Filing at a Glance

Company: Ameritas Life Insurance Corp.

Product Name: AR - Individual rates	SERFF Tr Num: AMFA-128403838	State: Arkansas
TOI: H10I Individual Health - Dental	SERFF Status: Closed-Approved-Closed	State Tr Num:
Sub-TOI: H10I.000 Health - Dental	Co Tr Num: AR - INDIVIDUAL RATES	State Status: Approved-Closed
Filing Type: Rate		Reviewer(s): Rosalind Minor
	Authors: Janis Landon, Mary Chmelka, Brandon Ballagh	Disposition Date: 06/20/2012
	Date Submitted: 06/18/2012	Disposition Status: Approved-Closed
Implementation Date Requested: On Approval		Implementation Date:
State Filing Description:		

General Information

Project Name: AR - Individual rates
Project Number: AR - Individual rates
Requested Filing Mode: Review & Approval
Explanation for Combination/Other:
Submission Type: New Submission
Overall Rate Impact:

Deemer Date:
Submitted By: Janis Landon
Filing Description:
Re: Ameritas Life Insurance Corp.
NAIC # 943-61301
FEIN # 47-0098400
Individual Rates

Status of Filing in Domicile: Authorized
Date Approved in Domicile:
Domicile Status Comments:
Market Type: Individual
Individual Market Type:
Filing Status Changed: 06/20/2012
State Status Changed: 06/20/2012
Created By: Mary Chmelka
Corresponding Filing Tracking Number:

Enclosed for your review are the individual dental and vision rates to be used with policy 9000 AR Rev. 03-12, recently approved under SERFF # AMFA-128211206.

They will replace the rates filed and approved under state tracking number 49021.

Nothing in this filing includes any provisions contrary to standard industry practice.

Thank you for your consideration of this filing. If you have any questions or comments, please feel free to contact me at 800-745-1112, Ext. 82444, FAX 402-309-2573 or eMail jlandon@ameritas.com.

Sincerely,
Janis Landon, ACS, FLMI
Senior Contract Analyst
State Narrative:

Company and Contact

Filing Contact Information

Janis Landon, Senior Contract Analyst	jlandon@ameritas.com
475 Fallbrook Blvd.	800-745-1112 [Phone] 82444 [Ext]
Lincoln, NE 68521	402-309-2573 [FAX]

Filing Company Information

Ameritas Life Insurance Corp.	CoCode: 61301	State of Domicile: Nebraska
5900 O Street	Group Code: 943	Company Type:
P O Box 81889	Group Name:	State ID Number:
Lincoln, NE 68501-1889	FEIN Number: 47-0098400	
(800) 756-1112 ext. [Phone]		

Filing Fees

Fee Required?	Yes
Fee Amount:	$50.00
Retaliatory?	No
Fee Explanation:	1 Rate filing = $50.00
Per Company:	No

COMPANY	AMOUNT	DATE PROCESSED	TRANSACTION #
Ameritas Life Insurance Corp.	$50.00	06/18/2012	60212130

Correspondence Summary

Dispositions

Status	Created By	Created On	Date Submitted
Approved-Closed	Rosalind Minor	06/20/2012	06/20/2012

Disposition

Disposition Date: 06/20/2012
Implementation Date:
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):**
Ameritas Life Insurance Corp.	8.000%	8.000%	$652	20	$8,144	8.000%	8.000%

SERFF Tracking Number:	*AMFA-128403838*	*State:*	*Arkansas*
Filing Company:	*Ameritas Life Insurance Corp.*	*State Tracking Number:*	
Company Tracking Number:	*AR - INDIVIDUAL RATES*		
TOI:	*H10I Individual Health - Dental*	*Sub-TOI:*	*H10I.000 Health - Dental*
Product Name:	*AR - Individual rates*		
Project Name/Number:	*AR - Individual rates/AR - Individual rates*		

Schedule	Schedule Item	Schedule Item Status	Public Access
Supporting Document	Health - Actuarial Justification	Approved-Closed	No
Rate	Rate Manual	Approved-Closed	Yes

Rate Information

Rate data applies to filing.

Filing Method:	SERFF
Rate Change Type:	Increase
Overall Percentage of Last Rate Revision:	0.000%
Effective Date of Last Rate Revision:	07/08/2011
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):
Ameritas Life Insurance Corp.	8.000%	8.000%	$652	20	$8,144	8.000%	8.000%

Rate/Rule Schedule

Schedule Item Status:	Document Name:	Affected Form Numbers: (Separated with commas)	Rate Action:*	Rate Action Information:		Attachments
Approved-Closed 06/20/2012	Rate Manual	Indiv. 9000 AR Rev. 03-12	Revised	Previous State Filing Number:	AMFA-127200927	Individiual manual - generic 2-2012.pdf
				Percent Rate Change Request:	8.000	

Ameritas Individual Rate Manual

Regular Products

	Option 1		Option 2		Option 3		Option 4	
Maximum	$1000 max + dental rewards		$1000 max + dental rewards		$1000 max + dental rewards		$1000 max + dental rewards	
Coinsurance	100/80/50		100/80/50		100/80/50		100/80/50	
Deductible	50 waived for preventive		50 waived for preventive		50 not waived for preventive		50 not waived for preventive	
Waiting period (preventive-basic-major)	0-6-12		0-6-12		0-6-12		0-6-12	
Frequencies	Traditional		Traditional		Traditional		Traditional	
	E/P basic		**E/P major**		**E/P basic**		**E/P major**	
Rating Area	**Adult**	**Children**	**Adult**	**Children**	**Adult**	**Children**	**Adult**	**Children**
1	38.89	48.32	37.58	47.82	34.32	39.23	32.89	38.70
2	41.82	52.27	40.44	51.73	37.08	42.84	35.57	42.27
3	45.05	57.18	43.58	56.60	40.10	47.18	38.49	46.57
4	48.21	61.49	46.66	60.88	42.92	50.78	41.23	50.15
5	51.94	67.22	50.32	66.59	46.54	56.10	44.76	55.43
6	55.67	72.20	53.97	71.53	49.99	60.55	48.12	59.85
7	60.06	78.39	58.29	77.68	54.33	66.62	52.37	65.87
8	64.48	83.72	62.63	82.99	58.42	71.43	56.37	70.64
9	68.29	90.04	66.42	89.30	62.26	77.62	60.18	76.82
10	72.21	94.68	70.19	93.89	65.53	81.11	63.30	80.27
11	76.35	101.77	74.36	100.99	69.67	88.12	67.47	87.28
12	85.59	113.78	83.42	112.93	78.19	98.59	75.80	97.71

Coinsurance options (See Policy Form Indiv. 9000 AL Rev. 05-11 section 200)

Passive PPO options								
100/80/50	1.00	1.00	1.00	1.00	1.00	1.00	1.00	1.00
100/25/25	0.76	0.81	0.79	0.82	0.72	0.76	0.74	0.77
100/50/0	0.77	0.87	0.73	0.87	0.72	0.84	0.69	0.84
100/50/25	0.76	0.81	0.76	0.81	0.74	0.78	0.74	0.78
100/50/50	0.88	0.86	0.91	0.87	0.86	0.83	0.90	0.84
100/70/40	0.93	0.96	0.93	0.96	0.92	0.94	0.92	0.94
50/50/0	0.41	0.42	0.34	0.41	0.41	0.43	0.34	0.42
50/50/50	0.59	0.43	0.62	0.43	0.62	0.44	0.65	0.45
75/50/25	0.64	0.62	0.63	0.62	0.63	0.61	0.63	0.61
80/50/0	0.63	0.69	0.58	0.68	0.60	0.67	0.55	0.67
80/50/50	0.76	0.67	0.79	0.67	0.76	0.66	0.80	0.66
80/80/50	0.91	0.84	0.90	0.84	0.93	0.86	0.92	0.86
Incentive Coinsurance Options								
100/60-70-80/50 incentive	0.96	0.95	0.97	0.95	0.95	0.94	0.96	0.94
100/35-50-65/10-25-50 incentive	0.76	0.81	0.76	0.81	0.74	0.78	0.74	0.78
100/60-70-80/30-40-50 incentive	0.88	0.90	0.88	0.90	0.87	0.89	0.87	0.89
Progressive Coinsurance Options								
70-80-90/50-60-70/25-25-50 progressive	0.78	0.73	0.77	0.73	0.79	0.74	0.78	0.73
70-80-90/50-70-80/30-30-50 progressive	0.80	0.75	0.79	0.75	0.81	0.76	0.80	0.75
85-90-100/60-70-80/25-25-50 progressive	0.84	0.83	0.82	0.83	0.84	0.83	0.82	0.83
85-90-100/65-75-80/40-40-50 progressive	0.89	0.88	0.87	0.88	0.89	0.88	0.87	0.88
Two-Tier PPO Options								
50/50/50 In network -25/25/25 Out*	0.44	0.31	0.46	0.31	0.45	0.31	0.47	0.31
100/50/0 In network - 80/40/0 Out	0.59	0.68	0.56	0.68	0.55	0.63	0.50	0.63
100/50/25 In network - 50/25/10 Out*	0.65	0.67	0.65	0.67	0.57	0.58	0.58	0.59
100/80/50 In network - 80/60/40 Out	0.80	0.76	0.80	0.76	0.79	0.75	0.79	0.75

** These options are not available in Montana.*

Annual Max (See Policy Form Indiv. 9000 AL Rev. 05-11 section 200 and 210)

	Traditional	ased Maximum Benefit
$2,000	1.16	1.18
$1,500	1.11	1.13
$1,250	1.05	1.07
$1,000	0.98	1.00
$750	0.91	0.93
$500	0.72	0.76

Deductible (See Policy Form Indiv. 9000 AL Rev. 05-11 section 200)

	Waived for Preventive		Not Waived for Preventive	
	Adult	Child	Adult	Child
$50	1.00	1.00	1.00	1.00
$25 preventive and basic - $100 lifetime for Major	1.02	1.02	1.06	1.06
$5 copay in network - $50 Out of network*	1.01	1.01	1.04	1.04

** This deductible option is not available in Montana.*

Waiting Periods			(See Policy Form Indiv. 9000 AL Rev. 05-11 section 600)
(preventive - basic - major)	Adult	Children	
3-6-12	0.985	0.970	
3-6-18	0.935	0.920	
0-3-6	1.020	1.020	
0-6-12	1.000	1.000	
0-6-18	0.950	0.950	
0-0-12	1.060	1.035	
0-0-18	1.020	1.010	

Frequencies	Adult	Children	(See Policy Form Indiv. 9000 AL Rev. 05-11 section 700)
Traditional frequencies	1.000	1.000	
Essential Dental (2 exams/ 2 prophys)	0.950	0.900	
Essential Dental (1 exam/ 1 prophy)	0.780	0.720	

Out of network allowance	Adult	Children	(See Policy Form Indiv. 9000 AL Rev. 05-11 section 600)
90th	1.02	1.02	
80th	1.00	1.00	
50th	0.94	0.94	
MAC	0.81	0.81	

Other Factors (See Policy Form Indiv. 9000 AL Rev. 05-11 section 300)

Plan level age factors		Adult	Children
Option 1	No age banding or limits	1.00	1.00
Option 2*	Plan only available up to 64	0.98	1.00
Option 3*	Age Banding		
	Under 55	0.95	1.00
	55 and older	1.25	1.00

Takeover*	Adult	Children	(See Policy Form Indiv. 9000 AL Rev. 05-11 section 100)
Takeover option available	1.05	1.05	
Not available	1.00	1.00	

* These features are not availavle in the a state of Washington.

Additional Coverages

Ortho (12 month waiting period applies) - (See Policy Form Indiv. 9000 AL Rev. 05-11 section 200 and 800)

coinsurance and maxir	Adult	Children
50% - $500	not available	$7.00
50% - $1000	not available	$16.00
50% - $600 (with $200 annual max)	$1.00	$6.50

EyeCare options - (See Policy Form Indiv. 9000 AL Rev. 05-11 section 200, 900 and 910)

Fusion Simple Premium Rates	Dental Max $0 to $1000		Dental Max $1250 to $2000	
	Adult	Children	Adult	Children
Plan 1 or 2	$0.56	$0.46	$0.84	$0.70
Plan 3 or 4	$1.11	$0.93	$1.53	$1.30

Exam Only	Adult	Children
If sold with	$1.25	$1.00

Flat Maximum (plan pays up to max)

	Adult	Children
$100 Flat annual max	$11.37	$14.79
$100 year 1, $150 year 2, $150 thereafter	$16.07	$17.89

LASIK (See Policy Form Indiv. 9000 AL Rev. 05-11 - rider 920 Ed. 05-11)

	Adult	Children
LASIK - $125 years 1 and 2, $250 thereafter	$2.72	$1.44
(Benefit is per eye)		

Hearing Care options - (See Policy Form Indiv. 9000 AL Rev. 05-11 - rider 930 Ed. 05-11)*

	Adult	Children
$75 exam allowance	$1.50	$0.50

* Hearing is not availavle in the a state of Washington.

Definitions

Coinsurance

Passive Coinsurance levels are the same in and out of network
Incentive Coinsurance levels increase each year if certain criteria are met
Progressive Coinsurance levels increase each year with no criteria.
Two-tier Coinsurance levels are different in and out of network

Annual Maximum

Increased Maximum Benefit Annual maximum will increase each year if certain criteria are met.

Frequencies

Essential dental An option where frequencies for certain benefits are reduced.

	Traditional	Essential Dental
Full mouth x-ray	36 months	60 months
Bitewings	2 per benefit period	1 per benefit period
Crown/bridge/denture replacement	60 months	96 months
Exams and Prophys	2 per benefit period	1 or 2 per benefit period
Sealants	36 months	not covered
Flouride	up to age 19	up to age 14

Frequencies

MAC Benefits out of network are paid no more than a scheudle. The scheudle is set equal to the most common negotiated general

Takeover

Takeover Individuals under plans with the takeover option will have waiting periods waived if they were covered by a dental insurance policy within 30 days of applying for their policy. Ortho waiting period

Fusion Simple

Fusion simple This is benefit adds coverage for eyecare services such that the dental and eyecare benefit share annual maximums.

Plan's 1 and 3 have no deductibles or schedules of benefits, however they each have an annual maximum ($100 and $150 respectively). Eyecare services utilized will reduce the dental

Plan's 2 and 4 are subject to a maximum schedule of benefits. Eyecare services utilized will reduce the dental annual maximum up to the Eyecare schedule.

Ameritas Individual Rate Manual

Edge Products

Plan description

	Individual Dental - A			Individual Dental - B		
Dental	**Year 1**	**Year 2**	**Year 3**	**Year 1**	**Year 2**	**Year 3**
Coinsurance	80/0/0	80/60/25	80/60/50	80/0/0	80/60/0	80/60/0
Deductible	$50 Prev and Basic - $100 major			$40	$40	$40
Maximum	$1,000	$1,000	$1,000	$750	$750	$750
Ortho						
Coinsurance			50%	not covered		
Deductible			100 lifetime			
Maximum			1,000			
Monthly Rates						
	Individual Dental - A			**Individual Dental - B**		
Area	Individual	Individual + 1	Individual + 2+	Individual	Individual + 1	Individual + 2+
1	$28.40	$54.60	$98.90	$21.90	$41.90	$76.90
2	$31.30	$59.90	$108.80	$24.20	$46.20	$84.70
3	$33.30	$63.80	$115.70	$25.70	$49.10	$90.10
4	$34.90	$67.10	$121.70	$26.90	$51.70	$94.70
5	$36.90	$70.90	$128.60	$28.60	$54.60	$100.10
6	$40.60	$77.90	$141.40	$31.30	$59.90	$109.90
7	$44.30	$85.10	$154.20	$34.20	$65.50	$119.90
8	$47.90	$92.40	$167.10	$36.90	$70.90	$130.10

	Individual Dental - A old	Individual Dental - B old
Dental	**All years**	**All years**
Coinsurance	80/70/50	80/70/0
Deductible	$50 (not waived for Preventive)	$35 (not waived for Preventive)
Maximum	$1,000	$750
waiting period	0-6-12 (months)	0-6 (months)
Ortho		
Coinsurance	50%	not covered
Deductible	$100 lifetime	
Maximum	$1,000 - 24 month wait	

	Individual Dental - A old			Individual Dental - B old		
Monthly Rates						
Area	Individual	Individual + 1	Individual + 2+	Individual	Individual + 1	Individual + 2+
1	$24.50	$47.70	$72.90	$14.50	$27.70	$42.90
2	$27.00	$52.50	$80.20	$16.00	$30.50	$47.20
3	$28.70	$55.80	$85.30	$17.00	$32.40	$50.20
4	$30.10	$58.70	$89.70	$17.80	$34.10	$52.80
5	$31.90	$62.00	$94.80	$18.90	$36.00	$55.80
6	$35.00	$68.20	$104.20	$20.70	$39.60	$61.30
7	$38.20	$74.40	$113.70	$22.60	$43.20	$66.90
8	$41.40	$80.80	$123.20	$24.50	$46.80	$72.50

Ameritas Individual rate manual

Schedule Plans

Schedule options (See Policy Form Indiv. 9000 AL Rev. 05-11 section 200, 600 and 700)

Schedule plan rates do not vary by zip code. Trend does not apply to schedule plans.

Schedule	Dental Annual Maximum	Includes Vision and Hearing benefits?	Waiting Period in months - (preventive-basic-major)	Frequencies	Adult Gross Rate	Children Gross Rate
A	$2,500	No	0-0-6	A	40.94	53.11
B	$1,500	No	0-0-6	A	30.94	39.76
C	$1,000	No	0-0-6	A	21.22	26.42
D	$1,000	No	0-0-6	A	11.22	17.61
E	$1,000	Yes	0-0-6	A	27.61	35.90
F	n/a	Yes	n/a	A	19.48	25.32
G	n/a	Yes	n/a	A	8.86	11.51
H	$2,000	No	0-0-6	B	37.75	35.00
I	$1,500	No	0-0-6	B	32.75	30.00
J	$1,000	No	0-0-6	B	24.75	22.25
K	$2,000	No	0-0-6	B	35.00	32.25
L	$1,500	No	0-0-6	B	30.00	27.50
M	$1,000	No	0-0-6	B	22.00	19.75

Schedules can be increased or decreased by a maximum of +/-10%. The rate to modify a schedule are equivalent to the level of change. To increase a schedule, multiple the base rate times the 1 plus the desired change in the schedule.

Frequencies options

A	1 exam, 1 prophy, 1 xray per benefit period
B	2 exam, 1 prophy, 1 xray per benefit period change to 2 prophys

Schedule values for 35 most common procedures

		Schedule ID												
Procedure Code	Description	A	B	C	D	E	F	G	H	I	J	K	L	M
D0120	PERIODIC ORAL EVALUATION-ESTABLISHED PATIENT	30	23	18	12	12	25	25	30	25	20	25	20	20
D0140	LIMITED ORAL EVALUATION - PROBLEM FOCUSED	39	30	18	12	12	25	25	30	25	20	25	20	20
D0150	COMPREHENSIVE ORAL EVALUATION-NEW OR ESTA	46	36	27	19	19	25	25	30	25	20	25	20	20
D0210	INTRAORAL - COMPLETE SERIES (INCLUDING BITEW	78	60	36	24	24	25	0	30	25	20	25	20	10
D0220	INTRAORAL - PERIAPICAL FIRST FILM	14	11	7	4	4	0	0	15	12	10	15	15	10
D0230	INTRAORAL - PERIAPICAL EACH ADDITIONAL FILM	11	9	5	3	3	0	0	15	12	10	15	15	10
D0272	BITEWINGS - TWO FILMS	27	21	16	11	11	25	0	30	25	20	25	20	10
D0274	BITEWINGS - FOUR FILMS	42	33	25	18	18	25	0	30	25	20	25	20	10
D0330	PANORAMIC FILM	63	48	29	19	19	25	0	30	25	20	25	20	10
D1110	PROPHYLAXIS - ADULT	63	49	38	27	27	25	0	50	40	25	50	40	25
D1120	PROPHYLAXIS - CHILD	45	35	26	19	19	25	0	50	40	25	50	40	25
D2140	AMALGAM - ONE SURFACE - PRIMARY OR PERMANI	66	51	30	20	20	0	0	50	40	30	45	40	20
D2150	AMALGAM - TWO SURFACES - PRIMARY OR PERMA	84	65	38	26	26	0	0	65	60	30	65	50	30
D2160	AMALGAM - THREE SURFACES - PRIMARY OR PERM	101	78	46	31	31	0	0	65	60	30	65	50	30
D2330	RESIN-BASED COMPOSITE - ONE SURFACE, ANTERIC	80	62	37	25	25	0	0	50	40	30	45	40	20
D2331	RESIN-BASED COMPOSITE - TWO SURFACES, ANTER	101	78	46	31	31	0	0	65	60	30	65	50	30
D2332	RESIN-BASED COMPOSITE - THREE SURFACES, ANTE	127	98	58	39	39	0	0	65	60	30	65	50	30
D2335	RESIN-BASED COMP- 4+ SURFACES OR INCISAL, ANT	140	108	64	43	43	0	0	65	60	30	65	50	30
D2391	RESIN-BASED COMPOSITE - ONE SURFACE, POSTERI	88	68	40	27	27	0	0	50	40	30	45	40	20
D2392	RESIN-BASED COMPOSITE - TWO SURFACES, POSTEI	111	86	51	34	34	0	0	65	60	30	65	50	30
D2393	RESIN-BASED COMPOSITE - THREE SURFACES, POST	140	108	64	43	43	0	0	65	60	30	65	50	30
D2394	RESIN-BASED COMPOSITE-FOUR OR MORE SURF, PC	154	119	70	48	48	0	0	65	60	30	65	50	30
D2740	CROWN - PORCELAIN/CERAMIC SUBSTRATE	395	293	268	0	0	0	0	450	400	300	420	375	240
D2750	CROWN - PORCELAIN WITH GOLD	384	285	260	0	0	0	0	450	400	300	420	375	240
D2751	CROWN - PORCELAIN WITH NONPRECIOUS METAL	329	244	223	0	0	0	0	450	400	300	420	375	240
D2752	CROWN - PORCELAIN WITH SEMIPRECIOUS METAL	353	262	239	0	0	0	0	450	400	300	420	375	240
D2920	RECEMENT CROWN	52	40	24	16	16	0	0	50	50	40	45	50	40
D2950	CORE BUILD-UP, INCLUDING ANY PINS	79	59	54	0	0	0	0	50	50	40	45	50	40
D2954	PREFABRICATED POST AND CORE IN ADDITION TO C	105	78	71	0	0	0	0	50	50	40	45	50	40
D3330	ROOT CANAL, MOLAR, EXCLUDING FINAL RESTORAT	354	263	240	0	0	0	0	240	225	175	240	225	175
D4341	PERIODONTAL SCALING AND ROOT PLANING-4 OR M	77	57	52	0	0	0	0	50	50	40	50	50	40
D4381	DELIVERY OF ANTIMICROBIAL AGENTS INTO TISSUE	56	42	38	0	0	0	0	30	30	30	30	30	30
D4910	PERIODONTAL MAINTENANCE	84	65	38	26	26	25	0	30	25	20	25	20	20
D7140	EXTRACTION, ERUPTED TOOTH OR EXPOSED ROOT	74	57	34	23	23	0	0	50	45	35	45	40	25
D7210	SURGICAL REMOVAL OF ERUPTED TOOTH REQUIRIN	142	110	65	44	44	0	0	50	45	35	45	40	25
	Additional benefits													
	Vision Exam Only	A	A	A	A	I	N	N	A	A	A	A	A	A
	Hearing Exam Only	A	A	A	A	I	I	I	A	A	A	A	A	A
	Vision flat max	A	A	A	A	N	I	I	A	A	A	A	A	A
	LASIK	A	A	A	A	A	A	A	A	A	A	A	A	A
	Fusion Simple	A	A	A	A	N	N	N	A	A	A	A	A	A
	Ortho	A	A	A	A	A	A	A	A	A	A	A	A	A

A = Available
I = Included
N= Not Available

Ameritas Individual rate manual

Trend Factor

Effective Date	Quarterly	Semi Annual	Annual
July to September 2012	1.200	1.220	1.200
October to December 2012	1.220	1.220	1.200
January to March 2013	1.240	1.260	1.280
April to June 2013	1.260	1.260	1.280
July to September 2013	1.280	1.300	1.280

In Pennsylvania, use 1.040 for all effective dates and only the Annual factor is available.

Trend does NOT apply to schedule plans

Ameritas Individual rate manual

Rating Areas (Not used for Schedule plans)

		Area Assignment				Area Assignment				Area Assignment	
Zip Code	State	Regular	Edge	Zip Code	State	Regular	Edge	Zip Code	State	Regular	Edge
10	MA	6	5	57	VT	4	2	114	NY	11	7
11	MA	6	5	58	VT	4	2	115	NY	10	7
12	MA	6	5	59	VT	4	2	116	NY	11	7
13	MA	6	5	60	CT	8	6	117	NY	8	7
14	MA	6	5	61	CT	8	6	118	NY	11	7
15	MA	6	5	62	CT	7	6	119	NY	7	7
16	MA	7	5	63	CT	6	7	120	NY	4	4
17	MA	7	5	64	CT	8	7	121	NY	4	4
18	MA	7	5	65	CT	8	7	122	NY	4	4
19	MA	7	5	66	CT	8	7	123	NY	4	4
20	MA	7	5	67	CT	7	7	124	NY	4	6
21	MA	9	5	68	CT	9	6	125	NY	4	6
22	MA	9	5	69	CT	9	6	126	NY	4	6
23	MA	7	5	70	NJ	10	6	127	NY	4	6
24	MA	7	5	71	NJ	9	6	128	NY	4	4
25	MA	6	5	72	NJ	8	6	129	NY	2	4
26	MA	6	5	73	NJ	9	6	130	NY	3	4
27	MA	6	5	74	NJ	9	6	131	NY	3	4
28	RI	7	6	75	NJ	9	6	132	NY	3	4
29	RI	7	6	76	NJ	10	6	133	NY	2	4
30	NH	7	4	77	NJ	8	6	134	NY	2	4
31	NH	7	4	78	NJ	8	6	135	NY	3	4
32	NH	3	4	79	NJ	10	6	136	NY	2	4
33	NH	3	4	80	NJ	6	5	137	NY	3	4
34	NH	3	4	81	NJ	5	5	138	NY	3	4
35	NH	3	4	82	NJ	6	5	139	NY	3	4
36	NH	3	4	83	NJ	5	5	140	NY	3	4
37	NH	3	4	84	NJ	6	5	141	NY	3	4
38	NH	3	4	85	NJ	7	6	142	NY	3	4
39	ME	5	4	86	NJ	7	5	143	NY	3	4
40	ME	5	4	87	NJ	7	5	144	NY	3	4
41	ME	5	4	88	NJ	9	6	145	NY	3	4
42	ME	3	4	89	NJ	9	6	146	NY	3	4
43	ME	3	4	100	NY	12	8	147	NY	2	4
44	ME	3	4	101	NY	12	7	148	NY	2	4
45	ME	3	4	102	NY	12	7	149	NY	2	4
46	ME	3	4	103	NY	9	8	150	PA	4	4
47	ME	3	4	104	NY	8	8	151	PA	4	4
48	ME	3	4	105	NY	9	7	152	PA	5	4
49	ME	3	4	106	NY	9	8	153	PA	3	3
50	VT	4	2	107	NY	9	8	154	PA	3	3
51	VT	4	2	108	NY	9	8	155	PA	3	3
52	VT	4	2	109	NY	8	7	156	PA	4	4
53	VT	4	2	110	NY	12	7	157	PA	4	3
54	VT	4	2	111	NY	12	7	158	PA	3	3
55	VT	4	5	112	NY	11	8	159	PA	4	3
56	VT	4	2	113	NY	11	7	160	PA	4	4

Zip Code	State	Area Assignment Regular	Area Assignment Edge	Zip Code	State	Area Assignment Regular	Area Assignment Edge	Zip Code	State	Area Assignment Regular	Area Assignment Edge
161	PA	4	4	211	MD	5	5	261	WV	1	1
162	PA	3	3	212	MD	6	5	262	WV	1	1
163	PA	3	3	213	MD	6	5	263	WV	1	1
164	PA	5	5	214	MD	5	5	264	WV	1	1
165	PA	5	5	215	MD	3	5	265	WV	1	1
166	PA	3	3	216	MD	4	5	266	WV	1	1
167	PA	3	3	217	MD	4	5	267	WV	1	1
168	PA	3	3	218	MD	4	5	268	WV	1	1
169	PA	3	3	219	MD	6	5	270	NC	3	4
170	PA	3	3	220	VA	4	6	271	NC	4	4
171	PA	3	3	221	VA	4	6	272	NC	3	4
172	PA	3	3	222	VA	4	6	273	NC	3	4
173	PA	3	3	223	VA	4	6	274	NC	3	4
174	PA	3	3	224	VA	2	3	275	NC	3	2
175	PA	3	3	225	VA	2	3	276	NC	3	2
176	PA	3	3	226	VA	2	1	277	NC	3	2
177	PA	3	3	227	VA	1	1	278	NC	3	1
178	PA	3	3	228	VA	1	1	279	NC	3	1
179	PA	3	3	229	VA	2	1	280	NC	3	3
180	PA	6	4	230	VA	4	3	281	NC	3	3
181	PA	6	4	231	VA	4	3	282	NC	3	5
182	PA	4	4	232	VA	5	3	283	NC	2	1
183	PA	4	4	233	VA	5	4	284	NC	2	1
184	PA	4	4	234	VA	5	4	285	NC	3	1
185	PA	4	4	235	VA	5	4	286	NC	3	3
186	PA	4	4	236	VA	4	4	287	NC	2	3
187	PA	4	4	237	VA	4	4	288	NC	2	3
188	PA	4	4	238	VA	4	3	289	NC	2	3
189	PA	7	5	239	VA	1	1	290	SC	2	1
190	PA	8	5	240	VA	3	1	291	SC	2	1
191	PA	8	5	241	VA	3	1	292	SC	2	1
192	PA	0	5	242	VA	1	1	293	SC	1	1
193	PA	7	5	243	VA	1	1	294	SC	4	1
194	PA	7	5	244	VA	1	1	295	SC	1	1
195	PA	5	4	245	VA	1	1	296	SC	1	1
196	PA	5	4	246	VA	1	1	297	SC	1	1
197	DE	7	4	247	WV	1	1	298	SC	1	1
198	DE	8	5	248	WV	1	1	299	SC	1	1
199	DE	4	3	249	WV	1	1	300	GA	5	4
200	DC	5	6	250	WV	1	1	301	GA	4	2
201	VA	3	5	251	WV	1	1	302	GA	4	2
202	DC	5	6	252	WV	1	1	303	GA	5	5
203	DC	5	6	253	WV	1	1	304	GA	1	1
204	DC	5	6	254	WV	1	1	305	GA	2	1
205	DC	5	6	255	WV	1	1	306	GA	2	1
206	MD	4	5	256	WV	1	1	307	GA	1	1
207	MD	7	5	257	WV	1	1	308	GA	3	1
208	MD	7	5	258	WV	1	1	309	GA	3	1
209	MD	7	5	259	WV	1	1	310	GA	1	1
210	MD	5	5	260	WV	1	1	311	GA	5	5

		Area Assignment				Area Assignment				Area Assignment	
Zip Code	State	Regular	Edge	Zip Code	State	Regular	Edge	Zip Code	State	Regular	Edge
312	GA	2	1	362	AL	1	1	414	KY	2	2
313	GA	3	1	363	AL	1	1	415	KY	2	2
314	GA	3	1	364	AL	1	1	416	KY	2	2
315	GA	1	1	365	AL	1	1	417	KY	2	2
316	GA	1	1	366	AL	3	1	418	KY	2	2
317	GA	1	1	367	AL	1	1	419	KY	0	2
318	GA	2	1	368	AL	1	1	420	KY	2	2
319	GA	2	1	369	AL	1	1	421	KY	2	2
320	FL	3	3	370	TN	2	2	422	KY	2	2
321	FL	3	3	371	TN	2	2	423	KY	2	2
322	FL	4	3	372	TN	3	2	424	KY	2	2
323	FL	2	2	373	TN	2	2	425	KY	2	2
324	FL	2	2	374	TN	2	2	426	KY	2	2
325	FL	2	2	375	TN	2	2	427	KY	2	2
326	FL	2	2	376	TN	2	2	428	KY	0	2
327	FL	3	2	377	TN	2	2	429	KY	0	2
328	FL	3	3	378	TN	2	2	430	OH	2	2
329	FL	5	3	379	TN	2	2	431	OH	2	2
330	FL	8	6	380	TN	2	2	432	OH	4	2
331	FL	10	7	381	TN	3	2	433	OH	2	1
332	FL	10	7	382	TN	2	2	434	OH	2	2
333	FL	7	6	383	TN	2	2	435	OH	2	2
334	FL	6	5	384	TN	2	2	436	OH	3	2
335	FL	4	4	385	TN	2	2	437	OH	2	2
336	FL	3	2	386	MS	2	1	438	OH	2	2
337	FL	3	3	387	MS	2	1	439	OH	2	2
338	FL	3	2	388	MS	2	1	440	OH	4	3
339	FL	3	2	389	MS	2	1	441	OH	6	3
340	FL	2	2	390	MS	3	1	442	OH	3	2
341	FL	2	3	391	MS	3	1	443	OH	3	2
342	FL	4	3	392	MS	4	1	444	OH	3	2
343	FL	2	2	393	MS	2	1	445	OH	3	2
344	FL	2	4	394	MS	2	1	446	OH	3	2
345	FL	2	2	395	MS	2	1	447	OH	3	2
346	FL	4	3	396	MS	2	1	448	OH	2	1
347	FL	3	3	400	KY	2	2	450	OH	2	1
349	FL	5	3	401	KY	2	2	451	OH	2	1
350	AL	3	1	402	KY	3	2	452	OH	4	2
351	AL	3	1	403	KY	2	2	453	OH	3	2
352	AL	4	2	404	KY	2	2	454	OH	4	2
353	AL	0	1	405	KY	4	2	455	OH	3	2
354	AL	1	1	406	KY	2	2	456	OH	2	2
355	AL	1	1	407	KY	2	2	457	OH	2	1
356	AL	1	1	408	KY	2	2	458	OH	2	2
357	AL	2	1	409	KY	2	2	459	OH	0	1
358	AL	2	1	410	KY	4	3	460	IN	3	2
359	AL	1	1	411	KY	4	2	461	IN	2	2
360	AL	1	1	412	KY	2	2	462	IN	3	2
361	AL	3	2	413	KY	2	2	463	IN	2	2

		Area Assignment				Area Assignment				Area Assignment	
Zip Code	State	Regular	Edge	Zip Code	State	Regular	Edge	Zip Code	State	Regular	Edge
464	IN	2	2	514	IA	1	1	565	MN	4	2
465	IN	2	2	515	IA	1	1	566	MN	4	2
466	IN	2	2	516	IA	1	1	567	MN	4	2
467	IN	1	1	517	IA	1	1	570	SD	2	1
468	IN	1	1	518	IA	1	1	571	SD	2	1
469	IN	1	1	519	IA	1	1	572	SD	2	1
470	IN	1	1	520	IA	1	1	573	SD	2	1
471	IN	1	1	521	IA	1	1	574	SD	2	1
472	IN	1	1	522	IA	1	1	575	SD	2	1
473	IN	1	1	523	IA	1	1	576	SD	2	1
474	IN	1	1	524	IA	2	1	577	SD	3	1
475	IN	1	1	525	IA	1	1	578	SD	0	1
476	IN	1	1	526	IA	1	1	579	SD	0	1
477	IN	1	1	527	IA	2	1	580	ND	2	1
478	IN	1	1	528	IA	2	1	581	ND	4	1
479	IN	1	1	530	WI	3	3	582	ND	2	1
480	MI	7	6	531	WI	3	3	583	ND	2	1
481	MI	7	6	532	WI	4	3	584	ND	2	1
482	MI	7	6	533	WI	0	3	585	ND	2	1
483	MI	7	6	534	WI	3	3	586	ND	2	1
484	MI	4	4	535	WI	2	2	587	ND	2	1
485	MI	6	5	536	WI	0	2	588	ND	2	1
486	MI	4	3	537	WI	3	5	590	MT	3	2
487	MI	4	3	538	WI	2	2	591	MT	5	2
488	MI	4	3	539	WI	2	3	592	MT	3	2
489	MI	5	4	540	WI	3	2	593	MT	3	2
490	MI	4	3	541	WI	2	2	594	MT	3	2
491	MI	4	3	542	WI	3	2	595	MT	3	2
492	MI	4	3	543	WI	3	4	596	MT	3	2
493	MI	4	3	544	WI	2	3	597	MT	3	2
494	MI	4	3	545	WI	2	1	598	MT	5	2
495	MI	3	3	546	WI	2	2	599	MT	3	2
496	MI	4	3	547	WI	2	3	600	IL	7	5
497	MI	4	3	548	WI	2	1	601	IL	6	5
498	MI	2	3	549	WI	3	3	602	IL	7	5
499	MI	2	3	550	MN	5	3	603	IL	6	5
500	IA	2	1	551	MN	7	4	604	IL	5	4
501	IA	2	1	552	MN	0	3	605	IL	5	4
502	IA	2	1	553	MN	5	3	606	IL	7	5
503	IA	3	1	554	MN	7	4	607	IL	7	3
504	IA	1	1	555	MN	7	2	608	IL	0	1
505	IA	1	1	556	MN	4	2	609	IL	2	1
506	IA	1	1	557	MN	4	2	610	IL	2	1
507	IA	1	1	558	MN	5	2	611	IL	2	1
508	IA	1	1	559	MN	5	2	612	IL	2	1
509	IA	2	1	560	MN	4	2	613	IL	2	1
510	IA	1	1	561	MN	3	2	614	IL	2	1
511	IA	2	1	562	MN	4	2	615	IL	2	1
512	IA	1	1	563	MN	4	2	616	IL	2	1
513	IA	1	1	564	MN	4	2	617	IL	2	1

		Area Assignment				Area Assignment				Area Assignment	
Zip Code	State	Regular	Edge	Zip Code	State	Regular	Edge	Zip Code	State	Regular	Edge
618	IL	2	1	668	KS	2	1	718	AR	2	1
619	IL	2	1	669	KS	2	1	719	AR	2	2
620	IL	2	1	670	KS	2	1	720	AR	2	1
621	IL	0	1	671	KS	2	1	721	AR	2	1
622	IL	2	1	672	KS	3	1	722	AR	3	2
623	IL	2	1	673	KS	2	1	723	AR	2	1
624	IL	1	1	674	KS	2	1	724	AR	2	1
625	IL	2	1	675	KS	2	1	725	AR	1	1
626	IL	2	1	676	KS	2	1	726	AR	1	1
627	IL	3	1	677	KS	2	1	727	AR	2	2
628	IL	1	1	678	KS	2	1	728	AR	1	1
629	IL	1	1	679	KS	2	1	729	AR	2	1
630	MO	3	3	680	NE	1	2	730	OK	3	2
631	MO	4	3	681	NE	1	2	731	OK	3	2
632	MO	0	2	682	NE	0	2	732	OK	0	1
633	MO	3	2	683	NE	1	2	733	OK	0	1
634	MO	1	2	684	NE	1	2	734	OK	1	1
635	MO	1	2	685	NE	2	2	735	OK	1	1
636	MO	1	2	686	NE	1	1	736	OK	1	1
637	MO	1	2	687	NE	1	1	737	OK	1	1
638	MO	1	2	688	NE	1	1	738	OK	1	1
639	MO	1	2	689	NE	1	1	739	OK	1	1
640	MO	3	3	690	NE	1	1	740	OK	3	2
641	MO	4	3	691	NE	1	1	741	OK	3	2
642	MO	0	2	692	NE	1	1	742	OK	0	1
643	MO	0	2	693	NE	1	1	743	OK	1	1
644	MO	1	2	694	NE	1	1	744	OK	1	1
645	MO	1	2	695	NE	1	1	745	OK	1	1
646	MO	1	2	696	NE	1	1	746	OK	1	1
647	MO	1	2	697	NE	1	1	747	OK	1	1
648	MO	1	2	698	NE	1	1	748	OK	1	1
649	MO	0	2	699	NE	1	1	749	OK	1	1
650	MO	1	2	700	LA	2	2	750	TX	6	3
651	MO	1	2	701	LA	3	2	751	TX	5	3
652	MO	2	2	702	LA	0	1	752	TX	5	4
653	MO	1	2	703	LA	1	1	753	TX	5	4
654	MO	1	2	704	LA	1	1	754	TX	2	1
655	MO	1	2	705	LA	1	1	755	TX	2	1
656	MO	1	2	706	LA	1	1	756	TX	2	1
657	MO	1	2	707	LA	2	1	757	TX	2	1
658	MO	1	2	708	LA	3	2	758	TX	2	1
659	MO	0	2	709	LA	0	1	759	TX	2	1
660	KS	3	2	710	LA	1	1	760	TX	5	3
661	KS	4	2	711	LA	4	2	761	TX	4	3
662	KS	4	2	712	LA	1	1	762	TX	2	3
663	KS	0	2	713	LA	1	1	763	TX	2	2
664	KS	2	1	714	LA	1	1	764	TX	2	2
665	KS	2	1	715	LA	0	1	765	TX	2	1
666	KS	3	1	716	AR	2	1	766	TX	2	1
667	KS	2	1	717	AR	2	1	767	TX	2	1

		Area Assignment				Area Assignment				Area Assignment	
Zip Code	State	Regular	Edge	Zip Code	State	Regular	Edge	Zip Code	State	Regular	Edge
768	TX	1	1	818	CO	0	3	868	AZ	0	2
769	TX	1	1	819	CO	0	3	869	AZ	0	2
770	TX	5	5	820	WY	2	1	870	NM	4	3
771	TX	5	5	821	WY	2	1	871	NM	4	3
772	TX	5	5	822	WY	2	1	872	NM	4	3
773	TX	4	3	823	WY	2	1	873	NM	3	3
774	TX	4	3	824	WY	2	1	874	NM	3	3
775	TX	4	3	825	WY	2	1	875	NM	4	3
776	TX	2	2	826	WY	2	1	876	NM	0	3
777	TX	2	2	827	WY	2	1	877	NM	3	2
778	TX	2	1	828	WY	2	1	878	NM	3	2
779	TX	1	1	829	WY	2	1	879	NM	3	2
780	TX	1	1	830	WY	2	1	880	NM	3	2
781	TX	1	1	831	WY	2	1	881	NM	3	2
782	TX	2	1	832	ID	4	3	882	NM	3	2
783	TX	1	1	833	ID	5	3	883	NM	3	2
784	TX	2	1	834	ID	5	3	884	NM	3	2
785	TX	1	1	835	ID	5	3	885	NM	0	2
786	TX	2	2	836	ID	5	3	886	NM	0	2
787	TX	2	2	837	ID	5	3	887	NM	0	2
788	TX	1	1	838	ID	5	3	888	NM	0	2
789	TX	2	2	839	ID	0	3	889	NM	0	2
790	TX	1	1	840	UT	6	5	890	NV	1	3
791	TX	1	1	841	UT	6	5	891	NV	2	4
792	TX	1	1	842	UT	0	5	892	NV	0	3
793	TX	1	1	843	UT	5	5	893	NV	2	3
794	TX	1	1	844	UT	5	5	894	NV	4	4
795	TX	1	1	845	UT	0	5	895	NV	4	4
796	TX	1	1	846	UT	5	5	896	NV	0	3
797	TX	1	1	847	UT	5	5	897	NV	4	4
798	TX	1	1	848	UT	0	5	898	NV	1	3
799	TX	1	1	849	UT	0	5	900	CA	11	7
800	CO	7	5	850	AZ	5	4	901	CA	12	7
801	CO	7	5	851	AZ	5	2	902	CA	11	7
802	CO	7	5	852	AZ	5	4	903	CA	12	7
803	CO	7	5	853	AZ	5	3	904	CA	11	7
804	CO	5	5	854	AZ	0	2	905	CA	11	7
805	CO	5	5	855	AZ	3	2	906	CA	10	7
806	CO	5	4	856	AZ	3	3	907	CA	10	7
807	CO	5	3	857	AZ	3	3	908	CA	10	7
808	CO	5	4	858	AZ	0	2	909	CA	0	7
809	CO	5	4	859	AZ	3	2	910	CA	9	7
810	CO	5	4	860	AZ	3	2	911	CA	10	7
811	CO	5	3	861	AZ	0	2	912	CA	10	7
812	CO	5	3	862	AZ	0	2	913	CA	11	7
813	CO	5	3	863	AZ	3	2	914	CA	12	7
814	CO	5	3	864	AZ	3	2	915	CA	11	7
815	CO	5	3	865	AZ	3	2	916	CA	11	7
816	CO	5	3	866	AZ	0	2	917	CA	9	6
817	CO	0	3	867	AZ	0	2	918	CA	10	6

Zip Code	State	Area Assignment Regular	Area Assignment Edge	Zip Code	State	Area Assignment Regular	Area Assignment Edge
919	CA	7	7	969	GM	0	0
920	CA	8	7	970	OR	7	6
921	CA	8	7	971	OR	7	6
922	CA	7	6	972	OR	7	6
923	CA	8	6	973	OR	7	6
924	CA	8	6	974	OR	7	6
925	CA	8	6	975	OR	7	6
926	CA	9	7	976	OR	7	5
927	CA	9	7	977	OR	8	5
928	CA	10	7	978	OR	7	5
929	CA	0	7	979	OR	7	5
930	CA	7	7	980	WA	10	8
931	CA	9	8	981	WA	10	8
932	CA	6	7	982	WA	8	5
933	CA	6	7	983	WA	8	8
934	CA	8	7	984	WA	8	8
935	CA	6	7	985	WA	8	5
936	CA	7	6	986	WA	8	6
937	CA	6	6	987	WA	0	3
938	CA	0	6	988	WA	8	4
939	CA	7	6	989	WA	8	4
940	CA	11	8	990	WA	8	4
941	CA	10	8	991	WA	6	4
942	CA	11	7	992	WA	8	4
943	CA	10	8	993	WA	6	4
944	CA	10	8	994	WA	6	4
945	CA	9	7	995	AK	11	8
946	CA	9	7	996	AK	11	8
947	CA	9	7	997	AK	11	8
948	CA	10	7	998	AK	11	8
949	CA	11	7	999	AK	10	8
950	CA	10	8				
951	CA	11	8				
952	CA	7	6				
953	CA	6	6				
954	CA	9	7				
955	CA	7	7				
956	CA	7	7				
957	CA	8	7				
958	CA	7	7				
959	CA	8	6				
960	CA	8	6				
961	CA	8	6				
962	CA	0	6				
963	CA	0	6				
964	CA	0	6				
965	CA	0	6				
966	CA	0	6				
967	HI	8	6				
968	HI	8	6				

Supporting Document Schedules

		Item Status:	Status Date:
Satisfied - Item:	Health - Actuarial Justification	Approved-Closed	06/20/2012

Comments:

Attachment:

AR - Individiual memorandum 2-2012.pdf