

State: District of Columbia **Filing Company:** Liberty National Life Insurance Company
TOI/Sub-TOI: MS08I Individual Medicare Supplement - Standard Plans 2010/MS08I.012 Multi-Plan 2010
Product Name: 2014 LNL Individual Standardized Medicare Supplement
Project Name/Number: 2014 DC LNL Platinum Plus Rate Filing/2014 DC LNL Platinum Plus Rate Filing

Filing at a Glance

Company: Liberty National Life Insurance Company
 Product Name: 2014 LNL Individual Standardized Medicare Supplement
 State: District of Columbia
 TOI: MS08I Individual Medicare Supplement - Standard Plans 2010
 Sub-TOI: MS08I.012 Multi-Plan 2010
 Filing Type: Rate
 Date Submitted: 11/01/2013
 SERFF Tr Num: AMLC-129277675
 SERFF Status: Assigned
 State Tr Num:
 State Status:
 Co Tr Num: 2014 DC LNL PLATINUM PLUS RATE FILING
 Implementation: 01/01/2014
 Date Requested:
 Author(s): Darla Grisolia
 Reviewer(s): Donghan Xu (primary), Alula Selassie
 Disposition Date:
 Disposition Status:
 Implementation Date:
 State Filing Description:

State: District of Columbia **Filing Company:** Liberty National Life Insurance Company
TOI/Sub-TOI: MS08I Individual Medicare Supplement - Standard Plans 2010/MS08I.012 Multi-Plan 2010
Product Name: 2014 LNL Individual Standardized Medicare Supplement
Project Name/Number: 2014 DC LNL Platinum Plus Rate Filing/2014 DC LNL Platinum Plus Rate Filing

General Information

Project Name: 2014 DC LNL Platinum Plus Rate Filing	Status of Filing in Domicile: Authorized
Project Number: 2014 DC LNL Platinum Plus Rate Filing	Date Approved in Domicile: 10/28/2013
Requested Filing Mode: Review & Approval	Domicile Status Comments:
Explanation for Combination/Other:	Market Type: Individual
Submission Type: New Submission	Individual Market Type:
Overall Rate Impact:	Filing Status Changed: 11/05/2013
	State Status Changed:
Deemer Date:	Created By: Darla Grisolia
Submitted By: Darla Grisolia	Corresponding Filing Tracking Number: 2014 DC LNL Platinum Plus Rate Filing

Filing Description:

Attached are the 2014 Liberty National Individual Standardized Medicare Supplement Policy Forms LMSA10, LMSB10, LMSF10, LMSHDF10, LMSN10, and LDMSB10. We are requesting a rate change as indicated on our Rate Filing Summary Page and as listed below. The proposed effective date is January 1, 2014, or as soon thereafter as possible and allowed. An Actuarial Memorandum, premium rate schedule, and supporting documentation are included for your consideration.

LMSA10 + 7.5%
 LMSB10 + 7.5%
 LMSF10 + 7.5%
 LMSHDF10 + 0.0%
 LMSN10 + 7.5%
 LDMSB10 + 9.0%

Company and Contact

Filing Contact Information

Darla Grisolia, Rate Compliance Specialist dgrisolia@torchmarkcorp.com
 3700 S. Stonebridge Drive 469-525-4752 [Phone]
 McKinney, TX 75070 972-569-3679 [FAX]

Filing Company Information

Liberty National Life Insurance Company	CoCode: 65331	State of Domicile: Nebraska
P.O. Box 2612	Group Code: 290	Company Type: Life and Health
Birmingham, AL 35202	Group Name: Liberty National Life	State ID Number:
(205) 325-4307 ext. [Phone]	FEIN Number: 63-0124600	

Filing Fees

Fee Required? No
 Retaliatory? No
 Fee Explanation:

SERFF Tracking #:

AMLC-129277675

State Tracking #:**Company Tracking #:**2014 DC LNL PLATINUM PLUS RATE
FILING**State:**

District of Columbia

Filing Company:

Liberty National Life Insurance Company

TOI/Sub-TOI:

MS081 Individual Medicare Supplement - Standard Plans 2010/MS081.012 Multi-Plan 2010

Product Name:

2014 LNL Individual Standardized Medicare Supplement

Project Name/Number:

2014 DC LNL Platinum Plus Rate Filing/2014 DC LNL Platinum Plus Rate Filing

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:

04/01/2013

Filing Method of Last Filing:

SERFF

Company Rate Information

Company Name:	Overall % Indicated Change:	Overall % Rate Impact:	Written Premium Change for this Program:	Number of Policy Holders Affected for this Program:	Written Premium for this Program:	Maximum % Change (where req'd):	Minimum % Change (where req'd):
Liberty National Life Insurance Company	0.000%	0.000%	\$0	0	\$0	9.000%	0.000%

State: District of Columbia

Filing Company:

Liberty National Life Insurance Company

TOI/Sub-TOI: MS08I Individual Medicare Supplement - Standard Plans 2010/MS08I.012 Multi-Plan 2010

Product Name: 2014 LNL Individual Standardized Medicare Supplement

Project Name/Number: 2014 DC LNL Platinum Plus Rate Filing/2014 DC LNL Platinum Plus Rate Filing

Rate/Rule Schedule

Item No.	Schedule Item Status	Document Name	Affected Form Numbers (Separated with commas)	Rate Action	Rate Action Information	Attachments
1		2014 LNL Plan A rate page(s)	LMSA10	Revised	Previous State Filing Number: AMLC-128727289 Percent Rate Change Request: 7.5	2014 Plan A Rate Page.pdf,
2		2014 LNL Plan B rate page(s)	LMSB10	Revised	Previous State Filing Number: AMLC-128727289 Percent Rate Change Request: 7.5	2014 Plan B Rate Page.pdf,
3		2014 LNL Plan F rate page(s)	LMSF10	Revised	Previous State Filing Number: AMLC-128727289 Percent Rate Change Request: 7.5	2014 Plan F Rate Page.pdf,
4		2014 LNL Plan HDF rate page(s)	LMSHDF10	Revised	Previous State Filing Number: AMLC-128727289 Percent Rate Change Request:	2014 Plan HDF Rate Page.pdf,
5		2014 LNL Plan N rate page(s)	LMSN10	Revised	Previous State Filing Number: AMLC-128727289 Percent Rate Change Request: 7.5	2014 Plan N Rate Page.pdf,
6		2014 LNL Plan LDMSB rate page(s)	LDMSB10	Revised	Previous State Filing Number: AMLC-128727289 Percent Rate Change Request: 9	2014 Plan B Disability Rate Page.pdf,

LIBERTY NATIONAL LIFE INSURANCE COMPANY

McKinney, Texas

Policy Form LMSA10

2014 Annual Medicare Rate Filing

DISTRICT OF COLUMBIA

Annual Premium Rates

For Policies Issued with Attained Age Rates

Policies effective on or after June 1, 2010

Attained Age	Current Annual Base Rate	Proposed Annual Base Rate
65	\$1,511	\$1,624
66	\$1,579	\$1,697
67	\$1,640	\$1,763
68	\$1,690	\$1,817
69	\$1,751	\$1,882
70	\$1,808	\$1,944
71	\$1,850	\$1,989
72	\$1,868	\$2,008
73	\$1,889	\$2,031
74	\$1,903	\$2,046
75	\$1,917	\$2,061
76	\$1,919	\$2,063
77	\$1,919	\$2,063
78	\$1,919	\$2,063
79	\$1,919	\$2,063
80 & Over	\$1,919	\$2,063

Rate Adjustment Factors:

Sex and Underwriting

Male Preferred	1.068	1.068
Female Preferred	0.929	0.929
Male Standard	1.229	1.229
Female Standard	1.068	1.068

Modal Premium Formulas:

Annual	= Annual Base Rate * Sex and Underwriting Factor (rounded to near dollar)
Semi-Annual	= Annual / 2 (rounded to high dollar)
Quarterly	= Annual / 4 (rounded to high dollar)
Monthly	= Annual / 12 (rounded to high dollar)

For Company Use: Plan Codes YA4 / YA5 / YA6 / YA7

LIBERTY NATIONAL LIFE INSURANCE COMPANY

McKinney, Texas

Policy Form LMSB10

2014 Annual Medicare Rate Filing

DISTRICT OF COLUMBIA

Annual Premium Rates

For Policies Issued with Attained Age Rates

Policies effective on or after June 1, 2010

Attained Age	Current Annual Base Rate	Proposed Annual Base Rate
65	\$2,107	\$2,265
66	\$2,215	\$2,381
67	\$2,312	\$2,485
68	\$2,395	\$2,575
69	\$2,492	\$2,679
70	\$2,582	\$2,776
71	\$2,656	\$2,855
72	\$2,702	\$2,905
73	\$2,753	\$2,959
74	\$2,794	\$3,004
75	\$2,830	\$3,042
76	\$2,857	\$3,071
77	\$2,868	\$3,083
78	\$2,880	\$3,096
79	\$2,891	\$3,108
80 & Over	\$2,891	\$3,108

Rate Adjustment Factors:

Sex and Underwriting

Male Preferred	1.068	1.068
Female Preferred	0.929	0.929
Male Standard	1.229	1.229
Female Standard	1.068	1.068

Modal Premium Formulas:

Annual	= Annual Base Rate * Sex and Underwriting Factor (rounded to near dollar)
Semi-Annual	= Annual / 2 (rounded to high dollar)
Quarterly	= Annual / 4 (rounded to high dollar)
Monthly	= Annual / 12 (rounded to high dollar)

For Company Use: Plan Codes YB4 / YB5 / YB6 / YB7

LIBERTY NATIONAL LIFE INSURANCE COMPANY

McKinney, Texas

Policy Form LMSF10

2014 Annual Medicare Rate Filing

DISTRICT OF COLUMBIA

Annual Premium Rates

For Policies Issued with Attained Age Rates

Policies effective on or after June 1, 2010

Attained Age	Current Annual Base Rate	Proposed Annual Base Rate
65	\$2,385	\$2,564
66	\$2,503	\$2,691
67	\$2,613	\$2,809
68	\$2,715	\$2,919
69	\$2,837	\$3,050
70	\$2,954	\$3,176
71	\$3,055	\$3,284
72	\$3,132	\$3,367
73	\$3,211	\$3,452
74	\$3,281	\$3,527
75	\$3,339	\$3,589
76	\$3,389	\$3,643
77	\$3,452	\$3,711
78	\$3,514	\$3,778
79	\$3,578	\$3,846
80 & Over	\$3,685	\$3,961

Rate Adjustment Factors:

Sex and Underwriting

Male Preferred	1.068	1.068
Female Preferred	0.929	0.929
Male Standard	1.229	1.229
Female Standard	1.068	1.068

Modal Premium Formulas:

Annual	= Annual Base Rate * Sex and Underwriting Factor (rounded to near dollar)
Semi-Annual	= Annual / 2 (rounded to high dollar)
Quarterly	= Annual / 4 (rounded to high dollar)
Monthly	= Annual / 12 (rounded to high dollar)

For Company Use: Plan Codes YC4 / YC5 / YC6 / YC7

LIBERTY NATIONAL LIFE INSURANCE COMPANY

McKinney, Texas

Policy Form LMSHDF10

2014 Annual Medicare Rate Filing

DISTRICT OF COLUMBIA

Annual Premium Rates

For Policies Issued with Attained Age Rates

Policies effective on or after June 1, 2010

Attained Age	Current Annual Base Rate	Proposed Annual Base Rate
65	\$437	\$437
66	\$472	\$472
67	\$506	\$506
68	\$526	\$526
69	\$550	\$550
70	\$572	\$572
71	\$591	\$591
72	\$623	\$623
73	\$653	\$653
74	\$684	\$684
75	\$713	\$713
76	\$724	\$724
77	\$737	\$737
78	\$770	\$770
79	\$807	\$807
80 & Over	\$870	\$870
Rate Adjustment Factors:		
Sex and Underwriting		
Male Preferred	1.068	1.068
Female Preferred	0.929	0.929
Male Standard	1.229	1.229
Female Standard	1.068	1.068
Modal Premium Formulas:		
Annual	= Annual Base Rate * Sex and Underwriting Factor (rounded to near dollar)	
Semi-Annual	= Annual / 2 (rounded to high dollar)	
Quarterly	= Annual / 4 (rounded to high dollar)	
Monthly	= Annual / 12 (rounded to high dollar)	

For Company Use: Plan Codes YD4 / YD5 / YD6 / YD7

LIBERTY NATIONAL LIFE INSURANCE COMPANY

McKinney, Texas

Policy Form LMSN10

2014 Annual Medicare Rate Filing

DISTRICT OF COLUMBIA

Annual Premium Rates

For Policies Issued with Attained Age Rates

Policies effective on or after June 1, 2010

Attained Age	Current Annual Base Rate	Proposed Annual Base Rate
65	\$1,821	\$1,958
66	\$1,923	\$2,067
67	\$2,019	\$2,170
68	\$2,107	\$2,265
69	\$2,206	\$2,371
70	\$2,311	\$2,484
71	\$2,396	\$2,576
72	\$2,466	\$2,651
73	\$2,539	\$2,729
74	\$2,597	\$2,792
75	\$2,654	\$2,853
76	\$2,698	\$2,900
77	\$2,758	\$2,965
78	\$2,818	\$3,029
79	\$2,877	\$3,093
80 & Over	\$2,984	\$3,208

Rate Adjustment Factors:

Sex and Underwriting

Male Preferred	1.068	1.068
Female Preferred	0.929	0.929
Male Standard	1.229	1.229
Female Standard	1.068	1.068

Modal Premium Formulas:

Annual	= Annual Base Rate * Sex and Underwriting Factor (rounded to near dollar)
Semi-Annual	= Annual / 2 (rounded to high dollar)
Quarterly	= Annual / 4 (rounded to high dollar)
Monthly	= Annual / 12 (rounded to high dollar)

For Company Use: Plan Codes YK4 / YK5 / YK6 / YK7

LIBERTY NATIONAL LIFE INSURANCE COMPANY

McKinney, Texas

Policy Form LDMSB10

2014 Annual Medicare Rate Filing

DISTRICT OF COLUMBIA

Annual Premium Rates
For Policies Issued with Issue Age Rates
Policies effective on or after June 1, 2010

Issue Age	Current Annual Base Rate	Proposed Annual Base Rate
64 and Under	\$6,182	\$6,738

Rate Adjustment Factors:

Sex and Underwriting

Male Preferred	1.068	1.068
Female Preferred	0.929	0.929
Male Standard	1.229	1.229
Female Standard	1.068	1.068

Modal Premium Formulas:

Annual	= Annual Base Rate * Sex and Underwriting Factor (rounded to near dollar)
Semi-Annual	= Annual / 2 (rounded to high dollar)
Quarterly	= Annual / 4 (rounded to high dollar)
Monthly	= Annual / 12 (rounded to high dollar)

For Company Use: Plan Codes YF0 / YF1 / YF2 / YF3 / ZF0 / ZF1 / ZF2 / ZF3

SERFF Tracking #:

AMLC-129277675

State Tracking #:

Company Tracking #:

2014 DC LNL PLATINUM PLUS RATE
FILING

State:

District of Columbia

Filing Company:

Liberty National Life Insurance Company

TOI/Sub-TOI:

MS08I Individual Medicare Supplement - Standard Plans 2010/MS08I.012 Multi-Plan 2010

Product Name:

2014 LNL Individual Standardized Medicare Supplement

Project Name/Number:

2014 DC LNL Platinum Plus Rate Filing/2014 DC LNL Platinum Plus Rate Filing

Supporting Document Schedules

Bypassed - Item:	Cover Letter All Filings
Bypass Reason:	Included in the General Information Filing Description
Attachment(s):	
Item Status:	
Status Date:	

Bypassed - Item:	Certificate of Authority to File
Bypass Reason:	N/A
Attachment(s):	
Item Status:	
Status Date:	

Satisfied - Item:	Actuarial Memorandum
Comments:	
Attachment(s):	2014 LNL Plan A Actuarial Memorandum 1.pdf 2014 LNL Plan B Actuarial Memorandum 1.pdf 2014 LNL Plan F Actuarial Memorandum 1.pdf 2014 LNL Plan HDF Actuarial Memorandum 1.pdf 2014 LNL Plan N Actuarial Memorandum 1.pdf 2014 Plan B Disability Rate Page.pdf
Item Status:	
Status Date:	

Bypassed - Item:	Actuarial Justification
Bypass Reason:	N/A - This is a rate filing only.
Attachment(s):	
Item Status:	
Status Date:	

Satisfied - Item:	District of Columbia and Countrywide Loss Ratio Analysis (P&C)
Comments:	N/A - Rate Filing
Attachment(s):	
Item Status:	
Status Date:	

Bypassed - Item:	District of Columbia and Countrywide Experience for the Last 5 Years (P&C)
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SERFF Tracking #:

AMLC-129277675

State Tracking #:

Company Tracking #:

2014 DC LNL PLATINUM PLUS RATE
FILING

State: District of Columbia **Filing Company:** Liberty National Life Insurance Company
TOI/Sub-TOI: MS08I Individual Medicare Supplement - Standard Plans 2010/MS08I.012 Multi-Plan 2010
Product Name: 2014 LNL Individual Standardized Medicare Supplement
Project Name/Number: 2014 DC LNL Platinum Plus Rate Filing/2014 DC LNL Platinum Plus Rate Filing

Bypass Reason:	N/A
Attachment(s):	
Item Status:	
Status Date:	

Bypassed - Item:	Actuarial Memorandum and Certifications
Bypass Reason:	N/A - This is a rate filing only.
Attachment(s):	
Item Status:	
Status Date:	

Bypassed - Item:	Unified Rate Review Template
Bypass Reason:	N/A - This is a rate filing only.
Attachment(s):	
Item Status:	
Status Date:	

Satisfied - Item:	2014 LNL Combined Supporting Documentation
Comments:	
Attachment(s):	2014 LNL Nationwide Combined Experience E & I.pdf 2014 LNL Projection and Parameters.pdf
Item Status:	
Status Date:	

Satisfied - Item:	2014 LNL Plan A Supporting Documents
Comments:	Please see attached documents
Attachment(s):	2014 Plan A Rate Filing Summary Page.pdf 2014 Plan A Rate History.pdf
Item Status:	
Status Date:	

Satisfied - Item:	2014 LNL Plan B Supporting Documents
Comments:	
Attachment(s):	2014 Plan B Rate Filing Summary Page.pdf 2014 Plan B Rate History.pdf
Item Status:	
Status Date:	

SERFF Tracking #:

AMLC-129277675

State Tracking #:**Company Tracking #:**2014 DC LNL PLATINUM PLUS RATE
FILING**State:**

District of Columbia

Filing Company:

Liberty National Life Insurance Company

TOI/Sub-TOI:

MS08I Individual Medicare Supplement - Standard Plans 2010/MS08I.012 Multi-Plan 2010

Product Name:

2014 LNL Individual Standardized Medicare Supplement

Project Name/Number:

2014 DC LNL Platinum Plus Rate Filing/2014 DC LNL Platinum Plus Rate Filing

Satisfied - Item:	2014 LNL Plan F Supporting Documents
Comments:	
Attachment(s):	2014 Plan B Rate Filing Summary Page.pdf 2014 Plan B Rate History.pdf
Item Status:	
Status Date:	
Satisfied - Item:	2014 LNL Plan HDF Supporting Documents
Comments:	
Attachment(s):	2014 Plan HDF Rate Filing Summary Page.pdf 2014 Plan HDF Rate History.pdf
Item Status:	
Status Date:	
Satisfied - Item:	2014 LNL Plan N Supporting Documents
Comments:	
Attachment(s):	2014 Plan N Rate Filing Summary Page.pdf 2014 Plan N Rate History.pdf
Item Status:	
Status Date:	
Satisfied - Item:	2014 LNL Plan B Disability Supporting Documents
Comments:	
Attachment(s):	2014 Plan B Disability Rate Filing Summary Page.pdf 2014 Plan B Disability Rate History.pdf
Item Status:	
Status Date:	

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

**POLICY FORM LMSA10
INDIVIDUAL STANDARDIZED MEDICARE SUPPLEMENT PLAN A**

2014 RATE FILING

ACTUARIAL MEMORANDUM

This actuarial memorandum along with its attachments, a projection and parameters, is an actuarial report. This actuarial memorandum contains a general description of some policy provisions; it does not change the policy. Benefits are paid as specified in the complete policy.

BENEFITS

This policy supplements Medicare and provides benefits for:

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

RENEWABILITY

These policies are guaranteed renewable for life, subject to the company's right to change premiums by class.

MARKETING METHOD AND ELIGIBILITY

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

NATIONWIDE ISSUE YEARS (DATES MAY VARY IN YOUR STATE)

June 1, 2010 - Present

APPLICATION OF RATES

The schedule of proposed premium rates applies to all policies issued in your state and is intended to be effective for calendar year 2014.

SCOPE AND REASON

The purpose of this rate filing is to demonstrate to state officials that the anticipated loss ratio of this product, reflecting any requested increase in premium rates, meets the minimum requirements of your state. This rate filing is not intended to be used for any other purpose or by any other parties. Data used in the preparation of this filing is from company records and was used without audit. It was reviewed for reasonableness.

This rate filing is submitted in compliance with your state's Medicare supplement annual rate filing requirements and applies to all policies issued in your state. The change in premiums requested for your state is shown on the Rate Filing Summary. Any increase in premium rates requested at this time is based on changes in Medicare benefits and is based on experience.

DETERMINATION OF RATES

Proposed premium rates for 2014 were determined based on historical experience of an affiliated company. These premium rates were set to achieve at least the minimum loss ratio.

PREMIUM COMPARISON

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

EXPERIENCE

Experience is enclosed. Experience is subject to significant fluctuations on small blocks of business.

LOSS RATIO

The minimum loss ratio is 65%.

CERTIFICATION

I, Peter Hendee, am Health Actuary for Liberty National Life Insurance Company. I am a member of the American Academy of Actuaries and meet its Qualification Standards to render this opinion. I am available to assist with questions regarding this filing.

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

10/11/13

Date

Peter G. Hendee

Peter G. Hendee, FSA, MAAA
Health Actuary

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

**POLICY FORM LMSB10
INDIVIDUAL STANDARDIZED MEDICARE SUPPLEMENT PLAN B**

2014 RATE FILING

ACTUARIAL MEMORANDUM

This actuarial memorandum along with its attachments, a projection and parameters, is an actuarial report. This actuarial memorandum contains a general description of some policy provisions; it does not change the policy. Benefits are paid as specified in the complete policy.

BENEFITS

This policy supplements Medicare and provides benefits for:

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

RENEWABILITY

These policies are guaranteed renewable for life, subject to the company's right to change premiums by class.

MARKETING METHOD AND ELIGIBILITY

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

NATIONWIDE ISSUE YEARS (DATES MAY VARY IN YOUR STATE)

June 1, 2010 - Present

APPLICATION OF RATES

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SCOPE AND REASON

The purpose of this rate filing is to demonstrate to state officials that the anticipated loss ratio of this product, reflecting any requested increase in premium rates, meets the minimum requirements of your state. This rate filing is not intended to be used for any other purpose or by any other parties. Data used in the preparation of this filing is from company records and was used without audit. It was reviewed for reasonableness.

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DETERMINATION OF RATES

Proposed premium rates for 2014 were determined based on historical experience of an affiliated company. These premium rates were set to achieve at least the minimum loss ratio.

PREMIUM COMPARISON

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

EXPERIENCE

Experience is enclosed. Experience is subject to significant fluctuations on small blocks of business.

LOSS RATIO

The minimum loss ratio is 65%.

CERTIFICATION

I, Peter Hendee, am Health Actuary for Liberty National Life Insurance Company. I am a member of the American Academy of Actuaries and meet its Qualification Standards to render this opinion. I am available to assist with questions regarding this filing.

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

10/11/13

Date

Peter G. Hendee

Peter G. Hendee, FSA, MAAA
Health Actuary

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

**POLICY FORM LMSF10
INDIVIDUAL STANDARDIZED MEDICARE SUPPLEMENT PLAN F**

2014 RATE FILING

ACTUARIAL MEMORANDUM

This actuarial memorandum along with its attachments, a projection and parameters, is an actuarial report. This actuarial memorandum contains a general description of some policy provisions; it does not change the policy. Benefits are paid as specified in the complete policy.

BENEFITS

This policy supplements Medicare and provides benefits for:

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

RENEWABILITY

These policies are guaranteed renewable for life, subject to the company's right to change premiums by class.

MARKETING METHOD AND ELIGIBILITY

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

NATIONWIDE ISSUE YEARS (DATES MAY VARY IN YOUR STATE)

June 1, 2010 - Present

APPLICATION OF RATES

The schedule of proposed premium rates applies to all policies issued in your state and is intended to be effective for calendar year 2014.

SCOPE AND REASON

The purpose of this rate filing is to demonstrate to state officials that the anticipated loss ratio of this product, reflecting any requested increase in premium rates, meets the minimum requirements of your state. This rate filing is not intended to be used for any other purpose or by any other parties. Data used in the preparation of this filing is from company records and was used without audit. It was reviewed for reasonableness.

This rate filing is submitted in compliance with your state's Medicare supplement annual rate filing requirements and applies to all policies issued in your state. The change in premiums requested for your state is shown on the Rate Filing Summary. Any increase in premium rates requested at this time is based on changes in Medicare benefits and is based on experience.

DETERMINATION OF RATES

Proposed premium rates for 2014 were determined based on historical experience of an affiliated company. These premium rates were set to achieve at least the minimum loss ratio.

PREMIUM COMPARISON

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

10/11/13
Date

Peter G. Hendee

Peter G. Hendee, FSA, MAAA
Health Actuary

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

**POLICY FORM LMSHDF10
INDIVIDUAL STANDARDIZED MEDICARE SUPPLEMENT HIGH DEDUCTIBLE PLAN F**

2014 RATE FILING

ACTUARIAL MEMORANDUM

This actuarial memorandum along with its attachments, a projection and parameters, is an actuarial report. This actuarial memorandum contains a general description of some policy provisions; it does not change the policy. Benefits are paid as specified in the complete policy.

BENEFITS

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

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

RENEWABILITY

These policies are guaranteed renewable for life, subject to the company's right to change premiums by class.

MARKETING METHOD AND ELIGIBILITY

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

NATIONWIDE ISSUE YEARS

June 1, 2010 - Present

APPLICATION OF RATES

The schedule of proposed premium rates applies to all policies issued in your state and is intended to be effective for calendar year 2014.

SCOPE AND REASON

The purpose of this rate filing is to demonstrate to state officials that the anticipated loss ratio of this product, reflecting any requested increase in premium rates, meets the minimum requirements of your state. This rate filing is not intended to be used for any other purpose or by any other parties. Data used in the preparation of this filing is from company records and was used without audit. It was reviewed for reasonableness.

This rate filing is submitted in compliance with your state's Medicare supplement annual rate filing requirements and applies to all policies issued in your state. The change in premiums requested for your state is shown on the Rate Filing Summary. Any increase in premium rates requested at this time is based on changes in Medicare benefits and is based on experience.

DETERMINATION OF RATES

Proposed premium rates for 2014 were determined based on historical experience of an affiliated company. These premium rates were set to achieve at least the minimum loss ratio.

PREMIUM COMPARISON

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

EXPERIENCE

Experience is enclosed. Experience is subject to significant fluctuations on small blocks of business.

LOSS RATIO

The minimum loss ratio is 65%.

CERTIFICATION

I, Peter Hendee, am Health Actuary for Liberty National Life Insurance Company. I am a member of the American Academy of Actuaries and meet its Qualification Standards to render this opinion. I am available to assist with questions regarding this filing.

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

10/11/13

Date

Peter G. Hendee

Peter G. Hendee, FSA, MAAA
Health Actuary

LIBERTY NATIONAL LIFE INSURANCE COMPANY
McKinney, Texas

POLICY FORM LMSN10
INDIVIDUAL STANDARDIZED MEDICARE SUPPLEMENT PLAN N

2014 RATE FILING

ACTUARIAL MEMORANDUM

This actuarial memorandum along with its attachments, a projection and parameters, is an actuarial report. This actuarial memorandum contains a general description of some policy provisions; it does not change the policy. Benefits are paid as specified in the complete policy.

BENEFITS

This policy supplements Medicare and provides benefits for:

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

RENEWABILITY

These policies are guaranteed renewable for life, subject to the company's right to change premiums by class.

MARKETING METHOD AND ELIGIBILITY

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

NATIONWIDE ISSUE YEARS (DATES MAY VARY IN YOUR STATE)

June 1, 2010 - Present

APPLICATION OF RATES

The schedule of proposed premium rates applies to all policies issued in your state and is intended to be effective for calendar year 2014.

SCOPE AND REASON

The purpose of this rate filing is to demonstrate to state officials that the anticipated loss ratio of this product, reflecting any requested increase in premium rates, meets the minimum requirements of your state. This rate filing is not intended to be used for any other purpose or by any other parties. Data used in the preparation of this filing is from company records and was used without audit. It was reviewed for reasonableness.

This rate filing is submitted in compliance with your state's Medicare supplement annual rate filing requirements and applies to all policies issued in your state. The change in premiums requested for your state is shown on the Rate Filing Summary. Any increase in premium rates requested at this time is based on changes in Medicare benefits and is based on experience.

DETERMINATION OF RATES

Proposed premium rates for 2014 were determined based on historical experience of an affiliated company. These premium rates were set to achieve at least the minimum loss ratio.

PREMIUM COMPARISON

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

EXPERIENCE

Experience is enclosed. Experience is subject to significant fluctuations on small blocks of business.

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10/11/13

Date

Peter G. Hendee

Peter G. Hendee, FSA, MAAA
Health Actuary

LIBERTY NATIONAL LIFE INSURANCE COMPANY

McKinney, Texas

Policy Form LDMSB10

2014 Annual Medicare Rate Filing

DISTRICT OF COLUMBIA

Annual Premium Rates
For Policies Issued with Issue Age Rates
Policies effective on or after June 1, 2010

Issue Age	Current Annual Base Rate	Proposed Annual Base Rate
64 and Under	\$6,182	\$6,738
Rate Adjustment Factors:		
Sex and Underwriting		
Male Preferred	1.068	1.068
Female Preferred	0.929	0.929
Male Standard	1.229	1.229
Female Standard	1.068	1.068
Modal Premium Formulas:		
Annual	= Annual Base Rate * Sex and Underwriting Factor (rounded to near dollar)	
Semi-Annual	= Annual / 2 (rounded to high dollar)	
Quarterly	= Annual / 4 (rounded to high dollar)	
Monthly	= Annual / 12 (rounded to high dollar)	

For Company Use: Plan Codes YF0 / YF1 / YF2 / YF3 / ZF0 / ZF1 / ZF2 / ZF3

LIBERTY NATIONAL LIFE INSURANCE COMPANY
 McKinney, Texas
 POLICY FORMS LMSA10, LMSB10, LMSF10, LMSHDF10, LMSN10, LDMSA10, LDMSB10, LDMSF10, LDMSHDF10 and LDMSN10
 INDIVIDUAL STANDARDIZED MEDICARE SUPPLEMENT PLANS A, B, F, HDF, N and DISABILITY PLANS A, B, F, HDF and N
 2014 RATE FILING
 NATIONWIDE EXPERIENCE FROM INCEPTION

Experience Year to Date	Issue Year	EARNED PREMIUM	INCURRED CLAIMS	LOSS RATIO
2010-12	2010	482,433	301,106	0.624
	TOTAL	482,433	301,106	0.624
2011-12	2010	1,082,100	802,518	0.742
	2011	1,199,604	669,016	0.558
	2012	0	-53	0.000
	TOTAL	2,281,704	1,471,481	0.645
2012-12	2010	833,030	615,655	0.739
	2011	1,472,684	976,713	0.663
	2012	557,860	317,854	0.570
	TOTAL	2,863,574	1,910,222	0.667
2013-06	2010	371,547	308,245	0.830
	2011	645,661	418,813	0.649
	2012	396,875	238,515	0.601
	2013	113,553	75,867	0.668
	TOTAL	1,527,636	1,041,440	0.682
GRAND TOTAL		7,155,347	4,724,249	0.660

INCURRED CLAIMS DO NOT INCLUDE THE CHANGE IN ADDITIONAL RESERVES
 CLAIM LIABILITIES SHOWN ABOVE HAVE BEEN UPDATED THROUGH 2013-06

LIBERTY NATIONAL LIFE INSURANCE COMPANY
McKinney, Texas

POLICY FORMS LMSA10, LMSB10, LMSF10, LMSHDF10, LMSN10,
LDMSA10, LDMSB10, LDMSF10, LDMSHDF10 AND LDMSN10
INDIVIDUAL STANDARDIZED MEDICARE SUPPLEMENT PLAN A, B, F, HIGH DEDUCTIBLE F AND N

2014 RATE FILING

NATIONWIDE PROJECTIONS BASED ON EXPERIENCE THROUGH 6-2013

Experience Mo-Year	Rate Increase*	Actual Experience To Date Plus Future Projected			Actual Experience To Date Plus Future Projected		
		Rate Increase Requested Included	Rate Increase Requested Not Included	Rate Increase Requested Included	Rate Increase Requested Not Included	Rate Increase Requested Included	Rate Increase Requested Not Included
		Earned Premium	Incurred Claims	Loss Ratio	Earned Premium	Incurred Claims	Loss Ratio
12-2010		482,433	301,106	0.624	482,433	301,106	0.624
12-2011		2,281,704	1,471,481	0.645	2,281,704	1,471,481	0.645
12-2012		2,863,574	1,910,222	0.667	2,863,574	1,910,222	0.667
12-2013		<u>2,971,056</u>	<u>1,968,124</u>	<u>0.662</u>	<u>2,971,056</u>	<u>1,968,124</u>	<u>0.662</u>
Total through 2013		8,598,767	5,650,933	0.657	8,598,767	5,650,933	0.657
	on 1/1						
12-2014	5.4%	2,642,498	1,746,047	0.661	2,506,297	1,746,047	0.697
12-2015	5.2%	2,325,734	1,569,471	0.675	2,206,054	1,569,471	0.711
12-2016	5.2%	2,073,023	1,413,192	0.682	1,966,617	1,413,192	0.719
12-2017	5.2%	1,863,550	1,278,926	0.686	1,768,176	1,278,926	0.723
12-2018	5.2%	1,682,120	1,161,701	0.691	1,596,344	1,161,701	0.728
12-2019	5.2%	1,519,126	1,055,220	0.695	1,441,923	1,055,220	0.732
12-2020	5.2%	1,375,543	960,924	0.699	1,305,887	960,924	0.736
12-2021	5.2%	1,250,003	878,708	0.703	1,186,936	878,708	0.740
12-2022	5.2%	1,139,195	805,995	0.708	1,081,920	805,995	0.745
12-2023	5.2%	1,039,074	739,225	0.711	987,008	739,225	0.749
12-2024	5.2%	947,037	676,489	0.714	899,733	676,489	0.752
12-2025	5.2%	861,331	617,486	0.717	818,445	617,486	0.754
12-2026	5.2%	780,285	561,554	0.720	741,555	561,554	0.757
12-2027	5.2%	703,530	508,845	0.723	668,708	508,845	0.761
12-2028	5.2%	631,185	459,170	0.727	600,026	459,170	0.765
12-2029	5.2%	562,979	411,826	0.732	535,255	411,826	0.769
12-2030	5.2%	498,625	366,758	0.736	474,129	366,758	0.774
12-2031	5.2%	437,900	323,827	0.739	416,437	323,827	0.778
12-2032	5.2%	380,884	283,331	0.744	362,263	283,331	0.782
12-2033	5.2%	327,721	245,339	0.749	311,748	245,339	0.787
12-2034	5.2%	278,712	209,921	0.753	265,178	209,921	0.792
12-2035	5.2%	234,322	177,468	0.757	222,986	177,468	0.796
12-2036	5.2%	194,564	147,992	0.761	185,185	147,992	0.799
12-2037	5.2%	159,243	121,462	0.763	151,590	121,462	0.801
12-2038	5.2%	128,193	97,948	0.764	122,049	97,948	0.803
12-2039	5.2%	101,320	77,478	0.765	96,476	77,478	0.803
12-2040	5.2%	78,481	60,021	0.765	74,741	60,021	0.803
12-2041	5.2%	59,568	45,535	0.764	56,740	45,535	0.803
12-2042	5.2%	44,275	33,820	0.764	42,178	33,820	0.802
12-2043	5.2%	32,109	24,523	0.764	30,591	24,523	0.802
12-2044	5.2%	22,716	17,359	0.764	21,644	17,359	0.802
12-2045	5.2%	13,261	10,148	0.765	12,659	10,148	0.802
12-2046	5.2%	5,154	3,936	0.764	4,920	3,936	0.800
12-2047	5.2%	<u>1,388</u>	<u>1,061</u>	<u>0.764</u>	<u>1,329</u>	<u>1,061</u>	<u>0.798</u>
Total 2014+		24,394,651	17,092,704	0.701	23,163,726	17,092,704	0.738
GRAND TOTAL		32,993,418	22,743,637	0.689	31,762,493	22,743,637	0.716

This projection is not a guarantee of future experience. Experience is subject to significant fluctuations on small blocks of business.

Projected 2013 experience includes actual experience through 6-2013.

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

**POLICY FORMS LMSA10, LMSB10, LMSF10,
LMSHDF10, LMSN10, LDMSA10, LDMSB10,
LDMSF10, LDMSHDF10 AND LDMSN10**

**INDIVIDUAL STANDARDIZED MEDICARE SUPPLEMENT
PLAN A, B, F, HIGH DEDUCTIBLE F AND N**

2014 RATE FILING

**ACTUARIAL PARAMETERS FOR
NATIONWIDE PROJECTIONS BASED ON EXPERIENCE THROUGH 06-2013**

LAPSE RATES:

Retired:

<u>Duration</u>	<u>Lapse Rate</u>	<u>Duration</u>	<u>Lapse Rate</u>	<u>Duration</u>	<u>Lapse Rate</u>
1	0.307	13	0.127	25	0.203
2	0.223	14	0.128	26	0.214
3	0.189	15	0.130	27	0.230
4	0.164	16	0.138	28	0.241
5	0.161	17	0.142	29	0.262
6	0.149	18	0.145	30	0.270
7	0.149	19	0.153	31	0.290
8	0.136	20	0.158	32	0.305
9	0.140	21	0.168	33	0.330
10	0.125	22	0.174	34	0.342
11	0.125	23	0.184	35	1.000
12	0.125	24	0.194		

Disabled:

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

NATIONWIDE AVERAGE RATE INCREASES:⁽¹⁾

<u>Plan</u>	<u>Year 2014 Rate Increase Average Requested Nationwide</u>	<u>Years 2015+ Premium Trend⁽²⁾</u>
All Plans	5.4%	5% for Retired; 7% for Disabled; Average 5.2%

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

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

CLAIMS TREND:⁽³⁾

Price and Utilization Changes: 5% for Retired; 7% for Disabled; Average 5.2%
Selection by Duration

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

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

LIBERTY NATIONAL LIFE INSURANCE COMPANY

McKinney, Texas

Policy Form LMSA10

Individual Standardized Medicare Supplement Plan A

2014 Rate Filing Summary

DISTRICT OF COLUMBIA

Original Approval Dates LMSA10	November 20, 2009	
Proposed Percentage of Rate Change Attained Age	7.5 %	
Proposed Effective Date	January 1, 2014 or as soon thereafter as allowed and possible.	
Application of Rates	New Business and Renewals	
Number of Policies In-Force 2 nd Quarter 2013	<u>DISTRICT OF COLUMBIA</u>	<u>NATIONWIDE</u>
Issue Age	0	4
Attained Age	0	23
Under Age	0	0
Total	<hr style="width: 50%; margin: 0 auto;"/> 0	<hr style="width: 50%; margin: 0 auto;"/> 27

LIBERTY NATIONAL LIFE INSURANCE COMPANY
McKinney, Texas

POLICY FORM LMSA10
INDIVIDUAL STANDARDIZED MEDICARE SUPPLEMENT

2014 RATE FILING

DISTRICT OF COLUMBIA RATE HISTORY

STATE	District of Columbia
POLICY FORM NAME	LMSA06
ORIGINAL APPROVAL DATE	05-04-2009
REVISED POLICY FORM NAME (If Applicable)	LMSA10
APPROVAL DATE OF REVISED POLICY FORM	10-20-2009

Calendar Year	Date Approved	Amount Approved	Effective Date
2009	5-4-09	Original Form Approval with 2009 rates	
2010	10-20-09	2010 MIPPA Revised Policy Form Approved	06-01-2010
2010	4-20-10	5.3% Average	06-01-2010
2011	12-07-10	3.5% Average	02-01-2011
2012	02-14-12	3.0% Average	04-15-2012
2013	01-25-13	3.0% Average	04-01-2013

LIBERTY NATIONAL LIFE INSURANCE COMPANY
McKinney, Texas

Policy Form **LMSB10**
Individual Standardized Medicare Supplement Plan B

2014 Rate Filing Summary

DISTRICT OF COLUMBIA

Original Approval Dates LMSB10	November 20, 2009	
Proposed Percentage of Rate Change Attained Age	7.5 %	
Proposed Effective Date	January 1, 2014 or as soon thereafter as allowed and possible.	
Application of Rates	New Business and Renewals	
Number of Policies In-Force 2 nd Quarter 2013	<u>DISTRICT OF COLUMBIA</u>	<u>NATIONWIDE</u>
Issue Age	0	16
Attained Age	0	16
Under Age	0	0
Total	<hr/> 0	<hr/> 32

LIBERTY NATIONAL LIFE INSURANCE COMPANY
McKinney, Texas

POLICY FORM LMSB10
INDIVIDUAL STANDARDIZED MEDICARE SUPPLEMENT

2014 RATE FILING

DISTRICT OF COLUMBIA RATE HISTORY

STATE	District of Columb
POLICY FORM NAME	LMSB06
ORIGINAL APPROVAL DATE	05-04-2009
REVISED POLICY FORM NAME (If Applicable)	LMSB10
APPROVAL DATE OF REVISED POLICY FORM	10-20-2009

Calendar Year	Date Approved	Amount Approved	Effective Date
2009	5-4-09	Original Form Approval with 2009 rates	
2010	10-20-09	2010 MIPPA Revised Policy Form Approved	06-01-2010
2010	4-20-10	4.2% Average	06-01-2010
2011	12-07-10	3.5% Average	02-01-2011
2012	02-14-12	3.0% Average	04-15-2012
2013	01-25-13	3.0% Average	04-01-2013

LIBERTY NATIONAL LIFE INSURANCE COMPANY
McKinney, Texas

Policy Form **LMSB10**
Individual Standardized Medicare Supplement Plan B

2014 Rate Filing Summary

DISTRICT OF COLUMBIA

Original Approval Dates LMSB10	November 20, 2009	
Proposed Percentage of Rate Change Attained Age	7.5 %	
Proposed Effective Date	January 1, 2014 or as soon thereafter as allowed and possible.	
Application of Rates	New Business and Renewals	
Number of Policies In-Force 2 nd Quarter 2013	<u>DISTRICT OF COLUMBIA</u>	<u>NATIONWIDE</u>
Issue Age	0	16
Attained Age	0	16
Under Age	0	0
Total	<hr/> 0	<hr/> 32

LIBERTY NATIONAL LIFE INSURANCE COMPANY
McKinney, Texas

POLICY FORM LMSB10
INDIVIDUAL STANDARDIZED MEDICARE SUPPLEMENT

2014 RATE FILING

DISTRICT OF COLUMBIA RATE HISTORY

STATE	District of Columb
POLICY FORM NAME	LMSB06
ORIGINAL APPROVAL DATE	05-04-2009
REVISED POLICY FORM NAME (If Applicable)	LMSB10
APPROVAL DATE OF REVISED POLICY FORM	10-20-2009

Calendar Year	Date Approved	Amount Approved	Effective Date
2009	5-4-09	Original Form Approval with 2009 rates	
2010	10-20-09	2010 MIPPA Revised Policy Form Approved	06-01-2010
2010	4-20-10	4.2% Average	06-01-2010
2011	12-07-10	3.5% Average	02-01-2011
2012	02-14-12	3.0% Average	04-15-2012
2013	01-25-13	3.0% Average	04-01-2013

LIBERTY NATIONAL LIFE INSURANCE COMPANY
McKinney, Texas

Policy Form **LMSHDF10**
Individual Standardized Medicare Supplement High Deductible Plan F

2014 Rate Filing Summary

DISTRICT OF COLUMBIA

Original Approval Dates LMSHDF10	November 20, 2009	
Proposed Percentage of Rate Change Attained Age	0.0 %	
Proposed Effective Date	January 1, 2014 or as soon thereafter as allowed and possible.	
Application of Rates	New Business and Renewals	
Number of Policies In-Force 2 nd Quarter 2013	<u>DISTRICT OF COLUMBIA</u>	<u>NATIONWIDE</u>
Issue Age	0	420
Attained Age	0	958
Under Age	0	5
Total	<hr/> 0	<hr/> 1,383

LIBERTY NATIONAL LIFE INSURANCE COMPANY
McKinney, Texas

POLICY FORM LMSHDF10
INDIVIDUAL STANDARDIZED MEDICARE SUPPLEMENT

2014 RATE FILING

DISTRICT OF COLUMBIA RATE HISTORY

STATE	District of Columbia
POLICY FORM NAME	LMSHDF06
ORIGINAL APPROVAL DATE	05-04-2009
REVISED POLICY FORM NAME (If Applicable)	LMSHDF10
APPROVAL DATE OF REVISED POLICY FORM	10-20-2009

Calendar Year	Date Approved	Amount Approved	Effective Date
2009	5-4-09	Original Form Approval with 2009 rates	
2010	10-20-09	2010 MIPPA Revised Policy Form Approved	06-01-2010
2010	4-20-10	7.0% Average	06-01-2010
2011	12-07-10	- 25.0% Average (decrease)	02-01-2011
2012	02-14-12	- 5.0% Average (decrease)	04-15-2012
2013	01-25-13	- 10.0% Average (decrease)	04-01-2013

LIBERTY NATIONAL LIFE INSURANCE COMPANY
 McKinney, Texas

Policy Forms **LMSN10**
 Individual Standardized Medicare Supplement Plan N

2014 Rate Filing Summary

DISTRICT OF COLUMBIA

Original Approval Dates LMSN10	April 20, 2010	
Proposed Percentage of Rate Change Attained Age	7.5 %	
Proposed Effective Date	January 1, 2014 or as soon thereafter as allowed and possible.	
Application of Rates	New Business and Renewals	
Number of Policies In-Force 2 nd Quarter 2013	<u>DISTRICT OF COLUMBIA</u>	<u>NATIONWIDE</u>
Issue Age	0	44
Attained Age	7.5	157
Under Age	0	1
Total	<hr/> 0	<hr/> 202

LIBERTY NATIONAL LIFE INSURANCE COMPANY
McKinney, Texas

POLICY FORM LMSN10
INDIVIDUAL STANDARDIZED MEDICARE SUPPLEMENT

2014 RATE FILING

DISTRICT OF COLUMBIA RATE HISTORY

STATE	District of Columbia
POLICY FORM NAME	LMSN10
ORIGINAL APPROVAL DATE	03-16-2010
REVISED POLICY FORM NAME (If Applicable)	
APPROVAL DATE OF REVISED POLICY FORM	

Calendar Year	Date Approved	Amount Approved	Effective Date
2010	03-16-10	2010 MIPPA Policy Form and Rates Approved	06-01-10
2011	12-07-10	3.5% Average	02-01-2011
2012	02-14-12	0.0%	
2013	01-25-13	3.0% Average	04-01-2013

LIBERTY NATIONAL LIFE INSURANCE COMPANY
McKinney, Texas

Policy Form **LDMSB10**
Individual Standardized Medicare Supplement Plan B (For Disabled Lives)

2014 Rate Filing Summary

DISTRICT OF COLUMBIA

Original Approval Dates LDMSB10	November 20, 2009	
Proposed Percentage of Rate Change Under Age	9.0 %	
Proposed Effective Date	January 1, 2014 or as soon thereafter as allowed and possible.	
Application of Rates	New Business and Renewals	
Number of Policies In-Force 2 nd Quarter 2013	<u>DISTRICT OF COLUMBIA</u>	<u>NATIONWIDE</u>
Under Age	0	50
Total	<hr/> 0	<hr/> 50

LIBERTY NATIONAL LIFE INSURANCE COMPANY
McKinney, Texas

POLICY FORM LDMSB10
INDIVIDUAL STANDARDIZED MEDICARE SUPPLEMENT (FOR DISABLED LIVES)

2014 RATE FILING

DISTRICT OF COLUMBIA RATE HISTORY

STATE	District of Columbia
POLICY FORM NAME	LDMSB06
ORIGINAL APPROVAL DATE	05-04-2009
REVISED POLICY FORM NAME (If Applicable)	LDMSB10
APPROVAL DATE OF REVISED POLICY FORM	10-20-2009

Calendar Year	Date Approved	Amount Approved	Effective Date
2009	5-4-09	Original Form Approval with 2009 rates	
2010	10-20-09	2010 MIPPA Revised Policy Form Approved	06-01-2010
2010	4-20-10	+ 26.6%	06-01-2010
2011	12-07-10	3.5% Average	02-01-2011
2012	02-14-12	9.0% Average	04-15-2012
2013	01-25-13	9.0%	04-01-2013