

BANKERS LIFE AND CASUALTY COMPANY - NAIC 61263

LTC Individual - Nursing Facility/Residential Care - Tax Qualified Male POLICY FORM: GR-N640M

1. Maximum Policy Benefit (MPB) = In year(s). Enter the number of days in Company Notes.

| 1Yr | 2Yrs | 3Yrs | 4Yrs | 5Yrs | 6Yrs | 7Yrs | Lifetime | Other |
|-----|------|------|------|------|------|------|----------|-------|
| YES | YES | YES | YES | YES | YES | YES | NO | YES |

| | |
|--------------------------|--|
| MPB Company Notes: | (Number of Days) times the Nursing Facility Daily Benefit = _____ . Other Notes: We offer the following benefit periods (in days): 365,500,730,1000,1095,1460,1500,1825,2000,2190,2500,2920 |
|--------------------------|--|

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 |
|---------|---------|-----------|-----|------|-------|------|-------|
| \$40 | \$400 | \$10 | YES | NO | YES | NO | NO |

| | |
|--------------------------|--|
| NHB Company Notes: | Enter Notes: None reported by the company. |
|--------------------------|--|

3. Residential Care Facility Daily Benefit (RCFE) - Represents the RCFE percentage of the Nursing Facility Limit.

| 100% | 90% | 80% | 75% | 70% | Other |
|------|-----|-----|-----|-----|-------|
| YES | NO | NO | NO | NO | NO |

| | |
|---------------------------|--|
| RCFE Company Notes: | Enter Notes: None reported by the company. |
|---------------------------|--|

4. Home Care Benefit (HCB) - Represents the percentage of Home Care Benefit Amount for Comprehensive Policies.

| 100% | 90% | 80% | 75% | 70% | 60% | 50% | None | Other |
|------|-----|-----|-----|-----|-----|-----|------|-------|
| NO | NO | NO | NO | NO | NO | NO | YES | No |

| | |
|--------------------------|--|
| HCB Company Notes: | Enter Notes: None reported by the company. |
|--------------------------|--|

5. Home Care Only Benefit Amounts (HCBO) - There is a minimum and maximum amount offered in dollar increments.

| Minimum | Maximum | Increment | Day | Week | Month | None | Other |
|---------|---------|-----------|-----|------|-------|------|-------|
| | | | | | | YES | |

| | |
|------------------------|--|
| HCBO Company Notes: | Not Applicable: This LTC policy form is not a Home Care Only policy. |
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6. Qualification for Benefits (QB)

| QB_2_OF_6 | QB_2_OF_7 | QB_OTH1 | QB_MN | QB_CI | QB_90DR | QB_OTH2 |
|-----------|-----------|---------|-------|-------|---------|---------|
| YES | NO | NO | NO | YES | YES | NO |

| | |
|-------------------------|---|
| QB Company Notes: | The need for human assistance or continual supervision to perform at least <u>2</u> of <u>6</u> Activities of Daily Living. |
|-------------------------|---|

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

| | | | | | | | | |
|-----|----|-----|-----|-----|-----|----------|---------|-------|
| 0 | 20 | 30 | 60 | 90 | 100 | CALENDAR | SERVICE | Other |
| YES | NO | YES | YES | YES | NO | NO | YES | YES |

EP Company Notes: Enter Notes: 15 day option is also available.

8. Inflation Protection (IP)

| | | | | |
|---|-------------|-----------|----------------------------|-------|
| IP Methodology | 5% Compound | 5% Simple | Guaranteed Purchase Option | Other |
| Explain IP Methodology: None reported by the company. | YES | YES | NO | YES |

IP Company Notes: Enter Notes: 3% AND 4% COMPOUND INFLATION OPTIONS ARE ALSO AVAILABLE.

9. Waiver of Premium (WAVP)

Enter Notes: Premiums are waived after 90 days of receiving covered services. Premiums are waived for the entire policy.

BANKERS LIFE AND CASUALTY COMPANY - NAIC 61263

Long Term Care Insurance Rates

POLICY FORM: GR-N640M **MALE**

LTC Individual - Nursing Facility/Residential Care - Tax Qualified Male

30 Day Elimination Period - Service 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 | \$356 | \$2,205 | | | \$304 | \$1,884 | | |
| 45 | \$455 | \$2,382 | | | \$389 | \$2,036 | | |
| 50 | \$555 | \$2,560 | | | \$474 | \$2,188 | | |
| 55 | \$711 | \$2,788 | | | \$608 | \$2,383 | | |
| 60 | \$960 | \$3,136 | | | \$821 | \$2,680 | | |
| 65 | \$1,401 | \$3,762 | | | \$1,197 | \$3,215 | | |
| 70 | \$2,197 | \$4,871 | | | \$1,878 | \$4,163 | | |
| 75 | \$3,442 | \$6,564 | | | \$2,942 | \$5,610 | | |
| 80 | \$5,511 | \$9,230 | | | \$4,710 | \$7,889 | | |

Customer Service Telephone Number: (800) 231-9150