NEW YORK LIFE INSURANCE COMPANY - NAIC 66915

LTC Individual - Nursing Facility/Residential Care - Tax Qualified

POLICY FORM: INH-5000(CA)(0112)

1. Maximun	n Policy Be	nefit (MPB) =									
1Yr	2Yrs	3Yrs	4Yrs	5Yrs	6Yrs	7Yrs	Lifetime	Other			
NO	YES	YES	YES	YES	NO	YES	NO	YES			
MPB Company Notes:	_365_(Numbe	_365_(Number of Days) times the Nursing Facility Daily Benefit = _730, 1095, 1460, 1825, 2555 or 3650 Other Notes: 10 years is also available.									
2. Nursing Home/Facility Daily Benefit Amounts (NHB) - There is a minimum and maximum amount offered in dollar increments.											
Minimum	Maximum	Increment	Day	Week	Month	None	Other				
\$100	\$400	\$1	YES	NO	NO	NO	NO]			
NHB Company Notes:	Enter Notes: None reported by the company.										
3. Resident	ial Care Fa	cility Daily B	enefit (RCF	E) - Represe	ents the RCF	E percentage of	of the Nursi	ng Facility L	_imit.		
100%	90%	80%	75%	70%	Other						
YES	NO	NO	NO	NO	NO						
RCFE Company Notes:	Enter Notes:	Enter Notes: None reported by the company.									
4. Home Ca	are Benefit ((HCB) - Repr	esents the p	ercentage o	f Home Care	Benefit Amou	nt for Comp	orehensive F	Policies		
100%	90%	80%	75%	70%	60%	50%	None	Other			
NO	NO	NO	NO	NO	NO	NO	YES	NO			
HCB Company Notes:	Enter Notes: Home Care is not available on this form										
5. Home Care O	only Benefit Am	ounts (HCBO) - ⊤	here is a minimu	im and maximum	amount offered ir	n dollar increments.					
Minimum	Maximum	Increment	Day	Week	Month	None	Other	1			
HCBO Company Notes: Not Applicable: Home care is not available on this form											
6. Qualifica	tion for Ber	nefits (QB)									
QB 2 OF 6	QB_2_OF_7	OB OTH1	QB_MN	QB_CI	QB_90DR	QB_OTH2					
YES	NO	NO	NO	YES	NO	NO					
QB Company Notes:		uman assistance o					_ Activities of D	Daily Living.			

7. Elimination Period (EP) = In days Select all that applies.

NO	VES	NO	NO	90 YES	100 NO	CALENDAR NO	SERVICE YES	Other YES
NO								

EP Company Enter Notes: 180 days and 365 days are also available Notes:

8. Inflation Protection (IP)

	5%		Guaranteed Purchase	
IP Methodology	Compound	5% Simple	Option	Other
Explain IP Methodology: None reported by the company.	YES	YES	YES	YES

IP Company Notes: Enter Notes: There are 7 automatic annual inflation protection options. Simple 3%, Simple 4%, Simple 5%, Simple 6%, Compound 3%, Compound 5% and CPI-U. There is also a CPI-U Offers option. With the CPI-U Offers option, the policyowner receives annual offers to increase his benefits and premiums proportionally to the increase in the CPI-U over the past year.

9. Waiver of Premium (WAVP)

Enter Notes: Premiums will be waived beginning on the first day that benefits are payable after the Waiting Period has been satisfied. Premiums will continue to be waived until no benefits are payable for 30 consecutive days.

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Long Term Care Insurance Rates

LTC Individual - Nursing Facility/Residential Care - Tax Qualified

	20 Day Eli	mination Pe	riod - Servi	се	90 Day Elimination Period - Service					
ISSUE AGE	3 YEAR MAXIMUM POLICY BENEFIT - NO INFLATION PROTECTION	3 YEAR MAXIMUM POLICY BENEFIT - WITH INFLATION PROTECTION	LIFETIME BENEFIT - NO INFLATION PROTECTION	LIFETIME BENEFIT - WITH INFLATION PROTECTION	3 YEAR MAXIMUM POLICY BENEFIT - NO INFLATION PROTECTION	3 YEAR MAXIMUM POLICY BENEFIT - WITH INFLATION PROTECTION	LIFETIME BENEFIT - NO INFLATION PROTECTION	LIFETIME BENEFIT - WITH INFLATION PROTECTION		
40	\$497	\$2,471			\$341	\$1,692				
45	\$587	\$2,583			\$402	\$1,769				
50	\$737	\$2,656			\$505	\$1,819				
55	\$892	\$2,811			\$611	\$1,925				
60	\$1,071	\$2,997			\$734	\$2,053				
65	\$1,598	\$3,705			\$1,095	\$2,537				
70	\$2,664	\$5,156			\$1,825	\$3,531				
75	\$3,890	\$6,484			\$2,664	\$4,441				
80										

Customer Service Telephone Number: (800) 224 - 4582