

SERFF Tracking Number: AMRP-126908004 State: Arkansas
Filing Company: World Corp Insurance Company State Tracking Number: 47409
Company Tracking Number: AR-WCORPMS-2011
TOI: MS051 Individual Medicare Supplement - Sub-TOI: MS051.001 Plan A
Standard Plans
Product Name: World Corp MS - Std
Project Name/Number: 4/1/2011 Rate Adjustment/AR-WCORPMS-2011

Filing at a Glance

Company: World Corp Insurance Company

Product Name: World Corp MS - Std

TOI: MS051 Individual Medicare Supplement -
Standard Plans

Sub-TOI: MS051.001 Plan A

Filing Type: Rate

SERFF Tr Num: AMRP-126908004 State: Arkansas

SERFF Status: Closed-Approved-
Closed State Tr Num: 47409

Co Tr Num: AR-WCORPMS-2011 State Status: Approved-Closed

Authors: Susan Dop, Deb Strahl
Date Submitted: 11/29/2010

Reviewer(s): Stephanie Fowler
Disposition Date: 12/15/2010
Disposition Status: Approved-
Closed

Implementation Date Requested: 04/01/2011

Implementation Date: 04/01/2011

State Filing Description:

General Information

Project Name: 4/1/2011 Rate Adjustment

Project Number: AR-WCORPMS-2011

Requested Filing Mode:

Explanation for Combination/Other:

Submission Type: New Submission

Overall Rate Impact: 5.5%

Filing Status Changed: 12/15/2010

Status of Filing in Domicile:

Date Approved in Domicile:

Domicile Status Comments:

Market Type: Individual

Group Market Size:

Group Market Type:

Explanation for Other Group Market Type:

State Status Changed: 12/15/2010

Created By: Susan Dop

Corresponding Filing Tracking Number:

Deemer Date:

Submitted By: Susan Dop

Filing Description:

Rate Filing for Standardized Medicare Supplement Forms.

Company and Contact

Filing Contact Information

Susan Dop,
601 6th Ave.

Des Moines, IA 50309

susan.dop@americanenterprise.com

515-245-2034 [Phone]

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Filing Company Information

World Corp Insurance Company	CoCode: 79987	State of Domicile: Nebraska
11808 Grant Street	Group Code: 3527	Company Type: Life and Health
P O Box 3160	Group Name: American Enterprise	State ID Number:
Omaha, NE 68103-0160	FEIN Number: 56-0710065	
(402) 486-8289 ext. [Phone]		

Filing Fees

Fee Required? Yes
 Fee Amount: \$50.00
 Retaliatory? No
 Fee Explanation:
 Per Company: No

COMPANY	AMOUNT	DATE PROCESSED	TRANSACTION #
World Corp Insurance Company	\$50.00	11/29/2010	42402568

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Correspondence Summary

Dispositions

Status	Created By	Created On	Date Submitted
Approved-Closed	Stephanie Fowler	12/15/2010	12/15/2010

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Disposition

Disposition Date: 12/15/2010

Implementation Date: 04/01/2011

Status: Approved-Closed

Comment: The requested rate increase has been approved to be implemented on or after April 1, 2011. This approval is subject to the following:

- Increases will not be given more frequently than once in a twelve-month period;
- Both the insured and agent shall be notified by the insurer of its intention to increase the rate for renewal not less than thirty (30) days prior to the effective date of the renewal.

Rate data does NOT apply to filing.

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Schedule	Schedule Item	Schedule Item Status	Public Access
Supporting Document	Health - Actuarial Justification	Approved	No
Rate	AR Rates	Approved	Yes
Rate	AR Rates	Approved	Yes
Rate	AR Rates	Approved	Yes
Rate	AR Rates	Approved	Yes

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Rate/Rule Schedule

Schedule Item Status:	Document Name:	Affected Form Numbers: (Separated with commas)	Rate Action:	Rate Action Information:	Attachments
Approved 12/15/2010	AR Rates	A-2605	Revised	Previous State Filing Number: Percent Rate Change Request: 43311 5.500	AR_WCORP_Rates_2011.pdf
Approved 12/15/2010	AR Rates	A3110WC-AR	Revised	Previous State Filing Number: Percent Rate Change Request: 42831 7.000	
Approved 12/15/2010	AR Rates	A3111WC-AR	Revised	Previous State Filing Number: Percent Rate Change Request: 42830 5.500	
Approved 12/15/2010	AR Rates	A3112WC-AR	Other	Previous State Filing Number: Rate Action Other Explanation: 42829 no rate change	

WORLD CORP INSURANCE COMPANY
Plan: A-2605 2010 Attained Age Rates
ARKANSAS Table

Standard Class

64-89 2,321.17

Semi-Annual	=	.5 X Annual
Quarterly	=	.25 X Annual
Monthly Direct	=	.087 X Annual
Monthly PAC	=	.08334 X Annual

Zip Code Area Factors

71700-71799	1.00
71800-71899	1.05
72200-72299	1.16
72300-72599	1.05
72600-72999	1.00
ALL OTHERS	1.10

A factor of 0.85 is applied to all Preferred class policies.

WORLD CORP INSURANCE COMPANY
Plan: A-2605 2011 Attained Age Rates
ARKANSAS Table

Standard Class

64-89 2,448.84

Semi-Annual = .5 X Annual
Quarterly = .25 X Annual
Monthly Direct = .087 X Annual
Monthly PAC = .08334 X Annual

Zip Code Area Factors

71700-71799 1.00
71800-71899 1.05
72200-72299 1.16
72300-72599 1.05
72600-72999 1.00
ALL OTHERS 1.10

A factor of 0.85 is applied to all Preferred class policies.

World Corp Insurance Company
2010 Annual Community Age Rates
Form: A3110WC
Plan A

	STANDARD ANNUAL COMMUNITY SINGLE	STANDARD ANNUAL COMMUNITY COUPLE
64-99	1,621.69	1,432.97

Semi-Annual	=	.5 X Annual
Quarterly	=	.25 X Annual
Monthly Direct	=	.087 X Annual
Monthly PAC	=	.08334 X Annual

Zip Code Area Factors

71700-71799	0.99
71800-71899	1.04
72200-72299	1.15
72300-72599	1.04
72600-72999	0.99
ALL OTHERS	1.10

A factor of 0.85 is applied to all Preferred class policies.

World Corp Insurance Company
2011 Annual Community Age Rates
Form: A3110WC
Plan A
Arkansas

	STANDARD ANNUAL COMMUNITY SINGLE	STANDARD ANNUAL COMMUNITY COUPLE
64-99	1,735.21	1,533.28

Semi-Annual	=	.5 X Annual
Quarterly	=	.25 X Annual
Monthly Direct	=	.087 X Annual
Monthly PAC	=	.08334 X Annual

Zip Code Area Factors

71700-71799	0.99
71800-71899	1.04
72200-72299	1.15
72300-72599	1.04
72600-72999	0.99
ALL OTHERS	1.10

A factor of 0.85 is applied to all Preferred class policies.

World Corp Insurance Company
2010 Annual Community Age Rates
Form: A3111WC
Plan F
Arkansas

	STANDARD ANNUAL COMMUNITY SINGLE	STANDARD ANNUAL COMMUNITY COUPLE
64-99	2,193.47	1,938.21

Semi-Annual	=	.5 X Annual
Quarterly	=	.25 X Annual
Monthly Direct	=	.087 X Annual
Monthly PAC	=	.08334 X Annual

Zip Code Area Factors

71700-71799	0.99
71800-71899	1.04
72200-72299	1.15
72300-72599	1.04
72600-72999	0.99
ALL OTHERS	1.10

A factor of 0.85 is applied to all Preferred class policies.

World Corp Insurance Company
2011 Annual Community Age Rates
Form: A3111WC
Plan F
Arkansas

	STANDARD ANNUAL COMMUNITY SINGLE	STANDARD ANNUAL COMMUNITY COUPLE
64-99	2,314.11	2,044.81

Semi-Annual	=	.5 X Annual
Quarterly	=	.25 X Annual
Monthly Direct	=	.087 X Annual
Monthly PAC	=	.08334 X Annual

Zip Code Area Factors

71700-71799	0.99
71800-71899	1.04
72200-72299	1.15
72300-72599	1.04
72600-72999	0.99
ALL OTHERS	1.10

A factor of 0.85 is applied to all Preferred class policies.

World Corp Insurance Company
2010 Annual Community Age Rates
Form: A3112WC
Plan High Deductible F (HDF)
Arkansas

	STANDARD ANNUAL COMMUNITY SINGLE	STANDARD ANNUAL COMMUNITY COUPLE
64-99	916.74	810.07

Semi-Annual	=	.5 X Annual
Quarterly	=	.25 X Annual
Monthly Direct	=	.087 X Annual
Monthly PAC	=	.08334 X Annual

Zip Code Area Factors

71700-71799	0.99
71800-71899	1.04
72200-72299	1.15
72300-72599	1.04
72600-72999	0.99
ALL OTHERS	1.10

A factor of 0.85 is applied to all Preferred class policies.

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Standard Plans
Product Name: World Corp MS - Std
Project Name/Number: 4/1/2011 Rate Adjustment/AR-WCORPMS-2011

Supporting Document Schedules

	Item Status:	Status
Satisfied - Item: Health - Actuarial Justification	Approved	12/15/2010
Comments:		
Attachments:		
AR_WCORPMS_coverltr_2011.pdf		
AR_WCORP_Filing_2011.pdf		



P. O. Box 2155
Omaha, Nebraska 68103-2155
800.822.9993

November 29, 2010

Mr. John Shields
Arkansas Department of Insurance
1200 West 3rd Street
Little Rock AR 72201-1904

RE: NAIC Company # 79987
Rate Filing for Standardized Medicare Supplement Forms A2605, A3110WC-AR,
A3111WC-AR, and A3112WC-AR

Dear Mr. John Shields:

Enclosed are rates submitted for filing on the above Standardized Medicare Supplement forms. This revised schedule of rates represents an increase to the rates currently on file with your department.

The enclosed actuarial memorandum demonstrates the need for the following increases:

- 5.5% - A2605
- 7.0% - A3110WC-AR
- 5.5% - A3111WC-AR
- 0.0% - A3112WC-AR

The proposed effective date for this increase is April 1, 2011.

We look forward to receiving your notification of approval. If you have any questions or concerns, please contact me at the e-mail address or telephone number listed below.

Sincerely,

A handwritten signature in blue ink, appearing to read "Susan Dop", is written over a light blue circular stamp.

Susan L. Dop
Pricing Supervisor
American Republic Insurance Company
(515) 245-2034 phone
Susan.Dop@AmericanEnterprise.com

World Corp Insurance Company
2011 Rate Justification

Medicare Supplement Standardized Policy Forms
Issued Prior to June 1, 2010: A-2605 (Plan F)

Forms issued 6/1/2010 and later: A3110WC (Plan A), A3111WC (Plan F),
A3112WC (High Deductible Plan F)

1. **General Summary of Benefits:** Plan A contains coverage for the following set of "core" benefits: (1) the Part A coinsurance plus an additional 365 days of hospital coverage after the Medicare benefits are exhausted, and (2) Part B coinsurance (20% of Medicare-approved expenses), and (3) the first three pints of blood. All policies issued 6/1/2010 and after contain a hospice benefit.

Plan F provides coverage for (1) the above-listed "core" benefits, (2) skilled nursing coinsurance for days 21 through 100, (3) the Part A deductible, (4) the Part B deductible, (5) Part B excess charges above the Medicare-approved amounts, and (6) emergency care during foreign travel subject to a \$250 deductible per calendar year and 20% coinsurance.

High Deductible Plan F provides all of the benefits in standardized Plan F after the calendar year deductible has been met.

2. **Renewability and Issue Ages:** These individual policies are guaranteed renewable for life. Issue ages vary by state according to regulatory requirements. In most states, policies are issued to applicants between the ages of 65 through 84; however, there is no issue-age limit on applicants aged 65 and above who are eligible for open enrollment. The states of Colorado, Oregon, Oklahoma, Pennsylvania, Kansas, Texas, Maryland, Michigan, Mississippi, Missouri, New Hampshire, North Carolina, Georgia, Tennessee, and South Dakota require open enrollment for disableds under age 65. We also consider under-age-65 applicants in the state of Kentucky.
3. **Marketing Period and Distribution Method:** We began marketing these policy forms in late 2006 through an agency distribution system, except for forms A3110WC, A3111WC, and A3112WC which were introduced in 2010. Form A-2605 is closed to new sales effective 5/31/2010. Plans A, F, and High Deductible F are open to new sales.
4. **Underwriting:** Except for the guaranteed issue open enrollees, a simplified "yes/no" field application is used.
5. **Active Life Reserves:** We use a community rating methodology; therefore no policy reserves are held.

6. **Benefit Changes and Trend:** The Part A deductible is anticipated to be \$1,134, a 3.1% increase over the 2010 deductible of \$1,100. The Part A trend for the hospital deductible and coinsurance is anticipated to be 3.1%. The skilled nursing coinsurance trend is assumed to be 6.7%. The Part B deductible is expected to increase to \$162 from its current level of \$155 per calendar year. The trend in the Part B deductible claim cost is expected to be 4.5%. The Part B coinsurance costs are expected to increase 7.1% due to inflation and higher utilization. A trend rate of zero is expected for the Part B excess benefit and preventive care. Based on the expected trend for each of the components, the overall nationwide average increase in claim costs is expected for 2011 to be: Plan A—7.0%; Plan F—6.2%.

7. **Rate Justification and Requested Increase:** Plan A: Policy Form A-2600 is closed and has no policyholders in force nationwide.

Plan F: Policy Form A-2605. The inception-to-date and projected experience on this plan is attached. Experience has been much worse than expected on this form which is still in its early durations. We took experience adjustments in 2009 and 2010. We are requesting a 5.5% rate increase, which is slightly less than expected benefit changes and trend, in all states.

2010 Plan A Policy form A3110WC. This form was introduced in 2010. We have no policies in force nationwide. We are requesting a 7% rate increase for expected benefit changes and trend.

2010 Plan F Policy form A3111WC. This form was introduced in 2010. We have no policies in force nationwide. We are requesting a 5.5% rate increase in all states, which is slightly less than expected benefit changes and trend.

2010 High Deductible Plan F Policy form A3112WC. This form was introduced in 2010. We have no policies in force nationwide. We are requesting no rate increase at this time in all states.

8. **Proposed Effective Date:** The proposed effective date is a policyholder's first renewal date following the later of April 1, 2011 or approval by the Insurance Department. We will continue to monitor the experience on these policy forms for appropriate rate changes in the future.
9. **Rate Tables:** The current and proposed rate tables are attached.
10. **Minimum Loss Ratio Requirement:** A 65% minimum lifetime loss ratio is required on these policy forms.
11. **Certification:** I hereby certify that to the best of my knowledge and judgment this rate justification is in compliance with the applicable laws and regulations of this state. The premiums are not excessive, inadequate or unfairly discriminatory and are reasonable and adequate in relation to the benefits provided. I also certify

that the premium rates for these forms are reasonably similar to those of other policies with comparable benefits. The loss ratio is expected to meet or exceed the minimum allowed in this state.

A handwritten signature in blue ink that reads "Christopher L. Aasland". The signature is fluid and cursive, with the first name being the most prominent.

11/17/2010
Date

Christopher L. Aasland, FSA MAAA
Vice President & Actuary

**RERATE HISTORY
ARKANSAS**

Form	2008		2009		2010		2011 Proposed	
	%	Eff. Date	%	Eff. Date	%	Eff. Date	%	Eff. Date
A-2600	10.3%	01/01/08	10.3%	01/01/09	6.5%	01/01/10	Closed-no inforce	
A-2605	8.4%	01/01/08	11.0%	01/01/09	15.0%	01/01/10	5.5%	04/01/11
A-2611		01/01/08	8.6%	01/01/09	6.2%	01/01/10	Closed-no inforce	
A-2612		01/01/08	8.5%	01/01/09	6.5%	01/01/10	Closed-no inforce	
A3110WC							7.0%	04/01/11
A3111WC							5.5%	04/01/11
A3112WC							0.0%	04/01/11

Policies in force as of 9/30/2010

State	Plan	Policies
AR	A2605	2
AR	A3110WC	0
AR	A3111WC	0
AR	A3112WC	0

EXHIBIT 1a

Policy Form A-2605
Inception-To-Date Experience
As of Sept 30, 2010
Nationwide

Year	Written Premium	Earned Premium	Cash Claims	Incurred Claims*	Loss Ratio
2006	2,327	1,059	0	232	21.9%
2007	249,735	203,119	123,513	157,068	77.3%
2008	765,131	738,298	582,228	660,395	89.4%
2009	710,102	726,455	650,148	582,277	80.2%
Sep-10	387,961	402,445	315,589	315,275	78.3%

* This form does not have policy reserves.

Durational Analysis
Inception to Date Experience By Policy Duration

2006 - Sept 30, 2010

	Earned Premium	Incurred Claims	Actual Loss Ratio	Minimum Loss Ratio**
Business Less Than 3 Years	1,865,096	1,589,195	85.2%	
Business 3 Years and Older	206,280	126,052	61.1%	
Total	2,071,376	1,715,247	82.8%	65.0%

2010 YTD Experience By Duration

	Earned Premium	Incurred Claims	Actual Loss Ratio	Minimum Loss Ratio**
Business Less Than 3 Years	199,456	189,818	95.2%	
Business 3 Years and Older	202,989	125,457	61.8%	65.0%

**Percent of premium subject to a 65% loss ratio requirement: 100.0%
Inception to Date Loss Ratio Requirement: 65.0%

EXHIBIT 2 PAGE 1
Projected Results for 2011 and Later
Without Requested Rate Change
 Policy Form A-2605

Calendar Year	Without Discounting			Discounted			Cumulative Loss Ratio
	Earned Premium	Incurred Claims	Loss Ratio	Earned Premium	Incurred Claims	Loss Ratio	
2006	1,059	232	21.9%	1,320	289	21.9%	21.9%
2007	203,119	157,068	77.3%	240,942	186,316	77.3%	77.0%
2008	738,298	660,395	89.4%	834,075	746,066	89.4%	86.7%
2009	726,455	582,277	80.2%	781,614	626,489	80.2%	83.9%
2010 Estimate	536,593	420,366	78.3%	549,845	430,747	78.3%	82.6%
2011	502,045	413,954	82.5%	489,946	403,978	82.5%	82.6%
2012	469,271	397,856	84.8%	436,154	369,779	84.8%	82.9%
2013	446,456	382,232	85.6%	395,190	338,340	85.6%	83.2%
2014	424,750	367,220	86.5%	358,073	309,574	86.5%	83.5%
2015	404,100	352,799	87.3%	324,442	283,253	87.3%	83.8%
2016	384,453	338,944	88.2%	293,970	259,171	88.2%	84.0%
2017	365,762	325,632	89.0%	266,360	237,136	89.0%	84.3%
2018	344,025	309,289	89.9%	238,600	214,509	89.9%	84.6%
2019	319,861	290,389	90.8%	211,277	191,810	90.8%	84.8%
2020	293,936	269,474	91.7%	184,907	169,519	91.7%	85.0%
2021	266,934	247,124	92.6%	159,925	148,056	92.6%	85.2%
2022	239,527	223,929	93.5%	136,671	127,771	93.5%	85.4%
2023	214,934	202,911	94.4%	116,799	110,265	94.4%	85.6%
2024	192,866	183,866	95.3%	99,816	95,158	95.3%	85.8%
2025	173,063	166,608	96.3%	85,302	82,121	96.3%	85.9%
Total For Projection Period Only	5,041,984	4,472,228	88.7%	3,797,431	3,340,441	88.0%	
Grand Total Since Inception	7,247,509	6,292,567	86.8%	6,205,227	5,330,348	85.9%	

	Lapse Rate	Loss of Selection	Premium Assumptions	
1	12.0%	2.5%	Attained Age Increase	1.8%
2	12.0%	0.0%	Rerate Trend-Yrs 2012 &After	6.2%
3	12.0%	0.0%	Lapse Rate	See Table
4	12.0%	0.0%	Rerate Effectiveness*	70.0%
5	12.0%	0.0%	Prior Year Rerate	14.8%
6	12.0%	0.0%		
7	12.0%	0.0%	Claims Assumptions	
8	13.0%	0.0%	Cost of Aging	2.8%
9	14.0%	0.0%	Claims Trend	6.2%
10	15.0%	0.0%	Loss of Selection Cost	See Table
11	16.0%	0.0%	Lapse Rate	See Table
12	17.0%	0.0%		
13	17.0%	0.0%	Discount Rate	5.0%
14	17.0%	0.0%		
15	17.0%	0.0%		

Earned Prem (1st proj. yr) =
 Prior yr EP X (1-Lapse) X (1+ Attained Age Increase) X (1+ ((1- Rerate Effectiveness) x Prior year rerate))

Earned Premium (2nd projected year) =
 Prior yr EP X (1-Lapse) X (1+ Attained Age Increase) X (1+ (Rerate Effectiveness x Rerate Trend))

Earned Prem. (3rd+ proj. year) =
 Prior yr EP X (1-Lapse) X (1+ Attained Age Increase) X (1+ Rerate Trend)

Incurred Claims (all proj. year) =
 Prior yr IC X (1-Lapse) X (1+ Cost of Aging) X (1+Loss of Selection Cost) X (1+Claims Trend)

*Based our distribution by mode, only 70.0% of a rate change is realized in the following calendar year due to lags in policyholder renewal dates.

EXHIBIT 1b

Historical Experience by Duration
Policy Form A-2605

Nationwide

Duration	6 Months	18 Months	30 Months	42 Months	54 Months	66 Months	78 Months	90+ Months
<u>2009</u>								
Earned Premium	7,878	334,271	381,015	3,291	0	0	0	0
Incurred Claims	13,262	262,437	305,983	595	0	0	0	0
Loss Ratio	168.3%	78.5%	80.3%	18.1%	0.0%	0.0%	0.0%	0.0%
<u>2008</u>								
Earned Premium	297,351	437,939	3,008	0	0	0	0	0
Incurred Claims	271,335	386,610	2,450	0	0	0	0	0
Loss Ratio	91.3%	88.3%	81.4%	0.0%	0.0%	0.0%	0.0%	0.0%
<u>2007</u>								
Earned Premium	198,613	4,505	0	0	0	0	0	0
Incurred Claims	153,175	3,893	0	0	0	0	0	0
Loss Ratio	77.1%	86.4%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
<u>2006</u>								
Earned Premium	1,059	0	0	0	0	0	0	0
Incurred Claims	232	0	0	0	0	0	0	0
Loss Ratio	21.9%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
<u>TOTAL</u>								
Earned Premium	504,902	776,715	384,023	3,291	0	0	0	0
Incurred Claims	438,005	652,940	308,433	595	0	0	0	0
Loss Ratio	86.8%	84.1%	80.3%	18.1%	0.0%	0.0%	0.0%	0.0%

A3110WC, A3111WC and A3112WC were filed in 2009 and approved to begin sales 6/1/2010. It is our intention to increase rates for 2011 benefit changes and trend.

We have no policies in force nationwide. We currently do not have any experience on this form.



P. O. Box 2155
 Omaha, Nebraska 68103-2155
 800.822.9993

Premium Information for Medicare Supplement Plans
 A (A3110WC), F (A3111WC), and High Deductible F (A3112WC)

Policy Form A3110WC-AR (Plan A)-- for ages 65-89

Zip Code		71700-71799	71800-71899		
Areas		72600-72999	72300-72599	72200-72299	All Others
Monthly Check-o- Matic	Preferred Couple	107.53	112.96	124.91	119.48
	Preferred Single	121.69	127.84	141.36	135.21
	Standard Couple	126.51	132.89	146.95	140.56
	Standard Single	143.17	150.40	166.30	159.07
Quarterly	Preferred Couple	322.56	338.85	374.70	358.40
	Preferred Single	365.04	383.48	424.04	405.61
	Standard Couple	379.49	398.65	440.82	421.65
	Standard Single	429.46	451.15	498.87	477.18
Semi-Annual	Preferred Couple	645.13	677.71	749.39	716.81
	Preferred Single	730.09	766.96	848.08	811.21
	Standard Couple	758.97	797.31	881.64	843.30
	Standard Single	858.93	902.31	997.75	954.37
Annual	Preferred Couple	1,290.26	1,355.42	1,498.78	1,433.62
	Preferred Single	1,460.18	1,533.93	1,696.17	1,622.42
	Standard Couple	1,517.95	1,594.61	1,763.27	1,686.61
	Standard Single	1,717.86	1,804.62	1,995.49	1,908.73
Monthly Direct	Preferred Couple	112.25	117.92	130.39	124.72
	Preferred Single	127.04	133.45	147.57	141.15
	Standard Couple	132.06	138.73	153.40	146.73
	Standard Single	149.45	157.00	173.61	166.06

Policy Form A3111WC-AR (Plan F)-- for ages 65-89

	Zip Code Areas	71700-71799	71800-71899	72200-72299	All Others
		72600-72999	72300-72599		
Monthly Check-o-Matic	Preferred Couple	143.40	150.65	166.58	159.34
	Preferred Single	162.29	170.49	188.52	180.32
	Standard Couple	168.71	177.23	195.98	187.46
	Standard Single	190.93	200.57	221.79	212.14
Quarterly	Preferred Couple	430.18	451.90	499.70	477.97
	Preferred Single	486.83	511.42	565.51	540.92
	Standard Couple	506.09	531.65	587.88	562.32
	Standard Single	572.74	601.67	665.31	636.38
Semi-Annual	Preferred Couple	860.35	903.81	999.40	955.95
	Preferred Single	973.66	1,022.84	1,131.02	1,081.85
	Standard Couple	1,012.18	1,063.30	1,175.77	1,124.65
	Standard Single	1,145.48	1,203.34	1,330.61	1,272.76
Annual	Preferred Couple	1,720.71	1,807.61	1,998.80	1,911.90
	Preferred Single	1,947.32	2,045.67	2,262.04	2,163.69
	Standard Couple	2,024.36	2,126.60	2,351.53	2,249.29
	Standard Single	2,290.97	2,406.67	2,661.23	2,545.52
Monthly Direct	Preferred Couple	149.70	157.26	173.90	166.34
	Preferred Single	169.42	177.97	196.80	188.24
	Standard Couple	176.12	185.01	204.58	195.69
	Standard Single	199.31	209.38	231.53	221.46

Policy Form A3112WC-AR (Plan High Deductible F)-- for ages 65-89

	Zip Code Areas	71700-71799	71800-71899	72200-72299	All Others
		72600-72999	72300-72599		
Monthly Check-o-Matic	Preferred Couple	56.81	59.68	65.99	63.12
	Preferred Single	64.29	67.54	74.68	71.44
	Standard Couple	66.84	70.21	77.64	74.26
	Standard Single	75.64	79.46	87.86	84.04
Quarterly	Preferred Couple	170.42	179.03	197.96	189.35
	Preferred Single	192.86	202.60	224.03	214.29
	Standard Couple	200.49	210.62	232.90	222.77
	Standard Single	226.89	238.35	263.56	252.10
Semi-Annual	Preferred Couple	340.84	358.05	395.92	378.71
	Preferred Single	385.72	405.20	448.06	428.58
	Standard Couple	400.98	421.24	465.79	445.54
	Standard Single	453.79	476.70	527.13	504.21
Annual	Preferred Couple	681.67	716.10	791.84	757.42
	Preferred Single	771.44	810.40	896.11	857.15
	Standard Couple	801.97	842.47	931.58	891.08
	Standard Single	907.57	953.41	1,054.25	1,008.41
Monthly Direct	Preferred Couple	59.31	62.30	68.89	65.90
	Preferred Single	67.11	70.50	77.96	74.57
	Standard Couple	69.77	73.30	81.05	77.52
	Standard Single	78.96	82.95	91.72	87.73