CRITICAL ILLNESS SUPPLEMENTAL HEALTH INSURANCE

#### CRITICAL ILLNESS CANCER ONLY - OPTION A ANNUAL PREMIUMS

## Base premium rates1

Policy form CIC1039

FOR EACH \$10,000 LUMP-SUM INCREMENT:

Issue age	Nontobacco	Tobacco
18-39	\$49.20	\$73.20
40-49	\$115.20	\$170.40
50-59	\$198.00	\$292.80
60-64	\$273.60	\$404.40
65-69	\$318.00	\$469.20
70-74	\$351.60	\$519.60
75-79	\$373.20	\$552.00
80-85	\$386.40	\$571.20
CHILD(REN) <sup>2</sup>	\$12.00	\$12.00

## Premium rates with Cash Value<sup>1</sup>

Policy form CIC1039 (ROP form R1022CV)

FOR EACH \$10,000 LUMP-SUM INCREMENT:

Issue age	Nontobacco	Tobacco
18-39	\$88.80	\$130.80
40-49	\$210.00	\$309.60
50-59	\$349.20	\$514.80
60-64	\$493.20	\$727.20
65-69	\$572.40	\$843.60
70-74	\$633.60	\$936.00
CHILD(REN) <sup>2</sup>	\$21.60	\$21.60

#### CRITICAL ILLNESS CANCER ONLY - OPTION B ANNUAL PREMIUMS

ADD THIS FLAT RATE TO YOUR OPTION A TOTAL FOR EACH INDIVIDUAL

## Base premium rates1

Policy form CIC1039

FOR PLAN B INDEMNITY BENEFITS (LUMP-SUM NOT INCLUDED):

Issue age	Nontobacco	Tobacco
18-39	\$64.80	\$76.80
40-49	\$97.20	\$124.80
50-59	\$130.80	\$174.00
60-64	\$157.20	\$211.20
65-69	\$165.60	\$223.20
70-74	\$180.00	\$243.60
75-79	\$192.00	\$260.40
80-85	\$196.80	\$268.80
CHILD(REN)	\$6.00	\$6.00

## Premium rates with Cash Value<sup>1</sup>

Policy form CIC1039 (ROP form R1022CV)

FOR PLAN B INDEMNITY BENEFITS (LUMP-SUM NOT INCLUDED):

Issue age	Nontobacco	Tobacco
18-39	\$115.20	\$138.00
40-49	\$175.20	\$225.60
50-59	\$234.00	\$309.60
60-64	\$283.20	\$380.40
65-69	\$298.80	\$402.00
70-74	\$324.00	\$438.00
CHILD(REN)	\$10.80	\$10.80

### CRITICAL ILLNESS WITHOUT CANCER - OPTION A ANNUAL PREMIUMS

#### Base premium rates1

Policy form CIC1039

FOR EACH \$10,000 LUMP-SUM INCREMENT:

Issue age	Nontobacco	Tobacco
18-39	\$30.00	\$44.40
40-49	\$68.40	\$100.80
50-59	\$111.60	\$164.40
60-64	\$139.20	\$205.20
65-69	\$154.80	\$228.00
70-74	\$180.00	\$266.40
75-79	\$207.60	\$307.20
80-85	\$234.00	\$345.60
CHILD(REN) <sup>2</sup>	\$6.00	\$6.00

### Premium rates with Cash Value<sup>1</sup>

Policy form CIC1039 (ROP form R1022CV)

FOR EACH \$10,000 LUMP-SUM INCREMENT:

Issue age	Nontobacco	Tobacco
18-39	\$54.00	\$78.00
40-49	\$122.40	\$181.20
50-59	\$199.20	\$292.80
60-64	\$250.80	\$370.80
65-69	\$278.40	\$410.40
70-74	\$325.20	\$480.00
CHILD(REN) <sup>2</sup>	\$10.80	\$10.80
CITIED (NEIV)	<b>\$10.00</b>	\$10.00

# **CRITICAL ILLNESS WITHOUT CANCER - OPTION B ANNUAL PREMIUMS**

ADD THIS FLAT RATE TO YOUR OPTION A TOTAL FOR EACH INDIVIDUAL

#### Base premium rates1

Policy form CIC1039

FOR PLAN B INDEMNITY BENEFITS (LUMP-SUM NOT INCLUDED):

Nontobacco	Tobacco
\$46.80	\$50.40
\$62.40	\$74.40
\$81.60	\$102.00
\$99.60	\$128.40
\$109.20	\$141.60
\$127.20	\$169.20
\$145.20	\$194.40
\$150.00	\$202.80
\$3.60	\$3.60
	\$46.80 \$62.40 \$81.60 \$99.60 \$109.20 \$127.20 \$145.20 \$150.00

### Premium rates with Cash Value<sup>1</sup>

Policy form CIC1039 (ROP form R1022CV)

FOR PLAN B INDEMNITY BENEFITS (LUMP-SUM NOT INCLUDED):

Issue age	Nontobacco	Tobacco
18-39	\$82.80	\$91.20
40-49	\$111.60	\$133.20
50-59	\$146.40	\$182.40
60-64	\$178.80	\$231.60
65-69	\$195.60	\$255.60
70-74	\$229.20	\$303.60
CHILD(REN)	\$6.00	\$6.00

CRITICAL ILLNESS SUPPLEMENTAL HEALTH INSURANCE

## **CRITICAL ILLNESS WITH CANCER – OPTION A ANNUAL PREMIUMS**

## Base premium rates1

Policy form CIC1039

FOR EACH \$10,000 LUMP-SUM INCREMENT:

Issue age	Nontobacco	Tobacco
18-39	\$76.80	\$112.80
40-49	\$176.40	\$259.20
50-59	\$294.00	\$434.40
60-64	\$392.40	\$579.60
65-69	\$448.80	\$661.20
70-74	\$506.40	\$746.40
75-79	\$554.40	\$817.20
80-85	\$594.00	\$876.00
CHILD(REN) <sup>2</sup>	\$18.00	\$18.00

# Premium rates with Cash Value<sup>1</sup>

Policy form CIC1039 (ROP form R1022CV)

FOR EACH \$10,000 LUMP-SUM INCREMENT:

<b>Issue age</b> 18-39 40-49	<b>Nontobacco</b> \$136.80 \$318.00	<b>Tobacco</b> \$200.40 \$469.20
50-59	\$520.80	\$769.20
60-64	\$706.80	\$1,042.80
65-69	\$806.40	\$1,191.60
70-74	\$910.80	\$1,344.00
CHILD(REN) <sup>2</sup>	\$32.40	\$32.40

## **CRITICAL ILLNESS WITH CANCER – OPTION B ANNUAL PREMIUMS**

ADD THIS FLAT RATE TO YOUR OPTION A TOTAL FOR EACH INDIVIDUAL

# Base premium rates<sup>1</sup>

Policy form CIC1039

FOR PLAN B INDEMNITY BENEFITS (LUMP-SUM NOT INCLUDED):

Issue age	Nontobacco	Tobacco
18-39	\$109.20	\$127.20
40-49	\$158.40	\$198.00
50-59	\$212.40	\$274.80
60-64	\$255.60	\$338.40
65-69	\$273.60	\$363.60
70-74	\$306.00	\$411.60
75-79	\$334.80	\$453.60
80-85	\$345.60	\$470.40
CHILD(REN)	\$8.40	\$8.40

## Premium rates with Cash Value<sup>1</sup>

Policy form CIC1039 (ROP form R1022CV)

FOR PLAN B INDEMNITY BENEFITS (LUMP-SUM NOT INCLUDED):

Issue age	Nontobacco	Tobacco
18-39	\$195.60	\$226.80
40-49	\$285.60	\$356.40
50-59	\$378.00	\$489.60
60-64	\$459.60	\$608.40
65-69	\$492.00	\$655.20
70-74	\$550.80	\$740.40
CHILD(REN)	\$15.60	\$15.60

#### **HEIGHT AND WEIGHT CHART**

Height	Minimum	Maximum
Up to 4'10	79	199
4'11	81	205
5'0	84	212
5'1	86	220
5'2	90	227
5'3	93	234
5'4	96	242
5'5	98	249
5'6	101	257
5'7	104	265
5'8	107	273
5'9	110	281
5'10	113	289
5'11	116	298
6'0	120	306
6'1	124	315
6'2	127	323
6'3	131	332
6'4	134	341
6'5	137	350
6'6	141	359
6'7	145	368
6'8	148	378
6'9 or taller	152	387

THIS CHART IS NOT A REQUIREMENT FOR CRITICAL ILLNESS CANCER ONLY COVERAGE.

#### DIRECT:

SEMI-ANNUALLY = 0.5 \* ANNUAL | MONTHLY PAC = 0.08333 \* ANNUAL

#### **PAYROLL:**

09-PAY = 0.11111 \* ANNUAL 24-PAY = 0.04167 \* ANNUAL 10-PAY = 0.1 \* ANNUAL 26-PAY = 0.03846 \* ANNUAL 13-PAY = 0.07692 \* ANNUAL 52-PAY = 0.01923 \* ANNUAL

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Conseco Insurance Company Administrative Office 11825 N. Pennsylvania Street Carmel, IN 46032

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<sup>&</sup>lt;sup>1</sup> Total premium must be greater than or equal to \$180.00/yr.

<sup>&</sup>lt;sup>2</sup> Coverage for child(ren) is a \$10,000 lump-sum, regardless of adult lump-sum amount.