

**State:** Virginia **Filing Company:** Mutual of Omaha Insurance Company  
**TOI/Sub-TOI:** LTC03I Individual Long Term Care/LTC03I.003 Other  
**Product Name:** LT50 et al - 2021 Rate Increase  
**Project Name/Number:** LT50 et al - 2021/

## Filing at a Glance

Company: Mutual of Omaha Insurance Company  
Product Name: LT50 et al - 2021 Rate Increase  
State: Virginia  
TOI: LTC03I Individual Long Term Care  
Sub-TOI: LTC03I.003 Other  
Filing Type: Rate  
Date Submitted: 09/24/2021  
SERFF Tr Num: MUTA-132676983  
SERFF Status: Closed-Approved  
State Tr Num: MUTA-132676983  
State Status: Approved  
Co Tr Num: LAFOND  
Effective: 01/01/2023  
Date Requested:  
Author(s): Jeff LaFond, Joshua Weber, Gari Banfield, Reginald Douge Jr  
Reviewer(s): Bill Dismore (primary)  
Disposition Date: 09/13/2022  
Disposition Status: Approved  
Effective Date: 01/01/2023

**State:** Virginia **Filing Company:** Mutual of Omaha Insurance Company  
**TOI/Sub-TOI:** LTC03I Individual Long Term Care/LTC03I.003 Other  
**Product Name:** LT50 et al - 2021 Rate Increase  
**Project Name/Number:** LT50 et al - 2021/

## General Information

Project Name: LT50 et al - 2021	Status of Filing in Domicile: Authorized
Project Number:	Date Approved in Domicile:
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: 30%	Filing Status Changed: 09/13/2022
	State Status Changed: 09/13/2022
Deemer Date: 10/12/2022	Created By: Jeff LaFond
Submitted By: Jeff LaFond	Corresponding Filing Tracking Number:
	State TOI: LTC03I Individual Long Term Care

### Filing Description:

We are requesting a rate increase for LTCi policy forms LT50, NH50, HCA, NHA and LTA and associated riders. The revised Virginia rate increase is summarized below:

2023 Increase

Non-Lifetime Benefit Periods – 21.0%

Lifetime Benefit Period - 36.0%

Overall Increase – 30.0%

The proposed effective date of this rate increase is January 1, 2023, subject to your State's approval.

## 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) 351-5215 ext. [Phone]	FEIN Number: 47-0246511	

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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:** LT50 et al - 2021 Rate Increase  
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## Filing Fees

### State Fees

Fee Required? No

Retaliatory? No

Fee Explanation:

**State:** Virginia  
**TOI/Sub-TOI:** LTC03I Individual Long Term Care/LTC03I.003 Other  
**Product Name:** LT50 et al - 2021 Rate Increase  
**Project Name/Number:** LT50 et al - 2021/

**Filing Company:** Mutual of Omaha Insurance Company

## Correspondence Summary

### Dispositions

Status	Created By	Created On	Date Submitted
Approved	Bill Dismore	09/13/2022	09/13/2022

### Objection Letters and Response Letters

#### Objection Letters

Status	Created By	Created On	Date Submitted
Info has been requested from company	Bill Dismore	09/13/2022	09/13/2022
Info has been requested from company	Bill Dismore	09/13/2022	09/13/2022
Info has been requested from company	Bill Dismore	08/29/2022	08/29/2022
Info has been requested from company	Bill Dismore	06/03/2022	06/03/2022
Info has been requested from company	Bill Dismore	04/07/2022	04/07/2022
Info has been requested from company	Bill Dismore	02/07/2022	02/07/2022
Info has been requested from company	Bill Dismore	11/19/2021	11/19/2021
Info has been requested from company	Bill Dismore	09/29/2021	09/29/2021

#### Response Letters

Responded By	Created On	Date Submitted
Jeff LaFond	09/13/2022	09/13/2022
Jeff LaFond	09/13/2022	09/13/2022
Jeff LaFond	09/12/2022	09/12/2022
Gari Banfield	06/24/2022	06/24/2022
Jeff LaFond	05/13/2022	05/13/2022
Jeff LaFond	03/25/2022	03/25/2022
Gari Banfield	01/21/2022	01/21/2022
Jeff LaFond	10/29/2021	10/29/2021

### Filing Notes

Subject	Note Type	Created By	Created On	Date Submitted
Actuarial Summary & Opinion Report	Reviewer Note	Bill Dismore	07/12/2022	
RRS	Reviewer Note	Bill Dismore	09/29/2021	

State: Virginia  
 TOI/Sub-TOI: LTC03I Individual Long Term Care/LTC03I.003 Other  
 Product Name: LT50 et al - 2021 Rate Increase  
 Project Name/Number: LT50 et al - 2021/

Filing Company: Mutual of Omaha Insurance Company

## Disposition

Disposition Date: 09/13/2022

Effective Date: 01/01/2023

Status: Approved

Comment: In approving this filing, the Company is reminded that pursuant to 14VAC5-200-153 D, it is required to provide updated experience reports for the next 3 years comparing the actual results to the results that the company projected in justifying the rate increase. We would expect the first of the three experience report filings to be made no later than 15-18 months after implementation, capturing a full 12 months of experience following the rate implementation, and including updated data through the most recent year end.

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	40.700%	30.000%	\$843,031	1,356	\$2,810,102	36.000%	21.000%

Schedule	Schedule Item	Schedule Item Status	Public Access
Form (revised)	Premium Notification Letter		No
Form	Premium Notification Letter	Withdrawn	No
Rate (revised)	rate schedules	Approved	Yes
Rate (revised)	rate schedules		No
Rate (revised)	rate schedules	Approved	Yes
Rate (revised)	rate schedules	Approved	Yes
Rate (revised)	rate schedules		No
Rate (revised)	rate schedules	Approved	Yes
Rate (revised)	rate schedules	Approved	Yes
Rate (revised)	rate schedules		No
Rate (revised)	rate schedules		No
Rate (revised)	rate schedules	Approved	Yes
Rate (revised)	rate schedules		No
Rate (revised)	rate schedules		No
Rate (revised)	rate schedules		No
Rate (revised)	rate schedules		No

SERFF Tracking #:

MUTA-132676983

State Tracking #:

MUTA-132676983

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:

LT50 et al - 2021 Rate Increase

Project Name/Number:

LT50 et al - 2021/

Schedule	Schedule Item	Schedule Item Status	Public Access
Rate (revised)	rate schedules		No
Rate (revised)	rate schedules		No
Rate (revised)	rate schedules		No
Rate (revised)	rate schedules	Approved	Yes
Rate (revised)	rate schedules		No
Rate (revised)	rate schedules		No
Rate (revised)	rate schedules		No
Rate (revised)	rate schedules		No
Rate	rate schedules	Withdrawn	No
Rate	rate schedules	Withdrawn	No
Rate	rate schedules		No
Rate	rate schedules	Withdrawn	No
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Rate	rate schedules		No
Rate	rate schedules		No
Rate	rate schedules		No
Rate	rate schedules		No
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Rate	rate schedules		No
Rate	rate schedules	Withdrawn	No
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Rate	rate schedules		No
Rate	rate schedules		No

SERFF Tracking #:

MUTA-132676983

State Tracking #:

MUTA-132676983

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:

LT50 et al - 2021 Rate Increase

Project Name/Number:

LT50 et al - 2021/

Schedule	Schedule Item	Schedule Item Status	Public Access
Supporting Document	Certification of Compliance/Readability		Yes
Supporting Document	Product Checklist	Received & Acknowledged	Yes
Supporting Document (revised)	L&H Actuarial Memorandum	Received & Acknowledged	Yes
Supporting Document (revised)	Long Term Care Insurance Rate Request Summary	Received & Acknowledged	Yes
Supporting Document	Exhibits for 10/29/2021 Response (Objection 1)	Received & Acknowledged	Yes
Supporting Document	Exhibits for 10/29/2021 Response (Objection 2)	Received & Acknowledged	Yes
Supporting Document	Exhibits for 10/29/2021 Response (Objection 4)	Received & Acknowledged	Yes
Supporting Document	Exhibits for 01/20/2022 Response	Received & Acknowledged	Yes
Supporting Document	Exhibits for 03/25/2020 Response	Received & Acknowledged	Yes
Supporting Document	Exhibit for 05/13/2022 Response	Received & Acknowledged	Yes
Supporting Document	Exhibit for 06/24/2022 Response (Objection 1)	Received & Acknowledged	Yes
Supporting Document	Exhibits for 06/24/2022 Response (Objection 2)	Received & Acknowledged	Yes
Supporting Document (revised)	Exhibits for 09/12/2022 Response	Received & Acknowledged	Yes
Supporting Document	L&H Actuarial Memorandum	Withdrawn	No
Supporting Document	Long Term Care Insurance Rate Request Summary	Withdrawn	No
Supporting Document	Exhibits for 09/12/2022 Response	Withdrawn	No

**State:** Virginia **Filing Company:** Mutual of Omaha Insurance Company  
**TOI/Sub-TOI:** LTC031 Individual Long Term Care/LTC031.003 Other  
**Product Name:** LT50 et al - 2021 Rate Increase  
**Project Name/Number:** LT50 et al - 2021/

## Objection Letter

Objection Letter Status	Info has been requested from company
Objection Letter Date	09/13/2022
Submitted Date	09/13/2022
Respond By Date	10/13/2022

Dear Jeff LaFond,

### **Introduction:**

One or more forms included within the submission were found to be in non-conformity with statutory, regulatory or administrative requirements as set forth below.

### **Objection 1**

- Premium Notification Letter, ML12047 (Form)

Comments: Please remove the Premium Notification Letter under the Form Schedule as this form is being approved under SERFF # MUTM-133106304.

### **Conclusion:**

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

A response to this objection (or request for information if more applicable) is expected within 30 days. After 30 days, the filing will be DISAPPROVED unless a 30-day extension is requested.

Once a submission has been closed, a new SERFF submission will be required. To expedite the review, the new submission should reference the SERFF tracking number of the prior submission and verify that all outstanding issues have been addressed.

Should you wish to discuss any of the objections or provide additional information related to any of the objections, this should be done prior to making a new SERFF submission.

Thank you for your courtesy and consideration in this matter.

Sincerely,  
Bill Dismore



**State:** Virginia **Filing Company:** Mutual of Omaha Insurance Company  
**TOI/Sub-TOI:** LTC03I Individual Long Term Care/LTC03I.003 Other  
**Product Name:** LT50 et al - 2021 Rate Increase  
**Project Name/Number:** LT50 et al - 2021/

## Objection Letter

Objection Letter Status	Info has been requested from company
Objection Letter Date	09/13/2022
Submitted Date	09/13/2022
Respond By Date	10/13/2022

Dear Jeff LaFond,

### **Introduction:**

The Bureau has the following concerns and/or needs additional information to continue its review.

Please note, any revisions, modifications, or changes of any type to this filing must be clearly identified and explained in detail. For clarity, multiple changes should be summarized in a cover letter, etc.

### **Objection 1**

- L&H Actuarial Memorandum (Supporting Document)

Comments: Please withdraw the original documents described below and replace them with their revised versions.

- 1) Actuarial Memorandum
- 2) Exhibit 2 - Average Annual Premium (VA).pdf
- 3) Exhibit 5A-5C - Nationwide Lifetime Experience Projections.pdf
- 4) Exhibit 6A-6C - Virginia Lifetime Experience Projections.pdf

### **Objection 2**

- L&H Actuarial Memorandum (Supporting Document)

Comments: The actuarial memorandum and supporting exhibits do not appear to be updated because of the revised rate increase. Please ensure that all supporting documents are updated to reflect the revised overall % increase of 30%

### **Conclusion:**

We shall be glad to continue our review of this submission upon receipt of the requested information or resolution of the issues described above. Upon subsequent review, other concerns may require attention.

Please respond by the "Respond By Date:" above. If an extension is required, you must submit your request prior to that date. An extension may be requested for up to 30 days. Failure to respond will result in the filing being closed.

Once a submission has been closed, a new SERFF submission will be required. To expedite the review, the new submission should reference the SERFF tracking number of the prior submission and verify that all outstanding issues have been addressed. Should you wish to discuss any of the objections or provide additional information related to any of the objections, this should be done prior to making a new SERFF submission.

Sincerely,  
Bill Dismore

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**State:** Virginia **Filing Company:** Mutual of Omaha Insurance Company  
**TOI/Sub-TOI:** LTC031 Individual Long Term Care/LTC031.003 Other  
**Product Name:** LT50 et al - 2021 Rate Increase  
**Project Name/Number:** LT50 et al - 2021/

## Objection Letter

Objection Letter Status	Info has been requested from company
Objection Letter Date	08/29/2022
Submitted Date	08/29/2022
Respond By Date	09/09/2022

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Dear Jeff LaFond,

**Introduction:**

**Objection 1**

Comments: The rate request is pending review by the VA BOI Insurance Commissioner which is scheduled for September 7, 2022. Please do not respond to this objection until receiving notification of the results of the review. The notification will be a "Note to Filer".

**Conclusion:**

Thank you for your courtesy and consideration in this matter.

Sincerely,

Bill Dismore

**State:** Virginia **Filing Company:** Mutual of Omaha Insurance Company  
**TOI/Sub-TOI:** LTC03I Individual Long Term Care/LTC03I.003 Other  
**Product Name:** LT50 et al - 2021 Rate Increase  
**Project Name/Number:** LT50 et al - 2021/

## Objection Letter

Objection Letter Status	Info has been requested from company
Objection Letter Date	06/03/2022
Submitted Date	06/03/2022
Respond By Date	07/03/2022

Dear Jeff LaFond,

### Introduction:

The Bureau has the following concerns and/or needs additional information to continue its review.

Please note, any revisions, modifications, or changes of any type to this filing must be clearly identified and explained in detail. For clarity, multiple changes should be summarized in a cover letter, etc.

### Objection 1

- L&H Actuarial Memorandum (Supporting Document)

Comments: Please provide responses to outstanding objection 11 dated November 19, 2021:

a) Please state what the maximum justifiable rate increase would be under the prospective present value approach. Please also provide the necessary experience projections so that we may replicate the calculation for each policy form.

b) Please treat waiver of premium benefits as a reduction to premium instead of a claims expense, exclude the experience of policy forms for which there are currently no policyholders in Virginia, and discount and accumulate cash flows using the maximum statutory valuation interest rate at the time the policies were issued.

### Objection 2

- L&H Actuarial Memorandum (Supporting Document)

Comments: Related to the updated morbidity assumptions, please provide the following:

a. Please provide additional supporting documentation describing how the Milliman 2017 Guidelines are utilized in the morbidity assumptions, including quantitative support of actual to expected analysis and your statement that Mutual of Omahas claim costs align with Milliman claim costs.

b. Please describe why the actual to expected incurred claims compared to historical claims are a rough projection in your response to objection 2 dated 05/13/2022? We expected the actual to expected analysis to be part of your on-going morbidity assumption review process.

c. In your morbidity methodology, what assumptions do you assume for claims incidence rates, claims durations and cost, and claims termination rates? Please provide actual to expected comparison for these assumptions and describe how they changed from prior.

### Conclusion:

We shall be glad to continue our review of this submission upon receipt of the requested information or resolution of the issues described above. Upon subsequent review, other concerns may require attention.

Please respond by the "Respond By Date:" above. If an extension is required, you must submit your request prior to that date. An extension may be requested for up to 30 days. Failure to respond will result in the filing being closed.

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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:** LT50 et al - 2021 Rate Increase  
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Once a submission has been closed, a new SERFF submission will be required. To expedite the review, the new submission should reference the SERFF tracking number of the prior submission and verify that all outstanding issues have been addressed. Should you wish to discuss any of the objections or provide additional information related to any of the objections, this should be done prior to making a new SERFF submission.

Sincerely,  
Bill Dismore

**State:** Virginia **Filing Company:** Mutual of Omaha Insurance Company  
**TOI/Sub-TOI:** LTC03I Individual Long Term Care/LTC03I.003 Other  
**Product Name:** LT50 et al - 2021 Rate Increase  
**Project Name/Number:** LT50 et al - 2021/

## Objection Letter

Objection Letter Status	Info has been requested from company
Objection Letter Date	04/07/2022
Submitted Date	04/07/2022
Respond By Date	05/06/2022

Dear Jeff LaFond,

### **Introduction:**

The Bureau has the following concerns and/or needs additional information to continue its review.

Please note, any revisions, modifications, or changes of any type to this filing must be clearly identified and explained in detail. For clarity, multiple changes should be summarized in a cover letter, etc.

### **Objection 1**

- Exhibits for 03/25/2020 Response (Supporting Document)

Comments: The following question relates to the response to objection 4 dated March 25, 2022:

Please revise the morbidity rate comparison shown in attachment 2 from the objection 3 response dated January 21, 2022 so that it is only for the policy forms associated with this filing.

### **Objection 2**

- Exhibits for 01/20/2022 Response (Supporting Document)

Comments: Please provide responses to outstanding objections 1 and 3 dated March 25, 2022.

Objection 1: Exhibits 5A-5C

In response to objection 5 dated January 21, 2021, the Company provided expected claims by duration which total \$442 million and matches to expected historical claims under original pricing assumptions as shown in Exhibits 5A-5C (All Benefit Periods).

Instead of the expected claims under the original pricing assumptions,

A) Please provide a comparison of actual incurred claims to the expected incurred claims underlying the updated assumptions by duration for the policy forms associated with this filing so we may evaluate the appropriateness of the revised morbidity assumptions relative to the actual experience of the policy forms associated with this filing.

B) If the expected incurred claims deviate significantly relative to historical experience, please justify why the Company believes the assumptions are appropriate to use in the experience projections.

Objection 3: Attachment 3

Regarding the lapse rates shown in attachment 3 from the objection 4 response dated January 21, 2022:

A) Please describe how the revised expected lapse rates were developed for durations with no experience and how these changed from original and most recently approved Virginia rate filing assumptions.

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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:** LT50 et al - 2021 Rate Increase  
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B) Please provide a comparison of current lapse rates and revised lapse rates by duration and issue age in support of your statement that the rate increase is necessary due to insured keeping their policies longer.

C) Please explain why the proposed lapse rates for certain durations are lower than the actual experience would suggest as shown in attachment 3.

D) Please confirm the data in attachment 3 is based on nationwide experience for only the policy forms that are the subject of this filing. If not, please provide attachment 3 with experience for only these policy forms.

E) Please confirm the actual lapse rates represent only voluntary lapses, excluding mortality.

F) If possible, please remove shock lapses associated with previously implemented rate increases from the historical experience.

G) Please confirm attachment 3 shows the lapse rates by issue age cohorts as applied in the pricing of the product.

**Conclusion:**

We shall be glad to continue our review of this submission upon receipt of the requested information or resolution of the issues described above. Upon subsequent review, other concerns may require attention.

Please respond by the "Respond By Date:" above. If an extension is required, you must submit your request prior to that date. An extension may be requested for up to 30 days. Failure to respond will result in the filing being closed.

Once a submission has been closed, a new SERFF submission will be required. To expedite the review, the new submission should reference the SERFF tracking number of the prior submission and verify that all outstanding issues have been addressed. Should you wish to discuss any of the objections or provide additional information related to any of the objections, this should be done prior to making a new SERFF submission.

Sincerely,  
Bill Dismore

**State:** Virginia **Filing Company:** Mutual of Omaha Insurance Company  
**TOI/Sub-TOI:** LTC03I Individual Long Term Care/LTC03I.003 Other  
**Product Name:** LT50 et al - 2021 Rate Increase  
**Project Name/Number:** LT50 et al - 2021/

## Objection Letter

Objection Letter Status	Info has been requested from company
Objection Letter Date	02/07/2022
Submitted Date	02/07/2022
Respond By Date	03/09/2022

Dear Jeff LaFond,

### **Introduction:**

The Bureau has the following concerns and/or needs additional information to continue its review.

Please note, any revisions, modifications, or changes of any type to this filing must be clearly identified and explained in detail. For clarity, multiple changes should be summarized in a cover letter, etc.

### **Objection 1**

- Exhibits for 01/20/2022 Response (Supporting Document)

Comments: Exhibits 5A-5C

In response to objection 5 dated January 21, 2021, the Company provided expected claims by duration which total \$442 million and matches to expected historical claims under original pricing assumptions as shown in Exhibits 5A-5C (All Benefit Periods).

Instead of the expected claims under the original pricing assumptions,

A) Please provide a comparison of actual incurred claims to the expected incurred claims underlying the updated assumptions by duration for the policy forms associated with this filing so we may evaluate the appropriateness of the revised morbidity assumptions relative to the actual experience of the policy forms associated with this filing.

B) If the expected incurred claims deviate significantly relative to historical experience, please justify why the Company believes the assumptions are appropriate to use in the experience projections.

### **Objection 2**

- Exhibits for 01/20/2022 Response (Supporting Document)

Comments: Attachment 5

The following questions relates to the response to objection 8 dated January 21, 2022:

A) Please clarify what the percent ranges in Attachment 5 Increase by Assumption represent.

B) In addition, please provide a breakdown of the rate increase of 19.7% for Non-Lifetime policies and rate increase of 57.0% for Lifetime polices due to the changes in the lapse, mortality and morbidity assumptions.

### **Objection 3**

- Exhibits for 01/20/2022 Response (Supporting Document)

Comments: Attachment 3

Regarding the lapse rates shown in attachment 3 from the objection 4 response dated January 21, 2022:

**State:** Virginia **Filing Company:** Mutual of Omaha Insurance Company  
**TOI/Sub-TOI:** LTC031 Individual Long Term Care/LTC031.003 Other  
**Product Name:** LT50 et al - 2021 Rate Increase  
**Project Name/Number:** LT50 et al - 2021/

- A) Please describe how the revised expected lapse rates were developed for durations with no experience and how these changed from original and most recently approved Virginia rate filing assumptions.
- B) Please provide a comparison of current lapse rates and revised lapse rates by duration and issue age in support of your statement that the rate increase is necessary due to insured keeping their policies longer.
- C) Please explain why the proposed lapse rates for certain durations are lower than the actual experience would suggest as shown in attachment 3.
- D) Please confirm the data in attachment 3 is based on nationwide experience for only the policy forms that are the subject of this filing. If not, please provide attachment 3 with experience for only these policy forms.
- E) Please confirm the actual lapse rates represent only voluntary lapses, excluding mortality.
- F) If possible, please remove shock lapses associated with previously implemented rate increases from the historical experience.
- G) Please confirm attachment 3 shows the lapse rates by issue age cohorts as applied in the pricing of the product.

#### **Objection 4**

- Exhibits for 01/20/2022 Response (Supporting Document)

Comments: Attachment 2

Regarding the morbidity rates shown in attachment 2 from the objection 3 response dated January 21, 2022, please confirm that the comparison is only for the policy forms associated with this filing. If not please revise the comparison.

#### **Objection 5**

- L&H Actuarial Memorandum (Supporting Document)

Comments: Please confirm that all present and accumulated values used to determine rate increases use the maximum valuation interest rate for contract reserves as specified in §38.2-1371 of the Code of Virginia.

#### **Objection 6**

- L&H Actuarial Memorandum (Supporting Document)

Comments: In support of If-Knew testing please provide the nationwide present value of lifetime premium at previously approved rate levels in Virginia since inception of the policy form in total and by limited/lifetime benefit and inflation/no inflation policy types.

#### **Conclusion:**

We shall be glad to continue our review of this submission upon receipt of the requested information or resolution of the issues described above. Upon subsequent review, other concerns may require attention.

Please respond by the "Respond By Date:" above. If an extension is required, you must submit your request prior to that date. An extension may be requested for up to 30 days. Failure to respond will result in the filing being closed.

Once a submission has been closed, a new SERFF submission will be required. To expedite the review, the new submission should reference the SERFF tracking number of the prior submission and verify that all outstanding issues have been addressed. Should you wish to discuss any of the objections or provide additional information related to any of the objections, this should be done prior to making a new SERFF submission.



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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:** LT50 et al - 2021 Rate Increase  
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Sincerely,  
Bill Dismore

**State:** Virginia **Filing Company:** Mutual of Omaha Insurance Company  
**TOI/Sub-TOI:** LTC03I Individual Long Term Care/LTC03I.003 Other  
**Product Name:** LT50 et al - 2021 Rate Increase  
**Project Name/Number:** LT50 et al - 2021/

## Objection Letter

Objection Letter Status	Info has been requested from company
Objection Letter Date	11/19/2021
Submitted Date	11/19/2021
Respond By Date	12/19/2021

Dear Jeff LaFond,

### **Introduction:**

The Bureau has the following concerns and/or needs additional information to continue its review.

Please note, any revisions, modifications, or changes of any type to this filing must be clearly identified and explained in detail. For clarity, multiple changes should be summarized in a cover letter, etc.

### **Objection 1**

- Exhibits for 10/29/2021 Response (Objection 1) (Supporting Document)
- Exhibits for 10/29/2021 Response (Objection 2) (Supporting Document)
- Exhibits for 10/29/2021 Response (Objection 4) (Supporting Document)
- L&H Actuarial Memorandum (Supporting Document)

Comments: Please provide the information contained in Attachments 1A-1C broken down into four subsets: policyholders with a lifetime benefit period and no inflation rider, policyholders with a lifetime benefit period and an inflation rider, policyholders with a limited benefit period and no inflation rider, and policyholders with a limited benefit period and an inflation rider. Please treat waiver of premium benefits in this breakout as a reduction to premium instead of a claims expense, and please exclude the experience of policy forms for which there are currently no policyholders in Virginia. For each subset, please provide the following projection of nationwide experience:

- Using current assumptions and current rates
- Using current assumptions with the proposed rate increase
- Using current assumptions with premiums restated as if the proposed rate schedule had been in effect from inception
- Using actual historical experience to the projection date and future projections based on the prior assumptions (to be used in the Prospective PV test)
- Using original assumptions and original premiums from inception

Projections a-e can be separate tabs or combined into separate columns on the same exhibit.

### **Objection 2**

- Exhibits for 10/29/2021 Response (Objection 1) (Supporting Document)
- Exhibits for 10/29/2021 Response (Objection 2) (Supporting Document)
- Exhibits for 10/29/2021 Response (Objection 4) (Supporting Document)
- L&H Actuarial Memorandum (Supporting Document)

Comments: Please confirm that the original lifetime loss ratio of 62.9% from Attachment 1C has been adjusted to reflect the actual mix of business sold.

**State:** Virginia **Filing Company:** Mutual of Omaha Insurance Company  
**TOI/Sub-TOI:** LTC03I Individual Long Term Care/LTC03I.003 Other  
**Product Name:** LT50 et al - 2021 Rate Increase  
**Project Name/Number:** LT50 et al - 2021/

**Objection 3**

- Exhibits for 10/29/2021 Response (Objection 1) (Supporting Document)
- Exhibits for 10/29/2021 Response (Objection 2) (Supporting Document)
- Exhibits for 10/29/2021 Response (Objection 4) (Supporting Document)
- L&H Actuarial Memorandum (Supporting Document)

*Comments: Please provide a comparison of actual deaths to expected deaths by duration for the policy forms associated with this filing so we may evaluate the appropriateness of the mortality assumptions relative to the actual experience of the policy forms associated with this filing. If the mortality assumptions used in the experience projections differ significantly from historical experience, please provide additional justification for the proposed assumptions.*

**Objection 4**

- Exhibits for 10/29/2021 Response (Objection 1) (Supporting Document)
- Exhibits for 10/29/2021 Response (Objection 2) (Supporting Document)
- Exhibits for 10/29/2021 Response (Objection 4) (Supporting Document)
- L&H Actuarial Memorandum (Supporting Document)

*Comments: Please provide a comparison of actual voluntary lapses to expected voluntary lapses by duration for the policy forms associated with this filing so we may evaluate the appropriateness of the voluntary lapse assumptions relative to the actual experience of the policy forms associated with this filing. If possible, please remove shock lapses associated with previously implemented rate increases from the historical experience. If the voluntary lapse assumptions used in the experience projections differ significantly from historical experience, please provide additional justification for the proposed assumptions.*

**Objection 5**

- Exhibits for 10/29/2021 Response (Objection 1) (Supporting Document)
- Exhibits for 10/29/2021 Response (Objection 2) (Supporting Document)
- Exhibits for 10/29/2021 Response (Objection 4) (Supporting Document)
- L&H Actuarial Memorandum (Supporting Document)

*Comments: Please provide a comparison of actual incurred claims to expected incurred claims by duration for the policy forms associated with this filing. If the expected incurred claims deviate significantly relative to historical experience, please justify why the Company believes the assumptions are appropriate to use in the experience projections.*

**Objection 6**

- Exhibits for 10/29/2021 Response (Objection 1) (Supporting Document)
- Exhibits for 10/29/2021 Response (Objection 2) (Supporting Document)
- Exhibits for 10/29/2021 Response (Objection 4) (Supporting Document)
- L&H Actuarial Memorandum (Supporting Document)

*Comments: Please state whether the experience projections reflect the impact of policyholders reducing benefit levels to reduce or eliminate the impact of the requested premium increase. If so, please justify the assumption reflected in the experience projections. Please include quantitative support.*

**Objection 7**

- L&H Actuarial Memorandum (Supporting Document)

*Comments: Please state whether the experience projections reflect the anticipation of any shock lapses. If so, please justify the assumption reflected in the experience projections. Please include quantitative support.*

**Objection 8**

- L&H Actuarial Memorandum (Supporting Document)

*Comments: Please identify the portion of the proposed rate increase that is attributed to each of the following components:*

**State:** Virginia **Filing Company:** Mutual of Omaha Insurance Company  
**TOI/Sub-TOI:** LTC03I Individual Long Term Care/LTC03I.003 Other  
**Product Name:** LT50 et al - 2021 Rate Increase  
**Project Name/Number:** LT50 et al - 2021/

- a. Changes in the voluntary lapse assumptions
- b. Changes in the mortality assumptions
- c. Changes in the expected claim cost assumptions
- d. Changes in any other assumptions (e.g., interest rates)

**Objection 9**

- L&H Actuarial Memorandum (Supporting Document)

Comments: Please confirm if margin was included in claim reserve estimates. If margin was included, please indicate what level of margin was included and why the Company believes this level of margin is appropriate.

**Objection 10**

- L&H Actuarial Memorandum (Supporting Document)

Comments: Please provide the nationwide policy reserves for the forms included in the filing, as of December 31, 2019, calculated at the interest rate used to discount and accumulate cash flows in the experience projections, excluding the experience of policy forms for which there are currently no policyholders in Virginia.

**Objection 11**

- L&H Actuarial Memorandum (Supporting Document)

Comments: Please state what the maximum justifiable rate increase would be under the prospective present value approach. Please provide the necessary experience projections so that we may be able to replicate the calculation for each policy form. Please treat waiver of premium benefits as a reduction to premium instead of a claims expense, exclude the experience of policy forms for which there are currently no policyholders in Virginia, and discount and accumulate cash flows using the maximum statutory valuation interest rate at the time the policies were issued.

**Objection 12**

- L&H Actuarial Memorandum (Supporting Document)

Comments: Please confirm that the forms for which experience has been pooled in this filing will continue to be pooled for any future rate increase filings.

**Objection 13**

- L&H Actuarial Memorandum (Supporting Document)

Comments: An increase in deaths (due to COVID-19) and an increase in voluntary lapses (due to the current economic environment) would be expected to result in fewer insured lives, which would be expected to reduce claim liabilities going forward. Please provide any emerging experience pertaining to the actual number of deaths and voluntary lapses in 2020 and 2021 relative to the expected assumptions associated with this filing.

**Objection 14**

- L&H Actuarial Memorandum (Supporting Document)

Comments: Please state the number of policies ever issued nationwide under the policy forms associated with this filing.

**Objection 15**

- L&H Actuarial Memorandum (Supporting Document)

Comments: Please state the cumulative rate increase that has been approved nationwide for the policy forms associated with this filing and what the cumulative nationwide rate increase would be for the policy forms associated with this filing if all pending rate increase requests were approved.

**Objection 16**

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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:** LT50 et al - 2021 Rate Increase  
**Project Name/Number:** LT50 et al - 2021/

- L&H Actuarial Memorandum (Supporting Document)

Comments: The most commonly asked questions document states that if the proposed rate increase is approved, no future rate action is anticipated, assuming future corrective rate actions are not warranted. Please state under what circumstances future corrective rate actions would be warranted.

#### **Objection 17**

- L&H Actuarial Memorandum (Supporting Document)

Comments: Please advise if any policies issued in Virginia have partnership status so that we may determine if 14VAC5-200-75 D. 2. c. is applicable.

#### **Conclusion:**

We shall be glad to continue our review of this submission upon receipt of the requested information or resolution of the issues described above. Upon subsequent review, other concerns may require attention.

Please respond by the "Respond By Date:" above. If an extension is required, you must submit your request prior to that date. An extension may be requested for up to 30 days. Failure to respond will result in the filing being closed.

Once a submission has been closed, a new SERFF submission will be required. To expedite the review, the new submission should reference the SERFF tracking number of the prior submission and verify that all outstanding issues have been addressed. Should you wish to discuss any of the objections or provide additional information related to any of the objections, this should be done prior to making a new SERFF submission.

Sincerely,  
Bill Dismore

**State:** Virginia **Filing Company:** Mutual of Omaha Insurance Company  
**TOI/Sub-TOI:** LTC03I Individual Long Term Care/LTC03I.003 Other  
**Product Name:** LT50 et al - 2021 Rate Increase  
**Project Name/Number:** LT50 et al - 2021/

## Objection Letter

Objection Letter Status	Info has been requested from company
Objection Letter Date	09/29/2021
Submitted Date	09/29/2021
Respond By Date	10/29/2021

Dear Jeff LaFond,

### Introduction:

The Bureau has the following concerns and/or needs additional information to continue its review.

Please note, any revisions, modifications, or changes of any type to this filing must be clearly identified and explained in detail. For clarity, multiple changes should be summarized in a cover letter, etc.

### Objection 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, LTASeries 19631, LTA-Series 20251, OGH7M-44 REV, OGH8M-44 REV, OGH9M-44 REV] (Rate)

Comments: 1) Please remove the Current Rates from the Rate/Rule Schedule and place these under the Supporting Documentation tab.

2) Please list each affected form as a separate Item No. and describe the Rate Action and Percent Rate Change Requested for each Affected Form Number.

### Objection 2

- L&H Actuarial Memorandum (Supporting Document)

Comments: Please provide all Exhibits in Excel with working formulas so the calculations may be followed.

### Objection 3

Comments: Policyholder Notification Letter

Please provide the policyholder notification letter and any accompanying forms under the Form Schedule. If these forms have been previously approved in Virginia, please provide the SERFF Tracking # for the approval and place a copy of each approved form under the Supporting Documentation tab.

### Objection 4

- L&H Actuarial Memorandum (Supporting Document)

Comments: 1. For all projections requested in this question, the baseline should comply with the following:

a. Any policies issued as limited-pay which are now in paid-up status should be removed, both from historical experience and future projections.

b. Please confirm that for the pre-stability block, assumptions are best-estimate.

c. Premiums should be at the Virginia rate level for both historical and projected future.

d. Please use the appropriate maximum valuation interest rate for accumulation and discounting of this block.

**State:** Virginia **Filing Company:** Mutual of Omaha Insurance Company  
**TOI/Sub-TOI:** LTC03I Individual Long Term Care/LTC03I.003 Other  
**Product Name:** LT50 et al - 2021 Rate Increase  
**Project Name/Number:** LT50 et al - 2021/

2. To assist the Virginia Bureau of Insurance in its review, for each of the subsets of the business corresponding to the combinations of (with or without Increased benefit limits), please provide (in Excel format) the following projections on a nationwide basis:

a. current assumptions and current rates

b. current assumptions with the proposed rate increase

c. current assumptions with premiums restated as if the proposed rate schedule had been in effect from inception

d. actual historical experience to the projection date and future projections based on the prior assumptions (to be used in the Prospective PV test)

e. original assumptions and original premiums from inception

Projections a-e can be separate tabs or combined into separate columns on the same exhibit.

3. For each of the two subsets of the business used in the projections above, please provide the active life reserves balance as of the projection date on a nationwide basis.

4. Please provide the 60/80 Test for each subset and include all projections required to validate those tests.

5. Please provide in Excel format an exhibit showing the rate increase history and status of existing rate increase requests in each state, including the cumulative approved rate increase percentage and the in force annualized premium for each state.

6. Please provide details of the original assumptions used.

7. Please advise if the current assumptions are consistent with the most recent asset adequacy testing.

8. Please provide all projections required to compute the Prospective PV and If Knew/Makeup Blend allowable increases as currently under consideration by the NAIC.

#### **Objection 5**

- L&H Actuarial Memorandum (Supporting Document)

Comments: Please provide the policy count for each policy form by pre and post stability issue dates.

#### **Conclusion:**

We shall be glad to continue our review of this submission upon receipt of the requested information or resolution of the issues described above. Upon subsequent review, other concerns may require attention.

Please respond by the "Respond By Date:" above. If an extension is required, you must submit your request prior to that date. An extension may be requested for up to 30 days. Failure to respond will result in the filing being closed.

Once a submission has been closed, a new SERFF submission will be required. To expedite the review, the new submission should reference the SERFF tracking number of the prior submission and verify that all outstanding issues have been addressed. Should

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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:** LT50 et al - 2021 Rate Increase  
**Project Name/Number:** LT50 et al - 2021/

*you wish to discuss any of the objections or provide additional information related to any of the objections, this should be done prior to making a new SERFF submission.*

Sincerely,  
Bill Dismore



SERFF Tracking #:

MUTA-132676983

State Tracking #:

MUTA-132676983

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: LT50 et al - 2021 Rate Increase

Project Name/Number: LT50 et al - 2021/

## Response Letter

Response Letter Status	Submitted to State
Response Letter Date	09/13/2022
Submitted Date	09/13/2022

Dear Bill Dismore,

### Introduction:

This is in response to your Objection Letter dated September 13, 2022, regarding the above-captioned filing.

### Response 1

#### Comments:

I removed the form Premium Notification Letter (Mutual)-VA.pdf from the Form Schedule tab. However, as it was included in the initial filing, SERFF will not allow me to remove the following items:

Form Name

Form Type

Action

### Related Objection 1

Applies To:

- Premium Notification Letter, ML12047 (Form)

Comments: Please remove the Premium Notification Letter under the Form Schedule as this form is being approved under SERFF # MUTM-133106304.

### Changed Items:

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		OTH	Initial				Date Submitted: 09/13/2022 By: Jeff LaFond
<i>Previous Version</i>								
1	Premium Notification Letter	ML12047	OTH	Initial			Premium Notification Letter (Mutual)-VA.pdf	Date Submitted: 10/29/2021 By: Jeff LaFond

No Rate/Rule Schedule items changed.

**SERFF Tracking #:**

MUTA-132676983

**State Tracking #:**

MUTA-132676983

**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:**

LT50 et al - 2021 Rate Increase

**Project Name/Number:**

LT50 et al - 2021/

*No Supporting Documents changed.*

**Conclusion:**

*Sincerely,*

Jeff LaFond

*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:** LT50 et al - 2021 Rate Increase  
**Project Name/Number:** LT50 et al - 2021/

## Response Letter

Response Letter Status	Submitted to State
Response Letter Date	09/13/2022
Submitted Date	09/13/2022

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Dear Bill Dismore,

### **Introduction:**

This is in response to your Objection Letter dated September 13, 2022, regarding the above-captioned filing.

### **Response 1**

#### **Comments:**

The original documents described below have been replace with the revised versions:

Actuarial Memorandum

Exhibit 2 Average Annual Premium (VA).pdf

Exhibits 5A-5C Nationwide Lifetime Experience Projections.pdf

Exhibits 6A-6C Virginia Lifetime Experience Projections.pdf

### **Related Objection 1**

Applies To:

- L&H Actuarial Memorandum (Supporting Document)

Comments: Please withdraw the original documents described below and replace them with their revised versions.

1) Actuarial Memorandum

2) Exhibit 2 - Average Annual Premium (VA).pdf

3) Exhibit 5A-5C - Nationwide Lifetime Experience Projections.pdf

4) Exhibit 6A-6C - Virginia Lifetime Experience Projections.pdf

### **Changed Items:**

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: LT50 et al - 2021 Rate Increase

Project Name/Number: LT50 et al - 2021/

**Supporting Document Schedule Item Changes****Satisfied - Item:** L&H Actuarial Memorandum**Comments:**

**Attachment(s):**

Exhibit 3 - Rate Increase History (VA).pdf  
 Exhibits 4A-4C - Nationwide Historical Experience.pdf  
 Actuarial Certification - Legacy (VA).pdf  
 Exhibit 1 - Benefit Summary.pdf  
 Exhibit 3 - Rate Increase History (all states).pdf  
 LTC Rate Increase Template (LT50 et al).pdf  
 Supplementary Info (LT50 et al).pdf  
 Attachment 1 - Covered Lives and Claim Counts (VA).pdf  
 Attachment 2 - Distribution.pdf  
 Attachment 3 - Original Pricing Assumptions.pdf  
 Exhibits 7A-C - Nationwide Dual Loss Ratio Test.pdf  
 Exhibit 8 - Side-by-Side Comparison (HCA et al).pdf  
 Attachment 5 - Premium Notification Letter (Mutual)-VA.pdf  
 Attachment 4 - Assumption Comparison.pdf  
 Exhibits 5A-5C - Nationwide Lifetime Experience Projection-revised.pdf  
 Exhibits 6A-6C - Virginia Lifetime Experience Projection-revised.pdf  
 Actuarial Memorandum - Legacy (VA)-revised.pdf  
 Exhibit 2 - Average Annual Premium (VA)-revised.pdf

*Previous Version***Satisfied - Item:** *L&H Actuarial Memorandum***Comments:**

**Attachment(s):**

*Exhibit 3 - Rate Increase History (VA).pdf  
 Exhibits 4A-4C - Nationwide Historical Experience.pdf  
 Exhibits 5A-5C - Nationwide Lifetime Experience Projection.pdf  
 Actuarial Certification - Legacy (VA).pdf  
 Exhibit 1 - Benefit Summary.pdf  
 Exhibit 2 - Average Annual Premium (VA).pdf  
 Exhibit 3 - Rate Increase History (all states).pdf  
 LTC Rate Increase Template (LT50 et al).pdf  
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 Attachment 4 - Assumption Comparison.pdf  
 Actuarial Memorandum - Legacy (VA).pdf  
 Exhibits 6A-6C - Virginia Lifetime Experience Projection.pdf  
 Exhibits 7A-C - Nationwide Dual Loss Ratio Test.pdf  
 Exhibit 8 - Side-by-Side Comparison (HCA et al).pdf  
 Attachment 5 - Premium Notification Letter (Mutual)-VA.pdf*

SERFF Tracking #:

MUTA-132676983

State Tracking #:

MUTA-132676983

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:

LT50 et al - 2021 Rate Increase

Project Name/Number:

LT50 et al - 2021/

## Response 2

### Comments:

The revised versions of the Actuarial Memorandum and supporting exhibits, Exhibit 2, Exhibits 5A-5C and Exhibits 6A-6C reflect the revised overall increase percent increase of 30%. Please note that the average increase of 30% is the resulting average increase of the 21% increase to policyholders with non-lifetime benefit period plans and the 36% increase to policyholders with lifetime benefit period plans.

### Related Objection 2

Applies To:

- L&H Actuarial Memorandum (Supporting Document)

Comments: The actuarial memorandum and supporting exhibits do not appear to be updated because of the revised rate increase. Please ensure that all supporting documents are updated to reflect the revised overall % increase of 30%

### Changed Items:

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: LT50 et al - 2021 Rate Increase

Project Name/Number: LT50 et al - 2021/

**Supporting Document Schedule Item Changes****Satisfied - Item:** L&H Actuarial Memorandum**Comments:**

**Attachment(s):**

Exhibit 3 - Rate Increase History (VA).pdf  
 Exhibits 4A-4C - Nationwide Historical Experience.pdf  
 Actuarial Certification - Legacy (VA).pdf  
 Exhibit 1 - Benefit Summary.pdf  
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 Attachment 4 - Assumption Comparison.pdf  
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 Exhibits 6A-6C - Virginia Lifetime Experience Projection-revised.pdf  
 Actuarial Memorandum - Legacy (VA)-revised.pdf  
 Exhibit 2 - Average Annual Premium (VA)-revised.pdf

*Previous Version***Satisfied - Item:** *L&H Actuarial Memorandum***Comments:**

**Attachment(s):**

*Exhibit 3 - Rate Increase History (VA).pdf  
 Exhibits 4A-4C - Nationwide Historical Experience.pdf  
 Exhibits 5A-5C - Nationwide Lifetime Experience Projection.pdf  
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 Exhibit 8 - Side-by-Side Comparison (HCA et al).pdf  
 Attachment 5 - Premium Notification Letter (Mutual)-VA.pdf*

State: Virginia

Filing Company:

Mutual of Omaha Insurance Company

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

Product Name: LT50 et al - 2021 Rate Increase

Project Name/Number: LT50 et al - 2021/

**Supporting Document Schedule Item Changes****Satisfied - Item:** L&H Actuarial Memorandum**Comments:**

**Attachment(s):**

Exhibit 3 - Rate Increase History (VA).pdf  
 Exhibits 4A-4C - Nationwide Historical Experience.pdf  
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 Exhibit 8 - Side-by-Side Comparison (HCA et al).pdf  
 Attachment 5 - Premium Notification Letter (Mutual)-VA.pdf  
 Attachment 4 - Assumption Comparison.pdf  
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 Exhibits 6A-6C - Virginia Lifetime Experience Projection-revised.pdf  
 Actuarial Memorandum - Legacy (VA)-revised.pdf  
 Exhibit 2 - Average Annual Premium (VA)-revised.pdf

*Previous Version***Satisfied - Item:** *L&H Actuarial Memorandum***Comments:**

**Attachment(s):**

*Exhibit 3 - Rate Increase History (VA).pdf  
 Exhibits 4A-4C - Nationwide Historical Experience.pdf  
 Exhibits 5A-5C - Nationwide Lifetime Experience Projection.pdf  
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 Exhibit 8 - Side-by-Side Comparison (HCA et al).pdf  
 Attachment 5 - Premium Notification Letter (Mutual)-VA.pdf*

SERFF Tracking #:

MUTA-132676983

State Tracking #:

MUTA-132676983

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:

LT50 et al - 2021 Rate Increase

Project Name/Number:

LT50 et al - 2021/

<b>Satisfied - Item:</b>	Exhibits for 09/12/2022 Response
<b>Comments:</b>	
<b>Attachment(s):</b>	Cover Letter (VA - LT50 et al).pdf
<i>Previous Version</i>	
<b>Satisfied - Item:</b>	<i>Exhibits for 09/12/2022 Response</i>
<b>Comments:</b>	
<b>Attachment(s):</b>	<i>Cover Letter (VA - LT50 et al).pdf Actuarial Memorandum - Legacy (VA)-revised.pdf Exhibit 2 - Average Annual Premium (VA)-revised.pdf Exhibits 5A-5C - Nationwide Lifetime Experience Projection-revised.pdf Exhibits 6A-6C - Virginia Lifetime Experience Projection-revised.pdf</i>

**Conclusion:**

Your prompt approval of the revised increase amount will be greatly appreciated.

Sincerely,

Jeff LaFond

Sincerely,

Jeff LaFond



SERFF Tracking #:

MUTA-132676983

State Tracking #:

MUTA-132676983

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:

LT50 et al - 2021 Rate Increase

Project Name/Number:

LT50 et al - 2021/

## Response Letter

Response Letter Status	Submitted to State
Response Letter Date	09/12/2022
Submitted Date	09/12/2022

Dear Bill Dismore,

### Introduction:

This is in response to your Note to Filer dated September 9, 2022, regarding the above-captioned filing.

### Response 1

#### Comments:

We accept the MSA recommended rate increase of 21.0% for the Non-Lifetime Benefit Period plans and a 36.0% increase for the Lifetime Benefit Period plans, which results in a 30% overall increase.

We reserve the right to request future increases, after the revised increase has been fully implemented, if warranted by the experience, to bring the Virginia policyholders to the national level.

A Post-Submission Update will be submitted to reflect the revised increase amount and the premium impact information, a revised Filing Description on the General Information tab, and a revised target implementation date of 01/01/2023.

Finally, rate schedules that reflect the revised increase amount have been added to the Rate/Rule Schedule tab. A revised Long Term Care Rate Request Summary, revised supporting documentation and a Cover Letter (which includes those items that have been revised) have been added to the Supporting Documentation tab.

### Related Objection 1

Comments: The rate request is pending review by the VA BOI Insurance Commissioner which is scheduled for September 7, 2022. Please do not respond to this objection until receiving notification of the results of the review. The notification will be a "Note to Filer".

### Changed Items:

No Form Schedule items changed.

SERFF Tracking #:

MUTA-132676983

State Tracking #:

MUTA-132676983

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:

LT50 et al - 2021 Rate Increase

Project Name/Number:

LT50 et al - 2021/

## 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	Revised	Previous State Filing Number: MUTA-130706482 Percent Rate Change Request: 30	Rates - LT50 (VA - 2023)-revised.pdf,	09/12/2022 By: Jeff LaFond
<i>Previous Version</i>						
1	rate schedules	LT50-Series 19241	Revised	Previous State Filing Number: MUTA-130706482 Percent Rate Change Request: 40.7	Rates - LT50 (VA - 2021).pdf, Rates - LT50 (VA - 2022).pdf,	10/29/2021 By: Jeff LaFond
<i>Previous Version</i>						
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, LTASeries 19631, LTA-Series 20251, OGH7M-44 REV, OGH8M-44 REV, OGH9M-44 REV	Revised	Previous State Filing Number: MUTA-130706482 Percent Rate Change Request: 40.7	Rates - LT50 (VA - current).pdf, Rates - LT50 (VA - 2021).pdf, Rates - LT50 (VA - 2022).pdf, Rates - ODX5M (VA - current).pdf, Rates - ODX5M (VA - 2021).pdf, Rates - ODX5M (VA - 2022).pdf, Rates - NH50 (VA - current).pdf, Rates - NH50 (VA - 2021).pdf, Rates - NH50 (VA - 2022).pdf, Rates - ODX6M (VA - current).pdf, Rates - ODX6M (VA - 2021).pdf, Rates - ODX6M (VA - 2022).pdf, Rates - HCA et al (VA - current & proposed).pdf,	09/24/2021 By: Jeff LaFond

SERFF Tracking #:

MUTA-132676983

State Tracking #:

MUTA-132676983

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:

LT50 et al - 2021 Rate Increase

Project Name/Number:

LT50 et al - 2021/

**Rate/Rule Schedule Item Changes**

2	rate schedules	LT50- Series 19409	Revised	Previous State Filing Number: MUTA-130706482 Percent Rate Change Request: 30		09/12/2022 By: Jeff LaFond
<i>Previous Version</i>						
2	<i>rate schedules</i>	<i>LT50- Series 19409</i>	<i>Revised</i>	<i>Previous State Filing Number: MUTA-130706482 Percent Rate Change Request: 40.7</i>		<i>10/29/2021 By: Jeff LaFond</i>
3	rate schedules	ODX5M	Revised	Previous State Filing Number: MUTA-130706482 Percent Rate Change Request: 30	Rates - ODX5M (VA - 2023)-revised.pdf,	09/12/2022 By: Jeff LaFond
<i>Previous Version</i>						
3	<i>rate schedules</i>	<i>ODX5M</i>	<i>Revised</i>	<i>Previous State Filing Number: MUTA-130706482 Percent Rate Change Request: 40.7</i>	<i>Rates - ODX5M (VA - 2021).pdf, Rates - ODX5M (VA - 2022).pdf,</i>	<i>10/29/2021 By: Jeff LaFond</i>
4	rate schedules	NH50- Series 19242	Revised	Previous State Filing Number: MUTA-130706482 Percent Rate Change Request: 30	Rates - NH50 (VA - 2023)-revised.pdf,	09/12/2022 By: Jeff LaFond
<i>Previous Version</i>						
4	<i>rate schedules</i>	<i>NH50- Series 19242</i>	<i>Revised</i>	<i>Previous State Filing Number: MUTA-130706482 Percent Rate Change Request: 40.7</i>	<i>Rates - NH50 (VA - 2021).pdf, Rates - NH50 (VA - 2022).pdf,</i>	<i>10/29/2021 By: Jeff LaFond</i>
5	rate schedules	NH50-Series 19410	Revised	Previous State Filing Number: MUTA-130706482 Percent Rate Change		09/12/2022 By: Jeff LaFond

SERFF Tracking #:

MUTA-132676983

State Tracking #:

MUTA-132676983

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:

LT50 et al - 2021 Rate Increase

Project Name/Number:

LT50 et al - 2021/

## Rate/Rule Schedule Item Changes

				Request: 30		
<i>Previous Version</i>						
5	rate schedules	NH50-Series 19410	Revised	Previous State Filing Number: MUTA-130706482 Percent Rate Change Request: 40.7		10/29/2021 By: Jeff LaFond
6	rate schedules	ODX6M	Revised	Previous State Filing Number: MUTA-130706482 Percent Rate Change Request: 30	Rates - ODX6M (VA - 2023)-revised.pdf,	09/12/2022 By: Jeff LaFond
<i>Previous Version</i>						
6	rate schedules	ODX6M	Revised	Previous State Filing Number: MUTA-130706482 Percent Rate Change Request: 40.7	Rates - ODX6M (VA - 2021).pdf, Rates - ODX6M (VA - 2022).pdf,	10/29/2021 By: Jeff LaFond
7	rate schedules	HCA-Series 19629	Revised	Previous State Filing Number: MUTA-130706482 Percent Rate Change Request: 30	Rates - HCA (VA - 2023)-revised.pdf,	09/12/2022 By: Jeff LaFond
<i>Previous Version</i>						
7	rate schedules	HCA-Series 19629	Revised	Previous State Filing Number: MUTA-130706482 Percent Rate Change Request: 40.7	Rates - HCA et al (VA - proposed).pdf,	10/29/2021 By: Jeff LaFond
8	rate schedules	HCA-Series20249	Revised	Previous State Filing Number: MUTA-130706482 Percent Rate Change Request: 30		09/12/2022 By: Jeff LaFond
<i>Previous Version</i>						

SERFF Tracking #:

MUTA-132676983

State Tracking #:

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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:

LT50 et al - 2021 Rate Increase

Project Name/Number:

LT50 et al - 2021/

**Rate/Rule Schedule Item Changes**

8	rate schedules	HCA-Series20249	Revised	Previous State Filing Number: MUTA-130706482 Percent Rate Change Request: 40.7		10/29/2021 By: Jeff LaFond
9	rate schedules	OGH1M-44	Revised	Previous State Filing Number: MUTA-130706482 Percent Rate Change Request: 30		09/12/2022 By: Jeff LaFond
<i>Previous Version</i>						
9	rate schedules	OGH1M-44	Revised	Previous State Filing Number: MUTA-130706482 Percent Rate Change Request: 40.7		10/29/2021 By: Jeff LaFond
10	rate schedules	NHA-Series 19630	Revised	Previous State Filing Number: MUTA-130706482 Percent Rate Change Request: 30	Rates - NHA (VA - 2023)-revised.pdf,	09/12/2022 By: Jeff LaFond
<i>Previous Version</i>						
10	rate schedules	NHA-Series 19630	Revised	Previous State Filing Number: MUTA-130706482 Percent Rate Change Request: 40.7	Rates - HCA et al (VA - proposed).pdf,	10/29/2021 By: Jeff LaFond
11	rate schedules	NHA-Series 20250	Revised	Previous State Filing Number: MUTA-130706482 Percent Rate Change Request: 30		09/12/2022 By: Jeff LaFond
<i>Previous Version</i>						
11	rate schedules	NHA-Series 20250	Revised	Previous State Filing Number: MUTA-130706482 Percent Rate Change		10/29/2021 By: Jeff LaFond

SERFF Tracking #:

MUTA-132676983

State Tracking #:

MUTA-132676983

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:

LT50 et al - 2021 Rate Increase

Project Name/Number:

LT50 et al - 2021/

## Rate/Rule Schedule Item Changes

				<i>Request:</i> 40.7		
12	rate schedules	0GH3M-44	Revised	Previous State Filing Number: MUTA-130706482 Percent Rate Change Request: 30		09/12/2022 By: Jeff LaFond
<i>Previous Version</i>						
12	<i>rate schedules</i>	<i>0GH3M-44</i>	<i>Revised</i>	<i>Previous State Filing Number: MUTA-130706482 Percent Rate Change Request: 40.7</i>		<i>10/29/2021 By: Jeff LaFond</i>
13	rate schedules	0GH4M-44	Revised	Previous State Filing Number: MUTA-130706482 Percent Rate Change Request: 30		09/12/2022 By: Jeff LaFond
<i>Previous Version</i>						
13	<i>rate schedules</i>	<i>0GH4M-44</i>	<i>Revised</i>	<i>Previous State Filing Number: MUTA-130706482 Percent Rate Change Request: 40.7</i>		<i>10/29/2021 By: Jeff LaFond</i>
14	rate schedules	0GH5M-44	Revised	Previous State Filing Number: MUTA-130706482 Percent Rate Change Request: 30		09/12/2022 By: Jeff LaFond
<i>Previous Version</i>						
14	<i>rate schedules</i>	<i>0GH5M-44</i>	<i>Revised</i>	<i>Previous State Filing Number: MUTA-130706482 Percent Rate Change Request: 40.7</i>		<i>10/29/2021 By: Jeff LaFond</i>
15	rate schedules	0GH6M-REV	Revised	Previous State Filing		09/12/2022

SERFF Tracking #:

MUTA-132676983

State Tracking #:

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Company Tracking #:

LAFOND

State:

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Filing Company:

Mutual of Omaha Insurance Company

TOI/Sub-TOI:

LTC03I Individual Long Term Care/LTC03I.003 Other

Product Name:

LT50 et al - 2021 Rate Increase

Project Name/Number:

LT50 et al - 2021/

## Rate/Rule Schedule Item Changes

				Number: MUTA-130706482 Percent Rate Change Request: 30		By: Jeff LaFond
<i>Previous Version</i>						
15	rate schedules	0GH6M-REV	Revised	Previous State Filing Number: MUTA-130706482 Percent Rate Change Request: 40.7		10/29/2021 By: Jeff LaFond
16	rate schedules	0GH7M-44	Revised	Previous State Filing Number: MUTA-130706482 Percent Rate Change Request: 30		09/12/2022 By: Jeff LaFond
<i>Previous Version</i>						
16	rate schedules	0GH7M-44	Revised	Previous State Filing Number: MUTA-130706482 Percent Rate Change Request: 40.7		10/29/2021 By: Jeff LaFond
17	rate schedules	0GH8M-44	Revised	Previous State Filing Number: MUTA-130706482 Percent Rate Change Request: 30		09/12/2022 By: Jeff LaFond
<i>Previous Version</i>						
17	rate schedules	0GH8M-44	Revised	Previous State Filing Number: MUTA-130706482 Percent Rate Change Request: 40.7		10/29/2021 By: Jeff LaFond
18	rate schedules	LTA-Series 19631	Revised	Previous State Filing Number: MUTA-130706482 Percent Rate Change Request:	Rates - LTA (VA - 2023)-revised.pdf,	09/12/2022 By: Jeff LaFond

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Company Tracking #:

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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:

LT50 et al - 2021 Rate Increase

Project Name/Number:

LT50 et al - 2021/

## Rate/Rule Schedule Item Changes

				30		
<i>Previous Version</i>						
18	rate schedules	LTA-Series 19631	Revised	Previous State Filing Number: MUTA-130706482 Percent Rate Change Request: 40.7	Rates - HCA et al (VA - proposed).pdf,	10/29/2021 By: Jeff LaFond
19	rate schedules	LTA-Series 20251	Revised	Previous State Filing Number: MUTA-130706482 Percent Rate Change Request: 30		09/12/2022 By: Jeff LaFond
<i>Previous Version</i>						
19	rate schedules	LTA-Series 20251	Revised	Previous State Filing Number: MUTA-130706482 Percent Rate Change Request: 40.7		10/29/2021 By: Jeff LaFond
20	rate schedules	0GH7M-44 REV	Revised	Previous State Filing Number: MUTA-130706482 Percent Rate Change Request: 30		09/12/2022 By: Jeff LaFond
<i>Previous Version</i>						
20	rate schedules	0GH7M-44 REV	Revised	Previous State Filing Number: MUTA-130706482 Percent Rate Change Request: 40.7		10/29/2021 By: Jeff LaFond
21	rate schedules	0GH8M-44 REV	Revised	Previous State Filing Number: MUTA-130706482 Percent Rate Change Request: 30		09/12/2022 By: Jeff LaFond
<i>Previous Version</i>						
21	rate schedules	0GH8M-44 REV	Revised	Previous State Filing		10/29/2021



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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:

LT50 et al - 2021 Rate Increase

Project Name/Number:

LT50 et al - 2021/

**Rate/Rule Schedule Item Changes**

				Number: MUTA-130706482 Percent Rate Change Request: 40.7	By: Jeff LaFond
22	rate schedules	0GH9M-44 REV	Revised	Previous State Filing Number: MUTA-130706482 Percent Rate Change Request: 30	09/12/2022 By: Jeff LaFond
<i>Previous Version</i>					
22	rate schedules	0GH9M-44 REV	Revised	Previous State Filing Number: MUTA-130706482 Percent Rate Change Request: 40.7	10/29/2021 By: Jeff LaFond

**Supporting Document Schedule Item Changes**

<b>Satisfied - Item:</b>	Long Term Care Insurance Rate Request Summary
<b>Comments:</b>	
<b>Attachment(s):</b>	VA LTC Rate Increase Summary.pdf LTCi Rate Request Summary (LT50 et al)-revised.pdf
<i>Previous Version</i>	
<b>Satisfied - Item:</b>	Long Term Care Insurance Rate Request Summary
<b>Comments:</b>	
<b>Attachment(s):</b>	LTCi Rate Request Summary (LT50 et al).pdf VA LTC Rate Increase Summary.pdf

SERFF Tracking #:

MUTA-132676983

State Tracking #:

MUTA-132676983

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:

LT50 et al - 2021 Rate Increase

Project Name/Number:

LT50 et al - 2021/

**Supporting Document Schedule Item Changes**

<b>Satisfied - Item:</b>	Long Term Care Insurance Rate Request Summary
<b>Comments:</b>	
<b>Attachment(s):</b>	VA LTC Rate Increase Summary.pdf LTCi Rate Request Summary (LT50 et al)-revised.pdf
<i>Previous Version</i>	
<b>Satisfied - Item:</b>	<i>Long Term Care Insurance Rate Request Summary</i>
<b>Comments:</b>	
<b>Attachment(s):</b>	<i>LTCi Rate Request Summary (LT50 et al).pdf VA LTC Rate Increase Summary.pdf</i>

<b>Satisfied - Item:</b>	Exhibits for 09/12/2022 Response
<b>Comments:</b>	
<b>Attachment(s):</b>	Cover Letter (VA - LT50 et al).pdf Actuarial Memorandum - Legacy (VA)-revised.pdf Exhibit 2 - Average Annual Premium (VA)-revised.pdf Exhibits 5A-5C - Nationwide Lifetime Experience Projection-revised.pdf Exhibits 6A-6C - Virginia Lifetime Experience Projection-revised.pdf

**Conclusion:**

*Your prompt approval of the revised increase amount will be greatly appreciated.*

Sincerely,

Jeff LaFond

Sincerely,

Jeff LaFond

SERFF Tracking #:

MUTA-132676983

State Tracking #:

MUTA-132676983

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:

LT50 et al - 2021 Rate Increase

Project Name/Number:

LT50 et al - 2021/

## Response Letter

Response Letter Status	Submitted to State
Response Letter Date	06/24/2022
Submitted Date	06/24/2022

Dear Bill Dismore,

### **Introduction:**

This is in response to your objection letter dated June 3, 2022, regarding the above-captioned filing.

### **Response 1**

#### **Comments:**

The maximum justifiable rate increase under the prospective present value approach, using active-premium-paying policies, would be 13% using Nationwide experience and 11% using Virginia experience. Please refer to Attachment 1 Current and Previous Assumption Projections (Active-Premium-Paying Policies) VA for the calculation.

### **Related Objection 1**

Applies To:

- L&H Actuarial Memorandum (Supporting Document)

Comments: Please provide responses to outstanding objection 11 dated November 19, 2021:

a) Please state what the maximum justifiable rate increase would be under the prospective present value approach. Please also provide the necessary experience projections so that we may replicate the calculation for each policy form.

b) Please treat waiver of premium benefits as a reduction to premium instead of a claims expense, exclude the experience of policy forms for which there are currently no policyholders in Virginia, and discount and accumulate cash flows using the maximum statutory valuation interest rate at the time the policies were issued.

### **Changed Items:**

No Form Schedule items changed.

No Rate/Rule Schedule items changed.

**State:** Virginia  
**TOI/Sub-TOI:** LTC03I Individual Long Term Care/LTC03I.003 Other  
**Product Name:** LT50 et al - 2021 Rate Increase  
**Project Name/Number:** LT50 et al - 2021/  
**Filing Company:** Mutual of Omaha Insurance Company

### Supporting Document Schedule Item Changes

<b>Satisfied - Item:</b>	Exhibit for 06/24/2022 Response (Objection 1)
<b>Comments:</b>	
<b>Attachment(s):</b>	Attachment 1 - Current and Previous Assumption Projections (Active Premium-Paying Policies) VA.pdf Attachment 1 - Current and Previous Assumption Projections (Active Premium-Paying Policies) VA.xlsx

### Response 2

#### Comments:

a. Please refer to Attachment 2 Morbidity Assumption Description and Attachment 3 Morbidity AE Table for additional supporting documentation describing how the Milliman 2017 Guidelines are utilized in the morbidity assumptions and for quantitative support of actual to expected analysis.

b. The actual to expected exhibit previously provided was described as a rough projection since the data we had available to us for actual versus expected was on a durational basis and not calendar year. Please see Attachment 3 for durational values with respect to Incidence Rates. We were also able to pull together data on a calendar year basis. Please see Attachment 4 for calendar year values.

c. The morbidity assumptions are on claim cost basis. At this point, the assumptions are not broken out on a first principles basis. We were able to pull together Attachment 3 that shows durational values with respect to Incidence Rates.

### Related Objection 2

Applies To:

- L&H Actuarial Memorandum (Supporting Document)

Comments: Related to the updated morbidity assumptions, please provide the following:

a. Please provide additional supporting documentation describing how the Milliman 2017 Guidelines are utilized in the morbidity assumptions, including quantitative support of actual to expected analysis and your statement that Mutual of Omahas claim costs align with Milliman claim costs.

b. Please describe why the actual to expected incurred claims compared to historical claims are a rough projection in your response to objection 2 dated 05/13/2022? We expected the actual to expected analysis to be part of your on&#8208;going morbidity assumption review process.

c. In your morbidity methodology, what assumptions do you assume for claims incidence rates, claims durations and cost, and claims termination rates? Please provide actual to expected comparison for these assumptions and describe how they changed from prior.

### Changed Items:

No Form Schedule items changed.

SERFF Tracking #:

MUTA-132676983

State Tracking #:

MUTA-132676983

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: LT50 et al - 2021 Rate Increase

Project Name/Number: LT50 et al - 2021/

No Rate/Rule Schedule items changed.

### Supporting Document Schedule Item Changes

**Satisfied - Item:** Exhibits for 06/24/2022 Response (Objection 2)

**Comments:**

**Attachment(s):**

Attachment 2 - Morbidity Assumption Description.pdf  
Attachment 3 - Morbidity AE Table.pdf  
Attachment 3 - Morbidity AE Table.xlsx  
Attachment 4 - Morbidity Assumptions.pdf  
Attachment 4 - Morbidity Assumptions.xlsx

### 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,

Gari Banfield

Sincerely,

Gari Banfield

SERFF Tracking #:

MUTA-132676983

State Tracking #:

MUTA-132676983

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:

LT50 et al - 2021 Rate Increase

Project Name/Number:

LT50 et al - 2021/

## Response Letter

Response Letter Status	Submitted to State
Response Letter Date	05/13/2022
Submitted Date	05/13/2022

Dear Bill Dismore,

### Introduction:

This is in response to your objection letter dated April 7, 2022, regarding the above-captioned filing.

### Response 1

#### Comments:

The morbidity rate comparison shown in attachment 2 from objection 3 response dated January 21, 2022 is only for the policy forms associated with this filing.

### Related Objection 1

Applies To:

- Exhibits for 03/25/2020 Response (Supporting Document)

Comments: The following question relates to the response to objection 4 dated March 25, 2022:

Please revise the morbidity rate comparison shown in attachment 2 from the objection 3 response dated January 21, 2022 so that it is only for the policy forms associated with this filing.

### Changed Items:

No Form Schedule items changed.

No Rate/Rule Schedule items changed.

No Supporting Documents changed.

### Response 2

#### Comments:

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<b>State:</b>	Virginia	<b>Filing Company:</b>	Mutual of Omaha Insurance Company
<b>TOI/Sub-TOI:</b>	LTC03I Individual Long Term Care/LTC03I.003 Other		
<b>Product Name:</b>	LT50 et al - 2021 Rate Increase		
<b>Project Name/Number:</b>	LT50 et al - 2021/		

### Objection 2

A. Please find a rough projection of the expected incurred claims under the current assumptions compared to the actual incurred claims in Attachment J. Note that the projection models are not set up to produce this information.

B. Even though the expected incurred claims compared to historical claims are not exact, these assumptions are continually monitored and adjusted to produce a reasonable A:E.

### Objection 3

Regarding the lapse rates shown in attachment 3 from the objection 4 response dated January 21, 2022:

A. The lapse rates with no experience would use lapse rates consistent with either pricing assumptions or set using data based on cells that are close based on actuarial judgment.

B. The statement that policyholders are keeping their policies longer is shown in Exhibits 5A-5C as you look at the runoff of the premium under Original Pricing assumptions versus actuals.

C. The proposed lapse rates for certain durations are lower than the actual experience would suggest due to the possibility of a lack of credible data to adjust the overall assumption.

D. The data in attachment 3 is based on nationwide data for all LTC forms. The assumption analysis is performed at this level for credibility purposes and due to the similarity of products. The data provided in attachment 3 is not available for only these policy forms.

E. Yes, the actual lapse rates only represent voluntary lapses, excluding mortality.

F. It is not currently possible to remove any possible shock lapses associated with previously implemented rates increases.

G. Yes, attachment 3 shows the lapse rates by issue age cohorts as applied in the pricing of the product.

### Related Objection 2

Applies To:

- Exhibits for 01/20/2022 Response (Supporting Document)

State: Virginia Filing Company: Mutual of Omaha Insurance Company  
TOI/Sub-TOI: LTC03I Individual Long Term Care/LTC03I.003 Other  
Product Name: LT50 et al - 2021 Rate Increase  
Project Name/Number: LT50 et al - 2021/

Comments: Please provide responses to outstanding objections 1 and 3 dated March 25, 2022.

Objection 1: Exhibits 5A-5C

In response to objection 5 dated January 21, 2021, the Company provided expected claims by duration which total \$442 million and matches to expected historical claims under original pricing assumptions as shown in Exhibits 5A-5C (All Benefit Periods).

Instead of the expected claims under the original pricing assumptions,

A) Please provide a comparison of actual incurred claims to the expected incurred claims underlying the updated assumptions by duration for the policy forms associated with this filing so we may evaluate the appropriateness of the revised morbidity assumptions relative to the actual experience of the policy forms associated with this filing.

B) If the expected incurred claims deviate significantly relative to historical experience, please justify why the Company believes the assumptions are appropriate to use in the experience projections.

Objection 3: Attachment 3

Regarding the lapse rates shown in attachment 3 from the objection 4 response dated January 21, 2022:

A) Please describe how the revised expected lapse rates were developed for durations with no experience and how these changed from original and most recently approved Virginia rate filing assumptions.

B) Please provide a comparison of current lapse rates and revised lapse rates by duration and issue age in support of your statement that the rate increase is necessary due to insured keeping their policies longer.

C) Please explain why the proposed lapse rates for certain durations are lower than the actual experience would suggest as shown in attachment 3.

D) Please confirm the data in attachment 3 is based on nationwide experience for only the policy forms that are the subject of this filing. If not, please provide attachment 3 with experience for only these policy forms.

E) Please confirm the actual lapse rates represent only voluntary lapses, excluding mortality.

F) If possible, please remove shock lapses associated with previously implemented rate increases from the historical experience.

G) Please confirm attachment 3 shows the lapse rates by issue age cohorts as applied in the pricing of the product.



State: Virginia Filing Company: Mutual of Omaha Insurance Company  
TOI/Sub-TOI: LTC03I Individual Long Term Care/LTC03I.003 Other  
Product Name: LT50 et al - 2021 Rate Increase  
Project Name/Number: LT50 et al - 2021/

**Changed Items:**

No Form Schedule items changed.

No Rate/Rule Schedule items changed.

Supporting Document Schedule Item Changes	
Satisfied - Item:	Exhibit for 05/13/2022 Response
Comments:	
Attachment(s):	Legacy Attachment J.pdf

**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-132676983

State Tracking #:

MUTA-132676983

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:

LT50 et al - 2021 Rate Increase

Project Name/Number:

LT50 et al - 2021/

## Response Letter

Response Letter Status	Submitted to State
Response Letter Date	03/25/2022
Submitted Date	03/25/2022

Dear Bill Dismore,

### Introduction:

This is in response to your objection letter dated February 7, 2022, regarding the above-captioned filing.

### Response 1

#### Comments:

Current projection models need to be adjusted to capture this information. We are currently in the process of making those updates and hope to have the information shortly.

### Related Objection 1

Applies To:

- Exhibits for 01/20/2022 Response (Supporting Document)

Comments: Exhibits 5A-5C

In response to objection 5 dated January 21, 2021, the Company provided expected claims by duration which total \$442 million and matches to expected historical claims under original pricing assumptions as shown in Exhibits 5A-5C (All Benefit Periods).

Instead of the expected claims under the original pricing assumptions,

A) Please provide a comparison of actual incurred claims to the expected incurred claims underlying the updated assumptions by duration for the policy forms associated with this filing so we may evaluate the appropriateness of the revised morbidity assumptions relative to the actual experience of the policy forms associated with this filing.

B) If the expected incurred claims deviate significantly relative to historical experience, please justify why the Company believes the assumptions are appropriate to use in the experience projections.

### Changed Items:

No Form Schedule items changed.

No Rate/Rule Schedule items changed.

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: LT50 et al - 2021 Rate Increase  
Project Name/Number: LT50 et al - 2021/

**Response 2**

**Comments:**

The percent ranges in Attachment 5 Increase by Assumption represent the portion of the proposed rate increase attributed to each of the assumptions.

Regarding the breakdown that you requested, at this time our current models do not capture this information.

**Related Objection 2**

Applies To:

- Exhibits for 01/20/2022 Response (Supporting Document)

Comments: Attachment 5

The following questions relates to the response to objection 8 dated January 21, 2022:

A) Please clarify what the percent ranges in Attachment 5 Increase by Assumption represent.

B) In addition, please provide a breakdown of the rate increase of 19.7% for Non-Lifetime policies and rate increase of 57.0% for Lifetime policies due to the changes in the lapse, mortality and morbidity assumptions.

**Changed Items:**

No Form Schedule items changed.

No Rate/Rule Schedule items changed.

No Supporting Documents changed.

**Response 3**

**Comments:**

Current projection models need to be adjusted to capture this information. We are currently in the process of making those updates and hope to have the information shortly.

**Related Objection 3**

Applies To:

- Exhibits for 01/20/2022 Response (Supporting Document)

SERFF Tracking #:

MUTA-132676983

State Tracking #:

MUTA-132676983

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:

LT50 et al - 2021 Rate Increase

Project Name/Number:

LT50 et al - 2021/

Comments: Attachment 3

Regarding the lapse rates shown in attachment 3 from the objection 4 response dated January 21, 2022:

A) Please describe how the revised expected lapse rates were developed for durations with no experience and how these changed from original and most recently approved Virginia rate filing assumptions.

B) Please provide a comparison of current lapse rates and revised lapse rates by duration and issue age in support of your statement that the rate increase is necessary due to insured keeping their policies longer.

C) Please explain why the proposed lapse rates for certain durations are lower than the actual experience would suggest as shown in attachment 3.

D) Please confirm the data in attachment 3 is based on nationwide experience for only the policy forms that are the subject of this filing. If not, please provide attachment 3 with experience for only these policy forms.

E) Please confirm the actual lapse rates represent only voluntary lapses, excluding mortality.

F) If possible, please remove shock lapses associated with previously implemented rate increases from the historical experience.

G) Please confirm attachment 3 shows the lapse rates by issue age cohorts as applied in the pricing of the product.

**Changed Items:**

No Form Schedule items changed.

No Rate/Rule Schedule items changed.

No Supporting Documents changed.

**Response 4**

**Comments:**

The mortality rates shown in Attachment 2 from the January 20, 2022 objection response represent our entire LTC block.

**Related Objection 4**

Applies To:

- Exhibits for 01/20/2022 Response (Supporting Document)

State: Virginia Filing Company: Mutual of Omaha Insurance Company  
TOI/Sub-TOI: LTC03I Individual Long Term Care/LTC03I.003 Other  
Product Name: LT50 et al - 2021 Rate Increase  
Project Name/Number: LT50 et al - 2021/

Comments: Attachment 2

Regarding the morbidity rates shown in attachment 2 from the objection 3 response dated January 21, 2022, please confirm that the comparison is only for the policy forms associated with this filing. If not please revise the comparison.

**Changed Items:**

No Form Schedule items changed.

No Rate/Rule Schedule items changed.

No Supporting Documents changed.

**Response 5**

**Comments:**

All present and accumulated values used to determine rate increases use the maximum valuation interest rate for contract reserves as specified in §38.2-1371 of the Code of Virginia.

**Related Objection 5**

Applies To:

- L&H Actuarial Memorandum (Supporting Document)

Comments: Please confirm that all present and accumulated values used to determine rate increases use the maximum valuation interest rate for contract reserves as specified in §38.2-1371 of the Code of Virginia.

**Changed Items:**

No Form Schedule items changed.

No Rate/Rule Schedule items changed.

No Supporting Documents changed.

**Response 6**

**Comments:**

The requested exhibit, Attachment 1C - Proposed VA Rates Day 1 rev.xlsx, has been added to the Supporting Documentation tab.

**Related Objection 6**

Applies To:

SERFF Tracking #:

MUTA-132676983

State Tracking #:

MUTA-132676983

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:

LT50 et al - 2021 Rate Increase

Project Name/Number:

LT50 et al - 2021/

- L&H Actuarial Memorandum (Supporting Document)

Comments: In support of If-Knew testing please provide the nationwide present value of lifetime premium at previously approved rate levels in Virginia since inception of the policy form in total and by limited/lifetime benefit and inflation/no inflation policy types.

**Changed Items:**

No Form Schedule items changed.

No Rate/Rule Schedule items changed.

**Supporting Document Schedule Item Changes**

<b>Satisfied - Item:</b>	Exhibits for 03/25/2020 Response
<b>Comments:</b>	
<b>Attachment(s):</b>	Attachment 1C - Proposed VA Rates Day 1 - rev.pdf Attachment 1C - Proposed VA Rates Day 1 - rev.xlsx

**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-132676983

State Tracking #:

MUTA-132676983

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:

LT50 et al - 2021 Rate Increase

Project Name/Number:

LT50 et al - 2021/

## Response Letter

Response Letter Status	Submitted to State
Response Letter Date	01/21/2022
Submitted Date	01/21/2022

Dear Bill Dismore,

### Introduction:

This is in response to your objection letter dated November 19, 2021, regarding the above-captioned filing.

### Response 1

#### Comments:

The following projections, using nationwide experience at the Virginia rate level, and split into four subsets (lifetime BP with no inflation, lifetime BP with inflation, non-lifetime BP with no inflation, and non-lifetime BP with inflation), have been added to the Supporting Documentation tab:

A.Current assumptions and current rates Attachment 1A.

B.Current assumptions with the proposed rates Attachment 1B.

C.Current assumptions with premiums restated as if the proposed rate schedule had been in effect from inception Attachment 1C.

D.We are in the process of pulling the data needed for the Prospective PV approach and will send it to you shortly. We apologize for the delay.

E.Original assumptions and original premiums from inception Attachment E.

### Related Objection 1

Applies To:

- L&H Actuarial Memorandum (Supporting Document)
- Exhibits for 10/29/2021 Response (Objection 1) (Supporting Document)
- Exhibits for 10/29/2021 Response (Objection 2) (Supporting Document)
- Exhibits for 10/29/2021 Response (Objection 4) (Supporting Document)

SERFF Tracking #:

MUTA-132676983

State Tracking #:

MUTA-132676983

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:

LT50 et al - 2021 Rate Increase

Project Name/Number:

LT50 et al - 2021/

Comments: Please provide the information contained in Attachments 1A-1C broken down into four subsets: policyholders with a lifetime benefit period and no inflation rider, policyholders with a lifetime benefit period and an inflation rider, policyholders with a limited benefit period and no inflation rider, and policyholders with a limited benefit period and an inflation rider. Please treat waiver of premium benefits in this breakout as a reduction to premium instead of a claims expense, and please exclude the experience of policy forms for which there are currently no policyholders in Virginia. For each subset, please provide the following projection of nationwide experience:

a. Using current assumptions and current rates

b. Using current assumptions with the proposed rate increase

c. Using current assumptions with premiums restated as if the proposed rate schedule had been in effect from inception

d. Using actual historical experience to the projection date and future projections based on the prior assumptions (to be used in the Prospective PV test)

e. Using original assumptions and original premiums from inception

Projections a-e can be separate tabs or combined into separate columns on the same exhibit.

**Changed Items:**

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: LT50 et al - 2021 Rate Increase

Project Name/Number: LT50 et al - 2021/

**Supporting Document Schedule Item Changes****Satisfied - Item:** Exhibits for 01/20/2022 Response**Comments:****Attachment(s):**

Attachment 1A - Current Rates.pdf  
Attachment 1A - Current Rates.xlsx  
Attachment 1B - Proposed Rates.pdf  
Attachment 1B - Proposed Rates.xlsx  
Attachment 1C - Proposed VA Rates Day 1.pdf  
Attachment 5 - Increase by Assumption.xlsx  
Attachment 2 - Mortality.pdf  
Attachment 1C - Proposed VA Rates Day 1.xlsx  
Attachment 1E - Original Pricing.pdf  
Attachment 1E - Original Pricing.xlsx  
Attachment 2 - Mortality.xlsx  
Attachment 4 - Incurred Claims.xlsx  
Attachment 3 - Lapse.pdf  
Attachment 3 - Lapse.xlsx  
Attachment 4 - Incurred Claims.pdf  
Attachment 5 - Increase by Assumption.pdf

**Response 2****Comments:**

*The original lifetime loss ratio of 62.9% from Attachment 1C has been adjusted to reflect the actual nationwide business sold.*

**Related Objection 2**

Applies To:

- L&H Actuarial Memorandum (Supporting Document)
- Exhibits for 10/29/2021 Response (Objection 1) (Supporting Document)
- Exhibits for 10/29/2021 Response (Objection 2) (Supporting Document)
- Exhibits for 10/29/2021 Response (Objection 4) (Supporting Document)

*Comments: Please confirm that the original lifetime loss ratio of 62.9% from Attachment 1C has been adjusted to reflect the actual mix of business sold.*

**Changed Items:**

*No Form Schedule items changed.*

*No Rate/Rule Schedule items changed.*

*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:** LT50 et al - 2021 Rate Increase  
**Project Name/Number:** LT50 et al - 2021/

**Response 3****Comments:**

A comparison of actual deaths to expected deaths by duration is displayed in Attachment 2 Mortality.

**Related Objection 3****Applies To:**

- L&H Actuarial Memorandum (Supporting Document)
- Exhibits for 10/29/2021 Response (Objection 1) (Supporting Document)
- Exhibits for 10/29/2021 Response (Objection 2) (Supporting Document)
- Exhibits for 10/29/2021 Response (Objection 4) (Supporting Document)

**Comments:** Please provide a comparison of actual deaths to expected deaths by duration for the policy forms associated with this filing so we may evaluate the appropriateness of the mortality assumptions relative to the actual experience of the policy forms associated with this filing. If the mortality assumptions used in the experience projections differ significantly from historical experience, please provide additional justification for the proposed assumptions.

**Changed Items:**

No Form Schedule items changed.

No Rate/Rule Schedule items changed.

**Supporting Document Schedule Item Changes**

<b>Satisfied - Item:</b>	Exhibits for 01/20/2022 Response
<b>Comments:</b>	
<b>Attachment(s):</b>	Attachment 1A - Current Rates.pdf Attachment 1A - Current Rates.xlsx Attachment 1B - Proposed Rates.pdf Attachment 1B - Proposed Rates.xlsx Attachment 1C - Proposed VA Rates Day 1.pdf Attachment 5 - Increase by Assumption.xlsx Attachment 2 - Mortality.pdf Attachment 1C - Proposed VA Rates Day 1.xlsx Attachment 1E - Original Pricing.pdf Attachment 1E - Original Pricing.xlsx Attachment 2 - Mortality.xlsx Attachment 4 - Incurred Claims.xlsx Attachment 3 - Lapse.pdf Attachment 3 - Lapse.xlsx Attachment 4 - Incurred Claims.pdf Attachment 5 - Increase by Assumption.pdf

SERFF Tracking #:

MUTA-132676983

State Tracking #:

MUTA-132676983

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:

LT50 et al - 2021 Rate Increase

Project Name/Number:

LT50 et al - 2021/

#### **Response 4**

##### **Comments:**

*A comparison of actual voluntary lapses to expected voluntary lapses by duration is displayed in Attachment 3 Lapse.*

#### **Related Objection 4**

*Applies To:*

- L&H Actuarial Memorandum (Supporting Document)*
- Exhibits for 10/29/2021 Response (Objection 1) (Supporting Document)*
- Exhibits for 10/29/2021 Response (Objection 2) (Supporting Document)*
- Exhibits for 10/29/2021 Response (Objection 4) (Supporting Document)*

*Comments: Please provide a comparison of actual voluntary lapses to expected voluntary lapses by duration for the policy forms associated with this filing so we may evaluate the appropriateness of the voluntary lapse assumptions relative to the actual experience of the policy forms associated with this filing. If possible, please remove shock lapses associated with previously implemented rate increases from the historical experience. If the voluntary lapse assumptions used in the experience projections differ significantly from historical experience, please provide additional justification for the proposed assumptions.*

#### **Changed Items:**

*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: LT50 et al - 2021 Rate Increase

Project Name/Number: LT50 et al - 2021/

**Supporting Document Schedule Item Changes****Satisfied - Item:** Exhibits for 01/20/2022 Response**Comments:****Attachment(s):**

Attachment 1A - Current Rates.pdf  
 Attachment 1A - Current Rates.xlsx  
 Attachment 1B - Proposed Rates.pdf  
 Attachment 1B - Proposed Rates.xlsx  
 Attachment 1C - Proposed VA Rates Day 1.pdf  
 Attachment 5 - Increase by Assumption.xlsx  
 Attachment 2 - Mortality.pdf  
 Attachment 1C - Proposed VA Rates Day 1.xlsx  
 Attachment 1E - Original Pricing.pdf  
 Attachment 1E - Original Pricing.xlsx  
 Attachment 2 - Mortality.xlsx  
 Attachment 4 - Incurred Claims.xlsx  
 Attachment 3 - Lapse.pdf  
 Attachment 3 - Lapse.xlsx  
 Attachment 4 - Incurred Claims.pdf  
 Attachment 5 - Increase by Assumption.pdf

**Response 5****Comments:**

A comparison of actual incurred claims to expected incurred claims by duration is displayed in Attachment 4 Incurred Claims.

**Related Objection 5**

Applies To:

- L&H Actuarial Memorandum (Supporting Document)
- Exhibits for 10/29/2021 Response (Objection 1) (Supporting Document)
- Exhibits for 10/29/2021 Response (Objection 2) (Supporting Document)
- Exhibits for 10/29/2021 Response (Objection 4) (Supporting Document)

Comments: Please provide a comparison of actual incurred claims to expected incurred claims by duration for the policy forms associated with this filing. If the expected incurred claims deviate significantly relative to historical experience, please justify why the Company believes the assumptions are appropriate to use in the experience projections.

**Changed Items:**

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: LT50 et al - 2021 Rate Increase

Project Name/Number: LT50 et al - 2021/

**Supporting Document Schedule Item Changes**

Satisfied - Item: Exhibits for 01/20/2022 Response

**Comments:****Attachment(s):**

Attachment 1A - Current Rates.pdf  
 Attachment 1A - Current Rates.xlsx  
 Attachment 1B - Proposed Rates.pdf  
 Attachment 1B - Proposed Rates.xlsx  
 Attachment 1C - Proposed VA Rates Day 1.pdf  
 Attachment 5 - Increase by Assumption.xlsx  
 Attachment 2 - Mortality.pdf  
 Attachment 1C - Proposed VA Rates Day 1.xlsx  
 Attachment 1E - Original Pricing.pdf  
 Attachment 1E - Original Pricing.xlsx  
 Attachment 2 - Mortality.xlsx  
 Attachment 4 - Incurred Claims.xlsx  
 Attachment 3 - Lapse.pdf  
 Attachment 3 - Lapse.xlsx  
 Attachment 4 - Incurred Claims.pdf  
 Attachment 5 - Increase by Assumption.pdf

**Response 6****Comments:**

*The experience projections do not reflect the impact of policyholders reducing benefit levels to reduce or eliminate the impact of the requested premium increase.*

**Related Objection 6**

Applies To:

- L&H Actuarial Memorandum (Supporting Document)
- Exhibits for 10/29/2021 Response (Objection 1) (Supporting Document)
- Exhibits for 10/29/2021 Response (Objection 2) (Supporting Document)
- Exhibits for 10/29/2021 Response (Objection 4) (Supporting Document)

*Comments: Please state whether the experience projections reflect the impact of policyholders reducing benefit levels to reduce or eliminate the impact of the requested premium increase. If so, please justify the assumption reflected in the experience projections. Please include quantitative support.*

**Changed Items:**

*No Form Schedule items changed.*

*No Rate/Rule Schedule items changed.*

*No Supporting Documents changed.*

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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:** LT50 et al - 2021 Rate Increase  
**Project Name/Number:** LT50 et al - 2021/

**Response 7****Comments:**

Any additional lapses in the model due to the rate increase are de minimis and have no impact on the overall results.

**Related Objection 7**

Applies To:

- L&H Actuarial Memorandum (Supporting Document)

Comments: Please state whether the experience projections reflect the anticipation of any shock lapses. If so, please justify the assumption reflected in the experience projections. Please include quantitative support.

**Changed Items:**

No Form Schedule items changed.

No Rate/Rule Schedule items changed.

No Supporting Documents changed.

**Response 8****Comments:**

The portion of the proposed rate increase attributed to changes in voluntary lapse, mortality, and morbidity assumptions is displayed in Attachment 5 Increase by Assumption.

**Related Objection 8**

Applies To:

- L&H Actuarial Memorandum (Supporting Document)

Comments: Please identify the portion of the proposed rate increase that is attributed to each of the following components:

- a. Changes in the voluntary lapse assumptions
- b. Changes in the mortality assumptions
- c. Changes in the expected claim cost assumptions
- d. Changes in any other assumptions (e.g., interest rates)

**Changed Items:**

State: Virginia

Filing Company:

Mutual of Omaha Insurance Company

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

Product Name: LT50 et al - 2021 Rate Increase

Project Name/Number: LT50 et al - 2021/

No Form Schedule items changed.

No Rate/Rule Schedule items changed.

### Supporting Document Schedule Item Changes

<b>Satisfied - Item:</b>	Exhibits for 01/20/2022 Response
<b>Comments:</b>	
<b>Attachment(s):</b>	Attachment 1A - Current Rates.pdf Attachment 1A - Current Rates.xlsx Attachment 1B - Proposed Rates.pdf Attachment 1B - Proposed Rates.xlsx Attachment 1C - Proposed VA Rates Day 1.pdf Attachment 5 - Increase by Assumption.xlsx Attachment 2 - Mortality.pdf Attachment 1C - Proposed VA Rates Day 1.xlsx Attachment 1E - Original Pricing.pdf Attachment 1E - Original Pricing.xlsx Attachment 2 - Mortality.xlsx Attachment 4 - Incurred Claims.xlsx Attachment 3 - Lapse.pdf Attachment 3 - Lapse.xlsx Attachment 4 - Incurred Claims.pdf Attachment 5 - Increase by Assumption.pdf

### Response 9

#### Comments:

A 5% margin was included for IBNP Reserves. Final best estimate IBNP reserves are set using a preliminary best estimate assumption plus the margin. This practice is consistent with industry practice which has been to add an explicit margin to the initial best estimate assumption. The final best estimate IBNP reserve is reviewed to ensure that it falls within the range of reasonable estimates produced by actuarial models.

There is no other margin included on the additional claim reserves.

### Related Objection 9

Applies To:

- L&H Actuarial Memorandum (Supporting Document)

Comments: Please confirm if margin was included in claim reserve estimates. If margin was included, please indicate what level of margin was included and why the Company believes this level of margin is appropriate.

### Changed Items:

State: Virginia Filing Company: Mutual of Omaha Insurance Company  
TOI/Sub-TOI: LTC03I Individual Long Term Care/LTC03I.003 Other  
Product Name: LT50 et al - 2021 Rate Increase  
Project Name/Number: LT50 et al - 2021/

No Form Schedule items changed.

No Rate/Rule Schedule items changed.

No Supporting Documents changed.

**Response 10**

**Comments:**

The nationwide policy reserves for the forms included in this filing, as of 12/31/2019 and calculated at the interest rate used to discount and accumulate cash flows in the experience projections, are shown below.

Policy Form Reserves

LT50	\$35,099,135
NH50	\$10,541,968
HCA	\$20,895,183
NHA	\$307,116,787
LTA	\$393,339,191

**Related Objection 10**

Applies To:

- L&H Actuarial Memorandum (Supporting Document)

Comments: Please provide the nationwide policy reserves for the forms included in the filing, as of December 31, 2019, calculated at the interest rate used to discount and accumulate cash flows in the experience projections, excluding the experience of policy forms for which there are currently no policyholders in Virginia.

**Changed Items:**

No Form Schedule items changed.

No Rate/Rule Schedule items changed.

No Supporting Documents changed.

**Response 11**

**Comments:**

We are in the process of pulling the data needed for the Prospective PV approach and will send it to you shortly. We apologize for the delay.

**Related Objection 11**

Applies To:



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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:** LT50 et al - 2021 Rate Increase**Project Name/Number:** LT50 et al - 2021/

- L&H Actuarial Memorandum (Supporting Document)

Comments: Please state what the maximum justifiable rate increase would be under the prospective present value approach. Please provide the necessary experience projections so that we may be able to replicate the calculation for each policy form. Please treat waiver of premium benefits as a reduction to premium instead of a claims expense, exclude the experience of policy forms for which there are currently no policyholders in Virginia, and discount and accumulate cash flows using the maximum statutory valuation interest rate at the time the policies were issued.

**Changed Items:**

No Form Schedule items changed.

No Rate/Rule Schedule items changed.

No Supporting Documents changed.

**Response 12****Comments:**

The forms for which experience has been pooled in this filing will continue to be pooled for any future rate increase filings.

**Related Objection 12**

Applies To:

- L&H Actuarial Memorandum (Supporting Document)

Comments: Please confirm that the forms for which experience has been pooled in this filing will continue to be pooled for any future rate increase filings.

**Changed Items:**

No Form Schedule items changed.

No Rate/Rule Schedule items changed.

No Supporting Documents changed.

**Response 13****Comments:**

We are continuing to monitor our experience due to these challenges. However, we have not seen any significant movements due to COVID and the current economic environment and are not expecting them to have a large impact on future experience.

**Related Objection 13**

Applies To:

- L&H Actuarial Memorandum (Supporting Document)

SERFF Tracking #:

MUTA-132676983

State Tracking #:

MUTA-132676983

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:

LT50 et al - 2021 Rate Increase

Project Name/Number:

LT50 et al - 2021/

Comments: An increase in deaths (due to COVID-19) and an increase in voluntary lapses (due to the current economic environment) would be expected to result in fewer insured lives, which would be expected to reduce claim liabilities going forward. Please provide any emerging experience pertaining to the actual number of deaths and voluntary lapses in 2020 and 2021 relative to the expected assumptions associated with this filing.

**Changed Items:**

No Form Schedule items changed.

No Rate/Rule Schedule items changed.

No Supporting Documents changed.

**Response 14**

**Comments:**

The number of policies ever issued nationwide under the policy forms associated with this filing is 68,946.

**Related Objection 14**

Applies To:

- L&H Actuarial Memorandum (Supporting Document)

Comments: Please state the number of policies ever issued nationwide under the policy forms associated with this filing.

**Changed Items:**

No Form Schedule items changed.

No Rate/Rule Schedule items changed.

No Supporting Documents changed.

**Response 15**

**Comments:**

Cumulative Nationwide Approved Rate Increases:

Non-Lifetime Benefit Period 48.4%

Lifetime Benefit Period 179.5%

Cumulative Nationwide Approved Rate Increases with Proposed Rate Increases:

Non-Lifetime Benefit Period 92.9%

Lifetime Benefit Period 372.4%

---

**State:** Virginia **Filing Company:** Mutual of Omaha Insurance Company  
**TOI/Sub-TOI:** LTC03I Individual Long Term Care/LTC03I.003 Other  
**Product Name:** LT50 et al - 2021 Rate Increase  
**Project Name/Number:** LT50 et al - 2021/

**Related Objection 15**

Applies To:

- L&H Actuarial Memorandum (Supporting Document)

Comments: Please state the cumulative rate increase that has been approved nationwide for the policy forms associated with this filing and what the cumulative nationwide rate increase would be for the policy forms associated with this filing if all pending rate increase requests were approved.

**Changed Items:**

No Form Schedule items changed.

No Rate/Rule Schedule items changed.

No Supporting Documents changed.

**Response 16****Comments:**

If this block is projected to have a lifetime loss ratio greater than 110%, the company would review its options at that point.

**Related Objection 16**

Applies To:

- L&H Actuarial Memorandum (Supporting Document)

Comments: The most commonly asked questions document states that if the proposed rate increase is approved, no future rate action is anticipated, assuming future corrective rate actions are not warranted. Please state under what circumstances future corrective rate actions would be warranted.

**Changed Items:**

No Form Schedule items changed.

No Rate/Rule Schedule items changed.

No Supporting Documents changed.

**Response 17****Comments:**

No policies issued in Virginia have partnership status.

**Related Objection 17**

Applies To:

- L&H Actuarial Memorandum (Supporting Document)

SERFF Tracking #:

MUTA-132676983

State Tracking #:

MUTA-132676983

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:**

LT50 et al - 2021 Rate Increase

**Project Name/Number:**

LT50 et al - 2021/

*Comments: Please advise if any policies issued in Virginia have partnership status so that we may determine if 14VAC5-200-75 D. 2. c. is applicable.*

**Changed Items:**

*No Form Schedule items changed.*

*No Rate/Rule Schedule items changed.*

*No Supporting Documents 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,*

*Gari Banfield*

SERFF Tracking #:

MUTA-132676983

State Tracking #:

MUTA-132676983

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:

LT50 et al - 2021 Rate Increase

Project Name/Number:

LT50 et al - 2021/

## Response Letter

Response Letter Status	Submitted to State
Response Letter Date	10/29/2021
Submitted Date	10/29/2021

Dear Bill Dismore,

### Introduction:

This is in response to your objection letter dated September 29, 2021, regarding the above captioned filing.

### Response 1

#### Comments:

1. The Current Rates have been removed from the Rate/Rule Schedule tab and placed in the Supporting Documentation tab.
2. Each form affected has been listed as a separate item, with the appropriate Rate Action and Percent Rate Change Requested for each form.

### 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, LTASeries 19631, LTA-Series 20251, OGH7M-44 REV, OGH8M-44 REV, OGH9M-44 REV] (Rate)

Comments: 1) Please remove the Current Rates from the Rate/Rule Schedule and place these under the Supporting Documentation tab.

- 2) Please list each affected form as a separate Item No. and describe the Rate Action and Percent Rate Change Requested for each Affected Form Number.

### Changed Items:

No Form Schedule items changed.

SERFF Tracking #:

MUTA-132676983

State Tracking #:

MUTA-132676983

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: LT50 et al - 2021 Rate Increase

Project Name/Number: LT50 et al - 2021/

## 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	Revised	Previous State Filing Number: MUTA-130706482 Percent Rate Change Request: 40.7	Rates - LT50 (VA - 2021).pdf, Rates - LT50 (VA - 2022).pdf,	10/29/2021 By: Jeff LaFond
<i>Previous Version</i>						
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, LTASeries 19631, LTA-Series 20251, OGH7M-44 REV, OGH8M-44 REV, OGH9M-44 REV	Revised	Previous State Filing Number: MUTA-130706482 Percent Rate Change Request: 40.7	Rates - LT50 (VA - current).pdf, Rates - LT50 (VA - 2021).pdf, Rates - LT50 (VA - 2022).pdf, Rates - ODX5M (VA - current).pdf, Rates - ODX5M (VA - 2021).pdf, Rates - ODX5M (VA - 2022).pdf, Rates - NH50 (VA - current).pdf, Rates - NH50 (VA - 2021).pdf, Rates - NH50 (VA - 2022).pdf, Rates - ODX6M (VA - current).pdf, Rates - ODX6M (VA - 2021).pdf, Rates - ODX6M (VA - 2022).pdf, Rates - HCA et al (VA - current & proposed).pdf,	09/24/2021 By: Jeff LaFond
2	rate schedules	LT50- Series 19409	Revised	Previous State Filing Number: MUTA-130706482 Percent Rate Change Request: 40.7		10/29/2021 By: Jeff LaFond
3	rate schedules	ODX5M	Revised	Previous State Filing	Rates - ODX5M (VA -	10/29/2021

SERFF Tracking #:

MUTA-132676983

State Tracking #:

MUTA-132676983

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:

LT50 et al - 2021 Rate Increase

Project Name/Number:

LT50 et al - 2021/

## Rate/Rule Schedule Item Changes

				Number: MUTA-130706482 Percent Rate Change Request: 40.7	2021).pdf, Rates - ODX5M (VA - 2022).pdf,	By: Jeff LaFond
4	rate schedules	NH50- Series 19242	Revised	Previous State Filing Number: MUTA-130706482 Percent Rate Change Request: 40.7	Rates - NH50 (VA - 2021).pdf, Rates - NH50 (VA - 2022).pdf,	10/29/2021 By: Jeff LaFond
5	rate schedules	NH50-Series 19410	Revised	Previous State Filing Number: MUTA-130706482 Percent Rate Change Request: 40.7		10/29/2021 By: Jeff LaFond
6	rate schedules	ODX6M	Revised	Previous State Filing Number: MUTA-130706482 Percent Rate Change Request: 40.7	Rates - ODX6M (VA - 2021).pdf, Rates - ODX6M (VA - 2022).pdf,	10/29/2021 By: Jeff LaFond
7	rate schedules	HCA-Series 19629	Revised	Previous State Filing Number: MUTA-130706482 Percent Rate Change Request: 40.7	Rates - HCA et al (VA - proposed).pdf,	10/29/2021 By: Jeff LaFond
8	rate schedules	HCA-Series20249	Revised	Previous State Filing Number: MUTA-130706482 Percent Rate Change Request: 40.7		10/29/2021 By: Jeff LaFond
9	rate schedules	OGH1M-44	Revised	Previous State Filing Number: MUTA-130706482 Percent Rate Change Request: 40.7		10/29/2021 By: Jeff LaFond
10	rate schedules	NHA-Series 19630	Revised	Previous State Filing Number: MUTA-130706482	Rates - HCA et al (VA - proposed).pdf,	10/29/2021 By: Jeff LaFond

SERFF Tracking #:

MUTA-132676983

State Tracking #:

MUTA-132676983

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:

LT50 et al - 2021 Rate Increase

Project Name/Number:

LT50 et al - 2021/

## Rate/Rule Schedule Item Changes

				Percent Rate Change Request: 40.7		
11	rate schedules	NHA-Series 20250	Revised	Previous State Filing Number: MUTA-130706482 Percent Rate Change Request: 40.7		10/29/2021 By: Jeff LaFond
12	rate schedules	0GH3M-44	Revised	Previous State Filing Number: MUTA-130706482 Percent Rate Change Request: 40.7		10/29/2021 By: Jeff LaFond
13	rate schedules	0GH4M-44	Revised	Previous State Filing Number: MUTA-130706482 Percent Rate Change Request: 40.7		10/29/2021 By: Jeff LaFond
14	rate schedules	0GH5M-44	Revised	Previous State Filing Number: MUTA-130706482 Percent Rate Change Request: 40.7		10/29/2021 By: Jeff LaFond
15	rate schedules	0GH6M-REV	Revised	Previous State Filing Number: MUTA-130706482 Percent Rate Change Request: 40.7		10/29/2021 By: Jeff LaFond
16	rate schedules	0GH7M-44	Revised	Previous State Filing Number: MUTA-130706482 Percent Rate Change Request: 40.7		10/29/2021 By: Jeff LaFond
17	rate schedules	0GH8M-44	Revised	Previous State Filing Number: MUTA-130706482 Percent Rate Change Request:		10/29/2021 By: Jeff LaFond



SERFF Tracking #:

MUTA-132676983

State Tracking #:

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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:

LT50 et al - 2021 Rate Increase

Project Name/Number:

LT50 et al - 2021/

**Rate/Rule Schedule Item Changes**

				40.7		
18	rate schedules	LTA-Series 19631	Revised	Previous State Filing Number: MUTA-130706482 Percent Rate Change Request: 40.7	Rates - HCA et al (VA - proposed).pdf,	10/29/2021 By: Jeff LaFond
19	rate schedules	LTA-Series 20251	Revised	Previous State Filing Number: MUTA-130706482 Percent Rate Change Request: 40.7		10/29/2021 By: Jeff LaFond
20	rate schedules	0GH7M-44 REV	Revised	Previous State Filing Number: MUTA-130706482 Percent Rate Change Request: 40.7		10/29/2021 By: Jeff LaFond
21	rate schedules	0GH8M-44 REV	Revised	Previous State Filing Number: MUTA-130706482 Percent Rate Change Request: 40.7		10/29/2021 By: Jeff LaFond
22	rate schedules	0GH9M-44 REV	Revised	Previous State Filing Number: MUTA-130706482 Percent Rate Change Request: 40.7		10/29/2021 By: Jeff LaFond

**Supporting Document Schedule Item Changes**

<b>Satisfied - Item:</b>	Exhibits for 10/29/2021 Response (Objection 1)
<b>Comments:</b>	
<b>Attachment(s):</b>	Rates - LT50 (VA - current).pdf Rates - 0DX5M (VA - current).pdf Rates - NH50 (VA - current).pdf Rates - 0DX6M (VA - current).pdf

**Response 2**

SERFF Tracking #:

MUTA-132676983

State Tracking #:

MUTA-132676983

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:

LT50 et al - 2021 Rate Increase

Project Name/Number:

LT50 et al - 2021/

**Comments:**

All exhibits in Excel spreadsheets have been added to the Supporting Documentation tab.

**Related Objection 2**

Applies To:

- L&H Actuarial Memorandum (Supporting Document)

Comments: Please provide all Exhibits in Excel with working formulas so the calculations may be followed.

**Changed Items:**

No Form Schedule items changed.

No Rate/Rule Schedule items changed.

**Supporting Document Schedule Item Changes**

<b>Satisfied - Item:</b>	Exhibits for 10/29/2021 Response (Objection 2)
<b>Comments:</b>	
<b>Attachment(s):</b>	Exhibits 4A-4C - Nationwide Historical Experience (Excel).xlsx Exhibits 5A-5C - Nationwide Lifetime Experience Projection (Excel).xlsx

**Response 3**

**Comments:**

The Policyholder Notification Letter has been added to the Form Schedule tab. This form is similar, but not identical, to a previously approved Policyholder Notification Letter.

**Related Objection 3**

Comments: Policyholder Notification Letter

Please provide the policyholder notification letter and any accompanying forms under the Form Schedule. If these forms have been previously approved in Virginia, please provide the SERFF Tracking # for the approval and place a copy of each approved form under the Supporting Documentation tab.

**Changed Items:**

No Rate/Rule Schedule items changed.

No Supporting Documents changed.

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<b>State:</b>	Virginia	<b>Filing Company:</b>	Mutual of Omaha Insurance Company
<b>TOI/Sub-TOI:</b>	LTC03I Individual Long Term Care/LTC03I.003 Other		
<b>Product Name:</b>	LT50 et al - 2021 Rate Increase		
<b>Project Name/Number:</b>	LT50 et al - 2021/		

#### **Response 4**

##### **Comments:**

- 1.A. There were not any limited-pay policies issued. No additional exhibits are required.
- B. The assumptions for the pre-stability block are best-estimate assumptions.
- C. Premiums have been adjusted to the Virginia rate level for both the historical and projected future values. Please refer to Attachments 1A-1C National Projections at Virginia Rate Level. These exhibits are also being provided in Excel spreadsheets.
  
- 2.The following projections, using nationwide experience at the Virginia rate level, have been added to the Supporting Documentation tab:
  - A.Current assumptions and current rates Attachments 1A-1C.
  - B.Current assumptions with the proposed rates Attachments 1A-1cC
  - C.Current assumptions with premiums restated as if the proposed rate schedule had been in effect from inception Attachments 2A-2C Projections (proposed VA rates since day 1)
  - D.This projection is not attached please refer to Item Number 8.
  - E.Original assumptions and original premiums from inception Attachments 1A-1C.
- 3.The active life reserves, by benefit period (non-lifetime and lifetime benefit periods) are displayed below:  
  
Non-Lifetime Benefit Periods \$573,287,515  
Lifetime Benefit Period \$709,015,093
  
- 4.The 60/80 Test, by benefit period (non-lifetime and lifetime benefit periods), are displayed in Attachments 3A-3B 60-80 Test.
- 5.The requested rate increase history exhibit, which includes the requested increase, status of the current filing, cumulative approved past increases, and in-force annualized premium by state is displayed in Attachment 4 Rate Increase History.
- 6.The original assumptions are displayed in Attachment 5 Original Pricing Assumptions.
- 7.The assumptions used in this filing are consistent with the assumptions used in our Companys asset adequacy testing at the time this filing was submitted.
- 8.The forms included in this filing were issued under loss ratio regulations. Therefore, we feel that the alternate methods, the Prospective Present Value and If Knew/Makeup Blend, are not appropriate methods to analyze this block given the regulations when the policies were issued.

#### **Related Objection 4**

Applies To:

- L&H Actuarial Memorandum (Supporting Document)

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<b>State:</b>	Virginia	<b>Filing Company:</b>	Mutual of Omaha Insurance Company
<b>TOI/Sub-TOI:</b>	LTC03I Individual Long Term Care/LTC03I.003 Other		
<b>Product Name:</b>	LT50 et al - 2021 Rate Increase		
<b>Project Name/Number:</b>	LT50 et al - 2021/		

Comments: 1. For all projections requested in this question, the baseline should comply with the following:

- a. Any policies issued as limited-pay which are now in paid-up status should be removed, both from historical experience and future projections.
- b. Please confirm that for the pre-stability block, assumptions are best-estimate.
- c. Premiums should be at the Virginia rate level for both historical and projected future.
- d. Please use the appropriate maximum valuation interest rate for accumulation and discounting of this block.

2. To assist the Virginia Bureau of Insurance in its review, for each of the subsets of the business corresponding to the combinations of (with or without Increased benefit limits), please provide (in Excel format) the following projections on a nationwide basis:

- a. current assumptions and current rates
- b. current assumptions with the proposed rate increase
- c. current assumptions with premiums restated as if the proposed rate schedule had been in effect from inception
- d. actual historical experience to the projection date and future projections based on the prior assumptions (to be used in the Prospective PV test)
- e. original assumptions and original premiums from inception

Projections a-e can be separate tabs or combined into separate columns on the same exhibit.

3. For each of the two subsets of the business used in the projections above, please provide the active life reserves balance as of the projection date on a nationwide basis.
4. Please provide the 60/80 Test for each subset and include all projections required to validate those tests.
5. Please provide in Excel format an exhibit showing the rate increase history and status of existing rate increase requests in each state, including the cumulative approved rate increase percentage and the in force annualized premium for each state.
6. Please provide details of the original assumptions used.

SERFF Tracking #:

MUTA-132676983

State Tracking #:

MUTA-132676983

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:

LT50 et al - 2021 Rate Increase

Project Name/Number:

LT50 et al - 2021/

7. Please advise if the current assumptions are consistent with the most recent asset adequacy testing.

8. Please provide all projections required to compute the Prospective PV and If Knew/Makeup Blend allowable increases as currently under consideration by the NAIC.

**Changed Items:**

No Form Schedule items changed.

No Rate/Rule Schedule items changed.

Supporting Document Schedule Item Changes	
<b>Satisfied - Item:</b>	Exhibits for 10/29/2021 Response (Objection 4)
<b>Comments:</b>	
<b>Attachment(s):</b>	Attachments 1A-1C - National Projections at Virginia Rate Level (EXCEL).xlsx Attachments 1A-1C - National Projections at Virginia Rate Level.pdf Attachments 2A-2C - Projections (proposed VA rates since day 1) - (EXCEL).xlsx Attachments 2A-2C - Projections (proposed VA rates since day 1).pdf Attachments 3A-3C - 60-80 Test (EXCEL).xlsx Attachments 3A-3C - 60-80 Test.pdf Attachment 4 - Rate Increase History (EXCEL).xlsx Attachment 4 - Rate Increase History.pdf Attachment 5 - Original Pricing Assumptions.pdf

**Response 5**

**Comments:**

The Virginia policy count, by form, by pre- and post-stability issue dates (10/01/2003 in your State) are displayed below:

FormPre-StabilityPost-Stability

LT50 1920

NH50 8 6

HCA 54 0

NHA43381

LTA64194

**Related Objection 5**

Applies To:

- L&H Actuarial Memorandum (Supporting Document)

SERFF Tracking #:

MUTA-132676983

State Tracking #:

MUTA-132676983

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:**

LT50 et al - 2021 Rate Increase

**Project Name/Number:**

LT50 et al - 2021/

*Comments: Please provide the policy count for each policy form by pre and post stability issue dates.*

**Changed Items:**

*No Form Schedule items changed.*

*No Rate/Rule Schedule items changed.*

*No Supporting Documents 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*

**State:** Virginia **Filing Company:** Mutual of Omaha Insurance Company  
**TOI/Sub-TOI:** LTC03I Individual Long Term Care/LTC03I.003 Other  
**Product Name:** LT50 et al - 2021 Rate Increase  
**Project Name/Number:** LT50 et al - 2021/

## Reviewer Note

**Created By:**

Bill Dismore on 07/12/2022 02:48 PM

**Last Edited By:**

Bill Dismore

**Submitted On:**

09/13/2022 12:36 PM

**Subject:**

Actuarial Summary & Opinion Report

**Comments:**

7/12/2022 - received attached actuarial summary and opinion report.

7/18/2022 - Actuary revised summary and opinion report as follows:

We utilized the information provided by the Company in attachment 4 – Rate Increase History.

For Virginia, we calculated the cumulative rate increase of  $232.8\% = (1+136.5\%)*(1+40.7\%)-1$ .

The 136.5% was calculated from the information provided by the Company in the attached excel file "Attachment 4 – Rate Increase History.xlsx", where we estimated the cumulative rate increase for Virginia as the weighted average of the non-Lifetime BP's (61.1%) and Lifetime BP (200.9%) using the inforce premium in columns B and C.

We utilized the nationwide average rate increase from the responses from objection 15 provided as of 1-21-22. The average across limited and lifetime benefits was weighted using the nationwide inforce premiums from Attachment 4.

We have revised the state equity test in the opinion letter and replaced the nationwide average with a breakdown between the limited and lifetime benefit types.

In addition, we updated the Prospective Present Value test result to 13.1% on page 1.

Mr. Bill Dismore  
Senior Insurance Market Examiner  
Life and Health Rates Division  
State Corporation Commission, Bureau of Insurance  
Richmond, VA 23218

July 18, 2022

**Mutual of Omaha Insurance Company**  
**State Tracking Number: MUTA-132676983**

Dear Mr. Dismore:

At your request, we have reviewed the above captioned long-term care rate filing submitted by Mutual of Omaha Insurance Company (the Company) for a closed block of Individual long-term care policies (policy forms LT50, NH50, HCA/HCAQ, NHA/NHAQ, and LTA/LTAQ). The purpose of this letter is to provide you with our analysis and opinion with respect to the rate increase requested by the Company. This letter is not intended for any other purposes.

## **OPINION**

Based on the information provided, we believe this filing satisfies the loss ratio requirements of 14VAC5-200-150 since the forms included in this filing were priced and sold mainly prior to 10/01/2003.

## **OTHER REGULATORY CONSIDERATIONS**

In addition to evaluating this filing for compliance with 14VAC5-200-150, we compared the requested rate increase to the maximum rate increase under various approaches, as requested by the Bureau. The maximum average rate increase allowed under each approach is summarized in the table below:

Proposed Increase Under 14VAC5-200-150	40.7%
<b>Other Rate Increase Tests</b>	
Present Value of Future Loss	320.0%
Prospective Present Value	13.1%
If-Knew/Makeup	157.0%
State Rate Equity – Non-Lifetime Benefit Periods	19.7%
State Rate Equity – Lifetime Benefit Periods	57.0%



## **BACKGROUND**

The Company is requesting an average rate increase of 40.7% for a closed block of Individual long-term care policies (policy forms LT50, NH50, HCA/HCAQ, NHA/NHAQ, and LTA/LTAQ) providing comprehensive long-term care benefits to insureds. The requested rate increase would vary by benefit period, with a 19.7% increase applied to policies with Non-Lifetime benefit periods and a 57.0% increase applied to policies with Lifetime benefit periods. If approved, the rate increase would be applied in two phases, with the entire 19.7% increase for Non-Lifetime benefit periods and a 30.0% increase for Lifetime benefit periods effective November 1, 2021, and the remaining 20.8% increase for Lifetime benefit periods effective November 1, 2022. These policies were originally issued between 1997 and 2004 in Virginia. As of October 2021, there were 1,356 active certificate holders that would be impacted by the proposed rate increase.

According to the Actuarial Memorandum, prior rate increases of 29.0%, 20.0%, and 4.1% were approved in Virginia for these policy forms in 2007, 2013, and 2014, respectively, for Non-Lifetime benefit period policies. For policies with Lifetime benefit periods, prior rate increases of 29.0%, 30.0%, 20.0%, 30.0%, and 15.0% were approved in 2007, 2013, 2014, 2018, and 2019, respectively. Nationwide, the cumulative average approved rate increase for policy forms with non-lifetime benefit periods is 48.4%; for policy forms with lifetime benefit periods the cumulative increase is 179.5%, and if all pending rate filings were approved, the cumulative nationwide average rate increase would be 92.9% for non-lifetime benefit periods and 372.4% for lifetime benefit periods.

## **METHODOLOGY**

We reviewed the filing materials for compliance with all relevant regulations, verified the calculations in the exhibits provided by the Company, and assessed the reasonability of the assumptions underlying this rate increase request.

## **Assumptions**

### **Morbidity Assumptions**

The morbidity assumptions were developed using 2017 Milliman Guidelines adjusted for the Company's experience. Generational morbidity improvement of 1% per year and future morbidity improvement of 1% per year for 20 years are assumed and remain unchanged from prior rate filing. A comparison of actual claims to expected claims for this policy form and other similar policy forms demonstrates the morbidity assumptions are reasonable. Approximately 75% of the requested rate increase is attributable to the updated morbidity assumptions.

### **Mortality Assumptions**

The mortality assumptions are based on 2012 IAM Basic Table with gender distinct rates adjusted for experience and generational mortality improvement of Scale G2. A comparison of actual deaths to expected for this policy form and other similar policy forms nationwide by duration demonstrates the morbidity assumptions are reasonable. Approximately 10% of the requested rate increase is attributable to the updated mortality assumptions.

## Voluntary Lapse Assumption

The voluntary lapse assumptions are based on historical Company experience. The voluntary lapse assumptions vary by duration, attained age, marital status, and policy inflation option. The Company assumes that any shock lapse assumptions as a result of the rate increase are de minimis and have no impact on the overall results. A comparison of actual lapses to expected for this policy form and other similar policy forms nationwide by duration, attained age, marital status, and policy inflation option demonstrates the morbidity assumptions are reasonable. Approximately 15% of the requested rate increase is attributable to the updated voluntary lapse assumptions.

## Loss Ratio Testing

### Compliance with VA Statute

We have reviewed the filing for compliance with 14VAC5-200-150 since the forms included in this filing were priced and sold mainly prior to 10/01/2003.

According to 14VAC5-200-150, the Company must demonstrate the sum of the accumulated value of past incurred claims without active life reserves plus the present value of future projected incurred claims without active life reserves is at least the sum of the following for policies issued prior to October 1, 2003:

1. The accumulated value of the initial earned premium times sixty percent (60%), or the lifetime loss ratio used in the original pricing, whichever is greater;
2. Eighty percent (80%) of the accumulated value of prior premium rate schedule increases on an earned basis;
3. The present value of future projected initial earned premiums times sixty percent (60%), or the lifetime loss ratio used in the original pricing, whichever is greater; and
4. Eighty percent (80%) of the present value of future projected premiums not in specified above in subsection 3 on an earned basis

The original pricing lifetime loss ratio of 62.9% was used in place of 60% when performing the calculation outlined above. Based on the information provided by the Company, 14VAC5-200-150 is satisfied for policies issued prior to October 1, 2003.

### Loss Ratio Projections

Original L/R	Future L/R without Increase*	Lifetime L/R without Increase	Future L/R with Increase*	Lifetime L/R with Increase	From Inception
62.9%	201.3%	114.0%	156.7%	109.3%	46.2%

\*After deducting ALR

The original lifetime loss ratio adjusted to reflect the actual mix of business sold is 62.9%. The Company projects the lifetime loss ratio to be 114.0% and 109.3%, without and with the proposed rate increase, respectively. The future loss ratio when considering active life reserves, discounted at the average maximum statutory valuation rate, would be 201.3% and 156.7%, without and with the proposed increase, respectively. When assuming the proposed rates would have been implemented since inception, the lifetime loss ratio would be 46.2%.

### Present Value of Future Loss Test

Original	Current	Proposed	Allowed Rate Increase
-\$40.8 M	-\$1,171.1 M	-\$1,057.6 M	320.0%

The Company provided sufficient detail for us to determine that the maximum allowable rate increase based on the present value of future loss test is 320.0%. The evaluation of future losses using the current assumptions without the proposed rate increase (“Current”) and future losses using the current assumptions with the proposed rate increase (“Proposed”) was performed assuming the average maximum statutory interest rate of 4.5%. The evaluation of future losses using the original pricing assumptions was performed assuming the original pricing interest rate of 4.5%.

### Prospective Present Value Test (Texas Approach)

Based on information provided by the Company, the maximum allowable rate increase under the prospective present value approach is 13.1%.

### If-Knew/Makeup Blend Test (Minnesota Approach)

Based on the information provided by the Company, we estimate that the allowable increase based on the if-knew/makeup blend test is 157.0%.

### State Rate Equity Test

Benefit Type	VA Current Cumulative Increase	VA Proposed Cumulative Increase	NW Current Cumulative Increase	NW Proposed Cumulative Increase	Allowed Rate Increase
Non-Lifetime Benefit Periods	61.1%	92.9%	48.4%	92.9%	19.7%
Lifetime Benefit Periods	200.9%	372.4%	179.5%	372.4%	57.0%

For policies with Non-Lifetime benefits, the cumulative average rate increase approved in Virginia is 61.1%. If the proposed rate increase is approved, the cumulative average rate increase in Virginia would be 92.9%. Nationwide, cumulative average rate increases of 48.4% have been approved, and if all pending rate increase are approved, the nationwide cumulative average rate increase would be 92.9%.

In order to ensure the cumulative average rate increase approved in Virginia does not exceed the nationwide average rate increase, assuming all pending rate increases were approved, the proposed rate increase of 19.7% is on par with the maximum justified rate increase of 19.7%.

For policies with Lifetime benefits, the cumulative average rate increase approved in Virginia is 200.9%. If the proposed rate increase is approved, the cumulative average rate increase in Virginia would be 372.4%. Nationwide, cumulative average rate increases of 179.5% have been approved, and if all pending rate increase are approved, the nationwide cumulative average rate increase would be 372.4%. In order to ensure the cumulative average rate increase approved in Virginia does not exceed the nationwide average rate increase, assuming all pending rate increases were approved, the proposed rate increase of 57.0% is on par with the maximum justified rate increase of 57.0%.

## **OTHER INFORMATION**

The Company indicated that current experience does not indicate any significant changes in assumptions due to COVID-19 and the current economic environment and is not expecting them to have a large impact on future experience.

## **RELIANCE**

In arriving at our opinion, we used and relied on information provided by the Company without independent investigation or verification. If this information is inaccurate, incomplete, or out of date, our findings and conclusions may need to be revised. While we have relied on the data provided by the Company without independent investigation or verification, we have reviewed the data for consistency and reasonableness. Where we found the data inconsistent or unreasonable, we have requested clarification.

We have utilized generally accepted actuarial methodology in reaching this opinion. I am a member of the American Academy of Actuaries and meet all of its requirements to render this opinion.

If you have any questions regarding this filing, please feel free to contact me. I can be reached at 414 223 7960.

Sincerely,



Peter Kaczmarek, FSA, MAAA  
Senior Manager

Copy: Bob Grissom, Bureau of Insurance  
Tammy Tomczyk, Oliver Wyman Actuarial Consulting, Inc.

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**State:** Virginia **Filing Company:** Mutual of Omaha Insurance Company  
**TOI/Sub-TOI:** LTC031 Individual Long Term Care/LTC031.003 Other  
**Product Name:** LT50 et al - 2021 Rate Increase  
**Project Name/Number:** LT50 et al - 2021/

## Reviewer Note

**Created By:**

Bill Dismore on 09/29/2021 01:51 PM

**Last Edited By:**

Bill Dismore

**Submitted On:**

09/13/2022 12:01 PM

**Subject:**

RRS

**Comments:**

Rate Review Summary

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

**Company Name and NAIC Number:** Mutual of Omaha Insurance Company (71412)

**SERFF Tracking Number:** MUTA-132676983

**Revised Rates**

**Average Annual Premium Per Member:** \$2,485

**Average Requested Percentage Rate Change Per Member:** 2023 - 30.0%

**Range of Requested Rate Changes:** 2023 - 21.0%-36.0%

**Number of Virginia Policyholders Affected:** 1,356

Form Number	Product Name	Issue Dates	Prior Rate Increases – Date and Percentage Approved	Outlook for Future Rate Increases
LT50			Please refer to Exhibit 3, attached to the Actuarial Memorandum.	Please refer to the Actuarial Memorandum.
NH50			Please refer to Exhibit 3, attached to the Actuarial Memorandum.	Please refer to the Actuarial Memorandum.
HCA			Please refer to Exhibit 3, attached to the Actuarial Memorandum.	Please refer to the Actuarial Memorandum.
NHA			Please refer to Exhibit 3, attached to the Actuarial Memorandum.	Please refer to the Actuarial Memorandum.
LTA			Please refer to Exhibit 3, attached to the Actuarial Memorandum.	Please refer to the Actuarial Memorandum.

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

This document is prepared by the carrier to help explain the requested rate change and 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 at <https://www.scc.virginia.gov/boi/SERFFInquiry/default.aspx>.

There is a need to increase premiums on certain policy series to reflect that future claims are expected to be significantly higher than originally expected. Claims are significantly higher due to insureds both keeping their policies longer and staying on claim longer than expected when the policy was originally priced.

**Part 2 - Long Term Care Insurance Rate Request Summary**

**Completed by the Bureau of Insurance (Bureau) of the Virginia State Corporation Commission**

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

SERFF Tracking Number: MUTA-132676983

Disposition: Approved

Approval Date: 9/13/2022

Current Average Annual Premium Per Member: \$2,408

**Rate Changes:**

Average Percentage Rate Change Per Member: 30%

Minimum Requested Percentage Rate Change Per Member: 21%

Maximum Requested Percentage Rate Change Per Member: 36%

Number of Virginia Policy Holders Affected: 1,356

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

The Company requested a 40.7% rate increase on this block of individual long-term care insurance policy forms. However, after discussion with the Bureau, the increase was reduced to 30%.

The Bureau and its consulting actuary reviewed the documentation and determined that this rate increase complies with the regulatory and actuarial requirements for a rate increase as set forth in 14VAC5-200-150 and 14VAC5-200-153 of the Virginia Administrative Code. The review indicated that the anticipated lifetime loss ratio after the increase will be 100.8%, which exceeds the minimum required loss ratio of 60%.

While the Company has advised that they are likely to file for additional rate increases in the future, these will first need to be filed for review and approval with the Bureau.

The primary reasons for the rate increase are that policyholders are living longer and keeping their policies in force longer, which has resulted in more claims being filed than the Company anticipated when the policy was originally priced. The Company determined that a premium increase is necessary to reflect that future claims are expected to be significantly higher on these policies than originally expected or priced and to ensure that sufficient funds are available to pay claims.

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, or a paid-up policy. Specific options are included in the letter sent to all



policyholders notifying them of the rate increase and 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 at: <https://scc.virginia.gov/boi/SERFFInquiry/LtcFilings.aspx>

SERFF Tracking #:

MUTA-132676983

State Tracking #:

MUTA-132676983

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:

LT50 et al - 2021 Rate Increase

Project Name/Number:

LT50 et al - 2021/

## Rate Information

Rate data applies to filing.

Filing Method:

SERFF

Rate Change Type:

Increase

Overall Percentage of Last Rate Revision:

27.400%

Effective Date of Last Rate Revision:

05/01/2019

Filing Method of Last Filing:

SERFF

SERFF Tracking Number of Last Filing:

MUTA-130706482

## 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	40.700%	30.000%	\$843,031	1,356	\$2,810,102	36.000%	21.000%

State: Virginia

Filing Company:

Mutual of Omaha Insurance Company

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

Product Name: LT50 et al - 2021 Rate Increase

Project Name/Number: LT50 et al - 2021/

## 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	Revised	Previous State Filing Number: MUTA-130706482 Percent Rate Change Request: 30	Rates - LT50 (VA - 2023)-revised.pdf,
2		rate schedules	ODX5M	Revised	Previous State Filing Number: MUTA-130706482 Percent Rate Change Request: 30	Rates - ODX5M (VA - 2023)-revised.pdf,
3		rate schedules	NH50- Series 19242	Revised	Previous State Filing Number: MUTA-130706482 Percent Rate Change Request: 30	Rates - NH50 (VA - 2023)-revised.pdf,
4		rate schedules	ODX6M	Revised	Previous State Filing Number: MUTA-130706482 Percent Rate Change Request: 30	Rates - ODX6M (VA - 2023)-revised.pdf,
5		rate schedules	HCA-Series 19629	Revised	Previous State Filing Number: MUTA-130706482 Percent Rate Change Request: 30	Rates - HCA (VA - 2023)-revised.pdf,
6		rate schedules	NHA-Series 19630	Revised	Previous State Filing Number: MUTA-130706482 Percent Rate Change Request: 30	Rates - NHA (VA - 2023)-revised.pdf,
7		rate schedules	LTA-Series 19631	Revised	Previous State Filing Number: MUTA-130706482 Percent Rate Change Request: 30	Rates - LTA (VA - 2023)-revised.pdf,

Date: 09/12/2022

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	2.01	1.86	1.61	1.39
40	2.23	2.03	1.75	1.51
41	2.30	2.11	1.82	1.57
42	2.40	2.20	1.89	1.62
43	2.49	2.30	1.96	1.68
44	2.59	2.38	2.03	1.73
45	2.70	2.48	2.12	1.80
46	2.83	2.60	2.23	1.89
47	2.96	2.73	2.32	1.97
48	3.11	2.89	2.44	2.08
49	3.28	3.06	2.57	2.15
50	3.47	3.24	2.71	2.26
51	3.68	3.46	2.88	2.40
52	3.90	3.68	3.05	2.53
53	4.16	3.92	3.24	2.69
54	4.43	4.19	3.46	2.86
55	4.74	4.48	3.69	3.04
56	5.07	4.79	3.94	3.24
57	5.45	5.13	4.22	3.47
58	5.83	5.51	4.50	3.68
59	6.24	5.89	4.82	3.93
60	6.69	6.29	5.13	4.19
61	7.20	6.78	5.51	4.48
62	7.82	7.32	5.95	4.84
63	8.48	7.93	6.45	5.25
64	9.22	8.59	6.99	5.71
65	10.03	9.32	7.61	6.22
66	10.95	10.14	8.28	6.76
67	11.97	11.06	9.03	7.38
68	13.09	12.08	9.80	7.96
69	14.29	13.15	10.62	8.58
70	15.61	14.35	11.53	9.27
71	17.07	15.68	12.54	10.02
72	18.72	17.19	13.72	10.95
73	20.55	18.88	15.08	12.03
74	22.55	20.70	16.56	13.26
75	24.68	22.70	18.17	14.57
76	27.01	24.83	19.90	15.96
77	29.52	27.15	21.76	17.44
78	32.22	29.67	23.72	18.96
79	35.11	32.32	25.79	20.57
80	38.18	35.16	27.98	22.26
81	41.43	38.18	30.29	24.03
82	44.84	41.36	32.72	25.87
83	48.45	44.70	35.26	27.81
84	52.25	48.21	37.90	29.79

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 / R25387-44-5

Date: 09/12/2022

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	2.66	2.53	2.17	1.86
40	2.95	2.81	2.38	2.03
41	3.05	2.90	2.47	2.09
42	3.17	3.03	2.57	2.18
43	3.32	3.13	2.66	2.26
44	3.46	3.25	2.76	2.34
45	3.61	3.40	2.88	2.44
46	3.76	3.56	3.00	2.53
47	3.97	3.75	3.15	2.66
48	4.19	3.94	3.32	2.77
49	4.42	4.19	3.50	2.93
50	4.69	4.42	3.69	3.10
51	4.99	4.69	3.91	3.25
52	5.31	5.00	4.16	3.47
53	5.65	5.32	4.43	3.68
54	6.03	5.66	4.72	3.93
55	6.44	6.04	5.02	4.19
56	6.90	6.44	5.37	4.49
57	7.43	6.92	5.75	4.77
58	8.03	7.45	6.17	5.13
59	8.66	8.00	6.62	5.49
60	9.37	8.62	7.11	5.88
61	10.16	9.30	7.65	6.29
62	11.06	10.10	8.26	6.76
63	12.04	11.01	8.93	7.25
64	13.07	11.95	9.66	7.82
65	14.22	13.02	10.44	8.37
66	15.49	14.21	11.31	9.01
67	16.93	15.49	12.34	9.85
68	18.51	16.89	13.48	10.74
69	20.23	18.34	14.68	11.75
70	22.07	19.94	16.02	12.85
71	24.13	21.76	17.51	14.10
72	26.44	23.82	19.21	15.51
73	28.99	26.15	21.13	17.07
74	31.74	28.70	23.24	18.83
75	34.73	31.48	25.53	20.69
76	37.95	34.46	27.95	22.68
77	41.39	37.66	30.54	24.76
78	45.08	41.07	33.25	26.93
79	49.02	44.65	36.13	29.23
80	53.19	48.48	39.16	31.63
81	57.57	52.54	42.34	34.12
82	62.21	56.77	45.67	36.74
83	67.07	61.25	49.15	39.45
84	72.16	65.91	52.79	42.30

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 DEDUCTION ISSUES ARE THE PREMIUMS LISTED ABO VI R25387-44-5

Date: 09/12/2022

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	3.24	2.98	2.52	2.11
40	3.58	3.28	2.78	2.37
41	3.71	3.42	2.89	2.44
42	3.87	3.56	3.00	2.53
43	4.04	3.70	3.12	2.64
44	4.21	3.86	3.24	2.73
45	4.40	4.04	3.39	2.83
46	4.60	4.22	3.55	2.98
47	4.85	4.44	3.71	3.11
48	5.13	4.69	3.91	3.25
49	5.42	4.99	4.13	3.42
50	5.75	5.28	4.34	3.58
51	6.11	5.60	4.60	3.78
52	6.52	5.98	4.91	4.02
53	6.96	6.36	5.22	4.27
54	7.43	6.80	5.57	4.56
55	7.96	7.26	5.95	4.88
56	8.51	7.77	6.36	5.20
57	9.14	8.34	6.82	5.59
58	9.80	8.95	7.32	6.00
59	10.50	9.61	7.85	6.41
60	11.25	10.32	8.43	6.90
61	12.11	11.11	9.08	7.42
62	13.08	11.99	9.79	7.99
63	14.14	12.95	10.58	8.62
64	15.29	13.94	11.39	9.30
65	16.54	15.03	12.29	10.07
66	17.94	16.29	13.33	10.90
67	19.58	17.77	14.51	11.85
68	21.36	19.47	15.83	12.86
69	23.30	21.34	17.25	13.95
70	25.43	23.39	18.83	15.16
71	27.78	25.64	20.55	16.47
72	30.36	28.08	22.46	17.96
73	33.15	30.71	24.54	19.60
74	36.13	33.53	26.77	21.34
75	39.34	36.54	29.16	23.26
76	42.82	39.78	31.74	25.31
77	46.66	43.28	34.56	27.59
78	50.80	47.02	37.59	30.06
79	55.25	50.99	40.85	32.73
80	59.98	55.18	44.31	35.59
81	65.03	59.62	47.96	38.60
82	70.35	64.28	51.84	41.81
83	75.99	69.16	55.91	45.21
84	81.90	74.29	60.21	48.80

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Date: 09/12/2022

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 -- 5 YEARS**

Issue Age	ELIMINATION PERIODS			
	0 Day	20 Day	100 Day	365 Day
18-39	4.28	3.99	3.36	2.84
40	4.73	4.42	3.68	3.05
41	4.92	4.57	3.82	3.18
42	5.13	4.77	3.97	3.30
43	5.34	4.96	4.13	3.41
44	5.57	5.18	4.28	3.57
45	5.82	5.41	4.48	3.73
46	6.09	5.64	4.68	3.88
47	6.40	5.97	4.92	4.07
48	6.78	6.28	5.19	4.30
49	7.18	6.64	5.48	4.53
50	7.60	7.03	5.83	4.84
51	8.09	7.48	6.17	5.11
52	8.62	7.96	6.61	5.46
53	9.17	8.49	7.02	5.81
54	9.74	9.08	7.49	6.21
55	10.38	9.68	8.00	6.62
56	11.07	10.36	8.54	7.05
57	11.85	11.08	9.12	7.49
58	12.67	11.87	9.72	7.96
59	13.55	12.67	10.36	8.43
60	14.47	13.55	11.02	8.97
61	15.55	14.51	11.76	9.56
62	16.75	15.58	12.63	10.24
63	18.05	16.77	13.56	10.96
64	19.46	18.02	14.54	11.75
65	20.99	19.38	15.66	12.64
66	22.74	20.93	16.90	13.65
67	24.71	22.74	18.34	14.79
68	26.92	24.74	19.92	16.02
69	29.32	26.97	21.66	17.40
70	31.96	29.37	23.56	18.90
71	34.84	32.03	25.65	20.53
72	38.02	34.96	27.96	22.39
73	41.42	38.08	30.48	24.41
74	45.01	41.42	33.15	26.54
75	48.93	45.02	36.05	28.86
76	53.22	49.01	39.24	31.44
77	57.97	53.37	42.77	34.26
78	63.20	58.16	46.63	37.40
79	68.84	63.33	50.82	40.78
80	74.90	68.86	55.28	44.39
81	81.36	74.78	60.08	48.29
82	88.25	81.05	65.17	52.41
83	95.54	87.70	70.57	56.77
84	103.25	94.73	76.25	61.38

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 R25387-44-5

Date: 09/12/2022

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 -- LIFETIME**

Issue Age	ELIMINATION PERIODS			
	0 Day	20 Day	100 Day	365 Day
18-39	10.83	10.24	8.34	6.84
40	11.86	11.19	9.19	7.53
41	12.31	11.64	9.55	7.83
42	12.85	12.12	9.91	8.17
43	13.41	12.61	10.39	8.55
44	13.95	13.21	10.88	8.99
45	14.62	13.80	11.34	9.37
46	15.33	14.48	11.95	9.87
47	16.12	15.15	12.54	10.35
48	16.93	15.97	13.21	10.88
49	17.84	16.80	13.89	11.49
50	18.81	17.69	14.62	12.08
51	19.87	18.65	15.40	12.69
52	21.03	19.67	16.25	13.42
53	22.21	20.73	17.10	14.16
54	23.50	21.81	17.97	14.80
55	24.87	22.96	18.93	15.61
56	26.44	24.28	19.99	16.47
57	28.11	25.73	21.15	17.37
58	29.91	27.30	22.43	18.43
59	31.84	28.94	23.70	19.48
60	33.90	30.75	25.15	20.60
61	36.26	32.78	26.82	21.91
62	38.95	35.17	28.67	23.38
63	41.83	37.84	30.76	25.00
64	44.98	40.73	32.98	26.75
65	48.40	43.97	35.46	28.66
66	52.25	47.50	38.28	30.86
67	56.63	51.57	41.52	33.47
68	61.47	55.99	45.14	36.38
69	66.63	60.71	49.04	39.58
70	72.32	65.89	53.35	43.17
71	78.59	71.64	58.07	47.04
72	85.61	78.12	63.36	51.38
73	93.19	85.04	69.03	56.02
74	101.27	92.38	75.04	60.91
75	110.08	100.44	81.61	66.29
76	119.78	109.44	88.90	72.18
77	130.48	119.69	97.06	78.69
78	142.28	131.23	106.18	85.92
79	154.97	143.81	116.02	93.65
80	168.61	157.45	126.72	101.99
81	183.21	172.15	138.22	110.94
82	198.70	187.88	150.44	120.44
83	215.17	204.75	163.47	130.55
84	232.51	222.63	177.29	141.24

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 R25387-44-5



Date: 09/12/2022

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	1.80	1.69	1.46	1.28
40	2.01	1.86	1.62	1.43
41	2.08	1.94	1.67	1.45
42	2.17	2.01	1.74	1.52
43	2.25	2.08	1.80	1.57
44	2.34	2.18	1.88	1.61
45	2.44	2.26	1.95	1.68
46	2.54	2.37	2.03	1.74
47	2.66	2.49	2.13	1.82
48	2.81	2.63	2.25	1.94
49	2.96	2.81	2.37	2.01
50	3.12	2.95	2.49	2.11
51	3.32	3.15	2.64	2.23
52	3.53	3.34	2.81	2.37
53	3.75	3.57	2.99	2.52
54	3.98	3.80	3.17	2.66
55	4.27	4.08	3.40	2.83
56	4.56	4.36	3.63	3.03
57	4.91	4.69	3.87	3.21
58	5.28	5.01	4.14	3.42
59	5.64	5.36	4.42	3.64
60	6.03	5.72	4.72	3.90
61	6.49	6.17	5.06	4.15
62	7.02	6.67	5.47	4.49
63	7.64	7.21	5.94	4.89
64	8.30	7.82	6.44	5.28
65	9.05	8.48	6.99	5.78
66	9.86	9.22	7.61	6.29
67	10.79	10.07	8.29	6.84
68	11.81	10.99	9.01	7.39
69	12.87	11.97	9.78	7.96
70	14.07	13.06	10.59	8.59
71	15.38	14.28	11.53	9.32
72	16.87	15.66	12.61	10.16
73	18.51	17.18	13.84	11.16
74	20.30	18.85	15.22	12.29
75	22.24	20.64	16.71	13.53
76	24.32	22.60	18.31	14.82
77	26.60	24.71	19.99	16.17
78	29.03	27.00	21.80	17.62
79	31.63	29.42	23.69	19.08
80	34.39	32.00	25.72	20.68
81	37.30	34.75	27.83	22.30
82	40.39	37.63	30.07	24.03
83	43.64	40.67	32.40	25.82
84	47.06	43.86	34.84	27.67

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  
 R25387-44-5

Date: 09/12/2022

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	2.42	2.34	2.01	1.73
40	2.67	2.57	2.23	1.91
41	2.78	2.66	2.30	1.98
42	2.89	2.76	2.38	2.06
43	3.03	2.89	2.48	2.13
44	3.13	3.00	2.57	2.19
45	3.27	3.12	2.67	2.30
46	3.44	3.27	2.81	2.40
47	3.61	3.46	2.93	2.48
48	3.82	3.63	3.07	2.60
49	4.04	3.84	3.24	2.75
50	4.27	4.07	3.44	2.90
51	4.53	4.33	3.64	3.07
52	4.84	4.60	3.86	3.24
53	5.14	4.91	4.13	3.47
54	5.49	5.20	4.38	3.69
55	5.87	5.57	4.67	3.93
56	6.29	5.93	4.99	4.19
57	6.76	6.36	5.35	4.49
58	7.31	6.85	5.74	4.80
59	7.89	7.36	6.15	5.13
60	8.54	7.93	6.61	5.51
61	9.27	8.57	7.11	5.90
62	10.07	9.29	7.68	6.36
63	10.96	10.12	8.30	6.81
64	11.91	11.01	8.98	7.33
65	12.95	11.98	9.70	7.87
66	14.11	13.06	10.51	8.47
67	15.44	14.25	11.47	9.23
68	16.86	15.54	12.51	10.08
69	18.42	16.87	13.64	11.02
70	20.11	18.36	14.87	12.05
71	21.99	20.01	16.27	13.24
72	24.08	21.93	17.86	14.54
73	26.40	24.05	19.65	16.03
74	28.92	26.40	21.61	17.67
75	31.63	28.96	23.72	19.43
76	34.56	31.70	25.98	21.30
77	37.70	34.63	28.37	23.24
78	41.07	37.76	30.90	25.26
79	44.65	41.09	33.57	27.42
80	48.45	44.60	36.38	29.68
81	52.44	48.33	39.34	32.02
82	56.65	52.25	42.45	34.47
83	61.08	56.34	45.67	37.01
84	65.73	60.63	49.05	39.66

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  
 R25387-44-5

Date: 09/12/2022

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	2.98	2.76	2.37	2.02
40	3.29	3.05	2.60	2.23
41	3.42	3.18	2.71	2.31
42	3.57	3.32	2.82	2.41
43	3.71	3.46	2.95	2.52
44	3.87	3.61	3.05	2.59
45	4.05	3.75	3.17	2.69
46	4.24	3.92	3.33	2.82
47	4.48	4.14	3.50	2.95
48	4.72	4.36	3.68	3.11
49	4.99	4.63	3.87	3.24
50	5.30	4.91	4.09	3.41
51	5.64	5.20	4.33	3.58
52	6.00	5.57	4.60	3.82
53	6.40	5.93	4.91	4.05
54	6.84	6.32	5.23	4.33
55	7.32	6.75	5.59	4.63
56	7.83	7.24	5.98	4.95
57	8.41	7.76	6.40	5.29
58	9.03	8.32	6.87	5.69
59	9.67	8.93	7.38	6.09
60	10.37	9.60	7.93	6.55
61	11.16	10.33	8.52	7.02
62	12.05	11.16	9.20	7.57
63	13.02	12.05	9.92	8.18
64	14.07	12.97	10.70	8.83
65	15.23	13.99	11.56	9.56
66	16.53	15.16	12.51	10.32
67	18.00	16.53	13.62	11.23
68	19.66	18.10	14.86	12.20
69	21.47	19.84	16.20	13.23
70	23.43	21.76	17.69	14.37
71	25.57	23.86	19.30	15.62
72	27.95	26.11	21.10	17.05
73	30.52	28.56	23.04	18.59
74	33.26	31.19	25.13	20.24
75	36.22	33.99	27.38	22.06
76	39.43	37.00	29.81	24.02
77	42.96	40.27	32.46	26.18
78	46.78	43.73	35.31	28.51
79	50.87	47.42	38.38	31.05
80	55.24	51.32	41.61	33.75
81	59.87	55.44	45.06	36.60
82	64.77	59.77	48.69	39.66
83	69.96	64.32	52.51	42.88
84	75.41	69.10	56.56	46.29

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.  
 R25387-44-5

Date: 09/12/2022

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	3.98	3.75	3.19	2.71
40	4.39	4.15	3.48	2.93
41	4.57	4.30	3.62	3.05
42	4.77	4.49	3.76	3.17
43	4.96	4.68	3.91	3.28
44	5.18	4.86	4.08	3.42
45	5.41	5.06	4.24	3.55
46	5.66	5.32	4.44	3.73
47	5.97	5.59	4.68	3.90
48	6.29	5.89	4.92	4.13
49	6.68	6.24	5.22	4.37
50	7.08	6.62	5.53	4.62
51	7.54	7.02	5.88	4.92
52	8.01	7.48	6.24	5.20
53	8.53	7.99	6.68	5.57
54	9.08	8.53	7.10	5.93
55	9.67	9.09	7.59	6.34
56	10.30	9.73	8.12	6.76
57	11.02	10.43	8.68	7.20
58	11.80	11.16	9.23	7.66
59	12.61	11.92	9.81	8.08
60	13.47	12.73	10.47	8.60
61	14.46	13.62	11.17	9.16
62	15.56	14.67	11.99	9.81
63	16.79	15.75	12.87	10.51
64	18.10	16.92	13.82	11.29
65	19.54	18.21	14.87	12.14
66	21.15	19.67	16.06	13.09
67	23.00	21.38	17.41	14.19
68	25.05	23.27	18.91	15.39
69	27.29	25.33	20.55	16.67
70	29.77	27.60	22.36	18.11
71	32.43	30.09	24.35	19.70
72	35.38	32.85	26.57	21.47
73	38.55	35.80	28.93	23.39
74	41.90	38.95	31.46	25.45
75	45.53	42.33	34.23	27.68
76	49.53	46.05	37.27	30.13
77	53.95	50.17	40.62	32.88
78	58.83	54.68	44.27	35.84
79	64.06	59.54	48.25	39.11
80	69.71	64.74	52.49	42.57
81	75.72	70.30	57.04	46.27
82	82.12	76.18	61.87	50.23
83	88.91	82.43	66.99	54.44
84	96.09	89.03	72.41	58.88

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: 09/12/2022

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	10.17	9.71	8.04	6.58
40	11.18	10.65	8.80	7.32
41	11.60	11.03	9.17	7.64
42	12.08	11.51	9.55	7.92
43	12.55	11.98	9.91	8.21
44	13.14	12.54	10.44	8.68
45	13.75	13.10	10.91	9.10
46	14.39	13.75	11.49	9.62
47	15.12	14.43	12.05	10.02
48	15.97	15.15	12.61	10.57
49	16.80	15.97	13.33	11.12
50	17.69	16.80	14.04	11.67
51	18.65	17.69	14.78	12.34
52	19.77	18.69	15.61	13.02
53	20.89	19.68	16.39	13.64
54	22.10	20.73	17.23	14.38
55	23.39	21.81	18.17	15.12
56	24.85	23.05	19.16	15.97
57	26.44	24.41	20.26	16.82
58	28.14	25.89	21.49	17.83
59	29.93	27.46	22.77	18.84
60	31.92	29.20	24.13	19.91
61	34.11	31.16	25.73	21.26
62	36.60	33.43	27.53	22.64
63	39.37	35.97	29.53	24.25
64	42.30	38.69	31.63	25.88
65	45.53	41.77	34.03	27.77
66	49.14	45.14	36.72	29.89
67	53.27	48.93	39.86	32.45
68	57.80	53.18	43.30	35.28
69	62.70	57.66	47.04	38.38
70	67.97	62.60	51.16	41.81
71	73.93	68.10	55.72	45.60
72	80.50	74.20	60.79	49.82
73	87.62	80.78	66.22	54.28
74	95.27	87.79	71.97	59.02
75	103.54	95.40	78.28	64.19
76	112.69	103.96	85.26	69.94
77	122.73	113.72	93.12	76.24
78	133.78	124.66	101.90	83.30
79	145.76	136.61	111.36	90.79
80	158.59	149.59	121.58	98.83
81	172.34	163.55	132.59	107.49
82	186.90	178.50	144.34	116.72
83	202.35	194.49	156.88	126.48
84	218.65	211.49	170.10	136.79

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  
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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 -- 1 YEAR**

Issue Age	Elimination Periods			
	0 Day	20 Day	100 Day	365 Day
18-39	1.50	1.43	1.23	1.08
40	1.67	1.55	1.36	1.16
41	1.73	1.61	1.39	1.21
42	1.80	1.67	1.44	1.25
43	1.88	1.74	1.50	1.29
44	1.95	1.82	1.57	1.37
45	2.03	1.89	1.65	1.43
46	2.12	1.97	1.69	1.45
47	2.24	2.08	1.79	1.52
48	2.35	2.20	1.88	1.60
49	2.47	2.32	1.97	1.67
50	2.60	2.47	2.08	1.75
51	2.75	2.63	2.23	1.86
52	2.95	2.81	2.35	1.97
53	3.13	2.99	2.49	2.08
54	3.33	3.18	2.66	2.20
55	3.57	3.41	2.84	2.37
56	3.82	3.64	3.04	2.53
57	4.11	3.90	3.24	2.70
58	4.40	4.19	3.46	2.86
59	4.71	4.48	3.69	3.04
60	5.03	4.79	3.93	3.24
61	5.42	5.14	4.22	3.47
62	5.88	5.57	4.56	3.75
63	6.38	6.03	4.95	4.07
64	6.95	6.53	5.37	4.42
65	7.55	7.09	5.86	4.84
66	8.23	7.70	6.36	5.24
67	9.01	8.41	6.92	5.71
68	9.85	9.17	7.53	6.16
69	10.74	9.99	8.16	6.66
70	11.75	10.91	8.85	7.16
71	12.85	11.92	9.63	7.78
72	14.08	13.07	10.54	8.49
73	15.46	14.35	11.57	9.34
74	16.96	15.74	12.72	10.29
75	18.57	17.25	13.96	11.31
76	20.32	18.88	15.29	12.39
77	22.22	20.63	16.70	13.52
78	24.25	22.55	18.21	14.71
79	26.41	24.56	19.80	15.95
80	28.73	26.72	21.48	17.27
81	31.17	29.02	23.26	18.63
82	33.73	31.42	25.11	20.06
83	36.45	33.96	27.06	21.55
84	39.30	36.64	29.09	23.10

TO OBTAIN QUARTERLY, SEMIANNUAL, AND ANNUAL PREMIUMS,  
 MULTIPLY THE ABOVE QUOTED PREMIUMS BY 3, 6, AND 12,  
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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 -- 2 YEARS**

Issue Age	Elimination Periods			
	0 Day	20 Day	100 Day	365 Day
18-39	2.04	1.97	1.72	1.48
40	2.27	2.18	1.88	1.61
41	2.37	2.26	1.95	1.68
42	2.44	2.35	2.02	1.74
43	2.55	2.44	2.09	1.79
44	2.66	2.54	2.18	1.86
45	2.78	2.66	2.27	1.95
46	2.92	2.78	2.37	2.01
47	3.06	2.92	2.48	2.11
48	3.24	3.10	2.60	2.19
49	3.41	3.25	2.75	2.32
50	3.62	3.46	2.92	2.47
51	3.84	3.65	3.10	2.60
52	4.11	3.90	3.27	2.73
53	4.37	4.15	3.50	2.95
54	4.66	4.42	3.71	3.12
55	4.96	4.71	3.97	3.33
56	5.35	5.02	4.24	3.57
57	5.74	5.42	4.53	3.79
58	6.20	5.80	4.86	4.08
59	6.69	6.23	5.20	4.34
60	7.24	6.73	5.60	4.67
61	7.85	7.26	6.03	5.00
62	8.54	7.89	6.52	5.40
63	9.29	8.58	7.03	5.76
64	10.09	9.34	7.60	6.20
65	10.99	10.15	8.22	6.66
66	11.95	11.08	8.91	7.16
67	13.07	12.10	9.73	7.83
68	14.29	13.16	10.60	8.54
69	15.61	14.30	11.57	9.35
70	17.05	15.55	12.61	10.22
71	18.63	16.98	13.79	11.20
72	20.41	18.57	15.15	12.35
73	22.39	20.40	16.65	13.59
74	24.51	22.39	18.31	14.97
75	26.81	24.55	20.11	16.47
76	29.31	26.87	22.02	18.05
77	31.97	29.38	24.05	19.70
78	34.82	32.02	26.18	21.42
79	37.85	34.82	28.46	23.26
80	41.07	37.81	30.86	25.18
81	44.46	40.97	33.35	27.14
82	48.04	44.29	35.99	29.23
83	51.79	47.76	38.72	31.39
84	55.73	51.40	41.58	33.63

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.  
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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 -- 3 YEARS**

Issue Age	Elimination Periods			
	0 Day	20 Day	100 Day	365 Day
18-39	2.57	2.38	2.02	1.72
40	2.84	2.63	2.25	1.94
41	2.95	2.73	2.34	2.01
42	3.07	2.84	2.42	2.06
43	3.19	2.96	2.52	2.15
44	3.33	3.10	2.63	2.24
45	3.48	3.22	2.73	2.30
46	3.64	3.39	2.88	2.44
47	3.84	3.56	3.00	2.53
48	4.07	3.75	3.17	2.66
49	4.30	3.97	3.33	2.81
50	4.55	4.22	3.51	2.92
51	4.84	4.48	3.71	3.10
52	5.15	4.78	3.97	3.28
53	5.52	5.09	4.22	3.50
54	5.89	5.43	4.49	3.71
55	6.29	5.80	4.80	3.98
56	6.74	6.22	5.13	4.24
57	7.24	6.67	5.52	4.56
58	7.77	7.16	5.93	4.89
59	8.30	7.67	6.34	5.24
60	8.91	8.25	6.81	5.64
61	9.60	8.88	7.33	6.05
62	10.37	9.61	7.91	6.52
63	11.20	10.36	8.54	7.04
64	12.10	11.16	9.21	7.61
65	13.09	12.03	9.93	8.22
66	14.22	13.04	10.76	8.88
67	15.49	14.22	11.71	9.64
68	16.90	15.58	12.79	10.50
69	18.45	17.07	13.95	11.40
70	20.16	18.71	15.22	12.37
71	22.01	20.52	16.60	13.44
72	24.04	22.46	18.15	14.67
73	26.26	24.56	19.82	16.00
74	28.60	26.84	21.62	17.42
75	31.15	29.23	23.55	18.96
76	33.92	31.85	25.65	20.67
77	36.95	34.63	27.93	22.51
78	40.23	37.62	30.37	24.51
79	43.75	40.79	33.01	26.69
80	47.50	44.15	35.80	29.03
81	51.49	47.69	38.76	31.50
82	55.71	51.41	41.89	34.13
83	60.19	55.33	45.17	36.87
84	64.88	59.44	48.64	39.81

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.  
 R25387-44-5



Date: 09/12/2022

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	3.51	3.33	2.82	2.40
40	3.88	3.67	3.09	2.61
41	4.04	3.81	3.21	2.70
42	4.21	3.97	3.33	2.80
43	4.38	4.13	3.45	2.88
44	4.56	4.28	3.59	3.01
45	4.78	4.49	3.75	3.15
46	5.01	4.68	3.91	3.28
47	5.28	4.94	4.13	3.42
48	5.57	5.20	4.34	3.62
49	5.89	5.51	4.61	3.85
50	6.24	5.84	4.89	4.09
51	6.66	6.21	5.18	4.33
52	7.08	6.61	5.53	4.62
53	7.54	7.04	5.88	4.92
54	8.01	7.53	6.28	5.24
55	8.54	8.03	6.70	5.60
56	9.10	8.60	7.16	5.97
57	9.73	9.21	7.64	6.34
58	10.41	9.85	8.14	6.74
59	11.12	10.51	8.68	7.18
60	11.89	11.25	9.26	7.61
61	12.77	12.03	9.87	8.12
62	13.73	12.93	10.60	8.68
63	14.82	13.93	11.36	9.28
64	15.98	14.94	12.21	9.97
65	17.24	16.08	13.13	10.72
66	18.68	17.39	14.19	11.56
67	20.30	18.86	15.39	12.52
68	22.12	20.53	16.71	13.59
69	24.10	22.37	18.15	14.75
70	26.26	24.37	19.74	15.98
71	28.62	26.58	21.51	17.41
72	31.24	29.00	23.45	18.98
73	34.03	31.62	25.56	20.65
74	37.00	34.39	27.79	22.47
75	40.20	37.38	30.24	24.45
76	43.74	40.67	32.89	26.61
77	47.65	44.30	35.85	29.04
78	51.93	48.29	39.11	31.68
79	56.57	52.56	42.62	34.56
80	61.54	57.17	46.34	37.58
81	66.84	62.06	50.36	40.86
82	72.52	67.26	54.62	44.37
83	78.50	72.81	59.14	48.06
84	84.83	78.64	63.94	51.98

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.  
 R25387-44-5

Date: 09/12/2022

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	9.19	8.80	7.22	5.96
40	10.12	9.63	8.01	6.58
41	10.50	10.01	8.27	6.85
42	10.91	10.39	8.66	7.18
43	11.34	10.85	9.00	7.52
44	11.91	11.34	9.42	7.85
45	12.44	11.86	9.90	8.26
46	13.07	12.44	10.39	8.68
47	13.70	13.07	10.88	9.10
48	14.43	13.75	11.49	9.62
49	15.20	14.48	12.06	10.04
50	15.98	15.20	12.69	10.59
51	16.92	16.02	13.41	11.19
52	17.84	16.92	14.08	11.74
53	18.93	17.80	14.84	12.40
54	20.01	18.78	15.64	13.02
55	21.19	19.77	16.43	13.67
56	22.49	20.86	17.37	14.48
57	23.91	22.10	18.37	15.30
58	25.47	23.45	19.43	16.14
59	27.12	24.87	20.60	17.07
60	28.87	26.44	21.81	18.02
61	30.86	28.19	23.26	19.19
62	33.16	30.23	24.92	20.52
63	35.63	32.54	26.75	21.96
64	38.28	35.02	28.66	23.45
65	41.21	37.82	30.84	25.15
66	44.51	40.85	33.22	27.06
67	48.20	44.32	36.09	29.39
68	52.32	48.14	39.20	31.93
69	56.74	52.24	42.61	34.76
70	61.55	56.71	46.31	37.84
71	66.95	61.62	50.43	41.26
72	72.87	67.17	55.04	45.12
73	79.32	73.11	59.94	49.15
74	86.25	79.45	65.14	53.41
75	93.73	86.36	70.87	58.15
76	101.99	94.14	77.18	63.29
77	111.13	102.94	84.31	69.06
78	121.14	112.84	92.24	75.37
79	131.96	123.68	100.79	82.13
80	143.59	135.36	110.06	89.46
81	155.99	148.06	120.02	97.31
82	169.18	161.62	130.67	105.69
83	183.19	176.12	142.00	114.51
84	197.96	191.47	153.99	123.87

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.  
 R25387-44-5

Date: 09/12/2022

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 -- 1 YEAR**

Issue Age	ELIMINATION PERIODS			
	0 Day	20 Day	100 Day	365 Day
18-39	3.39	3.15	2.71	2.34
40	3.70	3.40	2.93	2.53
41	3.79	3.48	2.99	2.57
42	3.90	3.57	3.07	2.64
43	4.04	3.69	3.17	2.73
44	4.13	3.79	3.24	2.78
45	4.26	3.90	3.34	2.88
46	4.37	4.04	3.41	2.89
47	4.50	4.19	3.53	2.98
48	4.69	4.34	3.68	3.11
49	4.85	4.51	3.79	3.17
50	5.03	4.72	3.97	3.32
51	5.20	4.91	4.08	3.39
52	5.42	5.11	4.24	3.51
53	5.61	5.30	4.38	3.62
54	5.82	5.49	4.55	3.75
55	6.00	5.66	4.67	3.86
56	6.22	5.87	4.85	4.02
57	6.45	6.09	5.00	4.11
58	6.69	6.30	5.17	4.24
59	6.95	6.53	5.35	4.36
60	7.24	6.80	5.54	4.53
61	7.47	7.03	5.71	4.63
62	7.79	7.32	5.94	4.84
63	8.14	7.61	6.22	5.08
64	8.48	7.90	6.44	5.24
65	8.86	8.22	6.73	5.49
66	9.27	8.57	7.02	5.72
67	9.68	8.93	7.28	5.94
68	10.15	9.35	7.60	6.16
69	10.66	9.81	7.93	6.40
70	11.19	10.30	8.26	6.63
71	11.71	10.77	8.62	6.87
72	12.20	11.19	8.94	7.14
73	12.61	11.56	9.23	7.38
74	12.95	11.88	9.51	7.61
75	13.29	12.21	9.79	7.85
76	13.65	12.56	10.07	8.07
77	14.10	12.97	10.38	8.32
78	14.58	13.42	10.73	8.59
79	15.13	13.94	11.12	8.87
80	15.71	14.47	11.52	9.17
81	16.34	15.04	11.93	9.46
82	16.99	15.67	12.40	9.81
83	17.69	16.34	12.87	10.14
84	18.45	17.04	13.41	10.54

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 . R25387-44-5

Date: 09/12/2022

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	4.79	4.57	3.90	3.33
40	5.18	4.92	4.21	3.61
41	5.31	5.06	4.30	3.68
42	5.47	5.20	4.43	3.79
43	5.64	5.35	4.55	3.86
44	5.78	5.49	4.66	3.97
45	5.98	5.64	4.77	4.04
46	6.15	5.80	4.91	4.15
47	6.34	5.98	5.02	4.21
48	6.52	6.16	5.17	4.33
49	6.73	6.36	5.31	4.44
50	6.97	6.58	5.49	4.57
51	7.20	6.80	5.67	4.74
52	7.45	7.02	5.83	4.85
53	7.72	7.25	6.05	5.06
54	7.96	7.49	6.23	5.18
55	8.28	7.76	6.47	5.42
56	8.62	8.05	6.70	5.58
57	8.98	8.36	6.95	5.78
58	9.38	8.70	7.24	6.00
59	9.83	9.08	7.50	6.20
60	10.29	9.45	7.79	6.44
61	10.77	9.85	8.11	6.68
62	11.23	10.26	8.40	6.87
63	11.64	10.65	8.66	7.05
64	12.08	11.05	8.91	7.18
65	12.50	11.46	9.20	7.36
66	13.00	11.91	9.50	7.60
67	13.62	12.46	9.92	7.90
68	14.39	13.13	10.47	8.35
69	15.33	13.92	11.13	8.91
70	16.29	14.73	11.82	9.49
71	17.18	15.49	12.48	10.04
72	17.94	16.17	13.04	10.53
73	18.51	16.70	13.49	10.90
74	18.97	17.13	13.88	11.24
75	19.36	17.52	14.22	11.54
76	19.75	17.93	14.57	11.82
77	20.23	18.39	14.93	12.12
78	20.78	18.90	15.32	12.41
79	21.36	19.46	15.73	12.72
80	21.97	20.01	16.18	13.08
81	22.59	20.62	16.61	13.41
82	23.28	21.22	17.07	13.73
83	23.96	21.88	17.55	14.07
84	24.67	22.53	18.05	14.46

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 VI R25387-44-5

Date: 09/12/2022

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 -- 3 YEARS**

Issue Age	ELIMINATION PERIOD			
	0 Day	20 Day	100 Day	365 Day
18-39	5.98	5.49	4.63	3.91
40	6.53	6.00	5.07	4.28
41	6.69	6.16	5.20	4.40
42	6.88	6.32	5.35	4.51
43	7.04	6.46	5.46	4.60
44	7.18	6.59	5.54	4.66
45	7.38	6.74	5.69	4.79
46	7.54	6.90	5.78	4.85
47	7.74	7.10	5.94	4.99
48	8.03	7.34	6.12	5.11
49	8.28	7.60	6.30	5.23
50	8.64	7.90	6.52	5.37
51	8.94	8.20	6.74	5.53
52	9.29	8.51	6.98	5.74
53	9.66	8.83	7.24	5.93
54	9.99	9.14	7.49	6.15
55	10.33	9.43	7.72	6.33
56	10.68	9.75	8.00	6.56
57	11.08	10.10	8.28	6.78
58	11.47	10.47	8.57	7.02
59	11.88	10.87	8.88	7.26
60	12.32	11.28	9.22	7.54
61	12.73	11.69	9.53	7.78
62	13.19	12.08	9.85	8.03
63	13.56	12.41	10.14	8.29
64	13.95	12.72	10.41	8.51
65	14.35	13.06	10.66	8.70
66	14.75	13.41	10.94	8.93
67	15.22	13.82	11.28	9.20
68	15.77	14.37	11.69	9.51
69	16.42	15.04	12.17	9.85
70	17.12	15.73	12.66	10.18
71	17.73	16.35	13.12	10.51
72	18.22	16.84	13.48	10.79
73	18.49	17.12	13.67	10.94
74	18.53	17.19	13.73	10.97
75	18.56	17.25	13.77	10.97
76	18.71	17.38	13.85	11.05
77	19.07	17.69	14.13	11.28
78	19.66	18.21	14.57	11.64
79	20.45	18.85	15.11	12.11
80	21.33	19.63	15.75	12.64
81	22.37	20.50	16.48	13.26
82	23.53	21.50	17.34	13.99
83	24.85	22.63	18.28	14.79
84	26.29	23.86	19.32	15.66

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  
 R25387-44-5

Date: 09/12/2022

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 -- 5 YEARS**

Issue Age	ELIMINATION PERIODS			
	0 Day	20 Day	100 Day	365 Day
18-39	8.52	7.94	6.69	5.66
40	9.23	8.60	7.19	6.01
41	9.49	8.83	7.36	6.13
42	9.73	9.08	7.56	6.28
43	9.97	9.29	7.68	6.36
44	10.20	9.50	7.89	6.55
45	10.49	9.73	8.06	6.66
46	10.76	9.98	8.25	6.81
47	11.07	10.27	8.49	7.03
48	11.47	10.62	8.78	7.27
49	11.87	11.00	9.08	7.49
50	12.33	11.41	9.45	7.84
51	12.83	11.83	9.80	8.12
52	13.26	12.27	10.14	8.39
53	13.71	12.67	10.51	8.70
54	14.08	13.12	10.83	8.93
55	14.53	13.55	11.18	9.23
56	14.96	13.99	11.53	9.49
57	15.43	14.45	11.87	9.76
58	15.89	14.91	12.21	10.01
59	16.42	15.35	12.56	10.27
60	16.94	15.84	12.91	10.51
61	17.52	16.35	13.27	10.77
62	18.10	16.87	13.66	11.07
63	18.68	17.39	14.06	11.40
64	19.32	17.91	14.48	11.71
65	19.97	18.44	14.91	12.03
66	20.65	19.01	15.34	12.39
67	21.34	19.64	15.83	12.75
68	22.11	20.34	16.36	13.15
69	22.98	21.11	16.95	13.62
70	23.85	21.94	17.58	14.11
71	24.71	22.71	18.19	14.56
72	25.51	23.45	18.76	15.00
73	26.20	24.09	19.28	15.42
74	26.83	24.66	19.74	15.80
75	27.44	25.26	20.22	16.19
76	28.10	25.86	20.70	16.55
77	28.89	26.60	21.31	17.07
78	29.80	27.42	21.99	17.62
79	30.77	28.33	22.71	18.21
80	31.84	29.28	23.50	18.86
81	32.92	30.29	24.33	19.54
82	34.16	31.38	25.20	20.26
83	35.40	32.50	26.14	21.02
84	36.74	33.70	27.14	21.85

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  
 R25387-44-5

Date: 09/12/2022

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	23.90	22.52	18.46	15.12
40	25.27	23.90	19.57	15.98
41	25.95	24.44	20.09	16.51
42	26.51	25.02	20.60	16.92
43	27.20	25.66	21.09	17.34
44	27.92	26.34	21.69	17.84
45	28.66	27.06	22.32	18.46
46	29.53	27.84	23.04	19.05
47	30.36	28.66	23.66	19.53
48	31.25	29.48	24.36	20.11
49	32.29	30.37	25.15	20.78
50	33.28	31.31	25.87	21.35
51	34.27	32.18	26.57	21.98
52	35.17	32.93	27.19	22.44
53	35.97	33.54	27.66	22.77
54	36.58	33.90	27.98	23.08
55	37.21	34.37	28.33	23.32
56	37.84	34.82	28.66	23.57
57	38.77	35.46	29.12	23.91
58	39.85	36.35	29.84	24.52
59	41.09	37.35	30.63	25.09
60	42.43	38.41	31.44	25.73
61	43.79	39.63	32.38	26.45
62	45.15	40.85	33.29	27.19
63	46.62	42.16	34.27	27.84
64	48.14	43.64	35.33	28.66
65	49.65	45.06	36.39	29.40
66	51.31	46.63	37.60	30.25
67	52.94	48.20	38.81	31.27
68	54.67	49.80	40.17	32.44
69	56.58	51.50	41.63	33.66
70	58.40	53.20	43.06	34.88
71	60.34	54.97	44.53	36.09
72	62.14	56.71	46.00	37.33
73	63.95	58.34	47.36	38.45
74	65.67	59.88	48.65	39.52
75	67.46	61.53	50.02	40.62
76	69.26	63.31	51.39	41.77
77	71.14	65.25	52.90	42.92
78	73.11	67.44	54.55	44.17
79	75.15	69.69	56.26	45.46
80	77.33	72.19	58.10	46.74
81	79.68	74.87	60.06	48.20
82	82.08	77.62	62.17	49.76
83	84.69	80.63	64.40	51.39
84	87.43	83.68	66.63	53.07

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  
 R25387-44-5

Date: 09/12/2022

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 -- 1 YEAR**

Issue Age	ELIMINATION PERIODS			
	0 Day	20 Day	100 Day	365 Day
18-39	3.05	2.86	2.52	2.19
40	3.34	3.10	2.67	2.32
41	3.41	3.17	2.75	2.38
42	3.50	3.27	2.81	2.41
43	3.63	3.36	2.92	2.53
44	3.71	3.44	2.96	2.57
45	3.82	3.53	3.06	2.66
46	3.94	3.68	3.13	2.67
47	4.07	3.80	3.25	2.81
48	4.20	3.97	3.39	2.88
49	4.37	4.11	3.47	2.95
50	4.55	4.30	3.63	3.06
51	4.69	4.48	3.75	3.15
52	4.88	4.66	3.90	3.24
53	5.06	4.84	4.02	3.34
54	5.25	5.00	4.19	3.50
55	5.42	5.15	4.27	3.55
56	5.60	5.35	4.45	3.70
57	5.81	5.53	4.62	3.84
58	6.01	5.74	4.74	3.92
59	6.24	5.94	4.91	4.05
60	6.51	6.18	5.09	4.19
61	6.73	6.39	5.25	4.31
62	7.04	6.66	5.47	4.49
63	7.34	6.95	5.71	4.69
64	7.65	7.19	5.93	4.88
65	7.97	7.48	6.17	5.08
66	8.35	7.82	6.44	5.31
67	8.72	8.13	6.70	5.52
68	9.14	8.52	6.97	5.71
69	9.61	8.94	7.28	5.94
70	10.08	9.37	7.60	6.16
71	10.55	9.79	7.89	6.36
72	10.99	10.19	8.22	6.62
73	11.34	10.53	8.49	6.87
74	11.66	10.81	8.76	7.09
75	11.95	11.11	9.00	7.31
76	12.32	11.41	9.24	7.49
77	12.71	11.81	9.56	7.74
78	13.13	12.21	9.85	7.96
79	13.64	12.68	10.22	8.25
80	14.16	13.16	10.58	8.49
81	14.71	13.70	10.97	8.80
82	15.32	14.25	11.39	9.09
83	15.95	14.86	11.83	9.43
84	16.61	15.51	12.32	9.78

TO OBTAIN QUARTERLY, SEMIANNUAL, AND ANNUAL PREMIUMS, MULTIPLY THE ABOVE QUOTED PREMIUMS BY 3, 6, AND 12, RESPECTIVELY. THE MONTHLY PREMIUMS FOR SERVICE PLAN AND PAYROLL DEDUCTION ISSUES ARE THE PREMIUMS LISTED ABOVE  
 R25387-44-5



Date: 09/12/2022

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	4.36	4.20	3.62	3.11
40	4.72	4.55	3.91	3.36
41	4.84	4.65	3.98	3.41
42	4.99	4.79	4.13	3.56
43	5.13	4.91	4.21	3.62
44	5.28	5.03	4.33	3.71
45	5.45	5.18	4.44	3.82
46	5.59	5.35	4.55	3.87
47	5.78	5.49	4.66	3.97
48	5.95	5.66	4.79	4.05
49	6.11	5.86	4.94	4.16
50	6.36	6.04	5.08	4.28
51	6.56	6.24	5.25	4.42
52	6.78	6.45	5.43	4.57
53	7.03	6.67	5.61	4.73
54	7.26	6.91	5.78	4.84
55	7.53	7.16	6.00	5.03
56	7.85	7.41	6.23	5.25
57	8.18	7.70	6.44	5.38
58	8.54	8.00	6.70	5.61
59	8.94	8.34	6.97	5.83
60	9.37	8.70	7.24	6.03
61	9.81	9.06	7.53	6.26
62	10.22	9.44	7.79	6.44
63	10.61	9.80	8.03	6.58
64	10.99	10.16	8.28	6.74
65	11.39	10.53	8.54	6.91
66	11.83	10.96	8.83	7.09
67	12.39	11.46	9.22	7.42
68	13.12	12.08	9.73	7.83
69	13.95	12.80	10.36	8.36
70	14.83	13.55	10.99	8.91
71	15.63	14.28	11.59	9.41
72	16.35	14.87	12.12	9.89
73	16.87	15.37	12.54	10.21
74	17.27	15.77	12.90	10.55
75	17.62	16.12	13.21	10.84
76	17.98	16.49	13.52	11.08
77	18.43	16.93	13.85	11.35
78	18.92	17.40	14.23	11.66
79	19.44	17.88	14.62	11.95
80	19.99	18.42	15.03	12.27
81	20.57	18.96	15.44	12.57
82	21.19	19.52	15.85	12.87
83	21.83	20.12	16.31	13.20
84	22.48	20.74	16.79	13.60

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  
 R25387-44-5

Date: 09/12/2022

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 -- 3 YEARS**

Issue Age	ELIMINATION PERIODS			
	0 Day	20 Day	100 Day	365 Day
18-39	5.51	5.13	4.34	3.68
40	6.03	5.58	4.77	4.08
41	6.16	5.72	4.89	4.19
42	6.34	5.88	5.01	4.27
43	6.51	6.00	5.13	4.37
44	6.62	6.15	5.20	4.42
45	6.78	6.29	5.35	4.55
46	6.95	6.44	5.43	4.60
47	7.14	6.59	5.58	4.72
48	7.39	6.84	5.75	4.84
49	7.62	7.07	5.93	4.99
50	7.96	7.36	6.12	5.09
51	8.23	7.65	6.33	5.24
52	8.55	7.93	6.58	5.45
53	8.91	8.20	6.80	5.64
54	9.21	8.49	7.04	5.83
55	9.51	8.76	7.26	6.01
56	9.85	9.08	7.50	6.20
57	10.21	9.39	7.79	6.46
58	10.58	9.75	8.05	6.63
59	10.94	10.12	8.35	6.88
60	11.33	10.50	8.65	7.13
61	11.74	10.87	8.95	7.38
62	12.11	11.23	9.24	7.61
63	12.49	11.53	9.52	7.87
64	12.85	11.83	9.78	8.07
65	13.21	12.12	10.01	8.26
66	13.58	12.46	10.29	8.49
67	14.02	12.86	10.59	8.71
68	14.51	13.37	10.99	9.03
69	15.13	14.00	11.45	9.34
70	15.77	14.64	11.89	9.66
71	16.34	15.20	12.32	9.96
72	16.77	15.67	12.66	10.22
73	17.01	15.92	12.85	10.37
74	17.06	15.97	12.90	10.43
75	17.09	16.03	12.91	10.39
76	17.21	16.17	13.01	10.48
77	17.56	16.46	13.26	10.70
78	18.09	16.93	13.67	11.05
79	18.83	17.55	14.21	11.48
80	19.63	18.27	14.81	12.00
81	20.59	19.07	15.49	12.58
82	21.68	20.01	16.29	13.26
83	22.88	21.03	17.18	14.04
84	24.22	22.19	18.15	14.86

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.

Date: 09/12/2022

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 -- 5 YEARS**

Issue Age	ELIMINATION PERIODS			
	0 Day	20 Day	100 Day	365 Day
18-39	7.93	7.45	6.36	5.43
40	8.60	8.08	6.84	5.77
41	8.83	8.32	7.01	5.89
42	9.05	8.52	7.16	6.01
43	9.28	8.74	7.30	6.10
44	9.47	8.93	7.49	6.28
45	9.76	9.16	7.67	6.41
46	10.01	9.40	7.83	6.52
47	10.30	9.63	8.06	6.74
48	10.68	9.97	8.36	7.01
49	11.07	10.33	8.62	7.18
50	11.47	10.73	8.97	7.49
51	11.95	11.16	9.28	7.72
52	12.35	11.53	9.63	8.07
53	12.75	11.89	9.97	8.36
54	13.12	12.32	10.29	8.60
55	13.53	12.73	10.64	8.88
56	13.95	13.15	10.94	9.10
57	14.36	13.56	11.27	9.35
58	14.80	14.00	11.58	9.57
59	15.28	14.45	11.95	9.87
60	15.75	14.91	12.25	10.08
61	16.29	15.39	12.61	10.36
62	16.86	15.86	12.96	10.61
63	17.39	16.35	13.35	10.91
64	17.98	16.84	13.75	11.23
65	18.59	17.33	14.13	11.53
66	19.19	17.86	14.56	11.87
67	19.86	18.46	15.03	12.23
68	20.58	19.12	15.55	12.63
69	21.39	19.86	16.11	13.07
70	22.20	20.59	16.71	13.55
71	22.99	21.34	17.27	13.95
72	23.72	22.03	17.80	14.37
73	24.37	22.63	18.32	14.82
74	24.94	23.21	18.76	15.16
75	25.54	23.73	19.19	15.52
76	26.12	24.33	19.66	15.89
77	26.89	25.01	20.23	16.36
78	27.73	25.79	20.90	16.92
79	28.64	26.61	21.56	17.47
80	29.60	27.50	22.30	18.08
81	30.65	28.45	23.10	18.76
82	31.77	29.49	23.93	19.43
83	32.96	30.56	24.83	20.18
84	34.18	31.69	25.77	20.95

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.  
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Date: 09/12/2022

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	22.43	21.43	17.69	14.66
40	23.77	22.71	18.78	15.52
41	24.40	23.26	19.26	15.97
42	24.93	23.70	19.77	16.43
43	25.61	24.36	20.26	16.88
44	26.25	25.02	20.82	17.30
45	26.97	25.73	21.43	17.83
46	27.77	26.49	22.09	18.41
47	28.55	27.20	22.71	18.96
48	29.40	28.02	23.39	19.53
49	30.37	28.87	24.11	20.11
50	31.27	29.74	24.85	20.73
51	32.25	30.57	25.50	21.27
52	33.08	31.27	26.08	21.75
53	33.82	31.82	26.57	22.21
54	34.38	32.23	26.83	22.32
55	34.99	32.65	27.19	22.62
56	35.63	33.08	27.53	22.92
57	36.39	33.70	27.98	23.17
58	37.45	34.54	28.66	23.79
59	38.64	35.51	29.40	24.36
60	39.90	36.50	30.15	24.93
61	41.21	37.66	31.06	25.62
62	42.50	38.79	31.97	26.30
63	43.87	40.05	32.86	26.97
64	45.27	41.43	33.90	27.77
65	46.70	42.83	34.91	28.46
66	48.24	44.31	36.09	29.40
67	49.76	45.79	37.21	30.23
68	51.49	47.36	38.57	31.39
69	53.19	48.93	39.97	32.60
70	54.97	50.61	41.33	33.80
71	56.71	52.21	42.74	34.99
72	58.47	53.83	44.17	36.15
73	60.14	55.43	45.46	37.22
74	61.76	56.89	46.70	38.28
75	63.43	58.47	47.98	39.43
76	65.14	60.17	49.33	40.46
77	66.90	61.96	50.77	41.62
78	68.78	64.06	52.33	42.74
79	70.67	66.22	54.01	44.00
80	72.73	68.60	55.76	45.27
81	74.94	71.14	57.66	46.74
82	77.19	73.79	59.65	48.24
83	79.68	76.61	61.76	49.87
84	82.23	79.52	63.97	51.49

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: 09/12/2022

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	2.55	2.40	2.08	1.80
40	2.78	2.59	2.25	1.97
41	2.84	2.64	2.30	2.01
42	2.95	2.73	2.37	2.06
43	3.03	2.81	2.44	2.12
44	3.10	2.88	2.48	2.13
45	3.19	2.96	2.55	2.20
46	3.32	3.06	2.63	2.25
47	3.39	3.18	2.71	2.30
48	3.53	3.29	2.83	2.44
49	3.65	3.44	2.90	2.46
50	3.79	3.58	3.04	2.59
51	3.93	3.73	3.13	2.64
52	4.07	3.90	3.24	2.71
53	4.22	4.02	3.35	2.81
54	4.37	4.19	3.48	2.92
55	4.51	4.31	3.57	2.95
56	4.69	4.48	3.71	3.10
57	4.85	4.63	3.82	3.17
58	5.03	4.79	3.97	3.27
59	5.22	4.96	4.11	3.41
60	5.43	5.15	4.26	3.53
61	5.61	5.35	4.40	3.61
62	5.86	5.57	4.57	3.76
63	6.12	5.78	4.78	3.94
64	6.39	6.00	4.94	4.07
65	6.66	6.26	5.15	4.26
66	6.98	6.51	5.37	4.44
67	7.27	6.80	5.60	4.62
68	7.64	7.10	5.86	4.80
69	8.03	7.45	6.09	4.99
70	8.42	7.82	6.36	5.17
71	8.81	8.19	6.59	5.31
72	9.20	8.51	6.85	5.52
73	9.46	8.78	7.09	5.71
74	9.74	9.01	7.31	5.90
75	9.99	9.28	7.50	6.07
76	10.29	9.53	7.72	6.24
77	10.60	9.85	7.97	6.45
78	10.96	10.19	8.23	6.66
79	11.37	10.59	8.54	6.87
80	11.82	11.01	8.83	7.09
81	12.27	11.45	9.16	7.34
82	12.79	11.91	9.52	7.61
83	13.33	12.40	9.89	7.89
84	13.88	12.93	10.29	8.18

TO OBTAIN QUARTERLY, SEMIANNUAL, AND ANNUAL PREMIUMS,  
 MULTIPLY THE ABOVE QUOTED PREMIUMS BY 3, 6, AND 12,  
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MUTUAL OF OMAHA INSURANCE COMPANY  
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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	3.70	3.57	3.07	2.66
40	3.99	3.85	3.32	2.88
41	4.09	3.93	3.39	2.92
42	4.24	4.05	3.50	3.03
43	4.34	4.16	3.57	3.06
44	4.49	4.27	3.65	3.13
45	4.60	4.40	3.75	3.21
46	4.73	4.51	3.86	3.32
47	4.89	4.66	3.97	3.36
48	5.03	4.80	4.07	3.46
49	5.20	4.95	4.19	3.53
50	5.40	5.13	4.31	3.62
51	5.57	5.30	4.45	3.75
52	5.75	5.47	4.62	3.90
53	5.95	5.66	4.77	3.99
54	6.15	5.86	4.91	4.13
55	6.39	6.05	5.09	4.28
56	6.66	6.29	5.28	4.42
57	6.92	6.51	5.47	4.60
58	7.25	6.80	5.69	4.77
59	7.60	7.09	5.93	4.94
60	7.94	7.38	6.15	5.13
61	8.32	7.68	6.38	5.30
62	8.66	8.00	6.61	5.46
63	9.00	8.30	6.82	5.61
64	9.32	8.62	7.03	5.74
65	9.64	8.94	7.25	5.87
66	10.04	9.29	7.49	6.04
67	10.51	9.70	7.82	6.29
68	11.12	10.24	8.26	6.68
69	11.83	10.87	8.76	7.09
70	12.57	11.50	9.32	7.55
71	13.27	12.08	9.83	8.00
72	13.87	12.62	10.26	8.35
73	14.29	13.02	10.62	8.66
74	14.64	13.37	10.94	8.95
75	14.94	13.67	11.20	9.20
76	15.25	13.99	11.46	9.41
77	15.62	14.35	11.75	9.63
78	16.03	14.75	12.08	9.89
79	16.49	15.17	12.39	10.12
80	16.96	15.62	12.75	10.39
81	17.44	16.07	13.09	10.67
82	17.96	16.56	13.44	10.91
83	18.50	17.07	13.82	11.19
84	19.07	17.58	14.23	11.52

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  
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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 -- 3 YEARS**

Issue Age	Elimination Periods			
	0 Day	20 Day	100 Day	365 Day
18-39	4.73	4.40	3.75	3.18
40	5.17	4.80	4.09	3.48
41	5.30	4.92	4.21	3.61
42	5.46	5.06	4.31	3.68
43	5.58	5.17	4.42	3.78
44	5.71	5.29	4.48	3.79
45	5.83	5.40	4.60	3.92
46	5.98	5.52	4.67	3.97
47	6.15	5.67	4.80	4.07
48	6.34	5.88	4.95	4.16
49	6.56	6.09	5.11	4.28
50	6.84	6.32	5.28	4.38
51	7.09	6.58	5.46	4.53
52	7.38	6.81	5.65	4.69
53	7.64	7.07	5.83	4.82
54	7.90	7.31	6.07	5.02
55	8.18	7.56	6.24	5.15
56	8.47	7.82	6.47	5.37
57	8.77	8.08	6.69	5.54
58	9.08	8.37	6.92	5.72
59	9.43	8.71	7.19	5.93
60	9.75	9.03	7.45	6.15
61	10.08	9.37	7.70	6.33
62	10.43	9.64	7.96	6.58
63	10.74	9.93	8.18	6.74
64	11.06	10.19	8.41	6.95
65	11.37	10.44	8.62	7.10
66	11.68	10.72	8.86	7.32
67	12.06	11.06	9.12	7.53
68	12.50	11.52	9.44	7.74
69	13.01	12.03	9.83	8.03
70	13.56	12.61	10.22	8.30
71	14.02	13.08	10.59	8.57
72	14.42	13.48	10.89	8.80
73	14.64	13.70	11.06	8.93
74	14.68	13.77	11.08	8.93
75	14.71	13.79	11.12	8.98
76	14.80	13.89	11.19	9.03
77	15.09	14.14	11.42	9.22
78	15.58	14.57	11.76	9.50
79	16.19	15.09	12.21	9.87
80	16.89	15.69	12.75	10.36
81	17.71	16.41	13.31	10.81
82	18.66	17.21	14.01	11.41
83	19.67	18.10	14.79	12.08
84	20.82	19.08	15.62	12.79

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.  
 R25387-44-5

Date: 09/12/2022

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	6.97	6.61	5.60	4.78
40	7.57	7.16	6.01	5.06
41	7.80	7.32	6.17	5.22
42	8.00	7.54	6.33	5.32
43	8.20	7.72	6.44	5.41
44	8.37	7.89	6.62	5.57
45	8.63	8.08	6.76	5.64
46	8.83	8.28	6.92	5.77
47	9.09	8.52	7.13	5.97
48	9.43	8.83	7.37	6.16
49	9.75	9.14	7.60	6.33
50	10.13	9.47	7.93	6.63
51	10.53	9.83	8.22	6.87
52	10.91	10.20	8.52	7.10
53	11.27	10.53	8.80	7.36
54	11.57	10.88	9.08	7.59
55	11.93	11.23	9.40	7.84
56	12.29	11.60	9.67	8.06
57	12.68	11.97	9.96	8.28
58	13.07	12.37	10.24	8.48
59	13.49	12.77	10.51	8.68
60	13.92	13.15	10.81	8.89
61	14.39	13.58	11.12	9.10
62	14.88	14.00	11.43	9.33
63	15.35	14.42	11.80	9.63
64	15.88	14.86	12.12	9.89
65	16.42	15.31	12.49	10.20
66	16.95	15.79	12.86	10.49
67	17.55	16.31	13.26	10.78
68	18.19	16.88	13.71	11.13
69	18.86	17.52	14.22	11.56
70	19.61	18.20	14.75	11.95
71	20.30	18.85	15.22	12.29
72	20.95	19.46	15.72	12.69
73	21.54	19.99	16.14	13.04
74	22.03	20.47	16.54	13.36
75	22.54	20.98	16.93	13.67
76	23.07	21.48	17.35	14.02
77	23.73	22.09	17.86	14.45
78	24.49	22.76	18.44	14.93
79	25.29	23.51	19.03	15.42
80	26.14	24.27	19.70	15.98
81	27.07	25.13	20.41	16.59
82	28.06	26.03	21.15	17.18
83	29.10	26.98	21.91	17.80
84	30.19	27.98	22.75	18.50

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.  
 R25387-44-5



Date: 09/12/2022

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	20.33	19.38	16.02	13.26
40	21.47	20.54	17.03	14.14
41	22.09	21.03	17.48	14.51
42	22.62	21.49	17.84	14.84
43	23.17	22.09	18.32	15.23
44	23.70	22.64	18.84	15.65
45	24.40	23.28	19.42	16.14
46	25.13	23.95	20.01	16.71
47	25.87	24.64	20.54	17.10
48	26.57	25.35	21.13	17.61
49	27.53	26.10	21.81	18.28
50	28.33	26.94	22.44	18.75
51	29.16	27.66	23.08	19.26
52	29.93	28.33	23.58	19.67
53	30.63	28.82	24.04	20.05
54	31.16	29.19	24.30	20.24
55	31.63	29.53	24.60	20.50
56	32.23	29.93	24.87	20.69
57	32.98	30.55	25.30	20.96
58	33.90	31.31	25.95	21.49
59	34.99	32.12	26.62	22.07
60	36.09	33.06	27.31	22.59
61	37.33	34.03	28.17	23.26
62	38.47	35.13	28.95	23.80
63	39.73	36.26	29.74	24.41
64	41.00	37.54	30.70	25.13
65	42.30	38.79	31.62	25.77
66	43.67	40.13	32.65	26.57
67	45.06	41.48	33.70	27.38
68	46.57	42.89	34.90	28.40
69	48.14	44.31	36.14	29.48
70	49.74	45.76	37.43	30.63
71	51.31	47.25	38.69	31.70
72	52.90	48.78	39.93	32.69
73	54.43	50.17	41.14	33.70
74	55.91	51.50	42.30	34.68
75	57.42	52.90	43.45	35.70
76	58.97	54.43	44.65	36.64
77	60.55	56.13	45.90	37.60
78	62.26	57.96	47.44	38.79
79	63.97	59.94	48.88	39.86
80	65.78	62.10	50.47	41.00
81	67.81	64.40	52.24	42.35
82	69.88	66.76	54.02	43.67
83	72.11	69.32	55.91	45.14
84	74.43	71.93	57.90	46.57

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.  
 R25387-44-5

Date: 09/12/2022

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	0.85	0.81	0.75	0.70
40	0.87	0.82	0.77	0.70
41	0.90	0.86	0.79	0.73
42	0.94	0.88	0.81	0.74
43	0.99	0.93	0.85	0.75
44	1.02	0.97	0.86	0.77
45	1.06	1.00	0.88	0.77
46	1.11	1.06	0.93	0.82
47	1.17	1.10	0.97	0.85
48	1.23	1.16	1.00	0.87
49	1.29	1.22	1.06	0.92
50	1.37	1.29	1.10	0.93
51	1.45	1.37	1.16	0.99
52	1.55	1.45	1.22	1.03
53	1.65	1.55	1.29	1.08
54	1.74	1.65	1.37	1.15
55	1.86	1.73	1.45	1.22
56	1.98	1.84	1.57	1.32
57	2.13	1.97	1.67	1.43
58	2.30	2.12	1.79	1.51
59	2.47	2.27	1.94	1.62
60	2.66	2.46	2.08	1.74
61	2.92	2.66	2.25	1.90
62	3.19	2.93	2.44	2.04
63	3.53	3.24	2.67	2.23
64	3.91	3.61	2.93	2.38
65	4.34	3.97	3.19	2.57
66	4.82	4.40	3.53	2.82
67	5.35	4.89	3.90	3.10
68	5.93	5.40	4.30	3.42
69	6.53	5.93	4.73	3.78
70	7.20	6.51	5.20	4.16
71	7.96	7.16	5.75	4.62
72	8.78	7.91	6.38	5.14
73	9.73	8.77	7.09	5.71
74	10.76	9.73	7.87	6.36
75	11.88	10.76	8.70	7.04
76	13.06	11.88	9.61	7.78
77	14.33	13.04	10.58	8.55
78	15.67	14.29	11.59	9.38
79	17.11	15.61	12.68	10.29
80	18.61	17.00	13.79	11.19
81	20.21	18.46	15.00	12.17
82	21.86	19.99	16.25	13.21
83	23.62	21.61	17.57	14.29
84	25.46	23.28	18.96	15.44

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 .  
 R25388-44-5

Date: 09/12/2022

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	1.06	1.02	0.88	0.77
40	1.10	1.06	0.92	0.79
41	1.15	1.09	0.96	0.85
42	1.21	1.14	0.99	0.87
43	1.26	1.19	1.03	0.90
44	1.32	1.25	1.06	0.92
45	1.39	1.31	1.10	0.93
46	1.46	1.38	1.15	0.96
47	1.57	1.45	1.21	1.00
48	1.65	1.55	1.28	1.04
49	1.74	1.65	1.36	1.10
50	1.84	1.73	1.43	1.17
51	1.96	1.84	1.52	1.26
52	2.09	1.97	1.65	1.37
53	2.26	2.12	1.77	1.48
54	2.44	2.27	1.90	1.59
55	2.63	2.44	2.06	1.73
56	2.86	2.64	2.24	1.90
57	3.11	2.88	2.44	2.06
58	3.40	3.12	2.64	2.23
59	3.69	3.40	2.88	2.44
60	4.04	3.70	3.12	2.64
61	4.43	4.07	3.42	2.88
62	4.91	4.49	3.75	3.13
63	5.46	5.00	4.13	3.41
64	6.07	5.57	4.51	3.68
65	6.73	6.17	4.96	3.99
66	7.50	6.87	5.49	4.37
67	8.40	7.67	6.10	4.85
68	9.38	8.54	6.80	5.42
69	10.48	9.50	7.60	6.07
70	11.68	10.54	8.47	6.81
71	12.97	11.69	9.41	7.60
72	14.36	12.93	10.44	8.43
73	15.84	14.28	11.54	9.34
74	17.38	15.71	12.71	10.29
75	19.02	17.25	13.95	11.30
76	20.81	18.92	15.31	12.39
77	22.75	20.72	16.77	13.58
78	24.85	22.66	18.37	14.88
79	27.10	24.73	20.06	16.27
80	29.50	26.93	21.85	17.73
81	32.04	29.26	23.79	19.32
82	34.71	31.73	25.80	20.98
83	37.55	34.33	27.93	22.70
84	40.51	37.05	30.15	24.54

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: 09/12/2022

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	1.31	1.21	1.00	0.85
40	1.36	1.25	1.04	0.87
41	1.43	1.29	1.08	0.90
42	1.48	1.36	1.14	0.93
43	1.57	1.43	1.17	0.97
44	1.65	1.50	1.23	1.03
45	1.72	1.59	1.28	1.04
46	1.82	1.67	1.36	1.10
47	1.94	1.77	1.43	1.15
48	2.03	1.88	1.51	1.22
49	2.17	1.98	1.61	1.31
50	2.30	2.11	1.69	1.37
51	2.46	2.25	1.80	1.44
52	2.63	2.41	1.94	1.57
53	2.83	2.59	2.08	1.68
54	3.04	2.78	2.25	1.82
55	3.27	2.99	2.42	1.96
56	3.53	3.24	2.61	2.12
57	3.85	3.53	2.86	2.31
58	4.20	3.84	3.10	2.52
59	4.56	4.19	3.36	2.70
60	4.99	4.57	3.68	2.95
61	5.47	5.02	4.04	3.24
62	6.05	5.57	4.44	3.55
63	6.73	6.15	4.92	3.97
64	7.43	6.76	5.47	4.42
65	8.25	7.48	6.07	4.91
66	9.17	8.29	6.73	5.46
67	10.25	9.27	7.48	6.04
68	11.45	10.37	8.28	6.61
69	12.77	11.60	9.15	7.21
70	14.21	12.97	10.09	7.85
71	15.80	14.44	11.16	8.62
72	17.52	16.04	12.34	9.50
73	19.41	17.79	13.70	10.55
74	21.47	19.65	15.19	11.74
75	23.64	21.65	16.78	13.01
76	25.94	23.73	18.49	14.39
77	28.39	25.92	20.24	15.81
78	30.95	28.19	22.07	17.28
79	33.67	30.56	24.01	18.85
80	36.51	33.03	25.99	20.45
81	39.47	35.60	28.07	22.12
82	42.59	38.26	30.25	23.90
83	45.81	41.02	32.50	25.75
84	49.20	43.90	34.82	27.64

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: 09/12/2022

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	1.73	1.60	1.28	1.03
40	1.78	1.65	1.33	1.09
41	1.86	1.74	1.37	1.09
42	1.97	1.83	1.44	1.14
43	2.04	1.91	1.50	1.19
44	2.15	2.01	1.59	1.25
45	2.29	2.13	1.68	1.33
46	2.42	2.24	1.78	1.43
47	2.57	2.38	1.89	1.50
48	2.73	2.53	2.01	1.60
49	2.89	2.69	2.13	1.69
50	3.09	2.84	2.26	1.82
51	3.30	3.04	2.42	1.94
52	3.55	3.28	2.61	2.08
53	3.82	3.53	2.82	2.26
54	4.13	3.82	3.06	2.44
55	4.46	4.13	3.33	2.69
56	4.84	4.49	3.61	2.90
57	5.28	4.89	3.94	3.18
58	5.72	5.32	4.28	3.44
59	6.23	5.81	4.63	3.70
60	6.79	6.29	5.01	3.98
61	7.43	6.90	5.48	4.34
62	8.22	7.60	6.04	4.80
63	9.10	8.40	6.69	5.34
64	10.09	9.28	7.43	5.97
65	11.18	10.25	8.24	6.63
66	12.43	11.36	9.16	7.36
67	13.84	12.63	10.20	8.22
68	15.43	14.05	11.33	9.14
69	17.15	15.57	12.54	10.09
70	19.02	17.27	13.88	11.17
71	21.08	19.14	15.35	12.35
72	23.34	21.18	16.99	13.60
73	25.82	23.45	18.74	14.99
74	28.50	25.87	20.63	16.46
75	31.36	28.50	22.66	18.04
76	34.39	31.28	24.85	19.74
77	37.61	34.21	27.15	21.55
78	40.99	37.30	29.60	23.50
79	44.56	40.57	32.17	25.53
80	48.30	44.00	34.88	27.68
81	52.25	47.57	37.75	29.95
82	56.35	51.33	40.73	32.32
83	60.63	55.24	43.86	34.84
84	65.09	59.31	47.11	37.43

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.

R25388-44-5

Date: 09/12/2022

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	4.42	4.23	3.30	2.60
40	4.61	4.38	3.45	2.72
41	4.87	4.61	3.62	2.84
42	5.10	4.87	3.82	3.03
43	5.41	5.17	4.05	3.20
44	5.77	5.51	4.38	3.41
45	6.22	5.94	4.68	3.71
46	6.64	6.36	5.03	4.00
47	7.07	6.79	5.40	4.28
48	7.60	7.22	5.74	4.54
49	8.15	7.71	6.12	4.88
50	8.68	8.17	6.50	5.17
51	9.29	8.66	6.91	5.51
52	9.91	9.19	7.37	5.88
53	10.53	9.71	7.81	6.26
54	11.03	10.23	8.21	6.64
55	11.67	10.72	8.68	7.07
56	12.40	11.34	9.28	7.53
57	13.33	12.19	9.91	8.05
58	14.39	13.14	10.65	8.66
59	15.57	14.17	11.44	9.19
60	16.92	15.33	12.31	9.91
61	18.50	16.71	13.42	10.76
62	20.40	18.43	14.72	11.75
63	22.59	20.40	16.27	13.02
64	25.00	22.62	18.05	14.39
65	27.70	25.09	20.09	16.06
66	30.65	27.84	22.29	17.80
67	33.96	30.86	24.64	19.67
68	37.60	34.16	27.20	21.68
69	41.47	37.73	29.91	23.69
70	45.66	41.59	32.84	25.95
71	50.22	45.76	36.09	28.45
72	55.23	50.36	39.63	31.18
73	60.67	55.41	43.56	34.18
74	66.49	60.75	47.71	37.50
75	72.73	66.49	52.25	41.09
76	79.37	72.66	57.07	44.81
77	86.36	79.27	62.26	48.93
78	93.80	86.35	67.81	53.28
79	101.59	93.81	73.71	57.94
80	109.78	101.74	79.93	62.80
81	118.42	110.13	86.52	67.97
82	127.40	118.86	93.43	73.40
83	136.78	128.11	100.65	79.10
84	146.61	137.75	108.24	85.04

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: 09/12/2022

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	1.26	1.21	1.11	1.04
40	1.31	1.23	1.15	1.08
41	1.36	1.26	1.17	1.09
42	1.38	1.32	1.21	1.09
43	1.43	1.36	1.22	1.11
44	1.48	1.38	1.25	1.14
45	1.52	1.43	1.29	1.17
46	1.59	1.48	1.31	1.16
47	1.66	1.55	1.36	1.19
48	1.74	1.65	1.43	1.22
49	1.84	1.73	1.48	1.26
50	1.94	1.83	1.55	1.32
51	2.04	1.94	1.65	1.38
52	2.15	2.03	1.72	1.43
53	2.24	2.11	1.79	1.51
54	2.35	2.19	1.86	1.57
55	2.44	2.30	1.94	1.61
56	2.54	2.37	2.01	1.68
57	2.67	2.47	2.08	1.75
58	2.78	2.59	2.17	1.82
59	2.93	2.69	2.27	1.94
60	3.06	2.81	2.37	1.98
61	3.19	2.95	2.46	2.06
62	3.36	3.07	2.57	2.15
63	3.51	3.22	2.66	2.20
64	3.68	3.34	2.73	2.24
65	3.82	3.53	2.84	2.30
66	4.01	3.69	2.95	2.34
67	4.24	3.87	3.10	2.46
68	4.50	4.11	3.27	2.60
69	4.80	4.37	3.48	2.78
70	5.14	4.65	3.75	3.03
71	5.46	4.92	3.98	3.22
72	5.75	5.17	4.19	3.36
73	5.95	5.37	4.36	3.53
74	6.15	5.57	4.48	3.62
75	6.30	5.72	4.62	3.73
76	6.51	5.89	4.77	3.84
77	6.69	6.09	4.92	3.98
78	6.95	6.29	5.11	4.15
79	7.16	6.53	5.29	4.27
80	7.42	6.78	5.49	4.45
81	7.67	7.02	5.71	4.66
82	7.96	7.28	5.93	4.84
83	8.25	7.55	6.15	5.01
84	8.55	7.84	6.39	5.20

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 .

Date: 09/12/2022

MUTUAL OF OMAHA INSURANCE COMPANY  
 SCHEDULE OF MONTHLY RATES FOR RIDER FORM ODX6M

PER \$10 DAILY CONFINED CARE BENEFIT

**BENEFIT -- 2 YEARS**

Issue Age	ELIMINATION PERIODS			
	0 Day	20 day	100 Day	365 Day
18-39	2.04	1.95	1.69	1.48
40	2.11	2.01	1.75	1.52
41	2.18	2.08	1.80	1.57
42	2.26	2.15	1.86	1.62
43	2.35	2.23	1.91	1.65
44	2.44	2.30	1.96	1.67
45	2.53	2.40	2.02	1.72
46	2.66	2.48	2.08	1.73
47	2.76	2.60	2.15	1.77
48	2.88	2.70	2.25	1.88
49	3.00	2.82	2.35	1.96
50	3.13	2.96	2.46	2.04
51	3.29	3.10	2.59	2.15
52	3.46	3.24	2.70	2.25
53	3.62	3.41	2.84	2.37
54	3.82	3.57	3.00	2.53
55	4.04	3.75	3.17	2.66
56	4.22	3.94	3.32	2.78
57	4.48	4.13	3.50	2.96
58	4.69	4.34	3.68	3.10
59	4.96	4.55	3.84	3.24
60	5.20	4.78	4.04	3.41
61	5.49	5.02	4.20	3.51
62	5.78	5.29	4.40	3.68
63	6.07	5.54	4.57	3.78
64	6.36	5.81	4.77	3.90
65	6.67	6.11	4.92	3.97
66	7.02	6.44	5.13	4.09
67	7.43	6.80	5.42	4.31
68	7.96	7.26	5.78	4.60
69	8.55	7.77	6.22	4.96
70	9.20	8.32	6.67	5.35
71	9.80	8.83	7.11	5.72
72	10.31	9.28	7.49	6.04
73	10.67	9.63	7.77	6.27
74	10.95	9.89	8.00	6.47
75	11.19	10.14	8.20	6.63
76	11.46	10.43	8.42	6.80
77	11.82	10.76	8.71	7.05
78	12.27	11.18	9.05	7.33
79	12.78	11.66	9.45	7.67
80	13.33	12.17	9.87	8.03
81	13.92	12.73	10.32	8.37
82	14.58	13.33	10.82	8.77
83	15.29	13.95	11.37	9.27
84	16.03	14.64	11.92	9.70

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: 09/12/2022

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	2.95	2.67	2.23	1.86
40	3.04	2.77	2.30	1.90
41	3.12	2.88	2.38	1.98
42	3.24	2.96	2.46	2.03
43	3.33	3.06	2.53	2.09
44	3.44	3.17	2.59	2.09
45	3.56	3.24	2.66	2.18
46	3.68	3.35	2.75	2.25
47	3.80	3.48	2.83	2.30
48	3.97	3.62	2.93	2.37
49	4.11	3.76	3.04	2.44
50	4.30	3.93	3.17	2.55
51	4.48	4.09	3.32	2.67
52	4.69	4.28	3.46	2.77
53	4.86	4.48	3.61	2.89
54	5.08	4.63	3.75	3.04
55	5.31	4.84	3.92	3.17
56	5.57	5.06	4.11	3.35
57	5.81	5.29	4.30	3.50
58	6.09	5.57	4.50	3.64
59	6.38	5.83	4.72	3.82
60	6.70	6.15	4.94	3.97
61	7.02	6.46	5.17	4.14
62	7.39	6.80	5.43	4.36
63	7.76	7.11	5.71	4.59
64	8.18	7.45	6.00	4.85
65	8.59	7.78	6.30	5.11
66	9.05	8.18	6.66	5.40
67	9.56	8.64	6.98	5.65
68	10.18	9.21	7.38	5.93
69	10.87	9.86	7.79	6.16
70	11.59	10.58	8.25	6.44
71	12.32	11.25	8.69	6.70
72	12.95	11.85	9.12	7.02
73	13.50	12.35	9.51	7.32
74	13.99	12.83	9.89	7.62
75	14.47	13.26	10.26	7.96
76	14.97	13.70	10.65	8.28
77	15.55	14.21	11.08	8.65
78	16.20	14.75	11.54	9.03
79	16.89	15.33	12.03	9.44
80	17.63	15.95	12.55	9.87
81	18.42	16.60	13.12	10.36
82	19.23	17.28	13.65	10.79
83	20.10	17.99	14.24	11.27
84	20.99	18.72	14.83	11.75

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: 09/12/2022

MUTUAL OF OMAHA INSURANCE COMPANY  
 SCHEDULE OF MONTHLY RATES FOR RIDER FORM ODX6M

PER \$10 DAILY CONFINED CARE BENEFIT

**BENEFIT -- 5 YEARS**

Issue Age	ELIMINATION PERIODS			
	0 Day	20 Day	100 Day	365 Day
18-39	4.21	3.91	3.17	2.54
40	4.33	4.04	3.21	2.54
41	4.46	4.15	3.30	2.63
42	4.62	4.28	3.41	2.69
43	4.78	4.44	3.51	2.78
44	4.95	4.61	3.64	2.89
45	5.17	4.77	3.78	3.01
46	5.32	4.96	3.91	3.09
47	5.57	5.14	4.09	3.24
48	5.77	5.34	4.24	3.35
49	6.00	5.57	4.40	3.50
50	6.23	5.76	4.57	3.64
51	6.49	6.00	4.78	3.81
52	6.78	6.26	4.97	3.97
53	7.08	6.55	5.22	4.15
54	7.41	6.84	5.48	4.40
55	7.73	7.18	5.75	4.61
56	8.09	7.50	6.04	4.86
57	8.46	7.85	6.33	5.08
58	8.83	8.20	6.61	5.32
59	9.23	8.54	6.86	5.51
60	9.63	8.93	7.14	5.70
61	10.08	9.34	7.43	5.90
62	10.56	9.80	7.76	6.15
63	11.10	10.24	8.16	6.52
64	11.66	10.73	8.60	6.87
65	12.28	11.27	9.03	7.24
66	12.92	11.81	9.53	7.70
67	13.66	12.43	10.03	8.09
68	14.45	13.15	10.60	8.53
69	15.33	13.95	11.23	9.08
70	16.26	14.76	11.87	9.56
71	17.15	15.56	12.49	10.01
72	17.97	16.29	13.07	10.47
73	18.67	16.92	13.55	10.85
74	19.28	17.51	13.98	11.16
75	19.87	18.05	14.39	11.47
76	20.50	18.62	14.79	11.75
77	21.21	19.30	15.31	12.15
78	21.99	20.01	15.86	12.60
79	22.83	20.76	16.48	13.07
80	23.72	21.59	17.15	13.59
81	24.65	22.46	17.81	14.13
82	25.64	23.34	18.53	14.71
83	26.67	24.31	19.30	15.31
84	27.77	25.29	20.11	16.00

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.

R25388-44-5

Date: 09/12/2022

MUTUAL OF OMAHA INSURANCE COMPANY  
 SCHEDULE DF MONTHLY RATES FOR RIDER FORM 0DX6M

PER \$10 DAILY CONFINED CARE BENEFIT

<b>BENEFITS -- LIFETIME</b>				
Issue Age	<b>ELIMINATION PERIODS</b>			
	<b>0 Day</b>	<b>20 Day</b>	<b>100 Day</b>	<b>365 Day</b>
18-39	11.45	10.85	8.46	6.58
40	11.71	11.12	8.66	6.76
41	12.06	11.45	8.99	7.07
42	12.47	11.85	9.30	7.37
43	12.93	12.34	9.76	7.71
44	13.55	12.96	10.24	8.13
45	14.17	13.64	10.76	8.49
46	14.84	14.25	11.30	8.99
47	15.52	14.84	11.80	9.37
48	16.14	15.45	12.28	9.76
49	16.88	15.97	12.69	10.09
50	17.54	16.48	13.16	10.50
51	18.21	16.99	13.56	10.85
52	18.81	17.42	13.98	11.23
53	19.24	17.73	14.28	11.51
54	19.57	18.02	14.57	11.75
55	19.79	18.21	14.80	12.05
56	20.21	18.52	15.11	12.31
57	20.73	18.96	15.46	12.61
58	21.37	19.48	15.87	12.93
59	22.11	20.11	16.35	13.26
60	23.02	20.86	16.81	13.55
61	23.99	21.75	17.37	13.89
62	25.05	22.62	18.07	14.48
63	26.23	23.77	18.96	15.12
64	27.53	24.93	19.91	15.97
65	28.95	26.25	21.00	16.80
66	30.48	27.66	22.11	17.69
67	32.11	29.16	23.28	18.58
68	33.81	30.76	24.51	19.43
69	35.74	32.54	25.77	20.47
70	37.67	34.37	27.19	21.49
71	39.58	36.09	28.42	22.37
72	41.26	37.67	29.61	23.26
73	42.62	38.95	30.63	24.04
74	43.83	40.05	31.50	24.72
75	44.92	41.14	32.29	25.30
76	46.09	42.21	33.20	26.10
77	47.48	43.57	34.29	26.97
78	49.08	45.22	35.52	27.92
79	50.85	46.92	36.88	28.95
80	52.73	48.81	38.35	30.14
81	54.64	50.84	39.90	31.38
82	56.71	52.94	41.59	32.65
83	58.92	55.26	43.36	34.03
84	61.24	57.66	45.26	35.52

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.

**MUTUAL OF OMAHA INSURANCE COMPANY**  
**INDIVIDUAL HOME HEALTH CARE POLICY FORMS HCA-19629 & HCA-20249**  
**ANNUAL PREMIUM RATES**

Age	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 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	584.84	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	2023 Increase Factor
1 year	0.55	1.200	1.000	1.000	1.000	1.210
2 year	0.80	1.200	1.000	1.000	1.000	1.210
3 year	1.00	1.200	1.000	1.000	1.000	1.210
5 year	1.25	1.200	1.100	1.000	1.000	1.210
Lifetime	1.45	1.300	1.200	1.300	1.150	1.360

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**

Per \$10 Daily Benefit

Per \$1 Gross Premium

Age	Home Health Care Rider Forms 0GH7M-44 & 0GH7M-44 Rev			Confined Care Policy Forms NHA-19630 & NHA-20250			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	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 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	2023 Increase Factor
1 year	0.55	1.200	1.000	1.000	1.000	1.210
2 year	0.80	1.200	1.000	1.000	1.000	1.210
3 year	1.00	1.200	1.000	1.000	1.000	1.210
5 year	1.25	1.200	1.100	1.000	1.000	1.210
Lifetime	1.45	1.300	1.200	1.300	1.150	1.360

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**

Age	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
	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	2023 Increase Factor
1 year	0.55	1.200	1.000	1.000	1.000	1.210
2 year	0.80	1.200	1.000	1.000	1.000	1.210
3 year	1.00	1.200	1.000	1.000	1.000	1.210
5 year	1.25	1.200	1.100	1.000	1.000	1.210
Lifetime	1.45	1.300	1.200	1.300	1.150	1.360

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

SERFF Tracking #:

MUTA-132676983

State Tracking #:

MUTA-132676983

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:

LT50 et al - 2021 Rate Increase

Project Name/Number:

LT50 et al - 2021/

## Supporting Document Schedules

<b>Bypassed - Item:</b>	Certification of Compliance/Readability
<b>Bypass Reason:</b>	not applicable - not a form filing
<b>Attachment(s):</b>	
<b>Item Status:</b>	
<b>Status Date:</b>	

<b>Satisfied - Item:</b>	Product Checklist
<b>Comments:</b>	
<b>Attachment(s):</b>	Long-Term-Care-Rate-Revision-Checklist - LT50 et al.pdf
<b>Item Status:</b>	Received & Acknowledged
<b>Status Date:</b>	09/13/2022

<b>Satisfied - Item:</b>	L&H Actuarial Memorandum
<b>Comments:</b>	
<b>Attachment(s):</b>	<p>Exhibit 3 - Rate Increase History (VA).pdf  Exhibits 4A-4C - Nationwide Historical Experience.pdf  Actuarial Certification - Legacy (VA).pdf  Exhibit 1 - Benefit Summary.pdf  Exhibit 3 - Rate Increase History (all states).pdf  LTC Rate Increase Template (LT50 et al).pdf  Supplementary Info (LT50 et al).pdf  Attachment 1 - Covered Lives and Claim Counts (VA).pdf  Attachment 2 - Distribution.pdf  Attachment 3 - Original Pricing Assumptions.pdf  Exhibits 7A-C - Nationwide Dual Loss Ratio Test.pdf  Exhibit 8 - Side-by-Side Comparison (HCA et al).pdf  Attachment 5 - Premium Notification Letter (Mutual)-VA.pdf  Attachment 4 - Assumption Comparison.pdf  Exhibits 5A-5C - Nationwide Lifetime Experience Projection-revised.pdf  Exhibits 6A-6C - Virginia Lifetime Experience Projection-revised.pdf  Actuarial Memorandum - Legacy (VA)-revised.pdf  Exhibit 2 - Average Annual Premium (VA)-revised.pdf</p>
<b>Item Status:</b>	Received & Acknowledged
<b>Status Date:</b>	09/13/2022

<b>Satisfied - Item:</b>	Long Term Care Insurance Rate Request Summary
<b>Comments:</b>	
<b>Attachment(s):</b>	<p>VA LTC Rate Increase Summary.pdf  LTCi Rate Request Summary (LT50 et al)-revised.pdf</p>

SERFF Tracking #:

MUTA-132676983

State Tracking #:

MUTA-132676983

Company Tracking #:

LAFOND

**State:** Virginia  
**TOI/Sub-TOI:** LTC03I Individual Long Term Care/LTC03I.003 Other  
**Product Name:** LT50 et al - 2021 Rate Increase  
**Project Name/Number:** LT50 et al - 2021/  
**Filing Company:** Mutual of Omaha Insurance Company

<b>Item Status:</b>	Received & Acknowledged
<b>Status Date:</b>	09/13/2022

<b>Satisfied - Item:</b>	Exhibits for 10/29/2021 Response (Objection 1)
<b>Comments:</b>	
<b>Attachment(s):</b>	Rates - LT50 (VA - current).pdf Rates - 0DX5M (VA - current).pdf Rates - NH50 (VA - current).pdf Rates - 0DX6M (VA - current).pdf
<b>Item Status:</b>	Received & Acknowledged
<b>Status Date:</b>	09/13/2022

<b>Satisfied - Item:</b>	Exhibits for 10/29/2021 Response (Objection 2)
<b>Comments:</b>	
<b>Attachment(s):</b>	Exhibits 4A-4C - Nationwide Historical Experience (Excel).xlsx Exhibits 5A-5C - Nationwide Lifetime Experience Projection (Excel).xlsx
<b>Item Status:</b>	Received & Acknowledged
<b>Status Date:</b>	09/13/2022

<b>Satisfied - Item:</b>	Exhibits for 10/29/2021 Response (Objection 4)
<b>Comments:</b>	
<b>Attachment(s):</b>	Attachments 1A-1C - National Projections at Virginia Rate Level (EXCEL).xlsx Attachments 1A-1C - National Projections at Virginia Rate Level.pdf Attachments 2A-2C - Projections (proposed VA rates since day 1) - (EXCEL).xlsx Attachments 2A-2C - Projections (proposed VA rates since day 1).pdf Attachments 3A-3C - 60-80 Test (EXCEL).xlsx Attachments 3A-3C - 60-80 Test.pdf Attachment 4 - Rate Increase History (EXCEL).xlsx Attachment 4 - Rate Increase History.pdf Attachment 5 - Original Pricing Assumptions.pdf
<b>Item Status:</b>	Received & Acknowledged
<b>Status Date:</b>	09/13/2022

<b>Satisfied - Item:</b>	Exhibits for 01/20/2022 Response
<b>Comments:</b>	



SERFF Tracking #:

MUTA-132676983

State Tracking #:

MUTA-132676983

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:** LT50 et al - 2021 Rate Increase  
**Project Name/Number:** LT50 et al - 2021/

<b>Attachment(s):</b>	Attachment 1A - Current Rates.pdf Attachment 1A - Current Rates.xlsx Attachment 1B - Proposed Rates.pdf Attachment 1B - Proposed Rates.xlsx Attachment 1C - Proposed VA Rates Day 1.pdf Attachment 5 - Increase by Assumption.xlsx Attachment 2 - Mortality.pdf Attachment 1C - Proposed VA Rates Day 1.xlsx Attachment 1E - Original Pricing.pdf Attachment 1E - Original Pricing.xlsx Attachment 2 - Mortality.xlsx Attachment 4 - Incurred Claims.xlsx Attachment 3 - Lapse.pdf Attachment 3 - Lapse.xlsx Attachment 4 - Incurred Claims.pdf Attachment 5 - Increase by Assumption.pdf
<b>Item Status:</b>	Received & Acknowledged
<b>Status Date:</b>	09/13/2022
<b>Satisfied - Item:</b>	Exhibits for 03/25/2020 Response
<b>Comments:</b>	
<b>Attachment(s):</b>	Attachment 1C - Proposed VA Rates Day 1 - rev.pdf Attachment 1C - Proposed VA Rates Day 1 - rev.xlsx
<b>Item Status:</b>	Received & Acknowledged
<b>Status Date:</b>	09/13/2022
<b>Satisfied - Item:</b>	Exhibit for 05/13/2022 Response
<b>Comments:</b>	
<b>Attachment(s):</b>	Legacy Attachment J.pdf
<b>Item Status:</b>	Received & Acknowledged
<b>Status Date:</b>	09/13/2022
<b>Satisfied - Item:</b>	Exhibit for 06/24/2022 Response (Objection 1)
<b>Comments:</b>	
<b>Attachment(s):</b>	Attachment 1 - Current and Previous Assumption Projections (Active Premium-Paying Policies) VA.pdf Attachment 1 - Current and Previous Assumption Projections (Active Premium-Paying Policies) VA.xlsx
<b>Item Status:</b>	Received & Acknowledged
<b>Status Date:</b>	09/13/2022
<b>Satisfied - Item:</b>	Exhibits for 06/24/2022 Response (Objection 2)
<b>Comments:</b>	

**SERFF Tracking #:**

MUTA-132676983

**State Tracking #:**

MUTA-132676983

**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:**

LT50 et al - 2021 Rate Increase

**Project Name/Number:**

LT50 et al - 2021/

<b>Attachment(s):</b>	Attachment 2 - Morbidity Assumption Description.pdf Attachment 3 - Morbidity AE Table.pdf Attachment 3 - Morbidity AE Table.xlsx Attachment 4 - Morbidity Assumptions.pdf Attachment 4 - Morbidity Assumptions.xlsx
<b>Item Status:</b>	Received & Acknowledged
<b>Status Date:</b>	09/13/2022
<b>Satisfied - Item:</b>	Exhibits for 09/12/2022 Response
<b>Comments:</b>	
<b>Attachment(s):</b>	Cover Letter (VA - LT50 et al).pdf
<b>Item Status:</b>	Received & Acknowledged
<b>Status Date:</b>	09/13/2022

State:

Virginia

Filing Company:

Mutual of Omaha Insurance Company

TOI/Sub-TOI:

LTC03I Individual Long Term Care/LTC03I.003 Other

Product Name:

LT50 et al - 2021 Rate Increase

Project Name/Number:

LT50 et al - 2021/

***Attachment Exhibits 4A-4C - Nationwide Historical Experience (Excel).xlsx is not a PDF document and cannot be reproduced here.***

***Attachment Exhibits 5A-5C - Nationwide Lifetime Experience Projection (Excel).xlsx is not a PDF document and cannot be reproduced here.***

***Attachment Attachments 1A-1C - National Projections at Virginia Rate Level (EXCEL).xlsx is not a PDF document and cannot be reproduced here.***

***Attachment Attachments 2A-2C - Projections (proposed VA rates since day 1) - (EXCEL).xlsx is not a PDF document and cannot be reproduced here.***

***Attachment Attachments 3A-3C - 60-80 Test (EXCEL).xlsx is not a PDF document and cannot be reproduced here.***

***Attachment Attachment 4 - Rate Increase History (EXCEL).xlsx is not a PDF document and cannot be reproduced here.***

***Attachment Attachment 1A - Current Rates.xlsx is not a PDF document and cannot be reproduced here.***

***Attachment Attachment 1B - Proposed Rates.xlsx is not a PDF document and cannot be reproduced here.***

***Attachment Attachment 5 - Increase by Assumption.xlsx is not a PDF document and cannot be reproduced here.***

***Attachment Attachment 1C - Proposed VA Rates Day 1.xlsx is not a PDF document and cannot be reproduced here.***

***Attachment Attachment 1E - Original Pricing.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:

LT50 et al - 2021 Rate Increase

Project Name/Number:

LT50 et al - 2021/

***Attachment Attachment 2 - Mortality.xlsx is not a PDF document and cannot be reproduced here.***

***Attachment Attachment 4 - Incurred Claims.xlsx is not a PDF document and cannot be reproduced here.***

***Attachment Attachment 3 - Lapse.xlsx is not a PDF document and cannot be reproduced here.***

***Attachment Attachment 1C - Proposed VA Rates Day 1 - rev.xlsx is not a PDF document and cannot be reproduced here.***

***Attachment Attachment 1 - Current and Previous Assumption Projections (Active Premium-Paying Policies) VA.xlsx is not a PDF document and cannot be reproduced here.***

***Attachment Attachment 3 - Morbidity AE Table.xlsx is not a PDF document and cannot be reproduced here.***

***Attachment Attachment 4 - Morbidity Assumptions.xlsx is not a PDF document and cannot be reproduced here.***

Review Requirements Checklist  
 FOR REVISION TO LONG-TERM CARE INSURANCE (LTCI) RATES

**NOTE: This document is intended to assist carriers in preparing LTCI rate increase filings for review and approval by the Bureau of Insurance. It provides guidance based on current Virginia laws and regulations. It should be noted, however, that this checklist should not be used exclusive of other important resources, including, but not limited to, any and all other applicable state insurance laws and associated rules and regulations. Note that some regulatory references in the Comments column are approximate. It is the responsibility of the carriers to verify that their products comply with all relevant statutory and regulatory requirements.**

REVIEW REQUIREMENTS	REFERENCES	COMMENTS	FILER'S NOTES
Source of Filing	14 VAC 5-101-40	Filings shall be submitted in SERFF. Third-party filing authorization must be included.	not applicable
	14VAC5-101-50 C 1	Filing description must include the type of insurance form, including a description of the form and the market for which the form is intended; and intentions to concentrate on a specialized market should be noted.	not applicable - not a form filing
	14VAC5-101-50 C 2	Filing description must include the form number of each form that is being filed.	not applicable - not a form filing
General Information Filing Description	14VAC5-101-50 C 3	Filing description must state whether submitted form is new, or if replacing, revising, or modifying a previously approved form, the exact changes that are intended.	not applicable - not a form filing
	14VAC5-101-50 C 4	Filing description must identify any change in benefits and indicate whether the change affects premium rates for the form.	not applicable - not changing benefits
	14VAC5-101-50 C 5	Filing description must state if approval of a form submitted has been withdrawn by another regulatory body and the reasons for such a withdrawal.	not applicable - not a form filing

Review Requirements Checklist  
FOR REVISION TO LONG-TERM CARE INSURANCE (LTCI) RATES

REVIEW REQUIREMENTS	REFERENCES	COMMENTS	FILER'S NOTES
	14VAC5-101-50 F	Any form filed that is to be used with a previously approved form, including an application, shall identify the form number, approval date, and SERFF or state tracking number in the new filing.	not applicable - not a form filing
	14VAC5-101-50 G	Any amendment, endorsement, or rider that intends to revise a previously approved form shall be accompanied by the previously approved form filed as supporting documentation.	not applicable - not a form filing
Form Number	14VAC5-101-60 1	Form Number must appear in the lower left-hand corner of the first page of the form. It shall consist of numbers, letters, or a combination of both. The form number shall distinguish the form from all other forms used by the company.	not applicable - not a form filing
Company Name and Address	14VAC5-101-60 2	Full and proper name (including "Inc.") must appear prominently on first page or cover sheet of all forms. Home office address must be included on first page of any policy, application, or enrollment form.	not applicable - not a form filing
Marketing Name or Logo	14VAC5-101-60 3	A marketing name or logo also may be used on the form, provided that the marketing name or logo does not mislead as to the identity of the company.	not applicable - not a form filing
	14VAC5-101-60 4	The cover page of a policy also shall include the address of an office that will administer the policy if different from the home office, a company telephone number, and company website address.	not applicable - not a form filing
Final Form	14VAC5-101-60 5	Form must be submitted in "final form" and in "John Doe fashion" to indicate its intended use.	not applicable - not a form filing
Electronic Version	14VAC5-101-60 6	Each form that is to be used in an electronic version shall be filed in a format that matches the electronic version exactly.	not applicable - not a form filing
Readability	14VAC5-101-70 A	Each form submitted for review or approval shall be written in simplified language, logically and clearly arranged, and printed in a legible format.	not applicable - not a form filing

Review Requirements Checklist  
FOR REVISION TO LONG-TERM CARE INSURANCE (LTCI) RATES

REVIEW REQUIREMENTS	REFERENCES	COMMENTS	FILER'S NOTES
	14VAC5-101-70 C	Defined words and terms shall be placed in a separate definition section that is clearly identified, unless only used in one section.	not applicable - not a form filing
Type Size	14VAC5-101-70 E	Any form submitted for review or approval shall be printed in at least 10-point type size.	not applicable - not a form filing
	14VAC5-101-70 F	Any policy shall achieve a minimum Flesch reading ease score of 50 or an equivalent score using another comparable test, unless otherwise specified by statute, or an exception requested pursuant to 14 VAC 5-101-70 G.	not applicable - not a form filing
Variability	14VAC5-101-80	<p>A. Use of variable bracketed information shall be limited. All variable information shall be clear, easily understood and fully explain each use of the variable language.</p> <p>B. Administrative information, such as officer names, titles and signatures, contact information, or company logo may be presented as variable bracketed text.</p> <p>C. Different types of benefits may be variable only for inclusion or exclusion within the form. The use of brackets within brackets is not permitted, except when variability is necessary to identify a period of time or other numeric value.</p> <p>D. Each instance of variable text shall appear in brackets on a form and shall be separately and completely explained in detail in a Statement of Variability document. Each explanation of variability shall appear in the same order that it appears on the form.</p> <p>E. Requests for revisions to a Statement of Variability contained in a previously approved filing shall be accomplished by notification in the original filing.</p>	not applicable - not a form filing

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FOR REVISION TO LONG-TERM CARE INSURANCE (LTCI) RATES

REVIEW REQUIREMENTS	REFERENCE	COMMENTS	FILER'S NOTES
Filing a Rate Revision	14 VAC 5-130-70 A	(i) New rate sheet;	Rate/Rule Schedule tab
		(ii) All information required by SERFF.	all information required by SERFF is included
	14 VAC 5-130-70 B	Actuarial Memorandum	included in Supporting Documentation tab
	14VAC5-130-70 B 1	A description of the type of policy, including benefits, renewability, issue age limits, and if applicable, whether the policy includes grandfathered, non-grandfathered plans, or both.	Actuarial Memorandum - Section 2 (page 1)
	14VAC5-130-70 B 2	The scope and reason for the premium or rate revision.	Actuarial Memorandum - Sections 2 and 3 (page 1)
	14VAC5-130-70 B 3	A comparison of the revised premiums with the current premium scale, including all percentage rate changes and any rating factor changes.	Actuarial Memorandum - Exhibit 8
	14VAC5-130-70 B 4	A statement of whether the revision applies only to new business, only to in-force business, or to both.	Actuarial Memorandum - Section 2 (page 1)
	14VAC5-130-70 B 5	The estimated average annual premium per policy and per member, before and after the proposed rate revision. If different changes by rating classification are requested, the filing also must include: (i) Range of changes; and (ii) Average overall change, including a detailed explanation of how the change was determined.	Actuarial Memorandum - Exhibit 2
	14VAC5-130-70 B 6	<i>The following is applicable to all coverage with the exception of coverage issued in the small group market:</i> (i) Projections for future experience, and Virginia and national historical experience of earned premiums, paid claims, incurred claims and loss from inception through most recent quarter. Virginia and national experience should be shown separately. Missing experience should be estimated with all estimation assumptions and methodologies provided in detail; (ii) A statement of the basis for determining the rate revision (Virginia, national, or blended); and	Actuarial Memorandum - Exhibits 5A-C (nationwide experience); Exhibits 6A-C (Virginia experience)



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REVIEW REQUIREMENTS	REFERENCE	COMMENTS	FILER'S NOTES
		(iii) If blended, provide the credibility factor assigned to the national experience.	
	14VAC5-130-70 B 7	Details and dates of all past rate revisions, including annual rate revisions members will experience resulting from this filing. If a company only revises rates annually, the rate revision must be identical to the current submission. If a company has had more frequent rate revisions, the annual revision must reflect the compounding impact of all revisions for the past 12 months.	Actuarial Memorandum - Exhibit 3
	14VAC5-130-70 B 8	A description of how revised rates were determined, including the general description and source of each assumption of Form 130-A. For claims, provide historical and projected claims by major service category for both cost and utilization on Form 130-B.	Actuarial Memorandum - Section 3 (page 1)
	14VAC5-130-70 B 9	If the rate revision applies to new business, provide the anticipated loss ratio and a description of how it was calculated.	not applicable
	14VAC5-130-70 B 10	If the rate revision applies to in-force business provide: (a) The anticipated loss ratio and a description of how it was calculated; and (b) The estimated cumulative loss ratio, historical and anticipated, and a description of how it was calculated.	Actuarial Memorandum - Exhibits 5A-C (nationwide experience)
	14VAC5-130-70 B 11	The loss ratio that was originally anticipated for the policy.	Actuarial Memorandum - Section 7 (page 3)
	14VAC5-130-70 B 12	If 9, 10a, or 10b is less than 11, supporting documentation for the use of such premiums or rates.	not applicable
	14VAC5-130-70 B 13	The current number of Virginia and national members to which the revision applies for the most recent month for which such data is available, and either premiums in force, premiums earned, or premiums collected for such	Actuarial Memorandum - Exhibit 2

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REVIEW REQUIREMENTS	REFERENCE	COMMENTS	FILER'S NOTES
		members in the year immediately prior to the filing of the rate revision.	
	14VAC5-130-70 B 14	Certification by a qualified actuary that, to the best of the actuary's knowledge and judgment, the rate filing is in compliance with applicable laws and regulations of this Commonwealth and the premiums are reasonable in relation to the benefits provided.	Actuarial Memorandum - Attachment A
Policyholder Letter Review	14VAC5-200-75 A	Other than policies for which no applicable premium rate or rate schedule increases can be made, insurers shall provide all of the information listed in this subsection to the applicant at the time of application or enrollment, unless the method of application does not allow for delivery at that time. In such a case, an insurer shall provide all the information listed in this section to the applicant no later than at the time of delivery of the policy or certificate.	Not applicable - forms included in this filing are no longer available for sale.
	14VAC5-200-75 A 1	A statement that the policy may be subject to rate increases in the future;	Included in Attachment 5 - Sample Notification Letter
	14VAC5-200-75 A 2	An explanation of potential future premium rate revisions, and the policyholder's or certificateholder's option in the event of a premium rate revision;	Included in Attachment 5 - Sample Notification Letter
	14VAC5-200-75 A 3	The premium rate or rate schedules applicable to the applicant that will be in effect until a request is made for an increase;	Included in Attachment 5 - Sample Notification Letter
	14VAC5-200-75 A 4	A general explanation for applying premium rate or rate schedule adjustments that shall include: a. A description of when premium rate or rate schedule adjustments will be effective (e.g., next anniversary date, next billing date, etc.); and b. The right to a revised premium rate or rate schedule as provided in subdivision 2 of this subsection if the premium rate or rate schedule is changed;	Included in Attachment 5 - Sample Notification Letter

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REVIEW REQUIREMENTS	REFERENCE	COMMENTS	FILER'S NOTES
	14VAC5-200-75 D	An insurer shall provide notice of an upcoming premium rate schedule increase to all policyholders or certificate holders, if applicable, at least 75 days prior to the implementation of the premium rate schedule increase by the insurer. Such notice shall be filed with the commission at the time the premium rate increase is filed. The notice shall include at least the following information:	Policyholders will receive notification of a premium adjustment at least 75 days prior to the implementation of the increase, as required.
	14VAC5-200-75 D 1	All applicable information identified in subsection A of this section when the rate increase is implemented;	Included in Attachment 5 - Sample Notification Letter
Policyholder Options	14VAC5-200-75 D 2	A clear explanation of options available to the policyholder as alternatives to paying the increased premium amount, including: a. An offer to reduce policy benefits provided by the current coverage consistent with the requirements of 14VAC5-200-183; b. A disclosure stating that all options available to the policyholder may not be of equal value; c. 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; and d. Contact information that will allow the policyholder to contact the insurer for additional options available;	Included in Attachment 5 - Sample Notification Letter
	14VAC5-200-75 D 3	A clear identification of the driving factors of the premium rate increase; and	Included in Attachment 5 - Sample Notification Letter
	14VAC5-200-75 D 4	A statement substantially similar to the following: The 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	Included in Attachment 5 - Sample Notification Letter

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REVIEW REQUIREMENTS	REFERENCE	COMMENTS	FILER'S NOTES
		for public inspection and may be accessed online through the Virginia Bureau of Insurance's webpage at <a href="http://www.scc.virginia.gov/BOI">www.scc.virginia.gov/BOI</a> .	
Pre-Rate Stability	14VAC5-200-150 A	This section applies to any premium rate increase filed with the commission on or after September 1, 2015, for any long-term care insurance policy issued in this Commonwealth before October 1, 2003.	The forms included in this filing were priced and sold mainly prior to 10/01/2003
Reasonableness of Benefits	14VAC5-200-150 B	Benefits under individual long-term care insurance policies shall be deemed reasonable in relation to premiums provided 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, (ii) 75% applied to any premium rate increase on group policy forms.	Actuarial Memorandum - Exhibits 7A-C
		In evaluating the expected loss ratio, due consideration shall be given to all relevant factors, including:	
	14VAC5-200-150 B 1	Statistical credibility of incurred claims experience and earned premiums.	
	14VAC5-200-150 B 2	The period for which rates are computed to provide coverage.	
	14VAC5-200-150 B 3	Experienced and projected trends;	
	14VAC5-200-150 B 4	Concentration of experience within early policy duration;	
	14VAC5-200-150 B 5	Expected claim fluctuation;	
	14VAC5-200-150 B 6	Experience refunds, adjustments or dividends.	
	14VAC5-200-150 B 7	Renewability features;	
	14VAC5-200-150 B 8	All appropriate expense factors;	
	14VAC5-200-150 B 9	Interest;	
	14VAC5-200-150 B 10	Experimental nature of the coverage;	
	14VAC5-200-150 B 11	Policy reserves;	

Revision to Long-Term Care Insurance (LTCI) Rates Checklist  
Virginia 1<sup>st</sup> Edition July 2001  
Updated: October 2020

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FOR REVISION TO LONG-TERM CARE INSURANCE (LTCI) RATES

REVIEW REQUIREMENTS	REFERENCE	COMMENTS	FILER'S NOTES
	14VAC5-200-150 B 12	Mix of business by risk classification; and	Attachment 2 - Distribution
	14VAC5-200-150 B 13	Product features such a long elimination periods, high deductibles and high maximum limits.	<b>not applicable</b>
		Demonstrations of loss ratios shall be made in compliance with the Rules Governing the Filing of Rates for Individual and Certain Group Accident and Sickness Insurance Policy Forms, Chapter 130 (14 VAC 5-130) of this title. All present and accumulated values used to determine rate increases, including the lifetime loss ratio used in the original pricing, shall use the maximum valuation interest rate for contract reserves as specified in § 38.2-1371 of the Code of Virginia.	Actuarial Memorandum - Exhibits 5A-C
	14VAC5-200-150 C	Any insurer may request a series of scheduled rate increases that are actuarially equivalent to a single amount requested over the lifetime of the policy. The entire series mat be approved at one time as part of the current rate increase filing.	We are requesting a series of increases to mitigate the impact of the increase.
	14VAC5-200-150 D	As a condition of approval of a rate increase for a block of business for which the contingent benefit upon lapse is not otherwise required, a contingent benefit upon lapse provision will be required in accordance with 14VAC5-200-185 D. If the rate increase is approved in a series of scheduled rate increases and the sum of all scheduled rate increases will trigger the offering of a contingent benefit upon lapse, the insurer shall be required to include contingent benefit upon lapse at the time of each scheduled increase.	The contingent benefit upon lapse will be available to all policyholders, regardless if this benefit has been triggered.
	14VAC5-200-150 E	All submissions shall include information required by 14VAC5-200-75.	not applicable - forms no longer marketed
Long-Term Care Insurance Funded by Life Insurance	14VAC5-200-150 F	A life insurance policy that funds long-term care benefits entirely by accelerating the death benefit is considered to provide reasonable benefits in relation to	not applicable - not a life policy

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REVIEW REQUIREMENTS	REFERENCE	COMMENTS	FILER'S NOTES
		premiums paid, if the policy complies with all the following provisions:	not applicable - not a life policy
	14VAC5-200-150 F 1	The interest credited internally to determine cash value accumulations, including long term care, if any, are guaranteed not to be less than the minimum guaranteed interest rate for cash value accumulations without long-term care set forth in the policy;	not applicable - not a life policy
	14VAC5-200-150 F 2	The portion of the policy that provides life insurance benefits meets the nonforfeiture requirements of Chapter 32 (§ 38.2-3200 et seq.) of Title 38.2 of the Code of Virginia;	not applicable - not a life policy
	14VAC5-200-150 F 3	If an application for a long-term care insurance contract or certificate is approved, the issuer shall deliver the contract or certificate of insurance to the applicant no later than 30 days after the date of approval;	not applicable - not a life policy
	14VAC5-200-150 F 4	At the time of policy delivery, a policy summary shall be delivered for an individual life insurance policy that provides long-term care benefits within the policy or by rider. In the case of direct response solicitations, the insurer shall deliver the policy summary upon the applicant's request, but regardless of request shall make delivery no later than at the time of policy delivery. In addition to complying with all applicable requirements, the summary shall also include:	not applicable - not a life policy
		a. An explanation of how the long-term care benefit interacts with other components of the policy, including deductions from death benefits;	not applicable - not a life policy
		b. An illustration of the amount of benefits, the length of benefit, and the guaranteed lifetime benefits, if any, for each covered person;	not applicable - not a life policy
		c. Any exclusions, reductions and limitations on benefits of long-term care;	not applicable - not a life policy

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Virginia 1<sup>st</sup> Edition July 2001  
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REVIEW REQUIREMENTS	REFERENCE	COMMENTS	FILER'S NOTES
		d. A statement that any long-term care inflation protection option required by 14VAC5- 200-100 is not available under this policy;	not applicable - not a life policy
		e. If applicable to the policy type, the summary shall also include: (1) A disclosure of the effects of exercising other rights under the policy; (2) A disclosure of guarantees related to long-term care costs of insurance charges; and (3) Current and projected maximum lifetime benefits; and	not applicable - not a life policy
		f. The provisions of the policy summary listed above may be incorporated into a basic illustration or into the life insurance policy summary;	not applicable - not a life policy
	14VAC5-200-150 F 5	Any time a long-term care benefit, funded through a life insurance vehicle by the acceleration of the death benefit, is in benefit payment status, a monthly report shall be provided to the policyholder. The report shall include:	not applicable - not a life policy
		a. Any long-term care benefits paid out during the month;	not applicable - not a life policy
		b. An explanation of any changes in the policy (e.g., death benefits or cash values) due to long-term care benefits being paid out; and	not applicable - not a life policy
		c. The amount of long-term care benefits existing or remaining;	not applicable - not a life policy
	14VAC5-200-150 F 6	Any policy illustration that meets the applicable requirements of 14VAC5-41; and	not applicable - not a life policy
	14VAC5-200-150 F 7	An actuarial memorandum is filed with the Bureau of Insurance that includes:	not applicable - not a life policy
		a. A description of the basis on which the long-term care rates were determined;	not applicable - not a life policy
		b. A description of the basis for the reserves;	not applicable - not a life policy



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REVIEW REQUIREMENTS	REFERENCE	COMMENTS	FILER'S NOTES
		c. A summary of the type of policy, benefits, renewability, general marketing method, and limits on ages of issuance;	not applicable - not a life policy
		d. A description and a table of each actuarial assumption used. For expenses, an insurer must include percentage of premium dollars per policy and dollars per unit of benefits, if any;	not applicable - not a life policy
		e. A description and a table of the anticipated policy reserves and additional reserves to be held in each future year for active lives;	not applicable - not a life policy
		f. The estimated average annual premium per policy and the average issue age;	not applicable - not a life policy
		g. A statement as to whether underwriting is performed at the time of application. The statement shall indicate whether underwriting is used and, if used, the statement shall include a description of the type or types of underwriting used, such as medical underwriting or functional assessment underwriting. Concerning a group policy, the statement shall indicate whether the enrollee or any dependent will be underwritten and when underwriting occurs; and	not applicable - not a life policy
		h. A description of the effect of the long-term care policy provision on the required premiums, nonforfeiture values and reserves on the underlying life insurance policy, both for active lives and those in long-term care claim status.	not applicable - not a life policy
Post-Stability Policies	14VAC5-200-153 A	This section applies to any premium rate increase filed with the commission on or after September 1, 2015, for any long-term care insurance policy issued in this Commonwealth on or after October 1, 2003, but prior to September 1, 2015.	not applicable - the forms included in this filing were priced and sold mainly prior to 10/01/2003
	14VAC5-200-153 B	An insurer shall request the commission's approval of a pending premium rate schedule increase, including an	not applicable-not a post-rate stabilization filing



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REVIEW REQUIREMENTS	REFERENCE	COMMENTS	FILER'S NOTES
		exceptional increase, prior to the notice to the policyholders and shall include:	
	14VAC5-200-153 B 1	Information required by 14VAC5-200-75;	not applicable-not a post-rate stabilization filing
	14VAC5-200-153 B 2	Certification by a qualified actuary that:	not applicable-not a post-rate stabilization filing
		a. 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; and	not applicable-not a post-rate stabilization filing
		b. The premium rate filing is in compliance with the provisions of this section;	not applicable-not a post-rate stabilization filing
	14VAC5-200-153 B 3	An actuarial memorandum justifying the rate schedule change request that includes:	not applicable-not a post-rate stabilization filing
		a. Lifetime projections of earned premiums and incurred claims based on the filed premium rate schedule increase and the method and assumptions used in determining the projected values, including reflection of any assumptions that deviate from those used for pricing other forms currently available for sale;	not applicable-not a post-rate stabilization filing
		(1) Annual values for the five years preceding and the three years following the valuation date shall be provided separately;	not applicable-not a post-rate stabilization filing
		(2) The projections shall include the development of the lifetime loss ratio, unless the rate increase is an exceptional increase;	not applicable-not a post-rate stabilization filing
		(3) The projections shall demonstrate compliance with subsection C of this section; and	not applicable-not a post-rate stabilization filing
		(4) For exceptional increases,	not applicable-not a post-rate stabilization filing
		(a) The projected experience should be limited to the increases in claims expenses attributable to the approved reasons for the exceptional increase; and	not applicable-not a post-rate stabilization filing

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REVIEW REQUIREMENTS	REFERENCE	COMMENTS	FILER'S NOTES
		(b) In the event the commission determines as provided in the definition of exceptional increase in 14VAC5-200-40 that offsets may exist, the insurer shall use appropriate net projected experience;	not applicable-not a post-rate stabilization filing
		b. Disclosure of how reserves have been incorporated in this rate increase whenever the rate increase will trigger contingent benefit upon lapse;	not applicable-not a post-rate stabilization filing
		c. Disclosure of the analysis performed to determine why a rate adjustment is necessary, which pricing assumptions were not realized and why, and what other actions taken by the company have been relied on by the actuary;	not applicable-not a post-rate stabilization filing
		d. A statement that policy design, underwriting, and claims adjudication practices have been taken into consideration;	not applicable-not a post-rate stabilization filing
		e. If it is necessary to maintain consistent premium rates for new policies and policies receiving a rate increase, the insurer will need to file composite rates reflecting projections of new policies; and	not applicable-not a post-rate stabilization filing
		f. A demonstration that actual and projected costs exceed costs anticipated at the time of initial pricing under moderately adverse experience and that the composite margin is projected to be exhausted;	not applicable-not a post-rate stabilization filing
	14VAC5-200-153 B 4	A statement that renewal premium rate schedules are not greater than new business premium rate schedules except for differences attributable to benefits, unless sufficient justification is provided to the commission; and	not applicable-not a post-rate stabilization filing
	14VAC5-200-153 B 5	Sufficient information for review and approval of the premium rate schedule increase by the commission.	not applicable-not a post-rate stabilization filing
Series Rate Increases		An insurer may request a series of scheduled rate increases that are actuarially equivalent to a single amount requested over the lifetime of the policy. The	not applicable-not a post-rate stabilization filing

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REVIEW REQUIREMENTS	REFERENCE	COMMENTS	FILER'S NOTES
		entire series may be approved at one time as part of the current rate increase filing. The insurer shall be required to include contingent benefit upon lapse at the time of each scheduled increase.	
		The insurer may request a premium rate schedule increase less than what is required under this section and the commission may approve such premium rate schedule increase, without submission of the certification in subdivision 2 a of this subsection, if the actuarial memorandum discloses the premium rate schedule increase necessary to make such certification required, the premium rate schedule increase filing satisfies all other requirements of this section, and is, in the opinion of the commission, in the best interest of policyholders.	not applicable-not a post-rate stabilization filing
	14VAC5-200-153 C	All premium rate schedule increases shall be determined in accordance with the following requirements:	not applicable-not a post-rate stabilization filing
Exceptional Increases	14VAC5-200-153 C 1	Exceptional increases shall provide that 70% of the present value of projected additional premiums from the exceptional increase will be returned to policyholders in benefits;	not applicable-not a post-rate stabilization filing
	14VAC5-200-153 C 2	Premium rate schedule increases shall be calculated such that the sum of the accumulated value of incurred claims, without the inclusion of active life reserves, and the present value of future projected incurred claims, without the inclusion of active life reserves, will not be less than the sum of the following:	not applicable-not a post-rate stabilization filing
		a. The accumulated value of the initial earned premium times 58%;	not applicable-not a post-rate stabilization filing
		b. 85% of the accumulated value of prior premium rate schedule increases on an earned basis;	not applicable-not a post-rate stabilization filing
		c. The present value of future projected initial earned premiums times 58%; and	not applicable-not a post-rate stabilization filing

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REVIEW REQUIREMENTS	REFERENCE	COMMENTS	FILER'S NOTES
		d. 85% of the present value of future projected premiums not in subdivision 2 c of this subsection on an earned basis;	not applicable-not a post-rate stabilization filing
	14VAC5-200-153 C 3	In the event that a policy form has both exceptional and other increases, the values in subdivisions 2 b and d of this subsection will also include 70% for exceptional rate increase amounts; and	not applicable-not a post-rate stabilization filing
	14VAC5-200-153 C 4	All present and accumulated values used to determine rate increases shall use the maximum valuation interest rate for contract reserves as specified in § 38.2-1371 of the Code of Virginia. The actuary shall disclose as part of the actuarial memorandum the use of any appropriate averages.	not applicable-not a post-rate stabilization filing
	14VAC5-200-153 D	For each rate increase that is implemented, the insurer shall file for approval by the commission updated projections, as defined in subdivision B 3 a of this section, annually for the next three years and include a comparison of actual results to projected values. The commission may extend the period to greater than three years if actual results are not consistent with projected values from prior projections. For group insurance policies that meet the conditions in subsection K of this section, the projections required by subdivision B 3 a of this section shall be provided to the policyholder in lieu of filing with the commission.	not applicable-not a post-rate stabilization filing
	14VAC5-200-153 E	If any increased premium rate in the revised premium rate schedule is greater than 200% of the comparable rate in the initial premium schedule, the premiums exceeding 200% shall be clearly identified and lifetime projections, as defined in subdivision B 3 a of this section, shall be filed for approval by the commission every five years following the end of the required period in subsection D of	not applicable-not a post-rate stabilization filing

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REVIEW REQUIREMENTS	REFERENCE	COMMENTS	FILER'S NOTES
		this section. For group insurance policies that meet the conditions in subsection K of this section, the projections required by this subsection shall be provided to the policyholder in lieu of filing with the commission.	
Premium Rate Increases for Policies Issued After September 1, 2015.	14VAC5-200-154 A	An insurer shall request the commission's approval of a pending premium rate schedule increase, including an exceptional increase, prior to the notice to the policyholders and shall include:	not applicable-forms not issued after 09/01/2015
	14VAC5-200-154 A 1	Information required by 14VAC5-200-75;	not applicable-forms not issued after 09/01/2015
	14VAC5-200-154 A 2	Certification by a qualified actuary that:	not applicable-forms not issued after 09/01/2015
		a. 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; and	not applicable-forms not issued after 09/01/2015
		b. The premium rate filing is in compliance with the provisions of this section;	not applicable-forms not issued after 09/01/2015
	14VAC5-200-154 A 3	An actuarial memorandum justifying the rate schedule change request that includes:	not applicable-forms not issued after 09/01/2015
		a. Lifetime projections of earned premiums and incurred claims based on the filed premium rate schedule increase and the method and assumptions used in determining the projected values, including reflection of any assumptions that deviate from those used for pricing other forms currently available for sale;	not applicable-forms not issued after 09/01/2015
		(1) Annual values for the five years preceding and the three years following the valuation date shall be provided separately;	not applicable-forms not issued after 09/01/2015
		(2) The projections shall include the development of the lifetime loss ratio, unless the rate increase is an exceptional increase;	not applicable-forms not issued after 09/01/2015

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REVIEW REQUIREMENTS	REFERENCE	COMMENTS	FILER'S NOTES
		(3) The projections shall demonstrate compliance with subsection B of this section; and	not applicable-forms not issued after 09/01/2015
		(4) For exceptional increases:	not applicable-forms not issued after 09/01/2015
		(a) The projected experience should be limited to the increases in claims expenses attributable to the approved reasons for the exceptional increase; and	not applicable-forms not issued after 09/01/2015
		(b) In the event the commission determines as provided in the definition of exceptional increase in 14VAC5-200-40 that offsets may exist, the insurer shall use appropriate net projected experience;	not applicable-forms not issued after 09/01/2015
		b. Disclosure of how reserves have been incorporated in this rate increase whenever the rate increase will trigger contingent benefit upon lapse;	not applicable-forms not issued after 09/01/2015
		c. Disclosure of the analysis performed to determine why a rate adjustment is necessary, which pricing assumptions were not realized and why, and what other actions taken by the company have been relied on by the actuary;	not applicable-forms not issued after 09/01/2015
		d. A statement that policy design, underwriting, and claims adjudication practices have been taken into consideration;	not applicable-forms not issued after 09/01/2015
		e. In the event that it is necessary to maintain consistent premium rates for new policies and policies receiving a rate increase, the insurer will need to file composite rates reflecting projections of new policies; and	not applicable-forms not issued after 09/01/2015
		f. A demonstration that actual and projected costs exceed costs anticipated at the time of initial pricing under moderately adverse experience and that the composite margin is projected to be exhausted;	not applicable-forms not issued after 09/01/2015
	14VAC5-200-154 A 4	A statement that renewal premium rate schedules are not greater than new business premium rate schedules	not applicable-forms not issued after 09/01/2015

Review Requirements Checklist  
FOR REVISION TO LONG-TERM CARE INSURANCE (LTCI) RATES

REVIEW REQUIREMENTS	REFERENCE	COMMENTS	FILER'S NOTES
		except for differences attributable to benefits, unless sufficient justification is provided to the commission; and	not applicable-forms not issued after 09/01/2015
	14VAC5-200-154 A 5	Sufficient information for review and approval of the premium rate schedule increase by the commission.	not applicable-forms not issued after 09/01/2015
	14VAC5-200-154 B	All premium rate schedule increases shall be determined in accordance with the following requirements:	not applicable-forms not issued after 09/01/2015
Exceptional Increases	14VAC5-200-154 B 1	Exceptional increases shall provide that 70% of the present value of projected additional premiums from the exceptional increase will be returned to policyholders in benefits;	not applicable-forms not issued after 09/01/2015
	14VAC5-200-154 B 2	Premium rate schedule increases shall be calculated such that the sum of the lesser of (i) the accumulated value of actual incurred claims, without the inclusion of active life reserves, or (ii) the accumulated value of historic expected claims without the inclusion of active life reserves, plus the present value of the future expected incurred claims, projected without the inclusion of actual life reserves, will not be less than the sum of the following:	not applicable-forms not issued after 09/01/2015
		a. The accumulated value of the initial earned premium times the greater of (i) 58% and (ii) the lifetime loss ratio consistent with the original filing including margins for moderately adverse experience;	not applicable-forms not issued after 09/01/2015
		b. 85% of the accumulated value of prior premium rate schedule increases on an earned basis;	not applicable-forms not issued after 09/01/2015
		c. The present value of future projected initial earned premiums times the greater of (i) 58% and (ii) the lifetime loss ratio consistent with the original filing including margins for moderately adverse experience; and	not applicable-forms not issued after 09/01/2015



Review Requirements Checklist  
FOR REVISION TO LONG-TERM CARE INSURANCE (LTCI) RATES

REVIEW REQUIREMENTS	REFERENCE	COMMENTS	FILER'S NOTES
		d. 85% of the present value of future projected premiums not in subdivision 2 c of this subsection on an earned basis;	not applicable-forms not issued after 09/01/2015
	14VAC5-200-154 B 3	Expected claims shall be calculated based on the original filing assumptions assumed until new assumptions are filed as part of a rate increase. New assumptions shall be used for all periods beyond each requested effective date of a rate increase. Expected claims are calculated for each calendar year based on the in-force policies at the beginning of the calendar year. Expected claims shall include margins for moderately adverse experience; either amounts included in the claims that were used to determine the lifetime loss ratio consistent with the original filing or as modified in any rate increase filing;	not applicable-forms not issued after 09/01/2015
	14VAC5-200-154 B 4	In the event that a policy form has both exceptional and other increases, the values in subdivisions 2 b and d of this subsection will also include 70% for exceptional rate increase amounts; and	not applicable-forms not issued after 09/01/2015
	14VAC5-200-154 B 5	All present and accumulated values used to determine rate increases, including the lifetime loss ratio consistent with the original filing reflecting margins for moderately adverse experience, shall use the maximum valuation interest rate for contract reserves as specified in § 38.2-1371 of the Code of Virginia. The actuary shall disclose as part of the actuarial memorandum the use of any appropriate averages.	not applicable-forms not issued after 09/01/2015
	14VAC5-200-154 C	For each rate increase that is implemented, the insurer shall file for approval by the commission updated projections, as defined in subdivision A 3 a of this section, annually for the next three years and include a comparison of actual results to projected values. The	not applicable-forms not issued after 09/01/2015



Review Requirements Checklist  
FOR REVISION TO LONG-TERM CARE INSURANCE (LTCI) RATES

REVIEW REQUIREMENTS	REFERENCE	COMMENTS	FILER'S NOTES
		<p>commission may extend the period to greater than three years if actual results are not consistent with projected values from prior projections. For group insurance policies that meet the conditions in subsection J of this section, the projections required by subdivision A 3 a of this section shall be provided to the policyholder in lieu of filing with the commission.</p>	
	14VAC5-200-154 D	<p>If any increased premium rate in the revised premium rate schedule is greater than 200% of the comparable rate in the initial premium schedule, the premiums exceeding 200% shall be clearly identified and lifetime projections, as defined in subdivision A 3 a of this section, shall be filed for approval by the commission every five years following the end of the required period in subsection C of this section. For group insurance policies that meet the conditions in subsection J of this section, the projections required by this subsection shall be provided to the policyholder in lieu of filing with the commission.</p>	<p>not applicable-forms not issued after 09/01/2015</p>

Review Requirements Checklist  
FOR REVISION TO LONG-TERM CARE INSURANCE (LTCI) RATES


**Access to Administrative Letters, Administrative Orders, Regulations and Laws is available at:**  
<http://www.scc.virginia.gov/boi/laws.aspx>

The Rates Section of the Life and Health Division reviews long-term care insurance rate revisions . Please contact the assigned rates examiner or this section directly at (804) 371-9348 if you have questions or need additional information about this line of insurance.

The Flesch reading ease score of the filed policy form is n/a.

I represent that a review of the enclosed form has been conducted, and I certify that, to the best of my knowledge and belief, each form submitted is consistent and complies with the requirements of Title 38.2 of the Code of Virginia and the applicable rules and regulations. I understand that a failure to comply with these requirements will result in a disapproval of the filing.

I hereby certify that I have reviewed the attached revision to the long-term care insurance rate filing and determined that it is in compliance with the Revision to Long-Term Care Insurance (LTCI) Rates checklist.

Signed: 

Name (please print): Jeffrey O. LaFond Title: Lead Actuarial Analyst

Company Name: Mutual of Omaha Insurance Company

Date: 09/24/2021 Phone No: (402) 351-3799

E-Mail Address: jeff.lafond@mutualofomaha.com

**Rate Increase History**

	Implementation Date	Non-Lifetime Benefit Periods	Lifetime Benefit Period
Nationwide	10/01/2003	29.0%	29.0%
	10/01/2011	15.0%	30.0%
	10/01/2012		11.5%
	05/01/2015		30.0%
	05/01/2016		15.0%
Virginia	08/01/2007	29.0%	29.0%
	05/01/2013	20.0%	30.0%
	05/01/2014	4.1%	20.0%
	05/01/2018		30.0%
	05/01/2019		15.0%

**Nationwide Historical Experience as of 12/31/2019**  
**Premiums at the National Rate Level**  
**Non-Lifetime Benefit Periods**

Incurred Year	National Rate Level Earned Premium	Paid Claims	Claim Reserves	Incurred Claims	Loss Ratios
1997	493,144	0	0	0	0.0%
1998	2,879,303	107,337	0	107,337	3.7%
1999	5,164,376	620,404	0	620,404	12.0%
2000	8,538,676	1,279,042	0	1,279,042	15.0%
2001	13,296,598	2,429,336	0	2,429,336	18.3%
2002	19,842,983	4,609,510	0	4,609,510	23.2%
2003	28,740,282	3,660,230	0	3,660,230	12.7%
2004	35,000,129	5,980,398	0	5,980,398	17.1%
2005	35,036,067	8,695,825	0	8,695,825	24.8%
2006	33,797,055	9,349,851	0	9,349,851	27.7%
2007	32,402,237	12,030,566	0	12,030,566	37.1%
2008	30,977,013	13,701,296	0	13,701,296	44.2%
2009	29,532,625	16,568,624	61,084	16,629,707	56.3%
2010	28,088,937	18,739,788	29,703	18,769,491	66.8%
2011	27,659,735	21,242,247	9,565	21,251,812	76.8%
2012	30,431,465	26,429,283	90,633	26,519,916	87.1%
2013	29,383,246	25,661,841	199,888	25,861,729	88.0%
2014	27,847,359	26,252,948	248,417	26,501,364	95.2%
2015	27,160,604	28,773,114	1,937,991	30,711,106	113.1%
2016	27,123,437	31,538,113	3,997,526	35,535,639	131.0%
2017	26,141,924	29,208,176	10,097,005	39,305,182	150.4%
2018	24,698,295	19,769,456	25,109,683	44,879,139	181.7%
2019	22,951,017	6,266,568	38,912,922	45,179,490	196.9%
Total	547,186,506	312,913,952	80,694,417	393,608,369	71.9%

**Nationwide Historical Experience as of 12/31/2019**  
**Premiums at the National Rate Level**  
**Lifetime Benefit Period**

Incurred Year	National Rate Level Earned Premium	Paid Claims	Claim Reserves	Incurred Claims	Loss Ratios
1997	379,977	0	0	0	0.0%
1998	2,595,131	229,543	0	229,543	8.8%
1999	5,659,399	581,891	0	581,891	10.3%
2000	11,774,776	1,523,171	0	1,523,171	12.9%
2001	20,610,805	4,550,872	0	4,550,872	22.1%
2002	30,785,341	5,455,702	0	5,455,702	17.7%
2003	44,172,366	9,272,668	507,964	9,780,632	22.1%
2004	53,510,550	12,266,853	584,732	12,851,585	24.0%
2005	53,476,530	15,831,538	300,534	16,132,072	30.2%
2006	52,232,014	15,135,278	327,429	15,462,707	29.6%
2007	50,985,373	22,195,447	1,542,127	23,737,573	46.6%
2008	49,704,716	29,724,559	2,066,681	31,791,240	64.0%
2009	48,250,256	28,963,088	1,031,839	29,994,927	62.2%
2010	46,724,080	42,395,166	3,234,464	45,629,630	97.7%
2011	46,656,911	44,635,939	4,149,480	48,785,419	104.6%
2012	50,806,818	43,383,429	5,052,838	48,436,267	95.3%
2013	49,879,304	42,406,456	8,410,395	50,816,851	101.9%
2014	47,462,825	31,749,690	12,452,002	44,201,692	93.1%
2015	51,611,050	34,990,187	16,136,603	51,126,790	99.1%
2016	53,550,733	30,432,802	21,203,005	51,635,806	96.4%
2017	50,413,850	25,941,424	29,528,894	55,470,317	110.0%
2018	45,771,085	18,947,182	50,359,870	69,307,052	151.4%
2019	41,946,347	5,654,886	44,848,871	50,503,757	120.4%
Total	908,960,236	466,267,770	201,737,726	668,005,496	73.5%

**Nationwide Historical Experience as of 12/31/2019**  
**Premiums at the National Rate Level**  
**All Benefit Periods Combined**

Incurred Year	National Rate Level Earned Premium	Paid Claims	Claim Reserves	Incurred Claims	Loss Ratios
1997	873,120	0	0	0	0.0%
1998	5,474,434	336,881	0	336,881	6.2%
1999	10,823,775	1,202,294	0	1,202,294	11.1%
2000	20,313,452	2,802,214	0	2,802,214	13.8%
2001	33,907,403	6,980,208	0	6,980,208	20.6%
2002	50,628,324	10,065,212	0	10,065,212	19.9%
2003	72,912,648	12,932,898	507,964	13,440,862	18.4%
2004	88,510,679	18,247,251	584,732	18,831,982	21.3%
2005	88,512,597	24,527,363	300,534	24,827,897	28.1%
2006	86,029,070	24,485,129	327,429	24,812,557	28.8%
2007	83,387,610	34,226,013	1,542,127	35,768,139	42.9%
2008	80,681,729	43,425,855	2,066,681	45,492,536	56.4%
2009	77,782,881	45,531,712	1,092,923	46,624,634	59.9%
2010	74,813,018	61,134,955	3,264,167	64,399,121	86.1%
2011	74,316,645	65,878,185	4,159,045	70,037,231	94.2%
2012	81,238,283	69,812,712	5,143,471	74,956,182	92.3%
2013	79,262,550	68,068,297	8,610,283	76,678,580	96.7%
2014	75,310,184	58,002,638	12,700,418	70,703,056	93.9%
2015	78,771,654	63,763,301	18,074,594	81,837,896	103.9%
2016	80,674,170	61,970,915	25,200,530	87,171,445	108.1%
2017	76,555,773	55,149,600	39,625,899	94,775,499	123.8%
2018	70,469,380	38,716,638	75,469,553	114,186,191	162.0%
2019	64,897,364	11,921,454	83,761,793	95,683,247	147.4%
Total	1,456,146,742	779,181,722	282,432,143	1,061,613,865	72.9%

Actuarial Certification  
for  
Long-Term Care Policy Forms LT50, NH50, HCA/Q, LTA/Q, NHA/Q and Riders

I, Joshua Weber, am a 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 hereby certify to the best of my knowledge and judgment, the entire rate filing submitted herein is in compliance with all applicable laws of this state, the rules of the Department of Insurance, and Actuarial Standard of Practice Number 8, "Regulatory Filings for Health Benefits, Accident and Health Insurance, and Entities Providing Health Benefits", as adopted by the Actuarial Standards Board. In my opinion, the rates are not excessive, not unfairly discriminatory; and that the rates exhibit a reasonable relationship to the benefits provided by the policy.

The increased premium rate schedules are not greater than new business attained age premium rate schedules except for differences attributable to benefits.

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.



Joshua Weber, FSA, MAAA  
Product Performance Director  
Mutual of Omaha Insurance Company  
3300 Mutual of Omaha Plaza  
Omaha, NE 68175  
(402) 351-3038  
[Joshua.Weber@mutualofomaha.com](mailto:Joshua.Weber@mutualofomaha.com)

July 16, 2021

	LTA/LTAQ*	NHA/NHAQ	HCA/HCAQ	LT50	NH50
Benefits	Comprehensive IF HHC Rider 0GH8M is added	Comprehensive IF HHC Rider 0GH7M is added	Comprehensive IF NH Rider 0GH1M is added	Long-Term Care Insurance Policy	Confined Care Facility Insurance Policy
TQ/NTQ	TQ or NTQ - DAILY Benefits	TQ or NTQ - DAILY Benefits	TQ or NTQ - DAILY Benefits	TQ - DAILY Benefits	TQ - DAILY Benefits
<b>BASIC POLICY BENEFITS</b>					
<b>Confined Care</b>	BASE POLICY - Nursing Home Confinement - <b>INDEMNITY BENEFIT</b> at CCDB (Confined Care Daily Benefit)	BASE POLICY - Nursing Home Confinement - <b>INDEMNITY BENEFIT</b> at CCDB (Confined Care Daily Benefit)	<b>RIDER 0GH1M</b> - Nursing Home Confinement (INDEMNITY) at CCDB	Nursing Home Confinement - pays expense incurred up to the Confined Care Daily Benefit for each day	Nursing Home Confinement - pays expense incurred up to the Confined Care Daily Benefit for each day
	BASE POLICY - Nursing Home Bed Reservation - 21 days/year - reasonable & customary expense incurred up to the CCDB	BASE POLICY - Nursing Home Bed Reservation - 21 days/year - reasonable & customary expense incurred up to the CCDB	<b>RIDER 0GH1M</b> -Nursing Home Bed Reservation 21 days/year - reasonable & customary expense incurred up to the CCDB	Pays expenses incurred for up to 21 days/year - for NH bed reservation, ALF bed reservation and Hospice Care Facility bed reservation	Pays expenses incurred for up to 21 days/year - for NH bed reservation, ALF bed reservation and Hospice Care Facility bed reservation
	BASE POLICY - Assisted Living Facility (ALF) - reasonable & customary expense incurred up to CCDB	BASE POLICY - Assisted Living Facility (ALF) - reasonable & customary expense incurred up to CCDB	<b>RIDER 0GH1M</b> -Assisted Living Facility (ALF) - reasonable & customary expense incurred up to CCDB	Assisted Living Facility (ALF) - pays expense incurred up to CCDB (limited to cost of one-bedroom unit)	Assisted Living Facility (ALF) - pays expense incurred up to CCDB (limited to cost of one-bedroom unit)
				Included with NH Bed Reservation	Included with NH Bed Reservation
	BASE POLICY - Adjustment Period Benefit - 10% of CCDB up to a 6-month lifetime maximum.				
<b>Other Features</b>				Personal Care Advocate Services: up to a maximum of \$500/year for the initial assessment including the development of the Plan of Care. Other Personal Care Advocate Services (such as exploring alternate care options and monitoring quality of care) are not subject to the \$500/year maximum.	
	BASE POLICY - Alternate Care Plan of Care (alternate to NH confinement)	BASE POLICY - Alternate Care (alternate to <b>Confined Care</b> )	<b>RIDER 0GH1M</b> - Alternate Care (alternate to <b>Confined Care</b> )	Alternate Care Benefit - pays only for qualified long-term care services (examples: durable medical equipment or home modifications like wheelchair ramps and grab bars); must be mutually agreeable to insured, Dr and company.	Alternate Care Benefit - in lieu of confined care benefits; pays only for qualified long-term care services (examples: durable medical equipment or home modifications like wheelchair ramps and grab bars); must be mutually agreeable to insured, Dr and company.
	BASE POLICY - Hospice Care Facility (reasonable & customary expense incurred up to CCDB)	BASE POLICY - Hospice Care Facility ( <b>INDEMNITY</b> at CCDB)	<b>RIDER 0GH1M</b> - Hospice Care Facility ( <b>INDEMNITY</b> at CCDB)	Confinement in hospice care facility paid same as NH; outpatient hospice paid same as Home Health Care.	Hospice Care Facility Confinement - paid same as NH
	<b>HHC RIDER</b> - Respite Care - up to 15 days/yr - paid in same way as HHC benefit; not subject to the HHC Elim Pd.	<b>HHC RIDER</b> - Respite Care - up to 15 days/yr - paid in same way as HHC benefit; not subject to the HHC Elim Pd.	BASE POLICY - Respite Care - up to 15 days/yr - paid in same way as HHC; not subject to the Elim Pd.	Respite Care - up to 15 days/yr - paid same as HHC; is subject to the Elimination Period.	Respite Care - up to 15 days/yr - expenses incurred up to 50% of the CCDB; is subject to the Elimination Period.



	LTA/LTAQ*	NHA/NHAQ	HCA/HCAQ	LT50	NH50
	<b>BASE POLICY</b> - Restoration of Benefits - for Confined Care (180 days, and able to perform 5 of 6 ADLs, not have a cognitive impairment; can be restored multiple times)	<b>BASE POLICY</b> - Restoration of Benefits - for Confined Care (180 days, and able to perform 5 of 6 ADLs, not have a cognitive impairment; can be restored multiple times)	<b>RIDER 0GH1M</b> - Restoration of Benefits - for Confined Care (180 days, and able to perform 5 of 6 ADLs, not have a cognitive impairment; can be restored multiple times)	Restoration of Benefits - after 180 days, have not incurred expenses that would otherwise have been payable under the policy and able to perform 5 of 6 ADLs or has not had a severe cognitive impairment; can be restored multiple times.	Restoration of Benefits - after 180 days, have not incurred expenses that would otherwise have been payable under the policy and able to perform 5 of 6 ADLs or has not had a severe cognitive impairment; can be restored multiple times.
	<b>BASE POLICY</b> - Waiver of Premium for Confined Care - After 90 consecutive days of confinement or when the Elimination Period is satisfied, whichever is longer. Also waives premium for spouse's LTA or LTAQ policy.	<b>BASE POLICY</b> - Waiver of Premium for Confined Care - After 90 consecutive days of confinement or when the Elimination Period is satisfied, whichever is longer.	<b>RIDER 0GH1M</b> - Waiver of Premium for Confined Care - After 90 consecutive days of confinement or when the Elimination Period is satisfied, whichever is longer.	Waiver of Premium after confinement in a NH, ALF or Hospice Care Facility for 90 continuous days and insured is eligible for and receives benefits for those days. If Spouse has own LT50 policy, the spouse's premium will also be waived.	Waiver of Premium after confinement in a NH, ALF or Hospice Care Facility for 90 continuous days and insured is eligible for and receives benefits for those days. If Spouse has own NH50 policy, the spouse's premium will also be waived.
	<b>HHC RIDER (0GH8M)</b> - Home Health Care - 100% of reasonable and customary actual charges up to the HHCDB.	<b>HHC RIDER (0GH7M)</b> - Home Health Care - 100% of reasonable and customary actual charges up to the HHCDB.	<b>BASE POLICY</b> - Home Health Care - 100% of reasonable and customary actual charges up to the HHCDB.	Home Health Care (HHC) - pays expenses incurred up to the Home Health Care Daily Benefit.	
	<b>BASE POLICY</b> - Adult Day Care - reasonable & customary expense incurred up to 50% of the CCDB	<b>HHC RIDER</b> - Adult Day Care - paid same as HHC	<b>BASE POLICY</b> - Adult Day Care - paid same as HHC.	Adult Day Care - paid same as HHC	
	<b>HHC RIDER</b> - Homemaker/Companion Services (limited to 3 visits/week)	<b>HHC RIDER</b> - Homemaker/Companion Services (limited to 3 visits/week)	<b>BASE POLICY</b> - Homemaker/Companion Services - limited to 3 visits/week	Homemaker Services - paid same as HHC up to a maximum of three visits per week	
	<b>HHC RIDER</b> - Personal Care (included in the Home Health Care Benefit)	<b>HHC RIDER</b> - Personal Care (included in the Home Health Care Benefit)	<b>BASE POLICY</b> - Personal Care (included in the Home Health Care Benefit)	Personal Care (included in the Home Health Care Benefit)	
	<b>HHC RIDER</b> - Care Advocate Benefit - up to a maximum of \$550/year for the initial assessment including the development of the Plan of Care and other services (such as exploring alternate care options and monitoring quality of care)	<b>HHC RIDER</b> - Care Advocate Benefit - up to a maximum of \$550/year for the initial assessment including the development of the Plan of Care and other services (such as exploring alternate care options and monitoring quality of care)	<b>BASE POLICY</b> - Care Advocate Benefit - up to a maximum of \$550/year for the initial assessment including the development of the Plan of Care and other services (such as exploring alternate care options and monitoring quality of care)	See Personal Care Advocate Services above	
	<b>HHC RIDER</b> - Outpatient Hospice - paid same as HHC	<b>HHC RIDER</b> - Outpatient Hospice - paid same as HHC	<b>BASE POLICY</b> - Outpatient Hospice - paid same as HHC	Outpatient Hospice - paid same as HHC	

	LTA/LTAQ*	NHA/NHAQ	HCA/HCAQ	LT50	NH50
Home Health Care	HHC RIDER - Caregiver Training - reasonable and customary charges up to a lifetime maximum of \$1,000; not subject to the HHC Elim Pd.	HHC RIDER - Caregiver Training - reasonable and customary charges up to a lifetime maximum of \$1,000; not subject to the HHC Elim Pd.	BASE POLICY - Caregiver Training - reasonable and customary charges up to a lifetime maximum of \$1,000; not subject to the Elim Pd.	Caregiver Training - expenses incurred up to a lifetime maximum of five times the HHC daily benefit; not subject to the Elim Pd.	
	HHC RIDER - Informal Caregiver Benefit - pays up to \$20 per day, limited to \$100 per week, for eligible services provided by an informal caregiver (but not when any HHC benefits are received)	HHC RIDER - Informal Caregiver Benefit - pays up to \$20 per day, limited to \$100 per week, for eligible services provided by an informal caregiver (but not when any HHC benefits are received)	BASE POLICY - Informal Caregiver Benefit - pays up to \$20 per day, limited to \$100 per week, for eligible services provided by an informal caregiver (but not when any HHC benefits are received)	Informal Caregiver Benefit - pays up to \$20 per day, limited to \$100 per week, for qualified LTC services provided by an informal caregiver (but not when any HHC benefits are received)	
				Durable Medical Equipment would be eligible under Alternate Care	
				Emergency Medical Alert System Benefit - after Elim Pd is satisfied, pays expense incurred up to \$35/month for rental.	
				Home Modifications would be eligible under Alternate Care	
	HHC RIDER - Restoration of Benefits - (180 days, and able to perform 5 of 6 ADLs, not have a cognitive impairment; can be restored multiple times)	HHC RIDER - Restoration of Benefits - (180 days, and able to perform 5 of 6 ADLs, not have a cognitive impairment; can be restored multiple times)	BASE POLICY - Restoration of Benefits - (180 days, and able to perform 5 of 6 ADLs, not have a cognitive impairment; can be restored multiple times)	Restoration of Benefits - see above	
HHC RIDER - Waiver of Premium for Home Care - waived after 90 consecutive days beyond the HHC EP (if receiving services at least 3 out of every 7 days).	HHC RIDER - Waiver of Premium for Home Care - waived after 90 consecutive days beyond the HHC EP (if receiving services at least 3 out of every 7 days).	BASE POLICY - Waiver of Premium for Home Care - waived after 90 consecutive days beyond the HHC EP (if receiving services at least 3 out of every 7 days).	Not applicable for HHC.		
<b>AVAILABLE OPTIONS (as marketed)</b>					
Indemnity	BASE POLICY - NH INDEMNITY	BASE POLICY - NH AND HOSPICE CARE FACILITY INDEMNITY	RIDER 0GH1M - NH & HOSPICE indemnity included		
Add'l Benefit for Injury					
Cash Benefit					
Simple Inflation					
Compound - Lifetime	Compound Inflation Protection Rider 0GH4M - increases Daily Benefits by 5% compounded annually.	Compound Inflation Protection Rider 0GH3M - increases Daily Benefits by 5% compounded annually.	Compound Inflation Protection Rider 0GH3M - increases Daily Benefits by 5% compounded annually.	Automatic Inflation Protection Rider - 0DX5M - increases daily benefits and the policy maximum benefit by 5% compounded annually	Automatic Inflation Protection Rider - 0DX6M - increases daily benefits and the policy maximum benefit by 5% compounded annually
20-Yr Comp Inflation					

	LTA/LTAQ*	NHA/NHAQ	HCA/HCAQ	LT50	NH50
Comp Inflation with Buy-up					
Compound Inflation with Max Cap					
Graded Compound Infl 3/3/0					
Graded Compound Infl 5/3/0					
Future Purchase Option					
Guaranteed Purchase Option	BASE POLICY - Guaranteed Purchase Option -- built-in -- (in effect if other inflation option not purchased) - offers made every 2 yrs up thru the 20th Policy Anniv Date -- even when on claim.	BASE POLICY - Guaranteed Purchase Option -- built-in -- (in effect if other inflation option not purchased) - offers made every 2 yrs up thru the 20th Policy Anniv Date -- even when on claim.	BASE POLICY - Guaranteed Purchase Option -- built-in -- (in effect if other inflation option not purchased) - offers made every 2 yrs up thru the 20th Policy Anniv Date -- even when on claim.		
Spousal Benefits					
	BASE POLICY: <u>Survivorship</u> -paid up if spouse with LTA/LTAQ dies after 10 years (if death during first 10 yrs, premium must be paid until the 10th anniv - then becomes paid-up). <u>Waiver of Premium</u> -if both have LTALTAQ and one is waived, then the other spouse's premium is also waived				
Return of Premium					

	LTA/LTAQ*	NHA/NHAQ	HCA/HCAQ	LT50	NH50
Nonforfeiture	Nonforfeiture - Shortened benefit period: Rider <b>0GH5M</b>	Nonforfeiture - Shortened benefit period: Rider <b>0GH5M</b>	Nonforfeiture - Shortened benefit period: Rider <b>0GH5M</b>	Shortened Benefit Period Non-Forfeiture Benefit Rider 0DX7M - option	Shortened Benefit Period Non-Forfeiture Benefit Rider 0DY4M - option
Rate Guarantees					
TQ or NTQ	LTA is Non-Tax Qualified. LTAQ: Replaces language throughout policy with TQ wording	NHA is Non-Tax Qualified. NHAQ: Replaces language throughout policy with TQ wording	HCA is Non-Tax Qualified. HCAQ: Replaces language throughout policy with TQ wording		
Benefit Multipliers	1, 2, 3, 5 years and Lifetime (Benefit Period in calendar days); same choices for HHC Rider.	1, 2, 3, 5 years and Lifetime (Benefit Period in calendar days); same choices for HHC Rider.	1, 2, 3, 5 years and Lifetime (Benefit Period in calendar days); same choices for Confined Care Rider.	1, 2, 3, 5 years and Lifetime	1, 2, 3, 5 years and Lifetime
Elimination Periods	Confined Care: 0, 20, 90, 180 or 365 days - once in lifetime; <u>Home Health Care</u> : 20 days per Period of Care	Confined Care: 0, 20, 90, 180 or 365 days per Period of Care; <u>Home Health Care</u> : 20 days per Period of Care	Confined Care: 0, 20, 90, 180 or 365 days per Period of Care; <u>Home Health Care</u> : 20 days per Period of Care	0, 20, 100 or 365 days of service; once in lifetime	0, 20, 100 or 365 days of service; once in lifetime
Payment Options					
	Lifetime PRD	Lifetime PRD	Lifetime PRD	Lifetime PRD	Lifetime PRD
<b>Monthly or Daily Benefit Options</b>					
Nursing Home	\$40 - \$300 (CCDB) / day	\$40 - \$300 (CCDB) / day	\$40 - \$250 (CCDB) / day	\$30 - \$250 (CCDB) /day for issue ages through 79; max of \$200 for issue ages 80 through 84	\$30 - \$250 (CCDB) /day for issue ages through 79; max of \$200 for issue ages 80 through 84

	LTA/LTAQ*	NHA/NHAQ	HCA/HCAQ	LT50	NH50
<b>Assisted Living Facility</b>	Same as NH	Same as NH	Same as NH	Same as NH	Same as NH
<b>Home Health Care</b>	\$40 - \$250 / day	\$40 - \$250 / day	\$40 - \$250 / day	50%, 80% or 100% of the CCDB	
<b>Issue Ages</b>	18-84 (later changed to 79)	18-84 (later changed to 79)	18-84 (later changed to 79)	18-84	18-84
<b>Discounts</b>					
	Discount included in rate	Spouse: 10% (rider 0GH9M)	Spouse: 10% (rider 0GH9M)	Spouse: 10% (rider 0DX8M)	Spouse: 10% (rider 0DX8M)
	Associations: 10% (rider 0DY2M)	Associations: 10% (rider 0DY2M)	Associations: 10% (rider 0DY2M)	Associations: 10% (rider 0DY2M)	Associations: 10% (rider 0DY2M)
<b>Impaired Rate Classes</b>	1.25 available as counteroffer by underwriting (but reverts to NHA)	1.25 available as counteroffer by underwriting	1.25 available as counteroffer by underwriting (but reverts to NHA)		

\* Base policies LTA, NHA & HCA were NTQ; **Tax Qualified** versions of base policies were LTAQ, NHAQ and HCAQ (not approved in all states; TQ amendment riders were available in those states that did not have the LTAQ, NHAQ and HCAQ forms.

**Forms HCA, LTA, NHA, LT50 and NH50 (LT50 and NH50 - 2011, 2012, 2015 and 2016 rate increases only)**

State	Implementation			Implementation			Implementation			Implementation			Implementation			Implementation			Compounded Increases		
	Non-Lifetime BP	Lifetime BP	Date	Non-Lifetime BP	Lifetime BP	Date	Non-Lifetime BP	Lifetime BP	Date	Non-Lifetime BP	Lifetime BP	Date	Non-Lifetime BP	Lifetime BP	Date	Non-Lifetime BP	Lifetime BP	Date	Non-Lifetime BP	Lifetime BP	
Nationwide	29.0%	29.0%	10/01/2003	15.0%	30.0%	10/01/2011	0.0%	11.5%	10/01/2012	0.0%	30.0%	05/01/2015	0.0%	15.0%	05/01/2016				48.4%	179.5%	
Alabama	29.0%	29.0%	10/01/2003	15.0%	30.0%	01/01/2012	0.0%	11.5%	01/01/2013	0.0%	30.0%	08/01/2015	0.0%	15.0%	09/01/2016				48.4%	179.5%	
Alaska	29.0%	29.0%	10/01/2003	15.0%	30.0%	11/01/2011	0.0%	11.5%	11/01/2012										48.4%	87.0%	
Arizona	29.0%	29.0%	10/01/2003	15.0%	30.0%	10/01/2011	0.0%	11.5%	01/01/2013	0.0%	30.0%	06/01/2015				0.0%	16.2%	05/01/2018	48.4%	182.5%	
Arkansas	29.0%	29.0%	09/01/2005	7.5%	15.0%	07/01/2012				7.0%	20.0%	07/01/2015	0.0%	20.0%	07/01/2016	0.0%	25.0%	07/01/2017	48.4%	213.8%	
California (Post-Stabilization)	15.0%	15.0%	02/01/2019																15.0%	15.0%	
California (Pre-Stabilization)	15.0%	20.0%	12/01/2016																15.0%	20.0%	
Colorado	29.0%	29.0%	01/01/2004	15.0%	30.0%	12/01/2011	0.0%	11.5%	07/01/2013	0.0%	25.0%	10/01/2015	0.0%	20.0%	10/01/2016				48.4%	180.5%	
Connecticut	15.0%	15.0%	02/01/2018	15.0%	15.0%	04/01/2019													32.3%	32.3%	
Delaware	18.0%	18.0%	09/01/2004	9.3%	9.3%	09/01/2007	15.0%	15.0%	01/01/2012	0.0%	25.0%	08/01/2016	0.0%	30.0%	02/01/2018	0.0%	26.0%	02/01/2019	48.3%	203.7%	
District of Columbia																			0.0%	0.0%	
Florida (LTC Forms Only)	13.3%	13.3%	08/01/2007	7.4%	14.8%	01/01/2013	11.8%	20.9%	11/01/2017	2.8%	20.7%	11/01/2018	0.0%	20.0%	11/01/2019				59.9%	127.8%	
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	17.9%	25.0%	02/01/2019	0.0%	24.6%	02/01/2020	0.0%	11.6%	02/01/2021	88.1%	177.4%	
Georgia	29.0%	29.0%	11/01/2003	15.0%	15.0%	12/01/2011	0.0%	15.0%	03/01/2013	0.0%	13.0%	11/01/2015	0.0%	12.0%	11/01/2016	0.0%	15.0%	11/01/2017	0.0%	18.6%	11/01/2018
Hawaii	29.0%	29.0%	10/01/2003	15.0%	30.0%	11/01/2013	0.0%	18.6%	05/01/2018	0.0%	18.6%	05/01/2019	0.0%	18.5%	05/01/2020				48.4%	179.5%	
Idaho	29.0%	29.0%	09/01/2007	15.0%	25.0%	04/01/2012	0.0%	16.0%	08/01/2013	0.0%	30.0%	08/01/2015	0.0%	15.0%	08/01/2016				48.4%	179.6%	
Illinois (Pre-Stabilization)	29.0%	29.0%	12/01/2003	15.0%	30.0%	12/01/2011	0.0%	11.5%	12/01/2012	0.0%	30.0%	01/01/2017	0.0%	15.0%	01/01/2018				48.4%	179.5%	
Illinois (Post-Stabilization)	29.0%	29.0%	12/01/2003	15.0%	30.0%	12/01/2011	0.0%	11.5%	12/01/2012	0.0%	30.0%	03/01/2019	0.0%	15.0%	03/01/2020				48.4%	179.5%	
Indiana	29.0%	29.0%	11/01/2007	9.0%	9.0%	05/01/2014	5.5%	11.3%	09/01/2016										48.3%	56.5%	
Iowa	18.0%	18.0%	02/01/2004	9.0%	9.0%	09/01/2007	15.0%	20.0%	11/01/2011	0.0%	8.3%	11/01/2012	0.0%	18.9%	09/01/2015	0.0%	9.3%	09/01/2016	0.0%	18.0%	09/01/2017
Kansas	29.0%	29.0%	11/01/2003	15.0%	15.0%	01/01/2012	0.0%	12.0%	08/01/2013	0.0%	30.0%	09/01/2016	0.0%	29.4%	09/01/2017				48.4%	179.5%	
Kentucky	29.0%	29.0%	03/01/2006	15.0%	30.0%	01/01/2012	0.0%	11.5%	02/01/2013	0.0%	30.0%	03/01/2016							48.4%	143.1%	
Louisiana	29.0%	29.0%	10/01/2003	15.0%	25.0%	02/01/2016	0.0%	20.0%	09/01/2017	0.0%	20.0%	05/01/2019							48.4%	132.2%	
Maine	29.0%	29.0%	10/01/2003	15.0%	30.0%	08/01/2016	0.0%	28.2%	08/01/2017	0.0%	11.0%	03/01/2020							48.4%	138.6%	
Massachusetts	10.0%	10.0%	03/01/2013																10.0%	10.0%	
Michigan	29.0%	29.0%	10/01/2003	15.0%	30.0%	10/01/2011	0.0%	11.5%	01/01/2013	0.0%	20.0%	07/01/2015	0.0%	20.0%	07/01/2016	0.0%	5.9%	07/01/2017	48.4%	185.1%	
Minnesota	29.0%	29.0%	02/01/2004	13.9%	15.0%	07/01/2016	0.0%	15.0%	07/01/2017	0.0%	10.4%	07/01/2018							46.9%	88.3%	
Mississippi	16.0%	16.0%	10/01/2003	11.2%	11.2%	03/01/2008	15.0%	25.0%	11/01/2011	0.0%	16.0%	02/01/2013	0.0%	25.0%	12/01/2015	0.0%	19.6%	11/01/2017	48.3%	179.6%	
Missouri	29.0%	29.0%	10/01/2003	7.2%	20.4%	11/01/2012	7.3%	30.0%	06/01/2015	0.0%	25.0%	06/01/2016	0.0%	13.0%	06/01/2017				48.4%	185.2%	
Montana (LT50)	0.0%	0.0%	10/01/2003	15.0%	30.0%	10/01/2011	0.0%	11.5%	05/01/2013	0.0%	30.0%	01/01/2016	0.0%	15.0%	01/01/2017				15.0%	116.7%	
Montana (NH50)	0.0%	0.0%	10/01/2003	15.0%	30.0%	10/01/2011	0.0%	11.5%	05/01/2013	0.0%	30.0%	01/01/2016	0.0%	15.0%	01/01/2017				15.0%	116.7%	
Montana (HCA)	29.0%	29.0%	10/01/2003	15.0%	30.0%	10/01/2011	0.0%	11.5%	05/01/2013	0.0%	5.4%	01/01/2016							48.4%	97.1%	
Montana (LTA)	29.0%	29.0%	10/01/2003	15.0%	30.0%	10/01/2011	0.0%	11.5%	05/01/2013	0.0%	30.0%	02/01/2018							48.4%	143.1%	
Montana (NHA)	29.0%	29.0%	10/01/2003	15.0%	30.0%	10/01/2011	0.0%	11.5%	05/01/2013	0.0%	30.0%	01/01/2016	0.0%	15.0%	01/01/2017				48.4%	179.5%	
Nebraska	29.0%	29.0%	10/01/2003	15.0%	30.0%	10/01/2011	0.0%	11.5%	12/01/2012	0.0%	30.0%	06/01/2015	0.0%	15.0%	08/01/2016				48.4%	179.5%	
Nevada	29.0%	29.0%	12/01/2004	15.0%	30.0%	08/01/2012	0.0%	11.5%	08/01/2013	0.0%	14.34%	09/01/2015	0.0%	14.34%	09/01/2016	0.0%	14.34%	09/01/2017	48.4%	179.5%	
New Hampshire	29.0%	29.0%	10/01/2003	11.5%	11.5%	05/01/2012	3.1%	30.0%	06/01/2013	0.0%	30.0%	08/01/2015	0.0%	15.0%	08/01/2016				48.3%	179.5%	
New Jersey	16.0%	16.0%	07/01/2005	11.2%	11.2%	01/01/2008	15.0%	30.0%	01/01/2012	0.0%	11.5%	01/01/2013	0.0%	14.3%	09/01/2015	0.0%	14.3%	09/01/2016	0.0%	14.3%	09/01/2017
New Mexico	29.0%	29.0%	10/01/2003	12.0%	15.0%	11/01/2015	2.7%	15.0%	12/01/2016	0.0%	15.0%	02/01/2018	0.0%	15.0%	03/01/2019				48.4%	125.6%	
New York	5.7%	5.7%	07/01/2013																5.7%	5.7%	
North Carolina	16.0%	16.0%	03/01/2004	11.2%	11.2%	09/01/2007	15.0%	30.0%	01/01/2012	0.0%	11.5%	10/01/2013	0.0%	22.3%	07/01/2015	0.0%	22.3%	07/01/2016	48.3%	179.7%	
North Dakota	29.0%	29.0%	10/01/2003	15.0%	25.0%	12/01/2011	0.0%	16.0%	02/01/2013	0.0%	15.0%	05/01/2015	0.0%	15.0%	05/01/2016	0.0%	13.0%	05/01/2017	48.4%	179.5%	
Ohio	16.0%	16.0%	10/01/2003	11.2%	11.2%	08/01/2007	15.0%	30.0%	10/01/2011	0.0%	11.5%	10/01/2012	0.0%	15.0%	08/01/2015	0.0%	15.0%	08/01/2016	0.0%	14.1%	08/01/2017
Oklahoma	13.0%	13.0%	05/01/2004	8.5%	8.5%	01/01/2009	15.0%	30.0%	02/01/2012	0.0%	10.0%	05/01/2016	5.3%	10.0%	05/01/2017	0.0%	10.0%	05/01/2018	0.0%	15.0%	07/01/2019
Oregon	7.2%	14.0%	03/01/2012	7.2%	14.0%	03/01/2013	0.0%	30.0%	03/01/2016	0.0%	28.2%	03/01/2017							14.9%	116.6%	
Pennsylvania	29.0%	29.0%	02/01/2004	15.0%	15.0%	01/01/2012	0.0%	15.0%	03/01/2013	0.0%	20.0%	08/01/2015	0.0%	20.0%	08/01/2016	0.0%	7.4%	12/01/2017	0.0%	6.6%	12/01/2018
Puerto Rico	29.0%	29.0%	10/01/2003	15.0%	30.0%	11/01/2011	0.0%	11.5%	11/01/2012	0.0%	30.0%	05/01/2015	0.0%	15.0%	05/01/2016				48.4%	179.5%	
Rhode Island	29.0%	29.0%	11/01/2003	15.0%	20.0%	08/01/2019													48.4%	54.8%	
South Carolina	29.0%	29.0%	11/01/2003	15.0%	20.0%	12/01/2011	0.0%	20.8%	03/01/2013	0.0%	20.0%	07/01/2015	0.0%	20.0%	08/01/2016	0.0%	4.1%	08/01/2017	48.4%	180.3%	
South Dakota	29.0%	29.0%	10/01/2003	15.0%	30.0%	10/01/2011	0.0%	11.5%	10/01/2012	0.0%	30.0%	06/01/2015	0.0%	15.0%	06/01/2016				48.4%	179.5%	
Tennessee	29.0%	29.0%	10/01/2003	15.0%	30.0%	04/01/2012	0.0%	11.5%	04/01/2013	0.0%	30.0%	07/01/2015	0.0%	15.0%	07/01/2016				48.4%	179.5%	
Texas (Post-Stabilization)	15.0%	30.0%	07/01/2016	0.0%	28.2%	07/01/2017													15.0%	66.7%	
Texas (Pre-Stabilization)	21.0%	21.0%	05/01/2004	6.6%	6.6%	09/01/2007	15.0%	30.0%	01/01/2012	0.0%	30.0%	01/01/2016	0.0%	28.2%	01/01/2017				48.3%	179.5%	
Utah	29.0%	29.0%	09/01/2007	15.0%	30.0%	02/01/2012	0.0%	30.0%	10/01/2015	0.0%	30.0%	10/01/2016							48.4%	179.5%	
Vermont	16.0%	16.0%	05/01/2004																16.0%	16.0%	
Virginia	29.0%	29.0%	08/01/2007	20.0%	30.0%	05/01/2013	4.1%	20.0%	05/01/2014	0.0%	30.0%	05/01/2018	0.0%	15.0%	05/01/2019				61.1%	200.9%	
Washington	29.0%	29.0%	10/01/2003	7.2%	20.4%	05/01/2012	7.2%	20.4%	08/01/2013	0.0%	30.0%	10/01/2015	0.0%	15.0%	10/01/2016				48.2%	179.6%	
West Virginia	15.0%	15.0%	02/01/2004	12.2%	12.2%	08/01/2007	15.0%	30.0%	01/01/2012	0.0%	11.5%	01/01/2013	0.0%	30.0%	01/01/2016	0.0%	15.0%	01/01/2017	48.4%	179.6%	
Wisconsin	29.0%	29.0%	10/01/2003	15.0%	30.0%	04/01/2012	0.0%	11.5%	04/01/2013	0.0%	30.0%	07/01/2015	0.0%	15.0%	09/01/2016				48.4%	179.5%	
Wyoming	29.0%	29.0%	10/01/2003	15.0%	30.0%	11/01/2011	0.0%	11.5%	11/01/2012	0.0%	30.0%	07/01/2015	0.0%	15.0%	07/01/2016				48.4%	179.5%	

## Consolidated, Most Commonly Asked Questions – States' LTC Rate Increase Reviews

### Policy LT50, NH50, HCA/HCAQ, LTA/LTAQ and NHA/NHAQ

1. New premium rate schedule, percentage increase for each rating scenario such as issue age, benefit period, elimination period, etc., from the existing and original rates.
  - A. Provide rate increase percentages by policy form number and clear mapping of these numbers to any alternative terminology describing policies stated in the actuarial memorandum and other supporting documents. [The rate increase amounts by benefit period are displayed in Section 11 of the Actuarial Memorandum. These increases will be applied the same to all policy forms included in this filing, which are displayed above.](#)
  - B. Provide the cumulative rate change since inception, after the requested rate increase, for each of the rating scenarios. [The cumulative rate change since inception, after the requested increase, is 92.9% for policyholders with non-lifetime benefit periods and 372.4% for policyholders with the lifetime benefit period.](#)
2. Rate increase history that reflects the filed increase.
  - A. Provide the month, year, and percentage amount of all previous rate revisions. [All previous nationwide and state specific rate increases are displayed in Exhibit 3 – Rate Increase History, which is attached to the Actuarial Memorandum.](#)
  - B. Provide the SERFF filing numbers associated with all previous rate revisions. [Prior SERFF filings by state are available upon request as SERFF filings vary by state.](#)
3. Actuarial Memorandum justifying the new rate schedule, which includes:
  - A. Lifetime loss ratio projection, with earned premiums and incurred claims discounted at the maximum valuation interest rate.
    - i. The projection should be by year. [The projections mentioned in Sections iii and iv below are displayed by calendar year.](#)
    - ii. Provide the count of covered lives and count of claims incurred by year. [The historical nationwide and state specific covered lives and claim counts, by incurred year, are displayed in Attachment 1 – Covered Lives and Claim Counts.](#)
    - iii. Provide separate experience summaries and projections for significant subsets of policies with substantially different benefit and premium features. Separate projections of costs for significant blocks of paid-up and premium-paying policies should be provided. [The projections by benefit period and in the aggregate are displayed in Exhibits 5A-5C, which are attached to the Actuarial Memorandum.](#)
    - iv. Provide a comparison of state versus national mix of business. In addition, a state may request separate state and national data and projections. The company should accompany any state-specific information with commentary on credibility, materiality, and impact on requested rate increase. [Attachment 2 - Distribution displays the nationwide distribution by Issue Age, Inflation Option, Benefit Period and Elimination Period. The nationwide lifetime experience projection is displayed in Exhibits 5A-5C attached to the Actuarial Memorandum.](#)
  - B. Reasons for the rate increase, including which pricing assumptions were not realized & why. [Section 3 of the Actuarial Memorandum describes the reasons for the requested rate increase.](#)
    - i. Attribution analysis - present the portion of the rate increase allocated to and impact on the lifetime loss ratio from each change in assumption. [Section 3 of the Actuarial Memorandum describes the reasons for the requested rate increase.](#)

- ii. Related to the issue of past losses, explain how the requested rate increase covers a policyholder's own past premium deficiencies and/or subsidizes other policyholders' past claims. [The rate increases were developed according to the methodology contained in Model Regulation 641.](#)
  - iii. Provide the original loss ratio target to allow for comparison of initially assumed premiums and claims and actual and projected premiums and claims. [Exhibits 5A-5C, attached to the Actuarial Memorandum, display the nationwide lifetime experience projections that include the original target loss ratio, which included the original pricing durational loss ratios. These exhibits display the actual loss ratios, expected loss ratios, and actual to expected ratios.](#)
  - iv. Provide commentary and analysis on how credibility of experience contributed to the development of the rate increase request. [The rate increases were developed according to the methodology contained in Model Regulation 641.](#)
- C. Statement that policy design, underwriting, and claims handling practices were considered.
- i. Show how benefit features, e.g., inflation and length of benefit period, and premium features, e.g., limited pay and lifetime pay, impact requested increases. [The increase varies only by benefit period. As stated previously, the nationwide lifetime experience projections by benefit period are displayed in Exhibits 5A-5C, which are attached to the Actuarial Memorandum.](#)
  - ii. Specify whether waived premiums are included in earned premiums and incurred claims, including in the loss ratio target calculation; provide the waived premium amounts and impact on requested increase. [Waived premiums are excluded from both the earned premiums and also the incurred claims. As a result, the waived premiums had no impact on the requested rate increase.](#)
  - iii. Describe current practices with dates and quantification of the effect of any underwriting changes. Describe how adjustments to experience from policies with less restrictive underwriting are applied to claims expectations associated with policies with more restrictive underwriting. [Underwriting practices were relatively similar during the time these products were marketed. Therefore, there were not any changes to underwriting practices that would warrant any adjustments to the experience included in this filing.](#)
- D. A demonstration that actual and projected costs exceed anticipated costs and the margin. [Exhibits 5A-5C, attached to the Actuarial Memorandum, display the nationwide lifetime experience projections that include the original target loss ratio, which included the original pricing durational loss ratios. These exhibits display the actual loss ratios, expected loss ratios, and actual to expected ratios.](#)
- E. The method and assumptions used in determining projected values should be reviewed in light of reported experience and compared to the original pricing assumptions and current assumptions. [See Section 5 of the Actuarial Memorandum.](#)
- i. Provide applicable actual-to-expected ratios regarding key assumptions.
  - ii. Provide justification for any change in assumptions
- F. Combined morbidity experience from different forms with similar benefits, whether from inside or outside the company, where appropriate to result in more credible historical claims as the basis for future claim costs. [The morbidity experience of all forms in this filing, which were issued under Pre-Rate Stabilization Guidelines from 1997 through 2004, that provide similar benefits, has been combined to more credible historical experience as a basis to project future claim costs. See Section 5 of the Actuarial Memorandum.](#)
- i. Explain the relevance of any data sources and resulting adjustments made relevant to the current filing, particularly regarding the morbidity assumption.
  - ii. A comparison of the population or industry study to the in-force related to the filing should be performed, if applicable.



- iii. Explain how claims cost expectations at older ages and later durations are developed if data is not fully credible at those ages and durations.
  - iv. Provide the year of the most recent morbidity experience study. [The most recent morbidity study was completed in 2019, which included data included in the Milliman 2017 Guidelines.](#)
  - G. Information (from NAIC Guidance Manual for Rating Aspect of the Long-Term Care Insurance Model Regulation, "Guidance Manual" Q&A): Morbidity, Lapse, Mortality, Interest
    - i. Comparison with asset adequacy testing reserve assumptions
      - a) Explain the consistency regarding actuarial assumptions between the rate increase filing and the most recent asset adequacy (reserve) testing filing. [The assumptions underlying the rate increase request are consistent with the most recent asset adequacy testing.](#)
      - b) Additional reserves that the company is holding above NAIC Model Reg 10 formula reserves should be provided, (such as premium deficiency reserves and Actuarial Guideline 51 reserves). [No additional reserves are currently being held.](#)
    - ii. Assumptions Template in Appendix 6 of the *NAIC Guidance Manual for Rating Aspect of the Long-Term Care Insurance Model Regulation (Guidance Manual)* (for policies issued after 2017, where applicable) [This is not applicable as the policies included in this filing were not issued after 2017.](#)
    - iii. Provide actuarial assumptions from original pricing and most recent rate increase filing and have the original actuarial memorandum available upon request. [Attachment 3 – Original Pricing Assumptions displays the assumptions used in the development of the initial premiums for the forms included in this filing. Attachment 4 - Assumption Comparison compares the current assumptions to the assumptions from the previous rate increases.](#)
  - H. Guidance Manual Checklist items: summaries (including past rate adjustments); average premium; distribution of business, including rate increases by state; underwriting; policy design and margins; actuarial assumptions; experience data; loss ratios; rationale for increase; reserve description [See the Actuarial Memorandum with exhibits and attachments to this document.](#)
  - I. Assert that analysis complies with actuarial standards of practice, including 18 & 41. [We assert that this analysis complies with ASOP 18 and 41.](#)
  - J. Numerical exhibits should be provided in Excel spreadsheets with active formulas maintained, where possible. [Numerical exhibits are also provided in Excel spreadsheets with active formulas. The Excel spreadsheets have been included in the Supporting Documentation tab in SERFF.](#)
4. Rate Comparison Statement of renewal premiums with new business premiums, if applicable. [The Rate Comparison Statement of renewal premiums in relation to the new business premiums is included in the Actuarial Memorandum.](#)
5. Policyholder notification letter – should be clear and accurate. [Attachment 5 – Policyholder Notification Letter is enclosed for your review. Please note that this attachment represents a recently submitted notification letter from a previous rate increase filing for a different LTCi policy form.](#)
- A. Provide a description of options for policyholders in lieu of or to reduce the increase. [The notification letter will include options for policyholders to mitigate the impact of the proposed rate increase as well as encourage the policyholder to contact our Customer Service team for additional options.](#)
  - B. If inflation protection is removed or reduced, is accumulated inflation protection vested? [A policyholder has the option to remove or reduce their respective inflation benefit if they have this benefit. If they remove this benefit, the policyholder can either retain their current daily benefit amount, revert to their initial daily benefit amount, or choose a daily benefit amount between their](#)

- current daily benefit amount and their initial daily benefit amount by paying the appropriate premium. If they reduce their inflation protection the accumulated inflation protection is vested.
- C. Explain the comparison of value between the rate increase and policyholder options. The policyholder will have the option to offset the impact of the increase by decreasing their benefit period, increasing their elimination period, reducing their maximum daily benefit, or accept the nonforfeiture option, which will be offered to all policyholders.
  - D. Are future rate increases expected if the rate increase is approved in full? If so, how is this communicated to policyholders? If the increases are approved as requested, we do not anticipate any future rate increases. However, we will closely monitor the future experience to determine if future corrective action is warranted. We do not communicate this to policyholders as this implies that the premiums would be guaranteed, and, the policy contract states we have the right to change premiums
  - E. How are partnership policies addressed? There are not any partnership policies included in this filing.
6. Actuarial certification and rate stabilization information, as described in the Guidance Manual and Contingent benefit upon lapse information, including reserve treatment. The Actuarial Certification, as described in the Guidance Manual, is attached to the Actuarial Memorandum.
-

Note regarding this document:

Commissioners on the Long-Term Care Insurance (B/E) Task Force requested that the LTC Pricing Subgroup develop a single checklist that reflects significant aspects of LTC rate increase review inquiries from all of the states. In this context, “checklist” means the list of inquiries (often a template) that states typically send at the beginning of reviews of rate increase filings.

This document contains aspects of the NAIC Guidance Manual and checklists developed by several other states. This single checklist is not intended to prevent a state from asking for additional information. The intent is to take a step toward moving away from 50 states having 50 different checklists in order to have a more efficient process nationally to provide the most important information needed to determine an approvable rate increase. To keep the template at a manageable length, it is anticipated that this template will result in states attaining 90 to 100 percent of the information necessary to make a decision about determining approvable rate increases. State and block specifics will generate the other zero to 10 percent of requests.

This consolidated checklist can be presented to the LTC B/E Task Force prior to or at the March 2018 NAIC national meeting. As states apply this checklist, this checklist or an improved version may be considered for future addition to the *Guidance Manual*.

W:\National Meetings\2018\Spring\TF\HA\Conference Calls\3-1 LTCPSG\LTC\_Price\_SG\_Review\_Template\_030118\_Final.docx

To assist in the multi-state actuarial review, the following, additional information, would be helpful, where applicable: [Items 1, 2, 5, 6, and 8 can be found in the Actuarial Memorandum and the LTC Rate Increase Template.](#)

1. Benefit utilization:
  - a. Current, prior rate increase, and original assumptions; including first-projection year through ultimate utilization percentages for 5% compound inflation, lesser inflation, and zero inflation cells;
  - b. Explain how benefit utilization assumptions vary by maximum daily benefit;
  - c. Provide the cost of care inflation assumption implied in the benefit utilization assumption.
2. Attribution of rate increase
  - a. Provide the attribution of rate increase by factor: morbidity, mortality, lapse, investment, other;
  - b. For the morbidity factor, break down the attribution by incidence, claim length, benefit utilization, and other.
  - c. Provide information on the assumptions that are especially sensitive to small changes in assumptions.
3. Reduced benefit options (RBOs)
  - a. Provide the history of RBOs offered and accepted for the block. [Not applicable as we have not offered RBO's in lieu of a rate increase.](#)
  - b. Provide a reasonability analysis of the value of each significant type of offered RBO. [Not applicable as we have not offered RBO's in lieu of a rate increase.](#)
4. Investment returns
  - a. Provide original and updated / average investment return assumptions underlying the pricing. Explain how the updated assumption reflects experience. [Investment returns are not included in the analysis of the experience and have no impact on the requested rate increase.](#)
5. Expected loss ratio
  - a. With respect to the initial rate filing and each subsequent rate increase filing, provide the target loss ratio. Provide separate ratios for lifetime premium periods and non-lifetime premium periods and also for inflation-protected and non-inflation-protected blocks.
6. Shock lapse history
  - a. Provide shock lapse data related to prior rate increases on this block.
7. Waiver of premium handling
  - a. Explain how policies with premiums waived are handled in the exhibits of premiums and incurred claims, and explain how counting is appropriate (as opposed to double counting or undercounting). [This is explained in Section 3.C.ii. of the LTC Rate Increase Template.](#)
8. Actual-to-expected differences
  - a. Explain how differences between actual and expected counts or percentages (in the provided exhibits) are reflected or not reflected in assumptions.

9. Impact of COVID-19 on claims. We agree with a recent paper drafted by AHIP which states the following:

The recent short-term impacts of COVID on LTCI experience do not materially impact the expected, long-term experience and lifetime loss ratios of the block, and therefore actuarially justified rate increases should not be delayed or disapproved.

It is important to note that delays in approvals of actuarially justified increases can cause the ultimate rate increase to be higher because the increase is applied to fewer future premiums.

Delaying, or disapproving, actuarially justified rate increases solely due to short-term experience is not consistent with the long-term view that must be taken to reasonably manage LTCI business. The impact of a short-term variance in claims does not materially impact either the lifetime or future expected claims and it would not be prudent for either companies or state regulators to delay rate increases on LTCI blocks where such increases are warranted.

10. Assumption consistency with the most recent asset adequacy testing

- a. Explain the consistency or any significant differences between assumptions underlying the rate increase request and those included in Actuarial Guideline 51 testing. This is explained in Section G of the LTC Rate Increase Template.

**Nationwide**

**Virginia**

**Covered Lives**

**Covered Lives**

<u>Year</u>	<u>Covered Lives</u>
2015	34,481
2016	33,472
2017	32,052
2018	30,516
2019	29,039

<u>Year</u>	<u>Covered Lives</u>
2015	1,574
2016	1,551
2017	1,488
2018	1,412
2019	1,356

**Claim Counts**

**Claim Counts**

<u>Incurred Year</u>	<u>Claim Counts</u>
2015	919
2016	948
2017	975
2018	1,042
2019	787

<u>Incurred Year</u>	<u>Claim Counts</u>
2015	46
2016	40
2017	40
2018	41
2019	18

**Nationwide Distribution by Issue Age**

<u>Issue Age</u>	<u>In-Force</u>	<u>Distribution</u>
50 & Less	1,763	6.1%
50-54	3,494	12.0%
55-59	5,838	20.1%
60-64	8,655	29.8%
65-69	6,161	21.2%
70-74	2,387	8.2%
75-79	651	2.2%
80 & Over	90	0.3%

**Nationwide Distribution by Inflation Option**

<u>Inflation Option</u>	<u>In-Force</u>	<u>Distribution</u>
No Inflation	18,072	62.2%
5% Compound	10,967	37.8%

**Nationwide Distribution by Benefit Period**

<u>Benefit Period</u>	<u>In-Force</u>	<u>Distribution</u>
Non-Lifetime	15,033	51.8%
Lifetime	14,006	48.2%

**Nationwide Distribution by Elimination Period**

<u>Elimination Period</u>	<u>In-Force</u>	<u>Distribution</u>
0 Days	5,901	20.3%
20 Days	5,828	20.1%
80 Days	61	0.2%
90 Days	14,875	51.2%
100 Days	1,924	6.6%
180 Days	450	1.5%

**Form LT50**

## 1. MORTALITY

110% in the first policy year, grading linearly to 130% over 20 years, of the 1983 GAM Tables blended 40% male, 60% female.

## 2. INTEREST

4.50% all years

## 3. VOLUNTARY LAPSE RATES

Policy Year	Issue Age	<u>47 &amp; Under</u>	<u>52</u>	<u>57</u>	<u>62</u>	<u>67</u>	<u>72</u>	<u>77</u>	<u>82</u>
1		0.190	0.180	0.160	0.140	0.130	0.120	0.110	0.100
2		0.160	0.140	0.120	0.100	0.095	0.090	0.085	0.080
3		0.130	0.110	0.090	0.070	0.065	0.065	0.060	0.060
4		0.100	0.085	0.075	0.065	0.060	0.055	0.055	0.055
5		0.080	0.070	0.065	0.060	0.055	0.050	0.050	0.050
6		0.070	0.060	0.055	0.055	0.050	0.050	0.050	0.050
7		0.060	0.055	0.050	0.050	0.050	0.050	0.050	0.050
8		0.055	0.050	0.050	0.050	0.050	0.050	0.050	0.050
9 on		0.050	0.050	0.050	0.050	0.050	0.050	0.050	0.050

## 4. CLAIM COSTS

Claim costs used in pricing were developed from:

- a) Tabulations from the 1985 National Nursing Home Survey conducted by the Long-Term Care Experience Committee, published in the Transactions Society of Actuaries, 1988-89-90 Reports.
- b) 1982, 1984, and 1989 National LTC Surveys
- c) Statistics published by gerontological researchers concerning cognitive and functional impairment prevalence rates and recovery rates.
- d) Wakely and Associates, Inc client company experience.

## 5. MODAL ASSUMPTIONS

75% annual mode, 25% monthly mode.

Modal Loading Factors:

Annual:	1.0000
Semi-Annual:	0.5000
Quarterly:	0.2500
Monthly:	0.0833



## 6. DISTRIBUTION OF BUSINESS ASSUMPTIONS (Percent policies issued)

## a) Distribution by Issue Age

<u>Issue Age</u>	<u>Percent Distribution</u>
37	1%
42	2%
47	3%
52	4%
57	8%
62	19%
67	23%
72	20%
77	13%
82	7%

## c) Distribution by Elimination Period Option

<u>Elimination Option</u>	<u>Percent Distribution</u>
0 Day	30%
20 Day	20%
100 Day	50%
365 Day	Less than 1%

## d) Distribution by Coverage Option

<u>Coverage Option</u>	<u>Percent Distribution</u>
Base Policy	100%
Inflation Rider	20%
SBP Rider	2%

## b) Distribution by Benefit Option

<u>Benefit Option</u>	<u>Percent Distribution</u>
1 Year*	5%
2 Year	10%
3 Year	20%
5 Year	15%
Lifetime	50%

## e) Average Confined Care Daily Benefit amount

\$80 per day

## f) Percent Distribution by Premium Payment Method

<u>Payment Method</u>	<u>Percent Distribution</u>
Individual	90%
Group Spon	10%

Form NH50

## 1. MORTALITY

110% in the first policy year, grading linearly to 130% over 20 years, of the 1983 GAM Tables blended 40% male, 60% female.

## 2. INTEREST

4.50% all years

## 3. VOLUNTARY LAPSE RATES

Policy Year	Issue Age <u>47 &amp; Under</u>	<u>52</u>	<u>57</u>	<u>62</u>	<u>67</u>	<u>72</u>	<u>77</u>	<u>82</u>
1	0.190	0.180	0.160	0.140	0.130	0.120	0.110	0.100
2	0.160	0.140	0.120	0.100	0.095	0.090	0.085	0.080
3	0.130	0.110	0.090	0.070	0.065	0.065	0.060	0.060
4	0.100	0.085	0.075	0.065	0.060	0.055	0.055	0.055
5	0.080	0.070	0.065	0.060	0.055	0.050	0.050	0.050
6	0.070	0.060	0.055	0.055	0.050	0.050	0.050	0.050
7	0.060	0.055	0.050	0.050	0.050	0.050	0.050	0.050
8	0.055	0.050	0.050	0.050	0.050	0.050	0.050	0.050
9 on	0.050	0.050	0.050	0.050	0.050	0.050	0.050	0.050

## 4. CLAIM COSTS

Claim costs used in pricing were developed from:

- a) Tabulations from the 1985 National Nursing Home Survey conducted by the Long-Term Care Experience Committee, published in the Transactions Society of Actuaries, 1988-89-90 Reports.
- b) 1982, 1984, and 1989 National LTC Surveys
- c) Statistics published by gerontological researchers concerning cognitive and functional impairment prevalence rates and recovery rates.
- d) Wakely and Associates, Inc client company experience.

## 5. MODAL ASSUMPTIONS

75% annual mode, 25% monthly mode.

Modal Loading Factors:

Annual:	1.0000
Semi-Annual:	0.5000
Quarterly:	0.2500
Monthly:	0.0833

6. DISTRIBUTION OF BUSINESS ASSUMPTIONS (Percent policies issued)

a) Distribution by Issue Age

<u>Issue Age</u>	<u>Percent Distribution</u>
37	1%
42	2%
47	3%
52	4%
57	8%
62	19%
67	23%
72	20%
77	13%
82	7%

c) Distribution by Elimination Period Option

<u>Elimination Option</u>	<u>Percent Distribution</u>
0 Day	30%
20 Day	20%
100 Day	50%
365 Day	Less than 1%

d) Distribution by Coverage Option

<u>Coverage Option</u>	<u>Percent Distribution</u>
Base Policy	100%
Inflation Rider	20%
SBP Rider	2%

b) Distribution by Benefit Option

<u>Benefit Option</u>	<u>Percent Distribution</u>
1 Year*	5%
2 Year	10%
3 Year	20%
5 Year	15%
Lifetime	50%

e) Average Confined Care Daily Benefit amount

\$80 per day

f) Percent Distribution by Premium Payment Method

<u>Payment Method</u>	<u>Percent Distribution</u>
Individual	90%
Group Spon	10%

**Forms HCA/HCAQ**

## 1. MORTALITY

110% in the first policy year, grading linearly to 130% over 20 years, of the 1983 GAM Tables blended 40% male, 60% female.

## 2. INTEREST

4.50% all years

## 3. VOLUNTARY LAPSE RATES

Policy Year	Issue Age <u>47 &amp; Under</u>	<u>52</u>	<u>57</u>	<u>62</u>	<u>67</u>	<u>72</u>	<u>77</u>	<u>82</u>
1	0.190	0.180	0.160	0.140	0.130	0.120	0.110	0.100
2	0.160	0.140	0.120	0.100	0.095	0.090	0.085	0.080
3	0.130	0.110	0.090	0.070	0.065	0.065	0.060	0.060
4	0.100	0.085	0.075	0.065	0.060	0.055	0.055	0.055
5	0.080	0.070	0.065	0.060	0.055	0.055	0.055	0.055
6	0.070	0.060	0.055	0.055	0.055	0.055	0.055	0.055
7	0.060	0.055	0.055	0.055	0.055	0.055	0.055	0.055
8 on	0.055	0.055	0.055	0.055	0.055	0.055	0.055	0.055

## 4. CLAIM COSTS

Claim costs used in pricing were developed from:

- a) Tabulations from the 1992 National Home and Hospice Care Survey; Source: Department of Health and Human Services, National Center for Health Statistics.
- b) Tabulations from the 1985 National Nursing Home Survey conducted by the Long-Term Care Experience Committee, published in the Transactions Society of Actuaries, 1988-89-90 Reports.
- c) 1982, 1984, and 1989 National LTC Surveys
- d) Statistics published by gerontological researchers concerning cognitive and functional impairment prevalence rates and recovery rates.
- e) Wakely and Associates, Inc client company experience and Mutual of Omaha Company experience

## 5. MODAL ASSUMPTIONS

55% annual mode, 45% monthly mode.

Modal Loading Factors:

Annual:	1.00000
Semi-Annual:	0.52000
Quarterly:	0.26000
Monthly:	0.08700

## 6. DISTRIBUTION OF BUSINESS ASSUMPTIONS (Percent policies issued)

## a) Distribution by Issue Age

<u>Issue Age</u>	<u>Percent Distribution</u>
37	1%
42	1%
47	1%
52	2%
57	6%
62	12%
67	19%
72	22%
77	21%
82	15%

## c) Distribution by Elimination Period Option

<u>Elimination Option</u>	<u>Percent Distribution</u>
20 Day	100%

## d) Distribution by Coverage Option

<u>Coverage Option</u>	<u>Percent Distribution</u>
Base Policy	100%
Confined Care Rider	25%
Inflation Rider	10%
SBP Rider	2%
ROP Rider	5%
Tax-Qualified Rider	10%

## b) Distribution by Benefit Option

<u>Benefit Option</u>	<u>Percent Distribution</u>
1 Year*	10%
2 Year	30%
3 Year	30%
5 Year	5%
Lifetime	25%

## e) Average Home Health Care Daily Benefit amount

\$90 per day

\*The 1 year benefit period is not available in AZ, GA, ME, MD, MA, NH, NJ, and WV.

**Forms LTA/LTAQ**

## 1. MORTALITY

110% in the first policy year, grading linearly to 130% over 20 years, of the 1983 GAM Tables blended 40% male, 60% female.

## 2. INTEREST

4.50% all years

## 3. VOLUNTARY LAPSE RATES

Policy Year	Issue Age <u>47 &amp; Under</u>	<u>52</u>	<u>57</u>	<u>62</u>	<u>67</u>	<u>72</u>	<u>77</u>	<u>82</u>
1	0.190	0.180	0.160	0.140	0.130	0.120	0.110	0.100
2	0.160	0.140	0.120	0.100	0.095	0.090	0.085	0.080
3	0.130	0.110	0.090	0.070	0.065	0.065	0.060	0.060
4	0.100	0.085	0.075	0.065	0.060	0.055	0.055	0.055
5	0.080	0.070	0.065	0.060	0.055	0.050	0.050	0.050
6	0.070	0.060	0.055	0.055	0.050	0.050	0.050	0.050
7	0.060	0.055	0.050	0.050	0.050	0.050	0.050	0.050
8	0.055	0.050	0.050	0.050	0.050	0.050	0.050	0.050
9 on	0.050	0.050	0.050	0.050	0.050	0.050	0.050	0.050

## 4. CLAIM COSTS

Claim costs used in pricing were developed from:

- a) Tabulations from the 1985 National Nursing Home Survey conducted by the Long-Term Care Experience Committee, published in the Transactions Society of Actuaries, 1988-89-90 Reports.
- b) Tabulations from the 1992 National Home and Hospice Care Survey; Source: Department of Health and Human Services, National Center for Health Statistics.
- c) 1982, 1984, and 1989 National LTC Surveys
- d) Statistics published by gerontological researchers concerning cognitive and functional impairment prevalence rates and recovery rates.
- e) Wakely and Associates, Inc client company experience and Mutual of Omaha Company experience

## 5. MODAL ASSUMPTIONS

70% annual mode, 30% monthly mode.

Modal Loading Factors:

Annual:	1.00000
Semi-Annual:	0.52000
Quarterly:	0.26000
Monthly:	0.08700

6. DISTRIBUTION OF BUSINESS ASSUMPTIONS (Percent policies issued)

a) Distribution by Issue Age

<u>Issue Age</u>	<u>Percent Distribution</u>
37	1%
42	1%
47	1%
52	2%
57	6%
62	12%
67	19%
72	22%
77	21%
82	15%

c) Distribution by Elimination Period Option

<u>Elimination Option</u>	<u>Percent Distribution</u>
0 Day	60%
20 Day	10%
90 Day	30%

d) Distribution by Coverage Option

<u>Coverage Option</u>	<u>Percent Distribution</u>
Base Policy	100%
Home Health Care Rider	45%
Inflation Rider	10%
SBP Rider	2%
ROP Rider	5%
Tax-Qualified Rider	10%

b) Distribution by Benefit Option

<u>Benefit Option</u>	<u>Percent Distribution</u>
1 Year*	2.5%
2 Year**	10.0%
3 Year	25.0%
5 Year	2.5%
Lifetime	60.0%

e) Average Confined Care Daily Benefit amount

\$90 per day

\*The 1 year benefit period is not available in AZ, FL, GA, ME, MD, MA, NH, NJ, and WV.

\*\*The 2 year benefit period is not available in FL.

**Forms NHA/NHAQ**

## 1. MORTALITY

110% in the first policy year, grading linearly to 130% over 20 years, of the 1983 GAM Tables blended 40% male, 60% female.

## 2. INTEREST

4.50% all years

## 3. VOLUNTARY LAPSE RATES

Policy Year	Issue Age <u>47 &amp; Under</u>	<u>52</u>	<u>57</u>	<u>62</u>	<u>67</u>	<u>72</u>	<u>77</u>	<u>82</u>
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4	0.100	0.085	0.075	0.065	0.060	0.055	0.055	0.055
5	0.080	0.070	0.065	0.060	0.055	0.050	0.050	0.050
6	0.070	0.060	0.055	0.055	0.050	0.050	0.050	0.050
7	0.060	0.055	0.050	0.050	0.050	0.050	0.050	0.050
8	0.055	0.050	0.050	0.050	0.050	0.050	0.050	0.050
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## 4. CLAIM COSTS

Claim costs used in pricing were developed from:

- a) Tabulations from the 1985 National Nursing Home Survey conducted by the Long-Term Care Experience Committee, published in the Transactions Society of Actuaries, 1988-89-90 Reports.
- b) Tabulations from the 1992 National Home and Hospice Care Survey; Source: Department of Health and Human Services, National Center for Health Statistics.
- c) 1982, 1984, and 1989 National LTC Surveys
- d) Statistics published by gerontological researchers concerning cognitive and functional impairment prevalence rates and recovery rates.
- e) Wakely and Associates, Inc client company experience and Mutual of Omaha Company experience

## 5. MODAL ASSUMPTIONS

70% annual mode, 30% monthly mode.

Modal Loading Factors:

Annual:	1.00000
Semi-Annual:	0.52000
Quarterly:	0.26000
Monthly:	0.08700



## 6. DISTRIBUTION OF BUSINESS ASSUMPTIONS (Percent policies issued)

## a) Distribution by Issue Age

<u>Issue Age</u>	<u>Percent Distribution</u>
37	1%
42	1%
47	1%
52	2%
57	6%
62	12%
67	19%
72	22%
77	21%
82	15%

## c) Distribution by Elimination Period Option

<u>Elimination Option</u>	<u>Percent Distribution</u>
0 Day	60%
20 Day	10%
90 Day	30%

## d) Distribution by Coverage Option

<u>Coverage Option</u>	<u>Percent Distribution</u>
Base Policy	100%
Home Health Care Rider	50%
Inflation Rider	10%
SBP Rider	2%
ROP Rider	5%
Tax-Qualified Rider	10%

## b) Distribution by Benefit Option

<u>Benefit Option</u>	<u>Percent Distribution</u>
1 Year*	9%
2 Year**	12%
3 Year	14%
5 Year	5%
Lifetime	60%

## e) Average Confined Care Daily Benefit amount

\$90 per day

\*The 1 year benefit period is not available in AZ, FL, GA, ME, MD, MA, NH, NJ, and WV.

\*\*The 2 year benefit period is not available in FL.

Lifetime Experience (Nationwide) as of 12/31/2019

Non-Lifetime Benefit Period's

Year	Non-Interest Adjusted				Interest Adjusted			
	Original Premium	Increased Premium	Incurred Claims	Loss Ratios	Original Premium	Increased Premium	Incurred Claims	Loss Ratios
1997	493,144	0	0	0.0%	1,327,670	0	0	0.0%
1998	2,879,303	0	107,337	3.7%	7,418,014	0	276,536	3.7%
1999	5,164,376	0	620,404	12.0%	12,732,151	0	1,529,531	12.0%
2000	8,538,676	0	1,279,042	15.0%	20,144,580	0	3,017,537	15.0%
2001	13,296,598	0	2,429,336	18.3%	30,018,702	0	5,484,523	18.3%
2002	19,842,983	0	4,609,510	23.2%	42,868,871	0	9,958,407	23.2%
2003	27,120,845	738,939	3,660,230	13.1%	56,068,896	1,527,663	7,567,060	13.1%
2004	28,222,177	3,401,603	5,980,398	18.9%	55,833,264	6,729,551	11,831,302	18.9%
2005	28,236,306	3,902,757	8,695,825	27.1%	53,455,710	7,388,524	16,462,547	27.1%
2006	27,254,820	3,966,051	9,349,851	29.9%	49,375,697	7,185,025	16,938,486	29.9%
2007	26,137,563	4,291,272	12,030,566	39.5%	45,312,572	7,439,431	20,856,417	39.5%
2008	24,975,406	4,903,116	13,701,296	45.9%	41,433,336	8,134,100	22,729,977	45.9%
2009	23,799,097	4,751,727	16,629,707	58.2%	37,781,703	7,543,494	26,400,105	58.2%
2010	22,631,201	4,542,802	18,769,491	69.1%	34,380,514	6,901,263	28,513,942	69.1%
2011	21,469,322	4,797,104	21,251,812	80.9%	31,210,937	6,973,770	30,894,732	80.9%
2012	21,298,943	6,764,278	26,519,916	94.5%	29,629,902	9,410,086	36,893,029	94.5%
2013	20,542,147	7,266,674	25,861,729	93.0%	27,346,498	9,673,677	34,428,131	93.0%
2014	19,456,618	7,147,883	26,501,364	99.6%	24,786,029	9,105,778	33,760,419	99.6%
2015	18,947,531	7,110,006	30,711,106	117.9%	23,098,083	8,667,489	37,438,528	117.9%
2016	18,872,688	7,380,896	35,535,639	135.4%	22,016,120	8,610,257	41,454,448	135.4%
2017	18,175,773	7,095,049	39,305,182	155.5%	20,290,073	7,920,382	43,877,364	155.5%
2018	17,161,938	6,892,429	44,879,139	186.6%	18,333,303	7,362,863	47,942,310	186.6%
2019	15,938,034	6,498,230	45,179,490	201.4%	16,292,695	6,642,831	46,184,843	201.4%
Total	430,455,489	91,450,818	393,608,369	75.4%	701,155,320	127,216,185	524,440,173	63.3%
2020	14,425,478	5,890,000	31,601,246	155.6%	14,111,464	5,761,786	30,913,350	155.6%
2021	12,778,642	6,113,536	33,360,385	176.6%	11,962,179	5,722,925	31,228,895	176.6%
2022	11,318,677	7,780,166	33,742,180	176.7%	10,139,229	6,969,444	30,226,120	176.7%
2023	10,013,319	6,889,065	34,036,578	201.4%	8,583,631	5,905,454	29,176,881	201.4%
2024	8,853,464	6,095,774	34,147,893	228.4%	7,262,563	5,000,410	28,011,773	228.4%
2025	7,813,013	5,382,630	34,261,418	259.6%	6,133,084	4,225,274	26,894,640	259.6%
2026	6,878,866	4,741,253	34,337,880	295.5%	5,167,268	3,561,535	25,793,935	295.5%
2027	6,031,429	4,157,855	34,292,768	336.6%	4,335,588	2,988,802	24,650,763	336.6%
2028	5,262,488	3,627,607	33,993,392	382.4%	3,619,950	2,495,351	23,383,312	382.4%
2029	4,567,719	3,148,123	33,329,501	432.0%	3,006,732	2,072,273	21,939,365	432.0%
2030	3,947,587	2,720,014	32,476,943	487.1%	2,486,627	1,713,366	20,457,572	487.1%
2031	3,398,078	2,340,597	31,502,315	548.9%	2,048,311	1,410,878	18,989,133	548.9%
2032	2,909,732	2,003,196	30,388,831	618.5%	1,678,415	1,155,499	17,529,130	618.5%
2033	2,475,952	1,703,260	29,056,283	695.3%	1,366,697	940,180	16,038,736	695.3%
2034	2,096,541	1,441,002	27,444,384	775.8%	1,107,432	761,164	14,496,638	775.8%
2035	1,766,477	1,212,969	25,718,939	863.2%	892,905	613,120	13,000,215	863.2%
2036	1,480,754	1,015,687	23,990,799	961.0%	716,249	491,293	11,604,486	961.0%
2037	1,234,897	846,076	22,268,623	1070.1%	571,604	391,629	10,307,617	1070.1%
2038	1,024,233	700,884	20,516,491	1189.3%	453,678	310,452	9,087,653	1189.3%
2039	844,601	577,243	18,655,910	1312.1%	358,001	244,676	7,907,674	1312.1%
2040	692,046	472,419	16,853,038	1447.3%	280,706	191,621	6,835,877	1447.3%
2041	563,043	383,952	15,174,040	1602.3%	218,545	149,031	5,889,806	1602.3%
2042	454,653	309,760	13,561,309	1774.1%	168,874	115,056	5,037,152	1774.1%
2043	364,202	247,957	12,008,750	1961.7%	129,452	88,134	4,268,399	1961.7%
2044	289,692	197,159	10,483,740	2153.4%	98,534	67,060	3,565,883	2153.4%
2045	228,673	155,646	9,015,090	2345.7%	74,430	50,661	2,934,301	2345.7%
2046	179,127	121,999	7,672,127	2547.8%	55,793	37,999	2,389,649	2547.8%
2047	139,231	94,943	6,481,684	2767.9%	41,499	28,299	1,931,923	2767.9%
2048	107,405	73,375	5,437,306	3007.7%	30,635	20,928	1,550,849	3007.7%
2049	82,247	56,323	4,511,127	3255.5%	22,449	15,373	1,231,273	3255.5%
2050	62,479	42,913	3,698,530	3509.3%	16,319	11,208	966,011	3509.3%
2051	47,121	32,479	3,010,449	3781.9%	11,778	8,118	752,433	3781.9%
2052	35,270	24,404	2,435,602	4081.5%	8,436	5,837	582,542	4081.5%
2053	26,250	18,239	1,956,224	4397.2%	6,008	4,174	447,737	4397.2%
2054	19,450	13,571	1,560,663	4726.3%	4,260	2,972	341,820	4726.3%
2055	14,335	10,042	1,232,574	5056.3%	3,004	2,105	258,336	5056.3%
2056	10,513	7,391	968,320	5408.6%	2,108	1,482	194,211	5408.6%
2057	7,667	5,407	756,616	5787.1%	1,472	1,038	145,216	5787.1%
2058	5,552	3,924	585,696	6180.7%	1,020	721	107,571	6180.7%
2059	3,992	2,826	448,104	6572.3%	702	497	78,756	6572.3%
2060	2,839	2,012	337,322	6954.3%	477	338	56,733	6954.3%
2061	1,992	1,412	248,933	7313.9%	321	227	40,064	7313.9%
2062	1,370	971	180,078	7691.5%	211	150	27,734	7691.5%
2063	924	655	127,407	8065.5%	136	97	18,777	8065.5%
2064	611	433	87,629	8395.7%	86	61	12,359	8395.7%
2065	393	279	58,332	8681.8%	53	38	7,873	8681.8%
2066	245	174	37,448	8925.7%	32	22	4,836	8925.7%
2067	148	105	23,204	9162.3%	18	13	2,868	9162.3%
2068	85	61	13,695	9369.3%	10	7	1,620	9369.3%
2069	46	33	7,613	9628.4%	5	4	862	9628.4%
2070	16	11	2,119	7825.8%	2	1	229	7825.8%
2071	1	0	1,046	103938.1%	0	0	108	103938.1%
2072	0	0	0	0.0%	0	0	0	0.0%
2073	0	0	0	0.0%	0	0	0	0.0%
2074	0	0	0	0.0%	0	0	0	0.0%
2075	0	0	0	0.0%	0	0	0	0.0%
2076	0	0	0	0.0%	0	0	0	0.0%
Total	112,463,564	70,667,810	718,098,572	392.1%	87,178,982	53,538,786	451,321,698	320.7%
Grand Total	542,919,053	162,118,628	1,111,706,941	157.7%	788,334,302	180,754,970	975,761,871	100.7%

Minimum Required Loss Ratios	60%	85%	
Minimum PV Incurred Claims	473,000,581	153,641,725	626,642,306
Dual Loss Ratio Test Met	975,761,871	>	626,642,306

Lifetime Experience (Nationwide) as of 12/31/2019

Lifetime Benefit Period

Year	Non-Interest Adjusted				Interest Adjusted		
	Original Premium	Increased Premium	Incurred Claims	Loss Ratios	Original Premium	Increased Premium	Incurred Claims
1997	379,977	0	0	0.0%	1,022,995	0	0
1998	2,595,131	0	229,543	8.8%	6,685,894	0	591,378
1999	5,659,399	0	581,891	10.3%	13,952,573	0	1,434,582
2000	11,774,776	0	1,523,171	12.9%	27,779,237	0	3,593,490
2001	20,610,805	0	4,550,872	22.1%	46,531,422	0	10,274,153
2002	30,785,341	0	5,455,702	17.7%	66,508,790	0	11,786,523
2003	41,521,354	1,415,350	9,780,632	22.8%	85,840,116	2,926,055	20,220,212
2004	42,601,415	6,504,639	12,851,585	26.2%	84,280,387	12,868,434	25,424,896
2005	42,549,495	7,202,255	16,132,072	32.4%	80,552,796	13,634,986	30,540,515
2006	41,569,288	7,314,473	15,462,707	31.6%	75,308,242	13,251,131	28,012,730
2007	40,578,811	7,830,896	23,737,573	49.0%	70,348,194	13,575,790	41,151,906
2008	39,543,234	8,727,173	31,791,240	65.9%	65,600,859	14,478,079	52,740,568
2009	38,374,783	8,563,568	29,994,927	63.9%	60,920,995	13,594,893	47,617,749
2010	37,146,288	8,318,336	45,629,630	100.4%	56,431,316	12,636,920	69,318,907
2011	34,498,737	8,994,853	48,785,419	112.2%	50,152,393	13,076,229	70,921,597
2012	30,211,136	13,175,709	48,436,267	111.6%	42,028,049	18,329,313	67,381,836
2013	27,379,304	15,415,002	50,816,851	118.7%	36,448,385	20,521,045	67,649,351
2014	26,049,969	15,637,450	44,201,692	106.0%	33,185,380	19,920,743	56,309,088
2015	23,614,914	16,470,284	51,126,790	127.5%	28,787,879	20,078,183	62,326,370
2016	20,570,267	19,045,577	51,635,806	130.3%	23,996,447	22,217,805	60,236,257
2017	18,518,005	20,959,983	55,470,317	140.5%	20,672,115	23,398,157	61,922,913
2018	16,815,608	21,476,268	69,307,052	181.0%	17,963,337	22,942,104	74,037,520
2019	15,413,631	20,977,954	50,503,757	138.8%	15,756,622	21,444,764	51,627,588
<b>Total</b>	<b>608,761,666</b>	<b>208,029,769</b>	<b>668,005,496</b>	<b>81.8%</b>	<b>1,010,754,424</b>	<b>278,894,630</b>	<b>915,120,129</b>
2020	14,335,181	19,509,471	56,153,461	165.9%	14,023,133	19,084,788	54,931,111
2021	13,041,145	20,060,182	61,540,853	185.9%	12,207,909	18,778,480	57,608,833
2022	11,809,577	26,332,817	64,512,829	169.1%	10,578,975	23,588,841	57,790,355
2023	10,651,507	28,858,927	67,421,501	170.6%	9,130,699	24,738,488	57,795,151
2024	9,591,498	25,993,532	70,146,118	197.1%	7,867,978	21,322,690	57,541,388
2025	8,619,325	23,363,053	72,947,145	228.1%	6,766,026	18,339,606	57,262,288
2026	7,725,695	20,942,805	75,685,819	264.0%	5,803,389	15,731,819	56,853,686
2027	6,901,820	18,709,274	78,146,781	305.1%	4,961,254	13,448,838	56,174,461
2028	6,145,883	16,659,363	80,067,229	351.1%	4,227,619	11,459,612	55,076,499
2029	5,451,495	14,775,988	81,283,612	401.8%	3,588,483	9,726,392	53,505,477
2030	4,821,872	13,068,859	82,118,724	459.0%	3,037,348	8,232,213	51,727,459
2031	4,248,537	11,514,220	82,540,147	523.6%	2,560,956	6,940,603	49,753,988
2032	3,725,851	10,096,836	82,398,412	596.1%	2,149,175	5,824,138	47,529,715
2033	3,246,602	8,796,808	81,484,545	676.6%	1,792,087	4,855,737	44,978,537
2034	2,815,614	7,628,738	79,678,534	762.9%	1,487,260	4,029,642	42,087,693
2035	2,432,210	6,590,646	77,322,217	857.0%	1,229,415	3,331,390	39,084,251
2036	2,090,474	5,665,831	74,596,137	961.7%	1,011,174	2,740,595	36,082,577
2037	1,787,145	4,845,472	71,455,275	1077.3%	827,227	2,242,854	33,074,951
2038	1,519,091	4,121,016	67,764,152	1201.5%	672,872	1,825,379	30,015,711
2039	1,283,445	3,484,655	63,353,126	1328.7%	544,013	1,477,040	26,853,468
2040	1,077,124	2,927,722	58,814,864	1468.6%	436,900	1,187,534	23,856,303
2041	896,996	2,441,569	54,369,039	1628.5%	348,169	947,695	21,103,351
2042	741,151	2,021,035	49,836,362	1804.2%	275,290	750,684	18,510,997
2043	606,248	1,656,713	45,109,884	1993.4%	215,485	588,863	16,033,889
2044	491,371	1,346,215	40,198,824	2187.6%	167,132	457,894	13,673,013
2045	395,717	1,087,489	35,369,276	2384.7%	128,801	353,964	11,512,265
2046	316,329	872,227	30,760,800	2588.1%	98,527	271,674	9,581,112
2047	250,825	694,214	26,626,294	2817.5%	74,761	206,917	7,936,202
2048	197,239	548,144	22,851,670	3065.8%	56,257	156,344	6,517,839
2049	153,863	429,444	19,375,282	3321.6%	41,996	117,213	5,288,317
2050	119,081	333,836	16,299,927	3598.9%	31,102	87,194	4,257,344
2051	91,467	257,544	13,610,782	3899.8%	22,861	64,371	3,401,887
2052	70,412	198,230	11,213,119	4174.0%	16,841	47,412	2,681,927
2053	53,705	151,107	9,205,946	4494.8%	12,292	34,585	2,107,040
2054	40,456	113,759	7,441,522	4825.4%	8,861	24,916	1,629,858
2055	30,322	85,209	5,962,436	5160.9%	6,355	17,859	1,249,670
2056	22,508	63,211	4,748,761	5539.9%	4,514	12,678	952,436
2057	16,517	46,355	3,755,665	5973.5%	3,170	8,897	720,818
2058	11,950	33,517	2,941,876	6470.3%	2,195	6,156	540,315
2059	8,501	23,827	2,261,824	6996.4%	1,494	4,188	397,526
2060	5,919	16,579	1,706,033	7583.2%	995	2,788	286,931
2061	4,015	11,238	1,266,058	8300.7%	646	1,809	203,764
2062	2,625	7,345	924,384	9271.2%	404	1,131	142,367
2063	1,635	4,571	662,542	10676.0%	241	674	97,646
2064	940	2,626	465,914	13068.9%	133	370	65,710
2065	490	1,369	322,190	17334.4%	66	185	43,483
2066	205	573	217,762	27992.3%	26	74	28,124
2067	35	97	143,886	109488.8%	4	12	17,783
2068	3	8	65,225	593787.9%	0	1	7,714
2069	0	0	0	0.0%	0	0	0
2070	0	0	0	0.0%	0	0	0
2071	0	0	0	0.0%	0	0	0
2072	0	0	0	0.0%	0	0	0
2073	0	0	0	0.0%	0	0	0
2074	0	0	0	0.0%	0	0	0
2075	0	0	0	0.0%	0	0	0
2076	0	0	0	0.0%	0	0	0
<b>Total</b>	<b>127,851,613</b>	<b>306,394,268</b>	<b>1,937,144,763</b>	<b>446.1%</b>	<b>96,422,513</b>	<b>223,073,227</b>	<b>1,118,573,231</b>
<b>Grand Total</b>	<b>736,613,279</b>	<b>514,424,037</b>	<b>2,605,150,259</b>	<b>208.2%</b>	<b>1,107,176,936</b>	<b>501,967,857</b>	<b>2,033,693,360</b>

Minimum Required Loss Ratios	60%	85%	
Minimum PV Incurred Claims	664,306,162	426,672,678	1,090,978,840
Dual Loss Ratio Test Met	2,033,693,360	>	1,090,978,840

Lifetime Experience (Nationwide) as of 12/31/2019

All Benefit Periods Combined

Year	Non-Interest Adjusted				Interest Adjusted			
	Original Premium	Increased Premium	Incurred Claims	Loss Ratios	Original Premium	Increased Premium	Incurred Claims	Loss Ratios
1997	873,120	0	0	0.0%	2,350,665	0	0	0.0%
1998	5,474,434	0	336,881	6.2%	14,103,908	0	867,913	6.2%
1999	10,823,775	0	1,202,294	11.1%	26,684,723	0	2,964,113	11.1%
2000	20,313,452	0	2,802,214	13.8%	47,923,818	0	6,611,027	13.8%
2001	33,907,403	0	6,980,208	20.6%	76,550,124	0	15,758,676	20.6%
2002	50,628,324	0	10,065,212	19.9%	109,377,661	0	21,744,930	19.9%
2003	68,642,198	2,154,289	13,440,862	19.0%	141,909,012	4,453,718	27,787,272	19.0%
2004	70,823,592	9,906,242	18,831,982	23.3%	140,113,651	19,597,985	37,256,199	23.3%
2005	70,785,801	11,105,012	24,827,897	30.3%	134,008,506	21,023,510	47,003,062	30.3%
2006	68,824,108	11,280,524	24,812,557	31.0%	124,683,939	20,436,156	44,951,216	31.0%
2007	66,716,374	12,122,169	35,768,139	45.4%	115,660,766	21,015,220	62,008,322	45.4%
2008	64,518,640	13,630,290	45,492,536	58.2%	107,034,194	22,612,179	75,470,545	58.2%
2009	62,173,881	13,315,295	46,624,634	61.8%	98,702,698	21,138,387	74,017,854	61.8%
2010	59,777,489	12,861,138	64,399,121	88.7%	90,811,830	19,538,183	97,832,849	88.7%
2011	55,968,059	13,791,957	70,037,231	100.4%	81,363,330	20,049,999	101,816,329	100.4%
2012	51,510,078	19,939,987	74,956,182	104.9%	71,657,951	27,739,399	104,274,865	104.9%
2013	47,921,451	22,681,676	76,678,580	108.6%	63,794,883	30,194,722	102,077,482	108.6%
2014	45,506,587	22,785,333	70,703,056	103.5%	57,971,409	29,026,521	90,069,506	103.5%
2015	42,562,445	23,580,290	81,837,896	123.7%	51,885,962	28,745,671	99,764,898	123.7%
2016	39,442,955	26,426,474	87,171,445	132.3%	46,012,567	30,828,062	101,690,706	132.3%
2017	36,693,777	28,055,032	94,775,499	146.4%	40,962,188	31,318,539	105,800,277	146.4%
2018	33,977,546	28,368,697	114,186,191	183.1%	36,296,642	30,304,968	121,979,830	183.1%
2019	31,351,665	27,476,184	95,683,247	162.6%	32,049,315	28,087,595	97,812,430	162.6%
<b>Total</b>	<b>1,039,217,155</b>	<b>299,480,587</b>	<b>1,061,613,865</b>	<b>79.3%</b>	<b>1,711,909,743</b>	<b>406,110,814</b>	<b>1,439,560,302</b>	<b>68.0%</b>
2020	28,760,659	25,399,471	87,754,707	162.0%	28,134,597	24,846,574	85,844,460	162.0%
2021	25,819,787	26,173,718	94,901,238	182.5%	24,170,087	24,501,405	88,837,728	182.5%
2022	23,128,254	34,112,983	98,255,009	171.7%	20,718,204	30,558,285	88,016,475	171.7%
2023	20,664,825	35,747,992	101,458,079	179.8%	17,714,330	30,643,942	86,972,032	179.8%
2024	18,444,961	32,089,307	104,294,011	206.4%	15,130,541	26,323,100	85,553,162	206.4%
2025	16,432,337	28,745,683	107,208,562	237.3%	12,899,110	22,564,881	84,156,928	237.3%
2026	14,604,561	25,684,057	110,023,699	273.1%	10,970,657	19,293,354	82,647,620	273.1%
2027	12,933,249	22,867,129	112,439,549	314.1%	9,296,842	16,437,640	80,825,224	314.1%
2028	11,408,371	20,286,969	114,060,620	359.9%	7,847,569	13,954,964	78,459,811	359.9%
2029	10,019,215	17,924,111	114,613,113	410.2%	6,595,215	11,798,665	75,444,841	410.2%
2030	8,769,458	15,788,873	114,595,667	466.6%	5,523,975	9,945,579	72,185,031	466.6%
2031	7,646,614	13,854,818	114,042,462	530.4%	4,609,267	8,351,481	68,743,121	530.4%
2032	6,635,583	12,100,032	112,787,243	602.0%	3,827,591	6,979,638	65,058,845	602.0%
2033	5,722,554	10,500,068	110,540,828	681.4%	3,158,784	5,795,917	61,017,273	681.4%
2034	4,912,154	9,069,740	107,122,918	766.2%	2,594,692	4,790,807	56,584,331	766.2%
2035	4,198,687	7,803,610	103,041,156	858.5%	2,122,321	3,944,510	52,084,467	858.5%
2036	3,571,228	6,681,518	98,586,936	961.6%	1,727,423	3,231,888	47,687,063	961.6%
2037	3,022,042	5,691,548	93,723,899	1075.6%	1,398,832	2,634,482	43,382,569	1075.6%
2038	2,543,325	4,821,900	88,280,643	1198.6%	1,126,550	2,135,831	39,103,364	1198.6%
2039	2,128,046	4,061,898	82,009,035	1324.9%	902,014	1,721,715	34,761,142	1324.9%
2040	1,769,171	3,400,141	75,667,902	1463.8%	717,605	1,379,155	30,692,180	1463.8%
2041	1,460,040	2,825,521	69,543,079	1622.7%	566,715	1,096,726	26,993,156	1622.7%
2042	1,195,804	2,330,796	63,397,671	1797.7%	444,164	865,740	23,548,149	1797.7%
2043	970,450	1,904,670	57,118,634	1986.7%	344,937	676,997	20,302,288	1986.7%
2044	781,063	1,543,373	50,682,564	2180.4%	265,667	524,955	17,238,896	2180.4%
2045	624,390	1,243,135	44,384,366	2376.6%	203,231	404,625	14,446,565	2376.6%
2046	495,456	994,226	38,432,927	2579.9%	154,320	309,673	11,970,761	2579.9%
2047	390,056	789,157	33,107,978	2807.6%	116,260	235,215	9,868,126	2807.6%
2048	304,645	621,519	28,288,975	3054.4%	86,892	177,272	8,068,688	3054.4%
2049	236,110	485,767	23,886,409	3308.9%	64,444	132,586	6,519,590	3308.9%
2050	181,559	376,749	19,998,456	3582.0%	47,421	98,402	5,223,356	3582.0%
2051	138,588	290,024	16,621,231	3877.9%	34,639	72,489	4,154,321	3877.9%
2052	105,682	222,635	13,648,721	4157.2%	25,277	53,249	3,264,469	4157.2%
2053	79,954	169,346	11,162,170	4477.4%	18,300	38,760	2,554,776	4477.4%
2054	59,906	127,330	9,002,185	4807.9%	13,121	27,888	1,971,678	4807.9%
2055	44,657	95,251	7,195,010	5142.7%	9,360	19,964	1,508,006	5142.7%
2056	33,021	70,602	5,717,082	5517.2%	6,623	14,160	1,146,647	5517.2%
2057	24,184	51,762	4,512,280	5941.4%	4,642	9,935	866,034	5941.4%
2058	17,502	37,441	3,527,572	6420.3%	3,215	6,877	647,886	6420.3%
2059	12,493	26,654	2,709,928	6922.5%	2,196	4,684	476,282	6922.5%
2060	8,758	18,590	2,043,355	7471.7%	1,473	3,127	343,664	7471.7%
2061	6,006	12,650	1,514,991	8120.7%	967	2,036	243,828	8120.7%
2062	3,995	8,316	1,104,462	8970.8%	615	1,281	170,102	8970.8%
2063	2,559	5,226	789,950	10146.4%	377	770	116,424	10146.4%
2064	1,550	3,059	553,543	12010.6%	219	431	78,069	12010.6%
2065	883	1,647	380,522	15037.0%	119	222	51,356	15037.0%
2066	451	747	255,210	21312.2%	58	96	32,960	21312.2%
2067	183	202	167,090	43436.5%	23	25	20,650	43436.5%
2068	88	69	78,919	50219.6%	10	8	9,333	50219.6%
2069	46	33	7,613	9628.4%	5	4	862	9628.4%
2070	16	11	2,119	7825.8%	2	1	229	7825.8%
2071	1	0	1,046	103938.1%	0	0	108	103938.1%
2072	0	0	0	0.0%	0	0	0	0.0%
2073	0	0	0	0.0%	0	0	0	0.0%
2074	0	0	0	0.0%	0	0	0	0.0%
2075	0	0	0	0.0%	0	0	0	0.0%
2076	0	0	0	0.0%	0	0	0	0.0%
<b>Total</b>	<b>240,315,177</b>	<b>377,062,077</b>	<b>2,655,243,335</b>	<b>430.1%</b>	<b>183,601,495</b>	<b>276,612,013</b>	<b>1,569,894,929</b>	<b>341.1%</b>
<b>Grand Total</b>	<b>1,279,532,332</b>	<b>676,542,665</b>	<b>3,716,857,200</b>	<b>190.0%</b>	<b>1,895,511,238</b>	<b>682,722,827</b>	<b>3,009,455,231</b>	<b>116.7%</b>

Minimum Required Loss Ratios	60%	85%
Minimum PV Incurred Claims	1,137,306,743	580,314,403
Dual Loss Ratio Test Met	3,009,455,231	>

**MUTUAL OF OMAHA INSURANCE COMPANY**  
**INDIVIDUAL HOME HEALTH CARE POLICY FORMS HCA-19629 & HCA-20249**  
**ANNUAL PREMIUM RATES**

Age	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 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	584.84	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	2021 Increase Factor	2022 Increase Factor
1 year	0.55	1.200	1.000	1.000	1.000	1.197	1.000
2 year	0.80	1.200	1.000	1.000	1.000	1.197	1.000
3 year	1.00	1.200	1.000	1.000	1.000	1.197	1.000
5 year	1.25	1.200	1.100	1.000	1.000	1.197	1.000
Lifetime	1.45	1.300	1.200	1.300	1.150	1.300	1.208

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**

Age	Per \$10 Daily Benefit						Per \$1 Gross Premium	
	Home Health Care Rider Forms 0GH7M-44 & 0GH7M-44 Rev		Confined Care Policy Forms NHA-19630 & NHA-20250				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	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 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	2021 Increase Factor	2022 Increase Factor
1 year	0.55	1.200	1.000	1.000	1.000	1.197	1.000
2 year	0.80	1.200	1.000	1.000	1.000	1.197	1.000
3 year	1.00	1.200	1.000	1.000	1.000	1.197	1.000
5 year	1.25	1.200	1.100	1.000	1.000	1.197	1.000
Lifetime	1.45	1.300	1.200	1.300	1.150	1.300	1.208

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**

Age	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
	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	2021 Increase Factor	2022 Increase Factor
1 year	0.55	1.200	1.000	1.000	1.000	1.197	1.000
2 year	0.80	1.200	1.000	1.000	1.000	1.197	1.000
3 year	1.00	1.200	1.000	1.000	1.000	1.197	1.000
5 year	1.25	1.200	1.100	1.000	1.000	1.197	1.000
Lifetime	1.45	1.300	1.200	1.300	1.150	1.300	1.208

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



MONTH, YEAR

POLICYHOLDER NAME  
ADDRESS  
CITY STATE ZIP CODE

RE: Policy/Certificate Number: XX-XXXXXX

Thank you for the opportunity to serve you. It has been our privilege to be your long-term care insurance provider.

As a mutual company, we exist for you, our customer. A big part of that is being good stewards of your trust. This means taking steps to assure that we can continue to offer you the same outstanding service you've come to expect from us, including being able to pay future claims. **Due to factors such as longer open claims and the rising cost of long-term care services, we need to adjust premiums.**

Premium adjustments are never welcome news and we do not take such actions lightly. This adjustment is being applied to every person in your state with the same policy form, issue age, partner status and benefit options. Details specific to your policy and premium adjustment are outlined below.

As a reminder, your policy is guaranteed renewable for life as long as your premiums are paid on time. This means you can continue your policy for as long as you live or until you have exhausted your policy benefits. However, the premium for your policy can change again in the future, but never more than once per year.

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 <https://scc.virginia.gov/boi/SERFFInquiry/LtcFilings.aspx>.

**Insert Paragraph G – Additional Rate Adjustment for Multiple Year Increase**

We know smaller increases are easier to work into your budget. Therefore, we will be implementing these premium adjustments over a period of [X] years to help. You will receive notice of an additional rate increase at least [75] days in advance of the change

**The grid needs to display each increase for each insured's future rate increases)**

CURRENT [MODE] PREMIUM	NEW [MODE] PREMIUM	INCREASE AMOUNT	PERCENT INCREASE	EFFECTIVE DATE
\$0,000.00	\$0,000.00	\$000.00	0%	00/00/00
\$0,000.00	\$0,000.00	\$000.00	0%	00/00/00
\$0,000.00	\$0,000.00	\$000.00	0%	00/00/00

QUESTIONS?

Call toll free 1-800-921-9334

We'll be glad to help you Monday – Friday, 7:00 a.m. to 5:00 p.m. Central Time

Please keep this notification with your other important insurance documents.



\*Premiums shown are subject to rounding errors but are within a dollar of the true premium in most cases.

Please keep this notification of the change in premium for your Policy/Certificate with your other important insurance documents. No payment is required 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. Please contact the organization processing your premium payment as you may be required to provide authorization for the new premium amount. If you have paid premium beyond the effective date listed above, you will be billed for any additional premium due.

***Insert Paragraph A – Waiver of Premium***

Since your premium currently is being waived, you will not immediately be impacted by the rate adjustment. However, when the waiver is removed, your new premium will be the premium in effect at the time you come off waiver. Please refer to the chart above to determine your current premium based on the effective dates and premiums shown above.

***Insert Paragraph B – Rate Guarantee***

Since the policy you purchased contains a rate guarantee benefit, you will not be immediately impacted by the rate adjustment. When the rate guarantee benefit rider is removed, your new premium will be the premium in effect at the time your come off rate guarantee. Please refer to the chart above to determine your current premium based on the effective dates and premiums shown above.

***Insert Paragraph C – Inflation Protection Benefit/Benefit Multiplier/Maximum Lifetime Benefit/Maximum Monthly Benefit/Elimination Period Change Offer***

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. Please note, any adjustments made to the Inflation Protection Benefit may impact your policy's partnership eligibility including loss of Medicaid asset protection. Please consult with your agent or customer service to ensure that you don't lose partnership status.

***Insert Paragraph D – No Offer***

We know an increase in premium is never welcome news. To keep your premiums similar to what you currently pay, you may be able to reduce your current benefits or remove riders that may be attached to your policy.

***Insert Paragraph E – Shared Care***

Please note that your current policy includes a Shared Care Benefit. If you wish to retain the Shared Care Benefit, any changes you may elect to make to your policy benefits must also be made to your spouse/partner's policy.

If you wish to keep your policy conditions the same at the new premium shown above, you do not need to do anything. If you wish to explore additional options to help reduce your premium, you may:

- Reduce your benefit multiplier or maximum lifetime benefit
- Reduce your maximum daily or monthly benefit amount
- Increase your elimination period
- Adjust your inflation protection benefit (if applicable)

Please contact your agent or the Customer Care Center at <1-800-921-9334> for questions regarding your policy.

Of course, you always have the option to forgo your policy altogether. If you elect to do so, the non-forfeiture benefit will provide you with a paid-up policy with reduced benefits (the substantial premium increase requirement will not apply). See your policy or contact the Customer Care Center at the phone number above for additional details.

We're honored you've chosen <UW COMPANY> as the company to help you have control over the care you receive and relieve the burden that may fall on family and loved ones. We look forward to serving you for years to come.

With our history of financial strength and our commitment to serving customers, you can be confident we will be there when you need us, just as we have for more than 100 years.

Sincerely,

Signature Block

	<b>Pricing</b>	<b>2003</b>	<b>2011/2012</b>	<b>2015/2016</b>	<b>Current</b>
<b>Mortality</b>	1983 GAM weighted 60% female/40% male with selection factors grading from 1.1 to 1.3 over 20 years.	1983 GAM with gender weighted by expected distribution by issue age with selection factors grading from 0.2 to 1.0 over 10 years	Annuity 2000 with gender weighted by expected distribution by issue and attained age with selection factors grading from 0.4 to 1 over 12 years	Annuity 2000 with gender distinct rates with selection factors grading from 0.4 to 1 over 12 years. Generational mortality improvement of 1% per year and future mortality improvement of 1% per year for 20 years.	2012 IAM Basic Table with gender distinct rates adjusted for experience with selection factors grading from 0.3 to 1 over 12 years. Generational mortality improvement of Scale G2.
<b>Morbidity</b>	1985 NNHS SOA study, 1992 National Home & Hospice Care Survey	2002 Milliman Long Term Care Guidelines	2009 Milliman Long Term Care Guidelines, adjusted for experience	2011 Milliman Long Term Care Guidelines, adjusted for experience. Generational morbidity improvement of 1% per year and future morbidity improvement of 1% per year for 20 years	Ultimate Lapse ranges from 0.90% to 1.80% for No Inflation and ranges from .050% to 1.80% for Inflation. Ultimate lapse rates vary by Age and Inflation.
<b>Lapse</b>	Grading from 19% to 5% ultimate in year 9+, vary by issue age	Grading from 10% to 2% ultimate in year 6+, vary by issue age	Grading from 10% to 1.0% ultimate, vary by marital status, issue age, inflation type	Grading from 10% to 1.0% ultimate, vary by marital status, attained age, inflation type	Ultimate Lapse ranges from 0.90% to 1.80% for No Inflation and ranges from .050% to 1.80% for Inflation. Ultimate lapse rates vary by Age and Inflation.
<b>Interest Rate</b>	4.50%	4.50%	4.50%	4.50%	4.50%
<b>Expenses &amp; Commission</b>	Not included	Not included	Not included	Not included	Not included

**Nationwide Lifetime Experience as of 12/31/2019**  
**Premiums at the Virginia Rate Level**  
**Non-Lifetime Benefit Periods**

Year	Virginia Rate Level			Incurred Claims		Original Pricing			Actual to Expected			
	Rate Level	Incurred Claims Discounted to Incurred Year	Loss Ratio	Incurred Claims	Loss Ratio	Earned Premium	Incurred Claims	Loss Ratio	Earned Premium	Actual to Expected		
1997	493,144		0.0%	0	0.0%	493,144	76,315	15.5%	0.000			
1998	2,879,303		3.7%	107,337	3.7%	2,850,981	567,251	19.9%	0.187			
1999	5,164,376		12.0%	620,404	12.0%	4,940,810	1,195,625	24.2%	0.496			
2000	8,538,676		15.0%	1,279,042	15.0%	8,089,363	2,319,177	28.7%	0.522			
2001	13,296,598		18.3%	2,429,336	18.3%	12,392,203	3,909,961	31.6%	0.579			
2002	19,842,983		23.2%	4,609,510	23.2%	18,402,153	6,064,836	33.0%	0.705			
2003	27,120,845		13.5%	3,660,230	13.5%	25,419,483	8,940,368	35.2%	0.384			
2004	28,222,177		21.2%	5,980,398	21.2%	27,042,916	10,759,186	39.8%	0.533			
2005	28,236,306		30.8%	8,695,825	30.8%	25,552,362	11,665,163	45.7%	0.675			
2006	27,254,820		34.3%	9,349,851	34.3%	22,887,668	12,053,720	52.7%	0.651			
2007	28,747,844		41.8%	12,030,566	41.8%	20,278,961	12,147,512	59.9%	0.699			
2008	30,977,013		44.2%	13,701,296	44.2%	17,817,393	11,990,031	67.3%	0.657			
2009	29,532,625		56.3%	16,629,707	56.3%	15,565,703	11,849,828	76.1%	0.740			
2010	28,088,937		66.8%	18,769,491	66.8%	13,512,948	11,600,293	85.8%	0.778			
2011	26,659,985		79.7%	21,251,812	79.7%	11,652,948	11,225,862	96.3%	0.827			
2012	26,462,143		100.2%	26,519,916	100.2%	9,980,026	10,914,023	109.4%	0.916			
2013	28,957,402		89.3%	25,861,729	89.3%	8,487,367	10,109,844	119.1%	0.750			
2014	29,852,369		88.8%	26,501,364	88.8%	7,166,562	9,079,074	126.7%	0.701			
2015	29,503,501		104.1%	30,711,106	104.1%	6,007,978	8,146,964	135.6%	0.768			
2016	29,463,128		120.6%	35,535,639	120.6%	5,000,968	7,371,863	147.4%	0.818			
2017	28,396,949		138.4%	39,305,182	138.4%	4,133,817	6,648,897	160.8%	0.861			
2018	26,828,791		167.3%	44,879,139	167.3%	3,393,883	5,965,881	175.8%	0.952			
2019	24,930,792		181.2%	45,179,490	181.2%	2,770,325	5,331,455	192.4%	0.942			
Total	529,450,708		74.3%	393,608,369	74.3%	273,839,962	179,933,130	65.7%	1.131			
	Virginia Rate Level		Incurred Claims		Loss Ratio		Original Pricing			Actual to Expected		
	Rate Level	Incurred Claims Discounted to Incurred Year	Loss Ratio	Incurred Claims	Loss Ratio	Earned Premium	Incurred Claims	Loss Ratio	Earned Premium	Incurred Claims	Loss Ratio	A/E w/o Increase
2020	20,782,541	20,782,541	31.601,246	152.1%	152.1%	2,247,038	4,719,417	210.0%	0.724	0.724		
2021	18,420,647	18,420,647	33,360,385	181.1%	181.1%	1,811,794	4,142,454	228.6%	0.792	0.792		
2022	16,324,820	16,324,820	33,742,180	206.7%	206.7%	1,452,988	3,618,744	249.1%	0.830	0.830		
2023	14,448,686	15,207,242	34,036,578	235.6%	223.8%	1,159,797	3,138,300	270.6%	0.871	0.827		
2024	12,780,369	15,464,246	34,147,893	267.2%	220.8%	922,040	2,701,297	293.0%	0.912	0.754		
2025	11,282,434	13,651,746	34,261,418	303.7%	251.0%	730,611	2,294,206	314.0%	0.967	0.799		
2026	9,936,546	12,023,221	34,337,880	345.6%	285.6%	577,053	1,943,865	336.9%	1.026	0.848		
2027	8,714,080	10,544,037	34,292,768	393.5%	325.2%	454,136	1,656,591	364.8%	1.079	0.892		
2028	7,603,937	9,200,764	33,993,392	447.0%	369.5%	356,038	1,414,977	397.4%	1.125	0.930		
2029	6,600,417	7,986,504	33,329,501	505.0%	417.3%	278,109	1,204,857	433.2%	1.166	0.963		
2030	5,704,426	6,902,356	32,476,943	569.3%	470.5%	216,480	1,022,802	472.5%	1.205	0.996		
2031	4,910,271	5,941,427	31,502,315	641.6%	530.2%	167,965	864,449	514.7%	1.247	1.030		
2032	4,204,209	5,087,093	30,388,831	722.8%	597.4%	129,963	727,425	559.7%	1.291	1.067		
2033	3,576,742	4,327,858	29,056,283	812.4%	671.4%	100,335	609,898	607.9%	1.336	1.104		
2034	3,027,903	3,663,762	27,444,384	906.4%	749.1%	77,343	509,914	659.3%	1.375	1.136		
2035	2,550,471	3,086,070	25,718,939	1008.4%	833.4%	59,569	425,553	714.4%	1.412	1.167		
2036	2,137,229	2,586,047	23,990,799	1122.5%	927.7%	45,877	354,834	773.4%	1.451	1.199		
2037	1,781,721	2,155,883	22,268,623	1249.8%	1032.9%	35,035	291,330	831.5%	1.503	1.242		
2038	1,477,185	1,787,394	20,516,491	1388.9%	1147.8%	26,209	230,499	879.5%	1.579	1.305		
2039	1,217,618	1,473,318	18,655,910	1532.2%	1266.3%	19,425	179,194	922.5%	1.661	1.373		
2040	997,307	1,206,742	16,853,038	1689.9%	1396.6%	14,523	141,225	972.4%	1.738	1.436		
2041	811,138	981,477	15,174,040	1870.7%	1546.0%	10,940	112,257	1026.1%	1.823	1.507		
2042	654,821	792,333	13,561,309	2071.0%	1711.6%	8,218	88,474	1076.6%	1.924	1.590		
2043	524,455	634,591	12,008,750	2289.8%	1892.4%	6,089	67,509	1108.7%	2.065	1.707		
2044	417,150	504,752	10,483,740	2513.2%	2077.0%	4,486	50,259	1120.4%	2.243	1.854		
2045	329,341	398,502	9,015,090	2737.3%	2262.2%	3,320	37,273	1122.7%	2.438	2.015		
2046	258,085	312,283	7,672,127	2972.7%	2456.8%	2,383	26,736	1122.1%	2.649	2.190		
2047	200,732	242,886	6,481,684	3229.0%	2668.6%	1,635	18,304	1119.4%	2.885	2.384		
2048	154,989	187,537	5,437,306	3508.2%	2899.3%	1,046	11,708	1119.8%	3.133	2.589		
2049	118,822	143,774	4,511,127	3796.5%	3137.6%	3	34	1250.7%	3.036	2.509		
2050	90,390	109,372	3,698,530	4091.8%	3381.6%	0	0	0.0%	0.000	0.000		
2051	68,284	82,624	3,010,449	4408.7%	3643.5%	0	0	0.0%	0.000	0.000		
2052	51,203	61,955	2,435,602	4756.8%	3931.2%	0	0	0.0%	0.000	0.000		
2053	38,182	46,200	1,956,224	5123.4%	4234.2%	0	0	0.0%	0.000	0.000		
2054	28,347	34,300	1,560,663	5505.5%	4550.0%	0	0	0.0%	0.000	0.000		
2055	20,932	25,328	1,232,574	5888.4%	4866.5%	0	0	0.0%	0.000	0.000		
2056	15,378	18,607	968,320	6297.0%	5204.1%	0	0	0.0%	0.000	0.000		
2057	11,232	13,591	756,616	6736.0%	5566.9%	0	0	0.0%	0.000	0.000		
2058	8,143	9,853	585,696	7192.3%	5944.1%	0	0	0.0%	0.000	0.000		
2059	5,860	7,091	448,104	7646.2%	6319.2%	0	0	0.0%	0.000	0.000		
2060	4,170	5,046	337,322	8089.0%	6685.1%	0	0	0.0%	0.000	0.000		
2061	2,927	3,541	248,933	8505.6%	7029.5%	0	0	0.0%	0.000	0.000		
2062	2,014	2,436	180,078	8943.2%	7391.1%	0	0	0.0%	0.000	0.000		
2063	1,359	1,644	127,407	9376.6%	7749.3%	0	0	0.0%	0.000	0.000		
2064	898	1,086	87,629	9759.2%	8065.5%	0	0	0.0%	0.000	0.000		
2065	578	699	58,332	10090.4%	8339.2%	0	0	0.0%	0.000	0.000		
2066	361	437	37,448	10372.4%	8572.3%	0	0	0.0%	0.000	0.000		
2067	218	264	23,204	10646.1%	8798.5%	0	0	0.0%	0.000	0.000		
2068	126	152	13,695	10885.2%	8996.1%	0	0	0.0%	0.000	0.000		
2069	68	82	7,613	11184.8%	9243.6%	0	0	0.0%	0.000	0.000		
2070	23	28	2,119	9092.1%	7514.1%	0	0	0.0%	0.000	0.000		
2071	1	1	1,046	121496.9%	100410.7%	0	0	0.0%	0.000	0.000		
2072	0	0	0	0.0%	0.0%	0	0	0.0%	0.000	0.000		
2073	0	0	0	0.0%	0.0%	0	0	0.0%	0.000	0.000		
2074	0	0	0	0.0%	0.0%	0	0	0.0%	0.000	0.000		
2075	0	0	0	0.0%	0.0%	0	0	0.0%	0.000	0.000		
Total	162,299,786	182,446,192	718,098,572	442.5%	393.6%	10,920,448	32,604,384	298.6%	1.482	1.318		
	Virginia Rate Level		Incurred Claims		Loss Ratio		Original Pricing			Actual to Expected		
	Rate Level	Incurred Claims Discounted to Incurred Year	Loss Ratio	Incurred Claims	Loss Ratio	Earned Premium	Incurred Claims	Loss Ratio	Earned Premium	Incurred Claims	Loss Ratio	A/E w/o Increase
Past Experience	529,450,708	529,450,708	393,608,369	74.3%	74.3%	273,839,962	179,933,130	65.7%	1.131	1.131		
Anticipated Experience	162,299,786	182,446,192	718,098,572	442.5%	393.6%	10,920,448	32,604,384	298.6%	1.482	1.318		
Lifetime Experience	691,750,494	711,896,900	1,111,706,941	160.7%	156.2%	284,760,410	212,537,514	74.6%	2.153	2.092		
Past Experience @ 4.5%	828,357,355	828,357,355	524,440,173	63.3%	63.3%	488,998,013	287,393,831	58.8%	1.077	1.077		
Anticipated Experience @ 4.5%	125,794,099	139,298,622	451,321,698	358.8%	324.0%	9,224,377	25,955,258	281.4%	1.275	1.151		
Lifetime Experience @ 4.5%	954,151,455	967,655,977	975,761,871	102.3%	100.8%	498,222,389	313,349,089	62.9%	1.626	1.603		

Nationwide Lifetime Experience as of 12/31/2019  
Premiums at the Virginia Rate Level  
Lifetime Benefit Period

Year	Virginia Rate Level Earned Premium		Incurred Claims Discounted to Incurred Year		Loss Ratio	Original Pricing			Actual to Expected	
	Earned Premium	Earned Premium	Incurred Claims	Loss Ratio		Earned Premium	Incurred Claims	Loss Ratio	w/o Increase	w/Increase
1997	379,977		0	0.0%		379,977	57,729	15.2%		0.000
1998	2,595,131		229,543	8.8%		2,572,295	492,127	19.1%		0.462
1999	5,659,399		581,891	10.3%		5,423,722	1,232,945	22.7%		0.452
2000	11,774,776		1,523,171	12.9%		11,221,781	3,035,368	27.0%		0.478
2001	20,610,805		4,550,872	22.1%		19,311,040	5,752,876	29.8%		0.741
2002	30,785,341		5,455,702	17.7%		28,348,822	9,101,715	32.1%		0.552
2003	41,521,354		9,780,632	23.6%		38,555,947	13,376,332	34.7%		0.679
2004	42,601,415		12,851,585	30.2%		40,370,315	16,033,798	39.7%		0.760
2005	42,549,495		16,132,072	37.9%		37,454,938	17,203,147	45.9%		0.825
2006	41,569,288		15,462,707	37.2%		33,354,225	17,687,721	53.0%		0.701
2007	44,914,878		23,737,573	52.9%		29,502,121	17,781,899	60.3%		0.877
2008	49,704,716		31,791,240	64.0%		25,892,146	17,507,790	67.6%		0.946
2009	48,250,256		29,994,927	62.2%		22,588,077	17,352,044	76.8%		0.809
2010	46,724,080		45,629,630	97.7%		19,577,665	17,064,927	87.2%		1.120
2011	43,401,777		48,785,419	112.4%		16,852,981	16,525,059	98.1%		1.146
2012	37,989,957		48,436,267	127.5%		14,405,785	16,002,806	111.1%		1.148
2013	41,293,663		50,816,851	123.1%		12,225,783	14,800,685	121.1%		1.107
2014	48,243,230		44,201,692	91.6%		10,300,327	13,192,585	128.1%		0.715
2015	46,287,938		51,126,790	110.5%		8,614,865	11,771,420	136.6%		0.808
2016	40,302,850		51,635,806	128.1%		7,153,268	10,609,570	148.3%		0.864
2017	36,292,346		55,470,317	152.8%		5,897,728	9,520,322	161.4%		0.947
2018	39,540,089		69,307,052	175.3%		4,829,064	8,499,753	176.0%		0.996
2019	43,181,266		50,503,757	117.0%		3,927,443	7,552,352	192.3%		0.608
<b>Total</b>	<b>806,174,026</b>		<b>668,005,496</b>	<b>82.9%</b>		<b>398,760,313</b>	<b>262,154,970</b>	<b>65.7%</b>		<b>1.260</b>
2020	40,790,397	40,790,397	56,153,461	137.7%	137.7%	3,173,447	6,671,469	210.2%	0.655	0.655
2021	35,503,337	35,503,337	61,540,853	173.3%	173.3%	2,548,573	5,857,429	229.8%	0.754	0.754
2022	32,161,177	32,161,177	64,512,829	200.6%	200.6%	2,035,284	5,116,792	251.4%	0.798	0.798
2023	29,016,674	31,628,175	67,421,501	232.4%	213.2%	1,617,229	4,447,058	275.0%	0.845	0.775
2024	26,137,737	35,547,322	70,146,118	268.4%	197.3%	1,279,219	3,846,612	300.7%	0.892	0.656
2025	23,495,837	31,954,339	72,947,145	310.5%	228.3%	1,007,524	3,312,520	328.8%	0.944	0.694
2026	21,065,803	28,649,492	75,685,819	359.3%	264.2%	790,263	2,839,029	359.3%	1.000	0.735
2027	18,823,959	25,600,585	78,146,781	415.1%	305.3%	617,422	2,420,929	392.1%	1.059	0.779
2028	16,766,191	22,802,020	80,067,229	477.6%	351.1%	480,607	2,055,414	427.7%	1.117	0.821
2029	14,875,360	20,230,489	81,283,612	546.4%	401.8%	372,799	1,737,802	466.2%	1.172	0.862
2030	13,160,572	17,898,378	82,118,724	624.0%	458.8%	288,245	1,462,646	507.4%	1.230	0.904
2031	11,598,528	15,773,998	82,540,147	711.6%	523.3%	222,262	1,225,497	551.4%	1.291	0.949
2032	10,174,000	13,836,640	82,398,412	809.9%	595.5%	171,017	1,023,085	598.2%	1.354	0.995
2033	8,867,277	12,059,497	81,484,545	918.9%	675.7%	131,392	851,546	648.1%	1.418	1.043
2034	7,692,223	10,461,423	79,678,534	1035.8%	761.6%	100,881	707,385	701.2%	1.477	1.086
2035	6,647,038	9,039,972	77,322,217	1163.3%	855.3%	77,465	587,022	757.8%	1.535	1.129
2036	5,715,350	7,772,875	74,596,137	1305.2%	959.7%	59,237	482,654	814.8%	1.602	1.178
2037	4,888,336	6,648,137	71,455,275	1461.8%	1074.8%	44,722	387,066	865.5%	1.689	1.242
2038	4,157,481	5,654,174	67,764,152	1629.9%	1198.5%	33,544	306,248	913.0%	1.785	1.313
2039	3,514,994	4,780,392	63,353,126	1802.4%	1325.3%	25,287	243,981	964.9%	1.868	1.374
2040	2,952,363	4,015,214	58,814,864	1992.1%	1464.8%	19,138	194,692	1017.3%	1.958	1.440
2041	2,461,015	3,346,980	54,369,039	2209.2%	1624.4%	14,454	153,846	1064.4%	2.076	1.526
2042	2,035,776	2,768,656	49,836,362	2448.0%	1800.0%	10,829	118,405	1093.4%	2.239	1.646
2043	1,667,413	2,267,681	45,109,884	2705.4%	1989.3%	8,135	89,719	1102.9%	2.453	1.804
2044	1,353,484	1,840,738	40,198,824	2970.0%	2183.8%	6,162	68,077	1104.8%	2.688	1.977
2045	1,091,894	1,484,976	35,369,276	3239.3%	2381.8%	4,483	49,553	1105.3%	2.931	2.155
2046	874,406	1,189,192	30,760,800	3517.9%	2586.7%	3,055	33,716	1103.5%	3.188	2.344
2047	694,718	944,817	26,626,294	3832.7%	2818.1%	1,902	20,976	1103.1%	3.475	2.555
2048	547,476	744,568	22,851,670	4174.0%	3069.1%	874	9,652	1104.8%	3.778	2.778
2049	428,043	582,138	19,375,282	4526.5%	3328.3%	1	10	1250.7%	3.619	2.661
2050	332,049	451,586	16,299,927	4908.9%	3609.5%	0	0	0.0%	0.000	0.000
2051	255,639	347,669	13,610,782	5324.2%	3914.9%	0	0	0.0%	0.000	0.000
2052	196,831	267,690	11,213,119	5696.8%	4188.8%	0	0	0.0%	0.000	0.000
2053	150,128	204,174	9,205,946	6132.1%	4508.9%	0	0	0.0%	0.000	0.000
2054	113,093	153,806	7,441,522	6580.0%	4838.3%	0	0	0.0%	0.000	0.000
2055	84,763	115,278	5,962,436	7034.3%	5172.2%	0	0	0.0%	0.000	0.000
2056	62,921	85,572	4,748,761	7547.2%	5549.4%	0	0	0.0%	0.000	0.000
2057	46,172	62,794	3,755,665	8134.1%	5980.9%	0	0	0.0%	0.000	0.000
2058	33,407	45,433	2,941,876	8806.3%	6475.2%	0	0	0.0%	0.000	0.000
2059	23,764	32,320	2,261,824	9517.7%	6998.3%	0	0	0.0%	0.000	0.000
2060	16,546	22,502	1,706,033	10311.0%	7581.6%	0	0	0.0%	0.000	0.000
2061	11,223	15,263	1,266,058	11281.4%	8295.1%	0	0	0.0%	0.000	0.000
2062	7,339	9,982	924,384	12594.9%	9261.0%	0	0	0.0%	0.000	0.000
2063	4,570	6,215	662,542	14497.6%	10660.0%	0	0	0.0%	0.000	0.000
2064	2,626	3,572	465,914	17740.0%	13044.1%	0	0	0.0%	0.000	0.000
2065	1,370	1,863	322,190	23522.0%	17295.6%	0	0	0.0%	0.000	0.000
2066	573	780	217,762	37976.6%	27924.0%	0	0	0.0%	0.000	0.000
2067	97	132	143,886	148637.9%	109292.6%	0	0	0.0%	0.000	0.000
2068	8	11	65,225	831159.2%	611146.4%	0	0	0.0%	0.000	0.000
2069	0	0	0	0.0%	0.0%	0	0	0.0%	0.000	0.000
2070	0	0	0	0.0%	0.0%	0	0	0.0%	0.000	0.000
2071	0	0	0	0.0%	0.0%	0	0	0.0%	0.000	0.000
2072	0	0	0	0.0%	0.0%	0	0	0.0%	0.000	0.000
2073	0	0	0	0.0%	0.0%	0	0	0.0%	0.000	0.000
2074	0	0	0	0.0%	0.0%	0	0	0.0%	0.000	0.000
2075	0	0	0	0.0%	0.0%	0	0	0.0%	0.000	0.000
<b>Total</b>	<b>350,501,978</b>	<b>429,804,420</b>	<b>1,937,144,763</b>	<b>552.7%</b>	<b>450.7%</b>	<b>15,145,450</b>	<b>46,320,833</b>	<b>305.8%</b>	<b>1.807</b>	<b>1.474</b>
Past Experience	Earned Premium w/o Increase	Earned Premium With Increase	Incurred Claims	Loss Ratio w/o Increase	Loss Ratio With Increase	Earned Premium	Incurred Claims	Loss Ratio	A/E w/o Increase	A/E With Increase
Anticipated Experience	806,174,026	806,174,026	668,005,496	82.9%	82.9%	398,760,313	262,154,970	65.7%	1.260	1.260
Lifetime Experience	350,501,978	429,804,420	1,937,144,763	552.7%	450.7%	15,145,450	46,320,833	305.8%	1.807	1.474
	1,156,676,003	1,235,978,445	2,605,150,259	225.2%	210.8%	413,905,764	308,475,803	74.5%	3.022	2.828
Past Experience @ 4.5%	1,259,078,592	1,259,078,592	915,120,129	72.7%	72.7%	711,489,855	418,554,215	58.8%	1.235	1.235
Anticipated Experience @ 4.5%	264,595,812	316,433,388	1,118,573,231	422.7%	353.5%	12,833,022	36,907,136	287.6%	1.470	1.229
Lifetime Experience @ 4.5%	1,523,674,405	1,575,511,980	2,033,693,360	133.5%	129.1%	724,322,877	455,461,351	62.9%	2.123	2.053

**Nationwide Lifetime Experience as of 12/31/2019**  
**Premiums at the Virginia Rate Level**  
**All Benefit Periods**

Year	Virginia Rate Level		Incurred Claims		Loss Ratio	Original Pricing			Actual to Expected	
	Rate Level	Incurred Claims	Discounted to Incurred Year	Loss Ratio		Incurred Claims	Loss Ratio	Incurred Claims	Loss Ratio	Actual to Expected
1997	873,120	0	0	0.0%	873,120	134,043	15.4%		0.000	
1998	5,474,434	336,881	336,881	6.2%	5,423,276	1,059,379	19.5%		0.315	
1999	10,823,775	1,202,294	1,202,294	11.1%	10,364,532	2,428,570	23.4%		0.474	
2000	20,313,452	2,802,214	2,802,214	13.8%	19,311,144	5,354,546	27.7%		0.498	
2001	33,907,403	6,980,208	6,980,208	20.6%	31,703,242	9,662,837	30.5%		0.675	
2002	50,628,324	10,065,212	10,065,212	19.9%	46,750,975	15,166,551	32.4%		0.613	
2003	68,642,198	13,440,862	13,440,862	19.6%	63,975,429	22,316,700	34.9%		0.561	
2004	70,823,592	18,831,982	18,831,982	26.6%	67,413,231	26,792,985	39.7%		0.669	
2005	70,785,801	24,827,897	24,827,897	35.1%	63,007,299	28,868,311	45.8%		0.766	
2006	68,824,108	24,812,557	24,812,557	36.1%	56,241,894	29,741,441	52.9%		0.682	
2007	73,662,722	35,768,139	35,768,139	48.6%	49,781,082	29,929,411	60.1%		0.808	
2008	80,681,729	45,492,536	45,492,536	56.4%	43,709,539	29,497,821	67.5%		0.836	
2009	77,782,881	46,624,634	46,624,634	59.9%	38,153,780	29,201,872	76.5%		0.783	
2010	74,813,018	64,399,121	64,399,121	86.1%	33,090,613	28,665,221	86.6%		0.994	
2011	70,061,763	70,037,231	70,037,231	100.0%	28,505,929	27,750,921	97.4%		1.027	
2012	64,452,100	74,956,182	74,956,182	116.3%	24,385,811	26,916,828	110.4%		1.054	
2013	70,251,065	76,678,580	76,678,580	109.1%	20,713,150	24,910,528	120.3%		0.908	
2014	78,095,600	70,703,056	70,703,056	90.5%	17,466,889	22,271,659	127.5%		0.710	
2015	75,791,439	81,837,896	81,837,896	108.0%	14,622,843	19,918,384	136.2%		0.793	
2016	69,765,978	87,171,445	87,171,445	124.9%	12,154,236	17,981,433	147.9%		0.845	
2017	64,689,295	94,775,499	94,775,499	146.5%	10,031,545	16,169,219	161.2%		0.909	
2018	66,368,880	114,186,191	114,186,191	172.0%	8,222,947	14,465,634	175.9%		0.978	
2019	68,112,057	95,683,247	95,683,247	140.5%	6,697,768	12,883,807	192.4%		0.730	
Total	1,335,624,734	1,061,613,865	1,061,613,865	79.5%	672,600,275	442,088,099	65.7%		1.209	
2020	61,572,938	61,572,938	87,574,707	142.5%	5,420,485	11,390,886	210.1%	A/E	0.678	
	w/o Increase	w/Increase	Incurred Claims	w/o Increase	w/Increase	Incurred Claims	Loss Ratio	w/o Increase	w/Increase	
2021	53,923,983	53,923,983	94,901,238	176.0%	4,360,367	9,999,883	229.3%	0.767	0.767	
2022	48,485,997	48,485,997	98,255,009	202.6%	3,488,272	8,735,537	250.4%	0.809	0.809	
2023	43,465,360	46,835,417	101,458,079	233.4%	2,777,026	7,585,359	273.1%	0.855	0.793	
2024	38,918,106	51,011,568	104,294,011	268.0%	2,201,258	6,547,909	297.5%	0.901	0.687	
2025	34,778,272	45,606,084	107,208,562	308.3%	1,738,134	5,606,726	322.6%	0.956	0.729	
2026	31,002,349	40,672,713	110,023,699	354.9%	1,367,317	4,782,894	349.8%	1.015	0.773	
2027	27,538,040	36,144,622	112,439,549	408.3%	1,071,558	4,077,520	380.5%	1.073	0.818	
2028	24,370,128	32,002,784	114,060,620	468.0%	836,645	3,470,391	414.8%	1.128	0.859	
2029	21,475,777	28,216,994	114,613,113	533.7%	650,908	2,942,659	452.1%	1.180	0.898	
2030	18,864,998	24,800,734	114,595,667	607.5%	504,725	2,485,448	492.4%	1.234	0.938	
2031	16,508,799	21,715,426	114,042,462	690.8%	390,227	2,089,946	535.6%	1.290	0.981	
2032	14,378,209	18,923,733	112,787,243	784.4%	300,980	1,750,511	581.6%	1.349	1.025	
2033	12,444,019	16,387,354	110,540,828	888.3%	231,727	1,461,444	630.7%	1.409	1.070	
2034	10,720,126	14,125,185	107,122,918	999.3%	178,224	1,217,300	683.0%	1.463	1.110	
2035	9,197,509	12,126,042	103,041,156	1120.3%	137,034	1,012,575	738.9%	1.516	1.150	
2036	7,852,579	10,358,923	98,586,936	1255.5%	105,114	837,488	796.7%	1.576	1.195	
2037	6,670,057	8,804,020	93,723,899	1405.1%	79,757	678,396	850.6%	1.652	1.252	
2038	5,634,666	7,441,568	88,280,643	1566.7%	59,753	536,747	898.3%	1.744	1.321	
2039	4,732,612	6,253,710	82,009,035	1732.8%	44,712	423,175	946.4%	1.831	1.386	
2040	3,949,671	5,221,956	75,667,902	1915.8%	33,661	335,917	997.9%	1.920	1.452	
2041	3,272,153	4,328,457	69,543,079	2125.3%	25,393	266,103	1047.9%	2.028	1.533	
2042	2,690,597	3,560,989	63,397,671	2356.3%	19,047	206,879	1086.2%	2.169	1.639	
2043	2,191,868	2,902,272	57,118,634	2605.9%	14,224	157,228	1105.3%	2.358	1.781	
2044	1,770,634	2,345,490	50,682,564	2862.4%	10,648	118,336	1111.3%	2.576	1.944	
2045	1,421,235	1,883,478	44,384,366	3122.9%	7,803	86,826	1112.7%	2.807	2.118	
2046	1,132,491	1,501,475	38,432,927	3393.7%	5,438	60,452	1111.6%	3.053	2.359	
2047	895,451	1,187,703	33,107,978	3697.4%	3,537	39,280	1110.6%	3.329	2.510	
2048	702,466	932,105	28,288,975	4027.1%	1,919	21,361	1112.9%	3.618	2.727	
2049	546,865	725,913	23,886,409	4367.9%	4	44	1250.7%	3.492	2.631	
2050	422,438	560,958	19,998,456	4734.1%	0	0	0.0%	0.000	0.000	
2051	323,924	430,294	16,621,231	5131.2%	0	0	0.0%	0.000	0.000	
2052	248,033	329,645	13,648,721	5502.8%	0	0	0.0%	0.000	0.000	
2053	188,310	250,374	11,162,170	5927.6%	0	0	0.0%	0.000	0.000	
2054	141,440	188,106	9,002,185	6364.7%	0	0	0.0%	0.000	0.000	
2055	105,695	140,605	7,195,010	6807.3%	0	0	0.0%	0.000	0.000	
2056	78,298	104,179	5,717,082	7301.7%	0	0	0.0%	0.000	0.000	
2057	57,405	76,385	4,512,280	7860.5%	0	0	0.0%	0.000	0.000	
2058	41,550	55,286	3,527,572	8490.0%	0	0	0.0%	0.000	0.000	
2059	29,625	39,411	2,709,928	9147.5%	0	0	0.0%	0.000	0.000	
2060	20,716	27,548	2,043,355	9863.7%	0	0	0.0%	0.000	0.000	
2061	14,149	18,804	1,514,991	10707.2%	0	0	0.0%	0.000	0.000	
2062	9,353	12,418	1,104,462	11808.7%	0	0	0.0%	0.000	0.000	
2063	5,929	7,859	789,950	13324.0%	0	0	0.0%	0.000	0.000	
2064	3,524	4,658	553,543	15706.7%	0	0	0.0%	0.000	0.000	
2065	1,948	2,562	380,522	19535.6%	0	0	0.0%	0.000	0.000	
2066	934	1,217	255,210	27311.5%	0	0	0.0%	0.000	0.000	
2067	315	395	167,090	53084.3%	0	0	0.0%	0.000	0.000	
2068	134	163	78,919	59046.8%	0	0	0.0%	0.000	0.000	
2069	68	82	7,613	11184.8%	0	0	0.0%	0.000	0.000	
2070	23	28	2,119	9092.1%	0	0	0.0%	0.000	0.000	
2071	1	1	1,046	121496.9%	0	0	0.0%	0.000	0.000	
2072	0	0	0	0.0%	0	0	0.0%	0.000	0.000	
2073	0	0	0	0.0%	0	0	0.0%	0.000	0.000	
2074	0	0	0	0.0%	0	0	0.0%	0.000	0.000	
2075	0	0	0	0.0%	0	0	0.0%	0.000	0.000	
Total	512,801,764	612,250,611	2,655,243,335	517.8%	433.7%	26,065,899	78,925,217	302.8%	1.710	1.432
Past Experience	1,335,624,734	1,335,624,734	1,061,613,865	79.5%	672,600,275	442,088,099	65.7%	A/E	1.209	
	w/o Increase	With Increase	Incurred Claims	w/o Increase	With Increase	Incurred Claims	Loss Ratio	w/o Increase	With Increase	
Anticipated Experience	512,801,764	612,250,611	2,655,243,335	517.8%	433.7%	26,065,899	78,925,217	302.8%	1.710	1.432
Lifetime Experience	1,848,426,498	1,947,875,345	3,716,857,200	201.1%	190.8%	698,666,174	521,013,317	74.6%	2.696	2.559
Past Experience @ 4.5%	2,087,435,948	2,087,435,948	1,439,560,302	69.0%	69.0%	1,200,487,868	705,948,046	58.8%	1.173	1.173
Anticipated Experience @ 4.5%	390,389,912	455,732,010	1,569,894,929	402.1%	344.5%	22,057,399	62,862,394	285.0%	1.411	1.209
Lifetime Experience @ 4.5%	2,477,825,859	2,543,167,957	3,009,455,231	121.5%	118.3%	1,222,545,267	768,810,439	62.9%	1.931	1.882

**Virginia Lifetime Experience as of 12/31/2019  
Premiums at the Virginia Rate Level  
Non-Lifetime Benefit Periods**

Year	Virginia Rate Level		Incurred Claims		Loss Ratio	Original Pricing			Actual to Expected	
	Earned Premium	Earned Premium w/Increase	Incurred Claims	Loss Ratio		Earned Premium	Incurred Claims	Loss Ratio		
1997	37,587		0	0.0%	37,587	5,853	15.6%	0.000		
1998	180,339		0	0.0%	178,248	37,044	20.8%	0.000		
1999	279,228		41	0.0%	263,760	66,284	25.1%	0.001		
2000	406,624		936	0.2%	378,495	116,626	30.8%	0.007		
2001	580,511		194,549	33.5%	522,599	176,492	33.8%	0.992		
2002	760,855		4,280	0.6%	670,965	242,083	36.1%	0.016		
2003	1,045,098		49,059	4.7%	908,993	334,056	36.8%	0.128		
2004	1,238,275		192,780	15.6%	1,031,314	413,369	40.1%	0.388		
2005	1,279,544		142,118	11.1%	984,765	455,344	46.2%	0.240		
2006	1,256,101		351,098	28.0%	871,602	462,486	53.1%	0.527		
2007	1,258,290		146,113	11.6%	769,179	467,579	60.8%	0.191		
2008	1,320,584		777,983	58.9%	675,615	461,730	68.3%	0.862		
2009	1,257,339		271,904	21.6%	589,873	457,278	77.5%	0.279		
2010	1,212,321		339,460	28.0%	511,667	445,793	87.1%	0.321		
2011	1,160,369		841,012	72.5%	440,806	430,287	97.6%	0.742		
2012	1,111,799		950,163	85.5%	377,100	414,349	109.9%	0.778		
2013	1,344,662		530,674	39.5%	320,298	392,193	122.4%	0.322		
2014	1,485,782		1,261,216	84.9%	270,082	357,075	132.2%	0.642		
2015	1,413,687		1,627,121	115.1%	226,073	312,913	138.4%	0.832		
2016	1,355,640		1,044,342	77.0%	187,851	283,693	151.0%	0.510		
2017	1,275,572		1,805,381	141.5%	154,970	255,299	164.7%	0.859		
2018	1,345,864		1,490,910	110.8%	126,952	228,329	179.9%	0.616		
2019	1,314,209		2,245,110	170.8%	103,348	203,388	196.8%	0.868		
<b>Total</b>	<b>23,920,279</b>		<b>14,266,250</b>	<b>59.6%</b>	<b>10,602,141</b>	<b>7,019,542</b>	<b>66.2%</b>	<b>0.901</b>		
	Earned Premium w/o Increase	Earned Premium w/Increase	Incurred Claims	Loss Ratio w/o Increase	Loss Ratio w/Increase	Earned Premium	Incurred Claims	Loss Ratio	A/E w/o Increase	A/E w/Increase
2020	1,189,213	1,189,213	1,873,975	157.6%	157.6%	83,582	178,972	214.1%	0.736	0.736
2021	1,052,922	1,052,922	1,983,543	188.4%	188.4%	67,181	156,208	232.5%	0.810	0.810
2022	931,881	931,881	2,011,270	215.8%	215.8%	53,696	135,776	252.9%	0.854	0.854
2023	823,342	996,243	2,033,511	247.0%	204.1%	42,704	117,549	275.3%	0.897	0.742
2024	726,747	879,364	2,044,665	281.3%	232.5%	33,816	101,044	298.8%	0.942	0.778
2025	640,007	774,409	2,055,601	321.2%	265.4%	26,682	85,995	322.3%	0.997	0.824
2026	562,099	680,140	2,063,730	367.1%	303.4%	20,985	72,617	346.0%	1.061	0.877
2027	491,455	594,661	2,063,798	419.9%	347.1%	16,451	61,324	372.8%	1.127	0.931
2028	427,447	517,211	2,048,016	479.1%	396.0%	12,844	52,321	407.4%	1.176	0.972
2029	369,751	447,399	2,009,967	543.6%	449.3%	9,991	44,424	444.7%	1.223	1.010
2030	318,455	385,331	1,960,565	615.6%	508.8%	7,744	37,572	485.1%	1.269	1.049
2031	273,202	330,574	1,903,474	696.7%	575.8%	5,984	31,656	529.0%	1.317	1.088
2032	233,118	282,073	1,837,412	788.2%	651.4%	4,611	26,561	576.1%	1.368	1.131
2033	197,620	239,120	1,757,620	889.4%	735.0%	3,545	22,207	626.4%	1.420	1.173
2034	166,707	201,716	1,660,708	996.2%	823.3%	2,722	18,521	680.3%	1.464	1.210
2035	139,928	169,313	1,557,181	1112.8%	919.7%	2,089	15,426	738.4%	1.507	1.246
2036	116,842	141,379	1,453,417	1243.9%	1028.0%	1,604	12,848	801.1%	1.553	1.283
2037	97,060	117,442	1,349,625	1390.5%	1149.2%	1,209	10,380	858.8%	1.619	1.338
2038	80,180	97,018	1,243,520	1550.9%	1281.7%	877	7,837	894.0%	1.735	1.434
2039	65,852	79,681	1,130,626	1716.9%	1418.9%	629	5,755	915.6%	1.875	1.550
2040	53,742	65,028	1,021,421	1900.6%	1570.7%	463	4,390	947.5%	2.006	1.658
2041	43,552	52,698	919,829	2112.0%	1745.5%	351	3,497	996.0%	2.121	1.753
2042	35,031	42,388	822,123	2346.8%	1939.5%	269	2,812	1046.1%	2.243	1.854
2043	27,953	33,823	727,908	2604.0%	2152.1%	206	2,243	1087.0%	2.396	1.980
2044	22,155	26,807	635,248	2867.3%	2369.7%	159	1,756	1107.5%	2.589	2.140
2045	17,431	21,092	546,209	3133.5%	2589.7%	122	1,350	1107.2%	2.830	2.339
2046	13,615	16,475	464,974	3415.0%	2822.4%	90	1,000	1107.9%	3.082	2.547
2047	10,557	12,774	392,999	3722.6%	3076.5%	64	708	1109.1%	3.356	2.774
2048	8,128	9,834	329,888	4058.9%	3354.5%	42	472	1111.3%	3.652	3.019
2049	6,213	7,518	273,815	4406.9%	3642.1%	0	0	0.0%	0.000	0.000
2050	4,714	5,703	224,676	4766.6%	3939.3%	0	0	0.0%	0.000	0.000
2051	3,551	4,297	183,074	5155.3%	4260.6%	0	0	0.0%	0.000	0.000
2052	2,655	3,213	148,257	5583.9%	4614.8%	0	0	0.0%	0.000	0.000
2053	1,974	2,388	119,156	6036.6%	4988.9%	0	0	0.0%	0.000	0.000
2054	1,461	1,767	95,077	6509.3%	5379.5%	0	0	0.0%	0.000	0.000
2055	1,075	1,300	75,086	6986.9%	5774.3%	0	0	0.0%	0.000	0.000
2056	786	952	58,996	7501.8%	6199.8%	0	0	0.0%	0.000	0.000
2057	572	692	46,097	8058.9%	6660.2%	0	0	0.0%	0.000	0.000
2058	413	500	35,677	8642.1%	7142.2%	0	0	0.0%	0.000	0.000
2059	296	358	27,270	9223.2%	7622.5%	0	0	0.0%	0.000	0.000
2060	209	253	20,501	9791.9%	8092.4%	0	0	0.0%	0.000	0.000
2061	146	177	15,113	10334.0%	8540.5%	0	0	0.0%	0.000	0.000
2062	100	121	10,916	10898.4%	9006.9%	0	0	0.0%	0.000	0.000
2063	67	81	7,710	11454.6%	9466.6%	0	0	0.0%	0.000	0.000
2064	44	54	5,293	11945.3%	9872.1%	0	0	0.0%	0.000	0.000
2065	28	34	3,517	12373.4%	10226.0%	0	0	0.0%	0.000	0.000
2066	18	21	2,254	12738.5%	10527.7%	0	0	0.0%	0.000	0.000
2067	11	13	1,393	13075.5%	10806.2%	0	0	0.0%	0.000	0.000
2068	6	7	819	13352.3%	11035.0%	0	0	0.0%	0.000	0.000
2069	3	4	453	13682.0%	11307.4%	0	0	0.0%	0.000	0.000
2070	1	1	106	9356.4%	7732.5%	0	0	0.0%	0.000	0.000
2071	0	0	52	121718.0%	100593.4%	0	0	0.0%	0.000	0.000
2072	0	0	0	0.0%	0.0%	0	0	0.0%	0.000	0.000
2073	0	0	0	0.0%	0.0%	0	0	0.0%	0.000	0.000
2074	0	0	0	0.0%	0.0%	0	0	0.0%	0.000	0.000
2075	0	0	0	0.0%	0.0%	0	0	0.0%	0.000	0.000
<b>Total</b>	<b>9,160,338</b>	<b>10,417,466</b>	<b>43,258,129</b>	<b>472.2%</b>	<b>415.2%</b>	<b>400,712</b>	<b>1,213,220</b>	<b>302.8%</b>	<b>1.560</b>	<b>1.372</b>
	Earned Premium w/o Increase	Earned Premium With Increase	Incurred Claims	Loss Ratio w/o Increase	Loss Ratio With Increase	Earned Premium	Incurred Claims	Loss Ratio	A/E w/o Increase	A/E With Increase
Past Experience	23,920,279	23,920,279	14,266,250	59.6%	59.6%	10,602,141	7,019,542	66.2%	0.901	0.901
Anticipated Experience	9,160,338	10,417,466	43,258,129	472.2%	415.2%	400,712	1,213,220	302.8%	1.560	1.372
Lifetime Experience	33,080,617	34,337,745	57,524,380	173.9%	167.5%	11,002,852	8,232,762	74.8%	2.324	2.239
Past Experience @ 4.5%	37,112,440	37,112,440	18,292,530	49.3%	49.3%	19,108,783	11,287,432	59.1%	0.834	0.834
Anticipated Experience @ 4.5%	7,124,021	7,993,478	27,132,249	380.9%	339.4%	339,280	969,463	285.7%	1.333	1.188
Lifetime Experience @ 4.5%	44,236,461	45,105,918	45,424,779	102.7%	100.7%	19,448,063	12,256,895	63.0%	1.629	1.598

**Virginia Lifetime Experience as of 12/31/2019**  
**Premiums at the Virginia Rate Level**  
**Lifetime Benefit Period**

Year	Virginia Rate Level		Incurred Claims Discounted to Incurred Year		Loss Ratio	Original Pricing			Actual to Expected	
	Earned Premium	Earned Premium	Incurred Claims	Loss Ratio		Earned Premium	Incurred Claims	Loss Ratio	w/o Increase	w/Increase
1997	21,765		0	0.0%	21,765	3,419	15.7%		0.000	
1998	118,168		5	0.0%	116,763	24,680	21.1%		0.000	
1999	224,159		0	0.0%	212,899	51,282	24.1%		0.000	
2000	414,433		0	0.0%	388,830	113,993	29.3%		0.000	
2001	697,254		117,081	16.8%	637,726	198,179	31.1%		0.540	
2002	1,053,602		1,314	0.1%	961,946	317,028	33.0%		0.004	
2003	1,501,260		19,379	1.3%	1,348,607	466,907	34.6%		0.037	
2004	1,718,021		1,010,737	58.8%	1,455,110	572,339	39.3%		1.496	
2005	1,721,932		305,811	17.8%	1,338,389	611,258	45.7%		0.389	
2006	1,704,879		41,736	2.4%	1,184,395	625,977	52.9%		0.046	
2007	1,759,028		1,650,242	93.8%	1,044,587	630,028	60.3%		1.555	
2008	1,886,844		1,059,277	56.1%	916,502	618,906	67.5%		0.831	
2009	1,843,942		38,019	2.1%	799,130	612,567	76.7%		0.027	
2010	1,822,705		1,756,245	96.4%	692,148	598,866	86.5%		1.114	
2011	1,807,807		478,783	26.5%	595,329	584,554	98.2%		0.270	
2012	1,769,649		163,949	9.3%	508,404	566,017	111.3%		0.083	
2013	1,647,284		1,711,706	103.9%	431,011	530,268	123.0%		0.845	
2014	1,675,185		832,578	49.7%	362,698	468,562	129.2%		0.385	
2015	1,686,943		1,616,183	95.8%	302,939	415,306	137.1%		0.699	
2016	1,611,318		754,573	46.8%	251,160	374,175	149.0%		0.314	
2017	1,526,969		1,554,493	101.8%	206,729	334,890	162.0%		0.628	
2018	1,441,371		2,395,972	166.2%	168,959	298,155	176.5%		0.942	
2019	1,493,233		2,660,416	178.2%	137,141	264,275	192.7%		0.925	
<b>Total</b>	<b>31,147,752</b>		<b>18,168,499</b>	<b>58.3%</b>	<b>14,083,166</b>	<b>9,281,632</b>	<b>65.9%</b>		<b>0.885</b>	
	Earned Premium w/o Increase	Earned Premium w/Increase	Incurred Claims	Loss Ratio w/o Increase	Loss Ratio w/Increase	Earned Premium	Incurred Claims	Loss Ratio	A/E w/o Increase	A/E w/Increase
2020	1,389,183	1,389,183	2,293,684	165.1%	165.1%	110,573	232,846	210.6%	0.784	0.784
2021	1,264,433	1,264,433	2,513,620	198.8%	198.8%	88,591	203,882	230.1%	0.864	0.864
2022	1,145,767	1,145,767	2,634,545	229.9%	229.9%	70,570	177,560	251.6%	0.914	0.914
2023	1,034,034	1,406,287	2,752,221	266.2%	195.7%	55,926	153,880	275.2%	0.967	0.711
2024	931,656	1,267,052	2,862,564	307.3%	225.9%	44,116	132,680	300.8%	1.022	0.751
2025	837,591	1,139,124	2,976,104	355.3%	261.3%	34,649	113,917	328.8%	1.081	0.795
2026	750,986	1,021,341	3,086,771	411.0%	302.2%	27,099	97,348	359.2%	1.144	0.841
2027	671,015	912,580	3,185,713	474.8%	349.1%	21,109	82,759	392.0%	1.211	0.890
2028	597,566	812,690	3,262,050	545.9%	401.4%	16,382	70,046	427.6%	1.277	0.939
2029	530,054	720,874	3,309,939	624.5%	459.2%	12,669	59,053	466.1%	1.340	0.985
2030	468,831	637,610	3,342,690	713.0%	524.3%	9,765	49,566	507.6%	1.405	1.033
2031	413,030	561,721	3,358,536	813.1%	597.9%	7,506	41,413	551.7%	1.474	1.084
2032	362,155	492,530	3,351,244	925.4%	680.4%	5,758	34,478	598.8%	1.545	1.136
2033	315,505	429,087	3,312,233	1049.8%	771.9%	4,411	28,621	648.9%	1.618	1.190
2034	273,587	372,078	3,237,360	1183.3%	870.1%	3,377	23,713	702.2%	1.685	1.239
2035	236,321	321,396	3,140,778	1329.0%	977.2%	2,586	19,628	759.1%	1.751	1.287
2036	203,121	276,244	3,029,431	1491.4%	1096.6%	1,963	15,990	814.5%	1.831	1.346
2037	173,673	236,195	2,901,165	1670.5%	1228.3%	1,464	12,582	859.4%	1.944	1.429
2038	147,671	200,833	2,750,355	1862.5%	1369.5%	1,087	9,777	899.6%	2.070	1.522
2039	124,839	169,782	2,570,785	2059.3%	1514.2%	819	7,744	945.8%	2.177	1.601
2040	104,868	142,621	2,386,715	2275.9%	1673.5%	626	6,262	999.7%	2.277	1.674
2041	87,439	118,917	2,206,635	2523.6%	1855.6%	481	5,045	1048.6%	2.407	1.770
2042	72,368	98,421	2,022,955	2795.4%	2055.4%	370	4,003	1082.2%	2.583	1.899
2043	59,322	80,678	1,831,188	3086.9%	2269.8%	285	3,111	1092.8%	2.825	2.077
2044	48,212	65,569	1,631,948	3384.9%	2488.9%	219	2,394	1092.6%	3.098	2.278
2045	38,954	52,978	1,436,269	3687.0%	2711.1%	163	1,776	1092.8%	3.374	2.481
2046	31,255	42,507	1,249,404	3997.4%	2939.3%	115	1,258	1094.5%	3.652	2.685
2047	24,890	33,850	1,081,812	4346.4%	3195.9%	72	792	1094.4%	3.971	2.920
2048	19,666	26,746	928,633	4722.0%	3472.0%	35	381	1096.3%	4.307	3.167
2049	15,422	20,974	787,463	5106.2%	3754.5%	0	0	0.0%	0.000	0.000
2050	12,003	16,324	662,624	5520.4%	4059.1%	0	0	0.0%	0.000	0.000
2051	9,274	12,613	553,447	5967.7%	4388.0%	0	0	0.0%	0.000	0.000
2052	7,155	9,731	456,255	6376.7%	4688.8%	0	0	0.0%	0.000	0.000
2053	5,469	7,437	374,708	6851.9%	5038.1%	0	0	0.0%	0.000	0.000
2054	4,131	5,618	302,992	7334.7%	5393.2%	0	0	0.0%	0.000	0.000
2055	3,105	4,222	242,899	7823.6%	5752.7%	0	0	0.0%	0.000	0.000
2056	2,312	3,144	193,592	8375.0%	6158.1%	0	0	0.0%	0.000	0.000
2057	1,702	2,315	153,252	9004.7%	6621.1%	0	0	0.0%	0.000	0.000
2058	1,236	1,681	120,148	9722.7%	7149.0%	0	0	0.0%	0.000	0.000
2059	883	1,200	92,426	10472.1%	7700.1%	0	0	0.0%	0.000	0.000
2060	617	840	69,768	11299.0%	8308.1%	0	0	0.0%	0.000	0.000
2061	421	573	51,814	12308.0%	9050.0%	0	0	0.0%	0.000	0.000
2062	277	376	37,867	13679.4%	10058.4%	0	0	0.0%	0.000	0.000
2063	173	236	27,183	15668.2%	11520.7%	0	0	0.0%	0.000	0.000
2064	101	137	19,146	18990.7%	13963.8%	0	0	0.0%	0.000	0.000
2065	53	73	13,257	24829.5%	18257.0%	0	0	0.0%	0.000	0.000
2066	23	31	8,967	38945.1%	28636.1%	0	0	0.0%	0.000	0.000
2067	5	6	5,926	126701.2%	93162.6%	0	0	0.0%	0.000	0.000
2068	0	0	2,746	917612.9%	674715.4%	0	0	0.0%	0.000	0.000
2069	0	0	0	0.0%	0.0%	0	0	0.0%	0.000	0.000
2070	0	0	0	0.0%	0.0%	0	0	0.0%	0.000	0.000
2071	0	0	0	0.0%	0.0%	0	0	0.0%	0.000	0.000
2072	0	0	0	0.0%	0.0%	0	0	0.0%	0.000	0.000
2073	0	0	0	0.0%	0.0%	0	0	0.0%	0.000	0.000
2074	0	0	0	0.0%	0.0%	0	0	0.0%	0.000	0.000
2075	0	0	0	0.0%	0.0%	0	0	0.0%	0.000	0.000
<b>Total</b>	<b>12,422,355</b>	<b>15,526,625</b>	<b>78,823,829</b>	<b>634.5%</b>	<b>507.7%</b>	<b>522,785</b>	<b>1,592,504</b>	<b>304.6%</b>	<b>2.083</b>	<b>1.667</b>
	Earned Premium w/o Increase	Earned Premium With Increase	Incurred Claims	Loss Ratio w/o Increase	Loss Ratio With Increase	Earned Premium	Incurred Claims	Loss Ratio	A/E w/o Increase	A/E With Increase
Past Experience	31,147,752	31,147,752	18,168,499	58.3%	58.3%	14,083,166	9,281,632	65.9%	0.885	0.885
Anticipated Experience	12,422,355	15,526,625	78,823,829	634.5%	507.7%	522,785	1,592,504	304.6%	2.083	1.667
Lifetime Experience	43,570,107	46,674,377	96,992,328	222.6%	207.8%	14,605,951	10,874,135	74.5%	2.990	2.791
Past Experience @ 4.5%	48,594,624	48,594,624	24,436,302	50.3%	50.3%	25,139,599	14,835,802	59.0%	0.852	0.852
Anticipated Experience @ 4.5%	9,363,715	11,449,825	45,544,645	486.4%	397.8%	443,632	1,272,240	286.8%	1.696	1.387
Lifetime Experience @ 4.5%	57,958,338	60,044,449	69,980,947	120.7%	116.5%	25,583,230	16,108,042	63.0%	1.918	1.851



**Virginia Lifetime Experience as of 12/31/2019**  
**Premiums at the Virginia Rate Level**  
**All Benefit Periods**

Year	Virginia Rate Level		Incurred Claims		Original Pricing			Actual to Expected		
	Rate Level	Incurred Claims	Discounted to	Incurred Year	Loss Ratio	Incurred Year	Loss Ratio	Incurred Year	Loss Ratio	
	Earned Premium	Incurred Year	Incurred Year	Loss Ratio	Loss Ratio	Incurred Year	Loss Ratio	Incurred Year	Loss Ratio	
1997	59,351	0	0	0.0%	59,351	9,273	15.6%	0.000	0.000	
1998	298,507	5	5	0.0%	295,011	61,724	20.9%	0.000	0.000	
1999	503,387	41	41	0.0%	476,658	117,566	24.7%	0.000	0.000	
2000	821,057	936	936	0.1%	767,325	230,618	30.1%	0.004	0.004	
2001	1,277,765	311,630	311,630	24.4%	1,160,325	374,670	32.3%	0.755	0.755	
2002	1,814,457	5,595	5,595	0.3%	1,632,911	559,111	34.2%	0.009	0.009	
2003	2,546,358	68,437	68,437	2.7%	2,257,600	800,963	35.5%	0.076	0.076	
2004	2,956,296	1,203,517	1,203,517	40.7%	2,486,424	985,708	39.6%	1.027	1.027	
2005	3,001,476	447,930	447,930	14.9%	2,323,154	1,066,602	45.9%	0.325	0.325	
2006	2,960,981	392,834	392,834	13.3%	2,055,997	1,088,463	52.9%	0.251	0.251	
2007	3,017,318	1,796,356	1,796,356	59.5%	1,813,765	1,097,607	60.5%	0.984	0.984	
2008	3,207,427	1,837,260	1,837,260	57.3%	1,592,118	1,080,636	67.9%	0.844	0.844	
2009	3,101,281	309,923	309,923	10.0%	1,389,003	1,069,845	77.0%	0.130	0.130	
2010	3,035,026	2,095,706	2,095,706	69.1%	1,203,815	1,044,660	86.8%	0.796	0.796	
2011	2,968,176	1,319,796	1,319,796	44.5%	1,036,135	1,014,841	97.9%	0.454	0.454	
2012	2,881,448	1,114,112	1,114,112	38.7%	885,504	980,365	110.7%	0.349	0.349	
2013	2,991,946	2,242,380	2,242,380	74.9%	751,309	922,461	122.8%	0.610	0.610	
2014	3,160,966	2,093,795	2,093,795	66.2%	632,779	825,636	130.5%	0.508	0.508	
2015	3,100,630	3,243,304	3,243,304	104.6%	529,012	728,219	137.7%	0.760	0.760	
2016	2,966,959	1,798,915	1,798,915	60.6%	439,012	657,867	149.9%	0.405	0.405	
2017	2,802,541	3,359,874	3,359,874	119.9%	361,698	590,190	163.2%	0.735	0.735	
2018	2,787,235	3,886,882	3,886,882	139.5%	295,911	526,484	177.9%	0.784	0.784	
2019	2,807,442	4,905,526	4,905,526	174.7%	240,489	467,664	194.5%	0.899	0.899	
<b>Total</b>	<b>55,068,032</b>	<b>32,434,750</b>	<b>32,434,750</b>	<b>58.9%</b>	<b>24,685,307</b>	<b>16,301,174</b>	<b>66.0%</b>	<b>0.892</b>	<b>0.892</b>	
	<u>Earned Premium</u>	<u>Earned Premium</u>	<u>Incurred Claims</u>	<u>Loss Ratio</u>	<u>Loss Ratio</u>	<u>Incurred Claims</u>	<u>Loss Ratio</u>	<u>A/E</u>	<u>A/E</u>	
	<u>w/o Increase</u>	<u>w/Increase</u>	<u>w/o Increase</u>	<u>w/Increase</u>	<u>w/o Increase</u>	<u>w/Increase</u>	<u>w/o Increase</u>	<u>w/Increase</u>	<u>w/Increase</u>	
2020	2,578,396	2,578,396	4,167,658	161.6%	161.6%	194,155	411,818	212.1%	0.762	
2021	2,317,355	2,317,355	4,497,163	194.1%	194.1%	155,771	360,090	231.2%	0.840	
2022	2,077,648	2,077,648	4,645,815	223.6%	223.6%	124,266	313,336	252.1%	0.887	
2023	1,857,376	2,402,530	4,785,733	257.7%	199.2%	98,630	271,428	275.2%	0.936	
2024	1,658,402	2,146,415	4,907,229	295.9%	228.6%	77,932	233,723	299.9%	0.987	
2025	1,477,598	1,913,533	5,031,705	340.5%	263.0%	61,331	199,912	326.0%	1.045	
2026	1,313,085	1,701,481	5,150,501	392.2%	302.7%	48,084	169,965	353.5%	1.110	
2027	1,162,470	1,507,241	5,249,512	451.6%	348.3%	37,560	144,082	383.6%	1.177	
2028	1,025,013	1,329,901	5,310,066	518.0%	399.3%	29,226	122,367	418.7%	1.237	
2029	899,805	1,168,273	5,319,906	591.2%	455.4%	22,659	103,477	456.7%	1.295	
2030	787,286	1,022,941	5,303,255	673.6%	518.4%	17,510	87,138	497.7%	1.354	
2031	686,232	892,295	5,262,010	766.8%	589.7%	13,490	73,069	541.6%	1.416	
2032	595,273	774,604	5,188,656	871.6%	669.8%	10,369	61,038	588.7%	1.481	
2033	513,125	668,207	5,069,853	988.0%	758.7%	7,956	50,829	638.9%	1.547	
2034	440,294	573,794	4,898,067	1112.5%	853.6%	6,099	42,234	692.5%	1.607	
2035	376,248	490,709	4,697,959	1248.6%	957.4%	4,675	35,055	749.9%	1.665	
2036	319,963	417,623	4,482,847	1401.1%	1073.4%	3,567	28,837	808.4%	1.733	
2037	270,733	353,637	4,250,790	1570.1%	1202.0%	2,673	22,962	859.1%	1.828	
2038	227,852	297,851	3,993,875	1752.8%	1340.9%	1,963	17,614	897.1%	1.954	
2039	190,691	249,462	3,701,411	1941.0%	1483.8%	1,447	13,500	932.7%	2.081	
2040	158,610	207,649	3,408,136	2148.7%	1641.3%	1,090	10,652	977.5%	2.198	
2041	130,991	171,615	3,126,464	2386.8%	1821.8%	832	8,543	1026.4%	2.325	
2042	107,399	140,808	2,845,077	2649.1%	2020.5%	639	6,816	1067.0%	2.483	
2043	87,275	114,501	2,559,096	2932.2%	2235.0%	491	5,353	1090.4%	2.689	
2044	70,367	92,376	2,267,196	3222.0%	2454.3%	378	4,150	1098.8%	2.932	
2045	56,386	74,070	1,982,478	3515.9%	2676.5%	284	3,126	1099.0%	3.199	
2046	44,871	58,982	1,714,378	3820.7%	2906.6%	205	2,258	1100.4%	3.472	
2047	35,447	46,624	1,474,812	4160.6%	3163.2%	136	1,500	1101.3%	3.778	
2048	27,794	36,580	1,258,522	4528.1%	3440.4%	77	852	1104.5%	4.100	
2049	21,635	28,492	1,061,278	4905.3%	3724.8%	0	0	0.0%	0.000	
2050	16,717	22,028	887,300	5307.8%	4028.1%	0	0	0.0%	0.000	
2051	12,825	16,910	736,522	5742.8%	4355.6%	0	0	0.0%	0.000	
2052	9,810	12,943	604,512	6162.1%	4670.4%	0	0	0.0%	0.000	
2053	7,443	9,826	493,864	6635.6%	5026.2%	0	0	0.0%	0.000	
2054	5,592	7,385	398,069	7119.1%	5389.9%	0	0	0.0%	0.000	
2055	4,179	5,523	317,985	7608.5%	5757.8%	0	0	0.0%	0.000	
2056	3,098	4,095	252,588	8153.4%	6167.8%	0	0	0.0%	0.000	
2057	2,274	3,007	199,350	8766.8%	6630.1%	0	0	0.0%	0.000	
2058	1,649	2,180	155,825	9452.1%	7147.5%	0	0	0.0%	0.000	
2059	1,178	1,558	119,696	10158.7%	7682.3%	0	0	0.0%	0.000	
2060	827	1,093	90,269	10917.4%	8258.1%	0	0	0.0%	0.000	
2061	567	749	66,926	11799.0%	8929.7%	0	0	0.0%	0.000	
2062	377	498	48,783	12940.5%	9802.3%	0	0	0.0%	0.000	
2063	241	317	34,892	14490.4%	10993.6%	0	0	0.0%	0.000	
2064	145	191	24,439	16839.7%	12813.6%	0	0	0.0%	0.000	
2065	82	107	16,774	20501.8%	15675.6%	0	0	0.0%	0.000	
2066	41	53	11,222	27556.6%	21282.3%	0	0	0.0%	0.000	
2067	15	19	7,320	47736.5%	38014.2%	0	0	0.0%	0.000	
2068	6	8	3,565	55412.4%	45532.9%	0	0	0.0%	0.000	
2069	3	4	453	13682.0%	11307.4%	0	0	0.0%	0.000	
2070	1	1	106	9356.4%	7732.5%	0	0	0.0%	0.000	
2071	0	0	52	121718.0%	100593.4%	0	0	0.0%	0.000	
2072	0	0	0	0.0%	0.0%	0	0	0.0%	0.000	
2073	0	0	0	0.0%	0.0%	0	0	0.0%	0.000	
2074	0	0	0	0.0%	0.0%	0	0	0.0%	0.000	
2075	0	0	0	0.0%	0.0%	0	0	0.0%	0.000	
<b>Total</b>	<b>21,582,693</b>	<b>25,944,090</b>	<b>122,081,958</b>	<b>565.6%</b>	<b>470.6%</b>	<b>923,497</b>	<b>2,805,724</b>	<b>303.8%</b>	<b>1.862</b>	<b>1.549</b>
	<u>Earned Premium</u>	<u>Earned Premium</u>	<u>Incurred Claims</u>	<u>Loss Ratio</u>	<u>Loss Ratio</u>	<u>Incurred Claims</u>	<u>Loss Ratio</u>	<u>A/E</u>	<u>A/E</u>	
	<u>w/o Increase</u>	<u>With Increase</u>	<u>w/o Increase</u>	<u>With Increase</u>	<u>w/o Increase</u>	<u>With Increase</u>	<u>w/o Increase</u>	<u>With Increase</u>	<u>w/o Increase</u>	<u>With Increase</u>
Past Experience	55,068,032	55,068,032	32,434,750	58.9%	58.9%	24,685,307	16,301,174	66.0%	0.892	0.892
Anticipated Experience	21,582,693	25,944,090	122,081,958	565.6%	470.6%	923,497	2,805,724	303.8%	1.862	1.549
Lifetime Experience	76,650,725	81,012,122	154,516,708	201.6%	190.7%	25,608,803	19,106,898	74.6%	2.702	2.556
Past Experience @ 4.5%	85,707,064	85,707,064	42,728,832	49.9%	49.9%	44,248,382	26,123,234	59.0%	0.844	0.844
Anticipated Experience @ 4.5%	16,487,736	19,443,304	72,676,894	440.8%	373.8%	782,911	2,241,703	286.3%	1.539	1.305
Lifetime Experience @ 4.5%	102,194,799	105,150,367	115,405,726	112.9%	109.8%	45,031,293	28,364,937	63.0%	1.793	1.742

# 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. 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. A summary of benefits, by form, is included in Exhibit 1. 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:

<u>Policy Form</u>	<u>Issue Dates</u>		<u>Issue Age Limits</u>
	<u>From</u>	<u>To</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, 2019, are displayed in Exhibit 2. Exhibit 2 also shows the average annual premium before and after the proposed rate increase.

#### 3. REASON FOR RATE INCREASE REQUEST

It was determined that a rate increase was necessary due to higher anticipated future and lifetime loss ratios. The higher anticipated lifetime loss ratios are a result of a combination of insureds keeping their policies longer and longer claim continuance mostly affecting longer benefit periods.

#### 4. RATE INCREASE HISTORY

The National and State rate increase history by form is displayed in Exhibit 3.

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
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 2012 AIM Basic table with gender distinct rates adjusted for experience with selection factors grading from 30% to 100% over 12 years. Generational mortality improvement of Scale G2 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 2017 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 49 million life years of exposure and over \$50 billion of incurred claims. In 2019, 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. 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

The proposed rate increase amount, as noted in Section 11, assumes a **January 1, 2023**, effective date for all policies.

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, 2019, are shown in Exhibits 4A through 4C. The premiums in Exhibits 4A through 4C 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 5A through 5C. Separate exhibits have been completed for the Non-Lifetime Benefit Periods (Exhibit 5A), the Lifetime Benefit Period (Exhibit 5B), and all Benefit Periods combined (Exhibit 5C).

10. LIFETIME ANTICIPATED LOSS RATIO (THIS SECTION NEEDS TO BE UPDATED)

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. These values are displayed in Exhibits 5A through 5C. 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 revised rate increase of 21.0% is justified for the Non-Lifetime Benefit periods as displayed below:

Experience Period	Earned Premium	Incurred Claims	Actual Loss Ratios	Pricing Loss Ratios	Actual to Expected
Past	828,357,355	524,440,173	63.3%	58.8%	1.077
Future	139,298,622	451,321,698	324.0%	281.4%	1.151
Lifetime	967,655,977	975,761,871	100.8%	62.9%	1.603

As the future and lifetime Actual to Expected Ratios both meet or exceed 1.000, we feel the proposed rate increase is warranted.

Lifetime Benefit Periods

A revised rate increase of 36.0% is justified for the Lifetime Benefit period as displayed below:

Experience Period	Earned Premium	Incurred Claims	Actual Loss Ratios	Pricing Loss Ratios	Actual to Expected
Past	1,259,078,592	915,120,129	72.7%	58.8%	1.235
Future	316,433,388	1,118,573,231	353.5%	287.6%	1.229
Lifetime	1,575,511,980	2,033,693,360	129.1%	62.9%	2.053

As the future and lifetime Actual to Expected Ratios both meet or exceed 1.000, we feel the proposed rate increase is warranted.

All Benefit Periods Combined

A revised overall rate increase of 30.0% is justified for All Benefit Periods Combined as displayed below:

Experience Period	Earned Premium	Incurred Claims	Actual Loss Ratios	Pricing Loss Ratios	Actual to Expected
Past	2,087,435,948	1,439,560,302	69.0%	58.8%	1.173
Future	455,732,010	1,569,894,929	344.5%	285.0%	1.209
Lifetime	2,543,167,957	3,009,455,231	118.3%	62.9%	1.882

As the future and lifetime Actual to Expected Ratios both meet or exceed 1.000, we feel the proposed rate increase is warranted.

11. SUMMARY OF PROPOSED RATE INCREASE

We are revising the requested rate increase to:

Benefit Period	2023
Non-Lifetime	21.0%
Lifetime	36.0%
Total	30.0%

The proposed effective date of the rate increase is January 1, 2023.

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 (will be made to all policyholders).

In addition, policyholders will be encouraged to contact our Customer Service Department to find the best option to maintain affordable coverage.



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September 12, 2022

Attachments:

Attachment A – Actuarial Certification

Exhibit 1 – Benefit Summary

Exhibit 2 - Policies In-Force, Annualized Premium and Average Annual Premium

Exhibit 3 – Rate Increase History

Exhibits 4A-C – Nationwide Historical Experience

Exhibits 5A-C – Nationwide Lifetime Experience Projection

Exhibits 6A-C – Virginia Lifetime Experience Projection

Exhibits 7A-C – Nationwide Dual Loss Ratio Test (60/80)

Exhibit 8 – Side-by-Side Rate Comparison

Proposed Rates

**Policies In-Force as of 12/31/2019, Annualized Premium and Average Annual Premium****National****Non-Lifetime Benefit Periods**

Policy Form	In-Force	Annualized Premium	Proposed 2021 Average Annual Premium			Proposed 2022 Average Annual Premium		
			Before Increase	After Increase	Increase Amount	Before Increase	After Increase	Increase Amount
LT50	1,419	2,143,349	1,510	1,964	30.0%	1,964	1,964	0.0%
NH50	487	399,893	821	1,067	30.0%	1,067	1,067	0.0%
HCA	379	720,908	1,902	2,473	30.0%	2,473	2,473	0.0%
HCAQ	171	207,585	1,214	1,578	30.0%	1,578	1,578	0.0%
LTA	5,363	9,787,948	1,825	2,373	30.0%	2,373	2,373	0.0%
LTAQ	1,193	1,915,370	1,606	2,087	30.0%	2,087	2,087	0.0%
NHA	4,916	10,614,662	2,159	2,807	30.0%	2,807	2,807	0.0%
NHAQ	1,094	2,040,197	1,865	2,424	30.0%	2,424	2,424	0.0%
Total	15,022	27,829,912	1,853	2,408	30.0%	2,408	2,408	0.0%

**Lifetime Benefit Period**

Policy Form	In-Force	Annualized Premium	Proposed 2021 Average Annual Premium			Proposed 2022 Average Annual Premium		
			Before Increase	After Increase	Increase Amount	Before Increase	After Increase	Increase Amount
LT50	1,006	2,686,273	2,670	3,471	30.0%	3,471	4,513	30.0%
NH50	452	684,061	1,513	1,967	30.0%	1,967	2,558	30.0%
HCA	188	693,595	3,689	4,796	30.0%	4,796	6,235	30.0%
HCAQ	55	162,594	2,956	3,843	30.0%	3,843	4,996	30.0%
LTA	5,956	19,727,946	3,312	4,306	30.0%	4,306	5,598	30.0%
LTAQ	1,659	4,342,442	2,618	3,403	30.0%	3,403	4,424	30.0%
NHA	3,610	13,784,385	3,818	4,964	30.0%	4,964	6,453	30.0%
NHAQ	1,071	3,448,280	3,220	4,186	30.0%	4,186	5,441	30.0%
Total	13,997	45,529,578	3,253	4,229	30.0%	4,229	5,497	30.0%

**Virginia****Non-Lifetime Benefit Periods**

Policy Form	In-Force	Annualized Premium	Proposed 2023 Average Annual Premium		
			Before Increase	After Increase	Increase Amount
LT50	76	99,825	1,313	1,589	21.0%
NH50	41	33,552	818	990	21.0%
HCA	41	60,469	1,475	1,785	21.0%
HCAQ	0	0	0	0	0.0%
LTA	376	720,249	1,916	2,318	21.0%
LTAQ	0	0	0	0	0.0%
NHA	266	554,666	2,085	2,523	21.0%
NHAQ	0	0	0	0	0.0%
Total	800	1,468,761	1,836	2,222	21.0%

**Lifetime Benefit Period**

Policy Form	In-Force	Annualized Premium	Proposed 2023 Average Annual Premium		
			Before Increase	After Increase	Increase Amount
LT50	33	102,051	3,092	4,206	36.0%
NH50	17	33,036	1,943	2,643	36.0%
HCA	30	109,608	3,654	4,969	36.0%
HCAQ	0	0	0	0	0.0%
LTA	289	945,586	3,272	4,450	36.0%
LTAQ	0	0	0	0	0.0%
NHA	187	710,009	3,797	5,164	36.0%
NHAQ	0	0	0	0	0.0%
Total	556	1,900,290	3,418	4,648	36.0%

There is a need to increase premiums on certain policy series to reflect that future claims are expected to be significantly higher than originally expected. Claims are significantly higher due to insureds both keeping their policies longer and staying on claim longer than expected when the policy was originally priced.



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

**Company Name and NAIC Number:** Mutual of Omaha Insurance Company (71412)

**SERFF Tracking Number:** MUTA-132676983

**Revised Rates**

**Average Annual Premium Per Member:** \$2,485

**Average Requested Percentage Rate Change Per Member:** 2023 - 30.0%

**Range of Requested Rate Changes:** 2023 - 21.0%-36.0%

**Number of Virginia Policyholders Affected:** 1,356

Form Number	Product Name	Issue Dates	Prior Rate Increases – Date and Percentage Approved	Outlook for Future Rate Increases
LT50			Please refer to Exhibit 3, attached to the Actuarial Memorandum.	Please refer to the Actuarial Memorandum.
NH50			Please refer to Exhibit 3, attached to the Actuarial Memorandum.	Please refer to the Actuarial Memorandum.
HCA			Please refer to Exhibit 3, attached to the Actuarial Memorandum.	Please refer to the Actuarial Memorandum.
NHA			Please refer to Exhibit 3, attached to the Actuarial Memorandum.	Please refer to the Actuarial Memorandum.
LTA			Please refer to Exhibit 3, attached to the Actuarial Memorandum.	Please refer to the Actuarial Memorandum.

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

This document is prepared by the carrier to help explain the requested rate change and 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 at <https://www.scc.virginia.gov/boi/SERFFInquiry/default.aspx>.

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 AB QUOTED PREMIUMS BY 3, 6, AND 12, RESPECTIVELY. THE MONTHLY PREMIUMS FOR BANK SERVICE PLAN AND PAYROLL DEDUCTION ISSUES ARE THE PREMIUMS LISTED  
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Date: 04/26/2017

MUTUAL OF OMAHA INSURANCE COMPANY  
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**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 AB QUOTED PREMIUMS BY 3, 6, AND 12, RESPECTIVELY. THE MONTHLY PREMIUMS FOR B SERVICE PLAN AND PAYROLL DEDUCTION ISSUES ARE THE PREMIUMS LISTED ABO V R25387-44-4

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**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

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**100% HOME HEALTH CARE BENEFIT**

**BENEFIT -- 5 YEARS**

Issue Age	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 AB QUOTED PREMIUMS BY 3, 6, AND 12, RESPECTIVELY. THE MONTHLY PREMIUMS FOR E 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 -- LIFETIME**

**ELIMINATION PERIODS**

Issue Age	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 AB QUOTED PREMIUMS BY 3, 6, AND 12, RESPECTIVELY. THE MONTHLY PREMIUMS FOR E 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 AB QUOTED PREMIUMS BY 3, 6, AND 12. RESPECTIVELY . THE MONTHLY PREMIUMS FOR I 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  
**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 AB 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  
**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 AB PREMIUMS BY 3, 6 AND 12 RESPECTIVELY. THE MONTHLY PREMIUMS FOR BANK SER' PAYROLL DEDUCTION ISSUES ARE THE PREMIUMS LISTED ABOVE.

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 -- 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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Date: 04/26/2017

MUTUAL OF OMAHA INSURANCE COMPANY  
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 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.  
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MUTUAL OF OMAHA INSURANCE COMPANY  
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 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 ODX5M

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	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.  
 R25387-44-4

Date: 04/26/2017

MUTUAL OF OMAHA INSURANCE COMPANY  
 SCHEDULE OF MONTHLY RATES FOR RIDER FORM ODX5M

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 BUSINESS 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 ODX5M

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	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 BUSINESS 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 ODX5M

PER \$10 DAILY CONFINED CARE/PER \$10 DAILY COMMUNITY BASED BENEFIT  
**100% HOME HEALTH CARE BENEFIT**

**BENEFIT -- 5 YEARS**

Issue Age	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 BUSINESS 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 ODX5M

PER \$10 DAILY CONFINED CARE/PER \$10 DAILY COMMUNITY BASED BENEFIT  
**100% HOME HEALTH CARE BENEFIT**

**BENEFIT -- LIFETIME**

Issue Age	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 BUSINESS SERVICE PLAN AND PAYROLL DEDUCTIBLE ON 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 ODX5M

PER \$10 DAILY CONFINED CARE/PER \$8 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	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 INDIVIDUAL 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 ODX5M

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 ABOVE QUOTED PREMIUMS BY 3, 6, AND 12, RESPECTIVELY. THE MONTHLY PREMIUMS FOR BUSINESS 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 ODX5M

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	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 MONTHLY PREMIUMS BY 3, 6 AND 12 RESPECTIVELY. THE MONTHLY PREMIUMS FOR BANK SERVICE 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 ODX5M

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	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 ODX5M

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	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 ODX5M

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 ODX5M

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 ODX5M

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 ODX5M

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 ODX5M

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	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 .  
 R25388-44-4



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

**BENEFITS -- LIFETIME**

Issue Age	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 .

R25388-44-4

Date: 04/26/2017

MUTUAL OF OMAHA INSURANCE COMPANY  
 SCHEDULE OF MONTHLY RATES FOR RIDER FORM ODX6M

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 ODX6M

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.

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**Nationwide Lifetime Experience as of 12/31/2019  
Premiums at the Virginia Rate Level  
Non-Lifetime Benefit Periods**

Year	Virginia Rate Level	Incurred Claims			Original Pricing			Actual to Expected		
	Earned Premium	Discounted to Incurred Year	Loss Ratio	Earned Premium	Incurred Claims	Loss Ratio				
1997	493,144	0	0.0%	493,144	76,315	15.5%	0.000			
1998	2,879,303	107,337	3.7%	2,850,981	567,251	19.9%	0.187			
1999	5,164,376	620,404	12.0%	4,940,810	1,195,625	24.2%	0.496			
2000	8,538,676	1,279,042	15.0%	8,089,363	2,319,177	28.7%	0.522			
2001	13,296,598	2,429,336	18.3%	12,392,203	3,909,961	31.6%	0.579			
2002	19,842,983	4,609,510	23.2%	18,402,153	6,064,836	33.0%	0.705			
2003	27,120,845	3,660,230	13.5%	25,419,483	8,940,368	35.2%	0.384			
2004	28,222,177	5,980,398	21.2%	27,042,916	10,759,186	39.8%	0.533			
2005	28,236,306	8,695,825	30.8%	25,552,362	11,665,163	45.7%	0.675			
2006	27,254,820	9,349,851	34.3%	22,887,668	12,053,720	52.7%	0.651			
2007	28,749,932	12,030,566	41.8%	20,278,961	12,147,512	59.9%	0.699			
2008	30,977,013	13,701,296	44.2%	17,817,393	11,990,031	67.3%	0.657			
2009	29,532,625	16,629,707	56.3%	15,565,703	11,849,828	76.1%	0.740			
2010	28,088,937	18,769,491	66.8%	13,512,948	11,600,293	85.8%	0.778			
2011	26,659,985	21,251,812	79.7%	11,652,948	11,225,862	96.3%	0.827			
2012	26,462,143	26,519,916	100.2%	9,980,026	10,914,023	109.4%	0.916			
2013	28,959,105	25,861,729	89.3%	8,487,367	10,109,844	119.1%	0.750			
2014	29,852,766	26,501,364	88.8%	7,166,562	9,079,074	126.7%	0.701			
2015	29,503,501	30,711,106	104.1%	6,007,978	8,146,964	135.6%	0.768			
2016	29,463,128	35,535,639	120.6%	5,000,968	7,371,863	147.4%	0.818			
2017	28,396,949	39,305,182	138.4%	4,133,817	6,648,897	160.8%	0.861			
2018	26,828,791	44,879,139	167.3%	3,393,883	5,965,881	175.8%	0.952			
2019	24,930,792	45,179,490	181.2%	2,770,325	5,331,455	192.4%	0.942			
Total	529,454,897	393,608,369	74.3%	273,839,962	179,933,130	65.7%	1.131			
	Current VA Rate Premium	Proposed VA Rate Premium	Incurred Claims	Current VA Loss Ratio	Proposed VA Loss Ratio	Earned Premium	Incurred Claims	Loss Ratio	Current VA A/E	Proposed VA A/E
2020	22,564,803	22,564,803	31,601,246	140.0%	140.0%	2,247,038	4,719,417	210.0%	0.667	0.667
2021	19,988,769	19,988,769	33,360,385	166.9%	166.9%	1,811,794	4,142,454	228.6%	0.730	0.730
2022	17,705,043	21,192,936	33,742,180	190.6%	159.2%	1,452,988	3,618,744	249.1%	0.765	0.639
2023	15,663,159	18,748,802	34,036,578	217.3%	181.5%	1,159,797	3,138,300	270.6%	0.803	0.671
2024	13,848,876	16,577,105	34,147,893	246.6%	206.0%	922,040	2,701,297	293.0%	0.842	0.703
2025	12,221,369	14,628,979	34,261,418	280.3%	234.2%	730,611	2,294,206	314.0%	0.893	0.746
2026	10,760,147	12,879,896	34,337,880	319.1%	266.6%	577,053	1,943,865	336.9%	0.947	0.791
2027	9,434,557	11,293,165	34,292,768	363.5%	303.7%	454,136	1,656,591	364.8%	0.996	0.832
2028	8,231,754	9,853,410	33,993,392	413.0%	345.0%	356,038	1,414,977	397.4%	1.039	0.868
2029	7,144,976	8,552,536	33,329,501	466.5%	389.7%	278,109	1,204,857	433.2%	1.077	0.900
2030	6,174,944	7,391,407	32,476,943	525.9%	439.4%	216,480	1,022,802	472.5%	1.113	0.930
2031	5,315,384	6,362,514	31,502,315	592.7%	495.1%	167,965	864,449	514.7%	1.152	0.962
2032	4,551,498	5,448,143	30,388,831	667.7%	557.8%	129,963	727,425	559.7%	1.193	0.997
2033	3,872,965	4,635,939	29,056,283	750.2%	626.8%	100,335	609,898	607.9%	1.234	1.031
2034	3,279,477	3,925,534	27,444,384	836.9%	699.1%	77,343	509,914	659.3%	1.269	1.060
2035	2,763,180	3,307,527	25,718,939	930.8%	777.6%	59,569	425,553	714.4%	1.303	1.088
2036	2,316,244	2,772,544	23,990,799	1035.8%	865.3%	45,877	354,834	773.4%	1.339	1.119
2037	1,931,666	2,312,204	22,268,623	1152.8%	963.1%	35,035	291,330	831.5%	1.386	1.158
2038	1,602,139	1,917,761	20,516,491	1280.6%	1069.8%	26,209	230,499	879.5%	1.456	1.216
2039	1,321,152	1,581,419	18,655,910	1412.1%	1179.7%	19,425	179,194	922.5%	1.531	1.279
2040	1,082,522	1,295,778	16,853,038	1556.8%	1300.6%	14,523	141,225	972.4%	1.601	1.338
2041	880,730	1,054,234	15,174,040	1722.9%	1439.3%	10,940	112,257	1026.1%	1.679	1.403
2042	711,183	851,286	13,561,309	1906.9%	1593.0%	8,218	88,474	1076.6%	1.771	1.480
2043	569,696	681,926	12,008,750	2107.9%	1761.0%	6,089	67,509	1108.7%	1.901	1.588
2044	453,146	542,415	10,483,740	2313.5%	1932.8%	4,486	50,259	1120.4%	2.065	1.725
2045	357,698	428,165	9,015,090	2520.3%	2105.5%	3,320	37,273	1122.7%	2.245	1.875
2046	280,196	335,395	7,672,127	2738.1%	2287.5%	2,383	26,736	1122.1%	2.440	2.039
2047	217,790	260,695	6,481,684	2976.1%	2486.3%	1,635	18,304	1119.4%	2.659	2.221
2048	168,007	201,104	5,437,306	3236.4%	2703.7%	1,046	11,708	1119.8%	2.890	2.415
2049	128,653	153,998	4,511,127	3506.4%	2929.3%	3	34	1250.7%	2.804	2.342
2050	97,731	116,984	3,698,530	3784.4%	3161.6%	0	0	0.0%	0.000	0.000
2051	73,709	88,230	3,010,449	4084.2%	3412.1%	0	0	0.0%	0.000	0.000
2052	55,171	66,039	2,435,602	4414.7%	3688.1%	0	0	0.0%	0.000	0.000
2053	41,061	49,149	1,956,224	4764.2%	3980.2%	0	0	0.0%	0.000	0.000
2054	30,424	36,418	1,560,663	5129.6%	4285.4%	0	0	0.0%	0.000	0.000
2055	22,423	26,840	1,232,574	5496.9%	4592.2%	0	0	0.0%	0.000	0.000
2056	16,444	19,684	968,320	5888.5%	4919.4%	0	0	0.0%	0.000	0.000
2057	11,994	14,356	756,616	6308.5%	5270.2%	0	0	0.0%	0.000	0.000
2058	8,685	10,395	585,696	6744.1%	5634.2%	0	0	0.0%	0.000	0.000
2059	6,244	7,474	448,104	7176.2%	5995.1%	0	0	0.0%	0.000	0.000
2060	4,441	5,315	337,322	7596.3%	6346.1%	0	0	0.0%	0.000	0.000
2061	3,115	3,729	248,933	7990.9%	6675.8%	0	0	0.0%	0.000	0.000
2062	2,143	2,565	180,078	8403.8%	7020.8%	0	0	0.0%	0.000	0.000
2063	1,446	1,731	127,407	8812.2%	7361.9%	0	0	0.0%	0.000	0.000
2064	955	1,143	87,629	9173.0%	7663.3%	0	0	0.0%	0.000	0.000
2065	615	736	58,332	9486.5%	7925.2%	0	0	0.0%	0.000	0.000
2066	384	459	37,448	9755.6%	8150.0%	0	0	0.0%	0.000	0.000
2067	232	277	23,204	10016.9%	8368.4%	0	0	0.0%	0.000	0.000
2068	134	160	13,695	10248.5%	8561.8%	0	0	0.0%	0.000	0.000
2069	72	86	7,613	10534.4%	8800.7%	0	0	0.0%	0.000	0.000
2070	25	30	2,119	8542.3%	7136.5%	0	0	0.0%	0.000	0.000
2071	1	1	1,046	106316.7%	88819.3%	0	0	0.0%	0.000	0.000
2072	0	0	0	0.0%	0.0%	0	0	0.0%	0.000	0.000
2073	0	0	0	0.0%	0.0%	0	0	0.0%	0.000	0.000
2074	0	0	0	0.0%	0.0%	0	0	0.0%	0.000	0.000
2075	0	0	0	0.0%	0.0%	0	0	0.0%	0.000	0.000
Total	175,919,171	202,192,194	718,098,572	408.2%	355.2%	10,920,448	32,604,384	298.6%	1.367	1.190
	Current VA Rate Premium	Proposed VA Rate Premium	Incurred Claims	Current VA Loss Ratio	Proposed VA Loss Ratio	Earned Premium	Incurred Claims	Loss Ratio	Current VA A/E	Proposed VA A/E
Past Experience	529,454,897	529,454,897	393,608,369	74.3%	74.3%	273,839,962	179,933,130	65.7%	1.131	1.131
Anticipated Experience	175,919,171	202,192,194	718,098,572	408.2%	355.2%	10,920,448	32,604,384	298.6%	1.367	1.190
Lifetime Experience	705,374,067	731,647,090	1,111,706,941	157.6%	151.9%	284,760,410	212,537,514	74.6%	2.112	2.036
Past Experience @ 4.5%	828,363,749	828,363,749	524,440,173	63.3%	63.3%	488,998,013	287,393,831	58.8%	1.077	1.077
Anticipated Experience @ 4.5%	136,368,204	155,198,047	451,321,698	331.0%	290.8%	9,224,377	25,955,258	281.4%	1.176	1.034
Lifetime Experience @ 4.5%	964,731,953	983,561,796	975,761,871	101.1%	99.2%	498,222,389	313,349,089	62.9%	1.608	1.577

**Nationwide Lifetime Experience as of 12/31/2019**  
**Premiums at the Virginia Rate Level**  
**Lifetime Benefit Period**

Year	Virginia Rate Level Earned Premium		Incurred Claims Discounted to Incurred Year		Loss Ratio	Original Pricing			Actual to Expected	
	Rate Level Earned Premium	Proposed VA Rate Premium	Incurred Claims	Loss Ratio		Rate Level Earned Premium	Incurred Claims	Loss Ratio		
1997	379,977		0	0.0%		379,977	57,729	15.2%	0.000	
1998	2,595,131		229,543	8.8%		2,572,295	492,127	19.1%	0.462	
1999	5,659,399		581,891	10.3%		5,423,722	1,232,945	22.7%	0.452	
2000	11,774,776		1,523,171	12.9%		11,221,781	3,035,368	27.0%	0.478	
2001	20,610,805		4,550,872	22.1%		19,311,040	5,752,876	29.8%	0.741	
2002	30,785,341		5,455,702	17.7%		28,348,822	9,101,715	32.1%	0.552	
2003	44,172,366		9,780,632	22.1%		38,555,947	13,376,332	34.7%	0.638	
2004	53,510,550		12,851,585	24.0%		40,370,315	16,033,798	39.7%	0.605	
2005	53,476,530		16,132,072	30.2%		37,454,938	17,203,147	45.9%	0.657	
2006	52,232,014		15,462,707	29.6%		33,354,225	17,687,721	53.0%	0.558	
2007	50,985,373		23,737,573	46.6%		29,502,121	17,781,899	60.3%	0.772	
2008	49,704,716		31,791,240	64.0%		25,892,146	17,507,790	67.6%	0.946	
2009	48,250,256		29,994,927	62.2%		22,588,077	17,352,044	76.8%	0.809	
2010	46,724,080		45,629,630	97.7%		19,577,665	17,064,927	87.2%	1.120	
2011	46,656,911		48,785,419	104.6%		16,852,981	16,525,059	98.1%	1.066	
2012	50,806,818		48,436,267	95.3%		14,405,785	16,002,806	111.1%	0.858	
2013	49,879,304		50,816,851	101.9%		12,225,783	14,800,685	121.1%	0.842	
2014	47,462,825		44,201,692	93.1%		10,300,327	13,192,585	128.1%	0.727	
2015	51,611,050		51,126,790	99.1%		8,614,865	11,771,420	136.6%	0.725	
2016	53,550,733		51,635,806	96.4%		7,153,268	10,609,570	148.3%	0.650	
2017	50,413,850		55,470,317	110.0%		5,897,728	9,520,322	161.4%	0.682	
2018	45,771,085		69,307,052	151.4%		4,829,064	8,499,753	176.0%	0.860	
2019	41,946,347		50,503,757	120.4%		3,927,443	7,552,352	192.3%	0.626	
<b>Total</b>	<b>908,960,236</b>		<b>668,005,496</b>	<b>73.5%</b>		<b>398,760,313</b>	<b>262,154,970</b>	<b>65.7%</b>	<b>1.118</b>	
	Current VA Rate Premium	Proposed VA Rate Premium	Incurred Claims	Current VA Loss Ratio	Proposed VA Loss Ratio	Rate Level Earned Premium	Incurred Claims	Loss Ratio	Current VA A/E	Proposed VA A/E
2020	39,011,475	39,011,475	56,153,461	143.9%	143.9%	3,173,447	6,671,469	210.2%	0.685	0.685
2021	35,489,910	35,489,910	61,540,853	173.4%	173.4%	2,548,573	5,857,429	229.8%	0.754	0.754
2022	32,138,346	34,548,722	64,512,829	200.7%	186.7%	2,035,284	5,116,792	251.4%	0.798	0.743
2023	28,986,797	45,520,866	67,421,501	232.6%	148.1%	1,617,229	4,447,058	275.0%	0.846	0.539
2024	26,102,111	40,990,754	70,146,118	268.7%	171.1%	1,279,219	3,846,612	300.7%	0.894	0.569
2025	23,456,458	36,836,021	72,947,145	311.0%	198.0%	1,007,524	3,312,520	328.8%	0.946	0.602
2026	21,024,551	33,016,955	75,685,819	360.0%	229.2%	790,263	2,839,029	359.3%	1.002	0.638
2027	18,782,475	29,495,998	78,146,781	416.1%	264.9%	617,422	2,420,929	392.1%	1.061	0.676
2028	16,725,284	26,265,386	80,067,229	478.7%	304.8%	480,607	2,055,414	427.7%	1.119	0.713
2029	14,835,590	23,297,811	81,283,612	547.9%	348.9%	372,799	1,737,802	466.2%	1.175	0.748
2030	13,122,145	20,607,017	82,118,724	625.8%	398.5%	288,245	1,462,646	507.4%	1.233	0.785
2031	11,561,883	18,156,781	82,540,147	713.9%	454.6%	222,262	1,225,497	551.4%	1.295	0.824
2032	10,139,456	15,923,002	82,398,412	812.7%	517.5%	171,017	1,023,085	598.2%	1.358	0.865
2033	8,835,238	13,874,858	81,484,545	922.3%	587.3%	131,392	851,546	648.1%	1.423	0.906
2034	7,662,355	12,032,962	79,678,534	1039.9%	662.2%	100,881	707,385	701.2%	1.483	0.944
2035	6,618,968	10,394,428	77,322,217	1168.2%	743.9%	77,465	587,022	757.8%	1.542	0.982
2036	5,688,974	8,933,964	74,596,137	1311.2%	835.0%	59,237	482,654	814.8%	1.609	1.025
2037	4,863,502	7,637,643	71,455,275	1469.2%	935.6%	44,722	387,066	865.5%	1.698	1.081
2038	4,134,024	6,492,072	67,764,152	1639.2%	1043.8%	33,544	306,248	913.0%	1.795	1.143
2039	3,492,741	5,485,001	63,353,126	1813.9%	1155.0%	25,287	243,981	964.9%	1.880	1.197
2040	2,931,264	4,603,257	58,814,864	2006.5%	1277.7%	19,138	194,692	1017.3%	1.972	1.256
2041	2,441,068	3,833,453	54,369,039	2227.3%	1418.3%	14,454	153,846	1064.4%	2.092	1.332
2042	2,016,953	3,167,424	49,836,362	2470.9%	1573.4%	10,829	118,405	1093.4%	2.260	1.439
2043	1,649,831	2,590,895	45,109,884	2734.2%	1741.1%	8,135	89,719	1102.9%	2.479	1.579
2044	1,337,208	2,099,951	40,198,824	3006.2%	1914.3%	6,162	68,077	1104.8%	2.721	1.733
2045	1,076,895	1,691,156	35,369,276	3284.4%	2091.4%	4,483	49,553	1105.3%	2.971	1.892
2046	860,850	1,351,879	30,760,800	3573.3%	2275.4%	3,055	33,716	1105.5%	3.238	2.062
2047	682,590	1,071,939	26,626,294	3900.8%	2483.9%	1,902	20,976	1103.1%	3.536	2.252
2048	536,763	842,932	22,851,670	4257.3%	2711.0%	874	9,652	1104.8%	3.854	2.454
2049	418,720	657,558	19,375,282	4627.3%	2946.6%	1	10	1250.7%	3.700	2.356
2050	324,063	508,909	16,299,927	5029.9%	3202.9%	0	0	0.0%	0.000	0.000
2051	248,915	390,897	13,610,782	5468.0%	3481.9%	0	0	0.0%	0.000	0.000
2052	191,617	300,915	11,213,119	5851.9%	3726.3%	0	0	0.0%	0.000	0.000
2053	146,151	229,515	9,205,946	6298.9%	4011.0%	0	0	0.0%	0.000	0.000
2054	110,097	172,896	7,441,522	6759.1%	4304.0%	0	0	0.0%	0.000	0.000
2055	82,517	129,585	5,962,436	7225.7%	4601.2%	0	0	0.0%	0.000	0.000
2056	61,254	96,193	4,748,761	7752.6%	4936.7%	0	0	0.0%	0.000	0.000
2057	44,949	70,588	3,755,665	8355.4%	5320.6%	0	0	0.0%	0.000	0.000
2058	32,522	51,072	2,941,876	9045.9%	5760.3%	0	0	0.0%	0.000	0.000
2059	23,135	36,331	2,261,824	9776.7%	6225.6%	0	0	0.0%	0.000	0.000
2060	16,107	25,295	1,706,033	10591.6%	6744.5%	0	0	0.0%	0.000	0.000
2061	10,925	17,157	1,266,058	11588.3%	7379.2%	0	0	0.0%	0.000	0.000
2062	7,145	11,220	924,384	12937.6%	8238.4%	0	0	0.0%	0.000	0.000
2063	4,449	6,987	662,542	14892.1%	9483.0%	0	0	0.0%	0.000	0.000
2064	2,557	4,015	465,914	18222.7%	11603.9%	0	0	0.0%	0.000	0.000
2065	1,333	2,094	322,190	24162.1%	15385.9%	0	0	0.0%	0.000	0.000
2066	558	877	217,762	39010.0%	24840.8%	0	0	0.0%	0.000	0.000
2067	94	148	143,886	152682.6%	97225.3%	0	0	0.0%	0.000	0.000
2068	8	12	65,225	853776.4%	543668.1%	0	0	0.0%	0.000	0.000
2069	0	0	0	0.0%	0.0%	0	0	0.0%	0.000	0.000
2070	0	0	0	0.0%	0.0%	0	0	0.0%	0.000	0.000
2071	0	0	0	0.0%	0.0%	0	0	0.0%	0.000	0.000
2072	0	0	0	0.0%	0.0%	0	0	0.0%	0.000	0.000
2073	0	0	0	0.0%	0.0%	0	0	0.0%	0.000	0.000
2074	0	0	0	0.0%	0.0%	0	0	0.0%	0.000	0.000
2075	0	0	0	0.0%	0.0%	0	0	0.0%	0.000	0.000
<b>Total</b>	<b>347,932,823</b>	<b>487,976,779</b>	<b>1,937,144,763</b>	<b>556.8%</b>	<b>397.0%</b>	<b>15,145,450</b>	<b>46,320,833</b>	<b>305.8%</b>	<b>1.820</b>	<b>1.298</b>
	Current VA Rate Premium	Proposed VA Rate Premium	Incurred Claims	Current VA Loss Ratio	Proposed VA Loss Ratio	Rate Level Earned Premium	Incurred Claims	Loss Ratio	Current VA A/E	Proposed VA A/E
Past Experience	908,960,236	908,960,236	668,005,496	73.5%	73.5%	398,760,313	262,154,970	65.7%	1.118	1.118
Anticipated Experience	347,932,823	487,976,779	1,937,144,763	556.8%	397.0%	15,145,450	46,320,833	305.8%	1.820	1.298
Lifetime Experience	1,256,893,059	1,396,937,015	2,605,150,259	207.3%	186.5%	413,905,764	308,475,803	74.5%	2.781	2.502
Past Experience @ 4.5%	1,412,768,010	1,412,768,010	915,120,129	64.8%	64.8%	711,489,855	418,554,215	58.8%	1.101	1.101
Anticipated Experience @ 4.5%	262,402,297	357,096,499	1,118,573,231	426.3%	313.2%	12,833,022	36,907,136	287.6%	1.482	1.089
Lifetime Experience @ 4.5%	1,675,170,307	1,769,864,509	2,033,693,360	121.4%	114.9%	724,322,877	455,461,351	62.9%	1.931	1.827

**Nationwide Lifetime Experience as of 12/31/2019**  
**Premiums at the Virginia Rate Level**  
**All Benefit Periods**

Year	Virginia Rate Level		Incurred Claims		Loss Ratio	Original Pricing			Actual to Expected	
	Rate Level	Incurred Claims	Discounted to	Incurred Year		Incurred Claims	Loss Ratio	Loss Ratio	Expected	
	Earned Premium					Incurred Claims				
1997	873,120			0	0.0%	873,120	134,043	15.4%		0.000
1998	5,474,434			336,881	6.2%	5,423,276	1,059,379	19.5%		0.315
1999	10,823,775			1,202,294	11.1%	10,364,532	2,428,570	23.4%		0.474
2000	20,313,452			2,802,214	13.8%	19,311,144	5,354,546	27.7%		0.498
2001	33,907,403			6,980,208	20.6%	31,703,242	9,662,837	30.5%		0.675
2002	50,628,324			10,065,212	19.9%	46,750,975	15,166,551	32.4%		0.613
2003	71,293,211			13,440,862	18.9%	63,975,429	22,316,700	34.9%		0.540
2004	81,732,727			18,831,982	23.0%	67,413,231	26,792,985	39.7%		0.580
2005	81,712,837			24,827,897	30.4%	63,007,299	28,868,311	45.8%		0.663
2006	79,486,835			24,812,557	31.2%	56,241,894	29,741,441	52.9%		0.590
2007	79,735,304			35,768,139	44.9%	49,781,082	29,929,411	60.1%		0.746
2008	80,681,729			45,492,536	56.4%	43,709,539	29,497,821	67.5%		0.836
2009	77,782,881			46,624,634	59.9%	38,153,780	29,201,872	76.5%		0.783
2010	74,813,018			44,399,121	59.3%	33,090,613	28,665,221	86.6%		0.994
2011	73,316,896			70,037,231	95.5%	28,505,929	27,750,921	97.4%		0.981
2012	77,268,962			74,956,182	97.0%	24,385,811	26,916,828	110.4%		0.879
2013	78,838,409			76,678,580	97.3%	20,713,150	24,910,528	120.3%		0.809
2014	77,315,591			70,703,056	91.4%	17,466,889	22,271,659	127.5%		0.717
2015	81,114,551			81,837,896	100.9%	14,622,843	19,918,384	136.2%		0.741
2016	83,013,861			87,171,445	105.0%	12,154,236	17,981,433	147.9%		0.710
2017	78,810,798			94,775,499	120.3%	10,031,545	16,169,219	161.2%		0.746
2018	72,599,876			114,186,191	157.3%	8,222,947	14,465,634	175.9%		0.894
2019	66,877,139			95,683,247	143.1%	6,697,768	12,883,807	192.4%		0.744
<b>Total</b>	<b>1,438,415,133</b>			<b>1,061,613,865</b>	<b>73.8%</b>	<b>672,600,275</b>	<b>442,088,099</b>	<b>65.7%</b>		<b>1.123</b>
	<b>Earned Premium w/o Increase</b>	<b>Earned Premium w/Increase</b>	<b>Incurred Claims</b>	<b>Loss Ratio w/o Increase</b>	<b>Loss Ratio w/Increase</b>	<b>Incurred Claims</b>	<b>Loss Ratio</b>	<b>Loss Ratio</b>	<b>A/E w/o Increase</b>	<b>A/E w/Increase</b>
2020	61,576,278	61,576,278	87,574,707	142.5%	142.5%	5,420,485	11,390,886	210.1%	0.678	0.678
2021	55,478,679	55,478,679	94,901,238	171.1%	171.1%	4,360,367	9,999,883	229.3%	0.746	0.746
2022	49,843,389	55,741,658	98,255,009	197.1%	176.3%	3,488,272	8,735,537	250.4%	0.787	0.704
2023	44,649,956	64,269,668	101,458,079	227.2%	157.9%	2,777,026	7,585,359	273.1%	0.832	0.578
2024	39,950,987	57,567,859	104,294,011	261.1%	181.2%	2,201,258	6,547,909	297.5%	0.878	0.609
2025	35,677,827	51,465,000	107,208,562	300.5%	208.3%	1,738,134	5,606,726	322.6%	0.932	0.646
2026	31,784,698	45,896,851	110,023,699	346.2%	239.7%	1,367,317	4,782,894	349.8%	0.990	0.685
2027	28,217,032	40,789,163	112,439,549	398.5%	275.7%	1,071,558	4,077,520	380.5%	1.047	0.724
2028	24,957,038	36,118,796	114,060,620	457.0%	315.8%	836,645	3,470,391	414.8%	1.102	0.761
2029	21,980,566	31,850,347	114,613,113	521.4%	359.8%	650,908	2,942,659	452.1%	1.153	0.796
2030	19,297,089	27,998,424	114,595,667	593.8%	409.3%	504,725	2,485,448	492.4%	1.206	0.831
2031	16,877,267	24,519,295	114,042,462	675.7%	465.1%	390,227	2,089,946	535.6%	1.262	0.868
2032	14,690,955	21,371,146	112,787,243	767.7%	527.8%	300,980	1,750,511	581.6%	1.320	0.907
2033	12,708,203	18,510,797	110,540,828	869.8%	597.2%	231,727	1,461,444	630.7%	1.379	0.947
2034	10,941,832	15,958,497	107,122,918	979.0%	671.3%	178,224	1,217,300	683.0%	1.433	0.983
2035	9,382,149	13,701,955	103,041,156	1098.3%	752.0%	137,034	1,012,575	738.9%	1.486	1.018
2036	8,005,217	11,706,508	98,586,936	1231.5%	842.2%	105,114	837,488	796.7%	1.546	1.057
2037	6,795,168	9,949,848	93,723,899	1379.3%	942.0%	79,757	678,396	850.6%	1.622	1.107
2038	5,736,163	8,409,832	88,280,643	1539.0%	1049.7%	59,753	536,747	898.3%	1.713	1.169
2039	4,813,894	7,066,420	82,009,035	1703.6%	1160.5%	44,712	423,175	946.4%	1.800	1.226
2040	4,013,786	5,899,035	75,667,902	1885.2%	1282.7%	33,661	335,917	997.9%	1.889	1.285
2041	3,321,799	4,887,688	69,543,079	2093.5%	1422.8%	25,393	266,103	1047.9%	1.998	1.358
2042	2,728,136	4,018,709	63,397,671	2323.8%	1577.6%	19,047	206,879	1086.2%	2.140	1.452
2043	2,219,527	3,272,821	57,118,634	2573.5%	1745.2%	14,224	157,228	1105.3%	2.328	1.579
2044	1,790,354	2,642,367	50,682,564	2830.9%	1918.1%	10,648	118,336	1111.3%	2.547	1.726
2045	1,434,594	2,119,321	44,384,366	3093.9%	2094.3%	7,803	86,826	1112.7%	2.780	1.882
2046	1,141,047	1,687,274	38,432,927	3368.2%	2277.8%	5,438	60,452	1111.6%	3.030	2.049
2047	900,380	1,332,634	33,107,978	3677.1%	2484.4%	3,537	39,280	1110.6%	3.311	2.237
2048	704,770	1,044,037	28,288,975	4013.9%	2709.6%	1,919	21,361	1112.9%	3.607	2.435
2049	547,373	811,556	23,886,409	4363.8%	2943.3%	4	44	1250.7%	3.489	2.353
2050	421,794	625,893	19,998,456	4741.3%	3195.2%	0	0	0.0%	0.000	0.000
2051	322,624	479,126	16,621,231	5151.9%	3469.1%	0	0	0.0%	0.000	0.000
2052	246,787	366,954	13,648,721	5530.6%	3719.5%	0	0	0.0%	0.000	0.000
2053	187,211	278,665	11,162,170	5962.3%	4005.6%	0	0	0.0%	0.000	0.000
2054	140,521	209,314	9,002,185	6406.3%	4300.8%	0	0	0.0%	0.000	0.000
2055	104,940	156,426	7,195,010	6856.3%	4599.6%	0	0	0.0%	0.000	0.000
2056	77,698	115,877	5,717,082	7358.1%	4933.8%	0	0	0.0%	0.000	0.000
2057	56,943	84,944	4,512,280	7924.3%	5312.0%	0	0	0.0%	0.000	0.000
2058	41,206	61,467	3,527,572	8560.8%	5738.9%	0	0	0.0%	0.000	0.000
2059	29,379	43,805	2,709,928	9224.0%	6186.3%	0	0	0.0%	0.000	0.000
2060	20,548	30,611	2,043,355	9944.3%	6675.3%	0	0	0.0%	0.000	0.000
2061	14,040	20,886	1,514,991	10790.2%	7253.6%	0	0	0.0%	0.000	0.000
2062	9,288	13,785	1,104,462	11891.6%	8011.9%	0	0	0.0%	0.000	0.000
2063	5,895	8,717	789,950	13400.9%	9061.9%	0	0	0.0%	0.000	0.000
2064	3,512	5,159	553,543	15761.2%	10730.4%	0	0	0.0%	0.000	0.000
2065	1,948	2,830	380,522	19530.5%	13445.6%	0	0	0.0%	0.000	0.000
2066	942	1,336	255,210	27090.1%	19101.0%	0	0	0.0%	0.000	0.000
2067	326	425	167,090	51271.9%	39289.5%	0	0	0.0%	0.000	0.000
2068	141	172	78,919	55866.4%	45897.7%	0	0	0.0%	0.000	0.000
2069	72	86	7,613	10534.4%	8800.7%	0	0	0.0%	0.000	0.000
2070	25	30	2,119	8542.3%	7136.5%	0	0	0.0%	0.000	0.000
2071	1	1	1,046	106316.7%	88819.3%	0	0	0.0%	0.000	0.000
2072	0	0	0	0.0%	0.0%	0	0	0.0%	0.000	0.000
2073	0	0	0	0.0%	0.0%	0	0	0.0%	0.000	0.000
2074	0	0	0	0.0%	0.0%	0	0	0.0%	0.000	0.000
2075	0	0	0	0.0%	0.0%	0	0	0.0%	0.000	0.000
<b>Total</b>	<b>523,851,994</b>	<b>690,168,972</b>	<b>2,655,243,335</b>	<b>506.9%</b>	<b>384.7%</b>	<b>26,065,899</b>	<b>78,925,217</b>	<b>302.8%</b>	<b>1.674</b>	<b>1.271</b>
	<b>Current VA Rate Premium</b>	<b>Proposed VA Rate Premium</b>	<b>Incurred Claims</b>	<b>Current VA Loss Ratio</b>	<b>Proposed VA Loss Ratio</b>	<b>Incurred Claims</b>	<b>Loss Ratio</b>	<b>Loss Ratio</b>	<b>Current VA A/E</b>	<b>Proposed VA A/E</b>
Past Experience	1,438,415,133	1,438,415,133	1,061,613,865	73.8%	73.8%	672,600,275	442,088,099	65.7%	1.123	1.123
Anticipated Experience	523,851,994	690,168,972	2,655,243,335	506.9%	384.7%	26,065,899	78,925,217	302.8%	1.674	1.271
Lifetime Experience	1,962,267,126	2,128,584,105	3,716,857,200	189.4%	174.6%	698,666,174	521,013,317	74.6%	2.540	2.342
Past Experience @ 4.5%	2,241,131,759	2,241,131,759	1,439,560,302	64.2%	64.2%	1,200,487,868	705,948,046	58.8%	1.092	1.092
Anticipated Experience @ 4.5%	398,770,500	512,294,546	1,569,894,929	393.7%	306.4%	22,057,399	62,862,394	285.0%	1.381	1.075
Lifetime Experience @ 4.5%	2,639,902,260	2,753,426,305	3,009,455,231	114.0%	109.3%	1,222,545,267	768,810,439	62.9%	1.813	1.738

Nationwide Lifetime Experience as of 12/31/2019

Non-Lifetime Benefit Periods

Year	Proposed VA Rates (day 1) Earned Premium	Incurred Claims Discounted to Incurred Year	Loss Ratio
1997	737,394	0	0.0%
1998	4,309,402	107,337	2.5%
1999	8,212,200	620,404	7.6%
2000	14,632,151	1,279,042	8.7%
2001	23,725,872	2,429,336	10.2%
2002	36,309,116	4,609,510	12.7%
2003	50,239,720	3,660,230	7.3%
2004	52,335,427	5,980,398	11.4%
2005	52,389,165	8,695,825	16.6%
2006	50,536,480	9,349,851	18.5%
2007	48,450,819	12,030,566	24.8%
2008	46,319,692	13,701,296	29.6%
2009	44,159,910	16,629,707	37.7%
2010	42,001,175	18,769,491	44.7%
2011	39,864,473	21,251,812	53.3%
2012	39,568,642	26,519,916	67.0%
2013	38,205,691	25,861,729	67.7%
2014	36,208,648	26,501,364	73.2%
2015	35,315,691	30,711,106	87.0%
2016	35,267,364	35,535,639	100.8%
2017	33,991,148	39,305,182	115.6%
2018	32,114,063	44,879,139	139.7%
2019	29,842,158	45,179,490	151.4%
<b>Total</b>	<b>794,736,399</b>	<b>393,608,369</b>	<b>49.5%</b>
Year	Proposed VA Rates (day 1) Earned Premium	Incurred Claims	Loss Ratio
2020	27,010,069	31,601,246	117.0%
2021	23,926,556	33,360,385	139.4%
2022	21,192,936	33,742,180	159.2%
2023	18,748,802	34,036,578	181.5%
2024	16,577,105	34,147,893	206.0%
2025	14,628,979	34,261,418	234.2%
2026	12,879,896	34,337,880	266.6%
2027	11,293,165	34,292,768	303.7%
2028	9,853,410	33,993,392	345.0%
2029	8,552,536	33,329,501	389.7%
2030	7,391,407	32,476,943	439.4%
2031	6,362,514	31,502,315	495.1%
2032	5,448,143	30,388,831	557.8%
2033	4,635,939	29,056,283	626.8%
2034	3,925,534	27,444,384	699.1%
2035	3,307,527	25,718,939	777.6%
2036	2,772,544	23,990,799	865.3%
2037	2,312,204	22,268,623	963.1%
2038	1,917,761	20,516,491	1069.8%
2039	1,581,419	18,655,910	1179.7%
2040	1,295,778	16,853,038	1300.6%
2041	1,054,234	15,174,040	1439.3%
2042	851,286	13,561,309	1593.0%
2043	681,926	12,008,750	1761.0%
2044	542,415	10,483,740	1932.8%
2045	428,165	9,015,090	2105.5%
2046	335,395	7,672,127	2287.5%
2047	260,695	6,481,684	2486.3%
2048	201,104	5,437,306	2703.7%
2049	153,998	4,511,127	2929.3%
2050	116,984	3,698,530	3161.6%
2051	88,230	3,010,449	3412.1%
2052	66,039	2,435,602	3688.1%
2053	49,149	1,956,224	3980.2%
2054	36,418	1,560,663	4285.4%
2055	26,840	1,232,574	4592.2%
2056	19,684	968,320	4919.4%
2057	14,356	756,616	5270.2%
2058	10,395	585,696	5634.2%
2059	7,474	448,104	5995.1%
2060	5,315	337,322	6346.1%
2061	3,729	248,933	6675.8%
2062	2,565	180,078	7020.8%
2063	1,731	127,407	7361.9%
2064	1,143	87,629	7663.3%
2065	736	58,332	7925.2%
2066	459	37,448	8150.0%
2067	277	23,204	8368.4%
2068	160	13,695	8561.8%
2069	86	7,613	8800.7%
2070	30	2,119	7136.5%
2071	1	1,046	88819.3%
2072	0	0	0.0%
2073	0	0	0.0%
2074	0	0	0.0%
2075	0	0	0.0%
<b>Total</b>	<b>210,575,247</b>	<b>718,098,572</b>	<b>341.0%</b>
	Earned Premium w/o Increase	Incurred Claims	Loss Ratio With Increase
Past Experience	794,736,399	393,608,369	49.5%
Anticipated Experience	210,575,247	718,098,572	341.0%
Lifetime Experience	1,005,311,646	1,111,706,941	110.6%
Past Experience @ 4.5%	1,289,683,299	524,440,173	40.7%
Anticipated Experience @ 4.5%	163,232,740	451,321,698	276.5%
Lifetime Experience @ 4.5%	1,452,916,039	975,761,871	67.2%

Nationwide Lifetime Experience as of 12/31/2019

Lifetime Benefit Period

Year	Proposed VA Rates (day 1) Earned Premium	Incurred Claims Discounted to Incurred Year	Loss Ratio
1997	1,391,660	0	0.0%
1998	9,519,396	229,543	2.4%
1999	22,749,193	581,891	2.6%
2000	51,292,914	1,523,171	3.0%
2001	92,608,130	4,550,872	4.9%
2002	140,526,273	5,455,702	3.9%
2003	190,908,608	9,780,632	5.1%
2004	195,981,687	12,851,585	6.6%
2005	195,857,091	16,132,072	8.2%
2006	191,299,068	15,462,707	8.1%
2007	186,733,258	23,737,573	12.7%
2008	182,042,869	31,791,240	17.5%
2009	176,715,929	29,994,927	17.0%
2010	171,126,330	45,629,630	26.7%
2011	158,958,440	48,785,419	30.7%
2012	139,137,718	48,436,267	34.8%
2013	126,031,249	50,816,851	40.3%
2014	119,925,474	44,201,692	36.9%
2015	108,672,413	51,126,790	47.0%
2016	94,620,936	51,635,806	54.6%
2017	85,205,284	55,470,317	65.1%
2018	77,358,470	69,307,052	89.6%
2019	70,894,217	50,503,757	71.2%
<b>Total</b>	<b>2,789,556,605</b>	<b>668,005,496</b>	<b>23.9%</b>
Year	Proposed VA Rates (day 1) Earned Premium	Incurred Claims	Loss Ratio
2020	65,933,941	56,153,461	85.2%
2021	59,982,085	61,540,853	102.6%
2022	54,317,552	64,512,829	118.8%
2023	48,991,067	67,421,501	137.6%
2024	44,115,610	70,146,118	159.0%
2025	39,644,148	72,947,145	184.0%
2026	35,533,943	75,685,819	213.0%
2027	31,744,572	78,146,781	246.2%
2028	28,267,680	80,067,229	283.2%
2029	25,073,878	81,283,612	324.2%
2030	22,177,955	82,118,724	370.3%
2031	19,540,930	82,540,147	422.4%
2032	17,136,864	82,398,412	480.8%
2033	14,932,583	81,484,545	545.7%
2034	12,950,273	79,678,534	615.3%
2035	11,186,828	77,322,217	691.2%
2036	9,615,029	74,596,137	775.8%
2037	8,219,885	71,455,275	869.3%
2038	6,986,983	67,764,152	969.9%
2039	5,903,140	63,353,126	1073.2%
2040	4,954,178	58,814,864	1187.2%
2041	4,125,690	54,369,039	1317.8%
2042	3,408,886	49,836,362	1462.0%
2043	2,788,407	45,109,884	1617.8%
2044	2,260,037	40,198,824	1778.7%
2045	1,820,079	35,369,276	1943.3%
2046	1,454,937	30,760,800	2114.2%
2047	1,153,657	26,626,294	2308.0%
2048	907,192	22,851,670	2518.9%
2049	707,686	19,375,282	2737.8%
2050	547,705	16,299,927	2976.0%
2051	420,696	13,610,782	3235.3%
2052	323,854	11,213,119	3462.4%
2053	247,012	9,205,946	3726.9%
2054	186,076	7,441,522	3999.2%
2055	139,464	5,962,436	4275.2%
2056	103,526	4,748,761	4587.0%
2057	75,969	3,755,665	4943.7%
2058	54,965	2,941,876	5352.3%
2059	39,101	2,261,824	5784.6%
2060	27,223	1,706,033	6266.8%
2061	18,465	1,266,058	6856.5%
2062	12,076	924,384	7654.9%
2063	7,519	662,542	8811.3%
2064	4,321	465,914	10781.9%
2065	2,254	322,190	14296.1%
2066	943	217,762	23081.2%
2067	159	143,886	90338.5%
2068	13	65,225	505158.3%
2069	0	0	0.0%
2070	0	0	0.0%
2071	0	0	0.0%
2072	0	0	0.0%
2073	0	0	0.0%
2074	0	0	0.0%
2075	0	0	0.0%
<b>Total</b>	<b>588,047,037</b>	<b>1,937,144,763</b>	<b>329.4%</b>
	Earned Premium w/o Increase	Incurred Claims	Loss Ratio With Increase
Past Experience	2,789,556,605	668,005,496	23.9%
Anticipated Experience	588,047,037	1,937,144,763	329.4%
Lifetime Experience	3,377,603,642	2,605,150,259	77.1%
Past Experience @ 4.5%	4,622,307,564	915,120,129	19.8%
Anticipated Experience @ 4.5%	443,490,476	1,118,573,231	252.2%
Lifetime Experience @ 4.5%	5,065,798,040	2,033,693,360	40.1%

Nationwide Lifetime Experience as of 12/31/2019

All Benefit Periods

Year	Proposed VA Rates (day 1) Earned Premium	Incurred Claims Discounted to Incurred Year	Loss Ratio
1997	2,129,054	0	0.0%
1998	13,828,797	336,881	2.4%
1999	30,961,394	1,202,294	3.9%
2000	65,925,065	2,802,214	4.3%
2001	116,334,002	6,980,208	6.0%
2002	176,835,389	10,065,212	5.7%
2003	241,148,328	13,440,862	5.6%
2004	248,317,114	18,831,982	7.6%
2005	248,246,255	24,827,897	10.0%
2006	241,835,548	24,812,557	10.3%
2007	235,184,077	35,768,139	15.2%
2008	228,362,561	45,492,536	19.9%
2009	220,875,839	46,624,634	21.1%
2010	213,127,505	64,399,121	30.2%
2011	198,822,913	70,037,231	35.2%
2012	178,706,360	74,956,182	41.9%
2013	164,236,940	76,678,580	46.7%
2014	156,134,121	70,703,056	45.3%
2015	143,988,103	81,837,896	56.8%
2016	129,888,300	87,171,445	67.1%
2017	119,196,431	94,775,499	79.5%
2018	109,472,533	114,186,191	104.3%
2019	100,736,375	95,683,247	95.0%
<b>Total</b>	<b>3,584,293,004</b>	<b>1,061,613,865</b>	<b>29.6%</b>
Year	Proposed VA Rates (day 1) Earned Premium	Incurred Claims	Loss Ratio
2020	92,944,010	87,754,707	94.4%
2021	83,908,642	94,901,238	113.1%
2022	75,510,488	98,255,009	130.1%
2023	67,739,868	101,458,079	149.8%
2024	60,692,715	104,294,011	171.8%
2025	54,273,127	107,208,562	197.5%
2026	48,413,839	110,023,699	227.3%
2027	43,037,737	112,439,549	261.3%
2028	38,121,090	114,060,620	299.2%
2029	33,626,413	114,613,113	340.8%
2030	29,569,363	114,595,667	387.5%
2031	25,903,445	114,042,462	440.3%
2032	22,585,007	112,787,243	499.4%
2033	19,568,522	110,540,828	564.9%
2034	16,875,808	107,122,918	634.8%
2035	14,494,355	103,041,156	710.9%
2036	12,387,573	98,586,936	795.9%
2037	10,532,089	93,723,899	889.9%
2038	8,904,744	88,280,643	991.4%
2039	7,484,560	82,009,035	1095.7%
2040	6,249,956	75,667,902	1210.7%
2041	5,179,924	69,543,079	1342.6%
2042	4,260,172	63,397,671	1488.1%
2043	3,470,333	57,118,634	1645.9%
2044	2,802,453	50,682,564	1808.5%
2045	2,248,244	44,384,366	1974.2%
2046	1,790,332	38,432,927	2146.7%
2047	1,414,351	33,107,978	2340.9%
2048	1,108,296	28,288,975	2552.5%
2049	861,683	23,886,409	2772.1%
2050	664,689	19,998,456	3008.7%
2051	508,926	16,621,231	3265.9%
2052	389,893	13,648,721	3500.6%
2053	296,161	11,162,170	3768.9%
2054	222,494	9,002,185	4046.0%
2055	166,304	7,195,010	4326.4%
2056	123,210	5,717,082	4640.1%
2057	90,325	4,512,280	4995.6%
2058	65,361	3,527,572	5397.1%
2059	46,575	2,709,928	5818.4%
2060	32,539	2,043,355	6279.7%
2061	22,194	1,514,991	6826.2%
2062	14,641	1,104,462	7543.8%
2063	9,250	789,950	8540.1%
2064	5,465	553,543	10129.4%
2065	2,990	380,522	12727.7%
2066	1,403	255,210	18191.1%
2067	437	167,090	38274.1%
2068	173	78,919	45654.8%
2069	86	7,613	8800.7%
2070	30	2,119	7136.5%
2071	1	1,046	88819.3%
2072	0	0	0.0%
2073	0	0	0.0%
2074	0	0	0.0%
2075	0	0	0.0%
<b>Total</b>	<b>798,622,284</b>	<b>2,655,243,335</b>	<b>332.5%</b>
	Earned Premium w/o Increase	Incurred Claims	Loss Ratio With Increase
Past Experience	3,584,293,004	1,061,613,865	29.6%
Anticipated Experience	798,622,284	2,655,243,335	332.5%
Lifetime Experience	4,382,915,288	3,716,857,200	84.8%
Past Experience @ 4.5%	5,911,990,863	1,439,560,302	24.3%
Anticipated Experience @ 4.5%	606,723,215	1,569,894,929	258.7%
Lifetime Experience @ 4.5%	6,518,714,079	3,009,455,231	46.2%

Lifetime Experience (Nationwide) as of 12/31/2019

Non-Lifetime Benefit Periods

Year	Non-Interest Adjusted				Interest Adjusted				Int Adj Factor
	Original Premium	VA Rate Level Increased Premium	Incurred Claims	Loss Ratios	Original Premium	VA Rate Level Increased Premium	Incurred Claims	Loss Ratios	
1997	493,144	0	0	0.0%	1,327,670	0	0	0.0%	2.69226
1998	2,879,303	0	107,337	3.7%	7,418,014	0	276,536	3.7%	2.57632
1999	5,164,376	0	620,404	12.0%	12,732,151	0	1,529,531	12.0%	2.46538
2000	8,538,676	0	1,279,042	15.0%	20,144,580	0	3,017,537	15.0%	2.35922
2001	13,296,598	0	2,429,336	18.3%	30,018,702	0	5,484,523	18.3%	2.25762
2002	19,842,983	0	4,609,510	23.2%	42,868,871	0	9,958,407	23.2%	2.16040
2003	27,120,845	0	3,660,230	13.5%	56,068,896	0	7,567,060	13.5%	2.06737
2004	28,222,177	0	5,980,398	21.2%	55,833,264	0	11,831,302	21.2%	1.97835
2005	28,236,306	0	8,695,825	30.8%	53,455,710	0	16,462,547	30.8%	1.89316
2006	27,254,820	0	9,349,851	34.3%	49,375,697	0	16,938,486	34.3%	1.81163
2007	26,137,563	2,612,369	12,030,566	41.8%	45,312,572	4,528,853	20,856,417	41.8%	1.73362
2008	24,975,406	6,001,607	13,701,296	44.2%	41,433,336	9,956,458	22,729,977	44.2%	1.65897
2009	23,799,097	5,733,528	16,629,707	56.3%	37,781,703	9,102,129	26,400,105	56.3%	1.58753
2010	22,631,201	5,457,736	18,769,491	66.8%	34,380,514	8,291,198	28,513,942	66.8%	1.51916
2011	21,469,322	5,190,663	21,251,812	79.7%	31,210,937	7,545,905	30,894,732	79.7%	1.45375
2012	21,298,943	5,163,201	26,519,916	100.2%	29,629,907	7,182,757	36,893,029	100.2%	1.39114
2013	20,542,147	8,416,958	25,861,729	89.3%	27,346,498	11,204,979	34,428,131	89.3%	1.33124
2014	19,456,618	10,396,148	26,501,364	88.8%	24,786,029	13,243,783	33,760,419	88.8%	1.27391
2015	18,947,531	10,555,970	30,711,106	104.1%	23,098,083	12,868,308	37,438,528	104.1%	1.21906
2016	18,872,688	10,590,440	35,535,639	120.6%	22,016,120	12,354,381	41,454,448	120.6%	1.16656
2017	18,175,773	10,221,176	39,305,182	138.4%	20,290,073	11,410,157	43,877,364	138.4%	1.11633
2018	17,161,938	9,666,854	44,879,139	167.3%	18,333,305	10,326,653	47,942,310	167.3%	1.06825
2019	15,938,034	8,992,758	45,179,490	181.2%	16,292,693	9,192,868	46,184,843	181.2%	1.02225
<b>Total</b>	<b>430,455,489</b>	<b>98,999,407</b>	<b>393,608,369</b>	<b>74.3%</b>	<b>701,155,320</b>	<b>127,208,429</b>	<b>524,440,173</b>	<b>63.3%</b>	
2020	14,425,478	8,139,325	31,601,246	140.0%	14,111,464	7,962,148	30,913,350	140.0%	0.97823
2021	12,778,642	7,210,126	33,360,385	166.9%	11,962,179	6,749,451	31,228,895	166.9%	0.93611
2022	11,318,677	9,874,260	33,742,180	159.2%	10,139,229	8,845,325	30,226,120	159.2%	0.89580
2023	10,013,319	8,735,483	34,036,578	181.5%	8,583,631	7,488,243	29,176,881	181.5%	0.85722
2024	8,853,464	7,723,641	34,147,893	206.0%	7,262,563	6,335,761	28,011,773	206.0%	0.82031
2025	7,813,013	6,815,966	34,261,418	234.2%	6,133,084	5,350,419	26,894,640	234.2%	0.78498
2026	6,878,866	6,001,029	34,337,880	266.6%	5,167,268	4,507,854	25,793,935	266.6%	0.75118
2027	6,031,429	5,261,736	34,292,768	303.7%	4,335,588	3,782,308	24,650,763	303.7%	0.71883
2028	5,262,488	4,590,923	33,993,392	345.0%	3,619,950	3,157,995	23,383,312	345.0%	0.68788
2029	4,567,719	3,984,816	33,329,501	389.7%	3,006,732	2,623,032	21,939,365	389.7%	0.65826
2030	3,947,587	3,443,821	32,476,943	439.4%	2,486,627	2,169,299	20,457,572	439.4%	0.62991
2031	3,398,078	2,964,437	31,502,315	495.1%	2,048,311	1,786,919	18,989,133	495.1%	0.60279
2032	2,909,732	2,538,411	30,388,831	557.8%	1,678,415	1,464,227	17,529,130	557.8%	0.57683
2033	2,475,952	2,159,987	29,056,283	626.8%	1,366,697	1,192,288	16,038,736	626.8%	0.55199
2034	2,096,541	1,828,994	27,444,384	699.1%	1,107,432	966,109	14,496,638	699.1%	0.52822
2035	1,766,477	1,541,050	25,718,939	777.6%	892,905	778,958	13,000,215	777.6%	0.50547
2036	1,480,754	1,291,790	23,990,799	865.3%	716,249	624,846	11,604,486	865.3%	0.48371
2037	1,234,897	1,077,307	22,268,623	963.1%	571,604	498,660	10,307,617	963.1%	0.46288
2038	1,024,233	893,527	20,516,491	1069.8%	453,678	395,782	9,087,653	1069.8%	0.44294
2039	844,601	736,818	18,655,910	1179.7%	358,001	312,315	7,907,674	1179.7%	0.42387
2040	692,046	603,732	16,853,038	1300.6%	280,706	244,884	6,835,877	1300.6%	0.40562
2041	563,043	491,191	15,174,040	1439.3%	218,545	190,656	5,889,806	1439.3%	0.38815
2042	454,653	396,633	13,561,309	1593.0%	168,874	147,324	5,037,152	1593.0%	0.37144
2043	364,202	317,725	12,008,750	1761.0%	129,452	112,932	4,268,399	1761.0%	0.35544
2044	289,692	252,723	10,483,740	1932.8%	98,534	85,960	3,565,883	1932.8%	0.34013
2045	228,673	199,492	9,015,090	2105.5%	74,430	64,932	2,934,301	2105.5%	0.32549
2046	179,127	156,268	7,672,127	2287.5%	55,793	48,673	2,389,649	2287.5%	0.31147
2047	139,231	121,463	6,481,684	2486.3%	41,499	36,203	1,931,923	2486.3%	0.29806
2048	107,405	93,699	5,437,306	2703.7%	30,635	26,725	1,550,849	2703.7%	0.28522
2049	82,247	71,751	4,511,127	2929.3%	22,449	19,584	1,231,273	2929.3%	0.27294
2050	62,479	54,505	3,698,530	3161.6%	16,319	14,236	966,011	3161.6%	0.26119
2051	47,121	41,108	3,010,449	3412.1%	11,778	10,275	752,433	3412.1%	0.24994
2052	35,270	30,769	2,435,602	3688.1%	8,436	7,359	582,542	3688.1%	0.23918
2053	26,250	22,900	1,956,224	3980.2%	6,008	5,241	447,737	3980.2%	0.22888
2054	19,450	16,968	1,560,663	4285.4%	4,260	3,716	341,820	4285.4%	0.21902
2055	14,335	12,506	1,232,574	4592.2%	3,004	2,621	258,336	4592.2%	0.20959
2056	10,513	9,171	968,320	4919.4%	2,108	1,839	194,211	4919.4%	0.20057
2057	7,667	6,689	756,616	5270.2%	1,472	1,284	145,216	5270.2%	0.19193
2058	5,552	4,843	585,696	5634.2%	1,020	890	107,571	5634.2%	0.18366
2059	3,992	3,483	448,104	5995.1%	702	612	78,756	5995.1%	0.17575
2060	2,839	2,477	337,322	6346.1%	477	417	56,733	6346.1%	0.16819
2061	1,992	1,737	248,933	6675.8%	321	280	40,064	6675.8%	0.16094
2062	1,370	1,195	180,078	7020.8%	211	184	27,734	7020.8%	0.15401
2063	924	806	127,407	7361.9%	136	119	18,777	7361.9%	0.14738
2064	611	533	87,629	7663.3%	86	75	12,359	7663.3%	0.14103
2065	393	343	58,332	7925.2%	53	46	7,873	7925.2%	0.13496
2066	245	214	37,448	8150.0%	32	28	4,836	8150.0%	0.12915
2067	148	129	23,204	8368.4%	18	16	2,868	8368.4%	0.12359
2068	85	75	13,695	8561.8%	10	9	1,620	8561.8%	0.11827
2069	46	40	7,613	8800.7%	5	5	862	8800.7%	0.11317
2070	16	14	2,119	7136.5%	2	1	229	7136.5%	0.10830
2071	1	1	1,046	88819.3%	0	0	108	88819.3%	0.10364
2072	0	0	0	0.0%	0	0	0	0.0%	0.09917
2073	0	0	0	0.0%	0	0	0	0.0%	0.09490
2074	0	0	0	0.0%	0	0	0	0.0%	0.09082
2075	0	0	0	0.0%	0	0	0	0.0%	0.08691
<b>Total</b>	<b>112,463,564</b>	<b>89,728,630</b>	<b>718,098,572</b>	<b>355.2%</b>	<b>87,178,982</b>	<b>68,019,065</b>	<b>451,321,698</b>	<b>290.8%</b>	
<b>Grand Total</b>	<b>542,919,053</b>	<b>188,728,037</b>	<b>1,111,706,941</b>	<b>151.9%</b>	<b>788,334,302</b>	<b>195,227,495</b>	<b>975,761,871</b>	<b>99.2%</b>	<b>99.2%</b>

Minimum Required Loss Ratios	60%	80%
Minimum PV Incurred Claims	473,000,581	156,181,996
Dual Loss Ratio Test Met	975,761,871	>
		629,182,577



Lifetime Experience (Nationwide) as of 12/31/2019

Lifetime Benefit Periods

Year	Non-Interest Adjusted				Interest Adjusted			
	Original Premium	VA Rate Level Increased Premium	Incurred Claims	Loss Ratios	Original Premium	VA Rate Level Increased Premium	Incurred Claims	Loss Ratios
1997	379,977	0	0	0.0%	1,022,995	0	0	0.0%
1998	2,595,131	0	229,543	8.8%	6,685,894	0	591,378	8.8%
1999	5,659,399	0	581,891	10.3%	13,952,573	0	1,434,582	10.3%
2000	11,774,776	0	1,523,171	12.9%	27,779,237	0	3,593,490	12.9%
2001	20,610,805	0	4,550,872	22.1%	46,531,422	0	10,274,153	22.1%
2002	30,785,341	0	5,455,702	17.7%	66,508,790	0	11,786,523	17.7%
2003	41,521,354	2,651,013	9,780,632	22.1%	85,840,116	5,480,631	20,220,212	22.1%
2004	42,601,415	10,909,135	12,851,585	24.0%	84,280,387	21,582,057	25,424,896	24.0%
2005	42,549,495	10,927,035	16,132,072	30.2%	80,552,796	20,686,573	30,540,515	30.2%
2006	41,569,288	10,662,726	15,462,707	29.6%	75,308,242	19,316,933	28,012,730	29.6%
2007	40,578,811	10,406,561	23,737,573	46.6%	70,348,194	18,041,011	41,151,906	46.6%
2008	39,543,234	10,161,482	31,791,240	64.0%	65,600,859	16,857,547	52,740,568	64.0%
2009	38,374,783	9,875,472	29,994,927	62.2%	60,920,995	15,677,576	47,617,749	62.2%
2010	37,146,288	9,577,793	45,629,630	97.7%	56,431,316	14,550,241	69,318,907	97.7%
2011	34,498,737	12,158,174	48,785,419	104.6%	50,152,393	17,674,894	70,921,597	104.6%
2012	30,211,136	20,595,683	48,436,267	95.3%	42,028,049	28,651,566	67,381,836	95.3%
2013	27,379,304	22,500,000	50,816,851	101.9%	36,448,385	29,952,868	67,649,351	101.9%
2014	26,049,969	21,412,857	44,201,692	93.1%	33,185,380	27,278,105	56,309,088	93.1%
2015	23,614,914	27,996,137	51,126,790	99.1%	28,787,879	34,128,831	62,326,370	99.1%
2016	20,570,267	32,980,466	51,635,806	96.4%	23,996,447	38,473,687	60,236,257	96.4%
2017	18,518,005	31,895,845	55,470,317	110.0%	20,672,115	35,606,135	61,922,913	110.0%
2018	16,815,608	28,955,477	69,307,052	151.4%	17,963,337	30,931,797	74,037,520	151.4%
2019	15,413,631	26,532,716	50,503,757	120.4%	15,756,622	27,123,133	51,627,588	120.4%
<b>Total</b>	<b>608,761,666</b>	<b>300,198,571</b>	<b>668,005,496</b>	<b>73.5%</b>	<b>1,010,754,424</b>	<b>402,013,587</b>	<b>915,120,129</b>	<b>64.8%</b>
2020	14,335,181	24,676,294	56,153,461	143.9%	14,023,133	24,139,140	54,931,111	143.9%
2021	13,041,145	22,448,765	61,540,853	173.4%	12,207,909	21,014,450	57,608,833	173.4%
2022	11,809,577	22,739,145	64,512,829	186.7%	10,578,975	20,369,643	57,790,355	186.7%
2023	10,651,507	34,869,359	67,421,501	148.1%	9,130,699	29,890,760	57,795,151	148.1%
2024	9,591,498	31,399,256	70,146,118	171.1%	7,867,978	25,757,046	57,541,388	171.1%
2025	8,619,325	28,216,696	72,947,145	198.0%	6,766,026	22,149,635	57,262,288	198.0%
2026	7,725,695	25,291,260	75,685,819	229.2%	5,803,389	18,998,293	56,853,686	229.2%
2027	6,901,820	22,594,178	78,146,781	264.9%	4,961,254	16,241,434	56,174,461	264.9%
2028	6,145,883	20,119,502	80,067,229	304.8%	4,227,619	13,839,767	55,076,499	304.8%
2029	5,451,495	17,846,316	81,283,612	348.9%	3,588,483	11,747,456	53,505,477	348.9%
2030	4,821,872	15,785,145	82,118,724	398.5%	3,037,348	9,943,231	51,727,459	398.5%
2031	4,248,537	13,908,244	82,540,147	454.6%	2,560,956	8,383,685	49,753,988	454.6%
2032	3,725,851	12,197,151	82,398,412	517.5%	2,149,175	7,035,659	47,529,715	517.5%
2033	3,246,602	10,628,256	81,484,545	587.3%	1,792,087	5,866,676	44,978,537	587.3%
2034	2,815,614	9,217,349	79,678,534	662.2%	1,487,260	4,868,776	42,087,693	662.2%
2035	2,432,210	7,962,218	77,322,217	743.9%	1,229,415	4,024,682	39,084,251	743.9%
2036	2,090,474	6,843,490	74,596,137	835.0%	1,011,174	3,310,235	36,082,577	835.0%
2037	1,787,145	5,850,498	71,455,275	935.6%	827,227	2,708,057	33,074,951	935.6%
2038	1,519,091	4,972,981	67,764,152	1043.8%	672,872	2,202,751	30,015,711	1043.8%
2039	1,283,445	4,201,556	63,353,126	1155.0%	544,013	1,780,912	26,853,468	1155.0%
2040	1,077,124	3,526,133	58,814,864	1277.7%	436,900	1,430,259	23,856,303	1277.7%
2041	896,996	2,936,457	54,369,039	1418.3%	348,169	1,139,786	21,103,351	1418.3%
2042	741,151	2,426,273	49,836,362	1573.4%	275,290	901,204	18,510,997	1573.4%
2043	606,248	1,984,647	45,109,884	1741.1%	215,485	705,424	16,033,889	1741.1%
2044	491,371	1,608,580	40,198,824	1914.3%	167,132	547,134	13,673,013	1914.3%
2045	395,717	1,295,440	35,369,276	2091.4%	128,801	421,650	11,512,265	2091.4%
2046	316,329	1,035,551	30,760,800	2275.4%	98,527	322,545	9,581,112	2275.4%
2047	250,825	821,114	26,626,294	2483.9%	74,761	244,740	7,936,202	2483.9%
2048	197,239	645,693	22,851,670	2711.0%	56,257	184,167	6,517,839	2711.0%
2049	153,863	503,695	19,375,282	2946.6%	41,996	137,479	5,288,317	2946.6%
2050	119,081	389,829	16,299,927	3202.9%	31,102	101,819	4,257,344	3202.9%
2051	91,467	299,430	13,610,782	3481.9%	22,861	74,840	3,401,887	3481.9%
2052	70,412	230,503	11,213,119	3726.3%	16,841	55,131	2,681,927	3726.3%
2053	53,705	175,811	9,205,946	4011.0%	12,292	40,239	2,107,040	4011.0%
2054	40,456	132,440	7,441,522	4304.0%	8,861	29,007	1,629,858	4304.0%
2055	30,322	99,263	5,962,436	4601.2%	6,355	20,805	1,249,670	4601.2%
2056	22,508	73,685	4,748,761	4936.7%	4,514	14,779	952,436	4936.7%
2057	16,517	54,071	3,755,665	5320.6%	3,170	10,378	720,818	5320.6%
2058	11,950	39,121	2,941,876	5760.3%	2,195	7,185	540,315	5760.3%
2059	8,501	27,830	2,261,824	6225.6%	1,494	4,891	397,526	6225.6%
2060	5,919	19,376	1,706,033	6744.5%	995	3,259	286,931	6744.5%
2061	4,015	13,142	1,266,058	7379.2%	646	2,115	203,764	7379.2%
2062	2,625	8,595	924,384	8238.4%	404	1,324	142,367	8238.4%
2063	1,635	5,352	662,542	9483.0%	241	789	97,646	9483.0%
2064	940	3,076	465,914	11603.9%	133	434	65,710	11603.9%
2065	490	1,604	322,190	15385.9%	66	216	43,483	15385.9%
2066	205	672	217,762	24840.8%	26	87	28,124	24840.8%
2067	35	113	143,886	97225.3%	4	14	17,783	97225.3%
2068	3	9	65,225	543668.1%	0	1	7,714	543668.1%
2069	0	0	0	0.0%	0	0	0	0.0%
2070	0	0	0	0.0%	0	0	0	0.0%
2071	0	0	0	0.0%	0	0	0	0.0%
2072	0	0	0	0.0%	0	0	0	0.0%
2073	0	0	0	0.0%	0	0	0	0.0%
2074	0	0	0	0.0%	0	0	0	0.0%
2075	0	0	0	0.0%	0	0	0	0.0%
<b>Total</b>	<b>127,851,613</b>	<b>360,125,165</b>	<b>1,937,144,763</b>	<b>397.0%</b>	<b>96,422,513</b>	<b>260,673,986</b>	<b>1,118,573,231</b>	<b>313.2%</b>
<b>Grand Total</b>	<b>736,613,279</b>	<b>660,323,736</b>	<b>2,605,150,259</b>	<b>186.5%</b>	<b>1,107,176,936</b>	<b>662,687,573</b>	<b>2,033,693,360</b>	<b>114.9%</b>

Minimum Required Loss Ratios	60%	80%
Minimum PV Incurred Claims	664,306,162	530,150,058
Dual Loss Ratio Test Met	2,033,693,360	>
		1,194,456,220

Lifetime Experience (Nationwide) as of 12/31/2019

Non-Lifetime Benefit Periods

Year	Non-Interest Adjusted				Interest Adjusted			
	Original Premium	VA Rate Level Increased Premium	Incurred Claims	Loss Ratios	Original Premium	VA Rate Level Increased Premium	Incurred Claims	Loss Ratios
1997	873,120	0	0	0.0%	2,350,665	0	0	0.0%
1998	5,474,434	0	336,881	6.2%	14,103,908	0	867,913	6.2%
1999	10,823,775	0	1,202,294	11.1%	26,684,723	0	2,964,113	11.1%
2000	20,313,452	0	2,802,214	13.8%	47,923,818	0	6,611,027	13.8%
2001	33,907,403	0	6,980,208	20.6%	76,550,124	0	15,758,676	20.6%
2002	50,628,324	0	10,065,212	19.9%	109,377,661	0	21,744,930	19.9%
2003	68,642,198	2,651,013	13,440,862	18.9%	141,909,012	5,480,631	27,787,272	18.9%
2004	70,823,592	10,909,135	18,831,982	23.0%	140,113,651	21,582,057	37,256,199	23.0%
2005	70,785,801	10,927,035	24,827,897	30.4%	134,008,506	20,686,573	47,003,062	30.4%
2006	68,824,108	10,662,726	24,812,557	31.2%	124,683,939	19,316,933	44,951,216	31.2%
2007	66,716,374	13,018,930	35,768,139	44.9%	115,660,766	22,569,864	62,008,322	44.9%
2008	64,518,640	16,163,088	45,492,536	56.4%	107,034,194	26,814,005	75,470,545	56.4%
2009	62,173,881	15,609,000	46,624,634	59.9%	98,702,698	24,779,705	74,017,854	59.9%
2010	59,777,489	15,035,529	64,399,121	86.1%	90,811,830	22,841,439	97,832,849	86.1%
2011	55,968,059	17,348,837	70,037,231	95.5%	81,363,330	25,220,799	101,816,329	95.5%
2012	51,510,078	25,758,883	74,956,182	97.0%	71,657,951	35,834,324	104,274,865	97.0%
2013	47,921,451	30,916,958	76,678,580	97.3%	63,794,883	41,157,847	102,077,482	97.3%
2014	45,506,587	31,809,005	70,703,056	91.4%	57,971,409	40,521,889	90,069,506	91.4%
2015	42,562,445	38,552,106	81,837,896	100.9%	51,885,962	46,997,138	99,764,898	100.9%
2016	39,442,955	43,570,906	87,171,445	105.0%	46,012,567	50,828,068	101,690,706	105.0%
2017	36,693,777	42,117,021	94,775,499	120.3%	40,962,188	47,016,292	105,800,277	120.3%
2018	33,977,546	38,622,330	114,186,191	157.3%	36,296,642	41,258,450	121,979,830	157.3%
2019	31,351,665	35,525,474	95,683,247	143.1%	32,049,315	36,316,002	97,812,430	143.1%
<b>Total</b>	<b>1,039,217,155</b>	<b>399,197,978</b>	<b>1,061,613,865</b>	<b>73.8%</b>	<b>1,711,909,743</b>	<b>529,222,016</b>	<b>1,439,560,302</b>	<b>64.2%</b>
2020	28,760,659	32,815,619	87,754,707	142.5%	28,134,597	32,101,288	85,844,460	142.5%
2021	25,819,787	29,658,892	94,901,238	171.1%	24,170,087	27,763,901	88,837,728	171.1%
2022	23,128,254	32,613,405	98,255,009	176.3%	20,718,204	29,214,968	88,016,475	176.3%
2023	20,664,825	43,604,842	101,458,079	157.9%	17,714,330	37,379,002	86,972,032	157.9%
2024	18,444,961	39,122,898	104,294,011	181.2%	15,130,541	32,092,807	85,553,162	181.2%
2025	16,432,337	35,032,662	107,208,562	208.3%	12,899,110	27,500,054	84,156,928	208.3%
2026	14,604,561	31,292,290	110,023,699	239.7%	10,970,657	23,506,147	82,647,620	239.7%
2027	12,933,249	27,855,915	112,439,549	275.7%	9,296,842	20,023,742	80,825,224	275.7%
2028	11,408,371	24,710,425	114,060,620	315.8%	7,847,569	16,997,762	78,459,811	315.8%
2029	10,019,215	21,831,132	114,613,113	359.8%	6,595,215	14,370,487	75,444,841	359.8%
2030	8,769,458	19,228,966	114,595,667	409.3%	5,523,975	12,112,530	72,185,530	409.3%
2031	7,646,614	16,872,681	114,042,462	465.1%	4,609,267	10,170,604	68,743,121	465.1%
2032	6,635,583	14,735,562	112,787,243	527.8%	3,827,591	8,499,886	65,058,845	527.8%
2033	5,722,554	12,788,243	110,540,828	597.2%	3,158,784	7,058,964	61,017,273	597.2%
2034	4,912,154	11,046,342	107,122,918	671.3%	2,594,692	5,834,885	56,584,331	671.3%
2035	4,198,687	9,503,268	103,041,156	752.0%	2,122,321	4,803,640	52,084,467	752.0%
2036	3,571,228	8,135,280	98,586,936	842.2%	1,727,423	3,935,081	47,687,063	842.2%
2037	3,022,042	6,927,805	93,723,899	942.0%	1,398,832	3,206,717	43,382,569	942.0%
2038	2,543,325	5,866,508	88,280,643	1049.7%	1,126,550	2,598,533	39,103,364	1049.7%
2039	2,128,046	4,938,375	82,009,035	1160.5%	902,014	2,093,227	34,761,142	1160.5%
2040	1,769,171	4,129,865	75,667,902	1282.7%	717,605	1,675,143	30,692,180	1282.7%
2041	1,460,040	3,427,648	69,543,079	1422.8%	566,715	1,330,442	26,993,156	1422.8%
2042	1,195,804	2,822,905	63,397,671	1577.6%	444,164	1,048,527	23,548,149	1577.6%
2043	970,450	2,302,371	57,118,634	1745.2%	344,937	818,356	20,302,288	1745.2%
2044	781,063	1,861,304	50,682,564	1918.1%	265,667	633,094	17,238,896	1918.1%
2045	624,390	1,494,931	44,384,366	2094.3%	203,231	486,582	14,446,565	2094.3%
2046	495,456	1,191,819	38,432,927	2277.8%	154,320	371,218	11,970,761	2277.8%
2047	390,056	942,578	33,107,978	2484.4%	116,260	280,944	9,868,126	2484.4%
2048	304,645	739,392	28,288,975	2709.6%	86,892	210,892	8,068,688	2709.6%
2049	236,110	575,446	23,886,409	2943.3%	64,444	157,063	6,519,590	2943.3%
2050	181,559	444,334	19,998,456	3195.2%	47,421	116,055	5,223,356	3195.2%
2051	138,588	340,538	16,621,231	3469.1%	34,639	85,114	4,154,321	3469.1%
2052	105,682	261,272	13,648,721	3719.5%	25,277	62,490	3,264,469	3719.5%
2053	79,954	198,710	11,162,170	4005.6%	18,300	45,480	2,554,776	4005.6%
2054	59,906	149,408	9,002,185	4300.8%	13,121	32,724	1,971,678	4300.8%
2055	44,657	111,769	7,195,010	4599.6%	9,360	23,426	1,508,006	4599.6%
2056	33,021	82,856	5,717,082	4933.8%	6,623	16,618	1,146,647	4933.8%
2057	24,184	60,760	4,512,280	5312.0%	4,642	11,662	866,034	5312.0%
2058	17,502	43,965	3,527,572	5738.9%	3,215	8,075	647,886	5738.9%
2059	12,493	31,312	2,709,928	6186.3%	2,196	5,503	476,282	6186.3%
2060	8,758	21,853	2,043,355	6675.3%	1,473	3,675	343,664	6675.3%
2061	6,006	14,880	1,514,991	7253.6%	967	2,395	243,828	7253.6%
2062	3,995	9,790	1,104,462	8011.9%	615	1,508	170,102	8011.9%
2063	2,559	6,158	789,950	9061.9%	377	908	116,424	9061.9%
2064	1,550	3,608	553,543	10730.4%	219	509	78,069	10730.4%
2065	883	1,947	380,522	13445.6%	119	263	51,356	13445.6%
2066	451	886	255,210	19101.0%	58	114	32,960	19101.0%
2067	183	243	167,090	39289.5%	23	30	20,650	39289.5%
2068	88	84	78,919	45897.7%	10	10	9,333	45897.7%
2069	46	40	7,613	8800.7%	5	5	862	8800.7%
2070	16	14	2,119	7136.5%	2	1	229	7136.5%
2071	1	1	1,046	88819.3%	0	0	108	88819.3%
2072	0	0	0	0.0%	0	0	0	0.0%
2073	0	0	0	0.0%	0	0	0	0.0%
2074	0	0	0	0.0%	0	0	0	0.0%
2075	0	0	0	0.0%	0	0	0	0.0%
<b>Total</b>	<b>240,315,177</b>	<b>449,853,795</b>	<b>2,655,243,335</b>	<b>384.7%</b>	<b>183,601,495</b>	<b>328,693,051</b>	<b>1,569,894,929</b>	<b>306.4%</b>
<b>Grand Total</b>	<b>1,279,532,332</b>	<b>849,051,773</b>	<b>3,716,857,200</b>	<b>174.6%</b>	<b>1,895,511,238</b>	<b>857,915,068</b>	<b>3,009,455,231</b>	<b>109.3%</b>

Minimum Required Loss Ratios	60%	80%
Minimum PV Incurred Claims	1,137,306,743	686,332,054
Dual Loss Ratio Test Met	3,009,455,231	> 1,823,638,797

## Forms LT50 et al

State	In-Force Premium		Cumulative Increases		Requested Increase		Filing Date	Status
	Non-Lifetime BP's	Lifetime BP	Non-Lifetime BP's	Lifetime BP	Non-Lifetime BP's	Lifetime BP		
Alabama	247,783	257,101	48.4%	179.5%	30.0%	69.0%	09/03/2021	pending approval
Alaska	5,181	0	48.4%	87.0%	30.0%	152.6%		filing pending
Arizona	983,137	937,438	48.4%	182.5%	30.0%	67.2%		filing pending
Arkansas	224,786	224,447	48.4%	213.8%	30.0%	50.6%	09/10/2021	pending approval
California	768,421	815,808	15.0%	20.0%	67.7%	310.8%		filing pending
Colorado	944,138	1,204,089	48.4%	180.5%	30.0%	68.4%	10/15/2021	pending approval
Connecticut	249,992	474,546	32.3%	32.3%	45.8%	257.1%	09/24/2021	pending approval
Delaware	27,624	25,239	48.3%	203.7%	30.0%	55.6%	10/01/2021	pending approval
District of Columbia	4,395	1,472	0.0%	0.0%	92.9%	372.4%	09/10/2021	pending approval
Florida	1,500,311	1,898,562	39.9%	127.8%	0.0%	0.0%		not filing
Georgia	485,075	822,401	48.4%	194.5%	30.0%	60.4%	09/03/2021	pending approval
Hawaii	359,963	159,754	48.4%	179.5%	30.0%	69.0%	09/03/2021	pending approval
Idaho	158,967	100,406	48.4%	179.6%	30.0%	69.0%	09/17/2021	pending approval
Illinois	1,297,713	1,978,037	48.4%	179.5%	30.0%	69.0%	09/03/2021	pending approval
Indiana	444,040	700,656	48.3%	56.5%	30.0%	201.9%		filing pending
Iowa	716,094	2,246,154	47.9%	190.7%	30.0%	62.5%	10/01/2021	pending approval
Kansas	196,629	345,785	48.4%	179.5%	30.0%	69.0%	09/24/2021	pending approval
Kentucky	607,675	826,517	48.4%	143.1%	30.0%	94.3%	09/24/2021	pending approval
Louisiana	88,974	215,838	48.4%	132.2%	30.0%	103.5%	09/10/2021	pending approval
Maine	122,171	22,539	48.4%	138.6%	30.0%	98.0%		filing pending
Massachusetts	10,191	10,943	10.0%	10.0%	35.8%	232.9%	10/01/2021	pending approval
Michigan	259,536	222,162	48.4%	185.1%	30.0%	65.7%	09/24/2021	pending approval
Minnesota	361,414	751,764	46.9%	88.3%	31.3%	150.9%	09/03/2021	pending approval
Mississippi	316,062	453,204	48.3%	179.6%	30.0%	69.0%	09/10/2021	pending approval
Missouri	1,200,356	2,052,376	48.4%	185.2%	30.0%	65.6%	09/03/2021	pending approval
Montana	265,974	468,013	48.4%	179.5%	30.0%	69.0%	10/01/2021	pending approval
Nebraska	1,065,136	2,429,945	48.4%	179.5%	30.0%	69.0%	07/16/2021	pending approval
Nevada	148,224	104,504	48.4%	179.5%	30.0%	69.0%	09/17/2021	pending approval
New Hampshire	166,769	148,785	48.3%	179.5%	30.0%	69.0%	09/17/2021	pending approval
New Jersey	753,109	691,514	48.3%	179.2%	30.0%	69.2%		filing pending
New Mexico	85,901	120,342	48.4%	125.6%	30.0%	109.4%		filing pending
New York	635,981	830,698	5.7%	5.7%	82.5%	347.0%		filing pending
North Carolina	1,108,119	957,965	48.3%	179.7%	30.0%	69.0%	09/24/2021	pending approval
North Dakota	668,270	2,332,508	48.4%	179.5%	30.0%	69.0%	09/03/2021	pending approval
Ohio	906,495	609,147	48.3%	182.1%	30.0%	67.5%	09/24/2021	pending approval
Oklahoma	184,774	395,999	48.4%	143.9%	30.0%	93.7%	09/17/2021	pending approval
Oregon	163,613	104,903	14.9%	116.6%	30.0%	69.1%	09/10/2021	pending approval
Pennsylvania	660,099	400,838	48.4%	199.8%	30.0%	57.6%	09/03/2021	pending approval
Puerto Rico	40,699	229,253	48.4%	179.5%	30.0%	69.0%	09/17/2021	pending approval
Rhode Island	48,423	8,005	48.4%	54.8%	30.0%	205.2%		filing pending
South Carolina	291,309	383,544	48.4%	180.3%	30.0%	68.5%	09/03/2021	pending approval
South Dakota	719,454	2,251,825	48.4%	179.5%	30.0%	69.0%	09/03/2021	pending approval
Tennessee	513,391	763,819	48.4%	179.5%	30.0%	69.0%	09/03/2021	pending approval
Texas	1,079,252	2,502,310	48.3%	179.5%	30.0%	69.0%	09/24/2021	pending approval
Utah	221,288	108,850	48.4%	179.5%	30.0%	69.0%	09/03/2021	pending approval
Vermont	96,199	143,807	16.0%	16.0%	66.3%	307.3%		filing pending
Virginia	1,293,917	1,516,185	61.1%	200.9%	19.7%	57.0%	09/24/2021	pending approval
Washington	252,004	325,496	48.2%	179.6%	30.1%	69.0%	09/03/2021	pending approval
West Virginia	241,671	169,270	48.4%	179.6%	30.0%	69.0%		filing pending
Wisconsin	354,847	261,508	48.4%	179.5%	30.0%	69.0%	09/03/2021	pending approval
Wyoming	178,684	286,932	48.4%	179.5%	30.0%	69.0%	09/03/2021	pending approval

**Form LT50**

## 1. MORTALITY

110% in the first policy year, grading linearly to 130% over 20 years, of the 1983 GAM Tables blended 40% male, 60% female.

## 2. INTEREST

4.50% all years

## 3. VOLUNTARY LAPSE RATES

Policy Year	Issue Age	<u>47 &amp; Under</u>	<u>52</u>	<u>57</u>	<u>62</u>	<u>67</u>	<u>72</u>	<u>77</u>	<u>82</u>
1		0.190	0.180	0.160	0.140	0.130	0.120	0.110	0.100
2		0.160	0.140	0.120	0.100	0.095	0.090	0.085	0.080
3		0.130	0.110	0.090	0.070	0.065	0.065	0.060	0.060
4		0.100	0.085	0.075	0.065	0.060	0.055	0.055	0.055
5		0.080	0.070	0.065	0.060	0.055	0.050	0.050	0.050
6		0.070	0.060	0.055	0.055	0.050	0.050	0.050	0.050
7		0.060	0.055	0.050	0.050	0.050	0.050	0.050	0.050
8		0.055	0.050	0.050	0.050	0.050	0.050	0.050	0.050
9 on		0.050	0.050	0.050	0.050	0.050	0.050	0.050	0.050

## 4. CLAIM COSTS

Claim costs used in pricing were developed from:

- a) Tabulations from the 1985 National Nursing Home Survey conducted by the Long-Term Care Experience Committee, published in the Transactions Society of Actuaries, 1988-89-90 Reports.
- b) 1982, 1984, and 1989 National LTC Surveys
- c) Statistics published by gerontological researchers concerning cognitive and functional impairment prevalence rates and recovery rates.
- d) Wakely and Associates, Inc client company experience.

## 5. MODAL ASSUMPTIONS

75% annual mode, 25% monthly mode.

Modal Loading Factors:

Annual:	1.0000
Semi-Annual:	0.5000
Quarterly:	0.2500
Monthly:	0.0833

## 6. DISTRIBUTION OF BUSINESS ASSUMPTIONS (Percent policies issued)

## a) Distribution by Issue Age

<u>Issue Age</u>	<u>Percent Distribution</u>
37	1%
42	2%
47	3%
52	4%
57	8%
62	19%
67	23%
72	20%
77	13%
82	7%

## c) Distribution by Elimination Period Option

<u>Elimination Option</u>	<u>Percent Distribution</u>
0 Day	30%
20 Day	20%
100 Day	50%
365 Day	Less than 1%

## d) Distribution by Coverage Option

<u>Coverage Option</u>	<u>Percent Distribution</u>
Base Policy	100%
Inflation Rider	20%
SBP Rider	2%

## b) Distribution by Benefit Option

<u>Benefit Option</u>	<u>Percent Distribution</u>
1 Year*	5%
2 Year	10%
3 Year	20%
5 Year	15%
Lifetime	50%

## e) Average Confined Care Daily Benefit amount

\$80 per day

## f) Percent Distribution by Premium Payment Method

<u>Payment Method</u>	<u>Percent Distribution</u>
Individual	90%
Group Spon	10%

Form NH50

## 1. MORTALITY

110% in the first policy year, grading linearly to 130% over 20 years, of the 1983 GAM Tables blended 40% male, 60% female.

## 2. INTEREST

4.50% all years

## 3. VOLUNTARY LAPSE RATES

Policy Year	Issue Age <u>47 &amp; Under</u>	<u>52</u>	<u>57</u>	<u>62</u>	<u>67</u>	<u>72</u>	<u>77</u>	<u>82</u>
1	0.190	0.180	0.160	0.140	0.130	0.120	0.110	0.100
2	0.160	0.140	0.120	0.100	0.095	0.090	0.085	0.080
3	0.130	0.110	0.090	0.070	0.065	0.065	0.060	0.060
4	0.100	0.085	0.075	0.065	0.060	0.055	0.055	0.055
5	0.080	0.070	0.065	0.060	0.055	0.050	0.050	0.050
6	0.070	0.060	0.055	0.055	0.050	0.050	0.050	0.050
7	0.060	0.055	0.050	0.050	0.050	0.050	0.050	0.050
8	0.055	0.050	0.050	0.050	0.050	0.050	0.050	0.050
9 on	0.050	0.050	0.050	0.050	0.050	0.050	0.050	0.050

## 4. CLAIM COSTS

Claim costs used in pricing were developed from:

- a) Tabulations from the 1985 National Nursing Home Survey conducted by the Long-Term Care Experience Committee, published in the Transactions Society of Actuaries, 1988-89-90 Reports.
- b) 1982, 1984, and 1989 National LTC Surveys
- c) Statistics published by gerontological researchers concerning cognitive and functional impairment prevalence rates and recovery rates.
- d) Wakely and Associates, Inc client company experience.

## 5. MODAL ASSUMPTIONS

75% annual mode, 25% monthly mode.

Modal Loading Factors:

Annual:	1.0000
Semi-Annual:	0.5000
Quarterly:	0.2500
Monthly:	0.0833

6. DISTRIBUTION OF BUSINESS ASSUMPTIONS (Percent policies issued)

a) Distribution by Issue Age

<u>Issue Age</u>	<u>Percent Distribution</u>
37	1%
42	2%
47	3%
52	4%
57	8%
62	19%
67	23%
72	20%
77	13%
82	7%

c) Distribution by Elimination Period Option

<u>Elimination Option</u>	<u>Percent Distribution</u>
0 Day	30%
20 Day	20%
100 Day	50%
365 Day	Less than 1%

d) Distribution by Coverage Option

<u>Coverage Option</u>	<u>Percent Distribution</u>
Base Policy	100%
Inflation Rider	20%
SBP Rider	2%

b) Distribution by Benefit Option

<u>Benefit Option</u>	<u>Percent Distribution</u>
1 Year*	5%
2 Year	10%
3 Year	20%
5 Year	15%
Lifetime	50%

e) Average Confined Care Daily Benefit amount

\$80 per day

f) Percent Distribution by Premium Payment Method

<u>Payment Method</u>	<u>Percent Distribution</u>
Individual	90%
Group Spon	10%

**Forms HCA/HCAQ**

## 1. MORTALITY

110% in the first policy year, grading linearly to 130% over 20 years, of the 1983 GAM Tables blended 40% male, 60% female.

## 2. INTEREST

4.50% all years

## 3. VOLUNTARY LAPSE RATES

Policy Year	Issue Age <u>47 &amp; Under</u>	<u>52</u>	<u>57</u>	<u>62</u>	<u>67</u>	<u>72</u>	<u>77</u>	<u>82</u>
1	0.190	0.180	0.160	0.140	0.130	0.120	0.110	0.100
2	0.160	0.140	0.120	0.100	0.095	0.090	0.085	0.080
3	0.130	0.110	0.090	0.070	0.065	0.065	0.060	0.060
4	0.100	0.085	0.075	0.065	0.060	0.055	0.055	0.055
5	0.080	0.070	0.065	0.060	0.055	0.055	0.055	0.055
6	0.070	0.060	0.055	0.055	0.055	0.055	0.055	0.055
7	0.060	0.055	0.055	0.055	0.055	0.055	0.055	0.055
8 on	0.055	0.055	0.055	0.055	0.055	0.055	0.055	0.055

## 4. CLAIM COSTS

Claim costs used in pricing were developed from:

- a) Tabulations from the 1992 National Home and Hospice Care Survey; Source: Department of Health and Human Services, National Center for Health Statistics.
- b) Tabulations from the 1985 National Nursing Home Survey conducted by the Long-Term Care Experience Committee, published in the Transactions Society of Actuaries, 1988-89-90 Reports.
- c) 1982, 1984, and 1989 National LTC Surveys
- d) Statistics published by gerontological researchers concerning cognitive and functional impairment prevalence rates and recovery rates.
- e) Wakely and Associates, Inc client company experience and Mutual of Omaha Company experience

## 5. MODAL ASSUMPTIONS

55% annual mode, 45% monthly mode.

Modal Loading Factors:

Annual:	1.00000
Semi-Annual:	0.52000
Quarterly:	0.26000
Monthly:	0.08700



6. DISTRIBUTION OF BUSINESS ASSUMPTIONS (Percent policies issued)

a) Distribution by Issue Age

<u>Issue Age</u>	<u>Percent Distribution</u>
37	1%
42	1%
47	1%
52	2%
57	6%
62	12%
67	19%
72	22%
77	21%
82	15%

c) Distribution by Elimination Period Option

<u>Elimination Option</u>	<u>Percent Distribution</u>
20 Day	100%

d) Distribution by Coverage Option

<u>Coverage Option</u>	<u>Percent Distribution</u>
Base Policy	100%
Confined Care Rider	25%
Inflation Rider	10%
SBP Rider	2%
ROP Rider	5%
Tax-Qualified Rider	10%

b) Distribution by Benefit Option

<u>Benefit Option</u>	<u>Percent Distribution</u>
1 Year*	10%
2 Year	30%
3 Year	30%
5 Year	5%
Lifetime	25%

e) Average Home Health Care Daily Benefit amount

\$90 per day

\*The 1 year benefit period is not available in AZ, GA, ME, MD, MA, NH, NJ, and WV.

**Forms LTA/LTAQ**

## 1. MORTALITY

110% in the first policy year, grading linearly to 130% over 20 years, of the 1983 GAM Tables blended 40% male, 60% female.

## 2. INTEREST

4.50% all years

## 3. VOLUNTARY LAPSE RATES

Policy Year	Issue Age <u>47 &amp; Under</u>	<u>52</u>	<u>57</u>	<u>62</u>	<u>67</u>	<u>72</u>	<u>77</u>	<u>82</u>
1	0.190	0.180	0.160	0.140	0.130	0.120	0.110	0.100
2	0.160	0.140	0.120	0.100	0.095	0.090	0.085	0.080
3	0.130	0.110	0.090	0.070	0.065	0.065	0.060	0.060
4	0.100	0.085	0.075	0.065	0.060	0.055	0.055	0.055
5	0.080	0.070	0.065	0.060	0.055	0.050	0.050	0.050
6	0.070	0.060	0.055	0.055	0.050	0.050	0.050	0.050
7	0.060	0.055	0.050	0.050	0.050	0.050	0.050	0.050
8	0.055	0.050	0.050	0.050	0.050	0.050	0.050	0.050
9 on	0.050	0.050	0.050	0.050	0.050	0.050	0.050	0.050

## 4. CLAIM COSTS

Claim costs used in pricing were developed from:

- a) Tabulations from the 1985 National Nursing Home Survey conducted by the Long-Term Care Experience Committee, published in the Transactions Society of Actuaries, 1988-89-90 Reports.
- b) Tabulations from the 1992 National Home and Hospice Care Survey; Source: Department of Health and Human Services, National Center for Health Statistics.
- c) 1982, 1984, and 1989 National LTC Surveys
- d) Statistics published by gerontological researchers concerning cognitive and functional impairment prevalence rates and recovery rates.
- e) Wakely and Associates, Inc client company experience and Mutual of Omaha Company experience

## 5. MODAL ASSUMPTIONS

70% annual mode, 30% monthly mode.

Modal Loading Factors:

Annual:	1.00000
Semi-Annual:	0.52000
Quarterly:	0.26000
Monthly:	0.08700

## 6. DISTRIBUTION OF BUSINESS ASSUMPTIONS (Percent policies issued)

## a) Distribution by Issue Age

<u>Issue Age</u>	<u>Percent Distribution</u>
37	1%
42	1%
47	1%
52	2%
57	6%
62	12%
67	19%
72	22%
77	21%
82	15%

## c) Distribution by Elimination Period Option

<u>Elimination Option</u>	<u>Percent Distribution</u>
0 Day	60%
20 Day	10%
90 Day	30%

## d) Distribution by Coverage Option

<u>Coverage Option</u>	<u>Percent Distribution</u>
Base Policy	100%
Home Health Care Rider	45%
Inflation Rider	10%
SBP Rider	2%
ROP Rider	5%
Tax-Qualified Rider	10%

## b) Distribution by Benefit Option

<u>Benefit Option</u>	<u>Percent Distribution</u>
1 Year*	2.5%
2 Year**	10.0%
3 Year	25.0%
5 Year	2.5%
Lifetime	60.0%

## e) Average Confined Care Daily Benefit amount

\$90 per day

\*The 1 year benefit period is not available in AZ, FL, GA, ME, MD, MA, NH, NJ, and WV.

\*\*The 2 year benefit period is not available in FL.

**Forms NHA/NHAQ**

## 1. MORTALITY

110% in the first policy year, grading linearly to 130% over 20 years, of the 1983 GAM Tables blended 40% male, 60% female.

## 2. INTEREST

4.50% all years

## 3. VOLUNTARY LAPSE RATES

Policy Year	Issue Age <u>47 &amp; Under</u>	<u>52</u>	<u>57</u>	<u>62</u>	<u>67</u>	<u>72</u>	<u>77</u>	<u>82</u>
1	0.190	0.180	0.160	0.140	0.130	0.120	0.110	0.100
2	0.160	0.140	0.120	0.100	0.095	0.090	0.085	0.080
3	0.130	0.110	0.090	0.070	0.065	0.065	0.060	0.060
4	0.100	0.085	0.075	0.065	0.060	0.055	0.055	0.055
5	0.080	0.070	0.065	0.060	0.055	0.050	0.050	0.050
6	0.070	0.060	0.055	0.055	0.050	0.050	0.050	0.050
7	0.060	0.055	0.050	0.050	0.050	0.050	0.050	0.050
8	0.055	0.050	0.050	0.050	0.050	0.050	0.050	0.050
9 on	0.050	0.050	0.050	0.050	0.050	0.050	0.050	0.050

## 4. CLAIM COSTS

Claim costs used in pricing were developed from:

- a) Tabulations from the 1985 National Nursing Home Survey conducted by the Long-Term Care Experience Committee, published in the Transactions Society of Actuaries, 1988-89-90 Reports.
- b) Tabulations from the 1992 National Home and Hospice Care Survey; Source: Department of Health and Human Services, National Center for Health Statistics.
- c) 1982, 1984, and 1989 National LTC Surveys
- d) Statistics published by gerontological researchers concerning cognitive and functional impairment prevalence rates and recovery rates.
- e) Wakely and Associates, Inc client company experience and Mutual of Omaha Company experience

## 5. MODAL ASSUMPTIONS

70% annual mode, 30% monthly mode.

Modal Loading Factors:

Annual:	1.00000
Semi-Annual:	0.52000
Quarterly:	0.26000
Monthly:	0.08700

## 6. DISTRIBUTION OF BUSINESS ASSUMPTIONS (Percent policies issued)

## a) Distribution by Issue Age

<u>Issue Age</u>	<u>Percent Distribution</u>
37	1%
42	1%
47	1%
52	2%
57	6%
62	12%
67	19%
72	22%
77	21%
82	15%

## c) Distribution by Elimination Period Option

<u>Elimination Option</u>	<u>Percent Distribution</u>
0 Day	60%
20 Day	10%
90 Day	30%

## d) Distribution by Coverage Option

<u>Coverage Option</u>	<u>Percent Distribution</u>
Base Policy	100%
Home Health Care Rider	50%
Inflation Rider	10%
SBP Rider	2%
ROP Rider	5%
Tax-Qualified Rider	10%

## b) Distribution by Benefit Option

<u>Benefit Option</u>	<u>Percent Distribution</u>
1 Year*	9%
2 Year**	12%
3 Year	14%
5 Year	5%
Lifetime	60%

## e) Average Confined Care Daily Benefit amount

\$90 per day

\*The 1 year benefit period is not available in AZ, FL, GA, ME, MD, MA, NH, NJ, and WV.

\*\*The 2 year benefit period is not available in FL.

Non-Lifetime Benefit Periods (Inflation)

Table with 5 columns: Year, Rate Level, Earned Premium, Incurred Claims, Loss Ratios. Rows 1997-2075.

Non-Lifetime Benefit Periods (No Inflation)

Table with 5 columns: Year, Rate Level, Earned Premium, Incurred Claims, Loss Ratios. Rows 1997-2075.

Non-Lifetime Benefit Periods (All Inflation)

Table with 5 columns: Year, Rate Level, Earned Premium, Incurred Claims, Loss Ratios. Rows 1997-2075.

Non-Lifetime Benefit Periods (original model)

Table with 5 columns: Year, Rate Level, Earned Premium, Incurred Claims, Loss Ratios. Rows 1997-2075.

Validation

Table with 3 columns: Year, Rate Level, Incurred Claims. Rows 1997-2075.

Total 210,581,192 605,611,786 287.6%

Total 494,792,875 506,095,155 102.3%

Total 705,374,067 1,111,706,941 157.6%

Total 705,374,067 1,111,706,941 157.6%

Total 0 0 0



All Benefit Periods Combined (Inflation)

Table with 5 columns: Year, Rate Level, Earned Premium, Incurred Claims, Loss Ratios. Data spans from 1997 to 2075.

All Benefit Periods Combined (No Inflation)

Table with 5 columns: Year, Rate Level, Earned Premium, Incurred Claims, Loss Ratios. Data spans from 1997 to 2075.

All Benefit Periods Combined (All Inflation)

Table with 5 columns: Year, Rate Level, Earned Premium, Incurred Claims, Loss Ratios. Data spans from 1997 to 2075.

All Benefit Periods Combined (original model)

Table with 5 columns: Year, Rate Level, Earned Premium, Incurred Claims, Loss Ratios. Data spans from 1997 to 2075.

Validation

Table with 5 columns: Year, Rate Level, Earned Premium, Incurred Claims, Loss Ratios. Data spans from 1997 to 2075.

Total 640,805.530 2,090,230.622 326.2% Total 1,321,461,597 1,626,626,578 123.1% Total 1,962,267,126 3,716,857,200 189.4% Total 1,962,267,126 3,716,857,200 189.4% Total 0 0 0



Non-Lifetime Benefit Periods (Inflation)				Non-Lifetime Benefit Periods (No Inflation)				Non-Lifetime Benefit Periods (All Inflation)				Non-Lifetime Benefit Periods (original model)				Validation					
Virginia				Virginia				Virginia				Virginia				Virginia					
Year	Rate Level	Incurred	Loss	Year	Rate Level	Incurred	Loss	Year	Rate Level	Incurred	Loss	Year	Rate Level	Incurred	Loss	Year	Rate Level	Incurred	Loss		
Year	Rate Level	Incurred	Loss	Year	Rate Level	Incurred	Loss	Year	Rate Level	Incurred	Loss	Year	Rate Level	Incurred	Loss	Year	Rate Level	Incurred	Loss		
1997	77,555	0	0.0%	1997	415,588	0	0.0%	1997	493,144	0	0.0%	1997	493,144	0	0.0%	1997	0	0	1997	0	0
1998	368,539	107,337	29.1%	1998	2,510,764	0	0.0%	1998	2,879,303	107,337	3.7%	1998	2,879,303	107,337	3.7%	1998	0	0	1998	0	0
1999	635,927	620,404	97.6%	1999	4,528,448	0	0.0%	1999	5,164,376	620,404	12.0%	1999	5,164,376	620,404	12.0%	1999	0	0	1999	0	0
2000	1,143,929	1,279,042	111.8%	2000	7,394,748	0	0.0%	2000	8,538,676	1,279,042	15.0%	2000	8,538,676	1,279,042	15.0%	2000	0	0	2000	0	0
2001	2,189,809	2,429,336	110.9%	2001	11,106,789	0	0.0%	2001	13,296,598	2,429,336	18.3%	2001	13,296,598	2,429,336	18.3%	2001	0	0	2001	0	0
2002	3,977,607	4,609,510	115.9%	2002	15,865,376	0	0.0%	2002	19,842,983	4,609,510	23.2%	2002	19,842,983	4,609,510	23.2%	2002	0	0	2002	0	0
2003	6,453,116	3,660,230	56.7%	2003	20,667,729	0	0.0%	2003	27,120,845	3,660,230	13.5%	2003	27,120,845	3,660,230	13.5%	2003	0	0	2003	0	0
2004	7,017,300	5,980,398	85.2%	2004	21,204,877	0	0.0%	2004	28,222,177	5,980,398	21.2%	2004	28,222,177	5,980,398	21.2%	2004	0	0	2004	0	0
2005	7,224,304	8,695,825	120.4%	2005	21,012,002	0	0.0%	2005	28,236,306	8,695,825	30.8%	2005	28,236,306	8,695,825	30.8%	2005	0	0	2005	0	0
2006	7,008,073	9,349,851	133.4%	2006	20,246,747	0	0.0%	2006	27,254,820	9,349,851	34.3%	2006	27,254,820	9,349,851	34.3%	2006	0	0	2006	0	0
2007	7,505,454	12,030,566	160.3%	2007	21,244,478	0	0.0%	2007	28,749,932	12,030,566	41.8%	2007	28,749,932	12,030,566	41.8%	2007	0	0	2007	0	0
2008	8,261,676	13,701,296	165.8%	2008	22,715,337	0	0.0%	2008	30,977,013	13,701,296	44.2%	2008	30,977,013	13,701,296	44.2%	2008	0	0	2008	0	0
2009	8,018,100	16,588,624	206.6%	2009	21,514,525	61,084	0.3%	2009	29,532,625	16,629,707	56.3%	2009	29,532,625	16,629,707	56.3%	2009	0	0	2009	0	0
2010	7,663,309	18,739,788	244.5%	2010	20,425,628	29,703	0.1%	2010	28,088,937	18,769,491	66.8%	2010	28,088,937	18,769,491	66.8%	2010	0	0	2010	0	0
2011	7,470,816	21,242,247	284.3%	2011	19,189,169	9,565	0.0%	2011	26,659,985	21,251,812	79.7%	2011	26,659,985	21,251,812	79.7%	2011	0	0	2011	0	0
2012	7,776,921	26,429,283	339.8%	2012	18,685,223	90,633	0.5%	2012	26,462,143	26,519,916	100.2%	2012	26,462,143	26,519,916	100.2%	2012	0	0	2012	0	0
2013	8,867,770	25,765,132	290.5%	2013	20,091,335	96,597	0.5%	2013	28,959,105	25,861,729	89.3%	2013	28,959,105	25,861,729	89.3%	2013	0	0	2013	0	0
2014	9,339,439	26,374,261	282.4%	2014	20,513,327	127,103	0.6%	2014	29,852,766	26,501,364	88.8%	2014	29,852,766	26,501,364	88.8%	2014	0	0	2014	0	0
2015	9,425,924	29,413,504	312.0%	2015	20,077,577	1,297,602	6.5%	2015	29,503,501	30,711,106	104.1%	2015	29,503,501	30,711,106	104.1%	2015	0	0	2015	0	0
2016	9,097,223	32,926,274	360.5%	2016	19,765,905	2,609,364	13.2%	2016	29,463,128	35,535,639	120.6%	2016	29,463,128	35,535,639	120.6%	2016	0	0	2016	0	0
2017	9,563,292	31,726,208	331.7%	2017	18,833,657	7,578,973	40.2%	2017	28,396,949	39,305,182	138.4%	2017	28,396,949	39,305,182	138.4%	2017	0	0	2017	0	0
2018	9,361,333	29,620,041	316.6%	2018	17,467,458	15,619,098	89.4%	2018	26,828,791	44,879,139	167.3%	2018	26,828,791	44,879,139	167.3%	2018	0	0	2018	0	0
2019	8,879,233	21,250,341	239.3%	2019	16,051,558	23,929,149	149.1%	2019	24,930,792	45,179,490	181.2%	2019	24,930,792	45,179,490	181.2%	2019	0	0	2019	0	0
2020	11,558,085	10,986,858	95.1%	2020	11,006,718	20,614,388	187.3%	2020	22,564,803	31,601,246	140.0%	2020	22,564,803	31,601,246	140.0%	2020	0	0	2020	0	0
2021	10,236,595	11,672,327	114.0%	2021	9,750,174	21,688,057	222.4%	2021	19,988,769	33,360,385	166.9%	2021	19,988,769	33,360,385	166.9%	2021	0	0	2021	0	0
2022	9,748,993	11,876,690	121.8%	2022	11,443,943	21,865,400	191.1%	2022	21,192,936	33,742,180	159.2%	2022	21,192,936	33,742,180	159.2%	2022	0	0	2022	0	0
2023	12,599,229	12,049,128	95.6%	2023	6,149,572	21,987,450	357.5%	2023	18,748,802	34,036,578	181.5%	2023	18,748,802	34,036,578	181.5%	2023	0	0	2023	0	0
2024	11,139,845	12,166,904	109.2%	2024	5,437,260	21,980,989	404.3%	2024	16,577,105	34,147,893	206.0%	2024	16,577,105	34,147,893	206.0%	2024	0	0	2024	0	0
2025	9,830,701	12,291,838	125.0%	2025	4,798,278	21,969,580	457.9%	2025	14,628,979	34,261,418	234.2%	2025	14,628,979	34,261,418	234.2%	2025	0	0	2025	0	0
2026	8,655,314	12,398,970	143.3%	2026	4,224,582	21,938,511	519.3%	2026	12,879,896	34,337,880	266.6%	2026	12,879,896	34,337,880	266.6%	2026	0	0	2026	0	0
2027	7,589,028	12,452,031	164.1%	2027	3,704,137	21,840,737	589.6%	2027	11,293,825	34,292,768	303.7%	2027	11,293,825	34,292,768	303.7%	2027	0	0	2027	0	0
2028	6,621,510	12,403,218	187.3%	2028	3,231,900	21,590,174	668.0%	2028	9,853,410	33,993,392	345.0%	2028	9,853,410	33,993,392	345.0%	2028	0	0	2028	0	0
2029	5,747,320	12,217,907	212.6%	2029	2,805,216	21,111,594	752.6%	2029	8,552,536	33,329,501	389.7%	2029	8,552,536	33,329,501	389.7%	2029	0	0	2029	0	0
2030	4,967,039	11,959,867	240.8%	2030	2,424,368	20,517,076	846.3%	2030	7,391,407	32,476,943	439.4%	2030	7,391,407	32,476,943	439.4%	2030	0	0	2030	0	0
2031	4,275,621	11,647,909	272.4%	2031	2,086,893	19,854,406	951.4%	2031	6,362,514	31,502,315	495.1%	2031	6,362,514	31,502,315	495.1%	2031	0	0	2031	0	0
2032	3,661,162	11,273,139	307.9%	2032	1,796,981	19,115,952	1069.7%	2032	5,446,143	30,388,831	557.8%	2032	5,446,143	30,388,831	557.8%	2032	0	0	2032	0	0
2033	3,115,359	10,807,489	346.9%	2033	1,520,579	18,248,794	1200.1%	2033	4,635,939	29,056,283	626.8%	2033	4,635,939	29,056,283	626.8%	2033	0	0	2033	0	0
2034	2,637,966	10,230,838	387.8%	2034	1,287,568	17,213,547	1336.9%	2034	3,925,534	27,444,384	699.1%	2034	3,925,534	27,444,384	699.1%	2034	0	0	2034	0	0
2035	2,222,664	9,608,691	432.3%	2035	1,084,863	16,110,248	1485.0%	2035	3,307,527	25,718,939	777.6%	2035	3,307,527	25,718,939	777.6%	2035	0	0	2035	0	0
2036	1,863,155	8,981,776	482.1%	2036	909,389	15,009,023	1650.5%	2036	2,772,544	23,990,799	865.3%	2036	2,772,544	23,990,799	865.3%	2036	0	0	2036	0	0
2037	1,553,805	8,352,366	537.5%	2037	758,399	13,916,367	1835.0%	2037	2,312,204	22,268,623	963.1%	2037	2,312,204	22,268,623	963.1%	2037	0	0	2037	0	0
2038	1,288,739	7,707,186	598.0%	2038	629,022	12,809,305	2036.4%	2038	1,917,761	20,516,491	1069.8%	2038	1,917,761	20,516,491	1069.8%	2038	0	0	2038	0	0
2039	1,062,717	7,017,536	660.3%	2039	518,703	11,638,374	2243.7%	2039	1,581,419	18,655,910	1179.7%	2039	1,581,419	18,655,910	1179.7%	2039	0	0	2039	0	0
2040	870,765	6,348,990	729.1%	2040	425,013	10,504,048	2471.5%	2040	1,295,778	16,853,038	1300.6%	2040	1,295,778	16,853,038	1300.6%	2040	0	0	2040	0	0
2041	708,447	5,727,088	808.4%	2041	345,787	9,446,952	2732.0%	2041	1,054,234	15,174,040	1439.3%	2041	1,054,234	15,174,040	1439.3%	2041	0	0	2041	0	0
2042	572,065	5,128,797	896.5%	2042	279,220	8,432,511	3020.0%	2042	851,286	13,561,309	1594.0%	2042	851,286	13,561,309	1594.0%	2042	0	0	2042	0	0
2043	458,256	4,551,210	993.2%	2043	223,671	7,457,541	3334.2%	2043	681,926	12,008,750	1761.0%	2043	681,926	12,008,750	1761.0%	2043	0	0	2043	0	0
2044	364,504	3,981,295	1092.2%	2044	177,911	6,502,445	3654.9%	2044	542,415	10,483,740	1932.8%	2044	542,415	10,483,740	1932.8%	2044	0	0	2044	0	0
2045	287,728	3,431,399	1192.6%	2045	140,437	5,583,691	3975.9%	2045	428,165	9,015,090	2105.5%	2045	428,165	9,015,090	2105.5%	2045	0	0	2045	0	0
2046	225,386	2,92																			

Lifetime Benefit Period (Inflation)

Table with columns: Virginia Rate Level, Earned Premium, Incurred Claims, Loss Ratios. Rows 1997-2075 and Total.

Lifetime Benefit Period (No Inflation)

Table with columns: Virginia Rate Level, Earned Premium, Incurred Claims, Loss Ratios. Rows 1997-2075 and Total.

Lifetime Benefit Period (All Inflation)

Table with columns: Virginia Rate Level, Earned Premium, Incurred Claims, Loss Ratios. Rows 1997-2075 and Total.

Lifetime Benefit Period (Original Model)

Table with columns: Virginia Rate Level, Earned Premium, Incurred Claims, Loss Ratios. Rows 1997-2075 and Total.

Validation

Table with columns: Virginia Rate Level, Earned Premium, Incurred Claims. Rows 1997-2075 and Total.

All Benefit Periods Combined (Inflation)					All Benefit Periods Combined (No Inflation)					All Benefit Periods Combined (All Inflation)					All Benefit Periods Combined (original model)					Validation																								
Virginia					Virginia					Virginia					Virginia					Virginia																								
Year	Rate Level	Incurred	Loss		Year	Rate Level	Incurred	Loss		Year	Rate Level	Incurred	Loss		Year	Rate Level	Incurred	Loss		Year	Rate Level	Incurred	Loss		Year	Rate Level	Incurred	Loss		Year	Rate Level	Incurred	Loss		Year	Rate Level	Incurred	Loss						
Year	Rate Level	Incurred	Loss		Year	Rate Level	Incurred	Loss		Year	Rate Level	Incurred	Loss		Year	Rate Level	Incurred	Loss		Year	Rate Level	Incurred	Loss		Year	Rate Level	Incurred	Loss		Year	Rate Level	Incurred	Loss		Year	Rate Level	Incurred	Loss						
Year	Rate Level	Incurred	Loss		Year	Rate Level	Incurred	Loss		Year	Rate Level	Incurred	Loss		Year	Rate Level	Incurred	Loss		Year	Rate Level	Incurred	Loss		Year	Rate Level	Incurred	Loss		Year	Rate Level	Incurred	Loss		Year	Rate Level	Incurred	Loss						
1997	150.735	0	0.0%		1997	722.385	0	0.0%		1997	873.120	0	0.0%		1997	873.120	0	0.0%		1997	0	0			1997	0	0		1997	0	0		1997	0	0		1997	0	0					
1998	831.875	336.881	40.5%		1998	4,642.559	0	0.0%		1998	5,474.434	336.881	6.2%		1998	5,474.434	336.881	6.2%		1998	0	0			1998	0	0		1998	0	0		1998	0	0		1998	0	0					
1999	1,555.563	1,202.294	77.3%		1999	9,268.212	0	0.0%		1999	10,823.775	1,202.294	11.1%		1999	10,823.775	1,202.294	11.1%		1999	0	0			1999	0	0		1999	0	0		1999	0	0		1999	0	0					
2000	3,553.065	2,802.214	78.9%		2000	16,760.388	0	0.0%		2000	20,313.452	2,802.214	13.8%		2000	20,313.452	2,802.214	13.8%		2000	0	0			2000	0	0		2000	0	0		2000	0	0		2000	0	0					
2001	7,598.008	6,980.208	91.9%		2001	36,309.395	0	0.0%		2001	33,907.403	6,980.208	20.6%		2001	33,907.403	6,980.208	20.6%		2001	0	0			2001	0	0		2001	0	0		2001	0	0		2001	0	0		2001	0	0	
2002	13,932.780	10,065.212	72.2%		2002	36,695.544	0	0.0%		2002	50,628.324	10,065.212	19.9%		2002	50,628.324	10,065.212	19.9%		2002	0	0			2002	0	0		2002	0	0		2002	0	0		2002	0	0		2002	0	0	
2003	21,948.234	13,236.100	60.3%		2003	49,344.977	204.762	0.4%		2003	71,293.211	13,440.862	18.9%		2003	71,293.211	13,440.862	18.9%		2003	0	0			2003	0	0		2003	0	0		2003	0	0		2003	0	0		2003	0	0	
2004	23,791.948	18,726.051	78.7%		2004	57,940.779	105.931	0.2%		2004	81,732.277	18,831.982	23.0%		2004	81,732.277	18,831.982	23.0%		2004	0	0			2004	0	0		2004	0	0		2004	0	0		2004	0	0		2004	0	0	
2005	24,221.198	24,527.363	101.3%		2005	57,491.639	300.534	0.5%		2005	81,712.837	24,827.897	30.4%		2005	81,712.837	24,827.897	30.4%		2005	0	0			2005	0	0		2005	0	0		2005	0	0		2005	0	0		2005	0	0	
2006	23,503.764	24,485.129	104.2%		2006	55,983.070	317.429	0.6%		2006	79,486.835	24,812.557	31.2%		2006	79,486.835	24,812.557	31.2%		2006	0	0			2006	0	0		2006	0	0		2006	0	0		2006	0	0		2006	0	0	
2007	25,286.074	35,086.695	138.8%		2007	54,449.230	681.444	1.3%		2007	79,735.304	35,768.139	44.9%		2007	79,735.304	35,768.139	44.9%		2007	0	0			2007	0	0		2007	0	0		2007	0	0		2007	0	0		2007	0	0	
2008	28,107.359	43,946.932	156.4%		2008	52,574.369	1,545.603	2.9%		2008	80,681.729	45,492.536	56.4%		2008	80,681.729	45,492.536	56.4%		2008	0	0			2008	0	0		2008	0	0		2008	0	0		2008	0	0		2008	0	0	
2009	27,378.829	45,782.992	167.2%		2009	50,404.052	841.642	1.7%		2009	77,782.881	46,624.634	59.9%		2009	77,782.881	46,624.634	59.9%		2009	0	0			2009	0	0		2009	0	0		2009	0	0		2009	0	0		2009	0	0	
2010	26,416.296	62,201.841	235.5%		2010	48,396.721	2,197.280	4.5%		2010	74,813.018	64,399.121	86.1%		2010	74,813.018	64,399.121	86.1%		2010	0	0			2010	0	0		2010	0	0		2010	0	0		2010	0	0		2010	0	0	
2011	24,991.664	67,891.390	271.7%		2011	48,325.232	2,145.841	4.4%		2011	73,316.896	70,037.231	95.5%		2011	73,316.896	70,037.231	95.5%		2011	0	0			2011	0	0		2011	0	0		2011	0	0		2011	0	0		2011	0	0	
2012	23,315.592	72,755.381	312.0%		2012	53,953.370	2,200.801	4.1%		2012	77,268.962	74,956.182	97.0%		2012	77,268.962	74,956.182	97.0%		2012	0	0			2012	0	0		2012	0	0		2012	0	0		2012	0	0		2012	0	0	
2013	25,988.127	71,734.464	277.0%		2013	52,940.282	4,944.116	9.3%		2013	78,838.409	76,678.580	97.3%		2013	78,838.409	76,678.580	97.3%		2013	0	0			2013	0	0		2013	0	0		2013	0	0		2013	0	0		2013	0	0	
2014	29,393.541	63,002.755	214.3%		2014	47,922.051	7,700.301	16.1%		2014	77,315.591	70,703.056	91.4%		2014	77,315.591	70,703.056	91.4%		2014	0	0			2014	0	0		2014	0	0		2014	0	0		2014	0	0		2014	0	0	
2015	28,880.672	71,083.804	246.1%		2015	52,233.879	10,754.092	20.6%		2015	81,114.551	81,837.896	100.9%		2015	81,114.551	81,837.896	100.9%		2015	0	0			2015	0	0		2015	0	0		2015	0	0		2015	0	0		2015	0	0	
2016	27,176.049	72,346.511	266.2%		2016	55,837.812	14,804.334	26.5%		2016	83,013.861	87,171.445	105.0%		2016	83,013.861	87,171.445	105.0%		2016	0	0			2016	0	0		2016	0	0		2016	0	0		2016	0	0		2016	0	0	
2017	25,697.307	70,772.851	275.4%		2017	53,113.492	24,002.648	45.2%		2017	78,810.798	84,775.499	107.6%		2017	78,810.798	84,775.499	107.6%		2017	0	0			2017	0	0		2017	0	0		2017	0	0		2017	0	0		2017	0	0	
2018	24,306.807	72,156.854	296.9%		2018	48,293.069	42,029.337	87.0%		2018	72,599.876	114,186.191	157.3%		2018	72,599.876	114,186.191	157.3%		2018	0	0			2018	0	0		2018	0	0		2018	0	0		2018	0	0		2018	0	0	
2019	23,009.449	47,075.832	204.6%		2019	43,867.690	48,607.415	110.8%		2019	66,877.139	95,683.247	143.1%		2019	66,877.139	95,683.247	143.1%		2019	0	0			2019	0	0		2019	0	0		2019	0	0		2019	0	0		2019	0	0	
2020	43,677.691	36,455.241	83.5%		2020	17,898.587	51,299.466	286.6%		2020	61,576.278	87,754.707	142.5%		2020	61,576.278	87,754.707	142.5%		2020	0	0			2020	0	0		2020	0	0		2020	0	0		2020	0	0		2020	0	0	
2021	39,458.765	39,736.254	100.7%		2021	16,019.914	55,164.984	344.4%		2021	55,478.679	94,901.238	171.1%		2021	55,478.679	94,901.238	171.1%		2021	0	0			2021	0	0		2021	0	0		2021	0	0		2021	0	0		2021	0	0	
2022	38,194.248	41,447.566	108.5%		2022	17,547.411	56,807.643	323.7%		2022	55,741.658	98,255.009	176.3%		2022	55,741.658	98,255.009	176.3%		2022	0	0			2022	0	0		2022	0	0		2022	0	0		2022	0	0		2022	0	0	
2023	50,078.260	43,110.017	86.1%		2023	14,191.408	58,348.061	411.2%		2023	64,269.668	101,458.079	157.9%		2023	64,269.668	101,458.079	157.9%		2023	0	0			2023	0	0		2023	0	0		2023	0	0		2023	0	0		2023	0	0	
2024	44,889.066	44,664.690	99.5%		2024	12,678.794	59,629.321	470.9%		2024	57,567.859	104,294.011	181.2%		2024	57,567.859	104,294.011	181.2%		2024	0	0			2024	0	0		2024	0	0		2024	0	0		2024	0	0		2024			

Non-Lifetime Benefit Periods (Inflation)

Year	Virginia Rate Level	Incurred Earned Premium	Loss Claims	Ratio
1997	115.968	0	0	0.0%
1998	551.502	107.337	19	0.0%
1999	985.385	620.404	63.0%	
2000	1,947.667	1,279.042	65.7%	
2001	3,975.369	2,429.336	61.1%	
2002	7,430.856	4,609.510	62.0%	
2003	12,204.597	3,660.230	30.0%	
2004	13,292.629	5,980.398	45.0%	
2005	13,695.330	8,695.825	63.5%	
2006	13,284.870	9,349.851	70.4%	
2007	12,797.590	12,030.566	94.0%	
2008	12,353.621	13,701.296	110.9%	
2009	11,989.404	16,588.624	138.2%	
2010	11,458.888	18,739.788	163.5%	
2011	11,171.054	21,242.247	190.2%	
2012	11,628.770	26,429.283	227.3%	
2013	11,699.231	25,765.132	220.2%	
2014	11,327.877	26,374.261	232.8%	
2015	11,282.831	29,413.504	260.7%	
2016	11,607.576	32,926.274	283.7%	
2017	11,447.265	31,726.208	277.2%	
2018	11,205.516	29,260.041	261.1%	
2019	10,628.442	21,250.341	199.9%	
2020	9,619.779	10,986.858	114.2%	
2021	8,521.569	11,672.327	137.0%	
2022	7,547.976	11,876.690	157.3%	
2023	6,677.485	12,049.128	180.4%	
2024	5,904.023	12,166.904	206.1%	
2025	5,210.188	12,291.838	235.9%	
2026	4,587.243	12,398.970	270.3%	
2027	4,022.120	12,452.031	309.6%	
2028	3,509.344	12,403.218	353.4%	
2029	3,046.031	12,217.907	401.1%	
2030	2,632.489	11,959.867	454.3%	
2031	2,266.043	11,647.909	514.0%	
2032	1,940.365	11,273.239	581.0%	
2033	1,651.114	10,807.489	654.6%	
2034	1,398.100	10,230.838	731.8%	
2035	1,177.993	9,608.691	815.7%	
2036	987.456	8,981.776	909.6%	
2037	823.504	8,352.266	1,014.2%	
2038	683.021	7,707.186	1,128.4%	
2039	563.231	7,017.536	1,245.9%	
2040	461.498	6,348.990	1,375.7%	
2041	375.471	5,727.088	1,525.3%	
2042	303.190	5,128.797	1,691.6%	
2043	242.872	4,551.210	1,873.9%	
2044	193.184	3,981.295	2,066.9%	
2045	152.493	3,431.399	2,250.2%	
2046	119.453	2,928.534	2,451.6%	
2047	92.848	2,482.091	2,673.3%	
2048	71.624	2,089.600	2,917.4%	
2049	54.847	1,739.658	3,171.8%	
2050	41.664	1,431.382	3,435.5%	
2051	31.423	1,169.363	3,721.3%	
2052	23.520	949.315	4,036.2%	
2053	17.505	764.786	4,369.0%	
2054	12.970	611.686	4,716.0%	
2055	9.559	484.111	5,064.3%	
2056	7.010	381.044	5,435.4%	
2057	5.113	298.171	5,831.5%	
2058	3.702	231.048	6,240.5%	
2059	2.662	176.822	6,642.3%	
2060	1.893	133.088	7,030.1%	
2061	1.328	98.199	7,394.1%	
2062	914	71.002	7,772.4%	
2063	616	50.201	8,144.6%	
2064	407	34.500	8,471.2%	
2065	262	22.950	8,754.6%	
2066	164	14.722	8,996.6%	
2067	99	9.112	9,226.6%	
2068	57	5.367	9,421.6%	
2069	31	2.974	9,654.3%	
2070	11	753	7118.2%	
2071	0	372	88632.1%	
2072	0	0	0.0%	
2073	0	0	0.0%	
2074	0	0	0.0%	
2075	0	0	0.0%	
Total	293,079,728	605,611,786	206.6%	

Non-Lifetime Benefit Periods (No Inflation)

Year	Virginia Rate Level	Incurred Earned Premium	Loss Claims	Ratio
1997	621.426	0	0	0.0%
1998	3,757.900	0	0	0.0%
1999	7,226.815	0	0	0.0%
2000	12,684.484	0	0	0.0%
2001	19,750.503	0	0	0.0%
2002	28,878.260	0	0	0.0%
2003	38,035.123	0	0	0.0%
2004	39,042.798	0	0	0.0%
2005	38,693.835	0	0	0.0%
2006	37,251.610	0	0	0.0%
2007	35,853.220	0	0	0.0%
2008	33,966.071	0	0	0.0%
2009	32,170.506	61.084	0.2%	
2010	30,542.287	29,703	0.1%	
2011	28,693.819	9,565	0.0%	
2012	27,939.872	90,633	0.3%	
2013	26,506.459	96,597	0.4%	
2014	24,880.771	127,103	0.5%	
2015	24,032.859	129,602	5.4%	
2016	23,659.788	2,609,364	11.0%	
2017	22,543.887	7,578,973	33.6%	
2018	20,908.547	15,619,098	74.7%	
2019	19,213.716	23,929,149	124.5%	
2020	17,390.290	20,614,388	118.5%	
2021	15,404.987	21,688,057	140.8%	
2022	13,644.960	21,865,000	160.2%	
2023	12,071.317	21,987,450	182.1%	
2024	10,673.081	21,980,989	205.9%	
2025	9,418.791	21,969,580	233.3%	
2026	8,292.653	21,938,511	264.6%	
2027	7,271.045	21,840,737	300.4%	
2028	6,344.066	21,590,174	340.3%	
2029	5,506.505	21,111,594	383.4%	
2030	4,758.919	20,517,076	431.1%	
2031	4,096.471	19,854,406	484.7%	
2032	3,507.758	19,115,592	545.0%	
2033	2,984.825	18,248,794	611.4%	
2034	2,527.434	17,213,547	681.1%	
2035	2,129.534	16,110,248	756.5%	
2036	1,785.088	15,009,023	840.8%	
2037	1,488.700	13,916,367	934.8%	
2038	1,234.740	12,809,305	1,037.4%	
2039	1,018.188	11,638,374	1,143.0%	
2040	834.280	10,504,048	1,259.1%	
2041	678.763	9,446,952	1,391.8%	
2042	548.096	8,432,511	1,538.5%	
2043	439.055	7,457,541	1,698.5%	
2044	349.231	6,502,445	1,861.9%	
2045	275.672	5,583,691	2,025.5%	
2046	215.942	4,743,593	2,196.7%	
2047	167.847	3,999,593	2,382.9%	
2048	129.480	3,347,706	2,585.5%	
2049	99.151	2,771,469	2,795.2%	
2050	75.320	2,267,148	3,010.0%	
2051	58.806	1,841,086	3,241.0%	
2052	42.519	1,486,287	3,495.6%	
2053	31.645	1,191,438	3,765.1%	
2054	23.448	948,977	4,047.2%	
2055	17.281	748,463	4,311.1%	
2056	12.673	587,276	4,634.0%	
2057	9.243	458,445	4,959.8%	
2058	6.693	354,648	5,298.8%	
2059	4.812	271,282	5,637.2%	
2060	3.422	204,234	5,967.7%	
2061	2.401	150,734	6,278.4%	
2062	1.651	109,076	6,605.0%	
2063	1.114	77,206	6,929.0%	
2064	736	53,129	7,216.4%	
2065	474	35,383	7,466.4%	
2066	296	22,725	7,681.8%	
2067	179	14,092	7,893.6%	
2068	103	8,327	8,086.2%	
2069	56	4,638	8,238.5%	
2070	19	1,366	7,146.6%	
2071	1	674	88922.9%	
2072	0	0	0.0%	
2073	0	0	0.0%	
2074	0	0	0.0%	
2075	0	0	0.0%	
Total	712,231,918	506,095,155	71.1%	

Non-Lifetime Benefit Periods (All Inflation)

Year	Virginia Rate Level	Incurred Earned Premium	Loss Claims	Ratio
1997	737.394	0	0	0.0%
1998	4,309.402	107.337	2.5%	
1999	8,212.200	620.404	7.6%	
2000	14,632.151	1,279.042	8.7%	
2001	23,728.871	2,429.336	10.2%	
2002	36,309.116	4,609.510	12.7%	
2003	50,239.720	3,660.230	7.3%	
2004	52,335.427	5,980.398	11.4%	
2005	52,389.165	8,695.825	16.6%	
2006	50,536.480	9,349.851	18.5%	
2007	48,450.819	12,030.566	24.8%	
2008	46,319.692	13,701.296	29.6%	
2009	44,159.910	16,629.707	37.7%	
2010	42,001.175	18,769.491	44.7%	
2011	39,864.473	21,251.812	53.3%	
2012	39,568.642	26,519.916	67.0%	
2013	38,205.691	25,861.729	67.7%	
2014	36,208.648	26,501.364	73.2%	
2015	35,315.691	30,711.106	87.0%	
2016	35,267.364	35,535.639	100.8%	
2017	33,991.148	39,305.182	115.6%	
2018	32,114.063	44,879.139	139.7%	
2019	29,842.158	45,179.490	151.4%	
2020	27,010.069	31,601.246	117.0%	
2021	23,926.556	33,360.385	139.4%	
2022	21,192.936	33,742.180	159.2%	
2023	18,748.802	34,036.578	181.5%	
2024	16,577.105	34,147.893	206.0%	
2025	14,628.979	34,261.418	234.2%	
2026	12,879.896	34,337.880	266.6%	
2027	11,293.165	34,292.768	303.7%	
2028	9,853.410	33,993.392	345.0%	
2029	8,552.536	33,329.501	389.7%	
2030	7,391.407	32,476.943	439.4%	
2031	6,362.514	31,502.315	495.1%	
2032	5,448.143	30,388.831	557.8%	
2033	4,635.939	29,056.283	626.8%	
2034	3,925.534	27,444.384	699.1%	
2035	3,307.527	25,718.939	777.6%	
2036	2,772.544	23,990.799	865.3%	
2037	2,312.204	22,266.621	963.1%	
2038	1,917.761	20,516.491	1,069.8%	
2039	1,581.419	18,655.910	1,179.7%	
2040	1,295.778	16,853,038	1,300.6%	
2041	1,054.234	15,174,040	1,439.3%	
2042	851.286	13,561,309	1,594.0%	
2043	681.926	12,008,750	1,761.0%	
2044	542.415	10,483,740	1,932.8%	
2045	428.165	9,015,090	2,105.5%	
2046	335.395	7,672,127	2,287.5%	
2047	260.695	6,481,684	2,486.3%	
2048	201.104	5,437,306	2,703.7%	
2049	153.998	4,511,127	2,929.3%	
2050	116.984	3,698,530	3,161.6%	
2051	88.230	3,010,449	3,412.1%	
2052	66.039	2,435,602	3,688.1%	
2053	49.149	1,956,224	3,980.2%	
2054	36.418	1,560,663	4,285.4%	
2055	26.840	1,232,574	4,592.2%	
2056	19.684	968,320	4,919.4%	
2057	14.356	756,61		

**Lifetime Benefit Period (Inflation)**

Year	Virginia		
	Rate Level	Incurred	Loss
	Rate Level	Rate Level	Rate Level
	Earned Premium	Claims	Ratios
1997	2,682.00	0	0.0%
1998	1,699.136	229,543	13.5%
1999	3,641,501	581,891	16.0%
2000	10,613,266	1,523,171	14.4%
2001	24,781,011	4,550,872	18.4%
2002	46,283,873	5,455,702	11.8%
2003	72,490,046	9,575,870	13.2%
2004	78,538,553	12,745,653	16.2%
2005	79,599,996	15,831,538	19.9%
2006	77,254,479	15,135,278	19.6%
2007	74,598,053	20,056,129	30.9%
2008	72,684,556	30,245,637	41.6%
2009	70,908,416	29,214,368	41.2%
2010	68,682,569	43,462,053	63.3%
2011	64,169,877	46,494,143	72.7%
2012	56,910,180	46,326,098	81.4%
2013	51,973,553	45,969,332	88.4%
2014	49,848,573	36,628,494	73.5%
2015	45,674,846	41,670,300	91.2%
2016	41,035,879	39,420,237	96.1%
2017	37,878,600	39,046,643	103.1%
2018	34,810,336	42,896,812	123.2%
2019	32,610,881	25,825,491	79.2%
2020	30,329,186	25,468,383	84.0%
2021	27,591,371	28,963,927	105.0%
2022	24,985,722	29,570,877	118.4%
2023	22,535,574	31,060,890	137.8%
2024	20,292,895	32,497,786	160.1%
2025	18,236,052	33,992,003	186.4%
2026	16,345,384	35,451,023	216.9%
2027	14,602,298	36,768,127	251.8%
2028	13,002,950	37,821,328	290.9%
2029	11,533,821	38,549,845	334.2%
2030	10,201,716	39,101,259	383.3%
2031	8,988,701	39,439,837	438.8%
2032	7,882,846	39,487,342	500.9%
2033	6,868,892	39,140,218	569.9%
2034	5,957,042	38,385,599	644.4%
2035	5,145,869	37,360,957	726.0%
2036	4,422,851	36,148,070	817.3%
2037	3,781,984	34,720,421	916.3%
2038	3,213,957	33,012,002	1027.1%
2039	2,715,406	30,945,899	1139.6%
2040	2,278,890	28,813,406	1264.3%
2041	1,897,791	26,713,101	1407.6%
2042	1,568,066	24,556,549	1566.0%
2043	1,282,649	22,287,581	1737.6%
2044	1,039,603	19,909,914	1915.1%
2045	837,224	17,561,248	2097.6%
2046	669,262	15,331,399	2290.8%
2047	530,675	13,296,179	2505.5%
2048	417,302	11,432,554	2739.7%
2049	325,531	9,709,842	2982.8%
2050	251,941	8,182,124	3247.6%
2051	193,517	6,842,637	3535.9%
2052	148,971	5,670,472	3806.4%
2053	113,524	4,654,736	4096.6%
2054	85,594	3,761,336	4394.4%
2055	64,153	3,013,300	4697.1%
2056	47,621	2,399,829	5039.4%
2057	34,945	1,897,697	5430.5%
2058	25,284	1,486,434	5870.0%
2059	17,986	1,142,551	6352.5%
2060	12,523	861,681	6881.0%
2061	8,494	639,596	7530.2%
2062	5,555	467,126	8409.5%
2063	3,459	334,844	9683.8%
2064	1,988	235,749	11860.1%
2065	1,037	163,216	15744.0%
2066	434	110,487	25458.7%
2067	73	73,137	99825.5%
2068	6	34,862	589695.3%
2069	0	0	0.0%
2070	0	0	0.0%
2071	0	0	0.0%
2072	0	0	0.0%
2073	0	0	0.0%
2074	0	0	0.0%
2075	0	0	0.0%
Total	1,367,454,030	1,484,618,836	108.6%

**Lifetime Benefit Period (No Inflation)**

Year	Virginia		
	Rate Level	Incurred	Loss
	Rate Level	Rate Level	Rate Level
	Earned Premium	Claims	Ratios
1997	1,123,640	0	0.0%
1998	7,820,260	0	0.0%
1999	19,107,693	0	0.0%
2000	40,879,848	0	0.0%
2001	67,827,120	0	0.0%
2002	94,242,400	0	0.0%
2003	118,418,561	204,762	0.2%
2004	117,443,134	105,931	0.1%
2005	116,257,095	300,534	0.3%
2006	114,044,588	317,429	0.3%
2007	112,135,205	681,444	0.6%
2008	109,358,313	1,545,603	1.4%
2009	105,807,513	780,559	0.7%
2010	102,443,761	2,167,577	2.1%
2011	94,798,563	2,136,276	2.3%
2012	82,227,538	2,110,168	2.6%
2013	74,057,697	4,847,519	6.5%
2014	70,076,901	7,573,198	10.8%
2015	62,997,567	9,456,490	15.0%
2016	53,585,057	12,215,370	22.8%
2017	47,326,684	16,423,675	34.7%
2018	42,548,134	26,410,239	62.1%
2019	38,283,336	24,678,266	64.5%
2020	35,604,755	30,685,077	86.2%
2021	32,390,714	33,476,927	103.4%
2022	29,331,830	34,941,953	119.1%
2023	26,455,493	36,360,611	137.4%
2024	23,822,715	37,648,332	158.0%
2025	21,408,097	38,955,142	182.0%
2026	19,188,559	40,234,795	209.7%
2027	17,142,714	41,378,654	241.4%
2028	15,264,730	42,245,900	276.8%
2029	13,540,056	42,733,767	315.6%
2030	11,976,239	43,017,464	359.2%
2031	10,552,229	43,100,310	408.4%
2032	9,254,017	42,911,070	463.7%
2033	8,063,692	42,335,327	525.0%
2034	6,993,231	41,292,575	590.5%
2035	6,040,960	39,961,260	661.5%
2036	5,192,178	38,448,067	740.5%
2037	4,438,791	36,734,855	827.6%
2038	3,773,016	34,752,150	921.1%
2039	3,187,734	32,407,227	1016.6%
2040	2,675,288	30,001,818	1121.4%
2041	2,227,899	27,655,938	1241.3%
2042	1,840,821	25,279,813	1373.3%
2043	1,505,798	22,822,302	1515.7%
2044	1,220,435	20,288,910	1662.4%
2045	982,854	17,808,028	1811.9%
2046	785,676	15,429,400	1963.8%
2047	622,982	13,330,115	2139.7%
2048	489,889	11,419,016	2330.9%
2049	382,155	9,655,440	2529.2%
2050	295,764	8,117,802	2744.7%
2051	227,179	6,768,145	2979.2%
2052	174,883	5,542,647	3169.3%
2053	133,388	4,551,210	3412.0%
2054	100,482	3,680,186	3662.5%
2055	75,312	2,949,136	3915.9%
2056	55,905	2,348,933	4201.7%
2057	41,024	1,857,968	4529.0%
2058	29,682	1,455,442	4903.5%
2059	21,115	1,119,273	5301.0%
2060	14,701	844,352	5743.6%
2061	9,971	626,462	6282.7%
2062	6,521	457,259	7012.1%
2063	4,060	327,598	8068.0%
2064	2,334	230,165	9863.5%
2065	1,217	158,974	13062.7%
2066	509	107,275	21056.0%
2067	86	70,749	82257.2%
2068	7	30,363	435472.6%
2069	0	0	0.0%
2070	0	0	0.0%
2071	0	0	0.0%
2072	0	0	0.0%
2073	0	0	0.0%
2074	0	0	0.0%
2075	0	0	0.0%
Total	2,010,149,612	1,120,531,423	55.7%

**Lifetime Benefit Period (All Inflation)**

Year	Virginia		
	Rate Level	Incurred	Loss
	Rate Level	Rate Level	Rate Level
	Earned Premium	Claims	Ratios
1997	1,391,660	0	0.0%
1998	9,519,396	229,543	2.4%
1999	22,749,193	581,891	2.6%
2000	51,292,914	1,523,171	3.0%
2001	92,608,130	4,550,872	4.9%
2002	140,526,273	5,455,702	3.9%
2003	190,908,608	9,780,632	5.1%
2004	195,981,687	12,851,585	6.6%
2005	195,857,091	16,132,072	8.2%
2006	191,299,068	15,462,707	8.1%
2007	186,733,258	23,737,573	12.7%
2008	182,042,869	31,791,240	17.5%
2009	176,715,929	29,994,927	17.0%
2010	171,126,330	45,629,630	26.7%
2011	158,958,440	48,785,419	30.7%
2012	139,137,718	48,436,267	34.8%
2013	126,031,249	50,816,851	40.3%
2014	119,925,474	44,201,692	36.9%
2015	108,672,413	51,126,790	47.0%
2016	94,620,936	51,635,806	54.6%
2017	85,205,284	55,470,317	65.1%
2018	77,358,470	60,307,052	89.6%
2019	70,894,217	50,503,757	71.2%
2020	65,933,941	56,153,461	85.2%
2021	59,982,085	61,540,853	102.6%
2022	54,317,552	64,512,829	118.8%
2023	48,991,067	67,421,501	137.6%
2024	44,115,610	70,146,118	159.0%
2025	39,644,148	72,947,145	184.0%
2026	35,333,943	75,685,819	213.0%
2027	31,744,572	78,146,781	246.2%
2028	28,267,680	80,607,229	283.2%
2029	25,073,878	81,283,612	324.2%
2030	22,177,955	82,118,724	370.3%
2031	19,540,930	82,540,147	422.4%
2032	17,136,864	82,398,412	480.8%
2033	14,932,583	81,484,545	545.7%
2034	12,950,273	79,678,534	615.3%
2035	11,186,828	77,322,217	691.2%
2036	9,615,029	74,596,137	775.8%
2037	8,219,885	71,455,275	869.3%
2038	6,986,983	67,764,152	969.9%
2039	5,903,140	63,353,126	1073.2%
2040	4,954,178	58,814,864	1187.2%
2041	4,125,690	54,369,039	1317.8%
2042	3,408,886	49,836,362	1462.0%
2043	2,788,407	45,109,884	1617.8%
2044	2,260,037	40,198,824	1778.7%
2045	1,820,079	35,369,276	1943.3%
2046	1,454,937	30,760,800	2114.2%
2047	1,133,657	26,626,294	2308.0%
2048	907,192	22,851,670	2518.9%
2049	707,686	19,375,282	2737.8%
2050	547,705	16,299,927	2976.0%
2051	420,696	13,610,782	3235.3%
2052	323,854	11,213,119	3462.4%
2053	247,012	9,205,946	3726.9%
2054	186,076	7,441,522	3999.2%
2055	139,464	5,962,436	4275.2%
2056	103,526	4,748,761	4587.0%
2057	75,969	3,755,665	4943.7%
2058	54,965	2,941,876	5352.3%
2059	39,101	2,261,824	5784.6%
2060	27,223	1,706,033	6266.8%
2061	18,465	1,266,058	6856.5%
2062	12,076	924,384	7654.9%
2063	7,519	662,542	8811.3%
2064	4,321	465,914	10781.9%
2065	2,254	322,190	14296.1%
2066	943	217,762	23081.2%
2067	159	143,886	90338.5%
2068	13	65,225	505

**All Benefit Periods Combined (Inflation)**

Year	Virginia		
	Rate Level	Incurred	Loss
	Earned Premium	Claims	Ratios
1997	383,987	0	0.0%
1998	2,250,638	336,881	15.0%
1999	4,626,886	1,202,294	26.0%
2000	12,960,934	2,802,214	22.3%
2001	28,756,379	6,980,208	24.3%
2002	53,714,728	10,065,212	18.7%
2003	84,694,643	13,236,100	15.6%
2004	91,831,181	18,726,051	20.4%
2005	93,295,326	24,527,363	26.3%
2006	90,539,349	24,485,129	27.0%
2007	87,395,652	35,086,695	40.1%
2008	85,038,176	43,946,932	51.7%
2009	82,897,820	45,782,992	55.2%
2010	80,141,457	62,201,841	77.6%
2011	75,340,932	67,891,390	90.1%
2012	68,538,950	72,755,381	106.2%
2013	63,672,784	71,734,464	112.7%
2014	61,176,450	63,002,755	103.0%
2015	56,957,677	71,083,804	124.8%
2016	52,643,455	72,346,511	137.4%
2017	49,325,860	70,772,851	143.5%
2018	46,015,852	72,156,854	156.8%
2019	43,239,323	47,075,832	108.9%
2020	39,948,965	36,455,241	91.3%
2021	36,112,940	39,796,254	110.0%
2022	32,533,699	41,467,566	127.4%
2023	29,213,058	43,110,177	147.6%
2024	26,196,919	44,664,690	170.5%
2025	23,446,240	46,283,841	197.4%
2026	20,932,627	47,849,993	228.6%
2027	18,624,418	49,220,157	264.3%
2028	16,512,294	50,224,546	304.2%
2029	14,579,852	50,767,752	348.2%
2030	12,834,205	51,061,127	397.9%
2031	11,254,745	51,087,746	453.9%
2032	9,823,233	50,760,582	516.7%
2033	8,520,006	49,956,707	586.3%
2034	7,355,142	48,616,796	661.0%
2035	6,323,862	46,969,648	742.7%
2036	5,410,307	45,129,846	834.1%
2037	4,604,598	43,072,676	934.8%
2038	3,896,988	40,719,188	1,049.8%
2039	3,278,637	37,963,435	1,157.9%
2040	2,740,388	35,162,036	1,281.3%
2041	2,273,262	32,440,190	1,427.0%
2042	1,871,255	29,685,347	1,586.4%
2043	1,525,521	26,838,791	1,759.3%
2044	1,232,787	23,891,209	1,938.0%
2045	989,718	20,992,646	2,121.1%
2046	788,714	18,259,933	2,315.2%
2047	623,522	15,778,270	2,530.5%
2048	488,927	13,522,254	2,765.7%
2049	380,378	11,449,500	3,010.0%
2050	293,605	9,613,506	3,274.3%
2051	224,941	8,012,000	3,561.8%
2052	172,491	6,619,788	3,837.8%
2053	131,129	5,419,521	4,133.0%
2054	98,564	4,373,022	4,436.7%
2055	73,712	3,497,411	4,744.7%
2056	54,632	2,780,873	5,090.2%
2057	40,058	2,195,867	5,481.7%
2058	28,968	1,717,482	5,925.2%
2059	20,648	1,319,374	6,389.8%
2060	14,416	994,770	6,900.6%
2061	9,822	737,796	7,511.8%
2062	6,468	538,128	8,319.5%
2063	4,075	385,145	9,451.0%
2064	2,395	270,249	11,283.9%
2065	1,299	186,165	14,333.4%
2066	598	125,210	20,951.0%
2067	172	82,249	47,813.0%
2068	63	40,229	63,950.0%
2069	31	2,974	964.3%
2070	11	753	7118.2%
2071	0	372	88632.1%
2072	0	0	0.0%
2073	0	0	0.0%
2074	0	0	0.0%
2075	0	0	0.0%
<b>Total</b>	<b>1,660,533,758</b>	<b>2,090,230,622</b>	<b>125.9%</b>

**All Benefit Periods Combined (No Inflation)**

Year	Virginia		
	Rate Level	Incurred	Loss
	Earned Premium	Claims	Ratios
1997	1,745,066	0	0.0%
1998	11,578,160	0	0.0%
1999	26,334,508	0	0.0%
2000	53,364,132	0	0.0%
2001	87,577,623	0	0.0%
2002	123,120,660	0	0.0%
2003	156,453,685	204,762	0.1%
2004	156,485,932	105,931	0.1%
2005	154,950,929	300,534	0.2%
2006	151,296,199	317,429	0.2%
2007	147,788,425	681,444	0.5%
2008	143,324,384	1,545,603	1.1%
2009	137,978,019	841,642	0.6%
2010	132,986,048	2,197,280	1.7%
2011	123,481,982	2,145,841	1.7%
2012	110,167,410	2,200,801	2.0%
2013	100,564,156	4,944,116	4.9%
2014	94,957,672	7,700,301	8.1%
2015	87,030,427	10,754,092	12.4%
2016	77,244,845	14,804,334	19.2%
2017	69,870,571	24,002,648	34.4%
2018	63,456,681	42,029,337	66.2%
2019	57,497,052	48,607,415	84.5%
2020	52,995,045	51,299,466	96.8%
2021	47,795,701	55,164,984	115.4%
2022	42,976,790	56,807,643	132.2%
2023	38,526,810	58,348,061	151.4%
2024	34,495,796	59,629,321	172.9%
2025	30,826,887	60,924,721	197.6%
2026	27,481,212	62,173,706	226.2%
2027	24,413,319	63,219,391	259.0%
2028	21,608,796	63,836,074	295.4%
2029	19,046,561	63,845,361	335.2%
2030	16,735,158	63,534,540	379.6%
2031	14,648,700	62,954,716	429.8%
2032	12,764,776	62,056,662	486.0%
2033	11,048,516	60,584,120	548.3%
2034	9,520,666	58,506,122	614.5%
2035	8,170,493	56,071,598	686.3%
2036	6,977,265	53,457,090	766.2%
2037	5,927,489	50,651,222	854.5%
2038	5,007,756	47,561,455	949.8%
2039	4,205,922	44,045,601	1,047.2%
2040	3,509,568	40,505,866	1,154.2%
2041	2,906,662	37,102,890	1,276.5%
2042	2,388,916	33,712,324	1,411.2%
2043	1,944,812	30,279,843	1,557.0%
2044	1,569,666	26,791,355	1,706.8%
2045	1,258,526	23,391,719	1,858.7%
2046	1,001,618	20,172,994	2,014.0%
2047	790,829	17,329,708	2,191.3%
2048	619,369	14,766,721	2,384.2%
2049	481,305	12,436,909	2,584.0%
2050	371,084	10,384,950	2,798.5%
2051	283,985	8,609,231	3,031.6%
2052	217,402	7,028,933	3,233.1%
2053	165,033	5,742,648	3,479.7%
2054	123,930	4,629,163	3,735.3%
2055	92,593	3,697,599	3,993.4%
2056	68,578	2,936,209	4,281.6%
2057	50,167	2,316,413	4,608.2%
2058	36,375	1,810,090	4,976.2%
2059	25,927	1,390,554	5,363.4%
2060	18,123	1,048,586	5,785.9%
2061	12,372	777,196	6,281.9%
2062	8,172	566,334	6,929.8%
2063	5,175	404,805	7,822.8%
2064	3,070	283,204	9,238.0%
2065	1,691	194,357	11,494.3%
2066	805	130,000	16,142.9%
2067	265	84,841	32,071.3%
2068	110	38,690	35,187.5%
2069	56	4,638	8,328.5%
2070	11	1,366	71,146.6%
2071	1	674	88,922.9%
2072	0	0	0.0%
2073	0	0	0.0%
2074	0	0	0.0%
2075	0	0	0.0%
<b>Total</b>	<b>2,722,381,530</b>	<b>1,626,626,578</b>	<b>59.8%</b>

**All Benefit Periods Combined (All Inflation)**

Year	Virginia		
	Rate Level	Incurred	Loss
	Earned Premium	Claims	Ratios
1997	2,129,054	0	0.0%
1998	13,828,797	336,881	2.4%
1999	30,961,394	1,202,294	3.9%
2000	65,925,065	2,802,214	4.3%
2001	116,334,002	6,980,208	6.0%
2002	176,835,389	10,065,212	5.7%
2003	241,148,328	13,440,862	5.6%
2004	248,317,114	18,831,982	7.6%
2005	248,246,255	24,827,897	10.0%
2006	241,835,548	24,812,557	10.3%
2007	235,184,077	35,768,139	15.2%
2008	228,362,561	45,492,536	19.9%
2009	220,875,839	46,624,634	21.1%
2010	213,127,505	64,399,121	30.2%
2011	198,822,913	70,037,231	35.2%
2012	178,706,360	74,956,182	41.9%
2013	164,236,940	76,678,580	46.7%
2014	156,134,121	70,703,056	45.3%
2015	143,988,103	81,837,896	56.8%
2016	129,888,300	87,171,445	67.1%
2017	119,196,431	94,775,499	79.5%
2018	109,472,533	114,186,191	104.3%
2019	100,736,375	95,683,247	95.0%
2020	92,944,010	87,754,707	94.4%
2021	85,908,642	94,901,238	111.3%
2022	75,510,488	98,255,009	130.1%
2023	67,739,868	101,458,079	149.8%
2024	60,692,715	104,294,011	171.8%
2025	54,273,127	107,208,562	197.5%
2026	48,413,839	110,023,699	227.3%
2027	43,037,737	112,439,549	261.3%
2028	38,121,090	114,060,620	299.2%
2029	33,626,413	114,613,113	340.8%
2030	29,569,363	114,595,667	387.5%
2031	25,903,445	114,042,462	440.3%
2032	22,585,007	112,787,243	499.4%
2033	19,568,522	110,540,828	564.9%
2034	16,875,808	107,122,918	634.8%
2035	14,494,355	103,041,156	710.9%
2036	12,387,573	98,586,936	795.9%
2037	10,532,089	93,721,899	889.9%
2038	8,904,744	88,280,643	991.4%
2039	7,484,560	82,009,035	1,095.7%
2040	6,249,956	75,667,902	1,210.7%
2041	5,179,924	69,543,079	1,342.6%
2042	4,260,172	63,397,671	1,488.1%
2043	3,470,333	57,118,634	1,645.9%
2044	2,802,453	50,682,564	1,808.5%
2045	2,248,244	44,384,366	1,974.2%
2046	1,790,332	38,432,927	2,146.7%
2047	1,414,351	33,107,978	2,340.9%
2048	1,108,296	28,288,975	2,552.5%
2049	861,683	23,886,409	2,772.1%
2050	664,689	19,998,456	3,008.7%
2051	508,926	16,621,231	3,265.9%
2052	389,893	13,648,721	3,500.6%
2053	296,161	11,162,170	3,768.9%
2054	222,494	9,002,185	4,046.0%
2055	166,304	7,195,010	4,326.4%
2056	123,210	5,717,082	4,640.1%
2057	90,325	4,512,280	4,995.6%
2058	65,361	3,527,572	5,397.1%
2059	46,575	2,709,928	5,818.4%
2060	32,539	2,043,355	6,279.7%
2061	22,194	1,514,991	6,826.2%
2062	14,641	1,104,462	7,543.8%
2063	9,250	789,950	8,540.1%
2064	5,465	553,543	10,129.4%
2065	2,990	380,522	12,727.7%

**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	1,036	1,104	94%
13	36,935	1,024	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%

**Non-Lifetime Benefit Periods (Inflation)**

**Non-Lifetime Benefit Periods (No Inflation)**

**Non-Lifetime Benefit Periods (All Inflation)**

**Non-Lifetime Benefit Periods (original model)**

**Validation**

Year	Earned Premium	Incurred Claims	Loss Ratios	Year	Earned Premium	Incurred Claims	Loss Ratios	Year	Earned Premium	Incurred Claims	Loss Ratios	Year	Earned Premium	Incurred Claims	Loss Ratios	Year	Earned Premium	Incurred Claims
1997	77,555	12,272	15.8%	1997	415,588	64,043	15.4%	1997	493,144	76,315	15.5%	1997	0	0	0	1997	0	0
1998	364,697	74,625	20.5%	1998	2,486,284	492,626	19.8%	1998	2,850,981	567,251	19.9%	1998	2,850,981	567,251	19.9%	1998	0	0
1999	576,068	143,584	24.9%	1999	4,364,742	1,052,040	24.1%	1999	4,940,810	1,195,625	24.2%	1999	4,940,810	1,195,625	24.2%	1999	0	0
2000	1,028,030	282,866	27.5%	2000	7,061,332	2,036,511	28.8%	2000	8,089,363	2,319,177	28.7%	2000	8,089,363	2,319,177	28.7%	2000	0	0
2001	2,030,388	592,940	29.2%	2001	10,361,814	3,317,021	32.0%	2001	12,392,203	3,909,961	31.6%	2001	12,392,203	3,909,961	31.6%	2001	0	0
2002	3,714,432	1,117,657	30.1%	2002	14,687,720	4,947,179	33.7%	2002	18,402,153	6,064,836	33.0%	2002	18,402,153	6,064,836	33.0%	2002	0	0
2003	6,189,361	1,968,555	31.8%	2003	19,230,122	6,971,813	36.3%	2003	25,419,483	8,940,368	35.2%	2003	25,419,483	8,940,368	35.2%	2003	0	0
2004	7,095,461	2,583,600	36.4%	2004	19,947,455	8,175,586	41.0%	2004	27,042,916	10,759,186	39.8%	2004	27,042,916	10,759,186	39.8%	2004	0	0
2005	6,903,052	2,903,268	42.1%	2005	18,649,309	8,761,896	47.0%	2005	25,552,362	11,665,163	45.7%	2005	25,552,362	11,665,163	45.7%	2005	0	0
2006	6,180,797	3,035,957	49.1%	2006	16,706,971	9,017,763	54.0%	2006	22,887,668	12,053,720	52.7%	2006	22,887,668	12,053,720	52.7%	2006	0	0
2007	5,463,482	3,084,757	56.5%	2007	14,815,479	9,062,755	61.2%	2007	20,278,961	12,147,512	59.9%	2007	20,278,961	12,147,512	59.9%	2007	0	0
2008	4,806,740	3,059,480	63.6%	2008	13,010,653	8,930,551	68.6%	2008	17,817,393	11,990,031	67.3%	2008	17,817,393	11,990,031	67.3%	2008	0	0
2009	4,204,215	3,004,519	71.5%	2009	11,361,488	8,845,309	77.9%	2009	15,565,703	11,849,828	76.1%	2009	15,565,703	11,849,828	76.1%	2009	0	0
2010	3,653,277	2,955,632	80.9%	2010	9,859,671	8,644,661	87.7%	2010	13,512,948	11,600,293	85.8%	2010	13,512,948	11,600,293	85.8%	2010	0	0
2011	3,152,781	2,894,284	91.8%	2011	8,500,167	8,331,578	98.0%	2011	11,652,948	11,225,862	96.3%	2011	11,652,948	11,225,862	96.3%	2011	0	0
2012	2,701,598	2,863,023	106.0%	2012	7,278,429	8,051,000	110.6%	2012	9,980,026	10,914,023	109.4%	2012	9,980,026	10,914,023	109.4%	2012	0	0
2013	2,298,197	2,690,607	117.1%	2013	6,189,170	7,419,236	119.9%	2013	8,487,367	10,109,844	119.1%	2013	8,487,367	10,109,844	119.1%	2013	0	0
2014	1,940,551	2,400,071	123.7%	2014	5,226,011	6,679,003	127.8%	2014	7,166,562	9,079,074	126.7%	2014	7,166,562	9,079,074	126.7%	2014	0	0
2015	1,626,270	2,126,875	130.8%	2015	4,381,708	6,020,089	137.4%	2015	6,007,978	8,146,964	135.6%	2015	6,007,978	8,146,964	135.6%	2015	0	0
2016	1,352,717	1,909,891	141.2%	2016	3,648,251	5,461,972	149.7%	2016	5,000,968	7,371,863	147.4%	2016	5,000,968	7,371,863	147.4%	2016	0	0
2017	1,116,945	1,714,411	153.5%	2017	3,016,872	4,934,485	163.6%	2017	4,133,817	6,648,897	160.8%	2017	4,133,817	6,648,897	160.8%	2017	0	0
2018	915,685	1,330,927	147.2%	2018	2,478,198	4,434,954	179.0%	2018	3,393,883	5,965,881	175.8%	2018	3,393,883	5,965,881	175.8%	2018	0	0
2019	745,638	1,361,167	182.6%	2019	2,024,688	3,970,288	196.1%	2019	2,770,325	5,331,455	192.4%	2019	2,770,325	5,331,455	192.4%	2019	0	0
2020	603,018	1,200,973	199.2%	2020	1,644,020	3,518,444	214.0%	2020	2,247,038	4,719,417	210.0%	2020	2,247,038	4,719,417	210.0%	2020	0	0
2021	484,507	1,051,728	217.1%	2021	1,327,287	3,090,726	232.9%	2021	1,811,794	4,142,454	228.6%	2021	1,811,794	4,142,454	228.6%	2021	0	0
2022	386,959	916,227	236.8%	2022	1,066,030	2,702,517	253.5%	2022	1,452,988	3,618,744	249.1%	2022	1,452,988	3,618,744	249.1%	2022	0	0
2023	307,449	792,002	257.6%	2023	852,348	2,346,299	275.3%	2023	1,159,797	3,138,300	270.6%	2023	1,159,797	3,138,300	270.6%	2023	0	0
2024	243,221	678,168	278.8%	2024	678,819	2,023,129	298.0%	2024	922,040	2,701,297	293.0%	2024	922,040	2,701,297	293.0%	2024	0	0
2025	191,763	571,702	298.1%	2025	538,848	1,722,504	319.7%	2025	730,611	2,294,206	314.0%	2025	730,611	2,294,206	314.0%	2025	0	0
2026	150,729	479,010	317.8%	2026	426,324	1,464,855	343.6%	2026	577,053	1,943,865	336.9%	2026	577,053	1,943,865	336.9%	2026	0	0
2027	118,064	404,203	342.4%	2027	336,072	1,252,388	372.7%	2027	454,136	1,656,591	364.8%	2027	454,136	1,656,591	364.8%	2027	0	0
2028	92,119	343,269	372.6%	2028	263,919	1,071,708	406.1%	2028	356,038	1,414,977	397.4%	2028	356,038	1,414,977	397.4%	2028	0	0
2029	71,600	291,086	406.5%	2029	206,509	913,771	442.5%	2029	278,109	1,204,857	433.2%	2029	278,109	1,204,857	433.2%	2029	0	0
2030	55,448	245,858	443.4%	2030	161,033	776,945	482.5%	2030	216,480	1,022,802	472.5%	2030	216,480	1,022,802	472.5%	2030	0	0
2031	42,790	206,725	483.1%	2031	125,175	657,724	525.4%	2031	167,965	864,449	514.7%	2031	167,965	864,449	514.7%	2031	0	0
2032	32,822	172,983	525.4%	2032	97,041	554,443	571.4%	2032	129,963	727,425	559.7%	2032	129,963	727,425	559.7%	2032	0	0
2033	25,268	144,141	570.4%	2033	75,067	465,757	620.5%	2033	100,335	609,898	607.9%	2033	100,335	609,898	607.9%	2033	0	0
2034	19,360	119,688	618.2%	2034	57,983	390,226	673.0%	2034	77,343	509,914	659.3%	2034	77,343	509,914	659.3%	2034	0	0
2035	14,818	99,147	669.1%	2035	44,751	326,406	729.4%	2035	59,569	425,553	714.4%	2035	59,569	425,553	714.4%	2035	0	0
2036	11,339	81,999	723.2%	2036	34,338	272,835	790.0%	2036	45,877	354,834	773.4%	2036	45,877	354,834	773.4%	2036	0	0
2037	8,639	67,157	777.4%	2037	26,396	204,173	849.3%	2037	35,035	291,330	831.5%	2037	35,035	291,330	831.5%	2037	0	0
2038	6,519	53,903	826.8%	2038	19,690	176,596	896.9%	2038	26,209	230,499	879.5%	2038	26,209	230,499	879.5%	2038	0	0
2039	4,906	42,943	875.3%	2039	14,519	136,251	938.4%	2039	19,425	179,194	922.5%	2039	19,425	179,194	922.5%	2039	0	0
2040	3,721	34,583	929.5%	2040	10,802	106,641	987.2%	2040	14,523	141,225	972.4%	2040	14,523	141,225	972.4%	2040	0	0
2041	2,844	28,109	988.3%	2041	8,095	84,148	1039.4%	2041	10,940	112,257	1026.1%	2041	10,940	112,257	1026.1%	2041	0	0
2042	2,179	22,793	1045.9%	2042	6,039	65,681	1087.7%	2042	8,218	88,474	1076.6%	2042	8,218	88,474	1076.6%	2042	0	0
2043	1,664	18,109	1088.0%	2043	4,425	49,399	1116.4%	2043	6,089	67,509	1108.7%	2043	6,089	67,509	1108.7%	2043	0	0
2044	1,268	14,030	1106.2%	2044	3,218	36,229	1125.9%	2044	4,486	50,259	1120.4%	2044	4,486	50,259	1120.4%	2044	0	0
2045	969	10,746	1108.9%	2045	2,351	26,527	1128.4%	2045	3,320	37,273	1122.7%	2045	3,320	37,273	1122.7%	2045	0	0
2046	736	8,161	1108.6%	2046	1,647	18,575	1128.1%	2046	2,383	26,736	1122.1%	2046	2,383	26,736	1122.1%	2046	0	0
2047	539	5,976	1108.9%	2047	1,096	12,328	1124.5%	2047	1,635	18,304	1119.4%	2047	1,635	18,304	1119.4%	2047	0	0
2048	365	4,048	1110.1%	2048	681	7,660	1124.9%	2048	1,046	11,708	1119.8%	2048	1,046	11,708	1119.8%	2048	0	0
2049	0	0	1250.7%	2049	3	34	1250.7%	2049	3	34	1250.7%	2049	3	34	1250.7%	2049	0	0
2050	0	0	0.0%	2050	0	0	0.0%	2050	0	0	0.0%	2050	0	0	0.0%	2050	0	0
2051	0	0	0.0%	2051	0	0	0.0%	2051	0	0	0.0%	2051	0	0	0.0%	2051	0	0
2052	0	0	0.0%	2052	0	0	0.0%	2052	0	0	0.0%	2052	0	0	0.0%	2052	0	0
2053	0	0	0.0%	2053	0	0	0.0%	2053	0	0	0.0%	2053	0	0	0.0%	2053	0	0
2054	0	0	0.0%	2054	0	0	0.0%	2054	0	0	0.0%	2054	0	0	0.0%	2054	0	0
2055	0	0	0.0%	2055	0	0	0.0%	2055	0	0	0.0%	2055	0	0	0.0%	2055	0	0
2056	0	0	0.0%	2056	0	0	0.0%	2056	0	0	0.0%	2056	0	0	0.0%	2056	0	0
2057	0	0	0.0%	2057	0	0	0.0%	2057	0	0	0.0%	2057	0	0	0.0%	2057	0	0
2058	0	0	0.0%	2058	0	0	0.0%	2058	0	0	0.							



## Lifetime Benefit Period (Inflation)

## Lifetime Benefit Period (No Inflation)

## Lifetime Benefit Period (All Inflation)

## Lifetime Benefit Period (original model)

## Validation

Year	Earned Premium	Incurred Claims	Loss Ratios	Year	Earned Premium	Incurred Claims	Loss Ratios	Year	Earned Premium	Incurred Claims	Loss Ratios	Year	Earned Premium	Incurred Claims	Loss Ratios	Year	Virginia Rate Level	Incurred Claims
1997	73,180	11,115	15.2%	1997	306,797	46,613	15.2%	1997	379,977	57,729	15.2%	1997	379,977	57,729	15.2%	1997	0	0
1998	459,251	87,726	19.1%	1998	2,113,044	404,401	19.1%	1998	2,572,295	492,127	19.1%	1998	2,572,295	492,127	19.1%	1998	0	0
1999	845,598	197,366	23.3%	1999	4,578,124	1,035,579	22.6%	1999	5,423,722	1,232,945	22.7%	1999	5,423,722	1,232,945	22.7%	1999	0	0
2000	2,251,049	562,928	25.0%	2000	8,970,732	2,472,440	27.6%	2000	11,221,781	3,035,368	27.0%	2000	11,221,781	3,035,368	27.0%	2000	0	0
2001	5,134,451	1,408,279	27.4%	2001	14,176,589	4,344,597	30.6%	2001	19,311,040	5,751,876	29.8%	2001	19,311,040	5,751,876	29.8%	2001	0	0
2002	9,396,026	2,751,534	29.3%	2002	18,952,796	6,350,181	33.5%	2002	28,348,822	9,101,715	32.1%	2002	28,348,822	9,101,715	32.1%	2002	0	0
2003	14,900,297	4,726,855	31.7%	2003	23,655,650	8,649,477	36.6%	2003	38,555,947	13,376,332	34.7%	2003	38,555,947	13,376,332	34.7%	2003	0	0
2004	16,749,476	6,122,562	36.6%	2004	23,620,838	9,911,236	42.0%	2004	40,370,315	16,033,798	39.7%	2004	40,370,315	16,033,798	39.7%	2004	0	0
2005	15,816,141	6,753,727	42.7%	2005	21,638,797	10,449,420	48.3%	2005	37,454,938	17,203,147	45.9%	2005	37,454,938	17,203,147	45.9%	2005	0	0
2006	14,047,293	7,000,070	49.8%	2006	19,306,933	10,667,651	55.4%	2006	33,354,225	17,687,721	53.0%	2006	33,354,225	17,687,721	53.0%	2006	0	0
2007	12,406,782	7,097,400	57.2%	2007	17,095,339	10,684,499	62.5%	2007	29,502,121	17,781,899	60.3%	2007	29,502,121	17,781,899	60.3%	2007	0	0
2008	10,904,684	7,015,991	64.3%	2008	14,987,462	10,491,799	70.0%	2008	25,892,146	17,507,790	67.6%	2008	25,892,146	17,507,790	67.6%	2008	0	0
2009	9,526,079	6,887,423	72.3%	2009	13,061,998	10,464,620	80.1%	2009	22,588,077	17,352,044	76.8%	2009	22,588,077	17,352,044	76.8%	2009	0	0
2010	8,266,560	6,810,783	82.4%	2010	11,311,105	10,254,144	90.7%	2010	19,577,665	17,064,927	87.2%	2010	19,577,665	17,064,927	87.2%	2010	0	0
2011	7,123,776	6,684,543	93.8%	2011	9,729,205	9,840,516	101.1%	2011	16,852,981	16,525,059	98.1%	2011	16,852,981	16,525,059	98.1%	2011	0	0
2012	6,095,063	6,595,094	108.2%	2012	8,310,722	9,407,712	113.2%	2012	14,405,785	16,002,806	111.1%	2012	14,405,785	16,002,806	111.1%	2012	0	0
2013	5,176,688	6,184,072	119.5%	2013	7,049,094	8,616,613	122.2%	2013	12,225,783	14,800,685	121.1%	2013	12,225,783	14,800,685	121.1%	2013	0	0
2014	4,363,822	5,478,232	125.5%	2014	5,936,504	7,714,353	129.9%	2014	10,300,327	13,192,585	128.1%	2014	10,300,327	13,192,585	128.1%	2014	0	0
2015	3,650,809	4,821,851	132.1%	2015	4,964,056	6,949,569	140.0%	2015	8,614,865	11,771,420	136.6%	2015	8,614,865	11,771,420	136.6%	2015	0	0
2016	3,031,411	4,332,617	142.9%	2016	4,121,857	6,276,953	152.3%	2016	7,153,268	10,609,570	148.3%	2016	7,153,268	10,609,570	148.3%	2016	0	0
2017	2,498,655	3,873,993	155.0%	2017	3,399,073	5,646,328	166.1%	2017	5,897,728	9,520,322	161.4%	2017	5,897,728	9,520,322	161.4%	2017	0	0
2018	2,044,786	3,446,916	168.6%	2018	2,784,278	5,052,837	181.5%	2018	4,829,064	8,499,753	176.0%	2018	4,829,064	8,499,753	176.0%	2018	0	0
2019	1,661,603	3,053,237	183.8%	2019	2,265,840	4,499,114	198.6%	2019	3,927,443	7,552,352	192.3%	2019	3,927,443	7,552,352	192.3%	2019	0	0
2020	1,340,959	2,689,168	200.5%	2020	1,832,488	3,982,302	217.3%	2020	3,173,447	6,671,469	210.2%	2020	3,173,447	6,671,469	210.2%	2020	0	0
2021	1,075,139	2,352,922	218.8%	2021	1,473,435	3,504,507	237.8%	2021	2,548,573	5,857,429	229.8%	2021	2,548,573	5,857,429	229.8%	2021	0	0
2022	856,859	2,047,922	239.0%	2022	1,178,425	3,068,871	260.4%	2022	2,035,284	5,116,792	251.4%	2022	2,035,284	5,116,792	251.4%	2022	0	0
2023	679,272	1,773,502	261.1%	2023	937,957	2,673,557	285.0%	2023	1,617,229	4,447,058	275.0%	2023	1,617,229	4,447,058	275.0%	2023	0	0
2024	535,945	1,528,647	285.2%	2024	743,273	2,317,964	311.9%	2024	1,279,219	3,846,612	300.7%	2024	1,279,219	3,846,612	300.7%	2024	0	0
2025	420,990	1,311,886	311.6%	2025	586,533	2,006,635	341.1%	2025	1,007,524	3,312,520	328.8%	2025	1,007,524	3,312,520	328.8%	2025	0	0
2026	329,282	1,120,669	340.3%	2026	460,982	1,718,360	372.8%	2026	790,263	2,839,029	359.3%	2026	790,263	2,839,029	359.3%	2026	0	0
2027	256,509	952,304	371.3%	2027	360,913	1,468,625	406.9%	2027	617,422	2,420,929	392.1%	2027	617,422	2,420,929	392.1%	2027	0	0
2028	199,057	805,773	404.8%	2028	281,551	1,249,642	443.8%	2028	480,607	2,055,414	427.7%	2028	480,607	2,055,414	427.7%	2028	0	0
2029	153,905	679,071	441.2%	2029	218,894	1,058,732	483.7%	2029	372,799	1,737,802	466.2%	2029	372,799	1,737,802	466.2%	2029	0	0
2030	118,585	569,689	480.4%	2030	169,659	892,956	526.3%	2030	288,245	1,462,646	507.4%	2030	288,245	1,462,646	507.4%	2030	0	0
2031	91,999	475,514	517.0%	2031	131,162	749,982	571.8%	2031	222,262	1,225,497	551.4%	2031	222,262	1,225,497	551.4%	2031	0	0
2032	69,819	395,269	564.6%	2032	101,198	627,816	620.4%	2032	171,017	1,023,085	598.2%	2032	171,017	1,023,085	598.2%	2032	0	0
2033	53,418	327,421	612.9%	2033	77,974	524,125	672.2%	2033	131,392	851,546	648.1%	2033	131,392	851,546	648.1%	2033	0	0
2034	40,832	270,507	662.5%	2034	60,049	438,878	727.5%	2034	100,881	707,385	701.2%	2034	100,881	707,385	701.2%	2034	0	0
2035	31,209	223,088	714.8%	2035	46,256	363,933	786.8%	2035	77,465	587,022	757.8%	2035	77,465	587,022	757.8%	2035	0	0
2036	23,820	183,012	768.3%	2036	35,417	299,642	846.0%	2036	59,237	482,654	814.8%	2036	59,237	482,654	814.8%	2036	0	0
2037	18,111	148,528	820.1%	2037	26,611	238,537	896.4%	2037	44,722	387,066	865.5%	2037	44,722	387,066	865.5%	2037	0	0
2038	13,768	120,137	872.6%	2038	19,776	186,111	941.1%	2038	33,544	306,248	913.0%	2038	33,544	306,248	913.0%	2038	0	0
2039	10,519	97,803	929.8%	2039	14,768	146,178	989.9%	2039	25,287	243,981	964.9%	2039	25,287	243,981	964.9%	2039	0	0
2040	8,069	79,725	988.0%	2040	11,069	114,968	1038.6%	2040	19,138	194,692	1017.3%	2040	19,138	194,692	1017.3%	2040	0	0
2041	6,198	64,592	1042.1%	2041	8,255	89,254	1081.2%	2041	14,454	153,846	1064.4%	2041	14,454	153,846	1064.4%	2041	0	0
2042	4,759	51,869	1079.5%	2042	6,070	67,036	1104.3%	2042	10,829	118,405	1093.4%	2042	10,829	118,405	1093.4%	2042	0	0
2043	3,653	39,948	1093.7%	2043	4,483	49,771	1110.3%	2043	8,135	89,719	1102.9%	2043	8,135	89,719	1102.9%	2043	0	0
2044	2,804	30,687	1094.3%	2044	3,358	37,391	1113.5%	2044	6,162	68,077	1104.8%	2044	6,162	68,077	1104.8%	2044	0	0
2045	2,127	23,274	1094.0%	2045	2,356	26,279	1115.4%	2045	4,483	49,553	1105.3%	2045	4,483	49,553	1105.3%	2045	0	0
2046	1,536	16,814	1094.6%	2046	1,519	16,901	1112.5%	2046	3,055	33,716	1103.5%	2046	3,055	33,716	1103.5%	2046	0	0
2047	1,009	11,046	1095.2%	2047	893	9,930	1112.0%	2047	1,902	20,976	1103.1%	2047	1,902	20,976	1103.1%	2047	0	0
2048	496	5,441	1096.9%	2048	378	4,211	1115.0%	2048	874	9,652	1104.8%	2048	874	9,652	1104.8%	2048	0	0
2049	0	0	1250.7%	2049	1	10	1250.7%	2049	1	10	1250.7%	2049	1	10	1250.7%	2049	0	0
2050	0	0	0.0%	2050	0	0	0.0%	2050	0	0	0.0%	2050	0	0	0.0%	2050	0	0
2051	0	0	0.0%	2051	0	0	0.0%	2051	0	0	0.0%	2051	0	0	0.0%	2051	0	0
2052	0	0	0.0%	2052	0	0	0.0%	2052	0	0	0.0%	2052	0	0	0.0%	2052	0	0
2053	0	0	0.0%	2053	0	0	0.0%	2053	0	0	0.0%	2053	0	0	0.0%	2053	0	0
2054	0	0	0.0%	2054	0	0	0.0%	2054	0	0	0.0%	2054	0	0	0.0%	2054	0	0
2055	0	0	0.0%	2055	0	0	0.0%	2055	0	0	0.0%	2055	0	0	0.0%	2055	0	0
2056	0	0	0.0%	2056	0	0	0.0%	2056	0	0	0.0%	2056	0	0	0.0%	2056	0	0
2057	0	0	0.0%	2057	0	0	0.0%	2057	0	0	0.0%	2057	0	0	0.0%	2057	0	0
2058	0	0	0.0%	205														

**All Benefit Periods Combined (Inflation)**

Year	Rate Level	Virginia Earned Premium	Incurred Claims	Loss Ratios
1997	150.735	23,387	15.5%	
1998	823,948	162,351	19.7%	
1999	1,421,666	340,591	24.0%	
2000	3,279,080	845,595	25.8%	
2001	7,164,839	2,001,219	27.9%	
2002	13,110,458	3,869,191	29.5%	
2003	21,089,658	6,695,410	31.7%	
2004	23,844,938	8,706,162	36.5%	
2005	22,719,193	9,656,994	42.5%	
2006	20,228,090	10,036,027	49.6%	
2007	17,870,264	10,182,157	57.0%	
2008	15,711,424	10,075,471	64.1%	
2009	13,730,294	9,891,942	72.0%	
2010	11,919,837	9,786,416	81.9%	
2011	10,276,557	9,578,827	93.2%	
2012	8,796,661	9,458,117	107.5%	
2013	7,474,885	8,874,619	118.7%	
2014	6,304,374	7,878,302	125.0%	
2015	5,277,080	6,948,726	131.7%	
2016	4,384,128	6,242,508	142.4%	
2017	3,615,600	5,588,405	154.6%	
2018	2,960,471	4,977,844	168.1%	
2019	2,407,241	4,414,405	183.4%	
2020	1,943,976	3,890,141	200.1%	
2021	1,599,646	3,404,650	218.3%	
2022	1,243,818	2,964,149	238.3%	
2023	986,722	2,565,503	260.0%	
2024	779,166	2,206,815	283.2%	
2025	612,753	1,883,587	307.4%	
2026	480,011	1,599,679	333.3%	
2027	374,573	1,356,507	362.1%	
2028	291,175	1,149,041	394.6%	
2029	225,505	970,157	430.2%	
2030	174,033	815,547	468.6%	
2031	133,890	682,240	509.6%	
2032	102,742	568,252	551.1%	
2033	78,687	471,561	599.3%	
2034	60,192	390,195	648.3%	
2035	46,027	322,236	700.1%	
2036	35,159	265,011	753.8%	
2037	26,750	215,686	806.3%	
2038	20,287	174,040	857.9%	
2039	15,425	140,746	912.4%	
2040	11,790	114,308	969.6%	
2041	9,043	92,701	1026.2%	
2042	6,938	74,162	1068.9%	
2043	5,317	58,057	1091.9%	
2044	4,072	44,716	1098.0%	
2045	3,096	34,020	1098.7%	
2046	2,272	24,975	1099.1%	
2047	1,548	17,022	1100.0%	
2048	861	9,489	1102.5%	
2049	0	0	1250.7%	
2050	0	0	0.0%	
2051	0	0	0.0%	
2052	0	0	0.0%	
2053	0	0	0.0%	
2054	0	0	0.0%	
2055	0	0	0.0%	
2056	0	0	0.0%	
2057	0	0	0.0%	
2058	0	0	0.0%	
2059	0	0	0.0%	
2060	0	0	0.0%	
2061	0	0	0.0%	
2062	0	0	0.0%	
2063	0	0	0.0%	
2064	0	0	0.0%	
2065	0	0	0.0%	
2066	0	0	0.0%	
2067	0	0	0.0%	
2068	0	0	0.0%	
2069	0	0	0.0%	
2070	0	0	0.0%	
2071	0	0	0.0%	
2072	0	0	0.0%	
2073	0	0	0.0%	
2074	0	0	0.0%	
2075	0	0	0.0%	
Total	233,796,892	172,720,282	73.9%	

**All Benefit Periods Combined (No Inflation)**

Year	Rate Level	Virginia Earned Premium	Incurred Claims	Loss Ratios
1997	722,385	110,656	15.3%	
1998	4,599,328	897,028	19.5%	
1999	8,942,866	2,087,619	23.3%	
2000	16,032,064	4,508,951	28.1%	
2001	24,538,003	7,661,618	31.2%	
2002	33,640,516	11,297,360	33.6%	
2003	42,885,771	15,621,290	36.4%	
2004	43,568,294	18,086,822	41.5%	
2005	40,288,106	19,211,316	47.7%	
2006	36,013,803	19,705,414	54.7%	
2007	31,910,818	19,747,254	61.9%	
2008	27,998,115	19,422,350	69.4%	
2009	24,423,486	19,309,930	79.1%	
2010	21,170,776	18,898,805	89.3%	
2011	18,229,371	18,112,094	99.7%	
2012	15,589,150	17,458,712	112.0%	
2013	13,238,265	16,035,849	121.1%	
2014	11,162,515	14,393,356	128.9%	
2015	9,345,764	12,969,658	138.8%	
2016	7,770,108	11,738,905	151.1%	
2017	6,415,946	10,580,814	164.9%	
2018	5,262,476	9,487,790	180.3%	
2019	4,290,527	8,469,402	197.4%	
2020	3,476,508	7,500,745	215.8%	
2021	2,800,722	6,595,232	235.5%	
2022	2,244,654	5,773,388	257.1%	
2023	1,790,305	5,019,885	280.4%	
2024	1,422,092	4,341,094	305.3%	
2025	1,125,381	3,723,138	330.8%	
2026	887,306	3,183,215	358.8%	
2027	696,985	2,721,013	390.4%	
2028	545,470	2,321,349	425.6%	
2029	425,403	1,972,503	463.7%	
2030	330,692	1,669,901	505.0%	
2031	256,337	1,407,706	549.2%	
2032	198,238	1,162,259	586.4%	
2033	153,041	988,882	646.8%	
2034	118,032	827,105	700.7%	
2035	91,007	690,339	758.6%	
2036	69,955	572,476	818.3%	
2037	53,007	462,710	872.9%	
2038	39,466	362,707	919.0%	
2039	29,287	282,429	964.4%	
2040	21,872	221,609	1013.2%	
2041	16,351	173,402	1060.5%	
2042	12,109	132,717	1096.0%	
2043	8,907	99,170	1113.4%	
2044	6,576	73,620	1119.6%	
2045	4,707	52,806	1121.9%	
2046	3,166	35,477	1120.6%	
2047	1,989	22,258	1118.9%	
2048	1,059	11,872	1121.4%	
2049	4	44	1250.7%	
2050	0	0	0.0%	
2051	0	0	0.0%	
2052	0	0	0.0%	
2053	0	0	0.0%	
2054	0	0	0.0%	
2055	0	0	0.0%	
2056	0	0	0.0%	
2057	0	0	0.0%	
2058	0	0	0.0%	
2059	0	0	0.0%	
2060	0	0	0.0%	
2061	0	0	0.0%	
2062	0	0	0.0%	
2063	0	0	0.0%	
2064	0	0	0.0%	
2065	0	0	0.0%	
2066	0	0	0.0%	
2067	0	0	0.0%	
2068	0	0	0.0%	
2069	0	0	0.0%	
2070	0	0	0.0%	
2071	0	0	0.0%	
2072	0	0	0.0%	
2073	0	0	0.0%	
2074	0	0	0.0%	
2075	0	0	0.0%	
Total	464,869,282	348,293,035	74.9%	

**All Benefit Periods Combined (All Inflation)**

Year	Rate Level	Virginia Earned Premium	Incurred Claims	Loss Ratios
1997	873,120	134,043	15.4%	
1998	5,423,276	1,059,379	19.5%	
1999	10,364,532	2,428,570	23.4%	
2000	19,311,144	5,354,546	27.7%	
2001	31,703,242	9,662,837	30.5%	
2002	46,750,975	15,166,551	32.4%	
2003	63,975,429	22,316,700	34.9%	
2004	67,413,231	26,792,985	39.7%	
2005	63,007,299	28,868,311	45.8%	
2006	56,241,894	29,741,441	52.9%	
2007	49,781,082	29,929,411	60.1%	
2008	43,709,539	29,497,821	67.5%	
2009	38,153,780	29,201,872	76.5%	
2010	33,090,613	28,665,221	86.6%	
2011	28,505,929	27,750,921	97.4%	
2012	24,385,811	26,916,828	110.4%	
2013	20,713,150	24,910,528	120.3%	
2014	17,466,889	22,271,659	127.5%	
2015	14,622,843	19,918,384	136.2%	
2016	12,154,236	17,981,433	147.9%	
2017	10,031,545	16,169,219	161.2%	
2018	8,222,947	14,465,634	175.9%	
2019	6,697,768	12,883,807	192.4%	
2020	5,420,485	11,390,886	210.1%	
2021	4,360,367	9,999,883	229.3%	
2022	3,488,272	8,735,537	250.4%	
2023	2,777,026	7,585,359	273.1%	
2024	2,201,258	6,547,909	297.5%	
2025	1,738,134	5,606,726	322.6%	
2026	1,367,317	4,782,894	349.8%	
2027	1,071,558	4,077,520	380.5%	
2028	836,645	3,470,391	414.8%	
2029	650,908	2,942,659	452.1%	
2030	504,725	2,485,448	492.4%	
2031	390,227	2,089,946	535.6%	
2032	300,980	1,750,511	581.6%	
2033	231,727	1,461,444	630.7%	
2034	178,224	1,217,300	683.0%	
2035	137,034	1,012,575	738.9%	
2036	105,114	837,488	796.7%	
2037	79,757	678,396	850.6%	
2038	59,753	536,747	898.3%	
2039	44,712	423,175	946.4%	
2040	33,661	335,917	997.9%	
2041	25,393	266,103	1047.9%	
2042	19,047	206,879	1086.2%	
2043	14,224	157,228	1105.3%	
2044	10,648	118,336	1111.3%	
2045	7,803	86,826	1112.7%	
2046	5,438	60,452	1111.6%	
2047	3,537	39,280	1110.6%	
2048	1,919	21,361	1112.9%	
2049	4	44	1250.7%	
2050	0	0	0.0%	
2051	0	0	0.0%	
2052	0	0	0.0%	
2053	0	0	0.0%	
2054	0	0	0.0%	
2055	0	0	0.0%	
2056	0	0	0.0%	
2057	0	0	0.0%	
2058	0	0	0.0%	
2059	0	0	0.0%	
2060	0	0	0.0%	
2061	0	0	0.0%	
2062	0	0	0.0%	
2063	0	0	0.0%	
2064	0	0	0.0%	
2065	0	0	0.0%	
2066	0	0	0.0%	
2067	0	0	0.0%	
2068	0	0	0.0%	
2069	0	0	0.0%	
2070	0	0	0.0%	
2071	0	0	0.0%	
2072	0	0	0.0%	
2073	0	0	0.0%	
2074	0	0	0.0%	
2075	0	0	0.0%	
Total	698,666,174	521,013,317	74.6%	

**All Benefit Periods Combined (original model)**

Year	Rate Level	Virginia Earned Premium	Incurred Claims	Loss Ratios
1997	873,120	134,043	15.4%	
1998	5,423,276</			

Revised Expected Lapse Rates  
Actual Lapse Rates  
Actual/Revised

No Inflation  
Single

Duration	Exposure		Cred Fac	-50		-50		-50		-50		-50		-50		-50		-50		-50		-50		-50		-50		-50		-50		-50										
	Exposure	Lapse		Exposure	Lapse	Exposure	Lapse	Exposure	Lapse	Exposure	Lapse	Exposure	Lapse	Exposure	Lapse	Exposure	Lapse	Exposure	Lapse	Exposure	Lapse	Exposure	Lapse	Exposure	Lapse	Exposure	Lapse	Exposure	Lapse	Exposure	Lapse	Exposure	Lapse									
1	331	70	0.25	20.9%	21.1%	100.0%	282	34	0.19	13.4%	12.0%	90.3%	487	39	0.20	8.6%	8.0%	82.6%	1,026	61	0.27	7.3%	5.9%	81.0%	842	33	0.20	5.6%	3.9%	78.1%	457	25	0.17	6.6%	5.9%	82.6%	259	19	0.14	9.4%	8.2%	86.9%
2	248	49	0.20	17.2%	16.9%	110.0%	214	19	0.14	9.5%	8.9%	93.3%	367	22	0.16	7.1%	6.0%	84.7%	821	49	0.22	6.5%	6.0%	92.3%	638	25	0.17	4.8%	3.8%	79.5%	348	19	0.13	6.6%	5.9%	82.5%	175	7	0.10	5.5%	4.0%	72.4%
3	183	15	0.13	9.1%	8.2%	89.2%	137	14	0.09	6.2%	5.9%	143.9%	263	12	0.11	4.7%	4.4%	92.7%	606	20	0.16	4.4%	3.7%	77.6%	490	20	0.14	4.1%	4.1%	98.6%	239	12	0.12	5.9%	4.4%	73.6%	138	6	0.07	4.1%	4.3%	105.1%
4	134	12	0.10	8.2%	9.0%	109.5%	103	6	0.07	4.5%	4.3%	128.0%	176	9	0.08	4.3%	5.1%	118.7%	209	15	0.11	4.1%	3.7%	89.9%	337	14	0.10	3.4%	4.1%	121.1%	191	5	0.09	4.3%	2.4%	69.4%	105	5	0.06	3.9%	4.4%	121.4%
5	83	4	0.07	5.7%	4.9%	84.1%	62	0	0.04	2.7%	0.0%	0.0%	111	5	0.06	2.2%	4.5%	130.7%	208	6	0.09	3.3%	2.2%	67.1%	219	2	0.07	2.4%	0.9%	38.1%	123	3	0.06	2.8%	2.4%	87.1%	64	1	0.04	2.9%	1.6%	54.1%
6	47	3	0.08	4.7%	8.7%	174.3%	36	1	0.03	2.4%	2.8%	117.1%	65	1	0.04	2.4%	1.6%	63.5%	138	3	0.06	2.5%	1.9%	76.1%	155	5	0.06	2.4%	1.2%	43.7%	75	2	0.04	2.5%	2.2%	134.7%	44	0	0.03	2.1%	0.0%	0.0%
7	15	5	0.02	4.7%	7.1%	27.1%	27	2	0.02	2.0%	1.5%	37.2%	46	1	0.03	2.1%	2.2%	106.2%	108	1	0.04	1.9%	0.0%	48.4%	114	2	0.05	2.8%	1.9%	181.2%	32	0	0.03	2.1%	3.9%	181.2%	32	0	0.02	1.8%	0.0%	0.0%
8	6	0	0.00	2.4%	0.0%	0.0%	21	0	0.02	1.8%	0.0%	0.0%	37	0	0.03	1.8%	0.0%	0.0%	82	1	0.04	1.8%	1.2%	66.1%	82	1	0.03	1.6%	1.2%	78.8%	35	0	0.02	1.9%	0.0%	0.0%						
9	1	0	0.00	0.0%	0.0%	0.0%	17	0	0.02	1.8%	0.0%	0.0%	26	0	0.02	1.8%	0.0%	0.0%	47	1	0.03	1.5%	2.1%	174.0%	18	1	0.02	1.8%	5.4%	302.9%	16	0	0.02	1.8%	0.0%	0.0%						
10	1	0	0.00	2.8%	2.0%	6.0%	15	0	0.02	1.9%	0.0%	0.0%	37	0	0.02	1.7%	0.0%	0.0%	29	0	0.02	1.2%	0.0%	0.0%	25	0	0.02	1.1%	0.0%	0.0%	9	1	0.01	1.9%	11.4%	623.0%	8	0	0.01	1.8%	0.0%	0.0%

No Inflation  
Married

Duration	Exposure		Cred Fac	-50		-50		-50		-50		-50		-50		-50		-50		-50		-50		-50		-50		-50		-50		-50										
	Exposure	Lapse		Exposure	Lapse	Exposure	Lapse	Exposure	Lapse	Exposure	Lapse	Exposure	Lapse	Exposure	Lapse	Exposure	Lapse	Exposure	Lapse	Exposure	Lapse	Exposure	Lapse	Exposure	Lapse	Exposure	Lapse	Exposure	Lapse	Exposure	Lapse	Exposure	Lapse									
1	1,648	141	0.36	12.2%	12.1%	99.6%	1,514	84	0.28	7.4%	7.4%	97.1%	2,555	129	0.35	5.1%	5.0%	99.5%	4,618	179	0.41	2.5%	1.9%	98.8%	3,685	142	0.36	3.5%	3.9%	99.5%	1,425	86	0.30	6.7%	5.3%	80.6%	533	36	0.20	7.9%	6.8%	85.5%
2	948	97	0.30	10.3%	10.2%	99.2%	878	44	0.22	5.7%	5.0%	88.0%	2,021	69	0.27	3.7%	3.4%	92.5%	3,753	121	0.35	3.4%	3.2%	93.7%	2,989	97	0.29	3.1%	3.2%	105.4%	1,277	51	0.24	4.6%	4.0%	87.0%	418	16	0.14	5.8%	3.3%	76.8%
3	749	72	0.34	8.9%	9.6%	108.2%	658	33	0.17	4.9%	5.0%	102.5%	1,485	25	0.18	2.9%	1.7%	74.5%	2,816	68	0.27	2.7%	2.4%	90.6%	2,299	39	0.25	2.3%	1.7%	75.6%	979	39	0.18	2.4%	3.1%	91.1%	228	10	0.11	2.8%	3.1%	102.2%
4	543	31	0.17	5.7%	5.7%	100.1%	424	16	0.12	3.5%	3.9%	107.0%	980	17	0.13	2.8%	1.8%	62.4%	1,855	32	0.19	2.8%	1.7%	88.5%	1,604	26	0.17	1.8%	1.6%	89.6%	691	11	0.12	2.2%	1.6%	71.0%	240	9	0.08	2.1%	3.1%	130.3%
5	338	15	0.11	4.2%	4.4%	105.2%	248	6	0.08	2.5%	2.4%	98.0%	888	8	0.10	1.8%	1.4%	75.9%	1,165	9	0.14	1.6%	0.8%	48.2%	1,056	13	0.14	1.8%	1.2%	69.0%	433	6	0.09	1.8%	1.4%	76.1%	148	4	0.06	2.3%	2.7%	115.6%
6	121	3	0.08	2.5%	2.5%	71.1%	115	4	0.04	1.8%	1.5%	23.5%	318	1	0.06	1.3%	0.3%	23.9%	712	11	0.09	1.1%	1.3%	133.4%	643	8	0.09	1.5%	1.2%	85.4%	265	8	0.07	1.8%	3.0%	165.5%	86	0	0.03	0.9%	0.0%	0.0%
7	47	2	0.01	2.8%	4.2%	151.0%	40	2	0.03	1.4%	3.4%	246.2%	187	1	0.05	1.3%	0.5%	40.8%	439	4	0.06	1.1%	1.4%	136.3%	377	3	0.06	1.0%	0.0%	80.5%	159	1	0.04	0.9%	0.0%	69.4%	49	0	0.02	0.9%	0.0%	0.0%
8	34	0	0.02	1.4%	0.0%	0.0%	45	1	0.02	1.0%	2.2%	212.1%	145	4	0.04	1.2%	2.8%	234.5%	313	5	0.05	1.0%	1.6%	152.8%	267	5	0.05	1.0%	1.9%	189.4%	119	0	0.03	0.9%	0.0%	0.0%						
9	22	0	0.01	1.6%	0.0%	0.0%	34	0	0.02	0.9%	0.0%	0.0%	98	0	0.03	0.9%	0.0%	0.0%	189	0	0.04	0.9%	1.0%	141.1%	118	3	0.04	0.9%	3.7%	415.4%	22	2	0.03	0.9%	9.1%	922.9%						
10	14	2	0.01	1.0%	14.7%	1529.4%	26	0	0.02	0.9%	0.0%	0.0%	61	0	0.02	0.9%	0.0%	0.0%	99	0	0.02	0.7%	0.0%	0.0%	62	0	0.02	0.9%	0.0%	0.0%	29	0	0.02	0.9%	0.0%	0.0%						

Green numbers indicate the first credibility weighted assumption (what will be used in the model)

Inflation  
Single

Duration	Exposure		Cred Fac	-50		-50		-50		-50		-50		-50		-50		-50		-50		-50		-50		-50		-50		-50		-50										
	Exposure	Lapse		Exposure	Lapse	Exposure	Lapse	Exposure	Lapse	Exposure	Lapse	Exposure	Lapse	Exposure	Lapse	Exposure	Lapse	Exposure	Lapse	Exposure	Lapse	Exposure	Lapse	Exposure	Lapse	Exposure	Lapse	Exposure	Lapse	Exposure	Lapse	Exposure	Lapse									
1	1,709	224	0.46	13.1%	13.1%	99.9%	2,208	146	0.34	6.5%	6.6%	101.7%	4,476	268	0.49	5.9%	6.0%	100.9%	6,136	308	0.53	5.0%	5.0%	101.2%	3,256	150	0.39	4.9%	4.4%	93.2%	855	63	0.25	7.7%	7.4%	95.6%	227	19	0.12	6.8%	8.4%	122.7%
2	1,041	109	0.33	8.2%	7.9%	95.0%	1,019	96	0.26	5.1%	5.0%	98.0%	3,083	150	0.37	3.6%	3.3%	92.2%	5,280	177	0.42	3.4%	3.4%	91.2%	2,744	94	0.28	2.9%	3.4%	89.6%	665	41	0.18	5.5%	6.0%	109.8%	192	7	0.08	2.6%	3.7%	101.9%
3	1,179	63	0.25	5.5%	5.9%	97.4%	1,627	66	0.26	4.3%	4.1%	93.4%	3,326	65	0.30	2.8%	2.6%	92.4%	4,432	104	0.33	2.5%	2.3%	92.7%	2,282	61	0.25	2.8%	2.7%	94.2%	571	26	0.13	3.4%	4.6%	132.1%	173	6	0.07	2.7%	3.5%	127.9%
4	929	50	0.21	5.1%	5.4%	105.0%	1,295	34	0.21	3.4%	2.8%	76.5%	2,666	49	0.24	2.3%	1.8%	84.6%	3,488	68	0.28	2.3%	1.9%	86.2%	1,821	39	0.21	2.5%	2.1%	87.3%	478	15	0.11	2.9%	3.1%	109.8%	152	5	0.05	2.2%	3.3%	149.3%
5	641	30	0.15	2.6%	4.7%	118.0%	953	31	0.18	2.4%	3.3%	94.9%	1,945	44	0.20	2.2%	2.4%	100.9%	2,393	43	0.23	2.2%	1.8%	79.9%	1,339	23	0.12	2.3%	1.7%	112.8%	374	9	0.08	2.1%	2.4%	118.9%	123	3	0.04	1.5%	2.4%	164.8%
6	470	19	0.11	2.9%	4.0%	138.2%	686	21	0.14	2.0%	3.1%	100.9%	1,280	20	0.13	1.5%	1.6%	105.1%	1,626	24	0.17	1.9%	1.5%	107.1%	1,626	24	0.17	1.8%	2.3%	174.5%	297	7	0.07	1.8%	2.4%	131.4%	102	2	0.03	1.2%	2.0%	162.8%
7	330	11	0.09	2.4%	3.1%	132.5%	541	12	0.10	1.9%	2.2%	110.2%	993	14	0.10	1.3%	1.4%	115.8%	1,212	20	0.13	1.5%	1.7%	109.9%	797	22	0.10	1.3%	1.3%	111.0%	244	2	0.05	1.0%	0.8%	80.8%	83	0	0.03	1.0%	0.0%	0.0%
8	273	9	0.08	2.																																						

## Durational Totals

### Nationwide (All Benefit Periods Combined)

Calendar Year	Actual Incurred Claims	Expected Incurred Claims	Actual to Expected
0	1,959,781	8,220,416	0.238
1	8,342,400	27,044,481	0.308
2	13,236,227	26,346,146	0.502
3	21,636,328	28,855,414	0.750
4	27,458,946	31,071,795	0.884
5	27,805,238	30,455,801	0.913
6	34,885,315	30,124,017	1.158
7	32,241,698	29,430,074	1.096
8	52,115,354	28,446,298	1.832
9	49,552,126	27,174,836	1.823
10	118,605,747	32,841,340	3.611
11	61,213,407	24,774,906	2.471
12	68,023,977	22,883,631	2.973
13	68,674,201	20,942,031	3.279
14	74,187,498	18,917,790	3.922
15	74,625,853	16,834,251	4.433
16	80,952,904	14,117,747	5.734
17	70,220,457	10,135,238	6.928
18	53,961,925	6,162,953	8.756
19	41,828,821	3,736,265	11.195
20	31,237,667	2,086,646	14.970
21	34,508,735	1,100,936	31.345
22	14,339,259	385,084	37.237
Grand Total	1,061,613,865	442,088,099	1.494

	Lapse	Mortality	Morbidity
Legacy	0%-15%	0%-10%	75%-100%

	<u>Increase</u>
Lapse	0%-15%
Mortality	0%-10%
Morbidity	75%-100%

Non-Lifetime Benefit Periods (Inflation)

Table with 5 columns: Year, Rate Level, Earned Premium, Incurred Claims, Loss Ratios. Rows 1997-2075, Total.

Non-Lifetime Benefit Periods (No Inflation)

Table with 5 columns: Year, Rate Level, Earned Premium, Incurred Claims, Loss Ratios. Rows 1997-2075, Total.

Non-Lifetime Benefit Periods (All Inflation)

Table with 5 columns: Year, Rate Level, Earned Premium, Incurred Claims, Loss Ratios. Rows 1997-2075, Total.

Non-Lifetime Benefit Periods (original model)

Table with 5 columns: Year, Rate Level, Earned Premium, Incurred Claims, Loss Ratios. Rows 1997-2075, Total.

Validation

Table with 5 columns: Year, Rate Level, Earned Premium, Incurred Claims, Loss Ratios. Rows 1997-2075, Total.

Lifetime Benefit Period (Inflation)				Lifetime Benefit Period (No Inflation)				Lifetime Benefit Period (All Inflation)				Lifetime Benefit Period (original model)				Validation			
Virginia				Virginia				Virginia				Virginia				Virginia			
Year	Rate Level	Incurred	Loss	Year	Rate Level	Incurred	Loss	Year	Rate Level	Incurred	Loss	Year	Rate Level	Incurred	Loss	Year	Rate Level	Incurred	Loss
Year	Rate Level	Incurred	Loss	Year	Rate Level	Incurred	Loss	Year	Rate Level	Incurred	Loss	Year	Rate Level	Incurred	Loss	Year	Rate Level	Incurred	Loss
1997	1.70,670	0	0.0%	1997	7.15,512	0	0.0%	1997	886,182	0	0.0%	1997	886,182	0	0.0%	1997	0	0	0
1998	1,081,977	229,543	21.2%	1998	4,979,788	0	0.0%	1998	6,061,765	229,543	3.8%	1998	6,061,765	229,543	3.8%	1998	0	0	0
1999	2,318,836	581,891	25.1%	1999	12,167,405	0	0.0%	1999	14,486,241	581,891	4.0%	1999	14,486,241	581,891	4.0%	1999	0	0	0
2000	6,738,520	1,523,171	22.5%	2000	25,904,004	0	0.0%	2000	32,662,325	1,523,171	4.7%	2000	32,662,325	1,523,171	4.7%	2000	0	0	0
2001	15,780,063	4,550,872	28.8%	2001	43,190,983	0	0.0%	2001	58,971,046	4,550,872	7.7%	2001	58,971,046	4,550,872	7.7%	2001	0	0	0
2002	29,472,665	5,455,702	18.5%	2002	60,011,717	0	0.0%	2002	89,484,381	5,455,702	6.1%	2002	89,484,381	5,455,702	6.1%	2002	0	0	0
2003	46,160,244	9,575,870	20.7%	2003	75,406,623	204,762	0.3%	2003	121,566,867	9,780,632	8.0%	2003	121,566,867	9,780,632	8.0%	2003	0	0	0
2004	50,011,814	12,745,653	25.5%	2004	74,785,491	105,931	0.1%	2004	124,797,305	12,851,585	10.3%	2004	124,797,305	12,851,585	10.3%	2004	0	0	0
2005	50,687,720	15,831,538	31.2%	2005	74,030,244	300,534	0.4%	2005	124,717,964	16,132,072	12.9%	2005	124,717,964	16,132,072	12.9%	2005	0	0	0
2006	49,194,141	15,135,278	30.8%	2006	72,621,363	317,429	0.5%	2006	121,815,504	15,462,707	12.7%	2006	121,815,504	15,462,707	12.7%	2006	0	0	0
2007	47,502,581	23,056,129	48.5%	2007	71,405,505	681,444	1.0%	2007	118,908,086	23,737,573	20.0%	2007	118,908,086	23,737,573	20.0%	2007	0	0	0
2008	46,284,103	30,245,637	65.3%	2008	69,637,235	1,545,603	2.2%	2008	115,921,338	31,791,240	27.4%	2008	115,921,338	31,791,240	27.4%	2008	0	0	0
2009	45,153,092	29,214,368	64.7%	2009	67,376,154	780,559	1.2%	2009	112,529,246	29,994,927	26.7%	2009	112,529,246	29,994,927	26.7%	2009	0	0	0
2010	43,735,717	43,462,053	99.4%	2010	65,234,183	2,167,577	3.3%	2010	108,969,899	45,629,630	41.9%	2010	108,969,899	45,629,630	41.9%	2010	0	0	0
2011	40,862,123	46,549,143	114.2%	2011	60,599,502	2,136,276	3.5%	2011	101,221,625	48,785,419	48.2%	2011	101,221,625	48,785,419	48.2%	2011	0	0	0
2012	36,239,289	46,326,098	127.8%	2012	52,360,888	2,110,168	4.0%	2012	88,600,177	48,436,267	54.7%	2012	88,600,177	48,436,267	54.7%	2012	0	0	0
2013	33,095,742	45,969,332	138.9%	2013	47,158,492	4,847,519	10.3%	2013	80,254,234	50,816,851	63.3%	2013	80,254,234	50,816,851	63.3%	2013	0	0	0
2014	31,742,596	36,628,494	115.4%	2014	44,623,600	7,573,198	17.0%	2014	76,366,196	44,201,692	57.9%	2014	76,366,196	44,201,692	57.9%	2014	0	0	0
2015	29,084,848	41,670,300	143.3%	2015	40,115,618	9,456,490	23.6%	2015	69,200,467	51,126,790	73.9%	2015	69,200,467	51,126,790	73.9%	2015	0	0	0
2016	26,130,845	39,420,237	150.9%	2016	34,121,916	12,215,570	35.8%	2016	60,252,761	51,635,806	85.7%	2016	60,252,761	51,635,806	85.7%	2016	0	0	0
2017	24,120,351	39,046,643	161.9%	2017	30,136,707	16,423,675	54.5%	2017	54,257,058	55,470,317	102.2%	2017	54,257,058	55,470,317	102.2%	2017	0	0	0
2018	22,166,541	42,896,812	193.5%	2018	27,093,819	26,410,239	97.5%	2018	49,260,361	69,307,052	140.7%	2018	49,260,361	69,307,052	140.7%	2018	0	0	0
2019	20,765,971	25,825,491	124.4%	2019	24,378,080	24,678,266	101.2%	2019	45,144,051	50,503,757	111.9%	2019	45,144,051	50,503,757	111.9%	2019	0	0	0
2020	19,513,033	25,468,383	131.9%	2020	22,672,411	30,685,077	135.3%	2020	41,985,444	56,153,461	133.7%	2020	41,985,444	56,153,461	133.7%	2020	0	0	0
2021	17,569,645	28,063,927	159.7%	2021	20,625,773	33,476,927	162.3%	2021	38,195,419	61,540,853	161.1%	2021	38,195,419	61,540,853	161.1%	2021	0	0	0
2022	15,010,419	29,570,877	197.0%	2022	18,677,935	34,941,953	187.1%	2022	34,588,355	64,512,829	186.5%	2022	34,588,355	64,512,829	186.5%	2022	0	0	0
2023	14,350,212	31,060,890	216.4%	2023	16,846,340	36,360,611	215.8%	2023	31,196,553	67,421,501	216.1%	2023	31,196,553	67,421,501	216.1%	2023	0	0	0
2024	12,922,119	32,497,786	251.5%	2024	15,169,839	37,648,332	248.2%	2024	28,091,958	70,146,118	249.7%	2024	28,091,958	70,146,118	249.7%	2024	0	0	0
2025	11,612,361	33,992,003	292.7%	2025	13,632,257	38,955,142	282.8%	2025	25,244,618	72,947,145	289.0%	2025	25,244,618	72,947,145	289.0%	2025	0	0	0
2026	10,408,421	35,451,023	340.6%	2026	12,118,899	40,234,795	329.3%	2026	22,627,320	75,685,819	334.5%	2026	22,627,320	75,685,819	334.5%	2026	0	0	0
2027	9,298,457	36,768,127	395.4%	2027	10,955,865	41,378,654	379.1%	2027	20,214,322	78,146,781	386.6%	2027	20,214,322	78,146,781	386.6%	2027	0	0	0
2028	8,280,204	37,821,328	456.8%	2028	9,720,281	42,245,900	434.6%	2028	18,000,305	80,067,229	444.8%	2028	18,000,305	80,067,229	444.8%	2028	0	0	0
2029	7,344,512	38,549,845	524.9%	2029	8,622,043	42,733,767	495.6%	2029	15,966,555	81,283,612	509.1%	2029	15,966,555	81,283,612	509.1%	2029	0	0	0
2030	6,496,253	39,101,259	601.9%	2030	7,626,235	43,017,464	564.1%	2030	14,122,488	82,118,724	581.5%	2030	14,122,488	82,118,724	581.5%	2030	0	0	0
2031	5,723,829	39,439,837	689.0%	2031	6,719,453	43,100,310	641.4%	2031	12,443,282	82,540,147	663.3%	2031	12,443,282	82,540,147	663.3%	2031	0	0	0
2032	5,019,642	39,487,342	786.7%	2032	5,892,777	42,911,070	728.2%	2032	10,912,420	82,398,412	755.1%	2032	10,912,420	82,398,412	755.1%	2032	0	0	0
2033	4,373,976	39,140,218	895.0%	2033	5,134,801	42,335,327	824.5%	2033	9,508,777	81,484,545	856.9%	2033	9,508,777	81,484,545	856.9%	2033	0	0	0
2034	3,793,328	38,385,959	1011.9%	2034	4,453,153	41,292,575	927.3%	2034	8,246,481	79,678,534	966.2%	2034	8,246,481	79,678,534	966.2%	2034	0	0	0
2035	3,276,788	37,360,957	1140.2%	2035	3,846,765	39,961,260	1038.8%	2035	7,123,553	77,322,217	1085.4%	2035	7,123,553	77,322,217	1085.4%	2035	0	0	0
2036	2,816,385	36,148,070	1283.5%	2036	3,306,777	38,448,067	1162.9%	2036	6,122,662	74,596,137	1218.4%	2036	6,122,662	74,596,137	1218.4%	2036	0	0	0
2037	2,407,727	34,720,421	1444.0%	2037	2,826,325	36,734,855	1299.2%	2037	5,234,262	71,455,275	1365.1%	2037	5,234,262	71,455,275	1365.1%	2037	0	0	0
2038	2,046,591	33,012,002	1613.0%	2038	2,402,583	34,752,150	1446.4%	2038	4,449,174	67,764,152	1523.1%	2038	4,449,174	67,764,152	1523.1%	2038	0	0	0
2039	1,729,118	30,945,899	1789.7%	2039	2,029,887	32,407,227	1596.5%	2039	3,759,004	63,353,126	1685.4%	2039	3,759,004	63,353,126	1685.4%	2039	0	0	0
2040	1,451,152	28,813,406	1985.5%	2040	1,703,571	30,001,818	1761.1%	2040	3,154,724	58,814,864	1864.3%	2040	3,154,724	58,814,864	1864.3%	2040	0	0	0
2041	1,208,476	26,713,101	2210.5%	2041	1,418,683	27,655,938	1949.4%	2041	2,627,158	54,369,039	2069.5%	2041	2,627,158	54,369,039	2069.5%	2041	0	0	0
2042	998,514	24,556,549	2459.3%	2042	1,172,199	25,279,813	2156.6%	2042	2,170,712	49,836,362	2295.9%	2042	2,170,712	49,836,362	2295.9%	2042	0	0	0
2043	816,766	22,287,581	2728.8%	2043	958,837	22,822,302	2180.2%	2043	1,775,603	45,109,884	2540.5%	2043	1,775,603	45,109,884	2540.5%	2043	0	0	0
2044	661,999	19,909,914	3007.5%	2044	777,149	20,288,910	2610.7%	2044	1,439,148	40,198,824	2793.2%	2044	1,439,148	40,198,824	2793.2%	2044	0	0	0
2045	533,128	17,561,248	3294.0%	2045	625,862	17,808,028	2845.4%	2045	1,158,990	35,369,276	3051.7%	2045	1,158,990	35,369,276	3051.7%	2045	0	0	0
2046	426,173	15,331,399	3597.5%	2046	500,303	15,429,400	3084.0%	2046	926,476	30,760,800	3320.2%	2046	926,476	30,760,800	3320.2%	2046	0	0	0
2047	337,923	13,296,179	3934.7%	2047	396,703	13,330,115	3360.2%	2047	734,626	26,626,294	3624.5%	2047	734,626	26,626,294	3624.5%	2047	0	0	0
2048	265,730	11,432,654	4302.4%	2048	311,952	11,419,016	3660.5%	2048	577,682	22,851,670	3953.8%	2048	577,682	22,851,670	3953.8%	2048	0	0	0
2049	207,292	9,709,842	4684.1%	2049	243,349	9,655,440	3971.8%	2049	450,640	19,375,282	4299.5%	2049	450,640	19,375,282	4299.5%	2049	0	0	0
2050	160,431	8,182,124	5100.1%	2050	188,337	8,117,802	4310.3%	2050	348,768										

All Benefit Periods Combined (Inflation)

Table with columns: Year, Rate Level, Earned Premium, Incurred Claims, Loss Ratios. Rows 1997-2075.

All Benefit Periods Combined (No Inflation)

Table with columns: Year, Rate Level, Earned Premium, Incurred Claims, Loss Ratios. Rows 1997-2075.

All Benefit Periods Combined (All Inflation)

Table with columns: Year, Rate Level, Earned Premium, Incurred Claims, Loss Ratios. Rows 1997-2075.

All Benefit Periods Combined (original model)

Table with columns: Year, Rate Level, Earned Premium, Incurred Claims, Loss Ratios. Rows 1997-2075.

Validation

Table with columns: Year, Rate Level, Earned Premium, Incurred Claims. Rows 1997-2075.

Total 1,115,613.196 2,990,230.622 187.4% Total 1,875,038.084 1,626,626.578 86.8% Total 2,990,651.280 3,716,857.200 124.3% Total 2,990,651.280 3,716,857.200 124.3% Total 0 0 0



**Attachment J****Legacy Incurred Claim Analysis with Current Assumptions**

Year	Expected Claims	Actual Claims	Expected Loss Ratio	Actual Loss Ratio
1997	51,014	-	5.8%	0.0%
1998	423,267	336,881	7.7%	6.2%
1999	981,672	1,202,294	9.1%	11.1%
2000	2,040,766	2,802,214	10.0%	13.8%
2001	3,747,439	6,980,208	11.1%	20.6%
2002	6,095,310	10,065,212	12.0%	19.9%
2003	9,587,091	13,440,862	13.1%	18.4%
2004	13,459,465	18,831,982	15.2%	21.3%
2005	16,501,427	24,827,897	18.6%	28.1%
2006	19,579,671	24,812,557	22.8%	28.8%
2007	22,932,279	35,768,139	27.3%	42.9%
2008	26,613,425	45,492,536	32.6%	56.4%
2009	30,919,840	46,624,634	39.0%	59.9%
2010	35,734,383	64,399,121	46.6%	86.1%
2011	40,856,487	70,037,231	55.3%	94.2%
2012	46,396,681	74,956,182	65.6%	92.3%
2013	51,886,179	76,678,580	77.4%	96.7%
2014	57,138,314	70,703,056	90.5%	93.9%
2015	63,114,320	81,837,896	105.4%	103.9%
2016	69,651,600	87,171,445	122.4%	108.1%
2017	76,602,204	94,775,499	142.1%	123.8%
2018	83,773,295	114,186,191	164.5%	162.0%
2019	91,182,499	95,683,247	190.2%	147.4%

**Active Premium-Paying Policies**

PPV Approach Results

Form	Nationwide	Virginia
Legacy <sup>1</sup>	13%	11%

<sup>1</sup> Please note that with the requested increase the Legacy Lifetime Loss Ratio is still projected to be over 106% with an A/E of 1.7 when compared to Pricing assumptions, as seen in filed Exhibit 5.

Active Premium-Paying Policies  
Nationwide

Attachment 1 - Current and Previous Assumption Projections

Projection Year	Legacy					
	Current Assumption			Previous Assumptions		
	Earned Premium	Incurred Claims (with 10% Load)	Incurred Claims (No Load)	Earned Premium	Incurred Claims (with 10% Load)	Incurred Claims
2020	48,498,031	79,610,151	72,372,864	48,446,098	87,038,793	79,126,175
2021	44,355,473	87,553,636	79,594,215	44,235,404	91,029,836	82,754,396
2022	40,426,393	92,132,641	83,756,946	40,235,391	96,214,601	87,467,819
2023	36,701,435	96,606,549	87,824,135	36,420,390	96,748,238	87,952,944
2024	33,256,385	100,728,338	91,571,216	32,880,578	96,163,653	87,421,502
2025	30,056,887	104,894,835	95,358,941	29,560,760	99,110,562	90,100,511
2026	27,081,970	109,011,931	99,101,755	26,389,161	102,097,537	92,815,943
2027	24,300,792	112,790,971	102,537,246	23,584,089	104,774,108	95,249,189
2028	21,714,250	115,826,777	105,297,070	21,023,739	106,826,679	97,115,163
2029	19,310,436	117,729,215	107,026,559	18,677,238	108,550,389	98,682,172
2030	17,104,537	118,949,076	108,135,524	16,530,242	110,094,357	100,085,779
2031	15,082,665	119,559,592	108,690,538	14,566,651	110,838,701	100,762,455
2032	13,230,629	119,384,006	108,530,915	12,783,613	111,441,785	101,310,713
2033	11,527,676	118,092,078	107,356,435	11,162,599	109,777,939	99,798,126
2034	9,991,650	115,415,086	104,922,805	9,709,979	106,868,426	97,153,114
2035	8,621,132	111,849,212	101,681,102	8,414,101	105,266,248	95,696,589
2036	7,398,981	107,747,809	97,952,554	7,253,125	103,236,144	93,851,040
2037	6,314,949	103,088,494	93,716,812	6,220,302	100,671,321	91,519,382
2038	5,358,135	97,695,612	88,814,193	5,307,810	97,329,790	88,481,627
2039	4,518,337	91,259,918	82,963,562	4,507,589	92,933,548	84,485,043
2040	3,784,431	84,594,715	76,904,286	3,809,697	87,880,853	79,891,685
2041	3,145,634	78,071,388	70,973,989	3,201,454	82,519,714	75,017,922
2042	2,594,278	71,462,785	64,966,168	2,674,759	77,164,270	70,149,337
2043	2,119,127	64,640,253	58,763,866	2,219,643	71,327,485	64,843,168
2044	1,715,855	57,568,366	52,334,878	1,830,720	64,705,492	58,823,175
2045	1,380,107	50,563,363	45,966,694	1,505,169	58,391,275	53,082,978
2046	1,101,570	43,887,484	39,897,713	1,229,981	52,338,970	47,580,882
2047	872,365	37,900,896	34,455,360	973,864	41,472,669	37,702,426
2048	685,262	32,466,293	29,514,812	764,850	32,595,314	29,632,104
2049	534,082	27,484,565	24,985,968	596,008	25,417,127	23,106,479
2050	412,934	23,069,253	20,972,048	460,736	19,661,333	17,873,939
2051	316,851	19,219,910	17,472,646	353,474	15,093,454	13,721,322
2052	242,601	15,799,453	14,363,139	270,583	11,563,688	10,512,444
2053	184,215	12,956,866	11,778,969	205,425	8,785,331	7,986,665
2054	138,343	10,476,872	9,524,429	154,255	6,599,777	5,999,797
2055	103,348	8,393,607	7,630,552	115,222	4,931,885	4,483,532
2056	76,521	6,686,945	6,079,041	85,306	3,652,422	3,320,383
2057	56,063	5,293,921	4,812,656	62,499	2,676,141	2,432,856
2058	40,543	4,151,012	3,773,647	45,198	1,935,108	1,759,189
2059	28,879	3,196,771	2,906,156	32,199	1,377,942	1,252,674
2060	20,168	2,415,062	2,195,510	22,491	961,743	874,311
2061	13,751	1,792,360	1,629,418	15,339	655,116	595,560
2062	9,069	1,307,775	1,188,887	10,122	431,460	392,236
2063	5,731	935,910	850,827	6,401	272,026	247,296
2064	3,389	656,053	596,412	3,791	160,188	145,625
2065	1,857	451,127	410,116	2,083	87,168	79,244
2066	876	302,596	275,088	988	40,482	36,802
2067	280	198,109	180,099	321	12,171	11,065
2068	129	93,033	84,576	149	5,426	4,933
2069	68	8,511	7,737	79	2,833	2,575
2070	23	2,388	2,171	27	970	882
2071	1	1,179	1,072	1	36	32
2072	-	-	-	-	-	-
2073	-	-	-	-	-	-
2074	-	-	-	-	-	-
2075	-	-	-	-	-	-
2076	-	-	-	-	-	-
Sum	444,439,094	2,785,974,749	2,532,704,318	438,561,693	2,709,732,524	2,463,393,203
Discount Rate	4.5%	4.5%	4.5%	4.5%	4.5%	4.5%
Discounted Sum	334,096,611	1,609,100,629	1,462,818,754	329,701,225	1,568,874,027	1,426,249,115

Projected LR	481.6%	475.8%
Weight 1	0.85	
Weight 2	0.58	
C	87.9%	
PPV Increase	13.1%	13.1%

Active Premium-Paying Policies  
Virginia All

Attachment 1 - Current and Previous Assumption Projections

Projection Year	Legacy					
	Current Assumption			Previous Assumptions		
	Earned Premium	Incurred Claims (with 10% Load)	Incurred Claims (No Load)	Earned Premium	Incurred Claims (with 10% Load)	Incurred Claims
2020	1,982,396	3,254,128	2,958,299	1,988,736	3,572,985	3,248,168
2021	1,813,065	3,578,825	3,253,477	1,815,885	3,736,819	3,397,108
2022	1,652,461	3,765,995	3,423,632	1,651,682	3,949,656	3,590,597
2023	1,500,200	3,948,870	3,589,882	1,495,075	3,971,563	3,610,511
2024	1,359,381	4,117,351	3,743,046	1,349,764	3,947,565	3,588,695
2025	1,228,599	4,287,660	3,897,873	1,213,484	4,068,537	3,698,670
2026	1,106,997	4,455,950	4,050,863	1,083,288	4,191,154	3,810,140
2027	993,314	4,610,421	4,191,292	968,138	4,301,028	3,910,026
2028	887,587	4,734,512	4,304,102	863,035	4,385,287	3,986,625
2029	789,329	4,812,276	4,374,796	766,710	4,456,047	4,050,951
2030	699,162	4,862,138	4,420,126	678,575	4,519,427	4,108,570
2031	616,516	4,887,094	4,442,812	597,968	4,549,983	4,136,348
2032	540,812	4,879,916	4,436,288	524,774	4,574,740	4,158,854
2033	471,203	4,827,108	4,388,280	458,230	4,506,438	4,096,762
2034	408,417	4,717,684	4,288,803	398,599	4,387,001	3,988,183
2035	352,396	4,571,926	4,156,296	345,403	4,321,231	3,928,392
2036	302,439	4,404,278	4,003,889	297,744	4,237,894	3,852,631
2037	258,129	4,213,824	3,830,749	255,346	4,132,607	3,756,915
2038	219,018	3,993,386	3,630,351	217,888	3,995,436	3,632,214
2039	184,691	3,730,322	3,391,202	185,039	3,814,968	3,468,152
2040	154,692	3,457,876	3,143,524	156,390	3,607,552	3,279,593
2041	128,580	3,191,230	2,901,118	131,421	3,387,475	3,079,522
2042	106,043	2,921,098	2,655,544	109,800	3,167,631	2,879,665
2043	86,621	2,642,222	2,402,020	91,117	2,928,028	2,661,844
2044	70,137	2,353,153	2,139,230	75,152	2,656,192	2,414,720
2045	56,413	2,066,818	1,878,925	61,788	2,396,990	2,179,082
2046	45,028	1,793,936	1,630,851	50,491	2,148,540	1,953,218
2047	35,659	1,549,229	1,408,390	39,978	1,702,473	1,547,703
2048	28,011	1,327,086	1,206,441	31,397	1,338,054	1,216,412
2049	21,831	1,123,454	1,021,321	24,466	1,043,385	948,532
2050	16,879	942,974	857,249	18,913	807,107	733,734
2051	12,952	785,629	714,208	14,510	619,594	563,267
2052	9,916	645,815	587,105	11,108	474,695	431,541
2053	7,530	529,622	481,475	8,433	360,642	327,856
2054	5,655	428,251	389,319	6,332	270,924	246,295
2055	4,224	343,095	311,905	4,730	202,456	184,051
2056	3,128	273,334	248,486	3,502	149,934	136,303
2057	2,292	216,393	196,721	2,566	109,857	99,870
2058	1,657	169,676	154,251	1,855	79,437	72,216
2059	1,180	130,671	118,791	1,322	56,565	51,423
2060	824	98,718	89,743	923	39,480	35,891
2061	562	73,264	66,604	630	26,893	24,448
2062	371	53,456	48,597	415	17,712	16,101
2063	234	38,256	34,778	263	11,167	10,152
2064	139	26,817	24,379	156	6,576	5,978
2065	76	18,440	16,764	85	3,578	3,253
2066	36	12,369	11,244	41	1,662	1,511
2067	11	8,098	7,362	13	500	454
2068	5	3,803	3,457	6	223	203
2069	3	348	316	3	116	106
2070	1	98	89	1	40	36
2071	0	48	44	0	1	1
2072	-	-	-	-	-	-
2073	-	-	-	-	-	-
2074	-	-	-	-	-	-
2075	-	-	-	-	-	-
2076	-	-	-	-	-	-
<b>Sum</b>	<b>18,166,802</b>	<b>113,878,939</b>	<b>103,526,309</b>	<b>18,003,172</b>	<b>111,235,846</b>	<b>101,123,496</b>
Discount Rate	4.5%	4.5%	4.5%	4.5%	4.5%	4.5%
Discounted Sum	13,656,465	65,773,271	59,793,883	13,534,397	64,403,047	58,548,224

Projected LR	481.6%	475.8%
Weight 1	0.85	
Weight 2	0.58	
C	82.6%	
PPV Increase	11.1%	
Nationwide PPV Increase	13.1%	

## ***Methodology for setting the Morbidity assumption***

The baseline expected incurred claims were developed from MG17 with adjustments to reflect Mutual’s historical underwriting levels and observed utilization, as well as historical morbidity improvement. Several adjustments are applied to Legacy and Modern baseline assumptions consistent with mappings within Mutual’s projection models. Below is a summary of these adjustments developed for the baseline expected claims:

Ultimate claim costs: MG17

Underwriting Selection Factors (includes spousal savings factors): Based on MG17

- Legacy – varies by issue era
  - o Issue years 1997 to 2000: 33% Loose Underwriting / 67% Moderate Underwriting
  - o Issue years 2001 and 2002: 100% Moderate Underwriting
  - o Issue years 2003 and later: 100% Tight Underwriting
- Modern – 100% Tight Underwriting

Utilization Factors: Both “dollars” utilization (salvage) and “days” utilization were used.

§ “Days” utilization as follows:

- 70.5% for daily reimbursement plans
- 75.0% for monthly reimbursement plans

§ Total utilization as follows:

- o Legacy
  - § Starting Duration: 10
  - § 96% for SNF
  - § 84% for ALF
  - § 54% for HHC
- o Modern
  - § Starting Duration: 6
  - § 93% for SNF
  - § 87% for ALF
  - § 48% for HHC

§ LTC Inflation by product, care setting, and policy duration

Policy duration	Legacy		
	SNF	ALF	HHC
1	4.80%	4.60%	2.90%
2	4.60%	4.20%	2.80%
3	4.40%	3.80%	2.70%
4	4.20%	3.40%	2.60%
5	4.00%	3.00%	2.50%
6	4.00%	3.00%	2.50%
7	4.00%	3.00%	2.50%

8	4.00%	3.00%	2.50%
9	4.00%	3.00%	2.50%
10	4.00%	3.00%	2.50%
11	4.07%	3.13%	2.53%
12	4.13%	3.27%	2.57%
13	4.20%	3.40%	2.60%
14	4.27%	3.53%	2.63%
15	4.33%	3.67%	2.67%
16	4.40%	3.80%	2.70%
17	4.47%	3.93%	2.73%
18	4.53%	4.07%	2.77%
19	4.60%	4.20%	2.80%
20	4.67%	4.33%	2.83%
21	4.73%	4.47%	2.87%
22	4.80%	4.60%	2.90%
23	4.87%	4.73%	2.93%
24	4.93%	4.87%	2.97%
25+	5.00%	5.00%	3.00%

Policy duration	Modern		
	SNF	ALF	HHC
1	4.00%	3.00%	2.50%
2	4.00%	3.00%	2.50%
3	4.00%	3.00%	2.50%
4	4.00%	3.00%	2.50%
5	4.00%	3.00%	2.50%
6	4.00%	3.00%	2.50%
7	4.07%	3.13%	2.53%
8	4.13%	3.27%	2.57%
9	4.20%	3.40%	2.60%
10	4.27%	3.53%	2.63%
11	4.33%	3.67%	2.67%
12	4.40%	3.80%	2.70%
13	4.47%	3.93%	2.73%
14	4.53%	4.07%	2.77%
15	4.60%	4.20%	2.80%
16	4.67%	4.33%	2.83%
17	4.73%	4.47%	2.87%
18	4.80%	4.60%	2.90%
19	4.87%	4.73%	2.93%
20	4.93%	4.87%	2.97%
21	5.00%	5.00%	3.00%
22	5.00%	5.00%	3.00%

23	5.00%	5.00%	3.00%
24	5.00%	5.00%	3.00%
25+	5.00%	5.00%	3.00%

Claim Management: 0.95 adjustment factor used.

Morbidity Improvement: G2 varies by attained age and gender (2017 base year).

*Note: the G2 scale is listed below.*

GPO Loads (Legacy Policies): Duration loads were included for plans with the GPO option:

<u>Durations</u>	<u>GPO Load</u>
1 to 5	1.32
6 to 9	1.15
10 to 11	1.14
12 to 13	1.12
14 to 15	1.11
16 to 17	1.09
18 to 19	1.07
20 to 21	1.04
22+	1.00

Coverage Change Adjustment (Legacy Policies):

Experience analysis assumes current policy features have been in effect since policy inception.

Expected incurred claims adjustments:

- Ø Incurred Years 1997 through 2011: 1% increase to expected incurred claims
  - o We estimated a 1% reduction in expected incurred claims from benefit reductions
- Ø Incurred Years 1997 through 2014: 4% increase to expected incurred claims
  - o We estimated a 4% reduction in expected incurred claims from benefit reductions after accounting for changes to interest rate.

Modern Cash Adjustment

For Modern policies with a cash alternate benefit rider, expected incurred claims adjustments:

Expected Incidence

Expected HHC incidence after the shift to the cash situs should be 50% of the HHC incidence.  
 Expected cash incidence should be 70% of the HHC incidence (prior to the shift to cash).

Expected Incurred Claims

- The incurred claims cash load was applied to total expected claims but reflected in the cash care setting.
- Expected HHC severity is unchanged. To preserve total incurred claims (20% incidence load \* expected HHC severity) is reflected in reduced cash severity

Other Morbidity Factors (Modern Policies):

G2 Scale Attained Age	Female	Male
under 50	1.00%	1.00%
50	1.00%	1.00%
51	1.00%	1.10%
52	1.10%	1.10%
53	1.10%	1.20%
54	1.10%	1.20%
55	1.20%	1.30%
56	1.20%	1.30%
57	1.20%	1.40%
58	1.20%	1.40%
59	1.30%	1.50%
60	1.30%	1.50%
61	1.30%	1.50%
62	1.30%	1.50%
63	1.30%	1.50%
64	1.30%	1.50%
65	1.30%	1.50%
66	1.30%	1.50%
67	1.30%	1.50%
68	1.30%	1.50%
69	1.30%	1.50%
70	1.30%	1.50%
71	1.30%	1.50%
72	1.30%	1.50%
73	1.30%	1.50%
74	1.30%	1.50%
75	1.30%	1.50%
76	1.30%	1.50%
77	1.30%	1.50%
78	1.30%	1.50%
79	1.30%	1.50%
80	1.30%	1.50%
81	1.20%	1.40%
82	1.20%	1.30%
83	1.10%	1.30%
84	1.00%	1.20%
85	1.00%	1.10%
86	0.90%	1.00%
87	0.80%	0.90%
88	0.70%	0.90%
89	0.70%	0.80%
90	0.60%	0.70%
91	0.60%	0.70%



92	0.50%	0.60%
93	0.50%	0.50%
94	0.40%	0.50%
95	0.40%	0.40%
96	0.40%	0.40%
97	0.30%	0.30%
98	0.30%	0.30%
99	0.20%	0.20%
100	0.20%	0.20%
101	0.20%	0.20%
102	0.10%	0.10%
103	0.10%	0.10%
104	0.00%	0.00%
105+	0.00%	0.00%

## Legacy Incidence A/E Analysis

	Active	Actual	Expected	
Duration	Exposures	Claim Count	Claim Count	A/E
1	63,118	258	207	125%
2	56,222	351	304	115%
3	52,059	441	357	124%
4	49,120	492	406	121%
5	46,805	496	450	110%
6	44,994	561	485	116%
7	43,319	611	538	114%
8	41,800	647	598	108%
9	40,209	757	655	116%
10	38,556	743	705	105%
11	36,693	773	727	106%
12	34,950	855	747	115%
13	33,264	829	763	109%
14	31,630	838	775	108%
15	30,003	850	785	108%
16	28,399	862	790	109%
17	26,373	919	788	117%
18	20,022	793	673	118%
19	12,837	584	490	119%
20	7,779	322	333	97%
21	4,000	183	193	95%
22	1,796	86	99	88%
23	598	29	38	78%
24	9	2	1	329%
<b>Grand Total</b>	<b>744,552</b>	<b>13,285</b>	<b>11,906</b>	<b>112%</b>

## Attachment 4 - Morbidity Assumptions

### Morbidity

#### Actual to Expected Ratios

Year	Raw	Credibility Adjusted
2008	112%	109%
2009	89%	91%
2010	100%	100%
2011	99%	99%
2012	90%	92%
2013	100%	100%
2014	98%	98%
2015	109%	108%
2016	104%	103%
2017	109%	107%
2018	132%	122%
2019	100%	100%
Total	103%	102%



September 12, 2022

Mr. Bill Dismore, APIR  
Senior Insurance Market Examiner  
Virginia Bureau of Insurance

**RE: SERFF Filing # MUTA-132676983**

Dear Mr. Dismore:

This cover letter describes the changes made to the filing material to be consistent with the revised increase amount the Bureau will approve.

The following items have been revised and have been added to the Supporting Documentation tab:

- Actuarial Memorandum - the changes are listed below (these changes have also been highlighted in the Actuarial Memorandum):
  - Section 5 Projection Assumptions – the implementation date has been changed to January 1, 2023.
  - Section 10 Lifetime Anticipated Loss Ratio – this section has been revised to include the revised increase amounts.
  - Section 11 Summary of Proposed Rate Increase – this section has been revised to reflect both the revised increase amounts and revised implementation date.
- Exhibit 2 – Average Annual Premium
- Exhibits 5A-5C – Nationwide Lifetime Experience Projection
- Exhibits 6A-6C – Virginia Lifetime Experience Projection

In addition, rate schedules that reflect the revised increase amounts have been placed in the Rate/Rule Schedule tab. The LTCi Rate Request Summary has also been revised to reflect the revised rate increase amount.

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

Sincerely,

Jeffrey O. LaFond  
Lead Actuarial Analyst  
Income and Wealth Planning  
Mutual of Omaha Insurance Company

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