BANKERS LIFE AND CASUALTY COMPANY - NAIC 61263

LTC Individual - Comprehensive - Tax Qualified Male

POLICY FORM: GR-N650M

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	NO	NO	NO	NO	NO	YES			
MPB Company Notes: Other Notes: We offer the following benefit periods (in days): 365,500,730,1000,1095											
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				
\$50	\$400	\$10	YES	NO	YES	NO	NO				
NHB Enter Notes: None reported by the company. Notes:											
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 Amounts (HCB) - Represents the percentage of Home Care Benefit Amount for Comprehensive Policies.											
100%	90%	80%	75%	70%	60%	50%	None	Other			
YES	NO	NO	NO	NO	NO	NO	NO	NO			
HCB Company Notes:											
5. Home Care O	nly Benefit Amo	ounts (HCBO) - Th	iere is a minimu	m and maximum	amount offered in	o dollar increments.					
Minimum	Maximum	Increment	Day	Week	Month	None	Other				
HCBO Company Not Applicable: This LTC policy form is not a Home Care Only policy.											
6. Qualification for Benefits (QB)											
QB_2_OF_6			QB_MN	QB_CI	QB_90DR	QB_OTH2	r				
YES	NO	NO	NO	YES	YES	NO					
QB Company The need for human assistance or continual supervision to perform at least2 of6 Activities of Daily Living. Notes: Notes:											

7. Eliminatio	on Period (I	E P) = In days	Select all th	at applies.							
0	20	30	60	90	100	CALENDAR	SERVICE	Other			
YES	NO	YES	YES	YES	NO	NO	YES	YES			
EP Company Notes:	Enter Notes: 1	15 day option is	also available.								
8. Inflation Protection (IP)											
	Guaranteed										
IP Methodology				5% Compound	5% Simple	Purchase Option	Other				
Explain IP Methodology: None reported by the company. YES					YES	YES	YES				
IP Company Notes:	Enter Notes: 3	3% AND 4% CO	MPOUND OP	TIONS ARE ALS	SO 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.											

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MALE

Long Term Care Insurance Rates

LTC Individual - Comprehensive - Tax Qualified Male

	30 Day Elir	nination Per	<mark>iod - Servic</mark>	e	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	\$483	\$2,854			\$412	\$2,439				
45	\$613	\$3,075			\$524	\$2,628				
50	\$744	\$3,304			\$636	\$2,824				
55	\$940	\$3,582			\$804	\$3,062				
60	\$1,268	\$4,007			\$1,083	\$3,425				
65	\$1,824	\$4,792			\$1,559	\$4,096				
70	\$2,813	\$6,166			\$2,404	\$5,270				
75	\$4,342	\$8,211			\$3,712	\$7,018				
80	\$6,812	\$11,384		(000) 004 07	\$5,822	\$9,730				

Customer Service Telephone Number:

(800) 621-3724