

**UNUM LONG TERM CARE PLAN
91393**

Connecticut Rates

BASE PLAN:

Facility Monthly Benefit	1,000
Home Monthly Benefit	500
Facility Benefit Duration	3 Years
Home Benefit	50%
Lifetime Maximum	36,000
Elimination Period	90 Days
Home Care Level	Home, Comm-Based Care

OPTIONS:

Home Care Level	Home, Comm-Based and Immediate Family Member Care
Inflation Protection	Compound Uncapped

Monthly Rates

Insurance Age	Plan 1 Base Plan	Plan 2 Base Plan with Home, Community Based and Immediate Family Member Care Option	Plan 3 Base Plan with Compound Inflation Option	Plan 4 Base Plan with Compound Inflation and Home, Community Based and Immediate Family Member Care Option
18-30	3.90	5.90	12.10	16.60
31	3.90	5.90	12.20	16.90
32	3.90	5.90	12.50	17.30
33	4.00	6.10	12.70	17.70
34	4.20	6.20	13.10	18.10
35	4.30	6.40	13.50	18.60
36	4.40	6.50	13.90	19.10
37	4.60	6.80	14.20	19.50
38	4.80	7.20	14.70	20.20
39	5.10	7.40	15.20	20.80
40	5.20	7.70	15.60	21.30
41	5.50	7.90	16.00	22.00
42	5.70	8.50	16.60	22.60
43	5.90	8.70	17.20	23.30
44	6.10	9.10	17.70	24.10
45	6.50	9.60	18.30	24.80
46	6.80	10.10	18.70	25.60
47	7.20	10.50	19.20	26.40
48	7.50	11.30	19.90	27.40
49	7.80	11.80	20.50	28.30
50	8.20	12.50	20.90	29.10
51	8.80	13.30	21.80	30.40
52	9.20	14.00	22.50	31.60
53	9.80	15.00	23.30	32.60
54	10.30	15.70	23.90	33.80
55	11.10	16.80	25.10	35.00
56	11.70	17.80	26.10	36.50
57	12.50	19.10	27.40	38.40

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Insurance Age	Plan 1 Base Plan	Plan 2 Base Plan with Home, Community Based and Immediate Family Member Care Option	Plan 3 Base Plan with Compound Inflation Option	Plan 4 Base Plan with Compound Inflation and Home, Community Based and Immediate Family Member Care Option
58	13.40	20.40	28.60	40.00
59	14.30	21.80	29.90	41.90
60	15.50	23.40	31.50	43.90
61	16.80	25.20	33.70	46.80
62	18.60	27.60	36.30	50.20
63	20.30	29.80	38.60	53.00
64	22.20	32.40	41.60	56.80
65	25.40	36.30	46.10	62.30
66	28.00	39.40	49.90	66.40
67	31.10	43.00	54.30	71.60
68	34.30	46.90	58.60	76.30
69	38.10	51.20	63.70	82.00
70	42.10	55.90	68.50	87.50
71	46.80	61.20	75.00	94.60
72	51.90	67.10	81.50	101.90
73	57.60	73.60	88.30	109.70
74	63.60	80.30	95.70	117.90
75	76.70	95.90	113.10	138.20
76	84.10	104.30	122.70	148.60
77	92.30	113.20	132.00	158.50
78	101.30	123.10	142.90	170.20
79	111.00	133.90	153.50	181.70
80	121.90	145.70	166.10	195.30

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Connecticut Rates

BASE PLAN:

Facility Monthly Benefit	1,000
Home Monthly Benefit	500
Facility Benefit Duration	6 Years
Home Benefit	50%
Lifetime Maximum	72,000
Elimination Period	90 Days
Home Care Level	Home, Comm-Based Care

OPTIONS:

Home Care Level	Home, Comm-Based and Immediate Family Member Care
Inflation Protection	Compound Uncapped

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Insurance Age	Plan 1 Base Plan	Plan 2 Base Plan with Home, Community Based and Immediate Family Member Care Option	Plan 3 Base Plan with Compound Inflation Option	Plan 4 Base Plan with Compound Inflation and Home, Community Based and Immediate Family Member Care Option
18-30	5.10	7.80	15.90	22.20
31	5.20	7.90	16.40	22.90
32	5.30	8.10	16.60	23.40
33	5.50	8.20	17.30	24.10
34	5.60	8.50	17.60	24.60
35	5.70	8.70	18.10	25.20
36	6.00	9.00	18.60	25.70
37	6.10	9.40	19.10	26.50
38	6.40	9.80	19.80	27.40
39	6.60	10.00	20.30	28.10
40	6.90	10.40	20.80	28.70
41	7.20	10.80	21.30	29.50
42	7.50	11.40	22.10	30.60
43	7.90	11.80	22.80	31.50
44	8.30	12.50	23.50	32.50
45	8.80	13.10	24.30	33.50
46	9.20	13.80	25.10	34.70
47	9.60	14.60	25.60	35.80
48	10.10	15.30	26.40	37.10
49	10.50	16.10	27.20	38.20
50	11.10	17.00	27.80	39.40
51	11.60	17.90	28.70	41.00
52	12.40	19.10	29.80	42.60
53	13.00	20.40	30.70	44.20
54	13.80	21.60	31.90	45.90
55	14.60	23.00	33.00	47.30
56	15.50	24.40	34.30	49.40
57	16.50	26.10	35.90	51.70
58	17.70	28.00	37.60	54.20

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Insurance Age	Plan 1 Base Plan	Plan 2 Base Plan with Home, Community Based and Immediate Family Member Care Option	Plan 3 Base Plan with Compound Inflation Option	Plan 4 Base Plan with Compound Inflation and Home, Community Based and Immediate Family Member Care Option
59	19.00	29.90	39.30	56.70
60	20.30	32.00	41.00	59.40
61	22.20	34.80	43.90	63.70
62	24.30	37.80	47.20	68.10
63	26.50	41.20	50.20	72.30
64	29.00	44.70	54.00	77.40
65	32.80	49.90	59.70	84.80
66	36.40	54.60	64.50	90.90
67	40.30	59.50	70.20	98.00
68	44.50	65.00	75.70	104.40
69	49.10	70.90	81.60	112.10
70	54.30	77.50	87.90	119.70
71	60.30	85.00	96.10	129.70
72	66.80	93.00	104.40	139.80
73	73.70	101.80	112.70	150.30
74	81.50	111.40	122.20	161.70
75	97.90	133.00	144.00	189.50
76	107.50	144.70	156.10	204.00
77	117.90	157.30	167.80	218.00
78	129.20	171.10	181.20	233.70
79	141.60	186.20	194.90	250.10
80	155.10	202.40	210.60	268.80

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Home Benefit	50%
Lifetime Maximum	Unlimited
Elimination Period	90 Days
Home Care Level	Home, Comm-Based Care

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18-30	7.00	11.10	21.60	31.20
31	7.00	11.20	22.00	31.90
32	7.30	11.60	22.60	32.60
33	7.40	11.70	23.00	33.40
34	7.50	12.00	23.40	33.90
35	7.80	12.40	24.10	34.80
36	8.10	12.60	24.70	35.80
37	8.30	13.10	25.50	36.70
38	8.60	13.50	26.10	37.60
39	9.00	14.00	26.90	38.60
40	9.40	14.70	27.70	39.80
41	9.90	15.30	28.60	41.00
42	10.10	15.90	29.40	42.00
43	10.70	16.60	30.20	43.30
44	11.20	17.40	31.10	44.60
45	11.70	18.30	32.10	46.00
46	12.40	19.20	33.00	47.60
47	12.90	20.30	33.80	49.00
48	13.50	21.50	35.00	51.00
49	14.00	22.60	35.80	52.50
50	14.80	24.10	36.80	54.50
51	15.60	25.40	38.00	56.60
52	16.40	26.90	39.00	58.60
53	17.40	28.60	40.40	61.10
54	18.20	30.30	41.60	63.20
55	19.10	31.90	42.80	64.70
56	20.40	34.20	44.50	67.70
57	21.70	36.50	46.50	71.10

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58	23.10	39.10	48.50	74.50
59	24.70	41.90	50.60	78.00
60	26.40	44.90	52.70	81.80
61	28.90	48.80	56.30	87.50
62	31.30	52.90	60.20	93.60
63	34.20	57.70	64.00	99.50
64	37.20	62.50	68.30	106.10
65	41.90	69.80	75.40	116.50
66	46.40	76.30	81.60	125.10
67	51.40	83.20	88.50	134.60
68	56.70	90.90	95.30	143.50
69	62.50	99.10	103.00	154.20
70	69.00	108.00	110.90	164.80
71	76.40	118.40	120.80	178.10
72	84.40	129.20	130.90	191.50
73	92.80	141.10	141.10	205.70
74	102.20	153.70	152.50	220.50
75	122.70	182.90	179.40	257.70
76	134.60	198.90	194.50	277.40
77	147.40	216.20	209.00	296.30
78	161.20	234.80	225.30	317.20
79	176.40	254.80	241.80	339.20
80	192.90	276.60	260.90	363.90