POLICY FORMS

LT50-Series 19241 and LT50-Series 19409

PER \$10 DAILY CONFINED CARE/PER \$10 DAILY COMMUNITY BASED BENEFIT

80% HOME HEALTH CARE BENEFIT

BENEFIT -- 5 YEARS

Issue Age	ELIMINATION PERIODS			
	0 Day	20 Day	100 Day	365 Day
18-39	3.29	3.10	2.64	2.24
40	3.63	3.43	2.88	2.42
41	3.78	3.55	2.99	2.52
42	3.94	3.71	3.11	2.62
43	4.10	3.87	3.23	2.71
44	4.28	4.02	3.37	2.83
45	4.47	4.18	3.50	2.93
46	4.68	4.40	3.67	3.08
47	4.93	4.62	3.87	3.22
48	5.20	4.87	4.07	3.41
49	5.52	5.16	4.31	3.61
50	5.85	5.47	4.57	3.82
51	6.23	5.80	4.86	4.07
52	6.62	6.18	5.16	4.30
53	7.05	6.60	5.52	4.60
54	7.50	7.05	5.87	4.90
55	7.99	7.51	6.27	5.24
56	8.51	8.04	6.71	5.59
57	9.11	8.62	7.17	5.95
58	9.75	9.22	7.63	6.33
59	10.42	9.85	8.11	6.68
60	11.13	10.52	8.65	7.11
61	11.95	11.26	9.23	7.57
62	12.86	12.12	9.91	8.11
63	13.88	13.02	10.64	8.69
64	14.96	13.98	11.42	9.33
65	16.15	15.05	12.29	10.03
66	17.48	16.26	13.27	10.82
67	19.01	17.67	14.39	11.73
68	20.70	19.23	15.63	12.72
69	22.55	20.93	16.98	13.78
70	24.60	22.81	18.48	14.97
71	26.80	24.87	20.12	16.28
72	29.24	27.15	21.96	17.74
73	31.86	29.59	23.91	19.33
74	34.63	32.19	26.00	21.03
75	37.63	34.98	28.29	22.88
76	40.93	38.06	30.80	24.90
77	44.59	41.46	33.57	27.17
78	48.62	45.19	36.59	29.62
79	52.94	49.21	39.88	32.32
80	57.61	53.50	43.38	35.18
81	62.58	58.10	47.14	38.24
82	67.87	62.96	51.13	41.51
83	73.48	68.12	55.36	44.99
84	79.41	73.58	59.84	48.66

TO OBTAIN QUARTERLY, SEMIANNUAL, AND ANNUAL PREMIUMS,
MULTIPLY THE ABOVE QUOTED PREMIUMS BY 3, 6, AND 12,
RESPECTIVELY. THE MONTHLY PREMIUMS FOR BANK SERVICE PLAN
AND PAYROLL DEDUCTION ISSUES ARE THE PREMIUMS LISTED ABOVE.
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MUTUAL OF OMAHA INSURANCE COMPANY
SCHEDULE OF MONTHLY RATES FOR POLICY FORMS

LT50-Series 19241 and LT50-Series 19409

PER \$10 DAILY CONFINED CARE/PER \$10 DAILY COMMUNITY BASED BENEFIT

80% HOME HEALTH CARE BENEFIT

BENEFIT -- LIFETIME

Issue Age	ELIMINATION PERIODS			
	0 Day	20 Day	100 Day	365 Day
18-39	7.48	7.14	5.91	4.84
40	8.22	7.83	6.47	5.38
41	8.53	8.11	6.74	5.62
42	8.88	8.46	7.02	5.82
43	9.23	8.81	7.29	6.04
44	9.66	9.22	7.68	6.38
45	10.11	9.63	8.02	6.69
46	10.58	10.11	8.45	7.07
47	11.12	10.61	8.86	7.37
48	11.74	11.14	9.27	7.77
49	12.35	11.74	9.80	8.18
50	13.01	12.35	10.32	8.58
51	13.71	13.01	10.87	9.07
52	14.54	13.74	11.48	9.57
53	15.36	14.47	12.05	10.03
54	16.25	15.24	12.67	10.57
55	17.20	16.04	13.36	11.12
56	18.27	16.95	14.09	11.74
57	19.44	17.95	14.90	12.37
58	20.69	19.04	15.80	13.11
59	22.01	20.19	16.74	13.85
60	23.47	21.47	17.74	14.64
61	25.08	22.91	18.92	15.63
62	26.91	24.58	20.24	16.65
63	28.95	26.45	21.71	17.83
64	31.10	28.45	23.26	19.03
65	33.48	30.71	25.02	20.42
66	36.13	33.19	27.00	21.98
67	39.17	35.98	29.31	23.86
68	42.50	39.10	31.84	25.94
69	46.10	42.40	34.59	28.22
70	49.98	46.03	37.62	30.74
71	54.36	50.07	40.97	33.53
72	59.19	54.56	44.70	36.63
73	64.43	59.40	48.69	39.91
74	70.05	64.55	52.92	43.40
75	76.13	70.15	57.56	47.20
76	82.86	76.44	62.69	51.43
77	90.24	83.62	68.47	56.06
78	98.37	91.66	74.93	61.25
79	107.18	100.45	81.88	66.76
80	116.61	109.99	89.40	72.67
81	126.72	120.26	97.49	79.04
82	137.43	131.25	106.13	85.82
83	148.79	143.01	115.35	93.00
84	160.77	155.51	125.07	100.58

TO OBTAIN QUARTERLY, SEMIANNUAL, AND ANNUAL PREMIUMS,
MULTIPLY THE ABOVE QUOTED PREMIUMS BY 3, 6, AND 12,
RESPECTIVELY. THE MONTHLY PREMIUMS FOR BANK SERVICE PLAN
AND PAYROLL DEDUCTION ISSUES ARE THE PREMIUMS LISTED ABOVE.
R25387-44-4

Date: 04/26/2017

MUTUAL OF OMAHA INSURANCE COMPANY
SCHEDULE OF MONTHLY RATES FOR POLICY FORMS

LT50-Series 19241 and LT50-Series 19409

PER \$10 DAILY CONFINED CARE/PER \$10 DAILY COMMUNITY BASED BENEFIT

50% HOME HEALTH CARE BENEFIT

BENEFIT -- 1 YEAR

Issue Age	Elimination Periods			
	0 Day	20 Day	100 Day	365 Day
18-39	1.24	1.18	1.02	0.89
40	1.38	1.28	1.12	0.96
41	1.43	1.33	1.15	1.00
42	1.49	1.38	1.19	1.03
43	1.55	1.44	1.24	1.07
44	1.61	1.50	1.30	1.13
45	1.68	1.56	1.36	1.18
46	1.75	1.63	1.40	1.20
47	1.85	1.72	1.48	1.26
48	1.94	1.82	1.55	1.32
49	2.04	1.92	1.63	1.38
50	2.15	2.04	1.72	1.45
51	2.27	2.17	1.84	1.54
52	2.44	2.32	1.94	1.63
53	2.59	2.47	2.06	1.72
54	2.75	2.63	2.20	1.82
55	2.95	2.82	2.35	1.96
56	3.16	3.01	2.51	2.09
57	3.40	3.22	2.68	2.23
58	3.64	3.46	2.86	2.36
59	3.89	3.70	3.05	2.51
60	4.16	3.96	3.25	2.68
61	4.48	4.25	3.49	2.87
62	4.86	4.60	3.77	3.10
63	5.27	4.98	4.09	3.36
64	5.74	5.40	4.44	3.65
65	6.24	5.86	4.84	4.00
66	6.80	6.36	5.26	4.33
67	7.45	6.95	5.72	4.72
68	8.14	7.58	6.22	5.09
69	8.88	8.26	6.74	5.50
70	9.71	9.02	7.31	5.92
71	10.62	9.85	7.96	6.43
72	11.64	10.80	8.71	7.02
73	12.78	11.86	9.56	7.72
74	14.02	13.01	10.51	8.50
75	15.35	14.26	11.54	9.35
76	16.79	15.60	12.64	10.24
77	18.36	17.05	13.80	11.17
78	20.04	18.64	15.05	12.16
79	21.83	20.30	16.36	13.18
80	23.74	22.08	17.75	14.27
81	25.76	23.98	19.22	15.40
82	27.88	25.97	20.75	16.58
83	30.12	28.07	22.36	17.81
84	32.48	30.28	24.04	19.09

TO OBTAIN QUARTERLY, SEMIANNUAL, AND ANNUAL PREMIUMS,
MULTIPLY THE ABOVE QUOTED PREMIUMS BY 3, 6, AND 12,
RESPECTIVELY. THE MONTHLY PREMIUMS FOR BANK SERVICE PLAN
AND PAYROLL DEDUCTION ISSUES ARE THE PREMIUMS LISTED ABOVE.
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Date: 04/26/2017

MUTUAL OF OMAHA INSURANCE COMPANY
SCHEDULE OF MONTHLY RATES FOR POLICY FORMS

LT50-Series 19241 and LT50-Series 19409

PER \$10 DAILY CONFINED CARE/PER \$10 DAILY COMMUNITY BASED BENEFIT

50% HOME HEALTH CARE BENEFIT

BENEFIT -- 2 YEARS

Issue Age	Elimination Periods			
	0 Day	20 Day	100 Day	365 Day
18-39	1.69	1.63	1.42	1.22
40	1.88	1.80	1.55	1.33
41	1.96	1.87	1.61	1.39
42	2.02	1.94	1.67	1.44
43	2.11	2.02	1.73	1.48
44	2.20	2.10	1.80	1.54
45	2.30	2.20	1.88	1.61
46	2.41	2.30	1.96	1.66
47	2.53	2.41	2.05	1.74
48	2.68	2.56	2.15	1.81
49	2.82	2.69	2.27	1.92
50	2.99	2.86	2.41	2.04
51	3.17	3.02	2.56	2.15
52	3.40	3.22	2.70	2.26
53	3.61	3.43	2.89	2.44
54	3.85	3.65	3.07	2.58
55	4.10	3.89	3.28	2.75
56	4.42	4.15	3.50	2.95
57	4.74	4.48	3.74	3.13
58	5.12	4.79	4.02	3.37
59	5.53	5.15	4.30	3.59
60	5.98	5.56	4.63	3.86
61	6.49	6.00	4.98	4.13
62	7.06	6.52	5.39	4.46
63	7.68	7.09	5.81	4.76
64	8.34	7.72	6.28	5.12
65	9.08	8.39	6.79	5.50
66	9.88	9.16	7.36	5.92
67	10.80	10.00	8.04	6.47
68	11.81	10.88	8.76	7.06
69	12.90	11.82	9.56	7.73
70	14.09	12.85	10.42	8.45
71	15.40	14.03	11.40	9.26
72	16.87	15.35	12.52	10.21
73	18.50	16.86	13.76	11.23
74	20.26	18.50	15.13	12.37
75	22.16	20.29	16.62	13.61
76	24.22	22.21	18.20	14.92
77	26.42	24.28	19.88	16.28
78	28.78	26.46	21.64	17.70
79	31.28	28.78	23.52	19.22
80	33.94	31.25	25.50	20.81
81	36.74	33.86	27.56	22.43
82	39.70	36.60	29.74	24.16
83	42.80	39.47	32.00	25.94
84	46.06	42.48	34.36	27.79

TO OBTAIN QUARTERLY, SEMI-ANNUAL, AND ANNUAL PREMIUMS,
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AND PAYROLL DEDUCTION ISSUES ARE THE PREMIUMS LISTED ABOVE.
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Date: 04/26/2017

MUTUAL OF OMAHA INSURANCE COMPANY
SCHEDULE OF MONTHLY RATES FOR POLICY FORMS

LT50-Series 19241 and LT50-Series 19409

PER \$10 DAILY CONFINED CARE/PER \$10 DAILY COMMUNITY BASED BENEFIT

50% HOME HEALTH CARE BENEFIT

BENEFIT -- 3 YEARS

Issue Age	Elimination Periods			
	0 Day	20 Day	100 Day	365 Day
18-39	2.12	1.97	1.67	1.42
40	2.35	2.17	1.86	1.60
41	2.44	2.26	1.93	1.66
42	2.54	2.35	2.00	1.70
43	2.64	2.45	2.08	1.78
44	2.75	2.56	2.17	1.85
45	2.88	2.66	2.26	1.90
46	3.01	2.80	2.38	2.02
47	3.17	2.94	2.48	2.09
48	3.36	3.10	2.62	2.20
49	3.55	3.28	2.75	2.32
50	3.76	3.49	2.90	2.41
51	4.00	3.70	3.07	2.56
52	4.26	3.95	3.28	2.71
53	4.56	4.21	3.49	2.89
54	4.87	4.49	3.71	3.07
55	5.20	4.79	3.97	3.29
56	5.57	5.14	4.24	3.50
57	5.98	5.51	4.56	3.77
58	6.42	5.92	4.90	4.04
59	6.86	6.34	5.24	4.33
60	7.36	6.82	5.63	4.66
61	7.93	7.34	6.06	5.00
62	8.57	7.94	6.54	5.39
63	9.26	8.56	7.06	5.82
64	10.00	9.22	7.61	6.29
65	10.82	9.94	8.21	6.79
66	11.75	10.78	8.89	7.34
67	12.80	11.75	9.68	7.97
68	13.97	12.88	10.57	8.68
69	15.25	14.11	11.53	9.42
70	16.66	15.46	12.58	10.22
71	18.19	16.96	13.72	11.11
72	19.87	18.56	15.00	12.12
73	21.70	20.30	16.38	13.22
74	23.64	22.18	17.87	14.40
75	25.74	24.16	19.46	15.67
76	28.03	26.32	21.20	17.08
77	30.54	28.62	23.08	18.60
78	33.25	31.09	25.10	20.26
79	36.16	33.71	27.28	22.06
80	39.26	36.49	29.59	23.99
81	42.55	39.41	32.03	26.03
82	46.04	42.49	34.62	28.21
83	49.74	45.73	37.33	30.47
84	53.62	49.12	40.20	32.90

TO OBTAIN QUARTERLY, SEMIANNUAL, AND ANNUAL PREMIUMS,
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Date: 04/26/2017

MUTUAL OF OMAHA INSURANCE COMPANY
SCHEDULE OF MONTHLY RATES FOR POLICY FORMS

LT50-Series 19241 and LT50-Series 19409

PER \$10 DAILY CONFINED CARE/PER \$10 DAILY COMMUNITY BASED BENEFIT

50% HOME HEALTH CARE BENEFIT

BENEFIT -- 5 YEARS

Issue Age	Elimination Periods			
	0 Day	20 Day	100 Day	365 Day
18-39	2.90	2.75	2.33	1.98
40	3.21	3.03	2.55	2.16
41	3.34	3.15	2.65	2.23
42	3.48	3.28	2.75	2.31
43	3.62	3.41	2.85	2.38
44	3.77	3.54	2.97	2.49
45	3.95	3.71	3.10	2.60
46	4.14	3.87	3.23	2.71
47	4.36	4.08	3.41	2.83
48	4.60	4.30	3.59	2.99
49	4.87	4.55	3.81	3.18
50	5.16	4.83	4.04	3.38
51	5.50	5.13	4.28	3.58
52	5.85	5.46	4.57	3.82
53	6.23	5.82	4.86	4.07
54	6.62	6.22	5.19	4.33
55	7.06	6.64	5.54	4.63
56	7.52	7.11	5.92	4.93
57	8.04	7.61	6.31	5.24
58	8.60	8.14	6.73	5.57
59	9.19	8.69	7.17	5.93
60	9.83	9.30	7.65	6.29
61	10.55	9.94	8.16	6.71
62	11.35	10.69	8.76	7.17
63	12.25	11.51	9.39	7.67
64	13.21	12.35	10.09	8.24
65	14.25	13.29	10.85	8.86
66	15.44	14.37	11.73	9.55
67	16.78	15.59	12.72	10.35
68	18.28	16.97	13.81	11.23
69	19.92	18.49	15.00	12.19
70	21.70	20.14	16.31	13.21
71	23.65	21.97	17.78	14.39
72	25.82	23.97	19.38	15.69
73	28.12	26.13	21.12	17.07
74	30.58	28.42	22.97	18.57
75	33.22	30.89	24.99	20.21
76	36.15	33.61	27.18	21.99
77	39.38	36.61	29.63	24.00
78	42.92	39.91	32.32	26.18
79	46.75	43.44	35.22	28.56
80	50.86	47.25	38.30	31.06
81	55.24	51.29	41.62	33.77
82	59.93	55.59	45.14	36.67
83	64.88	60.17	48.88	39.72
84	70.11	64.99	52.84	42.96

TO OBTAIN QUARTERLY, SEMIANNUAL, AND ANNUAL PREMIUMS,
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MUTUAL OF OMAHA INSURANCE COMPANY
SCHEDULE OF MONTHLY RATES FOR POLICY FORMS

LT50-Series 19241 and LT50-Series 19409

PER \$10 DAILY CONFINED CARE/PER \$10 DAILY COMMUNITY BASED BENEFIT

50% HOME HEALTH CARE BENEFIT

BENEFIT -- LIFETIME

Issue Age	Elimination Periods			
	0 Day	20 Day	100 Day	365 Day
18-39	6.76	6.47	5.31	4.38
40	7.44	7.08	5.89	4.84
41	7.72	7.36	6.08	5.04
42	8.02	7.64	6.37	5.28
43	8.34	7.98	6.62	5.53
44	8.76	8.34	6.93	5.77
45	9.15	8.72	7.28	6.07
46	9.61	9.15	7.64	6.38
47	10.07	9.61	8.00	6.69
48	10.61	10.11	8.45	7.07
49	11.18	10.65	8.87	7.38
50	11.75	11.18	9.33	7.79
51	12.44	11.78	9.86	8.23
52	13.12	12.44	10.35	8.63
53	13.92	13.09	10.91	9.12
54	14.71	13.81	11.50	9.57
55	15.58	14.54	12.08	10.05
56	16.54	15.34	12.77	10.65
57	17.58	16.25	13.51	11.25
58	18.73	17.24	14.29	11.87
59	19.94	18.29	15.15	12.55
60	21.23	19.44	16.04	13.25
61	22.69	20.73	17.10	14.11
62	24.38	22.23	18.32	15.09
63	26.20	23.93	19.67	16.15
64	28.15	25.75	21.07	17.24
65	30.30	27.81	22.68	18.49
66	32.73	30.04	24.43	19.90
67	35.44	32.59	26.54	21.61
68	38.47	35.40	28.82	23.48
69	41.72	38.41	31.33	25.56
70	45.26	41.70	34.05	27.82
71	49.23	45.31	37.08	30.34
72	53.58	49.39	40.47	33.18
73	58.32	53.76	44.07	36.14
74	63.42	58.42	47.90	39.27
75	68.92	63.50	52.11	42.76
76	74.99	69.22	56.75	46.54
77	81.71	75.69	61.99	50.78
78	89.07	82.97	67.82	55.42
79	97.03	90.94	74.11	60.39
80	105.58	99.53	80.93	65.78
81	114.70	108.87	88.25	71.55
82	124.40	118.84	96.08	77.71
83	134.70	129.50	104.41	84.20
84	145.56	140.79	113.23	91.08

TO OBTAIN QUARTERLY, SEMIANNUAL, AND ANNUAL PREMIUMS,
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MUTUAL OF OMAHA INSURANCE COMPANY
SCHEDULE OF MONTHLY RATES FOR POLICY FORMS

LT50-Series 19241 and LT50-Series 19409

PER \$10 DAILY CONFINED CARE/PER \$10 DAILY COMMUNITY BASED BENEFIT

100% HOME HEALTH CARE BENEFIT

BENEFIT -- 1 YEAR

Issue Age	ELIMINATION PERIODS			
	0 Day	20 Day	100 Day	365 Day
18-39	1.66	1.54	1.33	1.15
40	1.84	1.68	1.45	1.25
41	1.90	1.74	1.50	1.30
42	1.98	1.82	1.56	1.34
43	2.06	1.90	1.62	1.39
44	2.14	1.97	1.68	1.43
45	2.23	2.05	1.75	1.49
46	2.34	2.15	1.84	1.56
47	2.45	2.26	1.92	1.63
48	2.57	2.39	2.02	1.72
49	2.71	2.53	2.12	1.78
50	2.87	2.68	2.24	1.87
51	3.04	2.86	2.38	1.98
52	3.22	3.04	2.52	2.09
53	3.44	3.24	2.68	2.22
54	3.66	3.46	2.86	2.36
55	3.92	3.70	3.05	2.51
56	4.19	3.96	3.26	2.68
57	4.50	4.24	3.49	2.87
58	4.82	4.55	3.72	3.04
59	5.16	4.87	3.98	3.25
60	5.53	5.20	4.24	3.46
61	5.95	5.60	4.55	3.70
62	6.46	6.05	4.92	4.00
63	7.01	6.55	5.33	4.34
64	7.62	7.10	5.78	4.72
65	8.29	7.70	6.29	5.14
66	9.05	8.38	6.84	5.59
67	9.89	9.14	7.46	6.10
68	10.82	9.98	8.10	6.58
69	11.81	10.87	8.78	7.09
70	12.90	11.86	9.53	7.66
71	14.11	12.96	10.36	8.28
72	15.47	14.21	11.34	9.05
73	16.98	15.60	12.46	9.94
74	18.64	17.11	13.69	10.96
75	20.40	18.76	15.02	12.04
76	22.32	20.52	16.45	13.19
77	24.40	22.44	17.98	14.41
78	26.63	24.52	19.60	15.67
79	29.02	26.71	21.31	17.00
80	31.55	29.06	23.12	18.40
81	34.24	31.55	25.03	19.86
82	37.06	34.18	27.04	21.38
83	40.04	36.94	29.14	22.98
84	43.18	39.84	31.32	24.62

TO OBTAIN QUARTERLY, SEMIANNUAL, AND ANNUAL PREMIUMS, MULTIPLY THE ABC QUOTED PREMIUMS BY 3, 6, AND 12, RESPECTIVELY. THE MONTHLY PREMIUMS FOR BANK SERVICE PLAN AND PAYROLL DEDUCTION ISSUES ARE THE PREMIUMS LISTED / R25387-44-4

Date: 04/26/2017

MUTUAL OF OMAHA INSURANCE COMPANY
SCHEDULE OF MONTHLY RATES FOR POLICY FORMS

LT50-Series 19241 and LT50-Series 19409

PER \$10 DAILY CONFINED CARE/PER \$10 DAILY COMMUNITY BASED BENEFIT

100% HOME HEALTH CARE BENEFIT

BENEFIT -- TWO YEARS

Issue Age	ELIMINATION PERIODS			
	0 Day	20 Day	100 Day	365 Day
18-39	2.20	2.09	1.79	1.54
40	2.44	2.32	1.97	1.68
41	2.52	2.40	2.04	1.73
42	2.62	2.50	2.12	1.80
43	2.74	2.59	2.20	1.87
44	2.86	2.69	2.28	1.93
45	2.98	2.81	2.38	2.02
46	3.11	2.94	2.48	2.09
47	3.28	3.10	2.60	2.20
48	3.46	3.26	2.74	2.29
49	3.65	3.46	2.89	2.42
50	3.88	3.65	3.05	2.56
51	4.12	3.88	3.23	2.69
52	4.39	4.13	3.44	2.87
53	4.67	4.40	3.66	3.04
54	4.98	4.68	3.90	3.25
55	5.32	4.99	4.15	3.46
56	5.70	5.32	4.44	3.71
57	6.14	5.72	4.75	3.94
58	6.64	6.16	5.10	4.24
59	7.16	6.61	5.47	4.54
60	7.74	7.12	5.88	4.86
61	8.40	7.69	6.32	5.20
62	9.14	8.35	6.83	5.59
63	9.95	9.10	7.38	5.99
64	10.80	9.88	7.98	6.46
65	11.75	10.76	8.63	6.92
66	12.80	11.74	9.35	7.45
67	13.99	12.80	10.20	8.14
68	15.30	13.96	11.14	8.88
69	16.72	15.16	12.13	9.71
70	18.24	16.48	13.24	10.62
71	19.94	17.98	14.47	11.65
72	21.85	19.69	15.88	12.82
73	23.96	21.61	17.46	14.11
74	26.23	23.72	19.21	15.56
75	28.70	26.02	21.10	17.10
76	31.36	28.48	23.10	18.74
77	34.21	31.12	25.24	20.46
78	37.26	33.94	27.48	22.26
79	40.51	36.90	29.86	24.16
80	43.96	40.07	32.36	26.14
81	47.58	43.42	34.99	28.20
82	51.41	46.92	37.74	30.36
83	55.43	50.62	40.62	32.60
84	59.64	54.47	43.63	34.96

TO OBTAIN QUARTERLY, SEMIANNUAL, AND ANNUAL PREMIUMS, MULTIPLY THE ABC QUOTED PREMIUMS BY 3, 6, AND 12, RESPECTIVELY. THE MONTHLY PREMIUMS FOR B/ SERVICE PLAN AND PAYROLL DEDUCTION ISSUES ARE THE PREMIUMS LISTED ABOVE. R25387-44-4

Date: 04/26/2017

MUTUAL OF OMAHA INSURANCE COMPANY
SCHEDULE OF MONTHLY RATES FOR POLICY FORMS

LT50-Series 19241 and LT50-Series 19409

PER \$10 DAILY CONFINED CARE/PER \$10 DAILY COMMUNITY BASED BENEFIT

100% HOME HEALTH CARE BENEFIT

BENEFIT -- 3 YEARS

Issue Age	ELIMINATION PERIOD			
	0 Day	20 Day	100 Day	365 Day
18-39	2.68	2.46	2.08	1.74
40	2.96	2.71	2.30	1.96
41	3.07	2.83	2.39	2.02
42	3.20	2.94	2.48	2.09
43	3.34	3.06	2.58	2.18
44	3.48	3.19	2.68	2.26
45	3.64	3.34	2.80	2.34
46	3.80	3.49	2.93	2.46
47	4.01	3.67	3.07	2.57
48	4.24	3.88	3.23	2.69
49	4.48	4.12	3.41	2.83
50	4.75	4.36	3.59	2.96
51	5.05	4.63	3.80	3.12
52	5.39	4.94	4.06	3.32
53	5.75	5.26	4.31	3.53
54	6.14	5.62	4.60	3.77
55	6.58	6.00	4.92	4.03
56	7.03	6.42	5.26	4.30
57	7.55	6.89	5.64	4.62
58	8.10	7.40	6.05	4.96
59	8.68	7.94	6.49	5.30
60	9.30	8.53	6.97	5.70
61	10.01	9.18	7.50	6.13
62	10.81	9.91	8.09	6.60
63	11.69	10.70	8.74	7.12
64	12.64	11.52	9.41	7.69
65	13.67	12.42	10.16	8.32
66	14.83	13.46	11.02	9.01
67	16.18	14.69	11.99	9.79
68	17.65	16.09	13.08	10.63
69	19.26	17.64	14.26	11.53
70	21.02	19.33	15.56	12.53
71	22.96	21.19	16.98	13.61
72	25.09	23.21	18.56	14.84
73	27.40	25.38	20.28	16.20
74	29.86	27.71	22.12	17.64
75	32.51	30.20	24.10	19.22
76	35.39	32.88	26.23	20.92
77	38.56	35.77	28.56	22.80
78	41.98	38.86	31.07	24.84
79	45.66	42.14	33.76	27.05
80	49.57	45.60	36.62	29.41
81	53.74	49.27	39.64	31.90
82	58.14	53.12	42.84	34.55
83	62.80	57.16	46.21	37.36
84	67.69	61.40	49.76	40.33

TO OBTAIN QUARTERLY, SEMIANNUAL, AND ANNUAL PREMIUMS, MULTIPLY THE ABC QUOTED PREMIUMS BY 3, 6, AND 12, RESPECTIVELY. THE MONTHLY PREMIUMS FOR B+ SERVICE PLAN AND PAYROLL DEDUCTION ISSUES ARE THE PREMIUMS LISTED ABOVE
R25387-44-4

Date: 04/26/2017

MUTUAL OF OMAHA INSURANCE COMPANY
SCHEDULE OF MONTHLY RATES FOR POLICY FORMS

LT50-Series 19241 and LT50-Series 19409

PER \$10 DAILY CONFINED CARE/PER \$10 DAILY COMMUNITY BASED BENEFIT

100% HOME HEALTH CARE BENEFIT

Issue Age	BENEFIT -- 5 YEARS			
	ELIMINATION PERIODS			
	0 Day	20 Day	100 Day	365 Day
18-39	3.54	3.30	2.78	2.35
40	3.91	3.65	3.04	2.52
41	4.07	3.78	3.16	2.63
42	4.24	3.94	3.28	2.73
43	4.41	4.10	3.41	2.82
44	4.60	4.28	3.54	2.95
45	4.81	4.47	3.70	3.08
46	5.03	4.66	3.87	3.21
47	5.29	4.93	4.07	3.36
48	5.60	5.19	4.29	3.55
49	5.93	5.49	4.53	3.74
50	6.28	5.81	4.82	4.00
51	6.69	6.18	5.10	4.22
52	7.12	6.58	5.46	4.51
53	7.58	7.02	5.80	4.80
54	8.05	7.50	6.19	5.13
55	8.58	8.00	6.61	5.47
56	9.15	8.56	7.06	5.83
57	9.79	9.16	7.54	6.19
58	10.47	9.81	8.03	6.58
59	11.20	10.47	8.56	6.97
60	11.96	11.20	9.11	7.41
61	12.85	11.99	9.72	7.90
62	13.84	12.88	10.44	8.46
63	14.92	13.86	11.21	9.06
64	16.08	14.89	12.02	9.71
65	17.35	16.02	12.94	10.45
66	18.79	17.30	13.97	11.28
67	20.42	18.79	15.16	12.22
68	22.25	20.45	16.46	13.24
69	24.23	22.29	17.90	14.38
70	26.41	24.27	19.47	15.62
71	28.79	26.47	21.20	16.97
72	31.42	28.89	23.11	18.50
73	34.23	31.47	25.19	20.17
74	37.20	34.23	27.40	21.93
75	40.44	37.21	29.79	23.85
76	43.98	40.50	32.43	25.98
77	47.91	44.11	35.35	28.31
78	52.23	48.07	38.54	30.91
79	56.89	52.34	42.00	33.70
80	61.90	56.91	45.69	36.69
81	67.24	61.80	49.65	39.91
82	72.93	66.98	53.86	43.31
83	78.96	72.48	58.32	46.92
84	85.33	78.29	63.02	50.73

TO OBTAIN QUARTERLY, SEMIANNUAL, AND ANNUAL PREMIUMS, MULTIPLY THE ABC QUOTED PREMIUMS BY 3, 6, AND 12, RESPECTIVELY. THE MONTHLY PREMIUMS FOR B, SERVICE PLAN AND PAYROLL DEDUCTION ISSUES ARE THE PREMIUMS LISTED ABOVE
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Date: 04/26/2017

MUTUAL OF OMAHA INSURANCE COMPANY
SCHEDULE OF MONTHLY RATES FOR POLICY FORMS

LT50-Series 19241 and LT50-Series 19409

PER \$10 DAILY CONFINED CARE/PER \$10 DAILY COMMUNITY BASED BENEFIT

100% HOME HEALTH CARE BENEFIT

Issue Age	BENEFIT -- LIFETIME			
	ELIMINATION PERIODS			
	0 Day	20 Day	100 Day	365 Day
18-39	7.96	7.53	6.13	5.03
40	8.72	8.23	6.76	5.54
41	9.05	8.56	7.02	5.76
42	9.45	8.91	7.29	6.01
43	9.86	9.27	7.64	6.29
44	10.26	9.71	8.00	6.61
45	10.75	10.15	8.34	6.89
46	11.27	10.65	8.79	7.26
47	11.85	11.14	9.22	7.61
48	12.45	11.74	9.71	8.00
49	13.12	12.35	10.21	8.45
50	13.83	13.01	10.75	8.88
51	14.61	13.71	11.32	9.33
52	15.46	14.46	11.95	9.87
53	16.33	15.24	12.57	10.41
54	17.28	16.04	13.21	10.88
55	18.29	16.88	13.92	11.48
56	19.44	17.85	14.70	12.11
57	20.67	18.92	15.55	12.77
58	21.99	20.07	16.49	13.55
59	23.41	21.28	17.43	14.32
60	24.93	22.61	18.49	15.15
61	26.66	24.10	19.72	16.11
62	28.64	25.86	21.08	17.19
63	30.76	27.82	22.62	18.38
64	33.07	29.95	24.25	19.67
65	35.59	32.33	26.07	21.07
66	38.42	34.93	28.15	22.69
67	41.64	37.92	30.53	24.61
68	45.20	41.17	33.19	26.75
69	48.99	44.64	36.06	29.10
70	53.18	48.45	39.23	31.74
71	57.79	52.68	42.70	34.59
72	62.95	57.44	46.59	37.78
73	68.52	62.53	50.76	41.19
74	74.46	67.93	55.18	44.79
75	80.94	73.85	60.01	48.74
76	88.07	80.47	65.37	53.07
77	95.94	88.01	71.37	57.86
78	104.62	96.49	78.07	63.18
79	113.95	105.74	85.31	68.86
80	123.98	115.77	93.18	74.99
81	134.71	126.58	101.63	81.57
82	146.10	138.15	110.62	88.56
83	158.21	150.55	120.20	95.99
84	170.96	163.70	130.36	103.85

TO OBTAIN QUARTERLY, SEMIANNUAL, AND ANNUAL PREMIUMS, MULTIPLY THE ABC QUOTED PREMIUMS BY 3, 6, AND 12, RESPECTIVELY. THE MONTHLY PREMIUMS FOR B, SERVICE PLAN AND PAYROLL DEDUCT I ON ISSUES ARE THE PREMIUMS LISTED ABOVE.
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Date: 04/26/2017

MUTUAL OF OMAHA INSURANCE COMPANY
SCHEDULE OF MONTHLY RATES FOR POLICY FORMS

LT50-Series 19241 and LT50-Series 19409

PER \$10 DAILY CONFINED CARE/PER \$10 DAILY COMMUNITY BASED BENEFIT

80% HOME HEALTH CARE BENEFIT

BENEFIT -- 1 YEAR

Issue Age	ELIMINATION PERIODS			
	0 Day	20 Day	100 Day	365 Day
18-39	1.49	1.40	1.21	1.06
40	1.66	1.54	1.34	1.18
41	1.72	1.60	1.38	1.20
42	1.79	1.66	1.44	1.26
43	1.86	1.72	1.49	1.30
44	1.93	1.80	1.55	1.33
45	2.02	1.87	1.61	1.39
46	2.10	1.96	1.68	1.44
47	2.20	2.06	1.76	1.50
48	2.32	2.17	1.86	1.60
49	2.45	2.32	1.96	1.66
50	2.58	2.44	2.06	1.74
51	2.74	2.60	2.18	1.84
52	2.92	2.76	2.32	1.96
53	3.10	2.95	2.47	2.08
54	3.29	3.14	2.62	2.20
55	3.53	3.37	2.81	2.34
56	3.77	3.60	3.00	2.50
57	4.06	3.88	3.20	2.65
58	4.36	4.14	3.42	2.83
59	4.66	4.43	3.65	3.01
60	4.98	4.73	3.90	3.22
61	5.36	5.10	4.18	3.43
62	5.80	5.51	4.52	3.71
63	6.31	5.96	4.91	4.04
64	6.86	6.46	5.32	4.36
65	7.48	7.01	5.78	4.78
66	8.15	7.62	6.29	5.20
67	8.92	8.32	6.85	5.65
68	9.76	9.08	7.45	6.11
69	10.64	9.89	8.08	6.58
70	11.63	10.79	8.75	7.10
71	12.71	11.80	9.53	7.70
72	13.94	12.94	10.42	8.40
73	15.30	14.20	11.44	9.22
74	16.78	15.58	12.58	10.16
75	18.38	17.06	13.81	11.18
76	20.10	18.68	15.13	12.25
77	21.98	20.42	16.52	13.36
78	23.99	22.31	18.02	14.56
79	26.14	24.31	19.58	15.77
80	28.42	26.45	21.26	17.09
81	30.83	28.72	23.00	18.43
82	33.38	31.10	24.85	19.86
83	36.07	33.61	26.78	21.34
84	38.89	36.25	28.79	22.87

TO OBTAIN QUARTERLY, SEMIANNUAL, AND ANNUAL PREMIUMS, MULTIPLY THE ABC QUOTED PREMIUMS BY 3, 6, AND 12. RESPECTIVELY . THE MONTHLY PREMIUMS FOR B SERVICE PLAN AND PAYROLL DEDUCTION ISSUES ARE THE PREMIUMS LISTED ABOVE
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MUTUAL OF OMAHA INSURANCE COMPANY
SCHEDULE OF MONTHLY RATES FOR POLICY FORMS

LT50-Series 19241 and LT50-Series 19409

PER \$10 DAILY CONFINED CARE/PER \$10 DAILY COMMUNITY BASED BENEFIT

80% HOME HEALTH CARE BENEFIT

BENEFIT -- 2 YEARS

Issue Age	ELIMINATION PERIODS			
	0 Day	20 Day	100 Day	365 Day
18-39	2.00	1.93	1.66	1.43
40	2.21	2.12	1.84	1.58
41	2.30	2.20	1.90	1.64
42	2.39	2.28	1.97	1.70
43	2.50	2.39	2.05	1.76
44	2.59	2.48	2.12	1.81
45	2.70	2.58	2.21	1.90
46	2.84	2.70	2.32	1.98
47	2.98	2.86	2.42	2.05
48	3.16	3.00	2.54	2.15
49	3.34	3.17	2.68	2.27
50	3.53	3.36	2.84	2.40
51	3.74	3.58	3.01	2.54
52	4.00	3.80	3.19	2.68
53	4.25	4.06	3.41	2.87
54	4.54	4.30	3.62	3.05
55	4.85	4.60	3.86	3.25
56	5.20	4.90	4.12	3.46
57	5.59	5.26	4.42	3.71
58	6.04	5.66	4.74	3.97
59	6.52	6.08	5.08	4.24
60	7.06	6.55	5.46	4.55
61	7.66	7.08	5.88	4.88
62	8.32	7.68	6.35	5.26
63	9.06	8.36	6.86	5.63
64	9.84	9.10	7.42	6.06
65	10.70	9.90	8.02	6.50
66	11.66	10.79	8.69	7.00
67	12.76	11.78	9.48	7.63
68	13.93	12.84	10.34	8.33
69	15.22	13.94	11.27	9.11
70	16.62	15.17	12.29	9.96
71	18.17	16.54	13.45	10.94
72	19.90	18.12	14.76	12.02
73	21.82	19.88	16.24	13.25
74	23.90	21.82	17.86	14.60
75	26.14	23.93	19.60	16.06
76	28.56	26.20	21.47	17.60
77	31.16	28.62	23.45	19.21
78	33.94	31.21	25.54	20.88
79	36.90	33.96	27.74	22.66
80	40.04	36.86	30.07	24.53
81	43.34	39.94	32.51	26.46
82	46.82	43.18	35.08	28.49
83	50.48	46.56	37.74	30.59
84	54.32	50.11	40.54	32.78

TO OBTAIN QUARTERLY, SEMIANNUAL, AND ANNUAL PREMIUMS, MULTIPLY THE ABC QUOTED PREMIUMS BY 3, 6, AND 12, RESPECTIVELY. THE MONTHLY PREMIUMS FOR B/ SERVICE PLAN AND PAYROLL DEDUCTION ISSUES ARE THE PREMIUMS LISTED ABOVE
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Date: 04/26/2017

MUTUAL OF OMAHA INSURANCE COMPANY
SCHEDULE OF MONTHLY RATES FOR POLICY FORMS

LT50-Series 19241 and LT50-Series 19409

PER \$10 DAILY CONFINED CARE/PER \$10 DAILY COMMUNITY BASED BENEFIT

80% HOME HEALTH CARE BENEFIT

BENEFIT -- 3 YEARS

Issue Age	ELIMINATION PERIODS			
	0 Day	20 Day	100 Day	365 Day
18-39	2.46	2.28	1.96	1.67
40	2.72	2.52	2.15	1.84
41	2.83	2.63	2.24	1.91
42	2.95	2.74	2.33	1.99
43	3.07	2.86	2.44	2.08
44	3.20	2.98	2.52	2.14
45	3.35	3.10	2.62	2.22
46	3.50	3.24	2.75	2.33
47	3.70	3.42	2.89	2.44
48	3.90	3.60	3.04	2.57
49	4.12	3.83	3.20	2.68
50	4.38	4.06	3.38	2.82
51	4.66	4.30	3.58	2.96
52	4.96	4.60	3.80	3.16
53	5.29	4.90	4.06	3.35
54	5.65	5.22	4.32	3.58
55	6.05	5.58	4.62	3.83
56	6.47	5.98	4.94	4.09
57	6.95	6.41	5.29	4.37
58	7.46	6.88	5.68	4.70
59	7.99	7.38	6.10	5.03
60	8.57	7.93	6.55	5.41
61	9.22	8.54	7.04	5.80
62	9.96	9.22	7.60	6.26
63	10.76	9.96	8.20	6.76
64	11.63	10.72	8.84	7.30
65	12.59	11.56	9.55	7.90
66	13.66	12.53	10.34	8.53
67	14.88	13.66	11.26	9.28
68	16.25	14.96	12.28	10.08
69	17.74	16.40	13.39	10.93
70	19.36	17.98	14.62	11.88
71	21.13	19.72	15.95	12.91
72	23.10	21.58	17.44	14.09
73	25.22	23.60	19.04	15.36
74	27.49	25.78	20.77	16.73
75	29.93	28.09	22.63	18.23
76	32.59	30.58	24.64	19.85
77	35.50	33.28	26.83	21.64
78	38.66	36.14	29.18	23.56
79	42.04	39.19	31.72	25.66
80	45.65	42.41	34.39	27.89
81	49.48	45.82	37.24	30.25
82	53.53	49.40	40.24	32.78
83	57.82	53.16	43.40	35.44
84	62.32	57.11	46.74	38.26

TO OBTAIN QUARTERLY, SEMIANNUAL, AND ANNUAL PREMIUMS, MULTIPLY THE ABC PREMIUMS BY 3, 6 AND 12 RESPECTIVELY. THE MONTHLY PREMIUMS FOR BANK SERV PAYROLL DEDUCTION ISSUES ARE THE PREMIUMS LISTED ABOVE.

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MUTUAL OF OMAHA INSURANCE COMPANY
SCHEDULE OF MONTHLY RATES FOR POLICY FORMS

LT50-Series 19241 and LT50-Series 19409

PER \$10 DAILY CONFINED CARE/PER \$10 DAILY COMMUNITY BASED BENEFIT

80% HOME HEALTH CARE BENEFIT

BENEFIT -- 5 YEARS

Issue Age	ELIMINATION PERIODS			
	0 Day	20 Day	100 Day	365 Day
18-39	3.29	3.10	2.64	2.24
40	3.63	3.43	2.88	2.42
41	3.78	3.55	2.99	2.52
42	3.94	3.71	3.11	2.62
43	4.10	3.87	3.23	2.71
44	4.28	4.02	3.37	2.83
45	4.47	4.18	3.50	2.93
46	4.68	4.40	3.67	3.08
47	4.93	4.62	3.87	3.22
48	5.20	4.87	4.07	3.41
49	5.52	5.16	4.31	3.61
50	5.85	5.47	4.57	3.82
51	6.23	5.80	4.86	4.07
52	6.62	6.18	5.16	4.30
53	7.05	6.60	5.52	4.60
54	7.50	7.05	5.87	4.90
55	7.99	7.51	6.27	5.24
56	8.51	8.04	6.71	5.59
57	9.11	8.62	7.17	5.95
58	9.75	9.22	7.63	6.33
59	10.42	9.85	8.11	6.68
60	11.13	10.52	8.65	7.11
61	11.95	11.26	9.23	7.57
62	12.86	12.12	9.91	8.11
63	13.88	13.02	10.64	8.69
64	14.96	13.98	11.42	9.33
65	16.15	15.05	12.29	10.03
66	17.48	16.26	13.27	10.82
67	19.01	17.67	14.39	11.73
68	20.70	19.23	15.63	12.72
69	22.55	20.93	16.98	13.78
70	24.60	22.81	18.48	14.97
71	26.80	24.87	20.12	16.28
72	29.24	27.15	21.96	17.74
73	31.86	29.59	23.91	19.33
74	34.63	32.19	26.00	21.03
75	37.63	34.98	28.29	22.88
76	40.93	38.06	30.80	24.90
77	44.59	41.46	33.57	27.17
78	48.62	45.19	36.59	29.62
79	52.94	49.21	39.88	32.32
80	57.61	53.50	43.38	35.18
81	62.58	58.10	47.14	38.24
82	67.87	62.96	51.13	41.51
83	73.48	68.12	55.36	44.99
84	79.41	73.58	59.84	48.66

TO OBTAIN QUARTERLY, SEMIANNUAL, AND ANNUAL PREMIUMS,
MULTIPLY THE ABOVE QUOTED PREMIUMS BY 3, 6, AND 12,
RESPECTIVELY. THE MONTHLY PREMIUMS FOR BANK SERVICE PLAN
AND PAYROLL DEDUCTION ISSUES ARE THE PREMIUMS LISTED ABOVE.
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SCHEDULE OF MONTHLY RATES FOR POLICY FORMS

LT50-Series 19241 and LT50-Series 19409

PER \$10 DAILY CONFINED CARE/PER \$10 DAILY COMMUNITY BASED BENEFIT

80% HOME HEALTH CARE BENEFIT

BENEFIT -- LIFETIME

Issue Age	ELIMINATION PERIODS			
	0 Day	20 Day	100 Day	365 Day
18-39	7.48	7.14	5.91	4.84
40	8.22	7.83	6.47	5.38
41	8.53	8.11	6.74	5.62
42	8.88	8.46	7.02	5.82
43	9.23	8.81	7.29	6.04
44	9.66	9.22	7.68	6.38
45	10.11	9.63	8.02	6.69
46	10.58	10.11	8.45	7.07
47	11.12	10.61	8.86	7.37
48	11.74	11.14	9.27	7.77
49	12.35	11.74	9.80	8.18
50	13.01	12.35	10.32	8.58
51	13.71	13.01	10.87	9.07
52	14.54	13.74	11.48	9.57
53	15.36	14.47	12.05	10.03
54	16.25	15.24	12.67	10.57
55	17.20	16.04	13.36	11.12
56	18.27	16.95	14.09	11.74
57	19.44	17.95	14.90	12.37
58	20.69	19.04	15.80	13.11
59	22.01	20.19	16.74	13.85
60	23.47	21.47	17.74	14.64
61	25.08	22.91	18.92	15.63
62	26.91	24.58	20.24	16.65
63	28.95	26.45	21.71	17.83
64	31.10	28.45	23.26	19.03
65	33.48	30.71	25.02	20.42
66	36.13	33.19	27.00	21.98
67	39.17	35.98	29.31	23.86
68	42.50	39.10	31.84	25.94
69	46.10	42.40	34.59	28.22
70	49.98	46.03	37.62	30.74
71	54.36	50.07	40.97	33.53
72	59.19	54.56	44.70	36.63
73	64.43	59.40	48.69	39.91
74	70.05	64.55	52.92	43.40
75	76.13	70.15	57.56	47.20
76	82.86	76.44	62.69	51.43
77	90.24	83.62	68.47	56.06
78	98.37	91.66	74.93	61.25
79	107.18	100.45	81.88	66.76
80	116.61	109.99	89.40	72.67
81	126.72	120.26	97.49	79.04
82	137.43	131.25	106.13	85.82
83	148.79	143.01	115.35	93.00
84	160.77	155.51	125.07	100.58

TO OBTAIN QUARTERLY, SEMIANNUAL, AND ANNUAL PREMIUMS,
MULTIPLY THE ABOVE QUOTED PREMIUMS BY 3, 6, AND 12,
RESPECTIVELY. THE MONTHLY PREMIUMS FOR BANK SERVICE PLAN
AND PAYROLL DEDUCTION ISSUES ARE THE PREMIUMS LISTED ABOVE.
R25387-44-4

Date: 04/26/2017

MUTUAL OF OMAHA INSURANCE COMPANY
SCHEDULE OF MONTHLY RATES FOR POLICY FORMS

LT50-Series 19241 and LT50-Series 19409

PER \$10 DAILY CONFINED CARE/PER \$10 DAILY COMMUNITY BASED BENEFIT

50% HOME HEALTH CARE BENEFIT

BENEFIT -- 1 YEAR

Issue Age	Elimination Periods			
	0 Day	20 Day	100 Day	365 Day
18-39	1.24	1.18	1.02	0.89
40	1.38	1.28	1.12	0.96
41	1.43	1.33	1.15	1.00
42	1.49	1.38	1.19	1.03
43	1.55	1.44	1.24	1.07
44	1.61	1.50	1.30	1.13
45	1.68	1.56	1.36	1.18
46	1.75	1.63	1.40	1.20
47	1.85	1.72	1.48	1.26
48	1.94	1.82	1.55	1.32
49	2.04	1.92	1.63	1.38
50	2.15	2.04	1.72	1.45
51	2.27	2.17	1.84	1.54
52	2.44	2.32	1.94	1.63
53	2.59	2.47	2.06	1.72
54	2.75	2.63	2.20	1.82
55	2.95	2.82	2.35	1.96
56	3.16	3.01	2.51	2.09
57	3.40	3.22	2.68	2.23
58	3.64	3.46	2.86	2.36
59	3.89	3.70	3.05	2.51
60	4.16	3.96	3.25	2.68
61	4.48	4.25	3.49	2.87
62	4.86	4.60	3.77	3.10
63	5.27	4.98	4.09	3.36
64	5.74	5.40	4.44	3.65
65	6.24	5.86	4.84	4.00
66	6.80	6.36	5.26	4.33
67	7.45	6.95	5.72	4.72
68	8.14	7.58	6.22	5.09
69	8.88	8.26	6.74	5.50
70	9.71	9.02	7.31	5.92
71	10.62	9.85	7.96	6.43
72	11.64	10.80	8.71	7.02
73	12.78	11.86	9.56	7.72
74	14.02	13.01	10.51	8.50
75	15.35	14.26	11.54	9.35
76	16.79	15.60	12.64	10.24
77	18.36	17.05	13.80	11.17
78	20.04	18.64	15.05	12.16
79	21.83	20.30	16.36	13.18
80	23.74	22.08	17.75	14.27
81	25.76	23.98	19.22	15.40
82	27.88	25.97	20.75	16.58
83	30.12	28.07	22.36	17.81
84	32.48	30.28	24.04	19.09

TO OBTAIN QUARTERLY, SEMIANNUAL, AND ANNUAL PREMIUMS,
MULTIPLY THE ABOVE QUOTED PREMIUMS BY 3, 6, AND 12,
RESPECTIVELY. THE MONTHLY PREMIUMS FOR BANK SERVICE PLAN
AND PAYROLL DEDUCTION ISSUES ARE THE PREMIUMS LISTED ABOVE.
R25387-44-4

Date: 04/26/2017

MUTUAL OF OMAHA INSURANCE COMPANY
SCHEDULE OF MONTHLY RATES FOR POLICY FORMS

LT50-Series 19241 and LT50-Series 19409

PER \$10 DAILY CONFINED CARE/PER \$10 DAILY COMMUNITY BASED BENEFIT

50% HOME HEALTH CARE BENEFIT

BENEFIT -- 2 YEARS

Issue Age	Elimination Periods			
	0 Day	20 Day	100 Day	365 Day
18-39	1.69	1.63	1.42	1.22
40	1.88	1.80	1.55	1.33
41	1.96	1.87	1.61	1.39
42	2.02	1.94	1.67	1.44
43	2.11	2.02	1.73	1.48
44	2.20	2.10	1.80	1.54
45	2.30	2.20	1.88	1.61
46	2.41	2.30	1.96	1.66
47	2.53	2.41	2.05	1.74
48	2.68	2.56	2.15	1.81
49	2.82	2.69	2.27	1.92
50	2.99	2.86	2.41	2.04
51	3.17	3.02	2.56	2.15
52	3.40	3.22	2.70	2.26
53	3.61	3.43	2.89	2.44
54	3.85	3.65	3.07	2.58
55	4.10	3.89	3.28	2.75
56	4.42	4.15	3.50	2.95
57	4.74	4.48	3.74	3.13
58	5.12	4.79	4.02	3.37
59	5.53	5.15	4.30	3.59
60	5.98	5.56	4.63	3.86
61	6.49	6.00	4.98	4.13
62	7.06	6.52	5.39	4.46
63	7.68	7.09	5.81	4.76
64	8.34	7.72	6.28	5.12
65	9.08	8.39	6.79	5.50
66	9.88	9.16	7.36	5.92
67	10.80	10.00	8.04	6.47
68	11.81	10.88	8.76	7.06
69	12.90	11.82	9.56	7.73
70	14.09	12.85	10.42	8.45
71	15.40	14.03	11.40	9.26
72	16.87	15.35	12.52	10.21
73	18.50	16.86	13.76	11.23
74	20.26	18.50	15.13	12.37
75	22.16	20.29	16.62	13.61
76	24.22	22.21	18.20	14.92
77	26.42	24.28	19.88	16.28
78	28.78	26.46	21.64	17.70
79	31.28	28.78	23.52	19.22
80	33.94	31.25	25.50	20.81
81	36.74	33.86	27.56	22.43
82	39.70	36.60	29.74	24.16
83	42.80	39.47	32.00	25.94
84	46.06	42.48	34.36	27.79

TO OBTAIN QUARTERLY, SEMIANNUAL, AND ANNUAL PREMIUMS,
MULTIPLY THE ABOVE QUOTED PREMIUMS BY 3, 6, AND 12,
RESPECTIVELY. THE MONTHLY PREMIUMS FOR BANK SERVICE PLAN
AND PAYROLL DEDUCTION ISSUES ARE THE PREMIUMS LISTED ABOVE.
R25387-44-4

Date: 04/26/2017

MUTUAL OF OMAHA INSURANCE COMPANY
SCHEDULE OF MONTHLY RATES FOR POLICY FORMS

LT50-Series 19241 and LT50-Series 19409

PER \$10 DAILY CONFINED CARE/PER \$10 DAILY COMMUNITY BASED BENEFIT

50% HOME HEALTH CARE BENEFIT

BENEFIT -- 3 YEARS

Issue Age	Elimination Periods			
	0 Day	20 Day	100 Day	365 Day
18-39	2.12	1.97	1.67	1.42
40	2.35	2.17	1.86	1.60
41	2.44	2.26	1.93	1.66
42	2.54	2.35	2.00	1.70
43	2.64	2.45	2.08	1.78
44	2.75	2.56	2.17	1.85
45	2.88	2.66	2.26	1.90
46	3.01	2.80	2.38	2.02
47	3.17	2.94	2.48	2.09
48	3.36	3.10	2.62	2.20
49	3.55	3.28	2.75	2.32
50	3.76	3.49	2.90	2.41
51	4.00	3.70	3.07	2.56
52	4.26	3.95	3.28	2.71
53	4.56	4.21	3.49	2.89
54	4.87	4.49	3.71	3.07
55	5.20	4.79	3.97	3.29
56	5.57	5.14	4.24	3.50
57	5.98	5.51	4.56	3.77
58	6.42	5.92	4.90	4.04
59	6.86	6.34	5.24	4.33
60	7.36	6.82	5.63	4.66
61	7.93	7.34	6.06	5.00
62	8.57	7.94	6.54	5.39
63	9.26	8.56	7.06	5.82
64	10.00	9.22	7.61	6.29
65	10.82	9.94	8.21	6.79
66	11.75	10.78	8.89	7.34
67	12.80	11.75	9.68	7.97
68	13.97	12.88	10.57	8.68
69	15.25	14.11	11.53	9.42
70	16.66	15.46	12.58	10.22
71	18.19	16.96	13.72	11.11
72	19.87	18.56	15.00	12.12
73	21.70	20.30	16.38	13.22
74	23.64	22.18	17.87	14.40
75	25.74	24.16	19.46	15.67
76	28.03	26.32	21.20	17.08
77	30.54	28.62	23.08	18.60
78	33.25	31.09	25.10	20.26
79	36.16	33.71	27.28	22.06
80	39.26	36.49	29.59	23.99
81	42.55	39.41	32.03	26.03
82	46.04	42.49	34.62	28.21
83	49.74	45.73	37.33	30.47
84	53.62	49.12	40.20	32.90

TO OBTAIN QUARTERLY, SEMIANNUAL, AND ANNUAL PREMIUMS,
MULTIPLY THE ABOVE QUOTED PREMIUMS BY 3, 6, AND 12,
RESPECTIVELY. THE MONTHLY PREMIUMS FOR BANK SERVICE PLAN
AND PAYROLL DEDUCTION ISSUES ARE THE PREMIUMS LISTED ABOVE.
R25387-44-4

Date: 04/26/2017

MUTUAL OF OMAHA INSURANCE COMPANY
SCHEDULE OF MONTHLY RATES FOR POLICY FORMS

LT50-Series 19241 and LT50-Series 19409

PER \$10 DAILY CONFINED CARE/PER \$10 DAILY COMMUNITY BASED BENEFIT

50% HOME HEALTH CARE BENEFIT

BENEFIT -- 5 YEARS

Issue Age	Elimination Periods			
	0 Day	20 Day	100 Day	365 Day
18-39	2.90	2.75	2.33	1.98
40	3.21	3.03	2.55	2.16
41	3.34	3.15	2.65	2.23
42	3.48	3.28	2.75	2.31
43	3.62	3.41	2.85	2.38
44	3.77	3.54	2.97	2.49
45	3.95	3.71	3.10	2.60
46	4.14	3.87	3.23	2.71
47	4.36	4.08	3.41	2.83
48	4.60	4.30	3.59	2.99
49	4.87	4.55	3.81	3.18
50	5.16	4.83	4.04	3.38
51	5.50	5.13	4.28	3.58
52	5.85	5.46	4.57	3.82
53	6.23	5.82	4.86	4.07
54	6.62	6.22	5.19	4.33
55	7.06	6.64	5.54	4.63
56	7.52	7.11	5.92	4.93
57	8.04	7.61	6.31	5.24
58	8.60	8.14	6.73	5.57
59	9.19	8.69	7.17	5.93
60	9.83	9.30	7.65	6.29
61	10.55	9.94	8.16	6.71
62	11.35	10.69	8.76	7.17
63	12.25	11.51	9.39	7.67
64	13.21	12.35	10.09	8.24
65	14.25	13.29	10.85	8.86
66	15.44	14.37	11.73	9.55
67	16.78	15.59	12.72	10.35
68	18.28	16.97	13.81	11.23
69	19.92	18.49	15.00	12.19
70	21.70	20.14	16.31	13.21
71	23.65	21.97	17.78	14.39
72	25.82	23.97	19.38	15.69
73	28.12	26.13	21.12	17.07
74	30.58	28.42	22.97	18.57
75	33.22	30.89	24.99	20.21
76	36.15	33.61	27.18	21.99
77	39.38	36.61	29.63	24.00
78	42.92	39.91	32.32	26.18
79	46.75	43.44	35.22	28.56
80	50.86	47.25	38.30	31.06
81	55.24	51.29	41.62	33.77
82	59.93	55.59	45.14	36.67
83	64.88	60.17	48.88	39.72
84	70.11	64.99	52.84	42.96

TO OBTAIN QUARTERLY, SEMIANNUAL, AND ANNUAL PREMIUMS,
MULTIPLY THE ABOVE QUOTED PREMIUMS BY 3, 6, AND 12,
RESPECTIVELY. THE MONTHLY PREMIUMS FOR BANK SERVICE PLAN
AND PAYROLL DEDUCTION ISSUES ARE THE PREMIUMS LISTED ABOVE.
R25387-44-4

Date: 04/26/2017

MUTUAL OF OMAHA INSURANCE COMPANY
SCHEDULE OF MONTHLY RATES FOR POLICY FORMS

LT50-Series 19241 and LT50-Series 19409

PER \$10 DAILY CONFINED CARE/PER \$10 DAILY COMMUNITY BASED BENEFIT

50% HOME HEALTH CARE BENEFIT

BENEFIT -- LIFETIME

Issue Age	Elimination Periods			
	0 Day	20 Day	100 Day	365 Day
18-39	6.76	6.47	5.31	4.38
40	7.44	7.08	5.89	4.84
41	7.72	7.36	6.08	5.04
42	8.02	7.64	6.37	5.28
43	8.34	7.98	6.62	5.53
44	8.76	8.34	6.93	5.77
45	9.15	8.72	7.28	6.07
46	9.61	9.15	7.64	6.38
47	10.07	9.61	8.00	6.69
48	10.61	10.11	8.45	7.07
49	11.18	10.65	8.87	7.38
50	11.75	11.18	9.33	7.79
51	12.44	11.78	9.86	8.23
52	13.12	12.44	10.35	8.63
53	13.92	13.09	10.91	9.12
54	14.71	13.81	11.50	9.57
55	15.58	14.54	12.08	10.05
56	16.54	15.34	12.77	10.65
57	17.58	16.25	13.51	11.25
58	18.73	17.24	14.29	11.87
59	19.94	18.29	15.15	12.55
60	21.23	19.44	16.04	13.25
61	22.69	20.73	17.10	14.11
62	24.38	22.23	18.32	15.09
63	26.20	23.93	19.67	16.15
64	28.15	25.75	21.07	17.24
65	30.30	27.81	22.68	18.49
66	32.73	30.04	24.43	19.90
67	35.44	32.59	26.54	21.61
68	38.47	35.40	28.82	23.48
69	41.72	38.41	31.33	25.56
70	45.26	41.70	34.05	27.82
71	49.23	45.31	37.08	30.34
72	53.58	49.39	40.47	33.18
73	58.32	53.76	44.07	36.14
74	63.42	58.42	47.90	39.27
75	68.92	63.50	52.11	42.76
76	74.99	69.22	56.75	46.54
77	81.71	75.69	61.99	50.78
78	89.07	82.97	67.82	55.42
79	97.03	90.94	74.11	60.39
80	105.58	99.53	80.93	65.78
81	114.70	108.87	88.25	71.55
82	124.40	118.84	96.08	77.71
83	134.70	129.50	104.41	84.20
84	145.56	140.79	113.23	91.08

TO OBTAIN QUARTERLY, SEMIANNUAL, AND ANNUAL PREMIUMS,
MULTIPLY THE ABOVE QUOTED PREMIUMS BY 3, 6, AND 12,
RESPECTIVELY. THE MONTHLY PREMIUMS FOR BANK SERVICE PLAN
AND PAYROLL DEDUCTION ISSUES ARE THE PREMIUMS LISTED ABOVE.
R25387-44-4

Date: 04/26/2017

MUTUAL OF OMAHA INSURANCE COMPANY
SCHEDULE OF MONTHLY RATES FOR RIDER FORM 0DX5M

PER \$10 DAILY CONFINED CARE/PER \$10 DAILY COMMUNITY BASED BENEFIT
100% HOME HEALTH CARE BENEFIT

Issue Age	BENEFIT -- 1 YEAR			
	ELIMINATION PERIODS			
	0 Day	20 Day	100 Day	365 Day
18-39	2.80	2.60	2.24	1.93
40	3.06	2.81	2.42	2.09
41	3.13	2.88	2.47	2.12
42	3.22	2.95	2.54	2.18
43	3.34	3.05	2.62	2.26
44	3.41	3.13	2.68	2.30
45	3.52	3.22	2.76	2.38
46	3.61	3.34	2.82	2.39
47	3.72	3.46	2.92	2.46
48	3.88	3.59	3.04	2.57
49	4.01	3.73	3.13	2.62
50	4.16	3.90	3.28	2.74
51	4.30	4.06	3.37	2.80
52	4.48	4.22	3.50	2.90
53	4.64	4.38	3.62	2.99
54	4.81	4.54	3.76	3.10
55	4.96	4.68	3.86	3.19
56	5.14	4.85	4.01	3.32
57	5.33	5.03	4.13	3.40
58	5.53	5.21	4.27	3.50
59	5.74	5.40	4.42	3.60
60	5.98	5.62	4.58	3.74
61	6.17	5.81	4.72	3.83
62	6.44	6.05	4.91	4.00
63	6.73	6.29	5.14	4.20
64	7.01	6.53	5.32	4.33
65	7.32	6.79	5.56	4.54
66	7.66	7.08	5.80	4.73
67	8.00	7.38	6.02	4.91
68	8.39	7.73	6.28	5.09
69	8.81	8.11	6.55	5.29
70	9.25	8.51	6.83	5.48
71	9.68	8.90	7.12	5.68
72	10.08	9.25	7.39	5.90
73	10.42	9.55	7.63	6.10
74	10.70	9.82	7.86	6.29
75	10.98	10.09	8.09	6.49
76	11.28	10.38	8.32	6.67
77	11.65	10.72	8.58	6.88
78	12.05	11.09	8.87	7.10
79	12.50	11.52	9.19	7.33
80	12.98	11.96	9.52	7.58
81	13.50	12.43	9.86	7.82
82	14.04	12.95	10.25	8.11
83	14.62	13.50	10.64	8.38
84	15.25	14.08	11.08	8.71

TO OBTAIN QUARTERLY, SEMIANNUAL, AND ANNUAL PREMIUMS, MULTIPLY THE ABC QUOTED PREMIUMS BY 3, 6, AND 12, RESPECTIVELY. THE MONTHLY PREMIUMS FOR BANK SERVICE PLAN AND PAYROLL DEDUCTION ISSUES ARE THE PREMIUMS LISTED , R25387-44-3

Date: 04/26/2017

MUTUAL OF OMAHA INSURANCE COMPANY
SCHEDULE OF MONTHLY RATES FOR RIDER FORM 0DX5M

PER \$10 DAILY CONFINED CARE/PER \$10 DAILY COMMUNITY BASED BENEFIT
100% HOME HEALTH CARE BENEFIT

BENEFIT -- TWO YEARS

Issue Age	ELIMINATION PERIODS			
	0 Day	20 Day	100 Day	365 Day
18-39	3.96	3.78	3.22	2.75
40	4.28	4.07	3.48	2.98
41	4.39	4.18	3.55	3.04
42	4.52	4.30	3.66	3.13
43	4.66	4.42	3.76	3.19
44	4.78	4.54	3.85	3.28
45	4.94	4.66	3.94	3.34
46	5.08	4.79	4.06	3.43
47	5.24	4.94	4.15	3.48
48	5.39	5.09	4.27	3.58
49	5.56	5.26	4.39	3.67
50	5.76	5.44	4.54	3.78
51	5.95	5.62	4.69	3.92
52	6.16	5.80	4.82	4.01
53	6.38	5.99	5.00	4.18
54	6.58	6.19	5.15	4.28
55	6.84	6.41	5.35	4.48
56	7.12	6.65	5.54	4.61
57	7.42	6.91	5.74	4.78
58	7.75	7.19	5.98	4.96
59	8.12	7.50	6.20	5.12
60	8.50	7.81	6.44	5.32
61	8.90	8.14	6.70	5.52
62	9.28	8.48	6.94	5.68
63	9.62	8.80	7.16	5.83
64	9.98	9.13	7.36	5.93
65	10.33	9.47	7.60	6.08
66	10.74	9.84	7.85	6.28
67	11.26	10.30	8.20	6.53
68	11.89	10.85	8.65	6.90
69	12.67	11.50	9.20	7.36
70	13.46	12.17	9.77	7.84
71	14.20	12.80	10.31	8.30
72	14.83	13.36	10.78	8.70
73	15.30	13.80	11.15	9.01
74	15.68	14.16	11.47	9.29
75	16.00	14.48	11.75	9.54
76	16.32	14.82	12.04	9.77
77	16.72	15.20	12.34	10.02
78	17.17	15.62	12.66	10.26
79	17.65	16.08	13.00	10.51
80	18.16	16.54	13.37	10.81
81	18.67	17.04	13.73	11.08
82	19.24	17.54	14.11	11.35
83	19.80	18.08	14.50	11.63
84	20.39	18.62	14.92	11.95

TO OBTAIN QUARTERLY, SEMIANNUAL, AND ANNUAL PREMIUMS, MULTIPLY THE ABC QUOTED PREMIUMS BY 3, 6, AND 12, RESPECTIVELY. THE MONTHLY PREMIUMS FOR B, SERVICE PLAN AND PAYROLL DEDUCTION ISSUES ARE THE PREMIUMS LISTED ABO VI R25387-44-3

Date: 04/26/2017

MUTUAL OF OMAHA INSURANCE COMPANY
SCHEDULE OF MONTHLY RATES FOR RIDER FORM 0DX5M

PER \$10 DAILY CONFINED CARE/PER \$10 DAILY COMMUNITY BASED BENEFIT
100% HOME HEALTH CARE BENEFIT

Issue Age	BENEFIT -- 3 YEARS			
	ELIMINATION PERIOD			
	0 Day	20 Day	100 Day	365 Day
18-39	4.94	4.54	3.83	3.23
40	5.40	4.96	4.19	3.54
41	5.53	5.09	4.30	3.64
42	5.69	5.22	4.42	3.73
43	5.82	5.34	4.51	3.80
44	5.93	5.45	4.58	3.85
45	6.10	5.57	4.70	3.96
46	6.23	5.70	4.78	4.01
47	6.40	5.87	4.91	4.12
48	6.64	6.07	5.06	4.22
49	6.84	6.28	5.21	4.32
50	7.14	6.53	5.39	4.44
51	7.39	6.78	5.57	4.57
52	7.68	7.03	5.77	4.74
53	7.98	7.30	5.98	4.90
54	8.26	7.55	6.19	5.08
55	8.54	7.79	6.38	5.23
56	8.83	8.06	6.61	5.42
57	9.16	8.35	6.84	5.60
58	9.48	8.65	7.08	5.80
59	9.82	8.98	7.34	6.00
60	10.18	9.32	7.62	6.23
61	10.52	9.66	7.88	6.43
62	10.90	9.98	8.14	6.64
63	11.21	10.26	8.38	6.85
64	11.53	10.51	8.60	7.03
65	11.86	10.79	8.81	7.19
66	12.19	11.08	9.04	7.38
67	12.58	11.42	9.32	7.60
68	13.03	11.88	9.66	7.86
69	13.57	12.43	10.06	8.14
70	14.15	13.00	10.46	8.41
71	14.65	13.51	10.84	8.69
72	15.06	13.92	11.14	8.92
73	15.28	14.15	11.30	9.04
74	15.31	14.21	11.35	9.07
75	15.34	14.26	11.38	9.07
76	15.46	14.36	11.45	9.13
77	15.76	14.62	11.68	9.32
78	16.25	15.05	12.04	9.62
79	16.90	15.58	12.49	10.01
80	17.63	16.22	13.02	10.45
81	18.49	16.94	13.62	10.96
82	19.45	17.77	14.33	11.56
83	20.54	18.70	15.11	12.22
84	21.73	19.72	15.97	12.94

TO OBTAIN QUARTERLY, SEMIANNUAL, AND ANNUAL PREMIUMS, MULTIPLY THE ABC QUOTED PREMIUMS BY 3, 6, AND 12, RESPECTIVELY. THE MONTHLY PREMIUMS FOR B, SERVICE PLAN AND PAYROLL DEDUCTION ISSUES ARE THE PREMIUMS LISTED ABOVE
R25387-44-3

Date: 04/26/2017

MUTUAL OF OMAHA INSURANCE COMPANY
SCHEDULE OF MONTHLY RATES FOR RIDER FORM 0DX5M

PER \$10 DAILY CONFINED CARE/PER \$10 DAILY COMMUNITY BASED BENEFIT
100% HOME HEALTH CARE BENEFIT

Issue Age	BENEFIT -- 5 YEARS			
	ELIMINATION PERIODS			
	0 Day	20 Day	100 Day	365 Day
18-39	7.04	6.56	5.53	4.68
40	7.63	7.11	5.94	4.97
41	7.84	7.30	6.08	5.07
42	8.04	7.50	6.25	5.19
43	8.24	7.68	6.35	5.26
44	8.43	7.85	6.52	5.41
45	8.67	8.04	6.66	5.50
46	8.89	8.25	6.82	5.63
47	9.15	8.49	7.02	5.81
48	9.48	8.78	7.26	6.01
49	9.81	9.09	7.50	6.19
50	10.19	9.43	7.81	6.48
51	10.60	9.78	8.10	6.71
52	10.96	10.14	8.38	6.93
53	11.33	10.47	8.69	7.19
54	11.64	10.84	8.95	7.38
55	12.01	11.20	9.24	7.63
56	12.36	11.56	9.53	7.84
57	12.75	11.94	9.81	8.07
58	13.13	12.32	10.09	8.27
59	13.57	12.69	10.38	8.49
60	14.00	13.09	10.67	8.69
61	14.48	13.51	10.97	8.90
62	14.96	13.94	11.29	9.15
63	15.44	14.37	11.62	9.42
64	15.97	14.80	11.97	9.68
65	16.50	15.24	12.32	9.94
66	17.07	15.71	12.68	10.24
67	17.64	16.23	13.08	10.54
68	18.27	16.81	13.52	10.87
69	18.99	17.45	14.01	11.26
70	19.71	18.13	14.53	11.66
71	20.42	18.77	15.03	12.03
72	21.08	19.38	15.50	12.40
73	21.65	19.91	15.93	12.74
74	22.17	20.38	16.31	13.06
75	22.68	20.88	16.71	13.38
76	23.22	21.37	17.11	13.68
77	23.88	21.98	17.61	14.11
78	24.63	22.66	18.17	14.56
79	25.43	23.41	18.77	15.05
80	26.31	24.20	19.42	15.59
81	27.21	25.03	20.11	16.15
82	28.23	25.93	20.83	16.74
83	29.26	26.86	21.60	17.37
84	30.36	27.85	22.43	18.06

TO OBTAIN QUARTERLY, SEMIANNUAL, AND ANNUAL PREMIUMS, MULTIPLY THE ABOVE QUOTED PREMIUMS BY 3, 6, AND 12, RESPECTIVELY. THE MONTHLY PREMIUMS FOR B. SERVICE PLAN AND PAYROLL DEDUCTION ISSUES ARE THE PREMIUMS LISTED ABOVE
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Date: 04/26/2017

MUTUAL OF OMAHA INSURANCE COMPANY
SCHEDULE OF MONTHLY RATES FOR RIDER FORM 0DX5M

PER \$10 DAILY CONFINED CARE/PER \$10 DAILY COMMUNITY BASED BENEFIT
100% HOME HEALTH CARE BENEFIT

Issue Age	BENEFIT -- LIFETIME			
	ELIMINATION PERIODS			
	0 Day	20 Day	100 Day	365 Day
18-39	15.28	14.40	11.80	9.67
40	16.16	15.28	12.51	10.22
41	16.59	15.63	12.84	10.56
42	16.95	16.00	13.17	10.82
43	17.39	16.41	13.49	11.09
44	17.85	16.84	13.87	11.41
45	18.32	17.30	14.27	11.80
46	18.88	17.80	14.73	12.18
47	19.41	18.32	15.13	12.49
48	19.98	18.85	15.57	12.86
49	20.64	19.42	16.08	13.29
50	21.28	20.02	16.54	13.65
51	21.91	20.57	16.99	14.05
52	22.49	21.05	17.38	14.35
53	23.00	21.44	17.69	14.56
54	23.39	21.68	17.89	14.76
55	23.79	21.97	18.11	14.91
56	24.19	22.26	18.32	15.07
57	24.79	22.67	18.62	15.29
58	25.48	23.24	19.08	15.68
59	26.27	23.88	19.58	16.04
60	27.13	24.56	20.10	16.45
61	28.00	25.34	20.70	16.91
62	28.87	26.12	21.29	17.38
63	29.81	26.96	21.91	17.80
64	30.78	27.90	22.59	18.32
65	31.75	28.81	23.27	18.80
66	32.81	29.82	24.04	19.34
67	33.85	30.82	24.82	19.99
68	34.96	31.84	25.69	20.74
69	36.17	32.93	26.62	21.52
70	37.34	34.02	27.53	22.30
71	38.58	35.15	28.47	23.08
72	39.73	36.26	29.41	23.87
73	40.89	37.30	30.28	24.58
74	41.99	38.29	31.10	25.27
75	43.13	39.34	31.98	25.97
76	44.29	40.48	32.86	26.70
77	45.49	41.72	33.83	27.44
78	46.75	43.12	34.88	28.24
79	48.05	44.56	35.97	29.07
80	49.44	46.16	37.15	29.89
81	50.95	47.87	38.40	30.82
82	52.48	49.63	39.75	31.82
83	54.15	51.56	41.17	32.86
84	55.90	53.50	42.60	33.93

TO OBTAIN QUARTERLY, SEMIANNUAL, AND ANNUAL PREMIUMS, MULTIPLY THE ABOVE QUOTED PREMIUMS BY 3, 6, AND 12, RESPECTIVELY. THE MONTHLY PREMIUMS FOR B. SERVICE PLAN AND PAYROLL DEDUCTION ISSUES ARE THE PREMIUMS LISTED ABOVE
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Date: 04/26/2017

MUTUAL OF OMAHA INSURANCE COMPANY
SCHEDULE OF MONTHLY RATES FOR RIDER FORM 0DX5M

PER \$10 DAILY CONFINED CARE/PER \$8 DAILY COMMUNITY BASED BENEFIT
80% HOME HEALTH CARE BENEFIT

Issue Age	BENEFIT -- 1 YEAR			
	ELIMINATION PERIODS			
	0 Day	20 Day	100 Day	365 Day
18-39	2.52	2.36	2.08	1.81
40	2.76	2.56	2.21	1.92
41	2.82	2.62	2.27	1.97
42	2.89	2.70	2.32	1.99
43	3.00	2.78	2.41	2.09
44	3.07	2.84	2.45	2.12
45	3.16	2.92	2.53	2.20
46	3.26	3.04	2.59	2.21
47	3.36	3.14	2.69	2.32
48	3.47	3.28	2.80	2.38
49	3.61	3.40	2.87	2.44
50	3.76	3.55	3.00	2.53
51	3.88	3.70	3.10	2.60
52	4.03	3.85	3.22	2.68
53	4.18	4.00	3.32	2.76
54	4.34	4.13	3.46	2.89
55	4.48	4.26	3.53	2.93
56	4.63	4.42	3.68	3.06
57	4.80	4.57	3.82	3.17
58	4.97	4.74	3.92	3.24
59	5.16	4.91	4.06	3.35
60	5.38	5.11	4.21	3.46
61	5.56	5.28	4.34	3.56
62	5.82	5.50	4.52	3.71
63	6.07	5.74	4.72	3.88
64	6.32	5.94	4.90	4.03
65	6.59	6.18	5.10	4.20
66	6.90	6.46	5.32	4.39
67	7.21	6.72	5.54	4.56
68	7.55	7.04	5.76	4.72
69	7.94	7.39	6.02	4.91
70	8.33	7.74	6.28	5.09
71	8.72	8.09	6.52	5.26
72	9.08	8.42	6.79	5.47
73	9.37	8.70	7.02	5.68
74	9.64	8.93	7.24	5.86
75	9.88	9.18	7.44	6.04
76	10.18	9.43	7.64	6.19
77	10.50	9.76	7.90	6.40
78	10.85	10.09	8.14	6.58
79	11.27	10.48	8.45	6.82
80	11.70	10.88	8.74	7.02
81	12.16	11.32	9.07	7.27
82	12.66	11.78	9.41	7.51
83	13.18	12.28	9.78	7.79
84	13.73	12.82	10.18	8.08

TO OBTAIN QUARTERLY, SEMIANNUAL, AND ANNUAL PREMIUMS, MULTIPLY THE ABOVE QUOTED PREMIUMS BY 3, 6, AND 12, RESPECTIVELY. THE MONTHLY PREMIUMS FOR B SERVICE PLAN AND PAYROLL DEDUCTION ISSUES ARE THE PREMIUMS LISTED ABOVE
R25387-44-3

Date: 04/26/2017

MUTUAL OF OMAHA INSURANCE COMPANY
SCHEDULE OF MONTHLY RATES FOR RIDER FORM 0DX5M

PER \$10 DAILY CONFINED CARE/PER \$8 DAILY COMMUNITY BASED BENEFIT
80% HOME HEALTH CARE BENEFIT

Issue Age	BENEFIT -- 2 YEARS			
	ELIMINATION PERIODS			
	0 Day	20 Day	100 Day	365 Day
18-39	3.60	3.47	2.99	2.57
40	3.90	3.76	3.23	2.78
41	4.00	3.84	3.29	2.82
42	4.12	3.96	3.41	2.94
43	4.24	4.06	3.48	2.99
44	4.36	4.16	3.58	3.07
45	4.50	4.28	3.67	3.16
46	4.62	4.42	3.76	3.20
47	4.78	4.54	3.85	3.28
48	4.92	4.68	3.96	3.35
49	5.05	4.84	4.08	3.44
50	5.26	4.99	4.20	3.54
51	5.42	5.16	4.34	3.65
52	5.60	5.33	4.49	3.78
53	5.81	5.51	4.64	3.91
54	6.00	5.71	4.78	4.00
55	6.22	5.92	4.96	4.16
56	6.49	6.12	5.15	4.34
57	6.76	6.36	5.32	4.45
58	7.06	6.61	5.54	4.64
59	7.39	6.89	5.76	4.82
60	7.74	7.19	5.98	4.98
61	8.11	7.49	6.22	5.17
62	8.45	7.80	6.44	5.32
63	8.77	8.10	6.64	5.44
64	9.08	8.40	6.84	5.57
65	9.41	8.70	7.06	5.71
66	9.78	9.06	7.30	5.86
67	10.24	9.47	7.62	6.13
68	10.84	9.98	8.04	6.47
69	11.53	10.58	8.56	6.91
70	12.26	11.20	9.08	7.36
71	12.92	11.80	9.58	7.78
72	13.51	12.29	10.02	8.17
73	13.94	12.70	10.36	8.44
74	14.27	13.03	10.66	8.72
75	14.56	13.32	10.92	8.96
76	14.86	13.63	11.17	9.16
77	15.23	13.99	11.45	9.38
78	15.64	14.38	11.76	9.64
79	16.07	14.78	12.08	9.88
80	16.52	15.22	12.42	10.14
81	17.00	15.67	12.76	10.39
82	17.51	16.13	13.10	10.64
83	18.04	16.63	13.48	10.91
84	18.58	17.14	13.88	11.24

TO OBTAIN QUARTERLY, SEMIANNUAL, AND ANNUAL PREMIUMS, MULTIPLY THE ABC QUOTED PREMIUMS BY 3, 6, AND 12, RESPECTIVELY. THE MONTHLY PREMIUMS FOR B, SERVICE PLAN AND PAYROLL DEDUCTION ISSUES ARE THE PREMIUMS LISTED ABOVE
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MUTUAL OF OMAHA INSURANCE COMPANY
SCHEDULE OF MONTHLY RATES FOR RIDER FORM 0DX5M

PER \$10 DAILY CONFINED CARE/PER \$8 DAILY COMMUNITY BASED BENEFIT
80% HOME HEALTH CARE BENEFIT

Issue Age	BENEFIT -- 3 YEARS			
	ELIMINATION PERIODS			
	0 Day	20 Day	100 Day	365 Day
18-39	4.55	4.24	3.59	3.04
40	4.98	4.61	3.94	3.37
41	5.09	4.73	4.04	3.46
42	5.24	4.86	4.14	3.53
43	5.38	4.96	4.24	3.61
44	5.47	5.08	4.30	3.65
45	5.60	5.20	4.42	3.76
46	5.74	5.32	4.49	3.80
47	5.90	5.45	4.61	3.90
48	6.11	5.65	4.75	4.00
49	6.30	5.84	4.90	4.12
50	6.58	6.08	5.06	4.21
51	6.80	6.32	5.23	4.33
52	7.07	6.55	5.44	4.50
53	7.36	6.78	5.62	4.66
54	7.61	7.02	5.82	4.82
55	7.86	7.24	6.00	4.97
56	8.14	7.50	6.20	5.12
57	8.44	7.76	6.44	5.34
58	8.74	8.06	6.65	5.48
59	9.04	8.36	6.90	5.69
60	9.36	8.68	7.15	5.89
61	9.70	8.98	7.40	6.10
62	10.01	9.28	7.64	6.29
63	10.32	9.53	7.87	6.50
64	10.62	9.78	8.08	6.67
65	10.92	10.02	8.27	6.83
66	11.22	10.30	8.50	7.02
67	11.59	10.63	8.75	7.20
68	11.99	11.05	9.08	7.46
69	12.50	11.57	9.46	7.72
70	13.03	12.10	9.83	7.98
71	13.50	12.56	10.18	8.23
72	13.86	12.95	10.46	8.45
73	14.06	13.16	10.62	8.57
74	14.10	13.20	10.66	8.62
75	14.12	13.25	10.67	8.59
76	14.22	13.36	10.75	8.66
77	14.51	13.60	10.96	8.84
78	14.95	13.99	11.30	9.13
79	15.56	14.50	11.74	9.49
80	16.22	15.10	12.24	9.92
81	17.02	15.76	12.80	10.40
82	17.92	16.54	13.46	10.96
83	18.91	17.38	14.20	11.60
84	20.02	18.34	15.00	12.28

TO OBTAIN QUARTERLY, SEMIANNUAL, AND ANNUAL PREMIUMS, MULTIPLY THE ABC PREMIUMS BY 3, 6 AND 12 RESPECTIVELY. THE MONTHLY PREMIUMS FOR BANK SERV PAYROLL DEDUCTION ISSUES ARE THE PREMIUMS LISTED ABOVE.

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MUTUAL OF OMAHA INSURANCE COMPANY
SCHEDULE OF MONTHLY RATES FOR RIDER FORM 0DX5M

PER \$10 DAILY CONFINED CARE/PER \$8 DAILY COMMUNITY BASED BENEFIT
80% HOME HEALTH CARE BENEFIT

Issue Age	BENEFIT -- 5 YEARS			
	ELIMINATION PERIODS			
	0 Day	20 Day	100 Day	365 Day
18-39	6.55	6.16	5.26	4.49
40	7.11	6.68	5.65	4.77
41	7.30	6.88	5.79	4.87
42	7.48	7.04	5.92	4.97
43	7.67	7.22	6.03	5.04
44	7.83	7.38	6.19	5.19
45	8.07	7.57	6.34	5.30
46	8.27	7.77	6.47	5.39
47	8.51	7.96	6.66	5.57
48	8.83	8.24	6.91	5.79
49	9.15	8.54	7.12	5.93
50	9.48	8.87	7.41	6.19
51	9.88	9.22	7.67	6.38
52	10.21	9.53	7.96	6.67
53	10.54	9.83	8.24	6.91
54	10.84	10.18	8.50	7.11
55	11.18	10.52	8.79	7.34
56	11.53	10.87	9.04	7.52
57	11.87	11.21	9.31	7.73
58	12.23	11.57	9.57	7.91
59	12.63	11.94	9.88	8.16
60	13.02	12.32	10.12	8.33
61	13.46	12.72	10.42	8.56
62	13.93	13.11	10.71	8.77
63	14.37	13.51	11.03	9.02
64	14.86	13.92	11.36	9.28
65	15.36	14.32	11.68	9.53
66	15.86	14.76	12.03	9.81
67	16.41	15.26	12.42	10.11
68	17.01	15.80	12.85	10.44
69	17.68	16.41	13.31	10.80
70	18.35	17.02	13.81	11.20
71	19.00	17.64	14.27	11.53
72	19.60	18.21	14.71	11.88
73	20.14	18.70	15.14	12.25
74	20.61	19.18	15.50	12.53
75	21.11	19.61	15.86	12.83
76	21.59	20.11	16.25	13.13
77	22.22	20.67	16.72	13.52
78	22.92	21.31	17.27	13.98
79	23.67	21.99	17.82	14.44
80	24.46	22.73	18.43	14.94
81	25.33	23.51	19.09	15.50
82	26.26	24.37	19.78	16.06
83	27.24	25.26	20.52	16.68
84	28.25	26.19	21.30	17.31

TO OBTAIN QUARTERLY, SEMIANNUAL, AND ANNUAL PREMIUMS,
MULTIPLY THE ABOVE QUOTED PREMIUMS BY 3, 6, AND 12,
RESPECTIVELY. THE MONTHLY PREMIUMS FOR BANK SERVICE PLAN
AND PAYROLL DEDUCTION ISSUES ARE THE PREMIUMS LISTED ABOVE.
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MUTUAL OF OMAHA INSURANCE COMPANY
SCHEDULE OF MONTHLY RATES FOR RIDER FORM 0DX5M

PER \$10 DAILY CONFINED CARE/PER \$8 DAILY COMMUNITY BASED BENEFIT
80% HOME HEALTH CARE BENEFIT

Issue Age	BENEFIT -- LIFETIME			
	ELIMINATION PERIODS			
	0 Day	20 Day	100 Day	365 Day
18-39	14.34	13.70	11.31	9.37
40	15.20	14.52	12.01	9.92
41	15.60	14.87	12.31	10.21
42	15.94	15.16	12.64	10.50
43	16.37	15.57	12.96	10.79
44	16.78	16.00	13.31	11.06
45	17.24	16.45	13.70	11.40
46	17.76	16.94	14.12	11.77
47	18.25	17.39	14.52	12.12
48	18.80	17.91	14.96	12.49
49	19.42	18.46	15.42	12.86
50	19.99	19.02	15.89	13.25
51	20.62	19.55	16.30	13.60
52	21.15	19.99	16.68	13.90
53	21.63	20.35	16.99	14.20
54	21.98	20.61	17.16	14.27
55	22.37	20.88	17.38	14.46
56	22.78	21.15	17.60	14.65
57	23.27	21.55	17.89	14.82
58	23.95	22.09	18.32	15.21
59	24.70	22.70	18.80	15.57
60	25.51	23.34	19.28	15.94
61	26.35	24.08	19.86	16.38
62	27.17	24.80	20.44	16.82
63	28.05	25.61	21.01	17.24
64	28.95	26.49	21.68	17.76
65	29.86	27.38	22.32	18.20
66	30.84	28.33	23.08	18.80
67	31.82	29.28	23.79	19.33
68	32.92	30.28	24.66	20.07
69	34.01	31.29	25.56	20.84
70	35.15	32.36	26.43	21.61
71	36.26	33.38	27.33	22.37
72	37.38	34.42	28.24	23.11
73	38.45	35.44	29.07	23.80
74	39.49	36.37	29.86	24.48
75	40.56	37.38	30.68	25.21
76	41.65	38.47	31.54	25.87
77	42.77	39.62	32.46	26.61
78	43.97	40.96	33.46	27.33
79	45.18	42.34	34.53	28.13
80	46.50	43.86	35.65	28.95
81	47.91	45.49	36.87	29.89
82	49.36	47.18	38.14	30.84
83	50.95	48.98	39.49	31.89
84	52.57	50.84	40.90	32.92

TO OBTAIN QUARTERLY, SEMIANNUAL, AND ANNUAL PREMIUMS,
MULTIPLY THE ABOVE QUOTED PREMIUMS BY 3, 6, AND 12,
RESPECTIVELY. THE MONTHLY PREMIUMS FOR BANK SERVICE PLAN
AND PAYROLL DEDUCTION ISSUES ARE THE PREMIUMS LISTED ABOVE.
R25387-44-3

Date: 04/26/2017

MUTUAL OF OMAHA INSURANCE COMPANY
SCHEDULE OF MONTHLY RATES FOR RIDER FORM 0DX5M

PER \$10 DAILY CONFINED CARE/PER \$5 DAILY COMMUNITY BASED BENEFIT
50% HOME HEALTH CARE BENEFIT

BENEFIT -- 1 YEAR

Issue Age	Elimination Periods			
	0 Day	20 Day	100 Day	365 Day
18-39	2.11	1.98	1.72	1.49
40	2.30	2.14	1.86	1.63
41	2.35	2.18	1.90	1.66
42	2.44	2.26	1.96	1.70
43	2.50	2.32	2.02	1.75
44	2.56	2.38	2.05	1.76
45	2.64	2.45	2.11	1.82
46	2.74	2.53	2.17	1.86
47	2.80	2.63	2.24	1.90
48	2.92	2.72	2.34	2.02
49	3.02	2.84	2.40	2.03
50	3.13	2.96	2.51	2.14
51	3.25	3.08	2.59	2.18
52	3.36	3.22	2.68	2.24
53	3.49	3.32	2.77	2.32
54	3.61	3.46	2.88	2.41
55	3.73	3.56	2.95	2.44
56	3.88	3.70	3.07	2.56
57	4.01	3.83	3.16	2.62
58	4.16	3.96	3.28	2.70
59	4.31	4.10	3.40	2.82
60	4.49	4.26	3.52	2.92
61	4.64	4.42	3.64	2.98
62	4.84	4.60	3.78	3.11
63	5.06	4.78	3.95	3.26
64	5.28	4.96	4.08	3.36
65	5.50	5.17	4.26	3.52
66	5.77	5.38	4.44	3.67
67	6.01	5.62	4.63	3.82
68	6.31	5.87	4.84	3.97
69	6.64	6.16	5.03	4.12
70	6.96	6.46	5.26	4.27
71	7.28	6.77	5.45	4.39
72	7.60	7.03	5.66	4.56
73	7.82	7.26	5.86	4.72
74	8.05	7.45	6.04	4.88
75	8.26	7.67	6.20	5.02
76	8.50	7.88	6.38	5.16
77	8.76	8.14	6.59	5.33
78	9.06	8.42	6.80	5.50
79	9.40	8.75	7.06	5.68
80	9.77	9.10	7.30	5.86
81	10.14	9.46	7.57	6.07
82	10.57	9.84	7.87	6.29
83	11.02	10.25	8.17	6.52
84	11.47	10.69	8.50	6.76

TO OBTAIN QUARTERLY, SEMIANNUAL, AND ANNUAL PREMIUMS,
MULTIPLY THE ABOVE QUOTED PREMIUMS BY 3, 6, AND 12,
RESPECTIVELY. THE MONTHLY PREMIUMS FOR BANK SERVICE PLAN
AND PAYROLL DEDUCTION ISSUES ARE THE PREMIUMS LISTED ABOVE.
R25387-44-3

Date: 04/26/2017

MUTUAL OF OMAHA INSURANCE COMPANY
SCHEDULE OF MONTHLY RATES FOR RIDER FORM 0DX5M

PER \$10 DAILY CONFINED CARE/PER \$5 DAILY COMMUNITY BASED BENEFIT
50% HOME HEALTH CARE BENEFIT

BENEFIT -- 2 YEARS

Issue Age	Elimination Periods			
	0 Day	20 Day	100 Day	365 Day
18-39	3.06	2.95	2.54	2.20
40	3.30	3.18	2.74	2.38
41	3.38	3.25	2.80	2.41
42	3.50	3.35	2.89	2.50
43	3.59	3.44	2.95	2.53
44	3.71	3.53	3.02	2.59
45	3.80	3.64	3.10	2.65
46	3.91	3.73	3.19	2.74
47	4.04	3.85	3.28	2.78
48	4.16	3.97	3.36	2.86
49	4.30	4.09	3.46	2.92
50	4.46	4.24	3.56	2.99
51	4.60	4.38	3.68	3.10
52	4.75	4.52	3.82	3.22
53	4.92	4.68	3.94	3.30
54	5.08	4.84	4.06	3.41
55	5.28	5.00	4.21	3.54
56	5.50	5.20	4.36	3.65
57	5.72	5.38	4.52	3.80
58	5.99	5.62	4.70	3.94
59	6.28	5.86	4.90	4.08
60	6.56	6.10	5.08	4.24
61	6.88	6.35	5.27	4.38
62	7.16	6.61	5.46	4.51
63	7.44	6.86	5.64	4.64
64	7.70	7.12	5.81	4.74
65	7.97	7.39	5.99	4.85
66	8.30	7.68	6.19	4.99
67	8.69	8.02	6.46	5.20
68	9.19	8.46	6.83	5.52
69	9.78	8.98	7.24	5.86
70	10.39	9.50	7.70	6.24
71	10.97	9.98	8.12	6.61
72	11.46	10.43	8.48	6.90
73	11.81	10.76	8.78	7.16
74	12.10	11.05	9.04	7.40
75	12.35	11.30	9.26	7.60
76	12.60	11.56	9.47	7.78
77	12.91	11.86	9.71	7.96
78	13.25	12.19	9.98	8.17
79	13.63	12.54	10.24	8.36
80	14.02	12.91	10.54	8.59
81	14.41	13.28	10.82	8.82
82	14.84	13.69	11.11	9.02
83	15.29	14.11	11.42	9.25
84	15.76	14.53	11.76	9.52

TO OBTAIN QUARTERLY, SEMIANNUAL, AND ANNUAL PREMIUMS,
MULTIPLY THE ABOVE QUOTED PREMIUMS BY 3, 6, AND 12,
RESPECTIVELY. THE MONTHLY PREMIUMS FOR BANK SERVICE PLAN
AND PAYROLL DEDUCTION ISSUES ARE THE PREMIUMS LISTED ABOVE.
R25387-44-3

Date: 04/26/2017

MUTUAL OF OMAHA INSURANCE COMPANY
SCHEDULE OF MONTHLY RATES FOR RIDER FORM 0DX5M

PER \$10 DAILY CONFINED CARE/PER \$5 DAILY COMMUNITY BASED BENEFIT
50% HOME HEALTH CARE BENEFIT

BENEFIT -- 3 YEARS

Issue Age	Elimination Periods			
	0 Day	20 Day	100 Day	365 Day
18-39	3.91	3.64	3.10	2.63
40	4.27	3.97	3.38	2.88
41	4.38	4.07	3.48	2.98
42	4.51	4.18	3.56	3.04
43	4.61	4.27	3.65	3.12
44	4.72	4.37	3.70	3.13
45	4.82	4.46	3.80	3.24
46	4.94	4.56	3.86	3.28
47	5.08	4.69	3.97	3.36
48	5.24	4.86	4.09	3.44
49	5.42	5.03	4.22	3.54
50	5.65	5.22	4.36	3.62
51	5.86	5.44	4.51	3.74
52	6.10	5.63	4.67	3.88
53	6.31	5.84	4.82	3.98
54	6.53	6.04	5.02	4.15
55	6.76	6.25	5.16	4.26
56	7.00	6.46	5.35	4.44
57	7.25	6.68	5.53	4.58
58	7.50	6.92	5.72	4.73
59	7.79	7.20	5.94	4.90
60	8.06	7.46	6.16	5.08
61	8.33	7.74	6.36	5.23
62	8.62	7.97	6.58	5.44
63	8.88	8.21	6.76	5.57
64	9.14	8.42	6.95	5.74
65	9.40	8.63	7.12	5.87
66	9.65	8.86	7.32	6.05
67	9.97	9.14	7.54	6.22
68	10.33	9.52	7.80	6.40
69	10.75	9.94	8.12	6.64
70	11.21	10.42	8.45	6.86
71	11.59	10.81	8.75	7.08
72	11.92	11.14	9.00	7.27
73	12.10	11.32	9.14	7.38
74	12.13	11.38	9.16	7.38
75	12.16	11.40	9.19	7.42
76	12.23	11.48	9.25	7.46
77	12.47	11.69	9.44	7.62
78	12.88	12.04	9.72	7.85
79	13.38	12.47	10.09	8.16
80	13.96	12.97	10.54	8.56
81	14.64	13.56	11.00	8.93
82	15.42	14.22	11.58	9.43
83	16.26	14.96	12.22	9.98
84	17.21	15.77	12.91	10.57

TO OBTAIN QUARTERLY, SEMIANNUAL, AND ANNUAL PREMIUMS,
MULTIPLY THE ABOVE QUOTED PREMIUMS BY 3, 6, AND 12,
RESPECTIVELY. THE MONTHLY PREMIUMS FOR BANK SERVICE PLAN
AND PAYROLL DEDUCTION ISSUES ARE THE PREMIUMS LISTED ABOVE.
R25387-44-3

Date: 04/26/2017

MUTUAL OF OMAHA INSURANCE COMPANY
SCHEDULE OF MONTHLY RATES FOR RIDER FORM 0DX5M

PER \$10 DAILY CONFINED CARE/PER \$5 DAILY COMMUNITY BASED BENEFIT
50% HOME HEALTH CARE BENEFIT

BENEFIT -- 5 YEARS

Issue Age	Elimination Periods			
	0 Day	20 Day	100 Day	365 Day
18-39	5.76	5.46	4.63	3.95
40	6.26	5.92	4.97	4.18
41	6.45	6.05	5.10	4.31
42	6.61	6.23	5.23	4.40
43	6.78	6.38	5.32	4.47
44	6.92	6.52	5.47	4.60
45	7.13	6.68	5.59	4.66
46	7.30	6.84	5.72	4.77
47	7.51	7.04	5.89	4.93
48	7.79	7.30	6.09	5.09
49	8.06	7.55	6.28	5.23
50	8.37	7.83	6.55	5.48
51	8.70	8.12	6.79	5.68
52	9.02	8.43	7.04	5.87
53	9.31	8.70	7.27	6.08
54	9.56	8.99	7.50	6.27
55	9.86	9.28	7.77	6.48
56	10.16	9.59	7.99	6.66
57	10.48	9.89	8.23	6.84
58	10.80	10.22	8.46	7.01
59	11.15	10.55	8.69	7.17
60	11.50	10.87	8.93	7.35
61	11.89	11.22	9.19	7.52
62	12.30	11.57	9.45	7.71
63	12.69	11.92	9.75	7.96
64	13.12	12.28	10.02	8.17
65	13.57	12.65	10.32	8.43
66	14.01	13.05	10.63	8.67
67	14.50	13.48	10.96	8.91
68	15.03	13.95	11.33	9.20
69	15.59	14.48	11.75	9.55
70	16.21	15.04	12.19	9.88
71	16.78	15.58	12.58	10.16
72	17.31	16.08	12.99	10.49
73	17.80	16.52	13.34	10.78
74	18.21	16.92	13.67	11.04
75	18.63	17.34	13.99	11.30
76	19.07	17.75	14.34	11.59
77	19.61	18.26	14.76	11.94
78	20.24	18.81	15.24	12.34
79	20.90	19.43	15.73	12.74
80	21.60	20.06	16.28	13.21
81	22.37	20.77	16.87	13.71
82	23.19	21.51	17.48	14.20
83	24.05	22.30	18.11	14.71
84	24.95	23.12	18.80	15.29

TO OBTAIN QUARTERLY, SEMIANNUAL, AND ANNUAL PREMIUMS,
MULTIPLY THE ABOVE QUOTED PREMIUMS BY 3, 6, AND 12,
RESPECTIVELY. THE MONTHLY PREMIUMS FOR BANK SERVICE PLAN
AND PAYROLL DEDUCTION ISSUES ARE THE PREMIUMS LISTED ABOVE.
R25387-44-3

Date: 04/26/2017

MUTUAL OF OMAHA INSURANCE COMPANY
SCHEDULE OF MONTHLY RATES FOR RIDER FORM 0DX5M

PER \$10 DAILY CONFINED CARE/PER \$5 DAILY COMMUNITY BASED BENEFIT
50% HOME HEALTH CARE BENEFIT

Issue Age	BENEFIT -- LIFETIME			
	Elimination Periods			
	0 Day	20 Day	100 Day	365 Day
18-39	13.00	12.39	10.24	8.48
40	13.73	13.13	10.89	9.04
41	14.12	13.44	11.17	9.28
42	14.46	13.74	11.41	9.49
43	14.82	14.12	11.71	9.74
44	15.16	14.48	12.04	10.01
45	15.60	14.89	12.42	10.32
46	16.07	15.31	12.79	10.69
47	16.54	15.76	13.13	10.93
48	16.99	16.21	13.51	11.26
49	17.60	16.69	13.95	11.69
50	18.11	17.23	14.35	11.99
51	18.64	17.69	14.76	12.31
52	19.14	18.11	15.08	12.57
53	19.58	18.43	15.37	12.82
54	19.92	18.66	15.54	12.94
55	20.23	18.88	15.73	13.10
56	20.61	19.14	15.90	13.23
57	21.09	19.53	16.17	13.40
58	21.68	20.02	16.59	13.74
59	22.37	20.54	17.02	14.11
60	23.08	21.14	17.46	14.44
61	23.87	21.76	18.01	14.87
62	24.60	22.46	18.51	15.22
63	25.40	23.18	19.02	15.61
64	26.22	24.00	19.63	16.07
65	27.04	24.80	20.22	16.48
66	27.92	25.66	20.88	16.99
67	28.81	26.52	21.55	17.50
68	29.77	27.43	22.31	18.16
69	30.78	28.33	23.10	18.85
70	31.80	29.26	23.93	19.58
71	32.81	30.21	24.74	20.27
72	33.83	31.19	25.53	20.90
73	34.80	32.08	26.30	21.55
74	35.75	32.93	27.04	22.17
75	36.71	33.83	27.78	22.83
76	37.70	34.80	28.55	23.43
77	38.71	35.89	29.35	24.04
78	39.81	37.06	30.33	24.80
79	40.90	38.32	31.25	25.49
80	42.06	39.70	32.27	26.22
81	43.36	41.17	33.40	27.08
82	44.68	42.69	34.54	27.92
83	46.10	44.32	35.75	28.86
84	47.59	45.99	37.02	29.77

TO OBTAIN QUARTERLY, SEMIANNUAL, AND ANNUAL PREMIUMS,
MULTIPLY THE ABOVE QUOTED PREMIUMS BY 3, 6, AND 12,
RESPECTIVELY. THE MONTHLY PREMIUMS FOR BANK SERVICE PLAN
AND PAYROLL DEDUCTION ISSUES ARE THE PREMIUMS LISTED ABOVE.
R25387-44-3

Date: 04/26/2017

MUTUAL OF OMAHA INSURANCE COMPANY
SCHEDULE OF MONTHLY RATES FOR RIDER FORM 0DX5M

PER \$10 DAILY CONFINED CARE/PER \$10 DAILY COMMUNITY BASED BENEFIT
100% HOME HEALTH CARE BENEFIT

Issue Age	BENEFIT -- 1 YEAR			
	ELIMINATION PERIODS			
	0 Day	20 Day	100 Day	365 Day
18-39	2.80	2.60	2.24	1.93
40	3.06	2.81	2.42	2.09
41	3.13	2.88	2.47	2.12
42	3.22	2.95	2.54	2.18
43	3.34	3.05	2.62	2.26
44	3.41	3.13	2.68	2.30
45	3.52	3.22	2.76	2.38
46	3.61	3.34	2.82	2.39
47	3.72	3.46	2.92	2.46
48	3.88	3.59	3.04	2.57
49	4.01	3.73	3.13	2.62
50	4.16	3.90	3.28	2.74
51	4.30	4.06	3.37	2.80
52	4.48	4.22	3.50	2.90
53	4.64	4.38	3.62	2.99
54	4.81	4.54	3.76	3.10
55	4.96	4.68	3.86	3.19
56	5.14	4.85	4.01	3.32
57	5.33	5.03	4.13	3.40
58	5.53	5.21	4.27	3.50
59	5.74	5.40	4.42	3.60
60	5.98	5.62	4.58	3.74
61	6.17	5.81	4.72	3.83
62	6.44	6.05	4.91	4.00
63	6.73	6.29	5.14	4.20
64	7.01	6.53	5.32	4.33
65	7.32	6.79	5.56	4.54
66	7.66	7.08	5.80	4.73
67	8.00	7.38	6.02	4.91
68	8.39	7.73	6.28	5.09
69	8.81	8.11	6.55	5.29
70	9.25	8.51	6.83	5.48
71	9.68	8.90	7.12	5.68
72	10.08	9.25	7.39	5.90
73	10.42	9.55	7.63	6.10
74	10.70	9.82	7.86	6.29
75	10.98	10.09	8.09	6.49
76	11.28	10.38	8.32	6.67
77	11.65	10.72	8.58	6.88
78	12.05	11.09	8.87	7.10
79	12.50	11.52	9.19	7.33
80	12.98	11.96	9.52	7.58
81	13.50	12.43	9.86	7.82
82	14.04	12.95	10.25	8.11
83	14.62	13.50	10.64	8.38
84	15.25	14.08	11.08	8.71

TO OBTAIN QUARTERLY, SEMIANNUAL, AND ANNUAL PREMIUMS, MULTIPLY THE ABC QUOTED PREMIUMS BY 3, 6, AND 12, RESPECTIVELY. THE MONTHLY PREMIUMS FOR BANK SERVICE PLAN AND PAYROLL DEDUCTION ISSUES ARE THE PREMIUMS LISTED / R25387-44-4

Date: 04/26/2017

MUTUAL OF OMAHA INSURANCE COMPANY
SCHEDULE OF MONTHLY RATES FOR RIDER FORM 0DX5M

PER \$10 DAILY CONFINED CARE/PER \$10 DAILY COMMUNITY BASED BENEFIT
100% HOME HEALTH CARE BENEFIT

BENEFIT -- TWO YEARS

Issue Age	ELIMINATION PERIODS			
	0 Day	20 Day	100 Day	365 Day
18-39	3.96	3.78	3.22	2.75
40	4.28	4.07	3.48	2.98
41	4.39	4.18	3.55	3.04
42	4.52	4.30	3.66	3.13
43	4.66	4.42	3.76	3.19
44	4.78	4.54	3.85	3.28
45	4.94	4.66	3.94	3.34
46	5.08	4.79	4.06	3.43
47	5.24	4.94	4.15	3.48
48	5.39	5.09	4.27	3.58
49	5.56	5.26	4.39	3.67
50	5.76	5.44	4.54	3.78
51	5.95	5.62	4.69	3.92
52	6.16	5.80	4.82	4.01
53	6.38	5.99	5.00	4.18
54	6.58	6.19	5.15	4.28
55	6.84	6.41	5.35	4.48
56	7.12	6.65	5.54	4.61
57	7.42	6.91	5.74	4.78
58	7.75	7.19	5.98	4.96
59	8.12	7.50	6.20	5.12
60	8.50	7.81	6.44	5.32
61	8.90	8.14	6.70	5.52
62	9.28	8.48	6.94	5.68
63	9.62	8.80	7.16	5.83
64	9.98	9.13	7.36	5.93
65	10.33	9.47	7.60	6.08
66	10.74	9.84	7.85	6.28
67	11.26	10.30	8.20	6.53
68	11.89	10.85	8.65	6.90
69	12.67	11.50	9.20	7.36
70	13.46	12.17	9.77	7.84
71	14.20	12.80	10.31	8.30
72	14.83	13.36	10.78	8.70
73	15.30	13.80	11.15	9.01
74	15.68	14.16	11.47	9.29
75	16.00	14.48	11.75	9.54
76	16.32	14.82	12.04	9.77
77	16.72	15.20	12.34	10.02
78	17.17	15.62	12.66	10.26
79	17.65	16.08	13.00	10.51
80	18.16	16.54	13.37	10.81
81	18.67	17.04	13.73	11.08
82	19.24	17.54	14.11	11.35
83	19.80	18.08	14.50	11.63
84	20.39	18.62	14.92	11.95

TO OBTAIN QUARTERLY, SEMIANNUAL, AND ANNUAL PREMIUMS, MULTIPLY THE ABC QUOTED PREMIUMS BY 3, 6, AND 12, RESPECTIVELY. THE MONTHLY PREMIUMS FOR B/ SERVICE PLAN AND PAYROLL DEDUCTION ISSUES ARE THE PREMIUMS LISTED ABO VI R25387-44-4

Date: 04/26/2017

MUTUAL OF OMAHA INSURANCE COMPANY
SCHEDULE OF MONTHLY RATES FOR RIDER FORM 0DX5M

PER \$10 DAILY CONFINED CARE/PER \$10 DAILY COMMUNITY BASED BENEFIT
100% HOME HEALTH CARE BENEFIT

Issue Age	BENEFIT -- 3 YEARS			
	ELIMINATION PERIOD			
	0 Day	20 Day	100 Day	365 Day
18-39	4.94	4.54	3.83	3.23
40	5.40	4.96	4.19	3.54
41	5.53	5.09	4.30	3.64
42	5.69	5.22	4.42	3.73
43	5.82	5.34	4.51	3.80
44	5.93	5.45	4.58	3.85
45	6.10	5.57	4.70	3.96
46	6.23	5.70	4.78	4.01
47	6.40	5.87	4.91	4.12
48	6.64	6.07	5.06	4.22
49	6.84	6.28	5.21	4.32
50	7.14	6.53	5.39	4.44
51	7.39	6.78	5.57	4.57
52	7.68	7.03	5.77	4.74
53	7.98	7.30	5.98	4.90
54	8.26	7.55	6.19	5.08
55	8.54	7.79	6.38	5.23
56	8.83	8.06	6.61	5.42
57	9.16	8.35	6.84	5.60
58	9.48	8.65	7.08	5.80
59	9.82	8.98	7.34	6.00
60	10.18	9.32	7.62	6.23
61	10.52	9.66	7.88	6.43
62	10.90	9.98	8.14	6.64
63	11.21	10.26	8.38	6.85
64	11.53	10.51	8.60	7.03
65	11.86	10.79	8.81	7.19
66	12.19	11.08	9.04	7.38
67	12.58	11.42	9.32	7.60
68	13.03	11.88	9.66	7.86
69	13.57	12.43	10.06	8.14
70	14.15	13.00	10.46	8.41
71	14.65	13.51	10.84	8.69
72	15.06	13.92	11.14	8.92
73	15.28	14.15	11.30	9.04
74	15.31	14.21	11.35	9.07
75	15.34	14.26	11.38	9.07
76	15.46	14.36	11.45	9.13
77	15.76	14.62	11.68	9.32
78	16.25	15.05	12.04	9.62
79	16.90	15.58	12.49	10.01
80	17.63	16.22	13.02	10.45
81	18.49	16.94	13.62	10.96
82	19.45	17.77	14.33	11.56
83	20.54	18.70	15.11	12.22
84	21.73	19.72	15.97	12.94

TO OBTAIN QUARTERLY, SEMIANNUAL, AND ANNUAL PREMIUMS, MULTIPLY THE ABC QUOTED PREMIUMS BY 3, 6, AND 12, RESPECTIVELY. THE MONTHLY PREMIUMS FOR B/ SERVICE PLAN AND PAYROLL DEDUCTION ISSUES ARE THE PREMIUMS LISTED ABOVE
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Date: 04/26/2017

MUTUAL OF OMAHA INSURANCE COMPANY
SCHEDULE OF MONTHLY RATES FOR RIDER FORM 0DX5M

PER \$10 DAILY CONFINED CARE/PER \$10 DAILY COMMUNITY BASED BENEFIT
100% HOME HEALTH CARE BENEFIT

Issue Age	BENEFIT -- 5 YEARS			
	ELIMINATION PERIODS			
	0 Day	20 Day	100 Day	365 Day
18-39	7.04	6.56	5.53	4.68
40	7.63	7.11	5.94	4.97
41	7.84	7.30	6.08	5.07
42	8.04	7.50	6.25	5.19
43	8.24	7.68	6.35	5.26
44	8.43	7.85	6.52	5.41
45	8.67	8.04	6.66	5.50
46	8.89	8.25	6.82	5.63
47	9.15	8.49	7.02	5.81
48	9.48	8.78	7.26	6.01
49	9.81	9.09	7.50	6.19
50	10.19	9.43	7.81	6.48
51	10.60	9.78	8.10	6.71
52	10.96	10.14	8.38	6.93
53	11.33	10.47	8.69	7.19
54	11.64	10.84	8.95	7.38
55	12.01	11.20	9.24	7.63
56	12.36	11.56	9.53	7.84
57	12.75	11.94	9.81	8.07
58	13.13	12.32	10.09	8.27
59	13.57	12.69	10.38	8.49
60	14.00	13.09	10.67	8.69
61	14.48	13.51	10.97	8.90
62	14.96	13.94	11.29	9.15
63	15.44	14.37	11.62	9.42
64	15.97	14.80	11.97	9.68
65	16.50	15.24	12.32	9.94
66	17.07	15.71	12.68	10.24
67	17.64	16.23	13.08	10.54
68	18.27	16.81	13.52	10.87
69	18.99	17.45	14.01	11.26
70	19.71	18.13	14.53	11.66
71	20.42	18.77	15.03	12.03
72	21.08	19.38	15.50	12.40
73	21.65	19.91	15.93	12.74
74	22.17	20.38	16.31	13.06
75	22.68	20.88	16.71	13.38
76	23.22	21.37	17.11	13.68
77	23.88	21.98	17.61	14.11
78	24.63	22.66	18.17	14.56
79	25.43	23.41	18.77	15.05
80	26.31	24.20	19.42	15.59
81	27.21	25.03	20.11	16.15
82	28.23	25.93	20.83	16.74
83	29.26	26.86	21.60	17.37
84	30.36	27.85	22.43	18.06

TO OBTAIN QUARTERLY, SEMIANNUAL, AND ANNUAL PREMIUMS, MULTIPLY THE ABOVE QUOTED PREMIUMS BY 3, 6, AND 12, RESPECTIVELY. THE MONTHLY PREMIUMS FOR B, SERVICE PLAN AND PAYROLL DEDUCTION ISSUES ARE THE PREMIUMS LISTED ABOVE
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Date: 04/26/2017

MUTUAL OF OMAHA INSURANCE COMPANY
SCHEDULE OF MONTHLY RATES FOR RIDER FORM 0DX5M

PER \$10 DAILY CONFINED CARE/PER \$10 DAILY COMMUNITY BASED BENEFIT
100% HOME HEALTH CARE BENEFIT

Issue Age	BENEFIT -- LIFETIME			
	ELIMINATION PERIODS			
	0 Day	20 Day	100 Day	365 Day
18-39	17.57	16.56	13.57	11.12
40	18.58	17.57	14.39	11.75
41	19.08	17.97	14.77	12.14
42	19.49	18.40	15.15	12.44
43	20.00	18.87	15.51	12.75
44	20.53	19.37	15.95	13.12
45	21.07	19.90	16.41	13.57
46	21.71	20.47	16.94	14.01
47	22.32	21.07	17.40	14.36
48	22.98	21.68	17.91	14.79
49	23.74	22.33	18.49	15.28
50	24.47	23.02	19.02	15.70
51	25.20	23.66	19.54	16.16
52	25.86	24.21	19.99	16.50
53	26.45	24.66	20.34	16.74
54	26.90	24.93	20.57	16.97
55	27.36	25.27	20.83	17.15
56	27.82	25.60	21.07	17.33
57	28.51	26.07	21.41	17.58
58	29.30	26.73	21.94	18.03
59	30.21	27.46	22.52	18.45
60	31.20	28.24	23.12	18.92
61	32.20	29.14	23.81	19.45
62	33.20	30.04	24.48	19.99
63	34.28	31.00	25.20	20.47
64	35.40	32.09	25.98	21.07
65	36.51	33.13	26.76	21.62
66	37.73	34.29	27.65	22.24
67	38.93	35.44	28.54	22.99
68	40.20	36.62	29.54	23.85
69	41.60	37.87	30.61	24.75
70	42.94	39.12	31.66	25.65
71	44.37	40.42	32.74	26.54
72	45.69	41.70	33.82	27.45
73	47.02	42.90	34.82	28.27
74	48.29	44.03	35.77	29.06
75	49.60	45.24	36.78	29.87
76	50.93	46.55	37.79	30.71
77	52.31	47.98	38.90	31.56
78	53.76	49.59	40.11	32.48
79	55.26	51.24	41.37	33.43
80	56.86	53.08	42.72	34.37
81	58.59	55.05	44.16	35.44
82	60.35	57.07	45.71	36.59
83	62.27	59.29	47.35	37.79
84	64.29	61.53	48.99	39.02

TO OBTAIN QUARTERLY, SEMIANNUAL, AND ANNUAL PREMIUMS, MULTIPLY THE ABC QUOTED PREMIUMS BY 3, 6, AND 12, RESPECTIVELY. THE MONTHLY PREMIUMS FOR B/ SERVICE PLAN AND PAYROLL DEDUCT I ON ISSUES ARE THE PREMIUMS LISTED ABOVE
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Date: 04/26/2017

MUTUAL OF OMAHA INSURANCE COMPANY
SCHEDULE OF MONTHLY RATES FOR RIDER FORM 0DX5M

PER \$10 DAILY CONFINED CARE/PER \$8 DAILY COMMUNITY BASED BENEFIT
80% HOME HEALTH CARE BENEFIT

Issue Age	BENEFIT -- 1 YEAR			
	ELIMINATION PERIODS			
	0 Day	20 Day	100 Day	365 Day
18-39	2.52	2.36	2.08	1.81
40	2.76	2.56	2.21	1.92
41	2.82	2.62	2.27	1.97
42	2.89	2.70	2.32	1.99
43	3.00	2.78	2.41	2.09
44	3.07	2.84	2.45	2.12
45	3.16	2.92	2.53	2.20
46	3.26	3.04	2.59	2.21
47	3.36	3.14	2.69	2.32
48	3.47	3.28	2.80	2.38
49	3.61	3.40	2.87	2.44
50	3.76	3.55	3.00	2.53
51	3.88	3.70	3.10	2.60
52	4.03	3.85	3.22	2.68
53	4.18	4.00	3.32	2.76
54	4.34	4.13	3.46	2.89
55	4.48	4.26	3.53	2.93
56	4.63	4.42	3.68	3.06
57	4.80	4.57	3.82	3.17
58	4.97	4.74	3.92	3.24
59	5.16	4.91	4.06	3.35
60	5.38	5.11	4.21	3.46
61	5.56	5.28	4.34	3.56
62	5.82	5.50	4.52	3.71
63	6.07	5.74	4.72	3.88
64	6.32	5.94	4.90	4.03
65	6.59	6.18	5.10	4.20
66	6.90	6.46	5.32	4.39
67	7.21	6.72	5.54	4.56
68	7.55	7.04	5.76	4.72
69	7.94	7.39	6.02	4.91
70	8.33	7.74	6.28	5.09
71	8.72	8.09	6.52	5.26
72	9.08	8.42	6.79	5.47
73	9.37	8.70	7.02	5.68
74	9.64	8.93	7.24	5.86
75	9.88	9.18	7.44	6.04
76	10.18	9.43	7.64	6.19
77	10.50	9.76	7.90	6.40
78	10.85	10.09	8.14	6.58
79	11.27	10.48	8.45	6.82
80	11.70	10.88	8.74	7.02
81	12.16	11.32	9.07	7.27
82	12.66	11.78	9.41	7.51
83	13.18	12.28	9.78	7.79
84	13.73	12.82	10.18	8.08

TO OBTAIN QUARTERLY, SEMIANNUAL, AND ANNUAL PREMIUMS, MULTIPLY THE ABC QUOTED PREMIUMS BY 3, 6, AND 12. RESPECTIVELY . THE MONTHLY PREMIUMS FOR B SERVICE PLAN AND PAYROLL DEDUCTION ISSUES ARE THE PREMIUMS LISTED ABOVE
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Date: 04/26/2017

MUTUAL OF OMAHA INSURANCE COMPANY
SCHEDULE OF MONTHLY RATES FOR RIDER FORM 0DX5M

PER \$10 DAILY CONFINED CARE/PER \$8 DAILY COMMUNITY BASED BENEFIT
80% HOME HEALTH CARE BENEFIT

Issue Age	BENEFIT -- 2 YEARS			
	ELIMINATION PERIODS			
	0 Day	20 Day	100 Day	365 Day
18-39	3.60	3.47	2.99	2.57
40	3.90	3.76	3.23	2.78
41	4.00	3.84	3.29	2.82
42	4.12	3.96	3.41	2.94
43	4.24	4.06	3.48	2.99
44	4.36	4.16	3.58	3.07
45	4.50	4.28	3.67	3.16
46	4.62	4.42	3.76	3.20
47	4.78	4.54	3.85	3.28
48	4.92	4.68	3.96	3.35
49	5.05	4.84	4.08	3.44
50	5.26	4.99	4.20	3.54
51	5.42	5.16	4.34	3.65
52	5.60	5.33	4.49	3.78
53	5.81	5.51	4.64	3.91
54	6.00	5.71	4.78	4.00
55	6.22	5.92	4.96	4.16
56	6.49	6.12	5.15	4.34
57	6.76	6.36	5.32	4.45
58	7.06	6.61	5.54	4.64
59	7.39	6.89	5.76	4.82
60	7.74	7.19	5.98	4.98
61	8.11	7.49	6.22	5.17
62	8.45	7.80	6.44	5.32
63	8.77	8.10	6.64	5.44
64	9.08	8.40	6.84	5.57
65	9.41	8.70	7.06	5.71
66	9.78	9.06	7.30	5.86
67	10.24	9.47	7.62	6.13
68	10.84	9.98	8.04	6.47
69	11.53	10.58	8.56	6.91
70	12.26	11.20	9.08	7.36
71	12.92	11.80	9.58	7.78
72	13.51	12.29	10.02	8.17
73	13.94	12.70	10.36	8.44
74	14.27	13.03	10.66	8.72
75	14.56	13.32	10.92	8.96
76	14.86	13.63	11.17	9.16
77	15.23	13.99	11.45	9.38
78	15.64	14.38	11.76	9.64
79	16.07	14.78	12.08	9.88
80	16.52	15.22	12.42	10.14
81	17.00	15.67	12.76	10.39
82	17.51	16.13	13.10	10.64
83	18.04	16.63	13.48	10.91
84	18.58	17.14	13.88	11.24

TO OBTAIN QUARTERLY, SEMIANNUAL, AND ANNUAL PREMIUMS, MULTIPLY THE ABC QUOTED PREMIUMS BY 3, 6, AND 12, RESPECTIVELY. THE MONTHLY PREMIUMS FOR B/ SERVICE PLAN AND PAYROLL DEDUCTION ISSUES ARE THE PREMIUMS LISTED ABOVE
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Date: 04/26/2017

MUTUAL OF OMAHA INSURANCE COMPANY
SCHEDULE OF MONTHLY RATES FOR RIDER FORM 0DX5M

PER \$10 DAILY CONFINED CARE/PER \$8 DAILY COMMUNITY BASED BENEFIT
80% HOME HEALTH CARE BENEFIT

Issue Age	BENEFIT -- 3 YEARS			
	ELIMINATION PERIODS			
	0 Day	20 Day	100 Day	365 Day
18-39	4.55	4.24	3.59	3.04
40	4.98	4.61	3.94	3.37
41	5.09	4.73	4.04	3.46
42	5.24	4.86	4.14	3.53
43	5.38	4.96	4.24	3.61
44	5.47	5.08	4.30	3.65
45	5.60	5.20	4.42	3.76
46	5.74	5.32	4.49	3.80
47	5.90	5.45	4.61	3.90
48	6.11	5.65	4.75	4.00
49	6.30	5.84	4.90	4.12
50	6.58	6.08	5.06	4.21
51	6.80	6.32	5.23	4.33
52	7.07	6.55	5.44	4.50
53	7.36	6.78	5.62	4.66
54	7.61	7.02	5.82	4.82
55	7.86	7.24	6.00	4.97
56	8.14	7.50	6.20	5.12
57	8.44	7.76	6.44	5.34
58	8.74	8.06	6.65	5.48
59	9.04	8.36	6.90	5.69
60	9.36	8.68	7.15	5.89
61	9.70	8.98	7.40	6.10
62	10.01	9.28	7.64	6.29
63	10.32	9.53	7.87	6.50
64	10.62	9.78	8.08	6.67
65	10.92	10.02	8.27	6.83
66	11.22	10.30	8.50	7.02
67	11.59	10.63	8.75	7.20
68	11.99	11.05	9.08	7.46
69	12.50	11.57	9.46	7.72
70	13.03	12.10	9.83	7.98
71	13.50	12.56	10.18	8.23
72	13.86	12.95	10.46	8.45
73	14.06	13.16	10.62	8.57
74	14.10	13.20	10.66	8.62
75	14.12	13.25	10.67	8.59
76	14.22	13.36	10.75	8.66
77	14.51	13.60	10.96	8.84
78	14.95	13.99	11.30	9.13
79	15.56	14.50	11.74	9.49
80	16.22	15.10	12.24	9.92
81	17.02	15.76	12.80	10.40
82	17.92	16.54	13.46	10.96
83	18.91	17.38	14.20	11.60
84	20.02	18.34	15.00	12.28

TO OBTAIN QUARTERLY, SEMIANNUAL, AND ANNUAL PREMIUMS, MULTIPLY THE ABC PREMIUMS BY 3, 6 AND 12 RESPECTIVELY. THE MONTHLY PREMIUMS FOR BANK SERV PAYROLL DEDUCTION ISSUES ARE THE PREMIUMS LISTED ABOVE.

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Date: 04/26/2017

MUTUAL OF OMAHA INSURANCE COMPANY
SCHEDULE OF MONTHLY RATES FOR RIDER FORM 0DX5M

PER \$10 DAILY CONFINED CARE/PER \$8 DAILY COMMUNITY BASED BENEFIT
80% HOME HEALTH CARE BENEFIT

Issue Age	BENEFIT -- 5 YEARS			
	ELIMINATION PERIODS			
	0 Day	20 Day	100 Day	365 Day
18-39	6.55	6.16	5.26	4.49
40	7.11	6.68	5.65	4.77
41	7.30	6.88	5.79	4.87
42	7.48	7.04	5.92	4.97
43	7.67	7.22	6.03	5.04
44	7.83	7.38	6.19	5.19
45	8.07	7.57	6.34	5.30
46	8.27	7.77	6.47	5.39
47	8.51	7.96	6.66	5.57
48	8.83	8.24	6.91	5.79
49	9.15	8.54	7.12	5.93
50	9.48	8.87	7.41	6.19
51	9.88	9.22	7.67	6.38
52	10.21	9.53	7.96	6.67
53	10.54	9.83	8.24	6.91
54	10.84	10.18	8.50	7.11
55	11.18	10.52	8.79	7.34
56	11.53	10.87	9.04	7.52
57	11.87	11.21	9.31	7.73
58	12.23	11.57	9.57	7.91
59	12.63	11.94	9.88	8.16
60	13.02	12.32	10.12	8.33
61	13.46	12.72	10.42	8.56
62	13.93	13.11	10.71	8.77
63	14.37	13.51	11.03	9.02
64	14.86	13.92	11.36	9.28
65	15.36	14.32	11.68	9.53
66	15.86	14.76	12.03	9.81
67	16.41	15.26	12.42	10.11
68	17.01	15.80	12.85	10.44
69	17.68	16.41	13.31	10.80
70	18.35	17.02	13.81	11.20
71	19.00	17.64	14.27	11.53
72	19.60	18.21	14.71	11.88
73	20.14	18.70	15.14	12.25
74	20.61	19.18	15.50	12.53
75	21.11	19.61	15.86	12.83
76	21.59	20.11	16.25	13.13
77	22.22	20.67	16.72	13.52
78	22.92	21.31	17.27	13.98
79	23.67	21.99	17.82	14.44
80	24.46	22.73	18.43	14.94
81	25.33	23.51	19.09	15.50
82	26.26	24.37	19.78	16.06
83	27.24	25.26	20.52	16.68
84	28.25	26.19	21.30	17.31

TO OBTAIN QUARTERLY, SEMIANNUAL, AND ANNUAL PREMIUMS,
MULTIPLY THE ABOVE QUOTED PREMIUMS BY 3, 6, AND 12,
RESPECTIVELY. THE MONTHLY PREMIUMS FOR BANK SERVICE PLAN
AND PAYROLL DEDUCTION ISSUES ARE THE PREMIUMS LISTED ABOVE.
R25387-44-4

Date: 04/26/2017

MUTUAL OF OMAHA INSURANCE COMPANY
SCHEDULE OF MONTHLY RATES FOR RIDER FORM 0DX5M

PER \$10 DAILY CONFINED CARE/PER \$8 DAILY COMMUNITY BASED BENEFIT
80% HOME HEALTH CARE BENEFIT

Issue Age	BENEFIT -- LIFETIME			
	ELIMINATION PERIODS			
	0 Day	20 Day	100 Day	365 Day
18-39	16.49	15.76	13.01	10.78
40	17.48	16.70	13.81	11.41
41	17.94	17.10	14.16	11.74
42	18.33	17.43	14.54	12.08
43	18.83	17.91	14.90	12.41
44	19.30	18.40	15.31	12.72
45	19.83	18.92	15.76	13.11
46	20.42	19.48	16.24	13.54
47	20.99	20.00	16.70	13.94
48	21.62	20.60	17.20	14.36
49	22.33	21.23	17.73	14.79
50	22.99	21.87	18.27	15.24
51	23.71	22.48	18.75	15.64
52	24.32	22.99	19.18	15.99
53	24.87	23.40	19.54	16.33
54	25.28	23.70	19.73	16.41
55	25.73	24.01	19.99	16.63
56	26.20	24.32	20.24	16.85
57	26.76	24.78	20.57	17.04
58	27.54	25.40	21.07	17.49
59	28.41	26.11	21.62	17.91
60	29.34	26.84	22.17	18.33
61	30.30	27.69	22.84	18.84
62	31.25	28.52	23.51	19.34
63	32.26	29.45	24.16	19.83
64	33.29	30.46	24.93	20.42
65	34.34	31.49	25.67	20.93
66	35.47	32.58	26.54	21.62
67	36.59	33.67	27.36	22.23
68	37.86	34.82	28.36	23.08
69	39.11	35.98	29.39	23.97
70	40.42	37.21	30.39	24.85
71	41.70	38.39	31.43	25.73
72	42.99	39.58	32.48	26.58
73	44.22	40.76	33.43	27.37
74	45.41	41.83	34.34	28.15
75	46.64	42.99	35.28	28.99
76	47.90	44.24	36.27	29.75
77	49.19	45.56	37.33	30.60
78	50.57	47.10	38.48	31.43
79	51.96	48.69	39.71	32.35
80	53.48	50.44	41.00	33.29
81	55.10	52.31	42.40	34.37
82	56.76	54.26	43.86	35.47
83	58.59	56.33	45.41	36.67
84	60.46	58.47	47.04	37.86

TO OBTAIN QUARTERLY, SEMIANNUAL, AND ANNUAL PREMIUMS,
MULTIPLY THE ABOVE QUOTED PREMIUMS BY 3, 6, AND 12,
RESPECTIVELY. THE MONTHLY PREMIUMS FOR BANK SERVICE PLAN
AND PAYROLL DEDUCTION ISSUES ARE THE PREMIUMS LISTED ABOVE.
R25387-44-4

Date: 04/26/2017

MUTUAL OF OMAHA INSURANCE COMPANY
SCHEDULE OF MONTHLY RATES FOR RIDER FORM 0DX5M

PER \$10 DAILY CONFINED CARE/PER \$5 DAILY COMMUNITY BASED BENEFIT
50% HOME HEALTH CARE BENEFIT

BENEFIT -- 1 YEAR

Issue Age	Elimination Periods			
	0 Day	20 Day	100 Day	365 Day
18-39	2.11	1.98	1.72	1.49
40	2.30	2.14	1.86	1.63
41	2.35	2.18	1.90	1.66
42	2.44	2.26	1.96	1.70
43	2.50	2.32	2.02	1.75
44	2.56	2.38	2.05	1.76
45	2.64	2.45	2.11	1.82
46	2.74	2.53	2.17	1.86
47	2.80	2.63	2.24	1.90
48	2.92	2.72	2.34	2.02
49	3.02	2.84	2.40	2.03
50	3.13	2.96	2.51	2.14
51	3.25	3.08	2.59	2.18
52	3.36	3.22	2.68	2.24
53	3.49	3.32	2.77	2.32
54	3.61	3.46	2.88	2.41
55	3.73	3.56	2.95	2.44
56	3.88	3.70	3.07	2.56
57	4.01	3.83	3.16	2.62
58	4.16	3.96	3.28	2.70
59	4.31	4.10	3.40	2.82
60	4.49	4.26	3.52	2.92
61	4.64	4.42	3.64	2.98
62	4.84	4.60	3.78	3.11
63	5.06	4.78	3.95	3.26
64	5.28	4.96	4.08	3.36
65	5.50	5.17	4.26	3.52
66	5.77	5.38	4.44	3.67
67	6.01	5.62	4.63	3.82
68	6.31	5.87	4.84	3.97
69	6.64	6.16	5.03	4.12
70	6.96	6.46	5.26	4.27
71	7.28	6.77	5.45	4.39
72	7.60	7.03	5.66	4.56
73	7.82	7.26	5.86	4.72
74	8.05	7.45	6.04	4.88
75	8.26	7.67	6.20	5.02
76	8.50	7.88	6.38	5.16
77	8.76	8.14	6.59	5.33
78	9.06	8.42	6.80	5.50
79	9.40	8.75	7.06	5.68
80	9.77	9.10	7.30	5.86
81	10.14	9.46	7.57	6.07
82	10.57	9.84	7.87	6.29
83	11.02	10.25	8.17	6.52
84	11.47	10.69	8.50	6.76

TO OBTAIN QUARTERLY, SEMIANNUAL, AND ANNUAL PREMIUMS,
MULTIPLY THE ABOVE QUOTED PREMIUMS BY 3, 6, AND 12,
RESPECTIVELY. THE MONTHLY PREMIUMS FOR BANK SERVICE PLAN
AND PAYROLL DEDUCTION ISSUES ARE THE PREMIUMS LISTED ABOVE.
R25387-44-4

Date: 04/26/2017

MUTUAL OF OMAHA INSURANCE COMPANY
SCHEDULE OF MONTHLY RATES FOR RIDER FORM 0DX5M

PER \$10 DAILY CONFINED CARE/PER \$5 DAILY COMMUNITY BASED BENEFIT
50% HOME HEALTH CARE BENEFIT

BENEFIT -- 2 YEARS

Issue Age	Elimination Periods			
	0 Day	20 Day	100 Day	365 Day
18-39	3.06	2.95	2.54	2.20
40	3.30	3.18	2.74	2.38
41	3.38	3.25	2.80	2.41
42	3.50	3.35	2.89	2.50
43	3.59	3.44	2.95	2.53
44	3.71	3.53	3.02	2.59
45	3.80	3.64	3.10	2.65
46	3.91	3.73	3.19	2.74
47	4.04	3.85	3.28	2.78
48	4.16	3.97	3.36	2.86
49	4.30	4.09	3.46	2.92
50	4.46	4.24	3.56	2.99
51	4.60	4.38	3.68	3.10
52	4.75	4.52	3.82	3.22
53	4.92	4.68	3.94	3.30
54	5.08	4.84	4.06	3.41
55	5.28	5.00	4.21	3.54
56	5.50	5.20	4.36	3.65
57	5.72	5.38	4.52	3.80
58	5.99	5.62	4.70	3.94
59	6.28	5.86	4.90	4.08
60	6.56	6.10	5.08	4.24
61	6.88	6.35	5.27	4.38
62	7.16	6.61	5.46	4.51
63	7.44	6.86	5.64	4.64
64	7.70	7.12	5.81	4.74
65	7.97	7.39	5.99	4.85
66	8.30	7.68	6.19	4.99
67	8.69	8.02	6.46	5.20
68	9.19	8.46	6.83	5.52
69	9.78	8.98	7.24	5.86
70	10.39	9.50	7.70	6.24
71	10.97	9.98	8.12	6.61
72	11.46	10.43	8.48	6.90
73	11.81	10.76	8.78	7.16
74	12.10	11.05	9.04	7.40
75	12.35	11.30	9.26	7.60
76	12.60	11.56	9.47	7.78
77	12.91	11.86	9.71	7.96
78	13.25	12.19	9.98	8.17
79	13.63	12.54	10.24	8.36
80	14.02	12.91	10.54	8.59
81	14.41	13.28	10.82	8.82
82	14.84	13.69	11.11	9.02
83	15.29	14.11	11.42	9.25
84	15.76	14.53	11.76	9.52

TO OBTAIN QUARTERLY, SEMIANNUAL, AND ANNUAL PREMIUMS,
MULTIPLY THE ABOVE QUOTED PREMIUMS BY 3, 6, AND 12,
RESPECTIVELY. THE MONTHLY PREMIUMS FOR BANK SERVICE PLAN
AND PAYROLL DEDUCTION ISSUES ARE THE PREMIUMS LISTED ABOVE.
R25387-44-4

Date: 04/26/2017

MUTUAL OF OMAHA INSURANCE COMPANY
SCHEDULE OF MONTHLY RATES FOR RIDER FORM 0DX5M

PER \$10 DAILY CONFINED CARE/PER \$5 DAILY COMMUNITY BASED BENEFIT
50% HOME HEALTH CARE BENEFIT

BENEFIT -- 3 YEARS

Issue Age	Elimination Periods			
	0 Day	20 Day	100 Day	365 Day
18-39	3.91	3.64	3.10	2.63
40	4.27	3.97	3.38	2.88
41	4.38	4.07	3.48	2.98
42	4.51	4.18	3.56	3.04
43	4.61	4.27	3.65	3.12
44	4.72	4.37	3.70	3.13
45	4.82	4.46	3.80	3.24
46	4.94	4.56	3.86	3.28
47	5.08	4.69	3.97	3.36
48	5.24	4.86	4.09	3.44
49	5.42	5.03	4.22	3.54
50	5.65	5.22	4.36	3.62
51	5.86	5.44	4.51	3.74
52	6.10	5.63	4.67	3.88
53	6.31	5.84	4.82	3.98
54	6.53	6.04	5.02	4.15
55	6.76	6.25	5.16	4.26
56	7.00	6.46	5.35	4.44
57	7.25	6.68	5.53	4.58
58	7.50	6.92	5.72	4.73
59	7.79	7.20	5.94	4.90
60	8.06	7.46	6.16	5.08
61	8.33	7.74	6.36	5.23
62	8.62	7.97	6.58	5.44
63	8.88	8.21	6.76	5.57
64	9.14	8.42	6.95	5.74
65	9.40	8.63	7.12	5.87
66	9.65	8.86	7.32	6.05
67	9.97	9.14	7.54	6.22
68	10.33	9.52	7.80	6.40
69	10.75	9.94	8.12	6.64
70	11.21	10.42	8.45	6.86
71	11.59	10.81	8.75	7.08
72	11.92	11.14	9.00	7.27
73	12.10	11.32	9.14	7.38
74	12.13	11.38	9.16	7.38
75	12.16	11.40	9.19	7.42
76	12.23	11.48	9.25	7.46
77	12.47	11.69	9.44	7.62
78	12.88	12.04	9.72	7.85
79	13.38	12.47	10.09	8.16
80	13.96	12.97	10.54	8.56
81	14.64	13.56	11.00	8.93
82	15.42	14.22	11.58	9.43
83	16.26	14.96	12.22	9.98
84	17.21	15.77	12.91	10.57

TO OBTAIN QUARTERLY, SEMIANNUAL, AND ANNUAL PREMIUMS,
MULTIPLY THE ABOVE QUOTED PREMIUMS BY 3, 6, AND 12,
RESPECTIVELY. THE MONTHLY PREMIUMS FOR BANK SERVICE PLAN
AND PAYROLL DEDUCTION ISSUES ARE THE PREMIUMS LISTED ABOVE.
R25387-44-4

Date: 04/26/2017

MUTUAL OF OMAHA INSURANCE COMPANY
SCHEDULE OF MONTHLY RATES FOR RIDER FORM 0DX5M

PER \$10 DAILY CONFINED CARE/PER \$5 DAILY COMMUNITY BASED BENEFIT
50% HOME HEALTH CARE BENEFIT

BENEFIT -- 5 YEARS

Issue Age	Elimination Periods			
	0 Day	20 Day	100 Day	365 Day
18-39	5.76	5.46	4.63	3.95
40	6.26	5.92	4.97	4.18
41	6.45	6.05	5.10	4.31
42	6.61	6.23	5.23	4.40
43	6.78	6.38	5.32	4.47
44	6.92	6.52	5.47	4.60
45	7.13	6.68	5.59	4.66
46	7.30	6.84	5.72	4.77
47	7.51	7.04	5.89	4.93
48	7.79	7.30	6.09	5.09
49	8.06	7.55	6.28	5.23
50	8.37	7.83	6.55	5.48
51	8.70	8.12	6.79	5.68
52	9.02	8.43	7.04	5.87
53	9.31	8.70	7.27	6.08
54	9.56	8.99	7.50	6.27
55	9.86	9.28	7.77	6.48
56	10.16	9.59	7.99	6.66
57	10.48	9.89	8.23	6.84
58	10.80	10.22	8.46	7.01
59	11.15	10.55	8.69	7.17
60	11.50	10.87	8.93	7.35
61	11.89	11.22	9.19	7.52
62	12.30	11.57	9.45	7.71
63	12.69	11.92	9.75	7.96
64	13.12	12.28	10.02	8.17
65	13.57	12.65	10.32	8.43
66	14.01	13.05	10.63	8.67
67	14.50	13.48	10.96	8.91
68	15.03	13.95	11.33	9.20
69	15.59	14.48	11.75	9.55
70	16.21	15.04	12.19	9.88
71	16.78	15.58	12.58	10.16
72	17.31	16.08	12.99	10.49
73	17.80	16.52	13.34	10.78
74	18.21	16.92	13.67	11.04
75	18.63	17.34	13.99	11.30
76	19.07	17.75	14.34	11.59
77	19.61	18.26	14.76	11.94
78	20.24	18.81	15.24	12.34
79	20.90	19.43	15.73	12.74
80	21.60	20.06	16.28	13.21
81	22.37	20.77	16.87	13.71
82	23.19	21.51	17.48	14.20
83	24.05	22.30	18.11	14.71
84	24.95	23.12	18.80	15.29

TO OBTAIN QUARTERLY, SEMIANNUAL, AND ANNUAL PREMIUMS,
MULTIPLY THE ABOVE QUOTED PREMIUMS BY 3, 6, AND 12,
RESPECTIVELY. THE MONTHLY PREMIUMS FOR BANK SERVICE PLAN
AND PAYROLL DEDUCTION ISSUES ARE THE PREMIUMS LISTED ABOVE.
R25387-44-4

Date: 04/26/2017

MUTUAL OF OMAHA INSURANCE COMPANY
SCHEDULE OF MONTHLY RATES FOR RIDER FORM 0DX5M

PER \$10 DAILY CONFINED CARE/PER \$5 DAILY COMMUNITY BASED BENEFIT
50% HOME HEALTH CARE BENEFIT

Issue Age	BENEFIT -- LIFETIME			
	Elimination Periods			
	0 Day	20 Day	100 Day	365 Day
18-39	14.95	14.25	11.78	9.75
40	15.79	15.10	12.52	10.40
41	16.24	15.46	12.85	10.67
42	16.63	15.80	13.12	10.91
43	17.04	16.24	13.47	11.20
44	17.43	16.65	13.85	11.51
45	17.94	17.12	14.28	11.87
46	18.48	17.61	14.71	12.29
47	19.02	18.12	15.10	12.57
48	19.54	18.64	15.54	12.95
49	20.24	19.19	16.04	13.44
50	20.83	19.81	16.50	13.79
51	21.44	20.34	16.97	14.16
52	22.01	20.83	17.34	14.46
53	22.52	21.19	17.68	14.74
54	22.91	21.46	17.87	14.88
55	23.26	21.71	18.09	15.07
56	23.70	22.01	18.29	15.21
57	24.25	22.46	18.60	15.41
58	24.93	23.02	19.08	15.80
59	25.73	23.62	19.57	16.23
60	26.54	24.31	20.08	16.61
61	27.45	25.02	20.71	17.10
62	28.29	25.83	21.29	17.50
63	29.21	26.66	21.87	17.95
64	30.15	27.60	22.57	18.48
65	31.10	28.52	23.25	18.95
66	32.11	29.51	24.01	19.54
67	33.13	30.50	24.78	20.13
68	34.24	31.54	25.66	20.88
69	35.40	32.58	26.57	21.68
70	36.57	33.65	27.52	22.52
71	37.73	34.74	28.45	23.31
72	38.90	35.87	29.36	24.04
73	40.02	36.89	30.25	24.78
74	41.11	37.87	31.10	25.50
75	42.22	38.90	31.95	26.25
76	43.36	40.02	32.83	26.94
77	44.52	41.27	33.75	27.65
78	45.78	42.62	34.88	28.52
79	47.04	44.07	35.94	29.31
80	48.37	45.66	37.11	30.15
81	49.86	47.35	38.41	31.14
82	51.38	49.09	39.72	32.11
83	53.02	50.97	41.11	33.19
84	54.73	52.89	42.57	34.24

TO OBTAIN QUARTERLY, SEMIANNUAL, AND ANNUAL PREMIUMS,
MULTIPLY THE ABOVE QUOTED PREMIUMS BY 3, 6, AND 12,
RESPECTIVELY. THE MONTHLY PREMIUMS FOR BANK SERVICE PLAN
AND PAYROLL DEDUCTION ISSUES ARE THE PREMIUMS LISTED ABOVE.
R25387-44-4

Date: 04/26/2017

MUTUAL OF OMAHA INSURANCE COMPANY
SCHEDULE OF MONTHLY RATES FOR POLICY FORMS
NH50-Series 19242 and NH50-Series 19410
PER \$10 DAILY CONFINED CARE BENEFIT

BENEFIT -- 1 YEAR

IssueAge	ELIMINATION PERIODS			
	0 Day	20 Day	100 Day	365 Day
18-39	0.70	0.67	0.62	0.58
40	0.72	0.68	0.64	0.58
41	0.74	0.71	0.65	0.60
42	0.78	0.73	0.67	0.61
43	0.82	0.77	0.70	0.62
44	0.84	0.80	0.71	0.64
45	0.88	0.83	0.73	0.64
46	0.92	0.88	0.77	0.68
47	0.97	0.91	0.80	0.70
48	1.02	0.96	0.83	0.72
49	1.07	1.01	0.88	0.76
50	1.13	1.07	0.91	0.77
51	1.20	1.13	0.96	0.82
52	1.28	1.20	1.01	0.85
53	1.36	1.28	1.07	0.89
54	1.44	1.36	1.13	0.95
55	1.54	1.43	1.20	1.01
56	1.64	1.52	1.30	1.09
57	1.76	1.63	1.38	1.18
58	1.90	1.75	1.48	1.25
59	2.04	1.88	1.60	1.34
60	2.20	2.03	1.72	1.44
61	2.41	2.20	1.86	1.57
62	2.64	2.42	2.02	1.69
63	2.92	2.68	2.21	1.84
64	3.23	2.98	2.42	1.97
65	3.59	3.28	2.64	2.12
66	3.98	3.64	2.92	2.33
67	4.42	4.04	3.22	2.56
68	4.90	4.46	3.55	2.83
69	5.40	4.90	3.91	3.12
70	5.95	5.38	4.30	3.44
71	6.58	5.92	4.75	3.82
72	7.26	6.54	5.27	4.25
73	8.04	7.25	5.86	4.72
74	8.89	8.04	6.50	5.26
75	9.82	8.89	7.19	5.82
76	10.79	9.82	7.94	6.43
77	11.84	10.78	8.74	7.07
78	12.95	11.81	9.58	7.75
79	14.14	12.90	10.48	8.50
80	15.38	14.05	11.40	9.25
81	16.70	15.26	12.40	10.06
82	18.07	16.52	13.43	10.92
83	19.52	17.86	14.52	11.81
84	21.04	19.24	15.67	12.76

TO OBTAIN QUARTERLY, SEMIANNUAL, AND ANNUAL PREMIUMS, MULTIPLY THE ABOVE QUOTED PREMIUMS BY 3, 6, AND 12, RESPECTIVELY. THE MONTHLY PREMIUMS FOR BANK SERVICE PLAN AND PAYROLL DEDUCTION ISSUES ARE THE PREMIUMS LISTED ABOVE .

R25388-44-3

Date: 04/26/2017

MUTUAL OF OMAHA INSURANCE COMPANY
SCHEDULE OF MONTHLY RATES FOR POLICY FORMS
NH50-Series 19242 and NH50-Series 19410
PER \$10 DAILY CONFINED CARE BENEFIT

BENEFIT -- 2 YEARS

Issue Age	ELIMINATION PERIODS			
	0 Day	20 day	100 Day	365 Day
18-39	0.88	0.84	0.73	0.64
40	0.91	0.88	0.76	0.65
41	0.95	0.90	0.79	0.70
42	1.00	0.94	0.82	0.72
43	1.04	0.98	0.85	0.74
44	1.09	1.03	0.88	0.76
45	1.15	1.08	0.91	0.77
46	1.21	1.14	0.95	0.79
47	1.30	1.20	1.00	0.83
48	1.36	1.28	1.06	0.86
49	1.44	1.36	1.12	0.91
50	1.52	1.43	1.18	0.97
51	1.62	1.52	1.26	1.04
52	1.73	1.63	1.36	1.13
53	1.87	1.75	1.46	1.22
54	2.02	1.88	1.57	1.31
55	2.17	2.02	1.70	1.43
56	2.36	2.18	1.85	1.57
57	2.57	2.38	2.02	1.70
58	2.81	2.58	2.18	1.84
59	3.05	2.81	2.38	2.02
60	3.34	3.06	2.58	2.18
61	3.66	3.36	2.83	2.38
62	4.06	3.71	3.10	2.59
63	4.51	4.13	3.41	2.82
64	5.02	4.60	3.73	3.04
65	5.56	5.10	4.10	3.30
66	6.20	5.68	4.54	3.61
67	6.94	6.34	5.04	4.01
68	7.75	7.06	5.62	4.48
69	8.66	7.85	6.28	5.02
70	9.65	8.71	7.00	5.63
71	10.72	9.66	7.78	6.28
72	11.87	10.69	8.63	6.97
73	13.09	11.80	9.54	7.72
74	14.36	12.98	10.50	8.50
75	15.72	14.26	11.53	9.34
76	17.20	15.64	12.65	10.24
77	18.80	17.12	13.86	11.22
78	20.54	18.73	15.18	12.30
79	22.40	20.44	16.58	13.45
80	24.38	22.26	18.06	14.65
81	26.48	24.18	19.66	15.97
82	28.69	26.22	21.32	17.34
83	31.03	28.37	23.08	18.76
84	33.48	30.62	24.92	20.28

TO OBTAIN QUARTERLY, SEMIANNUAL, AND ANNUAL PREMIUMS, MULTIPLY THE ABOVE QUOTED PREMIUMS BY 3, 6, AND 12 , RESPECTIVELY. THE MONTHLY PREMIUMS FOR BANK SERVICE PLAN AND PAYROLL DEDUCTION ISSUES ARE THE PREMIUMS LISTED ABOVE.

Date: 04/26/2017

MUTUAL OF OMAHA INSURANCE COMPANY
SCHEDULE OF MONTHLY RATES FOR POLICY FORMS
NH50-Series 19242 and NH50-Series 19410
PER \$10 DAILY CONFINED CARE BENEFIT

BENEFIT -- 3 YEARS

Issue Age	ELIMINATION PERIODS			
	0 Day	20 Day	100 Day	365 Day
18-39	1.08	1.00	0.83	0.70
40	1.12	1.03	0.86	0.72
41	1.18	1.07	0.89	0.74
42	1.22	1.12	0.94	0.77
43	1.30	1.18	0.97	0.80
44	1.36	1.24	1.02	0.85
45	1.42	1.31	1.06	0.86
46	1.50	1.38	1.12	0.91
47	1.60	1.46	1.18	0.95
48	1.68	1.55	1.25	1.01
49	1.79	1.64	1.33	1.08
50	1.90	1.74	1.40	1.13
51	2.03	1.86	1.49	1.19
52	2.17	1.99	1.60	1.30
53	2.34	2.14	1.72	1.39
54	2.51	2.30	1.86	1.50
55	2.70	2.47	2.00	1.62
56	2.92	2.68	2.16	1.75
57	3.18	2.92	2.36	1.91
58	3.47	3.17	2.56	2.08
59	3.77	3.46	2.78	2.23
60	4.12	3.78	3.04	2.44
61	4.52	4.15	3.34	2.68
62	5.00	4.60	3.67	2.93
63	5.56	5.08	4.07	3.28
64	6.14	5.59	4.52	3.65
65	6.82	6.18	5.02	4.06
66	7.58	6.85	5.56	4.51
67	8.47	7.66	6.18	4.99
68	9.46	8.57	6.84	5.46
69	10.55	9.59	7.56	5.96
70	11.74	10.72	8.34	6.49
71	13.06	11.93	9.22	7.12
72	14.48	13.26	10.20	7.85
73	16.04	14.70	11.32	8.72
74	17.74	16.24	12.55	9.70
75	19.54	17.89	13.87	10.75
76	21.44	19.61	15.28	11.89
77	23.46	21.42	16.73	13.07
78	25.58	23.30	18.24	14.28
79	27.83	25.26	19.84	15.58
80	30.17	27.30	21.48	16.90
81	32.62	29.42	23.20	18.28
82	35.20	31.62	25.00	19.75
83	37.86	33.90	26.86	21.28
84	40.66	36.28	28.78	22.84

TO OBTAIN QUARTERLY, SEMIANNUAL, AND ANNUAL PREMIUMS, MULTIPLY THE ABOVE QUOTED PREMIUMS BY 3, 6, AND 12 , RESPECTIVELY. THE MONTHLY PREMIUMS FOR BANK SERVICE PLAN AND PAYROLL DEDUCTION ISSUES ARE THE PREMIUMS LISTED ABOVE.

Date: 04/26/2017

MUTUAL OF OMAHA INSURANCE COMPANY
SCHEDULE OF MONTHLY RATES FOR POLICY FORMS
NH50-Series 19242 and NH50-Series 19410
PER \$10 DAILY CONFINED CARE BENEFIT

BENEFIT -- 5 YEARS

Issue Age	ELIMINATION PERIODS			
	0 Day	20 Day	100 Day	365 Day
18-39	1.43	1.32	1.06	0.85
40	1.47	1.36	1.10	0.90
41	1.54	1.44	1.13	0.90
42	1.63	1.51	1.19	0.94
43	1.69	1.58	1.24	0.98
44	1.78	1.66	1.31	1.03
45	1.89	1.76	1.39	1.10
46	2.00	1.85	1.47	1.18
47	2.12	1.97	1.56	1.24
48	2.26	2.09	1.66	1.32
49	2.39	2.22	1.76	1.40
50	2.55	2.35	1.87	1.50
51	2.73	2.51	2.00	1.60
52	2.93	2.71	2.16	1.72
53	3.16	2.92	2.33	1.87
54	3.41	3.16	2.53	2.02
55	3.69	3.41	2.75	2.22
56	4.00	3.71	2.98	2.40
57	4.36	4.04	3.26	2.63
58	4.73	4.40	3.54	2.84
59	5.15	4.80	3.83	3.06
60	5.61	5.20	4.14	3.29
61	6.14	5.70	4.53	3.59
62	6.79	6.28	4.99	3.97
63	7.52	6.94	5.53	4.41
64	8.34	7.67	6.14	4.93
65	9.24	8.47	6.81	5.48
66	10.27	9.39	7.57	6.08
67	11.44	10.44	8.43	6.79
68	12.75	11.61	9.36	7.55
69	14.17	12.87	10.36	8.34
70	15.72	14.27	11.47	9.23
71	17.42	15.82	12.69	10.21
72	19.29	17.50	14.04	11.24
73	21.34	19.38	15.49	12.39
74	23.55	21.38	17.05	13.60
75	25.92	23.55	18.73	14.91
76	28.42	25.85	20.54	16.31
77	31.08	28.27	22.44	17.81
78	33.88	30.83	24.46	19.42
79	36.83	33.53	26.59	21.10
80	39.92	36.36	28.83	22.88
81	43.18	39.31	31.20	24.75
82	46.57	42.42	33.66	26.71
83	50.11	45.65	36.25	28.79
84	53.79	49.02	38.93	30.93

TO OBTAIN QUARTERLY, SEMIANNUAL, AND ANNUAL PREMIUMS, MULTIPLY THE ABOVE QUOTED PREMIUMS BY 3, 6, AND 12, RESPECTIVELY. THE MONTHLY PREMIUMS FOR BANK SERVICE PLAN AND PAYROLL DEDUCTION ISSUES ARE THE PREMIUMS LISTED ABOVE.

R25388-44-3

Date: 04/26/2017

MUTUAL OF OMAHA INSURANCE COMPANY
SCHEDULE OF MONTHLY RATES FOR POLICY FORMS
NH50-Series 19242 and NH50-Series 19410
PER \$10 DAILY CONFINED CARE BENEFIT

Issue Age	BENEFITS -- LIFETIME			
	ELIMINATION PERIODS			
	0 Day	20 Day	100 Day	365 Day
18-39	2.83	2.70	2.11	1.66
40	2.95	2.80	2.21	1.74
41	3.11	2.95	2.31	1.82
42	3.26	3.11	2.44	1.94
43	3.46	3.30	2.59	2.04
44	3.69	3.52	2.80	2.18
45	3.97	3.80	2.99	2.37
46	4.24	4.07	3.22	2.56
47	4.52	4.34	3.45	2.74
48	4.86	4.62	3.67	2.90
49	5.21	4.93	3.91	3.12
50	5.55	5.23	4.16	3.30
51	5.94	5.54	4.42	3.52
52	6.34	5.88	4.71	3.76
53	6.73	6.21	4.99	4.00
54	7.05	6.54	5.25	4.24
55	7.46	6.85	5.55	4.52
56	7.93	7.25	5.93	4.82
57	8.52	7.79	6.34	5.15
58	9.20	8.40	6.81	5.54
59	9.96	9.06	7.31	5.88
60	10.82	9.80	7.87	6.34
61	11.83	10.69	8.58	6.88
62	13.04	11.78	9.41	7.51
63	14.44	13.04	10.40	8.32
64	15.98	14.46	11.54	9.20
65	17.71	16.04	12.84	10.27
66	19.60	17.80	14.25	11.38
67	21.71	19.73	15.76	12.57
68	24.04	21.84	17.39	13.86
69	26.51	24.12	19.12	15.15
70	29.19	26.59	21.00	16.59
71	32.11	29.26	23.08	18.19
72	35.31	32.20	25.34	19.94
73	38.79	35.43	27.85	21.85
74	42.51	38.84	30.50	23.97
75	46.50	42.51	33.41	26.27
76	50.75	46.46	36.49	28.65
77	55.22	50.69	39.81	31.29
78	59.97	55.21	43.36	34.07
79	64.96	59.98	47.13	37.04
80	70.19	65.05	51.10	40.16
81	75.71	70.42	55.32	43.46
82	81.46	76.00	59.74	46.93
83	87.45	81.91	64.36	50.57
84	93.74	88.08	69.21	54.37

TO OBTAIN QUARTERLY, SEMIANNUAL, AND ANNUAL PREMIUMS, MULTIPLY THE ABOVE QUOTED PREMIUMS BY 3, 6, AND 12, RESPECTIVELY. THE MONTHLY PREMIUMS FOR BANK SERVICE PLAN AND PAYROLL DEDUCTION ISSUES ARE THE PREMIUMS LISTED ABOVE.

R25388-44-3

Date: 04/26/2017

MUTUAL OF OMAHA INSURANCE COMPANY
SCHEDULE OF MONTHLY RATES FOR POLICY FORMS
NH50-Series 19242 and NH50-Series 19410
PER \$10 DAILY CONFINED CARE BENEFIT

BENEFIT -- 1 YEAR

IssueAge	ELIMINATION PERIODS			
	0 Day	20 Day	100 Day	365 Day
18-39	0.70	0.67	0.62	0.58
40	0.72	0.68	0.64	0.58
41	0.74	0.71	0.65	0.60
42	0.78	0.73	0.67	0.61
43	0.82	0.77	0.70	0.62
44	0.84	0.80	0.71	0.64
45	0.88	0.83	0.73	0.64
46	0.92	0.88	0.77	0.68
47	0.97	0.91	0.80	0.70
48	1.02	0.96	0.83	0.72
49	1.07	1.01	0.88	0.76
50	1.13	1.07	0.91	0.77
51	1.20	1.13	0.96	0.82
52	1.28	1.20	1.01	0.85
53	1.36	1.28	1.07	0.89
54	1.44	1.36	1.13	0.95
55	1.54	1.43	1.20	1.01
56	1.64	1.52	1.30	1.09
57	1.76	1.63	1.38	1.18
58	1.90	1.75	1.48	1.25
59	2.04	1.88	1.60	1.34
60	2.20	2.03	1.72	1.44
61	2.41	2.20	1.86	1.57
62	2.64	2.42	2.02	1.69
63	2.92	2.68	2.21	1.84
64	3.23	2.98	2.42	1.97
65	3.59	3.28	2.64	2.12
66	3.98	3.64	2.92	2.33
67	4.42	4.04	3.22	2.56
68	4.90	4.46	3.55	2.83
69	5.40	4.90	3.91	3.12
70	5.95	5.38	4.30	3.44
71	6.58	5.92	4.75	3.82
72	7.26	6.54	5.27	4.25
73	8.04	7.25	5.86	4.72
74	8.89	8.04	6.50	5.26
75	9.82	8.89	7.19	5.82
76	10.79	9.82	7.94	6.43
77	11.84	10.78	8.74	7.07
78	12.95	11.81	9.58	7.75
79	14.14	12.90	10.48	8.50
80	15.38	14.05	11.40	9.25
81	16.70	15.26	12.40	10.06
82	18.07	16.52	13.43	10.92
83	19.52	17.86	14.52	11.81
84	21.04	19.24	15.67	12.76

TO OBTAIN QUARTERLY, SEMIANNUAL, AND ANNUAL PREMIUMS, MULTIPLY THE ABOVE QUOTED PREMIUMS BY 3, 6, AND 12, RESPECTIVELY. THE MONTHLY PREMIUMS FOR BANK SERVICE PLAN AND PAYROLL DEDUCTION ISSUES ARE THE PREMIUMS LISTED ABOVE .

R25388-44-4

Date: 04/26/2017

MUTUAL OF OMAHA INSURANCE COMPANY
SCHEDULE OF MONTHLY RATES FOR POLICY FORMS
NH50-Series 19242 and NH50-Series 19410
PER \$10 DAILY CONFINED CARE BENEFIT

BENEFIT -- 2 YEARS

Issue Age	ELIMINATION PERIODS			
	0 Day	20 day	100 Day	365 Day
18-39	0.88	0.84	0.73	0.64
40	0.91	0.88	0.76	0.65
41	0.95	0.90	0.79	0.70
42	1.00	0.94	0.82	0.72
43	1.04	0.98	0.85	0.74
44	1.09	1.03	0.88	0.76
45	1.15	1.08	0.91	0.77
46	1.21	1.14	0.95	0.79
47	1.30	1.20	1.00	0.83
48	1.36	1.28	1.06	0.86
49	1.44	1.36	1.12	0.91
50	1.52	1.43	1.18	0.97
51	1.62	1.52	1.26	1.04
52	1.73	1.63	1.36	1.13
53	1.87	1.75	1.46	1.22
54	2.02	1.88	1.57	1.31
55	2.17	2.02	1.70	1.43
56	2.36	2.18	1.85	1.57
57	2.57	2.38	2.02	1.70
58	2.81	2.58	2.18	1.84
59	3.05	2.81	2.38	2.02
60	3.34	3.06	2.58	2.18
61	3.66	3.36	2.83	2.38
62	4.06	3.71	3.10	2.59
63	4.51	4.13	3.41	2.82
64	5.02	4.60	3.73	3.04
65	5.56	5.10	4.10	3.30
66	6.20	5.68	4.54	3.61
67	6.94	6.34	5.04	4.01
68	7.75	7.06	5.62	4.48
69	8.66	7.85	6.28	5.02
70	9.65	8.71	7.00	5.63
71	10.72	9.66	7.78	6.28
72	11.87	10.69	8.63	6.97
73	13.09	11.80	9.54	7.72
74	14.36	12.98	10.50	8.50
75	15.72	14.26	11.53	9.34
76	17.20	15.64	12.65	10.24
77	18.80	17.12	13.86	11.22
78	20.54	18.73	15.18	12.30
79	22.40	20.44	16.58	13.45
80	24.38	22.26	18.06	14.65
81	26.48	24.18	19.66	15.97
82	28.69	26.22	21.32	17.34
83	31.03	28.37	23.08	18.76
84	33.48	30.62	24.92	20.28

TO OBTAIN QUARTERLY, SEMIANNUAL, AND ANNUAL PREMIUMS, MULTIPLY THE ABOVE QUOTED PREMIUMS BY 3, 6, AND 12 , RESPECTIVELY. THE MONTHLY PREMIUMS FOR BANK SERVICE PLAN AND PAYROLL DEDUCTION ISSUES ARE THE PREMIUMS LISTED ABOVE.

Date: 04/26/2017

MUTUAL OF OMAHA INSURANCE COMPANY
SCHEDULE OF MONTHLY RATES FOR POLICY FORMS
NH50-Series 19242 and NH50-Series 19410
PER \$10 DAILY CONFINED CARE BENEFIT

BENEFIT -- 3 YEARS

Issue Age	ELIMINATION PERIODS			
	0 Day	20 Day	100 Day	365 Day
18-39	1.08	1.00	0.83	0.70
40	1.12	1.03	0.86	0.72
41	1.18	1.07	0.89	0.74
42	1.22	1.12	0.94	0.77
43	1.30	1.18	0.97	0.80
44	1.36	1.24	1.02	0.85
45	1.42	1.31	1.06	0.86
46	1.50	1.38	1.12	0.91
47	1.60	1.46	1.18	0.95
48	1.68	1.55	1.25	1.01
49	1.79	1.64	1.33	1.08
50	1.90	1.74	1.40	1.13
51	2.03	1.86	1.49	1.19
52	2.17	1.99	1.60	1.30
53	2.34	2.14	1.72	1.39
54	2.51	2.30	1.86	1.50
55	2.70	2.47	2.00	1.62
56	2.92	2.68	2.16	1.75
57	3.18	2.92	2.36	1.91
58	3.47	3.17	2.56	2.08
59	3.77	3.46	2.78	2.23
60	4.12	3.78	3.04	2.44
61	4.52	4.15	3.34	2.68
62	5.00	4.60	3.67	2.93
63	5.56	5.08	4.07	3.28
64	6.14	5.59	4.52	3.65
65	6.82	6.18	5.02	4.06
66	7.58	6.85	5.56	4.51
67	8.47	7.66	6.18	4.99
68	9.46	8.57	6.84	5.46
69	10.55	9.59	7.56	5.96
70	11.74	10.72	8.34	6.49
71	13.06	11.93	9.22	7.12
72	14.48	13.26	10.20	7.85
73	16.04	14.70	11.32	8.72
74	17.74	16.24	12.55	9.70
75	19.54	17.89	13.87	10.75
76	21.44	19.61	15.28	11.89
77	23.46	21.42	16.73	13.07
78	25.58	23.30	18.24	14.28
79	27.83	25.26	19.84	15.58
80	30.17	27.30	21.48	16.90
81	32.62	29.42	23.20	18.28
82	35.20	31.62	25.00	19.75
83	37.86	33.90	26.86	21.28
84	40.66	36.28	28.78	22.84

TO OBTAIN QUARTERLY, SEMIANNUAL, AND ANNUAL PREMIUMS, MULTIPLY THE ABOVE QUOTED PREMIUMS BY 3, 6, AND 12 , RESPECTIVELY. THE MONTHLY PREMIUMS FOR BANK SERVICE PLAN AND PAYROLL DEDUCTION ISSUES ARE THE PREMIUMS LISTED ABOVE.

Date: 04/26/2017

MUTUAL OF OMAHA INSURANCE COMPANY
SCHEDULE OF MONTHLY RATES FOR POLICY FORMS
NH50-Series 19242 and NH50-Series 19410
PER \$10 DAILY CONFINED CARE BENEFIT

BENEFIT -- 5 YEARS

Issue Age	ELIMINATION PERIODS			
	0 Day	20 Day	100 Day	365 Day
18-39	1.43	1.32	1.06	0.85
40	1.47	1.36	1.10	0.90
41	1.54	1.44	1.13	0.90
42	1.63	1.51	1.19	0.94
43	1.69	1.58	1.24	0.98
44	1.78	1.66	1.31	1.03
45	1.89	1.76	1.39	1.10
46	2.00	1.85	1.47	1.18
47	2.12	1.97	1.56	1.24
48	2.26	2.09	1.66	1.32
49	2.39	2.22	1.76	1.40
50	2.55	2.35	1.87	1.50
51	2.73	2.51	2.00	1.60
52	2.93	2.71	2.16	1.72
53	3.16	2.92	2.33	1.87
54	3.41	3.16	2.53	2.02
55	3.69	3.41	2.75	2.22
56	4.00	3.71	2.98	2.40
57	4.36	4.04	3.26	2.63
58	4.73	4.40	3.54	2.84
59	5.15	4.80	3.83	3.06
60	5.61	5.20	4.14	3.29
61	6.14	5.70	4.53	3.59
62	6.79	6.28	4.99	3.97
63	7.52	6.94	5.53	4.41
64	8.34	7.67	6.14	4.93
65	9.24	8.47	6.81	5.48
66	10.27	9.39	7.57	6.08
67	11.44	10.44	8.43	6.79
68	12.75	11.61	9.36	7.55
69	14.17	12.87	10.36	8.34
70	15.72	14.27	11.47	9.23
71	17.42	15.82	12.69	10.21
72	19.29	17.50	14.04	11.24
73	21.34	19.38	15.49	12.39
74	23.55	21.38	17.05	13.60
75	25.92	23.55	18.73	14.91
76	28.42	25.85	20.54	16.31
77	31.08	28.27	22.44	17.81
78	33.88	30.83	24.46	19.42
79	36.83	33.53	26.59	21.10
80	39.92	36.36	28.83	22.88
81	43.18	39.31	31.20	24.75
82	46.57	42.42	33.66	26.71
83	50.11	45.65	36.25	28.79
84	53.79	49.02	38.93	30.93

TO OBTAIN QUARTERLY, SEMIANNUAL, AND ANNUAL PREMIUMS, MULTIPLY THE ABOVE QUOTED PREMIUMS BY 3, 6, AND 12, RESPECTIVELY. THE MONTHLY PREMIUMS FOR BANK SERVICE PLAN AND PAYROLL DEDUCTION ISSUES ARE THE PREMIUMS LISTED ABOVE.

R25388-44-4

Date: 04/26/2017

MUTUAL OF OMAHA INSURANCE COMPANY
SCHEDULE OF MONTHLY RATES FOR POLICY FORMS
NH50-Series 19242 and NH50-Series 19410
PER \$10 DAILY CONFINED CARE BENEFIT

Issue Age	BENEFITS -- LIFETIME			
	ELIMINATION PERIODS			
	0 Day	20 Day	100 Day	365 Day
18-39	3.25	3.11	2.43	1.91
40	3.39	3.22	2.54	2.00
41	3.58	3.39	2.66	2.09
42	3.75	3.58	2.81	2.23
43	3.98	3.80	2.98	2.35
44	4.24	4.05	3.22	2.51
45	4.57	4.37	3.44	2.73
46	4.88	4.68	3.70	2.94
47	5.20	4.99	3.97	3.15
48	5.59	5.31	4.22	3.34
49	5.99	5.67	4.50	3.59
50	6.38	6.01	4.78	3.80
51	6.83	6.37	5.08	4.05
52	7.29	6.76	5.42	4.32
53	7.74	7.14	5.74	4.60
54	8.11	7.52	6.04	4.88
55	8.58	7.88	6.38	5.20
56	9.12	8.34	6.82	5.54
57	9.80	8.96	7.29	5.92
58	10.58	9.66	7.83	6.37
59	11.45	10.42	8.41	6.76
60	12.44	11.27	9.05	7.29
61	13.60	12.29	9.87	7.91
62	15.00	13.55	10.82	8.64
63	16.61	15.00	11.96	9.57
64	18.38	16.63	13.27	10.58
65	20.37	18.45	14.77	11.81
66	22.54	20.47	16.39	13.09
67	24.97	22.69	18.12	14.46
68	27.65	25.12	20.00	15.94
69	30.49	27.74	21.99	17.42
70	33.57	30.58	24.15	19.08
71	36.93	33.65	26.54	20.92
72	40.61	37.03	29.14	22.93
73	44.61	40.74	32.03	25.13
74	48.89	44.67	35.08	27.57
75	53.48	48.89	38.42	30.21
76	58.36	53.43	41.96	32.95
77	63.50	58.29	45.78	35.98
78	68.97	63.49	49.86	39.18
79	74.70	68.98	54.20	42.60
80	80.72	74.81	58.77	46.18
81	87.07	80.98	63.62	49.98
82	93.68	87.40	68.70	53.97
83	100.57	94.20	74.01	58.16
84	107.80	101.29	79.59	62.53

TO OBTAIN QUARTERLY, SEMIANNUAL, AND ANNUAL PREMIUMS, MULTIPLY THE ABOVE QUOTED PREMIUMS BY 3, 6, AND 12, RESPECTIVELY. THE MONTHLY PREMIUMS FOR BANK SERVICE PLAN AND PAYROLL DEDUCTION ISSUES ARE THE PREMIUMS LISTED ABOVE.
R25388-44-4

Date: 04/26/2017

MUTUAL OF OMAHA INSURANCE COMPANY
SCHEDULE OF MONTHLY RATES FOR RIDER FORM 0DX6M

PER \$10 DAILY CONFINED CARE BENEFIT

BENEFIT -- 1 YEAR

IssueAge	ELIMINATION PERIODS			
	0 Day	20 Day	100 Day	365 Day
18-39	1.04	1.00	0.92	0.86
40	1.08	1.02	0.95	0.89
41	1.12	1.04	0.97	0.90
42	1.14	1.09	1.00	0.90
43	1.18	1.12	1.01	0.92
44	1.22	1.14	1.03	0.94
45	1.26	1.18	1.07	0.97
46	1.31	1.22	1.08	0.96
47	1.37	1.28	1.12	0.98
48	1.44	1.36	1.18	1.01
49	1.52	1.43	1.22	1.04
50	1.60	1.51	1.28	1.09
51	1.69	1.60	1.36	1.14
52	1.78	1.68	1.42	1.18
53	1.85	1.74	1.48	1.25
54	1.94	1.81	1.54	1.30
55	2.02	1.90	1.60	1.33
56	2.10	1.96	1.66	1.39
57	2.21	2.04	1.72	1.45
58	2.30	2.14	1.79	1.50
59	2.42	2.22	1.88	1.60
60	2.53	2.32	1.96	1.64
61	2.64	2.44	2.03	1.70
62	2.78	2.54	2.12	1.78
63	2.90	2.66	2.20	1.82
64	3.04	2.76	2.26	1.85
65	3.16	2.92	2.35	1.90
66	3.31	3.05	2.44	1.93
67	3.50	3.20	2.56	2.03
68	3.72	3.40	2.70	2.15
69	3.97	3.61	2.88	2.30
70	4.25	3.84	3.10	2.50
71	4.51	4.07	3.29	2.66
72	4.75	4.27	3.46	2.78
73	4.92	4.44	3.60	2.92
74	5.08	4.60	3.70	2.99
75	5.21	4.73	3.82	3.08
76	5.38	4.87	3.94	3.17
77	5.53	5.03	4.07	3.29
78	5.74	5.20	4.22	3.43
79	5.92	5.40	4.37	3.53
80	6.13	5.60	4.54	3.68
81	6.34	5.80	4.72	3.85
82	6.58	6.02	4.90	4.00
83	6.82	6.24	5.08	4.14
84	7.07	6.48	5.28	4.30

TO OBTAIN QUARTERLY, SEMIANNUAL, AND ANNUAL PREMIUMS, MULTIPLY THE ABOVE QUOTED PREMIUMS BY 3, 6, AND 12, RESPECTIVELY. THE MONTHLY PREMIUMS FOR BANK SERVICE PLAN AND PAYROLL DEDUCTION ISSUES ARE THE PREMIUMS LISTED ABOVE .

R25388-44-3

Date: 04/26/2017

MUTUAL OF OMAHA INSURANCE COMPANY
SCHEDULE OF MONTHLY RATES FOR RIDER FORM 0DX6M

PER \$10 DAILY CONFINED CARE BENEFIT

BENEFIT -- 2 YEARS

Issue Age	ELIMINATION PERIODS			
	0 Day	20 day	100 Day	365 Day
18-39	1.69	1.61	1.40	1.22
40	1.74	1.66	1.45	1.26
41	1.80	1.72	1.49	1.30
42	1.87	1.78	1.54	1.34
43	1.94	1.84	1.58	1.36
44	2.02	1.90	1.62	1.38
45	2.09	1.98	1.67	1.42
46	2.20	2.05	1.72	1.43
47	2.28	2.15	1.78	1.46
48	2.38	2.23	1.86	1.55
49	2.48	2.33	1.94	1.62
50	2.59	2.45	2.03	1.69
51	2.72	2.56	2.14	1.78
52	2.86	2.68	2.23	1.86
53	2.99	2.82	2.35	1.96
54	3.16	2.95	2.48	2.09
55	3.34	3.10	2.62	2.20
56	3.49	3.26	2.74	2.30
57	3.70	3.41	2.89	2.45
58	3.88	3.59	3.04	2.56
59	4.10	3.76	3.17	2.68
60	4.30	3.95	3.34	2.82
61	4.54	4.15	3.47	2.90
62	4.78	4.37	3.64	3.04
63	5.02	4.58	3.78	3.12
64	5.26	4.80	3.94	3.22
65	5.51	5.05	4.07	3.28
66	5.80	5.32	4.24	3.38
67	6.14	5.62	4.48	3.56
68	6.58	6.00	4.78	3.80
69	7.07	6.42	5.14	4.10
70	7.60	6.88	5.51	4.42
71	8.10	7.30	5.88	4.73
72	8.52	7.67	6.19	4.99
73	8.82	7.96	6.42	5.18
74	9.05	8.17	6.61	5.35
75	9.25	8.38	6.78	5.48
76	9.47	8.62	6.96	5.62
77	9.77	8.89	7.20	5.83
78	10.14	9.24	7.48	6.06
79	10.56	9.64	7.81	6.34
80	11.02	10.06	8.16	6.64
81	11.50	10.52	8.53	6.92
82	12.05	11.02	8.94	7.25
83	12.64	11.53	9.40	7.66
84	13.25	12.10	9.85	8.02

TO OBTAIN QUARTERLY, SEMIANNUAL, AND ANNUAL PREMIUMS, MULTIPLY THE ABOVE QUOTED PREMIUMS BY 3, 6, AND 12 , RESPECTIVELY. THE MONTHLY PREMIUMS FOR BANK SERVICE PLAN AND PAYROLL DEDUCTION ISSUES ARE THE PREMIUMS LISTED ABOVE.

R25388-44-3

Date: 04/26/2017

MUTUAL OF OMAHA INSURANCE COMPANY
SCHEDULE OF MONTHLY RATES FOR RIDER FORM 0DX6M

PER \$10 DAILY CONFINED CARE BENEFIT

BENEFIT -- 3 YEARS

Issue Age	ELIMINATION PERIODS			
	0 Day	20 Day	100 Day	365 Day
18-39	2.44	2.21	1.84	1.54
40	2.51	2.29	1.90	1.57
41	2.58	2.38	1.97	1.64
42	2.68	2.45	2.03	1.68
43	2.75	2.53	2.09	1.73
44	2.84	2.62	2.14	1.73
45	2.94	2.68	2.20	1.80
46	3.04	2.77	2.27	1.86
47	3.14	2.88	2.34	1.90
48	3.28	2.99	2.42	1.96
49	3.40	3.11	2.51	2.02
50	3.55	3.25	2.62	2.11
51	3.70	3.38	2.74	2.21
52	3.88	3.54	2.86	2.29
53	4.02	3.70	2.98	2.39
54	4.20	3.83	3.10	2.51
55	4.39	4.00	3.24	2.62
56	4.60	4.18	3.40	2.77
57	4.80	4.37	3.55	2.89
58	5.03	4.60	3.72	3.01
59	5.27	4.82	3.90	3.16
60	5.54	5.08	4.08	3.28
61	5.80	5.34	4.27	3.42
62	6.11	5.62	4.49	3.60
63	6.41	5.88	4.72	3.79
64	6.76	6.16	4.96	4.01
65	7.10	6.43	5.21	4.22
66	7.48	6.76	5.50	4.46
67	7.90	7.14	5.77	4.67
68	8.41	7.61	6.10	4.90
69	8.98	8.15	6.44	5.09
70	9.58	8.74	6.82	5.32
71	10.18	9.30	7.18	5.54
72	10.70	9.79	7.54	5.80
73	11.16	10.21	7.86	6.05
74	11.56	10.60	8.17	6.30
75	11.96	10.96	8.48	6.58
76	12.37	11.32	8.80	6.84
77	12.85	11.74	9.16	7.15
78	13.39	12.19	9.54	7.46
79	13.96	12.67	9.94	7.80
80	14.57	13.18	10.37	8.16
81	15.22	13.72	10.84	8.56
82	15.89	14.28	11.28	8.92
83	16.61	14.87	11.77	9.31
84	17.35	15.47	12.26	9.71

TO OBTAIN QUARTERLY, SEMIANNUAL, AND ANNUAL PREMIUMS, MULTIPLY THE ABOVE QUOTED PREMIUMS BY 3, 6, AND 12, RESPECTIVELY. THE MONTHLY PREMIUMS FOR BANK SERVICE PLAN AND PAYROLL DEDUCTION ISSUES ARE THE PREMIUMS LISTED ABOVE.

R25388-44-3

Date: 04/26/2017

MUTUAL OF OMAHA INSURANCE COMPANY
SCHEDULE OF MONTHLY RATES FOR RIDER FORM 0DX6M

PER \$10 DAILY CONFINED CARE BENEFIT

BENEFIT -- 5 YEARS

Issue Age	ELIMINATION PERIODS			
	0 Day	20 Day	100 Day	365 Day
18-39	3.48	3.23	2.62	2.10
40	3.58	3.34	2.65	2.10
41	3.69	3.43	2.73	2.17
42	3.82	3.54	2.82	2.22
43	3.95	3.67	2.90	2.30
44	4.09	3.81	3.01	2.39
45	4.27	3.94	3.12	2.49
46	4.40	4.10	3.23	2.55
47	4.60	4.25	3.38	2.68
48	4.77	4.41	3.50	2.77
49	4.96	4.60	3.64	2.89
50	5.15	4.76	3.78	3.01
51	5.36	4.96	3.95	3.15
52	5.60	5.17	4.11	3.28
53	5.85	5.41	4.31	3.43
54	6.12	5.65	4.53	3.64
55	6.39	5.93	4.75	3.81
56	6.69	6.20	4.99	4.02
57	6.99	6.49	5.23	4.20
58	7.30	6.78	5.46	4.40
59	7.63	7.06	5.67	4.55
60	7.96	7.38	5.90	4.71
61	8.33	7.72	6.14	4.88
62	8.73	8.10	6.41	5.08
63	9.17	8.46	6.74	5.39
64	9.64	8.87	7.11	5.68
65	10.15	9.31	7.46	5.98
66	10.68	9.76	7.88	6.36
67	11.29	10.27	8.29	6.69
68	11.94	10.87	8.76	7.05
69	12.67	11.53	9.28	7.50
70	13.44	12.20	9.81	7.90
71	14.17	12.86	10.32	8.27
72	14.85	13.46	10.80	8.65
73	15.43	13.98	11.20	8.97
74	15.93	14.47	11.55	9.22
75	16.42	14.92	11.89	9.48
76	16.94	15.39	12.22	9.71
77	17.53	15.95	12.65	10.04
78	18.17	16.54	13.11	10.41
79	18.87	17.16	13.62	10.80
80	19.60	17.84	14.17	11.23
81	20.37	18.56	14.72	11.68
82	21.19	19.29	15.31	12.16
83	22.04	20.09	15.95	12.65
84	22.95	20.90	16.62	13.22

TO OBTAIN QUARTERLY, SEMIANNUAL, AND ANNUAL PREMIUMS, MULTIPLY THE ABOVE QUOTED PREMIUMS BY 3, 6, AND 12, RESPECTIVELY. THE MONTHLY PREMIUMS FOR BANK SERVICE PLAN AND PAYROLL DEDUCTION ISSUES ARE THE PREMIUMS LISTED ABOVE.

R25388-44-3

Date: 04/26/2017

MUTUAL OF OMAHA INSURANCE COMPANY
SCHEDULE DF MONTHLY RATES FOR RIDER FORM 0DX6M

PER \$10 DAILY CONFINED CARE BENEFIT

Issue Age	BENEFITS -- LIFETIME			
	ELIMINATION PERIODS			
	0 Day	20 Day	100 Day	365 Day
18-39	7.32	6.94	5.41	4.21
40	7.49	7.11	5.54	4.32
41	7.71	7.32	5.75	4.52
42	7.97	7.57	5.95	4.71
43	8.27	7.89	6.24	4.93
44	8.66	8.29	6.55	5.20
45	9.06	8.72	6.88	5.43
46	9.49	9.11	7.23	5.75
47	9.92	9.49	7.55	5.99
48	10.32	9.88	7.85	6.24
49	10.79	10.21	8.11	6.45
50	11.22	10.54	8.42	6.71
51	11.64	10.86	8.67	6.94
52	12.03	11.14	8.94	7.18
53	12.30	11.34	9.13	7.36
54	12.51	11.52	9.31	7.51
55	12.65	11.64	9.46	7.70
56	12.92	11.84	9.66	7.87
57	13.25	12.12	9.89	8.06
58	13.66	12.45	10.15	8.27
59	14.14	12.86	10.45	8.48
60	14.72	13.34	10.75	8.66
61	15.34	13.90	11.10	8.88
62	16.02	14.46	11.56	9.26
63	16.77	15.20	12.12	9.67
64	17.60	15.94	12.73	10.21
65	18.51	16.78	13.43	10.74
66	19.49	17.69	14.14	11.31
67	20.53	18.64	14.89	11.88
68	21.62	19.67	15.67	12.43
69	22.85	20.81	16.48	13.09
70	24.09	21.97	17.38	13.74
71	25.30	23.08	18.17	14.30
72	26.38	24.09	18.93	14.87
73	27.25	24.90	19.58	15.37
74	28.03	25.61	20.14	15.81
75	28.72	26.30	20.64	16.17
76	29.47	26.99	21.23	16.69
77	30.36	27.86	21.92	17.24
78	31.38	28.91	22.71	17.85
79	32.51	30.00	23.58	18.51
80	33.71	31.21	24.52	19.27
81	34.94	32.50	25.51	20.06
82	36.26	33.85	26.59	20.88
83	37.67	35.33	27.72	21.76
84	39.16	36.87	28.94	22.71

TO OBTAIN QUARTERLY, SEMIANNUAL, AND ANNUAL PREMIUMS, MULTIPLY THE ABOVE QUOTED PREMIUMS BY 3, 6, AND 12, RESPECTIVELY. THE MONTHLY PREMIUMS FOR BANK SERVICE PLAN AND PAYROLL DEDUCTION ISSUES ARE THE PREMIUMS LISTED ABOVE.

R25388-44-3

Date: 04/26/2017

MUTUAL OF OMAHA INSURANCE COMPANY
SCHEDULE OF MONTHLY RATES FOR RIDER FORM 0DX6M

PER \$10 DAILY CONFINED CARE BENEFIT

BENEFIT -- 1 YEAR

IssueAge	ELIMINATION PERIODS			
	0 Day	20 Day	100 Day	365 Day
18-39	1.04	1.00	0.92	0.86
40	1.08	1.02	0.95	0.89
41	1.12	1.04	0.97	0.90
42	1.14	1.09	1.00	0.90
43	1.18	1.12	1.01	0.92
44	1.22	1.14	1.03	0.94
45	1.26	1.18	1.07	0.97
46	1.31	1.22	1.08	0.96
47	1.37	1.28	1.12	0.98
48	1.44	1.36	1.18	1.01
49	1.52	1.43	1.22	1.04
50	1.60	1.51	1.28	1.09
51	1.69	1.60	1.36	1.14
52	1.78	1.68	1.42	1.18
53	1.85	1.74	1.48	1.25
54	1.94	1.81	1.54	1.30
55	2.02	1.90	1.60	1.33
56	2.10	1.96	1.66	1.39
57	2.21	2.04	1.72	1.45
58	2.30	2.14	1.79	1.50
59	2.42	2.22	1.88	1.60
60	2.53	2.32	1.96	1.64
61	2.64	2.44	2.03	1.70
62	2.78	2.54	2.12	1.78
63	2.90	2.66	2.20	1.82
64	3.04	2.76	2.26	1.85
65	3.16	2.92	2.35	1.90
66	3.31	3.05	2.44	1.93
67	3.50	3.20	2.56	2.03
68	3.72	3.40	2.70	2.15
69	3.97	3.61	2.88	2.30
70	4.25	3.84	3.10	2.50
71	4.51	4.07	3.29	2.66
72	4.75	4.27	3.46	2.78
73	4.92	4.44	3.60	2.92
74	5.08	4.60	3.70	2.99
75	5.21	4.73	3.82	3.08
76	5.38	4.87	3.94	3.17
77	5.53	5.03	4.07	3.29
78	5.74	5.20	4.22	3.43
79	5.92	5.40	4.37	3.53
80	6.13	5.60	4.54	3.68
81	6.34	5.80	4.72	3.85
82	6.58	6.02	4.90	4.00
83	6.82	6.24	5.08	4.14
84	7.07	6.48	5.28	4.30

TO OBTAIN QUARTERLY, SEMIANNUAL, AND ANNUAL PREMIUMS, MULTIPLY THE ABOVE QUOTED PREMIUMS BY 3, 6, AND 12, RESPECTIVELY. THE MONTHLY PREMIUMS FOR BANK SERVICE PLAN AND PAYROLL DEDUCTION ISSUES ARE THE PREMIUMS LISTED ABOVE .

R25388-44-4

Date: 04/26/2017

MUTUAL OF OMAHA INSURANCE COMPANY
SCHEDULE OF MONTHLY RATES FOR RIDER FORM 0DX6M

PER \$10 DAILY CONFINED CARE BENEFIT

BENEFIT -- 2 YEARS

Issue Age	ELIMINATION PERIODS			
	0 Day	20 day	100 Day	365 Day
18-39	1.69	1.61	1.40	1.22
40	1.74	1.66	1.45	1.26
41	1.80	1.72	1.49	1.30
42	1.87	1.78	1.54	1.34
43	1.94	1.84	1.58	1.36
44	2.02	1.90	1.62	1.38
45	2.09	1.98	1.67	1.42
46	2.20	2.05	1.72	1.43
47	2.28	2.15	1.78	1.46
48	2.38	2.23	1.86	1.55
49	2.48	2.33	1.94	1.62
50	2.59	2.45	2.03	1.69
51	2.72	2.56	2.14	1.78
52	2.86	2.68	2.23	1.86
53	2.99	2.82	2.35	1.96
54	3.16	2.95	2.48	2.09
55	3.34	3.10	2.62	2.20
56	3.49	3.26	2.74	2.30
57	3.70	3.41	2.89	2.45
58	3.88	3.59	3.04	2.56
59	4.10	3.76	3.17	2.68
60	4.30	3.95	3.34	2.82
61	4.54	4.15	3.47	2.90
62	4.78	4.37	3.64	3.04
63	5.02	4.58	3.78	3.12
64	5.26	4.80	3.94	3.22
65	5.51	5.05	4.07	3.28
66	5.80	5.32	4.24	3.38
67	6.14	5.62	4.48	3.56
68	6.58	6.00	4.78	3.80
69	7.07	6.42	5.14	4.10
70	7.60	6.88	5.51	4.42
71	8.10	7.30	5.88	4.73
72	8.52	7.67	6.19	4.99
73	8.82	7.96	6.42	5.18
74	9.05	8.17	6.61	5.35
75	9.25	8.38	6.78	5.48
76	9.47	8.62	6.96	5.62
77	9.77	8.89	7.20	5.83
78	10.14	9.24	7.48	6.06
79	10.56	9.64	7.81	6.34
80	11.02	10.06	8.16	6.64
81	11.50	10.52	8.53	6.92
82	12.05	11.02	8.94	7.25
83	12.64	11.53	9.40	7.66
84	13.25	12.10	9.85	8.02

TO OBTAIN QUARTERLY, SEMIANNUAL, AND ANNUAL PREMIUMS, MULTIPLY THE ABOVE QUOTED PREMIUMS BY 3, 6, AND 12 , RESPECTIVELY. THE MONTHLY PREMIUMS FOR BANK SERVICE PLAN AND PAYROLL DEDUCTION ISSUES ARE THE PREMIUMS LISTED ABOVE.

R25388-44-4

Date: 04/26/2017

MUTUAL OF OMAHA INSURANCE COMPANY
SCHEDULE OF MONTHLY RATES FOR RIDER FORM 0DX6M

PER \$10 DAILY CONFINED CARE BENEFIT

BENEFIT -- 3 YEARS

Issue Age	ELIMINATION PERIODS			
	0 Day	20 Day	100 Day	365 Day
18-39	2.44	2.21	1.84	1.54
40	2.51	2.29	1.90	1.57
41	2.58	2.38	1.97	1.64
42	2.68	2.45	2.03	1.68
43	2.75	2.53	2.09	1.73
44	2.84	2.62	2.14	1.73
45	2.94	2.68	2.20	1.80
46	3.04	2.77	2.27	1.86
47	3.14	2.88	2.34	1.90
48	3.28	2.99	2.42	1.96
49	3.40	3.11	2.51	2.02
50	3.55	3.25	2.62	2.11
51	3.70	3.38	2.74	2.21
52	3.88	3.54	2.86	2.29
53	4.02	3.70	2.98	2.39
54	4.20	3.83	3.10	2.51
55	4.39	4.00	3.24	2.62
56	4.60	4.18	3.40	2.77
57	4.80	4.37	3.55	2.89
58	5.03	4.60	3.72	3.01
59	5.27	4.82	3.90	3.16
60	5.54	5.08	4.08	3.28
61	5.80	5.34	4.27	3.42
62	6.11	5.62	4.49	3.60
63	6.41	5.88	4.72	3.79
64	6.76	6.16	4.96	4.01
65	7.10	6.43	5.21	4.22
66	7.48	6.76	5.50	4.46
67	7.90	7.14	5.77	4.67
68	8.41	7.61	6.10	4.90
69	8.98	8.15	6.44	5.09
70	9.58	8.74	6.82	5.32
71	10.18	9.30	7.18	5.54
72	10.70	9.79	7.54	5.80
73	11.16	10.21	7.86	6.05
74	11.56	10.60	8.17	6.30
75	11.96	10.96	8.48	6.58
76	12.37	11.32	8.80	6.84
77	12.85	11.74	9.16	7.15
78	13.39	12.19	9.54	7.46
79	13.96	12.67	9.94	7.80
80	14.57	13.18	10.37	8.16
81	15.22	13.72	10.84	8.56
82	15.89	14.28	11.28	8.92
83	16.61	14.87	11.77	9.31
84	17.35	15.47	12.26	9.71

TO OBTAIN QUARTERLY, SEMIANNUAL, AND ANNUAL PREMIUMS, MULTIPLY THE ABOVE QUOTED PREMIUMS BY 3, 6, AND 12, RESPECTIVELY. THE MONTHLY PREMIUMS FOR BANK SERVICE PLAN AND PAYROLL DEDUCTION ISSUES ARE THE PREMIUMS LISTED ABOVE.

R25388-44-4

Date: 04/26/2017

MUTUAL OF OMAHA INSURANCE COMPANY
SCHEDULE OF MONTHLY RATES FOR RIDER FORM 0DX6M

PER \$10 DAILY CONFINED CARE BENEFIT

BENEFIT -- 5 YEARS

Issue Age	ELIMINATION PERIODS			
	0 Day	20 Day	100 Day	365 Day
18-39	3.48	3.23	2.62	2.10
40	3.58	3.34	2.65	2.10
41	3.69	3.43	2.73	2.17
42	3.82	3.54	2.82	2.22
43	3.95	3.67	2.90	2.30
44	4.09	3.81	3.01	2.39
45	4.27	3.94	3.12	2.49
46	4.40	4.10	3.23	2.55
47	4.60	4.25	3.38	2.68
48	4.77	4.41	3.50	2.77
49	4.96	4.60	3.64	2.89
50	5.15	4.76	3.78	3.01
51	5.36	4.96	3.95	3.15
52	5.60	5.17	4.11	3.28
53	5.85	5.41	4.31	3.43
54	6.12	5.65	4.53	3.64
55	6.39	5.93	4.75	3.81
56	6.69	6.20	4.99	4.02
57	6.99	6.49	5.23	4.20
58	7.30	6.78	5.46	4.40
59	7.63	7.06	5.67	4.55
60	7.96	7.38	5.90	4.71
61	8.33	7.72	6.14	4.88
62	8.73	8.10	6.41	5.08
63	9.17	8.46	6.74	5.39
64	9.64	8.87	7.11	5.68
65	10.15	9.31	7.46	5.98
66	10.68	9.76	7.88	6.36
67	11.29	10.27	8.29	6.69
68	11.94	10.87	8.76	7.05
69	12.67	11.53	9.28	7.50
70	13.44	12.20	9.81	7.90
71	14.17	12.86	10.32	8.27
72	14.85	13.46	10.80	8.65
73	15.43	13.98	11.20	8.97
74	15.93	14.47	11.55	9.22
75	16.42	14.92	11.89	9.48
76	16.94	15.39	12.22	9.71
77	17.53	15.95	12.65	10.04
78	18.17	16.54	13.11	10.41
79	18.87	17.16	13.62	10.80
80	19.60	17.84	14.17	11.23
81	20.37	18.56	14.72	11.68
82	21.19	19.29	15.31	12.16
83	22.04	20.09	15.95	12.65
84	22.95	20.90	16.62	13.22

TO OBTAIN QUARTERLY, SEMIANNUAL, AND ANNUAL PREMIUMS, MULTIPLY THE ABOVE QUOTED PREMIUMS BY 3, 6, AND 12, RESPECTIVELY. THE MONTHLY PREMIUMS FOR BANK SERVICE PLAN AND PAYROLL DEDUCTION ISSUES ARE THE PREMIUMS LISTED ABOVE.

R25388-44-4

Date: 04/26/2017

MUTUAL OF OMAHA INSURANCE COMPANY
SCHEDULE DF MONTHLY RATES FOR RIDER FORM 0DX6M

PER \$10 DAILY CONFINED CARE BENEFIT

Issue Age	BENEFITS -- LIFETIME			
	ELIMINATION PERIODS			
	0 Day	20 Day	100 Day	365 Day
18-39	8.42	7.98	6.22	4.84
40	8.61	8.18	6.37	4.97
41	8.87	8.42	6.61	5.20
42	9.17	8.71	6.84	5.42
43	9.51	9.07	7.18	5.67
44	9.96	9.53	7.53	5.98
45	10.42	10.03	7.91	6.24
46	10.91	10.48	8.31	6.61
47	11.41	10.91	8.68	6.89
48	11.87	11.36	9.03	7.18
49	12.41	11.74	9.33	7.42
50	12.90	12.12	9.68	7.72
51	13.39	12.49	9.97	7.98
52	13.83	12.81	10.28	8.26
53	14.15	13.04	10.50	8.46
54	14.39	13.25	10.71	8.64
55	14.55	13.39	10.88	8.86
56	14.86	13.62	11.11	9.05
57	15.24	13.94	11.37	9.27
58	15.71	14.32	11.67	9.51
59	16.26	14.79	12.02	9.75
60	16.93	15.34	12.36	9.96
61	17.64	15.99	12.77	10.21
62	18.42	16.63	13.29	10.65
63	19.29	17.48	13.94	11.12
64	20.24	18.33	14.64	11.74
65	21.29	19.30	15.44	12.35
66	22.41	20.34	16.26	13.01
67	23.61	21.44	17.12	13.66
68	24.86	22.62	18.02	14.29
69	26.28	23.93	18.95	15.05
70	27.70	25.27	19.99	15.80
71	29.10	26.54	20.90	16.45
72	30.34	27.70	21.77	17.10
73	31.34	28.64	22.52	17.68
74	32.23	29.45	23.16	18.18
75	33.03	30.25	23.74	18.60
76	33.89	31.04	24.41	19.19
77	34.91	32.04	25.21	19.83
78	36.09	33.25	26.12	20.53
79	37.39	34.50	27.12	21.29
80	38.77	35.89	28.20	22.16
81	40.18	37.38	29.34	23.07
82	41.70	38.93	30.58	24.01
83	43.32	40.63	31.88	25.02
84	45.03	42.40	33.28	26.12

TO OBTAIN QUARTERLY, SEMIANNUAL, AND ANNUAL PREMIUMS, MULTIPLY THE ABOVE QUOTED PREMIUMS BY 3, 6, AND 12, RESPECTIVELY. THE MONTHLY PREMIUMS FOR BANK SERVICE PLAN AND PAYROLL DEDUCTION ISSUES ARE THE PREMIUMS LISTED ABOVE.

R25388-44-4

MUTUAL OF OMAHA INSURANCE COMPANY

INDIVIDUAL HOME HEALTH CARE POLICY FORMS HCA-19629 & HCA-20249
ANNUAL PREMIUM RATES - Effective September 1, 2017

Per \$10 Daily Benefit

Per \$1 Gross Premium

Age	Home Health Care Policy Forms HCA-19629 and HCA-20249		Confined Care Rider Forms 0GH1M-44 & 0GH1M-44 Rev					5% Compound Inflation Rider Form 0GH3M	Shortened Benefit Period Rider Form 0GH5M-44
	20 Day Elim	0 Day Elim	20 Day Elim	90 Day Elim	180 Day Elim	365 Day Elim			
18-50	29.52	14.64	13.92	10.92	9.72	7.68		1.37	0.19
51	31.56	15.60	14.76	11.64	10.32	8.28		1.32	0.18
52	33.72	16.56	15.72	12.48	11.04	8.88		1.27	0.17
53	36.24	17.76	16.92	13.44	11.76	9.36		1.23	0.16
54	39.00	19.08	18.12	14.52	12.72	10.20		1.17	0.16
55	42.00	20.64	19.56	15.72	13.80	11.04		1.12	0.16
56	45.00	22.44	21.24	17.04	15.00	12.00		1.08	0.16
57	48.36	24.36	23.16	18.60	16.44	13.08		1.03	0.15
58	51.36	26.64	25.44	20.28	17.88	14.28		0.99	0.15
59	54.72	29.16	27.84	22.08	19.56	15.60		0.96	0.15
60	58.44	32.04	30.60	24.24	21.48	17.16		0.92	0.14
61	62.88	35.40	33.72	26.76	23.64	18.96		0.90	0.14
62	67.56	39.00	37.08	29.40	25.92	20.88		0.86	0.14
63	73.80	43.20	40.92	32.76	28.92	23.28		0.82	0.14
64	80.64	48.12	45.24	36.36	32.16	25.92		0.78	0.13
65	88.32	53.52	50.16	40.44	35.76	28.80		0.74	0.13
66	96.96	59.64	55.80	45.00	39.84	32.04		0.69	0.12
67	106.56	66.60	62.16	50.04	44.40	35.76		0.65	0.12
68	116.28	74.40	69.60	55.20	48.84	39.36		0.62	0.12
69	127.20	83.04	77.88	61.08	54.00	43.56		0.59	0.11
70	139.44	92.64	87.24	67.68	59.88	48.24		0.55	0.11
71	152.88	103.32	97.56	75.12	66.36	53.52		0.52	0.10
72	167.64	114.96	108.96	83.28	73.80	59.52		0.49	0.10
73	184.44	127.44	120.84	92.52	81.96	66.12		0.46	0.10
74	202.56	140.88	133.68	102.72	91.08	73.44		0.43	0.10
75	222.48	155.16	147.12	113.52	100.56	81.24		0.40	0.09
76	243.60	170.40	161.40	125.04	110.76	89.40		0.37	0.09
77	266.16	186.48	176.28	137.16	121.56	98.16		0.34	0.09
78	290.16	203.52	191.76	149.76	132.72	107.16		0.32	0.09
79	315.48	221.28	207.96	162.96	144.36	116.52		0.30	0.08
80	342.24	240.00	224.64	176.52	156.48	126.36		0.28	0.08
81	370.32	259.44	241.92	190.44	168.72	136.20		0.26	0.07
82	399.84	279.84	259.68	204.72	181.44	146.40		0.25	0.07
83	430.56	300.96	277.92	219.24	194.28	156.72		0.23	0.06
84	462.72	322.80	296.52	234.00	207.36	167.28		0.22	0.06
85	483.96	339.60	312.00	245.88	217.92	175.92		0.20	0.05
86	504.84	357.24	328.20	258.36	229.32	185.16		0.20	0.05
87	525.12	376.56	345.72	271.92	241.92	195.36		0.18	0.04
88	544.80	397.32	364.80	286.56	255.48	206.52		0.17	0.04
89	564.00	419.28	384.96	302.04	270.00	218.28		0.16	0.04
90	594.84	442.20	405.96	318.24	284.40	229.92		0.15	0.03
91	627.36	466.32	427.92	335.16	299.52	242.16		0.14	0.03
92	661.20	491.52	450.96	352.80	315.24	254.88		0.13	0.03
93	696.48	517.80	474.96	371.28	331.56	267.96		0.13	0.02
94	733.20	545.04	499.92	390.36	348.60	281.88		0.12	0.02
95	771.24	573.36	525.96	410.28	366.48	296.28		0.11	0.02
96	811.08	602.88	552.84	430.92	384.84	311.04		0.11	0.02
97	852.12	633.36	580.80	452.40	403.92	326.40		0.10	0.02
98	894.60	665.04	609.72	474.48	423.60	342.24		0.09	0.02
99+	938.64	697.68	639.60	497.40	443.88	358.80		0.09	0.01

Rates for ages 84+ are available only for the Guarantee Purchase Benefit Option.

\$20 Policy Fee payable first year only.

If Tax Qualified Amendment Rider Form 0GH6M-44 Rev elected, premium will be reduced 15%.

If the policy is issued to an individual and spouse that: (a) reside together and (b) are both covered under Forms HCA-19629, HCA-20249, NHA-19630 or NHA-20250, then Spouse Premium

Reduction Rider 0GH9M will be attached and the premium will be reduced 10%.

To calculate premiums for a specific benefit period, apply the appropriate factors to the above premiums.

Benefit Period	Factor	2013 Increase Factor	2014 Increase Factor	2017 Increase Factor
1 year	0.55	1.200	1.000	1.000
2 year	0.80	1.200	1.000	1.000
3 year	1.00	1.200	1.000	1.000
5 year	1.25	1.200	1.100	1.000
Lifetime	1.45	1.300	1.200	1.300

To calculate premiums for a specific mode, apply the appropriate factor to the above premiums.

Modal Loads	Factor
Annual	1.000
Semi-Annual	0.520
Quarterly	0.260
Monthly/BSP	0.087

MUTUAL OF OMAHA INSURANCE COMPANY

INDIVIDUAL CONFINED CARE POLICY FORMS NHA-19630 & NHA-20250
ANNUAL PREMIUM RATES - Effective September 1, 2017

Per \$10 Daily Benefit

Per \$1 Gross Premium

Home Health Care Rider Forms OGH7M-44 & OGH7M-44 Rev		Confined Care Policy Forms NHA-19630 & NHA-20250						5% Compound Inflation Rider Form OGH3M	Shortened Benefit Period Rider Form OGH5M-44
Age	20 Day Elim	0 Day Elim	20 Day Elim	90 Day Elim	180 Day Elim	365 Day Elim			
18-50	17.16	26.04	24.84	20.28	18.36	15.24		1.37	0.19
51	18.24	27.72	26.52	21.72	19.44	16.32		1.32	0.18
52	19.68	29.52	28.20	23.16	20.88	17.52		1.27	0.17
53	21.12	31.80	30.24	24.84	22.32	18.60		1.23	0.16
54	22.68	34.08	32.64	26.88	24.24	20.16		1.17	0.16
55	24.36	36.84	35.16	29.04	26.16	21.84		1.12	0.16
56	26.16	39.84	37.92	31.56	28.44	23.64		1.08	0.16
57	27.96	43.32	41.28	34.32	30.96	25.68		1.03	0.15
58	29.64	47.16	45.24	37.08	33.48	27.84		0.99	0.15
59	31.44	51.60	49.44	40.44	36.48	30.36		0.96	0.15
60	33.60	56.40	54.12	44.16	39.84	33.12		0.92	0.14
61	36.00	62.04	59.28	48.60	43.68	36.48		0.90	0.14
62	38.52	68.16	65.16	53.28	47.88	39.96		0.86	0.14
63	42.00	75.48	71.76	59.16	53.28	44.40		0.82	0.14
64	45.84	83.64	79.32	65.52	58.92	49.20		0.78	0.13
65	50.16	93.12	87.84	72.72	65.52	54.60		0.74	0.13
66	54.96	103.68	97.56	80.76	72.72	60.60		0.69	0.12
67	60.12	115.44	108.48	89.76	80.76	67.32		0.65	0.12
68	65.52	128.52	121.08	98.76	88.92	74.04		0.62	0.12
69	71.52	143.28	135.24	109.08	98.16	81.84		0.59	0.11
70	78.24	159.60	151.20	120.84	108.72	90.60		0.55	0.11
71	85.68	177.72	168.72	133.68	120.24	100.32		0.52	0.10
72	93.72	197.40	188.04	148.20	133.44	111.24		0.49	0.10
73	102.96	218.76	208.44	164.52	147.96	123.36		0.46	0.10
74	113.04	241.56	230.28	182.28	164.16	136.80		0.43	0.10
75	123.96	266.16	253.56	201.24	181.08	151.08		0.40	0.09
76	135.72	292.20	278.04	221.64	199.44	166.20		0.37	0.09
77	148.20	319.68	303.72	242.88	218.52	182.28		0.34	0.09
78	161.52	348.72	330.60	265.32	238.68	198.96		0.32	0.09
79	175.68	379.32	358.56	288.48	259.56	216.36		0.30	0.08
80	190.56	411.48	387.60	312.60	281.40	234.48		0.28	0.08
81	206.28	444.84	417.48	337.32	303.60	252.96		0.26	0.07
82	222.72	479.64	448.44	362.88	326.64	272.16		0.25	0.07
83	240.00	515.88	480.12	388.92	350.16	291.60		0.23	0.06
84	257.88	553.56	512.76	415.44	373.92	311.64		0.22	0.06
85	269.76	582.48	539.40	436.44	392.76	327.48		0.20	0.05
86	281.40	612.72	567.48	458.64	412.80	344.04		0.20	0.05
87	292.68	645.60	597.96	482.88	434.64	362.16		0.18	0.04
88	303.72	681.36	630.84	508.92	457.92	381.72		0.17	0.04
89	314.40	719.04	665.64	536.28	482.64	402.24		0.16	0.04
90	331.56	758.40	701.88	564.96	508.56	423.72		0.15	0.03
91	349.68	799.80	740.04	595.08	535.56	446.40		0.14	0.03
92	368.52	842.88	779.88	626.52	563.76	469.92		0.13	0.03
93	388.20	887.88	821.40	659.04	593.16	494.28		0.13	0.02
94	408.72	934.80	864.48	693.12	623.76	519.96		0.12	0.02
95	429.96	983.28	909.60	728.64	655.68	546.48		0.11	0.02
96	452.04	1033.92	955.92	765.24	688.80	573.84		0.11	0.02
97	474.96	1086.24	1004.28	803.16	722.88	602.40		0.10	0.02
98	498.60	1140.36	1054.32	842.52	758.40	631.80		0.09	0.02
99+	523.08	1196.52	1106.16	883.20	794.76	662.40		0.09	0.01

For October 2003 and later, rates for ages 80+ are available only for the Guarantee Purchase Benefit Option. For previously sold Inforce policies, this applies to ages 85+.

\$20 Policy Fee payable first year only.

If Tax Qualified Amendment Rider Form OGH6M-44 Rev elected, premium will be reduced 15%.

If the policy is issued to an individual and spouse that: (a) reside together and (b) are both covered under Forms HCA-19629, HCA-20249, NHA-19630 or NHA-20250, then Spouse Premium Reduction Rider OGH9M will be attached and the premium will be reduced 10%.

To calculate premiums for a specific benefit period, apply the appropriate factors to the above premiums.

Benefit Period	Factor	2013 Increase Factor	2014 Increase Factor	2017 Increase Factor
1 year	0.55	1.200	1.000	1.000
2 year	0.80	1.200	1.000	1.000
3 year	1.00	1.200	1.000	1.000
5 year	1.25	1.200	1.100	1.000
Lifetime	1.45	1.300	1.200	1.300

To calculate premiums for a specific mode, apply the appropriate factor to the above premiums.

Modal Loads	Factor
Annual	1.000
Semi-Annual	0.520
Quarterly	0.260
Monthly/BSP	0.087

MUTUAL OF OMAHA INSURANCE COMPANY

COUPLES CONFINED CARE POLICY FORMS LTA-19631 & LTA-20251
ANNUAL PREMIUM RATES - Effective September 1, 2017

Per \$10 Daily Benefit

Per \$1 Gross Premium

Home Health Care Rider Forms OGH8M-44 & OGH8M-44 Rev			Confined Care Policy Forms LTA-19631 & LTA-20251				5% Compound Inflation Rider Form OGH4M	Shortened Benefit Period Rider Form OGH5M-44
Age	20 Day Elim	0 Day Elim	20 Day Elim	90 Day Elim	180 Day Elim	365 Day Elim		
18-50	18.00	27.72	26.40	21.48	19.32	16.08	1.14	0.19
51	19.20	29.40	28.08	23.04	20.64	17.28	1.11	0.18
52	20.52	31.20	29.88	24.48	21.96	18.48	1.08	0.17
53	21.96	33.48	31.92	26.40	23.64	19.80	1.04	0.16
54	23.64	36.00	34.32	28.44	25.56	21.36	0.99	0.16
55	25.20	38.76	36.96	30.60	27.60	23.04	0.95	0.16
56	27.12	41.88	39.96	33.12	29.76	24.84	0.91	0.16
57	28.92	45.36	43.32	36.00	32.40	27.00	0.87	0.15
58	30.60	49.20	47.16	38.76	34.92	29.04	0.83	0.15
59	32.52	53.64	51.36	42.12	37.92	31.56	0.81	0.15
60	34.56	58.68	56.28	46.08	41.52	34.56	0.77	0.14
61	36.96	64.20	61.44	50.28	45.24	37.68	0.74	0.14
62	39.36	70.44	67.32	55.08	49.56	41.28	0.71	0.14
63	42.72	77.76	73.92	60.84	54.72	45.72	0.68	0.14
64	46.44	86.04	81.48	67.32	60.60	50.52	0.64	0.13
65	50.52	95.28	89.88	74.64	67.20	55.92	0.62	0.13
66	55.08	105.84	99.60	82.44	74.28	61.80	0.58	0.12
67	60.12	117.48	110.40	91.20	82.20	68.40	0.55	0.12
68	65.04	130.20	122.64	99.96	90.00	74.88	0.51	0.12
69	70.68	144.60	136.56	110.04	99.12	82.44	0.48	0.11
70	76.80	160.44	151.92	121.44	109.32	91.08	0.45	0.11
71	83.64	177.72	168.84	133.92	120.48	100.44	0.43	0.10
72	91.20	196.68	187.32	147.48	132.72	110.76	0.40	0.10
73	99.84	216.84	206.76	163.08	146.88	122.28	0.38	0.10
74	109.08	238.44	227.28	179.76	161.76	134.88	0.36	0.10
75	118.92	261.24	249.00	197.52	177.72	148.20	0.34	0.09
76	129.36	285.48	271.68	216.36	194.76	162.24	0.32	0.09
77	140.52	310.80	295.20	236.04	212.52	177.12	0.30	0.09
78	151.92	337.20	319.56	256.32	230.64	192.36	0.28	0.09
79	164.04	364.68	344.76	277.32	249.60	207.96	0.27	0.08
80	176.40	393.48	370.56	299.04	269.16	224.28	0.25	0.08
81	189.24	423.24	397.20	321.00	288.96	240.72	0.23	0.07
82	202.32	453.72	424.20	343.44	309.12	257.52	0.21	0.07
83	215.64	485.40	451.80	365.88	329.28	274.56	0.19	0.06
84	229.32	517.80	479.52	388.56	349.80	291.48	0.18	0.06
85	239.88	542.52	502.20	406.56	365.88	304.92	0.15	0.05
86	250.20	567.96	525.96	425.16	382.68	318.84	0.14	0.05
87	260.28	595.68	551.76	445.32	400.80	333.96	0.13	0.04
88	270.00	625.68	579.60	467.16	420.48	350.40	0.11	0.04
89	279.60	657.00	608.64	490.20	441.12	367.80	0.11	0.04
90	294.84	689.64	639.36	513.96	462.48	385.44	0.09	0.03
91	310.92	723.72	671.16	538.80	484.80	404.04	0.08	0.03
92	327.72	759.24	704.28	564.60	508.20	423.48	0.08	0.03
93	345.24	796.20	738.84	591.48	532.44	443.64	0.07	0.02
94	363.36	834.24	774.60	619.44	557.40	464.52	0.06	0.02
95	382.32	874.08	811.92	648.36	583.44	486.24	0.06	0.02
96	402.00	914.88	850.44	678.00	610.20	508.56	0.05	0.02
97	422.28	957.48	890.28	708.84	637.92	531.60	0.04	0.02
98	443.40	1001.28	931.44	740.76	666.60	555.60	0.04	0.02
99+	465.24	1046.52	973.92	773.52	696.24	580.08	0.04	0.01

For October 2003 and later, rates for ages 80+ are available only for the Guarantee Purchase Benefit Option. For previously sold Inforce policies, this applies to ages 85+.

\$15 Policy Fee per insured (\$30 per couple) payable first year only.

If Tax Qualified Amendment Rider Form OGH6M-44 Rev elected, premium will be reduced 15%.

To calculate premiums for a specific benefit period, apply the appropriate factors to the above premiums.

Benefit Period	Factor	2013 Increase Factor	2014 Increase Factor	2017 Increase Factor
1 year	0.55	1.200	1.000	1.000
2 year	0.80	1.200	1.000	1.000
3 year	1.00	1.200	1.000	1.000
5 year	1.25	1.200	1.100	1.000
Lifetime	1.45	1.300	1.200	1.300

To calculate premiums for a specific mode, apply the appropriate factor to the above premiums.

Modal Loads	Factor
Annual	1.000
Semi-Annual	0.520
Quarterly	0.260
Monthly/BSP	0.087

MUTUAL OF OMAHA INSURANCE COMPANY

INDIVIDUAL HOME HEALTH CARE POLICY FORMS HCA-19629 & HCA-20249
ANNUAL PREMIUM RATES - Effective September 1, 2018

Per \$10 Daily Benefit

Per \$1 Gross Premium

Home Health Care Policy Forms HCA-19629 and HCA-20249			Confined Care Rider Forms 0GH1M-44 & 0GH1M-44 Rev				5% Compound Inflation Rider	Shortened Benefit Period Rider
Age	20 Day Elim	0 Day Elim	20 Day Elim	90 Day Elim	180 Day Elim	365 Day Elim	Form 0GH3M	Form 0GH5M-44
18-50	29.52	14.64	13.92	10.92	9.72	7.68	1.37	0.19
51	31.56	15.60	14.76	11.64	10.32	8.28	1.32	0.18
52	33.72	16.56	15.72	12.48	11.04	8.88	1.27	0.17
53	36.24	17.76	16.92	13.44	11.76	9.36	1.23	0.16
54	39.00	19.08	18.12	14.52	12.72	10.20	1.17	0.16
55	42.00	20.64	19.56	15.72	13.80	11.04	1.12	0.16
56	45.00	22.44	21.24	17.04	15.00	12.00	1.08	0.16
57	48.36	24.36	23.16	18.60	16.44	13.08	1.03	0.15
58	51.36	26.64	25.44	20.28	17.88	14.28	0.99	0.15
59	54.72	29.16	27.84	22.08	19.56	15.60	0.96	0.15
60	58.44	32.04	30.60	24.24	21.48	17.16	0.92	0.14
61	62.88	35.40	33.72	26.76	23.64	18.96	0.90	0.14
62	67.56	39.00	37.08	29.40	25.92	20.88	0.86	0.14
63	73.80	43.20	40.92	32.76	28.92	23.28	0.82	0.14
64	80.64	48.12	45.24	36.36	32.16	25.92	0.78	0.13
65	88.32	53.52	50.16	40.44	35.76	28.80	0.74	0.13
66	96.96	59.64	55.80	45.00	39.84	32.04	0.69	0.12
67	106.56	66.60	62.16	50.04	44.40	35.76	0.65	0.12
68	116.28	74.40	69.60	55.20	48.84	39.36	0.62	0.12
69	127.20	83.04	77.88	61.08	54.00	43.56	0.59	0.11
70	139.44	92.64	87.24	67.68	59.88	48.24	0.55	0.11
71	152.88	103.32	97.56	75.12	66.36	53.52	0.52	0.10
72	167.64	114.96	108.96	83.28	73.80	59.52	0.49	0.10
73	184.44	127.44	120.84	92.52	81.96	66.12	0.46	0.10
74	202.56	140.88	133.68	102.72	91.08	73.44	0.43	0.10
75	222.48	155.16	147.12	113.52	100.56	81.24	0.40	0.09
76	243.60	170.40	161.40	125.04	110.76	89.40	0.37	0.09
77	266.16	186.48	176.28	137.16	121.56	98.16	0.34	0.09
78	290.16	203.52	191.76	149.76	132.72	107.16	0.32	0.09
79	315.48	221.28	207.96	162.96	144.36	116.52	0.30	0.08
80	342.24	240.00	224.64	176.52	156.48	126.36	0.28	0.08
81	370.32	259.44	241.92	190.44	168.72	136.20	0.26	0.07
82	399.84	279.84	259.68	204.72	181.44	146.40	0.25	0.07
83	430.56	300.96	277.92	219.24	194.28	156.72	0.23	0.06
84	462.72	322.80	296.52	234.00	207.36	167.28	0.22	0.06
85	483.96	339.60	312.00	245.88	217.92	175.92	0.20	0.05
86	504.84	357.24	328.20	258.36	229.32	185.16	0.20	0.05
87	525.12	376.56	345.72	271.92	241.92	195.36	0.18	0.04
88	544.80	397.32	364.80	286.56	255.48	206.52	0.17	0.04
89	564.00	419.28	384.96	302.04	270.00	218.28	0.16	0.04
90	594.84	442.20	405.96	318.24	284.40	229.92	0.15	0.03
91	627.36	466.32	427.92	335.16	299.52	242.16	0.14	0.03
92	661.20	491.52	450.96	352.80	315.24	254.88	0.13	0.03
93	696.48	517.80	474.96	371.28	331.56	267.96	0.13	0.02
94	733.20	545.04	499.92	390.36	348.60	281.88	0.12	0.02
95	771.24	573.36	525.96	410.28	366.48	296.28	0.11	0.02
96	811.08	602.88	552.84	430.92	384.84	311.04	0.11	0.02
97	852.12	633.36	580.80	452.40	403.92	326.40	0.10	0.02
98	894.60	665.04	609.72	474.48	423.60	342.24	0.09	0.02
99+	938.64	697.68	639.60	497.40	443.88	358.80	0.09	0.01

Rates for ages 84+ are available only for the Guarantee Purchase Benefit Option.

\$20 Policy Fee payable first year only.

If Tax Qualified Amendment Rider Form 0GH6M-44 Rev elected, premium will be reduced 15%.

If the policy is issued to an individual and spouse that: (a) reside together and (b) are both covered under Forms HCA-19629, HCA-20249, NHA-19630 or NHA-20250, then Spouse Premium

Reduction Rider 0GH9M will be attached and the premium will be reduced 10%.

To calculate premiums for a specific benefit period, apply the appropriate factors to the above premiums.

Benefit Period	Factor	2013 Increase Factor	2014 Increase Factor	2017 Increase Factor	2018 Increase Factor
1 year	0.55	1.200	1.000	1.000	1.000
2 year	0.80	1.200	1.000	1.000	1.000
3 year	1.00	1.200	1.000	1.000	1.000
5 year	1.25	1.200	1.100	1.000	1.000
Lifetime	1.45	1.300	1.200	1.300	1.150

To calculate premiums for a specific mode, apply the appropriate factor to the above premiums.

Modal Loads	Factor
Annual	1.000
Semi-Annual	0.520
Quarterly	0.260
Monthly/BSP	0.087

MUTUAL OF OMAHA INSURANCE COMPANY

INDIVIDUAL CONFINED CARE POLICY FORMS NHA-19630 & NHA-20250
ANNUAL PREMIUM RATES - Effective September 1, 2018

Per \$10 Daily Benefit

Per \$1 Gross Premium

Home Health Care Rider Forms OGH7M-44 & OGH7M-44 Rev		Confined Care Policy Forms NHA-19630 & NHA-20250						5% Compound Inflation Rider Form OGH3M	Shortened Benefit Period Rider Form OGH5M-44
Age	20 Day Elim	0 Day Elim	20 Day Elim	90 Day Elim	180 Day Elim	365 Day Elim			
18-50	17.16	26.04	24.84	20.28	18.36	15.24		1.37	0.19
51	18.24	27.72	26.52	21.72	19.44	16.32		1.32	0.18
52	19.68	29.52	28.20	23.16	20.88	17.52		1.27	0.17
53	21.12	31.80	30.24	24.84	22.32	18.60		1.23	0.16
54	22.68	34.08	32.64	26.88	24.24	20.16		1.17	0.16
55	24.36	36.84	35.16	29.04	26.16	21.84		1.12	0.16
56	26.16	39.84	37.92	31.56	28.44	23.64		1.08	0.16
57	27.96	43.32	41.28	34.32	30.96	25.68		1.03	0.15
58	29.64	47.16	45.24	37.08	33.48	27.84		0.99	0.15
59	31.44	51.60	49.44	40.44	36.48	30.36		0.96	0.15
60	33.60	56.40	54.12	44.16	39.84	33.12		0.92	0.14
61	36.00	62.04	59.28	48.60	43.68	36.48		0.90	0.14
62	38.52	68.16	65.16	53.28	47.88	39.96		0.86	0.14
63	42.00	75.48	71.76	59.16	53.28	44.40		0.82	0.14
64	45.84	83.64	79.32	65.52	58.92	49.20		0.78	0.13
65	50.16	93.12	87.84	72.72	65.52	54.60		0.74	0.13
66	54.96	103.68	97.56	80.76	72.72	60.60		0.69	0.12
67	60.12	115.44	108.48	89.76	80.76	67.32		0.65	0.12
68	65.52	128.52	121.08	98.76	88.92	74.04		0.62	0.12
69	71.52	143.28	135.24	109.08	98.16	81.84		0.59	0.11
70	78.24	159.60	151.20	120.84	108.72	90.60		0.55	0.11
71	85.68	177.72	168.72	133.68	120.24	100.32		0.52	0.10
72	93.72	197.40	188.04	148.20	133.44	111.24		0.49	0.10
73	102.96	218.76	208.44	164.52	147.96	123.36		0.46	0.10
74	113.04	241.56	230.28	182.28	164.16	136.80		0.43	0.10
75	123.96	266.16	253.56	201.24	181.08	151.08		0.40	0.09
76	135.72	292.20	278.04	221.64	199.44	166.20		0.37	0.09
77	148.20	319.68	303.72	242.88	218.52	182.28		0.34	0.09
78	161.52	348.72	330.60	265.32	238.68	198.96		0.32	0.09
79	175.68	379.32	358.56	288.48	259.56	216.36		0.30	0.08
80	190.56	411.48	387.60	312.60	281.40	234.48		0.28	0.08
81	206.28	444.84	417.48	337.32	303.60	252.96		0.26	0.07
82	222.72	479.64	448.44	362.88	326.64	272.16		0.25	0.07
83	240.00	515.88	480.12	388.92	350.16	291.60		0.23	0.06
84	257.88	553.56	512.76	415.44	373.92	311.64		0.22	0.06
85	269.76	582.48	539.40	436.44	392.76	327.48		0.20	0.05
86	281.40	612.72	567.48	458.64	412.80	344.04		0.20	0.05
87	292.68	645.60	597.96	482.88	434.64	362.16		0.18	0.04
88	303.72	681.36	630.84	508.92	457.92	381.72		0.17	0.04
89	314.40	719.04	665.64	536.28	482.64	402.24		0.16	0.04
90	331.56	758.40	701.88	564.96	508.56	423.72		0.15	0.03
91	349.68	799.80	740.04	595.08	535.56	446.40		0.14	0.03
92	368.52	842.88	779.88	626.52	563.76	469.92		0.13	0.03
93	388.20	887.88	821.40	659.04	593.16	494.28		0.13	0.02
94	408.72	934.80	864.48	693.12	623.76	519.96		0.12	0.02
95	429.96	983.28	909.60	728.64	655.68	546.48		0.11	0.02
96	452.04	1033.92	955.92	765.24	688.80	573.84		0.11	0.02
97	474.96	1086.24	1004.28	803.16	722.88	602.40		0.10	0.02
98	498.60	1140.36	1054.32	842.52	758.40	631.80		0.09	0.02
99+	523.08	1196.52	1106.16	883.20	794.76	662.40		0.09	0.01

For October 2003 and later, rates for ages 80+ are available only for the Guarantee Purchase Benefit Option. For previously sold Inforce policies, this applies to ages 85+.

\$20 Policy Fee payable first year only.

If Tax Qualified Amendment Rider Form OGH6M-44 Rev elected, premium will be reduced 15%.

If the policy is issued to an individual and spouse that: (a) reside together and (b) are both covered under Forms HCA-19629, HCA-20249, NHA-19630 or NHA-20250, then Spouse Premium Reduction Rider OGH9M will be attached and the premium will be reduced 10%.

To calculate premiums for a specific benefit period, apply the appropriate factors to the above premiums.

Benefit Period	Factor	2013 Increase Factor	2014 Increase Factor	2017 Increase Factor	2018 Increase Factor
1 year	0.55	1.200	1.000	1.000	1.000
2 year	0.80	1.200	1.000	1.000	1.000
3 year	1.00	1.200	1.000	1.000	1.000
5 year	1.25	1.200	1.100	1.000	1.000
Lifetime	1.45	1.300	1.200	1.300	1.150

To calculate premiums for a specific mode, apply the appropriate factor to the above premiums.

Modal Loads	Factor
Annual	1.000
Semi-Annual	0.520
Quarterly	0.260
Monthly/BSP	0.087

MUTUAL OF OMAHA INSURANCE COMPANY

COUPLES CONFINED CARE POLICY FORMS LTA-19631 & LTA-20251
ANNUAL PREMIUM RATES - Effective September 1, 2018

Per \$10 Daily Benefit

Per \$1 Gross Premium

Home Health Care Rider Forms OGH8M-44 & OGH8M-44 Rev		Confined Care Policy Forms LTA-19631 & LTA-20251						5% Compound Inflation Rider Form OGH4M	Shortened Benefit Period Rider Form OGH5M-44
Age	20 Day Elim	0 Day Elim	20 Day Elim	90 Day Elim	180 Day Elim	365 Day Elim			
18-50	18.00	27.72	26.40	21.48	19.32	16.08		1.14	0.19
51	19.20	29.40	28.08	23.04	20.64	17.28		1.11	0.18
52	20.52	31.20	29.88	24.48	21.96	18.48		1.08	0.17
53	21.96	33.48	31.92	26.40	23.64	19.80		1.04	0.16
54	23.64	36.00	34.32	28.44	25.56	21.36		0.99	0.16
55	25.20	38.76	36.96	30.60	27.60	23.04		0.95	0.16
56	27.12	41.88	39.96	33.12	29.76	24.84		0.91	0.16
57	28.92	45.36	43.32	36.00	32.40	27.00		0.87	0.15
58	30.60	49.20	47.16	38.76	34.92	29.04		0.83	0.15
59	32.52	53.64	51.36	42.12	37.92	31.56		0.81	0.15
60	34.56	58.68	56.28	46.08	41.52	34.56		0.77	0.14
61	36.96	64.20	61.44	50.28	45.24	37.68		0.74	0.14
62	39.36	70.44	67.32	55.08	49.56	41.28		0.71	0.14
63	42.72	77.76	73.92	60.84	54.72	45.72		0.68	0.14
64	46.44	86.04	81.48	67.32	60.60	50.52		0.64	0.13
65	50.52	95.28	89.88	74.64	67.20	55.92		0.62	0.13
66	55.08	105.84	99.60	82.44	74.28	61.80		0.58	0.12
67	60.12	117.48	110.40	91.20	82.20	68.40		0.55	0.12
68	65.04	130.20	122.64	99.96	90.00	74.88		0.51	0.12
69	70.68	144.60	136.56	110.04	99.12	82.44		0.48	0.11
70	76.80	160.44	151.92	121.44	109.32	91.08		0.45	0.11
71	83.64	177.72	168.84	133.92	120.48	100.44		0.43	0.10
72	91.20	196.68	187.32	147.48	132.72	110.76		0.40	0.10
73	99.84	216.84	206.76	163.08	146.88	122.28		0.38	0.10
74	109.08	238.44	227.28	179.76	161.76	134.88		0.36	0.10
75	118.92	261.24	249.00	197.52	177.72	148.20		0.34	0.09
76	129.36	285.48	271.68	216.36	194.76	162.24		0.32	0.09
77	140.52	310.80	295.20	236.04	212.52	177.12		0.30	0.09
78	151.92	337.20	319.56	256.32	230.64	192.36		0.28	0.09
79	164.04	364.68	344.76	277.32	249.60	207.96		0.27	0.08
80	176.40	393.48	370.56	299.04	269.16	224.28		0.25	0.08
81	189.24	423.24	397.20	321.00	288.96	240.72		0.23	0.07
82	202.32	453.72	424.20	343.44	309.12	257.52		0.21	0.07
83	215.64	485.40	451.80	365.88	329.28	274.56		0.19	0.06
84	229.32	517.80	479.52	388.56	349.80	291.48		0.18	0.06
85	239.88	542.52	502.20	406.56	365.88	304.92		0.15	0.05
86	250.20	567.96	525.96	425.16	382.68	318.84		0.14	0.05
87	260.28	595.68	551.76	445.32	400.80	333.96		0.13	0.04
88	270.00	625.68	579.60	467.16	420.48	350.40		0.11	0.04
89	279.60	657.00	608.64	490.20	441.12	367.80		0.11	0.04
90	294.84	689.64	639.36	513.96	462.48	385.44		0.09	0.03
91	310.92	723.72	671.16	538.80	484.80	404.04		0.08	0.03
92	327.72	759.24	704.28	564.60	508.20	423.48		0.08	0.03
93	345.24	796.20	738.84	591.48	532.44	443.64		0.07	0.02
94	363.36	834.24	774.60	619.44	557.40	464.52		0.06	0.02
95	382.32	874.08	811.92	648.36	583.44	486.24		0.06	0.02
96	402.00	914.88	850.44	678.00	610.20	508.56		0.05	0.02
97	422.28	957.48	890.28	708.84	637.92	531.60		0.04	0.02
98	443.40	1001.28	931.44	740.76	666.60	555.60		0.04	0.02
99+	465.24	1046.52	973.92	773.52	696.24	580.08		0.04	0.01

For October 2003 and later, rates for ages 80+ are available only for the Guarantee Purchase Benefit Option. For previously sold Inforce policies, this applies to ages 85+.

\$15 Policy Fee per insured (\$30 per couple) payable first year only.

If Tax Qualified Amendment Rider Form OGH6M-44 Rev elected, premium will be reduced 15%.

To calculate premiums for a specific benefit period, apply the appropriate factors to the above premiums.

Benefit Period	Factor	2013 Increase Factor	2014 Increase Factor	2017 Increase Factor	2018 Increase Factor
1 year	0.55	1.200	1.000	1.000	1.000
2 year	0.80	1.200	1.000	1.000	1.000
3 year	1.00	1.200	1.000	1.000	1.000
5 year	1.25	1.200	1.100	1.000	1.000
Lifetime	1.45	1.300	1.200	1.300	1.150

To calculate premiums for a specific mode, apply the appropriate factor to the above premiums.

Modal Loads	Factor
Annual	1.000
Semi-Annual	0.520
Quarterly	0.260
Monthly/BSP	0.087

MUTUAL of OMAHA INSURANCE COMPANY
Mutual of Omaha Plaza
Omaha, NE 68175
402 342 7600
mutualofomaha.com



<Month, Year>

Policyholder Name
Address
City, State, ZIP

Dear (Name of Insured):

We appreciate your business. Your long-term care insurance policy from Mutual of Omaha Insurance Company continues to provide valuable coverage that may help you pay for long-term care services. However, **due to the ever increasing cost of services**, the premiums received from this long-term care policy form no longer support expected claims. Therefore, the premium for this coverage is being adjusted. Be assured you are not being singled out. The adjustment is being applied uniformly to every person in your state with the same policy form and benefit period.

The Virginia Bureau of Insurance has approved an increase of 56% for policyholders with the lifetime benefit period, which will be implemented over a two-year period. The following represents the 2013 premium change of 30% for your coverage.

COVERAGE IDENTIFICATION	CURRENT «Mode» PREMIUM	NEW «Mode» PREMIUM	(INCREASE or DECREASE) AMOUNT	EFFECTIVE DATE
«CovID»	\$«CurrPrem»	\$«NewPrem»	\$«Difference»	«EffDate»

Your policy currently has a lifetime benefit period. Be aware that if you elect to keep the lifetime benefit, your premiums will increase to \$x,xxx.xx on xx/xx/2014, which reflects an additional increase in premium of 20%.

Please keep this notification of the change in premium for coverage ID (COV ID) with your other important insurance documents. Send no money now as a new premium notice will be sent to you prior to the effective date shown above.

We know an increase in premium is never welcome news. Adjusting the current benefits of your policy can help keep your premium similar to what you currently pay. The enclosed Policy Adjustment Offer provides the details. To accept this offer, simply sign the form and return it to us in the enclosed envelope.

There are other ways we can help keep your coverage affordable. If you would like to explore additional options, contact:

Customer Contact Center
1-877-845-0872

(Agent Name)
(Agent Phone#)

If you wish to keep your policy as it is now at the new premium, you do not need to do anything. Of course, you always have the option to forgo your policy altogether. If you elect to do so, our non-forfeiture benefit will provide you with a paid-up policy with reduced benefits.

We hope you'll take a moment to consider the reason you purchased a long-term care insurance policy from Mutual of Omaha Insurance Company and why it's more important than ever to have this valuable protection. With our history of financial strength and our commitment to serving our customers, you can be confident we'll be there when you need us, just as we have for over a century.

Sincerely,

Signature Block

MUTUAL OF OMAHA INSURANCE COMPANY

INDIVIDUAL HOME HEALTH CARE POLICY FORM HCA - Series 19629 and 20249
ANNUAL PREMIUM RATES - Effective December 1, 2016

Per \$10 Daily Benefit

Per \$1 Gross Premium

Home Health Care Policy Form HCA - Series 19629 and 20249			Confined Care Rider Form OGH1M			5% Compound Inflation Rider Form OGH3M	Shortened Benefit Period Rider Form OGH5M
Age	20 Day Elim	0 Day Elim	20 Day Elim	90 Day Elim	180 Day Elim	365 Day Elim	
18-50	29.52	14.64	13.92	10.92	9.72	7.68	1.37
51	31.56	15.60	14.76	11.64	10.32	8.28	1.32
52	33.72	16.56	15.72	12.48	11.04	8.88	1.27
53	36.24	17.76	16.92	13.44	11.76	9.36	1.23
54	39.00	19.08	18.12	14.52	12.72	10.20	1.17
55	42.00	20.64	19.56	15.72	13.80	11.04	1.12
56	45.00	22.44	21.24	17.04	15.00	12.00	1.08
57	48.36	24.36	23.16	18.60	16.44	13.08	1.03
58	51.36	26.64	25.44	20.28	17.88	14.28	0.99
59	54.72	29.16	27.84	22.08	19.56	15.60	0.96
60	58.44	32.04	30.60	24.24	21.48	17.16	0.92
61	62.88	35.40	33.72	26.76	23.64	18.96	0.90
62	67.56	39.00	37.08	29.40	25.92	20.88	0.86
63	73.80	43.20	40.92	32.76	28.92	23.28	0.82
64	80.64	48.12	45.24	36.36	32.16	25.92	0.78
65	88.32	53.52	50.16	40.44	35.76	28.80	0.74
66	96.96	59.64	55.80	45.00	39.84	32.04	0.69
67	106.56	66.60	62.16	50.04	44.40	35.76	0.65
68	116.28	74.40	69.60	55.20	48.84	39.36	0.62
69	127.20	83.04	77.88	61.08	54.00	43.56	0.59
70	139.44	92.64	87.24	67.68	59.88	48.24	0.55
71	152.88	103.32	97.56	75.12	66.36	53.52	0.52
72	167.64	114.96	108.96	83.28	73.80	59.52	0.49
73	184.44	127.44	120.84	92.52	81.96	66.12	0.46
74	202.56	140.88	133.68	102.72	91.08	73.44	0.43
75	222.48	155.16	147.12	113.52	100.56	81.24	0.40
76	243.60	170.40	161.40	125.04	110.76	89.40	0.37
77	266.16	186.48	176.28	137.16	121.56	98.16	0.34
78	290.16	203.52	191.76	149.76	132.72	107.16	0.32
79	315.48	221.28	207.96	162.96	144.36	116.52	0.30
80	342.24	240.00	224.64	176.52	156.48	126.36	0.28
81	370.32	259.44	241.92	190.44	168.72	136.20	0.26
82	399.84	279.84	259.68	204.72	181.44	146.40	0.25
83	430.56	300.96	277.92	219.24	194.28	156.72	0.23
84	462.72	322.80	296.52	234.00	207.36	167.28	0.22
85	483.96	339.60	312.00	245.88	217.92	175.92	0.20
86	504.84	357.24	328.20	258.36	229.32	185.16	0.20
87	525.12	376.56	345.72	271.92	241.92	195.36	0.18
88	544.80	397.32	364.80	286.56	255.48	206.52	0.17
89	564.00	419.28	384.96	302.04	270.00	218.28	0.16
90	594.84	442.20	405.96	318.24	284.40	229.92	0.15
91	627.36	466.32	427.92	335.16	299.52	242.16	0.14
92	661.20	491.52	450.96	352.80	315.24	254.88	0.13
93	696.48	517.80	474.96	371.28	331.56	267.96	0.13
94	733.20	545.04	499.92	390.36	348.60	281.88	0.12
95	771.24	573.36	525.96	410.28	366.48	296.28	0.11
96	811.08	602.88	552.84	430.92	384.84	311.04	0.11
97	852.12	633.36	580.80	452.40	403.92	326.40	0.10
98	894.60	665.04	609.72	474.48	423.60	342.24	0.09
99+	938.64	697.68	639.60	497.40	443.88	358.80	0.09

Rates for ages 84+ are available only for the Guarantee Purchase Benefit Option.

\$20 Policy Fee payable first year only.

If Tax Qualified Amendment Rider Form OGH6M elected, premium will be reduced 15%.

If the policy is issued to an individual and spouse that: (a) reside together and (b) are both covered under Form HCA or NHA, then Spouse Premium

Reduction Rider OGH9M will be attached and the premium will be reduced 10%.

To calculate premiums for a specific benefit period, apply the appropriate factors to the above premiums.

Benefit Period	Factor	2013 Increase Factor	2014 Increase Factor	2016 Increase Factor
1 year	0.55	1.200	1.000	1.000
2 year	0.80	1.200	1.000	1.000
3 year	1.00	1.200	1.000	1.000
5 year	1.25	1.200	1.100	1.000
Lifetime	1.45	1.300	1.200	1.300

To calculate premiums for a specific mode, apply the appropriate factor to the above premiums.

Modal Loads	Factor
Annual	1.000
Semi-Annual	0.520
Quarterly	0.260
Monthly/BSP	0.087

MUTUAL OF OMAHA INSURANCE COMPANY

INDIVIDUAL CONFINED CARE POLICY FORM NHA - Series 19630 and 20250
ANNUAL PREMIUM RATES - Effective December 1, 2016

Per \$10 Daily Benefit

Per \$1 Gross Premium

Age	Home Health Care Rider Form 0GH7M	Confined Care Policy Form NHA - Series 19630 and 20250				5% Compound Inflation Rider Form 0GH3M	Shortened Benefit Period Rider Form 0GH5M
	20 Day Elim	0 Day Elim	20 Day Elim	90 Day Elim	180 Day Elim	365 Day Elim	
18-50	17.16	26.04	24.84	20.28	18.36	15.24	1.37
51	18.24	27.72	26.52	21.72	19.44	16.32	1.32
52	19.68	29.52	28.20	23.16	20.88	17.52	1.27
53	21.12	31.80	30.24	24.84	22.32	18.60	1.23
54	22.68	34.08	32.64	26.88	24.24	20.16	1.17
55	24.36	36.84	35.16	29.04	26.16	21.84	1.12
56	26.16	39.84	37.92	31.56	28.44	23.64	1.08
57	27.96	43.32	41.28	34.32	30.96	25.68	1.03
58	29.64	47.16	45.24	37.08	33.48	27.84	0.99
59	31.44	51.60	49.44	40.44	36.48	30.36	0.96
60	33.60	56.40	54.12	44.16	39.84	33.12	0.92
61	36.00	62.04	59.28	48.60	43.68	36.48	0.90
62	38.52	68.16	65.16	53.28	47.88	39.96	0.86
63	42.00	75.48	71.76	59.16	53.28	44.40	0.82
64	45.84	83.64	79.32	65.52	58.92	49.20	0.78
65	50.16	93.12	87.84	72.72	65.52	54.60	0.74
66	54.96	103.68	97.56	80.76	72.72	60.60	0.69
67	60.12	115.44	108.48	89.76	80.76	67.32	0.65
68	65.52	128.52	121.08	98.76	88.92	74.04	0.62
69	71.52	143.28	135.24	109.08	98.16	81.84	0.59
70	78.24	159.60	151.20	120.84	108.72	90.60	0.55
71	85.68	177.72	168.72	133.68	120.24	100.32	0.52
72	93.72	197.40	188.04	148.20	133.44	111.24	0.49
73	102.96	218.76	208.44	164.52	147.96	123.36	0.46
74	113.04	241.56	230.28	182.28	164.16	136.80	0.43
75	123.96	266.16	253.56	201.24	181.08	151.08	0.40
76	135.72	292.20	278.04	221.64	199.44	166.20	0.37
77	148.20	319.68	303.72	242.88	218.52	182.28	0.34
78	161.52	348.72	330.60	265.32	238.68	198.96	0.32
79	175.68	379.32	358.56	288.48	259.56	216.36	0.30
80	190.56	411.48	387.60	312.60	281.40	234.48	0.28
81	206.28	444.84	417.48	337.32	303.60	252.96	0.26
82	222.72	479.64	448.44	362.88	326.64	272.16	0.25
83	240.00	515.88	480.12	388.92	350.16	291.60	0.23
84	257.88	553.56	512.76	415.44	373.92	311.64	0.22
85	269.76	582.48	539.40	436.44	392.76	327.48	0.20
86	281.40	612.72	567.48	458.64	412.80	344.04	0.20
87	292.68	645.60	597.96	482.88	434.64	362.16	0.18
88	303.72	681.36	630.84	508.92	457.92	381.72	0.17
89	314.40	719.04	665.64	536.28	482.64	402.24	0.16
90	331.56	758.40	701.88	564.96	508.56	423.72	0.15
91	349.68	799.80	740.04	595.08	535.56	446.40	0.14
92	368.52	842.88	779.88	626.52	563.76	469.92	0.13
93	388.20	887.88	821.40	659.04	593.16	494.28	0.13
94	408.72	934.80	864.48	693.12	623.76	519.96	0.12
95	429.96	983.28	909.60	728.64	655.68	546.48	0.11
96	452.04	1033.92	955.92	765.24	688.80	573.84	0.11
97	474.96	1086.24	1004.28	803.16	722.88	602.40	0.10
98	498.60	1140.36	1054.32	842.52	758.40	631.80	0.09
99+	523.08	1196.52	1106.16	883.20	794.76	662.40	0.09

For October 2003 and later, rates for ages 80+ are available only for the Guarantee Purchase Benefit Option. For previously sold Inforce policies, this applies to ages 85+.

\$20 Policy Fee payable first year only.

If Tax Qualified Amendment Rider Form 0GH6M elected, premium will be reduced 15%.

If the policy is issued to an individual and spouse that: (a) reside together and (b) are both covered under Form HCA or NHA, then Spouse Premium Reduction Rider 0GH9M will be attached and the premium will be reduced 10%.

To calculate premiums for a specific benefit period, apply the appropriate factors to the above premiums.

Benefit Period	Factor	2013 Increase Factor	2014 Increase Factor	2016 Increase Factor
1 year	0.55	1.200	1.000	1.000
2 year	0.80	1.200	1.000	1.000
3 year	1.00	1.200	1.000	1.000
5 year	1.25	1.200	1.100	1.000
Lifetime	1.45	1.300	1.200	1.300

To calculate premiums for a specific mode, apply the appropriate factor to the above premiums.

Modal Loads	Factor
Annual	1.000
Semi-Annual	0.520
Quarterly	0.260
Monthly/BSP	0.087

MUTUAL OF OMAHA INSURANCE COMPANY**COUPLES CONFINED CARE POLICY FORM LTA - Series 19631 and 20251
ANNUAL PREMIUM RATES - Effective December 1, 2016**

Per \$10 Daily Benefit

Per \$1 Gross Premium

Home Health Care Rider Form 0GH8M			Confined Care Policy Form LTA - Series 19631 and 20251				5% Compound Inflation Rider Form 0GH4M	Shortened Benefit Period Rider Form 0GH5M
Age	20 Day Elim	0 Day Elim	20 Day Elim	90 Day Elim	180 Day Elim	365 Day Elim		
18-50	18.00	27.72	26.40	21.48	19.32	16.08	1.14	0.19
51	19.20	29.40	28.08	23.04	20.64	17.28	1.11	0.18
52	20.52	31.20	29.88	24.48	21.96	18.48	1.08	0.17
53	21.96	33.48	31.92	26.40	23.64	19.80	1.04	0.16
54	23.64	36.00	34.32	28.44	25.56	21.36	0.99	0.16
55	25.20	38.76	36.96	30.60	27.60	23.04	0.95	0.16
56	27.12	41.88	39.96	33.12	29.76	24.84	0.91	0.16
57	28.92	45.36	43.32	36.00	32.40	27.00	0.87	0.15
58	30.60	49.20	47.16	38.76	34.92	29.04	0.83	0.15
59	32.52	53.64	51.36	42.12	37.92	31.56	0.81	0.15
60	34.56	58.68	56.28	46.08	41.52	34.56	0.77	0.14
61	36.96	64.20	61.44	50.28	45.24	37.68	0.74	0.14
62	39.36	70.44	67.32	55.08	49.56	41.28	0.71	0.14
63	42.72	77.76	73.92	60.84	54.72	45.72	0.68	0.14
64	46.44	86.04	81.48	67.32	60.60	50.52	0.64	0.13
65	50.52	95.28	89.88	74.64	67.20	55.92	0.62	0.13
66	55.08	105.84	99.60	82.44	74.28	61.80	0.58	0.12
67	60.12	117.48	110.40	91.20	82.20	68.40	0.55	0.12
68	65.04	130.20	122.64	99.96	90.00	74.88	0.51	0.12
69	70.68	144.60	136.56	110.04	99.12	82.44	0.48	0.11
70	76.80	160.44	151.92	121.44	109.32	91.08	0.45	0.11
71	83.64	177.72	168.84	133.92	120.48	100.44	0.43	0.10
72	91.20	196.68	187.32	147.48	132.72	110.76	0.40	0.10
73	99.84	216.84	206.76	163.08	146.88	122.28	0.38	0.10
74	109.08	238.44	227.28	179.76	161.76	134.88	0.36	0.10
75	118.92	261.24	249.00	197.52	177.72	148.20	0.34	0.09
76	129.36	285.48	271.68	216.36	194.76	162.24	0.32	0.09
77	140.52	310.80	295.20	236.04	212.52	177.12	0.30	0.09
78	151.92	337.20	319.56	256.32	230.64	192.36	0.28	0.09
79	164.04	364.68	344.76	277.32	249.60	207.96	0.27	0.08
80	176.40	393.48	370.56	299.04	269.16	224.28	0.25	0.08
81	189.24	423.24	397.20	321.00	288.96	240.72	0.23	0.07
82	202.32	453.72	424.20	343.44	309.12	257.52	0.21	0.07
83	215.64	485.40	451.80	365.88	329.28	274.56	0.19	0.06
84	229.32	517.80	479.52	388.56	349.80	291.48	0.18	0.06
85	239.88	542.52	502.20	406.56	365.88	304.92	0.15	0.05
86	250.20	567.96	525.96	425.16	382.68	318.84	0.14	0.05
87	260.28	595.68	551.76	445.32	400.80	333.96	0.13	0.04
88	270.00	625.68	579.60	467.16	420.48	350.40	0.11	0.04
89	279.60	657.00	608.64	490.20	441.12	367.80	0.11	0.04
90	294.84	689.64	639.36	513.96	462.48	385.44	0.09	0.03
91	310.92	723.72	671.16	538.80	484.80	404.04	0.08	0.03
92	327.72	759.24	704.28	564.60	508.20	423.48	0.08	0.03
93	345.24	796.20	738.84	591.48	532.44	443.64	0.07	0.02
94	363.36	834.24	774.60	619.44	557.40	464.52	0.06	0.02
95	382.32	874.08	811.92	648.36	583.44	486.24	0.06	0.02
96	402.00	914.88	850.44	678.00	610.20	508.56	0.05	0.02
97	422.28	957.48	890.28	708.84	637.92	531.60	0.04	0.02
98	443.40	1001.28	931.44	740.76	666.60	555.60	0.04	0.02
99+	465.24	1046.52	973.92	773.52	696.24	580.08	0.04	0.01

For October 2003 and later, rates for ages 80+ are available only for the Guarantee Purchase Benefit Option. For previously sold Inforce policies, this applies to ages 85+.

\$15 Policy Fee per insured (\$30 per couple) payable first year only.

If Tax Qualified Amendment Rider Form 0GH6M elected, premium will be reduced 15%.

To calculate premiums for a specific benefit period, apply the appropriate factors to the above premiums.

Benefit Period	Factor	2013 Increase Factor	2014 Increase Factor	2016 Increase Factor
1 year	0.55	1.200	1.000	1.000
2 year	0.80	1.200	1.000	1.000
3 year	1.00	1.200	1.000	1.000
5 year	1.25	1.200	1.100	1.000
Lifetime	1.45	1.300	1.200	1.300

To calculate premiums for a specific mode, apply the appropriate factor to the above premiums.

Modal Loads	Factor
Annual	1.000
Semi-Annual	0.520
Quarterly	0.260
Monthly/BSP	0.087

MUTUAL OF OMAHA INSURANCE COMPANY

INDIVIDUAL HOME HEALTH CARE POLICY FORM HCA - Series 19629 and 20249
ANNUAL PREMIUM RATES - Effective December 1, 2017

Per \$10 Daily Benefit

Per \$1 Gross Premium

Home Health Care Policy Form HCA - Series 19629 and 20249		Confined Care Rider Form OGH1M						5% Compound Inflation Rider Form OGH3M	Shortened Benefit Period Rider Form OGH5M
Age	20 Day Elim	0 Day Elim	20 Day Elim	90 Day Elim	180 Day Elim	365 Day Elim			
18-50	29.52	14.64	13.92	10.92	9.72	7.68		1.37	0.19
51	31.56	15.60	14.76	11.64	10.32	8.28		1.32	0.18
52	33.72	16.56	15.72	12.48	11.04	8.88		1.27	0.17
53	36.24	17.76	16.92	13.44	11.76	9.36		1.23	0.16
54	39.00	19.08	18.12	14.52	12.72	10.20		1.17	0.16
55	42.00	20.64	19.56	15.72	13.80	11.04		1.12	0.16
56	45.00	22.44	21.24	17.04	15.00	12.00		1.08	0.16
57	48.36	24.36	23.16	18.60	16.44	13.08		1.03	0.15
58	51.36	26.64	25.44	20.28	17.88	14.28		0.99	0.15
59	54.72	29.16	27.84	22.08	19.56	15.60		0.96	0.15
60	58.44	32.04	30.60	24.24	21.48	17.16		0.92	0.14
61	62.88	35.40	33.72	26.76	23.64	18.96		0.90	0.14
62	67.56	39.00	37.08	29.40	25.92	20.88		0.86	0.14
63	73.80	43.20	40.92	32.76	28.92	23.28		0.82	0.14
64	80.64	48.12	45.24	36.36	32.16	25.92		0.78	0.13
65	88.32	53.52	50.16	40.44	35.76	28.80		0.74	0.13
66	96.96	59.64	55.80	45.00	39.84	32.04		0.69	0.12
67	106.56	66.60	62.16	50.04	44.40	35.76		0.65	0.12
68	116.28	74.40	69.60	55.20	48.84	39.36		0.62	0.12
69	127.20	83.04	77.88	61.08	54.00	43.56		0.59	0.11
70	139.44	92.64	87.24	67.68	59.88	48.24		0.55	0.11
71	152.88	103.32	97.56	75.12	66.36	53.52		0.52	0.10
72	167.64	114.96	108.96	83.28	73.80	59.52		0.49	0.10
73	184.44	127.44	120.84	92.52	81.96	66.12		0.46	0.10
74	202.56	140.88	133.68	102.72	91.08	73.44		0.43	0.10
75	222.48	155.16	147.12	113.52	100.56	81.24		0.40	0.09
76	243.60	170.40	161.40	125.04	110.76	89.40		0.37	0.09
77	266.16	186.48	176.28	137.16	121.56	98.16		0.34	0.09
78	290.16	203.52	191.76	149.76	132.72	107.16		0.32	0.09
79	315.48	221.28	207.96	162.96	144.36	116.52		0.30	0.08
80	342.24	240.00	224.64	176.52	156.48	126.36		0.28	0.08
81	370.32	259.44	241.92	190.44	168.72	136.20		0.26	0.07
82	399.84	279.84	259.68	204.72	181.44	146.40		0.25	0.07
83	430.56	300.96	277.92	219.24	194.28	156.72		0.23	0.06
84	462.72	322.80	296.52	234.00	207.36	167.28		0.22	0.06
85	483.96	339.60	312.00	245.88	217.92	175.92		0.20	0.05
86	504.84	357.24	328.20	258.36	229.32	185.16		0.20	0.05
87	525.12	376.56	345.72	271.92	241.92	195.36		0.18	0.04
88	544.80	397.32	364.80	286.56	255.48	206.52		0.17	0.04
89	564.00	419.28	384.96	302.04	270.00	218.28		0.16	0.04
90	594.84	442.20	405.96	318.24	284.40	229.92		0.15	0.03
91	627.36	466.32	427.92	335.16	299.52	242.16		0.14	0.03
92	661.20	491.52	450.96	352.80	315.24	254.88		0.13	0.03
93	696.48	517.80	474.96	371.28	331.56	267.96		0.13	0.02
94	733.20	545.04	499.92	390.36	348.60	281.88		0.12	0.02
95	771.24	573.36	525.96	410.28	366.48	296.28		0.11	0.02
96	811.08	602.88	552.84	430.92	384.84	311.04		0.11	0.02
97	852.12	633.36	580.80	452.40	403.92	326.40		0.10	0.02
98	894.60	665.04	609.72	474.48	423.60	342.24		0.09	0.02
99+	938.64	697.68	639.60	497.40	443.88	358.80		0.09	0.01

Rates for ages 84+ are available only for the Guarantee Purchase Benefit Option.

\$20 Policy Fee payable first year only.

If Tax Qualified Amendment Rider Form OGH6M elected, premium will be reduced 15%.

If the policy is issued to an individual and spouse that: (a) reside together and (b) are both covered under Form HCA or NHA, then Spouse Premium

Reduction Rider OGH9M will be attached and the premium will be reduced 10%.

To calculate premiums for a specific benefit period, apply the appropriate factors to the above premiums.

Benefit Period	Factor	2013 Increase Factor	2014 Increase Factor	2016 Increase Factor	2017 Increase Factor
1 year	0.55	1.200	1.000	1.000	1.000
2 year	0.80	1.200	1.000	1.000	1.000
3 year	1.00	1.200	1.000	1.000	1.000
5 year	1.25	1.200	1.100	1.000	1.000
Lifetime	1.45	1.300	1.200	1.300	1.150

To calculate premiums for a specific mode, apply the appropriate factor to the above premiums.

Modal Loads	Factor
Annual	1.000
Semi-Annual	0.520
Quarterly	0.260
Monthly/BSP	0.087

MUTUAL OF OMAHA INSURANCE COMPANY

INDIVIDUAL CONFINED CARE POLICY FORM NHA - Series 19630 and 20250
ANNUAL PREMIUM RATES - Effective December 1, 2017

Per \$10 Daily Benefit

Per \$1 Gross Premium

Age	Home Health Care Rider Form OGH7M	Confined Care Policy Form NHA - Series 19630 and 20250				5% Compound Inflation Rider Form OGH3M	Shortened Benefit Period Rider Form OGH5M
	20 Day Elim	0 Day Elim	20 Day Elim	90 Day Elim	180 Day Elim	365 Day Elim	
18-50	17.16	26.04	24.84	20.28	18.36	15.24	1.37
51	18.24	27.72	26.52	21.72	19.44	16.32	1.32
52	19.68	29.52	28.20	23.16	20.88	17.52	1.27
53	21.12	31.80	30.24	24.84	22.32	18.60	1.23
54	22.68	34.08	32.64	26.88	24.24	20.16	1.17
55	24.36	36.84	35.16	29.04	26.16	21.84	1.12
56	26.16	39.84	37.92	31.56	28.44	23.64	1.08
57	27.96	43.32	41.28	34.32	30.96	25.68	1.03
58	29.64	47.16	45.24	37.08	33.48	27.84	0.99
59	31.44	51.60	49.44	40.44	36.48	30.36	0.96
60	33.60	56.40	54.12	44.16	39.84	33.12	0.92
61	36.00	62.04	59.28	48.60	43.68	36.48	0.90
62	38.52	68.16	65.16	53.28	47.88	39.96	0.86
63	42.00	75.48	71.76	59.16	53.28	44.40	0.82
64	45.84	83.64	79.32	65.52	58.92	49.20	0.78
65	50.16	93.12	87.84	72.72	65.52	54.60	0.74
66	54.96	103.68	97.56	80.76	72.72	60.60	0.69
67	60.12	115.44	108.48	89.76	80.76	67.32	0.65
68	65.52	128.52	121.08	98.76	88.92	74.04	0.62
69	71.52	143.28	135.24	109.08	98.16	81.84	0.59
70	78.24	159.60	151.20	120.84	108.72	90.60	0.55
71	85.68	177.72	168.72	133.68	120.24	100.32	0.52
72	93.72	197.40	188.04	148.20	133.44	111.24	0.49
73	102.96	218.76	208.44	164.52	147.96	123.36	0.46
74	113.04	241.56	230.28	182.28	164.16	136.80	0.43
75	123.96	266.16	253.56	201.24	181.08	151.08	0.40
76	135.72	292.20	278.04	221.64	199.44	166.20	0.37
77	148.20	319.68	303.72	242.88	218.52	182.28	0.34
78	161.52	348.72	330.60	265.32	238.68	198.96	0.32
79	175.68	379.32	358.56	288.48	259.56	216.36	0.30
80	190.56	411.48	387.60	312.60	281.40	234.48	0.28
81	206.28	444.84	417.48	337.32	303.60	252.96	0.26
82	222.72	479.64	448.44	362.88	326.64	272.16	0.25
83	240.00	515.88	480.12	388.92	350.16	291.60	0.23
84	257.88	553.56	512.76	415.44	373.92	311.64	0.22
85	269.76	582.48	539.40	436.44	392.76	327.48	0.20
86	281.40	612.72	567.48	458.64	412.80	344.04	0.20
87	292.68	645.60	597.96	482.88	434.64	362.16	0.18
88	303.72	681.36	630.84	508.92	457.92	381.72	0.17
89	314.40	719.04	665.64	536.28	482.64	402.24	0.16
90	331.56	758.40	701.88	564.96	508.56	423.72	0.15
91	349.68	799.80	740.04	595.08	535.56	446.40	0.14
92	368.52	842.88	779.88	626.52	563.76	469.92	0.13
93	388.20	887.88	821.40	659.04	593.16	494.28	0.13
94	408.72	934.80	864.48	693.12	623.76	519.96	0.12
95	429.96	983.28	909.60	728.64	655.68	546.48	0.11
96	452.04	1033.92	955.92	765.24	688.80	573.84	0.11
97	474.96	1086.24	1004.28	803.16	722.88	602.40	0.10
98	498.60	1140.36	1054.32	842.52	758.40	631.80	0.09
99+	523.08	1196.52	1106.16	883.20	794.76	662.40	0.09

For October 2003 and later, rates for ages 80+ are available only for the Guarantee Purchase Benefit Option. For previously sold Inforce policies, this applies to ages 85+.

\$20 Policy Fee payable first year only.

If Tax Qualified Amendment Rider Form OGH6M elected, premium will be reduced 15%.

If the policy is issued to an individual and spouse that: (a) reside together and (b) are both covered under Form HCA or NHA, then Spouse Premium

Reduction Rider OGH9M will be attached and the premium will be reduced 10%.

To calculate premiums for a specific benefit period, apply the appropriate factors to the above premiums.

Benefit Period	Factor	2013 Increase Factor	2014 Increase Factor	2016 Increase Factor	2017 Increase Factor
1 year	0.55	1.200	1.000	1.000	1.000
2 year	0.80	1.200	1.000	1.000	1.000
3 year	1.00	1.200	1.000	1.000	1.000
5 year	1.25	1.200	1.100	1.000	1.000
Lifetime	1.45	1.300	1.200	1.300	1.150

To calculate premiums for a specific mode, apply the appropriate factor to the above premiums.

Modal Loads	Factor
Annual	1.000
Semi-Annual	0.520
Quarterly	0.260
Monthly/BSP	0.087

MUTUAL OF OMAHA INSURANCE COMPANY**COUPLES CONFINED CARE POLICY FORM LTA - Series 19631 and 20251
ANNUAL PREMIUM RATES - Effective December 1, 2017**

Per \$10 Daily Benefit

Per \$1 Gross Premium

Age	Home Health Care Rider Form 0GH8M		Confined Care Policy Form LTA - Series 19631 and 20251					5% Compound Inflation Rider Form 0GH4M		Shortened Benefit Period Rider Form 0GH5M	
	20 Day Elim	0 Day Elim	20 Day Elim	90 Day Elim	180 Day Elim	365 Day Elim					
18-50	18.00	27.72	26.40	21.48	19.32	16.08		1.14		0.19	
51	19.20	29.40	28.08	23.04	20.64	17.28		1.11		0.18	
52	20.52	31.20	29.88	24.48	21.96	18.48		1.08		0.17	
53	21.96	33.48	31.92	26.40	23.64	19.80		1.04		0.16	
54	23.64	36.00	34.32	28.44	25.56	21.36		0.99		0.16	
55	25.20	38.76	36.96	30.60	27.60	23.04		0.95		0.16	
56	27.12	41.88	39.96	33.12	29.76	24.84		0.91		0.16	
57	28.92	45.36	43.32	36.00	32.40	27.00		0.87		0.15	
58	30.60	49.20	47.16	38.76	34.92	29.04		0.83		0.15	
59	32.52	53.64	51.36	42.12	37.92	31.56		0.81		0.15	
60	34.56	58.68	56.28	46.08	41.52	34.56		0.77		0.14	
61	36.96	64.20	61.44	50.28	45.24	37.68		0.74		0.14	
62	39.36	70.44	67.32	55.08	49.56	41.28		0.71		0.14	
63	42.72	77.76	73.92	60.84	54.72	45.72		0.68		0.14	
64	46.44	86.04	81.48	67.32	60.60	50.52		0.64		0.13	
65	50.52	95.28	89.88	74.64	67.20	55.92		0.62		0.13	
66	55.08	105.84	99.60	82.44	74.28	61.80		0.58		0.12	
67	60.12	117.48	110.40	91.20	82.20	68.40		0.55		0.12	
68	65.04	130.20	122.64	99.96	90.00	74.88		0.51		0.12	
69	70.68	144.60	136.56	110.04	99.12	82.44		0.48		0.11	
70	76.80	160.44	151.92	121.44	109.32	91.08		0.45		0.11	
71	83.64	177.72	168.84	133.92	120.48	100.44		0.43		0.10	
72	91.20	196.68	187.32	147.48	132.72	110.76		0.40		0.10	
73	99.84	216.84	206.76	163.08	146.88	122.28		0.38		0.10	
74	109.08	238.44	227.28	179.76	161.76	134.88		0.36		0.10	
75	118.92	261.24	249.00	197.52	177.72	148.20		0.34		0.09	
76	129.36	285.48	271.68	216.36	194.76	162.24		0.32		0.09	
77	140.52	310.80	295.20	236.04	212.52	177.12		0.30		0.09	
78	151.92	337.20	319.56	256.32	230.64	192.36		0.28		0.09	
79	164.04	364.68	344.76	277.32	249.60	207.96		0.27		0.08	
80	176.40	393.48	370.56	299.04	269.16	224.28		0.25		0.08	
81	189.24	423.24	397.20	321.00	288.96	240.72		0.23		0.07	
82	202.32	453.72	424.20	343.44	309.12	257.52		0.21		0.07	
83	215.64	485.40	451.80	366.88	329.28	274.56		0.19		0.06	
84	229.32	517.80	479.52	388.56	349.80	291.48		0.18		0.06	
85	239.88	542.52	502.20	406.56	365.88	304.92		0.15		0.05	
86	250.20	567.96	525.96	425.16	382.68	318.84		0.14		0.05	
87	260.28	595.68	551.76	445.32	400.80	333.96		0.13		0.04	
88	270.00	625.68	579.60	467.16	420.48	350.40		0.11		0.04	
89	279.60	657.00	608.64	490.20	441.12	367.80		0.11		0.04	
90	294.84	689.64	639.36	513.96	462.48	385.44		0.09		0.03	
91	310.92	723.72	671.16	538.80	484.80	404.04		0.08		0.03	
92	327.72	759.24	704.28	564.60	508.20	423.48		0.08		0.03	
93	345.24	796.20	738.84	591.48	532.44	443.64		0.07		0.02	
94	363.36	834.24	774.60	619.44	557.40	464.52		0.06		0.02	
95	382.32	874.08	811.92	648.36	583.44	486.24		0.06		0.02	
96	402.00	914.88	850.44	678.00	610.20	508.56		0.05		0.02	
97	422.28	957.48	890.28	708.84	637.92	531.60		0.04		0.02	
98	443.40	1001.28	931.44	740.76	666.60	555.60		0.04		0.02	
99+	465.24	1046.52	973.92	773.52	696.24	580.08		0.04		0.01	

For October 2003 and later, rates for ages 80+ are available only for the Guarantee Purchase Benefit Option. For previously sold Inforce policies, this applies to ages 85+.

\$15 Policy Fee per insured (\$30 per couple) payable first year only.

If Tax Qualified Amendment Rider Form 0GH6M elected, premium will be reduced 15%.

To calculate premiums for a specific benefit period, apply the appropriate factors to the above premiums.

Benefit Period	Factor	2013 Increase Factor	2014 Increase Factor	2016 Increase Factor	2017 Increase Factor
1 year	0.55	1.200	1.000	1.000	1.000
2 year	0.80	1.200	1.000	1.000	1.000
3 year	1.00	1.200	1.000	1.000	1.000
5 year	1.25	1.200	1.100	1.000	1.000
Lifetime	1.45	1.300	1.200	1.300	1.150

To calculate premiums for a specific mode, apply the appropriate factor to the above premiums.

Modal Loads	Factor
Annual	1.000
Semi-Annual	0.520
Quarterly	0.260
Monthly/BSP	0.087

Date: 08/09/2016

MUTUAL OF OMAHA INSURANCE COMPANY
SCHEDULE OF MONTHLY RATES FOR POLICY FORM NH50

PER \$10 DAILY CONFINED CARE BENEFIT

BENEFIT -- 1 YEAR

IssueAge	ELIMINATION PERIODS			
	0 Day	20 Day	100 Day	365 Day
18-39	0.70	0.67	0.62	0.58
40	0.72	0.68	0.64	0.58
41	0.74	0.71	0.65	0.60
42	0.78	0.73	0.67	0.61
43	0.82	0.77	0.70	0.62
44	0.84	0.80	0.71	0.64
45	0.88	0.83	0.73	0.64
46	0.92	0.88	0.77	0.68
47	0.97	0.91	0.80	0.70
48	1.02	0.96	0.83	0.72
49	1.07	1.01	0.88	0.76
50	1.13	1.07	0.91	0.77
51	1.20	1.13	0.96	0.82
52	1.28	1.20	1.01	0.85
53	1.36	1.28	1.07	0.89
54	1.44	1.36	1.13	0.95
55	1.54	1.43	1.20	1.01
56	1.64	1.52	1.30	1.09
57	1.76	1.63	1.38	1.18
58	1.90	1.75	1.48	1.25
59	2.04	1.88	1.60	1.34
60	2.20	2.03	1.72	1.44
61	2.41	2.20	1.86	1.57
62	2.64	2.42	2.02	1.69
63	2.92	2.68	2.21	1.84
64	3.23	2.98	2.42	1.97
65	3.59	3.28	2.64	2.12
66	3.98	3.64	2.92	2.33
67	4.42	4.04	3.22	2.56
68	4.90	4.46	3.55	2.83
69	5.40	4.90	3.91	3.12
70	5.95	5.38	4.30	3.44
71	6.58	5.92	4.75	3.82
72	7.26	6.54	5.27	4.25
73	8.04	7.25	5.86	4.72
74	8.89	8.04	6.50	5.26
75	9.82	8.89	7.19	5.82
76	10.79	9.82	7.94	6.43
77	11.84	10.78	8.74	7.07
78	12.95	11.81	9.58	7.75
79	14.14	12.90	10.48	8.50
80	15.38	14.05	11.40	9.25
81	16.70	15.26	12.40	10.06
82	18.07	16.52	13.43	10.92
83	19.52	17.86	14.52	11.81
84	21.04	19.24	15.67	12.76

TO OBTAIN QUARTERLY, SEMIANNUAL, AND ANNUAL PREMIUMS, MULTIPLY THE ABOVE QUOTED PREMIUMS BY 3, 6, AND 12, RESPECTIVELY. THE MONTHLY PREMIUMS FOR BANK SERVICE PLAN AND PAYROLL DEDUCTION ISSUES ARE THE PREMIUMS LISTED ABOVE .

R25388-44-3

Date: 08/09/2016

MUTUAL OF OMAHA INSURANCE COMPANY
SCHEDULE OF MONTHLY RATES FOR POLICY FORM NH50

PER \$10 DAILY CONFINED CARE BENEFIT

BENEFIT -- 2 YEARS

Issue Age	ELIMINATION PERIODS			
	0 Day	20 day	100 Day	365 Day
18-39	0.88	0.84	0.73	0.64
40	0.91	0.88	0.76	0.65
41	0.95	0.90	0.79	0.70
42	1.00	0.94	0.82	0.72
43	1.04	0.98	0.85	0.74
44	1.09	1.03	0.88	0.76
45	1.15	1.08	0.91	0.77
46	1.21	1.14	0.95	0.79
47	1.30	1.20	1.00	0.83
48	1.36	1.28	1.06	0.86
49	1.44	1.36	1.12	0.91
50	1.52	1.43	1.18	0.97
51	1.62	1.52	1.26	1.04
52	1.73	1.63	1.36	1.13
53	1.87	1.75	1.46	1.22
54	2.02	1.88	1.57	1.31
55	2.17	2.02	1.70	1.43
56	2.36	2.18	1.85	1.57
57	2.57	2.38	2.02	1.70
58	2.81	2.58	2.18	1.84
59	3.05	2.81	2.38	2.02
60	3.34	3.06	2.58	2.18
61	3.66	3.36	2.83	2.38
62	4.06	3.71	3.10	2.59
63	4.51	4.13	3.41	2.82
64	5.02	4.60	3.73	3.04
65	5.56	5.10	4.10	3.30
66	6.20	5.68	4.54	3.61
67	6.94	6.34	5.04	4.01
68	7.75	7.06	5.62	4.48
69	8.66	7.85	6.28	5.02
70	9.65	8.71	7.00	5.63
71	10.72	9.66	7.78	6.28
72	11.87	10.69	8.63	6.97
73	13.09	11.80	9.54	7.72
74	14.36	12.98	10.50	8.50
75	15.72	14.26	11.53	9.34
76	17.20	15.64	12.65	10.24
77	18.80	17.12	13.86	11.22
78	20.54	18.73	15.18	12.30
79	22.40	20.44	16.58	13.45
80	24.38	22.26	18.06	14.65
81	26.48	24.18	19.66	15.97
82	28.69	26.22	21.32	17.34
83	31.03	28.37	23.08	18.76
84	33.48	30.62	24.92	20.28

TO OBTAIN QUARTERLY, SEMIANNUAL, AND ANNUAL PREMIUMS, MULTIPLY THE ABOVE QUOTED PREMIUMS BY 3, 6, AND 12 , RESPECTIVELY. THE MONTHLY PREMIUMS FOR BANK SERVICE PLAN AND PAYROLL DEDUCTION ISSUES ARE THE PREMIUMS LISTED ABOVE.

Date: 08/09/2016

MUTUAL OF OMAHA INSURANCE COMPANY
SCHEDULE OF MONTHLY RATES FOR POLICY FORM NH50

PER \$10 DAILY CONFINED CARE BENEFIT

BENEFIT -- 3 YEARS

Issue Age	ELIMINATION PERIODS			
	0 Day	20 Day	100 Day	365 Day
18-39	1.08	1.00	0.83	0.70
40	1.12	1.03	0.86	0.72
41	1.18	1.07	0.89	0.74
42	1.22	1.12	0.94	0.77
43	1.30	1.18	0.97	0.80
44	1.36	1.24	1.02	0.85
45	1.42	1.31	1.06	0.86
46	1.50	1.38	1.12	0.91
47	1.60	1.46	1.18	0.95
48	1.68	1.55	1.25	1.01
49	1.79	1.64	1.33	1.08
50	1.90	1.74	1.40	1.13
51	2.03	1.86	1.49	1.19
52	2.17	1.99	1.60	1.30
53	2.34	2.14	1.72	1.39
54	2.51	2.30	1.86	1.50
55	2.70	2.47	2.00	1.62
56	2.92	2.68	2.16	1.75
57	3.18	2.92	2.36	1.91
58	3.47	3.17	2.56	2.08
59	3.77	3.46	2.78	2.23
60	4.12	3.78	3.04	2.44
61	4.52	4.15	3.34	2.68
62	5.00	4.60	3.67	2.93
63	5.56	5.08	4.07	3.28
64	6.14	5.59	4.52	3.65
65	6.82	6.18	5.02	4.06
66	7.58	6.85	5.56	4.51
67	8.47	7.66	6.18	4.99
68	9.46	8.57	6.84	5.46
69	10.55	9.59	7.56	5.96
70	11.74	10.72	8.34	6.49
71	13.06	11.93	9.22	7.12
72	14.48	13.26	10.20	7.85
73	16.04	14.70	11.32	8.72
74	17.74	16.24	12.55	9.70
75	19.54	17.89	13.87	10.75
76	21.44	19.61	15.28	11.89
77	23.46	21.42	16.73	13.07
78	25.58	23.30	18.24	14.28
79	27.83	25.26	19.84	15.58
80	30.17	27.30	21.48	16.90
81	32.62	29.42	23.20	18.28
82	35.20	31.62	25.00	19.75
83	37.86	33.90	26.86	21.28
84	40.66	36.28	28.78	22.84

TO OBTAIN QUARTERLY, SEMIANNUAL, AND ANNUAL PREMIUMS, MULTIPLY THE ABOVE QUOTED PREMIUMS BY 3, 6, AND 12 , RESPECTIVELY. THE MONTHLY PREMIUMS FOR BANK SERVICE PLAN AND PAYROLL DEDUCTION ISSUES ARE THE PREMIUMS LISTED ABOVE.

Date: 08/09/2016

MUTUAL OF OMAHA INSURANCE COMPANY
SCHEDULE OF MONTHLY RATES FOR POLICY FORM NH50

PER \$10 DAILY CONFINED CARE BENEFIT

BENEFIT -- 5 YEARS

Issue Age	ELIMINATION PERIODS			
	0 Day	20 Day	100 Day	365 Day
18-39	1.43	1.32	1.06	0.85
40	1.47	1.36	1.10	0.90
41	1.54	1.44	1.13	0.90
42	1.63	1.51	1.19	0.94
43	1.69	1.58	1.24	0.98
44	1.78	1.66	1.31	1.03
45	1.89	1.76	1.39	1.10
46	2.00	1.85	1.47	1.18
47	2.12	1.97	1.56	1.24
48	2.26	2.09	1.66	1.32
49	2.39	2.22	1.76	1.40
50	2.55	2.35	1.87	1.50
51	2.73	2.51	2.00	1.60
52	2.93	2.71	2.16	1.72
53	3.16	2.92	2.33	1.87
54	3.41	3.16	2.53	2.02
55	3.69	3.41	2.75	2.22
56	4.00	3.71	2.98	2.40
57	4.36	4.04	3.26	2.63
58	4.73	4.40	3.54	2.84
59	5.15	4.80	3.83	3.06
60	5.61	5.20	4.14	3.29
61	6.14	5.70	4.53	3.59
62	6.79	6.28	4.99	3.97
63	7.52	6.94	5.53	4.41
64	8.34	7.67	6.14	4.93
65	9.24	8.47	6.81	5.48
66	10.27	9.39	7.57	6.08
67	11.44	10.44	8.43	6.79
68	12.75	11.61	9.36	7.55
69	14.17	12.87	10.36	8.34
70	15.72	14.27	11.47	9.23
71	17.42	15.82	12.69	10.21
72	19.29	17.50	14.04	11.24
73	21.34	19.38	15.49	12.39
74	23.55	21.38	17.05	13.60
75	25.92	23.55	18.73	14.91
76	28.42	25.85	20.54	16.31
77	31.08	28.27	22.44	17.81
78	33.88	30.83	24.46	19.42
79	36.83	33.53	26.59	21.10
80	39.92	36.36	28.83	22.88
81	43.18	39.31	31.20	24.75
82	46.57	42.42	33.66	26.71
83	50.11	45.65	36.25	28.79
84	53.79	49.02	38.93	30.93

TO OBTAIN QUARTERLY, SEMIANNUAL, AND ANNUAL PREMIUMS, MULTIPLY THE ABOVE QUOTED PREMIUMS BY 3, 6, AND 12, RESPECTIVELY. THE MONTHLY PREMIUMS FOR BANK SERVICE PLAN AND PAYROLL DEDUCTION ISSUES ARE THE PREMIUMS LISTED ABOVE.

R25388-44-3

Date: 08/09/2016

MUTUAL OF OMAHA INSURANCE COMPANY
SCHEDULE DF MONTHLY RATES FOR POLICY FORM NH50

PER \$10 DAILY CONFINED CARE BENEFIT

Issue Age	BENEFITS -- LIFETIME			
	ELIMINATION PERIODS			
	0 Day	20 Day	100 Day	365 Day
18-39	2.83	2.70	2.11	1.66
40	2.95	2.80	2.21	1.74
41	3.11	2.95	2.31	1.82
42	3.26	3.11	2.44	1.94
43	3.46	3.30	2.59	2.04
44	3.69	3.52	2.80	2.18
45	3.97	3.80	2.99	2.37
46	4.24	4.07	3.22	2.56
47	4.52	4.34	3.45	2.74
48	4.86	4.62	3.67	2.90
49	5.21	4.93	3.91	3.12
50	5.55	5.23	4.16	3.30
51	5.94	5.54	4.42	3.52
52	6.34	5.88	4.71	3.76
53	6.73	6.21	4.99	4.00
54	7.05	6.54	5.25	4.24
55	7.46	6.85	5.55	4.52
56	7.93	7.25	5.93	4.82
57	8.52	7.79	6.34	5.15
58	9.20	8.40	6.81	5.54
59	9.96	9.06	7.31	5.88
60	10.82	9.80	7.87	6.34
61	11.83	10.69	8.58	6.88
62	13.04	11.78	9.41	7.51
63	14.44	13.04	10.40	8.32
64	15.98	14.46	11.54	9.20
65	17.71	16.04	12.84	10.27
66	19.60	17.80	14.25	11.38
67	21.71	19.73	15.76	12.57
68	24.04	21.84	17.39	13.86
69	26.51	24.12	19.12	15.15
70	29.19	26.59	21.00	16.59
71	32.11	29.26	23.08	18.19
72	35.31	32.20	25.34	19.94
73	38.79	35.43	27.85	21.85
74	42.51	38.84	30.50	23.97
75	46.50	42.51	33.41	26.27
76	50.75	46.46	36.49	28.65
77	55.22	50.69	39.81	31.29
78	59.97	55.21	43.36	34.07
79	64.96	59.98	47.13	37.04
80	70.19	65.05	51.10	40.16
81	75.71	70.42	55.32	43.46
82	81.46	76.00	59.74	46.93
83	87.45	81.91	64.36	50.57
84	93.74	88.08	69.21	54.37

TO OBTAIN QUARTERLY, SEMIANNUAL, AND ANNUAL PREMIUMS, MULTIPLY THE ABOVE QUOTED PREMIUMS BY 3, 6, AND 12, RESPECTIVELY. THE MONTHLY PREMIUMS FOR BANK SERVICE PLAN AND PAYROLL DEDUCTION ISSUES ARE THE PREMIUMS LISTED ABOVE.

R25388-44-3

Date: 08/09/2016

MUTUAL OF OMAHA INSURANCE COMPANY
SCHEDULE OF MONTHLY RATES FOR POLICY FORM NH50

PER \$10 DAILY CONFINED CARE BENEFIT

		BENEFIT -- 1 YEAR			
		ELIMINATION PERIODS			
IssueAge		0 Day	20 Day	100 Day	365 Day
18-39		0.70	0.67	0.62	0.58
40		0.72	0.68	0.64	0.58
41		0.74	0.71	0.65	0.60
42		0.78	0.73	0.67	0.61
43		0.82	0.77	0.70	0.62
44		0.84	0.80	0.71	0.64
45		0.88	0.83	0.73	0.64
46		0.92	0.88	0.77	0.68
47		0.97	0.91	0.80	0.70
48		1.02	0.96	0.83	0.72
49		1.07	1.01	0.88	0.76
50		1.13	1.07	0.91	0.77
51		1.20	1.13	0.96	0.82
52		1.28	1.20	1.01	0.85
53		1.36	1.28	1.07	0.89
54		1.44	1.36	1.13	0.95
55		1.54	1.43	1.20	1.01
56		1.64	1.52	1.30	1.09
57		1.76	1.63	1.38	1.18
58		1.90	1.75	1.48	1.25
59		2.04	1.88	1.60	1.34
60		2.20	2.03	1.72	1.44
61		2.41	2.20	1.86	1.57
62		2.64	2.42	2.02	1.69
63		2.92	2.68	2.21	1.84
64		3.23	2.98	2.42	1.97
65		3.59	3.28	2.64	2.12
66		3.98	3.64	2.92	2.33
67		4.42	4.04	3.22	2.56
68		4.90	4.46	3.55	2.83
69		5.40	4.90	3.91	3.12
70		5.95	5.38	4.30	3.44
71		6.58	5.92	4.75	3.82
72		7.26	6.54	5.27	4.25
73		8.04	7.25	5.86	4.72
74		8.89	8.04	6.50	5.26
75		9.82	8.89	7.19	5.82
76		10.79	9.82	7.94	6.43
77		11.84	10.78	8.74	7.07
78		12.95	11.81	9.58	7.75
79		14.14	12.90	10.48	8.50
80		15.38	14.05	11.40	9.25
81		16.70	15.26	12.40	10.06
82		18.07	16.52	13.43	10.92
83		19.52	17.86	14.52	11.81
84		21.04	19.24	15.67	12.76

TO OBTAIN QUARTERLY, SEMIANNUAL, AND ANNUAL PREMIUMS, MULTIPLY THE ABOVE QUOTED PREMIUMS BY 3, 6, AND 12, RESPECTIVELY. THE MONTHLY PREMIUMS FOR BANK SERVICE PLAN AND PAYROLL DEDUCTION ISSUES ARE THE PREMIUMS LISTED ABOVE .

R25388-44-4

Date: 08/09/2016

MUTUAL OF OMAHA INSURANCE COMPANY
SCHEDULE OF MONTHLY RATES FOR POLICY FORM NH50

PER \$10 DAILY CONFINED CARE BENEFIT

BENEFIT -- 2 YEARS

Issue Age	ELIMINATION PERIODS			
	0 Day	20 day	100 Day	365 Day
18-39	0.88	0.84	0.73	0.64
40	0.91	0.88	0.76	0.65
41	0.95	0.90	0.79	0.70
42	1.00	0.94	0.82	0.72
43	1.04	0.98	0.85	0.74
44	1.09	1.03	0.88	0.76
45	1.15	1.08	0.91	0.77
46	1.21	1.14	0.95	0.79
47	1.30	1.20	1.00	0.83
48	1.36	1.28	1.06	0.86
49	1.44	1.36	1.12	0.91
50	1.52	1.43	1.18	0.97
51	1.62	1.52	1.26	1.04
52	1.73	1.63	1.36	1.13
53	1.87	1.75	1.46	1.22
54	2.02	1.88	1.57	1.31
55	2.17	2.02	1.70	1.43
56	2.36	2.18	1.85	1.57
57	2.57	2.38	2.02	1.70
58	2.81	2.58	2.18	1.84
59	3.05	2.81	2.38	2.02
60	3.34	3.06	2.58	2.18
61	3.66	3.36	2.83	2.38
62	4.06	3.71	3.10	2.59
63	4.51	4.13	3.41	2.82
64	5.02	4.60	3.73	3.04
65	5.56	5.10	4.10	3.30
66	6.20	5.68	4.54	3.61
67	6.94	6.34	5.04	4.01
68	7.75	7.06	5.62	4.48
69	8.66	7.85	6.28	5.02
70	9.65	8.71	7.00	5.63
71	10.72	9.66	7.78	6.28
72	11.87	10.69	8.63	6.97
73	13.09	11.80	9.54	7.72
74	14.36	12.98	10.50	8.50
75	15.72	14.26	11.53	9.34
76	17.20	15.64	12.65	10.24
77	18.80	17.12	13.86	11.22
78	20.54	18.73	15.18	12.30
79	22.40	20.44	16.58	13.45
80	24.38	22.26	18.06	14.65
81	26.48	24.18	19.66	15.97
82	28.69	26.22	21.32	17.34
83	31.03	28.37	23.08	18.76
84	33.48	30.62	24.92	20.28

TO OBTAIN QUARTERLY, SEMIANNUAL, AND ANNUAL PREMIUMS, MULTIPLY THE ABOVE QUOTED PREMIUMS BY 3, 6, AND 12 , RESPECTIVELY. THE MONTHLY PREMIUMS FOR BANK SERVICE PLAN AND PAYROLL DEDUCTION ISSUES ARE THE PREMIUMS LISTED ABOVE.

Date: 08/09/2016

MUTUAL OF OMAHA INSURANCE COMPANY
SCHEDULE OF MONTHLY RATES FOR POLICY FORM NH50

PER \$10 DAILY CONFINED CARE BENEFIT

BENEFIT -- 3 YEARS

Issue Age	ELIMINATION PERIODS			
	0 Day	20 Day	100 Day	365 Day
18-39	1.08	1.00	0.83	0.70
40	1.12	1.03	0.86	0.72
41	1.18	1.07	0.89	0.74
42	1.22	1.12	0.94	0.77
43	1.30	1.18	0.97	0.80
44	1.36	1.24	1.02	0.85
45	1.42	1.31	1.06	0.86
46	1.50	1.38	1.12	0.91
47	1.60	1.46	1.18	0.95
48	1.68	1.55	1.25	1.01
49	1.79	1.64	1.33	1.08
50	1.90	1.74	1.40	1.13
51	2.03	1.86	1.49	1.19
52	2.17	1.99	1.60	1.30
53	2.34	2.14	1.72	1.39
54	2.51	2.30	1.86	1.50
55	2.70	2.47	2.00	1.62
56	2.92	2.68	2.16	1.75
57	3.18	2.92	2.36	1.91
58	3.47	3.17	2.56	2.08
59	3.77	3.46	2.78	2.23
60	4.12	3.78	3.04	2.44
61	4.52	4.15	3.34	2.68
62	5.00	4.60	3.67	2.93
63	5.56	5.08	4.07	3.28
64	6.14	5.59	4.52	3.65
65	6.82	6.18	5.02	4.06
66	7.58	6.85	5.56	4.51
67	8.47	7.66	6.18	4.99
68	9.46	8.57	6.84	5.46
69	10.55	9.59	7.56	5.96
70	11.74	10.72	8.34	6.49
71	13.06	11.93	9.22	7.12
72	14.48	13.26	10.20	7.85
73	16.04	14.70	11.32	8.72
74	17.74	16.24	12.55	9.70
75	19.54	17.89	13.87	10.75
76	21.44	19.61	15.28	11.89
77	23.46	21.42	16.73	13.07
78	25.58	23.30	18.24	14.28
79	27.83	25.26	19.84	15.58
80	30.17	27.30	21.48	16.90
81	32.62	29.42	23.20	18.28
82	35.20	31.62	25.00	19.75
83	37.86	33.90	26.86	21.28
84	40.66	36.28	28.78	22.84

TO OBTAIN QUARTERLY, SEMIANNUAL, AND ANNUAL PREMIUMS, MULTIPLY THE ABOVE QUOTED PREMIUMS BY 3, 6, AND 12 , RESPECTIVELY. THE MONTHLY PREMIUMS FOR BANK SERVICE PLAN AND PAYROLL DEDUCTION ISSUES ARE THE PREMIUMS LISTED ABOVE.

Date: 08/09/2016

MUTUAL OF OMAHA INSURANCE COMPANY
SCHEDULE OF MONTHLY RATES FOR POLICY FORM NH50

PER \$10 DAILY CONFINED CARE BENEFIT

Issue Age	BENEFIT -- 5 YEARS			
	ELIMINATION PERIODS			
	0 Day	20 Day	100 Day	365 Day
18-39	1.43	1.32	1.06	0.85
40	1.47	1.36	1.10	0.90
41	1.54	1.44	1.13	0.90
42	1.63	1.51	1.19	0.94
43	1.69	1.58	1.24	0.98
44	1.78	1.66	1.31	1.03
45	1.89	1.76	1.39	1.10
46	2.00	1.85	1.47	1.18
47	2.12	1.97	1.56	1.24
48	2.26	2.09	1.66	1.32
49	2.39	2.22	1.76	1.40
50	2.55	2.35	1.87	1.50
51	2.73	2.51	2.00	1.60
52	2.93	2.71	2.16	1.72
53	3.16	2.92	2.33	1.87
54	3.41	3.16	2.53	2.02
55	3.69	3.41	2.75	2.22
56	4.00	3.71	2.98	2.40
57	4.36	4.04	3.26	2.63
58	4.73	4.40	3.54	2.84
59	5.15	4.80	3.83	3.06
60	5.61	5.20	4.14	3.29
61	6.14	5.70	4.53	3.59
62	6.79	6.28	4.99	3.97
63	7.52	6.94	5.53	4.41
64	8.34	7.67	6.14	4.93
65	9.24	8.47	6.81	5.48
66	10.27	9.39	7.57	6.08
67	11.44	10.44	8.43	6.79
68	12.75	11.61	9.36	7.55
69	14.17	12.87	10.36	8.34
70	15.72	14.27	11.47	9.23
71	17.42	15.82	12.69	10.21
72	19.29	17.50	14.04	11.24
73	21.34	19.38	15.49	12.39
74	23.55	21.38	17.05	13.60
75	25.92	23.55	18.73	14.91
76	28.42	25.85	20.54	16.31
77	31.08	28.27	22.44	17.81
78	33.88	30.83	24.46	19.42
79	36.83	33.53	26.59	21.10
80	39.92	36.36	28.83	22.88
81	43.18	39.31	31.20	24.75
82	46.57	42.42	33.66	26.71
83	50.11	45.65	36.25	28.79
84	53.79	49.02	38.93	30.93

TO OBTAIN QUARTERLY, SEMIANNUAL, AND ANNUAL PREMIUMS, MULTIPLY THE ABOVE QUOTED PREMIUMS BY 3, 6, AND 12, RESPECTIVELY. THE MONTHLY PREMIUMS FOR BANK SERVICE PLAN AND PAYROLL DEDUCTION ISSUES ARE THE PREMIUMS LISTED ABOVE.

R25388-44-4

Date: 08/09/2016

MUTUAL OF OMAHA INSURANCE COMPANY
SCHEDULE DF MONTHLY RATES FOR POLICY FORM NH50

PER \$10 DAILY CONFINED CARE BENEFIT

Issue Age	BENEFITS -- LIFETIME			
	ELIMINATION PERIODS			
	0 Day	20 Day	100 Day	365 Day
18-39	3.25	3.11	2.43	1.91
40	3.39	3.22	2.54	2.00
41	3.58	3.39	2.66	2.09
42	3.75	3.58	2.81	2.23
43	3.98	3.80	2.98	2.35
44	4.24	4.05	3.22	2.51
45	4.57	4.37	3.44	2.73
46	4.88	4.68	3.70	2.94
47	5.20	4.99	3.97	3.15
48	5.59	5.31	4.22	3.34
49	5.99	5.67	4.50	3.59
50	6.38	6.01	4.78	3.80
51	6.83	6.37	5.08	4.05
52	7.29	6.76	5.42	4.32
53	7.74	7.14	5.74	4.60
54	8.11	7.52	6.04	4.88
55	8.58	7.88	6.38	5.20
56	9.12	8.34	6.82	5.54
57	9.80	8.96	7.29	5.92
58	10.58	9.66	7.83	6.37
59	11.45	10.42	8.41	6.76
60	12.44	11.27	9.05	7.29
61	13.60	12.29	9.87	7.91
62	15.00	13.55	10.82	8.64
63	16.61	15.00	11.96	9.57
64	18.38	16.63	13.27	10.58
65	20.37	18.45	14.77	11.81
66	22.54	20.47	16.39	13.09
67	24.97	22.69	18.12	14.46
68	27.65	25.12	20.00	15.94
69	30.49	27.74	21.99	17.42
70	33.57	30.58	24.15	19.08
71	36.93	33.65	26.54	20.92
72	40.61	37.03	29.14	22.93
73	44.61	40.74	32.03	25.13
74	48.89	44.67	35.08	27.57
75	53.48	48.89	38.42	30.21
76	58.36	53.43	41.96	32.95
77	63.50	58.29	45.78	35.98
78	68.97	63.49	49.86	39.18
79	74.70	68.98	54.20	42.60
80	80.72	74.81	58.77	46.18
81	87.07	80.98	63.62	49.98
82	93.68	87.40	68.70	53.97
83	100.57	94.20	74.01	58.16
84	107.80	101.29	79.59	62.53

TO OBTAIN QUARTERLY, SEMIANNUAL, AND ANNUAL PREMIUMS, MULTIPLY THE ABOVE QUOTED PREMIUMS BY 3, 6, AND 12, RESPECTIVELY. THE MONTHLY PREMIUMS FOR BANK SERVICE PLAN AND PAYROLL DEDUCTION ISSUES ARE THE PREMIUMS LISTED ABOVE.

R25388-44-4

Date: 08/09/2016

MUTUAL OF OMAHA INSURANCE COMPANY
SCHEDULE OF MONTHLY RATES FOR RIDER FORM 0DX6M

PER \$10 DAILY CONFINED CARE BENEFIT

BENEFIT -- 1 YEAR

IssueAge	ELIMINATION PERIODS			
	0 Day	20 Day	100 Day	365 Day
18-39	1.04	1.00	0.92	0.86
40	1.08	1.02	0.95	0.89
41	1.12	1.04	0.97	0.90
42	1.14	1.09	1.00	0.90
43	1.18	1.12	1.01	0.92
44	1.22	1.14	1.03	0.94
45	1.26	1.18	1.07	0.97
46	1.31	1.22	1.08	0.96
47	1.37	1.28	1.12	0.98
48	1.44	1.36	1.18	1.01
49	1.52	1.43	1.22	1.04
50	1.60	1.51	1.28	1.09
51	1.69	1.60	1.36	1.14
52	1.78	1.68	1.42	1.18
53	1.85	1.74	1.48	1.25
54	1.94	1.81	1.54	1.30
55	2.02	1.90	1.60	1.33
56	2.10	1.96	1.66	1.39
57	2.21	2.04	1.72	1.45
58	2.30	2.14	1.79	1.50
59	2.42	2.22	1.88	1.60
60	2.53	2.32	1.96	1.64
61	2.64	2.44	2.03	1.70
62	2.78	2.54	2.12	1.78
63	2.90	2.66	2.20	1.82
64	3.04	2.76	2.26	1.85
65	3.16	2.92	2.35	1.90
66	3.31	3.05	2.44	1.93
67	3.50	3.20	2.56	2.03
68	3.72	3.40	2.70	2.15
69	3.97	3.61	2.88	2.30
70	4.25	3.84	3.10	2.50
71	4.51	4.07	3.29	2.66
72	4.75	4.27	3.46	2.78
73	4.92	4.44	3.60	2.92
74	5.08	4.60	3.70	2.99
75	5.21	4.73	3.82	3.08
76	5.38	4.87	3.94	3.17
77	5.53	5.03	4.07	3.29
78	5.74	5.20	4.22	3.43
79	5.92	5.40	4.37	3.53
80	6.13	5.60	4.54	3.68
81	6.34	5.80	4.72	3.85
82	6.58	6.02	4.90	4.00
83	6.82	6.24	5.08	4.14
84	7.07	6.48	5.28	4.30

TO OBTAIN QUARTERLY, SEMIANNUAL, AND ANNUAL PREMIUMS, MULTIPLY THE ABOVE QUOTED PREMIUMS BY 3, 6, AND 12, RESPECTIVELY. THE MONTHLY PREMIUMS FOR BANK SERVICE PLAN AND PAYROLL DEDUCTION ISSUES ARE THE PREMIUMS LISTED ABOVE .

R25388-44-3

Date: 08/09/2016

MUTUAL OF OMAHA INSURANCE COMPANY
SCHEDULE OF MONTHLY RATES FOR RIDER FORM 0DX6M

PER \$10 DAILY CONFINED CARE BENEFIT

BENEFIT -- 2 YEARS

Issue Age	ELIMINATION PERIODS			
	0 Day	20 day	100 Day	365 Day
18-39	1.69	1.61	1.40	1.22
40	1.74	1.66	1.45	1.26
41	1.80	1.72	1.49	1.30
42	1.87	1.78	1.54	1.34
43	1.94	1.84	1.58	1.36
44	2.02	1.90	1.62	1.38
45	2.09	1.98	1.67	1.42
46	2.20	2.05	1.72	1.43
47	2.28	2.15	1.78	1.46
48	2.38	2.23	1.86	1.55
49	2.48	2.33	1.94	1.62
50	2.59	2.45	2.03	1.69
51	2.72	2.56	2.14	1.78
52	2.86	2.68	2.23	1.86
53	2.99	2.82	2.35	1.96
54	3.16	2.95	2.48	2.09
55	3.34	3.10	2.62	2.20
56	3.49	3.26	2.74	2.30
57	3.70	3.41	2.89	2.45
58	3.88	3.59	3.04	2.56
59	4.10	3.76	3.17	2.68
60	4.30	3.95	3.34	2.82
61	4.54	4.15	3.47	2.90
62	4.78	4.37	3.64	3.04
63	5.02	4.58	3.78	3.12
64	5.26	4.80	3.94	3.22
65	5.51	5.05	4.07	3.28
66	5.80	5.32	4.24	3.38
67	6.14	5.62	4.48	3.56
68	6.58	6.00	4.78	3.80
69	7.07	6.42	5.14	4.10
70	7.60	6.88	5.51	4.42
71	8.10	7.30	5.88	4.73
72	8.52	7.67	6.19	4.99
73	8.82	7.96	6.42	5.18
74	9.05	8.17	6.61	5.35
75	9.25	8.38	6.78	5.48
76	9.47	8.62	6.96	5.62
77	9.77	8.89	7.20	5.83
78	10.14	9.24	7.48	6.06
79	10.56	9.64	7.81	6.34
80	11.02	10.06	8.16	6.64
81	11.50	10.52	8.53	6.92
82	12.05	11.02	8.94	7.25
83	12.64	11.53	9.40	7.66
84	13.25	12.10	9.85	8.02

TO OBTAIN QUARTERLY, SEMIANNUAL, AND ANNUAL PREMIUMS, MULTIPLY THE ABOVE QUOTED PREMIUMS BY 3, 6, AND 12 , RESPECTIVELY. THE MONTHLY PREMIUMS FOR BANK SERVICE PLAN AND PAYROLL DEDUCTION ISSUES ARE THE PREMIUMS LISTED ABOVE.

R25388-44-3

Date: 08/09/2016

MUTUAL OF OMAHA INSURANCE COMPANY
SCHEDULE OF MONTHLY RATES FOR RIDER FORM 0DX6M

PER \$10 DAILY CONFINED CARE BENEFIT

BENEFIT -- 3 YEARS

Issue Age	ELIMINATION PERIODS			
	0 Day	20 Day	100 Day	365 Day
18-39	2.44	2.21	1.84	1.54
40	2.51	2.29	1.90	1.57
41	2.58	2.38	1.97	1.64
42	2.68	2.45	2.03	1.68
43	2.75	2.53	2.09	1.73
44	2.84	2.62	2.14	1.73
45	2.94	2.68	2.20	1.80
46	3.04	2.77	2.27	1.86
47	3.14	2.88	2.34	1.90
48	3.28	2.99	2.42	1.96
49	3.40	3.11	2.51	2.02
50	3.55	3.25	2.62	2.11
51	3.70	3.38	2.74	2.21
52	3.88	3.54	2.86	2.29
53	4.02	3.70	2.98	2.39
54	4.20	3.83	3.10	2.51
55	4.39	4.00	3.24	2.62
56	4.60	4.18	3.40	2.77
57	4.80	4.37	3.55	2.89
58	5.03	4.60	3.72	3.01
59	5.27	4.82	3.90	3.16
60	5.54	5.08	4.08	3.28
61	5.80	5.34	4.27	3.42
62	6.11	5.62	4.49	3.60
63	6.41	5.88	4.72	3.79
64	6.76	6.16	4.96	4.01
65	7.10	6.43	5.21	4.22
66	7.48	6.76	5.50	4.46
67	7.90	7.14	5.77	4.67
68	8.41	7.61	6.10	4.90
69	8.98	8.15	6.44	5.09
70	9.58	8.74	6.82	5.32
71	10.18	9.30	7.18	5.54
72	10.70	9.79	7.54	5.80
73	11.16	10.21	7.86	6.05
74	11.56	10.60	8.17	6.30
75	11.96	10.96	8.48	6.58
76	12.37	11.32	8.80	6.84
77	12.85	11.74	9.16	7.15
78	13.39	12.19	9.54	7.46
79	13.96	12.67	9.94	7.80
80	14.57	13.18	10.37	8.16
81	15.22	13.72	10.84	8.56
82	15.89	14.28	11.28	8.92
83	16.61	14.87	11.77	9.31
84	17.35	15.47	12.26	9.71

TO OBTAIN QUARTERLY, SEMIANNUAL, AND ANNUAL PREMIUMS, MULTIPLY THE ABOVE QUOTED PREMIUMS BY 3, 6, AND 12, RESPECTIVELY. THE MONTHLY PREMIUMS FOR BANK SERVICE PLAN AND PAYROLL DEDUCTION ISSUES ARE THE PREMIUMS LISTED ABOVE.

R25388-44-3

Date: 08/09/2016

MUTUAL OF OMAHA INSURANCE COMPANY
SCHEDULE OF MONTHLY RATES FOR RIDER FORM 0DX6M

PER \$10 DAILY CONFINED CARE BENEFIT

BENEFIT -- 5 YEARS

Issue Age	ELIMINATION PERIODS			
	0 Day	20 Day	100 Day	365 Day
18-39	3.48	3.23	2.62	2.10
40	3.58	3.34	2.65	2.10
41	3.69	3.43	2.73	2.17
42	3.82	3.54	2.82	2.22
43	3.95	3.67	2.90	2.30
44	4.09	3.81	3.01	2.39
45	4.27	3.94	3.12	2.49
46	4.40	4.10	3.23	2.55
47	4.60	4.25	3.38	2.68
48	4.77	4.41	3.50	2.77
49	4.96	4.60	3.64	2.89
50	5.15	4.76	3.78	3.01
51	5.36	4.96	3.95	3.15
52	5.60	5.17	4.11	3.28
53	5.85	5.41	4.31	3.43
54	6.12	5.65	4.53	3.64
55	6.39	5.93	4.75	3.81
56	6.69	6.20	4.99	4.02
57	6.99	6.49	5.23	4.20
58	7.30	6.78	5.46	4.40
59	7.63	7.06	5.67	4.55
60	7.96	7.38	5.90	4.71
61	8.33	7.72	6.14	4.88
62	8.73	8.10	6.41	5.08
63	9.17	8.46	6.74	5.39
64	9.64	8.87	7.11	5.68
65	10.15	9.31	7.46	5.98
66	10.68	9.76	7.88	6.36
67	11.29	10.27	8.29	6.69
68	11.94	10.87	8.76	7.05
69	12.67	11.53	9.28	7.50
70	13.44	12.20	9.81	7.90
71	14.17	12.86	10.32	8.27
72	14.85	13.46	10.80	8.65
73	15.43	13.98	11.20	8.97
74	15.93	14.47	11.55	9.22
75	16.42	14.92	11.89	9.48
76	16.94	15.39	12.22	9.71
77	17.53	15.95	12.65	10.04
78	18.17	16.54	13.11	10.41
79	18.87	17.16	13.62	10.80
80	19.60	17.84	14.17	11.23
81	20.37	18.56	14.72	11.68
82	21.19	19.29	15.31	12.16
83	22.04	20.09	15.95	12.65
84	22.95	20.90	16.62	13.22

TO OBTAIN QUARTERLY, SEMIANNUAL, AND ANNUAL PREMIUMS, MULTIPLY THE ABOVE QUOTED PREMIUMS BY 3, 6, AND 12, RESPECTIVELY. THE MONTHLY PREMIUMS FOR BANK SERVICE PLAN AND PAYROLL DEDUCTION ISSUES ARE THE PREMIUMS LISTED ABOVE.

R25388-44-3

Date: 08/09/2016

MUTUAL OF OMAHA INSURANCE COMPANY
SCHEDULE DF MONTHLY RATES FOR RIDER FORM 0DX6M

PER \$10 DAILY CONFINED CARE BENEFIT

Issue Age	BENEFITS -- LIFETIME			
	ELIMINATION PERIODS			
	0 Day	20 Day	100 Day	365 Day
18-39	7.32	6.94	5.41	4.21
40	7.49	7.11	5.54	4.32
41	7.71	7.32	5.75	4.52
42	7.97	7.57	5.95	4.71
43	8.27	7.89	6.24	4.93
44	8.66	8.29	6.55	5.20
45	9.06	8.72	6.88	5.43
46	9.49	9.11	7.23	5.75
47	9.92	9.49	7.55	5.99
48	10.32	9.88	7.85	6.24
49	10.79	10.21	8.11	6.45
50	11.22	10.54	8.42	6.71
51	11.64	10.86	8.67	6.94
52	12.03	11.14	8.94	7.18
53	12.30	11.34	9.13	7.36
54	12.51	11.52	9.31	7.51
55	12.65	11.64	9.46	7.70
56	12.92	11.84	9.66	7.87
57	13.25	12.12	9.89	8.06
58	13.66	12.45	10.15	8.27
59	14.14	12.86	10.45	8.48
60	14.72	13.34	10.75	8.66
61	15.34	13.90	11.10	8.88
62	16.02	14.46	11.56	9.26
63	16.77	15.20	12.12	9.67
64	17.60	15.94	12.73	10.21
65	18.51	16.78	13.43	10.74
66	19.49	17.69	14.14	11.31
67	20.53	18.64	14.89	11.88
68	21.62	19.67	15.67	12.43
69	22.85	20.81	16.48	13.09
70	24.09	21.97	17.38	13.74
71	25.30	23.08	18.17	14.30
72	26.38	24.09	18.93	14.87
73	27.25	24.90	19.58	15.37
74	28.03	25.61	20.14	15.81
75	28.72	26.30	20.64	16.17
76	29.47	26.99	21.23	16.69
77	30.36	27.86	21.92	17.24
78	31.38	28.91	22.71	17.85
79	32.51	30.00	23.58	18.51
80	33.71	31.21	24.52	19.27
81	34.94	32.50	25.51	20.06
82	36.26	33.85	26.59	20.88
83	37.67	35.33	27.72	21.76
84	39.16	36.87	28.94	22.71

TO OBTAIN QUARTERLY, SEMIANNUAL, AND ANNUAL PREMIUMS, MULTIPLY THE ABOVE QUOTED PREMIUMS BY 3, 6, AND 12, RESPECTIVELY. THE MONTHLY PREMIUMS FOR BANK SERVICE PLAN AND PAYROLL DEDUCTION ISSUES ARE THE PREMIUMS LISTED ABOVE.

R25388-44-3

Date: 08/09/2016

MUTUAL OF OMAHA INSURANCE COMPANY
SCHEDULE OF MONTHLY RATES FOR RIDER FORM 0DX6M

PER \$10 DAILY CONFINED CARE BENEFIT

BENEFIT -- 1 YEAR

IssueAge	ELIMINATION PERIODS			
	0 Day	20 Day	100 Day	365 Day
18-39	1.04	1.00	0.92	0.86
40	1.08	1.02	0.95	0.89
41	1.12	1.04	0.97	0.90
42	1.14	1.09	1.00	0.90
43	1.18	1.12	1.01	0.92
44	1.22	1.14	1.03	0.94
45	1.26	1.18	1.07	0.97
46	1.31	1.22	1.08	0.96
47	1.37	1.28	1.12	0.98
48	1.44	1.36	1.18	1.01
49	1.52	1.43	1.22	1.04
50	1.60	1.51	1.28	1.09
51	1.69	1.60	1.36	1.14
52	1.78	1.68	1.42	1.18
53	1.85	1.74	1.48	1.25
54	1.94	1.81	1.54	1.30
55	2.02	1.90	1.60	1.33
56	2.10	1.96	1.66	1.39
57	2.21	2.04	1.72	1.45
58	2.30	2.14	1.79	1.50
59	2.42	2.22	1.88	1.60
60	2.53	2.32	1.96	1.64
61	2.64	2.44	2.03	1.70
62	2.78	2.54	2.12	1.78
63	2.90	2.66	2.20	1.82
64	3.04	2.76	2.26	1.85
65	3.16	2.92	2.35	1.90
66	3.31	3.05	2.44	1.93
67	3.50	3.20	2.56	2.03
68	3.72	3.40	2.70	2.15
69	3.97	3.61	2.88	2.30
70	4.25	3.84	3.10	2.50
71	4.51	4.07	3.29	2.66
72	4.75	4.27	3.46	2.78
73	4.92	4.44	3.60	2.92
74	5.08	4.60	3.70	2.99
75	5.21	4.73	3.82	3.08
76	5.38	4.87	3.94	3.17
77	5.53	5.03	4.07	3.29
78	5.74	5.20	4.22	3.43
79	5.92	5.40	4.37	3.53
80	6.13	5.60	4.54	3.68
81	6.34	5.80	4.72	3.85
82	6.58	6.02	4.90	4.00
83	6.82	6.24	5.08	4.14
84	7.07	6.48	5.28	4.30

TO OBTAIN QUARTERLY, SEMIANNUAL, AND ANNUAL PREMIUMS, MULTIPLY THE ABOVE QUOTED PREMIUMS BY 3, 6, AND 12, RESPECTIVELY. THE MONTHLY PREMIUMS FOR BANK SERVICE PLAN AND PAYROLL DEDUCTION ISSUES ARE THE PREMIUMS LISTED ABOVE .

R25388-44-4

Date: 08/09/2016

MUTUAL OF OMAHA INSURANCE COMPANY
SCHEDULE OF MONTHLY RATES FOR RIDER FORM 0DX6M

PER \$10 DAILY CONFINED CARE BENEFIT

BENEFIT -- 2 YEARS

Issue Age	ELIMINATION PERIODS			
	0 Day	20 day	100 Day	365 Day
18-39	1.69	1.61	1.40	1.22
40	1.74	1.66	1.45	1.26
41	1.80	1.72	1.49	1.30
42	1.87	1.78	1.54	1.34
43	1.94	1.84	1.58	1.36
44	2.02	1.90	1.62	1.38
45	2.09	1.98	1.67	1.42
46	2.20	2.05	1.72	1.43
47	2.28	2.15	1.78	1.46
48	2.38	2.23	1.86	1.55
49	2.48	2.33	1.94	1.62
50	2.59	2.45	2.03	1.69
51	2.72	2.56	2.14	1.78
52	2.86	2.68	2.23	1.86
53	2.99	2.82	2.35	1.96
54	3.16	2.95	2.48	2.09
55	3.34	3.10	2.62	2.20
56	3.49	3.26	2.74	2.30
57	3.70	3.41	2.89	2.45
58	3.88	3.59	3.04	2.56
59	4.10	3.76	3.17	2.68
60	4.30	3.95	3.34	2.82
61	4.54	4.15	3.47	2.90
62	4.78	4.37	3.64	3.04
63	5.02	4.58	3.78	3.12
64	5.26	4.80	3.94	3.22
65	5.51	5.05	4.07	3.28
66	5.80	5.32	4.24	3.38
67	6.14	5.62	4.48	3.56
68	6.58	6.00	4.78	3.80
69	7.07	6.42	5.14	4.10
70	7.60	6.88	5.51	4.42
71	8.10	7.30	5.88	4.73
72	8.52	7.67	6.19	4.99
73	8.82	7.96	6.42	5.18
74	9.05	8.17	6.61	5.35
75	9.25	8.38	6.78	5.48
76	9.47	8.62	6.96	5.62
77	9.77	8.89	7.20	5.83
78	10.14	9.24	7.48	6.06
79	10.56	9.64	7.81	6.34
80	11.02	10.06	8.16	6.64
81	11.50	10.52	8.53	6.92
82	12.05	11.02	8.94	7.25
83	12.64	11.53	9.40	7.66
84	13.25	12.10	9.85	8.02

TO OBTAIN QUARTERLY, SEMIANNUAL, AND ANNUAL PREMIUMS, MULTIPLY THE ABOVE QUOTED PREMIUMS BY 3, 6, AND 12 , RESPECTIVELY. THE MONTHLY PREMIUMS FOR BANK SERVICE PLAN AND PAYROLL DEDUCTION ISSUES ARE THE PREMIUMS LISTED ABOVE.

R25388-44-4

Date: 08/09/2016

MUTUAL OF OMAHA INSURANCE COMPANY
SCHEDULE OF MONTHLY RATES FOR RIDER FORM 0DX6M

PER \$10 DAILY CONFINED CARE BENEFIT

BENEFIT -- 3 YEARS

Issue Age	ELIMINATION PERIODS			
	0 Day	20 Day	100 Day	365 Day
18-39	2.44	2.21	1.84	1.54
40	2.51	2.29	1.90	1.57
41	2.58	2.38	1.97	1.64
42	2.68	2.45	2.03	1.68
43	2.75	2.53	2.09	1.73
44	2.84	2.62	2.14	1.73
45	2.94	2.68	2.20	1.80
46	3.04	2.77	2.27	1.86
47	3.14	2.88	2.34	1.90
48	3.28	2.99	2.42	1.96
49	3.40	3.11	2.51	2.02
50	3.55	3.25	2.62	2.11
51	3.70	3.38	2.74	2.21
52	3.88	3.54	2.86	2.29
53	4.02	3.70	2.98	2.39
54	4.20	3.83	3.10	2.51
55	4.39	4.00	3.24	2.62
56	4.60	4.18	3.40	2.77
57	4.80	4.37	3.55	2.89
58	5.03	4.60	3.72	3.01
59	5.27	4.82	3.90	3.16
60	5.54	5.08	4.08	3.28
61	5.80	5.34	4.27	3.42
62	6.11	5.62	4.49	3.60
63	6.41	5.88	4.72	3.79
64	6.76	6.16	4.96	4.01
65	7.10	6.43	5.21	4.22
66	7.48	6.76	5.50	4.46
67	7.90	7.14	5.77	4.67
68	8.41	7.61	6.10	4.90
69	8.98	8.15	6.44	5.09
70	9.58	8.74	6.82	5.32
71	10.18	9.30	7.18	5.54
72	10.70	9.79	7.54	5.80
73	11.16	10.21	7.86	6.05
74	11.56	10.60	8.17	6.30
75	11.96	10.96	8.48	6.58
76	12.37	11.32	8.80	6.84
77	12.85	11.74	9.16	7.15
78	13.39	12.19	9.54	7.46
79	13.96	12.67	9.94	7.80
80	14.57	13.18	10.37	8.16
81	15.22	13.72	10.84	8.56
82	15.89	14.28	11.28	8.92
83	16.61	14.87	11.77	9.31
84	17.35	15.47	12.26	9.71

TO OBTAIN QUARTERLY, SEMIANNUAL, AND ANNUAL PREMIUMS, MULTIPLY THE ABOVE QUOTED PREMIUMS BY 3, 6, AND 12, RESPECTIVELY. THE MONTHLY PREMIUMS FOR BANK SERVICE PLAN AND PAYROLL DEDUCTION ISSUES ARE THE PREMIUMS LISTED ABOVE.

R25388-44-4

Date: 08/09/2016

MUTUAL OF OMAHA INSURANCE COMPANY
SCHEDULE OF MONTHLY RATES FOR RIDER FORM 0DX6M

PER \$10 DAILY CONFINED CARE BENEFIT

BENEFIT -- 5 YEARS

Issue Age	ELIMINATION PERIODS			
	0 Day	20 Day	100 Day	365 Day
18-39	3.48	3.23	2.62	2.10
40	3.58	3.34	2.65	2.10
41	3.69	3.43	2.73	2.17
42	3.82	3.54	2.82	2.22
43	3.95	3.67	2.90	2.30
44	4.09	3.81	3.01	2.39
45	4.27	3.94	3.12	2.49
46	4.40	4.10	3.23	2.55
47	4.60	4.25	3.38	2.68
48	4.77	4.41	3.50	2.77
49	4.96	4.60	3.64	2.89
50	5.15	4.76	3.78	3.01
51	5.36	4.96	3.95	3.15
52	5.60	5.17	4.11	3.28
53	5.85	5.41	4.31	3.43
54	6.12	5.65	4.53	3.64
55	6.39	5.93	4.75	3.81
56	6.69	6.20	4.99	4.02
57	6.99	6.49	5.23	4.20
58	7.30	6.78	5.46	4.40
59	7.63	7.06	5.67	4.55
60	7.96	7.38	5.90	4.71
61	8.33	7.72	6.14	4.88
62	8.73	8.10	6.41	5.08
63	9.17	8.46	6.74	5.39
64	9.64	8.87	7.11	5.68
65	10.15	9.31	7.46	5.98
66	10.68	9.76	7.88	6.36
67	11.29	10.27	8.29	6.69
68	11.94	10.87	8.76	7.05
69	12.67	11.53	9.28	7.50
70	13.44	12.20	9.81	7.90
71	14.17	12.86	10.32	8.27
72	14.85	13.46	10.80	8.65
73	15.43	13.98	11.20	8.97
74	15.93	14.47	11.55	9.22
75	16.42	14.92	11.89	9.48
76	16.94	15.39	12.22	9.71
77	17.53	15.95	12.65	10.04
78	18.17	16.54	13.11	10.41
79	18.87	17.16	13.62	10.80
80	19.60	17.84	14.17	11.23
81	20.37	18.56	14.72	11.68
82	21.19	19.29	15.31	12.16
83	22.04	20.09	15.95	12.65
84	22.95	20.90	16.62	13.22

TO OBTAIN QUARTERLY, SEMIANNUAL, AND ANNUAL PREMIUMS, MULTIPLY THE ABOVE QUOTED PREMIUMS BY 3, 6, AND 12, RESPECTIVELY. THE MONTHLY PREMIUMS FOR BANK SERVICE PLAN AND PAYROLL DEDUCTION ISSUES ARE THE PREMIUMS LISTED ABOVE.

R25388-44-4

Date: 08/09/2016

MUTUAL OF OMAHA INSURANCE COMPANY
SCHEDULE DF MONTHLY RATES FOR RIDER FORM 0DX6M

PER \$10 DAILY CONFINED CARE BENEFIT

Issue Age	BENEFITS -- LIFETIME			
	ELIMINATION PERIODS			
	0 Day	20 Day	100 Day	365 Day
18-39	8.42	7.98	6.22	4.84
40	8.61	8.18	6.37	4.97
41	8.87	8.42	6.61	5.20
42	9.17	8.71	6.84	5.42
43	9.51	9.07	7.18	5.67
44	9.96	9.53	7.53	5.98
45	10.42	10.03	7.91	6.24
46	10.91	10.48	8.31	6.61
47	11.41	10.91	8.68	6.89
48	11.87	11.36	9.03	7.18
49	12.41	11.74	9.33	7.42
50	12.90	12.12	9.68	7.72
51	13.39	12.49	9.97	7.98
52	13.83	12.81	10.28	8.26
53	14.15	13.04	10.50	8.46
54	14.39	13.25	10.71	8.64
55	14.55	13.39	10.88	8.86
56	14.86	13.62	11.11	9.05
57	15.24	13.94	11.37	9.27
58	15.71	14.32	11.67	9.51
59	16.26	14.79	12.02	9.75
60	16.93	15.34	12.36	9.96
61	17.64	15.99	12.77	10.21
62	18.42	16.63	13.29	10.65
63	19.29	17.48	13.94	11.12
64	20.24	18.33	14.64	11.74
65	21.29	19.30	15.44	12.35
66	22.41	20.34	16.26	13.01
67	23.61	21.44	17.12	13.66
68	24.86	22.62	18.02	14.29
69	26.28	23.93	18.95	15.05
70	27.70	25.27	19.99	15.80
71	29.10	26.54	20.90	16.45
72	30.34	27.70	21.77	17.10
73	31.34	28.64	22.52	17.68
74	32.23	29.45	23.16	18.18
75	33.03	30.25	23.74	18.60
76	33.89	31.04	24.41	19.19
77	34.91	32.04	25.21	19.83
78	36.09	33.25	26.12	20.53
79	37.39	34.50	27.12	21.29
80	38.77	35.89	28.20	22.16
81	40.18	37.38	29.34	23.07
82	41.70	38.93	30.58	24.01
83	43.32	40.63	31.88	25.02
84	45.03	42.40	33.28	26.12

TO OBTAIN QUARTERLY, SEMIANNUAL, AND ANNUAL PREMIUMS, MULTIPLY THE ABOVE QUOTED PREMIUMS BY 3, 6, AND 12, RESPECTIVELY. THE MONTHLY PREMIUMS FOR BANK SERVICE PLAN AND PAYROLL DEDUCTION ISSUES ARE THE PREMIUMS LISTED ABOVE.

R25388-44-4

Date: 08/09/2016

MUTUAL OF OMAHA INSURANCE COMPANY
SCHEDULE OF MONTHLY RATES FOR POLICY FORM LT50

PER \$10 DAILY CONFINED CARE/PER \$10 DAILY COMMUNITY BASED BENEFIT
100% HOME HEALTH CARE BENEFIT

Issue Age	BENEFIT -- 1 YEAR			
	ELIMINATION PERIODS			
	0 Day	20 Day	100 Day	365 Day
18-39	1.66	1.54	1.33	1.15
40	1.84	1.68	1.45	1.25
41	1.90	1.74	1.50	1.30
42	1.98	1.82	1.56	1.34
43	2.06	1.90	1.62	1.39
44	2.14	1.97	1.68	1.43
45	2.23	2.05	1.75	1.49
46	2.34	2.15	1.84	1.56
47	2.45	2.26	1.92	1.63
48	2.57	2.39	2.02	1.72
49	2.71	2.53	2.12	1.78
50	2.87	2.68	2.24	1.87
51	3.04	2.86	2.38	1.98
52	3.22	3.04	2.52	2.09
53	3.44	3.24	2.68	2.22
54	3.66	3.46	2.86	2.36
55	3.92	3.70	3.05	2.51
56	4.19	3.96	3.26	2.68
57	4.50	4.24	3.49	2.87
58	4.82	4.55	3.72	3.04
59	5.16	4.87	3.98	3.25
60	5.53	5.20	4.24	3.46
61	5.95	5.60	4.55	3.70
62	6.46	6.05	4.92	4.00
63	7.01	6.55	5.33	4.34
64	7.62	7.10	5.78	4.72
65	8.29	7.70	6.29	5.14
66	9.05	8.38	6.84	5.59
67	9.89	9.14	7.46	6.10
68	10.82	9.98	8.10	6.58
69	11.81	10.87	8.78	7.09
70	12.90	11.86	9.53	7.66
71	14.11	12.96	10.36	8.28
72	15.47	14.21	11.34	9.05
73	16.98	15.60	12.46	9.94
74	18.64	17.11	13.69	10.96
75	20.40	18.76	15.02	12.04
76	22.32	20.52	16.45	13.19
77	24.40	22.44	17.98	14.41
78	26.63	24.52	19.60	15.67
79	29.02	26.71	21.31	17.00
80	31.55	29.06	23.12	18.40
81	34.24	31.55	25.03	19.86
82	37.06	34.18	27.04	21.38
83	40.04	36.94	29.14	22.98
84	43.18	39.84	31.32	24.62

TO OBTAIN QUARTERLY, SEMIANNUAL, AND ANNUAL PREMIUMS, MULTIPLY THE ABC QUOTED PREMIUMS BY 3, 6, AND 12, RESPECTIVELY. THE MONTHLY PREMIUMS FOR BANK SERVICE PLAN AND PAYROLL DEDUCTION ISSUES ARE THE PREMIUMS LISTED / R25387-44-3

Date: 08/09/2016

MUTUAL OF OMAHA INSURANCE COMPANY
SCHEDULE OF MONTHLY RATES FOR POLICY FORM LT50

PER \$10 DAILY CONFINED CARE/PER \$10 DAILY COMMUNITY BASED BENEFIT
100% HOME HEALTH CARE BENEFIT

BENEFIT -- TWO YEARS

Issue Age	ELIMINATION PERIODS			
	0 Day	20 Day	100 Day	365 Day
18-39	2.20	2.09	1.79	1.54
40	2.44	2.32	1.97	1.68
41	2.52	2.40	2.04	1.73
42	2.62	2.50	2.12	1.80
43	2.74	2.59	2.20	1.87
44	2.86	2.69	2.28	1.93
45	2.98	2.81	2.38	2.02
46	3.11	2.94	2.48	2.09
47	3.28	3.10	2.60	2.20
48	3.46	3.26	2.74	2.29
49	3.65	3.46	2.89	2.42
50	3.88	3.65	3.05	2.56
51	4.12	3.88	3.23	2.69
52	4.39	4.13	3.44	2.87
53	4.67	4.40	3.66	3.04
54	4.98	4.68	3.90	3.25
55	5.32	4.99	4.15	3.46
56	5.70	5.32	4.44	3.71
57	6.14	5.72	4.75	3.94
58	6.64	6.16	5.10	4.24
59	7.16	6.61	5.47	4.54
60	7.74	7.12	5.88	4.86
61	8.40	7.69	6.32	5.20
62	9.14	8.35	6.83	5.59
63	9.95	9.10	7.38	5.99
64	10.80	9.88	7.98	6.46
65	11.75	10.76	8.63	6.92
66	12.80	11.74	9.35	7.45
67	13.99	12.80	10.20	8.14
68	15.30	13.96	11.14	8.88
69	16.72	15.16	12.13	9.71
70	18.24	16.48	13.24	10.62
71	19.94	17.98	14.47	11.65
72	21.85	19.69	15.88	12.82
73	23.96	21.61	17.46	14.11
74	26.23	23.72	19.21	15.56
75	28.70	26.02	21.10	17.10
76	31.36	28.48	23.10	18.74
77	34.21	31.12	25.24	20.46
78	37.26	33.94	27.48	22.26
79	40.51	36.90	29.86	24.16
80	43.96	40.07	32.36	26.14
81	47.58	43.42	34.99	28.20
82	51.41	46.92	37.74	30.36
83	55.43	50.62	40.62	32.60
84	59.64	54.47	43.63	34.96

TO OBTAIN QUARTERLY, SEMIANNUAL, AND ANNUAL PREMIUMS, MULTIPLY THE ABOVE QUOTED PREMIUMS BY 3, 6, AND 12, RESPECTIVELY. THE MONTHLY PREMIUMS FOR B, C, D, E, F, G, H, I, J, K, L, M, N, O, P, Q, R, S, T, U, V, W, X, Y, Z, AA, AB, AC, AD, AE, AF, AG, AH, AI, AJ, AK, AL, AM, AN, AO, AP, AQ, AR, AS, AT, AU, AV, AW, AX, AY, AZ, BA, BB, BC, BD, BE, BF, BG, BH, BI, BJ, BK, BL, BM, BN, BO, BP, BQ, BR, BS, BT, BU, BV, BW, BX, BY, BZ, CA, CB, CC, CD, CE, CF, CG, CH, CI, CJ, CK, CL, CM, CN, CO, CP, CQ, CR, CS, CT, CU, CV, CW, CX, CY, CZ, DA, DB, DC, DD, DE, DF, DG, DH, DI, DJ, DK, DL, DM, DN, DO, DP, DQ, DR, DS, DT, DU, DV, DW, DX, DY, DZ, EA, EB, EC, ED, EE, EF, EG, EH, EI, EJ, EK, EL, EM, EN, EO, EP, EQ, ER, ES, ET, EU, EV, EW, EX, EY, EZ, FA, FB, FC, FD, FE, FF, FG, FH, FI, FJ, FK, FL, FM, FN, FO, FP, FQ, FR, FS, FT, FU, FV, FW, FX, FY, FZ, GA, GB, GC, GD, GE, GF, GG, GH, GI, GJ, GK, GL, GM, GN, GO, GP, GQ, GR, GS, GT, GU, GV, GW, GX, GY, GZ, HA, HB, HC, HD, HE, HF, HG, HH, HI, HJ, HK, HL, HM, HN, HO, HP, HQ, HR, HS, HT, HU, HV, HW, HX, HY, HZ, IA, IB, IC, ID, IE, IF, IG, IH, II, IJ, IK, IL, IM, IN, IO, IP, IQ, IR, IS, IT, IU, IV, IW, IX, IY, IZ, JA, JB, JC, JD, JE, JF, JG, JH, JI, JJ, JK, JL, JM, JN, JO, JP, JQ, JR, JS, JT, JU, JV, JW, JX, JY, JZ, KA, KB, KC, KD, KE, KF, KG, KH, KI, KJ, KK, KL, KM, KN, KO, KP, KQ, KR, KS, KT, KU, KV, KW, KX, KY, KZ, LA, LB, LC, LD, LE, LF, LG, LH, LI, LJ, LK, LL, LM, LN, LO, LP, LQ, LR, LS, LT, LU, LV, LW, LX, LY, LZ, MA, MB, MC, MD, ME, MF, MG, MH, MI, MJ, MK, ML, MM, MN, MO, MP, MQ, MR, MS, MT, MU, MV, MW, MX, MY, MZ, NA, NB, NC, ND, NE, NF, NG, NH, NI, NJ, NK, NL, NM, NN, NO, NP, NQ, NR, NS, NT, NU, NV, NW, NX, NY, NZ, OA, OB, OC, OD, OE, OF, OG, OH, OI, OJ, OK, OL, OM, ON, OO, OP, OQ, OR, OS, OT, OU, OV, OW, OX, OY, OZ, PA, PB, PC, PD, PE, PF, PG, PH, PI, PJ, PK, PL, PM, PN, PO, PP, PQ, PR, PS, PT, PU, PV, PW, PX, PY, PZ, QA, QB, QC, QD, QE, QF, QG, QH, QI, QJ, QK, QL, QM, QN, QO, QP, QQ, QR, QS, QT, QU, QV, QW, QX, QY, QZ, RA, RB, RC, RD, RE, RF, RG, RH, RI, RJ, RK, RL, RM, RN, RO, RP, RQ, RR, RS, RT, RU, RV, RW, RX, RY, RZ, SA, SB, SC, SD, SE, SF, SG, SH, SI, SJ, SK, SL, SM, SN, SO, SP, SQ, SR, SS, ST, SU, SV, SW, SX, SY, SZ, TA, TB, TC, TD, TE, TF, TG, TH, TI, TJ, TK, TL, TM, TN, TO, TP, TQ, TR, TS, TT, TU, TV, TW, TX, TY, TZ, UA, UB, UC, UD, UE, UF, UG, UH, UI, UJ, UK, UL, UM, UN, UO, UP, UQ, UR, US, UT, UY, UZ, VA, VB, VC, VD, VE, VF, VG, VH, VI, VJ, VK, VL, VM, VN, VO, VP, VQ, VR, VS, VT, VY, VZ, WA, WB, WC, WD, WE, WF, WG, WH, WI, WJ, WK, WL, WM, WN, WO, WP, WQ, WR, WS, WT, WY, WZ, XA, XB, XC, XD, XE, XF, XG, XH, XI, XJ, XK, XL, XM, XN, XO, XP, XQ, XR, XS, XT, XU, XV, XW, XX, XY, XZ, YA, YB, YC, YD, YE, YF, YG, YH, YI, YJ, YK, YL, YM, YN, YO, YP, YQ, YR, YS, YT, YZ, ZA, ZB, ZC, ZD, ZE, ZF, ZG, ZH, ZI, ZJ, ZK, ZL, ZM, ZN, ZO, ZP, ZQ, ZR, ZS, ZT, ZY, ZZ

Date: 08/09/2016

MUTUAL OF OMAHA INSURANCE COMPANY
SCHEDULE OF MONTHLY RATES FOR POLICY FORM LT50

PER \$10 DAILY CONFINED CARE/PER \$10 DAILY COMMUNITY BASED BENEFIT
100% HOME HEALTH CARE BENEFIT

Issue Age	BENEFIT -- 3 YEARS			
	ELIMINATION PERIOD			
	0 Day	20 Day	100 Day	365 Day
18-39	2.68	2.46	2.08	1.74
40	2.96	2.71	2.30	1.96
41	3.07	2.83	2.39	2.02
42	3.20	2.94	2.48	2.09
43	3.34	3.06	2.58	2.18
44	3.48	3.19	2.68	2.26
45	3.64	3.34	2.80	2.34
46	3.80	3.49	2.93	2.46
47	4.01	3.67	3.07	2.57
48	4.24	3.88	3.23	2.69
49	4.48	4.12	3.41	2.83
50	4.75	4.36	3.59	2.96
51	5.05	4.63	3.80	3.12
52	5.39	4.94	4.06	3.32
53	5.75	5.26	4.31	3.53
54	6.14	5.62	4.60	3.77
55	6.58	6.00	4.92	4.03
56	7.03	6.42	5.26	4.30
57	7.55	6.89	5.64	4.62
58	8.10	7.40	6.05	4.96
59	8.68	7.94	6.49	5.30
60	9.30	8.53	6.97	5.70
61	10.01	9.18	7.50	6.13
62	10.81	9.91	8.09	6.60
63	11.69	10.70	8.74	7.12
64	12.64	11.52	9.41	7.69
65	13.67	12.42	10.16	8.32
66	14.83	13.46	11.02	9.01
67	16.18	14.69	11.99	9.79
68	17.65	16.09	13.08	10.63
69	19.26	17.64	14.26	11.53
70	21.02	19.33	15.56	12.53
71	22.96	21.19	16.98	13.61
72	25.09	23.21	18.56	14.84
73	27.40	25.38	20.28	16.20
74	29.86	27.71	22.12	17.64
75	32.51	30.20	24.10	19.22
76	35.39	32.88	26.23	20.92
77	38.56	35.77	28.56	22.80
78	41.98	38.86	31.07	24.84
79	45.66	42.14	33.76	27.05
80	49.57	45.60	36.62	29.41
81	53.74	49.27	39.64	31.90
82	58.14	53.12	42.84	34.55
83	62.80	57.16	46.21	37.36
84	67.69	61.40	49.76	40.33

TO OBTAIN QUARTERLY, SEMIANNUAL, AND ANNUAL PREMIUMS, MULTIPLY THE ABC QUOTED PREMIUMS BY 3, 6, AND 12, RESPECTIVELY. THE MONTHLY PREMIUMS FOR B, SERVICE PLAN AND PAYROLL DEDUCTION ISSUES ARE THE PREMIUMS LISTED ABOVE
R25387-44-3

Date: 08/09/2016

MUTUAL OF OMAHA INSURANCE COMPANY
SCHEDULE OF MONTHLY RATES FOR POLICY FORM LT50

PER \$10 DAILY CONFINED CARE/PER \$10 DAILY COMMUNITY BASED BENEFIT

100% HOME HEALTH CARE BENEFIT

Issue Age	BENEFIT -- 5 YEARS			
	ELIMINATION PERIODS			
	0 Day	20 Day	100 Day	365 Day
18-39	3.54	3.30	2.78	2.35
40	3.91	3.65	3.04	2.52
41	4.07	3.78	3.16	2.63
42	4.24	3.94	3.28	2.73
43	4.41	4.10	3.41	2.82
44	4.60	4.28	3.54	2.95
45	4.81	4.47	3.70	3.08
46	5.03	4.66	3.87	3.21
47	5.29	4.93	4.07	3.36
48	5.60	5.19	4.29	3.55
49	5.93	5.49	4.53	3.74
50	6.28	5.81	4.82	4.00
51	6.69	6.18	5.10	4.22
52	7.12	6.58	5.46	4.51
53	7.58	7.02	5.80	4.80
54	8.05	7.50	6.19	5.13
55	8.58	8.00	6.61	5.47
56	9.15	8.56	7.06	5.83
57	9.79	9.16	7.54	6.19
58	10.47	9.81	8.03	6.58
59	11.20	10.47	8.56	6.97
60	11.96	11.20	9.11	7.41
61	12.85	11.99	9.72	7.90
62	13.84	12.88	10.44	8.46
63	14.92	13.86	11.21	9.06
64	16.08	14.89	12.02	9.71
65	17.35	16.02	12.94	10.45
66	18.79	17.30	13.97	11.28
67	20.42	18.79	15.16	12.22
68	22.25	20.45	16.46	13.24
69	24.23	22.29	17.90	14.38
70	26.41	24.27	19.47	15.62
71	28.79	26.47	21.20	16.97
72	31.42	28.89	23.11	18.50
73	34.23	31.47	25.19	20.17
74	37.20	34.23	27.40	21.93
75	40.44	37.21	29.79	23.85
76	43.98	40.50	32.43	25.98
77	47.91	44.11	35.35	28.31
78	52.23	48.07	38.54	30.91
79	56.89	52.34	42.00	33.70
80	61.90	56.91	45.69	36.69
81	67.24	61.80	49.65	39.91
82	72.93	66.98	53.86	43.31
83	78.96	72.48	58.32	46.92
84	85.33	78.29	63.02	50.73

TO OBTAIN QUARTERLY, SEMIANNUAL, AND ANNUAL PREMIUMS, MULTIPLY THE ABOVE QUOTED PREMIUMS BY 3, 6, AND 12, RESPECTIVELY. THE MONTHLY PREMIUMS FOR B. SERVICE PLAN AND PAYROLL DEDUCTION ISSUES ARE THE PREMIUMS LISTED ABOVE R25387-44-3

Date: 08/09/2016

MUTUAL OF OMAHA INSURANCE COMPANY
SCHEDULE OF MONTHLY RATES FOR POLICY FORM LT50

PER \$10 DAILY CONFINED CARE/PER \$10 DAILY COMMUNITY BASED BENEFIT
100% HOME HEALTH CARE BENEFIT

Issue Age	BENEFIT -- LIFETIME			
	ELIMINATION PERIODS			
	0 Day	20 Day	100 Day	365 Day
18-39	6.92	6.55	5.33	4.37
40	7.58	7.16	5.88	4.82
41	7.87	7.44	6.10	5.01
42	8.22	7.75	6.34	5.23
43	8.57	8.06	6.64	5.47
44	8.92	8.44	6.96	5.75
45	9.35	8.83	7.25	5.99
46	9.80	9.26	7.64	6.31
47	10.30	9.69	8.02	6.62
48	10.83	10.21	8.44	6.96
49	11.41	10.74	8.88	7.35
50	12.03	11.31	9.35	7.72
51	12.70	11.92	9.84	8.11
52	13.44	12.57	10.39	8.58
53	14.20	13.25	10.93	9.05
54	15.03	13.95	11.49	9.46
55	15.90	14.68	12.10	9.98
56	16.90	15.52	12.78	10.53
57	17.97	16.45	13.52	11.10
58	19.12	17.45	14.34	11.78
59	20.36	18.50	15.16	12.45
60	21.68	19.66	16.08	13.17
61	23.18	20.96	17.15	14.01
62	24.90	22.49	18.33	14.95
63	26.75	24.19	19.67	15.98
64	28.76	26.04	21.09	17.10
65	30.95	28.11	22.67	18.32
66	33.41	30.37	24.48	19.73
67	36.21	32.97	26.55	21.40
68	39.30	35.80	28.86	23.26
69	42.60	38.82	31.36	25.30
70	46.24	42.13	34.11	27.60
71	50.25	45.81	37.13	30.08
72	54.74	49.95	40.51	32.85
73	59.58	54.37	44.14	35.82
74	64.75	59.07	47.98	38.95
75	70.38	64.22	52.18	42.38
76	76.58	69.97	56.84	46.15
77	83.43	76.53	62.06	50.31
78	90.97	83.90	67.89	54.94
79	99.09	91.95	74.18	59.88
80	107.81	100.67	81.03	65.21
81	117.14	110.07	88.37	70.93
82	127.04	120.13	96.19	77.01
83	137.57	130.91	104.52	83.47
84	148.66	142.35	113.36	90.30

TO OBTAIN QUARTERLY, SEMIANNUAL, AND ANNUAL PREMIUMS, MULTIPLY THE ABOVE QUOTED PREMIUMS BY 3, 6, AND 12, RESPECTIVELY. THE MONTHLY PREMIUMS FOR B, SERVICE PLAN AND PAYROLL DEDUCT I ON ISSUES ARE THE PREMIUMS LISTED ABOVE.
R25387-44-3

Date: 08/09/2016

MUTUAL OF OMAHA INSURANCE COMPANY
SCHEDULE OF MONTHLY RATES FOR POLICY FORM LT50

PER \$10 DAILY CONFINED CARE/PER \$8 DAILY COMMUNITY BASED BENEFIT

80% HOME HEALTH CARE BENEFIT

Issue Age	BENEFIT -- 1 YEAR			
	ELIMINATION PERIODS			
	0 Day	20 Day	100 Day	365 Day
18-39	1.49	1.40	1.21	1.06
40	1.66	1.54	1.34	1.18
41	1.72	1.60	1.38	1.20
42	1.79	1.66	1.44	1.26
43	1.86	1.72	1.49	1.30
44	1.93	1.80	1.55	1.33
45	2.02	1.87	1.61	1.39
46	2.10	1.96	1.68	1.44
47	2.20	2.06	1.76	1.50
48	2.32	2.17	1.86	1.60
49	2.45	2.32	1.96	1.66
50	2.58	2.44	2.06	1.74
51	2.74	2.60	2.18	1.84
52	2.92	2.76	2.32	1.96
53	3.10	2.95	2.47	2.08
54	3.29	3.14	2.62	2.20
55	3.53	3.37	2.81	2.34
56	3.77	3.60	3.00	2.50
57	4.06	3.88	3.20	2.65
58	4.36	4.14	3.42	2.83
59	4.66	4.43	3.65	3.01
60	4.98	4.73	3.90	3.22
61	5.36	5.10	4.18	3.43
62	5.80	5.51	4.52	3.71
63	6.31	5.96	4.91	4.04
64	6.86	6.46	5.32	4.36
65	7.48	7.01	5.78	4.78
66	8.15	7.62	6.29	5.20
67	8.92	8.32	6.85	5.65
68	9.76	9.08	7.45	6.11
69	10.64	9.89	8.08	6.58
70	11.63	10.79	8.75	7.10
71	12.71	11.80	9.53	7.70
72	13.94	12.94	10.42	8.40
73	15.30	14.20	11.44	9.22
74	16.78	15.58	12.58	10.16
75	18.38	17.06	13.81	11.18
76	20.10	18.68	15.13	12.25
77	21.98	20.42	16.52	13.36
78	23.99	22.31	18.02	14.56
79	26.14	24.31	19.58	15.77
80	28.42	26.45	21.26	17.09
81	30.83	28.72	23.00	18.43
82	33.38	31.10	24.85	19.86
83	36.07	33.61	26.78	21.34
84	38.89	36.25	28.79	22.87

TO OBTAIN QUARTERLY, SEMIANNUAL, AND ANNUAL PREMIUMS, MULTIPLY THE ABC QUOTED PREMIUMS BY 3, 6, AND 12. RESPECTIVELY . THE MONTHLY PREMIUMS FOR B SERVICE PLAN AND PAYROLL DEDUCTION ISSUES ARE THE PREMIUMS LISTED ABOVE
R25387-44-3

Date: 08/09/2016

MUTUAL OF OMAHA INSURANCE COMPANY
SCHEDULE OF MONTHLY RATES POLICY FORM L T50

PER \$10 DAILY CONFINED CARE/PER \$8 DAILY COMMUNITY BASED BENEFIT

80% HOME HEALTH CARE BENEFIT

BENEFIT -- 2 YEARS

Issue Age	ELIMINATION PERIODS			
	0 Day	20 Day	100 Day	365 Day
18-39	2.00	1.93	1.66	1.43
40	2.21	2.12	1.84	1.58
41	2.30	2.20	1.90	1.64
42	2.39	2.28	1.97	1.70
43	2.50	2.39	2.05	1.76
44	2.59	2.48	2.12	1.81
45	2.70	2.58	2.21	1.90
46	2.84	2.70	2.32	1.98
47	2.98	2.86	2.42	2.05
48	3.16	3.00	2.54	2.15
49	3.34	3.17	2.68	2.27
50	3.53	3.36	2.84	2.40
51	3.74	3.58	3.01	2.54
52	4.00	3.80	3.19	2.68
53	4.25	4.06	3.41	2.87
54	4.54	4.30	3.62	3.05
55	4.85	4.60	3.86	3.25
56	5.20	4.90	4.12	3.46
57	5.59	5.26	4.42	3.71
58	6.04	5.66	4.74	3.97
59	6.52	6.08	5.08	4.24
60	7.06	6.55	5.46	4.55
61	7.66	7.08	5.88	4.88
62	8.32	7.68	6.35	5.26
63	9.06	8.36	6.86	5.63
64	9.84	9.10	7.42	6.06
65	10.70	9.90	8.02	6.50
66	11.66	10.79	8.69	7.00
67	12.76	11.78	9.48	7.63
68	13.93	12.84	10.34	8.33
69	15.22	13.94	11.27	9.11
70	16.62	15.17	12.29	9.96
71	18.17	16.54	13.45	10.94
72	19.90	18.12	14.76	12.02
73	21.82	19.88	16.24	13.25
74	23.90	21.82	17.86	14.60
75	26.14	23.93	19.60	16.06
76	28.56	26.20	21.47	17.60
77	31.16	28.62	23.45	19.21
78	33.94	31.21	25.54	20.88
79	36.90	33.96	27.74	22.66
80	40.04	36.86	30.07	24.53
81	43.34	39.94	32.51	26.46
82	46.82	43.18	35.08	28.49
83	50.48	46.56	37.74	30.59
84	54.32	50.11	40.54	32.78

TO OBTAIN QUARTERLY, SEMIANNUAL, AND ANNUAL PREMIUMS, MULTIPLY THE ABC QUOTED PREMIUMS BY 3, 6, AND 12, RESPECTIVELY. THE MONTHLY PREMIUMS FOR B, SERVICE PLAN AND PAYROLL DEDUCTION ISSUES ARE THE PREMIUMS LISTED ABOVE
R25387-44-3

Date: 08/09/2016

MUTUAL OF OMAHA INSURANCE COMPANY
SCHEDULE OF MONTHLY RATES FOR POLICY FORM LT50

PER \$10 DAILY CONFINED CARE/PER \$8 DAILY COMMUNITY BASED BENEFIT
80% HOME HEALTH CARE BENEFIT

Issue Age	BENEFIT -- 3 YEARS			
	ELIMINATION PERIODS			
	0 Day	20 Day	100 Day	365 Day
18-39	2.46	2.28	1.96	1.67
40	2.72	2.52	2.15	1.84
41	2.83	2.63	2.24	1.91
42	2.95	2.74	2.33	1.99
43	3.07	2.86	2.44	2.08
44	3.20	2.98	2.52	2.14
45	3.35	3.10	2.62	2.22
46	3.50	3.24	2.75	2.33
47	3.70	3.42	2.89	2.44
48	3.90	3.60	3.04	2.57
49	4.12	3.83	3.20	2.68
50	4.38	4.06	3.38	2.82
51	4.66	4.30	3.58	2.96
52	4.96	4.60	3.80	3.16
53	5.29	4.90	4.06	3.35
54	5.65	5.22	4.32	3.58
55	6.05	5.58	4.62	3.83
56	6.47	5.98	4.94	4.09
57	6.95	6.41	5.29	4.37
58	7.46	6.88	5.68	4.70
59	7.99	7.38	6.10	5.03
60	8.57	7.93	6.55	5.41
61	9.22	8.54	7.04	5.80
62	9.96	9.22	7.60	6.26
63	10.76	9.96	8.20	6.76
64	11.63	10.72	8.84	7.30
65	12.59	11.56	9.55	7.90
66	13.66	12.53	10.34	8.53
67	14.88	13.66	11.26	9.28
68	16.25	14.96	12.28	10.08
69	17.74	16.40	13.39	10.93
70	19.36	17.98	14.62	11.88
71	21.13	19.72	15.95	12.91
72	23.10	21.58	17.44	14.09
73	25.22	23.60	19.04	15.36
74	27.49	25.78	20.77	16.73
75	29.93	28.09	22.63	18.23
76	32.59	30.58	24.64	19.85
77	35.50	33.28	26.83	21.64
78	38.66	36.14	29.18	23.56
79	42.04	39.19	31.72	25.66
80	45.65	42.41	34.39	27.89
81	49.48	45.82	37.24	30.25
82	53.53	49.40	40.24	32.78
83	57.82	53.16	43.40	35.44
84	62.32	57.11	46.74	38.26

TO OBTAIN QUARTERLY, SEMIANNUAL, AND ANNUAL PREMIUMS, MULTIPLY THE ABC PREMIUMS BY 3, 6 AND 12 RESPECTIVELY. THE MONTHLY PREMIUMS FOR BANK SERV PAYROLL DEDUCTION ISSUES ARE THE PREMIUMS LISTED ABOVE.
R25387-44-3

Date: 08/09/2016

MUTUAL OF OMAHA INSURANCE COMPANY
SCHEDULE OF MONTHLY RATES FOR POLICY FORM LT50

PER \$10 DAILY CONFINED CARE/PER \$8 DAILY COMMUNITY BASED BENEFIT
80% HOME HEALTH CARE BENEFIT

Issue Age	BENEFIT -- 5 YEARS			
	ELIMINATION PERIODS			
	0 Day	20 Day	100 Day	365 Day
18-39	3.29	3.10	2.64	2.24
40	3.63	3.43	2.88	2.42
41	3.78	3.55	2.99	2.52
42	3.94	3.71	3.11	2.62
43	4.10	3.87	3.23	2.71
44	4.28	4.02	3.37	2.83
45	4.47	4.18	3.50	2.93
46	4.68	4.40	3.67	3.08
47	4.93	4.62	3.87	3.22
48	5.20	4.87	4.07	3.41
49	5.52	5.16	4.31	3.61
50	5.85	5.47	4.57	3.82
51	6.23	5.80	4.86	4.07
52	6.62	6.18	5.16	4.30
53	7.05	6.60	5.52	4.60
54	7.50	7.05	5.87	4.90
55	7.99	7.51	6.27	5.24
56	8.51	8.04	6.71	5.59
57	9.11	8.62	7.17	5.95
58	9.75	9.22	7.63	6.33
59	10.42	9.85	8.11	6.68
60	11.13	10.52	8.65	7.11
61	11.95	11.26	9.23	7.57
62	12.86	12.12	9.91	8.11
63	13.88	13.02	10.64	8.69
64	14.96	13.98	11.42	9.33
65	16.15	15.05	12.29	10.03
66	17.48	16.26	13.27	10.82
67	19.01	17.67	14.39	11.73
68	20.70	19.23	15.63	12.72
69	22.55	20.93	16.98	13.78
70	24.60	22.81	18.48	14.97
71	26.80	24.87	20.12	16.28
72	29.24	27.15	21.96	17.74
73	31.86	29.59	23.91	19.33
74	34.63	32.19	26.00	21.03
75	37.63	34.98	28.29	22.88
76	40.93	38.06	30.80	24.90
77	44.59	41.46	33.57	27.17
78	48.62	45.19	36.59	29.62
79	52.94	49.21	39.88	32.32
80	57.61	53.50	43.38	35.18
81	62.58	58.10	47.14	38.24
82	67.87	62.96	51.13	41.51
83	73.48	68.12	55.36	44.99
84	79.41	73.58	59.84	48.66

TO OBTAIN QUARTERLY, SEMIANNUAL, AND ANNUAL PREMIUMS,
MULTIPLY THE ABOVE QUOTED PREMIUMS BY 3, 6, AND 12,
RESPECTIVELY. THE MONTHLY PREMIUMS FOR BANK SERVICE PLAN
AND PAYROLL DEDUCTION ISSUES ARE THE PREMIUMS LISTED ABOVE.
R25387-44-3

Date: 08/09/2016

MUTUAL OF OMAHA INSURANCE COMPANY
SCHEDULE OF MONTHLY RATES FOR POLICY FORM LT50

PER \$10 DAILY CONFINED CARE/PER \$8 DAILY COMMUNITY BASED BENEFIT

80% HOME HEALTH CARE BENEFIT

Issue Age	BENEFIT -- LIFETIME			
	ELIMINATION PERIODS			
	0 Day	20 Day	100 Day	365 Day
18-39	6.50	6.21	5.14	4.21
40	7.15	6.81	5.63	4.68
41	7.42	7.05	5.86	4.89
42	7.72	7.36	6.10	5.06
43	8.03	7.66	6.34	5.25
44	8.40	8.02	6.68	5.55
45	8.79	8.37	6.97	5.82
46	9.20	8.79	7.35	6.15
47	9.67	9.23	7.70	6.41
48	10.21	9.69	8.06	6.76
49	10.74	10.21	8.52	7.11
50	11.31	10.74	8.97	7.46
51	11.92	11.31	9.45	7.89
52	12.64	11.95	9.98	8.32
53	13.36	12.58	10.48	8.72
54	14.13	13.25	11.02	9.19
55	14.96	13.95	11.62	9.67
56	15.89	14.74	12.25	10.21
57	16.90	15.61	12.96	10.76
58	17.99	16.56	13.74	11.40
59	19.14	17.56	14.56	12.04
60	20.41	18.67	15.43	12.73
61	21.81	19.92	16.45	13.59
62	23.40	21.37	17.60	14.48
63	25.17	23.00	18.88	15.50
64	27.04	24.74	20.23	16.55
65	29.11	26.70	21.76	17.76
66	31.42	28.86	23.48	19.11
67	34.06	31.29	25.49	20.75
68	36.96	34.00	27.69	22.56
69	40.09	36.87	30.08	24.54
70	43.46	40.03	32.71	26.73
71	47.27	43.54	35.63	29.16
72	51.47	47.44	38.87	31.85
73	56.03	51.65	42.34	34.70
74	60.91	56.13	46.02	37.74
75	66.20	61.00	50.05	41.04
76	72.05	66.47	54.51	44.72
77	78.47	72.71	59.54	48.75
78	85.54	79.70	65.16	53.26
79	93.20	87.35	71.20	58.05
80	101.40	95.64	77.74	63.19
81	110.19	104.57	84.77	68.73
82	119.50	114.13	92.29	74.63
83	129.38	124.36	100.30	80.87
84	139.80	135.23	108.76	87.46

TO OBTAIN QUARTERLY, SEMIANNUAL, AND ANNUAL PREMIUMS,
MULTIPLY THE ABOVE QUOTED PREMIUMS BY 3, 6, AND 12,
RESPECTIVELY. THE MONTHLY PREMIUMS FOR BANK SERVICE PLAN
AND PAYROLL DEDUCTION ISSUES ARE THE PREMIUMS LISTED ABOVE.
R25387-44-3

Date: 08/09/2016

MUTUAL OF OMAHA INSURANCE COMPANY
SCHEDULE OF MONTHLY RATES FOR POLICY FORM LT50

PER \$10 DAILY CONFINED CARE/PER \$5 DAILY COMMUNITY BASED BENEFIT

50% HOME HEALTH CARE BENEFIT

BENEFIT -- 1 YEAR

Issue Age	Elimination Periods			
	0 Day	20 Day	100 Day	365 Day
18-39	1.24	1.18	1.02	0.89
40	1.38	1.28	1.12	0.96
41	1.43	1.33	1.15	1.00
42	1.49	1.38	1.19	1.03
43	1.55	1.44	1.24	1.07
44	1.61	1.50	1.30	1.13
45	1.68	1.56	1.36	1.18
46	1.75	1.63	1.40	1.20
47	1.85	1.72	1.48	1.26
48	1.94	1.82	1.55	1.32
49	2.04	1.92	1.63	1.38
50	2.15	2.04	1.72	1.45
51	2.27	2.17	1.84	1.54
52	2.44	2.32	1.94	1.63
53	2.59	2.47	2.06	1.72
54	2.75	2.63	2.20	1.82
55	2.95	2.82	2.35	1.96
56	3.16	3.01	2.51	2.09
57	3.40	3.22	2.68	2.23
58	3.64	3.46	2.86	2.36
59	3.89	3.70	3.05	2.51
60	4.16	3.96	3.25	2.68
61	4.48	4.25	3.49	2.87
62	4.86	4.60	3.77	3.10
63	5.27	4.98	4.09	3.36
64	5.74	5.40	4.44	3.65
65	6.24	5.86	4.84	4.00
66	6.80	6.36	5.26	4.33
67	7.45	6.95	5.72	4.72
68	8.14	7.58	6.22	5.09
69	8.88	8.26	6.74	5.50
70	9.71	9.02	7.31	5.92
71	10.62	9.85	7.96	6.43
72	11.64	10.80	8.71	7.02
73	12.78	11.86	9.56	7.72
74	14.02	13.01	10.51	8.50
75	15.35	14.26	11.54	9.35
76	16.79	15.60	12.64	10.24
77	18.36	17.05	13.80	11.17
78	20.04	18.64	15.05	12.16
79	21.83	20.30	16.36	13.18
80	23.74	22.08	17.75	14.27
81	25.76	23.98	19.22	15.40
82	27.88	25.97	20.75	16.58
83	30.12	28.07	22.36	17.81
84	32.48	30.28	24.04	19.09

TO OBTAIN QUARTERLY, SEMIANNUAL, AND ANNUAL PREMIUMS,
MULTIPLY THE ABOVE QUOTED PREMIUMS BY 3, 6, AND 12,
RESPECTIVELY. THE MONTHLY PREMIUMS FOR BANK SERVICE PLAN
AND PAYROLL DEDUCTION ISSUES ARE THE PREMIUMS LISTED ABOVE.
R25387-44-3

Date: 08/09/2016

MUTUAL OF OMAHA INSURANCE COMPANY
SCHEDULE OF MONTHLY RATES POLICY FORM L T50

PER \$10 DAILY CONFINED CARE/PER \$5 DAILY COMMUNITY BASED BENEFIT

50% HOME HEALTH CARE BENEFIT

BENEFIT -- 2 YEARS

Issue Age	Elimination Periods			
	0 Day	20 Day	100 Day	365 Day
18-39	1.69	1.63	1.42	1.22
40	1.88	1.80	1.55	1.33
41	1.96	1.87	1.61	1.39
42	2.02	1.94	1.67	1.44
43	2.11	2.02	1.73	1.48
44	2.20	2.10	1.80	1.54
45	2.30	2.20	1.88	1.61
46	2.41	2.30	1.96	1.66
47	2.53	2.41	2.05	1.74
48	2.68	2.56	2.15	1.81
49	2.82	2.69	2.27	1.92
50	2.99	2.86	2.41	2.04
51	3.17	3.02	2.56	2.15
52	3.40	3.22	2.70	2.26
53	3.61	3.43	2.89	2.44
54	3.85	3.65	3.07	2.58
55	4.10	3.89	3.28	2.75
56	4.42	4.15	3.50	2.95
57	4.74	4.48	3.74	3.13
58	5.12	4.79	4.02	3.37
59	5.53	5.15	4.30	3.59
60	5.98	5.56	4.63	3.86
61	6.49	6.00	4.98	4.13
62	7.06	6.52	5.39	4.46
63	7.68	7.09	5.81	4.76
64	8.34	7.72	6.28	5.12
65	9.08	8.39	6.79	5.50
66	9.88	9.16	7.36	5.92
67	10.80	10.00	8.04	6.47
68	11.81	10.88	8.76	7.06
69	12.90	11.82	9.56	7.73
70	14.09	12.85	10.42	8.45
71	15.40	14.03	11.40	9.26
72	16.87	15.35	12.52	10.21
73	18.50	16.86	13.76	11.23
74	20.26	18.50	15.13	12.37
75	22.16	20.29	16.62	13.61
76	24.22	22.21	18.20	14.92
77	26.42	24.28	19.88	16.28
78	28.78	26.46	21.64	17.70
79	31.28	28.78	23.52	19.22
80	33.94	31.25	25.50	20.81
81	36.74	33.86	27.56	22.43
82	39.70	36.60	29.74	24.16
83	42.80	39.47	32.00	25.94
84	46.06	42.48	34.36	27.79

TO OBTAIN QUARTERLY, SEMIANNUAL, AND ANNUAL PREMIUMS,
MULTIPLY THE ABOVE QUOTED PREMIUMS BY 3, 6, AND 12,
RESPECTIVELY. THE MONTHLY PREMIUMS FOR BANK SERVICE PLAN
AND PAYROLL DEDUCTION ISSUES ARE THE PREMIUMS LISTED ABOVE.
R25387-44-3

Date: 08/09/2016

MUTUAL OF OMAHA INSURANCE COMPANY
SCHEDULE OF MONTHLY RATES FOR POLICY FORM LT50

PER \$10 DAILY CONFINED CARE/PER \$5 DAILY COMMUNITY BASED BENEFIT

50% HOME HEALTH CARE BENEFIT

BENEFIT -- 3 YEARS

Issue Age	Elimination Periods			
	0 Day	20 Day	100 Day	365 Day
18-39	2.12	1.97	1.67	1.42
40	2.35	2.17	1.86	1.60
41	2.44	2.26	1.93	1.66
42	2.54	2.35	2.00	1.70
43	2.64	2.45	2.08	1.78
44	2.75	2.56	2.17	1.85
45	2.88	2.66	2.26	1.90
46	3.01	2.80	2.38	2.02
47	3.17	2.94	2.48	2.09
48	3.36	3.10	2.62	2.20
49	3.55	3.28	2.75	2.32
50	3.76	3.49	2.90	2.41
51	4.00	3.70	3.07	2.56
52	4.26	3.95	3.28	2.71
53	4.56	4.21	3.49	2.89
54	4.87	4.49	3.71	3.07
55	5.20	4.79	3.97	3.29
56	5.57	5.14	4.24	3.50
57	5.98	5.51	4.56	3.77
58	6.42	5.92	4.90	4.04
59	6.86	6.34	5.24	4.33
60	7.36	6.82	5.63	4.66
61	7.93	7.34	6.06	5.00
62	8.57	7.94	6.54	5.39
63	9.26	8.56	7.06	5.82
64	10.00	9.22	7.61	6.29
65	10.82	9.94	8.21	6.79
66	11.75	10.78	8.89	7.34
67	12.80	11.75	9.68	7.97
68	13.97	12.88	10.57	8.68
69	15.25	14.11	11.53	9.42
70	16.66	15.46	12.58	10.22
71	18.19	16.96	13.72	11.11
72	19.87	18.56	15.00	12.12
73	21.70	20.30	16.38	13.22
74	23.64	22.18	17.87	14.40
75	25.74	24.16	19.46	15.67
76	28.03	26.32	21.20	17.08
77	30.54	28.62	23.08	18.60
78	33.25	31.09	25.10	20.26
79	36.16	33.71	27.28	22.06
80	39.26	36.49	29.59	23.99
81	42.55	39.41	32.03	26.03
82	46.04	42.49	34.62	28.21
83	49.74	45.73	37.33	30.47
84	53.62	49.12	40.20	32.90

TO OBTAIN QUARTERLY, SEMIANNUAL, AND ANNUAL PREMIUMS,
MULTIPLY THE ABOVE QUOTED PREMIUMS BY 3, 6, AND 12,
RESPECTIVELY. THE MONTHLY PREMIUMS FOR BANK SERVICE PLAN
AND PAYROLL DEDUCTION ISSUES ARE THE PREMIUMS LISTED ABOVE.
R25387-44-3

Date: 08/09/2016

MUTUAL OF OMAHA INSURANCE COMPANY
SCHEDULE OF MONTHLY RATES FOR POLICY FORM LT50

PER \$10 DAILY CONFINED CARE/PER \$5 DAILY COMMUNITY BASED BENEFIT
50% HOME HEALTH CARE BENEFIT

Issue Age	BENEFIT -- 5 YEARS			
	Elimination Periods			
	0 Day	20 Day	100 Day	365 Day
18-39	2.90	2.75	2.33	1.98
40	3.21	3.03	2.55	2.16
41	3.34	3.15	2.65	2.23
42	3.48	3.28	2.75	2.31
43	3.62	3.41	2.85	2.38
44	3.77	3.54	2.97	2.49
45	3.95	3.71	3.10	2.60
46	4.14	3.87	3.23	2.71
47	4.36	4.08	3.41	2.83
48	4.60	4.30	3.59	2.99
49	4.87	4.55	3.81	3.18
50	5.16	4.83	4.04	3.38
51	5.50	5.13	4.28	3.58
52	5.85	5.46	4.57	3.82
53	6.23	5.82	4.86	4.07
54	6.62	6.22	5.19	4.33
55	7.06	6.64	5.54	4.63
56	7.52	7.11	5.92	4.93
57	8.04	7.61	6.31	5.24
58	8.60	8.14	6.73	5.57
59	9.19	8.69	7.17	5.93
60	9.83	9.30	7.65	6.29
61	10.55	9.94	8.16	6.71
62	11.35	10.69	8.76	7.17
63	12.25	11.51	9.39	7.67
64	13.21	12.35	10.09	8.24
65	14.25	13.29	10.85	8.86
66	15.44	14.37	11.73	9.55
67	16.78	15.59	12.72	10.35
68	18.28	16.97	13.81	11.23
69	19.92	18.49	15.00	12.19
70	21.70	20.14	16.31	13.21
71	23.65	21.97	17.78	14.39
72	25.82	23.97	19.38	15.69
73	28.12	26.13	21.12	17.07
74	30.58	28.42	22.97	18.57
75	33.22	30.89	24.99	20.21
76	36.15	33.61	27.18	21.99
77	39.38	36.61	29.63	24.00
78	42.92	39.91	32.32	26.18
79	46.75	43.44	35.22	28.56
80	50.86	47.25	38.30	31.06
81	55.24	51.29	41.62	33.77
82	59.93	55.59	45.14	36.67
83	64.88	60.17	48.88	39.72
84	70.11	64.99	52.84	42.96

TO OBTAIN QUARTERLY, SEMIANNUAL, AND ANNUAL PREMIUMS,
MULTIPLY THE ABOVE QUOTED PREMIUMS BY 3, 6, AND 12,
RESPECTIVELY. THE MONTHLY PREMIUMS FOR BANK SERVICE PLAN
AND PAYROLL DEDUCTION ISSUES ARE THE PREMIUMS LISTED ABOVE.
R25387-44-3

Date: 08/09/2016

MUTUAL OF OMAHA INSURANCE COMPANY
SCHEDULE OF MONTHLY RATES FOR POLICY FORM LT50

PER \$10 DAILY CONFINED CARE/PER \$5 DAILY COMMUNITY BASED BENEFIT

50% HOME HEALTH CARE BENEFIT

Issue Age	BENEFIT -- LIFETIME			
	Elimination Periods			
	0 Day	20 Day	100 Day	365 Day
18-39	5.88	5.63	4.62	3.81
40	6.47	6.16	5.12	4.21
41	6.71	6.40	5.29	4.38
42	6.97	6.64	5.54	4.59
43	7.25	6.94	5.76	4.81
44	7.62	7.25	6.03	5.02
45	7.96	7.58	6.33	5.28
46	8.36	7.96	6.64	5.55
47	8.76	8.36	6.96	5.82
48	9.23	8.79	7.35	6.15
49	9.72	9.26	7.71	6.42
50	10.22	9.72	8.11	6.77
51	10.82	10.24	8.57	7.16
52	11.41	10.82	9.00	7.50
53	12.10	11.38	9.49	7.93
54	12.79	12.01	10.00	8.32
55	13.55	12.64	10.50	8.74
56	14.38	13.34	11.10	9.26
57	15.29	14.13	11.75	9.78
58	16.29	14.99	12.43	10.32
59	17.34	15.90	13.17	10.91
60	18.46	16.90	13.95	11.52
61	19.73	18.03	14.87	12.27
62	21.20	19.33	15.93	13.12
63	22.78	20.81	17.10	14.04
64	24.48	22.39	18.32	14.99
65	26.35	24.18	19.72	16.08
66	28.46	26.12	21.24	17.30
67	30.82	28.34	23.08	18.79
68	33.45	30.78	25.06	20.42
69	36.28	33.40	27.24	22.23
70	39.36	36.26	29.61	24.19
71	42.81	39.40	32.24	26.38
72	46.59	42.95	35.19	28.85
73	50.71	46.75	38.32	31.43
74	55.15	50.80	41.65	34.15
75	59.93	55.22	45.31	37.18
76	65.21	60.19	49.35	40.47
77	71.05	65.82	53.90	44.16
78	77.45	72.15	58.97	48.19
79	84.37	79.08	64.44	52.51
80	91.81	86.55	70.37	57.20
81	99.74	94.67	76.74	62.22
82	108.17	103.34	83.55	67.57
83	117.13	112.61	90.79	73.22
84	126.57	122.43	98.46	79.20

TO OBTAIN QUARTERLY, SEMIANNUAL, AND ANNUAL PREMIUMS,
MULTIPLY THE ABOVE QUOTED PREMIUMS BY 3, 6, AND 12,
RESPECTIVELY. THE MONTHLY PREMIUMS FOR BANK SERVICE PLAN
AND PAYROLL DEDUCTION ISSUES ARE THE PREMIUMS LISTED ABOVE.
R25387-44-3

Date: 08/09/2016

MUTUAL OF OMAHA INSURANCE COMPANY
SCHEDULE OF MONTHLY RATES FOR POLICY FORM LT50

PER \$10 DAILY CONFINED CARE/PER \$10 DAILY COMMUNITY BASED BENEFIT
100% HOME HEALTH CARE BENEFIT

Issue Age	BENEFIT -- 1 YEAR			
	ELIMINATION PERIODS			
	0 Day	20 Day	100 Day	365 Day
18-39	1.66	1.54	1.33	1.15
40	1.84	1.68	1.45	1.25
41	1.90	1.74	1.50	1.30
42	1.98	1.82	1.56	1.34
43	2.06	1.90	1.62	1.39
44	2.14	1.97	1.68	1.43
45	2.23	2.05	1.75	1.49
46	2.34	2.15	1.84	1.56
47	2.45	2.26	1.92	1.63
48	2.57	2.39	2.02	1.72
49	2.71	2.53	2.12	1.78
50	2.87	2.68	2.24	1.87
51	3.04	2.86	2.38	1.98
52	3.22	3.04	2.52	2.09
53	3.44	3.24	2.68	2.22
54	3.66	3.46	2.86	2.36
55	3.92	3.70	3.05	2.51
56	4.19	3.96	3.26	2.68
57	4.50	4.24	3.49	2.87
58	4.82	4.55	3.72	3.04
59	5.16	4.87	3.98	3.25
60	5.53	5.20	4.24	3.46
61	5.95	5.60	4.55	3.70
62	6.46	6.05	4.92	4.00
63	7.01	6.55	5.33	4.34
64	7.62	7.10	5.78	4.72
65	8.29	7.70	6.29	5.14
66	9.05	8.38	6.84	5.59
67	9.89	9.14	7.46	6.10
68	10.82	9.98	8.10	6.58
69	11.81	10.87	8.78	7.09
70	12.90	11.86	9.53	7.66
71	14.11	12.96	10.36	8.28
72	15.47	14.21	11.34	9.05
73	16.98	15.60	12.46	9.94
74	18.64	17.11	13.69	10.96
75	20.40	18.76	15.02	12.04
76	22.32	20.52	16.45	13.19
77	24.40	22.44	17.98	14.41
78	26.63	24.52	19.60	15.67
79	29.02	26.71	21.31	17.00
80	31.55	29.06	23.12	18.40
81	34.24	31.55	25.03	19.86
82	37.06	34.18	27.04	21.38
83	40.04	36.94	29.14	22.98
84	43.18	39.84	31.32	24.62

TO OBTAIN QUARTERLY, SEMIANNUAL, AND ANNUAL PREMIUMS, MULTIPLY THE ABOVE QUOTED PREMIUMS BY 3, 6, AND 12, RESPECTIVELY. THE MONTHLY PREMIUMS FOR BANK SERVICE PLAN AND PAYROLL DEDUCTION ISSUES ARE THE PREMIUMS LISTED ABOVE.
R25387-44-4

Date: 08/09/2016

MUTUAL OF OMAHA INSURANCE COMPANY
SCHEDULE OF MONTHLY RATES FOR POLICY FORM LT50

PER \$10 DAILY CONFINED CARE/PER \$10 DAILY COMMUNITY BASED BENEFIT
100% HOME HEALTH CARE BENEFIT

BENEFIT -- TWO YEARS

Issue Age	ELIMINATION PERIODS			
	0 Day	20 Day	100 Day	365 Day
18-39	2.20	2.09	1.79	1.54
40	2.44	2.32	1.97	1.68
41	2.52	2.40	2.04	1.73
42	2.62	2.50	2.12	1.80
43	2.74	2.59	2.20	1.87
44	2.86	2.69	2.28	1.93
45	2.98	2.81	2.38	2.02
46	3.11	2.94	2.48	2.09
47	3.28	3.10	2.60	2.20
48	3.46	3.26	2.74	2.29
49	3.65	3.46	2.89	2.42
50	3.88	3.65	3.05	2.56
51	4.12	3.88	3.23	2.69
52	4.39	4.13	3.44	2.87
53	4.67	4.40	3.66	3.04
54	4.98	4.68	3.90	3.25
55	5.32	4.99	4.15	3.46
56	5.70	5.32	4.44	3.71
57	6.14	5.72	4.75	3.94
58	6.64	6.16	5.10	4.24
59	7.16	6.61	5.47	4.54
60	7.74	7.12	5.88	4.86
61	8.40	7.69	6.32	5.20
62	9.14	8.35	6.83	5.59
63	9.95	9.10	7.38	5.99
64	10.80	9.88	7.98	6.46
65	11.75	10.76	8.63	6.92
66	12.80	11.74	9.35	7.45
67	13.99	12.80	10.20	8.14
68	15.30	13.96	11.14	8.88
69	16.72	15.16	12.13	9.71
70	18.24	16.48	13.24	10.62
71	19.94	17.98	14.47	11.65
72	21.85	19.69	15.88	12.82
73	23.96	21.61	17.46	14.11
74	26.23	23.72	19.21	15.56
75	28.70	26.02	21.10	17.10
76	31.36	28.48	23.10	18.74
77	34.21	31.12	25.24	20.46
78	37.26	33.94	27.48	22.26
79	40.51	36.90	29.86	24.16
80	43.96	40.07	32.36	26.14
81	47.58	43.42	34.99	28.20
82	51.41	46.92	37.74	30.36
83	55.43	50.62	40.62	32.60
84	59.64	54.47	43.63	34.96

TO OBTAIN QUARTERLY, SEMIANNUAL, AND ANNUAL PREMIUMS, MULTIPLY THE ABOVE QUOTED PREMIUMS BY 3, 6, AND 12, RESPECTIVELY. THE MONTHLY PREMIUMS FOR BANK SERVICE PLAN AND PAYROLL DEDUCTION ISSUES ARE THE PREMIUMS LISTED ABOVE.
R25387-44-4

Date: 08/09/2016

MUTUAL OF OMAHA INSURANCE COMPANY
SCHEDULE OF MONTHLY RATES FOR POLICY FORM LT50

PER \$10 DAILY CONFINED CARE/PER \$10 DAILY COMMUNITY BASED BENEFIT
100% HOME HEALTH CARE BENEFIT

Issue Age	BENEFIT -- 3 YEARS			
	ELIMINATION PERIOD			
	0 Day	20 Day	100 Day	365 Day
18-39	2.68	2.46	2.08	1.74
40	2.96	2.71	2.30	1.96
41	3.07	2.83	2.39	2.02
42	3.20	2.94	2.48	2.09
43	3.34	3.06	2.58	2.18
44	3.48	3.19	2.68	2.26
45	3.64	3.34	2.80	2.34
46	3.80	3.49	2.93	2.46
47	4.01	3.67	3.07	2.57
48	4.24	3.88	3.23	2.69
49	4.48	4.12	3.41	2.83
50	4.75	4.36	3.59	2.96
51	5.05	4.63	3.80	3.12
52	5.39	4.94	4.06	3.32
53	5.75	5.26	4.31	3.53
54	6.14	5.62	4.60	3.77
55	6.58	6.00	4.92	4.03
56	7.03	6.42	5.26	4.30
57	7.55	6.89	5.64	4.62
58	8.10	7.40	6.05	4.96
59	8.68	7.94	6.49	5.30
60	9.30	8.53	6.97	5.70
61	10.01	9.18	7.50	6.13
62	10.81	9.91	8.09	6.60
63	11.69	10.70	8.74	7.12
64	12.64	11.52	9.41	7.69
65	13.67	12.42	10.16	8.32
66	14.83	13.46	11.02	9.01
67	16.18	14.69	11.99	9.79
68	17.65	16.09	13.08	10.63
69	19.26	17.64	14.26	11.53
70	21.02	19.33	15.56	12.53
71	22.96	21.19	16.98	13.61
72	25.09	23.21	18.56	14.84
73	27.40	25.38	20.28	16.20
74	29.86	27.71	22.12	17.64
75	32.51	30.20	24.10	19.22
76	35.39	32.88	26.23	20.92
77	38.56	35.77	28.56	22.80
78	41.98	38.86	31.07	24.84
79	45.66	42.14	33.76	27.05
80	49.57	45.60	36.62	29.41
81	53.74	49.27	39.64	31.90
82	58.14	53.12	42.84	34.55
83	62.80	57.16	46.21	37.36
84	67.69	61.40	49.76	40.33

TO OBTAIN QUARTERLY, SEMIANNUAL, AND ANNUAL PREMIUMS, MULTIPLY THE ABOVE QUOTED PREMIUMS BY 3, 6, AND 12, RESPECTIVELY. THE MONTHLY PREMIUMS FOR BANK SERVICE PLAN AND PAYROLL DEDUCTION ISSUES ARE THE PREMIUMS LISTED ABOVE.
R25387-44-4

Date: 08/09/2016

MUTUAL OF OMAHA INSURANCE COMPANY
SCHEDULE OF MONTHLY RATES FOR POLICY FORM LT50

PER \$10 DAILY CONFINED CARE/PER \$10 DAILY COMMUNITY BASED BENEFIT

100% HOME HEALTH CARE BENEFIT

Issue Age	BENEFIT -- 5 YEARS			
	ELIMINATION PERIODS			
	0 Day	20 Day	100 Day	365 Day
18-39	3.54	3.30	2.78	2.35
40	3.91	3.65	3.04	2.52
41	4.07	3.78	3.16	2.63
42	4.24	3.94	3.28	2.73
43	4.41	4.10	3.41	2.82
44	4.60	4.28	3.54	2.95
45	4.81	4.47	3.70	3.08
46	5.03	4.66	3.87	3.21
47	5.29	4.93	4.07	3.36
48	5.60	5.19	4.29	3.55
49	5.93	5.49	4.53	3.74
50	6.28	5.81	4.82	4.00
51	6.69	6.18	5.10	4.22
52	7.12	6.58	5.46	4.51
53	7.58	7.02	5.80	4.80
54	8.05	7.50	6.19	5.13
55	8.58	8.00	6.61	5.47
56	9.15	8.56	7.06	5.83
57	9.79	9.16	7.54	6.19
58	10.47	9.81	8.03	6.58
59	11.20	10.47	8.56	6.97
60	11.96	11.20	9.11	7.41
61	12.85	11.99	9.72	7.90
62	13.84	12.88	10.44	8.46
63	14.92	13.86	11.21	9.06
64	16.08	14.89	12.02	9.71
65	17.35	16.02	12.94	10.45
66	18.79	17.30	13.97	11.28
67	20.42	18.79	15.16	12.22
68	22.25	20.45	16.46	13.24
69	24.23	22.29	17.90	14.38
70	26.41	24.27	19.47	15.62
71	28.79	26.47	21.20	16.97
72	31.42	28.89	23.11	18.50
73	34.23	31.47	25.19	20.17
74	37.20	34.23	27.40	21.93
75	40.44	37.21	29.79	23.85
76	43.98	40.50	32.43	25.98
77	47.91	44.11	35.35	28.31
78	52.23	48.07	38.54	30.91
79	56.89	52.34	42.00	33.70
80	61.90	56.91	45.69	36.69
81	67.24	61.80	49.65	39.91
82	72.93	66.98	53.86	43.31
83	78.96	72.48	58.32	46.92
84	85.33	78.29	63.02	50.73

TO OBTAIN QUARTERLY, SEMIANNUAL, AND ANNUAL PREMIUMS, MULTIPLY THE ABOVE QUOTED PREMIUMS BY 3, 6, AND 12, RESPECTIVELY. THE MONTHLY PREMIUMS FOR BANK SERVICE PLAN AND PAYROLL DEDUCTION ISSUES ARE THE PREMIUMS LISTED ABOVE.

R25387-44-4

Date: 08/09/2016

MUTUAL OF OMAHA INSURANCE COMPANY
SCHEDULE OF MONTHLY RATES FOR POLICY FORM LT50

PER \$10 DAILY CONFINED CARE/PER \$10 DAILY COMMUNITY BASED BENEFIT
100% HOME HEALTH CARE BENEFIT

Issue Age	BENEFIT -- LIFETIME			
	ELIMINATION PERIODS			
	0 Day	20 Day	100 Day	365 Day
18-39	7.96	7.53	6.13	5.03
40	8.72	8.23	6.76	5.54
41	9.05	8.56	7.02	5.76
42	9.45	8.91	7.29	6.01
43	9.86	9.27	7.64	6.29
44	10.26	9.71	8.00	6.61
45	10.75	10.15	8.34	6.89
46	11.27	10.65	8.79	7.26
47	11.85	11.14	9.22	7.61
48	12.45	11.74	9.71	8.00
49	13.12	12.35	10.21	8.45
50	13.83	13.01	10.75	8.88
51	14.61	13.71	11.32	9.33
52	15.46	14.46	11.95	9.87
53	16.33	15.24	12.57	10.41
54	17.28	16.04	13.21	10.88
55	18.29	16.88	13.92	11.48
56	19.44	17.85	14.70	12.11
57	20.67	18.92	15.55	12.77
58	21.99	20.07	16.49	13.55
59	23.41	21.28	17.43	14.32
60	24.93	22.61	18.49	15.15
61	26.66	24.10	19.72	16.11
62	28.64	25.86	21.08	17.19
63	30.76	27.82	22.62	18.38
64	33.07	29.95	24.25	19.67
65	35.59	32.33	26.07	21.07
66	38.42	34.93	28.15	22.69
67	41.64	37.92	30.53	24.61
68	45.20	41.17	33.19	26.75
69	48.99	44.64	36.06	29.10
70	53.18	48.45	39.23	31.74
71	57.79	52.68	42.70	34.59
72	62.95	57.44	46.59	37.78
73	68.52	62.53	50.76	41.19
74	74.46	67.93	55.18	44.79
75	80.94	73.85	60.01	48.74
76	88.07	80.47	65.37	53.07
77	95.94	88.01	71.37	57.86
78	104.62	96.49	78.07	63.18
79	113.95	105.74	85.31	68.86
80	123.98	115.77	93.18	74.99
81	134.71	126.58	101.63	81.57
82	146.10	138.15	110.62	88.56
83	158.21	150.55	120.20	95.99
84	170.96	163.70	130.36	103.85

TO OBTAIN QUARTERLY, SEMIANNUAL, AND ANNUAL PREMIUMS, MULTIPLY THE ABOVE QUOTED PREMIUMS BY 3, 6, AND 12, RESPECTIVELY. THE MONTHLY PREMIUMS FOR BANK SERVICE PLAN AND PAYROLL DEDUCT I ON ISSUES ARE THE PREMIUMS LISTED ABOVE.
R25387-44-4

Date: 08/09/2016

MUTUAL OF OMAHA INSURANCE COMPANY
SCHEDULE OF MONTHLY RATES FOR POLICY FORM LT50

PER \$10 DAILY CONFINED CARE/PER \$8 DAILY COMMUNITY BASED BENEFIT

80% HOME HEALTH CARE BENEFIT

Issue Age	BENEFIT -- 1 YEAR			
	ELIMINATION PERIODS			
	0 Day	20 Day	100 Day	365 Day
18-39	1.49	1.40	1.21	1.06
40	1.66	1.54	1.34	1.18
41	1.72	1.60	1.38	1.20
42	1.79	1.66	1.44	1.26
43	1.86	1.72	1.49	1.30
44	1.93	1.80	1.55	1.33
45	2.02	1.87	1.61	1.39
46	2.10	1.96	1.68	1.44
47	2.20	2.06	1.76	1.50
48	2.32	2.17	1.86	1.60
49	2.45	2.32	1.96	1.66
50	2.58	2.44	2.06	1.74
51	2.74	2.60	2.18	1.84
52	2.92	2.76	2.32	1.96
53	3.10	2.95	2.47	2.08
54	3.29	3.14	2.62	2.20
55	3.53	3.37	2.81	2.34
56	3.77	3.60	3.00	2.50
57	4.06	3.88	3.20	2.65
58	4.36	4.14	3.42	2.83
59	4.66	4.43	3.65	3.01
60	4.98	4.73	3.90	3.22
61	5.36	5.10	4.18	3.43
62	5.80	5.51	4.52	3.71
63	6.31	5.96	4.91	4.04
64	6.86	6.46	5.32	4.36
65	7.48	7.01	5.78	4.78
66	8.15	7.62	6.29	5.20
67	8.92	8.32	6.85	5.65
68	9.76	9.08	7.45	6.11
69	10.64	9.89	8.08	6.58
70	11.63	10.79	8.75	7.10
71	12.71	11.80	9.53	7.70
72	13.94	12.94	10.42	8.40
73	15.30	14.20	11.44	9.22
74	16.78	15.58	12.58	10.16
75	18.38	17.06	13.81	11.18
76	20.10	18.68	15.13	12.25
77	21.98	20.42	16.52	13.36
78	23.99	22.31	18.02	14.56
79	26.14	24.31	19.58	15.77
80	28.42	26.45	21.26	17.09
81	30.83	28.72	23.00	18.43
82	33.38	31.10	24.85	19.86
83	36.07	33.61	26.78	21.34
84	38.89	36.25	28.79	22.87

TO OBTAIN QUARTERLY, SEMIANNUAL, AND ANNUAL PREMIUMS, MULTIPLY THE ABOVE QUOTED PREMIUMS BY 3, 6, AND 12. RESPECTIVELY . THE MONTHLY PREMIUMS FOR BANK SERVICE PLAN AND PAYROLL DEDUCTION ISSUES ARE THE PREMIUMS LISTED ABOVE.

R25387-44-4

Date: 08/09/2016

MUTUAL OF OMAHA INSURANCE COMPANY
SCHEDULE OF MONTHLY RATES POLICY FORM L T50

PER \$10 DAILY CONFINED CARE/PER \$8 DAILY COMMUNITY BASED BENEFIT

80% HOME HEALTH CARE BENEFIT

BENEFIT -- 2 YEARS

Issue Age	ELIMINATION PERIODS			
	0 Day	20 Day	100 Day	365 Day
18-39	2.00	1.93	1.66	1.43
40	2.21	2.12	1.84	1.58
41	2.30	2.20	1.90	1.64
42	2.39	2.28	1.97	1.70
43	2.50	2.39	2.05	1.76
44	2.59	2.48	2.12	1.81
45	2.70	2.58	2.21	1.90
46	2.84	2.70	2.32	1.98
47	2.98	2.86	2.42	2.05
48	3.16	3.00	2.54	2.15
49	3.34	3.17	2.68	2.27
50	3.53	3.36	2.84	2.40
51	3.74	3.58	3.01	2.54
52	4.00	3.80	3.19	2.68
53	4.25	4.06	3.41	2.87
54	4.54	4.30	3.62	3.05
55	4.85	4.60	3.86	3.25
56	5.20	4.90	4.12	3.46
57	5.59	5.26	4.42	3.71
58	6.04	5.66	4.74	3.97
59	6.52	6.08	5.08	4.24
60	7.06	6.55	5.46	4.55
61	7.66	7.08	5.88	4.88
62	8.32	7.68	6.35	5.26
63	9.06	8.36	6.86	5.63
64	9.84	9.10	7.42	6.06
65	10.70	9.90	8.02	6.50
66	11.66	10.79	8.69	7.00
67	12.76	11.78	9.48	7.63
68	13.93	12.84	10.34	8.33
69	15.22	13.94	11.27	9.11
70	16.62	15.17	12.29	9.96
71	18.17	16.54	13.45	10.94
72	19.90	18.12	14.76	12.02
73	21.82	19.88	16.24	13.25
74	23.90	21.82	17.86	14.60
75	26.14	23.93	19.60	16.06
76	28.56	26.20	21.47	17.60
77	31.16	28.62	23.45	19.21
78	33.94	31.21	25.54	20.88
79	36.90	33.96	27.74	22.66
80	40.04	36.86	30.07	24.53
81	43.34	39.94	32.51	26.46
82	46.82	43.18	35.08	28.49
83	50.48	46.56	37.74	30.59
84	54.32	50.11	40.54	32.78

TO OBTAIN QUARTERLY, SEMIANNUAL, AND ANNUAL PREMIUMS, MULTIPLY THE ABOVE QUOTED PREMIUMS BY 3, 6, AND 12, RESPECTIVELY. THE MONTHLY PREMIUMS FOR BANK SERVICE PLAN AND PAYROLL DEDUCTION ISSUES ARE THE PREMIUMS LISTED ABOVE.

R25387-44-4

Date: 08/09/2016

MUTUAL OF OMAHA INSURANCE COMPANY
SCHEDULE OF MONTHLY RATES FOR POLICY FORM LT50

PER \$10 DAILY CONFINED CARE/PER \$8 DAILY COMMUNITY BASED BENEFIT

80% HOME HEALTH CARE BENEFIT

Issue Age	BENEFIT -- 3 YEARS			
	ELIMINATION PERIODS			
	0 Day	20 Day	100 Day	365 Day
18-39	2.46	2.28	1.96	1.67
40	2.72	2.52	2.15	1.84
41	2.83	2.63	2.24	1.91
42	2.95	2.74	2.33	1.99
43	3.07	2.86	2.44	2.08
44	3.20	2.98	2.52	2.14
45	3.35	3.10	2.62	2.22
46	3.50	3.24	2.75	2.33
47	3.70	3.42	2.89	2.44
48	3.90	3.60	3.04	2.57
49	4.12	3.83	3.20	2.68
50	4.38	4.06	3.38	2.82
51	4.66	4.30	3.58	2.96
52	4.96	4.60	3.80	3.16
53	5.29	4.90	4.06	3.35
54	5.65	5.22	4.32	3.58
55	6.05	5.58	4.62	3.83
56	6.47	5.98	4.94	4.09
57	6.95	6.41	5.29	4.37
58	7.46	6.88	5.68	4.70
59	7.99	7.38	6.10	5.03
60	8.57	7.93	6.55	5.41
61	9.22	8.54	7.04	5.80
62	9.96	9.22	7.60	6.26
63	10.76	9.96	8.20	6.76
64	11.63	10.72	8.84	7.30
65	12.59	11.56	9.55	7.90
66	13.66	12.53	10.34	8.53
67	14.88	13.66	11.26	9.28
68	16.25	14.96	12.28	10.08
69	17.74	16.40	13.39	10.93
70	19.36	17.98	14.62	11.88
71	21.13	19.72	15.95	12.91
72	23.10	21.58	17.44	14.09
73	25.22	23.60	19.04	15.36
74	27.49	25.78	20.77	16.73
75	29.93	28.09	22.63	18.23
76	32.59	30.58	24.64	19.85
77	35.50	33.28	26.83	21.64
78	38.66	36.14	29.18	23.56
79	42.04	39.19	31.72	25.66
80	45.65	42.41	34.39	27.89
81	49.48	45.82	37.24	30.25
82	53.53	49.40	40.24	32.78
83	57.82	53.16	43.40	35.44
84	62.32	57.11	46.74	38.26

TO OBTAIN QUARTERLY, SEMIANNUAL, AND ANNUAL PREMIUMS, MULTIPLY THE ABOVE QUOTED. PREMIUMS BY 3, 6 AND 12 RESPECTIVELY. THE MONTHLY PREMIUMS FOR BANK SERVICE PLAN AND PAYROLL DEDUCTION ISSUES ARE THE PREMIUMS LISTED ABOVE.

R25387-44-4

Date: 08/09/2016

MUTUAL OF OMAHA INSURANCE COMPANY
SCHEDULE OF MONTHLY RATES FOR POLICY FORM LT50

PER \$10 DAILY CONFINED CARE/PER \$8 DAILY COMMUNITY BASED BENEFIT
80% HOME HEALTH CARE BENEFIT

Issue Age	BENEFIT -- 5 YEARS			
	ELIMINATION PERIODS			
	0 Day	20 Day	100 Day	365 Day
18-39	3.29	3.10	2.64	2.24
40	3.63	3.43	2.88	2.42
41	3.78	3.55	2.99	2.52
42	3.94	3.71	3.11	2.62
43	4.10	3.87	3.23	2.71
44	4.28	4.02	3.37	2.83
45	4.47	4.18	3.50	2.93
46	4.68	4.40	3.67	3.08
47	4.93	4.62	3.87	3.22
48	5.20	4.87	4.07	3.41
49	5.52	5.16	4.31	3.61
50	5.85	5.47	4.57	3.82
51	6.23	5.80	4.86	4.07
52	6.62	6.18	5.16	4.30
53	7.05	6.60	5.52	4.60
54	7.50	7.05	5.87	4.90
55	7.99	7.51	6.27	5.24
56	8.51	8.04	6.71	5.59
57	9.11	8.62	7.17	5.95
58	9.75	9.22	7.63	6.33
59	10.42	9.85	8.11	6.68
60	11.13	10.52	8.65	7.11
61	11.95	11.26	9.23	7.57
62	12.86	12.12	9.91	8.11
63	13.88	13.02	10.64	8.69
64	14.96	13.98	11.42	9.33
65	16.15	15.05	12.29	10.03
66	17.48	16.26	13.27	10.82
67	19.01	17.67	14.39	11.73
68	20.70	19.23	15.63	12.72
69	22.55	20.93	16.98	13.78
70	24.60	22.81	18.48	14.97
71	26.80	24.87	20.12	16.28
72	29.24	27.15	21.96	17.74
73	31.86	29.59	23.91	19.33
74	34.63	32.19	26.00	21.03
75	37.63	34.98	28.29	22.88
76	40.93	38.06	30.80	24.90
77	44.59	41.46	33.57	27.17
78	48.62	45.19	36.59	29.62
79	52.94	49.21	39.88	32.32
80	57.61	53.50	43.38	35.18
81	62.58	58.10	47.14	38.24
82	67.87	62.96	51.13	41.51
83	73.48	68.12	55.36	44.99
84	79.41	73.58	59.84	48.66

TO OBTAIN QUARTERLY, SEMIANNUAL, AND ANNUAL PREMIUMS,
MULTIPLY THE ABOVE QUOTED PREMIUMS BY 3, 6, AND 12,
RESPECTIVELY. THE MONTHLY PREMIUMS FOR BANK SERVICE PLAN
AND PAYROLL DEDUCTION ISSUES ARE THE PREMIUMS LISTED ABOVE.
R25387-44-4

Date: 08/09/2016

MUTUAL OF OMAHA INSURANCE COMPANY
SCHEDULE OF MONTHLY RATES FOR POLICY FORM LT50

PER \$10 DAILY CONFINED CARE/PER \$8 DAILY COMMUNITY BASED BENEFIT
80% HOME HEALTH CARE BENEFIT

Issue Age	BENEFIT -- LIFETIME			
	ELIMINATION PERIODS			
	0 Day	20 Day	100 Day	365 Day
18-39	7.48	7.14	5.91	4.84
40	8.22	7.83	6.47	5.38
41	8.53	8.11	6.74	5.62
42	8.88	8.46	7.02	5.82
43	9.23	8.81	7.29	6.04
44	9.66	9.22	7.68	6.38
45	10.11	9.63	8.02	6.69
46	10.58	10.11	8.45	7.07
47	11.12	10.61	8.86	7.37
48	11.74	11.14	9.27	7.77
49	12.35	11.74	9.80	8.18
50	13.01	12.35	10.32	8.58
51	13.71	13.01	10.87	9.07
52	14.54	13.74	11.48	9.57
53	15.36	14.47	12.05	10.03
54	16.25	15.24	12.67	10.57
55	17.20	16.04	13.36	11.12
56	18.27	16.95	14.09	11.74
57	19.44	17.95	14.90	12.37
58	20.69	19.04	15.80	13.11
59	22.01	20.19	16.74	13.85
60	23.47	21.47	17.74	14.64
61	25.08	22.91	18.92	15.63
62	26.91	24.58	20.24	16.65
63	28.95	26.45	21.71	17.83
64	31.10	28.45	23.26	19.03
65	33.48	30.71	25.02	20.42
66	36.13	33.19	27.00	21.98
67	39.17	35.98	29.31	23.86
68	42.50	39.10	31.84	25.94
69	46.10	42.40	34.59	28.22
70	49.98	46.03	37.62	30.74
71	54.36	50.07	40.97	33.53
72	59.19	54.56	44.70	36.63
73	64.43	59.40	48.69	39.91
74	70.05	64.55	52.92	43.40
75	76.13	70.15	57.56	47.20
76	82.86	76.44	62.69	51.43
77	90.24	83.62	68.47	56.06
78	98.37	91.66	74.93	61.25
79	107.18	100.45	81.88	66.76
80	116.61	109.99	89.40	72.67
81	126.72	120.26	97.49	79.04
82	137.43	131.25	106.13	85.82
83	148.79	143.01	115.35	93.00
84	160.77	155.51	125.07	100.58

TO OBTAIN QUARTERLY, SEMIANNUAL, AND ANNUAL PREMIUMS,
MULTIPLY THE ABOVE QUOTED PREMIUMS BY 3, 6, AND 12,
RESPECTIVELY. THE MONTHLY PREMIUMS FOR BANK SERVICE PLAN
AND PAYROLL DEDUCTION ISSUES ARE THE PREMIUMS LISTED ABOVE.
R25387-44-4

Date: 08/09/2016

MUTUAL OF OMAHA INSURANCE COMPANY
SCHEDULE OF MONTHLY RATES FOR POLICY FORM LT50

PER \$10 DAILY CONFINED CARE/PER \$5 DAILY COMMUNITY BASED BENEFIT

50% HOME HEALTH CARE BENEFIT

BENEFIT -- 1 YEAR

Issue Age	Elimination Periods			
	0 Day	20 Day	100 Day	365 Day
18-39	1.24	1.18	1.02	0.89
40	1.38	1.28	1.12	0.96
41	1.43	1.33	1.15	1.00
42	1.49	1.38	1.19	1.03
43	1.55	1.44	1.24	1.07
44	1.61	1.50	1.30	1.13
45	1.68	1.56	1.36	1.18
46	1.75	1.63	1.40	1.20
47	1.85	1.72	1.48	1.26
48	1.94	1.82	1.55	1.32
49	2.04	1.92	1.63	1.38
50	2.15	2.04	1.72	1.45
51	2.27	2.17	1.84	1.54
52	2.44	2.32	1.94	1.63
53	2.59	2.47	2.06	1.72
54	2.75	2.63	2.20	1.82
55	2.95	2.82	2.35	1.96
56	3.16	3.01	2.51	2.09
57	3.40	3.22	2.68	2.23
58	3.64	3.46	2.86	2.36
59	3.89	3.70	3.05	2.51
60	4.16	3.96	3.25	2.68
61	4.48	4.25	3.49	2.87
62	4.86	4.60	3.77	3.10
63	5.27	4.98	4.09	3.36
64	5.74	5.40	4.44	3.65
65	6.24	5.86	4.84	4.00
66	6.80	6.36	5.26	4.33
67	7.45	6.95	5.72	4.72
68	8.14	7.58	6.22	5.09
69	8.88	8.26	6.74	5.50
70	9.71	9.02	7.31	5.92
71	10.62	9.85	7.96	6.43
72	11.64	10.80	8.71	7.02
73	12.78	11.86	9.56	7.72
74	14.02	13.01	10.51	8.50
75	15.35	14.26	11.54	9.35
76	16.79	15.60	12.64	10.24
77	18.36	17.05	13.80	11.17
78	20.04	18.64	15.05	12.16
79	21.83	20.30	16.36	13.18
80	23.74	22.08	17.75	14.27
81	25.76	23.98	19.22	15.40
82	27.88	25.97	20.75	16.58
83	30.12	28.07	22.36	17.81
84	32.48	30.28	24.04	19.09

TO OBTAIN QUARTERLY, SEMIANNUAL, AND ANNUAL PREMIUMS,
MULTIPLY THE ABOVE QUOTED PREMIUMS BY 3, 6, AND 12,
RESPECTIVELY. THE MONTHLY PREMIUMS FOR BANK SERVICE PLAN
AND PAYROLL DEDUCTION ISSUES ARE THE PREMIUMS LISTED ABOVE.
R25387-44-4

Date: 08/09/2016

MUTUAL OF OMAHA INSURANCE COMPANY
SCHEDULE OF MONTHLY RATES POLICY FORM L T50

PER \$10 DAILY CONFINED CARE/PER \$5 DAILY COMMUNITY BASED BENEFIT

50% HOME HEALTH CARE BENEFIT

BENEFIT -- 2 YEARS

Issue Age	Elimination Periods			
	0 Day	20 Day	100 Day	365 Day
18-39	1.69	1.63	1.42	1.22
40	1.88	1.80	1.55	1.33
41	1.96	1.87	1.61	1.39
42	2.02	1.94	1.67	1.44
43	2.11	2.02	1.73	1.48
44	2.20	2.10	1.80	1.54
45	2.30	2.20	1.88	1.61
46	2.41	2.30	1.96	1.66
47	2.53	2.41	2.05	1.74
48	2.68	2.56	2.15	1.81
49	2.82	2.69	2.27	1.92
50	2.99	2.86	2.41	2.04
51	3.17	3.02	2.56	2.15
52	3.40	3.22	2.70	2.26
53	3.61	3.43	2.89	2.44
54	3.85	3.65	3.07	2.58
55	4.10	3.89	3.28	2.75
56	4.42	4.15	3.50	2.95
57	4.74	4.48	3.74	3.13
58	5.12	4.79	4.02	3.37
59	5.53	5.15	4.30	3.59
60	5.98	5.56	4.63	3.86
61	6.49	6.00	4.98	4.13
62	7.06	6.52	5.39	4.46
63	7.68	7.09	5.81	4.76
64	8.34	7.72	6.28	5.12
65	9.08	8.39	6.79	5.50
66	9.88	9.16	7.36	5.92
67	10.80	10.00	8.04	6.47
68	11.81	10.88	8.76	7.06
69	12.90	11.82	9.56	7.73
70	14.09	12.85	10.42	8.45
71	15.40	14.03	11.40	9.26
72	16.87	15.35	12.52	10.21
73	18.50	16.86	13.76	11.23
74	20.26	18.50	15.13	12.37
75	22.16	20.29	16.62	13.61
76	24.22	22.21	18.20	14.92
77	26.42	24.28	19.88	16.28
78	28.78	26.46	21.64	17.70
79	31.28	28.78	23.52	19.22
80	33.94	31.25	25.50	20.81
81	36.74	33.86	27.56	22.43
82	39.70	36.60	29.74	24.16
83	42.80	39.47	32.00	25.94
84	46.06	42.48	34.36	27.79

TO OBTAIN QUARTERLY, SEMIANNUAL, AND ANNUAL PREMIUMS,
MULTIPLY THE ABOVE QUOTED PREMIUMS BY 3, 6, AND 12,
RESPECTIVELY. THE MONTHLY PREMIUMS FOR BANK SERVICE PLAN
AND PAYROLL DEDUCTION ISSUES ARE THE PREMIUMS LISTED ABOVE.
R25387-44-4

Date: 08/09/2016

MUTUAL OF OMAHA INSURANCE COMPANY
SCHEDULE OF MONTHLY RATES FOR POLICY FORM LT50

PER \$10 DAILY CONFINED CARE/PER \$5 DAILY COMMUNITY BASED BENEFIT

50% HOME HEALTH CARE BENEFIT

BENEFIT -- 3 YEARS

Issue Age	Elimination Periods			
	0 Day	20 Day	100 Day	365 Day
18-39	2.12	1.97	1.67	1.42
40	2.35	2.17	1.86	1.60
41	2.44	2.26	1.93	1.66
42	2.54	2.35	2.00	1.70
43	2.64	2.45	2.08	1.78
44	2.75	2.56	2.17	1.85
45	2.88	2.66	2.26	1.90
46	3.01	2.80	2.38	2.02
47	3.17	2.94	2.48	2.09
48	3.36	3.10	2.62	2.20
49	3.55	3.28	2.75	2.32
50	3.76	3.49	2.90	2.41
51	4.00	3.70	3.07	2.56
52	4.26	3.95	3.28	2.71
53	4.56	4.21	3.49	2.89
54	4.87	4.49	3.71	3.07
55	5.20	4.79	3.97	3.29
56	5.57	5.14	4.24	3.50
57	5.98	5.51	4.56	3.77
58	6.42	5.92	4.90	4.04
59	6.86	6.34	5.24	4.33
60	7.36	6.82	5.63	4.66
61	7.93	7.34	6.06	5.00
62	8.57	7.94	6.54	5.39
63	9.26	8.56	7.06	5.82
64	10.00	9.22	7.61	6.29
65	10.82	9.94	8.21	6.79
66	11.75	10.78	8.89	7.34
67	12.80	11.75	9.68	7.97
68	13.97	12.88	10.57	8.68
69	15.25	14.11	11.53	9.42
70	16.66	15.46	12.58	10.22
71	18.19	16.96	13.72	11.11
72	19.87	18.56	15.00	12.12
73	21.70	20.30	16.38	13.22
74	23.64	22.18	17.87	14.40
75	25.74	24.16	19.46	15.67
76	28.03	26.32	21.20	17.08
77	30.54	28.62	23.08	18.60
78	33.25	31.09	25.10	20.26
79	36.16	33.71	27.28	22.06
80	39.26	36.49	29.59	23.99
81	42.55	39.41	32.03	26.03
82	46.04	42.49	34.62	28.21
83	49.74	45.73	37.33	30.47
84	53.62	49.12	40.20	32.90

TO OBTAIN QUARTERLY, SEMIANNUAL, AND ANNUAL PREMIUMS,
MULTIPLY THE ABOVE QUOTED PREMIUMS BY 3, 6, AND 12,
RESPECTIVELY. THE MONTHLY PREMIUMS FOR BANK SERVICE PLAN
AND PAYROLL DEDUCTION ISSUES ARE THE PREMIUMS LISTED ABOVE.
R25387-44-4

Date: 08/09/2016

MUTUAL OF OMAHA INSURANCE COMPANY
SCHEDULE OF MONTHLY RATES FOR POLICY FORM LT50

PER \$10 DAILY CONFINED CARE/PER \$5 DAILY COMMUNITY BASED BENEFIT

50% HOME HEALTH CARE BENEFIT

BENEFIT -- 5 YEARS

Issue Age	Elimination Periods			
	0 Day	20 Day	100 Day	365 Day
18-39	2.90	2.75	2.33	1.98
40	3.21	3.03	2.55	2.16
41	3.34	3.15	2.65	2.23
42	3.48	3.28	2.75	2.31
43	3.62	3.41	2.85	2.38
44	3.77	3.54	2.97	2.49
45	3.95	3.71	3.10	2.60
46	4.14	3.87	3.23	2.71
47	4.36	4.08	3.41	2.83
48	4.60	4.30	3.59	2.99
49	4.87	4.55	3.81	3.18
50	5.16	4.83	4.04	3.38
51	5.50	5.13	4.28	3.58
52	5.85	5.46	4.57	3.82
53	6.23	5.82	4.86	4.07
54	6.62	6.22	5.19	4.33
55	7.06	6.64	5.54	4.63
56	7.52	7.11	5.92	4.93
57	8.04	7.61	6.31	5.24
58	8.60	8.14	6.73	5.57
59	9.19	8.69	7.17	5.93
60	9.83	9.30	7.65	6.29
61	10.55	9.94	8.16	6.71
62	11.35	10.69	8.76	7.17
63	12.25	11.51	9.39	7.67
64	13.21	12.35	10.09	8.24
65	14.25	13.29	10.85	8.86
66	15.44	14.37	11.73	9.55
67	16.78	15.59	12.72	10.35
68	18.28	16.97	13.81	11.23
69	19.92	18.49	15.00	12.19
70	21.70	20.14	16.31	13.21
71	23.65	21.97	17.78	14.39
72	25.82	23.97	19.38	15.69
73	28.12	26.13	21.12	17.07
74	30.58	28.42	22.97	18.57
75	33.22	30.89	24.99	20.21
76	36.15	33.61	27.18	21.99
77	39.38	36.61	29.63	24.00
78	42.92	39.91	32.32	26.18
79	46.75	43.44	35.22	28.56
80	50.86	47.25	38.30	31.06
81	55.24	51.29	41.62	33.77
82	59.93	55.59	45.14	36.67
83	64.88	60.17	48.88	39.72
84	70.11	64.99	52.84	42.96

TO OBTAIN QUARTERLY, SEMIANNUAL, AND ANNUAL PREMIUMS,
MULTIPLY THE ABOVE QUOTED PREMIUMS BY 3, 6, AND 12,
RESPECTIVELY. THE MONTHLY PREMIUMS FOR BANK SERVICE PLAN
AND PAYROLL DEDUCTION ISSUES ARE THE PREMIUMS LISTED ABOVE.
R25387-44-4

Date: 08/09/2016

MUTUAL OF OMAHA INSURANCE COMPANY
SCHEDULE OF MONTHLY RATES FOR POLICY FORM LT50

PER \$10 DAILY CONFINED CARE/PER \$5 DAILY COMMUNITY BASED BENEFIT

50% HOME HEALTH CARE BENEFIT

Issue Age	BENEFIT -- LIFETIME			
	Elimination Periods			
	0 Day	20 Day	100 Day	365 Day
18-39	6.76	6.47	5.31	4.38
40	7.44	7.08	5.89	4.84
41	7.72	7.36	6.08	5.04
42	8.02	7.64	6.37	5.28
43	8.34	7.98	6.62	5.53
44	8.76	8.34	6.93	5.77
45	9.15	8.72	7.28	6.07
46	9.61	9.15	7.64	6.38
47	10.07	9.61	8.00	6.69
48	10.61	10.11	8.45	7.07
49	11.18	10.65	8.87	7.38
50	11.75	11.18	9.33	7.79
51	12.44	11.78	9.86	8.23
52	13.12	12.44	10.35	8.63
53	13.92	13.09	10.91	9.12
54	14.71	13.81	11.50	9.57
55	15.58	14.54	12.08	10.05
56	16.54	15.34	12.77	10.65
57	17.58	16.25	13.51	11.25
58	18.73	17.24	14.29	11.87
59	19.94	18.29	15.15	12.55
60	21.23	19.44	16.04	13.25
61	22.69	20.73	17.10	14.11
62	24.38	22.23	18.32	15.09
63	26.20	23.93	19.67	16.15
64	28.15	25.75	21.07	17.24
65	30.30	27.81	22.68	18.49
66	32.73	30.04	24.43	19.90
67	35.44	32.59	26.54	21.61
68	38.47	35.40	28.82	23.48
69	41.72	38.41	31.33	25.56
70	45.26	41.70	34.05	27.82
71	49.23	45.31	37.08	30.34
72	53.58	49.39	40.47	33.18
73	58.32	53.76	44.07	36.14
74	63.42	58.42	47.90	39.27
75	68.92	63.50	52.11	42.76
76	74.99	69.22	56.75	46.54
77	81.71	75.69	61.99	50.78
78	89.07	82.97	67.82	55.42
79	97.03	90.94	74.11	60.39
80	105.58	99.53	80.93	65.78
81	114.70	108.87	88.25	71.55
82	124.40	118.84	96.08	77.71
83	134.70	129.50	104.41	84.20
84	145.56	140.79	113.23	91.08

TO OBTAIN QUARTERLY, SEMIANNUAL, AND ANNUAL PREMIUMS,
MULTIPLY THE ABOVE QUOTED PREMIUMS BY 3, 6, AND 12,
RESPECTIVELY. THE MONTHLY PREMIUMS FOR BANK SERVICE PLAN
AND PAYROLL DEDUCTION ISSUES ARE THE PREMIUMS LISTED ABOVE.
R25387-44-4

Date: 08/09/2016

MUTUAL OF OMAHA INSURANCE COMPANY
SCHEDULE OF MONTHLY RATES FOR RIDER FORM 0DX5M

PER \$10 DAILY CONFINED CARE/PER \$10 DAILY COMMUNITY BASED BENEFIT
100% HOME HEALTH CARE BENEFIT

Issue Age	BENEFIT -- 1 YEAR			
	ELIMINATION PERIODS			
	0 Day	20 Day	100 Day	365 Day
18-39	2.80	2.60	2.24	1.93
40	3.06	2.81	2.42	2.09
41	3.13	2.88	2.47	2.12
42	3.22	2.95	2.54	2.18
43	3.34	3.05	2.62	2.26
44	3.41	3.13	2.68	2.30
45	3.52	3.22	2.76	2.38
46	3.61	3.34	2.82	2.39
47	3.72	3.46	2.92	2.46
48	3.88	3.59	3.04	2.57
49	4.01	3.73	3.13	2.62
50	4.16	3.90	3.28	2.74
51	4.30	4.06	3.37	2.80
52	4.48	4.22	3.50	2.90
53	4.64	4.38	3.62	2.99
54	4.81	4.54	3.76	3.10
55	4.96	4.68	3.86	3.19
56	5.14	4.85	4.01	3.32
57	5.33	5.03	4.13	3.40
58	5.53	5.21	4.27	3.50
59	5.74	5.40	4.42	3.60
60	5.98	5.62	4.58	3.74
61	6.17	5.81	4.72	3.83
62	6.44	6.05	4.91	4.00
63	6.73	6.29	5.14	4.20
64	7.01	6.53	5.32	4.33
65	7.32	6.79	5.56	4.54
66	7.66	7.08	5.80	4.73
67	8.00	7.38	6.02	4.91
68	8.39	7.73	6.28	5.09
69	8.81	8.11	6.55	5.29
70	9.25	8.51	6.83	5.48
71	9.68	8.90	7.12	5.68
72	10.08	9.25	7.39	5.90
73	10.42	9.55	7.63	6.10
74	10.70	9.82	7.86	6.29
75	10.98	10.09	8.09	6.49
76	11.28	10.38	8.32	6.67
77	11.65	10.72	8.58	6.88
78	12.05	11.09	8.87	7.10
79	12.50	11.52	9.19	7.33
80	12.98	11.96	9.52	7.58
81	13.50	12.43	9.86	7.82
82	14.04	12.95	10.25	8.11
83	14.62	13.50	10.64	8.38
84	15.25	14.08	11.08	8.71

TO OBTAIN QUARTERLY, SEMIANNUAL, AND ANNUAL PREMIUMS, MULTIPLY THE ABC QUOTED PREMIUMS BY 3, 6, AND 12, RESPECTIVELY. THE MONTHLY PREMIUMS FOR BANK SERVICE PLAN AND PAYROLL DEDUCTION ISSUES ARE THE PREMIUMS LISTED / R25387-44-3

Date: 08/09/2016

MUTUAL OF OMAHA INSURANCE COMPANY
SCHEDULE OF MONTHLY RATES FOR RIDER FORM 0DX5M

PER \$10 DAILY CONFINED CARE/PER \$10 DAILY COMMUNITY BASED BENEFIT
100% HOME HEALTH CARE BENEFIT

BENEFIT -- TWO YEARS

Issue Age	ELIMINATION PERIODS			
	0 Day	20 Day	100 Day	365 Day
18-39	3.96	3.78	3.22	2.75
40	4.28	4.07	3.48	2.98
41	4.39	4.18	3.55	3.04
42	4.52	4.30	3.66	3.13
43	4.66	4.42	3.76	3.19
44	4.78	4.54	3.85	3.28
45	4.94	4.66	3.94	3.34
46	5.08	4.79	4.06	3.43
47	5.24	4.94	4.15	3.48
48	5.39	5.09	4.27	3.58
49	5.56	5.26	4.39	3.67
50	5.76	5.44	4.54	3.78
51	5.95	5.62	4.69	3.92
52	6.16	5.80	4.82	4.01
53	6.38	5.99	5.00	4.18
54	6.58	6.19	5.15	4.28
55	6.84	6.41	5.35	4.48
56	7.12	6.65	5.54	4.61
57	7.42	6.91	5.74	4.78
58	7.75	7.19	5.98	4.96
59	8.12	7.50	6.20	5.12
60	8.50	7.81	6.44	5.32
61	8.90	8.14	6.70	5.52
62	9.28	8.48	6.94	5.68
63	9.62	8.80	7.16	5.83
64	9.98	9.13	7.36	5.93
65	10.33	9.47	7.60	6.08
66	10.74	9.84	7.85	6.28
67	11.26	10.30	8.20	6.53
68	11.89	10.85	8.65	6.90
69	12.67	11.50	9.20	7.36
70	13.46	12.17	9.77	7.84
71	14.20	12.80	10.31	8.30
72	14.83	13.36	10.78	8.70
73	15.30	13.80	11.15	9.01
74	15.68	14.16	11.47	9.29
75	16.00	14.48	11.75	9.54
76	16.32	14.82	12.04	9.77
77	16.72	15.20	12.34	10.02
78	17.17	15.62	12.66	10.26
79	17.65	16.08	13.00	10.51
80	18.16	16.54	13.37	10.81
81	18.67	17.04	13.73	11.08
82	19.24	17.54	14.11	11.35
83	19.80	18.08	14.50	11.63
84	20.39	18.62	14.92	11.95

TO OBTAIN QUARTERLY, SEMIANNUAL, AND ANNUAL PREMIUMS, MULTIPLY THE ABC QUOTED PREMIUMS BY 3, 6, AND 12, RESPECTIVELY. THE MONTHLY PREMIUMS FOR B, SERVICE PLAN AND PAYROLL DEDUCTION ISSUES ARE THE PREMIUMS LISTED ABO VI R25387-44-3

Date: 08/09/2016

MUTUAL OF OMAHA INSURANCE COMPANY
SCHEDULE OF MONTHLY RATES FOR RIDER FORM 0DX5M

PER \$10 DAILY CONFINED CARE/PER \$10 DAILY COMMUNITY BASED BENEFIT
100% HOME HEALTH CARE BENEFIT

Issue Age	BENEFIT -- 3 YEARS			
	ELIMINATION PERIOD			
	0 Day	20 Day	100 Day	365 Day
18-39	4.94	4.54	3.83	3.23
40	5.40	4.96	4.19	3.54
41	5.53	5.09	4.30	3.64
42	5.69	5.22	4.42	3.73
43	5.82	5.34	4.51	3.80
44	5.93	5.45	4.58	3.85
45	6.10	5.57	4.70	3.96
46	6.23	5.70	4.78	4.01
47	6.40	5.87	4.91	4.12
48	6.64	6.07	5.06	4.22
49	6.84	6.28	5.21	4.32
50	7.14	6.53	5.39	4.44
51	7.39	6.78	5.57	4.57
52	7.68	7.03	5.77	4.74
53	7.98	7.30	5.98	4.90
54	8.26	7.55	6.19	5.08
55	8.54	7.79	6.38	5.23
56	8.83	8.06	6.61	5.42
57	9.16	8.35	6.84	5.60
58	9.48	8.65	7.08	5.80
59	9.82	8.98	7.34	6.00
60	10.18	9.32	7.62	6.23
61	10.52	9.66	7.88	6.43
62	10.90	9.98	8.14	6.64
63	11.21	10.26	8.38	6.85
64	11.53	10.51	8.60	7.03
65	11.86	10.79	8.81	7.19
66	12.19	11.08	9.04	7.38
67	12.58	11.42	9.32	7.60
68	13.03	11.88	9.66	7.86
69	13.57	12.43	10.06	8.14
70	14.15	13.00	10.46	8.41
71	14.65	13.51	10.84	8.69
72	15.06	13.92	11.14	8.92
73	15.28	14.15	11.30	9.04
74	15.31	14.21	11.35	9.07
75	15.34	14.26	11.38	9.07
76	15.46	14.36	11.45	9.13
77	15.76	14.62	11.68	9.32
78	16.25	15.05	12.04	9.62
79	16.90	15.58	12.49	10.01
80	17.63	16.22	13.02	10.45
81	18.49	16.94	13.62	10.96
82	19.45	17.77	14.33	11.56
83	20.54	18.70	15.11	12.22
84	21.73	19.72	15.97	12.94

TO OBTAIN QUARTERLY, SEMIANNUAL, AND ANNUAL PREMIUMS, MULTIPLY THE ABC QUOTED PREMIUMS BY 3, 6, AND 12, RESPECTIVELY. THE MONTHLY PREMIUMS FOR B, SERVICE PLAN AND PAYROLL DEDUCTION ISSUES ARE THE PREMIUMS LISTED ABOVE
R25387-44-3

Date: 08/09/2016

MUTUAL OF OMAHA INSURANCE COMPANY
SCHEDULE OF MONTHLY RATES FOR RIDER FORM 0DX5M

PER \$10 DAILY CONFINED CARE/PER \$10 DAILY COMMUNITY BASED BENEFIT
100% HOME HEALTH CARE BENEFIT

Issue Age	BENEFIT -- 5 YEARS			
	ELIMINATION PERIODS			
	0 Day	20 Day	100 Day	365 Day
18-39	7.04	6.56	5.53	4.68
40	7.63	7.11	5.94	4.97
41	7.84	7.30	6.08	5.07
42	8.04	7.50	6.25	5.19
43	8.24	7.68	6.35	5.26
44	8.43	7.85	6.52	5.41
45	8.67	8.04	6.66	5.50
46	8.89	8.25	6.82	5.63
47	9.15	8.49	7.02	5.81
48	9.48	8.78	7.26	6.01
49	9.81	9.09	7.50	6.19
50	10.19	9.43	7.81	6.48
51	10.60	9.78	8.10	6.71
52	10.96	10.14	8.38	6.93
53	11.33	10.47	8.69	7.19
54	11.64	10.84	8.95	7.38
55	12.01	11.20	9.24	7.63
56	12.36	11.56	9.53	7.84
57	12.75	11.94	9.81	8.07
58	13.13	12.32	10.09	8.27
59	13.57	12.69	10.38	8.49
60	14.00	13.09	10.67	8.69
61	14.48	13.51	10.97	8.90
62	14.96	13.94	11.29	9.15
63	15.44	14.37	11.62	9.42
64	15.97	14.80	11.97	9.68
65	16.50	15.24	12.32	9.94
66	17.07	15.71	12.68	10.24
67	17.64	16.23	13.08	10.54
68	18.27	16.81	13.52	10.87
69	18.99	17.45	14.01	11.26
70	19.71	18.13	14.53	11.66
71	20.42	18.77	15.03	12.03
72	21.08	19.38	15.50	12.40
73	21.65	19.91	15.93	12.74
74	22.17	20.38	16.31	13.06
75	22.68	20.88	16.71	13.38
76	23.22	21.37	17.11	13.68
77	23.88	21.98	17.61	14.11
78	24.63	22.66	18.17	14.56
79	25.43	23.41	18.77	15.05
80	26.31	24.20	19.42	15.59
81	27.21	25.03	20.11	16.15
82	28.23	25.93	20.83	16.74
83	29.26	26.86	21.60	17.37
84	30.36	27.85	22.43	18.06

TO OBTAIN QUARTERLY, SEMIANNUAL, AND ANNUAL PREMIUMS, MULTIPLY THE ABOVE QUOTED PREMIUMS BY 3, 6, AND 12, RESPECTIVELY. THE MONTHLY PREMIUMS FOR B. SERVICE PLAN AND PAYROLL DEDUCTION ISSUES ARE THE PREMIUMS LISTED ABOVE
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Date: 08/09/2016

MUTUAL OF OMAHA INSURANCE COMPANY
SCHEDULE OF MONTHLY RATES FOR RIDER FORM 0DX5M

PER \$10 DAILY CONFINED CARE/PER \$10 DAILY COMMUNITY BASED BENEFIT
100% HOME HEALTH CARE BENEFIT

Issue Age	BENEFIT -- LIFETIME			
	ELIMINATION PERIODS			
	0 Day	20 Day	100 Day	365 Day
18-39	15.28	14.40	11.80	9.67
40	16.16	15.28	12.51	10.22
41	16.59	15.63	12.84	10.56
42	16.95	16.00	13.17	10.82
43	17.39	16.41	13.49	11.09
44	17.85	16.84	13.87	11.41
45	18.32	17.30	14.27	11.80
46	18.88	17.80	14.73	12.18
47	19.41	18.32	15.13	12.49
48	19.98	18.85	15.57	12.86
49	20.64	19.42	16.08	13.29
50	21.28	20.02	16.54	13.65
51	21.91	20.57	16.99	14.05
52	22.49	21.05	17.38	14.35
53	23.00	21.44	17.69	14.56
54	23.39	21.68	17.89	14.76
55	23.79	21.97	18.11	14.91
56	24.19	22.26	18.32	15.07
57	24.79	22.67	18.62	15.29
58	25.48	23.24	19.08	15.68
59	26.27	23.88	19.58	16.04
60	27.13	24.56	20.10	16.45
61	28.00	25.34	20.70	16.91
62	28.87	26.12	21.29	17.38
63	29.81	26.96	21.91	17.80
64	30.78	27.90	22.59	18.32
65	31.75	28.81	23.27	18.80
66	32.81	29.82	24.04	19.34
67	33.85	30.82	24.82	19.99
68	34.96	31.84	25.69	20.74
69	36.17	32.93	26.62	21.52
70	37.34	34.02	27.53	22.30
71	38.58	35.15	28.47	23.08
72	39.73	36.26	29.41	23.87
73	40.89	37.30	30.28	24.58
74	41.99	38.29	31.10	25.27
75	43.13	39.34	31.98	25.97
76	44.29	40.48	32.86	26.70
77	45.49	41.72	33.83	27.44
78	46.75	43.12	34.88	28.24
79	48.05	44.56	35.97	29.07
80	49.44	46.16	37.15	29.89
81	50.95	47.87	38.40	30.82
82	52.48	49.63	39.75	31.82
83	54.15	51.56	41.17	32.86
84	55.90	53.50	42.60	33.93

TO OBTAIN QUARTERLY, SEMIANNUAL, AND ANNUAL PREMIUMS, MULTIPLY THE ABOVE QUOTED PREMIUMS BY 3, 6, AND 12, RESPECTIVELY. THE MONTHLY PREMIUMS FOR B. SERVICE PLAN AND PAYROLL DEDUCTION ISSUES ARE THE PREMIUMS LISTED ABOVE
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Date: 08/09/2016

MUTUAL OF OMAHA INSURANCE COMPANY
SCHEDULE OF MONTHLY RATES FOR RIDER FORM 0DX5M

PER \$10 DAILY CONFINED CARE/PER \$8 DAILY COMMUNITY BASED BENEFIT
80% HOME HEALTH CARE BENEFIT

Issue Age	BENEFIT -- 1 YEAR			
	ELIMINATION PERIODS			
	0 Day	20 Day	100 Day	365 Day
18-39	2.52	2.36	2.08	1.81
40	2.76	2.56	2.21	1.92
41	2.82	2.62	2.27	1.97
42	2.89	2.70	2.32	1.99
43	3.00	2.78	2.41	2.09
44	3.07	2.84	2.45	2.12
45	3.16	2.92	2.53	2.20
46	3.26	3.04	2.59	2.21
47	3.36	3.14	2.69	2.32
48	3.47	3.28	2.80	2.38
49	3.61	3.40	2.87	2.44
50	3.76	3.55	3.00	2.53
51	3.88	3.70	3.10	2.60
52	4.03	3.85	3.22	2.68
53	4.18	4.00	3.32	2.76
54	4.34	4.13	3.46	2.89
55	4.48	4.26	3.53	2.93
56	4.63	4.42	3.68	3.06
57	4.80	4.57	3.82	3.17
58	4.97	4.74	3.92	3.24
59	5.16	4.91	4.06	3.35
60	5.38	5.11	4.21	3.46
61	5.56	5.28	4.34	3.56
62	5.82	5.50	4.52	3.71
63	6.07	5.74	4.72	3.88
64	6.32	5.94	4.90	4.03
65	6.59	6.18	5.10	4.20
66	6.90	6.46	5.32	4.39
67	7.21	6.72	5.54	4.56
68	7.55	7.04	5.76	4.72
69	7.94	7.39	6.02	4.91
70	8.33	7.74	6.28	5.09
71	8.72	8.09	6.52	5.26
72	9.08	8.42	6.79	5.47
73	9.37	8.70	7.02	5.68
74	9.64	8.93	7.24	5.86
75	9.88	9.18	7.44	6.04
76	10.18	9.43	7.64	6.19
77	10.50	9.76	7.90	6.40
78	10.85	10.09	8.14	6.58
79	11.27	10.48	8.45	6.82
80	11.70	10.88	8.74	7.02
81	12.16	11.32	9.07	7.27
82	12.66	11.78	9.41	7.51
83	13.18	12.28	9.78	7.79
84	13.73	12.82	10.18	8.08

TO OBTAIN QUARTERLY, SEMIANNUAL, AND ANNUAL PREMIUMS, MULTIPLY THE ABOVE QUOTED PREMIUMS BY 3, 6, AND 12, RESPECTIVELY. THE MONTHLY PREMIUMS FOR B SERVICE PLAN AND PAYROLL DEDUCTION ISSUES ARE THE PREMIUMS LISTED ABOVE
R25387-44-3

Date: 08/09/2016

MUTUAL OF OMAHA INSURANCE COMPANY
SCHEDULE OF MONTHLY RATES FOR RIDER FORM 0DX5M

PER \$10 DAILY CONFINED CARE/PER \$8 DAILY COMMUNITY BASED BENEFIT
80% HOME HEALTH CARE BENEFIT

Issue Age	BENEFIT -- 2 YEARS			
	ELIMINATION PERIODS			
	0 Day	20 Day	100 Day	365 Day
18-39	3.60	3.47	2.99	2.57
40	3.90	3.76	3.23	2.78
41	4.00	3.84	3.29	2.82
42	4.12	3.96	3.41	2.94
43	4.24	4.06	3.48	2.99
44	4.36	4.16	3.58	3.07
45	4.50	4.28	3.67	3.16
46	4.62	4.42	3.76	3.20
47	4.78	4.54	3.85	3.28
48	4.92	4.68	3.96	3.35
49	5.05	4.84	4.08	3.44
50	5.26	4.99	4.20	3.54
51	5.42	5.16	4.34	3.65
52	5.60	5.33	4.49	3.78
53	5.81	5.51	4.64	3.91
54	6.00	5.71	4.78	4.00
55	6.22	5.92	4.96	4.16
56	6.49	6.12	5.15	4.34
57	6.76	6.36	5.32	4.45
58	7.06	6.61	5.54	4.64
59	7.39	6.89	5.76	4.82
60	7.74	7.19	5.98	4.98
61	8.11	7.49	6.22	5.17
62	8.45	7.80	6.44	5.32
63	8.77	8.10	6.64	5.44
64	9.08	8.40	6.84	5.57
65	9.41	8.70	7.06	5.71
66	9.78	9.06	7.30	5.86
67	10.24	9.47	7.62	6.13
68	10.84	9.98	8.04	6.47
69	11.53	10.58	8.56	6.91
70	12.26	11.20	9.08	7.36
71	12.92	11.80	9.58	7.78
72	13.51	12.29	10.02	8.17
73	13.94	12.70	10.36	8.44
74	14.27	13.03	10.66	8.72
75	14.56	13.32	10.92	8.96
76	14.86	13.63	11.17	9.16
77	15.23	13.99	11.45	9.38
78	15.64	14.38	11.76	9.64
79	16.07	14.78	12.08	9.88
80	16.52	15.22	12.42	10.14
81	17.00	15.67	12.76	10.39
82	17.51	16.13	13.10	10.64
83	18.04	16.63	13.48	10.91
84	18.58	17.14	13.88	11.24

TO OBTAIN QUARTERLY, SEMIANNUAL, AND ANNUAL PREMIUMS, MULTIPLY THE ABC QUOTED PREMIUMS BY 3, 6, AND 12, RESPECTIVELY. THE MONTHLY PREMIUMS FOR B, SERVICE PLAN AND PAYROLL DEDUCTION ISSUES ARE THE PREMIUMS LISTED ABOVE
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Date: 08/09/2016

MUTUAL OF OMAHA INSURANCE COMPANY
SCHEDULE OF MONTHLY RATES FOR RIDER FORM 0DX5M

PER \$10 DAILY CONFINED CARE/PER \$8 DAILY COMMUNITY BASED BENEFIT
80% HOME HEALTH CARE BENEFIT

Issue Age	BENEFIT -- 3 YEARS			
	ELIMINATION PERIODS			
	0 Day	20 Day	100 Day	365 Day
18-39	4.55	4.24	3.59	3.04
40	4.98	4.61	3.94	3.37
41	5.09	4.73	4.04	3.46
42	5.24	4.86	4.14	3.53
43	5.38	4.96	4.24	3.61
44	5.47	5.08	4.30	3.65
45	5.60	5.20	4.42	3.76
46	5.74	5.32	4.49	3.80
47	5.90	5.45	4.61	3.90
48	6.11	5.65	4.75	4.00
49	6.30	5.84	4.90	4.12
50	6.58	6.08	5.06	4.21
51	6.80	6.32	5.23	4.33
52	7.07	6.55	5.44	4.50
53	7.36	6.78	5.62	4.66
54	7.61	7.02	5.82	4.82
55	7.86	7.24	6.00	4.97
56	8.14	7.50	6.20	5.12
57	8.44	7.76	6.44	5.34
58	8.74	8.06	6.65	5.48
59	9.04	8.36	6.90	5.69
60	9.36	8.68	7.15	5.89
61	9.70	8.98	7.40	6.10
62	10.01	9.28	7.64	6.29
63	10.32	9.53	7.87	6.50
64	10.62	9.78	8.08	6.67
65	10.92	10.02	8.27	6.83
66	11.22	10.30	8.50	7.02
67	11.59	10.63	8.75	7.20
68	11.99	11.05	9.08	7.46
69	12.50	11.57	9.46	7.72
70	13.03	12.10	9.83	7.98
71	13.50	12.56	10.18	8.23
72	13.86	12.95	10.46	8.45
73	14.06	13.16	10.62	8.57
74	14.10	13.20	10.66	8.62
75	14.12	13.25	10.67	8.59
76	14.22	13.36	10.75	8.66
77	14.51	13.60	10.96	8.84
78	14.95	13.99	11.30	9.13
79	15.56	14.50	11.74	9.49
80	16.22	15.10	12.24	9.92
81	17.02	15.76	12.80	10.40
82	17.92	16.54	13.46	10.96
83	18.91	17.38	14.20	11.60
84	20.02	18.34	15.00	12.28

TO OBTAIN QUARTERLY, SEMIANNUAL, AND ANNUAL PREMIUMS, MULTIPLY THE ABC PREMIUMS BY 3, 6 AND 12 RESPECTIVELY. THE MONTHLY PREMIUMS FOR BANK SERV PAYROLL DEDUCTION ISSUES ARE THE PREMIUMS LISTED ABOVE.

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Date: 08/09/2016

MUTUAL OF OMAHA INSURANCE COMPANY
SCHEDULE OF MONTHLY RATES FOR RIDER FORM 0DX5M

PER \$10 DAILY CONFINED CARE/PER \$8 DAILY COMMUNITY BASED BENEFIT
80% HOME HEALTH CARE BENEFIT

Issue Age	BENEFIT -- 5 YEARS			
	ELIMINATION PERIODS			
	0 Day	20 Day	100 Day	365 Day
18-39	6.55	6.16	5.26	4.49
40	7.11	6.68	5.65	4.77
41	7.30	6.88	5.79	4.87
42	7.48	7.04	5.92	4.97
43	7.67	7.22	6.03	5.04
44	7.83	7.38	6.19	5.19
45	8.07	7.57	6.34	5.30
46	8.27	7.77	6.47	5.39
47	8.51	7.96	6.66	5.57
48	8.83	8.24	6.91	5.79
49	9.15	8.54	7.12	5.93
50	9.48	8.87	7.41	6.19
51	9.88	9.22	7.67	6.38
52	10.21	9.53	7.96	6.67
53	10.54	9.83	8.24	6.91
54	10.84	10.18	8.50	7.11
55	11.18	10.52	8.79	7.34
56	11.53	10.87	9.04	7.52
57	11.87	11.21	9.31	7.73
58	12.23	11.57	9.57	7.91
59	12.63	11.94	9.88	8.16
60	13.02	12.32	10.12	8.33
61	13.46	12.72	10.42	8.56
62	13.93	13.11	10.71	8.77
63	14.37	13.51	11.03	9.02
64	14.86	13.92	11.36	9.28
65	15.36	14.32	11.68	9.53
66	15.86	14.76	12.03	9.81
67	16.41	15.26	12.42	10.11
68	17.01	15.80	12.85	10.44
69	17.68	16.41	13.31	10.80
70	18.35	17.02	13.81	11.20
71	19.00	17.64	14.27	11.53
72	19.60	18.21	14.71	11.88
73	20.14	18.70	15.14	12.25
74	20.61	19.18	15.50	12.53
75	21.11	19.61	15.86	12.83
76	21.59	20.11	16.25	13.13
77	22.22	20.67	16.72	13.52
78	22.92	21.31	17.27	13.98
79	23.67	21.99	17.82	14.44
80	24.46	22.73	18.43	14.94
81	25.33	23.51	19.09	15.50
82	26.26	24.37	19.78	16.06
83	27.24	25.26	20.52	16.68
84	28.25	26.19	21.30	17.31

TO OBTAIN QUARTERLY, SEMIANNUAL, AND ANNUAL PREMIUMS,
MULTIPLY THE ABOVE QUOTED PREMIUMS BY 3, 6, AND 12,
RESPECTIVELY. THE MONTHLY PREMIUMS FOR BANK SERVICE PLAN
AND PAYROLL DEDUCTION ISSUES ARE THE PREMIUMS LISTED ABOVE.
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MUTUAL OF OMAHA INSURANCE COMPANY
SCHEDULE OF MONTHLY RATES FOR RIDER FORM 0DX5M

PER \$10 DAILY CONFINED CARE/PER \$8 DAILY COMMUNITY BASED BENEFIT
80% HOME HEALTH CARE BENEFIT

Issue Age	BENEFIT -- LIFETIME			
	ELIMINATION PERIODS			
	0 Day	20 Day	100 Day	365 Day
18-39	14.34	13.70	11.31	9.37
40	15.20	14.52	12.01	9.92
41	15.60	14.87	12.31	10.21
42	15.94	15.16	12.64	10.50
43	16.37	15.57	12.96	10.79
44	16.78	16.00	13.31	11.06
45	17.24	16.45	13.70	11.40
46	17.76	16.94	14.12	11.77
47	18.25	17.39	14.52	12.12
48	18.80	17.91	14.96	12.49
49	19.42	18.46	15.42	12.86
50	19.99	19.02	15.89	13.25
51	20.62	19.55	16.30	13.60
52	21.15	19.99	16.68	13.90
53	21.63	20.35	16.99	14.20
54	21.98	20.61	17.16	14.27
55	22.37	20.88	17.38	14.46
56	22.78	21.15	17.60	14.65
57	23.27	21.55	17.89	14.82
58	23.95	22.09	18.32	15.21
59	24.70	22.70	18.80	15.57
60	25.51	23.34	19.28	15.94
61	26.35	24.08	19.86	16.38
62	27.17	24.80	20.44	16.82
63	28.05	25.61	21.01	17.24
64	28.95	26.49	21.68	17.76
65	29.86	27.38	22.32	18.20
66	30.84	28.33	23.08	18.80
67	31.82	29.28	23.79	19.33
68	32.92	30.28	24.66	20.07
69	34.01	31.29	25.56	20.84
70	35.15	32.36	26.43	21.61
71	36.26	33.38	27.33	22.37
72	37.38	34.42	28.24	23.11
73	38.45	35.44	29.07	23.80
74	39.49	36.37	29.86	24.48
75	40.56	37.38	30.68	25.21
76	41.65	38.47	31.54	25.87
77	42.77	39.62	32.46	26.61
78	43.97	40.96	33.46	27.33
79	45.18	42.34	34.53	28.13
80	46.50	43.86	35.65	28.95
81	47.91	45.49	36.87	29.89
82	49.36	47.18	38.14	30.84
83	50.95	48.98	39.49	31.89
84	52.57	50.84	40.90	32.92

TO OBTAIN QUARTERLY, SEMIANNUAL, AND ANNUAL PREMIUMS,
MULTIPLY THE ABOVE QUOTED PREMIUMS BY 3, 6, AND 12,
RESPECTIVELY. THE MONTHLY PREMIUMS FOR BANK SERVICE PLAN
AND PAYROLL DEDUCTION ISSUES ARE THE PREMIUMS LISTED ABOVE.
R25387-44-3

Date: 08/09/2016

MUTUAL OF OMAHA INSURANCE COMPANY
SCHEDULE OF MONTHLY RATES FOR RIDER FORM 0DX5M

PER \$10 DAILY CONFINED CARE/PER \$5 DAILY COMMUNITY BASED BENEFIT
50% HOME HEALTH CARE BENEFIT

BENEFIT -- 1 YEAR

Issue Age	Elimination Periods			
	0 Day	20 Day	100 Day	365 Day
18-39	2.11	1.98	1.72	1.49
40	2.30	2.14	1.86	1.63
41	2.35	2.18	1.90	1.66
42	2.44	2.26	1.96	1.70
43	2.50	2.32	2.02	1.75
44	2.56	2.38	2.05	1.76
45	2.64	2.45	2.11	1.82
46	2.74	2.53	2.17	1.86
47	2.80	2.63	2.24	1.90
48	2.92	2.72	2.34	2.02
49	3.02	2.84	2.40	2.03
50	3.13	2.96	2.51	2.14
51	3.25	3.08	2.59	2.18
52	3.36	3.22	2.68	2.24
53	3.49	3.32	2.77	2.32
54	3.61	3.46	2.88	2.41
55	3.73	3.56	2.95	2.44
56	3.88	3.70	3.07	2.56
57	4.01	3.83	3.16	2.62
58	4.16	3.96	3.28	2.70
59	4.31	4.10	3.40	2.82
60	4.49	4.26	3.52	2.92
61	4.64	4.42	3.64	2.98
62	4.84	4.60	3.78	3.11
63	5.06	4.78	3.95	3.26
64	5.28	4.96	4.08	3.36
65	5.50	5.17	4.26	3.52
66	5.77	5.38	4.44	3.67
67	6.01	5.62	4.63	3.82
68	6.31	5.87	4.84	3.97
69	6.64	6.16	5.03	4.12
70	6.96	6.46	5.26	4.27
71	7.28	6.77	5.45	4.39
72	7.60	7.03	5.66	4.56
73	7.82	7.26	5.86	4.72
74	8.05	7.45	6.04	4.88
75	8.26	7.67	6.20	5.02
76	8.50	7.88	6.38	5.16
77	8.76	8.14	6.59	5.33
78	9.06	8.42	6.80	5.50
79	9.40	8.75	7.06	5.68
80	9.77	9.10	7.30	5.86
81	10.14	9.46	7.57	6.07
82	10.57	9.84	7.87	6.29
83	11.02	10.25	8.17	6.52
84	11.47	10.69	8.50	6.76

TO OBTAIN QUARTERLY, SEMIANNUAL, AND ANNUAL PREMIUMS,
MULTIPLY THE ABOVE QUOTED PREMIUMS BY 3, 6, AND 12,
RESPECTIVELY. THE MONTHLY PREMIUMS FOR BANK SERVICE PLAN
AND PAYROLL DEDUCTION ISSUES ARE THE PREMIUMS LISTED ABOVE.
R25387-44-3

Date: 08/09/2016

MUTUAL OF OMAHA INSURANCE COMPANY
SCHEDULE OF MONTHLY RATES FOR RIDER FORM 0DX5M

PER \$10 DAILY CONFINED CARE/PER \$5 DAILY COMMUNITY BASED BENEFIT
50% HOME HEALTH CARE BENEFIT

BENEFIT -- 2 YEARS

Issue Age	Elimination Periods			
	0 Day	20 Day	100 Day	365 Day
18-39	3.06	2.95	2.54	2.20
40	3.30	3.18	2.74	2.38
41	3.38	3.25	2.80	2.41
42	3.50	3.35	2.89	2.50
43	3.59	3.44	2.95	2.53
44	3.71	3.53	3.02	2.59
45	3.80	3.64	3.10	2.65
46	3.91	3.73	3.19	2.74
47	4.04	3.85	3.28	2.78
48	4.16	3.97	3.36	2.86
49	4.30	4.09	3.46	2.92
50	4.46	4.24	3.56	2.99
51	4.60	4.38	3.68	3.10
52	4.75	4.52	3.82	3.22
53	4.92	4.68	3.94	3.30
54	5.08	4.84	4.06	3.41
55	5.28	5.00	4.21	3.54
56	5.50	5.20	4.36	3.65
57	5.72	5.38	4.52	3.80
58	5.99	5.62	4.70	3.94
59	6.28	5.86	4.90	4.08
60	6.56	6.10	5.08	4.24
61	6.88	6.35	5.27	4.38
62	7.16	6.61	5.46	4.51
63	7.44	6.86	5.64	4.64
64	7.70	7.12	5.81	4.74
65	7.97	7.39	5.99	4.85
66	8.30	7.68	6.19	4.99
67	8.69	8.02	6.46	5.20
68	9.19	8.46	6.83	5.52
69	9.78	8.98	7.24	5.86
70	10.39	9.50	7.70	6.24
71	10.97	9.98	8.12	6.61
72	11.46	10.43	8.48	6.90
73	11.81	10.76	8.78	7.16
74	12.10	11.05	9.04	7.40
75	12.35	11.30	9.26	7.60
76	12.60	11.56	9.47	7.78
77	12.91	11.86	9.71	7.96
78	13.25	12.19	9.98	8.17
79	13.63	12.54	10.24	8.36
80	14.02	12.91	10.54	8.59
81	14.41	13.28	10.82	8.82
82	14.84	13.69	11.11	9.02
83	15.29	14.11	11.42	9.25
84	15.76	14.53	11.76	9.52

TO OBTAIN QUARTERLY, SEMIANNUAL, AND ANNUAL PREMIUMS,
MULTIPLY THE ABOVE QUOTED PREMIUMS BY 3, 6, AND 12,
RESPECTIVELY. THE MONTHLY PREMIUMS FOR BANK SERVICE PLAN
AND PAYROLL DEDUCTION ISSUES ARE THE PREMIUMS LISTED ABOVE.
R25387-44-3

Date: 08/09/2016

MUTUAL OF OMAHA INSURANCE COMPANY
SCHEDULE OF MONTHLY RATES FOR RIDER FORM 0DX5M

PER \$10 DAILY CONFINED CARE/PER \$5 DAILY COMMUNITY BASED BENEFIT
50% HOME HEALTH CARE BENEFIT

Issue Age	Elimination Periods			
	0 Day	20 Day	100 Day	365 Day
18-39	3.91	3.64	3.10	2.63
40	4.27	3.97	3.38	2.88
41	4.38	4.07	3.48	2.98
42	4.51	4.18	3.56	3.04
43	4.61	4.27	3.65	3.12
44	4.72	4.37	3.70	3.13
45	4.82	4.46	3.80	3.24
46	4.94	4.56	3.86	3.28
47	5.08	4.69	3.97	3.36
48	5.24	4.86	4.09	3.44
49	5.42	5.03	4.22	3.54
50	5.65	5.22	4.36	3.62
51	5.86	5.44	4.51	3.74
52	6.10	5.63	4.67	3.88
53	6.31	5.84	4.82	3.98
54	6.53	6.04	5.02	4.15
55	6.76	6.25	5.16	4.26
56	7.00	6.46	5.35	4.44
57	7.25	6.68	5.53	4.58
58	7.50	6.92	5.72	4.73
59	7.79	7.20	5.94	4.90
60	8.06	7.46	6.16	5.08
61	8.33	7.74	6.36	5.23
62	8.62	7.97	6.58	5.44
63	8.88	8.21	6.76	5.57
64	9.14	8.42	6.95	5.74
65	9.40	8.63	7.12	5.87
66	9.65	8.86	7.32	6.05
67	9.97	9.14	7.54	6.22
68	10.33	9.52	7.80	6.40
69	10.75	9.94	8.12	6.64
70	11.21	10.42	8.45	6.86
71	11.59	10.81	8.75	7.08
72	11.92	11.14	9.00	7.27
73	12.10	11.32	9.14	7.38
74	12.13	11.38	9.16	7.38
75	12.16	11.40	9.19	7.42
76	12.23	11.48	9.25	7.46
77	12.47	11.69	9.44	7.62
78	12.88	12.04	9.72	7.85
79	13.38	12.47	10.09	8.16
80	13.96	12.97	10.54	8.56
81	14.64	13.56	11.00	8.93
82	15.42	14.22	11.58	9.43
83	16.26	14.96	12.22	9.98
84	17.21	15.77	12.91	10.57

TO OBTAIN QUARTERLY, SEMIANNUAL, AND ANNUAL PREMIUMS,
MULTIPLY THE ABOVE QUOTED PREMIUMS BY 3, 6, AND 12,
RESPECTIVELY. THE MONTHLY PREMIUMS FOR BANK SERVICE PLAN
AND PAYROLL DEDUCTION ISSUES ARE THE PREMIUMS LISTED ABOVE.
R25387-44-3

Date: 08/09/2016

MUTUAL OF OMAHA INSURANCE COMPANY
SCHEDULE OF MONTHLY RATES FOR RIDER FORM 0DX5M

PER \$10 DAILY CONFINED CARE/PER \$5 DAILY COMMUNITY BASED BENEFIT
50% HOME HEALTH CARE BENEFIT

BENEFIT -- 5 YEARS

Issue Age	Elimination Periods			
	0 Day	20 Day	100 Day	365 Day
18-39	5.76	5.46	4.63	3.95
40	6.26	5.92	4.97	4.18
41	6.45	6.05	5.10	4.31
42	6.61	6.23	5.23	4.40
43	6.78	6.38	5.32	4.47
44	6.92	6.52	5.47	4.60
45	7.13	6.68	5.59	4.66
46	7.30	6.84	5.72	4.77
47	7.51	7.04	5.89	4.93
48	7.79	7.30	6.09	5.09
49	8.06	7.55	6.28	5.23
50	8.37	7.83	6.55	5.48
51	8.70	8.12	6.79	5.68
52	9.02	8.43	7.04	5.87
53	9.31	8.70	7.27	6.08
54	9.56	8.99	7.50	6.27
55	9.86	9.28	7.77	6.48
56	10.16	9.59	7.99	6.66
57	10.48	9.89	8.23	6.84
58	10.80	10.22	8.46	7.01
59	11.15	10.55	8.69	7.17
60	11.50	10.87	8.93	7.35
61	11.89	11.22	9.19	7.52
62	12.30	11.57	9.45	7.71
63	12.69	11.92	9.75	7.96
64	13.12	12.28	10.02	8.17
65	13.57	12.65	10.32	8.43
66	14.01	13.05	10.63	8.67
67	14.50	13.48	10.96	8.91
68	15.03	13.95	11.33	9.20
69	15.59	14.48	11.75	9.55
70	16.21	15.04	12.19	9.88
71	16.78	15.58	12.58	10.16
72	17.31	16.08	12.99	10.49
73	17.80	16.52	13.34	10.78
74	18.21	16.92	13.67	11.04
75	18.63	17.34	13.99	11.30
76	19.07	17.75	14.34	11.59
77	19.61	18.26	14.76	11.94
78	20.24	18.81	15.24	12.34
79	20.90	19.43	15.73	12.74
80	21.60	20.06	16.28	13.21
81	22.37	20.77	16.87	13.71
82	23.19	21.51	17.48	14.20
83	24.05	22.30	18.11	14.71
84	24.95	23.12	18.80	15.29

TO OBTAIN QUARTERLY, SEMIANNUAL, AND ANNUAL PREMIUMS,
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RESPECTIVELY. THE MONTHLY PREMIUMS FOR BANK SERVICE PLAN
AND PAYROLL DEDUCTION ISSUES ARE THE PREMIUMS LISTED ABOVE.
R25387-44-3

Date: 08/09/2016

MUTUAL OF OMAHA INSURANCE COMPANY
SCHEDULE OF MONTHLY RATES FOR RIDER FORM 0DX5M

PER \$10 DAILY CONFINED CARE/PER \$5 DAILY COMMUNITY BASED BENEFIT
50% HOME HEALTH CARE BENEFIT

Issue Age	BENEFIT -- LIFETIME			
	Elimination Periods			
	0 Day	20 Day	100 Day	365 Day
18-39	13.00	12.39	10.24	8.48
40	13.73	13.13	10.89	9.04
41	14.12	13.44	11.17	9.28
42	14.46	13.74	11.41	9.49
43	14.82	14.12	11.71	9.74
44	15.16	14.48	12.04	10.01
45	15.60	14.89	12.42	10.32
46	16.07	15.31	12.79	10.69
47	16.54	15.76	13.13	10.93
48	16.99	16.21	13.51	11.26
49	17.60	16.69	13.95	11.69
50	18.11	17.23	14.35	11.99
51	18.64	17.69	14.76	12.31
52	19.14	18.11	15.08	12.57
53	19.58	18.43	15.37	12.82
54	19.92	18.66	15.54	12.94
55	20.23	18.88	15.73	13.10
56	20.61	19.14	15.90	13.23
57	21.09	19.53	16.17	13.40
58	21.68	20.02	16.59	13.74
59	22.37	20.54	17.02	14.11
60	23.08	21.14	17.46	14.44
61	23.87	21.76	18.01	14.87
62	24.60	22.46	18.51	15.22
63	25.40	23.18	19.02	15.61
64	26.22	24.00	19.63	16.07
65	27.04	24.80	20.22	16.48
66	27.92	25.66	20.88	16.99
67	28.81	26.52	21.55	17.50
68	29.77	27.43	22.31	18.16
69	30.78	28.33	23.10	18.85
70	31.80	29.26	23.93	19.58
71	32.81	30.21	24.74	20.27
72	33.83	31.19	25.53	20.90
73	34.80	32.08	26.30	21.55
74	35.75	32.93	27.04	22.17
75	36.71	33.83	27.78	22.83
76	37.70	34.80	28.55	23.43
77	38.71	35.89	29.35	24.04
78	39.81	37.06	30.33	24.80
79	40.90	38.32	31.25	25.49
80	42.06	39.70	32.27	26.22
81	43.36	41.17	33.40	27.08
82	44.68	42.69	34.54	27.92
83	46.10	44.32	35.75	28.86
84	47.59	45.99	37.02	29.77

TO OBTAIN QUARTERLY, SEMIANNUAL, AND ANNUAL PREMIUMS,
MULTIPLY THE ABOVE QUOTED PREMIUMS BY 3, 6, AND 12,
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AND PAYROLL DEDUCTION ISSUES ARE THE PREMIUMS LISTED ABOVE.
R25387-44-3

Date: 08/09/2016

MUTUAL OF OMAHA INSURANCE COMPANY
SCHEDULE OF MONTHLY RATES FOR RIDER FORM 0DX5M

PER \$10 DAILY CONFINED CARE/PER \$10 DAILY COMMUNITY BASED BENEFIT
100% HOME HEALTH CARE BENEFIT

Issue Age	BENEFIT -- 1 YEAR			
	ELIMINATION PERIODS			
	0 Day	20 Day	100 Day	365 Day
18-39	2.80	2.60	2.24	1.93
40	3.06	2.81	2.42	2.09
41	3.13	2.88	2.47	2.12
42	3.22	2.95	2.54	2.18
43	3.34	3.05	2.62	2.26
44	3.41	3.13	2.68	2.30
45	3.52	3.22	2.76	2.38
46	3.61	3.34	2.82	2.39
47	3.72	3.46	2.92	2.46
48	3.88	3.59	3.04	2.57
49	4.01	3.73	3.13	2.62
50	4.16	3.90	3.28	2.74
51	4.30	4.06	3.37	2.80
52	4.48	4.22	3.50	2.90
53	4.64	4.38	3.62	2.99
54	4.81	4.54	3.76	3.10
55	4.96	4.68	3.86	3.19
56	5.14	4.85	4.01	3.32
57	5.33	5.03	4.13	3.40
58	5.53	5.21	4.27	3.50
59	5.74	5.40	4.42	3.60
60	5.98	5.62	4.58	3.74
61	6.17	5.81	4.72	3.83
62	6.44	6.05	4.91	4.00
63	6.73	6.29	5.14	4.20
64	7.01	6.53	5.32	4.33
65	7.32	6.79	5.56	4.54
66	7.66	7.08	5.80	4.73
67	8.00	7.38	6.02	4.91
68	8.39	7.73	6.28	5.09
69	8.81	8.11	6.55	5.29
70	9.25	8.51	6.83	5.48
71	9.68	8.90	7.12	5.68
72	10.08	9.25	7.39	5.90
73	10.42	9.55	7.63	6.10
74	10.70	9.82	7.86	6.29
75	10.98	10.09	8.09	6.49
76	11.28	10.38	8.32	6.67
77	11.65	10.72	8.58	6.88
78	12.05	11.09	8.87	7.10
79	12.50	11.52	9.19	7.33
80	12.98	11.96	9.52	7.58
81	13.50	12.43	9.86	7.82
82	14.04	12.95	10.25	8.11
83	14.62	13.50	10.64	8.38
84	15.25	14.08	11.08	8.71

TO OBTAIN QUARTERLY, SEMIANNUAL, AND ANNUAL PREMIUMS, MULTIPLY THE ABOVE QUOTED PREMIUMS BY 3, 6, AND 12, RESPECTIVELY. THE MONTHLY PREMIUMS FOR BANK SERVICE PLAN AND PAYROLL DEDUCTION ISSUES ARE THE PREMIUMS LISTED ABOVE.
R25387-44-4

Date: 08/09/2016

MUTUAL OF OMAHA INSURANCE COMPANY
SCHEDULE OF MONTHLY RATES FOR RIDER FORM 0DX5M

PER \$10 DAILY CONFINED CARE/PER \$10 DAILY COMMUNITY BASED BENEFIT
100% HOME HEALTH CARE BENEFIT

BENEFIT -- TWO YEARS

Issue Age	ELIMINATION PERIODS			
	0 Day	20 Day	100 Day	365 Day
18-39	3.96	3.78	3.22	2.75
40	4.28	4.07	3.48	2.98
41	4.39	4.18	3.55	3.04
42	4.52	4.30	3.66	3.13
43	4.66	4.42	3.76	3.19
44	4.78	4.54	3.85	3.28
45	4.94	4.66	3.94	3.34
46	5.08	4.79	4.06	3.43
47	5.24	4.94	4.15	3.48
48	5.39	5.09	4.27	3.58
49	5.56	5.26	4.39	3.67
50	5.76	5.44	4.54	3.78
51	5.95	5.62	4.69	3.92
52	6.16	5.80	4.82	4.01
53	6.38	5.99	5.00	4.18
54	6.58	6.19	5.15	4.28
55	6.84	6.41	5.35	4.48
56	7.12	6.65	5.54	4.61
57	7.42	6.91	5.74	4.78
58	7.75	7.19	5.98	4.96
59	8.12	7.50	6.20	5.12
60	8.50	7.81	6.44	5.32
61	8.90	8.14	6.70	5.52
62	9.28	8.48	6.94	5.68
63	9.62	8.80	7.16	5.83
64	9.98	9.13	7.36	5.93
65	10.33	9.47	7.60	6.08
66	10.74	9.84	7.85	6.28
67	11.26	10.30	8.20	6.53
68	11.89	10.85	8.65	6.90
69	12.67	11.50	9.20	7.36
70	13.46	12.17	9.77	7.84
71	14.20	12.80	10.31	8.30
72	14.83	13.36	10.78	8.70
73	15.30	13.80	11.15	9.01
74	15.68	14.16	11.47	9.29
75	16.00	14.48	11.75	9.54
76	16.32	14.82	12.04	9.77
77	16.72	15.20	12.34	10.02
78	17.17	15.62	12.66	10.26
79	17.65	16.08	13.00	10.51
80	18.16	16.54	13.37	10.81
81	18.67	17.04	13.73	11.08
82	19.24	17.54	14.11	11.35
83	19.80	18.08	14.50	11.63
84	20.39	18.62	14.92	11.95

TO OBTAIN QUARTERLY, SEMIANNUAL, AND ANNUAL PREMIUMS, MULTIPLY THE ABOVE QUOTED PREMIUMS BY 3, 6, AND 12, RESPECTIVELY. THE MONTHLY PREMIUMS FOR BANK SERVICE PLAN AND PAYROLL DEDUCTION ISSUES ARE THE PREMIUMS LISTED ABOVE.
R25387-44-4

Date: 08/09/2016

MUTUAL OF OMAHA INSURANCE COMPANY
SCHEDULE OF MONTHLY RATES FOR RIDER FORM 0DX5M

PER \$10 DAILY CONFINED CARE/PER \$10 DAILY COMMUNITY BASED BENEFIT
100% HOME HEALTH CARE BENEFIT

Issue Age	BENEFIT -- 3 YEARS			
	ELIMINATION PERIOD			
	0 Day	20 Day	100 Day	365 Day
18-39	4.94	4.54	3.83	3.23
40	5.40	4.96	4.19	3.54
41	5.53	5.09	4.30	3.64
42	5.69	5.22	4.42	3.73
43	5.82	5.34	4.51	3.80
44	5.93	5.45	4.58	3.85
45	6.10	5.57	4.70	3.96
46	6.23	5.70	4.78	4.01
47	6.40	5.87	4.91	4.12
48	6.64	6.07	5.06	4.22
49	6.84	6.28	5.21	4.32
50	7.14	6.53	5.39	4.44
51	7.39	6.78	5.57	4.57
52	7.68	7.03	5.77	4.74
53	7.98	7.30	5.98	4.90
54	8.26	7.55	6.19	5.08
55	8.54	7.79	6.38	5.23
56	8.83	8.06	6.61	5.42
57	9.16	8.35	6.84	5.60
58	9.48	8.65	7.08	5.80
59	9.82	8.98	7.34	6.00
60	10.18	9.32	7.62	6.23
61	10.52	9.66	7.88	6.43
62	10.90	9.98	8.14	6.64
63	11.21	10.26	8.38	6.85
64	11.53	10.51	8.60	7.03
65	11.86	10.79	8.81	7.19
66	12.19	11.08	9.04	7.38
67	12.58	11.42	9.32	7.60
68	13.03	11.88	9.66	7.86
69	13.57	12.43	10.06	8.14
70	14.15	13.00	10.46	8.41
71	14.65	13.51	10.84	8.69
72	15.06	13.92	11.14	8.92
73	15.28	14.15	11.30	9.04
74	15.31	14.21	11.35	9.07
75	15.34	14.26	11.38	9.07
76	15.46	14.36	11.45	9.13
77	15.76	14.62	11.68	9.32
78	16.25	15.05	12.04	9.62
79	16.90	15.58	12.49	10.01
80	17.63	16.22	13.02	10.45
81	18.49	16.94	13.62	10.96
82	19.45	17.77	14.33	11.56
83	20.54	18.70	15.11	12.22
84	21.73	19.72	15.97	12.94

TO OBTAIN QUARTERLY, SEMIANNUAL, AND ANNUAL PREMIUMS, MULTIPLY THE ABOVE QUOTED PREMIUMS BY 3, 6, AND 12, RESPECTIVELY. THE MONTHLY PREMIUMS FOR BANK SERVICE PLAN AND PAYROLL DEDUCTION ISSUES ARE THE PREMIUMS LISTED ABOVE.
R25387-44-4

Date: 08/09/2016

MUTUAL OF OMAHA INSURANCE COMPANY
SCHEDULE OF MONTHLY RATES FOR RIDER FORM 0DX5M

PER \$10 DAILY CONFINED CARE/PER \$10 DAILY COMMUNITY BASED BENEFIT
100% HOME HEALTH CARE BENEFIT

Issue Age	BENEFIT -- 5 YEARS			
	ELIMINATION PERIODS			
	0 Day	20 Day	100 Day	365 Day
18-39	7.04	6.56	5.53	4.68
40	7.63	7.11	5.94	4.97
41	7.84	7.30	6.08	5.07
42	8.04	7.50	6.25	5.19
43	8.24	7.68	6.35	5.26
44	8.43	7.85	6.52	5.41
45	8.67	8.04	6.66	5.50
46	8.89	8.25	6.82	5.63
47	9.15	8.49	7.02	5.81
48	9.48	8.78	7.26	6.01
49	9.81	9.09	7.50	6.19
50	10.19	9.43	7.81	6.48
51	10.60	9.78	8.10	6.71
52	10.96	10.14	8.38	6.93
53	11.33	10.47	8.69	7.19
54	11.64	10.84	8.95	7.38
55	12.01	11.20	9.24	7.63
56	12.36	11.56	9.53	7.84
57	12.75	11.94	9.81	8.07
58	13.13	12.32	10.09	8.27
59	13.57	12.69	10.38	8.49
60	14.00	13.09	10.67	8.69
61	14.48	13.51	10.97	8.90
62	14.96	13.94	11.29	9.15
63	15.44	14.37	11.62	9.42
64	15.97	14.80	11.97	9.68
65	16.50	15.24	12.32	9.94
66	17.07	15.71	12.68	10.24
67	17.64	16.23	13.08	10.54
68	18.27	16.81	13.52	10.87
69	18.99	17.45	14.01	11.26
70	19.71	18.13	14.53	11.66
71	20.42	18.77	15.03	12.03
72	21.08	19.38	15.50	12.40
73	21.65	19.91	15.93	12.74
74	22.17	20.38	16.31	13.06
75	22.68	20.88	16.71	13.38
76	23.22	21.37	17.11	13.68
77	23.88	21.98	17.61	14.11
78	24.63	22.66	18.17	14.56
79	25.43	23.41	18.77	15.05
80	26.31	24.20	19.42	15.59
81	27.21	25.03	20.11	16.15
82	28.23	25.93	20.83	16.74
83	29.26	26.86	21.60	17.37
84	30.36	27.85	22.43	18.06

TO OBTAIN QUARTERLY, SEMIANNUAL, AND ANNUAL PREMIUMS, MULTIPLY THE ABOVE QUOTED PREMIUMS BY 3, 6, AND 12, RESPECTIVELY. THE MONTHLY PREMIUMS FOR BANK SERVICE PLAN AND PAYROLL DEDUCTION ISSUES ARE THE PREMIUMS LISTED ABOVE.
R25387-44-4

Date: 08/09/2016

MUTUAL OF OMAHA INSURANCE COMPANY
SCHEDULE OF MONTHLY RATES FOR RIDER FORM 0DX5M

PER \$10 DAILY CONFINED CARE/PER \$10 DAILY COMMUNITY BASED BENEFIT
100% HOME HEALTH CARE BENEFIT

Issue Age	BENEFIT -- LIFETIME			
	ELIMINATION PERIODS			
	0 Day	20 Day	100 Day	365 Day
18-39	17.57	16.56	13.57	11.12
40	18.58	17.57	14.39	11.75
41	19.08	17.97	14.77	12.14
42	19.49	18.40	15.15	12.44
43	20.00	18.87	15.51	12.75
44	20.53	19.37	15.95	13.12
45	21.07	19.90	16.41	13.57
46	21.71	20.47	16.94	14.01
47	22.32	21.07	17.40	14.36
48	22.98	21.68	17.91	14.79
49	23.74	22.33	18.49	15.28
50	24.47	23.02	19.02	15.70
51	25.20	23.66	19.54	16.16
52	25.86	24.21	19.99	16.50
53	26.45	24.66	20.34	16.74
54	26.90	24.93	20.57	16.97
55	27.36	25.27	20.83	17.15
56	27.82	25.60	21.07	17.33
57	28.51	26.07	21.41	17.58
58	29.30	26.73	21.94	18.03
59	30.21	27.46	22.52	18.45
60	31.20	28.24	23.12	18.92
61	32.20	29.14	23.81	19.45
62	33.20	30.04	24.48	19.99
63	34.28	31.00	25.20	20.47
64	35.40	32.09	25.98	21.07
65	36.51	33.13	26.76	21.62
66	37.73	34.29	27.65	22.24
67	38.93	35.44	28.54	22.99
68	40.20	36.62	29.54	23.85
69	41.60	37.87	30.61	24.75
70	42.94	39.12	31.66	25.65
71	44.37	40.42	32.74	26.54
72	45.69	41.70	33.82	27.45
73	47.02	42.90	34.82	28.27
74	48.29	44.03	35.77	29.06
75	49.60	45.24	36.78	29.87
76	50.93	46.55	37.79	30.71
77	52.31	47.98	38.90	31.56
78	53.76	49.59	40.11	32.48
79	55.26	51.24	41.37	33.43
80	56.86	53.08	42.72	34.37
81	58.59	55.05	44.16	35.44
82	60.35	57.07	45.71	36.59
83	62.27	59.29	47.35	37.79
84	64.29	61.53	48.99	39.02

TO OBTAIN QUARTERLY, SEMIANNUAL, AND ANNUAL PREMIUMS, MULTIPLY THE ABOVE QUOTED PREMIUMS BY 3, 6, AND 12, RESPECTIVELY. THE MONTHLY PREMIUMS FOR BANK SERVICE PLAN AND PAYROLL DEDUCT I ON ISSUES ARE THE PREMIUMS LISTED ABOVE.
R25387-44-4

Date: 08/09/2016

MUTUAL OF OMAHA INSURANCE COMPANY
SCHEDULE OF MONTHLY RATES FOR RIDER FORM 0DX5M

PER \$10 DAILY CONFINED CARE/PER \$8 DAILY COMMUNITY BASED BENEFIT
80% HOME HEALTH CARE BENEFIT

Issue Age	BENEFIT -- 1 YEAR			
	ELIMINATION PERIODS			
	0 Day	20 Day	100 Day	365 Day
18-39	2.52	2.36	2.08	1.81
40	2.76	2.56	2.21	1.92
41	2.82	2.62	2.27	1.97
42	2.89	2.70	2.32	1.99
43	3.00	2.78	2.41	2.09
44	3.07	2.84	2.45	2.12
45	3.16	2.92	2.53	2.20
46	3.26	3.04	2.59	2.21
47	3.36	3.14	2.69	2.32
48	3.47	3.28	2.80	2.38
49	3.61	3.40	2.87	2.44
50	3.76	3.55	3.00	2.53
51	3.88	3.70	3.10	2.60
52	4.03	3.85	3.22	2.68
53	4.18	4.00	3.32	2.76
54	4.34	4.13	3.46	2.89
55	4.48	4.26	3.53	2.93
56	4.63	4.42	3.68	3.06
57	4.80	4.57	3.82	3.17
58	4.97	4.74	3.92	3.24
59	5.16	4.91	4.06	3.35
60	5.38	5.11	4.21	3.46
61	5.56	5.28	4.34	3.56
62	5.82	5.50	4.52	3.71
63	6.07	5.74	4.72	3.88
64	6.32	5.94	4.90	4.03
65	6.59	6.18	5.10	4.20
66	6.90	6.46	5.32	4.39
67	7.21	6.72	5.54	4.56
68	7.55	7.04	5.76	4.72
69	7.94	7.39	6.02	4.91
70	8.33	7.74	6.28	5.09
71	8.72	8.09	6.52	5.26
72	9.08	8.42	6.79	5.47
73	9.37	8.70	7.02	5.68
74	9.64	8.93	7.24	5.86
75	9.88	9.18	7.44	6.04
76	10.18	9.43	7.64	6.19
77	10.50	9.76	7.90	6.40
78	10.85	10.09	8.14	6.58
79	11.27	10.48	8.45	6.82
80	11.70	10.88	8.74	7.02
81	12.16	11.32	9.07	7.27
82	12.66	11.78	9.41	7.51
83	13.18	12.28	9.78	7.79
84	13.73	12.82	10.18	8.08

TO OBTAIN QUARTERLY, SEMIANNUAL, AND ANNUAL PREMIUMS, MULTIPLY THE ABOVE QUOTED PREMIUMS BY 3, 6, AND 12. RESPECTIVELY . THE MONTHLY PREMIUMS FOR BANK SERVICE PLAN AND PAYROLL DEDUCTION ISSUES ARE THE PREMIUMS LISTED ABOVE.
R25387-44-4

Date: 08/09/2016

MUTUAL OF OMAHA INSURANCE COMPANY
SCHEDULE OF MONTHLY RATES FOR RIDER FORM 0DX5M

PER \$10 DAILY CONFINED CARE/PER \$8 DAILY COMMUNITY BASED BENEFIT
80% HOME HEALTH CARE BENEFIT

Issue Age	BENEFIT -- 2 YEARS			
	ELIMINATION PERIODS			
	0 Day	20 Day	100 Day	365 Day
18-39	3.60	3.47	2.99	2.57
40	3.90	3.76	3.23	2.78
41	4.00	3.84	3.29	2.82
42	4.12	3.96	3.41	2.94
43	4.24	4.06	3.48	2.99
44	4.36	4.16	3.58	3.07
45	4.50	4.28	3.67	3.16
46	4.62	4.42	3.76	3.20
47	4.78	4.54	3.85	3.28
48	4.92	4.68	3.96	3.35
49	5.05	4.84	4.08	3.44
50	5.26	4.99	4.20	3.54
51	5.42	5.16	4.34	3.65
52	5.60	5.33	4.49	3.78
53	5.81	5.51	4.64	3.91
54	6.00	5.71	4.78	4.00
55	6.22	5.92	4.96	4.16
56	6.49	6.12	5.15	4.34
57	6.76	6.36	5.32	4.45
58	7.06	6.61	5.54	4.64
59	7.39	6.89	5.76	4.82
60	7.74	7.19	5.98	4.98
61	8.11	7.49	6.22	5.17
62	8.45	7.80	6.44	5.32
63	8.77	8.10	6.64	5.44
64	9.08	8.40	6.84	5.57
65	9.41	8.70	7.06	5.71
66	9.78	9.06	7.30	5.86
67	10.24	9.47	7.62	6.13
68	10.84	9.98	8.04	6.47
69	11.53	10.58	8.56	6.91
70	12.26	11.20	9.08	7.36
71	12.92	11.80	9.58	7.78
72	13.51	12.29	10.02	8.17
73	13.94	12.70	10.36	8.44
74	14.27	13.03	10.66	8.72
75	14.56	13.32	10.92	8.96
76	14.86	13.63	11.17	9.16
77	15.23	13.99	11.45	9.38
78	15.64	14.38	11.76	9.64
79	16.07	14.78	12.08	9.88
80	16.52	15.22	12.42	10.14
81	17.00	15.67	12.76	10.39
82	17.51	16.13	13.10	10.64
83	18.04	16.63	13.48	10.91
84	18.58	17.14	13.88	11.24

TO OBTAIN QUARTERLY, SEMIANNUAL, AND ANNUAL PREMIUMS, MULTIPLY THE ABOVE QUOTED PREMIUMS BY 3, 6, AND 12, RESPECTIVELY. THE MONTHLY PREMIUMS FOR BANK SERVICE PLAN AND PAYROLL DEDUCTION ISSUES ARE THE PREMIUMS LISTED ABOVE.
R25387-44-4

Date: 08/09/2016

MUTUAL OF OMAHA INSURANCE COMPANY
SCHEDULE OF MONTHLY RATES FOR RIDER FORM 0DX5M

PER \$10 DAILY CONFINED CARE/PER \$8 DAILY COMMUNITY BASED BENEFIT
80% HOME HEALTH CARE BENEFIT

Issue Age	BENEFIT -- 3 YEARS			
	ELIMINATION PERIODS			
	0 Day	20 Day	100 Day	365 Day
18-39	4.55	4.24	3.59	3.04
40	4.98	4.61	3.94	3.37
41	5.09	4.73	4.04	3.46
42	5.24	4.86	4.14	3.53
43	5.38	4.96	4.24	3.61
44	5.47	5.08	4.30	3.65
45	5.60	5.20	4.42	3.76
46	5.74	5.32	4.49	3.80
47	5.90	5.45	4.61	3.90
48	6.11	5.65	4.75	4.00
49	6.30	5.84	4.90	4.12
50	6.58	6.08	5.06	4.21
51	6.80	6.32	5.23	4.33
52	7.07	6.55	5.44	4.50
53	7.36	6.78	5.62	4.66
54	7.61	7.02	5.82	4.82
55	7.86	7.24	6.00	4.97
56	8.14	7.50	6.20	5.12
57	8.44	7.76	6.44	5.34
58	8.74	8.06	6.65	5.48
59	9.04	8.36	6.90	5.69
60	9.36	8.68	7.15	5.89
61	9.70	8.98	7.40	6.10
62	10.01	9.28	7.64	6.29
63	10.32	9.53	7.87	6.50
64	10.62	9.78	8.08	6.67
65	10.92	10.02	8.27	6.83
66	11.22	10.30	8.50	7.02
67	11.59	10.63	8.75	7.20
68	11.99	11.05	9.08	7.46
69	12.50	11.57	9.46	7.72
70	13.03	12.10	9.83	7.98
71	13.50	12.56	10.18	8.23
72	13.86	12.95	10.46	8.45
73	14.06	13.16	10.62	8.57
74	14.10	13.20	10.66	8.62
75	14.12	13.25	10.67	8.59
76	14.22	13.36	10.75	8.66
77	14.51	13.60	10.96	8.84
78	14.95	13.99	11.30	9.13
79	15.56	14.50	11.74	9.49
80	16.22	15.10	12.24	9.92
81	17.02	15.76	12.80	10.40
82	17.92	16.54	13.46	10.96
83	18.91	17.38	14.20	11.60
84	20.02	18.34	15.00	12.28

TO OBTAIN QUARTERLY, SEMIANNUAL, AND ANNUAL PREMIUMS, MULTIPLY THE ABOVE QUOTED. PREMIUMS BY 3, 6 AND 12 RESPECTIVELY. THE MONTHLY PREMIUMS FOR BANK SERVICE PLAN AND PAYROLL DEDUCTION ISSUES ARE THE PREMIUMS LISTED ABOVE.
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Date: 08/09/2016

MUTUAL OF OMAHA INSURANCE COMPANY
SCHEDULE OF MONTHLY RATES FOR RIDER FORM 0DX5M

PER \$10 DAILY CONFINED CARE/PER \$8 DAILY COMMUNITY BASED BENEFIT
80% HOME HEALTH CARE BENEFIT

Issue Age	BENEFIT -- 5 YEARS			
	ELIMINATION PERIODS			
	0 Day	20 Day	100 Day	365 Day
18-39	6.55	6.16	5.26	4.49
40	7.11	6.68	5.65	4.77
41	7.30	6.88	5.79	4.87
42	7.48	7.04	5.92	4.97
43	7.67	7.22	6.03	5.04
44	7.83	7.38	6.19	5.19
45	8.07	7.57	6.34	5.30
46	8.27	7.77	6.47	5.39
47	8.51	7.96	6.66	5.57
48	8.83	8.24	6.91	5.79
49	9.15	8.54	7.12	5.93
50	9.48	8.87	7.41	6.19
51	9.88	9.22	7.67	6.38
52	10.21	9.53	7.96	6.67
53	10.54	9.83	8.24	6.91
54	10.84	10.18	8.50	7.11
55	11.18	10.52	8.79	7.34
56	11.53	10.87	9.04	7.52
57	11.87	11.21	9.31	7.73
58	12.23	11.57	9.57	7.91
59	12.63	11.94	9.88	8.16
60	13.02	12.32	10.12	8.33
61	13.46	12.72	10.42	8.56
62	13.93	13.11	10.71	8.77
63	14.37	13.51	11.03	9.02
64	14.86	13.92	11.36	9.28
65	15.36	14.32	11.68	9.53
66	15.86	14.76	12.03	9.81
67	16.41	15.26	12.42	10.11
68	17.01	15.80	12.85	10.44
69	17.68	16.41	13.31	10.80
70	18.35	17.02	13.81	11.20
71	19.00	17.64	14.27	11.53
72	19.60	18.21	14.71	11.88
73	20.14	18.70	15.14	12.25
74	20.61	19.18	15.50	12.53
75	21.11	19.61	15.86	12.83
76	21.59	20.11	16.25	13.13
77	22.22	20.67	16.72	13.52
78	22.92	21.31	17.27	13.98
79	23.67	21.99	17.82	14.44
80	24.46	22.73	18.43	14.94
81	25.33	23.51	19.09	15.50
82	26.26	24.37	19.78	16.06
83	27.24	25.26	20.52	16.68
84	28.25	26.19	21.30	17.31

TO OBTAIN QUARTERLY, SEMIANNUAL, AND ANNUAL PREMIUMS,
MULTIPLY THE ABOVE QUOTED PREMIUMS BY 3, 6, AND 12,
RESPECTIVELY. THE MONTHLY PREMIUMS FOR BANK SERVICE PLAN
AND PAYROLL DEDUCTION ISSUES ARE THE PREMIUMS LISTED ABOVE.
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Date: 08/09/2016

MUTUAL OF OMAHA INSURANCE COMPANY
SCHEDULE OF MONTHLY RATES FOR RIDER FORM 0DX5M

PER \$10 DAILY CONFINED CARE/PER \$8 DAILY COMMUNITY BASED BENEFIT
80% HOME HEALTH CARE BENEFIT

Issue Age	BENEFIT -- LIFETIME			
	ELIMINATION PERIODS			
	0 Day	20 Day	100 Day	365 Day
18-39	16.49	15.76	13.01	10.78
40	17.48	16.70	13.81	11.41
41	17.94	17.10	14.16	11.74
42	18.33	17.43	14.54	12.08
43	18.83	17.91	14.90	12.41
44	19.30	18.40	15.31	12.72
45	19.83	18.92	15.76	13.11
46	20.42	19.48	16.24	13.54
47	20.99	20.00	16.70	13.94
48	21.62	20.60	17.20	14.36
49	22.33	21.23	17.73	14.79
50	22.99	21.87	18.27	15.24
51	23.71	22.48	18.75	15.64
52	24.32	22.99	19.18	15.99
53	24.87	23.40	19.54	16.33
54	25.28	23.70	19.73	16.41
55	25.73	24.01	19.99	16.63
56	26.20	24.32	20.24	16.85
57	26.76	24.78	20.57	17.04
58	27.54	25.40	21.07	17.49
59	28.41	26.11	21.62	17.91
60	29.34	26.84	22.17	18.33
61	30.30	27.69	22.84	18.84
62	31.25	28.52	23.51	19.34
63	32.26	29.45	24.16	19.83
64	33.29	30.46	24.93	20.42
65	34.34	31.49	25.67	20.93
66	35.47	32.58	26.54	21.62
67	36.59	33.67	27.36	22.23
68	37.86	34.82	28.36	23.08
69	39.11	35.98	29.39	23.97
70	40.42	37.21	30.39	24.85
71	41.70	38.39	31.43	25.73
72	42.99	39.58	32.48	26.58
73	44.22	40.76	33.43	27.37
74	45.41	41.83	34.34	28.15
75	46.64	42.99	35.28	28.99
76	47.90	44.24	36.27	29.75
77	49.19	45.56	37.33	30.60
78	50.57	47.10	38.48	31.43
79	51.96	48.69	39.71	32.35
80	53.48	50.44	41.00	33.29
81	55.10	52.31	42.40	34.37
82	56.76	54.26	43.86	35.47
83	58.59	56.33	45.41	36.67
84	60.46	58.47	47.04	37.86

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AND PAYROLL DEDUCTION ISSUES ARE THE PREMIUMS LISTED ABOVE.
R25387-44-4

Date: 08/09/2016

MUTUAL OF OMAHA INSURANCE COMPANY
SCHEDULE OF MONTHLY RATES FOR RIDER FORM 0DX5M

PER \$10 DAILY CONFINED CARE/PER \$5 DAILY COMMUNITY BASED BENEFIT
50% HOME HEALTH CARE BENEFIT

BENEFIT -- 1 YEAR

Issue Age	Elimination Periods			
	0 Day	20 Day	100 Day	365 Day
18-39	2.11	1.98	1.72	1.49
40	2.30	2.14	1.86	1.63
41	2.35	2.18	1.90	1.66
42	2.44	2.26	1.96	1.70
43	2.50	2.32	2.02	1.75
44	2.56	2.38	2.05	1.76
45	2.64	2.45	2.11	1.82
46	2.74	2.53	2.17	1.86
47	2.80	2.63	2.24	1.90
48	2.92	2.72	2.34	2.02
49	3.02	2.84	2.40	2.03
50	3.13	2.96	2.51	2.14
51	3.25	3.08	2.59	2.18
52	3.36	3.22	2.68	2.24
53	3.49	3.32	2.77	2.32
54	3.61	3.46	2.88	2.41
55	3.73	3.56	2.95	2.44
56	3.88	3.70	3.07	2.56
57	4.01	3.83	3.16	2.62
58	4.16	3.96	3.28	2.70
59	4.31	4.10	3.40	2.82
60	4.49	4.26	3.52	2.92
61	4.64	4.42	3.64	2.98
62	4.84	4.60	3.78	3.11
63	5.06	4.78	3.95	3.26
64	5.28	4.96	4.08	3.36
65	5.50	5.17	4.26	3.52
66	5.77	5.38	4.44	3.67
67	6.01	5.62	4.63	3.82
68	6.31	5.87	4.84	3.97
69	6.64	6.16	5.03	4.12
70	6.96	6.46	5.26	4.27
71	7.28	6.77	5.45	4.39
72	7.60	7.03	5.66	4.56
73	7.82	7.26	5.86	4.72
74	8.05	7.45	6.04	4.88
75	8.26	7.67	6.20	5.02
76	8.50	7.88	6.38	5.16
77	8.76	8.14	6.59	5.33
78	9.06	8.42	6.80	5.50
79	9.40	8.75	7.06	5.68
80	9.77	9.10	7.30	5.86
81	10.14	9.46	7.57	6.07
82	10.57	9.84	7.87	6.29
83	11.02	10.25	8.17	6.52
84	11.47	10.69	8.50	6.76

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R25387-44-4

Date: 08/09/2016

MUTUAL OF OMAHA INSURANCE COMPANY
SCHEDULE OF MONTHLY RATES FOR RIDER FORM 0DX5M

PER \$10 DAILY CONFINED CARE/PER \$5 DAILY COMMUNITY BASED BENEFIT
50% HOME HEALTH CARE BENEFIT

BENEFIT -- 2 YEARS

Issue Age	Elimination Periods			
	0 Day	20 Day	100 Day	365 Day
18-39	3.06	2.95	2.54	2.20
40	3.30	3.18	2.74	2.38
41	3.38	3.25	2.80	2.41
42	3.50	3.35	2.89	2.50
43	3.59	3.44	2.95	2.53
44	3.71	3.53	3.02	2.59
45	3.80	3.64	3.10	2.65
46	3.91	3.73	3.19	2.74
47	4.04	3.85	3.28	2.78
48	4.16	3.97	3.36	2.86
49	4.30	4.09	3.46	2.92
50	4.46	4.24	3.56	2.99
51	4.60	4.38	3.68	3.10
52	4.75	4.52	3.82	3.22
53	4.92	4.68	3.94	3.30
54	5.08	4.84	4.06	3.41
55	5.28	5.00	4.21	3.54
56	5.50	5.20	4.36	3.65
57	5.72	5.38	4.52	3.80
58	5.99	5.62	4.70	3.94
59	6.28	5.86	4.90	4.08
60	6.56	6.10	5.08	4.24
61	6.88	6.35	5.27	4.38
62	7.16	6.61	5.46	4.51
63	7.44	6.86	5.64	4.64
64	7.70	7.12	5.81	4.74
65	7.97	7.39	5.99	4.85
66	8.30	7.68	6.19	4.99
67	8.69	8.02	6.46	5.20
68	9.19	8.46	6.83	5.52
69	9.78	8.98	7.24	5.86
70	10.39	9.50	7.70	6.24
71	10.97	9.98	8.12	6.61
72	11.46	10.43	8.48	6.90
73	11.81	10.76	8.78	7.16
74	12.10	11.05	9.04	7.40
75	12.35	11.30	9.26	7.60
76	12.60	11.56	9.47	7.78
77	12.91	11.86	9.71	7.96
78	13.25	12.19	9.98	8.17
79	13.63	12.54	10.24	8.36
80	14.02	12.91	10.54	8.59
81	14.41	13.28	10.82	8.82
82	14.84	13.69	11.11	9.02
83	15.29	14.11	11.42	9.25
84	15.76	14.53	11.76	9.52

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AND PAYROLL DEDUCTION ISSUES ARE THE PREMIUMS LISTED ABOVE.
R25387-44-4

Date: 08/09/2016

MUTUAL OF OMAHA INSURANCE COMPANY
SCHEDULE OF MONTHLY RATES FOR RIDER FORM 0DX5M

PER \$10 DAILY CONFINED CARE/PER \$5 DAILY COMMUNITY BASED BENEFIT
50% HOME HEALTH CARE BENEFIT

Issue Age	BENEFIT -- 3 YEARS			
	Elimination Periods			
	0 Day	20 Day	100 Day	365 Day
18-39	3.91	3.64	3.10	2.63
40	4.27	3.97	3.38	2.88
41	4.38	4.07	3.48	2.98
42	4.51	4.18	3.56	3.04
43	4.61	4.27	3.65	3.12
44	4.72	4.37	3.70	3.13
45	4.82	4.46	3.80	3.24
46	4.94	4.56	3.86	3.28
47	5.08	4.69	3.97	3.36
48	5.24	4.86	4.09	3.44
49	5.42	5.03	4.22	3.54
50	5.65	5.22	4.36	3.62
51	5.86	5.44	4.51	3.74
52	6.10	5.63	4.67	3.88
53	6.31	5.84	4.82	3.98
54	6.53	6.04	5.02	4.15
55	6.76	6.25	5.16	4.26
56	7.00	6.46	5.35	4.44
57	7.25	6.68	5.53	4.58
58	7.50	6.92	5.72	4.73
59	7.79	7.20	5.94	4.90
60	8.06	7.46	6.16	5.08
61	8.33	7.74	6.36	5.23
62	8.62	7.97	6.58	5.44
63	8.88	8.21	6.76	5.57
64	9.14	8.42	6.95	5.74
65	9.40	8.63	7.12	5.87
66	9.65	8.86	7.32	6.05
67	9.97	9.14	7.54	6.22
68	10.33	9.52	7.80	6.40
69	10.75	9.94	8.12	6.64
70	11.21	10.42	8.45	6.86
71	11.59	10.81	8.75	7.08
72	11.92	11.14	9.00	7.27
73	12.10	11.32	9.14	7.38
74	12.13	11.38	9.16	7.38
75	12.16	11.40	9.19	7.42
76	12.23	11.48	9.25	7.46
77	12.47	11.69	9.44	7.62
78	12.88	12.04	9.72	7.85
79	13.38	12.47	10.09	8.16
80	13.96	12.97	10.54	8.56
81	14.64	13.56	11.00	8.93
82	15.42	14.22	11.58	9.43
83	16.26	14.96	12.22	9.98
84	17.21	15.77	12.91	10.57

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R25387-44-4

Date: 08/09/2016

MUTUAL OF OMAHA INSURANCE COMPANY
SCHEDULE OF MONTHLY RATES FOR RIDER FORM 0DX5M

PER \$10 DAILY CONFINED CARE/PER \$5 DAILY COMMUNITY BASED BENEFIT
50% HOME HEALTH CARE BENEFIT

Issue Age	Elimination Periods			
	0 Day	20 Day	100 Day	365 Day
18-39	5.76	5.46	4.63	3.95
40	6.26	5.92	4.97	4.18
41	6.45	6.05	5.10	4.31
42	6.61	6.23	5.23	4.40
43	6.78	6.38	5.32	4.47
44	6.92	6.52	5.47	4.60
45	7.13	6.68	5.59	4.66
46	7.30	6.84	5.72	4.77
47	7.51	7.04	5.89	4.93
48	7.79	7.30	6.09	5.09
49	8.06	7.55	6.28	5.23
50	8.37	7.83	6.55	5.48
51	8.70	8.12	6.79	5.68
52	9.02	8.43	7.04	5.87
53	9.31	8.70	7.27	6.08
54	9.56	8.99	7.50	6.27
55	9.86	9.28	7.77	6.48
56	10.16	9.59	7.99	6.66
57	10.48	9.89	8.23	6.84
58	10.80	10.22	8.46	7.01
59	11.15	10.55	8.69	7.17
60	11.50	10.87	8.93	7.35
61	11.89	11.22	9.19	7.52
62	12.30	11.57	9.45	7.71
63	12.69	11.92	9.75	7.96
64	13.12	12.28	10.02	8.17
65	13.57	12.65	10.32	8.43
66	14.01	13.05	10.63	8.67
67	14.50	13.48	10.96	8.91
68	15.03	13.95	11.33	9.20
69	15.59	14.48	11.75	9.55
70	16.21	15.04	12.19	9.88
71	16.78	15.58	12.58	10.16
72	17.31	16.08	12.99	10.49
73	17.80	16.52	13.34	10.78
74	18.21	16.92	13.67	11.04
75	18.63	17.34	13.99	11.30
76	19.07	17.75	14.34	11.59
77	19.61	18.26	14.76	11.94
78	20.24	18.81	15.24	12.34
79	20.90	19.43	15.73	12.74
80	21.60	20.06	16.28	13.21
81	22.37	20.77	16.87	13.71
82	23.19	21.51	17.48	14.20
83	24.05	22.30	18.11	14.71
84	24.95	23.12	18.80	15.29

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Date: 08/09/2016

MUTUAL OF OMAHA INSURANCE COMPANY
SCHEDULE OF MONTHLY RATES FOR RIDER FORM 0DX5M

PER \$10 DAILY CONFINED CARE/PER \$5 DAILY COMMUNITY BASED BENEFIT
50% HOME HEALTH CARE BENEFIT

Issue Age	Elimination Periods			
	0 Day	20 Day	100 Day	365 Day
18-39	14.95	14.25	11.78	9.75
40	15.79	15.10	12.52	10.40
41	16.24	15.46	12.85	10.67
42	16.63	15.80	13.12	10.91
43	17.04	16.24	13.47	11.20
44	17.43	16.65	13.85	11.51
45	17.94	17.12	14.28	11.87
46	18.48	17.61	14.71	12.29
47	19.02	18.12	15.10	12.57
48	19.54	18.64	15.54	12.95
49	20.24	19.19	16.04	13.44
50	20.83	19.81	16.50	13.79
51	21.44	20.34	16.97	14.16
52	22.01	20.83	17.34	14.46
53	22.52	21.19	17.68	14.74
54	22.91	21.46	17.87	14.88
55	23.26	21.71	18.09	15.07
56	23.70	22.01	18.29	15.21
57	24.25	22.46	18.60	15.41
58	24.93	23.02	19.08	15.80
59	25.73	23.62	19.57	16.23
60	26.54	24.31	20.08	16.61
61	27.45	25.02	20.71	17.10
62	28.29	25.83	21.29	17.50
63	29.21	26.66	21.87	17.95
64	30.15	27.60	22.57	18.48
65	31.10	28.52	23.25	18.95
66	32.11	29.51	24.01	19.54
67	33.13	30.50	24.78	20.13
68	34.24	31.54	25.66	20.88
69	35.40	32.58	26.57	21.68
70	36.57	33.65	27.52	22.52
71	37.73	34.74	28.45	23.31
72	38.90	35.87	29.36	24.04
73	40.02	36.89	30.25	24.78
74	41.11	37.87	31.10	25.50
75	42.22	38.90	31.95	26.25
76	43.36	40.02	32.83	26.94
77	44.52	41.27	33.75	27.65
78	45.78	42.62	34.88	28.52
79	47.04	44.07	35.94	29.31
80	48.37	45.66	37.11	30.15
81	49.86	47.35	38.41	31.14
82	51.38	49.09	39.72	32.11
83	53.02	50.97	41.11	33.19
84	54.73	52.89	42.57	34.24

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R25387-44-4

Health Insurance Rate Request Summary
Part 1 – To Be Completed By Company

Reset Form

Company Name and NAIC Number:	Mutual of Omaha Insurance Company (71412)
SERFF Tracking Number:	MUTA-130706482
Effective Date:	December 1, 2016 and December 1, 2017
(Projected) Number of Insureds Affected:	1,608
New Rates	
Average Annual Premium Per Member:	n/a

Revised Rates

Average Annual Premium Per Member:	\$2,188
Average Requested Percentage Rate Change Per Member:	27.6%
Minimum Requested Percentage Rate Change Per Member:	0.0%
Maximum Requested Percentage Rate Change Per Member:	49.5%

Plans Affected
(The Form Number and "Product Name")

Form#	"Product Name"(if applicable)
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LT50 - Series 19241 LT50 - Series 19409 NH50 - Series 19242 NH50 - Series 19410 HCA - Series 19629 HCA - Series 20249 NHA - Series 19630 NHA - Series 20250 LTA - Series 19631 LTA - Series 20251	
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Attach a brief narrative to summarize the key information used to develop the rates including the main drivers for new or revised rates.

This document is intended to help explain the rate filing and it is only a summary of the company's request. It is not intended to describe or include all factors or information considered in the review process. For more detailed information, please refer to the complete filing.