

SERFF Tracking Number: LHLI-126527276 State: Arkansas  
 Filing Company: Lincoln Heritage Life Insurance Company State Tracking Number: 45102  
 Company Tracking Number: RI MS AR RH  
 TOI: MS06 Medicare Supplement - Other Sub-TOI: MS06.000 Medicare Supplement - Other  
 Product Name: Medicare Supplement Rate Increase Filing  
 Project Name/Number: /

## Filing at a Glance

Company: Lincoln Heritage Life Insurance Company

Product Name: Medicare Supplement Rate Increase Filing SERFF Tr Num: LHLI-126527276 State: Arkansas

TOI: MS06 Medicare Supplement - Other SERFF Status: Closed-Approved-Closed State Tr Num: 45102

Sub-TOI: MS06.000 Medicare Supplement - Other Co Tr Num: RI MS AR RH State Status: Approved-Closed

Filing Type: Rate

Reviewer(s): Stephanie Fowler

Authors: Shirley Grossman, Cathy Patterson, Wanda McNeece, Sally

Roudebush, Rodney Hartwig

Date Submitted: 03/03/2010

Disposition Date: 03/30/2010  
 Disposition Status: Approved-Closed

Implementation Date Requested:

Implementation Date: 11/01/2010

State Filing Description:

## General Information

Project Name:

Status of Filing in Domicile: Authorized

Project Number:

Date Approved in Domicile:

Requested Filing Mode: Review & Approval

Domicile Status Comments:

Explanation for Combination/Other:

Market Type: Individual

Submission Type: New Submission

Group Market Size:

Overall Rate Impact: 25%

Group Market Type:

Filing Status Changed: 03/30/2010

Explanation for Other Group Market Type:

State Status Changed: 03/30/2010

Deemer Date:

Created By: Rodney Hartwig

Submitted By: Rodney Hartwig

Corresponding Filing Tracking Number:

Filing Description:

Lincoln Heritage Life Insurance Company Rate Increase Filing for Individual Medicare Supplement Standardized Plans A, B, C, D, and F

Form Numbers: MS-AAAR 06 - Plan A; MS-ABAR 06 - Plan B; MS-ACAR 06 - Plan C; MS-ADAR 06 - Plan D; MSAFAR 06 - Plan F

SERFF Tracking Number: LHLI-126527276 State: Arkansas  
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 TOI: MS06 Medicare Supplement - Other Sub-TOI: MS06.000 Medicare Supplement - Other  
 Product Name: Medicare Supplement Rate Increase Filing  
 Project Name/Number: /

Rate Increase Amount: 25.0%

## Company and Contact

### Filing Contact Information

Rodney Hartwig, rodney.hartwig@londen-insurance.com  
 4343 E Camelback Rd 800-433-8181 [Phone]  
 Phoenix, AZ 85018 602-808-8845 [FAX]

### Filing Company Information

Lincoln Heritage Life Insurance Company CoCode: 65927 State of Domicile: Illinois  
 4343 East Camelback Road Group Code: Company Type: Life and Health  
 Phoenix, AZ 85018 Group Name: State ID Number:  
 (800) 433-8181 ext. [Phone] FEIN Number: 04-2314290  
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## Filing Fees

Fee Required? Yes  
 Fee Amount: \$250.00  
 Retaliatory? No  
 Fee Explanation: 5 plans x \$50 = \$250.00  
 Per Company: No

COMPANY	AMOUNT	DATE PROCESSED	TRANSACTION #
Lincoln Heritage Life Insurance Company	\$250.00	03/03/2010	34586957

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## Correspondence Summary

### Dispositions

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

### Objection Letters and Response Letters

Objection Letters				Response Letters		
Status	Created By	Created On	Date Submitted	Responded By	Created On	Date Submitted
Pending Industry Response	Stephanie Fowler	03/25/2010	03/25/2010	Rodney Hartwig	03/30/2010	03/30/2010

SERFF Tracking Number: LHLI-126527276 State: Arkansas  
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 Product Name: Medicare Supplement Rate Increase Filing  
 Project Name/Number: /

## Disposition

Disposition Date: 03/30/2010

Implementation Date: 11/01/2010

Status: Approved-Closed

Comment: The negotiated rate increase of 15% has been approved to be implemented on or after November 1, 2010. This approval is subject to the following:

The requested rate increase has been approved to be implemented on or after May 1, 2009. 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.

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):
Lincoln Heritage Life Insurance Company	25.000%	25.000%	\$44,026	107	\$176,098	25.000%	25.000%

SERFF Tracking Number: LHLI-126527276 State: Arkansas  
 Filing Company: Lincoln Heritage Life Insurance Company State Tracking Number: 45102  
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 TOI: MS06 Medicare Supplement - Other Sub-TOI: MS06.000 Medicare Supplement - Other  
 Product Name: Medicare Supplement Rate Increase Filing  
 Project Name/Number: /

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

SERFF Tracking Number: LHLI-126527276 State: Arkansas  
Filing Company: Lincoln Heritage Life Insurance Company State Tracking Number: 45102  
Company Tracking Number: RI MS AR RH  
TOI: MS06 Medicare Supplement - Other Sub-TOI: MS06.000 Medicare Supplement - Other  
Product Name: Medicare Supplement Rate Increase Filing  
Project Name/Number: /

## Objection Letter

Objection Letter Status Pending Industry Response  
Objection Letter Date 03/25/2010  
Submitted Date 03/25/2010  
Respond By Date 04/26/2010

Dear Rodney Hartwig,

This will acknowledge receipt of the captioned filing.

Based on the amount of the previous increase and the possible impact another 25% increase would have on the citizens of Arkansas, we would be willing to accept a 15% increase for the plans contained in this filing. This increase would not be effective until November 1, 2010, as your previous rate increase was just implemented on or after November 1, 2009.

Please feel free to contact me if you have questions.

Sincerely,  
Stephanie Fowler

## Response Letter

Response Letter Status Submitted to State  
Response Letter Date 03/30/2010  
Submitted Date 03/30/2010

Dear Stephanie Fowler,

### Comments:

Here is the response from our Actuary

### Response 1

Comments: Dear Ms. Fowler,

Thank you for your continued consideration of this rate increase request. This correspondence is in reply to your 3/25/10 response.

The Company is reducing the requested rate increase to 15%. Attached are revised rate pages reflecting this change.

SERFF Tracking Number: LHLI-126527276 State: Arkansas  
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Company Tracking Number: RI MS AR RH  
TOI: MS06 Medicare Supplement - Other Sub-TOI: MS06.000 Medicare Supplement - Other  
Product Name: Medicare Supplement Rate Increase Filing  
Project Name/Number: /

If you have questions or need additional information, please do not hesitate to call or e-mail me.

Sincerely,

Bill Reynolds, FSA, MAAA  
Consulting Actuary  
Wakely Actuarial Services, Inc.  
727 489-7133  
Bill.Reynolds@wakelyactuarial.com

**Changed Items:**

No Supporting Documents changed.

No Form Schedule items changed.

**Rate/Rule Schedule Item Changes**

<b>Document Name:</b>	<b>Affected Form Numbers:</b>	<b>Rate Action:</b>	<b>Rate Action Information:</b>	<b>Attach Document:</b>
AR Rates	MS-ACAR 06, MS-AAAR 06, Revised MS-ABAR 06, MS-ADAR 06, MS-AFAR 06		<i>Previous State Filing Number</i>  41863 <i>Percent Rate Change Request</i> 15	

**Previous Version**

AR Rates	MS-ACAR 06, MS-AAAR 06, Revised MS-ABAR 06, MS-ADAR 06, MS-AFAR 06		<i>Previous State Filing Number</i>  41863 <i>Percent Rate Change Request</i> 25	
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If you have any questions or need further information please feel free to contact us.

*SERFF Tracking Number:* LHLI-126527276      *State:* Arkansas  
*Filing Company:* Lincoln Heritage Life Insurance Company      *State Tracking Number:* 45102  
*Company Tracking Number:* RI MS AR RH  
*TOI:* MS06 Medicare Supplement - Other      *Sub-TOI:* MS06.000 Medicare Supplement - Other  
*Product Name:* Medicare Supplement Rate Increase Filing  
*Project Name/Number:* /

Sincerely  
Rodney Hartwig  
Compliance Associate  
Lincoln Heritage Life Insurance Company  
800-433-8181

Sincerely,  
Cathy Patterson, Rodney Hartwig, Sally Roudebush, Shirley Grossman, Wanda McNeece

SERFF Tracking Number: LHLI-126527276  
 Filing Company: Lincoln Heritage Life Insurance Company  
 Company Tracking Number: RI MS AR RH  
 TOI: MS06 Medicare Supplement - Other  
 Product Name: Medicare Supplement Rate Increase Filing  
 Project Name/Number: /

State: Arkansas  
 State Tracking Number: 45102  
 Sub-TOI: MS06.000 Medicare Supplement - Other

## Rate Information

Rate data applies to filing.

**Filing Method:** SERFF  
**Rate Change Type:** Increase  
**Overall Percentage of Last Rate Revision:** 25.000%  
**Effective Date of Last Rate Revision:** 11/01/2009  
**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):
Lincoln Heritage Life Insurance Company	25.000%	25.000%	\$44,026	107	\$176,098	25.000%	25.000%

SERFF Tracking Number: LHLI-126527276 State: Arkansas  
 Filing Company: Lincoln Heritage Life Insurance Company State Tracking Number: 45102  
 Company Tracking Number: RI MS AR RH  
 TOI: MS06 Medicare Supplement - Other Sub-TOI: MS06.000 Medicare Supplement - Other  
 Product Name: Medicare Supplement Rate Increase Filing  
 Project Name/Number: /

## Rate/Rule Schedule

Schedule Item Status:	Document Name:	Affected Form Numbers: (Separated with commas)	Rate Action:	Rate Action Information:	Attachments
Approved 03/30/2010	AR Rates	MS-ACAR 06, MS-AAAR 06, MS-ABAR 06, MS-ADAR 06, MS-AFAR 06	Revised	Previous State Filing Number: Percent Rate Change Request: 41863 15.000	AR Rates rev.pdf

# LINCOLN HERITAGE LIFE INSURANCE COMPANY

## Actuarial Memorandum for Individual A&H Rate Filing

Medicare Standardized Plan A

### Exhibit A - Current and Proposed Premium Schedule

#### Current Annual Rates

Age	Preferred	Standard
All	1,644	1,828

#### Proposed Annual Rates after 15.0% Increase

Age	Preferred	Standard
All	1,891	2,102

#### Proposed Modal Premiums for Area 1

	Preferred	Standard
Annual	2,080.00	2,312.00
Semi	1,081.60	1,202.24
Quarterly	540.80	601.12
Monthly	182.00	202.30
*Monthly	173.26	192.59
**Monthly Direct Bill	175.26	194.59

#### Proposed Modal Premiums for Area 2

	Preferred	Standard
Annual	1,796.00	1,997.00
Semi	933.92	1,038.44
Quarterly	466.96	519.22
Monthly	157.15	174.74
*Monthly	149.61	166.35
**Monthly Direct Bill	151.61	168.35

#### Proposed Modal Premiums for Area 3

	Preferred	Standard
Annual	1,607.00	1,787.00
Semi	835.64	929.24
Quarterly	417.82	464.62
Monthly	140.61	156.36
*Monthly	133.86	148.86
**Monthly Direct Bill	135.86	150.86

Mode Factors: Ann:1.0000 Semi: 0.5200 Qurtrly: 0.2600 Mthly: 0.0875

\*The Monthly Modal Factor was reduced to .0833 for policies issued after 6/1/04

\*\*For Monthly Direct Bill policies issued in 2007 and later, the Company is charging an extra \$2 to each modal premium.

#### Area Factors:

Area 1:	Zip Codes 72002, 72053, 72065, 72076, 72078, 72099, 72103, 72113-72120, 72124, 72135, 72142, 72164, 72180, 72183, 72190, 72198, 72199, and all zip codes beginning with 722	1.10
Area 2:	Zip codes beginning with 720 and 721 not listed above	0.95
Area 3:	Rest of State	0.85

# LINCOLN HERITAGE LIFE INSURANCE COMPANY

## Actuarial Memorandum for Individual A&H Rate Filing

Medicare Standardized Plan B

### Exhibit A - Current and Proposed Premium Schedule

#### Current Annual Rates

Age	Preferred	Standard
All	1,785	1,983

#### Proposed Annual Rates after 15.0% Increase

Age	Preferred	Standard
All	2,053	2,280

#### Proposed Modal Premiums for Area 1

	Preferred	Standard
Annual	2,258.00	2,508.00
Semi	1,174.16	1,304.16
Quarterly	587.08	652.08
Monthly	197.58	219.45
*Monthly	188.09	208.92
**Monthly Direct Bill	190.09	210.92

#### Proposed Modal Premiums for Area 2

	Preferred	Standard
Annual	1,950.00	2,166.00
Semi	1,014.00	1,126.32
Quarterly	507.00	563.16
Monthly	170.63	189.53
*Monthly	162.44	180.43
**Monthly Direct Bill	164.44	182.43

#### Proposed Modal Premiums for Area 3

	Preferred	Standard
Annual	1,745.00	1,938.00
Semi	907.40	1,007.76
Quarterly	453.70	503.88
Monthly	152.69	169.58
*Monthly	145.36	161.44
**Monthly Direct Bill	147.36	163.44

Mode Factors: Ann:1.0000 Semi: 0.5200 Qurtrly: 0.2600 Mthly: 0.0875

\*The Monthly Modal Factor was reduced to .0833 for policies issued after 6/1/04

\*\*For Monthly Direct Bill policies issued in 2007 and later, the Company is charging an extra \$2 to each modal premium.

#### Area Factors:

Area 1:	Zip Codes 72002, 72053, 72065, 72076, 72078, 72099, 72103, 72113-72120, 72124, 72135, 72142, 72164, 72180, 72183, 72190, 72198, 72199, and all zip codes beginning with 722	1.10
Area 2:	Zip codes beginning with 720 and 721 not listed above	0.95
Area 3:	Rest of State	0.85

# LINCOLN HERITAGE LIFE INSURANCE COMPANY

## Actuarial Memorandum for Individual A&H Rate Filing

Medicare Standardized Plan C

### Exhibit A - Current and Proposed Premium Schedule

#### Current Annual Rates

Age	Preferred	Standard
All	2,099	2,331

#### Proposed Annual Rates after 15.0% Increase

Age	Preferred	Standard
All	2,414	2,681

#### Proposed Modal Premiums for Area 1

	Preferred	Standard
Annual	2,655.00	2,949.00
Semi	1,380.60	1,533.48
Quarterly	690.30	766.74
Monthly	232.31	258.04
*Monthly	221.16	245.65
**Monthly Direct Bill	223.16	247.65

#### Proposed Modal Premiums for Area 2

	Preferred	Standard
Annual	2,293.00	2,547.00
Semi	1,192.36	1,324.44
Quarterly	596.18	662.22
Monthly	200.64	222.86
*Monthly	191.01	212.17
**Monthly Direct Bill	193.01	214.17

#### Proposed Modal Premiums for Area 3

	Preferred	Standard
Annual	2,052.00	2,279.00
Semi	1,067.04	1,185.08
Quarterly	533.52	592.54
Monthly	179.55	199.41
*Monthly	170.93	189.84
**Monthly Direct Bill	172.93	191.84

Mode Factors: Ann:1.0000 Semi: 0.5200 Qurtly: 0.2600 Mthly: 0.0875

\*The Monthly Modal Factor was reduced to .0833 for policies issued after 6/1/04

\*\*For Monthly Direct Bill policies issued in 2007 and later, the Company is charging an extra \$2 to each modal premium.

#### Area Factors:

Area 1:	Zip Codes 72002, 72053, 72065, 72076, 72078, 72099, 72103, 72113-72120, 72124, 72135, 72142, 72164, 72180, 72183, 72190, 72198, 72199, and all zip codes beginning with 722	1.10
Area 2:	Zip codes beginning with 720 and 721 not listed above	0.95
Area 3:	Rest of State	0.85

# LINCOLN HERITAGE LIFE INSURANCE COMPANY

## Actuarial Memorandum for Individual A&H Rate Filing

Medicare Standardized Plan D

### Exhibit A - Current and Proposed Premium Schedule

#### Current Annual Rates

Age	Preferred	Standard
All	1,843	2,048

#### Proposed Annual Rates after 15.0% Increase

Age	Preferred	Standard
All	2,119	2,355

#### Proposed Modal Premiums for Area 1

	Preferred	Standard
Annual	2,331.00	2,591.00
Semi	1,212.12	1,347.32
Quarterly	606.06	673.66
Monthly	203.96	226.71
*Monthly	194.17	215.83
**Monthly Direct Bill	196.17	217.83

#### Proposed Modal Premiums for Area 2

	Preferred	Standard
Annual	2,013.00	2,237.00
Semi	1,046.76	1,163.24
Quarterly	523.38	581.62
Monthly	176.14	195.74
*Monthly	167.68	186.34
**Monthly Direct Bill	169.68	188.34

#### Proposed Modal Premiums for Area 3

	Preferred	Standard
Annual	1,801.00	2,002.00
Semi	936.52	1,041.04
Quarterly	468.26	520.52
Monthly	157.59	175.18
*Monthly	150.02	166.77
**Monthly Direct Bill	152.02	168.77

Mode Factors: Ann:1.0000 Semi: 0.5200 Qurtrly: 0.2600 Mthly: 0.0875

\*The Monthly Modal Factor was reduced to .0833 for policies issued after 6/1/04

\*\*For Monthly Direct Bill policies issued in 2007 and later, the Company is charging an extra \$2 to each modal premium.

#### Area Factors:

Area 1:	Zip Codes 72002, 72053, 72065, 72076, 72078, 72099, 72103, 72113-72120, 72124, 72135, 72142, 72164, 72180, 72183, 72190, 72198, 72199, and all zip codes beginning with	1.10
Area 2:	Zip codes beginning with 720 and 721 not listed above	0.95
Area 3:	Rest of State	0.85

# LINCOLN HERITAGE LIFE INSURANCE COMPANY

## Actuarial Memorandum for Individual A&H Rate Filing

Medicare Standardized Plan F

### Exhibit A - Current and Proposed Premium Schedule

#### Current Annual Rates

Age	Preferred	Standard
All	2,163	2,405

#### Proposed Annual Rates after 15.0% Increase

Age	Preferred	Standard
All	2,487	2,766

#### Proposed Modal Premiums for Area 1

	Preferred	Standard
Annual	2,736.00	3,043.00
Semi	1,422.72	1,582.36
Quarterly	711.36	791.18
Monthly	239.40	266.26
*Monthly	227.91	253.48
**Monthly Direct Bill	229.91	255.48

#### Proposed Modal Premiums for Area 2

	Preferred	Standard
Annual	2,363.00	2,628.00
Semi	1,228.76	1,366.56
Quarterly	614.38	683.28
Monthly	206.76	229.95
*Monthly	196.84	218.91
**Monthly Direct Bill	198.84	220.91

#### Proposed Modal Premiums for Area 3

	Preferred	Standard
Annual	2,114.00	2,351.00
Semi	1,099.28	1,222.52
Quarterly	549.64	611.26
Monthly	184.98	205.71
*Monthly	176.10	195.84
**Monthly Direct Bill	178.10	197.84

Mode Factors: Ann:1.0000 Semi: 0.5200 Qtrly: 0.2600 Mthly: 0.0875

\*The Monthly Modal Factor was reduced to .0833 for policies issued after 6/1/04

\*\*For Monthly Direct Bill policies issued in 2007 and later, the Company is charging an extra \$2 to each modal premium.

#### Area Factors:

Area 1:	Zip Codes 72002, 72053, 72065, 72076, 72078, 72099, 72103, 72113-72120, 72124, 72135, 72142, 72164, 72180, 72183, 72190, 72198, 72199, and all zip codes beginning with 722	1.10
Area 2:	Zip codes beginning with 720 and 721 not listed above	0.95
Area 3:	Rest of State	0.85

SERFF Tracking Number: LHLI-126527276 State: Arkansas  
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 TOI: MS06 Medicare Supplement - Other Sub-TOI: MS06.000 Medicare Supplement - Other  
 Product Name: Medicare Supplement Rate Increase Filing  
 Project Name/Number: /

## Superseded Schedule Items

Please note that all items on the following pages are items, which have been replaced by a newer version. The newest version is located with the appropriate schedule on previous pages. These items are in date order with most recent first.

Creation Date:	Schedule	Schedule Item Name	Replacement Creation Date	Attached Document(s)
03/03/2010	Rate and Rule	AR Rates	03/30/2010	AR Rates.pdf (Superceded)

# LINCOLN HERITAGE LIFE INSURANCE COMPANY

## Actuarial Memorandum for Individual A&H Rate Filing

Medicare Standardized Plan A

### Exhibit A - Current and Proposed Premium Schedule

#### Current Annual Rates

Age	Preferred	Standard
All	1,644	1,828

#### Proposed Annual Rates after 25.0% Increase

Age	Preferred	Standard
All	2,055	2,285

#### Proposed Modal Premiums for Area 1

	Preferred	Standard
Annual	2,261.00	2,514.00
Semi	1,175.72	1,307.28
Quarterly	587.86	653.64
Monthly	197.84	219.98
*Monthly	188.34	209.42
**Monthly Direct Bill	190.34	211.42

#### Proposed Modal Premiums for Area 2

	Preferred	Standard
Annual	1,952.00	2,171.00
Semi	1,015.04	1,128.92
Quarterly	507.52	564.46
Monthly	170.80	189.96
*Monthly	162.60	180.84
**Monthly Direct Bill	164.60	182.84

#### Proposed Modal Premiums for Area 3

	Preferred	Standard
Annual	1,747.00	1,942.00
Semi	908.44	1,009.84
Quarterly	454.22	504.92
Monthly	152.86	169.93
*Monthly	145.53	161.77
**Monthly Direct Bill	147.53	163.77

Mode Factors: Ann:1.0000 Semi: 0.5200 Qurtrly: 0.2600 Mthly: 0.0875

\*The Monthly Modal Factor was reduced to .0833 for policies issued after 6/1/04

\*\*For Monthly Direct Bill policies issued in 2007 and later, the Company is charging an extra \$2 to each modal premium.

#### Area Factors:

Area 1:	Zip Codes 72002, 72053, 72065, 72076, 72078, 72099, 72103, 72113-72120, 72124, 72135, 72142, 72164, 72180, 72183, 72190, 72198, 72199, and all zip codes beginning with 722	1.10
Area 2:	Zip codes beginning with 720 and 721 not listed above	0.95
Area 3:	Rest of State	0.85

# LINCOLN HERITAGE LIFE INSURANCE COMPANY

## Actuarial Memorandum for Individual A&H Rate Filing

Medicare Standardized Plan B

### Exhibit A - Current and Proposed Premium Schedule

#### Current Annual Rates

Age	Preferred	Standard
All	1,785	1,983

#### Proposed Annual Rates after 25.0% Increase

Age	Preferred	Standard
All	2,231	2,479

#### Proposed Modal Premiums for Area 1

	Preferred	Standard
Annual	2,454.00	2,727.00
Semi	1,276.08	1,418.04
Quarterly	638.04	709.02
Monthly	214.73	238.61
*Monthly	204.42	227.16
**Monthly Direct Bill	206.42	229.16

#### Proposed Modal Premiums for Area 2

	Preferred	Standard
Annual	2,119.00	2,355.00
Semi	1,101.88	1,224.60
Quarterly	550.94	612.30
Monthly	185.41	206.06
*Monthly	176.51	196.17
**Monthly Direct Bill	178.51	198.17

#### Proposed Modal Premiums for Area 3

	Preferred	Standard
Annual	1,896.00	2,107.00
Semi	985.92	1,095.64
Quarterly	492.96	547.82
Monthly	165.90	184.36
*Monthly	157.94	175.51
**Monthly Direct Bill	159.94	177.51

Mode Factors: Ann:1.0000 Semi: 0.5200 Qurtrly: 0.2600 Mthly: 0.0875

\*The Monthly Modal Factor was reduced to .0833 for policies issued after 6/1/04

\*\*For Monthly Direct Bill policies issued in 2007 and later, the Company is charging an extra \$2 to each modal premium.

#### Area Factors:

Area 1:	Zip Codes 72002, 72053, 72065, 72076, 72078, 72099, 72103, 72113-72120, 72124, 72135, 72142, 72164, 72180, 72183, 72190, 72198, 72199, and all zip codes beginning with 722	1.10
Area 2:	Zip codes beginning with 720 and 721 not listed above	0.95
Area 3:	Rest of State	0.85

# LINCOLN HERITAGE LIFE INSURANCE COMPANY

## Actuarial Memorandum for Individual A&H Rate Filing

Medicare Standardized Plan C

### Exhibit A - Current and Proposed Premium Schedule

#### Current Annual Rates

Age	Preferred	Standard
All	2,099	2,331

#### Proposed Annual Rates after 25.0% Increase

Age	Preferred	Standard
All	2,624	2,914

#### Proposed Modal Premiums for Area 1

	Preferred	Standard
Annual	2,886.00	3,205.00
Semi	1,500.72	1,666.60
Quarterly	750.36	833.30
Monthly	252.53	280.44
*Monthly	240.40	266.98
**Monthly Direct Bill	242.40	268.98

#### Proposed Modal Premiums for Area 2

	Preferred	Standard
Annual	2,493.00	2,768.00
Semi	1,296.36	1,439.36
Quarterly	648.18	719.68
Monthly	218.14	242.20
*Monthly	207.67	230.57
**Monthly Direct Bill	209.67	232.57

#### Proposed Modal Premiums for Area 3

	Preferred	Standard
Annual	2,230.00	2,477.00
Semi	1,159.60	1,288.04
Quarterly	579.80	644.02
Monthly	195.13	216.74
*Monthly	185.76	206.33
**Monthly Direct Bill	187.76	208.33

Mode Factors: Ann:1.0000 Semi: 0.5200 Qurtly: 0.2600 Mthly: 0.0875

\*The Monthly Modal Factor was reduced to .0833 for policies issued after 6/1/04

\*\*For Monthly Direct Bill policies issued in 2007 and later, the Company is charging an extra \$2 to each modal premium.

#### Area Factors:

Area 1:	Zip Codes 72002, 72053, 72065, 72076, 72078, 72099, 72103, 72113-72120, 72124, 72135, 72142, 72164, 72180, 72183, 72190, 72198, 72199, and all zip codes beginning with 722	1.10
Area 2:	Zip codes beginning with 720 and 721 not listed above	0.95
Area 3:	Rest of State	0.85

# LINCOLN HERITAGE LIFE INSURANCE COMPANY

## Actuarial Memorandum for Individual A&H Rate Filing

Medicare Standardized Plan D

### Exhibit A - Current and Proposed Premium Schedule

#### Current Annual Rates

Age	Preferred	Standard
All	1,843	2,048

#### Proposed Annual Rates after 25.0% Increase

Age	Preferred	Standard
All	2,304	2,560

#### Proposed Modal Premiums for Area 1

	Preferred	Standard
Annual	2,534.00	2,816.00
Semi	1,317.68	1,464.32
Quarterly	658.84	732.16
Monthly	221.73	246.40
*Monthly	211.08	234.57
**Monthly Direct Bill	213.08	236.57

#### Proposed Modal Premiums for Area 2

	Preferred	Standard
Annual	2,189.00	2,432.00
Semi	1,138.28	1,264.64
Quarterly	569.14	632.32
Monthly	191.54	212.80
*Monthly	182.34	202.59
**Monthly Direct Bill	184.34	204.59

#### Proposed Modal Premiums for Area 3

	Preferred	Standard
Annual	1,958.00	2,176.00
Semi	1,018.16	1,131.52
Quarterly	509.08	565.76
Monthly	171.33	190.40
*Monthly	163.10	181.26
**Monthly Direct Bill	165.10	183.26

Mode Factors: Ann:1.0000 Semi: 0.5200 Qurtrly: 0.2600 Mthly: 0.0875

\*The Monthly Modal Factor was reduced to .0833 for policies issued after 6/1/04

\*\*For Monthly Direct Bill policies issued in 2007 and later, the Company is charging an extra \$2 to each modal premium.

#### Area Factors:

Area 1:	Zip Codes 72002, 72053, 72065, 72076, 72078, 72099, 72103, 72113-72120, 72124, 72135, 72142, 72164, 72180, 72183, 72190, 72198, 72199, and all zip codes beginning with	1.10
Area 2:	Zip codes beginning with 720 and 721 not listed above	0.95
Area 3:	Rest of State	0.85

# LINCOLN HERITAGE LIFE INSURANCE COMPANY

## Actuarial Memorandum for Individual A&H Rate Filing

Medicare Standardized Plan F

### Exhibit A - Current and Proposed Premium Schedule

#### Current Annual Rates

Age	Preferred	Standard
All	2,163	2,405

#### Proposed Annual Rates after 25.0% Increase

Age	Preferred	Standard
All	2,704	3,006

#### Proposed Modal Premiums for Area 1

	Preferred	Standard
Annual	2,974.00	3,307.00
Semi	1,546.48	1,719.64
Quarterly	773.24	859.82
Monthly	260.23	289.36
*Monthly	247.73	275.47
**Monthly Direct Bill	249.73	277.47

#### Proposed Modal Premiums for Area 2

	Preferred	Standard
Annual	2,569.00	2,856.00
Semi	1,335.88	1,485.12
Quarterly	667.94	742.56
Monthly	224.79	249.90
*Monthly	214.00	237.90
**Monthly Direct Bill	216.00	239.90

#### Proposed Modal Premiums for Area 3

	Preferred	Standard
Annual	2,298.00	2,555.00
Semi	1,194.96	1,328.60
Quarterly	597.48	664.30
Monthly	201.08	223.56
*Monthly	191.42	212.83
**Monthly Direct Bill	193.42	214.83

Mode Factors: Ann:1.0000 Semi: 0.5200 Qurtrly: 0.2600 Mthly: 0.0875

\*The Monthly Modal Factor was reduced to .0833 for policies issued after 6/1/04

\*\*For Monthly Direct Bill policies issued in 2007 and later, the Company is charging an extra \$2 to each modal premium.

#### Area Factors:

Area 1:	Zip Codes 72002, 72053, 72065, 72076, 72078, 72099, 72103, 72113-72120, 72124, 72135, 72142, 72164, 72180, 72183, 72190, 72198, 72199, and all zip codes beginning with 722	1.10
Area 2:	Zip codes beginning with 720 and 721 not listed above	0.95
Area 3:	Rest of State	0.85