

"I NEED A QUOTE" FOR IMMEDIATE ASSISTANCE, CALL 800-842-7799

Normal / Prepare by End of Next Business Day

Please call me to discuss my case.

Agent Name _____

(Please circle your contact preference)

PHONE

FAX

EMAIL

TELL US ABOUT YOUR CLIENT(S)

Appointment Date & Time _____ State _____ Previous Decline Self Spouse

Name _____ DOB _____ HT _____ WT _____ Smoker Yes No

Spouse's Name (if applying) _____ DOB _____ HT _____ WT _____ Smoker Yes No

Health History Within Last 5 Years (by applicant) _____

Medications including dosage and length of treatment (by applicant) _____

OPTION 1 - Design A Plan Within Client's Budget

Client can spend up to \$ _____ per month for: Self & Spouse Self Only

OR

OPTION 2 - Quote On Plan With Following Benefits & Options

Carrier Preference United of Omaha - Combination of CASH-FIRST & Reimbursement Benefits

Other _____ Most Competitive

CASH-FIRST PLAN

Monthly Cash Benefit in \$200 increments \$ _____ Maximum Monthly Benefit (MMB) (2.5 x Cash Benefit)

Maximum Lifetime Benefit \$ _____ (\$50,000 to \$500,000 in \$25,000 increments) See grid on next page.

Reimbursement Benefits (% of MMB) Nursing Home 100% Basic HHC 100% Prof HHC 200%

Assisted Living 50% 60% 70% 75% 80% 100%

Built In: Additional Benefit for Injury/Return of Premium to 65

OR

ASSURED SOLUTIONS GOLD PLAN

Maximum Monthly Benefit in \$500 increments \$ _____

Maximum Lifetime Benefit (Years) 2 3 4 5 6 8 Lifetime

Reimbursement Benefits (% of MMB) Nursing Home 100% Basic/Prof HHC 100% 75% 50%

Assisted Living 50% 75% 100% Standard Cash Benefit = 40% of HHC

OTHER OPTIONS (APPLIES TO CASH-FIRST & ASSURED SOLUTIONS GOLD)

Calendar Day Elimination Period 0 30 60 90 180 365 Waive for Home Health Care

Increase Cash Benefit from 40% to 50% of Basic HHC

Inflation Protection Options: 5% Compound Lifetime 20 Years Maximum Increase 2x 3x 4x

Lifetime Compound with Buy Up Option 4.5% 4% 3.5% 3% 5% Simple

None with Future Purchase Option

Spouse Related Options Shared Care Survivorship Waiver of Premium Spouse Security (Benefits for Uninsured Spouse)

Extended Built-In Five Year Rate Guarantee to (Years) 6 7 8 9 10

Return of Premium Less Claims Full (only available with CASH-FIRST) Restoration of Benefits

Premium Options Lifetime Single 10 Year 20 Year Pay to Age 65

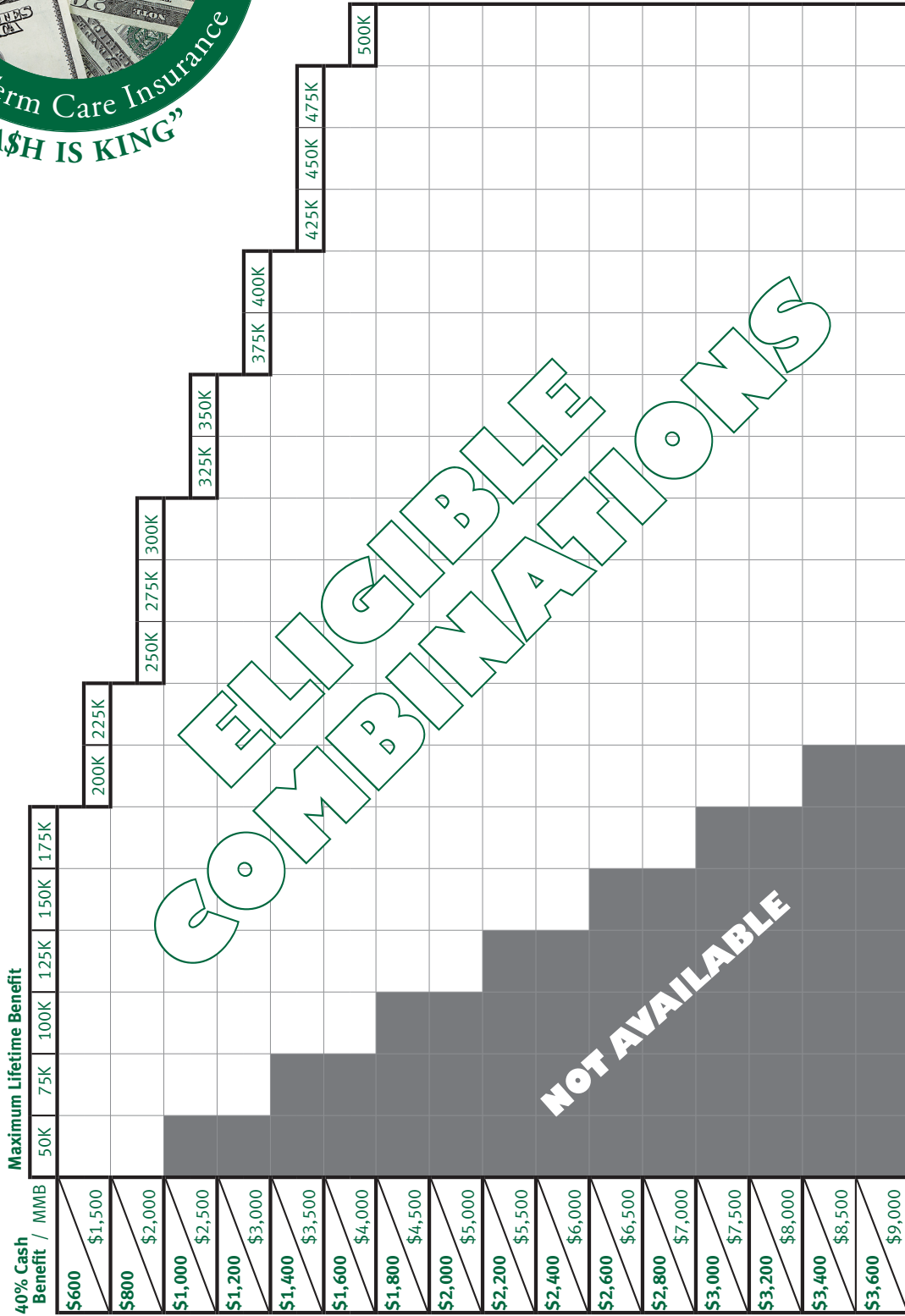
Flex to Age 85 70% 80% 90% (% of premium payable in first year)

Benefits and options may vary by carrier and state.

FAX COMPLETED FORM TO 866-863-8608



Reference Grid



COMBINATION

NOT AVAILABLE

