

**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	NO	NO	NO	NO	NO	YES

MPB \_\_\_\_\_ (Number of Days) times the Nursing Facility Daily Benefit = \_\_\_\_\_. Other Notes: We offer the following benefit periods (in days):  
 365,500,730,1000,1095

Company Notes:

**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 Enter Notes: None reported by the company.

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 Enter Notes: None reported by the company.

Company Notes:

**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 Enter Notes: None reported by the company.

Company Notes:

**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

HCBO Company Notes: Not Applicable: This LTC policy form is not a Home Care Only policy.

**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 The need for human assistance or continual supervision to perform at least 2 of 6 Activities of Daily Living.

Company Notes:

**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	YES	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 the duration of the elimination period. 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) 621-3724