

**PREMIUM CALCULATION**

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**Policy Benefits You Have Chosen**

Prepared For: **Scott**  
 State: **WA**  
 Age: **55** Birthdate:

Prepared For: **Simonne**  
 State: **WA**  
 Age: **50** Birthdate:

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 Partnership Plan **Yes**  
 Policy Type **Comprehensive**  
 Gender **Male**  
 Underwriting Class **Sel Prefrd**  
 Facility Daily Benefit **\$140**  
 Facility Benefit Period **6 Years**  
 Pool of Money **\$306,600.00**  
 Elimination Period **90 Days**  
 Inflation Protection **3% Compound**  
 Nonforfeiture **Contingent**  
 Restoration of Benefit **No**  
 Waiver of HHC EP **No**  
 Enhanced Elim Period **No**  
 Monthly Home Care **Daily**  
 Survivorship **No**  
 Shared Care **No**  
 Shared 3rd Pool **None**  
 Joint Waiver of Premium **No**  
 Partner Discount **Both Insured**  
 Group Discount **No**  
 Loyalty Credit **No**  
 Payment Option **Lifetime**  
 Modal Factor **Annual**

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 Partnership Plan **Yes**  
 Policy Type **Comprehensive**  
 Gender **Female**  
 Underwriting Class **Ultra Prefrd**  
 Facility Daily Benefit **\$140**  
 Facility Benefit Period **6 Years**  
 Pool of Money **\$306,600.00**  
 Elimination Period **90 Days**  
 Inflation Protection **3% Compound**  
 Nonforfeiture **Contingent**  
 Restoration of Benefit **No**  
 Waiver of HHC EP **No**  
 Enhanced Elim Period **No**  
 Monthly Home Care **Daily**  
 Survivorship **No**  
 Shared Care **No**  
 Shared 3rd Pool **None**  
 Joint Waiver of Premium **No**  
 Partner Discount **Both Insured**  
 Group Discount **No**  
 Loyalty Credit **No**  
 Payment Option **Lifetime**  
 Modal Factor **Annual**

**Premium \$1,990.69**

**Total Premium:**

**\$3,594.52**

**Premium**

**\$1,603.84**

**Mass Mutual, Signature Care 500 2013** is a tax qualified plan.

This is an independent illustration not provided or approved by the issuers of the policies shown. Use the Insurer's forms and software for Insurer-approved quotes and applications.

Cost of Waiting

If you decide that long term care insurance is the right decision to protect your assets and your family's financial future, the best time to buy it is now. By doing this:

You avoid the risk of needing care you will have to pay for yourself.

You avoid the risk of developing a condition that would make you uninsurable later.

You pay lower premiums now, rather than paying higher premiums later.

The tables below show the cost of waiting and buying later, assuming that premiums do not change, you remain insurable, and you buy the coverage shown in this illustration. The Daily Benefit is increased 5% for each year you wait, to cover the increased cost of care over time.

Client: **Scott** Age: **55** DOB: State: **WA**

Partnership Plan	<b>Yes</b>	Enhanced Elim Period	<b>No</b>
Policy Type	<b>Comprehensive</b>	Monthly Home Care	<b>Daily</b>
Gender	<b>Male</b>	Survivorship	<b>No</b>
Underwriting Class	<b>Sel Prefrd</b>	Shared Care	<b>No</b>
Facility Daily Benefit	<b>\$140</b>	Shared 3rd Pool	<b>None</b>
Facility Benefit Period	<b>6 Years</b>	Joint Waiver of Premium	<b>No</b>
Pool of Money	<b>\$306,600.00</b>	Partner Discount	<b>Both Insured</b>
Elimination Period	<b>90 Days</b>	Group Discount	<b>No</b>
Inflation Protection	<b>3% Compound</b>	Loyalty Credit	<b>No</b>
Nonforfeiture	<b>Contingent</b>	Payment Option	<b>Lifetime</b>
Restoration of Benefit	<b>No</b>	Modal Factor	<b>Annual</b>
Waiver of HHC EP	<b>No</b>		

Age at Purchase	Facility Daily Benefit	Premium	Premiums Paid to Age 90	Cost of Waiting
55	\$140	\$1,991	\$69,674	\$0
57	\$154	\$2,283	\$75,354	\$5,680
59	\$170	\$2,721	\$84,364	\$14,690
61	\$188	\$3,187	\$92,419	\$22,745
63	\$207	\$3,877	\$104,678	\$35,004
65	\$228	\$4,839	\$120,971	\$51,297

Client: **Simonne** Age: **50** DOB: State: **WA**

Partnership Plan	<b>Yes</b>	Enhanced Elim Period	<b>No</b>
Policy Type	<b>Comprehensive</b>	Monthly Home Care	<b>Daily</b>
Gender	<b>Female</b>	Survivorship	<b>No</b>
Underwriting Class	<b>Ultra Prefrd</b>	Shared Care	<b>No</b>
Facility Daily Benefit	<b>\$140</b>	Shared 3rd Pool	<b>None</b>
Facility Benefit Period	<b>6 Years</b>	Joint Waiver of Premium	<b>No</b>
Pool of Money	<b>\$306,600.00</b>	Partner Discount	<b>Both Insured</b>
Elimination Period	<b>90 Days</b>	Group Discount	<b>No</b>
Inflation Protection	<b>3% Compound</b>	Loyalty Credit	<b>No</b>
Nonforfeiture	<b>Contingent</b>	Payment Option	<b>Lifetime</b>
Restoration of Benefit	<b>No</b>	Modal Factor	<b>Annual</b>
Waiver of HHC EP	<b>No</b>		

Age at Purchase	Facility Daily Benefit	Premium	Premiums Paid to Age 90	Cost of Waiting
50	\$140	\$1,604	\$64,153	\$0
52	\$154	\$1,827	\$69,443	\$5,290
54	\$170	\$2,128	\$76,606	\$12,453
56	\$188	\$2,452	\$83,382	\$19,228
58	\$207	\$2,871	\$91,874	\$27,721
60	\$228	\$3,390	\$101,710	\$37,557

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## Mass Mutual, Signature Care MM-500 2013

### Break-Even Analysis

Some clients considering long term care insurance are concerned that the benefits of coverage may not be worth the cost in premiums paid. This illustration shows how the benefits you receive when you need care compare with the premiums you have paid up to that time.

Specifically the table below shows the number of days of receiving benefits until you have received back all the money you have paid in premiums. At this point you have "broken even" and any further benefits are over and above your cost of insurance.

If you have chosen an inflation protection or benefit increase option, then the table uses your maximum daily benefit at the time you begin to receive benefits, which is higher than your initial daily benefit.

**Client:** Scott **Age:** 55 **DOB:** **State:** WA

Partnership Plan	<b>Yes</b>	Enhanced Elim Period	<b>No</b>
Policy Type	<b>Comprehensive</b>	Monthly Home Care	<b>Daily</b>
Gender	<b>Male</b>	Survivorship	<b>No</b>
Underwriting Class	<b>Sel Prefrd</b>	Shared Care	<b>No</b>
Facility Daily Benefit	<b>\$140</b>	Shared 3rd Pool	<b>None</b>
Facility Benefit Period	<b>6 Years</b>	Joint Waiver of Premium	<b>No</b>
Pool of Money	<b>\$306,600.00</b>	Partner Discount	<b>Both Insured</b>
Elimination Period	<b>90 Days</b>	Group Discount	<b>No</b>
Inflation Protection	<b>3% Compound</b>	Loyalty Credit	<b>No</b>
Nonforfeiture	<b>Contingent</b>	Payment Option	<b>Lifetime</b>
Restoration of Benefit	<b>No</b>	Modal Factor	<b>Annual</b>
Waiver of HHC EP	<b>No</b>		

**Premium** **\$1,990.69**

**Years Premium Paid**

1  
5  
10  
15  
20  
25

**Days to Recover Premiums Paid**

14  
67  
125  
175  
218  
255

**Client:** Simonne **Age:** 50 **DOB:** **State:** WA

Partnership Plan	<b>Yes</b>	Enhanced Elim Period	<b>No</b>
Policy Type	<b>Comprehensive</b>	Monthly Home Care	<b>Daily</b>
Gender	<b>Female</b>	Survivorship	<b>No</b>
Underwriting Class	<b>Ultra Prefrd</b>	Shared Care	<b>No</b>
Facility Daily Benefit	<b>\$140</b>	Shared 3rd Pool	<b>None</b>
Facility Benefit Period	<b>6 Years</b>	Joint Waiver of Premium	<b>No</b>
Pool of Money	<b>\$306,600.00</b>	Partner Discount	<b>Both Insured</b>
Elimination Period	<b>90 Days</b>	Group Discount	<b>No</b>
Inflation Protection	<b>3% Compound</b>	Loyalty Credit	<b>No</b>
Nonforfeiture	<b>Contingent</b>	Payment Option	<b>Lifetime</b>
Restoration of Benefit	<b>No</b>	Modal Factor	<b>Annual</b>
Waiver of HHC EP	<b>No</b>		

**Premium** **\$1,603.84**

**Years Premium Paid**

1  
5  
10  
15  
20  
25

**Days to Recover Premiums Paid**

11  
54  
101  
141  
176  
205

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**Mass Mutual, Signature Care MM-500 2013**

**Inflation Protection - 3% Compound**

Compound inflation protection is an automatic annual increase in your policy's Daily Benefit and Lifetime Benefit. The annual increase is 3% of your current Benefit, added to your benefit each year. Increases to Lifetime Benefit may be net of any claims paid.

Long-term care costs have increased in the past, and are expected to increase in the future. Inflation protection increases your benefits to keep up with the increased cost of care.

Cost increases are compounded over time; the increase each year is a percentage of last year's cost. Compound Inflation Protection increases benefits each year by a percentage of the previous year's benefit, and thus is more likely to keep up with long-term care costs, compared to simple annual increases.

**Client:** Scott **Age:** 55 **DOB:** **State:** WA

Partnership Plan	Yes	Enhanced Elim Period	No
Policy Type	<b>Comprehensive</b>	Monthly Home Care	<b>Daily</b>
Gender	<b>Male</b>	Survivorship	<b>No</b>
Underwriting Class	<b>Sel Prefrd</b>	Shared Care	<b>No</b>
Facility Daily Benefit	<b>\$140</b>	Shared 3rd Pool	<b>None</b>
Facility Benefit Period	<b>6 Years</b>	Joint Waiver of Premium	<b>No</b>
Pool of Money	<b>\$306,600.00</b>	Partner Discount	<b>Both Insured</b>
Elimination Period	<b>90 Days</b>	Group Discount	<b>No</b>
Inflation Protection	<b>3% Compound</b>	Loyalty Credit	<b>No</b>
Nonforfeiture	<b>Contingent</b>	Payment Option	<b>Lifetime</b>
Restoration of Benefit	<b>No</b>	Modal Factor	<b>Annual</b>
Waiver of HHC EP	<b>No</b>		

<u>Age</u>	<u>Facility Daily Benefit</u>	<u>Lifetime Benefit</u>	<u>Premium</u>
55	\$140.00	\$306,600.00	\$1,990.69
58	\$152.98	\$335,030.20	\$1,990.69
61	\$167.17	\$366,096.60	\$1,990.69
64	\$182.67	\$400,043.70	\$1,990.69
67	\$199.61	\$437,138.60	\$1,990.69
70	\$218.12	\$477,673.20	\$1,990.69
73	\$238.34	\$521,966.40	\$1,990.69
76	\$260.44	\$570,366.90	\$1,990.69
79	\$284.59	\$623,255.40	\$1,990.69
82	\$310.98	\$681,048.00	\$1,990.69
85	\$339.82	\$744,199.60	\$1,990.69
88	\$371.33	\$813,207.10	\$1,990.69
91	\$405.76	\$888,613.40	\$1,990.69

**Client:** Simonne **Age:** 50 **DOB:** **State:** WA

Partnership Plan	Yes	Enhanced Elim Period	No
Policy Type	<b>Comprehensive</b>	Monthly Home Care	<b>Daily</b>
Gender	<b>Female</b>	Survivorship	<b>No</b>
Underwriting Class	<b>Ultra Prefrd</b>	Shared Care	<b>No</b>
Facility Daily Benefit	<b>\$140</b>	Shared 3rd Pool	<b>None</b>
Facility Benefit Period	<b>6 Years</b>	Joint Waiver of Premium	<b>No</b>
Pool of Money	<b>\$306,600.00</b>	Partner Discount	<b>Both Insured</b>
Elimination Period	<b>90 Days</b>	Group Discount	<b>No</b>
Inflation Protection	<b>3% Compound</b>	Loyalty Credit	<b>No</b>
Nonforfeiture	<b>Contingent</b>	Payment Option	<b>Lifetime</b>
Restoration of Benefit	<b>No</b>	Modal Factor	<b>Annual</b>
Waiver of HHC EP	<b>No</b>		

<u>Age</u>	<u>Facility Daily Benefit</u>	<u>Lifetime Benefit</u>	<u>Premium</u>
50	\$140.00	\$306,600.00	\$1,603.84
53	\$152.98	\$335,030.20	\$1,603.84
56	\$167.17	\$366,096.60	\$1,603.84
59	\$182.67	\$400,043.70	\$1,603.84
62	\$199.61	\$437,138.60	\$1,603.84
65	\$218.12	\$477,673.20	\$1,603.84
68	\$238.34	\$521,966.40	\$1,603.84
71	\$260.44	\$570,366.90	\$1,603.84
74	\$284.59	\$623,255.40	\$1,603.84
77	\$310.98	\$681,048.00	\$1,603.84
80	\$339.82	\$744,199.60	\$1,603.84
83	\$371.33	\$813,207.10	\$1,603.84
86	\$405.76	\$888,613.40	\$1,603.84
89	\$443.38	\$971,011.90	\$1,603.84

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**Mass Mutual, Signature Care MM-500 2013**

**Inflation Protection - 5% Compound**

Compound inflation protection provides an automatic annual increase in your policy's Daily and Lifetime Benefit. The annual increase is 5% of your current Benefit, added to your benefit each year. Increases to Lifetime Benefit may be net of any claims paid.

Long-term care costs have increased in the past, and are expected to increase in the future. Inflation protection increases your benefits to keep up with the increased cost of care.

Cost increases are compounded over time; the increase each year is a percentage of last year's cost. Compound Inflation Protection increases your benefits each year by a percentage of the previous year's benefit, and thus is more likely to keep up with long-term care costs, compared to simple annual increases.

**Client:** Scott **Age:** 55 **DOB:** **State:** WA

Partnership Plan	Yes	Enhanced Elim Period	No
Policy Type	Comprehensive	Monthly Home Care	Daily
Gender	Male	Survivorship	No
Underwriting Class	Sel Prefrd	Shared Care	No
Facility Daily Benefit	\$140	Shared 3rd Pool	None
Facility Benefit Period	6 Years	Joint Waiver of Premium	No
Pool of Money	\$306,600.00	Partner Discount	Both Insured
Elimination Period	90 Days	Group Discount	No
Inflation Protection	5% Compound	Loyalty Credit	No
Nonforfeiture	Contingent	Payment Option	Lifetime
Restoration of Benefit	No	Modal Factor	Annual
Waiver of HHC EP	No		

<u>Age</u>	<u>Facility Daily Benefit</u>	<u>Lifetime Benefit</u>	<u>Premium</u>
55	\$140.00	\$306,600.00	\$3,603.62
58	\$162.07	\$354,927.90	\$3,603.62
61	\$187.61	\$410,873.50	\$3,603.62
64	\$217.19	\$475,637.60	\$3,603.62
67	\$251.42	\$550,610.00	\$3,603.62
70	\$291.05	\$637,400.00	\$3,603.62
73	\$336.93	\$737,870.30	\$3,603.62
76	\$390.04	\$854,177.20	\$3,603.62
79	\$451.51	\$988,816.90	\$3,603.62
82	\$522.68	\$1,144,679.00	\$3,603.62
85	\$605.07	\$1,325,110.00	\$3,603.62
88	\$700.45	\$1,533,980.00	\$3,603.62
91	\$810.86	\$1,775,774.00	\$3,603.62

**Client:** Simonne **Age:** 50 **DOB:** **State:** WA

Partnership Plan	Yes	Enhanced Elim Period	No
Policy Type	Comprehensive	Monthly Home Care	Daily
Gender	Female	Survivorship	No
Underwriting Class	Ultra Prefrd	Shared Care	No
Facility Daily Benefit	\$140	Shared 3rd Pool	None
Facility Benefit Period	6 Years	Joint Waiver of Premium	No
Pool of Money	\$306,600.00	Partner Discount	Both Insured
Elimination Period	90 Days	Group Discount	No
Inflation Protection	5% Compound	Loyalty Credit	No
Nonforfeiture	Contingent	Payment Option	Lifetime
Restoration of Benefit	No	Modal Factor	Annual
Waiver of HHC EP	No		

<u>Age</u>	<u>Facility Daily Benefit</u>	<u>Lifetime Benefit</u>	<u>Premium</u>
50	\$140.00	\$306,600.00	\$3,161.98
53	\$162.07	\$354,927.90	\$3,161.98
56	\$187.61	\$410,873.50	\$3,161.98
59	\$217.19	\$475,637.60	\$3,161.98
62	\$251.42	\$550,610.00	\$3,161.98
65	\$291.05	\$637,400.00	\$3,161.98
68	\$336.93	\$737,870.30	\$3,161.98
71	\$390.04	\$854,177.20	\$3,161.98
74	\$451.51	\$988,816.90	\$3,161.98
77	\$522.68	\$1,144,679.00	\$3,161.98
80	\$605.07	\$1,325,110.00	\$3,161.98
83	\$700.45	\$1,533,980.00	\$3,161.98
86	\$810.86	\$1,775,774.00	\$3,161.98
89	\$938.67	\$2,055,680.00	\$3,161.98

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**Mass Mutual, Signature Care MM-500 2013**

**Alternative Premiums**

This shows premiums for different choices of benefit levels. You can use the information to choose the best combination of benefits for your policy, given the costs.

**Client:** Scott **Age:** 55 **DOB:** **State:** WA

Partnership Plan	<b>Yes</b>	Enhanced Elim Period	<b>No</b>
Policy Type	<b>Comprehensive</b>	Monthly Home Care	<b>Daily</b>
Gender	<b>Male</b>	Survivorship	<b>No</b>
Underwriting Class	<b>Sel Prefrd</b>	Shared Care	<b>No</b>
Facility Daily Benefit	<b>\$140</b>	Shared 3rd Pool	<b>None</b>
Facility Benefit Period	<b>6 Years</b>	Joint Waiver of Premium	<b>No</b>
Pool of Money	<b>\$306,600.00</b>	Partner Discount	<b>Both Insured</b>
Elimination Period	<b>90 Days</b>	Group Discount	<b>No</b>
Inflation Protection	<b>3% Compound</b>	Loyalty Credit	<b>No</b>
Nonforfeiture	<b>Contingent</b>	Payment Option	<b>Lifetime</b>
Restoration of Benefit	<b>No</b>	Modal Factor	<b>Annual</b>
Waiver of HHC EP	<b>No</b>		

**Premiums**

Facility Benefit Period	Elimination Period			
	30 Days	60 Days	90 Days	180 Days
<b>2 Years</b>	\$1,495.52	\$1,370.90	\$1,246.27	\$1,121.64
<b>3 Years</b>	\$1,830.09	\$1,677.58	\$1,525.08	\$1,372.57
<b>4 Years</b>	\$2,050.91	\$1,880.00	\$1,709.09	\$1,538.18
<b>5 Years</b>	\$2,251.65	\$2,064.01	\$1,876.37	\$1,688.74
<b>6 Years</b>	\$2,388.82	\$2,189.75	\$1,990.69	\$1,791.62

**Client:** Simonne **Age:** 50 **DOB:** **State:** WA

Partnership Plan	<b>Yes</b>	Enhanced Elim Period	<b>No</b>
Policy Type	<b>Comprehensive</b>	Monthly Home Care	<b>Daily</b>
Gender	<b>Female</b>	Survivorship	<b>No</b>
Underwriting Class	<b>Ultra Prefrd</b>	Shared Care	<b>No</b>
Facility Daily Benefit	<b>\$140</b>	Shared 3rd Pool	<b>None</b>
Facility Benefit Period	<b>6 Years</b>	Joint Waiver of Premium	<b>No</b>
Pool of Money	<b>\$306,600.00</b>	Partner Discount	<b>Both Insured</b>
Elimination Period	<b>90 Days</b>	Group Discount	<b>No</b>
Inflation Protection	<b>3% Compound</b>	Loyalty Credit	<b>No</b>
Nonforfeiture	<b>Contingent</b>	Payment Option	<b>Lifetime</b>
Restoration of Benefit	<b>No</b>	Modal Factor	<b>Annual</b>
Waiver of HHC EP	<b>No</b>		

**Premiums**

Facility Benefit Period	Elimination Period			
	30 Days	60 Days	90 Days	180 Days
<b>2 Years</b>	\$1,204.90	\$1,104.49	\$1,004.08	\$903.67
<b>3 Years</b>	\$1,474.45	\$1,351.58	\$1,228.71	\$1,105.84
<b>4 Years</b>	\$1,652.36	\$1,514.66	\$1,376.96	\$1,239.27
<b>5 Years</b>	\$1,814.09	\$1,662.91	\$1,511.74	\$1,360.57
<b>6 Years</b>	\$1,924.60	\$1,764.22	\$1,603.84	\$1,443.45

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