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# CSG Actuarial

## Competitive Intelligence Guide:

Individual Critical Illness Insurance

1st Quarter 2013

Prepared January 2013 by:

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## INTRODUCTION

This Competitive Intelligence Guide features a comprehensive, objective overview of the Critical Illness Insurance marketplace for the first quarter of 2013. This Guide provides a snapshot of what's happening—with major companies actively marketing Critical Illness Insurance. This Guide features information for Group, Individual and Individual Worksite plans or a subset thereof. The Guide features:

- Company information
- Product-Benefit analysis
- Abbreviated Underwriting by Company
- Underwriting Factors
- Medical Condition definitions
- Premium rate comparisons

### Data Use and Benefits

Clients use the completely self-contained data to:

1. Shorten product development timelines
2. Identify competitive advantages/disadvantages
3. Improve and/or identify marketing focus

### Notes

1. Information was obtained from public sources.
2. CSG does not guarantee or warrant the accuracy of the information provided in this guide. The Critical Illness Guide is updated quarterly.

### About CSG Actuarial

CSG is an actuarial consulting firm located in Omaha, Nebraska specializing in the individual life and health insurance markets. Contact us if you have questions about this guide or suggestions on how to improve and/or enhance the content.

## COMPANY OVERVIEWS

**Exhibit A** provides information on each company represented in CSG’s Critical Illness competitive database. This includes contact information, AM Best ratings, and corporate structure. The user may find this information beneficial in evaluating the quality of the company relative to the specific product and rate information provided in the other sections of this report.

This information was obtained from company websites and other public sources and may have changed since this report was compiled.

INSURANCE COMPANY	CONTACT INFORMATION	TYPE OF COMPANY	HOLDING COMPANY	FINANCIALS - AM BEST RATING	FINANCIALS - OUTLOOK
Company A					

## PRODUCT BENEFITS COMPARISON

The attached **Exhibit B** provides information on each company's Critical Illness product represented in CSG's Critical Illness competitive database. Information regarding a product's benefit design, available riders, rating characteristics, benefit triggers, plan termination and covered conditions are all included. **Exhibit B** can help users compare each company's product with others in the market as well as identify competitive advantages and disadvantages of their own product line.

The information provided in **Exhibit B** is a summary of CSG Actuarial's Critical Illness database. The information does not provide state variations. If your needs are more extensive, please contact CSG Actuarial, LLC to request a customized competitive intelligence report.

This information was obtained from public sources and may have changed since this report was compiled.

Exhibit B-Benefits:  
Individual Critical Illness

Product Structure and Benefits	Company A
Form	CI-007; Riders CIR 016, A-R 130, CIR 012, CIR 020
Issue Age	18-64
Benefit Type	Lump sum on first-ever diagnosis
Minimum/Maximum Amounts	\$50,000 - \$500,000
Policy Fee	\$50
Elimination or Waiting Periods	Immediate, reduced benefit for cancer 90 days
Pre-Existing Conditions	Yes
Wellness Benefits	N/A
Additional Occurrence Benefit	Yes - benefit paid to max in each category
Recurrent Benefit	N/A
Return of Premium Benefit	Yes - death benefit, 100%, other than covered condition
Return of Premium Rider	N/A
Waiver of Premium Rider	Yes - disability
Other Benefits or Riders	Accidental Death Benefit
Dependent Coverage	Spouse and/or Child Rider
Benefit Reductions	If partial benefit paid; 50% at 65 or 5 years after issue
Plan Termination	Payment of full benefit
Rates	
Rate Structure (see rate sheets)	Age, Amount, Band (1 and 2)
Gender	Yes
Tobacco/Non-Tobacco Rates	Yes
Covered Conditions	
	<b>Category 1</b> <b>100%</b> Invasive Cancer
	<b>25%</b> Cancer in Situ (max 25k, once per lifetime)
	<b>Category 2</b> <b>100%</b> Heart Attack Major Organ Transplant (Heart of Combo including Heart surgerv) Stroke
	<b>25%</b> Coronary Bypass Surgery (max 25k, once per lifetime) Angioplasty (max 25k, once per lifetime)
	<b>Category 3</b> <b>100%</b> Advanced Alzheimer's Disease Accidental Loss of Speech Benign Brain Tumor Blindness Coma - not a result of Stroke Deafness End-Stage Renal Failure Loss of Limbs Major Burns Major Organ Transplant - other than heart Motor Neuron Disease Occupational HIV Infection Paralysis - not as a result of Stroke

## UNDERWRITING CRITERIA COMPARISONS

**Exhibit C** provides a high level overview of underwriting criteria comparison for each company represented in CSG's Critical Illness Competitive Database. The exhibit is composed of both Condition Summaries by medical condition and company and an Underwriting Factors chart. This information was compiled from each company's Critical Illness application and agent guide filed with departments of insurance.

**The Condition Summary C-1 (not included in sample) and C-2** details application questions based on the number of carriers underwriting for a specific condition contained within the Guide. The conditions represented are the most frequent conditions underwritten for this product line. Additionally, the subsequent pages of the exhibit detail whether or not specific companies underwrite for the top conditions by referenced.

The application question may vary by company. Tables should be viewed with caution and used only as a guide to the types of conditions each company uses in evaluating Critical Illness applicants. Additionally, underwriting tools like paramed exams, blood tests and interviews may be employed to further expand upon application questions and underwriting criteria.

**The Underwriting Factors (C-3)** exhibit details additional underwriting tools that companies use to underwrite applicants. It displays both Simplified and Fully Underwritten applicant criteria by company with all tools employed in addition to the standard application by company, on a per policy basis.



Condition	Company A
Stroke	Yes
Any Disease or Disorder of the Kidney	Yes
AIDS/AIDS Related Complex or HIV	Yes
Internal Cancer	Yes
Tumor/Cyst/Lumps	Yes
Family History of Health Risks	Yes
Alcohol or Drug Abuse	Yes
Height/Weight	Yes
Transient Ischemic Attack (TIA)	Yes
Blood Pressure Requirements	Yes
Tobacco Use	Yes
Have Health Insurance/Replacing current policy	Yes
Any Heart Abnormality/ Condition/ Disorder	Yes
Heart Attack	No
Diabetes	Yes
Hepatitis	Yes
Any Mental, Psychiatric or Emotional Disorder	Yes
Paralysis	Yes
Any Disease/Disorder of the Lungs or Respiratory System	Yes
Any Circulatory Disorder	Yes
Heart / Coronary / Carotid Artery Disease / Angina	No
Lupus or Other Bone or Connective Tissue Disorder	Yes
Melanoma	Yes
Multiple or Amyotrophic Lateral Sclerosis	Yes
Financial Guidelines	Yes
Surgery, Medical Tests, treatment, or therapy not performed	Yes

Exhibit C-3 Individual Critical Illness:  
Underwriting Factors

Company A	
Underwriting Category	Factors
Simplified Underwriting	<ul style="list-style-type: none"><li>Non-Medical-under age 45 with a benefit amount below \$99,999</li><li>Financial Guidelines – seven times earned income up to a maximum of \$250,000 or six times earned income up to a maximum of \$500,000</li><li>Application</li><li>Build Guidelines</li><li>Family Health History – first degree relatives, with listed conditions</li><li>Telephone Interview</li></ul>
	<p><u>All Ages/All Amounts</u></p> <ul style="list-style-type: none"><li>Application</li><li>Telephone Interview</li><li>Financial Guidelines – seven times earned income up to a maximum of \$250,000 or six times earned income up to a maximum of \$500,000</li><li>Build Guidelines</li><li>Family Health History – first degree relatives, with listed conditions</li></ul> <p><u>Face Amount (\$50,000-\$99,000)</u></p> <p>Ages 46-50</p> <ul style="list-style-type: none"><li>Paramedical</li><li>Urinalysis</li></ul> <p>Ages 51-65</p> <ul style="list-style-type: none"><li>Paramedical</li><li>Urinalysis</li><li>Full Blood Profile with PSA</li></ul> <p><u>Face Amount (\$100,000-\$250,000)</u></p> <div><p>Ages 18-35</p><ul style="list-style-type: none"><li>Non-Medical</li><li>Urinalysis</li></ul><p>Ages 41-45</p><ul style="list-style-type: none"><li>Paramedical</li><li>Urinalysis</li><li>Full Blood Profile</li></ul><p>Ages 51-65</p><ul style="list-style-type: none"><li>Paramedical</li><li>Urinalysis</li><li>Full Blood Profile with PSA</li><li>Electrocardiogram</li></ul><p><u>Face Amount \$250,001-\$500,000</u></p><div><p>Ages 18-35</p><ul style="list-style-type: none"><li>Paramedical</li><li>Urinalysis</li><li>Full Blood Profile</li></ul><p>Ages 41-45</p><ul style="list-style-type: none"><li>Paramedical</li><li>Urinalysis</li><li>Full Blood Profile</li><li>Electrocardiogram</li></ul><p>Ages 51-65</p><ul style="list-style-type: none"><li>Paramedical</li><li>Urinalysis</li><li>Full Blood Profile with PSA</li><li>Electrocardiogram</li></ul></div></div> <div><p>Ages 36-40</p><ul style="list-style-type: none"><li>Paramedical</li><li>Urinalysis</li></ul><p>Ages 46-50</p><ul style="list-style-type: none"><li>Paramedical</li><li>Urinalysis</li><li>Full Blood Profile with PSA</li></ul></div>



## MEDICAL DEFINITIONS

**Exhibit D** features medical definitions by carrier. Carriers provide different medical definitions based on the conditions they insure with their critical illness product. Knowing how those definitions vary provides insight into the eligibility of the conditions in conjunction with the benefits offered.

For example, one company may define a heart attack as an

- "Acute Myocardial Infarction result in the death of a portion of the myocardium due to blockage of one or more coronary arteries and result in the loss of the normal functions of the heart."

A different company may describe the same condition as

- "The death of a portion of the heart muscle, due to inadequate blood supply."

These definitions influence covered conditions on a per carrier basis.

Exhibit D is presented in the following sections:

Exhibit D-1:	Heart Attack, End Stage Renal Failure, Multiple/Amyotrophic Lateral Sclerosis, Coma	Page
Exhibit D-2:	Alzheimer's Disease	
Exhibit D-3:	Stroke	
Exhibit D-4:	End State Renal Failure, Major Burns, Brain Tumor, Loss of Limbs	
Exhibit D-5:	Major Organ Transplant	
Exhibit D-6:	Invasive Cancer, Loss of Independent Living	
Exhibit D-7:	Bypass and Heart Valve Surgery, Occupational HIV	
Exhibit D-8:	Angioplasty, Multiple Sclerosis, Amyotrophic Lateral Sclerosis	
Exhibit D-9:	Deafness, Blindness, Loss of Speech	
Exhibit D-10:	Cancer- Carcinoma in Situ	

Each Exhibit displays the medical condition, and the definition associated with each carrier's documentation.

The information provided in **Exhibit D** is a summary of CSG Actuarial's Critical Illness Medical Definition database. If your needs are more extensive than the included tables, please contact CSG Actuarial, LLC to request a customized competitive intelligence report.

This information was obtained from public sources and may have changed since this report was compiled.

Exhibit D-Medical Definitions Individual Critical Illness:  
Heart Attack

Company A	<p>An Acute Myocardial Infarction resulting in the death of a portion of the heart muscle (myocardium) due to a blockage of one or more coronary arteries and resulting in the loss of the normal function of the heart. The diagnosis must be made by a legally qualified physician board certified in cardiology and based on both:</p> <ul style="list-style-type: none"><li>• New clinical presentation and electrocardiographic changes consistent with an evolving heart attack; and</li><li>• Serial measurement of cardiac biomarkers showing a pattern and to a level consistent with a diagnosis of heart attack.</li></ul> <p>Not covered: Established (old) Myocardial Infarction.</p>
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Exhibit D-Medical Definitions Individual Critical Illness:  
Alzheimer's Disease

Company A	<p>A progressive degenerative disease of the brain. In order to meet the definition of Advanced Alzheimer's Disease, the diagnosis must be supported by medical evidence that the Insured exhibits the loss of intellectual capacity resulting in impairment of memory and judgment. This impairment results in a significant reduction in mental and social functioning, such that the Insured requires permanent daily personal supervision and is unable to perform independently three or more of the following activities of daily living: transferring (moving in or out of a bed or chair), dressing, bathing, feeding, toileting, and continence. In order for Advanced Alzheimer's Disease to be covered under this Policy, the legally qualified physician making the diagnosis of Advanced Alzheimer's Disease must be a board certified neurologist.</p> <p>Not Covered: No other dementing organic brain disorders or psychiatric illnesses shall meet the definition of Alzheimer's Disease, nor will they be considered a critical illness covered condition.</p>
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Exhibit D-Medical Definitions Individual Critical Illness:  
Stroke

Company A	<p>Any acute cerebrovascular accident producing neurological impairment and resulting in paralysis or other measurable objective neurological deficit persisting for at least 96 hours and expected to be permanent.</p> <p>Not covered: TIAs (transient ischemic attacks), head injuries, chronic cerebrovascular insufficiency (restricted blood flow to the cerebrum), and reversible ischemic neurological deficits.</p>
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Exhibit D-Medical Definitions Individual Critical Illness:  
Major Organ Transplant

Company A	<p>The clinical evidence of major organ(s) failure which requires the malfunctioning organ(s) or tissue of the Insured to be replaced with an organ(s) or tissue from a suitable human donor. The Insured must be registered by the United Network of Organ Sharing (UNOS).</p> <ul style="list-style-type: none"><li>• Entire Heart</li><li>• Lung</li><li>• Liver</li><li>• Pancreas-Kidney</li><li>• Small intestine</li><li>• Pancreas</li><li>• Kidney</li><li>• Bone marrow</li></ul> <p>Not covered: Organ donor or organ not listed.</p>
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Exhibit D-Medical Definitions Individual Critical Illness:  
Invasive Cancer, Loss of Independent Living

Invasive Cancer

Company A	<p>A malignant tumor that demonstrates uncontrolled growth with the spread of malignant cells beyond the tumor's original site and the invasion of tissue. Leukemia and lymphoma are considered invasive cancer.</p> <p>The following are not considered invasive cancer:</p> <ul style="list-style-type: none"><li>• pre-malignant lesions (such as intraepithelial neoplasia)</li><li>• benign tumors or polyps</li><li>• early prostate cancer diagnosed as T1N0M0 or equivalent staging</li><li>• Cancer in situ</li><li>• any skin cancer (other than invasive malignant melanoma in the dermis or deeper or skin malignancies that have become metastatic).</li></ul> <p>Invasive cancer must be diagnosed pursuant to a pathological or clinical diagnosis</p>
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Loss of Independent Living

Company A	<p>If an insured person both initially incurred and was diagnosed with permanent loss of two or more Activities of Daily Living after the waiting period, and if we receive proof that such permanent loss continues after the end of the 180- day elimination period, we will pay any remaining amount of the critical illness maximum benefit percentage. There is no coverage for loss of independent living if the insured person initially incurred or was diagnosed with permanent loss of two or more Activities of Daily Living before the end of the waiting period.</p> <p>Diagnostic Requirements for Loss of Independent Living Loss of two or more Activities of Daily Living must be diagnosed by a physician and expected by such physician to be permanent. An insured person must also be under the regular and appropriate care of a physician.</p>
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End-Stage Renal Failure

Company A	The chronic and irreversible failure of both kidneys requiring periodic and ongoing dialysis.
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Major Burns

Company A	Third degree burns covering at least 20 percent of the body surface.
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Brain Tumor

Company A	The diagnosis, by a neurologist, of a non-malignant tumor within the substance of the brain or meninges resulting in permanent deficit to the neurological system. Permanent deficit is defined as a continuous residual neurological deficit as a result of the tumor, as evidenced by physical examination
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Loss of Limbs

Company A	The diagnosis, by a legally qualified physician board-certified as medically appropriate for this condition, of a total and irreversible severance of two or more limbs from above the wrist or ankle joint as the result of an accident or medically required amputation.
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Exhibit D-Medical Definitions Individual Critical Illness:  
Bypass and Heart Valve Surgery, Occupational HIV

Bypass Surgery

Company A	<p>The actual undergoing of coronary artery bypass surgery using either a saphenous vein or internal mammary artery graft for the treatment of coronary heart disease deemed medically necessary to correct a narrowing or blockage of one or more coronary arteries.</p> <p>Not covered: Other surgical or non-surgical techniques such as laser relief or other intra-arterial procedures.</p>
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Heart Valve Surgery

Company A	The actual undergoing of open heart surgery to replace or repair one or more valves. The surgery must be deemed medically necessary and performed by a cardiologist or cardiovascular surgeon.
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Occupational HIV

Company A	<p>Infection with the Human Immunodeficiency Virus (HIV) resulting from an accidental injury which occurred in the United States after the issue date of the policy, and which exposed the Insured to HIV contaminated blood or bodily fluids during the course of the duties of the Insured’s normal occupation.</p> <p>Payment under this condition requires satisfaction of ALL of the following:</p> <ol style="list-style-type: none"><li>1. The accidental injury must be reported to the insurer within 14 days of the accidental injury.</li><li>2. An HIV test must be taken within 14 days of the accidental injury and the result must be negative.</li><li>3. An HIV test must be taken between 90 days and 180 days after the accidental injury and the result must be positive.</li><li>4. The accidental injury must have been reported, investigated and documented in accordance with workplace legislation and regulations.</li></ol> <p>The following are excluded:</p> <ul style="list-style-type: none"><li>• HIV infection acquired via sexual transmission</li><li>• HIV infection acquired via IV drug use</li><li>• HIV infection determined not to be the result of an accident.</li></ul> <p>The claimant must prove that the infection was a direct result of the accidental exposure by taking two HIV tests. It takes a certain amount of time before the presence of the HIV virus can be detected in the bloodstream. The first test will prove the insured was not infected prior to the injury, and the second test will confirm that the insured has since become infected with the virus.</p>
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Exhibit D-Medical Definitions Individual Critical Illness:  
Angioplasty, Multiple Sclerosis, Amyotrophic Lateral Sclerosis

Angioplasty

Company A	<p>The actual undergoing of a percutaneous transluminal angioplasty deemed medically necessary to correct a narrowing or blockage of one or more coronary arteries. A legally qualified physician board certified in cardiology must perform the procedure.</p> <p>Not covered: Other surgical or non-surgical techniques such as laser relief or other intra-arterial procedures.</p>
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Multiple Sclerosis

Company A	<p>Multiple Sclerosis (MS) means the occurrence of at least two episodes of well-defined neurological abnormalities, with objective evidence of lesions at more than one site within the central nervous system. In order for Multiple Sclerosis to be covered under this policy/certificate, a Legally Qualified Physician who is a board certified neurologist must make a definitive Diagnosis of Multiple Sclerosis, supported by modern imaging and/or investigative techniques.</p> <p>Practical Interpretation MS is a condition of the nervous system that is commonly progressive and results in multiple and varied nervous symptoms. These may be intermittent and follow a course that alternates from very active to non-existent. A neurologist’s diagnosis is based upon abnormal symptoms and physical exam findings. Modern X-ray imaging may also be used to confirm the diagnostic impression.</p> <p>Neurological symptoms include:</p> <ul style="list-style-type: none"><li>● numbness and tingling in the hand or arm,</li><li>● loss of vision in one eye,</li><li>● weakness in the leg with difficulty walking, and</li><li>● double vision.</li></ul> <p>Critical Illness Insurance Plan Pays for Multiple Sclerosis when the insured has:</p> <ul style="list-style-type: none"><li>● at least two episodes of abnormal neurological symptoms, and</li><li>● lesions in more than one place in the central nervous system.</li></ul>
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Amyotrophic Lateral Sclerosis

Company A	<p>The unequivocal diagnosis, by a neurologist, of one of the following motor neuron diseases: amyotrophic lateral sclerosis (A.L.S. or Lou Gehrig’s Disease), primary lateral sclerosis, progressive spinal muscular atrophy, progressive bulbar palsy, or pseudo bulbar palsy.</p> <p>Motor Neuron Disease is a progressive disease involving degeneration of the motor nerves causing progressive muscle weakness and in some cases, reduced ability to speak and swallow.</p>
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Exhibit D-Medical Definitions Individual Critical Illness:  
Deafness, Blindness, Loss of Speech

Company A	<p>Deafness Diagnosis by a physician of the total and irreversible loss of hearing in both ears, with an auditory threshold of 90 decibels or greater. Total and permanent deafness is covered regardless of cause. The amount of hearing required under this definition can easily be measured and confirmed by professional testing.</p> <p>Speech The diagnosis, by a legally qualified physician board-certified as medically appropriate for this condition, of the total, permanent and irreversible loss of your ability to speak as a result of an accidental injury.</p> <p>Blindness Diagnosis by an ophthalmologist of a total and irreversible loss of vision in both eyes. The corrected visual acuity must be 20/200 or less in each eye or field of vision must be less than 20 degrees in both eyes.</p>
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Exhibit D-Medical Definitions Individual Critical Illness:  
Cancer-Carcinoma in Situ

Company A	<p>A diagnosis of cancer wherein the tumor cells still lie within the tissue of origin without having invaded neighboring tissue. Cancer in situ includes early prostrate cancer diagnosed as T1N0M0 or equivalent staging and melanoma not invading the dermis.</p> <p>The following are not considered cancer in situ:</p> <ul style="list-style-type: none"><li>● Other skin malignancies</li><li>● Pre-malignant lesions</li><li>● Benign tumors or polyps</li></ul>
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## PREMIUM RATE COMPARISONS

**Exhibits E and F** provides premium rate comparisons for each company represented in CSG's Critical Illness Competitive Database. Each table displays the premiums for each company as well as a normalized comparison by benefit amounts ranging from \$5,000 to \$50,000. Below is a summary of the tables:

Exhibit E-1:

Exhibit E-2:

Exhibit E-3:

Exhibit E-4:

Exhibit E-5:

Exhibit E-6:

Exhibit E-7:

Exhibit E-8:

Exhibit F:       Rate Comparison Chart \$5,000-\$50,000

The tables represent the all available rates in CSG's Critical Illness Competitive Database.

The information provided in **Exhibits E and F** is a summary of CSG Actuarial's Critical Illness Premium Rate database. If your needs are more extensive than the included tables, please contact CSG Actuarial, LLC to request a customized competitive intelligence report.

This information was obtained from public sources and may have changed since this report was compiled.

# Exhibit E-Rates Individual Critical Illness: Company A

Full Underwriting (CI-007, CIR 012)

Annual Premiums (Per \$1,000 of Maximum Benefit Amount)

Issue Age	Male				Female			
	Non-Tobacco		Tobacco		Non-Tobacco		Tobacco	
	Band 1	Band 2	Band 1	Band 2	Band 1	Band 2	Band 1	Band 2
18	4.69	4.14	5.38	4.69	3.86	3.45	4.42	4.00
19	4.69	4.14	5.38	4.69	3.86	3.45	4.42	4.00
20	4.69	4.14	5.38	4.69	3.86	3.45	4.42	4.00
21	4.97	4.28	5.66	4.97	4.00	3.59	4.69	4.14
22	5.11	4.55	5.93	5.24	4.14	3.59	4.97	4.42
23	5.38	4.69	6.35	5.52	4.28	3.73	5.24	4.55
24	5.52	4.83	6.62	5.80	4.42	3.86	5.52	4.83
25	5.80	5.11	7.04	6.21	4.55	4.00	5.80	5.11
26	5.93	5.24	7.31	6.49	4.83	4.14	6.07	5.38
27	6.21	5.38	7.73	6.90	4.97	4.42	6.35	5.66
28	6.35	5.66	8.14	7.18	5.11	4.55	6.76	5.93
29	6.62	5.80	8.69	7.59	5.38	4.69	7.04	6.21
30	6.90	6.07	9.11	8.00	5.52	4.83	7.45	6.62
31	7.04	6.21	9.52	8.42	5.80	5.11	7.80	6.90
32	7.31	6.49	10.07	8.83	5.93	5.24	8.28	7.31
33	7.59	6.62	10.63	9.38	6.21	5.38	8.69	7.73
34	7.87	6.90	11.18	9.80	6.35	5.66	9.25	8.14
35	8.00	7.04	11.73	10.35	6.62	5.80	9.66	8.56
36	8.42	7.45	12.70	11.18	6.90	6.07	10.49	9.25
37	8.83	7.73	13.80	12.14	7.31	6.35	11.32	9.94
38	9.25	8.14	14.90	13.11	7.59	6.76	12.14	10.63
39	9.66	8.56	16.15	14.21	8.00	7.04	12.97	11.45
40	10.21	8.97	17.39	15.32	8.28	7.31	13.94	12.28
41	10.63	9.38	18.63	16.42	8.69	7.73	14.90	13.11
42	11.18	9.80	20.01	17.66	9.11	8.00	14.95	13.94
43	11.59	10.21	21.53	18.91	9.52	8.42	16.97	14.90
44	12.14	10.63	23.05	20.29	9.90	8.69	18.08	15.87
45	12.70	11.18	24.56	21.67	10.35	9.11	19.18	16.84
46	13.25	11.59	26.08	22.91	10.63	9.38	20.01	17.66
47	13.94	12.14	27.74	24.43	11.04	9.66	20.98	18.32
48	14.49	12.83	29.39	25.81	11.32	9.94	21.80	19.18
49	15.18	13.39	31.05	27.32	11.59	10.21	22.77	20.01
50	15.73	13.94	32.71	28.84	12.01	10.49	23.60	20.70
51	16.42	14.49	34.50	30.36	12.28	10.76	24.43	21.53
52	17.11	15.04	36.16	31.88	12.56	11.04	25.39	22.22
53	17.66	15.59	37.95	33.40	12.83	11.18	26.22	23.05
54	18.22	16.15	39.61	34.91	12.97	11.45	27.05	23.74
55	18.91	16.56	41.26	36.43	13.25	11.59	27.74	24.43
56	19.73	17.39	42.78	37.54	13.66	12.01	28.57	25.12
57	20.56	18.08	44.16	38.78	13.94	12.28	29.39	25.94
58	21.39	18.91	45.54	40.02	14.35	12.70	30.22	26.63
59	22.36	19.60	46.92	41.26	14.77	12.97	31.05	27.32
60	23.18	20.42	48.30	42.50	15.18	13.39	31.88	28.01
61	24.01	21.11	49.68	43.61	15.59	13.66	32.71	28.67
62	24.84	21.94	51.06	44.85	15.87	14.08	33.40	29.39
63	25.67	22.63	52.44	46.09	16.28	14.35	34.22	30.22
64	26.63	23.46	53.82	47.33	16.70	14.63	35.05	30.91

Band 1: Initial Maximum Benefit Amount of \$50,000 to \$99,999  
 Band 2: Initial Maximum Benefit Amount of \$100,000 to \$500,000

Policy Fee: \$50.00

Mode	Factor
Monthly	0.088
Quarterly	0.264
Semi-Annual	0.51

Data found from websites or other sources of public data. CSG does not guarantee the accuracy of the report. Changes may have been made that are not shown.

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**Exhibit E-Rates Individual Critical Illness:  
Company A**

Accidental Death Benefit Rider (A-R130)	
Issue Age	Rate Per \$1,000
18	1.21
19	1.20
20	1.19
21	1.15
22	1.11
23	1.07
24	1.03
25	1.00
26	0.96
27	0.93
28	0.90
29	0.88
30	0.85
31	0.82
32	0.80
33	0.81
34	0.82
35	0.82
36	0.83
37	0.84
38	0.85
39	0.87
40	0.88
41	0.89
42	0.90
43	0.92
44	0.93
45	0.95
46	0.96
47	0.98
48	0.99
49	1.01
50	1.03
51	1.05
52	1.07
53	1.09
54	1.12
55	1.14
56	1.17
57	1.20
58	1.23
59	1.26

Child Benefit Rider (CIR 020)	
Issue Amount	Annual Premium
\$5,000	\$14.00
\$10,000.00	\$28.00

Waiver of Premium Rider (CIR 016)		
Issue Age	Male	Female
18	4%	5%
19	4%	5%
20	4%	5%
21	4%	5%
22	4%	5%
23	4%	5%
24	4%	5%
25	4%	5%
26	5%	6%
27	5%	6%
28	5%	6%
29	5%	6%
30	5%	6%
31	5%	6%
32	5%	6%
33	5%	6%
34	5%	6%
35	5%	6%
36	6%	7%
37	6%	7%
38	6%	7%
39	6%	7%
40	6%	7%
41	6%	8%
42	6%	8%
43	7%	8%
44	7%	8%
45	7%	8%
46	7%	9%
47	8%	9%
48	8%	9%
49	8%	10%
50	9%	10%
51	9%	11%
52	10%	11%
53	10%	12%
54	11%	13%
55	12%	13%

\* Apply percentage to premiums to be waived (including policy fee)

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**Exhibit E-Rates Individual Critical Illness:  
Company A**

**Simplified Underwriting (CI-005)**

**Annual Premiums (Per \$1,000 of Maximum Benefit Amount)**

Issue Age	Male		Female	
	Non-Tobacco	Tobacco	Non-Tobacco	Tobacco
18	3.85	4.99	3.37	4.21
19	3.85	4.99	3.37	4.21
20	3.85	4.99	3.37	4.21
21	3.85	4.99	3.37	4.21
22	3.85	4.99	3.37	4.21
23	3.85	4.99	3.37	4.21
24	3.85	4.99	3.37	4.21
25	3.85	4.99	3.37	4.21
26	4.41	5.86	3.67	4.73
27	4.97	6.73	3.97	5.26
28	5.53	7.60	4.27	5.78
29	6.09	8.47	4.57	6.31
30	6.65	9.34	4.87	6.83
31	7.15	10.12	5.15	7.31
32	7.66	10.90	5.42	7.79
33	8.16	11.69	5.70	8.27
34	8.67	12.47	5.97	8.75
35	9.17	13.25	6.25	9.23
36	9.97	14.99	6.84	10.48
37	10.77	16.73	7.43	11.73
38	11.58	18.47	8.03	12.98
39	12.38	20.21	8.62	14.23
40	13.18	21.95	9.21	15.48
41	14.01	23.78	9.83	16.80
42	14.84	25.60	10.45	18.12
43	15.67	27.43	11.07	19.44
44	16.50	29.25	11.69	20.76
45	17.33	31.08	12.31	22.08
46	18.32	32.72	12.82	22.92
47	19.31	34.35	13.34	23.76
48	20.30	35.99	13.85	24.59
49	21.29	37.62	14.37	25.43
50	22.28	39.26	14.88	26.27
51	23.38	41.04	15.38	27.07
52	24.48	42.82	15.89	27.86
53	25.58	44.59	16.39	28.66
54	26.68	46.37	16.90	29.45
55	27.78	48.15	17.40	30.25
56	28.88	50.12	18.10	31.10
57	29.98	52.20	18.70	32.06
58	31.08	54.30	19.40	33.00
59	32.28	56.42	20.00	33.95

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**Exhibit E-Rates Individual Critical Illness:  
Company A**

Accidental Death Benefit Rider (A-R130)	
Issue Age	Rate Per \$1,000
18	1.21
19	1.20
20	1.19
21	1.15
22	1.11
23	1.07
24	1.03
25	1.00
26	0.96
27	0.93
28	0.90
29	0.88
30	0.85
31	0.82
32	0.80
33	0.81
34	0.82
35	0.82
36	0.83
37	0.84
38	0.85
39	0.87
40	0.88
41	0.89
42	0.90
43	0.92
44	0.93
45	0.95
46	0.96
47	0.98
48	0.99
49	1.01
50	1.03
51	1.05
52	1.07
53	1.09
54	1.12
55	1.14
56	1.17
57	1.20
58	1.23
59	1.26

Child Benefit Rider (CIR 010)	
Issue Amount	Annual Premium
\$5,000.00	\$14.00
\$10,000.00	\$28.00

Waiver of Premium Rider (CIR 016)		
Issue Age	Male	Female
18	4%	5%
19	4%	5%
20	4%	5%
21	4%	5%
22	4%	5%
23	4%	5%
24	4%	5%
25	4%	5%
26	5%	6%
27	5%	6%
28	5%	6%
29	5%	6%
30	5%	6%
31	5%	6%
32	5%	6%
33	5%	6%
34	5%	6%
35	5%	6%
36	6%	7%
37	6%	7%
38	6%	7%
39	6%	7%
40	6%	7%
41	6%	8%
42	6%	8%
43	7%	8%
44	7%	8%
45	7%	8%
46	7%	9%
47	8%	9%
48	8%	9%
49	8%	10%
50	9%	10%
51	9%	11%
52	10%	11%
53	10%	12%
54	11%	13%
55	12%	13%

\* Apply percentage to premiums to be waived (including policy fee)

Return of Premium Rider Factors (CIR 018)	
Issue Age	Factor
18-25	0.30
26	0.31
27	0.32
28	0.34
29	0.35
30	0.36
31	0.37
32	0.38
33	0.40
34	0.42
35	0.42
36	0.42
37	0.42
38	0.42
39	0.42
40	0.42
41	0.41
42	0.40
43	0.38
44	0.37
45	0.36
46	0.43
47	0.50
48	0.58
49	0.65
50	0.72
51	0.82
52	0.91
53	1.01
54	1.10
55	1.20
56	1.30
57	1.39
58	1.49
59	1.58

\*The premium for the Return of Premium Rider is equal to the sum of the base policy premium, including the policy fee and the premium for all other riders attached to the base policy, times the Return of Premium Factor corresponding to the issue age of the insured.

Non-Tobacco \$5,000 Rates

Age	Company A							
20	N/A							
25	N/A							
30	N/A							
35	N/A							
40	N/A							
45	N/A							
50	N/A							
55	N/A							
60	N/A							
65	N/A							

Non-Tobacco \$10,000 Rates

Age	Company A							
20	N/A							
25	N/A							
30	N/A							
35	N/A							
40	N/A							
45	N/A							
50	N/A							
55	N/A							
60	N/A							
65	N/A							

Non-Tobacco \$25,000 Rates

Age	Company A							
20	N/A							
25	N/A							
30	N/A							
35	N/A							
40	N/A							
45	N/A							
50	N/A							
55	N/A							
60	N/A							
65	N/A							

Non-Tobacco \$50,000 Rates

Age	Company A							
20	\$193.00							
25	\$227.50							
30	\$276.00							
35	\$331.00							
40	\$414.00							
45	\$517.50							
50	\$600.50							
55	\$662.50							
60	\$759.00							
65	N/A							

If uni-gender rates are not available, female non-tobacco rates were utilized. These are the base rates without any riders or additional features that the plans may offer.

Tobacco \$5,000 Rates

Age	Company A							
20	N/A							
25	N/A							
30	N/A							
35	N/A							
40	N/A							
45	N/A							
50	N/A							
55	N/A							
60	N/A							
65	N/A							

Tobacco \$10,000 Rates

Age	Company A							
20	N/A							
25	N/A							
30	N/A							
35	N/A							
40	N/A							
45	N/A							
50	N/A							
55	N/A							
60	N/A							
65	N/A							

Tobacco \$25,000 Rates

Age	Company A							
20	N/A							
25	N/A							
30	N/A							
35	N/A							
40	N/A							
45	N/A							
50	N/A							
55	N/A							
60	N/A							
65	N/A							

Tobacco \$50,000 Rates

Age	Company A							
20	\$221.00							
25	\$290.00							
30	\$372.50							
35	\$483.00							
40	\$697.00							
45	\$959.00							
50	\$1,180.00							
55	\$1,387.00							
60	\$1,594.00							
65	N/A							

If uni-gender rates are not available, female tobacco rates were utilized. These are the base rates without any riders or additional features that the plans may offer.