

Recover Cash Short-Term Care Indemnity

AGENT RATES

Connecticut

FOR AGENT USE ONLY

Recover Cash Short-Term Care

Premium Rates per \$10 a Day (Daily Benefit Amounts Available \$50-\$300)

,	Annual Non-Tobacco Rates		
	0 DAY ELIMINATION PERIOD		
Benefit Period	100 DAY	200 DAY	300 DAY
Issue Age			
40-50	\$8.10	\$13.80	\$19.10
51	\$9.75	\$16.45	\$22.55
52	\$11.40	\$19.10	\$26.00
53	\$12.32	\$20.48	\$27.96
54	\$13.24	\$21.86	\$29.92
55	\$14.16	\$23.24	\$31.88
56	\$15.08	\$24.62	\$33.84
57	\$16.00	\$26.00	\$35.80
58	\$17.28	\$28.20	\$38.88
59	\$18.56	\$30.40	\$41.96
60	\$19.84	\$32.60	\$45.04
61	\$21.12	\$34.80	\$48.12
62	\$22.40	\$37.00	\$51.20
63	\$24.42	\$40.82	\$56.24
64	\$26.44	\$44.64	\$61.28
65	\$28.46	\$48.46	\$66.32
66	\$30.48	\$52.28	\$71.36
67	\$32.50	\$56.10	\$76.40
68	\$36.00	\$62.12	\$84.54
69	\$39.50	\$68.14	\$92.68
70	\$43.00	\$74.16	\$100.82
71	\$46.50	\$80.18	\$108.96
72	\$50.00	\$86.20	\$117.10
73	\$55.52	\$95.86	\$130.26
74	\$61.04	\$105.52	\$143.42
75	\$66.56	\$115.18	\$156.58
76	\$72.08	\$124.84	\$169.74
77	\$77.60	\$134.50	\$182.90
78	\$85.42	\$148.00	\$201.44
79	\$93.24	\$161.50	\$219.98
80	\$101.06	\$175.00	\$238.52
81	\$108.88	\$188.50	\$257.06
82	\$116.70	\$202.00	\$275.60
83	\$124.52	\$215.50	\$294.14
84	\$132.34	\$229.00	\$312.68

/	Annual Non-Tobacco Rates		
	20 DAY	ELIMINATION	PERIOD
Benefit Period	100 DAY	200 DAY	300 DAY
Issue Age			
40-50	\$7.30	\$12.60	\$17.10
51	\$8.75	\$14.85	\$20.35
52	\$10.20	\$17.10	\$23.60
53	\$11.00	\$18.40	\$25.30
54	\$11.80	\$19.70	\$27.00
55	\$12.60	\$21.00	\$28.70
56	\$13.40	\$22.30	\$30.40
57	\$14.20	\$23.60	\$32.10
58	\$15.42	\$25.54	\$34.86
59	\$16.64	\$27.48	\$37.62
60	\$17.86	\$29.42	\$40.38
61	\$19.08	\$31.36	\$43.14
62	\$20.30	\$33.30	\$45.90
63	\$22.10	\$36.88	\$50.62
64	\$23.90	\$40.46	\$55.34
65	\$25.70	\$44.04	\$60.06
66	\$27.50	\$47.62	\$64.78
67	\$29.30	\$51.20	\$69.50
68	\$32.54	\$56.90	\$77.14
69	\$35.78	\$62.60	\$84.78
70	\$39.02	\$68.30	\$92.42
71	\$42.26	\$74.00	\$100.06
72	\$45.50	\$79.70	\$107.70
73	\$50.54	\$88.48	\$119.74
74	\$55.58	\$97.26	\$131.78
75	\$60.62	\$106.04	\$143.82
76	\$65.66	\$114.82	\$155.86
77	\$70.70	\$123.60	\$167.90
78	\$77.86	\$135.96	\$185.04
79	\$85.02	\$148.32	\$202.18
80	\$92.18	\$160.68	\$219.32
81	\$99.34	\$173.04	\$236.46
82	\$106.50	\$185.40	\$253.60
83	\$113.66	\$197.76	\$270.74
84	\$120.82	\$210.12	\$287.88

MODAL FACTORS		
Semi Annual 0.50000		
Quarterly 0.25000		
Monthly (Bank Draft)	0.08333	

Above Premium Rates DO NOT include an annual policy fee of \$25.00. 10% Spousal Discount when both spouses apply and both are issued coverage.

Recover Cash Short-Term Care

Premium Rates per \$10 a Day (Daily Benefit Amounts Available \$50-\$300)

Annual Tobacco Rates			
	0 DAY E	LIMINATION	PERIOD
Benefit Period	100 DAY	200 DAY	300 DAY
Issue Age			
40-50	\$8.91	\$15.18	\$21.01
51	\$10.73	\$18.10	\$24.81
52	\$12.54	\$21.01	\$28.60
53	\$13.55	\$22.53	\$30.76
54	\$14.56	\$24.05	\$32.91
55	\$15.58	\$25.56	\$35.07
56	\$16.59	\$27.08	\$37.22
57	\$17.60	\$28.60	\$39.38
58	\$19.01	\$31.02	\$42.77
59	\$20.42	\$33.44	\$46.16
60	\$21.82	\$35.86	\$49.54
61	\$23.23	\$38.28	\$52.93
62	\$24.64	\$40.70	\$56.32
63	\$26.86	\$44.90	\$61.86
64	\$29.08	\$49.10	\$67.41
65	\$31.31	\$53.31	\$72.95
66	\$33.53	\$57.51	\$78.50
67	\$35.75	\$61.71	\$84.04
68	\$39.60	\$68.33	\$92.99
69	\$43.45	\$74.95	\$101.95
70	\$47.30	\$81.58	\$110.90
71	\$51.15	\$88.20	\$119.86
72	\$55.00	\$94.82	\$128.81
73	\$61.07	\$105.45	\$143.29
74	\$67.14	\$116.07	\$157.76
75	\$73.22	\$126.70	\$172.24
76	\$79.29	\$137.32	\$186.71
77	\$85.36	\$147.95	\$201.19
78	\$93.96	\$162.80	\$221.58
79	\$102.56	\$177.65	\$241.98
80	\$111.17	\$192.50	\$262.37
81	\$119.77	\$207.35	\$282.77
82	\$128.37	\$222.20	\$303.16
83	\$136.97	\$237.05	\$323.55
84	\$145.57	\$251.90	\$343.95

Annual Tobacco Rates				
	20 DAY ELIMINATION PERIOD			
Benefit Period	100 DAY	200 DAY	300 DAY	
Issue Age				
40-50	\$8.03	\$13.86	\$18.81	
51	\$9.63	\$16.34	\$22.39	
52	\$11.22	\$18.81	\$25.96	
53	\$12.10	\$20.24	\$27.83	
54	\$12.98	\$21.67	\$29.70	
55	\$13.86	\$23.10	\$31.57	
56	\$14.74	\$24.53	\$33.44	
57	\$15.62	\$25.96	\$35.31	
58	\$16.96	\$28.09	\$38.35	
59	\$18.30	\$30.23	\$41.38	
60	\$19.65	\$32.36	\$44.42	
61	\$20.99	\$34.50	\$47.45	
62	\$22.33	\$36.63	\$50.49	
63	\$24.31	\$40.57	\$55.68	
64	\$26.29	\$44.51	\$60.87	
65	\$28.27	\$48.44	\$66.07	
66	\$30.25	\$52.38	\$71.26	
67	\$32.23	\$56.32	\$76.45	
68	\$35.79	\$62.59	\$84.85	
69	\$39.36	\$68.86	\$93.26	
70	\$42.92	\$75.13	\$101.66	
71	\$46.49	\$81.40	\$110.07	
72	\$50.05	\$87.67	\$118.47	
73	\$55.59	\$97.33	\$131.71	
74	\$61.14	\$106.99	\$144.96	
75	\$66.68	\$116.64	\$158.20	
76	\$72.23	\$126.30	\$171.45	
77	\$77.77	\$135.96	\$184.69	
78	\$85.65	\$149.56	\$203.54	
79	\$93.52	\$163.15	\$222.40	
80	\$101.40	\$176.75	\$241.25	
81	\$109.27	\$190.34	\$260.11	
82	\$117.15	\$203.94	\$278.96	
83	\$125.03	\$217.54	\$297.81	
84	\$132.90	\$231.13	\$316.67	

MODAL FACTORS		
Semi Annual 0.50000		
Quarterly 0.25000		
Monthly (Bank Draft)	0.08333	

Above Premium Rates DO NOT include an annual policy fee of \$25.00. 10% Spousal Discount when both spouses apply and both are issued coverage.

Recover Cash Short-Term Care Premium Rates with 3% Compound Inflation Rider

Per \$10 A Day

(Daily Benefit Amounts Available \$50-\$300)

,	Annual Non-Tobacco Rates			
	0 DAY ELIMINATION PERIOD			
Benefit Period	100 DAY	200 DAY	300 DAY	
Issue Age				
40-50	\$14.58	\$24.84	\$34.38	
51	\$17.55	\$29.61	\$40.59	
52	\$20.52	\$34.38	\$46.80	
53	\$21.93	\$36.45	\$49.77	
54	\$23.30	\$38.47	\$52.66	
55	\$24.64	\$40.44	\$55.47	
56	\$25.94	\$42.35	\$58.20	
57	\$27.20	\$44.20	\$60.86	
58	\$29.03	\$47.38	\$65.32	
59	\$30.81	\$50.46	\$69.65	
60	\$32.54	\$53.46	\$73.87	
61	\$34.21	\$56.38	\$77.95	
62	\$35.84	\$59.20	\$81.92	
63	\$38.58	\$64.50	\$88.86	
64	\$41.25	\$69.64	\$95.60	
65	\$43.83	\$74.63	\$102.13	
66	\$46.33	\$79.47	\$108.47	
67	\$48.75	\$84.15	\$114.60	
68	\$53.28	\$91.94	\$125.12	
69	\$57.67	\$99.48	\$135.31	
70	\$61.92	\$106.79	\$145.18	
71	\$66.03	\$113.86	\$154.72	
72	\$70.00	\$120.68	\$163.94	
73	\$76.62	\$132.29	\$179.76	
74	\$83.01	\$143.51	\$195.05	
75	\$89.19	\$154.34	\$209.82	
76	\$95.15	\$164.79	\$224.06	
77	\$100.88	\$174.85	\$237.77	
78	\$109.34	\$189.44	\$257.84	
79	\$117.48	\$203.49	\$277.17	
80	\$125.31	\$217.00	\$295.76	
81	\$132.83	\$229.97	\$313.61	
82	\$140.04	\$242.40	\$330.72	
83	\$146.93	\$254.29	\$347.09	
84	\$153.51	\$265.64	\$362.71	

,	Annual Non-1	obacco Rates	5
	20 DAY I	ELIMINATION	PERIOD
Benefit Period	100 DAY	200 DAY	300 DAY
Issue Age			
40-50	\$13.14	\$22.68	\$30.78
51	\$15.75	\$26.73	\$36.63
52	\$18.36	\$30.78	\$42.48
53	\$19.58	\$32.75	\$45.03
54	\$20.77	\$34.67	\$47.52
55	\$21.92	\$36.54	\$49.94
56	\$23.05	\$38.36	\$52.29
57	\$24.14	\$40.12	\$54.57
58	\$25.91	\$42.91	\$58.56
59	\$27.62	\$45.62	\$62.45
60	\$29.29	\$48.25	\$66.22
61	\$30.91	\$50.80	\$69.89
62	\$32.48	\$53.28	\$73.44
63	\$34.92	\$58.27	\$79.98
64	\$37.28	\$63.12	\$86.33
65	\$39.58	\$67.82	\$92.49
66	\$41.80	\$72.38	\$98.47
67	\$43.95	\$76.80	\$104.25
68	\$48.16	\$84.21	\$114.17
69	\$52.24	\$91.40	\$123.78
70	\$56.19	\$98.35	\$133.08
71	\$60.01	\$105.08	\$142.09
72	\$63.70	\$111.58	\$150.78
73	\$69.75	\$122.10	\$165.24
74	\$75.59	\$132.27	\$179.22
75	\$81.23	\$142.09	\$192.72
76	\$86.67	\$151.56	\$205.74
77	\$91.91	\$160.68	\$218.27
78	\$99.66	\$174.03	\$236.85
79	\$107.13	\$186.88	\$254.75
80	\$114.30	\$199.24	\$271.96
81	\$121.19	\$211.11	\$288.48
82	\$127.80	\$222.48	\$304.32
83	\$134.12	\$233.36	\$319.47
84	\$140.15	\$243.74	\$333.94

MODAL FACTORS		
Semi Annual 0.50000		
Quarterly	0.25000	
Monthly (Bank Draft)	0.08333	

Above Premium Rates DO NOT include an annual policy fee of \$25.00. 10% Spousal Discount when both spouses apply and both are issued coverage.

Recover Cash Short-Term Care Premium Rates with 3% Compound Inflation Rider

Per \$10 A Day

(Daily Benefit Amounts Available \$50-\$300)

	Annual Tobacco Rates		
0 DAY ELIMINATION PERIOD			PERIOD
Benefit Period	100 DAY	200 DAY	300 DAY
Issue Age			
40-50	\$16.04	\$27.32	\$37.82
51	\$19.31	\$32.57	\$44.65
52	\$22.57	\$37.82	\$51.48
53	\$24.12	\$40.10	\$54.75
54	\$25.63	\$42.32	\$57.93
55	\$27.10	\$44.48	\$61.02
56	\$28.53	\$46.59	\$64.02
57	\$29.92	\$48.62	\$66.95
58	\$31.93	\$52.12	\$71.85
59	\$33.89	\$55.51	\$76.62
60	\$35.79	\$58.81	\$81.26
61	\$37.63	\$62.02	\$85.75
62	\$39.42	\$65.12	\$90.11
63	\$42.44	\$70.95	\$97.75
64	\$45.38	\$76.60	\$105.16
65	\$48.21	\$82.09	\$112.34
66	\$50.96	\$87.42	\$119.32
67	\$53.63	\$92.57	\$126.06
68	\$58.61	\$101.13	\$137.63
69	\$63.44	\$109.43	\$148.84
70	\$68.11	\$117.47	\$159.70
71	\$72.63	\$125.25	\$170.19
72	\$77.00	\$132.75	\$180.33
73	\$84.28	\$145.52	\$197.74
74	\$91.31	\$157.86	\$214.56
75	\$98.11	\$169.77	\$230.80
76	\$104.67	\$181.27	\$246.47
77	\$110.97	\$192.34	\$261.55
78	\$120.27	\$208.38	\$283.62
79	\$129.23	\$223.84	\$304.89
80	\$137.84	\$238.70	\$325.34
81	\$146.11	\$252.97	\$344.97
82	\$154.04	\$266.64	\$363.79
83	\$161.62	\$279.72	\$381.80
84	\$168.86	\$292.20	\$398.98

Annual Tobacco Rates			
	20 DAY	ELIMINATION	PERIOD
Benefit Period	100 DAY	200 DAY	300 DAY
Issue Age			
40-50	\$14.45	\$24.95	\$33.86
51	\$17.33	\$29.40	\$40.29
52	\$20.20	\$33.86	\$46.73
53	\$21.54	\$36.03	\$49.53
54	\$22.85	\$38.14	\$52.27
55	\$24.11	\$40.19	\$54.93
56	\$25.36	\$42.20	\$57.52
57	\$26.55	\$44.13	\$60.03
58	\$28.50	\$47.20	\$64.42
59	\$30.38	\$50.18	\$68.70
60	\$32.22	\$53.08	\$72.84
61	\$34.00	\$55.88	\$76.88
62	\$35.73	\$58.61	\$80.78
63	\$38.41	\$64.10	\$87.98
64	\$41.01	\$69.43	\$94.96
65	\$43.54	\$74.60	\$101.74
66	\$45.98	\$79.62	\$108.32
67	\$48.35	\$84.48	\$114.68
68	\$52.98	\$92.63	\$125.59
69	\$57.46	\$100.54	\$136.16
70	\$61.81	\$108.19	\$146.39
71	\$66.01	\$115.59	\$156.30
72	\$70.07	\$122.74	\$165.86
73	\$76.73	\$134.31	\$181.76
74	\$83.15	\$145.50	\$197.14
75	\$89.35	\$156.30	\$211.99
76	\$95.34	\$166.72	\$226.31
77	\$101.10	\$176.75	\$240.10
78	\$109.63	\$191.43	\$260.54
79	\$117.84	\$205.57	\$280.23
80	\$125.73	\$219.16	\$299.16
81	\$133.31	\$232.22	\$317.33
82	\$140.58	\$244.73	\$334.75
83	\$147.53	\$256.70	\$351.42
84	\$154.17	\$268.11	\$367.33

MODAL FACTORS		
Semi Annual 0.50000		
Quarterly 0.25		
Monthly (Bank Draft)	0.08333	

Above Premium Rates DO NOT include an annual policy fee of \$25.00. 10% Spousal Discount when both spouses apply and both are issued coverage.

Guarantee Trust Life Recover Cash Underwriting Guide

- 1. Generally, acceptance will be based on the answers given on the application. However, a prescription drug history check for all applicants will be ordered. For applicants 75 and over, a personal history interview will also be required. The interview will be ordered by the Home Office or the agent can call to do the interview from the applicant's home. The name of the company is MRS and their telephone number is 1-888-725-0110. Mention the product name, Recover Cash, so the correct interview is performed.
- 2. In some cases, a personal history telephone interview may be conducted to clarify information on applicants under the age of 75. The interview will be ordered by the Home Office.
- 3. If a medical report (APS) is required in order to clarify an applicant's medical history, the applicant will need to provide those records to us without expense to the Company.
- 4. The applicant must meet the build chart requirements to apply.
- 5. If the applicant is taking any of the medications listed on the Medication List, the applicant will not qualify for the plan.
- 6. The applicant must be a U.S. citizen or hold a "green card" (permanent resident of US.)
- 7. The applicant must have a valid social security number. We will not consider any applicant who does not have one.
- 8. Even though both spouses can be written on one application, each spouse will be issued their own policy. The annual fee must be calculated for each applicant.
- 9. If an application is over 31 days old when received by the Company, we will require a new currently dated application.
- 10. The effective date cannot be more than 90 days from the application date.
- 11. To get the 10% spousal discount, a policy must be issued on both applicants. The applicants must be legally married, be in a domestic partner relationship that is recognized by their resident state or if common law, the state must recognize common law marriage. In this case, they must complete the common law form and submit it with the app. Otherwise, the spousal discount will not be given.
- 12. Tobacco use means cigarettes, cigar, pipe, snuff, and chewing tobacco, nicotine delivery systems such as electric cigarettes, or Nicorette gum or patch used in the 12 months prior to the application date.

Medical Conditions

Medical Condition	Underwriting Decision
ADL Deficit	Decline
AIDS/ARC	Decline
Alcohol Abuse	Within 24 months Decline -In Recovery up to the 3 years NH only -In Recovery over 3 years NH/ HHC
ALS (Lou Gehrig's disease)	Decline
Alzheimer's disease	Decline
Amputation	Due to Disease Decline
Arthritis (Crippling)	Decline
Cancer	Within 24 months Decline
Cerebral Palsy	Decline
Chronic Bronchitis	Decline
Congestive Heart Failure	Within 24 months Decline Over 24 months No Home Health Rider
COPD	Decline
Dementia	Decline
Diabetes	Insulin Dependent or Any Complication Of Neuropathy, Retinopathy, Nephropathy Decline
Disabled	Decline
Drug Abuse	Within 24 months Decline -In Recovery up to 3 years NH Only -In Recovery over 3 years NH HHC
Emphysema	Decline
HIV	Decline

Medical Condition	Underwriting Decision
Incontinence	Within 24 months Decline Over 24 months No Home Health Rider
Kidney Failure or Dialysis	Decline
Leukemia	Within 24 months Decline
Liver Disease (Chronic)	Decline
Lupus (Systemic)	Decline
Lymphoma	Within 24 months Decline
Malignant Melanoma	Within 24 months Decline
Medicaid	Decline
Medicare Disability	Decline
Memory Loss	Decline
Metastatic Cancer	Decline
Multiple Sclerosis	Decline
Muscular Dystrophy	Decline
Organ Transplant	Within 24 months Decline Over 24 months No Home Health Rider
Oxygen Use	Decline
Parkinson's disease	Decline
Psychotic Disorders	Decline
Renal Insufficiency	Within 24 months Decline Over 24 months No Home Health Rider
Rheumatoid Arthritis	Decline
Stroke	Within 24 months Decline Over 24 months No Home Health Rider
Transient Ischemic Attack (TIA)	See Stroke

Height and Weight Chart

If the applicant's build is less than the minimum or greater than the maximum, the applicant does not qualify for the plan.

Height	Minimum Weight	Maximum Weight
4' 10"	88	184
4' 11"	91	190
5' 0"	94	197
5' 1"	97	207
5' 2"	100	210
5' 3"	104	217
5' 4"	107	224
5' 5"	110	231
5' 6"	114	238
5' 7"	118	245
5' 8"	121	253
5' 9"	124	260
5' 10"	128	268
5' 11"	132	276
6' 0'	136	283
6' 1'	139	291
6' 2'	143	299
6' 3'	147	308
6 '4"	151	316
6' 5"	155	324
6' 6"	159	333
6' 7"	163	341

Medication Guide

If the applicant is taking any of the following medications for the condition listed, the applicant is not eligible for the plan or a benefit rider. This is not an all inclusive list and maybe subject to change from time to time.

MEDICATION	CONDITION
3TC	AIDS
Adriamycin	Cancer
AL-721	HIV/AIDS
Alkeran	Cancer
Anabuse	Alcoholism
Aricept	Alzheimer's/Memory Loss
Artane	Parkinson's Disease
Atripla	HIV/AIDS
Avonex	Multiple Sclerosis
A.Z.T.	HIV/AIDS
BCG	Cancer
Blenoxane	Cancer
Betaseron	Multiple Sclerosis
Cerefolin	Alzheimer's /Memory Loss
Cogentin	Parkinson's Disease
Cognex	Alzheimer's/Memory loss
Combivir	HIV, AIDS
Copaxone	Multiple Sclerosis
Crixivan	HIV/AIDS
Cyclosporine	Cancer
Cytoxan	Cancer
D.D.I.	HIV/AIDS
DDC	HIV/AIDS
D4T	HIV/AIDS
DES	Cancer
Donepezil	Alzheimer's/Memory Loss
Doxil	Cancer
Doxorubicin	Cancer
Dronabinol	Cancer
DuoNeb	COPD
Eldepryl	Parkinson's Disease
Emtriva	HIV/AIDS
Entacapone	Parkinson's Disease
Epogen	AIDS
Ergaisol	Cancer
Ergoloid	Alzheimer's/Memory Loss
Estinyl	Cancer
Eulexin	Cancer
Exelon	Alzheimer's/Memory Loss

MEDICATION	CONDITION
Fuzeon	HIV/AIDS
Galantamine	Alzheimer's/Memory Loss
Ganite	Cancer
Gengraf	Cancer
Gleevec	Cancer
Haldol	Psychotic Disorder
Hexalen	Cancer
Humalog	Insulin/Diabetes
Hydrea	Cancer
Hydroxyurea	Cancer
Indinavir	HIV/AIDS
Interferon	AIDS
Invirase	HIV/AIDS
Interleukin	Cancer
Ipratropium Bromide	COPD
Kaletra	HIV
Kemadrin	Parkinson's Disease
Kineret	Cancer
Lantus	Insulin/Diabetes
Levemir	Insulin/Diabetes
Lexiva	HIV/AIDS
Lioresal	Multiple Sclerosis
Lodosyn	Parkinson's Disease
Lupron	Cancer
Lysodren	Cancer
Marinol	Cancer
Megace	Cancer
Megestrol	Cancer
Melphalan	Cancer
Methotrexate	Rheumatoid Arthritis
Mirapex	Parkinson's Disease
Mitomycin	Cancer
Mutamycin	Cancer
Myleran	Cancer
Namenda	Alzheimer's/Memory Loss
Navane	Psychotic Disorders
Nelfinavir	HIV
Neosar	Cancer
Neupogen	Cancer

Medication Guide Continued...

MEDICATION	CONDITION
Foscarnet	HIV/AIDS
Foscavir	HIV/ AIDS
Novolog	Insulin/Diabetes
Oxygen Therapy	COPD
Paraplatin	Cancer
Parcopa	Parkinson's Disease
Pergolide	Parkinson' Disease
Platinol	Cancer
Plenaxis	Cancer
Prednisone	Arthritis
Prezista	AIDS
Procrit	Cancer/AIDS
Purinethol	Cancer
Razadyne	Alzheimer's /Memory Loss
Rebif	Multiple Sclerosis
Rescripto	AIDS
Reminyl	Alzheimer's Disease
Requip	Parkinson's Disease
Reyataz	HIV
Risperidone	Psychotic Disorders
Ritonavir	AIDS
Rivastigmine	Alzheimer's /Memory Loss
Roferon	HIV/AIDS
Selegiline	Parkinson's Disease
Selzentry	HIV
Spiriva	COPD
Stalevo	Parkinson's Disease

MEDICATION	CONDITION
Norvir	HIV/AIDS
Novantrone	Multiple Sclerosis
Sustiva	AIDS
Tacrine	Alzheimer's/Memory Loss
Tasmar	Parkinson's Disease
Teslac	Cancer
Thioridazine	Psychotic Disorders
Thiotepa	Cancer
Tolcapone	Parkinson's Disease
Trelstar-LA	Cancer
Trizivir	HIV
Truvada	HIV
Valycte	HIV
VePesid	Cancer
Videx	HIV, AIDS
Vincristine	Cancer
Viracept	HIV
Viramune	AIDS
Viread	HIV
Vivitrol	Alcoholism
Wellferon	HIV
Zanosar	Cancer
Zerit	HIV
Ziagen	HIV
Zidovudine	HIV/AIDS
Zofran	Cancer
Zoladex	Cancer