

State Zip Code Area Classifications effective 1/1/08

Rates contained in this document are good for all states listed in the zip area chart.
Refer to applicable state specific application and/or rate chart for CO, DE, KS, MN, MT and NV.

Secure STM

Rates for Effective Dates
January 1, 2008 - June 30, 2008
Underwritten by Standard Security Life Insurance Company of New York



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 10 zip area letters. Only use the rates located in the column titled with the applicants area letter. Use the Standard Security Life Ins. Co. of New York Generic STM Application form SSL-STM-0506-APP, unless otherwise indicated below to use a state specific application. Contact your agent or HPA for the application form or to verify current plan approvals.

Zip Code	Area	Zip Code	Area
Alaska		Illinois	
995-999	C	612-614, 619, 623, 626, 629	AA
Alabama		607, 610-611, 617, 624-625, 628	A
357-358, 360-363, 368	B	615	B
364-367, 369	D	616, 618, 620, 627	C
354-356, 359	E	608-609, 621-622	D
350-352	G	602-603	E
Arkansas		600-601, 604-606	F
716-729	A	Indiana (Use IN application.)	
Arizona		(12 Month STM Option not available.)	
850-865	AA	467-469, 472-479	AA
California (Use CA application.)		460-462, 465-466, 470	A
(12 Month STM Option not available.)		471	B
933	C	463-464	C
932, 936-938	D	Iowa	
922-924, 930, 952-953, 959	E	504-505, 508-516, 521, 525-528	A
925, 931, 934, 939, 946, 948, 954	F	500-503, 506-507, 520, 522-524	B
921, 928, 940, 942-943, 945, 947	G	Kentucky (Use KY application.)	
950-951, 957, 960-961	G	403-410, 412-427	C
903, 905, 907-908, 912, 915, 917-920	H	400-402, 411	D
926-927, 941, 949, 955-956, 958	H	Louisiana (Use LA application.)	
962-966	H	(12 Month STM Option not available.)	
900-902, 904, 906, 909-911, 913-914	I	703, 705-714	F
916, 935, 944	I	700-701, 704	G
Connecticut (Use CT application.)		Maine (Use Maine application.)	
(12 Month STM Option not available.)		039-049	D
060-069	A	Maryland (Use Maryland application.)	
District of Columbia		(12 Month STM Option not available.)	
200, 202-205	F	206-212, 214, 216-217	F
Florida (Use FL application.)		213, 218-219	C
323	B	215	B
324, 340-344, 348	C	Michigan	
321, 325, 327-329, 338, 347	D	(12 Month STM Option not available.)	
326, 339	E	488-489, 493-499	A
320, 322, 335-337, 346, 349	F	480-487, 490-492	B
333-334	G	Missouri	
330-332	H	630-639, 644-648, 650-658	AA
Georgia		640-641, 649	A
304-305, 315-319	A		
300-303, 306-314, 398-399	B		
Hawaii			
967-968	C		
Idaho (Use ID application.)			
836-837	A		
832-835, 838	B		

Zip Code	Area	Zip Code	Area
Mississippi (Use MS application.)		South Carolina	
387-397	D	290-292, 295-297, 299	C
386	E	293-294, 298	D
Nebraska		South Dakota (Use SD application.)	
683-693	AA	570-577	B
680-681	A	Tennessee	
New Hampshire (Use NH application.)		376, 383	A
(12 Month STM Option not available.)		370-372, 377-382, 384-385	B
038	B	373-374	C
030-037	C	Texas (Use TX application.)	
New Mexico		733, 758-759, 764-769, 779, 786-790, 792-793, 795, 797-798	F
875-880	B	754-757, 763, 771, 778, 780-783, 785, 791, 796, 799	G
870-874, 881-884	C	761-762, 772, 784, 794	H
North Carolina (Use NC application.)		750-753, 760, 770, 773-777	I
271-278, 280, 282-283, 285-286, 288-289	C	Utah	
270, 279, 281, 284, 287	D	845-847	A
North Dakota (Use ND application.)		840-844	B
580-581	A	Virginia	
582-588	B	229, 240-245	B
Ohio		201, 228, 233-237, 239, 246	C
430-458	AA	220-227, 230-232, 238	F
Oklahoma		West Virginia	
735, 740-741, 749	A	261-267	B
734, 736-739, 743-748	B	247-249, 252, 255-259, 268	C
730-731	C	260	D
Oregon		250-251, 253-254	E
973-976, 978-979	A	Wisconsin	
970-972, 977	B	541	A
Pennsylvania		533, 535-536, 538-539, 542-543, 545-549	B
173-176	AA	530, 534, 537, 544	C
151-152, 166, 168, 183, 195-196	B	531, 540	D
157-158, 162-163, 167, 169, 172	C	532	E
177-179, 188	C	Wyoming	
161, 164-165, 170-171, 180-182	D	(12 Month STM Option not available.)	
150, 153-156, 159-160, 184-187, 189-194	E	820-831	C
Rhode Island			
028-029	C		

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 visit 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 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.

Secure STM Rates/zips eff. 1/1/08 - 6/30/08 rev. 11-6-07

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

Secure STM Rates/zips eff. 1/1/08 - 6/30/08 rev. 11-6-07



Secure STM Monthly Rates for 1 to 12 Months*
 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	AA	A	B	C	D	E	F	G	H	I
2-19	Male	54.99	60.93	66.87	72.21	75.18	79.33	82.89	87.64	92.99	100.11
20-24	Male	63.34	70.31	77.29	83.58	87.07	91.95	96.14	101.72	108.00	116.38
25-29	Male	58.20	64.54	70.88	76.58	79.75	84.19	87.99	93.06	98.76	106.37
30-34	Male	77.25	85.03	92.82	99.82	103.71	109.16	113.83	120.05	127.06	136.39
35-39	Male	87.52	96.59	105.65	113.81	118.34	124.69	130.13	137.38	145.54	156.42
40-44	Male	102.92	113.91	124.91	134.80	140.29	147.99	154.58	163.37	173.26	186.45
45-49	Male	127.95	142.07	156.19	168.90	175.96	185.84	194.31	205.61	218.32	235.26
50-54	Male	159.40	177.45	195.50	211.75	220.77	233.41	244.24	258.68	274.92	296.58
55-59	Male	203.04	226.55	250.05	271.21	282.96	299.41	313.52	332.32	353.48	381.68
60-64	Male	255.67	285.75	315.84	342.91	357.95	379.01	397.06	421.13	448.20	484.30
2-19	Female	60.77	67.43	74.09	80.08	83.41	88.07	92.06	97.39	103.38	111.37
20-24	Female	68.47	76.09	83.71	90.57	94.38	99.72	104.29	110.39	117.25	126.39
25-29	Female	63.98	71.04	78.10	84.45	87.98	92.92	97.16	102.80	109.16	117.63
30-34	Female	80.46	88.64	96.83	104.19	108.28	114.01	118.92	125.47	132.83	142.65
35-39	Female	90.73	100.20	109.66	118.18	122.92	129.54	135.22	142.80	151.31	162.67
40-44	Female	104.85	116.08	127.31	137.42	143.04	150.90	157.64	166.62	176.73	190.21
45-49	Female	122.82	136.30	149.77	161.90	168.64	178.08	186.16	196.95	209.08	225.25
50-54	Female	151.70	168.79	185.87	201.25	209.80	221.76	232.01	245.68	261.06	281.56
55-59	Female	181.86	202.72	223.58	242.35	252.78	267.38	279.90	296.58	315.35	340.38
60-64	Female	216.52	241.71	266.90	289.57	302.17	319.80	334.91	355.07	377.74	407.96
Per Child		44.15	49.04	53.94	58.34	60.79	64.21	67.15	71.06	75.47	81.34

\$1,000 Deductible

AGE	SEX	AA	A	B	C	D	E	F	G	H	I
2-19	Male	86.44	96.31	106.17	115.05	119.99	126.90	132.82	140.71	149.59	161.43
20-24	Male	99.92	111.47	123.02	133.42	139.19	147.28	154.21	163.45	173.85	187.71
25-29	Male	91.57	102.08	112.59	122.05	127.31	134.66	140.97	149.37	158.83	171.44
30-34	Male	117.04	129.80	142.55	154.03	160.41	169.34	176.99	187.20	198.68	213.99
35-39	Male	136.30	151.46	166.62	180.27	187.85	198.46	207.56	219.69	233.33	251.53
40-44	Male	161.97	180.34	198.71	215.24	224.43	237.29	248.31	263.01	279.54	301.59
45-49	Male	201.76	225.10	248.45	269.46	281.13	297.47	311.48	330.16	351.17	379.18
50-54	Male	255.03	285.03	315.03	342.04	357.04	378.04	396.04	420.05	447.05	483.05
55-59	Male	328.83	368.06	407.29	442.60	462.21	489.67	513.21	544.59	579.90	626.97
60-64	Male	414.83	464.81	514.79	559.77	584.76	619.75	649.73	689.72	734.70	794.67
2-19	Female	95.42	106.41	117.41	127.30	132.79	140.49	147.08	155.87	165.76	178.95
20-24	Female	109.54	122.30	135.05	146.53	152.91	161.84	169.49	179.70	191.18	206.49
25-29	Female	101.84	113.64	125.43	136.04	141.94	150.19	157.27	166.70	177.32	191.47
30-34	Female	124.75	138.46	152.18	164.53	171.39	180.99	189.22	200.19	212.54	229.00
35-39	Female	139.51	155.07	170.63	184.64	192.42	203.32	212.65	225.10	239.11	257.79
40-44	Female	165.18	183.95	202.72	219.62	229.00	242.14	253.41	268.42	285.32	307.85
45-49	Female	194.06	216.44	238.82	258.97	270.16	285.82	299.25	317.16	337.30	364.16
50-54	Female	242.19	270.59	298.99	324.55	338.75	358.63	375.67	398.39	423.94	458.02
55-59	Female	292.25	326.91	361.56	392.75	410.08	434.34	455.14	482.86	514.05	555.64
60-64	Female	349.37	391.17	432.96	470.58	491.48	520.73	545.81	579.25	616.87	667.02
Per Child		69.82	77.92	86.03	93.32	97.37	103.04	107.90	114.38	121.68	131.40

\$2,500 Deductible

AGE	SEX	AA	A	B	C	D	E	F	G	H	I
2-19	Male	63.34	70.31	77.29	83.58	87.07	91.95	96.14	101.72	108.00	116.38
20-24	Male	73.60	81.87	90.13	97.57	101.70	107.48	112.44	119.05	126.49	136.40
25-29	Male	67.19	74.65	82.11	88.82	92.55	97.77	102.25	108.22	114.93	123.89
30-34	Male	87.52	96.59	105.65	113.81	118.34	124.69	130.13	137.38	145.54	156.42
35-39	Male	101.64	112.47	123.30	133.05	138.46	146.04	152.54	161.21	170.95	183.95
40-44	Male	118.97	131.97	144.96	156.66	163.16	172.25	180.05	190.45	202.14	217.74
45-49	Male	148.49	165.18	181.86	196.88	205.22	216.91	226.92	240.27	255.28	275.31
50-54	Male	185.07	206.33	227.59	246.72	257.35	272.24	284.99	302.00	321.13	346.64
55-59	Male	238.34	266.26	294.18	319.30	333.26	352.80	369.55	391.89	417.01	450.51
60-64	Male	298.67	334.13	369.59	401.50	419.23	444.05	465.32	493.69	525.60	568.15
2-19	Female	70.39	78.26	86.12	93.19	97.13	102.63	107.35	113.64	120.71	130.14
20-24	Female	79.38	88.36	97.35	105.44	109.93	116.22	121.61	128.80	136.88	147.67
25-29	Female	74.89	83.31	91.73	99.32	103.53	109.42	114.48	121.22	128.80	138.91
30-34	Female	92.66	102.36	112.07	120.81	125.66	132.45	138.28	146.04	154.78	166.43
35-39	Female	102.92	113.91	124.91	134.80	140.29	147.99	154.58	163.37	173.26	186.45
40-44	Female	121.54	134.85	148.17	160.16	166.81	176.14	184.13	194.78	206.77	222.75
45-49	Female	142.72	158.68	174.64	189.01	196.99	208.17	217.75	230.52	244.89	264.04
50-54	Female	176.73	196.95	217.16	235.36	245.46	259.62	271.75	287.92	306.11	330.37
55-59	Female	212.67	237.38	262.09	284.32	296.68	313.98	328.80	348.57	370.81	400.46
60-64	Female	253.10	282.86	312.63	339.41	354.30	375.13	392.99	416.80	443.58	479.30
Per Child		51.85	57.71	63.56	68.83	71.76	75.86	79.37	84.06	89.33	96.36

\$500 Deductible

AGE	SEX	AA	A	B	C	D	E	F	G	H	I
2-19	Male	117.89	131.69	145.48	157.90	164.80	174.46	182.74	193.78	206.20	222.75
20-24	Male	137.14	153.35	169.55	184.14	192.24	203.58	213.30	226.27	240.85	260.30
25-29	Male	125.59	140.35	155.11	168.40	175.78	186.11	194.97	206.77	220.06	237.77
30-34	Male	158.12	176.01	193.90	210.00	218.94	231.47	242.20	256.51	272.61	294.08
35-39	Male	186.36	207.78	229.20	248.47	259.18	274.18	287.03	304.16	323.44	349.14
40-44	Male	221.01	246.76	272.52	295.69	308.57	326.59	342.05	362.65	385.82	416.72
45-49	Male	278.77	311.74	344.72	374.39	390.88	413.96	433.74	460.12	489.79	529.36
50-54	Male	351.94	394.05	436.17	474.08	495.13	524.62	549.89	583.58	621.49	672.03
55-59	Male	456.55	511.74	566.93	616.61	644.21	682.84	715.96	760.11	809.79	876.02
60-64	Male	577.20	647.48	717.75	781.00	816.14	865.33	907.50	963.72	1026.97	1111.30
2-19	Female	132.01	147.57	163.13	177.14	184.92	195.82	205.15	217.60	231.61	250.29
20-24	Female	151.26	169.23	187.20	203.37	212.36	224.94	235.72	250.09	266.27	287.83
25-29	Female	140.35	156.96	173.56	188.51	196.81	208.43	218.40	231.68	246.63	266.56
30-34	Female	169.03	188.28	207.54	224.86	234.49	247.97	259.52	274.92	292.25	315.35
35-39	Female	189.57	211.39	233.21	252.85	263.76	279.03	292.12	309.58	329.22	355.40
40-44	Female	225.51	251.82	278.13	301.81	314.97	333.39	349.18	370.23	393.91	425.49
45-49	Female	267.22	298.75	330.28	358.65	374.42	396.48	415.40	440.62	469.00	506.83
50-54	Female	334.61	374.56	414.51	450.47	470.44	498.41	522.38	554.34	590.30	638.24
55-59	Female	405.20	453.98	502.76	546.65	571.04	605.18	634.45	673.47	717.37	775.90
60-64	Female	486.07	544.95	603.84	656.83	686.27	727.49	762.82	809.93	862.93	933.59
Per Child		96.78	108.25	119.72	130.04	135.78	143.81	150.69	159.87	170.20	183.96

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 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 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*

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	AA	A	B	C	D	E	F	G	H	I
2-19	Male	43.93	48.48	53.03	57.13	59.41	62.60	65.33	68.97	73.07	78.53
20-24	Male	50.63	56.02	61.41	66.26	68.96	72.73	75.96	80.28	85.13	91.60
25-29	Male	46.44	51.31	56.17	60.56	62.99	66.40	69.32	73.21	77.59	83.43
30-34	Male	62.31	68.23	74.14	79.46	82.42	86.56	90.11	94.84	100.16	107.26
35-39	Male	71.53	78.59	85.66	92.02	95.55	100.49	104.73	110.39	116.75	125.22
40-44	Male	82.83	91.31	99.79	107.42	111.66	117.59	122.68	129.46	137.09	147.27
45-49	Male	102.09	112.98	123.86	133.66	139.10	146.72	153.26	161.97	171.76	184.83
50-54	Male	125.96	139.83	153.70	166.18	173.11	182.82	191.14	202.24	214.72	231.37
55-59	Male	160.71	178.92	197.14	213.53	222.64	235.38	246.31	260.88	277.28	299.13
60-64	Male	200.07	223.20	246.33	267.15	278.72	294.91	308.79	327.30	348.12	375.88
2-19	Female	48.53	53.66	58.79	63.41	65.97	69.56	72.64	76.74	81.36	87.51
20-24	Female	54.39	60.26	66.12	71.39	74.33	78.43	81.95	86.64	91.91	98.94
25-29	Female	51.46	56.96	62.45	67.40	70.15	74.00	77.29	81.69	86.64	93.23
30-34	Female	65.66	72.00	78.33	84.03	87.20	91.63	95.43	100.49	106.19	113.79
35-39	Female	72.36	79.53	86.70	93.16	96.74	101.76	106.06	111.80	118.25	126.86
40-44	Female	84.50	93.19	101.88	109.70	114.04	120.13	125.34	132.29	140.11	150.53
45-49	Female	98.32	108.74	119.15	128.53	133.73	141.02	147.27	155.61	164.98	177.48
50-54	Female	120.51	133.70	146.89	158.76	165.36	174.59	182.50	193.05	204.92	220.75
55-59	Female	143.96	160.08	176.20	190.71	198.77	210.05	219.73	232.62	247.13	266.47
60-64	Female	170.34	189.76	209.17	226.65	236.36	249.95	261.60	277.13	294.61	317.91
Per Child		35.57	39.39	43.21	46.65	48.56	51.23	53.52	56.58	60.02	64.60

\$500 Deductible

AGE	SEX	AA	A	B	C	D	E	F	G	H	I
2-19	Male	79.52	88.52	97.52	105.62	110.12	116.43	121.83	129.03	137.13	147.93
20-24	Male	92.08	102.65	113.22	122.74	128.02	135.42	141.77	150.23	159.74	172.43
25-29	Male	84.54	94.17	103.80	112.47	117.28	124.03	129.80	137.51	146.17	157.73
30-34	Male	108.37	120.04	131.71	142.22	148.05	156.22	163.23	172.56	183.07	197.07
35-39	Male	126.79	140.77	154.74	167.32	174.31	184.09	192.47	203.65	216.23	233.00
40-44	Male	149.40	166.20	183.00	198.13	206.53	218.29	228.37	241.81	256.93	277.09
45-49	Male	187.09	208.60	230.11	249.47	260.22	275.28	288.19	305.40	324.76	350.57
50-54	Male	234.82	262.30	289.77	314.50	328.24	347.48	363.96	385.95	410.68	443.65
55-59	Male	303.07	339.08	375.09	407.49	425.50	450.70	472.31	501.12	533.52	576.73
60-64	Male	381.78	427.63	473.48	514.74	537.67	569.76	597.27	633.95	675.21	730.23
2-19	Female	88.73	98.88	109.04	118.17	123.25	130.36	136.45	144.57	153.71	165.90
20-24	Female	101.29	113.01	124.74	135.29	141.15	149.36	156.39	165.77	176.32	190.39
25-29	Female	94.17	105.01	115.84	125.59	131.01	138.59	145.09	153.76	163.51	176.51
30-34	Female	115.49	128.05	140.61	151.92	158.20	166.99	174.53	184.58	195.88	210.95
35-39	Female	128.89	143.12	157.36	170.17	177.29	187.25	195.80	207.19	220.00	237.08
40-44	Female	152.33	169.50	186.67	202.12	210.70	222.72	233.02	246.75	262.20	282.80
45-49	Female	179.55	200.12	220.69	239.20	249.48	263.88	276.22	292.68	311.19	335.87
50-54	Female	223.51	249.58	275.64	299.10	312.13	330.38	346.02	366.87	390.33	421.60
55-59	Female	269.57	301.39	333.22	361.85	377.77	400.04	419.13	444.59	473.23	511.42
60-64	Female	322.33	360.74	399.16	433.74	452.94	479.83	502.88	533.62	568.19	614.29
Per Child		64.87	72.36	79.84	86.58	90.32	95.56	100.05	106.04	112.77	121.76

\$1,000 Deductible

AGE	SEX	AA	A	B	C	D	E	F	G	H	I
2-19	Male	59.00	65.44	71.88	77.67	80.89	85.39	89.26	94.41	100.20	107.93
20-24	Male	67.79	75.33	82.87	89.65	93.42	98.69	103.22	109.25	116.03	125.07
25-29	Male	62.35	69.21	76.06	82.23	85.66	90.46	94.57	100.06	106.23	114.46
30-34	Male	81.57	89.90	98.22	105.71	109.87	115.69	120.69	127.34	134.83	144.82
35-39	Male	94.14	104.03	113.92	122.82	127.77	134.69	140.63	148.54	157.44	169.31
40-44	Male	110.88	122.87	134.85	145.64	151.63	160.02	167.21	176.80	187.59	201.97
45-49	Male	136.84	152.07	167.30	181.01	188.63	199.29	208.43	220.61	234.32	252.59
50-54	Male	171.60	191.17	210.74	228.36	238.15	251.85	263.60	279.25	296.87	320.36
55-59	Male	219.75	245.34	270.93	293.97	306.76	324.68	340.03	360.51	383.54	414.26
60-64	Male	275.85	308.46	341.07	370.41	386.71	409.54	429.10	455.19	484.53	523.66
2-19	Female	64.86	72.03	79.20	85.66	89.24	94.26	98.56	104.30	110.75	119.36
20-24	Female	74.07	82.40	90.72	98.21	102.37	108.19	113.19	119.84	127.33	137.32
25-29	Female	69.05	76.74	84.44	91.36	95.21	100.59	105.21	111.36	118.29	127.52
30-34	Female	86.60	95.55	104.50	112.55	117.03	123.29	128.66	135.82	143.88	154.62
35-39	Female	96.23	106.38	116.54	125.67	130.75	137.86	143.95	152.07	161.21	173.40
40-44	Female	112.98	125.22	137.47	148.49	154.62	163.19	170.54	180.34	191.36	206.05
45-49	Female	131.82	146.42	161.02	174.17	181.47	191.69	200.45	212.13	225.27	242.80
50-54	Female	163.22	181.75	200.28	216.95	226.22	239.18	250.30	265.12	281.80	304.03
55-59	Female	195.88	218.49	241.10	261.45	272.75	288.58	302.15	320.24	340.58	367.72
60-64	Female	233.14	260.41	287.68	312.22	325.86	344.94	361.30	383.12	407.66	440.38
Per Child		47.29	52.58	57.86	62.62	65.26	68.96	72.13	76.36	81.12	87.46

\$250 Deductible

AGE	SEX	AA	A	B	C	D	E	F	G	H	I
2-19	Male	123.06	137.51	151.95	164.95	172.18	182.29	190.96	202.51	215.51	232.85
20-24	Male	142.32	159.18	176.03	191.20	199.62	211.42	221.53	235.01	250.18	270.40
25-29	Male	131.02	146.46	161.90	175.79	183.51	194.32	203.58	215.94	229.83	248.36
30-34	Male	164.48	183.16	201.85	218.66	228.01	241.08	252.30	267.24	284.06	306.48
35-39	Male	193.79	216.13	238.48	258.60	269.77	285.41	298.82	316.70	336.82	363.63
40-44	Male	231.05	258.06	285.06	309.37	322.87	341.78	357.98	379.59	403.89	436.30
45-49	Male	289.67	324.00	358.34	389.24	406.40	430.44	451.04	478.51	509.41	550.61
50-54	Male	367.13	411.15	455.16	494.78	516.79	547.60	574.01	609.22	648.83	701.65
55-59	Male	475.57	533.15	590.72	642.53	671.32	711.62	746.16	792.22	844.03	913.12
60-64	Male	602.02	675.40	748.78	814.82	851.51	902.87	946.90	1005.60	1071.64	1159.69
2-19	Female	137.30	153.52	169.75	184.35	192.46	203.82	213.55	226.53	241.14	260.61
20-24	Female	157.40	176.13	194.87	211.73	221.10	234.22	245.46	260.45	277.31	299.80
25-29	Female	146.09	163.41	180.74	196.33	204.99	217.12	227.51	241.37	256.96	277.75
30-34	Female	176.20	196.35	216.50	234.64	244.71	258.82	270.91	287.03	305.16	329.34
35-39	Female	197.97	220.85	243.72	264.30	275.74	291.75	305.47	323.77	344.35	371.80
40-44	Female	236.49	264.18	291.87	316.79	330.63	350.01	366.62	388.77	413.69	446.91
45-49	Female	277.95	310.81	343.68	373.26	389.70	412.71	432.43	458.72	488.30	527.74
50-54	Female	349.13	390.89	432.66	470.25	491.13	520.37	545.42	578.84	616.43	666.55
55-59	Female	421.98	472.85	523.73	569.51	594.95	630.56	661.08	701.78	747.56	808.61
60-64	Female	506.98	568.47	629.97	685.32	716.07	759.12	796.01	845.21	900.56	974.36
Per Child		100.88	112.87	124.85	135.64	141.63	150.02	157.21	166.80	177.59	191.97

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 on line 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 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.



Secure STM Single Pay Daily Rates*
 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	AA	A	B	C	D	E	F	G	H	I
2-19	Male	1.17	1.28	1.39	1.50	1.55	1.63	1.70	1.80	1.90	2.04
20-24	Male	1.33	1.47	1.61	1.73	1.79	1.89	1.97	2.08	2.20	2.36
25-29	Male	1.23	1.35	1.47	1.58	1.64	1.73	1.80	1.90	2.01	2.16
30-34	Male	1.69	1.84	1.99	2.12	2.19	2.30	2.39	2.51	2.64	2.82
35-39	Male	1.92	2.10	2.28	2.44	2.52	2.65	2.76	2.90	3.06	3.27
40-44	Male	2.21	2.42	2.63	2.82	2.93	3.08	3.21	3.38	3.57	3.82
45-49	Male	2.69	2.96	3.24	3.48	3.62	3.81	3.98	4.19	4.44	4.77
50-54	Male	3.29	3.64	3.99	4.30	4.47	4.72	4.93	5.21	5.52	5.94
55-59	Male	4.16	4.62	5.08	5.49	5.72	6.04	6.31	6.68	7.09	7.64
60-64	Male	5.15	5.73	6.31	6.84	7.13	7.54	7.88	8.35	8.87	9.57
2-19	Female	1.28	1.41	1.54	1.66	1.72	1.81	1.89	1.99	2.11	2.26
20-24	Female	1.43	1.58	1.72	1.86	1.93	2.03	2.12	2.24	2.37	2.55
25-29	Female	1.36	1.49	1.63	1.76	1.82	1.92	2.00	2.11	2.24	2.40
30-34	Female	1.77	1.93	2.09	2.24	2.31	2.43	2.52	2.65	2.79	2.98
35-39	Female	1.94	2.12	2.30	2.46	2.55	2.68	2.79	2.93	3.10	3.31
40-44	Female	2.25	2.47	2.68	2.88	2.99	3.14	3.27	3.45	3.64	3.91
45-49	Female	2.59	2.86	3.12	3.35	3.48	3.67	3.82	4.03	4.27	4.58
50-54	Female	3.15	3.48	3.82	4.11	4.28	4.51	4.71	4.98	5.27	5.67
55-59	Female	3.74	4.15	4.55	4.92	5.12	5.40	5.65	5.97	6.33	6.82
60-64	Female	4.40	4.89	5.38	5.82	6.06	6.41	6.70	7.09	7.53	8.11
Per Child		0.94	1.03	1.13	1.22	1.26	1.33	1.39	1.47	1.55	1.67

\$500 Deductible

AGE	SEX	AA	A	B	C	D	E	F	G	H	I
2-19	Male	2.06	2.29	2.51	2.72	2.83	2.99	3.12	3.30	3.51	3.78
20-24	Male	2.38	2.64	2.91	3.15	3.28	3.47	3.63	3.84	4.08	4.40
25-29	Male	2.19	2.43	2.67	2.89	3.01	3.18	3.32	3.52	3.74	4.03
30-34	Male	2.85	3.14	3.43	3.70	3.84	4.05	4.23	4.46	4.72	5.08
35-39	Male	3.31	3.66	4.01	4.33	4.50	4.75	4.96	5.24	5.56	5.98
40-44	Male	3.88	4.30	4.72	5.10	5.31	5.61	5.86	6.20	6.58	7.09
45-49	Male	4.83	5.37	5.91	6.39	6.66	7.04	7.37	7.80	8.29	8.94
50-54	Male	6.03	6.72	7.41	8.03	8.37	8.86	9.27	9.82	10.45	11.27
55-59	Male	7.74	8.65	9.55	10.37	10.82	11.45	12.00	12.72	13.53	14.62
60-64	Male	9.72	10.87	12.02	13.06	13.64	14.44	15.14	16.06	17.10	18.48
2-19	Female	2.29	2.55	2.80	3.03	3.16	3.34	3.49	3.70	3.93	4.23
20-24	Female	2.61	2.90	3.20	3.46	3.61	3.82	3.99	4.23	4.49	4.85
25-29	Female	2.43	2.70	2.97	3.22	3.35	3.55	3.71	3.93	4.17	4.50
30-34	Female	3.03	3.34	3.66	3.94	4.10	4.32	4.51	4.76	5.05	5.43
35-39	Female	3.36	3.72	4.08	4.40	4.58	4.83	5.04	5.33	5.65	6.08
40-44	Female	3.95	4.38	4.82	5.20	5.42	5.72	5.98	6.33	6.71	7.23
45-49	Female	4.64	5.15	5.67	6.14	6.39	6.76	7.07	7.48	7.95	8.57
50-54	Female	5.74	6.40	7.05	7.64	7.97	8.43	8.82	9.34	9.93	10.72
55-59	Female	6.90	7.70	8.50	9.22	9.62	10.18	10.66	11.30	12.02	12.98
60-64	Female	8.23	9.19	10.16	11.03	11.51	12.18	12.76	13.54	14.41	15.56
Per Child		1.68	1.86	2.05	2.22	2.31	2.45	2.56	2.71	2.88	3.10

\$1,000 Deductible

AGE	SEX	AA	A	B	C	D	E	F	G	H	I
2-19	Male	1.54	1.71	1.87	2.01	2.09	2.21	2.31	2.43	2.58	2.77
20-24	Male	1.77	1.96	2.14	2.31	2.41	2.54	2.66	2.81	2.98	3.21
25-29	Male	1.63	1.80	1.97	2.13	2.21	2.34	2.44	2.58	2.73	2.94
30-34	Male	2.17	2.38	2.59	2.78	2.88	3.03	3.16	3.32	3.51	3.76
35-39	Male	2.49	2.74	2.99	3.21	3.33	3.51	3.66	3.86	4.08	4.38
40-44	Male	2.91	3.21	3.51	3.78	3.93	4.15	4.33	4.57	4.84	5.20
45-49	Male	3.56	3.95	4.33	4.67	4.86	5.13	5.36	5.67	6.01	6.47
50-54	Male	4.44	4.93	5.42	5.86	6.11	6.45	6.75	7.14	7.59	8.18
55-59	Male	5.65	6.29	6.93	7.51	7.83	8.28	8.67	9.18	9.76	10.54
60-64	Male	7.06	7.88	8.70	9.43	9.84	10.42	10.91	11.56	12.30	13.29
2-19	Female	1.69	1.87	2.05	2.21	2.30	2.43	2.54	2.68	2.85	3.06
20-24	Female	1.92	2.13	2.34	2.53	2.63	2.78	2.91	3.07	3.26	3.51
25-29	Female	1.80	1.99	2.18	2.36	2.45	2.59	2.71	2.86	3.03	3.27
30-34	Female	2.30	2.52	2.75	2.95	3.06	3.22	3.36	3.54	3.74	4.01
35-39	Female	2.54	2.80	3.05	3.28	3.41	3.59	3.74	3.95	4.18	4.48
40-44	Female	2.96	3.27	3.58	3.86	4.01	4.22	4.41	4.66	4.93	5.30
45-49	Female	3.44	3.80	4.17	4.50	4.68	4.94	5.16	5.46	5.79	6.23
50-54	Female	4.23	4.69	5.16	5.58	5.81	6.14	6.41	6.79	7.21	7.77
55-59	Female	5.05	5.62	6.18	6.69	6.98	7.38	7.72	8.17	8.68	9.37
60-64	Female	5.98	6.67	7.35	7.97	8.31	8.79	9.20	9.75	10.37	11.19
Per Child		1.23	1.37	1.50	1.62	1.68	1.78	1.86	1.96	2.08	2.24

\$250 Deductible

AGE	SEX	AA	A	B	C	D	E	F	G	H	I
2-19	Male	3.15	3.52	3.88	4.21	4.39	4.64	4.86	5.15	5.48	5.91
20-24	Male	3.64	4.06	4.49	4.87	5.08	5.38	5.63	5.97	6.35	6.86
25-29	Male	3.35	3.74	4.13	4.48	4.67	4.95	5.18	5.49	5.84	6.30
30-34	Male	4.26	4.73	5.20	5.62	5.85	6.18	6.46	6.84	7.26	7.83
35-39	Male	4.99	5.56	6.12	6.62	6.90	7.30	7.63	8.08	8.59	9.26
40-44	Male	5.93	6.61	7.29	7.90	8.24	8.71	9.12	9.66	10.28	11.09
45-49	Male	7.40	8.27	9.13	9.91	10.34	10.94	11.46	12.15	12.93	13.96
50-54	Male	9.35	10.46	11.56	12.56	13.11	13.89	14.55	15.44	16.43	17.76
55-59	Male	12.08	13.52	14.97	16.27	17.00	18.01	18.88	20.04	21.34	23.08
60-64	Male	15.26	17.10	18.94	20.60	21.53	22.82	23.92	25.40	27.06	29.27
2-19	Female	3.51	3.92	4.33	4.70	4.90	5.18	5.43	5.76	6.12	6.61
20-24	Female	4.02	4.49	4.96	5.38	5.62	5.95	6.23	6.61	7.03	7.60
25-29	Female	3.73	4.17	4.60	5.00	5.21	5.52	5.78	6.13	6.52	7.04
30-34	Female	4.55	5.06	5.57	6.02	6.27	6.63	6.93	7.34	7.79	8.40
35-39	Female	5.10	5.67	6.25	6.77	7.05	7.46	7.80	8.26	8.78	9.47
40-44	Female	6.07	6.76	7.46	8.09	8.43	8.92	9.34	9.90	10.52	11.36
45-49	Female	7.11	7.94	8.76	9.51	9.92	10.50	10.99	11.65	12.40	13.39
50-54	Female	8.90	9.95	11.00	11.94	12.47	13.20	13.83	14.67	15.62	16.88
55-59	Female	10.73	12.01	13.29	14.44	15.08	15.97	16.74	17.76	18.91	20.45
60-64	Female	12.87	14.41	15.96	17.35	18.12	19.20	20.13	21.37	22.76	24.61
Per Child		2.58	2.88	3.18	3.45	3.60	3.82	4.00	4.24	4.51	4.87

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 on line 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.

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.