



Short-Term Home Health Care Insurance

Agent Rates

FOR AGENT USE ONLY

UNDERWRITTEN BY:

United National Life Insurance Company of America (UNL)
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AL, AR, AZ, GA, IA, IL, IN, KS, LA, MI, MO, NE,
NV, OH, OK, SC, TN & WV

United National Life Insurance Company

Home Health Care Rate Calculation Worksheet

Step 1. Determine rates for Applicant's age

Plan

- ☐ Option A
☐ Option B
☐ Option C \$ _____

Determine rates for Spouse's age

Plan

- ☐ Option A
☐ Option B
☐ Option C \$ _____

Step 2.

Choose optional benefits *Applicant 1*

Accident and Sickness Hospitalization Rider*

Option A: Option B: Option C:

Daily Benefit Amount:
(Choose one)

- ☐ \$100 ☐ \$100 ☐ \$100
☐ \$200 ☐ \$200
☐ \$300

Benefit Period:

*(HIP option must follow base option.)

- ☐ 3 Days ☐ 3 Days ☐ 3 Days
☐ 6 Days ☐ 6 Days ☐ 6 Days

Modal Premium \$ _____

Ambulance Rider

(Maximum issue age is 80)

☐ Modal Premium \$ _____

Critical Accident Rider

- ☐ \$5,000 ☐ \$10,000

Modal Premium \$ _____

Choose optional benefits *Applicant 2*

Accident and Sickness Hospitalization Rider*

Option A: Option B: Option C:

Daily Benefit Amount:
(Choose one)

- ☐ \$100 ☐ \$100 ☐ \$100
☐ \$200 ☐ \$200
☐ \$300

Benefit Period:

*(HIP option must follow base option.)

- ☐ 3 Days ☐ 3 Days ☐ 3 Days
☐ 6 Days ☐ 6 Days ☐ 6 Days

Modal Premium \$ _____

Ambulance Rider

(Maximum issue age is 80)

☐ Modal Premium \$ _____

Critical Accident Rider

- ☐ \$5,000 ☐ \$10,000

Modal Premium \$ _____

Step 3. **SUBTOTAL Base and Riders, All Applicants** (Add total of steps 1-2 for both applicants) \$ _____

Step 4. **Return of Premium**** (If chosen, then multiply Step 3 by 1.32)

Following Return of Premium calculation, subtract \$0.53 from monthly premium amount for premium total. _____

Step 5. **Mode Factor***** (Annual 1.0, Semi-Annual 0.50, Quarterly 0.25, Monthly Bank Draft 0.08333). _____ . _____ Mode Factor

Step 6. **Total Modal Premium***** – (Multiply Step 3 by Step 4)

\$ _____

**Disregard if Return of Premium Option is not chosen

*** If monthly rates are used, stop at Step 3 or Step 4.

SHORT-TERM HOME HEALTH CARE

STEP 1: BASE PLAN MONTHLY RATES

(Includes \$1.67 monthly policy fee)

Home Health Care Daily Benefit Options			
Attained Age	Option A	Option B	Option C
	\$150 Daily Max	\$300 Daily Max	\$450 Daily Max
61 - 64	\$21.08	\$40.50	\$61.43
65 - 70	\$24.54	\$47.41	\$72.51
71 - 75	\$32.84	\$64.02	\$99.43
76 - 80	\$43.48	\$85.30	\$136.15
81 - 85	\$57.26	\$112.85	\$183.88

STEP 2: MONTHLY RIDER RATES (IF APPLICABLE)

Accident & Sickness Hospitalization Rider-Monthly Rates

Attained Age	\$100 Benefit/ Ages 61-85		\$200 Benefit/ Ages 61-85		\$300 Benefit/ Ages 61-85	
	3 DAY	6 DAY	3 DAY	6 DAY	3 DAY	6 DAY
61 - 64	\$5.38	\$7.50	\$10.77	\$15.00	\$16.15	\$22.50
65 - 70	\$5.63	\$8.12	\$11.27	\$16.25	\$16.90	\$24.37
71 - 75	\$6.71	\$9.78	\$13.42	\$19.57	\$20.12	\$29.35
76 - 80	\$8.55	\$12.55	\$17.10	\$25.10	\$25.65	\$37.65
81 - 85	\$10.20	\$15.17	\$20.40	\$30.33	\$30.60	\$45.50

Critical Accident Rider*-Monthly Rates

Issue Age	Female		Male	
	\$5,000	\$10,000	\$5,000	\$10,000
61 - 64	\$2.46	\$4.92	\$1.79	\$3.58
65 - 69	\$3.25	\$6.50	\$2.29	\$4.58
70 - 74	\$4.46	\$8.92	\$3.08	\$6.17
75 - 79	\$6.21	\$12.42	\$4.42	\$8.83
80 - 84	\$8.67	\$17.33	\$6.62	\$13.25
85	\$11.33	\$22.67	\$9.42	\$18.83

*Not available in TN.

Ambulance Rider

Issue Age	Premium
61 - 69	\$3.08
70 - 80	\$4.83

Return of Premium Rate Factor**

Issue Ages	
61 - 81	1.32

**Not available in all states.

SHORT-TERM HOME HEALTH CARE

STEP 1: BASE PLAN ANNUAL RATES

(Includes \$20.00 annual policy fee)

Home Health Care Daily Benefit Options			
Attained Age	Option A	Option B	Option C
	\$150 Daily Max	\$300 Daily Max	\$450 Daily Max
61 - 64	\$253.03	\$486.06	\$737.15
65 - 70	\$294.45	\$568.90	\$870.07
71 - 75	\$394.15	\$768.30	\$1,193.13
76 - 80	\$521.80	\$1,023.60	\$1,633.78
81 - 85	\$687.12	\$1,354.24	\$2,206.60

STEP 2: ANNUAL RIDER RATES (IF APPLICABLE)

Accident & Sickness Hospitalization Rider-Annual Rates						
Attained Age	\$100 Benefit/ Ages 61-85		\$200 Benefit/ Ages 61-85		\$300 Benefit/ Ages 61-85	
	3 DAY	6 DAY	3 DAY	6 DAY	3 DAY	6 DAY
61 - 64	\$64.60	\$90.00	\$129.20	\$180.00	\$193.80	\$270.00
65 - 70	\$67.60	\$97.50	\$135.20	\$195.00	\$202.80	\$292.50
71 - 75	\$80.50	\$117.40	\$161.00	\$234.80	\$241.50	\$352.20
76 - 80	\$102.60	\$150.60	\$205.20	\$301.20	\$307.80	\$451.80
81 - 85	\$122.40	\$182.00	\$244.80	\$364.00	\$367.20	\$546.00

Critical Accident Rider*-Annual Rates				
Issue Age	Female		Male	
	\$5,000	\$10,000	\$5,000	\$10,000
61 - 64	\$29.50	\$59.00	\$21.50	\$43.00
65 - 69	\$39.00	\$78.00	\$27.50	\$55.00
70 - 74	\$53.50	\$107.00	\$37.00	\$74.00
75 - 79	\$74.50	\$149.00	\$53.00	\$106.00
80 - 84	\$104.00	\$208.00	\$79.50	\$159.00
85	\$136.00	\$272.00	\$113.00	\$226.00

*Not available in TN.

Ambulance Rider	
Issue Age	Premium
61 - 69	\$37.00
70 - 80	\$58.00

Return of Premium Rate Factor**	
Issue Ages	
61 - 81	1.32

**Not available in all states.

Mode Factors	
Monthly	0.08333
Quarterly	0.25000
Semi Annual	0.50000
Annual	1.00000