

Short-Term Home Health Care Insurance

Agent Rates

FOR AGENT USE ONLY

UNDERWRITTEN BY:
United National Life Insurance Company of America (UNL)

UADH4-17

UNT497
CO & SD

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. Find your \$3,500 Caregiver Rate \$ _____

Find your \$3,500 Caregiver Rate \$ _____

Step 3. Add Base + Caregiver Rate \$ _____

Add Base + Caregiver Rate \$ _____

Step 4. Choose optional benefits
Applicant 1

Accident and Sickness Hospitalization Rider*

Daily Benefit Amount: (Choose one)

<input type="checkbox"/> \$100	<input type="checkbox"/> \$100	<input type="checkbox"/> \$100
	<input type="checkbox"/> \$200	<input type="checkbox"/> \$200
		<input type="checkbox"/> \$300

Benefit Period:

<input type="checkbox"/> 3 Days	<input type="checkbox"/> 3 Days	<input type="checkbox"/> 3 Days
<input type="checkbox"/> 6 Days	<input type="checkbox"/> 6 Days	<input type="checkbox"/> 6 Days

*(HIP option must follow base option.)

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*

Daily Benefit Amount: (Choose one)

<input type="checkbox"/> \$100	<input type="checkbox"/> \$100	<input type="checkbox"/> \$100
	<input type="checkbox"/> \$200	<input type="checkbox"/> \$200
		<input type="checkbox"/> \$300

Benefit Period:

<input type="checkbox"/> 3 Days	<input type="checkbox"/> 3 Days	<input type="checkbox"/> 3 Days
<input type="checkbox"/> 6 Days	<input type="checkbox"/> 6 Days	<input type="checkbox"/> 6 Days

*(HIP option must follow base option.)

Modal Premium \$ _____

Ambulance Rider
(Maximum issue age is 80)

☐ Modal Premium \$ _____

Critical Accident Rider

☐ \$5,000 ☐ \$10,000

Modal Premium \$ _____

Step 5. SUBTOTAL Base and Riders, All Applicants (Add total of steps 3-4 for both applicants) \$ _____

Return of Premium** (If chosen, then multiply Step 5 by the ROP factor)

Step 6. Following Return of Premium calculation, subtract \$0.75 for ages 61-64, \$1.00 for ages 65-69, \$1.34 for ages 70-75 from monthly premium amount for premium total.

Step 7. Mode Factor*** (Annual 1.0, Semi-Annual 0.50, Quarterly 0.25, Monthly Bank Draft 0.08333).

_____ . _____ Mode Factor

Step 8. Total Modal Premium*** – (Multiply Step 6 by Step 7)

\$ _____

**Disregard if Return of Premium Option is not chosen

*** If monthly rates are used, stop at Step 5 or Step 6.

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 \$150 Daily Max	Option B \$300 Daily Max	Option C \$450 Daily Max
61-64	\$19.41	\$37.16	\$56.28
65-70	\$22.57	\$43.46	\$66.40
71-75	\$30.16	\$58.65	\$91.01
76-80	\$39.89	\$78.11	\$124.58
81-85	\$52.48	\$103.30	\$168.23

*Base Plan Rates are Attained Age and Increase to the next age band your client ages into.

STEP 2: FIND YOUR MONTHLY \$3,500 CAREGIVER RATES

Caregiver Rates are Issue Age and do NOT increase as your client ages.

Caregiver Monthly Rates			
Issue Age	Monthly	Issue Age	Monthly
61	\$4.51	73	\$10.66
62	\$4.81	74	\$11.40
63	\$5.16	75	\$12.13
64	\$5.53	76	\$12.89
65	\$5.94	77	\$13.63
66	\$6.39	78	\$14.36
67	\$6.88	79	\$15.09
68	\$7.42	80	\$15.59
69	\$8.01	81	\$16.23
70	\$8.62	82	\$16.83
71	\$9.26	83	\$17.40
72	\$9.95	84+	\$17.95

STEP 3: ADD STEP 1 + 2 TO DETERMINE YOUR BASE RATE.

STEP 4: 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	\$4.93	\$6.87	\$9.87	\$13.75	\$14.80	\$20.62
65 - 70	\$5.17	\$7.45	\$10.33	\$14.90	\$15.50	\$22.35
71 - 75	\$6.15	\$8.97	\$12.30	\$17.93	\$18.45	\$26.90
76 - 80	\$7.84	\$11.51	\$15.68	\$23.02	\$23.52	\$34.52
81 - 85	\$9.35	\$13.90	\$18.70	\$27.80	\$28.05	\$41.70

Ambulance Rider

Issue Age	Premium
61 - 69	\$2.83
70 - 80	\$4.42

Return of Premium Rate Factor

Issue Ages	
60-64	0.45
65-69	0.60
70-75	0.80

Critical Accident Rider-Monthly Rates

Issue Age	Female		Male	
	\$5,000	\$10,000	\$5,000	\$10,000
61-64	\$2.34	\$4.67	\$1.70	\$3.41
65-69	\$3.09	\$6.17	\$2.18	\$4.36
70-74	\$4.24	\$8.47	\$2.93	\$5.86
75-79	\$5.90	\$11.80	\$4.20	\$8.39
80-84	\$8.23	\$16.47	\$6.30	\$12.59
85	\$10.77	\$21.53	\$8.95	\$17.89

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 \$150 Daily Max	Option B \$300 Daily Max	Option C \$450 Daily Max
61-64	\$232.93	\$445.86	\$675.30
65-70	\$270.78	\$521.56	\$796.78
71-75	\$361.92	\$703.84	\$1,092.10
76-80	\$478.63	\$937.26	\$1,494.98
81-85	\$629.79	\$1,239.58	\$2,018.75

*Base Plan Rates are Attained Age and Increase to the next age band your client ages into.

STEP 2: FIND YOUR ANNUAL \$3,500 CAREGIVER RATES

Caregiver Rates are Issue Age and do NOT increase as your client ages.

Caregiver Annual Rates			
Issue Age	Annual	Issue Age	Annual
61	\$54.08	73	\$127.93
62	\$57.75	74	\$136.85
63	\$61.95	75	\$145.60
64	\$66.33	76	\$154.70
65	\$71.23	77	\$163.63
66	\$76.65	78	\$172.38
67	\$82.60	79	\$181.13
68	\$89.08	80	\$187.08
69	\$96.08	81	\$194.78
70	\$103.43	82	\$201.95
71	\$111.13	83	\$208.78
72	\$119.35	84+	\$215.43

STEP 3: ADD STEP 1 + 2 TO DETERMINE YOUR BASE RATE.

STEP 4: 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	\$59.20	\$82.50	\$118.40	\$165.00	\$177.60	\$247.50
65 - 70	\$62.00	\$89.40	\$124.00	\$178.80	\$186.00	\$268.20
71 - 75	\$73.80	\$107.60	\$147.60	\$215.20	\$221.40	\$322.80
76 - 80	\$94.10	\$138.10	\$188.20	\$276.20	\$282.30	\$414.30
81 - 85	\$112.20	\$166.80	\$224.40	\$333.60	\$336.60	\$500.40

Ambulance Rider	
Issue Age	Premium
61 - 69	\$34.00
70 - 80	\$53.00

Mode Factors	
Monthly	0.08333
Quarterly	0.25000
Semi Annual	0.50000
Annual	1.00000

Critical Accident Rider-Annual Rates				
Issue Age	Female		Male	
	\$5,000	\$10,000	\$5,000	\$10,000
61-64	\$28.05	\$56.10	\$20.45	\$40.90
65-69	\$37.05	\$74.10	\$26.15	\$52.30
70-74	\$50.85	\$101.70	\$35.15	\$70.30
75-79	\$70.80	\$141.60	\$50.35	\$100.70
80-84	\$98.80	\$197.60	\$75.55	\$151.10
85	\$129.20	\$258.40	\$107.35	\$214.70

Return of Premium Rate Factor	
Issue Ages	
60-64	0.45
65-69	0.60
70-75	0.80