

SERFF Tracking Number: AMLC-126502047 State: Arkansas
 Filing Company: Liberty National Life Insurance Company State Tracking Number: 44860
 Company Tracking Number: 2010LNLARPROCARE
 TOI: MS08I Individual Medicare Supplement - Sub-TOI: MS08I.001 Plan A 2010
 Standard Plans 2010
 Product Name: 2010 LNL Individual Standardized Medicare Supplement
 Project Name/Number: 2010 LNL Rate Filing/2010LNLARProcure

Filing at a Glance

Company: Liberty National Life Insurance Company

Product Name: 2010 LNL Individual Standardized Medicare Supplement SERFF Tr Num: AMLC-126502047 State: Arkansas

TOI: MS08I Individual Medicare Supplement - Standard Plans 2010 SERFF Status: Closed-Approved- Closed State Tr Num: 44860

Sub-TOI: MS08I.001 Plan A 2010 Co Tr Num: 2010LNLARPROCARE State Status: Approved-Closed
 Filing Type: Rate Reviewer(s): Stephanie Fowler

Author: Sue Fisher

Disposition Date: 03/30/2010

Date Submitted: 02/16/2010

Disposition Status: Approved-Closed

Implementation Date Requested: 06/01/2010

Implementation Date: 06/01/2010

State Filing Description:

General Information

Project Name: 2010 LNL Rate Filing
 Project Number: 2010LNLARProcure
 Requested Filing Mode: Review & Approval

Status of Filing in Domicile: Pending

Date Approved in Domicile:

Domicile Status Comments: A filing was submitted to Nebraska our state of Domicile on February 15, 2010 and is pending review.

Explanation for Combination/Other:

Market Type: Individual

Submission Type: New Submission

Group Market Size:

Overall Rate Impact:

Group Market Type:

Filing Status Changed: 03/30/2010

Explanation for Other Group Market Type:

State Status Changed: 03/16/2010

Deemer Date:

Created By: Sue Fisher

Submitted By: Sue Fisher

Corresponding Filing Tracking Number:

Filing Description:

Attached is our 2010 Rate Filing for Individual Standardized Medicare Supplement Policy Forms. We are requesting rate changes by policy form as indicated on our Rate Filing Summary Pages and as listed below. There are currently no policies in force.

SERFF Tracking Number: AMLC-126502047 State: Arkansas
 Filing Company: Liberty National Life Insurance Company State Tracking Number: 44860
 Company Tracking Number: 2010LNLARPROCARE
 TOI: MS081 Individual Medicare Supplement - Sub-TOI: MS081.001 Plan A 2010
 Standard Plans 2010
 Product Name: 2010 LNL Individual Standardized Medicare Supplement
 Project Name/Number: 2010 LNL Rate Filing/2010LNLARProcure

LMSA06, LMSA10 +1.4% Average
 LMSB06, LMSB10 +0.45% Average
 LMSF06, LMSF10 +1.8% Average
 LMSHDF06, LMSHDF10 +1.3% Average
 LDMSB06, LDMSB10 +45.4% Average

An Actuarial Memorandum, premium rate schedule, and other supporting documentation are provided for your consideration.

Company and Contact

Filing Contact Information

Sue Fisher, Rate Compliance Specialist sfisher@torchmarkcorp.com
 3700 S. Stonebridge Drive 972-569-3241 [Phone]
 McKinney, TX 75070 972-569-3679 [FAX]

Filing Company Information

Liberty National Life Insurance Company CoCode: 65331 State of Domicile: Nebraska
 2001 Third Avenue South Group Code: 290 Company Type: Life and Health
 Birmingham, AL 35233 Group Name: Liberty National Life State ID Number:
 (800) 288-2722 ext. 2912[Phone] FEIN Number: 63-0124600

Filing Fees

Fee Required? Yes
 Fee Amount: \$250.00
 Retaliatory? No
 Fee Explanation: \$50.00 x 5 forms = \$250.00
 Per Company: No

COMPANY	AMOUNT	DATE PROCESSED	TRANSACTION #
Liberty National Life Insurance Company	\$250.00	02/16/2010	34216390

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 Standard Plans 2010
 Product Name: 2010 LNL Individual Standardized Medicare Supplement
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Correspondence Summary

Dispositions

Status	Created By	Created On	Date Submitted
Approved-Closed	Stephanie Fowler	03/30/2010	03/30/2010
Approved-Closed	Stephanie Fowler	03/16/2010	03/16/2010

Filing Notes

Subject	Note Type	Created By	Created On	Date Submitted
Increase notices	Note To Reviewer	Sue Fisher	03/30/2010	03/30/2010
Approval status	Note To Filer	Stephanie Fowler	03/30/2010	03/30/2010

SERFF Tracking Number: AMLC-126502047 State: Arkansas
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 TOI: MS08I Individual Medicare Supplement - Standard Plans 2010 Sub-TOI: MS08I.001 Plan A 2010
 Product Name: 2010 LNL Individual Standardized Medicare Supplement
 Project Name/Number: 2010 LNL Rate Filing/2010LNLARProcure

Disposition

Disposition Date: 03/30/2010

Implementation Date: 06/01/2010

Status: Approved-Closed

Comment: Thank you for your cooperation. Please see our original Disposition notice for more detailed approval 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):
Liberty National Life Insurance Company	%	%	\$	0	\$	%	%

SERFF Tracking Number: AMLC-126502047 State: Arkansas
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 Company Tracking Number: 2010LNLARPROCARE
 TOI: MS08I Individual Medicare Supplement - Sub-TOI: MS08I.001 Plan A 2010
 Standard Plans 2010
 Product Name: 2010 LNL Individual Standardized Medicare Supplement
 Project Name/Number: 2010 LNL Rate Filing/2010LNLARProcure

Schedule	Schedule Item	Schedule Item Status	Public Access
Supporting Document	Health - Actuarial Justification	Accepted for Informational Purposes	No
Supporting Document	2010 LNL LMSA Supporting Documents	Accepted for Informational Purposes	No
Supporting Document	2010 LNL LMSB Supporting Documents	Accepted for Informational Purposes	No
Supporting Document	2010 LNL LMSF Supporting Documents	Accepted for Informational Purposes	No
Supporting Document	2010 LNL LMSHDF Supporting Documents	Accepted for Informational Purposes	No
Supporting Document	2010 LNL LDMSB Supporting Documents	Accepted for Informational Purposes	No
Rate	2010 LNL LMSA Rate Page	Approved	Yes
Rate	2010 LNL LMSB Rate Page	Approved	Yes
Rate	2010 LNL LMSF Rate Page	Approved	Yes
Rate	2010 LNL LMSHDF Rate Page	Approved	Yes
Rate	2010 LNL LDMSB Rate Page	Approved	Yes

SERFF Tracking Number: AMLC-126502047 State: Arkansas
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 Company Tracking Number: 2010LNLARPROCARE
 TOI: MS08I Individual Medicare Supplement - Standard Plans 2010 Sub-TOI: MS08I.001 Plan A 2010
 Product Name: 2010 LNL Individual Standardized Medicare Supplement
 Project Name/Number: 2010 LNL Rate Filing/2010LNLARProcure

Disposition

Disposition Date: 03/16/2010

Implementation Date: 06/01/2010

Status: Approved-Closed

Comment:

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):
Liberty National Life Insurance Company	%	%	\$	0	\$	%	%

SERFF Tracking Number: AMLC-126502047 State: Arkansas
 Filing Company: Liberty National Life Insurance Company State Tracking Number: 44860
 Company Tracking Number: 2010LNLARPROCARE
 TOI: MS08I Individual Medicare Supplement - Sub-TOI: MS08I.001 Plan A 2010
 Standard Plans 2010
 Product Name: 2010 LNL Individual Standardized Medicare Supplement
 Project Name/Number: 2010 LNL Rate Filing/2010LNLARProcure

Schedule	Schedule Item	Schedule Item Status	Public Access
Supporting Document	Health - Actuarial Justification	Accepted for Informational Purposes	No
Supporting Document	2010 LNL LMSA Supporting Documents	Accepted for Informational Purposes	No
Supporting Document	2010 LNL LMSB Supporting Documents	Accepted for Informational Purposes	No
Supporting Document	2010 LNL LMSF Supporting Documents	Accepted for Informational Purposes	No
Supporting Document	2010 LNL LMSHDF Supporting Documents	Accepted for Informational Purposes	No
Supporting Document	2010 LNL LDMSB Supporting Documents	Accepted for Informational Purposes	No
Rate	2010 LNL LMSA Rate Page	Approved	Yes
Rate	2010 LNL LMSB Rate Page	Approved	Yes
Rate	2010 LNL LMSF Rate Page	Approved	Yes
Rate	2010 LNL LMSHDF Rate Page	Approved	Yes
Rate	2010 LNL LDMSB Rate Page	Approved	Yes

SERFF Tracking Number: AMLC-126502047 *State:* Arkansas
Filing Company: Liberty National Life Insurance Company *State Tracking Number:* 44860
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Standard Plans 2010
Product Name: 2010 LNL Individual Standardized Medicare Supplement
Project Name/Number: 2010 LNL Rate Filing/2010LNLARProcure

Note To Reviewer

Created By:

Sue Fisher on 03/30/2010 02:41 PM

Last Edited By:

Sue Fisher

Submitted On:

03/30/2010 02:41 PM

Subject:

Increase notices

Comments:

As indicated in our rate filing, there are no inforce policies on any of these plans.

SERFF Tracking Number: AMLC-126502047 *State:* Arkansas
Filing Company: Liberty National Life Insurance Company *State Tracking Number:* 44860
Company Tracking Number: 2010LNLARPROCARE
TOI: MS08I Individual Medicare Supplement - *Sub-TOI:* MS08I.001 Plan A 2010
Standard Plans 2010
Product Name: 2010 LNL Individual Standardized Medicare Supplement
Project Name/Number: 2010 LNL Rate Filing/2010LNLARProcure

Note To Filer

Created By:

Stephanie Fowler on 03/30/2010 10:11 AM

Last Edited By:

Stephanie Fowler

Submitted On:

03/30/2010 10:11 AM

Subject:

Approval status

Comments:

The approval of this filing is revoked. This filing was approved in error and will need further review. Please advise if any increase notices have been sent to the insureds.

Thank you,
Stephanie Fowler

SERFF Tracking Number: AMLC-126502047 State: Arkansas
 Filing Company: Liberty National Life Insurance Company State Tracking Number: 44860
 Company Tracking Number: 2010LNLARPROCARE
 TOI: MS08I Individual Medicare Supplement - Standard Plans 2010 Sub-TOI: MS08I.001 Plan A 2010
 Product Name: 2010 LNL Individual Standardized Medicare Supplement
 Project Name/Number: 2010 LNL Rate Filing/2010LNLARProcure

Rate Information

Rate data applies to filing.

Filing Method: SERFF
 Rate Change Type: Increase
 Overall Percentage of Last Rate Revision: %
 Effective Date of Last Rate Revision:
 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):
Liberty National Life Insurance Company	%	%		0		%	%

SERFF Tracking Number: AMLC-126502047 State: Arkansas
 Filing Company: Liberty National Life Insurance Company State Tracking Number: 44860
 Company Tracking Number: 2010LNLARPROCARE
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 Product Name: 2010 LNL Individual Standardized Medicare Supplement
 Project Name/Number: 2010 LNL Rate Filing/2010LNLARProcure

Rate/Rule Schedule

Schedule Item Status:	Document Name:	Affected Form Numbers: (Separated with commas)	Rate Action:	Rate Action Information:	Attachments
Approved 03/16/2010	LNL LMSA Rate Page	LMSA06, LMSA10	Revised	Previous State Filing Number: Percent Rate Change Request: 1.400	2010 LNL AR LMSA Rate Page.pdf
Approved 03/16/2010	LNL LMSB Rate Page	LMSB06, LMSB10	Revised	Previous State Filing Number: Percent Rate Change Request: 0.450	2010 LNL AR LMSB Rate Page.pdf
Approved 03/16/2010	LNL LMSF Rate Page	LMSF06, LMSF10	Revised	Previous State Filing Number: Percent Rate Change Request: 1.800	2010 LNL AR LMSF Rate Page.pdf
Approved 03/16/2010	LNL LMSHDF Rate Page	LMSHDF06, LMSHDF10	Revised	Previous State Filing Number: Percent Rate Change Request: 1.300	2010 LNL AR LMSHDF Rate Page.pdf
Approved 03/16/2010	LNL LDMSB Rate Page	LDMSB06, LDMSB10	Revised	Previous State Filing Number: Percent Rate Change Request: 45.400	2010 LNL AR LDMSB Rate Page.pdf

LIBERTY NATIONAL LIFE INSURANCE COMPANY
McKinney, Texas

Policy Form LMSA06 / LMSA10

2010 Annual Medicare Rate Filing

ARKANSAS

Annual Premium Rates
For Policies Issued with Issue Age Rates

Issue Age	Current Annual Base Rate	Proposed Annual Rate
65 and Over	\$1,660	\$1,684

Modal Premium Formulas:

Semi-Annual = Annual / 2 (rounded to near dollar)

Quarterly = Annual / 4 (rounded to near dollar)

Monthly = Annual / 12 (rounded to near dollar)

For Company Use: Plan Code YA8

LIBERTY NATIONAL LIFE INSURANCE COMPANY
McKinney, Texas

Policy Form LMSB06 / LMSB10

2010 Annual Medicare Rate Filing

ARKANSAS

Annual Premium Rates
For Policies Issued with Issue Age Rates

Issue Age	Current Annual Base Rate	Proposed Annual Rate
65 and Over	\$2,430	\$2,441

Modal Premium Formulas:

Semi-Annual = Annual / 2 (rounded to near dollar)

Quarterly = Annual / 4 (rounded to near dollar)

Monthly = Annual / 12 (rounded to near dollar)

For Company Use: Plan Code YB8

LIBERTY NATIONAL LIFE INSURANCE COMPANY
McKinney, Texas

Policy Form LMSF06 / LMSF10

2010 Annual Medicare Rate Filing

ARKANSAS

Annual Premium Rates
For Policies Issued with Issue Age Rates

Issue Age	Current Annual Base Rate	Proposed Annual Rate
65 and Over	\$2,798	\$2,847

Modal Premium Formulas:

Semi-Annual = Annual / 2 (rounded to near dollar)

Quarterly = Annual / 4 (rounded to near dollar)

Monthly = Annual / 12 (rounded to near dollar)

For Company Use: Plan Code YC8

LIBERTY NATIONAL LIFE INSURANCE COMPANY
McKinney, Texas

Policy Form LMSHDF06 / LMSHDF10

2010 Annual Medicare Rate Filing

ARKANSAS

Annual Premium Rates
For Policies Issued with Issue Age Rates

Issue Age	Current Annual Base Rate	Proposed Annual Rate
65 and Over	\$1,000	\$1,013

Modal Premium Formulas:

Semi-Annual = Annual / 2 (rounded to near dollar)

Quarterly = Annual / 4 (rounded to near dollar)

Monthly = Annual / 12 (rounded to near dollar)

For Company Use: Plan Code YD8

LIBERTY NATIONAL LIFE INSURANCE COMPANY
McKinney, Texas

Policy Form LDMSB06 / LDMSB10

2010 Annual Medicare Rate Filing

ARKANSAS

Annual Premium Rates
For Policies Issued with Issue Age Rates

Issue Age	Current Annual Base Rate	Proposed Annual Rate
64 and Under	\$4,380	\$6,369

Modal Premium Formulas:

Semi-Annual = Annual / 2 (rounded to near dollar)
Quarterly = Annual / 4 (rounded to near dollar)
Monthly = Annual / 12 (rounded to near dollar)

For Company Use: Plan Code YF8

**LIBERTY NATIONAL LIFE INSURANCE COMPANY
McKinney, Texas**

**POLICY FORMS LMSA06 AND LMSA10
INDIVIDUAL STANDARDIZED MEDICARE SUPPLEMENT PLAN A**

**2010 RATE FILING
NO INFORCE POLICIES IN ANY STATE**

ACTUARIAL MEMORANDUM

This actuarial memorandum contains a general description of some policy provisions; it does not change the policy. Benefits are paid as specified in the complete policy.

BENEFITS

This policy supplements Medicare and provides benefits for:

- 1) Part A Coinsurance beginning with the 61st day
 - 2) 100% of hospital expenses, for 365 days lifetime, following exhaustion of Medicare benefits
 - 3) Part A Hospice cost sharing
 - 4) Blood Deductible (Parts A and B)
 - 5) Part B Coinsurance
-

RENEWABILITY

This policy is guaranteed renewable for life, subject to the company's right to change premiums by class.

MARKETING METHOD AND ELIGIBILITY

This is an individual standardized Medicare supplement policy form that will be marketed by licensed agents to persons eligible for Medicare.

NATIONWIDE ISSUE YEARS

This is a new product that has not been issued in any state.

APPLICATION OF RATES

The schedule of proposed premium rates applies to all policies in your state and is intended to be effective for calendar year 2010.

SCOPE AND REASON

The purpose of this rate filing is to demonstrate that the anticipated loss ratio of this product, reflecting any increase in premium rates, meets the minimum requirements of your state. This rate filing is not intended to be used for any other purpose.

This rate filing is submitted in compliance with your state's Medicare supplement annual rate filing requirements and applies to all policies in your state. The change in premiums requested for your state is shown on the Rate Filing Summary.

DETERMINATION OF RATES

Proposed premium rates for 2010 were determined based on historical experience of an affiliated company. These premium rates were set to achieve at least the minimum loss ratio.

PREMIUM COMPARISON

The current premium rates are included on the schedule of proposed premium rates.

EXPERIENCE

Experience is not applicable. This is a new product that has not yet been issued in any state.

LOSS RATIO

The minimum loss ratio is 65%.

CERTIFICATION

I am a member of the American Academy of Actuaries and meet its Qualification Standards to render this opinion.

I hereby certify, to the best of my knowledge and judgment, that this rate filing is in compliance with the applicable laws and regulations of this state and that the benefits of the policies are reasonable in relation to the premiums charged because they are expected to meet or exceed loss ratio requirements.

2/8/10
Date

Peter G. Hendee
Peter G. Hendee, FSA, MAAA
Health Actuary

**LIBERTY NATIONAL LIFE INSURANCE COMPANY
McKinney, Texas**

**POLICY FORMS LMSB06 AND LMSB10
INDIVIDUAL STANDARDIZED MEDICARE SUPPLEMENT PLAN B**

**2010 RATE FILING
NO INFORCE POLICIES IN ANY STATE**

ACTUARIAL MEMORANDUM

This actuarial memorandum contains a general description of some policy provisions; it does not change the policy. Benefits are paid as specified in the complete policy.

BENEFITS

This policy supplements Medicare and provides benefits for:

- 1) Part A Coinsurance beginning with the 61st day
- 2) 100% of hospital expenses, for 365 days lifetime, following exhaustion of Medicare benefits
- 3) Part A Hospice cost sharing
- 4) Part A Inpatient Hospital Deductible
- 5) Blood Deductible (Parts A and B)
- 6) Part B Coinsurance

RENEWABILITY

This policy is guaranteed renewable for life, subject to the company's right to change premiums by class.

MARKETING METHOD AND ELIGIBILITY

This is an individual standardized Medicare supplement policy form that will be marketed by licensed agents to persons eligible for Medicare.

NATIONWIDE ISSUE YEARS

This is a new product that has not been issued in any state.

APPLICATION OF RATES

The schedule of proposed premium rates applies to all policies in your state and is intended to be effective for calendar year 2010.

SCOPE AND REASON

The purpose of this rate filing is to demonstrate that the anticipated loss ratio of this product, reflecting any increase in premium rates, meets the minimum requirements of your state. This rate filing is not intended to be used for any other purpose.

This rate filing is submitted in compliance with your state's Medicare supplement annual rate filing requirements and applies to all policies in your state. The change in premiums requested for your state is shown on the Rate Filing Summary.

DETERMINATION OF RATES

Proposed premium rates for 2010 were determined based on historical experience of an affiliated company. These premium rates were set to achieve at least the minimum loss ratio.

PREMIUM COMPARISON

The current premium rates are included on the schedule of proposed premium rates.

EXPERIENCE

Experience is not applicable. This is a new product that has not yet been issued in any state.

LOSS RATIO

The minimum loss ratio is 65%.

CERTIFICATION

I am a member of the American Academy of Actuaries and meet its Qualification Standards to render this opinion.

I hereby certify, to the best of my knowledge and judgment, that this rate filing is in compliance with the applicable laws and regulations of this state and that the benefits of the policies are reasonable in relation to the premiums charged because they are expected to meet or exceed loss ratio requirements.

2/8/10
Date

Peter G. Hendee
Peter G. Hendee, FSA, MAAA
Health Actuary

**LIBERTY NATIONAL LIFE INSURANCE COMPANY
McKinney, Texas**

**POLICY FORMS LMSF06 AND LMSF10
INDIVIDUAL STANDARDIZED MEDICARE SUPPLEMENT PLAN F**

**2010 RATE FILING
NO INFORCE POLICIES IN ANY STATE**

ACTUARIAL MEMORANDUM

This actuarial memorandum contains a general description of some policy provisions; it does not change the policy. Benefits are paid as specified in the complete policy.

BENEFITS

This policy supplements Medicare and provides benefits for:

- 1) Part A Coinsurance beginning with the 61st day
- 2) 100% of hospital expenses, for 365 days lifetime, following exhaustion of Medicare benefits
- 3) Part A Hospice cost sharing
- 4) Part A Inpatient Hospital Deductible
- 5) Skilled Nursing Facility Coinsurance
- 6) Blood Deductible (Parts A and B)
- 7) Part B Coinsurance
- 8) Part B Calendar Year Deductible
- 9) 100% Part B Excess Expense
- 10) Foreign Travel Emergency

RENEWABILITY

This policy is guaranteed renewable for life, subject to the company's right to change premiums by class.

MARKETING METHOD AND ELIGIBILITY

This is an individual standardized Medicare supplement policy form that will be marketed by licensed agents to persons eligible for Medicare.

NATIONWIDE ISSUE YEARS

This is a new product that has not been issued in any state.

APPLICATION OF RATES

The schedule of proposed premium rates applies to all policies in your state and is intended to be effective for calendar year 2010.

SCOPE AND REASON

The purpose of this rate filing is to demonstrate that the anticipated loss ratio of this product, reflecting any increase in premium rates, meets the minimum requirements of your state. This rate filing is not intended to be used for any other purpose.

This rate filing is submitted in compliance with your state's Medicare supplement annual rate filing requirements and applies to all policies in your state. The change in premiums requested for your state is shown on the Rate Filing Summary.

DETERMINATION OF RATES

Proposed premium rates for 2010 were determined based on historical experience of an affiliated company. These premium rates were set to achieve at least the minimum loss ratio.

PREMIUM COMPARISON

The current premium rates are included on the schedule of proposed premium rates.

EXPERIENCE

Experience is not applicable. This is a new product that has not yet been issued in any state.

LOSS RATIO

The minimum loss ratio is 65%.

CERTIFICATION

I am a member of the American Academy of Actuaries and meet its Qualification Standards to render this opinion.

I hereby certify, to the best of my knowledge and judgment, that this rate filing is in compliance with the applicable laws and regulations of this state and that the benefits of the policies are reasonable in relation to the premiums charged because they are expected to meet or exceed loss ratio requirements.

2/8/10
Date

Peter G. Hendee
Peter G. Hendee, FSA, MAAA
Health Actuary

**LIBERTY NATIONAL LIFE INSURANCE COMPANY
McKinney, Texas**

**POLICY FORMS LMSHDF06 AND LMSHDF10
INDIVIDUAL STANDARDIZED MEDICARE SUPPLEMENT HIGH DEDUCTIBLE PLAN F**

**2010 RATE FILING
NO INFORCE POLICIES IN ANY STATE**

ACTUARIAL MEMORANDUM

This actuarial memorandum contains a general description of some policy provisions; it does not change the policy. Benefits are paid as specified in the complete policy.

BENEFITS

This policy supplements Medicare and, after a calendar year deductible, provides benefits for:

- 1) Part A Coinsurance beginning with the 61st day
- 2) 100% of hospital expenses, for 365 days lifetime, following exhaustion of Medicare benefits
- 3) ~~Part A-Hospice-cost sharing~~
- 4) Part A Inpatient Hospital Deductible
- 5) Skilled Nursing Facility Coinsurance
- 6) Blood Deductible (Parts A and B)
- 7) Part B Coinsurance
- 8) Part B Calendar Year Deductible
- 9) 100% Part B Excess Expense
- 10) Foreign Travel Emergency

RENEWABILITY

This policy is guaranteed renewable for life, subject to the company's right to change premiums by class.

MARKETING METHOD AND ELIGIBILITY

This is an individual standardized Medicare supplement policy form that will be marketed by licensed agents to persons eligible for Medicare.

NATIONWIDE ISSUE YEARS

This is a new product that has not been issued in any state.

APPLICATION OF RATES

The schedule of proposed premium rates applies to all policies in your state and is intended to be effective for calendar year 2010.

SCOPE AND REASON

The purpose of this rate filing is to demonstrate that the anticipated loss ratio of this product, reflecting any increase in premium rates, meets the minimum requirements of your state. This rate filing is not intended to be used for any other purpose.

This rate filing is submitted in compliance with your state's Medicare supplement annual rate filing requirements and applies to all policies in your state. The change in premiums requested for your state is shown on the Rate Filing Summary.

DETERMINATION OF RATES

Proposed premium rates for 2010 were determined based on historical experience of an affiliated company. These premium rates were set to achieve at least the minimum loss ratio.

PREMIUM COMPARISON

The current premium rates are included on the schedule of proposed premium rates.

EXPERIENCE

Experience is not applicable. This is a new product that has not yet been issued in any state.

LOSS RATIO

The minimum loss ratio is 65%.

CERTIFICATION

I am a member of the American Academy of Actuaries and meet its Qualification Standards to render this opinion.

I hereby certify, to the best of my knowledge and judgment, that this rate filing is in compliance with the applicable laws and regulations of this state and that the benefits of the policies are reasonable in relation to the premiums charged because they are expected to meet or exceed loss ratio requirements.

2/8/10

Date

Peter G. Hendee

Peter G. Hendee, FSA, MAAA
Health Actuary

**LIBERTY NATIONAL LIFE INSURANCE COMPANY
McKinney, Texas**

**POLICY FORMS LDMSB06 AND LDMSB10
INDIVIDUAL STANDARDIZED MEDICARE SUPPLEMENT PLAN B (FOR DISABLED LIVES)**

**2010 RATE FILING
NO INFORCE POLICIES IN ANY STATE**

ACTUARIAL MEMORANDUM

This actuarial memorandum contains a general description of some policy provisions; it does not change the policy. Benefits are paid as specified in the complete policy.

BENEFITS

This policy supplements Medicare and provides benefits for:

- 1) Part A Coinsurance beginning with the 61st day
- 2) 100% of hospital expenses, for 365 days lifetime, following exhaustion of Medicare benefits
- 3) Part A Hospice cost sharing
- 4) Part A Inpatient Hospital Deductible
- 5) Blood Deductible (Parts A and B)
- 6) Part B Coinsurance

RENEWABILITY

This policy is guaranteed renewable for life, subject to the company's right to change premiums by class.

MARKETING METHOD AND ELIGIBILITY

This is an individual standardized Medicare supplement policy form that will be marketed by licensed agents to persons eligible for Medicare due to disability.

NATIONWIDE ISSUE YEARS

This is a new product that has not been issued in any state.

APPLICATION OF RATES

The schedule of proposed premium rates applies to all policies in your state and is intended to be effective for calendar year 2010.

SCOPE AND REASON

The purpose of this rate filing is to demonstrate that the anticipated loss ratio of this product, reflecting any increase in premium rates, meets the minimum requirements of your state. This rate filing is not intended to be used for any other purpose.

This rate filing is submitted in compliance with your state's Medicare supplement annual rate filing requirements and applies to all policies in your state. The change in premiums requested for your state is shown on the Rate Filing Summary.

DETERMINATION OF RATES

Proposed premium rates for 2010 were determined based on historical experience of an affiliated company. These premium rates were set to achieve at least the minimum loss ratio.

PREMIUM COMPARISON

The current premium rates are included on the schedule of proposed premium rates.

EXPERIENCE

Experience is not applicable. This is a new product that has not yet been issued in any state.

LOSS RATIO

The minimum loss ratio is 65%.

CERTIFICATION

I am a member of the American Academy of Actuaries and meet its Qualification Standards to render this opinion.

I hereby certify, to the best of my knowledge and judgment, that this rate filing is in compliance with the applicable laws and regulations of this state and that the benefits of the policies are reasonable in relation to the premiums charged because they are expected to meet or exceed loss ratio requirements.

2/8/10
Date

Peter G. Hendee
Peter G. Hendee, FSA, MAAA
Health Actuary

LIBERTY NATIONAL LIFE INSURANCE COMPANY

McKinney, Texas

Policy Forms **LMSA06 / LMSA10**
Individual Standardized Medicare Supplement Policy Forms

2010 Rate Filing Summary

ARKANSAS

Original Approval Dates LMSA06 LMSA10	June 23, 2009 January 13, 2010	
Proposed Percentage of Rate Change Issue Age	1.4 % Average	
Proposed Effective Date	June 1, 2010	
Application of Rates	New Business	
Number of Policies In-Force 4th Quarter 2009 Issue Age Attained Age Under Age Total	<p align="center"><u>ARKANSAS</u></p> <p align="right">0 0 0 <hr/>0</p>	<p align="center"><u>NATIONWIDE</u></p> <p align="right">0 0 0 <hr/>0</p>

LIBERTY NATIONAL LIFE INSURANCE COMPANY
McKinney, Texas

POLICY FORMS LMSA06 AND LMSA10
INDIVIDUAL STANDARDIZED MEDICARE SUPPLEMENT PLAN A

2010 RATE FILING

PROJECTION OF ONE YEAR OF ISSUE BASED ON NATIONWIDE DATA

Policy Year	Earned Premium	Incurred Claims	Loss Ratio
1	1,000,000	598,000	0.598
2	695,716	446,650	0.642
3	524,481	356,647	0.680
4	416,856	283,879	0.681
5	342,090	233,305	0.682
6	292,155	199,542	0.683
7	257,060	175,315	0.682
8	230,334	157,318	0.683
9	208,122	141,523	0.680
10	185,533	125,791	0.678
11	166,378	112,305	0.675
12	149,202	100,263	0.672
13	133,798	89,377	0.668
14	119,843	79,336	0.662
15	107,216	70,548	0.658
16	95,806	62,657	0.654
17*	85,448	55,541	0.650
18*	75,054	48,785	0.650
19*	65,497	42,573	0.650
20*	56,642	36,818	0.650
21*	48,279	31,381	0.650
22*	40,932	26,606	0.650
23*	34,375	22,344	0.650
24*	28,634	18,612	0.650
25*	23,406	15,214	0.650
26*	18,915	12,295	0.650
27*	15,076	9,800	0.650
28*	11,837	7,694	0.650
29*	9,134	5,937	0.650
30*	6,884	4,474	0.650
31*	5,076	3,300	0.650
32*	3,699	2,405	0.650
33*	2,664	1,732	0.650
34*	1,894	1,231	0.650
35*	1,323	860	0.650
Total	5,459,361	3,580,059	0.656

The projection is based on \$1,000,000 of annual premium issued at the beginning of the year.

* Rate increases are limited where necessary to maintain a 65% loss ratio.

LIBERTY NATIONAL LIFE INSURANCE COMPANY
McKinney, Texas

POLICY FORMS LMSA06 AND LMSA10
INDIVIDUAL STANDARDIZED MEDICARE SUPPLEMENT PLAN A

2010 RATE FILING

ACTUARIAL PARAMETERS FOR
PROJECTION OF ONE YEAR OF ISSUE BASED ON NATIONWIDE DATA

LAPSE RATES:

<u>Duration</u>	<u>Lapse Rate</u>	<u>Duration</u>	<u>Lapse Rate</u>	<u>Duration</u>	<u>Lapse Rate</u>
1	0.354	13	0.155	25	0.215
2	0.300	14	0.156	26	0.228
3	0.262	15	0.157	27	0.239
4	0.238	16	0.156	28	0.253
5	0.207	17	0.161	29	0.267
6	0.183	18	0.165	30	0.282
7	0.168	19	0.171	31	0.299
8	0.161	20	0.176	32	0.310
9	0.159	21	0.184	33	0.331
10	0.154	22	0.190	34	0.341
11	0.154	23	0.199	35	1.000
12	0.154	24	0.208		

PREMIUM TREND:⁽¹⁾

<u>Plan</u>	<u>Years 2011+ Premium Trend⁽²⁾</u>
A	6.0%

⁽¹⁾ Rate increases are projected to be effective January 1 of each year.

⁽²⁾ For attained age rates, the increase in premiums as attained age increases is also recognized.
 Premium trend is limited where necessary to maintain a 65% loss ratio.

CLAIMS TREND:⁽³⁾

Price and Utilization Changes: 6.0%

Selection by Duration

<u>Duration</u>	<u>Selection</u>
1	0.870
2	0.940
3+	1.000

⁽³⁾ In addition to price and utilization changes and selection by duration, the increase in claims as attained age increases is recognized.

LIBERTY NATIONAL LIFE INSURANCE COMPANY

McKinney, Texas

Policy Forms **LMSB06** and **LMSB10** Individual Standardized Medicare Supplement Policy Forms

2010 Rate Filing Summary

ARKANSAS

Original Approval Dates LMSB06 LMSB10	June 23, 2009 January 13, 2010	
Proposed Percentage of Rate Change Issue Age	0.45 % Average	
Proposed Effective Date	June 1, 2010	
Application of Rates	New Business	
Number of Policies In-Force 4th Quarter 2009	<u>ARKANSAS</u>	<u>NATIONWIDE</u>
Issue Age	0	0
Attained Age	0	0
Under Age	0	0
Total	<hr style="width: 50%; margin: 0 auto;"/> 0	<hr style="width: 50%; margin: 0 auto;"/> 0

LIBERTY NATIONAL LIFE INSURANCE COMPANY
McKinney, Texas

POLICY FORMS LMSB06 AND LMSB10
INDIVIDUAL STANDARDIZED MEDICARE SUPPLEMENT PLAN B

2010 RATE FILING

PROJECTION OF ONE YEAR OF ISSUE BASED ON NATIONWIDE DATA

Policy Year	Earned Premium	Incurred Claims	Loss Ratio
1	1,000,000	585,000	0.585
2	695,716	437,605	0.629
3	524,481	350,353	0.668
4	416,856	279,710	0.671
5	342,090	230,226	0.673
6	292,155	197,497	0.676
7	257,060	174,030	0.677
8	230,334	156,397	0.679
9	208,122	141,315	0.679
10	185,533	125,977	0.679
11	166,378	112,971	0.679
12	149,202	101,159	0.678
13	133,798	90,715	0.678
14	119,843	81,134	0.677
15	107,216	72,478	0.676
16	95,806	64,669	0.675
17	85,712	57,770	0.674
18	76,227	51,225	0.672
19	67,469	45,069	0.668
20	59,287	39,367	0.664
21	51,784	33,970	0.656
22	44,791	29,114	0.650
23*	38,043	24,728	0.650
24*	32,000	20,800	0.650
25*	26,485	17,215	0.650
26*	21,652	14,074	0.650
27*	17,460	11,349	0.650
28*	13,922	9,049	0.650
29*	10,877	7,070	0.650
30*	8,309	5,401	0.650
31*	6,193	4,026	0.650
32*	4,554	2,960	0.650
33*	3,301	2,146	0.650
34*	2,345	1,524	0.650
35*	1,638	1,065	0.650
Total	5,496,640	3,579,158	0.651

The projection is based on \$1,000,000 of annual premium issued at the beginning of the year.

* Rate increases are limited where necessary to maintain a 65% loss ratio.

LIBERTY NATIONAL LIFE INSURANCE COMPANY
McKinney, Texas

POLICY FORMS LMSB06 AND LMSB10
INDIVIDUAL STANDARDIZED MEDICARE SUPPLEMENT PLAN B

2010 RATE FILING

ACTUARIAL PARAMETERS FOR
PROJECTION OF ONE YEAR OF ISSUE BASED ON NATIONWIDE DATA

LAPSE RATES:

<u>Duration</u>	<u>Lapse Rate</u>	<u>Duration</u>	<u>Lapse Rate</u>	<u>Duration</u>	<u>Lapse Rate</u>
1	0.354	13	0.155	25	0.215
2	0.300	14	0.156	26	0.228
3	0.262	15	0.157	27	0.239
4	0.238	16	0.156	28	0.253
5	0.207	17	0.161	29	0.267
6	0.183	18	0.165	30	0.282
7	0.168	19	0.171	31	0.299
8	0.161	20	0.176	32	0.310
9	0.159	21	0.184	33	0.331
10	0.154	22	0.190	34	0.341
11	0.154	23	0.199	35	1.000
12	0.154	24	0.208		

PREMIUM TREND:⁽¹⁾

<u>Plan</u>	<u>Years 2011+ Premium Trend⁽²⁾</u>
B	6.0%

⁽¹⁾ Rate increases are projected to be effective January 1 of each year.

⁽²⁾ For attained age rates, the increase in premiums as attained age increases is also recognized. Premium trend is limited where necessary to maintain a 65% loss ratio.

CLAIMS TREND:⁽³⁾

Price and Utilization Changes: 6.0%

Selection by Duration

<u>Duration</u>	<u>Selection</u>
1	0.870
2	0.940
3+	1.000

⁽³⁾ In addition to price and utilization changes and selection by duration, the increase in claims as attained age increases is recognized.

LIBERTY NATIONAL LIFE INSURANCE COMPANY
McKinney, Texas

Policy Forms **LMSF06 and LMSF10**
Individual Standardized Medicare Supplement Policy Forms

2010 Rate Filing Summary

ARKANSAS

Original Approval Dates LMSF06 LMSF10	June 23, 2009 January 13, 2010	
Proposed Percentage of Rate Change Issue Age	1.8 % Average	
Proposed Effective Date	June 1, 2010	
Application of Rates	New Business	
Number of Policies In-Force 4th Quarter 2009	<u>ARKANSAS</u>	<u>NATIONWIDE</u>
Issue Age	0	0
Attained Age	0	0
Under Age	0	0
Total	----- 0	----- 0

LIBERTY NATIONAL LIFE INSURANCE COMPANY
McKinney, Texas

POLICY FORMS LMSF06 AND LMSF10
INDIVIDUAL STANDARDIZED MEDICARE SUPPLEMENT PLAN F

2010 RATE FILING

PROJECTION OF ONE YEAR OF ISSUE BASED ON NATIONWIDE DATA

Policy Year	Earned Premium	Incurred Claims	Loss Ratio
1	1,000,000	569,000	0.569
2	695,716	427,865	0.615
3	524,481	343,011	0.654
4	416,856	273,874	0.657
5	342,090	226,806	0.663
6	292,155	195,159	0.668
7	257,060	172,744	0.672
8	230,334	155,706	0.676
9	208,122	140,899	0.677
10	185,533	126,348	0.681
11	166,378	113,803	0.684
12	149,202	102,501	0.687
13	133,798	92,053	0.688
14	119,843	82,452	0.688
15	107,216	74,086	0.691
16	95,806	66,298	0.692
17	85,712	59,913	0.699
18	76,227	53,664	0.704
19	67,469	47,835	0.709
20	59,287	42,391	0.715
21	51,784	37,233	0.719
22	44,791	32,384	0.723
23	38,458	27,920	0.726
24	32,653	23,706	0.726
25	27,413	19,874	0.725
26	22,810	16,492	0.723
27	18,666	13,496	0.723
28	15,057	10,886	0.723
29	11,923	8,632	0.724
30	9,264	6,716	0.725
31	7,050	5,119	0.726
32	5,239	3,814	0.728
33	3,832	2,801	0.731
34	2,717	1,994	0.734
32	1,898	1,393	0.734
Total	5,506,839	3,578,867	0.650

The projection is based on \$1,000,000 of annual premium issued at the beginning of the year.

LIBERTY NATIONAL LIFE INSURANCE COMPANY
McKinney, Texas

POLICY FORMS LMSF06 AND LMSF10
INDIVIDUAL STANDARDIZED MEDICARE SUPPLEMENT PLAN F

2010 RATE FILING

ACTUARIAL PARAMETERS FOR
PROJECTION OF ONE YEAR OF ISSUE BASED ON NATIONWIDE DATA

LAPSE RATES:

<u>Duration</u>	<u>Lapse Rate</u>	<u>Duration</u>	<u>Lapse Rate</u>	<u>Duration</u>	<u>Lapse Rate</u>
1	0.354	13	0.155	25	0.215
2	0.300	14	0.156	26	0.228
3	0.262	15	0.157	27	0.239
4	0.238	16	0.156	28	0.253
5	0.207	17	0.161	29	0.267
6	0.183	18	0.165	30	0.282
7	0.168	19	0.171	31	0.299
8	0.161	20	0.176	32	0.310
9	0.159	21	0.184	33	0.331
10	0.154	22	0.190	34	0.341
11	0.154	23	0.199	35	1.000
12	0.154	24	0.208		

PREMIUM TREND:⁽¹⁾

<u>Plan</u>	<u>Years 2011+ Premium Trend⁽²⁾</u>
F	6.0%

⁽¹⁾ Rate increases are projected to be effective January 1 of each year.

⁽²⁾ For attained age rates, the increase in premiums as attained age increases is also recognized.

CLAIMS TREND:⁽³⁾

Price and Utilization Changes: 6.0%

Selection by Duration

<u>Duration</u>	<u>Selection</u>
1	0.870
2	0.940
3+	1.000

⁽³⁾ In addition to price and utilization changes and selection by duration, the increase in claims as attained age increases is recognized.

LIBERTY NATIONAL LIFE INSURANCE COMPANY

McKinney, Texas

Policy Forms **LMSA06 / LMSA10**
Individual Standardized Medicare Supplement Policy Forms

2010 Rate Filing Summary

ARKANSAS

Original Approval Dates LMSA06 LMSA10	June 23, 2009 January 13, 2010	
Proposed Percentage of Rate Change Issue Age	1.4 % Average	
Proposed Effective Date	June 1, 2010	
Application of Rates	New Business	
Number of Policies In-Force 4th Quarter 2009 Issue Age Attained Age Under Age Total	<u>ARKANSAS</u> 0 0 0 <hr/> 0	<u>NATIONWIDE</u> 0 0 0 <hr/> 0

LIBERTY NATIONAL LIFE INSURANCE COMPANY

McKinney, Texas

Policy Forms **LMSB06 and LMSB10**
Individual Standardized Medicare Supplement Policy Forms

2010 Rate Filing Summary

ARKANSAS

Original Approval Dates LMSB06 LMSB10	June 23, 2009 January 13, 2010	
Proposed Percentage of Rate Change Issue Age	0.45 % Average	
Proposed Effective Date	June 1, 2010	
Application of Rates	New Business	
Number of Policies In-Force 4th Quarter 2009	<u>ARKANSAS</u>	<u>NATIONWIDE</u>
Issue Age	0	0
Attained Age	0	0
Under Age	0	0
Total	<hr style="width: 50px; margin: 0 auto;"/> 0	<hr style="width: 50px; margin: 0 auto;"/> 0

LIBERTY NATIONAL LIFE INSURANCE COMPANY
 McKinney, Texas

Policy Forms **LMSF06 and LMSF10**
 Individual Standardized Medicare Supplement Policy Forms

2010 Rate Filing Summary

ARKANSAS

Original Approval Dates LMSF06 LMSF10	June 23, 2009 January 13, 2010	
Proposed Percentage of Rate Change Issue Age	1.8 % Average	
Proposed Effective Date	June 1, 2010	
Application of Rates	New Business	
Number of Policies In-Force 4th Quarter 2009	<u>ARKANSAS</u>	<u>NATIONWIDE</u>
Issue Age	0	0
Attained Age	0	0
Under Age	0	0
Total	----- 0	----- 0

LIBERTY NATIONAL LIFE INSURANCE COMPANY
 McKinney, Texas

Policy Forms **LMSHDF06 and LMSHDF10**
 Individual Standardized Medicare Supplement Policy Forms

2010 Rate Filing Summary

ARKANSAS

Original Approval Dates LMSHDF06 LMSHDF10	June 23, 2009 January 13, 2010	
Proposed Percentage of Rate Change Issue Age	1.3 % Average	
Proposed Effective Date	June 1, 2010	
Application of Rates	New Business	
Number of Policies In-Force 4th Quarter 2009	<u>ARKANSAS</u>	<u>NATIONWIDE</u>
Issue Age	0	0
Attained Age	0	0
Under Age	0	0
Total	<hr/> 0	<hr/> 0

LIBERTY NATIONAL LIFE INSURANCE COMPANY

McKinney, Texas

Policy Forms **LDMSB06 and LDMSB10**
Individual Standardized Medicare Supplement Policy Forms

2010 Rate Filing Summary

ARKANSAS

Original Approval Dates LDMSB06 LDMSB10	June 23, 2009 January 13, 2010	
Proposed Percentage of Rate Change Under Age	45.4 %	
Proposed Effective Date	June 1, 2010	
Application of Rates	New Business	
Number of Policies In-Force 4th Quarter 2009 Under Age Total	<p align="center"><u>ARKANSAS</u></p> <p align="center">0</p> <hr/> <p align="center">0</p>	<p align="center"><u>NATIONWIDE</u></p> <p align="center">0</p> <hr/> <p align="center">0</p>

LIBERTY NATIONAL LIFE INSURANCE COMPANY

McKinney, Texas

Policy Forms **LDMSC06 and LDMSC10**
Individual Standardized Medicare Supplement Policy Forms

2010 Rate Filing Summary

ARKANSAS

Original Approval Dates LDMSC06 LDMSC10		
Proposed Percentage of Rate Change Under Age	0 %	
Proposed Effective Date	June 1, 2010	
Application of Rates	New Business	
Number of Policies In-Force 4th Quarter 2009 Under Age Total	<p align="center"><u>ARKANSAS</u></p> <p align="center">0</p> <hr/> <p align="center">0</p>	<p align="center"><u>NATIONWIDE</u></p> <p align="center">0</p> <hr/> <p align="center">0</p>

LIBERTY NATIONAL LIFE INSURANCE COMPANY

McKinney, Texas

Policy Forms **LDMSF06 and LDMSF10**
Individual Standardized Medicare Supplement Policy Forms

2010 Rate Filing Summary

ARKANSAS

Original Approval Dates LDMSF06 LDMSF10		
Proposed Percentage of Rate Change Under Age	0 %	
Proposed Effective Date	June 1, 2010	
Application of Rates	New Business	
Number of Policies In-Force 4th Quarter 2009 Under Age Total	<u>ARKANSAS</u> 0 <hr/> 0	<u>NATIONWIDE</u> 0 <hr/> 0

LIBERTY NATIONAL LIFE INSURANCE COMPANY
 McKinney, Texas

Policy Forms **LDMSHDF06 and LDMSHDF10**
 Individual Standardized Medicare Supplement Policy Forms

2010 Rate Filing Summary

ARKANSAS

Original Approval Dates LDMSHDF06 LDMSHDF10		
Proposed Percentage of Rate Change Under Age	0 %	
Proposed Effective Date	June 1, 2010	
Application of Rates	New Business	
Number of Policies In-Force 4th Quarter 2009 Under Age Total	<p align="center"><u>ARKANSAS</u></p> <p align="center">0</p> <hr/> <p align="center">0</p>	<p align="center"><u>NATIONWIDE</u></p> <p align="center">0</p> <hr/> <p align="center">0</p>

LIBERTY NATIONAL LIFE INSURANCE COMPANY
McKinney, Texas

POLICY FORMS LMSHDF06 AND LMSHDF10
INDIVIDUAL STANDARDIZED MEDICARE SUPPLEMENT HIGH DEDUCTIBLE PLAN F

2010 RATE FILING

PROJECTION OF ONE YEAR OF ISSUE BASED ON NATIONWIDE DATA

Policy Year	Earned Premium	Incurred Claims	Loss Ratio
1	1,000,000	569,000	0.569
2	695,716	427,865	0.615
3	524,481	343,011	0.654
4	416,856	273,874	0.657
5	342,090	226,806	0.663
6	292,155	195,159	0.668
7	257,060	172,744	0.672
8	230,334	155,706	0.676
9	208,122	140,899	0.677
10	185,533	126,348	0.681
11	166,378	113,803	0.684
12	149,202	102,501	0.687
13	133,798	92,053	0.688
14	119,843	82,452	0.688
15	107,216	74,086	0.691
16	95,806	66,298	0.692
17	85,712	59,913	0.699
18	76,227	53,664	0.704
19	67,469	47,835	0.709
20	59,287	42,391	0.715
21	51,784	37,233	0.719
22	44,791	32,384	0.723
23	38,458	27,920	0.726
24	32,653	23,706	0.726
25	27,413	19,874	0.725
26	22,810	16,492	0.723
27	18,666	13,496	0.723
28	15,057	10,886	0.723
29	11,923	8,632	0.724
30	9,264	6,716	0.725
31	7,050	5,119	0.726
32	5,239	3,814	0.728
33	3,832	2,801	0.731
34	2,717	1,994	0.734
32	1,898	1,393	0.734
Total	5,506,839	3,578,867	0.650

The projection is based on \$1,000,000 of annual premium issued at the beginning of the year.

LIBERTY NATIONAL LIFE INSURANCE COMPANY
McKinney, Texas

POLICY FORMS LMSHDF06 AND LMSHDF10
INDIVIDUAL STANDARDIZED MEDICARE SUPPLEMENT HIGH DEDUCTIBLE PLAN F

2010 RATE FILING

ACTUARIAL PARAMETERS FOR
PROJECTION OF ONE YEAR OF ISSUE BASED ON NATIONWIDE DATA

LAPSE RATES:

<u>Duration</u>	<u>Lapse Rate</u>	<u>Duration</u>	<u>Lapse Rate</u>	<u>Duration</u>	<u>Lapse Rate</u>
1	0.354	13	0.155	25	0.215
2	0.300	14	0.156	26	0.228
3	0.262	15	0.157	27	0.239
4	0.238	16	0.156	28	0.253
5	0.207	17	0.161	29	0.267
6	0.183	18	0.165	30	0.282
7	0.168	19	0.171	31	0.299
8	0.161	20	0.176	32	0.310
9	0.159	21	0.184	33	0.331
10	0.154	22	0.190	34	0.341
11	0.154	23	0.199	35	1.000
12	0.154	24	0.208		

PREMIUM TREND:⁽¹⁾

<u>Plan</u>	<u>Years 2011+ Premium Trend⁽²⁾</u>
HDF	6.0%

⁽¹⁾ Rate increases are projected to be effective January 1 of each year.

⁽²⁾ For attained age rates, the increase in premiums as attained age increases is also recognized.

CLAIMS TREND:⁽³⁾

Price and Utilization Changes: 6.0%

Selection by Duration

<u>Duration</u>	<u>Selection</u>
1	0.870
2	0.940
3+	1.000

⁽³⁾ In addition to price and utilization changes and selection by duration, the increase in claims as attained age increases is recognized.

LIBERTY NATIONAL LIFE INSURANCE COMPANY

McKinney, Texas

Policy Forms **LDMSB06 and LDMSB10**
Individual Standardized Medicare Supplement Policy Forms

2010 Rate Filing Summary

ARKANSAS

Original Approval Dates LDMSB06 LDMSB10	June 23, 2009 January 13, 2010	
Proposed Percentage of Rate Change Under Age	45.4 %	
Proposed Effective Date	June 1, 2010	
Application of Rates	New Business	
Number of Policies In-Force 4th Quarter 2009 Under Age Total	<p align="center"><u>ARKANSAS</u></p> <p align="center">0</p> <hr/> <p align="center">0</p>	<p align="center"><u>NATIONWIDE</u></p> <p align="center">0</p> <hr/> <p align="center">0</p>

LIBERTY NATIONAL LIFE INSURANCE COMPANY

McKinney, Texas

POLICY FORMS LDMSB06 AND LDMSB10

INDIVIDUAL STANDARDIZED MEDICARE SUPPLEMENT PLAN B (FOR DISABLED LIVES)

2010 RATE FILING

PROJECTION OF ONE YEAR OF ISSUE BASED ON NATIONWIDE DATA

Policy Year	Earned Premium	Incurred Claims	Loss Ratio
1	1,000,000	657,000	0.657
2	802,500	525,638	0.655
3	678,353	443,643	0.654
4	573,412	375,011	0.654
5	484,705	316,028	0.652
6*	409,721	266,729	0.651
7*	345,272	224,427	0.650
8*	291,408	189,415	0.650
9*	246,708	160,360	0.650
10*	206,611	134,297	0.650
11*	171,632	111,561	0.650
12*	143,244	93,109	0.650
13*	119,551	77,708	0.650
14*	99,934	64,957	0.650
15*	82,362	53,535	0.650
16*	67,751	44,038	0.650
17*	55,908	36,340	0.650
18*	46,282	30,083	0.650
19*	38,251	24,863	0.650
20*	31,120	20,228	0.650
21*	25,427	16,528	0.650
22*	20,808	13,525	0.650
23	16,381	10,648	0.650
24	12,442	8,137	0.654
25	8,254	5,398	0.654
26	5,299	3,466	0.654
27	3,402	2,262	0.665
28	2,184	1,481	0.678
29	1,402	951	0.678
Total	5,990,324	3,911,365	0.653

The projection is based on \$1,000,000 of annual premium issued at the beginning of the year.

* Rate increases are limited where necessary to maintain a 65% loss ratio.

LIBERTY NATIONAL LIFE INSURANCE COMPANY
McKinney, Texas

POLICY FORMS LDMSB06 AND LDMSB10
INDIVIDUAL STANDARDIZED MEDICARE SUPPLEMENT PLAN B (FOR DISABLED LIVES)

2010 RATE FILING

ACTUARIAL PARAMETERS FOR
PROJECTION OF ONE YEAR OF ISSUE BASED ON NATIONWIDE DATA

LAPSE RATES:

<u>Duration</u>	<u>Lapse Rate</u>	<u>Duration</u>	<u>Lapse Rate</u>	<u>Duration</u>	<u>Lapse Rate</u>
1	0.250	12	0.220	22	0.270
2	0.210	13	0.220	23	0.300
3	0.210	14	0.220	24	0.380
4	0.210	15	0.230	25	0.400
5	0.210	16	0.230	26	0.400
6	0.210	17	0.230	27	0.400
7	0.210	18	0.230	28	0.400
8	0.210	19	0.230	29	1.000
9	0.210	20	0.240		
10	0.220	21	0.240		
11	0.220				

PREMIUM TREND:⁽¹⁾

<u>Plan</u>	<u>Years 2011+ Premium Trend</u>
Disabled Plan B	7%

⁽¹⁾ Rate increases are projected to be effective January 1 of each year.
Rate increases are limited where necessary to maintain a 65% loss ratio.

CLAIMS TREND:⁽²⁾

Price and Utilization Changes:	7.0%	
Selection by Duration	<u>Duration</u>	<u>Selection</u>
	All	1.000

⁽²⁾ In addition to price and utilization changes and selection by duration, the increase in claims as attained age increases is recognized.