

**APPENDIX E. PRESUMPTIVELY REASONABLE
ACCIDENT AND HEALTH RATES
CREDIT ACCIDENT AND HEALTH INSURANCE**
Single Premium Rate Per \$100 Of
Initial Insured Indebtedness
BENEFITS PAYABLE AFTER

Original Number Of Equal Monthly Installments	7th Day Of Disability		14th Day Of Disability		30th Day Of Disability	
	Retro To The First Day	Non-Retro To The First Day	Retro To The First Day	Non-Retro To The First Day	Retro To The First Day	Non-Retro To The First Day
1	0.42	0.25	0.30	0.17	0.22	0.04
2	0.84	0.50	0.60	0.34	0.44	0.08
3	1.26	0.75	0.90	0.51	0.66	0.16
4	1.67	1.00	1.20	0.68	0.88	0.24
5	2.09	1.25	1.50	0.85	1.10	0.33
6	2.50	1.50	1.80	1.00	1.30	0.40
7	2.58	1.58	1.87	1.07	1.37	0.47
8	2.67	1.67	1.93	1.13	1.43	0.53
9	2.75	1.75	2.00	1.20	1.50	0.60
10	2.84	1.84	2.06	1.26	1.56	0.67
11	2.92	1.92	2.13	1.33	1.63	0.73
12	3.00	2.00	2.20	1.40	1.70	0.80
13	3.08	2.08	2.27	1.47	1.77	0.87
14	3.16	2.17	2.33	1.53	1.83	0.93
15	3.25	2.25	2.40	1.60	1.90	1.00
16	3.33	2.34	2.47	1.67	1.97	1.07
17	3.42	2.42	2.53	1.73	2.03	1.13
18	3.50	2.50	2.60	1.80	2.10	1.20
19	3.58	2.58	2.67	1.87	2.17	1.27
20	3.67	2.67	2.73	1.93	2.23	1.33
21	3.75	2.75	2.80	2.00	2.30	1.40
22	3.84	2.84	2.87	2.07	2.37	1.47
23	3.92	2.92	2.93	2.13	2.43	1.53
24	4.00	3.00	3.00	2.20	2.50	1.60
25	4.08	3.08	3.07	2.27	2.57	1.67
26	4.16	3.17	3.13	2.33	2.63	1.73
27	4.25	3.25	3.20	2.40	2.70	1.80
28	4.33	3.34	3.27	2.47	2.77	1.87
29	4.42	3.42	3.33	2.53	2.83	1.93
30	4.50	3.50	3.40	2.60	2.90	2.00
31	4.58	3.58	3.47	2.67	2.97	2.07
32	4.67	3.67	3.53	2.73	3.03	2.13
33	4.75	3.75	3.60	2.80	3.10	2.20
34	4.83	3.84	3.67	2.87	3.17	2.27
35	4.92	3.92	3.73	2.93	3.23	2.33
36	5.00	4.00	3.80	3.00	3.30	2.40
37	5.08	4.08	3.87	3.04	3.34	2.44
38	5.17	4.17	3.93	3.08	3.38	2.48
39	5.25	4.25	4.00	3.12	3.42	2.52
40	5.33	4.34	4.06	3.17	3.47	2.57
41	5.42	4.42	4.13	3.21	3.51	2.61

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Original Number Of Equal Monthly Installments	7th Day Of Disability		14th Day Of Disability		30th Day Of Disability	
	Retro To The First Day	Non-Retro To The First Day	Retro To The First Day	Non-Retro To The First Day	Retro To The First Day	Non-Retro To The First Day
42	5.50	4.50	4.20	3.25	3.55	2.65
43	5.58	4.58	4.27	3.29	3.59	2.69
44	5.67	4.67	4.33	3.33	3.63	2.73
45	5.75	4.75	4.40	3.37	3.67	2.77
46	5.84	4.84	4.46	3.42	3.72	2.82
47	5.94	4.92	4.53	3.46	3.76	2.86
48	6.00	5.00	4.60	3.50	3.80	2.90
49	6.08	5.08	4.67	3.53	3.83	2.93
50	6.17	5.17	4.73	3.57	3.87	2.97
51	6.26	5.26	4.80	3.60	3.90	3.00
52	6.34	5.34	4.86	3.63	3.93	3.03
53	6.42	5.42	4.93	3.67	3.97	3.07
54	6.50	5.50	5.00	3.70	4.00	3.10
55	6.58	5.58	5.07	3.73	4.03	3.13
56	6.67	5.67	5.13	3.77	4.07	3.17
57	6.75	5.75	5.20	3.80	4.10	3.20
58	6.84	5.84	5.26	3.83	4.13	3.23
59	6.92	5.92	5.33	3.87	4.17	3.27
60	7.00	6.00	5.40	3.90	4.20	3.30
61	7.08	6.08	5.47	3.93	4.23	3.33
62	7.17	6.17	5.53	3.97	4.27	3.37
63	7.26	6.26	5.60	4.00	4.30	3.40
64	7.34	6.34	5.67	4.03	4.33	3.43
65	7.42	6.42	5.73	4.07	4.37	3.47
66	7.50	6.50	5.80	4.10	4.40	3.50
67	7.58	6.58	5.87	4.13	4.43	3.52
68	7.67	6.67	5.93	4.17	4.47	3.57
69	7.75	6.75	6.00	4.20	4.50	3.60
70	7.84	6.84	6.07	4.23	4.53	3.63
71	7.92	6.92	6.13	4.27	4.57	3.67
72	8.00	7.00	6.20	4.30	4.60	3.70
73	8.08	7.08	6.27	4.33	4.63	3.73
74	8.17	7.17	6.33	4.37	4.67	3.77
75	8.26	7.26	6.40	4.40	4.70	3.80
76	8.34	7.34	6.47	4.43	4.73	3.83
77	8.42	7.42	6.53	4.47	4.77	3.87
78	8.50	7.50	6.60	4.50	4.80	3.90
79	8.58	7.58	6.67	4.53	4.83	3.93
80	8.67	7.67	6.73	4.57	4.87	3.97
81	8.75	7.75	6.80	4.60	4.90	4.00
82	8.84	7.84	6.87	4.63	4.93	4.03
83	8.92	7.92	6.93	4.67	4.97	4.07
84	9.00	8.00	7.00	4.70	5.00	4.10
85	9.08	8.08	7.07	4.73	5.03	4.13
86	9.17	8.17	7.13	4.77	5.07	4.17

Original Number Of Equal Monthly Installments	7th Day Of Disability		14th Day Of Disability		30th Day Of Disability	
	Retro To The First Day	Non-Retro To The First Day	Retro To The First Day	Non-Retro To The First Day	Retro To The First Day	Non-Retro To The First Day
87	9.26	8.26	7.20	4.80	5.10	4.20
88	9.34	8.34	7.27	4.83	5.13	4.23
89	9.42	8.42	7.33	4.87	5.17	4.27
90	9.50	8.50	7.40	4.90	5.20	4.30
91	9.58	8.58	7.47	4.93	5.23	4.33
92	9.67	8.67	7.53	4.97	5.27	4.37
93	9.75	8.75	7.60	5.00	5.30	4.40
94	9.84	8.84	7.67	5.03	5.33	4.43
95	9.92	8.92	7.73	5.07	5.37	4.47
96	10.00	9.00	7.80	5.10	5.40	4.50
97	10.08	9.08	7.87	5.13	5.43	4.53
98	10.17	9.17	7.93	5.17	5.47	4.57
99	10.26	9.26	8.00	5.20	5.50	4.60
100	10.34	9.34	8.07	5.23	5.53	4.63
101	10.42	9.42	8.13	5.27	5.57	4.67
102	10.50	9.50	8.20	5.30	5.60	4.70
103	10.58	9.58	8.27	5.33	5.63	4.73
104	10.67	9.67	8.33	5.37	5.67	4.77
105	10.75	9.75	8.40	5.40	5.70	4.80
106	10.84	9.84	8.47	5.43	5.73	4.83
107	10.92	9.92	8.53	5.47	5.77	4.87
108	11.00	10.00	8.60	5.50	5.80	4.90
109	11.08	10.08	8.67	5.53	5.83	4.93
110	11.17	10.17	8.73	5.57	5.87	4.97
111	11.26	10.26	8.80	5.60	5.90	5.00
112	11.34	10.34	8.87	5.63	5.93	5.03
113	11.42	10.42	8.93	5.67	5.97	5.07
114	11.50	10.50	9.00	5.70	6.00	5.10
115	11.58	10.58	9.07	5.73	6.03	5.13
116	11.67	10.67	9.13	5.77	6.07	5.17
117	11.75	10.75	9.20	5.80	6.10	5.20
118	11.84	10.84	9.27	5.83	6.13	5.23
119	11.92	10.92	9.33	5.87	6.17	5.27
120	12.00	11.00	9.40	5.90	6.20	5.30
121	12.08	11.08	9.47	5.93	6.23	5.33
122	12.17	11.17	9.53	5.97	6.27	5.37
123	12.25	11.25	9.60	6.00	6.30	5.40
124	12.33	11.33	9.67	6.03	6.33	5.43
125	12.42	11.42	9.73	6.07	6.37	5.47
126	12.50	11.50	9.80	6.10	6.40	5.50
127	12.58	11.58	9.87	6.13	6.43	5.53
128	12.67	11.67	9.93	6.17	6.47	5.57
129	12.75	11.75	10.00	6.20	6.50	5.60
130	12.83	11.83	10.07	6.23	6.53	5.63
131	12.92	11.92	10.13	6.27	6.57	5.67

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Original Number Of Equal Monthly Installments	7th Day Of Disability		14th Day Of Disability		30th Day Of Disability	
	Retro To The First Day	Non-Retro To The First Day	Retro To The First Day	Non-Retro To The First Day	Retro To The First Day	Non-Retro To The First Day
132	13.00	12.00	10.20	6.30	6.60	5.70
133	13.08	12.08	10.27	6.33	6.63	5.73
134	13.17	12.17	10.33	6.37	6.67	5.77
135	13.25	12.25	10.40	6.40	6.70	5.80
136	13.33	12.33	10.47	6.43	6.73	5.83
137	13.42	12.42	10.53	6.47	6.77	5.87
138	13.50	12.50	10.60	6.50	6.80	5.90
139	13.58	12.58	10.67	6.53	6.83	5.93
140	13.67	12.67	10.73	6.57	6.87	5.97
141	13.75	12.75	10.80	6.60	6.90	6.00
142	13.83	12.83	10.87	6.63	6.93	6.03
143	13.92	12.92	10.93	6.67	6.97	6.07
144	14.00	13.00	11.00	6.70	7.00	6.10
145	14.08	13.08	11.07	6.73	7.03	6.13
146	14.17	13.17	11.13	6.77	7.07	6.17
147	14.25	13.25	11.20	6.80	7.10	6.20
148	14.33	13.33	11.27	6.83	7.13	6.23
149	14.42	13.42	11.33	6.87	7.17	6.27
150	14.50	13.50	11.40	6.90	7.20	6.30
151	14.58	13.58	11.47	6.93	7.23	6.33
152	14.67	13.67	11.53	6.97	7.27	6.37
153	14.75	13.75	11.60	7.00	7.30	6.40
154	14.83	13.83	11.67	7.03	7.33	6.43
155	14.92	13.92	11.73	7.07	7.37	6.47
156	15.00	14.00	11.80	7.10	7.40	6.50
157	15.08	14.08	11.87	7.13	7.43	6.53
158	15.17	14.17	11.93	7.17	7.47	6.57
159	15.25	14.25	12.00	7.20	7.50	6.60
160	15.33	14.33	12.07	7.23	7.53	6.63
161	15.42	14.42	12.13	7.27	7.57	6.67
162	15.50	14.50	12.20	7.30	7.60	6.70
163	15.58	14.58	12.27	7.33	7.63	6.73
164	15.67	14.67	12.33	7.37	7.67	6.77
165	15.75	14.75	12.40	7.40	7.70	6.80
166	15.83	14.83	12.47	7.43	7.73	6.83
167	15.92	14.92	12.53	7.47	7.77	6.87
168	16.00	15.00	12.60	7.50	7.80	6.90
169	16.08	15.08	12.67	7.53	7.83	6.93
170	16.17	15.17	12.73	7.57	7.87	6.97
171	16.25	15.25	12.80	7.60	7.90	7.00
172	16.33	15.33	12.87	7.63	7.93	7.03
173	16.42	15.42	12.93	7.67	7.97	7.07
174	16.50	15.50	13.00	7.70	8.00	7.10
175	16.58	15.58	13.07	7.73	8.03	7.13
176	16.67	15.67	13.13	7.77	8.07	7.17

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Original Number Of Equal Monthly Installments	7th Day Of Disability		14th Day Of Disability		30th Day Of Disability	
	Retro To The First Day	Non-Retro To The First Day	Retro To The First Day	Non-Retro To The First Day	Retro To The First Day	Non-Retro To The First Day
177	16.75	15.75	13.20	7.80	8.10	7.20
178	16.83	15.83	13.27	7.83	8.13	7.23
179	16.92	15.92	13.33	7.87	8.17	7.27
180	17.00	16.00	13.40	7.90	8.20	7.30

[Source: Added at 10 Ok Reg 3049, eff 10-1-93; Revoked and reenacted at 13 Ok Reg 135, eff 11-1-95 (emergency); Revoked and reenacted at 13 Ok Reg 2669, eff 7-1-96]