

**UNUM LONG TERM CARE PLAN
Policy 949209**

Connecticut Rates

BASE PLAN:		OPTIONS:	
Facility Monthly Benefit	1,000	Home Care Level	Home, Community-Based and Immediate Family Member Care
Home Monthly Benefit	500		
Facility Benefit Duration	3 Years		
Home Benefit	50%	Inflation Protection	Compound Uncapped
Lifetime Maximum	36,000		
Elimination Period	90 Days		
Home Care Level	Home and Community-Based Care		

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	3.00	4.60	9.40	12.90
31	3.00	4.60	9.40	13.00
32	3.00	4.60	9.60	13.40
33	3.10	4.70	9.90	13.70
34	3.10	4.80	10.10	14.00
35	3.30	4.90	10.50	14.40
36	3.40	5.10	10.80	14.80
37	3.50	5.20	10.90	15.10
38	3.60	5.50	11.30	15.60
39	3.90	5.70	11.80	16.10
40	4.00	6.00	12.10	16.40
41	4.20	6.20	12.40	16.90
42	4.40	6.50	12.90	17.60
43	4.60	6.80	13.30	17.90
44	4.80	7.00	13.70	18.60
45	5.10	7.40	14.20	19.10
46	5.20	7.80	14.60	19.80
47	5.50	8.20	15.00	20.40
48	5.90	8.70	15.30	21.20
49	6.10	9.10	15.90	22.00
50	6.40	9.60	16.30	22.60
51	6.80	10.30	16.90	23.50
52	7.20	10.90	17.40	24.40
53	7.50	11.60	17.90	25.20
54	7.90	12.20	18.50	26.10
55	8.50	13.00	19.40	27.00
56	9.00	13.80	20.20	28.20
57	9.80	14.80	21.20	29.60
58	10.30	15.70	22.10	30.90
59	11.10	16.90	23.10	32.40

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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 and Community-Based Care

OPTIONS:

Home Care Level	Home, Community-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
60	12.00	18.10	24.30	33.90
61	13.00	19.50	26.00	36.10
62	14.30	21.30	28.10	38.70
63	15.60	23.00	29.90	41.10
64	17.20	25.10	32.20	43.90
65	19.50	28.00	35.80	48.10
66	21.60	30.40	38.60	51.40
67	24.10	33.30	42.10	55.40
68	26.70	36.30	45.40	59.00
69	29.50	39.60	49.30	63.40
70	32.60	43.30	52.90	67.60
71	36.30	47.30	58.00	73.20
72	40.20	51.90	63.10	78.80
73	44.60	56.90	68.30	84.80
74	49.10	62.10	74.00	91.10
75	59.30	74.10	87.50	106.90
76	65.10	80.60	94.90	114.90
77	71.40	87.60	102.10	122.60
78	78.30	95.30	110.50	131.60
79	85.90	103.60	118.70	140.50
80	94.40	112.70	128.40	151.10

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BASE PLAN:		OPTIONS:	
Facility Monthly Benefit	1,000	Home Care Level	Home, Community-Based and Immediate Family Member Care
Home Monthly Benefit	500		
Facility Benefit Duration	6 Years		
Home Benefit	50%	Inflation Protection	Compound Uncapped
Lifetime Maximum	72,000		
Elimination Period	90 Days		
Home Care Level	Home and Community-Based Care		

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	6.00	12.20	17.30
31	4.00	6.10	12.60	17.70
32	4.00	6.20	12.90	18.10
33	4.20	6.40	13.40	18.60
34	4.30	6.50	13.70	19.00
35	4.40	6.80	14.00	19.50
36	4.60	6.90	14.30	19.90
37	4.80	7.20	14.80	20.50
38	4.90	7.50	15.20	21.20
39	5.20	7.80	15.60	21.70
40	5.30	8.10	16.10	22.20
41	5.60	8.30	16.50	22.90
42	5.90	8.80	17.00	23.70
43	6.10	9.20	17.60	24.30
44	6.40	9.60	18.20	25.10
45	6.80	10.10	18.70	25.90
46	7.20	10.70	19.40	26.80
47	7.40	11.20	19.80	27.60
48	7.80	12.00	20.40	28.60
49	8.10	12.50	21.10	29.60
50	8.60	13.10	21.50	30.60
51	9.00	13.90	22.20	31.70
52	9.50	14.80	23.00	32.90
53	10.00	15.70	23.80	34.20
54	10.70	16.60	24.60	35.50
55	11.30	17.80	25.50	36.70
56	12.00	18.90	26.50	38.20
57	12.90	20.20	27.70	40.00
58	13.70	21.60	29.00	42.00
59	14.70	23.10	30.30	43.80

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

OPTIONS:

Home Care Level	Home, Community-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
60	15.70	24.70	31.70	46.00
61	17.20	26.90	33.90	49.30
62	18.70	29.30	36.50	52.80
63	20.50	31.90	38.90	55.90
64	22.50	34.60	41.70	59.80
65	25.40	38.60	46.10	65.70
66	28.10	42.10	49.90	70.30
67	31.20	46.10	54.30	75.80
68	34.50	50.30	58.50	80.70
69	38.00	54.90	63.20	86.60
70	42.00	59.90	68.00	92.60
71	46.70	65.70	74.20	100.40
72	51.60	71.90	80.70	108.00
73	57.10	78.80	87.10	116.20
74	63.10	86.20	94.50	125.10
75	75.80	102.80	111.40	146.50
76	83.20	111.80	120.80	157.70
77	91.10	121.70	129.90	168.60
78	99.80	132.30	140.10	180.70
79	109.50	144.00	150.70	193.40
80	120.00	156.70	162.90	208.00

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Facility Monthly Benefit	1,000	Home Care Level	Home, Community-Based and Immediate Family Member Care
Home Monthly Benefit	500		
Facility Benefit Duration	Unlimited		
Home Benefit	50%	Inflation Protection	Compound Uncapped
Lifetime Maximum	Unlimited		
Elimination Period	90 Days		
Home Care Level	Home and Community-Based Care		

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	5.50	8.60	16.60	24.20
31	5.50	8.70	16.90	24.60
32	5.60	8.80	17.40	25.20
33	5.70	9.00	17.80	25.90
34	5.90	9.20	18.20	26.30
35	6.00	9.50	18.60	27.00
36	6.20	9.80	19.10	27.60
37	6.50	10.10	19.80	28.30
38	6.60	10.50	20.30	29.10
39	7.00	10.90	20.80	29.90
40	7.30	11.30	21.50	30.80
41	7.70	11.80	22.10	31.60
42	7.90	12.20	22.60	32.50
43	8.30	12.90	23.40	33.40
44	8.60	13.50	24.10	34.50
45	9.10	14.20	24.80	35.60
46	9.50	15.00	25.50	36.80
47	10.00	15.70	26.10	38.00
48	10.40	16.60	27.00	39.50
49	10.90	17.40	27.60	40.70
50	11.60	18.60	28.50	42.10
51	12.10	19.60	29.40	43.80
52	12.70	20.80	30.20	45.40
53	13.40	22.10	31.30	47.30
54	14.00	23.40	32.10	48.90
55	14.80	24.70	33.10	50.10
56	15.70	26.40	34.50	52.40
57	16.80	28.20	36.00	55.00
58	17.90	30.30	37.40	57.60
59	19.10	32.40	39.10	60.30

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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
60	20.40	34.70	40.70	63.20
61	22.20	37.70	43.60	67.60
62	24.20	41.00	46.50	72.40
63	26.40	44.60	49.40	76.80
64	28.70	48.40	52.80	82.00
65	32.40	54.00	58.20	90.10
66	35.90	59.00	63.20	96.70
67	39.60	64.40	68.40	104.00
68	43.80	70.30	73.70	111.00
69	48.40	76.60	79.70	119.20
70	53.30	83.60	85.80	127.50
71	59.20	91.50	93.30	137.80
72	65.30	100.00	101.30	148.10
73	71.80	109.10	109.10	159.00
74	79.00	118.80	117.90	170.60
75	94.90	141.40	138.70	199.30
76	104.10	153.80	150.40	214.50
77	114.00	167.20	161.70	229.20
78	124.70	181.60	174.20	245.30
79	136.40	197.10	186.90	262.20
80	149.20	213.90	201.80	281.30