

**UNUM LONG TERM CARE PLAN
Policy 584735**

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	60 Days
Home Care Level	Professional

OPTIONS:

Home Care Level	Total
Inflation Protection	Simple Uncapped

Monthly Rates

Insurance Age	Plan 1 Base Plan	Plan 2 Base Plan with Total Home Care Option	Plan 3 Base Plan with Simple Inflation Option	Plan 4 Base Plan with Simple Inflation and Total Home Care Option
18-30	3.30	4.90	5.30	7.90
31	3.30	4.90	5.50	8.20
32	3.30	4.90	5.50	8.30
33	3.40	5.10	5.70	8.60
34	3.40	5.20	6.10	9.00
35	3.50	5.30	6.20	9.20
36	3.60	5.50	6.50	9.50
37	3.80	5.70	6.80	9.90
38	3.90	6.00	7.20	10.50
39	4.20	6.20	7.50	10.90
40	4.30	6.50	7.80	11.30
41	4.60	6.80	8.20	11.80
42	4.70	7.00	8.50	12.40
43	4.90	7.40	9.00	12.90
44	5.10	7.70	9.40	13.50
45	5.50	8.10	9.80	14.00
46	5.60	8.50	10.10	14.70
47	6.00	9.00	10.50	15.30
48	6.20	9.50	11.20	16.40
49	6.50	10.00	11.60	17.00
50	6.90	10.50	12.20	17.90
51	7.40	11.30	12.70	19.00
52	7.80	12.00	13.50	19.90
53	8.20	12.70	14.20	21.10
54	8.60	13.40	14.80	22.00
55	9.20	14.30	15.70	23.10
56	9.80	15.20	16.50	24.40
57	10.50	16.40	17.70	26.00
58	11.30	17.40	18.60	27.30
59	12.20	18.70	19.90	29.10
60	13.10	20.00	21.30	30.90
61	14.30	21.60	23.00	33.10
62	15.90	23.70	25.10	35.90
63	17.30	25.60	27.00	38.60
64	19.00	28.00	29.50	41.60

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Monthly Rates

Insurance Age	Plan 1 Base Plan	Plan 2 Base Plan with Total Home Care Option	Plan 3 Base Plan with Simple Inflation Option	Plan 4 Base Plan with Simple Inflation and Total Home Care Option
65	21.70	31.20	33.30	46.00
66	24.10	33.90	36.50	49.90
67	26.70	37.20	40.00	53.80
68	29.50	40.40	43.60	58.10
69	32.80	44.20	47.70	62.70
70	36.30	48.20	52.10	67.60
71	40.30	52.90	57.20	73.50
72	44.70	57.90	63.10	80.00
73	49.70	63.60	69.00	86.70
74	54.90	69.40	75.80	94.10
75	66.20	82.90	90.10	111.00
76	72.70	90.10	97.60	119.30
77	79.70	98.00	106.50	128.80
78	87.50	106.60	115.10	138.30
79	96.10	116.00	125.20	149.20
80	105.60	126.10	135.60	160.40

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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	60 Days
Home Care Level	Professional

OPTIONS:

Home Care Level	Total
Inflation Protection	Simple Uncapped

Monthly Rates

Insurance Age	Plan 1 Base Plan	Plan 2 Base Plan with Total Home Care Option	Plan 3 Base Plan with Simple Inflation Option	Plan 4 Base Plan with Simple Inflation and Total Home Care Option
18-30	4.20	6.50	7.00	10.80
31	4.30	6.60	7.20	10.90
32	4.40	6.80	7.50	11.30
33	4.60	6.90	7.80	11.80
34	4.60	7.00	8.10	12.10
35	4.80	7.40	8.50	12.60
36	4.90	7.50	8.70	13.00
37	5.10	7.80	9.10	13.50
38	5.30	8.20	9.50	14.20
39	5.50	8.50	9.90	14.70
40	5.70	8.80	10.30	15.20
41	6.00	9.10	10.70	15.90
42	6.20	9.60	11.30	16.80
43	6.50	10.00	11.80	17.30
44	6.90	10.50	12.50	18.30
45	7.30	11.10	13.00	19.10
46	7.70	11.70	13.50	19.90
47	7.90	12.20	14.20	20.90
48	8.50	13.00	15.00	22.10
49	8.70	13.70	15.50	23.10
50	9.20	14.40	16.30	24.30
51	9.60	15.20	16.90	25.60
52	10.30	16.30	17.80	27.00
53	10.90	17.30	18.70	28.50
54	11.40	18.30	19.60	29.90
55	12.20	19.50	20.70	31.30
56	13.00	20.80	21.80	33.10
57	13.90	22.20	23.10	35.20
58	15.00	23.80	24.40	37.20
59	16.00	25.60	26.10	39.60
60	17.20	27.30	27.60	42.00
61	18.90	29.80	30.00	45.40
62	20.70	32.50	32.50	49.00
63	22.60	35.40	35.40	53.00
64	24.70	38.50	38.20	56.90

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Lifetime Maximum	72,000
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Home Care Level	Professional

OPTIONS:

Home Care Level	Total
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Monthly Rates

Insurance Age	Plan 1 Base Plan	Plan 2 Base Plan with Total Home Care Option	Plan 3 Base Plan with Simple Inflation Option	Plan 4 Base Plan with Simple Inflation and Total Home Care Option
65	28.10	42.90	42.90	63.10
66	31.10	46.90	47.20	68.50
67	34.50	51.40	51.60	73.80
68	38.10	55.90	56.20	79.80
69	42.10	61.00	61.10	85.90
70	46.50	66.70	66.80	93.00
71	51.70	73.20	73.30	101.10
72	57.30	80.20	80.70	110.00
73	63.30	87.80	87.90	119.20
74	70.10	96.10	96.50	129.40
75	84.20	114.70	114.40	152.50
76	92.40	124.80	124.00	164.10
77	101.40	135.90	134.90	177.20
78	111.20	147.70	145.90	190.50
79	121.80	160.70	158.70	205.80
80	133.60	174.90	171.30	220.70

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Facility Benefit Duration	Unlimited
Home Benefit	50%
Lifetime Maximum	Unlimited
Elimination Period	60 Days
Home Care Level	Professional

OPTIONS:

Home Care Level	Total
Inflation Protection	Simple Uncapped

Monthly Rates

Insurance Age	Plan 1 Base Plan	Plan 2 Base Plan with Total Home Care Option	Plan 3 Base Plan with Simple Inflation Option	Plan 4 Base Plan with Simple Inflation and Total Home Care Option
18-30	5.70	9.40	9.80	15.20
31	5.70	9.40	9.90	15.50
32	6.00	9.60	10.30	16.10
33	6.10	9.80	10.50	16.50
34	6.20	10.00	10.90	17.00
35	6.40	10.40	11.30	17.70
36	6.60	10.70	11.70	18.20
37	6.90	11.10	12.40	19.10
38	7.00	11.30	12.60	19.60
39	7.40	11.80	13.30	20.40
40	7.70	12.40	13.80	21.30
41	8.10	12.90	14.40	22.20
42	8.30	13.40	15.10	23.10
43	8.80	13.90	15.70	24.10
44	9.20	14.70	16.50	25.20
45	9.60	15.30	17.30	26.50
46	10.10	16.30	17.90	27.60
47	10.70	17.00	18.60	28.90
48	11.20	18.10	19.60	30.70
49	11.70	19.10	20.40	32.10
50	12.40	20.30	21.30	33.80
51	12.90	21.50	22.40	35.60
52	13.70	22.80	23.40	37.40
53	14.40	24.20	24.60	39.60
54	15.20	25.60	25.70	41.50
55	15.90	27.00	26.80	43.20
56	17.00	29.00	28.50	45.90
57	18.20	31.10	30.00	48.80
58	19.40	33.30	31.60	51.50
59	20.80	35.60	33.50	54.70
60	22.20	38.20	35.60	58.10
61	24.30	41.60	38.50	62.80
62	26.40	45.40	41.60	67.70
63	28.90	49.40	44.90	73.10
64	31.50	53.70	48.40	78.50

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65	35.60	59.90	54.20	87.10
66	39.50	65.50	59.40	94.60
67	43.70	71.50	64.90	101.90
68	48.20	78.00	70.60	110.40
69	53.30	85.20	77.00	118.70
70	58.80	92.80	84.00	128.20
71	65.30	101.80	92.00	139.60
72	72.00	111.20	100.90	150.90
73	79.30	121.30	109.90	163.50
74	87.40	132.20	120.00	176.50
75	104.90	157.30	142.10	207.60
76	115.20	171.10	153.90	223.30
77	126.20	186.00	167.60	241.20
78	138.10	202.20	180.60	258.80
79	151.10	219.40	196.30	279.10
80	165.40	238.20	211.60	299.00