

**IN THE UNITED STATES DISTRICT COURT
FOR THE EASTERN DISTRICT OF VIRGINIA
RICHMOND DIVISION**

FRED HANEY, MARSHA MERRILL,
SYLVIA RAUSCH, STEPHEN SWENSON,
and ALAN WOOTEN, individually, and on
behalf of all others similarly situated,

Plaintiffs,

v.

GENWORTH LIFE INSURANCE
COMPANY and GENWORTH LIFE
INSURANCE COMPANY OF NEW
YORK,

Defendants.

Civil Action No.: 3:22-cv-00055-REP

**DECLARATION OF BRIAN D. PENNY IN SUPPORT OF REPLY MEMORANDUM OF
LAW IN SUPPORT OF PLAINTIFFS' MOTION FOR FINAL APPROVAL OF CLASS
ACTION SETTLEMENT**

I, Brian D. Penny, hereby declare as follows:

1. I am a partner in the law firm of Goldman Scarlato & Penny, P.C., one of four firms the Court appointed Class Counsel in the above-captioned action.

2. Attached hereto are true and correct copies of the following documents:

Exhibit 1 Supplemental Declaration of Cameron R. Azari, Esq. on Implementation and Adequacy of Settlement Notice Plan

Exhibit 2 Excerpts from the 2012 Broker World LTCI Survey

Exhibit 3 Excerpts from the 2013 Broker World LTCI Survey

Exhibit 4 Excerpts from the 2014 LTCI Survey

Exhibit 5 Excerpts from the 2017 Broker World LTCI Survey

Exhibit 6 Extracts from the 2020 LTCI Survey

Exhibit 7 Extracts from the 2021 LTCI Survey

Exhibit 8 Letter from Jerry Dean received by Epiq

I declare under penalty of perjury under the laws of the United States that the foregoing are true and correct, and that this declaration was executed this 3rd day of November, 2022.

/s/ Brian D. Penny

BRIAN D. PENNY

CERTIFICATE OF SERVICE

I hereby certify that on November 3, 2022, I filed the foregoing pleading or paper through the Court's CM/ECF system, which sent a notice of electronic filing to all registered users.

/s/ Jonathan M. Petty

Jonathan M. Petty (VSB No. 43100)

PHELAN PETTY, LLC

3315 West Broad Street

Richmond, VA 23230

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804/767-4601 (fax)

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Counsel for Plaintiffs

EXHIBIT 1

**IN THE UNITED STATES DISTRICT COURT
EASTERN DISTRICT OF VIRGINIA**

FRED HANEY, MARSHA MERRILL,
SYLVIA RAUSCH, STEPHEN SWENSON,
and ALAN WOOTEN, individually, and on
behalf of all others similarly situated,

Plaintiffs,

v.

GENWORTH LIFE INSURANCE
COMPANY and GENWORTH LIFE
INSURANCE COMPANY OF NEW YORK,

Defendants.

Civil Action No. 3:22-cv-00055-REP

**SUPPLEMENTAL DECLARATION OF CAMERON R. AZARI, ESQ. ON
IMPLEMENTATION AND ADEQUACY OF SETTLEMENT NOTICE PLAN**

I, Cameron Azari, declare as follows:

1. My name is Cameron R. Azari, Esq. I have personal knowledge of the matters set forth herein, and I believe them to be true and correct.

2. I am a nationally recognized expert in the field of legal notice, and I have served as an expert in hundreds of federal and state cases involving class action notice plans.

3. I am a Senior Vice President with Epiq Class Action & Claims Solutions, Inc. (“Epiq”) and the Director of Legal Notice for Hilsoft Notifications (“Hilsoft”), a firm that specializes in designing, developing, analyzing and implementing large-scale legal notification plans. Hilsoft is a business unit of Epiq.

4. This declaration will provide updated administration statistics for the implementation of the Settlement Notice Plan (“Notice Plan” or “Plan”) and notices (the “Notice” or “Notices”) for the Settlement in *Haney v. Genworth Life Ins. Co.*, No. 3:23-cv-00055-REP, in the United States District Court for the Eastern District of Virginia.

5. I previously executed my *Declaration of Cameron R. Azari, Esq. on Settlement*

Notice Plan and Administration, on March 31, 2022, in which I detailed Hilsoft’s class action notice experience and attached Hilsoft’s *curriculum vitae*. I also provided my educational and professional experience relating to class actions and my ability to render opinions on overall adequacy of notice programs. Subsequently, I executed my *Declaration of Cameron R. Azari, Esq. on Implementation and Adequacy of Settlement Notice Plan* (“Implementation Declaration”) on September 14, 2022, in which I detailed Hilsoft’s successful implementation of the Settlement Notice Plan.

6. The facts in this declaration are based on my personal knowledge, as well as information provided to me by my colleagues in the ordinary course of my business at Hilsoft and Epiq, who worked with us to implement the Notice Plan.

NOTICE PLAN IMPLEMENTATION

Individual Notice

7. As stated in my Implementation Declaration, on August 1, 2022, Epiq sent the detailed Notice via USPS first-class mail to the 352,146 Class Members. Address updating (both prior to mailing and on undeliverable pieces) and re-mailing protocols met or exceeded those used in other class action settlements.

8. Additionally, a Class Notice has been mailed to all persons who requested one via the toll-free telephone number maintained by Epiq (as detailed below) or by mail. As of November 1, 2022, Epiq has mailed 31 additional Class Notices as a result of such requests.

9. The USPS automatically forwards Class Notices with an available forwarding address order that has not expired (“Postal Forwards”). The return address on these Class Notice mailings is a post office box maintained by Epiq, and for Class Notices returned as undeliverable, Epiq re-mailed the Class Notice to any new address available through USPS information (for example, to the address provided by the USPS on returned pieces for which the automatic forwarding order has expired, but which is still during the period in which the USPS returns the piece with the address indicated). For other returned Class Notice mailings, Epiq also has obtained

better addresses by using a third-party lookup service, a process commonly referred to as “skip-tracing”. Epiq also has worked with Defendants to ensure that any such changes of address for Class Members appear current. Upon successfully locating better addresses through these means, Class Notices have been promptly re-mailed that Epiq has received from the USPS. As of November 1, 2022, Epiq has re-mailed six such Class Notices. As of November 1, 2022, Epiq has received a total of 150 undeliverable Class Notices (which includes any re-mailed Class Notices that were also returned as undeliverable).

Notice Results

10. As of November 1, 2022, Epiq has mailed Class Notices to 352,168 unique records, with Notice to 150 unique Class Members currently known to be undeliverable. In my experience, the approximate 99% deliverable rate to identified likely Class Members is indicative of the extensive address research, updating and remailing protocols used and that the Notice Program in this case met and, indeed, exceeded expectations.

Supplemental Publication Notice

11. On September 2, 2022, the Publication Notice was published for one business day in the national editions of *The New York Times*, *The Wall Street Journal*, and *USA Today* as an 1/8 page ad unit. The combined average weekday circulation of these three publications is approximately 1.26 million.

Case Website, Toll-free Telephone Number, and Postal Mailing Address

12. The existing dedicated website for the Settlement that Epiq established on August 1, 2022, (www.Choice2LongTermCareInsuranceSettlement.com) continues to be available 24 hours a day, 7 days a week. Class Members are able to obtain detailed information about the case and review key documents, including the Notice, Settlement Agreement and its exhibits, the Complaint, the Preliminary Approval Order, and Class Counsel’s motions and briefs in support of the Settlement, as well as answers to frequently asked questions (“FAQs”) and a toll-free telephone number. The case website address was displayed prominently in all Notices. A true and correct

copy of the each of the pages of the case website are attached to this declaration as **Attachment 1**.

13. As of November 1, 2022, there have been 39,453 unique visitor sessions to the case website, and 72,593 web pages have been presented to visitors.

14. The existing toll-free telephone number (1-855-662-0078) that Epiq established on August 1, 2022, continues to be available 24 hours per day, 7 days per week. Class Members are able to call for additional information, listen to answers to FAQs, request that a Notice be mailed to them, and choose to speak to a live operator during normal business hours. The toll-free telephone number also was prominently displayed in the Notices. As of November 1, 2022, the toll-free number has handled 11,674 calls for 70,661 minutes of use and live operators have handled 2,801 calls for 31,302 minutes of use.

15. A post office box that was established to allow Class Members to send inquiries about the Settlement continues to be available.

Exclusion Requests and Objections

16. The deadline to request exclusion or objection to the Settlement was September 30, 2022. As of November 1, 2022, Epiq has received 187 requests for exclusion from the Settlement that were postmarked on or before September 30, 2022. As of November 1, 2022, I have reviewed all the objections available on the Court docket, and none relate to the method of providing notice or settlement administration. The Request for Exclusion Report is included as **Attachment 2**.

CONCLUSION

17. I believe this Notice program provided the best notice practicable given the circumstances. It is my opinion that the Notice program as implemented herein was consistent with other class action notice plans that have been approved by both state and federal courts nationwide. This Notice program was designed and implemented to reach as many Class Members as possible and provided them with the opportunity to review a plain language notice with the ability to easily take the next step and learn more about this Action and Settlement.

18. The individual notice (mailing) reached approximately 99% of the identified Class. The established website and the supplemental publication notice expanded the reach of the notice further. In 2010, the Federal Judicial Center issued a Judges' Class Action Notice and Claims Process Checklist and Plain Language Guide. This Guide states that, "the lynchpin in an objective determination of the adequacy of a proposed notice effort is whether all the notice efforts together will reach a high percentage of the class. It is reasonable to reach between 70–95%." Here, we have developed and implemented a Notice Plan that readily achieved a reach that exceeded the highest end of that standard.

19. The Notice Plan as implemented provided for the best notice practicable under the circumstances of this case, conformed to all aspects of the Rule 23, and comported with the guidance for effective notice set out in the Manual for Complex Litigation, Fourth.

20. The Notice Plan schedule afforded sufficient time to provide full and proper notice to Class Members before the opt-out and objection deadlines.

I declare under penalty of perjury that the foregoing is true and correct. Executed on November 2, 2022, at Beaverton, Oregon.


Cameron R. Azari

Attachment 1

Haney, et al. v. Genworth Life Insurance Company, et al. (/)

United States District Court for the Eastern District of Virginia (Richmond Division)
Case No. 3:22-cv-00055-REP

Welcome to the Information Website for the Haney v. Genworth Life Insurance Class Action Settlement

If you own a Choice 2, Choice 2.1, California CADE, California Reprise, or California Unbundled long-term care insurance policy issued by Genworth Life Insurance Company or Genworth Life Insurance Company of New York, you may be part of a class action settlement. Genworth has agreed to settle a proposed class action involving certain long-term care policies.

A proposed settlement has been reached between the parties in the *Haney, et al. v. Genworth Life Insurance Company, et al.* class action lawsuit pending in the United States District Court for the Eastern District of Virginia (the "Class Action"), and on May 2, 2022, the settlement was granted preliminary approval by the Court supervising the lawsuit.

The purpose of this website is to describe the Class Action, to inform Class Members of the proposed settlement terms, and to inform Class Members of their potential rights and options in connection with the settlement.

In January 2022, five policyholders filed a Class Action Complaint alleging that Genworth should have included certain additional information in letters sent to Genworth Choice 2, Choice 2.1, California CADE, California Reprise, and California Unbundled policyholders about premium rate increases. Genworth denies all allegations and maintains that its disclosures to policyholders were reasonable, appropriate, and truthful.

Pending final Court approval and subject to certain conditions, impacted policyholders may receive certain disclosures and policy options, including potential payments or credits. If you are a Class Member, you may be entitled to obtain this relief, and you may have other rights relating to the proposed settlement.

If you received a notice addressed to you in the mail, then you have been identified as a Class Member in the settlement. If the Settlement Agreement is approved by the Court, Class Members will then be sent another correspondence with options to elect to receive benefits under the Settlement Agreement. Please be patient.

Because the rights of Class Members may be affected, it is extremely important that you read this website carefully.

Summary of Your Legal Rights and Options in This Settlement

<p>Option #1: Do Nothing</p>	<p>If you do not oppose the settlement of the lawsuit, then simply do nothing. You do not need to send any documents to the Settlement Administrator. IF YOU DO NOTHING, YOU WILL BE BOUND BY THE TERMS OF THE SETTLEMENT, INCLUDING THE RELEASE. If you do nothing, you will not have the right to pursue your own action for the claims covered by the Class Action Release. If the Settlement Agreement is finally approved by the Court, you will then be sent another correspondence with options to elect to receive benefits under the Settlement Agreement.</p>
<p>Option #2: Exclude Yourself</p>	<p>If you do NOT want to be bound by the Settlement Agreement and wish to retain the right to proceed against the Defendants on your own as to the claims that were alleged, or that have a reasonable connection with any matter of fact set forth in the Class Action, subject to any defenses that may be available to the Defendants to any claims you may have, including, but not limited to, statutes of limitation and statutes of repose, then you must notify the Settlement Administrator that you wish to exclude yourself from the Settlement Agreement and the Class (also known as "opting out").</p> <p>To do so, you must send a signed letter to the Settlement Administrator, which includes: (1) your name, (2) your address, (3) if available, your policy number, (4) a statement that you are "requesting exclusion" from the Settlement Agreement, (5) the name of the case and case number (<i>Haney, et al. v. Genworth Life Insurance Company, et al.</i>, Case No. 3:22-cv-00055-REP), and (6) your signature.</p> <p>Opt-out letters can be mailed to the Settlement Administrator at the following mailing address: P.O. Box 2860, Portland, OR 97208-2860.</p> <p>The letter requesting exclusion must be postmarked no later than September 30, 2022. Any request for exclusion received with a postmark after that date will be invalid.</p> <p>IF YOU CHOOSE TO EXCLUDE YOURSELF, YOU WILL NOT RECEIVED THE SETTLEMENT AGREEMENT POLICY ELECTION OPTIONS OR OTHER RELIEF AND THE TERMS OF THE SETTLEMENT WILL NOT APPLY TO YOU.</p>

<p>Option #3: Object</p>	<p>If you want to remain in the Settlement Agreement and be bound by its terms, but you oppose any aspect of the Settlement Agreement, or Class Counsel's application for an award of fees and expenses, you may object to the Settlement Agreement.</p> <p>In order to object, you must file a written Objection with the Clerk of United States District Court for the Eastern District of Virginia, located at 701 East Broad Street, Richmond, VA 23219, and you must serve a copy of the written Objection on the Settlement Administrator at the following address: P.O. Box 2860, Portland, OR 97208-2860.</p> <p>A written Objection must include: (1) your name, (2) your current address, (3) the name of the case and case number (<i>Haney, et al. v. Genworth Life Insurance Company, et al.</i>, Case No. 3:22-cv-00055-REP), (4) the basis or reason(s) for your objection(s), (6) your signature, and (7) if you (or someone on your behalf such as an attorney) intends to appear at the Final Approval Hearing, a statement stating that you (or someone on your behalf) intend to appear at the Final Approval Hearing.</p> <p>A written Objection must be filed with the Court and sent to the Settlement Administrator with a postmark no later than September 30, 2022. Any written Objection filed and/or mailed with a post-mark after this deadline will be invalid.</p> <p>You may be permitted to appear personally (or through an attorney) at the Final Approval Hearing to present your objections directly to the Court if you first timely file and serve a written Objection and do not submit a request for exclusion. A written Objection must state whether you (or someone on your behalf, such as an attorney) intends to appear at the Final Approval Hearing. If you wish to have an attorney represent you in connection with any written Objection, including to appear at the Final Approval Hearing, you will be responsible for any fees or expenses of that attorney. If you submit a written Objection, you will remain a Class Member and, if the Court rejects your objection(s), you will still be bound by the terms of the Settlement Agreement, including the Release.</p>
<p>Go to a Hearing</p>	<p>A court hearing concerning the fairness of the settlement will be held on November 17, 2022, at 10:00 a.m. ET at the following address: The Spottswood W. Robinson III and Robert R. Merhige, Jr., Federal Courthouse, 701 East Broad Street, Richmond, VA 23219, Richmond Courtroom 7400 to determine whether the settlement should be given final approval by the Court. You are not required to attend the hearing in order to participate in the settlement.</p>

Important Dates

September 30, 2022

Deadline to Exclude Yourself from the Settlement

September 30, 2022

Deadline to Object to the Settlement

November 17, 2022, at 10:00 a.m.

Final Approval Hearing

[Contact Us \(/Home/ContactUs\)](#) [Privacy Policy \(https://www.epiqglobal.com/en-us/general/eca-privacy-policy\)](https://www.epiqglobal.com/en-us/general/eca-privacy-policy)

[Terms of Use \(http://www.epiqglobal.com/terms-of-use\)](http://www.epiqglobal.com/terms-of-use)

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Haney, et al. v. Genworth Life Insurance Company, et al. (/)

United States District Court for the Eastern District of Virginia (Richmond Division)
Case No. 3:22-cv-00055-REP

Frequently Asked Questions

1. [What is this class action lawsuit about?](#)
2. [Who is included in the Settlement?](#)
3. [How can I be included in the Settlement?](#)
4. [How do I exclude myself from the Settlement?](#)
5. [How do I object to the Settlement?](#)
6. [What are the terms of the Settlement?](#)
7. [When and where will the Court decide whether to approve the Settlement?](#)
8. [Additional important information](#)

1. **What is this class action lawsuit about?**

On January 28, 2022, five individuals with GLIC or GLICNY Choice 2, Choice 2.1, California CADE, California Reprice, and/or California Unbundled long-term care insurance policies Fred Haney, Marsha Merrill, Sylvia Rausch, Stephen Swenson, and Alan Wooten ("Named Plaintiffs"), filed a Class Action Complaint ("Complaint") against Genworth in the United States District Court for the Eastern District of Virginia, alleging that Genworth intentionally withheld material information from Policyholders with respect to the full scope and magnitude of Genworth's rate increase action plans and its reliance on Policyholders paying increased rates to pay future claims (the "Complaint"). The Complaint asserted claims for Fraudulent Inducement by Omission and for Declaratory Relief.

Genworth denies any wrongdoing or legal liability for any alleged wrongdoing in connection with any facts or claims that have been or could have been alleged in Named Plaintiffs' lawsuit, whether on behalf of the Named Plaintiffs or Class Members. Genworth contends that the Named Plaintiffs' and Class Members' claims challenged Genworth's right to increase premiums and thus are barred by the filed-rate doctrine, and that neither Named Plaintiffs nor the putative Class has been injured or is entitled to any relief. The Court has not ruled on the merits of the claims or defenses.

All Parties believe in the merits of their respective claims and defenses. Nevertheless, due to the uncertainties, risks, expenses, and business disruption of continued litigation, the Parties have agreed to settle the lawsuit after voluntary mediation proceedings involving a mediator. The Parties have entered into a Joint Stipulation of Class Action Settlement and Release, which the Court has preliminary approved as fair and reasonable, and which was amended and superseded by an Amended Joint Stipulation of Class Action Settlement and Release on July 6, 2022

“(Settlement Agreement”). The principal terms of the Settlement Agreement are summarized on this website. The full Settlement Agreement is on file with the Court and available on the [Important Documents \(/Home/Documents\)](#) section of this website.

The attorneys for plaintiffs Fred Haney, Marsha Merrill, Sylvia Rausch, Stephen Swenson, and Alan Wooten have been designated by the Court as “Class Counsel” to represent all Class Members affected by the Settlement Agreement. Class Counsel believes that the Settlement Agreement summarized by this website is fair, reasonable, and adequate and in the best interests of the Class Members.

The following law firms are Class Counsel and represent the Class Members:

Class Counsel	
GOLDMAN SCARLATO & PENNY, P.C. Brian D. Penny 161 Washington Street, Suite 1025 Conshohocken, PA 19428	ROBBINS GELLER RUDMAN & DOWD LLP Stuart A. Davidson 120 East Palmetto Park Road, Suite 500 Boca Raton, FL 33432
PHELAN PETTY, PLC Jonathan M. Petty 3315 West Broad Street Richmond, VA 23230	BERGER MONTAGUE PC Glen L. Abramson 1818 Market Street, Suite 3600 Philadelphia, PA 19103
Class Counsel's Toll-free Number: 1-800-348-6192	

The Settlement Administrator is Epiq. Epiq's phone number is 1-855-662-0078; and its mailing address is Haney v. Genworth, P.O. Box 2860, Portland, OR 97208-2860.

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2. Who is included in the Settlement?

The “Class Members” for purposes of this settlement are defined as all Policyholders of GLIC and GLICNY long-term care insurance Choice 2, Choice 2.1, California CADE, California Reprice, and California Unbundled policies, and State variations of those policies in force at any time during the Class Period and issued in any of the fifty (50) States or the District of Columbia (the “States”) excluding: (1) those Policyholders whose policies went into Non-Forfeiture Status or entered a Fully Paid-Up Status prior to January 1, 2014; (2) those Policyholders whose Class Policy is Lapsed and is outside any period Genworth allows for the Class Policy to be automatically reinstated with payment of past due premium, or whose Class Policy has otherwise Terminated, as of the date of the Class Notice; and those Policyholders whose Class Policy is Lapsed and is outside any period Genworth allows for the Class Policy to be automatically reinstated with payment of past due premium or has otherwise Terminated, as of the date the Special Election Letter (defined below) would otherwise be mailed to the Policyholder; (3) those Policyholders who are deceased at any time prior to sending their Special Election Option to Genworth; (4) Genworth's current officers, directors, and employees as of the date Class Notice is mailed; and (5) Judge Robert E. Payne and his immediate family and staff.

Changes to your policy status or coverage (including, for example, whether your policy lapses or is terminated) may also impact whether or not you are in the proposed settlement class. If your policy lapses after the date of the Class Notice, it must be reinstated within your applicable auto-reinstatement period if you wish to exercise rights and options in the settlement.

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3. How can I be included in the Settlement?

If you do not oppose the settlement of the lawsuit, then simply do nothing. You do not need to send any documents to the Settlement Administrator. **IF YOU DO NOTHING, YOU WILL BE BOUND BY THE TERMS OF THE SETTLEMENT, INCLUDING THE RELEASE.** If you do nothing, you will not have the right to pursue your own action for the claims covered by the Class Action Release. If the Settlement Agreement is approved by the Court, you will then be sent another correspondence with options to elect to receive benefits under the Settlement Agreement.

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4. How do I exclude myself from the Settlement?

If you do NOT want to be bound by the Settlement Agreement and wish to retain the right to proceed against GLIC and/or GLICNY on your own as to the claims that were alleged, or that have a reasonable connection with any matter of fact set forth in the Class Action, subject to any defenses that may be available to GLIC and/or GLICNY to any claims you may have, including, but not limited to, statutes of limitation and statutes of repose, then you must notify the Settlement Administrator that you wish to exclude yourself from the Settlement Agreement and the Class (also known as "opting out").

To do so, you must send a signed letter to the Settlement Administrator, which includes: (1) your name, (2) your address, (3) if available, your policy number, (4) a statement that you are "requesting exclusion" from the Settlement Agreement, (5) the name of the case and case number (*Haney, et al. v. Genworth Life Insurance Company, et al.*, Case No. 3:22-cv-00055-REP), and (6) your signature.

Opt-out letters can be mailed to the Settlement Administrator at the following mailing address: Haney v. Genworth, Exclusions, P.O. Box 2860, Portland, OR 97208-2860.

The letter requesting exclusion must be *postmarked* no later than **September 30, 2022**. Any request for exclusion received with a postmark after that date will be invalid.

IF YOU CHOOSE TO EXCLUDE YOURSELF, YOU WILL NOT RECEIVE THE SETTLEMENT AGREEMENT POLICY ELECTION OPTIONS OR OTHER RELIEF AND THE TERMS OF THE SETTLEMENT WILL NOT APPLY TO YOU.

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5. How do I object to the Settlement?

If you want to remain in the Settlement Agreement and be bound by its terms, but you oppose any aspect of the Settlement Agreement, or Class Counsel's application for an award of fees and expenses, you may object to the Settlement Agreement.

In order to object, you must file a written Objection with the Clerk of United States District Court for the Eastern District of Virginia, located at 701 East Broad Street, Richmond, VA 23219, and you must serve a copy of the written Objection on the Settlement Administrator at the following address: Haney v. Genworth, Objections, P.O. Box 2860, Portland, OR 97208-2860.

A written Objection must include: (1) your full name, (2) your current address, (3) the name of the case and the case number (*Haney et al. v. Genworth Life Insurance Company et al.*, Case No. 3:22-cv-00055-REP), (4) the basis or reason(s) for your objection(s), (5) your signature, and (6) if you (or

someone on your behalf such as an attorney) intends to appear at the Final Approval Hearing, a statement stating that you (or someone on your behalf) intend to appear at the Final Approval Hearing.

Any written Objection must be filed with the Court **and** sent to the Settlement Administrator with a *postmark* no later than **September 30, 2022**. Any written Objection filed and/or mailed with a postmark after this deadline will be invalid.

You may be permitted to appear personally (or through an attorney) at the Final Approval Hearing to present your objections directly to the Court **if you first timely file and serve a written Objection and do not submit a request for exclusion**. A written Objection must state whether you (or someone on your behalf, such as an attorney) intends to appear at the Final Approval Hearing. If you wish to have an attorney represent you in connection with any written Objection, including to appear at the Final Approval Hearing, you will be responsible for any fees or expenses of that attorney. If you submit a written Objection, you will remain a Class Members and, if the Court rejects your objection(s), you will still be bound by the terms of the Settlement Agreement, including the Release.

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6. What are the terms of the Settlement?

The Settlement Agreement is conditioned upon the Court entering an order granting final approval of the Settlement Agreement as fair, reasonable, and adequate and in the best interests of the Class. Subject to the Settlement Agreement becoming final, the terms of the Settlement Agreement are as follows:

1. **Special Election Disclosures and Options:** In consideration for a Release as described in Paragraph 2, and as a direct result of the Class Action and the Settlement Agreement, Genworth will send a special election letter ("Special Election Letter") to all Class Members after the Settlement has been finally approved. The Special Election Letter will contain, subject to approval by the Court and being approved by and/or not objected to by state insurance regulators:
 - a. Disclosure of certain information about GLIC's and/or GLICNY's future rate increase plans and need for future rate increases (the "Disclosures"); and
 - b. Class Members' right to make an election of either (1) maintaining current benefits at existing filed rates (subject to the future approved rate increases), or (2) electing from a selection of reduced paid-up benefit options or reduced benefit options (the "Special Election Options"), subject to the availability of those options depending on each Class Member' current policy terms and benefits and any state limitations concerning Partnership Plan ("Partnership Plan") requirements. Special Election Options that may be available could increase the amount of your current non-forfeiture paid-up benefit or entitle you to cash damages pay-outs. The actual Special Election Options available to you will depend upon many factors including, but not limited to, your current policy status and benefits, final court approval, and state regulatory review and comment.
2. **Release:** Each member of the Class who does not timely and validly opt out of the Class, will forever release and discharge GLIC and GLICNY (collectively "Genworth") and each of those entities' respective affiliates, predecessors, successors, parents, subsidiaries, and, for

Handy 1 Genworth - Frequently Asked Questions

each of the foregoing, their current, former, and future directors, officers, direct and indirect owners, members, managers, attorneys, representatives, employees, and agents (the "Genworth Released Parties") of and from any and all known or unknown, contingent or absolute, matured or unmatured, suspected or unsuspected, disclosed or undisclosed, foreseeable or unforeseeable, liquidated or unliquidated, existing or arising in the future, and accrued or unaccrued claims, demands, interest, penalties, fines, and causes of action, that the Named Plaintiffs and Class Members may have from the beginning of time through and including the Final Settlement Date that relate to claims alleged, or that have a reasonable connection with any matter of fact set forth in the Class Action including, but not limited to, any claims relating to rate increases on Class Policies prior to the Final Settlement Date. This release specifically includes any legal or equitable claim arising from or related to any election or policy change made or not made by any Class Members to his or her policy benefits prior to the Final Settlement Date. Named Plaintiffs and Class Members, subject to the exception set forth below, will further release the Genworth Released Parties and Class Counsel from any claims relating to or arising out of the Disclosures or the Special Election Letters the Class Members are provided as part of the Settlement Agreement, including (but not limited to) claims specifically relating to any alleged omissions in the Disclosures or the Special Election Letters or to any decision, or non-decision, to maintain, modify, or give up coverage based on the Disclosures, the Special Election Letters, or the Special Election Options offered. A claim that a Class Member was harmed by an express and intentional misrepresentation: in the completed portion of the Disclosures that currently is bracketed in the template Special Election Letter appended as Appendix D to the Settlement Agreement, in the completed portions of the Special Election Options that are made available to that Class Member that currently are bracketed in the template Special Election Letter, or by the Genworth Released Parties or Class Counsel about the Disclosures, shall not be a Released Claim. A Class Member may pursue such a claim in the Court via complaint or petition within three years of the date the Class Member makes a Special Election or three years of the deadline for the Class Member to make a Special Election, whichever is earlier, provided that, before filing any such claim, the Class Member shall first notify the Parties of the basis for the claim and provide them with a reasonable opportunity to investigate and, if appropriate, remedy the alleged harm.

This Release will not prevent a Class Member from making a claim for benefits under his or her long-term care insurance policy consistent with his or her policy coverage, nor shall it include a Class Member's challenge or appeal of Genworth's denial of benefits under his or her Class Policy.

This is only a summary of the actual benefits and release language contained in the Settlement Agreement, which is available on the [Important Documents \(/Home/Documents\)](#) section of this website. If the Settlement Agreement is not approved by the Court or does not become final for any reason, the Class Action will continue, this Release will not be binding, and the Special Election Options will not be available.

- Attorneys' Fees and Litigation Expenses:** As part of the request for Final Approval of the Settlement Agreement, Class Counsel will file a request seeking to be paid a contingent payment of 15% of certain amounts related to Special Election Options selected by the Class, which shall be no greater than \$13,000,000.00. **None** of the attorneys' fees will be deducted from payments made by Genworth to Class Members.

Class Counsel will also file a request for an award of reasonable litigation expenses in this case. These expenses will be no more than \$50,000.

These are the only attorneys' fees and litigation expenses that Class Counsel will be paid as a result of the Settlement. Class Members will not be required to separately pay Class Counsel for any other attorneys' fees or expenses. Genworth has agreed to pay all fees and expenses separately. The actual amounts of attorneys' fees and litigation expenses to be paid to Class Counsel will be determined by the Court, and these amounts will be paid by Genworth directly to Class Counsel.

This is only a summary of the actual Attorneys' Fees and Litigation Expenses provisions contained in the Settlement Agreement, which is available on the [Important Documents \(/Home/Documents\)](#) section of this website.

- 4. Class Representative Service Payment:** Named Plaintiffs Fred Haney, Marsha Merrill, Sylvia Rausch, Stephen Swenson, and Alan Wooten have been appointed as class representatives by the Court. As part of the request for Final Approval of the Settlement Agreement, Class Counsel will request that service payments be awarded to each class representative in an amount of up to \$15,000 for each of them for the time, work, and risk they undertook in bringing this Class Action and achieving a settlement on behalf of all Class Members. None of the service payments approved by the Court will be deducted from payments made by Genworth to Class Members.

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7. When and where will the Court decide whether to approve the Settlement?

The Final Approval Hearing on the fairness and adequacy of the Settlement Agreement will be held on **November 17, 2022, at 10:00 a.m.** in Courtroom 7400 in The Spottswood W. Robinson III and Robert R. Merhige, Jr., Federal Courthouse, 701 East Broad Street, Richmond, VA 23219. You are not required to attend the Final Approval Hearing in order to participate in the Settlement Agreement, although you are free to do so if you choose. The Court, in its discretion, may continue the Final Approval Hearing to a later date, in which case no additional written notice will be sent to Class Members, so it is incumbent upon you to check this website regarding the Final Approval Hearing date and time if you wish to attend.

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8. Additional important information

The Special Election Options described on this website still require final approval by the Court and are subject to review by state insurance regulators.

You should also consider the following additional information, which may impact the availability of Special Election Options under this settlement:

- 1. If you currently have a long-term care policy with Genworth, you must continue to pay premiums (unless your premiums have been waived or your policy is in Fully Paid-Up Status) to keep your policy in force so that it is eligible for Special Election Options under this settlement.** Your premiums also remain subject to any rate increases that may be approved or otherwise permitted.

2. **Changes to your policy status or coverage (including lapse or termination) may impact whether or not you are in the proposed settlement class and/or whether Special Election Options will be available to you.**
 - If your policy lapses after the date of the Class Notice but is still in the period during which your policy can be automatically reinstated by paying any past-due premium, you will need to reinstate your policy by paying the past-due premium to exercise any rights and options under the settlement.
 - If, before you are sent a Special Election Letter, your policy lapses and is outside any period Genworth allows for the policy to be automatically reinstated with payment of past due premium, or terminates for any other reason, then you will be excluded from the Settlement Class and the Special Election Options will not be available to you.
 - If, after you have been sent a Special Election Letter, your policy lapses and is outside any period Genworth allows for the policy to be automatically reinstated with payment of past due premium, or terminates for any other reason, then you will remain in the Settlement Class and release your claims, but you will no longer be eligible for the Special Election Options.
3. **If you reduce your coverage, including in response to a rate increase on your policy, your reduction in coverage may affect the Special Election Options that otherwise may become available to you under this settlement.** As a Policyholder, you have options to reduce your coverage that are separate from the Special Election Options that may become available to you under this settlement. For example, if there is a premium rate increase on your policy, you will have options for reducing your coverage. Those options will be different from any Special Election Options that may become available under this settlement and do not include the possibility of a cash damages payout. If you select an option to reduce your coverage separate from the Special Election Options that may be available under this settlement, you may eliminate or reduce the availability of any future Special Election Options or the value of any corresponding cash damages payments that may be available. Whether one of these options or any Special Election Option will best meet your needs will depend on your specific circumstances.

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Haney, et al. v. Genworth Life Insurance Company, et al. (/)

United States District Court for the Eastern District of Virginia (Richmond Division)
Case No. 3:22-cv-00055-REP

Important Documents

For additional information on the Settlement, please select from the documents listed below.



[Notice \(/Content/Documents/Notice.pdf\)](/Content/Documents/Notice.pdf)



[Class Action Complaint \(/Content/Documents/Complaint.pdf\)](/Content/Documents/Complaint.pdf)



[Plaintiffs' Motion to Direct Notice of Proposed Settlement to the Class \(/Content/Documents/Motion to Direct Notice of Settlement.pdf\)](/Content/Documents/Motion to Direct Notice of Settlement.pdf)



[Plaintiffs' Memorandum in Support of Motion to Direct Notice of Proposed Settlement to the Class \(/Content/Documents/Memo ISO Motion to Direct Notice to Class.pdf\)](/Content/Documents/Memo ISO Motion to Direct Notice to Class.pdf)



[Declaration of Brian D. Penny in Support of Motion to Direct Notice of Proposed Settlement to the Class \(/Content/Documents/Decl Penny ISO Motion to Notice Class.pdf\)](/Content/Documents/Decl Penny ISO Motion to Notice Class.pdf)



[Order Granting Preliminary Approval of Settlement and Directing Notice to Class \(/Content/Documents/Order Granting Preliminary Approval.pdf\)](/Content/Documents/Order Granting Preliminary Approval.pdf)



[Settlement Agreement \(/Content/Documents/Settlement Agreement.pdf\)](/Content/Documents/Settlement Agreement.pdf)



[Amended Settlement Agreement \(/Content/Documents/Amended Settlement Agreement.pdf\)](/Content/Documents/Amended Settlement Agreement.pdf)



[Stipulation to Amend Settlement Agreement \(/Content/Documents/Stipulation to Amend Settlement Agreement.pdf\)](/Content/Documents/Stipulation to Amend Settlement Agreement.pdf)



[Appendix A – Class Policies \(/Content/Documents/Appendix A - Class Policies.pdf\)](/Content/Documents/Appendix A - Class Policies.pdf)



[Appendix C – Special Election Options \(/Content/Documents/Appendix C Special Election Options.pdf\)](/Content/Documents/Appendix C Special Election Options.pdf)



[Appendix D – Special Election Letter \(/Content/Documents/Appendix D Special Election Letter.pdf\)](/Content/Documents/Appendix D Special Election Letter.pdf)



[Class Counsel's Application for an Award of Attorneys' Fees and Expenses and Service Awards to the Named Plaintiffs \(/Content/Documents/Application for Attys Fees.pdf\)](/Content/Documents/Application for Attys Fees.pdf)



[Declaration of Brian D. Penny in Support of Attorneys' Fees and Expenses and Service Awards to the Named Plaintiffs \(/Content/Documents/Declaration of Penny ISO Final Approval.pdf\)](/Content/Documents/Declaration of Penny ISO Final Approval.pdf)



[Memorandum in Support of Class Counsel's Application for an Award of Attorneys' Fees and Expenses and Service Awards to the Named Plaintiff \(/Content/Documents/Memo ISO Application for Attys Fees.pdf\)](/Content/Documents/Memo ISO Application for Attys Fees.pdf)



[Memorandum in Support of Plaintiffs' Motion for Final Approval of Class Action Settlement \(/Content/Documents/Memo ISO Motion for Final Approval.pdf\)](/Content/Documents/Memo ISO Motion for Final Approval.pdf)



[Plaintiffs' Motion for Final Approval of Class Action Settlement \(/Content/Documents/Motion for Final Approval of Settlement.pdf\)](/Content/Documents/Motion for Final Approval of Settlement.pdf)

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Haney, et al. v. Genworth Life Insurance Company, et al. (/)

United States District Court for the Eastern District of Virginia (Richmond Division)
Case No. 3:22-cv-00055-REP

Contact Us

If you have any questions, you may contact the Settlement Administrator, or you may call Class Counsel. You should not contact the Court, Genworth, or Genworth's Counsel with questions about the Notice or the settlement, although you may contact Genworth, as usual, about your policy, benefits, or any election letter received.

Please ensure that you include your name and your return address on all correspondence.

Write Us:

Haney v. Genworth Settlement Administrator
P.O. Box 2860
Portland, OR 97208-2860

Call Class Counsel:

1-800-348-6192 (Toll-Free)

Call the Settlement Administrator:

1-855-662-0078 (Toll-Free)

[Contact Us \(/Home/ContactUs\)](#) [Privacy Policy \(https://www.epiglobal.com/en-us/general/eca-privacy-policy\)](https://www.epiglobal.com/en-us/general/eca-privacy-policy)
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Attachment 2



Exclusion Report - Haney v. Genworth

Number	Epiq ID	Policyholder Name
1	3	Roger A. Fine
2	2900	Denise M. Chroscinski
3	4385	Gary C. Nash
4	5296	Janice C. Gould
5	8721	Frances M. Valiska
6	12544	Roger H. and Mary Lee H. Meacham
7	15315	Joyce Caplan Fine
8	17384	Robert C. Nelson
9	17588	Rayner W. Kelsey
10	19052	Lynn G. and Beth E. Turner
11	24301	Connie Kinkle
12	24570	Amy Brownell
13	25389	Katharina E. DeHaas
14	26736	Donna J. Wiskow
15	28764	Eileen M. Halter
16	30092	Robert C. Stroup
17	39809	Gerald L. Gould
18	41540	Franklyn W. and Carolyn J. Roitsch
19	43409	Rose Tressel
20	45428	Edilberto P. Felix
21	45702	Robert G. Neumann
22	47185	Donald A. Parker
23	48346	Roger B. Bentley
24	50668	Anthony Galantino
25	53194	Vicki Gibbs
26	55047	Richard E. Murphy
27	55330	Karen M. and Greg A. Haub
28	58982	Laura Lee Power
29	60945	Elaine K. Drabenstot
30	61982	Charles V. Konkle
31	63073	Kristen R. Dotti
32	63745	Winifred J. Rush
33	63897	Jack D. and Olivia Kindig Wells
34	63971	Clifford and Nancy Coss
35	63976	Cynthia H. Ouzts
36	66290	Diane J. Butt
37	66433	Paula L. Bentley
38	68672	Rayner W. and Joanne E. Kelsey
39	70091	Elizabeth S. Cram
40	70467	Steven W. Ouzts



Exclusion Report - Haney v. Genworth

Number	Epiq ID	Policyholder Name
41	70571	Alice A. Neumann
42	77884	Margaret McKee
43	80605	Alvin and Sue Rykus
44	81117	John Mark and Susan G. Brabon
45	84067	Edward R. Parmer
46	86306	Dolores M. Sevier
47	86624	Cathy L. Konkle
48	93278	Mari Ogimachi
49	93550	Marian S. Fredner
50	95538	Gail E. Vick
51	98697	Ellen M. Broome
52	102177	Lloyd Kenneth and Carol D. Parson
53	105700	Billie Sue Easley
54	106985	Charlene E. Flynn
55	107028	Martha J. Nelson
56	110940	Larry and Joanne Graves
57	111901	James E. Flynn
58	112562	Liliana Binner
59	112764	Carol Hunt
60	117589	Kimberly A. O'Brien
61	117778	Orlo William and Mary Suzanne Pettit
62	118712	Harriet R. Greenfield
63	120454	Kay K. Bains
64	120715	Helen Gormley
65	121642	Barbara L. Schuhmann
66	123702	Cynthia A. Fadal
67	124679	Charles K. Valentine
68	127073	Karl R. Audenaerde and Greta A. Gabriels
69	134671	Linda B. Dumaine
70	135372	Janet Thomas
71	140233	Edward Chroscinski
72	143601	John Henry Campbell
73	144398	Delmar Norman Ford
74	146763	Collene S. Lehane
75	148350	Gerald R. Thalhammer
76	148363	Sylvia A. Hatem
77	148880	Jane Irene Goldman
78	152548	Catherine M. Stroup
79	153437	Joel Leslie Konigsberg
80	157045	Katherine S. and Daniel R. Frazier



Exclusion Report - Haney v. Genworth

Number	Epiq ID	Policyholder Name
81	157613	Pamela Senecke
82	158397	Robert B. Groseclose
83	158881	Paulette Stortz
84	161090	Kathy I. Voorhies
85	161248	Sandra J. Valentine
86	162052	David Thomas
87	162708	Dewey L. Bowen
88	163041	James and Cynthia Combs
89	163249	David Tressel
90	163644	Thomas F. Roberts
91	164170	Marilyn I. Wymore
92	165605	Kenneth M. and Janice L. Butner
93	168888	James E. and Margaret V. Byrd
94	169304	Susan C. Cooke
95	170860	Carol J Shapiro
96	171765	Carolyn Oswald
97	174185	Claudia J. Kelly
98	177833	William J. and Judith K. McCann
99	178452	Glenn C. Smith
100	178779	Elliot K. Sevier
101	179056	Lester C. and Lisa H. Caudle
102	179738	Jerry Hunt
103	182917	Susan B. Kapp
104	186734	Faye H. Parmer
105	186735	Walter Nussberger
106	189275	Robert M. Hustead
107	194207	Julie Jane Seeley
108	197968	Elizabeth Schacht
109	198300	Sandra Kornegay
110	201579	James Michael Wilhelm
111	207026	Adoracion P. Briones
112	208867	Michael A. and Julie Anne Ball
113	211057	Carl K. Fortney
114	211257	Joseph P. Welsh
115	211620	Shirley C. Tseng
116	215168	Rodney C. Tannehill
117	216039	Kirk Melvin
118	218624	Ramon O. Briones
119	219717	Jan P. and Caryl J. Dengel
120	220377	Gregory W. Johnson



Exclusion Report - Haney v. Genworth

Number	Epiq ID	Policyholder Name
121	222001	Donald C. and Patricia M. Jochem
122	222893	Tracey Baker
123	223607	Maria A. Diaz
124	224474	Geoffrey T. and Sandra S. Griffin
125	225051	Robert H. Benson
126	226870	Margaret A. Harris
127	229287	Gerald D. Cooke
128	232336	Elizabeth A. Stone
129	232514	Judy F. Clarke
130	233546	Melvin Wayne Taylor
131	234762	Ethel Viola Blevins
132	236528	Donna D. Skoll
133	240505	Oliver C. Hood
134	241228	Ruel Connor Craft
135	242137	Robert E. Ferrea
136	242437	Daniel Hsu
137	247957	Suzanne Weisband Tovar
138	250204	Judy B. Massengill
139	252486	Loyce O. Click
140	253065	Kathy B. Johnson
141	255453	Sophia Charlotte Hughes
142	257586	Don and Vera Hunziker
143	258587	Janet D. Gortz
144	260552	Allen L. Kapp
145	261080	Mark G. and Rebecca J. Miles
146	261853	Hoyle S. Broome
147	263578	Daniel W. Drabenstot
148	264572	Lawrence T. Hawley
149	266294	Hilda Marie Oakley
150	268802	Gregory H. Tovar
151	269753	Kevan A. Vick
152	272759	David Mark Huffman
153	287895	Camille C. Mitchell
154	296542	Michael E. and Debra A. Riley
155	297705	Stacey Paynter
156	300329	Julia M. Cameron
157	302274	Doris L. Fortney
158	304700	Sharon Rae Donovan
159	307408	Cheryl S. Hawley
160	309700	Carol A. Hood



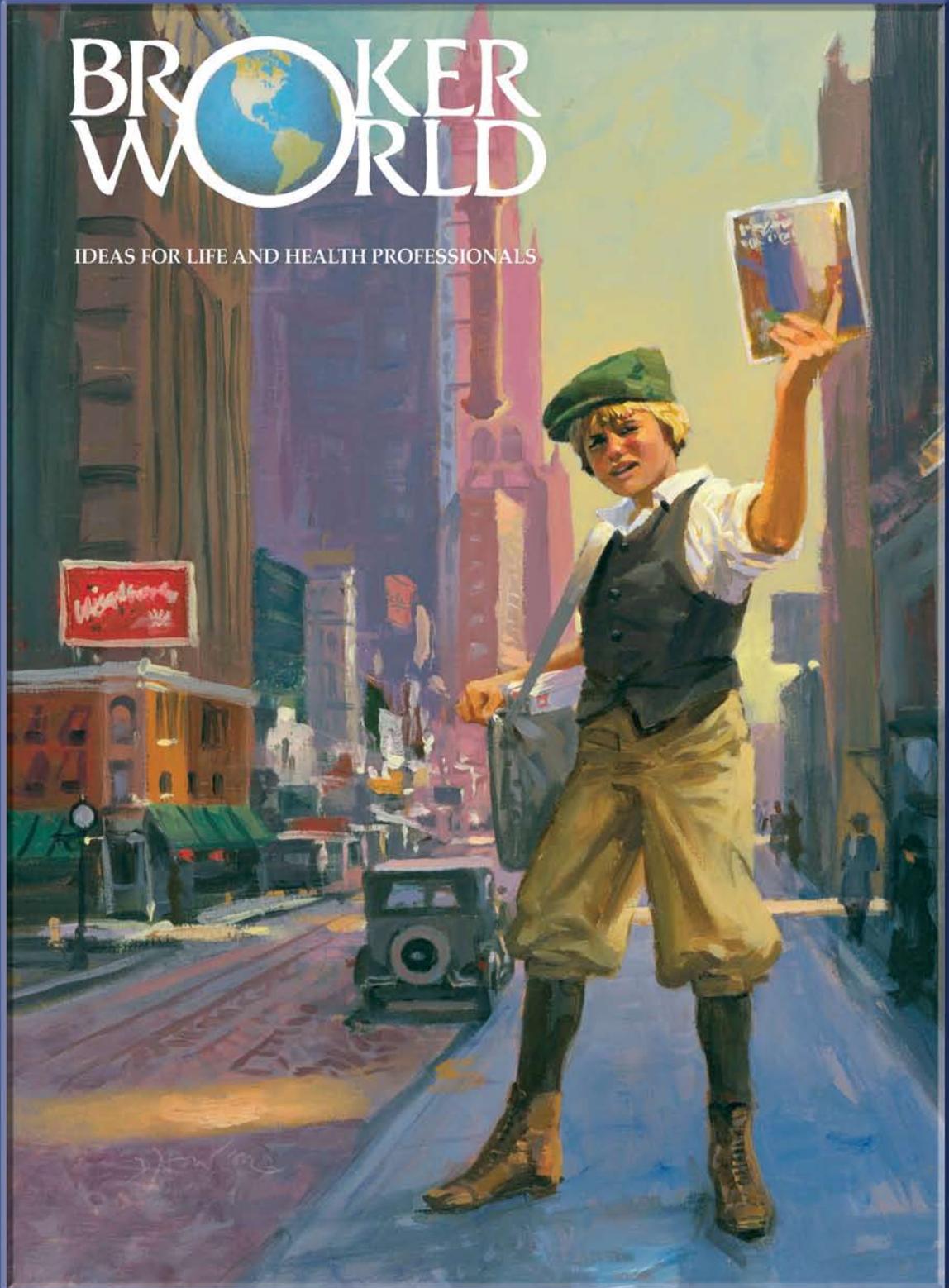
Exclusion Report - Haney v. Genworth

Number	Epiq ID	Policyholder Name
161	309790	John W. Roby and Amelia E. Hartman
162	310349	Jill Farmer Paris
163	311971	Mark I. Skoll
164	312421	Susan McMillan
165	312893	James E. and Rosemary M. Stevens
166	314262	Scott W. Cram
167	320120	J. Robert Kinkle
168	320370	Stephen Thomas and Jane H. Woodall
169	321765	Carolyn Rose Bloodworth
170	323098	Ann Nussberger
171	323557	Sandra K Heitman-Boden
172	325358	Joanne E. Kelsey
173	325530	D. Patricia Powell
174	328350	Joseph E. and Kathleen M. McCormick
175	328890	Timothy Wayne Seeley
176	329952	Susan Bhang
177	332005	Joy Stanowicz
178	334218	Rena K. Magolnick
179	335711	William L. and Linda L. Dalton
180	341653	Merle F. Halter
181	343872	Elise Streicher
182	344194	Kathleen Toussaint
183	344339	Remona Thompson
184	344801	Lee Ann Taylor
185	346887	Sheryl Ellen Ford
186	350585	Gayle M. Ferrea
187	350655	Stephen E. Clarke

EXHIBIT 2

2012

Long Term Care Survey



2012 Long Term Care Insurance Survey



CLAUDE THAU

FSA, MAAA, is president of Thau, Inc. He can be reached by telephone at 913-403-5824. Fax: 913-384-3781. Email: cthau@targetins.com.



DAWN HELWIG

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ALLEN SCHMITZ

FSA, MAAA, is a principal and consulting actuary in the Milwaukee office of Milliman, Inc. He can be reached at 15800 Bluemound Road, Suite 400, Brookfield, WI 53005. Telephone: 262-796 3477. Email: allen.schmitz@milliman.com.

The 2012 Long Term Care Insurance Survey is the 14th consecutive annual review of long term care insurance (LTCI) published by BROKER WORLD magazine. The survey compares products, reports sales distributions and analyzes the changing marketplace.

Unless otherwise indicated, references are solely to the U.S. stand-alone LTCI market and exclude the exercise of future purchase options or other changes to existing coverage. Stand-alone refers to LTCI policies that do not include death, annuity or disability income benefits (other than returning premiums upon death or waiving a surviving spouse's premiums). The data includes multi-life groups, which are certificates or individual policies sold with discounts and/or underwriting concessions, but not guaranteed issue, to groups of people based on common employment or affinity relationships. Except where true group is specifically mentioned, comments and data do not include sales of certificates to groups on a guaranteed issue basis. Note: Comparisons of worksite sales characteristics to overall sales characteristics will be discussed in the August issue of BROKER WORLD magazine.

Highlights from This Year's Survey

• Sales

✓ The 14 carriers that contributed statistical data to this survey sold 195,288 policies for \$453,530,347 of new annualized

premium in 2011 (plus \$5.5 million from 123 single premium policies), 1.3 percent more policies for 7.1 percent more annualized premium in 2011 than in 2010, not counting single premium cases.

considerations:

Most *shared care* policies allow a claimant to dip into their spouse's policy, after exhausting their own policy. If two four-year BP policies are shared, each is counted as a four-year BP policy in this study. While the combined benefit period is limited to eight years, either insured could use more than four years, added value that is not reflected in our 4.32 statistic.

Some *shared care* policies maintain independent coverage for each insured, but add a third pool that either insured could use. If the base coverage is four years, the survey classifies them as four-year policies, but either person has access to eight years of benefit, and the total maximum is 12 years.

Partly offsetting these understatements of protection, there is an overstatement when an eight-year *joint shared* policy is sold; each insured is counted as having an eight-year benefit period, but together they have only eight years. Such sales started to decrease in the latter part of 2011.

Maximum Daily or Monthly Benefit. As indicated in Table 7 the average maximum daily benefit continued to increase slightly, to about \$156 per day. Although the table displays maximum daily benefit, 72.8 percent of 2011 policies were sold with a monthly or weekly maximum, which is superior. Because of higher prices, some buyers are beginning to select lower benefits, focusing on covering meaningful home care coverage and co-insuring some of the cost of nursing home care, should that become necessary.

More than 10 percent of the policies each year have had lower than \$100 a day (or \$3,000 a month) initial maximum benefits. One spouse might not really want coverage or might already have coverage, but buys a minimal policy to obtain a both-buy discount for the other spouse. Sometimes small policies are purchased as core/buy-up multi-life programs or to satisfy minimum number-of-lives requirements.

Benefit Increase Features. Benefit increases were as robust in 2011 as in 2010, which is surprising given some carriers' slogans that "3 percent is the new 5 percent." Applying

Table 7
Sales By Maximum Daily Benefit

Maximum Daily Benefit	2011	2010	2009	2008	2007	2006
Less Than \$100	11.7%	12.0%	12.1%	10.6%	10.6%	10.7%
\$100 - \$149	33.5	32.4	33.6	34.0	37.0	39.9
\$150 - \$199	31.8	31.0	31.3	32.9	32.2	31.7
\$200 - \$249	16.1	17.4	23.0	22.5	20.2	17.7
\$250 - \$299	4.1	3.9	For 2006-2009, policies of \$250 and more are included above with \$200-\$249.			
\$300 and Above	2.8	3.3				

Table 8
Sales by Benefit Increase Type

Benefit Increase Type	2011	2010	2009	2008	2007	2006
Level Premium Benefit Increases						
5% Compound for Life	35.3%	34.9%	41.2%	47.6%	47.7%	47.6%
5% Compound for 20 Years	0.9*	—	—	—	—	—
4% Compound	0.5	0.4	—	—	—	—
3% Compound	17.1	8.8	—	—	—	—
Other Compound	3.5	3.6	6.8	6.1	4.5	5.3
5% Simple for Life	9.7	12.2	14.6	18.3	20.2	19.4
Other Simple	0.0	0.0	0.0	0.5	0.6	0.7
Indexed Level Premium	8.1	14.4	10.9	6.0	3.7	—
Increasing Premium Benefit Increases						
Step-Rated	0.0	0.0	0.0	2.3	2.6	—
Deferred Compound Op	2.0	1.3	—	—	—	—
FPO: Indexed	0.0	0.6	0.4	0.7	0.0	Incl Below
FPO: Fixed	12.8	15.6	16.8	10.1	9.1	12.6
No Benefit Increases	9.2*	7.9	9.0	8.3	11.6	14.3
Other	0.5	0.3	0.4	0.1	0.0	0.2

*Adjusted downward to make the total equal 100.0 percent.

the distribution of benefit increase features (and making some assumptions according to the consumer price index (CPI) and election rates) to project the age 80 maximum benefit for a 58-year-old purchaser, we conclude that 2011 purchasers will have 5 percent more benefit available at age 80

than 2010 purchasers, mainly due to the higher initial maximum daily benefit in 2011. *That's encouraging!*

Three percent compound increases enlarged market share by 8.3 percent at the expense of CPI indexed increases, which were minus 6.3 percent, and 5 per-

SPECIAL FOCUS

2012 Annual Long

The abbreviations in the exhibit include the following.

Row-by-row product details continue on page 14.

Table 17
Description of Abbreviations

Abbreviation	Meaning	Abbreviation	Meaning
AAW	Actively-at-Work	K; KK	One Thousand; One Million
ADL	Activities of Daily Living	LT	Lifetime Benefit Period
Amt(s)	Amount(s)	Max	Maximum
APC	Alternate Plan of Care	MDB	Maximum Daily Benefit
App(s)	Application(s)	MGI	Modified Guaranteed Issue
Alt	Alternate	Mo(s)	Month(s)
Avail	Available	Orig MDB*	Original Maximum Daily Benefit
Ben	Benefit	NA	Not Applicable
BIO*	Benefit Increase Option (Inflation Protection)	NB	New Business
BP	Benefit Period	NH	Nursing Home
CBIO*	Compound Benefit Increase Option (Inflation Protection)	NS	Non-Smoker / Non-User of Tobacco
Comp*	Compound	Pfd	Preferred Risk Class
Coord	Coordination	Prem	Premium
CPI*	Consumer Price Index	Reimb	Reimbursement
Ee(s)	Employee(s)	Rec'd	Received
Elim or EP	Elimination Period	Reqt	Requirement
Er-Pd	Employer-Paid	SUW	Simplified Underwriting
Extra \$	Feature Costs Extra	Svc	Service Days
FC	Facility Care	To 2x*	Until Benefit Doubles
FO	Facility Only	TQ	Tax-Qualified
FPO	Future Purchase Option	UW	Underwriting
HC	Home Care	WP	Waiver of Premium
HC 25%/1Yr	25% of Home Care Benefit for Maximum of 1 Year	w/	With
NH 75%/4Yrs	75% of Nursing Home Benefit for Maximum of 4 Years	x; 2x	Multiplied By; Two Times
HCA	Home Care Agency	Yr(s)	Year(s)
HCBC	Home and Community Based Care	\$	Money (Premium)
HCO	Home Care Only (No Facility Coverage)	<	Less Than
Incl	Included	>	Greater Than
Incr	Increasing	\$75/Trip x	\$75 Per Trip, Limited 4x/Yr to Four Times Per Year
IR	Independent Review (Of Claims)		*See page 26, last paragraph under "Benefit Increase Features."

1 COMPANY NAME

2	Policy Type
3	Product Marketing Name
4	Policy Form Number
5	Year First LTCI Policy Offered
6	Year Current LTCI Policy Was Priced
7	Jurisdictions LTCI Available
8	State Partnerships (as of January 1, 2012)
9	Financial Ratings (as of December 31, 2011)
10	A.M. Best
11	Standard & Poor's
12	Moody's
13	Fitch
14	COMDEX Ranking (as of May 1, 2012)
15	Financials (Millions)
16	Assets (December 31, 2011)
17	Surplus (December 31, 2011)
18	Percent Increase (Assets, Surplus)
19	LTCI Premium (Millions)
20	2011 First Year Premium
21	2011 End of Year In-Force Premium
22	Percent Increase (New Business, In-Force)
23	LTCI Lives Insured
24	2011 First Year Issued
25	2011 End of Year In-Force
26	Percent Increase (New Business, In-Force)
27	Policy Ranges and Elimination Period Terms
28	Issue Age Range
29	Daily, Weekly or Monthly Benefit Range
30	Benefit Periods and/or Pools
31	Elimination Periods
32	Vanishing, Cumulative
33	Elimination Period Crediting
34	Zero-Day HCBC EP with Longer NH EP
35	Policy Benefits
36	Number of Benefit Pools, EPs
37	HCBC Payment Basis
38	Indemnity Facility, Indemnity HCBC
39	Full Cash (Disability) Benefit
40	Partial Cash (Disability) Alternative
41	Additional Cash Benefit
42	Assisted Living (Percent of NH Max)
43	Home Care Health Aide (Percent of NH Max)
44	Independent Professional, Non-Professional
45	Homemaker Services
46	Informal Care (Other Than Family)
47	Informal Family Care
48	Benefit Increase Features
49	Lifetime Compound Increases (Level Premium)
50	Lifetime Simple Increases (Level Premium)
51	Other Increases (Level Premium)
52	Increased Before Claims Deducted?
53	Future Purchase Options (FPO)
54	Benefit Increase Comments
55	Other Comments

Term Care Insurance Survey

See page 12 for description of abbreviations.

AMERICAN GENERAL	BANKERS LIFE & CASUALTY		COUNTRY LIFE	
Comprehensive	Comprehensive	Comprehensive	Facility Only	Comprehensive
American General LTC	GR-N620 (Standard Package)	GR-N650 (Premier Package)	Facility Only LTC	Comprehensive LTC
8000	GR-N620	GR-N650	LTC-520	LTC-500
2010		1985		1989
2009		2009		2004
All But FL, MA, NY, & VT		All States Except NY		23 States, No Northeast
30		36 (Incl CA, CT, IN)		17
A		B+		A+
A+		BB+		Not Rated
A2		Ba1		Not Rated
A		BBB-		Not Rated
82		52		88
\$43,532		\$14,516		\$8,947
\$7,394		\$817		\$1,001
10%, 26%		6%, 5%		4%, 2%
\$0.3		\$16.9		\$1.8
\$0.3		\$554.5		\$24.0
100%, 73%		-20%, -3%		-11%, 5%
121		10,374		977
104		313,140		16,868
75%, 70%		-22%, -5%		-7%, 4%
21 - 84		18 - 89		18 - 84
\$2,000 - \$12,000/Month		\$40 - \$400		\$50 - \$350
7 Pools: \$100K - \$1KK		1, 2, 3, 4, 5, 6, 8, L (500 - 2,500 Day BP Also Available)		2, 3, 4, 5, L
30, 90, 180, 365		0, 15, 30, 60, 90, 180, 365, 730, 1095, 1460		30, 90, 180, 365
Yes, Yes		Yes, Yes		Yes, Yes
Calendar Days		3 HC/Week=7		Service Days
Extra Cost; HC Days Retire FC EP		No	Facility Only	No
1, 1		1, 1	Facility Only	1, 1
Monthly	Weekly	Monthly	Facility Only	Daily (Monthly Extra \$)
No, No		No, No	No, NA	Both Extra Cost
NA		NA		NA
40% (Automatic)		NA		NA
NA		25% (Extra Cost)		NA
100%	50%	100%		100%
100%	50%	50%, 100%	Facility Only	50%, 100%
Same, See Cash Alternative		Same, Not Covered	Facility Only	Both Same As Above
Same As Custodial Care		Must Be Incidental	Facility Only	Must Be Incidental
Use Cash Alt (Included)		Not Covered	Facility Only	
Use Cash Alt (Included)		Not Covered	Facility Only	Use Excess Indemnity Over Qualified Cost
3%, 5%		2%, 3%, 4%, 5%		5%
NA		5%		5%
NA		2 Decreasing Inflation Options Are Also Offered (See Other Comments)		NA
Yes		No		No
NA		15% Every 3 Years		NA
		FPO: To 89 If No Declines or Claims		NA
3% & 5% Compound with Graded Premium to Age 65 or For Life		5% Compound Through Age 60. Then Either 3% Compound or 5% Simple Through Age 75. Then 0%; HCO; FO		

SPECIAL FOCUS

• **Company Name** (rows 1 and 56) lists the participating insurers in alphabetical order at the top of each page (Knights of Columbus and John Hancock were reversed for better column readability). Each company may display as many as three products.

• **Policy Type** (row 2) distinguishes between comprehensive, home care only and facility only products, indicating if the product is especially focused for worksite. In row 2 and the "Comment" rows (55 and 106), we identify five insurers which offer facility only coverage and three insurers which offer home care only. Four insurers display worksite only products and one displays a product aimed at the substandard market.

One insurer has a "disability" product (pays the full benefit based only if the insured is chronically ill). Four insurers have products which allow a portion of their home care benefit (ranging from 33 to 40 percent) to be used as a cash alternative. One product offers indemnity coverage (full benefit if someone is chronically ill and incurs a qualified cost) for a higher premium (row 38).

Where appropriate, we have inserted indicators such as "Disability," "Facility Only" to indicate why a particular row might not apply to that product.

• **Product Marketing Name** (rows 3 and 57) is the product's common brand name.

• **Policy Form Number** (row 4) is generic and may vary by state.

• **Year First LTCI Policy Offered** (row 5) is the year the insurer first offered individual LTCI coverage.

• **Year Current LTCI Policy Was Priced** (row 6) is the year the current product was most recently priced.

• **Jurisdictions LTCI Available** (row 7) generally shows the jurisdictions in which the insurer sells, or intends to sell, LTCI. A displayed product may not be available in all of these states.

• **State Partnerships** (row 8) identifies the number of state partnerships in which the insurer participated as of January 1, 2012, and specifically identifies any of the original four state partnerships (CA,

CT, IN and NY) in which the insurer participates.

• **Financial Ratings and Ranking** (rows 9-14) lists each company's ratings from the four major rating agencies (A.M. Best, Standard & Poor's, Moody's, and Fitch). Row 14 shows Ebix's COMDEX ranking as of May 1, 2012.

The COMDEX ranking is from *VitalSigns*, a publication of EbixLife, Inc. EbixLife converts each company's A.M. Best, Standard & Poor's, Moody's, and Fitch ratings into a percentile ranking. For insurers rated by at least two of these rating agencies, EbixLife produces a COMDEX ranking by averaging that insurer's percentile rankings.

The COMDEX ranking has two key advantages: it combines the evaluations of several rating agencies and its percentile ranking makes it easier to understand how a company compares to its peers.

• **Financials** (rows 15-18) reflect the insurer's statutory assets and surplus (in millions) for year-end 2011, and the percentage changes from the previous year. These figures do not include assets and surplus of related companies nor do they reflect assets under management.

• **LTCI Premium** (rows 19-22) lists (1) the annualized premiums (in millions) for policies sold in 2011, and separately, of (2) policies in-force on December 31, 2011, and (3) the percentage changes from the previous year. Single premium sales are excluded from the annualized premium, but the amount of single premium is disclosed parenthetically.

• **LTCI Lives Insured** (rows 23-26) shows the number of lives covered by new policies and by year-end in-force policies, as well as the year-to-year percentage changes.

• **Policy Ranges and Elimination Period Terms** (rows 27-34) shows the product's issue age, daily benefit, benefit period (BP) and elimination period (EP) ranges. It also explains how the EP works.

Issue Age Range shows that only two participants issue LTCI to people older than age 85.

Daily, Weekly or Monthly Benefit Range

2012 Annual Long

56	COMPANY NAME
57	Product Marketing Name
58	Sales Rep/Source for More Info
59	Ancillary Benefits
60	Bed Reserve Days/Year, Respite during EP?
61	Alternative Plan of Care (APC)
62	Home Modification
63	Caregiver Training Benefit
64	Emergency Alert
65	Equipment Benefit
66	Drug, Ambulance Benefit
67	Claims Issues
68	Conditional Receipt Protection
69	Coverage Beyond USA
70	Provider Discounts (Directly or Indirectly)
71	Care Coordination Available From
72	Third Party Limits
73	Independent Review
74	Premiums and Discounts
75	Preferred Discount
76	Substandard Extra Ratings
77	Two-Spouse, Two-Partner Discounts
78	Requires Identical Coverage?
79	If Spouse is a Surprise Decline?
80	If Spouse Answers Yes to KnockOut Question?
81	One-Spouse Discount (Only 1 Spouse Applies)
82	Maximum Best UW Class & Spouse Discount
83	Later Marriage Earns Discount For
84	Most Common Employer, Affinity Discount
85	Minimum Size Employer Group, Number Apps
86	Minimum Size Affinity Group, Number Apps
87	Credit Card: Frequencies Accepted
88	Non-Level Premiums
89	Fixed Periods
90	Paid Up at Ages
91	Other Options
92	Waiver of Premium
93	First Premium Waived (Days)
94	HCBC Waiver
95	Joint Waiver
96	Return of Premium Upon Death (ROP)
97	ROP Design 1
98	ROP Design 2
99	Other Riders and Features
100	Paid Up Survivor Benefit
101	Both People Must Survive Number of Years
102	Claim-Free Requirement?
103	Shared Care Benefit
104	Other Shared Care Aspects
105	Restoration of Benefits
106	Other Comments
107	Non-Tax-Qualified Policies (NTQ)
108	NTQ: Percent of Sales, Extra Cost
109	NTQ: Facility and Home Care Triggers
110	Combination Policies Offered

Term Care Insurance Survey

See page 12 for description of abbreviations.

AMERICAN GENERAL	BANKERS LIFE & CASUALTY		COUNTRY LIFE	
American General LTC 877-399-7747	GR-N620 (Standard Package)	GR-N650 (Premier Package) www.bankerslife.com	Facility Only LTC	Comprehensive LTC 866-856-4760
30+Other, Incl Below*	60+Other, No	60+Other, 21	30, 30	
Contractual	No	Contractual After EP	Contractual After EP	
10% Lifetime Max*	NA	30 x MDB	Facility Only	50 x MDB
Included Above*	NA	25% of Monthly HC	Facility Only	3 x MDB
APC	NA	5% HC MDB; Max 12 Months	Facility Only	50 x MDB
Included Above*	NA	5% HC MDB; Max 12 Months	Facility Only	50 x MDB
NA	NA, \$75/Trip x 4x/Year		Facility Only	NA
Full, After UW Req	No		No	
International (= Cash Alt For 2 Yrs)	Canada (Other = 30 Days)		No	
No	No		No	
Client's Choice	Through Network		Through Network	
None	None		None	
As Required By Law	As Required By Law		Extended to In Force in States with IR	
10%	10%		10%	
Rarely and Case Specific	25%, 50%, 100%		None	
30%, 30%	35%, 10%		30%, 0%	
No	No		No	
Reduced	Reduced		Reduced	
Reduced	Reduced		Reduced	
15%	15%		15%	
40%	41.50%		40%	
Current & New Spouse	Current & New Spouse		Current & New Spouse	
5%, 5%	NA, 5%		NA	
10, 10	NA		NA	
10, 5	Varies		NA	
M, Q, SA, A	None		None	
NA	10, 20		10	
65 (10 Years If Longer)	NA		65	
See Line 54	NA		NA	
Elimination	Elimination		Elimination	
Yes	Yes		Facility Only	Yes
Extra Cost	Extra Cost	Automatic	Extra Cost	
Net, 100%	Net; Grades from 10% @4th Year to 100% @ Year 20+		Net, Decrease to \$0 @Age 80	
NA	NA		NA	
Extra Cost	Extra Cost		Extra Cost	
10	10		10	
Yes, No	No		No	
Permanent Extra \$, Third Pool	Permanent Extra \$, Third Pool		NA	Permanent Extra \$
Extra Cost	Extra Cost	Included	Extra Cost	
Electronic Submission Available From Proposal System	Extra-Cost Rider Ups Survivor's Daily Benefit 50% But Survivor's Prem is Unchanged; Return of Premium Applies on Lapse Also			
100% TQ	8%, 6%		100% TQ	
NA	Double/2 ADL, Double/2 ADL		NA	
None	Life, Annuities		Life	

2012 Annual Long Term Care Insurance Survey

1 COMPANY NAME	GENWORTH		KNIGHTS OF COLUMBUS	
2 Policy Type	Comprehensive	Comprehensive Worksite	Facility Only	Comprehensive
3 Product Marketing Name	Privileged Choice Flex	LTC Business Solutions	K of C Care	K of C Care
4 Policy Form Number	7052	7050	NHC01	LTC01
5 Year First LTCI Policy Offered	1974		2000	
6 Year Current LTCI Policy Was Priced	2011	2008	1999	
7 Jurisdictions LTCI Available	All States & DC		All States & DC	
8 State Partnerships (as of January 1, 2012)	31 (Incl CA, CT, IN, NY)		None	
9 Financial Ratings (as of December 31, 2011)				
10 A.M. Best	A		A++	
11 Standard & Poor's	A		AAA	
12 Moody's	A2		Not Rated	
13 Fitch	A-		Not Rated	
14 COMDEX Ranking (as of May 1, 2012)	78		100	
15 Financials (Millions)				
16 Assets (December 31, 2011)	\$35,784		\$18,027	
17 Surplus (December 31, 2011)	\$3,205		\$1,687	
18 Percent Increase (Assets, Surplus)	7%, 5%		7%, -1%	
19 LTCI Premium (Millions)				
20 2011 First Year Premium	\$206.5		\$3.6	
21 2011 End of Year In-Force Premium	\$2,195.5		\$44.5	
22 Percent Increase (New Business, In-Force)	45%, 11%		6%, 10%	
23 LTCI Lives Insured				
24 2011 First Year Issued	90,190		2,946	
25 2011 End of Year In-Force	1,149,410		37,071	
26 Percent Increase (New Business, In-Force)	42%, 5%		1%, 8%	
27 Policy Ranges and Elimination Period Terms				
28 Issue Age Range	18 - 79		30 - 85	
29 Daily, Weekly or Monthly Benefit Range	\$50 - \$400		\$50 - \$400	
30 Benefit Periods and/or Pools	2, 3, 4, 5, 6, 8, 10, L		3, 5, L	
31 Elimination Periods	30, 90, 180		30, 60, 90, 180	
32 Vanishing, Cumulative	Yes, Yes		Yes, No	
33 Elimination Period Crediting	Choice of Service Days; or Calendar Days After 1st Expense		Calendar Days	
34 Zero-Day HCBC EP with Longer NH EP	Extra Cost; HC Days Retire FC EP		No	
35 Policy Benefits				
36 Number of Benefit Pools, EPs	1, 1		1, 1	
37 HCBC Payment Basis	Monthly		Facility Only	Monthly
38 Indemnity Facility, Indemnity HCBC	No, No		No, NA	No, No
39 Full Cash (Disability) Benefit	NA		NA	
40 Partial Cash (Disability) Alternative	NA		NA	
41 Additional Cash Benefit	NA		NA	
42 Assisted Living (Percent of NH Max)	50%, 100%	100%	100%	
43 Home Care Health Aide (Percent of NH Max)	50%, 100%	50%, 75%, 100%	Facility Only	100%
44 Independent Professional, Non-Professional	Both Same As Above		Facility Only	Both Same As Above
45 Homemaker Services	Same As Custodial Care		Facility Only	Same As Custodial Care
46 Informal Care (Other Than Family)	Same As Above		Facility Only	Same As Above
47 Informal Family Care	Family Members Only If Normal Compensation as HC Provider Employee		Facility Only	Not Covered
48 Benefit Increase Features				
49 Lifetime Compound Increases (Level Premium)	3%, 5%		5%	
50 Lifetime Simple Increases (Level Premium)	5%		NA	
51 Other Increases (Level Premium)	NA		NA	
52 Increased Before Claims Deducted?	Yes		No	
53 Future Purchase Options (FPO)	NA	15.76% Every 3 Years	10% of Orig MDB Every 2 Yrs Until 2 Straight Declines or On Clm	
54 Benefit Increase Comments	NA			
55 Other Comments				
Same Generation Relatives Can Qualify for Spousal Discounts; Coordinates Benefits with All Other LTCI				

See page 12 for description of abbreviations.

JOHN HANCOCK	MASSMUTUAL	MEDAMERICA		MUTUAL OF OMAHA	
Comprehensive	Comprehensive	Comprehensive	Comprehensive with Cash Rider	Comprehensive	Worksite
Custom Care III	SignatureCare 500	Simplicity II	FlexCare	Mutual Care My Way	Mutual Care at Work
LTC-11	MM500-P-1	SPL2-336	FC-336	LTC09M	
1987	2000	1987		1987	
2010	2011	2007	2011	2011	
All States & DC	All States & DC & Puerto Rico	All States & DC		All States & DC	
28 (Incl CA,CT,IN,NY)	33 (Including CT,IN,NY)	16 (Including CT, NY)		32	
A+	A++	B++		A+	
AA-	AA+	A-		A+	
A1	Aa2	Not Rated		A1	
AA-	AA+	Not Rated		Not Rated	
93	99	50		91	
\$218,287	\$148,600	\$1,126		\$5,247	
\$4,971	\$11,417	\$61		\$2,315	
2%, -4%	5%, 10%	18%, -12%		0%, -10%	
\$51.8	\$20.4	\$7.6		\$25.7	
\$1,514.4	\$178.7	\$128.4		\$160.7	
-64%, 1%	34%, 10%	23%, 11%		80%, 17%	
20,585	6,181	4,676		11,944	
724,257	69,329	80,846		88,698	
-66%, 0%	35%, 8%	16%, 1%		59%, 11%	
18 - 79	18 - 84	18 - 85		18 - 79	
\$50 - \$500	\$50 - \$400	\$1,500 - \$16,000/Mo	\$1,500 - \$15,000/Mo	\$1,500 - \$15,000/Month	
2, 3, 4, 5, 6, 10	2, 3, 4, 5, 6	5 Pools: \$100K-\$500K,\$1KK	1, 2, 3, 4, 5, 6, 7, 8, 10	2, 3, 4, 5, 6, 8, L	2, 3, 4, 5, 6, 8
30, 60, 90, 180, 365	30, 60, 90, 180	30, 60, 90, 180	30, 60, 100, 180, 365	0, 30, 60, 90, 180, 365	90, 180, 365
Yes, Yes	Yes, Yes	Yes, Yes		Yes, Yes	
Service Days	Service Days	Calendar Days		Each Calendar Day, Starting with the First Day of Paid Qualified Services	
Extra Cost; HC Days Retire FC EP	Extra Cost; HC Days Retire FC EP	No	Extra Cost	Extra Cost	
1, 1	1, 1	1, 1		1, 1	
Daily (Monthly Extra \$)	Daily (Monthly Extra \$)	Monthly		Monthly	
No, No	No, No	Disability, Disability	NA, NA	No, No	
NA	NA	Automatic	Extra Cost	NA	
NA	NA	Disability	NA	35% of HC (Automatic)*	
15% (Extra Cost)	NA	NA		NA	
100%	100%	100%	50%, 75%, 100%, 125%	50%, 75%, 100%	
100%	100%	75%, 100%	50%, 75%, 100%, 125%	50%, 75%, 100%	
Up to 75% If No HCA in 40 Miles	Same, Not Covered	Disability	Cash Rider Can Cover This	Same, See Cash Alternative	
Must Be Incidental	Same As Custodial Care	Disability	Same As Custodial Care	Same As Custodial Care	
Not Covered	Not Covered				
Family Members Only If Normal Compensation as HC Provider Ee	Not Covered	Disability (Cash) Benefit Can Be Used for Any Purpose	With Cash Rider, Benefit Can Be Used for Any Purpose	Cash Alternative Has 0 Day Elim; If Used It Delays Satisfying the EP Requirements	
5%, CPI	3%, 5%	3%, 5%		3%, 4%, 5%	
NA	NA	5%	3%, 5%	5%	
CPI to Age 75	NA	5% Compound to 2x	5% C BIO to 2x; Tiered; MDB Incr	5% Compound 20 Years	
No	No	No		No	
10%/3 Yrs If No BIO (5%/3 Yrs w/CPI BIO)	NA	NA	10% Every 2 Years Until Declined 2x or On Claim	Can Add 3% or 5% to No-Incr Pol in 1st 5 Yrs If (1) Not Waiving Prem (2) Not Chronically Ill & Rec'd No Bens in Past 2 Yrs	
FPO Lost if 2 Declines, Above Age 75 or On Claim in Past 2 Yrs. Option to Convert from FPO to CPI at 65.	Participating Policy: Dividends Payable	Pays Monthly Cash Ben w/o Regard to Svcs or Amts Used; HCO & FO Available	Tiered BIO=5% Comp thru 60, 5% of Age 60 MDB thru 75, Then 0. MDB Incr Doesn't Incr Pool	Up to 2x Monthly Maximum for Injury, Before 65 Additional Amount Not +/- from Pool	

2012 Annual Long Term Care Insurance Survey

56	COMPANY NAME	GENWORTH		KNIGHTS OF COLUMBUS	
57	Product Marketing Name	Privileged Choice Flex	LTC Business Solutions	K of C Care	K of C Care
58	Sales Rep/Source for More Info	www.genworth.com		Paul Ochs 203-752-4069	
59	Ancillary Benefits				
60	Bed Reserve Days/Year, Respite during EP?	60+Other, 30		21, 21	
61	Alternative Plan of Care (APC)	Contractual After EP		By Company Practice	Contractual After EP
62	Home Modification	3 x Monthly Max*		Facility Only	\$1,000/Calendar Year
63	Caregiver Training Benefit	Included Above*		Facility Only	\$500/Calendar Year
64	Emergency Alert	Included Above*		LifePlans Provider Discount Program*	
65	Equipment Benefit	Included Above*		Facility Only	\$1,000/Calendar Year
66	Drug, Ambulance Benefit	NA		NA, \$250/Year	
67	Claims Issues				
68	Conditional Receipt Protection	Limited, After Application	NA	No	
69	Coverage Beyond USA	NH 75%/4 Yrs; HC 25%/1 Yr	NH 75%/4 Years	No	
70	Provider Discounts (Directly or Indirectly)	Yes, for Relatives Too	Yes	Yes	
71	Care Coordination Available From	Through Network		Client's Choice*	
72	Third Party Limits	None		\$500/Calendar Year	
73	Independent Review	Initiates IR for Client		Extended to All States and All In Force	
74	Premiums and Discounts				
75	Preferred Discount	20% (10% for Both-Buy)		None	
76	Substandard Extra Ratings	None		None	
77	Two-Spouse, Two-Partner Discounts	40%, 40%		15%, 0%	
78	Requires Identical Coverage?	No		No	
79	If Spouse is a Surprise Decline?	Reduced		Unchanged	
80	If Spouse Answers Yes to KnockOut Question?	Lost		Unchanged	
81	One-Spouse Discount (Only 1 Spouse Applies)	25% If Second Spouse Applies and Is Not Rejected for a Knockout Reason		10%	
82	Maximum Best UW Class & Spouse Discount	50%		15%	
83	Later Marriage Earns Discount For	Current (If Within 12 Months) & New Spouse		New Spouse	
84	Most Common Employer, Affinity Discount	5%, NA	About 13%, NA	NA	
85	Minimum Size Employer Group, Number Apps	4 Insured Lives (At Least 2 Ees)	7 Issued* Lives	NA	
86	Minimum Size Affinity Group, Number Apps	NA		NA	
87	Credit Card: Frequencies Accepted	M, Q, SA, A (First Payment Only)		None	
88	Non-Level Premiums				
89	Fixed Periods	10		NA	
90	Paid Up at Ages	65		NA	
91	Other Options	NA		NA	
92	Waiver of Premium				
93	First Premium Waived (Days)	Elimination		Elimination	
94	HCBC Waiver	Yes		Yes	
95	Joint Waiver	Automatic w/Shared Care; Otherwise No		Not Offered	
96	Return of Premium Upon Death (ROP)				
97	ROP Design 1	Net, 100% Starts @10th Year		Net, 100% Starts @10th Year	
98	ROP Design 2	Net, Decreasing to \$0 @Age 75		NA	
99	Other Riders and Features				
100	Paid Up Survivor Benefit	Extra Cost		Not Offered	
101	Both People Must Survive Number of Years	7 or 10		NA	
102	Claim-Free Requirement?	Yes (Alt = No)		NA	
103	Shared Care Benefit	Extra Cost Ends If Partner Dies		Permanent Extra \$	
104	Other Shared Care Aspects	Joint WP; Survivor Protected for At Least 1/2 Original Bucket			
105	Restoration of Benefits	Extra Cost		NA	
106	Other Comments	Online Live+Well Program Developed by Mayo Clinic	*Full UW: Insurable NS Ees Upgraded to Pfd Rates; SUW: Er-Pd Ees & AAW Spouses		
107	Non-Tax-Qualified Policies (NTQ)				
108	NTQ: Percent of Sales, Extra Cost	100% TQ		Only in CA: 0%, 10%	
109	NTQ: Facility and Home Care Triggers	NA		More Than 6 ADLs, Same As TQ	
110	Combination Policies Offered	Life		None	

See page 12 for description of abbreviations.

JOHN HANCOCK	MASSMUTUAL	MEDAMERICA		MUTUAL OF OMAHA	
Custom Care III 800-270-1700	SignatureCare 500 800-767-1000	Simplicity II http://agents.yourlongtermcare.com/	FlexCare	Mutual Care My Way 800-693-6083	Mutual Care at Work
60+Other, No	60+Other, No	Disability, No (Disability After EP)	30+Other, 30	30+Other, 30	
Contractual After EP	Contractual After EP	Disability	Contractual After EP	Contractual After EP	
30 x MDB*	APC	Disability	Same As Emergency Alert	2x Mo Max If Care Coord Is Used*	
Included Above*	5 x MDB	Disability	10x MDB*	Included Above*	
Included Above*	50% of MDB/Month	Disability	Covered Up to MDB, MedAmerica	Included Above*	
Included Above*	APC	Disability	May Agree to Pay More Via APC	Included Above*	
NA	1 x MDB/Mo, 4 x MDB/Yr	Disability	NA	NA	
Full, After UW Reqt	Full, After UW Reqt	No		Full, After UW Reqt	NA
International (365) Yes, for Relatives Too	1/2 MDB to 1/4 Max LT Benefit No	International: Disability	International: Reimbursement	Canada & UK; Indemnity for Other (365) No	
Client's Choice	Through Network	Company Staff	Company Staff*	Client's Choice*	
Up to 10 x MDB (1/3 Monthly Max)	None	None		None	
Extended to All States for NB	As Required By Law	Extended to All States and All In Force		As Required By Law	
10%	10%	10%		15%	
25%, 50%	25%, 100%, 400%	None		25%, 50%	
30%, 30%	30%, 30%	40%, 40%	30%, 30%	35%, 35%	
No	No	No		No	
Lost	Reduced	Reduced		Reduced	
Lost	Reduced	Reduced		Reduced	
0%	15%	20%	15%	15%	
35%	37%	46%	37%	44.75%	44.75% (Full UW); 35% (SUW); 15% (MGI)
Current & New Spouse	Current & New Spouse (Sometimes)	Current & New Spouse		Current & New Spouse	
5%, 5%	10%, 10%	5%, 5%	10%, 10%	NA, 5%	10%, NA
5, 3	3, 3	3, 1	3, 1	NA	SUW/MGI: 10, 10; Full UW: 3, 3
10, 3	10, 3	1, 1	3, 1	150 (250 If Not Local), 5 NA	
None	None	Q, SA, A		None	
20	NA	10		10, 20	
75	NA	65		65	
NA	NA	NA		NA	
Elimination	Elimination	Elimination		Elimination	
Yes	Yes	Yes		Yes, With 8 Days of Care/Month	
Extra Cost	Extra Cost	Extra Cost		Extra Cost	
Incl: Death Before 65	NA	Full, 100%	Net, 100% to 65, Grades to 0 @75	Net, 100% to Age 65, Then None	
NA	NA	Net, 100%	Net, 100% to 80, Then 0	Either Net or Full, 100%	
Extra Cost	Extra Cost	Extra Cost		Extra Cost	
10	10	10		10	
Yes	No	No		No	
Extra Cost Ends If Partner Dies. If Pool Depleted, Spouse <91 & No Claim in 2 Yrs, Can Buy 2 Yr BP	Permanent Extra \$, Third Pool Avail Only w/2Yr & 3Yr BPs	Permanent Extra \$ Must Keep 2 Years for Spouse	Permanent Extra \$, Third Pool That Can Differ From Client-Specific Pools	Extra Cost Ends If Partner Dies Must Leave 1 Year for Living Spouse	
NA	Extra Cost	Extra Cost		Extra Cost	
Independent Review of Claims Is Binding on JH	Loyal Customer Discount 5% All Yrs; FO Coverage Avail	Claims Paid Beginning of Month; No Need to Prove Amt of Claim	With Cash Benefit Rider, Claims PD Beginning of Month; No Need to Prove Amt of Claim	Spouse Security Benefit Pays 60% of Reimbursement Benefit; Benefits for Injury - Reimbursement Up to 2x Monthly Max	
100% TQ	100% TQ	100% TQ		100% TQ	
NA	NA	NA		NA	
Life, Annuities	None	None		Annuities	

2012 Annual Long Term Care Insurance Survey

1 COMPANY NAME	STATE FARM	TRANSAMERICA
2 Policy Type	Comprehensive	Comprehensive Worksite
3 Product Marketing Name	Long Term Care Insurance	TC II TC II Worksite
4 Policy Form Number	97062	ICC10 TLC-3
5 Year First LTCI Policy Offered	1997	1987
6 Year Current LTCI Policy Was Priced	2011	2011
7 Jurisdictions LTCI Available	All But MA, NJ, RI	All States & DC
8 State Partnerships (as of January 1, 2012)	26 (Incl CT, IN)	35 (Incl CT, IN)
9 Financial Ratings (as of December 31, 2011)		
10 A.M. Best	A++	A+
11 Standard & Poor's	AA	AA-
12 Moody's	Not Rated	A1
13 Fitch	AA+	AA-
14 COMDEX Ranking (as of May 1, 2012)	98	93
15 Financials (Millions)		
16 Assets (December 31, 2011)	\$108,097	\$102,718
17 Surplus (December 31, 2011)	\$60,791	\$5,122
18 Percent Increase (Assets, Surplus)	1%, -1%	-4%, 19%
19 LTCI Premium (Millions)		
20 2011 First Year Premium	\$13.2	\$14.4 (Plus \$4.5 of Single Premium)
21 2011 End of Year In-Force Premium	\$199.0	\$471.1
22 Percent Increase (New Business, In-Force)	17%, 15%	293%, 1%
23 LTCI Lives Insured		
24 2011 First Year Issued	6,617	7,095
25 2011 End of Year In-Force	128,072	264,020
26 Percent Increase (New Business, In-Force)	13%, 3%	198%, -1%
27 Policy Ranges and Elimination Period Terms		
28 Issue Age Range	30 - 79	18 - 79
29 Daily, Weekly or Monthly Benefit Range	\$100 - \$500 (Weekly for HC)	\$50 - \$400
30 Benefit Periods and/or Pools	2, 3, 5, 10	10 pools \$75K - \$1KK, Also 1, 2, 3, 4, 5, 6, L
31 Elimination Periods	30, 90, 180	0, 30, 60, 90, 180
32 Vanishing, Cumulative	Yes, Yes	Yes, Yes
33 Elimination Period Crediting	Service Days	Service Days
34 Zero-Day HCBC EP with Longer NH EP	No	Included
35 Policy Benefits		
36 Number of Benefit Pools, EPs	1, 1	1, 2 (0-day HC)
37 HCBC Payment Basis	Weekly	Daily (Monthly Extra \$)
38 Indemnity Facility, Indemnity HCBC	No, No	No, No
39 Full Cash (Disability) Benefit	NA	NA
40 Partial Cash (Disability) Alternative	NA	33% (Automatic)
41 Additional Cash Benefit	NA	NA
42 Assisted Living (Percent of NH Max)	100%	100%
43 Home Care Health Aide (Percent of NH Max)	100%	100%
44 Independent Professional, Non-Professional	Same, Not Covered	Same, See Cash Alternative
45 Homemaker Services	Same As Custodial Care	Same As Custodial Care
46 Informal Care (Other Than Family)	Not Covered	Use 33% Cash Alternative (Included) for Any Use
47 Informal Family Care	Not Covered	
48 Benefit Increase Features		
49 Lifetime Compound Increases (Level Premium)	5%	3%, 5%
50 Lifetime Simple Increases (Level Premium)	5%	NA
51 Other Increases (Level Premium)	NA	NA
52 Increased Before Claims Deducted?	No	No
53 Future Purchase Options (FPO)	Yes	No, but Deferred 3% or 5% (See Below)
54 Benefit Increase Comments	\$25 of MDB Every 5 Years From Ages 45-65 If Not Claim-Eligible	If no BIO is Purchased, It Can Be Bought at the 1st, 3rd or 5th Anniversary If Haven't Been Claim-Eligible
55 Other Comments		
		3% or 5% Step-Rated: Prens & Maximums Incr Same % Each Year

See page 12 for description of abbreviations.

UNITED OF OMAHA			UNITED SECURITY		
Comprehensive	Comprehensive	Worksite	Comprehensive	Comprehensive Substandard	Home Care Only
Assured Solutions Gold Plan	Cash First Plan	Workplace Solutions Flex Plan	LifeStyle Solutions	LifeStyle Solutions Select	Clear Advantage
	LTC09U		CCL3000-TQ	CCL3000TQSelect	HHC-01
	1987			1983	
	2011		2011	2010	2001
	All States & DC		FL, IL, IA, KS, KY, LA, MD, MN, MS, MO, MT, NE, ND, OH, OK, PA, SC, SD, TX, WA & WV		
	32			10	
	A+			B	
	A+			Not Rated	
	A1			Not Rated	
	Not Rated			Not Rated	
	91			Not Ranked	
	\$15,738			\$122	
	\$1,036			\$20	
	4%, -14%			6%, 2%	
	\$19.5			\$3.7	
	\$44.5			\$29.1	
	90%, 73%			13%, -1%	
	9,676			1,635	
	22,992			18,253	
	81%, 68%			26%, 4%	
	18 - 79		40 - 85	40 - 85	18 - 99
\$1,500 - \$15,000/Mo	\$1,500 - \$9,000/Mo	\$1,500 - \$15,000/Mo	\$50 - \$350	\$50 - \$150	\$20 - \$250
2, 3, 4, 5, 6, 8, L	\$50K - \$500K, Lifetime	\$50K - \$500K	1, 2, 3, 4, 5, L	1, 2, 3	1, 2, 3, 4, 5, L
0, 30, 60, 90, 180, 365	0, 30, 60, 90, 180, 365	90, 180, 365	0, 40, 90, 120, 180	90, 120, 180	0, 20, 100, 180, 365
	Yes, Yes		Yes, Yes	Yes, Yes	No, No
Each Calendar Day, Starting with the First Day of Paid Qualified Services			Each Calendar Day, Starting with the First Day of Paid Qualified Services		
	Extra Cost			No	
	1, 1		1, 1		Home Care Only
	Monthly		Monthly		Daily
	No, No			No, No	
	NA			NA	
	40% of HC (Automatic)* (50% Option)			NA	
	NA			NA	
50%, 75%, 100%	6: 50% to 100%	50%, 75%, 100%	100%	100%	Home Care Only
50%, 75%, 100%	100%, 2x If Prof	50%, 75%, 100%	100%	50%	Home Care Only
	Same, See Cash Alternative		Both Same As Above		Not Covered, Not Covered
	Same As Custodial Care		Same As Custodial Care		
	Cash Alternative Has 0 Day Elim;		Not Covered		
	The Cash Alternative Does Not Satisfy the EP Requirements		Not Covered		
	3%, 3.5%, 4%, 4.5%, 5%		3%, 5%		5%
	5%		3%, 5%		NA
	5% Compound 20 Years; 5% to 2x, 3x or 4x			NA	
	No			No	
	Can Add 3% or 5% to No-Incr Pol in 1st 5 Years If (1) Not Waiving Prem (2) Not Waiving Prem (2) Not Chronically Ill & Rec'd No Bens in Past 2 Yrs			NA	
	Reimburses Up to 2x Monthly Maximum for Injury Before 65. Additional Amount Not Added or Subtracted from Pool		4 Partnership-Certified UW Classes; Includes Programs to Delay Disability & Prolong Independence	Partnership Secured Risk Product. Pre-Existing Exclusion, Incl Programs to Delay Disability & Prolong Independence	

2012 Annual Long Term Care Insurance Survey

56	COMPANY NAME	STATE FARM	TRANSAMERICA
57	Product Marketing Name	Long Term Care Insurance	TC II TC II Worksite
58	Sales Rep/Source for More Info		Carroll Golden 817-285-3451, Carroll.Golden@Transamerica.com
59	Ancillary Benefits		
60	Bed Reserve Days/Year, Respite during EP?	30+Other, 30	60+Other, 30
61	Alternative Plan of Care (APC)	Contractual After EP	Contractual After EP
62	Home Modification	50 x MDB*	60 x MDB If Care Coord Is Used*
63	Caregiver Training Benefit	5 x MDB/Plan of Care	Included Above*
64	Emergency Alert	25% MDB; Max 12 Months	Included Above*
65	Equipment Benefit	Included Above*	Included Above*
66	Drug, Ambulance Benefit	NA	NA
67	Claims Issues		
68	Conditional Receipt Protection	Full, After App	Full, After App
69	Coverage Beyond USA	No	Full in Canada; 75% (365) Elsewhere
70	Provider Discounts (Directly or Indirectly)	No	No
71	Care Coordination Available From	Through Network	Through Network
72	Third Party Limits	None	None
73	Independent Review	As Required By Law	As Required By Law
74	Premiums and Discounts		
75	Preferred Discount	10%	15% Single, 10% Married
76	Substandard Extra Ratings	None	25%, 50%, 75%, 100%
77	Two-Spouse, Two-Partner Discounts	30%, 0%	30%, 30%
78	Requires Identical Coverage?	No	Yes
79	If Spouse is a Surprise Decline?	Unchanged	Reduced
80	If Spouse Answers Yes to KnockOut Question?	Lost	Reduced
81	One-Spouse Discount (Only 1 Spouse Applies)	0%	15%
82	Maximum Best UW Class & Spouse Discount	37%	37%
83	Later Marriage Earns Discount For	Current & New Spouse	Current & New Spouse If Same Policy Form & Benefits
84	Most Common Employer, Affinity Discount	NA	10%, 5%
85	Minimum Size Employer Group, Number Apps	NA	5, Varies with SUW and MGI Concessions
86	Minimum Size Affinity Group, Number Apps	NA	5, 5
87	Credit Card: Frequencies Accepted	M, Q, SA, A	M, Q, SA, A (First Payment Only)
88	Non-Level Premiums		
89	Fixed Periods	NA	1, 10
90	Paid Up at Ages	NA	65
91	Other Options	NA	NA
92	Waiver of Premium		
93	First Premium Waived (Days)	90 Service	Elimination
94	HCBC Waiver	Yes	Automatic but NA if Substandard Class
95	Joint Waiver	Not Offered	Extra Cost
96	Return of Premium Upon Death (ROP)		
97	ROP Design 1	NA	Incl: Death Before Age 67
98	ROP Design 2	NA	Net, 100%
99	Other Riders and Features		
100	Paid Up Survivor Benefit	Not Offered	Not Offered
101	Both People Must Survive Number of Years	NA	NA
102	Claim-Free Requirement?	NA	NA
103	Shared Care Benefit	NA	Extra Cost Ends If Partner Dies. If Pool Depleted, Spouse <91 & No Claim
104	Other Shared Care Aspects		in 2 Years, Can Buy 2 Year BP
105	Restoration of Benefits	Included	Extra Cost
106	Other Comments		No War Exclusion; Reimburses Up to 2x Monthly Maximum for Injury Until Age 67. Additional Amount Not +/- from Pool
107	Non-Tax-Qualified Policies (NTQ)		
108	NTQ: Percent of Sales, Extra Cost	100% TQ	100% TQ
109	NTQ: Facility and Home Care Triggers	NA	NA
110	Combination Policies Offered	None	Life

See pages 12 for description of abbreviations.

UNITED OF OMAHA			UNITED SECURITY		
Assured Solutions Gold Plan	Cash First Plan 800-693-6083	Workplace Solutions Flex Plan	LifeStyle Solutions	LifeStyle Solutions Select 800-872-3044 or www.usa-cal.com	Clear Advantage
	30+Other, 30			20, 20	Home Care Only, No
	Contractual After EP			Contractual Up to 50 x MDB	Contractual After EP
	2x Monthly Max If Care Coordination Is Used*			APC up to 50 x MDB*	APC up to 50 x MDB*
	Included Above*			5 x HC MDB	5 x HC MDB*
	Included Above*			Included Above*	NA
	Included Above*			Included Above*	Included Above*
	NA			Included Above*	NA
	Full, After UW Reqt	NA		No	
	Canada & UK; Indemnity for Other (365)			No	
	No			No	
	Client's Choice*			Through Network	
	None			None	
	As Required By Law			As Required By Law	
	15%			NA	
	25%, 50%		25%, 60%, 100%, 200%	NA	25%, 60%, 100%, 200%
	35%, 35%		20%, 20%	10%, 10%	10% Off Higher Premium, 0%
	No			Yes	
	Reduced		Reduced	Reduced	Lost
	Reduced		Reduced	Reduced	Lost
	15%		15%	10%	0%
	44.75%	44.75% (Full UW); 35% (SUW); 15% (MGI)	30%	10%	10% Off Higher Premium
	Current & New Spouse		Current & New Spouse	Current & New Spouse	10% Off Higher Premium
	NA, 5%	10%, NA	10%, 10%	NA	NA
	NA	SUW/MGI: 10, 10; Full UW: 3, 3	5, 2	NA	NA
	150 (250 If Not Local), 5	NA	10, 2	NA	NA
	None		M, Q, SA, A	M, Q, SA, A	NA
	10, 20			NA	
	65			NA	
	Start at 70%, 80% or 90% of Normal; Level Increase to Age 65, Then Level Until Paid Up at 85			NA	
	Elimination		Elim	Not Offered	Elim + 90
	Yes, With 8 Days of Care/Month		Yes	Not Offered	Yes
	Extra Cost		Not Offered	Not Offered	Extra Cost
Net, 100%	Net, 100% to Age 65, Then None	Net, 100%		NA	
NA	Either Net or Full, 100%	Full, 100%		NA	
	Extra Cost		Not Offered	Not Offered	Extra Cost
	10		NA	NA	No
	No		NA	NA	No
	Extra Cost Ends If Partner Dies			NA	
	Must Leave 1 Year for Living Spouse				
	Extra Cost		NA	NA	Included
	Optional 6-10 Year Rate Guarantee				
	100% TQ			100% TQ	
	NA			NA	
	Annuities			None	

2012 Long Term Care Insurance Survey

Company (Product): Best Rating Class; Up to \$100/Day; 90-Day Elimination Period	Without Benefit Increases				5% Compound Benefit Increases				
	Age 40	Age 50	Age 60	Age 70	Age 40	Age 50	Age 60	Age 70	
90-Day Elimination / Lifetime Benefit Period									
	Single Insured								
Bankers Life (GR-N620)	\$ 465	\$ 760	\$1,368	\$3,080	\$2,642	\$3,184	\$4,091	\$6,454	
Bankers Life (GR-N650)	662	1,079	1,932	4,293	3,739	4,473	5,725	8,964	
Country Life (Comprehensive)	529	721	1,172	3,123	2,047	2,244	2,743	5,152	
Country Life (Facility Only)	439	586	930	2,444	1,610	1,759	2,134	3,990	
Genworth (Privileged Choice Flex)	872	930	1,389	3,478	1,960	2,116	2,953	5,607	
Genworth (Long Term Care Business Solutions)	719	767	1,153	2,742	1,619	1,745	2,440	4,428	
Knights of Columbus (Comprehensive)	330	608	1,060	2,560	1,230	1,733	2,420	4,482	
Knights of Columbus (Facility Only)	172	316	657	1,792	614	865	1,441	3,012	
Mutual of Omaha (Mutual Care My Way)	779	967	1,409	3,705	2,929	3,575	4,174	7,127	
Transamerica (Transcare II)	529	723	1,252	2,903	2,835	3,324	4,243	7,142	
Transamerica (Transcare Worksite)	476	650	1,126	2,613	2,552	2,992	3,819	6,428	
United of Omaha (Assured Solutions Gold Plan)	794	987	1,437	3,779	2,987	3,647	4,257	7,269	
United of Omaha (Cash First Plan)	723	877	1,246	3,212	2,718	3,240	3,691	6,179	
United Security (LifeStyle Solutions)	787	847	1,377	3,238	2,999	3,073	3,524	5,616	
United Security (Clear Advantage)	390	430	720	1,630	720	790	1,310	2,690	
90-Day Elimination / Three-Year Period									
	Single Insured								
Bankers Life (GR-N620)	\$268	\$421	\$749	\$1,691	\$1,395	\$1,674	\$2,150	\$3,419	
Bankers Life (GR-N650)	357	561	996	2,231	1,849	2,219	2,851	4,508	
Country Life (Comprehensive)	319	431	689	1,755	1,285	1,411	1,735	2,913	
Country Life (Facility Only)	251	329	505	1,267	913	998	1,220	2,036	
Genworth (Privileged Choice Flex)	467	501	716	1,809	997	1,126	1,481	2,944	
Genworth (Long Term Care Business Solutions)	407	436	626	1,489	869	982	1,292	2,438	
John Hancock (Custom Care III)	333	504	855	1,989	1,962	2,043	2,385	3,753	
Knights of Columbus (Comprehensive)	200	363	626	1,499	724	1,016	1,415	2,612	
Knights of Columbus (Facility Only)	130	236	407	1,049	452	634	883	1,755	
MassMutual (500 Series)	329	482	798	1,931	1,661	1,699	2,065	3,546	
MedAmerica (Flex Care)	248	409	734	1,656	1,355	1,652	2,100	3,283	
Mutual of Omaha (Mutual Care My Way)	381	475	701	1,838	1,432	1,756	2,075	3,536	
Mutual of Omaha (Mutual Care at Work)	287	358	528	1,386	1,134	1,391	1,643	2,799	
State Farm Mutual Auto	358	548	944	1,969	2,356	2,515	2,834	4,125	
Transamerica (Transcare II)	320	411	685	1,622	1,113	1,328	1,795	3,017	
Transamerica (Transcare Worksite)	288	370	617	1,460	1,002	1,195	1,616	2,715	
United of Omaha (Assured Solutions Gold Plan)	388	485	715	1,875	1,461	1,792	2,116	3,606	
United of Omaha (Workplace Solutions Flex Plan)	311	390	576	1,492	1,229	1,511	1,792	3,014	
United Security (LifeStyle Solutions)	508	574	939	1,937	2,188	2,251	2,617	3,523	
United Security (LifeStyle Solutions Select)	1,607	1,812	2,918	5,615	7,151	7,289	8,243	10,821	
United Security (Clear Advantage)	300	330	550	1,240	540	590	980	1,990	
90-Day Elimination / \$100,000 Benefit Pool									
	Single Insured								
American General	\$435	\$491	\$761	\$1,820	\$1,026	\$1,150	\$1,576	\$2,984	
MedAmerica (Simplicity II)	254	466	917	2,017	1,303	1,716	2,404	3,744	
United of Omaha (Cash First Plan)	372	455	656	1,682	1,399	1,680	1,943	3,236	

SPECIAL FOCUS

Without Benefit Increases				5% Compound Benefit Increases			
Age 40	Age 50	Age 60	Age 70	Age 40	Age 50	Age 60	Age 70

Married Couple							
\$ 605	\$ 988	\$1,778	\$4,004	\$3,435	\$4,139	\$5,319	\$8,391
869	1,424	2,602	6,040	4,910	5,902	7,712	12,609
706	961	1,563	4,165	2,729	2,992	3,657	6,870
585	781	1,240	3,259	2,147	2,345	2,845	5,319
1,090	1,163	1,736	4,348	2,450	2,644	3,692	7,009
899	959	1,442	3,428	2,024	2,181	3,050	5,535
561	1,034	1,802	4,353	2,091	2,946	4,115	7,620
292	538	1,117	3,047	1,044	1,471	2,449	5,121
1,012	1,258	1,832	4,816	3,807	4,648	5,426	9,265
784	1,071	1,856	4,303	4,204	4,927	6,290	10,587
706	964	1,670	3,873	3,784	4,434	5,661	9,528
1,032	1,283	1,868	4,912	3,884	4,741	5,534	9,450
939	1,140	1,620	4,175	3,534	4,212	4,799	8,033
1,260	1,356	2,204	5,019	4,798	4,916	5,639	8,986
741	817	1,368	3,097	1,368	1,501	2,489	5,111

Married Couple							
\$ 348	\$ 548	\$ 974	\$2,198	\$1,814	\$2,176	\$2,795	\$4,444
468	736	1,329	3,047	2,428	2,913	3,802	6,161
425	574	919	2,340	1,713	1,881	2,314	3,884
335	438	674	1,690	1,217	1,331	1,626	2,714
584	626	895	2,261	1,246	1,408	1,852	3,681
509	544	783	1,862	1,086	1,228	1,615	3,048
481	728	1,235	2,873	2,834	2,951	3,445	5,421
340	617	1,064	2,548	1,230	1,728	2,406	4,440
221	401	692	1,784	768	1,078	1,501	2,884
461	674	1,117	2,703	2,325	2,379	2,891	4,965
348	572	1,028	2,318	1,898	2,313	2,940	4,596
495	618	910	2,389	1,862	2,283	2,697	4,596
373	466	687	1,801	1,474	1,808	2,135	3,639
501	767	1,322	2,757	3,298	3,521	3,968	5,775
474	609	1,016	2,404	1,651	1,968	2,662	4,472
427	548	914	2,164	1,486	1,771	2,396	4,025
505	630	929	2,437	1,899	2,329	2,751	4,688
405	506	749	1,939	1,598	1,965	2,329	3,918
812	919	1,503	3,100	3,501	3,601	4,188	5,637
2,893	3,262	5,253	10,107	12,871	13,121	14,837	19,477
570	627	1,045	2,356	1,026	1,121	1,862	3,781

Married Couple							
\$ 578	\$ 655	\$1,015	\$2,426	\$1,368	\$1,533	\$2,101	\$3,979
305	559	1,100	2,421	1,563	2,059	2,885	4,493
483	591	853	2,187	1,819	2,183	2,526	4,206

shows the minimum and maximum policy size that will be issued. The range is shown on a weekly or monthly basis only if home care, assisted living facility care and facility care are always sold on a weekly or monthly basis. Most policies showing a daily benefit range offer an option to determine the benefit on a monthly basis and some issue a daily benefit for one level of care and a monthly benefit for another level of care. The cost of monthly determination of benefits can be reflected in an additional premium and also a reduction in the annual maximum benefit from 365 times the daily benefit to 360 times the daily benefit.

Benefit Period (BP). Only nine participants, down from 11 last year, offer a lifetime benefit period. Four participants offer LTCI policies with BPs as short as one year. The partnerships make one-year benefit periods more common.

Elimination Periods (EP). A cumulative EP means that the requirement could be satisfied in stages. For example, if the policy has a 180-day EP and the policyholder needed qualified care for only 100 days, the remaining EP would be 80 days. A vanishing EP means that once the EP is satisfied, it never has to be satisfied again. One carrier offers a product with a non-vanishing and recurring EP and another has a product that has a non-cumulative EP.

Eight insurers have products that include a calendar-day EP automatically. Calendar-day EP costs more than otherwise-identical service-day EP, but it has the following advantages:

- ✓ *Clarity.* Unfortunately, even if clients understand service-day EP today, they may forget by the time they go on claim. A calendar-day EP may reduce the potential for disputes, especially if it does not require a paid day to start counting.

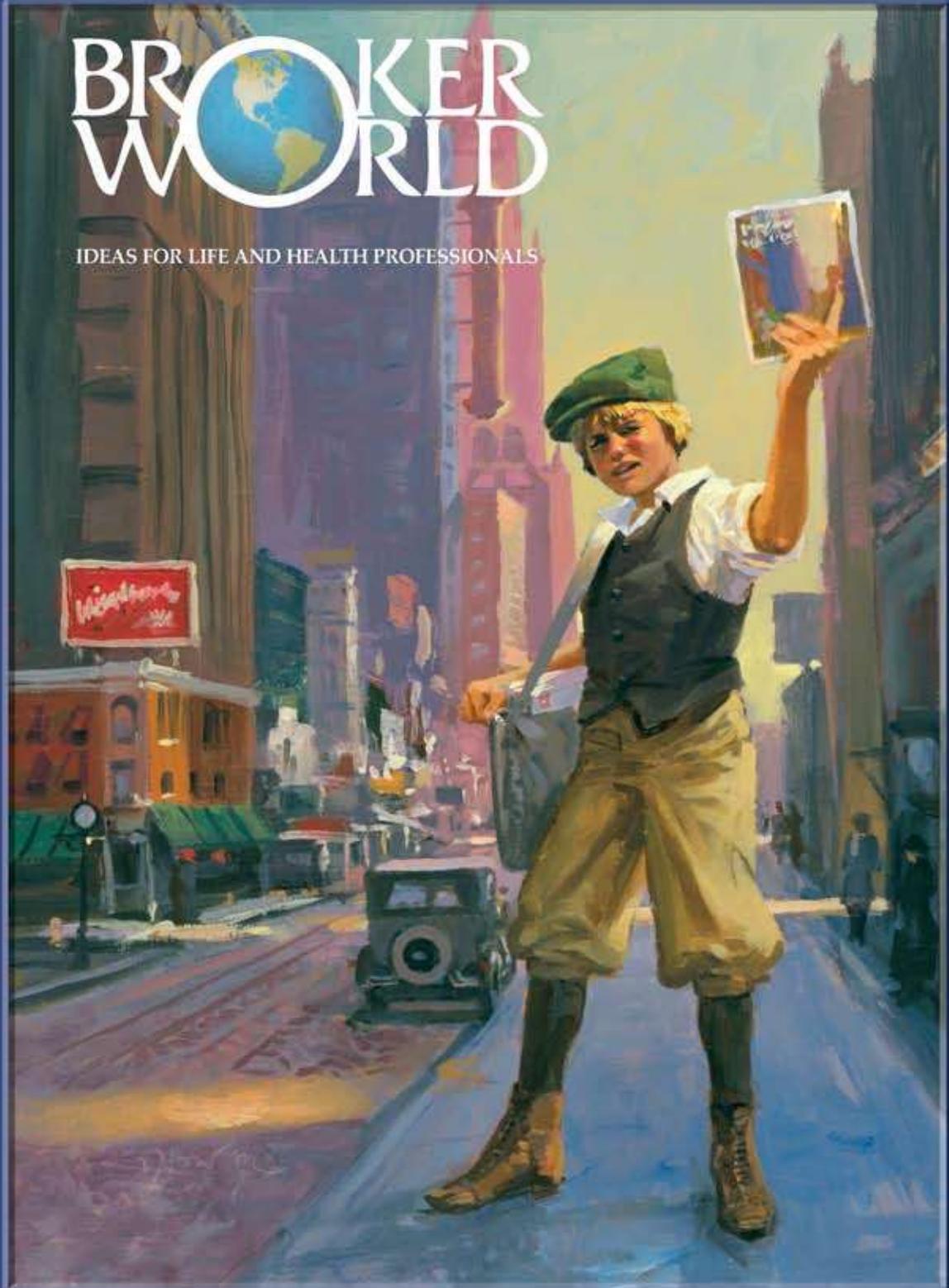
- ✓ *Flexibility.* It is hard to predict what finances, family status and preferences will be at the time of a future claim. Calendar-day EP allows a family to satisfy the EP with family care or perhaps in informal care that would not satisfy a service-day EP.

Row 34 indicates whether the insurer

EXHIBIT 3

2013

Long Term Care Survey



2013 Long Term Care Insurance Survey



**CLAUDE
THAU**

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This 2013 *Long Term Care Insurance Survey* is the fifteenth consecutive annual review of long term care insurance (LTCI) published by *BROKER WORLD* magazine. The survey compares products, reports sales distributions, and analyzes the changing marketplace.

Unless otherwise indicated, references are solely to the U.S. stand-alone LTCI market and exclude the exercise of future purchase options or other changes to existing coverage. Stand-alone refers to LTCI policies which *do not* include death benefits (other than returning premiums upon death or waiving a surviving spouse's premiums) or annuity or disability income benefits.

The data includes multi-life groups, which are certificates or individual policies sold with discounts and/or underwriting concessions, but not guaranteed issue, to groups of people based on common employment or affinity relationships. Except where *true group* is specifically mentioned, comments and data *do not* include sales of certificates to groups on a guaranteed issue basis.

Comparisons of worksite sales characteristics to overall sales characteristics will be discussed in the August issue of *BROKER WORLD* magazine.

Highlights from This Year's Survey

• Participants

LifeSecure and Thrivent are new participants in the survey, and Northwestern, while not displayed, contributed statistical data.

Mutual of Omaha/United of Omaha did not participate this year because the company is in the midst of a product change which includes gender-distinct pricing. New pricing was not complete and the company did not want gender-neutral pricing to appear in a publication that has a shelf-life to July 2014. United Security Assurance also is taking a one-year hiatus, but is still committed to the market and is filing its product in a new jurisdiction. In both cases, their products displayed last year are still available as this article is being written, except that Mutual of Omaha/United of

Omaha discontinued its worksite program.

• Sales

✓ The 12 carriers that contributed statistical data to this survey sold 190,353 policies for \$466,167,460 of new annualized premium in 2012, plus 188 single premium policies with \$9.78 million of premium. No carriers currently sell stand-alone LTCI on a single premium basis.

✓ We estimate that the entire stand-alone LTCI industry, including insurers which discontinued sales, sold 232,800 policies (0.7 percent more than in 2011) for \$564.3 million of annualized premium (5.0 percent more than in 2011).

✓ Ignoring single premium sales, the reporting insurers sold 9.1 percent more policies in 2012 than in 2011 and 14.3 percent more annualized premium.

✓ Genworth, Prudential and Unum

SPECIAL FOCUS

Table 8
Sales by Benefit Increase Type

Benefit Increase Type	2012	2011	2010	2009	2008	2007
Level Premium Benefit Increases						
5% Compound for Life	32.7%	35.3%	34.9%	41.2%	47.6%	47.7%
5% Compound for 20 Years	0.0	0.9*	—	—	—	—
4% Compound	0.5	0.5	0.4	—	—	—
3% Compound	22.5	17.1	8.8	—	—	—
Other Compound	0.5	3.5	3.6	6.8	6.1	4.5
5% Simple for Life	6.8	9.7	12.2	14.6	18.3	20.2
Age-Adjusted	0.5*	0.0	0.0	0.0	0.0	0.0
Indexed Level Premium	4.0	8.1	14.4	10.9	6.0	3.7
Increasing Premium Benefit Increases						
Step-Rated	0.2	0.0	0.0	0.0	2.3	2.6
Deferred Compound Option	1.9	2.0	1.3	—	—	—
FPO**: Indexed	0.0	0.0	0.6	0.4	0.7	0.0
FPO**: Fixed	20.3	12.8	15.6	16.8	10.1	9.1
Other						
No Benefit Increases	9.9	9.2*	7.9	9.0	8.3	11.6
Other	0.2	0.5	0.3	0.4	0.6	0.6

*Adjusted upward to make the total equal 100.0 percent.
**Future Purchase Option

Table 10
Sales By Facility Elimination Period

Number of Days	2012	2011	2010	2009	2008	2007
0 - 19	1.1%	1.2%	2.0%	2.8%	2.6%	3.0
20 - 44*	5.7	6.1	6.7	9.4	10.2	10.7
45 - 83*	1.0	1.7	10.8	11.7	4.8	5.7
84 - 100*	86.1	86.3	76.3	72.2	78.3	75.4
More Than 100	6.1	4.7	4.2	3.9	4.1	5.2

*Prior to 2011, these categories were 20-30, 31-89 and 90-100.

Table 11 (on page 9) shows that sixty-seven percent of buyers were part of couples who both bought in 2012, 12.9 percent were reported as one-of-a-couple purchasers, and 19.9 percent were reported as single. Tighter underwriting would tend to depress the per-

centage of couples who both buy, especially as the industry seems to be improving at conserving the well spouse's policy (up to 75.8 percent based on limited data in 2012). Some insurers also lowered couples' discounts in 2012. Nonetheless, the percentage

Table 9
Future Purchase Option Election Rates

Year	2012	2011	2010
Election Rate	25.5%	24.4%	27.0%

of both-buy couples increased, perhaps due to fire sales before the reductions in couples' discounts, as well as a change in mix of contributing insurers and a change in reporting methodology by one participant.

One-of-a-couple sales are understated because 4.8 percent of sales were reported by insurers that could not identify such sales and some insurers may not be able to identify all such sales. Hence, although the carriers reported that 12.9 percent of buyers were one-of-a-couple in 2012, the true percentage may be 14 percent, with a corresponding decrease in single insureds. Overall, 27.7 percent of the couples in 2012 were reported to insure only one person.

Overall, our analysis suggests that 54.9 percent of buyers are women, but 69.1 percent of single people who buy are female. That should change somewhat with the shift to gender-distinct pricing.

Shared Care and Other Couples' Features. Last year, we reported that the percentage of couples who both bought limited BP policies (eligible couples) and selected shared care was surprisingly low. This year it bounced back to 39.8 percent (Table 12 on page 9). Among insurers that offer shared care, 47.7 percent of eligible insureds purchased it.

Some products offer (or include automatically) joint waiver of premium (premium waived for both insureds if either qualifies) and/or survivorship features that waive premiums for a survivor after the first death if specified policy conditions are met. In 2012, 31 percent of policies sold to couples both buying included joint waiver of premium (46.4 percent for carriers that offer that feature, because it is often automatic) and 36 percent included survivorship (53.7 percent for carriers that offer that feature).

This year we queried, for the first time, about shared care sales by BP. Table 13

2013 Annual Long Term Care Insurance Survey

See page 12 for description of abbreviations.

1 COMPANY NAME	BANKERS LIFE & CASUALTY		COUNTRY LIFE	
2 Policy Type	Comprehensive	Comprehensive	Facility Only	Comprehensive
3 Product Marketing Name	GR-N620 (Standard Package)	GR-N650 (Premier Package)	Facility Only LTC	Comprehensive LTC
4 Policy Form Number	GR-N620	GR-N650	LTC-520	LTC-500
5 Year First LTCI Policy Offered	1985		1989	
6 Year Current LTCI Policy Was Priced	2009		2004	
7 Jurisdictions LTCI Available	All States (BLNY in NY)		23 States, No Northeast	
8 State Partnerships (as of January 1, 2013)	38 (Including CA,CT,IN)		18	
9 Financial Ratings (as of December 31, 2012)				
10 A.M. Best	B++		A+	
11 Standard & Poor's	BB+		Not Rated	
12 Moody's	Baa3		Not Rated	
13 Fitch	BBB		Not Rated	
14 COMDEX Ranking (as of May 1, 2013)	55		87	
15 Financials (Millions)				
16 Assets (December 31, 2012)	\$14,941		\$9,553	
17 Surplus (December 31, 2012)	\$915		\$1,027	
18 Percent Increase (Assets, Surplus)	3%, 12%		7%, 3%	
19 LTCI Premium (Millions)				
20 2012 First Year Premium	\$16.6		\$2.3	
21 2012 End of Year In-Force Premium	\$531.3		\$25.8	
22 Percent Increase (New Business, In-Force)	-2%, -4%		27%, 8%	
23 LTCI Lives Insured				
24 2012 First Year Issued	9,953		1,104	
25 2012 End of Year In-Force	298,693		17,631	
26 Percent Increase (New Business, In-Force)	-4%, -5%		13%, 5%	
27 Policy Ranges and Elimination Period Terms				
28 Issue Age Range, Gender Basis	18 - 89		18 - 84	
29 Daily, Weekly or Monthly Benefit Range	\$40 - \$400		\$50 - \$350	
30 Benefit Periods and/or Pools	1, 2, 3, 4, 5, 6, 8, L (500 - 2,500 Day BP Also Available)		2, 3, 4, 5, L	
31 Elimination Periods	0, 15, 30, 60, 90, 180, 365, 730, 1095, 1460		30, 90, 180, 365	
32 Vanishing, Cumulative	Yes, Yes		Yes, Yes	
33 Elimination Period Crediting	3 HC/Week=7		Service Days	
34 Zero-Day HCBC EP with Longer NH EP	No		Facility Only	No
35 Policy Benefits				
36 Number of Benefit Pools, EPs	1, 1		Facility Only	1, 1
37 HCBC Payment Basis	Weekly	Monthly	Facility Only	Daily (Monthly Extra \$)
38 Indemnity Facility, Indemnity HCBC	No, No		No, NA	Both Extra Cost
39 Full Cash (Disability) Benefit	NA		NA	
40 Partial Cash (Disability) Alternative	NA		NA	
41 Additional Cash Benefit	25% (Extra Cost)		NA	
42 Assisted Living (Percent of NH Max)	50%	100%	100%	
43 Home Care Health Aide (Percent of NH Max)	50%	50%, 100%	Facility Only	50%, 100%
44 Independent Professional, Non-Professional	Same, Not Covered		Facility Only	Both Same As Above
45 Homemaker Services	Must Be Incidental		Facility Only	Must Be Incidental
46 Informal Care (Other Than Family)	Not Covered		Facility Only	
47 Informal Family Care	Not Covered		Facility Only	Use Excess Indemnity Over Qualified Cost
48 Benefit Increase Features				
49 Lifetime Compound Increases (Level Premium)	2%, 3%, 4%, 5%		5%	
50 Lifetime Simple Increases (Level Premium)	5%		5%	
51 Other Increases (Level Premium)	2 Decreasing Inflation Options Are Also Offered (See Other Comments)		NA	
52 Increased Before Claims Deducted?	No		No	
53 Future Purchase Options (FPO)	15% Every 3 Years		NA	
54 Benefit Increase Comments	FPO: To 89 If No Declines or Claims		NA	
55 Other Comments				
	5% Compound Through Age 60, Then Either 3% Compound or 5% Simple Through Age 75, Then 0%; HCO; FO			

GENWORTH		JOHN HANCOCK		KNIGHTS OF COLUMBUS	
Comprehensive	Comprehensive	Comprehensive	Worksite	Facility Only	Comprehensive
Privileged Choice Flex	Privileged Choice Flex 2	Custom Care III (Gender Distinct)	Custom Care III (Unisex)	K of C Care	K of C Care
7052	8000, 8001	LTC-12	LTC-11	NHC01	LTC01
1974		1987		2000	
2012		2012		1999	
All States & DC		All States & DC		All States & DC	
37 (Including CA,CT,IN,NY)		28 (Including CA,CT,IN,NY)		None	
9					
A		A+		A++	
A-		AA-		AA+	
A3		A1		Not Rated	
A-		AA-		Not Rated	
75		93		100	
15					
\$36,879		\$227,142		\$19,402	
\$3,411		\$5,794		\$1,804	
3%, 10%		4%, 17%		8%, 7%	
19					
\$221.0		\$27.0		\$4.2	
\$2,358.8		\$1,559.2		\$49.3	
7%, 7%		-48%, 3%		17%, 11%	
23					
89,977		9,415		3,248	
1,194,356		708,198		40,087	
0%, 4%		-54%, -2%		10%, 8%	
27					
18 - 79	18 - 75, Sex-Distinct for Singles	18 - 79, Sex-Distinct	18 - 79	30 - 85	
\$50 - \$400		\$50 - \$500		\$50 - \$400	
2, 3, 4, 5, 6, 8, 10		2, 3, 4, 5, 6, 10		3, 5, L	
30, 90, 180, 365		30, 60, 90, 180, 365		30, 60, 90, 180	
Yes, Yes		Yes, Yes		Yes, No	
Choice of Service Days; or Calendar Days After 1st Expense		Service Days		Calendar Days	
Extra Cost; HC Days Retire FC EP		Extra Cost; HC Days Retire FC EP		No	
35					
1, 1		1, 1		1, 1	
Daily (Monthly Extra \$)		Daily (Monthly Extra \$)		Facility Only	Monthly
No, No		No, No		No, NA	No, No
NA		NA		NA	
NA		NA		NA	
NA		15% (Extra Cost)		NA	
50%, 100%		100%		100%	
50%, 100%		100%		Facility Only	100%
Both Same As Above	Same, Not Covered	Up to 75% If No HCA in 40 Miles		Facility Only	Both Same As Above
Same As Custodial Care	Also Informal Caregivers	Must Be Incidental		Facility Only	Same As Custodial Care
Same As Above	Homemaker & Chore Svcs	Not Covered		Facility Only	Same As Above
Family Members Only If Normal Compensation as HC Provider Employee		Family Members Only If Normal Compensation as HC Provider Employee		Facility Only	Not Covered
48					
3%, 5%		3%, 4%, 5%		5%, CPI	
5%		NA		NA	
NA		CPI to Age 75, Benefit Builder		NA	
Yes	No	No		No	
NA	15.76% Every 3 Years	10%/3 Years w/Benefit Builder (5%/3 Years w/CPI BIO)		10% of Orig MDB Every 2 Years Until 2 Straight Declines or On Claim	
NA		Benefit Builder Excess Interest Buys Pd-Up Additions; No FPO at Ages 76+, If On Claim in Past 2 Yrs, or If Declined 2x. Benefit Builder FPO Also Lost If 1 Decline for Issue Age 65+ or If Ever Received Benefits			
Same Generation Relatives Can Qualify for Spousal Discounts; Coordinates Benefits with All Other LTCI		Gender-Distinct Pricing for Single Policies but Not Couples; Coordinates Benefits with All Other LTCI			
55					

2013 Annual Long Term Care Insurance Survey

See page 12 for description of abbreviations.

56	COMPANY NAME	BANKERS LIFE & CASUALTY	COUNTRY LIFE	56
57	Product Marketing Name	GR-N620 (Standard Package) GR-N650 (Premier Package)	Facility Only LTC Comprehensive LTC	57
58	Sales Rep/Source for More Info	www.bankerslife.com	866-856-4760	58
59	Ancillary Benefits			59
60	Bed Reserve Days/Year, Respite during EP?	60+Other, No 60+Other, 21	30, 30	60
61	Alternative Plan of Care (APC)	No Contractual After EP	Contractual After EP	61
62	Home Modification	NA 30 x MDB	Facility Only 50 x MDB	62
63	Caregiver Training Benefit	NA 25% of Monthly HC	Facility Only 3 x MDB	63
64	Emergency Alert	NA 5% HC MMB; Max 12 Months	Facility Only 50 x MDB	64
65	Equipment Benefit	NA 5% HC MMB; Max 12 Months	Facility Only 50 x MDB	65
66	Drug, Ambulance Benefit	NA, \$75/Trip x 4x/Year	NA NA	66
67	Claims Issues			67
68	Conditional Receipt Protection	No	No	68
69	Coverage Beyond USA	Canada (Other = 30 Days)	No	69
70	Provider Discounts (Directly or Indirectly)	No	No	70
71	Care Coordination Available From	Through Network	Through Network	71
72	Third Party Care Coordinator Limits	None	None	72
73	Independent Review	Extended to In-Force in States with IR; Initiates IR for Client	Extended to In-Force in States with IR	73
74	Premiums and Discounts			74
75	Preferred Discount	10%	10%	75
76	Substandard Extra Ratings	25%, 50%, 100%	None	76
77	Two-Spouse, Two-Partner Discounts	35%, 10%	30%, 0%	77
78	Requires Identical Coverage?	No	No	78
79	If Spouse is a Surprise Decline?	Reduced	Reduced	79
80	If Spouse Answers Yes to Knockout Question?	Reduced	Reduced	80
81	One-Spouse Discount (Only 1 Spouse Applies)	15%	15%	81
82	Maximum Best UW Class & Spouse Discount	41.50%	40%	82
83	Later Marriage Earns Discount For	Current & New Spouse	Current & New Spouse	83
84	Most Common Employer, Affinity Discount	NA, 5%	NA	84
85	Minimum Size Employer Group, Number Apps	NA	NA	85
86	Minimum Size Affinity Group, Number Apps	Varies	NA	86
87	Credit Card: Frequencies Accepted	None	None	87
88	Non-Level Premiums			88
89	Fixed Periods	10, 20	10	89
90	Paid Up at Ages	NA	65	90
91	Other Options	NA	NA	91
92	Waiver of Premium			92
93	First Premium Waived (Days)	Elimination	Elimination	93
94	Home and Community Based Care Waiver	Yes	Facility Only Yes	94
95	Joint Waiver	Extra Cost Automatic	Extra Cost	95
96	Return of Premium Upon Death (ROP)			96
97	ROP Design 1	Net; Grades from 10% @ 4th Year to 100% @ Year 20+	Net, Decrease to \$0 @ Age 80	97
98	ROP Design 2	NA	NA	98
99	Other Riders and Features			99
100	Paid Up Survivor Benefit	Extra Cost	Extra Cost	100
101	Both People Must Survive Number of Years	10	10	101
102	Claim-Free Requirement?	No	No	102
103	Shared Care Benefit	Permanent Extra \$, Third Pool	NA Permanent Extra \$	103
104	Other Shared Care Aspects			104
105	Restoration of Benefits	Extra Cost Included	Extra Cost	105
106	Other Comments	Extra-Cost Rider Ups Survivor's Daily Benefit 50% But Survivor's Premium Is Unchanged; Return of Premium Applies on Lapse Also		106
107	Non-Tax-Qualified Policies (NTQ)			107
108	NTQ: Percent of Sales, Extra Cost	8%, 6%	100% TQ	108
109	NTQ: Facility and Home Care Triggers	Double/2 ADL, Double/2 ADL	NA	109
110	Combination Policies Offered			110
111		None	Life	111

57	GENWORTH	JOHN HANCOCK	KNIGHTS OF COLUMBUS	57
58	Privileged Choice Flex Privileged Choice Flex 2	Custom Care III (Gender Distinct) Custom Care III (Unisex)	K of C Care K of C Care	58
59	www.genworth.com	800-270-1700	paul.ochs@kofc.org	59
60	60+Other, 30	60+Other, No	21, 21	60
61	Contractual After EP	Contractual After EP	By Company Practice Contractual After EP	61
62	3 x Monthly Max*	30 x MDB*	Facility Only \$1,000/Calendar Year	62
63	Included Above*	Included Above*	Facility Only \$500/Calendar Year	63
64	Included Above*	Included Above*	LifePlans Provider Discount Program*	64
65	Included Above*	Included Above*	Facility Only \$1,000/Calendar Year	65
66	NA	NA	NA, \$250/Year	66
67				67
68	Limited, After Application Full, After UW Req	Full, After UW Req	No	68
69	NH 75%/4 Yrs; HC 25%/1 Yr	International (365)	No	69
70	Yes, for Relatives Too	Yes, for Relatives Too	Yes	70
71	Through Network	Client's Choice	Client's Choice*	71
72	None	Up to 10 x MDB (1/3 Monthly Max)	\$500/Calendar Year	72
73	Initiates IR for Client	Extended to All States for NB & Some for In-Force	Extended to All States and All In-Force	73
74				74
75	None	*Pld Best is 90% x *Pld which is 80%-97% x	10%	75
76	None	"Sel"; "Std" is 125% x "Sel"	25%, 50%	76
77	20%, 20%	Females~49%; Males~28%; Varies By Age	30%, 30%	77
78	No	No	No	78
79	Reduced	Lost	Unchanged	79
80	Lost	Lost	Unchanged	80
81	10% If Second Spouse Applies and Is Not Rejected for a Knock-Out Reason	85% of Single Rate	0%	81
82	20%	Female~60%; Male~38%	35%	82
83	Current (If Within 12 Months) & New Spouse	Neither	New Spouse	83
84	NA	NA, 5%	5%, 5%	84
85	NA	NA	5, 3	85
86	NA	10, 3	NA	86
87	M, Q, SA, A (First Payment Only)	None	None	87
88				88
89	NA	NA	NA	89
90	NA	95 (Automatic)	NA	90
91	NA	NA	NA	91
92				92
93	Elimination	Elimination	Elimination	93
94	Yes	Yes	Yes	94
95	Automatic w/Shared Care; Otherwise No	Extra Cost	Not Offered	95
96				96
97	Net, 100% Starts @ 10th Year	Incl: Death Before 65	Net, 100% Starts @ 10th Year	97
98	Net, Decreasing to \$0 @ Age 75	NA	NA	98
99				99
100	Extra Cost	Extra Cost	Not Offered	100
101	7 or 10 10	10	NA	101
102	Yes (Alt = No) Yes	Yes	NA	102
103	Extra Cost Ends If Partner Dies	Extra Cost Ends If Partner Dies. If Pool Depleted,	Permanent Extra \$	103
104	Joint WP; Survivor Protected for At Least 1/2 Original Bucket	Spouse <91 & No Claim in 2 Years, Can Buy 2 Year BP		104
105	Extra Cost	NA	NA	105
106	Online Live+Well Program Developed by Mayo Clinic	Benefit Builder Provides Paid-up Additions Based on Excess Earned Interest (Portfolio Rate - 3%)		106
107				107
108	100% TQ	100% TQ	Only in CA: 0%, 10%	108
109	NA	NA	More Than 6 ADLs, Same As TQ	109
110				110
111	Life	Life	None	111

2013 Annual Long Term Care Insurance Survey

See page 12 for description of abbreviations.

1 COMPANY NAME	LIFESECURE		MEDAMERICA	
2 Policy Type	Comprehensive	Worksite	Comprehensive	Comprehensive with Cash Rider
3 Product Marketing Name	LifeSecure Long Term Care	LifeSecure OMTH (Worksite Program)	Simplicity II	FlexCare
4 Policy Form Number	LS-0002	LS-0002	SPL2-336	FC-336
5 Year First LTCI Policy Offered	2006		1987	
6 Year Current LTCI Policy Was Priced	2007		2007	2011
7 Jurisdictions LTCI Available	All But CT,MA,ME,NH,NY,NJ		All States & DC	
8 State Partnerships (as of January 1, 2013)	24		16 (Including CT,NY)	
9 Financial Ratings (as of December 31, 2012)				
10 A.M. Best	Not Rated		B++	
11 Standard & Poor's	Not Rated		A-	
12 Moody's	Not Rated		Not Rated	
13 Fitch	Not Rated		Not Rated	
14 COMDEX Ranking (as of May 1, 2013)	NA		49	
15 Financials (Millions)				
16 Assets (December 31, 2012)	\$186		\$1,235	
17 Surplus (December 31, 2012)	\$24		\$48	
18 Percent Increase (Assets, Surplus)	24%, -9%		10%, -21%	
19 LTCI Premium (Millions)				
20 2012 First Year Premium	\$3.9		\$10.0	
21 2012 End of Year In-Force Premium	\$29.2		\$135.9	
22 Percent Increase (New Business, In-Force)	11%, 12%		32%, 6%	
23 LTCI Lives Insured				
24 2012 First Year Issued	2,801		5,135	
25 2012 End of Year In-Force	26,901		82,977	
26 Percent Increase (New Business, In-Force)	12%, 7%		10%, 3%	
27 Policy Ranges and Elimination Period Terms				
28 Issue Age Range, Gender Basis	18 - 84		18 - 85	
29 Daily, Weekly or Monthly Benefit Range	\$750 - \$15,000/Month		\$1,500 - \$16,000/Month	\$1,500 - \$15,000/Month
30 Benefit Periods and/or Pools	\$75K - \$1KK in \$5K Increments		5 Pools: \$100K - \$500K, \$1KK	1, 2, 3, 4, 5, 6, 7, 8, 10
31 Elimination Periods	90		30, 60, 90, 180	20, 30, 60, 90, 100, 180, 365
32 Vanishing, Cumulative	Yes, Yes		Yes, Yes	
33 Elimination Period Crediting	Calendar Days		Calendar Days	
34 Zero-Day HCBC EP with Longer NH EP	No		No	No, But 20-Day HC EP Avail (Extra \$) w/Longer Facility EP
35 Policy Benefits				
36 Number of Benefit Pools, EPs	1, 1		1, 1	
37 HCBC Payment Basis	Monthly		Monthly	
38 Indemnity Facility, Indemnity HCBC	No, No		Disability, Disability	NA, NA
39 Full Cash (Disability) Benefit	NA		Automatic	Extra Cost
40 Partial Cash (Disability) Alternative	NA		Disability	NA
41 Additional Cash Benefit	NA		NA	NA
42 Assisted Living (Percent of NH Max)	100%		100%	50%, 75%, 100%, 125%
43 Home Care Health Aide (Percent of NH Max)	100%		75%, 100%	50%, 75%, 100%, 125%
44 Independent Professional, Non-Professional	Same, Reduced		Disability	Cash Rider Can Cover This
45 Homemaker Services	Must Be Incidental		Disability	Same As Custodial Care
46 Informal Care (Other Than Family)	Reduced		Disability (Cash) Benefit Can Be Used for Any Purpose	With Cash Rider, Benefit Can Be Used for Any Purpose
47 Informal Family Care	"Flexible Benefit": 50% of Unused Benefit Can Be Used for Other Care Specified in the Plan of Care, Including Family Caregiving		Disability (Cash) Benefit Can Be Used for Any Purpose	With Cash Rider, Benefit Can Be Used for Any Purpose
48 Benefit Increase Features				
49 Lifetime Compound Increases (Level Premium)	3%, 5%		3%, 5%	
50 Lifetime Simple Increases (Level Premium)	NA		5%	3%, 5%
51 Other Increases (Level Premium)	NA		5% Compound to 2x	5% CBIO to 2x; Tiered; MDB Increase
52 Increased Before Claims Deducted?	No		No	
53 Future Purchase Options (FPO)	15% Every 3 Years		NA	10% Every 2 Years Until Declined 2x or On Claim; Premium for the FPO Continues Even If FPO Feature No Longer Exists
54 Benefit Increase Comments	Unlimited Offers Until Age 80 No Matter How Many Times the Insured Declines		NA	10% Every 2 Years Until Declined 2x or On Claim; Premium for the FPO Continues Even If FPO Feature No Longer Exists
55 Other Comments				
	Electronic App		Pays Monthly Cash Ben w/o Regard to Services or Amounts Used; HCO & FO Available	Tiered BIO=5% Comp thru 60, 5% of Age 60 MDB thru 75, Then 0. Alt MDB Incr Doesn't Incr Pool

MASSMUTUAL	STATE FARM	THRIVENT	TRANSAMERICA		1
Comprehensive	Comprehensive	Comprehensive	Comprehensive	Comprehensive - CT Partnership	Comprehensive - Worksite
SignatureCare 500	Long Term Care Insurance	Thrivent Long Term Care Insurance	TCIII	TCIII - CT - P	TCII Worksite
MM500-P-2	97062	ICC12 H-HL-LTC	ICC13 TLC-4	ICC13 TLC-4	ICC10 TLC-3
2000	1997	1987	1987		
2012	2011	2012	2013		
All States & DC, Puerto Rico	All But MA,NJ,RI	All But Perhaps NY	All States & DC	CT (Partnership)	All States & DC
36 (Including CT,IN,NY)	31 (Including IN)	35	38 (Including CT,IN)		
9					
A++	A++	A++	A+		
AA+	AA	Not Rated	AA-		
Aa2	Not Rated	Not Rated	A1		
AA+	Not Rated	AA	AA-		
98	98	98	93		
15					
\$167,510	\$123,038	\$68,425	\$105,497		
\$12,687	\$65,242	\$4,386	\$5,471		
13%, 11%	14%, 7%	10%, 10%	3%, 7%		
19					
\$29.0	\$12.6	\$0.9	\$20.8 (Plus \$9.8 of Single Premium)		
\$204.2	\$188.1	\$189.5	\$471.8		
42%, 14%	-5%, 4%	NA	45%, 0%		
23					
8,667	5,973	384	10,798		
76,988	131,000	126,154	265,512		
40%, 11%	-10%, 2%	NA	52%, 1%		
27					
18 - 79	30 - 79	18 - 79	18 - 79, Sex-Distinct		18 - 79
\$50 - \$400	\$100 - \$500 (Weekly for HC)	\$1,500 - \$15,000/Month	\$50 - \$500	\$224 - \$500	\$50 - \$200
2, 3, 4, 5, 6	2, 3, 5	2, 3, 5, 8, 10	\$18,250-\$1,095,000	\$81,760-\$1,095,000	\$18,250 - \$400,000
30, 60, 90, 180	30, 90, 180	30, 90, 180	0, 30, 60, 90, 180	0, 30, 60, 90	0, 30, 60, 90, 180
Yes, Yes	Yes, Yes	Yes, Yes	Yes, Yes		
Service Days	Service Days	1 HC/Week=7	Service Days		
Extra Cost; HC Days Retire FC EP	No	Extra Cost; HC Days Retire FC EP	Included	No	Included
35					
1, 1	1, 1	1, 1	1,2 (0-Day HC)	1, 1	1,2 (0-Day HC)
Daily (Monthly Extra \$)	Weekly	Monthly	Daily (Monthly Extra\$)		
No, No	No, No	No, No	No, No		
NA	NA	NA	NA		
NA	NA	NA	10 x Daily Max Each Month	NA	10 x Daily Max Each Month
NA	NA	10% in Facilities; 15% At Home (Extra \$)	NA		
100%	100%	100%	100%		
100%	100%	100%	100%		
Same, Not Covered	Same, Not Covered	Same, Not Covered	Through Partial Cash Alt	No	Through Partial Cash Alt
Same As Custodial Care	Same As Custodial Care	Same As Custodial Care	Same As Custodial Care	No	Same as Custodial Care
Not Covered	Not Covered	Not Covered	Through Partial Cash Alt	No	Through Partial Cash Alt
Not Covered	Not Covered	Not Covered	Through Partial Cash Alt	No	Through Partial Cash Alt
49					
3%, 5%	5%	3%, 5%	3%, 5%	5%	3%, 5%
NA	5%	NA	NA		
NA	NA	NA	NA		
No	No	No	No		
NA	Every 5 Years	5% Each Year	NA		
NA	\$25 of MDB Every 5 Years From Ages 45-65 If Not Claim-Eligible	FPO Provides Automatic 5% Increases Each Year, Unless Declined, Until 3 Consecutive Offers are Declined. Always Applies When on Claim	If No BIO Is Purchased, It Can Be Bought at the 1st, 3rd or 5th Anniv If Haven't Been Claim-Eligible	5% Compound BIO Required by Partnership	If No BIO Is Purchased, It Can Be Bought at the 1st, 3rd or 5th Anniv If Haven't Been Claim-Eligible
Participating Policy; Dividends Payable; Facility Only Available			3% or 5% Step-Rated; Pems & Maxims Incr Same % Each Year		3% or 5% Step-Rated; Pems & Maxims Incr Same % Each Year
55					

2013 Annual Long Term Care Insurance Survey

See page 12 for description of abbreviations.

56	COMPANY NAME	LIFESECURE	MEDAMERICA
57	Product Marketing Name	LifeSecure Long Term Care LifeSecure OMTH (<i>Worksite Program</i>)	Simplicity II FlexCare
58	Sales Rep/Source for More Info		http://agents.yourlongtermcare.com/
59	Ancillary Benefits		
60	Bed Reserve Days/Year, Respite during EP?	365+Other, No	Disability, No (<i>Disability After EP</i>) 30+Other, 30
61	Alternative Plan of Care (APC)	Contractual After EP	Disability Contractual After EP
62	Home Modification	Covered Under the Flexible Benefit	Disability Same as Emergency Alert
63	Caregiver Training Benefit	Covered Under the Flexible Benefit	Disability 10 x MDB
64	Emergency Alert	APC	Disability Covered Up to MDB; MedAmerica
65	Equipment Benefit	Covered Under the Flexible Benefit	Disability May Agree to Pay More Via APC
66	Drug, Ambulance Benefit	NA	Disability NA
67	Claims Issues		
68	Conditional Receipt Protection	No	No
69	Coverage Beyond USA	Canada Only	Same as USA
70	Provider Discounts (<i>Directly or Indirectly</i>)	Yes	Yes
71	Care Coordination Available From	Client's Choice	Company Staff
72	Third Party Care Coordinator Limits	No Limit	None
73	Independent Review	As Required By Law	Extended to All States and All In-Force
74	Premiums and Discounts		
75	Preferred Discount	10%	10%
76	Substandard Extra Ratings	40%	None
77	Two-Spouse, Two-Partner Discounts	30%, 30%	40%, 40% 30%, 30% (<i>22% in Worksite</i>)
78	Requires Identical Coverage?	No	No
79	If Spouse is a Surprise Decline?	Unchanged	Reduced
80	If Spouse Answers Yes to Knockout Question?	Unchanged	Reduced
81	One-Spouse Discount (<i>Only 1 Spouse Applies</i>)	10%	20% 15%
82	Maximum Best UW Class & Spouse Discount	37% 35.7%	46% 37%
83	Later Marriage Earns Discount For	Current & New Spouse	Current & New Spouse (<i>Sometimes</i>)
84	Most Common Employer, Affinity Discount	NA, 5% 5%, NA	5%, 5% 10%, 10%
85	Minimum Size Employer Group, Number Apps	NA 3, 3 Employees	3, 1
86	Minimum Size Affinity Group, Number Apps	200, NA NA	1, 1 500 (<i>Fewer by Exception</i>), 1
87	Credit Card: Frequencies Accepted	M, Q, SA, A	M, Q, SA, A
88	Non-Level Premiums		
89	Fixed Periods	10	10 10, 20
90	Paid Up at Ages	65	65 NA
91	Other Options	NA	NA
92	Waiver of Premium		
93	First Premium Waived (<i>Days</i>)	Elimination	Elimination
94	Home and Community Based Care Waiver	Yes	Yes
95	Joint Waiver	Not Offered	Extra Cost
96	Return of Premium Upon Death (ROP)		
97	ROP Design 1	Net, 100%	Full, 100% Net, 100% to 65, Grades to 0 @75
98	ROP Design 2	NA	Net, 100% Net, 100% to 80, Then 0
99	Other Riders and Features		
100	Paid Up Survivor Benefit	Not Offered	Extra Cost
101	Both People Must Survive Number of Years	NA	10
102	Claim-Free Requirement?	NA	No
103	Shared Care Benefit	Available Only in CA at This Time	Permanent Extra \$ Permanent Extra \$, Third Pool That
104	Other Shared Care Aspects		Must Keep 2 Years for Spouse Can Differ from Client-Specific Pools
105	Restoration of Benefits	NA	Extra Cost
106	Other Comments		
		Simplified Issue Available	Claims Paid Beginning of Month, So No Need to Prove Amount of Claim (Requires Cash Benefit Rider w/FlexCare); Simplified UW Available
107	Non-Tax-Qualified Policies (NTQ)		
108	NTQ: Percent of Sales, Extra Cost	100% TQ	100% TQ
109	NTQ: Facility and Home Care Triggers	NA	NA
110	Combination Policies Offered		
111		None	None

56	MASSMUTUAL	STATE FARM	THRIVENT	TRANSAMERICA	56
57	SignatureCare 500	Long Term Care Insurance	Thrivent Long Term Care Insurance	TCIII TCIII - CT - P TCII Worksite	57
58	800-767-1000		1-800-THRIVENT	Carroll Golden, 817-285-3451, Carroll.Golden@Transamerica.com	58
59	Ancillary Benefits				
60	60+Other, 30	30+Other, No	60+Other, 60	60, 30	60
61	Contractual After EP	Contractual After EP	Contractual After EP	Contractual After EP	61
62	APC	50 x MDB*	2 x Monthly Max*	60 x MDB If Care Coord Is Used*	62
63	5 x MDB	5 x MDB/Plan of Care	2 x Monthly Max	Included Above*	63
64	50% of MDB/Month	25% MDB; Max 12 Months	Included Above*	Included Above*	64
65	APC	Included Above*	Included Above*	Included Above*	65
66	1 x MDB/Mo, 4 x MDB/Yr	NA	NA	NA	66
67	Claims Issues				
68	Full, After UW Reqt	Full, After App	Full, After UW Reqt	Full, After App	68
69	1/2 MDB to 1/4 Max LT Benefit	No	Int'l (2x Max Monthly Benefit)	Full in Canada, Elsewhere: Cash Benefit Only Full in Canada; 75% (365) Elsewhere	69
70	No	No	No	No	70
71	Through Network	Through Network	Through Network	Through Network	71
72	None	None	None	None	72
73	As Required By Law	Extended to Some IF & Some States	Extended to In-Force in States with IR	As Required By Law	73
74	Premiums and Discounts				
75	10%	10%	10%	10%	75
76	25%, 150%, 400%	None	25%, 50%	25%, 50%	76
77	30%, 30%	30%, 0%	35%, 35%	20%, 20%	77
78	No	No	No	Yes	78
79	Reduced	Unchanged	Reduced	Reduced	79
80	Reduced	Lost	Reduced	Reduced	80
81	15%	0%	15%	10%	81
82	37%	37%	45%	28%	82
83	Current & New Spouse (<i>Sometimes</i>)	Current & New Spouse	Current & New Spouse	Current & New Spouse If Same Policy Form & Benefits	83
84	10%, 10%	NA	NA	NA, 5% 5%, NA	84
85	3, 3	NA	NA	NA 5, 5 Ees (More for SUW or MGI)	85
86	10, 3	NA	NA	250, 12+/Year NA	86
87	None	M, Q, SA, A	None	M, Q, SA, A (<i>First Payment Only</i>)	87
88	Non-Level Premiums				
89	NA	NA	10	NA	89
90	NA	NA	65	NA	90
91	NA	NA	NA	NA	91
92	Waiver of Premium				
93	Elimination	90 Service	Elimination	Elimination	93
94	Yes	Yes	Extra Cost	Automatic But NA If Substandard NA Automatic But NA If Substandard	94
95	Extra Cost	Not Offered	Automatic w/Shared Care Rider	Extra Cost	95
96	Return of Premium Upon Death (ROP)				
97	NA	NA	Net, 100%	Incl: Death Before Age 67	97
98	NA	NA	NA	Net, 100%	98
99	Other Riders and Features				
100	Extra Cost	Not Offered	Extra Cost	Not Offered	100
101	10	NA	10	NA	101
102	No	NA	Yes	NA	102
103	Permanent Extra \$, Third Pool Avail Only w/2 & 3Year BPs	NA	Extra Cost Ends If Partner Dies. If Pool Depleted, Spouse <86 & No Clm in 2 Yrs, Can Buy 2 Yr BP	Extra Cost Ends If Partner Dies. If Pool Depleted, Spouse <91 & No Claim in 2 Yrs, Can Buy 2 Yr BP	103
104	Extra Cost	Included	Extra Cost	Extra Cost	104
105	Loyal Customer Discount 5% All Years; FO Coverage Available		5-Year Rate Guarantee	No War Exclusion. Reimb Up to 2x MMB for Injury Until Age 67; Add'l Amt Not +/- From Pool. 5-Year Rate Guarantee	105
106				No War Exclusion. 5-Year Rate Guarantee	106
107	Non-Tax-Qualified Policies (NTQ)				
108	100% TQ	100% TQ	100% TQ	100% TQ	108
109	NA	NA	NA	NA	109
110	Combination Policies Offered				
111	None	None	Annuities	None	111

SPECIAL FOCUS

2013 Long Term Care Insurance Survey

Company (Product): Best Rating Class; Up to \$100/Day; 90-Day Elimination Period

- **Jurisdictions LTCI Available** (row 7) generally shows the jurisdictions in which the insurer sells, or intends to sell, LTCI. A displayed product may not be available in all of these states. (In fact one displayed product is available only in the CT Partnership.) It is possible that in some of the states we show, the insurer sells through an affiliate (such as a NY company); the displayed information might not apply to the affiliate.

- **State Partnerships** (row 8) identifies the number of state partnerships in which the insurer participated as of January 1, 2012 and specifically identifies any of the original four state partnerships (CA, CT, IN and NY) in which the insurer participates.

- **Financial Ratings and Ranking** (rows 9-14) lists each company's ratings from the four major rating agencies (A.M. Best, Standard & Poor's, Moody's, and Fitch). Row 14 shows Ebix's COMDEX ranking as of May 1, 2013.

The COMDEX ranking is from *VitalSigns*, a publication of EbixLife, Inc. EbixLife converts each company's A.M. Best, Standard & Poor's, Moody's, and Fitch ratings into a percentile ranking. For insurers rated by at least two of these rating agencies, EbixLife produces a COMDEX ranking by averaging that insurer's percentile rankings.

The COMDEX ranking has two key advantages: it combines the evaluations of several rating agencies and its percentile ranking makes it easier to understand how a company compares to its peers.

- **Financials** (rows 15-18) reflect the insurer's statutory assets and surplus (in millions) for year-end 2012, and the percentage changes from the previous year. These figures include neither assets nor surplus of related companies nor reflect assets under management.

- **LTCI Premium** (rows 19-22) lists the annualized premiums (in millions) for policies sold in 2012 and, separately, of policies in force on December 31, 2012, and the percentage changes from the previous year.

- **LTCI Lives Insured** (rows 23-26)

Lifetime Benefit Period	Without Benefit Increases				5% Compound Benefit Increases				Without Benefit Increases				5% Compound Benefit Increases				
	Age 40	Age 50	Age 60	Age 70	Age 40	Age 50	Age 60	Age 70	Age 40	Age 50	Age 60	Age 70	Age 40	Age 50	Age 60	Age 70	
	Single Insured				Single Insured				Heterosexual Couple								
	Male/Female	Male/Female	Male/Female	Male/Female	Male/Female	Male/Female	Male/Female	Male/Female	Male/Female								
Bankers Life (GR-N620)	\$465	\$760	\$1,368	\$3,080	\$2,642	\$3,184	\$4,091	\$6,454	\$605	\$988	\$1,778	\$4,004	\$3,435	\$4,139	\$5,319	\$8,391	
Bankers Life (GR-N650)	662	1,079	1,932	4,293	3,739	4,473	5,725	8,964	869	1,424	2,602	6,040	4,910	5,902	7,712	12,609	
Country Life (Comprehensive)	529	721	1,172	3,123	2,047	2,244	2,743	5,152	706	961	1,563	4,165	2,729	2,992	3,657	6,870	
Country Life (Facility Only)	439	586	930	2,444	1,610	1,759	2,134	3,990	585	781	1,240	3,259	2,147	2,345	2,845	5,319	
Knights of Columbus (Comprehensive)	330	608	1,060	2,560	1,230	1,733	2,420	4,482	561	1,034	1,802	4,353	2,091	2,946	4,115	7,620	
Knights of Columbus (Facility Only)	172	316	657	1,792	614	865	1,441	3,012	292	538	1,117	3,047	1,044	1,471	2,449	5,121	

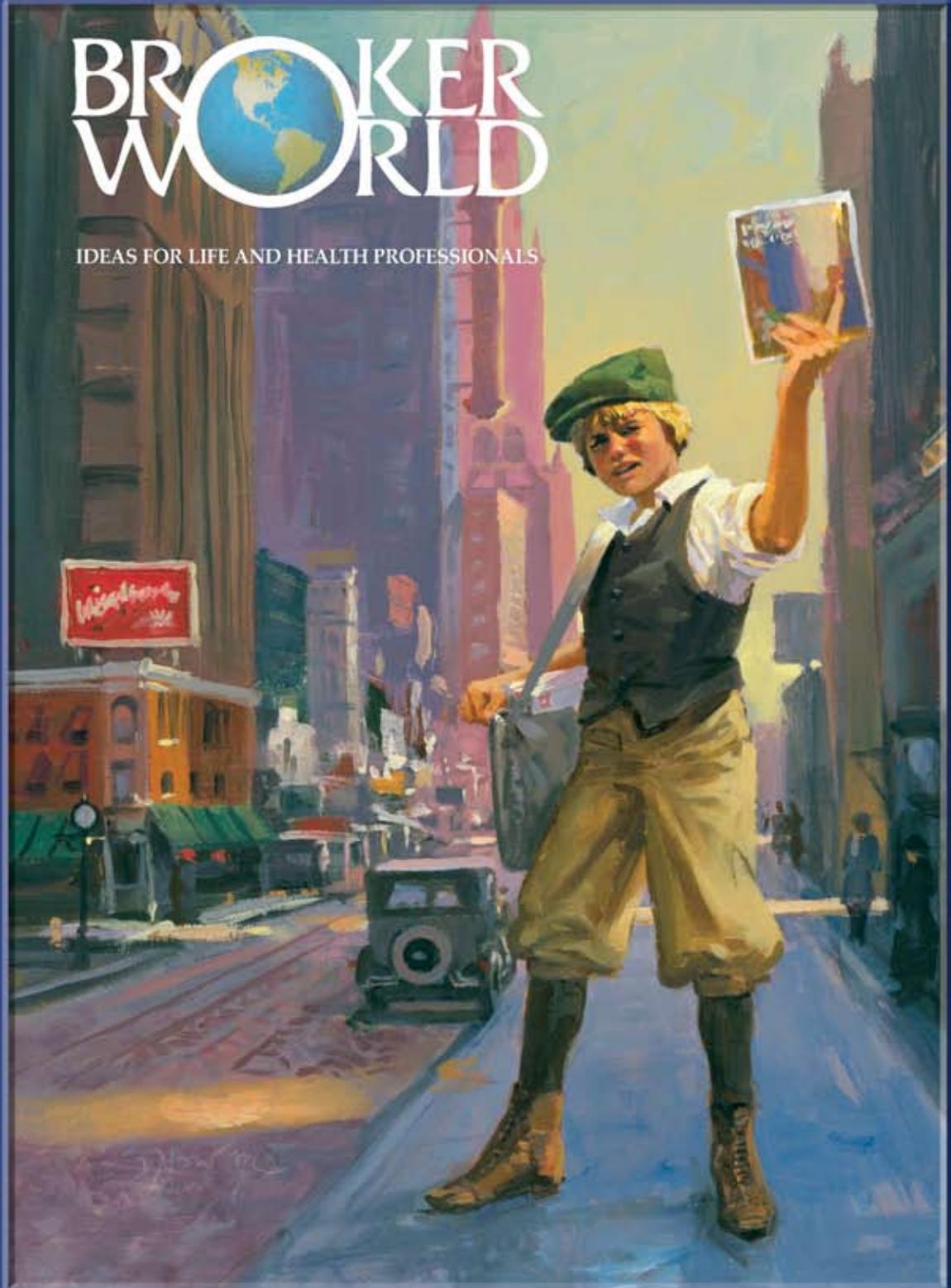
Three-Year Benefit Period	Single Insured				Single Insured				Heterosexual Couple							
	Male/Female	Male/Female	Male/Female	Male/Female	Male/Female	Male/Female	Male/Female	Male/Female								
Bankers Life (GR-N620)	268	421	749	1,691	1,395	1,674	2,150	3,419	348	548	974	2,198	1,814	2,176	2,795	4,444
Bankers Life (GR-N650)	357	561	996	2,231	1,849	2,219	2,851	4,508	468	736	1,329	3,047	2,428	2,913	3,802	6,161
Country Life (Comprehensive)	319	431	689	1,755	1,285	1,411	1,735	2,913	425	574	919	2,340	1,713	1,881	2,314	3,884
Country Life (Facility Only)	251	329	505	1,267	913	998	1,220	2,036	335	438	674	1,690	1,217	1,331	1,626	2,714
Genworth (Privileged Choice Flex)	584	626	895	2,261	1,246	1,408	1,852	3,680	934	1,002	1,432	3,618	1,994	2,254	2,962	5,888
Genworth (Privileged Choice Flex 2)	475/669	505/764	709/967	1,791/2,443	1,195/1,585	1,339/1,825	1,529/2,353	2,982/4,175	774	858	1,934	2,238	1,822	2,276	2,600	3,812
John Hancock (Custom Care III Unisex)					2,421	2,511	2,682	4,095					3,497	3,627	3,874	5,915
John Hancock (Custom Care III Gender Distinct)					1,953/3,069	2,007/3,114	2,106/3,213	3,348/4,797					3,627	3,699	3,842	5,883
Knights of Columbus (Comprehensive)	200	363	626	1,499	724	1,016	1,415	2,612	340	617	1,064	2,548	1,230	1,728	2,406	4,440
Knights of Columbus (Facility Only)	130	236	407	1,049	452	634	883	1,755	221	401	692	1,784	768	1,078	1,501	2,984
MassMutual (500 Series)	454	576	923	2,131	2,470	2,472	2,700	4,391	635	807	1,292	2,984	3,459	3,461	3,781	6,147
MedAmerica (FlexCare)	248	409	734	1,656	1,355	1,652	2,100	3,283	348	572	1,028	2,318	1,898	2,313	2,940	4,596
State Farm Mutual Auto	358	548	944	1,969	2,356	2,515	2,834	4,125	501	767	1,322	2,757	3,298	3,521	3,968	5,775
Thrivent (Long Term Care Insurance)	433	607	1,011	2,196	2,539	2,651	3,094	4,655	563	789	1,315	2,854	3,301	3,447	4,022	6,051
Transamerica (Transcare III - Gender Distinct)	367/560	509/776	826/1,259	1,852/2,823	1,828/2,786	2,041/3,111	2,297/3,500	3,371/5,138	649	899	1,459	3,273	3,230	3,607	4,058	5,956
Transamerica (Transcare III - CT Partnership)	334/510	464/707	753/1,147	1,688/2,571	1,665/2,538	1,859/2,833	2,092/3,188	3,071/4,680	591	820	1,330	2,981	2,942	3,286	3,697	5,426
Transamerica (Transcare II Worksite)	370	476	793	1,877	1,287	1,537	2,077	3,490	592	761	1,269	3,002	2,060	2,459	3,324	5,584

\$100,000 Benefit Pool	Single Insured				Single Insured				Heterosexual Couple							
	Male/Female	Male/Female	Male/Female	Male/Female	Male/Female	Male/Female	Male/Female	Male/Female								
MedAmerica (Simplicity II)	254	466	917	2,017	1,303	1,716	2,404	3,744	305	559	1,100	2,421	1,563	2,059	2,885	4,493
LifeSecure (Long Term Care)	400	531	841	2,103	1,240	1,392	2,070	4,101	560	744	1,178	2,944	1,735	1,948	2,898	5,741
LifeSecure OMTH (our MultiLife program)	417	555	879	2,198	1,294	1,453	2,162	4,286	571	759	1,203	3,008	1,771	1,989	2,959	5,865

EXHIBIT 4

2014

Long Term Care Survey



2014 Long Term Care Insurance Survey



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The 2014 Long Term Care Insurance Survey is the sixteenth consecutive annual review of long term care insurance (LTCI) published by *BROKER WORLD* magazine. The survey compares products, reports sales distributions and analyzes the changing marketplace.

Unless otherwise indicated, references are solely to the U.S. stand-alone LTCI market and exclude the exercise of future purchase options or other changes to existing coverage. Stand-alone refers to LTCI policies which *do not* include death benefits (other than returning premiums upon death or waiving a surviving spouse's premiums) or annuity or disability income benefits. The data includes multi-life groups, which are certificates or individual policies sold with discounts and / or underwriting concessions, but not guaranteed issue, to groups of people based on common employment or affinity relationships. Except where true group is specifically mentioned, comments and data *do not* include sales of certificates to groups on a guaranteed issue basis.

Comparisons of worksite sales characteristics to overall sales characteristics will be discussed in the August issue of *BROKER WORLD* magazine.

Highlights from This Year's Survey

• Participants

We are pleased that Mutual of Omaha and United Security Assurance have, as indicated last year, resumed participation in the survey after a one-year hiatus.

The carriers that participated last year are all participating again. Although Northwestern Long Term Care Insurance Company's product is not included in the product display section, Northwestern LTC has, once again, provided background statistical information to help us report on the entire industry.

In addition, New York Life contributed sales totals. Prudential and Unum, although not accepting any new groups, provided sales of new certificates to existing cases. These companies are not reflected in the statistical distribution.

In our 2008 survey article, we reported that there were about 45 insurers selling stand-alone individual or group LTCI. Now there are only 16.

• Sales

✓ The 15 carriers that reported individual sales to this survey sold 174,775 policies (\$403,924,967 of new annualized premium) in 2013, plus 26 single premium policies (\$1.5 million of premium). Single premium stand-alone LTCI has been unavailable for nearly two years; these apps were submitted in the summer of 2012, but not placed until early 2013. We estimate that these carriers sold well over 99.9 percent of the stand-alone LTCI industry's 2013 sales.

✓ Industry sales were down 26.5 percent from 2012 in terms of premium and 22.9 percent in terms of the number of lives insured with individual policies.

BROKER WORLD MAGAZINE

Table 8
Sales by Benefit Increase Type

Benefit Increase Type	2013	2012	2011	2010	2009	2008	2007
Level Premium Benefit Increases							
5% Compound for Life	22.0%	32.7%	35.3%	34.9%	41.2%	47.6%	47.7%
5% Compound for 20 Years	0.7	0.0	0.9*	—	—	—	—
4% Compound	1.0	0.5	0.5	0.4	—	—	—
3% Compound	29.1*	22.5	17.1	8.8	—	—	—
Other Compound	0.5	0.5	3.5	3.6	6.8	6.1	4.5
5% Simple for Life	5.6	6.8	9.7	12.2	14.6	18.3	20.2
Age-Adjusted	0.4	0.5*	0.0	0.0	0.0	0.0	0.0
Indexed Level Premium	4.6	4.0	8.1	14.4	10.9	6.0	3.7
Increasing Premium Benefit Increases							
Step-Rated	0.1	0.2	0.0	0.0	0.0	2.3	2.6
Deferred Compound Option	5.0	1.9	2.0	1.3	—	—	—
FPO**: Fixed	18.8	20.3	12.8	15.6	16.8	10.1	9.1
Other							
Dependent on Excess Interest Earnings	3.2						
No Benefit Increases	8.5	9.9	9.2*	7.9	9.0	8.3	11.6
Other	0.5	0.2	0.5	0.9	0.8	1.3	0.6
*Adjusted upward to make the total equal 100.0 percent.							
**Future Purchase Option							

Table 10
Sales By Facility Elimination Period

Number of Days	2013	2012	2011	2010	2009	2008	2007
0 - 19	0.9%	1.1%	1.2%	2.0%	2.8%	2.6%	3.0%
20 - 44*	4.7	5.7	6.1	6.7	9.4	10.2	10.7
45 - 83*	0.9	1.0	1.7	10.8	11.7	4.8	5.7
84 - 100*	87.8	86.1	86.3	76.3	72.2	78.3	75.4
101 - 200	4.6	4.8	4.7	4.2	3.9	4.1	5.2
More Than 200	1.1	1.3					

*Prior to 2012, these categories were 20-30, 31-89 and 90-100.

ular as shared care is, it seems surprising that the percentage is not higher.

Some products offer (or include automat-

ically) joint waiver of premium (premium waived for both insureds if either qualifies) and/or survivorship features that waive

Table 9
Future Purchase Option Election Rates

Year	2013	2012	2011	2010
Election Rate	24.0%	25.5%	24.4%	27.0%

premiums for a survivor after the first death if specified policy conditions are met. In 2013, 30.3 percent of policies sold to couples-both-buying included joint waiver of premium but only 16.3 percent included survivorship because one major company that sold a lot of survivorship in the past discontinued the feature in 2013. (See Table 12 on page 9.)

Table 13 on page 9 shows that the most common shared care sale (combining the traditional and third-pool designs) has a 3-year BP chassis, but the BP with the highest percentage of shared care sales is the 4-year BP. Above we stated shared care is selected by 40 percent of couples who both buy limited BP. Table 13 shows that shared care does not comprise 40 percent of any BP; that's because Table 13 includes BPs for single buyers in the denominators.

Existence and Type of Home Care Coverage. Two participants reported home care only policies, which accounted for 2 percent of sales. Five participants reported sales of facility only policies, which accounted for only 1.1 percent of total sales.

Nearly 98 percent of the comprehensive policies included home care benefits at least equal to the facility benefit.

Most policies (79 percent) use a weekly or monthly reimbursement design, while 21 percent use a daily reimbursement home care benefit. Only one company sold indemnity, and it was so few policies that it did not amount to even 0.1 percent. The only company that sells a full cash benefit did not report the breakdown of its sales this year. Last year that carrier caused 2 percent of the industry's sales to use a disability (also known as cash definition), but the impact would have been lower this year because it discontinued its policy which had a built-in cash benefit.

In addition to the cash policies, 17.7

2014 Annual Long Term Care Insurance Survey

1 COMPANY NAME	BANKERS LIFE & CASUALTY		COUNTRY LIFE	
2 Policy Type	Comprehensive	Comprehensive	Facility Only	Comprehensive
3 Product Marketing Name	GR-N620 (Standard Package)	GR-N650 (Premier Package)	Facility Only LTC	Comprehensive LTC
4 Policy Form Number	GR-N620	GR-N650	LTC-520	LTC-500
5 Year First LTCI Policy Offered	1985		1989	
6 Year Current LTCI Policy Priced	2013		2004	
7 Jurisdictions Available	All States (BLNY in NY)		23 States, No Northeast	
8 State Partnerships (as of January 1, 2014)	39 (Including CT, IN)		18	
9 Financial Ratings (as of December 31, 2013)				
10 A.M. Best	B++		A+	
11 Standard & Poor's	BBB		Not Rated	
12 Moody's	Baa3		Not Rated	
13 Fitch	BBB		Not Rated	
14 COMDEX Ranking (as of May 1, 2014)	54		87	
15 Statutory Financials (Millions)				
16 Assets (as of December 31, 2013)	\$15,840		\$10,263	
17 Surplus (as of December 31, 2013)	\$1,057		\$1,096	
18 Percent Increase (Assets, Surplus)	6%, 16%		7%, 7%	
19 LTCI Premium (Millions)				
20 2013 First Year Premium	\$11.9		\$3.2	
21 2013 End of Year In-Force Premium	\$504.1		\$28.3	
22 Percent Increase (New Business, In-Force)	-28%, -5%		37%, 10%	
23 LTCI Lives Insured				
24 2013 First Year Issued	7,223		1,619	
25 2013 End of Year In-Force Premium	283,517		18,822	
26 Percent Increase (New Business, In-Force)	-27%, -5%		47%, 7%	
27 Policy Ranges and Elimination Period Terms				
28 Issue Age Range	18 - 84		18 - 84	
29 Daily, Weekly or Monthly Benefit Range	\$40 - \$400		\$50 - \$350	
30 Benefit Periods and/or Pools	1, 2, 3, 4, 5, 6, 8 (500 - 2,500 Day BP Also Available)		2, 3, 4, 5	
31 Elimination Periods	0, 15, 30, 60, 90, 180, 365, 730, 1095, 1460		30, 90, 180, 365	
32 Vanishing, Cumulative	Yes, Yes		Yes, Yes	
33 Elimination Period Crediting	3 HC/Week=7		Service Days	
34 Zero-Day HCBC EP with Longer NH EP	No		Facility Only	No
35 Policy Benefits				
36 Number of Benefit Pools, EPs	1, 1		Facility Only	1, 1
37 HCBC Payment Basis	Weekly	Monthly	Facility Only	Daily (Monthly Extra \$)
38 Indemnity Facility, Indemnity HCBC	No, No		No, NA	Both Extra Cost
39 Full Cash (Disability) Benefit	NA		NA	
40 Partial Cash (Disability) Alternative	NA		NA	
41 Additional Cash Benefit	25% (Extra Cost)		NA	
42 Assisted Living (Percent of NH Max)	50%	100%	100%	
43 Home Care Health Aide (Percent of NH Max)	50%	50%, 100%	Facility Only	50%, 100%
44 Independent Professional, Non-Professional	Same, Not Covered		Facility Only	Both Same As Above
45 Homemaker Services	Must Be Incidental		Facility Only	Must Be Incidental
46 Informal Care (Other Than Family)	Not Covered		Facility Only	Use Excess Indemnity Over
47 Informal Family Care	Not Covered		Facility Only	Qualified Cost
48 Benefit Increase Features				
49 Lifetime Compound Increases (Level Premium)	2%, 3%, 4%, 5%		5%	
50 Lifetime Simple Increases (Level Premium)	5%		5%	
51 Other Increases (Level Premium)	2 Decreasing Inflation Options Are Also Offered (See Other Comments)		NA	
52 Increased Before Claims Deducted?	No		No	
53 Future Purchase Options (FPO)	15% Every 3 Years		NA	
54 Benefit Increase Comments	FPO: To 89 If No Declines or Claims		NA	
55 Other Comments				
	5% Compound Through Age 60, Then Either 3% Compound or 5% Simple Through Age 75, Then 0%; HCO; FO			

See page 12 for description of abbreviations.

GENWORTH	JOHN HANCOCK	KNIGHTS OF COLUMBUS		LIFESECURE		1
Comprehensive	Comprehensive	Facility Only	Comprehensive	Comprehensive	Worksite	2
Privileged Choice Flex 2	Custom Care III Featuring Benefit Builder	K of C Care	K of C Care	LifeSecure LTC II w/Shareability Option	LifeSecure OM II (Worksite)	3
8000, 8001	ICC12-LTC-12	NHC01	LTC01	LS-LTC-0004	LS-LTC-0005	4
1974	1987		2000		2006	5
2012	2012		1999		2013	6
All States & DC	All States & DC		All States & DC		All But CT, MA, ME, NH, NJ, NY	7
40 (Including CA, CT, IN, NY)	31 (Including CT, IN, NY)		None		24	8
						9
A	A+		A++		Not Rated	10
A-	AA-		AA+		Not Rated	11
A3	A1		Not Rated		Not Rated	12
A-	AA-		Not Rated		Not Rated	13
73	93		100		Not Rated	14
						15
\$36,445	\$239,597		\$20,534		\$190	16
\$3,487	\$5,809		\$1,878		\$21	17
-1%, 2%	5%, 0%		6%, 4%		8%, -13%	18
						19
\$133.8	\$36.3		\$4.6		\$7.2	20
\$2,508.8	\$1,575.9		\$54.3		\$34.1	21
-39%, 6%	34%, 1%		9%, 10%		84%, 17%	22
						23
54,906	13,307		3,586		4,459	24
1,233,020	700,919		43,257		29,424	25
-39%, 3%	41%, -1%		10%, 8%		59%, 9%	26
						27
18 - 75	18 - 75		30 - 85		18 - 79	28
\$50 - \$400	\$50 - \$400		\$50 - \$400		\$1,000 - \$20,000/Month	29
2, 3, 4, 5, 6, 8, 10	2, 3, 4, 5, 6		3, 5, LT		\$75K - \$1KK in \$5K Increments	30
30, 90, 180, 365	30, 60, 90, 180, 365		30, 60, 90, 180		90	31
Yes, Yes	Yes, Yes		Yes, No		Yes, Yes	32
Choice of Service Days; or Calendar Days After 1st Expense	Service Days		Calendar Days		Calendar Days	33
Extra Cost; HC Days Retire FC EP	Extra Cost; HC Days Retire FC EP		No		No	34
						35
1, 1	1, 1		1, 1		1, 1	36
Daily (Monthly Extra \$)	Daily (Monthly Extra \$)	Facility Only	Monthly		Monthly	37
No, No	No, No	No, NA	No, No		No, No	38
NA	NA		NA		NA	39
NA	NA		NA		NA	40
NA	15% (Extra Cost)		NA		NA	41
50%, 100%	100%		100%		100%	42
50%, 100%	100%	Facility Only	100%		100%	43
Same, Not Covered	Up to 75% If No HCA in 40 Miles	Facility Only	Both Same As Above		Same, Reduced	44
Also Informal Caregivers	Must Be Incidental	Facility Only	Same As Custodial Care		Must Be Incidental	45
Homemaker & Chore Services	Not Covered	Facility Only	Same As Above		Reduced	46
Family Only If Normal Compensation as HC Provider Ee(s)	Family Only If Normal Compensation as HC Provider Ee(s)	Facility Only	Not Covered		(See row 55)*	47
						48
3%, 4%, 5%	5%, CPI		5%		3%, 5%	49
5%	NA		NA		NA	50
NA	Benefit Builder		NA		NA	51
No	No		No		No	52
15.76% Every 3 Years	10%/3 Yrs w/Benefit Builder (5%/3 Yrs w/CPI B/O)	10% of Orig MDB Every 2 Years Until 2 Straight Declines or On Clm			15% Every 3 Years	53
NA	Benefit Builder Excess Interest Buys Pd-Up Additions; No FPO at Ages 76+, If On Claim in Past 2 Yrs, or if Declined 2x. For Issue Age 65+, FPO Also Lost If 1 Decline or If Ever Rec'd Benefits				Unlimited Offers No Matter How Many Times Insured Declines Until Age 80	54
Coordinates Benefits with All other LTCI					Electronic App *Flexible Benefit; 50% of Unused Benefit Can Be Used for Other Care *Specified in the Plan of Care, Including Family Caregiving	55

2014 Annual Long Term Care Insurance Survey

56 COMPANY NAME	BANKERS LIFE & CASUALTY		COUNTRY LIFE	
57 Product Marketing Name	GR-N620 (Standard Package)	GR-N650 (Premier Package)	Facility Only LTC	Comprehensive LTC
58 Sales Rep/Source for More Info	www.bankerslife.com		866-856-4760	
59 Ancillary Benefits				
60 Bed Reserve Days/Year, Respite during EP?	60+Other, No	60+Other, 21	30, 30	
61 Alternative Plan of Care (APC)	No	Contractual After EP	Contractual After EP	
62 Home Modification	NA	30 x MDB	Facility Only	50 x MDB
63 Caregiver Training Benefit	NA	25% of Monthly HC	Facility Only	3 x MDB
64 Emergency Alert	NA	5% HC MMB; Max 12 Months	Facility Only	50 x MDB
65 Equipment Benefit	NA	5% HC MMB; Max 12 Months	Facility Only	50 x MDB
66 Drug, Ambulance Benefit	NA, \$75/Trip x 4x/Year		NA	NA
67 Claims Issues				
68 Conditional Receipt Protection	No		No	
69 Coverage Beyond USA	Canada (Other = 30 Days)		No	
70 Provider Discounts (Directly or Indirectly)	No		No	
71 Care Coordination Available From	Through Network		Through Network	
72 Third Party Care Coordinator Limits	None		None	
73 Independent Review	Extended to In-Force in States with IR; Initiates IR for Client		Extended to In-Force in States with IR	
74 Premiums and Discounts				
75 Gender-Distinct or Unisex Pricing	Gender-Distinct		Unisex	
76 Preferred Discount	10%		10%	
77 Substandard Extra Ratings	25%, 50%, 100%		None	
78 Two-Spouse, Two-Partner Discounts	35%, 10%		30%, 0%	
79 Requires Identical Coverage	No		No	
80 If Spouse is a Surprise Decline	Reduced		Reduced	
81 If Spouse Answers "Yes" to "Knockout" question	Reduced		Reduced	
82 One-Spouse Discount (Only 1 Spouse Applies)	15%		15%	
83 Maximum Best UW Class & Spouse Discount	41.50%		40%	
84 Later Marriage Earns Discount For	Current & New Spouse		Current & New Spouse	
85 Most Common Employer, Affinity Discount	NA, 5%		NA	
86 Minimum Size Employer Group, Number Apps	NA		NA	
87 Minimum Size Affinity Group, Number Apps	Varies		NA	
88 Credit Card: Frequencies Accepted	None		None	
89 Non-Level Premiums				
90 Fixed Periods	NA		NA	
91 Paid Up at Ages	NA		NA	
92 Waiver of Premium				
93 First Premium Waived (Days)	Elimination		Elimination	
94 HCBC Waiver	Yes		Facility Only	Yes
95 Joint Waiver	Extra Cost	Automatic	Extra Cost	
96 Return of Premium Upon Death (ROP)				
97 ROP Design #1	Net Grades from 10% @ 4th Year to 100% @ Year 20+		Net, Decrease to \$0 @ Age 80	
98 Other ROP Design(s)	NA		NA	
99 Other Riders and Features				
100 Paid Up Survivor Benefit	Extra Cost		Extra Cost	
101 Both People Must Survive Number of Years	10		10	
102 Claim-Free Requirement?	No		No	
103 Shared Care Benefit	Permanent Extra \$, Third Pool		NA	Permanent Extra
104 Other Shared Care Aspects				
105 Restoration of Benefits	Extra Cost	Included	Extra Cost	
106 Other Comments	Extra-Cost Rider Ups Survivor's Daily Benefit 50% But Survivor's Prem is Unchanged; Return of Premium Applies on Lapse Also			
107 Offers Non-Tax-Qualified Policies (NTQ)	Yes		No	
108 Combination Policies Offered	None		Life	

See page 12 for description of abbreviations.

GENWORTH	JOHN HANCOCK	KNIGHTS OF COLUMBUS		LIFESURE		
Privileged Choice Flex 2	Custom Care III Featuring Benefit Builder	K of C Care	K of C Care	LifeSecure LTC II w/Shareability Option	LifeSecure OM II (Worksite)	57
www.genworth.com	800-270-1700	paul.ochs@kofc.org		Agent Sales Support Team 866-582-7701		58
						59
60+Other, 30	60+Other, No	21, 21		365+Other, No		60
Contractual After EP	Contractual After EP	By Company Practice	Contractual After EP	Contractual After EP		61
3 x Monthly Max*	30 x MDB*	Facility Only	\$1,000/Calendar Year	Covered Under the Flexible Benefit		62
Included Above*	Included Above*	Facility Only	\$500/Calendar Year	Covered Under the Flexible Benefit		63
Included Above*	Included Above*	LifePlans Provider Discount Program*		Covered Under the Flexible Benefit		64
Included Above*	Included Above*	Facility Only	\$1,000/Calendar Year	Covered Under the Flexible Benefit		65
NA	NA	NA, \$250/Year		NA		66
						67
Full, After UW Req't	Full, After UW Req't	No		No		68
NH 50%/4 Yrs; HC 25%/1 Yr	International (365)	No		Canada (Other = NH 100%/1 Yr; HC 50%/1 yr)		69
Yes, for Relatives Too	Yes, for Relatives Too	Yes		Yes		70
Through Network	Client's Choice	Client's Choice*		Client's Choice		71
None	Up to 10 x MDB (1/3 Monthly Max)	\$500/Calendar Year		No Limit		72
Extended to All Claimants	Extended to all States for NB & Some for IF	Extended to All Claimants		As Required By Law		73
						74
Gender-Distinct for Single People	Gender-Distinct	Unisex		Gender-Distinct	Unisex	75
Pfd Best is 90% x Pfd which is 80%-97% x Sel; Std is 125% x Sel	10%	None		10%	NA	76
	25%, 50%	None		40%		77
Females~49%; Males~28%; Varies By Age	35%, 35%	15%, 0%		30%, 30%		78
No	No	No		No		79
Reduced	Lost	Unchanged		Lost		80
Lost	Lost	Unchanged		Lost		81
85% of Single Rate	0%	10%		0%		82
Female~60%; Male~38%	35%	15%		37%		83
Current (If Within 12 Mos) & New Spouse	Neither	New Spouse		Current & New Spouse		84
NA	NA, 5%	NA		NA, 5%	5%, NA	85
NA	NA	NA		NA	3, 5	86
NA	10, 3	NA		200, NA	NA	87
M, Q, SA, A (First Payment Only)	M, Q, SA, A	None		M, Q, SA, A		88
						89
NA	NA	NA		10		90
NA	95 (Automatic)	NA		NA		91
						92
Elimination	Elimination	Elimination		Elimination		93
Yes	Yes	Yes		Yes		94
Automatic w/Shared Care; Otherwise No	Not Offered	Not Offered		Not Offered		95
						96
Net, 100% Starts @ 10th Year	Automatic: Death Before 65	Net, 100% Starts @ 10th Year		Net, 100%		97
Net, Decreasing to \$0 @ Age 75	NA	NA		NA		98
						99
Extra Cost	Not Offered	Not Offered		Not Offered		100
10	NA	NA		NA		101
Yes	NA	NA		NA		102
Extra Cost Ends If Partner Dies	Extra Cost Ends If Partner Dies.	Permanent Extra \$		Extra Cost Ends If Partner Dies		103
	If Pool Depleted, <91 Spouse & No Claim in 2 Yrs, Can Buy 2 Yr BP			Must Leave 1 Year for Living Spouse		104
Joint WP; Survivor Protected for At Least 1/2 Original Bucket						
Extra Cost	NA	NA		NA		105
Online Live+Well Program Developed by Mayo Clinic	Benefit Builder Provides Paid-Up Additions Based on Excess Earned Interest (Portfolio Rate - 3%)			Simplified Issue Avail on Worksite Product thru Age 65, up to \$300K (\$200K w/Shared Care) or \$400K (\$300K w/Shared Care) depending on program		106
No	No	NTQ Available in CA		No		107
Life	None	None		None		108

2014 Annual Long Term Care Insurance Survey

1 COMPANY NAME	MASSMUTUAL	MEDAMERICA	MUTUAL OF OMAHA	
2 Policy Type	Comprehensive	Comprehensive with Cash Rider	Comprehensive	Comprehensive
3 Product Marketing Name	SignatureCare 500	FlexCare	MutualCare Secure Solution	MutualCare Custom Solution
4 Policy Form Number	MM500-P-2	FC-336		LTC13
5 Year First LTCI Policy Offered	2000	1987		1987
6 Year Current LTCI Policy Priced	2012	2013		2013
7 Jurisdictions Available	DC, PR & All States (Except MO)	DC & All States Except FL, MN & NV		All States & DC
8 State Partnerships (as of January 1, 2014)	39 (including CT, IN, NY)	15 (Including CT, NY)		35
9 Financial Ratings (as of December 31, 2013)				
10 A.M. Best	A++	B++		A+
11 Standard & Poor's	AA+	A-		A+
12 Moody's	Aa2	Not Rated		A1
13 Fitch	AA+	Not Rated		Not Rated
14 COMDEX Ranking (as of May 1, 2014)	98	47		90
15 Statutory Financials (Millions)				
16 Assets (as of December 31, 2013)	\$195,007	\$866		\$5,795
17 Surplus (as of December 31, 2013)	\$12,524	\$44		\$2,675
18 Percent Increase (Assets, Surplus)	11%, -1%	NA, NA		4%, 11%
19 LTCI Premium (Millions)				
20 2013 First Year Premium	\$13.4	\$16.7		\$48.5
21 2013 End of Year In-Force Premium	\$213.9	\$153.0		\$213.6
22 Percent Increase (New Business, In-Force)	-54%, 5%	66%, 13%		-9%, 27%
23 LTCI Lives Insured				
24 2013 First Year Issued	5,035	8,707		21,495
25 2013 End of Year In-Force Premium	80,862	88,216		101,052
26 Percent Increase (New Business, In-Force)	-42%, 5%	70%, 6%		-8%, 23%
27 Policy Ranges and Elimination Period Terms				
28 Issue Age Range	18 - 79	18 - 85		30 - 79
29 Daily, Weekly or Monthly Benefit Range	\$50 - \$400	\$1,500 - \$15,000/Month		\$1,500 - \$10,000/Month
30 Benefit Periods and/or Pools	2, 3, 4, 5, 6	1, 2, 3, 4, 5, 6, 7, 8, 10	2, 3, 4, 5	\$50,000 - \$500,000
31 Elimination Periods	30, 60, 90, 180	20, 30, 60, 90, 100, 180, 365	90, 180, 365	0, 30, 60, 90, 180, 365
32 Vanishing, Cumulative	Yes, Yes	Yes, Yes		Yes, Yes
33 Elimination Period Crediting	Service Days	Calendar Days		Calendar Days After 1st Expense
34 Zero-Day HCBC EP with Longer NH EP	Extra Cost; HC Days Retire FC EP	No, But 20-Day HC EP Avail (Extra \$) w/Longer Facility EP		Extra Cost
35 Policy Benefits				
36 Number of Benefit Pools, EPs	1, 1	1, 1		1, 1
37 HCBC Payment Basis	Daily (Monthly Extra \$)	Daily (Monthly Extra \$)		Monthly
38 Indemnity Facility, Indemnity HCBC	No, No	No, No		No, No
39 Full Cash (Disability) Benefit	NA	Extra Cost		NA
40 Partial Cash (Disability) Alternative	NA	NA	30% (Automatic)	40% (Automatic)
41 Additional Cash Benefit	NA	NA		NA
42 Assisted Living (Percent of NH Max)	100%	50%, 75%, 100%, 125%		50%, 75%, 100%
43 Home Care Health Aide (Percent of NH Max)	100%	50%, 75%, 100%, 125%		50%, 75%, 100%
44 Independent Professional, Non-Professional	Same, Not Covered	APC, Cash Rider Can Cover		Same, See Cash Alternative
45 Homemaker Services	Same As Custodial Care	Same As Custodial Care		Same As Custodial Care
46 Informal Care (Other Than Family)	Not Covered	With Cash Rider, Benefit Can Be		Cash Alternative Has 0 Day EP;
47 Informal Family Care	Not Covered	Used for Any Purpose		If Used It Delays Satisfying the EP
48 Benefit Increase Features				
49 Lifetime Compound Increases (Level Premium)	3%, 5%	3%, 5%	3%, 4%, 5%	1% to 5%, 0.25% Increments & Buy-Up Option
50 Lifetime Simple Increases (Level Premium)	NA	3%, 5%		NA
51 Other Increases (Level Premium)	NA	5% CBIO to 2x; Tiered; MDB Incr		3%, 5% Compound 20 Years
52 Increased Before Claims Deducted?	No	No		No
53 Future Purchase Options (FPO)	NA	10% Every 2 Yrs Until Declined 2x or on Claim; Premium for the FPO Continues Even if FPO Feature No Longer Exists.	NA	No FPO. Buy-up option allows to increase each year not to exceed 5%, Available prior to the lesser of 20 years or age 75 and not chronically ill
54 Benefit Increase Comments	NA		NA	
55 Other Comments				
	Participating Policy: Dividends Payable; Facility Only Available	Tiered BIO=5% Comp thru 60, 5% of Age 60 MDB thru 75, Then 0. Alternative MDB Incr Doesn't Incr Pool		Rider Doubles MMB for Professional HC

See page 12 for description of abbreviations.

STATE FARM	THRIVENT	TRANSAMERICA		UNITED SECURITY			1
Comprehensive	Comprehensive	Comprehensive	Worksite	Comprehensive	Comprehensive	Home Care Only	2
Long Term Care Insurance	Thrivent Long Term Care Insurance	TransCare III	TransCare II - 2012 (Worksite)	LifeStyle Solutions	LifeStyle Solutions Select Impaired Risk	Clear Advantage	3
97062	ICC12 H-HL-LTC	ICC13 TLC-4	TLC 2-P 0410; ICC10 TLC-3	CCL-3000-TQ	CCL-3000-TQ SEL	HHC-01	4
1997	1987	1987		1983			5
2013	2012	2013	2012	2013	2013	2010	6
All But MA, NJ, RI	All But Perhaps NY	All States & DC		FL, IL, IA, KS, KY, LA, MD, MN, MS, MO, MT, NE, ND, OH, OK, PA, SC, SD, TX, WA & WV			7
30 (Including CT, IN)	36 (Including IN)	38 (Including CT, IN)		13			8
							9
A+	A++	A+		B-			10
AA	Not Rated	AA-		Not Rated			11
Not Rated	Not Rated	A1		Not Rated			12
Not Rated	AA	AA-		Not Rated			13
Not Rated	98	93		Not Rated			14
							15
\$133,432	\$72,162	\$115,276		\$148			16
\$75,679	\$5,798	\$4,718		\$16			17
8%, 16%	5%, 32%	9%, -14%		3%, 1%			18
							19
\$9.9	\$8.5	\$22.4 (Plus \$1.5 of Single Premium)		\$3.4			20
\$200.5	\$191.4	\$479.5		\$30.0			21
-21%, 7%	571%, 1%	8%, 2%		-3%, 1%			22
							23
4,459	3,576	11,104		1,632			24
132,312	125,271	266,609		17,893			25
-25%, 1%	604%, -1%	3%, 0%		-3%, -2%			26
							27
30 - 79	18 - 79	18 - 79		40 - 85	40 - 85	18 - 99	28
\$100 - \$500 (Weekly for HC)	\$1,500 - \$15,000/Month	\$50 - \$500	\$50 - \$400	\$50 - \$350	\$50 - \$150	\$20 - \$250	29
2, 3, 5	2, 3, 5, 8, 10	\$18,250 - \$1,095,000	\$18,250 - \$876,000	1, 2, 3, 4, 5	1, 2, 3	1, 2, 3, 4, 5	30
30, 90, 180	30, 90, 180	0, 30, 60, 90, 180, 365	0, 30, 60, 90, 180	0, 40, 90, 120, 180	90, 120, 180	0, 20, 100, 180, 365	31
Yes, Yes	Yes, Yes	Yes, Yes		Yes, Yes	Yes, Yes	No, No	32
Service Days	1 HC/Week=7	Service Days		Calendar Days After 1st Expense			33
No	Extra Cost; HC Days Retire FC EP	Automatic, Does Not Retire Facility EP		No			34
							35
1, 1	1, 1	1, 2 (0-Day HC)		1, 1	1, 1	Home Care Only	36
Weekly	Monthly	Daily (Monthly Extra \$)		Monthly	Monthly	Daily	37
No, No	No, No	No, No		No, No			38
NA	NA	NA		NA			39
NA	NA	10 x Daily Max Each Month		NA			40
NA	10% in Facilities; 15% At Home (Extra \$)	NA		NA			41
100%	100%	100%		100%	100%	Home Care Only	42
100%	100%	100%		100%	50%	Home Care Only	43
Same, Not Covered	Same, Not Covered	Through Partial Cash Alternative		Both Same As Above	Both Save As Above	Not Covered, Not Covered	44
Same As Custodial Care	Same As Custodial Care	Same as Custodial Care		Same As Custodial Care			45
Not Covered	Not Covered	Through Partial Cash Alternative		Not Covered			46
Not Covered	Not Covered	Through Partial Cash Alternative		Not Covered			47
							48
5%	3%, 5%	3%, 5%		3%, 5%	3%, 5%	5%	49
5%	NA	NA		3%, 5%	3%, 5%	NA	50
NA	NA	NA		NA			51
No	No	No		No			52
Every 5 Years	5% Each Year	16% Every 3 Yrs Up to Age 70 or 'til Declined Twice		NA			53
				NA			54
\$25 of MDB Every 5 Years From Ages 45-65 If Not Claim-Eligible	FPO Provides Automatic 5% Increases Each Year, Unless Declined, Until 3 Consecutive Offers are Declined. Always Applies When on Claim	If No BIO is Purchased, It Can Be Bought at the 1st, 3rd or 5th Anniversary If Haven't Been Claim-Eligible		Includes Programs to Delay Disability & Prolong Independence		Partnership Impaired Risk Product. Pre-Existing Exclusion. Includes Programs to Delay Disability & Prolong Independence	55

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56	COMPANY NAME	MASSMUTUAL	MEDAMERICA	MUTUAL OF OMAHA	
57	Product Marketing Name	SignatureCare 500	FlexCare	MutualCare Secure Solution	MutualCare Custom Solution
58	Sales Rep/Source for More Info	800-767-1000	http://agents.yourlongtermcare.com/	800-693-6083	
59	Ancillary Benefits				
60	Bed Reserve Days/Year, Respite during EP?	60+Other, 30	30+Other, 30	30+Other, 30	
61	Alternative Plan of Care (APC)	Contractual After EP	Contractual After EP	Contractual After EP	
62	Home Modification	APC	Same as Emergency Alert	2 x Mo Max If Care Coord Is Used*	
63	Caregiver Training Benefit	5 x MDB	10 x MDB	Included Above*	
64	Emergency Alert	50% of MDB/Month	Covered Up to MDB; MedAmerica	Included Above*	
65	Equipment Benefit	APC	May Agree to Pay More Via APC	Included Above*	
66	Drug, Ambulance Benefit	1 x MDB/Mo, 4 x MDB/Yr	NA	NA	
67	Claims Issues				
68	Conditional Receipt Protection	Full, After UW Req't	No	Full, After UW Req't	
69	Coverage Beyond USA	1/2 MDB to 1/4 Max LT Benefit	Same as USA	Canada & UK; Indemnity for Other (365)	
70	Provider Discounts (Directly or Indirectly)	No	Yes	No	
71	Care Coordination Available From	Company Staff	Company Staff	Client's Choice	
72	Third Party Care Coordinator Limits	None	None	None	
73	Independent Review	As Required By Law	Extended to All Claimants	As Required By Law	
74	Premiums and Discounts				
75	Gender-Distinct or Unisex Pricing	Unisex	Unisex	Gender-Distinct	
76	Preferred Discount	10%	5%	15%	
77	Substandard Extra Ratings	25%, 150%, 400%	None	25%, 50%	
78	Two-Spouse, Two-Partner Discounts	30%, 30%	25%, 25%	30%, 30%	
79	Requires Identical Coverage	No	No	No	
80	If Spouse is a Surprise Decline	Reduced	Reduced	Reduced	
81	If Spouse Answers "Yes" to "Knockout" question	Reduced	Reduced	Reduced	
82	One-Spouse Discount (Only 1 Spouse Applies)	15%	10%	15%	
83	Maximum Best UW Class & Spouse Discount	37%	28.75%	40.5%	
84	Later Marriage Earns Discount For	Current (If Same Series) & New Spouse	Both (if same form)	If Same Form, Current & New Spouse	
85	Most Common Employer, Affinity Discount	10%, 10%	5%, 5%	5% (Not Employer Sponsored), 5%	
86	Minimum Size Employer Group, Number Apps	3, 3	25, 1	5 Apps, Common Employer Program Only	
87	Minimum Size Affinity Group, Number Apps	10, 3	100, 1	100, 10	
88	Credit Card: Frequencies Accepted	None	None	None	
89	Non-Level Premiums				
90	Fixed Periods	NA	10, 20	NA	
91	Paid Up at Ages	NA	NA	NA	
92	Waiver of Premium				
93	First Premium Waived (Days)	Elimination	Elimination	Elimination	
94	HCBC Waiver	Yes	Yes	Yes, With 8 Days of Care/Month	
95	Joint Waiver	Extra Cost	Extra Cost	Not Offered	Extra Cost
96	Return of Premium Upon Death (ROP)				
97	ROP Design #1	NA	Net, 100% to 65, Grades to \$0 @75	Net, 3 x MMB	Net, 100% to 65
98	Other ROP Design(s)	NA	Net, 100% to 80, Then \$0	NA	Net, 100% or 3 x MMB
99	Other Riders and Features				
100	Paid Up Survivor Benefit	Extra Cost	Extra Cost	Not Offered	Extra Cost
101	Both People Must Survive Number of Years	10	10	NA	10
102	Claim-Free Requirement?	No	No	NA	
103	Shared Care Benefit	Permanent Extra \$, Third Pool	Permanent Extra \$, Third Pool That Can Differ from	Permanent Extra \$	
104	Other Shared Care Aspects	Avail Only w/2 Yr & 3 Yr BPs	Client-Specific Pools	Must Leave 1 Year for Living Spouse	
105	Restoration of Benefits	Extra Cost	Extra Cost	NA	
106	Other Comments	Loyal Customer Discount 5% All Yrs; FO Coverage Avail		Spouse Security Benefit Pays 60% of Reimb Benefit; 5% "Common Employer" Discount But Employer Cannot Be Involved in Any Way	
107	Offers Non-Tax-Qualified Policies (NTQ)	No	No	No	
108	Combination Policies Offered	None	None	None	

See page 12 for description of abbreviations.

STATE FARM	THRIVENT	TRANSAMERICA		UNITED SECURITY			
Long Term Care Insurance	Thrivent Long Term Care Insurance	TransCare III	TransCare II - 2012 (Worksite)	LifeStyle Solutions	LifeStyle Solutions Select Impaired Risk	Clear Advantage	56
	800-THRIVENT	817-285-3451, Carroll.Golden@Transamerica.com		800-872-3044, www.usa-cal.com			57
							58
							59
30+Other, No	60+Other, 60	60, 30		20, 20	Home Care Only, No		60
Contractual After EP	Contractual After EP	Contractual After EP		Contractual Up to 50 x MDB	Contractual After EP		61
50 x MDB*	2 x Monthly Max*	60 x MDB If Care Coord Is Used*		APC up to 50 x MDB*	APC up to 50 x MDB*		62
5 x MDB/Plan of Care	2 x Monthly Max	Included Above*		5 x HC MDB	5 x HC MDB*		63
25% MDB; Max 12 Months	Included Above*	Included Above*		NA	NA		64
Included Above*	Included Above*	Included Above*		NA	Included Above*		65
NA	NA	NA		NA	NA		66
							67
Full, After App	Full, After UW Reqt	Full, After App		No			68
No	Int'l (2x Max Monthly Benefit)	Canada (Other=Cash Benefit only)	Canada (Other=75% (365))	No			69
No	No	No		No			70
Through Network	Through Network	Through Network		Yes			71
None	None	None		Yes			72
Extended to Some IF & Some States	Extended to IF in States with IR	Extended to Some IF & Some States		As Required By Law			73
							74
Unisex	Unisex	Gender-Distinct	Unisex	Unisex			75
10%	10%	10%		NA			76
None	25%, 50%	25%, 50%		25%, 60%, 100%, 200%	NA	25%, 60%, 100%, 200%	77
30%, 0%	35%, 35%	30%, 30%	20%, 20%	20%, 20%	10%,10%	10% Off Higher Prem,0%	78
No	No	No	Yes	Yes			79
Unchanged	Reduced	Reduced		Reduced	Reduced	Lost	80
Lost	Reduced	Reduced		Reduced	Reduced	Lost	81
0%	15%	15%	10%	15%	10%	0%	82
37%	45%	37%	28%	30%	10%	10% Off Higher Prem	83
Current & New Spouse	Current & New Spouse	Current & New Spouse if Same Policy Form (& Benefits for Worksite)		Current & New Spouse	Current & New Spouse	10% Off Higher Prem	84
NA	NA	NA, 5%	5%, NA	10%, 10%	NA	NA	85
NA	NA	NA	5, 5 Ees (More for SUW or MGI)	5, 2	NA	NA	86
NA	NA	250, 12+/Year	NA	10, 2	NA	NA	87
M, Q, SA, A	None	M, Q, SA, A (First Payment Only)		M, Q, SA, A	M, Q, SA, A	NA	88
							89
NA	10	NA		NA			90
NA	65	NA		NA			91
							92
90 Service, Count Restarts	Elimination	Elimination		Elimination	Not Offered	Elimination + 90	93
If 15 Day Gap	Extra Cost	Automatic But NA if Substandard Class		Yes	Not Offered	Yes	94
Not Offered	Automatic with Shared Care Rider	Extra Cost		Not Offered	Not Offered	Extra Cost	95
							96
NA	Net, 100%	Automatic: Death Before Age 67		NA			97
NA	NA	Net, 100%		NA			98
							99
Not Offered	Extra Cost	Not Offered		Not Offered	Not Offered	Extra Cost	100
NA	10	NA		NA	NA	No	101
NA	Yes	NA		NA	NA	No	102
NA	Extra Cost Ends If Partner Dies. If Pool Depleted, Spouse <86 & No Clm in 2 Yrs, Can Buy 2 Yr BP	Extra Cost Ends If Partner Dies. If Pool Depleted, Spouse <91 & No Claim in 2 Years, Can Buy 2 Year BP		NA			103
NA							104
Included	Extra Cost	Extra Cost		NA	NA	Included	105
							106
	5-Year Rate Guarantee	No War Excl. Reimb Up to 2x MMB for Injury Until Age 67; Add'l Amt Not +/- From Pool. 5-Yr Rate Guarantee: SUW Up to \$400K for Worksite					106
No	No	No		No			107
None	Annuities	None		None			108

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Company (Product): Most Common Rating Class; 90-Day Elimination Period

	UW Class of Displayed Premiums	Without Benefit Increases							
		Age 40		Age 50		Age 60		Age 70	
		Male	Female	Male	Female	Male	Female	Male	Female
Five-Year Benefit Period									
Single Insured									
Bankers Life (GR-N620)	2/5	\$371	\$559	\$590	\$924	\$1,015	\$1,617	\$2,261	\$3,513
Bankers Life (GR-N650)	2/5	510	775	815	1,292	1,405	2,260	3,108	4,884
Country Life (Comprehensive)	2/2	442	442	601	601	973	973	2,530	2,530
Genworth (Privileged Choice Flex 2 — Preferred)	2/4	638	895	692	993	1,055	1,439	2,560	3,492
Genworth (Privileged Choice Flex 2 — Select)	2/4	796	1,086	846	1,154	1,319	1,799	3,200	4,365
John Hancock (Custom Care III Featuring Benefit Builder)	2/4	560	820	710	1,060	1,120	1,720	2,530	3,820
Knights of Columbus (Comprehensive)	1/1	247	247	451	451	780	780	1,874	1,874
MassMutual (500 Series)	2/5	620	620	788	788	1,262	1,262	2,914	2,914
MedAmerica (FlexCare)	2/2	350	350	586	586	1,061	1,061	2,406	2,406
Mutual of Omaha (MutualCare Secure Solution)	2/4	559	910	690	1,084	965	1,623	2,150	3,348
State Farm Mutual Auto	2/2	808	808	1,229	1,229	1,870	1,870	3,399	3,399
Thrivent (Long Term Care Insurance)	2/4	642	642	899	899	1,477	1,477	3,146	3,146
United Security (LifeStyle Solutions)	3/5	905	905	1,022	1,022	1,659	1,659	3,390	3,390
United Security (LifeStyle Solutions Select)	1/1	NA	NA	NA	NA	NA	NA	NA	NA
United Security (Clear Advantage)	3/5	521	521	577	577	957	957	2,182	2,182
Country Life (Facility Only)	2/2	358	358	474	474	746	746	1,920	1,920
Knights of Columbus (Facility Only)	1/1	160	160	293	293	507	507	1,312	1,312

Three-Year Benefit Period									
Single Insured									
Bankers Life (GR-N620)	2/5	292	425	450	687	760	1,185	1,708	2,577
Bankers Life (GR-N650)	2/5	391	577	603	941	1,027	1,617	2,280	3,486
Country Life (Comprehensive)	2/2	354	354	479	479	766	766	1,950	1,950
Genworth (Privileged Choice Flex 2 — Preferred)	2/4	528	743	561	849	787	1,074	1,990	2,714
Genworth (Privileged Choice Flex 2 — Select)	2/4	643	876	689	940	984	1,343	2,487	3,393
John Hancock (Custom Care III Featuring Benefit Builder)	2/4	470	610	590	820	900	1,300	2,080	2,950
Knights of Columbus (Comprehensive)	1/1	200	200	363	363	626	626	1,499	1,499
MassMutual (500 Series)	2/5	504	504	640	640	1,025	1,025	2,368	2,368
MedAmerica (FlexCare)	2/2	284	284	468	468	840	840	1,895	1,895
Mutual of Omaha (MutualCare Secure Solution)	2/4	428	649	525	774	751	1,159	1,684	2,420
State Farm Mutual Auto	2/2	587	587	907	907	1,394	1,394	2,532	2,532
Thrivent (Long Term Care Insurance)	2/4	482	482	674	674	1,124	1,124	2,440	2,440
United Security (LifeStyle Solutions)	3/5	722	722	817	817	1,335	1,335	2,755	2,755
United Security (LifeStyle Solutions Select)	1/1	1,607	1,607	1,812	1,812	2,918	2,918	5,615	5,615
United Security (Clear Advantage)	3/5	422	422	465	465	774	774	1,746	1,746
Country Life (Facility Only)	2/2	279	279	365	365	562	562	1,408	1,408
Knights of Columbus (Facility Only)	1/1	130	130	236	236	407	407	1,049	1,049

\$200,000 Benefit Pool									
Single Insured									
LifeSecure (Long Term Care II with Shareability Option)	2/3	577	865	780	1,169	1,265	1,897	3,153	4,729
Mutual of Omaha (MutualCare Secure Solution)	2/4	594	978	729	1,166	1,037	1,749	2,367	3,614
Transamerica (Transcare III)	2/4	543	827	753	1,147	1,222	1,861	2,739	4,174
LifeSecure (OM II Long Term Care — Worksite)	2/3	715	715	965	965	1,565	1,565	3,901	3,901
Transamerica (Transcare II — Worksite)	2/4	602	602	774	774	1,291	1,291	3,054	3,054

\$100,000 Benefit Pool									
Single Insured									
LifeSecure (Long Term Care II with Shareability Option)	2/3	361	541	479	719	770	1,154	1,898	2,846
Mutual of Omaha (MutualCare Secure Solution)	2/4	416	619	509	740	730	1,109	1,655	2,330
Transamerica (Transcare III)	2/4	396	603	549	837	891	1,358	1,998	3,045
LifeSecure (OM II Long Term Care — Worksite)	2/3	446	446	593	593	952	952	2,348	2,348
Transamerica (Transcare II — Worksite)	2/4	417	417	536	536	894	894	2,116	2,116

See page 12 for description of abbreviations.

5% Compound Benefit Increases								Without Benefit Increases				5% Compound Benefit Increases			
Age 40		Age 50		Age 60		Age 70		Age 40	Age 50	Age 60	Age 70	Age 40	Age 50	Age 60	Age 70
Male	Female	Male	Female	Male	Female	Male	Female								

Single Insured								Male & Female Couple the Same Age							
\$2,389	\$3,866	\$2,765	\$4,443	\$3,355	\$5,288	\$5,124	\$7,749	\$604	\$984	\$1,711	\$3,753	\$4,065	\$4,686	\$5,618	\$8,368
3,313	5,388	3,830	6,170	4,639	7,336	7,051	10,749	844	1,390	2,468	5,621	5,712	6,597	8,064	12,518
1,726	1,726	1,897	1,897	2,335	2,335	4,159	4,159	619	841	1,362	3,542	2,416	2,655	3,268	5,822
1,640	2,332	1,770	2,532	2,103	3,214	4,289	5,850	1,037	1,176	1,450	3,200	2,489	3,009	3,328	5,361
1,761	2,541	1,961	2,935	2,629	3,656	5,361	7,313	1,089	1,234	1,740	3,840	2,912	3,334	3,636	6,434
2,920	4,420	3,310	4,810	3,420	5,140	5,360	7,830	966	1,239	1,988	4,445	4,634	4,704	4,872	7,630
904	904	1,271	1,271	1,771	1,771	3,272	3,272	419	766	1,327	3,186	1,537	2,161	3,011	5,562
3,377	3,377	3,379	3,379	3,692	3,692	6,002	6,002	868	1,103	1,766	4,079	4,728	4,731	5,168	8,403
2,014	2,014	2,458	2,458	3,119	3,119	4,877	4,877	525	879	1,591	3,609	3,020	3,686	4,678	7,316
2,733	4,880	2,901	5,327	3,071	5,646	3,990	7,078	1,028	1,242	1,812	3,849	5,329	5,760	6,102	7,748
6,615	6,615	6,363	6,363	6,176	6,176	7,343	7,343	1,329	2,013	3,069	5,601	10,707	10,305	10,032	11,966
3,711	3,711	3,775	3,775	4,400	4,400	6,543	6,543	835	1,168	1,920	4,090	4,824	4,907	5,720	8,506
3,854	3,854	3,961	3,961	4,594	4,594	6,163	6,163	1,447	1,635	2,655	5,423	6,167	6,337	7,350	9,861
NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA
943	943	1,042	1,042	1,718	1,718	3,534	3,534	990	1,097	1,819	4,147	1,792	1,980	3,264	6,715
1,297	1,297	1,421	1,421	1,739	1,739	3,092	3,092	501	664	1,044	2,687	1,815	1,989	2,435	4,328
564	564	793	793	1,105	1,105	2,199	2,199	273	498	862	2,230	959	1,348	1,879	3,737

Single Insured								Male & Female Couple the Same Age							
1,708	2,759	1,981	3,154	2,407	3,744	3,726	5,507	466	739	1,264	2,785	2,904	3,338	3,998	6,001
2,313	3,738	2,677	4,268	3,247	5,070	4,997	7,435	635	1,014	1,763	3,939	3,972	4,559	5,546	8,493
1,428	1,428	1,567	1,567	1,928	1,928	3,236	3,236	495	670	1,072	2,730	1,999	2,194	2,699	4,531
1,328	1,761	1,488	2,027	1,699	2,615	3,313	4,639	859	953	1,108	2,487	2,026	2,529	2,888	4,236
1,385	2,029	1,649	2,467	2,037	2,975	4,142	5,799	902	1,056	1,298	2,985	2,181	2,803	2,959	5,083
2,510	3,490	2,720	3,660	3,070	3,950	4,420	5,960	756	987	1,540	3,521	4,200	4,466	4,914	7,266
724	724	1,016	1,016	1,415	1,415	2,612	2,612	340	616	1,064	2,548	1,230	1,728	2,406	4,440
2,745	2,745	2,747	2,747	3,001	3,001	4,879	4,879	706	896	1,436	3,315	3,843	3,845	4,201	6,830
1,551	1,551	1,891	1,891	2,403	2,403	3,757	3,757	426	701	1,261	2,843	2,327	2,837	3,604	5,636
2,089	3,480	2,207	3,804	2,390	4,033	3,126	5,117	753	909	1,337	2,873	3,898	4,208	4,496	5,769
4,754	4,754	4,617	4,617	4,532	4,532	5,411	5,411	960	1,476	2,272	4,150	7,640	7,427	7,316	8,765
2,822	2,822	2,946	2,946	3,438	3,438	5,172	5,172	626	876	1,461	3,171	3,668	3,830	4,469	6,724
3,112	3,112	3,201	3,201	3,722	3,722	5,011	5,011	1,155	1,307	2,138	4,409	4,980	5,121	5,956	8,017
7,151	7,151	7,289	7,289	8,243	8,243	10,821	10,821	2,893	3,262	5,253	10,107	12,871	13,121	14,837	19,477
760	760	831	831	1,380	1,380	2,802	2,802	803	883	1,471	3,317	1,445	1,578	2,622	5,224
1,014	1,014	1,109	1,109	1,355	1,355	2,262	2,262	390	512	786	1,971	1,419	1,553	1,897	3,166
452	452	634	634	883	883	1,755	1,755	221	401	692	1,784	768	1,078	1,501	2,984

Single Insured								Male & Female Couple the Same Age							
2,495	4,455	2,723	4,861	3,365	6,009	5,628	10,051	1,010	1,364	2,214	5,518	4,864	5,309	6,562	10,975
2,901	5,245	3,065	5,732	3,301	6,082	4,393	7,641	1,100	1,327	1,950	4,187	5,702	6,158	6,568	8,423
2,543	3,875	3,005	4,579	3,247	4,947	5,043	7,685	959	1,330	2,158	4,839	4,493	5,309	5,736	8,910
3,531	3,531	3,852	3,852	4,759	4,759	7,959	7,959	1,001	1,351	2,191	5,462	4,943	5,392	6,662	11,142
2,275	2,275	2,765	2,765	3,629	3,629	6,026	6,026	964	1,239	2,065	4,887	3,641	4,424	5,808	9,641

Single Insured								Male & Female Couple the Same Age							
1,560	2,785	1,673	2,988	2,047	3,656	3,387	6,049	631	839	1,347	3,321	3,041	3,263	3,992	6,605
2,030	3,323	2,142	3,636	2,324	3,858	3,071	4,925	724	875	1,288	2,789	3,747	4,045	4,327	5,598
1,934	2,947	2,182	3,325	2,459	3,747	3,611	5,502	700	970	1,574	3,530	3,417	3,855	4,344	6,379
2,203	2,203	2,366	2,366	2,894	2,894	4,790	4,790	624	830	1,333	3,287	3,084	3,312	4,051	6,706
1,427	1,427	1,719	1,719	2,323	2,323	3,908	3,908	667	858	1,430	3,385	2,283	2,750	3,718	6,252

EXHIBIT 5



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2017 Milliman Long Term Care Insurance Survey

The 2017 Milliman Long Term Care Insurance Survey is the 19th consecutive annual review of long term care insurance (LTCI) published by Broker World magazine. It analyzes the marketplace, reports sales distributions, and details available products.

The data includes certificates or individual policies sold to multi-life groups (primarily small groups) with discounts and/or underwriting concessions, but excludes group policies aimed only at the large group market.

Analysis of worksite sales will appear in the August issue of Broker World magazine.

Unless otherwise indicated, references are solely to U.S. stand-alone LTCI sales, excluding exercised future purchase options or other changes to existing coverage. "Stand-alone" refers to LTCI policies that do not include death benefits (other than returning premiums upon death or waiving a surviving spouse's premiums), annuity, or disability income benefits.

Highlights from This Year's Survey

Participants

Thirteen carriers participated broadly in this survey. Four others provided sales information so we could report accurate aggregate industry individual and multi-life sales.

Although not displaying products, Northwestern LTC provided background statistical information. Auto-Owners, John Hancock, MedAmerica, and United Security contributed to the sales total but did not provide other statistical information.

Sales Summary

- The 17 carriers reported sales of 88,922 policies (\$220,501,539 of new annualized premium) in 2016, which we believe represents 100 percent of the stand-alone LTCI industry's 2016 individual and multi-life sales.
- Overall, the number of policies sold was 13.6 percent less than in 2015 and the annualized premium was 14.2

percent less than in 2015. "Combo" policies (i.e., LTCI combined with life insurance or annuity coverage) and policies that offer LTC-related accelerated death benefits more than made up for the sales reductions.

- Six insurers increased sales compared to 2015.
- The average issue age dipped from 55.9 to 55.8, the lowest ever reported in this survey. Fewer insurers offer coverage to people under issue age 40 or above issue age 75.
- The average premium per new insured dropped slightly from \$2,497 to \$2,480 (reflecting 17 insurers), and the average premium per new buying unit (recognizing couples as one buying unit) dropped slightly from \$3,526 to \$3,496.
- Reported worksite business produced 12.6 percent of new insureds (12.5 percent in 2015 and lower percentages in 2014 and 2013), but only 8.5 percent of premium because of the younger issue age distribution.

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The “Age-Adjusted” benefit increase features typically increase benefits by five percent through age 60, by three percent compound or five percent simple from 61 to 75, and by zero percent after age 75.

“Indexed Level Premium” policies are priced to have a level premium, but the benefit increase is tied to an index such as the consumer price index (CPI).

A small error in the 2015 distribution has been corrected for one carrier, primarily shifting data from the “Other” category to various compound benefit options.

We project the age 80 maximum daily benefit by increasing the average daily benefit purchased from the average issue age to age 80. We project benefits according to the distribution of benefit increase features, using current future purchase option (FPO) election rates and assuming a long-term three percent CPI. The maximum benefit at age 80 (in 2040) for our 2016 average 56-year-old purchaser projects to \$281/day. Had our average buyer bought an average 2015 policy at age 55, his age 80 benefit would be \$300/day. The age 80 coverage for 2016’s average buyer is six percent less than if that person had bought in 2015 and 24 percent less than a purchase in 2014. Combining the reduction in sales with the reduction in coverage at age 80 for the average sale, the stand-alone LTCI industry sold about 26 percent as much coverage in 2016 as it did in 2012. The drop in coverage is really greater primarily because the average claim payment age (as opposed to the claim start age) is greater than 80. However, some of the difference has been covered by combination policies with LTCI benefits and policies with accelerated death benefits.

Six insurers provided both the number of available FPOs (at attained age rates) in 2016 and the number exercised. Table 9 shows 32.8 percent of insureds exercised FPOs that were available in 2016 based on their data. By insurer, election rates varied from 17 percent to 74 percent. The high percentage reflects an insurer using a “negative election” approach; i.e., the increase applies unless specifically rejected. Most carriers use “positive election” (the increase occurs only if specifically requested).

TABLE 8. SALES BY BENEFIT INCREASE TYPE

Type	2016	2015	2014	2013	2012	2011
5% Compound for Life	2.3%	4.0%	9.2%*	22.0%	32.7%	35.3%
3.5% Compound	0.9	1.5	NA	NA	Did not exist	
3% Compound	23.0	26.7	30.1	29.1*	22.5	17.1
Step-Rated	2.3	2.4	0.0	0.1	0.2	0.0
Other Compound	10.3	4.6	6.7*	2.1	0.8*	5.0
5% Simple for Life	0.6	3.4	4.8	5.6	6.8	9.7
Age-Adjusted	4.0	1.9	0.5	0.4	0.5*	0.1*
Indexed for Life, Level Premium	0.7	2.5	4.0	4.6	4.0	8.1
Deferred Compound Option	3.8	3.0	2.3	5.0	1.9	2.0
FPO: Fixed	31.5	25.7	21.9	18.8	20.3	12.9*
FPO: Indexed	4.5	2.6	1.6	—	—	—
No Benefit Increases	15.2	16.0	14.4	8.5	9.9	9.3
Other	0.9*	5.7	4.5*	3.8	0.4	0.5

*Adjusted to make the total equal 100.0%.

TABLE 9: FUTURE PURCHASE OPTION ELECTION RATES

Year	2016	2015	2014	2013	2012	2011
Election Rate	32.8%	33.9%	27.8%	24.0%	25.5%	24.4%

Elimination Period (EP)

Table 10 summarizes the distribution of sales by facility elimination period. More than 96 percent of issued policies have facility elimination period selections of 84 days or longer.

The percentage of policies with zero-day home care elimination period (but a longer facility elimination period) has dropped from 38.9 percent in 2013 to 21.3 percent in 2016, which is largely due to change in sales distribution among carriers. In 2016, 35.6 percent of the policies had a calendar-day elimination period definition, compared with only 31.6 percent in 2015. When a calendar-day EP was available, 45.5 percent of policies had the feature; in some cases, it was automatic.

Sales to Couples and Gender Distribution

Table 11 summarizes the distribution of sales by gender and couples status. It shows that 44.4 percent of couples insure only one spouse/partner. Sometimes one

spouse already has coverage (perhaps left over from a previous marriage). Sometimes one spouse is declined and the other buys. The percentage of single people was low, but the percentage of females among single insureds was high. It appears the one-of-a-couple sales include a good percentage of males.

When one spouse is declined, the other spouse completes the purchase 71.4 percent of the time.

Shared Care and Other Couples' Features

Table 12 summarizes the distribution of sales by shared care and other couples' features. It shows that a lower percentage of both-buying couples bought couples' features than in 2015:

- Shared care (allows one spouse/partner to use the other's available benefits if their own coverage has been depleted or offers a third independent pool that the couple can share)
- Survivorship (waives a survivor's pre-

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1	COMPANY NAME	BANKERS LIFE		COUNTRY LIFE	GENWORTH	KNIGHTS OF COLUMBUS		LIFESECURE	MASSMUTUAL
2	Policy Type	Comprehensive	Comprehensive	Comprehensive	Comprehensive	Facility-Only	Comprehensive	Work-Site	Comprehensive
3	Policy Marketing Name	SimpleChoice TO Standard	SimpleChoice TO Premier & Elite	Comprehensive LTC	Privileged Choice Flex 3 Enhanced	Long Term Care Plus NHC2	Long Term Care Plus LTC2	LifeSecure OM II (Work-Site)	SignatureCare 500
4	Policy Form Number	GR-N620	GR-N650	ICC14(LTC600)	ICC13-8000R1	ICC14 NHC2 7-14	ICC14 LTC2 7-14	LS-LTC-0005	MM500-P-2
5	Year First LTCI Policy Offered	1985		1989	1974	2000		2006	2000
6	Year Current LTCI Policy Was Priced	2013		2015	2015	2014		2014	2012
7	Jurisdictions LTCI Available	All States (BCLIC in NY)		23 States, None in the Northeast	All States (except MA, NH & VT)	All States & DC		All States (except MA, ME, NH, NY, VT) & DC	All States (except MD), DC & PR
8	State Partnerships (as of January 1, 2016)	40 (Including CT,IN)		17	39 (Including CA,CT,IN,NY)	None		36	40 (Including CT,IN,NY)
9	Financial Ratings (as of December 31, 2016)								
10	A.M. Best	A-		A+	B	A++		Not Rated	A++
11	Standard and Poor's	BBB+		Not Rated	BB-	AA-		Not Rated	AA+
12	Moody's	Baa2		Not Rated	Ba3w-	Not Rated		Not Rated	Aa2
13	Fitch	BBB		Not Rated	BB	Not Rated		Not Rated	AA+
14	COMDEX Ranking (as of May 1, 2017)	61		Not Ranked	49	100		Not Ranked	98
15	Statutory Financials (Millions)								
16	Assets (December 31, 2016)	\$17,602		\$9,170	\$40,172	\$23,627		\$309	\$235,038
17	Capital & Surplus (December 31, 2016)	\$1,300		\$1,139	\$3,431	\$1,919		\$33	\$15,423
18	Percent Increase (Assets, Surplus)	4%, 5%		-9%, 0%	3%, 11%	6%, 6%		18%, 81%	6%, 3%
19	LTCI Premium (Millions)								
20	2016 First Year Premium	\$5.0		\$0.8	\$12.1	\$3.5		\$16.7	\$11.1
21	2016 End of Year In-Force Premium	\$444.1		\$36.6	\$2,659.1	\$69.6		\$65.9	\$237.1
22	Percent Increase (New Business, In-Force)	-29%, -3%		-79%, 0%	-63%, 2%	8%, 6%		76%, 27%	-2%, 3%
23	LTCI Lives Insured								
24	2016 First Year Issued	2,478		328	4,601	2,322		10,684	3,726
25	2016 End of Year In-Force	236,033		22,814	1,175,842	51,673		47,638	88,285
26	Percent Increase (New Business, In-Force)	-32%, -6%		-85%, -1%	-64%, -2%	-1%, 3%		85%, 18%	0%, 3%
27	Policy Ranges and Elimination Period Terms								
28	Issue Age Range	18 - 84		25 - 75	40 - 75	18 - 75		18 - 79	40 - 75 (age nearest birthday)
29	Daily, Weekly or Monthly Benefit Range	\$40 - \$400		\$50 - \$500	\$50 - \$300	\$1,500 - \$15,000/Month		\$1,000 - \$20,000/Month	\$50 - \$400
30	Benefit Periods and/or Pools	1, 2, 3, 4, 5, 6, 8 (500 - 2,500 Day BP Also Available)		2, 3, 4, 5, 6, 8	2, 3, 4, 5	3, 5, 10		\$100K - \$1KK in \$1 Increments	2, 3, 4, 5, 6
31	Elimination Periods	0, 15, 30, 60, 90, 180, 365, 730, 1095, 1460		30, 90, 180, 365	30, 90, 180, 365	30, 90, 180 (cut in half for HCBC with care coordination)**		90	30, 60, 90, 180
32	Vanishing, Cumulative	Yes, Yes		Yes, Yes	Yes, Yes	Yes, No		Yes, Yes	Yes, Yes
33	Elimination Period Crediting	3 HC/Week - 7		Service Days	Svc days (Cal days after 1st expense, extra \$)	Calendar Days		Calendar Days	Service Days
34	0-day HCBC EP with longer NH EP	No		No	Extra Cost; HC Days Retire FC EP	Facility Only	No	No	Extra Cost; HC Days Retire FC EP
35	Policy Benefits								
36	Number of: Benefit Pools, EPs	1,1		1, 1	1,1	Facility Only	1,1	1,1	1,1
37	Partial Cash (Disability) Alternative	NA		NA	NA	NA		No, but see row 45	NA
38	Additional Cash Benefit	25% (Extra Cost)						NA	
39	HCBC Payment Basis	Weekly	Monthly	Daily (Monthly Extra \$)	Daily (Monthly Extra \$)	Facility Only	Monthly	Monthly	Daily (Monthly Extra \$)
40	Assisted Living (Percent of NH Max)	50%		100%		100%			
41	Home Care Health Aide (Percent of NH Max)	50%		100%				100%	100%
42	Independent Professional				Only if No HCA in 40 Miles			100%	
43	Homemaker Services	Must Be Incidental		Same As Custodial Care	Informal Homemaker & Chore Svcs up to 50% x MDB (extra \$)	Facility Only	Same As Custodial Care	Must be Incidental	Same As Custodial Care
44	Informal Care (Other Than Family)	Not Covered						Reduced	
45	Informal Family Care	Not Covered		NA	Family Members Only If Normal Compensation as HCA ee			*Flexible Benefit*: 50% of Unused Benefit Can Be Used for Other Care Specified in the Plan of Care, Including Family Caregiving	Not Covered
46	Benefit Increase Features								
47	Lifetime Compound Increases (Level Premium)	2%, 3%, 4%, 5%		3%, 5%	2%, 3%, 4%, 5%	3%, 5%		3%, 5%	3%, 5%
48	Lifetime Simple Increases (Level Premium)	5%		5%	5%	NA		NA	
49	Other Increases (Level Premium)	2 Decreasing Inflation Options Are Also Offered (See Other Comments)		NA	NA				
50	Future Purchase Options (FPO)	15% Every 3 Years		15% every 3 years until age 80 unless on claim or declined 2 x in a row	9.27% Every 3 Years	Board-set % (for 2017, 7% of the original MDB) Every 2 Years Until 2 Straight Declines or On Cln		15% every 3 years	NA
51	Benefit Increase Comments	FPO: To 89 If No Declines or Claims			FPO until declined 3 x in a row or on claim			Unlimited Offers (No Matter How Many Times the Insured Declines) Until Age 80 or when on claim or in the elimination period	
52	Other Comments	5% Compound Through Age 60, Then Either 3% Compound or 5% Simple Through Age 75, Then 0%; HCO; Facility Only; NTQ			Coordinates Benefits with All Other LTCI			Electronic App	Participating Policy; Dividends Payable; Facility-Only Available

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53	COMPANY NAME	BANKERS LIFE		COUNTRY LIFE	GENWORTH	KNIGHTS OF COLUMBUS		LIFESURE	MASSMUTUAL
54	Product Marketing Name	SimpleChoice TQ Standard	SimpleChoice TQ Premier & Elite	Comprehensive LTC	Privileged Choice Flex 3 Enhanced	Long Term Care Plus NHC2	Long Term Care Plus LTC2	LifeSecure OM II (Work-Site)	SignatureCare 500
55	Sales Rep/Source for More Info	www.bankerslife.com		(866) 856-4760	www.genworth.com	paul.ochs@kofc.org		Agent Sales Support Team (866-582-7701)	800-767-1000
56	Ancillary Benefits								
57	Bed Reserve Days/Year, Respite during EP?	60+ Other, No	60+ Other, 21	60+ Other, 30	60+ Other, 30	21, 21		365+ Other, No	60+ Other, 30
58	Alternative Plan of Care (APC)	No	Contractual After EP	Contractual After EP	Contractual After EP	Contractual After EP		Contractual After EP	Contractual After EP
59	Home Modification	NA	30 x MDB	60 x MDB*	3 x Monthly Max*	Facility Only	min (45 x MDB, \$5000)*	Covered Under the Flexible Benefit	APC
60	Caregiver Training Benefit		25% of Monthly HC	Included Above*	Included Above*		\$500/Calendar Year		5 x MDB
61	Emergency Alert		5% HC MMB; Max 12 Months				APC w/Care Co-ord		50% of MDB/Month
62	Equipment Benefit						Included Above*		APC
63	Drug, Ambulance Benefit	NA, \$75/Trip x 4x/Year		NA	NA	NA, \$250/Year		NA	1 x MDB/Mo, 4 x MDB/Yr
64	Claims Issues								
65	Conditional Receipt Protection	No	No	No	Full, Up to \$10k for some declines	No		No	Full, After UW Req
66	Coverage Beyond USA	Canada (Other - 30 Days)		60 x MDB	NH 75%/4 Yrs; HC 25%/1 Yr	Canada & US Territories		Canada (Other - NH 100%/1 Yr; HC 50%/1 Yr)	1/2 MDB to 1/4 Max LT Benefit
67	Provider Discounts (Directly or Indirectly)	No	No	No	Yes, for Relatives Too	LifePlans Provider Discount Program*		Yes, for Relatives too	No
68	Care Coordination Available From	Through Network		Company Staff*	Through Network	Through Network** or up to \$500/yr for client's choice		Client's Choice	Company Staff
69	Third Party Care Coordinator Limits	None		None	None	\$500/yr for client's choice		No Limit	None
70	Independent Review	As Required by Law		Extended to IF in States with IR	Extended to All Claimants	Extended to All Claimants		As Required By Law	As Required By Law
71	Premiums and Discounts								
72	Gender-distinct or Unisex pricing	Gender-Distinct		Gender-Distinct	Gender-Distinct for Single People	Gender-Distinct		Unisex	Unisex
73	Preferred Discount	10%		15%	"Pfd Best" - 95% x "Pfd"; "Pfd" - 79%-93% x "Sel"	10%		NA	10%
74	Substandard Extra Ratings	25%		None	25%	50%		NA	25%, 150%, 400%
75	Two-Spouse, Two-Partner Discounts	35%, 10%		15%, 15%	29%-46% for M&F couple	30%, 0%		30%, 30%	30%, 30%
76	Requires Identical Coverage	No		No	No	No		No	No
77	If Spouse is a Surprise Decline	One-spouse discount		One-spouse discount	15% off individual gender-specific price	One-spouse discount		No Discount	One-spouse discount
78	If Spouse answers "Yes" to "Knock-Out" question	One-spouse discount		One-spouse discount	No Discount	One-spouse discount		No Discount	One-spouse discount
79	One-Spouse Discount (Only 1 Spouse Applies)	15%		10%	15%	15%		0%	15%
80	Maximum Best UW Class & Spouse Discount	41.5%		30%	Varies widely, up to 43%	37%		37%	37%
81	Later Marriage Earns Discount For:	IF & New Spouse (if within two years); Otherwise, New Spouse gets one-buy discount		Both	IF (If Within 12 Months) & New Spouse	New Spouse gets 15% discount		IF (if same policy series) & New Spouse	IF (If Same Series) & New Spouse
82	When are dividends or credits expected to start?	NA		NA	NA	NA		NA	Later of age 65 or 10 years
83	Most Common Employer, Affinity Discount	NA, 5%		NA	NA, 5%	NA		Unisex, NA	10%, 10%
84	Minimum Size Employer Group, Number Apps	NA		NA	NA	NA		3, 5	3, 3
85	Minimum Size Affinity Group, Number Apps	Varies		Varies	250,1	NA		NA	10, 3
86	Modal Factors (SA, Q, M, PAC)	0.515, 0.2625, 0.0917, 0.0858		0.515, 0.26, NA, 0.085	0.51, 0.26, NA, 0.09	0.52, 0.265, NA, 0.0865		0.5, 0.25, NA, 0.0833	0.52, 0.265, NA, 0.088
87	Credit Card: Frequencies Accepted	None		None	M, Q, SA, A (First Payment Only)	None		M, Q, SA, A	None
88	Non-Level Premiums								
89	Fixed Periods	NA		NA	NA	NA		10	NA
90	Paid Up at Ages	NA		NA	NA	NA		NA	NA
91	Waiver of Premium								
92	First Premium Waived (Days)	Elimination		Elimination	Elimination; No WP saves 5%	Elimination		Elimination	Elimination
93	HCBC Waiver	Yes		Yes	Yes	Yes		Yes	Yes
94	Joint Waiver	Extra Cost	Automatic	Not Offered	Automatic w/Shared Care; Else No	Not Offered		Not Offered	Extra Cost
95	Return of Premium Upon Death (ROP)								
96	ROP Design #1	Net; Grades from 10% @ 4th Year to 100% @ Year 20+		Automatic: Net, Death Before 65	Automatic: Net, Death Before 65	Automatic: Net, Death Before 65		Net, grades up to 75% after 15 years	NA
97	Other ROP Design(s)	NA		NA	NA	NA		NA	NA
98	Other Riders & Features								
99	Paid Up Survivor Benefit	Extra Cost		Not Offered	Not Offered	Not Offered		Not Offered	Extra Cost
100	Both People Must Survive Number of Years	10		NA	NA	NA		NA	10
101	Claim-Free Requirement?	No		NA	NA	NA		NA	No
102	Shared Care Benefit	Permanent Extra \$, Third Pool		Extra Cost Ends If Partner Dies	Extra Cost Ends If Partner Dies; cannot be unilaterally taken away	Available with 3-year or 5-year BP in lieu of couples discount		Extra Cost Ends If Partner Dies	Permanent Extra \$, Third Pool
103	Other Shared Care Aspects			Cannot be unilaterally taken away	Joint WP; Survivor Protected for At Least 1/2 Original Bucket	NA		Must Leave 1 Year for Living Spouse	Available Only w/2Yr & 3Yr BPs
104	Restoration of Benefits	Extra Cost	Included	Extra Cost	NA	NA		NA	Extra Cost
105	Other Comments	Extra-Cost Rider Ups Survivor's Daily Benefit 50% But Survivor's Prem is Unchanged; Return of Premium Applies on Lapse Also.		Claim period shorter than EP credited toward satisfaction of EP	On-Line Live + Well Program Developed by Mayo Clinic	Claims subject to "usual and customary"; Caregiver training and care management benefits do not count against monthly max but do count against lifetime max		Simplified Issue Available on Work-Site Product thru Age 65, up to \$300K (\$200K with Shared Care) or \$400K (\$300K with Shared Care), depending on program	Loyal Customer Discount 5% All Yrs; available in work-site
106	Combination Policies Offered	None		None	None	None		None	Life

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1	COMPANY NAME	MUTUAL OF OMAHA		NATIONAL GUARDIAN	NEW YORK LIFE	STATE FARM	THRIVENT	TRANSAMERICA		
2	Policy Type	Comprehensive	Comprehensive	Comprehensive	Comprehensive	Comprehensive	Comprehensive	Comprehensive	Work-Site	
3	Policy Marketing Name	MutualCare Secure Solution	MutualCare Custom Solution	EssentialLTC	NYL SecureCare	Long Term Care Insurance	Long-Term Care Insurance	TransCare III - 2017	TransCare II - 2015	
4	Policy Form Number	LTC13		ICC16-NLTC100P	ICC14-LTC6	97063	ICC13 H-HX-LTC	ICC13, TLC-4	TLC 2-P 0410; ICC10 TLC-3	
5	Year First LTCI Policy Offered	1987		2016	1988	1997	1987	1987		
6	Year Current LTCI Policy Was Priced	2013		2016	2016	2016	2016	2017	2015	
7	Jurisdictions LTCI Available	All States & DC		All States (except NY) & DC	All States & DC	All States (except CA, CT, DC, IN, MA, NH, NY, RI)	All States (except CT & NY) & DC	All States & DC		
8	State Partnerships (as of January 1, 2016)	37		1 (SD)	36	32	39 (Including IN)	40 (Including CT, IN)		
9	Financial Ratings (as of December 31, 2016)									
10	A.M. Best	A+		A-	A++	A++	A++	A+		
11	Standard and Poor's	AA-		Not Rated	AA+	AA	Not Rated	AA-		
12	Moody's	A1		Not Rated	Aaa	Not Rated	Not Rated	A1		
13	Fitch	Not Rated		Not Rated	AAA	Not Rated	AA+	A+		
14	COMDEX Ranking (as of May 1, 2017)	93		Not Ranked	100	Not Ranked	99	90		
15	Statutory Financials (Millions)									
16	Assets (December 31, 2016)	\$7,279		\$4,051	\$287,196	\$149,914	\$84,834	\$131,790		
17	Capital & Surplus (December 31, 2016)	\$3,048		\$324	\$23,336	\$87,574	\$7,726	\$5,235		
18	Percent Increase (Assets, Surplus)	5%, 6%		7%, 7%	6%, 3%	7%, 6%	6%, 8%	4%, -4%		
19	LTCI Premium (Millions)									
20	2016 First Year Premium	\$43.0		NA	\$18.7	\$4.6	\$11.5	\$16.5		
21	2016 End of Year In-Force Premium	\$393.9		NA	\$285.6	\$226.9	\$199.5	\$481.2		
22	Percent Increase (New Business, In-Force)	10%, 10%		NA	16%, 5%	10%, 4%	19%, 3%	-33%, -2%		
23	LTCI Lives Insured									
24	2016 First Year Issued	16,263		NA	7,508	1,658	4,771	8,395		
25	2016 End of Year In-Force	174,035		NA	143,823	126,274	126,483	266,398		
26	Percent Increase (New Business, In-Force)	11%, 7%		NA	27%, 2%	10%, -1%	19%, 2%	-31%, -1%		
27	Policy Ranges and Elimination Period Terms									
28	Issue Age Range	30 - 79		40-79 (age nearest birthday)	25 - 79	30 - 79	18 - 79	18 - 79		
29	Daily, Weekly or Monthly Benefit Range	\$1,500 - \$10,000/Month		\$50 - \$300	\$50 - \$400	\$100 - \$500 (Weekly for HC)	\$1,500 - \$15,000/Month	\$50 - \$500	\$50 - \$400	
30	Benefit Periods and/or Pools	2, 3, 4, 5	\$50,000 - \$500,000 (up to 8.3 yrs)	2, 3, 4, 5, 6, LT	2, 3, 5, 7	2, 3, 5	2, 3, 4, 5, 8	\$18,250-\$1,095,000	\$18,250-\$876,000	
31	Elimination Periods	90, 180, 365	0, 30, 60, 90, 180, 365	0, 30, 90, 180	90, 180, 365 (20 for HCBC*)	30, 90, 180	30, 90, 180	0, 30, 60, 90, 180, 365	0, 30, 60, 90, 180	
32	Vanishing, Cumulative	Yes, Yes		Yes, Yes	Yes, Yes	Yes, Yes	Yes, Yes	Yes, Yes		
33	Elimination Period Crediting	Calendar Days After 1st Expense		Service Days	Service Days	Service Days	1 HC/Week-7	Service Days		
34	0-day HCBC EP with longer NH EP	Extra Cost; HC Days Retire FC EP		Extra Cost; HC Days Retire FC EP	No	No	Extra Cost; HC Days Retire FC EP	Automatic; Extra Cost to Retire Facility EP		
35	Policy Benefits									
36	Number of: Benefit Pools, EPs	1,1		1,1	1,1	1,1	1,1	1,2 (0-Day HC)		
37	Partial Cash (Disability) Alternative	30% (Automatic)	40% (Automatic)	NA	NA	NA	NA	10 x Daily Max Each Month		
38	Additional Cash Benefit	NA		NA	NA	NA	10% in Facilities but 15% at Home (Extra Cost)	NA		
39	HCBC Payment Basis	Monthly		Daily	Daily (Monthly@31 x MDB*)	Weekly	Monthly	Daily (Monthly Extra \$)		
40	Assisted Living (Percent of NH Max)	NA		100%	100%	100%	100%	100%		
41	Home Care Health Aide (Percent of NH Max)	50%, 75%, 100%		100%	50%, 80%, 100%	100%	100%	100%		
42	Independent Professional	NA		Not Covered	Not Covered	Not Covered	Not Covered	Through Partial Cash Alternative		
43	Homemaker Services	Same As Custodial Care		Same As Custodial Care	1 day/wk if 2 LTC days provided	Same As Custodial Care	Same As Custodial Care	Same As Custodial Care		
44	Informal Care (Other Than Family)	Cash Alternative Has 0 Day EP; if used it Delays Satisfying the EP		Not Covered	50% of HC MDB up to 365 days with 4+ hrs of care/day from non-Partner.	Not Covered	Not Covered	Through Partial Cash Alternative		
45	Informal Family Care	NA		Not Covered	Not Covered	Not Covered	Not Covered	Through Partial Cash Alternative		
46	Benefit Increase Features									
47	Lifetime Compound Increases (Level Premium)	3%, 4%, 5%	1% to 5%, 0.25% increments & Buy-Up Option	3%, 5%	3%, 5%	3%, 5%	1%, 2%, 3%, 5%	5%		
48	Lifetime Simple Increases (Level Premium)	NA		NA	3%	5%	NA	NA		
49	Other Increases (Level Premium)	3% or 5% CBIO for 20 Years	Above w/ 10, 15 or 20 yr periods	NA	Based on CPI-U (cap: 7.5%/yr)	NA	NA	Tailored (5% thru age 60; 3% thru age 75; 0% age 76+)		
50	Future Purchase Options (FPO)	NA	No FPO. Buy-up option allows % incr each yr not to exceed 5%. Avail prior to sooner of 20 yrs or age 75 and not chronically ill	NA	Premiums & benefits increase based on CPI-U (cap: 7.5%/yr)	Every 5 Years	FPO Provides Automatic 5% Increases Each Yr Until Declined 3 x In a Row. Always Applies When on Claim.	3% or 5% Step-Rated: Prems & Maximums Incr Same % Each Yr		
51	Benefit Increase Comments	NA		3% or 5% Step-Rated: Premiums increase a flat amount each year	CPI increases maintain original-age price per unit	\$25 of MDB Every 5 Years From Ages 45-65 If Not Claim-Eligible	NA	If No BIO is Purchased, It Can Be Bought at the 1st, 3rd or 5th Anniversary If Haven't Been Claim-Eligible		
52	Other Comments	Electronic App	Rider Doubles MMB for Professional HC	NA	Participating Policy: Dividends Payable; Partners Benefit Rider provides Jt WP and Shared EP	NA	NA	Electronic App		

2017 Milliman LTCI Survey Product Exhibit

53	COMPANY NAME	MUTUAL OF OMAHA		NATIONAL GUARDIAN	NEW YORK LIFE	STATE FARM	THRIVENT	TRANSAMERICA	
54	Product Marketing Name	MutualCare Secure Solution	MutualCare Custom Solution	EssentialTC	NYL SecureCare	Long Term Care Insurance	Long-Term Care Insurance	TransCare III - 2017	TransCare II - 2015
55	Sales Rep/Source for More Info	1-800-693-6083		Tom Thompson, 888-505-2332	(800) 224-4582		1-800-THRIVENT	Richard Christman, (512) 423-0222	
56	Ancillary Benefits								
57	Bed Reserve Days/Year, Respite during EP?	30 + Other, 30		30 + Other, 30	60 + Other, 30	30 + Other, No	60 + Other, 2 x Monthly Max	60 + other, 30	
58	Alternative Plan of Care (APC)	Contractual After EP		No	Contractual When Benefit Eligible	No	Contractual After EP	Contractual After EP	
59	Home Modification	2 x Mo Max If Care Coord Is Used*		Not Covered	Grab bars, hand rails, ramps	50 x MDB*	2 x Monthly Max*	60 x MDB If Care Coord Is Used*	
60	Caregiver Training Benefit			5 x MDB	5 x Facility MDB	5 x MDB /Plan of Care			
61	Emergency Alert	Included Above*		Up to \$50/Month	NA	25% MDB; Max 12 Months	Included Above*	Included Above*	
62	Equipment Benefit			Not Covered	\$4,000	Included Above*			
63	Drug, Ambulance Benefit	NA		NA	NA	NA	NA	NA	
64	Claims Issues								
65	Conditional Receipt Protection	Full, After UW Req't		No	Up to \$1000 for 60 days after app	Full, After App	Full, After UW Req't	Full, After App	No
66	Coverage Beyond USA	Canada & UK; Indemnity for Other (365)		Canada (others - 30 days)	100 x Facility MDB	No	2x Max Monthly Benefit	Canada (Other - Cash Benefit only)	Canada (Other - 75% (365))
67	Provider Discounts (Directly or Indirectly)	No		No	No	No	No	No	
68	Care Coordination Available From	Client's Choice		Network	Through Network*	Through Network	Through Network	Through Network	
69	Third Party Care Coordinator Limits	None		None	NA	None	None	None	
70	Independent Review	As Required By Law		As Required By Law	Extended to IF in States with IR	Ext'd to Some IF & Some States	Extended to IF in States with IR	Extended to Some IF & Some States	
71	Premiums and Discounts								
72	Gender-distinct or Unisex pricing	Gender-Distinct		Gender-Distinct	Gender-Distinct	Gender-Distinct	Gender-Distinct	Gender-Distinct	Unisex
73	Preferred Discount	15%		20%	0%	10%	10%	10%	
74	Substandard Extra Ratings	25%, 50%		25%	50%, 100%	None	25%, 50%	25%, 50%	
75	Two-Spouse, Two-Partner Discounts	30%, 30%		Together pay female premium at the older insured's age	25%, 25%	30%, 0%	20%, 20%	30%, 30%	
76	Requires Identical Coverage	No		Yes	No	No	No	No	Yes
77	If Spouse is a Surprise Decline	One-spouse discount		Single Person Price	No Discount	Unchanged	One-spouse discount	One-spouse discount	
78	If Spouse answers "Yes" to "Knock-Out" question					No Discount			
79	One-Spouse Discount (Only 1 Spouse Applies)	15%		0%	0%	0%	5%	15%	
80	Maximum Best UW Class & Spouse Discount	40.5%		52% (same age couple)	25%	37%	30%	37%	
81	Later Marriage Earns Discount For:	If Same Policy Series, IF & New Spouse; Otherwise new spouse gets 15% discount		Neither	New Spouse	IF & New Spouse	IF & New Spouse	If same policy form, both get new discount; if not, New Spouse gets both-buy discount	
82	When are dividends or credits expected to start?	NA		NA	End of 10th year			NA	
83	Most Common Employer, Affinity Discount	5% (Not Employer Sponsored), 5%		5%, 5%	5% (not for SSTD), NA			NA, 5%	5%, NA
84	Minimum Size Employer Group, Number Apps	5 Apps, Common Employer Program Only		5, 1	None, None	NA	NA	NA	5, 5 'ees (More for SUW or MGI)
85	Minimum Size Affinity Group, Number Apps	100, 10		10, 1	NA			250, 12+ /Year	NA
86	Modal Factors (SA, Q, M, PAC)	0.51, 0.26, NA, 0.09		0.52, 0.27, 0.095, 0.095	0.51, 0.26, NA, 0.09	0.51, 0.26, 0.085, 0.085	0.508, 0.256, NA, 0.086	0.52, 0.265, 0.09, 0.09	
87	Credit Card: Frequencies Accepted	None		None	None	M, Q, SA, A	None	M, Q, SA, A (First Payment Only)	
88	Non-Level Premiums								
89	Fixed Periods	NA		1, 10	NA	NA	10	NA	
90	Paid Up at Ages			NA			NA		
91	Waiver of Premium								
92	First Premium Waived (Days)	Elimination		Elimination	Elimination	90 Service, Count Restarts If 15 Day Gap	Elimination	Elimination	
93	HCBC Waiver	Yes, With 8 Days of Care/Month		Extra Cost	Yes		Yes	Automatic But NA if Substandard Class	
94	Joint Waiver	Not Offered	Extra Cost	Automatic	Extra Cost	Not Offered	Automatic w/ Shared Care	Extra Cost	Extra Cost
95	Return of Premium Upon Death (ROP)								
96	ROP Design #1	Net, 3 x initial MMB after 10 yrs		100% Gross or Net; 2nd-to-die	Net, 100%	NA	Net, 100%	Automatic: Net, Death Before 67	
97	Other ROP Design(s)	NA	Net, 100%; Net, 100% to 65	Can add Cash Surrender Option (grades up to 80% after 4 years)	NA		NA	Net, 100%	Net, 100%
98	Other Riders & Features								
99	Paid Up Survivor Benefit	Not Offered	Extra Cost	Not Offered	Not Offered	Not Offered	Extra Cost	Not Offered	Not Offered
100	Both People Must Survive Number of Years	NA		10	NA	NA	10	NA	
101	Claim-Free Requirement?			No			Yes		
102	Shared Care Benefit	Permanent Extra \$		Permanent Extra \$, Third Pool	Permanent Extra \$, Third Pool	NA	Extra Cost Ends If Partner Dies	Extra Cost Ends If Partner Dies	
103	Other Shared Care Aspects	Must Leave 1 Year for Living Spouse		NA	Cannot be unilaterally taken away		Pool Depleted, Spouse < 86 & No Clm in 2 Yrs, Can Buy 2 Yr BP	Pool Depleted, Spouse < 91 & No Claim in 2 Years, Can Buy 2 Year BP	
104	Restoration of Benefits	NA			> 12 mos of not being chronically ill		NA	Extra Cost	
105	Other Comments	Spouse Security Benefit Pays 60% of Reimbursement Benefit; 5% "Common Employer" Discount But Employer Cannot Be Involved in Any Way		Markets ROP & Surrender Option as alternative to Combo Policies. Can use \$1035.	Qual'd EP costs can be reimbursed at end of next cal. yr after claim ends if policy is still IF (EP reinstated).	NA	5-Year Rate Guarantee	No War Exclusion. Reimb Up to 2x MMB for Injury Until Age 67; Additional Amt Not +/- From Pool. 5-Year Rate Guarantee: Simplified UW Up to \$400K for Work-Site	
106	Combination Policies Offered	None		See row 105	Life	Life	None	Life, in work-site & street markets	

2017 Milliman LTCI Survey

Company (Product): Most Common Rating Class; 90 Day Elimination Period

90 Day Elimination / Five-Year Benefit Period																									
	UW Class of Displayed Premiums	Single Insured																Male & Female Couple the Same Age							
		Without Benefit Increases								5% Compound Benefit Increases								Without Benefit Increases				5% Compound Benefit Increases			
		Age 40		Age 50		Age 60		Age 70		Age 40		Age 50		Age 60		Age 70		Age 40	Age 50	Age 60	Age 70	Age 40	Age 50	Age 60	Age 70
Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female								
Bankers Life SimpleChoice TQ Standard LTC GR-N620	2/3	371	559	590	924	1,015	1,617	2,261	3,513	2,389	3,866	2,765	4,443	3,355	5,288	5,124	7,749	604	984	1,711	3,753	4,065	4,686	5,618	8,368
Bankers Life SimpleChoice TQ Premier & Elite LTC GR-N650 Policy	2/3	510	775	815	1,292	1,405	2,260	3,108	4,884	3,313	5,388	3,830	6,170	4,639	7,336	7,051	10,749	844	1,390	2,468	5,621	5,712	6,597	8,064	12,518
Country Financial Tax Qualified Comprehensive Long Term Care	2/2	445	691	703	1,102	1,193	1,886	2,536	3,942	2,394	4,204	2,628	4,496	3,227	5,395	4,755	7,732	966	1,535	2,617	5,506	5,608	6,055	7,329	10,615
Genworth Privileged Choice Flex 3 - Select	3/4	908	1,139	1,011	1,220	1,251	1,973	2,722	4,383	3,759	6,550	4,226	7,044	4,779	7,902	7,838	13,229	1,578	1,637	2,121	4,614	5,752	6,440	7,671	13,281
Knights of Columbus (Comprehensive)	2/3	459	718	636	1,004	1,118	1,589	2,382	3,527	2,343	3,837	2,403	3,915	3,100	4,832	4,722	6,942	823	1,148	1,895	4,137	4,326	4,422	5,553	8,165
Knights of Columbus (Facility Only)	2/3	355	559	481	775	897	1,436	1,915	2,925	1,848	3,154	1,944	3,274	2,539	4,130	3,931	6,019	640	879	1,633	3,388	3,502	3,653	4,668	6,965
MutualCare Secure Solution	2/4	559	910	690	1,084	965	1,623	2,150	3,348	2,733	4,880	2,901	5,327	3,071	5,646	3,990	7,078	1,028	1,242	1,812	3,849	5,329	5,760	6,102	7,748
National Guardian EssentialLTC	2/3	516	786	660	1,011	973	1,496	2,131	3,206	2,762	4,203	2,902	4,448	3,173	4,876	3,964	5,964	786	1,011	1,496	3,206	4,203	4,448	4,876	5,964
New York Life Secure Care	1/3	745	974	981	1,361	1,471	2,239	3,171	4,659	5,157	8,541	4,727	7,883	4,928	8,657	7,435	12,439	1,290	1,757	2,782	5,873	10,273	9,457	10,189	14,906
State Farm Long Term Care Insurance	2/2	645	925	958	1,420	1,397	2,198	2,670	3,922	4,719	7,980	4,486	7,695	4,225	7,538	5,380	8,773	1,099	1,665	2,517	4,614	8,889	8,527	8,234	9,907
Thrivent Long-Term Care Insurance	2/4	480	690	720	1,110	1,170	1,890	2,310	3,780	2,520	5,009	2,700	5,073	3,065	5,727	4,204	7,711	936	1,464	2,448	4,872	6,024	6,218	7,034	9,532
Transamerica TransCare III	2/4	670	1,020	1,013	1,544	1,665	2,538	3,434	5,233	3,465	5,281	3,897	5,938	4,627	7,051	6,494	9,896	1,183	1,790	2,942	6,066	6,122	6,885	8,175	11,473
Transamerica TransCare II - 2015	2/4	888	888	1,332	1,332	2,018	2,018	4,480	4,480	4,489	4,489	5,719	5,719	6,174	6,174	9,685	9,685	1,243	1,865	2,826	6,273	6,285	8,007	8,644	13,560
90 Day Elimination / Three-Year Benefit Period																									
Bankers Life SimpleChoice TQ Standard LTC GR-N620	2/3	292	425	450	687	760	1,185	1,708	2,577	1,708	2,759	1,981	3,154	2,407	3,744	3,726	5,507	466	739	1,264	2,785	2,904	3,338	3,998	6,001
Bankers Life SimpleChoice TQ Premier & Elite LTC GR-N650 Policy	2/3	391	577	603	941	1,027	1,617	2,280	3,486	2,313	3,738	2,677	4,268	3,247	5,070	4,997	7,435	635	1,014	1,763	3,939	3,972	4,559	5,546	8,493
Country Financial Tax Qualified Comprehensive Long Term Care	2/2	385	571	604	908	1,022	1,551	2,175	3,243	2,120	3,593	2,310	3,827	2,782	4,569	4,119	6,463	813	1,285	2,187	4,606	4,856	5,217	6,248	8,995
Genworth Privileged Choice Flex 3 - Select	3/4	876	991	881	1,059	963	1,378	2,089	3,163	3,586	5,931	3,637	5,991	3,693	5,992	6,286	9,840	1,513	1,531	1,577	3,541	5,136	5,327	5,967	10,653
Knights of Columbus (Comprehensive)	2/3	409	604	565	839	927	1,368	1,940	2,758	1,943	2,893	1,996	3,047	2,492	3,789	3,716	5,468	709	983	1,606	3,289	3,448	3,530	4,397	6,429
Knights of Columbus (Facility Only)	2/3	324	479	431	655	794	1,201	1,671	2,425	1,553	2,493	1,637	2,595	2,143	3,288	3,324	4,798	562	760	1,396	2,967	2,832	2,963	3,802	4,024
MassMutual SignatureCare 500	2/5	620	620	788	788	1,262	1,262	2,914	2,914	3,377	3,377	3,379	3,379	3,692	3,692	6,002	6,002	868	1,103	1,766	4,079	4,728	4,731	5,168	8,403
MutualCare Secure Solution	2/4	428	649	525	774	751	1,159	1,684	2,420	2,089	3,480	2,207	3,804	2,390	4,033	3,126	5,117	753	909	1,337	2,873	3,898	4,208	4,496	5,769
National Guardian EssentialLTC	2/3	413	629	528	809	779	1,197	1,705	2,565	2,210	3,363	2,322	3,559	2,538	3,901	3,172	4,771	629	809	1,197	2,565	3,363	3,559	3,901	4,771
New York Life Secure Care	1/3	644	777	794	1,017	1,154	1,615	2,430	3,326	3,911	5,955	3,554	5,415	3,723	5,983	5,580	8,476	1,066	1,358	2,076	4,317	7,400	6,727	7,279	10,542
State Farm Long Term Care Insurance	2/2	490	656	742	1,023	1,101	1,596	2,104	2,836	3,587	5,592	3,444	5,446	3,294	5,391	4,215	6,272	802	1,236	1,888	3,458	6,425	6,223	6,080	7,341
Thrivent Long-Term Care Insurance	2/4	390	540	570	810	900	1,350	1,770	2,730	1,919	3,542	2,069	3,783	2,340	4,266	3,239	5,733	744	1,104	1,800	3,600	4,369	4,681	5,285	7,178
Transamerica TransCare III	2/4	396	603	599	912	984	1,500	2,029	3,092	2,010	3,062	2,390	3,643	2,821	4,298	4,143	6,313	699	1,058	1,739	3,585	3,551	4,223	4,984	7,320
Transamerica TransCare II - 2015	2/4	527	527	790	790	1,197	1,197	2,658	2,658	3,004	3,004	3,656	3,656	3,956	3,956	5,348	5,348	738	1,106	1,676	3,721	4,206	5,118	5,539	7,487
90 Day Elimination / \$200,000 Benefit Pool																									
LifeSecure OM II (Work-Site)	1/1	715	715	965	965	1,565	1,565	3,901	3,901	3,531	3,531	3,852	3,852	4,759	4,759	7,959	7,959	1,001	1,351	2,191	5,462	4,943	5,392	6,662	11,142
MutualCare Custom Solution	2/4	594	978	729	1,166	1,037	1,749	2,367	3,614	2,901	5,245	3,065	5,732	3,301	6,082	4,393	7,641	1,100	1,327	1,950	4,187	5,702	6,158	6,568	8,423
90 Day Elimination / \$100,000 Benefit Pool																									
LifeSecure OM II (Work-Site)	1/1	446	446	593	593	952	952	2,348	2,348	2,203	2,203	2,366	2,366	2,894	2,894	4,790	4,790	624	830	1,333	3,287	3,084	3,312	4,051	6,706
MutualCare Custom Solution	2/4	416	619	509	740	730	1,109	1,655	2,330	2,030	3,323	2,142	3,636	2,324	3,858	3,071	4,925	724	875	1,288	2,789	3,747	4,045	4,327	5,598

EXHIBIT 6

TABLE 13. SALES BY BENEFIT INCREASE TYPE							
Type	2019	2018	2017	2016	2015	2014	2013
4.5+% Compound for Life	1.7%	2.0%	1.5%	2.3%	4.0%	9.2%*	22.0%
4% Compound	0.6	0.4	NA	NA	NA	NA	NA
3.5% Compound	0.3	0.2	0.3	0.9	1.5	NA	NA
3% Compound	32.7	20.9	23.2*	23.0	26.7	30.1	29.1*
2% Compound	2.9	1.6	1.6	NA	NA	NA	NA
1% Compound	1.6	0.5	NA	NA	NA	NA	NA
Step-rated	NR	NR	NR	2.3	2.4	0.0	0.1
Other Compound	8.7	19.5	19.1	10.3	4.6	6.7*	2.1
5% Simple for Life	0.1	0.4	0.2	0.6	3.4	4.8	5.6
Other Simple	0.9	1.3	NA	NA	NA	NA	NA
Age-Adjusted	0.2	0.5	0.2	4.0	1.9	0.5	0.4
Indexed for Life Level Premium	0.3	0.4	0.4	0.7	2.5	4.0	4.6
Deferred Compound Option	NR	NR	NR	3.8	3.0	2.3	5.0
FPO: Fixed	20.4	26.2*	27.5	31.5	25.7	21.9	18.8
FPO: Indexed	13.5	10.6	5.1	4.5	2.6	1.6	NA
No Benefit Increases	16.1	15.5	19.8	15.2	16.0	14.4	8.5
Other	0.0	0.0	1.1	0.9*	5.7	4.5*	3.8

*Prior to 2019, we adjusted the asterisked cells so the total would be 100%. Beginning in 2019, results might not add to 100% because of rounding.

TABLE 14: PROJECTED AGE 80 MAXIMUM DAILY BENEFIT FOR AVERAGE SALE							
Year:	2019	2018	2017	2016	2015	2014	2013
Average Issue Age:	58	57	57	56	56	57	58
Age 80 MDB:	\$306	\$313	\$272	\$281	\$292	\$295	\$312
Effective average compound rate:	2.9%	3.0%	2.2%	2.4%	2.5%	2.7%	3.1%

TABLE 15: FUTURE PURCHASE OPTION ELECTION RATES							
Year:	2019	2018	2017	2016	2015	2014	2013
Election Rate:	81.5%	76.9%	34.7%	32.8%	33.9%	27.8%	24.0%

Note: The difference between 2018 and 2017 was attributable to an insurer which contributed FPO data starting in 2018. It issues negative election FPOs.

2020 Milliman LTCI Survey Product Exhibit

1	COMPANY NAME	Bankers Life	Knights of Columbus	MassMutual Financial Group	Mutual of Omaha
2	Product Type	Comprehensive		Facility-Only	Comprehensive
3	Product Marketing Name	SimpleChoice TQ Standard	SimpleChoice TQ Premier & Elite	Long Term Care Plus NHC2	Long Term Care Plus LTC2
4	Product Form Number	GR-N620	GR-N650	ICC14 NHC2 7-14	ICC14 LTC2 7-14
5	Year First LTCI Product Offered	1985	2000	2008	1987
6	Year Current LTCI Product Was Priced	2013	2014	2017	2013
7	Jurisdictions LTCI Available	All States (BCLIC in NY)	All States & DC	All States & DC & PR	All States & DC
8	State Partnerships (as of January 1, 2020)	40 (Including CT, IN)	None	38	38
9	Financial Ratings (as of December 31, 2019)				
10	A.M. Best	A-	A+	A++	A+
11	Standard and Poor's	A-	AA+	AA+	A+
12	Moody's	A3	Not Rated	Aa3	A1
13	Fitch	A-	Not Rated	AA+	Not Rated
14	COMDEX Ranking (as of May 1, 2020)	62	98	98	90
15	Statutory Financials (Millions)				
16	Assets (December 31, 2019)	\$16,369	\$26,861	\$279,937	\$9,107
17	Capital & Surplus (December 31, 2019)	\$1,177	\$2,281	\$18,893	\$3,140
18	Percent Increase (Assets, Surplus)		6%, 8%	10%, 21%	13%, -1%
19	LTCI Premium (Millions)				
20	2019 First Year Premium	\$2.5	\$6.0	\$6.2	\$46.3
21	2019 End of Year In-Force Premium	\$363.0	\$75.3	\$254.9	\$508.9
22	Percent Increase (New Business, In-Force)	-7%, -7%	24%, 4%	-22%, 3%	0%, 8%
23	LTCI Lives Insured				
24	2019 First Year Issued	893	1,648	1,882	17,165
25	2019 End of Year In-Force	190,865	49,804	91,559	212,758
26	Percent Increase (New Business, In-Force)	-28%, -7%	-14%, 2%	-26%, 0%	-1%, 6%
27	Product Ranges and Elimination Period Terms				
28	Issue Age Range	18 - 84	18 - 75	40-69 (age nearest birthday)	30 - 79
29	Daily, Weekly or Monthly Benefit Range	\$40 - \$400	\$1,500 - \$15,000/Month	\$100-\$400	\$1,500 - \$10,000/Month
30	Benefit Periods and/or Pools	1, 2, 3	3, 5, 10	2, 3, 4, 5, 6	2, 3, 4, 5 \$50,000 - \$500,000 (up to 8.3 years)
31	Elimination Periods	0, 15, 30, 60, 90, 180, 365, 730, 1095, 1460	30, 90, 180 (cut in half for HCBC with care coordination)**	90	90, 180, 365 0, 30, 60, 90, 180, 365
32	Vanishing, Cumulative	Yes, Yes	Yes, No	Yes, Yes	Yes, Yes
33	Elimination Period Crediting	3 HC/Week = 7	Calendar Days	1 HC/Week = 7	Calendar Days After 1st Expense
34	0-day HCBC EP with longer NH EP	NA	Facility-Only	NA	Extra Cost, HC Days Retire FC EP
35	Product Benefits				
36	Number of: Benefit Pools, EPs	1,1	Facility Only	1, 1	1, 1
37	Partial Cash (Disability) Alternative	NA	NA	NA	30% (Automatic) 40% (Automatic)
38	Additional Cash Benefit	25% (Extra Cost)	NA	NA	NA
39	HCBC Payment Basis	Weekly Monthly	Facility Only Monthly	Daily (Monthly Extra \$)	Monthly
40	Assisted Living (Percent of NH Max)		100%		
41	Home Care Health Aide (Percent of NH Max)	50%		100%	50%, 75%, 100%
42	Independent Professional				
43	Homemaker Services	Must Be Incidental	Facility Only	Same as Custodial Care	Same as Custodial Care
44	Informal Care (Other Than Family)			Same as Custodial Care	
45	Informal Family Care	Not Covered		Not Covered	Cash Alternative Has 0 Day EP; if used it Delays Satisfying the EP
46	Benefit Increase Features				
47	Lifetime Compound Increases (Level Premium)	2%, 3%, 4%, 5%	3%, 5%	3%, 5%	3%, 4%, 5% 1% to 5%, 0.25% increments & Buy-Up Option
48	Lifetime Simple Increases (Level Premium)	5%	NA	NA	NA
49	Other Increases (Level Premium)	2 Decreasing Inflation Options Are Also Offered (See Other Comments)	NA	NA	3% or 5% CBIO for 20 Years Above w/ 10, 15, or 20 yr periods
50	Future Purchase Options (FPO)	15% Every 3 Years	Board-set % Every 2 Years Until 2 Straight Declines or On Clm	NA	NA
51	Benefit Increase Comments	FPO: To 89 If No Declines or Claims			No FPO. Buy-up option allows % incr each yr not to exceed 5%, Avail prior to sooner of 20 yrs or age 75 and not chronically ill
52	Other Comments	5% Compound Through Age 60, Then Either 3% Compound or 5% Simple Through Age 75, Then 0%; Facility Only; NTQ		NA	Electronic App Rider Doubles MMB for Professional HC

2020 Milliman LTCI Survey Product Exhibit

53	COMPANY NAME	Bankers Life and Casualty Company		Knights of Columbus		Mutual of Omaha Insurance Company	
54	Product Marketing Name	SimpleChoice TO Standard	SimpleChoice TO Premier & Elite	Long Term Care Plus NHC2	Long Term Care Plus LTC2	SignatureCare 600	Mutual Care Secure Solution Mutual Care Custom Solution
55	Sales Rep/Source for More Info	www.bankerslife.com		dan.hill@kofc.org		800-767-1000	1-800-693-6083
56	Ancillary Benefits						
57	Bed Reserve Days/Year, Respite during EP?	60+ Other, No	60+ Other, 21	21, 21		60+ Other, 30	30+ Other, 30
58	Alternative Plan of Care (APC)	No	Contractual After EP	Contractual After EP		No	Contractual After EP
59	Home Modification	NA	30 x MDB	Facility Only	min (45 x MDB, \$5000)*	2 x Mo Max	2 x Mo Max If Care Coord Is Used*
60	Caregiver Training Benefit		25% of Monthly HC		\$500/Calendar Year	Included Above	Included Above*
61	Emergency Alert		5% HC MMB; Max 12 Months		APC w/Care Co-ord		
62	Equipment Benefit				Included Above*		
63	Drug, Ambulance Benefit	NA, \$75/Trip x 4x/Year		NA, \$250/Year		NA	
64	Claims Issues						
65	Conditional Receipt Protection	No		No		Full, After UW Reqt	Full, After UW Reqt
66	Coverage Beyond USA	Canada (Other - 30 Days)		Canada & US Territories		NA	Canada & UK; Indemnity for Other (365)
67	Provider Discounts (Directly or Indirectly)	No		LifePlans Provider Discount Program*		No	No
68	Care Coordination Available From	Through Network		Through Network** or up to \$500/yr for client's choice		Company Staff	Company Staff
69	Third Party Care Coordinator Limits	None		\$500/yr for client's choice		None	None
70	Independent Review	Extended to IF in states with IR		Extended to All Claimants		As Required by Law	As Required by Law
71	Premiums and Discounts						
72	Gender-distinct or Unisex pricing	Gender-Distinct		Gender-Distinct		Gender-Distinct	Gender-Distinct
73	Preferred Discount	10%		10%		10%	15%
74	Substandard Extra Ratings	25%		50%		25%	25%, 50%
75	Two-Spouse, Two-Partner Discounts	35%, 10%		30%, 0%		15%, 15%	30%, 30%
76	Requires Identical Coverage	No		No		No	No
77	If Spouse is a Surprise Decline	One-spouse discount		One-spouse discount		One-spouse discount	
78	If Spouse answers "Yes" to "Knock-Out" question						
79	One-Spouse Discount (Only 1 Spouse Applies)	15%		15%		15%	15%
80	Maximum Best UW Class & Spouse Discount	41.5%		37%		24%	40.5%
81	Later Marriage Earns Discount For:	IF & New Spouse (if within two years); Otherwise, New Spouse gets one-buy discount		New Spouse gets 15% discount		IF (If Same Series) & New Spouse	If Same Policy Series, IF & New Spouse; Otherwise new spouse gets 15% discount
82	When are dividends or credits expected to start?	NA		NA		Not Illustrated	NA
83	Most Common Employer, Affinity Discount	NA, 5%				5% (Not Employer Sponsored), 5%	
84	Minimum Size Employer Group, Number Apps	NA				5 Apps, Common Employer Program Only	
85	Minimum Size Affinity Group, Number Apps	Varies					100, 10
86	Modal Factors (SA, O, M, PAC)	51.50%, 26.25%, 9.17%, 8.58%		52%, 26.5%, NA, 8.65%		52%, 26.5%, NA, 8.8%	51%, 26%, NA, 9%
87	Credit Card: Frequencies Accepted	None		None		None	None
88	Non-Level Premiums						
89	Fixed Periods	NA		NA		NA	
90	Paid Up at Ages						
91	Waiver of Premium						
92	First Premium Waived (Days)	Elimination		Elimination		Elimination	Elimination
93	HCBC Waiver	Yes		Yes		Yes	Yes, With 8 Days of Care/Month
94	Joint Waiver	Extra Cost	Automatic	Not Offered		Extra Cost	Not Offered Extra Cost
95	Return of Premium Upon Death (ROP)						
96	ROP Design #1	Net; Grades from 10% @ 4th Year to 100% @ Year 20+		Automatic: Net, Death Before 65		100% Gross	Net, 3 x initial MMB after 10 yrs
97	Other ROP Design(s)	NA		NA		NA	NA Net, 100%; Net 100% to 65
98	Other Riders & Features						
99	Paid Up Survivor Benefit	Extra Cost		Not Offered		Extra Cost	Not Offered Extra Cost
100	Both People Must Survive Number of Years	10		NA		10	10
101	Claim-Free Requirement?	No				No	No
102	Shared Care Benefit	Permanent Extra \$, Third Pool		Available with 3-year or 5-year BP in lieu of couples discount		Not available	Permanent Extra \$
103	Other Shared Care Aspects			NA		NA	Must Leave 1 Year for Living Spouse
104	Restoration of Benefits	Extra Cost	Included			Not Available	NA
105	Other Comments	Extra-Cost Rider Ups Survivor's Daily Benefit 50% But Survivor's Prem is Unchanged; Return of Premium Applies on Lapse Also.		Claims subject to "usual and customary"; Caregiver training and care management benefits do not count against monthly max but do count against lifetime max		Return of Premium Rider applies at time of lapse also	Spouse Security Benefit Pays 60% of Reimbursement Benefit; 5% "Common Employer" Discount But Employer Cannot Be Involved in Any Way
106	Combination Policies Offered	None		None		Life	None

2020 Milliman LTCI Survey Product Exhibit

1	COMPANY NAME	National Guardian Life Insurance Company		New York Life Insurance Company		Thrivent
2	Product Type	Comprehensive	Work-Site	Comprehensive		Comprehensive
3	Product Marketing Name	EssentialLTC	EssentialLTC Employer Group	NYL My Care	NYL Secure Care	Long-Term Care Insurance
4	Product Form Number	ICC16-NLTC100P		ICC18-LTCD	ICC14-LTC6	ICC13 H-HX-LTC
5	Year First LTCI Product Offered	2016		1988		1987
6	Year Current LTCI Product Was Priced	2016		2018	2016	2016
7	Jurisdictions LTCI Available	All States & DC (except CA, MT, NY)	Not in AZ, CA, DC, FL, ME, MT, NY	All States & DC		All States & DC (except NY)
8	State Partnerships (as of January 1, 2020)	35		35		41 (Including IN)
9	Financial Ratings (as of December 31, 2019)					
10	A.M. Best	A-		A++		A++
11	Standard and Poor's	Not Rated		AA+		Not Rated
12	Moody's	Not Rated		Aaa		Not Rated
13	Fitch	Not Rated		AAA		AA+
14	COMDEX Ranking (as of May 1, 2020)	Not Ranked		100		99
15	Statutory Financials (Millions)					
16	Assets (December 31, 2019)	\$4,719		\$330,806		\$102,221
17	Capital & Surplus (December 31, 2019)	\$390		\$26,965		\$10,065
18	Percent Increase (Assets, Surplus)	5%, 7%		6%, 9%		13%, 10%
19	LTCI Premium (Millions)					
20	2019 First Year Premium	\$3.8		\$17.3		\$9.4
21	2019 End of Year In-Force Premium	\$9.6		\$308.5		\$204.6
22	Percent Increase (New Business, In-Force)	3%, 62%		4%, 3%		-12%, 1%
23	LTCI Lives Insured					
24	2019 First Year Issued	746		5,861		3,042
25	2019 End of Year In-Force	1,486		147,868		120,846
26	Percent Increase (New Business, In-Force)	55%, 96%		6%, 1%		-17%, -2%
27	Product Ranges and Elimination Period Terms					
28	Issue Age Range	40-79 (age nearest birthday)		25-79		18 - 79
29	Daily, Weekly or Monthly Benefit Range	\$50 - \$300		\$50-\$400		\$1,500 - \$15,000/Month
30	Benefit Periods and/or Pools	2, 3, 4, 5, 6, LT		\$50,000-\$500,000 in increments of \$5K; Max = 60 x MMB	2, 3, 5, 7	2, 3, 4, 5, 8
31	Elimination Periods	0, 30, 90, 180		Deductible = 3, 6, 9 or 12 x MMB (then 20% co-pay)	90, 180, 365 (20 for HCBC*)	30, 90, 180
32	Vanishing, Cumulative	Yes, Yes		Yes, Yes		Yes, Yes
33	Elimination Period Crediting	Service Days		Dollars spent	Service Days	1 HC/Week = 7
34	0-day HCBC EP with longer NH EP	Extra Cost; HC Days Retire FC EP		NA		Extra Cost; HC Days Retire FC EP
35	Product Benefits					
36	Number of: Benefit Pools, EPs	1, 1		1, 0 (deductible ilo EP)	1,1	1,1
37	Partial Cash (Disability) Alternative	NA		NA		NA
38	Additional Cash Benefit	NA		NA		10% in Facilities but 15% at Home (Extra Cost)
39	HCBC Payment Basis	Daily		Monthly	Daily (Monthly@31 x MDB*)	Monthly
40	Assisted Living (Percent of NH Max)	100%		100%		100%
41	Home Care Health Aide (Percent of NH Max)	100%		100%	50%, 80%, 100%	100%
42	Independent Professional	Not Covered		Not Covered		
43	Homemaker Services	Same As Custodial Care		1 day/wk if 2 LTC days provided		Same As Custodial Care
44	Informal Care (Other Than Family)	Not Covered		Not Covered	50% of HC MDB up to 365 days with 4+ hrs of care/day from non-Partner.	Not Covered
45	Informal Family Care	Not Covered		Not Covered		Not Covered
46	Benefit Increase Features					
47	Lifetime Compound Increases (Level Premium)	3%, 5%		2%, 3%, 5%	3%, 5%	1%, 2%, 3%, 5%
48	Lifetime Simple Increases (Level Premium)			NA	3%	NA
49	Other Increases (Level Premium)	NA		Benefits increase based on CPI-U (cap: 7.5%/yr) until declined 2x or age 95.		Based on CPI-U (cap: 7.5%/yr)
50	Future Purchase Options (FPO)			Premiums & benefits increase based on CPI-U (cap: 7.5%/yr)		FPO Provides Automatic 5% Increases Each Yr Until Declined 3 x In a Row. Always Applies When premium is waived.
51	Benefit Increase Comments	3% of 5% Step-Rated: Premiums increase a flat amount each year		CPI FPO increases use attained-age price per unit	CPI increases maintain original-age price per unit	
52	Other Comments	Single Premium is available, facilitating \$1035 exchanges		Deductible instead of EP; 20% co-pay	Partners Benefit Rider provides Jt WP and Shared EP	Must meet eligibility requirements for fraternal membership.

2020 Milliman LTCI Survey Product Exhibit

53	COMPANY NAME	National Guardian Life Insurance Company		New York Life Insurance Company		Thrivent
54	Product Marketing Name	EssentialLTC	EssentialLTC Employer Group	NYL My Care	NYL Secure Care	Long-Term Care Insurance
55	Sales Rep/Source for More Info	888-505-2332 or www.ngl-essentialltc.com		(800) 224-4582		1-800-THRIVENT
56	Ancillary Benefits					
57	Bed Reserve Days/Year, Respite during EP?	30 - Other, 30		60 - Other, 30		60 + Other, 2 x Monthly Max
58	Alternative Plan of Care (APC)	No		Contractual When Benefit Eligible		Contractual After EP
59	Home Modification	Not Covered		NA	Grab bars, hand rails, ramps	2 x Monthly Max*
60	Caregiver Training Benefit	5 x MDB		20% x MMB	5 x Facility MDB	2 x Monthly Max
61	Emergency Alert	Up to \$50/Month		NA		Included Above *
62	Equipment Benefit	Not Covered		\$5,000	\$4,000	
63	Drug, Ambulance Benefit	NA		NA		NA
64	Claims Issues					
65	Conditional Receipt Protection	No		Up to \$5000 for 60 days after app	Up to \$1000 for 60 days after app	Full, After UW Req't
66	Coverage Beyond USA	Canada (others = 30 days)		3 x MMB	100 x Facility MDB	2x Max Monthly Benefit
67	Provider Discounts (Directly or Indirectly)	No		No		No
68	Care Coordination Available From	Through Network		Through Network	Through Network*	Through Network
69	Third Party Care Coordinator Limits	None		None		None
70	Independent Review	As Required By Law		Extended to IF in States with IR		Extended to IF in States with IR
71	Premiums and Discounts					
72	Gender-distinct or Unisex pricing	Gender-Distinct	Unisex	Gender-Distinct		Gender-Distinct
73	Preferred Discount	20%	NA	NA		10%
74	Substandard Extra Ratings	25%	NA	25%, 50%, 75%, 100%	50%, 100%	25%, 50%
75	Two-Spouse, Two-Partner Discounts	Together pay female premium at the older insured's age	Together pay premium at the older insured's age	25%, 25%		20%, 20%
76	Requires Identical Coverage	Yes		No		No
77	If Spouse is a Surprise Decline	Single Person Price at that person's age		One-spouse discount	No Discount	One-spouse discount
78	If Spouse answers "Yes" to "Knock-Out" question					
79	One-Spouse Discount (Only 1 Spouse Applies)	0%		10%	0%	5%
80	Maximum Best UW Class & Spouse Discount	52% (same age couple)		25%		30%
81	Later Marriage Earns Discount For:	Neither		New Spouse		IF & New Spouse
82	When are dividends or credits expected to start?	NA		End of 3rd year	End of 10th year	NA
83	Most Common Employer, Affinity Discount	5%, 5%	NA	5%, 5%; not for SSTD		
84	Minimum Size Employer Group, Number Apps	5, 2-5 varies by state		None, None		
85	Minimum Size Affinity Group, Number Apps	10, 1	NA			
86	Modal Factors (SA, O, M, PAC)	52%, 27%, 8.75%, 8.75%		51%, 26%, NA, 9%		50.8%, 25.6%, NA, 8.6%
87	Credit Card: Frequencies Accepted	None		None		None
88	Non-Level Premiums					
89	Fixed Periods	1, 10		NA		10
90	Paid Up at Ages	NA		NA		NA
91	Waiver of Premium					
92	First Premium Waived (Days)	Elimination		After Deductible	Elimination	Elimination
93	HCBC Waiver	Extra Cost		Yes		Yes
94	Joint Waiver	Automatic		NA	Extra Cost	Automatic w/ Shared Care
95	Return of Premium Upon Death (ROP)					
96	ROP Design #1	100% Gross or Net; 2nd-to-die		Automatic, Net, Death Before 65	Net, 100%	Net, 100% for death after 10 years
97	Other ROP Design(s)	Can add Cash Surrender Option (grades up to 80% after 4 years)		NA		NA
98	Other Riders & Features					
99	Paid Up Survivor Benefit	Not Offered		Not Offered		Extra Cost
100	Both People Must Survive Number of Years	NA		NA		10
101	Claim-Free Requirement?					Yes
102	Shared Care Benefit	Permanent Extra \$, Third Pool		Permanent Extra \$	Permanent Extra \$, Third Pool	Extra Cost Ends If Partner Dies
103	Other Shared Care Aspects	NA		Cannot be unilaterally taken away		Pool Depleted, Spouse < 86 & No Clm in 2 Yrs, Can Buy 2 Yr BP
104	Restoration of Benefits			NA	> 12 mos of not being chronically ill	NA
105	Other Comments	Markets ROP & Surrender Option as alternative to Combo Policies. Can use \$1035.		Premium gtd for 3 yrs; FY 5% discount if other NYLIC policy	Qual'd EP costs can be reimbursed at end of next cal.yr after claim ends if policy is still IF (EP reinstated).	5-Year Rate Guarantee; Couples' discount applies to same generation 3-year co-habitants
106	Combination Policies Offered	See row 105		Life		None

2020 Milliman LTCI Survey

Shared care premiums for each carrier's most common rating classification reflecting \$100/day initial maximum benefit after a 90-day elimination period, assuming that each spouse buys the indicated benefit period.

90 Day Elimination / Five-Year Benefit Period SHARED CARE		Male & Female Couple the Same Age												
		3rd Pool?	Without Benefit Increases				3% Compound Benefit Increases				5% Compound Benefit Increases			
			Age 40	Age 50	Age 60	Age 70	Age 40	Age 50	Age 60	Age 70	Age 40	Age 50	Age 60	Age 70
Bankers Life and Casualty Company	Bankers SimpleChoice TQ Standard LTC GR-N620	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA
Bankers Life and Casualty Company	Bankers SimpleChoice TQ Premier & Elite LTC GR-N650 Policy	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA
Country Life Insurance Company	Country Life TQ Comprehensive LTC	No	1,055	1,677	2,859	6,016	3,332	4,244	5,679	9,283	6,127	6,616	8,008	11,598
Knights of Columbus	Long Term Care Plus NHC2	No	914	1,256	2,333	4,840	Not Provided				5,002	5,219	6,668	9,950
Knights of Columbus	Long Term Care Plus LTC2	No	1,176	1,640	2,707	5,910	Not Provided				6,181	6,318	7,933	11,664
Mutual of Omaha Insurance Company	Mutual of Omaha Secure Solution	No	1,193	1,440	2,102	4,464	2,551	3,105	4,024	6,330	6,182	6,681	7,078	8,987
National Guardian Life Insurance Company	NGL EssentialLTC	Yes	872	1,122	1,660	3,559	1,988	2,379	3,055	5,018	4,666	4,937	5,412	6,620
National Guardian Life Insurance Company	NGL EssentialLTC Employer Group	Yes	785	1,010	1,494	3,203	1,790	2,141	2,749	4,516	4,199	4,444	4,871	5,958
New York Life Insurance Company	NYL Secure Care	Yes	1,612	2,196	3,478	7,341	6,135	6,709	8,361	13,870	12,841	11,822	12,736	18,632
New York Life Insurance Company	NYL My Care	No	1,296	1,741	2,564	5,098	3,493	3,944	4,824	7,558	7,032	7,152	7,350	10,179
Thrivent Financial for Lutherans	Thrivent Long-Term Care Insurance	No	1,086	1,698	2,840	5,652	3,008	3,753	5,023	7,980	6,987	7,213	8,159	11,057
90 Day Elimination / Three-Year Benefit Period SHARED CARE		3rd Pool?	Age 40	Age 50	Age 60	Age 70	Age 40	Age 50	Age 60	Age 70	Age 40	Age 50	Age 60	Age 70
Bankers Life and Casualty Company	Bankers SimpleChoice TQ Standard LTC GR-N620	Yes	611	972	1,643	3,565	1,671	2,328	3,280	5,649	3,862	4,440	5,278	7,801
Bankers Life and Casualty Company	Bankers SimpleChoice TQ Premier & Elite LTC GR-N650 Policy	Yes	832	1,333	2,292	5,041	2,234	3,111	4,407	7,632	5,283	6,064	7,321	11,041
Country Life Insurance Company	Country Life TQ Comprehensive LTC	No	963	1,523	2,592	5,459	2,988	3,820	5,132	8,390	5,756	6,183	7,405	10,661
Knights of Columbus	Long Term Care Plus NHC2	No	802	1,086	1,995	4,066	Not Provided				4,046	4,233	5,432	8,122
Knights of Columbus	Long Term Care Plus LTC2	No	1,013	1,404	2,294	4,698	Not Provided				4,962	5,025	6,281	9,184
MassMutual Financial Group	MassMutual SignatureCare 500	Yes	910	1,156	1,852	4,277	Not Provided				4,957	4,960	5,419	8,810
Mutual of Omaha Insurance Company	Mutual of Omaha Secure Solution	No	874	1,055	1,551	3,333	1,868	2,271	2,967	4,719	4,522	4,881	5,215	6,693
National Guardian Life Insurance Company	NGL EssentialLTC	Yes	761	979	1,448	3,104	1,734	2,075	2,664	4,376	4,069	4,306	4,720	5,773
National Guardian Life Insurance Company	NGL EssentialLTC Employer Group	Yes	684	881	1,303	2,793	1,561	1,867	2,398	3,939	3,662	3,875	4,248	5,196
New York Life Insurance Company	NYL Secure Care	Yes	1,332	1,698	2,596	5,396	4,502	4,825	5,977	9,863	9,250	8,408	9,099	13,177
New York Life Insurance Company	NYL My Care	No	1,001	1,324	1,923	3,714	2,608	2,899	3,479	5,495	5,182	5,271	5,394	7,505
Thrivent Financial for Lutherans	Thrivent Long-Term Care Insurance	No	930	1,380	2,250	4,500	2,456	3,235	4,109	6,547	5,461	5,852	6,606	8,972
90 Day Elimination / \$200,000 Benefit Period SHARED CARE		3rd Pool?	Age 40	Age 50	Age 60	Age 70	Age 40	Age 50	Age 60	Age 70	Age 40	Age 50	Age 60	Age 70
Mutual of Omaha Insurance Company	Mutual of Omaha Custom Solution	No	1,276	1,539	2,262	4,857	2,825	3,404	4,387	6,897	6,614	7,143	7,619	9,771
90 Day Elimination / \$100,000 Benefit Period SHARED CARE		3rd Pool?	Age 40	Age 50	Age 60	Age 70	Age 40	Age 50	Age 60	Age 70	Age 40	Age 50	Age 60	Age 70
Mutual of Omaha Insurance Company	Mutual of Omaha Custom Solution	No	840	1,014	1,494	3,235	1,860	2,240	2,892	4,588	4,346	4,692	5,019	6,493

EXHIBIT 7

TABLE 13. SALES BY BENEFIT INCREASE TYPE

Type	2020	2019	2018	2017	2016	2015	2014
4.5+% Compound for Life	1.7%	1.7%	2.0%	1.5%	2.3%	4.0%	9.2%*
4% Compound	0.6	0.6	0.4	NA	NA	NA	NA
3.5% Compound	0.3	0.3	0.2	0.3	0.9	1.5	NA
3% Compound	31.7	32.7	20.9	23.2*	23.0	26.7	30.1
2% Compound	3.6	2.9	1.6	1.6	NA	NA	NA
1% Compound	1.7	1.6	0.5	NA	NA	NA	NA
Step-rated	0.0	NR	NR	NR	2.3	2.4	0.0
Other Compound	9.1	8.7	19.5	19.1	10.3	4.6	6.7*
5% Simple for Life	0.1	0.1	0.4	0.2	0.6	3.4	4.8
Other Simple	1.5	0.9	1.3	NA	NA	NA	NA
Age-Adjusted	0.2	0.2	0.5	0.2	4.0	1.9	0.5
Indexed for Life Level Premium	0.3	0.3	0.4	0.4	0.7	2.5	4.0
Deferred Compound Option	NR	NR	NR	NR	3.8	3.0	2.3
FPO: Fixed	18.3	20.4	26.2*	27.5	31.5	25.7	21.9
FPO: Indexed	16.3	13.5	10.6	5.1	4.5	2.6	1.6
No Benefit Increases	14.6	16.1	15.5	19.8	15.2	16.0	14.4
Other	0.0	0.0	0.0	1.1	0.9*	5.7	4.5*

*Prior to 2019, we adjusted the asterisked cells so the total would be 100%. Beginning in 2019, results might not add to 100% because of rounding.

TABLE 14: PROJECTED AGE 80 MAXIMUM DAILY BENEFIT FOR AVERAGE SALE

Year:	2020	2019	2018	2017	2016	2015	2014	2013
Average Issue Age:	58	58	57	57	56	56	57	58
Age 80 MDB:	\$305	\$306	\$313	\$272	\$281	\$292	\$295	\$312
Effective average compound rate:	2.9%	2.9%	3.0%	2.2%	2.4%	2.5%	2.7%	3.1%

TABLE 15: FUTURE PURCHASE OPTION ELECTION RATES

Year:	2020	2019	2018	2017	2016	2015	2014	2013
Election Rate:	81.8%	81.5%	76.9%	34.7%	32.8%	33.9%	27.8%	24.0%

Note: The difference between 2018 and 2017 was attributable to an insurer which contributed FPO data starting in 2018. It issues negative election FPOs.

2021 Milliman LTCI Survey Product Exhibit

1	COMPANY NAME	Bankers Life		Knights of Columbus		Mutual of Omaha	
2	Product Type	Comprehensive		Facility-Only	Comprehensive		Comprehensive
3	Product Marketing Name	SimpleChoice TQ Standard	SimpleChoice TQ Premier & Elite	Long Term Care Plus		Mutual Care Secure Solution	Mutual Care Custom Solution
4	Product Form Number	GR-N620	GR-N650	ICC14 NHC2 7-14	ICC14 LTC2 7-14		LTC13
5	Year First LTCI Product Offered	1985		2000		1987	
6	Year Current LTCI Product Was Priced	2013		2014		2020	
7	Jurisdictions LTCI Available	All States (BCLIC in NY)		All States & DC		All States & DC	
8	State Partnerships (as of January 1, 2021)	40 (Including CT, IN)		None		38	
9	Financial Ratings (as of December 31, 2020)						
10	A.M. Best	A-		A+		A+	
11	Standard and Poor's	AA-		AA+		A+	
12	Moody's	A3		Not Rated		A1	
13	Fitch	A-		Not Rated		Not Rated	
14	COMDEX Ranking (as of May 1, 2021)	63		98		90	
15	Statutory Financials (Millions)						
16	Assets (December 31, 2020)	\$17,025		\$27,658		\$9,440	
17	Capital & Surplus (December 31, 2020)	\$1,235		\$2,311		\$3,623	
18	Percent Increase (Assets, Surplus)	4%, 5%		3%, 0%		4%, 15%	
19	LTCI Premium (Millions)						
20	2020 First Year Premium	\$1.8		\$3.3		\$40.8	
21	2020 End of Year In-Force Premium	\$363.6		\$79.0		\$537.7	
22	Percent Increase (New Business, In-Force)	-22%, -2%		-44%, 5%		-14%, 6%	
23	Most recent issue year that has had a price increase	2015		Never had a rate increase		2013	
24	LTCI Lives Insured						
25	2020 First Year Issued	736		1,658		14,943	
26	2020 End of Year In-Force	194,230		50,628		222,449	
27	Percent Increase (New Business, In-Force)	-18%, -5%		1%, 2%		-17%, 4%	
28	Product Ranges and Elimination Period Terms						
29	Issue Age Range	18 - 84		18 - 75		30 - 79	
30	Daily, Weekly or Monthly Benefit Range	\$40 - \$400		\$1,500 - \$15,000/Month		\$1,500 - \$10,000/Month	
31	Benefit Periods and/or Pools	1, 2, 3		3, 5, 10		2, 3, 4, 5	\$50,000 - \$500,000 (up to 8.3 years)
32	Elimination Periods	0, 15, 30, 60, 90, 180, 365, 730, 1095, 1460		30, 90, 180 (cut in half for HCBC with care coordination)**		90, 180, 365	0, 30, 60, 90, 180, 365
33	Vanishing, Cumulative	Yes, Yes		Yes, No		Yes, Yes	
34	Elimination Period Crediting	3 HC/Week = 7		Calendar Days		Calendar Days After 1st Expense	
35	0-day HCBC EP with longer NH EP	NA		Facility-Only	NA		Extra Cost; HC Days Retire FC EP
36	Product Benefits						
37	Number of: Benefit Pools, EPs	1, 1		Facility-Only	1, 1		1, 1
38	Partial Cash (Disability) Alternative	NA		NA		25% (Automatic)	
39	Additional Cash Benefit	25% (Extra Cost)				NA	
40	HCBC Payment Basis	Weekly	Monthly	Facility Only	Monthly		Monthly
41	Assisted Living (Percent of NH Max)			100%			
42	Home Care Health Aide (Percent of NH Max)	50%	100%			100%	
43	Independent Professional			50%, 100%			
44	Homemaker Services	Must Be Incidental		Facility Only	Same as Custodial Care		Same as Custodial Care
45	Informal Care (Other Than Family)						
46	Informal Family Care	Not Covered				Cash Alternative Has 0 Day EP; if used it Delays Satisfying the EP	
47	Benefit Increase Features						
48	Lifetime Compound Increases (Level Premium)	2%, 3%, 4%, 5%		3%, 5%		3%, 4%, 5%	1% to 5%, 0.25% increments & Buy-Up Option
49	Lifetime Simple Increases (Level Premium)	5%				NA	
50	Other Increases (Level Premium)	2 Decreasing Inflation Options Are Also Offered (See Other Comments)		NA		3% or 5% CBIO for 20 Years	Above w/ 10, 15, or 20 yr periods
51	Future Purchase Options (FPO)	15% Every 3 Years		Board-set % Every 2 Years Until 2 Straight Declines or On Clim			
52	Benefit Increase Comments	FPO: To 89 If No Declines or Claims				NA	No FPO. Buy-up option allows % incr each yr not to exceed 5%, Avail prior to sooner of 20 yrs or age 75 and not chronically ill
53	Other Comments	5% Compound Through Age 60, Then Either 3% Compound or 5% Simple Through Age 75, Then 0%; Facility Only; NTQ				Electronic App	Rider Doubles MMB for Professional HC (365 days for nurse)

2021 Milliman LTCI Survey Product Exhibit

54	COMPANY NAME	Bankers Life and Casualty Company		Knights of Columbus	Mutual of Omaha	
55	Product Marketing Name	SimpleChoice TQ Standard	SimpleChoice TQ Premier & Elite	Long Term Care Plus	Mutual Care Secure Solution	Mutual Care Custom Solution
56	Sales Rep/Source for More Info	www.bankerslife.com		dan.hill@kofc.org	1-800-693-6083	
57	Ancillary Benefits					
58	Bed Reserve Days/Year, Respite during EP?	60+ Other, No	60+ Other, 21	21, 21	30+ Other, 30	
59	Alternative Plan of Care (APC)	No	Contractual After EP	Contractual After EP	Contractual After EP	
60	Home Modification	NA	30 x MDB	Facility Only	min (45 x MDB, \$5000)*	2 x Mo Max If Care Coord Is Used*
61	Caregiver Training Benefit		25% of Monthly HC		\$500/Calendar Year	Included Above*
62	Emergency Alert		5% HC MMB; Max 12 Months		APC w/Care Co-ord	
63	Equipment Benefit				Included Above*	
64	Drug, Ambulance Benefit	NA, \$75/Trip x 4x/Year		NA, \$250/Year	NA	
65	Claims Issues					
66	Conditional Receipt Protection	No		No	No	
67	Coverage Beyond USA	Canada (Other - 30 Days)		Canada & US Territories	Canada & UK; Indemnity for Other (365)	
68	Provider Discounts (Directly or Indirectly)	No		LifePlans Provider Discount Program*	No	
69	Care Coordination Available From	Through Network		Through Network** or up to \$500/yr for client's choice	Company Staff	
70	Independent Review	Extended to IF in states with IR		Extended to All Claimants	As Required by Law	
71	Premiums and Discounts					
72	Gender-distinct or Unisex pricing	Gender-Distinct		Gender-Distinct	Gender-Distinct	
73	Preferred Discount	10%		10%	15%	
74	Substandard Extra Ratings	25%		50%	25%, 50%	
75	Two-Spouse, Two-Partner Discounts	35%, 10%		30%, 0%	15%, 15%	
76	Requires Identical Coverage	No		No	No	
77	If Spouse is a Surprise Decline	One-spouse discount		One-spouse discount	One-spouse discount	
78	If Spouse answers "Yes" to 'Knock-Out' question					
79	One-Spouse Discount (Only 1 Spouse Applies)	15%		15%	5%	
80	Maximum Best UW Class & Spouse Discount	41.5%		37%	27.75%	
81	Later Marriage Earns Discount For:	IF & New Spouse (if within two years); Otherwise, New Spouse gets one-buy discount		New Spouse gets 15% discount	If Same Policy Series, IF & New Spouse; Otherwise new spouse gets 15% discount	
82	When are dividends or credits expected to start?	NA			Not applicable	
83	Most Common Employer, Affinity Discount	NA, 5%		NA	5% (Not Employer Sponsored), 5%	
84	Minimum Size Employer Group, Number Apps	NA			5 Apps, Common Employer Program Only	
85	Minimum Size Affinity Group, Number Apps	Varies			100, 10	
86	Modal Factors (SA, O, M, PAC)	51.50%, 26.25%, 9.17%, 8.58%		52%, 26.5%, NA, 8.65%	51%, 26%, NA, 9%	
87	Credit Card: Frequencies Accepted	None		None	None	
88	How long unmarried partners must co-habit for discount	Five years		NA	Three years	
89	Any discounts available for non-spouse relatives?	No		No	No	
90	Non-Level Premiums					
91	Limited Premium Periods	NA		NA	NA	
92	Waiver of Premium					
	First Premium Waived (Days)	Elimination		Elimination	Elimination	
	HCBC Waiver	Yes		Yes	Yes, With 8 Days of Care/Month	
	Joint Waiver	Extra Cost	Automatic	Not Offered	Not Offered	Extra Cost
96	Return of Premium Upon Death (ROP)					
97	ROP Design #1	Net; Grades from 10% @ 4th Year to 100% @ Year 20+		Automatic: Net, Death Before 65	Net, 3 x initial MMB after 10 yrs	
98	Other ROP Design(s)	NA		NA	NA	Net, 100%; Net 100% to 65
99	Other Riders & Features					
100	Paid Up Survivor Benefit	Extra Cost		Not Offered	Not Offered	Extra Cost
101	Both People Must Survive Number of Years	10		NA	NA	10
102	Claim-Free Requirement?	No				No
103	Shared Care Benefit	Permanent Extra \$, Third Pool		Available with 3-year or 5-year BP in lieu of couples discount	Permanent Extra \$	
104	Other Shared Care Aspects			NA	Must Leave 1 Year for Living Spouse	
105	Restoration of Benefits	Extra Cost	Included		NA	
106	Other Comments	Extra-Cost Rider Ups Survivor's Daily Benefit 50% But Survivor's Prem is Unchanged; Return of Premium Applies on Lapse Also.		Claims subject to "usual and customary"; Caregiver training and care management benefits do not count against monthly max but do count against lifetime max	Spouse Security Benefit Pays 60% of Reimbursement Benefit; 5% "Common Employer" Discount But Employer Cannot Be Involved in Any Way	
107	Linked Benefit Policies Offered	None		None	None	

2021 Milliman LTCI Survey Product Exhibit

1	COMPANY NAME	National Guardian Life Insurance Company		New York Life Insurance Company		Thrivent
2	Product Type	Comprehensive	Work-Site	Comprehensive		Comprehensive
3	Product Marketing Name	EssentialLTC	EssentialLTC Employer Group	NYL My Care	NYL Secure Care	Long-Term Care Insurance
4	Product Form Number	NLTC100P		ICC18-LTCD	ICC14-LTC6	ICC13 H-HX-LTC
5	Year First LTCI Product Offered	2016			1988	1987
6	Year Current LTCI Product Was Priced	2021		2018	2016	2016
7	Jurisdictions LTCI Available	All States & DC (except MT, NY)	Not in AZ, FL, ME, MT, NY		All States & DC	All States & DC (except NY)
8	State Partnerships (as of January 1, 2021)	35			35	41 (Including IN)
9	Financial Ratings (as of December 31, 2020)					
10	A.M. Best	A			A++	A++
11	Standard and Poor's	Not Rated			AA+	Not Rated
12	Moody's	Not Rated			Aaa	Not Rated
13	Fitch	Not Rated			AAA	Not Rated
14	COMDEX Ranking (as of May 1, 2021)	Not Ranked			100	Not Ranked
15	Statutory Financials (Millions)					
16	Assets (December 31, 2020)	\$4,821			\$359,300	\$109,325
17	Capital & Surplus (December 31, 2020)	\$431			\$26,994	\$10,698
18	Percent Increase (Assets, Surplus)	2%, 11%			9%, 0%	7%, 6%
19	LTCI Premium (Millions)					
20	2020 First Year Premium	\$5.9			\$16.7	\$8.6
21	2020 End of Year In-Force Premium	\$11.3			\$315.6	\$203.5
22	Percent Increase (New Business, In-Force)	55%, 70%			-4%, 2%	-9%, -1%
23	Most recent issue year that has had a price increase	Never had a rate increase			2014	2003
24	LTCI Lives Insured					
25	2020 First Year Issued	921			5,811	2,678
26	2020 End of Year In-Force	2,373			149,660	117,184
27	Percent Increase (New Business, In-Force)	23%, 60%			-1%, 1%	-12%, -3%
28	Product Ranges and Elimination Period Terms					
29	Issue Age Range	40-79 (age nearest birthday)			25-79	18 - 79
30	Daily, Weekly or Monthly Benefit Range	\$50-\$300			\$50-\$400	\$1,500 - \$15,000/Month
31	Benefit Periods and/or Pools	2, 3, 4, 5, 6, Lifetime		\$50,000-\$500,000 in increments of \$5K; Max=60 x MMB	2, 3, 5, 7	2, 3, 4, 5, 8
32	Elimination Periods	30, 90, 180		Deductible=3, 6, 9 or 12 x MMB (then 20% co-pay)	90, 180, 365 (20 for HCBC*)	30, 90, 180
33	Vanishing, Cumulative	Yes, Yes			Yes, Yes	Yes, Yes
34	Elimination Period Crediting	Service Days		Dollars spent	Service Days	1 HC/Week=7
35	0-day HCBC EP with longer NH EP	Extra Cost; HC Days Retire FC EP			NA	Extra Cost; HC Days Retire FC EP
36	Product Benefits					
37	Number of Benefit Pools, EPs	1, 1		1, 0 (deductible ilo EP)	1, 1	1, 1
38	Partial Cash (Disability) Alternative	NA			NA	NA
39	Additional Cash Benefit					10% in Facilities but 15% at Home (Extra Cost)
40	HCBC Payment Basis	Daily		Monthly	Daily (Monthly@31 x MDB*)	Monthly
41	Assisted Living (Percent of NH Max)	100%			100%	100%
42	Home Care Health Aide (Percent of NH Max)			100%		100%
43	Independent Professional	Not Covered		Not Covered		50%, 80%, 100%
44	Homemaker Services	Same As Custodial Care			1 day/wk if 2 LTC days provided	Same As Custodial Care
45	Informal Care (Other Than Family)			Not Covered		50% of HC MDB up to 365 days with 4+ hrs of care/day
46	Informal Family Care	Not Covered		Not Covered		from non-Partner.
47	Benefit Increase Features					
48	Lifetime Compound Increases (Level Premium)	3%, 5%		2%, 3%, 5%	3%, 5%	1%, 2%, 3%, 5%
49	Lifetime Simple Increases (Level Premium)			NA	3%	NA
50	Other Increases (Level Premium)	NA			Based on CPI-U (cap: 7.5%/yr)	NA
51	Future Purchase Options (FPO)			Benefits increase based on CPI-U (cap: 7.5%/yr) until declined 2x or age 95.	Premiums & benefits increase based on CPI-U (cap: 7.5%/yr)	FPO provides automatic 5% increases each yr until declined 3x in a row. Always applies when premium is waived.
52	Benefit Increase Comments			CPI FPO increases use attained-age price per unit	CPI increases maintain original-age price per unit	
53	Other Comments	Single Premium is available, facilitating \$1035 exchanges		Deductible instead of EP; 20% co-pay	Partners Benefit Rider provides Jt WP and Shared EP	Must meet eligibility requirements for fraternal membership.

2021 Milliman LTCI Survey Product Exhibit

54	COMPANY NAME	National Guardian Life Insurance Company		New York Life Insurance Company		Thrivent
55	Product Marketing Name	EssentialLTC	EssentialLTC Employer Group	NYL My Care	NYL Secure Care	Long-Term Care Insurance
56	Sales Rep/Source for More Info	888-505-2332 or www.ngl-essentialltd.com		(800) 224-4582		1-800-THRIVENT
57	Ancillary Benefits					
58	Bed Reserve Days/Year, Respite during EP?	30+Other, 30		60+Other, 30		60+Other, 2 x Monthly Max
59	Alternative Plan of Care (APC)	No		Contractual When Benefit Eligible		Contractual After EP
60	Home Modification	Not Covered		NA	Grab bars, hand rails, ramps	2 x Monthly Max*
61	Caregiver Training Benefit	5 x MDB		20% x MMB	5 x Facility MDB	2 x Monthly Max
62	Emergency Alert	Up to \$50/Month		NA		Included Above*
63	Equipment Benefit	Not Covered		\$5,000	\$4,000	
64	Drug, Ambulance Benefit	NA		NA		NA
65	Claims Issues					
66	Conditional Receipt Protection	No		Up to \$5000 for 60 days after app	Up to \$1000 for 60 days after app	Full, After UW Req't
67	Coverage Beyond USA	Canada (others = 30 days)		3 x MMB	100 x Facility MDB	2x Max Monthly Benefit
68	Provider Discounts (Directly or Indirectly)	No		No		No
69	Care Coordination Available From	Through Network		Through Network	Through Network*	Through Network
70	Independent Review	As Required By Law		Extended to IF in States with IR		Extended to IF in States with IR
71	Premiums and Discounts					
72	Gender-distinct or Unisex pricing	Gender-Distinct	Unisex	Gender-Distinct		Gender-Distinct
73	Preferred Discount	NA		NA		10%
74	Substandard Extra Ratings	NA		25%, 50%, 75%, 100%	50%, 100%	25%, 50%
75	Two-Spouse, Two-Partner Discounts	Together pay 125% of female premium at the older insured's age Together pay 125% of premium at the older insured's age		25%, 25%		20%, 20%
76	Requires Identical Coverage	Yes		No		No
77	If Spouse is a Surprise Decline	Single Person Price at that person's age		One-spouse discount	No Discount	One-spouse discount
78	If Spouse answers "Yes" to 'Knock-Out' question	0%		10%	0%	5%
79	One-Spouse Discount (Only 1 Spouse Applies)	~24.5% (same age couple)		25%		30%
80	Maximum Best UW Class & Spouse Discount	37.5% (same age couple)		New Spouse		IF & New Spouse
81	Later Marriage Earns Discount For:	Neither		End of 3rd year	End of 10th year	
82	When are dividends or credits expected to start?	NA		5%, 5%; not for SSTD		NA
83	Most Common Employer, Affinity Discount	NA, 5%		None, None		
84	Minimum Size Employer Group, Number Apps	NA		5, 2-5 varies by state		
85	Minimum Size Affinity Group, Number Apps	10, 1		NA		
86	Modal Factors (SA, Q, M, PAC)	52%, 27%, 8.75%, 8.75%		51%, 26%, NA, 9%		50.8%, 25.6%, NA, 8.6%
87	Credit Card: Frequencies Accepted	None		None		None
88	How long unmarried partners must co-habit for discount	One Day		Three years		Three years
89	Any discounts available for non-spouse relatives?	Yes, if same generation cohabitants		No		Yes, if same generation 3-year cohabitants
90	Non-Level Premiums					
91	Limited Premium Periods	1, 10		NA		10
92	Waiver of Premium					
93	First Premium Waived (Days)	Elimination		After Deductible	Elimination	Elimination
94	HCBC Waiver	Yes		Yes		Yes
95	Joint Waiver	Automatic		Not Offered	Extra Cost	Automatic w/ Shared Care
96	Return of Premium Upon Death (ROP)					
97	ROP Design #1	Net of claims paid, 2nd-to-die		Automatic, Net, Death Before 65	Net, 100%	Net, 100% for death after 10 years
98	Other ROP Design(s)	Can add Cash Surrender Option (grades up to 80% after 4 years)		NA		NA
99	Other Riders & Features					
100	Paid Up Survivor Benefit	Not Offered		Not Offered		Extra Cost
101	Both People Must Survive Number of Years	NA		NA		10
102	Claim-Free Requirement?	NA		NA		Yes
103	Shared Care Benefit	Permanent Extra \$, Third Pool		Permanent Extra \$	Permanent Extra \$, Third Pool	Extra Cost Ends If Partner Dies
104	Other Shared Care Aspects	NA		Cannot be unilaterally taken away		Pool Depleted, Spouse <86 & No Clm in 2 Yrs, Can Buy 2 Yr BP
105	Restoration of Benefits	NA		NA	>12 mos of not being chronically ill	NA
106	Other Comments	Markets ROP & Surrender Option as alternative to Combo Policies. Can use \$1035.		Premium gtd for 3 yrs; FY 5% discount if other NYLIC policy	Qual'd EP costs can be reimbursed at end of next cal. yr after claim ends if policy is still IF (EP reinstated).	5-Year Rate Guarantee
107	Linked Benefit Policies Offered	See row 106		Life		None

2021 Milliman LTCI Survey

Shared care premiums for each carrier's most common rating classification reflecting \$100/day initial maximum benefit after a 90-day elimination period, assuming that each spouse buys the indicated benefit period.

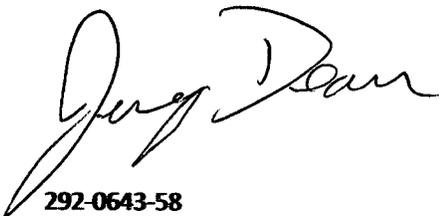
90 Day Elimination / Five-Year Benefit Period SHARED CARE			Male & Female Couple the Same Age											
			Without Benefit Increases				3% Compound Benefit Increases				5% Compound Benefit Increases			
		3rd Pool?	Age 40	Age 50	Age 60	Age 70	Age 40	Age 50	Age 60	Age 70	Age 40	Age 50	Age 60	Age 70
Bankers Life and Casualty Company	Bankers SimpleChoice TQ Standard LTC GR-N620	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA
Bankers Life and Casualty Company	Bankers SimpleChoice TQ Premier & Elite LTC GR-N650 Policy	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA
Knights of Columbus	Long Term Care Plus NHC2	No	914	1,256	2,333	4,840	2,668	3,124	4,596	7,701	5,002	5,219	6,668	9,950
Knights of Columbus	Long Term Care Plus LTC2	No	1,176	1,640	2,707	5,909	3,378	3,804	5,100	9,131	6,181	6,318	7,933	11,664
Mutual of Omaha	Mutual of Omaha Secure Solution	No	1,496	1,805	2,636	5,595	3,679	4,479	5,807	9,130	8,242	8,546	8,884	11,276
National Guardian Life Insurance Company	NGL EssentialLTC	Yes	1,231	1,585	2,344	5,026	2,808	3,359	4,314	7,086	6,588	6,972	7,643	9,348
National Guardian Life Insurance Company	NGL EssentialLTC Employer Group	Yes	1,108	1,426	2,110	4,523	2,527	3,023	3,882	6,378	5,929	6,275	6,878	8,413
New York Life Insurance Company	NYL My Care	No	1,296	1,741	2,564	5,098	3,493	3,944	4,824	7,558	7,032	7,152	7,350	10,179
New York Life Insurance Company	NYL Secure Care	Yes	1,612	2,196	3,478	7,341	6,135	6,709	8,361	13,870	12,841	11,822	12,736	18,632
Thrivent Financial for Lutherans	Thrivent Long-Term Care Insurance	No	1,086	1,698	2,840	5,652	3,008	3,753	5,023	7,980	6,987	7,213	8,159	11,057
90 Day Elimination / Three-Year Benefit Period SHARED CARE														
Bankers Life and Casualty Company	Bankers SimpleChoice TQ Standard LTC GR-N620	Yes	611	972	1,643	3,565	1,671	2,328	3,280	5,649	3,862	4,440	5,278	7,801
Bankers Life and Casualty Company	Bankers SimpleChoice TQ Premier & Elite LTC GR-N650 Policy	Yes	832	1,333	2,292	5,041	2,234	3,111	4,407	7,632	5,283	6,064	7,321	11,041
Knights of Columbus	Long Term Care Plus NHC2	No	802	1,086	1,995	4,096	2,203	2,579	3,862	6,364	4,046	4,233	5,432	8,122
Knights of Columbus	Long Term Care Plus LTC2	No	1,013	1,404	2,294	4,698	2,747	3,099	4,392	7,482	4,926	5,043	6,281	9,184
Mutual of Omaha	Mutual of Omaha Secure Solution	No	1,121	1,352	1,990	4,272	2,756	3,351	4,378	6,961	6,166	6,391	6,694	8,589
National Guardian Life Insurance Company	NGL EssentialLTC	Yes	1,029	1,324	1,959	4,199	2,346	2,807	3,604	5,921	5,505	5,826	6,386	7,811
National Guardian Life Insurance Company	NGL EssentialLTC Employer Group	Yes	926	1,192	1,763	3,779	2,111	2,526	3,244	5,329	4,954	5,243	5,747	7,030
New York Life Insurance Company	NYL My Care	No	1,001	1,324	1,923	3,714	2,608	2,899	3,479	5,495	5,182	5,271	5,394	7,505
New York Life Insurance Company	NYL Secure Care	Yes	1,332	1,698	2,596	5,396	4,502	4,825	5,977	9,863	9,250	8,408	9,099	13,177
Thrivent Financial for Lutherans	Thrivent Long-Term Care Insurance	No	930	1,380	2,250	4,500	2,456	3,060	4,109	6,547	5,461	5,852	6,606	8,972
90 Day Elimination / \$200,000 Benefit Period SHARED CARE														
Mutual of Omaha	Mutual of Omaha Custom Solution	No	1,589	1,916	2,818	6,043	4,044	4,876	6,287	9,877	8,759	9,073	9,497	12,174
90 Day Elimination / \$100,000 Benefit Period SHARED CARE														
Mutual of Omaha	Comp Mutual of Omaha Custom Solution	No	1,065	1,286	1,894	4,099	2,712	3,268	4,220	6,689	5,859	6,074	6,370	8,236

EXHIBIT 8

Tuesday, September 27, 2022

Dear Genworth Class Action Managers,

My name is Jerry Dean and I absolutely object to the terms of this class action suit. This suit has no bearing on the real issue with the Genworth problem. I bought my policy 20 years ago after being told that our premiums would remain "relatively constant". Nothing like this has occurred. My Premiums have gone up tremendously. Now this suit is designed to get poor, innocent people like to sign away their rights for a settlement that has no bearing on the real problem. Only the greedy attorneys will benefit. Except for Genworth itself. This will preclude customers like me who have suffered real damage from being in future legal transactions. Why would this be allowed to happen? There is nothing fair or equitable about this suit. When my wife and I turned 50 we were told that we should consider Long Term Insurance so that we could "Lock IN" rates before we got old. We bought into the hype that Genworth was selling. We went to an independent agent (Genworth was careful not to have their own employees peddle this false and misleading propaganda). Nothing about those promises has played out. Genworth waited a few years until people like me got so far into the game, or they developed health issues, so that there was no reasonable way to change coverage. It was a scam from the start. Genworth intentionally underpriced the policies knowing that they could raise the rates any time they wanted. Why were they allowed to get away with this? Because they trained their agents to intentionally mislead potential clients. There was nothing straightforward about this process. They were clever and fooled lots of intelligent people into signing up for a product that they would make unaffordable just when the clients needed it. That's what they have done. Genworth has carefully tracked the group of policyholders that I am in and now that there is a chance that Long Care may be needed They are raising the rates by 20% per year to try to force the policyholders from their rosters. This will purge Genworth of potential expensive policyholders after collecting 20 years worth of premiums. This is wrong! My wife and I have upheld our end of the insurance deal just to find out that we have fallen prey to a smart and powerful ploy to dump customers just before their need might arise. This is not the honest and honorable way for a company to perform. A real class action lawsuit would reduce premiums or offer customers to reclaim all of their plus interest. Real class action litigation would be performed for the benefit of the customers, not some shady and hard to understand suit that offers practically nothing, and excludes the policyholders from further legal action. This is a worthless suit and actually only benefits Genworth and the attorneys on both sides. They are the only ones who stand to win. Again, I object to the very foundation of this class action law suit. Again, I object to the very foundation of this class action law suit. How can the judges and arbiters allow this suit to go forward knowing all along that there is virtually nothing for the policyholders? Where are the benefits? I see almost nothing and object vehemently to being corralled into giving up my rights while being tricked into thinking that Genworth is paying for their bad behavior. Who thinks that I am that stupid? Please send me their names. I would like to sit down and have a discussion about the real damage Genworth has done to my and my wife's financial stability. Genworth's marketing actions were criminal. The company should be prosecuted instead of having some cupcake lawsuit dismiss customer's rights.



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