



# UCT's Short-Term Care Rate Guide

For agent use only

## Individual Gross Annual Premiums per \$10 Daily Benefit

(Multiply the Daily Benefit by .10 to determine the factor)

To determine the premium for the Base Policy with the Home Health Care Rider, add the respective premiums together.

### Product Options

<b>Issue Ages:</b>	50-85	
<b>Daily Benefit:</b>	\$50 - \$300 (rates based on units of \$10)	
<b>Benefit Period:</b>	100, 200 or 360 Days	
<b>Lifetime Maximum Benefit Period:</b>	100, 200 or 360 Days multiplied by 3	
<b>Available Riders:</b>	<ul style="list-style-type: none"> <li>• Home Health Care Rider</li> <li>• 5% Compound Inflation Rider</li> <li>• Guaranteed Purchase Rider – (automatically added at no cost if Inflation Rider is declined)</li> </ul>	
<b>Available Discounts:</b>	10% Spousal Discount-Both issued 5% Spousal Discount-One Issued 10% Non-Tobacco Discount	
<b>Elimination Period:</b>	0 Days	Factor: 1.15
	20 Days	Factor: 1.00
<b>Modal Factors:</b>	Annual	1.0
	Semi-Annual	0.5
	Quarterly	0.25
	Monthly	0.08333
	List Bill	0.1000

ISSUE AGE	100 DAYS		200 DAYS		360 DAYS		5% COMPOUND INFLATION RIDER FACTOR
	BASE POLICY	HHC RIDER	BASE POLICY	HHC RIDER	BASE POLICY	HHC RIDER	
50-54	7.0	4.0	13.0	6.0	23.0	11.0	3.71
55-59	8.0	4.0	15.0	8.0	27.0	13.0	3.30
60	10.0	5.0	18.0	10.0	31.0	15.0	3.03
61	11.0	6.0	21.0	11.0	35.0	18.0	2.87
62	13.0	7.0	23.0	12.0	39.0	20.0	2.80
63	14.0	7.0	25.0	13.0	43.0	22.0	2.69
64	15.0	8.0	27.0	14.0	47.0	24.0	2.60
65	18.0	9.0	30.0	15.0	52.0	26.0	2.49
66	19.0	9.0	32.0	16.0	56.0	28.0	2.41
67	20.0	10.0	33.0	17.0	58.0	29.0	2.30
68	21.0	10.0	36.0	18.0	62.0	31.0	2.26
69	22.0	11.0	38.0	19.0	66.0	33.0	2.19
70	23.0	11.0	40.0	21.0	70.0	35.0	2.12
71	26.0	13.0	45.0	23.0	78.0	39.0	2.03
72	29.0	14.0	50.0	25.0	87.0	43.0	1.99
73	32.0	16.0	55.0	28.0	95.0	47.0	1.90
74	35.0	18.0	62.0	31.0	107.0	54.0	1.79
75	39.0	20.0	69.0	35.0	119.0	60.0	1.68
76	43.0	22.0	76.0	38.0	132.0	66.0	1.60
77	47.0	24.0	83.0	42.0	144.0	72.0	1.53
78	52.0	26.0	91.0	45.0	157.0	78.0	1.49
79	56.0	28.0	97.0	49.0	169.0	84.0	1.46
80	60.0	30.0	105.0	53.0	181.0	91.0	1.44
81	64.0	32.0	111.0	56.0	194.0	97.0	1.42
82	69.0	35.0	121.0	60.0	210.0	105.0	1.38
83	75.0	38.0	131.0	66.0	227.0	113.0	1.36
84	81.0	41.0	143.0	71.0	247.0	124.0	1.32
85	89.0	44.0	154.0	78.0	268.0	134.0	1.30

Benefits vary by state. Not available in all states.

### Premium and Benefit Calculator

Calculate rates quickly and easily at [www.uct.org/UctAgent/ToolsAndResources/StcCalculator.html](http://www.uct.org/UctAgent/ToolsAndResources/StcCalculator.html)

<b>Maximum Daily Benefit Amount</b> Choose Amount: \$50 to \$300 \$ _____ Multiply by .10 and enter factor.	<b>Maximum Benefit Period</b> Choose one: <input type="checkbox"/> 100 days <input type="checkbox"/> 200 days <input type="checkbox"/> 360 days Age: _____ <i>(See rate chart for premium)</i>	<b>Choose Optional Riders</b> <input type="checkbox"/> <b>Home Health Care Rider (HHC)</b> <i>(See rate chart for premium)</i> Enter factor 0 if not chosen		<b>One Time Elimination Period</b> Choose one: <input type="checkbox"/> 0 days: enter factor 1.15 OR <input type="checkbox"/> 20 days: enter factor 1.0	<b>Less Discounts</b> <input type="checkbox"/> 10% discount for both spouses approved: enter factor .90 OR <input type="checkbox"/> 5% discount for one spouse approved: enter factor .95		<input type="checkbox"/> 10% discount for Non-Tobacco: enter factor .90
		<input type="checkbox"/> <b>5% Compound Inflation Protection Rider</b> <i>(See rate chart for factor)</i> OR <input type="checkbox"/> <b>Guaranteed Purchase Option Rider:</b> Enter 1.0	F.		G.		
A.	B.	C.	D.	E.	F.	G.	

**Calculate your premium** – Enter the figures from above. *(Premiums will vary according to the benefit amounts you select)*

$$\text{A} \times (\text{B} + \text{C}) \times \text{D} \times \text{E} \times \text{F} \times \text{G} = \$ \text{Total Annual Premium}$$

**Calculate your benefits** – Enter the figures from above.

$$\text{\$ Maximum Daily Benefit Amount (A)} \times \text{Maximum Benefit Period (B) Days} = \text{\$ Your maximum benefit per period of care}$$

$$\text{Maximum Benefit Period (B) Days} \times 3 = \text{Lifetime Maximum Benefit Period Days}$$

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To determine the premium for the Base Policy with the Home Health Care Rider, add the respective premiums together.

Product Options	
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<b>Daily Benefit:</b>	\$50 - \$300 (rates based on units of \$10)
<b>Benefit Period:</b>	100, 200 or 360 Days
<b>Lifetime Maximum Benefit Period:</b>	100, 200 or 360 Days multiplied by 3
<b>Available Riders:</b>	<ul style="list-style-type: none"> <li>Home Health Care Rider</li> <li>5% Compound Inflation Rider</li> <li>Guaranteed Purchase Rider – (automatically added at no cost if Inflation Rider is declined)</li> </ul>
<b>Available Discounts:</b>	10% Spousal Discount-Both issued 5% Spousal Discount-One Issued 10% Non-Tobacco Discount
<b>Elimination Period:</b>	0 Days Factor: 1.15 20 Days Factor: 1.00
<b>Modal Factors:</b>	Annual 1.0 Semi-Annual 0.5 Quarterly 0.25 Monthly 0.08333 List Bill 0.1000

ISSUE AGE	100 DAYS		200 DAYS		360 DAYS		5% COMPOUND INFLATION RIDER FACTOR
	BASE POLICY	HHC RIDER	BASE POLICY	HHC RIDER	BASE POLICY	HHC RIDER	
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61	11.0	6.0	21.0	11.0	35.0	18.0	2.87
62	13.0	7.0	23.0	12.0	39.0	20.0	2.80
63	14.0	7.0	25.0	13.0	43.0	22.0	2.69
64	15.0	8.0	27.0	14.0	47.0	24.0	2.60
65	18.0	9.0	30.0	15.0	52.0	26.0	2.49
66	19.0	9.0	32.0	16.0	56.0	28.0	2.41
67	20.0	10.0	33.0	17.0	58.0	29.0	2.30
68	21.0	10.0	36.0	18.0	62.0	31.0	2.26
69	22.0	11.0	38.0	19.0	66.0	33.0	2.19
70	23.0	11.0	40.0	21.0	70.0	35.0	2.12
71	26.0	13.0	45.0	23.0	78.0	39.0	2.03
72	29.0	14.0	50.0	25.0	87.0	43.0	1.99
73	32.0	16.0	55.0	28.0	95.0	47.0	1.90
74	35.0	18.0	62.0	31.0	107.0	54.0	1.79
75	39.0	20.0	69.0	35.0	119.0	60.0	1.68
76	43.0	22.0	76.0	38.0	132.0	66.0	1.60
77	47.0	24.0	83.0	42.0	144.0	72.0	1.53
78	52.0	26.0	91.0	45.0	157.0	78.0	1.49
79	56.0	28.0	97.0	49.0	169.0	84.0	1.46
80	60.0	30.0	105.0	53.0	181.0	91.0	1.44
81	64.0	32.0	111.0	56.0	194.0	97.0	1.42
82	69.0	35.0	121.0	60.0	210.0	105.0	1.38
83	75.0	38.0	131.0	66.0	227.0	113.0	1.36
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85	89.0	44.0	154.0	78.0	268.0	134.0	1.30

Benefits vary by state. Not available in all states.

### Sample Calculation for age 65 / Benefit Period 200 Days with Home Health Care Rider

Calculate rates quickly and easily at [www.uct.org/UctAgent/ToolsAndResources/StcCalculator.html](http://www.uct.org/UctAgent/ToolsAndResources/StcCalculator.html)

<b>Maximum Daily Benefit Amount</b> Choose Amount: \$50 to \$300 \$ <u>75</u>	<b>Maximum Benefit Period</b> Choose one: <input type="checkbox"/> 100 days <input checked="" type="checkbox"/> 200 days <input type="checkbox"/> 360 days	<b>Choose Optional Riders</b>		<b>One Time Elimination Period</b> Choose one: <input type="checkbox"/> 0 days: enter factor 1.15 OR <input checked="" type="checkbox"/> 20 days: enter factor 1.0	<b>Less Discounts</b>	
Multiply by .10 and enter factor. A. <u>7.5</u>	Age: <u>65</u> (See rate chart for premium) B. <u>30</u>	<input checked="" type="checkbox"/> Home Health Care Rider (HHC) (See rate chart for premium) Enter factor if not chosen C. <u>15</u>	<input type="checkbox"/> 5% Compound Inflation Protection Rider (See rate chart for factor) OR <input checked="" type="checkbox"/> Guaranteed Purchase Option Rider: Enter 1.0 D. <u>1</u>	<input type="checkbox"/> 0 days: enter factor 1.15 OR <input checked="" type="checkbox"/> 20 days: enter factor 1.0 E. <u>1</u>	<input checked="" type="checkbox"/> 10% discount for both spouses approved: enter factor .90 OR <input type="checkbox"/> 5% discount for one spouse approved: enter factor .95 F. <u>.90</u>	<input checked="" type="checkbox"/> 10% discount for Non-Tobacco: enter factor .90 G. <u>.90</u>

**Calculate your premium** – Enter the figures from above. (Premiums will vary according to the benefit amounts you select)

$$\begin{matrix}
 \underline{7.5} & \times & \underline{45} & \times & \underline{1} & \times & \underline{1} & \times & \underline{.90} & \times & \underline{.90} & = & \$ & \underline{273.38} \\
 \text{A} & & \text{(B+C)} & & \text{D} & & \text{E} & & \text{F} & & \text{G} & & & \text{Total Annual Premium}
 \end{matrix}$$

**Calculate your benefits** – Enter the figures from above.

$$\begin{matrix}
 \$ & \underline{75} & \times & \underline{200} & \text{Days} & = & \$ & \underline{15,000} \\
 \text{Maximum Daily Benefit Amount (A)} & & & \text{Maximum Benefit Period (B)} & & & \text{Your maximum benefit per period of care}
 \end{matrix}$$
  

$$\begin{matrix}
 \underline{200} & \text{Days} & \times & 3 & = & \underline{600} & \text{Days} \\
 \text{Maximum Benefit Period (B)} & & & & & & \text{Lifetime Maximum Benefit Period}
 \end{matrix}$$