Accendo Insurance Company (ACC) American Continental Insurance Company (ACI) Aetna Health Insurance Company (AHIC) Aetna Health and Life Insurance Company (AHLIC) Aetna Life Insurance Company (ALIC) Continental Life Insurance Company of Brentwood, Tennessee (CLI)

General Agent (GA)

Schedule of Commissions Effective March 15, 2023

This Schedule of Commissions ("Schedule") becomes a part of the Contract between you and one or more of the abovenamed Companies ("the Company") and is subject to all its provisions. You must be properly licensed and appointed (in the policy issue state) at the time of the policy sale to receive commissions for such sale. Commissions under this Schedule shall be vested in accordance with the terms of your Contract. Commissions will be calculated using the percentage rate shown in the schedule below, multiplied by the issued premium amount. Commissions are based on the policyholder's age on the policy effective date; except for an Open Enrollment Medicare Supplement policy issued to a Medicare beneficiary turning age 65 after the policy effective date will use the age 65 rate. You confirm that the first lien previously agreed to and granted by you to the Company applies to this schedule on all compensation payable to you as security for the payment of any debts due or to become due to Company from you and the hierarchy recruited by or assigned to you. Commissions are reduced by any commissions due a sub-producing General Agent, Agent, or by any debt owed the Company or its affiliates.

All commissions payable are subject to adjustment due to limitations and/or restrictions imposed by any applicable laws or regulations. Unless stated otherwise, commissions are not paid on premium rate increases, policy or application fees, if any, or on premiums associated with the Medicare Part B deductible on any Medicare Supplement plan issued by the Company. There will be a 100% chargeback if a policy is rescinded and premiums returned. If a policy is changed for any reason (such as, but not limited to, a change in benefits or coverage to include policy riders, or in the number of covered lives) which results in a change in premiums, commissions will be adjusted based on the amount of the resulting premium and will be paid based on the duration period of the existing policy. Commissions on internal replacements, conversions, or exchanges of an existing policy to a similar policy or coverage type, offered by the Company, or its affiliates, or a Genworth Financial affiliated Company (when such plans are administered by an Aetna affiliated company) are subject to the Company's replacement rules.

This Schedule will apply to qualifying applications dated on or after the Effective Date shown below. In consideration of receiving the GA override you agree to produce no less than two hundred fifty thousand dollars of new annualized premium each twelve-month period starting on <u>July 22, 2019</u>. Failure to maintain this level of production will result in the loss of your GA override commission. The Company has the unilateral right to amend this Schedule upon notification of the amendment and its effective date. At the Company's discretion, it may provide notice of such amendment through mail, email, posting to the Company website or such other reasonable means of communication. No such amendment shall affect commissions on applications taken prior to the effective date of such amendment unless required by law.

If no Effective Date is shown, the Effective Date will be the same as the date shown on the same Schedule on file in the Home Office.

Individual Medicare Supplement

Indiv	vidual Medicare Supplem	ent							
AR, CA, I	DC, ND, NH, NM, OK, RI, SD, UT, VT and WY	(all marketed plans)							
AL, AZ, (GA, IA, KY, LA, MS, NC, NE, NJ, NV, VA and V	/V (all marketed plans exce	pt Plan N	I)					
Plans are	not available to Medicare beneficiaries under age	65 in AL, AZ, IA, ND, NE, NM, N	V, RI, UT, V	NV and WY.					
	Open Enrollment		G	uaranteed Issue	(GI)				
	Plans vary by state - see	product sales kit for plan	options			Plan option	ns are as require	d by state la	w
	Age 65+			Under	age 65	Age	: 65+	Undera	age 65
	Policy Yea	irs		Policy	Years	Policy	Years	Policy	Years
Level	1-6	7+		1-6	7+	1 - 6	7+	1-6	7+
11	24%	3.5%		1.25%	0%	1.25%	0%	1.25%	0%
AL, AZ, G	GA, IA, KY, LA, MS, NC, NE, NJ, NV, VA and W	٧ (only Plan N)							
Plan N is ı	not available to Medicare beneficiaries under age	65 in AL, AZ, IA, NC, NE, NJ, NV,	VA and W	<i>v</i> .					
	Age 65+					- v	: 65+	Undera	-
	Policy Yea			Policy		-	y Years	Policy	
Level	1-6	7+		1-6	7+	1-6	7+	1-6	7+
11	29%	3.5%		1.25%	0%	1.25%	0%	1.25%	0%
	narketed plans)	CE in AK							
Plans are	not available to Medicare beneficiaries under age	1	21)						
	OE and UW	Guaranteed Issue (C) (Ic						
Laural	Age 65+	Age 65+							
Level 11	All Policy Years 19%	All Policy Years 1.25%							
	, MT and OR (all marketed plans)	1.25%							
CO, IVIIN,	Age 65+			Under	200 65	٨٩	: 65+	Under	200 65
	Policy Yea			Policy	-	-	Years	Policy	-
Level	1-6	7+	1-6	7+	-	1-6 7+		1-6 7+	
11	24%	3.5%		24%	3.5%	24%	3.5%	24%	3.5%
	narketed plans)	0.070		2470	0.070	2478	0.070		0.070
	Age 65+		U65	Under	age 65	Age	• 65+	Undera	age 65
	Policy Years		with	Policy Years Policy Years		Policy Years			
Level	1-6	7+	ESRD	1-6	7+	1-6	7+	1-6	7+
11	24%	3.5%	0.55%	1.25%	0%	1.25%	0%	1.25%	0%
*Commiss	sions for policies issued to Medicare beneficiaries u	nder the age of 65 (1165) with I	nd Stage	Renial Dise	ase (FSRDi	annly for policy yea	rs 1 through 6 with	no commissio	ns naid
thereafte		nucl the uge of oo (oos) with t	ind Stuge		150 (25/12)	apply joi poncy year	5 1 tinougn o tritin		ns pulu
FL (all ma	arketed plans)								
	Age 65+			Under	age 65	Age	e 65+	Under	age 65
	Policy Yea	irs		Policy Years		Policy Years		Policy Years	
Level	1-6	7+		1-6	7+	1-6	7+	1-6	7+
11	23%	3%		6.25%	.60%	23%	3%	6.25%	.60%
ID (all m	arketed plans except Plan N)								
	Age 65+			Under	-	- v	: 65+	Undera	•
	Policy Yea	rs		Policy		Policy	y Years	Policy	Years
Level	1-6	7+		1-6	7+	1-6	7+	1-6	7+
11	24%	3.5%		24%	3.5%	24%	3.5%	24%	3.5%
ID (Plan	-								
	Age 65+			Under	-	-	: 65+	Under	•
	Policy Yea	rs		Policy	Years	Policy	y Years	Policy	Years
				-					
Level 11	1 - 6 29%	7+		1 - 6 29%	7+ 3.5%	<u>1 - 6</u> 29%	7+ 3.5%	1 - 6 29%	7+ 3.5%

Individual Medicare Supplement (continued)

IL (all ma	rketed plans except Plan N	,	linder and CT		A	201	A		Underst	
	Ages 65 to		—	Under age 65 Ages 80+ Ages 65+ Policy Years Policy Years Policy Years		Under age				
Laural	Policy Yea		Policy Years	7.				-	Policy Yea	ars 7+
Level	1-6	7+	1-6	7+	1-6	7+	1-6	7+		
11 IL (only P	24%	3.5%	12%	1.7%	12%	1.7%	1.25%	0%	1.25% (0%
	Ages 65 to	79	Under age 65		Δσο	s 80+	Δσε	es 65+	Under age	65
	Policy Yea		Policy Years		_	Years	-	y Years	Policy Yea	
Level	1-6	7+	1-6	7+	1 - 6	7+	1-6	7+	-	7+
11	29%	3.5%	14.5%	1.7%	14.5%	1.7%	1.25%	0%		0%
	arketed plans)	0.075		,		/5	,	•		
	ductible premium is commission	nable in IN.								
		Age 65+			Under	age 65	Ag	e 65+	Under age	e 65
		Policy Yea				Years	-	y Years	Policy Yea	
Level	1-6		7+		1-6	7+	1-6	7+	-	7+
11	25%		0%		1.25%	0%	25%	0%	1.25% (0%
	/ID (all marketed plans exc	ept plan N)								_
		Age 65+			Under	age 65	Ag	e 65+	Under age 65	
		Policy Yea	rs			Years	Polic	y Years	Policy Yea	
Level	1-6		7+		1-6	7+	1-6	7+	1-6	7+
11	24%		3.5%		24%	3.5%	1.25%	0%	1.25% (0%
KS and M	/ID (only Plan N)								··· ·	
		Age 65+			Under	age 65	Age	e 65+	Under age	: 65
		Policy Yea	rs		Policy	Years	Polic	y Years	Policy Yea	ars
Level	1-6		7+		1-6	7+	1 - 6	7+	1-6	7+
11	29%		3.5%		29%	3.5%	1.25%	0%	1.25% 0	0%
MI (all m	arketed plans except plan	N)								
Plans are	not available to Medicare ben	eficiaries under age	65 in MI.				-			
		Age 65+			Under	age 65	Age	e 65+	Under age	: 65
		Policy Yea	rs		Policy	Years	Polic	y Years	Policy Yea	ars
Level	1-3		4+		1 - 3	4+	1 - 3	4+	1-3 4	4+
11	32%		5.5%				1.25%	0%		
MI (only	Plan N)									
		Age 65+				age 65	-	e 65+	Under age	
		Policy Yea			-	Years		y Years	Policy Yea	
Level	1-3		4+		1 - 3	4+	1-3	4+	1-3 4	4+
11	37%		5.5%				1.25%	0%		
NO (all h	narketed plans)	A == 65 -						- 65 -	. Hadaa aa	
		Age 65+				age 65	-	e 65+	Under age	
Laural	1.6	Policy Yea				Years		y Years	Policy Yea	
Level	1-6		7+		1-6	7+	1-6	7+		7+ ∞⁄
11	24% narketed plans except Plan	NI)	3.5%		24%	3.5%	1.25%	0%	1.25%	0%
	not available to Medicare ben		65 in OH							
r iuns ure		Age 65+			Under	age 65	۸a	e 65+	Under age	65
		Policy Yea				Years		y Years	Policy Yea	
Level	1-7	i oncy rea	8+		1-7	8+	1-7	8+	-	ais 8+
11	23%		0%				1.25%	0%		
OH (only			0/0				1.23/0	070		<u>199399999</u>
		Age 65+			Under	age 65	Δα	e 65+	Under age	65
		Policy Yea				Years	-	y Years	Policy Yea	
Level	1 - 7	i oncy i ea								ais 8+
/							-			
Level 11	<u>1 - 7</u> 28%		8+ 0%		1 - 7	8+	1 - 7 1.25%	8+ 0%	1-7	

Individual Medicare Supplement (continued)

	arketed plans except Plan N)							
	Age 65+		Under	Under age 65		e 65+	Under age 65	
	Policy Yea	rs	Policy	Years	Policy Years		Policy Years	
Level	1-6	7+	1-6	7+	1-6	7+	1-6 7+	
11	24%	3.5%	3%	0%	1.25%	0%	1.25% 0%	
PA (only	Plan N)	•						
	Age 65+		Under	age 65	Age	e 65+	Under age 65	
	Policy Yea	rs	Policy	Years	Polic	y Years	Policy Years	
Level	1 - 6	7+	1-6	7+	1 - 6	7+	1-6 7+	
11	29%	3.5%	3%	0%	1.25%	0%	1.25% 0%	
SC (all ma	arketed plans except Plan N)							
Plans are	not available to Medicare beneficiaries under age	65 in SC.						
	Age 65+		Under	age 65	Ag	e 65+	Under age 65	
	Policy Yea	rs	Policy	Years	Polic	y Years	Policy Years	
Level	1 - 6	7+	1-6	7+	1 - 6	7+	1-6 7+	
11	24%	3.5%			24%	3.5%		
SC (only	Plan N)							
	Age 65+		Under	age 65	Age	e 65+	Under age 65	
	Policy Yea	rs	Policy	Years	Polic	y Years	Policy Years	
Level	1 - 6	7+	1-6	7+	1-6	7+	1-6 7+	
11	29%	3.5%			29%	3.5%		
TN (all m	arketed plans except Plan N)							
	Age 65+		Under	age 65	Age 65+		Under age 65	
	Policy Yea	rs	Policy	Years	Polic	y Years	Policy Years	
Level	1 - 6	7+	1-6	7+	1 - 6	7+	1-6 7+	
11	24%	3.5%	1.25%	0%	3.5%	0%	1.25% 0%	
TN (Plan	N only)							
	Open Enrollment (OE) and Underwritten (UW)				Guaranteed Issue	e (GI)	
	Plans vary by state - see	product sales kit for plan opt	tions		Plan optio	ns are as require	d by state law	
	Age 65+		Under	age 65	Age	e 65+	Under age 65	
	Policy Yea	rs	Policy	Years	Polic	y Years	Policy Years	
Level	1 - 6	7+	1-6	7+	1-6	7+	1-6 7+	
11	29%	3.5%	1.25%	0%	3.5%	0%	1.25% 0%	
TX (all ma	arketed plans except Plan N)							
	Age 65+		Under	age 65	Age	e 65+	Under age 65	
	Policy Yea	rs	Policy	Years	Polic	y Years	Policy Years	
Level	1 - 7	8+	1-7	8+	1-7	8+	1-7 8+	
11	24%	3.5%	1.25%	0%	1.25%	0%	1.25% 0%	
TX (only	Plan N)							
Plan N is n	not available to Medicare beneficiaries under age (55 in TX.						
	Age 65+		Under	age 65	Age	e 65+	Under age 65	
	Policy Yea	rs	Policy	Years	Polic	y Years	Policy Years	
Level	1-7	8+	1-7	8+	1 - 7	8+	1-7 8+	
11	29%	3.5%			1.25%	0%		
•	arketed plans)							
The Medi	care Part B Deductible rider is non commissionable	in WI.						
	Age 65+		Under			e 65+	Under age 65	
	Policy Yea	rs	Policy	Years	Polic	y Years	Policy Years	
Level	1-6	7+	1-6	7+	1 - 6	7+	1-6 7+	
11	24%	3.5%	12%	1.7%	24%	3.5%	12% 1.7%	

Complementary Health Products Products and benefit options vary by state - see Product Availability Guide for product availability. **Protection Series**

FIOLECLI	UII Series									
Cancer a	Cancer and Heart Attack or Stroke									
Issue Ages						85 1	to 89			
	Policy Year	Policy Years	Policy Years	Policy Years	Policy Year	Policy Years	Policy Years	Policy Years		
Level	1	2 - 3	4 - 10	11+	1	2 - 3	4 - 10	11+		
KS	-		+ 10		-	2 3	+ 10			
11	95%	7.5%	7.5%	3%	75%	2%	2%	0%		
Cancer o	nd Heart	Attack o	r Stroke I	Plus						
Issue Ages			:0 84	145	1	85 1	to 89			
ISSUE Ages	Policy Year		Policy Years	Policy Years	Policy Year	Policy Years	Policy Years	Policy Years		
Level	1	2 - 3	4 - 10	11+	1	2 - 3	4 - 10	11+		
AL, AR, CA*,	GA, IA, ID, IL,	KS, KY, LA, MO	, м ѕ, мт, N	C, NE, NH, NM	, NV, OK, OR,	PA, RI, TN, TX,	VA, WI, WV			
11	95%	7.5%	7.5%	3%	75%	2%	2%	0%		
* in Californi	ia issue ages a	re 18 to 64.								
-	<mark>, МІ, ND, ОН</mark> ,		0			-				
11	90%	3.5%	3.5%	0%	70%	0%	0%	0%		
7	MD, MN, NJ, S		0%	0.0/	E 90/	0%	0%	0%		
11	87%	0%	0%	0%	58%	0%	0%	0%		
Dental V	ision and									
Issue Ages		o 70		:0 89						
	Policy Year	-	-	Policy Years						
Level		2+	1	2+						
		GA, IA, ID, IL, I								
WV, WY	, NE, NH, NV,	OH, OK, OR, P	A, SC, IN, IX,	01, VI, WI,						
11	55%	3.5%	50%	3.5%						
NM										
11	38.5	3.5%	33.5	3.5%						
CO, SD	•									
11	36%	3.5%	31%	3.5%						
Issue Ages	0 to 64	DellaryVeene	65 to 89	Dellas Veras						
Level	Policy Year 1	Policy Years 2 +	Policy Year 1	Policy Years 2 +						
NJ	-	2 '	-	2 '						
11	55%	3.5%	40%	1.5%						
Issue Ages	18 t	o 70	71 t	:o 89						
	-	Policy Years	-	Policy Years						
Level	1	2 +	1	2 +						
RI 11	16%	2 50/	11%	2 50/						
11	16%	3.5%		3.5%						
Dental V	ision and	l Hearing	Plus							
Issue Ages	18 t	o 70		:o 89						
Level	Policy Year 1	Policy Years 2 +	Policy Year 1	Policy Years 2 +						
		GA, IA, ID, IL, I								
		DK, OR, PA, SC								
11	55%	3.5%	50%	3.5%						
CO, SD 11	36%	3.5%	31%	3.5%						
NV	3070	3.3/0	51/0	3.370						
11	21%	3.5%	16%	3.5%						

Complementary Health Products (continued) Protection Series Lega

Home Care Plus									
Issue Ages	50 to 89								
Level	Policy Year 1	Policy Years 2 - 10	Policy Years 11+						
AL, AR, GA, I	A, ID, IL, IN, K	S, LA, MO, MS	, MT, NC,						
NE, NM, NV,	OH, OK, OR, F	PA, TN, TX, WI	, WV, WY						
11	60%	16%	8%						
AZ, DE, MI, N	D, SC, UT								
11	56%	11%	7.5%						
KY,RI, SD		-							
11	56%	8%	3.75%						
Home Re	ecovery C	are							
Issue Ages		50 to 89							
	Policy Year	Policy Years	Policy Years						
Level	1	2 - 10	11+						
тх									
11	60%	16%	8%						
Hospital	Indemnit	ty Flex							
Issue Ages		18 to 89							
	Policy Year Policy Years Policy Years								
Level	1	2 - 10	11+						
AL, AR, DE, G	iA, ID, IL, IN, K	S, KY, LA, MO	, MS, MT,						
NC, NE, NM,	NV, OH, OK, C	OR, PA, TN, TX	, WI, WV, WY						
11	60%	16%	8%						
AZ, CT, FL, IA	, MA, MD, MI	, ND, NH, SC, U	UT, VA, VT						
11	56%	11%	7.5%						
CO, MN, NJ,	RI, SD, WA								
11	56%	8%	3.75%						
Recovery	y Care								
Issue Ages		50 to 89							
	Policy Year	Policy Years	Policy Years						
Level	1	2 - 10	11+						
	A, ID, IL, IN, L/	A, MO, MS, M	T, NC, NE,						
NH, NV, OH,	ОК, OR, TN, Т	x, wi, wv, wy	,						
11	60%	16%	8%						
AZ, DE, MD, I	MI, SC, UT								
11	56%	11%	7.5%						
CO, KY, RI, SE)	-							
11	56%	8%	3.75%						
ND									

Legacy

Home Care (HC-96)								
Issue Ages	50 to 89							
Level	Policy Year 1	Policy Years 2 - 10	Policy Years 11+					
CO and KY								
11	54%	16%	16%					

Nursing Facility Care (HFN -97)									
Issue Ages	50 to 89								
	Policy Year Policy Years Policy Years								
Level	1 2-10 11+								
PA									
11	60%	16%	8%						

Final Expense

ACC Final Expense

All states where product is available

All states where product is available								
Plan	Level Benefit and Riders				Modified Benefit			
Underwriting Class	Standard, Preferred and Super Preferred*			Super Preferred* Standard				
Issue Ages		40 to 89 40 to 75						
Level(s)	Policy Years				Policy Years			
Lever(s)	1	2 - 5	6 - 10	11+	1	2 - 5	6 - 10	11+
11	130%	8.0%	6%	3%	120%	8.0%	6%	3%

* An additional Super Preferred commission rate of **18%** will apply to **future** commissions that are payable in Policy Year 1 and is calculated on the base policy's commissionable premiums (less any riders). To qualify, the policyholder must have a qualifying underwritten Medicare Supplement policy issued by an Aetna affiliated company (ACC, ACI, CLI, AHIC, AHLIC, ALIC) that is placed in-force within 6 months of the Final Expense policy's coverage effective date.

No commissions on policy fee or policy conversions

CLI Protection Series Final Expense

All states where the product is available

Level Benefit and Riders								
Issue Ages	45 - 89							
	Policy Years							
Level(s)	1	2 - 10	11+					
11	95%	15%	3.75%					
ĆAO A L L	<u> </u>							

\$40 Annual policy fee is commissionable

No commissions paid on conversion policies.

This Schedule becomes effective on the Effective Date below unless you notify Company in writing within 10 days of receiving this Schedule that you do not agree to participate in the NMO program and the terms of this Schedule.

For Home Office Use Only

Chief Marketing Officer

Effective Date