

ACCIDENT EXPENSE INSURANCE POLICY

ACCIDENT EXPENSE INSURANCE POLICY

Form Series LY-ACC-BA

Benefit Amount	Deductible Amount ¹	Issue Ages 0-17		Issue Ages 18-64						Issue Ages 40-74		Issue Ages 65-74					
		Child Only		Primary		Spouse		Child ²		Parent Rider ³		Primary		Spouse		Child ²	
		Monthly	Annual	Monthly	Annual	Monthly	Annual	Monthly	Annual	Monthly	Annual	Monthly	Annual	Monthly	Annual	Monthly	Annual
\$2,500	\$0	26.48	311.50	28.31	333.00	24.06	283.00	20.38	239.75	41.65	490.00	43.14	507.50	36.66	431.25	20.38	239.75
\$2,500	\$100	24.40	287.00	26.05	306.50	22.14	260.50	18.76	220.75	38.34	451.00	39.70	467.00	33.75	397.00	18.76	220.75
\$2,500	\$250	22.29	262.25	23.82	280.25	20.25	238.25	17.15	201.75	35.04	412.25	36.30	427.00	30.86	363.00	17.15	201.75
\$5,000	\$100	33.02	388.50	35.28	415.00	29.98	352.75	25.39	298.75	51.89	610.50	53.76	632.50	45.69	537.50	25.39	298.75
\$5,000	\$250	30.64	360.50	32.75	385.25	27.84	327.50	23.57	277.25	48.17	566.75	49.90	587.00	42.42	499.00	23.57	277.25
\$7,500	\$250	36.23	426.25	38.72	455.50	32.92	387.25	27.88	328.00	56.97	670.25	59.01	694.25	50.17	590.25	27.88	328.00
\$7,500	\$500	33.17	390.25	35.45	417.00	30.13	354.50	25.52	300.25	52.15	613.50	54.02	635.50	45.92	540.25	25.52	300.25
\$10,000	\$250	40.38	475.00	43.16	507.75	36.68	431.50	31.07	365.50	63.50	747.00	65.77	773.75	55.89	657.50	31.07	365.50
\$10,000	\$500	37.21	437.75	39.76	467.75	33.79	397.50	28.62	336.75	58.50	688.25	60.58	712.75	51.49	605.75	28.62	336.75
\$15,000	\$500	42.82	503.75	45.75	538.25	38.89	457.50	32.94	387.50	67.32	792.00	69.72	820.25	59.27	697.25	32.94	387.50
\$20,000	\$1,000	41.14	484.00	43.97	517.25	37.38	439.75	31.64	372.25	64.69	761.00	67.00	788.25	56.97	670.25	31.64	372.25
\$25,000	\$2,500	33.92	399.00	36.25	426.50	30.81	362.50	26.10	307.00	53.34	627.50	55.25	650.00	46.96	552.50	26.10	307.00

DECLINING DEDUCTIBLE OPTION RIDER

Form Series LY-DED-RD *Not Available in GA*

Benefit Amount	Deductible Amount ¹	Issue Ages 18-64						Issue Ages 40-74		Issue Ages 65-74					
		Primary		Spouse		Child ²		Parent Rider ³		Primary		Spouse		Child ²	
		Monthly	Annual	Monthly	Annual	Monthly	Annual	Monthly	Annual	Monthly	Annual	Monthly	Annual	Monthly	Annual
\$2,500	\$100	1.34	15.75	1.45	17.00	1.21	14.25	2.10	24.75	2.19	25.75	1.87	22.00	1.04	12.25
\$2,500	\$250	2.55	30.00	2.74	32.25	2.32	27.25	4.02	47.25	4.17	49.00	3.55	41.75	1.98	23.25
\$5,000	\$100	1.49	17.50	1.57	18.50	1.34	15.75	2.34	27.50	2.40	28.25	2.04	24.00	1.15	13.50
\$5,000	\$250	2.87	33.75	3.06	36.00	2.59	30.50	4.51	53.00	4.68	55.00	3.97	46.75	2.21	26.00
\$7,500	\$250	3.00	35.25	3.19	37.50	2.72	32.00	4.70	55.25	4.87	57.25	4.14	48.75	2.30	27.00
\$7,500	\$500	4.65	54.75	4.95	58.25	4.21	49.50	7.29	85.75	7.57	89.00	6.42	75.50	3.57	42.00
\$10,000	\$250	3.06	36.00	3.27	38.50	2.78	32.75	4.82	56.75	4.99	58.75	4.25	50.00	2.36	27.75
\$10,000	\$500	4.78	56.25	5.12	60.25	4.34	51.00	7.52	88.50	7.80	91.75	6.63	78.00	3.68	43.25
\$15,000	\$500	4.97	58.50	5.29	62.25	4.51	53.00	7.80	91.75	8.08	95.00	6.86	80.75	3.80	44.75
\$20,000	\$1,000	7.48	88.00	7.97	93.75	6.78	79.75	11.73	138.00	12.16	143.00	10.33	121.50	5.74	67.50

CATASTROPHIC ACCIDENTAL INJURY RIDER

Form Series LY-CAT-RD *Not Available in GA*

Benefit Amount	Issue Ages 18-64						Issue Ages 65-74						
	Primary		Spouse		Child ²		Primary		Spouse		Child ²		
	Monthly	Annual	Monthly	Annual	Monthly	Annual	Monthly	Annual	Monthly	Annual	Monthly	Annual	
\$25,000	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A

The benefit choice must be the same for all applicants. The parent rider premium is shown for each parent applicant.

¹Family deductible is 2x the individual deductible.

²Child based off primary applicant's age.

³The primary applicant's issue age must be 18-64. *Not Available in ND*

NOTE: MT and VT only go up to age 64

CRITICAL ILLNESS RIDER

Form Series LY-CRI-RD Not Available in DC, GA, PA, TN

\$10,000 BENEFIT

Issue Age	Non-Tobacco				Tobacco			
	Male		Female		Male		Female	
	Monthly	Annual	Monthly	Annual	Monthly	Annual	Monthly	Annual
Child	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
18-24	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
25-29	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
30-34	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
35-39	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
40-44	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
45-49	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
50-54	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
55-59	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
60-64	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
65-70	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A

\$15,000 BENEFIT

Issue Age	Non-Tobacco				Tobacco			
	Male		Female		Male		Female	
	Monthly	Annual	Monthly	Annual	Monthly	Annual	Monthly	Annual
Child	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
18-24	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
25-29	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
30-34	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
35-39	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
40-44	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
45-49	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
50-54	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
55-59	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
60-64	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
65-70	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A

\$20,000 BENEFIT

Issue Age	Non-Tobacco				Tobacco			
	Male		Female		Male		Female	
	Monthly	Annual	Monthly	Annual	Monthly	Annual	Monthly	Annual
Child	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
18-24	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
25-29	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
30-34	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
35-39	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
40-44	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
45-49	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
50-54	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
55-59	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
60-64	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
65-70	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A

\$25,000 BENEFIT

Issue Age	Non-Tobacco				Tobacco			
	Male		Female		Male		Female	
	Monthly	Annual	Monthly	Annual	Monthly	Annual	Monthly	Annual
Child	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
18-24	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
25-29	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
30-34	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
35-39	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
40-44	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
45-49	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
50-54	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
55-59	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
60-64	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
65-70	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A

VEHICULAR ACCIDENT BENEFIT RIDER

Form Series LY-VEH-RD Not Available in GA

Issue Age	Benefit Amount	Primary		Spouse	
		Monthly	Annual	Monthly	Annual
25 - 64	\$1,000	2.04	24.00	2.04	24.00
	\$2,000	4.08	48.00	4.08	48.00
	\$3,000	6.12	72.00	6.12	72.00
	\$4,000	8.16	96.00	8.16	96.00
	\$5,000	10.20	120.00	10.20	120.00

How To Calculate Total Premium And Adding Riders

Primary	\$461.50	Male, 35, \$10,000 of Coverage (\$250 Deductible)
Spouse	\$392.25	Female, 35, \$10,000 of Coverage (\$250 Deductible)
Child	\$332.25	Female, 15, \$10,000 of Coverage (\$250 Deductible)
Riders	\$165.68	Critical Illness Rider for each (\$10,000, Non-Tobacco) Rider total found by adding up riders for all (\$80.69+\$79.29+\$5.70=\$165.68)
Total Annual	= \$1,351.68	
Monthly Modal	x 0.085	(multiply the total by the requested Modal)
Total Monthly	= \$114.90	All applicants w/ CI Rider

To figure Monthly, Quarterly or Semi-Annual rates, add the annual rate for each person and rider together and multiply the total sum by the applicable modal factor.

Modal Factors:	Monthly*	0.085
	Quarterly:	0.265
	Semi-Annual:	0.52

Direct Billing is available Quarterly, Semi-Annually or Annually for any amount.
*Available via Monthly Bank Draft only.

ACCIDENT EXPENSE INSURANCE POLICY (Bundled w/ Qualifying Cigna Individual Medical Plan or Medicare Supplement)

ACCIDENT EXPENSE INSURANCE POLICY

Form Series LY-ACC-BA

Benefit Amount	Deductible Amount ¹	Issue Ages 0-17		Issue Ages 18-64						Issue Ages 40-74		Issue Ages 65-74					
		Child Only		Primary		Spouse		Child ²		Parent Rider ³		Primary		Spouse		Child ²	
		Monthly	Annual	Monthly	Annual	Monthly	Annual	Monthly	Annual	Monthly	Annual	Monthly	Annual	Monthly	Annual	Monthly	Annual
\$2,500	\$0	23.82	280.25	25.48	299.75	21.65	254.75	18.34	215.75	37.49	441.00	38.82	456.75	33.00	388.25	18.34	215.75
\$2,500	\$100	21.95	258.25	23.44	275.75	19.93	234.50	16.89	198.75	34.51	406.00	35.72	420.25	30.39	357.50	16.89	198.75
\$2,500	\$250	20.06	236.00	21.44	252.25	18.23	214.50	15.43	181.50	31.54	371.00	32.68	384.50	27.80	327.00	15.43	181.50
\$5,000	\$100	29.73	349.75	31.75	373.50	26.99	317.50	22.87	269.00	46.71	549.50	48.39	569.25	41.12	483.75	22.87	269.00
\$5,000	\$250	27.58	324.50	29.47	346.75	25.05	294.75	21.21	249.50	43.35	510.00	44.92	528.50	38.19	449.25	21.21	249.50
\$7,500	\$250	32.62	383.75	34.85	410.00	29.62	348.50	25.10	295.25	51.28	603.25	53.10	624.75	45.14	531.00	25.10	295.25
\$7,500	\$500	29.86	351.25	31.90	375.25	27.12	319.00	22.97	270.25	46.94	552.25	48.62	572.00	41.33	486.25	22.97	270.25
\$10,000	\$250	36.34	427.50	38.85	457.00	33.00	388.25	27.97	329.00	57.14	672.25	59.20	696.50	50.30	591.75	27.97	329.00
\$10,000	\$500	33.49	394.00	35.79	421.00	30.41	357.75	25.76	303.00	52.66	619.50	54.53	641.50	46.35	545.25	25.76	303.00
\$15,000	\$500	38.55	453.50	41.18	484.50	35.00	411.75	29.64	348.75	60.58	712.75	62.77	738.50	53.34	627.50	29.64	348.75
\$20,000	\$1,000	37.02	435.50	39.57	465.50	33.64	395.75	28.48	335.00	58.23	685.00	60.31	709.50	51.26	603.00	28.48	335.00
\$25,000	\$2,500	30.52	359.00	32.62	383.75	27.73	326.25	23.48	276.25	48.00	564.75	49.70	584.75	42.27	497.25	23.48	276.25

DECLINING DEDUCTIBLE OPTION RIDER

Form Series LY-DED-RD *Not Available in GA*

Benefit Amount	Deductible Amount ¹	Issue Ages 18-64						Issue Ages 40-74		Issue Ages 65-74					
		Primary		Spouse		Child ²		Parent Rider ³		Primary		Spouse		Child ²	
		Monthly	Annual	Monthly	Annual	Monthly	Annual	Monthly	Annual	Monthly	Annual	Monthly	Annual	Monthly	Annual
\$2,500	\$100	1.21	14.25	1.30	15.25	1.11	13.00	1.89	22.25	1.98	23.25	1.68	19.75	0.94	11.00
\$2,500	\$250	2.30	27.00	2.47	29.00	2.08	24.50	3.61	42.50	3.74	44.00	3.19	37.50	1.76	20.75
\$5,000	\$100	1.34	15.75	1.42	16.75	1.21	14.25	2.10	24.75	2.17	25.50	1.85	21.75	1.02	12.00
\$5,000	\$250	2.57	30.25	2.76	32.50	2.34	27.50	4.06	47.75	4.21	49.50	3.57	42.00	1.98	23.25
\$7,500	\$250	2.70	31.75	2.87	33.75	2.44	28.75	4.23	49.75	4.38	51.50	3.72	43.75	2.06	24.25
\$7,500	\$500	4.19	49.25	4.46	52.50	3.80	44.75	6.57	77.25	6.80	80.00	5.78	68.00	3.21	37.75
\$10,000	\$250	2.76	32.50	2.95	34.75	2.51	29.50	4.34	51.00	4.48	52.75	3.83	45.00	2.13	25.00
\$10,000	\$500	4.29	50.50	4.59	54.00	3.91	46.00	6.76	79.50	7.01	82.50	5.95	70.00	3.32	39.00
\$15,000	\$500	4.46	52.50	4.76	56.00	4.06	47.75	7.01	82.50	7.27	85.50	6.16	72.50	3.42	40.25
\$20,000	\$1,000	6.74	79.25	7.18	84.50	6.10	71.75	10.56	124.25	10.94	128.75	9.31	109.50	5.16	60.75

CATASTROPHIC ACCIDENTAL INJURY RIDER

Form Series LY-CAT-RD *Not Available in GA*

Benefit Amount	Issue Ages 18-64						Issue Ages 65-74						
	Primary		Spouse		Child ²		Primary		Spouse		Child ²		
	Monthly	Annual	Monthly	Annual	Monthly	Annual	Monthly	Annual	Monthly	Annual	Monthly	Annual	
\$25,000	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A

The benefit choice must be the same for all applicants. The parent rider premium is shown for each parent applicant.

¹Family deductible is 2x the individual deductible.

²Child based off primary applicant's age.

³The primary applicant's issue age must be 18-64. *Not Available in ND*

NOTE: MT and VT only go up to age 64

CRITICAL ILLNESS RIDER

Form Series LY-CRI-RD *Not Available in DC, GA, PA, TN*

\$10,000 BENEFIT

Issue Age	Non-Tobacco				Tobacco			
	Male		Female		Male		Female	
	Monthly	Annual	Monthly	Annual	Monthly	Annual	Monthly	Annual
Child	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
18-24	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
25-29	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
30-34	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
35-39	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
40-44	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
45-49	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
50-54	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
55-59	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
60-64	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
65-70	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A

\$15,000 BENEFIT

Issue Age	Non-Tobacco				Tobacco			
	Male		Female		Male		Female	
	Monthly	Annual	Monthly	Annual	Monthly	Annual	Monthly	Annual
Child	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
18-24	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
25-29	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
30-34	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
35-39	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
40-44	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
45-49	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
50-54	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
55-59	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
60-64	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
65-70	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A

\$20,000 BENEFIT

Issue Age	Non-Tobacco				Tobacco			
	Male		Female		Male		Female	
	Monthly	Annual	Monthly	Annual	Monthly	Annual	Monthly	Annual
Child	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
18-24	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
25-29	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
30-34	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
35-39	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
40-44	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
45-49	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
50-54	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
55-59	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
60-64	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
65-70	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A

\$25,000 BENEFIT

Issue Age	Non-Tobacco				Tobacco			
	Male		Female		Male		Female	
	Monthly	Annual	Monthly	Annual	Monthly	Annual	Monthly	Annual
Child	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
18-24	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
25-29	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
30-34	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
35-39	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
40-44	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
45-49	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
50-54	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
55-59	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
60-64	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
65-70	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A

VEHICULAR ACCIDENT BENEFIT RIDER

Form Series LY-VEH-RD *Not Available in GA*

Issue Age	Benefit Amount	Primary		Spouse	
		Monthly	Annual	Monthly	Annual
25 - 64	\$1,000	2.04	24.00	2.04	24.00
	\$2,000	4.08	48.00	4.08	48.00
	\$3,000	6.12	72.00	6.12	72.00
	\$4,000	8.16	96.00	8.16	96.00
	\$5,000	10.20	120.00	10.20	120.00

How To Calculate Total Premium And Adding Riders

Primary	\$415.25	Male, 35, \$10,000 of Coverage (\$250 Deductible)
Spouse	\$353.00	Female, 35, \$10,000 of Coverage (\$250 Deductible)
Child	\$299.00	Female, 15, \$10,000 of Coverage (\$250 Deductible)
Riders	\$165.68	Critical Illness Rider for each (\$10,000, Non-Tobacco) <i>Rider total found by adding up riders for all (\$80.69+\$79.29+\$5.70=\$165.68)</i>
Total Annual	\$1232.93	
Monthly Modal	x 0.085	<i>(multiply the total by the requested Modal)</i>
Total Monthly	\$104.80	All applicants w/ CI Rider

To figure Monthly, Quarterly or Semi-Annual rates, add the annual rate for each person and rider together and multiply the total sum by the applicable modal factor.

Modal Factors:	Monthly:	0.085
	Quarterly:	0.265
	Semi-Annual:	0.52

Direct Billing is available Quarterly, Semi-Annually or Annually for any amount.
*Available via Monthly Bank Draft only.