

**UNUM LONG TERM CARE PLAN  
536066**

**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                         **Professional**

**OPTIONS:**

Home Care Level                               **Total**  
 Inflation Protection   Compound Uncapped

**Monthly Rates**

Insurance Age	Plan 1 Base Plan	Plan 2 Base Plan with Total Home Care Option	Plan 3 Base Plan with Compound Inflation Option	Plan 4
				Base Plan with Compound Inflation and Total Home Care Option
<b>18-30</b>	2.30	3.60	7.40	10.40
<b>31</b>	2.30	3.60	7.50	10.50
<b>32</b>	2.30	3.60	7.70	10.80
<b>33</b>	2.50	3.80	7.90	11.10
<b>34</b>	2.50	3.90	8.10	11.30
<b>35</b>	2.60	4.00	8.50	11.70
<b>36</b>	2.70	4.00	8.60	12.00
<b>37</b>	2.70	4.30	8.80	12.20
<b>38</b>	2.90	4.40	9.10	12.60
<b>39</b>	3.10	4.70	9.50	13.00
<b>40</b>	3.10	4.80	9.60	13.40
<b>41</b>	3.40	4.90	10.00	13.80
<b>42</b>	3.50	5.20	10.30	14.20
<b>43</b>	3.60	5.50	10.70	14.60
<b>44</b>	3.80	5.70	10.90	15.10
<b>45</b>	4.00	6.00	11.40	15.60
<b>46</b>	4.20	6.20	11.70	16.10
<b>47</b>	4.40	6.60	12.00	16.60
<b>48</b>	4.70	7.00	12.40	17.30
<b>49</b>	4.80	7.40	12.70	17.90
<b>50</b>	5.10	7.80	13.10	18.30
<b>51</b>	5.50	8.30	13.70	19.20
<b>52</b>	5.70	8.80	14.20	19.90
<b>53</b>	6.10	9.40	14.60	20.70
<b>54</b>	6.40	9.90	15.10	21.30
<b>55</b>	6.90	10.50	15.70	22.20
<b>56</b>	7.30	11.30	16.50	23.10
<b>57</b>	7.80	12.10	17.30	24.30
<b>58</b>	8.30	12.90	18.10	25.40
<b>59</b>	9.00	13.80	18.90	26.70
<b>60</b>	9.80	14.80	19.90	28.00
<b>61</b>	10.70	16.00	21.30	29.80
<b>62</b>	11.70	17.60	23.00	32.00
<b>63</b>	12.70	19.00	24.40	33.80
<b>64</b>	14.00	20.70	26.50	36.30

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## 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	Professional

**OPTIONS:**

Home Care Level	Total
Inflation Protection	Compound Uncapped

### Monthly Rates

Insurance Age	Plan 1 Base Plan	Plan 2 Base Plan with Total Home Care Option	Plan 3 Base Plan with Compound Inflation Option	Plan 4 Base Plan with Compound Inflation and Total Home Care Option
65	16.00	23.10	29.40	39.80
66	17.80	25.10	31.90	42.50
67	19.80	27.40	34.70	45.80
68	21.80	29.90	37.40	48.90
69	24.30	32.80	40.70	52.50
70	26.90	35.80	43.70	55.90
71	29.90	39.10	47.80	60.60
72	33.10	42.90	52.10	65.30
73	36.80	47.10	56.40	70.20
74	40.60	51.50	61.20	75.50
75	49.00	61.40	72.40	88.50
76	53.80	66.70	78.50	95.20
77	59.00	72.50	84.50	101.70
78	64.70	78.90	91.50	109.10
79	71.10	85.80	98.30	116.60
80	78.10	93.50	106.50	125.30
81	86.10	101.90	115.70	135.10
82	95.40	112.20	126.50	146.80
83	105.40	123.40	137.80	159.30
84	116.20	135.10	149.40	172.00

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**Connecticut Rates**

**BASE PLAN:**

Facility Monthly Benefit	<b>1,000</b>
Home Monthly Benefit	<b>500</b>
Facility Benefit Duration	<b>6 Years</b>
Home Benefit	<b>50%</b>
Lifetime Maximum	<b>72,000</b>
Elimination Period	<b>90 Days</b>
Home Care Level	<b>Professional</b>

**OPTIONS:**

Home Care Level	<b>Total</b>
Inflation Protection	<b>Compound Uncapped</b>

**Monthly Rates**

Insurance Age	Plan 1 Base Plan	Plan 2 Base Plan with Total Home Care Option	Plan 3 Base Plan with Compound Inflation Option	Plan 4 Base Plan with Compound Inflation and Total Home Care Option
<b>18-30</b>	3.10	4.80	9.90	13.90
<b>31</b>	3.10	4.90	10.10	14.30
<b>32</b>	3.30	5.10	10.30	14.70
<b>33</b>	3.40	5.20	10.70	15.10
<b>34</b>	3.40	5.20	10.90	15.30
<b>35</b>	3.50	5.50	11.20	15.90
<b>36</b>	3.60	5.60	11.40	16.10
<b>37</b>	3.80	5.90	11.80	16.60
<b>38</b>	3.90	6.10	12.20	17.20
<b>39</b>	4.00	6.20	12.60	17.60
<b>40</b>	4.30	6.50	12.90	18.10
<b>41</b>	4.40	6.80	13.30	18.60
<b>42</b>	4.70	7.20	13.70	19.20
<b>43</b>	4.80	7.40	14.20	19.80
<b>44</b>	5.10	7.80	14.60	20.40
<b>45</b>	5.30	8.20	15.10	21.10
<b>46</b>	5.60	8.60	15.60	21.70
<b>47</b>	5.90	9.10	15.90	22.40
<b>48</b>	6.20	9.60	16.40	23.30
<b>49</b>	6.50	10.10	16.90	24.10
<b>50</b>	6.80	10.70	17.30	24.80
<b>51</b>	7.20	11.30	17.90	25.90
<b>52</b>	7.70	12.10	18.60	26.90
<b>53</b>	8.10	12.70	19.20	28.00
<b>54</b>	8.60	13.50	19.90	29.00
<b>55</b>	9.10	14.40	20.70	29.90
<b>56</b>	9.60	15.30	21.60	31.20
<b>57</b>	10.30	16.50	22.50	32.80
<b>58</b>	11.10	17.70	23.70	34.50
<b>59</b>	11.80	19.00	24.70	36.00
<b>60</b>	12.70	20.30	25.90	37.70
<b>61</b>	13.90	22.10	27.70	40.40
<b>62</b>	15.20	24.10	29.90	43.40
<b>63</b>	16.80	26.10	31.70	46.00
<b>64</b>	18.30	28.50	34.20	49.30

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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	Professional

**OPTIONS:**

Home Care Level	Total
Inflation Protection	Compound Uncapped

### Monthly Rates

Insurance Age	Plan 1 Base Plan	Plan 2 Base Plan with Total Home Care Option	Plan 3 Base Plan with Compound Inflation Option	Plan 4 Base Plan with Compound Inflation and Total Home Care Option
65	20.80	31.90	38.00	54.10
66	23.00	34.70	41.00	58.00
67	25.60	38.00	44.60	62.50
68	28.20	41.50	48.10	66.70
69	31.20	45.20	52.00	71.50
70	34.50	49.40	55.90	76.40
71	38.40	54.20	61.10	82.90
72	42.40	59.40	66.40	89.30
73	46.90	65.00	71.80	96.10
74	51.90	71.10	77.90	103.40
75	62.30	84.90	91.80	121.20
76	68.50	92.40	99.60	130.40
77	75.10	100.60	107.10	139.40
78	82.30	109.30	115.70	149.50
79	90.20	119.10	124.30	160.00
80	98.90	129.50	134.60	172.00
81	108.80	141.20	145.70	185.40
82	120.40	155.40	159.00	201.40
83	132.70	170.70	172.90	218.40
84	146.00	186.80	187.30	236.00

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**Connecticut Rates**

**BASE PLAN:**

Facility Monthly Benefit	<b>1,000</b>
Home Monthly Benefit	<b>500</b>
Facility Benefit Duration	<b>Unlimited</b>
Home Benefit	<b>50%</b>
Lifetime Maximum	<b>Unlimited</b>
Elimination Period	<b>90 Days</b>
Home Care Level	<b>Professional</b>

**OPTIONS:**

Home Care Level	<b>Total</b>
Inflation Protection	<b>Compound Uncapped</b>

**Monthly Rates**

Insurance Age	Plan 1 Base Plan	Plan 2 Base Plan with Total Home Care Option	Plan 3 Base Plan with Compound Inflation Option	Plan 4 Base Plan with Compound Inflation and Total Home Care Option
<b>18-30</b>	4.30	6.90	13.30	19.50
<b>31</b>	4.30	6.90	13.50	19.90
<b>32</b>	4.40	7.20	13.90	20.40
<b>33</b>	4.40	7.30	14.20	20.80
<b>34</b>	4.60	7.40	14.40	21.20
<b>35</b>	4.70	7.70	14.80	21.80
<b>36</b>	4.90	7.80	15.20	22.40
<b>37</b>	5.10	8.20	15.70	22.90
<b>38</b>	5.20	8.50	16.10	23.50
<b>39</b>	5.50	8.70	16.60	24.20
<b>40</b>	5.70	9.10	17.00	24.80
<b>41</b>	6.00	9.50	17.70	25.60
<b>42</b>	6.20	9.90	18.10	26.30
<b>43</b>	6.50	10.30	18.60	27.00
<b>44</b>	6.80	10.80	19.20	28.00
<b>45</b>	7.20	11.40	19.80	28.70
<b>46</b>	7.50	12.00	20.40	29.80
<b>47</b>	7.80	12.60	20.90	30.70
<b>48</b>	8.30	13.40	21.60	32.00
<b>49</b>	8.60	14.20	22.10	33.00
<b>50</b>	9.10	15.10	22.80	34.20
<b>51</b>	9.60	15.90	23.50	35.60
<b>52</b>	10.10	16.80	24.20	36.90
<b>53</b>	10.70	17.90	25.10	38.50
<b>54</b>	11.20	19.00	25.90	39.90
<b>55</b>	11.80	20.00	26.70	40.80
<b>56</b>	12.60	21.50	27.80	42.80
<b>57</b>	13.40	23.00	29.10	45.00
<b>58</b>	14.30	24.70	30.30	47.10
<b>59</b>	15.30	26.40	31.70	49.40
<b>60</b>	16.50	28.30	33.00	51.70
<b>61</b>	17.90	30.80	35.40	55.50
<b>62</b>	19.60	33.50	37.80	59.40
<b>63</b>	21.50	36.50	40.30	63.20
<b>64</b>	23.30	39.60	43.00	67.50

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Facility Monthly Benefit	<b>1,000</b>
Home Monthly Benefit	<b>500</b>
Facility Benefit Duration	<b>Unlimited</b>
Home Benefit	<b>50%</b>
Lifetime Maximum	<b>Unlimited</b>
Elimination Period	<b>90 Days</b>
Home Care Level	<b>Professional</b>

**OPTIONS:**

Home Care Level	<b>Total</b>
Inflation Protection	<b>Compound Uncapped</b>

**Monthly Rates**

Insurance Age	Plan 1 Base Plan	Plan 2	Plan 3	Plan 4
		Base Plan with Total Home Care Option	Base Plan with Compound Inflation Option	Base Plan with Compound Inflation and Total Home Care Option
<b>65</b>	26.40	44.30	47.60	74.10
<b>66</b>	29.30	48.50	51.60	79.60
<b>67</b>	32.40	52.90	56.00	85.70
<b>68</b>	35.80	57.90	60.30	91.40
<b>69</b>	39.40	63.10	65.30	98.20
<b>70</b>	43.60	68.80	70.20	105.00
<b>71</b>	48.40	75.40	76.40	113.50
<b>72</b>	53.30	82.30	82.90	122.10
<b>73</b>	58.80	89.80	89.40	131.00
<b>74</b>	64.70	97.90	96.70	140.50
<b>75</b>	77.70	116.50	113.90	164.30
<b>76</b>	85.30	126.80	123.50	176.90
<b>77</b>	93.50	137.80	132.70	189.00
<b>78</b>	102.20	149.60	143.10	202.40
<b>79</b>	111.90	162.50	153.70	216.50
<b>80</b>	122.50	176.40	165.90	232.20
<b>81</b>	134.30	191.90	179.50	249.70
<b>82</b>	148.20	210.30	195.40	270.50
<b>83</b>	163.00	230.10	211.80	292.20
<b>84</b>	178.60	250.80	228.70	314.30