

SERFF Tracking Number: BNLB-126374532 State: Arkansas  
 Filing Company: Bankers Life and Casualty Company State Tracking Number: 44010  
 Company Tracking Number:  
 TOI: MS02I Individual Medicare Supplement - Pre- Standardized Sub-TOI: MS02I.000 Medicare Supplement - Pre- Standardized  
 Product Name: Pre-Standard Pool  
 Project Name/Number: /

## Filing at a Glance

Company: Bankers Life and Casualty Company

Product Name: Pre-Standard Pool SERFF Tr Num: BNLB-126374532 State: Arkansas  
 TOI: MS02I Individual Medicare Supplement - Pre-Standardized SERFF Status: Closed-Approved- Closed State Tr Num: 44010  
 Sub-TOI: MS02I.000 Medicare Supplement - Pre-Standardized Co Tr Num: State Status: Approved-Closed  
 Filing Type: Rate Reviewer(s): Stephanie Fowler  
 Author: Diana Willis Disposition Date: 12/16/2009  
 Date Submitted: 11/06/2009 Disposition Status: Approved-Closed  
 Implementation Date Requested: Implementation Date:  
 State Filing Description:

## General Information

Project Name: Status of Filing in Domicile: Authorized  
 Project Number: Date Approved in Domicile: 10/01/2009  
 Requested Filing Mode: Review & Approval Domicile Status Comments:  
 Explanation for Combination/Other: Market Type: Individual  
 Submission Type: New Submission Group Market Size:  
 Overall Rate Impact: Group Market Type:  
 Filing Status Changed: 12/16/2009 Explanation for Other Group Market Type:  
 State Status Changed: 12/16/2009  
 Deemer Date: Created By: Diana Willis  
 Submitted By: Diana Willis Corresponding Filing Tracking Number:  
 Filing Description:  
 INDIVIDUAL A&H  
 2010 Premium Rates for Policy Form GR-73S, GR-75R, GR-A002, GR-A020, P1-56566-A, P1-67720-A

We are submitting 2010 rates for the captioned forms. For this filing, we have pooled together all of our Pre-Standardized Medicare Supplement Forms. These forms were previously approved in most states between mid-1979 and late-1990 but are no longer for sale. All are guaranteed renewable Parts A and B Medicare Supplement forms. There are no dollar limits to the total benefits paid.

SERFF Tracking Number: BNLB-126374532 State: Arkansas  
 Filing Company: Bankers Life and Casualty Company State Tracking Number: 44010  
 Company Tracking Number:  
 TOI: MS021 Individual Medicare Supplement - Pre- Standardized Sub-TOI: MS021.000 Medicare Supplement - Pre- Standardized  
 Product Name: Pre-Standard Pool  
 Project Name/Number: /

Even though benefits payable increased January 1, 2010 and the inflation in medical care costs is expected to continue, we are not changing the rates. The same rates as currently approved will continue to be used in 2010.

The enclosed rates are intended to be effective through year-end 2010 and will apply to in-force business only. With these rates the required anticipated loss ratio standard of your state for this form will be met.

We'd sincerely appreciate your expedited review for approval of this filing. Please feel free to correspond with us via SERFF, fax to (312) 396-5907 or e-mail d.willis@banklife.com.

## Company and Contact

### Filing Contact Information

Diana Willis, Actuarial Analyst II d.willis@banklife.com  
 600 West Chicago Avenue 312-396-7658 [Phone]  
 Chicago, IL 60610 312-396-5907 [FAX]

### Filing Company Information

Bankers Life and Casualty Company CoCode: 61263 State of Domicile: Illinois  
 600 West Chicago Avenue Group Code: 233 Company Type:  
 Chicago, IL 60610 Group Name: State ID Number:  
 (312) 396-6000 ext. [Phone] FEIN Number: 36-0770740

-----

## Filing Fees

Fee Required? Yes  
 Fee Amount: \$50.00  
 Retaliatory? No  
 Fee Explanation: \$50.00 per pre-standardized rate filing x 1 filing = \$50.00  
 Per Company: No

| COMPANY                           | AMOUNT  | DATE PROCESSED | TRANSACTION # |
|-----------------------------------|---------|----------------|---------------|
| Bankers Life and Casualty Company | \$50.00 | 11/06/2009     | 31844298      |

SERFF Tracking Number: BNLB-126374532 State: Arkansas  
Filing Company: Bankers Life and Casualty Company State Tracking Number: 44010  
Company Tracking Number:  
TOI: MS021 Individual Medicare Supplement - Pre- Standardized Sub-TOI: MS021.000 Medicare Supplement - Pre- Standardized  
Product Name: Pre-Standard Pool  
Project Name/Number: /

## Correspondence Summary

### Dispositions

| Status          | Created By       | Created On | Date Submitted |
|-----------------|------------------|------------|----------------|
| Approved-Closed | Stephanie Fowler | 12/16/2009 | 12/16/2009     |

SERFF Tracking Number: BNLB-126374532 State: Arkansas  
 Filing Company: Bankers Life and Casualty Company State Tracking Number: 44010  
 Company Tracking Number:  
 TOI: MS021 Individual Medicare Supplement - Pre-Standardized Sub-TOI: MS021.000 Medicare Supplement - Pre-Standardized  
 Product Name: Pre-Standard Pool  
 Project Name/Number: /

## Disposition

Disposition Date: 12/16/2009

Implementation Date:

Status: Approved-Closed

Comment: We have approved this rate filing. There was no increase requested.

| Company Name:                        | Overall %<br>Indicated<br>Change: | Overall % Rate<br>Impact: | Written<br>Premium<br>Change for<br>this<br>Program: | # of Policy<br>Holders<br>Affected for this<br>Program: | Written<br>Premium for<br>this Program: | Maximum %<br>Change (where<br>required): | Minimum %<br>Change (where<br>required): |
|--------------------------------------|-----------------------------------|---------------------------|--|---|---|--|--|
| Bankers Life and<br>Casualty Company | 0.000%                            | 0.000%                    | \$0  | 50  | \$                                      | 0.000%                                   | 0.000%                                   |

SERFF Tracking Number: *BNLB-126374532* State: *Arkansas*  
 Filing Company: *Bankers Life and Casualty Company* State Tracking Number: *44010*  
 Company Tracking Number:  
 TOI: *MS021 Individual Medicare Supplement - Pre- Standardized* Sub-TOI: *MS021.000 Medicare Supplement - Pre- Standardized*  
 Product Name: *Pre-Standard Pool*  
 Project Name/Number: */*

| <b>Schedule</b>            | <b>Schedule Item</b>             | <b>Schedule Item Status</b>         | <b>Public Access</b> |
|----------------------------|----------------------------------|-------------------------------------|----------------------|
| <b>Supporting Document</b> | Health - Actuarial Justification | Accepted for Informational Purposes | Yes                  |
| <b>Rate</b>                | GR-73S Rate Sheet                | Approved                            | Yes                  |
| <b>Rate</b>                | GR-75R Rate Sheet                | Approved                            | Yes                  |
| <b>Rate</b>                | GR-A002 Rate Sheet               | Approved                            | Yes                  |
| <b>Rate</b>                | GR-GR-A020 Rate Sheet            | Approved                            | Yes                  |
| <b>Rate</b>                | P1-56566-A Rate Sheet            | Approved                            | Yes                  |
| <b>Rate</b>                | P1-67720-A Rate Sheet            | Approved                            | Yes                  |

SERFF Tracking Number: BNLB-126374532 State: Arkansas  
 Filing Company: Bankers Life and Casualty Company State Tracking Number: 44010  
 Company Tracking Number:  
 TOI: MS021 Individual Medicare Supplement - Pre-Standardized Sub-TOI: MS021.000 Medicare Supplement - Pre-Standardized  
 Product Name: Pre-Standard Pool  
 Project Name/Number: /

## Rate Information

Rate data applies to filing.

Filing Method: SERFF  
 Rate Change Type: Neutral  
 Overall Percentage of Last Rate Revision: 0.000%  
 Effective Date of Last Rate Revision: 01/01/2009  
 Filing Method of Last Filing: SERFF

## Company Rate Information

| Company Name:                     | Overall % Indicated Change: | Overall % Rate Impact: | Written Premium Change for this Program: | # of Policy Holders Affected for this Program: | Written Premium for this Program: | Maximum % Change (where required): | Minimum % Change (where required): |
|-----------------------------------|-----------------------------|------------------------|--|--|-----------------------------------|------------------------------------|------------------------------------|
| Bankers Life and Casualty Company | 0.000%                      | 0.000%                 | \$0                                      | 50   |                                   | 0.000%                             | 0.000%                             |

SERFF Tracking Number: BNLB-126374532 State: Arkansas  
 Filing Company: Bankers Life and Casualty Company State Tracking Number: 44010  
 Company Tracking Number:  
 TOI: MS021 Individual Medicare Supplement - Pre- Standardized Sub-TOI: MS021.000 Medicare Supplement - Pre- Standardized  
 Product Name: Pre-Standard Pool  
 Project Name/Number: /

## Rate/Rule Schedule

| Schedule Item Status:  | Document Name:        | Affected Form Numbers:<br>(Separated with commas) | Rate Action: | Rate Action Information:                                      |       | Attachments                 |
|------------------------|-----------------------|---|--------------|---|-------|-----------------------------|
| Approved<br>12/16/2009 | GR-73S Rate Sheet     | GR-73S  | Revised      | Previous State Filing Number:<br>Percent Rate Change Request: | 39355 | Rate Sheet - GR-73S.pdf     |
| Approved<br>12/16/2009 | GR-75R Rate Sheet     | GR-75R  | Revised      | Previous State Filing Number:<br>Percent Rate Change Request: | 39355 | Rate Sheet - GR-75R.pdf     |
| Approved<br>12/16/2009 | GR-A002 Rate Sheet    | GR-A002   | Revised      | Previous State Filing Number:<br>Percent Rate Change Request: | 39355 | Rate Sheet - GR-A002.pdf    |
| Approved<br>12/16/2009 | GR-GR-A020 Rate Sheet | GR-A020   | Revised      | Previous State Filing Number:<br>Percent Rate Change Request: | 39355 | Rate Sheet - GR-A020.pdf    |
| Approved<br>12/16/2009 | P1-56566-A Rate Sheet | P1-56566-A  | Revised      | Previous State Filing Number:<br>Percent Rate Change Request: | 39355 | Rate Sheet - P1-56566-A.pdf |
| Approved               | P1-67720-A Rate Sheet | P1-67720-A  | Revised      | Previous State Filing Number:                                 | 39355 | Rate Sheet - P1-67720-A.pdf |

SERFF Tracking Number: BNLB-126374532 State: Arkansas  
Filing Company: Bankers Life and Casualty Company State Tracking Number: 44010  
Company Tracking Number:  
TOI: MS021 Individual Medicare Supplement - Pre- Standardized Sub-TOI: MS021.000 Medicare Supplement - Pre- Standardized  
Product Name: Pre-Standard Pool  
Project Name/Number: /  
12/16/2009 Percent Rate Change Request:

BANKERS LIFE AND CASUALTY COMPANY  
Chicago, Illinois

Annual Premium Rates\*

Policy Form GR-73S

Male or Female

Age at Issue

|     |                   |                 |
|-----|-------------------|-----------------|
| All | Part A Deductible | \$489.27        |
|     | Part A Other      | 44.18           |
|     | Part B Deductible | 98.51           |
|     | Nursing Home      | 276.54          |
|     | Other             | 826.25          |
|     | Full Coverage     | <u>1,734.75</u> |

These rates are for 2010.

Certain coverage components of the policy are optional. To delete coverage for these components, subtract the premium shown above from the premium for full coverage.

\*To determine the Bank Draft (P.P.S.P.) or Payroll Deduction (P.R.D.), Semi-Annual, Quarterly or Monthly Direct Bill rates multiply the Annual Rates, as given above, by the appropriate factor shown below and add \$1.00:

|         |  |
|---------|--|
| 0.08583 | for Monthly Bank Draft/Payroll Deduction |
| 0.515   | for Semi-Annual                          |
| 0.2625  | for Quarterly                            |
| 0.09167 | for Monthly Direct Bill                  |

BANKERS LIFE AND CASUALTY COMPANY

Chicago, Illinois

Annual Premium Rates\*  
Policy Form GR-75R

Male or Female

| Age Last<br>Birthday<br>At Issue | Part A<br>Deductible | Part B<br>Deductible | Basic<br>Part B<br>Coverage | Basic<br>Part A<br>Coverage | Other<br>Part B<br>Coverage |
|----------------------------------|----------------------|----------------------|-----------------------------|-----------------------------|-----------------------------|
| ALL AGES                         | 567.05               | 124.58               | 1,035.48                    | 42.87                       | 607.85                      |

These rates are intended for calendar year 2010.

Certain coverage components of the policy are optional. The Part A Deductible and Part B Deductible coverages are optional. The Other Part B Coverage is defined as expenses in excess of Medicare approved and are considered usual and customary (optional). Premiums for coverage of less than 100% of the excess usual and customary expenses are reduced proportionately.

\* To determine the Bank Draft (P.P.S.P.) or Payroll Deduction (P.R.D.), Semi-Annual, Quarterly or Monthly Direct Bill rates multiply the Annual Rates, as given above, by the appropriate factor shown below and add \$1.00:

0.08583 for Monthly Bank Draft/Payroll Deduction  
0.515 for Semi-Annual  
0.2625 for Quarterly  
0.09167 for Monthly Direct Bill

BANKERS LIFE AND CASUALTY COMPANY

Chicago, Illinois

Annual Premium Rates\*  
Policy Form GR-75R

Male or Female

| Age Last<br>Birthday<br>At Issue | Part A<br>Deductible | Part B<br>Deductible | Basic<br>Part B<br>Coverage | Basic<br>Part A<br>Coverage | Other<br>Part B<br>Coverage |
|----------------------------------|----------------------|----------------------|-----------------------------|-----------------------------|-----------------------------|
| ALL AGES                         | 432.87               | 95.13                | 790.68                      | 32.40                       | 463.85                      |

These rates are intended for calendar year 2010.

Certain coverage components of the policy are optional. The Part A Deductible and Part B Deductible coverages are optional. The Other Part B Coverage is defined as expenses in excess of Medicare approved and are considered usual and customary (optional). Premiums for coverage of less than 100% of the excess usual and customary expenses are reduced proportionately.

\* To determine the Bank Draft (P.P.S.P.) or Payroll Deduction (P.R.D.), Semi-Annual, Quarterly or Monthly Direct Bill rates multiply the Annual Rates, as given above, by the appropriate factor shown below and add \$1.00:

0.08583 for Monthly Bank Draft/Payroll Deduction  
0.515 for Semi-Annual  
0.2625 for Quarterly  
0.09167 for Monthly Direct Bill

BANKERS LIFE AND CASUALTY COMPANY  
Chicago, Illinois

Annual Premium Rates\*  
Policy Form GR-A002  
Male or Female

| Age At Issue | Part A Deductible Coverage | Basic Part B Coverage | Basic Part A Coverage | Part B Deductible Coverage | Other Part B Coverage | Per \$100 Part B Policy Deductible | Home Health Care | Private Room Package |
|--------------|----------------------------|-----------------------|-----------------------|----------------------------|-----------------------|------------------------------------|------------------|----------------------|
| All          | 629.56                     | 1,344.43              | 58.14                 | 181.31                     | 830.83                | 171.93                             | 699.81           | 418.80               |

These rates are intended for calendar year 2010.

The premium for a policy with a Policy Deductible on Usual and Customary excess charges is determined by adding the premium for Part A Deductible (if selected), Basic Part A Coverage, Basic Part B Coverage, Part B Deductible Coverage (if selected), Other Part B Coverage and subtracting the Per \$100 Part B Deductible times the Part B Deductible divided by 100.

\*To determine the Bank Draft (P.P.S.P.) or Payroll Deduction (P.R.D.), Semi-Annual, Quarterly or Monthly Direct Bill rates multiply the Annual Rates, as given above, by the appropriate factor shown below and add \$1.00:

0.08583 for Monthly Bank Draft/Payroll Deduction  
0.515 for Semi-Annual  
0.2625 for Quarterly  
0.09167 for Monthly Direct Bill

BANKERS LIFE AND CASUALTY COMPANY  
Chicago, Illinois

Policy Form GR-A020

Premium Rates

The enclosed rates are intended for calendar year 2010.

The total premium for a policy is obtained by:

- 1) Adding the premium for Basic Part A and Basic Part B Coverage;
- 2) Adding the premium for Part A Deductible Coverage (optional);
- 3) Adding the premium for Part B Deductible Coverage (optional);
- 4) Adding the premium for Other Part B Coverage (optional);
- 5) Subtracting the Per \$100 Part B Policy Deductible premium times the Part B Policy Deductible divided by 100 (optional);
- 6) Adding the premium for the Private Room Package (optional);

BANKERS LIFE AND CASUALTY COMPANY

Chicago, Illinois

Policy Form GR-A020

Annual Premium Rates\*

Male or Female

| Issue<br>Age | Part A Coverage |       | Part B Coverage |            |        | Per \$100<br>Part B Policy<br>Deductible | Private<br>Room<br>Package |
|--------------|-----------------|-------|-----------------|------------|--------|--|----------------------------|
|              | Deductible      | Basic | Basic           | Deductible | Other  |  |                            |
| All          | 589.52          | 58.91 | 1,309.84        | 159.27     | 802.25 | 140.68                                   | 404.61                     |

\* To determine the Bank Draft (P.P.S.P.) or Payroll Deduction (P.R.D.), Semi-Annual, Quarterly or Monthly Direct Bill rates multiply the Annual Rates, as given above, by the appropriate factor shown below and add \$1.00:

0.08583 for Monthly Bank Draft/Payroll Deduction  
 0.515 for Semi-Annual  
 0.2625 for Quarterly  
 0.09167 for Monthly Direct Bill

BANKERS LIFE AND CASUALTY COMPANY  
Chicago, Illinois

Policy Form GR-A020

Premium Rates

The enclosed rates are intended for calendar year 2010.

The total premium for a policy is obtained by:

- 1) Adding the premium for Basic Part A and Basic Part B Coverage;
- 2) Adding the premium for Part A Deductible Coverage (optional);
- 3) Adding the premium for Part B Deductible Coverage (optional);
- 4) Adding the premium for Other Part B Coverage (optional);
- 5) Subtracting the Per \$100 Part B Policy Deductible premium times the Part B Policy Deductible divided by 100 (optional);
- 6) Adding the premium for the Private Room Package (optional);

For inforce business, it is our expectation that premiums will not change for the first three policy years. If experience develops more adversely than anticipated we may require rate changes before that time. If required, these changes will be filed for approval.

BANKERS LIFE AND CASUALTY COMPANY

Chicago, Illinois

Policy Form GR-A020

Annual Premium Rates\*

1990 Issues

Male or Female

| Issue<br>Age | Part A Coverage |         | Part B Coverage |            |          | Per \$100<br>Part B Policy<br>Deductible | Private<br>Room<br>Package |
|--------------|-----------------|---------|-----------------|------------|----------|--|----------------------------|
|              | Deductible      | Basic   | Basic           | Deductible | Other    |  |                            |
| All          | \$498.21        | \$50.29 | \$1,065.26      | \$101.56   | \$652.25 | \$119.48                                 | \$342.11                   |

\* To determine the Bank Draft (P.P.S.P.) or Payroll Deduction (P.R.D.), Semi-Annual, Quarterly or Monthly Direct Bill rates multiply the Annual Rates, as given above, by the appropriate factor shown below and add \$1.00:

0.08583 for Monthly Bank Draft/Payroll Deduction  
 0.515 for Semi-Annual  
 0.2625 for Quarterly  
 0.09167 for Monthly Direct Bill

BANKERS LIFE AND CASUALTY COMPANY

Chicago, Illinois

Policy Form GR-A020

Annual Premium Rates\*

1991 Issues

Male or Female

| Issue<br>Age | Part A Coverage |         | Part B Coverage |            |          | Per \$100<br>Part B Policy<br>Deductible | Private<br>Room<br>Package |
|--------------|-----------------|---------|-----------------|------------|----------|--|----------------------------|
|              | Deductible      | Basic   | Basic           | Deductible | Other    |  |                            |
| All          | \$492.54        | \$49.42 | \$1,019.77      | \$135.49   | \$624.32 | \$119.48                                 | \$337.85                   |

\* To determine the Bank Draft (P.P.S.P.) or Payroll Deduction (P.R.D.), Semi-Annual, Quarterly or Monthly Direct Bill rates multiply the Annual Rates, as given above, by the appropriate factor shown below and add \$1.00:

0.08583 for Monthly Bank Draft/Payroll Deduction  
 0.515 for Semi-Annual  
 0.2625 for Quarterly  
 0.09167 for Monthly Direct Bill

BANKERS LIFE AND CASUALTY COMPANY

Chicago, Illinois

Policy Form GR-A020

Annual Premium Rates\*

1992 Issues

Male or Female

| Issue<br>Age | Part A Coverage |         | Part B Coverage |            |          | Per \$100<br>Part B Policy<br>Deductible | Private<br>Room<br>Package |
|--------------|-----------------|---------|-----------------|------------|----------|--|----------------------------|
|              | Deductible      | Basic   | Basic           | Deductible | Other    |  |                            |
| All          | \$482.72        | \$48.76 | \$1,001.88      | \$135.49   | \$613.09 | \$119.48                                 | \$331.09                   |

\* To determine the Bank Draft (P.P.S.P.) or Payroll Deduction (P.R.D.), Semi-Annual, Quarterly or Monthly Direct Bill rates multiply the Annual Rates, as given above, by the appropriate factor shown below and add \$1.00:

0.08583 for Monthly Bank Draft/Payroll Deduction  
 0.515 for Semi-Annual  
 0.2625 for Quarterly  
 0.09167 for Monthly Direct Bill

BANKERS LIFE AND CASUALTY COMPANY  
 Rate Sheet for P1-56566-A  
 Medicare Supplement Policy

\*Annual Premium Rates  
 For 2010 Benefit Levels

| <u>MALE AND FEMALE</u> |                        |                             |                      |                           |                      |
|------------------------|------------------------|-----------------------------|----------------------|---------------------------|----------------------|
| <u>AGE</u>             | BASIC<br>POLICY<br>(1) | PART A<br>DEDUCTIBLE<br>(2) | 20%<br>PART B<br>(3) | SKILLED<br>NURSING<br>(4) | MISC.<br>CASH<br>(5) |
| <u>All</u>             | <u>\$1,518.97</u>      | <u>\$363.16</u>             | <u>\$374.40</u>      | <u>\$268.91</u>           | <u>\$305.45</u>      |

- (1) Basic Policy Rates
- (2) Subtract this premium if Part A deductible is not to be included
- (3) With the base policy, pays 100% of billed charges up to a maximum of 120% of Medicare allowable charges
- (4) Pays Private Duty Nurse benefit and pays 12.5% of the Medicare Part A initial hospital deductible for 21st to 100th day of confinement in a non-Medicare approved skilled or intermediate nursing facility
- (5) Pays an additional \$30 for each day of hospital confinement

\* To determine the Bank Draft (P.P.S.P.) or Payroll Deduction (P.R.D.), Semi-Annual, Quarterly or Monthly Direct Bill rates multiply the Annual Rates, as given above, by the appropriate factor shown below and add \$1.00:

|         |  |
|---------|--|
| 0.08583 | for Monthly Bank Draft/Payroll Deduction |
| 0.515   | for Semi-Annual                          |
| 0.2625  | for Quarterly                            |
| 0.09167 | for Monthly Direct Bill                  |

BANKERS LIFE AND CASUALTY COMPANY  
 Rate Sheet for P1-67720-A  
 Medicare Supplement Policy

\*Annual Premium Rates  
 For 2010

| <u>AGE</u> | <u>PLAN 1</u> |
|------------|---------------|
| All        | \$1,277.55    |

| <u>AGE</u> | <u>PLAN 2</u> |
|------------|---------------|
| All        | \$1,874.71    |

| <u>AGE</u> | <u>PLAN 2 WITH<br/>SNF RIDER</u> |
|------------|----------------------------------|
| All        | \$2,640.85                       |

PLAN 3'S SKILLED NURSING FACILITY INDEMNITY BENEFIT

SELECTED INDEMNITY PER DAY  
 (Amount to be added to Plan 2 premium)

| <u>\$10</u> | <u>\$15</u> | <u>\$20</u> | <u>\$25</u> | <u>\$30</u> | <u>\$35</u> | <u>\$40</u> | <u>\$45</u> | <u>\$50</u> | <u>\$55</u> |
|-------------|-------------|-------------|-------------|-------------|-------------|-------------|-------------|-------------|-------------|
| \$3.70      | 5.55        | 7.40        | 9.25        | 11.10       | 12.95       | 14.80       | 16.65       | 18.50       | 20.35       |

BANKERS LIFE AND CASUALTY COMPANY  
Rate Sheet for P1-67720-A  
Medicare Supplement Policy

\*Annual Premium Rates  
PLAN DESCRIPTIONS

- Plan 1 Benefits: Plan 2 benefits except no skilled nursing facility or private duty nursing benefits and a \$200 deductible for Medicare Part B
- Plan 2 Benefits: Medicare Part B coinsurance with a \$0 deductible. For SNF benefits - Pays Medicare skilled nursing deductible for a Medicare approved skilled nursing facility, 21st to 100th days. Includes a private duty nurse benefit.
- SNF Rider: Pays Medicare skilled nursing deductible for a non-Medicare approved skilled and intermediate nursing facility, 1st to 100th days. Rider rate sheet is attached.
- Plan 3 Benefits: Pays amount selected for each day after 100th day of confinement in a medicare approved nursing home facility, for up to 730 days.

\* To determine the Bank Draft (P.P.S.P.) or Payroll Deduction (P.R.D.), Semi-Annual, Quarterly or Monthly Direct Bill rates multiply the Annual Rates, as given above, by the appropriate factor shown below and add \$1.00:

0.08583 for Monthly Bank Draft/Payroll Deduction  
0.515 for Semi-Annual  
0.2625 for Quarterly  
0.09167 for Monthly Direct Bill

BANKERS LIFE AND CASUALTY COMPANY  
Rate Sheet for Rider R1-54506-A  
To Be Used With Policy Form P1-67720-A  
Medicare Supplement - Excess Part B Benefit

Annual Premium Rates\*  
For 2010

DESCRIPTION

This optional benefit pays 100% of excess charges  
up to a maximum of 20% of Medicare allowable charges.

| <u>ISSUE<br/>AGE</u> | <u>BOTH MALE<br/>&amp; FEMALE</u> |
|----------------------|-----------------------------------|
| ALL                  | \$633.05                          |

\* To Determine the Bank Draft (P.P.S.P.) or Payroll Deduction  
(P.R.D.), Semi-Annual, Quarterly or Monthly Direct Bill rates  
multiply the Annual Rates, as given above, by the appropriate  
factor show below:

0.08583 for Monthly Bank Draft/Payroll Deduction  
0.515 for Semi-Annual  
0.2625 for Quarterly  
0.09167 for Monthly Direct Bill

BANKERS LIFE AND CASUALTY COMPANY  
Rate Sheet for Rider R1-68993-A  
To Be Used With Policy Form P1-67720-A  
Supplemental Nursing Facility Benefit Rider

Annual Premium Rates\*  
For 2010

DESCRIPTION

Pays Medicare skilled nursing deductible for a non-Medicare approved skilled and intermediate nursing facility, 1st-100th days. Premium amount to be added to Plan 2 premiums.

| <u>ISSUE<br/>AGE</u> | <u>BOTH MALE<br/>&amp; FEMALE</u> |
|----------------------|-----------------------------------|
| ALL                  | \$766.14                          |

\* To Determine the Bank Draft (P.P.S.P.) or Payroll Deduction (P.R.D.), Semi-Annual, Quarterly or Monthly Direct Bill rates multiply the Annual Rates, as given above, by the appropriate factor show below:

0.08583 for Monthly Bank Draft/Payroll Deduction  
0.515 for Semi-Annual  
0.2625 for Quarterly  
0.09167 for Monthly Direct Bill