

UCT's Short-Term Care Rate Guide

Individual Gross Annual Premiums per \$10 Daily Benefit (Multiply the Daily Benefit by .10 to determine the factor)

To determine the premium for the Base Policy with the Home Health Care Rider, add the respective premiums together.

ISSUE AGE	100 DAYS		200 DAYS		360 DAYS		5% COMPOUND INFLATION RIDER FACTOR
	BASE POLICY	HHC RIDER	BASE POLICY	HHC RIDER	BASE POLICY	HHC RIDER	
50-54	7.0	4.0	13.0	6.0	23.0	11.0	3.71
55-59	8.0	4.0	15.0	8.0	27.0	13.0	3.30
60	10.0	5.0	18.0	10.0	31.0	15.0	3.03
61	11.0	6.0	21.0	11.0	35.0	18.0	2.87
62	13.0	7.0	23.0	12.0	39.0	20.0	2.80
63	14.0	7.0	25.0	13.0	43.0	22.0	2.69
64	15.0	8.0	27.0	14.0	47.0	24.0	2.60
65	18.0	9.0	30.0	15.0	52.0	26.0	2.49
66	19.0	9.0	32.0	16.0	56.0	28.0	2.41
67	20.0	10.0	33.0	17.0	58.0	29.0	2.30
68	21.0	10.0	36.0	18.0	62.0	31.0	2.26
69	22.0	11.0	38.0	19.0	66.0	33.0	2.19
70	23.0	11.0	40.0	21.0	70.0	35.0	2.12
71	26.0	13.0	45.0	23.0	78.0	39.0	2.03
72	29.0	14.0	50.0	25.0	87.0	43.0	1.99
73	32.0	16.0	55.0	28.0	95.0	47.0	1.90
74	35.0	18.0	62.0	31.0	107.0	54.0	1.79
75	39.0	20.0	69.0	35.0	119.0	60.0	1.68
76	43.0	22.0	76.0	38.0	132.0	66.0	1.60
77	47.0	24.0	83.0	42.0	144.0	72.0	1.53
78	52.0	26.0	91.0	45.0	157.0	78.0	1.49
79	56.0	28.0	97.0	49.0	169.0	84.0	1.46
80	60.0	30.0	105.0	53.0	181.0	91.0	1.44
81	64.0	32.0	111.0	56.0	194.0	97.0	1.42
82	69.0	35.0	121.0	60.0	210.0	105.0	1.38
83	75.0	38.0	131.0	66.0	227.0	113.0	1.36
84	81.0	41.0	143.0	71.0	247.0	124.0	1.32
85	89.0	44.0	154.0	78.0	268.0	134.0	1.30

For agent use only

Product Options

Issue Ages:	50-85	
Daily Benefit:	\$50 - \$300 (rates based on units of \$10)	
Benefit Period:	100, 200 or 360 Days	
Lifetime Maximum Benefit Period:	100, 200 or 360 Days multiplied by 3	
Available Riders:	<ul style="list-style-type: none"> • Home Health Care Rider • 5% Compound Inflation Rider • Guaranteed Purchase Rider – (automatically added at no cost if Inflation Rider is declined) 	
Available Discounts:	10% Spousal Discount-Both issued 5% Spousal Discount-One Issued 10% Non-Tobacco Discount	
Elimination Period:	0 Days	Factor: 1.15
	20 Days	Factor: 1.00
Modal Factors:	Annual	1.0
	Semi-Annual	0.5
	Quarterly	0.25
	Monthly	0.0833

Sample Calculation for age 65 / Benefit Period 200 Days

Maximum Daily Benefit Amount Choose: \$50 to \$300 \$ <u>75</u> Multiply by .10 and enter factor below. A. <u>7.5</u>	Maximum Benefit Period Choose: <input type="checkbox"/> 100 days, <input checked="" type="checkbox"/> 200 days, or <input type="checkbox"/> 360 days Age: <u>65</u> (See rate chart for premium) B. <u>30</u>	Choose Optional Riders <input checked="" type="checkbox"/> Home Health Care Rider (See rate chart for premium) <input checked="" type="checkbox"/> 5% Compound Inflation Protection Rider (See rate chart for factor) OR <input type="checkbox"/> Guaranteed Purchase Option Rider – No cost C. <u>15</u>		One Time Elimination Period Choose: <input checked="" type="checkbox"/> 0 days: enter factor 1.15 OR <input type="checkbox"/> 20 days: enter factor 1.00 E. <u>1.15</u>	Less Discounts <input checked="" type="checkbox"/> 10% discount for both spouses approved: enter factor .90 OR <input type="checkbox"/> 5% discount for one spouse approved: enter factor .95 F. <u>.90</u>		<input checked="" type="checkbox"/> 10% discount for Non-Tobacco: enter factor .90 G. <u>.90</u>
		D. <u>2.49</u>					

Calculate your premium – Enter the figures from above. (Premiums will vary according to the benefit amounts you select)

$$\text{A. } 7.5 \times \text{(B+C) } 45 \times \text{D. } 2.49 \times \text{E. } 1.15 \times \text{F. } .90 \times \text{G. } .90 = \$ \text{782.81}$$

Total Annual Premium

Calculate your benefits – Enter the figures from above.

$$\text{Maximum Daily Benefit Amount (A) } \$ 75 \times \text{Maximum Benefit Period (B) } 200 \text{ Days} = \$ 15,000$$

Your maximum benefit per period of care

$$\text{Maximum Benefit Period (B) } 200 \text{ Days} \times 3 = \text{Lifetime Maximum Benefit Period } 600 \text{ Days}$$

Lifetime Maximum Benefit Period