

# 2019 Milliman LTCI Survey Product Exhibit

1	COMPANY NAME	Bankers Life		CalPERS	Country Life	Genworth
2	Product Type	Comprehensive		Comprehensive	Comprehensive	Work-Site
3	Product Marketing Name	SimpleChoice TQ Standard	SimpleChoice TQ Premier & Elite	LTC4	Comprehensive LTC	Group Long Term Care
4	Product Form Number	GR-N620	GR-N650	LTC4	ICC14(LTC600)	7053
5	Year First LTCI Product Offered	1985		1995	1989	1974
6	Year Current LTCI Product Was Priced	2013		2013	2015	2011
7	Jurisdictions LTCI Available	All States (BCLIC in NY)		California	23 States, None in the Northeast	DC & All States (except FL & VT)
8	State Partnerships (as of January 1, 2019)	40 (Including CT, IN)		CA	17	31
9	<b>Financial Ratings (as of December 31, 2017)</b>					
10	A.M. Best	A-		Not Rated	A+	B-
11	Standard and Poor's	BBB+		Not Rated	Not Rated	B-
12	Moody's	A3		Not Rated	Not Rated	B3
13	Fitch	BBB+		Not Rated	Not Rated	B+
14	COMDEX Ranking (as of May 1, 2019)	60		Not Ranked	Not Ranked	50
15	<b>Statutory Financials (Millions)</b>					
16	Assets (December 31, 2018)	\$15,515		\$4,500	\$9,710	\$39,995
17	Capital & Surplus (December 31, 2018)	\$1,110		Not Applicable	\$1,208	\$1,871
18	Percent Increase (Assets, Surplus)	-15%, -17%		-2%, NA	3%, 2%	0%, -31%
19	<b>LTCI Premium (Millions)</b>					
20	2018 First Year Premium	\$2.9		\$1.2	\$0.5	\$9.9 (includes individual)
21	2018 End of Year In-Force Premium	\$388.7		\$313.5	\$40.7	\$2,648.4
22	Percent Increase (New Business, In-Force)	-20%, -7%		1%, -4%	-21%, 12%	-31%, 0%
23	<b>LTCI Lives Insured</b>					
24	2018 First Year Issued	1,233		424	203	5,571 (includes individual)
25	2018 End of Year In-Force	205,194		122,808	21,467	1,233,006
26	Percent Increase (New Business, In-Force)	-29%, -7%		3%, -3%	-14%, -4%	-19%, -2%
27	<b>Product Ranges and Elimination Period Terms</b>					
28	Issue Age Range	18 - 84		18-79	25 - 75	18-up (18-75 for non-employees)
29	Daily, Weekly or Monthly Benefit Range	\$40 - \$400		\$150-\$400	\$50 - \$500	\$50-\$400
30	Benefit Periods and/or Pools	1, 2, 3		1, 2, 3, 6, 10	2, 3, 4, 5, 6, 8	2, 3, 4, 5, 6
31	Elimination Periods	0, 15, 30, 60, 90, 180, 365, 730, 1095, 1460		30, 90	30, 90, 180, 365	30, 60, 90, 180
32	Vanishing, Cumulative	Yes, Yes		Yes, Yes	Yes, Yes	Yes, Yes
33	Elimination Period Crediting	3 HC/Week=7		Calendar Days After 1st Expense	Service Days	Svc days (Cal days after 1st expense, extra \$)
34	0-day HCBC EP with longer NH EP	NA		NA	NA	NA
35	<b>Product Benefits</b>					
36	Number of Benefit Pools, EPs	1, 1		1, 1	1, 1	1, 1
37	Partial Cash (Disability) Alternative	NA		NA	NA	NA
38	Additional Cash Benefit	25% (Extra Cost)		NA	NA	NA
39	HCBC Payment Basis	Weekly	Monthly	Monthly	Daily (Monthly Extra \$)	Daily (Monthly Extra \$ ER Choice)
40	Assisted Living (Percent of NH Max)	100%		100%	100%	100%
41	Home Care Health Aide (Percent of NH Max)	50%	50%, 100%	100%	100%	50%, 60%, 75%, 100%
42	Independent Professional					Same as Custodial Care
43	Homemaker Services	Must Be Incidental		Must be incidental	Same As Custodial Care	Must be Incidental
44	Informal Care (Other Than Family)	Not Covered		100%		25% of MDB for up to 30 days/yr for non-resident at claim initiation
45	Informal Family Care			NA		
46	<b>Benefit Increase Features</b>					
47	Lifetime Compound Increases (Level Premium)	2%, 3%, 4%, 5%		3%, 5%	3%, 5%	3%, 5%
48	Lifetime Simple Increases (Level Premium)	5%			5%	NA
49	Other Increases (Level Premium)	2 Decreasing Inflation Options Are Also Offered (See Other Comments)		NA	NA	NA
50	Future Purchase Options (FPO)	15% Every 3 Years		Board-set % every 3 years unless declined 2x or on claim	15% every 3 years until age 80 unless declined 2 x in a row or on claim	15.76% every 3 years unless declined 2x in a row or on claim
51	Benefit Increase Comments	FPO: To 89 If No Declines or Claims				
52	Other Comments	5% Compound Through Age 60, Then Either 3% Compound or 5% Simple Through Age 75, Then 0%; HCO; Facility Only; NTQ		Mental and nervous disorder exclusion; coordinates benefits with other LTCI	NA	Coordinates Benefits with All Other LTCI

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53	COMPANY NAME	Bankers Life		CalPERS	Country Life	Genworth
54	Product Marketing Name	SimpleChoice TQ Standard	SimpleChoice TQ Premier & Elite	LTC4	Comprehensive LTC	Group Long Term Care
55	Sales Rep/Source for More Info	www.bankerslife.com			(866) 856-4760	www.genworth.com
56	<b>Ancillary Benefits</b>					
57	Bed Reserve Days/Year, Respite during EP?	60+Other, No	60+ Other, 21	30+Other, Yes	60+Other, 30	60+Other, 30
58	Alternative Plan of Care (APC)	No	Contractual After EP	By company practice	Contractual After EP	Contractual After EP
59	Home Modification	NA	30 x MDB	30 x MDB	60 x MDB*	90 x MDB or 3 x Monthly Max*
60	Caregiver Training Benefit		25% of Monthly HC		Included Above*	
61	Emergency Alert		5% HC MMB; Max 12 Months		Included Above*	
62	Equipment Benefit					Included Above*
63	Drug, Ambulance Benefit	NA, \$75/Trip x 4x/Year		NA	NA	NA
64	<b>Claims Issues</b>					
65	Conditional Receipt Protection	No		No	No	No
66	Coverage Beyond USA	Canada (Other = 30 Days)		50% of MDB up to 1 Yr	60 x MDB	NH 75%/4 Yrs; HC 25%/1 Yr
67	Provider Discounts (Directly or Indirectly)	No		Yes	No	No
68	Care Coordination Available From	Through Network		Company Staff	Company Staff*	Through Network
69	Third Party Care Coordinator Limits	None		None	None	None
70	Independent Review	Extended to IF in states with IR		As Required by Law	Extended to IF in States with IR	Extended to All Claimants
71	<b>Premiums and Discounts</b>					
72	Gender-distinct or Unisex pricing	Gender-Distinct		Unisex	Gender-Distinct	Unisex
73	Preferred Discount	10%		NA	15%	NA
74	Substandard Extra Ratings	25%		None	None	None
75	Two-Spouse, Two-Partner Discounts	35%, 10%		25%, 0% (25% if BOTH qualify for CalPERS independently)	15%, 15%	10%, 10%
76	Requires Identical Coverage	No		No	No	No
77	If Spouse is a Surprise Decline	One-spouse discount		One-spouse discount	One-spouse discount	10%
78	If Spouse answers "Yes" to 'Knock-Out' question					10%
79	One-Spouse Discount (Only 1 Spouse Applies)	15%		10%	10%	10%, even if partner does not apply
80	Maximum Best UW Class & Spouse Discount	41.5%		25%	30%	10%
81	Later Marriage Earns Discount For:	IF & New Spouse (if within two years); Otherwise, New Spouse gets one-buy discount		If Same Policy Series, IF & New Spouse; Otherwise new spouse gets 10% discount	Both	IF (If Within 12 Months) & New Spouse
82	When are dividends or credits expected to start?	NA				NA
83	Most Common Employer, Affinity Discount	NA, 5%		NA	NA	Unique prices; NA
84	Minimum Size Employer Group, Number Apps	NA				350 ees (vol); 125 ees (er-pd); greater of 2% or 14 apply
85	Minimum Size Affinity Group, Number Apps	Varies				NA
86	Modal Factors (SA, Q, M, PAC)	51.5%, 26.25%, 9.17%, 8.58%		50%, 25%, 8.33%, 8.33%	51.5%, 26%, NA, 8.5%	50%, 25%, 8.33%
87	Credit Card: Frequencies Accepted	None		Monthly Only	None	NA
88	<b>Non-Level Premiums</b>					
89	Fixed Periods	NA		NA	NA	NA
90	Paid Up at Ages	NA		NA	NA	NA
91	<b>Waiver of Premium</b>					
92	First Premium Waived (Days)	Elimination		Elimination	Elimination	Elimination
93	HCBC Waiver	Yes		Yes	Yes	Yes
94	Joint Waiver	Extra Cost	Automatic	Not Offered	Not Offered	Not Offered
95	<b>Return of Premium Upon Death (ROP)</b>					
96	ROP Design #1	Net; Grades from 10% @ 4th Year to 100% @ Year 20+		Net, Decreases to \$0 at 75	Automatic: Net, Death Before 65	Net, Decreases to \$0 at 75
97	Other ROP Design(s)	NA		NA	NA	NA
98	<b>Other Riders &amp; Features</b>					
99	Paid Up Survivor Benefit	Extra Cost		Extra Cost	Not Offered	Extra Cost
100	Both People Must Survive Number of Years	10		10	NA	10
101	Claim-Free Requirement?	No		Yes		No
102	Shared Care Benefit	Permanent Extra \$, Third Pool		NA	Extra Cost Ends If Partner Dies	Extra Cost Ends If Partner Dies; cannot be unilaterally taken away
103	Other Shared Care Aspects				Cannot be unilaterally taken away	Survivor Protected for At Least 1/2 Original Bucket
104	Restoration of Benefits	Extra Cost	Included	3 & 6 yr BPs (Extra Cost)	Extra Cost	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.		Coordinates benefits with LTCi; Restoration up to 2x original benefit	Claim period shorter than EP credited toward satisfaction of EP	Price guaranteed for 3 years
106	Combination Policies Offered	None		None	None	None

# 2019 Milliman LTCI Survey Product Exhibit

1	COMPANY NAME	Knights of Columbus		MassMutual Financial Group	Mutual of Omaha		New York Life Insurance Company		Thrivent	
2	Product Type	Facility-Only	Comprehensive	Comprehensive	Comprehensive		Comprehensive		Comprehensive	
3	Product Marketing Name	Long Term Care Plus NHC2	Long Term Care Plus LTC2	SignatureCare 600	Mutual Care Secure Solution	Mutual Care Custom Solution	NYL My Care	NYL Secure Care	Long-Term Care Insurance	
4	Product Form Number	ICC14 NHC2 7-14	ICC14 LTC2 7-14	MM600P	LTC13		ICC18-LTCD	ICC14-LTC6	ICC13 H-HX-LTC	
5	Year First LTCI Product Offered	2000		2019	1987		1988		1987	
6	Year Current LTCI Product Was Priced	2014		2017	2013		2018	2016	2016	
7	Jurisdictions LTCI Available	All States & DC		All states & DC & PR	All States & DC		All States & DC		DC & All States (except NY)	
8	State Partnerships (as of January 1, 2019)	None		39 (Including CT, IN, NY)	37		36		39 (Including IN)	
9	Financial Ratings (as of December 31, 2017)									
10	A.M. Best	A+		A++	A+		A++		A++	
11	Standard and Poor's	AA+		AA+	AA-		AA+		Not Rated	
12	Moody's	Not Rated		Aa2	A1		Aaa		Not Rated	
13	Fitch	Not Rated		AA+	Not Rated		AAA		AA+	
14	COMDEX Ranking (as of May 1, 2019)	98		98	93		100		99	
15	Statutory Financials (Millions)									
16	Assets (December 31, 2018)	\$25,428		\$25,841	\$8,084		\$311,449		\$90,509	
17	Capital & Surplus (December 31, 2018)	\$2,115		\$15,610	\$3,173		\$24,814		\$9,130	
18	Percent Increase (Assets, Surplus)	2%, 0%		1%, -1%	3%, -1%		3%, 3%		-1%, 10%	
19	LTCI Premium (Millions)									
20	2018 First Year Premium	\$4.8		\$7.9	\$46.2		\$16.7		\$10.7	
21	2018 End of Year In-Force Premium	\$72.1		\$247.2	\$472.7		\$299.8		\$203.5	
22	Percent Increase (New Business, In-Force)	4%, 5%		-11%, 2%	-6%, 8%		18%, 3%		6%, 1%	
23	LTCI Lives Insured									
24	2018 First Year Issued	1,923		2,533	17,394		5,514		3,666	
25	2018 End of Year In-Force	49,044		91,288	200,559		145,841		123,016	
26	Percent Increase (New Business, In-Force)	-13%, 2%		-12%, 2%	-6%, 7%		21%, 1%		3%, -1%	
27	Product Ranges and Elimination Period Terms									
28	Issue Age Range	18 - 75		40-69 (age nearest birthday)	30 - 79		25-79		18 - 79	
29	Daily, Weekly or Monthly Benefit Range	\$1,500 - \$15,000/Month		\$100-\$400	\$1,500 - \$10,000/Month		\$50-\$400		\$1,500 - \$15,000/Month	
30	Benefit Periods and/or Pools	3, 5, 10		2, 3, 4, 5, 6	2, 3, 4, 5	\$50,000 - \$500,000 (up to 8.3 years)	\$50,000-\$500,000 in increments of \$5K; Max=60 x MMB	2, 3, 5, 7	2, 3, 4, 5, 8	
31	Elimination Periods	30, 90, 180 (cut in half for HCBC with care coordination)**		90	90, 180, 365	0, 30, 60, 90, 180, 365	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, No		Yes, Yes	Yes, Yes		Yes, Yes		Yes, Yes	
33	Elimination Period Crediting	Calendar Days		1 HC/Week=7	Calendar Days After 1st Expense		Dollars spent	Service Days	1 HC/Week=7	
34	0-day HCBC EP with longer NH EP	Facility-Only	NA	Extra Cost; HC Days Retire FC 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	Facility Only	1, 1	1, 1	1, 1		1, 0 (deductible ilo EP)	1, 1	1, 1	
37	Partial Cash (Disability) Alternative	NA		NA	30% (Automatic)	40% (Automatic)	NA		NA	
38	Additional Cash Benefit	NA		NA	NA		NA		10% in Facilities but 15% at Home (Extra Cost)	
39	HCBC Payment Basis	Facility Only	Monthly	Daily (Monthly Extra \$)	Monthly		Monthly	Daily (Monthly@31 x MDB*)	Monthly	
40	Assisted Living (Percent of NH Max)	100%		100%	100%		100%		100%	
41	Home Care Health Aide (Percent of NH Max)	100%		100%	50%, 75%, 100%		100%	50%, 80%, 100%	100%	
42	Independent Professional	100%		100%	50%, 75%, 100%		Not Covered	50%, 80%, 100%	100%	
43	Homemaker Services	100%		100%	50%, 75%, 100%		Not Covered	50%, 80%, 100%	100%	
44	Informal Care (Other Than Family)	Facility Only	Same As Custodial Care	Same As Custodial Care	Same As Custodial Care		1 day/wk if 2 LTC days provided		Same As Custodial Care	
45	Informal Family Care	Facility Only	Not Covered	Not Covered	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	
46	Benefit Increase Features									
47	Lifetime Compound Increases (Level Premium)	3%, 5%		3%, 5%	3%, 4%, 5%	1% to 5%, 0.25% increments & Buy-Up Option	2%, 3%, 5%	3%, 5%	1%, 2%, 3%, 5%	
48	Lifetime Simple Increases (Level Premium)	NA		NA	NA		NA	3%	NA	
49	Other Increases (Level Premium)	NA		NA	3% or 5% CBIO for 20 Years	Above w/ 10, 15, or 20 yr periods	Benefits increase based on CPI-U (cap: 7.5%/yr) until declined 2x or age 95.	Based on CPI-U (cap: 7.5%/yr)	NA	
50	Future Purchase Options (FPO)	Board-set % Every 2 Years Until 2 Straight Declines or On Clm		NA	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	CPI FPO increases use attained-age price per unit	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 on Claim.	
51	Benefit Increase Comments									
52	Other Comments				Electronic App	Rider Doubles MMB for Professional HC	Deductible instead of EP; 20% co-pay	Partners Benefit Rider provides JT WP and Shared EP		

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53	COMPANY NAME	Knights of Columbus		MassMutual Financial Group	Mutual of Omaha		New York Life Insurance Company		Thrivent
54	Product Marketing Name	Long Term Care Plus NHC2	Long Term Care Plus LTC2	SignatureCare 600	Mutual Care Secure Solution	Mutual Care Custom Solution	NYL My Care	NYL Secure Care	Long-Term Care Insurance
55	Sales Rep/Source for More Info	lynne.toomey@kofc.org		800-767-1000	1-800-693-6083		(800) 224-4582		1-800-THRIVENT
56	<b>Ancillary Benefits</b>								
57	Bed Reserve Days/Year, Respite during EP?	21, 21		60+Other, 30	30+Other, 30		60+Other, 30		60+Other, 2 x Monthly Max
58	Alternative Plan of Care (APC)	Contractual After EP		No	Contractual After EP		Contractual When Benefit Eligible		Contractual After EP
59	Home Modification	Facility Only	min (45 x MDB, \$5000)*	2 x Mo Max	2 x Mo Max If Care Coord Is Used*		NA	Grab bars, hand rails, ramps	2 x Monthly Max*
60	Caregiver Training Benefit		\$500/Calendar Year	Included Above	Included Above*		20% x MMB	5 x Facility MDB	Included Above*
61	Emergency Alert		APC w/Care Co-ord				NA		
62	Equipment Benefit		Included Above*				\$5,000	\$4,000	
63	Drug, Ambulance Benefit		NA, \$250/Year				NA		
64	<b>Claims Issues</b>								
65	Conditional Receipt Protection	No		Full, After UW Reqt	Full, After UW Reqt		Up to \$5000 for 60 days after app	Up to \$1000 for 60 days after app	Full, After UW Reqt
66	Coverage Beyond USA	Canada & US Territories		NA	Canada & UK; Indemnity for Other (365)		3 x MMB	100 x Facility MDB	2x Max Monthly Benefit
67	Provider Discounts (Directly or Indirectly)	LifePlans Provider Discount Program*		No	No		No		No
68	Care Coordination Available From	Through Network** or up to \$500/yr for client's choice		Company Staff	Company Staff		Through Network	Through Network*	Through Network
69	Third Party Care Coordinator Limits	\$500/yr for client's choice		None	None		None		None
70	Independent Review	Extended to All Claimants		As Required by Law	As Required by Law		Extended to IF in States with IR		Extended to IF in States with IR
71	<b>Premiums and Discounts</b>								
72	Gender-distinct or Unisex pricing	Gender-Distinct		Gender-Distinct	Gender-Distinct		Gender-Distinct		Gender-Distinct
73	Preferred Discount	10%		10%	15%		NA		10%
74	Substandard Extra Ratings	50%		None	25%		25%, 50%, 75%, 100%	50%, 100%	25%, 50%
75	Two-Spouse, Two-Partner Discounts	30%, 0%		15%, 15%	30%, 30%		25%, 25%		20%, 20%
76	Requires Identical Coverage	No		No	No		No		No
77	If Spouse is a Surprise Decline	One-spouse discount		One-spouse discount	One-spouse discount	One-spouse discount	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)	15%		15%	15%		10%	0%	5%
80	Maximum Best UW Class & Spouse Discount	37%		23.5%	40.5%		25%	25%	30%
81	Later Marriage Earns Discount For:	New Spouse gets 15% discount		IF (If Same Series) & New Spouse	If Same Policy Series, IF & New Spouse; Otherwise new spouse gets 15% discount		New Spouse		IF & New Spouse
82	When are dividends or credits expected to start?	NA		Not Illustrated	NA		End of 3rd year	End of 10th year	NA
83	Most Common Employer, Affinity Discount			5% (Not Employer Sponsored), 5%	5%, 5%; not for SSTD				
84	Minimum Size Employer Group, Number Apps			5 Apps, Common Employer Program Only	None, None				
85	Minimum Size Affinity Group, Number Apps			100, 10					
86	Modal Factors (SA, O, M, PAC)	52%, 26.5%, NA, 8.65%		52%, 26.5%, NA, 8.8%	51%, 26%, NA, 9%		51%, 26%, NA, 9%		50.8%, 25.6%, NA, 8.6%
87	Credit Card: Frequencies Accepted	None		None	None		None		None
88	<b>Non-Level Premiums</b>								
89	Fixed Periods	NA		NA	NA		NA		10
90	Paid Up at Ages								NA
91	<b>Waiver of Premium</b>								
92	First Premium Waived (Days)	Elimination		Elimination	Elimination		After Deductible	Elimination	Elimination
93	HCBC Waiver	Yes		Yes	Yes, With 8 Days of Care/Month		Yes		Yes
94	Joint Waiver	Not Offered		Extra Cost	Not Offered	Extra Cost	NA	Extra Cost	Automatic w/ Shared Care
95	<b>Return of Premium Upon Death (ROP)</b>								
96	ROP Design #1	Automatic: Net, Death Before 65		100% Full	Net, 3 x initial MMB after 10 yrs		Automatic, Net, Death Before 65	Net, 100%	Net, 100%
97	Other ROP Design(s)	NA		NA	NA	Net, 100%; Net 100% to 65	NA		NA
98	<b>Other Riders &amp; Features</b>								
99	Paid Up Survivor Benefit	Not Offered		Extra Cost	Not Offered	Extra Cost	Not offered		Extra Cost
100	Both People Must Survive Number of Years	NA		10	NA	10	NA		10
101	Claim-Free Requirement?			No		No			Yes
102	Shared Care Benefit	Available with 3-year or 5-year BP in lieu of couples discount		Not available	Permanent Extra \$		Permanent Extra \$	Permanent Extra \$, Third Pool	Extra Cost Ends If Partner Dies
103	Other Shared Care Aspects	NA		NA	Must Leave 1 Year for Living Spouse		Cannot be unilaterally taken away		Pool Depleted, Spouse <86 & No Clm in 2 Yrs, Can Buy 2 Yr BP
104	Restoration of Benefits			Not Available	NA		NA	>12 mos of not being chronically ill	NA
105	Other Comments	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		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
106	Combination Policies Offered	None		Life	None		Life		None