

# Standard Life and Casualty Insurance Company

## Medicare Supplement

### Louisiana

#### Monthly Rates for Zip Codes 700-702, 704

#### Male Non-Tobacco

Age	Plan A	Plan F	Plan G	Plan N	Age	Plan A	Plan F	Plan G	Plan N
<65	347.74	435.86	359.92	293.40	82	215.35	269.91	222.52	181.41
65	139.09	174.34	143.97	117.36	83	218.77	274.20	226.04	184.28
66	139.09	174.34	143.97	117.36	84	221.89	278.11	229.27	186.91
67	139.09	174.34	143.97	117.36	85	225.01	282.03	232.49	189.54
68	142.07	178.07	146.80	119.68	86	227.65	285.33	235.22	191.76
69	147.73	185.16	152.64	124.44	87	230.28	288.63	237.94	193.98
70	153.68	192.62	158.79	129.45	88	232.92	291.93	240.66	196.20
71	159.93	200.45	165.24	134.71	89	234.87	294.39	242.67	197.85
72	166.18	208.28	171.69	139.98	90	236.62	296.58	244.50	199.33
73	172.62	216.35	178.36	145.41	91	238.09	298.41	246.00	200.56
74	178.37	223.57	184.30	150.25	92	239.56	300.25	247.52	201.79
75	183.93	230.54	190.05	154.93	93	240.81	301.84	248.82	202.86
76	189.29	237.27	195.59	159.46	94	241.98	303.30	250.04	203.84
77	194.27	243.50	200.73	163.65	95	242.86	304.41	250.95	204.59
78	198.95	249.37	205.58	167.59	96	243.74	305.51	251.86	205.32
79	203.64	255.24	210.41	171.54	97	244.43	306.37	252.56	205.90
80	207.74	260.38	214.65	175.00	98	245.31	307.46	253.46	206.64
81	211.64	265.27	218.68	178.28	99	245.70	307.96	253.88	206.97

#### Male Tobacco

Age	Plan A	Plan F	Plan G	Plan N	Age	Plan A	Plan F	Plan G	Plan N
<65	399.70	500.99	413.70	337.25	82	247.53	310.24	255.77	208.51
65	159.88	200.40	165.48	134.90	83	251.46	315.17	259.81	211.82
66	159.88	200.40	165.48	134.90	84	255.04	319.67	263.53	214.84
67	159.88	200.40	165.48	134.90	85	258.63	324.17	267.23	217.87
68	163.30	204.68	168.73	137.56	86	261.67	327.96	270.37	220.41
69	169.80	212.83	175.45	143.04	87	264.69	331.76	273.50	222.97
70	176.64	221.40	182.52	148.80	88	267.73	335.56	276.62	225.52
71	183.83	230.41	189.94	154.84	89	269.96	338.38	278.94	227.41
72	191.01	239.40	197.35	160.90	90	271.97	340.90	281.03	229.11
73	198.41	248.67	205.01	167.14	91	273.66	343.01	282.76	230.53
74	205.03	256.98	211.84	172.70	92	275.35	345.11	284.51	231.94
75	211.42	264.99	218.45	178.08	93	276.79	346.94	286.00	233.17
76	217.58	272.72	224.81	183.28	94	278.14	348.62	287.40	234.30
77	223.30	279.89	230.73	188.10	95	279.15	349.90	288.44	235.16
78	228.68	286.64	236.30	192.64	96	280.16	351.16	289.49	236.00
79	234.07	293.38	241.86	197.17	97	280.96	352.14	290.30	236.67
80	238.79	299.29	246.72	201.15	98	281.97	353.41	291.34	237.51
81	243.26	304.91	251.35	204.92	99	282.41	353.98	291.81	237.89

\*For annual, semi-annual, or quarterly premiums, multiply the Monthly Premium Amount by 12, 6, or 3, respectively.

\$25 Application Fee Not Included

# Standard Life and Casualty Insurance Company

## Medicare Supplement

### Louisiana

#### Monthly Rates for Zip Codes 700-702, 704

#### Female Non-Tobacco

Age	Plan A	Plan F	Plan G	Plan N	Age	Plan A	Plan F	Plan G	Plan N
<65	302.53	379.20	313.13	255.26	82	187.35	234.82	193.59	157.83
65	121.01	151.68	125.25	102.10	83	190.33	238.55	196.65	160.32
66	121.01	151.68	125.25	102.10	84	193.04	241.96	199.46	162.61
67	121.01	151.68	125.25	102.10	85	195.76	245.37	202.27	164.90
68	123.60	154.92	127.72	104.12	86	198.06	248.24	204.64	166.83
69	128.53	161.09	132.80	108.26	87	200.34	251.11	207.01	168.76
70	133.70	167.58	138.15	112.62	88	202.64	253.98	209.37	170.69
71	139.14	174.39	143.76	117.20	89	204.34	256.12	211.12	172.13
72	144.58	181.20	149.37	121.78	90	205.86	258.02	212.72	173.42
73	150.18	188.22	155.17	126.51	91	207.14	259.62	214.02	174.49
74	155.18	194.51	160.34	130.72	92	208.42	261.22	215.34	175.56
75	160.02	200.57	165.34	134.79	93	209.50	262.60	216.47	176.49
76	164.68	206.42	170.16	138.73	94	210.52	263.87	217.53	177.34
77	169.01	211.85	174.64	142.38	95	211.29	264.84	218.33	177.99
78	173.09	216.95	178.85	145.80	96	212.05	265.79	219.12	178.63
79	177.17	222.06	183.06	149.24	97	212.65	266.54	219.73	179.13
80	180.73	226.53	186.75	152.25	98	213.42	267.49	220.51	179.78
81	184.13	230.78	190.25	155.10	99	213.76	267.93	220.88	180.06

#### Female Tobacco

Age	Plan A	Plan F	Plan G	Plan N	Age	Plan A	Plan F	Plan G	Plan N
<65	347.74	435.86	359.92	293.40	82	215.35	269.91	222.52	181.41
65	139.09	174.34	143.97	117.36	83	218.77	274.20	226.04	184.28
66	139.09	174.34	143.97	117.36	84	221.89	278.11	229.27	186.91
67	139.09	174.34	143.97	117.36	85	225.01	282.03	232.49	189.54
68	142.07	178.07	146.80	119.68	86	227.65	285.33	235.22	191.76
69	147.73	185.16	152.64	124.44	87	230.28	288.63	237.94	193.98
70	153.68	192.62	158.79	129.45	88	232.92	291.93	240.66	196.20
71	159.93	200.45	165.24	134.71	89	234.87	294.39	242.67	197.85
72	166.18	208.28	171.69	139.98	90	236.62	296.58	244.50	199.33
73	172.62	216.35	178.36	145.41	91	238.09	298.41	246.00	200.56
74	178.37	223.57	184.30	150.25	92	239.56	300.25	247.52	201.79
75	183.93	230.54	190.05	154.93	93	240.81	301.84	248.82	202.86
76	189.29	237.27	195.59	159.46	94	241.98	303.30	250.04	203.84
77	194.27	243.50	200.73	163.65	95	242.86	304.41	250.95	204.59
78	198.95	249.37	205.58	167.59	96	243.74	305.51	251.86	205.32
79	203.64	255.24	210.41	171.54	97	244.43	306.37	252.56	205.90
80	207.74	260.38	214.65	175.00	98	245.31	307.46	253.46	206.64
81	211.64	265.27	218.68	178.28	99	245.70	307.96	253.88	206.97

\*For annual, semi-annual, or quarterly premiums, multiply the Monthly Premium Amount by 12, 6, or 3, respectively.

\$25 Application Fee Not Included

# Standard Life and Casualty Insurance Company

## Medicare Supplement

### Louisiana

#### Monthly Rates for Zip Codes 703, 705-714

#### Male Non-Tobacco

Age	Plan A	Plan F	Plan G	Plan N	Age	Plan A	Plan F	Plan G	Plan N
<65	292.22	366.27	302.46	246.56	82	180.97	226.82	186.99	152.44
65	116.88	146.51	120.98	98.62	83	183.84	230.42	189.95	154.86
66	116.88	146.51	120.98	98.62	84	186.46	233.71	192.66	157.07
67	116.88	146.51	120.98	98.62	85	189.09	237.00	195.37	159.28
68	119.39	149.64	123.36	100.57	86	191.30	239.77	197.66	161.14
69	124.14	155.60	128.27	104.57	87	193.51	242.55	199.95	163.01
70	129.14	161.86	133.44	108.78	88	195.73	245.32	202.23	164.87
71	134.40	168.45	138.86	113.20	89	197.37	247.38	203.93	166.26
72	139.64	175.03	144.28	117.63	90	198.84	249.23	205.46	167.50
73	145.06	181.80	149.88	122.19	91	200.07	250.77	206.72	168.54
74	149.89	187.88	154.88	126.26	92	201.31	252.31	208.00	169.57
75	154.56	193.73	159.71	130.20	93	202.36	253.65	209.10	170.47
76	159.07	199.39	164.36	134.00	94	203.35	254.88	210.11	171.29
77	163.26	204.62	168.68	137.52	95	204.08	255.81	210.88	171.92
78	167.19	209.56	172.76	140.84	96	204.82	256.73	211.64	172.54
79	171.13	214.49	176.82	144.15	97	205.41	257.45	212.24	173.03
80	174.57	218.81	180.38	147.06	98	206.15	258.37	212.99	173.64
81	177.85	222.92	183.76	149.81	99	206.47	258.79	213.34	173.92

#### Male Tobacco

Age	Plan A	Plan F	Plan G	Plan N	Age	Plan A	Plan F	Plan G	Plan N
<65	335.88	421.00	347.65	283.40	82	208.01	260.71	214.93	175.22
65	134.35	168.40	139.06	113.36	83	211.31	264.85	218.33	178.00
66	134.35	168.40	139.06	113.36	84	214.32	268.63	221.45	180.54
67	134.35	168.40	139.06	113.36	85	217.34	272.41	224.56	183.08
68	137.23	172.00	141.79	115.60	86	219.89	275.60	227.20	185.22
69	142.69	178.85	147.44	120.20	87	222.43	278.79	229.83	187.37
70	148.44	186.05	153.38	125.04	88	224.98	281.98	232.45	189.51
71	154.48	193.62	159.61	130.12	89	226.86	284.35	234.40	191.10
72	160.51	201.18	165.84	135.21	90	228.55	286.47	236.16	192.53
73	166.73	208.97	172.28	140.45	91	229.97	288.24	237.61	193.72
74	172.29	215.95	178.02	145.13	92	231.39	290.01	239.08	194.91
75	177.66	222.68	183.57	149.65	93	232.60	291.55	240.34	195.94
76	182.84	229.18	188.92	154.02	94	233.73	292.96	241.51	196.89
77	187.65	235.20	193.89	158.07	95	234.58	294.03	242.39	197.61
78	192.17	240.87	198.57	161.88	96	235.43	295.09	243.27	198.32
79	196.70	246.54	203.24	165.69	97	236.10	295.92	243.95	198.88
80	200.66	251.50	207.33	169.03	98	236.95	296.98	244.82	199.59
81	204.42	256.23	211.22	172.20	99	237.32	297.46	245.22	199.91

\*For annual, semi-annual, or quarterly premiums, multiply the Monthly Premium Amount by 12, 6, or 3, respectively.

\$25 Application Fee Not Included

# Standard Life and Casualty Insurance Company

## Medicare Supplement

### Louisiana

#### Monthly Rates for Zip Codes 703, 705-714

#### Female Non-Tobacco

Age	Plan A	Plan F	Plan G	Plan N	Age	Plan A	Plan F	Plan G	Plan N
<65	254.23	318.65	263.14	214.51	82	157.44	197.33	162.68	132.62
65	101.69	127.46	105.25	85.80	83	159.94	200.47	165.26	134.73
66	101.69	127.46	105.25	85.80	84	162.22	203.33	167.61	136.65
67	101.69	127.46	105.25	85.80	85	164.51	206.19	169.97	138.57
68	103.87	130.19	107.32	87.50	86	166.43	208.60	171.96	140.19
69	108.00	135.37	111.59	90.98	87	168.35	211.02	173.96	141.82
70	112.35	140.82	116.09	94.64	88	170.29	213.43	175.94	143.44
71	116.93	146.55	120.81	98.48	89	171.71	215.22	177.42	144.65
72	121.49	152.28	125.52	102.34	90	172.99	216.83	178.75	145.73
73	126.20	158.17	130.40	106.31	91	174.06	218.17	179.85	146.63
74	130.40	163.46	134.75	109.85	92	175.14	219.51	180.96	147.53
75	134.47	168.55	138.95	113.27	93	176.05	220.68	181.92	148.31
76	138.39	173.47	142.99	116.58	94	176.91	221.75	182.80	149.02
77	142.04	178.02	146.75	119.64	95	177.55	222.55	183.47	149.57
78	145.46	182.32	150.30	122.53	96	178.19	223.36	184.13	150.11
79	148.88	186.61	153.83	125.41	97	178.71	223.98	184.65	150.54
80	151.88	190.36	156.93	127.94	98	179.35	224.78	185.30	151.07
81	154.73	193.94	159.87	130.33	99	179.63	225.15	185.61	151.31

#### Female Tobacco

Age	Plan A	Plan F	Plan G	Plan N	Age	Plan A	Plan F	Plan G	Plan N
<65	292.22	366.27	302.46	246.56	82	180.97	226.82	186.99	152.44
65	116.88	146.51	120.98	98.62	83	183.84	230.42	189.95	154.86
66	116.88	146.51	120.98	98.62	84	186.46	233.71	192.66	157.07
67	116.88	146.51	120.98	98.62	85	189.09	237.00	195.37	159.28
68	119.39	149.64	123.36	100.57	86	191.30	239.77	197.66	161.14
69	124.14	155.60	128.27	104.57	87	193.51	242.55	199.95	163.01
70	129.14	161.86	133.44	108.78	88	195.73	245.32	202.23	164.87
71	134.40	168.45	138.86	113.20	89	197.37	247.38	203.93	166.26
72	139.64	175.03	144.28	117.63	90	198.84	249.23	205.46	167.50
73	145.06	181.80	149.88	122.19	91	200.07	250.77	206.72	168.54
74	149.89	187.88	154.88	126.26	92	201.31	252.31	208.00	169.57
75	154.56	193.73	159.71	130.20	93	202.36	253.65	209.10	170.47
76	159.07	199.39	164.36	134.00	94	203.35	254.88	210.11	171.29
77	163.26	204.62	168.68	137.52	95	204.08	255.81	210.88	171.92
78	167.19	209.56	172.76	140.84	96	204.82	256.73	211.64	172.54
79	171.13	214.49	176.82	144.15	97	205.41	257.45	212.24	173.03
80	174.57	218.81	180.38	147.06	98	206.15	258.37	212.99	173.64
81	177.85	222.92	183.76	149.81	99	206.47	258.79	213.34	173.92

\*For annual, semi-annual, or quarterly premiums, multiply the Monthly Premium Amount by 12, 6, or 3, respectively.

\$25 Application Fee Not Included