

SERFF Tracking Number: BNLB-127190569 State: Arkansas  
Filing Company: Bankers Life and Casualty Company State Tracking Number: 48926  
Company Tracking Number:  
TOI: MS06 Medicare Supplement - Other Sub-TOI: MS06.000 Medicare Supplement - Other  
Product Name: Medicare Supplement Refund Calculation Report  
Project Name/Number: /

## Filing at a Glance

Company: Bankers Life and Casualty Company

Product Name: Medicare Supplement Refund Calculation Report SERFF Tr Num: BNLB-127190569 State: Arkansas

TOI: MS06 Medicare Supplement - Other

SERFF Status: Closed-Accepted State Tr Num: 48926  
For Informational Purposes

Sub-TOI: MS06.000 Medicare Supplement - Other Co Tr Num: State Status: Filed-Closed  
Other

Filing Type: Form

Author: Luke Kim

Reviewer(s): Stephanie Fowler

Date Submitted: 05/27/2011

Disposition Date: 06/06/2011

Disposition Status: Accepted For Informational Purposes

Implementation Date Requested:

Implementation Date:

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: The Medicare Supplement Refund Calculation Report has been submitted in the domicile state of Illinois

Explanation for Combination/Other:

Market Type: Individual

Submission Type: New Submission

Individual Market Type:

Overall Rate Impact:

Filing Status Changed: 06/06/2011

Deemer Date:

State Status Changed: 06/06/2011

Submitted By: Luke Kim

Created By: Luke Kim

Filing Description:

Corresponding Filing Tracking Number:

Included in this package are the completed 2010 Medicare Supplement Refund Calculation Reports for Bankers Life and Casualty Company. The reports show that for your state, our company is not required to provide any refunds for in-force year 2010.

Please let me know if you have any questions.

SERFF Tracking Number: BNLB-127190569 State: Arkansas  
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TOI: MS06 Medicare Supplement - Other Sub-TOI: MS06.000 Medicare Supplement - Other  
Product Name: Medicare Supplement Refund Calculation Report  
Project Name/Number: /

## Company and Contact

### Filing Contact Information

Luke Kim, Data Support Analyst I.kim@banklife.com  
600 West Chicago Ave 312-396-6084 [Phone]  
Chicago, IL 60654

### Filing Company Information

Bankers Life and Casualty Company CoCode: 61263 State of Domicile: Illinois  
600 West Chicago Avenue Group Code: 233 Company Type:  
Chicago, IL 60654-2800 Group Name: State ID Number:  
(312) 396-6000 ext. [Phone] FEIN Number: 36-0770740

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## Filing Fees

Fee Required? No  
Retaliatory? No  
Fee Explanation:  
Per Company: No

COMPANY	AMOUNT	DATE PROCESSED	TRANSACTION #
Bankers Life and Casualty Company	\$0.00	05/27/2011	

SERFF Tracking Number: BNLB-127190569 State: Arkansas  
Filing Company: Bankers Life and Casualty Company State Tracking Number: 48926  
Company Tracking Number:  
TOI: MS06 Medicare Supplement - Other Sub-TOI: MS06.000 Medicare Supplement - Other  
Product Name: Medicare Supplement Refund Calculation Report  
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## Correspondence Summary

### Dispositions

Status	Created By	Created On	Date Submitted
Accepted For Informational Purposes	Stephanie Fowler	06/06/2011	06/06/2011

SERFF Tracking Number: BNLB-127190569 State: Arkansas  
Filing Company: Bankers Life and Casualty Company State Tracking Number: 48926  
Company Tracking Number:  
TOI: MS06 Medicare Supplement - Other Sub-TOI: MS06.000 Medicare Supplement - Other  
Product Name: Medicare Supplement Refund Calculation Report  
Project Name/Number: /

## Disposition

Disposition Date: 06/06/2011

Implementation Date:

Status: Accepted For Informational Purposes

Comment:

Rate data does NOT apply to filing.

SERFF Tracking Number: *BNLB-127190569* State: *Arkansas*  
 Filing Company: *Bankers Life and Casualty Company* State Tracking Number: *48926*  
 Company Tracking Number:  
 TOI: *MS06 Medicare Supplement - Other* Sub-TOI: *MS06.000 Medicare Supplement - Other*  
 Product Name: *Medicare Supplement Refund Calculation Report*  
 Project Name/Number: */*

<b>Schedule</b>	<b>Schedule Item</b>	<b>Schedule Item Status</b>	<b>Public Access</b>
<b>Supporting Document</b>	Flesch Certification		No
<b>Supporting Document</b>	Application		No
<b>Supporting Document</b>	Health - Actuarial Justification		No
<b>Supporting Document</b>	Outline of Coverage		No
<b>Supporting Document</b>	Medicare Supplement Refund Calculation Accepted for Report	Informational Purposes	No

SERFF Tracking Number: BNLB-127190569 State: Arkansas  
 Filing Company: Bankers Life and Casualty Company State Tracking Number: 48926  
 Company Tracking Number:  
 TOI: MS06 Medicare Supplement - Other Sub-TOI: MS06.000 Medicare Supplement - Other  
 Product Name: Medicare Supplement Refund Calculation Report  
 Project Name/Number: /

## Supporting Document Schedules

	Item Status:	Status Date:
<b>Bypassed - Item:</b> Flesch Certification <b>Bypass Reason:</b> Not Applicable <b>Comments:</b>		
<b>Bypassed - Item:</b> Application <b>Bypass Reason:</b> Not Applicable <b>Comments:</b>		
<b>Bypassed - Item:</b> Health - Actuarial Justification <b>Bypass Reason:</b> Not Applicable <b>Comments:</b>		
<b>Bypassed - Item:</b> Outline of Coverage <b>Bypass Reason:</b> Not Applicable <b>Comments:</b>		
<b>Satisfied - Item:</b> Medicare Supplement Refund Calculation Report <b>Comments:</b> <b>Attachment:</b> AR_MedSuppRefundCalc10_BankersLife&CasualtyCompany_61263.pdf	Accepted for Informational Purposes	06/06/2011

May 25, 2011

**Medicare Supplement Refund Calculations Reports For In-Force Year 2010**

Included in this package are the completed 2010 Medicare Supplement Refund Calculation Reports for Bankers Life and Casualty Company. The reports show that for your state, our company is not required to provide any refunds for in-force year 2010.

Please let me know if you have any questions.

*Christopher J. Conforti*

Christopher J. Conforti A.S.A, M.A.A.A.  
Actuary  
Bankers Life and Casualty Company  
600 West Chicago Ave  
Chicago, Illinois 60654-2800  
[c.conforti@banklife.com](mailto:c.conforti@banklife.com)

**Bankers Life and Casualty Company**  
**State of Arkansas**

RE: Certification of Medicare Supplement Refund Calculation Forms  
for Calendar Year 2010

I certify that the information and calculations for the following Medicare Supplement Refund Calculation forms are true and accurate to the best of my knowledge and belief.

Type	<b>Group</b>	SMSBP(P)	<b>Plan C</b>
Type	<b>Group</b>	SMSBP(P)	<b>Plan F</b>
Type	<b>Group</b>	SMSBP(P)	<b>Plan G</b>
Type	<b>Individual</b>	SMSBP(P)	<b>Plan A</b>
Type	<b>Individual</b>	SMSBP(P)	<b>Plan B</b>
Type	<b>Individual</b>	SMSBP(P)	<b>Plan C</b>
Type	<b>Individual</b>	SMSBP(P)	<b>Plan D</b>
Type	<b>Individual</b>	SMSBP(P)	<b>Plan E</b>
Type	<b>Individual</b>	SMSBP(P)	<b>Plan F</b>
Type	<b>Individual</b>	SMSBP(P)	<b>Plan G</b>
Type	<b>Individual</b>	SMSBP(P)	<b>Plan J</b>
Type	<b>Individual</b>	SMSBP(P)	<b>Plan K</b>
Type	<b>Individual</b>	SMSBP(P)	<b>Plan L</b>
Type	<b>Individual</b>	SMSBP(P)	<b>Pre-Standardized</b>
Type	<b>Individual Select</b>	SMSBP(P)	<b>Plan D</b>
Type	<b>Individual Select</b>	SMSBP(P)	<b>Plan F</b>

Signature Christopher J. Conforti

Name Christopher J Conforti ASA, MAAA

Title Actuary

Date 5/25/11

**Medicare Supplement Refund Calculation Form  
For Calendar Year 2010**

TYPE Group	SMSBP(P)	Plan C
For the State of <b>Arkansas</b>		
Company Name: <b>Bankers Life and Casualty Company</b>		
NAIC Group code: <b>0233</b>	NAIC Company Code: <b>61263</b>	
Address: <b>600 West Chicago Ave, Chicago, IL 60654-2800</b>		
Person Completing This Exhibit	<b>Christopher J Conforti</b>	
Title: <b>Actuary</b>	Telephone Number <b>(312) 396-7668</b>	

	(a) Earned Premium	(b) Incurred Claims	
1 Current Year's Experience			
a Total (all policy years)	<u>0</u>	<u>0</u>	
b Current Year's Issues	<u>0</u>	<u>0</u>	
c Net (1a - 1b)	<u>0</u>	<u>0</u>	
2 Past Years' Experience (All Policy Years)	<u>40,191</u>	<u>6,086</u>	
3 Total Experience (1c + 2)	<u>40,191</u>	<u>6,086</u>	
4 Refunds Last Year (excluding interest)	<u>0</u>		
5 Previous Since Inception (excluding interest)	<u>0</u>		
6 Refunds Since Inception (excluding interest)	<u>0</u>		
7 Benchmark Ratio Since Inception (Ratio 1)	<u>0.732</u>		
8 Experienced Ratio Since Inception (Ratio2)	<u>0.151</u>		
(Line 3, Col. b)/Lin 3, Col. a - Line 6)			
9 Life Years Exposed Since Inception	<u>27</u>		If Experienced Ratio (Line 8) < Benchmark Ratio (Line 7) AND Life Years Exposed (Line 9) > 500, proceed, else STOP.
If (Line 8 < Line 7 AND Line 9 > 500, proceed; else Stop			
10 Tolerance Permitted (from credibility table)	<u><b>no credibility</b></u>		
11 Adjustment to Incurred Claims for Credibility	<u>                    </u>		If Ratio 3 (Line 11) is less than the Benchmark Ratio (Line 7), then proceed.
Ratio 3 = Ratio 2 + Tolerance			
12 Adjusted Incurred Claims	<u>                    </u>		
(Line 3, Col. a - Line 6) x Line 11			
13 REFUND	<u>                    </u>		If the amount on Line 13 is less than .005 times the annualized premium in-force as of December 31 of the reporting year, then no refund is made
Line 3, Col. a - Line 6 - (Line 12/Line 7)			
Deminimus Amount	<u>                    </u>		
<i>.005 x Annualized In-Force Premium as of December 31 of reporting year</i>			

Medicare Supplement Credibility Table	
Life Years Exposed Since Inception	Tolerance
10,000 +	0.0%
5,000 - 9,999	5.0%
2,500 - 4,999	7.5%
1,000 - 2,499	10.0%
500 - 999	15.0%
If less than 500, no credibility	



**Medicare Supplement Refund Calculation Form  
For Calendar Year 2010**

TYPE Group	SMSBP(P)	Plan F
For the State of <b>Arkansas</b>		
Company Name: <b>Bankers Life and Casualty Company</b>		
NAIC Group code: <b>0233</b>	NAIC Company Code: <b>61263</b>	
Address: <b>600 West Chicago Ave, Chicago, IL 60654-2800</b>		
Person Completing This Exhibit	<b>Christopher J Conforti</b>	
Title: <b>Actuary</b>	Telephone Number <b>(312) 396-7668</b>	

	(a) Earned Premium	(b) Incurred Claims	
1 Current Year's Experience			
a Total (all policy years)	<u>0</u>	<u>0</u>	
b Current Year's Issues	<u>0</u>	<u>0</u>	
c Net (1a - 1b)	<u>0</u>	<u>0</u>	
2 Past Years' Experience (All Policy Years)	<u>177,885</u>	<u>196,497</u>	
3 Total Experience (1c + 2)	<u>177,885</u>	<u>196,497</u>	
4 Refunds Last Year (excluding interest)	<u>0</u>		
5 Previous Since Inception (excluding interest)	<u>0</u>		
6 Refunds Since Inception (excluding interest)	<u>0</u>		
7 Benchmark Ratio Since Inception (Ratio 1)	<u>0.724</u>		
8 Experienced Ratio Since Inception (Ratio2)	<u>1.105</u>		
(Line 3, Col. b)/Lin 3, Col. a - Line 6)			
9 Life Years Exposed Since Inception	<u>114</u>		If Experienced Ratio (Line 8) < Benchmark Ratio (Line 7) AND Life Years Exposed (Line 9) > 500, proceed, else STOP.
If (Line 8 < Line 7 AND Line 9 > 500, proceed; else Stop			
10 Tolerance Permitted (from credibility table)	<u><b>no credibility</b></u>		
11 Adjustment to Incurred Claims for Credibility	<u>                    </u>		If Ratio 3 (Line 11) is less than the Benchmark Ratio (Line 7), then proceed.
Ratio 3 = Ratio 2 + Tolerance			
12 Adjusted Incurred Claims	<u>                    </u>		
(Line 3, Col. a - Line 6) x Line 11			
13 REFUND	<u>                    </u>		If the amount on Line 13 is less than .005 times the annualized premium in-force as of December 31 of the reporting year, then no refund is made
Line 3, Col. a - Line 6 - (Line 12/Line 7)			
Deminimus Amount	<u>                    </u>		
<i>.005 x Annualized In-Force Premium as of December 31 of reporting year</i>			

Medicare Supplement Credibility Table	
Life Years Exposed Since Inception	Tolerance
10,000 +	0.0%
5,000 - 9,999	5.0%
2,500 - 4,999	7.5%
1,000 - 2,499	10.0%
500 - 999	15.0%
If less than 500, no credibility	



**Medicare Supplement Refund Calculation Form  
For Calendar Year 2010**

TYPE Group	SMSBP(P)	Plan G
For the State of <b>Arkansas</b>		
Company Name: <b>Bankers Life and Casualty Company</b>		
NAIC Group code: <b>0233</b>	NAIC Company Code: <b>61263</b>	
Address: <b>600 West Chicago Ave, Chicago, IL 60654-2800</b>		
Person Completing This Exhibit	<b>Christopher J Conforti</b>	
Title: <b>Actuary</b>	Telephone Number <b>(312) 396-7668</b>	

	(a) Earned Premium	(b) Incurred Claims	
1 Current Year's Experience			
a Total (all policy years)	<u>0</u>	<u>0</u>	
b Current Year's Issues	<u>0</u>	<u>0</u>	
c Net (1a - 1b)	<u>0</u>	<u>0</u>	
2 Past Years' Experience (All Policy Years)	<u>17,975</u>	<u>12,069</u>	
3 Total Experience (1c + 2)	<u>17,975</u>	<u>12,069</u>	
4 Refunds Last Year (excluding interest)	<u>0</u>		
5 Previous Since Inception (excluding interest)	<u>0</u>		
6 Refunds Since Inception (excluding interest)	<u>0</u>		
7 Benchmark Ratio Since Inception (Ratio 1)	<u>0.738</u>		
8 Experienced Ratio Since Inception (Ratio2)	<u>0.671</u>		
(Line 3, Col. b)/Lin 3, Col. a - Line 6)			
9 Life Years Exposed Since Inception	<u>13</u>		If Experienced Ratio (Line 8) < Benchmark Ratio (Line 7) AND Life Years Exposed (Line 9) > 500, proceed, else STOP.
If (Line 8 < Line 7 AND Line 9 > 500, proceed; else Stop			
10 Tolerance Permitted (from credibility table)	<u><b>no credibility</b></u>		
11 Adjustment to Incurred Claims for Credibility	<u>                    </u>		If Ratio 3 (Line 11) is less than the Benchmark Ratio (Line 7), then proceed.
Ratio 3 = Ratio 2 + Tolerance			
12 Adjusted Incurred Claims	<u>                    </u>		
(Line 3, Col. a - Line 6) x Line 11			
13 REFUND	<u>                    </u>		If the amount on Line 13 is less than .005 times the annualized premium in-force as of December 31 of the reporting year, then no refund is made
Line 3, Col. a - Line 6 - (Line 12/Line 7)			
Deminimus Amount	<u>                    </u>		
<i>.005 x Annualized In-Force Premium as of December 31 of reporting year</i>			

Medicare Supplement Credibility Table	
Life Years Exposed Since Inception	Tolerance
10,000 +	0.0%
5,000 - 9,999	5.0%
2,500 - 4,999	7.5%
1,000 - 2,499	10.0%
500 - 999	15.0%
If less than 500, no credibility	



**Medicare Supplement Refund Calculation Form  
For Calendar Year 2010**

TYPE <b>Individual</b>	SMSBP(P) <b>Plan A</b>
For the State of <b>Arkansas</b>	
Company Name: <b>Bankers Life and Casualty Company</b>	
NAIC Group code: <b>0233</b>	NAIC Company Code: <b>61263</b>
Address: <b>600 West Chicago Ave, Chicago, IL 60654-2800</b>	
Person Completing This Exhibit <b>Christopher J Conforti</b>	
Title: <b>Actuary</b>	Telephone Number <b>(312) 396-7668</b>

	(a) Earned Premium	(b) Incurred Claims	
1 Current Year's Experience			
a Total (all policy years)	<u>0</u>	<u>0</u>	
b Current Year's Issues	<u>0</u>	<u>0</u>	
c Net (1a - 1b)	<u>0</u>	<u>0</u>	
2 Past Years' Experience (All Policy Years)	<u>90,422</u>	<u>37,884</u>	
3 Total Experience (1c + 2)	<u>90,422</u>	<u>37,884</u>	
4 Refunds Last Year (excluding interest)	<u>0</u>		
5 Previous Since Inception (excluding interest)	<u>0</u>		
6 Refunds Since Inception (excluding interest)	<u>0</u>		
7 Benchmark Ratio Since Inception (Ratio 1)	<u>0.628</u>		
8 Experienced Ratio Since Inception (Ratio2)	<u>0.419</u>		
(Line 3, Col. b)/Lin 3, Col. a - Line 6)			
9 Life Years Exposed Since Inception	<u>79</u>		If Experienced Ratio (Line 8) < Benchmark Ratio (Line 7) AND Life Years Exposed (Line 9) > 500, proceed, else STOP.
If (Line 8 < Line 7 AND Line 9 > 500, proceed; else Stop			
10 Tolerance Permitted (from credibility table)	<u><b>no credibility</b></u>		
11 Adjustment to Incurred Claims for Credibility	<u>                    </u>		If Ratio 3 (Line 11) is less than the Benchmark Ratio (Line 7), then proceed.
Ratio 3 = Ratio 2 + Tolerance			
12 Adjusted Incurred Claims	<u>                    </u>		
(Line 3, Col. a - Line 6) x Line 11			
13 REFUND	<u>                    </u>		If the amount on Line 13 is less than .005 times the annualized premium in-force as of December 31 of the reporting year, then no refund is made
Line 3, Col. a - Line 6 - (Line 12/Line 7)			
Deminimus Amount	<u>                    </u>		
<i>.005 x Annualized In-Force Premium as of December 31 of reporting year</i>			

Medicare Supplement Credibility Table	
Life Years Exposed Since Inception	Tolerance
10,000 +	0.0%
5,000 - 9,999	5.0%
2,500 - 4,999	7.5%
1,000 - 2,499	10.0%
500 - 999	15.0%
If less than 500, no credibility	

**Medicare Supplement Refund Calculation Form  
For Calendar Year 2010**

TYPE **Individual**                      SMSBP(P) **Plan A**  
 For the State of **Arkansas**  
 Company Name: **Bankers Life and Casualty Company**  
 NAIC Group code: **0233**                      NAIC Company Code: **61263**  
 Address: **600 West Chicago Ave, Chicago, IL 60654-2800**  
 Person Completing This Exhibit **Christopher J Conforti**  
 Title: **Actuary**                                      Telephone Number **(312) 396-7668**

(a) Year	(b) Earned Premium	(c) Factor	(d) (b) x (c)	(e) Cumulative Loss Ratio	(f) (d) x (e)	(g) Factor	(h) (b) x (g)	(i) Cumulative Loss Ratio	(j) (h) x (i)	(o) Policy Year Loss Ratio
1	0	2.770	0	0.442	0	0	0	0.000	0	0.4
2	0	4.175	0	0.493	0	0	0	0.000	0	0.55
3	0	4.175	0	0.493	0	1.194	0	0.659	0	0.65
4	549	4.175	2,292	0.493	1,130	2.245	1,232	0.669	824	0.67
5	106	4.175	444	0.493	219	3.17	337	0.678	228	0.69
6	0	4.175	0	0.493	0	3.998	0	0.686	0	0.71
7	885	4.175	3,696	0.493	1,822	4.754	4,208	0.695	2,925	0.73
8	3,398	4.175	14,186	0.493	6,994	5.445	18,502	0.702	12,988	0.75
9	4,999	4.175	20,870	0.493	10,289	6.075	30,367	0.708	21,500	0.76
10	5,016	4.175	20,942	0.493	10,324	6.65	33,356	0.713	23,783	0.76
11	453	4.175	1,890	0.493	932	7.176	3,249	0.717	2,330	0.76
12	384	4.175	1,604	0.493	791	7.655	2,941	0.720	2,118	0.77
13	287	4.175	1,199	0.493	591	8.093	2,323	0.723	1,680	0.77
14	1,547	4.175	6,458	0.493	3,184	8.493	13,137	0.725	9,524	0.77
15+	3,291	4.175	13,740	0.493	6,773	8.684	28,580	0.725	20,721	0.77
		(k)	87,321	(l):	43,049	(m):	138,232	(n):	98,621	

Benchmark Ratio Since Inception:  $(l+n) / (k+m)$ : **0.628**

**Medicare Supplement Refund Calculation Form  
For Calendar Year 2010**

TYPE <b>Individual</b>	SMSBP(P) <b>Plan B</b>
For the State of <b>Arkansas</b>	
Company Name: <b>Bankers Life and Casualty Company</b>	
NAIC Group code: <b>0233</b>	NAIC Company Code: <b>61263</b>
Address: <b>600 West Chicago Ave, Chicago, IL 60654-2800</b>	
Person Completing This Exhibit <b>Christopher J Conforti</b>	
Title: <b>Actuary</b>	Telephone Number <b>(312) 396-7668</b>

	(a) Earned Premium	(b) Incurred Claims	
1 Current Year's Experience			
a Total (all policy years)	<u>6,183</u>	<u>309</u>	
b Current Year's Issues	<u>0</u>	<u>0</u>	
c Net (1a - 1b)	<u>6,183</u>	<u>309</u>	
2 Past Years' Experience (All Policy Years)	<u>528,542</u>	<u>284,772</u>	
3 Total Experience (1c + 2)	<u>534,725</u>	<u>285,081</u>	
4 Refunds Last Year (excluding interest)	<u>0</u>		
5 Previous Since Inception (excluding interest)	<u>0</u>		
6 Refunds Since Inception (excluding interest)	<u>0</u>		
7 Benchmark Ratio Since Inception (Ratio 1)	<u>0.628</u>		
8 Experienced Ratio Since Inception (Ratio2)	<u>0.533</u>		
(Line 3, Col. b)/Lin 3, Col. a - Line 6)			
9 Life Years Exposed Since Inception	<u>240</u>		If Experienced Ratio (Line 8) < Benchmark Ratio (Line 7) AND Life Years Exposed (Line 9) > 500, proceed, else STOP.
If (Line 8 < Line 7 AND Line 9 > 500, proceed; else Stop			
10 Tolerance Permitted (from credibility table)	<u><b>no credibility</b></u>		
11 Adjustment to Incurred Claims for Credibility	<u>                    </u>		If Ratio 3 (Line 11) is less than the Benchmark Ratio (Line 7), then proceed.
Ratio 3 = Ratio 2 + Tolerance			
12 Adjusted Incurred Claims	<u>                    </u>		
(Line 3, Col. a - Line 6) x Line 11			
13 REFUND	<u>                    </u>		If the amount on Line 13 is less than .005 times the annualized premium in-force as of December 31 of the reporting year, then no refund is made
Line 3, Col. a - Line 6 - (Line 12/Line 7)			
Deminimus Amount	<u>                    </u>		
<i>.005 x Annualized In-Force Premium as of December 31 of reporting year</i>			

Medicare Supplement Credibility Table	
Life Years Exposed Since Inception	Tolerance
10,000 +	0.0%
5,000 - 9,999	5.0%
2,500 - 4,999	7.5%
1,000 - 2,499	10.0%
500 - 999	15.0%
If less than 500, no credibility	

**Medicare Supplement Refund Calculation Form  
For Calendar Year 2010**

TYPE <b>Individual</b>	SMSBP(P) <b>Plan B</b>
For the State of <b>Arkansas</b>	
Company Name: <b>Bankers Life and Casualty Company</b>	
NAIC Group code: <b>0233</b>	NAIC Company Code: <b>61263</b>
Address: <b>600 West Chicago Ave, Chicago, IL 60654-2800</b>	
Person Completing This Exhibit <b>Christopher J Conforti</b>	
Title: <b>Actuary</b>	Telephone Number <b>(312) 396-7668</b>

(a) Year	(b) Earned Premium	(c) Factor	(d) (b) x (c)	(e) Cumulative Loss Ratio	(f) (d) x (e)	(g) Factor	(h) (b) x (g)	(i) Cumulative Loss Ratio	(j) (h) x (i)	(o) Policy Year Loss Ratio
1	0	2.770	0	0.442	0	0	0	0.000	0	0.4
2	0	4.175	0	0.493	0	0	0	0.000	0	0.55
3	0	4.175	0	0.493	0	1.194	0	0.659	0	0.65
4	0	4.175	0	0.493	0	2.245	0	0.669	0	0.67
5	0	4.175	0	0.493	0	3.17	0	0.678	0	0.69
6	0	4.175	0	0.493	0	3.998	0	0.686	0	0.71
7	0	4.175	0	0.493	0	4.754	0	0.695	0	0.73
8	23,880	4.175	99,698	0.493	49,151	5.445	130,026	0.702	91,278	0.75
9	9,961	4.175	41,588	0.493	20,503	6.075	60,514	0.708	42,844	0.76
10	22,347	4.175	93,298	0.493	45,996	6.65	148,607	0.713	105,957	0.76
11	7,441	4.175	31,066	0.493	15,316	7.176	53,396	0.717	38,285	0.76
12	5,175	4.175	21,606	0.493	10,652	7.655	39,616	0.720	28,524	0.77
13	967	4.175	4,039	0.493	1,991	8.093	7,829	0.723	5,660	0.77
14	3,281	4.175	13,700	0.493	6,754	8.493	27,870	0.725	20,206	0.77
15+	8,468	4.175	35,355	0.493	17,429	8.684	73,538	0.725	53,315	0.77
		(k)	340,350	(l):	167,792	(m):	541,396	(n):	386,069	

Benchmark Ratio Since Inception:  $(l+n) / (k+m)$ : **0.628**

**Medicare Supplement Refund Calculation Form  
For Calendar Year 2010**

TYPE <b>Individual</b>	SMSBP(P) <b>Plan C</b>
For the State of <b>Arkansas</b>	
Company Name: <b>Bankers Life and Casualty Company</b>	
NAIC Group code: <b>0233</b>	NAIC Company Code: <b>61263</b>
Address: <b>600 West Chicago Ave, Chicago, IL 60654-2800</b>	
Person Completing This Exhibit <b>Christopher J Conforti</b>	
Title: <b>Actuary</b>	Telephone Number <b>(312) 396-7668</b>

	(a) Earned Premium	(b) Incurred Claims	
1 Current Year's Experience			
a Total (all policy years)	<u>49,833</u>	<u>18,429</u>	
b Current Year's Issues	<u>0</u>	<u>0</u>	
c Net (1a - 1b)	<u>49,833</u>	<u>18,429</u>	
2 Past Years' Experience (All Policy Years)	<u>7,295,726</u>	<u>5,105,060</u>	
3 Total Experience (1c + 2)	<u>7,345,559</u>	<u>5,123,489</u>	
4 Refunds Last Year (excluding interest)	<u>0</u>		
5 Previous Since Inception (excluding interest)	<u>0</u>		
6 Refunds Since Inception (excluding interest)	<u>0</u>		
7 Benchmark Ratio Since Inception (Ratio 1)	<u>0.646</u>		
8 Experienced Ratio Since Inception (Ratio2)	<u>0.697</u>		
(Line 3, Col. b)/Lin 3, Col. a - Line 6)			
9 Life Years Exposed Since Inception	<u>4,778</u>		<b>If Experienced Ratio (Line 8) &lt; Benchmark Ratio (Line 7) AND Life Years Exposed (Line 9) &gt; 500, proceed, else STOP.</b>
If (Line 8 < Line 7 AND Line 9 > 500, proceed; else Stop			
10 Tolerance Permitted (from credibility table)	<u>                    </u>		
11 Adjustment to Incurred Claims for Credibility	<u>                    </u>		If Ratio 3 (Line 11) is less than the Benchmark Ratio (Line 7), then proceed.
Ratio 3 = Ratio 2 + Tolerance			
12 Adjusted Incurred Claims	<u>                    </u>		
(Line 3, Col. a - Line 6) x Line 11			
13 REFUND	<u>                    </u>		If the amount on Line 13 is less than .005 times the annualized premium in-force as of December 31 of the reporting year, then no refund is made
Line 3, Col. a - Line 6 - (Line 12/Line 7)			
Deminimus Amount	<u>                    </u>		
<i>.005 x Annualized In-Force Premium as of December 31 of reporting year</i>			

Medicare Supplement Credibility Table	
Life Years Exposed Since Inception	Tolerance
10,000 +	0.0%
5,000 - 9,999	5.0%
2,500 - 4,999	7.5%
1,000 - 2,499	10.0%
500 - 999	15.0%
If less than 500, no credibility	

**Medicare Supplement Refund Calculation Form  
For Calendar Year 2010**

TYPE **Individual**                      SMSBP(P) **Plan C**  
 For the State of **Arkansas**  
 Company Name: **Bankers Life and Casualty Company**  
 NAIC Group code: **0233**                      NAIC Company Code: **61263**  
 Address: **600 West Chicago Ave, Chicago, IL 60654-2800**  
 Person Completing This Exhibit **Christopher J Conforti**  
 Title: **Actuary**                                      Telephone Number **(312) 396-7668**

(a) Year	(b) Earned Premium	(c) Factor	(d) (b) x (c)	(e) Cumulative Loss Ratio	(f) (d) x (e)	(g) Factor	(h) (b) x (g)	(i) Cumulative Loss Ratio	(j) (h) x (i)	(o) Policy Year Loss Ratio
1	0	2.770	0	0.442	0	0	0	0.000	0	0.4
2	3,198	4.175	13,350	0.493	6,582	0	0	0.000	0	0.55
3	0	4.175	0	0.493	0	1.194	0	0.659	0	0.65
4	0	4.175	0	0.493	0	2.245	0	0.669	0	0.67
5	0	4.175	0	0.493	0	3.17	0	0.678	0	0.69
6	0	4.175	0	0.493	0	3.998	0	0.686	0	0.71
7	1,828	4.175	7,633	0.493	3,763	4.754	8,691	0.695	6,040	0.73
8	0	4.175	0	0.493	0	5.445	0	0.702	0	0.75
9	0	4.175	0	0.493	0	6.075	0	0.708	0	0.76
10	10,543	4.175	44,017	0.493	21,700	6.65	70,110	0.713	49,988	0.76
11	33,401	4.175	139,450	0.493	68,749	7.176	239,687	0.717	171,856	0.76
12	65,669	4.175	274,170	0.493	135,166	7.655	502,699	0.720	361,943	0.77
13	39,225	4.175	163,766	0.493	80,737	8.093	317,450	0.723	229,516	0.77
14	28,670	4.175	119,698	0.493	59,011	8.493	243,496	0.725	176,535	0.77
15+	334,359	4.175	1,395,947	0.493	688,202	8.684	2,903,571	0.725	2,105,088	0.77
		(k)	2,158,031	(l):	1,063,910	(m):	4,285,704	(n):	3,100,966	

Benchmark Ratio Since Inception: (l+n) / (k+m): **0.646**

**Medicare Supplement Refund Calculation Form  
For Calendar Year 2010**

TYPE <b>Individual</b>	SMSBP(P) <b>Plan D</b>
For the State of <b>Arkansas</b>	
Company Name: <b>Bankers Life and Casualty Company</b>	
NAIC Group code: <b>0233</b>	NAIC Company Code: <b>61263</b>
Address: <b>600 West Chicago Ave, Chicago, IL 60654-2800</b>	
Person Completing This Exhibit <b>Christopher J Conforti</b>	
Title: <b>Actuary</b>	Telephone Number <b>(312) 396-7668</b>

	(a) Earned Premium	(b) Incurred Claims	
1 Current Year's Experience			
a Total (all policy years)	<u>3,068</u>	<u>252</u>	
b Current Year's Issues	<u>0</u>	<u>0</u>	
c Net (1a - 1b)	<u>3,068</u>	<u>252</u>	
2 Past Years' Experience (All Policy Years)	<u>1,146,357</u>	<u>871,811</u>	
3 Total Experience (1c + 2)	<u>1,149,425</u>	<u>872,063</u>	
4 Refunds Last Year (excluding interest)	<u>0</u>		
5 Previous Since Inception (excluding interest)	<u>0</u>		
6 Refunds Since Inception (excluding interest)	<u>0</u>		
7 Benchmark Ratio Since Inception (Ratio 1)	<u>0.647</u>		
8 Experienced Ratio Since Inception (Ratio2)	<u>0.759</u>		
(Line 3, Col. b)/Lin 3, Col. a - Line 6)			
9 Life Years Exposed Since Inception	<u>865</u>		<b>If Experienced Ratio (Line 8) &lt; Benchmark Ratio (Line 7) AND Life Years Exposed (Line 9) &gt; 500, proceed, else STOP.</b>
If (Line 8 < Line 7 AND Line 9 > 500, proceed; else Stop			
10 Tolerance Permitted (from credibility table)	<u>                    </u>		
11 Adjustment to Incurred Claims for Credibility	<u>                    </u>		If Ratio 3 (Line 11) is less than the Benchmark Ratio (Line 7), then proceed.
Ratio 3 = Ratio 2 + Tolerance			
12 Adjusted Incurred Claims	<u>                    </u>		
(Line 3, Col. a - Line 6) x Line 11			
13 REFUND	<u>                    </u>		If the amount on Line 13 is less than .005 times the annualized premium in-force as of December 31 of the reporting year, then no refund is made
Line 3, Col. a - Line 6 - (Line 12/Line 7)			
Deminimus Amount	<u>                    </u>		
<i>.005 x Annualized In-Force Premium as of December 31 of reporting year</i>			

Medicare Supplement Credibility Table	
Life Years Exposed Since Inception	Tolerance
10,000 +	0.0%
5,000 - 9,999	5.0%
2,500 - 4,999	7.5%
1,000 - 2,499	10.0%
500 - 999	15.0%
If less than 500, no credibility	

**Medicare Supplement Refund Calculation Form  
For Calendar Year 2010**

TYPE **Individual** SMSBP(P) **Plan D**  
 For the State of **Arkansas**  
 Company Name: **Bankers Life and Casualty Company**  
 NAIC Group code: **0233** NAIC Company Code: **61263**  
 Address: **600 West Chicago Ave, Chicago, IL 60654-2800**  
 Person Completing This Exhibit **Christopher J Conforti**  
 Title: **Actuary** Telephone Number **(312) 396-7668**

(a) Year	(b) Earned Premium	(c) Factor	(d) (b) x (c)	(e) Cumulative Loss Ratio	(f) (d) x (e)	(g) Factor	(h) (b) x (g)	(i) Cumulative Loss Ratio	(j) (h) x (i)	(o) Policy Year Loss Ratio
1	0	2.770	0	0.442	0	0	0	0.000	0	0.4
2	0	4.175	0	0.493	0	0	0	0.000	0	0.55
3	0	4.175	0	0.493	0	1.194	0	0.659	0	0.65
4	0	4.175	0	0.493	0	2.245	0	0.669	0	0.67
5	0	4.175	0	0.493	0	3.17	0	0.678	0	0.69
6	0	4.175	0	0.493	0	3.998	0	0.686	0	0.71
7	0	4.175	0	0.493	0	4.754	0	0.695	0	0.73
8	0	4.175	0	0.493	0	5.445	0	0.702	0	0.75
9	0	4.175	0	0.493	0	6.075	0	0.708	0	0.76
10	3,640	4.175	15,198	0.493	7,493	6.65	24,208	0.713	17,260	0.76
11	6,429	4.175	26,841	0.493	13,233	7.176	46,134	0.717	33,078	0.76
12	8,596	4.175	35,889	0.493	17,693	7.655	65,804	0.720	47,379	0.77
13	23,704	4.175	98,964	0.493	48,789	8.093	191,836	0.723	138,697	0.77
14	5,085	4.175	21,230	0.493	10,466	8.493	43,186	0.725	31,310	0.77
15+	67,686	4.175	282,591	0.493	139,317	8.684	587,789	0.725	426,148	0.77
		(k)	480,713	(l):	236,991	(m):	958,957	(n):	693,872	

Benchmark Ratio Since Inception: (l+n) / (k+m): **0.647**

**Medicare Supplement Refund Calculation Form  
For Calendar Year 2010**

TYPE <b>Individual</b>	SMSBP(P) <b>Plan E</b>
For the State of <b>Arkansas</b>	
Company Name: <b>Bankers Life and Casualty Company</b>	
NAIC Group code: <b>0233</b>	NAIC Company Code: <b>61263</b>
Address: <b>600 West Chicago Ave, Chicago, IL 60654-2800</b>	
Person Completing This Exhibit <b>Christopher J Conforti</b>	
Title: <b>Actuary</b>	Telephone Number <b>(312) 396-7668</b>

	(a) Earned Premium	(b) Incurred Claims	
1 Current Year's Experience			
a Total (all policy years)	<u>17,870</u>	<u>3,720</u>	
b Current Year's Issues	<u>0</u>	<u>0</u>	
c Net (1a - 1b)	<u>17,870</u>	<u>3,720</u>	
2 Past Years' Experience (All Policy Years)	<u>595,548</u>	<u>435,682</u>	
3 Total Experience (1c + 2)	<u>613,417</u>	<u>439,402</u>	
4 Refunds Last Year (excluding interest)	<u>0</u>		
5 Previous Since Inception (excluding interest)	<u>0</u>		
6 Refunds Since Inception (excluding interest)	<u>0</u>		
7 Benchmark Ratio Since Inception (Ratio 1)	<u>0.629</u>		
8 Experienced Ratio Since Inception (Ratio2)	<u>0.716</u>		
(Line 3, Col. b)/Lin 3, Col. a - Line 6)			
9 Life Years Exposed Since Inception	<u>357</u>		If Experienced Ratio (Line 8) < Benchmark Ratio (Line 7) AND Life Years Exposed (Line 9) > 500, proceed, else STOP.
If (Line 8 < Line 7 AND Line 9 > 500, proceed; else Stop			
10 Tolerance Permitted (from credibility table)	<u><b>no credibility</b></u>		
11 Adjustment to Incurred Claims for Credibility	<u>                    </u>		If Ratio 3 (Line 11) is less than the Benchmark Ratio (Line 7), then proceed.
Ratio 3 = Ratio 2 + Tolerance			
12 Adjusted Incurred Claims	<u>                    </u>		
(Line 3, Col. a - Line 6) x Line 11			
13 REFUND	<u>                    </u>		If the amount on Line 13 is less than .005 times the annualized premium in-force as of December 31 of the reporting year, then no refund is made
Line 3, Col. a - Line 6 - (Line 12/Line 7)			
Deminimus Amount	<u>                    </u>		
<i>.005 x Annualized In-Force Premium as of December 31 of reporting year</i>			

Medicare Supplement Credibility Table	
Life Years Exposed Since Inception	Tolerance
10,000 +	0.0%
5,000 - 9,999	5.0%
2,500 - 4,999	7.5%
1,000 - 2,499	10.0%
500 - 999	15.0%
If less than 500, no credibility	

**Medicare Supplement Refund Calculation Form  
For Calendar Year 2010**

TYPE **Individual**                      SMSBP(P) **Plan E**  
 For the State of **Arkansas**  
 Company Name: **Bankers Life and Casualty Company**  
 NAIC Group code: **0233**                      NAIC Company Code: **61263**  
 Address: **600 West Chicago Ave, Chicago, IL 60654-2800**  
 Person Completing This Exhibit **Christopher J Conforti**  
 Title: **Actuary**                                      Telephone Number **(312) 396-7668**

(a) Year	(b) Earned Premium	(c) Factor	(d) (b) x (c)	(e) Cumulative Loss Ratio	(f) (d) x (e)	(g) Factor	(h) (b) x (g)	(i) Cumulative Loss Ratio	(j) (h) x (i)	(o) Policy Year Loss Ratio
1	0	2.770	0	0.442	0	0	0	0.000	0	0.4
2	0	4.175	0	0.493	0	0	0	0.000	0	0.55
3	0	4.175	0	0.493	0	1.194	0	0.659	0	0.65
4	0	4.175	0	0.493	0	2.245	0	0.669	0	0.67
5	0	4.175	0	0.493	0	3.17	0	0.678	0	0.69
6	0	4.175	0	0.493	0	3.998	0	0.686	0	0.71
7	0	4.175	0	0.493	0	4.754	0	0.695	0	0.73
8	3,158	4.175	13,183	0.493	6,499	5.445	17,193	0.702	12,069	0.75
9	11,870	4.175	49,557	0.493	24,432	6.075	72,109	0.708	51,053	0.76
10	17,794	4.175	74,290	0.493	36,625	6.65	118,331	0.713	84,370	0.76
11	28,854	4.175	120,464	0.493	59,389	7.176	207,055	0.717	148,458	0.76
12	0	4.175	0	0.493	0	7.655	0	0.720	0	0.77
13	0	4.175	0	0.493	0	8.093	0	0.723	0	0.77
14	0	4.175	0	0.493	0	8.493	0	0.725	0	0.77
15+	75	4.175	315	0.493	155	8.684	655	0.725	475	0.77
		(k)	257,809	(l):	127,100	(m):	415,343	(n):	296,425	

Benchmark Ratio Since Inception: (l+n) / (k+m): **0.629**

**Medicare Supplement Refund Calculation Form  
For Calendar Year 2010**

TYPE <b>Individual</b>	SMSBP(P) <b>Plan F</b>
For the State of <b>Arkansas</b>	
Company Name: <b>Bankers Life and Casualty Company</b>	
NAIC Group code: <b>0233</b>	NAIC Company Code: <b>61263</b>
Address: <b>600 West Chicago Ave, Chicago, IL 60654-2800</b>	
Person Completing This Exhibit	<b>Christopher J Conforti</b>
Title: <b>Actuary</b>	Telephone Number <b>(312) 396-7668</b>

	(a) Earned Premium	(b) Incurred Claims	
1 Current Year's Experience			
a Total (all policy years)	<u>1,335,136</u>	<u>950,005</u>	
b Current Year's Issues	<u>16,970</u>	<u>13,013</u>	
c Net (1a - 1b)	<u>1,318,166</u>	<u>936,992</u>	
2 Past Years' Experience (All Policy Years)	<u>20,112,713</u>	<u>14,637,839</u>	
3 Total Experience (1c + 2)	<u>21,430,879</u>	<u>15,574,831</u>	
4 Refunds Last Year (excluding interest)	<u>0</u>		
5 Previous Since Inception (excluding interest)	<u>0</u>		
6 Refunds Since Inception (excluding interest)	<u>0</u>		
7 Benchmark Ratio Since Inception (Ratio 1)	<u>0.595</u>		
8 Experienced Ratio Since Inception (Ratio2)	<u>0.727</u>		
(Line 3, Col. b)/Lin 3, Col. a - Line 6)			
9 Life Years Exposed Since Inception	<u>13,149</u>		<b>If Experienced Ratio (Line 8) &lt; Benchmark Ratio (Line 7) AND Life Years Exposed (Line 9) &gt; 500, proceed, else STOP.</b>
If (Line 8 < Line 7 AND Line 9 > 500, proceed; else Stop			
10 Tolerance Permitted (from credibility table)	<u>                    </u>		
11 Adjustment to Incurred Claims for Credibility	<u>                    </u>		If Ratio 3 (Line 11) is less than the Benchmark Ratio (Line 7), then proceed.
Ratio 3 = Ratio 2 + Tolerance			
12 Adjusted Incurred Claims	<u>                    </u>		
(Line 3, Col. a - Line 6) x Line 11			
13 REFUND	<u>                    </u>		If the amount on Line 13 is less than .005 times the annualized premium in-force as of December 31 of the reporting year, then no refund is made
Line 3, Col. a - Line 6 - (Line 12/Line 7)			
Deminimus Amount	<u>                    </u>		
<i>.005 x Annualized In-Force Premium as of December 31 of reporting year</i>			

Medicare Supplement Credibility Table	
Life Years Exposed Since Inception	Tolerance
10,000 +	0.0%
5,000 - 9,999	5.0%
2,500 - 4,999	7.5%
1,000 - 2,499	10.0%
500 - 999	15.0%
If less than 500, no credibility	

**Medicare Supplement Refund Calculation Form  
For Calendar Year 2010**

TYPE **Individual** SMSBP(P) **Plan F**  
 For the State of **Arkansas**  
 Company Name: **Bankers Life and Casualty Company**  
 NAIC Group code: **0233** NAIC Company Code: **61263**  
 Address: **600 West Chicago Ave, Chicago, IL 60654-2800**  
 Person Completing This Exhibit **Christopher J Conforti**  
 Title: **Actuary** Telephone Number **(312) 396-7668**

(a) Year	(b) Earned Premium	(c) Factor	(d) (b) x (c)	(e) Cumulative Loss Ratio	(f) (d) x (e)	(g) Factor	(h) (b) x (g)	(i) Cumulative Loss Ratio	(j) (h) x (i)	(o) Policy Year Loss Ratio
1	13,205	2.770	36,578	0.442	16,167	0	0	0.000	0	0.4
2	15,472	4.175	64,594	0.493	31,845	0	0	0.000	0	0.55
3	17,452	4.175	72,863	0.493	35,921	1.194	20,838	0.659	13,732	0.65
4	178,104	4.175	743,582	0.493	366,586	2.245	399,842	0.669	267,494	0.67
5	892,826	4.175	3,727,547	0.493	1,837,681	3.17	2,830,258	0.678	1,918,915	0.69
6	1,018,988	4.175	4,254,276	0.493	2,097,358	3.998	4,073,915	0.686	2,794,706	0.71
7	91,700	4.175	382,847	0.493	188,744	4.754	435,941	0.695	302,979	0.73
8	147,508	4.175	615,846	0.493	303,612	5.445	803,181	0.702	563,833	0.75
9	126,504	4.175	528,154	0.493	260,380	6.075	768,512	0.708	544,106	0.76
10	96,374	4.175	402,362	0.493	198,364	6.65	640,888	0.713	456,953	0.76
11	23,479	4.175	98,025	0.493	48,326	7.176	168,485	0.717	120,804	0.76
12	38,213	4.175	159,537	0.493	78,652	7.655	292,517	0.720	210,612	0.77
13	22,888	4.175	95,557	0.493	47,110	8.093	185,232	0.723	133,923	0.77
14	10,678	4.175	44,580	0.493	21,978	8.493	90,687	0.725	65,748	0.77
15+	190,624	4.175	795,854	0.493	392,356	8.684	1,655,376	0.725	1,200,148	0.77
		(k)	12,022,202	(l):	5,925,080	(m):	12,365,672	(n):	8,593,953	

Benchmark Ratio Since Inception: (l+n) / (k+m): **0.595**

**Medicare Supplement Refund Calculation Form  
For Calendar Year 2010**

TYPE <b>Individual</b>	SMSBP(P) <b>Plan G</b>
For the State of <b>Arkansas</b>	
Company Name: <b>Bankers Life and Casualty Company</b>	
NAIC Group code: <b>0233</b>	NAIC Company Code: <b>61263</b>
Address: <b>600 West Chicago Ave, Chicago, IL 60654-2800</b>	
Person Completing This Exhibit <b>Christopher J Conforti</b>	
Title: <b>Actuary</b>	Telephone Number <b>(312) 396-7668</b>

	(a) Earned Premium	(b) Incurred Claims	
1 Current Year's Experience			
a Total (all policy years)	<u>106,622</u>	<u>81,600</u>	
b Current Year's Issues	<u>0</u>	<u>0</u>	
c Net (1a - 1b)	<u>106,622</u>	<u>81,600</u>	
2 Past Years' Experience (All Policy Years)	<u>2,672,957</u>	<u>2,014,042</u>	
3 Total Experience (1c + 2)	<u>2,779,579</u>	<u>2,095,642</u>	
4 Refunds Last Year (excluding interest)	<u>0</u>		
5 Previous Since Inception (excluding interest)	<u>0</u>		
6 Refunds Since Inception (excluding interest)	<u>0</u>		
7 Benchmark Ratio Since Inception (Ratio 1)	<u>0.615</u>		
8 Experienced Ratio Since Inception (Ratio2)	<u>0.754</u>		
(Line 3, Col. b)/Lin 3, Col. a - Line 6)			
9 Life Years Exposed Since Inception	<u>1,638</u>		<b>If Experienced Ratio (Line 8) &lt; Benchmark Ratio (Line 7) AND Life Years Exposed (Line 9) &gt; 500, proceed, else STOP.</b>
If (Line 8 < Line 7 AND Line 9 > 500, proceed; else Stop			
10 Tolerance Permitted (from credibility table)	<u>                    </u>		
11 Adjustment to Incurred Claims for Credibility	<u>                    </u>		If Ratio 3 (Line 11) is less than the Benchmark Ratio (Line 7), then proceed.
Ratio 3 = Ratio 2 + Tolerance			
12 Adjusted Incurred Claims	<u>                    </u>		
(Line 3, Col. a - Line 6) x Line 11			
13 REFUND	<u>                    </u>		If the amount on Line 13 is less than .005 times the annualized premium in-force as of December 31 of the reporting year, then no refund is made
Line 3, Col. a - Line 6 - (Line 12/Line 7)			
Deminimus Amount	<u>                    </u>		
<i>.005 x Annualized In-Force Premium as of December 31 of reporting year</i>			

Medicare Supplement Credibility Table	
Life Years Exposed Since Inception	Tolerance
10,000 +	0.0%
5,000 - 9,999	5.0%
2,500 - 4,999	7.5%
1,000 - 2,499	10.0%
500 - 999	15.0%
If less than 500, no credibility	

**Medicare Supplement Refund Calculation Form  
For Calendar Year 2010**

TYPE <b>Individual</b>	SMSBP(P) <b>Plan G</b>
For the State of <b>Arkansas</b>	
Company Name: <b>Bankers Life and Casualty Company</b>	
NAIC Group code: <b>0233</b>	NAIC Company Code: <b>61263</b>
Address: <b>600 West Chicago Ave, Chicago, IL 60654-2800</b>	
Person Completing This Exhibit <b>Christopher J Conforti</b>	
Title: <b>Actuary</b>	Telephone Number <b>(312) 396-7668</b>

(a) Year	(b) Earned Premium	(c) Factor	(d) (b) x (c)	(e) Cumulative Loss Ratio	(f) (d) x (e)	(g) Factor	(h) (b) x (g)	(i) Cumulative Loss Ratio	(j) (h) x (i)	(o) Policy Year Loss Ratio
1	0	2.770	0	0.442	0	0	0	0.000	0	0.4
2	0	4.175	0	0.493	0	0	0	0.000	0	0.55
3	0	4.175	0	0.493	0	1.194	0	0.659	0	0.65
4	0	4.175	0	0.493	0	2.245	0	0.669	0	0.67
5	0	4.175	0	0.493	0	3.17	0	0.678	0	0.69
6	7,143	4.175	29,820	0.493	14,701	3.998	28,556	0.686	19,589	0.71
7	108,904	4.175	454,674	0.493	224,154	4.754	517,730	0.695	359,822	0.73
8	101,440	4.175	423,512	0.493	208,791	5.445	552,341	0.702	387,743	0.75
9	64,513	4.175	269,342	0.493	132,786	6.075	391,916	0.708	277,477	0.76
10	112,024	4.175	467,701	0.493	230,577	6.65	744,960	0.713	531,156	0.76
11	624	4.175	2,605	0.493	1,284	7.176	4,478	0.717	3,211	0.76
12	0	4.175	0	0.493	0	7.655	0	0.720	0	0.77
13	0	4.175	0	0.493	0	8.093	0	0.723	0	0.77
14	0	4.175	0	0.493	0	8.493	0	0.725	0	0.77
15+	798	4.175	3,330	0.493	1,642	8.684	6,927	0.725	5,022	0.77
		(k)	1,650,984	(l):	813,935	(m):	2,246,908	(n):	1,584,020	

Benchmark Ratio Since Inception: (l+n) / (k+m): **0.615**

**Medicare Supplement Refund Calculation Form  
For Calendar Year 2010**

TYPE <b>Individual</b>	SMSBP(P) <b>Plan J</b>
For the State of <b>Arkansas</b>	
Company Name: <b>Bankers Life and Casualty Company</b>	
NAIC Group code: <b>0233</b>	NAIC Company Code: <b>61263</b>
Address: <b>600 West Chicago Ave, Chicago, IL 60654-2800</b>	
Person Completing This Exhibit <b>Christopher J Conforti</b>	
Title: <b>Actuary</b>	Telephone Number <b>(312) 396-7668</b>

	(a) Earned Premium	(b) Incurred Claims	
1 Current Year's Experience			
a Total (all policy years)	<u>2,445,249</u>	<u>1,800,528</u>	
b Current Year's Issues	<u>100,911</u>	<u>60,515</u>	
c Net (1a - 1b)	<u>2,344,337</u>	<u>1,740,013</u>	
2 Past Years' Experience (All Policy Years)	<u>7,958,541</u>	<u>5,492,768</u>	
3 Total Experience (1c + 2)	<u>10,302,879</u>	<u>7,232,780</u>	
4 Refunds Last Year (excluding interest)	<u>0</u>		
5 Previous Since Inception (excluding interest)	<u>0</u>		
6 Refunds Since Inception (excluding interest)	<u>0</u>		
7 Benchmark Ratio Since Inception (Ratio 1)	<u>0.540</u>		
8 Experienced Ratio Since Inception (Ratio2)	<u>0.702</u>		
(Line 3, Col. b)/Lin 3, Col. a - Line 6)			
9 Life Years Exposed Since Inception	<u>5,621</u>		<b>If Experienced Ratio (Line 8) &lt; Benchmark Ratio (Line 7) AND Life Years Exposed (Line 9) &gt; 500, proceed, else STOP.</b>
If (Line 8 < Line 7 AND Line 9 > 500, proceed; else Stop			
10 Tolerance Permitted (from credibility table)	<u>                    </u>		
11 Adjustment to Incurred Claims for Credibility	<u>                    </u>		If Ratio 3 (Line 11) is less than the Benchmark Ratio (Line 7), then proceed.
Ratio 3 = Ratio 2 + Tolerance			
12 Adjusted Incurred Claims	<u>                    </u>		
(Line 3, Col. a - Line 6) x Line 11			
13 REFUND	<u>                    </u>		
Line 3, Col. a - Line 6 - (Line 12/Line 7)			
Deminimus Amount	<u>                    </u>		If the amount on Line 13 is less than .005 times the annualized premium in-force as of December 31 of the reporting year, then no refund is made
<i>.005 x Annualized In-Force Premium as of December 31 of reporting year</i>			

Medicare Supplement Credibility Table	
Life Years Exposed Since Inception	Tolerance
10,000 +	0.0%
5,000 - 9,999	5.0%
2,500 - 4,999	7.5%
1,000 - 2,499	10.0%
500 - 999	15.0%
If less than 500, no credibility	

**Medicare Supplement Refund Calculation Form  
For Calendar Year 2010**

TYPE **Individual** SMSBP(P) **Plan J**  
 For the State of **Arkansas**  
 Company Name: **Bankers Life and Casualty Company**  
 NAIC Group code: **0233** NAIC Company Code: **61263**  
 Address: **600 West Chicago Ave, Chicago, IL 60654-2800**  
 Person Completing This Exhibit **Christopher J Conforti**  
 Title: **Actuary** Telephone Number **(312) 396-7668**

(a) Year	(b) Earned Premium	(c) Factor	(d) (b) x (c)	(e) Cumulative Loss Ratio	(f) (d) x (e)	(g) Factor	(h) (b) x (g)	(i) Cumulative Loss Ratio	(j) (h) x (i)	(o) Policy Year Loss Ratio
1	204,602	2.770	566,746	0.442	250,502	0	0	0.000	0	0.4
2	217,176	4.175	906,709	0.493	447,008	0	0	0.000	0	0.55
3	353,413	4.175	1,475,500	0.493	727,422	1.194	421,975	0.659	278,082	0.65
4	1,224,623	4.175	5,112,801	0.493	2,520,611	2.245	2,749,278	0.669	1,839,267	0.67
5	275	4.175	1,146	0.493	565	3.17	870	0.678	590	0.69
6	0	4.175	0	0.493	0	3.998	0	0.686	0	0.71
7	0	4.175	0	0.493	0	4.754	0	0.695	0	0.73
8	0	4.175	0	0.493	0	5.445	0	0.702	0	0.75
9	0	4.175	0	0.493	0	6.075	0	0.708	0	0.76
10	0	4.175	0	0.493	0	6.65	0	0.713	0	0.76
11	0	4.175	0	0.493	0	7.176	0	0.717	0	0.76
12	0	4.175	0	0.493	0	7.655	0	0.720	0	0.77
13	0	4.175	0	0.493	0	8.093	0	0.723	0	0.77
14	0	4.175	0	0.493	0	8.493	0	0.725	0	0.77
15+	0	4.175	0	0.493	0	8.684	0	0.725	0	0.77
		(k)	8,062,902	(l):	3,946,108	(m):	3,172,123	(n):	2,117,939	

Benchmark Ratio Since Inception: (l+n) / (k+m): **0.540**

**Medicare Supplement Refund Calculation Form  
For Calendar Year 2010**

TYPE <b>Individual</b>	SMSBP(P) <b>Plan K</b>
For the State of <b>Arkansas</b>	
Company Name: <b>Bankers Life and Casualty Company</b>	
NAIC Group code: <b>0233</b>	NAIC Company Code: <b>61263</b>
Address: <b>600 West Chicago Ave, Chicago, IL 60654-2800</b>	
Person Completing This Exhibit <b>Christopher J Conforti</b>	
Title: <b>Actuary</b>	Telephone Number <b>(312) 396-7668</b>

	(a) Earned Premium	(b) Incurred Claims	
1 Current Year's Experience			
a Total (all policy years)	<u>0</u>	<u>0</u>	
b Current Year's Issues	<u>0</u>	<u>0</u>	
c Net (1a - 1b)	<u>0</u>	<u>0</u>	
2 Past Years' Experience (All Policy Years)	<u>3,557</u>	<u>2,085</u>	
3 Total Experience (1c + 2)	<u>3,557</u>	<u>2,085</u>	
4 Refunds Last Year (excluding interest)	<u>0</u>		
5 Previous Since Inception (excluding interest)	<u>0</u>		
6 Refunds Since Inception (excluding interest)	<u>0</u>		
7 Benchmark Ratio Since Inception (Ratio 1)	<u>0.553</u>		
8 Experienced Ratio Since Inception (Ratio2)	<u>0.586</u>		
(Line 3, Col. b)/Lin 3, Col. a - Line 6)			
9 Life Years Exposed Since Inception	<u>4</u>		If Experienced Ratio (Line 8) < Benchmark Ratio (Line 7) AND Life Years Exposed (Line 9) > 500, proceed, else STOP.
If (Line 8 < Line 7 AND Line 9 > 500, proceed; else Stop			
10 Tolerance Permitted (from credibility table)	<u><b>no credibility</b></u>		
11 Adjustment to Incurred Claims for Credibility	<u>                    </u>		If Ratio 3 (Line 11) is less than the Benchmark Ratio (Line 7), then proceed.
Ratio 3 = Ratio 2 + Tolerance			
12 Adjusted Incurred Claims	<u>                    </u>		
(Line 3, Col. a - Line 6) x Line 11			
13 REFUND	<u>                    </u>		If the amount on Line 13 is less than .005 times the annualized premium in-force as of December 31 of the reporting year, then no refund is made
Line 3, Col. a - Line 6 - (Line 12/Line 7)			
Deminimus Amount	<u>                    </u>		
<i>.005 x Annualized In-Force Premium as of December 31 of reporting year</i>			

Medicare Supplement Credibility Table	
Life Years Exposed Since Inception	Tolerance
10,000 +	0.0%
5,000 - 9,999	5.0%
2,500 - 4,999	7.5%
1,000 - 2,499	10.0%
500 - 999	15.0%
If less than 500, no credibility	

**Medicare Supplement Refund Calculation Form  
For Calendar Year 2010**

TYPE **Individual**                      SMSBP(P) **Plan K**  
 For the State of **Arkansas**  
 Company Name: **Bankers Life and Casualty Company**  
 NAIC Group code: **0233**                      NAIC Company Code: **61263**  
 Address: **600 West Chicago Ave, Chicago, IL 60654-2800**  
 Person Completing This Exhibit **Christopher J Conforti**  
 Title: **Actuary**                                      Telephone Number **(312) 396-7668**

(a)	(b)	(c)	(d)	(e)	(f)	(g)	(h)	(i)	(j)	(o)
Year	Earned Premium	Factor	(b) x (c)	Cumulative Loss Ratio	(d) x (e)	Factor	(b) x (g)	Cumulative Loss Ratio	(h) x (i)	Policy Year Loss Ratio
1	0	2.770	0	0.442	0	0	0	0.000	0	0.4
2	0	4.175	0	0.493	0	0	0	0.000	0	0.55
3	186	4.175	777	0.493	383	1.194	222	0.659	146	0.65
4	1,743	4.175	7,276	0.493	3,587	2.245	3,913	0.669	2,618	0.67
5	0	4.175	0	0.493	0	3.17	0	0.678	0	0.69
6	0	4.175	0	0.493	0	3.998	0	0.686	0	0.71
7	0	4.175	0	0.493	0	4.754	0	0.695	0	0.73
8	0	4.175	0	0.493	0	5.445	0	0.702	0	0.75
9	0	4.175	0	0.493	0	6.075	0	0.708	0	0.76
10	0	4.175	0	0.493	0	6.65	0	0.713	0	0.76
11	0	4.175	0	0.493	0	7.176	0	0.717	0	0.76
12	0	4.175	0	0.493	0	7.655	0	0.720	0	0.77
13	0	4.175	0	0.493	0	8.093	0	0.723	0	0.77
14	0	4.175	0	0.493	0	8.493	0	0.725	0	0.77
15+	0	4.175	0	0.493	0	8.684	0	0.725	0	0.77
		(k)	8,053	(l):	3,970	(m):	4,135	(n):	2,764	

Benchmark Ratio Since Inception: (l+n) / (k+m): **0.553**

**Medicare Supplement Refund Calculation Form  
For Calendar Year 2010**

TYPE <b>Individual</b>	SMSBP(P) <b>Plan L</b>
For the State of <b>Arkansas</b>	
Company Name: <b>Bankers Life and Casualty Company</b>	
NAIC Group code: <b>0233</b>	NAIC Company Code: <b>61263</b>
Address: <b>600 West Chicago Ave, Chicago, IL 60654-2800</b>	
Person Completing This Exhibit <b>Christopher J Conforti</b>	
Title: <b>Actuary</b>	Telephone Number <b>(312) 396-7668</b>

	(a) Earned Premium	(b) Incurred Claims	
1 Current Year's Experience			
a Total (all policy years)	<u>37,995</u>	<u>21,479</u>	
b Current Year's Issues	<u>22,734</u>	<u>14,007</u>	
c Net (1a - 1b)	<u>15,261</u>	<u>7,472</u>	
2 Past Years' Experience (All Policy Years)	<u>34,644</u>	<u>9,734</u>	
3 Total Experience (1c + 2)	<u>49,905</u>	<u>17,206</u>	
4 Refunds Last Year (excluding interest)	<u>0</u>		
5 Previous Since Inception (excluding interest)	<u>0</u>		
6 Refunds Since Inception (excluding interest)	<u>0</u>		
7 Benchmark Ratio Since Inception (Ratio 1)	<u>0.511</u>		
8 Experienced Ratio Since Inception (Ratio2)	<u>0.345</u>		
(Line 3, Col. b)/Lin 3, Col. a - Line 6)			
9 Life Years Exposed Since Inception	<u>38</u>		If Experienced Ratio (Line 8) < Benchmark Ratio (Line 7) AND Life Years Exposed (Line 9) > 500, proceed, else STOP.
If (Line 8 < Line 7 AND Line 9 > 500, proceed; else Stop			
10 Tolerance Permitted (from credibility table)	<u><b>no credibility</b></u>		
11 Adjustment to Incurred Claims for Credibility	<u>                    </u>		If Ratio 3 (Line 11) is less than the Benchmark Ratio (Line 7), then proceed.
Ratio 3 = Ratio 2 + Tolerance			
12 Adjusted Incurred Claims	<u>                    </u>		
(Line 3, Col. a - Line 6) x Line 11			
13 REFUND	<u>                    </u>		If the amount on Line 13 is less than .005 times the annualized premium in-force as of December 31 of the reporting year, then no refund is made
Line 3, Col. a - Line 6 - (Line 12/Line 7)			
Deminimus Amount	<u>                    </u>		
<i>.005 x Annualized In-Force Premium as of December 31 of reporting year</i>			

Medicare Supplement Credibility Table	
Life Years Exposed Since Inception	Tolerance
10,000 +	0.0%
5,000 - 9,999	5.0%
2,500 - 4,999	7.5%
1,000 - 2,499	10.0%
500 - 999	15.0%
If less than 500, no credibility	

**Medicare Supplement Refund Calculation Form  
For Calendar Year 2010**

TYPE <b>Individual</b>	SMSBP(P) <b>Plan L</b>
For the State of <b>Arkansas</b>	
Company Name: <b>Bankers Life and Casualty Company</b>	
NAIC Group code: <b>0233</b>	NAIC Company Code: <b>61263</b>
Address: <b>600 West Chicago Ave, Chicago, IL 60654-2800</b>	
Person Completing This Exhibit <b>Christopher J Conforti</b>	
Title: <b>Actuary</b>	Telephone Number <b>(312) 396-7668</b>

(a) Year	(b) Earned Premium	(c) Factor	(d) (b) x (c)	(e) Cumulative Loss Ratio	(f) (d) x (e)	(g) Factor	(h) (b) x (g)	(i) Cumulative Loss Ratio	(j) (h) x (i)	(o) Policy Year Loss Ratio
1	6,054	2.770	16,771	0.442	7,413	0	0	0.000	0	0.4
2	5,542	4.175	23,137	0.493	11,407	0	0	0.000	0	0.55
3	917	4.175	3,829	0.493	1,888	1.194	1,095	0.659	722	0.65
4	5,396	4.175	22,526	0.493	11,105	2.245	12,113	0.669	8,104	0.67
5	0	4.175	0	0.493	0	3.17	0	0.678	0	0.69
6	0	4.175	0	0.493	0	3.998	0	0.686	0	0.71
7	0	4.175	0	0.493	0	4.754	0	0.695	0	0.73
8	0	4.175	0	0.493	0	5.445	0	0.702	0	0.75
9	0	4.175	0	0.493	0	6.075	0	0.708	0	0.76
10	0	4.175	0	0.493	0	6.65	0	0.713	0	0.76
11	0	4.175	0	0.493	0	7.176	0	0.717	0	0.76
12	0	4.175	0	0.493	0	7.655	0	0.720	0	0.77
13	0	4.175	0	0.493	0	8.093	0	0.723	0	0.77
14	0	4.175	0	0.493	0	8.493	0	0.725	0	0.77
15+	0	4.175	0	0.493	0	8.684	0	0.725	0	0.77
		(k)	66,263	(l):	31,813	(m):	13,208	(n):	8,826	

Benchmark Ratio Since Inception: (l+n) / (k+m): **0.511**

**Medicare Supplement Refund Calculation Form  
For Calendar Year 2010**

TYPE <b>Individual</b>	SMSBP(P) <b>Pre-Std</b>
For the State of <b>Arkansas</b>	
Company Name: <b>Bankers Life and Casualty Company</b>	
NAIC Group code: <b>0233</b>	NAIC Company Code: <b>61263</b>
Address: <b>600 West Chicago Ave, Chicago, IL 60654-2800</b>	
Person Completing This Exhibit <b>Christopher J Conforti</b>	
Title: <b>Actuary</b>	Telephone Number <b>(312) 396-7668</b>

	(a) Earned Premium	(b) Incurred Claims	
1 Current Year's Experience			
a Total (all policy years)	<u>79,619</u>	<u>54,193</u>	
b Current Year's Issues	<u>0</u>	<u>0</u>	
c Net (1a - 1b)	<u>79,619</u>	<u>54,193</u>	
2 Past Years' Experience (All Policy Years)	<u>7,985,865</u>	<u>5,140,076</u>	
3 Total Experience (1c + 2)	<u>8,065,484</u>	<u>5,194,269</u>	
4 Refunds Last Year (excluding interest)	<u>0</u>		
5 Previous Since Inception (excluding interest)	<u>0</u>		
6 Refunds Since Inception (excluding interest)	<u>0</u>		
7 Benchmark Ratio Since Inception (Ratio 1)	<u>0.649</u>		
8 Experienced Ratio Since Inception (Ratio2)	<u>0.644</u>		
(Line 3, Col. b)/Lin 3, Col. a - Line 6)			
9 Life Years Exposed Since Inception	<u>4,396</u>		If Experienced Ratio (Line 8) < Benchmark Ratio (Line 7) AND Life Years Exposed (Line 9) > 500, proceed, else STOP.
If (Line 8 < Line 7 AND Line 9 > 500, proceed; else Stop			
10 Tolerance Permitted (from credibility table)	<u>7.5%</u>		
11 Adjustment to Incurred Claims for Credibility	<u>0.719</u>		<b>If Ratio 3 (Line 11) is less than the Benchmark Ratio (Line 7), then proceed.</b>
Ratio 3 = Ratio 2 + Tolerance			
12 Adjusted Incurred Claims	<u>                    </u>		
(Line 3, Col. a - Line 6) x Line 11			
13 REFUND	<u>                    </u>		
Line 3, Col. a - Line 6 - (Line 12/Line 7)			
Deminimus Amount	<u>                    </u>		If the amount on Line 13 is less than .005 times the annualized premium in-force as of December 31 of the reporting year, then no refund is made
.005 x Annualized In-Force Premium as of December 31 of reporting year			

Medicare Supplement Credibility Table	
Life Years Exposed Since Inception	Tolerance
10,000 +	0.0%
5,000 - 9,999	5.0%
2,500 - 4,999	7.5%
1,000 - 2,499	10.0%
500 - 999	15.0%
If less than 500, no credibility	

**Medicare Supplement Refund Calculation Form  
For Calendar Year 2010**

TYPE **Individual**                      SMSBP(P) **Pre-Std**  
 For the State of **Arkansas**  
 Company Name: **Bankers Life and Casualty Company**  
 NAIC Group code: **0233**                      NAIC Company Code: **61263**  
 Address: **600 West Chicago Ave, Chicago, IL 60654-2800**  
 Person Completing This Exhibit **Christopher J Conforti**  
 Title: **Actuary**                                      Telephone Number **(312) 396-7668**

(a) Year	(b) Earned Premium	(c) Factor	(d) (b) x (c)	(e) Cumulative Loss Ratio	(f) (d) x (e)	(g) Factor	(h) (b) x (g)	(i) Cumulative Loss Ratio	(j) (h) x (i)	(o) Policy Year Loss Ratio
1	0	2.770	0	0.442	0	0	0	0.000	0	0.4
2	0	4.175	0	0.493	0	0	0	0.000	0	0.55
3	0	4.175	0	0.493	0	1.194	0	0.659	0	0.65
4	0	4.175	0	0.493	0	2.245	0	0.669	0	0.67
5	0	4.175	0	0.493	0	3.17	0	0.678	0	0.69
6	0	4.175	0	0.493	0	3.998	0	0.686	0	0.71
7	0	4.175	0	0.493	0	4.754	0	0.695	0	0.73
8	0	4.175	0	0.493	0	5.445	0	0.702	0	0.75
9	0	4.175	0	0.493	0	6.075	0	0.708	0	0.76
10	0	4.175	0	0.493	0	6.65	0	0.713	0	0.76
11	0	4.175	0	0.493	0	7.176	0	0.717	0	0.76
12	0	4.175	0	0.493	0	7.655	0	0.720	0	0.77
13	0	4.175	0	0.493	0	8.093	0	0.723	0	0.77
14	643,082	4.175	2,684,868	0.493	1,323,640	8.493	5,461,696	0.725	3,959,730	0.77
15+	0	4.175	0	0.493	0	8.684	0	0.725	0	0.77
		(k)	2,684,868	(l):	1,323,640	(m):	5,461,696	(n):	3,959,730	

Benchmark Ratio Since Inception: (l+n) / (k+m): **0.649**

**Medicare Supplement Refund Calculation Form  
For Calendar Year 2010**

TYPE <b>Individual Select</b>	SMSBP(P)	Plan <b>D</b>
For the State of <b>Arkansas</b>		
Company Name: <b>Bankers Life and Casualty Company</b>		
NAIC Group code: <b>0233</b>	NAIC Company Code: <b>61263</b>	
Address: <b>600 West Chicago Ave, Chicago, IL 60654-2800</b>		
Person Completing This Exhibit	<b>Christopher J Conforti</b>	
Title: <b>Actuary</b>	Telephone Number <b>(312) 396-7668</b>	

	(a) Earned Premium	(b) Incurred Claims	
1 Current Year's Experience			
a Total (all policy years)	<u>0</u>	<u>0</u>	
b Current Year's Issues	<u>0</u>	<u>0</u>	
c Net (1a - 1b)	<u>0</u>	<u>0</u>	
2 Past Years' Experience (All Policy Years)	<u>1,140</u>	<u>2,774</u>	
3 Total Experience (1c + 2)	<u>1,140</u>	<u>2,774</u>	
4 Refunds Last Year (excluding interest)	<u>0</u>		
5 Previous Since Inception (excluding interest)	<u>0</u>		
6 Refunds Since Inception (excluding interest)	<u>0</u>		
7 Benchmark Ratio Since Inception (Ratio 1)	<u>0.633</u>		
8 Experienced Ratio Since Inception (Ratio2)	<u>2.435</u>		
(Line 3, Col. b)/Lin 3, Col. a - Line 6)			
9 Life Years Exposed Since Inception	<u>1</u>		If Experienced Ratio (Line 8) < Benchmark Ratio (Line 7) AND Life Years Exposed (Line 9) > 500, proceed, else STOP.
If (Line 8 < Line 7 AND Line 9 > 500, proceed; else Stop			
10 Tolerance Permitted (from credibility table)	<u><b>no credibility</b></u>		
11 Adjustment to Incurred Claims for Credibility	<u>                    </u>		If Ratio 3 (Line 11) is less than the Benchmark Ratio (Line 7), then proceed.
Ratio 3 = Ratio 2 + Tolerance			
12 Adjusted Incurred Claims	<u>                    </u>		
(Line 3, Col. a - Line 6) x Line 11			
13 REFUND	<u>                    </u>		If the amount on Line 13 is less than .005 times the annualized premium in-force as of December 31 of the reporting year, then no refund is made
Line 3, Col. a - Line 6 - (Line 12/Line 7)			
Deminimus Amount	<u>                    </u>		
<i>.005 x Annualized In-Force Premium as of December 31 of reporting year</i>			

Medicare Supplement Credibility Table	
Life Years Exposed Since Inception	Tolerance
10,000 +	0.0%
5,000 - 9,999	5.0%
2,500 - 4,999	7.5%
1,000 - 2,499	10.0%
500 - 999	15.0%
If less than 500, no credibility	

**Medicare Supplement Refund Calculation Form  
For Calendar Year 2010**

TYPE **Individual Select**      SMSBP(P) **Plan D**  
 For the State of **Arkansas**  
 Company Name: **Bankers Life and Casualty Company**  
 NAIC Group code: **0233**      NAIC Company Code: **61263**  
 Address: **600 West Chicago Ave, Chicago, IL 60654-2800**  
 Person Completing This Exhibit **Christopher J Conforti**  
 Title: **Actuary**      Telephone Number **(312) 396-7668**

(a) Year	(b) Earned Premium	(c) Factor	(d) (b) x (c)	(e) Cumulative Loss Ratio	(f) (d) x (e)	(g) Factor	(h) (b) x (g)	(i) Cumulative Loss Ratio	(j) (h) x (i)	(o) Policy Year Loss Ratio
1	0	2.770	0	0.442	0	0	0	0.000	0	0.4
2	0	4.175	0	0.493	0	0	0	0.000	0	0.55
3	0	4.175	0	0.493	0	1.194	0	0.659	0	0.65
4	0	4.175	0	0.493	0	2.245	0	0.669	0	0.67
5	0	4.175	0	0.493	0	3.17	0	0.678	0	0.69
6	0	4.175	0	0.493	0	3.998	0	0.686	0	0.71
7	0	4.175	0	0.493	0	4.754	0	0.695	0	0.73
8	0	4.175	0	0.493	0	5.445	0	0.702	0	0.75
9	0	4.175	0	0.493	0	6.075	0	0.708	0	0.76
10	0	4.175	0	0.493	0	6.65	0	0.713	0	0.76
11	35	4.175	147	0.493	72	7.176	253	0.717	181	0.76
12	0	4.175	0	0.493	0	7.655	0	0.720	0	0.77
13	0	4.175	0	0.493	0	8.093	0	0.723	0	0.77
14	0	4.175	0	0.493	0	8.493	0	0.725	0	0.77
15+	0	4.175	0	0.493	0	8.684	0	0.725	0	0.77
15+	0	4.175	0	0.493	0	8.493	0	0.725	0	0.77
		(k)	147	(l):	72	(m):	253	(n):	181	

Benchmark Ratio Since Inception:  $(l+n) / (k+m)$ : **0.633**

**Medicare Supplement Refund Calculation Form  
For Calendar Year 2010**

TYPE <b>Individual Select</b>	SMSBP(P)	Plan <b>F</b>
For the State of <b>Arkansas</b>		
Company Name: <b>Bankers Life and Casualty Company</b>		
NAIC Group code: <b>0233</b>	NAIC Company Code: <b>61263</b>	
Address: <b>600 West Chicago Ave, Chicago, IL 60654-2800</b>		
Person Completing This Exhibit	<b>Christopher J Conforti</b>	
Title: <b>Actuary</b>	Telephone Number <b>(312) 396-7668</b>	

	(a) Earned Premium	(b) Incurred Claims	
1 Current Year's Experience			
a Total (all policy years)	<u>142</u>	<u>0</u>	
b Current Year's Issues	<u>0</u>	<u>0</u>	
c Net (1a - 1b)	<u>142</u>	<u>0</u>	
2 Past Years' Experience (All Policy Years)	<u>24,792</u>	<u>8,094</u>	
3 Total Experience (1c + 2)	<u>24,934</u>	<u>8,094</u>	
4 Refunds Last Year (excluding interest)	<u>0</u>		
5 Previous Since Inception (excluding interest)	<u>0</u>		
6 Refunds Since Inception (excluding interest)	<u>0</u>		
7 Benchmark Ratio Since Inception (Ratio 1)	<u>0.631</u>		
8 Experienced Ratio Since Inception (Ratio2)	<u>0.325</u>		
(Line 3, Col. b)/Lin 3, Col. a - Line 6)			
9 Life Years Exposed Since Inception	<u>13</u>		If Experienced Ratio (Line 8) < Benchmark Ratio (Line 7) AND Life Years Exposed (Line 9) > 500, proceed, else STOP.
If (Line 8 < Line 7 AND Line 9 > 500, proceed; else Stop			
10 Tolerance Permitted (from credibility table)	<u><b>no credibility</b></u>		
11 Adjustment to Incurred Claims for Credibility	<u>                    </u>		If Ratio 3 (Line 11) is less than the Benchmark Ratio (Line 7), then proceed.
Ratio 3 = Ratio 2 + Tolerance			
12 Adjusted Incurred Claims	<u>                    </u>		
(Line 3, Col. a - Line 6) x Line 11			
13 REFUND	<u>                    </u>		If the amount on Line 13 is less than .005 times the annualized premium in-force as of December 31 of the reporting year, then no refund is made
Line 3, Col. a - Line 6 - (Line 12/Line 7)			
Deminimus Amount	<u>                    </u>		
<i>.005 x Annualized In-Force Premium as of December 31 of reporting year</i>			

Medicare Supplement Credibility Table	
Life Years Exposed Since Inception	Tolerance
10,000 +	0.0%
5,000 - 9,999	5.0%
2,500 - 4,999	7.5%
1,000 - 2,499	10.0%
500 - 999	15.0%
If less than 500, no credibility	

**Medicare Supplement Refund Calculation Form  
For Calendar Year 2010**

TYPE **Individual Select** SMSBP(P) **Plan F**  
 For the State of **Arkansas**  
 Company Name: **Bankers Life and Casualty Company**  
 NAIC Group code: **0233** NAIC Company Code: **61263**  
 Address: **600 West Chicago Ave, Chicago, IL 60654-2800**  
 Person Completing This Exhibit **Christopher J Conforti**  
 Title: **Actuary** Telephone Number **(312) 396-7668**

(a) Year	(b) Earned Premium	(c) Factor	(d) (b) x (c)	(e) Cumulative Loss Ratio	(f) (d) x (e)	(g) Factor	(h) (b) x (g)	(i) Cumulative Loss Ratio	(j) (h) x (i)	(o) Policy Year Loss Ratio
1	0	2.770	0	0.442	0	0	0	0.000	0	0.4
2	0	4.175	0	0.493	0	0	0	0.000	0	0.55
3	0	4.175	0	0.493	0	1.194	0	0.659	0	0.65
4	0	4.175	0	0.493	0	2.245	0	0.669	0	0.67
5	0	4.175	0	0.493	0	3.17	0	0.678	0	0.69
6	0	4.175	0	0.493	0	3.998	0	0.686	0	0.71
7	0	4.175	0	0.493	0	4.754	0	0.695	0	0.73
8	0	4.175	0	0.493	0	5.445	0	0.702	0	0.75
9	0	4.175	0	0.493	0	6.075	0	0.708	0	0.76
10	870	4.175	3,633	0.493	1,791	6.65	5,786	0.713	4,125	0.76
11	849	4.175	3,545	0.493	1,748	7.176	6,093	0.717	4,369	0.76
12	0	4.175	0	0.493	0	7.655	0	0.720	0	0.77
13	0	4.175	0	0.493	0	8.093	0	0.723	0	0.77
14	0	4.175	0	0.493	0	8.493	0	0.725	0	0.77
15+	0	4.175	0	0.493	0	8.684	0	0.725	0	0.77
15+	0	4.175	0	0.493	0	8.493	0	0.725	0	0.77
		(k)	7,178	(l):	3,539	(m):	11,879	(n):	8,494	

Benchmark Ratio Since Inception: (l+n) / (k+m): **0.631**