



Secure STM (CO and KS)

Rates for Effective Dates

January 1, 2008 - June 30, 2008

Underwritten by Standard Security Life Insurance Company of New York

State Zip Code Area Classifications effective 1/1/08

Rates contained in this document are good for CO and KS.

Refer to other rate charts or state specific application for rates in other states.

How to Locate Your Area Rate Classification

Locate the applicant's state of residence and zip code prefix. The letter listed to the right of the zip code prefix is the applicants rate area. The rate chart contains rates for 3 zip area letters. Only use the rates located in the column titled with the applicants area letter. Contact your agent or HPA for the application form or to verify current plan approvals.

Zip Code	Area	Zip Code	Area
Colorado (Use CO application)		Kansas (Use KS application)	
(12 Month STM Option not available)		(12 Month STM Option not available)	
800-816	C	660-662	B
		664-679	A

How to Calculate Your Rates

There are three Secure STM rate tables for each Coverage Effective Date rate chart (1/1/08 through 6/30/08) contained in this booklet:

1. Monthly Pay for 1 to 6 months
2. Monthly Pay for 1 to 12 months
3. Single Pay for 30 to 180 days

Determine your coverage rate table by your choices for the Coverage Length, Coinsurance* and the Coverage Effective Date. Referring to the applicable rate chart, you must locate each of the following:

1. Your Deductible choice
2. Gender / Age for each to be insured
3. Your Area Rate Classification letter

The reverse side of the application contains the Rate Calculation Chart. Simply follow the steps listed to calculate your cost.

*The 50/50 Coinsurance Option rates are not contained in this booklet. Please call your agent or HPA at 1-800-277-3323 ext. 3, or check online at www.hpa-inc.com for a quote.

How to Apply for Dependent Children Coverage

Your dependent children must be unmarried and under age 19 (or under age 25 and a full time student). List all of your eligible dependent children to be insured on the application for insurance. You only pay for a maximum of up to three dependent children, regardless of the number of eligible dependent children to be insured.

How to Apply for Child Only Coverage

The minimum age is 2 years old for child(ren) coverage without an adult guardian also insured. Use the 2-19 rate for either the male or female, based on the gender of the youngest child; then use the per child rate for each of the other siblings to be insured. **The parent or legal guardian must print their name as applicant and complete the remainder of the application on behalf of the child(ren). The parent or legal guardian must sign and date the application.**

About Communicating for America, Inc. (CA)

Communicating for America, Inc.* (CA) provides many benefits and discounts to its members. Your enrollment as a member of CA is completed upon receipt of the association annual dues. Your membership information will be mailed shortly thereafter.

**CA is not affiliated with Standard Security Life Insurance Company of New York, nor is it a part of the insurance coverage. CA is a 501c5 non-profit association headquartered in Fergus Falls, Minn., providing members valued benefits and savings since 1972.*

**CA membership does not apply to residents of the following states: ID, KS, LA, ME, MD, MN, MT, ND, NH, NV or SD.*

About the STM Enhancement Series

Included with your coverage is Communicating for America** (CA) Healthy Lifestyle Advocates, which provides discounts for the following services and or purchases: • Vitamins, herbs and nutritional supplements – 10-30% off already low prices • Nurse-on-call access to a registered nurse 24 hours a day, seven days a week • Chiropractic services – 10%-30% off at more than 28,000 private chiropractors and alternative health services • Prescription drugs – up to 15-60% off on generic or name-brand drugs at over 45,000 pharmacies nationwide • Vision eyewear care - up to 15%-45% off eyeglasses, contact lenses and non-prescription sunglasses through a network of more than 40,000 retail optical locations, including Pearle Vision, Target Optical, Sears Optical and LensCrafters • Dental services – 20%-60% on dental expenses from 34,000 dentists in CAREINGTON International.

***The Communicating for America (CA) Healthy Lifestyle Enhancement Series is not an insurance benefit, nor is it affiliated with Standard Security Life Insurance Company of New York or is a part of the STM insurance plan. CA provides access to discount services administered by CAREINGTON International. Enhancement series benefits may vary by state.*

These rates and zip areas apply to new coverage effective dates 1/1/08 through 6/30/08. Please call your agent or check online at www.hpa-inc.com for the rates effective 7/1/08. Standard Security Life Insurance Company reserves the right to decline applications received using outdated rates and zip code areas.

Please call your agent or contact HPA for application forms or questions about STM state availability:
1-800-277-3323 ext. 3



Secure STM Monthly Rates for 1 to 12 Months* (CO and KS)

Underwritten by Standard Security Life Insurance Company of New York

80% of \$5,000 Co-insurance Rates for Effective Dates January 1, 2008 - June 30, 2008

\$5,000 Deductible

AGE	SEX	A	B	C
2-19	Male	55.47	60.80	65.60
20-24	Male	64.26	70.56	76.24
25-29	Male	58.85	64.56	69.69
30-34	Male	77.84	84.82	91.10
35-39	Male	88.65	96.83	104.20
40-44	Male	104.19	114.10	123.02
45-49	Male	129.19	141.88	153.30
50-54	Male	160.95	177.16	191.76
55-59	Male	205.54	226.71	245.77
60-64	Male	258.92	286.02	310.41
2-19	Female	61.55	67.56	72.97
20-24	Female	68.99	75.82	81.97
25-29	Female	64.93	71.31	77.06
30-34	Female	81.22	88.57	95.20
35-39	Female	91.35	99.83	107.47
40-44	Female	106.22	116.35	125.47
45-49	Female	124.46	136.62	147.57
50-54	Female	153.51	168.90	182.76
55-59	Female	183.92	202.69	219.58
60-64	Female	219.05	241.73	262.13
Per Child		44.86	49.29	53.28

\$1,000 Deductible

AGE	SEX	A	B	C
2-19	Male	90.61	99.84	108.15
20-24	Male	104.80	115.61	125.34
25-29	Male	96.01	105.85	114.70
30-34	Male	122.43	134.37	145.11
35-39	Male	142.70	156.89	169.66
40-44	Male	169.73	186.92	202.39
45-49	Male	211.62	233.47	253.13
50-54	Male	267.70	295.78	321.05
55-59	Male	345.41	382.12	415.16
60-64	Male	435.95	482.72	524.81
2-19	Female	100.07	110.35	119.61
20-24	Female	114.93	126.87	137.61
25-29	Female	106.82	117.86	127.79
30-34	Female	130.54	143.38	154.93
35-39	Female	146.08	160.65	173.75
40-44	Female	173.11	190.68	206.49
45-49	Female	203.51	224.46	243.31
50-54	Female	254.19	280.77	304.68
55-59	Female	306.89	339.32	368.51
60-64	Female	367.03	406.14	441.34
Per Child		73.24	80.83	87.65

\$2,500 Deductible

AGE	SEX	A	B	C
2-19	Male	64.26	70.56	76.24
20-24	Male	74.39	81.82	88.51
25-29	Male	67.64	74.32	80.33
30-34	Male	88.65	96.83	104.20
35-39	Male	102.84	112.60	121.38
40-44	Male	120.41	132.12	142.66
45-49	Male	150.14	165.15	178.66
50-54	Male	187.30	206.44	223.67
55-59	Male	241.35	266.50	289.14
60-64	Male	302.16	334.07	362.78
2-19	Female	71.01	78.07	84.42
20-24	Female	80.47	88.58	95.88
25-29	Female	75.74	83.33	90.15
30-34	Female	93.38	102.09	109.92
35-39	Female	104.19	114.10	123.02
40-44	Female	123.11	135.12	145.93
45-49	Female	144.05	158.39	171.30
50-54	Female	178.51	196.68	213.03
55-59	Female	215.00	237.22	257.22
60-64	Female	256.22	283.02	307.14
Per Child		52.30	57.55	62.28

\$500 Deductible

AGE	SEX	A	B	C
2-19	Male	123.72	136.63	148.25
20-24	Male	143.99	159.15	172.80
25-29	Male	131.82	145.64	158.07
30-34	Male	165.68	182.42	197.48
35-39	Male	195.41	215.45	233.49
40-44	Male	231.89	255.99	277.68
45-49	Male	292.70	323.56	351.33
50-54	Male	369.73	409.14	444.62
55-59	Male	479.86	531.52	578.00
60-64	Male	606.89	672.66	731.85
2-19	Female	138.58	153.15	166.25
20-24	Female	158.85	175.67	190.80
25-29	Female	147.36	162.91	176.89
30-34	Female	177.16	195.18	211.40
35-39	Female	198.78	219.20	237.58
40-44	Female	236.62	261.25	283.41
45-49	Female	280.54	310.04	336.60
50-54	Female	351.49	388.87	422.52
55-59	Female	425.81	471.46	512.54
60-64	Female	510.95	566.05	615.65
Per Child		101.62	112.36	122.02

*The monthly rates listed include the following Communicating for America (CA) STM Enhancement Series fees: \$5 per dependent child; \$7.50 per person in age bands 2-29; and \$15 per person in age bands 30-64.

Communicating for America (CA) STM Enhancement Series is not an insurance benefit, nor is it affiliated with Standard Security Life Ins. Co. of New York or a part of the STM insurance plan.

** The 12 Month STM Option is not available in CA, CO, CT, IN, KS, LA, MD, MI, MN, MT, ND, NH, NV or WY.

*** Note: You pay for a maximum of up to three dependent children, regardless of the number eligible children to be insured. Please list all of your eligible dependent children to be insured on the application for insurance.



Secure STM Monthly Rates for 1 to 6 Months* (CO and KS)

Underwritten by Standard Security Life Insurance Company of New York

80% of \$5,000 Co-insurance Rates for Effective Dates January 1, 2008 - June 30, 2008

\$2,500 Deductible

AGE	SEX	A	B	C
2-19	Male	47.07	51.46	55.42
20-24	Male	54.13	59.31	63.98
25-29	Male	49.42	54.08	58.27
30-34	Male	66.34	72.05	77.18
35-39	Male	76.24	83.04	89.16
40-44	Male	88.48	96.65	104.00
45-49	Male	109.21	119.68	129.10
50-54	Male	135.12	148.46	160.47
55-59	Male	172.80	190.33	206.11
60-64	Male	215.19	237.44	257.46
2-19	Female	51.78	56.70	61.13
20-24	Female	58.37	64.03	69.11
25-29	Female	55.08	60.36	65.12
30-34	Female	69.64	75.71	81.18
35-39	Female	77.18	84.09	90.30
40-44	Female	90.37	98.74	106.28
45-49	Female	104.97	114.97	123.96
50-54	Female	128.99	141.66	153.06
55-59	Female	154.43	169.92	183.86
60-64	Female	183.16	201.85	218.66
Per Child		37.97	41.64	44.93

\$500 Deductible

AGE	SEX	A	B	C
2-19	Male	88.52	97.52	105.62
20-24	Male	102.65	113.22	122.74
25-29	Male	94.17	103.80	112.47
30-34	Male	120.04	131.71	142.22
35-39	Male	140.77	154.74	167.32
40-44	Male	166.20	183.00	198.13
45-49	Male	208.60	230.11	249.47
50-54	Male	262.30	289.77	314.50
55-59	Male	339.08	375.09	407.49
60-64	Male	427.63	473.48	514.74
2-19	Female	98.88	109.04	118.17
20-24	Female	113.01	124.74	135.29
25-29	Female	105.01	115.84	125.59
30-34	Female	128.05	140.61	151.92
35-39	Female	143.12	157.36	170.17
40-44	Female	169.50	186.67	202.12
45-49	Female	200.12	220.69	239.20
50-54	Female	249.58	275.64	299.10
55-59	Female	301.39	333.22	361.85
60-64	Female	360.74	399.16	433.74
Per Child		72.36	79.84	86.58

\$1,000 Deductible

AGE	SEX	A	B	C
2-19	Male	65.44	71.88	77.67
20-24	Male	75.33	82.87	89.65
25-29	Male	69.21	76.06	82.23
30-34	Male	89.90	98.22	105.71
35-39	Male	104.03	113.92	122.82
40-44	Male	122.87	134.85	145.64
45-49	Male	152.07	167.30	181.01
50-54	Male	191.17	210.74	228.36
55-59	Male	245.34	270.93	293.97
60-64	Male	308.46	341.07	370.41
2-19	Female	72.03	79.20	85.66
20-24	Female	82.40	90.72	98.21
25-29	Female	76.74	84.44	91.36
30-34	Female	95.55	104.50	112.55
35-39	Female	106.38	116.54	125.67
40-44	Female	125.22	137.47	148.49
45-49	Female	146.42	161.02	174.17
50-54	Female	181.75	200.28	216.95
55-59	Female	218.49	241.10	261.45
60-64	Female	260.41	287.68	312.22
Per Child		52.58	57.86	62.62

\$250 Deductible

AGE	SEX	A	B	C
2-19	Male	137.51	151.95	164.95
20-24	Male	159.18	176.03	191.20
25-29	Male	146.46	161.90	175.79
30-34	Male	183.16	201.85	218.66
35-39	Male	216.13	238.48	258.60
40-44	Male	258.06	285.06	309.37
45-49	Male	324.00	358.34	389.24
50-54	Male	411.15	455.16	494.78
55-59	Male	533.15	590.72	642.53
60-64	Male	675.40	748.78	814.82
2-19	Female	153.52	169.75	184.35
20-24	Female	176.13	194.87	211.73
25-29	Female	163.41	180.74	196.33
30-34	Female	196.35	216.50	234.64
35-39	Female	220.85	243.72	264.30
40-44	Female	264.18	291.87	316.79
45-49	Female	310.81	343.68	373.26
50-54	Female	390.89	432.66	470.25
55-59	Female	472.85	523.73	569.51
60-64	Female	568.47	629.97	685.32
Per Child		112.87	124.85	135.64



Secure STM Single Pay Daily Rates* (CO and KS)

Underwritten by Standard Security Life Insurance Company of New York

80% of \$5,000 Co-insurance Rates for Effective Dates January 1, 2008 - June 30, 2008
Minimum of 30 and a Maximum of 180 Days

\$2,500 Deductible

AGE	SEX	A	B	C
2-19	Male	1.22	1.33	1.43
20-24	Male	1.40	1.52	1.64
25-29	Male	1.28	1.40	1.50
30-34	Male	1.76	1.90	2.03
35-39	Male	2.01	2.17	2.32
40-44	Male	2.31	2.51	2.69
45-49	Male	2.82	3.07	3.31
50-54	Male	3.45	3.78	4.08
55-59	Male	4.38	4.81	5.20
60-64	Male	5.42	5.97	6.46
2-19	Female	1.34	1.46	1.57
20-24	Female	1.50	1.64	1.77
25-29	Female	1.42	1.55	1.67
30-34	Female	1.84	1.99	2.13
35-39	Female	2.03	2.20	2.35
40-44	Female	2.35	2.56	2.74
45-49	Female	2.71	2.96	3.18
50-54	Female	3.30	3.61	3.89
55-59	Female	3.93	4.31	4.65
60-64	Female	4.64	5.09	5.51
Per Child		0.98	1.07	1.15

\$500 Deductible

AGE	SEX	A	B	C
2-19	Male	2.24	2.46	2.66
20-24	Male	2.59	2.85	3.08
25-29	Male	2.38	2.62	2.83
30-34	Male	3.08	3.37	3.63
35-39	Male	3.59	3.94	4.25
40-44	Male	4.22	4.63	5.00
45-49	Male	5.26	5.79	6.27
50-54	Male	6.58	7.26	7.86
55-59	Male	8.47	9.35	10.15
60-64	Male	10.65	11.77	12.79
2-19	Female	2.50	2.75	2.97
20-24	Female	2.84	3.13	3.39
25-29	Female	2.65	2.91	3.15
30-34	Female	3.28	3.59	3.87
35-39	Female	3.65	4.00	4.32
40-44	Female	4.30	4.72	5.10
45-49	Female	5.05	5.56	6.01
50-54	Female	6.27	6.91	7.49
55-59	Female	7.54	8.32	9.03
60-64	Female	9.00	9.95	10.80
Per Child		1.83	2.01	2.18

\$1,000 Deductible

AGE	SEX	A	B	C
2-19	Male	1.67	1.83	1.98
20-24	Male	1.92	2.10	2.27
25-29	Male	1.77	1.94	2.09
30-34	Male	2.34	2.55	2.73
35-39	Male	2.69	2.93	3.15
40-44	Male	3.15	3.45	3.71
45-49	Male	3.87	4.25	4.58
50-54	Male	4.83	5.31	5.75
55-59	Male	6.16	6.79	7.36
60-64	Male	7.72	8.52	9.24
2-19	Female	1.84	2.01	2.17
20-24	Female	2.09	2.30	2.48
25-29	Female	1.95	2.14	2.31
30-34	Female	2.48	2.70	2.90
35-39	Female	2.75	3.00	3.22
40-44	Female	3.21	3.51	3.78
45-49	Female	3.73	4.09	4.41
50-54	Female	4.60	5.06	5.47
55-59	Female	5.50	6.06	6.56
60-64	Female	6.53	7.21	7.81
Per Child		1.34	1.47	1.59

\$250 Deductible

AGE	SEX	A	B	C
2-19	Male	3.45	3.80	4.12
20-24	Male	3.98	4.39	4.77
25-29	Male	3.67	4.05	4.39
30-34	Male	4.64	5.09	5.51
35-39	Male	5.45	6.00	6.49
40-44	Male	6.48	7.14	7.74
45-49	Male	8.10	8.94	9.70
50-54	Male	10.24	11.32	12.30
55-59	Male	13.24	14.66	15.93
60-64	Male	16.74	18.54	20.17
2-19	Female	3.84	4.24	4.60
20-24	Female	4.40	4.86	5.27
25-29	Female	4.08	4.51	4.89
30-34	Female	4.96	5.45	5.90
35-39	Female	5.56	6.12	6.63
40-44	Female	6.63	7.31	7.92
45-49	Female	7.77	8.58	9.31
50-54	Female	9.74	10.77	11.69
55-59	Female	11.76	13.01	14.14
60-64	Female	14.11	15.62	16.98
Per Child		2.82	3.12	3.38

These rates and zip areas apply to new coverage effective dates 1/1/08 through 6/30/08 for the 80% Coinsurance Option. Please call your agent or check online at www.hpa-inc.com for the rates effective 7/1/08.

The \$5,000 deductible and 50% Coinsurance Option rates are available online. Standard Security Life Insurance Company reserves the right to decline applications received using outdated rates and zip code areas.

*The daily rates listed include the following Communicating for America (CA) STM Enhancement Series fees: \$.17 cents per dependent child; \$.25 cents per person in age bands 2-29; and \$.50 cents per person in age bands 30-64.

*The monthly rates listed include the following Communicating for America (CA) STM Enhancement Series fees: \$5 per dependent child; \$7.50 per person in age bands 2-29; and \$15 per person in age bands 30-64.

Communicating for America (CA) STM Enhancement Series is not an insurance benefit, nor is it affiliated with Standard Security Life Ins. Co. of New York or a part of the STM insurance plan.

** Note: You pay for a maximum of up to three dependent children, regardless of the number eligible children to be insured. Please list all of your eligible dependent children to be insured on the application for insurance.