

7. 0 percent Male 100 percent Female for tables to be designated as the "1980 CSO-G" and "1980 CET-G" tables.

(c) The table described in (b)7 above is not to be used with respect to policies issued on or after January 1, 1986, except where the proportion of persons insured is anticipated to be 90 percent or more female.

(d) Gender blended tables with Ten-Year Select Mortality Factors may be derived by applying select factors to gender blended tables without select factors where the select factors are derived by using the following formula:

$${}^zF_t^T = \frac{(Z)F_t^M + .6(1-Z) F_t^F}{Z + .6(1-Z)}$$

where

${}^zF_t^T$ is the gender blended select factor for year t

F_t^M is the male select factor for year t

F_t^F is the female select factor for year t

Z is the ratio of male lives to the total lives at the pivotal age

Amended by R.1996 d.4, effective January 2, 1996.

See: 27 N.J.R. 3557(a), 28 N.J.R. 165(a).

Amended by R.1996 d.148, effective March 18, 1996.

See: 27 N.J.R. 3717(a), 28 N.J.R. 1545(a).

11:4-22.4 Construction of Gender Blended Smoker and Nonsmoker Mortality Tables for use in the determination of minimum nonforfeiture benefits and minimum reserves

(a) In determining minimum cash surrender values, and amounts of paid up nonforfeiture benefits for any policy of insurance on the life of either a male or female insured on a form of insurance with separate rates for smokers and nonsmokers delivered or issued for delivery in this State after the operative date of N.J.S.A. 17B:25-19h(xi) for that policy form in addition to the mortality tables that may be used according to N.J.A.C. 11:4-22.3:

1. A mortality table which is a blend of the male and female rates of mortality according to the 1980 CSO Smoker Mortality Table, in the case of lives classified as smokers, or the 1980 CSO Nonsmoker Mortality Table, in the case of lives classified as nonsmokers, with or without Ten-year Select Mortality Factors, may at the option of the company be substituted for the 1980 CSO Table, with or without Ten-Year Select Mortality Factors; and

2. A mortality table which is of the same blend as used in (a)1 above but applied to form a blend of the male and female rates of mortality according to the corresponding 1980 CET Smoker Mortality Table or 1980 CET Nonsmoker Mortality Table may at the option of the company be substituted for the 1980 CET Table.

(b) The following describes the blended Smoker and Nonsmoker Mortality Tables. The tables are contained in Appendix B to this subchapter.

1. 100 percent Male 0 percent Female smoker tables designated as "1980 CSO-SA" and "1980 CET-SA" Tables.

2. 80 percent Male 20 percent Female smoker tables designated as "1980 CSO-SB" and "1980 CET-SB" Tables.

3. 60 percent Male 40 percent Female smoker tables designated as "1980 CSO-SC" and "1980 CET-SC" Tables.

4. 50 percent Male 50 percent Female smoker tables designated as "1980 CSO-SD" and "1980 CET-SD" Tables.

5. 40 percent Male 60 percent Female smoker tables designated as "1980 CSO-SE" and "1980 CET-SE" Tables.

6. 20 percent Male 80 percent Female smoker tables designated as "1980 CSO-SF" and "1980 CET-SF" Tables.

7. 0 percent Male 100 percent Female smoker tables designated as "1980 CSO-SG" and "1980 CET-SG" Tables.

8. 100 percent Male 0 percent Female nonsmoker tables designated as "1980 CSO-NA" and "1980 CET-NA" Tables.

9. 80 percent Male 20 percent Female nonsmoker tables designated as "1980 CSO-NB" and "1980 CET-NB" Tables.

10. 60 percent Male 40 percent Female nonsmoker tables designated as "1980 CSO-NC" and "1980 CET-NC" Tables.

11. 50 percent Male 50 percent Female nonsmoker tables designated as "1980 CSO-ND" and "1980 CET-ND" Tables.

12. 40 percent Male 60 percent Female nonsmoker tables designated as "1980 CSO-NE" and "1980 CET-NE" Tables.

13. 20 percent Male 80 percent Female nonsmoker tables designated as "1980 CSO-NF" and "1980 CET-NF" Tables.

14. 0 percent Male 100 percent Female nonsmoker tables designated as "1980 CSO-NG" and "1980 CET-NG" Tables.

(c) The tables described in (b)7 and 14 above are not acceptable as blended tables, except where the proportion of persons insured is anticipated to be 90 percent or more female.

Amended by R.1996 d.148, effective March 18, 1996.

See: 27 N.J.R. 3717(a), 28 N.J.R. 1545(a).

11:4-22.5 Use of gender blended mortality tables in the non-Norris market

(a) The preceding rules in this subchapter are intended to address use of gender blended mortality tables as a minimum standard for cash surrender values and paid-up non-forfeiture benefits in the *Norris* market.

(b) The use of gender blended mortality tables as the basis for cash surrender values and paid-up nonforfeiture benefits in the non-*Norris* market will be permitted only upon receipt of an actuarial demonstration that the resultant cash values are at least equal to the statutory minimum using the maximum interest rate, maximum initial expense allowance and gender district table specified at N.J.S.A. 17B:25-19.

New Rule, R.1996 d.148, effective March 18, 1996.
See: 27 N.J.R. 3717(a), 28 N.J.R. 1545(a).

11:4-22.6 Effect on previously filed forms

Forms which have been filed by the Commissioner pursuant to N.J.S.A. 17B:25-18 containing provisions not in compliance with these rules shall be deemed withdrawn as of September 18, 1996.

New Rule, R.1996 d.148, effective March 18, 1996.
See: 27 N.J.R. 3717(a), 28 N.J.R. 1545(a).

11:4-22.7 Unfair discrimination

It shall not be a violation of N.J.S.A. 17B:30-12c. for an insurer to issue the same kind of policy of life insurance on both a sex-distinct and sex-neutral basis.

Recodified: This section was 11:4-22.4.
See: 19 N.J.R. 1399(a), 19 N.J.R. 1814(a).
Recodified from 11:4-22.5 and amended by R.1996 d.148, effective March 18, 1996.
See: 27 N.J.R. 3717(a), 28 N.J.R. 1545(a).

11:4-22.8 Separability

If any provision of this subchapter or the application thereof to any person or circumstance is for any reason held to be invalid, the remainder of the subchapter and the application of such provision to other persons or circumstances shall not be affected thereby.

Recodified: This section was 11:4-22.5.
See: 19 N.J.R. 1399(a), 19 N.J.R. 1814(a).
Recodified from 11:4-22.6 and amended by R.1996 d.148, effective March 18, 1996.
See: 27 N.J.R. 3717(a), 28 N.J.R. 1545(a).

APPENDIX A

TABLE 1

1980 CSO-A AND 1980 CET-A MORTALITY TABLES
BASED ON BLENDING 1980 CSO AND 1980 CET
MORTALITY TABLES 100 PERCENT MALE—

PERCENT FEMALE
RATES OF MORTALITY
1,000 q_x AGE NEAREST BIRTHDAY

Age (x)	1980 CSO-A	1980 CET-A
0	4.18	5.43

Age (x)	1980 CSO-A	1980 CET-A
1	1.07	1.82
2	0.99	1.74
3	0.98	1.73
4	0.95	1.70
5	0.90	1.65
6	0.86	1.61
7	0.80	1.55
8	0.76	1.51
9	0.74	1.49
10	0.73	1.48
11	0.77	1.52
12	0.85	1.60
13	0.99	1.74
14	1.15	1.90
15	1.33	2.08
16	1.51	2.26
17	1.67	2.42
18	1.78	2.53
19	1.86	2.61
20	1.90	2.65
21	1.91	2.66
22	1.89	2.64
23	1.86	2.61
24	1.82	2.57
25	1.77	2.52
26	1.73	2.48
27	1.71	2.46
28	1.70	2.45
29	1.71	2.46
30	1.73	2.48
31	1.78	2.53
32	1.83	2.58
33	1.91	2.66
34	2.00	2.75
35	2.11	2.86
36	2.24	2.99
37	2.40	3.15
38	2.58	3.35
39	2.79	3.63
40	3.02	3.93
41	3.29	4.28
42	3.56	4.63
43	3.87	5.03
44	4.19	5.45
45	4.55	5.92
46	4.92	6.40
47	5.32	6.92
48	5.74	7.46
49	6.21	8.07
50	6.71	8.72
51	7.30	9.49
52	7.96	10.35
53	8.71	11.32
54	9.56	12.43
55	10.47	13.61

Age (x)	1980 CSO-A	1980 CET-A	Age (x)	1980 CSO-B	1980 CET-B
56	11.46	14.90	1	1.04	1.79
57	12.49	16.24	2	.95	1.70
58	13.59	17.67	3	.94	1.69
59	14.77	19.20	4	.91	1.66
60	16.08	20.90	5	.87	1.62
61	17.54	22.80	6	.83	1.58
62	19.19	24.95	7	.79	1.54
63	21.06	27.38	8	.75	1.50
64	23.14	30.08	9	.73	1.48
65	25.42	33.05	10	.72	1.47
66	27.85	36.21	11	.75	1.50
67	30.44	39.57	12	.83	1.58
68	33.19	43.15	13	.94	1.69
69	36.17	47.02	14	1.08	1.83
70	39.51	51.36	15	1.24	1.99
71	43.30	56.29	16	1.39	2.14
72	47.65	61.95	17	1.53	2.28
73	52.64	68.43	18	1.62	2.37
74	58.19	75.65	19	1.69	2.44
75	64.19	83.45	20	1.74	2.49
76	70.53	91.69	21	1.75	2.50
77	77.12	100.26	22	1.73	2.48
78	83.90	109.07	23	1.71	2.46
79	91.05	118.37	24	1.69	2.44
80	98.84	128.49	25	1.65	2.40
81	107.48	139.72	26	1.63	2.38
82	117.25	152.43	27	1.61	2.36
83	128.26	166.74	28	1.61	2.36
84	140.25	182.33	29	1.63	2.38
85	152.95	198.84	30	1.65	2.40
86	166.09	215.92	31	1.70	2.45
87	179.55	233.42	32	1.75	2.50
88	193.27	251.25	33	1.83	2.58
89	207.29	269.48	34	1.91	2.66
90	221.77	288.30	35	2.02	2.77
91	236.98	308.07	36	2.14	2.89
92	253.45	329.49	37	2.30	3.05
93	272.11	353.74	38	2.47	3.22
94	295.90	384.67	39	2.68	3.48
95	329.96	428.95	40	2.90	3.77
96	384.55	499.92	41	3.16	4.11
97	480.20	624.26	42	3.42	4.45
98	657.98	855.37	43	3.72	4.84
99	1000.00	1000.00	44	4.01	5.21

TABLE 2
 1980 CSO-B AND 1980 CET-B MORTALITY TABLES
 BASED ON BLENDING 1980 CSO AND 1980 CET
 MORTALITY TABLES 80 PERCENT MALE—
 20 PERCENT FEMALE
 (PIVOTAL AGE 45)
 RATES OF MORTALITY
 1,000 q_x AGE NEAREST BIRTHDAY

45	4.35	5.66
46	4.70	6.11
47	5.07	6.59
48	5.45	7.09
49	5.89	7.66
50	6.36	8.27
51	6.90	8.97
52	7.50	9.75
53	8.19	10.65
54	8.96	11.65
55	9.78	12.71

Age (x)	1980 CSO-B	1980 CET-B
0	3.92	5.10

Age (x)	1980 CSO-B	1980 CET-B	Age (x)	1980 CSO-C	1980 CET-C
56	10.67	13.87	1	.99	1.74
57	11.58	15.05	2	.93	1.68
58	12.54	16.30	3	.90	1.65
59	13.57	17.64	4	.88	1.63
60	14.72	19.14	5	.84	1.59
61	16.00	20.80	6	.81	1.56
62	17.47	22.71	7	.77	1.52
63	19.16	24.91	8	.73	1.48
64	21.05	27.37	9	.73	1.48
65	23.11	30.04	10	.71	1.46
66	25.29	32.88	11	.74	1.49
67	27.61	35.89	12	.80	1.55
68	30.03	39.04	13	.89	1.64
69	32.66	42.46	14	1.01	1.76
70	35.59	46.27	15	1.14	1.89
71	38.95	50.64	16	1.27	2.02
72	42.84	55.69	17	1.38	2.13
73	47.33	61.53	18	1.47	2.22
74	52.37	68.08	19	1.52	2.27
75	57.84	75.19	20	1.56	2.31
76	63.65	82.75	21	1.58	2.33
77	69.70	90.61	22	1.58	2.33
78	75.95	98.74	23	1.56	2.31
79	82.57	107.34	24	1.55	2.30
80	89.83	116.78	25	1.53	2.28
81	97.94	127.32	26	1.52	2.27
82	107.18	139.33	27	1.51	2.26
83	117.65	152.95	28	1.53	2.28
84	129.10	167.83	29	1.54	2.29
85	141.38	183.79	30	1.58	2.33
86	154.17	200.42	31	1.63	2.38
87	167.49	217.74	32	1.67	2.42
88	181.24	235.61	33	1.75	2.50
89	195.54	254.20	34	1.83	2.58
90	210.53	273.69	35	1.93	2.68
91	226.51	294.46	36	2.04	2.79
92	244.13	317.37	37	2.20	2.95
93	264.04	343.25	38	2.36	3.11
94	289.36	376.17	39	2.56	3.33
95	324.89	422.36	40	2.78	3.61
96	380.97	495.26	41	3.03	3.94
97	477.69	621.00	42	3.29	4.28
98	657.38	854.59	43	3.56	4.63
99	1000.00	1000.00	44	3.84	4.99

TABLE 3
 1980 CSO-C AND 1980 CET-C MORTALITY TABLES
 BASED ON BLENDING 1980 CSO AND 1980 CET
 MORTALITY TABLES 60 PERCENT MALE—
 40 PERCENT FEMALE
 (PIVOTAL AGE 45)
 RATES OF MORTALITY
 1,000 q_x AGE NEAREST BIRTHDAY

Age (x)	1980 CSO-C	1980 CET-C	45	4.15	5.40
0	3.67	4.77	46	4.47	5.81
			47	4.81	6.25
			48	5.17	6.72
			49	5.58	7.25
			50	6.01	7.81
			51	6.50	8.45
			52	7.05	9.17
			53	7.68	9.98
			54	8.37	10.88
			55	9.11	11.84

Age (x)	1980 CSO-C	1980 CET-C	Age (x)	1980 CSO-D	1980 CET-D
56	9.88	12.84	1	.97	1.72
57	10.68	13.88	2	.91	1.66
58	11.50	14.95	3	.89	1.64
59	12.39	16.11	4	.85	1.60
60	13.37	17.38	5	.83	1.58
61	14.48	18.81	6	.79	1.54
62	15.79	20.53	7	.77	1.52
63	17.30	22.49	8	.73	1.48
64	19.01	24.71	9	.72	1.47
65	20.88	27.14	10	.71	1.46
66	22.84	29.69	11	.72	1.47
67	24.90	32.37	12	.78	1.53
68	27.04	35.15	13	.87	1.62
69	29.32	38.12	14	.97	1.72
70	31.92	41.50	15	1.10	1.85
71	34.90	45.37	16	1.21	1.96
72	38.38	49.89	17	1.31	2.06
73	42.48	55.22	18	1.39	2.14
74	47.11	61.24	19	1.44	2.19
75	52.16	67.81	20	1.48	2.23
76	57.58	74.85	21	1.49	2.24
77	63.24	82.21	22	1.50	2.25
78	69.13	89.87	23	1.49	2.24
79	75.41	98.03	24	1.49	2.24
80	82.34	107.04	25	1.47	2.22
81	90.17	117.22	26	1.47	2.22
82	99.12	128.86	27	1.46	2.21
83	109.33	142.13	28	1.48	2.23
84	120.58	156.75	29	1.51	2.26
85	132.68	172.48	30	1.54	2.29
86	145.47	189.11	31	1.58	2.33
87	158.84	206.49	32	1.64	2.39
88	172.87	224.73	33	1.70	2.45
89	187.54	243.80	34	1.79	2.54
90	203.08	264.00	35	1.88	2.63
91	219.76	285.69	36	2.00	2.75
92	238.20	309.66	37	2.14	2.89
93	259.26	337.04	38	2.31	3.06
94	285.17	370.72	39	2.51	3.26
95	322.03	418.64	40	2.72	3.54
96	378.56	492.14	41	2.97	3.86
97	476.70	619.71	42	3.22	4.19
98	657.10	854.23	43	3.49	4.54
99	1000.00	1000.00	44	3.75	4.88
			45	4.06	5.28
			46	4.36	5.67
			47	4.68	6.08
			48	5.03	6.54
			49	5.41	7.03
			50	5.83	7.58
			51	6.30	8.19
			52	6.82	8.87
			53	7.42	9.65
			54	8.07	10.49
			55	8.77	11.40

TABLE 4
 1980 CSO-D AND 1980 CET-D MORTALITY TABLES
 BASED ON BLENDING 1980 CSO AND 1980 CET
 MORTALITY TABLES 50 PERCENT MALE—
 50 PERCENT FEMALE
 (PIVOTAL AGE 45)
 RATES OF MORTALITY
 1,000 q_x AGE NEAREST BIRTHDAY

Age (x)	1980 CSO-D	1980 CET-D
0	3.54	4.60

Age (x)	1980 CSO-D	1980 CET-D	Age (x)	1980 CSO-E	1980 CET-E
56	9.50	12.35	1	.95	1.70
57	10.23	13.30	2	.89	1.64
58	10.99	14.29	3	.86	1.61
59	11.81	15.35	4	.84	1.59
60	12.71	16.52	5	.81	1.56
61	13.75	17.88	6	.78	1.53
62	14.96	19.45	7	.76	1.51
63	16.39	21.31	8	.72	1.47
64	18.02	23.43	9	.71	1.46
65	19.78	25.71	10	.70	1.45
66	21.64	28.13	11	.71	1.46
67	23.59	30.67	12	.77	1.52
68	25.58	33.25	13	.84	1.59
69	27.73	36.05	14	.94	1.69
70	30.16	39.21	15	1.05	1.80
71	32.96	42.85	16	1.15	1.90
72	36.29	47.18	17	1.24	1.99
73	40.20	52.26	18	1.31	2.06
74	44.66	58.06	19	1.36	2.11
75	49.55	64.42	20	1.39	2.14
76	54.80	71.24	21	1.41	2.16
77	60.31	78.40	22	1.42	2.17
78	66.06	85.88	23	1.42	2.17
79	72.23	93.90	24	1.42	2.17
80	79.07	102.79	25	1.40	2.15
81	86.80	112.84	26	1.41	2.16
82	95.68	124.38	27	1.42	2.17
83	105.81	137.55	28	1.44	2.19
84	117.02	152.13	29	1.46	2.21
85	129.11	167.84	30	1.50	2.25
86	141.91	184.48	31	1.55	2.30
87	155.41	202.03	32	1.60	2.35
88	169.55	220.42	33	1.66	2.41
89	184.45	239.79	34	1.75	2.50
90	200.23	260.30	35	1.83	2.58
91	217.23	282.40	36	1.95	2.70
92	235.91	306.68	37	2.09	2.84
93	257.43	334.66	38	2.25	3.00
94	283.81	368.95	39	2.45	3.20
95	320.74	416.96	40	2.66	3.46
96	377.93	491.31	41	2.90	3.77
97	476.61	619.59	42	3.15	4.10
98	656.44	853.37	43	3.41	4.43
99	1000.00	1000.00	44	3.66	4.76
			45	3.96	5.15
			46	4.24	5.51
			47	4.55	5.92
			48	4.89	6.36
			49	5.26	6.84
			50	5.66	7.36
			51	6.10	7.93
			52	6.60	8.58
			53	7.16	9.31
			54	7.77	10.10
			55	8.43	10.96

TABLE 5
1980 CSO-E AND 1980 CET-E MORTALITY TABLES
BASED ON BLENDING 1980 CSO AND 1980 CET
MORTALITY TABLES 40 PERCENT MALE—
60 PERCENT FEMALE
(PIVOTAL AGE 45)
RATES OF MORTALITY
1,000 q_x AGE NEAREST BIRTHDAY

Age (x)	1980 CSO-E	1980 CET-E
0	3.41	4.43

Age (x)	1980 CSO-E	1980 CET-E	Age (x)	1980 CSO-F	1980 CET-F
56	9.11	11.84	1	.92	1.67
57	9.79	12.73	2	.85	1.60
58	10.48	13.62	3	.82	1.57
59	11.23	14.60	4	.81	1.56
60	12.05	15.67	5	.79	1.54
61	13.01	16.91	6	.76	1.51
62	14.14	18.38	7	.74	1.49
63	15.50	20.15	8	.71	1.46
64	17.03	22.14	9	.70	1.45
65	18.71	24.32	10	.70	1.45
66	20.46	26.60	11	.70	1.45
67	22.31	29.00	12	.74	1.49
68	24.17	31.42	13	.80	1.55
69	26.18	34.03	14	.86	1.61
70	28.45	36.99	15	.95	1.70
71	31.10	40.43	16	1.03	1.78
72	34.27	44.55	17	1.09	1.84
73	38.02	49.43	18	1.15	1.90
74	42.32	55.02	19	1.19	1.94
75	47.05	61.17	20	1.22	1.97
76	52.18	67.83	21	1.24	1.99
77	57.57	74.84	22	1.25	2.00
78	63.21	82.17	23	1.27	2.02
79	69.29	90.08	24	1.28	2.03
80	76.04	98.85	25	1.29	2.04
81	83.72	108.84	26	1.30	2.05
82	92.52	120.28	27	1.31	2.06
83	102.65	133.45	28	1.35	2.10
84	113.82	147.97	29	1.38	2.13
85	125.93	163.71	30	1.42	2.17
86	138.78	180.41	31	1.47	2.22
87	152.39	198.11	32	1.52	2.27
88	166.68	216.68	33	1.58	2.33
89	181.76	236.29	34	1.66	2.41
90	197.78	257.11	35	1.74	2.49
91	215.12	279.66	36	1.85	2.60
92	234.03	304.24	37	1.99	2.74
93	255.85	332.61	38	2.15	2.90
94	282.58	367.35	39	2.32	3.07
95	319.76	415.69	40	2.54	3.30
96	377.41	490.63	41	2.77	3.60
97	476.21	619.07	42	3.02	3.93
98	656.10	852.93	43	3.25	4.23
99	1000.00	1000.00	44	3.49	5.54
			45	3.75	4.88
			46	4.02	5.23
			47	4.30	5.59
			48	4.61	5.99
			49	4.94	6.42
			50	5.31	6.90
			51	5.70	7.41
			52	6.15	8.00
			53	6.65	8.65
			54	7.19	9.35

TABLE 6
 1980 CSO-F AND 1980 CET-F MORTALITY TABLES
 BASED ON BLENDING 1980 CSO AND 1980 CET
 MORTALITY TABLES 20 PERCENT MALE—
 80 PERCENT FEMALE
 (PIVOTAL AGE 45)
 RATES OF MORTALITY
 1,000 q_x AGE NEAREST BIRTHDAY

Age (x)	1980 CSO-F	1980 CET-F
0	3.15	4.10

Age (x)	1980 CSO-F	1980 CET-F	Age (x)	1980 CSO-G	1980 CET-G
55	7.76	10.09	1	.87	1.62
56	8.34	10.84	2	.81	1.56
57	8.91	11.58	3	.79	1.54
58	9.47	12.31	4	.77	1.52
59	10.08	13.10			
60	10.75	13.98	5	.76	1.51
61	11.55	15.02	6	.73	1.48
62	12.54	16.30	7	.72	1.47
63	13.74	17.86	8	.70	1.45
64	15.10	19.63	9	.69	1.44
65	16.62	22.61	10	.68	1.43
66	18.19	23.65	11	.69	1.44
67	19.81	25.75	12	.72	1.47
68	21.45	27.89	13	.75	1.50
69	23.19	30.15	14	.80	1.55
70	25.19	32.75	15	.85	1.60
71	27.57	35.84	16	.90	1.65
72	30.43	39.56	17	.95	1.70
73	33.92	44.10	18	.98	1.73
74	37.94	49.32	19	1.02	1.77
75	42.43	55.16	20	1.05	1.80
76	47.33	61.53	21	1.07	1.82
77	52.53	68.29	22	1.09	1.84
78	58.03	75.44	23	1.11	1.86
79	63.98	83.17	24	1.14	1.89
80	70.65	91.85	25	1.16	1.91
81	78.26	101.74	26	1.19	1.94
82	87.04	113.15	27	1.22	1.97
83	97.15	126.30	28	1.26	2.01
84	108.33	140.83	29	1.30	2.05
85	120.52	156.68	30	1.35	2.10
86	133.53	173.59	31	1.40	2.15
87	147.37	191.58	32	1.45	2.20
88	161.93	210.51	33	1.50	2.25
89	177.40	230.62	34	1.58	2.33
90	193.80	251.94	35	1.65	2.40
91	211.61	275.09	36	1.76	2.51
92	231.05	300.37	37	1.89	2.64
93	253.44	329.47	38	2.04	2.79
94	280.66	364.86	39	2.22	2.97
95	318.37	413.88	40	2.42	3.17
96	376.21	489.07	41	2.64	3.43
97	475.72	618.44	42	2.87	3.73
98	656.09	852.92	43	3.09	4.02
99	1000.00	1000.00	44	3.32	4.32
			45	3.56	4.63
			46	3.80	4.94
			47	4.05	5.27
			48	4.33	5.63
			49	4.63	6.02
			50	4.96	6.45
			51	5.31	6.90
			52	5.70	7.41
			53	6.15	8.00
			54	6.61	8.59

TABLE 7
 1980 CSO-G AND 1980 CET-G MORTALITY TABLES
 BASED ON BLENDING 1980 CSO AND 1980 CET
 MORTALITY TABLES 0 PERCENT MALE—
 100 PERCENT FEMALE
 RATES OF MORTALITY
 1,000 q_x AGE NEAREST BIRTHDAY

Age (x)	1980 CSO-G	1980 CET-G
0	2.89	3.76

Age (x)	1980 CSO-G	1980 CET-G	Age	Non- Smoker	Smoker
55	7.09	9.22	19	1.66	2.26
56	7.57	9.84	20	1.63	2.31
57	8.03	10.44	21	1.67	2.33
58	8.47	11.01	22	1.64	2.30
59	8.94	11.62	23	1.61	2.26
			24	1.57	2.21
60	9.47	12.31	25	1.52	2.14
61	10.13	13.17	26	1.48	2.08
62	10.96	14.25	27	1.46	2.06
63	12.02	15.63	28	1.44	2.04
64	13.25	17.23	29	1.44	2.06
			30	1.44	2.10
65	14.59	18.97	31	1.47	2.17
66	16.00	20.80	32	1.50	2.24
67	17.43	22.66	33	1.55	2.35
68	18.84	24.49	34	1.61	2.48
69	20.36	26.47	35	1.69	2.63
			36	1.77	2.81
70	22.11	28.74	37	1.88	3.04
71	24.23	31.50	38	2.00	3.30
72	26.87	34.93	39	2.14	3.60
73	30.11	39.14	40	2.29	3.94
74	33.93	44.11	41	2.47	4.34
			42	2.65	4.75
75	38.24	49.71	43	2.86	5.22
76	42.97	55.86	44	3.07	5.71
77	48.04	62.45	45	3.32	6.27
78	53.45	69.49	46	3.59	6.83
79	59.35	77.16	47	3.88	7.44
			48	4.19	8.08
80	65.99	85.79	49	4.54	8.80
81	73.60	95.68	50	4.91	9.50
82	82.40	107.12	51	5.35	10.44
83	92.53	120.29	52	5.86	11.42
84	103.81	134.95	53	6.43	12.54
			54	7.09	13.80
85	116.10	150.93	55	7.82	15.14
86	129.29	168.08	56	8.63	16.59
87	143.32	186.32	57	9.49	18.09
88	158.18	205.63	58	10.42	19.69
89	173.94	226.12	59	11.47	21.35
			60	12.64	23.19
90	190.75	247.98	61	13.94	25.26
91	208.87	271.53	62	15.42	27.59
92	228.81	297.45	63	17.11	30.23
93	251.51	326.96	64	19.02	33.14
94	279.31	363.10	65	21.13	36.29
			66	23.40	39.57
95	317.32	412.52	67	25.86	43.01
96	375.74	488.46	68	23.50	46.55
97	474.97	617.46	69	31.38	50.32
98	655.85	852.61	70	34.63	54.48
99	1000.00	1000.00	71	88.91	59.09
			72	42.56	64.33
			73	47.44	70.23
			74	52.92	76.66
			75	58.80	83.77
			76	65.06	91.10
			77	71.64	98.52
			78	78.47	105.91
			79	85.72	113.49
			80	93.67	121.59
			81	102.52	130.41
			82	112.52	140.20
			83	123.79	151.03

APPENDIX B

1980 CSO-SA Smoker Table 1

Age	Non- Smoker	Smoker
15	1.29	1.65
16	1.43	1.87
17	1.54	2.05
18	1.60	2.16

<u>Age</u>	<u>Non-Smoker</u>	<u>Smoker</u>
84	136.11	162.49
85	149.20	174.20
86	162.80	185.78
87	176.79	197.06
88	190.89	209.37
89	205.29	221.52
90	220.19	233.69
91	235.84	246.12
92	252.75	259.33
93	271.63	276.30
94	295.65	298.15
95	329.96	329.96
96	384.55	384.55
97	480.20	480.20
98	657.98	657.98
99	1000.00	1000.00

<u>Age</u>	<u>Non-Smoker</u>	<u>Smoker</u>
58	10.42	19.69
59	11.47	21.35
60	12.64	23.19
61	13.94	25.26
62	15.42	27.59
63	17.11	30.23
64	19.02	33.14
65	21.13	36.29
66	23.40	39.57
67	25.86	43.01
68	23.50	46.55
69	31.38	50.32
70	34.63	54.48
71	88.91	59.09
72	42.56	64.33
73	47.44	70.23
74	52.92	76.66
75	58.80	83.77
76	65.06	91.10
77	71.64	98.52
78	78.47	105.91
79	85.72	113.49
80	93.67	121.59
81	102.52	130.41
82	112.52	140.20
83	123.79	151.03
84	136.11	162.49
85	149.20	174.20
86	162.80	185.78
87	176.79	197.06
88	190.89	209.37
89	205.29	221.52
90	220.19	233.69
91	235.84	246.12
92	252.75	259.33
93	271.63	276.30
94	295.65	298.15
95	329.96	329.96
96	384.55	384.55
97	480.20	480.20
98	657.98	657.98
99	1000.00	1000.00

1980 CSO-NA Nonsmoker Table 2

<u>Age</u>	<u>Non-Smoker</u>	<u>Smoker</u>
15	1.29	1.65
16	1.43	1.87
17	1.54	2.05
18	1.60	2.16
19	1.66	2.26
20	1.63	2.31
21	1.67	2.33
22	1.64	2.30
23	1.61	2.26
24	1.57	2.21
25	1.52	2.14
26	1.48	2.08
27	1.46	2.06
28	1.44	2.04
29	1.44	2.06
30	1.44	2.10
31	1.47	2.17
32	1.50	2.24
33	1.55	2.35
34	1.61	2.48
35	1.69	2.63
36	1.77	2.81
37	1.88	3.04
38	2.00	3.30
39	2.14	3.60
40	2.29	3.94
41	2.47	4.34
42	2.65	4.75
43	2.86	5.22
44	3.07	5.71
45	3.32	6.27
46	3.59	6.83
47	3.88	7.44
48	4.19	8.08
49	4.54	8.80
50	4.91	9.50
51	5.35	10.44
52	5.86	11.42
53	6.43	12.54
54	7.09	13.80
55	7.82	15.14
56	8.63	16.59
57	9.49	18.09

1980 CET-SA Smoker Table 3

<u>Age</u>	<u>Non-Smoker</u>	<u>Smoker</u>
15	2.11	2.51
16	2.23	2.71
17	2.32	2.85
18	2.38	2.96
19	2.42	3.03
20	2.43	3.07
21	2.41	3.07
22	2.38	3.03
23	2.34	2.99
24	2.30	2.93
25	2.25	2.86
26	2.22	2.82
27	2.20	2.80
28	2.19	2.80
29	2.19	2.83
30	2.20	2.88
31	2.23	2.95

Age	Non-Smoker	Smoker
32	2.27	3.04
33	2.33	3.16
34	2.40	3.32
35	2.48	3.54
36	2.57	3.80
37	2.69	4.12
38	2.82	4.49
39	2.96	4.90
40	2.13	5.38
41	3.33	5.90
42	3.58	6.47
43	3.85	7.10
44	4.15	7.79
45	4.49	8.52
46	4.85	9.27
47	5.24	10.09
48	5.67	10.97
49	6.14	11.93
50	6.67	13.00
51	7.28	14.21
52	7.98	15.57
53	8.79	17.12
54	9.69	18.81
55	10.69	20.62
56	11.78	22.53
57	12.94	24.54
58	14.22	26.66
59	15.67	28.94
60	17.28	31.47
61	19.07	34.33
62	21.14	37.56
63	23.48	41.16
64	26.08	45.10
65	28.93	49.27
66	32.01	53.64
67	25.31	58.16
68	38.90	62.91
69	42.87	68.06
70	47.37	73.74
71	52.51	80.12
72	58.44	87.33
73	65.14	95.33
74	72.51	104.09
75	80.39	113.45
76	88.71	123.02
77	97.41	132.63
78	106.54	142.34
79	116.38	152.49
80	127.24	163.42
81	139.43	175.45
82	153.17	188.77
83	168.40	203.18
84	184.83	218.18
85	202.00	233.27
86	219.93	248.09
87	238.11	263.80
88	256.53	279.15
89	275.46	294.91
90	295.17	310.80
91	316.11	327.34
92	339.07	346.52
93	366.28	371.11
94	402.78	404.65
95	457.42	457.42
96	547.29	547.29

Age	Non-Smoker	Smoker
97	703.30	703.30
98	968.70	968.70
99	1000.00	1000.00

1980 CET-NA Non-Smoker Table 4

Age	Non-Smoker	Smoker
15	2.11	2.51
16	2.23	2.71
17	2.32	2.85
18	2.38	2.96
19	2.42	3.03
20	2.43	3.07
21	2.41	3.07
22	2.38	3.03
23	2.34	2.99
24	2.30	2.93
25	2.25	2.86
26	2.22	2.82
27	2.20	2.80
28	2.19	2.80
29	2.19	2.83
30	2.20	2.88
31	2.23	2.95
32	2.27	3.04
33	2.33	3.16
34	2.40	3.32
35	2.48	3.54
36	2.57	3.80
37	2.69	4.12
38	2.82	4.49
39	2.96	4.90
40	2.13	5.38
41	3.33	5.90
42	3.58	6.47
43	3.85	7.10
44	4.15	7.79
45	4.49	8.52
46	4.85	9.27
47	5.24	10.09
48	5.67	10.97
49	6.14	11.93
50	6.67	13.00
51	7.28	14.21
52	7.98	15.57
53	8.79	17.12
54	9.69	18.81
55	10.69	20.62
56	11.78	22.53
57	12.94	24.54
58	14.22	26.66
59	15.67	28.94
60	17.28	31.47
61	19.07	34.33
62	21.14	37.56
63	23.48	41.16
64	26.08	45.10
65	28.93	49.27
66	32.01	53.64
67	25.31	58.16
68	38.90	62.91
69	42.87	68.06
70	47.37	73.74

Age	Non-Smoker	Smoker	Age	1 _x	1000q _x
71	52.51	80.12	42	209577	4.53
72	58.44	87.33	43	208628	4.97
73	65.14	95.33	44	207591	5.42
74	72.51	104.09	45	206466	5.94
75	80.39	113.45	46	205240	6.45
76	88.71	123.02	47	203916	7.01
77	97.41	132.63	48	202487	7.60
78	106.54	142.34	49	200948	8.25
79	116.38	152.49	50	199290	8.95
80	127.24	163.42	51	197506	9.74
81	139.43	175.45	52	195582	10.63
82	153.17	188.77	53	193503	11.64
83	168.40	203.18	54	191251	12.77
84	184.83	218.18	55	188809	13.96
85	202.00	233.27	56	186173	15.24
86	219.93	248.09	57	183336	16.55
87	238.11	263.80	58	180302	17.93
88	256.53	279.15	59	177069	19.36
89	275.46	294.91	60	173641	20.93
90	295.17	310.80	61	170007	22.72
91	316.11	327.34	62	166144	24.75
92	339.07	346.52	63	162032	27.09
93	366.28	371.11	64	157643	29.66
94	402.78	404.65	65	152967	32.45
95	457.42	457.42	66	148003	35.33
96	547.29	547.29	67	142774	38.33
97	703.30	703.30	68	137301	41.34
98	968.70	968.70	69	131625	44.56
99	1000.00	1000.00	70	125760	48.06
			71	119716	52.02
			72	113488	56.56
			73	107069	61.72
			74	100461	67.39
			75	93691	73.64
			76	86792	80.11
			77	79839	86.64
			78	72922	93.17
			79	66128	99.91
			80	59521	107.14
			81	53144	115.11
			82	47027	124.03
			83	41194	134.01
			84	35674	144.97
			85	30502	165.08
			86	25741	167.75
			87	21423	179.03
			88	17588	191.74
			89	14216	204.04
			90	11315	217.42
			91	8855	231.58
			92	6804	246.88
			93	5124	265.45
			94	3764	*289.36
			95	2675	*324.89
			96	1806	*380.97
			97	1118	*477.69
			98	584	*657.38
			99	200	1000.00

1980 CSO-SB SMOKER TABLE &

1980 CET-SB SMOKER TABLE #

Pivotal Age Is 45 *** Ratio of Male 1_x to Total Is 80%

1980 CSO-SB SMOKER TABLE 5

Age	1 _x	1000q _x
15	223083	1.51
16	222746	1.70
17	222367	1.85
18	221956	1.95
19	221523	2.04
20	221071	2.09
21	220609	2.10
22	220146	2.09
23	219686	2.06
24	219233	2.03
25	218788	1.97
26	218357	1.93
27	217936	1.92
28	217518	1.92
29	217100	1.94
30	216679	1.99
31	216248	2.06
32	215803	2.13
33	215343	2.23
34	214863	2.35
35	214358	2.50
36	213822	2.67
37	213251	2.89
38	212635	3.14
39	211967	3.43
40	211240	3.75
41	210448	4.14

1980 CET-SB SMOKER TABLE 6

Age	1 _x	1000q _x
15	4675331	2.26
16	4664765	2.45
17	4653336	2.60

Age	1_x	$1000q_x$
18	4641237	2.70
19	4628706	2.79
20	4615792	2.84
21	4602683	2.85
22	4589565	2.84
23	2576531	2.81
24	4563671	2.78
25	4550984	2.72
26	4538605	2.68
27	4526442	2.67
28	4514356	2.67
29	4502303	2.69
30	4490192	2.74
31	4477889	2.81
32	4465306	2.88
33	4452446	2.98
34	4439178	3.10
35	4425417	3.25
36	4411034	3.47
37	4395728	3.76
38	4379200	4.08
39	4361333	4.46
40	4341881	4.88
41	4320693	5.38
42	4297448	5.89
43	4272136	6.46
44	4244538	7.05
45	4214614	7.72
46	4182077	8.39
47	4146989	9.11
48	4109210	9.88
49	4068611	10.73
50	4024955	11.64
51	3978105	12.66
52	3927742	13.82
53	3873461	15.13
54	3814856	16.60
55	3751529	18.15
56	3683439	19.81
57	3610470	21.52
58	3532773	23.31
59	3450424	25.17
60	3363577	27.21
61	3272054	29.54
62	3175398	32.18
63	3073214	35.22
64	2964975	38.56
65	2850646	42.19
66	2730377	45.93
67	2604971	49.83
68	2475165	53.74
69	2342150	57.93
70	2206469	62.48
71	2068609	67.63
72	1928709	73.53
73	1786891	80.24
74	1643511	87.61
75	1499523	95.73
76	1355974	104.14
77	1214763	112.63
78	1077944	121.12
79	947383	129.88
80	824337	139.28
81	709523	149.64
82	603350	161.24
83	506066	174.21

Age	1_x	$1000q_x$
84	417904	188.46
85	339146	202.90
86	270333	218.08
87	211379	232.74
88	162183	249.26
89	121757	265.25
90	89461	282.65
91	64175	301.05
92	44855	320.94
93	30459	345.09
94	19948	376.17
95	12444	422.36
96	7188	495.26
97	3628	621.00
98	1375	854.59
99	200	1000.00

Age nearest birthday CSO: Sum $qx=$ 4770.93 Sum $1x=$ 12302728
 * Adjusted; see text CET: Sum $qx=$ 8674.67 Sum $1x=$ 242009995

1980 CSO-SC SMOKER TABLE &
 1980 CET-SC SMOKER TABLE #
 Pivotal Age Is 45 *** Ratio of Male 1_x to Total Is 60%
 1980 CSO-SC SMOKER TABLE 7

Age	1_x	$1000q_x$
15	161242	1.37
16	161021	1.52
17	160776	1.65
18	160511	1.74
19	160232	1.82
20	159940	1.86
21	159643	1.88
22	159343	1.87
23	159045	1.85
24	158751	1.84
25	158459	1.81
26	158172	1.79
27	157889	1.79
28	157606	1.79
29	157324	1.83
30	157036	1.88
31	156741	1.95
32	156435	2.02
33	156119	2.11
34	155790	2.23
35	155443	2.35
36	155078	2.52
37	154687	2.74
38	154263	2.98
39	153803	3.25
40	153303	3.56
41	152757	3.94
42	152155	4.31
43	151499	4.71
44	150785	5.14
45	150010	5.61
46	149168	6.08
47	148261	6.59
48	147284	7.12
49	146235	7.71
50	145108	8.35
51	143896	9.05
52	142594	9.84
53	141191	10.75

Age	<u>1_x</u>	<u>1000q_x</u>	Age	<u>1_x</u>	<u>1000q_x</u>
54	139673	11.75	30	2892288	2.63
55	138032	12.80	31	2884681	2.70
56	136265	13.92	32	2876892	2.77
57	134368	15.05	33	2868923	2.86
58	132346	16.21	34	2860718	2.98
59	130201	17.41	35	2852193	3.10
60	127934	18.74	36	2843351	3.28
61	125537	20.27	37	2834025	3.56
62	122992	22.02	38	2823936	3.87
63	120284	24.08	39	2813007	4.23
64	117388	26.36	40	2801108	4.63
65	114294	28.83	41	2788139	5.12
66	110999	31.35	42	2773864	5.60
67	107519	33.97	43	2758330	6.12
68	103867	36.55	44	2741449	6.68
69	100071	39.31	45	2723136	7.29
70	96137	42.29	46	2703284	7.90
71	92071	45.73	47	2681928	8.57
72	87861	49.75	48	2658944	9.26
73	83490	54.37	49	2634322	10.02
74	78951	59.53	50	2607926	10.86
75	74251	65.21	51	2579604	11.77
76	69409	71.12	52	2549242	12.79
77	64473	77.16	53	2516637	13.98
78	59498	83.23	54	2481454	15.28
79	54546	89.55	55	2443537	16.64
80	49661	96.42	56	2402877	18.10
81	44873	104.08	57	2359385	19.57
82	40203	112.72	58	2313212	21.07
83	35671	122.47	59	2264473	22.63
84	31302	133.48	60	2213228	24.36
85	27124	144.59	61	2159314	26.35
86	23202	156.67	62	2102416	28.63
87	19567	168.41	63	2042224	31.30
88	16272	181.66	64	1978302	34.27
89	13316	194.45	65	1910506	37.48
90	10727	208.76	66	1838900	40.76
91	8488	223.98	67	1763946	44.16
92	6587	240.65	68	1686050	47.52
93	5002	260.28	69	1605929	51.10
94	3700	*285.17	70	1523866	54.98
95	2645	*322.03	71	1440084	59.45
96	1793	*378.56	72	1354471	64.68
97	1114	*476.70	73	1266864	70.68
98	583	*657.10	74	1177322	77.39
99	200	1000.00	75	1086209	84.77
			76	994131	92.46
			77	902214	100.31
			78	811713	108.20
			79	723886	116.42
			80	639611	125.35
			81	559436	135.30
			82	483744	146.54
			83	412856	159.21
			84	347125	173.52
			85	286892	187.97
			86	232965	203.67
			87	185517	218.93
			88	144902	236.16
			89	110682	252.79
			90	82703	271.39
			91	60258	291.17
			92	42713	312.85
			93	29350	338.36
			94	19419	370.72
			95	12220	418.64

1980 CET-SC SMOKER TABLE 8

Age	<u>1_x</u>	<u>1000q_x</u>	Age	<u>1_x</u>	<u>1000q_x</u>
15	3003428	2.12	81	559436	135.30
16	2997061	2.27	82	483744	146.54
17	2990258	2.40	83	412856	159.21
18	2983081	2.49	84	347125	173.52
19	2975653	2.57	85	286892	187.97
20	2968006	2.61	86	232965	203.67
21	2960260	2.63	87	185517	218.93
22	2952475	2.62	88	144902	236.16
23	2944740	2.60	89	110682	252.79
24	2937084	2.59	90	82703	271.39
25	2929477	2.56	91	60258	291.17
26	2921978	2.54	92	42713	312.85
27	2914556	2.54	93	29350	338.36
28	2907153	2.54	94	19419	370.72
29	2899769	2.58	95	12220	418.64

Age	1_x	$1000q_x$
96	7104	492.13
97	3608	619.71
98	1372	854.23
99	200	1000.00

Age nearest birthday CSO: Sum $qx= 4498.38$ Sum $1x= 9084082$
 * Adjusted; see text CET: Sum $qx= 8307.43$ Sum $1x= 158862096$

1980 CSO-SD SMOKER TABLE &
 1980 CET-SD SMOKER TABLE #

Pivotal Age is 45 *** Ratio of Male 1_x to Total Is 50%

1980 CSO-SD SMOKER TABLE 9

Age	1_x	$1000q_x$
15	141303	1.30
16	141119	1.44
17	140916	1.55
18	140698	1.63
19	140469	1.71
20	140229	1.74
21	139985	1.76
22	139739	1.76
23	139493	1.75
24	139249	1.74
25	139007	1.72
26	138768	1.71
27	138531	1.72
28	138293	1.73
29	138054	1.77
30	137810	1.82
31	137559	1.89
32	137299	1.96
33	137030	2.05
34	136749	2.17
35	136452	2.29
36	136140	2.45
37	135806	2.67
38	135443	2.90
39	135050	3.16
40	134623	3.47
41	134156	3.83
42	133642	4.20
43	133081	4.59
44	132470	4.99
45	131809	5.44
46	131092	5.89
47	130320	6.37
48	129490	6.88
49	128599	7.43
50	127644	8.04
51	126618	8.71
52	125515	9.46
53	124328	10.31
54	123046	11.25
55	121662	12.23
56	120174	13.26
57	118580	14.30
58	116884	15.36
59	115089	16.46
60	113195	17.67
61	111195	19.07
62	109075	20.69
63	106818	22.62
64	104402	24.76
65	101817	27.09

Age	1_x	$1000q_x$
66	99059	29.46
67	96141	31.91
68	93073	34.28
69	89882	36.86
70	86569	39.60
71	83141	42.85
72	79578	46.65
73	75866	51.06
74	71992	56.02
75	67959	61.49
76	63780	67.22
77	59493	73.10
78	55144	79.03
79	50786	85.26
80	46456	92.04
81	42180	99.64
82	37977	108.24
83	33866	117.99
84	29870	129.09
85	26014	140.30
86	22364	152.63
87	18951	164.55
88	15833	178.09
89	13013	191.10
90	10526	205.79
91	8360	221.41
92	6509	238.61
93	4956	258.45
94	3675	*283.81
95	2632	*320.74
96	1788	*377.93
97	1112	*476.61
98	582	*656.44
99	200	1000.00

1980 CET-SD SMOKER TABLE 10

Age	1_x	$1000q_x$
15	2503786	2.05
16	2498653	2.19
17	2493181	2.30
18	2487447	2.38
19	2481527	2.46
20	2475422	2.49
21	2469258	2.51
22	2463060	2.51
23	2456878	2.50
24	2450736	2.49
25	2444634	2.47
26	2438596	2.46
27	2432597	2.47
28	2426588	2.48
29	2420570	2.52
30	2414470	2.57
31	2408265	2.64
32	2401907	2.71
33	2395398	2.80
34	2388691	2.92
35	2381716	3.04
36	2374476	3.20
37	2366878	3.47
38	2358665	3.77
39	2349773	4.11
40	2340115	4.51
41	2329561	4.98
42	2317960	5.46

Age	1_x	1000 q_x	Age	1_x	1000 q_x
43	2305304	5.97	16	125581	1.35
44	2291541	6.49	17	125411	1.45
45	2276669	7.07	18	125229	1.52
46	2260573	7.66	19	125039	1.59
47	2243257	8.28	20	124840	1.63
48	2224683	8.94	21	124637	1.65
49	2204794	9.66	22	124431	1.65
50	2183496	10.45	23	124226	1.65
51	2160678	11.32	24	124021	1.65
52	2136219	12.30	25	123816	1.64
53	2109944	13.40	26	123613	1.64
54	2081671	14.63	27	123410	1.66
55	2051216	15.90	28	123205	1.67
56	2018602	17.24	29	122999	1.71
57	1983801	18.59	30	122789	1.77
58	1946922	19.97	31	122572	1.84
59	1908042	21.40	32	122346	1.91
60	1867210	22.97	33	122112	1.99
61	1824320	24.79	34	121869	2.11
62	1779095	26.90	35	121612	2.22
63	1731237	29.41	36	121342	2.38
64	1680321	32.19	37	121053	2.59
65	1626231	35.22	38	120739	2.82
66	1568955	38.30	39	120399	3.08
67	1508864	41.48	40	120028	3.38
68	1446276	44.56	41	119622	3.73
69	1381830	47.92	42	119176	4.09
70	1315613	51.48	43	118689	4.46
71	1247885	55.71	44	118160	4.85
72	1178365	60.65	45	117587	5.28
73	1106897	66.38	46	116966	5.70
74	1033421	72.83	47	116299	6.16
75	958157	79.94	48	115583	6.64
76	881562	87.39	49	114816	7.16
77	804522	95.03	50	113994	7.74
78	728068	102.74	51	113112	8.36
79	653266	110.84	52	112166	9.07
80	580858	119.65	53	111149	9.87
81	511358	129.53	54	110052	10.74
82	445122	140.71	55	108870	11.65
83	382489	153.39	56	107602	12.61
84	323819	167.82	57	106245	13.57
85	269476	182.39	58	104803	14.52
86	220326	198.42	59	103281	15.51
87	176609	213.92	60	101679	16.61
88	138829	231.52	61	99990	17.89
89	106687	248.43	62	98201	19.38
90	80183	267.53	63	96298	21.20
91	58732	287.83	64	94256	23.20
92	41827	310.19	65	92069	25.40
93	28853	335.99	66	89730	27.62
94	19159	368.95	67	87252	29.91
95	12090	416.96	68	84642	32.12
96	7049	491.31	69	81923	34.50
97	3586	619.59	70	79097	37.05
98	1364	853.37	71	76166	40.10
99	200	1000.00	72	73112	43.72

Age nearest birthday CSO: Sum q_x = 4385.48 Sum 1_x = 8045842
 * Adjusted; see text CET: Sum q_x = 8155.96 Sum 1_x = 133888931

1980 CSO-SE SMOKER TABLE &
 1980 CET-SE SMOKER TABLE #

Pivotal Age is 45 *** Ratio of Male 1_x to Total is 40%

1980 CSO-SE SMOKER TABLE 11

Age	1_x	1000 q_x	Age	1_x	1000 q_x
15	125734	1.22	80	43960	88.17
			81	40084	95.75

Age	1_x	$1000q_x$	Age	1_x	$1000q_x$
82	36246	104.35	58	1674667	18.88
83	32464	114.13	59	1643049	20.16
84	28759	125.35	60	1609925	21.59
85	25154	136.67	61	1575167	23.26
86	21716	149.23	62	1538529	25.19
87	18475	161.37	63	1499773	27.56
88	15494	175.15	64	1458439	30.16
89	12780	188.35	65	1414452	33.02
90	10373	203.38	66	1367747	35.91
91	8263	219.41	67	1318631	38.88
92	6450	236.87	68	1267363	41.76
93	4922	257.15	69	1214438	44.85
94	2656	*282.58	70	1159970	48.17
95	2623	*319.76	71	1104094	52.13
96	1784	*377.41	72	1046538	56.84
97	1111	*476.21	73	987053	62.36
98	582	*656.10	74	925500	68.59
99	200	1000.00	75	862020	75.49
			76	796946	82.75
			77	730999	90.21
			78	665056	97.84
			79	599987	105.82
			80	536496	114.62
			81	475003	124.48
			82	415875	135.66
			83	359457	148.37
			84	306124	162.96
			85	256238	177.67
			86	210712	194.00
			87	169834	209.78
			88	134206	227.70
			89	103647	244.86
			90	78268	264.39
			91	57575	285.23
			92	41153	307.93
			93	28481	334.30
			94	18960	367.35
			95	11995	415.69
			96	7009	490.63
			97	3570	619.07
			98	1360	852.93
			99	200	1000.00

1980 CET-SE SMOKER TABLE 12

Age	1_x	$1000q_x$
15	2133421	1.97
16	2129228	2.10
17	2124757	2.20
18	2120083	2.27
19	1225270	2.34
20	2110320	2.38
21	2105297	2.40
22	2100244	2.40
23	2095203	2.40
24	2090175	2.40
25	2085159	2.39
26	2080175	2.39
27	2075203	2.41
28	2070202	2.42
29	2065192	2.46
30	2060112	2.52
31	2054921	2.59
32	2049599	2.66
33	2044147	2.74
34	2038546	2.86
35	2032716	2.97
36	2026679	3.13
37	2020335	3.37
38	2013526	3.67
39	2006136	4.00
40	1998111	4.39
41	1989339	4.85
42	1979691	5.32
43	1969159	5.80
44	1957738	6.31
45	1945385	6.86
46	1932040	7.41
47	1917724	8.01
48	1902363	8.63
49	1885946	9.31
50	1868388	10.06
51	1849592	10.87
52	1829487	11.79
53	1807917	12.83
54	1784721	13.96
55	1759806	15.15
56	1733145	16.39
57	1704739	17.64

Age nearest birthday CSO: Sum q_x = 4284.01 Sum 1_x = 7234867
 * Adjusted; see text CET: Sum q_x = 8020.06 Sum 1_x = 115338453

1980 CSO-SF SMOKER TABLE &
 1980 CET-SF SMOKER TABLE #
 Pivotal Age is 45 *** Ratio of Male 1_x to Total Is 20%

1980 CSO-SF SMOKER TABLE 13

Age	1_x	$1000q_x$
15	102794	1.08
16	102683	1.17
17	102563	1.25
18	102435	1.31
19	102301	1.36
20	102162	1.39
21	102020	1.42
22	101875	1.43
23	101729	1.44
24	101583	1.46
25	101435	1.47
26	101286	1.49
27	101135	1.52

<u>Age</u>	<u>1_x</u>	<u>1000q_x</u>
28	100981	1.54
29	100825	1.60
30	100664	1.66
31	100497	1.72
32	100324	1.80
33	100143	1.87
34	99956	1.98
35	99758	2.08
36	99551	2.23
37	99329	2.44
38	99087	2.65
39	98824	2.90
40	98537	3.19
41	98223	3.53
42	97876	3.86
43	97498	4.21
44	97088	4.56
45	96645	4.94
46	96168	5.33
47	95655	5.74
48	95106	6.16
49	94520	6.62
50	93894	7.14
51	93224	7.68
52	92508	8.29
53	91741	9.00
54	90915	9.74
55	90029	10.52
56	89082	11.33
57	88073	12.11
58	87006	12.87
59	85886	13.66
60	84713	14.53
61	83482	15.59
62	82181	16.84
63	80797	18.43
64	79308	20.20
65	77706	22.15
66	75985	24.10
67	74154	26.12
68	72217	28.01
69	70194	30.09
70	68082	32.29
71	65884	35.04
72	63575	38.36
73	61136	42.33
74	58548	46.89
75	55803	51.94
76	52905	57.33
77	49872	62.93
78	46734	68.70
79	43523	74.83
80	40266	81.61
81	36980	89.22
82	33681	97.92
83	30383	107.82
84	27107	119.31
85	23873	130.86
86	20749	143.85
87	17764	156.39
88	14986	170.57
89	12430	184.17
90	10141	199.71
91	8116	216.27
92	6361	234.41
93	4870	255.00

<u>Age</u>	<u>1_x</u>	<u>1000q_x</u>
94	3628	*280.66
95	2610	*318.37
96	1779	*376.21
97	1110	*475.72
98	582	*656.09
99	200	1000.00

1980 CET-SF SMOKER TABLE 14

<u>Age</u>	<u>1_x</u>	<u>1000q_x</u>
15	1629026	1.83
16	1626045	1.92
17	1622923	2.00
18	1619677	2.06
19	1616340	2.11
20	1612930	2.14
21	1609478	2.17
22	1605985	2.18
23	1602484	2.19
24	1598975	2.21
25	1595441	2.22
26	1591899	2.24
27	1588333	2.27
28	1584727	2.29
29	1581098	2.35
30	1577382	2.41
31	1573581	2.47
32	1569694	2.55
33	1565691	2.62
34	1561589	2.73
35	1557326	2.83
36	1552919	2.98
37	1548291	3.19
38	1543352	3.45
39	1538027	3.77
40	1532229	4.15
41	1525870	4.59
42	1518866	5.02
43	1511241	5.47
44	1502975	5.93
45	1494062	6.42
46	1484470	6.93
47	1474183	7.46
48	1463186	8.01
49	1451466	8.61
50	1438969	9.28
51	1425615	9.98
52	1411387	10.78
53	1396172	11.70
54	1379837	12.66
55	1362368	13.68
56	1343731	14.73
57	1323938	15.74
58	1303099	16.73
59	1281298	17.76
60	1258542	18.89
61	1234768	20.27
62	1209739	21.89
63	1183258	23.96
64	1154907	26.26
65	1124579	28.80
66	1092191	31.33
67	1057973	33.96
68	1022044	36.41
69	984831	39.12

Age	1_x	$1000q_x$	Age	1_x	$1000q_x$
70	946304	41.98	40	112325	2.25
71	906578	45.55	41	112072	2.43
72	865283	49.87	42	111800	2.60
73	822131	55.03	43	111509	2.81
74	776889	60.96	44	111196	3.01
75	729530	67.52	45	110861	3.26
76	680272	74.53	46	110500	3.51
77	629571	81.81	47	110112	3.78
78	578066	89.31	48	109696	4.09
79	526439	97.28	49	109247	4.41
80	475227	106.09	50	108765	4.76
81	424810	115.99	51	108247	5.18
82	375536	127.30	52	107686	5.65
83	327730	140.17	53	107078	6.19
84	281792	155.10	54	106415	6.81
85	238086	170.12	55	105690	7.48
86	197583	187.02	56	104899	8.21
87	160633	203.31	57	104038	9.00
88	127975	221.74	58	103102	9.84
89	99598	239.42	59	102087	10.75
90	75752	259.62	60	100990	11.80
91	56085	281.15	61	99798	12.96
92	40317	304.73	62	98505	14.30
93	28031	331.50	63	97096	15.86
94	18739	364.86	64	95556	17.62
95	11902	413.88	65	93872	19.55
96	6976	489.07	66	92037	21.64
97	3564	618.44	67	90045	23.87
98	1360	852.92	68	87896	26.24
99	200	1000.00	69	85590	28.82

Age nearest birthday CSO: Sum q_x = 4106.55 Sum 1_x = 6040029

* Adjusted; see text CET: Sum q_x = 7783.96 Sum 1_x = 90033966

1980 CSO-NB NON-SMOKER TABLE &
 1980 CET-NB NON-SMOKER TABLE #
 Pivotal Age Is 45 *** Ratio of Male 1_x to Total Is 80%
 1980 CSO-NB NON-SMOKER TABLE 15

Age	1_x	$1000q_x$
15	116700	1.20
16	116560	1.32
17	116406	1.42
18	116241	1.47
19	116070	1.52
20	115894	1.55
21	115714	1.55
22	115535	1.52
23	115359	1.50
24	115186	1.47
25	115017	1.44
26	114851	1.41
27	114689	1.40
28	114528	1.38
29	114370	1.40
30	114210	1.40
31	114050	1.43
32	113887	1.46
33	113721	1.50
34	113550	1.58
35	113371	1.64
36	113185	1.73
37	112989	1.83
38	112782	1.96
39	112561	2.10

70	83123	31.74
71	80485	35.51
72	77627	38.89
73	74608	43.37
74	71372	48.39
75	67918	53.84
76	64261	59.65
77	60428	65.77
78	56454	72.13
79	52382	78.92
80	48248	86.40
81	440079	94.77
82	39902	104.26
83	35742	115.02
84	31631	126.80
85	27620	139.45
86	23768	152.61
87	20141	166.38
88	16790	180.45
89	13760	195.03
90	11076	210.29
91	8747	*226.51
92	6766	*244.13
93	5114	*264.04
94	3764	*289.36
95	2675	*324.89
96	1806	*380.97
97	1118	*477.69
98	584	*657.38
99	200	1000.00

1980 CET-NB NON-SMOKER TABLE 16

Age	1_x	$1000q_x$
15	1977580	1.95

Age	<u>l_x</u>	<u>1000q_x</u>	Age	<u>l_x</u>	<u>1000q_x</u>
16	1973724	2.07	82	481029	135.54
17	1969638	2.17	83	415830	149.53
18	1965364	2.22	84	353651	164.84
19	1961001	2.27	85	295355	181.29
20	1956550	2.30	86	241810	198.39
21	1952050	2.30	87	193837	216.29
22	1947560	2.27	88	151912	234.59
23	1943139	2.25	89	116275	253.54
24	1938767	2.22	90	86795	273.38
25	1934463	2.19	91	63067	294.46
26	1930227	2.16	92	44496	317.37
27	1926058	2.15	93	30374	343.25
28	1921917	2.13	94	19948	376.17
29	1917823	2.15	95	12444	422.36
30	1913700	2.15	96	7188	495.26
31	1909586	2.18	97	3628	621.00
32	1905423	2.21	98	1375	854.59
33	1901212	2.25	99	200	1000.00
34	1896934	2.33			
35	1892514	2.39			
36	1887991	2.48			
37	1883309	2.58			
38	1878450	2.71			
39	1873359	2.85			
40	1868020	3.00			
41	1862416	3.18			
42	1856494	3.38			
43	1850219	3.65			
44	1843466	3.91			
45	1836258	4.24			
46	1828472	4.56			
47	1820134	4.91			
48	1811197	5.32			
49	1801561	5.73			
50	1791238	6.19			
51	1780150	6.73			
52	1768170	7.35			
53	1755174	8.05			
54	1741045	8.85			
55	1725637	9.72			
56	1708864	10.67			
57	1690630	11.70			
58	1670850	12.79			
59	1649480	13.98			
60	1626420	15.34			
61	1601471	16.85			
62	1574486	18.59			
63	1545216	20.62			
64	1513354	22.91			
65	1478683	25.42			
66	1441095	28.13			
67	1400557	31.03			
68	1357098	34.11			
69	1310807	37.47			
70	1261691	41.26			
71	1209634	46.16			
72	1153797	50.56			
73	1095461	56.38			
74	1033699	62.91			
75	968669	69.99			
76	900872	77.55			
77	831009	85.50			
78	759958	93.77			
79	688697	102.60			
80	618037	112.32			
81	548619	123.20			

Age nearest birthday CSO: Sum q_x= 3436.53 Sum l_x= 7008325
 * Adjusted; see text CET: Sum q_x= 7899.36 Sum l_x= 112256358

1980 CSO-NC NON-SMOKER TABLE &
 1980 CET-NC NON-SMOKER TABLE #
 Pivotal Age Is 45 *** Ratio of Male l_x to Total Is 60%
 1980 CSO-NC NON-SMOKER TABLE 17

Age	<u>l_x</u>	<u>1000q_x</u>
15	95229	1.11
16	95123	1.22
17	95007	1.29
18	94884	1.34
19	94757	1.39
20	94625	1.41
21	94492	1.42
22	94358	1.40
23	94226	1.39
24	94095	1.37
25	93966	1.35
26	93839	1.33
27	93714	1.33
28	93589	1.33
29	93465	1.35
30	93339	1.36
31	93212	1.39
32	93082	1.42
33	92950	1.47
34	92813	1.53
35	92671	1.60
36	92523	1.68
37	92368	1.80
38	92202	1.91
39	92026	2.06
40	91836	2.21
41	91633	2.38
42	91415	2.57
43	91180	2.76
44	90928	2.96
45	90659	3.19
46	90370	3.43
47	90060	3.69
48	89728	3.98
49	89371	4.28
50	88988	4.62
51	88577	5.00

Age	l_x	$1000q_x$	Age	l_x	$1000q_x$
52	88134	5.46	28	1455427	2.08
53	87653	5.96	29	1452400	2.10
54	87131	6.52	30	1449350	2.11
55	86563	7.14	31	1446292	2.14
56	85945	7.80	32	1443197	2.17
57	85275	8.51	33	1440065	2.22
58	84549	9.24	34	1436868	2.28
59	83768	10.05	35	1433592	2.35
60	82926	10.97	36	1430223	2.43
61	82016	12.01	37	1426748	2.55
62	81031	13.21	38	1423110	2.66
63	79961	14.62	39	1419325	2.81
64	78792	16.24	40	1415337	2.96
65	77512	18.01	41	1411148	3.13
66	76116	19.91	42	1406731	3.34
67	74601	21.94	43	1402033	3.59
68	72964	24.05	44	1397000	3.85
69	71209	26.35	45	1391622	4.15
70	69333	28.95	46	1385847	4.46
71	67326	32.26	47	1379666	4.80
72	65154	35.42	48	1373044	5.17
73	62846	39.52	49	1365945	5.56
74	60362	44.17	50	1358350	6.01
75	57696	49.24	51	1350186	6.50
76	54855	54.70	52	1341410	7.10
77	51854	60.43	53	1331886	7.75
78	48720	66.46	54	1321564	8.48
79	45482	72.92	55	1310357	9.28
80	42165	80.06	56	1298197	10.14
81	38789	88.10	57	1285033	11.06
82	35372	97.27	58	1270821	12.01
83	31931	107.73	59	1255558	13.07
84	28491	119.23	60	1239148	14.26
85	25094	131.61	61	1221478	15.61
86	21791	144.68	62	1202411	17.17
87	18638	158.40	63	1181766	19.01
88	15686	172.60	64	1159301	21.11
89	12979	187.46	65	1134828	23.41
90	10546	*203.08	66	1108262	25.88
91	8404	*219.76	67	1079580	28.52
92	6557	*238.20	68	1048790	31.27
93	4995	*259.26	69	1015994	34.26
94	3700	*285.17	70	981186	37.64
95	2645	*322.03	71	944254	41.94
96	1793	*378.56	72	904652	46.05
97	1114	*476.70	73	862993	51.38
98	583	*657.10	74	818652	57.42
99	200	1000.00	75	771645	64.01
			76	722252	71.11
			77	670893	78.56
			78	618188	86.40
			79	564777	94.80
			80	511236	104.08
			81	458027	114.53
			82	405569	126.45
			83	354285	140.05
			84	304667	155.00
			85	257444	171.09
			86	213398	188.08
			87	173262	205.92
			88	137584	224.38
			89	106713	243.70
			90	80707	264.00
			91	59400	285.69
			92	42430	309.66
			93	29291	337.04

1980 CET-NC NON-SMOKER TABLE 18

Age	l_x	$1000q_x$	Age	l_x	$1000q_x$
15	1495453	1.86	81	458027	114.53
16	1492671	1.97	82	405569	126.45
17	1489730	2.04	83	354285	140.05
18	1486691	2.09	84	304667	155.00
19	1483584	2.14	85	257444	171.09
20	1480409	2.16	86	213398	188.08
21	1477211	2.17	87	173262	205.92
22	1474005	2.15	88	137584	224.38
23	1470836	2.14	89	106713	243.70
24	1467688	2.12	90	80707	264.00
25	1464577	2.10	91	59400	285.69
26	1461501	2.08	92	42430	309.66
27	1458461	2.08	93	29291	337.04

Age	1_x	$1000q_x$
94	19419	370.72
95	12220	418.64
96	7104	492.13
97	3608	619.71
98	1372	854.23
99	200	1000.00

Age nearest birthday CSO: Sum $qx=$ 3086.52 Sum $1x=$ 5788547

* Adjusted; see text CET: Sum $qx=$ 7672.32 Sum $1x=$ 85940135

1980 CSO-ND NON-SMOKER TABLE &

1980 CET-ND NON-SMOKER TABLE #

Pivotal Age Is 45 *** Ratio of Male 1_x to Total Is 50%

1980 CSO-ND NON-SMOKER TABLE 19

Age	1_x	$1000q_x$
15	87164	1.07
16	87071	1.16
17	86970	1.23
18	86863	1.27
19	86753	1.32
20	86638	1.35
21	86521	1.34
22	86405	1.34
23	86289	1.33
24	86174	1.33
25	86059	1.30
26	85947	1.30
27	85835	1.29
28	85724	1.31
29	85612	1.33
30	85498	1.34
31	85383	1.37
32	85266	1.40
33	85147	1.45
34	85024	1.51
35	84896	1.58
36	84762	1.67
37	84620	1.77
38	84470	1.90
39	84310	2.03
40	84139	2.19
41	83955	2.36
42	83757	2.55
43	83543	2.73
44	83315	2.93
45	83071	3.16
46	82808	3.39
47	82527	3.65
48	82226	3.92
49	81904	4.22
50	81558	4.55
51	81187	4.92
52	80788	5.36
53	80355	5.85
54	79885	6.38
55	79375	6.97
56	78822	7.60
57	78223	8.26
58	77577	8.95
59	76883	9.70
60	76137	10.55
61	75334	11.53
62	74465	12.66
63	73522	14.01

Age	1_x	$1000q_x$
64	72492	15.56
65	71364	17.24
66	70134	19.07
67	68797	20.98
68	67354	22.99
69	65806	25.15
70	64151	27.60
71	62380	30.69
72	60466	33.75
73	58425	37.67
74	56224	42.16
75	53854	47.06
76	51320	52.38
77	48632	57.96
78	45813	63.84
79	42888	70.16
80	39879	77.18
81	36801	85.11
82	33669	94.17
83	30498	104.54
84	27310	115.93
85	24144	128.27
86	21047	141.31
87	18073	155.09
88	15270	169.35
89	12684	184.40
90	10345	*200.23
91	8274	*217.23
92	6477	*235.91
93	4949	*257.43
94	3675	*283.81
95	2632	*320.74
96	1788	*377.93
97	1112	*476.61
98	582	*656.44
99	200	1000.00

1980 CET-ND NON-SMOKER TABLE 20

Age	1_x	$1000q_x$
15	1321831	1.82
16	1319425	1.91
17	1316905	1.98
18	1314298	2.02
19	1311643	2.07
20	1308928	2.10
21	1306179	2.09
22	1303449	2.09
23	1300725	2.08
24	1298019	2.08
25	1295319	2.05
26	1292664	2.05
27	1290014	2.04
28	1287382	2.06
29	1284730	2.08
30	1282058	2.09
31	1279378	2.12
32	1276666	2.15
33	1273921	2.20
34	1271118	2.26
35	1268245	2.33
36	1265290	2.42
37	1262228	2.52
38	1259047	2.65
39	1255711	2.78
40	1252220	2.94
41	1248538	3.11
42	1244655	3.32

Age	1_x	$1000q_x$	Age	1_x	$1000q_x$
43	1240523	3.55	16	80362	1.10
44	1236119	3.81	17	80274	1.17
45	1231409	4.11	18	80180	1.21
46	1226348	4.41	19	80083	1.25
47	1220940	4.75	20	79983	1.29
48	1215141	5.10	21	79880	1.28
49	1208944	5.49	22	79778	1.28
50	1202307	5.92	23	79676	1.28
51	1195189	6.40	24	79574	1.28
52	1187540	6.97	25	79472	1.26
53	1179263	7.61	26	79372	1.26
54	1170289	8.29	27	79272	1.27
55	1160587	9.06	28	79171	1.28
56	1150072	9.88	29	79070	1.30
57	1138709	10.74	30	78967	1.31
58	1126479	11.64	31	78864	1.36
59	1113367	12.61	32	78757	1.39
60	1099327	13.72	33	78648	1.42
61	1084244	14.99	34	78536	1.49
62	1067991	16.46	35	78419	1.56
63	1050412	18.21	36	78297	1.65
64	1031284	20.23	37	78168	1.76
65	1010421	22.41	38	78030	1.87
66	987777	24.79	39	77884	2.02
67	963290	27.27	40	77727	2.16
68	937021	29.89	41	77559	2.34
69	909013	32.70	42	77378	2.53
70	879288	35.88	43	77182	2.72
71	847739	39.90	44	76972	2.91
72	813914	43.88	45	76748	3.13
73	778199	48.97	46	76508	3.35
74	740091	54.81	47	76252	3.59
75	699527	61.18	48	75978	3.87
76	656730	68.09	49	75684	4.15
77	612013	75.35	50	75370	4.48
78	565898	82.99	51	75032	4.84
79	518934	91.21	52	74669	5.25
80	471602	100.33	53	74277	5.73
81	424286	110.64	54	73851	6.23
82	377343	122.42	55	73391	6.81
83	331149	135.90	56	72891	7.39
84	286146	150.71	57	72352	8.02
85	243021	166.75	58	71772	8.65
86	202497	183.70	59	71151	9.35
87	165298	201.62	60	70486	10.14
88	131971	220.16	61	69771	11.04
89	102916	239.72	62	69001	12.12
90	78245	260.30	63	68165	13.40
91	57878	282.40	64	67252	14.89
92	41533	306.68	65	66251	16.49
93	28796	334.66	66	65159	18.23
94	19159	368.95	67	63971	20.04
95	12090	416.96	68	62689	21.93
96	7049	491.31	69	61314	23.96
97	3586	619.59	70	59845	26.28
98	1364	853.37	71	58272	29.16
99	200	1000.00	72	56573	32.11
			73	54756	35.90
			74	52790	40.21
			75	50667	44.98
			76	48388	50.15
			77	45961	55.59
			78	43406	61.36
			79	40743	67.55
			80	37991	74.48
			81	35161	82.32

Age nearest birthday CSO: Sum $qx= 3023.29$ Sum $1x= 5330266$
 * Adjusted; see text CET: Sum $qx= 7572.85$ Sum $1x= 76433054$

1980 CSO-NE NON-SMOKER TABLE &
 1980 CET-NE NON-SMOKER TABLE #
 Pivotal Age Is 45 *** Ratio of Male 1_x to Total is 40%
 1980 CSO-NE NON-SMOKER TABLE 21

Age	1_x	$1000q_x$
15	80445	1.03

Age	<u>1_x</u>	<u>1000q_x</u>	Age	<u>1_x</u>	<u>1000q_x</u>
82	32267	91.29	58	1010426	11.25
83	29321	101.59	59	999059	12.16
84	26342	112.91	60	968910	13.18
85	23368	125.24	61	973903	14.35
86	20441	138.25	62	959927	15.76
87	17615	152.08	63	944799	17.42
88	14936	166.50	64	928341	19.36
89	12449	181.73	65	910368	21.44
90	10187	*197.78	66	890850	23.70
91	8172	*215.12	67	869737	26.05
92	6414	*234.03	68	847080	28.51
93	4913	*255.85	69	822930	31.15
94	3656	*282.58	70	797296	34.16
95	2623	*319.76	71	770060	37.91
96	1784	*377.41	72	740867	41.74
97	1111	*476.21	73	709943	46.67
98	582	*656.10	74	676810	52.27
99	200	1000.00	75	641433	58.47
			76	603928	65.20
			77	564552	72.27
			78	523752	79.77
			79	481972	87.72
			80	439645	96.82
			81	397079	107.02
			82	354584	118.68
			83	312502	132.07
			84	271230	146.78
			85	231419	162.81
			86	193742	179.73
			87	158921	197.70
			88	127502	216.45
			89	99904	236.25
			90	76302	257.11
			91	56684	379.66
			92	40832	304.24
			93	28409	332.61
			94	18960	367.35
			95	11995	415.69
			96	7009	490.63
			97	3570	619.70
			98	1360	852.93
			99	200	1000.00

1980 CET-NE NON-SMOKER TABLE 22

Age	<u>1_x</u>	<u>1000q_x</u>
15	1182241	1.78
16	1180137	1.85
17	1177954	1.92
18	1175692	1.96
19	1173388	2.00
20	1171041	2.04
21	1168652	2.03
22	1166280	2.03
23	1163912	2.03
24	1161549	2.03
25	1159191	2.01
26	1156861	2.01
27	1154536	2.02
28	1152204	2.03
29	1149865	2.05
30	1147508	2.06
31	1145144	2.11
32	1142728	2.14
33	1140283	2.17
34	1137809	2.24
35	1135260	2.31
36	1132638	2.40
37	1129920	2.51
38	1127084	2.62
39	1124131	2.77
40	1121017	2.91
41	1117755	3.09
42	1114301	3.29
43	1110635	3.54
44	1106703	3.78
45	1102520	4.07
46	1098033	4.36
47	1093246	4.67
48	1088141	5.03
49	1082668	5.40
50	1076822	5.82
51	1070555	6.29
52	1063821	6.83
53	1056555	7.45
54	1048684	8.10
55	1040190	8.85
56	1030984	9.61
57	1021076	10.43

Age nearest birthday CSO: Sum qx= 2963.79 Sum 1x= 4948899
 * Adjusted; see text CET: Sum qx= 7480.85 Sum 1x= 68786506

1980 CSO-NF NON-SMOKER TABLE &
 1980 CET-NF NON-SMOKER TABLE #
 Pivotal Age Is 45 *** Ratio of Male 1_x to Total is 20%
 1980 CSO-NF NON-SMOKER TABLE 23

Age	<u>1_x</u>	<u>1000q_x</u>
15	69713	0.94
16	69647	0.99
17	69578	1.04
18	69506	1.07
19	69432	1.12
20	69354	1.15
21	69274	1.14
22	69195	1.16
23	69115	1.16
24	69035	1.18
25	68954	1.17
26	68873	1.19
27	68791	1.20

Age	l_x	$1000q_x$
28	68708	1.23
29	68623	1.25
30	68537	1.28
31	68449	1.32
32	68359	1.35
33	68267	1.38
34	68173	1.45
35	68074	1.51
36	67971	1.61
37	67862	1.71
38	67746	1.84
39	67621	1.97
40	67488	2.12
41	67345	2.30
42	67190	2.49
43	67023	2.67
44	66844	2.85
45	66653	3.06
46	66449	3.27
47	66232	3.50
48	66000	3.76
49	65752	4.02
50	65488	4.33
51	65204	4.67
52	64899	5.05
53	64571	5.49
54	64217	5.96
55	63834	6.46
56	63422	6.99
57	62979	7.54
58	62504	8.06
59	62000	8.65
60	61464	9.32
61	60891	10.11
62	60275	11.04
63	59610	12.20
64	58883	13.55
65	58085	15.01
66	57213	16.58
67	56264	18.21
68	55239	19.86
69	54142	21.65
70	52970	23.69
71	51715	26.19
72	50361	28.98
73	48902	32.47
74	47314	36.50
75	45587	41.02
76	43717	45.94
77	41709	51.16
78	39575	56.73
79	37330	62.78
80	34986	69.53
81	32553	77.24
82	30039	86.13
83	27452	96.33
84	24808	107.59
85	22139	119.91
86	19484	132.99
87	16893	146.95
88	14411	161.59
89	12082	177.21
90	9941	193.74
91	8015	211.49
92	6320	*231.05
93	4860	*253.44

Age	l_x	$1000q_x$
94	3628	*280.66
95	2610	*318.37
96	1779	*376.21
97	1110	*475.72
98	582	*656.09
99	200	1000.00

1980 CET-NF NON-SMOKER TABLE 24

Age	l_x	$1000q_x$
15	974349	1.69
16	972702	1.74
17	971009	1.79
18	969271	1.82
19	967507	1.87
20	965698	1.90
21	963863	1.89
22	962041	1.91
23	960204	1.91
24	958370	1.93
25	956520	1.92
26	254683	1.94
27	952831	1.95
28	950973	1.98
29	949090	2.00
30	947192	2.03
31	945269	2.07
32	943312	2.10
33	941331	2.13
34	939326	2.20
35	937259	2.26
36	935141	2.36
37	932934	2.46
38	930639	2.59
39	928229	2.72
40	925704	2.87
41	923047	3.05
42	920232	3.24
43	917250	3.47
44	914067	3.71
45	910676	3.98
46	907052	4.25
47	903197	4.55
48	899087	4.89
49	894690	5.23
50	890011	5.63
51	885000	6.07
52	879628	6.57
53	873849	7.14
54	867610	7.75
55	860886	8.40
56	853655	9.09
57	845895	9.80
58	837605	10.48
59	828827	11.25
60	819503	12.12
61	809571	13.14
62	798933	14.35
63	787468	15.86
64	774979	17.62
65	761324	19.51
66	746471	21.55
67	730385	23.67
68	713097	25.82
69	694685	28.15

Age	<u>1_x</u>	<u>1000q_x</u>
70	675130	30.80
71	654336	34.05
72	632056	37.67
73	608246	42.21
74	582572	47.45
75	554929	53.33
76	525335	59.72
77	493962	66.51
78	461109	73.75
79	427102	81.61
80	392246	90.39
81	356791	100.41
82	320966	111.97
83	285027	125.23
84	249333	139.87
85	214459	155.88
86	181029	172.89
87	149731	191.04
88	121126	210.07
89	95681	230.37
90	73639	251.86
91	55092	274.94
92	39945	300.37
93	27947	329.47
94	18739	364.86
95	11902	413.88
96	6976	489.07
97	3564	618.44
98	1360	852.92
99	200	1000.00

Age nearest birthday CSO: Sum q_x= 3259.34 Sum 1_x= 4340089
 * Adjusted; see text CET: Sum q_x= 7315.40 Sum 1_x= 57404657

1980 CET-NG Nonsmoker Table 25

Age	<u>Non-Smoker</u>	<u>Smoker</u>
15	1.61	1.71
16	1.65	1.76
17	1.68	1.81
18	1.71	1.86
19	1.74	1.89
20	1.76	1.92
21	1.78	1.94
22	1.79	1.97
23	1.81	2.00
24	1.83	2.03
25	1.85	2.06
26	1.88	2.11
27	1.90	2.15
28	1.93	2.20
29	1.97	2.26
30	2.00	2.33
31	2.04	2.39
32	2.08	2.46
33	2.13	2.55
34	2.19	2.65
35	2.26	2.76
36	2.36	2.93
37	2.48	3.13
38	2.61	3.39
39	2.75	3.72
40	2.92	4.11
41	3.10	4.52
42	3.29	4.94

Age	<u>Non-Smoker</u>	<u>Smoker</u>
43	3.52	5.36
44	3.76	5.77
45	4.02	6.21
46	4.29	6.67
47	4.59	7.14
48	4.90	7.64
49	5.25	8.20
50	5.64	8.80
51	6.07	9.44
52	6.57	10.17
53	7.11	10.97
54	7.67	11.79
55	8.27	12.64
56	8.87	13.47
57	9.45	14.25
58	10.04	15.02
59	10.70	15.83
60	11.48	16.81
61	12.44	18.03
62	13.64	19.60
63	15.11	21.52
64	16.76	23.65
65	18.54	25.90
66	20.38	28.18
67	22.27	30.39
68	24.22	32.63
69	26.39	35.06
70	28.94	37.93
71	32.05	41.57
72	35.85	46.03
73	40.42	51.34
74	45.67	57.38
75	51.53	63.99
76	57.88	71.01
77	64.68	78.31
78	72.03	86.09
79	80.18	94.52
80	89.45	103.97
81	100.11	114.70
82	112.40	126.89
83	126.26	140.97
84	141.53	156.23
85	158.05	172.45
86	175.71	189.48
87	194.47	207.16
88	214.34	225.58
89	235.50	244.73
90	258.09	265.95
91	282.65	288.81
92	310.09	314.16
93	342.36	343.93
94	383.80	383.80
95	443.33	443.33
96	538.04	538.04
97	698.41	698.41
98	967.15	967.15
99	1000.00	1000.00

1980 CET-SG Smoker Table 26

Age	<u>Non-Smoker</u>	<u>Smoker</u>
15	1.61	1.71
16	1.65	1.76

<u>Age</u>	<u>Non-Smoker</u>	<u>Smoker</u>	<u>Age</u>	<u>Non-Smoker</u>	<u>Smoker</u>
17	1.68	1.81	82	112.40	126.89
18	1.71	1.86	83	126.26	140.97
19	1.74	1.89	84	141.53	156.23
20	1.76	1.92	85	158.05	172.45
21	1.78	1.94	86	175.71	189.48
22	1.79	1.97	87	194.47	207.16
23	1.81	2.00	88	214.34	225.58
24	1.83	2.03	89	235.50	244.73
25	1.85	2.06	90	258.09	265.95
26	1.88	2.11	91	282.65	288.81
27	1.90	2.15	92	310.09	314.16
28	1.93	2.20	93	342.36	343.93
29	1.97	2.26	94	383.80	383.80
30	2.00	2.33	95	443.33	443.33
31	2.04	2.39	96	538.04	538.04
32	2.08	2.46	97	698.41	698.41
33	2.13	2.55	98	967.15	967.15
34	2.19	2.65	99	1000.00	1000.00
35	2.26	2.76			
36	2.36	2.93			
37	2.48	3.13			
38	2.61	3.39			
39	2.75	3.72			
40	2.92	4.11			
41	3.10	4.52			
42	3.29	4.94			
43	3.52	5.36			
44	3.76	5.77			
45	4.02	6.21			
46	4.29	6.67			
47	4.59	7.14			
48	4.90	7.64			
49	5.25	8.20			
50	5.64	8.80			
51	6.07	9.44			
52	6.57	10.17			
53	7.11	10.97			
54	7.67	11.79			
55	8.27	12.64			
56	8.87	13.47			
57	9.45	14.25			
58	10.04	15.02			
59	10.70	15.83			
60	11.48	16.81			
61	12.44	18.03			
62	13.64	19.60			
63	15.11	21.52			
64	16.76	23.65			
65	18.54	25.90			
66	20.38	28.18			
67	22.27	30.39			
68	24.22	32.63			
69	26.39	35.06			
70	28.94	37.93			
71	32.05	41.57			
72	35.85	46.03			
73	40.42	51.34			
74	45.67	57.38			
75	51.53	63.99			
76	57.88	71.01			
77	64.68	78.31			
78	72.03	86.09			
79	80.18	94.52			
80	89.45	103.97			
81	100.11	114.70			

1980 CSO-NG Nonsmoker Table 27

<u>Age</u>	<u>Non-Smoker</u>	<u>Smoker</u>
15	0.84	0.94
16	0.88	0.99
17	0.92	1.04
18	0.95	1.09
19	0.98	1.13
20	1.01	1.16
21	1.02	1.18
22	1.04	1.18
23	1.05	1.23
24	1.08	1.27
25	1.09	1.29
26	1.12	1.34
27	1.14	1.38
28	1.17	1.42
29	1.20	1.48
30	1.24	1.55
31	1.27	1.61
32	1.31	1.68
33	1.35	1.75
34	1.42	1.86
35	1.47	1.94
36	1.56	2.09
37	1.67	2.28
38	1.79	2.49
39	1.93	2.73
40	2.08	3.00
41	2.26	3.33
42	2.44	3.64
43	2.62	3.96
44	2.80	4.28
45	2.99	4.61
46	3.19	4.95
47	3.41	5.31
48	3.65	5.68
49	3.90	6.08
50	4.19	6.54
51	4.50	7.00
52	4.85	7.52
53	5.26	8.13
54	5.68	8.75
55	6.13	9.40

<u>Age</u>	<u>Non-Smoker</u>	<u>Smoker</u>	<u>Age</u>	<u>Non-Smoker</u>	<u>Smoker</u>
56	6.59	10.05	30	1.24	1.55
57	7.05	10.67	31	1.27	1.61
58	7.49	11.25	32	1.31	1.68
59	7.96	11.85	33	1.35	1.75
60	8.51	12.51	34	1.42	1.86
61	9.16	13.36	35	1.47	1.94
62	9.98	14.39	36	1.56	2.09
63	11.01	15.78	37	1.67	2.28
64	12.23	17.33	38	1.79	2.49
65	13.55	19.07	39	1.93	2.73
66	14.97	20.79	40	2.08	3.00
67	16.41	22.58	41	2.26	3.33
68	17.86	24.20	42	2.44	3.64
69	19.41	26.02	43	2.62	3.96
70	21.20	27.95	44	2.80	4.28
71	23.34	30.45	45	2.99	4.61
72	25.99	33.55	46	3.19	4.95
73	29.22	37.33	47	3.41	5.31
74	33.02	41.74	48	3.65	5.68
75	37.32	46.64	49	3.90	6.08
76	42.04	51.92	50	4.19	6.54
77	47.11	57.46	51	4.50	7.00
78	52.53	63.23	52	4.85	7.52
79	58.45	69.41	53	5.26	8.13
80	65.12	76.26	54	5.68	8.75
81	72.76	84.00	55	6.13	9.40
82	81.59	92.84	56	6.59	10.05
83	91.76	102.87	57	7.05	10.67
84	103.03	114.65	58	7.49	11.25
85	115.38	126.42	59	7.96	11.85
86	128.58	139.79	60	8.51	12.51
87	142.71	152.67	61	9.16	13.36
88	157.61	167.23	62	9.98	14.39
89	173.51	181.07	63	11.01	15.78
90	190.39	197.01	64	12.23	17.33
91	208.58	214.00	65	13.55	19.07
92	228.60	232.54	66	14.97	20.79
93	251.40	253.55	67	16.41	22.58
94	279.31	279.31	68	17.86	24.20
95	317.32	317.32	69	19.41	26.02
96	375.74	375.74	70	21.20	27.95
97	474.97	474.97	71	23.34	30.45
98	655.85	655.85	72	25.99	33.55
99	1000.00	1000.00	73	29.22	37.33
			74	33.02	41.74
			75	37.32	46.64
			76	42.04	51.92
			77	47.11	57.46
			78	52.53	63.23
			79	58.45	69.41
			80	65.12	76.26
			81	72.76	84.00
			82	81.59	92.84
			83	91.76	102.87
			84	103.03	114.65
			85	115.38	126.42
			86	128.58	139.79
			87	142.71	152.67
			88	157.61	167.23
			89	173.51	181.07
			90	190.39	197.01
			91	208.58	214.00
			92	228.60	232.54
			93	251.40	253.55
			94	279.31	279.31

1980 CSO-SG Smoker Table 28

<u>Age</u>	<u>Non-Smoker</u>	<u>Smoker</u>
15	0.84	0.94
16	0.88	0.99
17	0.92	1.04
18	0.95	1.09
19	0.98	1.13
20	1.01	1.16
21	1.02	1.18
22	1.04	1.18
23	1.05	1.23
24	1.08	1.27
25	1.09	1.29
26	1.12	1.34
27	1.14	1.38
28	1.17	1.42
29	1.20	1.48

<u>Age</u>	<u>Non-Smoker</u>	<u>Smoker</u>
95	317.32	317.32
96	375.74	375.74
97	474.97	474.97
98	655.85	655.85
99	1000.00	1000.00

SUBCHAPTER 23. MINIMUM STANDARDS FOR MEDICARE SUPPLEMENT COVERAGE

11:4-23.1 Purpose

This subchapter provides for the reasonable standardization of coverage and the simplification of terms and benefits of Medicare supplement policies; facilitates comparison of such policies in order to increase public understanding; eliminates provisions which may be misleading or confusing in connection with the purchase of such policies or with the settlement of claims; and provides for full disclosure in the sale of health care service benefits and insurance to persons eligible for Medicare.

Amended by R.1991 d.345, effective July 1, 1991.
See: 23 N.J.R. 1264(a), 23 N.J.R. 2014(a).

Deleted “, contracts and certificates issued on a group basis”, “public understanding and”, “and contracts”, “contained in such policies”, “and service corporation coverages”; added “in order to increase public understanding”, “of such policies”, “care service benefits and”.

Amended by R.1993 d.26, effective January 4, 1993.
See: 24 N.J.R. 12(a), 25 N.J.R. 141(a).

Deleted “by reason of age.”

11:4-23.2 Applicability and scope

(a) This subchapter shall apply to:

1. All Medicare supplement policies, as defined by this subchapter, delivered or issued for delivery in this State;
2. All certificates, as defined by this subchapter, issued under group Medicare supplement policies, which certificates have been delivered or issued for delivery in this State.

(b) This subchapter shall apply to all carriers, as defined in this subchapter, delivering or issuing for delivery Medicare supplement policies in this State, or delivering or issuing for delivery certificates in this State, which certificates were issued under a group Medicare supplement policy.

Amended by R.1991 d.345, effective July 1, 1991.
See: 23 N.J.R. 1264(a), 23 N.J.R. 2014(a).

Added “in N.J.A.C. 11:4-23.8 and 23.9” in (a).

Deleted “group”, “and individual and group subscriber Medicare Supplement contracts”; added “as defined by this subchapter”; changed “the effective date” to “July 1, 1991” in (a)1.

Deleted “Supplement”, “or subscriber contracts”, “policies or contracts”; added “as defined by this subchapter”, “supplement”, “certificates”, “on or after July 1, 1991” in (a)2.

Deleted (b).

Amended by R.1993 d.26, effective January 4, 1993.

See: 24 N.J.R. 12(a), 25 N.J.R. 141(a).

Certificates delivered or issued for delivery in New Jersey added.

11:4-23.3 Definitions

The following words and terms, when used in this subchapter, shall have the following meanings unless the context clearly indicates otherwise.

“Aggregate loss ratio” means the ratio of the accumulated value of past benefits (from the original effective date of the form to the date as of which the ratio is determined) and the present value of future benefits to the accumulated value of past premiums (from the original effective date of the form to the date as of which the ratio is determined) and the present value of future premiums. Benefits shall not be increased nor premiums reduced by actual or anticipated dividends, and interest shall be included in the accumulated and present values on the same basis as in the present values of the anticipated loss ratio.

“Anticipated loss ratio” means the ratio of the present value of the expected benefits, not including dividends, to the present value of the expected premiums, not reduced by dividends, over the entire period for which rates are computed to provide coverage. For purposes of this ratio, the present values must incorporate realistic rates of interest which are determined before Federal taxes but after investment expenses. Benefits and premiums shall be discounted from the year of payment, with reasonable assumptions as to time of payment within the year.

“Applicant” means:

1. In the case of a group policy, the proposed certificate holder;
2. In the case of an individual policy, the person who seeks to contract for coverage.

“Bankruptcy” means when a Medicare + Choice organization that is not a carrier has filed, or has had filed against it, a petition for declaration of bankruptcy pursuant to the United States Bankruptcy Code, 11 U.S.C. §§ 101 et seq. and has ceased doing business in the State.

“Carrier” means any person who contracts to provide health services, reimburse the cost of health services in whole or in part, or provide an indemnity in the event that health services are used, in return for a prepaid or postpaid premium or other consideration, including insurance companies, fraternal benefit societies, hospital, medical and health service corporations, health maintenance organizations and such other similar entities.

“Certificate” means any certificate or other document which sets forth or summarizes the essential features of the coverage issued under a group policy, which certificate or

other document has been delivered or issued for delivery in this State.

“Certificate form” means the form on which a certificate is delivered or issued for delivery by a carrier.

“Coverage” means:

1. Any arrangement whereby a carrier agrees to indemnify or reimburse an individual or group member for some portion or part of the health related costs incurred by that individual or member, subject to the terms of the written agreement and law; and

2. Any arrangement whereby a carrier agrees to provide direct or indirect health care services to the individual or group member, subject to the terms of the written agreement and law.

“Employee welfare benefit plan” means a plan, fund or program of employee benefits as defined in 29 U.S.C. § 1002 (Employee Retirement Income Security Act).

“Insolvency” or “insolvent” means:

1. That a carrier:

i. Is unable to pay its obligations when they are due; or

ii. Its admitted assets do not exceed its liabilities plus the greater of:

(1) Any capital and surplus required by law for its organization; or

(2) The total par or stated value of its authorized and issued capital stock.

2. For purposes of the definition of “insolvency” or “insolvent,” “liabilities” shall include, but not be limited to, reserves required by law or by regulations of the New Jersey Department of Banking and Insurance (Department) or specific requirements imposed by the Commissioner of the Department upon a carrier at the time of admission or subsequent thereto.

“Insured” means any applicant provided coverage by a carrier.

“Medicare + Choice plan” means a plan of coverage for health benefits under Medicare Part C as defined in Section 1859 of Title IV, Subtitle A, Chapter 1 of P.L. 105-33 (42 U.S.C. § 1395w-28), and includes:

1. Coordinated care plans which provide health care services, including, but not limited to, health maintenance organization plans (with or without a point-of-service option), plans offered by provider-sponsored organizations and preferred provider organization plans;

2. Medical savings account plans coupled with a contribution into a Medicare + Choice medical savings account; and

3. Medicare + Choice private fee-for-service plans.

“Medicare supplement policy” means a group or individual policy which is advertised, marketed or designed primarily as, or is otherwise held out to be a supplement to reimbursements under Medicare, other than a policy issued pursuant to a contract under Section 1876 of the Federal Social Security Act (42 U.S.C. § 1395 et seq.), or a contract or policy issued under a demonstration project specified in 42 U.S.C. § 1395ss(g)(1). This term does not include a policy or certificate of one or more employers or labor organizations, or of the trustees of a fund established by one or more employers or labor organizations, or combination thereof, for employees or former employees, or a combination thereof, or for members or former members, or combination thereof, of the labor organization.

“Policy” shall mean any policy, contract, certificate or other document which sets forth or summarizes the essential features of the coverage issued to an individual or group by a carrier, for the purpose of providing Medicare supplement coverage, including any such policy issued pursuant to a conversion privilege to an individual 65 years of age or older, except as otherwise provided in this subchapter or Federal law.

“Policy form” means the form on which a policy is delivered or issued for delivery by a carrier.

“Secretary” means the Secretary of the United States Department of Health and Human Services.

Amended by R.1991 d.345, effective July 1, 1991.

See: 23 N.J.R. 1264(a), 23 N.J.R. 2014(a).

Deleted “Medicare supplement” in “applicant” 1.

Deleted “Medicare supplement subscriber contract”, “hospital or medical service benefits.”; added “policy”, “coverage” in “applicant” 2.

Deleted “applicant” 3.

Deleted “.1. Any”, “Medicare Supplement”, “policy”; added “or other document which sets forth or summarizes the essential features of the coverage”, “certificate or other document” in “Certificate” 1.

Deleted “Certificate” 2.

Added “Coverage”.

Deleted “.1.A”, “accident and sickness insurance”, “.i.A”; deleted 1ii and iii in “Medicare supplement policy”.

Deleted “Medicare supplement policy” 2.

Added “Policy”.

Amended by R.1993 d.26, effective January 4, 1993.

See: 24 N.J.R. 12(a), 25 N.J.R. 141(a).

Added definitions for aggregate loss ratio, anticipated loss ratio, carrier, certificate form and policy form; deleted definition of, and references to, insurer.

Amended by R.1996 d.295, effective July 1, 1996.

See: 28 N.J.R. 1647(a), 28 N.J.R. 3462(a).

Amended “Medicare supplement policy”.

Emergency amendment R.1999 d.38, effective December 28, 1998 (to expire February 26, 1999).

See: 31 N.J.R. 181(a).

Inserted “Bankruptcy”, “Employer welfare benefit plan”, “Insolvency” or “insolvent”, “Medicare + Choice plan” and “Secretary”.

11:4-23.4 Policy definitions and terms

(a) No policy or certificate may be advertised, solicited or issued for delivery in this State as a Medicare supplement policy or certificate unless such policy or certificate contains definitions or terms which conform to the requirements of this section.

1. "Accident," "accidental injury," or "accidental means" shall be defined to employ "result" language and shall not include words which establish an accidental means test or use words such as "external, violent, visible wounds" or similar words of description or characterization.

i. "Injury" shall not be defined more restrictively than as a bodily injury sustained by the covered person as a result of an accident, which injury is the direct cause of the loss, independent of disease, bodily infirmity or any other cause, and which occurs while coverage is in force.

ii. The definition may provide that injuries shall not include injuries for which benefits are provided under any workers' compensation, employer's liability or similar law, mandatory motor vehicle no-fault plan, unless prohibited by law.

2. "Benefit period" or "Medicare benefit period" shall not be defined more restrictively than as defined in the Medicare program.

3. "Convalescent nursing home," "extended care facility," or "skilled nursing facility" shall not be defined more restrictively than as defined by the Medicare program.

4. "Health care expenses" means expenses of health maintenance organizations which expenses are associated with the delivery of health care services and are analogous to incurred losses of insurers. Expenses shall not include the following costs:

- i. Home office and overhead costs;
- ii. Advertising costs;
- iii. Commissions and other acquisition costs;
- iv. Taxes;
- v. Capital costs;
- vi. Administrative costs; and
- vii. Claims processing costs.

5. "Hospital" may be defined in relation to its status, facilities, and available services or to reflect accreditation by the Joint Commission on Accreditation of Hospitals, but not more restrictively than as defined by the Medicare program.

1. For policies issued prior to January 4, 1993, expected claims in relation to premiums shall meet:

i. The originally filed loss ratio when combined with the actual experience since inception;

ii. The appropriate loss ratio requirement from (a)1 and 2 above when combined with actual experience beginning with July 1, 1996 to date; and

iii. The appropriate loss ratio requirement from (a)1 and 2 above over the entire future period for which the rates are computed to provide coverage.

2. In meeting the tests in (d)1i, ii and iii above and for purposes of attaining credibility, an insurer may combine experience under policy forms which provide substantially similar coverage subject to the approval of the Commissioner. Once a combined form is adopted, the insurer may not separate the experience except with the approval of the Commissioner. The Commissioner shall permit pooling in plans having less than 10,000 employee/policyholder months on an annual basis.

3. Prior to the effective date of enhancements in Medicare benefits, carriers shall:

i. Submit for filing appropriate premium adjustments required to produce loss ratios commensurate with the loss ratios anticipated for the current premium for the applicable policies or certificates, with accompanying documentation sufficient to justify the adjustment, in the opinion of the Commissioner; and

ii. Make premium adjustments to produce an expected loss ratio under the policy or certificate to conform to minimum loss ratio standards of (a) above, and which are expected to result in a loss ratio at least as great as that originally anticipated in the rates used to produce current premiums by the carrier for the policies and certificates. No premium adjustment which would modify the loss ratio experience under the policy, other than the adjustments described herein, shall be made at any time other than upon the policy renewal or anniversary date.

4. Every carrier shall submit for filing by the Commissioner a rate reduction whenever the expected aggregate loss ratio reported for a policy or certificate is less than the anticipated loss ratio for that policy or certificate, and the requirements of (c) above may not be met.

5. When a rate adjustment is requested pursuant to a change in the policy or certificate necessary to eliminate benefit duplication with Medicare, the submission for a rate change shall include any riders, endorsements, policy and certificate forms needed to accomplish the Medicare supplement coverage modification necessary to eliminate benefit duplications with Medicare. The forms shall result in a clear description of the Medicare supplement benefits provided by the policy.

6. If a carrier does not make premium adjustments acceptable to the Commissioner, the Commissioner may order premium adjustments, refunds or premium credits deemed necessary to achieve the appropriate loss ratio.

(e) Carriers shall submit for filing with the Commissioner annually on or before May 31 reports in accordance with the applicable reporting form contained in the Appendix to subchapters 16 and 23 of this chapter, Exhibit F, completed for each type in a standard Medicare supplement benefit plan.

1. If, on the basis of the experience as reported, the benchmark ratio since inception (ratio 1) exceeds the adjusted experience ratio since inception (ratio 3), a refund or credit calculation shall be required.

i. The refund calculation shall be done on a State-wide basis for each type in a standard Medicare supplement benefit plan.

ii. For purposes of the refund or credit calculation, experience on policies issued within the reporting year shall be excluded.

iii. For purposes of this section, for policies or certificates issued prior to January 4, 1993, the carrier shall make the refund or credit calculation separately for all individual policies (including all group policies subject to an individual loss ratio standard when issued) combined and all other group policies combined for experience after May 31, 1996. The first report shall be due by May 31, 1998.

2. A refund or credit shall be made by carriers whenever the benchmark loss ratio exceeds the adjusted experience loss ratio, and the amount to be refunded or credited exceeds a de minimis level.

i. A refund or credit against premiums due shall be made no later than September 30 following the experience year upon which the refund or credit is based.

ii. The refunds and credits shall include interest accruing from the end of the calendar year to the date of the refund or credit at a rate specified by the Secretary of the United States Department of Health and Human Services, which in no event shall be less than the average rate of interest for 13-week Treasury notes.

(f) The Commissioner may conduct a public hearing, in his or her discretion, to gather information regarding a request by a carrier for an increase in a rate for a policy or certificate form, if the experience of the form for the previous reporting period is not in compliance with the applicable loss ratio standard of (a) above. The determination of compliance shall be made without consideration of any refund or credit for such reporting period. Public notices of the hearing shall be in accordance with the Administrative Procedures Act, N.J.S.A. 52:14B-1 et seq.

(g) For purposes of complying with (c) and (d) above, premiums and claims shall refer to premiums and claims for insured residents of this State under a specific policy form. However, if the experience is based on fewer than 1,000 life years of exposure for residents of this State, then the premiums and claims shall be a weighted average of the premiums and claims for this State and national experience, where the weighting factor applied to the State experience is the square root of the ratio of "a" to 1,000 ("a" being the number of the life years of exposure).

Amended by R.1991 d.345, effective July 1, 1991.

See: 23 N.J.R. 1264(a), 23 N.J.R. 2014(a).

Section recodified from 23.7.

Added "and policies issued as conversions from group policies" in (a)1.

Substituted old text with new text in (b).

Added (b)1, 2; (c); (d); (e).

Amended by R.1993 d.26, effective January 4, 1993.

See: 24 N.J.R. 12(a), 25 N.J.R. 141(a).

Rule on required disclosure provisions recodified to 23.14; rule on loss ratio standards recodified from 23.8; standards for refunds and credit added.

Amended by R.1996 d.295, effective July 1, 1996.

See: 28 N.J.R. 1647(a), 28 N.J.R. 3462(a).

11:4-23.12 Guaranteed issue for eligible persons

(a) Eligible persons are those individuals described in (c) below who apply to enroll under the policy not later than 63 days after the date of the termination of enrollment described in (c) below, and who submit evidence of the date of termination or disenrollment with the application for a Medicare supplement policy.

(b) With respect to eligible persons, a carrier shall not deny or condition the issuance or effectiveness of a Medicare supplement policy described in (d) below that is offered and is available for issuance to new enrollees by the carrier, shall not discriminate in the pricing of such a Medicare supplement policy because of health status, claims experience, receipt of health care, or medical condition, and shall not impose an exclusion of benefits based on a preexisting condition under such a Medicare supplement policy.

(c) An eligible person is an individual described in any of the following paragraphs:

1. The individual is enrolled under an employee welfare benefit plan that provides health benefits that supplement the benefits under Medicare, and the plan terminates, or the plan ceases to provide all such supplemental health benefits to the individual;

2. The individual is enrolled under an employee welfare benefit plan that is primary to Medicare and the plan terminates or the plan ceases to provide all health benefits to the individual because the individual leaves the plan;

3. The individual is enrolled with a Medicare + Choice organization under a Medicare + Choice plan under Part C of Medicare, and any of the following circumstances apply:

i. The organization's or plan's certification under Part C of Medicare has been terminated or the organization has terminated or otherwise discontinued providing the plan in the area in which the individual resides;

ii. The individual is no longer eligible to elect the plan because of a change in the individual's place of residence or other change in circumstances specified by the Secretary, but not including termination of the individual's enrollment on the basis described in Section 1851(g)(3)(B) of the Federal Social Security Act (42 U.S.C. § 1395w-21) (where the individual has not paid premiums on a timely basis or has engaged in disruptive behavior as specified in standards under Section 1856 (42 U.S.C. § 1395w-26)), or the plan is terminated for all individuals within a residence area;

iii. The individual demonstrates, in accordance with guidelines established by the Secretary, that:

(1) The organization offering the plan substantially violated a material provision of the organization's contract under Part C of Medicare in relation to the individual, including the failure to provide an enrollee on a timely basis medically necessary care for which benefits are available under the plan or the failure to provide such covered care in accordance with applicable quality standards; or

(2) The organization, or agent or other entity acting on the organization's behalf, materially misrepresented the plan's provisions in marketing the plan to the individual; or

iv. The individual meets such other exceptional conditions as the Secretary may provide;

4. The individual is enrolled with any of the following, and the enrollment ceases under the same circumstances that would permit discontinuance of an individual's election of coverage under (c)3 above:

i. An eligible organization under a contract under Section 1876 (42 U.S.C. § 1395mm) (Medicare risk or cost);

ii. A similar organization operating under demonstration project authority, effective for periods before April 1, 1999;

iii. An organization under an agreement under Section 1833(a)(1)(A) (42 U.S.C. § 1395) (health care prepayment plan); or

iv. An organization under a Medicare Select policy;

5. The individual is enrolled under a Medicare supplement policy and the enrollment ceases because of the following:

i. Either the insolvency of the carrier or bankruptcy of the noncarrier organization, or other involuntary termination of coverage or enrollment under the policy;

ii. The carrier substantially violated a material provision of the policy; or

iii. The carrier, or an agent or other entity acting on the carrier's behalf, materially misrepresented the policy's provisions in marketing the policy to the individual;

6. The individual was enrolled under a Medicare supplement policy and terminates enrollment and subsequently enrolls, for the first time, with any Medicare + Choice organization under a Medicare + Choice plan under Part C of Medicare, any eligible organization under a contract under Section 1876 (42 U.S.C. § 1395mm) (Medicare risk or cost), any similar organization operating under demonstration project authority, an organization under an agreement under Section 1833(a)(1)(A) (42 U.S.C. § 1395) (health care prepayment plan), or a Medicare Select policy; and the subsequent enrollment is terminated by the enrollee during any period within the first 12 months of such subsequent enrollment (during which the enrollee is permitted to terminate such subsequent enrollment under Section 1851(e) (42 U.S.C. § 1395w-2) of the Federal Social Security Act); or

7. The individual, upon first becoming enrolled in Medicare Part B for benefits at age 65 or older, enrolls in a Medicare + Choice plan under Part C of Medicare, and disenrolls from the plan by not later than 12 months after the effective date of enrollment.

(d) The Medicare supplement policy to which eligible persons are entitled under (c)1, 2, 3, 4 and 5 above is a Medicare supplement policy which has a benefit package classified as Plan A, B, C or F offered by any carrier. The Medicare supplement policy to which eligible persons are entitled under (c)6 above is the same Medicare supplement policy in which the individual was most recently previously enrolled, if available from the same carrier, or, if not so available, a policy described in the preceding sentence. The Medicare supplement policy to which eligible persons are entitled under (c)7 above shall include any Medicare supplement policy offered by any carrier.

(e) At the time of an event described in (c) above because of which an individual loses coverage or benefits due to the termination of a contract or agreement, policy or plan, the organization that terminates the contract or agreement, the carrier terminating the policy, or the administrator of the plan being terminated, respectively, shall notify the individual of his or her rights under this section, and of the obligations of carriers issuing Medicare supplement policies under (a) and (b) above. Such notice shall be communicated contemporaneously with the notification of termination.

(f) At the time of an event described in (c) above because of which an individual ceases enrollment under a contract or agreement, policy or plan, the organization that offers the contract or agreement, regardless of the basis for the cessa-

tion of enrollment, the carrier offering the policy, or the administrator of the plan, respectively, shall notify the individual of his or her rights under this section, and of the obligations of carriers issuing Medicare supplement policies under (a) and (b) above. Such notice shall be communicated within 10 working days of the issuer receiving notification of disenrollment.

Emergency Rule, R.1999 d.38, effective December 28, 1998 (to expire February 26, 1999).

See: 31 N.J.R. 181(a).

Former N.J.A.C. 11:4-23.12, Filing requirements for policies, certificates and premium rates, recodified to N.J.A.C. 11:4-23.13.

11:4-23.13 Filing requirements for policies, certificates and premium rates

(a) No carrier shall deliver or issue for delivery in this State any Medicare supplement policy or certificate, any written application therefor, or any printed rider or endorsements to be applied thereto, unless the forms thereof have been submitted to and filed by the Commissioner.

1. At the expiration of 30 days after submission, the form shall be deemed filed unless affirmatively disapproved for filing by the Commissioner prior thereto.

2. If any such form is disapproved for filing by the Commissioner during the said 30-day period, it may not be delivered or issued for delivery unless and until such disapproval for filing is withdrawn. Such disapproval shall be subject to review in accordance with the Administrative Procedure Act, N.J.S.A. 52:14B-1 et seq. and the Uniform Administrative Procedure Rules, N.J.A.C. 1:1.

3. The Commissioner may extend the 30-day period no more than another 30 days if written notice is provided to the insurer before the expiration of the initial 30 day period, in which event all but this paragraph shall apply to the extended period.

4. Forms filed by or deemed filed by the Commissioner may subsequently be withdrawn from filing. Insurers shall have the right to a hearing in accordance with the Administrative Procedure Act, N.J.S.A. 52:14B-1 et seq., and the Uniform Administrative Procedure Rules, N.J.A.C. 1:1. An insurer may continue to deliver or issue for delivery such forms until a final decision in accordance with the withdrawal is rendered, following the request for a hearing, or, if no hearing is requested, delivery or issuance for delivery of such forms may continue no later than 30 days following notice of the withdrawal of that form.

(b) Disapproval for filing, or withdrawals of approval of the filing of any form, must be stated in writing with the grounds therefor included in the statement, in accordance with the rules of this State.

(c) No carrier shall use or revise premium rates for a Medicare supplement policy or certificate unless the rates, rating schedule and supporting documentation have been

submitted to and filed by the Commissioner in accordance with (a) and (b) above.

(d) The Commissioner shall not file, and carriers shall not submit for filing, more than one Medicare supplement policy or certificate form of each type for each standard Medicare supplement benefit plan, except as the Commissioner may otherwise approve in accordance with (d)2 below.

1. For the purposes of this subchapter, "type" shall mean an individual policy, and a group policy, and at such time as a Medicare Select program shall become effective in this State, an individual Medicare Select policy, and a group Medicare Select policy.

2. The Commissioner may approve carriers, individually, to offer up to four additional policy or certificate forms of the same type for the same standard Medicare supplement benefit plan. Such forms shall be subject to the filing requirements of this section. The four additional policy or certificate forms of the same type shall be limited to one additional form of the same type for:

- i. The inclusion of Innovative Benefits;
- ii. The addition of either a direct response or an agent marketing method;
- iii. The addition of either guaranteed issue or underwritten coverage; and
- iv. The offering of Medicare supplement coverage to persons eligible for Medicare by reason of disability.

(e) A carrier shall not discontinue offering any policy or certificate form filed by the Commissioner on or after the effective date of this subchapter unless such form has been withdrawn from filing pursuant to (a)4 above, or the carrier provides notice of discontinuance of offer to the Commissioner at least 30 days prior to such discontinuance, in writing.

1. Discontinuance subject to notice to the Commissioner shall include the following:

- i. Failure to actively offer for sale a policy or certificate form for more than 12 consecutive months;
- ii. Sale or transfer of Medicare supplement policies or certificates to another carrier; and
- iii. Revisions in the rating structure or methodology applicable to a Medicare supplement policy or certificate form which has not been otherwise submitted to and filed by the Commissioner in accordance with N.J.S.A. 11:4-23.11.

2. Carriers shall not submit for filing a new form for any Medicare supplement plan of the same type for which the carrier has discontinued issue of a policy or certificate for a period of five years following the notice of discontinuance to the Commissioner. The Commissioner may waive some or all of the five year period, in his or her discretion.

(f) Except for policies or certificates assumed under an assumption reinsurance agreement, the experience of all policy or certificate forms of the same type for a standard Medicare supplement benefit plan shall be combined for purposes of the refund or credit calculation set forth at N.J.S.A. 11:4-23.11(d).

New Rule, R.1991 d.345, effective July 1, 1991.

See: 23 N.J.R. 1264(a), 23 N.J.R. 2014(a).

Prior section 23.9, Requirements for replacement recodified to 23.12. Amended by R.1993 d.26, effective January 4, 1993.

See: 24 N.J.R. 12(a), 25 N.J.R. 141(a).

Rule on application forms and replacement coverage recodified to 3.15; rule on filing requirements recodified from 23.9; (c) through (f) added.

Recodified from N.J.A.C. 11:4-23.12 by R.1999 d.38, effective December 28, 1998 (to expire February 26, 1999).

See: 31 N.J.R. 181(a).

Former N.J.A.C. 11:4-23.13, Compensation arrangements, recodified to N.J.A.C. 11:4-23.14.

11:4-23.14 Compensation arrangements

(a) No carrier or other entity shall provide to any producer a first year commission or first year compensation for the sale of Medicare supplement policies or certificates in an amount which exceeds 200 percent of the commission or compensation to be provided by that insurer or other entity for the selling or servicing of that policy or certificate in the second year or period of that policy or certificate.

(b) The commission or other compensation which may be provided in subsequent renewal years shall be, for no fewer than five renewal years, the same as that commission or compensation provided in the second year or period.

(c) No carrier or other entity shall provide compensation or commission to any producer, nor shall any producer receive commission or other compensation greater than the renewal commission or compensation payable by the replacing carrier on renewal policies or certificates when an existing policy or certificate is replaced.

(d) For purposes of this section, "compensation" means a pecuniary or nonpecuniary remuneration of any kind relating to the sale of a policy or certificate, including, but not limited to:

1. Bonuses;
2. Gifts;
3. Prizes;
4. Awards; and
5. Finders fees.

New Rule, R.1990 d.345, effective July 1, 1991.

See: 23 N.J.R. 1264(a), 23 N.J.R. 2014(a).

Prior section 23.10, Severability recodified to 23.17.

Amended by R.1993 d.26, effective January 4, 1993.

See: 24 N.J.R. 12(a), 25 N.J.R. 141(a).

Rule on filing requirements for advertising recodified to 23.16; rule on compensation arrangements recodified from 23.10; compensation arrangement variables restricted further.

Recodified from N.J.A.C. 11:4-23.13 by R.1999 d.38, effective December 28, 1998 (to expire February 26, 1999).

See: 31 N.J.R. 181(a).

Former N.J.A.C. 11:4-23.14, Required disclosure provisions, recodified to N.J.A.C. 11:4-23.15.

11:4-23.15 Required disclosure provisions

(a) General rules concerning required disclosure provisions include the following:

1. Medicare supplement policies and certificates shall include a renewal or continuation provision. The language or specification of such provision shall be consistent with the type of policy or certificate to be issued. Such provision shall appear on the first page of policies and certificates, and shall include any reservation by the carrier of a right to change premiums and any automatic renewal premium increases based on the policyholder's or certificateholder's age.

2. Except for riders or endorsements by which the carrier effectuates a request made in writing by the insured, exercises a specifically reserved right under a Medicare supplement policy or certificate, or is required to reduce or eliminate benefits to avoid duplication of Medicare benefits:

i. All riders or endorsements added after the date of issue or at reinstatement or renewal which reduce or eliminate benefits or coverage shall require signed acceptance by the insured;

ii. After the date of the policy or certificate issue, any rider or endorsement which increases benefits or coverage with a concomitant increase in premium or subscription charges during the policy or certificate term, shall be agreed to in writing signed by the insured, except if the increased benefits or coverage are required by the minimum standards of this State for Medicare supplement coverage, or if required by other law. Where a separate additional premium is charged for benefits provided in connection with riders or endorsements, the premium charge shall be set forth clearly.

3. A Medicare supplement policy or certificate shall not provide for the payment of benefits based on standards described as "usual and customary," "reasonable and customary," or words of similar import.

4. If a Medicare supplement policy or certificate contains any limitations with respect to preexisting conditions, such limitation shall appear as a separate paragraph in the policy or certificate and be labeled as "Preexisting Condition Limitations."

5. Medicare supplement policies and certificates shall have a notice prominently printed on the first page or attached thereto stating in substance that the insured shall have the right to return the policy or certificate within 30 days of its delivery and to have the premium or subscription charge or fees refunded if, after examination of the

policy or certificate, the insured is not satisfied for any reason.

6. Carriers issuing policies or certificates which provide hospital or medical expense coverage on an expense incurred, indemnity, or service benefit basis to persons eligible for Medicare shall provide to all applicants an informational brochure entitled "Guide to Health Insurance for People with Medicare", hereinafter referred to as "the Guide", in the form developed jointly by the National Association of Insurance Commissioners and the Health Care Financing Administration. The Guide is intended to improve the buyer's understanding of Medicare and ability to select the most appropriate coverage. Delivery of the Guide shall be made whether or not policies or certificates are advertised, solicited or issued as Medicare supplement policies or certificates as set forth by this subchapter.

7. To ensure uniformity in content, form and printing, the Guide has been made available through the Publications Department of the National Association of Insurance Commissioners, Kansas City, MO.

8. Except in the case of direct response carriers, delivery of the Guide shall be made to the applicant at the time of application, and acknowledgment of receipt of the Guide shall be obtained by the carrier. Direct response carriers shall deliver the Guide to the applicant upon request but in no instance shall delivery of the Guide occur later than the time of policy or certificate delivery.

9. Except as provided in (c) below, the terms "Medicare Supplement," "Medigap," and words of similar import shall not be used unless the policy or certificate is issued in compliance with N.J.S.A. 11:4-23.8 and all other sections of this subchapter.

(b) Outline of Coverage requirements for Medicare supplement policies and certificates include:

1. Carriers issuing Medicare supplement policies or certificates for delivery in this State shall provide an outline of coverage to all applicants at the time the application is presented to the prospective applicant. Except for direct response policies or certificates, acknowledgment of receipt of such outline shall be obtained by the carrier from the applicant.

2. If an outline of coverage is provided at the time of application and the Medicare Supplement policy or certificate is issued on a basis which would require revision of the outline, a substitute outline of coverage properly describing the policy or certificate actually issued must accompany such policy or certificate when it is delivered and contain the following statement, in no less than 12 point type, immediately above the company name: "NOTICE: Read this outline of coverage carefully. It is not identical to the outline of coverage provided upon application and the coverage originally applied for has not been issued."

3. The outline of coverage provided to applicants pursuant to (b)1 above shall be in the language and format prescribed in Exhibit D of the Appendix to subchapters 16 and 23 of this chapter, incorporated herein by reference, in no less than 12 point type. The outline of coverage shall consist of a cover page, premium information, disclosure pages, and charts displaying the features of each benefit plan offered by the carrier. All plans A through J shall be shown on the cover page, and the plan(s) offered by the carrier shall be prominently identified. Premium information for the plan(s) offered by the carrier shall be provided on the cover page, or immediately following the coverage page, clearly and prominently, specifying both the premium and the mode. All possible premiums for the applicant on all plans offered to the applicant by the carrier shall be illustrated.

(c) All health and disability income policies, except as specified in this subsection, issued for delivery in this State to persons eligible for Medicare shall notify insureds under the policy. Such notice is not required for: Medicare supplement policies; policies of one or more employers or labor organizations, of the trustees of a fund established by one or more employers or labor organizations, or combination thereof, for employees or former employees, or combination thereof, or members or former members, or combination thereof, of the labor organization; or policies issued pursuant to a contract under Section 1876 of the Federal Social Security Act (42 U.S.C. §§ 1395 et seq.). The notice shall either be printed or attached to the first page of the outline of coverage delivered to the insureds under the policy, or, if no outline of coverage is delivered, to the first page of the certificate or policy delivered to insureds. The notice shall be in no less than 12 point type and shall contain the following language:

“THIS IS NOT A MEDICARE SUPPLEMENT (POLICY OR CERTIFICATE). If you are eligible for Medicare, review the Guide to Health Insurance for People with Medicare available from the company.”

1. Applications provided to persons eligible for Medicare for the health insurance policies described above shall disclose, using the applicable statement in Exhibit H in the Appendix the extent to which the policy duplicates Medicare. The disclosure statement shall be provided as part of, or together with the application for the policy or certificate.

(d) At least 30 days prior to the effective dates of any Medicare benefit changes, notice shall be provided by carriers to New Jersey insureds describing the revisions of the Medicare program and the resulting modifications made by the carrier to an insured's Medicare supplement policy or certificate to eliminate duplication of Medicare benefits.

1. The notices shall be in the format set forth in the Appendix to subchapters 16 and 23 of this chapter, Exhibit C (Notice of Changes in Medicare and Your Medicare Supplement Coverage), which is incorporated herein as part of this rule.

2. No modification shall be made to an existing Medicare supplement policy or certificate when notices are sent except those modifications necessary to eliminate duplication of Medicare benefits.

3. Notices shall include a description of revisions to the Medicare program and a description of each modification made to the coverage provided under the Medicare supplement policy or certificate.

4. Notices shall provide information as to when any premium adjustment is to be made due to changes in Medicare.

5. Information on benefit modifications and premium adjustments shall be in outline form and in clear and simple terms to facilitate comprehension.

6. Notices shall not contain or be accompanied by any solicitation.

7. No notice shall contain benefits and premium information for more than one policy or certificate form.

Amended by R.1987 d.95, effective February 2, 1987.

See: 18 N.J.R. 2103(a), 19 N.J.R. 291(a).

(a)6 substantially amended; (a)7 old text deleted and new text substituted.

Amended by R.1988 d.587, effective December 19, 1988 (operative January 1, 1989).

See: 20 N.J.R. 2510(a), 20 N.J.R. 3155(c).

Substantially amended.

Amended by R.1991 d.121, effective March 4, 1991.

See: 22 N.J.R. 771(a), 23 N.J.R. 690(c).

In (a)6 and 7iii: revised internal references; deleted (a)7iv, which was outdated text. In (a)7ii(3)-(4): revised required paper to be used. Amended by R.1991 d.345, effective July 1, 1991.

See: 23 N.J.R. 1264(a), 23 N.J.R. 2014(a).

Section recodified from 23.8.

Deleted “or nonrenewal”, “clearly state the duration, where limited, or renewability and the duration of the term of coverage for which the policy is issued and for which it may be renewed. Such provision shall”, “individual” in (a)1. Added (a)2.

Recodified existing (a)2 through 9 as 3 through 10.

Deleted “or hospital or medical service corporation”, “or subscriber”, “all” in (a)3.

Designated 3i and ii; deleted “or subscriber”.

Added “are required by the minimum standards for Medicare supplement insurance policies, or if” in (a)3ii.

Stylistic changes in (a)4, 5.

Deleted “, other than those issued pursuant to direct response solicitation”, “policyholder or certificate holder”, “person or subscriber”, “Medicare Supplement policies or certificates . . .”; added “insured”, “or fees”; changed “10” days to “30” days in (a)6.

Deleted “and hospital and medical service corporations”, “or subscriber contracts”; added “Delivery of the informational brochure shall be made whether or not policies are advertised, solicited or issued as Medicare supplement policies as set forth by this subchapter.” in (a)7.

Changed “format” to “form” in (a)8.

Deleted “or service corporations” in (a)9. Added “and all other sections of this subchapter” in (a)10.

Deleted “or service organizations”; added “or certificates” in (b)1.

Added 5v. in Outline; deleted “N.J.A.C. 11:4-23.8(5)”; added “section 4” in 6 (outline).

Deleted “Any group”, “insurance policy or individual or group subscriber contract”, “subscriber contract”; added “All”, “and disability income policies”, “policy” in (c).

Added (d).

Substantial changes in format of the (b)3 outline as follows: Added "And Premium Information" to heading; added "Use this outline to compare benefits and premiums among policies"; added "and indexed copayments or deductibles, as appropriate" in (b)3 outline 4.

Changed "Service" to "Description"; deleted "Benefit" and "Medicare Pays" columns.

Added "I. Minimum Standards . . ."; deleted "Hospitalization" and "Post-Hospital Skilled Nursing Care".

Added "II. Additional Benefits . . .".

Amended by R.1993 d.26, effective January 4, 1993.

See: 24 N.J.R. 12(a), 25 N.J.R. 141(a).

Rule on requirements for marketing recodified to 23.17; rule on required disclosure provisions recodified from 23.11; Outline of Coverage deleted; individualized Medicare supplement plan charts added; new disclosures required.

Amended by R.1996 d.4, effective January 2, 1996.

See: 27 N.J.R. 3557(a), 28 N.J.R. 165(a).

Substantially amended (a)6 and 7.

Amended by R.1996 d.295, effective July 1, 1996.

See: 28 N.J.R. 1647(a), 28 N.J.R. 3462(a).

Recodified from N.J.A.C. 11:4-23.14 by R.1999 d.38, effective December 28, 1998 (to expire February 26, 1999).

See: 31 N.J.R. 181(a).

Former N.J.A.C. 11:4-23.15, Requirements for application forms and replacement coverage, recodified to N.J.A.C. 11:4-23.16.

11:4-23.16 Requirements for application forms and replacement coverage

(a) Application forms shall include the following questions designed to elicit information as to whether a Medicare supplement policy or certificate is intended to be additional to any such policies or certificates. A supplementary application or other form to be signed by the applicant and agent may be used. In the case of a direct response carrier, a copy of the application or supplemental application, signed by the applicant and acknowledged by the carrier, shall be returned to the applicant by the carrier upon delivery of the policy or certificate. The application form or supplementary application form shall contain the questions and statements set forth below.

1. Statements shall be as follows:

i. You do not need more than one Medicare supplement policy.

ii. If you purchase this policy, you may want to evaluate your existing health coverage and decide if you need multiple coverage.

iii. You may be eligible for benefits under Medicaid and may not need a Medicare supplement policy.

iv. The benefits and premiums under your Medicare supplement policy can be suspended, if requested, during your entitlement to benefits under Medicaid for 24 months. You must request this suspension within 90 days of becoming eligible for Medicaid. If you are no longer entitled to Medicaid, your policy will be reinstated if requested within 90 days of losing Medicaid eligibility.

v. Counseling services may be available in your State to provide advice concerning your purchase of Medicare supplement coverage and concerning medical assistance through the State Medicaid program including

benefits as a Qualified Medicare Beneficiary (QMB) and a Specified Low-Income Medicare Beneficiary (SLMB).

2. Questions, numbered 1, 2, 3 and 4, shall be as follows and shall be prefaced by the statement "To the best of your knowledge":

i. Do you have another Medicare supplement policy or certificate in force? If so, do you intend to replace your current Medicare supplement policy with this policy (certificate)?

ii. Do you have any other health insurance coverage that provides benefits similar to this Medicare supplement policy?

(1) If so, with which company?

(2) What kind of coverage?

iii. Are you covered for medical assistance through the State Medicaid program:

(1) As a Specified Low-Income Medicare Beneficiary (SLMB)?

(2) As a Qualified Medicare Beneficiary (QMB)?

(3) For other Medicaid medical benefits?

(b) Agents shall list any other health policies which they have sold to the applicant that are currently in force, and any such policies sold to the applicant within the previous five years that are no longer in force, clearly indicating which policies are in force and which are not.

(c) Upon determination that a sale will involve replacement of Medicare supplement coverage, a carrier or its agent shall furnish to the applicant, prior to the issuance or delivery of the Medicare supplement policy or certificate, a notice regarding replacement of Medicare supplement coverage. One copy of such notice signed by the applicant and agent, except where coverage is sold without an agent, shall be provided to the applicant, and an additional signed copy shall be retained by the carrier. A direct response carrier shall deliver to the applicant at the time of the issuance of the policy (certificate) the notice regarding replacement of Medicare supplement coverage.

(d) Carriers shall include a waiver of all preexisting condition exclusion clauses, waiting periods, elimination periods or probationary periods in a replacement policy for at least that same period of duration of the conditional clause(s) in the applicant's existing policy which has expired at the time of issuance of the replacement policy, to the extent of the benefits of the existing policy.

(e) The notice required by (c) above shall be provided in substantially the form set forth in Exhibit E of the Appendix to Subchapters 16 and 23 of this chapter, incorporated herein by reference, in no less than 12 point type. Item (1) of the notice set forth in Exhibit E may be omitted or

modified if preexisting conditions are covered under the new coverage. If the policy or certificate is guaranteed issue, item (3) of the notice of Exhibit E may be omitted.

Amended by R.1991 d.345, effective July 1, 1991.

See: 23 N.J.R. 1264(a), 23 N.J.R. 2014(a).

Section 23.9 "Requirements for replacement" recodified and reworded—"Requirements for application forms and replacement coverage".

Added "or certificate", "or Medicare supplement", "or is intended to be additional to any such policies or certificates", "and agent, except where coverage is not sold through an agent," "the questions shall be substantially as follows:" in (a). Added (a)1 through 4. Added (b), (d). Recodified existing (b) and (c) and (e) as (c), (e) and (f).

Deleted "or service corporation", "signed by the applicant", "certificate"; added "or certificate", "signed by the applicant and the agent, except where coverage is sold without an agent" in recodified (c). Substantial revision of "Notice to applicant regarding Replacement of Accident and Sickness or Medicare Supplement Coverage" in recodified (e).

Deleted old (d).

Deleted "N.J.A.C. 11:4-23.9(c) and (d)"; added "(e)" and "or modified" in recodified (f).

Amended by R.1993 d.26, effective January 4, 1993.

See: 24 N.J.R. 12(a), 25 N.J.R. 141(a).

Rule on appropriateness of recommended purchase and excessive coverage recodified to 23.18; rule on requirements for application forms and replacement coverage recodified from 23.12; "Notice to Applicant . . . deleted, with reference to Appendix E added; duplication of coverage and value to applicant to be included in application form.

Amended by R.1996 d.295, effective July 1, 1996.

See: 28 N.J.R. 1647(a), 28 N.J.R. 3462(a).

Recodified from N.J.A.C. 11:4-23.15 by R.1999 d.38, effective December 28, 1998 (to expire February 26, 1999).

See: 31 N.J.R. 181(a).

Former N.J.A.C. 11:4-23.16, Filing requirements for advertising, recodified to N.J.A.C. 11:4-23.17.

11:4-23.17 Filing requirements for advertising

(a) Every carrier providing Medicare supplement policies or certificates in this State shall file with the Commissioner a copy of all advertisements to which residents of this State will have access, and through which the carrier intends, or by implication purports to the reasonable targeted consumer its intent to make its Medicare supplement product(s) available for purchase or enrollment in this State, whether through written, radio, television or other electronic media, at least 30 days prior to the date on which the advertisement is to be used in this State, or made accessible to residents of this State.

(b) All advertisements shall be in accord with the standards set out in N.J.A.C. 11:2-11 and any other disclosure and advertising rules which may be applicable to carriers.

(c) The Commissioner may disapprove an advertisement at any time if the advertisement is not in compliance with this rule or is in violation of the Trade Practices Act, N.J.S.A. 17B:30-1 et seq. An advertisement which has been disapproved by the Commissioner shall continue to be disapproved until disapproval is withdrawn by the Commissioner.

(d) The Commissioner may institute any and all procedures and penalties available pursuant to N.J.S.A. 17:35C-1 et seq., 17B:26A-1 et seq., and 17B:30-1 et seq., against a carrier which is determined by the Commissioner to be in violation of this rule.

(e) All actions of the Commissioner are subject to review pursuant to the provisions of the Administrative Procedures Act, N.J.S.A. 52:14B-1 et seq.

New Rule, R.1991 d.345, effective July 1, 1991.

See: 23 N.J.R. 1264(a), 23 N.J.R. 2014(a).

Amended by R.1993 d.26, effective January 4, 1993.

See: 24 N.J.R. 12(a), 25 N.J.R. 141(a).

Rule on reporting of multiple policies recodified to 23.19; rule on filing requirements for advertising recodified from 23.13; references to insurer changed to carrier.

Amended by R.1996 d.4, effective January 2, 1996.

See: 27 N.J.R. 3557(a), 28 N.J.R. 165(a).

Recodified from N.J.A.C. 11:4-23.16 by R.1999 d.38, effective December 28, 1998 (to expire February 26, 1999).

See: 31 N.J.R. 181(a).

Former N.J.A.C. 11:4-23.17, Standards for marketing, recodified to N.J.A.C. 11:4-23.18.

11:4-23.18 Standards for marketing

(a) Every carrier, directly or through its producers, shall:

1. Establish marketing procedures to assure that any comparison of policies by its agents or other producers will be fair and accurate;

2. Establish marketing procedures to assure excessive coverage is not sold or issued to any consumer;

3. Display prominently by type, stamp or other appropriate means, on the first page of the policy or certificate the following:

"Notice to buyer: This policy may not cover all of your medical expenses."

4. Make every reasonable effort to identify when a prospective applicant or enrollee already has Medicare supplement and/or accident and sickness coverage, the quantity of such policies and extensiveness of such coverage; and

5. Establish procedures which are auditable for purposes of verifying compliance with this section.

(b) Practices which are prohibited in this State, in addition to those set forth in N.J.S.A. 17B:30-1 et seq., include, but are not limited to, the following:

1. Twisting; that is, knowingly making any misleading representations or incomplete or fraudulent comparisons of any policies or carriers for the purpose of inducing, or tending to induce, any person to lapse, forfeit, surrender, terminate, retain, pledge, assign, borrow on, or convey any policy or certificate or to purchase any policy with another carrier;

2. High pressure tactics; that is, employing any method of marketing having the effect of or tending to induce the purchase or to recommend the purchase of coverage through force, fright, explicit or implied threat, or undue pressure; and

3. Cold lead advertising; that is, making use directly or indirectly of any method of marketing which fails to disclose in a conspicuous manner that a purpose of the method of marketing is solicitation of insurance or other similar coverage, and that further contact with the consumer will be made by an insurance agent, other producer or carrier.

New Rule, R.1991 d.345, effective July 1, 1991.
See: 23 N.J.R. 1264(a), 23 N.J.R. 2014(a).
Amended by R.1993 d.26, effective January 4, 1993.
See: 24 N.J.R. 12(a), 25 N.J.R. 141(a).

Rule on severability recodified to 23.22; rule on standards for marketing recodified from 23.14; insurer changed to carrier.
Amended by R.1996 d.4, effective January 2, 1996.
See: 27 N.J.R. 3557(a), 28 N.J.R. 165(a).
Amended by R.1996 d.295, effective July 1, 1996.
See: 28 N.J.R. 1647(a), 28 N.J.R. 3462(a).
Recodified from N.J.A.C. 11:4-23.17 by R.1999 d.38, effective December 28, 1998 (to expire February 26, 1999).
See: 31 N.J.R. 181(a).

Former N.J.A.C. 11:4-23.18, Appropriateness of recommended purchase and excessive coverage, recodified to N.J.A.C. 11:4-23.19.

11:4-23.19 Appropriateness of recommended purchase and excessive coverage

(a) In recommending the purchase or replacement of any Medicare supplement policy or certificate, an agent shall make reasonable efforts to determine the appropriateness of a recommended purchase or replacement.

(b) Any sale of Medicare supplement coverage which will provide an individual with more than one Medicare supplement policy or certificate is prohibited.

New Rule, R.1991 d.345, effective July 1, 1991.
See: 23 N.J.R. 1264(a), 23 N.J.R. 2014(a).
Amended by R.1993 d.26, effective January 4, 1993.
See: 24 N.J.R. 12(a), 25 N.J.R. 141(a).

Rule on appropriateness of recommended purchase and excessive coverage recodified from 23.15; exception at (b) deleted; prohibition of any sale which provides more than one coverage universal, without exception.
Recodified from N.J.A.C. 11:4-23.18 by R.1999 d.38, effective December 28, 1998 (to expire February 26, 1999).
See: 31 N.J.R. 181(a).

Former N.J.A.C. 11:4-23.19, Reporting of multiple policies, recodified to N.J.A.C. 11:4-23.20.

11:4-23.20 Reporting of multiple policies

(a) Every carrier shall report annually, on or before March 1, to the Commissioner, the policy and certificate number and date of issuance of each policy or certificate, grouped by individual insureds for every individual resident of this State for which the carrier has in force more than one Medicare supplement policy or certificate.

(b) Carriers shall submit reports of multiple policies on a form substantially similar to that form set forth in Exhibit G

of the Appendix to Subchapters 16 and 23 of this Chapter, incorporated herein by reference. Carriers shall submit separate forms for each insured for which multiple policies or certificates are being reported. No form shall contain information relevant to more than one insured. In any instance in which one form provides insufficient reporting space for an insured's policies or certificates, additional pages should be attached containing the additional information.

New Rule, R.1991 d.345, effective July 1, 1991.
See: 23 N.J.R. 1264(a), 23 N.J.R. 2014(a).
Amended by R.1993 d.26, effective January 4, 1993.
See: 24 N.J.R. 12(a), 25 N.J.R. 141(a).

Rule on reporting of multiple policies recodified from 23.16, with reporting of multiple sales added; reference to Appendix E added. Recodified from N.J.A.C. 11:4-23.19 by R.1999 d.38, effective December 28, 1998 (to expire February 26, 1999).
See: 31 N.J.R. 181(a).

Former N.J.A.C. 11:4-23.20, Addresses for submissions for filing, recodified to N.J.A.C. 11:4-23.21.

11:4-23.21 Addresses for submissions for filing

(a) All forms, rates, loss ratio reporting and advertisements submitted for filing with or by the Commissioner shall be submitted to the Division of Life and Health Actuarial Services, New Jersey Department of Insurance, PO Box 470, Trenton, New Jersey 08625-0470 directed to specific bureaus as follows:

1. Managed Care Bureau, for submissions from health maintenance organizations, dental plan organizations, and dental service corporations; and

2. Health Bureau, for submissions from insurers and health, hospital and medical service corporations.

(b) Annual reports of multiple policy issues submitted for filing with the Commissioner shall be submitted to the Division of Legislative and Regulatory Affairs, New Jersey Department of Insurance, PO Box 325, Trenton, New Jersey 08625-0325, to the attention of Medicare Supplement Multiple Policy Report.

Amended by R.1996 d.4, effective January 2, 1996.
See: 27 N.J.R. 3557(a), 28 N.J.R. 165(a).

Substantially amended (a).
Recodified from N.J.A.C. 11:4-23.20 by R.1999 d.38, effective December 28, 1998 (to expire February 26, 1999).
See: 31 N.J.R. 181(a).

Former N.J.A.C. 11:4-23.21, Penalties, recodified to N.J.A.C. 11:4-23.22.

11:4-23.22 Penalties

Failure to comply with the terms of this subchapter may result in the assessment of any and all penalties available in accordance with the laws of this State.

Recodified from N.J.A.C. 11:4-23.21 by R.1999 d.38, effective December 28, 1998 (to expire February 26, 1999).
See: 31 N.J.R. 181(a).

Former N.J.A.C. 11:4-23.22, Severability, recodified to N.J.A.C. 11:4-23.23.

11:4-23.23 Severability

If any provision of this subchapter or the application thereof to any person or circumstance is held to be invalid for any reason, the remainder of the subchapter and the application of such provision to other persons or circumstances shall not be affected thereby.

Amended by R.1991 d.345, effective July 1, 1991.

See: 23 N.J.R. 1264(a), 23 N.J.R. 2014(a).

Section recodified from 23.10.

Changed "rule" to "subchapter" with stylistic changes.

Recodified by R.1993 d.26, effective January 4, 1993.

See: 24 N.J.R. 12(a), 25 N.J.R. 141(a).

Rule on severability recodified from 23.17, without change.

Recodified from N.J.A.C. 11:4-23.22 by R.1999 d.38, effective December 28, 1998 (to expire February 26, 1999).

See: 31 N.J.R. 181(a).