

SERFF Tracking Number: MEAM-128112020 State: District of Columbia
 Filing Company: MedAmerica Insurance Company State Tracking Number:
 Company Tracking Number: TRS-336-DC RATE
 TOI: H131 Individual Health - Short Term Care Sub-TOI: H131.002 Nursing Home
 Product Name: TRS-336-DC RATE
 Project Name/Number: TRS-336-DC RATE/TRS-336-DC RATE

Rate/Rule Schedule

Schedule Item Status:	Document Name:	Affected Form Numbers: (Separated with commas)	Rate Action:	Rate Action Information:	Attachments
	Rate Sheet	TRS-336-DC	New		Rate Sheet_TRS336_DC_022012.pdf

MedAmerica Insurance Company
Policy Form TRS-336-DC
"Transitions" Short Term Recovery Care Policy
Annual Premium Rates - Single Insureds*
Non-Inflationary - \$10 Daily Benefit Amount

Issue Age	100 BP 20 Day EP	200 BP 20 Day EP	360 BP 20 Day EP	100 BP 30 Day EP	200 BP 30 Day EP	360 BP 30 Day EP	100 BP 60 Day EP	200 BP 60 Day EP	360 BP 60 Day EP
<50	19.38	23.84	30.02	19.08	23.45	29.52	18.28	22.24	27.77
50	20.18	25.26	32.31	19.83	24.82	31.74	18.93	23.45	29.75
51	20.97	26.68	34.60	20.59	26.19	33.96	19.59	24.65	31.74
52	21.77	28.10	36.89	21.35	27.56	36.19	20.24	25.86	33.72
53	22.62	29.53	39.15	22.16	28.95	38.39	20.96	27.10	35.72
54	23.47	30.97	41.42	22.98	30.34	40.60	21.68	28.35	37.71
55	24.31	32.40	43.68	23.79	31.74	42.81	22.40	29.60	39.70
56	25.16	33.84	45.95	24.61	33.13	45.02	23.12	30.84	41.69
57	26.01	35.27	48.21	25.42	34.52	47.22	23.85	32.09	43.68
58	27.32	37.51	51.76	26.69	36.69	50.68	24.97	34.04	46.81
59	28.63	39.74	55.30	27.95	38.86	54.15	26.09	35.99	49.95
60	29.94	41.98	58.85	29.21	41.03	57.61	27.21	37.94	53.08
61	31.24	44.21	62.40	30.47	43.20	61.07	28.33	39.89	56.21
62	32.55	46.44	65.95	31.73	45.37	64.53	29.45	41.84	59.34
63	34.74	50.22	71.99	33.84	49.05	70.43	31.34	45.15	64.70
64	36.93	53.99	78.03	35.96	52.72	76.34	33.23	48.46	70.05
65	39.12	57.76	84.06	38.08	56.39	82.24	35.12	51.77	75.41
66	41.31	61.53	90.10	40.19	60.06	88.14	37.01	55.07	80.77
67	43.51	65.30	96.14	42.31	63.74	94.05	38.90	58.38	86.12
68	46.78	72.34	108.58	45.42	70.55	106.17	41.48	64.34	96.96
69	50.06	79.38	121.02	48.53	77.36	118.30	44.06	70.30	107.79
70	53.34	86.42	133.46	51.64	84.18	130.42	46.64	76.26	118.62
71	56.62	93.46	145.89	54.75	90.99	142.54	49.22	82.22	129.45
72	59.89	100.50	158.33	57.87	97.80	154.67	51.79	88.18	140.28
73	66.15	111.38	175.96	63.95	108.45	171.96	57.28	97.84	156.05
74	72.41	122.27	193.60	70.04	119.10	189.25	62.76	107.49	171.81
75	78.67	133.15	211.23	76.13	129.74	206.54	68.24	117.15	187.58
76	84.93	144.04	228.86	82.22	140.39	223.83	73.72	126.81	203.34
77	91.19	154.92	246.49	88.31	151.04	241.12	79.20	136.47	219.11
78	99.98	169.98	270.25	96.83	165.71	264.30	86.78	149.60	239.95
79	108.77	185.03	294.01	105.34	180.37	287.48	94.37	162.74	260.78
80	117.57	200.09	317.76	113.86	195.03	310.66	101.95	175.88	281.62
81	126.36	215.14	341.52	122.38	209.70	333.85	109.54	189.02	302.46
82	135.16	230.20	365.28	130.90	224.36	357.03	117.12	202.16	323.29
83	145.93	248.65	394.80	141.36	242.38	385.95	126.49	218.41	349.59
84	156.71	267.10	424.32	151.83	260.40	414.86	135.87	234.67	375.88
85	167.49	285.55	453.85	162.29	278.41	443.78	145.24	250.93	402.18

* Married insureds receive a 10% discount.

Modal factors: .515 semi-annual
 .260 quarterly
 .090 monthly

MedAmerica Insurance Company
Policy Form TRS-336-DC with Rider TR-SBIR-DC
"Transitions" Short Term Recovery Care Policy
Annual Premium Rates - Single Insureds*
5% Simple Inflation - \$10 Daily Benefit Amount

Issue Age	100 BP 20 Day EP	200 BP 20 Day EP	360 BP 20 Day EP	100 BP 30 Day EP	200 BP 30 Day EP	360 BP 30 Day EP	100 BP 60 Day EP	200 BP 60 Day EP	360 BP 60 Day EP
<50	28.60	40.04	56.33	27.93	39.17	55.18	26.07	36.31	50.97
50	30.14	42.78	60.80	29.40	41.83	59.54	27.37	38.68	54.90
51	31.68	45.53	65.27	30.88	44.49	63.90	28.66	41.06	58.84
52	33.22	48.27	69.74	32.35	47.15	68.26	29.95	43.43	62.77
53	34.65	50.76	73.76	33.74	49.57	72.19	31.19	45.62	66.35
54	36.09	53.24	77.78	35.12	52.00	76.13	32.43	47.81	69.94
55	37.52	55.73	81.81	36.50	54.42	80.06	33.66	50.00	73.52
56	38.95	58.22	85.83	37.89	56.84	84.00	34.90	52.18	77.10
57	40.39	60.71	89.85	39.27	59.26	87.93	36.14	54.37	80.68
58	42.40	64.21	95.54	41.22	62.68	93.50	37.88	57.47	85.76
59	44.41	67.71	101.23	43.17	66.10	99.07	39.63	60.56	90.84
60	46.42	71.21	106.92	45.11	69.52	104.64	41.37	63.66	95.92
61	48.43	74.72	112.60	47.06	72.93	110.22	43.11	66.75	101.00
62	50.44	78.22	118.29	49.00	76.35	115.79	44.86	69.84	106.08
63	53.55	83.64	127.15	52.01	81.65	124.47	47.57	74.66	114.02
64	56.65	89.06	136.00	55.02	86.94	133.15	50.28	79.47	121.96
65	59.75	94.49	144.86	58.03	92.24	141.84	52.98	84.28	129.90
66	62.86	99.91	153.72	61.04	97.54	150.52	55.69	89.09	137.84
67	65.96	105.33	162.57	64.05	102.84	159.20	58.40	93.91	145.79
68	69.92	113.70	177.47	67.84	110.98	173.77	61.62	101.12	158.94
69	73.88	122.07	192.36	71.63	119.12	188.34	64.84	108.34	172.09
70	77.84	130.44	207.25	75.42	127.26	202.91	68.05	115.55	185.24
71	81.80	138.81	222.14	79.21	135.40	217.48	71.27	122.77	198.39
72	85.76	147.18	237.04	83.01	143.54	232.05	74.49	129.99	211.54
73	92.67	159.28	256.93	89.74	155.40	251.60	80.59	140.81	229.47
74	99.58	171.37	276.81	96.48	167.26	271.14	86.69	151.64	247.40
75	106.48	183.47	296.70	103.21	179.12	290.69	92.79	162.46	265.33
76	113.39	195.57	316.59	109.95	190.99	310.24	98.89	173.29	283.26
77	120.30	207.67	336.48	116.68	202.85	329.78	104.99	184.11	301.19
78	129.17	222.89	360.59	125.28	217.68	353.31	112.66	197.42	322.36
79	138.04	238.11	384.70	133.88	232.51	376.85	120.33	210.72	343.53
80	146.92	253.33	408.81	142.48	247.35	400.38	127.99	224.02	364.70
81	155.79	268.55	432.91	151.08	262.18	423.91	135.66	237.32	385.87
82	164.66	283.77	457.02	159.68	277.01	447.44	143.33	250.63	407.03
83	174.97	301.47	485.64	169.71	294.33	475.52	152.35	266.32	432.69
84	185.28	319.18	514.26	179.73	311.64	503.60	161.36	282.01	458.34
85	195.59	336.89	542.88	189.76	328.96	531.68	170.38	297.70	484.00

* Married insureds receive a 10% discount.

Modal factors: .515 semi-annual
 .260 quarterly
 .090 monthly