

**State:** Pennsylvania **Filing Company:** The Prudential Insurance Company of America  
**TOI/Sub-TOI:** LTC03I Individual Long Term Care/LTC03I.001 Qualified  
**Product Name:** Individual LongTerm Care Insurance  
**Project Name/Number:** ILTC1 PreRS ReRate Round 12/12I-2022

### Filing at a Glance

Company: The Prudential Insurance Company of America  
 Product Name: Individual LongTerm Care Insurance  
 State: Pennsylvania  
 TOI: LTC03I Individual Long Term Care  
 Sub-TOI: LTC03I.001 Qualified  
 Filing Type: Rate - G.I. (Guaranteed Issue)  
 Date Submitted: 12/28/2022  
 SERFF Tr Num: PRUD-133505176  
 SERFF Status: Closed-Approved  
 State Tr Num: PRUD-133505176  
 State Status: Approved  
 Co Tr Num: IIGH-ILTC1-PRE RS-MK-PA-R12  
 Effective: On Approval  
 Date Requested:  
 Author(s): Raenonna Prince, Karen Keller, Meong Kwak, Edward Leshner Jr, Gaurav Singh, Sean Lee, Samuel Levin  
 Reviewer(s): Michael Hibbert (primary), Jim Laverty  
 Disposition Date: 01/25/2023  
 Disposition Status: Approved  
 Effective Date:

#### State Filing Description:

Proposed aggregate 27.8% increase on 796 PA policyholders of Prudential LTC forms GRP 98720, GRP 98721, and GRP 98722 (i.e. forms known as ILTC-1 issued before Sept 16, 2002).

**State:** Pennsylvania **Filing Company:** The Prudential Insurance Company of America  
**TOI/Sub-TOI:** LTC03I Individual Long Term Care/LTC03I.001 Qualified  
**Product Name:** Individual Long Term Care Insurance  
**Project Name/Number:** ILTC1 PreRS ReRate Round 12/12I-2022

## General Information

Project Name: ILTC1 PreRS ReRate Round 12	Status of Filing in Domicile: Not Filed
Project Number: 12I-2022	Date Approved in Domicile:
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: 27.8%	Filing Status Changed: 01/25/2023
	State Status Changed: 01/25/2023
Deemer Date:	Created By: Meong Kwak
Submitted By: Meong Kwak	Corresponding Filing Tracking Number:
	State TOI: LTC03I Individual Long Term Care

### Filing Description:

Please refer to the Filing Cover Letter attached to the Supporting Documentation Tab.

## Company and Contact

### Filing Contact Information

Michael Zilberman, FSA, MAAA, Director and Actuary, Financial Management  
 The Prudential Insurance Company of America  
 Long Term Care Unit  
 751 Broad Street, 11th Floor, Plaza  
 Newark, NJ 07102

michael.zilberman@prudential.com  
 267-229-4250 [Phone]

### Filing Company Information

The Prudential Insurance Company of America	CoCode: 68241	State of Domicile: New Jersey
751 Broad Street	Group Code: 304	Company Type: Life
Newark, NJ 07102-3777	Group Name:	State ID Number:
(973) 802-6000 ext. [Phone]	FEIN Number: 22-1211670	

---

**State:** Pennsylvania **Filing Company:** The Prudential Insurance Company of America  
**TOI/Sub-TOI:** LTC03I Individual Long Term Care/LTC03I.001 Qualified  
**Product Name:** Individual LongTerm Care Insurance  
**Project Name/Number:** ILTC1 PreRS ReRate Round 12/12I-2022

## Filing Fees

### State Fees

Fee Required? No

Retaliatory? No

Fee Explanation:

SERFF Tracking #:

PRUD-133505176

State Tracking #:

PRUD-133505176

Company Tracking #:

IIGH-ILTC1-PRE RS-MK-PA-R12

State: Pennsylvania

Filing Company: The Prudential Insurance Company of America

TOI/Sub-TOI: LTC03I Individual Long Term Care/LTC03I.001 Qualified

Product Name: Individual LongTerm Care Insurance

Project Name/Number: ILTC1 PreRS ReRate Round 12/12I-2022

## Correspondence Summary

### Dispositions

Status	Created By	Created On	Date Submitted
Approved	Michael Hibbert	01/25/2023	01/25/2023

### Objection Letters and Response Letters

#### Objection Letters

Status	Created By	Created On	Date Submitted
Disapproved	Michael Hibbert	01/12/2023	01/12/2023
Disapproved	Michael Hibbert	01/03/2023	01/03/2023

#### Response Letters

Responded By	Created On	Date Submitted
Raenonna Prince	01/17/2023	01/17/2023
Sean Lee	01/12/2023	01/12/2023

SERFF Tracking #:

PRUD-133505176

State Tracking #:

PRUD-133505176

Company Tracking #:

IIGH-ILTC1-PRE RS-MK-PA-R12

State: Pennsylvania

Filing Company: The Prudential Insurance Company of America

TOI/Sub-TOI: LTC03I Individual Long Term Care/LTC03I.001 Qualified

Product Name: Individual LongTerm Care Insurance

Project Name/Number: ILTC1 PreRS ReRate Round 12/12I-2022

## Disposition

Disposition Date: 01/25/2023

Effective Date:

Status: Approved

Comment: Jan 25, 2023

Michael Zilberman, FSA, MAAA, Director and Actuary, Financial Management  
Prudential Insurance Company of America  
Long Term Care Unit  
751 Broad Street, 11th Floor, Plaza  
Newark, NJ 07102

RE: Proposed aggregate 27.8% increase on 796 PA policyholders of Prudential LTC forms GRP 98720, GRP 98721, and GRP 98722 (i.e. forms known as ILTC-1 issued before Sept 16, 2002).

Pennsylvania Insurance Department ID # PRUD-133505176

Dear Michael Zilberman:

The Department approves the increases proposed in the file "ILTC1 Pre-RS Policyholders Inforce.xlsx" submitted on 12/28/2022.

Sincerely,

Michael Hibbert  
Actuarial Associate  
Bureau of Life, Accident and Health Insurance

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):
The Prudential Insurance Company of America	27.800%	27.800%	\$812,178	796	\$2,921,503	85.900%	0.000%

State: Pennsylvania

Filing Company:

The Prudential Insurance Company of America

TOI/Sub-TOI: LTC03I Individual Long Term Care/LTC03I.001 Qualified

Product Name: Individual LongTerm Care Insurance

Project Name/Number: ILTC1 PreRS ReRate Round 12/12I-2022

Schedule	Schedule Item	Schedule Item Status	Public Access
Rate	Appendix D - Rate Pages (PA ILTC1 Pre-RS)		Yes
Supporting Document	Transmittal Letter (A&H)		Yes
Supporting Document	Actuarial Certification (A&H)		Yes
Supporting Document	Actuarial Memorandum and Explanatory Information (A&H)		Yes
Supporting Document	Advertisements (A&H)		Yes
Supporting Document	Authorization to File (A&H)		Yes
Supporting Document	Insert Page Explanation (A&H)		Yes
Supporting Document	Rate Table (A&H)		Yes
Supporting Document	Replacement Form with Highlighted Changes (A&H)		Yes
Supporting Document	Advertisement Compliance Certification		Yes
Supporting Document	Reserve Calculation (A&H)		Yes
Supporting Document	Variability Explanation (A&H)		Yes
Supporting Document	Appendix C - Description of Experience Analysis and Assumption Setting		Yes
Supporting Document	Appendix C - Exhibit 1 - Mortality Details - ILTC		Yes
Supporting Document	Appendix C - Exhibit 2 - Lapse Details - ILTC		Yes
Supporting Document	Appendix C - Exhibit 3 - Incidence Study - ILTC		Yes
Supporting Document	Appendix C - Exhibit 4 - Utilization Details - ILTC		Yes
Supporting Document	Appendix C - Exhibit 5 - Claim Termination Death - ILTC		Yes
Supporting Document	Appendix C - Exhibit 6 - Claim Termination Recovery - ILTC		Yes
Supporting Document	ILTC1 App A B E		Yes
Supporting Document	ILTC1 Approved & Requested RI		Yes
Supporting Document	ILTC1 Assumption Comparison		Yes
Supporting Document	ILTC1 Pre-RS Policyholders Inforce		Yes
Supporting Document	Policyholder Notification Package		Yes
Supporting Document	Letter of Response 01/11/2023		Yes
Supporting Document (revised)	PA Pre-RS ILTC1 App B without rate increase		Yes
Supporting Document	PA Pre-RS ILTC1 App B without rate increase		No

**State:** Pennsylvania **Filing Company:** The Prudential Insurance Company of America  
**TOI/Sub-TOI:** LTC03I Individual Long Term Care/LTC03I.001 Qualified  
**Product Name:** Individual Long Term Care Insurance  
**Project Name/Number:** ILTC1 PreRS ReRate Round 12/12I-2022

## Objection Letter

Objection Letter Status Disapproved  
Objection Letter Date 01/12/2023  
Submitted Date 01/12/2023  
Respond By Date

Dear Michael Zilberman, FSA, MAAA,

**Introduction:**

Jan 12, 2023

Michael Zilberman, FSA, MAAA, Director and Actuary, Financial Management  
Prudential Insurance Company of America  
Long Term Care Unit  
751 Broad Street, 11th Floor, Plaza  
Newark, NJ 07102

RE: Proposed aggregate 27.8% increase on 796 PA policyholders of Prudential LTC forms GRP 98720, GRP 98721, and GRP 98722 (i.e. forms known as ILTC-1 issued before Sept 16, 2002).

Pennsylvania Insurance Department ID # PRUD-133505176

Dear Michael Zilberman:

The captioned filing has been reviewed by the Pennsylvania Insurance Department. It has been determined that the filing fails to meet the requirements of our Insurance Company Laws or regulations and is therefore disapproved pursuant to the authority granted under Section 304(a) of Act 134, the Accident and Health Filing Reform Act. In the event you have any questions regarding the stated concerns, please feel free to contact the Department for further clarification.

The disapproved filing may be resubmitted within 120 days of the date of disapproval. If the Department does not hear from you within 120 days, the subject filing will be permanently closed. Such filings resubmitted after 120 days must be submitted as a new filing, inclusive of appropriate filing fees and disclosure of the closed filing SERFF tracking number.

Please furnish the following information to the Department.

1. Please provide the file PA Pre-RS ILTC1 App B without rate increase in Excel. In other words, you provided this document as an Adobe "pdf", but we need it in Microsoft Excel format.

Sincerely,

Michael Hibbert  
Actuarial Associate  
Bureau of Life, Accident and Health Insurance

**Conclusion:**

Sincerely,  
Michael Hibbert

**State:** Pennsylvania **Filing Company:** The Prudential Insurance Company of America  
**TOI/Sub-TOI:** LTC03I Individual Long Term Care/LTC03I.001 Qualified  
**Product Name:** Individual Long Term Care Insurance  
**Project Name/Number:** ILTC1 PreRS ReRate Round 12/121-2022

## Objection Letter

Objection Letter Status Disapproved  
Objection Letter Date 01/03/2023  
Submitted Date 01/03/2023  
Respond By Date

Dear Michael Zilberman, FSA, MAAA,

**Introduction:**

Jan 3, 2023

Michael Zilberman, FSA, MAAA, Director and Actuary, Financial Management  
Prudential Insurance Company of America  
Long Term Care Unit  
751 Broad Street, 11th Floor, Plaza  
Newark, NJ 07102

RE: Proposed aggregate 27.8% increase on 796 PA policyholders of Prudential LTC forms GRP 98720, GRP 98721, and GRP 98722 (i.e. forms known as ILTC-1 issued before Sept 16, 2002).

Pennsylvania Insurance Department ID # PRUD-133505176

Dear Michael Zilberman:

The captioned filing has been reviewed by the Pennsylvania Insurance Department. It has been determined that the filing fails to meet the requirements of our Insurance Company Laws or regulations and is therefore disapproved pursuant to the authority granted under Section 304(a) of Act 134, the Accident and Health Filing Reform Act. In the event you have any questions regarding the stated concerns, please feel free to contact the Department for further clarification.

The disapproved filing may be resubmitted within 120 days of the date of disapproval. If the Department does not hear from you within 120 days, the subject filing will be permanently closed. Such filings resubmitted after 120 days must be submitted as a new filing, inclusive of appropriate filing fees and disclosure of the closed filing SERFF tracking number.

Please furnish the following information to the Department.

1. Please provide a table in an Excel spreadsheet (perhaps similar to Appendix B) for this nationwide block of policies which shows the historical and projected nationwide earned premium and incurred claims on a calendar year basis assuming no rate increase is granted. Please restate the nationwide historical and projected earned premium so that the business from inception appears to have all been earned at the original rate level.
2. Please provide the percent of active policyholders remaining on a nationwide basis. How many policies were issued nationwide? How many policies remain in force nationwide?
3. Please provide the cumulative weighted average increase granted on policies in force on this block in PA. If the answer is 194.6%, then simply confirm this.
4. Please provide your best guess as to when the first letter will be mailed informing policyholders of this premium increase.

Sincerely,

Michael Hibbert



---

**State:** Pennsylvania **Filing Company:** The Prudential Insurance Company of America  
**TOI/Sub-TOI:** LTC03I Individual Long Term Care/LTC03I.001 Qualified  
**Product Name:** Individual Long Term Care Insurance  
**Project Name/Number:** ILTC1 PreRS ReRate Round 12/12I-2022

Actuarial Associate  
Bureau of Life, Accident and Health Insurance

**Conclusion:**

Sincerely,  
Michael Hibbert

SERFF Tracking #:

PRUD-133505176

State Tracking #:

PRUD-133505176

Company Tracking #:

IIGH-ILTC1-PRE RS-MK-PA-R12

State:

Pennsylvania

Filing Company:

The Prudential Insurance Company of America

TOI/Sub-TOI:

LTC03I Individual Long Term Care/LTC03I.001 Qualified

Product Name:

Individual LongTerm Care Insurance

Project Name/Number:

ILTC1 PreRS ReRate Round 12/12I-2022

## Response Letter

Response Letter Status	Submitted to State
Response Letter Date	01/17/2023
Submitted Date	01/17/2023

Dear Michael Hibbert,

**Introduction:**

Thank you for your review of the above referenced filing material.

**Response 1**

**Comments:**

At the Department's request we have included the "Pre RS ILTC1 App B without rate increase" document in excel format.

**Changed Items:**

No Form Schedule items changed.

No Rate/Rule Schedule items changed.

### Supporting Document Schedule Item Changes

<b>Satisfied - Item:</b>	PA Pre-RS ILTC1 App B without rate increase
<b>Comments:</b>	
<b>Attachment(s):</b>	PA Pre-RS ILTC1 App B without rate increase.xlsx
<i>Previous Version</i>	
<b>Satisfied - Item:</b>	PA Pre-RS ILTC1 App B without rate increase
<b>Comments:</b>	
<b>Attachment(s):</b>	PA Pre-RS ILTC1 App B without rate increase.pdf

**Conclusion:**

**SERFF Tracking #:**

PRUD-133505176

**State Tracking #:**

PRUD-133505176

**Company Tracking #:**

IIGH-ILTC1-PRE RS-MK-PA-R12

---

**State:**

Pennsylvania

**Filing Company:**

The Prudential Insurance Company of America

**TOI/Sub-TOI:**

LTC03I Individual Long Term Care/LTC03I.001 Qualified

**Product Name:**

Individual LongTerm Care Insurance

**Project Name/Number:**

ILTC1 PreRS ReRate Round 12/12I-2022

We trust this information satisfies the Department's concern. Should you be in need of any additional information, please do not hesitate to contact me. Thank you. -Rae

Raenonna L. Prince, CLTC, LTCP

Lead Analyst

The Prudential Insurance Company of America

2101 Welsh Road, LTC Unit

Dresher, PA 19025

Voice: 215-658-6281| Cell: 215-990-7186

Fax: 888-294-6332

E-Mail: Raenonna.prince@prudential.com

Sincerely,

Raenonna Prince

**State:** Pennsylvania **Filing Company:** The Prudential Insurance Company of America  
**TOI/Sub-TOI:** LTC03I Individual Long Term Care/LTC03I.001 Qualified  
**Product Name:** Individual LongTerm Care Insurance  
**Project Name/Number:** ILTC1 PreRS ReRate Round 12/12I-2022

## Response Letter

Response Letter Status Submitted to State  
 Response Letter Date 01/12/2023  
 Submitted Date 01/12/2023

Dear Michael Hibbert,

### Introduction:

Thank you for your review of the above filing material.

### Response 1

#### Comments:

Please refer to our letter of response and additional response material attached to the supporting documentation tab of this filing.

### Changed Items:

No Form Schedule items changed.

No Rate/Rule Schedule items changed.

### Supporting Document Schedule Item Changes

<b>Satisfied - Item:</b>	Letter of Response 01/11/2023
<b>Comments:</b>	
<b>Attachment(s):</b>	PA ILTC1 Pre-RS resp to 2023-01-03 obj.pdf

### Supporting Document Schedule Item Changes

<b>Satisfied - Item:</b>	Letter of Response 01/11/2023
<b>Comments:</b>	
<b>Attachment(s):</b>	PA ILTC1 Pre-RS resp to 2023-01-03 obj.pdf

<b>Satisfied - Item:</b>	PA Pre-RS ILTC1 App B without rate increase
<b>Comments:</b>	
<b>Attachment(s):</b>	PA Pre-RS ILTC1 App B without rate increase.pdf

### Conclusion:

**SERFF Tracking #:**

PRUD-133505176

**State Tracking #:**

PRUD-133505176

**Company Tracking #:**

IIGH-ILTC1-PRE RS-MK-PA-R12

---

**State:**

Pennsylvania

**Filing Company:**

The Prudential Insurance Company of America

**TOI/Sub-TOI:**

LTC03I Individual Long Term Care/LTC03I.001 Qualified

**Product Name:**

Individual LongTerm Care Insurance

**Project Name/Number:**

ILTC1 PreRS ReRate Round 12/12I-2022

*Should you be in need of any additional information, please do not hesitate to contact me.*

Sean Lee

Associate Actuary

973-802-8966

sean.s.lee@prudential.com

Sincerely,

Sean Lee

SERFF Tracking #:

PRUD-133505176

State Tracking #:

PRUD-133505176

Company Tracking #:

IIGH-ILTC1-PRE RS-MK-PA-R12

State: Pennsylvania

Filing Company: The Prudential Insurance Company of America

TOI/Sub-TOI: LTC03I Individual Long Term Care/LTC03I.001 Qualified

Product Name: Individual LongTerm Care Insurance

Project Name/Number: ILTC1 PreRS ReRate Round 12/12I-2022

## Rate Information

Rate data applies to filing.

Filing Method: SERFF  
 Rate Change Type: Increase  
 Overall Percentage of Last Rate Revision: 17.100%  
 Effective Date of Last Rate Revision: 04/01/2022  
 Filing Method of Last Filing: SERFF  
 SERFF Tracking Number of Last Filing: PRUD-132798393

## 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):
The Prudential Insurance Company of America	27.800%	27.800%	\$812,178	796	\$2,921,503	85.900%	0.000%

**SERFF Tracking #:**

PRUD-133505176

**State Tracking #:**

PRUD-133505176

**Company Tracking #:**

IIGH-ILTC1-PRE RS-MK-PA-R12

**State:**

Pennsylvania

**Filing Company:**

The Prudential Insurance Company of America

**TOI/Sub-TOI:**

LTC03I Individual Long Term Care/LTC03I.001 Qualified

**Product Name:**

Individual LongTerm Care Insurance

**Project Name/Number:**

ILTC1 PreRS ReRate Round 12/12I-2022

## Rate/Rule Schedule

Item No.	Schedule Item Status	Document Name	Affected Form Numbers (Separated with commas)	Rate Action	Rate Action Information	Attachments
1		Appendix D - Rate Pages (PA ILTC1 Pre-RS)	GRP 98720 ET AL, GRP 98721 ET AL, GRP 98722 ET AL	Revised	Previous State Filing Number: PRUD-132798393 Percent Rate Change Request: 27.8	Appendix D - Rate Pages (PA ILTC1 Pre-RS).pdf,

**Appendix D**  
**The Prudential Insurance Company of America**  
**Individual Long Term Care Insurance Plan**  
**Base Rates and Adjustment Factors - Year 1 of 3**

**GRP 98720, GRP 98721, GRP 98722**  
**Page 1 of 5**

<b>Pennsylvania Rates Before Adjustments</b>			
<b>Gross Annual Preferred Single Premium Per \$10.00 of Institutional Care Daily Benefit Home &amp; Community-Based Care Daily Benefit: 75% of Institutional Care Daily Benefit \$1,825 x Daily Benefit Lifetime Maximum Benefit (5 Year Benefit Period) 100-Day Calendar Day Benefit Waiting Period</b>			
<b>Age</b>	<b>5% Automatic Simple Inflation</b>	<b>5% Automatic Compound Inflation</b>	<b>Periodic Inflation</b>
18-30	90.82	119.74	44.07
31	95.47	125.33	46.03
32	100.33	131.21	48.06
33	105.45	137.37	50.21
34	110.86	143.79	52.42
35	116.52	150.52	54.74
36	122.46	157.56	57.18
37	128.71	164.96	59.70
38	135.29	172.67	62.34
39	142.20	180.76	65.12
40	149.47	189.23	68.00
41	154.91	195.30	70.19
42	160.57	201.55	72.42
43	166.42	208.00	74.75
44	172.48	214.64	77.14
45	178.77	221.53	79.62
46	185.28	228.60	82.17
47	192.04	235.93	84.81
48	199.06	243.48	87.51
49	206.30	251.26	90.33
50	213.81	259.32	93.22
51	226.61	274.55	98.63
52	240.20	290.70	104.36
53	254.61	307.80	110.41
54	269.87	325.91	116.81
55	286.03	345.05	123.60
56	303.18	365.34	130.77
57	321.36	386.83	138.35
58	340.60	409.55	146.38
59	361.01	433.62	154.89
60	382.66	459.14	163.86
61	406.48	482.96	175.55
62	431.80	508.01	188.04
63	458.70	534.37	201.46
64	487.29	562.12	215.81
65	517.63	591.29	231.19
66	566.07	642.70	255.91
67	619.03	698.54	283.29
68	676.96	759.28	313.58
69	740.29	825.30	347.12
70	809.56	897.03	384.25
71	893.58	983.30	429.20
72	986.34	1,077.91	479.39
73	1,088.69	1,181.60	535.46
74	1,201.67	1,295.23	598.09
75	1,326.40	1,419.84	668.04
76	1,470.63	1,564.50	749.46
77	1,630.56	1,723.94	840.79
78	1,807.87	1,899.57	943.25
79	2,004.46	2,093.13	1,058.19
80	2,222.45	2,306.41	1,187.16
81	2,399.50	2,480.69	1,291.08
82	2,590.69	2,668.17	1,404.10
83	2,797.08	2,869.79	1,527.00
84	3,019.93	3,086.67	1,660.69
85	3,260.53	3,319.92	1,806.05

Due to variations in rounding, actual premium may vary.

<b>ADJUSTMENT FACTORS – UNDERWRITING CLASS</b>	
<b>Underwriting Class</b>	<b>All Ages</b>
Preferred	1.000
Standard	1.250

<b>ADJUSTMENT FACTORS – PREMIUM PAYMENT MODE</b>	
<b>Premium Payment Mode</b>	<b>All Ages</b>
Annual	1.000
Semi-Annual	0.510
Quarterly	0.265
Monthly	0.090
Auto-Monthly	0.085

<b>ADJUSTMENT FACTORS – MARITAL STATUS</b>			
<b>Marital Status</b>	<b>All Ages</b>		<b>Minimum Factor for all Discounts combined</b>
	<b>Without Good Health Discount</b>	<b>With Good Health Discount</b>	
Married Joint	0.80	0.70	0.70
Married Single	0.90	0.75	0.75
Single (Not Married)	1.00	0.85	0.75



**Appendix D**  
**The Prudential Insurance Company of America**  
**Individual Long Term Care Insurance Plan**  
**Base Rates and Adjustment Factors - Year 1 of 3**

**GRP 98720, GRP 98721, GRP 98722**

**Page 2 of 5**

<b>Pennsylvania Rates Before Adjustments</b>			
<b>Gross Annual Preferred Single Premium Per \$10.00 of Institutional Care Daily Benefit Home &amp; Community-Based Care Daily Benefit: 75% of Institutional Care Daily Benefit Unlimited Daily Benefit Lifetime Maximum Benefit 100-Day Calendar Day Benefit Waiting Period</b>			
<b>Age</b>	<b>5% Automatic Simple Inflation</b>	<b>5% Automatic Compound Inflation</b>	<b>Periodic Inflation</b>
18-30	141.46	188.17	83.45
31	148.69	196.96	87.16
32	156.26	206.21	91.01
33	164.24	215.89	95.08
34	172.66	225.97	99.27
35	181.48	236.55	103.66
36	190.73	247.61	108.28
37	200.47	259.24	113.05
38	210.71	271.36	118.05
39	221.48	284.08	123.31
40	232.83	301.15	133.53
41	246.89	310.81	137.83
42	255.92	320.76	142.21
43	265.24	331.03	146.78
44	274.91	341.59	151.48
45	284.93	352.55	156.35
46	295.30	363.81	161.35
47	306.08	375.48	166.54
48	317.26	387.49	171.84
49	328.80	399.88	177.38
50	340.28	411.19	186.10
51	360.64	435.33	196.90
52	382.28	460.94	208.34
53	405.20	488.05	220.42
54	429.49	516.76	233.19
55	455.20	547.11	246.75
56	482.49	579.28	261.06
57	511.43	613.36	276.19
58	542.06	649.39	292.23
59	574.53	687.56	309.21
60	601.82	719.41	327.89
61	639.29	756.73	351.28
62	679.10	796.00	376.27
63	721.40	837.29	403.12
64	766.37	880.77	431.84
65	814.09	926.47	462.62
66	890.27	1,007.03	512.08
67	973.57	1,094.53	566.87
68	1,064.67	1,189.69	627.48
69	1,164.27	1,293.13	694.59
70	1,276.06	1,408.69	780.25
71	1,408.50	1,544.17	871.53
72	1,554.71	1,692.74	973.44
73	1,716.05	1,855.57	1,087.29
74	1,894.12	2,034.02	1,214.47
75	2,090.72	2,229.69	1,356.51
76	2,318.06	2,456.88	1,521.84
77	2,570.16	2,707.25	1,707.29
78	2,849.64	2,983.07	1,915.35
79	3,159.52	3,287.03	2,148.74
80	3,560.37	3,684.09	2,454.96
81	3,844.02	3,962.46	2,669.86
82	4,150.30	4,261.93	2,903.57
83	4,480.94	4,583.98	3,157.72
84	4,837.94	4,930.41	3,434.18
85	5,223.40	5,302.98	3,734.78

Due to variations in rounding, actual premium may vary.

<b>ADJUSTMENT FACTORS – UNDERWRITING CLASS</b>	
<b>Underwriting Class</b>	<b>All Ages</b>
Preferred	1.000
Standard	1.250

<b>ADJUSTMENT FACTORS – PREMIUM PAYMENT MODE</b>	
<b>Premium Payment Mode</b>	<b>All Ages</b>
Annual	1.000
Semi-Annual	0.510
Quarterly	0.265
Monthly	0.090
Auto-Monthly	0.085

<b>ADJUSTMENT FACTORS – MARITAL STATUS</b>			
<b>Marital Status</b>	<b>All Ages</b>		<b>Minimum Factor for all Discounts combined</b>
	<b>Without Good Health Discount</b>	<b>With Good Health Discount</b>	
Married Joint	0.80	0.70	0.70
Married Single	0.90	0.75	0.75
Single (Not Married)	1.00	0.85	0.75

**Appendix D**  
**The Prudential Insurance Company of America**  
**Individual Long Term Care Insurance Plan**  
**Automatic Simple Interest Inflation Protection**  
**Base Rates and Adjustment Factors - Year 1 of 3**

GRP 98720  
Page 3 of 5

ADJUSTMENT FACTORS – LIFETIME MAXIMUM (BENEFIT PERIOD)						
Benefit Period	Ages					
	18-39	40-49	50-59	60-69	70-79	80+
3 YEAR	0.856	0.840	0.833	0.831	0.824	0.813
4 YEAR	0.940	0.934	0.931	0.930	0.927	0.922
5 YEAR	1.000	1.000	1.000	1.000	1.000	1.000

ADJUSTMENT FACTORS – BENEFIT WAITING PERIOD						
Benefit Waiting Period	Ages					
	18-39	40-49	50-59	60-69	70-79	80+
0 DAY	1.105	1.134	1.165	1.191	1.225	1.269
30 DAY	1.078	1.101	1.126	1.145	1.165	1.187
60 DAY	1.045	1.058	1.071	1.080	1.092	1.105
100 DAY	1.000	1.000	1.000	1.000	1.000	1.000

ADJUSTMENT FACTORS – HOME & COMMUNITY-BASED CARE DAILY BENEFIT						
% of Institutional Benefit	Ages					
	18-39	40-49	50-59	60-69	70-79	80+
75%	1.000	1.000	1.000	1.000	1.000	1.000
50%	0.926	0.924	0.926	0.935	0.941	0.941
100%	1.057	1.062	1.065	1.058	1.042	1.033

Select only one (if any) of the following three Home & Community Based Care Options: Monthly, Cash, or Cash Indemnity Rider						
ADJUSTMENT FACTORS – MONTHLY BENEFIT RIDER (RIDER ONLY)						
HHC % of Institutional Benefit	Ages					
	18-39	40-49	50-59	60-69	70-79	80+
75%	0.060	0.071	0.082	0.077	0.057	0.051
50%	0.094	0.100	0.100	0.090	0.082	0.082
100%	0.034	0.047	0.059	0.056	0.045	0.051

ADJUSTMENT FACTORS – CASH BENEFIT RIDER (RIDER ONLY)							
HHC % of Institutional Benefit	Benefit Period	Ages					
		18-39	40-49	50-59	60-69	70-79	80+
75%	3 YEAR	0.857	0.857	0.818	0.750	0.718	0.704
	4 YEAR	0.857	0.857	0.818	0.750	0.718	0.704
	5 YEAR	0.857	0.857	0.818	0.750	0.718	0.704
	Unlimited	0.627	0.627	0.593	0.533	0.505	0.493
50%	3 YEAR	0.789	0.779	0.736	0.667	0.634	0.614
	4 YEAR	0.789	0.779	0.736	0.667	0.634	0.614
	5 YEAR	0.789	0.779	0.736	0.667	0.634	0.614
	Unlimited	0.568	0.559	0.520	0.461	0.433	0.415
100%	3 YEAR	0.893	0.899	0.864	0.807	0.803	0.817
	4 YEAR	0.893	0.899	0.864	0.807	0.803	0.817
	5 YEAR	0.893	0.899	0.864	0.807	0.803	0.817
	Unlimited	0.658	0.664	0.633	0.583	0.580	0.592

ADJUSTMENT FACTORS – CASH INDEMNITY RIDER (RIDER ONLY)							
HHC % of Institutional Benefit	Benefit Period	Ages					
		18-39	40-49	50-59	60-69	70-79	80+
75%	3 YEAR	0.471	0.471	0.450	0.413	0.395	0.387
	4 YEAR	0.471	0.471	0.450	0.413	0.395	0.387
	5 YEAR	0.471	0.471	0.450	0.413	0.395	0.387
	Unlimited	0.345	0.345	0.326	0.293	0.278	0.271
50%	3 YEAR	0.434	0.428	0.405	0.367	0.349	0.338
	4 YEAR	0.434	0.428	0.405	0.367	0.349	0.338
	5 YEAR	0.434	0.428	0.405	0.367	0.349	0.338
	Unlimited	0.312	0.307	0.286	0.254	0.238	0.228
100%	3 YEAR	0.491	0.494	0.475	0.444	0.442	0.449
	4 YEAR	0.491	0.494	0.475	0.444	0.442	0.449
	5 YEAR	0.491	0.494	0.475	0.444	0.442	0.449
	Unlimited	0.362	0.365	0.348	0.321	0.319	0.326

ADJUSTMENT FACTORS - SHORTENED BENEFIT PERIOD NONFORFEITURE (RIDER ONLY)						
(applies to base plan and rider premiums)						
Included	Ages					
	18-39	40-49	50-59	60-69	70-79	80+
NO	0.000	0.000	0.000	0.000	0.000	0.000
YES	0.197	0.185	0.161	0.152	0.180	0.190

Pennsylvania Rates  
Rates associated with December 2022 filing

**Appendix D**  
**The Prudential Insurance Company of America**  
**Individual Long Term Care Insurance Plan**  
**Automatic Compound Interest Inflation Protection**  
**Base Rates and Adjustment Factors - Year 1 of 3**

GRP 98721  
Page 4 of 5

ADJUSTMENT FACTORS – LIFETIME MAXIMUM (BENEFIT PERIOD)						
Benefit Period	Ages					
	18-39	40-49	50-59	60-69	70-79	80+
3 YEAR	0.844	0.837	0.832	0.832	0.825	0.815
4 YEAR	0.935	0.933	0.931	0.931	0.928	0.923
5 YEAR	1.000	1.000	1.000	1.000	1.000	1.000

ADJUSTMENT FACTORS – BENEFIT WAITING PERIOD						
Benefit Waiting Period	Ages					
	18-39	40-49	50-59	60-69	70-79	80+
0 DAY	1.137	1.144	1.171	1.196	1.226	1.270
30 DAY	1.102	1.109	1.130	1.147	1.166	1.187
60 DAY	1.057	1.063	1.073	1.081	1.092	1.105
100 DAY	1.000	1.000	1.000	1.000	1.000	1.000

ADJUSTMENT FACTORS – HOME & COMMUNITY-BASED CARE DAILY BENEFIT						
% of Institutional Benefit	Ages					
	18-39	40-49	50-59	60-69	70-79	80+
75%	1.000	1.000	1.000	1.000	1.000	1.000
50%	0.927	0.925	0.928	0.936	0.942	0.943
100%	1.057	1.056	1.057	1.049	1.034	1.029

Select only one (if any) of the following three Home & Community Based Care Options: Monthly, Cash, or Cash Indemnity Rider

ADJUSTMENT FACTORS – MONTHLY BENEFIT RIDER (RIDER ONLY)						
HHC % of Institutional Benefit	Ages					
	18-39	40-49	50-59	60-69	70-79	80+
75%	0.065	0.062	0.069	0.062	0.046	0.046
50%	0.094	0.099	0.097	0.089	0.082	0.080
100%	0.042	0.033	0.039	0.040	0.041	0.052

ADJUSTMENT FACTORS – CASH BENEFIT RIDER (RIDER ONLY)							
HHC % of Institutional Benefit	Benefit Period	Ages					
		18-39	40-49	50-59	60-69	70-79	80+
75%	3 YEAR	0.828	0.843	0.800	0.738	0.717	0.707
	4 YEAR	0.828	0.843	0.800	0.738	0.717	0.707
	5 YEAR	0.828	0.843	0.800	0.738	0.717	0.707
	Unlimited	0.602	0.615	0.578	0.523	0.504	0.495
50%	3 YEAR	0.757	0.766	0.718	0.657	0.632	0.613
	4 YEAR	0.757	0.766	0.718	0.657	0.632	0.613
	5 YEAR	0.757	0.766	0.718	0.657	0.632	0.613
	Unlimited	0.540	0.548	0.505	0.453	0.430	0.413
100%	3 YEAR	0.870	0.899	0.860	0.810	0.813	0.824
	4 YEAR	0.870	0.899	0.860	0.810	0.813	0.824
	5 YEAR	0.870	0.899	0.860	0.810	0.813	0.824
	Unlimited	0.638	0.664	0.629	0.587	0.589	0.599

ADJUSTMENT FACTORS – CASH INDEMNITY RIDER (RIDER ONLY)							
HHC % of Institutional Benefit	Benefit Period	Ages					
		18-39	40-49	50-59	60-69	70-79	80+
75%	3 YEAR	0.455	0.464	0.440	0.406	0.394	0.389
	4 YEAR	0.455	0.464	0.440	0.406	0.394	0.389
	5 YEAR	0.455	0.464	0.440	0.406	0.394	0.389
	Unlimited	0.331	0.338	0.318	0.288	0.277	0.272
50%	3 YEAR	0.416	0.421	0.395	0.361	0.348	0.337
	4 YEAR	0.416	0.421	0.395	0.361	0.348	0.337
	5 YEAR	0.416	0.421	0.395	0.361	0.348	0.337
	Unlimited	0.297	0.301	0.278	0.249	0.237	0.227
100%	3 YEAR	0.479	0.494	0.473	0.446	0.447	0.453
	4 YEAR	0.479	0.494	0.473	0.446	0.447	0.453
	5 YEAR	0.479	0.494	0.473	0.446	0.447	0.453
	Unlimited	0.351	0.365	0.346	0.323	0.324	0.329

ADJUSTMENT FACTORS - SHORTENED BENEFIT PERIOD NONFORFEITURE (RIDER ONLY)						
(applies to base plan and rider premiums)						
Included	Ages					
	18-39	40-49	50-59	60-69	70-79	80+
NO	0.000	0.000	0.000	0.000	0.000	0.000
YES	0.266	0.230	0.183	0.164	0.176	0.186

Pennsylvania Rates  
Rates associated with December 2022 filing

**Appendix D**  
**The Prudential Insurance Company of America**  
**Individual Long Term Care Insurance Plan**  
**Periodic Inflation Protection Offers**  
**Base Rates and Adjustment Factors - Year 1 of 3**

GRP 98722  
Page 5 of 5

ADJUSTMENT FACTORS – LIFETIME MAXIMUM (BENEFIT PERIOD)						
Benefit Period	Ages					
	18-39	40-49	50-59	60-69	70-79	80+
3 YEAR	0.896	0.875	0.863	0.857	0.845	0.835
4 YEAR	0.959	0.950	0.945	0.942	0.938	0.934
5 YEAR	1.000	1.000	1.000	1.000	1.000	1.000

ADJUSTMENT FACTORS – BENEFIT WAITING PERIOD						
Benefit Waiting Period	Ages					
	18-39	40-49	50-59	60-69	70-79	80+
0 DAY	1.085	1.118	1.156	1.190	1.231	1.277
30 DAY	1.063	1.090	1.121	1.147	1.172	1.193
60 DAY	1.037	1.053	1.069	1.081	1.096	1.108
100 DAY	1.000	1.000	1.000	1.000	1.000	1.000

ADJUSTMENT FACTORS – HOME & COMMUNITY-BASED CARE DAILY BENEFIT						
% of Institutional Benefit	Ages					
	18-39	40-49	50-59	60-69	70-79	80+
75%	1.000	1.000	1.000	1.000	1.000	1.000
50%	0.928	0.921	0.922	0.930	0.936	0.937
100%	1.067	1.076	1.081	1.074	1.059	1.048

Select only one (if any) of the following three Home & Community Based Care Options: Monthly, Cash, or Cash Indemnity Rider

ADJUSTMENT FACTORS – MONTHLY BENEFIT RIDER (RIDER ONLY)						
HHC % of Institutional Benefit	Ages					
	18-39	40-49	50-59	60-69	70-79	80+
75%	0.077	0.092	0.107	0.108	0.084	0.071
50%	0.089	0.101	0.104	0.097	0.089	0.088
100%	0.053	0.069	0.088	0.092	0.071	0.062

ADJUSTMENT FACTORS – CASH BENEFIT RIDER (RIDER ONLY)							
HHC % of Institutional Benefit	Benefit Period	Ages					
		18-39	40-49	50-59	60-69	70-79	80+
75%	3 YEAR	0.624	0.645	0.629	0.575	0.543	0.521
	4 YEAR	0.624	0.645	0.629	0.575	0.543	0.521
	5 YEAR	0.624	0.645	0.629	0.575	0.543	0.521
	Unlimited	0.729	0.752	0.735	0.678	0.644	0.620
50%	3 YEAR	0.561	0.573	0.551	0.500	0.466	0.441
	4 YEAR	0.561	0.573	0.551	0.500	0.466	0.441
	5 YEAR	0.561	0.573	0.551	0.500	0.466	0.441
	Unlimited	0.663	0.675	0.652	0.598	0.562	0.536
100%	3 YEAR	0.643	0.669	0.659	0.613	0.602	0.604
	4 YEAR	0.643	0.669	0.659	0.613	0.602	0.604
	5 YEAR	0.643	0.669	0.659	0.613	0.602	0.604
	Unlimited	0.750	0.778	0.767	0.718	0.706	0.708

ADJUSTMENT FACTORS – CASH INDEMNITY RIDER (RIDER ONLY)							
HHC % of Institutional Benefit	Benefit Period	Ages					
		18-39	40-49	50-59	60-69	70-79	80+
75%	3 YEAR	0.343	0.355	0.346	0.316	0.299	0.287
	4 YEAR	0.343	0.355	0.346	0.316	0.299	0.287
	5 YEAR	0.343	0.355	0.346	0.316	0.299	0.287
	Unlimited	0.401	0.414	0.404	0.373	0.354	0.341
50%	3 YEAR	0.309	0.315	0.303	0.275	0.256	0.243
	4 YEAR	0.309	0.315	0.303	0.275	0.256	0.243
	5 YEAR	0.309	0.315	0.303	0.275	0.256	0.243
	Unlimited	0.365	0.371	0.359	0.329	0.309	0.295
100%	3 YEAR	0.354	0.368	0.362	0.337	0.331	0.332
	4 YEAR	0.354	0.368	0.362	0.337	0.331	0.332
	5 YEAR	0.354	0.368	0.362	0.337	0.331	0.332
	Unlimited	0.413	0.428	0.422	0.395	0.388	0.389

ADJUSTMENT FACTORS - SHORTENED BENEFIT PERIOD NONFORFEITURE (RIDER ONLY)						
(applies to base plan and rider premiums)						
Included	Ages					
	18-39	40-49	50-59	60-69	70-79	80+
NO	0.000	0.000	0.000	0.000	0.000	0.000
YES	0.172	0.181	0.173	0.168	0.200	0.203

Pennsylvania Rates  
Rates associated with December 2022 filing

**Appendix D**  
**The Prudential Insurance Company of America**  
**Individual Long Term Care Insurance Plan**  
**Base Rates and Adjustment Factors - Year 2 of 3**

**GRP 98720, GRP 98721, GRP 98722**

**Page 1 of 5**

<b>Pennsylvania Rates Before Adjustments</b>			
<b>Gross Annual Preferred Single Premium Per \$10.00 of Institutional Care Daily Benefit Home &amp; Community-Based Care Daily Benefit: 75% of Institutional Care Daily Benefit \$1,825 x Daily Benefit Lifetime Maximum Benefit (5 Year Benefit Period) 100-Day Calendar Day Benefit Waiting Period</b>			
<b>Age</b>	<b>5% Automatic Simple Inflation</b>	<b>5% Automatic Compound Inflation</b>	<b>Periodic Inflation</b>
18-30	90.82	119.74	44.07
31	95.47	125.33	46.03
32	100.33	131.21	48.06
33	105.45	137.37	50.21
34	110.86	143.79	52.42
35	116.52	150.52	54.74
36	122.46	157.56	57.18
37	128.71	164.96	59.70
38	135.29	172.67	62.34
39	142.20	180.76	65.12
40	149.47	189.23	68.00
41	154.91	195.30	70.19
42	160.57	201.55	72.42
43	166.42	208.00	74.75
44	172.48	214.64	77.14
45	178.77	221.53	79.62
46	185.28	228.60	82.17
47	192.04	235.93	84.81
48	199.06	243.48	87.51
49	206.30	251.26	90.33
50	213.81	259.32	93.22
51	226.61	274.55	98.63
52	240.20	290.70	104.36
53	254.61	307.80	110.41
54	269.87	325.91	116.81
55	286.03	345.05	123.60
56	303.18	365.34	130.77
57	321.36	386.83	138.35
58	340.60	409.55	146.38
59	361.01	433.62	154.89
60	382.66	459.14	163.86
61	406.48	482.96	175.55
62	431.80	508.01	188.04
63	458.70	534.37	201.46
64	487.29	562.12	215.81
65	517.63	591.29	231.19
66	566.07	642.70	255.91
67	619.03	698.54	283.29
68	676.96	759.28	313.58
69	740.29	825.30	347.12
70	809.56	897.03	384.25
71	893.58	983.30	429.20
72	986.34	1,077.91	479.39
73	1,088.69	1,181.60	535.46
74	1,201.67	1,295.23	598.09
75	1,326.40	1,419.84	668.04
76	1,470.63	1,564.50	749.46
77	1,630.56	1,723.94	840.79
78	1,807.87	1,899.57	943.25
79	2,004.46	2,093.13	1,058.19
80	2,222.45	2,306.41	1,187.16
81	2,399.50	2,480.69	1,291.08
82	2,590.69	2,668.17	1,404.10
83	2,797.08	2,869.79	1,527.00
84	3,019.93	3,086.67	1,660.69
85	3,260.53	3,319.92	1,806.05

Due to variations in rounding, actual premium may vary.

<b>ADJUSTMENT FACTORS – UNDERWRITING CLASS</b>	
<b>Underwriting Class</b>	<b>All Ages</b>
Preferred	1.000
Standard	1.250

<b>ADJUSTMENT FACTORS – PREMIUM PAYMENT MODE</b>	
<b>Premium Payment Mode</b>	<b>All Ages</b>
Annual	1.000
Semi-Annual	0.510
Quarterly	0.265
Monthly	0.090
Auto-Monthly	0.085

<b>ADJUSTMENT FACTORS – MARITAL STATUS</b>			
<b>Marital Status</b>	<b>All Ages</b>		<b>Minimum Factor for all Discounts combined</b>
	<b>Without Good Health Discount</b>	<b>With Good Health Discount</b>	
Married Joint	0.80	0.70	0.70
Married Single	0.90	0.75	0.75
Single (Not Married)	1.00	0.85	0.75

**Appendix D**  
**The Prudential Insurance Company of America**  
**Individual Long Term Care Insurance Plan**  
**Base Rates and Adjustment Factors - Year 2 of 3**

**GRP 98720, GRP 98721, GRP 98722**  
**Page 2 of 5**

Pennsylvania Rates Before Adjustments			
Gross Annual Preferred Single Premium Per \$10.00 of Institutional Care Daily Benefit Home & Community-Based Care Daily Benefit: 75% of Institutional Care Daily Benefit Unlimited Daily Benefit Lifetime Maximum Benefit 100-Day Calendar Day Benefit Waiting Period			
Age	5% Automatic Simple Inflation	5% Automatic Compound Inflation	Periodic Inflation
18-30	172.58	229.57	83.45
31	181.40	240.29	87.16
32	190.64	251.58	91.01
33	200.37	263.39	95.08
34	210.65	275.68	99.27
35	221.41	288.59	103.66
36	232.69	302.08	108.28
37	244.57	316.27	113.05
38	257.07	331.06	118.05
39	270.21	346.58	123.31
40	290.64	367.40	133.53
41	301.21	379.19	137.83
42	312.22	391.33	142.21
43	323.59	403.86	146.78
44	335.39	416.74	151.48
45	347.61	430.11	156.35
46	360.27	443.85	161.35
47	373.42	458.09	166.54
48	387.06	472.74	171.84
49	401.14	487.85	177.38
50	415.14	501.65	186.10
51	439.98	531.10	196.90
52	466.38	562.35	208.34
53	494.34	595.42	220.42
54	523.98	630.45	233.19
55	555.34	667.47	246.75
56	588.64	706.72	261.06
57	623.94	748.30	276.19
58	661.31	792.26	292.23
59	700.93	838.82	309.21
60	734.22	877.68	327.89
61	779.93	923.21	351.28
62	828.50	971.12	376.27
63	880.11	1,021.49	403.12
64	934.97	1,074.54	431.84
65	993.19	1,130.29	462.62
66	1,086.13	1,228.58	512.08
67	1,187.76	1,335.33	566.87
68	1,298.90	1,451.42	627.48
69	1,420.41	1,577.62	694.59
70	1,556.79	1,718.60	780.25
71	1,718.37	1,883.89	871.53
72	1,896.75	2,065.14	973.44
73	2,093.58	2,263.80	1,087.29
74	2,310.83	2,481.50	1,214.47
75	2,550.68	2,720.22	1,356.51
76	2,828.03	2,997.39	1,521.84
77	3,135.60	3,302.85	1,707.29
78	3,476.56	3,639.35	1,915.35
79	3,854.61	4,010.18	2,148.74
80	4,343.65	4,494.59	2,454.96
81	4,689.70	4,834.20	2,669.86
82	5,063.37	5,199.55	2,903.57
83	5,466.75	5,592.46	3,157.72
84	5,902.29	6,015.10	3,434.18
85	6,372.55	6,469.64	3,734.78

Due to variations in rounding, actual premium may vary.

ADJUSTMENT FACTORS – UNDERWRITING CLASS	
Underwriting Class	All Ages
Preferred	1.000
Standard	1.250

ADJUSTMENT FACTORS – PREMIUM PAYMENT MODE	
Premium Payment Mode	All Ages
Annual	1.000
Semi-Annual	0.510
Quarterly	0.265
Monthly	0.090
Auto-Monthly	0.085

ADJUSTMENT FACTORS – MARITAL STATUS			
Marital Status	All Ages		Minimum Factor for all Discounts combined
	Without Good Health Discount	With Good Health Discount	
Married Joint	0.80	0.70	0.70
Married Single	0.90	0.75	0.75
Single (Not Married)	1.00	0.85	0.75

**Appendix D**  
**The Prudential Insurance Company of America**  
**Individual Long Term Care Insurance Plan**  
**Automatic Simple Interest Inflation Protection**  
**Base Rates and Adjustment Factors - Year 2 of 3**

GRP 98720  
Page 3 of 5

ADJUSTMENT FACTORS – LIFETIME MAXIMUM (BENEFIT PERIOD)						
Benefit Period	Ages					
	18-39	40-49	50-59	60-69	70-79	80+
3 YEAR	0.856	0.840	0.833	0.831	0.824	0.813
4 YEAR	0.940	0.934	0.931	0.930	0.927	0.922
5 YEAR	1.000	1.000	1.000	1.000	1.000	1.000

ADJUSTMENT FACTORS – BENEFIT WAITING PERIOD						
Benefit Waiting Period	Ages					
	18-39	40-49	50-59	60-69	70-79	80+
0 DAY	1.105	1.134	1.165	1.191	1.225	1.269
30 DAY	1.078	1.101	1.126	1.145	1.165	1.187
60 DAY	1.045	1.058	1.071	1.080	1.092	1.105
100 DAY	1.000	1.000	1.000	1.000	1.000	1.000

ADJUSTMENT FACTORS – HOME & COMMUNITY-BASED CARE DAILY BENEFIT						
% of Institutional Benefit	Ages					
	18-39	40-49	50-59	60-69	70-79	80+
75%	1.000	1.000	1.000	1.000	1.000	1.000
50%	0.926	0.924	0.926	0.935	0.941	0.941
100%	1.057	1.062	1.065	1.058	1.042	1.033

Select only one (if any) of the following three Home & Community Based Care Options: Monthly, Cash, or Cash Indemnity Rider						
ADJUSTMENT FACTORS – MONTHLY BENEFIT RIDER (RIDER ONLY)						
HHC % of Institutional Benefit	Ages					
	18-39	40-49	50-59	60-69	70-79	80+
75%	0.060	0.071	0.082	0.077	0.057	0.051
50%	0.094	0.100	0.100	0.090	0.082	0.082
100%	0.034	0.047	0.059	0.056	0.045	0.051

ADJUSTMENT FACTORS – CASH BENEFIT RIDER (RIDER ONLY)							
HHC % of Institutional Benefit	Benefit Period	Ages					
		18-39	40-49	50-59	60-69	70-79	80+
75%	3 YEAR	0.857	0.857	0.818	0.750	0.718	0.704
	4 YEAR	0.857	0.857	0.818	0.750	0.718	0.704
	5 YEAR	0.857	0.857	0.818	0.750	0.718	0.704
	Unlimited	0.640	0.640	0.606	0.546	0.517	0.505
50%	3 YEAR	0.789	0.779	0.736	0.667	0.634	0.614
	4 YEAR	0.789	0.779	0.736	0.667	0.634	0.614
	5 YEAR	0.789	0.779	0.736	0.667	0.634	0.614
	Unlimited	0.581	0.572	0.532	0.473	0.445	0.427
100%	3 YEAR	0.893	0.899	0.864	0.807	0.803	0.817
	4 YEAR	0.893	0.899	0.864	0.807	0.803	0.817
	5 YEAR	0.893	0.899	0.864	0.807	0.803	0.817
	Unlimited	0.672	0.678	0.646	0.596	0.593	0.605

ADJUSTMENT FACTORS – CASH INDEMNITY RIDER (RIDER ONLY)							
HHC % of Institutional Benefit	Benefit Period	Ages					
		18-39	40-49	50-59	60-69	70-79	80+
75%	3 YEAR	0.471	0.471	0.450	0.413	0.395	0.387
	4 YEAR	0.471	0.471	0.450	0.413	0.395	0.387
	5 YEAR	0.471	0.471	0.450	0.413	0.395	0.387
	Unlimited	0.352	0.352	0.333	0.300	0.284	0.278
50%	3 YEAR	0.434	0.428	0.405	0.367	0.349	0.338
	4 YEAR	0.434	0.428	0.405	0.367	0.349	0.338
	5 YEAR	0.434	0.428	0.405	0.367	0.349	0.338
	Unlimited	0.320	0.315	0.293	0.260	0.245	0.235
100%	3 YEAR	0.491	0.494	0.475	0.444	0.442	0.449
	4 YEAR	0.491	0.494	0.475	0.444	0.442	0.449
	5 YEAR	0.491	0.494	0.475	0.444	0.442	0.449
	Unlimited	0.370	0.373	0.355	0.328	0.326	0.333

ADJUSTMENT FACTORS - SHORTENED BENEFIT PERIOD NONFORFEITURE (RIDER ONLY)						
(applies to base plan and rider premiums)						
Included	Ages					
	18-39	40-49	50-59	60-69	70-79	80+
NO	0.000	0.000	0.000	0.000	0.000	0.000
YES	0.197	0.185	0.161	0.152	0.180	0.190

Pennsylvania Rates  
Rates associated with December 2022 filing

**Appendix D**  
**The Prudential Insurance Company of America**  
**Individual Long Term Care Insurance Plan**  
**Automatic Compound Interest Inflation Protection**  
**Base Rates and Adjustment Factors - Year 2 of 3**

GRP 98721  
Page 4 of 5

ADJUSTMENT FACTORS – LIFETIME MAXIMUM (BENEFIT PERIOD)						
Benefit Period	Ages					
	18-39	40-49	50-59	60-69	70-79	80+
3 YEAR	0.844	0.837	0.832	0.832	0.825	0.815
4 YEAR	0.935	0.933	0.931	0.931	0.928	0.923
5 YEAR	1.000	1.000	1.000	1.000	1.000	1.000

ADJUSTMENT FACTORS – BENEFIT WAITING PERIOD						
Benefit Waiting Period	Ages					
	18-39	40-49	50-59	60-69	70-79	80+
0 DAY	1.137	1.144	1.171	1.196	1.226	1.270
30 DAY	1.102	1.109	1.130	1.147	1.166	1.187
60 DAY	1.057	1.063	1.073	1.081	1.092	1.105
100 DAY	1.000	1.000	1.000	1.000	1.000	1.000

ADJUSTMENT FACTORS – HOME & COMMUNITY-BASED CARE DAILY BENEFIT						
% of Institutional Benefit	Ages					
	18-39	40-49	50-59	60-69	70-79	80+
75%	1.000	1.000	1.000	1.000	1.000	1.000
50%	0.927	0.925	0.928	0.936	0.942	0.943
100%	1.057	1.056	1.057	1.049	1.034	1.029

Select only one (if any) of the following three Home & Community Based Care Options: Monthly, Cash, or Cash Indemnity Rider

ADJUSTMENT FACTORS – MONTHLY BENEFIT RIDER (RIDER ONLY)						
HHC % of Institutional Benefit	Ages					
	18-39	40-49	50-59	60-69	70-79	80+
75%	0.065	0.062	0.069	0.062	0.046	0.046
50%	0.094	0.099	0.097	0.089	0.082	0.080
100%	0.042	0.033	0.039	0.040	0.041	0.052

ADJUSTMENT FACTORS – CASH BENEFIT RIDER (RIDER ONLY)							
HHC % of Institutional Benefit	Benefit Period	Ages					
		18-39	40-49	50-59	60-69	70-79	80+
75%	3 YEAR	0.828	0.843	0.800	0.738	0.717	0.707
	4 YEAR	0.828	0.843	0.800	0.738	0.717	0.707
	5 YEAR	0.828	0.843	0.800	0.738	0.717	0.707
	Unlimited	0.615	0.628	0.591	0.535	0.516	0.507
50%	3 YEAR	0.757	0.766	0.718	0.657	0.632	0.613
	4 YEAR	0.757	0.766	0.718	0.657	0.632	0.613
	5 YEAR	0.757	0.766	0.718	0.657	0.632	0.613
	Unlimited	0.553	0.561	0.517	0.465	0.442	0.425
100%	3 YEAR	0.870	0.899	0.860	0.810	0.813	0.824
	4 YEAR	0.870	0.899	0.860	0.810	0.813	0.824
	5 YEAR	0.870	0.899	0.860	0.810	0.813	0.824
	Unlimited	0.651	0.678	0.642	0.600	0.602	0.612

ADJUSTMENT FACTORS – CASH INDEMNITY RIDER (RIDER ONLY)							
HHC % of Institutional Benefit	Benefit Period	Ages					
		18-39	40-49	50-59	60-69	70-79	80+
75%	3 YEAR	0.455	0.464	0.440	0.406	0.394	0.389
	4 YEAR	0.455	0.464	0.440	0.406	0.394	0.389
	5 YEAR	0.455	0.464	0.440	0.406	0.394	0.389
	Unlimited	0.338	0.345	0.325	0.294	0.284	0.279
50%	3 YEAR	0.416	0.421	0.395	0.361	0.348	0.337
	4 YEAR	0.416	0.421	0.395	0.361	0.348	0.337
	5 YEAR	0.416	0.421	0.395	0.361	0.348	0.337
	Unlimited	0.304	0.309	0.284	0.256	0.243	0.234
100%	3 YEAR	0.479	0.494	0.473	0.446	0.447	0.453
	4 YEAR	0.479	0.494	0.473	0.446	0.447	0.453
	5 YEAR	0.479	0.494	0.473	0.446	0.447	0.453
	Unlimited	0.358	0.373	0.353	0.330	0.331	0.337

ADJUSTMENT FACTORS - SHORTENED BENEFIT PERIOD NONFORFEITURE (RIDER ONLY)						
(applies to base plan and rider premiums)						
Included	Ages					
	18-39	40-49	50-59	60-69	70-79	80+
NO	0.000	0.000	0.000	0.000	0.000	0.000
YES	0.266	0.230	0.183	0.164	0.176	0.186

Pennsylvania Rates  
Rates associated with December 2022 filing



**Appendix D**  
**The Prudential Insurance Company of America**  
**Individual Long Term Care Insurance Plan**  
**Periodic Inflation Protection Offers**  
**Base Rates and Adjustment Factors - Year 2 of 3**

GRP 98722  
Page 5 of 5

ADJUSTMENT FACTORS – LIFETIME MAXIMUM (BENEFIT PERIOD)						
Benefit Period	Ages					
	18-39	40-49	50-59	60-69	70-79	80+
3 YEAR	0.896	0.875	0.863	0.857	0.845	0.835
4 YEAR	0.959	0.950	0.945	0.942	0.938	0.934
5 YEAR	1.000	1.000	1.000	1.000	1.000	1.000

ADJUSTMENT FACTORS – BENEFIT WAITING PERIOD						
Benefit Waiting Period	Ages					
	18-39	40-49	50-59	60-69	70-79	80+
0 DAY	1.085	1.118	1.156	1.190	1.231	1.277
30 DAY	1.063	1.090	1.121	1.147	1.172	1.193
60 DAY	1.037	1.053	1.069	1.081	1.096	1.108
100 DAY	1.000	1.000	1.000	1.000	1.000	1.000

ADJUSTMENT FACTORS – HOME & COMMUNITY-BASED CARE DAILY BENEFIT						
% of Institutional Benefit	Ages					
	18-39	40-49	50-59	60-69	70-79	80+
75%	1.000	1.000	1.000	1.000	1.000	1.000
50%	0.928	0.921	0.922	0.930	0.936	0.937
100%	1.067	1.076	1.081	1.074	1.059	1.048

Select only one (if any) of the following three Home & Community Based Care Options: Monthly, Cash, or Cash Indemnity Rider						
ADJUSTMENT FACTORS – MONTHLY BENEFIT RIDER (RIDER ONLY)						
HHC % of Institutional Benefit	Ages					
	18-39	40-49	50-59	60-69	70-79	80+
75%	0.077	0.092	0.107	0.108	0.084	0.071
50%	0.089	0.101	0.104	0.097	0.089	0.088
100%	0.053	0.069	0.088	0.092	0.071	0.062

ADJUSTMENT FACTORS – CASH BENEFIT RIDER (RIDER ONLY)							
HHC % of Institutional Benefit	Benefit Period	Ages					
		18-39	40-49	50-59	60-69	70-79	80+
75%	3 YEAR	0.624	0.645	0.629	0.575	0.543	0.521
	4 YEAR	0.624	0.645	0.629	0.575	0.543	0.521
	5 YEAR	0.624	0.645	0.629	0.575	0.543	0.521
	Unlimited	0.729	0.752	0.735	0.678	0.644	0.620
50%	3 YEAR	0.561	0.573	0.551	0.500	0.466	0.441
	4 YEAR	0.561	0.573	0.551	0.500	0.466	0.441
	5 YEAR	0.561	0.573	0.551	0.500	0.466	0.441
	Unlimited	0.663	0.675	0.652	0.598	0.562	0.536
100%	3 YEAR	0.643	0.669	0.659	0.613	0.602	0.604
	4 YEAR	0.643	0.669	0.659	0.613	0.602	0.604
	5 YEAR	0.643	0.669	0.659	0.613	0.602	0.604
	Unlimited	0.750	0.778	0.767	0.718	0.706	0.708

ADJUSTMENT FACTORS – CASH INDEMNITY RIDER (RIDER ONLY)							
HHC % of Institutional Benefit	Benefit Period	Ages					
		18-39	40-49	50-59	60-69	70-79	80+
75%	3 YEAR	0.343	0.355	0.346	0.316	0.299	0.287
	4 YEAR	0.343	0.355	0.346	0.316	0.299	0.287
	5 YEAR	0.343	0.355	0.346	0.316	0.299	0.287
	Unlimited	0.401	0.414	0.404	0.373	0.354	0.341
50%	3 YEAR	0.309	0.315	0.303	0.275	0.256	0.243
	4 YEAR	0.309	0.315	0.303	0.275	0.256	0.243
	5 YEAR	0.309	0.315	0.303	0.275	0.256	0.243
	Unlimited	0.365	0.371	0.359	0.329	0.309	0.295
100%	3 YEAR	0.354	0.368	0.362	0.337	0.331	0.332
	4 YEAR	0.354	0.368	0.362	0.337	0.331	0.332
	5 YEAR	0.354	0.368	0.362	0.337	0.331	0.332
	Unlimited	0.413	0.428	0.422	0.395	0.388	0.389

ADJUSTMENT FACTORS - SHORTENED BENEFIT PERIOD NONFORFEITURE (RIDER ONLY)						
(applies to base plan and rider premiums)						
Included	Ages					
	18-39	40-49	50-59	60-69	70-79	80+
NO	0.000	0.000	0.000	0.000	0.000	0.000
YES	0.172	0.181	0.173	0.168	0.200	0.203

Pennsylvania Rates  
Rates associated with December 2022 filing

**Appendix D**  
**The Prudential Insurance Company of America**  
**Individual Long Term Care Insurance Plan**  
**Base Rates and Adjustment Factors - Year 3 of 3**

**GRP 98720, GRP 98721, GRP 98722**

**Page 1 of 5**

<b>Pennsylvania Rates Before Adjustments</b>			
<b>Gross Annual Preferred Single Premium Per \$10.00 of Institutional Care Daily Benefit Home &amp; Community-Based Care Daily Benefit: 75% of Institutional Care Daily Benefit \$1,825 x Daily Benefit Lifetime Maximum Benefit (5 Year Benefit Period) 100-Day Calendar Day Benefit Waiting Period</b>			
<b>Age</b>	<b>5% Automatic Simple Inflation</b>	<b>5% Automatic Compound Inflation</b>	<b>Periodic Inflation</b>
18-30	90.82	119.74	44.07
31	95.47	125.33	46.03
32	100.33	131.21	48.06
33	105.45	137.37	50.21
34	110.86	143.79	52.42
35	116.52	150.52	54.74
36	122.46	157.56	57.18
37	128.71	164.96	59.70
38	135.29	172.67	62.34
39	142.20	180.76	65.12
40	149.47	189.23	68.00
41	154.91	195.30	70.19
42	160.57	201.55	72.42
43	166.42	208.00	74.75
44	172.48	214.64	77.14
45	178.77	221.53	79.62
46	185.28	228.60	82.17
47	192.04	235.93	84.81
48	199.06	243.48	87.51
49	206.30	251.26	90.33
50	213.81	259.32	93.22
51	226.61	274.55	98.63
52	240.20	290.70	104.36
53	254.61	307.80	110.41
54	269.87	325.91	116.81
55	286.03	345.05	123.60
56	303.18	365.34	130.77
57	321.36	386.83	138.35
58	340.60	409.55	146.38
59	361.01	433.62	154.89
60	382.66	459.14	163.86
61	406.48	482.96	175.55
62	431.80	508.01	188.04
63	458.70	534.37	201.46
64	487.29	562.12	215.81
65	517.63	591.29	231.19
66	566.07	642.70	255.91
67	619.03	698.54	283.29
68	676.96	759.28	313.58
69	740.29	825.30	347.12
70	809.56	897.03	384.25
71	893.58	983.30	429.20
72	986.34	1,077.91	479.39
73	1,088.69	1,181.60	535.46
74	1,201.67	1,295.23	598.09
75	1,326.40	1,419.84	668.04
76	1,470.63	1,564.50	749.46
77	1,630.56	1,723.94	840.79
78	1,807.87	1,899.57	943.25
79	2,004.46	2,093.13	1,058.19
80	2,222.45	2,306.41	1,187.16
81	2,399.50	2,480.69	1,291.08
82	2,590.69	2,668.17	1,404.10
83	2,797.08	2,869.79	1,527.00
84	3,019.93	3,086.67	1,660.69
85	3,260.53	3,319.92	1,806.05

Due to variations in rounding, actual premium may vary.

<b>ADJUSTMENT FACTORS – UNDERWRITING CLASS</b>	
<b>Underwriting Class</b>	<b>All Ages</b>
Preferred	1.000
Standard	1.250

<b>ADJUSTMENT FACTORS – PREMIUM PAYMENT MODE</b>	
<b>Premium Payment Mode</b>	<b>All Ages</b>
Annual	1.000
Semi-Annual	0.510
Quarterly	0.265
Monthly	0.090
Auto-Monthly	0.085

<b>ADJUSTMENT FACTORS – MARITAL STATUS</b>			
<b>Marital Status</b>	<b>All Ages</b>		<b>Minimum Factor for all Discounts combined</b>
	<b>Without Good Health Discount</b>	<b>With Good Health Discount</b>	
Married Joint	0.80	0.70	0.70
Married Single	0.90	0.75	0.75
Single (Not Married)	1.00	0.85	0.75

**Appendix D**  
**The Prudential Insurance Company of America**  
**Individual Long Term Care Insurance Plan**  
**Base Rates and Adjustment Factors - Year 3 of 3**

**GRP 98720, GRP 98721, GRP 98722**

**Page 2 of 5**

<b>Pennsylvania Rates Before Adjustments</b>			
<b>Gross Annual Preferred Single Premium Per \$10.00 of Institutional Care Daily Benefit Home &amp; Community-Based Care Daily Benefit: 75% of Institutional Care Daily Benefit Unlimited Daily Benefit Lifetime Maximum Benefit 100-Day Calendar Day Benefit Waiting Period</b>			
<b>Age</b>	<b>5% Automatic Simple Inflation</b>	<b>5% Automatic Compound Inflation</b>	<b>Periodic Inflation</b>
18-30	172.58	229.57	83.45
31	181.40	240.29	87.16
32	190.64	251.58	91.01
33	200.37	263.39	95.08
34	210.65	275.68	99.27
35	221.41	288.59	103.66
36	232.69	302.08	108.28
37	244.57	316.27	113.05
38	257.07	331.06	118.05
39	270.21	346.58	123.31
40	290.64	367.40	133.53
41	301.21	379.19	137.83
42	312.22	391.33	142.21
43	323.59	403.86	146.78
44	335.39	416.74	151.48
45	347.61	430.11	156.35
46	360.27	443.85	161.35
47	373.42	458.09	166.54
48	387.06	472.74	171.84
49	401.14	487.85	177.38
50	415.14	501.65	186.10
51	439.98	531.10	196.90
52	466.38	562.35	208.34
53	494.34	595.42	220.42
54	523.98	630.45	233.19
55	555.34	667.47	246.75
56	588.64	706.72	261.06
57	623.94	748.30	276.19
58	661.31	792.26	292.23
59	700.93	838.82	309.21
60	734.22	877.68	327.89
61	779.93	923.21	351.28
62	828.50	971.12	376.27
63	880.11	1,021.49	403.12
64	934.97	1,074.54	431.84
65	993.19	1,130.29	462.62
66	1,086.13	1,228.58	512.08
67	1,187.76	1,335.33	566.87
68	1,298.90	1,451.42	627.48
69	1,420.41	1,577.62	694.59
70	1,556.79	1,718.60	780.25
71	1,718.37	1,883.89	871.53
72	1,896.75	2,065.14	973.44
73	2,093.58	2,263.80	1,087.29
74	2,310.83	2,481.50	1,214.47
75	2,550.68	2,720.22	1,356.51
76	2,828.03	2,997.39	1,521.84
77	3,135.60	3,302.85	1,707.29
78	3,476.56	3,639.35	1,915.35
79	3,854.61	4,010.18	2,148.74
80	4,343.65	4,494.59	2,454.96
81	4,689.70	4,834.20	2,669.86
82	5,063.37	5,199.55	2,903.57
83	5,466.75	5,592.46	3,157.72
84	5,902.29	6,015.10	3,434.18
85	6,372.55	6,469.64	3,734.78

Due to variations in rounding, actual premium may vary.

<b>ADJUSTMENT FACTORS – UNDERWRITING CLASS</b>	
<b>Underwriting Class</b>	<b>All Ages</b>
Preferred	1.000
Standard	1.250

<b>ADJUSTMENT FACTORS – PREMIUM PAYMENT MODE</b>	
<b>Premium Payment Mode</b>	<b>All Ages</b>
Annual	1.000
Semi-Annual	0.510
Quarterly	0.265
Monthly	0.090
Auto-Monthly	0.085

<b>ADJUSTMENT FACTORS – MARITAL STATUS</b>			
<b>Marital Status</b>	<b>All Ages</b>		<b>Minimum Factor for all Discounts combined</b>
	<b>Without Good Health Discount</b>	<b>With Good Health Discount</b>	
Married Joint	0.80	0.70	0.70
Married Single	0.90	0.75	0.75
Single (Not Married)	1.00	0.85	0.75

**Appendix D**  
**The Prudential Insurance Company of America**  
**Individual Long Term Care Insurance Plan**  
**Automatic Simple Interest Inflation Protection**  
**Base Rates and Adjustment Factors - Year 3 of 3**

GRP 98720  
Page 3 of 5

ADJUSTMENT FACTORS – LIFETIME MAXIMUM (BENEFIT PERIOD)						
Benefit Period	Ages					
	18-39	40-49	50-59	60-69	70-79	80+
3 YEAR	0.856	0.840	0.833	0.831	0.824	0.813
4 YEAR	0.940	0.934	0.931	0.930	0.927	0.922
5 YEAR	1.000	1.000	1.000	1.000	1.000	1.000

ADJUSTMENT FACTORS – BENEFIT WAITING PERIOD						
Benefit Waiting Period	Ages					
	18-39	40-49	50-59	60-69	70-79	80+
0 DAY	1.105	1.134	1.165	1.191	1.225	1.269
30 DAY	1.078	1.101	1.126	1.145	1.165	1.187
60 DAY	1.045	1.058	1.071	1.080	1.092	1.105
100 DAY	1.000	1.000	1.000	1.000	1.000	1.000

ADJUSTMENT FACTORS – HOME & COMMUNITY-BASED CARE DAILY BENEFIT						
% of Institutional Benefit	Ages					
	18-39	40-49	50-59	60-69	70-79	80+
75%	1.000	1.000	1.000	1.000	1.000	1.000
50%	0.926	0.924	0.926	0.935	0.941	0.941
100%	1.057	1.062	1.065	1.058	1.042	1.033

Select only one (if any) of the following three Home & Community Based Care Options: Monthly, Cash, or Cash Indemnity Rider						
ADJUSTMENT FACTORS – MONTHLY BENEFIT RIDER (RIDER ONLY)						
HHC % of Institutional Benefit	Ages					
	18-39	40-49	50-59	60-69	70-79	80+
75%	0.060	0.071	0.082	0.077	0.057	0.051
50%	0.094	0.100	0.100	0.090	0.082	0.082
100%	0.034	0.047	0.059	0.056	0.045	0.051

ADJUSTMENT FACTORS – CASH BENEFIT RIDER (RIDER ONLY)							
HHC % of Institutional Benefit	Benefit Period	Ages					
		18-39	40-49	50-59	60-69	70-79	80+
75%	3 YEAR	0.857	0.857	0.818	0.750	0.718	0.704
	4 YEAR	0.857	0.857	0.818	0.750	0.718	0.704
	5 YEAR	0.857	0.857	0.818	0.750	0.718	0.704
	Unlimited	1.016	1.016	0.974	0.900	0.864	0.850
50%	3 YEAR	0.789	0.779	0.736	0.667	0.634	0.614
	4 YEAR	0.789	0.779	0.736	0.667	0.634	0.614
	5 YEAR	0.789	0.779	0.736	0.667	0.634	0.614
	Unlimited	0.943	0.932	0.883	0.810	0.776	0.754
100%	3 YEAR	0.893	0.899	0.864	0.807	0.803	0.817
	4 YEAR	0.893	0.899	0.864	0.807	0.803	0.817
	5 YEAR	0.893	0.899	0.864	0.807	0.803	0.817
	Unlimited	1.055	1.062	1.023	0.961	0.958	0.973

ADJUSTMENT FACTORS – CASH INDEMNITY RIDER (RIDER ONLY)							
HHC % of Institutional Benefit	Benefit Period	Ages					
		18-39	40-49	50-59	60-69	70-79	80+
75%	3 YEAR	0.471	0.471	0.450	0.413	0.395	0.387
	4 YEAR	0.471	0.471	0.450	0.413	0.395	0.387
	5 YEAR	0.471	0.471	0.450	0.413	0.395	0.387
	Unlimited	0.559	0.559	0.536	0.495	0.475	0.468
50%	3 YEAR	0.434	0.428	0.405	0.367	0.349	0.338
	4 YEAR	0.434	0.428	0.405	0.367	0.349	0.338
	5 YEAR	0.434	0.428	0.405	0.367	0.349	0.338
	Unlimited	0.519	0.513	0.486	0.446	0.427	0.415
100%	3 YEAR	0.491	0.494	0.475	0.444	0.442	0.449
	4 YEAR	0.491	0.494	0.475	0.444	0.442	0.449
	5 YEAR	0.491	0.494	0.475	0.444	0.442	0.449
	Unlimited	0.580	0.584	0.563	0.529	0.527	0.535

ADJUSTMENT FACTORS - SHORTENED BENEFIT PERIOD NONFORFEITURE (RIDER ONLY)						
(applies to base plan and rider premiums)						
Included	Ages					
	18-39	40-49	50-59	60-69	70-79	80+
NO	0.000	0.000	0.000	0.000	0.000	0.000
YES	0.197	0.185	0.161	0.152	0.180	0.190

Pennsylvania Rates  
Rates associated with December 2022 filing

**Appendix D**  
**The Prudential Insurance Company of America**  
**Individual Long Term Care Insurance Plan**  
**Automatic Compound Interest Inflation Protection**  
**Base Rates and Adjustment Factors - Year 3 of 3**

GRP 98721  
Page 4 of 5

ADJUSTMENT FACTORS – LIFETIME MAXIMUM (BENEFIT PERIOD)						
Benefit Period	Ages					
	18-39	40-49	50-59	60-69	70-79	80+
3 YEAR	0.844	0.837	0.832	0.832	0.825	0.815
4 YEAR	0.935	0.933	0.931	0.931	0.928	0.923
5 YEAR	1.000	1.000	1.000	1.000	1.000	1.000

ADJUSTMENT FACTORS – BENEFIT WAITING PERIOD						
Benefit Waiting Period	Ages					
	18-39	40-49	50-59	60-69	70-79	80+
0 DAY	1.137	1.144	1.171	1.196	1.226	1.270
30 DAY	1.102	1.109	1.130	1.147	1.166	1.187
60 DAY	1.057	1.063	1.073	1.081	1.092	1.105
100 DAY	1.000	1.000	1.000	1.000	1.000	1.000

ADJUSTMENT FACTORS – HOME & COMMUNITY-BASED CARE DAILY BENEFIT						
% of Institutional Benefit	Ages					
	18-39	40-49	50-59	60-69	70-79	80+
75%	1.000	1.000	1.000	1.000	1.000	1.000
50%	0.927	0.925	0.928	0.936	0.942	0.943
100%	1.057	1.056	1.057	1.049	1.034	1.029

Select only one (if any) of the following three Home & Community Based Care Options: Monthly, Cash, or Cash Indemnity Rider

ADJUSTMENT FACTORS – MONTHLY BENEFIT RIDER (RIDER ONLY)						
HHC % of Institutional Benefit	Ages					
	18-39	40-49	50-59	60-69	70-79	80+
75%	0.065	0.062	0.069	0.062	0.046	0.046
50%	0.094	0.099	0.097	0.089	0.082	0.080
100%	0.042	0.033	0.039	0.040	0.041	0.052

ADJUSTMENT FACTORS – CASH BENEFIT RIDER (RIDER ONLY)							
HHC % of Institutional Benefit	Benefit Period	Ages					
		18-39	40-49	50-59	60-69	70-79	80+
75%	3 YEAR	0.828	0.843	0.800	0.738	0.717	0.707
	4 YEAR	0.828	0.843	0.800	0.738	0.717	0.707
	5 YEAR	0.828	0.843	0.800	0.738	0.717	0.707
	Unlimited	0.985	1.001	0.955	0.887	0.863	0.852
50%	3 YEAR	0.757	0.766	0.718	0.657	0.632	0.613
	4 YEAR	0.757	0.766	0.718	0.657	0.632	0.613
	5 YEAR	0.757	0.766	0.718	0.657	0.632	0.613
	Unlimited	0.909	0.918	0.864	0.800	0.772	0.751
100%	3 YEAR	0.870	0.899	0.860	0.810	0.813	0.824
	4 YEAR	0.870	0.899	0.860	0.810	0.813	0.824
	5 YEAR	0.870	0.899	0.860	0.810	0.813	0.824
	Unlimited	1.029	1.062	1.018	0.966	0.969	0.981

ADJUSTMENT FACTORS – CASH INDEMNITY RIDER (RIDER ONLY)							
HHC % of Institutional Benefit	Benefit Period	Ages					
		18-39	40-49	50-59	60-69	70-79	80+
75%	3 YEAR	0.455	0.464	0.440	0.406	0.394	0.389
	4 YEAR	0.455	0.464	0.440	0.406	0.394	0.389
	5 YEAR	0.455	0.464	0.440	0.406	0.394	0.389
	Unlimited	0.542	0.551	0.525	0.488	0.475	0.469
50%	3 YEAR	0.416	0.421	0.395	0.361	0.348	0.337
	4 YEAR	0.416	0.421	0.395	0.361	0.348	0.337
	5 YEAR	0.416	0.421	0.395	0.361	0.348	0.337
	Unlimited	0.500	0.505	0.475	0.440	0.425	0.413
100%	3 YEAR	0.479	0.494	0.473	0.446	0.447	0.453
	4 YEAR	0.479	0.494	0.473	0.446	0.447	0.453
	5 YEAR	0.479	0.494	0.473	0.446	0.447	0.453
	Unlimited	0.566	0.584	0.560	0.531	0.533	0.540

ADJUSTMENT FACTORS - SHORTENED BENEFIT PERIOD NONFORFEITURE (RIDER ONLY)						
(applies to base plan and rider premiums)						
Included	Ages					
	18-39	40-49	50-59	60-69	70-79	80+
NO	0.000	0.000	0.000	0.000	0.000	0.000
YES	0.266	0.230	0.183	0.164	0.176	0.186

Pennsylvania Rates  
Rates associated with December 2022 filing

**Appendix D**  
**The Prudential Insurance Company of America**  
**Individual Long Term Care Insurance Plan**  
**Periodic Inflation Protection Offers**  
**Base Rates and Adjustment Factors - Year 3 of 3**

GRP 98722  
Page 5 of 5

ADJUSTMENT FACTORS – LIFETIME MAXIMUM (BENEFIT PERIOD)						
Benefit Period	Ages					
	18-39	40-49	50-59	60-69	70-79	80+
3 YEAR	0.896	0.875	0.863	0.857	0.845	0.835
4 YEAR	0.959	0.950	0.945	0.942	0.938	0.934
5 YEAR	1.000	1.000	1.000	1.000	1.000	1.000

ADJUSTMENT FACTORS – BENEFIT WAITING PERIOD						
Benefit Waiting Period	Ages					
	18-39	40-49	50-59	60-69	70-79	80+
0 DAY	1.085	1.118	1.156	1.190	1.231	1.277
30 DAY	1.063	1.090	1.121	1.147	1.172	1.193
60 DAY	1.037	1.053	1.069	1.081	1.096	1.108
100 DAY	1.000	1.000	1.000	1.000	1.000	1.000

ADJUSTMENT FACTORS – HOME & COMMUNITY-BASED CARE DAILY BENEFIT						
% of Institutional Benefit	Ages					
	18-39	40-49	50-59	60-69	70-79	80+
75%	1.000	1.000	1.000	1.000	1.000	1.000
50%	0.928	0.921	0.922	0.930	0.936	0.937
100%	1.067	1.076	1.081	1.074	1.059	1.048

Select only one (if any) of the following three Home & Community Based Care Options: Monthly, Cash, or Cash Indemnity Rider						
ADJUSTMENT FACTORS – MONTHLY BENEFIT RIDER (RIDER ONLY)						
HHC % of Institutional Benefit	Ages					
	18-39	40-49	50-59	60-69	70-79	80+
75%	0.077	0.092	0.107	0.108	0.084	0.071
50%	0.089	0.101	0.104	0.097	0.089	0.088
100%	0.053	0.069	0.088	0.092	0.071	0.062

ADJUSTMENT FACTORS – CASH BENEFIT RIDER (RIDER ONLY)							
HHC % of Institutional Benefit	Benefit Period	Ages					
		18-39	40-49	50-59	60-69	70-79	80+
75%	3 YEAR	0.624	0.645	0.629	0.575	0.543	0.521
	4 YEAR	0.624	0.645	0.629	0.575	0.543	0.521
	5 YEAR	0.624	0.645	0.629	0.575	0.543	0.521
	Unlimited	0.729	0.752	0.735	0.678	0.644	0.620
50%	3 YEAR	0.561	0.573	0.551	0.500	0.466	0.441
	4 YEAR	0.561	0.573	0.551	0.500	0.466	0.441
	5 YEAR	0.561	0.573	0.551	0.500	0.466	0.441
	Unlimited	0.663	0.675	0.652	0.598	0.562	0.536
100%	3 YEAR	0.643	0.669	0.659	0.613	0.602	0.604
	4 YEAR	0.643	0.669	0.659	0.613	0.602	0.604
	5 YEAR	0.643	0.669	0.659	0.613	0.602	0.604
	Unlimited	0.750	0.778	0.767	0.718	0.706	0.708

ADJUSTMENT FACTORS – CASH INDEMNITY RIDER (RIDER ONLY)							
HHC % of Institutional Benefit	Benefit Period	Ages					
		18-39	40-49	50-59	60-69	70-79	80+
75%	3 YEAR	0.343	0.355	0.346	0.316	0.299	0.287
	4 YEAR	0.343	0.355	0.346	0.316	0.299	0.287
	5 YEAR	0.343	0.355	0.346	0.316	0.299	0.287
	Unlimited	0.401	0.414	0.404	0.373	0.354	0.341
50%	3 YEAR	0.309	0.315	0.303	0.275	0.256	0.243
	4 YEAR	0.309	0.315	0.303	0.275	0.256	0.243
	5 YEAR	0.309	0.315	0.303	0.275	0.256	0.243
	Unlimited	0.365	0.371	0.359	0.329	0.309	0.295
100%	3 YEAR	0.354	0.368	0.362	0.337	0.331	0.332
	4 YEAR	0.354	0.368	0.362	0.337	0.331	0.332
	5 YEAR	0.354	0.368	0.362	0.337	0.331	0.332
	Unlimited	0.413	0.428	0.422	0.395	0.388	0.389

ADJUSTMENT FACTORS - SHORTENED BENEFIT PERIOD NONFORFEITURE (RIDER ONLY)						
(applies to base plan and rider premiums)						
Included	Ages					
	18-39	40-49	50-59	60-69	70-79	80+
NO	0.000	0.000	0.000	0.000	0.000	0.000
YES	0.172	0.181	0.173	0.168	0.200	0.203

Pennsylvania Rates  
Rates associated with December 2022 filing

SERFF Tracking #:

PRUD-133505176

State Tracking #:

PRUD-133505176

Company Tracking #:

IIGH-ILTC1-PRE RS-MK-PA-R12

State: Pennsylvania

Filing Company:

The Prudential Insurance Company of America

TOI/Sub-TOI: LTC03I Individual Long Term Care/LTC03I.001 Qualified

Product Name: Individual LongTerm Care Insurance

Project Name/Number: ILTC1 PreRS ReRate Round 12/12I-2022

## Supporting Document Schedules

<b>Satisfied - Item:</b>	Transmittal Letter (A&H)
<b>Comments:</b>	
<b>Attachment(s):</b>	PA-ILTC1 PreRS-Filing Cover Letter.pdf
<b>Item Status:</b>	
<b>Status Date:</b>	

<b>Bypassed - Item:</b>	Actuarial Certification (A&H)
<b>Bypass Reason:</b>	N/A
<b>Attachment(s):</b>	
<b>Item Status:</b>	
<b>Status Date:</b>	

<b>Satisfied - Item:</b>	Actuarial Memorandum and Explanatory Information (A&H)
<b>Comments:</b>	
<b>Attachment(s):</b>	PA ILTC1 PreRS Act Memo - Revised Rates.pdf
<b>Item Status:</b>	
<b>Status Date:</b>	

<b>Bypassed - Item:</b>	Advertisements (A&H)
<b>Bypass Reason:</b>	N/A
<b>Attachment(s):</b>	
<b>Item Status:</b>	
<b>Status Date:</b>	

<b>Bypassed - Item:</b>	Authorization to File (A&H)
<b>Bypass Reason:</b>	N/A
<b>Attachment(s):</b>	
<b>Item Status:</b>	
<b>Status Date:</b>	

<b>Bypassed - Item:</b>	Insert Page Explanation (A&H)
<b>Bypass Reason:</b>	N/A
<b>Attachment(s):</b>	
<b>Item Status:</b>	
<b>Status Date:</b>	

**SERFF Tracking #:**

PRUD-133505176

**State Tracking #:**

PRUD-133505176

**Company Tracking #:**

IGH-ILTC1-PRE RS-MK-PA-R12

**State:**

Pennsylvania

**Filing Company:**

The Prudential Insurance Company of America

**TOI/Sub-TOI:**

LTC03I Individual Long Term Care/LTC03I.001 Qualified

**Product Name:**

Individual LongTerm Care Insurance

**Project Name/Number:**

ILTC1 PreRS ReRate Round 12/12I-2022

<b>Bypassed - Item:</b>	Rate Table (A&H)
<b>Bypass Reason:</b>	Please refer to Appendix D, Rate Pages attached to the Rate Schedule Tab of this filing.
<b>Attachment(s):</b>	
<b>Item Status:</b>	
<b>Status Date:</b>	

<b>Bypassed - Item:</b>	Replacement Form with Highlighted Changes (A&H)
<b>Bypass Reason:</b>	N/A
<b>Attachment(s):</b>	
<b>Item Status:</b>	
<b>Status Date:</b>	

<b>Bypassed - Item:</b>	Advertisement Compliance Certification
<b>Bypass Reason:</b>	N/A
<b>Attachment(s):</b>	
<b>Item Status:</b>	
<b>Status Date:</b>	

<b>Bypassed - Item:</b>	Reserve Calculation (A&H)
<b>Bypass Reason:</b>	Please refer to the enclosed Actuarial Memorandum.
<b>Attachment(s):</b>	
<b>Item Status:</b>	
<b>Status Date:</b>	

<b>Bypassed - Item:</b>	Variability Explanation (A&H)
<b>Bypass Reason:</b>	N/A
<b>Attachment(s):</b>	
<b>Item Status:</b>	
<b>Status Date:</b>	

<b>Satisfied - Item:</b>	Appendix C - Description of Experience Analysis and Assumption Setting
<b>Comments:</b>	
<b>Attachment(s):</b>	Appendix C - Description of Experience Analysis and Assumption Setting.pdf
<b>Item Status:</b>	
<b>Status Date:</b>	

<b>Satisfied - Item:</b>	Appendix C - Exhibit 1 - Mortality Details - ILTC
--------------------------	---



**SERFF Tracking #:**

PRUD-133505176

**State Tracking #:**

PRUD-133505176

**Company Tracking #:**

IGH-ILTC1-PRE RS-MK-PA-R12

**State:**

Pennsylvania

**Filing Company:**

The Prudential Insurance Company of America

**TOI/Sub-TOI:**

LTC03I Individual Long Term Care/LTC03I.001 Qualified

**Product Name:**

Individual LongTerm Care Insurance

**Project Name/Number:**

ILTC1 PreRS ReRate Round 12/12I-2022

<b>Comments:</b>	
<b>Attachment(s):</b>	Appendix C - Exhibit 1 - Mortality Details - ILTC.pdf
<b>Item Status:</b>	
<b>Status Date:</b>	

<b>Satisfied - Item:</b>	Appendix C - Exhibit 2 - Lapse Details - ILTC
<b>Comments:</b>	
<b>Attachment(s):</b>	Appendix C - Exhibit 2 - Lapse Details - ILTC.pdf
<b>Item Status:</b>	
<b>Status Date:</b>	

<b>Satisfied - Item:</b>	Appendix C - Exhibit 3 - Incidence Study - ILTC
<b>Comments:</b>	
<b>Attachment(s):</b>	Appendix C - Exhibit 3 - Incidence Study - ILTC.pdf
<b>Item Status:</b>	
<b>Status Date:</b>	

<b>Satisfied - Item:</b>	Appendix C - Exhibit 4 - Utilization Details - ILTC
<b>Comments:</b>	
<b>Attachment(s):</b>	Appendix C - Exhibit 4 - Utilization Details - ILTC.pdf
<b>Item Status:</b>	
<b>Status Date:</b>	

<b>Satisfied - Item:</b>	Appendix C - Exhibit 5 - Claim Termination Death - ILTC
<b>Comments:</b>	
<b>Attachment(s):</b>	Appendix C - Exhibit 5 - Claim Termination Death - ILTC.pdf
<b>Item Status:</b>	
<b>Status Date:</b>	

<b>Satisfied - Item:</b>	Appendix C - Exhibit 6 - Claim Termination Recovery - ILTC
<b>Comments:</b>	
<b>Attachment(s):</b>	Appendix C - Exhibit 6 - Claim Termination Recovery - ILTC.pdf
<b>Item Status:</b>	
<b>Status Date:</b>	

<b>Satisfied - Item:</b>	ILTC1 App A B E
<b>Comments:</b>	

SERFF Tracking #:

PRUD-133505176

State Tracking #:

PRUD-133505176

Company Tracking #:

IIGH-ILTC1-PRE RS-MK-PA-R12

State: Pennsylvania

Filing Company:

The Prudential Insurance Company of America

TOI/Sub-TOI: LTC03I Individual Long Term Care/LTC03I.001 Qualified

Product Name: Individual LongTerm Care Insurance

Project Name/Number: ILTC1 PreRS ReRate Round 12/12I-2022

Attachment(s):	PA ILTC1 Pre-RS App A B E.xlsx
Item Status:	
Status Date:	

Satisfied - Item:	ILTC1 Approved & Requested RI
Comments:	
Attachment(s):	ILTC1 Approved & Requested RI.xlsx
Item Status:	
Status Date:	

Satisfied - Item:	ILTC1 Assumption Comparison
Comments:	
Attachment(s):	ILTC1 Assumption Comparison.xlsx
Item Status:	
Status Date:	

Satisfied - Item:	ILTC1 Pre-RS Policyholders Inforce
Comments:	
Attachment(s):	ILTC1 Pre-RS Policyholders Inforce.xlsx
Item Status:	
Status Date:	

Satisfied - Item:	Policyholder Notification Package
Comments:	
Attachment(s):	LTC-Policyholder Notification Letter-Options-FAQ Round 12 (ILTC1).pdf LTC-Change Request Form Round 12 (ILTC1).pdf
Item Status:	
Status Date:	

Satisfied - Item:	Letter of Response 01/11/2023
Comments:	
Attachment(s):	PA ILTC1 Pre-RS resp to 2023-01-03 obj.pdf
Item Status:	
Status Date:	

Satisfied - Item:	PA Pre-RS ILTC1 App B without rate increase
Comments:	
Attachment(s):	PA Pre-RS ILTC1 App B without rate increase.xlsx

**SERFF Tracking #:**

PRUD-133505176

**State Tracking #:**

PRUD-133505176

**Company Tracking #:**

IIGH-ILTC1-PRE RS-MK-PA-R12

**State:**

Pennsylvania

**Filing Company:**

The Prudential Insurance Company of America

**TOI/Sub-TOI:**

LTC03I Individual Long Term Care/LTC03I.001 Qualified

**Product Name:**

Individual LongTerm Care Insurance

**Project Name/Number:**

ILTC1 PreRS ReRate Round 12/12I-2022

<b>Item Status:</b>	
<b>Status Date:</b>	

SERFF Tracking #:

PRUD-133505176

State Tracking #:

PRUD-133505176

Company Tracking #:

IIGH-ILTC1-PRE RS-MK-PA-R12

---

State:

Pennsylvania

Filing Company:

The Prudential Insurance Company of America

TOI/Sub-TOI:

LTC03I Individual Long Term Care/LTC03I.001 Qualified

Product Name:

Individual LongTerm Care Insurance

Project Name/Number:

ILTC1 PreRS ReRate Round 12/12I-2022

***Attachment PA ILTC1 Pre-RS App A B E.xlsx is not a PDF document and cannot be reproduced here.***

***Attachment ILTC1 Approved & Requested RI.xlsx is not a PDF document and cannot be reproduced here.***

***Attachment ILTC1 Assumption Comparison.xlsx is not a PDF document and cannot be reproduced here.***

***Attachment ILTC1 Pre-RS Policyholders Inforce.xlsx is not a PDF document and cannot be reproduced here.***

***Attachment PA Pre-RS ILTC1 App B without rate increase.xlsx is not a PDF document and cannot be reproduced here.***



**Michael Zilberman, FSA, MAAA**  
 Director, Actuary  
 Prudential Long Term Care

The Prudential Insurance Company of America  
 Long Term Care Unit  
 213 Washington Street, 10<sup>th</sup> Floor  
 Newark, NJ 07102  
 Tel 973-716-4225  
 Michael.Zilberman@prudential.com

December 22, 2022

The Honorable Michael Humphreys  
 Commissioner of Insurance  
 Pennsylvania Insurance Department  
 1326 Strawberry Square  
 Harrisburg, Pennsylvania 17120

Re.: The Prudential Insurance Company of America  
 NAIC #304-68241  
 Individual Long Term Care Insurance  
 Form Numbers: GRP 98720, GRP 98721 and GRP 98722, et al

Dear Commissioner Humphreys:

Enclosed for your review is support for a requested increase to our long-term care insurance premium rate schedule, for the above referenced forms.

Forms GRP 98720, GRP 98721 and GRP 98722 were previously approved by the Department on December 23, 2002, and its form series was sold nationwide during the period of 1999 through 2012. This product is no longer being marketed in any state.

The most recent rate schedule change under this series of forms was reviewed and filed by the Department under SERFF tracking number PRUD-132798393 on September 9, 2021.

We are requesting a rate increase for the above referenced policy series of the following amounts:

Inflation Type	Benefit Type	Benefit Period	Requested Rate Increase Year1	Requested Rate Increase Year 2	Requested Rate Increase Year 3
No Inflation	Cash	Lifetime or 10 year	28.1%	0.0%	0.0%
No Inflation	Cash	less than 10 year	0.0%	0.0%	0.0%
No Inflation	Reimbursement	Lifetime or 10 year	15.7%	0.0%	0.0%
No Inflation	Reimbursement	less than 10 year	0.0%	0.0%	0.0%
Auto Inflation	Cash	Lifetime or 10 year	23.0%	23.0%	22.9%
Auto Inflation	Cash	less than 10 year	28.2%	0.0%	0.0%
Auto Inflation	Reimbursement	Lifetime or 10 year	22.0%	22.0%	0.0%
Auto Inflation	Reimbursement	less than 10 year	15.8%	0.0%	0.0%

The rate increase is needed to help ensure that future premiums, in combination with existing reserves, will be adequate to fund anticipated claims. We will continue to monitor the performance of this block of business after this rate action.

The requested rate increases will not restore original profit margins, but will help Prudential avoid additional losses as well as further depletion of its surplus. Approval of the requested rate increase will also help maintain equity amongst the states.

The proposed premium rates will be effective on each policy's first modal premium due date that is on or after the effective date, which Prudential will establish following state authorization. Prudential will provide all policyholders at least 60 days advance notice of the rate increase.

We understand that a premium increase may be difficult for our policyholders to absorb. Consequently, Prudential is prepared to offer a number of options to help mitigate or eliminate the impact of the higher premium an insured is paying, such as reducing their benefit period, decreasing their daily benefit, or dropping rider(s) (e.g. optional coverage). Additionally, as an alternative, the Contingent Non-forfeiture benefit will be made available to all impacted policyholders whose plan design does not already include a Non-forfeiture Benefit Rider.

The following items are included with this submission:

- All Actuarial Material
- All Required Certifications
- State transmittal and checklists (If applicable)
- Policyholder Notification Package

Filing Fees: The filing fee has been submitted through SERFF EFT.

**Correspondence:** Please correspond via SERFF or directly with my associate shown below concerning this filing.

Edward Leshar ASA MAAA  
Associate Actuary  
The Prudential Insurance Company of America  
2101 Welsh Rd  
Dresher, PA 19125  
(215) 784-2652  
e-mail: [edward.lesher@prudential.com](mailto:edward.lesher@prudential.com)

Very truly yours,



Michael Zilberman, FSA, MAAA  
Director, Actuary

Enclosures

December 22, 2022  
**Actuarial Memorandum Supporting Rate Revision for  
The Prudential Insurance Company of America  
Individual Long-Term Care Insurance Plan  
Pennsylvania  
Policies Issued Prior 9/16/2002**

**1. Scope and Purpose**

The purpose of this memorandum is to provide actuarial information supporting a rate revision to premiums for the following The Prudential Insurance Company of America’s Tax-Qualified individual long-term care Forms and their associated riders:

<u>Product Name</u>	<u>Form Number</u>	<u>Issue Dates in Pennsylvania</u>
ILTC1, Simple Inflation	GRP 98720	08/1999 - 09/2002
ILTC1, Compound Inflation	GRP 98721	08/1999 - 09/2002
ILTC1, Periodic Inflation Option	GRP 98722	08/1999 - 09/2002

Some riders may not be available in all states. This rate filing is not intended to be used for other purposes.

This rate filing is a request for a rate increase in premium varying by Inflation Type, Benefit Type, and Benefit Period (see table below), effective upon approval by the state, on the base contract and all associated riders. References to policyholders with No Inflation in this actuarial memorandum and appendices is intended to be our classification for those policyholders that didn't elect an automatic inflation option, which includes those without an inflation rider and those with the Guaranteed Purchase Option (GPO).

<b>Inflation Type</b>	<b>Benefit Type</b>	<b>Benefit Period</b>	<b>Requested Rate Increase Year1</b>	<b>Requested Rate Increase Year 2</b>	<b>Requested Rate Increase Year 3</b>
No Inflation	Cash	Lifetime or 10 year	28.1%	0.0%	0.0%
No Inflation	Cash	Less than 10 year	0.0%	0.0%	0.0%
No Inflation	Reimbursement	Lifetime or 10 year	15.7%	0.0%	0.0%
No Inflation	Reimbursement	Less than 10 year	0.0%	0.0%	0.0%
Auto Inflation	Cash	Lifetime or 10 year	23.0%	23.0%	22.9%
Auto Inflation	Cash	Less than 10 year	28.2%	0.0%	0.0%
Auto Inflation	Reimbursement	Lifetime or 10 year	22.0%	22.0%	0.0%
Auto Inflation	Reimbursement	Less than 10 year	15.8%	0.0%	0.0%

These revisions are necessary because the current best estimate projections of the nationwide lifetime loss ratios are higher than the originally priced expected lifetime loss ratios. The higher lifetime loss ratios are due to adverse morbidity and persistency experience. If the requested rate increase is approved and implemented as proposed, Prudential does not expect to request additional rate increases based on current expectations of future experience. However, if actual future experience were to deteriorate further, additional rate action may become necessary even if the requested rate increase is approved and implemented as proposed.

Prudential is filing for premium rate increases in each state where policies of these forms were issued.

Upon approval of this rate revision, Prudential will communicate to policyholders their options to reduce the impact of the rate increase. There will be opportunities for most, if not all, policyholders to keep the premium close to the premium they were paying prior to the rate revision. These options may include reducing the lifetime maximum, reducing the daily benefit, and eliminating optional riders. In addition to what is included in the policyholder notification letter, policyholders will be notified that they can call our customer service representatives to work out a benefit reduction that best works for their situation.

In addition, the contingent non-forfeiture benefit will be available for all policyholders impacted by this rate increase, regardless of their age or rate increase amount.

Please refer to Section 20 for a description of the information contained in each Appendix included in the filing.

## **2. Description of Benefits**

The policies issued on these forms are referred as the “ILTC1” product series. This product was individually underwritten and provides comprehensive long-term care coverage for care received in a nursing home, assisted living facility, or hospice in addition to home and community-based care. This product is intended to be a Tax Qualified Long Term Care Insurance Contract as defined by the internal revenue code section 7702B(b).

This product reimburses covered long-term care expenses subject to the amount of coverage purchased. An elimination period, institutional daily benefit amount, home and community care percentage, maximum lifetime benefit amount and inflation protection option are selected at issue. The available choices can be found in the attached premium rate tables.

The benefit eligibility criteria is based on the insured’s loss of the ability to perform two of the six activities of daily living (ADLs) or having a severe cognitive impairment. Activities of Daily Living are bathing, continence, dressing, eating, toileting, and transferring. Premiums will be



waived beginning the first day of the next month following completion of the applicable elimination period.

There are several optional riders that were sold with this product, including a cash benefit option and a monthly benefit option. The cash benefit option allows the insured to choose to receive benefits for Home and Community-Based Care as a cash benefit rather than as reimbursement. No formal services are required to receive a cash benefit. Policies with the cash benefit option are referred to as “Cash Plans” and plans without the cash benefit option are referred to as “Reimbursement Plans”. The monthly benefit option provides benefits for Home and Community-Based Care on a monthly basis such that any or all of the benefits for Home and Community-Based Care can be used within the time frames that meet the insured’s needs.

### **3. Renewability Clause**

This product is a Guaranteed Renewable, Individual Long Term Care policy.

### **4. Applicability**

The premium increase contained in this memorandum will be applicable to all active premium-paying policy holders of the policy form and riders described in Section 1, as these policy forms are no longer sold in the market. The revised premium rate schedules can be found in Appendix D.

### **5. Actuarial Assumptions**

The actuarial assumptions used to project the future premiums and claims are described in this section. Appendix C provides further details of how the experience studies were conducted that were used to develop the actuarial assumptions. Our assumptions this year continue to be on a first principles basis. In the first principles model, experience is studied separately for active (or “healthy”) and disabled lives (in approved claim status). First principles modeling allows for greater transparency and flexibility to study drivers of claims and perform sensitivities. The assumptions used in this filing are Prudential’s 2022 best estimate expectations of future experience for the individual long term care block of business, and do not include any provisions for adverse experience. These assumptions are the basis for the assumptions being used in Prudential’s internal cash flow testing.

### **Morbidity**

The best estimate for claims incidence, claim terminations due to death and claim termination due to recovery assumptions were developed based on a combination of Prudential’s historical

claim experience, the Milliman 2020 Long Term Care Guidelines (Guidelines) on a first principles basis and judgment. Claim utilization assumptions were developed based on Prudential's historical claim experience and judgment. The policy design and coverages and the underwriting applied at the time of issue were all considered when setting each morbidity component assumption. The first principles assumptions reflect Prudential's 2022 best estimate of future morbidity. The best estimate assumptions do not include an assumption for morbidity improvement. The assumptions do not include any adverse selection from the rate increase or loads for moderately adverse experience.

## Mortality

Healthy lives mortality assumptions were developed from a mortality study conducted on Prudential's healthy life experience and judgment. The 2022 best estimate mortality assumption is the 2012 IAM Basic Table on an Age Last Birthday basis with mortality selection factors for healthy life experience and mortality improvement. The mortality selection factors varies by line of business, gender, issue age and duration of the policy. Disabled lives mortality assumptions reside in the morbidity components, also known as claim terminations deaths, and were developed from a mortality study conducted on Prudential's disabled life experience and judgment, and consideration of the Milliman Guidelines and Society of Actuaries LTC experience. The mortality study for 2022 best estimate assumptions excludes experience after 12/31/2019, due to COVID-19, as that is a short-term impact and these are long term assumptions.

As part of the first principles modeling framework, different mortality improvement assumptions have been developed for healthy lives and disabled lives. For disabled lives, future mortality improvement rates are 0.0%, which is consistent with actual experience and industry practice. For healthy lives, the mortality improvement structure remains unchanged from 2021, is generational, and varies by attained age and gender. We base our improvement assumption on the G2 improvement scale that is published with the 2012 IAM mortality base tables. We assume all remaining policies would terminate at attained age 120. The assumptions do not include any loads for moderately adverse experience.

## Lapses

The voluntary lapse assumptions were developed from a policy persistency study conducted on Prudential's long-term care policy healthy life experience. The voluntary lapse assumptions are our expectations for policy terminations, by duration, for reasons other than death, benefit exhaustion or benefit buy-downs. The lapse assumptions represent the 2022 best estimate expectations of future experience and do not include any provisions for adverse experience. The application of rates is applied to healthy lives only, consistent with the first principles basis, with the disabled life lapse rate assumed at 0.0%. At time of premium rate increase notification, policyholders may elect a nonforfeiture benefit or an optional benefit reduction and the impact of these policyholder elections is modelled in our projections. Voluntary lapse rates for the Lifetime Premium Pay policies are shown below.

Policy Duration	Auto Inflation		No Inflation	
	Single	Married	Single	Married
1-5	2.57%	1.67%	5.58%	3.63%
6 – 9	1.29%	0.84%	2.79%	1.81%
10 – 14	0.94%	0.61%	2.03%	1.32%
15+	0.82%	0.53%	1.77%	1.15%

NOTE: No inflation includes plans without inflation and GPO.

## Interest Rate

An annual interest rate of 4.5% was used to calculate the lifetime loss ratio in the supporting appendices. This was determined based on the predominant number of certificates issues in years that the maximum statutory valuation rate was 4.5%.

## Expenses

The need for a rate increase is based on the lifetime loss ratio being in excess of the minimum loss ratio. Expenses do not directly impact the lifetime loss ratio and therefore are not used as justification for the rate increase. As such, expenses are not being projected and are not included in this filing.

### 6. Issue Age Range

This product was available for issue ages 18 - 84. Premiums are based on issue age.

### 7. Area Factors

Prudential did not use area factors within the state in the premium scale for this product.

### 8. Average Annual Premium

The average annual premium for this product for both prior to the impact of the requested rate increase, and after, is indicated in Appendix A to this memorandum.

### 9. Modal Premium Factors

Modal loads are required because of the varied expenses incurred by Prudential and the effect

of interest and persistency. The modal premium factors will remain unchanged from the current factors.

## **10. Claim Liability and Reserve**

Claim reserves were calculated using appropriate actuarial methods for IBNR and for open claims on a disabled life basis. The claim reserves were discounted to the date of incurral for each claim and have been included in the historical incurred claims. An annual interest rate of 4.5% was used to calculate the present value of future claims in the supporting exhibits.

## **11. Active Life Reserves**

We have provided supporting evidence for the justification of the proposed increase based on the relationship of incurred claims divided by earned premium compared to the minimum required loss ratios. Incurred claims exclude any change in active life reserves.

## **12. Trend Assumption**

Benefits payable are equal to or less than the daily or monthly benefit limit. We have not included any medical trend in the projections.

## **13. Requested Rate Increase and Demonstration of Satisfaction of Loss Ratio Requirements**

Prudential is requesting a premium increase varying by inflation type, benefit type, and benefit period, to be applied to all ILTC1 active policies issued prior to September 16, 2002.

Satisfaction of minimum required loss ratio requirements is demonstrated in Appendix A. This approach shows that with the requested rate increase the expected lifetime loss ratio exceeds the minimum loss ratio requirement. The minimum loss ratio for this state is shown in Appendix A.

## **14. Distribution of Business**

The historical experience reflects the actual distribution of policies during the experience period. We used the current distribution of business as of June 30, 2022 to project future experience.

## **15. Experience – Past and Future**

The historical and projected nationwide experience, both with and without the rate increase, is contained in Appendix B. Note that there is no margin for adverse deviation in the future incurred claim projections in Appendix B. Additionally, the historical and projected nationwide experience is on a Pennsylvania rate basis.

The historical and projected experience for this state, both with and without the rate increase, is contained in Appendix E. Note that there is no margin for adverse deviation in the future incurred claim projections in Appendix E.

Historical experience is shown by claim incurral year.

## **16. Lifetime Loss Ratio**

The anticipated nationwide lifetime loss ratios, both without a rate increase and with the requested rate increase, are shown in Appendix A. The development of these nationwide lifetime loss ratios is shown in Appendix B.

The rate increase is assumed effective June 1, 2023 in our projections.

## **17. History of Rate Adjustments**

See Appendix A for a history of previous rate adjustments on this policy form.

## **18. Number of Policyholders**

The current number of policyholders as of June 30, 2022 can be found in Appendix A.

## **19. Proposed Effective Date**

This rate revision will be implemented following state approval and a minimum of a 60-day notification to the policy holder. Implementation will be no earlier than June 1, 2023.

## **20. Summary of Appendices**

Appendix A contains state-specific information, indexed to the section numbers applied in this memorandum.

Appendix B contains historical and projected nationwide experience for all policies issued under this form on a Pennsylvania state rate basis. The appendix also includes the projected lifetime loss ratios both without and with the proposed increase as well as additional appendices for state rate since issue basis and on a state rate basis with original premium levels. Note that there is no margin for adverse deviation in the future incurred claim projections in Appendix B.

Appendix C describes the development of the best estimate mortality, voluntary lapse, incidence, utilization, claim termination by death and claim termination by recovery assumptions. Included within Appendix C are six exhibits that show actual experience to projected best estimate experience. The best estimate values in these exhibits reflect Prudential's assumptions developed in 2022. Actual to expected results close to 100% demonstrate that the current assumptions are reasonable compared to the actual results.

Appendix D contains the premium rate pages associated with this filing.

Appendix E contains the same information as Appendix B except it contains only state specific experience and projections.

ILTC1 Approved & Requested RI contains the rerate history for this product for each state.

ILTC1 Assumption Comparison compares the assumptions for the original filing, the most recent filing, and the current filing for this product.

ILTC1 Pre-RS Policyholders Inforce contains the seriatim data for this product.

## **21. Relationship of Renewal Premium to New Business Premium.**

Prudential is no longer selling any new Long-Term Care business. Therefore, the comparison of renewal premium rates after the rate increase to Prudential's current new business premium rate schedule is not applicable.

## 22. Actuarial Certification

I am a member of the American Academy of Actuaries. I meet the Academy's qualification standards for rendering this opinion and am familiar with the requirements for filing long term care insurance premiums.

To the best of my knowledge and judgment this rate filing is in compliance with the applicable laws and regulations of this State as they relate to premium rate developments and revisions

The policy design and coverages, the underwriting used at the time of issue, and the claim adjudication process were all taken into consideration.

In forming my opinion, I have used actuarial assumptions and actuarial methods as I considered necessary. The pricing assumptions are consistent with Prudential's current best estimates. The premium rates are not excessive or unfairly discriminatory.

A handwritten signature in black ink that reads "Michael Zilberman". The signature is written in a cursive, flowing style.

Michael Zilberman, FSA, MAAA  
Director, Actuary  
Prudential Long Term Care  
December 22, 2022

## Appendix C

### The Prudential Insurance Company of America

#### Description of Experience Analysis and Assumption Setting

##### Mortality Study

The 2Q22 Best Estimate Healthy Lives Mortality Assumption applies to policies that are not in pending or approved claim status. This is consistent with the application of the rates in the first principles model. The healthy lives mortality rate assumptions are calculated in four parts: (1) a base rate mortality table, (2) selection factors based on Prudential healthy life experience, (3) a historical mortality improvement factor and (4) future mortality improvement for healthy lives. The best estimate assumption is applied at the policy level, as: (base rate from mortality table \* selection factor \* historical improvement \* future improvement). The specific rate from the industry mortality table is based on attained age and gender; the selection factor varies by line of business, gender, attained age, issue age and duration of the policy; and historical improvement is a single factor based on population improvement from the midpoint of the study period to the start of future improvement. Future improvement is now a generational table that varies by year, attained age and gender. The selection factor assumptions (2) are developed separately for ILTC and GLTC based on experience, but the base industry rate table (1) and improvement factors (3 & 4) are the same for both products.

We use the 2012 IAM Basic Table on an ALB basis adjusted for actual healthy life experience with judgment adjustments in the places we are not yet credible, i.e. ultimate selection factors as there is no healthy only industry mortality table. Mortality selection factors vary by issue age, attained age, gender, duration, and product type to best match our actual healthy life experience using the total lives industry mortality table as a base.

Future Mortality improvement is a factor that is applied to the mortality rate that has been adjusted by selection factors in a given projected year. It is intended to reflect the notion that the probability of death for a given attained age will decrease over time, as the population is living longer, indicating an improvement in mortality. The rate of improvement will decrease by attained age. Very high attained ages are not believed to improve at all. The generational scale used is the G2 scale published for use with 2012 IAM table.

The 2Q22 study is based on a review of A/E ratios using the base improved BE2021 mortality tables as the expected basis. We used a 5-year study period and checked whether the A/E ratios fell within a 95% confidence interval. Prudential's experience study was performed using mortality data from 1/1/2015 - 12/31/2019, with deaths reported through 12/30/2021. All experience after 12/31/2019 was excluded to omit COVID related impacts. For ILTC and GLTC the base tables are within the 95% confidence interval for healthy lives only. Further analysis was performed by attained age indicating that at high attained ages the A/E's were trending above 100% and for ILTC outside of the confidence interval. Adjustment factors were developed by attained age band for ILTC and GLTC, with GLTC adjusting attained ages 80+ and ILTC attained ages 70+. Exposure in the



projection is predominantly in durations 10 and later. Therefore, the adjustment factors were developed and tested based on experience in durations 10 and later.

The future mortality improvement assumption was updated in 2Q22. The future mortality improvement assumption is applied in the projection model starting on 1/1/2023. The future mortality improvement assumption was changed to the published G2 Scale whereas previously it was an adjusted version of the G2 Scale. Industry surveys and Prudential internal company analysis were relied upon to support the decrease to the future mortality improvement rates.

### **Voluntary Lapse Study**

A voluntary lapse study was also conducted on the Company's actual experience using data through September 30, 2021. Voluntary lapses are studied using actual terminations. The impact from disabled lives were removed from the exposure to ensure a healthy only lapse rate. The impact of shock lapses that occur due to rate increases were removed from the voluntary lapse study to ensure that the lapse experience was not overstated. Actual terminations that occur within the 6-month window around a shock rate event are not included as actuals for voluntary lapse. The study includes healthy life exposure only -- consistent with its application in the first principles model.

The best estimate assumptions for voluntary lapse rates are set based on experience by line of business and policy duration. ILTC rates are also set by inflation option, marital status, and premium payment period. GLTC rates are also set by business segment. For the CORE segments ultimate rates are set for attained ages 70 plus.

The 2Q22 study is based on a review of A/E ratios using a 5-year study period and whether the A/E ratios fall within a 95% confidence interval. The study was based on experience in years 10/1/2016 - 09/30/2021 with lapses reported through 12/31/2021. We did not observe any strong evidence of changes in lapse behavior due to COVID after 12/31/2019 and therefore no experience was excluded from the study for this purpose. Exposure in the projection is predominantly in durations 10 and later. Therefore, the confidence interval tests are based on experience in durations 10 and later. For ILTC, all voluntary lapse tables are within the 95% confidence intervals, no changes were made to the assumption. For GLTC, our All Else rates were outside of the 95% confidence intervals, so changes were made to the assumptions. All Else experience encompasses the entirety of our group business excepting a small cohort of employer-paid "core" business and a small cohort of a single large association group (both of which use different lapse assumptions). The All Else rates were decreased for policy durations 10-29.

### **Incidence Study**

A claim incidence is defined as an approved claim with or without a dollar of payment. The assumption was developed starting with base incidence rates from the 2020 Milliman Cost of Care Guidelines and applying Prudential fitting factors to adjust for our experience. The guidelines are based on Milliman's slice of industry wide experience with underwriting and area specific selection factors applied. These are customized to the company's underwriting guidelines and product

benefits compared with the total guidelines. The area factors are also adjusted based on where Prudential has exposure. The guidelines also include fitting factors that vary by benefit period and elimination period.

We set the Prudential fitting factors based on drivers of incidence underlying our experience. For GLTC, drivers include attained age and underwriting mix, gender, cash/reimbursement benefits, and product. For ILTC, drivers include marital information, gender, cash/reimbursement and product. Once these drivers are set to reflect total incidence experience, adjustment factors are applied to the reimbursement base table to align the proportion of claim incidences into reimbursement sites of care, consistent with our data.

The company's claim incidence experience was analyzed with all claims incurred from inception through 9/30/2021 and reported through 12/31/2021. All experience that occurred during the first 9 policy durations were excluded to omit selection behavior for newly purchased policies given the closed block nature of Prudential's LTC business. For 2Q22, we excluded all experience in calendar year 2020 to omit COVID related impacts. All Prudential fitting factors were refreshed given the update to the base industry tables.

In general, the 2Q22 assumption set is consistent with the prior assumption. Incidence rates for Cash policies at older attained ages were increased to reflect the proper relationship of behavior between cash/reimbursement benefit types.

### **Benefit Utilization Study**

A benefit utilization study was performed to anticipate how much of each claim's maximum available daily benefits will be incurred for LTC services. Actual benefit utilization is measured as the ratio of the total actual claim payments to the calculated maximum possible payment for each claim. The maximum possible exposure is calculated as the total length of stay (time period from the end of the elimination period to the claim end date) multiplied by the daily benefit maximum (DBM) in-force over that period (including automatic inflation and GPO increases).

The company's recent claim experience was analyzed and determined to keep the previous best estimate study period due to COVID related impacts. The study period includes all approved incurred claims and payments from inception through a disabled date of 12/31/2019. Analysis of recent experience revealed the newer claims were impacted by COVID in a shift towards HHC claims rather than facility care claims. This is not believed to be a long-term trend. Therefore, overall, the 2Q 21 best estimate benefit utilization rates were still appropriate with one exception. An adjustment was needed to trend the benefit utilization for the recent inflation environment for reimbursement claims. To account for the increase in actual cost of care that occurred between the end of the experience period (12/31/2019) and the beginning of the projection period at 6/30/2022, the benefit inflation selection factors were increased based on 2019-2021 cost of care data reported in Industry surveys. Since Cash is always fully utilized, no adjustment for inflation was needed.

The benefit utilization assumption is based on several key drivers. The assumption was developed by first segmenting experience into cash and non-cash policies then additional drivers were

determined. These include initial site of care, line of business, issue DBM, inflation type, and benefit period. The study includes claim exposure without any payments (inactive claims), after the elimination period. The assumption is split into a select period (monthly claim durations 1-12) and an ultimate period (monthly claim durations 13+). The assumption includes factors for policies that accept landing spot. Benefit utilization is capped at a maximum amount which applies depending on a claim's initial site of care.

### **Claim Terminations Study (death and recovery)**

A claim termination study was performed to define the length of a claim. Decrements are split between death and recoveries where recoveries are added back to the active life population in the projections. The assumption is based on the death and recovery tables by initial situs in the 2020 Milliman Cost of Care Guidelines after applying Prudential's adjusted claim termination death and recovery experience fitting factors. The 2020 Milliman guidelines table of rates vary by age at disability, monthly claim duration, gender, benefit period (i.e. lifetime vs. non-lifetime benefit periods) and are split for deaths and recoveries. Prudential death and recovery claim termination fitting factors vary by the demographics included in the Milliman base table - age at disability, monthly claim duration, gender, benefit period, initial care setting - as well as product and cash/reimbursement benefits option.

The company's claim experience was analyzed with claims incurred from inception through 6/30/2021, with death and recovery events through 9/30/2021, reported as of 12/31/2021. For 2Q22, we excluded any experience in calendar year 2020 as well as all claims that were incurred during calendar year 2020. This was performed to omit COVID related short term impacts.

In general, lengths of stay under the 2Q22 assumption set are slightly longer than previously modeled under the prior assumption set. The assumption update also included a product-specific increase to recovery rates for claims without payments. This was performed to reflect operational practices that close out inactive claims on early-generation products. Additionally, claim termination rates due to death were studied separately for claims that receive cash benefits vs those that receive cash alternative benefits.

The Prudential Insurance Company of America  
Appendix C - Exhibit 1  
Healthy Life Mortality Study - Best Estimate 2022  
Experience by Attained Age  
ILTC

Attained Age	Exposures	Actual Mortality	Current Best Estimate	Actual/Best Estimate
Less than 65	57,568	89	110	80.7%
65 - 69	51,224	196	195	100.7%
70 - 74	52,650	355	354	100.2%
75 - 79	37,685	459	452	101.6%
80 - 84	17,788	373	359	103.8%
85 and Greater	7,047	259	257	100.7%
Total	223,962	1,731	1,727	100.2%

Notes:

- 1) Prudential's experience study was performed using mortality data from 1/1/2015 – 12/31/2019, with deaths reported through 12/31/2021.
- 2) Due to potential short term COVID-19 impacts and corporate guidance the study period does not include experience data after 12/31/2019.
- 3) Data in policy durations prior to 10 were excluded from the study as it is a closed block of business and we no longer have experience in those durations.
- 4) Best Estimate Mortality Rate uses 2012 IAM Basic Mortality Table, with mortality selection factors, and the published G2 scale generation improvement factors starting 1/1/2023.

The Prudential Insurance Company of America  
Appendix C - Exhibit 2  
Lapse Study - Best Estimate 2022  
Experience by Policy Duration  
ILTC

Duration	Actual Exposures	Number of Lapses	Number of Best Estimate Lapses	Actual Lapse Rate	Best Estimate Lapse Rate	Actual/Best Estimate
10 - 14	131,435	1,003	1,032	0.76%	0.79%	97.2%
15+	124,300	828	856	0.67%	0.69%	96.7%
Total	255,734	1,831	1,888	0.72%	0.74%	97.0%

Notes:

- 1) Prudential's experience study was performed using lapse data from 10/1/2016 – 9/30/2021, with lapses reported through 12/31/2021.
- 2) Data in policy durations prior to 10 were excluded from the study as it is a closed block of business and we no longer have experience in those durations.
- 3) Shock lapses in response to premium rate increases are not included in the actual counts shown; shock lapse experience is studied separately.

The Prudential Insurance Company of America  
Appendix C - Exhibit 3  
Incidence Study - Best Estimate 2022  
Experience by Attained Age  
ILTC

Attained Age	Exposures	Actual Incidences	Current Best Estimate	Actual/Best Estimate
Less than 65	102,419	190	205	92.5%
65 - 69	83,991	340	374	90.9%
70 - 74	89,218	734	754	97.3%
75 - 79	64,229	1,210	1,365	88.6%
80 - 84	31,568	1,452	1,547	93.8%
85 and Greater	12,938	1,370	1,588	86.3%
Total	384,363	5,296	5,834	90.8%

Notes:

- 1) The assumption is based on Milliman's 2020 Guidelines adjusted for Prudential's experience where credible.
- 2) Prudential's experience study includes approved claims incurred from inception through 9/30/2021 (Excl. CY2020) and assessed through 12/31/2021.
- 3) Data in policy durations prior to 10 were excluded from the study as it is a closed block of business and we no longer have experience in those durations.
- 4) Actual incidence rates deviate from expected experience due to low credibility at older attained ages.

**The Prudential Insurance Company of America**  
**Appendix C - Exhibit 4**  
**Benefit Utilization Study - Best Estimate 2022**  
**Experience by Calendar Year**  
**ILTC**

Calendar Yr	Exposure (Maximum Possible Payment in \$MM)	Actual Paid Claims (in \$MM)	Actual Utilization Rate	Expected Utilization Rate	Actual to Expected
<=2012	\$ 143.5	\$ 90.3	62.9%	64.1%	98.1%
2013	43.1	26.8	62.3%	62.2%	100.0%
2014	51.6	31.6	61.3%	61.1%	100.4%
2015	61.4	36.8	59.9%	59.2%	101.3%
2016	71.9	44.3	61.7%	61.1%	101.0%
2017	80.1	49.9	62.4%	61.8%	101.0%
2018	91.2	56.2	61.7%	60.4%	102.2%
2019	96.8	60.2	62.2%	60.3%	103.2%
2020	102.2	64.3	63.0%	62.9%	100.2%
2021	79.0	49.3	62.4%	62.8%	99.3%
Total	\$ 820.6	\$ 509.8	62.1%	61.8%	100.5%

Notes:

- 1) Includes all approved claims excluding experience through the elimination period from inception through 9/30/2021 (with payments reported through 12/31/2021).
- 2) Excludes waiver of premium and return of premium benefits in both actual and expected results.
- 3) Includes reimbursement claims experience only (cash experience is excluded).

The Prudential Insurance Company of America  
Appendix C - Exhibit 5  
Claim Termination Due to Death - Best Estimate 2022  
Experience by Claim Duration  
ILTC

Claim Duration (Months)	Claims Exposed	Actual Death Terminations	Best Estimate Death Terminations	Actual Monthly Mortality Rate	Expected Monthly Mortality Rate	Actual/Best Estimate
1 - 3	22,822	948	921	4.15%	4.03%	103.0%
4 - 6	18,863	507	508	2.69%	2.69%	99.8%
7 - 12	28,537	523	516	1.83%	1.81%	101.3%
13 - 24	43,831	632	694	1.44%	1.58%	91.0%
25 - 48	53,488	789	844	1.48%	1.58%	93.5%
49+	36,341	547	600	1.51%	1.65%	91.1%
Total	203,881	3,946	4,084	1.94%	2.00%	96.6%

Notes:  
1) The company's claim experience was analyzed with all approved claims incurred from inception through 6/30/2021 (Excl. CY2020 experience and CY2020 incurrals) and deaths reported through 12/31/2021.  
2) This assumption is based on Milliman's 2020 claim termination by death industry tables adjusted for Prudential's experience where credible.  
3) Disabled mortality was graded to a gender-specific ultimate rate based on the 2007 Long Term Care Intercompany Study.



**The Prudential Insurance Company of America**  
**Appendix C - Exhibit 6**  
**Claim Termination Due to Recovery - Best Estimate 2022**  
**Experience by Claim Duration**  
**ILTC**

Claim Duration (Months)	Exposure	Actual Recoveries	Best Estimate of Recoveries	Actual Monthly Recovery Rate	Expected Monthly Recovery Rate	Actual/Best Estimate
1 - 6	35,655	333	336	0.93%	0.94%	99.0%
7 - 12	27,122	271	295	1.00%	1.09%	92.0%
13 - 24	42,794	182	150	0.43%	0.35%	121.6%
25 - 36	31,409	79	77	0.25%	0.24%	102.8%
37+	56,514	114	0	0.20%	0.00%	N/A
Total	193,494	979	858	0.51%	0.44%	114.2%

Notes:

- 1) The company's claim experience was analyzed with all approved claims incurred from inception through 6/30/2021 (Excl. CY2020 experience and CY2020 incurral)s and recoveries reported through 12/31/2021.
- 2) This assumption is based on Milliman's 2020 claim termination by recovery industry tables adjusted for Prudential's experience where credible.
- 3) Experience associated with approved claims without any payment activity is excluded from this exhibit.
- 4) We assume no recoveries after month 36.

The Prudential Insurance Company of America  
 [As Administered by CHCS  
 Long-Term Care Customer Service Center  
 P.O. Box 1911  
 Pensacola, FL 32591  
 Tel: 1-800-732-0416 Fax: 1-866-212-4724]

[DATE]

[FIRST NAME LAST NAME]  
 [STREET ADDRESS]  
 [CITY, STATE ZIP CODE]

Re: Policy Number: [XXXXXXXXXXXX]  
 Prudential Long-Term Care Insurance Policy  
**Notice of Premium Rate Increase**

Dear [MR/MS LAST NAME]:

**[IF SINGLE INCREASE OR FIRST PHASE OF A MULTIYEAR INCREASE:**

We're writing to let you know that the premium for your long-term care insurance policy is increasing. This letter will tell you when your premium will increase and how much more you will pay. **[IF NOT AT MINIMUM BENEFIT LEVELS:** In addition, options that are available to you if you don't want to or can't pay the full premium rate increase<sup>1</sup> are provided on the enclosed *Coverage Options* document.]

We ask that you please read this letter carefully and in its entirety. We encourage you to have a copy of your policy available to reference if needed. If you do not have a copy of your policy, please call our Long-Term Care Customer Service Center at [1-800-732-0416]. Their hours of operation are [Monday through Friday, 8:00 a.m. to 6:00 p.m., Eastern Standard Time].

**[IF A MULTIYEAR INCREASE AND THE FINAL ROW INCREASE IS NOT 0%:** Your current premium is [\$xxxx.xx] paid [monthly, quarterly, semiannually, annually]. This premium rate increase<sup>1</sup> will be implemented in [X] phases. This chart reflects the phases, and your premium after each phase, assuming no benefit changes are made to your policy<sup>2</sup>.]

**[IF A SINGLE YEAR RATE INCREASE:** Your current premium is [\$xxxx.xx] paid [monthly, quarterly, semiannually, annually]. This premium rate increase<sup>1</sup> will be implemented in one phase. This chart reflects the premium after the rate increase, assuming no benefit changes are made to your policy<sup>2</sup>.]

**[IF A MULTIYEAR INCREASE AND THE FINAL ROW INCREASE IS 0%:** Your current premium is [\$xxxx.xx] paid [monthly, quarterly, semiannually, annually]. This premium increase<sup>1</sup>, which can vary based on your policy benefits, will be implemented in multiple phases for some policies in your state. This chart reflects the phases, and your premium after each phase, assuming no benefit changes are made to your policy<sup>2</sup>. Note that if your premium rate increase percentage is zero in a given phase, that means your premium will not increase in that phase.]

**[IF MULTIYEAR:** If you choose to reduce your benefits for a lower premium amount now, you may still see an increase in your premium as we complete the remaining phase-in periods.]

Premium Rate Increase Phase	Earliest Effective Date of Premium Rate Increase	Premium Rate Increase Percentage	New [Monthly, Quarterly, Semiannual, Annual] Premium with Rate Increase
[1]	[xx/xx/xxxx]	[xx.xx]%	[\$xxxx.xx]

[2]	[xx/xx/xxxx]	[xx.xx]%	[\$xxxx.xx]
[3]	[xx/xx/xxxx]	[xx.xx]%	[\$xxxx.xx]
[4]	[xx/xx/xxxx]	[xx.xx]%	[\$xxxx.xx]

<sup>1</sup> Premium rate increase refers to the schedule of premium rate increase(s) that is detailed in this Notice of Premium Rate Increase Packet.

<sup>2</sup> The premium amounts cited in this letter do not reflect any benefit changes that may already be pending at this time or that you elect in the future. Your actual premium may be different due to rounding.

**[IF A MULTIYEAR INCREASE:** Prior to each phase, you will receive a notification in advance of the effective date of the increase. We recommend that you retain this letter for future reference.]]

**[IF MULTIYEAR SUBSEQUENT PHASE:**

As you may recall, we previously informed you of a premium rate increase to your Prudential Long-Term Care Insurance policy that will be implemented in multiple phases. At this time, we are writing to inform you of the next phase of that premium rate increase. This letter will tell you when your current premium will increase, and how much more you will pay. **[IF NOT AT MINIMUM BENEFIT LEVELS:** In addition, if you do not want to, or if you cannot pay the premium rate increase<sup>1</sup>, there are options available to you. Those options are provided on the enclosed *Coverage Options* document.]

We ask that you please read this letter carefully and in its entirety. We also encourage you to have a copy of your policy available to reference if needed. If you do not have a copy of your policy, please call our Long-Term Care Customer Service Center at [1-800-732-0416]. Their hours of operation are [Monday through Friday, 8:00 a.m. to 6:00 p.m., Eastern Standard Time.]

**[IF THE FINAL ROW INCREASE IS NOT 0%:**Your current premium is [\$xxxx.xx] paid [monthly, quarterly, semiannually, annually]. As previously shared, your premium rate increase<sup>1</sup> is being implemented in [X] phase(s). This chart reflects the remaining phases, and your premium after each phase, assuming no benefit changes are made to your policy<sup>2</sup>.]

**[IF THE FINAL ROW INCREASE IS 0%:**Your current premium is [\$xxxx.xx] and is paid [monthly, quarterly, semiannually, annually]. As previously shared, this premium increase<sup>1</sup>, which can vary based on your policy benefits, is being implemented in multiple phases for some policies in your state. This chart reflects the remaining phases, and your premium after each phase, assuming no benefit changes are made to your policy<sup>2</sup>. Note that if your premium rate increase percentage is zero in a given phase, that means your premium will not increase in that phase.]

**[IF NOT IN LAST PHASE:** If you choose to reduce your benefits for a lower premium amount now, you may still see an increase in your premium as we complete the remaining phase-in periods.]

**[IF PHASE 2:**

Premium Rate Increase Phase	Earliest Effective Date of Premium Rate Increase	Premium Rate Increase Percentage	New [Monthly, Quarterly, Semiannual, Annual] Premium with Rate Increase
[2]	[xx/xx/xxxx]	[xx.xx]%	[\$xxxx.xx]
[3]	[xx/xx/xxxx]	[xx.xx]%	[\$xxxx.xx]
[4]	[xx/xx/xxxx]	[xx.xx]%	[\$xxxx.xx]

]

[IF PHASE 3:

Premium Rate Increase Phase	Earliest Effective Date of Premium Rate Increase	Premium Rate Increase Percentage	New [Monthly, Quarterly, Semiannual, Annual] Premium with Rate Increase
[3]	[xx/xx/xxxx]	[xx.xx]%	[\$xxxx.xx]
[4]	[xx/xx/xxxx]	[xx.xx]%	[\$xxxx.xx]

]

[IF PHASE 4:

Premium Rate Increase Phase(s)	Earliest Effective Date of Premium Rate Increase	Premium Rate Increase Percentage	New [Monthly, Quarterly, Semiannual, Annual] Premium with Rate Increase
[4]	[xx/xx/xxxx]	[xx.xx]%	[\$xxxx.xx]

]

<sup>1</sup> Premium rate increase refers to the schedule of premium rate increase(s) that is detailed in this Notice of Premium Rate Increase Packet.

<sup>2</sup> The premium amounts cited in this letter do not reflect any benefit changes that may already be pending at this time or that you elect in the future. Your actual premium may be different due to rounding.

[IF NOT IN LAST PHASE: Prior to each rate increase phase, you will receive a notification in advance of the effective date of the increase. We recommend that you retain this letter for future reference.]]

[IF DIRECT BILL: You'll see this increase in the statement you receive before the effective date of the new premium rate.][IF EFT: Since you pay your premium via electronic funds transfer, the withdrawal from your account that occurs before the effective date of the new premium rate will automatically reflect the new amount.]

We have filed this premium rate increase with state insurance regulators and are implementing this premium increase as permitted by the terms and conditions of your policy, and in accordance with applicable laws.

If you continue to pay your premium at the increased rate listed, the coverage provided under your policy will remain the same. If you don't want to or can't pay the full premium increase, please refer to the enclosed *Coverage Options* document, which provides information on option(s) to reduce the impact of the premium rate increase. [IF AT MINIMUM: Because your benefits are already at the lowest level we offer, we are unable to offer you an option of reducing your coverage in order to offset the amount of your premium increase.]

If you would like to make a change, please complete the enclosed *Long-Term Care Insurance Change Request Form*. You can either complete and fax the form to [1-866-212-4724] or mail the form to the address noted on the *Long-Term Care Insurance Change Request Form*.

Please also refer to the enclosed *Frequently Asked Questions*, which provide more information about this premium rate increase. Please note, all options offered as an alternative to the rate increase may not be of equal value.

We understand this premium rate increase affects you financially, but we hope you will continue to appreciate the value of your long-term care insurance coverage. We made this decision after thoroughly evaluating the factors that impact premium rates. The premiums we charge you are affected by several

things, including assumptions we make about the amount of claims we expect to pay under policies like yours, as well as other factors. After an extensive review of all these factors, we determined that a premium rate increase is necessary to continue providing the quality insurance coverage you've come to expect.

**[IF SINGLE INCREASE OR FIRST PHASE OF A MULTIYEAR INCREASE: [IF FULL APPROVAL IS NOT GRANTED FOR POLICYHOLDERS BENEFIT CLASS:**We sought an increase of [xx.x%] when we filed this premium rate increase with your state regulator; however, we were granted the lower increase(s) as shown in the chart on the first page of this Notice of Premium Rate Increase letter. Because of this, we anticipate that an additional premium increase will be necessary in the future, but we don't currently know the date or amount of any future increase.]

**[IF FULL APPROVAL IS GRANTED FOR POLICYHOLDERS BENEFIT CLASS:** In addition to the schedule of premium rate increase(s) shown in the chart on the first page of this Notice of Premium Rate Increase letter, it is possible that, as we continue to regularly review the factors that impact premium rates, another increase may be needed in the future.]]

**[IF MULTIYEAR SUBSEQUENT PHASE:**

**[IF FULL APPROVAL IS NOT GRANTED FOR POLICYHOLDERS BENEFIT CLASS:** In addition to the schedule of premium rate increase(s) shown in the chart on the first page of this Notice of Premium Rate Increase letter, we anticipate one or more additional premium increases will be necessary in the future but we don't currently know the date or amount of any future increase.]

**[IF FULL APPROVAL IS GRANTED FOR POLICYHOLDERS BENEFIT CLASS:** In addition to the schedule of premium rate increase(s) shown in the chart on the first page of this Notice of Premium Rate Increase letter, it is possible that, as we continue to regularly review the factors that impact premium rates, another increase may be needed in the future.]]

If a future increase becomes necessary, you will receive notification in advance of the effective date of any such increase, along with suggested options to help offset that future increase. We will continue to monitor the factors that impact premiums to determine if our assumptions are consistent with actual experience.

**Before making a decision to change your coverage, we encourage you to contact our Long-Term Care Customer Service Center at [1-800-732-0416, Monday through Friday, between 8 a.m. and 6 p.m. ET].** Our dedicated customer service team is ready to assist you and can provide you with information about the complete range of options that may be available to you. We appreciate having you as a customer and look forward to continuing to serve you.

Sincerely,

**Prudential Long-Term Care**

[cc: Insurance Producer FIRST NAME LAST NAME]

**ENCLOSURES:**

*Coverage Options Form*

*Frequently Asked Questions Relating to Premium Increase Form*

*Long-Term Care Insurance Change Request Form*

## Coverage Options for Policy [XXXXXXXXXX]

**[IF INSURED UNDER CASH BENEFIT RIDER:** You may drop your Cash Benefit Rider. This means that if you are determined to be eligible to receive benefits under your policy, you will be reimbursed for covered expenses up to the Daily Maximum for Home and Community-Based Care rather than receive a monthly cash amount as provided under the Cash Benefit Rider. **This change will result in a new [monthly, quarterly, semiannual, annual] premium payment of [\$XXXX.XX].**

**[IF INSURED UNDER CASH INDEMNITY RIDER:** You may drop your Cash Indemnity Rider. This means that if you are determined to be eligible to receive benefits under your policy, you will be reimbursed for covered expenses up to the Daily Maximum for Home and Community-Based Care rather than receive the full daily benefit for Home and Community-Based Care for the days that formal services are received and proof of having received such services is provided to Prudential. **This change will result in a new [monthly, quarterly, semiannual, annual] premium payment of [\$XXXX.XX].**

[You may reduce your Lifetime Maximum benefit amount by changing the number of years used to calculate such benefits from [X years][Unlimited] to [Y] years. This means that your Lifetime Maximum shown in a dollar amount will be recalculated to a lower dollar amount using the number of years shown above. You will be provided with a new Schedule of Policy Benefits page to your policy showing this lower Lifetime Maximum as a dollar amount. **This change will result in a new [monthly, quarterly, semiannual, annual] premium payment of [\$XXXX.XX].**

**[IF AUTOMATIC INFLATION:** You may reduce your initial Daily Maximum amount from [\$XXX] to [\$YYY] (because your policy has an inflation protection provision or rider, your corresponding *inflated* Daily Maximum amount will decrease from [\$XXX] to [\$YYY]<sup>1</sup>). **[IF NOT AUTOMATIC INFLATION:** You may reduce your initial Daily Maximum amount from [\$XXX] to [\$YYY]<sup>1</sup>.] This means that the maximum benefit that you could receive under the policy for each day you receive benefits will be reduced to the amount stated above. **This change will result in a new [monthly, quarterly, semiannual, annual] premium payment of [\$XXXX.XX].** **[IF GPO:** Your current premium is [\$XXXX.XX]. If you believe the revised premium in this offer is not reasonably close to your current premium, you may request a quote to reduce your initial Daily Maximum amount such that your [monthly, quarterly, semiannual, annual] premium payment will be reasonably unchanged. To do so, simply complete the Long Term Care Change Request Form included with this letter.] Please note that by reducing your Daily Maximum amount, you will also be reducing the total amount of benefits payable under your policy (Lifetime Maximum), unless your policy has an Unlimited Lifetime Maximum. Before making any decision to reduce your Daily Maximum amount, please consider the current and future cost of care in the geographic area where you anticipate receiving care, and the amount you expect to be able to pay for care from your own assets and savings.]

**[IF INSURED UNDER MONTHLY BENEFIT RIDER:** You may drop your Monthly Benefit Rider. This means that if you are determined to be eligible to receive benefits under your policy, you will be reimbursed for covered expenses up to the Daily Maximum for Home and Community-Based Care rather than up to the monthly maximum amount under the Monthly Benefit Rider. **This change will result in a new [monthly, quarterly, semiannual, annual] premium payment of [\$XXXX.XX].**

**[IF NFO:** You may exercise a right under your non-forfeiture rider to change your policy to paid-up status. If you elect this option, you will no longer have to pay any premiums and you will retain a reduced amount of coverage in force which can be used to receive reimbursement for future Long Term Care insurance claims you may ultimately have. The reduced amount of coverage you keep under this option is your reduced paid up benefit. Under the reduced paid up benefit, your Benefit Waiting Period and Daily Maximum will remain the same, but your Lifetime Maximum benefit will be reduced. If you had an

inflation benefit in the past, the Daily Maximum and Lifetime Maximum amounts will no longer increase for inflation in the future under any circumstances. Please note, with the exception of Cash and Monthly Riders, all other riders attached to your policy will terminate. The other terms of your policy, including but not limited to the requirements you need to meet to be eligible for reimbursement of any future Long Term Care claims, remain unchanged. You can elect this option by checking the appropriate box on the enclosed *Long-Term Care Insurance Change Request Form*. If you do not submit a *Long-Term Care Insurance Change Request Form* or contact our Customer Service Center and coverage lapses because you do not pay the full increased premium, your policy will automatically be converted to paid-up status with reduced benefits.]

**[IF NFO IS NOT AN OPTION, THEN CNFO:** You may exercise a contingent non-forfeiture right to change your policy to paid-up status. If you elect this option, you will no longer have to pay premiums and you will retain a reduced amount of coverage in force which can be used to receive reimbursement for future Long Term Care insurance claims you may ultimately have. The reduced amount of coverage you keep under this option is your reduced paid up benefit. Under the reduced paid up benefit, your Benefit Waiting Period and Daily Maximum will remain the same, but your Lifetime Maximum benefit will be reduced. If you had an inflation benefit in the past, the Daily Maximum and Lifetime Maximum amounts will no longer increase for inflation in the future under any circumstances. Please note, with the exception of Cash and Monthly Riders, all other riders attached to your policy will terminate. The other terms of your policy, including but not limited to the requirements you need to meet to be eligible for reimbursement of any future Long Term Care claims, remain unchanged. You can elect this option within 120 days of the implementation of the premium increase by checking the appropriate box on the enclosed *Long-Term Care Insurance Change Request Form*. If you do not submit a *Long-Term Care Insurance Change Request Form* or contact our Customer Service Center and coverage lapses because you do not pay the full increased premium, your policy will automatically be converted to paid-up status with reduced benefits.]

**[IF STATE APPROVED INCREASE OVER MULTIPLE YEARS:IMPORTANT INFORMATION:** This policy's premium rate increase is being phased in over multiple years. The increase schedule is shown in the chart on page one of this Notice of Premium Rate Increase. You will receive a notification letter in advance of the effective date of each phase of the premium rate increase.]

**[IF NOT AT MINIMUM:** Please note that the premiums quoted above relate to your election of just one option.]

**If you wish to determine your non-forfeiture value, elect more than one option if available, or understand if there may be additional options available to you, please call us at [1-800-732-0416].** Our dedicated Long-Term Care Customer Service Center staff can provide you with information about the complete range of options that may be available and are available to assist you [Monday through Friday, between 8 a.m. and 6 p.m. ET].

If you would like to make any available change, please complete the attached *Long-Term Care Insurance Change Request Form*. You can either fax the completed form to [1-866-212-4724] or mail it to the address noted on the *Long-Term Care Insurance Change Request Form*.

<sup>1</sup> The Daily Maximum amount is subject to any applicable state requirements.



## **Frequently Asked Questions Relating to Premium Increase**

**Question: Why are my long-term care insurance premium rates increasing?**

**Answer:** The Prudential Insurance Company of America (Prudential) continuously reviews and assesses the long-term care insurance policies like yours, called ILTC1. Our actual and projected future claims experience is different from anticipated and, as a result, a premium increase is needed to help ensure that premiums are sufficient for future benefits on all ILTC1 policies.

**Question: What provisions in the policy allow Prudential to raise premiums?**

**Answer:** The “Renewability” and “Changes in Premiums” provisions in your policy describe the right to increase the premium charged for the insurance.

**Question: Will the premiums on these policies increase again?**

**Answer:** **[IF FULL APPROVAL IS NOT GRANTED FOR POLICYHOLDERS BENEFIT CLASS:**In addition to the premium rate increase(s) explained in the attached Notice of Premium Rate Increase letter, we anticipate one or more additional premium increases will be necessary in the future, but we currently do not know the date or amount of that future increase.]

**[IF FULL APPROVAL IS GRANTED FOR POLICYHOLDERS BENEFIT CLASS:** In addition to the premium rate increase(s) explained in the attached Notice of Premium Rate Increase letter, it is possible that, as we continue to regularly review the factors that affect premium rates, another increase may be needed in the future.]

Should a future increase become necessary, you will receive notification in advance of the effective date of the increase along with benefit reduction options to help offset that premium rate increase. We will continue to monitor the factors that impact premiums to determine if our assumptions are consistent with actual experience.

**Question: Have I been singled out for this rate increase because of my age or health?**

**Answer:** No individual policyholder has been singled out for an increase due to age or changing health.

**Question: I no longer live in the state where I purchased my policy, does the increase still apply?**

**Answer:** Yes, the rate increase applies because your long-term care insurance policy is regulated by the state you lived in when you purchased it, even if you have since moved out of that state.

**Question: When will this premium increase become effective?**

**Answer:** The increase will become effective on the [first premium due date][first anniversary date] following implementation of the rate increase in the state in which your policy was issued. You can find that date in the Notice of Premium Increase letter that was sent along with these frequently asked questions.

**Question: What will happen if I do nothing?**

**Answer:** If you take no action, your policy will remain as it is today, without any changes to coverage or policy features and you will be billed the increased premium rate.



The Prudential Insurance Company of America  
[As Administered by CHCS  
Long-Term Care Customer Service Center  
P.O. Box 1911  
Pensacola, FL 32591  
Tel: 1-800-732-0416 Fax: 1-866-212-4724]

Policyholder Name: [FIRST NAME LAST NAME]  
Policy Number: [XXXXXXXXXXXX]

Please complete this form and fax it to [1-866-212-4724] or return it by mail to the address shown above. Since it can take up to 30 days for a benefit change to be processed on your policy, please return this form within 30 days from the date of this Notice of Premium Rate Increase to be assured that the requested change(s) to your Long-Term Care insurance coverage will be reflected on the effective date of the premium rate increase. If you return this form more than 30 days after the mailing date, we cannot guarantee the elected change(s) to your Long-Term Care insurance coverage will be processed before the effective date of the premium rate increase.

Any changes to your coverage can be elected after this 30-day period but your premium rate may be adjusted after the effective date of the premium rate increase. **[IF CNFO:Please Note: This does not include changes to your coverage if you elect to exercise the Contingent Non-Forfeiture Benefit Option. Please see the benefit description listed below for details on this benefit option.]**

### LONG-TERM CARE INSURANCE CHANGE REQUEST FORM

This form can be used to make changes to your Long-Term Care insurance coverage to reduce the impact of the premium rate increase[s] identified in the Notice of Premium Rate Increase letter included with this packet.

***If you decide to make a benefit change, you will have a 30 day right to review any changes to your coverage. After that period, the decision to reduce your plan's benefit is not reversible.*** This decision should be considered carefully. If you anticipate filing a claim in the near future, it may not be advantageous to modify your plan's benefit design.

Before making any changes, we would encourage you to review your policy and to call our Long-Term Care Customer Service Center at [1-800-732-0416, Monday through Friday, between 8 a.m. and 6 p.m. ET], to discuss the range of options that may be available to you, and to learn how the selection of each option will affect (1) the amount of premium you will be required to pay, and (2) your coverage.

**Please indicate your change(s) by checking and completing the options below.**

**NOTE: If you check more than one option, you should call us for the new premium amounts.**

- [IF INSURED UNDER CASH BENEFIT RIDER:Remove my Cash Benefit Rider and convert my Policy to a daily reimbursement plan.]**

- [IF INSURED UNDER CASH INDEMNITY RIDER:**Remove my Cash Indemnity Rider and convert my Policy to a daily reimbursement plan.]
- [Decrease my Lifetime Maximum benefit amount by changing the number of years used to calculate such benefits from [X years][Unlimited] to [Y] years.]
- [IF AUTOMATIC INFLATION:**Decrease my Daily Maximum amount from [\$XXX] to [\$YYY] (my corresponding *inflated* Daily Maximum amount would decrease from [\$XXX] to [\$YYY]).]**[IF NOT AUTOMATIC INFLATION:**Decrease my Daily Maximum amount from [\$XXX] to [\$YYY].]
- [If GPO:** Send me a quote that would decrease my Daily Maximum amount to a level that would allow me to continue paying a premium that is reasonably close to my current premium. I understand that I will be under no obligation to accept this quote.]
- [IF INSURED UNDER MONTHLY BENEFIT RIDER:**Remove my Monthly Benefit Rider and convert my Policy to a daily reimbursement plan.]
- [IF NFO:**I wish to exercise the non-forfeiture option. I understand that by doing so, no further premium payments will be due under my policy and my Benefit Waiting Period and Daily Maximum will remain the same, but my Lifetime Maximum benefit will be reduced]
- [IF CNFO:**I wish to exercise the contingent non-forfeiture option. I understand that I can only make this election within the 120-day period following the due date of my increased premium, and that I must continue paying premiums up until that due date. I also understand that by making this election, no further premium payments will be due under my policy and my Benefit Waiting Period and Daily Maximum will remain the same, but my Lifetime Maximum benefit will be reduced.]
- I would like to exercise the following benefit reduction(s) not listed above:

---



---

I understand that someone from the Long-Term Care Customer Service Center may call me to clarify my wishes or explain if the following change requested can be made.

**ACKNOWLEDGEMENT:**

By signing below, I understand that each option available as an alternative to paying the full premium rate increase will result in a different change to my policy benefits. I understand that the coverage changes I have selected above will reduce my current benefits. I acknowledge that I am making this decision carefully and in consideration of my personal situation. After the 30 day right to review period, I understand that I am not able to reverse my election. I acknowledge that Prudential has made the Long-Term Care Customer Service Center available for me to discuss these options. I affirm that any changes made pursuant to this form, are made voluntarily and that I am under no obligation to make them. I understand that I may consult with an accountant, financial planner, tax specialist and other professional advisors before making any changes to my coverage. I acknowledge that Prudential encourages me to do so to ensure that any changes I make to my coverage best suit my individual financial and insurance needs. I agree that any changes will become effective on the date set by The Prudential Insurance Company of America upon receipt of this request.

---

Signature of Policyholder for Policy  
[XXXXXXXXXXXX]

---

Date Signed

**PLEASE RETURN ALL PAGES OF THE CHANGE REQUEST FORM**



**Mike Zilberman, FSA, MAAA**  
Prudential Long Term Care  
213 Washington Street  
Newark, NJ 07102  
Tel: (973)716-4225  
michael.zilberman@prudential.com

Date: January 11, 2023

To: Michael Hibbert  
Pennsylvania Department of Insurance

Re: SERFF Tracking Number: PRUD-133505176  
Objection Letter Dated January 9, 2023  
ILTC1 Pre-RS Rerate

Dear Mr. Hibbert,

This is in response to your question on January 3, 2023.

### **Objection 1**

**Please provide a table in an Excel spreadsheet (perhaps similar to Appendix B) for this nationwide block of policies which shows the historical and projected nationwide earned premium and incurred claims on a calendar year basis assuming no rate increase is granted. Please restate the nationwide historical and projected earned premium so that the business from inception appears to have all been earned at the original rate level.**

Please see attached file "PA Pre-RS ILTC1 App A B E without rate increase.pdf".

### **Objection 2**

**Please provide the percent of active policyholders remaining on a nationwide basis. How many policies were issued nationwide? How many policies remain in force nationwide?**

As of June 30, 2022, there are 9,164 such policies active nationwide out of 17,271 that were issued for the nationwide policies within scope of this filing; therefore 53.1% of the issued policies are still active.

### **Objection 3**

**Please provide the cumulative weighted average increase granted on policies in force on this block in PA. If the answer is 194.6%, then simply confirm this.**

We can confirm that the cumulative weighted average increase is 194.6%.

### **Objection 4**

**Please provide your best guess as to when the first letter will be mailed informing policyholders of this premium increase.**

Under the assumption that final approval for this filing comes before the end of January, we expect the first letter informing policyholders of this rate increase to be mailed in April 2023.



**Mike Zilberman, FSA, MAAA**  
Prudential Long Term Care  
213 Washington Street  
Newark, NJ 07102  
Tel: (973)716-4225  
[michael.zilberman@prudential.com](mailto:michael.zilberman@prudential.com)

I appreciate your time and consideration. If there are any additional questions, please feel free to contact me.

Sincerely,

Mike Zilberman, FSA, MAAA  
Director, Actuary  
Prudential Long Term Care