

SERFF Tracking Number: LHLI-128476508 State: Arkansas
Filing Company: Lincoln Heritage Life Insurance Company State Tracking Number:
Company Tracking Number: RI MS AR 2012 CP
TOI: MS06 Medicare Supplement - Other Sub-TOI: MS06.000 Medicare Supplement - Other
Product Name: Medicare Supplement Rate Increase Filing
Project Name/Number: /

Filing at a Glance

Company: Lincoln Heritage Life Insurance Company

Product Name: Medicare Supplement Rate Increase Filing SERFF Tr Num: LHLI-128476508 State: Arkansas

TOI: MS06 Medicare Supplement - Other

SERFF Status: Closed-Approved

State Tr Num:

Sub-TOI: MS06.000 Medicare Supplement - Other

Co Tr Num: RI MS AR 2012 CP

State Status: Approved-Closed

Filing Type: Rate

Reviewer(s): Stephanie Fowler

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

Disposition Date: 07/11/2012

Roudebush, Rodney Hartwig

Date Submitted: 06/13/2012

Disposition Status: Approved

Implementation Date Requested: 11/01/2012

Implementation Date: 11/01/2012

State Filing Description:

General Information

Project Name:

Status of Filing in Domicile: Authorized

Project Number:

Date Approved in Domicile: 11/28/2011

Requested Filing Mode: Review & Approval

Domicile Status Comments: This filing was submitted via SERFF to Illinois, our state of domicile on November 5, 2010. It was approved by the state on November 28, 2011.

Explanation for Combination/Other:

Market Type: Individual

Submission Type: New Submission

Individual Market Type:

Overall Rate Impact: 12%

Filing Status Changed: 07/11/2012

Deemer Date:

State Status Changed: 07/11/2012

Submitted By: Cathy Patterson

Created By: Cathy Patterson

Filing Description:

Corresponding Filing Tracking Number:

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

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

SERFF Tracking Number: LHLI-128476508 State: Arkansas
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 Product Name: Medicare Supplement Rate Increase Filing
 Project Name/Number: /

Rate Increase Amount: 12%

State Narrative:

Company and Contact

Filing Contact Information

Cathy Patterson, cathy.patterson@londen-insurance.com
 4343 E Camelback Rd 800-433-8181 [Phone]
 Phoenix, AZ 85018 602-808-8845 [FAX]

Filing Company Information

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

Filing Fees

Fee Required? Yes
 Fee Amount: \$250.00
 Retaliatory? Yes
 Fee Explanation: Five rate filings X \$50.00 = \$250.00
 Per Company: No

COMPANY	AMOUNT	DATE PROCESSED	TRANSACTION #
Lincoln Heritage Life Insurance Company	\$250.00	06/13/2012	60124741

SERFF Tracking Number: LHLI-128476508 *State:* Arkansas
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Disposition

Disposition Date: 07/11/2012

Implementation Date: 11/01/2012

Status: Approved

Comment: The negotiated rate increase of 3% has been approved to be implemented on or after November 1, 2012. This approval is subject to the following:

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

Company Name:	Overall % Indicated Change:	Overall % Rate Impact:	Written Premium Change for this Program:	# of Policy Holders Affected for this Program:	Written Premium for this Program:	Maximum % Change (where required):	Minimum % Change (where required):
Lincoln Heritage Life Insurance Company	3.000%	3.000%	\$4,414	65	\$147,147	3.000%	3.000%

SERFF Tracking Number: LHLI-128476508 State: Arkansas
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Schedule	Schedule Item	Schedule Item Status	Public Access
Supporting Document (revised)	Health - Actuarial Justification	Approved-Closed	No
Supporting Document	Health - Actuarial Justification	Disapproved	No
Supporting Document	Health - Actuarial Justification	Disapproved	No
Rate (revised)	AR Rate Pages rev2	Approved-Closed	Yes
Rate	AR Rate Pages rev2	Disapproved	No
Rate	AR Rate Pages rev	Disapproved	No
Rate	AR Rate Pages	Disapproved	No

SERFF Tracking Number: LHLI-128476508 State: Arkansas
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TOI: MS06 Medicare Supplement - Other Sub-TOI: MS06.000 Medicare Supplement - Other
Product Name: Medicare Supplement Rate Increase Filing
Project Name/Number: /

Objection Letter

Objection Letter Status	Pending Industry Response
Objection Letter Date	07/09/2012
Submitted Date	07/09/2012
Respond By Date	08/08/2012

Dear Cathy Patterson,

After further review of this request, we would be willing to approve a 3% rate increase on this block of business; this offer is made in lieu of disapproval.

A.C.A. 23-79-109(1)-(5) sets forth the procedure by which filings may be deemed approved upon the expiration of certain time periods with no affirmative action by the commissioner. If the commissioner determines that additional information is needed to make a decision regarding approval, such request for information will be made to the company. The filing will not be considered complete until said additional information is received. The time periods set forth in this statute will not begin to run until the filing is complete.

Please feel free to contact me if you have questions.

Sincerely,

Stephanie Fowler

SERFF Tracking Number: LHLI-128476508 State: Arkansas
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 Product Name: Medicare Supplement Rate Increase Filing
 Project Name/Number: /

Response Letter

Response Letter Status Submitted to State
 Response Letter Date 07/11/2012
 Submitted Date 07/11/2012

Dear Stephanie Fowler,

Comments:

Thank you for your recent correspondence concerning this filing. We respond as follows:

Response 1

Comments: We have revised our rate increase filing to 3% as directed.

Changed Items:

Supporting Document Schedule Item Changes

Satisfied -Name: Health - Actuarial Justification
 Comment: Actuarial memorandum attached.

No Form Schedule items changed.

Rate/Rule Schedule Item Changes

Document Name:	Affected Form Numbers:	Rate Action:	Rate Action Information:	Attach Document:
AR Rate Pages rev2	MS-AAAR 06,MS-ABAR 06,MS-ACAR 06,MS-ADAR 06,MS-AFAR 06	Revised	Previous State Filing Number 49325 Percent Rate Change Request 5	AR Rate Pages rev2.pdf

Previous Version

AR Rate Pages rev	MS-AAAR 06,MS-ABAR 06,MS-ACAR 06,MS-ADAR 06,MS-AFAR 06	Revised	Previous State Filing Number 49325 Percent Rate Change Request 5	AR Rate Pages rev.pdf
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Company Tracking Number: RI MS AR 2012 CP
TOI: MS06 Medicare Supplement - Other Sub-TOI: MS06.000 Medicare Supplement - Other
Product Name: Medicare Supplement Rate Increase Filing
Project Name/Number: /

AR Rate Pages MS-AAAR 06,MS-ABAR Revised Previous State Filing Number AR Rate Pages.pdf
06,MS-ACAR 06,MS-ADAR
06,MS-AFAR 06
49325
Percent Rate Change Request
12

We appreciate the time and consideration you have shown us in this matter. We look forward to a quick review of this filing.

Sincerely,

Cathy Patterson

Sincerely,

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

SERFF Tracking Number: LHLI-128476508 State: Arkansas
 Filing Company: Lincoln Heritage Life Insurance Company State Tracking Number:
 Company Tracking Number: RI MS AR 2012 CP
 TOI: MS06 Medicare Supplement - Other Sub-TOI: MS06.000 Medicare Supplement - Other
 Product Name: Medicare Supplement Rate Increase Filing
 Project Name/Number: /

Amendment Letter

Submitted Date: 07/11/2012

Comments:

Dear Ms. Fowler:

I could only locate one place that I had inadvertently left 5%. My post submission update (which has not been accepted by you yet) shows 3%. Please give me a call if you need anything further.

Cathy Patterson

Changed Items:

Rate/Rule Schedule Item Changes:

Document Name:	Affected Form Numbers: (Comma Separated list)	Rate Action:	Rate Action Information:	Attach Document:
AR Rate Pages rev2	MS-AAAR 06, MS-ABAR 06, MS-ACAR 06, MS-ADAR 06, MS-AFAR 06	Revised	Previous State Filing Number: 49325 Percent Rate Change Request: 3	AR Rate Pages rev2.pdf AR Rate Pages rev2.pdf

SERFF Tracking Number: LHLI-128476508 State: Arkansas
 Filing Company: Lincoln Heritage Life Insurance Company State Tracking Number:
 Company Tracking Number: RI MS AR 2012 CP
 TOI: MS06 Medicare Supplement - Other Sub-TOI: MS06.000 Medicare Supplement - Other
 Product Name: Medicare Supplement Rate Increase Filing
 Project Name/Number: /

Amendment Letter

Submitted Date: 06/26/2012

Comments:

Dear Ms. Fowler:

Thank you for your continued consideration of this rate increase request. This correspondence is in reply to your 6/21/12 objection.

Please note that, while not credible, Arkansas experience has consistently been higher than nationwide experience. Inception to date Arkansas experience is in excess of 80% and recent experience (2009 and later) loss experience in Arkansas is in excess of 100%.

In addition, please note that last year's increase in Arkansas was less than medical trend (5%).

Based on experience and recent loss ratios, the originally requested increase would appear justified. However, due to concerns raised by the Department, the Company is reducing the rate increase amount being requested to 5%. The attached memorandum and rate sheets have been revised in order to reflect this revised amount.

Once again, thank you for your continued consideration of this rate increase request. If you have questions or need additional information, please do not hesitate to call or e-mail me.

Sincerely,

Bill Reynolds
 Consulting Actuary

Changed Items:

Rate/Rule Schedule Item Changes:

Document Name:	Affected Form Numbers: (Comma Separated list)	Rate Action:	Rate Action Information:	Attach Document:
AR Rate Pages rev	MS-AAAR 06, MS-ABAR 06, MS-ACAR 06, MS-ADAR 06, MS-AFAR 06	Revised	Previous State Filing Number: 49325	AR Rate Pages rev.pdf

SERFF Tracking Number: LHLI-128476508

State: Arkansas

Filing Company: Lincoln Heritage Life Insurance Company

State Tracking Number:

Company Tracking Number: RI MS AR 2012 CP

TOI: MS06 Medicare Supplement - Other

Sub-TOI: MS06.000 Medicare Supplement - Other

Product Name: Medicare Supplement Rate Increase Filing

Project Name/Number: /

Percent Rate Change Request: 5 AR Rate Pages rev.pdf

Supporting Document Schedule Item Changes:

Satisfied -Name: Health - Actuarial Justification

Comment: Actuarial memorandum attached.

AJ AR 2012 rev.pdf

SERFF Tracking Number: LHLI-128476508 State: Arkansas
 Filing Company: Lincoln Heritage Life Insurance Company State Tracking Number:
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 TOI: MS06 Medicare Supplement - Other Sub-TOI: MS06.000 Medicare Supplement - Other
 Product Name: Medicare Supplement Rate Increase Filing
 Project Name/Number: /

Post Submission Update Request Processed On 07/11/2012

Status: Allowed
Created By: Cathy Patterson
Processed By: Stephanie Fowler
Comments:

Company Rate Information:

Company Name:Lincoln Heritage Life Insurance Company

Field Name	Requested Change	Prior Value
Overall % Indicated Change	3.000%	5.000%
Overall % Rate Impact	3.000%	5.000%
Written Premium Change for this Program	\$4414	\$7357
Maximum %Change (where required)	3.000%	5.000%
Minimum %Change (where required)	3.000%	5.000%

SERFF Tracking Number: LHLI-128476508
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 Company Tracking Number: RI MS AR 2012 CP
 TOI: MS06 Medicare Supplement - Other
 Product Name: Medicare Supplement Rate Increase Filing
 Project Name/Number: /

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

Rate Information

Rate data applies to filing.

Filing Method: SERFF
Rate Change Type: Increase
Overall Percentage of Last Rate Revision: 5.000%
Effective Date of Last Rate Revision: 11/01/2011
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):
Lincoln Heritage Life Insurance Company	3.000%	3.000%	\$4,414	65	\$147,147	3.000%	3.000%

SERFF Tracking Number: LHLI-128476508 State: Arkansas
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 Company Tracking Number: RI MS AR 2012 CP
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 Product Name: Medicare Supplement Rate Increase Filing
 Project Name/Number: /

Rate/Rule Schedule

Schedule Item Status:	Document Name:	Affected Form Numbers: (Separated with commas)	Rate Action:	Rate Action Information:	Attachments
Approved-Closed 07/11/2012	AR Rate Pages rev2	MS-AAAR 06, MS-ABAR 06, MS-ACAR 06, MS-ADAR 06, MS-AFAR 06	Revised	Previous State Filing Number: Percent Rate Change Request: 49325 3.000	AR Rate Pages rev2.pdf

LINCOLN HERITAGE LIFE INSURANCE COMPANY

Actuarial Memorandum for Individual A&H Rate Filing

Medicare Standardized Plan A

Exhibit A - Current and Proposed Premium Schedule

Current Annual Rates

Age	Preferred	Standard
All	1,986	2,207

Proposed Annual Rates after 3.0% Increase

Age	Preferred	Standard
All	2,046	2,273

Proposed Modal Premiums for Area 1

	Preferred	Standard
Annual	2,251.00	2,500.00
Semi	1,170.52	1,300.00
Quarterly	585.26	650.00
Monthly	196.96	218.75
*Monthly	187.51	208.25
**Monthly Direct Bill	189.51	210.25

Proposed Modal Premiums for Area 2

	Preferred	Standard
Annual	1,944.00	2,159.00
Semi	1,010.88	1,122.68
Quarterly	505.44	561.34
Monthly	170.10	188.91
*Monthly	161.94	179.84
**Monthly Direct Bill	163.94	181.84

Proposed Modal Premiums for Area 3

	Preferred	Standard
Annual	1,739.00	1,932.00
Semi	904.28	1,004.64
Quarterly	452.14	502.32
Monthly	152.16	169.05
*Monthly	144.86	160.94
**Monthly Direct Bill	146.86	162.94

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

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

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

Area Factors:

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

LINCOLN HERITAGE LIFE INSURANCE COMPANY

Actuarial Memorandum for Individual A&H Rate Filing

Medicare Standardized Plan B

Exhibit A - Current and Proposed Premium Schedule

Current Annual Rates

Age	Preferred	Standard
All	2,156	2,394

Proposed Annual Rates after 3.0% Increase

Age	Preferred	Standard
All	2,221	2,466

Proposed Modal Premiums for Area 1

	Preferred	Standard
Annual	2,443.00	2,713.00
Semi	1,270.36	1,410.76
Quarterly	635.18	705.38
Monthly	213.76	237.39
*Monthly	203.50	225.99
**Monthly Direct Bill	205.50	227.99

Proposed Modal Premiums for Area 2

	Preferred	Standard
Annual	2,110.00	2,343.00
Semi	1,097.20	1,218.36
Quarterly	548.60	609.18
Monthly	184.63	205.01
*Monthly	175.76	195.17
**Monthly Direct Bill	177.76	197.17

Proposed Modal Premiums for Area 3

	Preferred	Standard
Annual	1,888.00	2,096.00
Semi	981.76	1,089.92
Quarterly	490.88	544.96
Monthly	165.20	183.40
*Monthly	157.27	174.60
**Monthly Direct Bill	159.27	176.60

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

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

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

Area Factors:

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

LINCOLN HERITAGE LIFE INSURANCE COMPANY

Actuarial Memorandum for Individual A&H Rate Filing

Medicare Standardized Plan C

Exhibit A - Current and Proposed Premium Schedule

Current Annual Rates

Age	Preferred	Standard
All	2,535	2,815

Proposed Annual Rates after 3.0% Increase

Age	Preferred	Standard
All	2,611	2,899

Proposed Modal Premiums for Area 1

	Preferred	Standard
Annual	2,872.00	3,189.00
Semi	1,493.44	1,658.28
Quarterly	746.72	829.14
Monthly	251.30	279.04
*Monthly	239.24	265.64
**Monthly Direct Bill	241.24	267.64

Proposed Modal Premiums for Area 2

	Preferred	Standard
Annual	2,480.00	2,754.00
Semi	1,289.60	1,432.08
Quarterly	644.80	716.04
Monthly	217.00	240.98
*Monthly	206.58	229.41
**Monthly Direct Bill	208.58	231.41

Proposed Modal Premiums for Area 3

	Preferred	Standard
Annual	2,219.00	2,464.00
Semi	1,153.88	1,281.28
Quarterly	576.94	640.64
Monthly	194.16	215.60
*Monthly	184.84	205.25
**Monthly Direct Bill	186.84	207.25

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

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

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

Area Factors:

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

LINCOLN HERITAGE LIFE INSURANCE COMPANY

Actuarial Memorandum for Individual A&H Rate Filing

Medicare Standardized Plan D

Exhibit A - Current and Proposed Premium Schedule

Current Annual Rates

Age	Preferred	Standard
All	2,225	2,473

Proposed Annual Rates after 3.0% Increase

Age	Preferred	Standard
All	2,292	2,547

Proposed Modal Premiums for Area 1

	Preferred	Standard
Annual	2,521.00	2,802.00
Semi	1,310.92	1,457.04
Quarterly	655.46	728.52
Monthly	220.59	245.18
*Monthly	210.00	233.41
**Monthly Direct Bill	212.00	235.41

Proposed Modal Premiums for Area 2

	Preferred	Standard
Annual	2,177.00	2,420.00
Semi	1,132.04	1,258.40
Quarterly	566.02	629.20
Monthly	190.49	211.75
*Monthly	181.34	201.59
**Monthly Direct Bill	183.34	203.59

Proposed Modal Premiums for Area 3

	Preferred	Standard
Annual	1,948.00	2,165.00
Semi	1,012.96	1,125.80
Quarterly	506.48	562.90
Monthly	170.45	189.44
*Monthly	162.27	180.34
**Monthly Direct Bill	164.27	182.34

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

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

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

Area Factors:

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

LINCOLN HERITAGE LIFE INSURANCE COMPANY

Actuarial Memorandum for Individual A&H Rate Filing

Medicare Standardized Plan F

Exhibit A - Current and Proposed Premium Schedule

Current Annual Rates

Age	Preferred	Standard
All	2,611	2,904

Proposed Annual Rates after 3.0% Increase

Age	Preferred	Standard
All	2,689	2,991

Proposed Modal Premiums for Area 1

	Preferred	Standard
Annual	2,958.00	3,290.00
Semi	1,538.16	1,710.80
Quarterly	769.08	855.40
Monthly	258.83	287.88
*Monthly	246.40	274.06
**Monthly Direct Bill	248.40	276.06

Proposed Modal Premiums for Area 2

	Preferred	Standard
Annual	2,555.00	2,841.00
Semi	1,328.60	1,477.32
Quarterly	664.30	738.66
Monthly	223.56	248.59
*Monthly	212.83	236.66
**Monthly Direct Bill	214.83	238.66

Proposed Modal Premiums for Area 3

	Preferred	Standard
Annual	2,286.00	2,542.00
Semi	1,188.72	1,321.84
Quarterly	594.36	660.92
Monthly	200.03	222.43
*Monthly	190.42	211.75
**Monthly Direct Bill	192.42	213.75

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

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

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

Area Factors:

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

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 Product Name: Medicare Supplement Rate Increase Filing
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Superseded Schedule Items

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

Creation Date:	Schedule	Schedule Item Name	Replacement Creation Date	Attached Document(s)
06/26/2012	Rate and Rule	AR Rate Pages rev	07/11/2012	AR Rate Pages rev.pdf (Superseded)
06/13/2012	Rate and Rule	AR Rate Pages	06/26/2012	AR Rate Pages.pdf (Superseded)
07/11/2012	Rate and Rule	AR Rate Pages rev2	07/11/2012	AR Rate Pages rev2.pdf