Accendo Insurance Company (ACC)

American Continental Insurance Company (ACI)

Aetna Health Insurance Company (AHIC)

Aetna Health and Life Insurance Company (AHIC)

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 above-named 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 There will be a 100% chargeback if a policy is rescinded and premiums returned.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. 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 | idual Medicare Suppleme | 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 W | (all marketed plans exce | ept Plan N | 1) | | | | | |
| Plans are | not available to Medicare beneficiaries under age | 65 in AL, AZ, IA, ND, NE, NM, N | V, RI, UT, V | VV and WY | | | | | |
| | Open Enrollment (| OE) and Underwritten (UV | V) | | | G | iuaranteed 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+ | 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+ |
| 08 | 22% | 2.5% | | 0.8% | 0% | 0.8% | 0% | 0.8% | 0% |
| | SA, IA, KY, LA, MS, NC, NE, NJ, NV, VA and W | | | | | | | | |
| Plan N is r | not available to Medicare beneficiaries under age (| | VA and W | | | | | | |
| | Age 65+ | | | Under | _ | _ | 65+ | Under | _ |
| | Policy Yea | | | Policy | | | Years _ | Policy | |
| Level | 1-6 | 7+ | | 1-6 | 7+ | 1-6 | 7+ | 1-6 | 7+ |
| 08 | 26% | 2.5% | | 0.8% | 0% | 0.8% | 0% | 0.8% | 0% |
| | narketed plans) not available to Medicare beneficiaries under age | 65 in AK | | | | | | | |
| riulis ule | OE and UW | Guaranteed Issue (| 31) | | | | | | |
| | Age 65+ | Age 65+ | 31) | | | | | | |
| Level | All Policy Years | All Policy Years | | | | | | | |
| 08 | 17.5% | 0.8% | | | | | | | |
| | MT and OR (all marketed plans) | 0.075 | | | | | | | |
| , | Age 65+ | | | Under | age 65 | Age | : 65+ | Under | age 65 |
| | Policy Yea | | | Policy | _ | _ | Years | Policy | _ |
| Level | 1-6 | 7+ | | 1-6 | 7+ | 1-6 | 7+ | 1-6 | 7+ |
| 08 | 22% | 2.5% | | 22% | 2.5% | 22% | 2.5% | 22% | 2.5% |
| DE (all m | arketed plans) | | | | | | | | |
| | Age 65+ | | U65 | Under | age 65 | Age | 65+ | Under | 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+ |
| 08 | 21% | 3% | 0.4% | 0.8% | 0% | 0.8% | 0% | 0.8% | 0% |
| *Commiss | ions for policies issued to Medicare beneficiaries u | nder the age of 65 (U65) with I | End Stage I | Renial Dise | ase (ESRD) | apply for policy year | s 1 through 6 with | no commissio | ns paid |
| thereafte | r. | | | | | | | | |
| FL (all ma | arketed plans) | | | | | | | | |
| | Age 65+ | | | Under | _ | _ | 65+ | Under | _ |
| | Policy Yea | | | Policy | | • | Years | Policy | |
| Level | 1-6 | 7+ | | 1-6 | 7+ | 1-6 | 7+ | 1-6 | 7+ |
| 08 | 20% | 2.25% | | 5% | .40% | 20% | 2.25% | 5% | .40% |
| ID (all m | arketed plans except Plan N) | | | | | | | | |
| | Age 65+ | | | Under | _ | _ | 65+ | Under | _ |
| | Policy Yea | | | Policy | | | Years | Policy | |
| Level | 1-6 | 7+ | | 1-6 | 7+ | 1-6 | 7+ | 1-6 | 7+ |
| 08 ID (Plan | 22% N) | 2.5% | | 22% | 2.5% | 22% | 2.5% | 22% | 2.5% |
| iD (Plan | N) Age 65+ | | | Under | 200 6E | ٨٥٥ | 65+ | Undor | age 65 |
| | Age 65+ Policy Yea | | | Policy | | _ | Years | Policy | _ |
| Level | 1 - 6 | 7+ | | 1-6 | 7+ | 1-6 | 7+ | 1-6 | 7+ |
| 08 | 26% | 2.5% | | 26% | 2.5% | 26% | 2.5% | 26% | 2.5% |
| J 0 | _3/0 | 2.570 | | _3/0 | | _0/0 | _10/0 | _0/0 | , |

Individual Medicare Supplement (continued)

| | idual iviedicare | | ent (continued) | | | | | | | |
|------------------|-------------------------------|-----------------------|-----------------|------------|---------|-----------------|-------|------------------|---------------|-----------------|
| IL (all ma | rketed plans except Plan N | • | 11. 1 | | | . 00. | | - 65. | | |
| | Ages 65 to | | Under age 65 | | _ | 80+ | _ | es 65+ | | age 65 |
| | Policy Yea | | Policy Years | - . | | Years | | y Years | | Years |
| Level | 1 - 6 | 7+ | 1-6 | 7+ | 1-6 | 7+ | 1-6 | 7+ | 1-6 | 7+ |
| 08 IL (only F | 22% Plan NI) | 2.5% | 10.5% | 1.4% | 10.5% | 1.4% | 0.8% | 0% | 0.8% | 0% |
| IL (OTTY) | Ages 65 to | 79 | Under age 65 | | Age | s 80+ | Age | es 65+ | Under | age 65 |
| | Policy Yea | | Policy Years | | _ | Years | _ | y Years | | Years |
| Level | 1-6 | 7+ | 1-6 | 7+ | 1-6 | 7+ | 1-6 | 7+ | 1-6 | 7+ |
| 08 | 26% | 2.5% | 13% | 1.4% | 13% | 1.4% | 0.8% | 0% | 0.8% | 0% |
| IN (all ma | arketed plans) | | | | - | | | | | • |
| Part B Dec | ductible premium is commissio | nable in IN. | | | | | | | | |
| | | 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+ |
| 08 | 22% | | 0% | | 0.8% | 0% | 22% | 0% | 0.8% | 0% |
| KS and N | /ID (all marketed plans exc | <u> </u> | | | | | | | | |
| | | Age 65+ | | | | age 65 | | e 65+ | | age 65 |
| | 4.6 | Policy Yea | | | | Years | | y Years | | Years |
| Level 08 | 1-6 | | 7+ | | 1-6 | 7+ | 1 - 6 | 7+ | 1-6 | 7+ |
| | 22% /ID (only Plan N) | | 2.5% | | 22% | 2.5% | 0.8% | 0% | 0.8% | 0% |
| KS allu K | (Offig Flatt N) | Age 65+ | | | Under | age 65 | Δσι | e 65+ | Under | age 65 |
| | | Policy Yea | rs | | - | Years | _ | v Years | | Years |
| Level | 1-6 | . oney rea | .s 7+ | | 1-6 | 7+ | 1 - 6 | 7+ | 1-6 | 7+ |
| 08 | 26% | | 2.5% | | 26% | 2.5% | 0.8% | 0% | 0.8% | 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 | Years |
| Level | 1-3 | | 4+ | | 1 - 3 | 4+ | 1 - 3 | 4+ | 1 - 3 | 4+ |
| 08 | 29% | | 4.5% | | | | 0.8% | 0% | | |
| MI (only | Plan N) | | | | | | | | | |
| | | Age 65+ | | | | age 65 | _ | e 65+ | | age 65 |
| Lovel | 1-3 | Policy Yea | rs 4+ | | 1 - 3 | Years 4+ | 1 - 3 | y Years 4+ | 1 - 3 | Years 4+ |
| Level 08 | 34% | | 4.5% | | 1-3 | 41 | 0.8% | 0% | 1-3 | 41 |
| | marketed plans) | | 4.370 | | | | 0.070 | 070 | | <u> </u> |
| ivio (alli | narketea plans, | Age 65+ | | | Under | age 65 | Age | e 65+ | Under | age 65 |
| | | Policy Yea | rs | | | Years | | y Years | | Years |
| Level | 1-6 | • | 7+ | | 1-6 | 7+ | 1-6 | 7+ | 1-6 | 7+ |
| 08 | 22% | | 2.5% | | 22% | 2.5% | 0.8% | 0% | 0.8% | 0% |
| OH (all m | narketed plans except Plan | N) | | | | | | | | |
| Plans are | not available to Medicare bei | | 65 in OH. | | | | | | | |
| | | Age 65+ | | | | age 65 | _ | e 65+ | | age 65 |
| | | Policy Yea | | | | Years | | y Years | | Years |
| Level | 1-7 | | 8+ | | 1 - 7 | 8+ | 1-7 | 8+ | 1 - 7 | 8+ |
| 08 | 20% | | 0% | | | | 0.8% | 0% | | |
| OH (only | reian N) | A == CE : | | | Hander. | 200 65 | | - 6F I | l local - · · | 200 (5 |
| | | Age 65+ Policy Yea | re | | | age 65 Years | _ | e 65+ y Years | | age 65 Years |
| Level | 1-7 | Folicy rea | rs 8+ | | 1 - 7 | rears 8+ | 1 - 7 | y rears 8+ | 1 - 7 | rears 8+ |
| 08 | 25% | | 0% | | | <u> </u> | 0.8% | 0% | | J. |
| JU | 23/0 | | 0/0 | | | | 0.070 | 0,0 | | |

Individual Medicare Supplement (continued)

| | narketed plans except Plan N) | ent (continued) | | | | |
|-----------------|---|----------------------------------|--------------|------------|--------------------|----------------|
| · | 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+ |
| 08 | 22% | 2.5% | 2.25% 0% | 0.8% | 0% | 0.8% 0% |
| PA (only | Plan N) | | | | | |
| | 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+ |
| 08 | 26% | 2.5% | 2.25% 0% | 0.8% | 0% | 0.8% 0% |
| SC (all m | 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+ |
| 08 | 22% | 2.5% | | 22% | 2.5% | |
| SC (only | Plan N) | | | | | |
| | 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+ |
| 08 | 26% | 2.5% | | 26% | 2.5% | |
| TN (all m | narketed plans except Plan N) | | | | | |
| | 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+ |
| 08 | 22% | 2.5% | 0.8% 0% | 2.5% | 0% | 0.8% 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 optio | ns | Plan optio | ons are as require | d by state law |
| | Age 65+ | | Under age 65 | Ag | e 65+ | Under age 65 |
| | Policy Yea | | Policy Years | Polic | y Years | Policy Years |
| Level | 1-6 | 7+ | 1-6 7+ | 1-6 | 7+ | 1-6 7+ |
| 08 | 26% | 2.5% | 0.8% 0% | 2.5% | 0% | 0.8% 0% |
| TX (all m | arketed plans except Plan N) | | | | | |
| | Age 65+ | | Under age 65 | Ag | 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+ |
| 08 | 22% | 2.5% | 0.8% 0% | 0.8% | 0% | 0.8% 0% |
| TX (only | Plan N) | | | | | |
| Plan N is i | not available to Medicare beneficiaries under age (| 55 in TX. | | | | |
| | Age 65+ | | Under age 65 | _ | e 65+ | Under age 65 |
| | Policy Yea | | Policy Years | | y Years | Policy Years |
| Level | 1 - 7 | 8+ | 1-7 8+ | 1-7 | 8+ | 1 - 7 8+ |
| 08 | 26% | 3% | | 0.8% | 0% | |
| • | narketed plans) | | | | | |
| The Medi | icare Part B Deductible rider is non commissionable | | | - | | |
| | Age 65+ | | Under age 65 | | e 65+ | Under age 65 |
| | Policy Yea | | Policy Years | | y Years | Policy Years |
| Level | 1-6 | 7+ | 1-6 7+ | 1-6 | 7+ | 1-6 7+ |
| 08 | 22% | 3% | 10.5% 1.4% | 22% | 2.5% | 10.5% 1.4% |

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

| Cancer and Heart Attack or Stroke | | | | | | | | |
|-----------------------------------|---|-------|--------|------|-----|--------------|--------|-----|
| Issue Ages | es 18 to 84 85 to 89 | | | | | | | |
| | Policy Year Policy Years Policy Years Policy Years Policy Year Policy Years Policy Years Policy Years | | | | | Policy Years | | |
| Level | 1 | 2 - 3 | 4 - 10 | 11+ | 1 | 2 - 3 | 4 - 10 | 11+ |
| KS | KS | | | | | | | |
| 08 | 80% | 6% | 6% | 1.5% | 60% | 1.25% | 1.25% | 0% |

| Cancer a | Cancer and Heart Attack or Stroke Plus | | | | | | | | |
|----------------|--|---------------------|---------------------|---------------------|-------------|-----------------|---------------------|--------------|--|
| Issue Ages | | 18 t | o 84 | | | 85 t | 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+ | |
| AL, AR, CA*, | GA, IA, ID, IL, | KS, KY, LA, MO | O, MS, MT, NC | , NE, NH, NM, | NV, OK, OR, | PA, RI, TN, TX, | VA, WI, WV | | |
| 08 | 80% | 6% | 6% | 1.5% | 60% | 1.25% | 1.25% | 0% | |
| * in Californi | a issue ages ai | re 18 to 64. | | • | | | | | |
| AZ, DE, FL, IN | , MI, ND, OH, | SC, UT, VT | | | | | | | |
| 08 | 08 75% 2% 2% 0% 55% 0% 0% 0% | | | | | | | | |
| CO, CT, MA, I | CO, CT, MA, MD, MN, NJ, SD, WA, WY | | | | | | | | |
| 08 | 75% | 0% | 0% | 0% | 50% | 0% | 0% | 0% | |

| Dental V | Dental Vision and Hearing | | | | | | |
|---------------|---------------------------|---------------------|----------------|---------------------|--|--|--|
| Issue Ages | 18 t | o 70 | 71 to 89 | | | | |
| | Policy Year Policy Years | | Policy Year | Policy Years | | | |
| Level | 1 | 1 2+ | | 2 + | | | |
| AL, AR, AZ, C | A, CT, DE, FL, | GA, IA, ID, IL, I | N, KS, KY, LA, | MD, MI, | | | |
| MO, MS, ND | , NE, NH, NV, | OH, OK, OR, P | A, SC, TN, TX, | UT, VT, WI, | | | |
| WV, WY | | | | | | | |
| 08 | 50% | 2% | 45% | 2% | | | |
| NM | | | | , | | | |
| 08 | 32.5 | 2% | 27.5 | 2% | | | |
| CO, SD | _ | _ | _ | | | | |
| 08 | 30% | 2% | 25% | 2% | | | |
| Issue Ages | 0 to 64 | | 65 to 89 | 65 to 89 | | | |
| Level | Policy Year | Policy Years | Policy Year | Policy Years | | | |
| | 1 | 2 + | 1 | 2 + | | | |
| NJ | | | | | | | |
| 08 | 50% | 2% | 36% | 0.75% | | | |
| Issue Ages | 18 t | o 70 | 71 t | o 89 | | | |
| | Policy Year | Policy Years | Policy Year | Policy Years | | | |
| Level | Level 1 2+ 1 2+ | | | | | | |
| RI | | | | | | | |
| 08 | 13% | 2% | 8% | 2% | | | |

| Dental Vision and Hearing Plus | | | | | | | |
|--|-----------------------------|-----------------|-----------------|-------------|--|--|--|
| Issue Ages | ssue Ages 18 to 70 71 to 89 | | | | | | |
| Policy Year Policy Years Policy Year Policy Year | | | | | | | |
| Level | 1 | 2 + | 1 | 2 + | | | |
| AL, AR, AZ, C | A, CT, DE, FL, | GA, IA, ID, IL, | IN, KS, KY, LA, | MI, MO, MS, | | | |
| ND, NE, NH, | NJ, NM, OH, C | OK, OR, PA, SC | , TN, TX, UT, V | T, WI, WV, | | | |
| 08 | 50% | 2% | 45% | 2% | | | |
| CO, SD | | | | | | | |
| 08 30% 2% 25% 2% | | | | | | | |
| NV | | | | | | | |
| 08 | 08 19% 2% 14% 2% | | | | | | |

Complementary Health Products (continued) Protection Series Legacy

| Home Care Plus | | | | | | | | |
|----------------|------------------|---|-----------|--|--|--|--|--|
| Issue Ages | | 50 to 89 | | | | | | |
| | Policy Year | Policy Year Policy Years Policy Years | | | | | | |
| Level | 1 | 2 - 10 | 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 | | | | | |
| 08 | 50% | 12% | 6% | | | | | |
| AZ, DE, MI, N | D, SC, UT | | | | | | | |
| 08 | 08 50% 6% 5% | | | | | | | |
| KY,RI, SD | KY,RI, SD | | | | | | | |
| 08 | 50% | 5% | 2.5% | | | | | |

| Home Recovery Care | | | | | | | |
|--------------------|---------------------------------------|--------|-----|--|--|--|--|
| Issue Ages | Issue Ages 50 to 89 | | | | | | |
| | Policy Year Policy Years Policy Years | | | | | | |
| Level | 1 | 2 - 10 | 11+ | | | | |
| TX | TX | | | | | | |
| 08 50% 12% 6% | | | | | | | |

| Hospital Indemnity Flex | | | | | | | |
|-------------------------|------------------------|---------------------|---------------------|--|--|--|--|
| Issue Ages | | 18 to 89 | | | | | |
| | Policy Year | Policy Years | Policy Years | | | | |
| Level | 1 | 2 - 10 | 11+ | | | | |
| AL, AR, DE, G | A, ID, IL, IN, K | S, KY, LA, MO | , MS, MT, | | | | |
| NC, NE, NM, | NV, OH, OK, C | OR, PA, TN, TX | , WI, WV, WY | | | | |
| 08 | 50% | 12% | 6% | | | | |
| AZ, CT, FL, IA | , MA, MD, MI | , ND, NH, SC, | UT, VA, VT | | | | |
| 08 | 08 50% 6% 5% | | | | | | |
| CO, MN, NJ, | CO, MN, NJ, RI, SD, WA | | | | | | |
| 08 | 50% | 5% | 2.5% | | | | |

| Recovery Care | | | | | | | |
|----------------|-------------------|---------------------|---------------------|--|--|--|--|
| Issue Ages | | 50 to 89 | | | | | |
| | Policy Year | Policy Years | Policy Years | | | | |
| Level | 1 | 2 - 10 | 11+ | | | | |
| AL, AR, GA, I | A, ID, IL, IN, LA | A, MO, MS, M | T, NC, NE, | | | | |
| NH, NV, OH, | OK, OR, TN, T | X, WI, WV, W | 1 | | | | |
| 08 | 50% | 12% | 6% | | | | |
| AZ, DE, MD, | MI, SC, UT | | | | | | |
| 08 | 50% | 6% | 5% | | | | |
| CO, KY, RI, SI | CO, KY, RI, SD | | | | | | |
| 08 50% 5% 2.5% | | | | | | | |
| ND | ND | | | | | | |
| 08 | 11% | 1.75% | 1.75% | | | | |

| Home Care (HC-96) | | | | | | |
|-------------------|------------------|------------------------|---------------------|--|--|--|
| Issue Ages | | 50 to 89 | | | | |
| Level | Policy Year 1 | Policy Years 2 - 10 | Policy Years 11+ | | | |
| CO and KY | | | | | | |
| 08 | 50% | 12% | 12% | | | |

| Nursing Facility Care (HFN -97) | | | | |
|---------------------------------|-------------|---------------------|--------------|--|
| Issue Ages | 50 to 89 | | | |
| | Policy Year | Policy Years | Policy Years | |
| Level | 1 | 2 - 10 | 11+ | |
| PA | | | | |
| 08 | 50% | 12% | 6% | |

Final Expense

| ACC Final Ex | • | | | | | | | |
|---------------------------------------|--|-------|------------------|----------|------|-------|--------|-------|
| All states where product is available | | | | | | | | |
| Plan | Level Benefit and Riders | | Modified Benefit | | | | | |
| Underwriting Class | Standard, Preferred and Super Preferred* | | | Standard | | | | |
| Issue Ages | 40 to 89 | | | 40 to 75 | | | | |
| Lovel/s) | Policy Years | | Policy Years | | | | | |
| Level(s) | 1 | 2 - 5 | 6 - 10 | 11+ | 1 | 2 - 5 | 6 - 10 | 11+ |
| 08 | 115% | 7% | 5.25% | 2.25% | 105% | 7% | 5.25% | 2.25% |

^{*} 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+ | |
| 8 | 89% | 14.50% | 3.25% | |

\$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 | | |
|--------------------------|----------------|--|
| | | |
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| | | |
| Chief Marketing Officer | Effective Date | |