## **Agent Bulletin**

AGENT SERVICE LINE: 1-866-458-7503

Date: September 7, 2017 Number: FB 17-060

## MEDICARE SUPPLEMENT RATE UPDATE

From: Bankers Fidelity Life Insurance Company®
To: All Licensed Agents in the State of Kansas

**Subject:** Medicare Supplement Rate Revision Effective 09-29-2017

## Rate Revisions for Medicare Supplement Series Business

Attached to this bulletin, rate changes for the current B 21092 Preferred & Standard Medicare Supplement products are shown. These new rates will become effective for new business written on or after 09-29-2017, as well as existing business. Existing policyholders will be notified of this premium change within the state mandated timeframe. The chart below lists the plans and their percentage of change.

Plan	Rate Increase
A/U65A	6%
F/U65F	10%
F2/U65F2	0%
G/U65G	8%
K/U65K	10%
N/U65N	0%

A one-time, non-commissionable Policy Fee of \$25 will be required with the initial premium on all Medicare Supplement applications written on or after 09-29-2017.

The outlines of coverage have been updated with the new rates and the policy fee and will be available in the ADDS® library on 09-29-2017.

- Outline of Coverage B 21092 OC(rev.14) [KANSAS] (9-17) replaces the current outline (B 21092 OC(rev.14) [KANSAS] (1-17)). The Outline of Coverage must be left with every client to whom the product is presented, whether they apply or not. The complete outline consists of forms:
  - O Cover Page B 21092 OC(rev.14) KANSAS [CP]
  - Rate Pages Preferred and Standard B 21092 OC(rev.14) KANSAS [RS PRF/STND]
  - Disclosure Page B 21092 OC(rev.14) KANSAS [DIS-AA]
  - Benefit charts for Plans A, F, High F, G, K and N B 21092 OC(rev.14) KANSAS [BC-A,F,F2,G,K,N]



The Dual Company Application Package – **B2 0114 AP2014 PKG KANSAS** – has been updated to include a line for the policy fee in the application form (B2 0114 AP2014X20-T-v2 KS). The updated application package and application both have a (9-17) print date in the lower right hand corner. This new application can replace all previous versions.

\*The current application may continue to be used; simply include the \$25 policy fee with the Initial Premium Information. The updated application will be accessible on ADDS effective 09-29-2017 if you choose to download or print it. The updated application will be available for ordering through the Home Office at a later date.

## Rate Revisions for Medicare Supplement Closed Series Business

Rate increases are occurring on the closed B 9200 series Preferred & Standard Medicare Supplement policies. You may refer to the chart below that lists the plans and their percentage of increase. Plans not being increased will have a dash in the increase column. Please be aware that this only affects your policyholder's active policies that have effective dates of 01-01-1992 to 05-31-2010. The timing of the implementation of the rate revisions on the closed series is effective immediately; existing policyholders will receive notice within the state-mandated timeframe.

Plan	Rate Increase
А	10%
B/B1	9%
С	10%
D	-
E	-
F	-
F2	-
G	10%
1	-

Thank you,

The Marketing Department